

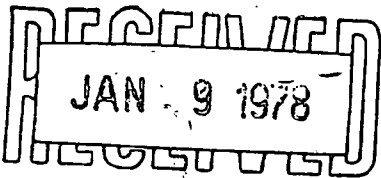
# 11 Palm Road

**778**

**SINGLE FAMILY RESIDENCE**

TOWN OF SEWALL'S POINT, FLORIDA

APPLICATION FOR BUILDING PERMIT



Permit No. 778  
Date 1/17/78

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

11515 LeHavre Dr.

Owner Amos Taylor Present Address Potomac, Maryland Ph 301-654-2604

General Contractor Jensen Dev, Inc. Address 1958 Ricca Terrace Ph 334-2155  
Jensen South

Where licensed Martin County License No. 95

Plumbing Contractor \_\_\_\_\_ License No. \_\_\_\_\_  
Electrical Contractor \_\_\_\_\_ License No. \_\_\_\_\_

Street building will front on 11 Palm Road

Subdivision Palm Row Lot No. 11 Area 15050 Sq. Ft.

Building area, inside walls (excluding garage, carport, porches) Sq ft 2280

Other Construction (Pools, additions, etc.) Pool? - NO

Contract Price (excluding land, rugs, appliances, landscaping) \$ 60,805.00

Total cost of permit \$ 325.00

68  
21  
30  
20

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

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

Thomas S. Smith, PRES  
Signed by General Contractor

**WE HAVE INS. + CONTR. LIC.**  
1/19/78

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

Amos Taylor By: Thomas Smith  
Signed by Owner

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

TOWN RECORD

Date submitted \_\_\_\_\_

Date approved 1/17/78 Amos Taylor

Certificate of Occupancy issued 6/29/78 Date \_\_\_\_\_

#778

①

This Warranty Deed Made the **FIRST** day of September A. D. 19 76 by

ROBERT H. WILLIAMS AND GRACE E. WILLIAMS, HIS WIFE  
hereinafter called the grantor, to

AMOS TAYLOR, JR. AND ELAINE TAYLOR, HIS WIFE

whose postoffice address is 11515 Le Havre Drive, Potomac, MD  
hereinafter called the grantee:

RECORDED  
JAN 9 1978

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

**Witnesseth:** That the grantor, for and in consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in MARTIN County, Florida, viz:

Lot 11, PALM ROW, according to the Amended and Revised Plat of Palm Row, as recorded in the office of the Clerk of the Circuit Court in and for Martin County, Florida, in Plat Book 4, Page 68, Public Records.

Subject to restrictions, reservations and easements of record and zoning regulations, if any.

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

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

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 19 75.

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:

③ *Sara M. Jaber*  
WITNESS  
④ *Frank H. Klein*  
WITNESS

② *Robert H. Williams*  
ROBERT H. WILLIAMS  
② *Grace E. Williams*  
GRACE E. WILLIAMS

④ STATE OF ~~XXXXXX~~ *New Jersey*  
COUNTY OF ~~XXXXXX~~ *Ocean*

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

ROBERT H. WILLIAMS AND GRACE E. WILLIAMS, HIS WIFE

to me known to be the person 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 **First** day of September, A. D. 19 76

⑤ *Frank H. Klein*  
NOTARY PUBLIC

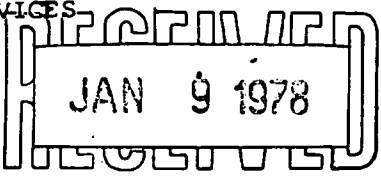
This instrument prepared by  
FRANK H. KLEIN  
Address: NOTARY PUBLIC OF NEW JERSEY  
My Commission Expires June 18, 1978

⑥ (SEAL)  
⑦ My commission expires:

SPACE BELOW FOR RECORDERS USE  
This instrument was prepared by  
*Judith E. Rowell*  
CHELSEA TITLE & GUARANTY CO.  
P. O. Box 1152, Stuart, Florida  
as a necessary incident to the fulfillment of conditions contained in a Title Insurance Commitment issued by it.  
O. R. BOOK 406 PAGE 1695  
# 778

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

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



Section I - Instructions:

1. Percolation test data, soil profile and water table elevation information must be attached. (Note: Test must be made at proposed location of system).
2. Existing building and proposed buildings on lot must be shown and drawn to scale at their location or proposed location. (Use block on this sheet or attach plot plan).
3. Proposed location of septic tank must be shown on plan.
4. Any pond or stream areas must be indicated on the plan.
5. Indicate name and date of recording of subdivision. If not recorded, attach metes and bounds description.
6. Complete the following information section.

Notes:

1. Not valid if sewer is available.
2. Individual well must be 75 feet from any part of system.
3. Call 207-2277 and give this office a 24-hour notice when ready for inspection.

Section II - Information:

1. Property Address (Street & House No.)  
Lot 11 Block - Subdivision Palm Row  
Date Recorded 1959 Directions to Job East on East Ocean Blvd; to Sewalls Point Rd; South in Palm Road; West to site
2. Owner or Builder Tom Smith  
P.O. Address 2301 City Spurtt
3. Specifications

Tank	Drainfield
<u>900</u> Gals.	ft. of 6" clay tile or 5" perforated plastic drain in a
<u>900</u> Gals.	ft. of 4" clay drain or 4" perforated plastic drain in an
	<u>24</u> " trench

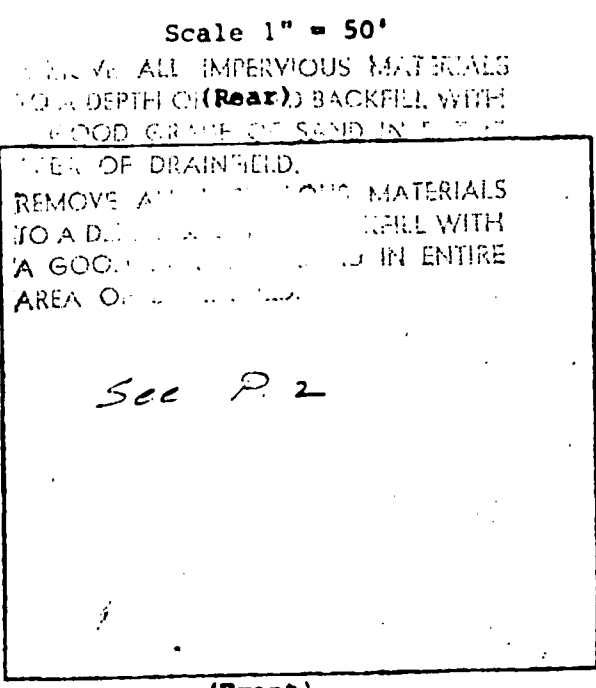
4. House to be constructed:  
Check one:  FHA  VA  Conventional

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

Applicant: Tom Smith  
Please Print

Signature: Tom Smith

Date: 1-3-78



(Name of Street or State Rd.) (Side)

(Name of Street or State Rd.) (Side)

(Front) (Name of Street or State Road)

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

Section III - Application Approval & Construction Authorization

Installation subject to following special conditions:

The above signed application has been found to be in compliance with Chapter 17-13, Florida Administrative Code, and construction is hereby approved, subject to the above specifications and conditions.  
By: John S. Collier, Jr. County Health Dept. Martin Date 1/6/78

Section IV - Final Construction Approval

Construction of installation approved:  Yes  No

Date: \_\_\_\_\_ By: \_\_\_\_\_  
FHA No. \_\_\_\_\_ VA No. \_\_\_\_\_

# 778

FLORIDA DEPARTMENT OF POLLUTION CONTROL

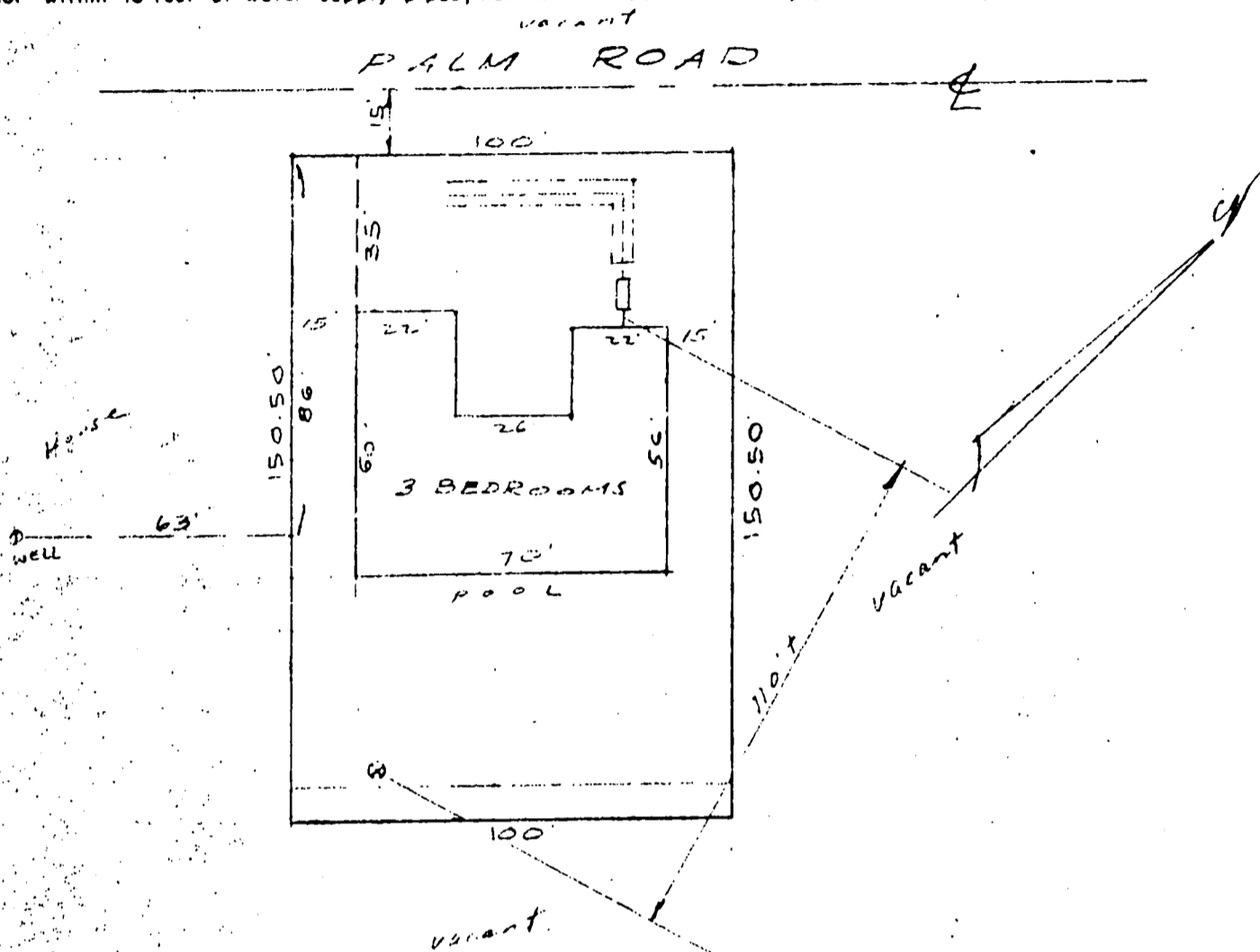
S. E. Subregion  
 806 South 6th Street  
 Fort Pierce, Florida 33450  
 Tel (305) 464-8525

INDIVIDUAL SEWAGE DISPOSAL FACILITIES

DATA SHEET

Location: Lot 11, Palm Row Applicant: Tom Smith  
 County: Martin

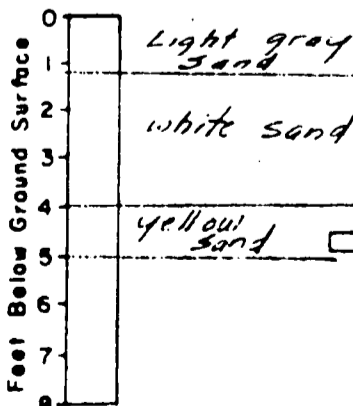
**NOTE:** This septic tank system is not located within 50 feet of the high water line of a lake, stream, canal or other waters, nor within 75 feet of any private well; nor within 100 feet of any public water supply; nor within 10 feet of water supply pipes; nor within 100 feet of any public sewer system.



NOTE: City Water

PLAN  
 Scale: 1" = 40'

SOIL DATA



LEGEND

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

SOIL BORING LOG

Soil Identification: CLASS 1 GROUP SP  
 Soil Characteristics \_\_\_\_\_

Percolation Rate 20 sec. mm/inch

Water Table Depth 5'

Water Table Depth During Wet Season 5'

Compacted Fill Of — Req'd

Compacted Fill Checked By: \_\_\_\_\_

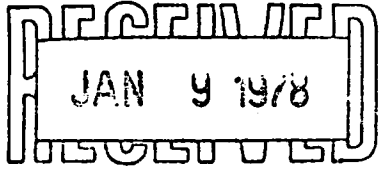
Date \_\_\_\_\_

CERTIFIED BY: [Signature]

FLORIDA PROFESSIONAL No. 1272

Date 1-3-78 Job No. \_\_\_\_\_

Sheet 2 of 2



TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 1/9/78

This is to request that a Certificate of Approval for Occupancy be issued to A Jensen Development Inc.

For property built under Permit No. \_\_\_\_\_ Dated \_\_\_\_\_

when completed in conformance with the Approved Plans.

Signed Thomas L. Phillips

\*\*\*\*\*

RECORD OF INSPECTIONS

Item \_\_\_\_\_ Date \_\_\_\_\_ Approved by \_\_\_\_\_

- Footings
- Rough plumbing
- Perimeter beam
- Rough electric
- Close in
- Final plumbing
- Final electric

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector \_\_\_\_\_ date

Approved by Town Commission \_\_\_\_\_ date

Utilities notified \_\_\_\_\_ date

Original Copy sent to \_\_\_\_\_

(Keep carbon copy for Town files)

#778

TOWN OF SEWALL'S POINT, FLORIDA

APPLICATION FOR BUILDING PERMIT

**RECEIVED**  
JAN 17 1978

Permit No. 781  
Date 1/25/78

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

Owner AMOS TAYLOR Present Address \_\_\_\_\_ Ph \_\_\_\_\_

General Contractor LOUEN POOLS Address 4306 S. US 1 - FT. PIERCE Ph 283-4040

Where licensed MARTIN Co License No. 245

Plumbing Contractor \_\_\_\_\_ License No. \_\_\_\_\_

Electrical Contractor \_\_\_\_\_ License No. \_\_\_\_\_

Street building will front on "PALM ROAD"

Subdivision SEWALLS POINT Lot No. 11 Area \_\_\_\_\_

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

Other Construction (Pools, additions, etc.) POOL

Contract Price (excluding land, rugs, appliances, landscaping) \$ 2700

Total cost of permit \$ 40.00

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

I understand that this permit is good for 12 months from date of issue and that the building must be completed in accordance with the approved plan and that the site be clean and rough-graded within 12 month period.  
Rebit H. Ham CPCO 10400  
Signed by General Contractor

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

Amos Taylor Jr. - By R.C. Cuyper  
Signed by Owner

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

TOWN RECORD

Date submitted \_\_\_\_\_  
Date approved 1/10/78

Certificate of Occupancy issued 1/12/78 Date \_\_\_\_\_

3/3/78

#781

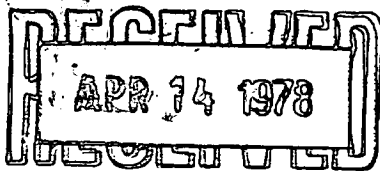


TOWN OF SEWALL'S POINT, FLORIDA

APPLICATION FOR BUILDING PERMIT

Permit No. 822

Date 4/26/78



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

Owner Amos Taylor Present Address 11 Palm Rd Ph \_\_\_\_\_

General Contractor Climatrol Address 529 Industry Rd Ph 727-2600

Where licensed Fla. License No. CR C001786

Plumbing Contractor \_\_\_\_\_ License No. \_\_\_\_\_  
Electrical Contractor \_\_\_\_\_ License No. \_\_\_\_\_

Street building will front on Palm Rd.

Subdivision PALM ROW Lot No. 11 Area \_\_\_\_\_

Building area, inside walls (excluding garage, carport, porches) Sq ft 1040

Other Construction (Pools, additions, etc.) Pool Enclosure

Contract Price (excluding land, rugs, appliances, landscaping) \$ 2400<sup>00</sup>

Total cost of permit \$ 15<sup>00</sup>

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

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

Charles J. Duffin  
Signed by General Contractor

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

\_\_\_\_\_  
Signed by Owner

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

TOWN RECORD

Date submitted 17 April 1978

Date approved 4/19/78

Certificate of Occupancy issued 5/22/78 Date

#822

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

DATE: 05/29/77 FILE NO. CR. C001786 BATCH NO. 300

THE CERTIFIED RESIDENTIAL CONTRACTOR  
NAMED BELOW IS CERTIFIED  
UNDER THE PROVISIONS OF CHAPTER 468 FOR  
THE YEAR EXPIRING JUNE 30, 1979

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

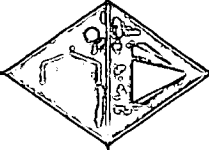
*Reubin Askew*  
GOVERNOR

DISPLAY IN A CONSPICUOUS PLACE

*Dorothy W. Glisson*  
SECRETARY OF PROFESSIONAL  
AND OCCUPATIONAL REGULATION

# CLIMATROL FLORIDA CORPORATION

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



CLIMATROL FLORIDA CORPORATION  
Salvatore Fapore  
State Certification No. CRC001786

To Whom It May Concern:

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

*Walter Lopez & Charles T. Duffin*  
Undersigned

For the job located at

11 Palm Road Sewer Pt.

Lot 11 Block \_\_\_\_\_  
Subdivision

Sewer Pt.

property owner Amos Taylor

Sincerely,

*Salvatore Fapore*  
Salvatore Fapore

State of Florida  
County of Brevard

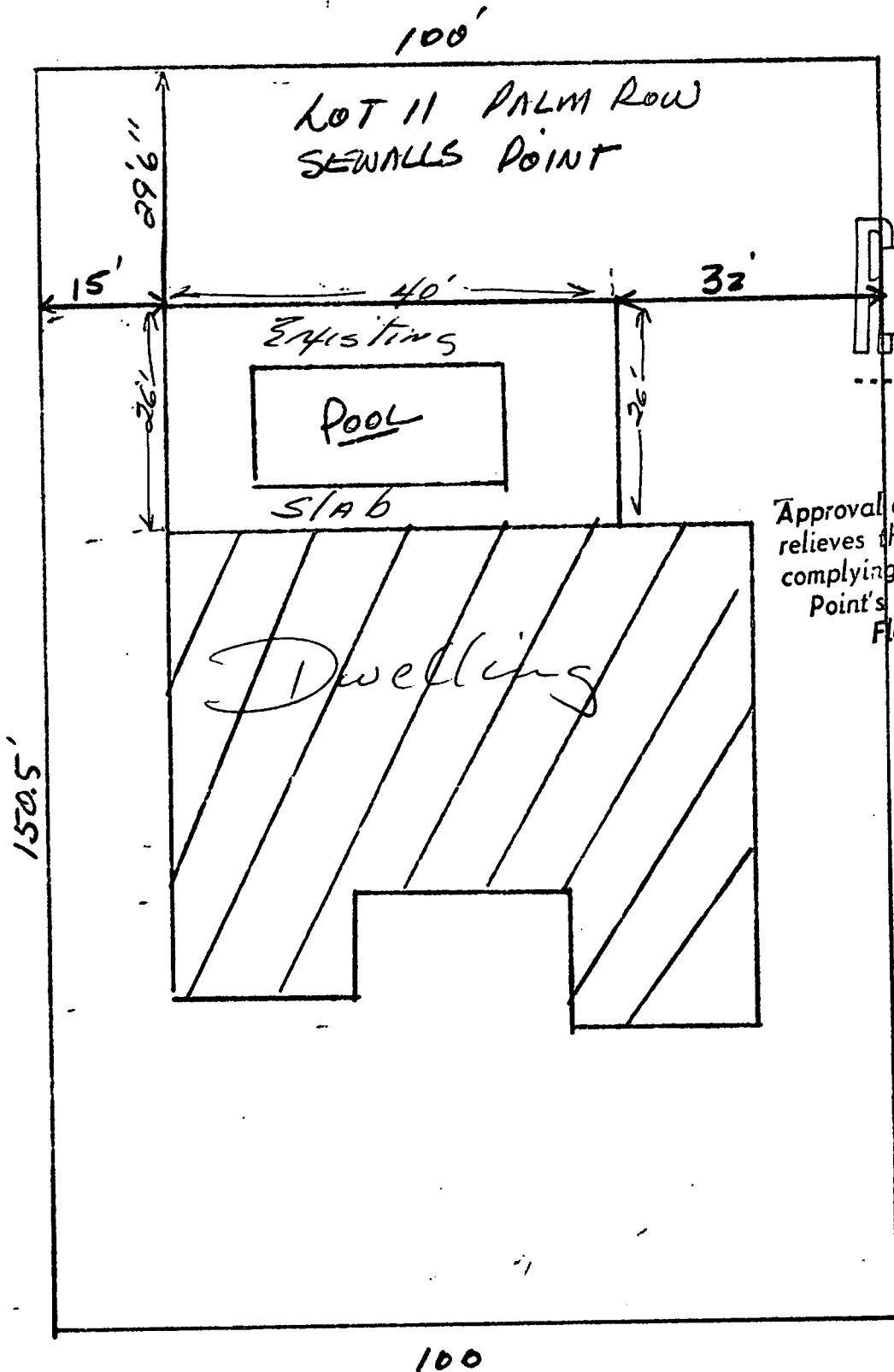
Sworn to and subscribed before me this 5th  
day of April, 1978

*Grace J. Meadows*  
Notary

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

#822

Pool Enclosure.  
alum frame.  
fiberglass screen

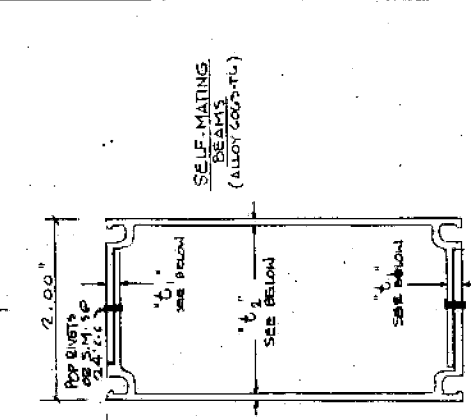
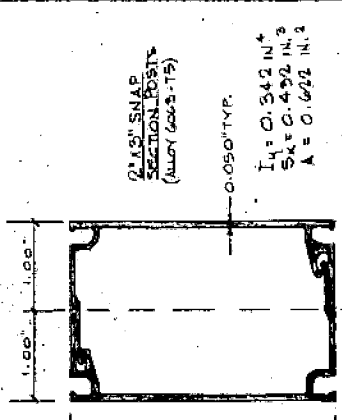
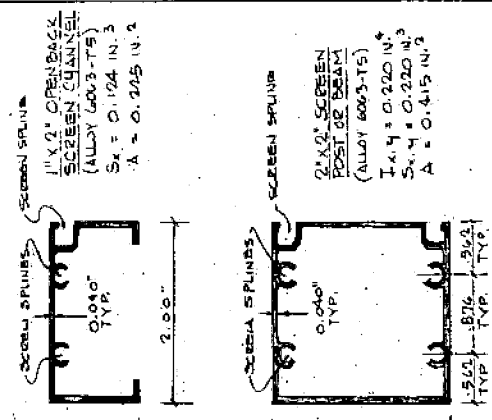


PROPOSED  
APR 14 1978

Approval of these plans in NO-WAY  
relieves the contractor or builder  
complying with the Town of Sewall  
Point's Ordinances and the South  
Florida Building Code.

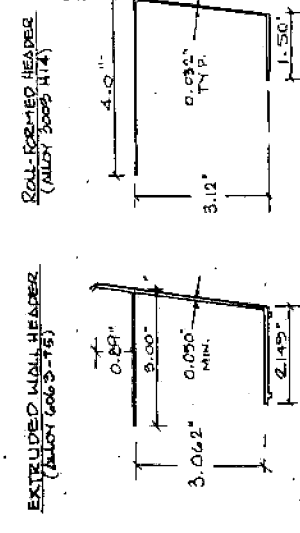
TOWN HALL MR & MRS AMOS TAYLOR  
COPY #822 TAYLOR SCREEN ENCL

**EXTRUDED POST AND BEAM SECTIONS**

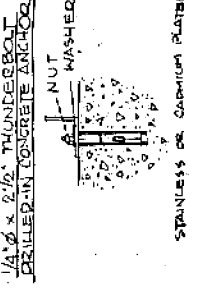
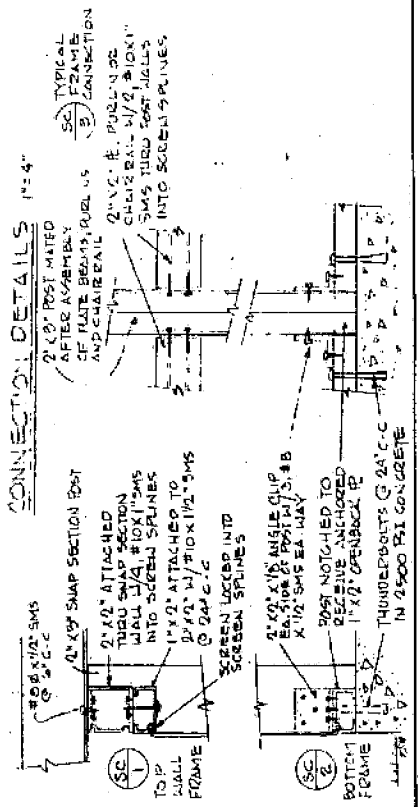
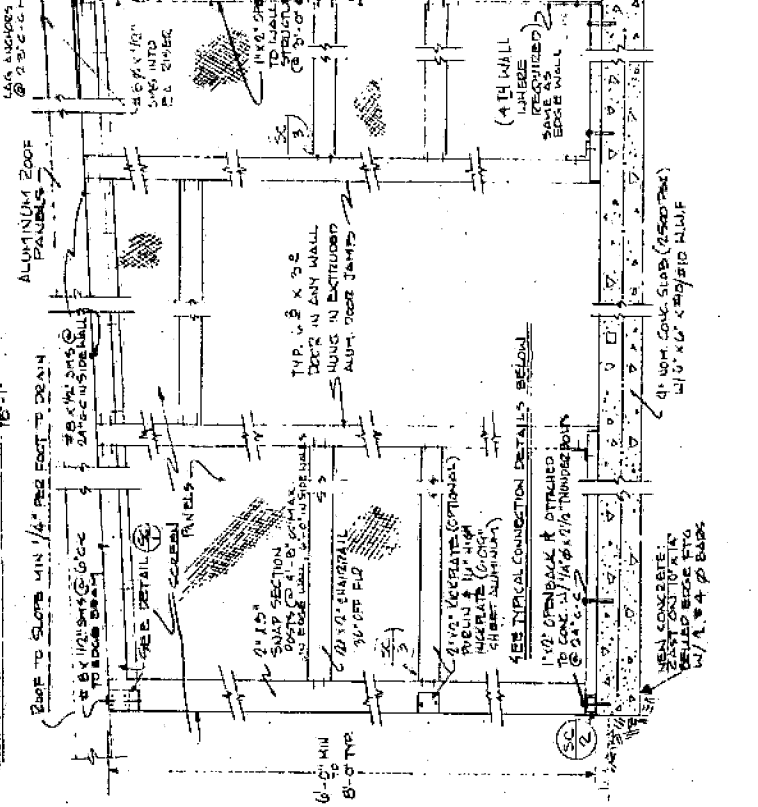
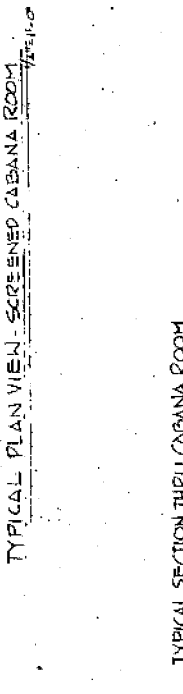
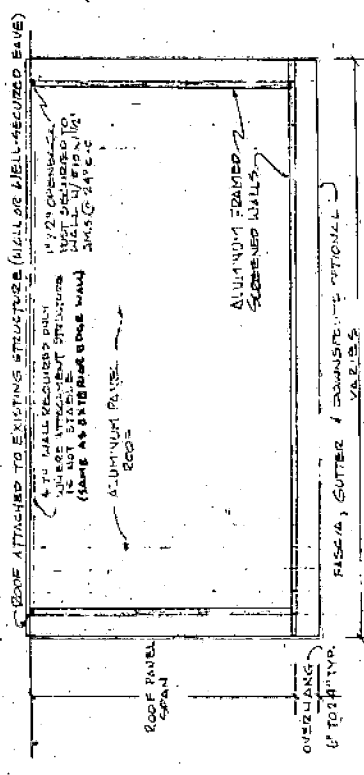


PROPERTIES OF SELF-MATING BEAMS

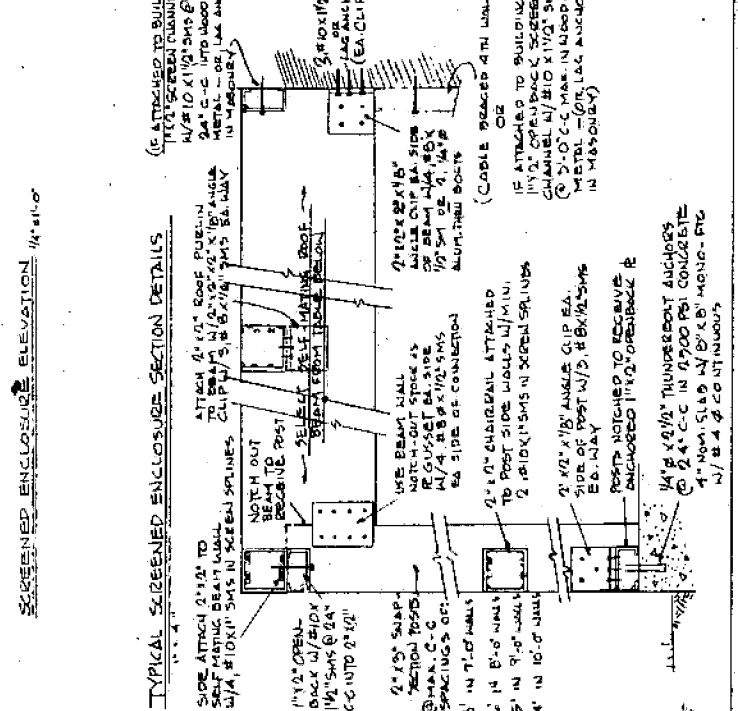
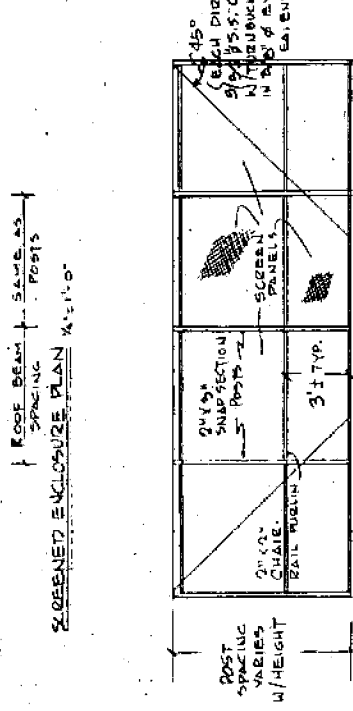
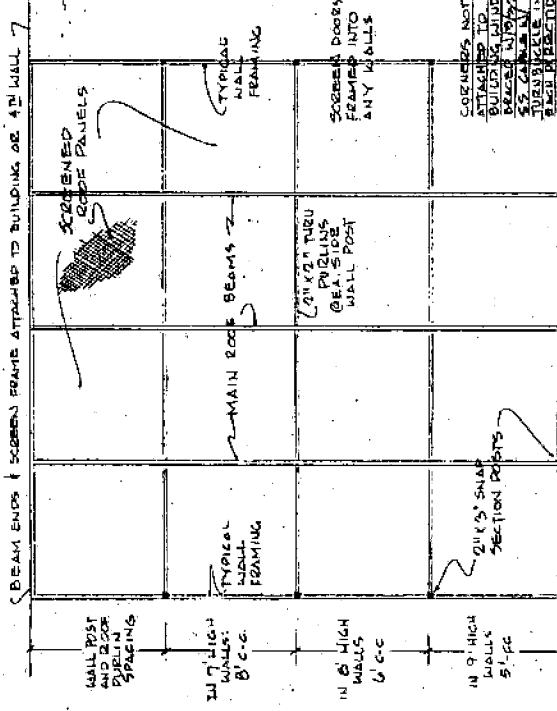
DEPTH	Wt.	Sx	Iy
4"	0.115	0.045	1.08 IN <sup>4</sup> 0.48 IN <sup>4</sup>
6"	0.107	0.055	1.84 IN <sup>4</sup> 0.75 IN <sup>4</sup>
7"	0.225	0.055	3.67 IN <sup>4</sup> 0.98 IN <sup>4</sup>



**SCREENED CABANA ROOM DETAILS**



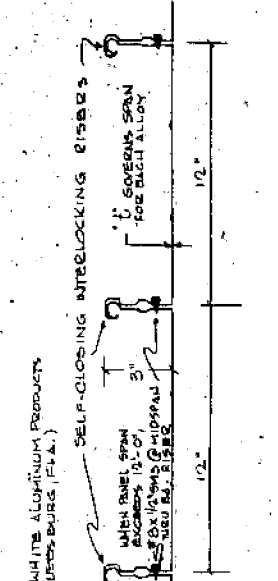
**SCREEN ENCLOSURE DETAILS**



SCREENED ROOF BEAM SPAN TABLE

BEAM SIZE	MAXIMUM CLEAR SPAN FOR BEAMS SPACED AS SHOWN, CENTER TO CENTER	6" O.C.C.	8" O.C.C.	10" O.C.C.	12" O.C.C.
2" X 4" MATING	18'-0"	19'-0"	20'-0"	21'-6"	24'-0"
2" X 6" MATING	24'-0"	25'-0"	26'-0"	28'-3"	31'-0"
2" X 7" SELF-MATING	34'-0"	35'-4"	36'-10"	39'-10"	41'-0"

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



MAXIMUM SPANS FOR 120 MPH WIND - 20 P.S.F. LL

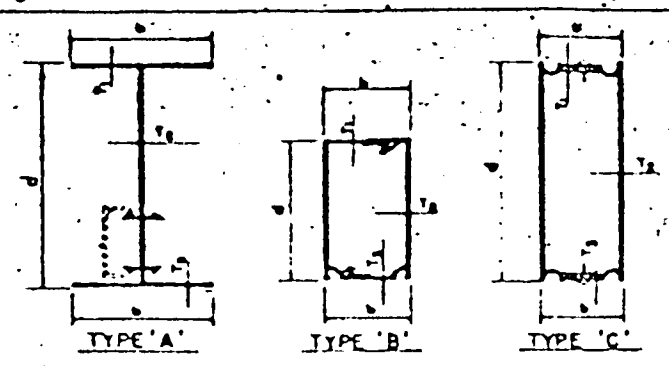
ALLOY	1/2" x 0.092"	3/4" x 0.092"
3003-H14	14'-0"	12'-0"
3003-H16	14'-9"	12'-7"

(\* EXCEPT WHERE NUMBER LIMITED BY LOCAL ORDINANCE.)  
SAFE LOAD-CARRYING PROPERTIES AND SPANS FOR THESE ROOF PANELS HAVE BEEN VERIFIED BY LOAD TESTS ON ROOF ASSEMBLIES CONDUCTED UNDER THE SUPERVISION OF THE UNDERSIGNED ENGINEER. DEFLECTION IS LIMITED TO 1/80 OF SPAN AT 80 P.S.F. LL IN ALL CASES.  
SCREENED WALL SECTIONS (3-TYP) SHALL BE SPANNERS OR COMBINATION PLATED STEEL.  
ALUMINUM ROOF PANELS SHALL BE ALLOY 3003-H14.

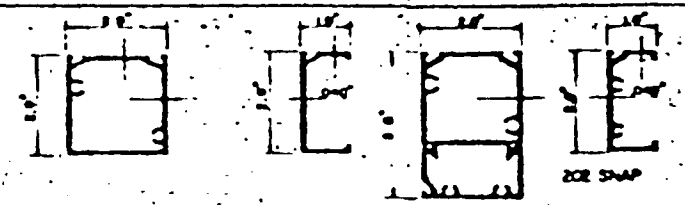
**ENGINEERING NOTE**  
STRUCTURES DETAILED IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH SOUTHERN STANDARD BUILDING CODE 1974 AMENDMENTS.  
DESIGN LOADS CONSIDERED:  
DL + 20 P.S.F. LL  
120 MPH WIND VELOCITY PRESSURES  
WHERE LOCAL ORDINANCES IMPROVE FURTHER LIMITATIONS OF SPAN'S OR PROVISIONS, SUCH IMPROVEMENTS SHOULD BE ADHERED TO IN APPLICATION OF THE DESIGN.

*Charles E. Payne, P.E.*  
CHARLES E. PAYNE, P.E.  
FLORIDA REG. NO. 12,295

HARLAN ENGINEERING LABORATORIES, INC.  
LABORATORY 5050  
LAKELAND, FLORIDA 34603  
CLIMATECOOL, INC.  
FOR  
929 SOUTH INDUSTRY ROAD  
ODDSSA, FLORIDA 32922  
DATE: 7/11/76  
JOB NO. E-756-LT-6



BEAMS AND COLUMNS



MISCELLANEOUS COMPONENTS

BEAM AND COLUMN SCHEDULE											
MARK	TYPE	SIZE			THICKNESS			MAX BEAM SPAN SPACED E-E			REMARKS
		b	d	b'	T <sub>1</sub>	T <sub>2</sub>	T <sub>3</sub>	6'-0"	7'-0"	8'-0"	
603	A	3'00"	6'00"	3'00"	.034	.060	.094	20'-0"	24'-0"	22'-0"	W/2-1X2'S SNAPPED ON
703	A	3'00"	7'00"	3'00"	.125	.066	.125	20'-0"	24'-0"	23'-0"	DO
804	A	4'00"	8'00"	4'00"	.125	.070	.125	20'-0"	24'-0"	23'-0"	DO
1004	A	4'00"	10'00"	4'00"	.140	.046	.140	48'-0"	24'-0"	45'-0"	DO
302	B	2'00"	3'00"		.060	.060	.050	12'-0"	11'-0"	10'-0"	
202	MISC	2'00"	2'00"		.040	.040	.040	3'-0"	4'-0"	7'-0"	
402	B	2'00"	4'00"		.060	.060	.060	12'-0"	12'-0"	12'-0"	#10X2' SMS AT 24" OC
602	C	2'00"	6'00"		.060	.060	.060	12'-0"	24'-0"	23'-0"	DO
702	C	2'00"	7'00"		.060	.060	.060	22'-0"	21'-0"	24'-0"	DO

COLUMN SCHEDULE											
MARK	TYPE	SIZE			THICKNESS			MAX COLUMN HT SPACED E-E			REMARKS
		b	d	b'	T <sub>1</sub>	T <sub>2</sub>	T <sub>3</sub>	6'-0"	7'-0"	8'-0"	
302	B	2'00"	3'00"		.060	.060		9'-0"	9'-0"	9'-0"	
402	C	2'00"	4'00"		.060	.060	.120	18'-0"	11'-0"	10'-0"	

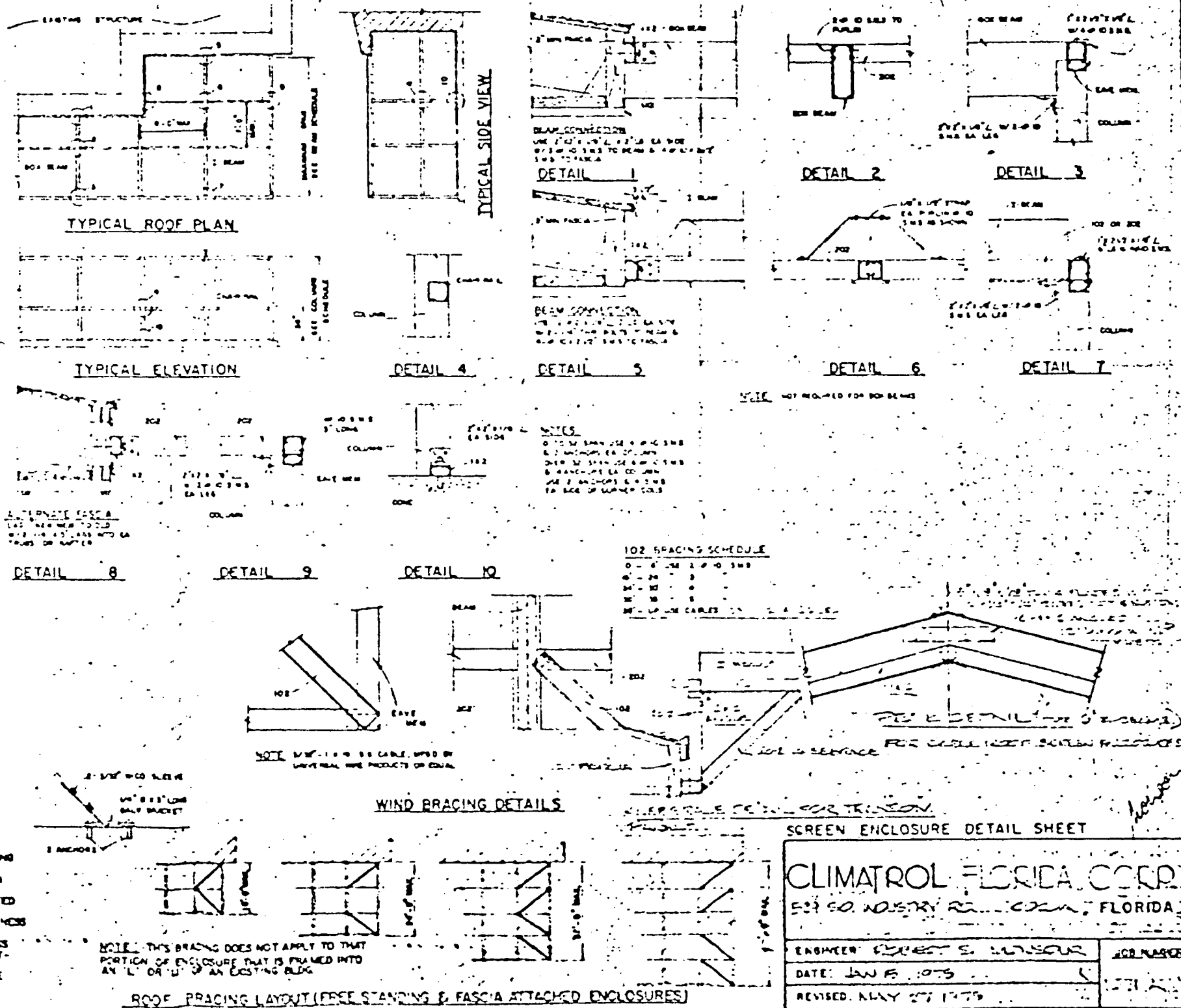
MISCELLANEOUS FASTENING SCHEDULE		
MEMBER	DESCRIPTION	FASTENER
202	STRUT TO L2 AT BEAM	2 #10X3/4" SMS
202	STRUT TO EAVE SECTION	DO
202	CHAIR FAIL TO COLUMN	DO
1X2	PERIMETER MEM JOINED	DO
1X2	PERIMETER MEM TO COL	DO
1X2	PERIMETER MEM TO CONC	ANCHOR AT 24" C-C
1X2	PERIMETER MEM TO WOOD	#10X2 1/2" SMS 24" OC

SCREEN WALL CABLE SCHEDULE				
HEIGHT	SPAN	CABLES	SPAN	CABLES
6'-0"	10'-0"	1 SET (2 CABLES)	15'-0"	2 SETS (4 CABLES)
8'-0"	15'-0"	1 SET (2 CABLES)	20'-0"	2 SETS (4 CABLES)
10'-0"	20'-0"	1 SET (2 CABLES)	25'-0"	2 SETS (4 CABLES)
12'-0"	25'-0"	1 SET (2 CABLES)	30'-0"	2 SETS (4 CABLES)

ANCHORS TO CONCRETE & MASONRY SHALL BE 1/4" X 2 1/2" THIN CEREBLTS, #10 X 2 1/2" SMS, IN JORDAN 1020 ANCHOR OR APPROVED EQUIV.

**DESIGN CRITERIA**  
 WINDS: DESIGN WIND LOAD IN & OUT 10 PSF  
 TEST LOAD WIND IN & OUT 15 PSF  
 ROOF: DESIGN LIVE LOAD DOWN 12 PSF  
 DESIGN WIND LOAD UP 12 PSF  
 TEST LOAD UP & DOWN 9 PSF  
 RECOVERY AT TEST LOAD 90% MIN

**NOTES:**  
 1) ROOF & SIDES SHALL BE COVERED WITH SCREEN CLOTH BEING 60% OR GREATER OPEN. THE ADDITION OF SOLID PROOFING OR SIDING IS NOT COVERED BY THIS SHEET.  
 2) THE EXISTING STRUCTURE MUST BE CAPABLE OF SUPPORTING THE LOADED SCREEN ENCLOSURE.  
 3) BEAMS TO BE ALUM. ALLOY BEAMS WILL BEAR IDENTIFICATION 1 FT FROM EACH END OF BEAM.  
 4) USE ADDITIONAL SETS OF CABLES WHERE BEAM SPANS EXCEED THOSE SHOWN IN CABLE SCHEDULE.  
 5) A TOLERANCE OF 0.002" IS ALLOWED WHERE WALL THICKNESS IS IN INCHES.  
 6) ALL FASTENERS SHALL BE NON-MAGNETIC STAINLESS STEEL OR ALUM EXCEPT CABLE FASTENERS MAY BE HOT-DIP GALV STEEL.  
 7) METAL ANCHORS SHALL BE MADE OF NON-CORROSIVE METALIC CONC OR OF VIRGIN PVC PLASTIC.

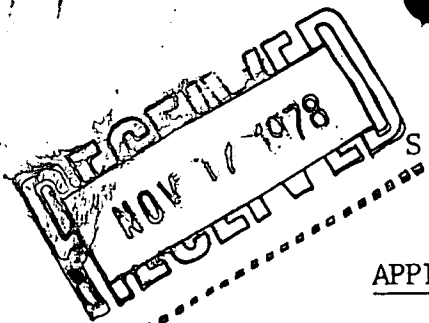


**CLIMATROL FLORIDA CORP.**  
 500 SO. WILSON ROAD, CORAL GABLES, FLORIDA  
 ENGINEER: ROBERT S. WILSON  
 DATE: JAN. 1975  
 REVISED: MAY 27, 1975

ROOF BRACING LAYOUT (FREE STANDING & FASCIA ATTACHED ENCLOSURES)

**898**

**SOLAR HOT WATER SYSTEM**



TOWN OF SEWALL'S POINT FLORIDA

Permit No. 898 Date

APPLICATION FOR BUILDING PERMIT

This application must be accompanied by three sets of complete plans, to scale (1/2" 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 AMOS TAYLOR Present Address 11 PALM ROAD Phone 287-0767 So SEWALL'S POINT P.O. BOX 782 -General Contractor SUNCOAST DISTRIBUTORS OF STUART, INC Address 4712 OVERLOOK TER. PORT SALERNO Phone 286-2183

Where Licensed MARTIN COUNTY License No. 29416

-Plumbing Contractor D/A License No.

-Electrical Contractor D/A License No.

Describe building or other structure, or alteration to existing structure.

Installation of Solar Hot Water System

Name the street on which the building, its front building line and its front yard will face. D/A

Subdivision Lot No. Area

-Building Area, inside walls (excluding garage, carport, porches, etc.)...square feet

-Contract Price (excluding land, carpeting, appliances, landscaping, etc.)\$ 1,000.00

-Total Cost of Permit \$ 5.00

-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 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. 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.

General Contractor Kenneth L. Seagle

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.

Owner Amos Taylor

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

Approved: J. Mazzucca Building Inspector Date submitted Nov. 20, 1978

Approved: Commissioner Date 20 Nov 178

Certificate of Occupancy issued O.K. Final Inspection 11/23/78 Date J. Mazzucca





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

## BUILDING PERMIT CARD

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

PERMIT NUMBER:	8890	DATE ISSUED:	MAY 9, 2008
SCOPE OF WORK:	HURRICANE SHUTTERS		
CONDITIONS :			
CONTRACTOR:	JUPITER ALUMINUM		
PARCEL CONTROL NUMBER:	133841005000001109	SUBDIVISION	PALM ROW - LOT 11
CONSTRUCTION ADDRESS:	11 PALM RD		
OWNER NAME:	TAYLOR		
QUALIFIER:	MARK SCHER	CONTACT PHONE NUMBER:	561-747-4166

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

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

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

### REQUIRED INSPECTIONS

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

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

Date: 5/8/08 Town of Sewall's Point BUILDING PERMIT APPLICATION Permit Number: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: AMOS TAYLOR Phone (Day) 772 2970867 (Fax) \_\_\_\_\_

Job Site Address: 11 PALM RD. City: SEWALLS POINT State: FL. Zip: 34996

Legal Desc. Property (Subd/Lot/Block) PALM RD REVISED + AMENDED LOT 11 Parcel Number: 13-38.41.005.000.0010.9

Owner Address (if different): 11 Palm Rd City: Sewalls Point State: FL Zip: 34996

Scope of work: INSTALL (4) OPENINGS OF ALUMINUM STORM PANELS

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

COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ 1020.00 (Notice of Commencement required when over \$2500 prior to first inspection)

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

Is subject property located in flood hazard area? V \_\_\_\_\_ A9 \_\_\_\_\_ A8 X FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_ Fair Market Value of the Primary Structure only (Minus the land value) \*\*\* PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION\*\*\*

CONTRACTOR/Company: JUPITER ALUMINUM Phone: 561 747 4166 Fax: 747-5036

Street: 219 JUNO ST City: JUPITER State: FL Zip: 33458

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Municipality License Number: SP02259

PROJECT SUPERINTENDANT: \_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_

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

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

ENGINEER WALTER TILLIT Lic# 44167 Phone Number: 305 871 1530

Street: 6355 NW. 36TH ST City: MIAMI State: FL Zip: 33166

AREA SQ. FOOTAGE (W/SEWER & ELECTRIC): Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ Screened Porch: \_\_\_\_\_ Carport: \_\_\_\_\_ Total Under Roof: \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

CODE EDITIONS IN EFFECT FOR THIS APPLICATION: Florida Building Code - Res., Build, Mech., Plmb., Fuel Gas; 2004 (W/2006 Rev.) National Electrical Code: 2005 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Prevention Code 2004

NOTICES TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. 2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS TO YOUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.

THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ALL NULL AND VOID PERMITS. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5. 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.

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

OWNER SIGNATURE (required) Elaine Taylor

CONTRACTOR SIGNATURE (required) Mark Scher

State of Florida, County of Martin

On State of Florida, County of Palm Beach

This the 8 day of May, 2008

This the 8 day of May, 2008

by Elaine Taylor who is personally known to me or produced as identification.

by Mark Scher who is personally known to me or produced as identification.

Public Notary: Jeanne Marie Vita Comm# DD0759173 Expires 3/23/2012

Public Notary: Jeanne Marie Vita Comm# DD0759173 Expires 3/23/2012

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



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

Site Provided by...  
governmentmax.com T1.14

**Summary**

print Address 1 of 3

**Parcel Info**

**Parcel ID** 13-38-41-005-000-00110-9  
**Unit Address** 11 PALM RD

**Serial Index ID** 27818  
**Order** Address  
**Commercial** 0  
**Residential** 1

**Summary**

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

**Summary**

**Property Location** 11 PALM RD  
**Tax District** 2200 Sewall's Point  
**Account #** 27818  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120400  
**Acres** 0.346

**Legal Description**  
**Property Information**  
PALM ROW REVISED & AMENDED  
LOT 11

**Search By**

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

**Owner Information**  
**Owner Information**  
TAYLOR, ELAINE G (TR)

**Mail Information**  
11 PALM RD  
STUART FL 34996

**Assessment Info**  
**Front Ft.** 0.00

**Market Land Value** \$275,000  
**Market Impr Value** \$242,150  
**Market Total Value** \$517,150

**Site Functions**

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

**Recent Sale**  
**Sale Amount** \$100

**Sale Date** 11/6/1991  
**Book/Page** 0931 1023

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[Legal disclaimer / Privacy Statement](#)

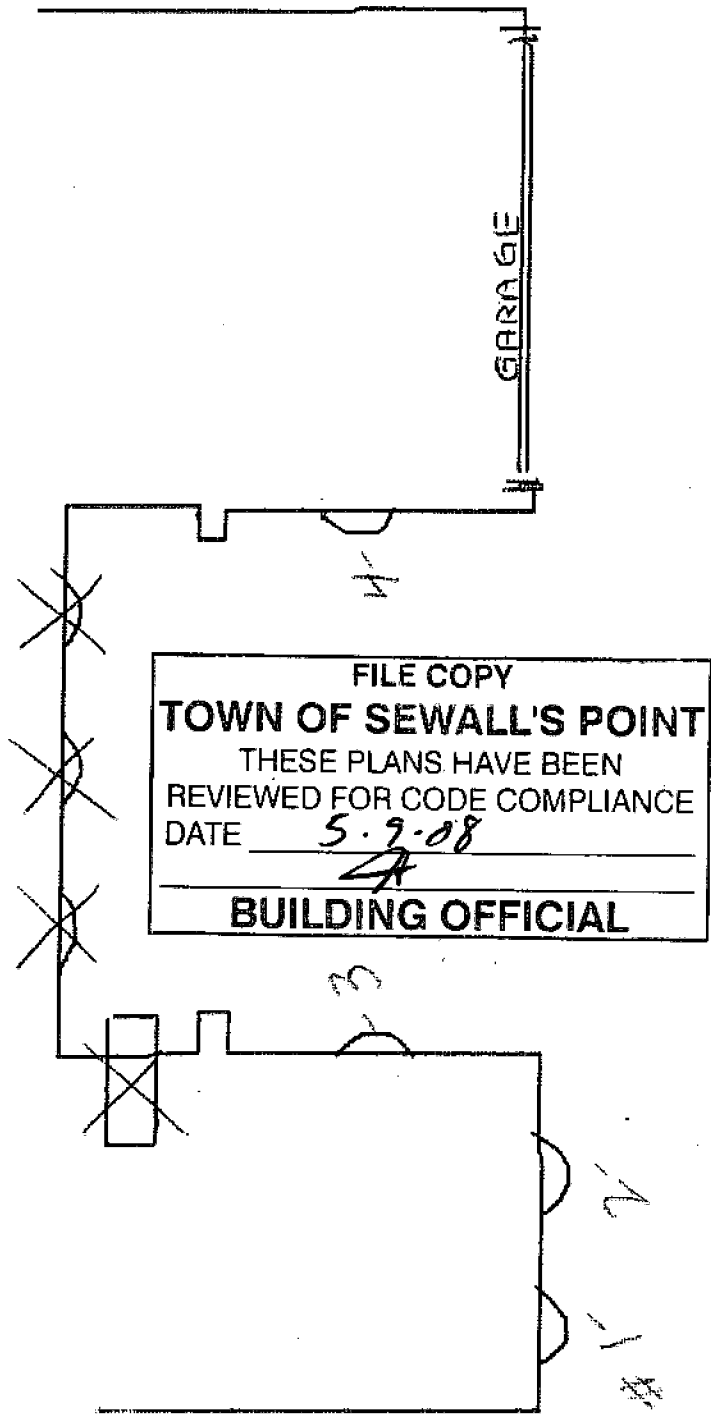
Data updated on 05/01/2008



PANELS -

- 1. 37x63
- 2. 37x63
- 3. 37x63
- 4. 37x51

h-TOP ANGLE Bottom



FILE COPY  
**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE 5.9.08  
 \_\_\_\_\_  
**BUILDING OFFICIAL**

AMOS TAYLOR  
 11 PALM RD.  
 STUART 34996  
 772 287 0767

SEWELL'S POINT.

- FRONT -  
 1 story stucco over wood.  
 SINGLE FAMILY



# JUPITER ALUMINUM PRODUCTS

219 Juno Street  
Jupiter, FL 33458

Office-561-747-4168  
Fax-561-747-5036

License #-U17382

## PERMIT SCHEDULE FOR INSTALLATION OF OPENING PROTECTIVE DEVICES OR ASSEMBLIES

Date: 5/8/08

Permit Application Number  
or Primary Permit Number:

Property Address: 11 Palm Rd. Swalls Point, FL 34996

Type of Construction or Attachment Surface:

- Wood Frame
- Masonry/Concrete
- Steel Frame
- Other (Insulated Wall, Curtain Wall, Precast, etc.)  
Describe: \_\_\_\_\_

Type of Glazing Protection Device or Assembly

- Impact Resistant Glazing
- Removable Storm Panels
- Permanently Affixed Assembly

Building Height                     

Glazing Protective Device/Assembly Manufacturer

Aluminum Storm Panels / Eastern Metal Supply

Design Pressure

- Standard Building Code (Section 1606)
- ASCE 7-02 C  
Exposure Category

Product Compliance Report and Report Number

- SBCCI # \_\_\_\_\_
- Metro Dade County # \_\_\_\_\_
- Other # FB C

Type of Anchor Specified TCPCONS

Other Information \_\_\_\_\_

## INSTALLATION SCHEDULE

Unit #	Wall Pressure Inter/End Zone	Opening Size		Shutter Width	Shutter Height	Number Shutter Span	Size of Shutter Span	Storm Bars Numbers Required	Anchor Spacing	Header Reinf. Required		Storm Panels Bolted	
		Width	Height							Y	N	Y	N
1	55	37	63	44	70				12/12	Y	N	Y	N
2	55	37	63	44	70				12/12	Y	N	Y	N
3	55	37	63	44	70				12/12	Y	N	Y	N
4	56	37	51	44	58				12/12	Y	N	Y	N
5		x								Y	N	Y	N
6		x								Y	N	Y	N
7		x								Y	N	Y	N
8		x								Y	N	Y	N
9		x								Y	N	Y	N
10		x								Y	N	Y	N
11		x								Y	N	Y	N
12		x								Y	N	Y	N
13		x								Y	N	Y	N
14		x								Y	N	Y	N
15		x								Y	N	Y	N
16		x								Y	N	Y	N

TOWN OF SEWALL'S POINT  
BUILDING DEPARTMENT  
FILE COPY



# DESIGN PRESSURE CALCULATION

for Exposure C, Wind speed 140 mph and Mean roof height 15 ft

**Contractor:**  
Jupiter Aluminum Products

**Preparer:**  
Jeanne-Marie

**Project Address:**  
11 Palm Rd.  
Sewalls Point  
Florida  
34996

#	Width	Height	Location	+	-
1	37	63	End	41.52	-54.72
2	37	63	End	41.52	-54.72
3	37	63	End	41.52	-54.72
4	37	51	End	42.11	-55.91

TOWN OF SEWALL'S POINT  
BUILDING DEPARTMENT  
FILE COPY

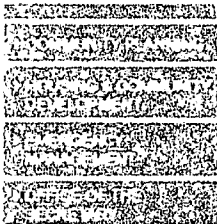


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**Product Approval**  
USER: Public User

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



FL #	FL5351-R2
Application Type	Revision
Code Version	2004
Application Status	Approved
Comments	
Archived	

Product Manufacturer	Eastern Metal Supply
Address/Phone/Email	4268 Westroads Drive West Palm Beach, FL 33407 (561) 841-5480 bfeeley@easternmetal.com

Authorized Signature	Bill Feeley bfeeley@easternmetal.com
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Technical Representative  
Address/Phone/Email

Quality Assurance Representative  
Address/Phone/Email

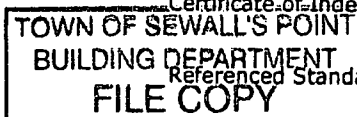
Category	Shutters
Subcategory	Storm Panels

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

Florida Engineer or Architect Name who developed the Evaluation Report	Walter A. Tillit, Jr., P.E.
Florida License	PE-44167
Quality Assurance Entity	National Accreditation and Management Institute
Quality Assurance Contract Expiration Date	
Validated By	John Henry Kampmann Jr. Validation Checklist - Hardcopy Received

Certificate of Independence

FL5351\_R2\_COI\_CERTIFICATE OF INDEPENDENCE.PDF



Referenced Standard and Year (of Standard)

<u>Standard</u>	<u>Year</u>
ASTM E-1886	2002
ASTM E-1996	2002

ASTM E330

2002

Equivalence of Product Standards  
Certified By

Sections from the Code

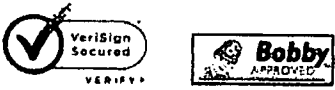
Product Approval Method                      Method 1 Option D

Date Submitted                                      09/12/2007  
 Date Validated                                      09/13/2007  
 Date Pending FBC Approval                      10/08/2007  
 Date Approved                                      12/11/2007

Summary of Products		
FL #	Model, Number or Name	Description
5351.1	Drawing 06-169	.050" BERTHA Aluminum Storm Panel (2 Inch)
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: For Design Loads and Spans refer to engineered drawing number 06-169.		<b>Installation Instructions</b> <a href="#">FL5351_R2_II_Dwg.No.06-169.PDF</a> Verified By: Walter A. Tillit Jr., P.E. PE-44167 Created by Independent Third Party: <b>Evaluation Reports</b> <a href="#">FL5351_R2_AE_PRODUCT EVALUATION REPORT.PDF</a> Created by Independent Third Party:

DCA Administration  
 Department of Community Affairs  
 Florida Building Code Online  
 Codes and Standards  
 2555 Shumard Oak Boulevard  
 Tallahassee, Florida 32399-2100  
 (850) 487-1824, Suncom 277-1824, Fax (850) 414-8436  
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WALTER A. TILLIT, JR., P.E.

## PRODUCT EVALUATION REPORT

tilteco@aol.com  
FL P.E. License No. 44167  
FL E.B. License No. 0006719

**REPORT NO.:** 07-0905.01  
**DATE:** September 5, 2007  
**PRODUCT CATEGORY:** Hurricane Shutters  
**PRODUCT SUB-CATEGORY:** Storm Panels  
**PRODUCT NAME:** 0.050" Bertha Aluminum Storm Panel (2" deep)  
**MANUFACTURER:** Eastern Metal Supply, Inc.  
4268 Westroads Drive  
West Palm Beach, Florida 33407

### 1. PURPOSE OF EVALUATION:

This is a Product Evaluation Report (revises FL 5351-R1 with Report # 06-0815.01) issued by **Walter A. Tillit, Jr., P.E.** (System ID # 1906) to **Eastern Metal Supply, Inc.**, manufacturer, based on Rule Chapter No. 9B-72.070, Method 1d of the State of Florida Product Approval, Department of Community Affairs-Florida Building Commission. This product is being issued an Evaluation Report as described herein, and has been verified for compliance in accordance with the 2004 edition of the Florida Building Code, and to verify that the product is for the purpose intended at least equivalent to that required by the Code.

This Product Evaluation Report shall be subject to review and revision in case of a Building Code Change that may affect its limitations and conditions.

### 2. EVIDENCE SUBMITTED:

#### 2.1. PRODUCT EVALUATION DOCUMENT (P.E.D.):

Drawing No. 06-169 (with applicable revisions dated 08/21/07, on sheets 1, 2, 7 and 8 of 17), titled "0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)", sheets 1 thru 17 of 17, including sheets 6A and 14A of 17, prepared by Tilteco, Inc.; signed and sealed by Walter A. Tillit, Jr., P.E.; dated 06/23/06. This drawing is an integral part of this Evaluation Report.

#### 2.2. TEST REPORTS:

This revision does not include the performance of any new testing beyond the already

**PRODUCT EVALUATION REPORT NO. 07-0905.01**

referred to on General Note # 1, sheet 1, of drawing # 06-169, which is part of current FL 5351-R1 approval number (indicated as a reference below).

Large missile impact load tests were performed under ASTM E-1886, E-1996 standard as per section 1609.1.4 of the Florida Building Code. Uniform Static Load Tests as per Protocol TAS 202 (ASTM E-330). Test reports prepared by American Testing Lab of South Florida, Report No. 0321.01-05, dated March 21 thru June 23, 2005, signed by Jose L. Mir, ATL Assistant Director and signed and sealed by William R. Mehner, P.E. and Henry Hattem P.E., Report No. 0812.01-05, dated August 12 thru September 8, 2005, signed and sealed by William R. Mehner, P.E., and Henry Hattem, P.E., Report No. 0119.01-06, dated July 5, 2006, signed and sealed by William R. Mehner, P.E. and Henry Hattem, P.E.

Tensile test reports # 5DM-377, by QCM Laboratory, dated April 26, 2005 and signed and sealed by Frank E. Grate, Jr. P.E., as per ASTM E 8 and # 6AM-87, dated February 9, 2006, signed and sealed by Frank E. Grate, P.E., as per ASTM E-8.

**2.3. STRUCTURAL ENGINEERING CALCULATIONS:**

This revision includes new calculations to verify the moment of inertia of storm panel where its end lips include now hemmed edges. Comparison is made in relation to panel with non-hemmed edges.

Old calculations pertaining to FL 5351-R1 are indicated as a reference below.

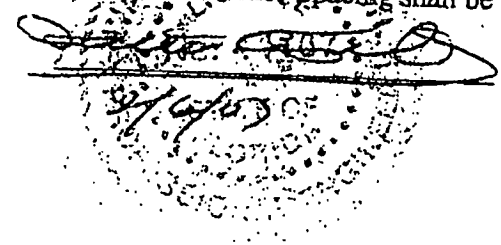
On 0.050" Bertha Aluminum Storm Panel (2" Deep) for maximum panel length vs. design wind load, as well as maximum anchor spacing vs. design wind load and panel length based on rational and comparative analysis, and in accordance with section 1612 of the Florida Building Code. Calculations prepared by Tilteco, Inc., dated June 23, 2006, signed and sealed by Walter A. Tillit, Jr., P.E.

**3. MISSILE IMPACT RESISTANCE:**

Based on new calculations explained on item 2.3 above, we have concluded that storm panels with hemmed edges comply also with large missile impact under section 1609.1.4 of the Florida Building Code, as per ASTM E-1886, E-1996 Standard.

**4. WIND LOADS RESISTANCE:**

0.050" Bertha Aluminum Storm Panel (2" Deep) has been verified to sustain wind pressures. Maximum panel length shall be as indicated on sheet 2 of V of Product Evaluation Document (P.E.D.), drawing No. 06-169. Maximum Anchor Spacing shall be



**PRODUCT EVALUATION REPORT NO. 07-0905.01**

as indicated on sheets 9, 10, 11, 16 and 17 of 17, of Product Evaluation Document (P.E.D.), drawing No. 06-169. 0.050" Bertha Aluminum Storm Panel (2" Deep) has been verified for code compliance to work as a non-porous storm shutter assembly, as per ASTM E-1996 Standard.

**5. INSTALLATION:**

Installation shall be performed strictly in accordance with the details indicated on sheets 4 thru 8 and 12 thru 15 of 17, of Product Evaluation Document (P.E.D.), drawing No. 06-169. Minimum separation to glass shall be as indicated on sheets 4 thru 8 and 12 thru 15 of 17, of Product Evaluation Document (P.E.D.), drawing No. 06-169.

**6. MATERIAL CHARACTERISTICS AND SPECIFICATIONS:**

Shall be strictly in accordance with General Notes and Components indicated on sheets 1, 2 and 3 of 17, of Product Evaluation Document (P.E.D.), drawing No. 06-169.

Anchor specifications shall be as indicated on sheets 1, 5, 6, 6A, 7, 12, 13, 14, 14A and 15 of 17, of Product Evaluation Document (P.E.D.), drawing No. 06-169.

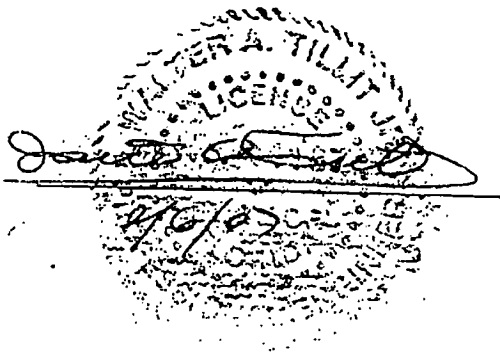
**7. LIMITATIONS AND CONDITIONS OF USE:**

7.1. Shall be strictly in compliance with General Notes No. 1, 7, 8, 9, 10 and 11, indicated on sheet 1 of 17, of Product Evaluation Document (P.E.D.), drawing No. 06-169 prepared by Tilteco, Inc. and signed and sealed by Walter A. Tillit, Jr., P.E.

7.2. Product shall not be installed within HIGH VELOCITY HURRICANE ZONES as defined on section 1620.2 of the Florida Building Code.

7.3. Product shall only be installed into poured concrete, concrete block, and wood frame structures.

Product Evaluation Report prepared by Walter A. Tillit, Jr., P.E. (Florida License No. 44167), President of Tilteco, Inc. (Florida EB-0006719).





WALTER A. TILLIT, JR., P.E.

tilteco@aol.com  
FL P.E. License No. 44167  
FL E.B. License No. 0006719

**CERTIFICATION OF INDEPENDENCE**  
(Rule #9B-72.110)

Evaluation Report #: 07-0905.01

Date: September 05, 2007

Product Category: Hurricane Shutters

Product Subcategory: Storm Panels

Product Name: 0.050" Bertha Aluminum Storm Panel (2" Deep)

Manufacturer Name: Eastern Metal Supply, Inc.

Dear Sir (Madam):

This is to certify that this Florida Professional Engineer, performing this evaluation does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the reports are being issued.

This is also to certify that this Florida Professional Engineer performing this evaluation does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.

Certificate of Independence prepared by Walter A. Tillit, Jr., P.E. (Florida License No. 44167), President of Tiltco, Inc. (Florida EB-0006719).



**GENERAL NOTES:**

1. STORM PANEL SHOWN ON THIS PRODUCT EVALUATION DOCUMENT (P.E.D.) HAS BEEN VERIFIED FOR COMPLIANCE IN ACCORDANCE WITH THE 2004 EDITION OF THE FLORIDA BUILDING CODE, WITH THE 2005, 2006 AND 2007 SUPPLEMENTS. THIS STORM PANEL SHALL NOT BE INSTALLED AT HIGH VELOCITY HURRICANE ZONES (MIAMI-DADE / BROWARD COUNTIES). DESIGN WIND LOADS SHALL BE DETERMINED AS PER SECTION 1609 OF THE ABOVE MENTIONED CODE, FOR A BASIC WIND SPEED AS REQUIRED BY THE JURISDICTION WHERE STORM PANEL WILL BE INSTALLED, AND FOR A DIRECTIONALITY FACTOR  $K_d=0.85$ , IN ACCORDANCE WITH ASCE 7-02 STANDARD. IN ORDER TO VERIFY THAT COMPONENTS AND ANCHORS ON THIS P.E.D. AS TESTED WERE NOT OVER STRESSED, A 33% INCREASE IN ALLOWABLE STRESS FOR WIND LOADS WAS ~~NOT~~ USED IN THEIR ANALYSIS. A DURATION FACTOR  $C_D=1.60$  WAS USED FOR VERIFICATION OF FASTENERS IN WOOD.

STORM PANEL'S ADEQUACY FOR IMPACT AND FATIGUE RESISTANCE HAS BEEN VERIFIED IN ACCORDANCE WITH SECTION 1609.1.4 OF THE ABOVE MENTIONED CODE AS PER ATL REPORTS # 0321.01-05, # 0812.01-05 AND # 0119.01-08, PER ASTM E-1886, E-1996 STANDARDS, AND TAS 202 PROTOCOL.

- 2. ALL ALUMINUM SHEET METAL PANELS SHALL HAVE 5052-H32 OR 3004-H34 ALLOY.
- 3. ALL ALUMINUM EXTRUSIONS SHALL BE ALUMINUM ASSOCIATION 6063-T6 ALLOY & TEMPER UNLESS OTHERWISE NOTED. STORM PANEL COMPONENTS (4) STUDDED PLATE AND (3) SNAP CAP ARE PATENT PENDING.
- 4. ALL SCREWS TO BE STAINLESS STEEL 304 OR 316 AISI SERIES OR CORROSION RESISTANT COATED CARBON STEEL AS PER DIN 50018 W/ 50 ksi YIELD STRENGTH AND 90 ksi TENSILE STRENGTH.
- 5. BOLTS TO BE ASTM A-307 GALVANIZED STEEL OR AISI 304 SERIES STAINLESS STEEL, WITH 35 ksi MINIMUM YIELD STRENGTH.
- 6. ANCHORS TO WALL SHALL BE AS FOLLOWS: (UNLESS OTHERWISE NOTED)

- 1/4" TAPCON ANCHORS AS MANUFACTURED BY I.T.W./BUILDEX AND ELCO TEXTRON.
- 1/4" S.G. TAPCONS AS MANUFACTURED BY ITW/ BUILDEX.
- 1/4" PANEL MATES ANCHORS MALE OR TVAS AS MANUFACTURED BY ELCO TEXTRON.
- 1/4" x 3/4" SOLID SET ANCHORS, AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.

**NOTES:**

- A.1) MINIMUM EMBEDMENT INTO POURED CONCRETE OF TAPCON ANCHORS AND S.G. TAPCONS IS 1 3/4"; FOR ELCO PANELMATE AND ELCO TVAS IS 2".
- A.2) 3/4" SOLID SET ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED.  
-1/4"-20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
- A.3) IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, OR PAVERS BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1) & A.2) ABOVE.

**(B) TO EXISTING CONCRETE BLOCK WALL:**

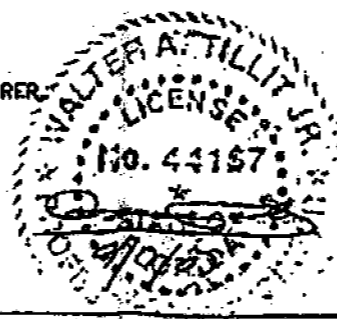
- 1/4" TAPCON ANCHORS AS MANUFACTURED BY I.T.W./BUILDEX AND ELCO TEXTRON.
- 1/4" S.G. TAPCONS AS MANUFACTURED BY ITW/ BUILDEX.
- 1/4" PANEL MATES ANCHORS MALE OR TVAS AS MANUFACTURED BY ELCO TEXTRON.
- 1/4" x 3/4" SOLID SET ANCHORS, AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.

**NOTES:**

- B.1) MINIMUM EMBEDMENT OF TAPCON ANCHORS, S.G. TAPCONS, ELCO PANELMATE, ELCO TVAS INTO THE CONCRETE BLOCK UNIT SHALL BE 1 1/4".
- B.2) -3/4" SOLID SET ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE CONCRETE BLOCK UNIT. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED.  
-1/4"-20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
- B.3) IN CASE THAT PRECAST STONE OR PRECAST CONCRETE PANELS BE FOUND ON THE EXISTING WALL, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES IN B.1) & B.2) ABOVE.
- (C) TO EXISTING WOOD FRAME BUILDINGS, SEE SPECIFICATIONS ON SHEETS 12, 13, 14 & 15. ANCHORAGE SHALL BE PERFORMED BEYOND ANY FINISH MATERIAL AT WALL LIKE BRICK VENEER, STUCCO OR ANY OTHER FINISH.

(D) ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.

TOWN OF SEWALL'S POINT  
BUILDING DEPARTMENT  
FILE COPY



7. PANELS MAY ALSO BE INSTALLED HORIZONTALLY FOLLOWING INSTALLATION DETAILS SHOWN ON SECTIONS 1 THRU 13 (SHEET 4 THRU 8) EXCEPT THAT HEADERS 2, 3, JA & 4 SHALL NOT BE USED.

8. IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE SOUNDNESS OF THE STRUCTURE WHERE SHUTTER IS TO BE ATTACHED TO INSURE PROPER ANCHORAGE. THIS SHUTTER SHALL ONLY BE ATTACHED TO CONCRETE, BLOCK OR WOOD FRAME BUILDINGS.

9. THE INSTALLATION CONTRACTOR IS TO SEAL/CAULK ALL SHUTTER COMPONENT EDGES WHICH REMAIN IN CONTINUOUS CONTACT WITH THE BUILDING TO PREVENT WIND/RAIN INTRUSION. CAULK AND SEAL SHUTTER TRACKS ALL AROUND FULL LENGTH.

10. (a) THIS P.E.D. PREPARED BY THIS ENGINEER IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR A SITE SPECIFIC PROJECT; I.e. WHERE THE SITE CONDITIONS DEVIATE FROM THE P.E.D.

(b) CONTRACTOR TO BE RESPONSIBLE FOR THE SELECTION, PURCHASE AND INSTALLATION INCLUDING LIFE SAFETY OF THIS PRODUCT, BASED ON THIS P.E.D. PROVIDED HE/SHE DOES NOT DEVIATE FROM THE CONDITIONS DETAILED ON THIS DOCUMENT. CONSTRUCTION SAFETY AT SITE IS THE CONTRACTOR'S RESPONSIBILITY.

(c) THIS P.E.D. WILL BE CONSIDERED INVALID IF ALTERED BY ANY MEANS.

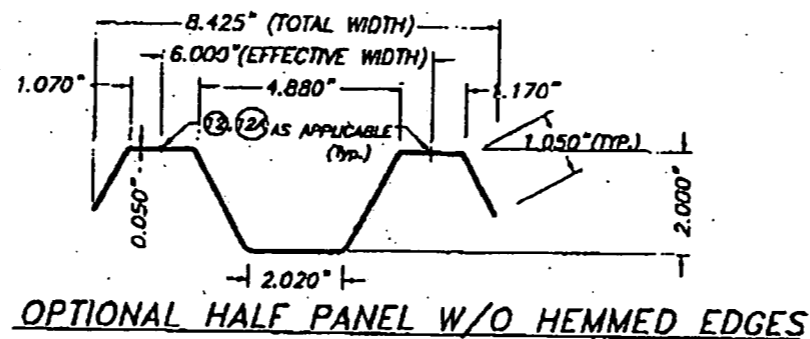
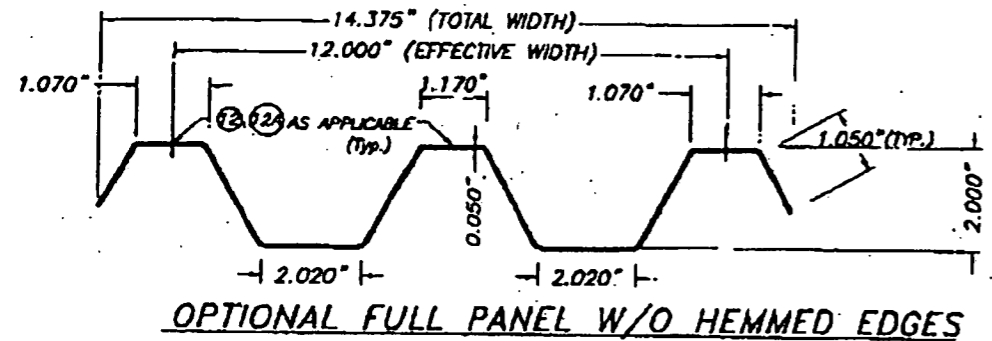
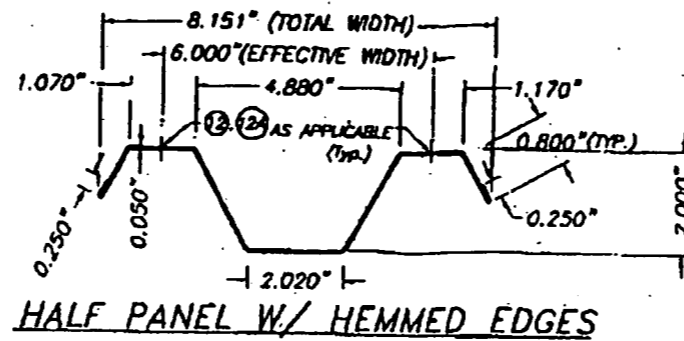
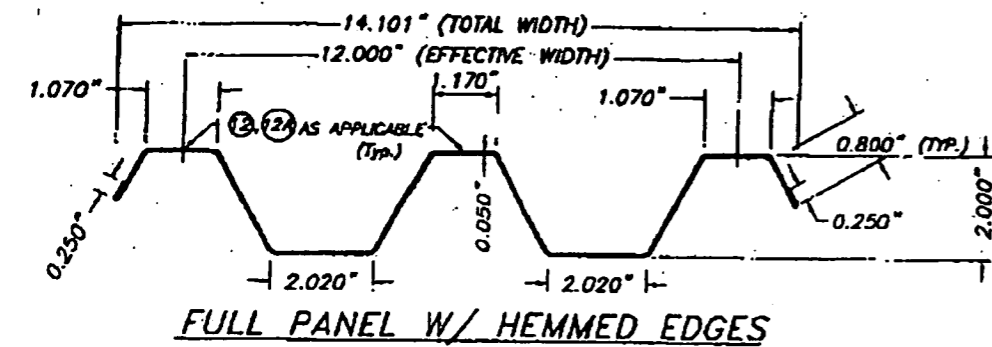
(d) SITE SPECIFIC PROJECTS SHALL BE PREPARED BY A FLORIDA REGISTERED ENGINEER OR ARCHITECT WHICH WILL BECOME THE ENGINEER OF RECORD (E.O.R.) FOR THE PROJECT AND WHO WILL BE RESPONSIBLE FOR THE PROPER USE OF THE P.E.D. ENGINEER OF RECORD, ACTING AS A DELEGATED ENGINEER TO THE P.E.D. ENGINEER, SHALL SUBMIT TO THIS LATTER THE SITE SPECIFIC DRAWINGS FOR REVIEW.

(e) THIS P.E.D. SHALL BEAR THE DATE AND ORIGINAL SEAL AND SIGNATURE OF THE PROFESSIONAL ENGINEER OF RECORD THAT PREPARED IT.

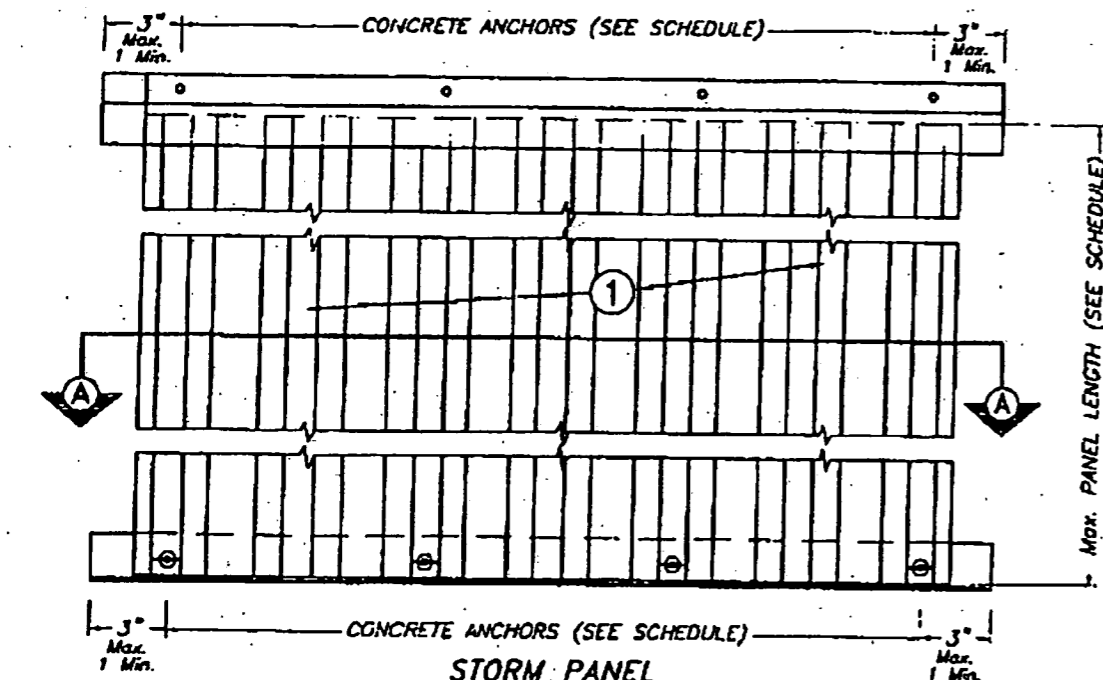
11. SHUTTER MANUFACTURER'S LABEL SHALL BE PLACED ON THE EXPOSED SURFACE OF THE SIDE RAIL APPROXIMATELY 4" ABOVE THE BOTTOM OF SUCH RAIL. LABEL SHALL READ AS FOLLOWS:  
EASTERN METAL SUPPLY, INC  
WEST PALM BEACH, FL  
FLORIDA STATEWIDE PRODUCT APPROVED.

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

<p>TILECO Inc. TILIT TESTING &amp; ENGINEERING COMPANY 4325 N.W. 36th St., Ste. 202, WICKHAM GARDENS, FL 33408 Phone: (407) 71-1539, Fax: (407) 71-1531 E-mail: 0006719@tileco.com WALTER A. TILIT, P. E. FLORIDA LIC. 44187</p>		0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)		N.D.Y. DRAWN BY:	
		EASTERN METAL SUPPLY, INC 4288 WEST ROAD DRIVE WEST PALM BEACH, FL 33407		6/23/06 DATE	
		06-169		DRAWING No	
				SHEET 1 OF 17	

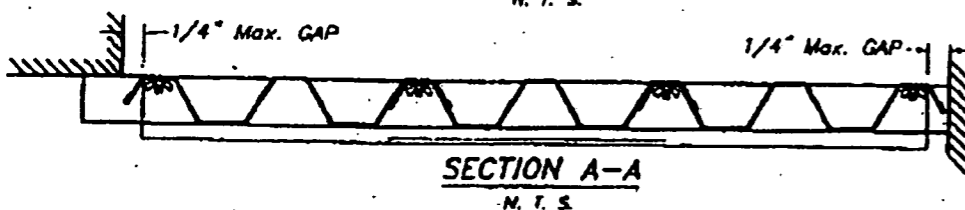


① **STORM PANEL**  
SCALE: 1/4" = 1'



**STORM PANEL  
TYPICAL ELEVATION**

N. T. S.



**MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND  
CORRESPONDING MAXIMUM PANEL LENGTH "L" SCHEDULE**

**PANELS RETAINED AT BOTH  
ENDS WITH TRACKS  
⑤⑥⑦⑧⑩⑪⑭  
OR DIRECT MOUNTED \***

MAXIMUM DESIGN PRESSURE RATING W (p.s.f.)	Max. PANEL LENGTH L (ft.)
+30.0, -30.0	13'-0"
+35.0, -35.0	12'-8"
+40.0, -40.0	12'-4"
+45.0, -45.0	12'-0"
+50.0, -50.0	11'-0"
+55.0, -55.0	10'-0"
+60.0, -60.0	9'-4"
+70.0, -70.0	8'-0"
+80.0, -80.0	7'-0"
+90.0, -90.0	6'-3"
+90.0, -100.0	5'-7"
+90.0, -110.0	5'-1"
+90.0, -120.0	4'-8"
+90.0, -130.0	4'-0"

**PANELS RETAINED AT LEAST  
IN ONE OF THEIR ENDS  
WITH TRACKS  
②③④ OR ⑨\***

MAXIMUM DESIGN PRESSURE RATING W (p.s.f.)	Max. PANEL LENGTH L (ft.)
+30.0, -30.0	13'-0"
+35.0, -35.0	12'-0"
+40.0, -40.0	11'-3"
+45.0, -45.0	10'-0"
+50.0, -50.0	9'-0"
+55.0, -55.0	8'-2"
+60.0, -60.0	7'-6"
+70.0, -70.0	6'-5"
+80.0, -80.0	5'-8"
+90.0, -90.0	5'-0"
+90.0, -100.0	5'-0"
+90.0, -110.0	5'-0"
+80.0, -120.0	4'-9"
+90.0, -130.0	4'-4 1/2"

**\* NOTE:**  
MAX. DESIGN LOAD & MAXIMUM PANEL LENGTH FOR INTERNALLY REMOVABLE PANELS AS PER MOUNTING INSTALLATIONS ON SHEET 7 OF 17 IS +50.0, -50.0 p.s.f. W/ 88" MAX. PANEL LENGTH.  
MAX. DESIGN LOAD & MAXIMUM PANEL LENGTH FOR MOUNTING AS PER ALTERNATIVE #11 AND 14 ON SHEET 14A AND 15 OF 17, RESPECTIVELY, ARE +50.0, -60.0 p.s.f. FOR 78" MAX. PANEL LENGTH, AND +50.0, -50.0 p.s.f. FOR UP TO 108" PANEL LENGTH.



**TILECO INC.**  
TILLIT TESTING & ENGINEERING COMPANY  
4325 N.W. 38th St., Ste. 305, WILMINGTON, FL 33408  
Phone: (305) 471-1830 Fax: (305) 471-1534  
EB-0006719  
WALTER A. TILLIT, JR., P. E.  
FLORIDA LIC. 44167

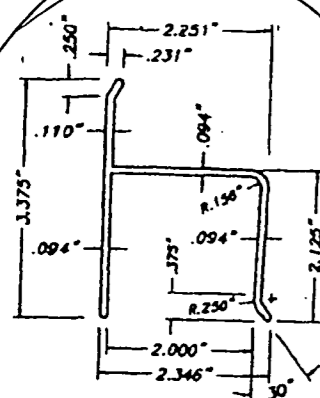
F.B.C./ (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)

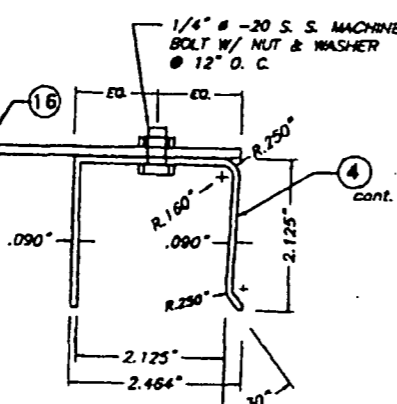
**EASTERN METAL SUPPLY, INC**  
4258 WEST ROADS DRIVE  
WEST PALM BEACH, FL 33407

M.C.V. / R.E. DRAWN BY: 6/23/05 DATE: 06-169 DRAWING No: SHEET 2 OF 17

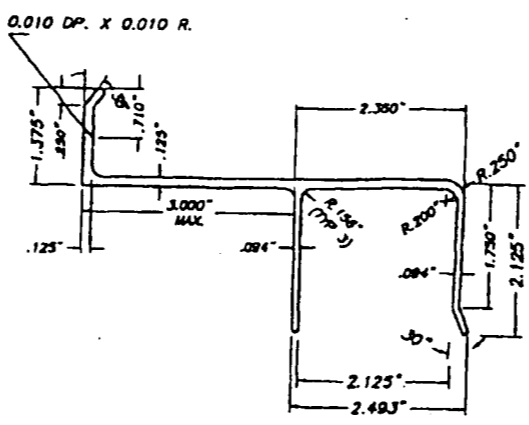
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD Dwg 05-204	4/23/04	2		
2	PANEL, LP	6/23/05	4		



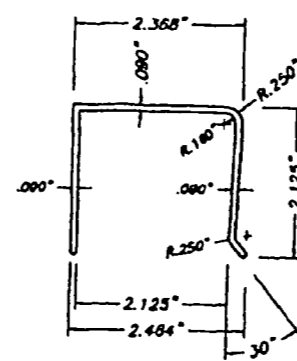
② "h" HEADER  
SCALE: 3/8" = 1"



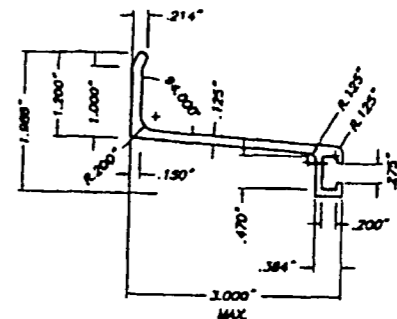
③ 3" Max. "U" BUILD OUT  
SCALE: 3/8" = 1"



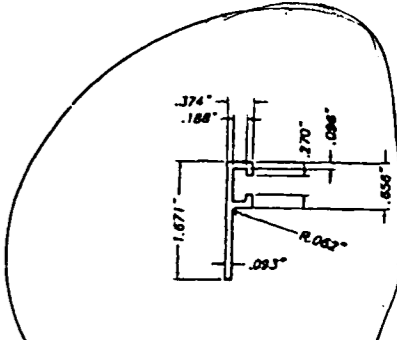
③A OPTIONAL 3" Max. "U" BUILD OUT HEADER  
SCALE: 3/8" = 1"



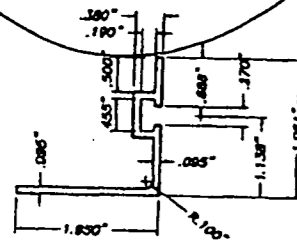
④ "U" HEADER  
SCALE: 3/8" = 1"



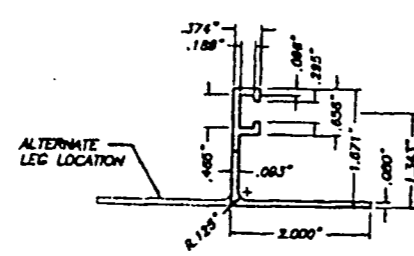
⑤ 3" MAX. ANGLE BUILD OUT BRACKET  
SCALE: 3/8" = 1"



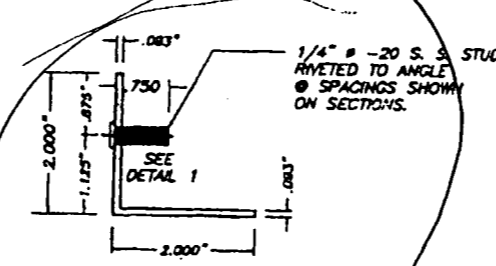
⑥ "F" TRACK  
SCALE: 3/8" = 1"



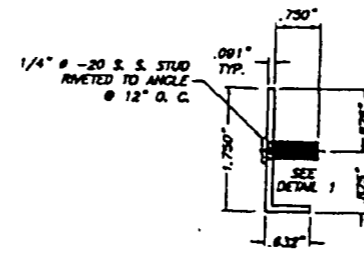
⑦ REVERSED "F" ANGLE TRACK  
SCALE: 3/8" = 1"



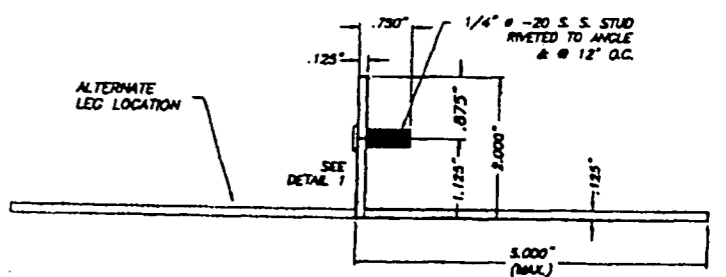
⑧ "F" TRACK ANGLE  
SCALE: 3/8" = 1"



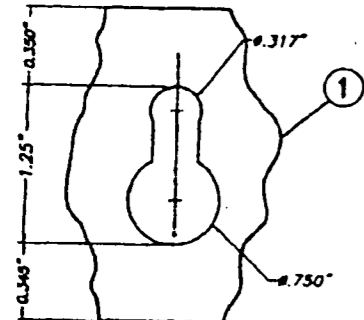
⑨ STUDDED ANGLE  
6063-T5 ALUM. ALLOY  
SCALE: 3/8" = 1"



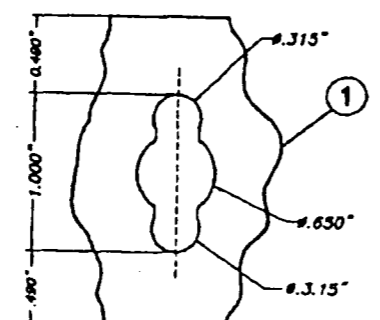
⑩ MINI WALL 1.75"x0.632" ANGLE WITH STUD  
SCALE: 1/2" = 1"



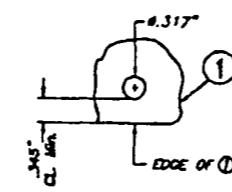
⑪ 2"x5"(MAX.)x1/8" ANGLE WITH STUD  
SCALE: 3/8" = 1"



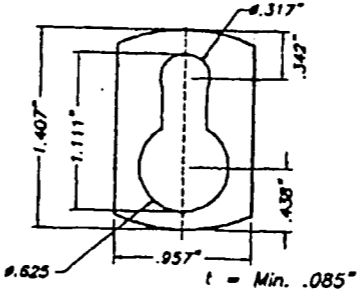
LARGE KEY HOLE (OPTION 1)  
SCALE: 3/8" = 1"



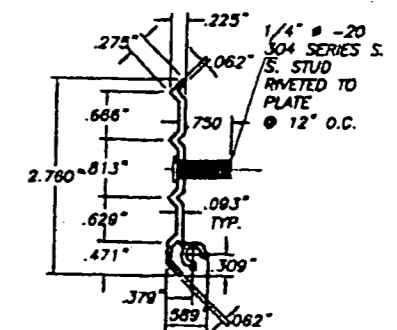
SMALL KEY HOLE (OPTION 2)  
SCALE: 3/8" = 1"



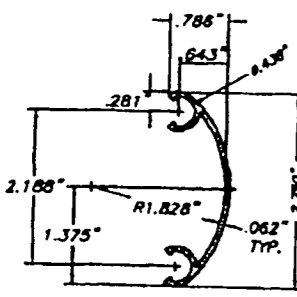
⑫A ROUND HOLE AT PANEL



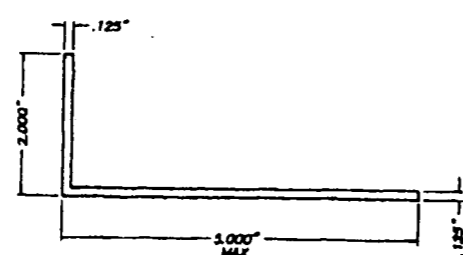
⑬ KEY HOLE WASHER  
3105-H154 ALUM. ALLOY  
SCALE: 3/4" = 1"



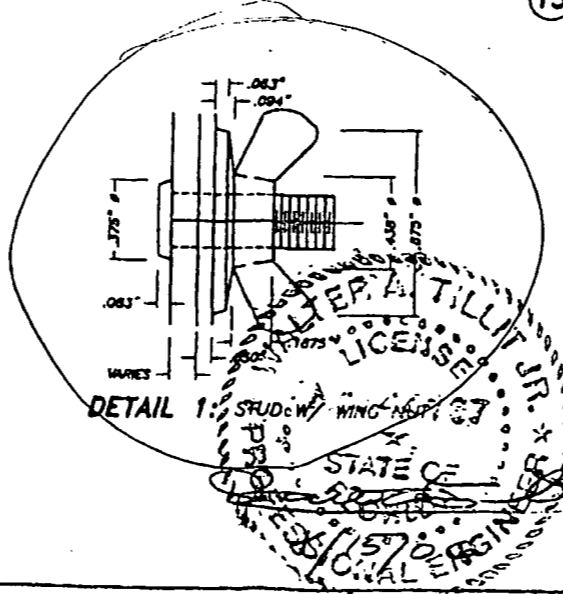
⑭ STUDDED PLATE  
6063-T5 ALLOY  
SCALE: 3/8" = 1"



⑮ SNAP CAP  
6063-T5 ALLOY  
SCALE: 3/8" = 1"

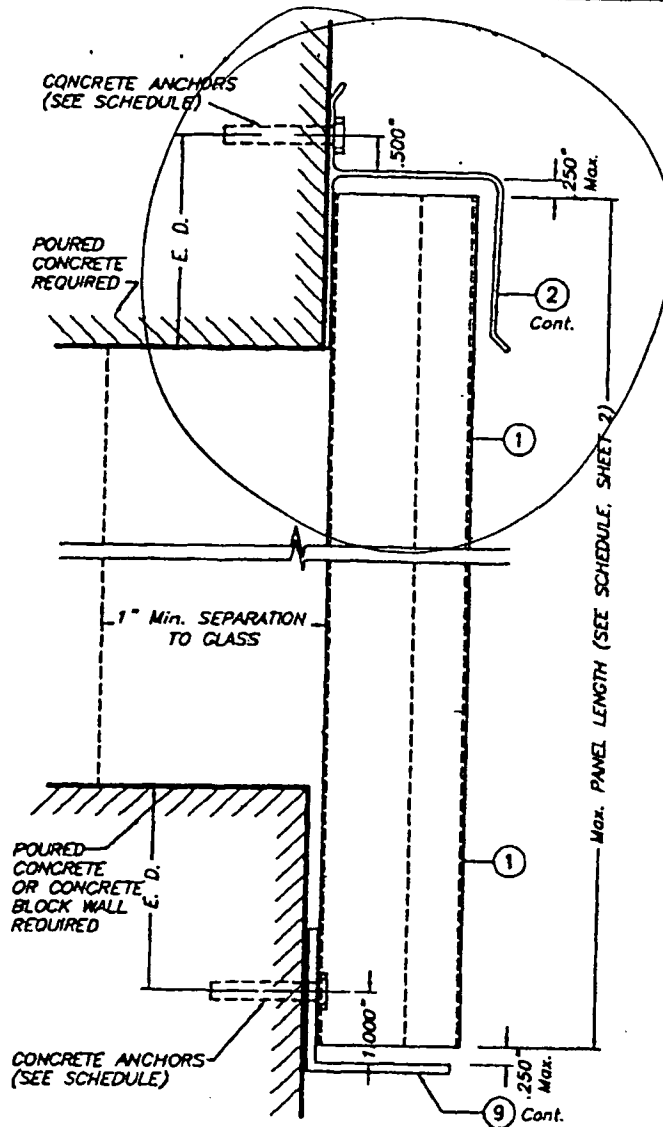


⑯ B.O. ANGLE  
SCALE: 3/4" = 1"

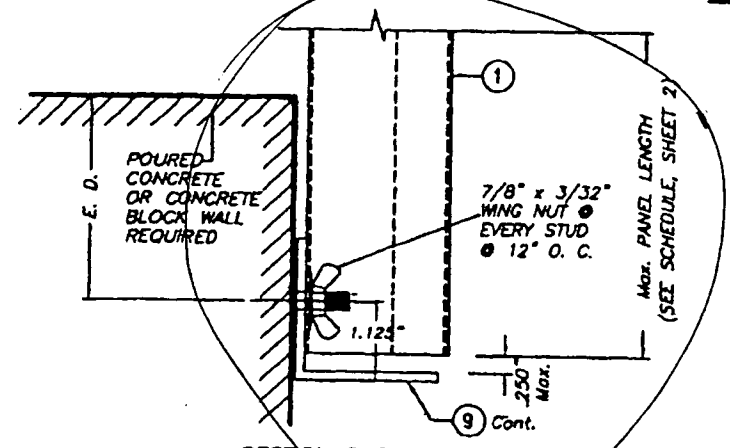


**COMPONENTS**

<p>TILTECO INC. TILLIT TESTING &amp; ENGINEERING COMPANY 6335 N.W. 36th St., Ste. 305, VIRGINIA GARDENS, FL 33166 Phone: (305)871-1530 Fax: (305)871-1531 EB-0006719 WALTER A. TILLIT Jr., P. E. FLORIDA Lic. 44167</p>		F.B.C./ (Non High Velocity Hurricane Zone)																	
		0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)	M.C.V. DRAWN BY:																
<p>EASTERN METAL SUPPLY, INC 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407</p>		6/23/08 DATE	06-169 DRAWING No																
		<table border="1"> <thead> <tr> <th>REV. NO</th> <th>DESCRIPTION</th> <th>DATE</th> <th>REV. NO</th> <th>DESCRIPTION</th> <th>DATE</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>OLD DRG 05-284</td> <td>6/23/08</td> <td>2</td> <td></td> <td></td> </tr> <tr> <td>2</td> <td></td> <td></td> <td>3</td> <td></td> <td></td> </tr> </tbody> </table>		REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION	DATE	1	OLD DRG 05-284	6/23/08	2			2			3
REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION	DATE														
1	OLD DRG 05-284	6/23/08	2																
2			3																
		SHEET 3 OF 17																	



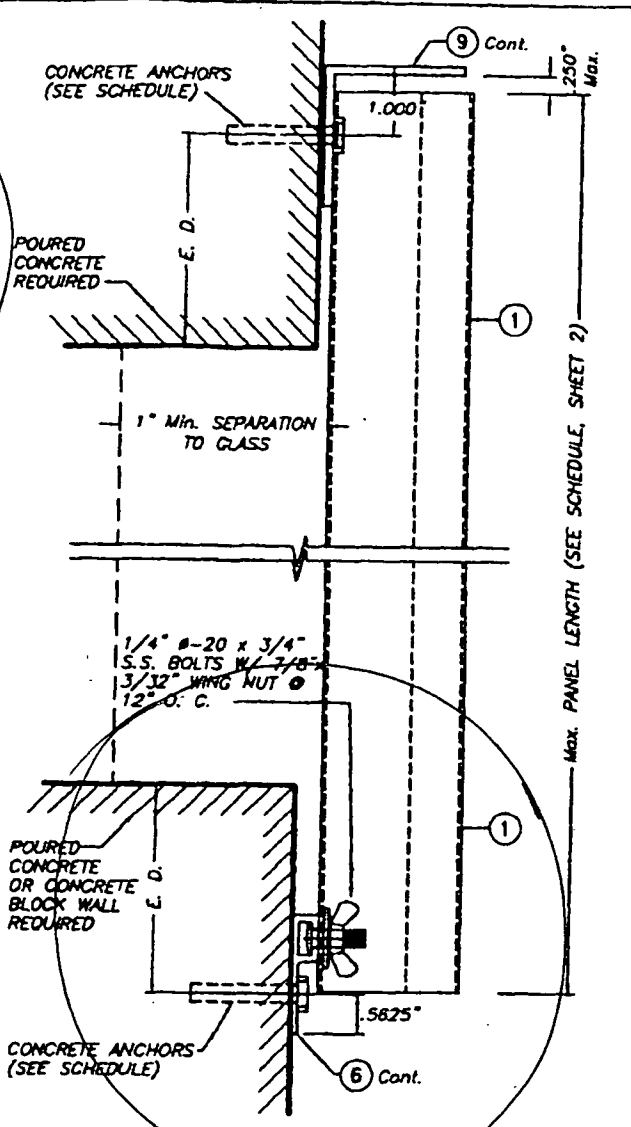
SECTION 1 ANCHOR



SECTION 2 STUD

WALL MOUNTING INSTALLATION SECTION 1 SCALE: 1/2" = 1"

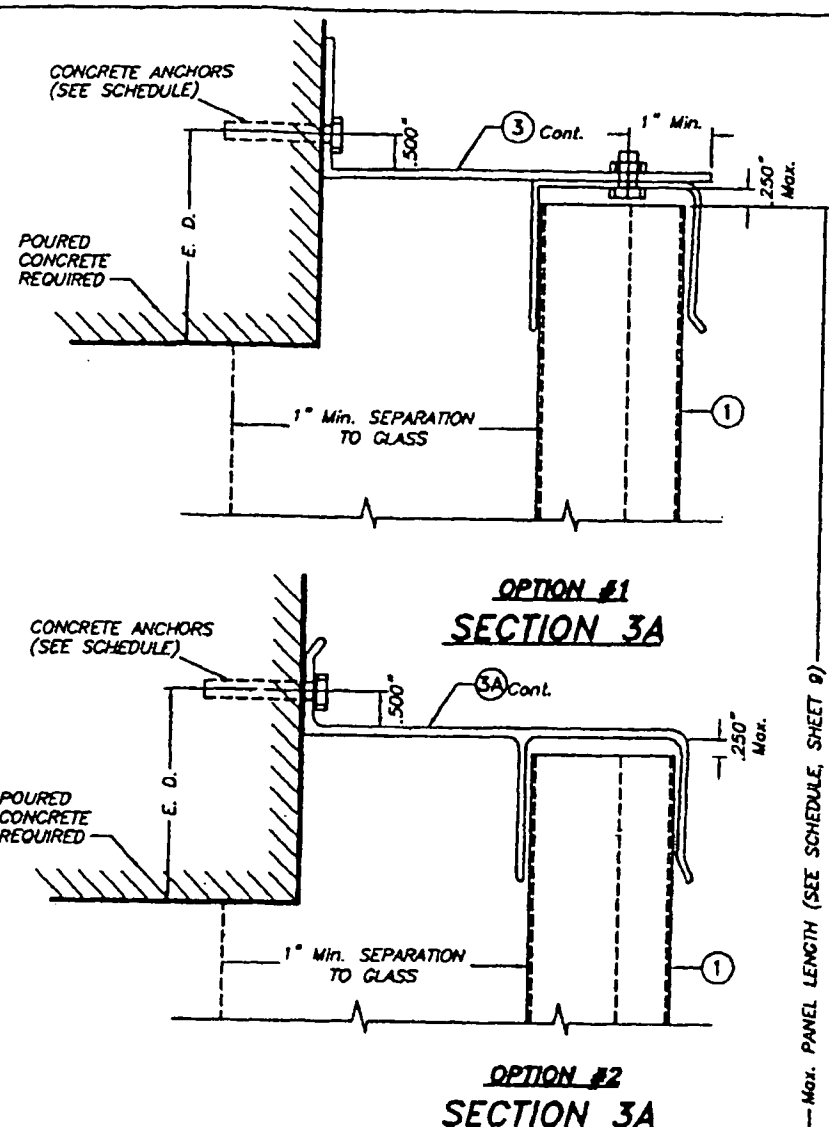
NOTE: DETAIL OF SECTION 2 STUD VALID ALSO FOR WALL MOUNTING INSTALLATION - SECTION 2 (TOP)



WALL MOUNTING INSTALLATION SECTION 2 SCALE: 1/2" = 1"

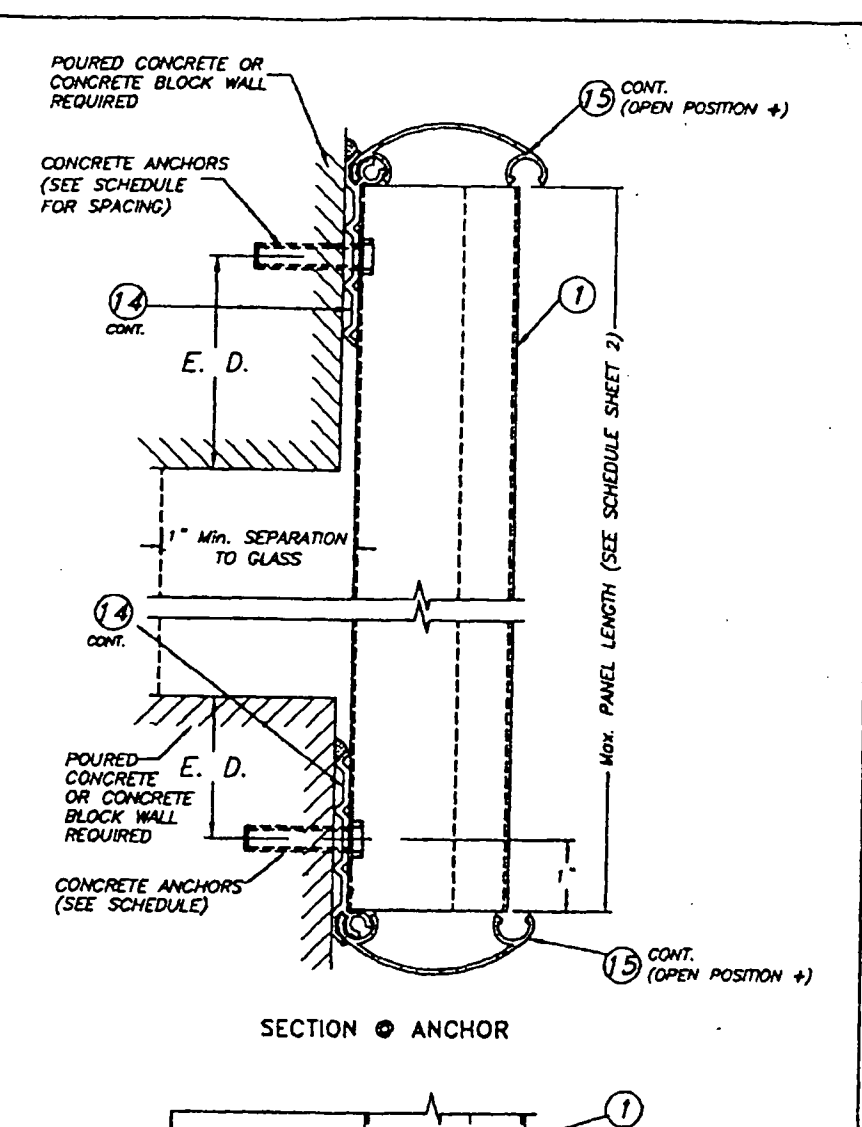
E. D. = EDGE DISTANCE (SEE SCHEDULE ON SHEETS 9 & 10 & 11)

NOTE FOR COMBINATION OF SECTIONS: WALL MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

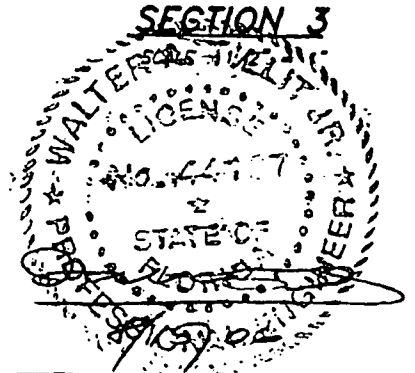


BUILD OUT INSTALLATION SECTION 3

+ NOTE: SNAP CAP (15) TO REMAIN CLOSED AT NON HURRICANE CONDITIONS.



SECTION 4 ANCHOR SECTION 4 STUD TYP. TOP/BOTTOM WALL MOUNTING INSTALLATION SECTION 4 SCALE: 1/2" = 1"

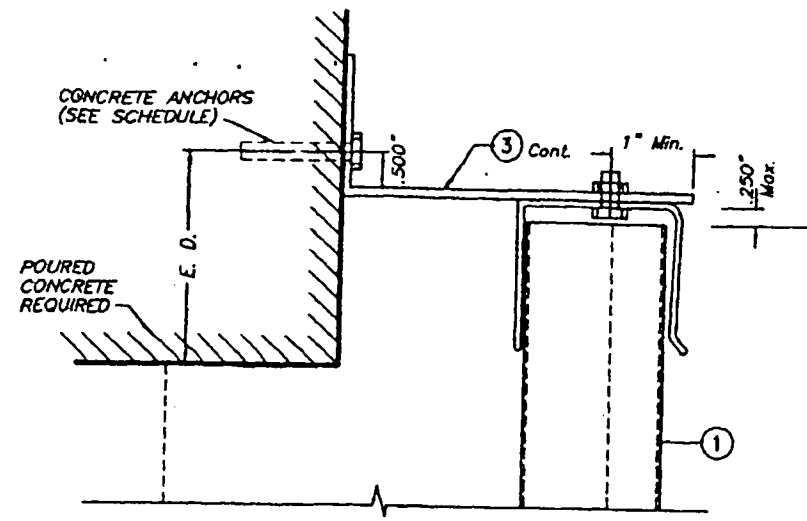


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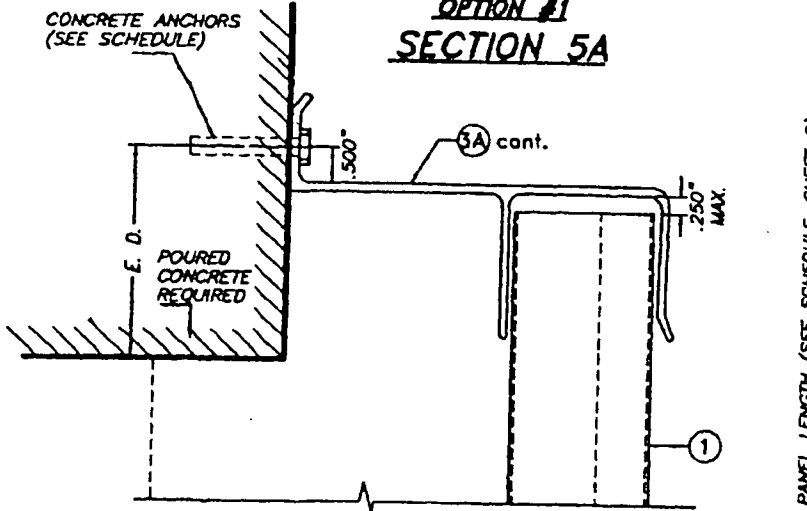
F.B.C./ (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)		M.C.V. DRAWN BY:
EASTERN METAL SUPPLY, INC		6/23/06 DATE
4288 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		06-169 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD DWG 05-254	6/23/06
2		
3		
		SHEET 4 OF 17

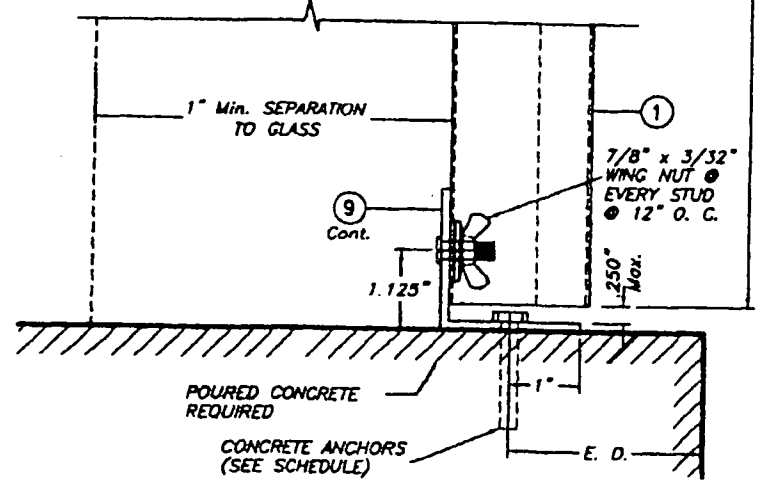




**OPTION #1  
SECTION 5A**

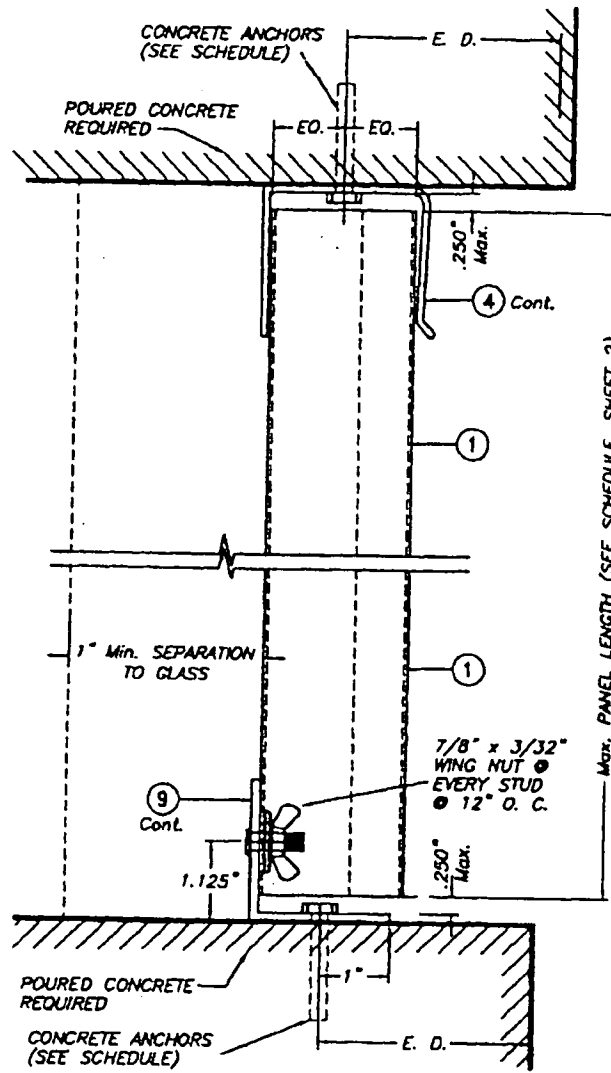


**OPTION #2  
SECTION 5A**



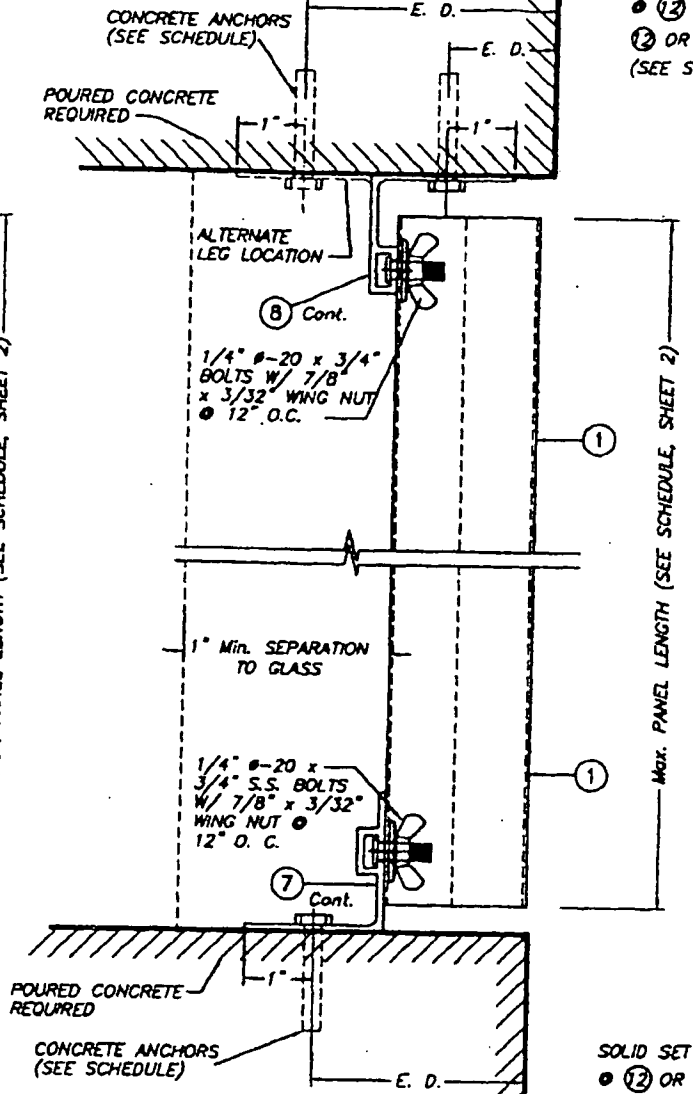
**BUILD-OUT & FLOOR MOUNTING  
INSTALLATION - SECTION 5**

SCALE : 1/2" = 1"



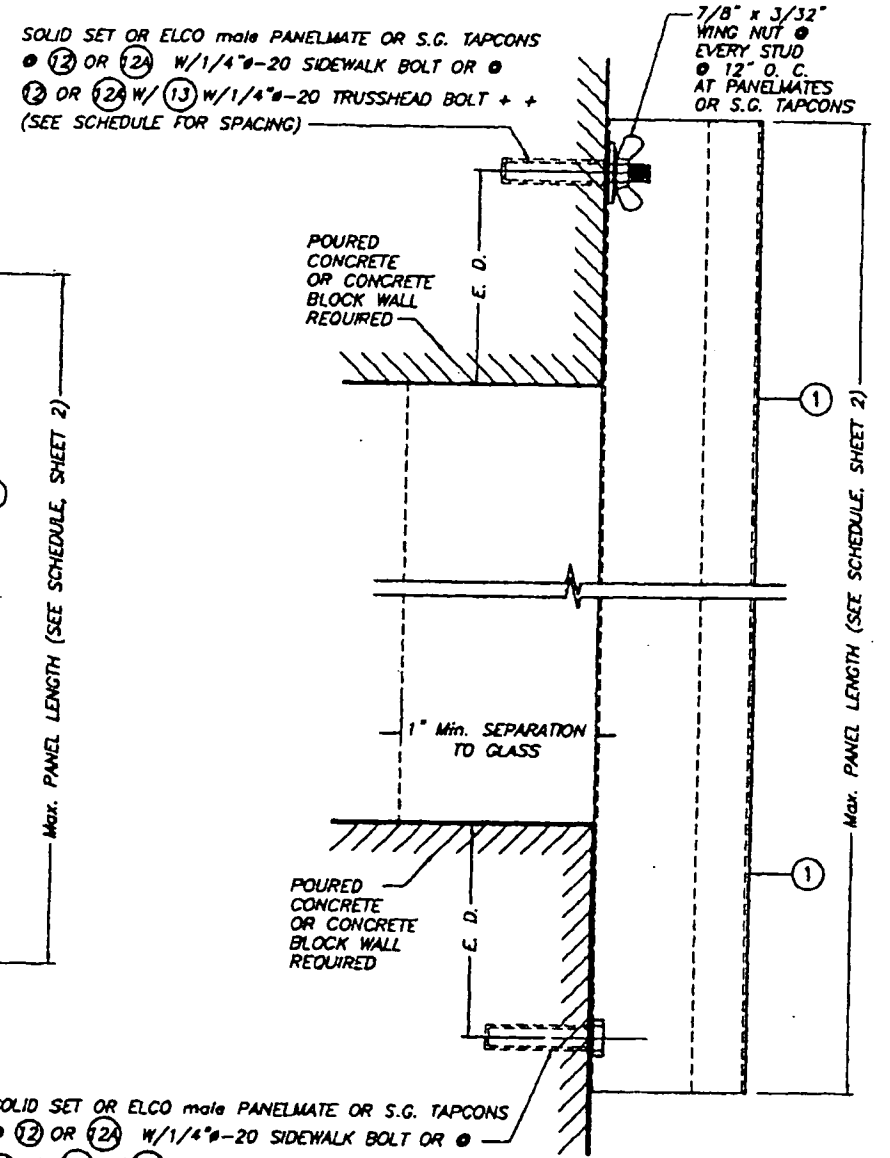
**CEILING & FLOOR MOUNTING  
INSTALLATION - SECTION 6**

SCALE : 1/2" = 1"



**CEILING & FLOOR MOUNTING  
INSTALLATION - SECTION 7**

SCALE : 1/2" = 1"

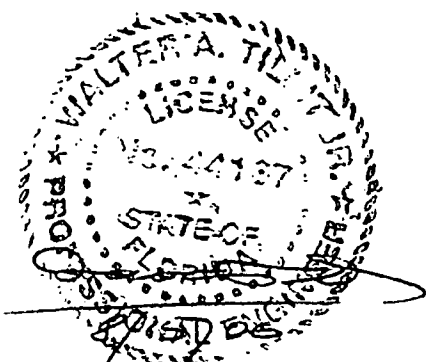


**DIRECT WALL MOUNTING INSTALLATION (D. M.)  
- SECTION 8**

SCALE : 1/2" = 1"

E. D. = EDGE DISTANCE  
(SEE SCHEDULE ON  
SHEETS 9 & 10 & 11)

NOTE FOR COMBINATION OF SECTIONS :  
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE  
COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



**TILTECO INC.**  
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FLORIDA Lic. 44187

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

0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)		M.C.V. DRAWN BY:
EASTERN METAL SUPPLY, INC		6/23/08 DATE
4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		06-169 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD DWG 05-204	4/23/08
2		

SHEET 5 OF 17

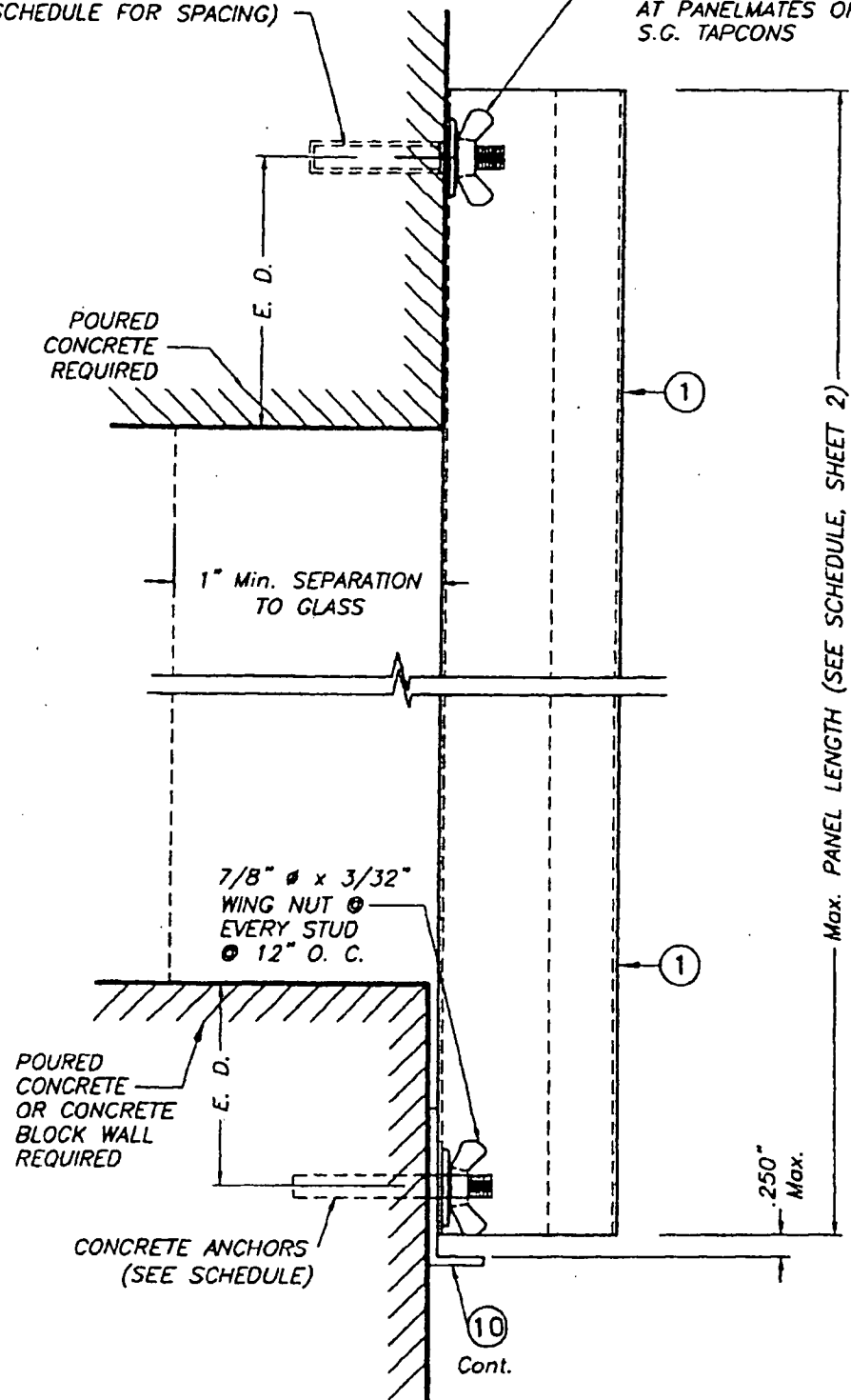
SOLID SET OR ELCO male PANELMATE OR S.G. TAPCONS

⊙ 12 OR 12A W/1/4"⊖-20 SIDEWALK BOLT OR ⊙

12 OR 12A W/ 13 W/1/4"⊖-20 TRUSSHEAD BOLT + +

(SEE SCHEDULE FOR SPACING)

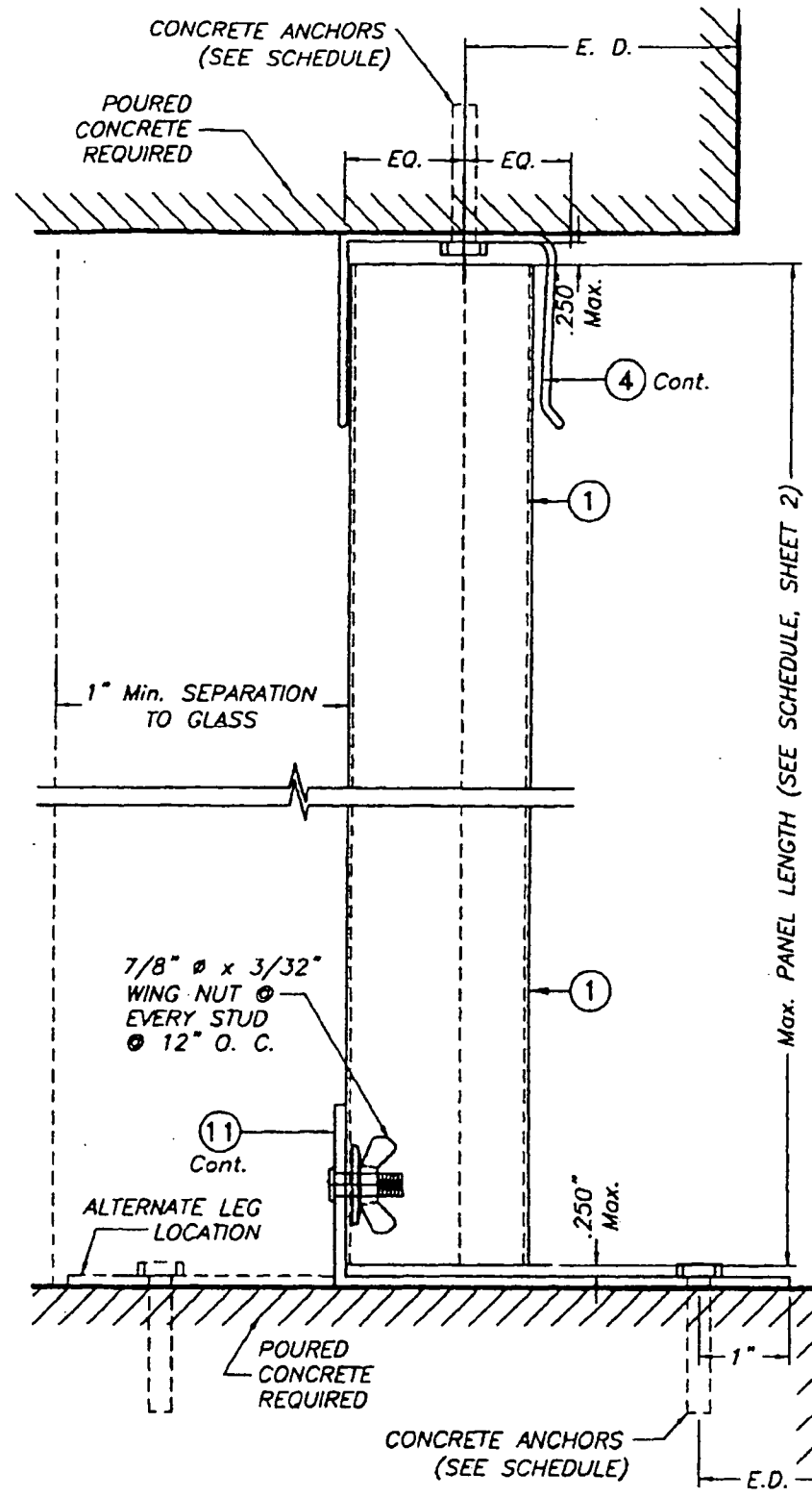
7/8"⊖ x 3/32" WING NUTS ⊙ 12" O.C. AT PANELMATES OR S.G. TAPCONS



**WALL MOUNTING INSTALLATION**

**SECTION 9**

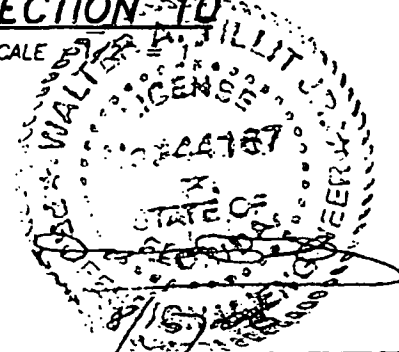
SCALE : 1/2" = 1"



**CEILING & FLOOR MOUNTING INSTALLATION**

**SECTION 10**

SCALE



E. D. = EDGE DISTANCE  
(SEE SCHEDULE ON SHEETS 9 & 10 & 11)

NOTE FOR COMBINATION OF SECTIONS :  
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

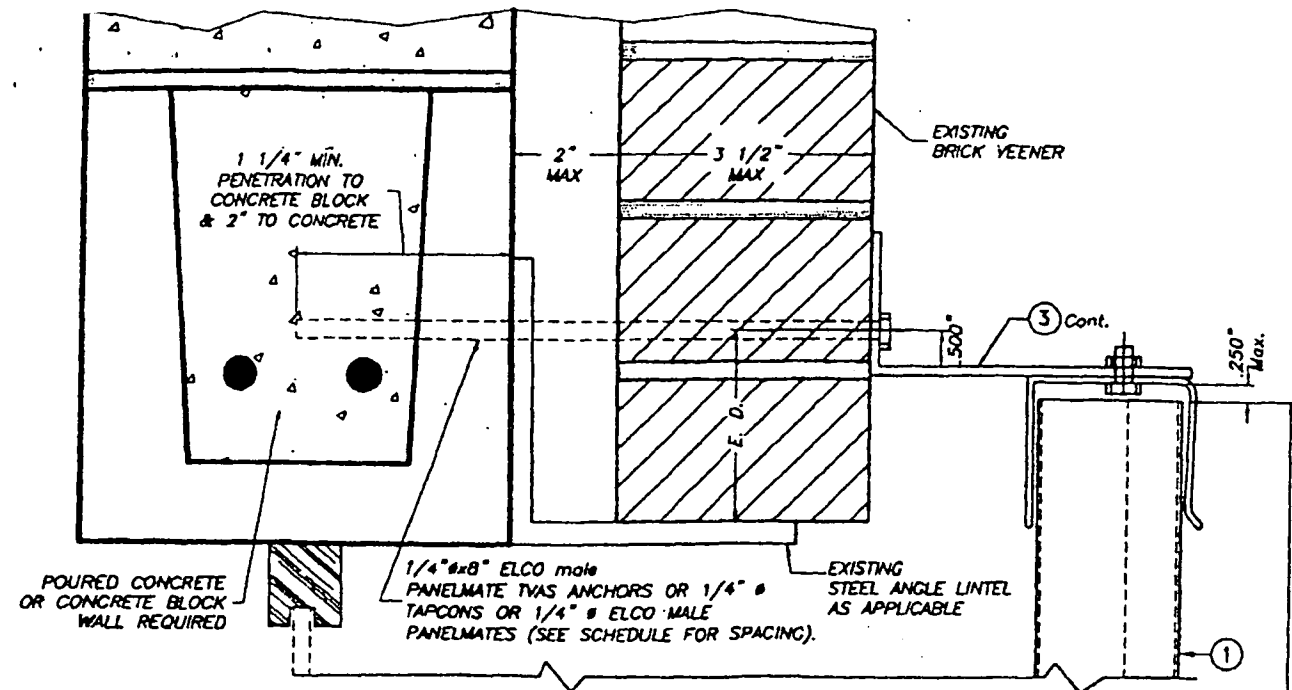
+ +  
SIDE WALK BOLTS ARE 3/4"⊖x3/32" THICK HEAD MACHINE SCREW W/LENGTH AS PER NOTES A.2 & B.2 (SHEET 1)  
+ +  
TRUSS HEAD BOLTS ARE 1/2"⊖x1/8" THICK HEAD MACHINE SCREW W/LENGTH AS PER NOTES A.2 & B.2 (SHEET 1)

**TILECO INC.**  
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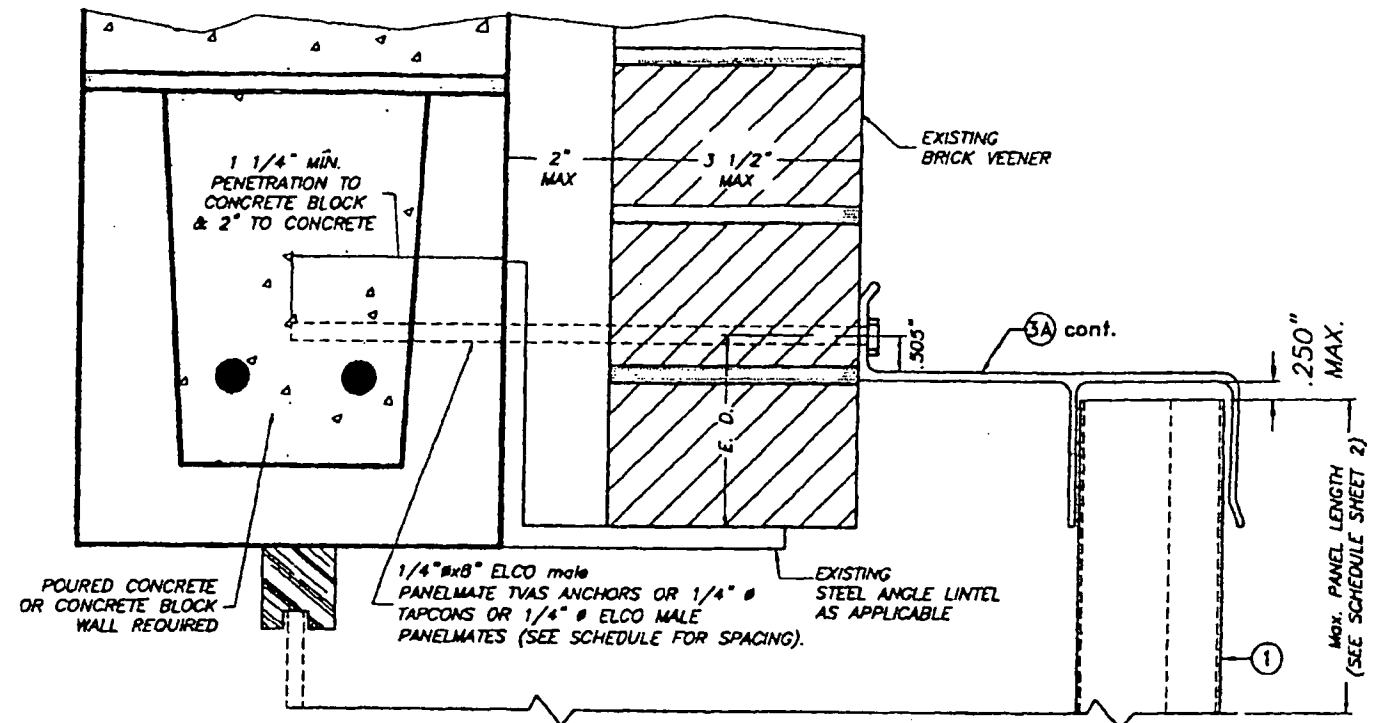
F.B.C./ (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)		M.C.V. DRAWN BY:
EASTERN METAL SUPPLY, INC		6/23/08 DATE
4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		06-169 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD DWG 05-284	6/23/08
2		

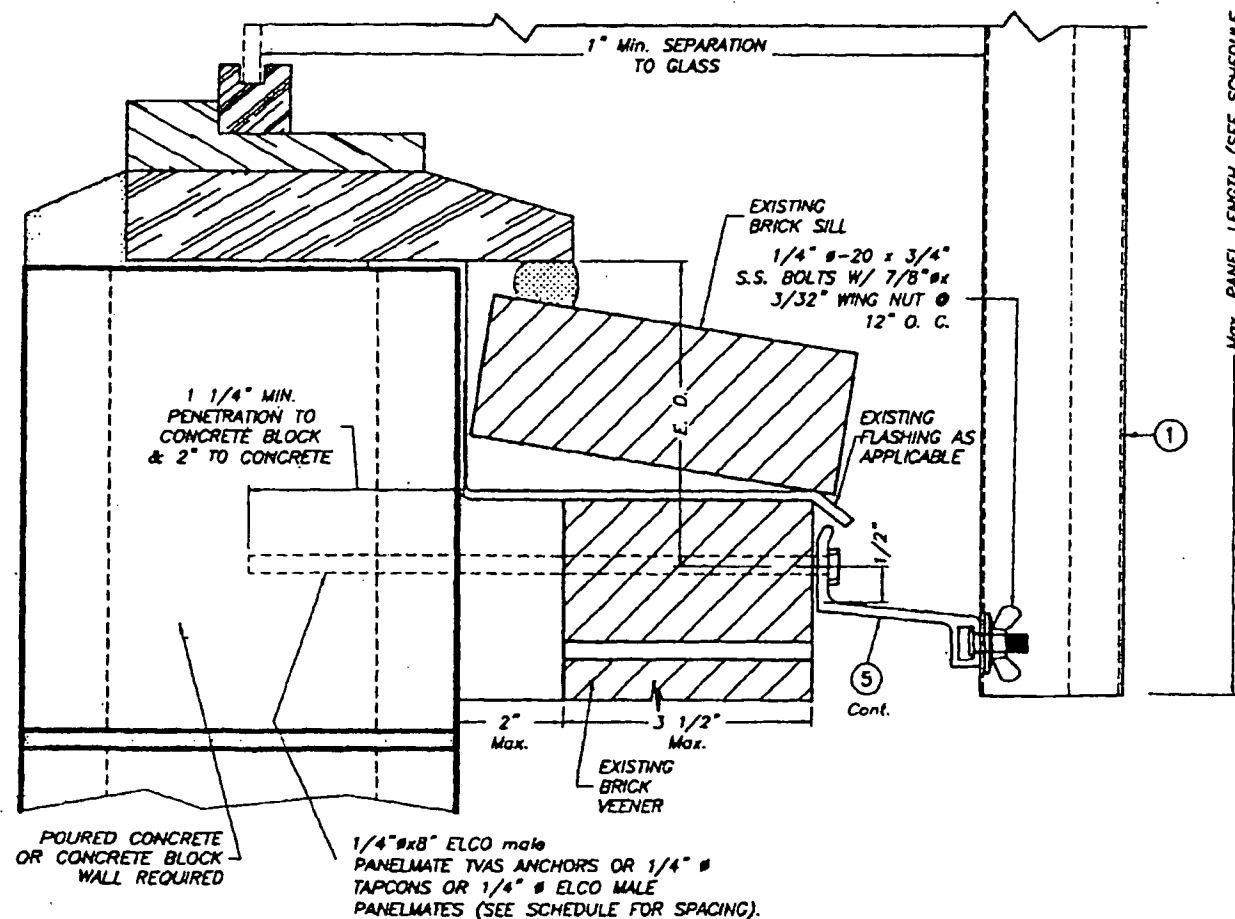
SHEET 6 OF 17



**OPTION #1  
SECTION 11A**



**OPTION #2  
SECTION 11A**



**BUILD OUT INSTALLATION  
SECTION 11**

SCALE: 3/8" = 1"

E. D. - EDGE DISTANCE  
(SEE SCHEDULE ON  
SHEETS 9 & 10 & 11)

NOTE FOR COMBINATION OF SECTIONS:  
WALL/FLOOR/CILING MOUNTING SECTIONS CAN BE  
COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

++  
SIDE WALK BOLTS ARE 3/4" x 3/32" THICK  
HEAD MACHINE SCREW W/LENGTH  
AS PER NOTES A.2 & B.2 (SHEET 1)  
++  
TRUSS HEAD BOLTS ARE 1/2" x 1/8" THICK  
HEAD MACHINE SCREW W/LENGTH  
AS PER NOTES A.2 & B.2 (SHEET 1)

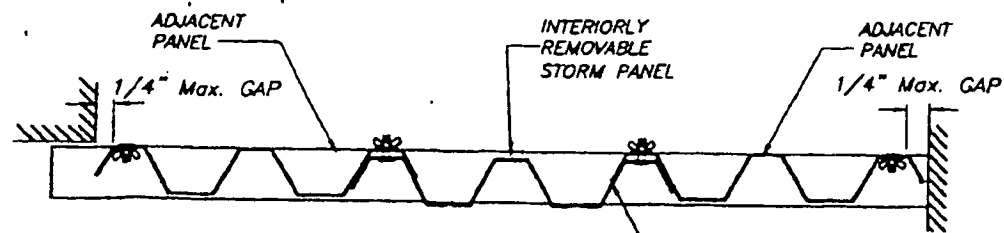


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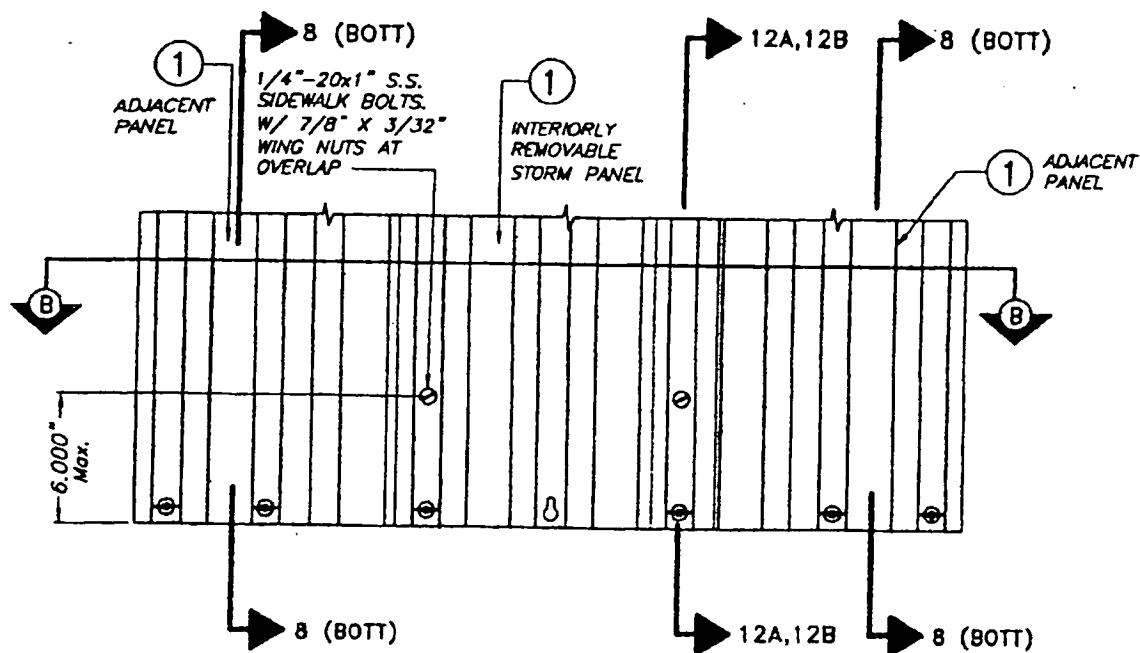
0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)		M.C.V. DRAWN BY:
EASTERN METAL SUPPLY, INC		6/23/06 DATE
4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		06-169 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD DWG 05-284	6/23/06
2		

SHEET 6A OF 17



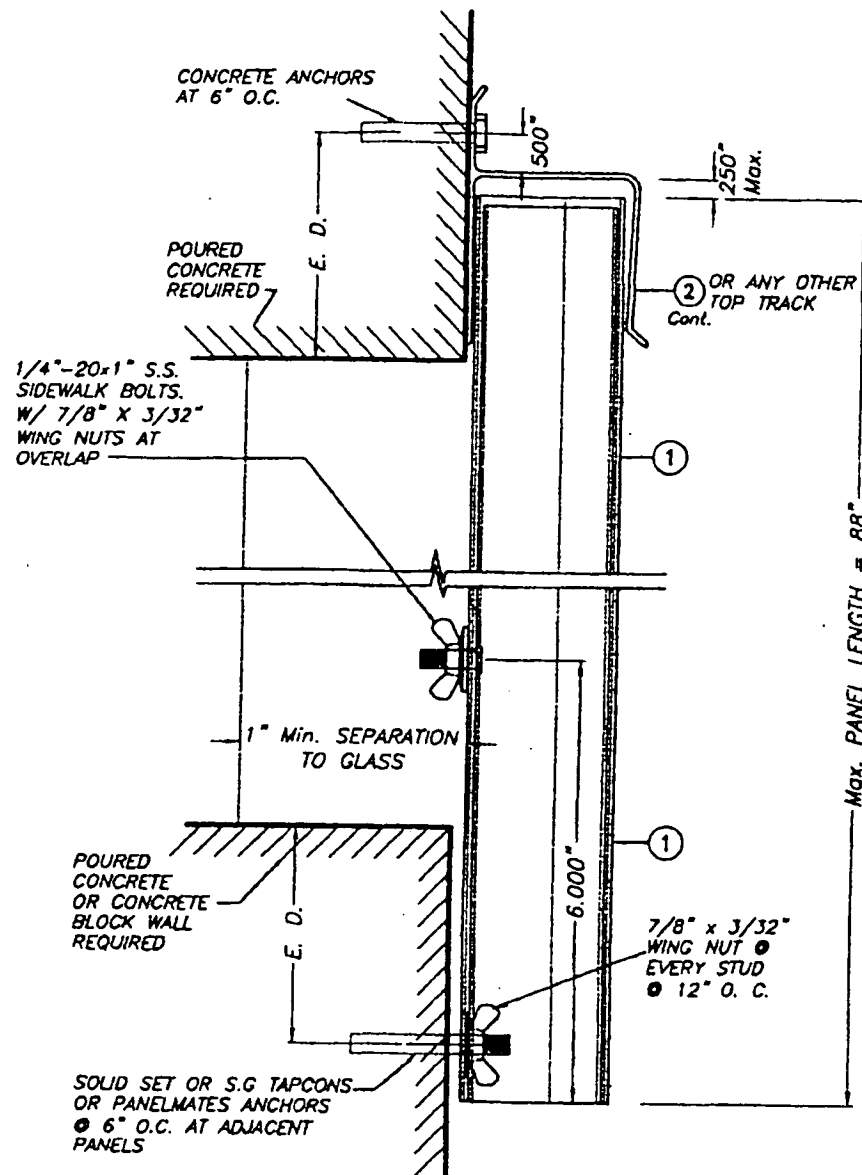
**SECTION B-B**

SCALE : 1 1/2" = 1"



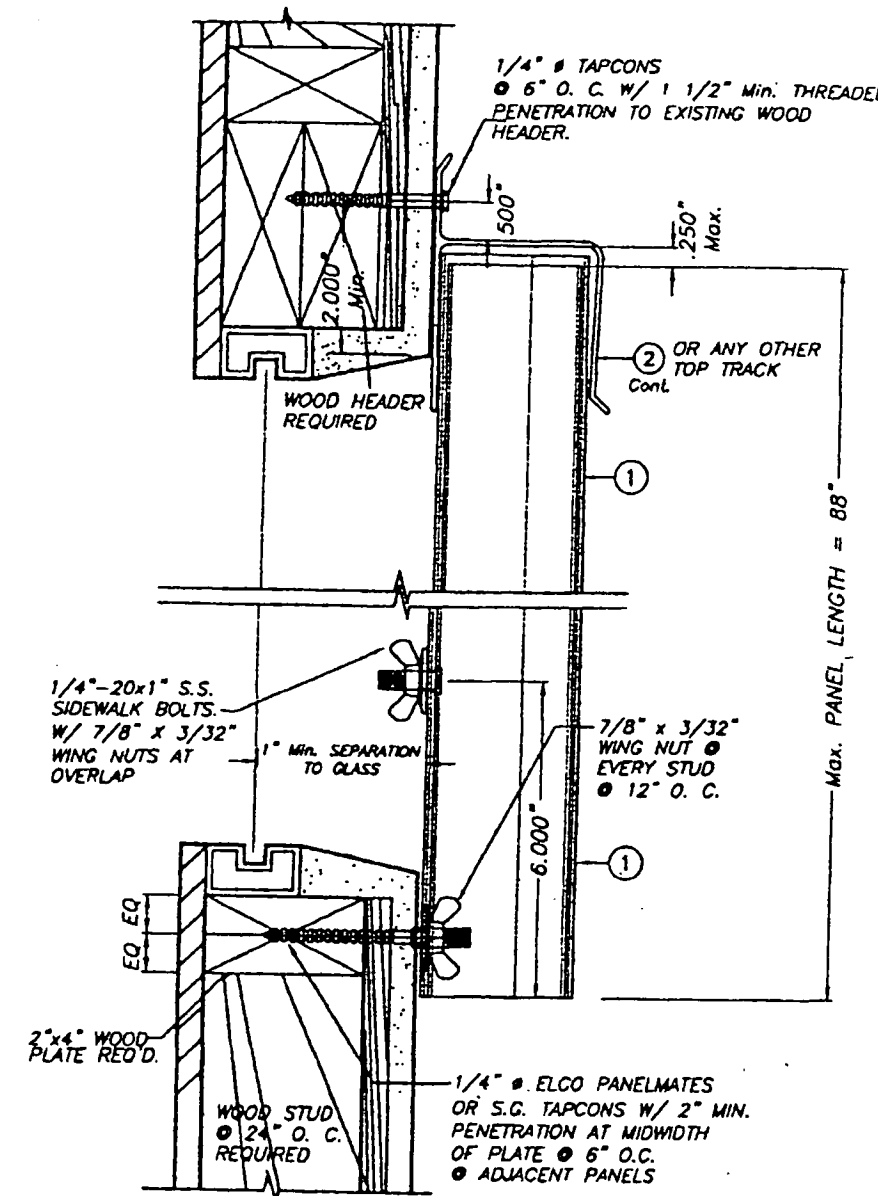
**INTERIORLY REMOVABLE STORM PANEL  
PARTIAL ELEVATION**

SCALE : 1 1/2" = 1"



**WALL MOUNTING INSTALLATION  
SECTION 12A**

SCALE : 1/2" = 1"

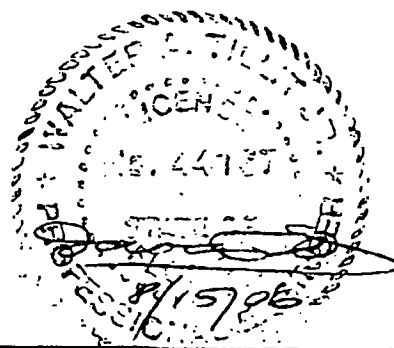


**WALL MOUNTING INSTALLATION  
SECTION 12B**

SCALE : 1/2" = 1"

**INTERIORLY REMOVABLE STORM PANEL SECTIONS**

MAX. DESIGN LOAD = +50.0, -50.0 p.s.f.

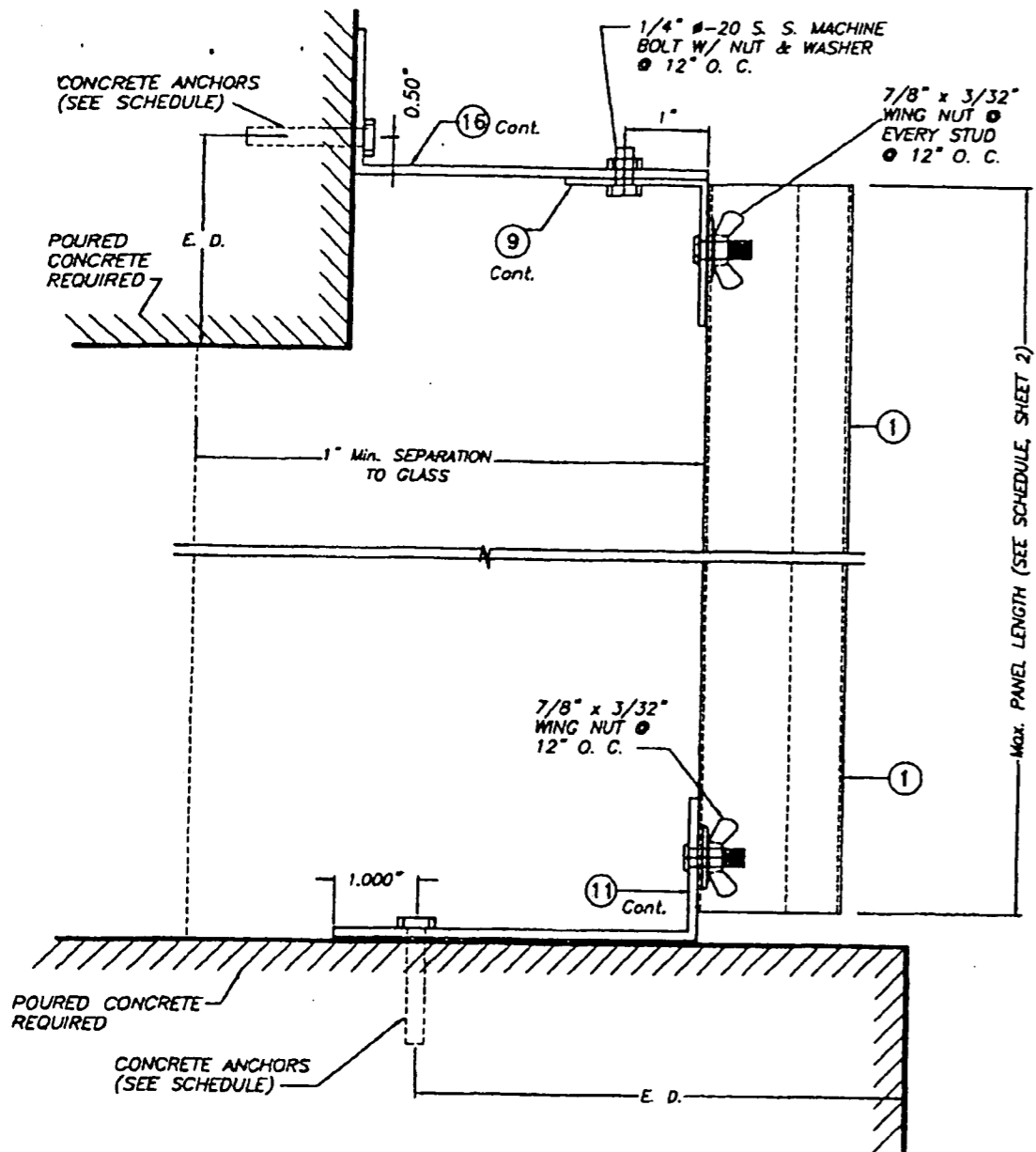


**TILECO INC.**  
TILLIT TESTING & ENGINEERING COMPANY  
6355 N.W. 39th St., Ste. 303, VIRGINIA GARDENS, FL 33109  
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EASTERN METAL SUPPLY, INC 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		6/23/08 DATE
		06-169 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD Dwg 05-284	6/23/08
2		

SHEET 7 OF 17

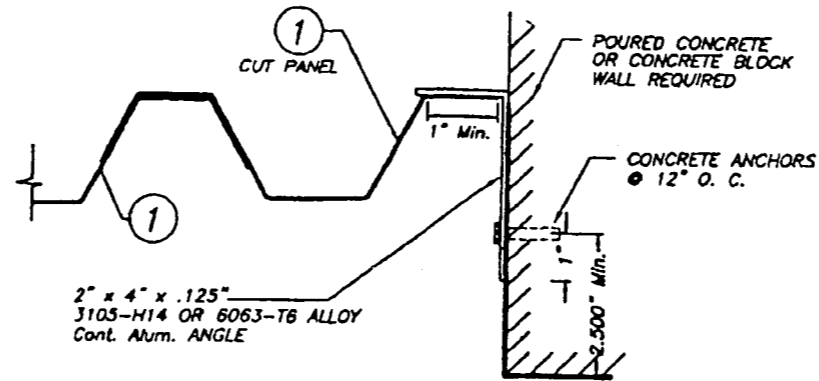


**CEILING & FLOOR MOUNTING  
INSTALLATION - SECTION 13**

SCALE: 1/2" = 1"

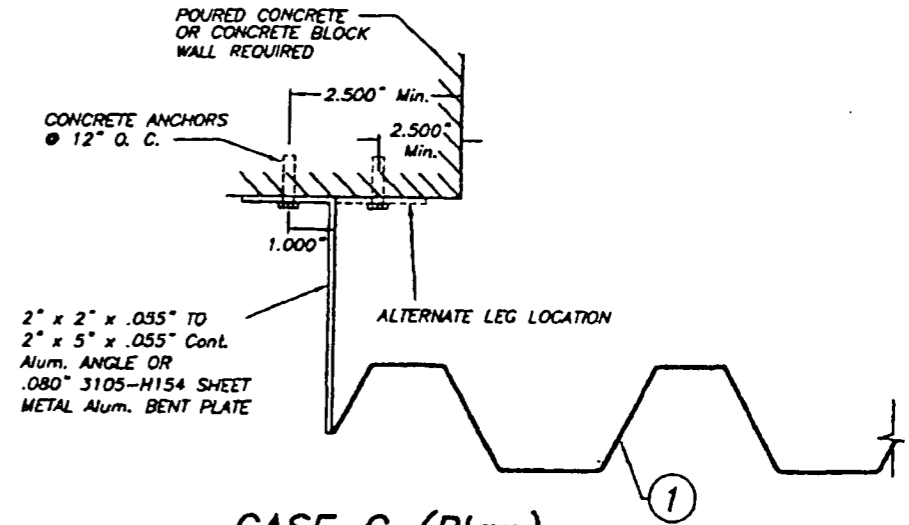
E. D. = EDGE DISTANCE  
(SEE SCHEDULE ON  
SHEETS 9, 10 & 11)

**NOTE FOR COMBINATION OF SECTIONS:**  
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE  
COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



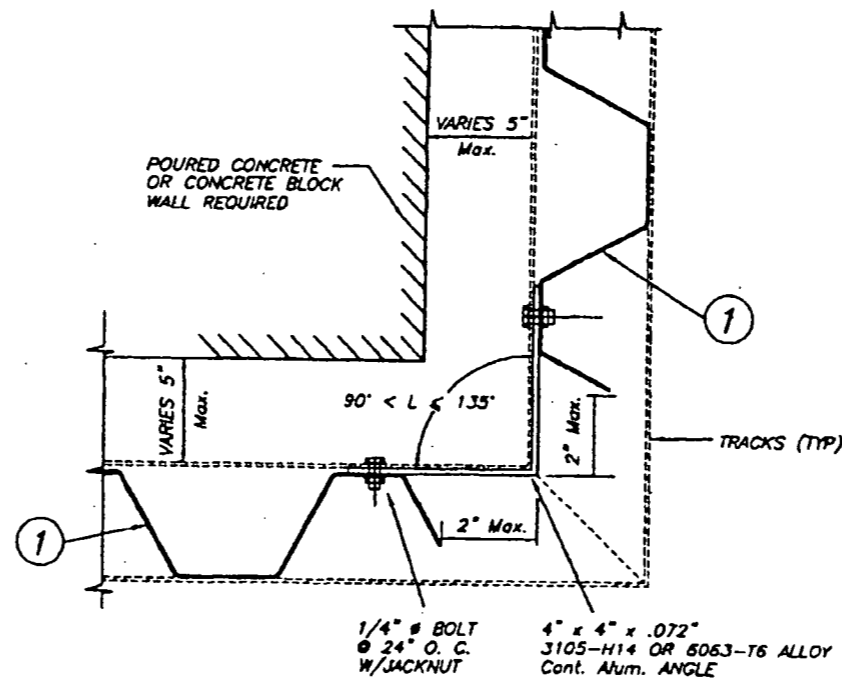
**CASE A (Plan)**

SCALE: 1/4" = 1"



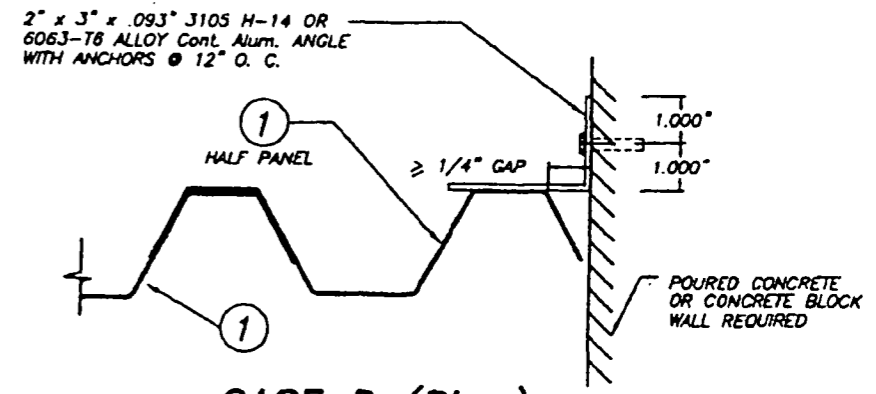
**CASE C (Plan)**

SCALE: 1/4" = 1"



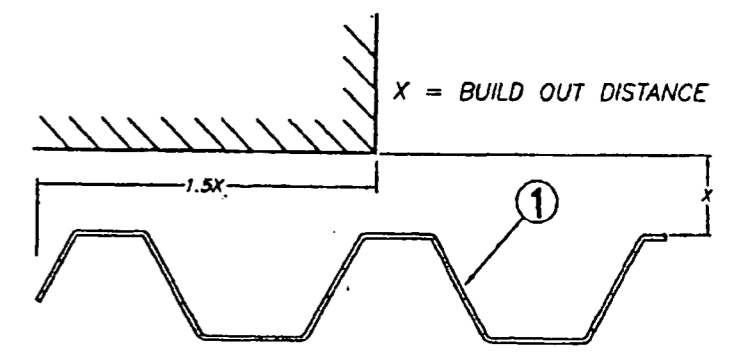
**CASE B (Plan)**

SCALE: 1/4" = 1"



**CASE D (Plan)**

SCALE: 1/4" = 1"



**CASE E (Plan)**

SCALE: 1/4" = 1"

**END CLOSURES DETAILS**



**TILTECO INC.**  
TILLIT TESTING & ENGINEERING COMPANY  
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0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)		M.C.V. DRAWN BY:
EASTERN METAL SUPPLY, INC 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		8/23/08 DATE
		06-169 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD DWG 05-284	8/23/04
2		

SHEET 8 OF 17

**MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS IN CONCRETE AND CONCRETE BLOCK STRUCTURES**

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATES		PANELMATE TVAS			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
+40.0 -40.0 OR LESS	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	1 (TOP)	8'-0" OR LESS
	12"	11"	12"	12"	12"	12"	12"	12"	12"	12"	1 (BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2 (TOP)	
	9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	2 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A (TOP)	
	9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	3 (BOTTOM)	
	12"	11"	12"	12"	12"	12"	12"	12"	12"	12"	4 (TOP)	
	12"	11"	12"	12"	12"	12"	12"	12"	12"	12"	4 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A (TOP)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	5 (BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	6 (TOP)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	6 (BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	7 (TOP)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	7 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8 (TOP)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	9 (TOP)	
	12"	11"	12"	12"	12"	12"	12"	12"	12"	12"	9 (BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	10 (TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10 (BOTTOM)	
9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	11A (TOP)		
9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	11 (BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	6"	N/A	13 (TOP)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (BOTTOM)		

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATES		PANELMATE TVAS			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
+40.0 -40.0 OR LESS	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	1 (TOP)	> 8'-0" UP TO 13'-0"
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	1 (BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2 (TOP)	
	9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	2 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A (TOP)	
	9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	3 (BOTTOM)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	4 (TOP)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	4 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A (TOP)	
	9"	N/A	11"	N/A	12"	N/A	12"	N/A	N/A	N/A	5 (BOTTOM)	
	9"	N/A	11 1/2"	N/A	12"	N/A	12"	N/A	N/A	N/A	6 (TOP)	
	9"	N/A	11"	N/A	12"	N/A	12"	N/A	N/A	N/A	6 (BOTTOM)	
	9"	N/A	11"	N/A	12"	N/A	12"	N/A	N/A	N/A	7 (TOP)	
	9"	N/A	11"	N/A	12"	N/A	12"	N/A	N/A	N/A	7 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8 (TOP)*	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8 (BOTTOM)*	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	9 (TOP)=	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	9 (BOTTOM)	
	9"	N/A	11 1/2"	N/A	12"	N/A	12"	N/A	N/A	N/A	10 (TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10 (BOTTOM)	
9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	11A (TOP)		
9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	11 (BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	6"	N/A	13 (TOP)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	6"	N/A	13 (BOTTOM)		

\* USE 6" OC FOR PANEL LENGTHS LARGER THAN 10' - 0" AND USE 12" OC AS SHOWN ON SCHEDULE FOR PANELS LENGTHS EQUAL OR SHORTER THAN 10' - 0

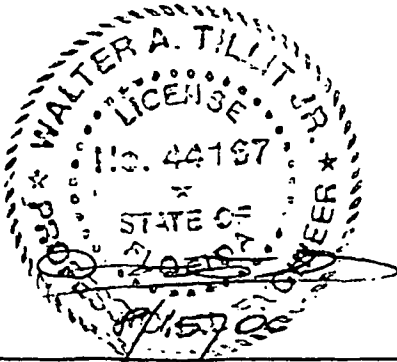
\*\* MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACING SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (NOTE: Min. E. D. FOR SOLIDSET ANCHORS IS 3") FOR THIS OPERATION TO BE POSSIBLE, REDUCED SPACING OBTAINED USING FACTOR SHALL NOT BE LESS THAN MINIMUM SPACING INDICATED FOR EACH ANCHOR TYPE AT ANCHORS LEGEND.

ACTUAL E. D.	FACTOR	
	TAPCON (REGULAR OR S.G.) PANELMATE OR PANELMATE TVAS	SOLID SET
3"	.88	.75
2 1/2"	.71	.50
2"	.50	-

**ANCHORS LEGEND**

ANCHOR TYPE	Min. ANCHOR SPACING
TAPCON (REGULAR OR S.G.) PANELMATE OR PANELMATE TVAS	3.0"
SOLID SET	2.5"

E. D. = EDGE DISTANCE



**TILECO INC.**  
 TILLIT TESTING & ENGINEERING COMPANY  
 6350 N.W. 30th St., Ste. 305, VIRGINIA GARDENS, FL 33166  
 Phone: (305)871-1530 Fax: (305)871-1531  
 EG-0008719  
 WALTER A. TILLIT JR., P. E.  
 FLORIDA Lic. 44187

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

0.050" BERTHA ALUMINUM STORM PANEL  
(2" DEEP)

**EASTERN METAL SUPPLY, INC**  
 4268 WEST ROADS DRIVE  
 WEST PALM BEACH, FL 33407

M.C.V.  
DRAWN BY:  
6/23/06  
DATE  
06-169  
DRAWING No

REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION	DATE
1	OLD DRG 05-284	6/23/06	2		
2			4		

SHEET 9 OF 17

**MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS IN CONCRETE AND CONCRETE BLOCK STRUCTURES**

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2"										APPLICABLE TO SECTIONS / & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L" (L)
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATES		PANELMATE TYS			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
+40.0, -40.0 UP TO +80.0, -80.0	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	1 (TOP)	8'-0" OR LESS
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	1 (BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2 (TOP)	
	9"	7"	9"	9"	9"	9"	9"	9"	9"	9"	2 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A (TOP)	
	9"	7"	9"	9"	9"	9"	9"	9"	9"	9"	3 (BOTTOM)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	4 (TOP)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	4 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A (TOP)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	5 (BOTTOM)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	6 (TOP)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	6 (BOTTOM)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	7 (TOP)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	7 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8 (TOP)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	9 (TOP)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	9 (BOTTOM)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	10 (TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10 (BOTTOM)	
9"	7"	N/A	N/A	N/A	N/A	9"	7"	9"	7"	11A (TOP)		
9"	7"	N/A	N/A	N/A	N/A	9"	7"	9"	7"	11 (BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (TOP)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (BOTTOM)		

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2"										APPLICABLE TO SECTIONS / & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L" (L)
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATES		PANELMATE TYS			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
+60.0, -60.0 UP TO +80.0, -90.0	11"	N/A	11"	N/A	11"	N/A	11"	N/A	11"	N/A	1 (TOP)	8'-0" OR LESS
	11"	6"	11"	11"	11"	11"	11"	7"	11"	7"	1 (BOTTOM)	
	11"	N/A	11"	N/A	11"	N/A	11"	N/A	11"	N/A	2 (TOP)	
	8"	4"	9"	9"	9"	9"	9"	7"	9"	7"	2 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A (TOP)	
	8"	4"	9"	9"	9"	9"	9"	7"	9"	7"	3 (BOTTOM)	
	11"	4"	11"	11"	11"	11"	11"	7"	11"	7"	4 (TOP)	
	11"	4"	11"	11"	11"	11"	11"	7"	11"	7"	4 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A (TOP)	
	5"	8"	7"	N/A	9"	N/A	8"	N/A	N/A	N/A	5 (BOTTOM)	
	9"	N/A	10"	N/A	12"	N/A	11"	N/A	N/A	N/A	6 (TOP)	
	8"	N/A	7"	N/A	9"	N/A	8"	N/A	N/A	N/A	6 (BOTTOM)	
	5"	N/A	7"	N/A	9"	N/A	8"	N/A	N/A	N/A	7 (TOP)	
	5"	N/A	7"	N/A	9"	N/A	8"	N/A	N/A	N/A	7 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	8"	12"	8"	8 (TOP)	
	N/A	N/A	12"	12"	12"	12"	12"	8"	12"	8"	8 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	8"	12"	8"	9 (TOP)	
	11"	4"	11"	11"	11"	11"	11"	7"	11"	7"	9 (BOTTOM)	
	9"	N/A	10"	N/A	12"	N/A	11"	N/A	N/A	N/A	10 (TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10 (BOTTOM)	
8"	4"	N/A	N/A	N/A	N/A	9"	7"	9"	7"	11A (TOP)		
8"	4"	N/A	N/A	N/A	N/A	9"	7"	9"	7"	11 (BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (TOP)		
6"	N/A	12"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (BOTTOM)		

+40.0, -40.0  
UP TO  
+80.0, -80.0

8'-0"  
OR  
LESS

+60.0, -60.0  
UP TO  
+80.0, -90.0

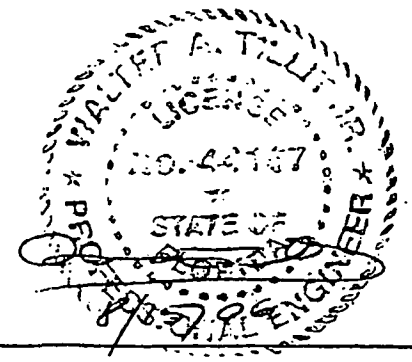
8'-0"  
OR  
LESS

• MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACING SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (NOTE: MIN. E. D. FOR SOLIDSET ANCHORS IS 3") FOR THIS OPERATION TO BE POSSIBLE, REDUCED SPACING OBTAINED USING FACTOR SHALL NOT BE LESS THAN MINIMUM SPACING INDICATED FOR EACH ANCHOR TYPE AT ANCHORS LEGEND.

ACTUAL E. D.	FACTOR	
	TAPCON (REGULAR OR S.G.) PANELMATE OR PANELMATE TYS	SOLID SET
3"	.86	.75
2 1/2"	.71	.50
2"	.50	-

**ANCHORS LEGEND**

ANCHOR TYPE	MIN. ANCHOR SPACING
TAPCON (REGULAR OR S.G.) PANELMATE OR PANELMATE TYS	3.0"
SOLID SET	2.5"



**TILTECO Inc.**  
TILIT TESTING & ENGINEERING COMPANY  
6335 N.W. 36th St., Ste. 305, VICTORIA GARDENS, FL 33186  
Phone: (305)871-1530 Fax: (305)871-1531  
EB-0006719  
WALTER A. TILLIT JR., P. E.  
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F.B.C./ (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL  
(2" DEEP)

**EASTERN METAL SUPPLY, INC**  
4288 WEST ROADS DRIVE  
WEST PALM BEACH, FL 33407

REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION	DATE
1	OLD DWG 05-284	6/23/08	3		
2			4		

M.C.V.  
DRAWN BY:  
6/23/08  
DATE  
06-169  
DRAWING No  
SHEET 10 OF 17

**MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS IN CONCRETE AND CONCRETE BLOCK STRUCTURES**

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L' (ft.)
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATES		PANELMATE TYS			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
-40.0 -40.0 UP TO +60.0 -80.0	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	1 (TOP)	>8'-0" UP TO 12'-6"
	12"	4 1/2"	12"	12"	12"	12"	12"	8 1/2"	12"	8 1/2"	1 (BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2 (TOP)	
	9"	4 1/2"	9"	9"	9"	9"	9"	8 1/2"	9"	8 1/2"	2 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A (TOP)	
	9"	4 1/2"	9"	9"	9"	9"	9"	8 1/2"	9"	8 1/2"	3 (BOTTOM)	
	12"	4 1/2"	12"	12"	12"	12"	12"	8 1/2"	12"	8 1/2"	4 (TOP)	
	12"	4 1/2"	12"	12"	12"	12"	12"	8 1/2"	12"	8 1/2"	4 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A (TOP)	
	9"	4 1/2"	9"	9"	9"	9"	9"	8 1/2"	9"	8 1/2"	5 (BOTTOM)	
	6 1/2"	N/A	7 1/2"	N/A	8"	N/A	7 1/2"	N/A	N/A	N/A	6 (TOP)	
	9"	N/A	9 1/2"	N/A	10"	N/A	9 1/2"	N/A	N/A	N/A	6 (BOTTOM)	
	6 1/2"	N/A	7 1/2"	N/A	8"	N/A	7 1/2"	N/A	N/A	N/A	7 (TOP)	
	6"	N/A	6 1/2"	N/A	7"	N/A	6 1/2"	N/A	N/A	N/A	7 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	8"	12"	6"	8 (TOP)	
	N/A	N/A	12"	12"	12"	12"	12"	8"	12"	6"	8 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	8"	12"	6"	9 (TOP)	
	12"	4 1/2"	12"	12"	12"	12"	12"	8 1/2"	12"	8 1/2"	9 (BOTTOM)	
	9"	N/A	9 1/2"	N/A	10"	N/A	9 1/2"	N/A	N/A	N/A	10 (TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10 (BOTTOM)	
9"	4 1/2"	N/A	N/A	N/A	N/A	9"	4 1/2"	9"	4 1/2"	11A (TOP)		
9"	4 1/2"	N/A	N/A	N/A	N/A	9"	4 1/2"	9"	4 1/2"	11 (BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (TOP)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (BOTTOM)		

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L' (ft.)
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATES		PANELMATE TYS			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
+90.0 -90.0 UP TO +100.0 -130.0	8 1/2"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	1 (TOP)	7'-0" OR LESS
	9"	7"	9"	9"	9"	9"	9"	7"	9"	7"	1 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	2 (TOP)	
	9"	4"	9"	9"	9"	9"	9"	7"	9"	9"	2 (BOTTOM)	
	8"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A (TOP)	
	9"	4"	9"	9"	9"	9"	9"	7"	9"	9"	3 (BOTTOM)	
	9"	7"	9"	9"	9"	9"	9"	7"	9"	7"	4 (TOP)	
	9"	7"	9"	9"	9"	9"	9"	7"	9"	7"	4 (BOTTOM)	
	8"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A (TOP)	
	5"	N/A	6"	N/A	7"	N/A	7"	N/A	N/A	N/A	5 (BOTTOM)	
	7"	N/A	8"	N/A	10"	N/A	8"	N/A	N/A	N/A	8 (TOP)	
	5"	N/A	6"	N/A	7"	N/A	7"	N/A	N/A	N/A	8 (BOTTOM)	
	5"	N/A	6"	N/A	7"	N/A	7"	N/A	N/A	N/A	7 (TOP)	
	5"	N/A	6"	N/A	7"	N/A	7"	N/A	N/A	N/A	7 (BOTTOM)	
	N/A	N/A	12"	6"	12"	6"	12"	6"	12"	6"	8 (TOP)	
	N/A	N/A	12"	6"	12"	6"	12"	6"	12"	6"	8 (BOTTOM)	
	N/A	N/A	12"	6"	12"	6"	12"	6"	12"	6"	9 (TOP)	
	9"	7"	9"	9"	9"	9"	9"	7"	9"	7"	9 (BOTTOM)	
	7"	N/A	8"	N/A	10"	N/A	8"	N/A	N/A	N/A	10 (TOP)	
	5"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10 (BOTTOM)	
5"	4"	N/A	N/A	N/A	N/A	7"	7"	7"	7"	11A (TOP)		
5"	4"	N/A	N/A	N/A	N/A	7"	7"	7"	7"	11 (BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (TOP)		
5"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (BOTTOM)		

\* USE 6" OC FOR PANEL LENGTHS LARGER THAN 10'-0" AND USE 12" AS SHOWN ON SCHEDULE FOR PANELS LENGTHS EQUAL OR SHORTER THAN 10'-0"

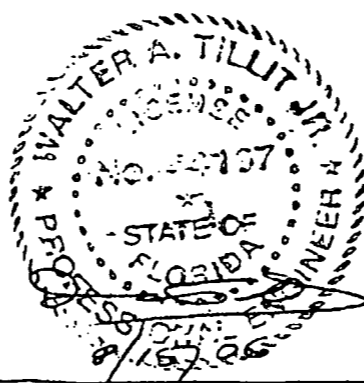
**ANCHORS LEGEND**

ANCHOR TYPE	Min. ANCHOR SPACING
TAPCON (REGULAR OR S.G.) PANELMATE OR PANELMATE TYS	3.0"
SOLID SET	2.5"

E. D. = EDGE DISTANCE

\*\* MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACING SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (NOTE: Min. E. D. FOR SOLIDSET ANCHORS IS 3") FOR THIS OPERATION TO BE POSSIBLE, REDUCED SPACING OBTAINED USING FACTOR SHALL NOT BE LESS THAN MINIMUM SPACING INDICATED FOR EACH ANCHOR TYPE AT ANCHORS LEGEND.

ACTUAL E. D.	FACTOR	
	TAPCON (REGULAR OR S.G.) PANELMATE OR PANELMATE TYS	SOLID SET
3"	.85	.75
2 1/2"	.71	.50
2"	.50	-



**TILECO inc.**  
TILLIT TESTING & ENGINEERING COMPANY  
6335 N.W. 38th St., Ste. 3025, VIRGINIA GARDENS, FL 33169  
Phone: (305)871-1530, Fax: (305)871-1931  
EB-0006719  
WALTER A. TILLIT Jr., P. E.  
FLORIDA Lic. 44187

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

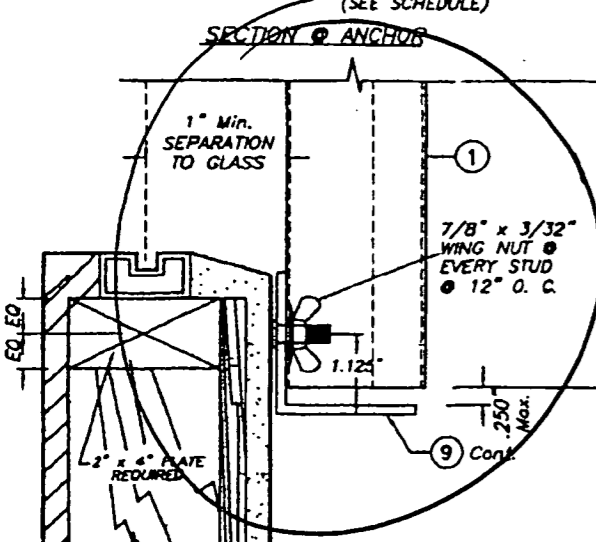
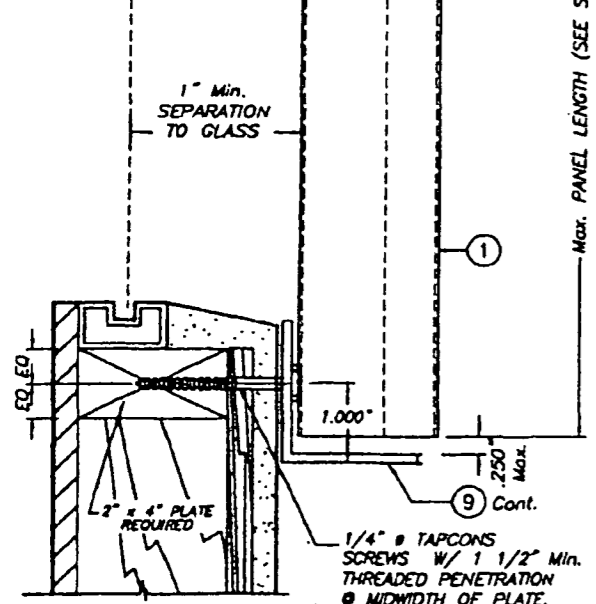
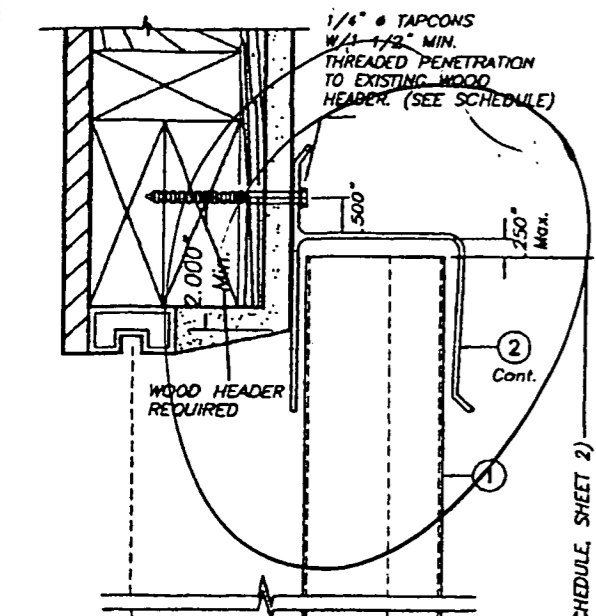
0.050" BERTHA ALUMINUM STORM PANEL  
(2" DEEP)

**EASTERN METAL SUPPLY, INC**  
4268 WEST ROADS DRIVE  
WEST PALM BEACH, FL 33407

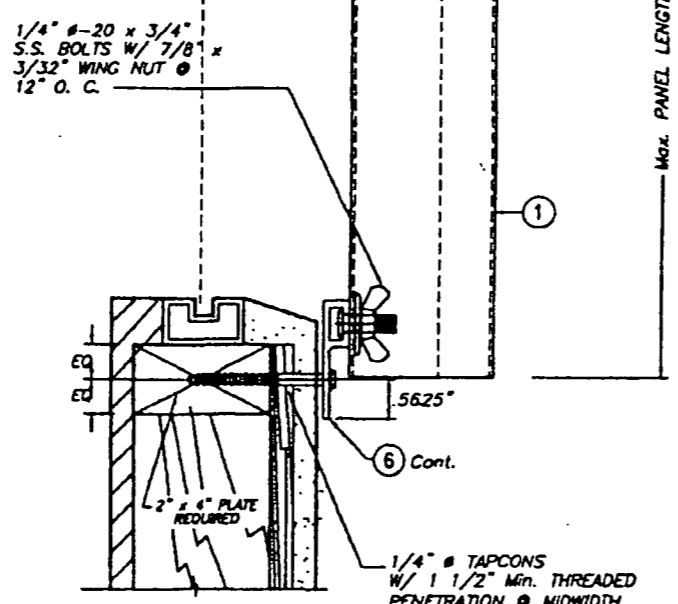
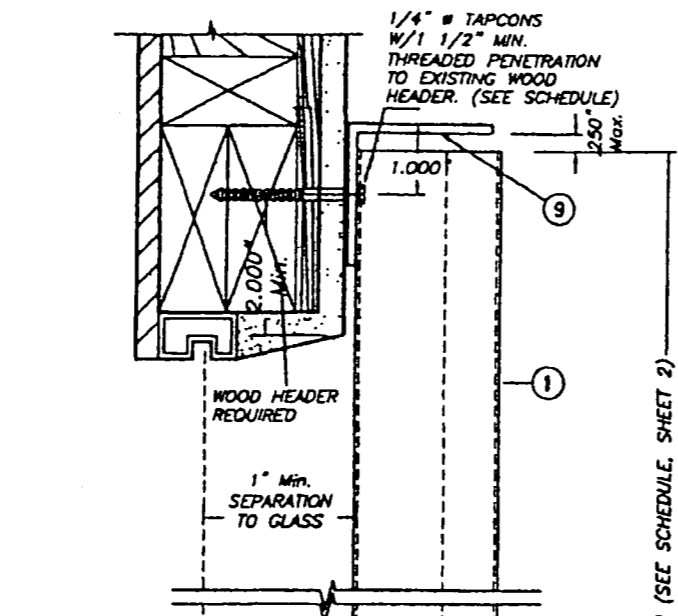
REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION	DATE
1	OLD DWG 03-284	6/23/06	2		
2			4		

M.C.V. DRAWN BY: 06-169  
DATE: 6/23/06  
DRAWING No: 06-169  
SHEET 11 OF 17

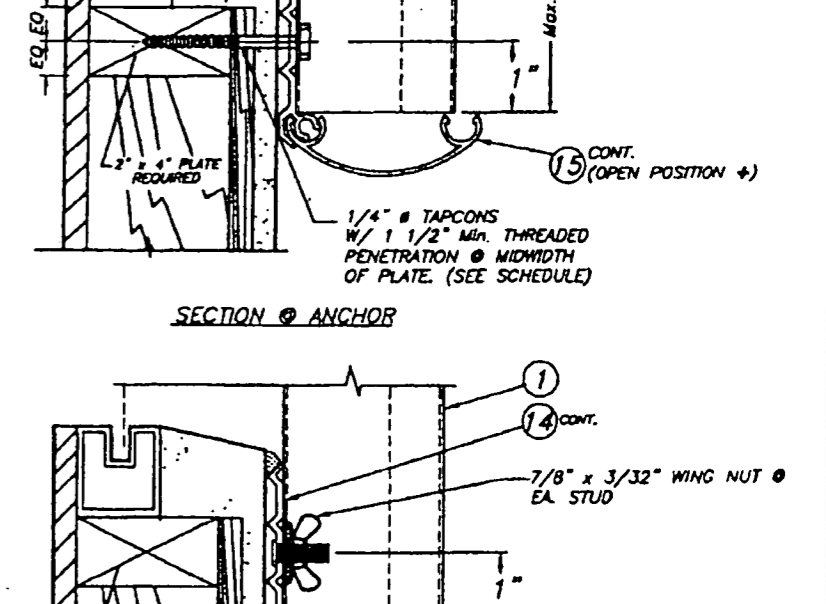
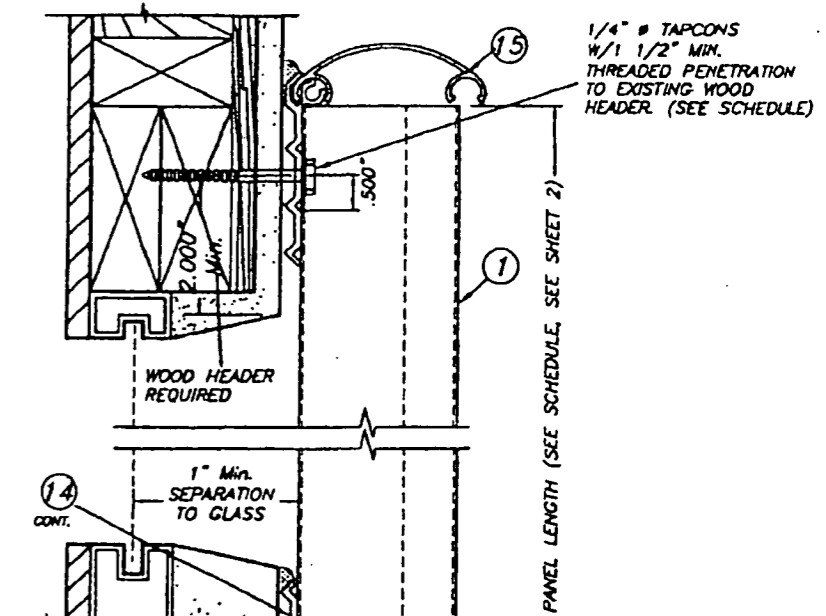
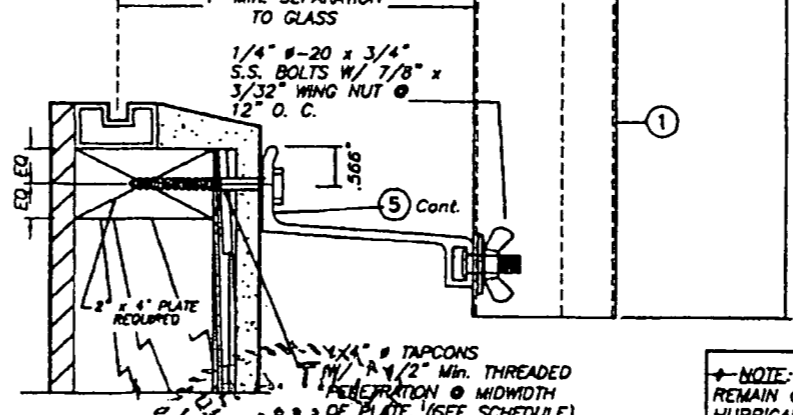
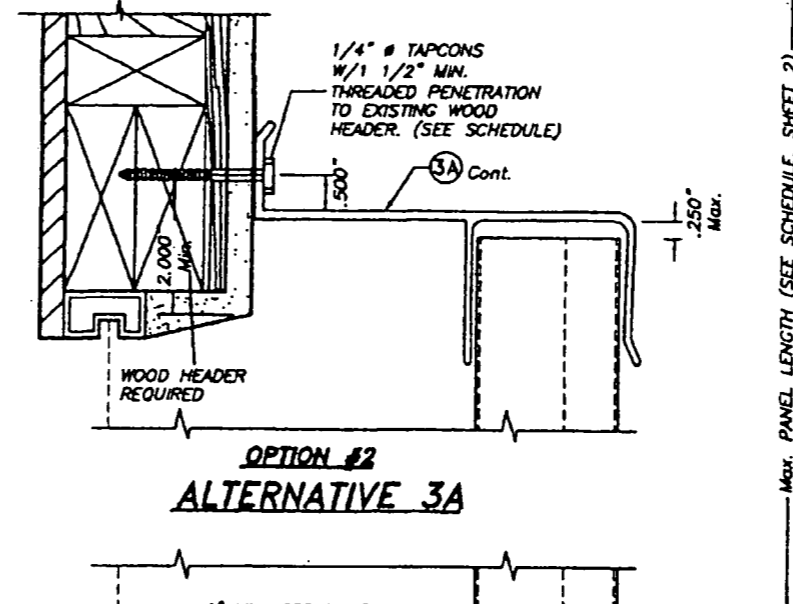
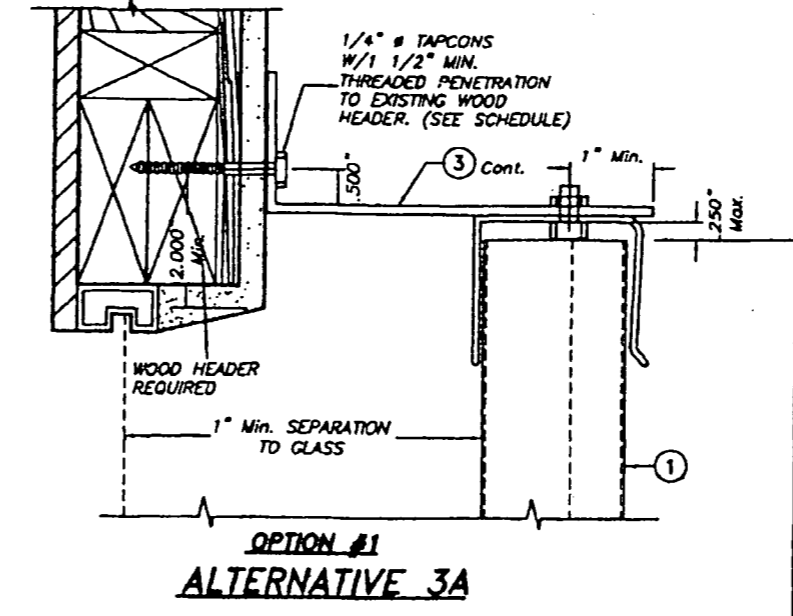




**SECTION @ STUD**  
**ALTERNATIVE 1**  
SCALE: 1/2" = 1"



**ALTERNATIVE 2**  
SCALE: 1/2" = 1"



**SECTION @ STUD**  
**ALTERNATIVE 4**  
SCALE: 1/2" = 1"

**NOTE FOR COMBINATION OF SECTIONS :**  
WALL MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

- NOTES:**
1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL LENGTHS AS PER SCHEDULES ON SHEET 2
  2. SEE ANCHOR SCHEDULE ON SHEETS 16 & 17.
  3. FOR NEW WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

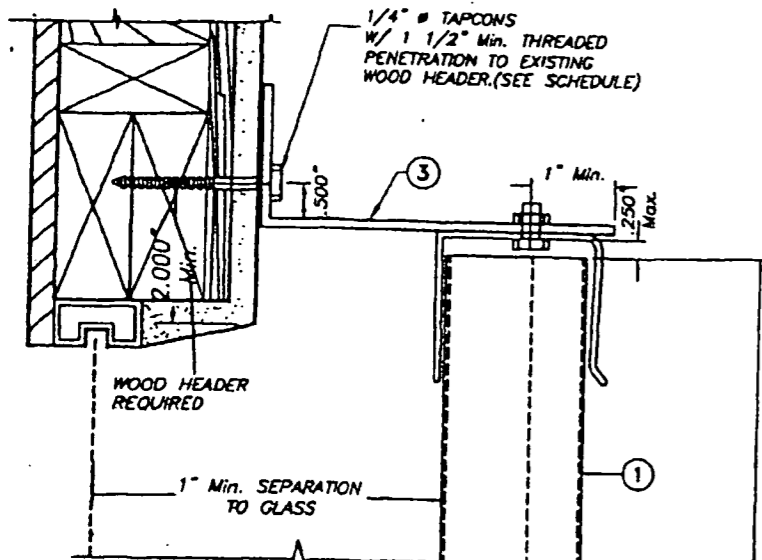
**NOTE: SNAP CAP (13) TO REMAIN CLOSED ON NON HURRICANE CONDITIONS.**

**TILTECO INC.**  
TILLET TESTING & ENGINEERING COMPANY  
6335 N.W. 34th St., Ste. 308, VIRGINIA GARDENS, FL 33166  
Phone: (305)871-1530 Fax: (305)871-1531  
EB-0006719  
WALTER A. TILLET JR., P. E.  
FLORIDA Lic. 44167

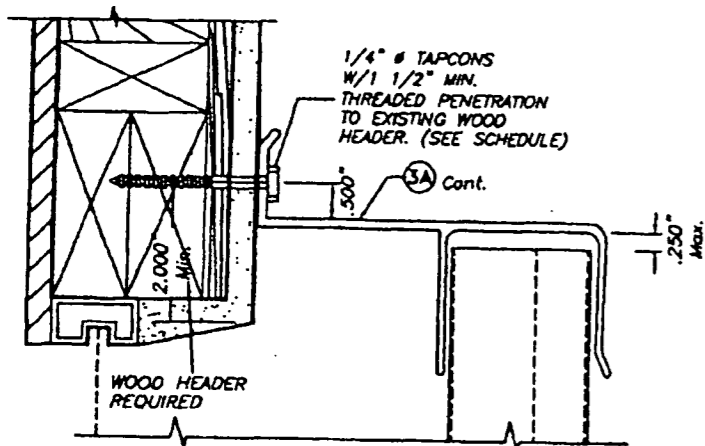
F.B.C./ (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)		M.C.V. DRAWN BY:
<b>EASTERN METAL SUPPLY, INC</b>		8/23/08 DATE
4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		06-169 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD DWG 03-204	4/23/06
2		
3		
4		

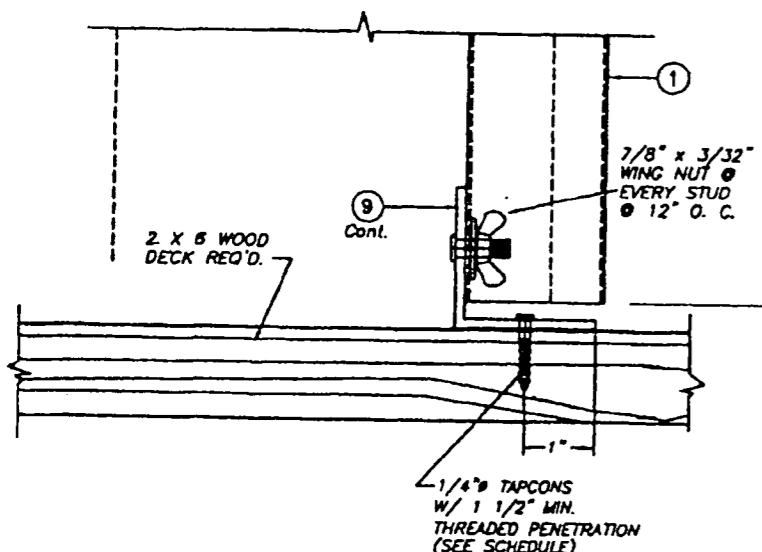
SHEET 12 OF 17



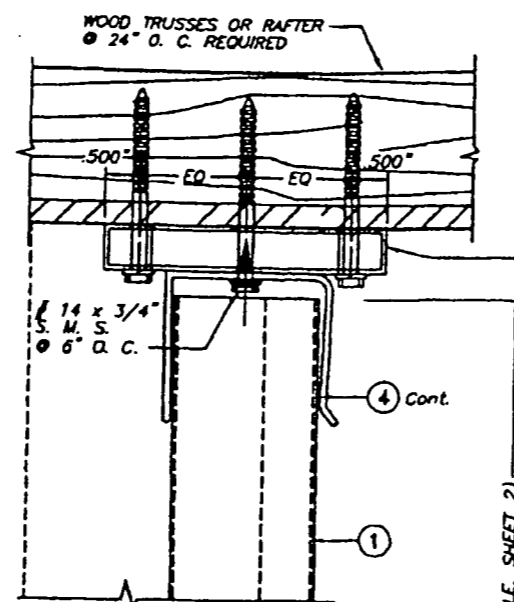
**OPTION #1  
ALTERNATIVE 5A**



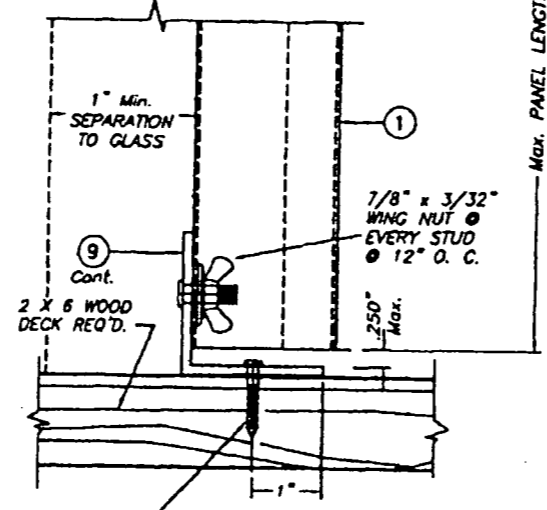
**OPTION #2  
ALTERNATIVE 5A**



**ALTERNATIVE 5  
SCALE: 1/2" = 1"**

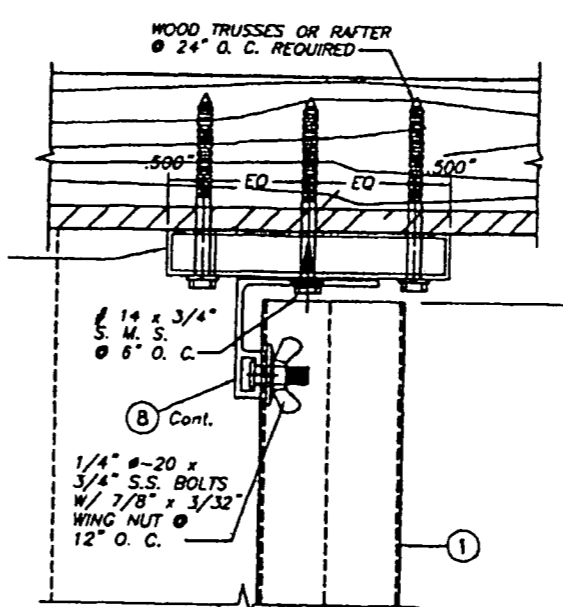


**ALTERNATIVE 6A**  
SCALE: 1/2" = 1"  
(LIMITED TO +60.0, -66.0 p.s.f. DESIGN LOAD AND UP TO 9'-0" Max. PANEL LENGTH)

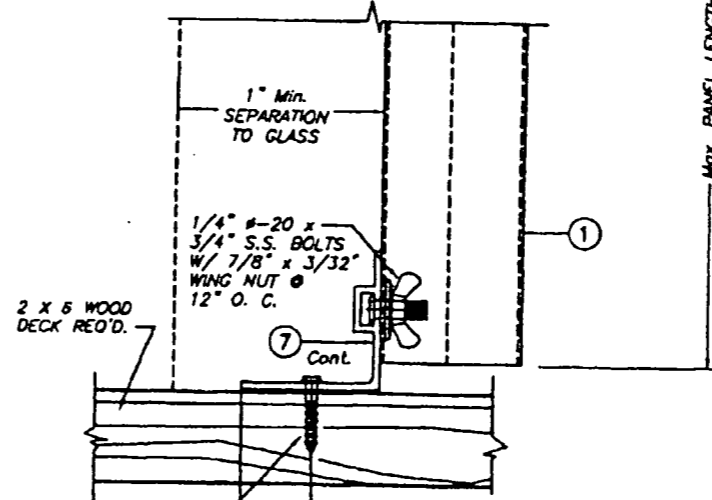


**ALTERNATIVE 6**  
SCALE: 1/2" = 1"

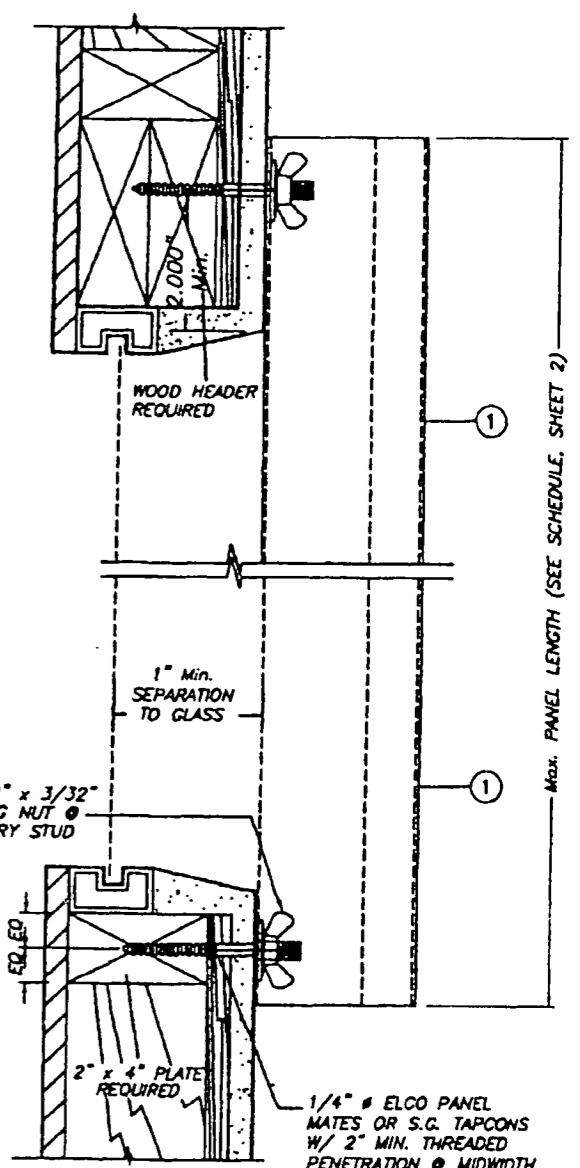
1" x 4" x 1/8" Min. (6063-T6) Alum. TUBE W/ (3) 5/16" x LAG SCREWS TO EACH JOIST. LOCATE SCREW AT MIDWIDTH OF EXISTING WOOD MEMBER (2" Min. NOMINAL WIDTH) W/ 2" Min. THREADED PENETRATION.



**ALTERNATIVE 7A**  
SCALE: 1/2" = 1"  
(LIMITED TO +60.0, -66.0 p.s.f. DESIGN LOAD AND UP TO 9'-0" Max. PANEL LENGTH)



**ALTERNATIVE 7**  
SCALE: 1/2" = 1"

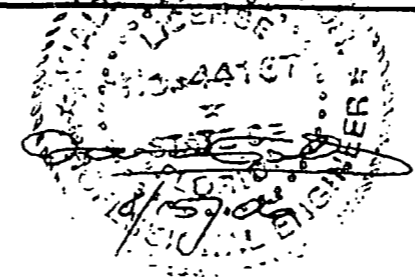


**ALTERNATIVE 8**  
SCALE: 1/2" = 1"

1/4" # ELCO PANEL MATES OR S.G. TAPCONS W/ 2" MIN. THREADED PENETRATION @ MIDWIDTH OF PLATE. TYPICAL TOP & BOTTOM. (SEE SCHEDULE)

- NOTES:**
1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL'S LENGTHS AS PER SCHEDULES ON SHEET 2 (EXCEPT AS NOTED)
  2. SEE ANCHOR SCHEDULE ON SHEET 16 & 17.
  3. FOR NEW WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

**NOTE FOR COMBINATION OF SECTIONS:**  
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



**TILTECO Inc.**  
TILLIT TESTING & ENGINEERING COMPANY  
8355 N.W. 39th St., Ste. 305, VIRGINIA GARDENS, FL 33166  
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EB-0006719  
WALTER A. TILLIT Jr., P. E.  
FLORIDA Lic. 44167

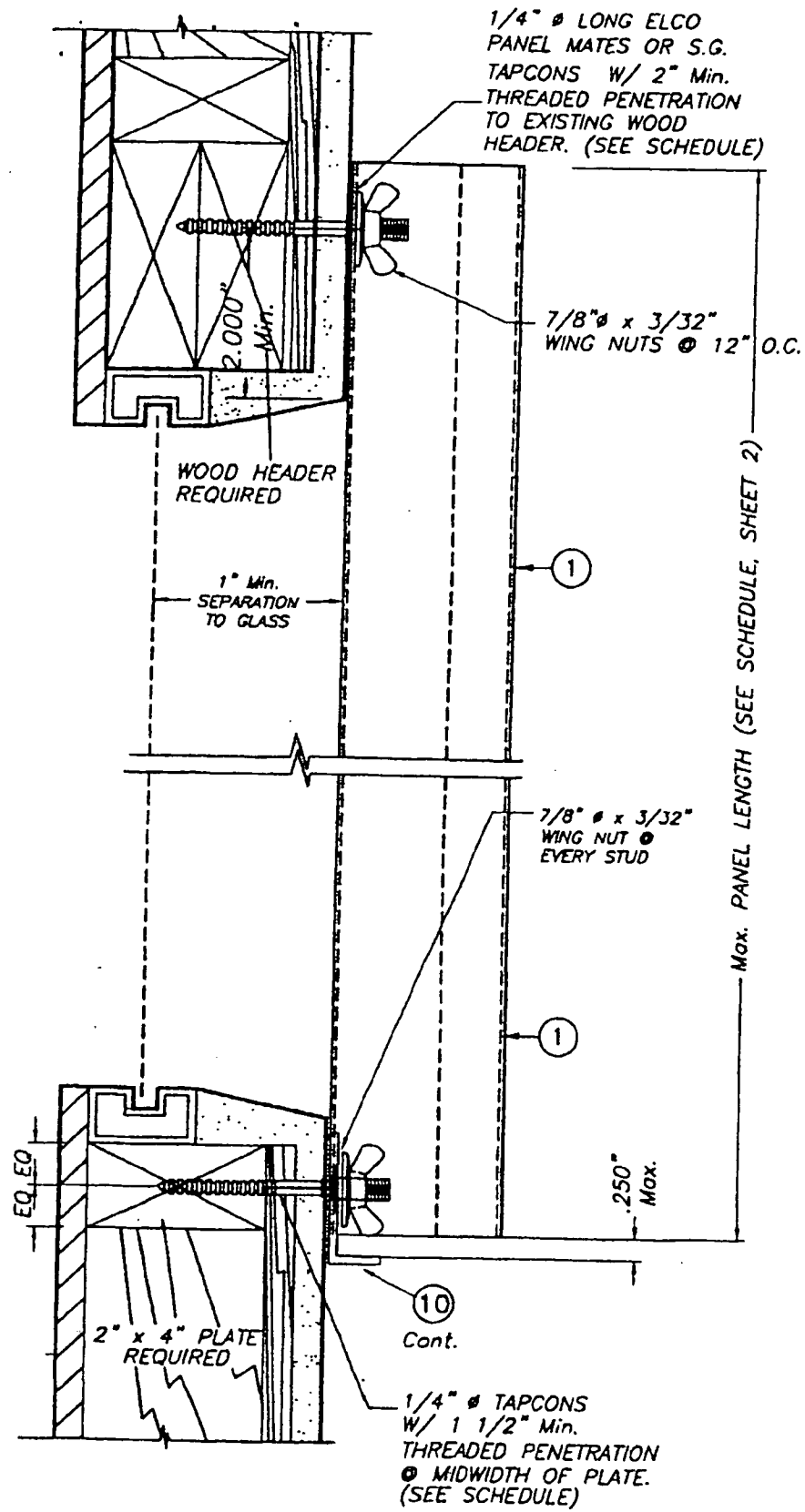
F.B.C./ (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)

**EASTERN METAL SUPPLY, INC**  
4268 WEST ROADS DRIVE  
WEST PALM BEACH, FL 33407

U.C.V. DRAWN BY:  
6/23/06 DATE  
06-169 DRAWING No  
SHEET 13 OF 17

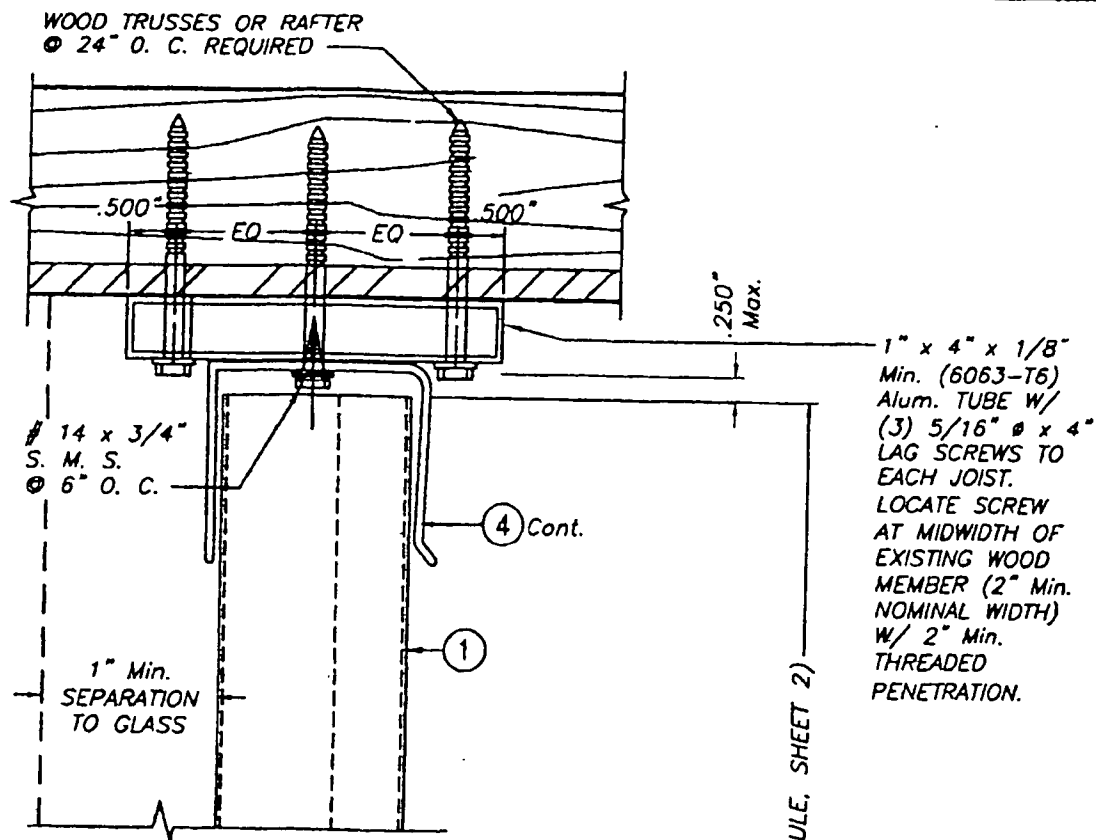
REV. NO	DESCRIPTION	DATE	REV. No	DESCRIPTION	DATE
1	OLD DWG 05-284	8/23/06	8		
2			4		



**ALTERNATIVE 9**

SCALE : 1/2" = 1"

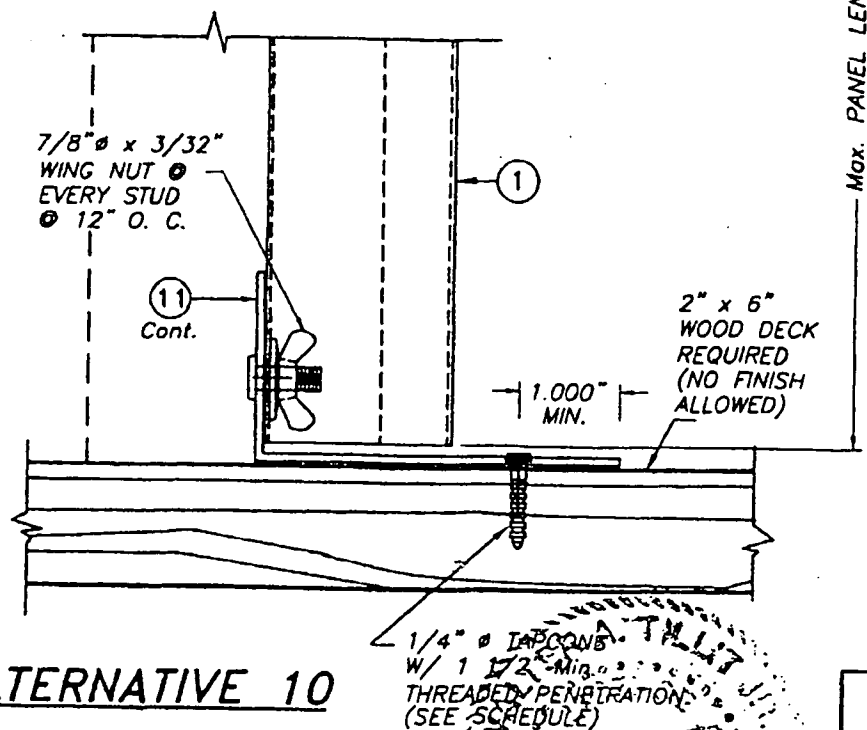
**INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS**



**ALTERNATIVE 10A**

SCALE : 1/2" = 1"

(LIMITED TO +60.0, -66.0 p.s.f. DESIGN LOAD  
AND UP TO 9'-0" Max. PANEL LENGTH)



**ALTERNATIVE 10**

SCALE : 1/2" = 1"

**NOTES:**

1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL'S LENGTHS AS PER SCHEDULES ON SHEET 2 (EXCEPT AS NOTED)
2. SEE ANCHOR SCHEDULE ON SHEET 16 & 17.
3. FOR NEW WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

**NOTE FOR COMBINATION OF SECTIONS :**

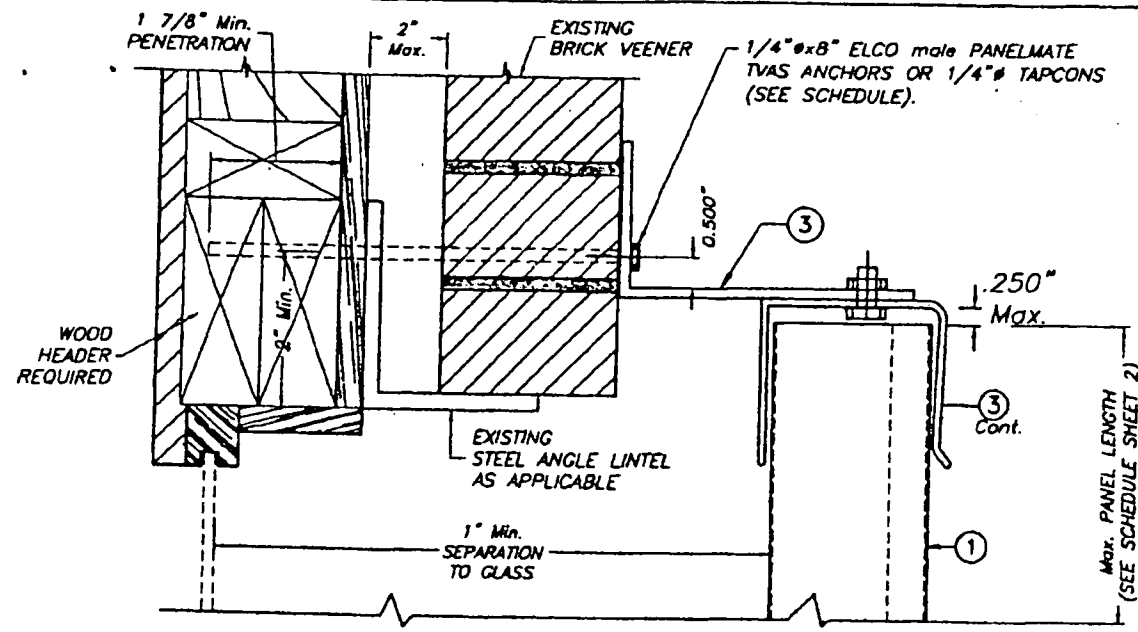
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

**TILTECO Inc.**  
TILLIT TESTING & ENGINEERING COMPANY  
6355 N.W. 36th St., Ste. 305, YVONKA GARDENS, FL 33188  
Phone : (305)871-1530 Fax : (305)871-1531  
EB-0006719  
WALTER A. TILLIT Jr., P. E.  
FLORIDA Lic. 44167

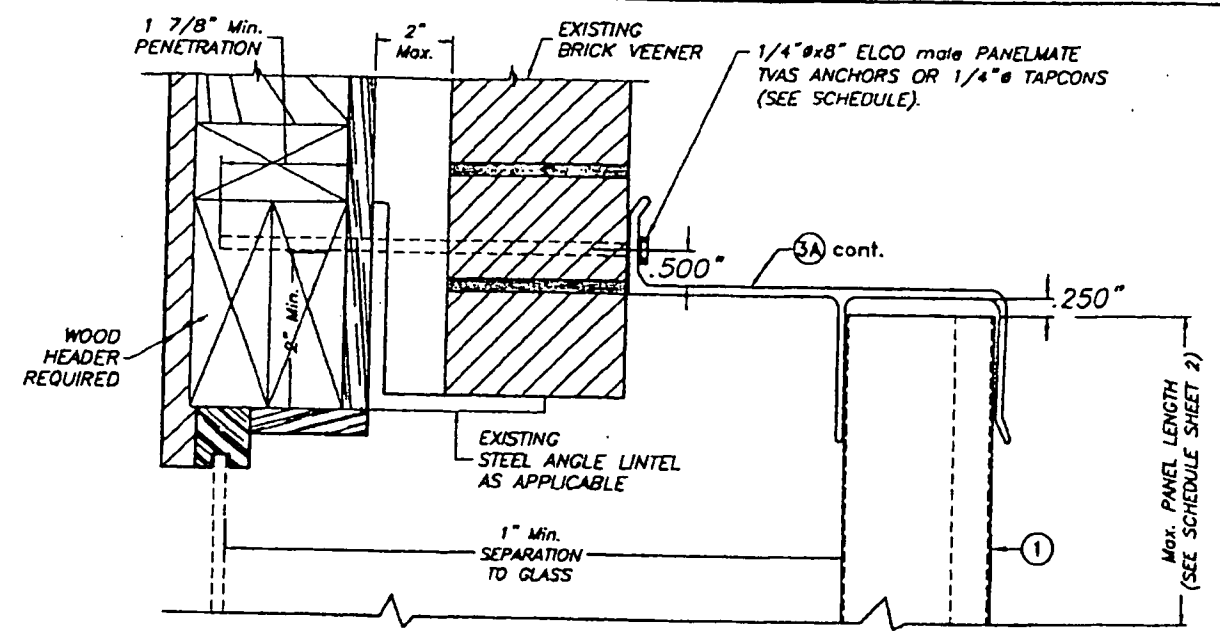
F.B.C./ (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)		W.C.V. DRAWN BY:
EASTERN METAL SUPPLY, INC 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		6/23/06 DATE
		06-169 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD DWG CS-234	6/23/06
2		
3		

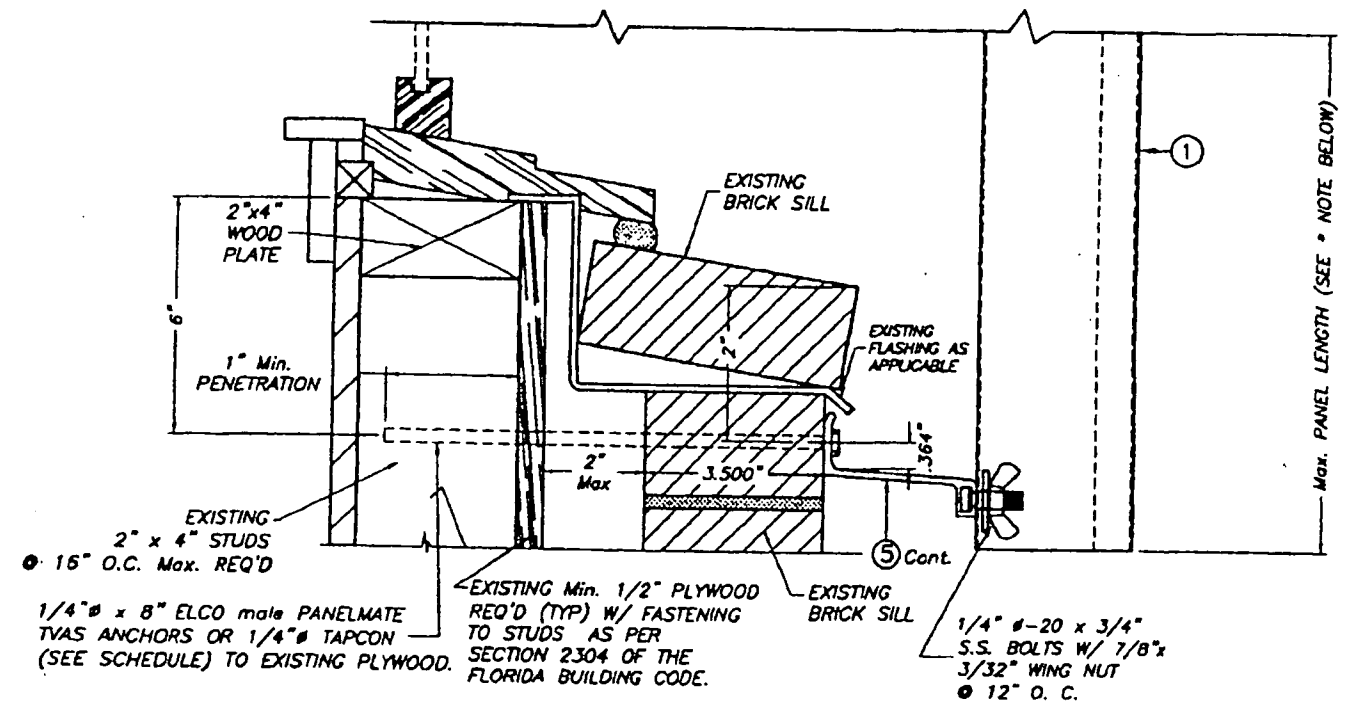
SHEET 14 OF 17



**OPTION #1**  
**ALTERNATIVE 11A**



**OPTION #2**  
**ALTERNATIVE 11A**



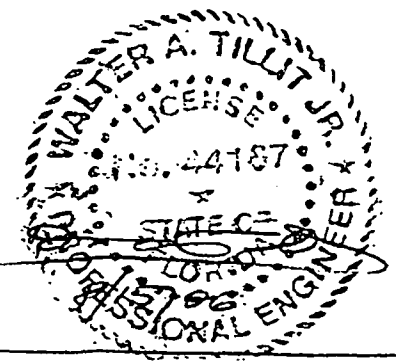
**ALTERNATIVE 11**  
**BUILD-OUT INSTALLATION**  
SCALE: 1/2" = 1"

\* VALID FOR Max. +50.0, -60.0 p.s.f. DESIGN LOAD, FOR UP TO 78" PANELS LENGTHS, AND FOR +50.0, -50.0 p.s.f., FOR PANEL LENGTHS GREATER THAN 78" UP TO 108"

**INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS**

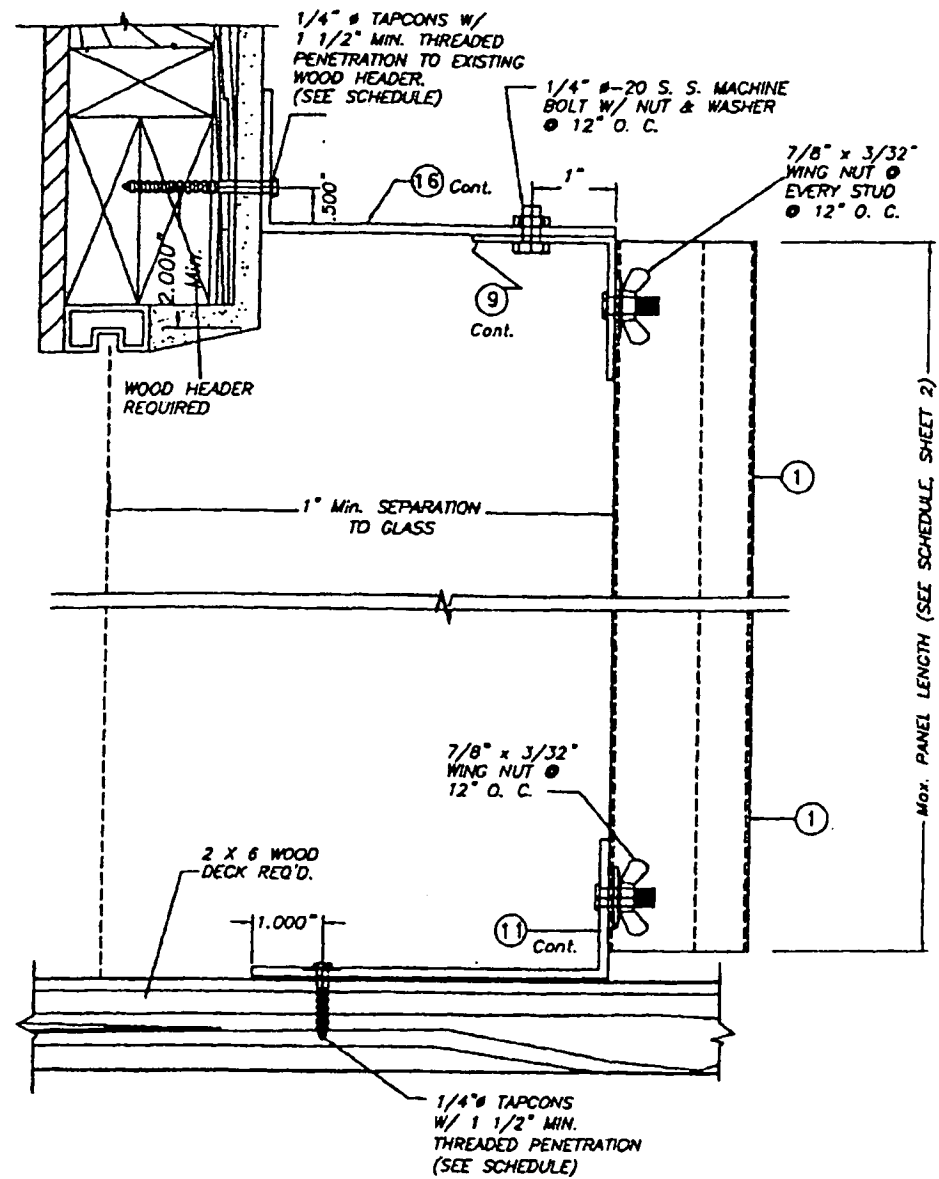
- NOTES:**
1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL'S LENGTHS AS PER SCHEDULES ON SHEET 2 (EXCEPT AS NOTED)
  2. SEE ANCHOR SCHEDULE ON SHEET 16 & 17.
  3. FOR NEW WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

**NOTE FOR COMBINATION OF SECTIONS :**  
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



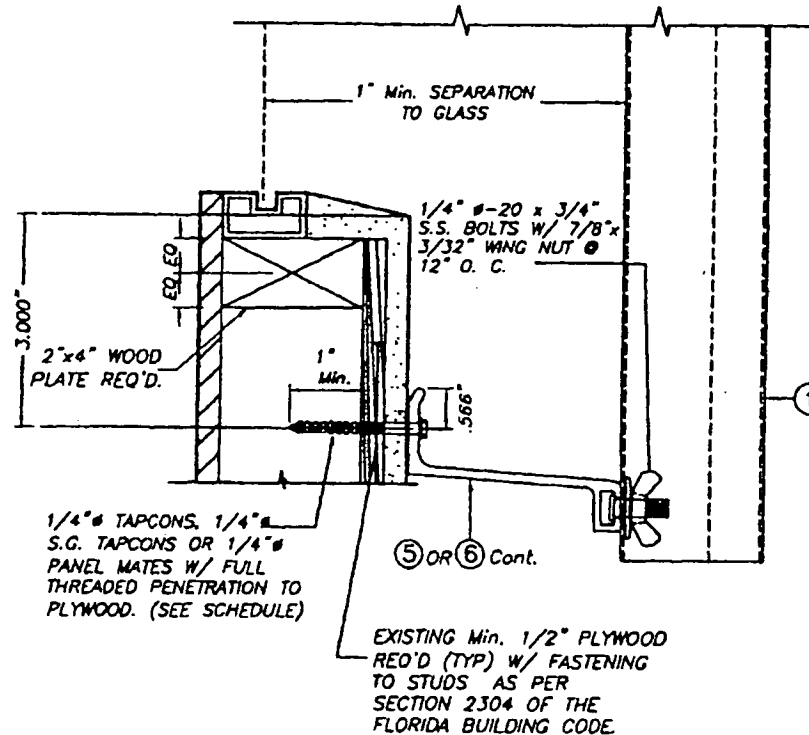
**TILECO INC.**  
TILLIT TESTING & ENGINEERING COMPANY  
6355 N.W. 38th St., Ste. 305, VIRGINIA GARDENS, FL 33146  
Phone 1 (305)871-1530 Fax: (305)871-1531  
EB-0006719  
WALTER A. TILLIT JR., P. E.  
FLORIDA Lic. 44167

F.B.C./ (Non High Velocity Hurricane Zone)					
0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)				M.C.V. DRAWN BY:	
EASTERN METAL SUPPLY, INC 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407				8/23/08 DATE	
				06-169 DRAWING No	
REV. NO	DESCRIPTION	DATE	REV. No	DESCRIPTION	DATE
1	OLD DWG 03-284	8/23/08	2		
2			4		
					SHEET 14A OF 17



**ALTERNATIVE 13**

SCALE : 1/2" = 1"



**ALTERNATIVE 14**

SCALE : 1/2" = 1"

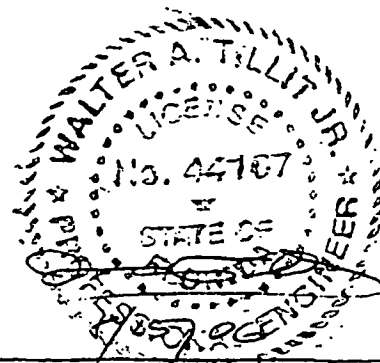
**NOTES:**

1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL'S LENGTHS AS PER SCHEDULES ON SHEET 2
2. SEE ANCHOR SCHEDULE ON SHEET 16 & 17.
3. FOR NEW WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

\* VALID FOR Max. +50.0, -60.0 p.s.f. DESIGN LOAD, FOR UP TO 78" PANELS LENGTHS, AND FOR +50.0, -50.0 p.s.f., FOR PANEL LENGTHS GREATER THAN 78" UP TO 108"

**NOTE FOR COMBINATION OF SECTIONS :**

WALL MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



**TILTECO INC.**  
 TILLIT TESTING & ENGINEERING COMPANY  
 8355 N.W. 38th St., Ste. 305, VICTORIA GARDENS, FL 33166  
 Phone : (305)871-1530 - Fax : (305)871-1531  
 EB-0006719  
 WALTER A. TILLIT Jr., P. E.  
 FLORIDA Lic. 44167

F.B.C./ (Non High Velocity Hurricane Zone)					
0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)					M.C.V. DRAWN BY:
<b>EASTERN METAL SUPPLY, INC</b>					6/23/08 DATE
4265 WEST ROADS DRIVE WEST PALM BEACH, FL 33407					06-169 DRAWING No
REV. NO	DESCRIPTION	DATE	REV. No	DESCRIPTION	DATE
1	OLD DWG 05-284	4/23/08	3		
2			4		
					SHEET 15 OF 17

**MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS**

MAXIMUM DESIGN LOAD W (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L" (PL)
	REGULAR TAPCONS	S.G.TAPCON	PANELMATES OR PANELMATE TRIS		
+40.0, -40.0 OR LESS	12"	N/A	N/A	1 (TOP)	8'-0" OR LESS
	12"	N/A	N/A	1 (BOTTOM)	
	12"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	9"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	12"	N/A	N/A	4 (TOP)	
	12"	N/A	N/A	4 (BOTTOM)	
	9"	N/A	N/A	5A (TOP)	
	9"	N/A	N/A	5 (BOTTOM)	
	9"	N/A	N/A	6 (BOTTOM)	
	8 1/2"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	12"	8 (TOP)	
	N/A	12"	12"	8 (BOTTOM)	
	N/A	12"	12"	9 (TOP)	
	12"	N/A	N/A	9 (BOTTOM)	
	6"	N/A	N/A	10 (BOTTOM)	
	9"	N/A	9"	11A (TOP)	
	4"	N/A	4"	11 (BOTTOM)	
	6"	N/A	N/A	13 (TOP)	
	6"	N/A	N/A	13 (BOTTOM)	
	4"	4"	4"	14 (BOTTOM)	

MAXIMUM DESIGN LOAD W (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L" (PL)
	REGULAR TAPCONS	S.G.TAPCON	PANELMATES OR PANELMATE TRIS		
+40.0, -40.0 OR LESS	12"	N/A	N/A	1 (TOP)	>8'-0" UP TO 13'-0"
	12"	N/A	N/A	1 (BOTTOM)	
	12"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	9"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	12"	N/A	N/A	4 (TOP)	
	12"	N/A	N/A	4 (BOTTOM)	
	9"	N/A	N/A	5A (TOP)	
	5 1/2"	N/A	N/A	5 (BOTTOM)	
	5 1/2"	N/A	N/A	6 (BOTTOM)	
	5"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	12"	8 (TOP) *	
	N/A	12"	12"	8 (BOTTOM) *	
	N/A	12"	12"	9 (TOP)	
	12"	N/A	N/A	9 (BOTTOM)	
	5 1/2"	N/A	N/A	10 (BOTTOM)	
	9"	N/A	9"	11A (TOP)	
	4" **	N/A	4" **	11 (BOTTOM) **	
	6"	N/A	N/A	13 (TOP)	
	5 1/2"	N/A	N/A	13 (BOTTOM)	
	4" **	4" **	4" **	14 (BOTTOM) **	

MAXIMUM DESIGN LOAD W (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L" (PL)
	REGULAR TAPCONS	S.G.TAPCON	PANELMATES OR PANELMATE TRIS		
+40.0, -40.0 UP TO +60.0, -60.0	12"	N/A	N/A	1 (TOP)	8'-0" OR LESS
	12"	N/A	N/A	1 (BOTTOM)	
	12"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	9"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	12"	N/A	N/A	4 (TOP)	
	12"	N/A	N/A	4 (BOTTOM)	
	9"	N/A	N/A	5A (TOP)	
	8"	N/A	N/A	5 (BOTTOM)	
	8"	N/A	N/A	6 (BOTTOM)	
	5 1/2"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	12"	8 (TOP)	
	N/A	12"	12"	8 (BOTTOM)	
	N/A	12"	12"	9 (TOP)	
	12"	N/A	N/A	9 (BOTTOM)	
	6"	N/A	N/A	10 (BOTTOM)	
	9"	N/A	9"	11A (TOP)	
	4" *	N/A	4" *	11 (BOTTOM) *	
	6"	N/A	N/A	13 (TOP)	
	6"	N/A	N/A	13 (BOTTOM)	
	4" *	4" *	4" *	14 (BOTTOM) *	

\* USE 6" OC SPACING FOR PANEL LENGTHS LARGER THAN 10' - 0" AND USE 12" OC AS SHOWN ON SCHEDULE FOR PANELS LENGTHS EQUAL OR SHORTER THAN 10' - 0"

\*\* VALID ONLY FOR UP TO 108" PANELS LENGTHS.

\* VALID ONLY FOR UP TO +50.0, -60.0 p.s.f. DESIGN LOAD WITH 78" Max. PANEL LENGTHS OR FOR UP TO +50.0, -50.0 p.s.f. DESIGN LOAD WITH 96" Max. PANEL LENGTHS.



**TILECO INC.**  
 TILLIT TESTING & ENGINEERING COMPANY  
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 EB-0006719  
 WALTER A. TILLIT JR., P. E.  
 FLORIDA Lic. 44167

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

0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)		M.C.V. DRAWN BY:
EASTERN METAL SUPPLY, INC		8/23/06 DATE
4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		06-169 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD DWG 00-204	8/23/06
2		

SHEET 16 OF 17

**MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS**

MAXIMUM DESIGN LOAD W (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L" (FL)
	REGULAR TAPCONS	S.G.TAPCON	PANELMATES OR PANELMATE TRYS		
+60.0, -60.0 UP TO +80.0, -90.0	11"	N/A	N/A	1 (TOP)	9'-0" OR LESS
	11"	N/A	N/A	1 (BOTTOM)	
	11"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	9"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	11"	N/A	N/A	4 (TOP)	
	11"	N/A	N/A	4 (BOTTOM)	
	9"	N/A	N/A	5A (TOP)	
	3 1/2"	N/A	N/A	5 (BOTTOM)	
	3 1/2"	N/A	N/A	6 (BOTTOM)	
	3 1/2"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	6"	8 (TOP)	
	N/A	12"	6"	8 (BOTTOM)	
N/A	12"	6"	9 (TOP)		
11"	N/A	N/A	9 (BOTTOM)		
3 1/2"	N/A	N/A	10 (BOTTOM)		
9"	N/A	9"	11A (TOP)		
N/A	N/A	N/A	11 (BOTTOM)		
6"	N/A	N/A	13 (TOP)		
3 1/2"	N/A	N/A	13 (BOTTOM)		
N/A	N/A	N/A	14 (BOTTOM)		

MAXIMUM DESIGN LOAD W (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L" (FL)
	REGULAR TAPCONS	S.G.TAPCON	PANELMATES OR PANELMATE TRYS		
+40.0, -40.0 UP TO +60.0, -60.0	12"	N/A	N/A	1 (TOP)	>8'-0" UP TO 12'-6"
	12"	N/A	N/A	1 (BOTTOM)	
	12"	N/A	N/A	2 (TOP)	
	12"	N/A	N/A	2 (BOTTOM)	
	12"	N/A	N/A	3A (TOP)	
	12"	N/A	N/A	3 (BOTTOM)	
	12"	N/A	N/A	4 (TOP)	
	12"	N/A	N/A	4 (BOTTOM)	
	12"	N/A	N/A	5A (TOP)	
	4"	N/A	N/A	5 (BOTTOM)	
	4"	N/A	N/A	6 (BOTTOM)	
	3 1/2"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	6"	8 (TOP)	
	N/A	12"	6"	8 (BOTTOM)	
N/A	12"	6"	9 (TOP)		
12"	N/A	N/A	9 (BOTTOM)		
4"	N/A	N/A	10 (BOTTOM)		
12"	N/A	10 1/2"	11A (TOP)		
4" **	N/A	4" **	11 (BOTTOM) **		
12"	N/A	N/A	13 (TOP)		
4"	N/A	N/A	13 (BOTTOM)		
4" **	4" **	4" **	14 (BOTTOM) **		

MAXIMUM DESIGN LOAD W (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L" (FL)
	REGULAR TAPCONS	S.G.TAPCON	PANELMATES OR PANELMATE TRYS		
+90.0, -90.0 UP TO +100.0, -130.0	8 1/2"	N/A	N/A	1 (TOP)	7'-0" OR LESS
	9"	N/A	N/A	1 (BOTTOM)	
	9"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	8"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	9"	N/A	N/A	4 (TOP)	
	9"	N/A	N/A	4 (BOTTOM)	
	8"	N/A	N/A	5A (TOP)	
	3"	N/A	N/A	5 (BOTTOM)	
	3"	N/A	N/A	6 (BOTTOM)	
	3"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	6"	8 (TOP)	
	N/A	12"	6"	8 (BOTTOM)	
N/A	12"	6"	9 (TOP)		
9"	N/A	N/A	9 (BOTTOM)		
3"	N/A	N/A	10 (BOTTOM)		
5"	N/A	6"	11A (TOP)		
N/A	N/A	N/A	11 (BOTTOM)		
6"	N/A	N/A	13 (TOP)		
3"	N/A	N/A	13 (BOTTOM)		
N/A	N/A	N/A	14 (BOTTOM)		

\* USE 6" OC SPACING FOR PANEL LENGTHS LARGER THAN 10' - 0" AND USE 12" OC AS SHOWN ON SCHEDULE FOR PANELS LENGTHS EQUAL OR SHORTER THAN 10' - 0"

\*\* VALID ONLY FOR UP TO +50.0, -50.0 p.s.f. DESIGN LOAD WITH 108" Max. PANEL LENGTHS.



**TILECO inc.**  
 TILIT TESTING & ENGINEERING COMPANY  
 6355 N.W. 36th St., Ste. 305, VERO BEACH, FL 33166  
 Phone: (305)871-1330 Fax: (305)871-1331  
 EB-0006718  
 WALTER A. TILIT JR., P. E.  
 FLORIDA Lic. 44167

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

0.050" BERTHA ALUMINUM STORM PANEL (2" DEEP)

**EASTERN METAL SUPPLY, INC**  
 4268 WEST ROADS DRIVE  
 WEST PALM BEACH, FL 33407

REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION	DATE
1	OLD DWG 05-294	4/23/04	2		
2			3		

M.C.V. DRAWN BY:  
 5/23/08 DATE  
 06-169 DRAWING No  
 SHEET 17 OF 17

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  ~~Thurs~~ Thurs 6-5, 2008

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<del>8890</del>	<del>Taylor</del>	<del>Final</del>	<del>PASS</del>	<del>CLOSE</del>
4	11 Palm Rd Jupiter Alum			INSPECTOR: <i>JAV</i>
Tree	King	Tree	PASS	
1	35 W High Pt			INSPECTOR: <i>OM</i>
8867	Geller	Pt roof sheathing	PASS	
5	18 Palmetto Dr Ken Wendell	(2:00 P.M.)		INSPECTOR: <i>JAV</i>
8879	Olney	Final	PASS	CLOSE
3	915 Sewalls Pt Stuart Fence			INSPECTOR: <i>OM</i>
8848	Noheyl	electrical	PASS	
2	26 W High Pt Montalto	framing tie down door buck	PASS PASS FAIL PASS	INSPECTOR: <i>JAV</i>
8914	GILBERT	SWEATH / secondary	PASS	100% D AFFIDAVIT
	170 S RIVER MARCO	WATER BARRELS		INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER:





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

## BUILDING PERMIT CARD

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

PERMIT NUMBER:	9069	DATE ISSUED:	DECEMBER 10, 2008
SCOPE OF WORK:	HURRICANE SHUTTERS		
CONDITIONS :			
CONTRACTOR:	FOLDING SHUTTER		
PARCEL CONTROL NUMBER:	133841005000001109	SUBDIVISION	PALM ROW - LOT 11
CONSTRUCTION ADDRESS:	11 PALM RD		
OWNER NAME:	TAYLOR		
QUALIFIER:	GARY HEMSTREET	CONTACT PHONE NUMBER:	561-683-4811

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

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

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

### REQUIRED INSPECTIONS

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

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



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

### BUILDING PERMIT RECEIPT

<b>PERMIT NUMBER:</b>	9069		
<b>ADDRESS</b>	11 PALM RD		
<b>DATE:</b>	12/10/08	<b>SCOPE:</b>	HURRICANE SHUTTERS

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned space: (@ \$110.25 per sq. ft.)		s.f.	
Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)		s.f.	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$75 per insp.)			
Total number of inspections (Value < \$200K) @\$75 ea.		\$	
Radon Fee (\$.005 per sq. ft. under roof):		\$	
DBPR Licensing Fee: (\$.005 per sq. ft. under roof)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)			
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		\$	

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

*Cash*

**RECEIVED**  
DATE: 12-8-08  
TOWN OF SEWALL'S POINT

# 10242008005

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

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

OWNER/TITLEHOLDER NAME: Elaine Taylor TR Phone (Day) 772 287 0767 (Fax) \_\_\_\_\_

Job Site Address: 11 Palm Rd City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Palm Row Revised & Amended Lot 11 Parcel Number: 13-38-41-005-000-00110-9

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

Scope of work: Install Shutters - 2 Folding

**WILL OWNER BE THE CONTRACTOR?**

If yes, Owner Builder questionnaire must accompany application  
YES \_\_\_\_\_ NO X

Has a Zoning Variance ever been granted on this property?  
Yes \_\_\_\_\_ (Year) \_\_\_\_\_ No \_\_\_\_\_  
(Must include a copy of all variance approvals with application)

**CONSTRUCTION VALUES:** (Required on ALL permit applications)

Estimated Value of Improvements: \$ 10,423.00

Notice of Commencement required when over \$2500 - prior to first inspection

Is subject property located in flood hazard area? V \_\_\_\_\_ A9 \_\_\_\_\_ A8 X

**FOR ADDITIONS AND REMODELS IN FLOOD HAZARD AREAS ONLY:**

Estimated Fair Market Value prior to improvement: \_\_\_\_\_  
(Fair Market Value of the Primary Structure only, Minus the land value)  
\*\*\* PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION \*\*\*

CONTRACTOR/Company: Folding Shutter Corporation Phone: 901 603-4811 Fax: 901-209-7603

Street: 7089 Hemstreet Place City: WRB State: FL Zip: 33413

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Municipal License Number: CA15499

PROJECT SUPERINTENDANT: \_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_

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

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

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

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

AREA SQ. FOOTAGE: Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ Screened Porch: \_\_\_\_\_

Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Decks/walkways: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004 (W/2006 Rev.)  
National Electrical Code: 2005 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

**NOTICES TO OWNERS AND CONTRACTORS:**

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

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

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.

Elaine Taylor  
OWNER OR AUTHORIZED AGENT SIGNATURE (required)

[Signature]  
CONTRACTOR SIGNATURE (required)

State of Florida, County of: Martin

On State of Florida, County of: Palm Beach

This the 17th day of Nov 2008

This the 20 day of Nov 2008

by FLDU1460-207-25-64-9-0 who is personally

by Gary M Henstreet

known to me or produced Elaine G. Taylor

known to me or produced [Signature]

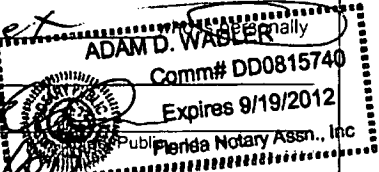
as identification. [Signature]  
Notary Public

As identification. [Signature]

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

My Commission Expires: 9/19/2011

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



# FOLDING SHUTTER CORPORATION

TELEPHONE  
Stuart (772) 286-2633  
Delray to Ft. Lauderdale (954) 427-8009  
West Palm Beach (561) 683-4811  
FAX: (561) 640-8204

Order of  
Stuart's Best  
Job # 10242008005

## FOLDING SHUTTER SYSTEM

State Manufacturing Headquarters  
7089 Hemstreet Place • West Palm Beach, Florida 33413-1640

NAME: Mr + Mrs AMOS TAYLOR (701) 287-0767  
BILLING ADDRESS: 11 PALM ROAD, STUART, FL 34996  
JOB ADDRESS: SAME

CIRCLE COLOR: White Bronze Beige Ivory OTHER

OPENING NUMBER	WINDOW	DOOR	SLIDING DOOR	ROOM	OPENING SIZE WD X HT	CURVED TRACK	BOUNT ANGLE	REMOVABLE TRACK	WINDOWS NUMBER	RAIN GUARD	STACK ROAMING	INSIDE LOCKS	OUTSIDE LOCKS	LOOKS YEK	LOOKS USKOL	FINISHED SIZE WD X HT	PRICE
1				LANAI	648x93		STACK (R)				XX					648x93	
2				Perimeter	144x94		STACK (R)						X			144x94	

CONTRACTOR RATE  
JH

PREMIUM TITAN FOLDING SYSTEM

ENTERED 11/10/08 JC

Permit, 5 year warranty and labor from Inspector

FOLDING SHUTTER CORPORATION SHALL FABRICATE AND INSTALL THE ABOVE PURSUANT TO THE TERMS AND CONDITIONS OF THIS AGREEMENT. OUR LIMITED WARRANTY BECOMES A PART OF THIS CONTRACT UPON FINAL PAYMENT AS PROVIDED IN THIS CONTRACT.

CUSTOMER'S RIGHT TO CANCEL — This is a home solicitation sale, and if you do not want the goods or services, you may cancel this agreement by providing written notice to the seller in person, by telegram, or by mail. This notice must indicate that you do not want the goods or services and must be delivered or postmarked before midnight of the third business day after you sign this agreement. If you cancel this agreement, the seller may not keep all or part of any cash down payment. CUSTOMER ACKNOWLEDGES READING THE FRONT & BACK SIDES OF THIS AGREEMENT AND AGREES TO BE BOUND BY ALL TERMS AND CONDITIONS AS SET FORTH ON BOTH SIDES.

TOTAL PRICE	\$ 10423	DATE	11/10/08
DEPOSIT	\$ 3500	CUSTOMER SIGNATURE	Amos Taylor
PROGRESS PAYMENT	\$ 3500	FACTORY REPRESENTATIVE SIGNATURE	Wm Kramer
BALANCE DUE AT INSTALLATION	\$ 3423		

Unless signed by customer, the price quoted can be guaranteed for thirty (30) days only from in owner's absence, name and phone number of contact for measuring, installation and payment.

Mrs ELAINE TAYLOR (701) 287-0767

ALL CHECKS PAYABLE TO FOLDING SHUTTER CORPORATION CONTRACT SUBJECT TO ADDITIONAL TERMS ON REVERSE SIDE



# Martin County, Florida

Laurel Kelly, C.F.A

Site Provided by...  
governmentmax.com T1.12

## Summary

print Owner  
42 of 164

### Parcel Info

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
13-38-41-005-000-00110-9	11 PALM RD	27818	Owner	0	1

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

**Summary**  
**Property Location** 11 PALM RD  
**Tax District** 2200 Sewall's Point  
**Account #** 27818  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120400  
**Acres** 0.346

**Legal Description**  
**Property Information**  
 PALM ROW REVISED & AMENDED LOT 11

### Search By

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

**Owner Information**  
**Owner Information**  
 TAYLOR, ELAINE G (TR)

**Mail Information**  
 11 PALM RD  
 STUART FL 34996

**Assessment Info**  
**Front Ft.** 0.00

**Market Land Value** \$223,250  
**Market Impr Value** \$234,590  
**Market Total Value** \$457,840

### Site Functions

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

**Recent Sale**  
**Sale Amount** \$100

**Sale Date** 11/6/1991  
**Book/Page** 0931 1023

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

Legal disclaimer / Privacy Statement

Data updated on 12/02/2008



# 10242008005

NOTICE OF COMMENCEMENT  
TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00

PERMIT #: \_\_\_\_\_ TAX FOLIO #: 13-38-41-005-000-00110-9  
STATE OF FLORIDA COUNTY OF MARTIN Town of Suwanee  
Blwr

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):  
Palm Rd REUSED & AMENDED Lot 11 11 Palm Rd, Stuart FL

GENERAL DESCRIPTION OF IMPROVEMENT: INSTALL SHUTTERS

OWNER NAME: Amos & Elaine Taylor - 11 Palm Rd Stuart FL 34996  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: 781-287-0707 FAX NUMBER: \_\_\_\_\_

INTEREST IN PROPERTY: \_\_\_\_\_

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

CONTRACTOR: Folding Shutter Corporation 2089 Heron Street Pl. West Palm Beach FL  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: 561-623-4811 FAX NUMBER: 561-209-7683 33413

SURETY COMPANY (IF ANY): \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
BOND AMOUNT: \_\_\_\_\_

LENDER/MORTGAGE COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

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

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES \_\_\_\_\_ OF \_\_\_\_\_ FLORIDA STATUES TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B).  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_  
(THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED).  
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Amos Taylor  
SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

SIGNATORY'S TITLE/OFFICE \_\_\_\_\_  
THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 7 DAY OF NOV, 2008  
BY: Amos Taylor AS OWNER FOR Amos Taylor  
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN  OR PRODUCED IDENTIFICATION \_\_\_\_\_

TYPE OF IDENTIFICATION PRODUCED \_\_\_\_\_  
NOTARY SIGNATURE [Signature]

ADAM D. WADLER  
Comm# DD0815740  
Expires 9/19/2012  
Florida Notary Assn., Inc.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS IN IT ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF (SECTION 92.525, FLORIDA STATUTES).

Amos Taylor  
(Signature of Natural Person Signing Above)

EDWIN M. FRY, Jr., CLERK OF THE CIRCUIT COURT  
SAINT LUCIE COUNTY  
FILE # 3280422 11/19/2008 at 11:41 AM  
OR BOOK 3034 PAGE 1322 - 1322 Doc Type: NC  
RECORDING: \$10.00

INSTR # 2120094 OR BK 02363 PG 2450 RECD 12/10/2008 11:48:  
Pg 2450 (1ps)  
MARSHA EWING MARTIN COUNTY DEPUTY CLERK C Hunter



FOLDING SHUTTER CORP. ENGINEERING LAYOUT SHEET

CUSTOMER NAME

TAYLOR

WORK ORDER NO.

10242008005710301

SHEET

OF

BY:

AD 1034

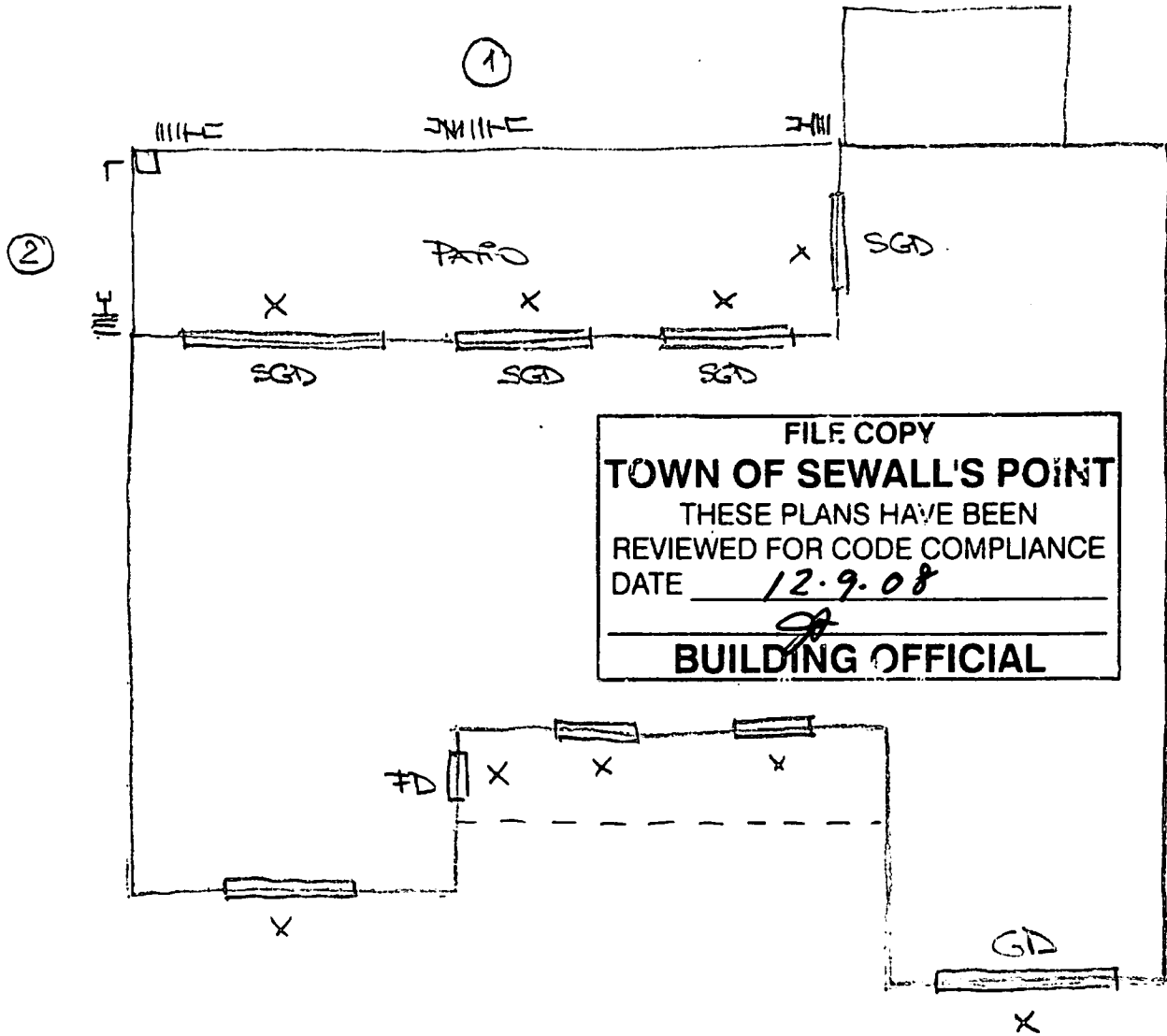
DATE:

11/17/08

1

2

EXP 'C'  
 ZONE S  
 15' ≥ 10'



FILE COPY  
**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE 12.9.08  
 \_\_\_\_\_  
**BUILDING OFFICIAL**

○ FOLDING = 2



# FOLDING SHUTTER CORP. ENGINEERING LAYOUT SHEET

CUSTOMER NAME

TAYLOR

WORK ORDER NO.

10242008005 No 3 91

SHEET

2

OF

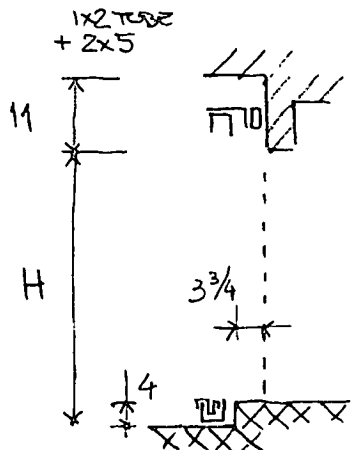
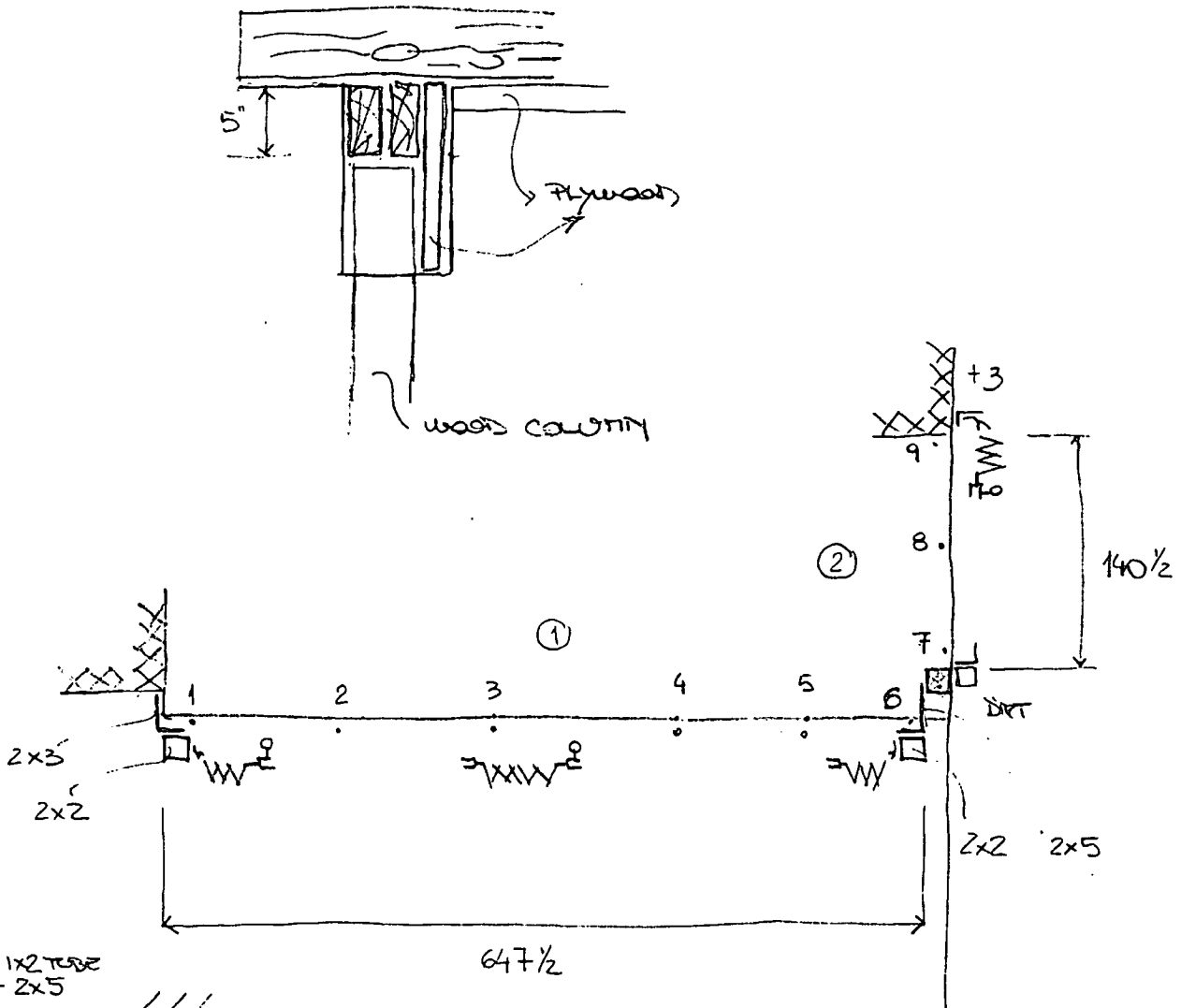
2

BY:

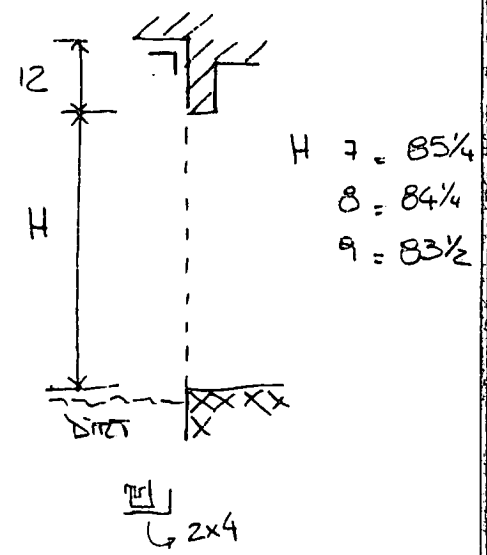
AP 1034

DATE:

11/17/08



- H 1 = 88
- 2 = 88
- 3 = 88 1/4
- 4 = 88 1/2
- 5 = 88 1/2
- 6 = 89 1/4



- H 7 = 85 1/4
- 8 = 84 1/4
- 9 = 83 1/2

# 2004 FLORIDA BUILDING CODE & ASCE 7-02 DESIGN LOADS FOR COMPONENTS AND CLADDING

**WIND VELOCITY=140 MPH  
EXPOSURE 'C'**

**MRH=0-60'**  
BASED ON  $K_d=0.85$   
SEE TABLE NOTES  
FOR ALT  $K_d$

**INTERIOR ZONE 4 PRESSURES**

**EXTERIOR ZONE 5 PRESSURES**

Mean Roof Height	DESIGN PRESSURES (PSF) - Zone 4									
	Tributary Area (Sq Ft)									
	10	15	20	25	30	35	40	45	50	
0 - 15 ft	-46.3	-45.2	-44.4	-43.8	-43.3	-42.9	-42.5	-42.2	-41.9	
16 ft	-47.0	-45.8	-45.0	-44.4	-43.9	-43.4	-43.1	-42.7	-42.4	
18 ft	-48.2	-47.0	-46.2	-45.5	-45.0	-44.5	-44.2	-43.8	-43.5	
20 ft	-49.2	-48.0	-47.2	-46.5	-46.0	-45.5	-45.1	-44.8	-44.5	
22 ft	-50.2	-49.0	-48.1	-47.5	-46.9	-46.5	-46.1	-45.7	-45.4	
24 ft	-51.2	-49.9	-49.0	-48.4	-47.8	-47.3	-46.9	-46.6	-46.2	
26 ft	-52.0	-50.8	-49.9	-49.2	-48.6	-48.1	-47.7	-47.3	-47.0	
28 ft	-52.8	-51.6	-50.7	-49.9	-49.4	-48.9	-48.5	-48.1	-47.8	
30 ft	-53.6	-52.3	-51.4	-50.7	-50.1	-49.6	-49.2	-48.8	-48.5	
32 ft	-54.4	-53.0	-52.1	-51.4	-50.8	-50.3	-49.8	-49.5	-49.1	
34 ft	-55.1	-53.7	-52.8	-52.0	-51.4	-50.9	-50.5	-50.1	-49.7	
36 ft	-55.7	-54.4	-53.4	-52.7	-52.1	-51.5	-51.1	-50.7	-50.3	
38 ft	-56.4	-55.0	-54.0	-53.3	-52.6	-52.1	-51.7	-51.3	-50.9	
40 ft	-57.0	-55.6	-54.6	-53.8	-53.2	-52.7	-52.2	-51.8	-51.5	
42 ft	-57.6	-56.2	-55.2	-54.4	-53.8	-53.2	-52.8	-52.4	-52.0	
44 ft	-58.1	-56.7	-55.7	-54.9	-54.3	-53.8	-53.3	-52.9	-52.5	
46 ft	-58.7	-57.2	-56.2	-55.5	-54.8	-54.3	-53.8	-53.4	-53.0	
48 ft	-59.2	-57.8	-56.7	-55.9	-55.3	-54.8	-54.3	-53.9	-53.5	
50 ft	-59.7	-58.3	-57.2	-56.4	-55.8	-55.2	-54.8	-54.3	-54.0	
52 ft	-60.2	-58.7	-57.7	-56.9	-56.2	-55.7	-55.2	-54.8	-54.4	
54 ft	-60.7	-59.2	-58.2	-57.4	-56.7	-56.1	-55.6	-55.2	-54.8	
56 ft	-61.2	-59.7	-58.6	-57.8	-57.1	-56.6	-56.1	-55.6	-55.3	
60 ft	-62.0	-60.5	-59.5	-58.6	-58.0	-57.4	-56.9	-56.5	-56.1	

Mean Roof Height	DESIGN PRESSURES (PSF) - Zone 5									
	Tributary Area (Sq Ft)									
	10	15	20	25	30	35	40	45	50	
0 - 15 ft	-57.2	-55.0	-53.4	-52.1	-51.1	-50.2	-49.5	-48.9	-48.3	
16 ft	-58.0	-55.7	-54.1	-52.8	-51.8	-50.9	-50.2	-49.5	-48.9	
18 ft	-59.4	-57.1	-55.4	-54.2	-53.1	-52.2	-51.4	-50.8	-50.2	
20 ft	-60.8	-58.4	-56.7	-55.4	-54.3	-53.4	-52.6	-51.9	-51.3	
22 ft	-62.0	-59.6	-57.8	-56.5	-55.4	-54.5	-53.7	-53.0	-52.3	
24 ft	-63.2	-60.7	-58.9	-57.5	-56.4	-55.5	-54.7	-53.9	-53.3	
26 ft	-64.2	-61.7	-59.9	-58.5	-57.4	-56.4	-55.6	-54.8	-54.2	
28 ft	-65.2	-62.7	-60.8	-59.4	-58.3	-57.3	-56.5	-55.7	-55.0	
30 ft	-66.2	-63.6	-61.7	-60.3	-59.1	-58.1	-57.3	-56.5	-55.8	
32 ft	-67.1	-64.5	-62.6	-61.1	-59.9	-58.9	-58.1	-57.3	-56.6	
34 ft	-68.0	-65.3	-63.4	-61.9	-60.7	-59.7	-58.8	-58.0	-57.3	
36 ft	-68.8	-66.1	-64.2	-62.7	-61.4	-60.4	-59.5	-58.7	-58.0	
38 ft	-69.6	-66.8	-64.9	-63.4	-62.1	-61.1	-60.2	-59.4	-58.7	
40 ft	-70.3	-67.6	-65.6	-64.1	-62.8	-61.8	-60.9	-60.1	-59.3	
42 ft	-71.0	-68.3	-66.3	-64.7	-63.5	-62.4	-61.5	-60.7	-59.9	
44 ft	-71.7	-68.9	-66.9	-65.4	-64.1	-63.0	-62.1	-61.3	-60.5	
46 ft	-72.4	-69.6	-67.5	-66.0	-64.7	-63.6	-62.7	-61.8	-61.1	
48 ft	-73.1	-70.2	-68.2	-66.6	-65.3	-64.2	-63.2	-62.4	-61.7	
50 ft	-73.7	-70.8	-68.7	-67.1	-65.7	-64.7	-63.8	-62.9	-62.2	
52 ft	-74.3	-71.4	-69.3	-67.7	-66.4	-65.3	-64.3	-63.5	-62.7	
54 ft	-74.9	-72.0	-69.9	-68.2	-66.9	-65.8	-64.8	-64.0	-63.2	
56 ft	-75.5	-72.5	-70.4	-68.8	-67.4	-66.3	-65.3	-64.5	-63.7	
60 ft	-76.6	-73.6	-71.4	-69.8	-68.4	-67.3	-66.3	-65.4	-64.6	

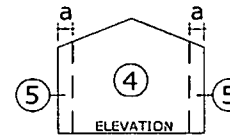
**INSTRUCTIONS FOR TABLE USE:**

1. TABLES ARE INTENDED TO DEPICT THE 'WORST CASE' PRESSURES. 'WORST CASE' IS DEFINED AS THE CRITICAL CONDITION OF ANY UNKNOWN VARIABLE AS DESCRIBED BELOW. USE OF CRITICAL CONDITIONS REQUIRED FOR USE WITH THESE TABLES.
2. FOR SITUATIONS THAT REQUIRE  $K_d=1.0$ , TABLE VALUES ARE UNDER-DESIGNED BY A FACTOR OF 1.18. VERIFY  $K_d$  REQUIREMENTS WITH LOCAL MUNICIPALITY PRIOR TO TABLE USE.
3. USE OF TABLES VALID ONLY FOR BUILDINGS LESS THAN 60' ROOF HEIGHT.
4. TABLES VALID FOR ALL ROOF SLOPES. REDUCTIONS FOR ROOF SLOPES LESS THAN 10° SHALL BE PERFORMED BY AN ENGINEER AS A SITE SPECIFIC CONDITION.
5. IDENTIFY THE BUILDING MEAN (AVERAGE) ROOF HEIGHT. IF THE MEAN ROOF HEIGHT CANNOT BE IDENTIFIED, USE THE PEAK ROOF HEIGHT.
6. ALWAYS ROUND UP ROOF HEIGHTS TO NEXT TABLE VALUE OR TO A CONSERVATIVE ASSUMPTION.
7. CALCULATE THE TRIBUTARY AREA OF THE OPENING IN QUESTION (HEIGHT \* WIDTH) OR THE SPAN LENGTH (HEIGHT) MULTIPLIED BY AN EFFECTIVE WIDTH THAT NEED NOT BE LESS THAN ONE-THIRD THE SPAN LENGTH (HEIGHT <sup>2</sup> / 3). USE THE AREA BETWEEN STRUCTURAL OPENINGS ONLY - THIS INCLUDES AREAS BETWEEN STRUCTURAL MULLS. IF THE TRIBUTARY AREA OF AN OPENING CANNOT BE IDENTIFIED, THE MOST CRITICAL (10 SQUARE FEET) SHALL BE USED. ALWAYS ROUND TRIBUTARY AREA DOWN TO THE LESSER TABLE VALUE. FOR LARGER TRIBUTARY AREAS THAN PUBLISHED, USE THE LARGEST PUBLISHED VALUE.
8. IDENTIFY THE ZONE OF THE OPENING AS INTERIOR (ZONE 4) OR EXTERIOR (ZONE 5) PER THE FIGURE OR INFORMATION BY OTHERS. ANY QUESTIONABLE OPENING IS TO BE CONSIDERED THE MORE CRITICAL (EXTERIOR) ZONE.
9. READ OFF POSITIVE AND NEGATIVE PRESSURES FOR USE AS REQUIRED BY THE LOCAL MUNICIPALITY IN ACCORDANCE WITH CODE.

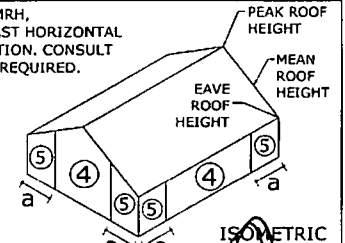
**GENERAL NOTES:**

1. THESE CHARTS ARE NOT VALID AS A SITE-SPECIFIC DRAWING. THESE TABLES ARE ONLY VALID WHEN SIGNED & RAISED SEALED BY FRANK L. BENNARDO, P.E.
2. THIS SPECIFICATION IS INTENDED TO ILLUSTRATE DESIGN WIND PRESSURES AS LISTED. USE OF THESE TABLES AND CORRESPONDING WIND VELOCITY, EXPOSURE, AND OTHER COEFFICIENTS LISTED HEREIN SHALL BE DICTATED AND VERIFIED BY THE GOVERNING BUILDING DEPARTMENT AND PERMIT HOLDER. NO WARRANTY FOR APPLICABILITY OF TABLE VALUE USE IS OFFERED HEREIN.
3. THIS SPECIFICATION IS NOT INTENDED TO OFFER ANY PRODUCT APPROVED CERTIFICATION. REFER TO ANY SEPARATELY SUBMITTED TEST CRITERIA AND OTHER APPROVALS FOR DESIGN & INSTALLATION INFORMATION AND APPLICABILITY OF THESE TABLE VALUES WHICH IS TO BE VERIFIED BY OTHERS IN ACCORDANCE WITH GOVERNING CODES.
4. DESIGN IS BASED ON THE 3 SECOND GUST (WIND VELOCITY) FOR A CATEGORY II (GENERAL RESIDENTIAL & COMMERCIAL CONSTRUCTION) USING AN IMPORTANCE FACTOR  $I=1.0$ . THESE TABLES NOT FOR USE WITH ESSENTIAL FACILITIES OR ASSEMBLY OCCUPANCIES. TOPOGRAPHIC FACTOR  $K_{zt}=1.0$  FOR FLAT-TERRAIN USE ONLY. THESE TABLES NOT VALID FOR HILLY TERRAIN. INTERNAL PRESSURE COEFFICIENT ( $C_{pi} = +/- 0.18$ ) ENCLOSED BUILDING ONLY. VERIFY USE OF  $K_d=0.85$  (DIRECTIONALITY FACTOR) WITH LOCAL BUILDING DEPARTMENT. HVHZ = HIGH VELOCITY HURRICANE ZONE. TABLES ARE FOR WALLS AND VERTICAL SURFACES ONLY.
5. ADHERE TO ALL LOCAL IMPACT PROTECTION SYSTEM ORDINANCES.
6. NO CERTIFICATION IS OFFERED FOR THE INTEGRITY OF THE HOST STRUCTURE.
7. EXCEPT AS EXPRESSLY PROVIDED HEREIN, NO ADDITIONAL CERTIFICATIONS OR AFFIRMATIONS ARE INTENDED.

$a = 10\%$  OF LEAST HORIZONTAL DIMENSION OR  $40\%$  OF MRH, WHICHEVER IS SMALLER, BUT NOT LESS THAN  $4\%$  OF LEAST HORIZONTAL DIMENSION OR 3FT (1m). USE ZONE 5 IF AT ALL IN QUESTION, CONSULT AN ENGINEER FOR A MORE SPECIFIC INTERPRETATION IF REQUIRED.



WALL ZONE FIGURES



ISOMETRIC

SCALE: N.T.S.  
PAGE DESCRIPTION:

REMARKS	DRWN	CHKD	DATE
INIT ISSUE	CL	FLB	04/19/06

## 2004 FLORIDA BUILDING CODE

ASCE 7-02, MRH = 0 - 60 FT  
DESIGN LOADS FOR  
COMPONENTS & CLADDING

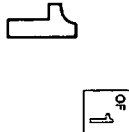


160 SW 12th AVENUE, #106  
DEERFIELD BEACH, FL 33442  
PH: (954) 354-0660 FAX: (954) 354-0443

WWW.ENGPXP.COM  
CERT OF AUTH #9885

A FRANK L. BENNARDO, P.E., INC. INNOVATION

VALID FOR (1) JOB(S) ONLY  
VALID ONLY WITH RAISED ENGINEER SEAL  
05/22/2007  
FRANK L. BENNARDO, P.E.  
#PE0046549





# NON-HVHZ

MIAMI-DADE COUNTY, FLORIDA  
METRO-DADE FLAGLER BUILDING

BUILDING CODE COMPLIANCE OFFICE (BCCO)  
PRODUCT CONTROL DIVISION

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

[www.buildingcodeonline.com](http://www.buildingcodeonline.com)

## NOTICE OF ACCEPTANCE (NOA)

Folding Shutter Corporation  
7089 Hemstreet Place  
West Palm Beach, Florida 33413

### 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 only in the **NON-High Velocity Hurricane Zone (NON-HVHZ)** 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 **NON-HVHZ** of the Florida Building Code.

### DESCRIPTION: "Titan II" Aluminum Accordion Shutter

**APPROVAL DOCUMENT:** Drawing No. 1475, titled "Titan II NON-HVHZ Folding Shutter", sheets 1 through 5 of 5, prepared by W. W. Schaefer Engineering & Consulting, P.A., dated April 04, 2006, signed and sealed by W. W. Schaefer, P.E. on April 04, 2006 bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by Miami-Dade County Product Control Division.

### MISSILE IMPACT RATING: Large and Small Missile Impact

**LABELING:** Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and the following statement: "NON-HVHZ 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 **NON-HVHZ** Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

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

This NOA consists of this page 1, evidence submitted pages E-1 through E-4 as well as approval document mentioned above.

The submitted documentation was reviewed by **Helmy A. Makar, P.E.**



NOA No 06-0407.07  
Expiration Date: 04/09/2011  
Approval Date: 05/18/2006  
Page 1

**Folding Shutter Corporation**

**NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**

1. **EVIDENCE SUBMITTED UNDER PREVIOUS APPROVAL # 94-0916.10**
  - A. **TESTS:**
    1. *Test report on Uniform Static Air Pressure Test of Accordion Shutter, prepared by Hurricane Engineering & Testing, Inc., Report No. HETI-94-191, dated 07/15/94, signed and sealed by Arshad Viqar, P.E.*
    2. *Test report on Large Missile Impact Test and Cyclic Wind Pressure Test of accordion shutter, prepared by Hurricane Engineering & Testing, Inc., Report No. HETI-94-195, dated 07/16/94, signed and sealed by Arshad Viqar, P.E.*
  - B. **DRAWINGS:**
    1. *Drawing No. 94-63 "Accordion Shutter Details", sheets 1 and 2 of 2, prepared by Al-Farooq Corporation, dated 08/25/94, revised on 10/05/94, signed and sealed by Humayoun Farooq, P.E.*
  - C. **MATERIAL CERTIFICATION:**
    1. *Mill Certified Test Report issued by William L. Bonnell Co., Inc. dated 09/13/94 with chemical composition and mechanical properties for aluminum alloy 6063-T6.*
    2. *Tensile Test Report No. HETI-94-T20, prepared by Hurricane Engineering & Testing Inc. dated 09/15/94*
  - D. **CALCULATIONS:**
    1. *Anchor analysis dated 10/06/94, Pages 1 thru 10 of 10, prepared by Al-Farooq Corp., signed and sealed by Humayoun Farooq, P.E.*
2. **EVIDENCE SUBMITTED UNDER PREVIOUS APPROVAL # 96-1112.02**
  - A. **DRAWINGS:**
    1. *Drawing prepared by Al-Farooq Corporation titled "Titan II Folding Shutter", Drawing No. 94-63, dated 08/25/94, revision E dated 03/19/98, sheets 1 through 5 of 5, signed and sealed by Humayoun Farooq, P.E.*
  - B. **TESTS:**
    1. *Test report on Uniform Static Air Pressure Test of accordion shutter, prepared by Hurricane Engineering & Testing, Inc., Report No. HETI-96-542, dated 04/17/96, signed and sealed by Hector M. Medina, P.E.*
    2. *Test report on Large Missile Impact Test and Cyclic Wind Pressure Test of accordion shutter, prepared by Hurricane Engineering & Testing, Inc., Report No. HETI-96-541, dated 04/03/96, signed and sealed by Hector M. Medina, P.E.*



Helmy A. Makar, P. E.  
Product Control Examiner  
NOA No 06-0407.07  
Expiration Date: 04/09/2011  
Approval Date: 05/18/2006

**Folding Shutter Corporation**

**NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**

3. *Test report on Large Missile Impact Test, Cyclic Wind Pressure Test and Uniform Static Air Pressure Test of accordion shutter, prepared by Hurricane Test Laboratory, Inc., Report No. 0143-0806-97, dated 08/08/97, signed and sealed by Timothy S. Marshall, P.E.*

**C. CALCULATIONS:**

1. *Anchor analysis dated 09/30/96, prepared by Al-Farooq Corp., signed and sealed by Humayoun Farooq, P.E.*
2. *Anchor analysis dated 12/22/97, prepared by Al-Farooq Corp., signed and sealed by Humayoun Farooq, P.E.*
3. *Anchor analysis dated 03/19/98, prepared by Al-Farooq Corp., signed and sealed by Humayoun Farooq, P.E.*

**3. EVIDENCE SUBMITTED UNDER PREVIOUS APPROVAL # 01-0118.03**

**A. DRAWINGS:**

1. *None.*

**B. TESTS:**

1. *None.*

**C. CALCULATIONS:**

1. *None.*

**D. MATERIAL CERTIFICATION:**

1. *None.*

**4. EVIDENCE SUBMITTED UNDER PREVIOUS APPROVAL # 02-1224.03**

**A. DRAWINGS**

1. *Drawing No. 1173, titled " Titan II Folding Shutter ", sheets 1 through 5 of 5, prepared by W. W. Schaefer Engineering & Consulting, P.A., dated October 03, 2002, signed and sealed by Warren W. Schaefer, P.E. on June 05, 2003.*

**B. TESTS**

1. *Test report on Large Missile Impact Test, Cyclic Wind Pressure Test and Uniform Static Air Pressure Test of accordion shutter, prepared by Hurricane Test Laboratory, Inc., Report No. 0143-0408-02, dated 11/12/02, signed and sealed by Vinu J. Abraham, P.E.*



Helmy A. Makar, P. E.  
Product Control Examiner  
NOA No 06-0407.07  
Expiration Date: 04/09/2011  
Approval Date: 05/18/2006

**Folding Shutter Corporation**

**NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**

**C. CALCULATIONS**

1. *Anchor analysis, 12 Pages, prepared by W. W. Schaefer Engineering & Consulting, P.A., dated October 15, 2002, signed and sealed by Warren W. Schaefer, P.E.*

**D. MATERIAL CERTIFICATIONS**

1. *Tensile Test Report No. 2KM-1334, prepared by QC Metallurgical, Inc., dated December 06, 2002.*

**5. EVIDENCE SUBMITTED UNDER PREVIOUS APPROVAL # 04-1103.01**

**A. DRAWINGS**

1. *Drawing No. 1173, titled " Titan II Folding Shutter ", sheets 1 through 5 of 5, prepared by W. W. Schaefer Engineering & Consulting, P.A., dated October 03, 2002, last revision A, signed and sealed by Warren W. Schaefer, P.E. on October 28, 2004.*

**B. TESTS**

1. *Test report on Large Missile Impact Test, Cyclic Wind Pressure Test and Uniform Static Air Pressure Test of accordion shutter, prepared by Hurricane Test Laboratory, Inc., Report No. 0143-0408-02, dated 05/07/04, signed and sealed by Vinu J. Abraham, P.E.*

**C. QUALITY ASSURANCE**

1. *By Miami-Dade County Building Code Compliance Office.*

**D. CALCULATIONS**

1. *None.*

**E. MATERIAL CERTIFICATIONS**

1. *Tensile Test Report No. 2KM-1334, prepared by QC Metallurgical, Inc., dated December 06, 2002.*

**6. EVIDENCE SUBMITTED UNDER PREVIOUS APPROVAL # 05-0119.01**

**A. DRAWINGS**

1. *Drawing No. 1173, titled " Titan II Folding Shutter ", sheets 1 through 5 of 5, prepared by W. W. Schaefer Engineering & Consulting, P.A., dated October 03, 2002, last revision A, signed and sealed by Warren W. Schaefer, P.E. on January 05, 2005.*

**B. TESTS**

1. *None.*



Helmy A. Makar, P. E.  
Product Control Examiner  
NOA No 06-0407.07  
Expiration Date: 04/09/2011  
Approval Date: 05/18/2006

**Folding Shutter Corporation**

**NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**

**C. QUALITY ASSURANCE**

1. *By Miami-Dade County Building Code Compliance Office.*

**D. CALCULATIONS**

1. *Design analysis and Anchor calculations, 50 Pages, prepared by W. W. Schaefer Engineering & Consulting, P.A., dated January 04, 2005, signed and sealed by Warren W. Schaefer, P.E.*

**E. MATERIAL CERTIFICATIONS**

1. *None.*

**7. NEW EVIDENCE SUBMITTED (NON-HVHZ) from NOA #05-0908.01**

**A. DRAWINGS**

1. Drawing No. 1475, titled "Titan II NON-HVHZ Folding Shutter", sheets 1 through 5 of 5, prepared by W. W. Schaefer Engineering & Consulting, P.A., dated April 04, 2006, signed and sealed by W. W. Schaefer, P.E. on April 04, 2006.

**B. TESTS**

1. *None.*

**C. QUALITY ASSURANCE**

1. *By Miami-Dade County Building Code Compliance Office.*

**D. CALCULATIONS**

1. *None.*

**E. MATERIAL CERTIFICATIONS**

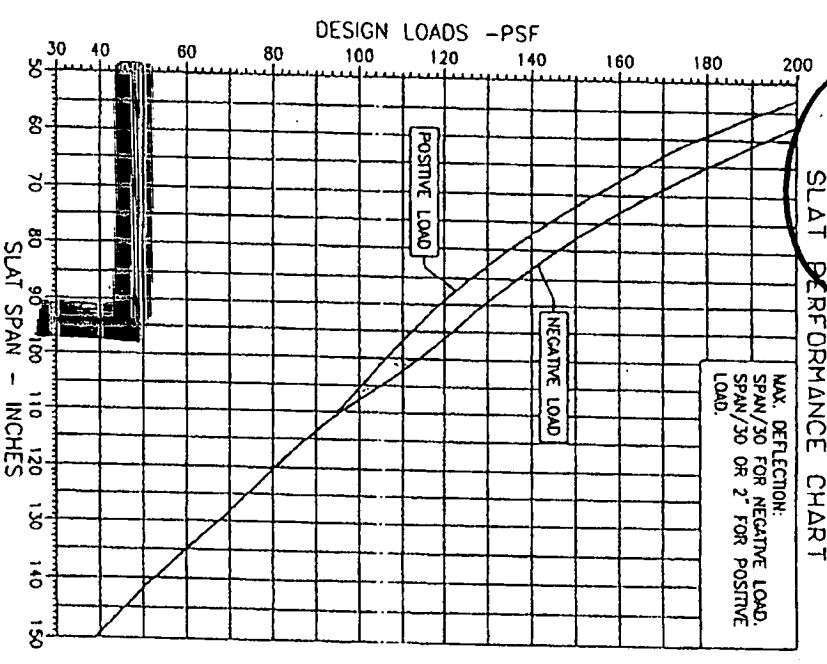
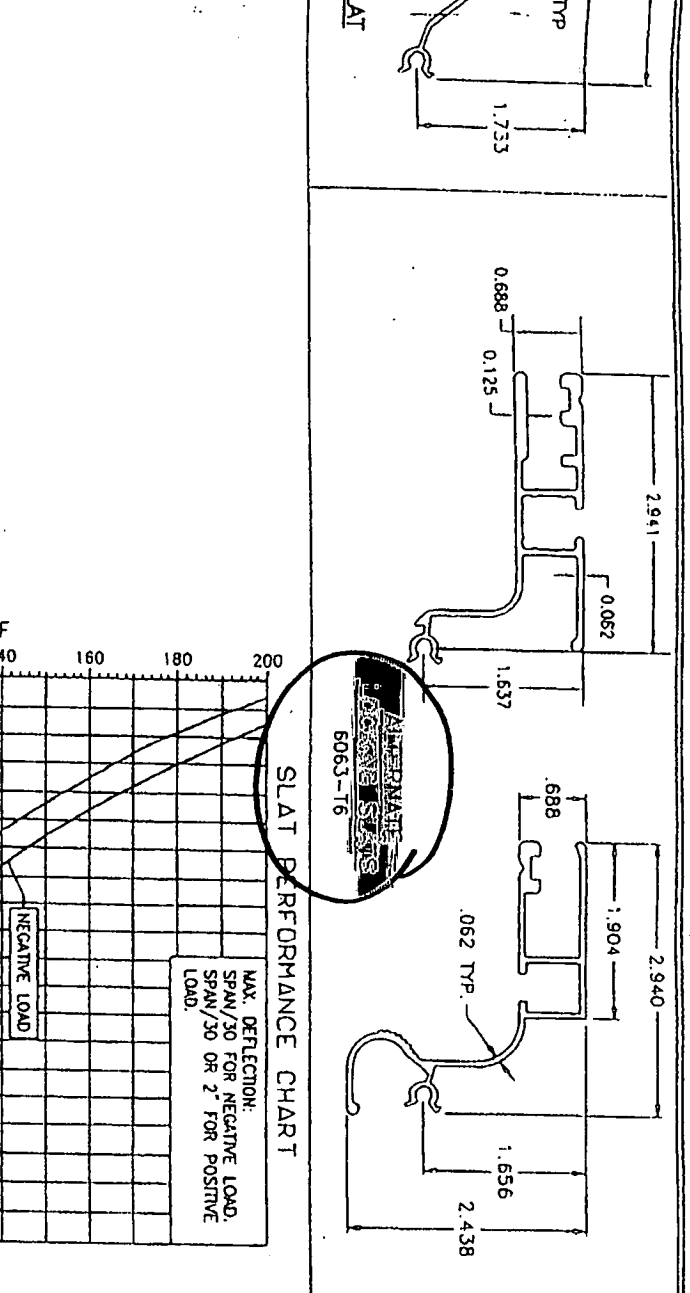
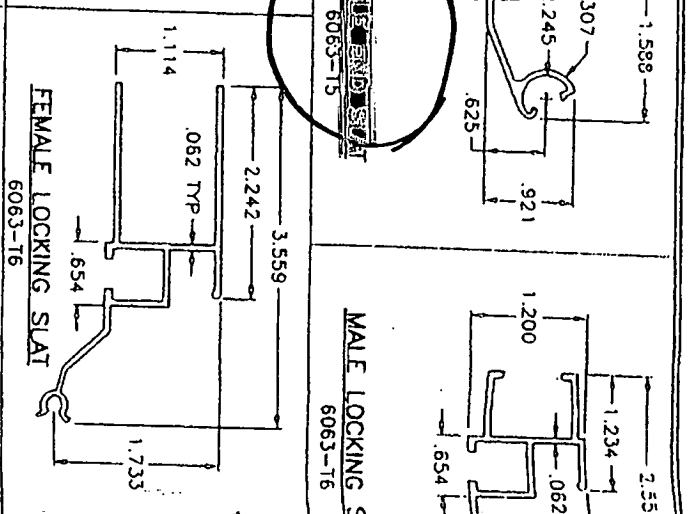
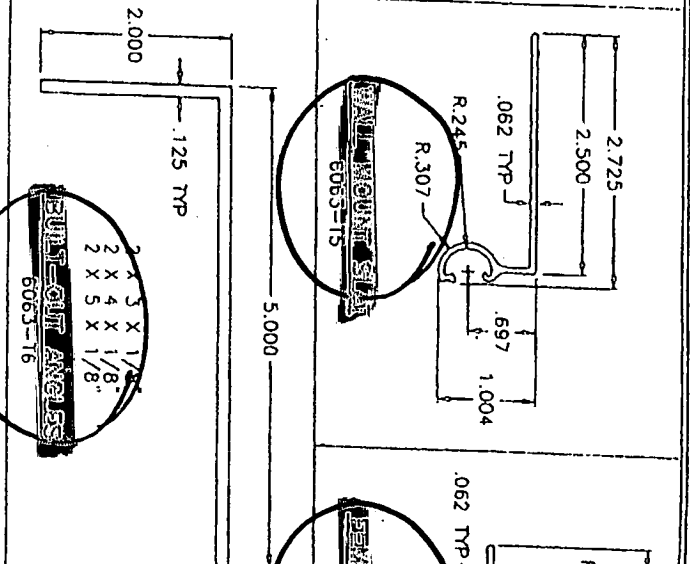
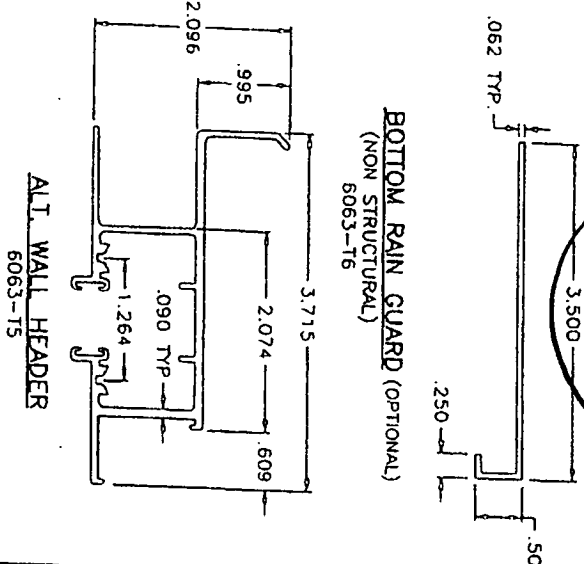
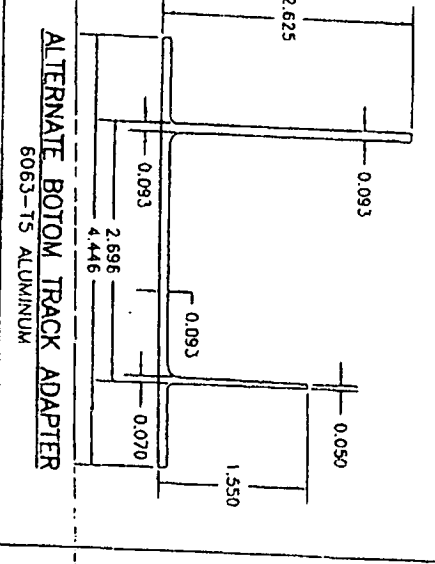
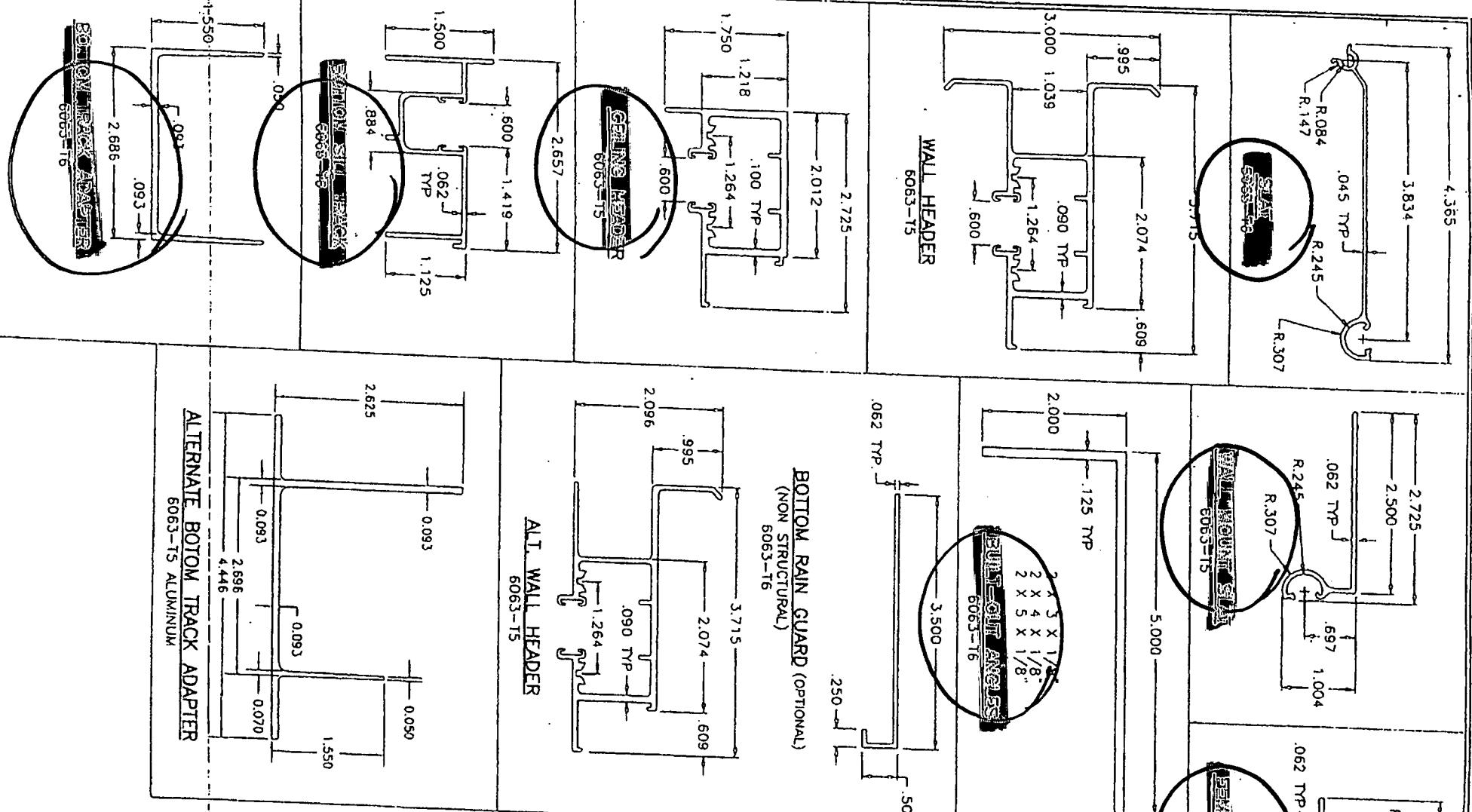
1. *None.*

**F. NOTE**

1. *The only change in NOA#06-0407.07 for NON-HVHZ from NOA #05-0908.01 is the Shutter Glass Separation.*



Helmy A. Makar, P. E.  
Product Control Examiner  
NOA No 06-0407.07  
Expiration Date: 04/09/2011  
Approval Date: 05/18/2006



**GENERAL NOTES**

1. THESE SHUTTERS ARE DESIGNED PER THE 2004 FLORIDA BUILDING CODE (FBC) FOR NON-HIGH VELOCITY HURRICAN ZONES (NON-HVHZ).
2. DESIGN CRITERIA FOR ALUMINUM, MINIMUM MECHANICAL PROPERTIES, AND SAFETY FACTORS ARE IN ACCORDANCE WITH THE "ALUMINUM CONSTRUCTION MANUAL" LATEST EDITION.
3. ALL EXTRUSIONS SHALL BE ALLOYS AS SHOWN ON DETAILS.
4. STEEL SURFACES TO BE PLACED IN CONTACT WITH ALUMINUM SHALL BE GIVEN ONE COAT OF ZINC CHROMATE PRIMER IN ACCORDANCE WITH FEDERAL SPEC. NO. TTP-645, OR BE GALVANIZED.
5. ANCHORS SHALL BE AS LISTED, SPACED AS SHOWN ON DETAILS. ANCHOR EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO.
6. ALL BOLTS, NUTS AND WASHERS SHALL BE STAINLESS STEEL OR ALUMINUM ALLOY 2024-T4 OR 7075-T6.
7. DESIGN CRITERIA FOR SLATS: MAX DEFLECTION  $\leq$  L/30 FOR NEGATIVE PRESSURE AND THE LESSER OF L/30 OR 2" FOR POSITIVE PRESSURE. ANCHORING OR LOADING CONDITIONS OTHER THAN THOSE SHOWN IN THESE DETAILS ARE NOT PART OF THIS APPROVAL.

USE SLAT PERFORMANCE CHART TO VERIFY SLAT CAPACITY FOR THE REQUIRED DESIGN LOAD FOR THE PARTICULAR LOCATION.

**PRODUCT MARKING**

A LABEL SHALL BE AFFIXED ON LOCKING MEMBER OF UNIT ABOVE THE LOCK WITH FOLLOWING STATEMENT

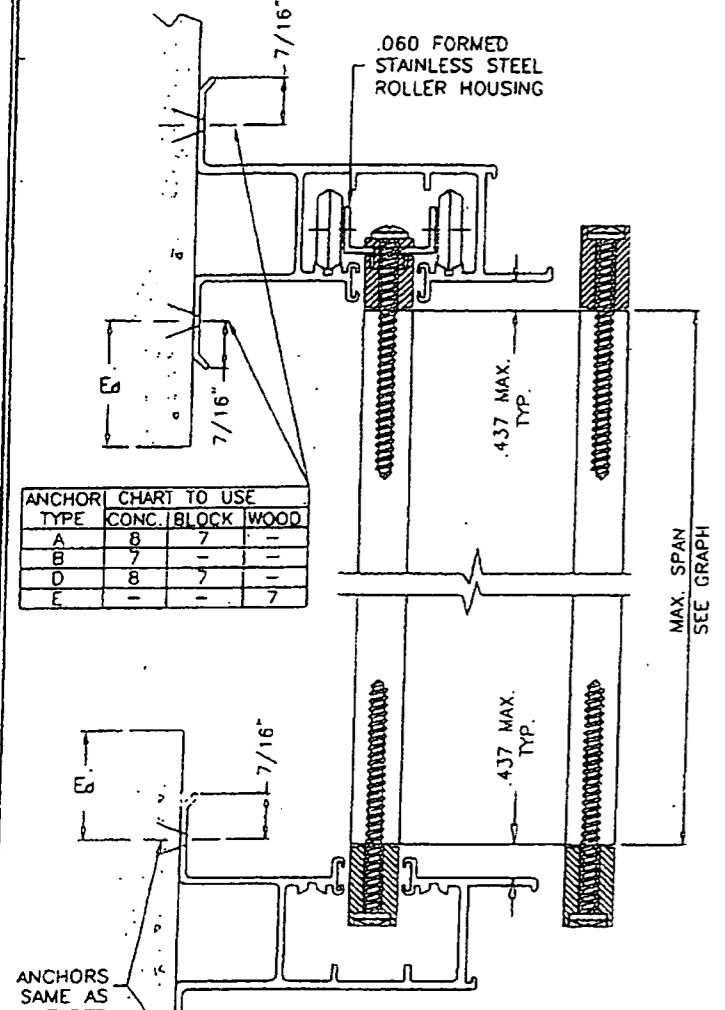
FOLDING SHUTTER CORP. WEST PALM BEACH, FL  
"DADE COUNTY PRODUCT CONTROL APPROVED"

Approved as existing with the  
Florida Building Code  
Date: 05/18/2006  
MOA#: 06-0407.97  
Miami Dade Product Control  
Evelyn  
By: *[Signature]*

<b>CERTIFICATION</b>  WARREN W. SCHAEFER, P.E. P.E. NO. 44135	<b>DRAWING TITLE</b> TITAN II NON-HVAZ FOLDING SHUTTER FL 8602	<b>CONSULTANTS</b> W. W. SCHAEFER ENGINEERING & CONSULTING, P.A. 8895 N. MILITARY TRAIL, SUITE C-204 PALM BEACH GARDENS, FL 33410 PHONE: 561-775-4902 FAX: 561-775-4903	<b>MANUFACTURER</b> FOLDING SHUTTER CORP. 7089 HEMSTREET PLACE WEST PALM BEACH, FL 33406 561-683-4811	<b>NO.</b> 1	<b>REVISION DESCRIPTION</b>	<b>BY</b>	<b>DATE</b>	<b>DRAWN BY:</b> W.W.S.	<b>CHECKED BY:</b> W.W.S.
				<b>DATE:</b> 04/04/06	<b>SCALE:</b> 1=1	<b>SHEET NO.:</b> 1 OF 5	<b>DRAWING NO.:</b> 1475	<b>REV.:</b>	

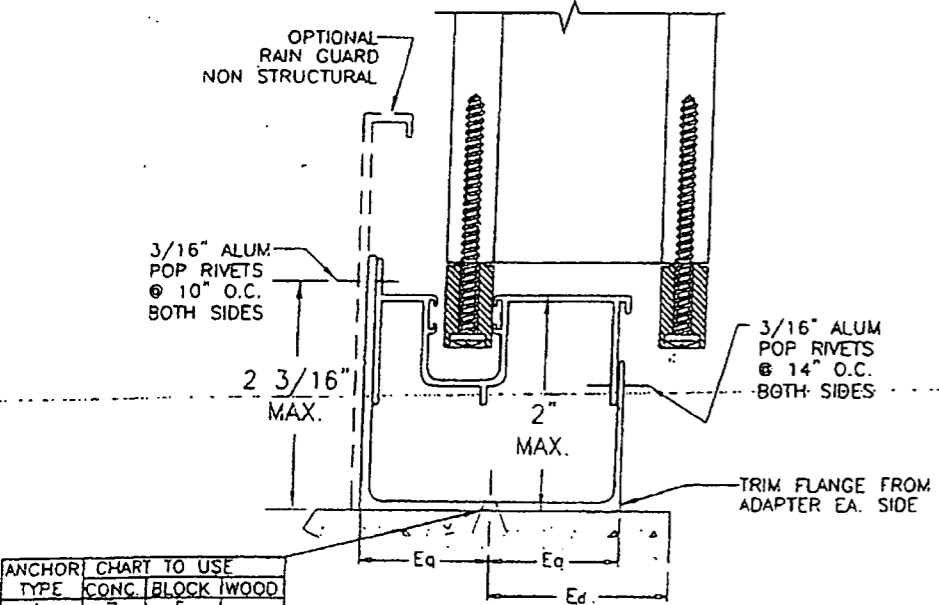


**WALL MOUNTS**



ANCHOR CHART TO USE			
TYPE	CONC.	BLOCK	WOOD
A	6	4	-
B	2	-	-
D	6	4	-
E	-	-	3

**SECTION A-A**

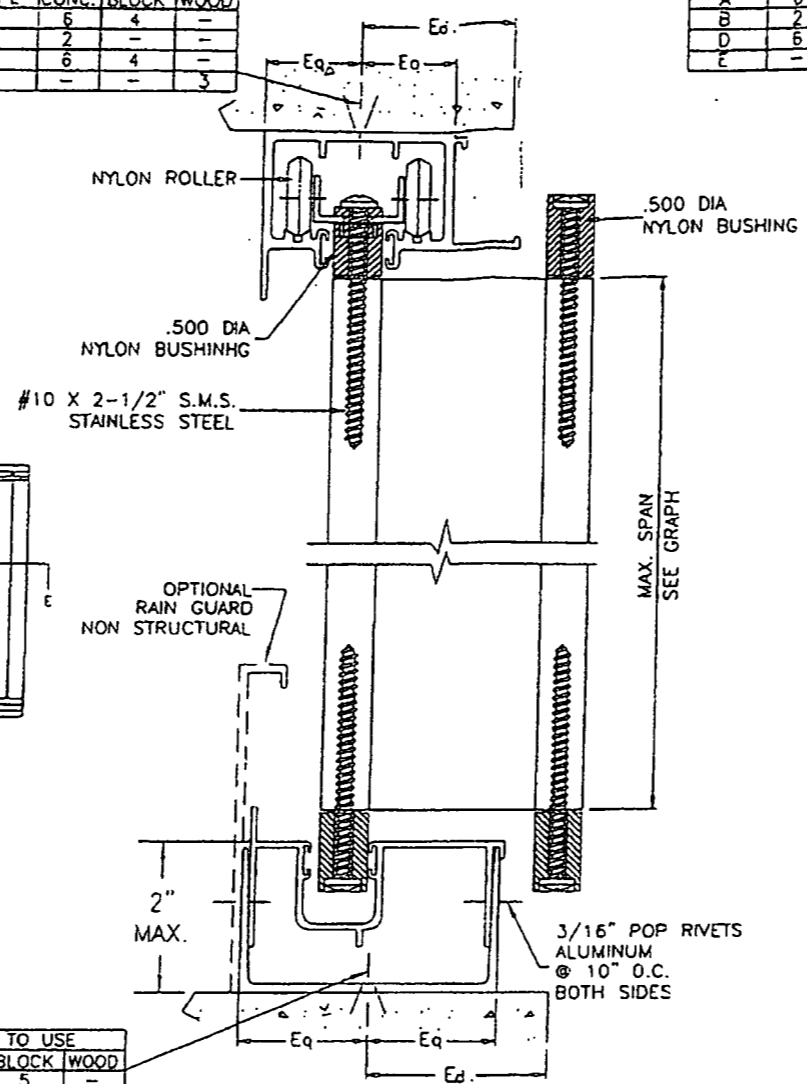


ANCHOR CHART TO USE			
TYPE	CONC.	BLOCK	WOOD
A	7	5	-
B	3	-	-
D	7	5	-
E	-	-	4

**SECTION B-B**  
**ALTERNATE BOTTOM TRACK ADAPTER**  
 WITHOUT FLANGES  
 (SAME AS WITH FLANGES EXCEPT WITHOUT FLANGES)

**INSIDE MOUNTS**

ANCHOR CHART TO USE			
TYPE	CONC.	BLOCK	WOOD
A	6	4	-
B	2	-	-
D	6	4	-
E	-	-	3



ANCHOR CHART TO USE			
TYPE	CONC.	BLOCK	WOOD
A	5	-	-
B	3	-	-
D	7	5	-
E	-	-	4

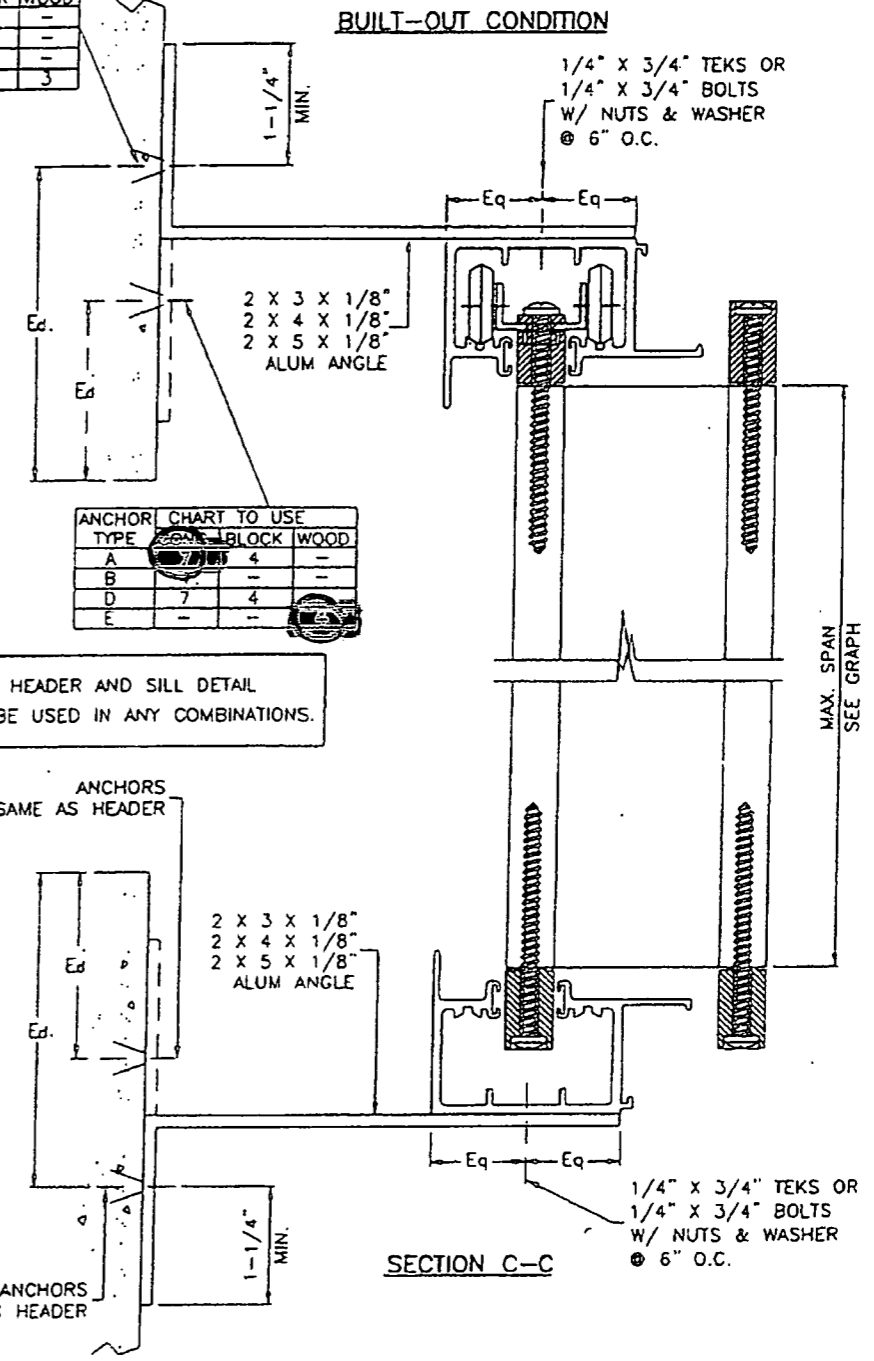
**SECTION B-B**  
 SEE ALTERNATE SECTIONS B-B FOR ALTERNATE TRACK ADAPTER

NOTE: ANCHOR SPACING SPECIFIED IN CHARTS IS TO BE CONSIDERED AS OVERALL SPACING BETWEEN ANCHORS. EACH ROW WILL HAVE A SPACING OF 2 TIMES THAT SPECIFIED IN THE CHARTS WITH EACH ROW STAGGERED SUCH THAT THE OVERALL SPACING IS THAT SPECIFIED IN THE CHARTS.

ANCHOR CHART TO USE			
TYPE	CONC.	BLOCK	WOOD
A	7	5	-
B	3	-	-
D	7	5	-
E	-	-	4

**SECTION B-B**  
**ALTERNATE BOTTOM TRACK ADAPTER**  
 WITH FLANGES

ANCHOR CHART TO USE			
TYPE	CONC.	BLOCK	WOOD
A	6	3	-
B	2	-	-
D	6	3	-
E	-	-	3



ANCHOR CHART TO USE			
TYPE	CONC.	BLOCK	WOOD
A	7	4	-
B	-	-	-
D	7	4	-
E	-	-	3

NOTE: HEADER AND SILL DETAIL CAN BE USED IN ANY COMBINATIONS.

**SECTION C-C**

FOR GENERAL NOTES AND EXTRUSION DETAILS SEE SHEET 1 OF 5.  
 FOR WOOD INSTALLATIONS SEE SHEET 4 OF 5.  
 FOR ANCHOR CHARTS SEE SHEET 5 OF 5.

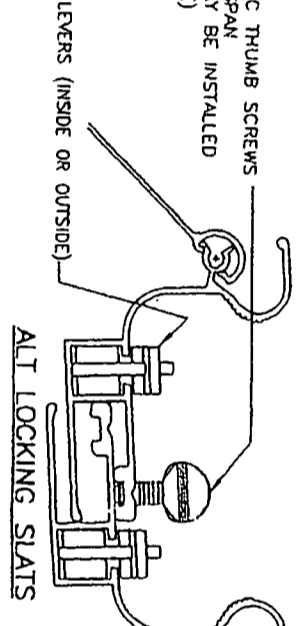
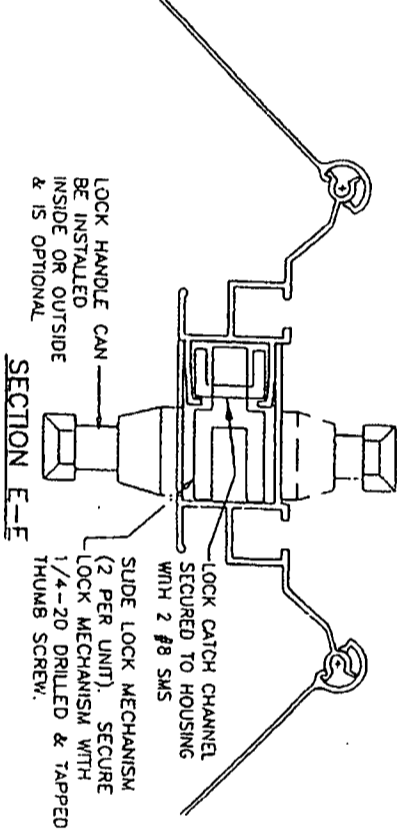
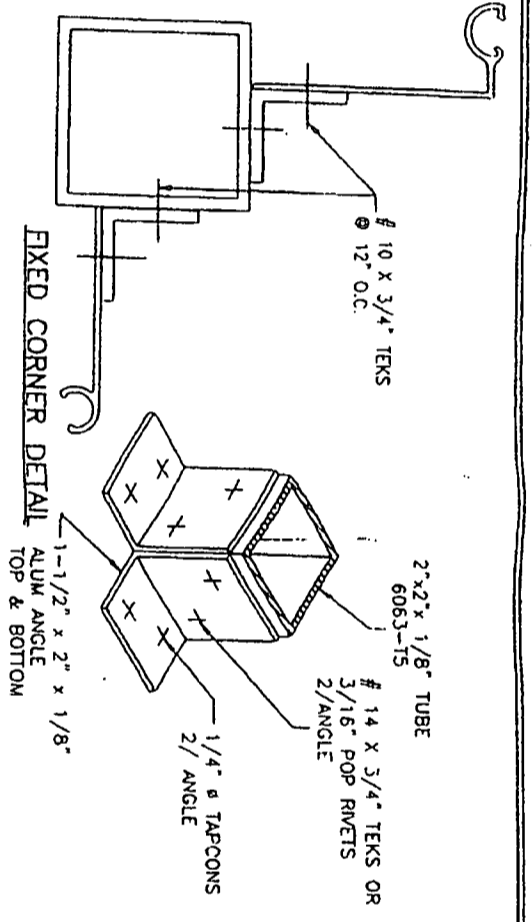
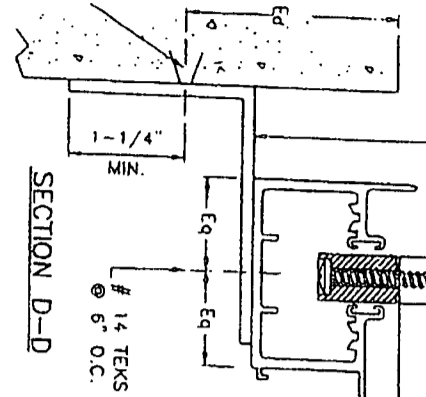
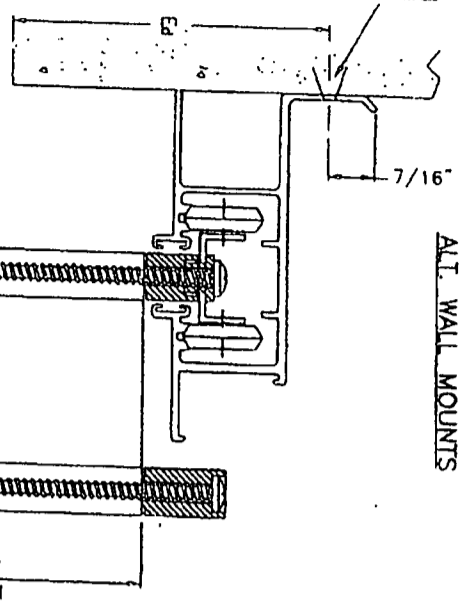
Ed = TYPICAL EDGE DISTANCE  
 CONC. & BLOCK = 12d (12 ANCHOR DIAMETERS)  
 WOOD = 5d  
 FOR LESSER EDGE DISTANCES SEE SHEET 5 OF 5.

ANCHORS: EMBEDMENT & EDGE DISTANCES SHOWN ARE BEYOND THE WALL & FLOOR COVERING (STUCCO, TILES, ETC.)

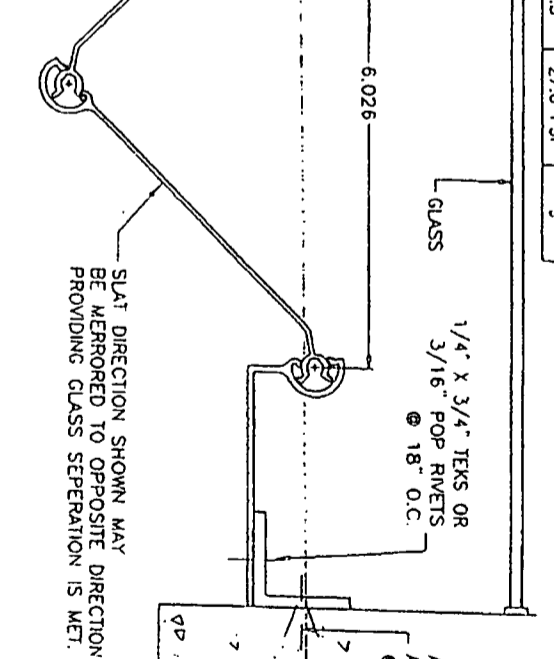
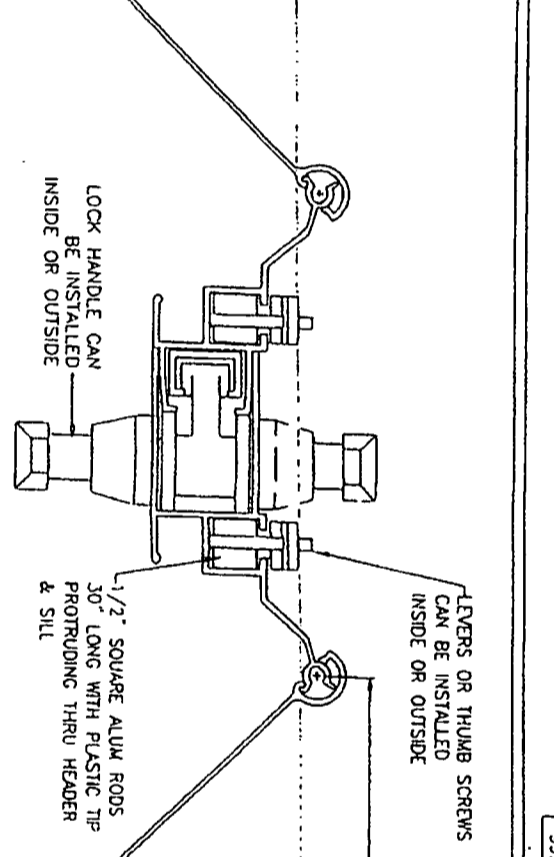
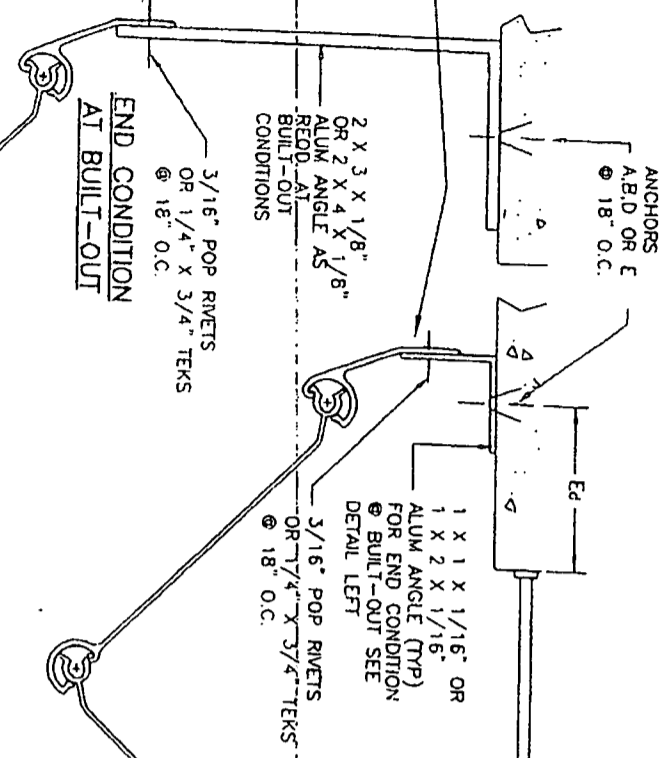
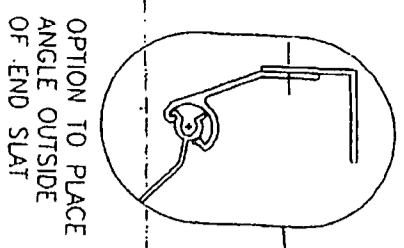
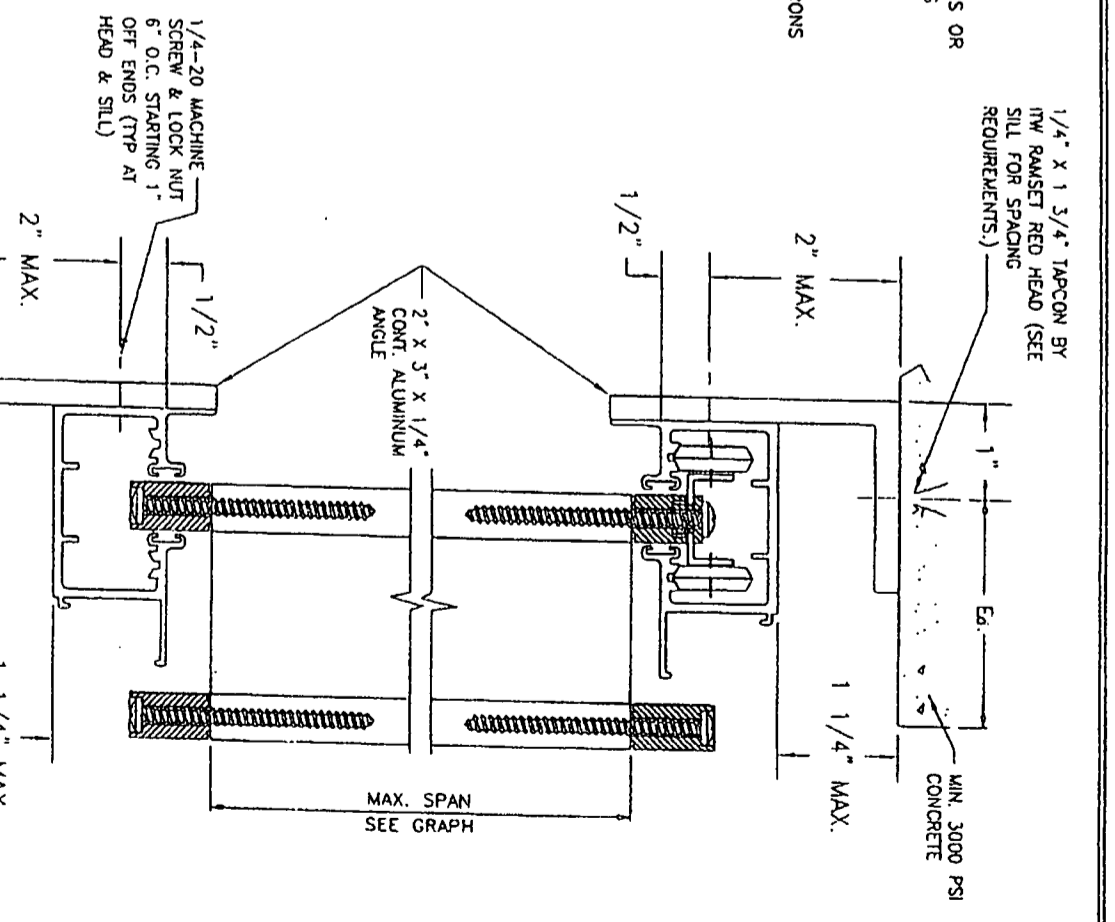
Approved as complying with the Florida Building Code  
 Date: 05/18/2006  
 NGA# 06-0407-07  
 Minimal Trade Product Control  
 Division  
 By: *Warren W. Schaefer*

ANCHOR CHART TO USE	
ANCHOR TYPE	CONC. BLOCK WOOD
A	2
B	1
D	3
E	1

ANCHOR CHART TO USE	
ANCHOR TYPE	CONC. BLOCK WOOD
A	5
B	2
D	2
E	2



1/4" X 1 3/4" TAPCON BY	MAX. ANCHOR SPACING	REQUIRED POS/NEG PRESSURE	SHUTTER HEIGHT	1/4" X 1 3/4" TAPCON BY
99.5"	5"	82.7 PSF	99.5"	99.5"
99.5"	6"	41.4 PSF	99.5"	99.5"
99.5"	9"	27.8 PSF	99.5"	99.5"



SEE SECTIONS B-B FOR DETAIL NOT SHOWN.

APPROVED AS SHOWN WITH THE  
 Florida Engineers Code  
 Date: 05-18-2006  
 No. 06-0407.07  
 Warren W. Schaefer, P.E.  
 Warren W. Schaefer Consulting  
 Division

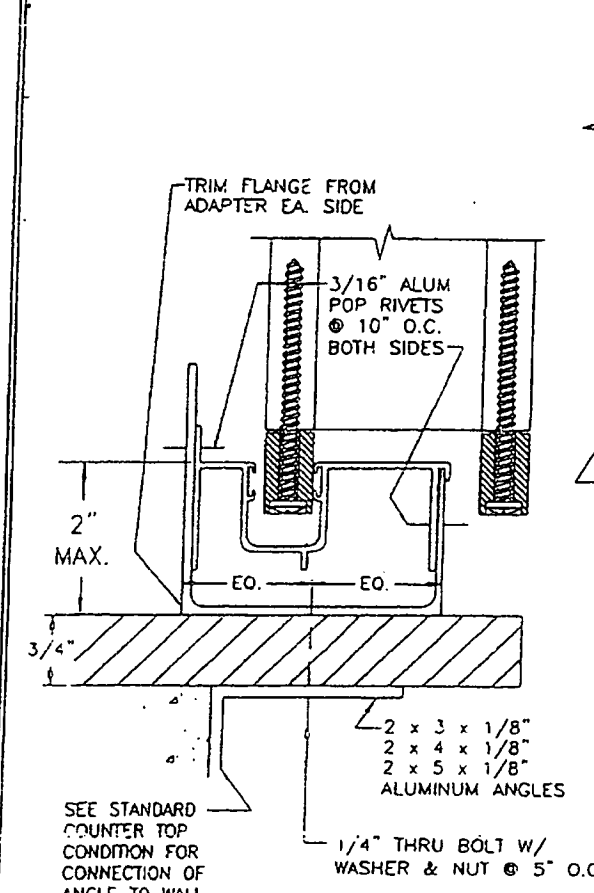
CERTIFICATION  
 APR 14 2006  
 WARREN W. SCHAEFER, P.E.  
 P.E. NO. 44135

DRAWING TITLE  
**TITAN II NON-HVAZ FOLDING SHUTTER**  
 CONSULTANTS  
**W. W. SCHAEFER ENGINEERING & CONSULTING, P.A.**  
 8895 N. MILITARY TRAIL, SUITE C-204  
 PALM BEACH GARDENS, FL 33410  
 PHONE: 561-775-4902 FAX: 561-775-4903

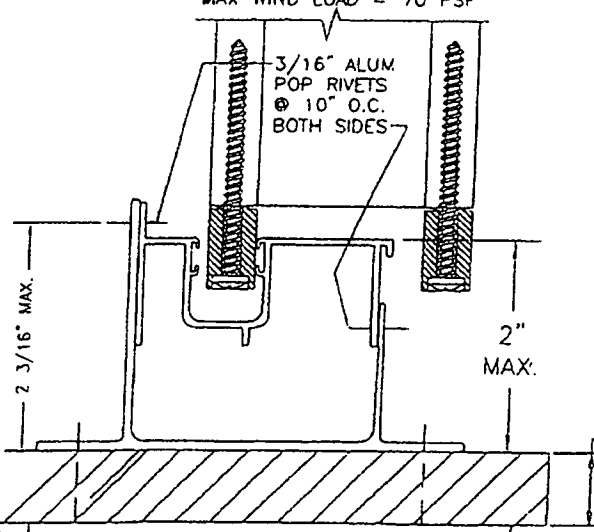
MANUFACTURER  
**FOLDING SHUTTER CORP.**  
 7089 HEMSTREET PLACE  
 WEST PALM BEACH, FL 33406  
 561-683-4811

NO.	REVISION DESCRIPTION	BY	DATE

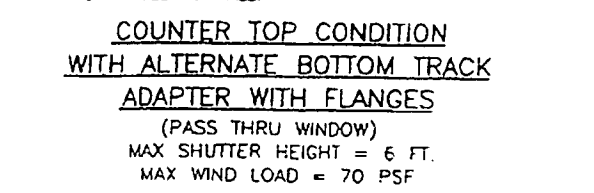
DRAWING NO. 1475  
 SHEET NO. 3 OF 5



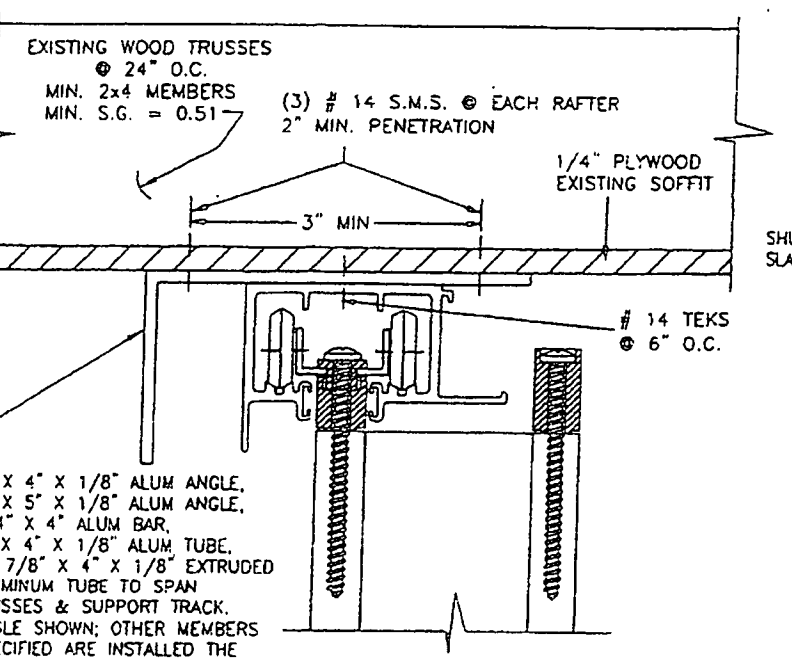
**COUNTER TOP CONDITION WITH ALTERNATE BOTTOM TRACK ADAPTER WITHOUT FLANGES**  
 (PASS THRU WINDOW)  
 MAX SHUTTER HEIGHT = 6 FT.  
 MAX WIND LOAD = 70 PSF



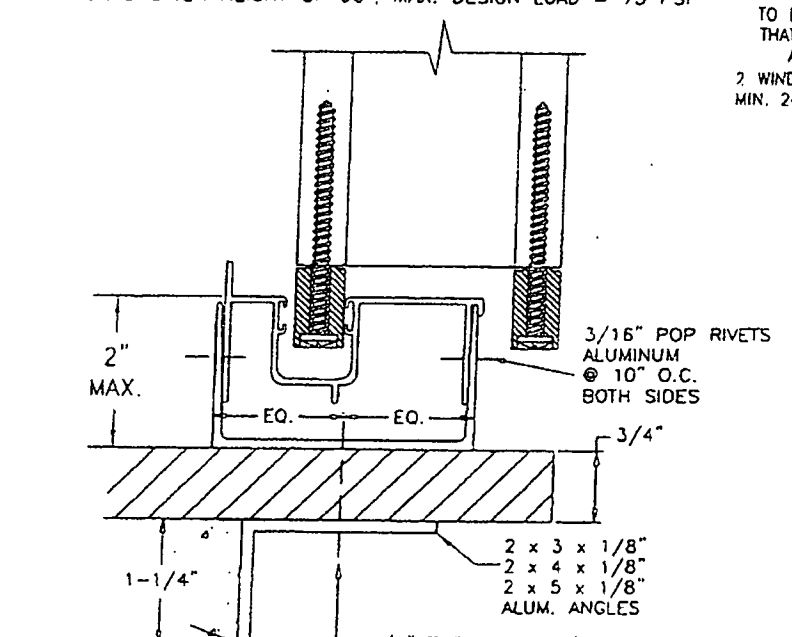
**COUNTER TOP CONDITION WITH ALTERNATE BOTTOM TRACK ADAPTER WITH FLANGES**  
 (PASS THRU WINDOW)  
 MAX SHUTTER HEIGHT = 6 FT.  
 MAX WIND LOAD = 70 PSF



**STANDARD COUNTER TOP CONDITION**  
 (PASS THRU WINDOW)  
 MAX SHUTTER HEIGHT = 6 FT.  
 MAX WIND LOAD = 70 PSF

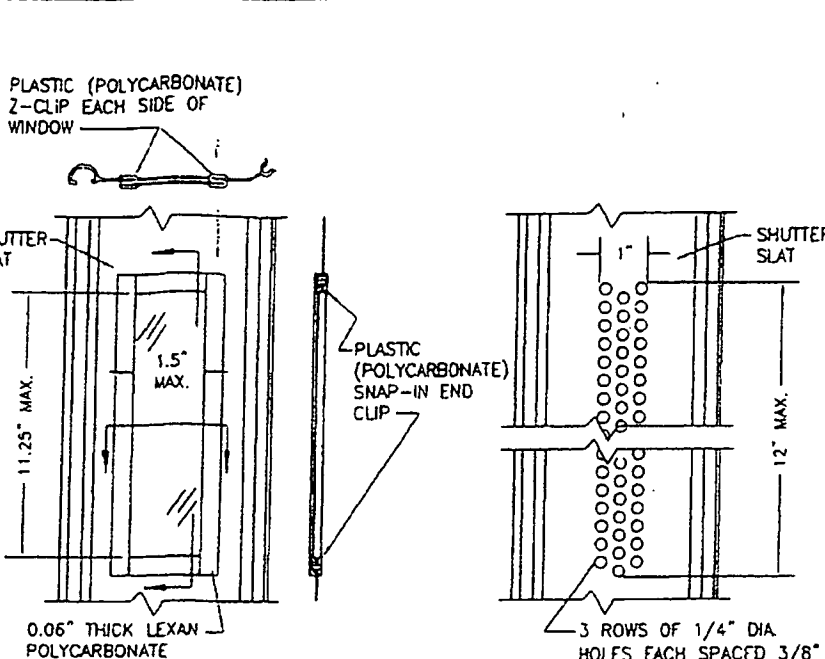


**HEADER CONNECTION TO WOOD TRUSSES**  
 FOR SHUTTER HEIGHT OF 108" MAX. DESIGN LOAD = 65 PSF  
 FOR SHUTTER HEIGHT OF 96" MAX. DESIGN LOAD = 73 PSF

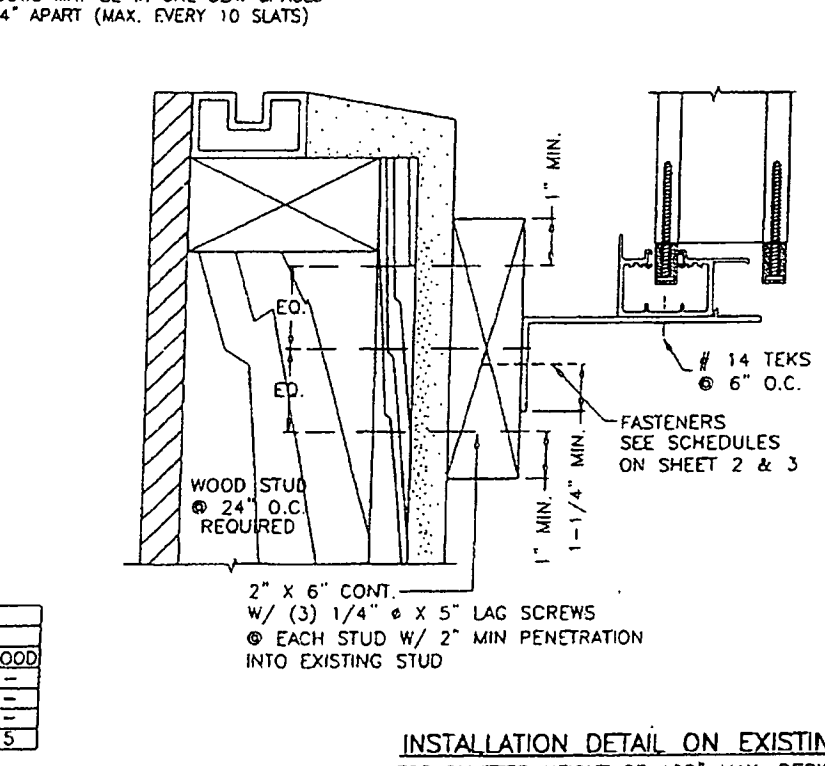


ANCHOR TYPE	ANCHOR SPACING INCHES					
	UPTO 50 PSF		UPTO 70 PSF			
	CONC	BLOCK	WOOD	CONC	BLOCK	WOOD
A	12	4	-	9	3	-
B	5	-	-	4	-	-
D	13	5	-	9	4	-
E	-	-	5	-	-	5

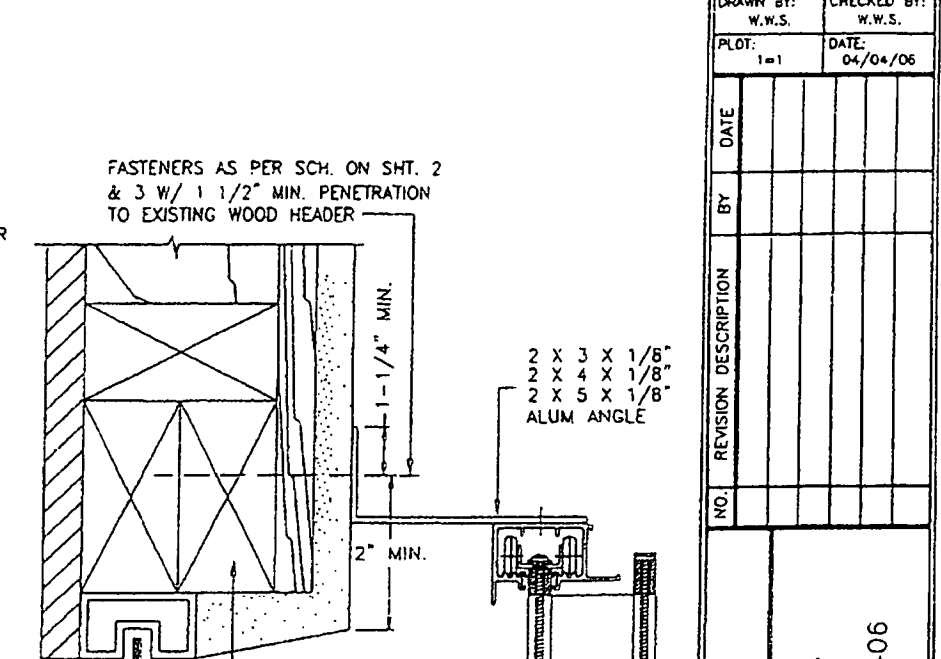
**INSTALLATION DETAIL ON EXISTING WOOD STUDS** SCALE: 1/4"=1"  
 FOR SHUTTER HEIGHT OF 108" MAX. DESIGN LOAD = 46 PSF  
 FOR SHUTTER HEIGHT OF 96" MAX. DESIGN LOAD = 51 PSF  
 FOR HEADER/SILL-DETAILS CONNECTED TO CONTINUOUS WOOD MEMBERS SEE SHEETS 2 & 3



**SLAT WINDOW DETAIL (LARGE MISSILE IMPACT)**  
 (APPLICABLE AT ALL ELEVATIONS)  
 2 WINDOWS MAY BE IN ONE SLAT SPACED MIN. 24" APART (MAX. EVERY 10 SLATS)



**INSTALLATION DETAIL ON EXISTING WOOD BUCKS** SCALE: 1/4"=1"  
 FOR SHUTTER HEIGHT OF 108" MAX. DESIGN LOAD = 46 PSF  
 FOR SHUTTER HEIGHT OF 96" MAX. DESIGN LOAD = 51 PSF  
 FOR HEADER/SILL-DETAILS CONNECTED TO CONTINUOUS WOOD MEMBERS SEE SHEETS 2 & 3



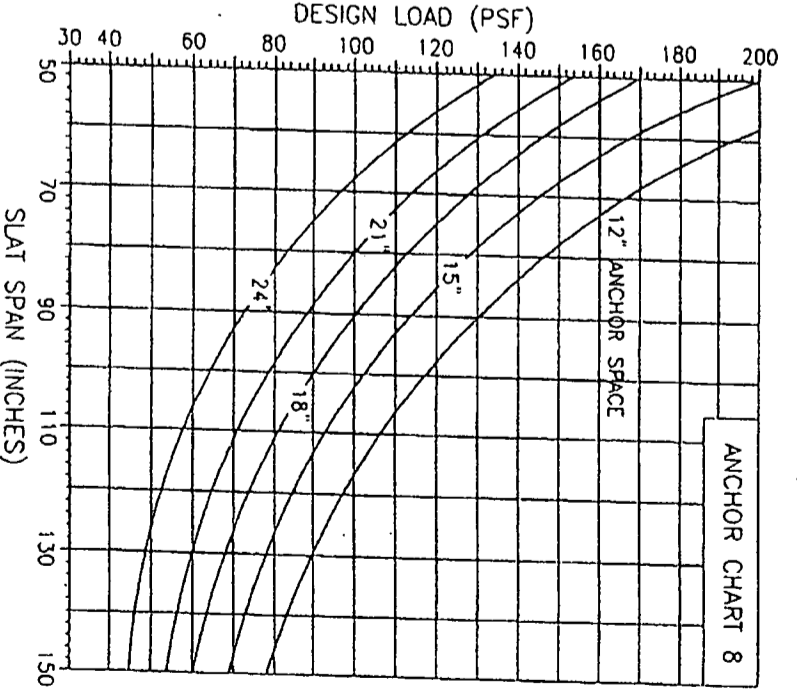
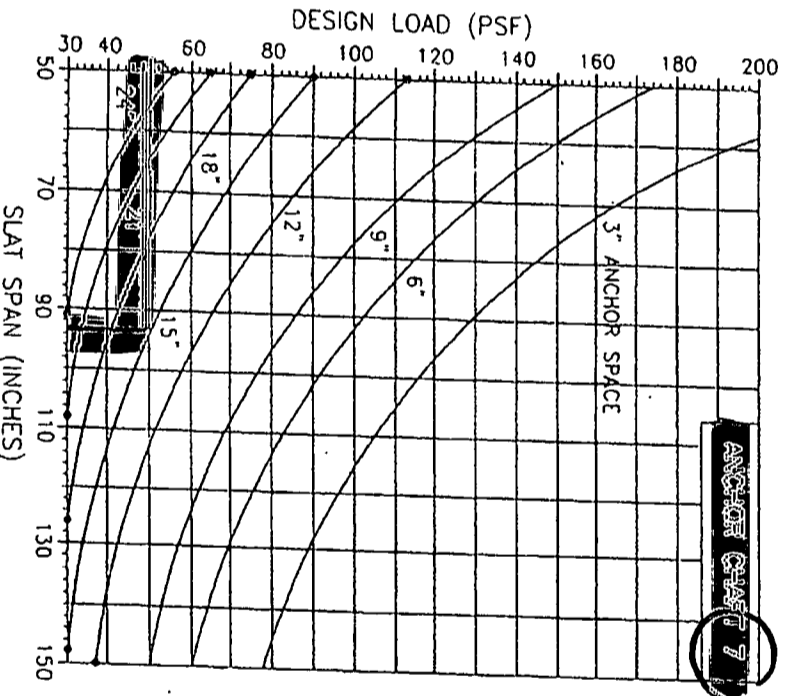
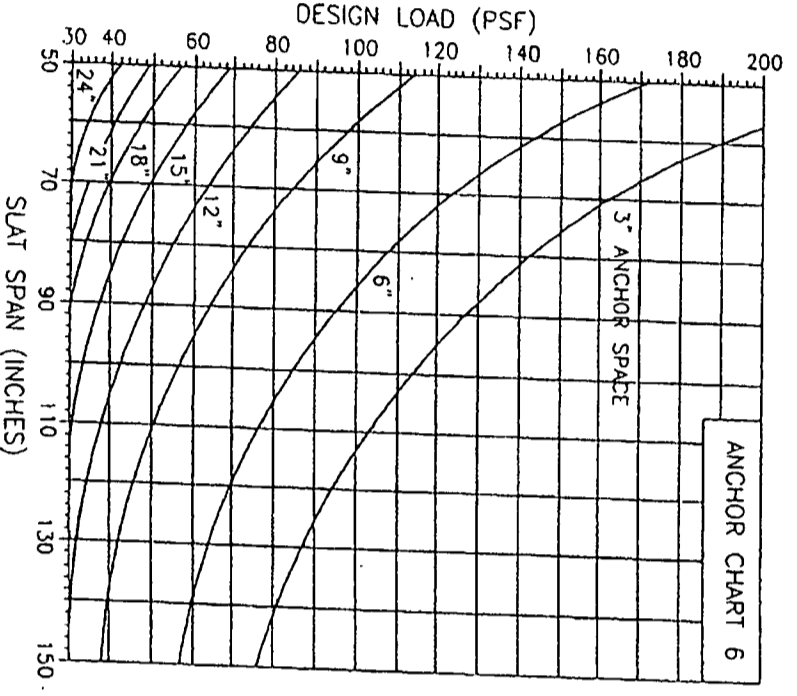
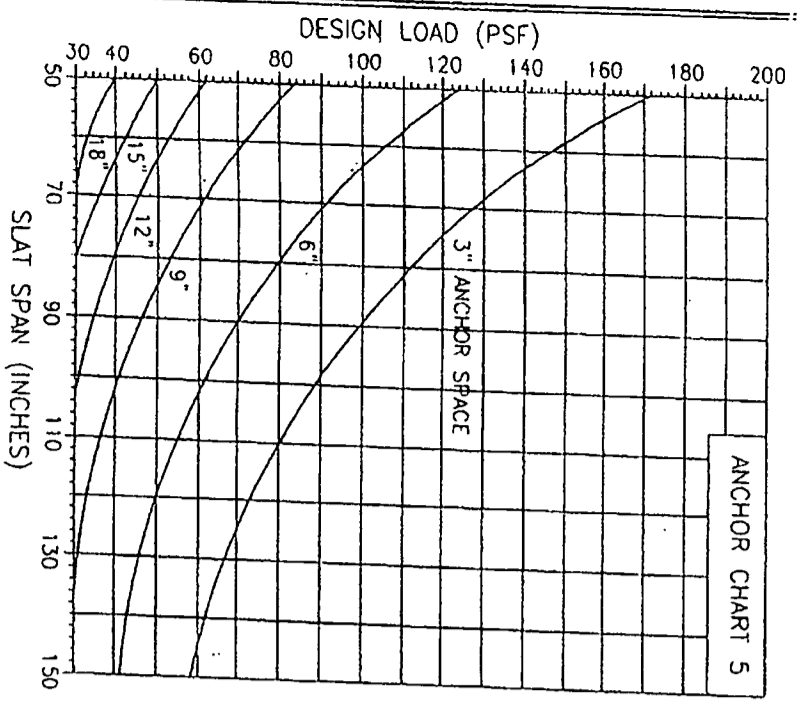
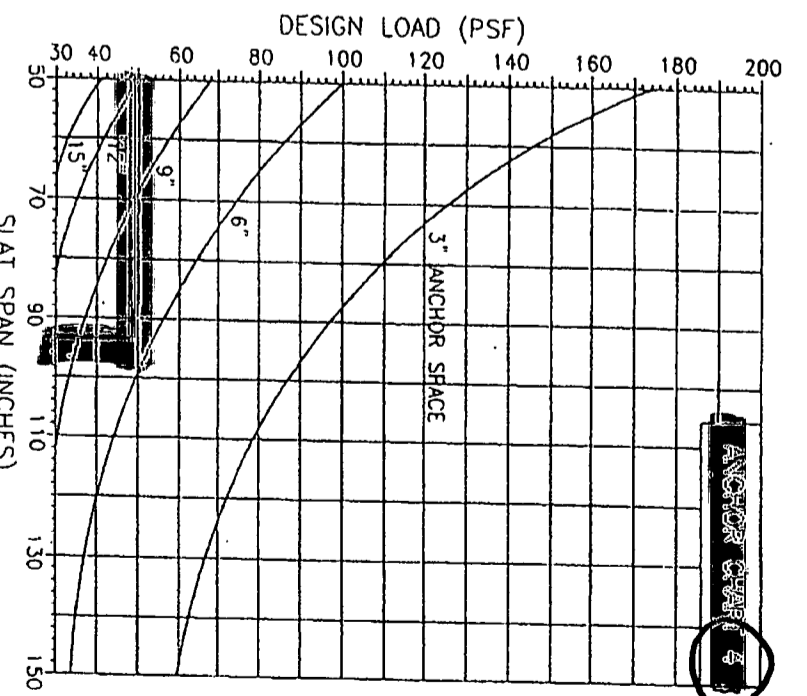
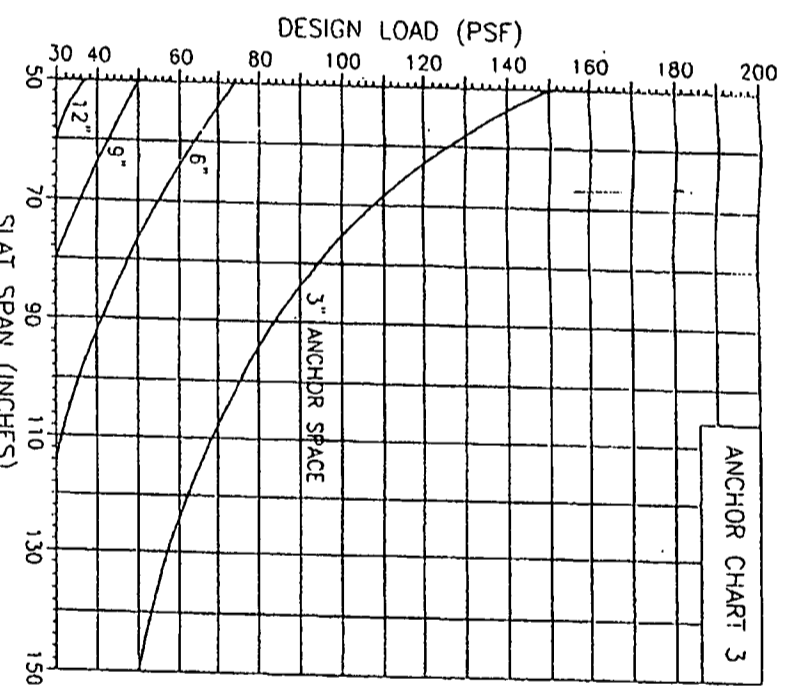
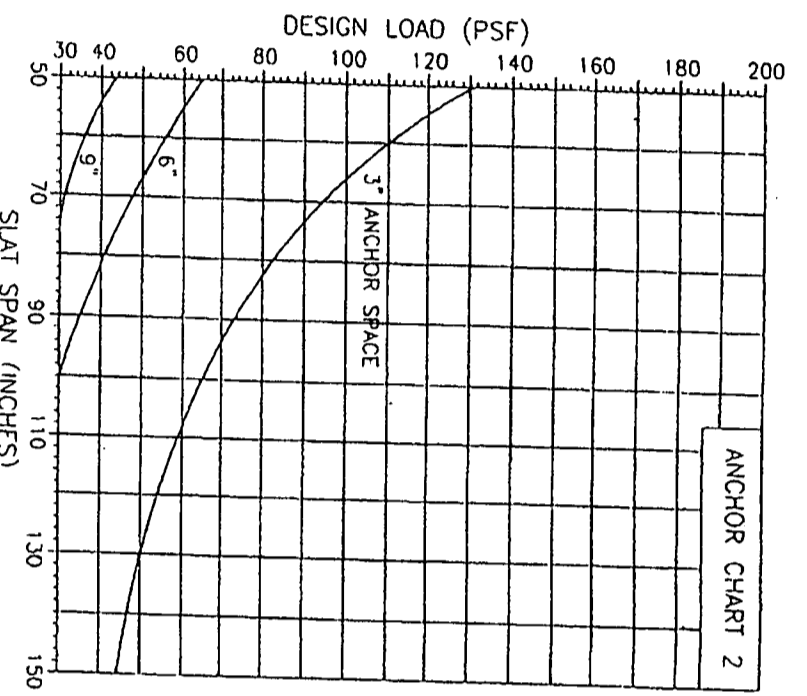
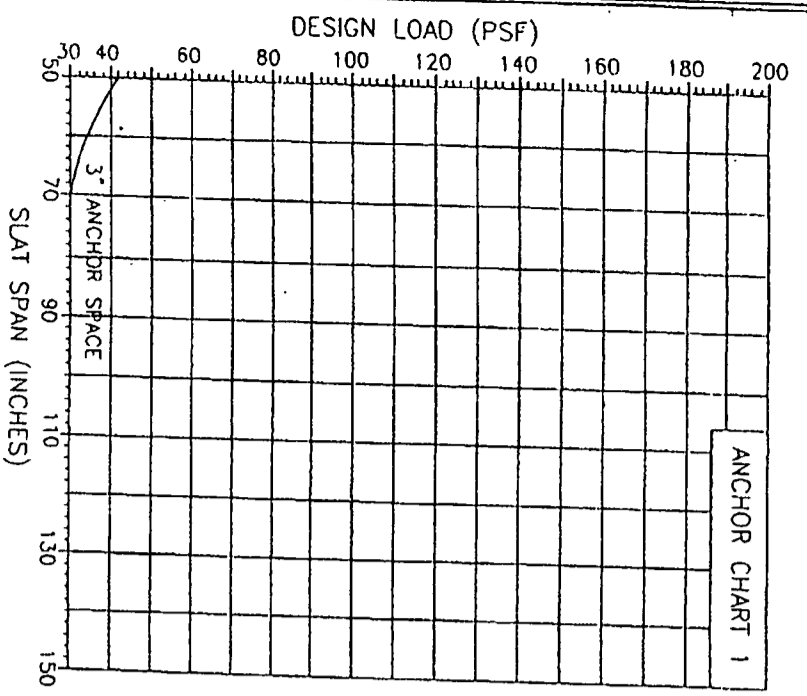
**INSTALLATION DETAIL ON EXISTING WOOD BUCKS** SCALE: 1/4"=1"  
 FOR SHUTTER HEIGHT OF 108" MAX. DESIGN LOAD = 46 PSF  
 FOR SHUTTER HEIGHT OF 96" MAX. DESIGN LOAD = 51 PSF  
 FOR HEADER/SILL-DETAILS CONNECTED TO CONTINUOUS WOOD MEMBERS SEE SHEETS 2 & 3

DRAWING TITLE: TITAN II NON-HVAZ FOLDING SHUTTER  
 MANUFACTURER: FOLDING SHUTTER CORP.  
 7089 HEMSTREET PLACE  
 WEST PALM BEACH, FL 33406  
 561-683-4811

CONSULTANTS: W. W. SCHAEFER ENGINEERING & CONSULTING, P.A.  
 8895 N. MILITARY TRAIL, SUITE C-204  
 PALM BEACH GARDENS, FL 33410  
 PHONE: 561-775-4902 FAX: 561-775-4903

CERTIFICATION: APPROVED BY: W. W. SCHAEFER, P.E.  
 DRAWING NO. 1475  
 SHEET NO. 4 OF 5

Approved in compliance with the Florida Building Code  
 Date: 05/18/2006  
 NO. 06-0407-07  
 Miami Dade Product Control Division  
 By: Helmut A. Miller



**FASTENER SPACING IN MASONRY**

CHARTS ARE BASED ON TYPICAL EDGE DISTANCE = 12d  
FOR LESSER EDGE DISTANCE DECREASE SPACING BY  
MULTIPLYING WITH THE FACTOR BELOW

EDGE DIST. 12d=3"	1.00	0.86	0.71	0.57	0.50
EDGE DIST. 12d=3"	1.00	0.86	0.71	0.57	0.50
EDGE DIST. 12d=3"	1.00	0.86	0.71	0.57	0.50

EXAMPLE: FOR 3" EDGE DIST. SPACING = 12" O.C. (FROM CHART)  
FOR 2" EDGE DIST. SPACING = 12 X .71 = 8.5 O.C.  
TYPICAL EDGE DISTANCE IN WOOD = 1-1/4"  
NO REDUCTION FACTOR IS REQUIRED

**TYPICAL ANCHORS**

ANCHOR (A) = 1/4" EPOXY OR ANCHORING RESIN  
1-1/2" EMBEDMENT TO 5000 PSI MIN. CONCRETE  
1-1/4" EMBEDMENT TO BLOCK

ANCHOR (B) = #14 S.M.S. W/ RAWL SCRU-LEAD INTO MIN. 3000 PSI CONCRETE;  
1-1/2" EMBEDMENT.

ANCHOR (C) = 1/4" RAWL CALK-IN;  
TOTAL ANCHOR BODY INTO BLOCK OR MIN. 3000 PSI CONCRETE;  
1-1/2" MIN. PENETRATION.

ANCHOR (D) = #14 S.M.S. W/ RAWL SCRU-LEAD INTO MIN. 3000 PSI CONCRETE;  
1-1/2" MIN. PENETRATION.

USE CHARTS 1 THRU 8 TO VERIFY ANCHOR  
REQUIREMENTS AND STRESS LIMITATIONS OF  
LOAD/SPAN COMBINATIONS FOR HEADER AND SILL.

NOTE: ANCHORS, USE FULL EMBEDMENT IN CONCRETE BEYOND  
THE COVERING (STUCCO, TILES, ETC.)

**CERTIFICATION**

APPROVED & 2006  
WARREN W. SCHAEFER, P.E.  
P.E. NO. 44135

**DRAWING TITLE**  
TITAN II NON-HVAZ FOLDING SHUTTER

CONSULTANTS  
W. W. SCHAEFER ENGINEERING  
& CONSULTING, P.A.  
8895 N. MILITARY TRAIL, SUITE C-204  
PALM BEACH GARDENS, FL 33410  
PHONE: 561-775-4902 FAX: 561-775-4903

MANUFACTURER  
FOLDING SHUTTER CORP.  
7089 HEMSTREET PLACE  
WEST PALM BEACH, FL 33406  
561-683-4811

NO.	REVISION DESCRIPTION	BY	DATE

SHEET NO.  
1475  
REV.  
5 OF 5

DRAWN BY: [ ] CHECKED BY: [ ]  
DATE: 04/04/06  
W.W.S.

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  ~~THURS~~ <sup>THURS</sup> 12/11, 2008 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
8867	GELLER 10 PALMETTO KEN WENDELL	FINAL		RESCHEDULE FOR FRI INSPECTOR:
<del>9029</del>	<del>14 PALMETTO 565-248-0128</del> <del>11 PALM DR.</del>	<del>MINOR</del> <del>FINAL</del>	<del>FAIL</del>	<del>45 FEE</del> INSPECTOR: <i>[Signature]</i>
9060	Conroy 126 SSPR Tropic Marine	sheet piling	FAIL	INSPECTOR: <i>[Signature]</i>
9043	Neff 55 Periwinkle Gateway	stairs pavers	PASS PASS	INSPECTOR: <i>[Signature]</i>
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:

OTHER: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



**TOWN OF SEWALL'S POINT**

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

**CORRECTION NOTICE**

ADDRESS: 11 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,

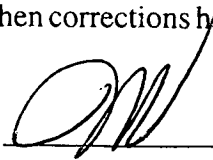
SHUTTER # 9069

NOT READY FOR INSPECTION.

#45 REINSPECT FEE

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

DATE: 12/11



INSPECTOR

**DO NOT REMOVE THIS TAG**

ndc



#9069

### TOWN OF SEWALL'S POINT

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

### CORRECTION NOTICE

ADDRESS: 11 PALM ROAD

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

SHUTTERS

EAST SIDE OF PORCH - 'L'  
IS NOT ADEQUATELY ANCHORED  
TO SLABS AT BOTTOM  
TRACK OF SHUTTER

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

DATE: 12/12

[Signature]

INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 12/12, 2008 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8867	Geller 10 Palmetto Ken Wendell	Final	FAIL	INSPECTOR: <i>[Signature]</i>
9034	John FITT 3 N Sewalls Pt Priority Elec	Final	FAIL	NOT READY INSPECTOR: <i>[Signature]</i>
8923	Ellist 25 W High Pt Demorest	Final	PASS	CLOSE INSPECTOR: <i>[Signature]</i>
<del>9069</del>	<del>JAY OR</del> 11 PALM ROAD folding shutter	<del>SHUTTERS</del>	<del>FAIL</del>	INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:

OTHER: \_\_\_\_\_



# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 12-17, 2008 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<del>91069</del>	<del>Taylor</del>	<del>Final</del>	<del>PASS</del>	<del>Close</del>
1	11 Palm Rd Folding Shutter			INSPECTOR: <i>JM</i>
9006	Dunn 30 N River Rd	Final	PASS	Close
2	Moline			INSPECTOR: <i>JM</i>
<del>9002</del>	<del>Busch</del>	<del>Final</del>		
<u>Hold</u>	14 Riverview Dr <del>Latitude 21</del>	<del>Final</del>		Reschedule Shuro
9070	FRED R 32 SSPD Airon	FINAL ELEC A/C	FAIL	INSPECTOR: <i>JM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

### TOWN OF SEWALL'S POINT

Date 2/3/05

BUILDING PERMIT NO. 7267

Building to be erected for TAYLOR

Type of Permit REEROOF

Applied for by CAMPANY ROOFING (Contractor)

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

Subdivision PALM ROW Lot 11 Block \_\_\_\_\_

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

Address 11 PALM ROAD

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

Type of structure SFR

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

Parcel Control Number:

1338410050000011090000

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

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

Roofing Fee 120.00

Amount Paid 120.00 Check # 8609 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) 1

Total Construction Cost \$ 16,334.00

TOTAL Fees 120.00

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Official

## PERMIT

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

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

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

## INSPECTIONS

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

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

Town of Sewall's Point

JAN 28 2005  
BUILDING PERMIT APPLICATION

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

Owner or Title Holder Name: AMOS TAYLOR City: SEWALLS POINT State: FL Zip: 33496  
Legal Description of Property: Palm Row Rev 2 Amended Lot 11 Parcel Number: 133841005 00000110 9  
Location of Job Site: 11 Palm Rd Type of Work To Be Done: Re-roof

CONTRACTOR/Company Name: Campana RPE INC Phone Number: 501-863-6550  
Street: 917 28 St City: WPB State: FL Zip: 33407  
State Registration Number: \_\_\_\_\_ State Certification Number: CC057621 Martin County License Number: \_\_\_\_\_

ARCHITECT: N/A Phone Number: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

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

COST AND VALUES Estimated Cost of Construction or Improvements: 16334.00 Estimated Fair Market Value (FMV) Prior  
To Improvements: \_\_\_\_\_ If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES \_\_\_\_\_ NO \_\_\_\_\_  
1 Shingle to Shingle 40x11 DIM 22 SQ 4/12 @ FAT 65¢ JM spec #

SUBCONTRACTOR INFORMATION  
Electrical: N/A 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) Amos Taylor  
State of Florida, County of: MARTIN  
This the 07 day of JAN, 2005  
by AMOS TAYLOR who is personally  
known to me or produced DL  
as identification.

CONTRACTOR SIGNATURE (Required) Edward Conroy  
On State of Florida, County of: Palm Bch  
This the 27 day of JAN, 2005  
by Edward Conroy who is personally  
known to me or produced \_\_\_\_\_  
As identification.

My Commission Expires: [Signature] Harry Wicks  
My Commission DD157010  
Expires December 08, 2006

My Commission Expires: [Signature] Harry Wicks  
My Commission DD157010  
Expires December 08, 2006

CAMPANY ROOFING, INC.  
917 28<sup>TH</sup> STREET  
WEST PALM BEACH, FL 33407  
LICENSE# CCC057621  
PHONE: (561) 863-6550  
FAX: (561) 863-1722



QUALIFIER'S NAME: Edward Campany

CERTIFICATION NUMBER: CCC057621

COMPANY NAME: CAMPANY ROOFING, INC.  
ADDRESS: 917 28<sup>TH</sup> STREET  
WEST PALM BEACH, FL 33407  
PHONE #: (561) 863-6550

I hereby authorize the Sewalls Point Building Dept. to issue permits on the signature for the above reference company to:

Russell Yarems  
(print name of authorized person)

\_\_\_\_\_  
(print name of authorized person)

I further authorize the above signature to sign all documentation pertaining to Permits  
I certify, that the above person is affiliated with the company and I understand, that I am fully responsible and legally bound for all acts performed under the above referenced certification number.

Edward Campany  
Signature of Qualifier  
Edward Campany


\_\_\_\_\_  
Signature of Authorized Agent

STATE OF FLORIDA

\_\_\_\_\_  
Signature of Authorized Agent

The foregoing instrument was acknowledged before me this 1-28-05 (Date)  
Russell Yarems (Name of Person Acknowledging) ~~who is personally~~  
known to me or who has produced \_\_\_\_\_ (Type of I.D.) as identification  
and who did/did not take an oath.

[Signature]  
(Signature of person taking acknowledgement)

SEAL  Harry Wicks  
My Commission DD157010  
Expires December 08, 2006  
\_\_\_\_\_  
(Name of officer taking acknowledgement typed, printed or stamped)

**PRODUCER**

ACORDIA-WPB DIVISION  
 501 S. FLAGLER DR. #600  
 WEST PALM BEACH FL 33401-5914  
 PHN (561) 655-5500  
 FAX (561) 655-5509

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

**COMPANIES AFFORDING COVERAGE**

- COMPANY LETTER **A** SCOTTSDALE INS (GRESHAM)
- COMPANY LETTER **B** PROGRESSIVE COMPANIES --
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

**INSURED**

CAMPANY ROOFING INC  
 917 28TH ST  
 WEST PALM BEACH, FL 33407

**COVERAGES**

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	BCS0008991	10/01/04	10/01/05	GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG. \$ 2,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR.				PERSONAL & ADV. INJURY \$ 1,000,000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT.				EACH OCCURRENCE \$ 1,000,000
B	<input checked="" type="checkbox"/> BLK ADD INSURED	046999053	10/03/04	10/03/05	FIRE DAMAGE (Any one fire) \$ 100,000
	<input type="checkbox"/> BLKT WAVR SUBGN				MED.EXP. (Any one person) \$ 0,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$ 1,000,000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	<input checked="" type="checkbox"/> HIRED AUTOS				
	<input checked="" type="checkbox"/> NON-OWNED AUTOS				
	<input type="checkbox"/> GARAGE LIABILITY				
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY LIMITS
					EACH ACCIDENT \$
					DISEASE - POLICY LIMIT \$
					DISEASE - EACH EMPLOYEE \$
	OTHER				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**

FAX-772-220-4765

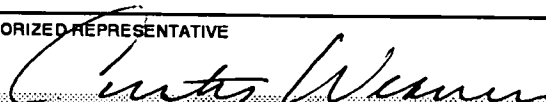
**CERTIFICATE HOLDER**

SEWALL'S POINT TOWN HALL  
 ONE SOUTH SEWALLS  
 POINT RD  
 SEWALLS POINT FL 34996

**CANCELLATION**

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

AUTHORIZED REPRESENTATIVE



# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/27/2005

<b>PRODUCER</b> Insurance Company of the Americas 1310 Utica Street P.O. Box 855 Oriskany, New York 13424 Tel: (315) 768-2726 Fax: (315) 736-8731		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.	
<b>INSURED</b> Employee Leasing Solutions, Inc.  1401 Manatee Ave W. Suite 600 Bradenton, FL 34205		<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>
		INSURER A: Insurance Company of the Americas	33030
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	

## COVERAGES

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

INSR	ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
			<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/OP AGG \$
			<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
			<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
			<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
A			<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC69203010102	01/01/2005	01/01/2006	<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
			<b>OTHER</b> Client ID: #4042033				

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

**Company Roofing Inc**  
 Qualifiers Name: Ed/Bruce/Justin/Deb Company

Aprox active employee count: 33

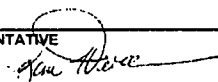
## CERTIFICATE HOLDER

Sewells Point Town Hall  
 1 South Sewalls Point Road  
 SEWELLS 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





STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

CAMPANY, EDWARD GRANT  
CAMPANY ROOFING INC  
917 28TH STREET  
WEST PALM BEACH FL 33407

STATE OF FLORIDA AC# 148730  
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CCC057621 07/14/04 040035426

CERTIFIED ROOFING CONTRACTOR  
 CAMPANY, EDWARD GRANT  
 CAMPANY ROOFING INC

IS CERTIFIED under the provisions of Ch.489 FS  
 Expiration date: AUG 31, 2006 L04071400818

DETACH HERE

1487307

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L04071400818

DATE	BATCH NUMBER	LICENSE NBR
/14/2004	040035426	CCC057621

he ROOFING CONTRACTOR  
 amed below IS CERTIFIED  
 nder the provisions of Chapter 489 FS.  
 xpiration date: AUG 31, 2006

CAMPANY, EDWARD GRANT  
 AMPANY ROOFING INC  
 17 28TH STREET  
 EST PALM BEACH FL 33407

JEB BUSH  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR  
SECRETARY

2005-00646

STATE OF FLORIDA  
PALM BEACH COUNTY  
OCCUPATIONAL LICENSE

CW-008  
CLASSIFICATION

**EXPIRES: SEPTEMBER - 30 - 2005**

CAMPANY ROOFING INC  
CAMPANY EDWARD G

\*\* LOCATED AT

C/WIDE \$278.77

917 28TH ST  
WEST PALM BEACH FL 33407

TOTAL \$278.77

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

ROOFING CONTRACTOR

CCC057621

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

THIS IS NOT A BILL - DO NOT PAY

VALID 08/10/2004 - 09/30/2005  
PAID. PBC TAX COLLECTOR  
\$278.77 OCC 003 05040 08-10-2004

THIS LICENSE VALID ONLY WHEN RECEIPTED BY  
TAX COLLECTOR

2005-00645

STATE OF FLORIDA  
PALM BEACH COUNTY  
OCCUPATIONAL LICENSE

OC-032  
CLASSIFICATION

**EXPIRES: SEPTEMBER - 30 - 2005**

CAMPANY ROOFING INC  
CAMPANY EDWARD G

\*\* LOCATED AT

CNTY \$39.37

917 28TH ST  
WEST PALM BEACH FL 33407

TOTAL \$39.37

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

ROOFING CONTRACTOR

CCC057621

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

THIS IS NOT A BILL - DO NOT PAY

VALID 08/10/2004 - 09/30/2005  
PAID. PBC TAX COLLECTOR  
\$39.37 OCC 003 05039 08-10-2004

THIS LICENSE VALID ONLY WHEN RECEIPTED BY  
TAX COLLECTOR





# PROPOSAL

Date: December 23, 2004

**Proposal Submitted To:**  
Buck Taylor  
**Street:** 11 Palm Rd.  
**City, State & Zip:** Sewells Point Fl.

**Phone:** 772-287-0767  
**Fax# :**  
**Job Name:**  
  
**Job Location:**

**We hereby submit specifications and estimates for:**

- Remove existing roof down to roof deck.
- Remove and replace all bad plywood at \$ 3.25 per sq ft.
- Re-nail existing deck per code.
- Install 30lb# astm felt.
- Install new drip edge, flashing and stacks.
- Install new 40 year dimensional shingles per code.
- Include 130" cobra ridge vent.
- All roofing debris removed from site.
- (5) Year Campany Roofing Inc. Warranty

All repairs to other roofs at a rate of \$ 95.00 per man-hour.

We propose hereby to furnish material & labor – complete with above specifications.

All work to be done to local codes and ordinances.

All work outside our scope of work to be done by others.

*Terms: 50% Deposit, Balance Upon Completion*

<b>Contract Price:</b> \$12,770.00	-----	<b>Flat Deck</b> \$3,564.00	\$ 16,334
------------------------------------	-------	-----------------------------	-----------

**Signature:** Dennis James

ALL MATERIAL IS GUARANTEED TO BE AS SPECIFIED. ALL WORK TO BE COMPLETED IN A WORKMANLIKE MANNER ACCORDING TO STANDARD PRACTICES. ANY ALTERATIONS OR DEVIATIONS FROM ABOVE SPECIFICATIONS INVOLVING EXTRA COSTS WILL BE EXECUTED ONLY UPON ORDERS AND WILL BECOME AN EXTRA CHARGE OVER AND ABOVE THE ESTIMATE, ALL AGREEMENTS CONTINGENT UPON STRIKES, ACCIDENTS OR DELAY BEYOND OUR CONTROL. OWNER TO CARRY FIRE, TORNADO AND OTHER NECESSARY INSURANCE. OUR WORKERS ARE FULLY COVERED BY WORKMAN'S COMPENSATION INSURANCE. \*\*NOTE: THIS PROPOSAL MAY BE WITHDRAWN BY US IF NOT ACCEPTED WITHIN 30 DAYS. ACCEPTANCE OF PROPOSAL-THE ABOVE PRICES, SPECIFICATIONS AND CONDITIONS ARE SATISFACTORY AND ARE HEREBY ACCEPTED. YOU ARE AUTHORIZED TO DO THE WORK AS SPECIFIED. PAYMENT WILL BE MADE AS OUTLINED ABOVE.

SIGNATURE Dennis Taylor SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Campany Roofing Incorporated  
917 28th Street, West Palm Beach, Florida 33407  
Ph: 561-863-6550 Fx: 561-863-1722  
Lic # CCC 057621

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00



PERMIT # \_\_\_\_\_

TAX FOLIO # 133841005000001109

NOTICE OF COMMENCEMENT

STATE OF FLA

COUNTY OF MARTIN

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

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

11-Palm Rd Palm Row Revised & Amended Lot 11

GENERAL DESCRIPTION OF IMPROVEMENT: ReLoop

OWNER: ELAINE TAYLOR - AMOS TAYLOR

ADDRESS: 11-Palm Rd Sewalls Point FL 34996

PHONE #: \_\_\_\_\_

FAX #: \_\_\_\_\_

CONTRACTOR: CAMPANY RFG INC

ADDRESS: 917-28 St WAB FL 33401

PHONE #: 561-863-6550

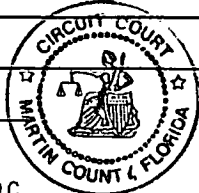
FAX #: 863-1722

SURETY COMPANY (IF ANY) NA

STATE OF FLORIDA  
MARTIN COUNTY

ADDRESS: \_\_\_\_\_

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



PHONE # \_\_\_\_\_

BOND AMOUNT: \_\_\_\_\_

MARSHA EWING, CLERK

LENDER: NA

BY [Signature] D.C.  
DATE 1/08/05

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_

FAX #: \_\_\_\_\_

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

NAME: NA

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_

FAX #: \_\_\_\_\_

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

PHONE #: \_\_\_\_\_

FAX #: \_\_\_\_\_

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

[Signature]  
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 07 DAY OF JAN 2005 BY Elaine Taylor

[Signature]  
NOTARY SIGNATURE

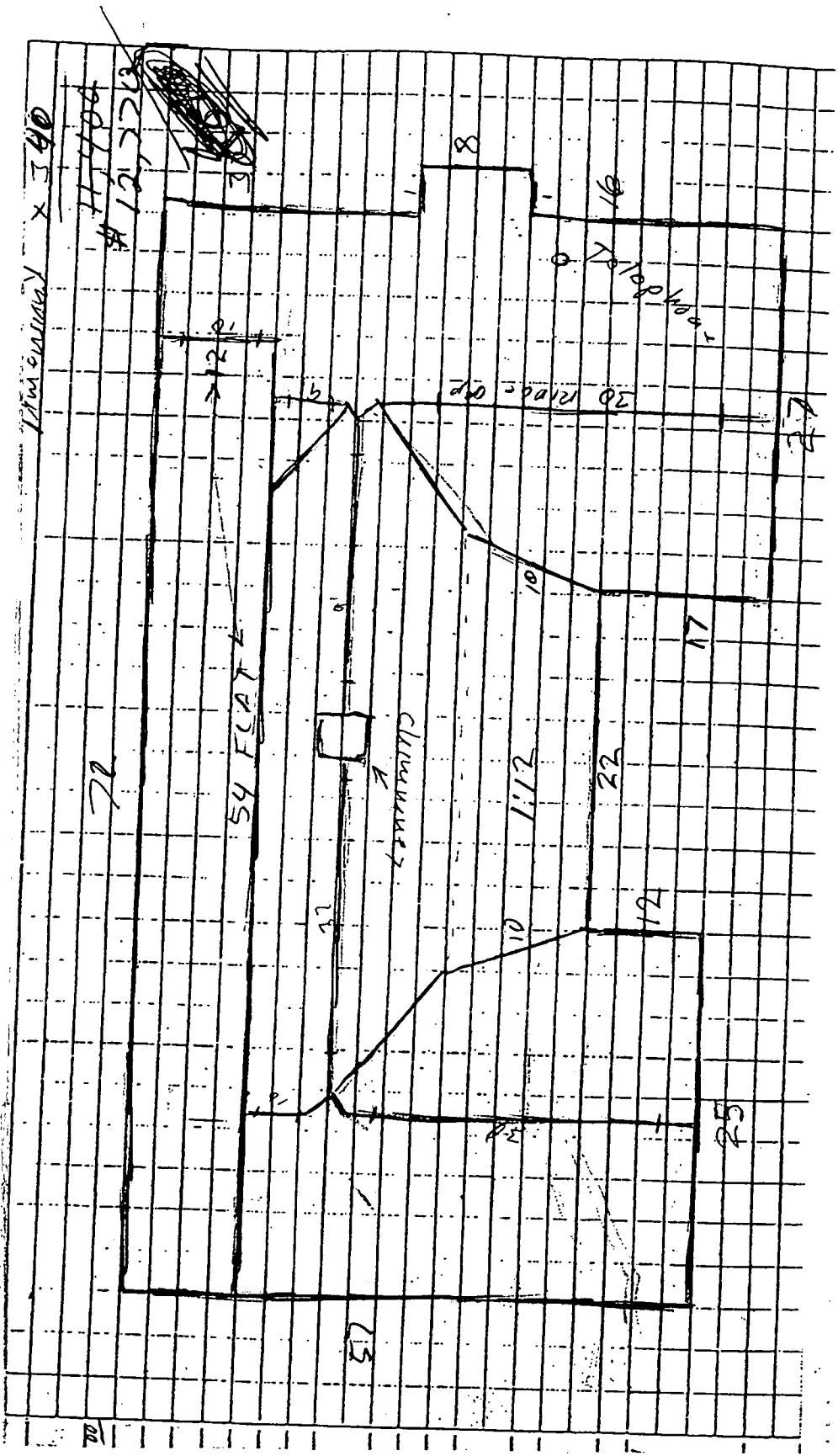


Harry Wicks  
My Commission DD157010  
Expires December 08, 2006

OR

PERSONALLY KNOWN  
PRODUCED ID  
TYPE OF ID DIC

INSTR # 1810051 OR BK 01977 PG 0048 RECD 01/28/2005 11:19:35 AM  
MARSHA EWING MARTIN COUNTY DEPUTY CLERK L WOOD



11-14/100 RD.  
 Sewer's Point

Company RPL  
 561-863-6550



October 27, 2004

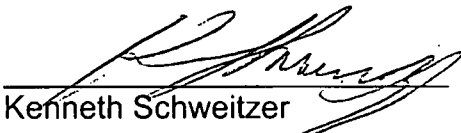
To: Sewall's Point Bldg Dept


Dear Sirs:


This letter is to inform you of a change in qualifier for Company Roofing, Inc. located at 917 - 28<sup>th</sup> Street, West Palm Beach, FL. We would like to list Edward Company, License# CCC 057621 as the qualifier of Company Rfg, Inc. Please remove Kenneth Schweitzer, License# CCC 051537 from our qualifier list as his license expired on September 30, 2004.

Sincerely,

  
Edward Company

  
Kenneth Schweitzer

 Harry Wicks  
My Commission DD157010  
Expires December 08, 2006

 Harry Wicks  
My Commission DD157010  
Expires December 08, 2006

*permanently know*  
10-27-04

*permanently know*  
10-27-04



MIAMI-DADE COUNTY, FLORIDA  
METRO-DADE FLAGLER BUILDING

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

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

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

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

**PRODUCT CONTROL NOTICE OF ACCEPTANCE**

Owens Corning  
One Owens Corning Parkway  
Toledo, OH 43659

Your application for Notice of Acceptance (NOA) of:

**Oakridge 40 AR**

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

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

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

Raul Rodriguez  
Chief Product Control Division

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

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

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

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

APPROVED: 07/19/2001

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: <u>11/31/05</u>
BUILDING OFFICIAL
Gene Simmons

OWENS CORNING

Acceptance No.: 01-0522.04

**ROOFING SYSTEM APPROVAL**

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

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

**1. Scope:**

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

**2. PRODUCT DESCRIPTION**

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

**3. LIMITATIONS:**

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

**4. INSTALLATION:**

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

**5. LABELING:**

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

**6. BUILDING PERMIT REQUIREMENTS:**

- 6.1 Application for building permit shall be accompanied by copies of the following:
- 6.1.1 This Notice of Acceptance
- 6.1.2 Any other documents required by Building Official or the Applicable Code in order to properly evaluate the installation of this system.

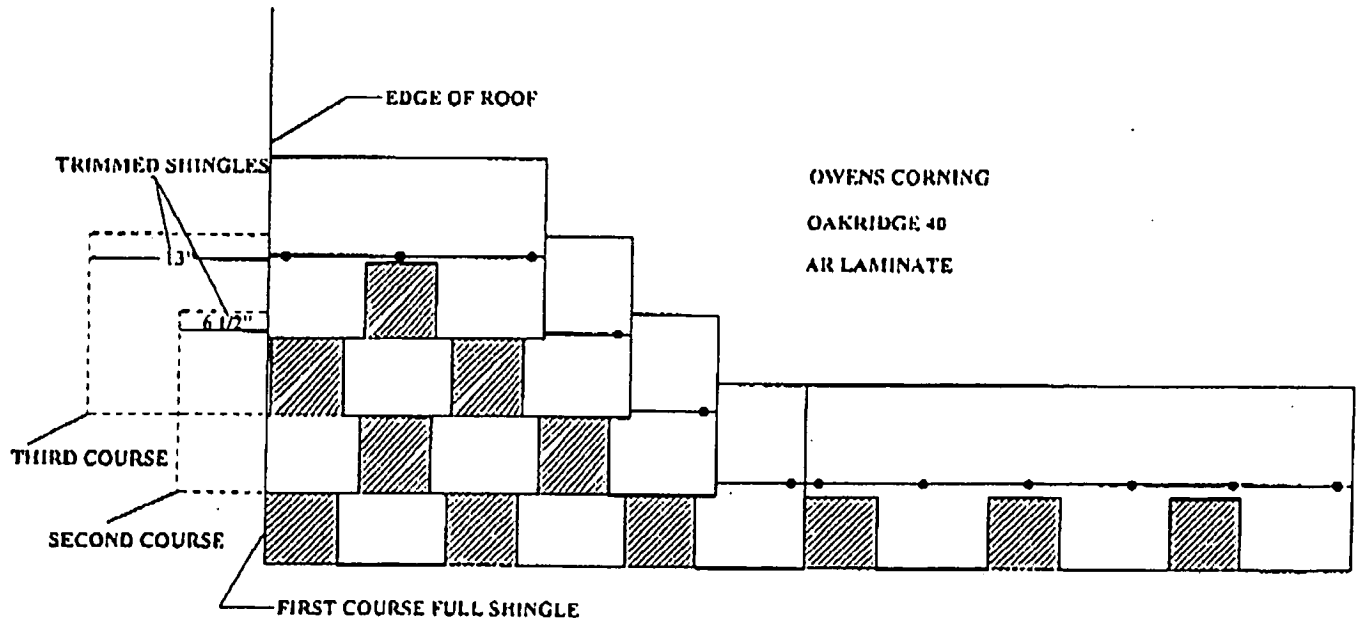


Frank Zuloaga, RRC  
Roofing Product Control Examiner

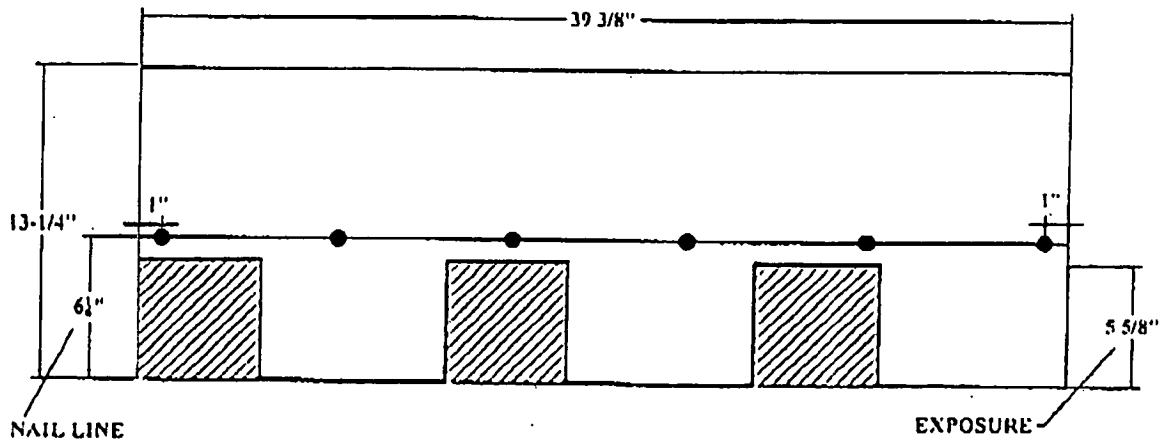
OWENS CORNING

Acceptance No.: 01-0522.04

### DETAIL A



### DETAIL B



OWENS CORNING  
FASTENING PATTERN & PHYSICAL DIMENSIONS

OAKRIDGE 40 AR LAMINATE

Frank Zuloaga, RRC  
Roofing Product Control Examiner

OWENS CORNING

Acceptance No.: 01-0522.04

NOTICE OF ACCEPTANCE STANDARD CONDITIONS

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

END OF THIS ACCEPTANCE



Frank Zuloaga, RRC  
Roofing Product Control Examiner





**Johns Manville**

**APP Modified Bitumen Specifications**

**Specification 2CNN-W/2PNN-W**

**Two Ply Heat Welded Modified Bitumen Mineral Surfaced Roofing System. For use over plywood or other nailable decks on inclines up to 6" per foot (500 mm/m).**

**For Regions 1, 2 and 3**

**Materials per 100 sq. ft. (9.3 m<sup>2</sup>) of Roof Area**

<b>Sheathing Paper:</b>	
Wood board decks only	1 layer
<b>Base Ply:</b>	
TRICOR S, BICOR S, APPeX 5S, APPeX 4S, APPeX 180, JM APP Base, GlasBase, PermaPly 28 or Classic S	1 layer
<b>Cap Sheet Options:</b>	
2CNN-W—TRICOR M FR	
2PNN-W—APPeX 4.5M FR, APPeX 4.5M, APPeX 4M, APPeX Black Bear, Classic Premium FR or Classic M FR	1 layer

Approximate installed weight: 115 - 175 lbs. (52 - 79 kgs.)

**General**

This specification is for use over any type of approved structural deck (without insulation) which can receive and adequately retain nails or other mechanical fasteners that may be recommended by the deck manufacturer. Examples of these decks are wood, plywood, and approved oriented strand board (OSB). This specification is not for use over light-weight insulating concrete decks.

**Design and installation of the deck and/or roof substrate must result in the roof draining freely, to outlets numerous enough and so located as to remove water promptly and completely. Areas where water ponds for more than 24 hours are unacceptable and will not be eligible for a JM Roofing System Guarantee.**

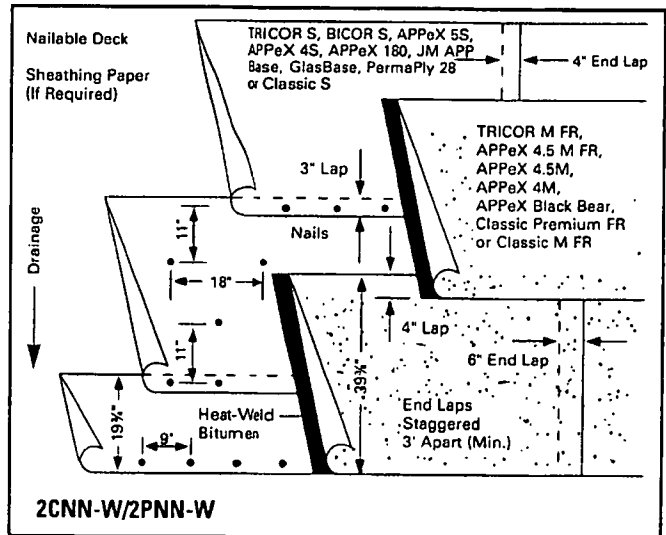
**Note:** This specification is also for use with JM PAO (Classic) products. All general instructions contained in the current JM Commercial/Industrial Roofing Systems Manual shall be considered part of this specification.

**Flashings**

Flashing details can be found in the "Bituminous Flashings" section of the JM Commercial/Industrial Roofing Systems Manual.

**Application**

Using one of the base plies listed, start with a piece 19 3/4" (502 mm) wide. The remaining plies are to be applied full width 3" (76 mm) side and 4" (102 mm) end laps over the preceding sheets. Nail the laps at 9" (229 mm) centers, and down the longitudinal center of each felt ply, place two rows of fasteners, with the rows spaced approximately 11" (279 mm) apart, and fasteners staggered on approximately 18" (457 mm) centers. Use nails or fasteners appropriate to the type of deck, with 1" (25 mm) minimum diameter caps. For additional fastener information, refer to the fastener data in the "Roof Decks" section of the current JM Commercial/Industrial Roofing Systems Manual.



Heat weld a full width piece of one of the cap sheets listed so that it is firmly and uniformly set. Subsequent sheets are to be applied in the same manner, with 4" (102 mm) side and 6" (152 mm) end laps over the preceding sheets. All laps must be rolled with a 3" (76 mm) rounded edge roller. A 1/8" to 3/8" (3 mm to 10 mm) bleedout of APP compound shall be visible at the edge of all seams. All laps must be checked for good adhesion.

Preparation of the 6" (152 mm) end lap requires scuffing away all loose granules. Heat and embed all remaining granules. Apply heat to the roll being seamed while making sure both have a good compound flow to adhere the two surfaces. End laps must be checked for proper adhesion.

**Application of JM APP/PAO Modified Bitumen Products may require the use of an open flame propane torch. Improper use of these materials and application equipment can result in severe burns, and/or other physical injury, as well as damage to property. In order to prevent these situations the mechanic must install the materials using the techniques recommended by JM and those found in "A Guide to Safety: Torch-On Modified Bitumens" available from the Asphalt Roofing Manufacturers Association. These techniques have been endorsed by the National Roofing Contractors Association and the United Union of Roofers, Waterproofers and Allied Workers.**

For special precautions for heat weld application of JM Classic (PAO) products, refer to Paragraph 7B.6.6.

For cold weather application techniques, refer to Paragraph 7B.14.

**Steep Slope Requirements**

Special procedures are required on inclines over 2 1/2" per foot (208 mm/m). Refer to Paragraph 7B.12.

**Surfacing**

No additional surfacing is required.

**Note:** When using metric and English sized sheets in the same system, care must be taken to avoid lap over lap configurations.

For an identical copy of this specification, ask for RS-4355.



MIAMI-DADE COUNTY, FLORIDA  
METRO-DADE FLAGLER BUILDING

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PRODUCT CONTROL DIVISION  
(305) 375-2902 FAX (305) 375-6139

**PRODUCT CONTROL NOTICE OF ACCEPTANCE**

Johns Manville Corp.  
717 17 Street (P.O. Box 5108)  
Denver, CO 80217

Your application for Notice of Acceptance (NOA) of:  
**Johns Manville Modified Bitumen Roofing Systems Over Wood Deck**  
under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Types of Construction, and completely described herein, has been recommended for acceptance by the Miami-Dade County Building Code Compliance Office (BCCO) under the conditions specified herein.

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

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

ACCEPTANCE NO.: 01-0206.17  
EXPIRES: 06/14/2006

Raul Rodriguez  
Chief Product Control Division

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

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

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

APPROVED: 06/14/2001

JOHNS MANVILLE CORPORATION

Acceptance No.: 01-0206.17

**ROOFING ASSEMBLY APPROVAL**

Category: Roofing  
Sub-Category: APP Modified Bitumen

Approval Date: June 14, 2001

Deck Type: Wood  
Maximum Design Pressure -52.5 psf  
Fire Classification: See General Limitation #1

Expiration Date: June 14, 2006

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

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
JM APP Base	150 sq. ft. roll	ASTM D 5147	APP modified asphalt, fiberglass reinforced, smooth surfaced base sheet.
APPeX 4S	32.8' x 3.28'; 90 lb. roll	ASTM D 6222, type I, grade S	APP modified asphalt, polyester reinforced, smooth surfaced membrane.
APPeX 4.5M	32.8' x 3.28'; 90 lb. roll	ASTM D 6222, type I grade G	APP modified asphalt, polyester reinforced, mineral surfaced membrane.
APPeX 4.5MFR	32.8' x 3.28'; 90 lb. roll	ASTM D 6222, type I grade G	APP modified asphalt, polyester reinforced, fire-retardant, mineral surfaced membrane.
APPeX 180	32.8' x 3.28'; 90 lb. roll	ASTM D 6222, type I, grade G	APP modified asphalt, polyester reinforced, smooth surfaced membrane.
Bicor MFR	39-3/8" x 34'	ASTM D 6223	APP modified asphalt, polyester / glass reinforced, granule surfaced membrane.
Tricor MFR	39-3/8" x 34'	ASTM D 6223	APP modified asphalt, polyester / glass reinforced, granule surfaced membrane.
Bicor S	39-3/8" x 34'	ASTM D 6223	APP modified asphalt, polyester / glass reinforced, smooth surfaced membrane.
Tricor S	39-3/8" x 34'	ASTM D 6223	APP modified asphalt, polyester / glass reinforced, smooth surfaced membrane.
Giasply Premier	36" x 180'	ASTM D 2178 Type VI	Type VI asphalt impregnated glass felt for use in conventional and modified bitumen built-up roofing.
Giasply IV	36" x 200'	ASTM D 4601 Type IV	Type IV asphalt impregnated glass felt for use in conventional and modified bitumen built-up roofing.



Frank Zuloaga, RRC  
 Roofing Product Control Examiner

JOHNS MANVILLE CORPORATION

Acceptance No.: 01-0206.17

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
Glasbase	36" x 108"; roll weight: 84 lbs.	ASTM D 4601	Type II asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.
PermaPly 28	36" x 108"; 72 lb. roll	ASTM D 4601	Type II asphalt impregnated and coated glass fiber base sheet
Ventsulation	36" x 36'	ASTM D 4897 Type II	Heavy duty fiber glass base sheet impregnated and coated on both sides with asphalt with or without fine mineral stabilizer.
JM Ultrafast	various	PA 114	Insulation fastener assembly (steel decks only).
JM CD-10	Various	PA 114	Insulation fastener for concrete decks.
JM ISO-1 or Tapered ISO-1	various	ASTM C 1289	Rigid polyisocyanurate roof insulation for use in conventional built-up and other roof systems; available flat or tapered.
JM Fesco or Tapered Fesco	various	ASTM C 728	Rigid perlite roof insulation board for built-up roofing systems; available flat or tapered.
JM 1/2" Retrofit	various	ASTM C 728	A high density perlite roof insulation board for use in conventional and modified bitumen built-up roofing systems.
E"NRG"Y-2 or Tapered E"NRG"Y-2	various	ASTM C 1289	Polyisocyanurate insulation for use with single-ply, BUR and modified bitumen roof covers (includes all Factory Mutual approved roof covers)
JM Fesco Foam	various	ASTM C 1289	Rigid polyisocyanurate roof insulation with perlite board facing bonded to one side for use in conventional built-up and other roofing.
JM Fiberglass Roof Insulation	various	PA 110	Fiber glass roof insulation
JM Topgard Type B		ASTM D 1227	Fire rated, fibered, non-asbestos, clay water base asphalt emulsion.
JM Fibrated Aluminum Roof Coating		ASTM D 2824	Fire rated, fibered, non-asbestos aluminum coating.
JM Premium Fibered Aluminum Roof Coating		ASTM D 2824	Fire rated, fibered, non-asbestos asphalt aluminum coating.



Frank Zuloaga, RRC  
Roofing Product Control Examiner

JOHNS MANVILLE CORPORATION

Acceptance No.: 01-0206.17**EVIDENCE SUBMITTED:**

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Description</u>	<u>Date</u>
Factory Mutual Research Corporation	J.I. 0X0A9.AM	Wind Uplift	03/25/94
	J.I. 0W6A2.AM	Wind Uplift	02/05/93
	J.I. 0X7A4.AM	Wind Uplift	08/26/93
	J.I. 3001482		08/11/98
	J.I. 3002823		04/01/99
	J.I. 3003468		02/02/00
	J.I. 3007148		04/19/00
Underwriters Laboratories, Inc.	R-10400		Published Annually
Exterior Research & Design, L.L.C.	#4361-2.04.97-1	PA 114(J) - Wind Uplift	04/15/97
	10390A.12.97-1	PA 114(J) - Wind Uplift	12/15/97
	10390A.10.97-1	PA 114(J) - Wind Uplift	10/15/97



Frank Zurloaga, RRC  
Roofing Product Control Examiner

JOINS MANVILLE CORPORATION

Acceptance No.: 01-0206.17

**APPROVED ASSEMBLIES**

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

**Deck Description:** 19/32" or greater plywood or wood plank

**System Type A:** All insulation layers are adhered to a mechanically attached or adhered anchor/base sheet. Membrane is subsequently fully or partially adhered to insulation.

All General and System Limitations apply.

**Anchor Sheet:** Minimum two plies of JM PermaPly 28 or JM Ventsulation simultaneously fastened to the deck as described below:

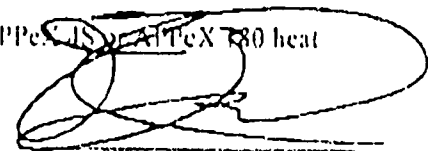
**Fastening:** Attach anchor sheet using JM Ultrafast fasteners and Square Metal Plates spaced 9" o.c. in a 4" lap and 12" o.c. in two staggered rows in the center of the sheet.

<u>Insulation Base or Top Layer</u>	<u>Fastener Type</u>	<u>Fastening Detail No.</u>	<u>Fasteners Per Board</u>	<u>Fastener Density</u>
Approved Type(s): E"NRG"Y-2, JM ISO-1 Minimum: 4' x 4' x 1.4"	N/A	N/A	N/A	N/A
Approved Type(s): Fesco Foam Minimum: 4' x 4' x 1.5"	N/A	N/A	N/A	N/A
Approved Type(s): JM Fiber Glass Roof Insulation Minimum: 3' x 4' x 1/4"	N/A	N/A	N/A	N/A
Approved Type(s): JM Fesco Board Minimum: 2' x 4' x 1/4"	N/A	N/A	N/A	N/A
Approved Type(s): JM Retro-Fit Board Minimum: 2' x 4' x 1/2"	N/A	N/A	N/A	N/A

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

**Base Sheet:** One ply of JM Glasbase or JM PermaPly 28 fully adhered to the insulated substrate with approved mopping asphalt at an application rate of 25 lb./sq. ± 15%.

**Ply Sheet:** (Optional) One or more plies of JM APP Base, APPeX IS or APPeX T80 heat welded to base sheet.



Frank Zuloaga, RRC  
Roofing Product Control Examiner

JOHNS MANVILLE CORPORATION

Acceptance No.: 01-0206.17

- Membrane: One or two plies of APPeX 4S, APPeX 180, APPeX 4.5M or APPeX 4.5 MFR heat welded.
- Surfacing: (Optional) Install one of the following for all systems that do not achieve acceptable fire ratings through the use of FR membrane sheets.
1. 400 lb./sq. gravel or 300 lb./sq. slag in a flood coat of approved mopping asphalt at a rate of 60 lb./sq.
  2. Karnak 97, Karnak 97 AF, Monsey Premium Long Life Aluminum Roof Coating Asbestos Free or Monsey Prograde Aluminum, JM Topgard Type A, Topgard Type B, JM Aluminum RF CT, Grundy Al. MB aluminum coating at a rate of 1-1/2 gal/sq Monsey Aquabrite, Gardner asphalt emulsion, APOC Sunbright 400 or Henry 229 Aluminum Emulsion at 2½ gal/sq or APOC 212 Aluminum Roof Coating at 3 gal/sq.
  3. Grundy 20 F asphalt emulsion, Endure Asphalt Emulsion, APOC 302 or 302 AF applied at 2½ gal/sq with optional 60 lbs./sq. of roofing granules embedded in wet coating.
- Maximum Design Pressure: -52.5 psf (See General Limitation #7.)



Frank Zuloaga, RRC  
Roofing Product Control Examiner

**JOHNS MANVILLE CORPORATION**

Acceptance No.: 01-0206.17

**Deck Type II:** Wood, Insulated, New Construction or Reroof

**Deck Description:** 1 9/32" or greater plywood or wood plank

**System Type B(1):** Base layer of insulation mechanically attached to roof deck. Optional top layer of insulation adhered with approved asphalt.

All General and System Limitations apply.

<u>Insulation Base Layer</u>	<u>Fastener Type</u>	<u>Fastening Detail No.</u>	<u>Fasteners Per Board</u>	<u>Fastener Density</u>
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One or more layers of the following:

Approved Type(s): JM ISO-1, E'NRC'V-2  
 Minimum: 1.4" x 4' x 4' JM Ultrafast S [ 3 ] 8 1:2 ft<sup>2</sup>

Approved Type(s): JM FescoFoam  
 Minimum: 1.5" x 3' x 4' JM Ultrafast S [ 2 ] 6 1:2 ft<sup>2</sup>

Approved Type(s): Structodek FS  
 Minimum: 1/2" x 4' x 4' JM Ultrafast S [ 3 ] 6 1:2.67 ft<sup>2</sup>  
 Minimum: 1/2" x 4' x 4' Olympic S/P [ 3 ] 6 1:2.67 ft<sup>2</sup>

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

<u>Insulation Top Layer</u>	<u>Fastener Type</u>	<u>Fastening Detail No.</u>	<u>Fasteners Per Board</u>	<u>Fastener Density</u>
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Approved Type(s): JM Retrofit Board  
 Minimum: 1/2" x 2' x 4' N/A N/A N/A N/A

Approved Type(s): JM Fesco Board  
 Minimum: 3/8" x 2' x 4' N/A N/A N/A N/A

Approved Type(s): Structodek FS  
 Minimum: 1/2" x 4' x 4' N/A N/A N/A N/A

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



Frank Zuoloaga, RRC  
 Roofing Product Control Examiner



JOINS MANVILLE CORPORATION

Acceptance No.: 01-0206.17

- Base Sheet: One ply of JM Glasbase or JM PermaPly 28 fully adhered to the insulated substrate with approved mopping asphalt at an application rate of 25 lb./sq. ± 15%.
- Ply Sheet: (Optional) (Optional) One or more plies of JM APP Base, APPeX 4S or APPeX 180 heat welded to base sheet.
- Membrane: One or two plies of APPeX 4S, APPeX 180, APPeX 4.5M or APPeX 4.5 MFR heat welded.
- Surfacing: (Optional) Install one of the following for all systems that do not achieve acceptable fire ratings through the use of FR membrane sheets.
  1. 400 lb./sq. gravel or 300 lb./sq. slag in a flood coat of approved mopping asphalt at a rate of 60 lb./sq.
  2. Karnak 97, Karnak 97 AF, Monsey Premium Long Life Aluminum Roof Coating Asbestos Free or Monsey Prograde Aluminum, JM Topgard Type A, Topgard Type B, JM Aluminum RF CT, Grundy AL MB aluminum coating at a rate of 1-1/2 gal/sq Monsey Aquabrite, Gardner asphalt emulsion, APOC Sunbright 400 or Henry 229 Aluminum Emulsion at 2½ gal/sq or APOC 212 Aluminum Roof Coating at 3 gal/sq.
  3. Grundy 20 F asphalt emulsion, Endure Asphalt Emulsion, APOC 302 or 302 AF applied at 2½ gal/sq with optional 60 lbs./sq. of roofing granules embedded in wet coating.

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



Frank Zuloaga, RRC  
Roofing Product Control Examiner

**JOHNS MANVILLE CORPORATION**

Acceptance No.: 01-0206.17

Deck Type II: Wood, Insulated, New Construction or Reroof

Deck Description: 1 9/32" or greater plywood or wood plank

System Type II(2): Base layer of insulation mechanically attached to roof deck. Optional top layer of insulation adhered with approved asphalt.

All General and System Limitations apply.

<u>Insulation Base Layer</u>	<u>Fastener Type</u>	<u>Fastening Detail No.</u>	<u>Fasteners Per Board</u>	<u>Fastener Density</u>
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One or more layers of the following:

Approved Type(s): JM ISO-1, E'NRG'Y-2  
 Minimum: 1.5" x 4' x 4' JM Ultrafast S [ 3 ] 12 1:1.33 ft<sup>2</sup>

Approved Type(s): JM Fesco Foam  
 Minimum: 1.5" x 3' x 4' JM Ultrafast S [ 2 ] 9 1:1.33 ft<sup>2</sup>

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

<u>Insulation Top Layer</u>	<u>Fastener Type</u>	<u>Fastening Detail No.</u>	<u>Fasteners Per Board</u>	<u>Fastener Density</u>
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Approved Type(s): JM Retrofit Board  
 Minimum: 1/2" x 2' x 4' N/A N/A N/A N/A

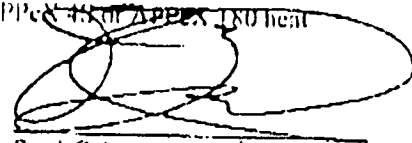
Approved Type(s): JM Fesco Board  
 Minimum: 1/4" x 2' x 4' N/A N/A N/A N/A

Approved Type(s): Structodek FS  
 Minimum: 1/2" x 4' x 4' N/A N/A N/A N/A

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

Base Sheet: One ply of JM Glashbase or JM PermaPly 28 fully adhered to the insulated substrate with approved mopping asphalt at an application rate of 25 lb /sq. ± 15%.

Ply Sheet: (Optional) One or more plies of JM APP Base, APPEX 45 or APPEX 180 heat welded to base sheet.



Frank Zuloaga, RRC  
 Roofing Product Control Examiner

JOHNS MANVILLE CORPORATION

Acceptance No.: 01-0206.17

- Membrane: One or two plies of APPeX 4S, APPeX 180, APPeX 4.5M or APPeX 4.5 MFR heat welded.
- Surfacing: (Optional) Install one of the following for all systems that do not achieve acceptable fire ratings through the use of FR membrane sheets.
1. 400 lb./sq. gravel or 300 lb./sq. slag in a flood coat of approved mopping asphalt at a rate of 60 lb./sq.
  2. Karnak 97, Karnak 97 AF, Monsey Premium Long Life Aluminum Roof Coating Asbestos Free or Monsey Prograde Aluminum, JM Topgard Type A, Topgard Type B, JM Aluminum RF CT, Grundy AL MB aluminum coating at a rate of 1-1/2 gal/sq Monsey Aquabrite, Gardner asphalt emulsion, APOC Sunbright 400 or Henry 229 Aluminum Emulsion at 2½ gal/sq or APOC 212 Aluminum Roof Coating at 3 gal/sq.
  3. Grundy 20 F asphalt emulsion, Endure Asphalt Emulsion, APOC 302 or 302 AF applied at 2½ gal/sq with optional 60 lbs./sq. of roofing granules embedded in wet coating.
- Maximum Design Pressure: -52.5 psf (See General Limitation #7.)



Frank Zuioaga, RRC  
Roofing Product Control Examiner

**JOHNS MANVILLE CORPORATION**

Acceptance No.: 01-0206.17

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

**Deck Description:** 1 9/32" or greater plywood or wood plank

**System Type C:** All layers of insulation mechanically attached to roof deck. Membrane is subsequently fully or partially adhered to insulation.

All General and System Limitations apply.

<u>Insulation Base Layer</u>	<u>Fastener Type</u>	<u>Fastening Detail No.</u>	<u>Fasteners Per Board</u>	<u>Fastener Density</u>
Approved Type(s): E'NRGY -2, JM ISO-1 Minimum: 4' x 4' x 1.4"	N/A	N/A	N/A	N/A
Approved Type(s): Fesco Foam Minimum: 4' x 4' x 1.5"	N/A	N/A	N/A	N/A

**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.

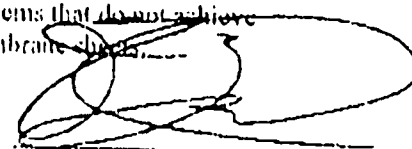
<u>Insulation Top Layer</u>	<u>Fastener Type</u>	<u>Fastening Detail No.</u>	<u>Fasteners Per Board</u>	<u>Fastener Density</u>
Approved Type(s): JM Fesco Board Minimum: 2' x 4' x 3/4"	Olympic S	(1)	4	1:2 ft. <sup>2</sup>
Minimum: 2' x 4' x 3/4"	Tru-Fast S	(1)	4	1:2 ft. <sup>2</sup>
Minimum: 2' x 4' x 3/4"	UltraFast S	(1)	4	1:2 ft. <sup>2</sup>
Approved Type(s): JM Retro-Fit Board Minimum: 2' x 4' x 1/2"	Olympic S	(1)	4	1:2 ft. <sup>2</sup>
Minimum: 2' x 4' x 1/2"	Tru-Fast S	(1)	4	1:2 ft. <sup>2</sup>
Minimum: 2' x 4' x 1/2"	UltraFast S	(1)	4	1:2 ft. <sup>2</sup>

**Base Sheet:** One ply of JM Glasbase or JM PermaPly 28 fully adhered to the insulated substrate with approved mopping asphalt at an application rate of 25 lb./sq. ± 15%.

**Ply Sheet:** (Optional) One or more plies of JM APP Base, APPeX 4S or APPeX 180 heat welded to base sheet.

**Membrane:** One or two plies of APPeX 4S, APPeX 180, APPeX 4.5M or APPeX 4.5 MFR heat welded.

**Surfacing:** (Optional) Install one of the following for all systems that do not achieve acceptable fire ratings through the use of FR membrane.



Frank Zuloaga, RRC  
Roofing Product Control Examiner

## JOHNS MANVILLE CORPORATION

Acceptance No.: 01-0206.17

1. 400 lb./sq. gravel or 300 lb./sq. slag in a flood coat of approved mopping asphalt at a rate of 60 lb./sq.
2. Karnak 97, Karnak 97 AF, Monsey Premium Long Life Aluminum Roof Coating Asbestos Free or Monsey Prograde Aluminum, JM Topgard Type A, Topgard Type B, JM Aluminum RF CT, Grundy AL MB aluminum coating at a rate of 1-1/2 gal/sq Monsey Aquabrite, Gardner asphalt emulsion, APOC Sunbright 400 or Henry 229 Aluminum Emulsion at 2½ gal/sq or APOC 212 Aluminum Roof Coating at 3 gal/sq.
3. Grundy 20 F asphalt emulsion, Endure Asphalt Emulsion, APOC 302 or 302 AF applied at 2½ gal/sq with optional 60 lbs./sq. of roofing granules embedded in wet coating.

Maximum Design  
Pressure:

-45 psf (See General Limitation #9)



Frank Zuloaga, RRC  
Roofing Product Control Examiner

**JOINS MANVILLE CORPORATION**

Acceptance No.: 01-0206.17

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

**Deck Description:** 1 9/32" or greater plywood or wood plank

**System Type D:** All insulation is loose laid with preliminary attachment to roof deck. Membrane and/or anchor sheet is subsequently mechanically fastened through insulation to the roof deck.

All General and System Limitations apply.

<u>Insulation Base Layer</u>	<u>Fastener Type</u>	<u>Fastening Detail No.</u>	<u>Fasteners Per Board</u>	<u>Fastener Density</u>
Approved Type(s): AC Foam II, JM ISO-1, E'NRG'Y-2, Fesco Foam Minimum: 4' x 4' x 1.5"	N/A	N/A	N/A	N/A
Approved Type(s): JM Fesco Board Minimum: 2' x 4' x 3/4"	N/A	N/A	N/A	N/A
Approved Type(s): JM Retro-Fit Board Minimum: 2' x 4' x 1/2"	N/A	N/A	N/A	N/A

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

**Base Sheet:** *(Option #1)* One ply of JM APP Base, JM PermaPly 28, JM Glasbase, JM Glasbase Plus or JM Ventsulation mechanically fastened through the insulation to the deck with JM UltraFast, Olympic or Tru-Fast metal plates and fasteners at a 4" side lap 12" o.c. and two rows staggered in the center of the sheet 18" o.c.  
**Maximum Design Pressure: -45 psf, See General Limitation #9.**

*(Option #2)* Minimum two plies of JM PermaPly 28 or JM Ventsulation simultaneously fastened through the insulation to the deck with JM Ultrafast fasteners and Square Metal Plates spaced 9" o.c. in a 4" lap and 12" o.c. in two staggered rows in the center of the sheet.  
**Maximum Design Pressure: -52.5 psf, See General Limitation #7.**

**Ply Sheet:** (Optional) One or more plies of JM APP Base, APPeX 4S or APPeX 180 heat welded to base sheet.

**Membrane:** One or two plies of APPeX 4S, APPeX 180, APPeX 4.5M or APPeX 4.5 MFR heat welded.



Frank Zuloaga, RRC  
Roofing Product Control Examiner

JOHNS MANVILLE CORPORATION

Acceptance No.: 01-0206.17

## Surfacing:

(Optional) Install one of the following for all systems that do not achieve acceptable fire ratings through the use of FR membrane sheets.

1. 400 lb./sq. gravel or 300 lb./sq. slag in a flood coat of approved mopping asphalt at a rate of 60 lb./sq.
2. Karnak 97, Karnak 97 AF, Monsey Premium Long Life Aluminum Roof Coating Asbestos Free or Monsey Prograde Aluminum, JM Topgard Type A, Topgard Type D, JM Aluminum RF CT, Grundy Al. MB aluminum coating at a rate of 1-1/2 gal/sq Monsey Aquabrite, Gardner asphalt emulsion, APOC Sunbright 400 or Henry 229 Aluminum Emulsion at 2½ gal/sq or APOC 212 Aluminum Roof Coating at 3 gal/sq.
3. Grundy 20 F asphalt emulsion, Endure Asphalt Emulsion, APOC 302 or 302 AF applied at 2½ gal/sq with optional 60 lbs./sq. of roofing granules embedded in wet coating.

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Roofing Product Control Examiner

Deck Type I: Wood, Non-insulated  
 Deck Description: 19/32" or greater plywood or wood plank decks  
 System Type E: Base sheet mechanically fastened.

All General and System Limitations apply.

Base Sheet: *(Option #1)* One ply of JM APP Base, JM PermaPly 28, JM Glasbase, JM Glasbase Plus or JM Ventsulation mechanically fastened to the deck with JM UltraFast, Olympic or Tru-Fast metal plates and fasteners at a 4" side lap 12" o.c. and two rows staggered in the center of the sheet 18" o.c.  
 Maximum Design Pressure -45 psf - See General Limitation #9.

*(Option #2)* Minimum two plies of JM PermaPly 28 or JM Ventsulation simultaneously fastened to the deck with JM Ultrafast fasteners and Square Metal Plates spaced 9" o.c. in a 4" lap and 12" o.c. in two staggered rows in the center of the sheet.  
 Maximum Design Pressure -52.5 psf - See General Limitation #7.

Ply Sheet: (Optional) One or more plies of JM APP Base, APPeX 4S or APPeX 180 heat welded to base sheet.

Membrane: One or two plies of APPeX 4S, APPeX 180, APPeX 4.5M or APPeX 4.5 MFR heat welded.

Surfacing: (Optional) Install one of the following for all systems that do not achieve acceptable fire ratings through the use of FR membrane sheets.

1. 400 lb./sq. gravel or 300 lb./sq. slag in a flood coat of approved mopping asphalt at a rate of 60 lb./sq.
2. Karnak 97, Karnak 97 AF, Monsey Premium Long Life Aluminum Roof Coating Asbestos Free or Monsey Prograde Aluminum, JM Topgard Type A, Topgard Type B, JM Aluminum RF CT, Grundy AL MB aluminum coating at a rate of 1-1/2 gal/sq Monsey Aquabrite, Gardner asphalt emulsion, APOC Sunbright 400 or Henry 229 Aluminum Emulsion at 2 1/2 gal/sq or APOC 212 Aluminum Roof Coating at 3 gal/sq.
3. Grundy 20 F asphalt emulsion, Endure Asphalt Emulsion, APOC 302 or 302 AF applied at 2 1/2 gal/sq with optional 60 lbs./sq. of roofing granules embedded in wet coating.

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Frank Zuloaga, RRC  
 Roofing Product Control Examiner

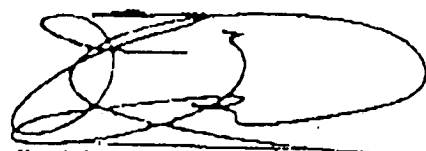


**WOOD DECK SYSTEM LIMITATIONS:**

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.)



Frank Zulonga, RRC  
Roofing Product Control Examiner

NOTICE OF ACCEPTANCE STANDARD CONDITIONS

- 1 Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documentation, including test supporting data, engineering documents, are no older than eight (8) years.
- 2 Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Miami-Dade County Product Control Approved", or as specifically stated in the specific conditions of this Acceptance.
- 3 Renewals of Acceptance will not be considered if:
  - a) There has been a change in the South Florida Building Code affecting the evaluation of this product and the product is not in compliance with the code changes;
  - b) The product is no longer the same product (identical) as the one originally approved;
  - c) If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product;
  - d) The engineer who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.
- 4 Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.
- 5 Any of the following shall also be grounds for removal of this Acceptance:
  - a) Unsatisfactory performance of this product or process;
  - b) Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.
- 6 The Notice of Acceptance number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the Notice of Acceptance is displayed, then it shall be done in its entirety.
- 7 A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all times. The copies need not be resealed by the engineer.
- 8 Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
- 9 This Acceptance contains pages 1 through 17.

END OF THIS ACCEPTANCE

Frank Zuloaga, RRC  
Roofing Product Control Examiner



7267

## TOWN OF SEWALL'S POINT

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

### CORRECTION NOTICE

ADDRESS: 11 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.

DPV - IN

NOT READY FOR INSPECTION

\$40 FEE

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: 4/15

[Signature]

INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 4/15, 20015 Page 2 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7407	BRUCIA	Door Buck	PASS	CLOSE
4	2 KINGSTON CT J & G CARPENTRY			INSPECTOR: <i>[Signature]</i>
7222	MURPHY	FINAL DOOR	FAIL	
9	8 HERON'S NEST O/B			INSPECTOR: <i>[Signature]</i>
7430	MURPHY	FINAL DECK	FAIL	
9A	8 HERON'S NEST O/B			INSPECTOR: <i>[Signature]</i>
<del>7267</del>	<del>TAYLOR</del>	<del>DRY LN</del>	<del>FAIL</del>	
6	11 PALM ROAD CAMPAKY ROOFING			\$40 FEE INSPECTOR: <i>[Signature]</i>
7279	DOMINICA 6 FIELDWAY <del>DOM CARDINAL</del>	FINAL ROOF	PASS	CLOSE INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>

OTHER: 2 DAWSON-24 ISLAND COURTESY/NSP  
 973-452-8988 OF 22 ISLAND  
 GRADE ON SO. SIDE  
 TAYLOR'S HOME

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 4/18, 20025 Page 1 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
738	BONIFACE	CONC. WALL	PASS	
7	63 S. RIVER RD WILSON BLDGS			INSPECTOR: <i>[Signature]</i>
743	SCHRADER	POOL ELECTRIC	FAIL	
9	EMARITA WAY SIROIS ELECTRIC	SILENCE 486-1568		INSPECTOR: <i>[Signature]</i>
7454	FOWLER	ROOF FINAL	PASS	CLOSE
10	18 FIELDWAY DR ALL AREA ROOFING			INSPECTOR: <i>[Signature]</i>
6812	MADER	STEM WALL	PASS	
1	106 ABBIE COURT PURUCKER HOMES	(FIRST PLEASE)	0	INSPECTOR: <i>[Signature]</i>
7285	ZYGMAN	DRY-IN	FAIL	MUST RESCHEDULE
6	18 SIMA ST ALL AMERICAN			INSPECTOR: <i>[Signature]</i>
7262	TAYLOR	DRY-IN	PASS	
84	11 PALM ROAD COMPANY ROOFING	315 534 0536 (late 10-11. Please)		INSPECTOR: <i>[Signature]</i>
7136	WENBERGH	FINE-DOCK	PASS	CLOSE
5	146 S. SPR Tropic Marine Construc			INSPECTOR: <i>[Signature]</i>
OTHER:				
6900	775. ROAD PACIFIC	PERMIT FOR ROOFER?	PASS	<i>[Signature]</i>

157- S. RIVER. NEEDS PERMIT.  
TO CHANGE GUASS & WINDOWS-

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri May 6, 2002 Page      of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7231	Schmitt	Fence-final	PASS	CLOSE
10	15 Heritage Way O/B			INSPECTOR: <i>[Signature]</i>
7569	Barry	Re-roof Tin-top	PASS	Requested very early
9	97 S. Sewalls Pt Rd Apostoloropoulos	nailing metal		INSPECTOR: <i>[Signature]</i>
7017	Schneider	Final Pool Screen Enclosure	PASS	CLOSE
6	90 S. River Rd Coastal Alumn.			INSPECTOR: <i>[Signature]</i>
6857	Priessman	Framing Electric	FAIL	
7	28 Rio Vista O/B		FAIL	INSPECTOR: <i>[Signature]</i>
7054	Tapper	Slab	PASS	concrete scheduled for Monday
1	22 Island Rd Winchip			INSPECTOR: <i>[Signature]</i>
<del>7267</del>	<del>Taylor</del>	<del>Final Roofs</del>	<del>PASS</del>	<del>CLOSE</del>
2	<del>111 Palm Road</del> <del>Campana Property</del>			INSPECTOR: <i>[Signature]</i>
7511	Hart	Dry wall	PASS	
12	113 N Sewall's Pt Rd Black Diamond			INSPECTOR: <i>[Signature]</i>
OTHER: _____				

**9831**

**CHANGE OUT A/C DUCT SYSTEM**



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

## BUILDING PERMIT CARD

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

PERMIT NUMBER:	9831	DATE ISSUED:	JULY 11, 2011
SCOPE OF WORK:	CHANGE OUT DUCT SYSTEM		
CONDITIONS :			
CONTRACTOR:	BREATHE HEALTHIER AIR		
PARCEL CONTROL NUMBER:	133841005-000-001109	SUBDIVISION	PALM ROW REVISED-L11
CONSTRUCTION ADDRESS:	11 PALM RD		
OWNER NAME:	RAUSCH		
QUALIFIER:	KENNETH HAYES GEARY	CONTACT PHONE NUMBER:	221-8698

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

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

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

### REQUIRED INSPECTIONS

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

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





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

### BUILDING PERMIT RECEIPT

PERMIT NUMBER:	9831		
ADDRESS	11 PALM RD - RAUSCH		
DATE:	7/11/11	SCOPE:	CHANGE OUT DUCT SYSTEM

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$	
Total square feet air-conditioned space: (@ \$110.25 per sq. ft.)		s.f.	
Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)		s.f.	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$75 per insp.)		\$	
Total number of inspections (Value < \$200K) @\$75 ea.		\$	
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 minimum)		\$	
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 minimum)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		\$	

ACCESSORY PERMIT	Declared Value:	\$	
Total number of inspections @ \$75.00 each		\$	250 work w/o permit
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 minimum)		\$	3.75
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 minimum)		\$	3.75
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	50.00
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	262.50

*pd*  
*CK#1547*

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

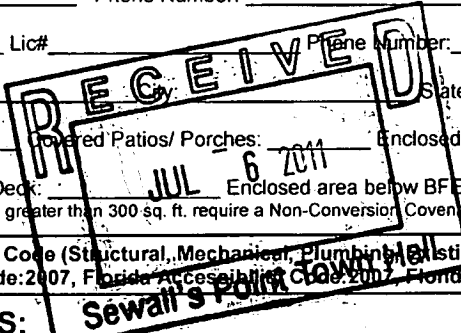
Date: 7/5/11 Permit Number: 9831  
 OWNER/TITLEHOLDER NAME: Leonard Pausch Phone (Day) 919-522-9993 (Fax) \_\_\_\_\_  
 Job Site Address: 11 Palm Rd City: Stuart State: FL Zip: 34996  
 Legal Description: Palm Pkw Rel'ised + Ammended lot 11 Parcel Control Number: 13-38-41-005000001109  
 Owner Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Scope of work (please be specific): Change out Duct system  
**WILL OWNER BE THE CONTRACTOR?**  
 (If yes, Owner Builder questionnaire must accompany application)  
 YES \_\_\_\_\_ NO   
**Has a Zoning Variance ever been granted on this property?**  
 YES \_\_\_\_\_ (YEAR) \_\_\_\_\_ NO \_\_\_\_\_  
 (Must include a copy of all variance approvals with application)

**COST AND VALUES:** (Required on ALL permit applications)  
 Estimated Value of Improvements: \$ 2670  
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
 Is subject property located in flood hazard area? VE10  AE9  AE8  X  
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
 Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
 (Fair Market Value of the Primary Structure only, Minus the land value)  
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Breadth Healthier Air Inc Phone: 221-81098 Fax: 781-4624  
 Street: 2801 SE Monroe St. City: Stuart State: FL Zip: 34997  
 State License Number: JAC035593 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_  
 LOCAL CONTACT: KEN GEARM 772-214-9711 Phone Number: 772-221-8698

DESIGN PROFESSIONAL: \_\_\_\_\_ Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Street: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 AREAS SQUARE FOOTAGE: Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios/ Porches: \_\_\_\_\_ Enclosed Storage: \_\_\_\_\_  
 Carport: \_\_\_\_\_ Total under Roof \_\_\_\_\_ Elevated Deck: \_\_\_\_\_ Enclosed area below BFE: \_\_\_\_\_  
 \* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.



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

**NOTICES TO OWNERS AND CONTRACTORS:**

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

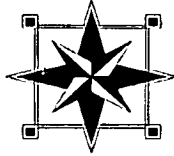
**\*\*\*\*\*A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS\*\*\*\*\***

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

**OWNER SIGNATURE: (required)**  
 OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)  
[Signature]  
 State of Florida, County of: \_\_\_\_\_  
 This the \_\_\_\_\_ day of \_\_\_\_\_, 2011  
 by \_\_\_\_\_ who is personally  
 known to me or produced \_\_\_\_\_  
 as identification \_\_\_\_\_  
 \_\_\_\_\_ Notary Public  
 My Commission Expires: \_\_\_\_\_

**CONTRACTOR SIGNATURE: (required)**  
Ken Garm  
 On State of Florida, County of: Martin  
 This the 5th day of July, 2011  
 by Kenneth Hayes Garm who is personally  
 known to me or produced [Signature]  
 as identification LISA D. JACKSON  
[Signature] Commission # DD 848140  
 Expires December 30, 2012  
 My Commission Expires: \_\_\_\_\_  
 Bonded Thru Troy Fair Insurance 800-385-7019

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



**GEARYAIR**

**"A Breathe Healthier Air Company"**  
State license Number: CACO35593

**Air Conditioning & Heating  
Sales, Service, & Replacements**  
2801 SE Monroe Street Stuart, Florida 34997  
Phone: 772-221-8698 Fax: 772-781-4634  
[www.gearyair.com](http://www.gearyair.com)

Name: Rick Raiusch

Phone: 919-522-9993

Date: June 23, 2011

Address: 11 Palm Road, Stuart, Florida 34996 (Sewall's Point)

Upon my inspection of the duct system on Wednesday morning I found that your duct system is in poor shape and you are **losing approximately 35% of the air to the attic.**

I also found the return duct system to be undersized causing it to be noisy and not allowing the air handler to get up to the proper CFMs. You have super high efficient equipment, however between the duct leaks and the undersized return lines the equipment cannot perform to its maximum capacity.

We propose to replace the present air conditioning/heating duct system with a new more efficient properly sized duct system

Included is:

The removal, cutting up and setting out for trash pickup of the existing duct system

11-supply branch duct lines

4-Supply trunk lines

2-return trunk lines

1-additional return trunk line, can and grill for the master bedroom area

We will seal all duct work to 100% leak free

We will strap up and balance out the system once installed

We will relocate the Kitchen can and grill to the new location as discussed.

**We will do a complete service and cleaning to the air conditioning equipment**

We will repair the items on the insurance companies check list

**We will warranty all materials and workmanship for a period of Five Years**

**Total investment: Three Thousand Two Hundred Thirty-Six Dollars \$3,236.00**

18% welcome to the area discount: -\$582.00

**Total net cost: Two Thousand Six Hundred Fifty-Four Dollars \$2,654.00**

Terms: 100% upon completion

Offered by:

*Kenneth H. Geary*

Accepted by:

  
\_\_\_\_\_

**"On-Time, Quality, Reliable Service"**

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

generated on 7/6/2011 3:03:38 PM EDT

**Summary**

Parcel ID	Account #	Unit Address	Market Total Value	Data as of
13-38-41-005-000-00110-9	27818	11 PALM RD, SEWALL'S POINT	\$351,820	7/2/2011

---

**Owner Information**

<b>Owner(Current)</b>	RAUSCH RICHARD EDWARD RAUSCH CHRISTINA W
<b>Owner/Mail Address</b>	11 PALM RD STUART FL 34996
<b>Sale Date</b>	5/27/2011
<b>Document Book/Page</b>	2520 0601
<b>Document No.</b>	2276830
<b>Sale Price</b>	340000

---

**Location/Description**

<b>Account #</b>	27818	<b>Map Page No.</b>	SP-05
<b>Tax District</b>	2200	<b>Legal Description</b>	PALM ROW REVISED & AMENDED LOT 11
<b>Parcel Address</b>	11 PALM RD, SEWALL'S POINT		
<b>Acres</b>	.3460		

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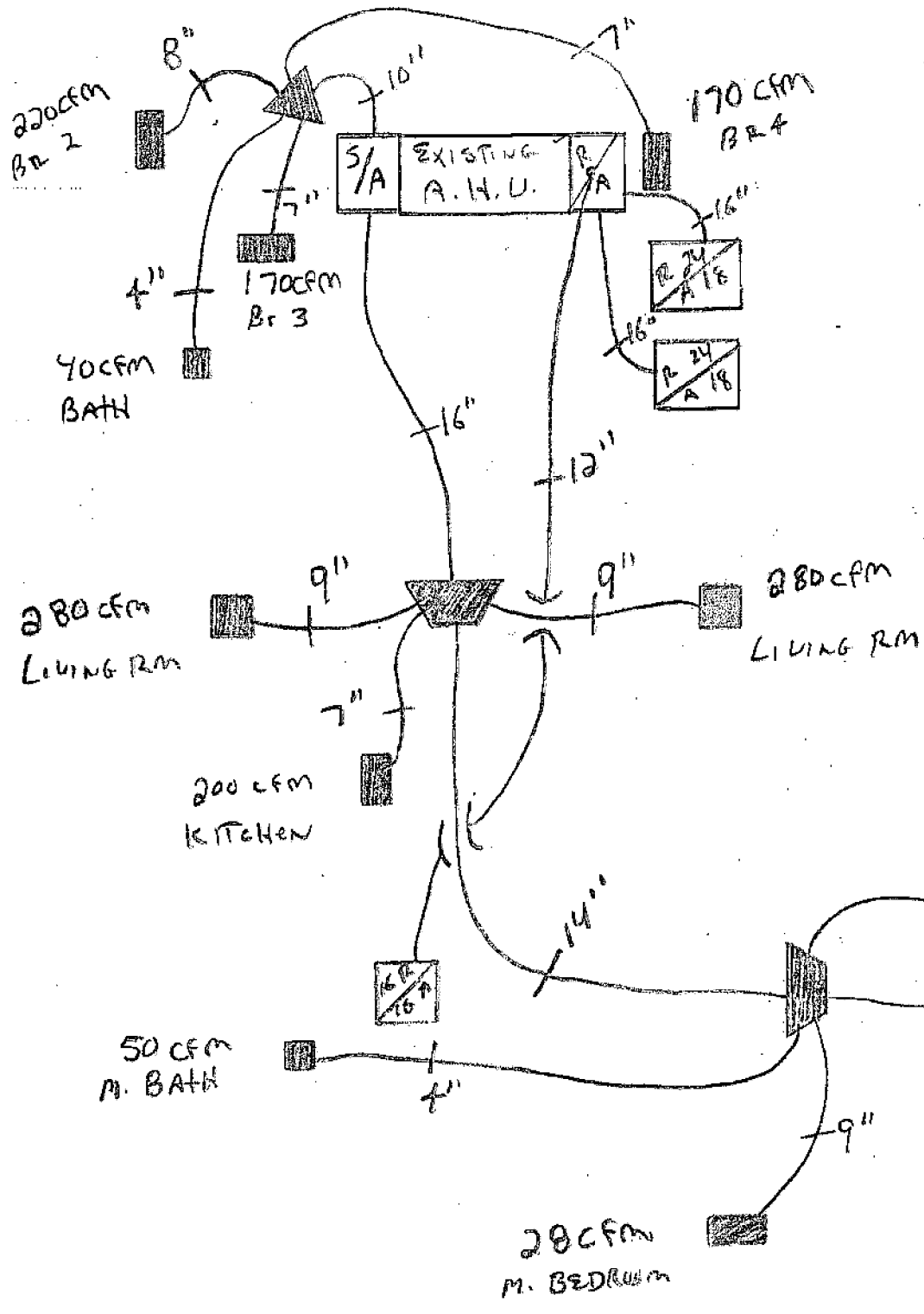
**Parcel Type**

<b>Use Code</b>	0100 Single Family
<b>Neighborhood</b>	120200 Heritage P, Palmtto Pk,Rdglnd,

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**Assessment Information**

<b>Market Land Value</b>	\$178,000
<b>Market Improvement Value</b>	\$173,820
<b>Market Total Value</b>	\$351,820



RICHARD RAUSCH  
 11 Palm Rd  
 SEWALL'S POINT

BREATHE HEALTHIER AIR  
 DR. GARY AIR  
 772-221-8198

DUCT REPLACEMENT ONLY

TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY



**10759**

**GARAGE DOOR**



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

## BUILDING PERMIT CARD

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

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	10759	DATE ISSUED:	02/05/2014
SCOPE OF WORK:	TEAR OUT AND REPLACE 16 X 17 GARAGE DOOR		
CONTRACTOR:	D & D GARAGE DOORS PSL		
PARCEL CONTROL NUMBER:	133841005000001109	SUBDIVISION	PALM ROW REVISED & AMENDED LOT 11
CONSTRUCTION ADDRESS:	11 PALM ROAD		
OWNER NAME:	ROBERT T CHAPMAN		
QUALIFIER:	DENVER MILLER	CONTACT PHONE NUMBER:	772 460-7630

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

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

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

### INSPECTIONS

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

**ALL RE-INSPECTION FEES AND ADDITIONAL INSPECTION REQUESTS WILL BE CHARGED TO THE PERMIT HOLDER. THE CONTRACTOR OR OWNER /BUILDER MUST SCHEDULE A FINAL INSPECTION. FAILURE TO RECEIVE A SUCCESSFUL**





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

FINAL INSPECTION WILL RESULT IN PERMIT RENEWAL FEES, FINES, AND OR DENIAL OF FUTURE BUILDING PERMITS TO THE CONTRACTOR OR OWNER /BUILDER.

**BUILDING PERMIT RECEIPT**

PERMIT NUMBER:	10759
ADDRESS	11 PALM ROAD
DATE 02/05/14	SCOPE OF WORK TEAR OUT AND REPLACE 16 X 17 GARAGE DOOR

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$	
Total square feet air-conditioned space: (@ \$121.75 per sq. ft.)		s.f.	
Total square feet non-conditioned space, or interior remodel: (@ \$59.81 per sq. ft.)		s.f.	
Total square feet remodel with new trusses: @ \$90.78 per sq. ft.		\$	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$100 per insp.)			
Total number of inspections (Value < \$200K)@\$100ea		\$	
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min		\$	
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	
Road impact assessment: (.04% of construction value - \$5 min.)			
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		\$	

ACCESSORY PERMIT	Declared Value:	\$	
Total number of inspections @ \$100.00 each	1		100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min		\$	2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	109.00

*PK 2/7/14*  
*UK 13378*

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: 10759

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

OWNER/LESSEE NAME: Robert Chapman Phone (Day) 716-310-1667 (Fax) \_\_\_\_\_

Job Site Address: 11 Palm Rd City: Sewalls Point State: FL Zip: 34996

Legal Description \_\_\_\_\_ Parcel Control Number: 13-38-41-005-000-001109

Fee Simple Holder Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

\*SCOPE OF WORK (PLEASE BE SPECIFIC): Tear out + replace 16x7 garage door

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

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

COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ 1810.00 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out) Is subject property located in flood hazard area? VE10 \_\_\_\_\_ AE9 \_\_\_\_\_ AE8 [X] \_\_\_\_\_ FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_ (Fair Market Value of the Primary Structure only, Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: D+D Garage Doors PSL Phone: 4160-7630 Fax: 4160-7635

Qualifiers name: Denver Miller Street: 500 Kitterman Rd City: PSL State: FL Zip: 34952

State License Number: \_\_\_\_\_ OR: Municipality: MCGD03359 License Number: \_\_\_\_\_

LOCAL CONTACT: \_\_\_\_\_ Phone Number: \_\_\_\_\_

DESIGN PROFESSIONAL: \_\_\_\_\_ Fla. License# \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. 2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - 5.

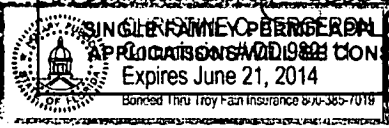
\*\*\*\*\* A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS\*\*\*\*\*

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE: [Signature] State of Florida, County of: MARTIN On This the 5th day of FEBRUARY, 2014 by ROBERT CHAPMAN who is personally known to me or produced As identification: FLD/LC 155-778-66-109-0 Notary Public: Christal Bergeron My Commission Expires: \_\_\_\_\_

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: [Signature] State of Florida, County of: St Lucie On This the 23 day of Jan 2014 by Denver Miller who is personally known to me or produced As identification: Tiffany Lee Notary Public My Commission Expires: \_\_\_\_\_

TIFFANY A. LEE My Commission # FD 36625 EXPIRES: April 26, 2014 Bonded Through Budget Notary Services



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



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

Site Provided by...  
governmentmax.com 1.12

**Summary**

Owner  
17 of 37

**Tabs**  
**Summary**

- Print View
- Land
- Improvements
- Assessments & Exemptions
- Sales
- Taxes →
- NEW: Navigator
- Parcel Map →
- Notice of Prop. Taxes →

Parcel ID	Account #	Unit Address	Market Total Value	Website Update
13-38-41-005-000-00110-9	27818	11 PALM RD, SEWALL'S POINT	\$332,670	1/18/20

Owner Information	
<b>Owner(Current)</b>	CHAPMAN ROBERT T
<b>Owner/Mail Address</b>	11 PALM RD STUART FL 34996
<b>Sale Date</b>	12/30/2013
<b>Document Book/Page</b>	2695 1395
<b>Document No.</b>	2433428
<b>Sale Price</b>	448000

**Searches**

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

Location/Description			
<b>Account #</b>	27818	<b>Map Page No.</b>	SP-05
<b>Tax District</b>	2200	<b>Legal Description</b>	PALM ROW REVISE & AMEND LOT 11
<b>Parcel Address</b>	11 PALM RD, SEWALL'S POINT		
<b>Acres</b>	.3460		

Parcel Type	
<b>Use Code</b>	0100 Single Family
<b>Neighborhood</b>	120200 Heritage P, Palmtto Pk,Rdglnd,

**Functions**

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

Assessment Information	
<b>Market Land Value</b>	\$175,000
<b>Market Improvement Value</b>	\$157,670
<b>Market Total Value</b>	\$332,670

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

*Legal Disclaimer / Privacy Statement*





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

**FORMULA FOR DESIGN PRESSURES**

Example: 25 ft mean roof height, exposure C - 16 X 7 Door 140mph

TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY

Pressure	Exposure C multiplier	Req. Design Pressure
29.7	X 1.35	= +40.095
-33.1	X 1.35	= -44.685

Garage Door must be rated at +40.1/-44.68 minimum. This must be completed for exposure C:

Pressure	Exposure C multiplier	Req. Design Pressure
34.1	X 1.21	= 41.261 (+)
38.0	X 1.21	= 45.980 (-)

TABLE 1609.3.1  
 EQUIVALENT BASIC WIND SPEEDS a,b,c

V3S	85	90	100	110	120	125	130	140	145	150	160	170	
Vfm	71	76	85	90	95	104	109	114	123	128	133	142	152

For SI: 1 mile per hour = 0.44 m/s.

- a. Linear interpolation is permitted.
- b. V3S is the 3-second gust wind speed (mph).
- c. Vfm is the fastest mile wind speed (mph).

**TABLE 1609.6(2)**

MEAN ROOF HEIGHT (feet)	EXPOSURE		
	B	C	D
15	1.00	1.21	1.47
20	1.00	1.29	1.55
25	1.00	1.35	1.61
30	1.00	1.40	1.66
35	1.05	1.45	1.70
40	1.09	1.49	1.74
45	1.12	1.53	1.78
50	1.16	1.56	1.81
55	1.19	1.59	1.84
60	1.22	1.62	1.87

For SI: 1 foot=304.8 mm.

All table values shall be adjusted for other exposures and heights by multiplying by the above coefficients.

**TABLE 1609.6(1)**

Effective Wind Area		Basic Wind Speed V (mph - 3 second gust)															
Width (ft)	Height (ft)	85	90	100	110	120	130	140	150								
<b>Roof Angle 0 - 10 degrees</b>																	
8	8	10.5	-11.9	11.7	-13.3	14.5	-16.4	17.5	-19.9	20.9	-23.6	24.5	-27.7	28.4	-32.2	32.6	-36.9
10	10	10.1	-11.4	11.4	-12.7	14.0	-15.7	17.0	-19.0	20.2	-22.7	23.7	-26.6	27.5	-30.8	31.6	-35.4
14	14	10.0	-10.7	10.8	-12.0	13.3	-14.8	16.1	-17.9	19.2	-21.4	22.5	-25.1	26.1	-29.1	30.0	-33.4
<b>Roof Angle &gt; 10</b>																	
9	7	11.4	-12.9	12.8	-14.5	15.8	-17.9	19.1	-21.6	22.8	-25.8	26.7	-30.2	31.0	-35.1	35.6	-40.2
16	7	10.9	-12.2	12.3	-13.7	15.2	-16.9	18.3	-20.4	21.8	-24.3	25.6	-28.5	29.7	-33.1	34.1	-38.0

For SI: 1 Square foot = 0.929 m<sup>2</sup>, 1 mph = 0.447 m/s, 1 psf = 47.88 N/m<sup>2</sup>

- 1. For effective areas or wind speeds between those given above the load may be interpolated, otherwise use the load associated with the lower effective area.
- 2. Table values shall be adjusted for height and exposure by multiplying by adjustment coefficients in Table 1609.6 (2).
- 3. Plus and minus signs signify pressures acting toward and away from the building surfaces.
- 4. Negative pressures assume door has 2 feet of width in building's end zone



DEPARTMENT OF PERMITTING, ENVIRONMENT, AND REGULATORY  
AFFAIRS (PERA)  
BOARD AND CODE ADMINISTRATION DIVISION

MIAMI-DADE COUNTY  
PRODUCT CONTROL SECTION  
11805 SW 26 Street, Room 208  
Miami, Florida 33175-2474  
T (786) 315-2590 F (786) 315-2599

**NOTICE OF ACCEPTANCE (NOA)**

[www.miamidade.gov/pera/](http://www.miamidade.gov/pera/)

**DAB Door Company, Inc.**  
12195 NW 98<sup>th</sup> Avenue  
Hialeah Gardens, FL 33018

**SCOPE:** This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed and accepted by Miami-Dade County PERA -Product Control Section 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 Section (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. PERA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Section 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: Hurricane Master® Model 824/811 Steel Sectional Garage Door 16'-2" Wide x 16'-0" High (Reinforced) with Window Lite Option**

**APPROVAL DOCUMENT:** Drawing No. 98-05, titled "24 GA. Roll Formed Steel Sectional Garage Door", dated 02/23/1998, with last revision H dated 10/13/2011, sheets 1 through 6 of 6, prepared by Al-Farooq Corporation, signed and sealed by Javad Ahmad, P.E., bearing the Miami-Dade County Product Control revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Section.

**MISSILE IMPACT RATING: Large and Small Missile Impact Resistant**

**LABELING:** A permanent label with the manufacturer's name or logo, manufacturing address, model/series number, the positive and negative design pressure rating, indicate impact rated if applicable, installation instruction drawing reference number, approval number (NOA), the applicable test standards, and the statement reading 'Miami-Dade County Product Control Approved' is to be located on the door's side track, bottom angle, or inner surface of a 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 revises NOA # 11-0414.13 and consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by Carlos M. Utrera, P.E.



*[Signature]*  
02/22/2012

NOA No. 12-0110.08  
Expiration Date: July 21, 2015  
Approval Date: March 1, 2012  
Page 1

**NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**

**A. DRAWINGS**

1. Drawing No. **98-05**, titled "24 GA. Roll Formed Steel Sectional Garage Door", dated 02/23/1998, with last revision H dated 10/13/2011, sheets 1 through 6 of 6, prepared by Al-Farooq Corporation, signed and sealed by Javad Ahmad, P.E.

**B. TESTS "Submitted under NOA # 11-0414.13"**

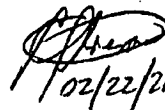
1. Test Report on Uniform Static Air Pressure Test, Loading and Forced Entry Test per FBC, TAS 202-94, of "DAB 824 Sectional Residential Garage Door" prepared by Hurricane Engineering & Testing Inc., Report No. **HETI-07-4267**, dated 06/29/2007, signed and sealed by Candido F. Font, P.E.
2. Test Report on Large Missile Impact Test per FBC, TAS 201-94 and Cyclic Wind Pressure Test per FBC, TAS 203-94, of "DAB 824 Sectional Residential Garage Door", prepared by Hurricane Engineering & Testing Inc., Report No. **HETI-11-3206**, dated 02/10/2011, signed and sealed by Candido F. Font, P.E.
3. Test Report on Tensile Test per ASTM E8-08 of "Sectional Residential Door (skin)", prepared by Hurricane Engineering & Testing Inc, Report No. **HETI-11-T101**, dated 01/29/2011, signed and sealed by Candido F. Font, P.E.

**"Submitted under NOA # 05-0217.02"**

4. Test Report on Large Missile Impact Test and Cyclic Wind Pressure Test, of "Sectional Residential Door with Windows" prepared by Hurricane Engineering & Testing Inc., Test Report No. **HETI 03-1328**, dated 07/15/2003, signed and sealed by Rafael E. Droz-Seda, PE.
5. Test Report on Uniform Static Air Pressure Test, of "Sectional Residential Door" prepared by Hurricane Engineering & Testing Inc., Test Report No. **HETI 03-1329**, dated 07/15/2003 signed and sealed by Rafael E. Droz-Seda, P.E.
6. Test Report on Tensile Test per ASTM E-8 of "Sectional Residential Door (skin)" prepared by Hurricane Engineering & Testing Inc, Test Report No. **HETI 03-T078**, dated 10/31/2003, signed and sealed by Rafael E. Droz-Seda, P.E.

**"Submitted under NOA # 03-0210.04"**

7. Test report on Salt Spray (Corrosion) Test per ASTM B 117 of a painted G-40 steel panels, prepared by Celotex Corporation, Test Report No. **258592**, dated 08/17/1998, signed by W. A. Jackson, P.E.

  
02/22/2012

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Carlos M. Utrera, P.E.  
Product Control Examiner  
NOA No. 12-0110.08  
Expiration Date: July 21, 2015  
Approval Date: March 1, 2012

**NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**

**C. CALCULATIONS**

1. Anchor verification calculations prepared by Al-Farooq Corporation, complying with F.B.C 2007, dated 04/05/2011, signed and sealed by Javad Ahmad, P.E.

*"Submitted under NOA # 09-0128.01"*

2. Anchor verification calculations prepared by Al-Farooq Corporation, complying with F.B.C 2007, dated 12/18/2008, signed and sealed by Humayoun Farooq, P.E.

**D. QUALITY ASSURANCE**

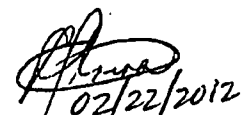
1. Miami-Dade Department of Permitting, Environment, and Regulatory Affairs (PERA)

**E. MATERIAL CERTIFICATIONS**

1. Notice of Acceptance No. **08-0305.02**, issued to SABIC Innovative Plastics, for their Lexan Sheet Products, approved on 04/24/2008 and expiring on 07/17/2013.
2. Notice of Acceptance No. **07-1016.07**, issued to Insulfoam, LLC, for their Insulfoam Expanded Polystyrene Insulation, approved on 11/29/2007 and expiring on 11/29/2012.
3. Notice of Acceptance No. **11-0926.07**, issued to Dyplast Products, LLC, for their Expanded Polystyrene Block Type Insulation, approved on 11/10/2011 and expiring on 01/11/2017.
4. Notice of Acceptance No. **11-0926.06**, issued to Dyplast Products, LLC, for their Dyplast ISO-C1 Polyisocyanurate Insulation, approved on 11/10/2011 and expiring on 01/11/2017.

**F. STATEMENTS**

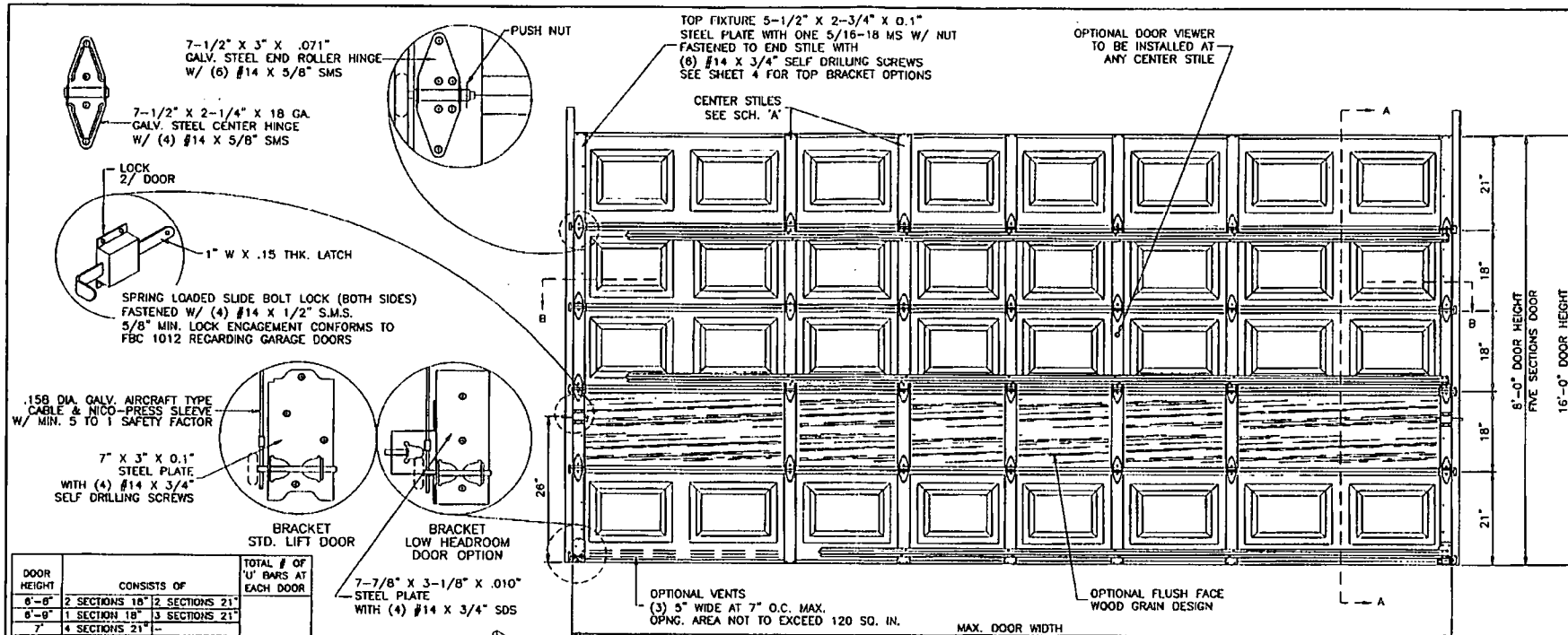
1. Statement letter of code conformance to FBC 2010 and no financial interest issued by Al-Farooq Corporation, dated 10/25/2011, signed and sealed by Javad Ahmad, P.E.



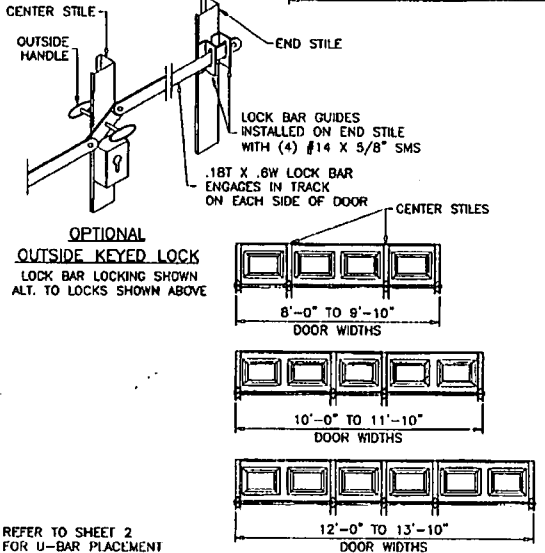
02/22/2012

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Carlos M. Utrera, P.E.  
Product Control Examiner  
NOA No. 12-0110.08  
Expiration Date: July 21, 2015  
Approval Date: March 1, 2012



DOOR HEIGHT	CONSISTS OF		TOTAL # OF U-BARS AT EACH DOOR
6'-0"	2 SECTIONS 18"	2 SECTIONS 21"	3
6'-9"	1 SECTION 18"	3 SECTIONS 21"	
7'	4 SECTIONS 21"	-	
7'-3"	3 SECTIONS 18"	-	4
7'-9"	4 SECTIONS 18"	1 SECTION 21"	
8'	3 SECTIONS 18"	2 SECTIONS 21"	
8'-3"	2 SECTIONS 18"	3 SECTIONS 21"	5
8'-6"	1 SECTION 18"	4 SECTIONS 21"	
8'-9"	5 SECTIONS 21"	-	
9'	6 SECTIONS 18"	-	6
9'-3"	5 SECTIONS 18"	1 SECTION 21"	
9'-6"	4 SECTIONS 18"	2 SECTIONS 21"	
9'-9"	3 SECTIONS 18"	3 SECTIONS 21"	7
10'	2 SECTIONS 18"	4 SECTIONS 21"	
10'-3"	1 SECTION 18"	5 SECTIONS 21"	
10'-6"	6 SECTIONS 21"	-	8
10'-9"	6 SECTIONS 18"	1 SECTION 21"	
11'	5 SECTIONS 18"	2 SECTIONS 21"	
11'-3"	4 SECTIONS 18"	3 SECTIONS 21"	9
11'-6"	3 SECTIONS 18"	4 SECTIONS 21"	
11'-9"	2 SECTIONS 18"	5 SECTIONS 21"	
12'	1 SECTION 18"	6 SECTIONS 21"	10
12'-3"	7 SECTIONS 21"	-	
12'-6"	6 SECTIONS 18"	2 SECTIONS 21"	
12'-9"	5 SECTIONS 18"	3 SECTIONS 21"	11
13'	4 SECTIONS 18"	4 SECTIONS 21"	
13'-3"	3 SECTIONS 18"	5 SECTIONS 21"	
13'-6"	2 SECTIONS 18"	6 SECTIONS 21"	12
13'-9"	1 SECTION 18"	7 SECTIONS 21"	
14'	8 SECTIONS 21"	-	
14'-3"	8 SECTIONS 18"	3 SECTIONS 21"	13
14'-6"	5 SECTIONS 18"	4 SECTIONS 21"	
14'-9"	4 SECTIONS 18"	5 SECTIONS 21"	
15'	3 SECTIONS 18"	6 SECTIONS 21"	14
15'-3"	2 SECTIONS 18"	7 SECTIONS 21"	
15'-6"	1 SECTION 18"	8 SECTIONS 21"	
15'-9"	9 SECTIONS 21"	-	15
16'	8 SECTIONS 18"	4 SECTIONS 21"	



THIS PRODUCT IS RATED FOR LARGE MISSILE IMPACT

DESIGN PRESSURE RATING: 1450 LESP

GENERAL NOTES

- THIS PRODUCT HAS BEEN DESIGNED AND TESTED TO COMPLY WITH THE REQUIREMENTS OF THE FLORIDA BUILDING CODE 2010 EDITION INCLUDING HIGH VELOCITY HURRICANE ZONE.
- ANCHORS SHALL BE AS LISTED, SPACED AS SHOWN ON DETAILS. ANCHOR EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO.
- ALL BOLTS, NUTS AND WASHERS SHALL BE ZINC PLATED CARBON STEEL.
- ANCHORING OR LOADING CONDITIONS OTHER THAN THOSE SHOWN IN THESE DETAILS ARE NOT PART OF THIS APPROVAL.
- A LOAD DURATION INCREASE IS USED IN DESIGN OF ANCHORS INTO WOOD ONLY.

SCHEDULE 'A'

CENTER STILES CONFIGURATION	
DOOR WIDTHS	# OF CENTER STILES
8'-0" TO 9'-10"	2
10'-0" TO 11'-10"	2
12'-0" TO 13'-10"	3
14'-0" TO 15'-10"	4
15'-11" TO 16'-2"	5

REFER TO SHEET 2 FOR U-BAR PLACEMENT

**DAB DOORS INC.**  
Hurricane Master® Model B24/B11  
Max. Size 16'-2" X 16'-0" High  
With Window Lite Option

Engr. **UNAIQ AHMAD**  
CIVIL  
FLA. P.E. # 70502  
C.A.N. 3538

**PRODUCT REVISED**  
-as complying with the Florida Building Code  
-Acceptance No. 12-0110.08  
Expiration Date 07/21/2015

By *[Signature]*  
Miami Gate Product Control

NOV 07 2011

**afC**

**AL-FAROQ CORPORATION**  
ENGINEERS & PRODUCT DEVELOPMENT  
1235 S.W. 87 AVE  
MIAMI, FLORIDA 33174  
TEL (305) 264-8100 FAX (305) 262-6078  
GARAGE\98-05DAB

24 GA. ROLL FORMED STEEL SECTIONAL GARAGE DR.

**DAB DOORS INC.**  
12195 N.W. 98 TH. AVE.  
HALEAH GARDENS, FL 33018  
TEL. (305) 556 - 8624

Revisions:

NO	DATE	BY	DESCRIPTION
D	03.20.04	REV. PER BCCO COMMENTS	
E	12.10.08	UPDATED FOR 2007 FBC	
F	01.09.09	ENGR. MAKE CHANGED	
G	02.18.11	GENERAL REVISION	
H	10.13.11	UPDATED TO 2010 FBC	

date: 02-23-08  
scale: 1/2"=1'-0"  
dr. by: HAND  
chd. by:

drawing no. **98-05**  
sheet 1 of 6



SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

4 SECTION DOOR  
HEIGHT RANGE 6'-0" TO 7'-0"  
(3) U-BARS

SECTION 5				
SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

5 SECTION DOOR  
HEIGHT RANGE 7'-0" TO 8'-0"  
(3) U-BARS

SECTION 5				
SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

5 SECTION DOOR  
HEIGHT RANGE 8'-3" TO 9'-0"  
(4) U-BARS

SECTION 6				
SECTION 5				
SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

6 SECTION DOOR  
HEIGHT RANGE 9'-0" TO 10'-3"  
(4) U-BARS

SECTION 6				
SECTION 5				
SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

6 SECTION DOOR  
HEIGHT RANGE 10'-0"  
(5) U-BARS

SECTION 7				
SECTION 6				
SECTION 5				
SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

7 SECTION DOOR  
HEIGHT RANGE 10'-9" TO 12'-3"  
(5) U-BARS

SECTION 8				
SECTION 7				
SECTION 6				
SECTION 5				
SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

8 SECTION DOOR  
HEIGHT RANGE 12'-6" TO 13'-3"  
(5) U-BARS

SECTION 8				
SECTION 7				
SECTION 6				
SECTION 5				
SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

8 SECTION DOOR  
HEIGHT RANGE 13'-6" TO 14'-0"  
(6) U-BARS

SECTION 9				
SECTION 8				
SECTION 7				
SECTION 6				
SECTION 5				
SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

9 SECTION DOOR  
HEIGHT RANGE 14'-3" TO 15'-9"  
(6) U-BARS

SECTION 10				
SECTION 9				
SECTION 8				
SECTION 7				
SECTION 6				
SECTION 5				
SECTION 4				
SECTION 3				
SECTION 2				
SECTION 1				

10 SECTION DOOR  
HEIGHT RANGE 16'-0"  
(6) U-BARS

Engr: JAVAD AHMAD  
CIVIL  
FLA. REG. # 70592  
C.A.N. 3638  
NOV 07 2011

PRODUCT REVISED  
as complying with the Florida  
Building Code  
Acceptance No. 12-0112-08  
Expiration Date: 07/21/2015  
By: [Signature]  
Miami Code Product Control

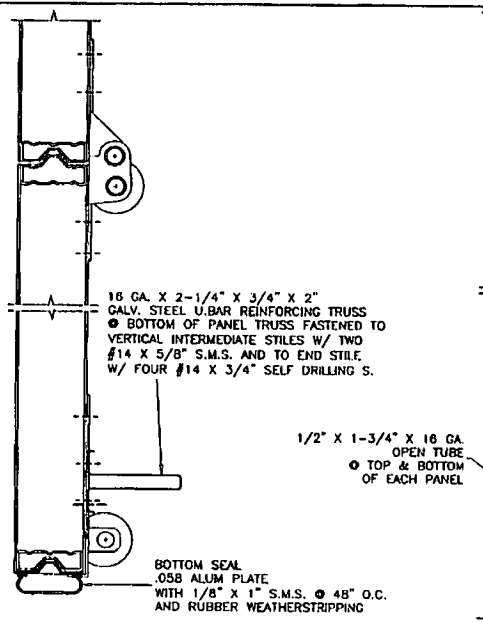
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**AL-FAROOQ CORPORATION**  
ENGINEERS & PRODUCT DEVELOPMENT  
5390 S.W. 87th Ave  
MIAMI, FLORIDA 33174  
TEL: (305) 264-8100 FAX: (305) 262-0978  
GARAGE 98-05DAB

24 GA. ROLL FORMED STEEL SECTIONAL GARAGE DR.  
**DAB DOORS INC.**  
12195 N.W. 98 TH. AVE.  
HIALEAH GARDENS, FL 33018  
TEL: (305) 556 - 6624

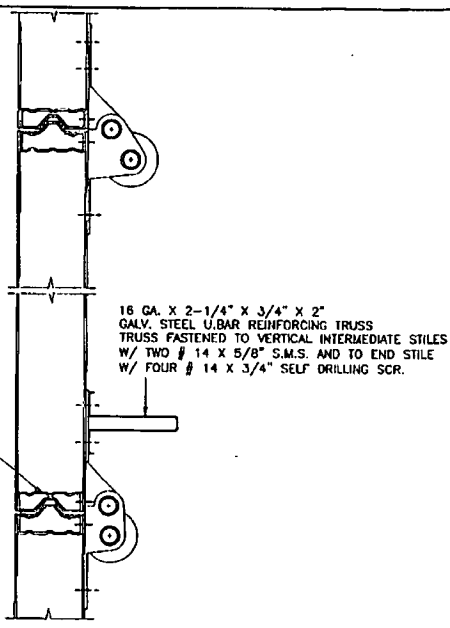
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	H	10.12.11		NO CHANGE THIS SHEET

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Dr. by: MAJID  
CHK. BY:

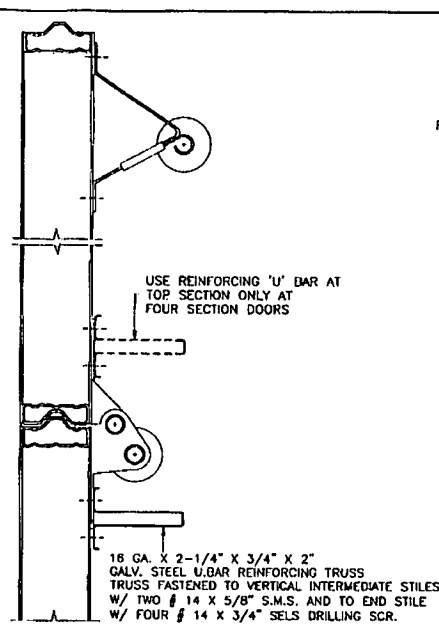
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**98-05**  
sheet 2 of 6



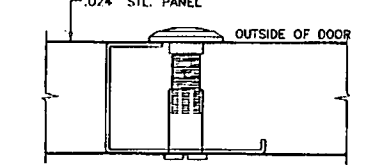
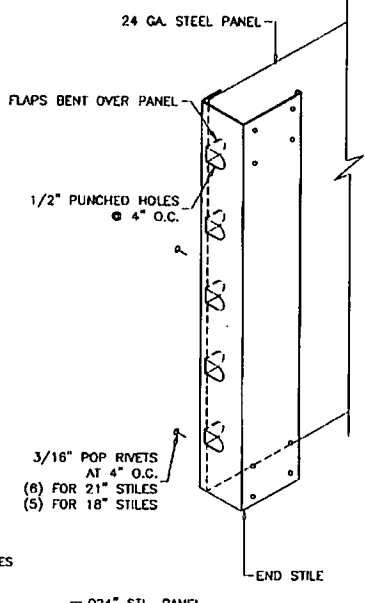
**1ST SECTION (BOTTOM)  
REINFORCING**



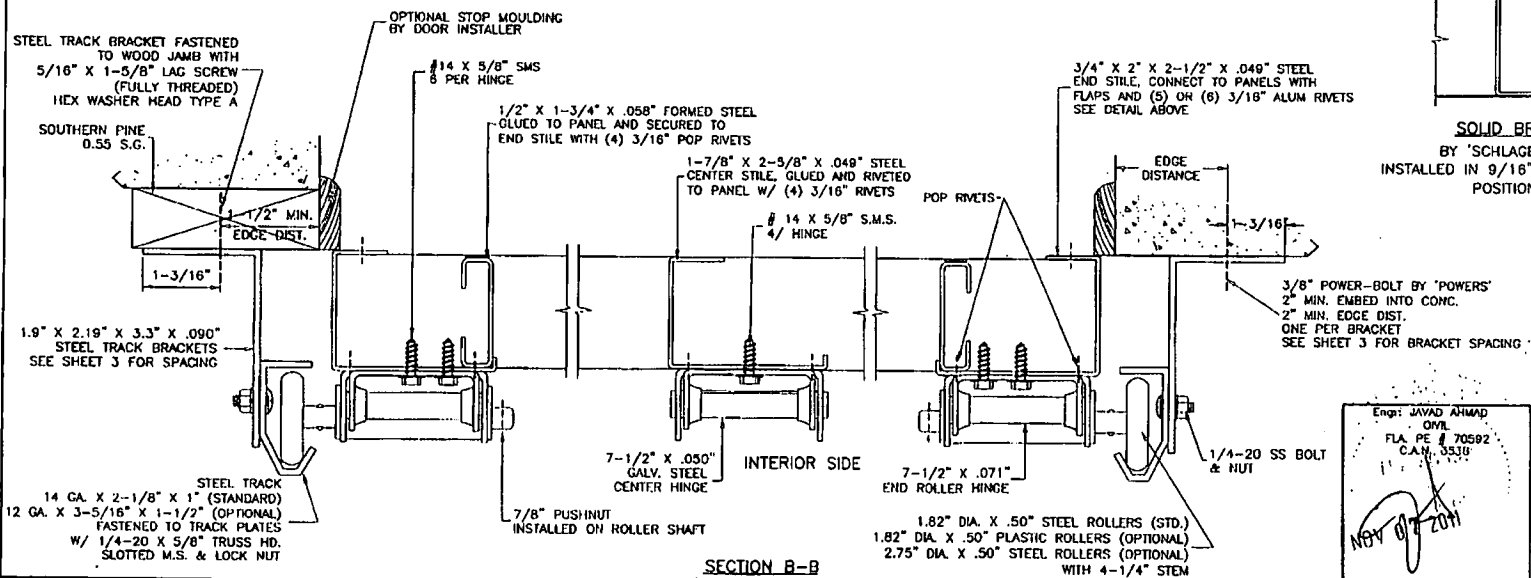
**INTERMEDIATE SECTIONS  
REINFORCING**



**TOP SECTION**



**SOLID BRASS DOOR VIEWER**  
BY 'SCHLAGE SECURITY HARDWARE'  
INSTALLED IN 9/16\"/>



**SECTION B-B**

Eng: JAVAD AHMAD  
OIVL  
FLA. PE # 70592  
C.A.N. 35310  
NOV 07 2011

**PRODUCT REVISED**  
as complying with the Florida  
Building Code  
Acceptance No. 12-0110-08  
Expiration Date 12/21/2015  
By: [Signature]  
Miami Code Product Control

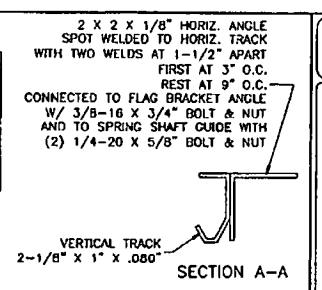
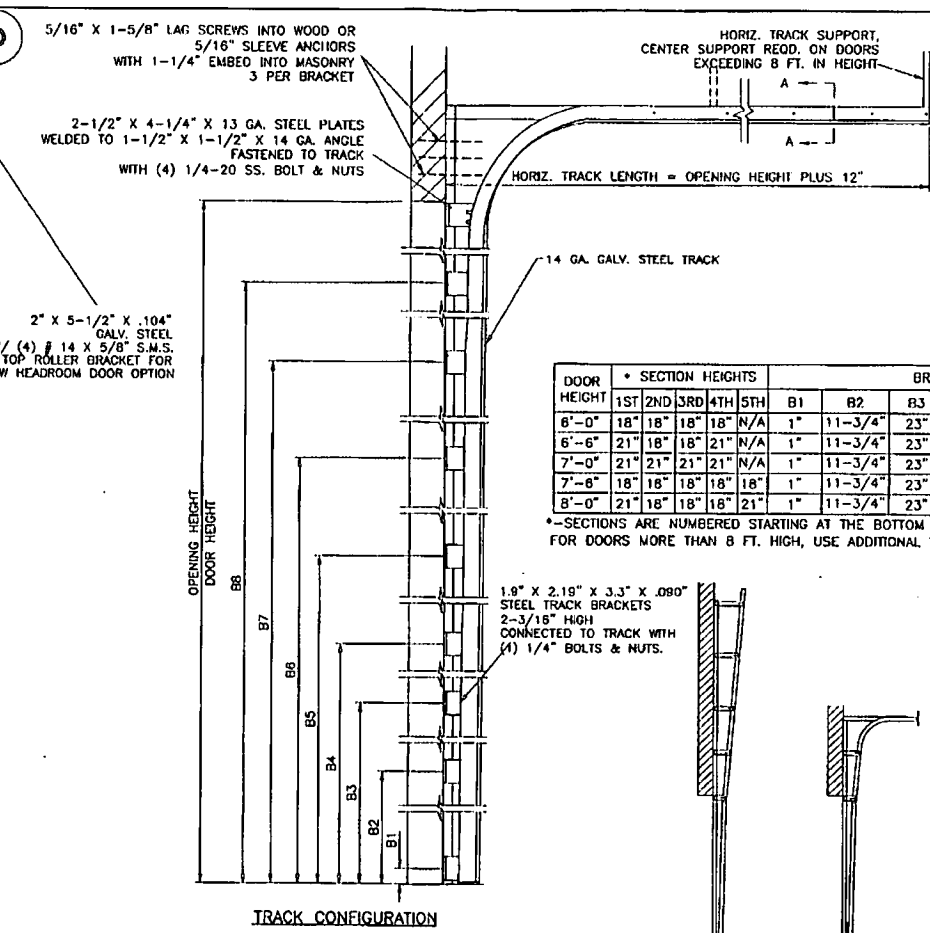
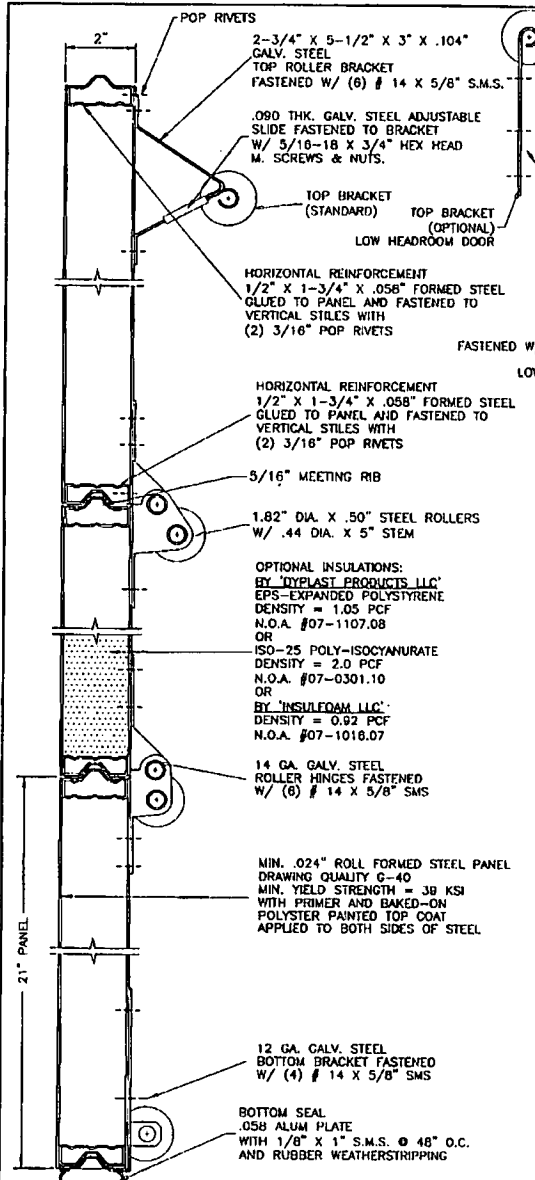
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**AL-FAROOG CORPORATION**  
ENGINEERS & PRODUCT DEVELOPMENT  
1338 S.W. 87 AVE.  
MIAMI, FLORIDA 33174  
TEL: (305) 264-8100 FAX: (305) 262-6878  
GARAGE 98-05DAB

24 GA. ROLL FORMED STEEL SECTIONAL GARAGE DR  
**DAB DOORS INC.**  
12195 N.W. 98 TH. AVE.  
HIALEAH GARDENS, FL. 33018  
TEL: (305) 566 - 8624

REV. NO.	DATE	BY	DESCRIPTION
D	10-20-03	REV. PER BIDD COMMENTS	
E	2-10-08	UPDATED FOR 2007 FCC	
F	01-08-10	ENGR. NAME CHANGED	
G	02-18-11	GENERAL REVISION	
H	10-13-11	NO CHANGE THIS SHEET	

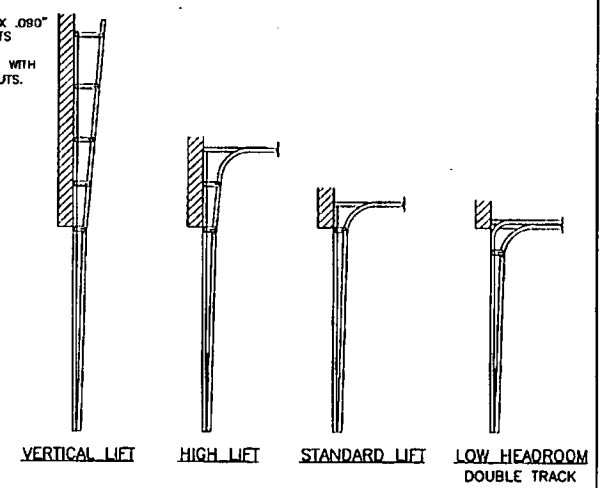
date: 02-23-98  
scale: -  
dr. by: JAVAD  
chk. by:

drawing no.  
**98-05**  
sheet 3 of 6



DOOR HEIGHT	SECTION HEIGHTS					BRACKET PLACEMENTS							
	1ST	2ND	3RD	4TH	5TH	B1	B2	B3	B4	B5	B6	B7	B8
6'-0"	18"	18"	18"	18"	N/A	1"	11-3/4"	23"	34"	45"	56"	67"	-
6'-6"	21"	18"	18"	18"	N/A	1"	11-3/4"	23"	34"	45"	56"	67"	-
7'-0"	21"	21"	21"	21"	N/A	1"	11-3/4"	23"	34"	45"	56"	67"	-
7'-6"	18"	18"	18"	18"	18"	1"	11-3/4"	23"	34"	45"	56"	67"	78-1/4"
8'-0"	21"	18"	18"	18"	21"	1"	11-3/4"	23"	34"	45"	56"	67"	78-1/4"

\*-SECTIONS ARE NUMBERED STARTING AT THE BOTTOM FOR DOORS MORE THAN 8 FT. HIGH, USE ADDITIONAL TRACK BRACKETS AT 10" O.C.



Engr: JAVAD AHMAD  
CML  
FLA. PE # 70592  
C.A.N. 3538

07 2011

PRODUCT REVISED as complying with the Florida Building Code  
Acceptance No. 12-0119-09  
Expiration Date 07/21/2015

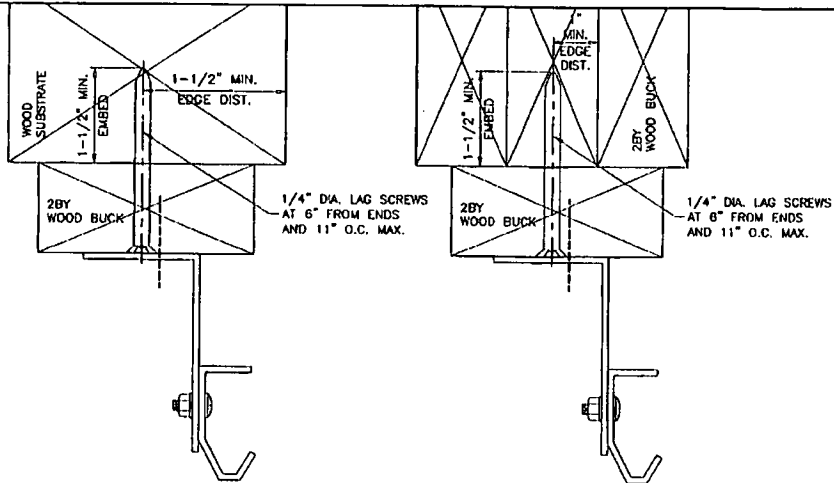
By: [Signature]  
Miami Trade Product Control

**AL-FAROQ CORPORATION**  
ENGINEERS & PRODUCT DEVELOPMENT  
12335 S.W. 87 AVE  
MIAMI, FLORIDA 33174  
TEL: (305) 264-8100 FAX: (305) 262-8878  
GARAGE 98-05(DWG)

24 GA. ROLL FORMED STEEL SECTIONAL GARAGE DR.  
**DAB DOORS INC.**  
12195 N.W. 98 TH. AVE.  
HIALEAH GARDENS, FL 33018  
TEL. (305) 556 - 6624

REVISED	BY	DATE	REASON
D	05/10/06	REV. PER BICO COMMENTS	
E	12/10/06	UPDATED FOR 2007 FBC	
F	01/03/08	ENGR. NAME CHANGED	
G	02/18/11	GENERAL REVISION	
H	10/13/11	NO CHANGE THIS SHEET	

date: 02-23-08  
scale: -  
dr. by: JAVD  
chk. by:  
drawing no. 98-05  
sheet 4 of 6



WOOD BUCK CONNECTION TO WOOD SUBSTRATE

**WOOD FRAME BUILDINGS**

STUD WALLS OR DOOR OPENING (NOT BY DAB DOORS) SHALL BE FRAMED SOLID BY NOT LESS THAN (3) 2X8 PRESSURE TREATED GRADE 2 SYP OR BETTER WOOD STUDS. STUD WALLS TO BE CONT. FROM FOOTING TO THE BEAM. ENGINEER OF RECORD TO VERIFY ADEQUACY OF THE SUPPORTING STRUCTURE.

**WOOD BUCK CONNECTION TO MASONRY**

TRACK SHALL BE SECURED WITH CONT. STEEL ANGLE TO PRESSURE TREATED 2X8 SYP WOOD JAMBS WHICH SHALL BE ANCHORED TO GROUTED REINFORCED MASONRY BLOCK WALL OR CONC. COLUMN WITH

1/4" ULTRACON BY 'ELCO' WITH SPACING OF 12" O.C. INTO BLOCK WALL, WITH 2-1/4" MIN. EMBED 9" O.C. INTO 3000 PSI CONCRETE, WITH 1-3/4" MIN. EMBED 2-1/2" MIN. EDGE DISTANCE

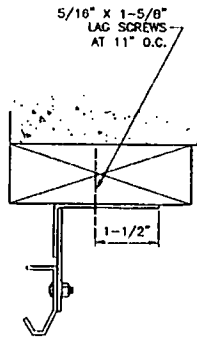
1/4" TAPPER BY 'POWERS' WITH SPACING OF 8" O.C. INTO BLOCK WALL, WITH 1-1/2" MIN. EMBED 9" O.C. INTO 3000 PSI CONCRETE, WITH 1-3/4" MIN. EMBED 3" MIN. EDGE DISTANCE

3/8" CONFLX BY 'ELCO' OR 3/8" LDT BY 'ITW' WITH SPACING OF 21" O.C. INTO 3000 PSI CONCRETE, WITH 2-1/2" MIN. EMBED 3" MIN. EDGE DISTANCE

3/8" HLC SLEEVE BY 'HILTI' WITH SPACING OF 10" O.C. INTO BLOCK WALL, WITH 1-1/4" MIN. EMBED, 4" MIN. EDGE DIST. 11" O.C. INTO 3000 PSI CONCRETE, WITH 1-1/4" MIN. EMBED AND 2-1/2" MIN. EDGE DISTANCE

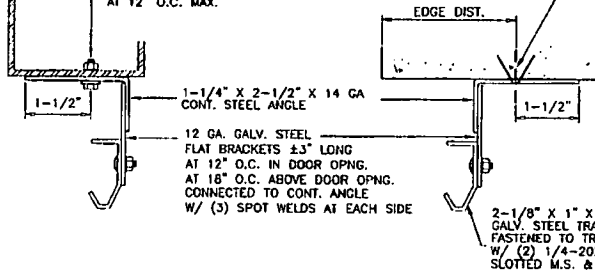
THE BLOCK WALL CELLS SHALL BE GROUT FILLED AND REINFORCED WITH FOUR # 5 BARS EXTENDING INTO FOOTING AND INTO TIE BEAMS ALL BARS SHALL BE CONTINUOUS FROM TIE BEAMS TO FOOTING.

**PREPARATION OF JAMBS BY OTHERS**



STEEL STRUCTURE BY OTHERS MUST SUPPORT THE LOADS IMPOSED BY DOOR SYSTEM

5/16" DIA. BOLTS WITH WASHER & NUT AT 12" O.C. MAX.



ANCHORS	ANCHOR SPACING		
	STRUCTURE	EMBED	SPACING EDGE DIST.
3/8" HLC SLEEVE BY 'HILTI'	CONC.	1-1/4"	8" 2"
3/8" HLC SLEEVE BY 'HILTI'	FILLED BLOCK	1-1/4"	8" 4"
3/8" DYNABOLT BY 'ITW'	CONC.	1-1/2"	8" 3"
1/2" DYNABOLT BY 'ITW'	FILLED BLOCK	1-7/8"	8" 4"
3/8" POWER-BOLT BY 'POWERS'	CONC.	2"	8" 2"
3/8" SLEEVE-ALL BY 'SIMPSONS'	CONC.	1-1/2"	8" 3"

CONCRETE f'c = 3000 PSI MIN.  
C-90 GROUT FILLED BLOCK f'm = 2000 PSI MIN.

ALTERNATE TRACK INSTALLATION

Engr: SAHAD AHMAD  
CIVIL  
FLA. PE # 75692  
(P.A.# 3530)  
NOV 07 2011

PRODUCT REVISED as complying with the Florida Building Code  
Acceptance No. 12-0119,08  
Expiration Date 07/21/2015  
By: [Signature]  
Miami, FL Product Control

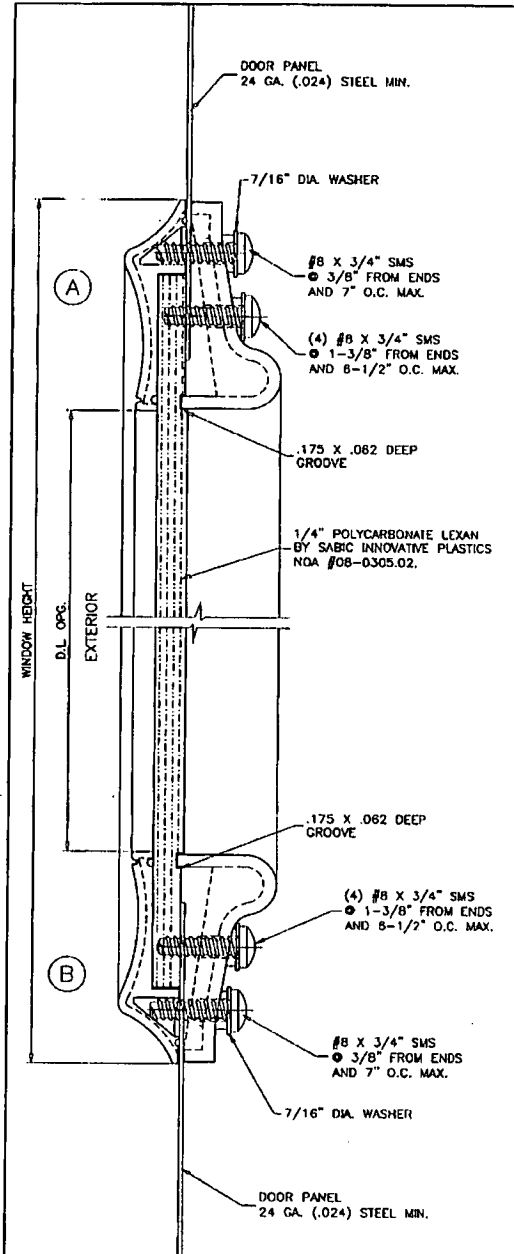


**AL-FAROOQ CORPORATION**  
ENGINEERS & PRODUCT DEVELOPMENT  
1335 S.W. 87 AVE  
MIAMI, FLORIDA 33174  
TEL (305) 264-8100 FAX (305) 262-0978  
GARAGE 98-05DAB

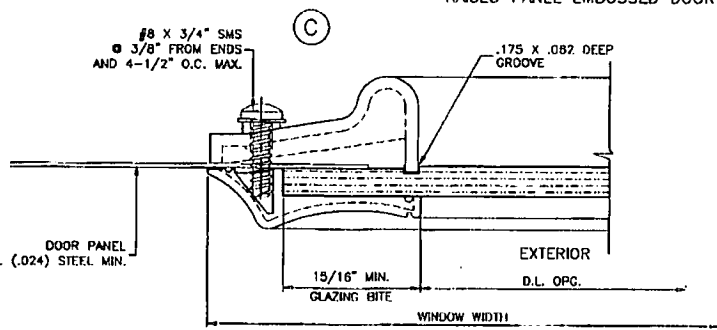
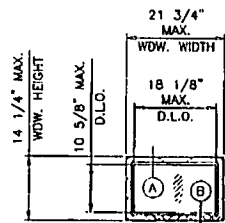
24 GA. ROLL FORMED STEEL SECTIONAL GARAGE DR.  
**DAB DOORS INC.**  
12195 N.W. 98 TH. AVE.  
HALEAH GARDENS, FL 33018  
TEL. (305) 556 - 6624

REV.	DATE	DESCRIPTION
1	05.20.08	REV. PER BIDD COMMENTS
2	12.10.08	UPDATED FOR 2007 FBC
3	01.08.10	ENGR. NAME CHANGED
4	02.16.11	GENERAL REVISION
5	10.13.11	NO CHANGE THIS SHEET

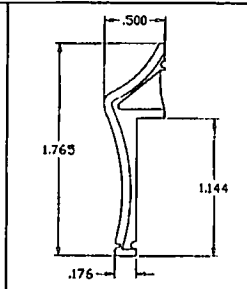
date: 02-23-08  
scale: -  
dr. by: HAMD  
chk. by:  
drawing no. 98-05  
sheet 5 of 6



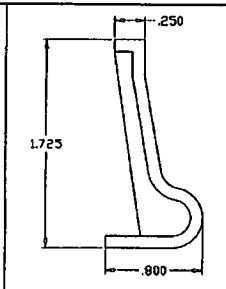
OPTIONAL WINDOW LITES IN ANY LOCATION



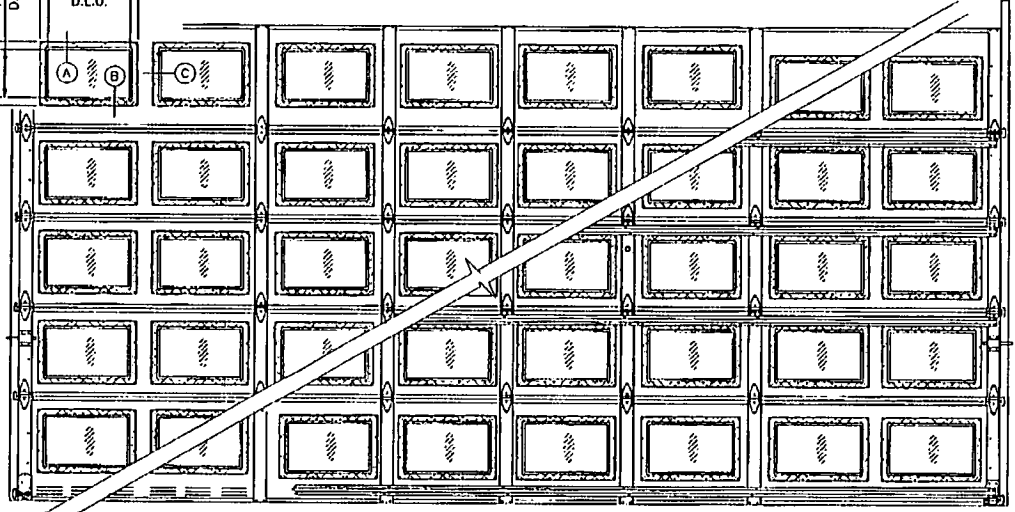
\* PLASTIC COMPLIES WITH SECTION 2612 OF FBC 2007 SEE EVIDENCE PAGE



\* EXTERIOR FRAME  
RIGID PVC ONE PIECE INJECTION



\* INTERIOR FRAME  
RIGID PVC ONE PIECE INJECTION



INSIDE ELEVATION  
RAISED PANEL EMBOSSED DOOR WITH WINDOWS

Engr. JAVAD AHMAD  
CIVIL  
FLA. PE # 70592  
C.A.N. 3530

NOV 07 2011

PRODUCT REVISED  
as complying with the Florida  
Building Code  
Acceptance No. 12-919.08  
Expiration Date 07/27/2015

By *[Signature]*  
Miami Under Product Control

**afC**

**AL-FAROQ CORPORATION**  
ENGINEERS & PRODUCT DEVELOPMENT  
1336 S.W. 87 AVE  
MIAMI, FLORIDA 33174  
TEL. (305) 264-9100 FAX. (305) 263-6978  
GARAGE\98-05DAB

24 GA. ROLL FORMED STEEL SECTIONAL GARAGE DR.

**DAB DOORS INC.**  
12195 N.W. 98 TH. AVE.  
HIALEAH GARDENS, FL. 33018  
TEL. (305) 556 - 6624

NO	DATE	BY	DESCRIPTION
D	05.20.08	REV. PER BCCO COMMENTS	
E	12.10.08	UPDATED FOR 2007 FBC	
F	01.06.10	ENGR. NAME CHANGED	
G	02.6.11	NO CHANGE THIS SHEET	
H	10.13.11	NO CHANGE THIS SHEET	

date: 02-23-98

scale: -

dr. by: HAMD

chk. by:

drawing. no.  
**98-05**

sheet 6 of 6

# TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri 2/20 -14 Page      of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10741	ALDRICH	Progress		
	550 Ridgeview	Roof in	Pass	
	STOUTER Roofing	Progress		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10759	Chapman	Final		716-310-6663
	11 Palm Rd	Garage door	Pass	<del>716-310-6663</del>
	D & D Garage Door			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
		Footers		
	73 N. River	SIGHT VISIT		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR



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

## BUILDING PERMIT CARD

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

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	10786	DATE ISSUED:	02/28/2014
SCOPE OF WORK:	FENCE		
CONTRACTOR:	STUART FENCE COMPANY		
PARCEL CONTROL NUMBER:	133841005000001109	SUBDIVISION	PALM ROW
CONSTRUCTION ADDRESS:	11 PALM ROAD		
OWNER NAME:	ROBERT CHAPMAN		
QUALIFIER:	CHESTER RICHMOND	CONTACT PHONE NUMBER:	772 288-1151

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

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

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

### INSPECTIONS

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

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



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

### BUILDING PERMIT RECEIPT

PERMIT NUMBER:	10786
ADDRESS	11 PALM ROAD
DATE 02/28/2014	SCOPE OF WORK FENCE

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$	
Total square feet air-conditioned space: (@ \$121.75 per sq. ft.)		s.f.	
Total square feet non-conditioned space, or interior remodel: (@ \$59.81 per sq. ft.)		s.f.	
Total square feet remodel with new trusses: @ \$90.78 per sq. ft.		\$	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$100 per insp.)			
Total number of inspections (Value < \$200K)@\$100ea		\$	
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	
Road impact assessment: (.04% of construction value - \$5 min.)			
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		\$	

ACCESSORY PERMIT	Declared Value:	\$	1,545.00
Total number of inspections @ \$100.00 each	1		100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	109.00

Pa 3/3/14  
 CK1176



# Town of Sewall's Point

## BUILDING PERMIT APPLICATION

Date: \_\_\_\_\_ Permit Number: 10786

OWNER/LESSEE NAME: Robert Chapman Phone (Day) \_\_\_\_\_ (Fax) \_\_\_\_\_  
 Job Site Address: 11 Palm Road City: Stuart State: FL Zip: 34996  
 Legal Description: Palm Row Revico D<sup>3</sup> Amended Lot 11 Parcel Control Number: 13-38-41-005-000-00110-9  
 Fee Simple Holder Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**\*SCOPE OF WORK (PLEASE BE SPECIFIC):** FENCE

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

**COST AND VALUES:** (Required on ALL permit applications)  
 Estimated Value of Improvements: \$ 1545.00  
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
 Is subject property located in flood hazard area? VE10: \_\_\_\_\_ AE9: \_\_\_\_\_ AE8: X  
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
 Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
 (Fair Market Value of the Primary Structure only, Minus the land value)  
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Stuart Fence Company Phone: 288-1151 Fax: 288-3035  
 Qualifiers name: Chester J. Richmond Street: PO Box 2636 City: Stuart State: FL Zip: 34996  
 State License Number: \_\_\_\_\_ OR: Municipality: \_\_\_\_\_ License Number: MC CFE 3584

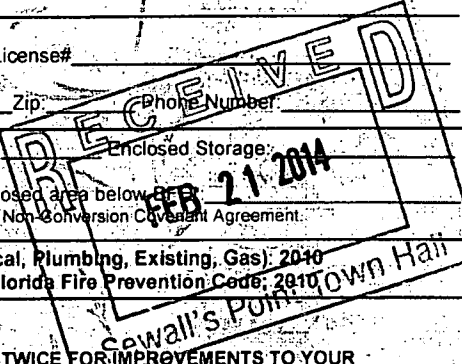
LOCAL CONTACT: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 DESIGN PROFESSIONAL: \_\_\_\_\_ Fla. License# \_\_\_\_\_  
 Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas) 2010  
 National Electrical Code 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

**WARNINGS TO OWNERS AND CONTRACTORS:**

- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - 5.

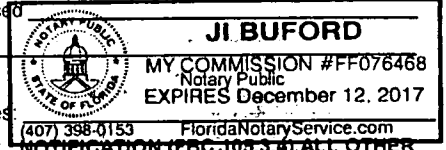


**\*\*\*\*\* A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS \*\*\*\*\***

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

OWNER / AGENT / LESSEE - NOTARIZED SIGNATURE:  
 X \_\_\_\_\_  
 State of Florida, County of: \_\_\_\_\_  
 On This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
 by \_\_\_\_\_ who is personally  
 known to me or produced \_\_\_\_\_  
 As identification, \_\_\_\_\_  
 Notary Public  
 My Commission Expires: \_\_\_\_\_

CONTRACTOR / LICENSEE NOTARIZED SIGNATURE:  
 X \_\_\_\_\_  
 State of Florida, County of: Martin  
 On This the 21<sup>st</sup> day of February, 2014  
 by Chester J. Richmond who is personally  
 known to me or produced \_\_\_\_\_  
 As identification, \_\_\_\_\_  
 My Commission Expires: \_\_\_\_\_



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

# STUART FENCE COMPANY, INC.

(772) 288-1151

Fax (772) 288-3035

# OFE3584

LICENSED & INSURED  
BONDED

## PROPOSAL - CONTRACT

P.O. Box 24747  
Stuart, FL 34996

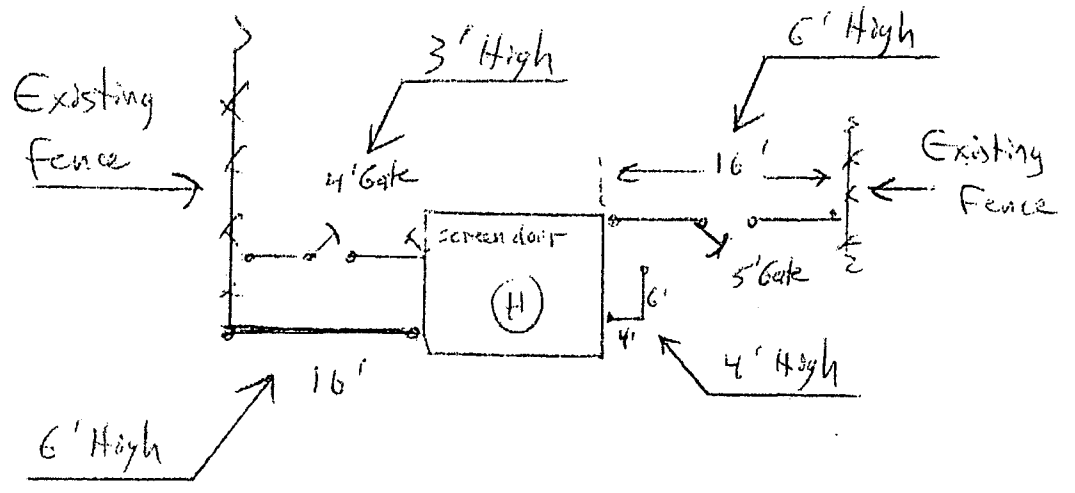
DATE 2/12/14

ZIP 34996

CUSTOMER NAME: BOB CHAPMAN  
 ADDRESS: 11 PALM RD  
 CITY: STUART STATE: FL  
 BUSINESS PHONE: \_\_\_\_\_ FAX #: \_\_\_\_\_  
 MOBIL/BEEPER#: 716-310-6663  
 PERMIT CLEAR:  YES SURVEY: PILOTBOB3@AOL.COM  
 TOTAL FOOTAGE: AS NOTED

~~CHAIN LINK~~  
 FENCE TYPE \_\_\_\_\_  
 RUP RAIL \_\_\_\_\_  
 LINE POST \_\_\_\_\_  
 CORNER POST \_\_\_\_\_  
 GATE POST \_\_\_\_\_  
 WALK GATE \_\_\_\_\_  
 B.D. GATE \_\_\_\_\_  
 WIRE GAUGE \_\_\_\_\_  
 TENSION WIRE \_\_\_\_\_  
**WOOD**  
 FENCE STYLE VSB  
 HEIGHT 4' & 6'  
 WOOD GRADE OUT  
 WALK GATES 1@4', 1@5'  
 B.D. GATES 0  
 LINE POSTS 4X4  
 GATE POSTS 4X4

FURNISH AND INSTALL 32 LF OF 6' HIGH PRESSURE TREATED WOOD VERTICAL SHADOWBOX FENCE WITH ONE 5' WIDE SINGLE GATE FOR LEFT FRONT, AND RIGHT SIDE OF HOUSE. FURNISH AND INSTALL 16 LF OF 3' HIGH PRESSURE TREATED WOOD VERTICAL SHADOWBOX FENCE WITH ONE 4' WIDE SINGLE GATE AT LEFT REAR OF HOUSE. FURNISH AND INSTALL 10 LF OF 4' HIGH PRESSURE TREATED WOOD VERTICAL SHADOWBOX FENCE FOR TRASH CAN ENCLOSURE ON RIGHT SIDE OF HOUSE. ALL POSTS SET IN CONCRETE. TOTAL INCLUDES ALL MATERIAL, LABOR & PERMIT FEES.



**SPECIAL INSTRUCTIONS:**

	OPTION "B"	PROPOSAL/CONTRACT SALE PRICE	OPTION "A"
FENCE STYLE		CONTRACT PRICE	1545
WALK GATES		PERMIT	Included
B.D. GATES		TOTAL	1545
POOL FENCE <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO		LESS DEPOSIT	214
		BALANCE DUE UPON COMPLETION	1331

BY ACCEPTANCE OF PROPOSAL - CONTRACT The above prices, specifications and Terms/Conditions shall be deemed satisfactory and are hereby accepted. Stuart Fence Company is authorized to do the work specified. Payment will be made as outlined above. Upon signing by Purchaser this becomes a binding contract.

CUSTOMER'S SIGNATURE: \_\_\_\_\_  
 SALES REP: Chat Nield  
 SEE REVERSE SIDE FOR WARRANTY INFORMATION

APPROVED AND ACCEPTED DATE \_\_\_\_\_

STUART FENCE COMPANY, INC. IS NOT RESPONSIBLE FOR DAMAGE TO UNMARKED IRRIGATION LINES

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

generated on 2/21/2014 10:22:46 AM EST

**Summary**

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
13-38-41-005-000-00110-9	27818	11 PALM RD, SEWALL'S POINT	\$332,670	2/15/2014

**Owner Information**

<b>Owner(Current)</b>	CHAPMAN ROBERT T
<b>Owner/Mail Address</b>	11 PALM RD STUART FL 34996
<b>Sale Date</b>	12/30/2013
<b>Document Book/Page</b>	2695 1395
<b>Document No.</b>	2433428
<b>Sale Price</b>	448000

**Location/Description**

<b>Account #</b>	27818	<b>Map Page No.</b>	SP-05
<b>Tax District</b>	2200	<b>Legal Description</b>	PALM ROW REVISED & AMENDED LOT 11
<b>Parcel Address</b>	11 PALM RD, SEWALL'S POINT		
<b>Acres</b>	0.3460		

**Parcel Type**

<b>Use Code</b>	0100 Single Family
<b>Neighborhood</b>	120200 Heritage P, Palmtto Pk,Rdglnd,

**Assessment Information**

<b>Market Land Value</b>	\$175,000
<b>Market Improvement Value</b>	\$157,670
<b>Market Total Value</b>	\$332,670

2013-2014

MARTIN COUNTY ORIGINAL BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR 3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994 (772) 288-5604

ACCOUNT 2004-518-0003 CERT CFE3584

PHONE (772)288-1151 SIC NO 238990

LOCATION: 3264 SE DIXIE HWY STU



CHARACTER COUNTS IN MARTIN COUNTY

PREV YR. \$ .00	LIC. FEE \$ 26.25
\$ .00	PENALTY \$ .00
\$ .00	COL. FEE \$ .00
\$ .00	TRANSFER \$ .00
TOTAL 26.25	

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

RICHMOND, CHESTER STUART FENCE COMPANY PO BOX 2636 STUART, FL 34995

29 DAY OF JULY 2013 AND ENDING SEPTEMBER 30, 2014

91 2012 03987.0001 26.25 PAID

2013-2014

MARTIN COUNTY ORIGINAL BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR 3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994 (772) 288-5604

ACCOUNT 2008-650-0972 CERT

PHONE (772)288-1151 SIC NO 238990

LOCATION: 3264 SE DIXIE AVE STU



CHARACTER COUNTS IN MARTIN COUNTY

PREV YR. \$ .00	LIC. FEE \$ 26.25
\$ .00	PENALTY \$ .00
\$ .00	COL. FEE \$ .00
\$ .00	TRANSFER \$ .00
TOTAL 26.25	

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

RICHMOND, CHESTER STUART FENCE RETAIL, P.O. BOX 2636 STUART, FL 34995

29 DAY OF JULY 2013 AND ENDING SEPTEMBER 30, 2014

91 2012 03987.0002 26.25 PAID

If you have any questions relating to the information in this letter, please contact the Martin County Contractor's Licensing Division of the Martin County Building Department.



MARTIN COUNTY, FLORIDA Contractor's Licensing Certificate of Competency

FENCE ERECTION - MC

License #: MCFE3584 Expires: 09/30/2014

RICHMOND, CHESTER J III STUART FENCE COMPANY INC P.O. BOX 2636 STUART, FL 34995



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/26/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

**PRODUCER**  
**RICK CARROLL INSURANCE AGENCY**  
 2160 NE Dixie Highway  
 PO Box 877  
 Jensen Beach FL 34958-0877

**INSURED**  
**Stuart Fence Company Inc. and Stuart Retail**  
 PO Box 2636  
 Stuart FL 34995

**CONTACT NAME:** Carla Green  
**PHONE (A/C No. Ext.):** (772) 334-3181 **FAX (A/C No.):** (772) 334-7742  
**E-MAIL ADDRESS:** carla@rickcarroll.com

INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A:	First National Ins Co of Amer	
INSURER B:	American States Insurance	19704
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

**COVERAGES** **CERTIFICATE NUMBER:** CL13122305768 **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		25CC1663017	8/18/2013	8/18/2014	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 200,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PROP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> AM: AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		01CH3769388	12/20/2013	12/20/2014	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Uninsured motorist combined \$ 100,000
	<input checked="" type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE OED <input checked="" type="checkbox"/> RETENTION \$ 10,000			01SU41496650	8/18/2013	8/18/2014
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 THIS CERTIFICATE IS FOR PROOF OF INSURANCE ONLY. GENERAL LIABILITY CONTAINS ADDITIONAL INSURED ENDORSEMENTS ON A PRIMARY/NON CONTRIBUTORY BASIS - AND A WAIVER OF SUBROGATION (TRANSFER OF RIGHTS) ENDT, SEE ATTACHED.

**CERTIFICATE HOLDER**

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Keith Carroll/DCH *Keith Carroll*

# CERTIFICATE OF LIABILITY INSURANCE

Date  
1/9/2014

**Producer:** Lion Insurance Company  
2739 U.S. Highway 19 N.  
Holiday, FL 34691  
(727) 938-5562

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:** South East Personnel Leasing, Inc. & Subsidiaries  
2739 U.S. Highway 19 N.  
Holiday, FL 34691

Insurers Affording Coverage		NAIC #
Insurer A:	Lion Insurance Company	11075
Insurer B:		
Insurer C:		
Insurer D:		
Insurer E:		

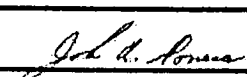
**Coverages**

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.

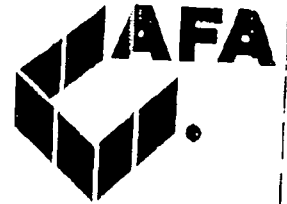
INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits									
		<b>GENERAL LIABILITY</b> <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur <hr/> General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence	\$								
						Damage to rented premises (EA occurrence)	\$								
						Med Exp	\$								
						Personal Adv Injury	\$								
						General Aggregate	\$								
						Products - Comp/Op Agg	\$								
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident)	\$								
						Bodily Injury (Per Person)	\$								
						Bodily Injury (Per Accident)	\$								
						Property Damage (Per Accident)	\$								
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made <input type="checkbox"/> Deductible				Each Occurrence									
						Aggregate									
A		<b>Workers Compensation and Employers' Liability</b> Any proprietor/partner/executive officer/member excluded? <b>NO</b> If Yes, describe under special provisions below.	WC 71949	01/01/2014	01/01/2015	X	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">WC Statutory Limits</td> <td style="width: 50%;">OTH-ER</td> </tr> <tr> <td>E.L. Each Accident</td> <td style="text-align: right;">\$1,000,000</td> </tr> <tr> <td>E.L. Disease - Ea Employee</td> <td style="text-align: right;">\$1,000,000</td> </tr> <tr> <td>E.L. Disease - Policy Limits</td> <td style="text-align: right;">\$1,000,000</td> </tr> </table>	WC Statutory Limits	OTH-ER	E.L. Each Accident	\$1,000,000	E.L. Disease - Ea Employee	\$1,000,000	E.L. Disease - Policy Limits	\$1,000,000
WC Statutory Limits	OTH-ER														
E.L. Each Accident	\$1,000,000														
E.L. Disease - Ea Employee	\$1,000,000														
E.L. Disease - Policy Limits	\$1,000,000														

Other Lion Insurance Company is A.M. Best Company rated A- (Excellent), AMB # 12616

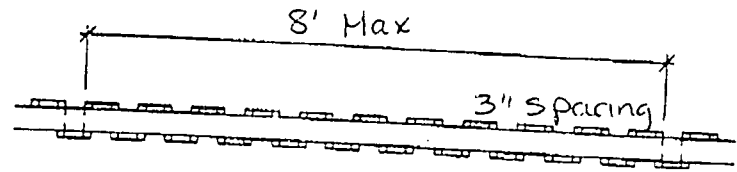
**Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions:** Client ID: 34-65-485  
 Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company":  
**Stuart Fence Company, Inc.**  
 Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries active employee(s), while working in: FL.  
 Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity.  
 A list of the active employee(s) leased to the Client Company can be obtained by faxing a request to (727) 937-2138 or by calling (727) 938-5562.  
**Project Name:**  
 ISSUE 1-09-14 (MT)

<b>CERTIFICATE HOLDER</b>	<b>CANCELLATION</b>
	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.
	

Begin Date 5/10/2004



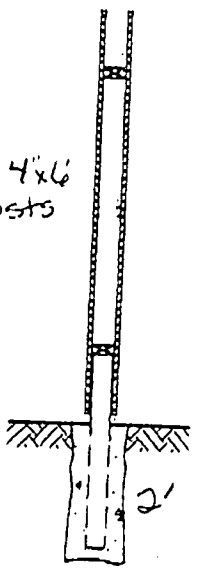
Pickets 1/2" x 6" x 3'



PLAN VIEW

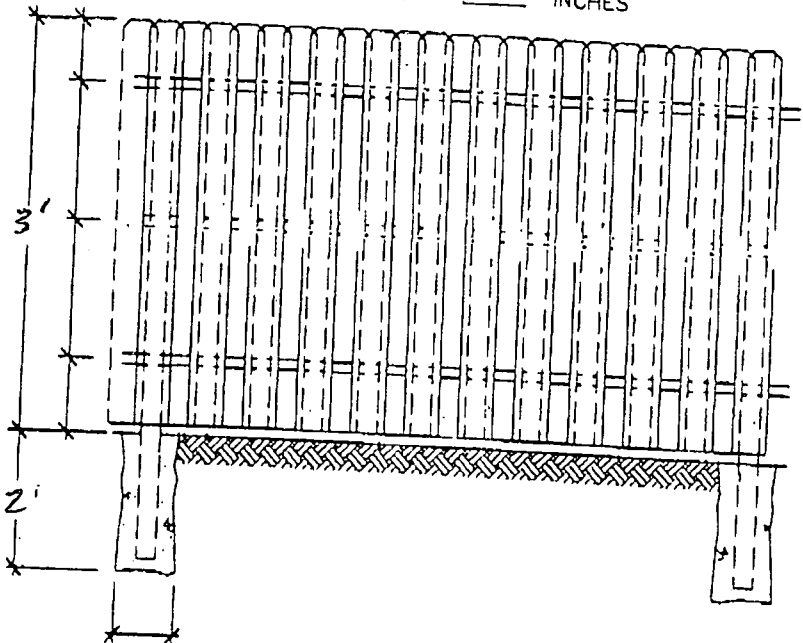
BOARD OVERLAP \_\_\_\_\_ INCHES

4" x 4" x 6'  
posts

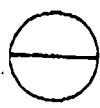


Post Holes 10"  
in diameter

SIDE VIEW



FRONT VIEW



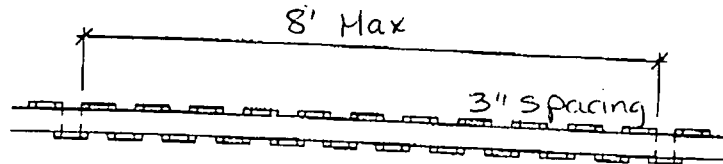
NOTES:

3' Vertical Shadow Box Fence Detail  
STYLE: DOG EARED (W-12)

SPECIFICATIONS		
COMPONENT	DIMENSIONS	MATERIAL
BACK RAILS	X X	
POSTS	X X	
PICKETS	X X	
FOOTING	DIA X DEEP	
NAILS/SCREWS		
TOP DESIGN		

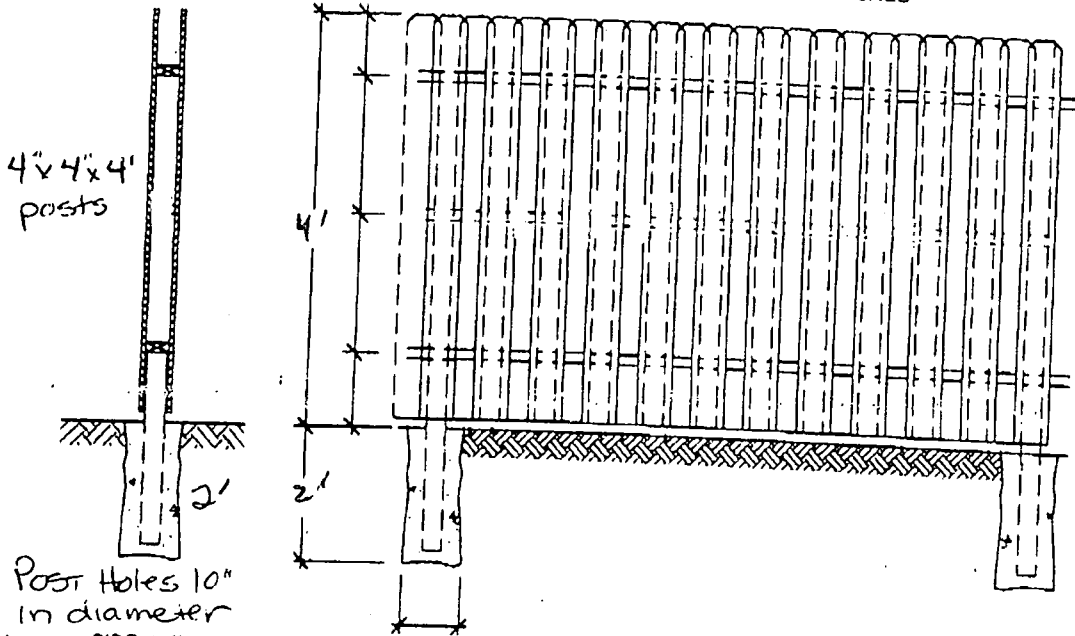


Pickets 1/2" x 6" x 4'



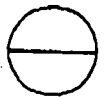
PLAN VIEW

BOARD OVERLAP \_\_\_\_\_ INCHES



Post Holes 10" in diameter  
SIDE VIEW

FRONT VIEW



NOTES:

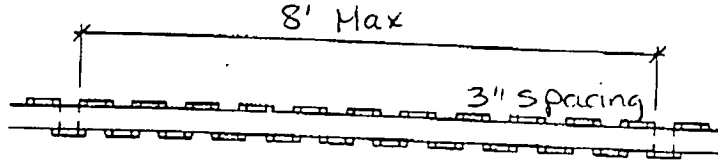
4' Vertical Shadow Box Fence Detail  
STYLE : DOG EARED (W-12)

SPECIFICATIONS		
COMPONENT	DIMENSIONS	MATERIAL
BACK RAILS	X X	
POSTS	X X	
PICKETS	X X	
FOOTING	DIA X DEEP	
NAILS/SCREWS		
TOP DESIGN		





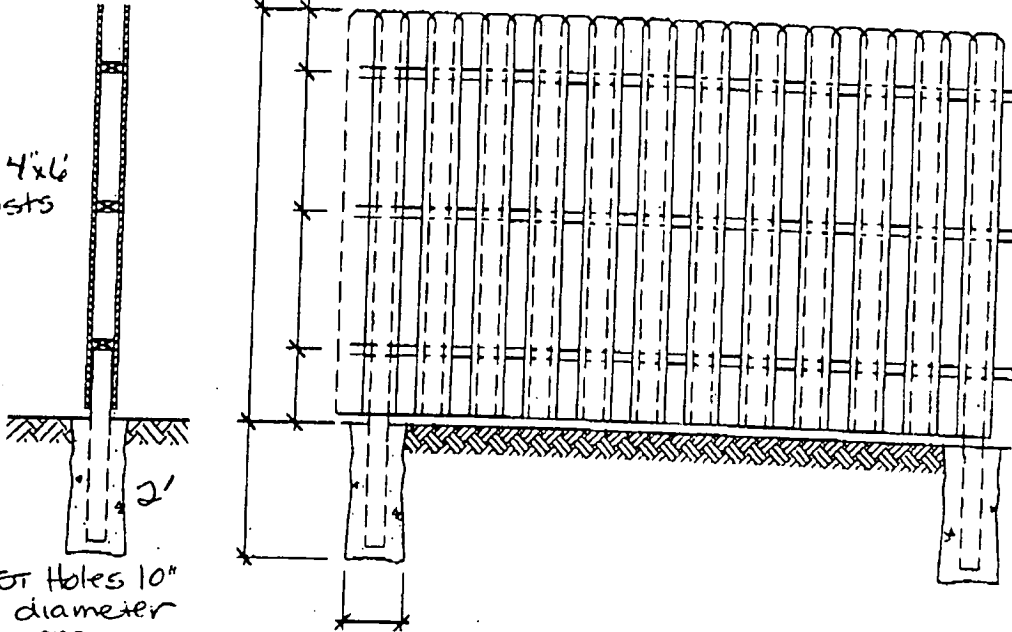
Pickets 1/2" x 6" x 6'



PLAN VIEW

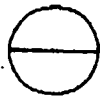
BOARD OVERLAP \_\_\_\_\_ INCHES

4" x 4" x 6'  
posts



FRONT VIEW

Post Holes 10"  
in diameter  
SIDE VIEW

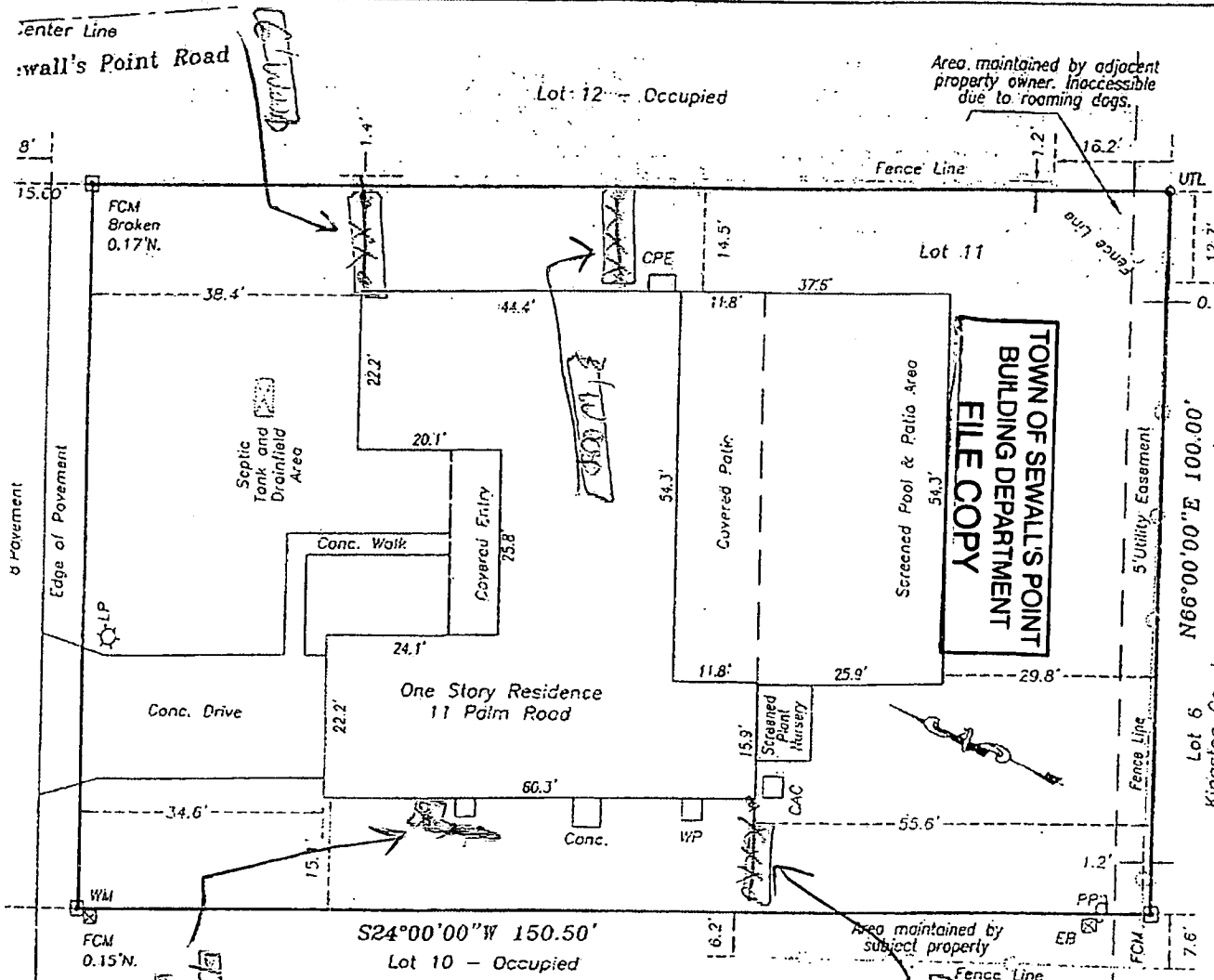


6' Vertical Shadow Box Fence Detail  
STYLE : DOG EARED (W-12)

NOTES:

SPECIFICATIONS		
COMPONENT	DIMENSIONS	MATERIAL
BACK RAILS	X X	
POSTS	X X	
PICKETS	X X	
FOOTING	DIA X DEEP	
NAILS/SCREWS		
TOP DESIGN		

10471



**TOWN OF SEWALL'S POINT  
BUILDING DEPARTMENT  
FILE COPY**

Lot 11, P.  
PLAT OF PA  
Circuit Cour  
Page 68,

- SURVEYOR'S RE**
- 1 This Survey s
  - 2 No underground
  - 3 The last field
  - 4 This Survey w
  - 5 The Survey w
  - 6 Left Blank
  - 7 Unless otherw
  - 8 Parcel/Lot lin
  - 9 Left Blank
  - 10 The Legal De
  - 11 No ownership
  - 12 Off set calls
  - 13 Compliance w
- as part of this :

**PREPARED FOR:**  
Robert T. Chopman  
American Airlines Federal Credit Union, its successors  
and/or assigns  
Mariner Title Company  
Old Republic National Title Insurance Company

Prepared By: Regina C. Karner, PSM#4363

Flood Zone Data derived by scaling  
methods at the official FEMA Maps and  
limited to the accuracy of such maps.  
Flood Zone: X, Community #: 120164  
Parcel #: 0152, Suffix: 5, Date: 10/01/2003

Sewall's Point Road

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

3-10-14

Page \_\_\_ of \_\_\_

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10762	Reusano 16 E. Nighthawk Rd Dreamworks	SLAB	re scheduled Friday  PASS	INSPECTOR <i>[Signature]</i>
10587	E Lenahan 7 Miramar Dx Garage	Final	PASS	561-881-9700 close INSPECTOR <i>[Signature]</i>
<del>10786</del>	<del>Chapman</del> 11 Palm Rd Stuart Fence Co	<del>Final</del> Fence	<del>PASS</del>	<del>INSPECTOR <i>[Signature]</i></del>
10797	<del>Reusano</del>	<del>SL</del>		INSPECTOR
10793	BELL 34 S. Sewalls Blvd Gates Professionals	WINDOW ATTACHMENT	PARTIAL  PASS	INSPECTOR <i>[Signature]</i>
	Dayton 19 Palm Ct	TREE	OK	INSPECTOR
				INSPECTOR



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

## BUILDING PERMIT CARD

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

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	10788	DATE ISSUED:	02/28/2014
SCOPE OF WORK:	HURRICANE SHUTTERS		
CONTRACTOR:	EXPERT SHUTTER SERVICES		
PARCEL CONTROL NUMBER:	133841005000001109	SUBDIVISION	PALM ROW
CONSTRUCTION ADDRESS:	11 PALM ROAD		
OWNER NAME:	ROBERT T. CHAPMAN		
QUALIFIER:	MIKE HEISSEBERG	CONTACT PHONE NUMBER:	772 871-1915

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

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

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

### INSPECTIONS

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

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



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

### BUILDING PERMIT RECEIPT

<b>PERMIT NUMBER:</b>	10788
<b>ADDRESS</b>	11 PALM ROAD
<b>DATE 02/28/2014</b>	<b>SCOPE OF WORK HURRICANE SHUTTERS</b>

<b>SINGLE FAMILY OR ADDITION /REMODEL</b>	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$	
Total square feet air-conditioned space: (@ \$121.75 per sq. ft.)		s.f.	
Total square feet non-conditioned space, or interior remodel: (@ \$59.81 per sq. ft.)		s.f.	
Total square feet remodel with new trusses: @ \$90.78 per sq. ft.		\$	
<b>Total Construction Value:</b>		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$100 per insp.)			
Total number of inspections (Value < \$200K)@\$100ea		\$	
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	
Road impact assessment: (.04% of construction value - \$5 min.)			
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		\$	

<b>ACCESSORY PERMIT</b>	Declared Value:	\$	1,989.00
Total number of inspections @ \$100.00 each	1		100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	109.00

*Pd*  
 3-3-14  
 CK# 5727

Town of Sewall's Point

Date: 2/18/14 CHAPMAN BUILDING PERMIT APPLICATION Permit Number: 10788

OWNER/LESSEE NAME: CHATMAN, ROBERT T. Phone (Day) (716) 310-6663 (Fax)

Job Site Address: 11 PALM RD. City: STUART State: FL. Zip: 34996

Legal Description PALM ROW REVISOR AM LOT 11 Parcel Control Number: 13-38-41-005-000-00110-9

Fee Simple Holder Name: Address:

City: State: Zip: Telephone:

HURRICANE SHUTTERS

\*SCOPE OF WORK (PLEASE BE SPECIFIC): INSTALLATION OF 15 OPENING SHUTTERS

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

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

COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ 1,989.00 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out) Is subject property located in flood hazard area? VE10 AE9 AE8 X FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ (Fair Market Value of the Primary Structure only, Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: EXPERT SHUTTER SERVICES Phone: 871-1915 Fax: 871-0990

Qualifiers name: MIKE HEISSENBERG Street: 1626 SW ARDMORE ST City: PSC. State: FL Zip: 34984

State License Number: OR: Municipality: MARTIN CO. License Number: MCAL01515

LOCAL CONTACT: MIKE HEISSENBERG Phone Number: 201-1714

DESIGN PROFESSIONAL: TIGTECO, INC Fla. License# 44167

Street: 6355 NW 3672 ST. 305 City: VIRGINIA GARDEN State: FL Zip: 32166 Phone Number: (305) 871-1530

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

CODE EDITIONS IN EFFECT: THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas) 2010, National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS:

- 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.11 - 5.

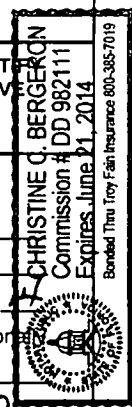
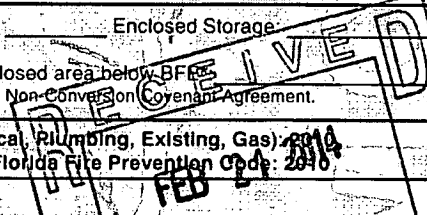
\*\*\*\*\*A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS\*\*\*\*\*

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE: X State of Florida, County of: On This the day of 20 by who is personally known to me or produced As identification. Notary Public My Commission Expires:

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: X State of Florida, County of: MARTIN On This the 21st day of FEBRUARY 20 by MICHAEL PAUL HEISSENBERG who is personally known to me or produced As identification FL DL H 251-535-65-150-0 Notary Public My Commission Expires: Christine C. Bergeron

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



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

*generated on 2/20/2014 2:21:17 PM EST*

**Summary**

<b>Parcel ID</b>	<b>Account #</b>	<b>Unit Address</b>	<b>Market Total Value</b>	<b>Website Updated</b>
13-38-41-005-000-00110-9	27818	11 PALM RD, SEWALL'S POINT	\$332,670	2/15/2014

**Owner Information**

<b>Owner(Current)</b>	CHAPMAN ROBERT T
<b>Owner/Mail Address</b>	11 PALM RD STUART FL 34996
<b>Sale Date</b>	12/30/2013
<b>Document Book/Page</b>	2695 1395
<b>Document No.</b>	2433428
<b>Sale Price</b>	448000

**Location/Description**

<b>Account #</b>	27818	<b>Map Page No.</b>	SP-05
<b>Tax District</b>	2200	<b>Legal Description</b>	PALM ROW REVISED & AMENDED LOT 11
<b>Parcel Address</b>	11 PALM RD, SEWALL'S POINT		
<b>Acres</b>	.3460		

**Parcel Type**

<b>Use Code</b>	0100 Single Family
<b>Neighborhood</b>	120200 Heritage P, Palmtto Pk,Rdglnd,

**Assessment Information**

<b>Market Land Value</b>	\$175,000
<b>Market Improvement Value</b>	\$157,670
<b>Market Total Value</b>	\$332,670



# EXPERT

## SHUTTER SERVICES INC.

"We're Taking The Shutter Industry By Storm"

Finals: 1/14/14  
@ 10:30 - 11:30

\*George's personal friend

\*Will be home, call 30 min ahead!! **Confirmed**

BILLING INFORMATION	DATE	JOB INFORMATION
BOB CHAPMAN 11 PALM RD. STUART, FL 34996	1/2/2014 CONDOMINIUM SEWALLS POINT	BOB CHAPMAN 11 PALM RD. STUART, FL 34996

PHONE	CONTACT	OWNER
716 310-6663		

QUANTITY	DIMENSIONS	DESCRIPTION	COST	
1.	1	24" X 68"	WINDOW, WHITE, MILL PANELS, 1" BO	\$80
2.	1	24" X 68"	WINDOW, WHITE, MILL PANELS, 1" BO	\$80
3.	1	78" X 68"	WINDOW, WHITE, MILL PANELS, 1" BO	\$255
4.	1	42" X 68"	WINDOW, WHITE, MILL PANELS, 2" BO	\$148
5.	1	42" X 68"	WINDOW, WHITE, MILL PANELS, 2" BO	\$148
6.	1	42" X 68"	WINDOW, WHITE, MILL PANELS, 2" BO	\$148
7.	1	42" X 86"	ENTRY DOORS, WHITE, MILL PANELS	\$173
8.	1	42" X 56"	WINDOW, WHITE, MILL PANELS, 1" BO	\$114
9.	1	42" X 56"	WINDOW, WHITE, MILL PANELS, 1" BO	\$114
10.	1	42" X 56"	WINDOW, WHITE, MILL PANELS, 1" BO	\$114
11.	1	42" X 56"	WINDOW, WHITE, MILL PANELS, 2" BO	\$123
12.	1	36" X 86"	ENTRY DOORS, WHITE, MILL PANELS	\$150
13.	1	42" X 56"	WINDOW, WHITE, MILL PANELS, 1" BO	\$114
14.	1	42" X 56"	WINDOW, WHITE, MILL PANELS, 1" BO	\$114
15.	1	42" X 56"	WINDOW, WHITE, MILL PANELS, 1" BO	\$114

#15 REMOVE SCREEN FRAMING ABOVE WINDOW.  
INC. LUBRICATION OF EXISTING ACCORDION ON REAR PATIO.  
REMOVE DECO CO # 8, 9 + 10  
USE 2" BO (SHUTTERS TO STAY) # 4, 5, 6 + 11.

SHUTTERS MEET ALL LOCAL BUILDING CODES APPROX. DELIVERY 4-6 WEEKS	TOTAL	\$1,989
FIVE YEAR WARRANTY FOR PARTS AND LABOR (SEE WARRANTY INFORMATION)	DEPOSIT	\$700
SHUTTERS MUST BE MAINTAINED PROPERLY (SEE MAINTENANCE INFORMATION)	BALANCE	\$1,289

SPECIAL INSTRUCTIONS:	INCLUDES CREDIT FOR ALUMINUM PANEL TRADE-IN.
114	

SALES REPRESENTATIVE	DATE	PURCHASER
 GEORGE YUSCAVAGE		

ALL CHECKS PAYABLE TO: EXPERT SHUTTER SERVICES INC.

BUYERS RIGHT TO CANCEL\*

This is a home solicitation sale, and if you do not want the goods or services, you may cancel this agreement by providing written notice to the seller in person, by telegram, or by mail. This notice must indicate that you do not want the goods or services and must be delivered or postmarked before midnight of the third business day after you sign this agreement. If you cancel this agreement, the seller may not keep all or part of any cash down payment.

Balance due upon completion. We reserve the right to add on 1.5% per month on any over due invoices.





# CERTIFICATE OF LIABILITY INSURANCE

EXPSS-1

OP ID: WS

DATE (MM/DD/YYYY)

02/24/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Kearns Agency of Florida Inc. P O Box 1849 Jensen Beach, FL 34968		<b>CONTACT NAME:</b> PHONE (A/C, No. Ext): <b>772-871-1915</b> FAX (A/C, No): <b>772-871-0990</b> E-MAIL: ADDRESS:	
<b>INSURED</b> Expert Shutter Services Inc 1826 SW Biltmore St. Port St. Lucie, FL 34984-3411		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A:</b> Southorn Ownrs Insurance Co.	<b>NAIC #</b> 10190
		<b>INSURER B:</b> Auto-Owners Insurance Co.	18988
		<b>INSURER C:</b>	
		<b>INSURER D:</b>	
		<b>INSURER E:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

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

INSTR	TYPE OF INSURANCE	ADDC	SOBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			72709790	08/26/2014	08/26/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			95-434-706-00	09/01/2014	03/01/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 300,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NM) If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATU- TORY LIMITS <input type="checkbox"/> OTH- ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
 Chapman Residence

<b>CERTIFICATE HOLDER</b>  Town of Sewall's Point One S. Sewall's Point Rd. Sewall's Point, FL 34996	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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Fax TO: (HV) FROM: 2/24/14



# CERTIFICATE OF LIABILITY INSURANCE

EXPESHU-01 POWERSV

DATE (MM/DD/YYYY)  
2/21/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Insurance Office of America-LNG 1855 West State Road 434 Longwood, FL 32750	<b>CONTACT NAME:</b> Raquel Gonzalez <b>PHONE (A/C. No. Gr.):</b> (407) 788-3000 <b>FAX (A/C. No.):</b> (407) 788-7933 <b>EMAIL ADDRESS:</b> Raquel.Gonzalez@loausa.com
	<b>INSURER(S) AFFORDING COVERAGE</b>
<b>INSURED</b>  Export Shutter Services, Inc. 1626 SW Billmore Street Port St Lucie, FL 34984	<b>INSURER A:</b> FCCI Insurance Company <b>NAIC #</b> 10178 <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>

COVERAGES      CERTIFICATE NUMBER:      REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL(SUBR) INSR W/O	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO. <input type="checkbox"/> LOC					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NM) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	001WC13A59975	0/15/2013	6/15/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH. EP EL EACH ACCIDENT \$ 500,000 EL DISEASE - EA EMPLOYEE \$ 500,000 EL DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLED (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Re: Chapman Residence

<b>CERTIFICATE HOLDER</b>  Town of Seawalls Point Building Department 1 South Seawalls Point Road Seawalls Pt, FL 34984	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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TO: FROM: 2/21/14



RECEIPT FOR TAX PAID ONLY  
THIS RECEIPT DOES NOT OWE HOLDER  
THE AUTHORITY TO OWE THIS BUSINESS  
WITHOUT MEETING ALL STATE AND LOCAL  
REQUIREMENTS

PORT ST. LUCIE LOCAL BUSINESS TAX RECEIPT

TERM: October 1, 2013 to September 30, 2014

I warrant that the receipt holder is competent to perform in the business and that the holder has paid the respective tax and  
percentage of the necessary documentation if required for the business. Valid only when all state and local regulated trade licenses are  
current and valid for the current fiscal year as required by law.  
RECEIPT MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS  
BUSINESS ADDRESS ONLY

Business Address: 1626 SW BILTMORE ST  
Classification: CONT CONTRACTOR  
EXPERT SHUTTER SERVICES  
1626 SW BILTMORE ST  
PORT ST LUCIE FL 34984

Business Tax 104430 / 14-1013188  
Fee: 127.63  
Discount: 0.00

*Mary B. Masto*  
BUSINESS TAX AUTHORITY

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

LOCAL BUSINESS TAX RECEIPT CITY OF PORT ST. LUCIE Zloperena

Fees: 127.63 Late Fees: 0.00 Total this payment: 127.63

I warrant that the receipt holder is competent to perform in the business and that the holder has paid the respective tax and  
percentage of the necessary documentation if required for the business. Valid only when all state and local regulated trade licenses are  
current and valid for the current fiscal year as required by law.

THIS RECEIPT MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS

TERM: October 1, 2013 to September 30, 2014

# RECEIPT FOR PAYMENT

Business Address: 1626 SW BILTMORE ST  
Classification: IS IS CONT CONTRACTOR

Business Tax 104430 / 14-1013188  
Fee: 127.63  
Discount: 0.00

Issued to: EXPERT SHUTTER SERVICES  
1626 SW BILTMORE ST  
LOCAL BUSINESS TAX RECEIPT CITY OF PORT ST. LUCIE  
PORT ST LUCIE FL 34984

CITY OF PORT ST. LUCIE

376 / 052 Zloperena

Fees: 127.63 Late Fees: 0.00 Total this payment: 127.63

I warrant that the receipt holder is competent to perform in the business and that the holder has paid the respective tax and  
percentage of the necessary documentation if required for the business. Valid only when all state and local regulated trade licenses are  
current and valid for the current fiscal year as required by law.

TERM: October 1, 2013 to September 30, 2014

Fees: 127.63 Late Fees: 0.00 Total this payment: 127.63

# FILE COPY

Business Address: 1626 SW BILTMORE ST  
Classification: CONT CONTRACTOR  
Issued to: EXPERT SHUTTER SERVICES  
1626 SW BILTMORE ST

Business Tax 104430 / 14-1013188  
Fee: 127.63  
Discount: 0.00

376 / 052 Zloperena

TO: 2104/111  
FAX FROM: HV

**County Certification Number: 16572**



Planning & Development Services  
Building & Code Regulation Division  
2300 Virginia Ave  
Ft Pierce, FL 34982  
Phono: (772) 462-1672 Fax: (772) 462-1148  
[http://www.stlucico.org/planning/contract\\_llcon.htm](http://www.stlucico.org/planning/contract_llcon.htm)

**Issued To:** **EXPERT SHUTTER SERVICES INC  
P, HEISSENBERG MICHAEL  
1626 SW BILTMORE ST  
PORT ST LUCIE, FL 34984**

**Class Code:** Aluminum w/out Concrete

**License Type:** County Certification

This Competency Card, issued by the St. Lucie County Contractor Certification Division, authorizes work for the Class Code stated, for the unincorporated areas of St. Lucie County. It does not authorize work for the City of Ft. Pierce, St. Lucie Village or the City of Port St. Lucie. It is the Contractor's responsibility to maintain this card in a current status by providing a Certificate of Insurance, current address and telephone information, and renewing this card annually as required.

**Effective Date:** 10/1/2007

**Expiration Date:** 9/30/2014

*Danielle K. Williams*

*Code Enforcement Supervisor*

**Wallet Contractor ID Card**

Cut to fit, then fold in half

**St. Lucie County**

**CONTRACTOR IDENTIFICATION CARD**

**County Certification Number** 16572  
**Class Code:** Aluminum w/out Concrete  
 This is to certify that P. HEISSENBERG MICHAEL DBA EXPERT SHUTTER SERVICES INC has been issued a County Certificate in St. Lucie County, beginning on 10/1/2007 and ending on 9/30/2014, unless license is revoked.

*Danielle K. Williams*  
 Authorized Licensing Official  
*Code Enforcement Supervisor*

*St. Lucie County*

<b>Contractor Licensing:</b>	<b>(772) 462-1673</b>
<b>Contractor Fax Line:</b>	<b>(772) 462-1148</b>
<b>Automated Inspection Line:</b>	<b>(866) 284-1280</b>
<b>Inspection Line:</b>	<b>(772) 462-2172</b>

**ALL WIND LOADS DESIGNED IN ACCORDANCE WITH ASCE 7-10**

**ROOF PITCH IS GREATER THAN 2"/12" OR  $\geq 10$  DEGREES**

PROJECT NAME:	CHAPMAN ROBERT T
ADDRESS	11 PALM RD
CITY/STATE	STUART FL 34996
CLADDING TYPE:	STUCCO

**COMPONENTS AND CLADDING OF WALLS**

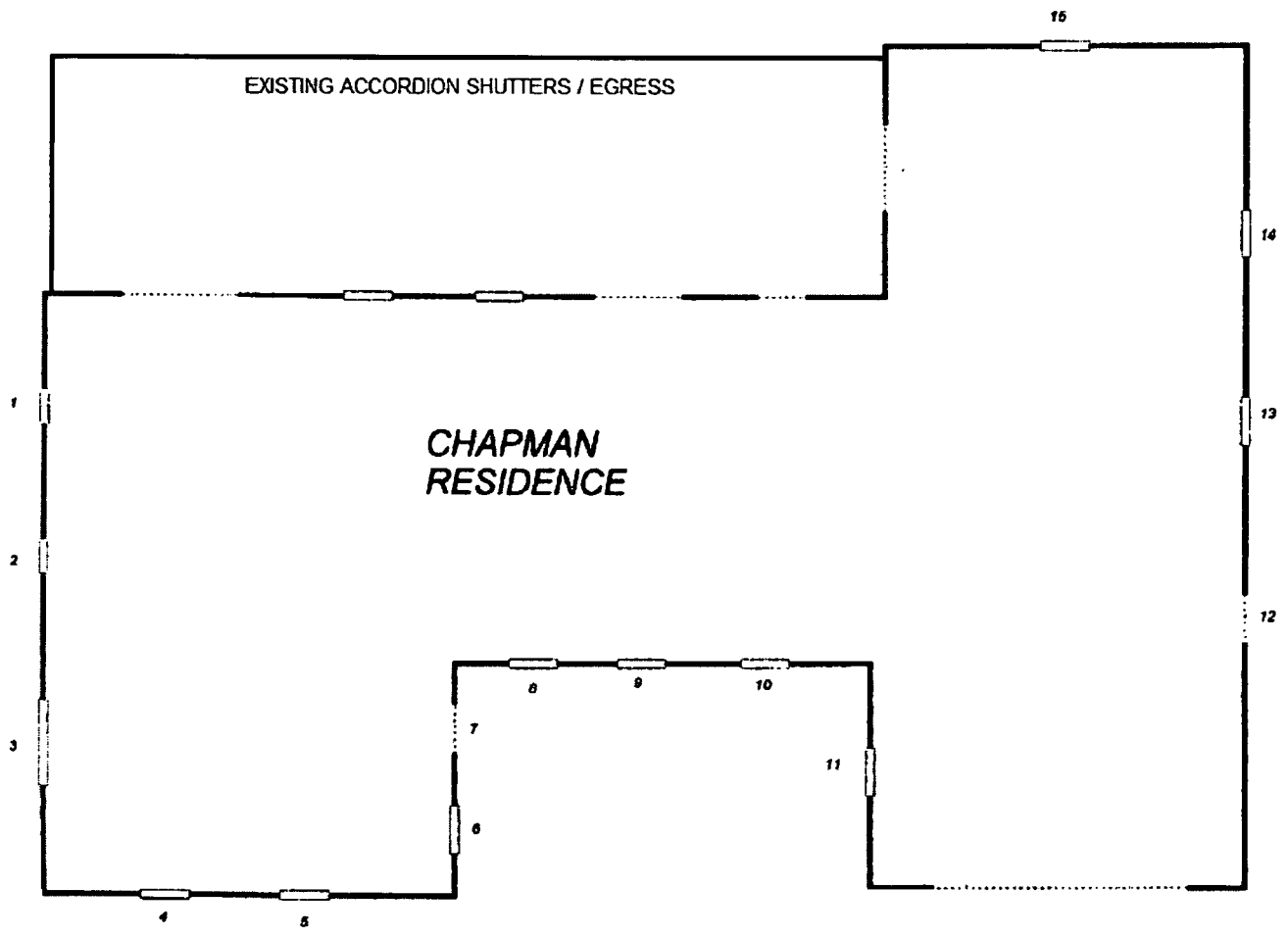
BASIC WIND SPEED(MPH)	170
EXPOSURE	D
BUILDING TYPE	CAT II
MEAN ROOF HEIGHT	15
TOP OF WINDOW OR SHUTTER HEIGHT	8
ALLOWABLE STRESS DESIGN	0.60

TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY

**TRIBUTARY AREAS**

ENCLOSED BUILDING $G_{Cpi} = \pm 0.18$	$\leq 10$ SF	10 SF $\Rightarrow$ $\leq 20$ SF	20 SF $\Rightarrow$ $\leq 50$ SF
POSITIVE PRESSURE	45.8	43.8	41.1
NEGATIVE PRESSURE (END ZONE 5)	61.4	57.3	51.8







[DBPR HOME](#) | [ABOUT DBPR](#) | [DBPR DIVISIONS](#) | [CONTACT DBPR](#)

Florida Department of  
**Business & Professional Regulation**

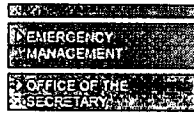
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**Product Approval**  
USER: Public User

License efficiently. Regulate fairly.

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



FL #	FL11968-R1	
Application Type	Revision	
Code Version	2010	
Application Status	Approved	
Comments		
Archived	<input type="checkbox"/>	
Product Manufacturer	Eastern Metal Supply	
Address/Phone/Email	4268 Westroads Drive West Palm Beach, FL 33407 (800) 432-2204 lrodriguez@easternmetal.com	
Authorized Signature	Bill Feeley lrodriguez@easternmetal.com	
Technical Representative		
Address/Phone/Email		
Quality Assurance Representative		
Address/Phone/Email		
Category	Shutters	
Subcategory	Storm Panels	
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received	
Florida Engineer or Architect Name who developed the Evaluation Report	Walter A. Tillit, Jr.	
Florida License	PE-44167	
Quality Assurance Entity	National Accreditation and Management Institute	
Quality Assurance Contract Expiration Date	12/31/2013	
Validated By	John Henry Kampmann Jr. <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received	
Certificate of Independence	<a href="#">FL11968_R1_COI_EASTERN METAL_Certification of independence drwg_11-223.pdf</a>	
Referenced Standard and Year (of Standard)	<b>Standard</b>	<b>Year</b>
	ASTM E330	2002
	SSTD 12-99	1999
Equivalence of Product Standards Certified By		
Sections from the Code		



Product Approval Method                      Method 1 Option D

Date Submitted                                    12/16/2011

Date Validated                                    12/21/2011

Date Pending FBC Approval                    01/03/2012

Date Approved                                    01/31/2012

Summary of Products		
FL #	Model, Number or Name	Description
11968.1	.050" Bertha Storm Panel (2 1/4" ) - Drawing Number 11-222	Corrugated aluminum storm panels retained or not by tracks to provide hurricane protection
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> Yes <b>Design Pressure:</b> N/A <b>Other:</b> Large Missile. Max span is 12'-11" for +30, -30 p.s.f. ASD and 8'-2" for +75, -80 p.s.f. ASD for mountings without "H" header. See sheet 5 of installation drawings for other spans and pressures.		<b>Installation Instructions</b> <a href="#">FL11968_R1_II_EASTERN METAL_DRWG_11-222.pdf</a> Verified By: American Test Lab of South Florida Inc. Created by Independent Third Party: Yes  <b>Evaluation Reports</b> <a href="#">FL11968_R1_AE_EASTERN METAL Product evaluation report drwg_11-222.pdf</a> Created by Independent Third Party: Yes
11968.2	0.040" Bertha Aluminum Storm Panel (2.25" Deep)- Non-HVHZ - Drawing Number 11-224	Corrugated aluminum storm panels retained or not by tracks to provide hurricane protection.
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> Yes <b>Design Pressure:</b> N/A <b>Other:</b> Large Missile. Max. span is 12'-0" for +25, -25 p.s.f. ASD and 4'-0" for +125, -130 p.s.f. ASD for sections 1, 3, 4, 6, 7, 8, 8A, 9 and 11. See sheet 10 of installation drawing for other spans and pressures.		<b>Installation Instructions</b> <a href="#">FL11968_R1_II_EASTERN METAL_DRWG_11-224.pdf</a> Verified By: American Test Lab of South Florida Inc. Created by Independent Third Party: Yes  <b>Evaluation Reports</b> <a href="#">FL11968_R1_AE_EASTERN METAL Product evaluation report drwg_11-224.pdf</a> Created by Independent Third Party: Yes
11968.3	24 Gage Galvanized Bertha Steel Storm Panel (2.25" Deep)- Non-HVHZ - Drawing Number 11-223	corrugated galvanized steel storm panels retained or not by tracks to provide hurricane protection.
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> Yes <b>Design Pressure:</b> N/A <b>Other:</b> Large Missile. Max. span is 9'-8" for +30, -40 p.s.f. ASD and 7'-2" for +70, -80 p.s.f. ASD for panels mounted without "H" header. See sheet 4 of installation drawing for other spans and pressures.		<b>Installation Instructions</b> <a href="#">FL11968_R1_II_EASTERN METAL_DRWG_11-223.pdf</a> Verified By: American Test Lab of South Florida Inc. Created by Independent Third Party: Yes  <b>Evaluation Reports</b> <a href="#">FL11968_R1_AE_EASTERN METAL Product evaluation report drwg_11-223.pdf</a> Created by Independent Third Party: Yes
11968.4	Clear Bertha Storm Panels (2 1/4") - Drawing Number 11-220	Corrugated Polycarbonate Storm Panels retained or not by tracks to provide hurricane protection.
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> Yes <b>Design Pressure:</b> N/A <b>Other:</b> Large Missile. Max. span is 10'-0" for +28, -28 p.s.f. ASD and 4'-0" for +105, -110 p.s.f. ASD design load. See sheet 3 of installation drawings for other spans and pressures.		<b>Installation Instructions</b> <a href="#">FL11968_R1_II_EASTERN METAL SUPPLY_DRWG_11-220.pdf</a> Verified By: American Test Lab of South Florida Inc. Created by Independent Third Party: Yes  <b>Evaluation Reports</b> <a href="#">FL11968_R1_AE_EASTERN METAL SUPPLY product evaluation report drwg_11-220.pdf</a> Created by Independent Third Party: Yes

Contact Us :: 1940 North Monroe Street, Tallahassee FL 32399 Phone: 850-487-1824

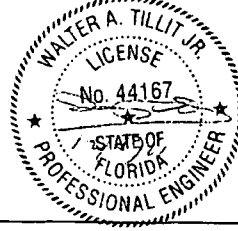
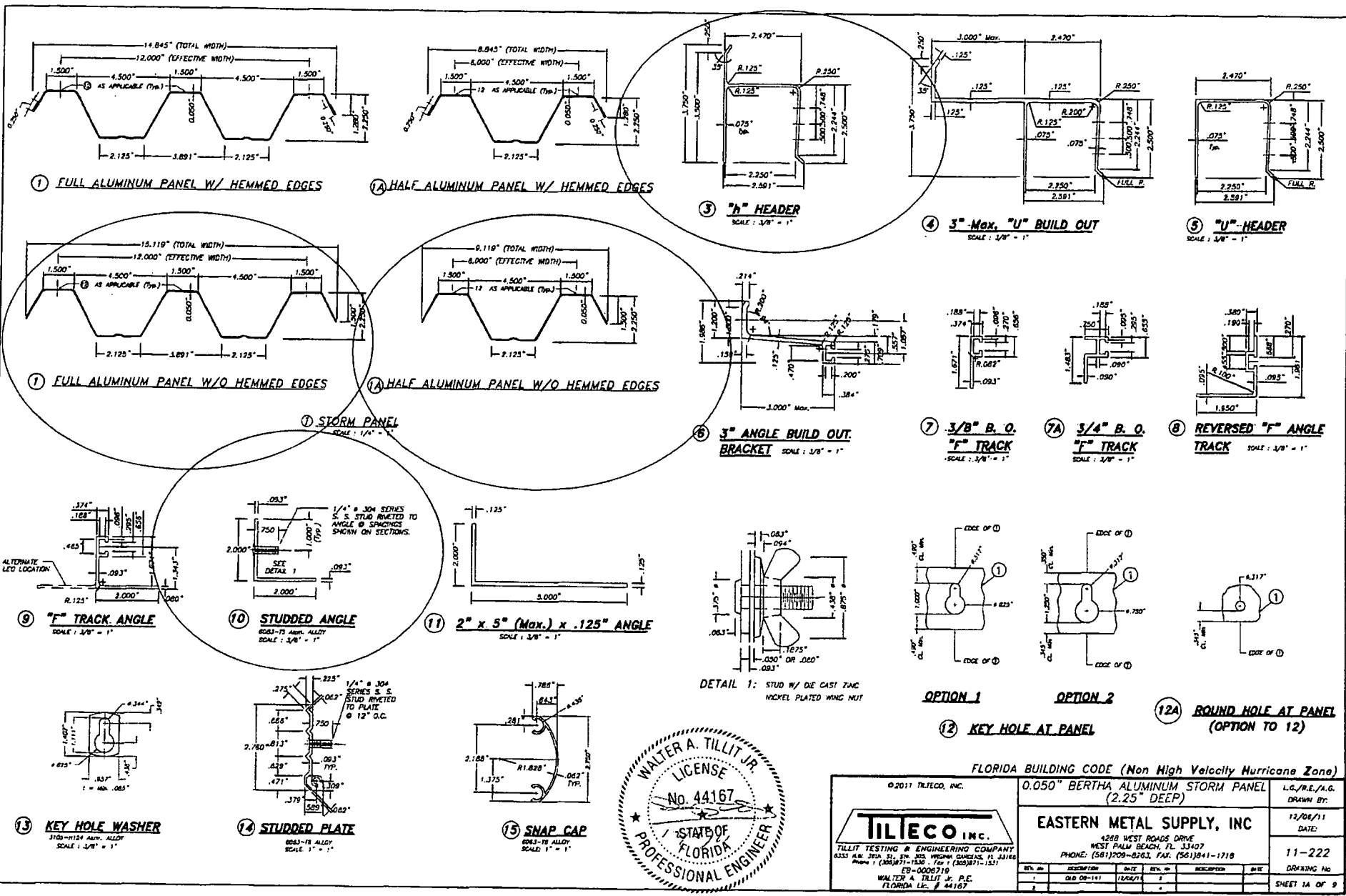
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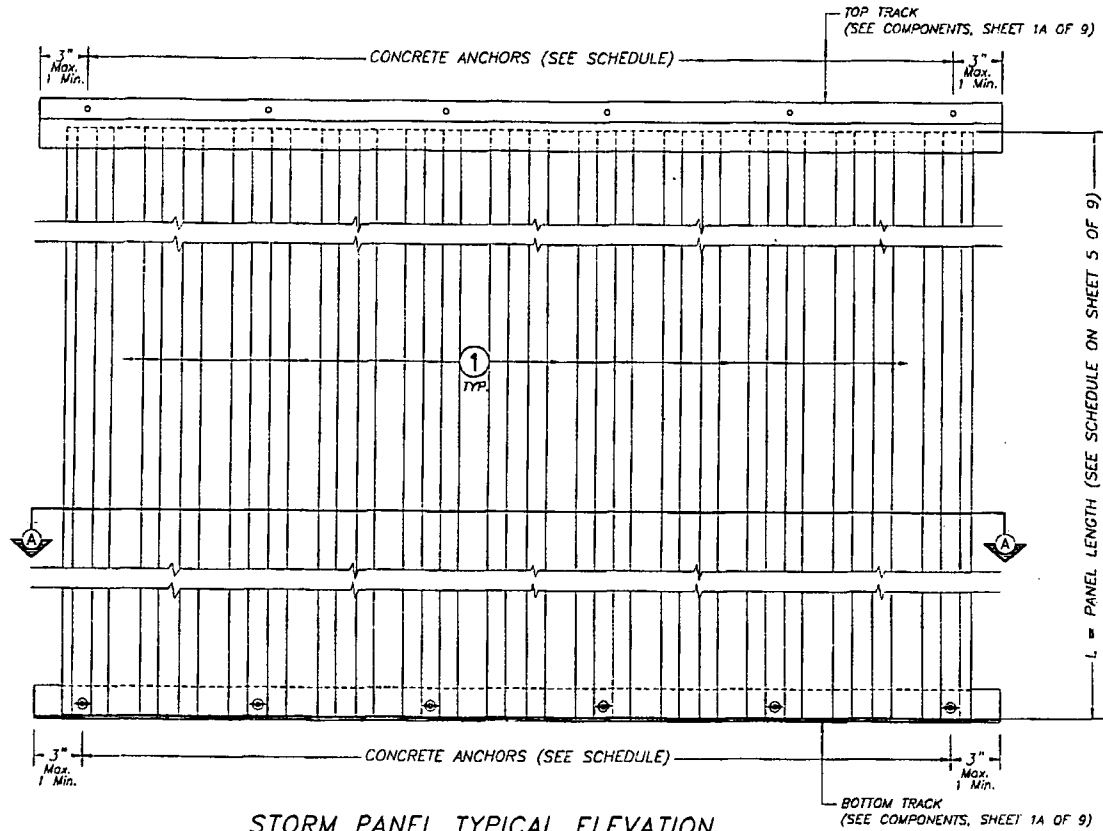
Product Approval Accepts:





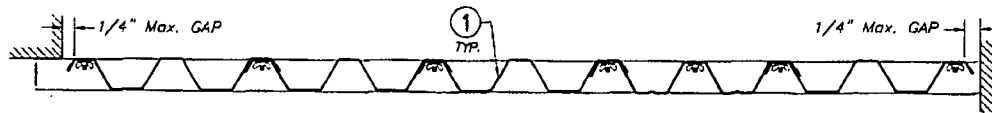


0.2011 TILECO, INC.		0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)		L.G./R.E./A.G. DRAWN BY:	
TILLIT TESTING & ENGINEERING COMPANY 6323 A.W. 20th St., 2nd. Fl., Virginia Gardens, Ft. Lauderdale, FL 33416 Phone: (305) 871-1530, Fax: (305) 871-1511 EB-0006719 WALTER A. TILLIT JR., P.E. FLORIDA LIC. # 44167		EASTERN METAL SUPPLY, INC.		12/06/11 DATE:	
		4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561) 709-8263, FAX: (561) 841-1718		11-222 DRAWING No.	
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD 08-141	12/06/11	1		
2					



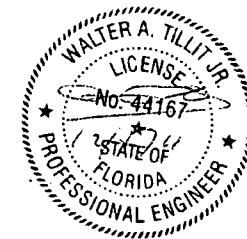
**STORM PANEL TYPICAL ELEVATION**

SCALE : 1/8" = 1"



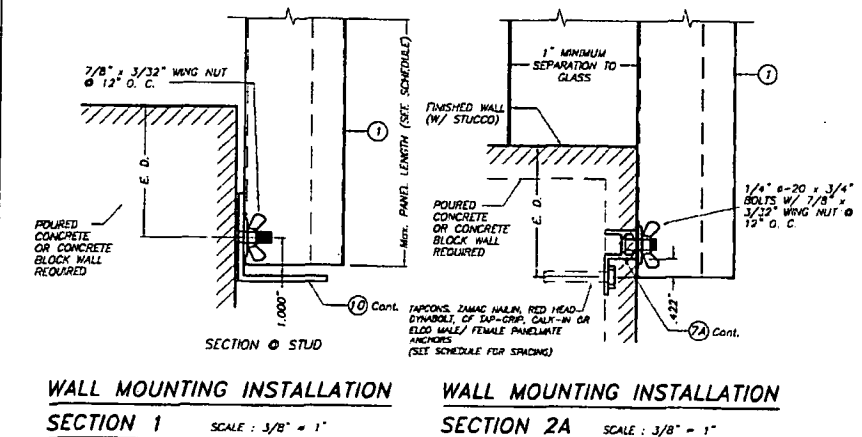
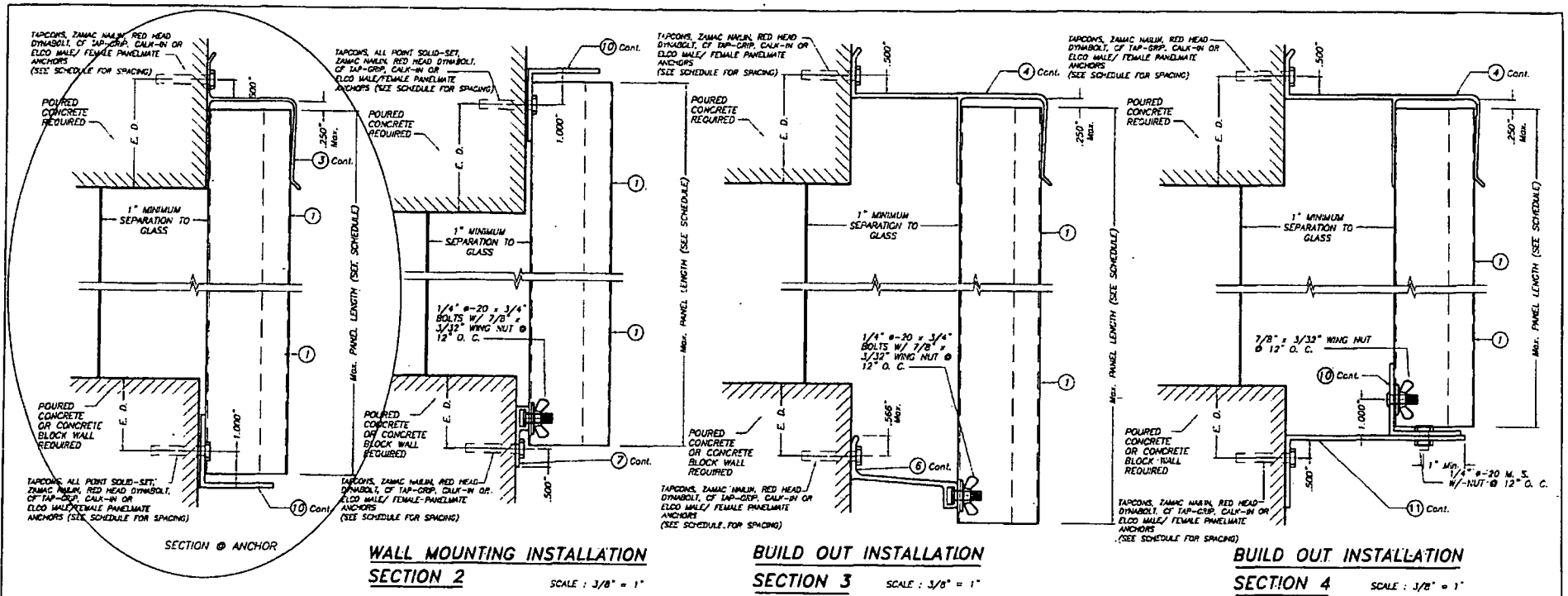
**SECTION A-A**

SCALE : 1/8" = 1"



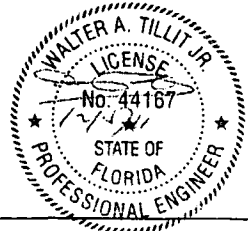
FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

© 2011 TILTECO, INC.		0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)		L.G./P.E./A.G.	
 <small>TILLIT TESTING &amp; ENGINEERING COMPANY          4355 NW 36TH ST., PMB. 100, WOODMUM GARDENS, FL 33166          PHONE: (561) 208-1130, FAX: (561) 211-1121          EB-0008718          WALTER A. TILLIT, P.E.          FLORIDA LIC. # 44167</small>		EASTERN METAL SUPPLY, INC		12/08/11	
		<small>4288 WEST ROADS DRIVE          WEST PALM BEACH, FL 33407          PHONE: (561) 208-8263, FAX: (561) 841-1718</small>		DATE:	
11-222		DRAWING NO.		SHEET 2 OF 9	
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD DR-112	12/08/11	2		
2			3		



E. D. = EDGE DISTANCE  
(SEE SCHEDULE ON  
SHEETS 6 & 7 OF 9)

NOTE FOR COMBINATION OF SECTIONS :  
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE  
COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



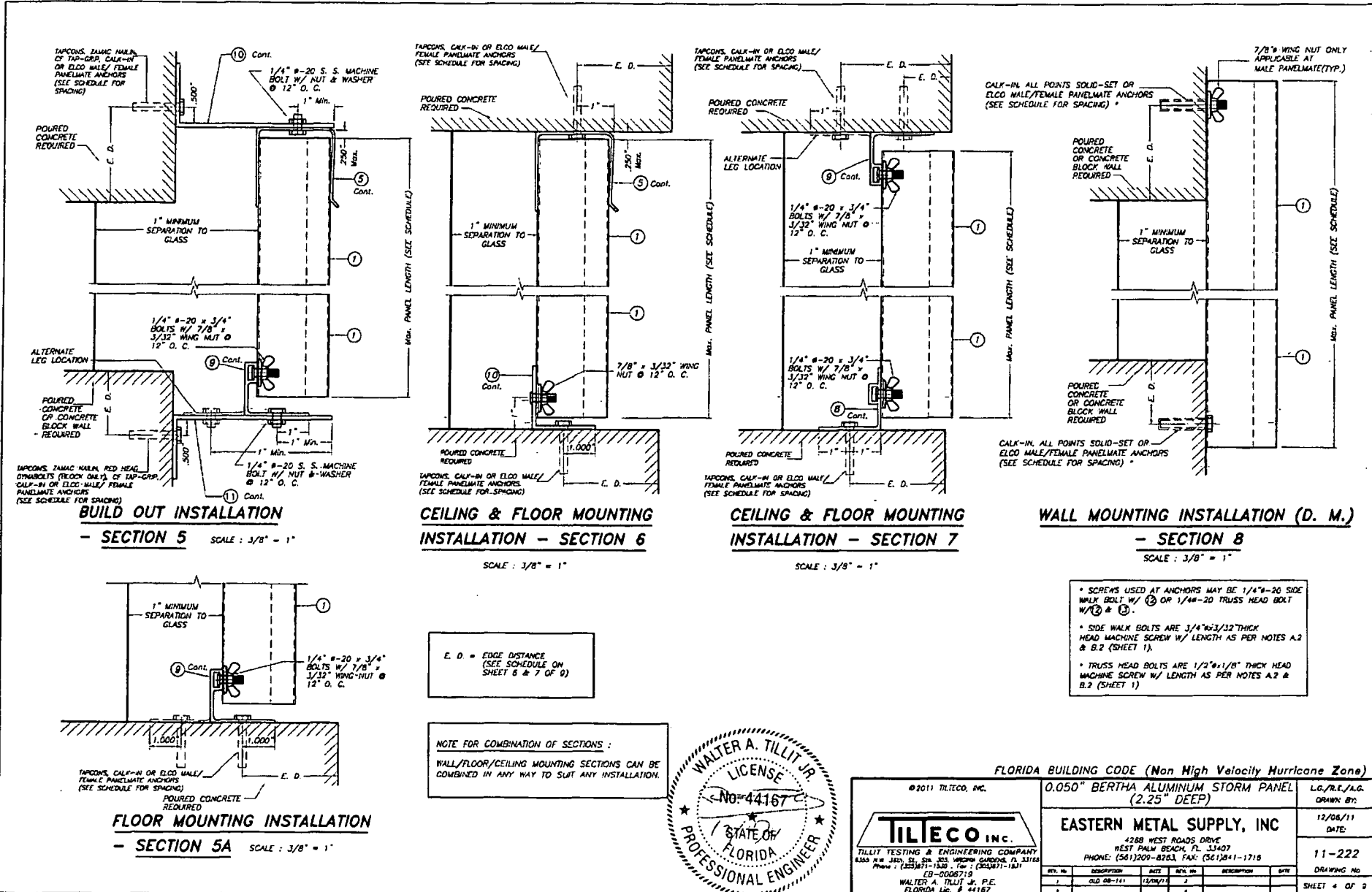
**WALL MOUNTING INSTALLATION**  
**SECTION 1** SCALE : 3/8" = 1"

**WALL MOUNTING INSTALLATION**  
**SECTION 2A** SCALE : 3/8" = 1"

NOTE : DETAIL OF SECTION 1 STUD VALID ALSO FOR  
WALL MOUNTING INSTALLATION - SECTION 2 (TOP)

FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

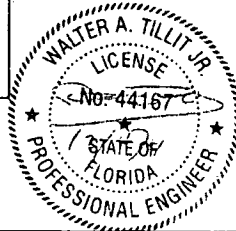
© 2011 TILTECO, INC.		0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)		L.G./P.E./A.G. DRAWN BY:	
		<b>EASTERN METAL SUPPLY, INC</b> 4288 WEST ROADS DRIVE WEST PALM BEACH, FL. 33407 PHONE: (561)203-8263, FAX: (561)841-1718		12/26/11 DATE:	
				11-222	
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD 58-142	12/26/11	2		
2			3		



\* SCREWS USED AT ANCHORS MAY BE 1/4" #20 SIDE WALK BOLT W/ (C) OR 1/4" #20 TRUSS HEAD BOLT W/ (D) & (E).

\* SIDE WALK BOLTS ARE 3/4" x 3/32" THICK HEAD MACHINE SCREW W/ LENGTH AS PER NOTES A2 & B.2 (SHEET 1).

\* TRUSS HEAD BOLTS ARE 1/2" x 1/8" THICK HEAD MACHINE SCREW W/ LENGTH AS PER NOTES A2 & B.2 (SHEET 1).



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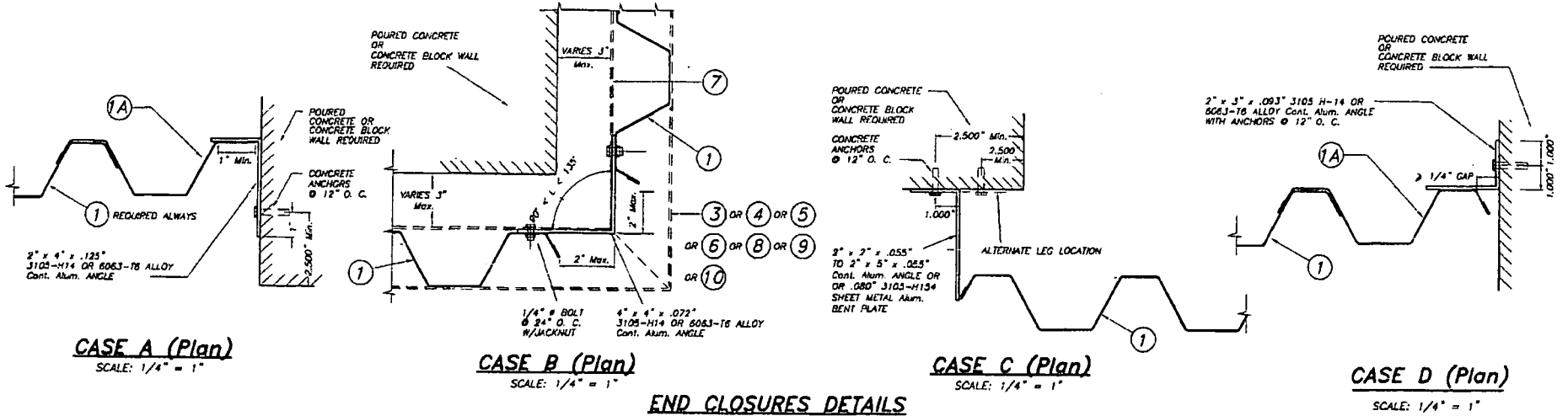
**TILECO INC.**

TILLIT TESTING & ENGINEERING COMPANY  
 8550 W.W. JACOBI ST., STE. 203, WESPHER GARDENS, D. 33165  
 Phone: (252) 871-1330 Fax: (252) 871-1831  
 EB-0006719  
 WALTER A. TILLIT, P.E.  
 FLORIDA Lic. # 44167

FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)		LG./R.E./A.G. DRAWN BY:
EASTERN METAL SUPPLY, INC		12/08/11 DATE:
4288 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561) 209-8263, FAX: (561) 841-1718		11-222 DRAWING No:
REV. No	DESCRIPTION	DATE
1	OLD 08-111	12/04/11
2		

SHEET 4 OF 9

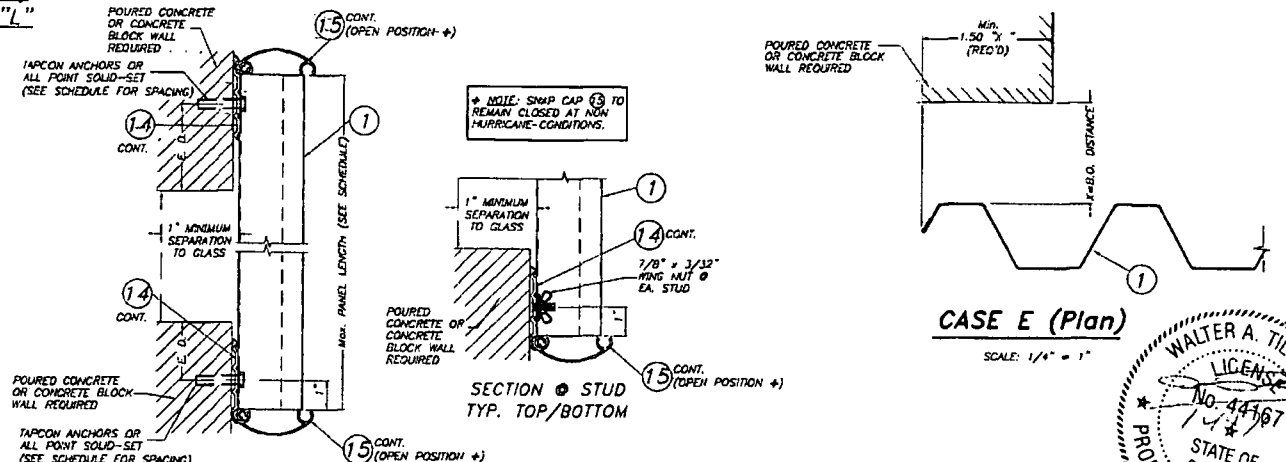


**END CLOSURES DETAILS**

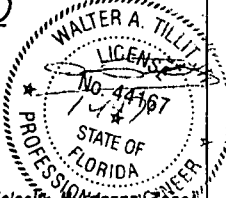
**MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM PANEL LENGTH "L" SCHEDULE FOR A GIVEN PANEL SYSTEM**

MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.)	Max. PANEL LENGTH L (ft.)		
	MOUNTING W/ 1/2" HEADER (1)	MOUNTING W/ 3/4" HEADER (2)	WALL MOUNTING W/ COMPONENT (3) & (3)
+30.0, -30.0	12'-11"	12'-11"	12'-11"
+30.0, -35.0	12'-11"	12'-11"	12'-11"
+35.0, -40.0	12'-0"	12'-0"	12'-0"
+40.0, -45.0	11'-2"	11'-2"	11'-2"
+45.0, -50.0	10'-7"	10'-4"	10'-7"
+50.0, -55.0	10'-0"	9'-4"	10'-0"
+55.0, -60.0	9'-7"	8'-6"	9'-7"
+60.0, -65.0	9'-2"	7'-9"	9'-2"
+65.0, -70.0	8'-9"	7'-2"	8'-9"
+70.0, -75.0	8'-6"	6'-8"	8'-5"
+75.0, -80.0	8'-2"	6'-3"	8'-2"

NOTE: MINIMUM PANEL LENGTH IS 3'-0".



**CASE E (Plan)**  
SCALE: 1/4" = 1"



FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANELS (2.25" DEEP)

**TILECO INC.**  
TILLIT TESTING & ENGINEERING COMPANY  
1335 N.W. 10th St., Ste. 202, Miramar, Florida, 33129  
Phone: (305) 271-1500 Fax: (305) 271-1157  
CB-0008710  
WALTER A. TILLIT, P.E.  
FLORIDA Lic. # 44167

**EASTERN METAL SUPPLY, INC.**  
1288 WEST ROADS DRIVE  
WEST PALM BEACH, FL 33407  
PHONE: (561) 209-8263, FAX: (561) 841-1718

DRAWN BY: 12/04/11  
DATE: 11-222  
DRAWING NO. SHEET 5 OF 9



THIS SCHEDULE INDICATES REQUIRED ANCHOR SPACING FOR A GIVEN A.S.D. DESIGN LOAD AND PANEL LENGTH. HOWEVER MAXIMUM PANEL LENGTH FOR A GIVEN A.S.D. DESIGN LOAD MUST BE VERIFIED AS PER SCHEDULE ON SHEET 4 OF 8.

**MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO CONCRETE AND CONCRETE BLOCK STRUCTURES \***

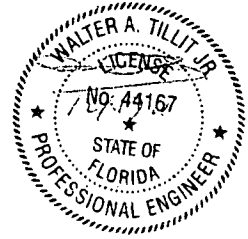
E. D. = EDGE DISTANCE

MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **												APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH 7' (ft.)	
	TAPCONS		ZAMAC NAIL/ RED HD. DYNABOLT		CALK-IN		SOLID-SET		PANELMATES		OF TAP-GRIP				
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY			
+35.0, -40.0 OR LESS	12"	12"	12"	12"	12"	12"	12"	12"	12"	12"	12"	12"	1	(TOP)	8'-0" OR LESS
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	1, 9"	(BOTTOM)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	2, 9"	(TOP)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	2	(BOTTOM)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	2A	(BOTTOM)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	3 & 4	(TOP)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	3	(BOTTOM)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	4	(BOTTOM)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	5	(TOP)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	5	(BOTTOM)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	6	(TOP)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	6	(BOTTOM)	
11"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	5A	(BOTTOM)		
11"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	7	(TOP)		
11"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	7	(BOTTOM)		
10"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	8	(TOP/BOTTOM)		
+35.0, -40.0 OR LESS	12"	12"	12"	12"	12"	12"	12"	12"	12"	12"	12"	12"	1	(TOP)	8'-0" TO 10'-0"
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	12"	8 1/2"	1, 9"	(BOTTOM)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	12"	8 1/2"	2, 9"	(TOP)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	12"	8 1/2"	2	(BOTTOM)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	12"	8 1/2"	2A	(BOTTOM)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	12"	8 1/2"	3 & 4	(TOP)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	12"	8 1/2"	3	(BOTTOM)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	12"	8 1/2"	4	(BOTTOM)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	12"	8 1/2"	5	(TOP)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	12"	8 1/2"	5	(BOTTOM)	
	10"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	10 1/2"	6	(TOP)	
	10"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	10 1/2"	6	(BOTTOM)	
9"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	10 1/2"	5A	(BOTTOM)		
9"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	10 1/2"	7	(TOP)		
9"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	10 1/2"	7	(BOTTOM)		
8"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	10 1/2"	8	(TOP/BOTTOM)		

MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **												APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH 7' (ft.)		
	TAPCONS		ZAMAC NAIL/ RED HD. DYNABOLT		CALK-IN		SOLID-SET		PANELMATES		OF TAP-GRIP					
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY				
+35.0, -40.0 OR LESS	12"	12"	12"	12"	12"	12"	12"	12"	12"	12"	12"	12"	1	(TOP)	10'-0" TO 12'-11"	
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	12"	11 1/2"	6 1/2"	1, 9"		(BOTTOM)
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	12"	11 1/2"	6 1/2"	2, 9"		(TOP)
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	12"	11 1/2"	6 1/2"	2		(BOTTOM)
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	12"	11 1/2"	6 1/2"	2A		(BOTTOM)
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	12"	11 1/2"	6 1/2"	3 & 4		(TOP)
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	12"	11 1/2"	6 1/2"	3		(BOTTOM)
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	12"	11 1/2"	6 1/2"	4		(BOTTOM)
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	12"	11 1/2"	6 1/2"	5		(TOP)
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	12"	11 1/2"	6 1/2"	5		(BOTTOM)
	10"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	10 1/2"	6	(TOP)		
	8"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	10 1/2"	6	(BOTTOM)		
7"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	9 1/2"	3A	(BOTTOM)			
7"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	9 1/2"	7	(TOP)			
7"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	9 1/2"	7	(BOTTOM)			
6"	10"	12"	12"	12"	6"	12"	12"	12"	12"	12"	9 1/2"	8	(TOP/BOTTOM)			

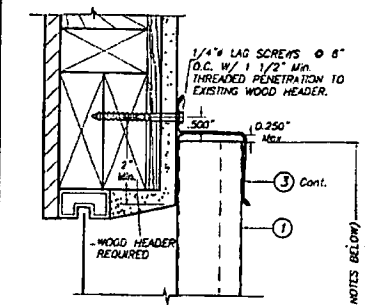
- + ONLY TAPCON ANCHORS OR ALL POINT SOLID-SET ALLOWED FOR MOUNTING SECTION 9.
- ++ ANCHORS SPACING ONLY VALID FOR ZAMAC NAIL.
- \* SEE SHEET 8 & 9 OF 9 FOR ANCHORS TYPE & SPACING FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS.
- \*\* MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACINGS SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (MIN. E. D. FOR CALK-IN ANCHORS & ELCO PANELMATE IS 2 1/2", AND 3 1/2" FOR SOLID-SET ANCHORS).

ACTUAL E. D.	FACTOR				
	TAPCON	ZAMAC NAIL/ DYNABOLT	CALK-IN	SOLID-SET	OF TAP-GRIP
3"	-	.85	.75	.78	1.00
2 1/2"	-	.71	.50	-	.80
2"	-	.50	-	-	-
1 1/2"	.35	-	-	-	-

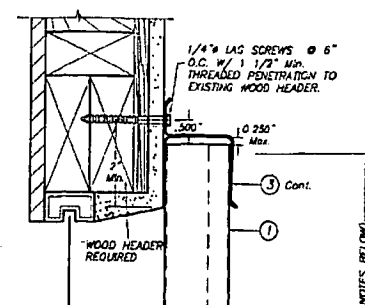


FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

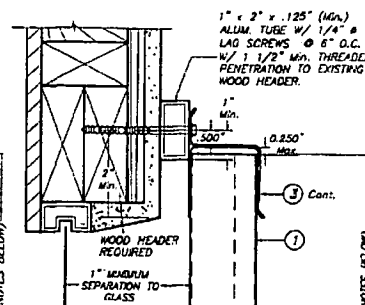
02011 TILECO, INC.	0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)	L.G./P.E./A.G. DRAWN BY:
<b>TILECO INC.</b>	<b>EASTERN METAL SUPPLY, INC.</b>	12/04/11 DATE:
TILLIT TESTING & ENGINEERING COMPANY 4228 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)299-8263, FAX: (561)841-1718		11-222
WALTER A. TILLIT JR. P.E. FLORIDA LIC. # 44167	REV. NO. DESCRIPTION DATE REV. NO. DESCRIPTION DATE	DRAWING No
	1 OLD 05-111 12/04/11 2	SHEET 8 OF 9



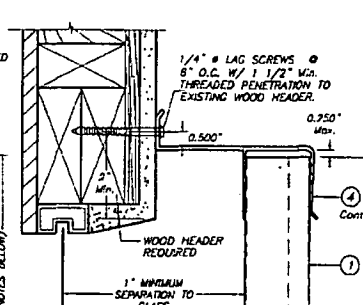
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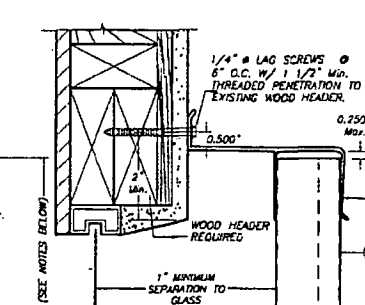
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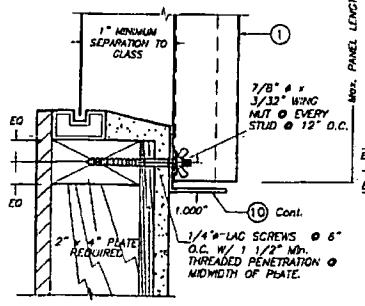
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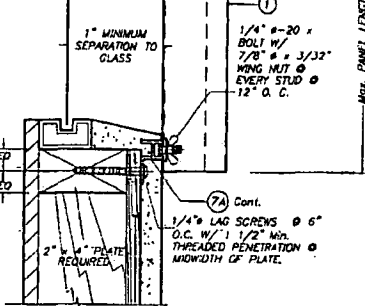
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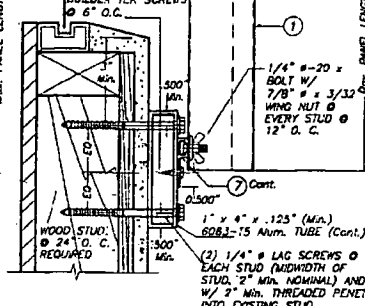
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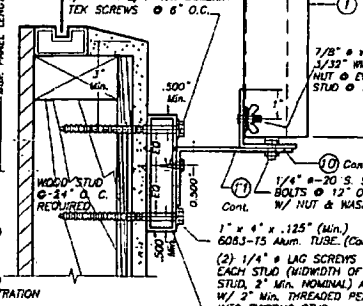
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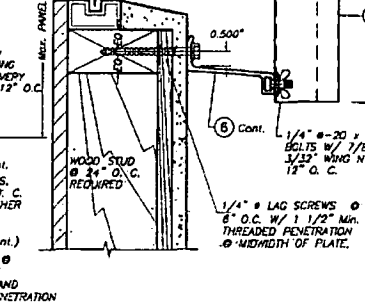
ALTERNATIVE 7



ALTERNATIVE 8



ALTERNATIVE 9



ALTERNATIVE 10

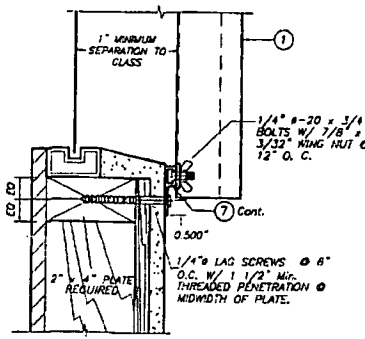
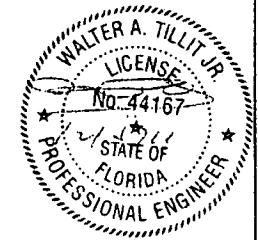
WALL MOUNTING INSTALLATIONS  
SECTIONS A

SCALE: 1/4" = 1"

- NOTES:
- INSTALLATIONS ARE ONLY VALID FOR MAX. A.S.D. DESIGN PRESSURE RATING UP TO +85.0, -72.0 psf AND PANEL'S LENGTHS UP TO 9'-0".
  - FOR WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

NOTE FOR COMBINATION OF SECTIONS:  
WALL MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

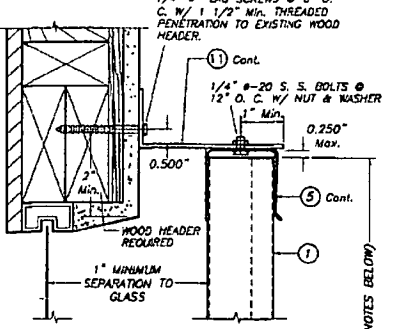
INSTALLATION DETAILS ON  
EXISTING WOOD BUILDINGS



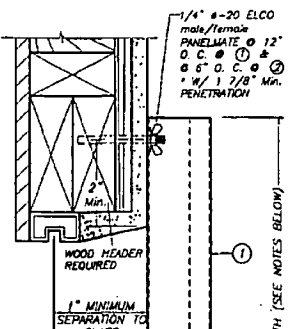
ALTERNATIVE 11

FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

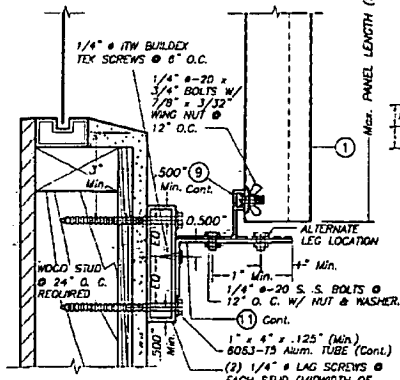
<p>TILECO INC. TILLIT TESTING &amp; ENGINEERING COMPANY 5355 W. JOHN ST., FPO. BOX 300, WEST PALM BEACH, FL 33410 PHONE: (561) 721-1200 FAX: (561) 721-1241</p>		<p>0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)</p> <p>EASTERN METAL SUPPLY, INC. 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561) 200-8283 FAX: (561) 284-1718</p>	<p>L.A.P.F.A.G. DRAWN BY: 12/06/11 DATE: 11-222 DRAWING NO. SHEET 8 OF 9</p>		
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	ADD 08-11-11	12/06/11	1		



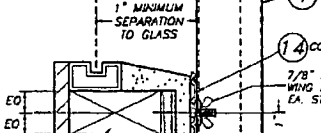
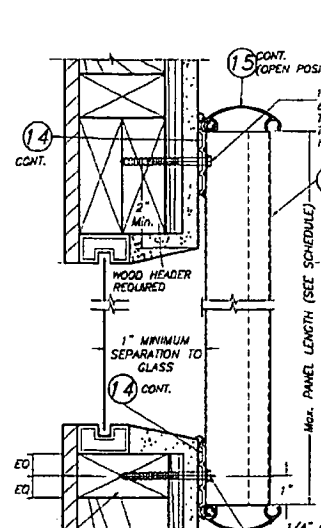
**ALTERNATIVE 8**



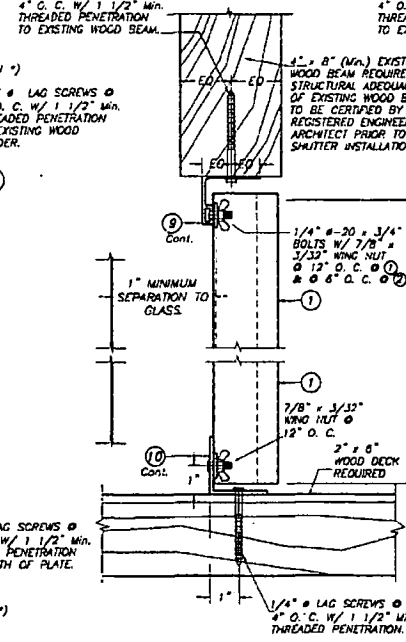
**ALTERNATIVE 9**



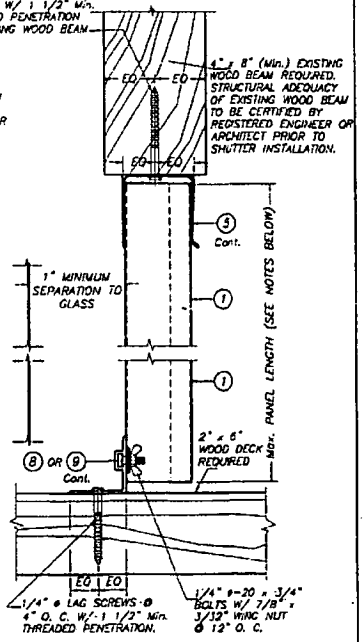
**ALTERNATIVE 10**



SECTION @ STUD TYP. TOP/BOTTOM  
**ALTERNATIVE 11**



**ALTERNATIVE 1**



**ALTERNATIVE 2**

**CEILING & FLOOR MOUNTING INSTALLATIONS**

**SECTIONS B**

SCALE: 1/4" = 1"

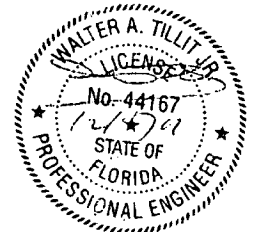
\* NOTE: SNAP CAP (13) TO REMAIN CLOSED AT NON HURRICANE CONDITIONS.

**WALL MOUNTING INSTALLATIONS**

SCALE: 1/4" = 1"

NOTE FOR COMBINATION OF SECTIONS:  
FLOOR/WALL/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

NOTES:  
1. INSTALLATIONS ARE ONLY VALID FOR MAX. A.S.D. DESIGN PRESSURE RATING UP TO +65.0, -72.0 psf AND PANEL'S LENGTHS UP TO 9'-0".  
2. FOR WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.



**INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS**

FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

© 2011 TILECO, INC.		0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)	L.G./R.T./A.O. DRAWN BY:
<p>TILLIT TESTING &amp; ENGINEERING COMPANY 4351 W. 30th St., Ste. ECL WECOA GARDEN, FL 33407 Phone: (813)871-1330, Fax: (813)871-1531 ED-0005719 WALTER A. TILLIT, P.E. FLORIDA Lic. # 44167</p>		<b>EASTERN METAL SUPPLY, INC</b> 4208 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)208-8263, FAX: (561)941-1710	12/08/11 DATE:
			11-222 DRAWING No.
REV. NO.	DESCRIPTION	DATE	BY
1	ADD 08-141	12/08/11	J
2			
			SHEET 9 OF 9

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri **3-11-14** Page      of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10791	BLOSSOM	A/c FINAL		Nikki
Between 9+10A	158 S River Rd - Kusler	w/ladder	Pass	CLOSE INSPECTOR <i>JK</i>
10741	ALONICIA 5 S. RIDGEVIEW	FINAL ROOF	Pass	CLOSE INSPECTOR <i>JK</i>
10750	GARY 36 RIO VISTA DR ROOF AUTHORITY	dry - IN METAL	Pass	INSPECTOR <i>JK</i>
<del>10788</del>	<del>GINA P. MANN</del>	<del>FINAL</del>		
	11 PALM PD EXPLICIT SHUTTER		Pass	<del>INSPECTOR</del> INSPECTOR <i>JK</i>
				INSPECTOR
				INSPECTOR
				INSPECTOR
				INSPECTOR

**10809**  
**PARTIAL RE-ROOF**  
**(FLAT DECK ONLY)**



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

## BUILDING PERMIT CARD

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

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	10809	DATE ISSUED:	3/21/2014
SCOPE OF WORK:	PARTIAL RE-ROOF -- (FLAT DECK ONLY)		
CONTRACTOR:	CAPPS ROOFING INC		
PARCEL CONTROL NUMBER:	13384100500001109	SUBDIVISION	PALM ROW REVISED
CONSTRUCTION ADDRESS:	11 PALM ROAD		
OWNER NAME:	CHAPMAN		
QUALIFIER:	J. BLAKE CAPPS	CONTACT PHONE NUMBER:	772 545-3446

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

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

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

INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY

### INSPECTIONS

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

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



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

### BUILDING PERMIT RECEIPT

<b>PERMIT NUMBER:</b>	10809		
<b>ADDRESS:</b>	11 PALM ROAD		
<b>DATE ISSUED:</b>	3/21/2014	<b>SCOPE OF WORK:</b>	PARTIAL RE-ROOF

<b>SINGLE FAMILY OR ADDITION /REMODEL</b>	Declared Value	\$	
---	----------------	----	--

Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)	\$	
(No plan submittal fee when value is less than \$100,000)		
Total square feet air-conditioned spa @ \$ 121.75 per sq. ft. s.f.	\$	-
Total square feet non-conditioned space, or interior remodel: @ \$ 59.81 per sq. ft. s.f.	\$	-
Total square feet remodel with new trusses: \$ 90.78 per sq. ft. s.f.	\$	-
Total Construction Value:	\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)	\$	n/a
Building fee: (1% of construction value < \$200K + \$100 per insp.)	\$	-
Total number of inspections (Value < \$200K) \$ 100.00 per insp. # insp		n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)	\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)	\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)		n/a
Martin County Impact Fee:	\$	
<b>TOTAL BUILDING PERMIT FEE:</b>	\$	\$ -

<b>ACCESSORY PERMIT</b>	Declared Value:	\$	\$ 9,000.00
Total number of inspections: @ \$ 100.00 per insp. # insp	\$	3.00	\$ 300.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)	\$	\$	4.50
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)	\$	\$	4.50
Road impact assessment: (.04% of construction value - \$5 min.)	\$	\$	5.00
<b>TOTAL ACCESSORY PERMIT FEE:</b>	\$	\$	314.00

*PA 3/25/14  
 CIG 61412*

Town of Sewall's Point  
BUILDING PERMIT APPLICATION

Permit Number: 10809

Date: 3/17/14

OWNER/LESSEE NAME: Bob Chapman Phone (Day) 716 3106663 (Fax)

Job Site Address: 11 Palm Rd. City: Stuart State: FL Zip: 34996

Legal Description: Palm Row Revised & Amended tott Parcel Control Number: 1338 41 005 000 001 109

Fee Simple Holder Name: Same as Above Address: City: State: Zip: Telephone:

\*SCOPE OF WORK (PLEASE BE SPECIFIC): \* RE ROOF FLAT DECKS ONLY

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

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

COST AND VALUES: (Required on ALL permit applications)  
Estimated Value of Improvements: \$ 9,000.00  
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
Is subject property located in flood hazard area? VE10 AE9 AE8 X  
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:  
Estimated Fair Market Value prior to improvement: \$ 157,670  
(Fair Market Value of the Primary Structure only, Minus the land value)  
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Capps Roofing, Inc. Phone: 545-3446 Fax:

Qualifiers name: J. Blake Capps Street: P.O. Box 8053 City: Abbe State: FL Zip: 33475

State License Number: CCC056739R Municipality: License Number:

LOCAL CONTACT: J Blake Capps Phone Number: 545-3442

DESIGN PROFESSIONAL: Fla. License#  
Street: City: State: Zip: Phone Number:

AREAS SQUARE FOOTAGE: Living: Garage: Covered Patios/ Porches: Enclosed Storage:  
Carport: Total under Roof: 1,000 Elevated Deck: Enclosed area below BFE:  
\* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2008  
National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS:  
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.  
2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS, SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.  
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.  
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:  
X [Signature]  
State of Florida, County of: Martin  
On This the 18th day of March 20 14  
by J. Blake Capps who is personally known to me or produced  
As identification: [Signature]  
Notary Public State of Florida  
Stephen P Frederick  
My Commission EE 868848  
Expires 01/27/2017

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:  
X [Signature]  
State of Florida, County of: Martin  
On This the 18th day of March 20 14  
by J. Blake Capps who is personally known to me or produced  
As identification: [Signature]  
Notary Public State of Florida  
Stephen P Frederick  
My Commission EE 868848  
Expires 01/27/2017

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



THIS DOCUMENT HAS A COLORED BACKGROUND. MICROPRINTING AND WATERMARK PAPER.

AC# 6141487

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

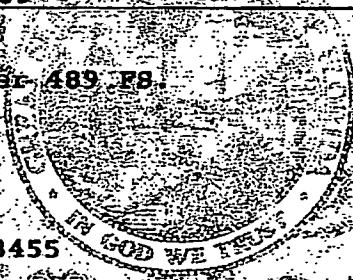
SEQ# L12052600321

DATE	BATCH NUMBER	LICENSE NBR
05/26/2012	118191501	CC056739

The ROOFING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2014

CAPPS, JAMES BLAKE  
CAPPS ROOFING INC  
8686 SE ALABAMA PL  
HOBE SOUND

FL 33455



RICK SCOTT  
GOVERNOR

KEN LAWSON  
SECRETARY

DISPLAY AS REQUIRED BY LAW

2013-2014 **MARTIN COUNTY ORIGINAL  
BUSINESS TAX RECEIPT**

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR  
3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994  
(772) 288-5604

ACCOUNT 1993-520-0072 CERT \_\_\_\_\_  
PHONE (772) 545-3442 SIC NO 023561

LOCATION:  
8686 SE ALABAMA PL HS

CHARACTER COUNTS IN MARTIN COUNTY

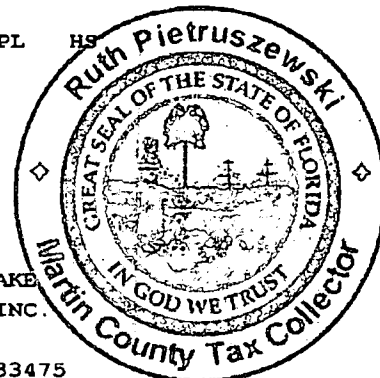
PREV YR. S	<u>.00</u>	UC. FEE S	<u>26.25</u>
S	<u>.00</u>	PENALTY S	<u>.00</u>
S	<u>.00</u>	COL. FEE S	<u>.00</u>
S	<u>.00</u>	TRANSFER S	<u>.00</u>
TOTAL			<u>26.25</u>

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION  
OF **ROOFING CONTRACTOR**

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

07 DAY OF AUGUST 2013  
AND ENDING SEPTEMBER 30, 2014

CAPPS, JAMES BLAKE  
CAPPS ROOFING, INC.  
P.O. BOX 8053  
HOBE SOUND, FL 33475



11 2012 31020.0001 26.25 PAID

THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE.

ANYONE DOING BUSINESS WITHOUT A VALID BUSINESS TAX RECEIPT IS SUBJECT TO A \$250 FINE. IF NOT PAID BY OCT. 1, A DELINQUENT PENALTY OF 10% FOR THE MONTH OF OCTOBER, PLUS A 5% PENALTY FOR EACH MONTH THEREAFTER UP TO 25%, PLUS COLLECTION COSTS WILL APPLY.

NOTE - A PENALTY IS IMPOSED FOR FAILURE TO KEEP THIS BUSINESS TAX RECEIPT EXHIBITED CONSPICUOUSLY AT YOUR ESTABLISHMENT OR PLACE OF BUSINESS.



CAPH002

CP ID: MC

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/21/13

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> J.W. Edens & Company Commercial Ins of Brevard, Inc 325 Fifth Avenue, Suite 108 Indialantic, FL 32903 Phillip Lane	321-725-7000  321-725-7856	<b>CONTACT NAME:</b> <b>PHONE</b> (A/C, No, Ext): <b>E-MAIL ADDRESS:</b>  <b>INSURER(S) AFFORDING COVERAGE</b> <b>NAIC #</b>
<b>INSURED</b> Capps Roofing, Inc. P.O Box 8053 Hobe Sound, FL 33475	<b>INSURER A:</b> Canal Indemnity Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR LWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY		GL105034	08/21/13	08/21/14	EACH OCCURRENCE : \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) : \$ 50,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) : \$ 5,000
						PERSONAL & ADV INJURY : \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE : \$ 2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					PRODUCTS - COMP/OP AGG : \$ 2,000,000
	<b>AUTOMOBILE LIABILITY</b>					COMBINED SINGLE LIMIT (Ea accident) : \$
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) : \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) : \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident) : \$
	<input type="checkbox"/> UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE : \$
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE : \$
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>					WC STATU-TORY LIMITS : \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/N	N/A			OTH-ER : \$
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. EACH ACCIDENT : \$
						E.L. DISEASE - EA EMPLOYEE : \$
						E.L. DISEASE - POLICY LIMIT : \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

<b>INSURED</b>  <b>For Insured's Information</b>	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE Phillip Lane
--	---

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

# SELF INSURERS FUND

1-800-767-3772 • FAX (407) 671-2520

## CERTIFICATE OF INSURANCE

**ISSUED TO:**

Capps Roofing Inc.  
P.O. Box 8053  
Hobe Sound, FL 33475

**COPY PROVIDED TO:**

Capps Roofing, Inc.  
P.O. Box 8053  
Hobe Sound, FL 33475

Attention:

Capps Roofing, Inc.


**This is to Certify that:** P.O. Box 8053  
Hobe Sound, FL 33475

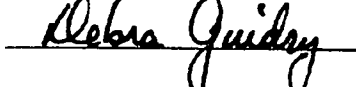
being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND, P.O. Box 4907, Winter Park, FL 32793.

COVERAGE NUMBER:	<u>870-032496</u>	<u>LIMITS</u>	
EFFECTIVE DATE:	<u>1/1/2014</u>	Workers' Compensation:	Statutory - State of Florida
EXPIRATION DATE:	<u>1/1/2015</u>	Employers' Liability:	\$100,000.00 Each Accident
			\$100,000.00 Disease, Each Employee
			\$500,000.00 Disease, Policy Limit

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

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

By:   
Brett Stiegel, Administrator  
FRSA-SIF

By:   
Debra Guidry, CPCU, Underwriting Manager  
FRSA-SIF



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

Site Provided by...  
governmentmax.com 1.11

Summary



Owner  
4 of 4

Tabs

Summary

Print View

Land

Improvements

Assessments &

Exemptions

Sales

Taxes →

NEW: Navigator

Parcel Map →

Notice of Prop.

Taxes →

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
13-38-41-005-000-00110-9	27818	11 PALM RD, SEWALL'S POINT	\$332,670	3/15/2014

Owner Information

<b>Owner(Current)</b>	CHAPMAN ROBERT T
<b>Owner/Mail Address</b>	11 PALM RD STUART FL 34996
<b>Sale Date</b>	12/30/2013
<b>Document Book/Page</b>	2695 1395
<b>Document No.</b>	2433428
<b>Sale Price</b>	448000

Searches

Parcel ID

Owner

Address

Account #

Use Code

Legal Description

Neighborhood

Sales

Navigator

Maps →

Location/Description			
<b>Account #</b>	27818	<b>Map Page No.</b>	SP-05
<b>Tax District</b>	2200	<b>Legal Description</b>	PALM ROW REVISED & AMENDED LOT 11
<b>Parcel Address</b>	11 PALM RD, SEWALL'S POINT		
<b>Acres</b>	.3460		

Functions

Property Search

Contact Us

On-Line Help

County Home

Site Home

County Login

Parcel Type	
<b>Use Code</b>	0100 Single Family
<b>Neighborhood</b>	120200 Heritage P, Palmtto Pk,Rdglnd,

Assessment Information

<b>Market Land Value</b>	\$175,000
<b>Market Improvement Value</b>	\$157,670
<b>Market Total Value</b>	\$332,670

Print Back to List First Previous Next Last



CAPH002

OP ID: KM

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
03/18/14

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER <b>J.W. Edens &amp; Company</b> Commercial Ins of Brevard, Inc 325 Fifth Avenue, Suite 108 Indialantic, FL 32903 Phillip Lane	321-725-7000 321-725-7856	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS:	FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE <b>INSURER A : Canal Indemnity Company</b>		NAIC #
INSURED <b>Capps Roofing, Inc.</b> <b>P.O Box 8053</b> <b>Hobe Sound, FL 33475</b>	INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :		

**COVERAGES**

CERTIFICATE NUMBER:

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WWR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		GL105034	08/21/13	08/21/14	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A			WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

**CERTIFICATE HOLDER**

SEWALLS

Town of Sewall's Point  
 One South Sewall's Point Rd.  
 Stuart, FL 34996

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Phillip Lane*

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THIS DOCUMENT HAS A COLORED BACKGROUND. MICROPRINTING. INK MARK. PATENTED PAPER.

AC# 6141487

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L12052600321

DATE	BATCH NUMBER	LICENSE NBR
05/26/2012	L18191501	CCC056739

The ROOFING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2014

CAPPS, JAMES BLAKE  
CAPPS ROOFING INC  
8686 SE ALABAMA PL  
HOBE SOUND

FL 33455



RICK SCOTT  
GOVERNOR

KEN LAWSON  
SECRETARY

DISPLAY AS REQUIRED BY LAW

2013-2014 **MARTIN COUNTY ORIGINAL**  
**BUSINESS TAX RECEIPT**  
 HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR  
 3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994  
 (772) 283-5604

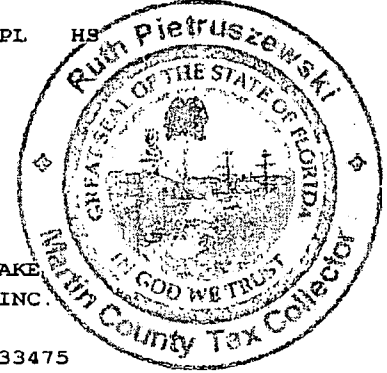
ACCOUNT 1993-520-0072 CERT \_\_\_\_\_  
 PHONE (772) 545-3442 SIC NO 023561  
 LOCATION  
 0686 SE ALABAMA PL HS

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR.	\$ .00	LIC. FEE	\$ 26.25
	\$ .00	PENALTY	\$ .00
	\$ .00	COL FEE	\$ .00
	\$ .00	TRANSFER	\$ .00
TOTAL		26.25	

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

CAPPS, JAMES BLAKE  
 CAPPS ROOFING, INC  
 P.O. BOX 8053  
 HOBE SOUND, FL 33475



07 DAY OF AUGUST 2014 TO 13  
 AND ENDING SEPTEMBER 30.

11 2012 31020.0001 26.25 PAID

THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE.

ANYONE DOING BUSINESS WITHOUT A VALID BUSINESS TAX RECEIPT IS SUBJECT TO A \$250 FINE. IF NOT PAID BY OCT. 1, A DELINQUENT PENALTY OF 10% FOR THE MONTH OF OCTOBER, PLUS A 5% PENALTY FOR EACH MONTH THEREAFTER UP TO 25%, PLUS COLLECTION COSTS WILL APPLY.

NOTE - A PENALTY IS IMPOSED FOR FAILURE TO KEEP THIS BUSINESS TAX RECEIPT EXHIBITED CONSPICUOUSLY AT YOUR ESTABLISHMENT OR PLACE OF BUSINESS.





# CERTIFICATE OF LIABILITY INSURANCE

CAPH002

CP ID: MC

DATE (MM/DD/YYYY)

08/21/13

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> J.W. Edens & Company Commercial Ins of Brevard, Inc 225 Fifth Avenue, Suite 108 Indialantic, FL 32903 Phillip Lane	321-725-7000 321-725-7856	<b>CONTACT NAME:</b> <b>PHONE</b> (A/C, No, Ext): <b>FAX</b> (A/C, No): <b>E-MAIL ADDRESS:</b>
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURER A:</b> Canal Indemnity Company		<b>NAIC #</b>
<b>INSURED</b> Capps Roofing, Inc. P.O Box 8053 Hobe Sound, FL 33475		<b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

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

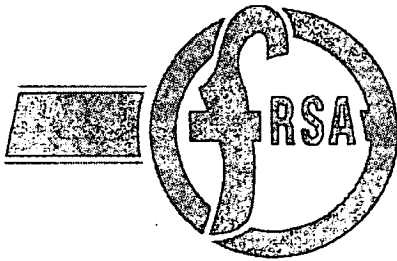
INSR LTR	TYPE OF INSURANCE	ADDL/SUBR INSR / WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		GL105034	08/21/13	08/21/14	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					
	<input type="checkbox"/> RETENTION \$					
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below					
WC STATUTORY LIMITS: <input type="checkbox"/> OTHER: <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

<b>INSURED</b>  For Insured's Information	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Phillip Lane

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

**SELF INSURERS FUND**

1-800-767-3772 • FAX (407) 671-2520

**CERTIFICATE OF INSURANCE**

**ISSUED TO:**

Capps Roofing Inc.  
P.O. Box 8053  
Hobe Sound, FL 33475

**COPY PROVIDED TO:**

Capps Roofing, Inc.  
P.O. Box 8053  
Hobe Sound, FL 33475

Attention:

Capps Roofing, Inc.

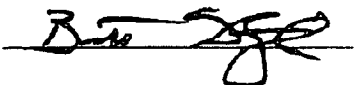
**This is to Certify that:** P.O. Box 8053  
Hobe Sound, FL 33475

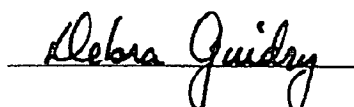
being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND, P.O. Box 4907, Winter Park, FL 32793.

COVERAGE NUMBER:	<u>870-032496</u>	<u>LIMITS</u>	
EFFECTIVE DATE:	<u>1/1/2014</u>	Workers' Compensation:	Statutory - State of Florida
EXPIRATION DATE:	<u>1/1/2015</u>	Employers' Liability:	\$100,000.00 Each Accident
			\$100,000.00 Disease, Each Employee
			\$500,000.00 Disease, Policy Limit

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

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

By:   
Brett Stiegel, Administrator  
FRSA-SIF

By:   
Debra Guidry, CPCU, Underwriting Manager  
FRSA-SIF



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

# SELF INSURERS FUND

1-800-767-3772 • FAX (407) 671-2520

## CERTIFICATE OF INSURANCE

**ISSUED TO:**

Town Of Sewall's Point  
1 So. Sewall's Point Rd.  
Sewall's Point, FL 34996

**COPY PROVIDED TO:**

Capps Roofing, Inc.  
P.O. Box 8053  
Hobe Sound, FL 33475

Attention: To Whom It May Concern

Capps Roofing, Inc.

**This is to Certify that:** P.O. Box 8053  
Hobe Sound, FL 33475

being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND, P.O. Box 4907, Winter Park, FL 32793.

COVERAGE NUMBER:	<u>870-032496</u>	<u>LIMITS</u>	
EFFECTIVE DATE:	<u>1/1/2014</u>	Workers' Compensation:	Statutory - State of Florida
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			\$100,000.00 Disease, Each Employee
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By: Brett Stiegel  
Brett Stiegel, Administrator  
FRSA-SIF

By: Debra Guidry  
Debra Guidry, CPCU, Underwriting Manager  
FRSA-SIF

**NOTICE OF COMMENCEMENT**

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00 (AS APPLICABLE)

PERMIT #: \_\_\_\_\_ TAX FOLD #: 13-38-41-005-000-001109

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE): lot 11  
GENERAL DESCRIPTION OF IMPROVEMENT: re-roof of 2 flat roofs

OWNER NAME OR LESSEE INFORMATION, IF LESSEE CONTRACTED FOR THE IMPROVEMENT  
NAME: Robert Chapman  
ADDRESS: 11 Palm Trl, Stuart, FL 34996  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
INTEREST IN PROPERTY: fee simple

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

CONTRACTOR: CADDS Roofing, Inc.  
ADDRESS: P.O. Box 8053, Hobe Sound, FL 33455  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

SURETY COMPANY (IF APPLICABLE, A COPY OF THE PAYMENT BOND IS ATTACHED)  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_  
BOND AMOUNT: \_\_\_\_\_

LENDER/MORTGAGE COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

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

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES \_\_\_\_\_ OF \_\_\_\_\_ TO RECORD A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES:

PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_ EXPIRATION DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_

**EXPIRATION DATE MAY NOT BE BEFORE THE COMPLETION OF CONSTRUCTION AND FINAL PAYMENT TO CONTRACTOR BUT WILL BE ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED**

**WARNING TO OWNER:** ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS IN IT ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF (SECTION 92.525, FLORIDA STATUTES).

[Signature]  
SIGNATURE OF OWNER OR LESSEE OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER/ATTORNEY-IN-FACT

SIGNATORY'S TITLE/OFFICE \_\_\_\_\_

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 21<sup>ST</sup> DAY OF MARCH, 2014

BY: ROBERT THOMAS CHAPMAN FOR \_\_\_\_\_  
NAME OF PERSON TYPE OF AUTHORITY PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN \_\_\_\_\_ OR PRODUCED IDENTIFICATION  TYPE OF IDENTIFICATION PRODUCED FL D/L C 155-778-66-109-0

[Signature]  
NOTARY SIGNATURE/SEAL



STATE OF FLORIDA  
MARTIN COUNTY  
THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGE(S) IS A TRUE AND CORRECT COPY OF THE ORIGINAL DOCUMENT AS FILED IN THIS OFFICE.  
DATE: \_\_\_\_\_ BY: Carolyn Timmann CLERK





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996  
Tel 772-287-2455 Fax 772-2204765

**RESIDENTIAL REROOF WINDSTORM LOSS  
MITIGATION CERTIFICATION (FLORIDA STATUTE 553.844)**

**ALL RE-ROOFS REGARDLESS OF VALUE SHALL COMPLY WITH THE FOLLOWING:**

**Re-nailing:** All sheathing and decking shall be re-nailed per section 201.1 and a secondary water barrier installed.

- Existing fasteners that are 8d clipped head, round head or ring shank and spaced 6 in. or less o.c. may be counted. Additional fasteners shall be 8d ring shank nails with round heads spaced at 6 in. o.c. along framing.
- Indicate below which method is to be used to satisfy the secondary water barrier requirements:

\_\_\_\_\_ All joints in roof sheathing shall be covered with a minimum of 4 in. strip of self-adhering polymer modified bitumen tape. Wood deck and self-adhering tape shall be covered by one layer of approved underlayment.

\_\_\_\_\_ Entire roof deck shall be covered with an approved self-adhering polymer modified bitumen cap sheet. No additional underlayment is required.

\_\_\_\_\_ Outside of the HVHZ, an underlayment complying with section 1507.2.3 of the Florida Building Code, Building fastened as described below or a layer of asphalt impregnated approved #30 felt shall be installed. The felt is to be fastened with 1" round plastic cap or metal cap nails, attached to a nailable deck in a grid pattern of 12 inches (305 mm) staggered between the overlaps, with 6-inch (152 mm) spacing at the overlaps. For slopes of 2:12 to 4:12 an additional layer of felt shall be installed in a single-fashion and lapped 19" and fastened as described above. (No additional underlayment shall be required over the top of this sheet.)

\_\_\_\_\_ Exception: An approved 30# underlayment installed per HVHZ using nails and tin-tags and covered with an approved self-adhering polymer modified bitumen cap sheet or an approved cap sheet hot-moped shall be deemed to meet the requirements for secondary water barrier.

**Residential Structures valued at \$300,000 or more shall comply with the following:**

- Roof to wall connections must be enhanced up to 15% additional cost of the re-roofing cost.
- A certified or registered general, building or residential contractor compliance affidavit must accompany the re-roof permit application and submit details to perform the following:
  1. Sufficient amount of eave sheathing shall be removed to view 6 ft. of roof rafters.
  2. Wherever a strap is missing or an existing strap has fewer than 4 fasteners on each end of connection with the wall, the connection shall be strengthened by adding:
    - a. Metal connectors, clips, straps and fasteners to achieve an uplift capacity as specified in Table 201.3 OR
    - b. Approved strap ties or right angle gusset brackets with a minimum uplift capacity of 500 lbs shall be installed to the top plate or masonry wall below
    - c. Refer to sections 201.3.1 to 201.3.4 for prescriptive requirements.



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

RE-ROOF CERTIFICATION

TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY

PERMIT # \_\_\_\_\_  
 CONTRACTOR'S NAME: Capps Roofing Inc PHONE #: 545-3442 FAX: \_\_\_\_\_  
 OWNER'S NAME: Bob Chapman  
 CONSTRUCTION ADDRESS: 11 Palm Rd. CITY Stuart STATE 34996  
 RE-ROOF:  RESIDENTIAL(SINGLE FAMILY)

COMMERCIAL \*\*--REMOVE/REINSTALL ROOF TOP HVAC EQUIP  YES  NO

\*\*...DISCONNECT/RECONNECT HVAC ELECTRIC  YES  NO

\*\* REQUIRES A CONTRACTOR VERIFICATION FORM (HVAC AND/OR ELECTRICAL) W/ PERMIT APPLICATION

RE-ROOF DEEMED TO COMPLY WITH 553.844 F. S.  YES  NO - INSURED VALUE OF RESIDENCE: \$ \_\_\_\_\_

ROOF TYPE:  HIP  BOSTON-HIP  GABLE  FLAT  OTHER

ROOF PITCH: 1/4 /12 SLOPE

ROOF DECK: \*  SHEATH-OVER - (APPLYING PLYWOOD PANELS OVER EXISTING SPACED  
 RE-SHEATH - (REMOVAL OF SPACED SHEATHING/PLYWOOD FOR APPLICATION OF  
 NEW PLYWOOD PANELS) - REQUIRES USE OF MINIMUM PLYWOOD AS PER  
 FLORIDA BUILDING CODE "2004".  
 SPACED SHEATH FILL-IN - SPACES BETWEEN EXISTING SPACED-  
 SHEATHING BOARD MAY BE FILLED-IN WITH BOARDS OF THE SAME  
 SIZE AND THICKNESS TO PROVIDE A CLOSELY FITTED SOLID DECK  
 NAIL NEW BOARDS AS PER FLORIDA BUILDING CODE "2004".

EXISTING DECK TO REMAIN/REPAIRED & RENAILED

EXISTING ROOF COVERING: modified bitumen EXISTING COVERING TO BE REMOVED? YES  NO

PROPOSED NEW ROOF COVERING: 11 11  
 MANUFACTURER Certaik PRODUCT NAME GMS FlexHastic PRODUCT APPR # 13-0204.03

(APPROVED ROOF COVERING MATERIAL WITH CURRENT FLORIDA PRODUCT APPROVAL)  
 MANUFACTURER'S INSTALLATION SPECS MUST BE ON THE JOB SITE AT TIME OF INSPECTION.

\*WHEN CONCRETE/CLAY TILES REPLACE ANY OTHER TYPE OF ROOF COVERING, THE EXISTING TRUSSES SHALL BE  
 INSPECTED BY A FLORIDA REGISTERED ARCHITECT OR ENGINEER TO VERIFY ADEQUACY OF THE TRUSSES TO SUPPORT  
 INCREASED DEAD LOADS. AN ENGINEERING INSPECTION REPORT SHALL BE SUBMITTED WITH THE PERMIT APPLICATION.

PROPOSED FLASHING:  GALV./STEEL  ALUMINUM  COPPER  OTHER \_\_\_\_\_

RIDGEVENT TO BE INSTALLED:  YES  NO

DESCRIPTION OF WORK: TEAR off modified bitumen on 2 flat roofs. Install modified bitumen

I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE  
 WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

SIGNATURE OF CONTRACTOR: [Signature] DATE: 3/17/14





DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES (RER)  
BOARD AND CODE ADMINISTRATION DIVISION

**NOTICE OF ACCEPTANCE (NOA)**

MIAMI-DADE COUNTY  
PRODUCT CONTROL SECTION  
11805 SW 26 Street, Room 208  
Miami, Florida 33175-2474  
T (786)315-2590 F (786) 31525-99  
[www.miamidade.gov/economy](http://www.miamidade.gov/economy)

**CertainTeed Corporation**  
1400 Union Meeting Road, P.O. Box 1100  
Blue Bell, PA 19422-0761

**SCOPE:**

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed and accepted by Miami-Dade County RER - Product Control Section 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 Section (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. RER reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Section 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 of the Florida Building Code.

**DESCRIPTION:** CertainTeed Modified Bitumen Roofing Systems over Wood Decks.

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

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

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

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

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

This NOA renews and revises NOA No. 08-0410.09 and consists of pages 1 through 32.  
The submitted documentation was reviewed by Jorge L. Acebo.



NOA No.: 13-0204.03  
Expiration Date: 06/19/14  
Approval Date: 05/30/13  
Page 1 of 32



**Membrane Type:** SBS MODIFIED  
**Deck Type II:** Wood, Non-Insulated  
**Deck Description:** <sup>19</sup>/<sub>32</sub>" or greater plywood or wood plank  
**System Type E(4):** Base sheet mechanically fastened.

**All General and System Limitations apply.**

**Base Sheet:** One ply of All Weather/Empire Base Sheet, Glas Base or Flintglas Premium Ply Sheet (Type VI) mechanically attached as detailed below.

**Fastening:** Base sheet shall be lapped 4" and fastened with 11 ga. annular ring shank nails and approved tin caps 8" o.c. in the lap and three rows staggered in the center of the sheet 8" o.c.

**Ply Sheet:** (Optional) One ply of All Weather/Empire Base Sheet, Ultra Poly SMS, Glas Base, Flex-I Glas Base, Flex-I Glas FR Base or Poly SMS or one or more Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. or one ply of Black Diamond Base Sheet (for use with a torched cap sheet only) self-adhered.

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

**Surfacing:** (Optional) Any coating, listed below, used as a surfacing, must be listed within a current NOA. Install one of the following:

1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
2. Karnak (#97 AF) Fibrated Aluminum Roof Coating, FlintCoat A-150, APOC #212 Fibrated Aluminum Roof Coating at an application rate of 1 ½ gal. /sq.

**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 side lap 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 ( $F^m$ ) value of 275 lbf., as tested in compliance with Testing Application Standard TAS 105. If the fastener value, as field-tested, are below 275 lbf. insulation attachment shall not be acceptable.
6. Fastener spacing for mechanical attachment of anchor/base sheet or membrane attachment is based on a minimum fastener resistance value in conjunction with the maximum design value listed within a specific system. Should the fastener resistance be less than that required, as determined by the Building Official, a revised fastener spacing, prepared, signed and sealed by a Florida registered Professional Engineer, Registered Architect, or Registered Roof Consultant may be submitted. Said revised fastener spacing shall utilize the withdrawal resistance value taken from Testing Application Standards TAS 105 and calculations in compliance with Roofing Application Standard RAS 117.
7. Perimeter and corner areas shall comply with the enhanced uplift pressure requirements of these areas. Fastener densities shall be increased for both insulation and base sheet as calculated in compliance with Roofing Application Standard RAS 117. Calculations prepared, signed and sealed by a Florida registered Professional Engineer, Registered Architect, or Registered Roof Consultant (When this limitation is specifically referred within this NOA, General Limitation #9 will not be applicable.)
8. All attachment and sizing of perimeter nailers, metal profile, and/or flashing termination designs shall conform to 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 9N-3 of the Florida Administrative Code.

**END OF THIS ACCEPTANCE**



NOA No.: 13-0204.03  
Expiration Date: 06/19/14  
Approval Date: 05/30/13  
Page 32 of 32



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996  
Tel 772-287-2455 Fax 772-2204765

RE: Permit # 10809

Date 4/3/14

**Inspection Affidavit**

I J. Blake Capps, licensed as a(n) Contractor\* /Engineer/Architect,  
(please print name and circle Lic. Type) FS 468 Building Inspector\*

License #: CC056739

On or about 4/3/14, I did personally inspect the roof  
(Date & time)

deck nailing and/or secondary water barrier work at 11 Palm Rd  
(circle one) (Job Site Address)  
Stuart, FL 34996

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

J. Blake Capps  
Signature

STATE OF FLORIDA  
COUNTY OF

Sworn to and subscribed before me this 3<sup>rd</sup> day of April, 2014

By J. Blake Capps

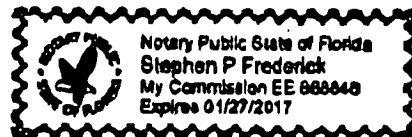
Notary Public, State of Florida

Stephen P. Frederick  
(Print, type or stamp name)

Commission No.: CE 868848

Personally known  or  
Produced Identification \_\_\_\_\_  
Type of identification produced. \_\_\_\_\_

\* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection. Include photographs of each plane of the roof with the permit # or address # clearly shown marked on the deck for each inspection.





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996  
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J. Blake Capps  
Signature

STATE OF FLORIDA  
COUNTY OF

Sworn to and subscribed before me this 3<sup>rd</sup> day of April, 2014

By J. Blake Capps

Notary Public, State of Florida

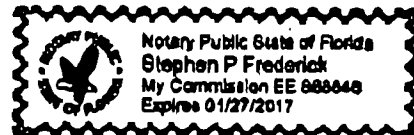
Stephen P. Frederick  
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Commission No.: CE 868848

Personally known  or  
Produced Identification

Type of identification produced. \_\_\_\_\_

\* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection. Include photographs of each plane of the roof with the permit # or address # clearly shown marked on the deck for each inspection.



# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri **4-3-14** Page      of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10750	GARY 36 RIO VISTA ROOF AUTHORITY	FINAL ROOF	PASS	CLOSE  INSPECTOR <i>[Signature]</i>
10762	16 E. HIGH PT DREAMWORKS	PLUMB. ROUGH	PARTIAL PASS	  INSPECTOR <i>[Signature]</i>
10742	CECCARZI 19 RIO VISTA O/B	CANCEL DUPLICATE		  INSPECTOR
<del>10809</del>	<del>11 PALM RD CAPPS ROOFING</del>	<del>IN PROGRESS</del>	PASS	  INSPECTOR <i>[Signature]</i>
10815	DUKE 25 ISLAND RD	BOAT LIFT 8 ROOF DOOR FINAL	PASS	CLOSE  INSPECTOR <i>[Signature]</i>
10672	DUKE 25 ISLAND CDR	TIE BEAM	PASS	  INSPECTOR <i>[Signature]</i>
				  INSPECTOR

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

4/8 - 14 Page \_\_\_\_ of \_\_\_\_

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
<del>10809</del>	<del>Chapman</del>	<del>Final</del>		
moved from 4/7	11 PALM RD CARP'S ROOFING	ROOF	RESET FOR WED	INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10756	Nichols 17 Palmetto Dr. Marc Gross 727-571-4141	Final	PASS	CLOSE INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10775	DeJorn 10 HERITAGE GSD CONT	FRAMING ELECT PLUMB	PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10769	BIRDSON 49 N. RIVER RD STIANA FENCE	FINAL FENCE	PASS	CLOSE INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

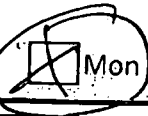
Date of Inspection  Mon  Tue  Wed  Thur  Fri **4-9-14** Page      of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10809	<del>CHAPMAN</del>	<del>ROOF-FINISH</del>		
	11 PALM RD			CANCEL
	CAPPS ROOFING			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10821	SAPP	FINAL		
	6 MIRIMAR RD	DOOR	PASS	CLOSE
	KAMRELL			INSPECTOR <i>JK</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10742	CCELLARELLI	R. ELEC		
	19 RIO VISTA		PASS	
	O/B			INSPECTOR <i>JK</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10817	LEPAW	Dry-IN		
	61 S. SEWALLS RD	METAL	PASS	
	STEVES ROOFING			INSPECTOR <i>JK</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10688	STWISKAL	PIE BEAM		
	108 S. SEWALLS RD		PASS	
	DRIFTWOOD HOMES			INSPECTOR <i>JK</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection


 Tue

 Wed

 Thur

 Fri

 4/24-14 Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10828 <u>Pm</u>	Armstrong 41 W High Point Rd Bright Elec.	Meter-final	PASS	772-529-1194 READY FOR FPL CLOSE INSPECTOR <i>JF</i>
10774	STABLER 119 HILLcrest	ALL TRADES	PASS	INSPECTOR <i>JF</i>
10672	DUKE 25 ISLAND RD CON BRICK	ROOF SHEATH TRUSS END & SHAPPING	PASS	INSPECTOR
<del>10809</del>	<del>11 PALM</del> CAPP'S ROOFING	<del>FINISH</del> ROOF	CANCEL	INSPECTOR
10820	HOODESHELL 14 COPMRE APEX PAVEN	FINAL PATIO	PASS	CLOSE INSPECTOR <i>JF</i>
2:00	PEETERSEN 104 HENRY SEWAL FLYNN'S	A/E FINAL	PASS	CLOSE INSPECTOR
				INSPECTOR



# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri 4-21-14 Page 14 of  

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10422	SHEE 30 FIELDWAY GULF STREAM	WINDOW/DOOR FINAL	PASS	CLOSE INSPECTOR <i>JS</i>
10697	DeJohn 10 Nereidae Stuart Roof Repair	Final PICTURES IN BOX ON SITE		286-0444 0260-7830 INSPECTOR
<del>10809</del>	<del>CHAPMAN</del> <del>61 S. 11th Pl</del> <del>SEWERES</del> CAPPS ROOFING	<del>FINAL</del> TREE	PASS	<del>INSPECTOR</del> INSPECTOR <i>JS</i>
	<del>PRIMA</del>	PARKING ON STREET	Pictures	INSPECTOR <i>—</i>
	ROSEAN COMB @ SIDENWALK		on	INSPECTOR <i>—</i>
	13 MIDDLE	Tree	P.D. NOV	INSPECTOR <i>—</i>
	4 INDIALUCIE PKWY	A/c STEPHEN K DUMM A/c NO PERMIT (10501 PREVIOUS)		INSPECTOR



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

## BUILDING PERMIT CARD

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

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	10879	DATE ISSUED:	5/21/2014
SCOPE OF WORK:	SHUTTER INSTALLATION		
CONTRACTOR:	EXPERT SHUTTER SERVICES		
PARCEL CONTROL NUMBER:	133841005000001109	SUBDIVISION	PALM ROW REVISED....
CONSTRUCTION ADDRESS:	11 PALM ROAD		
OWNER NAME:	CHAPMAN		
QUALIFIER:	MIKE HEISSENBERG	CONTACT PHONE NUMBER:	772 871-1915

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

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

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

INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY

### INSPECTIONS

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

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



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

**BUILDING PERMIT RECEIPT**

<b>PERMIT NUMBER:</b>	10879		
<b>ADDRESS:</b>	11 PALM ROAD		
<b>DATE ISSUED:</b>	5/21/2014	<b>SCOPE OF WORK:</b>	SHUTTER INSTALLATION

<b>SINGLE FAMILY OR ADDITION /REMODEL</b>	Declared Value	\$	
---	----------------	----	--

Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned spa @ \$ 121.75 per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel: @ \$ 59.81 per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: \$ 90.78 per sq. ft. s.f.		\$	-
Total Construction Value:		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Building fee: (1% of construction value < \$200K + \$100 per insp.)		\$	-
Total number of inspections (Value < \$200K) \$ 100.00 per insp. # insp			n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)			n/a
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		\$	\$ -

<b>ACCESSORY PERMIT</b>	Declared Value:	\$	\$ 1,143.00
Total number of inspections: @ \$ 100.00 per insp. # insp		\$ 1.00	\$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	109.00

*Pa 5/22/14  
 CK 5918  
 2 permits*

# Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: 10879

Date: \_\_\_\_\_  
 OWNER/LESSEE NAME: ROBERT T. CHAPMAN Phone (Day) 716-310-6663 (Fax) \_\_\_\_\_  
 Job Site Address: 11 PALM RD. City: STUART State: FL Zip: 34996  
 Legal Description PALM ROW REVISED & AMEND LOT 11 Parcel Control Number: 13-38-41-005-000-00110-9  
 Fee Simple Holder Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**\*SCOPE OF WORK (PLEASE BE SPECIFIC):** SHUTTER

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

**COST AND VALUES** (Required on ALL permit applications)  
 Estimated Value of Improvements: \$ 1,143.00  
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
 Is subject property located in flood hazard area? VE10 \_\_\_\_\_ AE9 \_\_\_\_\_ AE8 X  
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
 Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
 (Fair Market Value of the Primary Structure only, Minus the land value)  
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

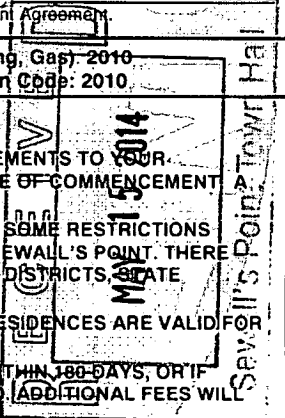
Construction Company: EXPERT SHUTTER SERVICES Phone: 871-1915 Fax: 871-0990  
 Qualifiers name: MIKE HEISSENBERG Street: 1626 SW BILBODRE ST City: PSL State: FL Zip: 34984  
 State License Number: \_\_\_\_\_ OR: Municipality: MARTIN CO. License Number: MCAL01515  
 LOCAL CONTACT: MIKE HEISSENBERG Phone Number: 201-1714  
 DESIGN PROFESSIONAL: TALTECO Fla. License# 44167  
 Street: MIAMI City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: 305 871-1530

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas) 2010  
 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

**WARNINGS TO OWNERS AND CONTRACTORS:**

- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - 5.

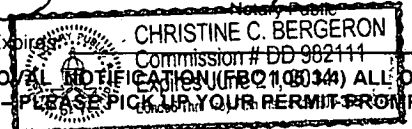


**\*\*\*\*\* A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS \*\*\*\*\***

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

**OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:**  
X Signed Contract  
 State of Florida, County of: attached  
 On This the \_\_\_\_\_ day of attached, 20\_\_\_\_  
 by \_\_\_\_\_ who is personally  
 known to me or produced \_\_\_\_\_  
 As identification: \_\_\_\_\_  
 \_\_\_\_\_  
 Notary Public  
 My Commission Expires: \_\_\_\_\_

**CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:**  
X [Signature]  
 State of Florida, County of: Stuart  
 On This the 15<sup>th</sup> day of May, 2014  
 by Michael P Neuenberg who is personally  
 known to me or produced FLD# H251-635-65-150  
 As identification: Christine C Bergeron  
 \_\_\_\_\_  
 Notary Public  
 My Commission Expires: \_\_\_\_\_



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



**CERTIFICATE OF LIABILITY INSURANCE**

EXPSS-1

OP ID: WS

DATE (MM/DD/YYYY)

06/14/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Kearns Agency of Florida Inc. P O Box 1849 Jensen Beach, FL 34958 Lawrence E. Kearns	<b>CONTACT NAME:</b> PHONE: (AIG No. EU): <b>772-871-1916</b>		<b>FAX (AIG No.):</b> 772-871-0990
	<b>E-MAIL ADDRESS:</b>		
<b>INSURED</b> Expert Shutter Services Inc 1626 SW Billmore St. Port St. Lucie, FL 34984-3411	<b>INSURER(S) AFFORDING COVERAGE</b>		<b>NAIC #</b>
	<b>INSURER A:</b> Southern Owners Insurance Co.		10190
	<b>INSURER B:</b> Auto-Owners Insurance Co.		18988
	<b>INSURER C:</b>		
	<b>INSURER D:</b>		
	<b>INSURER E:</b>		
<b>INSURER F:</b>			

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDRESS INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY		72709790	06/25/2014	06/25/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Eq occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 10,000
						PERSONAL & ADV INJURY \$ 1,000,000
						GENERAL AGGREGATE \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COM/OP AGG \$ 2,000,000
B	<input type="checkbox"/> AUTOMOBILE LIABILITY		95-434-706-00	09/01/2014	03/01/2015	COMBINED SINGLE LIMIT (Eq accident) \$ 300,000
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input checked="" type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS				PROPERTY DAMAGE (PER ACCIDENT) \$
						\$
	<input type="checkbox"/> UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE \$
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$
	<input type="checkbox"/> DFD	<input type="checkbox"/> RETENTIONS				\$
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y/N <input checked="" type="checkbox"/> N/A (Mandatory in NM) If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - CA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

**CERTIFICATE HOLDER**                      **CANCELLATION**

Bob Chapman 11 Palm Road Stuart, FL 34996	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 



# EXPERT

**SHUTTER SERVICES INC.**

"We're Taking The Shutter Industry By Storm"

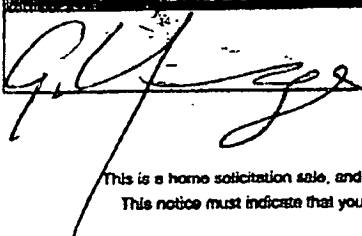

BILLING INFORMATION	DATE	JOB INFORMATION
11 PALM ROAD STUART, FL 34996	3/21/2014	BOB CHAPMAN 11 PALM ROAD STUART, FL 34996
	CONDOMINIUM SEAWALLS POINT	

PHONE 746 349 6663	CONTACT	OWNER
--------------------	---------	-------

QUANTITY	DIMENSIONS	DESCRIPTION	COST
1.	72" X 87"	SLIDING DOORS, WHITE, MILL PANELS	\$303
2.	36" X 89"	ENTRY DOORS, WHITE, MILL PANELS	\$156
3.	96" X 86"	SLIDING DOORS, WHITE, MILL PANELS	\$393
4.	42" X 50"	WINDOW, WHITE, MILL PANELS	\$104
5.	42" X 43"	WINDOW, WHITE, MILL PANELS	\$89
6.	96" X 87"	SLIDING DOORS, WHITE, MILL PANELS	\$398

SHUTTERS MEET ALL LOCAL BUILDING CODES APPROX. DELIVERY 4-6 WEEKS	TOTAL	\$1,143
FIVE YEAR WARRANTY FOR PARTS AND LABOR (SEE WARRANTY INFORMATION).	DEPOSIT	\$500
SHUTTERS MUST BE MAINTAINED PROPERLY (SEE MAINTENANCE INFORMATION).	BALANCE	\$643

SPECIAL INSTRUCTIONS:	INCLUDES \$300 TRADE IN ON PATIO ACCORDION.
115	

SALES REPRESENTATIVE	DATE	PURCHASER
 GEORGE YUSCAGAVE	3-31-14	

ALL CHECKS PAYABLE TO: EXPERT SHUTTER SERVICES INC.  
BUYERS RIGHT TO CANCEL"

*Dis 10+bob 30001.com*

This is a home solicitation sale, and if you do not want the goods or services, you may cancel this agreement by providing written notice to the seller in person, by telegram, or by mail. This notice must indicate that you do not want the goods or services and must be delivered or postmarked before midnight of the third business day after you sign this agreement. If you cancel this agreement, the seller may not keep all or part of any cash down payment.

Balance due upon completion. We reserve the right to add on 1.5% per month on any over due invoices.

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

*generated on 5/21/2014 12:55:24 PM EDT*

**Summary**

<b>Parcel ID</b>	<b>Account #</b>	<b>Unit Address</b>	<b>Market Total Value</b>	<b>Website Updated</b>
13-38-41-005-000-00110-9	27818	11 PALM RD, SEWALL'S POINT	\$332,670	5/15/2014

---

<b>Owner Information</b>	
<b>Owner(Current)</b>	CHAPMAN ROBERT T
<b>Owner/Mail Address</b>	11 PALM RD STUART FL 34996
<b>Sale Date</b>	12/30/2013
<b>Document Book/Page</b>	2695 1395
<b>Document No.</b>	2433428
<b>Sale Price</b>	448000

---

<b>Location/Description</b>			
<b>Account #</b>	27818	<b>Map Page No.</b>	SP-05
<b>Tax District</b>	2200	<b>Legal Description</b>	PALM ROW REVISED & AMENDED LOT 11
<b>Parcel Address</b>	11 PALM RD, SEWALL'S POINT		
<b>Acres</b>	.3460		

---

<b>Parcel Type</b>	
<b>Use Code</b>	0100 Single Family
<b>Neighborhood</b>	120200 Heritage P, Palmtto Pk,RdgInd,

---

<b>Assessment Information</b>	
<b>Market Land Value</b>	\$175,000
<b>Market Improvement Value</b>	\$157,670
<b>Market Total Value</b>	\$332,670



# CERTIFICATE OF LIABILITY INSURANCE

EXPESHU-01

MATERAT

DATE (MM/DD/YYYY)

6/16/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Insurance Office of America-LNG 1866 West State Road 434 Longwood, FL 32760	<b>CONTACT NAME:</b> Raquel Gonzalez <b>PHONE (A/C, No., Ext.):</b> (407) 788-3000 <b>FAX (A/C, No.):</b> (407) 788-7933 <b>E-MAIL ADDRESS:</b> Raquel.Gonzalez@ioausa.com
	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> FCI Insurance Company <b>NAIC #</b> 10178 <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
<b>INSURED</b>  Export Shutter Services, Inc. 1626 SW Biltmore Street Port St Lucie, FL 34984	

**COVERAGES**

**CERTIFICATE NUMBER:**

**REVISION NUMBER:**

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

INBR LTR	TYPE OF INSURANCE	ADDL ADDR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (PER ACCIDENT) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE OED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	001WC13A59975	06/16/2013	06/16/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

**CERTIFICATE HOLDER**

**CANCELLATION**

Bob Chapman  
 11 Palm Road  
 Stuart, FL 34996

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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### Martin County Building Department

900 SE Ruhnke Street  
Stuart, Fl 34994  
(772) 288-5482  
Fax (772) 419-6935

HEISSENBERG, MICHAEL P  
EXPERT SHUTTER SERVICES  
1626 SW BILTMORE ST  
PORT ST LUCIE, FL 34984

#### NOTICE TO ALL CONTRACTORS

**PLEASE BE ADVISED THAT MARTIN COUNTY, FLORIDA SECTION 43.42 REQUIRES COMPLIANCE WITH THE FOLLOWING EXERPT FROM THE GENERAL ORDINANCES OF THE MARTIN COUNTY CODE:**

#### PROHIBITED ACTIVITIES:

43.42 R Advertising contracting work in any advertisement to the public in a newspaper or telephone directory without including in the advertisement the number of the contractor license issued to the person or business being advertised.

43.42 S Operating any commercial vehicle in the course of conducting the practice of contracting that falls to display the contractor license number of the contractor.

If you have any questions relating to the information in this letter, please contact the Martin County Contractor's Licensing Division of the Martin County Building Department.



**MARTIN COUNTY, FLORIDA  
Contractor's Licensing  
Certificate of Competency**

**ALUMINUM/CONCRETE CONTRACTOR - MC**

License #: MCAL01515      Expires: 09/30/2015

HEISSENBERG, MICHAEL P  
EXPERT SHUTTER SERVICES  
1626 SW BILTMORE ST  
PORT ST LUCIE, FL 34984



RECEIPT FOR TAX PAID ONLY  
THIS RECEIPT DOES NOT GUARANTEE THE BUSINESS HOLDER  
THE BUSINESS HOLDER IS RESPONSIBLE FOR ALL STATE AND LOCAL  
WITHOUT VIOLATING ANY REQUIREMENTS

PORT ST. LUCIE LOCAL BUSINESS TAX RECEIPT

TERM: October 1, 2013 to September 30, 2014

This receipt does not warrant that the receipt holder is competent to perform in the business, but that the holder has paid the required tax and provides the necessary documentation (if required) for the business. Valid only when all state and local regulated trade licenses / competency cards are valid for the current fiscal year as required by law.  
THIS RECEIPT MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS  
BUSINESS ADDRESS ONLY

Business Address: 1626 SW BILTMORE ST  
Classification: CONT CONTRACTOR  
Issued to: EXPERT SHUTTER SERVICES  
1626 SW BILTMORE ST

Business Tax 104430 / 14-1013188  
Fee: 127.63  
Discount: 0.00

*Mary S. Mastri*  
BUSINESS TAX AUTHORITY

PORT ST LUCIE FL 34984

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

LOCAL BUSINESS TAX RECEIPT CITY 3766 PORT 52 LUCIE Zloperena

Fees: 127.63 Late Fees: 0.00 Total this payment: 127.63

This receipt does not warrant that the receipt holder is competent to perform in the business, but that the holder has paid the required tax and provides the necessary documentation (if required) for the business. Valid only when all state and local regulated trade licenses / competency cards are valid for the current fiscal year as required by law.

THIS RECEIPT MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS

TERM: October 1, 2013 to September 30, 2014

# RECEIPT FOR PAYMENT

Business Address: 1626 SW BILTMORE ST  
Classification: CONT CONTRACTOR

Business Tax 104430 / 14-1013188  
Fee: 127.63  
Discount: 0.00

Issued to: EXPERT SHUTTER SERVICES  
1626 SW BILTMORE ST  
LOCAL BUSINESS TAX RECEIPT  
PORT ST LUCIE FL 34984

CITY OF PORT ST. LUCIE

376 / 052 Zloperena

Fees: 127.63 Late Fees: 0.00 Total this payment: 127.63

This receipt does not warrant that the receipt holder is competent to perform in the business, but that the holder has paid the required tax and provides the necessary documentation (if required) for the business. Valid only when all state and local regulated trade licenses / competency cards are valid for the current fiscal year as required by law.

TERM: October 1, 2013 to September 30, 2014

Fees: 127.63 Late Fees: 0.00 Total this payment: 127.63

# FILE COPY

Business Address: 1626 SW BILTMORE ST  
Classification: CONT CONTRACTOR  
Issued to: EXPERT SHUTTER SERVICES  
1626 SW BILTMORE ST

Business Tax 104430 / 14-1013188  
Fee: 127.63  
Discount: 0.00  
376 / 052 Zloperena

**ALL WIND LOADS DESIGNED IN ACCORDANCE WITH ASCE 7-10**

**ROOF PITCH IS GREATER THAN 2"/12" OR  $\geq 10$  DEGREES**

PROJECT NAME:	CHAPMAN ROBERT T
ADDRESS	11 PALM RD
CITY/STATE	STUART, FL 34996
CLADDING TYPE:	STUCCO

**COMPONENTS AND CLADDING OF WALLS**

BASIC WIND SPEED(MPH)	170
EXPOSURE	D
BUILDING TYPE	CAT II
MEAN ROOF HEIGHT	18
TOP OF WINDOW OR SHUTTER HEIGHT	8
ALLOWABLE STRESS DESIGN	0.60

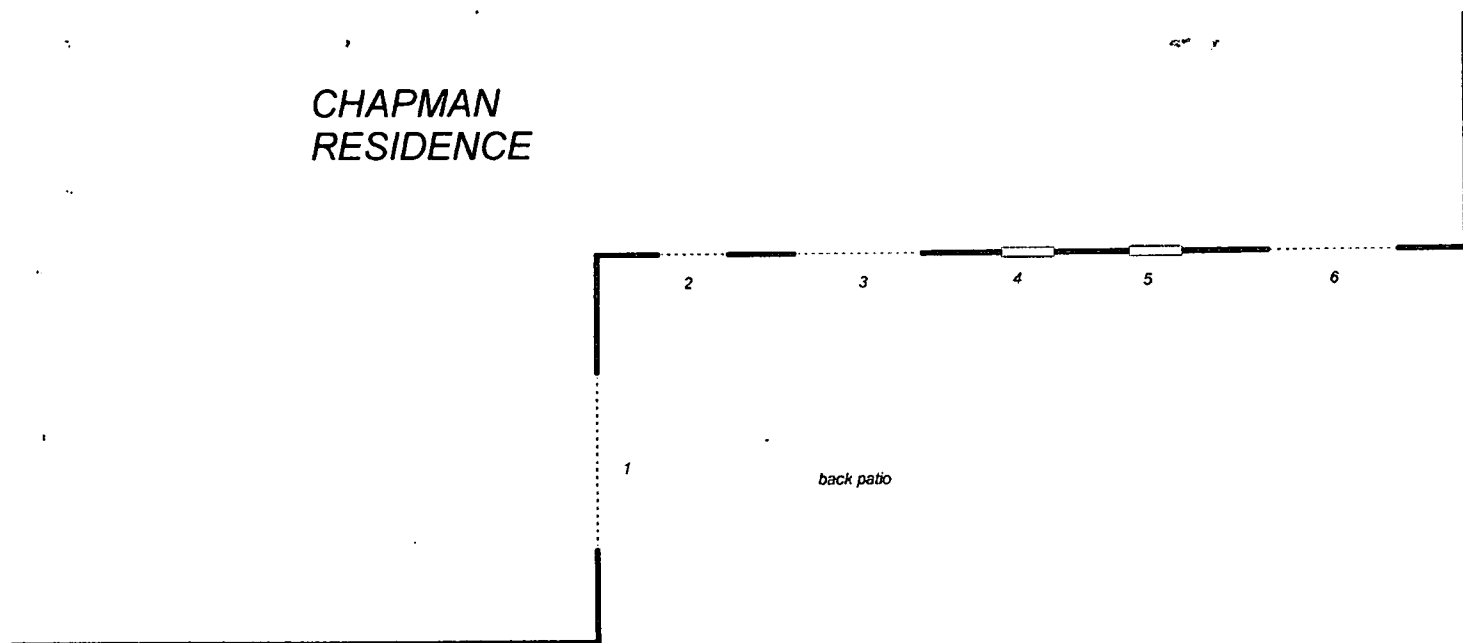
TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY

**TRIBUTARY AREAS**

ENCLOSED BUILDING $G C_{pi} = \pm 0.18$	$\leq 10$ SF	10 SF $\Rightarrow$ $\leq 20$ SF	20 SF $\Rightarrow$ $\leq 50$ SF
POSITIVE PRESSURE	45.8	43.8	41.1
NEGATIVE PRESSURE (END ZONE 5)	61.4	57.3	51.8



**CHAPMAN  
RESIDENCE**





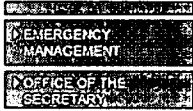
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FL #	FL11968-R1						
Application Type	Revision						
Code Version	2010						
Application Status	Approved						
Comments							
Archived	<input type="checkbox"/>						
Product Manufacturer	Eastern Metal Supply						
Address/Phone/Email	4268 Westroads Drive West Palm Beach, FL 33407 (800) 432-2204 lrodriguez@easternmetal.com						
Authorized Signature	Bill Feeley lrodriguez@easternmetal.com						
Technical Representative							
Address/Phone/Email							
Quality Assurance Representative							
Address/Phone/Email							
Category	Shutters						
Subcategory	Storm Panels						
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received						
Florida Engineer or Architect Name who developed the Evaluation Report	Walter A. Tillit, Jr.						
Florida License	PE-44167						
Quality Assurance Entity	Nation Accreditation and Management Institute						
Quality Assurance Contract Expiration Date	12/31/2013						
Validated By	John Henry Kampmann Jr. <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received						
Certificate of Independence	<a href="#">FL11968_R1_COI_EASTERN METAL_Certification of independence drwq 11-223.pdf</a>						
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th><b>Standard</b></th> <th><b>Year</b></th> </tr> </thead> <tbody> <tr> <td>ASTM E330</td> <td>2002</td> </tr> <tr> <td>SSTD 12-99</td> <td>1999</td> </tr> </tbody> </table>	<b>Standard</b>	<b>Year</b>	ASTM E330	2002	SSTD 12-99	1999
<b>Standard</b>	<b>Year</b>						
ASTM E330	2002						
SSTD 12-99	1999						
Equivalence of Product Standards Certified By							
Sections from the Code							

Product Approval Method	Method 1 Option D
Date Submitted	12/16/2011
Date Validated	12/21/2011
Date Pending FBC Approval	01/03/2012
Date Approved	01/31/2012

Summary of Products		
FL #	Model, Number or Name	Description
11968.1	.050" Bertha Storm Panel (2 1/4" ) - Drawing Number 11-222	Corrugated aluminum storm panels retained or not by tracks to provide hurricane protection
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: Large Missile. Max Span is 12'-11" for +30, -30 p.s.f. ASD and 8'-2" for +75, -80 p.s.f. ASD for mountings without "H" header. See sheet 5 of installation drawings for other spans and pressures.		<b>Installation Instructions</b> <a href="#">FL11968_R1_II_EASTERN METAL_DRWG_11-222.pdf</a> Verified By: American Test Lab of South Florida Inc. Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL11968_R1_AE_EASTERN METAL Product evaluation report drwg 11-222.pdf</a> Created by Independent Third Party: Yes
11968.2	0.040" Bertha Aluminum Storm Panel (2.25" Deep)- Non-HVHZ - Drawing Number 11-224	Corrugated aluminum storm panels retained or not by tracks to provide hurricane protection.
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: Large Missile. Max. span is 12'-0" for +25, -25 p.s.f. ASD and 4'-0" for +125, -130 p.s.f. ASD for sections 1, 3, 4, 6, 7, 8, 6A, 9 and 10. See sheet 10 of installation drawing for other spans and pressures.		<b>Installation Instructions</b> <a href="#">FL11968_R1_II_EASTERN METAL_DRWG_11-224.pdf</a> Verified By: American Test Lab of South Florida Inc. Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL11968_R1_AE_EASTERN METAL Product evaluation report drwg 11-224.pdf</a> Created by Independent Third Party: Yes
11968.3	24 Gage Galvanized Bertha Steel Storm Panel (2.25" Deep)- Non-HVHZ - Drawing Number 11-223	corrugated galvanized steel storm panels retained or not by tracks to provide hurricane protection.
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: Large Missile. Max. span is 9'-8" for +30, -40 p.s.f. ASD and 7'-2" for +70, -80 p.s.f. ASD for panels mounted without "H" header. See sheet 4 of installation drawing for other spans and pressures.		<b>Installation Instructions</b> <a href="#">FL11968_R1_II_EASTERN METAL_DRWG_11-223.pdf</a> Verified By: American Test Lab of South Florida Inc. Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL11968_R1_AE_EASTERN METAL Product evaluation report drwg 11-223.pdf</a> Created by Independent Third Party: Yes
11968.4	Clear Bertha Storm Panels (2 1/4") - Drawing Number 11-220	Corrugated Polycarbonate Storm Panels retained or not by tracks to provide hurricane protection.
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: Large Missile. Max. span is 10'-0" for +28, -28 p.s.f. ASD and 4'-0" for +105, -110 p.s.f. ASD design load. See sheet 3 of installation drawings for other spans and pressures.		<b>Installation Instructions</b> <a href="#">FL11968_R1_II_EASTERN METAL SUPPLY_DRWG_11-220.pdf</a> Verified By: American Test Lab of South Florida Inc. Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL11968_R1_AE_EASTERN METAL SUPPLY product evaluation report drwg 11-220.pdf</a> Created by Independent Third Party: Yes

Contact Us :: 1940 North Monroe Street, Tallahassee FL 32399 Phone: 850-487-1824

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Product Approval Accepts:

**GENERAL NOTES:**

1. STORM PANEL SHOWN ON THIS PRODUCT EVALUATION DOCUMENT (P.E.D.) HAS BEEN VERIFIED FOR COMPLIANCE IN ACCORDANCE WITH THE 2010 EDITION OF THE FLORIDA BUILDING CODE. THIS STORM PANEL SHALL **NOT** BE INSTALLED AT HIGH VELOCITY HURRICANE ZONES (MIAMI-DADE / BROWARD COUNTIES).

DESIGN WIND LOADS SHALL BE DETERMINED AS PER SECTION 1609 OF THE ABOVE MENTIONED CODE. FOR A WIND SPEED AS REQUIRED BY THE JURISDICTION WHERE THESE SHUTTERS WILL BE INSTALLED AND FOR A DIRECTIONALITY FACTOR  $K_d=0.85$ , USING ASCE 7-10 FOR INSTALLATIONS UNDER 2010 FBC AND SHALL NOT EXCEED THE MAXIMUM (A.S.D.) DESIGN PRESSURE RATINGS INDICATED ON SHEETS 5 THRU 9.

IN ORDER TO VERIFY THE ABOVE CONDITION, ULTIMATE DESIGN WIND LOADS DETERMINED PER ASCE 7-10 SHALL BE FIRST REDUCED TO A.S.D. DESIGN WIND LOADS BY MULTIPLYING THEM BY 0.6 IN ORDER TO COMPARE THESE W/ MAX. (A.S.D.) DESIGN PRESSURE RATINGS INDICATED ON SHEETS 5 THRU 9.

IN ORDER TO VERIFY THAT COMPONENTS AND ANCHORS ON THIS P.E.D. AS TESTED WERE NOT OVER STRESSED, A 33% INCREASE IN ALLOWABLE STRESS FOR WIND LOADS WAS **NOT** USED IN THEIR ANALYSIS. A DURATION FACTOR  $C_D=1.60$  WAS USED FOR VERIFICATION OF FASTENERS IN WOOD.

STORM PANEL'S ADEQUACY FOR IMPACT AND FATIGUE RESISTANCE HAS BEEN VERIFIED IN ACCORDANCE WITH SECTION 1609.1.2 OF THE ABOVE MENTIONED CODE AS PER AIL REPORTS # 0121.01-GBR, # 0329.01-00, # 0525.01-00 AND #0512.01-03 AND #0617.02-04, AS PER SSTD 12-99 STANDARD.

2. ALL ALUMINUM SHEET METAL PANELS SHALL HAVE 5052-H32 OR 3004-H34 ALLOY.

3. ALL ALUMINUM EXTRUSIONS SHALL BE ALUMINUM ASSOCIATION 6063-T6 ALLOY & TEMPER UNLESS OTHERWISE NOTED. STORM PANEL COMPONENTS (1) STUDDED PLATE AND (2) SNAP CAP ARE PATENT PENDING.

4. ALL SCREWS TO BE STAINLESS STEEL 304 OR 316 AISI SERIES OR CORROSION RESISTANT COATED CARBON STEEL AS PER DIN 50018 W/ 50 ksi YIELD STRENGTH AND 90 ksi TENSILE STRENGTH & SHALL COMPLY W/ FLORIDA BUILDING CODE SECTION 2411.3.3.1.

5. BOLTS TO BE ASTM A-307 GALVANIZED STEEL OR AISI 304 SERIES STAINLESS STEEL, WITH 33 ksi MINIMUM YIELD STRENGTH.

6. ANCHORS TO WALL SHALL BE AS FOLLOWS: (UNLESS OTHERWISE NOTED)

(A) TO EXISTING POURED CONCRETE:

- 1/4" # TAPCON ANCHORS AS MANUFACTURED BY I.T.W. BUILDEX.
- 1/4" # CF TAP-GRIP ANCHORS (BERTHA STUD-CON), AS MANUFACTURED BY TRU-FAST CORPORATION.
- 1/4" # ZAMAC NAILIN ANCHORS AS MANUFACTURED BY POWER FASTENERS, INC.
- 1/4" # x 7/8" CALK-IN ANCHORS OR ELCO male & female "PANELMATE" AS MANUFACTURED BY POWER FASTENERS, INC. AND ELCO CONSTRUCTION PRODUCTS, RESPECTIVELY.
- 1/4" # x 3/4" ALL POINTS SOLID-SET ANCHORS AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.

YES:

(A) MINIMUM EMBEDMENT INTO POURED CONCRETE OF TAPCON ANCHORS IS 1 3/4"; FOR ZAMAC NAILIN ANCHORS IS 1 3/8"; FOR ELCO PANELMATE ANCHORS IS 1 3/4" AND FOR CF TAP-GRIP ANCHORS IS 1 1/4".

A.2) 7/8" CALK-IN ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.

A.3) MINIMUM EMBEDMENT OF 1/4" # x 3/4" ALL POINTS SOLID-SET ANCHORS SHALL BE 7/8" INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 S.S. MACHINE SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.

A.4) IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, OR PAVERS BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS, ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1) & A.2) ABOVE.

(B) TO EXISTING CONCRETE BLOCK WALL:

- 1/4" # TAPCON ANCHORS AS MANUFACTURED BY I.T.W. BUILDEX.
- 1/4" # CF TAP-GRIP ANCHORS (BERTHA STUD-CON), AS MANUFACTURED BY TRU-FAST CORPORATION.
- 1/4" # ZAMAC NAILIN ANCHORS AS MANUFACTURED BY POWER FASTENERS, INC.
- 1/4" # x 7/8" CALK-IN ANCHORS OR ELCO male & female "PANELMATE" AS MANUFACTURED BY POWER FASTENERS, INC. AND ELCO CONSTRUCTION PRODUCTS, RESPECTIVELY.
- 1/4" # x 3/4" ALL POINTS SOLID-SET ANCHORS AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.
- 1/4" # RED HEAD DYNABOLT SLEEVE ANCHORS AS MANUFACTURED BY I.T.W. BUILDEX.

NOTES:

B.1) MINIMUM EMBEDMENT OF TAPCON, ELCO PANELMATE, AND CF TAP-GRIP ANCHORS INTO CONCRETE BLOCK UNIT SHALL BE 1 1/4"; 1 3/8" FOR ZAMAC NAILIN ANCHORS AND 1 1/8" FOR RED HEAD DYNABOLT SLEEVE ANCHORS

B.2) 7/8" CALK-IN ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE CONCRETE BLOCK UNIT. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.

B.3) MINIMUM EMBEDMENT OF 1/4" # x 3/4" ALL POINTS SOLID-SET ANCHORS SHALL BE 7/8" INTO THE CONCRETE BLOCK. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 S.S. MACHINE SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.

B.4) IN CASE THAT PRECAST STONE OR PRECAST CONCRETE PANELS BE FOUND ON THE EXISTING WALL, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES IN B.1) AND B.2) ABOVE.

(C) ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.

7. PANELS MAY ALSO BE INSTALLED HORIZONTALLY FOLLOWING INSTALLATION DETAILS SHOWN ON SECTIONS 1 THRU 8 (SHEET 3 & 4 OF 9) EXCEPT THAT HEADERS 3, 4 & 5 SHALL NOT BE USED.

8. IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE SOUNDNESS OF THE STRUCTURE WHERE SHUTTER IS TO BE ATTACHED TO INSURE PROPER ANCHORAGE. THIS SHUTTER SHALL ONLY BE ATTACHED TO CONCRETE, BLOCK OR WOOD FRAME BUILDINGS.

9. THE INSTALLATION CONTRACTOR IS TO SEAL/CAULK ALL SHUTTER COMPONENT EDGES WHICH REMAIN IN CONTINUOUS CONTACT WITH THE BUILDING TO PREVENT WIND/RAIN INTRUSION. CAULK AND SEAL SHUTTER TRACKS ALL AROUND FULL LENGTH.

10. (a) THIS P.E.D. PREPARED BY THIS ENGINEER IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR A SITE SPECIFIC PROJECT, I.E. WHERE THE SITE CONDITIONS VARY FROM THE P.E.D.

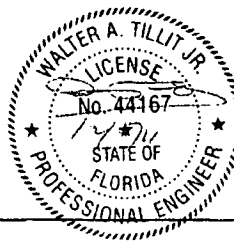
(b) CONTRACTOR TO BE RESPONSIBLE FOR THE SELECTION, PURCHASE AND INSTALLATION INCLUDING LIFE SAFETY OF THIS PRODUCT, BASED ON THIS P.E.D. PROVIDED HE/SHE DOES NOT DEVIATE FROM THE CONDITIONS DETAILED ON THIS DOCUMENT. CONSTRUCTION SAFETY AT SITE IS THE CONTRACTOR'S RESPONSIBILITY.

(c) THIS P.E.D. WILL BE CONSIDERED INVALID IF ALTERED BY ANY MEANS.

(d) SITE SPECIFIC PROJECTS SHALL BE PREPARED BY A FLORIDA REGISTERED ENGINEER OR ARCHITECT WHICH WILL BECOME THE ENGINEER OF RECORD (E.O.R.) FOR THE PROJECT AND WHO WILL BE RESPONSIBLE FOR THE PROPER USE OF THE P.E.D. ENGINEER OF RECORD, ACTING AS A DELEGATED ENGINEER TO THE P.E.D. ENGINEER, SHALL SUBMIT TO THIS LATTER THE SITE SPECIFIC DRAWINGS FOR REVIEW.

(e) THIS P.E.D. SHALL BEAR THE ORIGINAL SEAL AND SIGNATURE OF THE PROFESSIONAL ENGINEER OF RECORD THEREON.

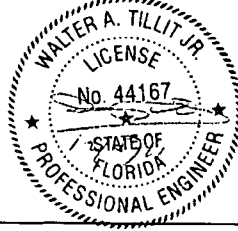
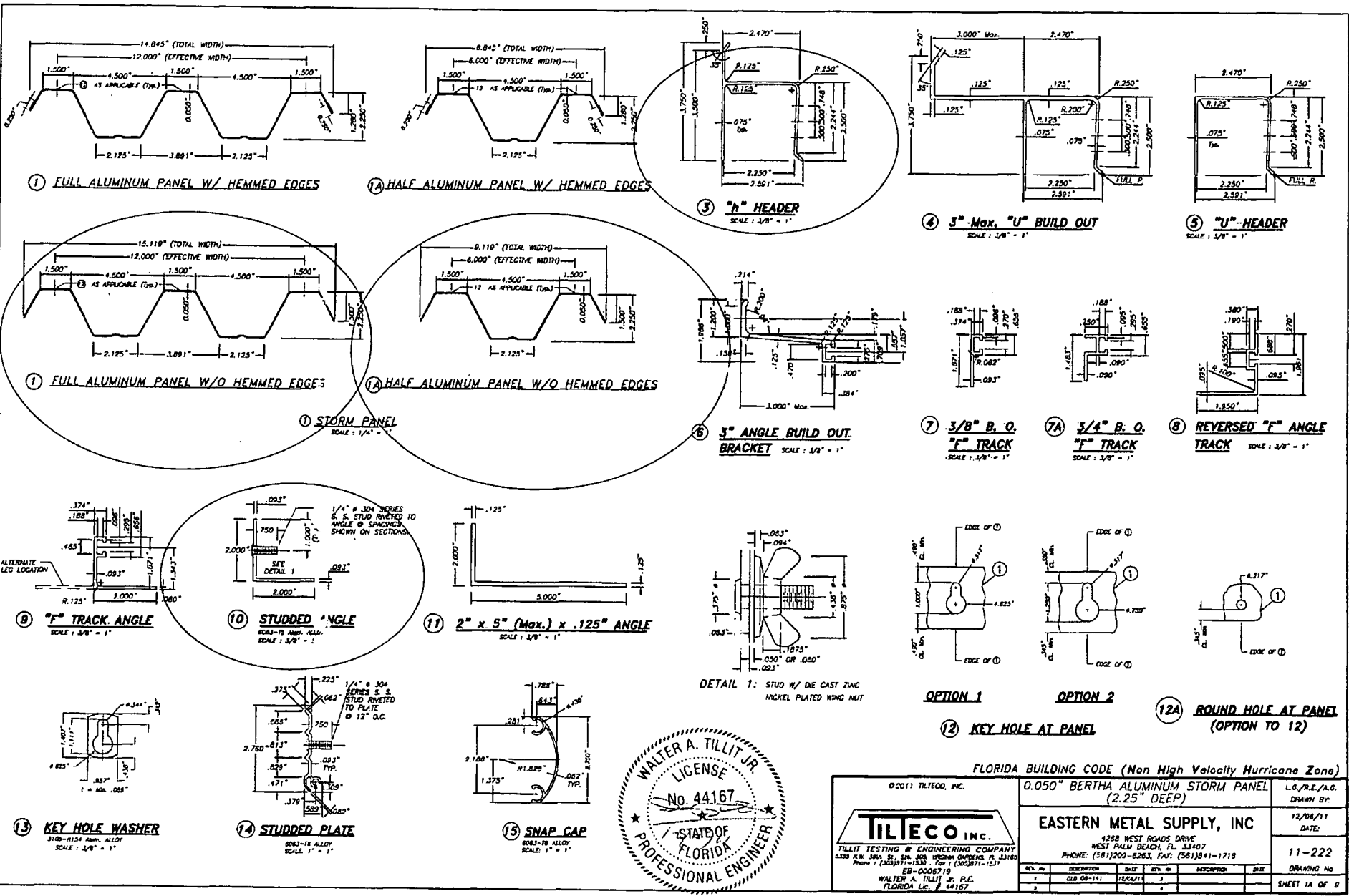
11. SHUTTER MANUFACTURER'S LABEL SHALL BE LOCATED ON A READILY VISIBLE LOCATION AT STORM PANEL IN ACCORDANCE WITH SECTION 1715.B.3 OF FLORIDA BUILDING CODE. ONE LABEL SHALL BE PLACED FOR EVERY OPENING, LABELING TO COMPLY WITH SECTION 1715.B.2 OF THE FLORIDA BUILDING CODE.



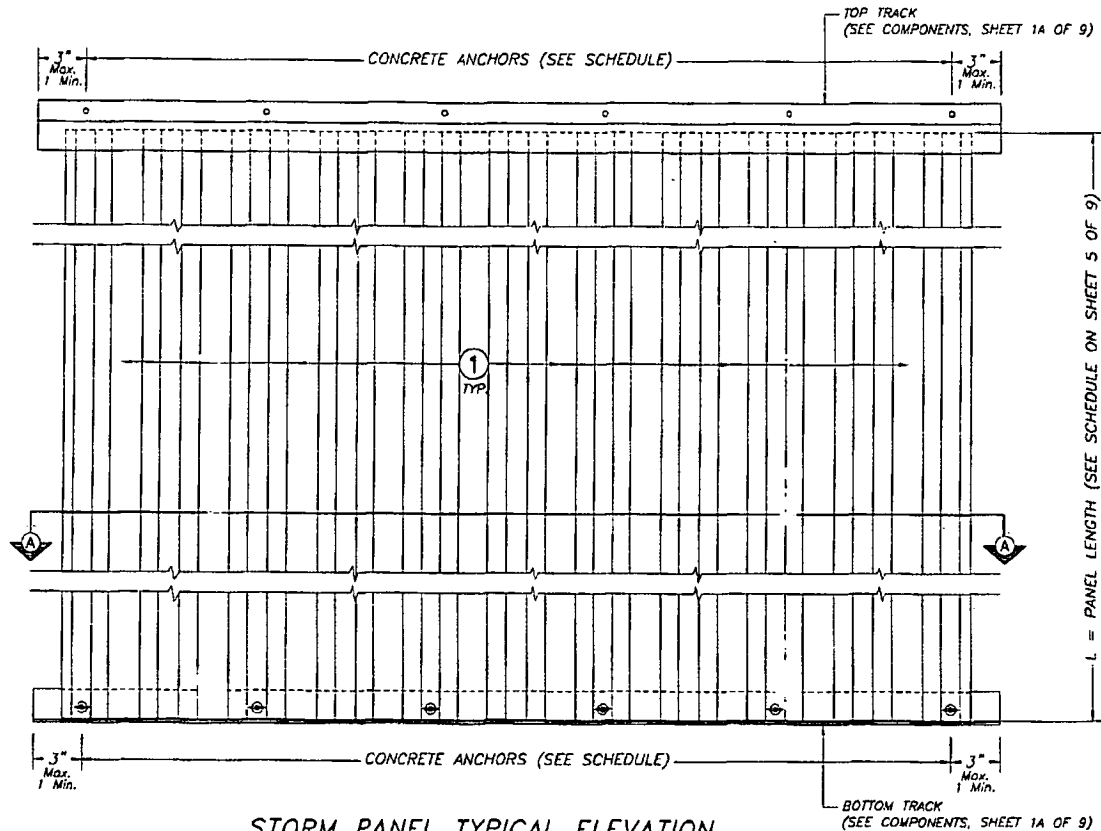
FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

© 2011 TILECO, INC.		0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)		L.O./P.E./S.D. DRAWN BY:	
		<b>EASTERN METAL SUPPLY, INC</b> 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)208-8263, FAX: (561)341-1718		12/04/11 DATE:	
				11-222	
REV. NO.	DESCRIPTION	DATE	BY	APPROVED	DRAWING NO.
1	OLD 08-141	12/04/11			SHEET 1 OF 9
2					



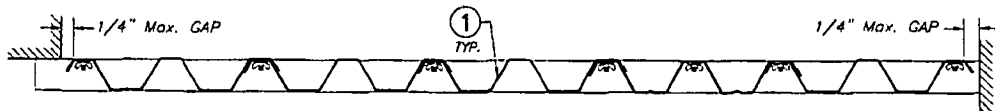


© 2011 TILECO, INC.		0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)		L.O./R.E./A.G.	
		EASTERN METAL SUPPLY, INC. 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)208-8263, FAX: (561)841-1718		12/06/11	
				DATE:	
TILLIT TESTING & ENGINEERING COMPANY 6333 N.W. 38th St., 2nd. 200, WESTON GARDENS, FL 33160 Phone: (305)877-1530, Fax: (305)877-1531 EB-00007919 WALTER A. TILLIT JR. P.E. FLORIDA Lic. # 44167		DRAWING No.		11-222	
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
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2					
				SHEET 1A OF 2	



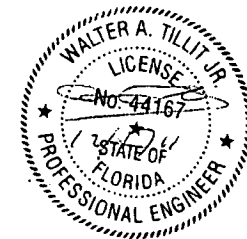
**STORM PANEL TYPICAL ELEVATION**

SCALE : 1/8" = 1"



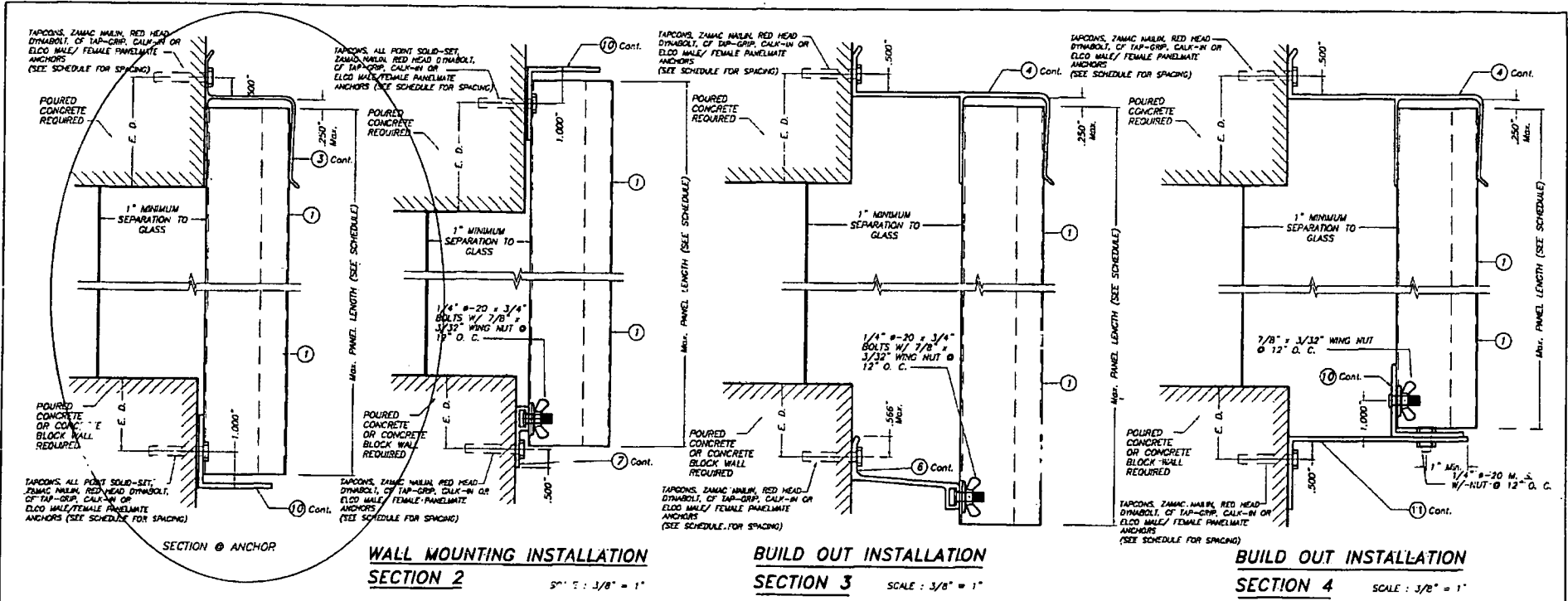
**SECTION A-A**

SCALE : 1/8" = 1"



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 TILLIT TESTING & ENGINEERING COMPANY 6355 N.W. 36th St., Ste. 202, Miramar, Florida, FL 33166 Phone: (305) 871-1530 • Fax: (305) 871-1531 EB-0008719 WALTER A. TILLIT JR., P.E. FLORIDA Lic. # 44167		EASTERN METAL SUPPLY, INC		12/08/11 DATE:	
		4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561) 209-8263, FAX: (561) 841-1718		11-222 DRAWING NO	
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD (8-14)	1/8/11	2		
2					



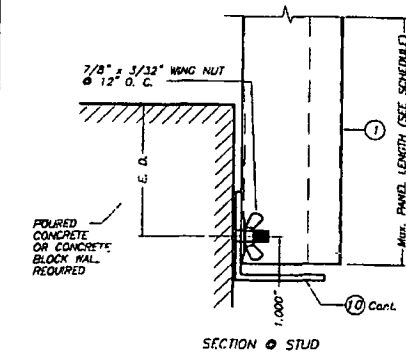
**WALL MOUNTING INSTALLATION SECTION 2**  
SCALE: 3/8" = 1"

**BUILD OUT INSTALLATION SECTION 3**  
SCALE: 3/8" = 1"

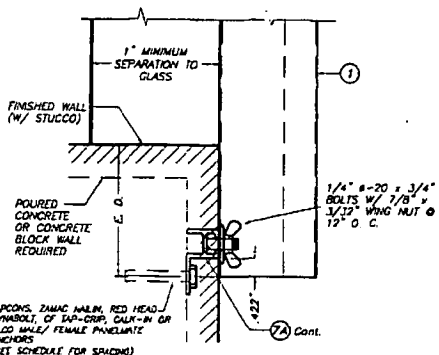
**BUILD OUT INSTALLATION SECTION 4**  
SCALE: 3/8" = 1"

E. D. = EDGE DISTANCE  
(SEE SCHEDULE ON SHEETS 6 & 7 OF 9)

NOTE FOR COMBINATION OF SECTIONS:  
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

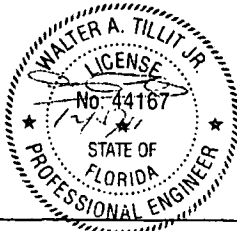


**WALL MOUNTING INSTALLATION SECTION 1**  
SCALE: 3/8" = 1"



**WALL MOUNTING INSTALLATION SECTION 2A**  
SCALE: 3/8" = 1"

NOTE: DETAIL OF SECTION 1 STUD VALID ALSO FOR WALL MOUNTING INSTALLATION - SECTION 2 (TOP)



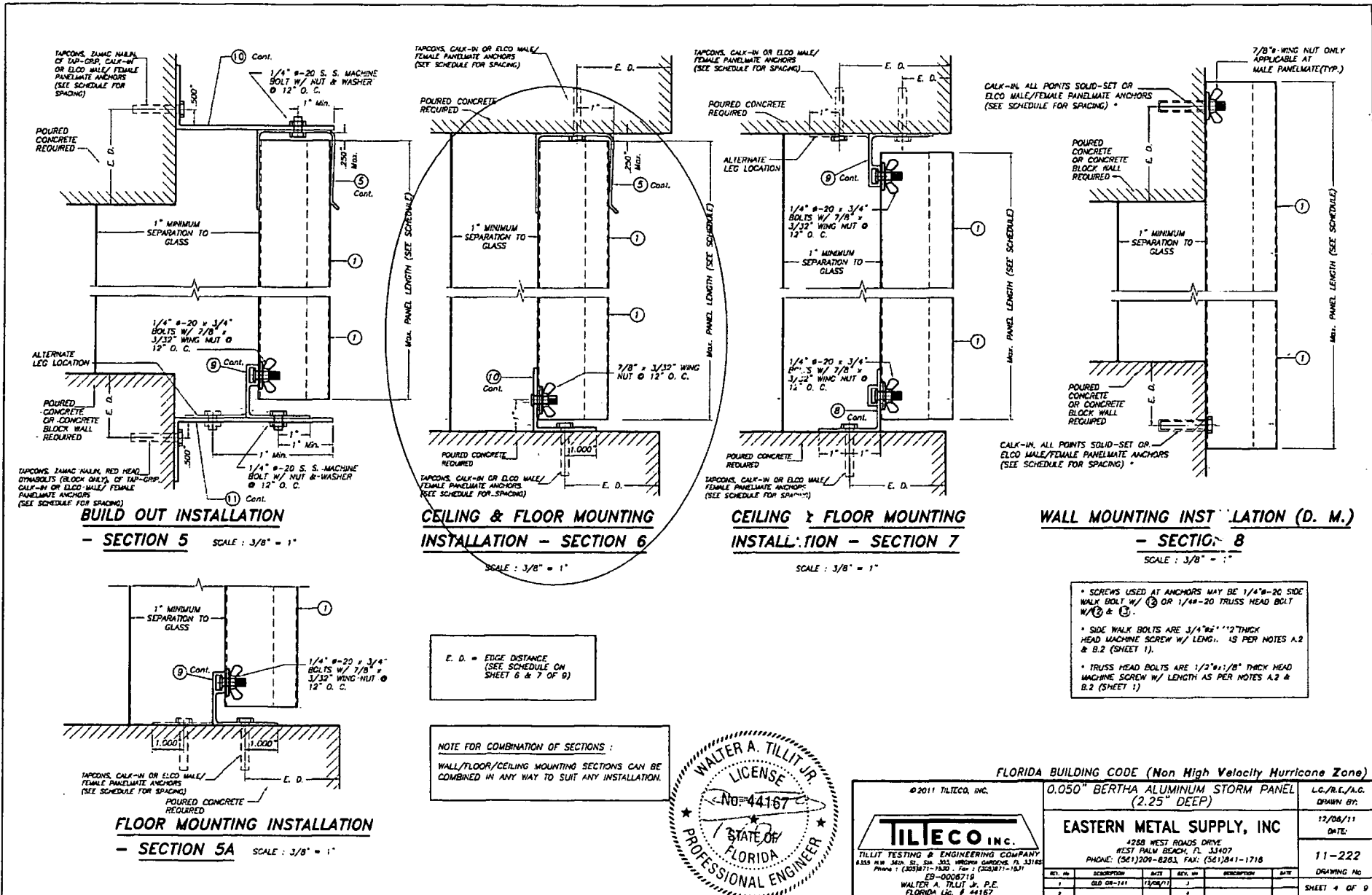
FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

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**TILTECO INC.**  
TILLIT TESTING & ENGINEERING COMPANY  
6155 N.W. 26TH ST., SUITE 300, WEST PALM BEACH, FL 33410  
PHONE: (561) 871-1230, FAX: (561) 871-1211  
E2-0008719  
WALTER A. TILLIT J. P.E.  
FLORIDA LIC. # 44167

0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)				L.G./P.E./A.G. DRAWN BY:	
<b>EASTERN METAL SUPPLY, INC.</b> 4260 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561) 208-8263, FAX: (561) 841-1718				12/08/11 DATE:	
11-222				DRAWING NO.	
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD OR-147	12/08/11	2		

SHEET 3 OF 9



**BUILD OUT INSTALLATION**  
**- SECTION 5** SCALE: 3/8" = 1"

**CEILING & FLOOR MOUNTING**  
**INSTALLATION - SECTION 6**  
 SCALE: 3/8" = 1"

**CEILING & FLOOR MOUNTING**  
**INSTALLATION - SECTION 7**  
 SCALE: 3/8" = 1"

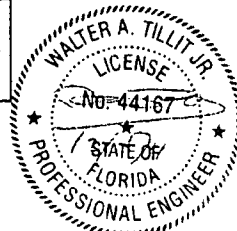
**WALL MOUNTING INSTALLATION (D. M.)**  
**- SECTION 8**  
 SCALE: 3/8" = 1"

**FLOOR MOUNTING INSTALLATION**  
**- SECTION 5A** SCALE: 3/8" = 1"

E. D. = EDGE DISTANCE  
 (SEE SCHEDULE ON SHEET 6 & 7 OF 9)

**NOTE FOR COMBINATION OF SECTIONS:**  
 WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

- \* SCREWS USED AT ANCHORS MAY BE 1/4"Ø-20 SIDE WALK BOLT W/ (3) OR 1/4"Ø-20 TRUSS HEAD BOLT W/ (3) & (3).
- \* SIDE WALK BOLTS ARE 3/16"Ø 1/2" THICK HEAD MACHINE SCREW W/ LENGTH AS PER NOTES A.2 & B.2 (SHEET 1).
- \* TRUSS HEAD BOLTS ARE 1/2"Ø 1/8" THICK HEAD MACHINE SCREW W/ LENGTH AS PER NOTES A.2 & B.2 (SHEET 1)



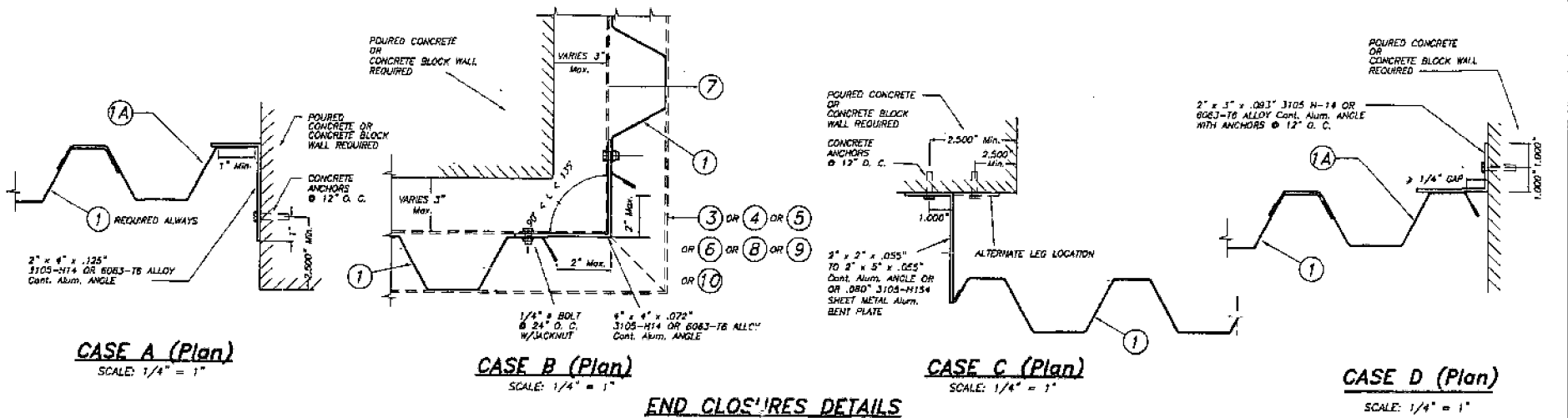
FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

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**TILCO INC.**  
 TILLIT TESTING & ENGINEERING COMPANY  
 8355 N.W. 36th St., Ste. 303, Miramar, Florida 33182  
 Phone: (305) 871-1530 Fax: (305) 871-1531  
 EB-0008719  
 WALTER A. TILLIT, P.E.  
 FLORIDA Lic. # 44167

0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)		L.C./R.E./A.G. DRAWN BY:
EASTERN METAL SUPPLY, INC.		12/06/11 DATE:
4288 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561) 209-8283 FAX: (561) 941-1718		11-222 DRAWING No.
REV. NO.	DESCRIPTION	DATE
1	OLD OR-111	12/04/11
2		

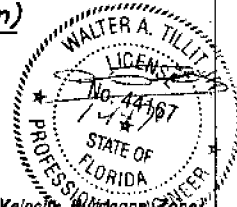
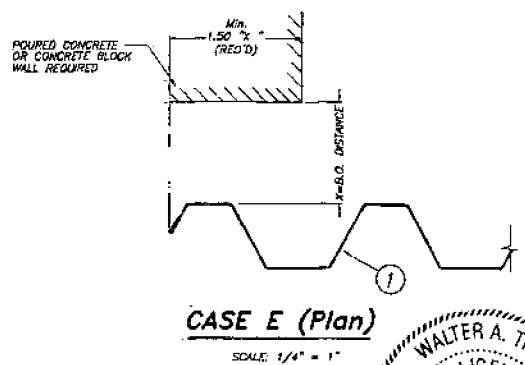
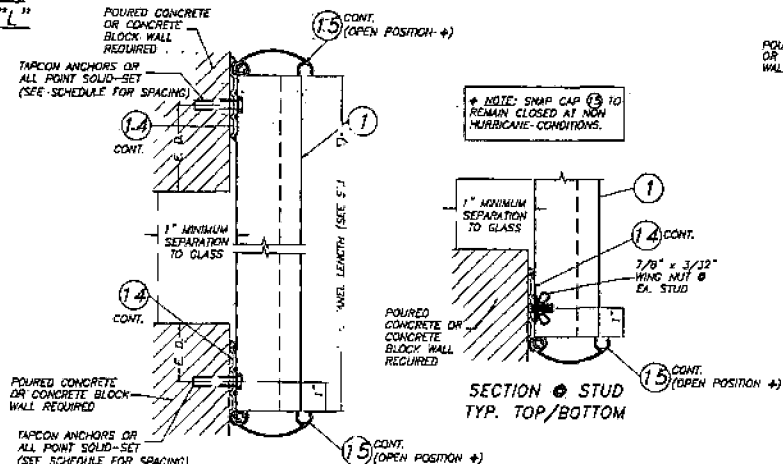
SHEET 4 OF 9



**MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM PANEL LENGTH "L" SCHEDULE FOR A GIVEN PANEL SYSTEM**

-MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.)	Max. PANEL LENGTH L (ft.)		
	MOUNTING W/TO 1/2" HEADER (1)	MOUNTING W/ 3/4" HEAD (2)	WALL MOUNTING W/ COMPONENT (3) & (4)
+30.0, -30.0	12'-11"	12'-11"	12'-11"
+30.0, -35.0	12'-11"	12'-11"	12'-11"
+35.0, -40.0	12'-0"	12'-0"	12'-0"
+40.0, -45.0	11'-2"	11'-2"	11'-2"
+45.0, -50.0	10'-7"	10'-4"	10'-7"
+50.0, -55.0	10'-0"	9'-4"	10'-0"
+55.0, -60.0	9'-7"	8'-6"	9'-7"
+60.0, -65.0	9'-2"	8'-0"	9'-2"
+65.0, -70.0	8'-9"	7'-2"	8'-9"
+70.0, -75.0	8'-6"	6'-8"	8'-6"
+75.0, -80.0	8'-2"	6'-3"	8'-2"

NOTE: MINIMUM PANEL LENGTH IS 3'-0".



FLORIDA BUILDING CODE (Non High Velocity Hurricane Zones)

0.050" BERTHA ALUMINUM STORM PANELS (2.25" DEEP)

**TILECO INC.**  
TILLIT TESTING & ENGINEERING COMPANY  
3305 N.W. 34th St., Ste. 302, UMAMI GARDENS, FL 33166  
PHONE: (561) 897-1230 FAX: (561) 897-1231  
EB-0008719  
WALTER A. TILLIT, P.E.  
FLORIDA LIC. # 44167

**EASTERN METAL SUPPLY, INC.**  
4268 WEST ROADS DRIVE  
WEST PALM BEACH, FL 33407  
PHONE: (561) 809-8261 FAX: (561) 841-1716

12/06/11  
DATE: 11-222  
DRAWING No. SHEET 5 OF 9

THIS SCHEDULE INDICATES REQUIRED ANCHOR SPACING FOR A GIVEN A.S.D. DESIGN PRESSURE RATING AND PANEL LENGTH. HOWEVER MAXIMUM PANEL LENGTH FOR A GIVEN A.S.D. DESIGN LOAD MUST BE VERIFIED AS PER SCHEDULE ON SHEET 4 OF 8.

**MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO CONCRETE AND CONCRETE BLOCK STRUCTURES \***

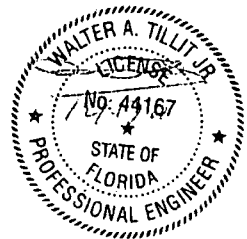
E. D. = EDGE DISTANCE

MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **												APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)			
	TAPCONS		ZAMAC NAIL/ RED HD DYNABOLT		CALK-IN		SOLID-SET		PANELMATES		CF TAP-GRIP						
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY					
+35.0 -+0.0 OR LESS	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	1	(TOP)	8'-0" OR LESS	
	12"	10"	12"	++	12"	12"	8"	12"	12"	12"	12"	10 1/2"	1	9"	(BOTTOM)		
	12"	-	12"	++	-	12"	12"	12"	12"	-	12"	-	-	2	9"		(TOP)
	12"	10"	12"	++	12"	12"	8"	-	-	12"	12"	12"	10 1/2"	2	(BOTTOM)		
	12"	10"	12"	++	12"	12"	8"	-	-	12"	12"	12"	10 1/2"	2A	(BOTTOM)		
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	3 & 4	(TOP)		
	12"	10"	12"	++	12"	12"	8"	-	-	12"	12"	12"	10 1/2"	3	(BOTTOM)		
	12"	10"	12"	++	12"	12"	8"	-	-	12"	12"	12"	10 1/2"	4	(BOTTOM)		
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	5	(TOP)		
	12"	10"	12"	++	12"	12"	8"	-	-	12"	12"	12"	10 1/2"	5	(BOTTOM)		
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	6	(TOP)		
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	6	(BOTTOM)		
11"	-	12"	++	-	11"	-	-	-	12"	-	12"	-	5A	(BOTTOM)			
11"	-	12"	++	-	11"	-	-	-	12"	-	12"	-	7	(TOP)			
11"	-	12"	++	-	11"	-	-	-	12"	-	12"	-	7	(BOTTOM)			
-	-	12"	++	-	12"	6"	12"	12"	12"	12"	12"	-	8	(TOP/BOTTOM)			
+35.0 -+0.0 OR LESS	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	1	(TOP)	>8'-0" TO 10'-0"	
	12"	9"	12"	++	12"	12"	6"	12"	12"	12"	12"	8 1/2"	1	9"	(BOTTOM)		
	12"	-	12"	++	-	12"	12"	12"	12"	-	12"	-	-	2	9"		(TOP)
	12"	8"	12"	++	12"	12"	6"	-	-	12"	12"	12"	8 1/2"	2	(BOTTOM)		
	12"	8"	12"	++	12"	12"	6"	-	-	12"	12"	12"	8 1/2"	2A	(BOTTOM)		
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	3 & 4	(TOP)		
	12"	8"	12"	++	12"	12"	6"	-	-	12"	12"	12"	8 1/2"	3	(BOTTOM)		
	12"	7"	12"	++	12"	12"	6"	-	-	12"	12"	12"	8 1/2"	4	(BOTTOM)		
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	5	(TOP)		
	12"	8"	12"	++	12"	12"	6"	-	-	12"	12"	12"	8 1/2"	5	(BOTTOM)		
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	6	(TOP)		
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	6	(BOTTOM)		
10"	-	12"	++	-	10"	-	-	-	12"	-	12"	-	5A	(BOTTOM)			
9"	-	12"	++	-	9"	-	-	-	12"	-	12"	-	7	(TOP)			
9"	-	12"	++	-	9"	-	-	-	12"	-	12"	-	7	(BOTTOM)			
-	-	12"	++	-	12"	6"	12"	12"	12"	12"	12"	-	8	(TOP/BOTTOM)			

MAXIMUM A.S.D. DESIGN PRESSURE RATING (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **												APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)				
	TAPCONS		ZAMAC NAIL/ RED HD DYNABOLT		CALK-IN		SOLID-SET		PANELMATES		CF TAP-GRIP							
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY						
+35.0 -+0.0 OR LESS	12"	-	12"	++	-	12"	-	-	-	12"	-	10"	-	1	(TOP)	10'-0" TO 12'-11"		
	12"	6"	12"	++	12"	12"	5"	12"	12"	12"	12"	11 1/2"	6 1/2"	1	9"		(BOTTOM)	
	12"	6"	12"	++	-	12"	12"	12"	12"	-	12"	-	11 1/2"	-	2		9"	(TOP)
	12"	6"	12"	++	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	2	(BOTTOM)			
	12"	6"	12"	++	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	2A	(BOTTOM)			
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	3 & 4	(TOP)			
	12"	6"	12"	++	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	3	(BOTTOM)			
	12"	6"	12"	++	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	4	(BOTTOM)			
	12"	-	12"	++	-	12"	-	-	-	12"	-	12"	-	5	(TOP)			
	12"	6"	12"	++	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	5	(BOTTOM)			
	10"	-	12"	++	-	10"	-	-	-	12"	-	12"	-	6	(TOP)			
	8"	-	12"	++	-	8"	-	-	-	11"	-	12"	-	6	(BOTTOM)			
7"	-	12"	++	-	7"	-	-	-	9 1/2"	-	12"	-	5A	(BOTTOM)				
7"	-	12"	++	-	7"	-	-	-	10"	-	12"	-	7	(TOP)				
-	-	12"	++	-	12"	-	-	-	12"	-	12"	-	8	(TOP/BOTTOM)				

- + ONLY TAPCON ANCHORS OR ALL POINT SOLID-SET ALLOWED FOR MOUNTING SECTION 9.
- ++ ANCHORS SPACING ONLY VALID FOR ZAMAC NAIL
- \* SEE SHEET 8 & 9 OF 9 FOR ANCHORS TYPE & SPACING FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS.
- \*\* MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACINGS SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (MIN. E. D. FOR CALK-IN ANCHORS & ELCO PANELMATE IS 2 1/2" AND 3 1/2" FOR SOLID-SET ANCHORS)

ACTUAL E. D.	FACTOR				
	TAPCON	ZAMAC NAIL/ DYNABOLT / PANELMATES	CALK-IN	SOLID-SET	CF TAP-GRIP
3"	-	.86	.75	.78	1.00
2 1/2"	-	.71	.50	-	.80
2"	-	.50	-	-	-
1 1/2"	.35	-	-	-	-



FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

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**TILECO INC.**

TILLIT TESTING & ENGINEERING COMPANY  
1326 W. W. AVE. S. STE. 200 WINTER GARDENS, FL 32786  
Phone: (407) 871-1530 Fax: (407) 871-1531  
ED-0026719  
WALTER A. TILLIT, P.E.  
FLORIDA LIC. # 44167

0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)

**EASTERN METAL SUPPLY, INC.**

1228 WEST ROADS DRIVE  
WEST PALM BEACH, FL 33407  
PHONE: (561) 209-8283 FAX: (561) 891-1718

L.G./R.E./A.G. DRAWN BY:

12/06/11 DATE:

11-222

REV. NO. DESCRIPTION DATE

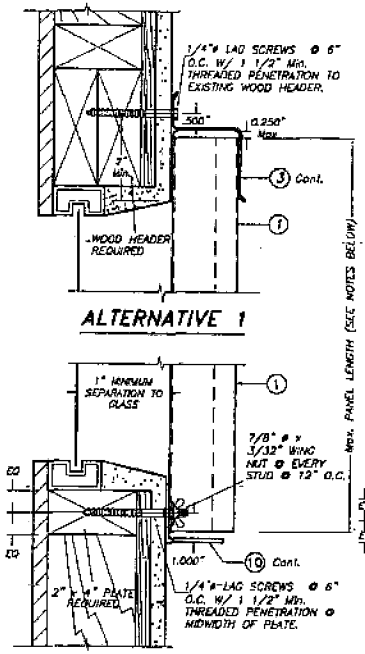
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2

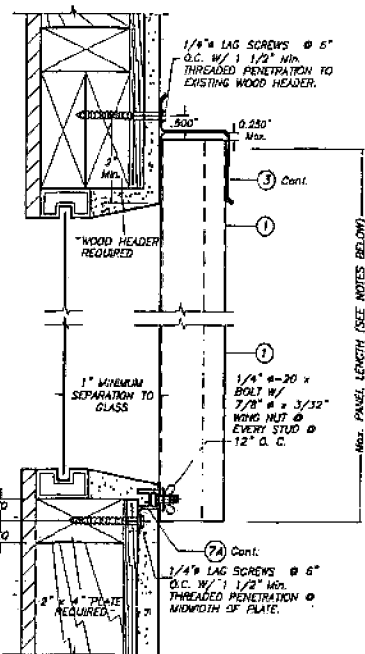
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DRAWING NO

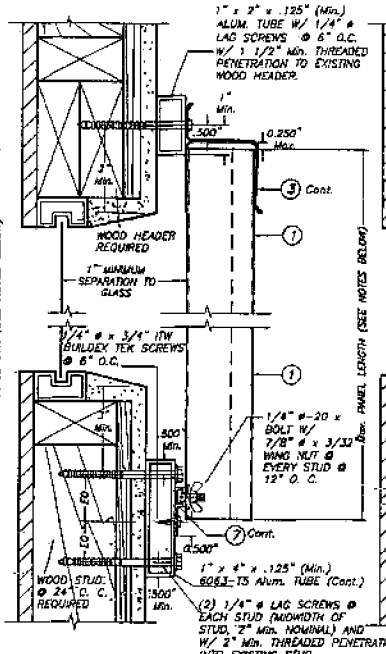
SHEET 8 OF 9



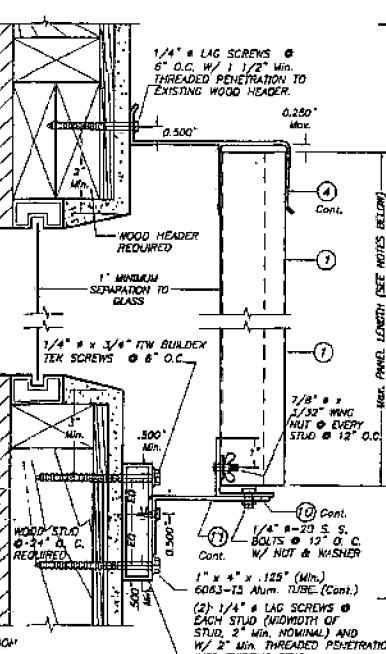
ALTERNATIVE 1



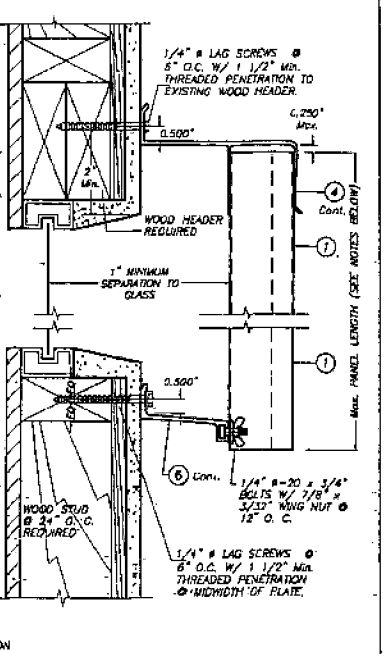
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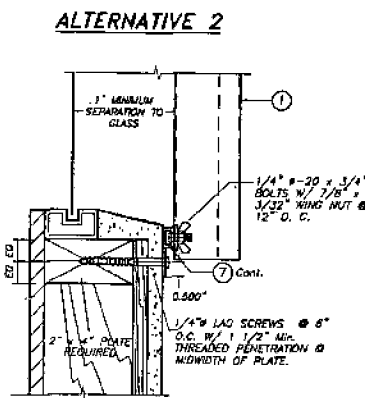
ALTERNATIVE 5



ALTERNATIVE 6



ALTERNATIVE 7



ALTERNATIVE 3

WALL MOUNTING INSTALLATIONS  
SECTIONS A

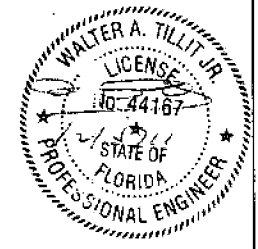
SCALE: 1/4" = 1"

INSTALLATION DETAILS ON  
EXISTING WOOD BUILDINGS

**NOTES:**

- INSTALLATIONS ARE ONLY VALID FOR MAX. A.S.D. DESIGN PRESSURE RATING UP TO +65.0, -72.0 psf AND PANEL'S LENGTHS UP TO 9'-0".
- FOR WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 L.; EQUAL

**NOTE FOR COMBINATION OF SECTIONS:**  
WALL MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

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**TILTECO INC.**

TILLIT TESTING & ENGINEERING COMPANY  
8755 NW 36th St., Ste. 205, Miramar, Florida 33186  
Phone: (305) 887-1130 Fax: (305) 887-1131  
EB-0006719  
WALTER A. TILLIT JR., P.E.  
FLORIDA LIC. # 44167

0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)

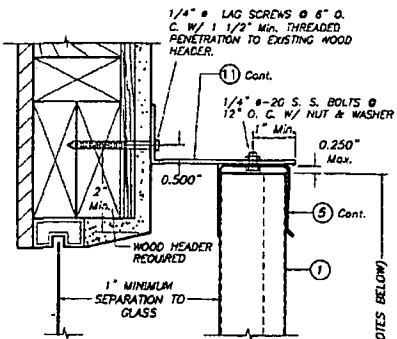
**EASTERN METAL SUPPLY, INC.**

1268 WEST ROADS DRIVE  
WEST PALM BEACH, FL 33407  
PHONE: (561) 209-8203, FAX: (561) 841-1715

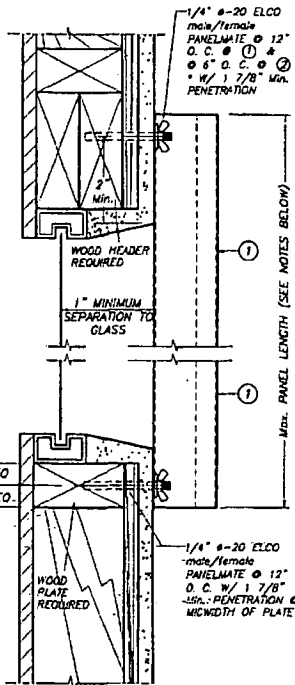
L.O./P.L./A.G. DRAWN BY:  
12/06/11 DATE:  
11-222 DRAWING No.

REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
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2			3		

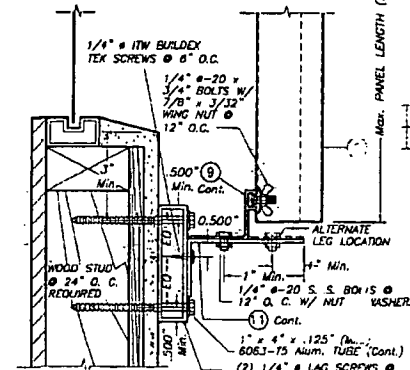
SHEET 8 OF 9



ALTERNATIVE 8



ALTERNATIVE 10



ALTERNATIVE 9

WALL MOUNTING INSTALLATIONS

SECTIONS A SCALE: 1/4" = 1"

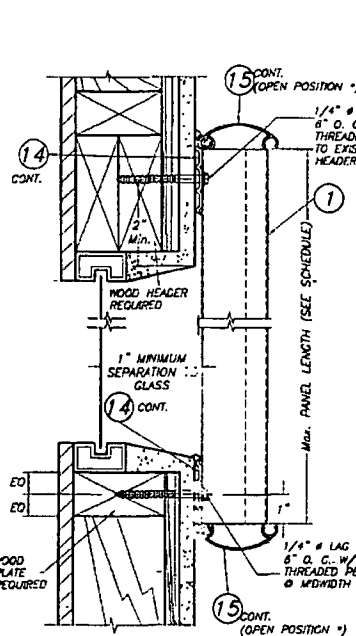
NOTE FOR COMBINATION OF SECTIONS:

FLOOR/ WALL/ CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

NOTES:

1. INSTALLATIONS ARE ONLY VALID FOR MAX. A.S.D. DESIGN PRESSURE RATING UP TO +65.0, -72.0 psf AND PANEL'S LENGTHS UP TO 9'-0".

2. FOR WOOD FRAME CONSTRUCTION; WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.



SECTION @ STUD TYP. TOP/BOTTOM

ALTERNATIVE 11

INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS

ALTERNATIVE 1

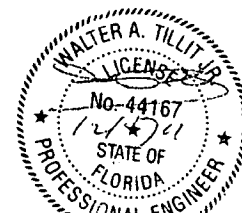
ALTERNATIVE 2

CEILING & FLOOR MOUNTING INSTALLATIONS

SECTIONS B

SCALE: 1/4" = 1"

\* NOTE: SNAP CAP (C) TO REMAIN CLOSED AT NON HURRICANE CONDITIONS.



FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

<p>TILECO INC. TILIT TESTING &amp; ENGINEERING COMPANY 4153 W. US HWY. 31, SR. 802, WELLSVILLE, FL 32185 Phone: (386) 777-1530 Fax: (386) 777-1537</p>		<p>0.050" BERTHA ALUMINUM STORM PANEL (2.25" DEEP)</p> <p>EASTERN METAL SUPPLY, INC. 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561) 209-4044 FAX: (561) 841-1710</p>	<p>L.G./M.E./A.D. DRAWN BY:</p> <p>12/04/11 DATE:</p> <p>11-222 DRAWING NO.</p> <p>SHEET 9 OF 9</p>		
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD OR-141	12/04/11	2		



# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection  Mon  Tue  Wed  Thur  Fri 12/19/14 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11118	Hart	Final		
AM Requested	14 Rio Vista Dr	Mechanical	PASS	CLOSE
	Grossman A/c			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
10939	Askeland	Final		
AM Requested	5 Pineapple Lane	Mechanical	PASS	CLOSE
	Krauss + Crane			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11123	Friburg	Final		
	9 Copaire Rd	Pool Enclosure	PASS	CLOSE
	Mark Jenkins, Inc			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11109	Beecher	Final		
	12 Ridgeland Drive	Electric	PASS	CLOSE
	Arlington Electric			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
<del>10829</del>	Chapman	Final		
	<del>11 Palm Road</del>	Shutters	<del>PASS</del>	<del>CLOSE</del>
	Expert Shutters			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

**10967**

**REPLACE PORCH LIGHTS**



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

## BUILDING PERMIT CARD

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

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	10967	DATE ISSUED:	8/4/2014
SCOPE OF WORK:	Replacing Porch Lights		
CONTRACTOR:	DiMenno Electric		
PARCEL CONTROL NUMBER:	13-38-41-005-000-00110-9	SUBDIVISION	Palm Row R/A Lot 11
CONSTRUCTION ADDRESS:	11 Palm Road		
OWNER NAME:	Chapman		
QUALIFIER:	Jerrold DiMenno	CONTACT PHONE NUMBER:	341-2317

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

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

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

INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

### INSPECTIONS

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

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



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

### BUILDING PERMIT RECEIPT

<b>PERMIT NUMBER:</b>	10967		
<b>ADDRESS:</b>	11 Palm Road		
<b>DATE ISSUED:</b>	8/4/2014	<b>SCOPE OF WORK:</b>	Replacing Porch Lights

<b>SINGLE FAMILY OR ADDITION /REMODEL</b>		<b>Declared Value</b>	\$	
---	--	-----------------------	----	--

Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned spa @ \$ 121.75 per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel:			
@ \$ 59.81 per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: \$ 90.78 per sq. ft. s.f.		\$	-
Total Construction Value:			
		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Building fee: (1% of construction value < \$200K + \$100 per insp.)		\$	-
Total number of inspections (Value < \$200K) \$ 100.00 per insp. # insp			n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)			n/a
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>			
		\$	

<b>ACCESSORY PERMIT</b>	<b>Declared Value:</b>	\$	\$ 1,500.00
Total number of inspections: @ \$ 100.00 per insp. # insp		\$ 1.00	\$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)			\$ 5.00
<b>TOTAL ACCESSORY PERMIT FEE:</b>			
		\$	\$ 109.00

# Town of Sewall's Point

## BUILDING PERMIT APPLICATION

Date: 8-1-2014 Permit Number: \_\_\_\_\_

OWNER/LESSEE NAME: Robert Chapman Phone (Day) 267-5206 (Fax) \_\_\_\_\_  
 Job Site Address: 11 Palm Rd City: Sewalls Point State: FL Zip: 34996  
 Legal Description Palm Row Revised & Amend. Lot 11 Parcel Control Number: 13-38-41-005-000-00110-9  
 Fee Simple Holder Name: Chapman, Robert T Address: 11 Palm Rd  
 City: Sewalls Pt State: FL Zip: 34996 Telephone: 267-5206

**\*SCOPE OF WORK (PLEASE BE SPECIFIC):** Replace existing porch lights with (12) recess fixtures

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

**COST AND VALUES: (Required on ALL permit applications)**  
 Estimated Value of Improvements: \$ 1,500.00  
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
 Is subject property located in flood hazard area? VE10  AE9  AE8   
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
 Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
 (Fair Market Value of the Primary Structure only, Minus the land value)  
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: DiMenno Electric Inc. Phone: 772-341-2317 Fax: 772-546-4423  
 Qualifiers name: Jerrold DiMenno Street: 8040 SE Windjammer Way City: Hobe Sound State: FL Zip: 33455  
 State License Number: FC0002922 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_

LOCAL CONTACT: Jerry DiMenno Phone Number: 772-341-2317

DESIGN PROFESSIONAL: \_\_\_\_\_ Fla. License# \_\_\_\_\_  
 Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010  
 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

**WARNINGS TO OWNERS AND CONTRACTORS:**

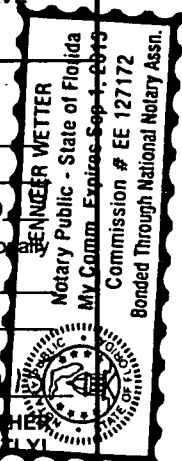
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

**OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:**  
[Signature]  
 State of Florida, County of: Martin  
 On This the 4 day of AUGUST, 2014  
 by Robert Thomas Chapman who is personally known to me or produced FL DL  
 As identification, [Signature]  
 My Commission Expires: \_\_\_\_\_  
 MY COMMISSION # FF 111059  
 EXPIRES: April 26, 2018  
 Bonded Thru Budget Notary Services

**CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:**  
[Signature]  
 State of Florida, County of: Martin  
 On This the 1 day of AUGUST, 2014  
 by Jerrold DiMenno who is personally known to me or produced \_\_\_\_\_  
 As identification, FL Drivers License  
 My Commission Expires: \_\_\_\_\_



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

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

*generated on 8/5/2014 8:33:42 AM EDT*

**Summary**

<b>Parcel ID</b>	<b>Account #</b>	<b>Unit Address</b>	<b>Market Total Value</b>	<b>Website Updated</b>
13-38-41-005-000-00110-9	27818	11 PALM RD, SEWALL'S POINT	\$362,110	8/2/2014

---

<b>Owner Information</b>	
<b>Owner(Current)</b>	CHAPMAN ROBERT T
<b>Owner/Mail Address</b>	11 PALM RD STUART FL 34996
<b>Sale Date</b>	12/30/2013
<b>Document Book/Page</b>	2695 1395
<b>Document No.</b>	2433428
<b>Sale Price</b>	448000

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<b>Location/Description</b>			
<b>Account #</b>	27818	<b>Map Page No.</b>	SP-05
<b>Tax District</b>	2200	<b>Legal Description</b>	PALM ROW REVISED & AMENDED LOT 11
<b>Parcel Address</b>	11 PALM RD, SEWALL'S POINT		
<b>Acres</b>	.3460		

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<b>Parcel Type</b>	
<b>Use Code</b>	0100 Single Family
<b>Neighborhood</b>	120200 Heritage P, Palmtto Pk,Rdglnd,

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<b>Assessment Information</b>	
<b>Market Land Value</b>	\$195,000
<b>Market Improvement Value</b>	\$167,110
<b>Market Total Value</b>	\$362,110

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
ELECTRICAL CONTRACTORS LICENSING BOARD

LICENSE NUMBER

EC0002292

The ELECTRICAL CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489, FS  
Expiration date: AUG-31, 2016



DIMENNO JERROLD R.  
DIMENNO ELECTRIC INC  
8040 SE WINDJAMMER WAY  
HOBE SOUND FL 33455



ISSUED: 06/03/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L1406030001116

2013-2014

**MARTIN COUNTY ORIGINAL  
BUSINESS TAX RECEIPT**

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR  
3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994  
(772) 288-5604

ACCOUNT 2001-508-0005 CERT 0002292-8/06

PHONE (772) 341-2317 SIC NO 235310

LOCATION:  
8040 SE WINDJAMMER WAY



**CHARACTER COUNTS IN MARTIN COUNTY**

PREV YR.	\$	<u>.00</u>	LIC. FEE	\$	<u>26.25</u>
	\$	<u>.00</u>	PENALTY	\$	<u>.00</u>
	\$	<u>.00</u>	COL. FEE	\$	<u>.00</u>
	\$	<u>.00</u>	TRANSFER	\$	<u>.00</u>
		<b>TOTAL</b>			<u>26.25</u>

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

DI MENNO, JERROLD R.  
DI MENNO ELECTRIC, INC  
PO BOX 1248  
HOBE SOUND, FL 33475

09 DAY OF AUGUST 2013  
AND ENDING SEPTEMBER 30, 2014

11 2012 31947.0001 26.25 PAID





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/22/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Deakins-Carroll Insurance Agency PO Box 1597  Port Salerno FL 34992	<b>CONTACT NAME:</b> Sierra Evans	
	<b>PHONE (A/C, No. Ext):</b> (772) 287-2030	<b>FAX (A/C, No.):</b> (772) 288-2481
	<b>E-MAIL ADDRESS:</b> sierrae@deakinscarroll.com	
	<b>INSURER(S) AFFORDING COVERAGE</b>	<b>NAIC #</b>
	<b>INSURER A:</b> Old Dominion Insurance Company	
	<b>INSURER B:</b> FCB&I Fund	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES** **CERTIFICATE NUMBER:** 14/15 GL, WC **REVISION NUMBER:**


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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
A	GENERAL LIABILITY			MPG55402	8/22/2014	8/22/2015	EACH OCCURRENCE \$ 1,000,000			
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000			
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000			
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC			GENERAL AGGREGATE \$ 2,000,000			PRODUCTS - COMP/OP AGG \$ 2,000,000			
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$			
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$			
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident) \$			
	<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident) \$			
	<input type="checkbox"/> SCHEDULED AUTOS						\$			
	<input type="checkbox"/> NON-OWNED AUTOS						\$			
	UMBRELLA LIAB						EACH OCCURRENCE \$			
	EXCESS LIAB						AGGREGATE \$			
	DED						\$			
	RETENTION \$						\$			
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			10641089	4/1/2014	4/1/2015	WC STATUTORY LIMITS			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTH-ER			E.L. EACH ACCIDENT \$ 100,000
	If yes, describe under DESCRIPTION OF OPERATIONS below									E.L. DISEASE - EA EMPLOYEE \$ 100,000
										E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

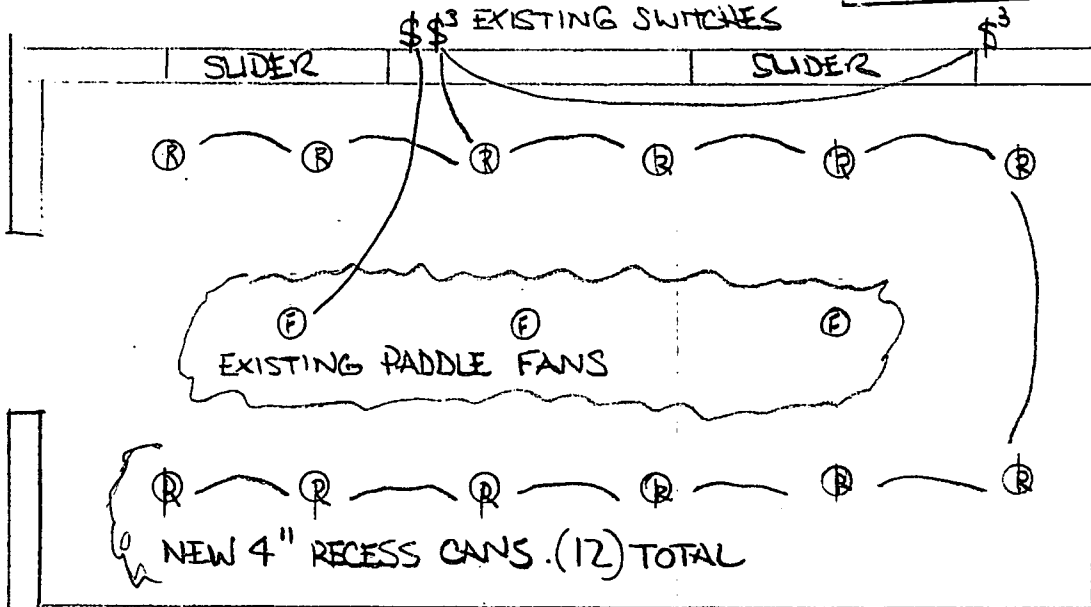
**CERTIFICATE HOLDER** **CANCELLATION**

Sewall's Point, Town of 1 South Sewall's Point Road Stuart, FL 34996	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b>  David Deakins/SE 

# DiMenno Electric, Inc.

P.O. Box 1248  
Hobe Sound, Fl. 33475-1248  
Telephone (772) 341-2317  
Fax (772) 546-4423  
EC 0002292

TOWN OF SEWALL'S POINT  
BUILDING DEPARTMENT  
FILE COPY



## NEW BACK PORCH LIGHTING FOR:

Robert Chapman  
11 Palm Road  
SEWALL'S Pt. FL. 34996

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri **8/8-14** Page      of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10949	Wright	Plumbing	Pass	
9	10 Miramar	Underground	Pass	
4	Custom Builders Corp.	Electrical Rough Re-inspect	Pass	INSPECTOR <i>CF</i>
<del>10967</del>	Chapman	Electrical		
	11 Palm Rd	Rough	<del>Pass</del>	
5	Di Menno Electric	Rear Porch		INSPECTOR <i>CF</i>
10938	Weber	Wall Sheeting	Pass	
9	4 Mandalay Rd		Pass	
6	Praesto			INSPECTOR <i>CF</i>
10527	Weston	Ground		
	30 SSPR.	Water Retention	Pass	
3	Weston Construction	FINAL GRADE		INSPECTOR <i>CF</i>
10866	<del>Thle</del> Ihle	Gas	FAIL	NOT READY
	121 Hillcrest Drive		FAIL	
7	GLG Homes			INSPECTOR <i>CF</i>
10668	Fitzsimmons	Final	FAIL	NO ACCESS
	99 N SPR		FAIL	
1	Gulfstream			INSPECTOR <i>CF</i>
0917	Castoro	Electrical		
	22 SSPR	POOL BONDING	Pass	
2	Roe Construction	Grid		INSPECTOR <i>CF</i>

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

 Date of Inspection  Mon

 Tue

 Wed

 Thur

 Fri

 8-27-14 Page   of  

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9340	Vasko	Final		
9:30 AM	5 Middle Rd	Remodel	Pass	Close
	O/B	(Expired permit)		INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10985	Rowe	Mechanical		
10:00 AM	55 S. River Rd	Final	Fail	No Access
	Nis Air			INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10849	Gould	LP Gas		
	48 S SPR	Exterior	Pass	
	Karam Haddad	V.G Piping		INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10967	Chapman	Final		
	11 Palm Rd	Electrical	Pass	<del>Comments</del>
				INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10959	Van Dusen	In Progress		
	7 S. Via Lucindia	Inspection	Pass	
	JA TAYLOR ROOFING			INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS

INSPECTOR

**11002**

**WINDOW/DOOR REPLACEMENT**



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

## BUILDING PERMIT CARD

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

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	11002	DATE ISSUED:	September 4, 2014
SCOPE OF WORK:	Change out Windows and Doors		
CONTRACTOR:	Karam Haddad, LLC		
PARCEL CONTROL NUMBER:	13-38-41-005-000-00110-9	SUBDIVISION:	Palm Row Revised & Amended Lot 11
CONSTRUCTION ADDRESS:	11 Palm Road		
OWNER NAME:	Chapman		
QUALIFIER:	Karam Haddad	CONTACT PHONE NUMBER:	370-8312

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

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

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

**INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY**

### INSPECTIONS

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

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



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

**BUILDING PERMIT RECEIPT**

<b>PERMIT NUMBER:</b>	<b>11002</b>		
<b>ADDRESS:</b>	11 Palm Road		
<b>DATE ISSUED:</b>	9/4/2014	<b>SCOPE OF WORK:</b>	Change out Windows and Doors

<b>SINGLE FAMILY OR ADDITION /REMODEL</b>		<b>Declared Value</b>	\$	
---	--	-----------------------	----	--

Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned spa @ \$ 121.75 per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel: @ \$ 59.81 per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: \$ 90.78 per sq. ft. s.f.		\$	-
Total Construction Value:		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Building fee: (1% of construction value < \$200K + \$100 per insp.)		\$	-
Total number of inspections (Value < \$200K) \$ 100.00 per insp. # insp.			n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)			n/a
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		\$	\$ -

<b>ACCESSORY PERMIT</b>	<b>Declared Value:</b>	\$	\$ <b>5,900.00</b>
Total number of inspections: @ \$ 100.00 per insp. # insp.		\$ <b>2.00</b>	\$ 200.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 3.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 3.00
Road impact assessment: (.04% of construction value - \$5 min.)			\$ 5.00
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	\$ <b>211.00</b>

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

Date: 8/11/14 Permit Number: 11002

OWNER/LESSEE NAME: Bob Chapman Phone (Day) \_\_\_\_\_ (Fax) \_\_\_\_\_

Job Site Address: 11 PALM RD City: Sewall Point State: FL Zip: \_\_\_\_\_

Legal Description: PALM RDW REVISED & AMENDED Parcel Control Number: 13-38-41-005-000-0010-9

Fee Simple Holder Name: LOT 11 Address: \_\_\_\_\_

City: Sewall Point State: FL Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**\*SCOPE OF WORK (PLEASE BE SPECIFIC):** CHANGE OUT WINDOWS & SLIDERS

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

**COST AND VALUES:** (Required on ALL permit applications)  
Estimated Value of Improvements: \$ 5500  
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)

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

Is subject property located in flood hazard area? VE10  AE9  AE8  X  
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
(Fair Market Value of the Primary Structure only, Minus the land value)  
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: KARAM HADDAD LLC Phone: 370-8312 Fax: \_\_\_\_\_

Qualifiers name: KARAM HADDAD Street: \_\_\_\_\_ City: \_\_\_\_\_ State: FL Zip: 33455

State License Number: CRC025153 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_

LOCAL CONTACT: \_\_\_\_\_ Phone Number: \_\_\_\_\_

DESIGN PROFESSIONAL: \_\_\_\_\_ Fla. License# \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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

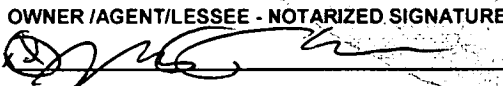
CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010  
National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010


**WARNINGS TO OWNERS AND CONTRACTORS:**

- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - 5.

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

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

OWNER / AGENT / LESSEE - NOTARIZED SIGNATURE:  
  
State of Florida, County of: \_\_\_\_\_  
On This the \_\_\_\_\_ day of \_\_\_\_\_  
by Robert Thomas Chapman who is personally known to me or produced FDL C1557784  
As identification Christina Orestis  
Notary Public  
My Commission Expires: 6/6/14

CONTRACTOR / LICENSEE NOTARIZED SIGNATURE:  
   
State of Florida, County of: MARTIN  
On This the 16 day of August 2014  
by KARAM HADDAD who is personally known to me or produced \_\_\_\_\_  
As identification Christina Orestis  
Notary Public  
My Commission Expires: 6/06/16

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 90 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY



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

*generated on 9/5/2014 3:46:39 PM EDT*

**Summary**

<b>Parcel ID</b>	<b>Account #</b>	<b>Unit Address</b>	<b>Market Total Value</b>	<b>Website Updated</b>
13-38-41-005-000-00110-9	27818	11 PALM RD, SEWALL'S POINT	\$362,110	8/30/2014

---

**Owner Information**

<b>Owner(Current)</b>	CHAPMAN ROBERT T
<b>Owner/Mail Address</b>	11 PALM RD STUART FL 34996
<b>Sale Date</b>	12/30/2013
<b>Document Book/Page</b>	<u>2695 1395</u>
<b>Document No.</b>	2433428
<b>Sale Price</b>	448000

---

**Location/Description**

<b>Account #</b>	27818	<b>Map Page No.</b>	SP-05
<b>Tax District</b>	2200	<b>Legal Description</b>	PALM ROW REVISED & AMENDED LOT 11
<b>Parcel Address</b>	11 PALM RD, SEWALL'S POINT		
<b>Acres</b>	.3460		

---

**Parcel Type**

<b>Use Code</b>	0100 Single Family
<b>Neighborhood</b>	120200 Heritage P, Palmtto Pk,Rdglnd,

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**Assessment Information**

<b>Market Land Value</b>	\$195,000
<b>Market Improvement Value</b>	\$167,110
<b>Market Total Value</b>	\$362,110



# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)  
8/14/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

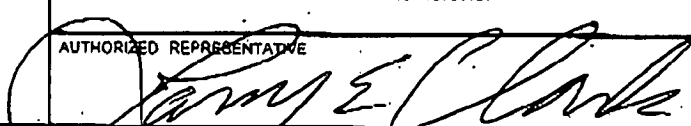
<b>PRODUCER</b> <b>TAYLOR ASHLEY AGENCY, INC.</b> PO BOX 987 Stuart, FL 34995 A047963	<b>CONTACT NAME:</b> Larry Clark <b>PHONE (A/C, No, Ext):</b> (772) 287-2440 <b>E-MAIL ADDRESS:</b> Larry@taylorashley.com <b>PRODUCER CUSTOMER ID #:</b>	<b>FAX (A/C, No):</b> (772) 287-2442
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> <b>KARAM HADDAD, LLC</b>  6482 SE Clairmont Place Hobe Sound, FL 33455 772-287-0875	<b>INSURER A:</b> CYPRESS PROPERTY & CASUALTY INC	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

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

INBR LTR	TYPE OF INSURANCE	ADDITIONAL DISB	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC			20P0002790-1	7/11/14	7/11/15	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 - COM/OP AGG \$ 2,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANYAUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB.</b> <input type="checkbox"/> CLAIMS-MADE  DEDUCTIBLE \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (mandatory in NY) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

<b>CERTIFICATE HOLDER</b>  Town of Sewall's Point One South Sewall's Point Road Sewall's Point, FL 34996 Fax: 772-220-4765	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
---	--



JEFF ATWATER  
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA  
DEPARTMENT OF FINANCIAL SERVICES  
DIVISION OF WORKERS' COMPENSATION

**\*\* CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW \*\***

**CONSTRUCTION INDUSTRY EXEMPTION**

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

**EFFECTIVE DATE:** 9/30/2013      **EXPIRATION DATE:** 9/30/2015

**PERSON:** HADDAD      KARAM

**FEIN:** 900335342

**BUSINESS NAME AND ADDRESS:**

KARAM HADDAD LLC

6482 SE CLAIRMONT PLACE

HOBE SOUND FL 33455

**SCOPES OF BUSINESS OR TRADE:**

LICENSED RESIDENTIAL  
CONTRACTOR

Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not receive benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(12), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, in any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

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



LICENSE NUMBER

CRC029153

The RESIDENTIAL CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 F.S.  
Expiration date - AUG 31, 2018

HADDAD, KARAM J  
KARAM HADDAD LLC  
6482 SE CLAIRMONT PL  
HOBE SOUND, FL 33455-7404



ISSUED: 08/10/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L1406100001445

2014-2015

MARTIN COUNTY ORIGINAL

BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI, CFC, TAX COLLECTOR  
3485 S.E. WILLOUGHBY BLVD, STUART, FL 34994  
(772) 288-5604

ACCOUNT 2006-500-0018

GEN CRC029153

PHONE (772) 287-0875

FAX 235 5101

LOCATION 6482 SE CLAIRMONT PL HS

CHARACTER COUNTS ON MARTIN COUNTY

PREV. YR.	00	JC FEE	26.25
	00	PEV. FEE	00
	00	COL. FEE	00
	00	TRANSFER	00
TOTAL		26.25	

HADDAD, KARAM J  
KARAM HADDAD LLC  
6482 SE CLAIRMONT PL  
HOBE SOUND, FL 33455

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION  
OF  
RESIDENTIAL CONTRACTOR

29 DAY OF JULY 14  
AND ENDING SEPTEMBER 11, 2015

13-2013-42000-0001 26.25 PATH





INSTR # 2470796  
OR BK 2734 PG 2465  
(1 Pgs)

NOTICE OF COMMENCEMENT

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00 PER 606.05/2014 11:02:31 AM

CAROLYN TIMMANN  
MARTIN COUNTY CLERK

PERMIT #: \_\_\_\_\_ TAX FOLIO #: \_\_\_\_\_

STATE OF FLORIDA COUNTY OF MARTIN

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

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

PALM ROW Revised & Amended Lot 11

GENERAL DESCRIPTION OF IMPROVEMENT:

Change out windows & sliders

OWNER NAME OR LESSEE INFORMATION, IF LESSEE CONTRACTED FOR THE IMPROVEMENT

NAME: Robert Chapman

ADDRESS: 11 PALM RD

PHONE NUMBER: 262-5206

FAX NUMBER: \_\_\_\_\_

INTEREST IN PROPERTY: owner

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

CONTRACTOR:

KARAN ADAMS LLC

ADDRESS: 6422 SE CLARKWOOD DR

PHONE NUMBER: 326-8912

FAX NUMBER: \_\_\_\_\_

SURETY COMPANY (IF APPLICABLE, A COPY OF THE PAYMENT BOND IS ATTACHED)

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_

BOND AMOUNT: \_\_\_\_\_

LENDER/MORTGAGE COMPANY:

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_

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

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

FAX NUMBER: \_\_\_\_\_

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES \_\_\_\_\_ OF \_\_\_\_\_ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES:

PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_ EXPIRATION DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_

**EXPIRATION DATE MAY NOT BE BEFORE THE COMPLETION OF CONSTRUCTION AND FINAL PAYMENT TO CONTRACTOR BUT WILL BE ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED**

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

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS IN IT ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF (SECTION 92.525, FLORIDA STATUTES).

[Signature]

SIGNATURE OF OWNER OR LESSEE OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER/ATTORNEY-IN-FACT

SIGNATORY'S TITLE/OFFICE owner

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

BY: R.T. Chapman AS self TYPE OF AUTHORITY FOR self PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

NAME OF PERSON

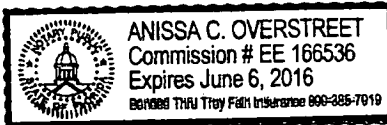
TYPE OF AUTHORITY

PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN  OR PRODUCED IDENTIFICATION  TYPE OF IDENTIFICATION PRODUCED \_\_\_\_\_

[Signature]

NOTARY SIGNATURE/ SEAL



STATE OF FLORIDA  
MARTIN COUNTY  
THIS IS TO CERTIFY THAT THE FOREGOING \_\_\_\_\_ PAGE(S) IS A TRUE AND CORRECT COPY OF THE ORIGINAL DOCUMENT AS FILED IN THIS OFFICE  
DATE \_\_\_\_\_  
BY [Signature]  
CAROLYN TIMMANN, CLERK  
MARTIN COUNTY CLERK



**WINDOW/DOOR SCHEDULE**

ID NO	APPOX OPENING SIZE (WXH)	DESIGNATION	* TYPE	IMPACT PROTECTION		REMARKS
				IMPACT GLASS	SHUTTER	
	37" X 63"	25	SH		X	EXAMPLE
1	37 X 51		SH		X	
2	37 X 51		SH		X	
3	37 X 51		SH		X	
4	37 X 51		SH		X	
5	37 X 51		SH		X	
6	37 X 51		SH		X	
7	37 X 51		SH		X	
8	37 X 63		SH		X	
9	37 X 63		SH		X	
10	37 X 63		SH		X	
11	74 X 63		SH		X	DBL 37 X 63 w/ 2 1/4" BAR
12	19 X 63		SH		X	
13	19 X 63		SH		X	
14	8'-0" X 6'-8"		Sliding	DOORS	X	
15	37 X 38 1/4		SH		X	
16	37 X 44		SH		X	
17	8'-0" X 6'-8"		Sliding	DOORS	X	
18	6'-0" X 6'-8"		Sliding	DOORS	X	
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						

TOTAL GLAZED OPENING AREA FOR STRUCTURE: \_\_\_\_\_ S.F.

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

NOTE: The replacement of more than 25% of the aggregate area of exterior glazing (windows & doors) in one & two family dwellings within a 12 month period will require impact protection on all proposed glazed opening replacement (approved shutters or impact resistant glazing( as per 2004 FBC/ EXISTING BUILDING 507.3.

\* **TYPE WINDOWS**

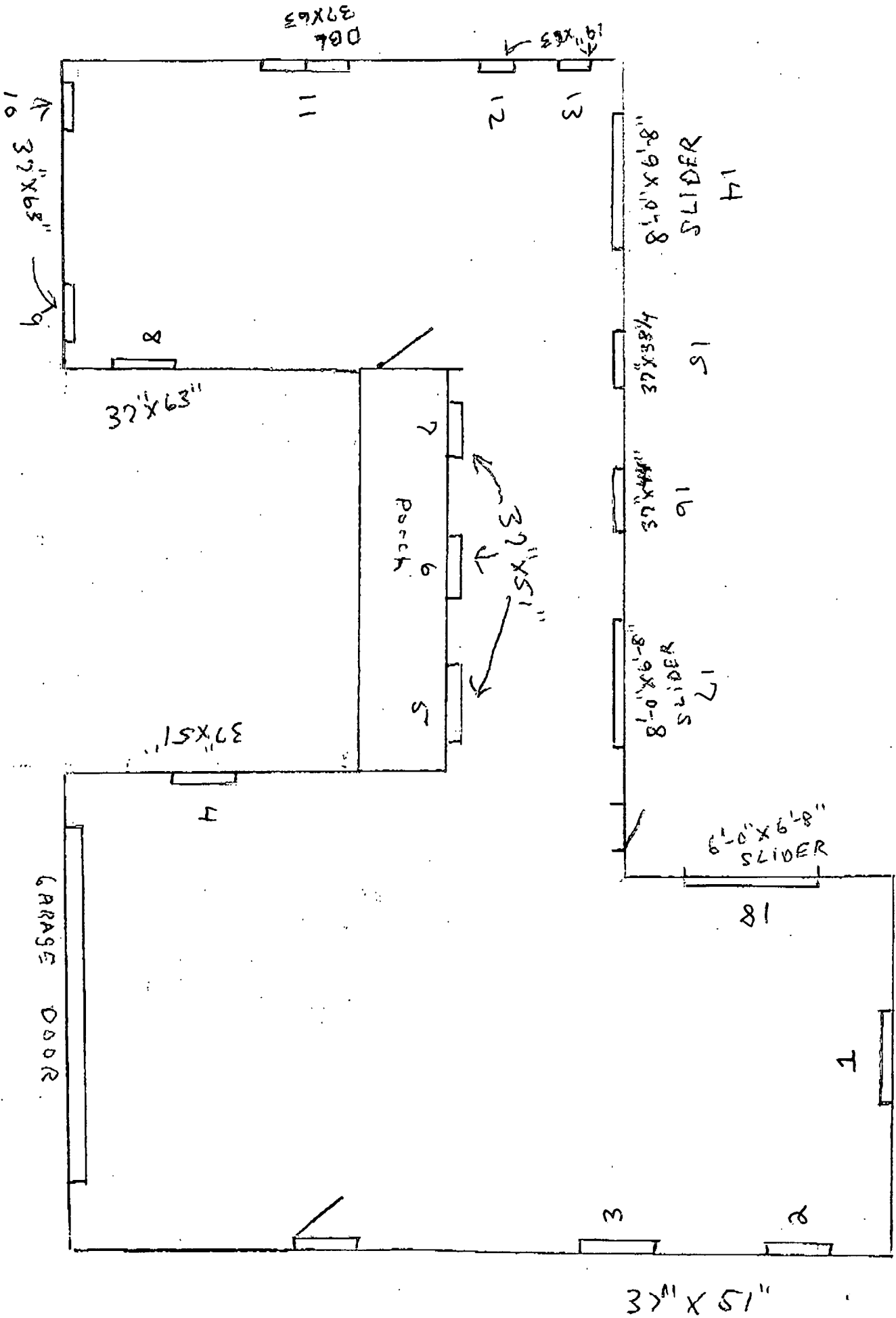
SH - SINGLE HUNG  
DH - DOUBLE HUNG

AWN - AWNING  
CAS - CASEMENT

SL - SLIDING  
FIX - FIXED

CHAPMAN 11 PALM RD

K.H. LLC





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Florida Department of  
**Business & Professional  
Regulation**

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**Product Approval**  
USER: Public User

License efficiently. Regulate fairly.

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



FL #	FL12250-R12						
Application Type	Revision						
Code Version	2010						
Application Status	Approved						
	*Approved by DBPR. Approvals by DBPR shall be reviewed and ratified by the POC and/or the Commission if necessary.						
Comments							
Archived	<input type="checkbox"/>						
Product Manufacturer	MI Windows and Doors						
Address/Phone/Email	650 West Market Street Gratz, PA 17030 (717) 365-3300 Ext 2560 bsitlinger@miwd.com						
Authorized Signature	Brent Sitlinger bsitlinger@miwd.com						
Technical Representative							
Address/Phone/Email							
Quality Assurance Representative							
Address/Phone/Email							
Category	Windows						
Subcategory	Single Hung						
Compliance Method	Certification Mark or Listing						
Certification Agency	American Architectural Manufacturers Association						
Validated By	Steven M. Urich, PE <input type="checkbox"/> Validation Checklist - Hardcopy Received						
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th><u>Standard</u></th> <th><u>Year</u></th> </tr> </thead> <tbody> <tr> <td>AAMA/WDMA/CSA 101/1.S.2/A440</td> <td>2005</td> </tr> <tr> <td>AAMA/WDMA/CSA 101/1.S.2/A440</td> <td>2008</td> </tr> </tbody> </table>	<u>Standard</u>	<u>Year</u>	AAMA/WDMA/CSA 101/1.S.2/A440	2005	AAMA/WDMA/CSA 101/1.S.2/A440	2008
<u>Standard</u>	<u>Year</u>						
AAMA/WDMA/CSA 101/1.S.2/A440	2005						
AAMA/WDMA/CSA 101/1.S.2/A440	2008						
Equivalence of Product Standards Certified By							
Product Approval Method	Method 1 Option A						
Date Submitted	02/25/2014						



Date Validated 02/25/2014  
 Date Pending FBC Approval  
 Date Approved 03/04/2014

Summary of Products		
FL #	Model, Number or Name	Description
12250.1	3540	36x84 Fin Frame Insulated Glass
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +40/-50 Other: H-LC40. Glass complies with E1300-04.		<b>Certification Agency Certificate</b> <a href="#">FL12250 R12 C CAC APC - 3540 SH Fin (B2133.01).pdf</a> <b>Quality Assurance Contract Expiration Date</b> 07/27/2015 <b>Installation Instructions</b> <a href="#">FL12250 R12 II Install Instructs - 3540 SH Fin (As Tested B2133.01).pdf</a> Verified By: American Architectural Manufacturers Association Created by Independent Third Party: <b>Evaluation Reports</b> Created by Independent Third Party:
12250.2	3540 SH	52x72 Finless Frame
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +30/-30 Other: R-PG30		<b>Certification Agency Certificate</b> <a href="#">FL12250 R12 C CAC APC C7325.01-109-47-R0 3540 SH FLS 3-4IG 1-8A 52X72 R30.pdf</a> <b>Quality Assurance Contract Expiration Date</b> 04/12/2017 <b>Installation Instructions</b> <a href="#">FL12250 R12 II 08-02270 513016.pdf</a> Verified By: Luis R. Lomas, PE PE-62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12250 R12 AE 513016 C7325.pdf</a> Created by Independent Third Party: Yes
12250.3	3540 SH	36x74 Finless Frame
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +35/-50 Other: LC-PG35		<b>Certification Agency Certificate</b> <a href="#">FL12250 R12 C CAC APC C7326.01-109-47-R0 3540 SH FLS 3-4IG 1-8A 36X74 LC35-DP-50 psf.pdf</a> <b>Quality Assurance Contract Expiration Date</b> 08/28/2017 <b>Installation Instructions</b> <a href="#">FL12250 R12 II 08-01252A 511854A.pdf</a> Verified By: Luis R. Lomas, PE PE-62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12250 R12 AE 511854A C7326 36x74.pdf</a> Created by Independent Third Party: Yes
12250.4	3540 SH	44x72 Finless Frame
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +35/-47 Other: LC-PG35		<b>Certification Agency Certificate</b> <a href="#">FL12250 R12 C CAC APC C7326.01-109-47-R0 3540 SH FLS 3-4IG 1-8A 44X72 LC35-DP-47 psf.pdf</a> <b>Quality Assurance Contract Expiration Date</b> 08/28/2017 <b>Installation Instructions</b> <a href="#">FL12250 R12 II 08-01247A 511849A.pdf</a> Verified By: Luis R. Lomas, PE PE-62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12250 R12 AE 511849A C7326 44x72.pdf</a> Created by Independent Third Party: Yes
12250.5	3540 SH	48x96 Finless Frame Oriel
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +30/-30 Other: LC-PG30		<b>Certification Agency Certificate</b> <a href="#">FL12250 R12 C CAC APC C7326.01-109-47-R0 3540 SH FLS 3-4IG 1-8A 48X96 LC30.pdf</a> <b>Quality Assurance Contract Expiration Date</b> 08/28/2017 <b>Installation Instructions</b> <a href="#">FL12250 R12 II 08-01371A 511988A.pdf</a> Verified By: Luis R. Lomas, PE PE-62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12250 R12 AE 511988A C7326 48x96.pdf</a> Created by Independent Third Party: Yes

12250.6	3540 SH	52x62 Finless Frame
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +35/-35 Other: R-PG35		<b>Certification Agency Certificate</b> <a href="#">FL12250_R12_C_CAC_APC_D0206.01-109-47-R0_3540 SH_FLS_3-4IG_1-8A_52X62_R35.pdf</a> <b>Quality Assurance Contract Expiration Date</b> 08/27/2017 <b>Installation Instructions</b> <a href="#">FL12250_R12_II_08-02269_513015.pdf</a> Verified By: Luis R. Lomas, PE PE-62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12250_R12_AE_513015_D0206.pdf</a> Created by Independent Third Party: Yes
12250.7	3540 SH	44x72 Fin Frame
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +35/-47 Other: R-PG35. Glass complies with ASTM E1300-04.		<b>Certification Agency Certificate</b> <a href="#">FL12250_R12_C_CAC_APC_D0214.01-109-47-R0.pdf</a> <b>Quality Assurance Contract Expiration Date</b> 08/01/2017 <b>Installation Instructions</b> <a href="#">FL12250_R12_II_Install_Instructs - 3540 SH FIN D0214.01 (As Tested).pdf</a> Verified By: American Architectural Manufacturers Association Created by Independent Third Party: <b>Evaluation Reports</b> Created by Independent Third Party:
12250.8	3540 Single Hung	36x74 Fin Frame Insulating Glass
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +35/-50 Other: LC-PG35. Glass complies with ASTM E1300-04.		<b>Certification Agency Certificate</b> <a href="#">FL12250_R12_C_CAC_APC_C7327.01-109-47-R0_3540 SH_FIN_3-4IG_3-32A_SINGLE_UNIT@36X74_LC35(041217)-DP-50_psf.pdf</a> <b>Quality Assurance Contract Expiration Date</b> 04/12/2017 <b>Installation Instructions</b> <a href="#">FL12250_R12_II_Install_Instructs - 3540 SH Fin 36x74 (As Tested-C7327.01).pdf</a> Verified By: American Architectural Manufacturers Association Created by Independent Third Party: <b>Evaluation Reports</b> Created by Independent Third Party:
12250.9	3540 Single Hung	44x84 Fin Frame Insulating Glass
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +30/-30 Other: LC-PG30. Glass complies with ASTM E1300-04.		<b>Certification Agency Certificate</b> <a href="#">FL12250_R12_C_CAC_APC_C7324.01-109-47-R0_3540 SH_FIN_3-4IG_3-32A_44X84_LC30(041217).pdf</a> <b>Quality Assurance Contract Expiration Date</b> 04/12/2017 <b>Installation Instructions</b> <a href="#">FL12250_R12_II_Install_Instructs - 3540 SH Fin 44x84 (As Tested- C7324.01).pdf</a> Verified By: American Architectural Manufacturers Association Created by Independent Third Party: <b>Evaluation Reports</b> Created by Independent Third Party:
12250.10	3540 Single Hung	36x84 Finless Frame Insulated Glass
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +40/-50 Other: H-LC40		<b>Certification Agency Certificate</b> <a href="#">FL12250_R12_C_CAC_APC_B1910.01-109-47-R0_B0319.01-109-47-R0_3540 SH_FLS_36X84_LC40-DP-50psf.pdf</a> <b>Quality Assurance Contract Expiration Date</b> 05/26/2015 <b>Installation Instructions</b> <a href="#">FL12250_R12_II_08-01372.pdf</a> Verified By: Luis R. Lomas, PE PE-62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12250_R12_AE_511989.pdf</a> Created by Independent Third Party: Yes
12250.11	3540 Triple Single Hung	108x74 Fin Frame Insulating Glass
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes		<b>Certification Agency Certificate</b> <a href="#">FL12250_R12_C_CAC_APC_C7327.01-109-47-R0_3540 SH_Triple (Fin) May 13.pdf</a>

	<p><b>Impact Resistant:</b> No  <b>Design Pressure:</b> +35/-50  <b>Other:</b> LC-PG35. Glass complies with ASTM E1300-04.</p>	<p><b>Quality Assurance Contract Expiration Date</b>  04/12/2017  <b>Installation Instructions</b>  <a href="#">FL12250_R12_II_Install_Instructions - 3540 SH CHS Fin 108x74 (As Tested- C7327.01).pdf</a>  Verified By: American Architectural Manufacturers Association  Created by Independent Third Party:  <b>Evaluation Reports</b>  Created by Independent Third Party:</p>
<p>12250.12</p>	<p>3540/3240 SH</p> <p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> No  <b>Design Pressure:</b> +25/-25  <b>Other:</b> H-R25</p>	<p>52x84 Finless Frame Insulated</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL12250_R12_C_CAC_APC_B0314.01-109-47-R0_3540 SH FLS 52X84 R25.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>  05/26/2015  <b>Installation Instructions</b>  <a href="#">FL12250_R12_II_08-01514_512141.pdf</a>  Verified By: Luis R. Lomas, PE PE-62514  Created by Independent Third Party: Yes  <b>Evaluation Reports</b>  <a href="#">FL12250_R12_AE_512141_B0314.01.pdf</a>  Created by Independent Third Party: Yes</p>
<p>12250.13</p>	<p>3540/3240 SH</p> <p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> No  <b>Design Pressure:</b> +40/-47  <b>Other:</b> H-R40. Glass complies with E1300-04.</p>	<p>44x63 Fin Frame Insulated</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL12250_R12_C_CAC_APC_B0319.01-109-47-R0_3540 SH FIN 44X63 R40-DP-47 psf.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>  05/26/2015  <b>Installation Instructions</b>  <a href="#">FL12250_R12_II_Install_Instructions - 3540 SH FIN B0319.01 (As Tested).pdf</a>  Verified By: American Architectural Manufacturers Association  Created by Independent Third Party:  <b>Evaluation Reports</b>  Created by Independent Thrd Party:</p>
<p>12250.14</p>	<p>3540/3240 Single Hung</p> <p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> No  <b>Design Pressure:</b> +35/-45  <b>Other:</b> H-R35 Glass complies with E1300-04.</p>	<p>40x66 Fin Frame</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL12250_R12_C_CAC_APC_A3485.01-109-47-R0_3540 SH FIN 40X66 R35 -DP45 psf.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>  08/26/2014  <b>Installation Instructions</b>  <a href="#">FL12250_R12_II_Install - 3540 SH 40x66 as tested (A3485.01).pdf</a>  Verified By: American Architectural Manufacturers Association  Created by Independent Third Party:  <b>Evaluation Reports</b>  Created by Independent Third Party:</p>
<p>12250.15</p>	<p>3540/3240 Single Hung</p> <p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> No  <b>Design Pressure:</b> +35/-40  <b>Other:</b> H-R35. Glass complies with E1300-04.</p>	<p>44x63 Fin Frame Insulated Glass</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL12250_R12_C_CAC_APC_A7205.01-109-47-R0_3540 SH FIN 44X63.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>  02/08/2015  <b>Installation Instructions</b>  <a href="#">FL12250_R12_II_Install_Instructions - 3540 SH FIN (As Tested A7205).pdf</a>  Verified By: American Architectural Manufacturers Association  Created by Independent Third Party:  <b>Evaluation Reports</b>  Created by Independent Thrd Party:</p>
<p>12250.16</p>	<p>3540/3240 Single Hung</p> <p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> No  <b>Design Pressure:</b> +25/-25  <b>Other:</b> H-R25. Glass complies with ASTM E1300-04.</p>	<p>52x84 Fin Frame Insulating Glass</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL12250_R12_C_CAC_APC_B0319.01-109-47-R0_3540 SH FIN 52X84 R25.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>  05/26/2015  <b>Installation Instructions</b>  <a href="#">FL12250_R12_II_Install_Instructions - 3540 SH Fin 52x84 (As Tested-B0319).pdf</a></p>

Verified By: American Architectural Manufacturers Association Created by Independent Third Party: <b>Evaluation Reports</b> Created by Independent Third Party:
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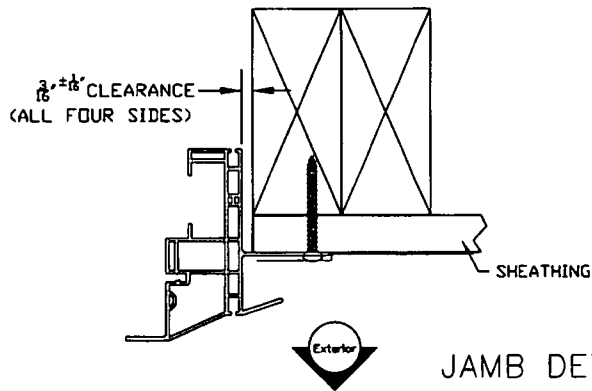
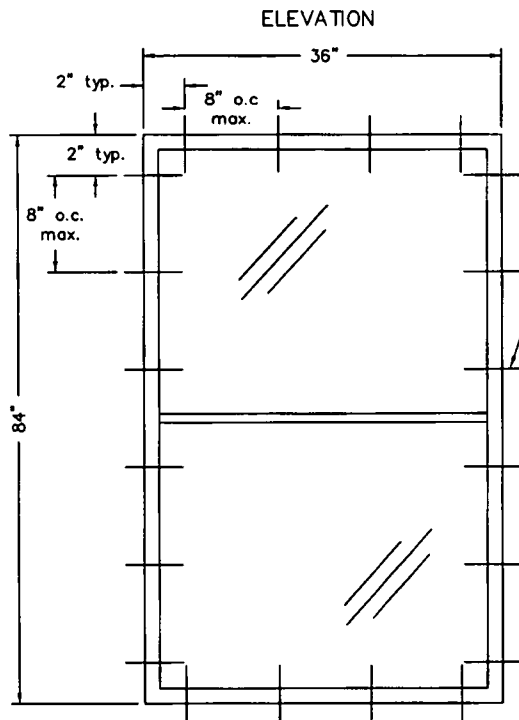
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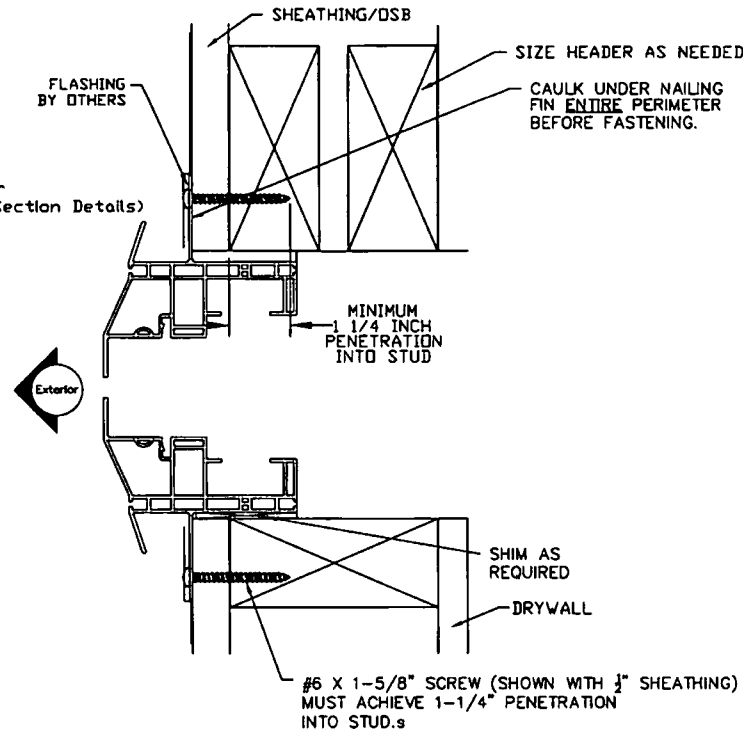
**Product Approval Accepts:**





JAMB DETAIL

HEAD DETAIL



SILL DETAIL

SIZE AND DESIGN PRESSURE CHART  
 FASTENER TYPE AND SPACING SHOWN WILL ALLOW DESIGN PRESSURES UP TO +40.10/-50 UNITS UP TO 36" x 84"  
 (SEE TEST REPORTS FOR INDIVIDUAL UNIT SIZE AND APPLICABLE DESIGN PRESSURE LIMITATIONS)



TITLE: INSTALLATION INSTRUCTIONS & FASTENER SCHEDULE - FIN -  
 PRODUCT: 3540 Single Hung

DRAWN BY: V.M.R.	DATE: 12-14-09
CHECKED:	DATE:
SCALE: NONE	SHEET: 1 OF 1
DWG. NO. 3540-3240 SH FIN	REV. -

Notes:

1. Installation depicted based off of structural test report #B2133.01-109-47.
2. Wood screws shall satisfy the National Design Specification for Wood Construction for material type and dimensional requirements.
3. Wood buck installations are assumed 2x S-P-F (G=0.42) or denser. Buck width shall be greater than the window frame width. Tapered or partial width bucks are not allowed. Wood buck shall be secured to the structure to resist all design loads.
4. Wood screw lengths shall be sufficient to guarantee 1-1/4" penetration into wood buck.
5. Maximum shim thickness of 1/4" permitted at each fastener location. Shims shall be load bearing, non-compressible type.
6. These drawings depict the details necessary to meet structural load requirements. They do not address the air infiltration, water penetration, intrusion or thermal performance requirements of the installation.
7. Installation shown is that of the test window for the size shown and the design pressure claimed. For window sizes smaller than shown, locate fasteners 2" from corners and no more than 8" on center. Design pressures of smaller window sizes are limited to that of the test window.

\* 'NAIL FIN' IS A GENERIC TERM WHICH MEANS 'MOUNTING FLANGE'. (NOT TO BE CONFUSED WITH '1/2' FRONT FLANGE)

**A.L.I**

(Validator / Operations Administrator)

**AAMA  
CERTIFICATION PROGRAM****AUTHORIZATION FOR PRODUCT CERTIFICATION****MI Windows & Doors, Inc.  
P.O. Box 370  
Gratz, PA 17030-0370****Attn: Rick Sawdey**

The product described below is hereby approved for listing in the next issue of the AAMA Certified Products Directory. The approval is based on successful completion of tests, and the reporting to the Administrator of the results of tests, accompanied by related drawings, by an AAMA Accredited Laboratory.

1. The listing below will be added to the next published AAMA Certified Products Directory.

SPECIFICATION	RECORD OF PRODUCT TESTED			
COMPANY AND CODE	CPD NO.	SERIES MODEL & PRODUCT DESCRIPTION	MAXIMUM SIZE TESTED	
AAMA/WDMA/CSA 101/I.S.2/A440-05 H-LC40*-914x2134 (36x84) Negative Design Pressure = -50 psf				
MI Windows & Doors, Inc. Code: MTL	7158	3540 SH (FIN) (PVC)(O/X)(IG)(INS GL) (REINF)(TILT)(ASTM)	<b>FRAME</b> 914 mm x 2134 mm (3'0" x 7'0")	<b>SASH</b> 867 mm x 892 mm (2'10" x 2'11")

2. This Certification will expire **July 27, 2015** and requires validation until then by continued listing in the current AAMA Certified Products Directory.

3. Product Tested and Reported by: **Architectural Testing, Inc.**

Report No.: **B2133.01-109-47**Date of Report: **August 16, 2011****Validated for Certification**  
Associated Laboratories, Inc.Date: **July 10, 2012**Cc: AAMA  
JGS  
ACP-04 (Rev. 1/11)**Authorized for Certification**  
American Architectural Manufacturers Association



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**Product Approval**  
USER: Public User

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FL #	FL14037-R2
Application Type	Revision
Code Version	2010
Application Status	Approved
Comments	
Archived	<input type="checkbox"/>
Product Manufacturer	MI Windows and Doors
Address/Phone/Email	650 West Market Street Gratz, PA 17030 (717) 365-3300 Ext 2560 bsitlinger@miwd.com
Authorized Signature	Vivian Wright rickw@rwbldgconsultants.com
Technical Representative	
Address/Phone/Email	
Quality Assurance Representative	
Address/Phone/Email	
Category	Windows
Subcategory	Mullions
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Lyndon F. Schmidt, P.E.
Florida License	PE-43409
Quality Assurance Entity	Architectural Testing, Inc.
Quality Assurance Contract Expiration Date	12/31/2014
Validated By	Ryan J. King, P.E. <input type="checkbox"/> Validation Checklist - Hardcopy Received
Certificate of Independence	<a href="#">FL14037_R2_COI_Certificate Of Independence.pdf</a>
Referenced Standard and Year (of Standard)	
Equivalence of Product Standards Certified By	
Sections from the Code	1715.5.4 1715.5.5

Product Approval Method Method 2 Option B

Date Submitted 01/12/2012  
 Date Validated 01/18/2012  
 Date Pending FBC Approval 02/01/2012  
 Date Approved 04/03/2012

Summary of Products		
FL #	Model, Number or Name	Description
14037.1	a. Vertical Mullion (M-1926)	Extruded Aluminum Clipped Vertical (M-1926) Mullion for use on Masonry or Wood Openings utilizing the Offset Mounting Brackets as used with Flange Mount Windows.
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> Yes <b>Design Pressure:</b> N/A <b>Other:</b> When used in areas requiring wind-borne debris protection this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996. See INST 14037.1 for any additional use limitations, design pressure ratings and installation instructions.		<b>Installation Instructions</b> <a href="#">FL14037 R2 II Inst 14037.1.pdf</a> Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL14037 R2 AE EVAL 14037.1.pdf</a> Created by Independent Third Party: Yes
14037.2	b. Horizontal Mullion (M-1926)	Extruded Aluminum Clipped Horizontal (M-1926) Mullion for use on Masonry or Wood Openings utilizing the Offset Mounting Brackets as used with Flange Mount Windows.
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> Yes <b>Design Pressure:</b> N/A <b>Other:</b> When used in areas requiring wind-borne debris protection this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996. See INST 14037.2 for any additional use limitations, design pressure ratings and installation instructions.		<b>Installation Instructions</b> <a href="#">FL14037 R2 II Inst 14037.2.pdf</a> Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL14037 R2 AE EVAL 14037.2.pdf</a> Created by Independent Third Party: Yes
14037.3	c. Combination Mullion (M-1926)	Combination Vertical (M-1926) and Horizontal (M-1926) Mullion for use with Windows and Transoms for use on Masonry or Wood Openings utilizing the Offset Mounting Bracket (To be used with Flange Mount Windows)
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> Yes <b>Design Pressure:</b> N/A <b>Other:</b> When used in areas requiring wind-borne debris protection this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996. See INST 14037.3 for any additional use limitations, design pressure ratings and installation instructions.		<b>Installation Instructions</b> <a href="#">FL14037 R2 II Inst 14037.3.pdf</a> Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL14037 R2 AE EVAL 14037.3.pdf</a> Created by Independent Third Party: Yes
14037.4	d. Vertical Mullion (M-1926)	Extruded Aluminum Clipped Vertical (M-1926) Mullion for use on Masonry or Wood Openings utilizing the Offset Mounting Brackets as used with Fin Mount Windows.
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> Yes <b>Design Pressure:</b> N/A <b>Other:</b> When used in areas requiring wind-borne debris protection this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996. See INST 14037.4 for any additional use limitations, design pressure ratings and installation instructions.		<b>Installation Instructions</b> <a href="#">FL14037 R2 II Inst 14037.4.pdf</a> Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL14037 R2 AE EVAL 14037.4.pdf</a> Created by Independent Third Party: Yes



14037.5	e. Horizontal Mullion (M-1926)	Extruded Aluminum Clipped Horizontal (M-1926) Mullion for use on Masonry or Wood Openings utilizing the Offset Mounting Brackets as used with Fin Mount Windows.
<p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> Yes  <b>Design Pressure:</b> N/A  <b>Other:</b> When used in areas requiring wind-borne debris protection this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996. See INST 14037.5 for any additional use limitations, design pressure ratings and installation instructions.</p>		<p><b>Installation Instructions</b>  <a href="#">FL14037_R2_II_Inst_14037.5.pdf</a>                      Verified By: Lyndon F. Schmidt, P.E. 43409                      Created by Independent Third Party: Yes  <b>Evaluation Reports</b>  <a href="#">FL14037_R2_AE_EVAL_14037.5.pdf</a>                      Created by Independent Third Party: Yes</p>
14037.6	f. Combination Mullion (M-1926)	Combination Vertical (M-1926) and Horizontal (M-1926) Mullion for use with Windows and Transoms for use on Masonry or Wood Openings utilizing the Offset Mounting Bracket (To be used with Fin Mount Windows)
<p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> Yes  <b>Design Pressure:</b> N/A  <b>Other:</b> When used in areas requiring wind-borne debris protection this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996. See INST 14037.6 for any additional use limitations, design pressure ratings and installation instructions.</p>		<p><b>Installation Instructions</b>  <a href="#">FL14037_R2_II_Inst_14037.6.pdf</a>                      Verified By: Lyndon F. Schmidt, P.E. 43409                      Created by Independent Third Party: Yes  <b>Evaluation Reports</b>  <a href="#">FL14037_R2_AE_EVAL_14037.6.pdf</a>                      Created by Independent Third Party: Yes</p>
14037.7	g. Vertical Mullion (M-2300)	Extruded Aluminum Clipped Vertical (M-2300) Mullion for use on Masonry or Wood Openings utilizing the Offset Mounting Brackets as used with Flange Mount Windows.
<p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> Yes  <b>Design Pressure:</b> N/A  <b>Other:</b> When used in areas requiring wind-borne debris protection this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996. See INST 14037.7 for any additional use limitations, design pressure ratings and installation instructions.</p>		<p><b>Installation Instructions</b>  <a href="#">FL14037_R2_II_Inst_14037.7.pdf</a>                      Verified By: Lyndon F. Schmidt, P.E. 43409                      Created by Independent Third Party: Yes  <b>Evaluation Reports</b>  <a href="#">FL14037_R2_AE_EVAL_14037.7.pdf</a>                      Created by Independent Third Party: Yes</p>
14037.8	h. Horizontal Mullion (M-2300)	Extruded Aluminum Clipped Horizontal (M-2300) Mullion for use on Masonry or Wood Openings utilizing the Offset Mounting Brackets as used with Flange Mount Windows.
<p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> Yes  <b>Design Pressure:</b> N/A  <b>Other:</b> When used in areas requiring wind-borne debris protection this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996. See INST 14037.8 for any additional use limitations, design pressure ratings and installation instructions.</p>		<p><b>Installation Instructions</b>  <a href="#">FL14037_R2_II_Inst_14037.8.pdf</a>                      Verified By: Lyndon F. Schmidt, P.E. 43409                      Created by Independent Third Party: Yes  <b>Evaluation Reports</b>  <a href="#">FL14037_R2_AE_EVAL_14037.8.pdf</a>                      Created by Independent Third Party: Yes</p>
14037.9	i. Combination Mullion (M2300 / M2301)	Combination Vertical (M-2300) and Horizontal (M-2301) Mullion for use with Windows and Transoms for use on Masonry or Wood Openings utilizing the Offset Mounting Bracket (To be used with Flange Mount Windows)
<p><b>Limits of Use</b>  <b>Approved for use in HVHZ:</b> No  <b>Approved for use outside HVHZ:</b> Yes  <b>Impact Resistant:</b> Yes  <b>Design Pressure:</b> N/A  <b>Other:</b> When used in areas requiring wind-borne debris protection this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2</p>		<p><b>Installation Instructions</b>  <a href="#">FL14037_R2_II_Inst_14037.9.pdf</a>                      Verified By: Lyndon F. Schmidt, P.E. 43409                      Created by Independent Third Party: Yes  <b>Evaluation Reports</b>  <a href="#">FL14037_R2_AE_EVAL_14037.9.pdf</a>                      Created by Independent Third Party: Yes</p>

and 3 as defined by ASTM E1996. See INST 14037.9 for any additional use limitations, design pressure ratings and installation instructions.

[Back](#)

[Next](#)

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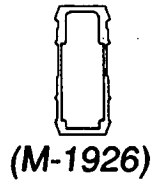
Product Approval Accepts:





650 W. Market St.  
Gratz, PA 17030

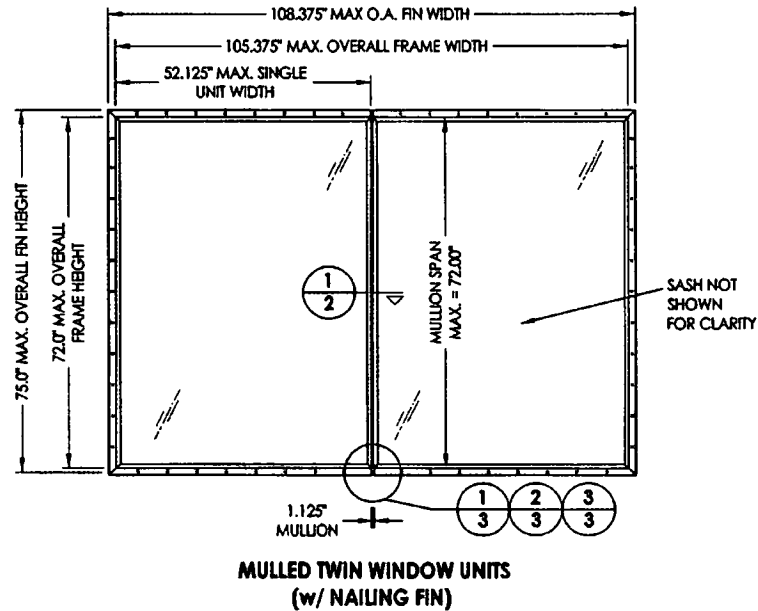
## EXTRUDED ALUMINUM VERTICAL CLIPPED MULLION (FIN MOUNT WINDOWS)



### GENERAL NOTES

1. This product has been evaluated and is in compliance with the 2010 Florida Building Code (FBC) structural requirements, excluding the "High Velocity Hurricane Zone".
2. When used in areas requiring wind borne debris protection, this product (if mullied together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996.
3. In Wind Zone 4 as defined by ASTM E1996, this product must be protected with an impact resistant covering complying with Section 1609.1.2 of the FBC.
4. Separate product approvals for each glazing product used with these mullions must be submitted along with this mullion product approval. The design pressure rating of the assembly shall be the lesser of the load capacity of the mullion as specified using this approval or the design pressure rating of the individual glazing products used.
5. Anchoring of each glazing product to the mullion shall be as shown in this drawing or as shown in each individual glazing product approval, whichever is more stringent.
6. Mullion anchor embedment to base material shall be beyond wall dressing or stucco.
7. Any conditions not covered in this evaluation are subject to separate engineering evaluation.
8. For 2x stud framing construction, anchoring of these units shall be the same as that shown for 2x buck masonry construction.

TABLE OF CONTENTS	
SHEET #	DESCRIPTION
1	Typical elevations, design pressures & general notes
2	Mullion details & cross section
3	Anchor bracket details
4	Buck anchoring



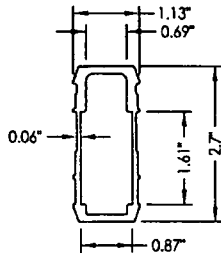
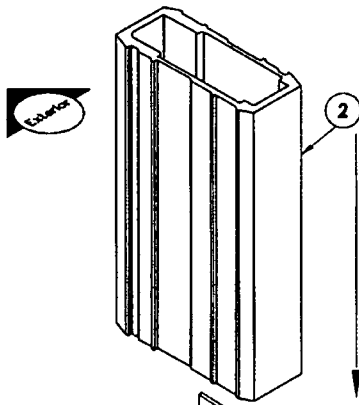
MAX. MULLION SPAN	DESIGN PRESSURE (PSF)					
	MAX. OVERALL FRAME WIDTH					
	48"	62"	74"	86"	98"	105.375"
72"	63.0	50.3	43.5	39.0	35.8	34.4
66"	70.0	66.8	58.2	52.5	48.6	47.1
60"	70.0	70.0	70.0	70.0	69.0	66.5
54"	70.0	70.0	70.0	70.0	70.0	70.0
48"	70.0	70.0	70.0	70.0	70.0	70.0

Documents Prepared By:  
**RW** BUILDING CONSULTANTS, INC.  
P.O. Box 250 Venice FL 33595  
Phone No.: 813.659.9187  
Florida Board of Professional Engineers  
Certificate of Authorization No. 9813  
*RWS* 1/12/12  
Lyndon F. Schmidt, P.E. No. 43409

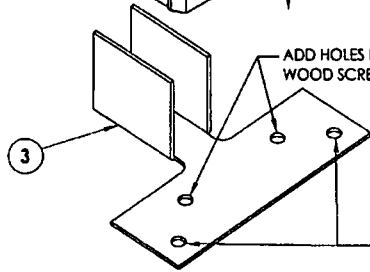
PRODUCT: CLIPPED MULLION  
PART OR ASSEMBLY: TYPICAL ELEVATIONS, DESIGN PRESSURES & GENERAL NOTES  
KV BY

NO.	DATE	REVISIONS
1	1/12/12	UPDATE TO 2010 FBC

DATE: 8/26/10  
SCALE: N.T.S.  
DWG. BY: JK  
CHK. BY: LFS  
DRAWING NO.: FL-14037.4  
SHEET 1 OF 4



2 **MULLION (M-1926)**  
6063-T6 ALUM.

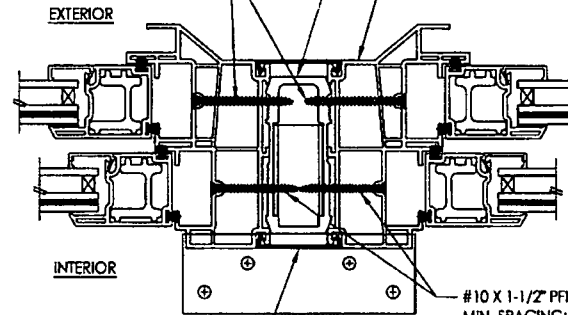


1 **BRACKET-TO-MULLION DETAIL**

ADD HOLES FOR ADDITIONAL  
WOOD SCREWS (2) AS REQUIRED

INSTALL CONCRETE SCREWS (2)  
AT OPPOSITE CORNERS ONLY

#10 X 1-3/4" PFH SMS (SEE NOTES BELOW)  
MIN. SPACING: 3" FROM EACH END AND  
24" MAX. O.C. THROUGHOUT.

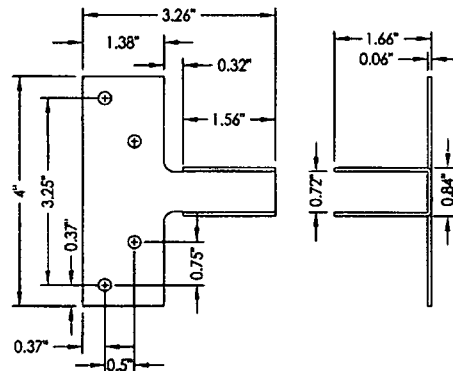


1  
2 **HORIZONTAL CROSS SECTION**

SHOWN WITH MI SERIES 1650  
DOUBLE HUNG FRAME UNDER  
SEPARATE APPROVAL.

#10 X 1-1/2" PFH SMS (SEE NOTES BELOW)  
MIN. SPACING: 3" FROM EACH END AND  
24" MAX. O.C. THROUGHOUT.

SNAP-ON VINYL  
MULL COVER (V-692)



3 **MULLION ANCHOR BRACKET (MT000022)**  
ASTM 1018 Steel

**Notes:**

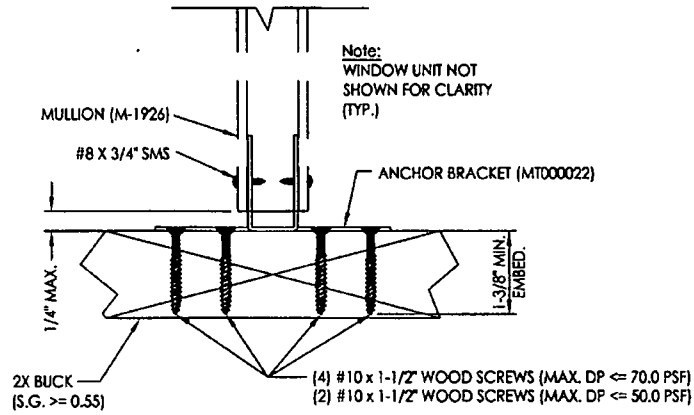
1. Refer to individual window product approval for fabrication and installation requirements, including glazing details, frame reinforcement and anchor specifications.
2. Sheet metal screws (self-drilling) shall have a minimum of 3 threads protrude through the mullion frame.

Documents Prepared By:  
**RW** BUILDING CONSULTANTS, INC.  
P.O. Box 230 Valrico FL 33595  
Phone No.: 813.959.9197  
Florida Board of Professional Engineers  
Certificate of Authorization No. 9813  
**RWS** 6-12-12  
London F. Schmidt, P.E. No. 43409

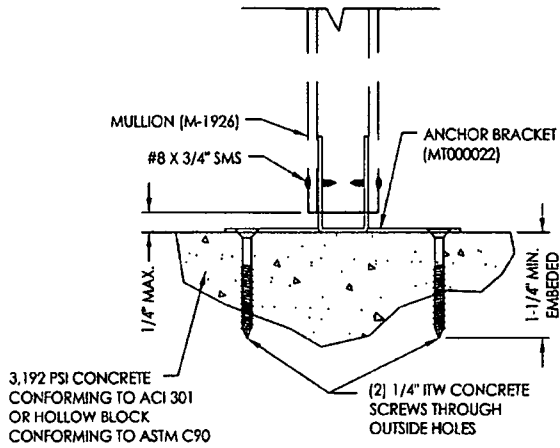
PRODUCT:	CLIPPED MULLION
PART OR ASSEMBLY:	MULLION DETAILS & CROSS SECTION

NO.	DATE	BY	REVISIONS
1	1/12/12	JK	UPDATE TO 2010 FBC

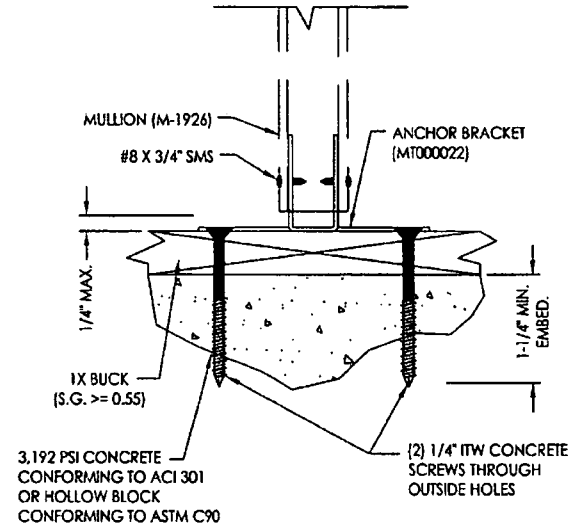
DATE:	8/26/10
SCALE:	N.T.S.
DWG. BY:	JK
CHK. BY:	LFS
DRAWING NO.:	FL-14037.4
SHEET	2 OF 4



**1** ANCHOR BRACKET DETAIL  
**3** Anchor to 2x buck



**3** ANCHOR BRACKET DETAIL  
**3** Direct to masonry



**2** ANCHOR BRACKET DETAIL  
**3** Anchor to masonry thru 1x buck

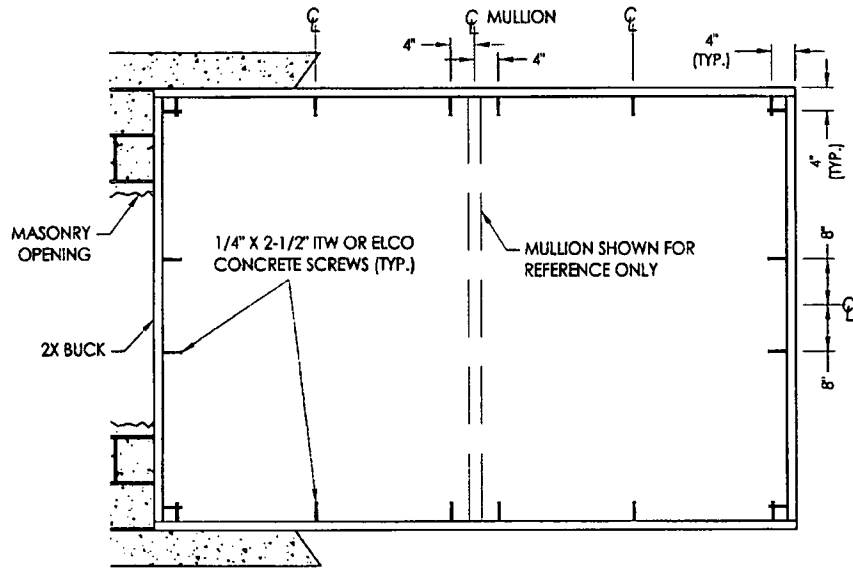
- Note:
- Refer to individual window product approval for fabrication and installation requirements, including glazing details, frame reinforcement and anchor specifications.
  - Mullion bracket anchoring details shown may be used at either end of mullion.

Documents Prepared By:  
**RW** BUILDING CONSULTANTS, INC.  
P.O. Box 230 Vero Beach, FL 33595  
Phone No.: 813.659.9197  
Florida Board of Professional Engineers  
Certificate of Authorization No. 9813  
Lynndon F. Schmidt, P.E. No. 43469

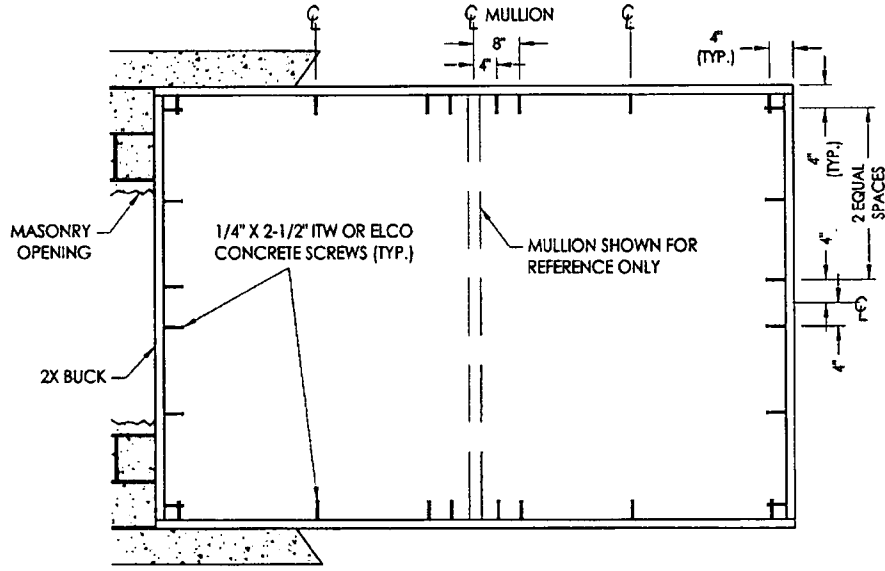
PRODUCT:	CLIPPED MULLION	
PART OR ASSEMBLY:	ANCHOR BRACKET DETAILS	
NOI	DATE	BY
1	1/12/12	UPDATE TO 2010 FBC
REVISIONS		
DATE:	8/26/10	
SCALE:	N.T.S.	
DWG. BY:	JK	
CHK. BY:	LFS	
DRAWING NO.:	FL-14037.4	
SHEET	3	OF 4

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R:\A-Projects\Project-Extdraw\proj\_1501\_16001\PE\_1566A.D\_BMBC Drawings\FBC 2010\F1-14037.1-6.DWG\_A.4



**BUCK ANCHORING**  
(DP <= 40.0 PSF)



**BUCK ANCHORING**  
(DP <= 70.0 PSF)

**CONCRETE ANCHOR NOTES:**

1. Substitution of equal concrete screws from a different supplier may have different edge distance and center distance requirements.
2. Concrete screw locations at the corners may be adjusted to maintain the minimum edge distance to mortar joints. If concrete screw locations noted as "MAX. ON CENTER" must be adjusted to maintain the minimum edge distance to mortar joints, additional concrete screws may be required to ensure the maximum on center dimension is not exceeded.
3. Concrete anchor table:

ANCHOR TYPE	ANCHOR SIZE	MINIMUM EMBEDMENT	MINIMUM CLEARANCE TO MASONRY EDGE	MINIMUM CLEARANCE TO ADJACENT ANCHOR
ITW	1/4"	1-1/4"	2-1/2"	3"
ELCO	1/4"	1-1/4"	1"	4"

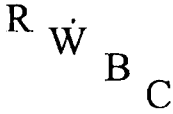
4. For 2x stud framing, substitute each concrete anchor with a #10 x 2-1/2" wood screw (1-1/2" min. embedment)

Documents Prepared By:  
**RW**  
 BUILDING CONSULTANTS, INC.  
 P.O. Box 230 VeroBe FL 33569  
 Phone No.: 813.659.9197  
 Florida Board of Professional Engineers  
 Certificate Of Authorization No. 9813  
 1-12-12  
 Lyndon F. Schmidt, P.E. No. 43408

PRODUCT:  
 CLIPPED MULLION  
 PART OR ASSEMBLY:  
 BUCK ANCHORING

NO.	DATE	BY
1	1/12/12	FBC

DATE: 8/26/10  
 SCALE: N.T.S.  
 DWG. BY: JK  
 CHK. BY: LFS  
 DRAWING NO.: FL-14037.4  
 SHEET 4 OF 4



# R W Building Consultants, Inc.

Consulting and Engineering Services for the Building Industry

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

Florida Board of Professional Engineers Certificate of Authorization No. 9813

<b>Product Evaluation Report</b>	<b>Report No.:</b> FL-14037.4 R2
	<b>Date:</b> January 12, 2012

Product Category	Sub Category	Manufacturer	Product Name
Window	Mullion	MI Windows & Door 650 West Market Street Gratz, PA 17030 Phone 717.365.3300	Extruded Aluminum Vertical Clipped Mullion (M-1926) (Fin Mount Windows)


**Scope:** Product Evaluation report issued by R W Building Consultants, Inc. & Lyndon F. Schmidt, P.E. (System ID # 1998) for MI Windows and Doors, based on Rule Chapter No. 9N-3, Method 2B of the State of Florida Product Approval, Department of Business & Professional Regulation.

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

**Limitations:**

1. This product has been evaluated and is in compliance with the 2010 Florida Building Code structural requirements excluding the "High Velocity Hurricane Zone".
2. When used in areas requiring wind borne debris protection, this product (if mulled together with impact rated windows) does not require protection from an impact resistant covering when used in Wind Zones 1, 2 and 3 as defined by ASTM E1996.
3. In Wind Zone 4 as defined by ASTM E1996, this product must be protected with an impact resistant covering complying with Section 1609.1.2 of the FBC.
4. Separate product approvals for each glazing product used with these mullions must be submitted along with this mullion product approval. The design pressure rating of the assembly shall be the lesser of the load capacity of the mullion as specified using this approval or the design pressure rating of the individual glazing products used.
5. Anchoring of each glazing product to the mullion shall be as shown in drawing FL-14037.4 or as shown in each individual glazing product approval, whichever is more stringent.
6. Mullion anchor embedment to base material shall be beyond wall dressing or stucco.
7. Any conditions not covered in this evaluation are subject to separate engineering evaluation.
8. For 2x stud framing construction, anchoring of these units shall be the same as that shown for 2x buck masonry construction.
9. See drawing FL-14037.4 for size and design pressure limitations.

**Supporting Documents:**

- |   |  |   |
|---|--|---|
| 1. <u>Drawing No.</u><br>No. FL-14037.4   | <u>Prepared by</u><br>RW Building Consultants, Inc. (CA #9813)   | <u>Signed &amp; Sealed by</u><br>Lyndon F. Schmidt, P.E.                              |
| 2. <u>Calculations</u><br>Mullion<br>Buck Anchoring   | <u>Prepared by</u><br>RW Building Consultants, Inc. (CA #9813)<br>RW Building Consultants, Inc. (CA #9813) | <u>Signed &amp; Sealed by</u><br>Lyndon F. Schmidt, P.E.<br>Lyndon F. Schmidt, P.E.   |
| 3. <u>Quality Assurance</u><br>Certificate of Participation issued by Architectural Testing, Inc., certifying that MI Windows and Doors is manufacturing products within a quality assurance program that complies with ISO/IEC 17020 and Guide 53. |  |  |

Lyndon F. Schmidt, P.E.  
FL PE No. 43409  
1/17/2012



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**Product Approval**  
USER: Public User

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FL #	FL15332-R1
Application Type	Revision
Code Version	2010
Application Status	Approved
Comments	
Archived	<input type="checkbox"/>
Product Manufacturer	MI Windows and Doors
Address/Phone/Email	650 West Market Street Gratz, PA 17030 (717) 365-3300 Ext 2560 bsitlinger@miwd.com
Authorized Signature	Luis Lomas rlomas@irlomaspe.com
Technical Representative	Ivan Paredes
Address/Phone/Email	1001 W. Crosby RD. Carrollton, TX 75006 ivan.paredes@gactx.com
Quality Assurance Representative	Ivan Paredes, M.E.
Address/Phone/Email	1001 W. Crosby Rd. Carrollton, TX 75006 ivan.paredes@gactx.com
Category	Exterior Doors
Subcategory	Sliding Exterior Door Assemblies
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Luis Roberto Lomas
Florida License	PE-62514
Quality Assurance Entity	National Accreditation and Management Institute
Quality Assurance Contract Expiration Date	12/31/2015
Validated By	Steven M. Urich, PE <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received
Certificate of Independence	<a href="#">FL15332_R1_COI_FLCOI.pdf</a>
Referenced Standard and Year (of Standard)	<b>Standard</b> AAMA/WDMA/CSA 101/1.S.2/A440
Equivalence of Product Standards Certified By	<b>Year</b> 2005



## Sections from the Code

Product Approval Method	Method 1 Option D
Date Submitted	10/31/2013
Date Validated	12/24/2013
Date Pending FBC Approval	12/30/2013
Date Approved	02/24/2014

<b>Summary of Products</b>		
<b>FL #</b>	<b>Model, Number or Name</b>	<b>Description</b>
15332.1	SERIES 420 ALUMINUM SGD	SERIES 420 ALUMINUM SGD OXO 145-3/4"x80" NON-REINFORCED
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: REFER TO APPROVAL DOCUMENT FOR DESIGN PRESSURE RATINGS		<b>Installation Instructions</b> <a href="#">FL15332 R1 II 08-00500C.pdf</a> Verified By: Luis Roberto Lomas 62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL15332 R1 AE 510807B.pdf</a> Created by Independent Third Party: Yes
15332.2	SERIES 420 ALUMINUM SGD	SERIES 420 ALUMINUM SGD OX, XO, XX 96"x80" NON-REINFORCED
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: REFER TO APPROVAL DOCUMENT FOR DESIGN PRESSURE RATINGS		<b>Installation Instructions</b> <a href="#">FL15332 R1 II 08-00498C.pdf</a> Verified By: Luis Roberto Lomas 62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL15332 R1 AE 510805B.pdf</a> Created by Independent Third Party: Yes
15332.3	SERIES 420 ALUMINUM SGD REINFORCED	SERIES 420 ALUMINUM SGD REINFORCED OXO 145-3/4"x96"
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: REFER TO APPROVAL DOCUMENT FOR DESIGN PRESSURE RATINGS		<b>Installation Instructions</b> <a href="#">FL15332 R1 II 08-02248A.pdf</a> Verified By: Luis Roberto Lomas 62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL15332 R1 AE 512968A.pdf</a> Created by Independent Third Party: Yes
15332.4	SERIES 420 ALUMINUM SGD REINFORCED	SERIES 420 ALUMINUM SGD REINFORCED OX, XO, XX 96"x96"
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: REFER TO APPROVAL DOCUMENT FOR DESIGN PRESSURE RATINGS		<b>Installation Instructions</b> <a href="#">FL15332 R1 II 08-02249A.pdf</a> Verified By: Luis Roberto Lomas 62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL15332 R1 AE 512969A.pdf</a> Created by Independent Third Party: Yes
15332.5	SERIES 420 ALUMINUM SGD REINFORCED	SERIES 420 ALUMINUM SGD REINFORCED XXX 143"x96"
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: REFER TO APPROVAL DOCUMENT FOR DESIGN PRESSURE RATINGS		<b>Installation Instructions</b> <a href="#">FL15332 R1 II 08-02250A.pdf</a> Verified By: Luis Roberto Lomas 62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL15332 R1 AE 512970A.pdf</a> Created by Independent Third Party: Yes
15332.6	SERIES 420 REINFORCED ALUMINUM SGD	SERIES 420 REINFORCED ALUMINUM SGD OX, XO, XX 96"x96"
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: REFER TO APPROVAL DOCUMENT FOR DESIGN PRESSURE RATINGS		<b>Installation Instructions</b> <a href="#">FL15332 R1 II 08-00499C.pdf</a> Verified By: Luis Roberto Lomas 62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL15332 R1 AE 510806B.pdf</a> Created by Independent Third Party: Yes
15332.7	SERIES 420 REINFORCED	SERIES 420 REINFORCED ALUMINUM SGD OXO

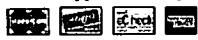
	ALUMINUM SGD	146"x96"
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: REFER TO APPROVAL DOCUMENT FOR DESIGN PRESSURE RATINGS		<b>Installation Instructions</b> <a href="#">FL15332 R1 II 08-00501C.pdf</a> Verified By: Luis Roberto Lomas 62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL15332 R1 AE 510808B.pdf</a> Created by Independent Third Party: Yes
15332.8	SERIES 430/440 ALUMINUM SGD	SERIES 430/440 ALUMINUM SGD XXX 143"x80" NON-REINFORCED
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: REFER TO APPROVAL DOCUMENT FOR DESIGN PRESSURE RATINGS		<b>Installation Instructions</b> <a href="#">FL15332 R1 II 08-00502C.pdf</a> Verified By: Luis Roberto Lomas 62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL15332 R1 AE 510809B.pdf</a> Created by Independent Third Party: Yes
15332.9	SERIES 430/440 REINFORCED ALUMINUM SGD	SERIES 430/440 REINFORCED ALUMINUM SGD XXX 143"x96"
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: REFER TO APPROVAL DOCUMENT FOR DESIGN PRESSURE RATINGS		<b>Installation Instructions</b> <a href="#">FL15332 R1 II 08-00503C.pdf</a> Verified By: Luis Roberto Lomas 62514 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL15332 R1 AE 510810B.pdf</a> Created by Independent Third Party: Yes

[Contact Us](#) :: 1940 North Monroe Street, Tallahassee FL 32399 Phone: 850-487-1824

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 \*Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

**Product Approval Accepts:**



NOTES:

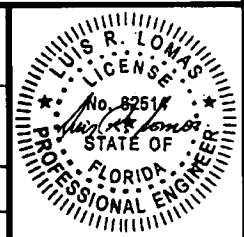
1. THE PRODUCT SHOWN HEREIN IS DESIGNED AND MANUFACTURED TO COMPLY WITH REQUIREMENTS OF THE FLORIDA BUILDING CODE.
2. WOOD FRAMING AND MASONRY OPENING TO BE DESIGNED AND ANCHORED TO PROPERLY TRANSFER ALL LOADS TO STRUCTURE. FRAMING AND MASONRY OPENING IS THE RESPONSIBILITY OF THE ARCHITECT OR ENGINEER OF RECORD.
3. 1X BUCK OVER MASONRY/CONCRETE IS OPTIONAL. WHERE 1X BUCK IS NOT USED DISSIMILAR MATERIALS MUST BE SEPARATED WITH APPROVED COATING OR MEMBRANE. SELECTION OF COATING OR MEMBRANE IS THE RESPONSIBILITY OF THE ARCHITECT OR ENGINEER OF RECORD.
4. ALLOWABLE STRESS INCREASE OF 1/3 WAS NOT USED IN THE DESIGN OF THE PRODUCT SHOWN HEREIN. WIND LOAD DURATION FACTOR Cd=1.6 WAS USED FOR WOOD ANCHOR CALCULATIONS.
5. FRAME MATERIAL: EXTRUDED ALUMINUM 6063-T5.
6. UNITS MUST BE GLAZED PER ASTM E1300-04, WITH SAFETY GLASS.
7. APPROVED IMPACT PROTECTIVE SYSTEM IS REQUIRED FOR THIS PRODUCT IN WIND BORNE DEBRIS REGIONS.
8. SHIM AS REQUIRED AT EACH INSTALLATION ANCHOR WITH LOAD BEARING SHIM. SHIM WHERE SPACE OF 1/16" OR GREATER OCCURS. MAXIMUM ALLOWABLE SHIM STACK TO BE 1/4".
9. DOOR ASSEMBLIES INSTALLED WHERE OVERHANG RATIO IS EQUAL OR GREATER THAN 1.0 DO NOT REQUIRE WATER INFILTRATION RESISTANCE.  
OVERHANG RATIO = OVERHANG LENGTH/OVERHANG HEIGHT
10. FOR ANCHORING INTO WOOD FRAMING OR 2X BUCK USE #10 WOOD SCREWS WITH SUFFICIENT LENGTH TO ACHIEVE A 1 3/8" MINIMUM EMBEDMENT INTO SUBSTRATE. LOCATE ANCHORS AS SHOWN IN ELEVATIONS AND INSTALLATION DETAILS.
11. FOR ANCHORING INTO MASONRY/CONCRETE USE 3/16" TAPCONS WITH SUFFICIENT LENGTH TO ACHIEVE A 1 1/4" MINIMUM EMBEDMENT INTO SUBSTRATE WITH 2 1/2" MINIMUM EDGE DISTANCE. LOCATE ANCHORS AS SHOWN IN ELEVATIONS AND INSTALLATION DETAILS.
12. FOR ANCHORING INTO METAL STRUCTURE USE #10 SMS OR SELF DRILLING SCREWS WITH SUFFICIENT LENGTH TO ACHIEVE 3 THREADS MINIMUM BEYOND STRUCTURE INTERIOR WALL. LOCATE ANCHORS AS SHOWN IN ELEVATIONS AND INSTALLATION DETAILS.
13. ALL FASTENERS TO BE CORROSION RESISTANT.
14. INSTALLATION ANCHORS SHALL BE INSTALLED IN ACCORDANCE WITH ANCHOR MANUFACTURER'S INSTALLATION INSTRUCTIONS AND ANCHORS SHALL NOT BE USED IN SUBSTRATES WITH STRENGTHS LESS THAN THE MINIMUM STRENGTH SPECIFIED BELOW:
  - A. WOOD - MINIMUM SPECIFIC GRAVITY OF G=0.42
  - B. CONCRETE - MINIMUM COMPRESSIVE STRENGTH OF 3,192 PSI.
  - C. MASONRY - STRENGTH CONFORMANCE TO ASTM C-90, GRADE N, TYPE 1 (OR GREATER).
  - D. METAL STRUCTURE: STEEL 18GA, 33KSI OR ALUMINUM 6063-T5 1/8" THICK MINIMUM.
15. APPROVED CONFIGURATIONS: OX, XO, XX, XP, PX, XIP, PIX.

REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARTS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.

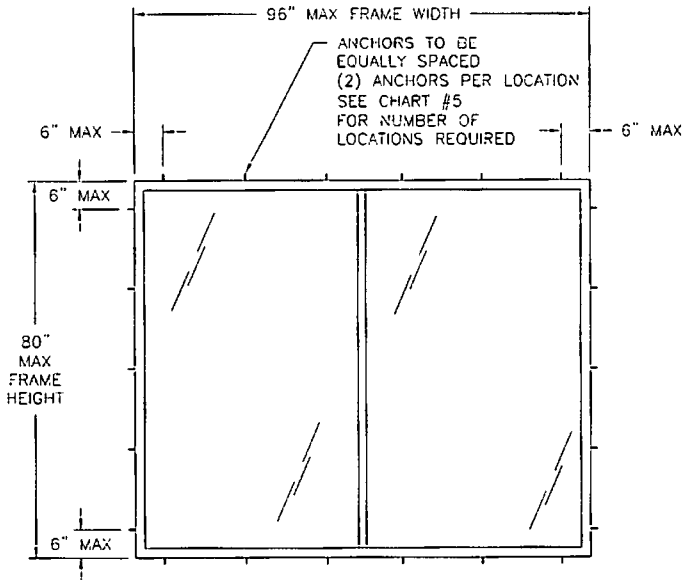
TABLE OF CONTENTS	
SHEET NO.	DESCRIPTION
1	NOTES
2 - 3	ELEVATIONS
4 - 10	INSTALLATION DETAILS

MI WINDOWS AND DOORS LLC 1001 W. CROSBY RD CARROLLTON, TX 75006		
SERIES 420 SGD 96" X 80" NON-REINFORCED NOTES		
DRAWN: F.A.	DWG NO. 08-00498	REV C
SCALE NTS	DATE 02/23/09	SHEET 1 OF 10

SIGNED: 12/06/2013



REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARIS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.



**CHART #1**  
WITH 2-1/32" SILL  
WHERE WATER INFILTRATION RESISTANCE IS REQUIRED.  
SEE NOTE 9 SHEET 1

Design pressure chart (psf)								
Frame Height (in)	Single Panel and Total Frame Width (in)							
	30.0		36.0		42.0		48.0	
	60.00		72.00		84.00		96.00	
	Pos	Neg	Pos	Neg	Pos	Neg	Pos	Neg
80.0	40.0	55.1	40.0	48.2	40.0	43.4	40.0	40.0

**CHART #3**  
WITH 1-1/2" SILL  
WHERE WATER INFILTRATION RESISTANCE IS REQUIRED.  
SEE NOTE 9 SHEET 1

Design pressure chart (psf)								
Frame Height (in)	Single Panel and Total Frame Width (in)							
	30.0		36.0		42.0		48.0	
	60.00		72.00		84.00		96.00	
	Pos	Neg	Pos	Neg	Pos	Neg	Pos	Neg
80.0	25.0	50.8	25.0	44.4	25.0	40.0	25.0	36.8

**CHART #2**  
WITH 2-1/32" SILL  
WHERE WATER INFILTRATION RESISTANCE IS NOT REQUIRED.  
SEE NOTE 9 SHEET 1

Design pressure chart (psf)								
Frame Height (in)	Single Panel and Total Frame Width (in)							
	30.0		36.0		42.0		48.0	
	60.00		72.00		84.00		96.00	
	Pos	Neg	Pos	Neg	Pos	Neg	Pos	Neg
80.0	55.1	55.1	48.2	48.2	43.4	43.4	40.0	40.0

**CHART #4**  
WITH 1-1/2" SILL  
WHERE WATER INFILTRATION RESISTANCE IS NOT REQUIRED.  
SEE NOTE 9 SHEET 1

Design pressure chart (psf)								
Frame Height (in)	Single Panel and Total Frame Width (in)							
	30.0		36.0		42.0		48.0	
	60.00		72.00		84.00		96.00	
	Pos	Neg	Pos	Neg	Pos	Neg	Pos	Neg
80.0	50.8	50.8	44.4	44.4	40.0	40.0	36.8	36.8

**SERIES 420 SGD**  
EXTERIOR VIEW

DESIGN PRESSURE RATING	IMPACT RATING
±40.0PSF	NONE

WITH 2 1/32" SILL  
SEE CHARTS #1 AND #2 FOR OTHER UNITS RATINGS

DESIGN PRESSURE RATING	IMPACT RATING
+25.0/-36.8PSF	NONE

WITH 1 1/2" SILL  
SEE CHARTS #3 AND #4 FOR OTHER UNITS RATINGS

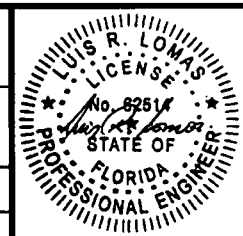
**CHART #5**

Number of anchor locations required								
Frame Height (in)	Single Panel and Total Frame Width (in)							
	30.0		36.0		42.0		48.0	
	60.0		72.0		84.0		96.0	
	H&S	Jamb	H&S	Jamb	H&S	Jamb	H&S	Jamb
80.0	4	5	5	5	6	5	6	5

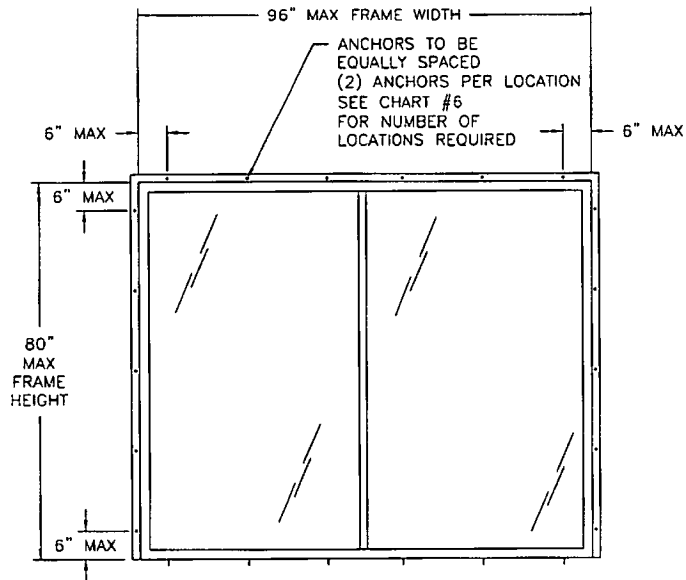
MI WINDOWS AND DOORS LLC  
1001 W. CROSBY RD  
CARROLLTON, TX 75006

SERIES 420 SGD  
96" X 80" NON-REINFORCED  
ELEVATION

DRAWN: F.A.	DWG NO. 08-00498	REV C
SCALE NTS	DATE 02/23/09	SHEET 2 OF 10



REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARTS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.



**SERIES 420 SGD**  
EXTERIOR VIEW

DESIGN PRESSURE RATING	IMPACT RATING
±40.0PSF	NONE

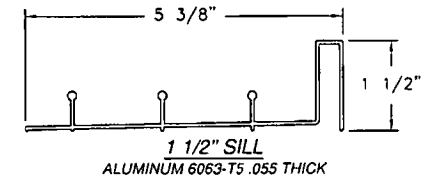
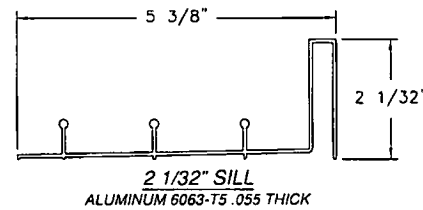
WITH 2 1/32" SILL  
SEE CHARTS #1 AND #2 SHEET 2 FOR OTHER UNITS RATINGS

DESIGN PRESSURE RATING	IMPACT RATING
+25.0/-36.8PSF	NONE

WITH 1 1/2" SILL  
SEE CHARTS #3 AND #4 SHEET 2 FOR OTHER UNITS RATINGS

**CHART #6**  
Number of anchor locations required

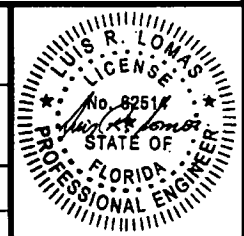
Frame Height (in)	Single Panel and Total Unit Width (in)							
	30.0		36.0		42.0		48.0	
	H&S	Jamb	H&S	Jamb	H&S	Jamb	H&S	Jamb
60.0								
80.0	4	5	5	5	6	5	6	5



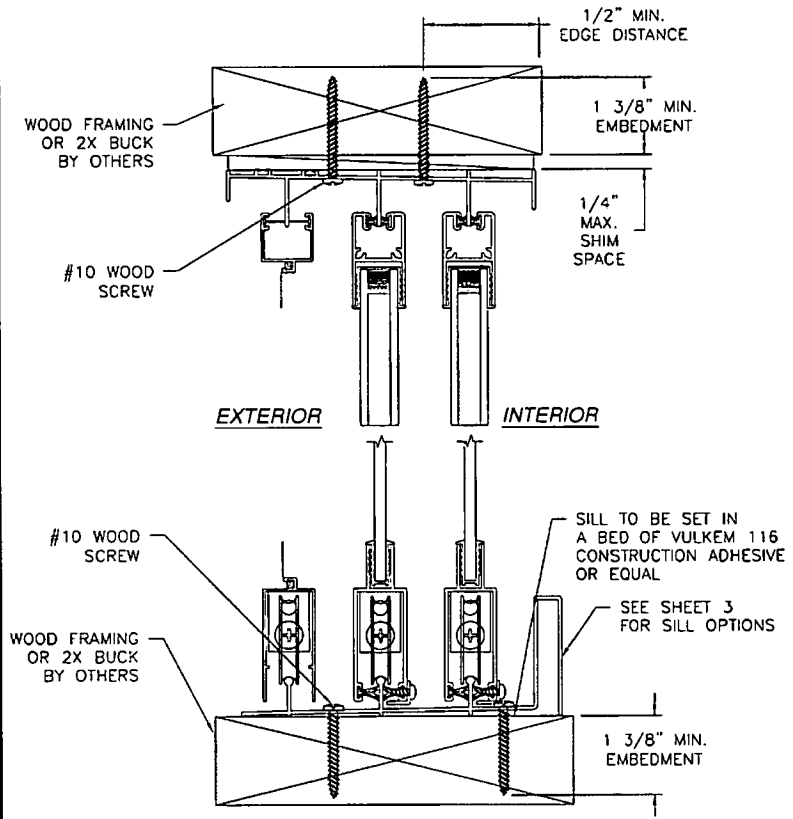
MI WINDOWS AND DOORS LLC  
1001 W. CROSBY RD  
CARROLLTON, TX 75006

SERIES 420 SGD  
96" X 80" NON-REINFORCED  
FIN ELEVATION

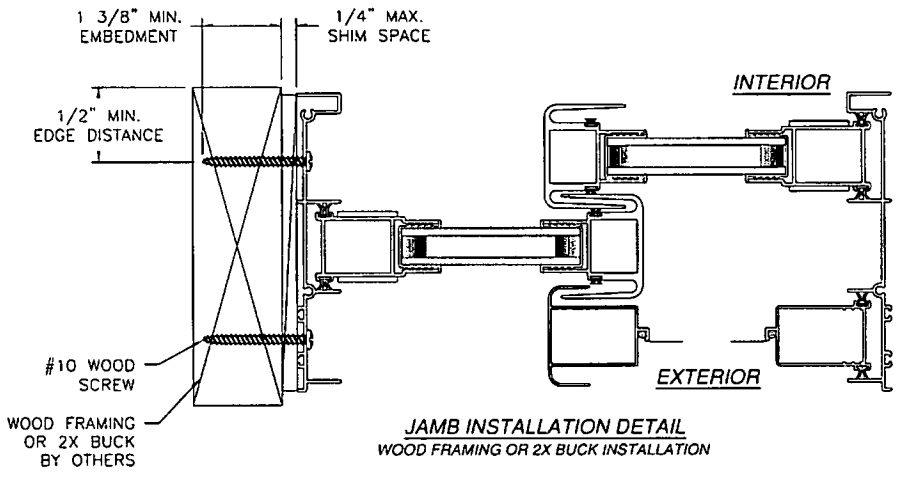
DRAWN: F.A.	DWG NO. 08-00498	REV C
SCALE NTS	DATE 02/23/09	SHEET 3 OF 10



REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARTS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.



**VERTICAL CROSS SECTION**  
WOOD FRAMING OR 2X BUCK INSTALLATION



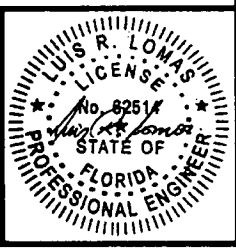
**JAMB INSTALLATION DETAIL**  
WOOD FRAMING OR 2X BUCK INSTALLATION

- NOTES:
1. INTERIOR AND EXTERIOR FINISHES, BY OTHERS, NOT SHOWN FOR CLARITY.
  2. PERIMETER AND JOINT SEALANT BY OTHERS TO BE DESIGNED IN ACCORDANCE WITH ASTM E2112

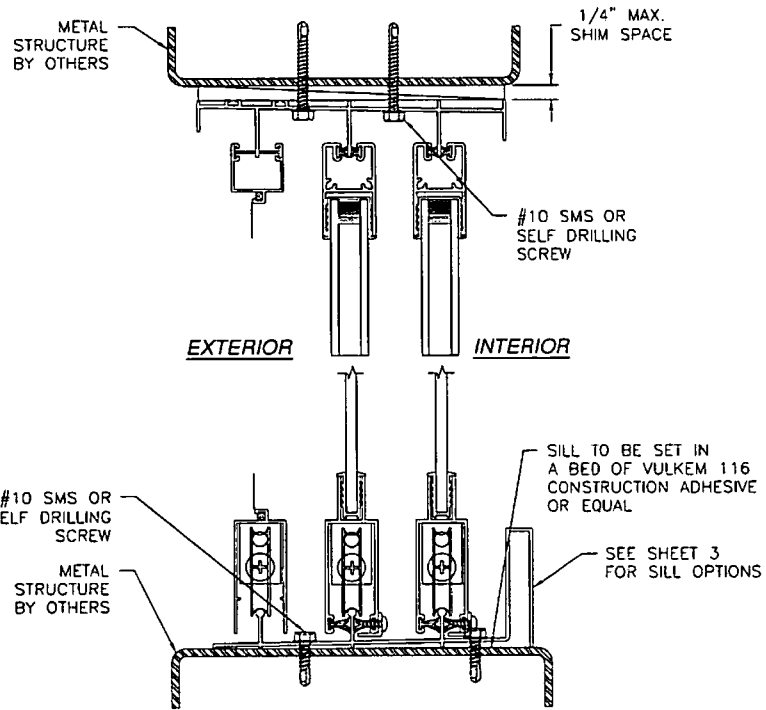
MI WINDOWS AND DOORS LLC  
1001 W. CROSBY RD  
CARROLLTON, TX 75006

SERIES 420 SGD  
96" X 80" NON-REINFORCED  
FRAME INSTALLATION DETAILS

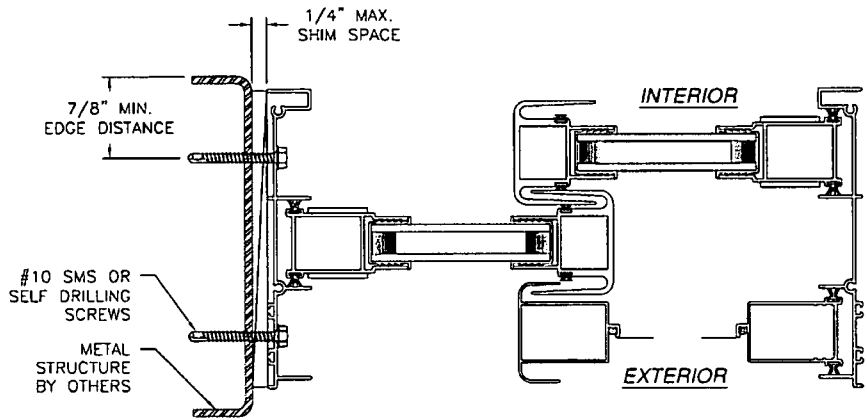
DRAWN: F.A.	DWG NO. 08-00498	REV C
SCALE NTS	DATE 02/23/09	SHEET 4 OF 10



REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARTS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.



**VERTICAL CROSS SECTION**  
METAL STRUCTURE INSTALLATION



**JAMB INSTALLATION DETAIL**  
METAL STRUCTURE INSTALLATION

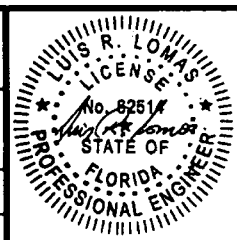
#10 SMS OR SELF DRILLING SCREW  
METAL STRUCTURE BY OTHERS  
SILL TO BE SET IN A BED OF VULKEM 116 CONSTRUCTION ADHESIVE OR EQUAL  
SEE SHEET 3 FOR SILL OPTIONS

NOTES:  
1. INTERIOR AND EXTERIOR FINISHES, BY OTHERS, NOT SHOWN FOR CLARITY.  
2. PERIMETER AND JOINT SEALANT BY OTHERS TO BE DESIGNED IN ACCORDANCE WITH ASTM E2112

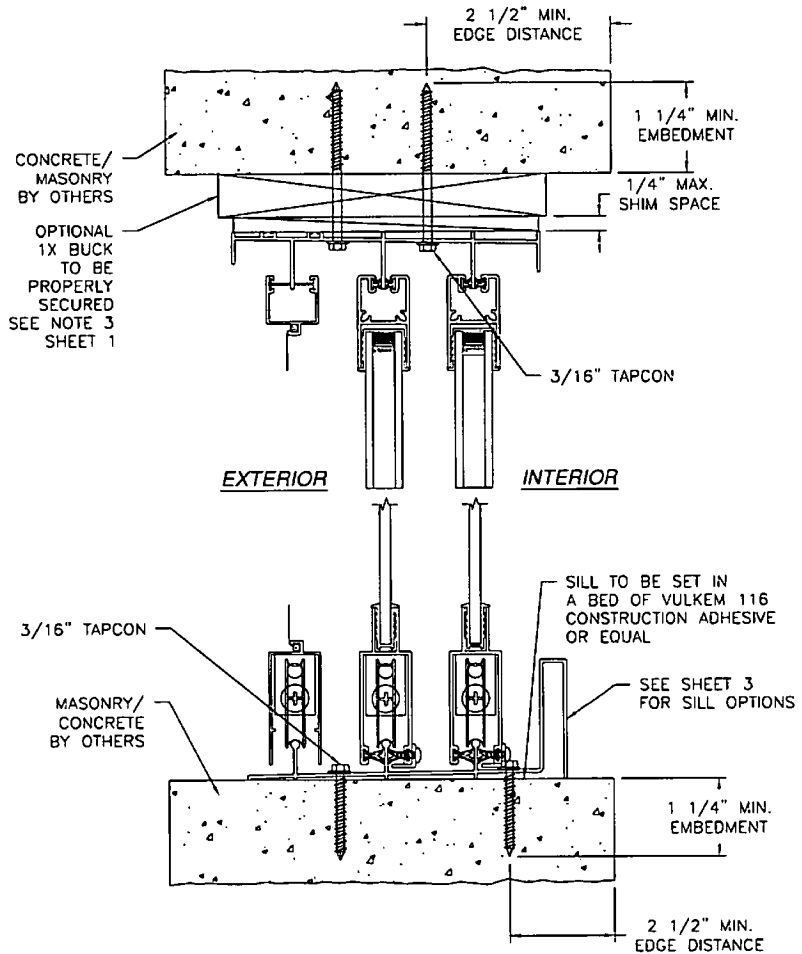
MI WINDOWS AND DOORS LLC  
1001 W. CROSBY RD  
CARROLLTON, TX 75006

SERIES 420 SGD  
96" X 80" NON-REINFORCED  
FRAME INSTALLATION DETAILS

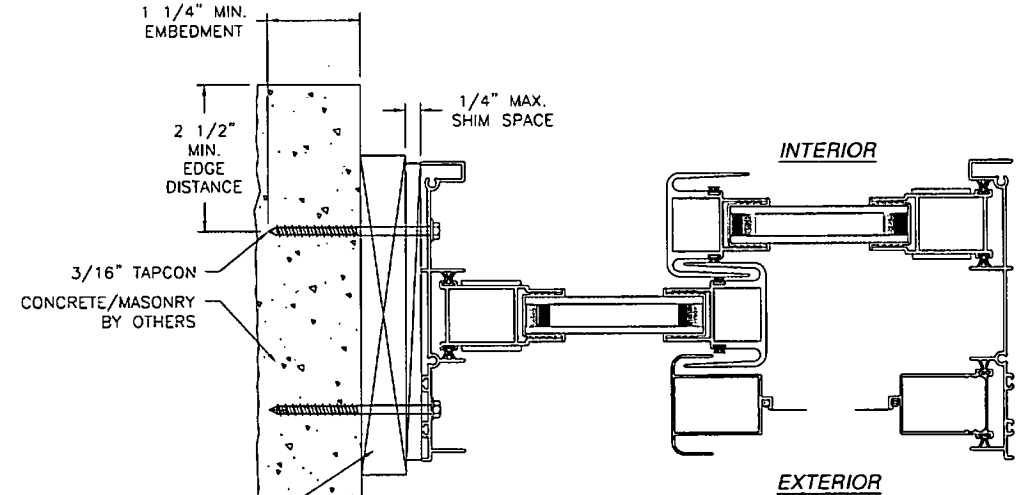
DRAWN: F.A.	DWG NO. 08-00498	REV C
SCALE NTS	DATE 02/23/09	SHEET 5 OF 10



REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARTS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.



**VERTICAL CROSS SECTION**  
CONCRETE/MASONRY INSTALLATION



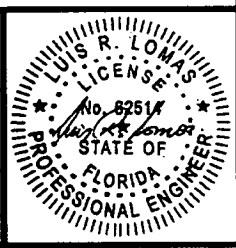
**JAMB INSTALLATION DETAIL**  
CONCRETE/MASONRY INSTALLATION

NOTES:  
 1. INTERIOR AND EXTERIOR FINISHES, BY OTHERS, NOT SHOWN FOR CLARITY.  
 2. PERIMETER AND JOINT SEALANT BY OTHERS TO BE DESIGNED IN ACCORDANCE WITH ASTM E2112

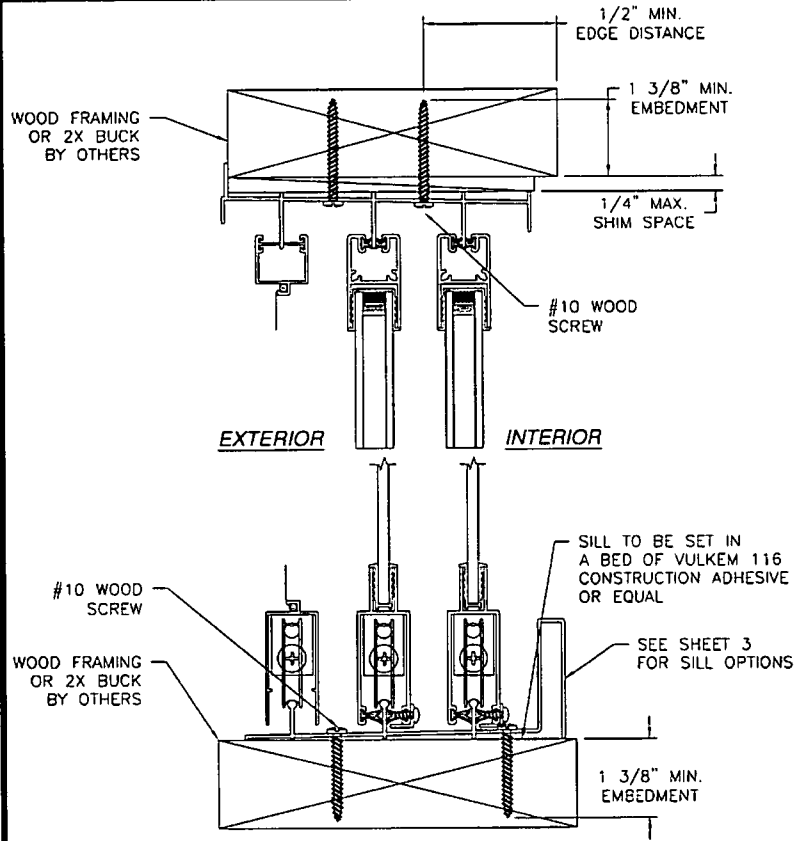
MI WINDOWS AND DOORS LLC  
 1001 W. CROSBY RD  
 CARROLLTON, TX 75006

SERIES 420 SGD  
 96" X 80" NON-REINFORCED  
 FRAME INSTALLATION DETAILS

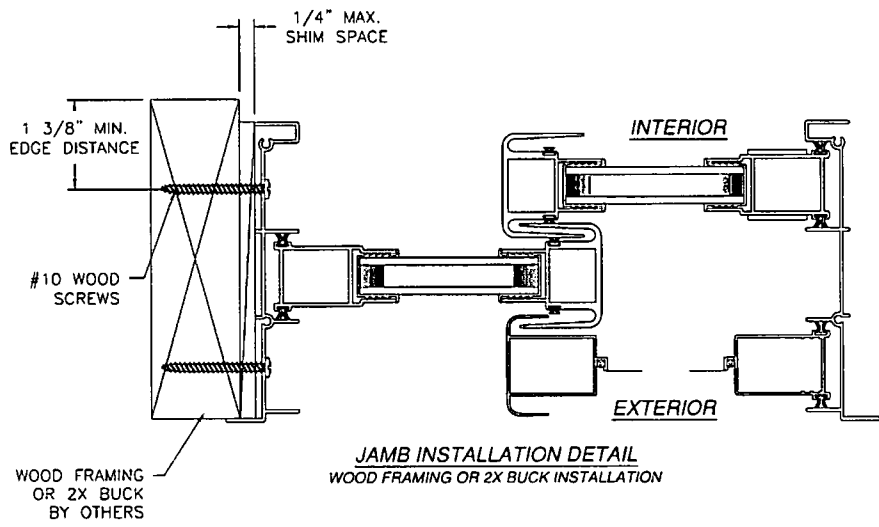
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SCALE NTS	DATE 02/23/09	SHEET 6 OF 10







**VERTICAL CROSS SECTION**  
WOOD FRAMING OR 2X BUCK INSTALLATION



**JAMB INSTALLATION DETAIL**  
WOOD FRAMING OR 2X BUCK INSTALLATION

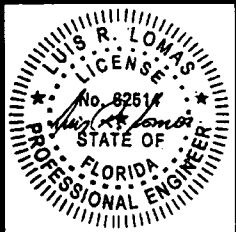
REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARTS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.

**NOTES:**  
 1. INTERIOR AND EXTERIOR FINISHES, BY OTHERS, NOT SHOWN FOR CLARITY.  
 2. PERIMETER AND JOINT SEALANT BY OTHERS TO BE DESIGNED IN ACCORDANCE WITH ASTM E2112

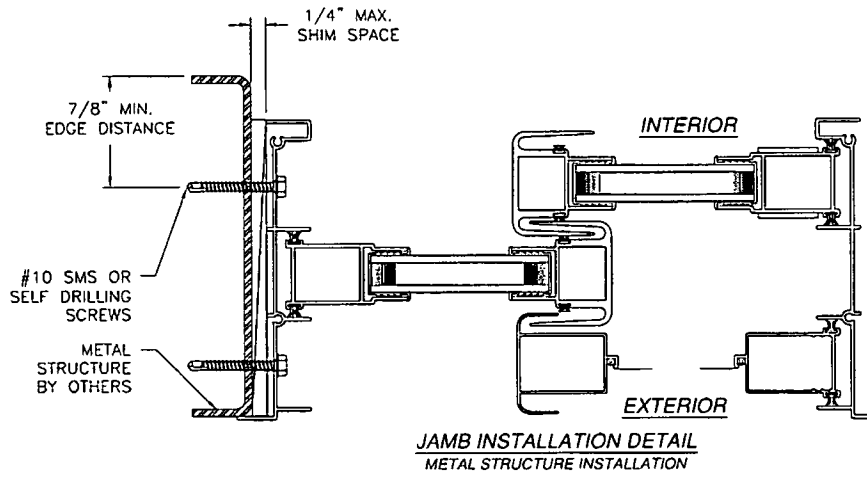
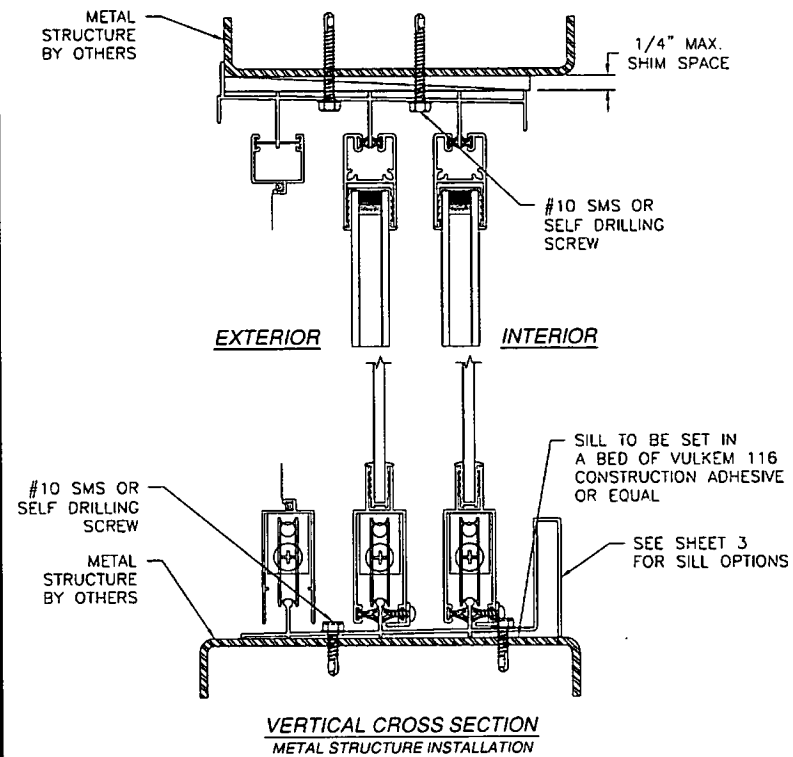
**MI WINDOWS AND DOORS LLC**  
 1001 W. CROSBY RD  
 CARROLLTON, TX 75006

SERIES 420 SGD  
 96" X 80" NON-REINFORCED  
 FLANGE INSTALLATION DETAILS

DRAWN: F.A.	DWG NO. 08-00498	REV C
SCALE NTS	DATE 02/23/09	SHEET 7 OF 10



REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARTS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.

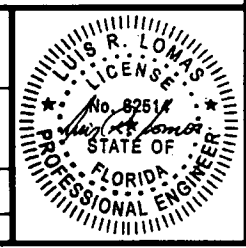


NOTES:  
 1. INTERIOR AND EXTERIOR FINISHES, BY OTHERS, NOT SHOWN FOR CLARITY.  
 2. PERIMETER AND JOINT SEALANT BY OTHERS TO BE DESIGNED IN ACCORDANCE WITH ASTM E2112

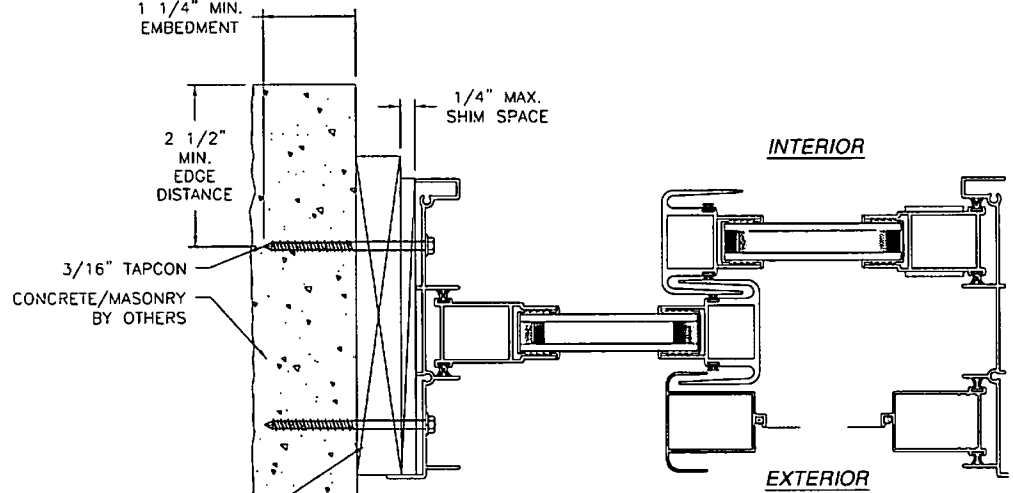
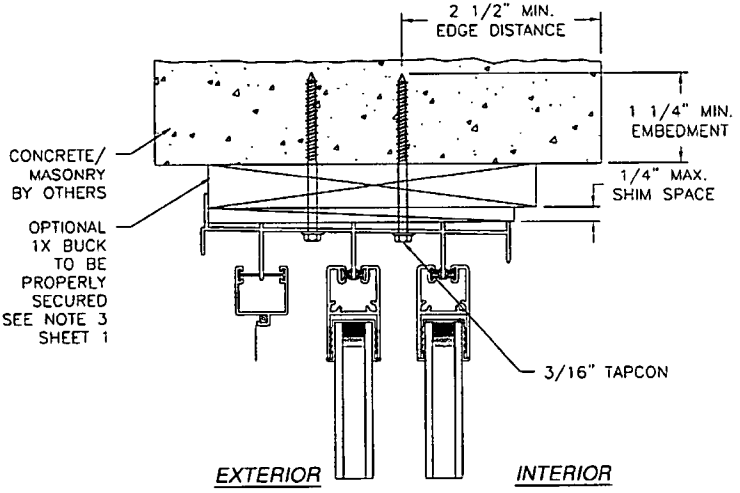
MI WINDOWS AND DOORS LLC  
 1001 W. CROSBY RD  
 CARROLLTON, TX 75006

SERIES 420 SGD  
 96" X 80" NON-REINFORCED  
 FLANGE INSTALLATION DETAILS

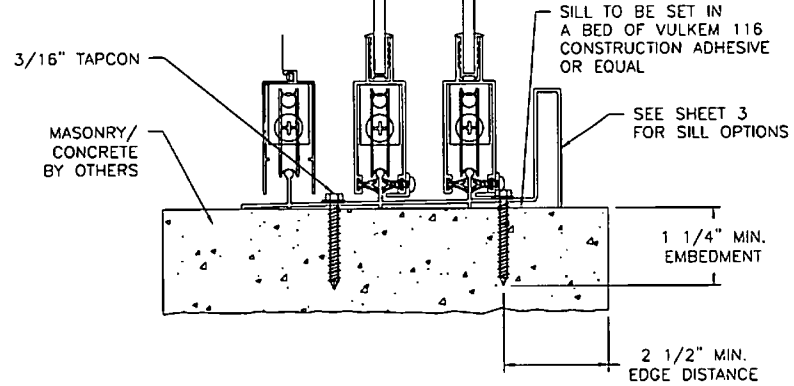
DRAWN: F.A.	DWG NO. 08-00498	REV C
SCALE NTS	DATE 02/23/09	SHEET 8 OF 10



REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARTS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.



**JAMB INSTALLATION DETAIL**  
CONCRETE/MASONRY INSTALLATION



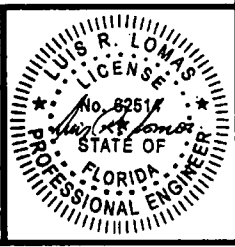
**VERTICAL CROSS SECTION**  
CONCRETE/MASONRY INSTALLATION

- NOTES:  
 1. INTERIOR AND EXTERIOR FINISHES, BY OTHERS, NOT SHOWN FOR CLARITY.  
 2. PERIMETER AND JOINT SEALANT BY OTHERS TO BE DESIGNED IN ACCORDANCE WITH ASTM E2112

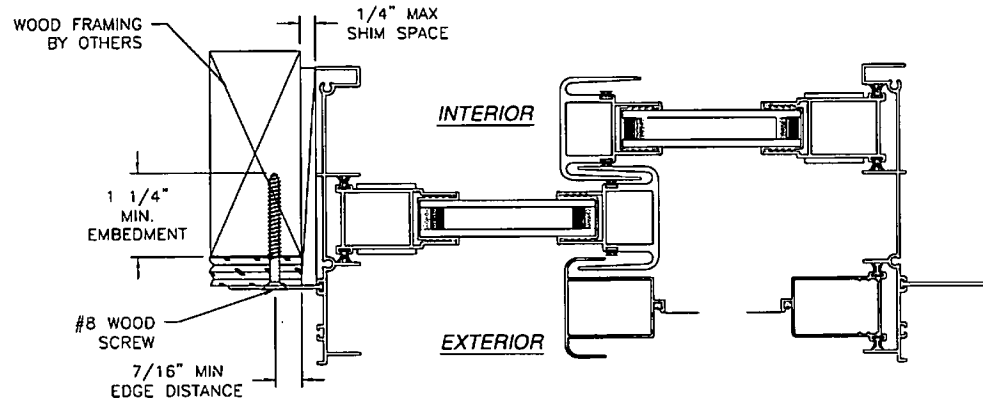
MI WINDOWS AND DOORS LLC  
 1001 W. CROSBY RD  
 CARROLLTON, TX 75006

SERIES 420 SGD  
 96" X 80" NON-REINFORCED  
 FLANGE INSTALLATION DETAILS

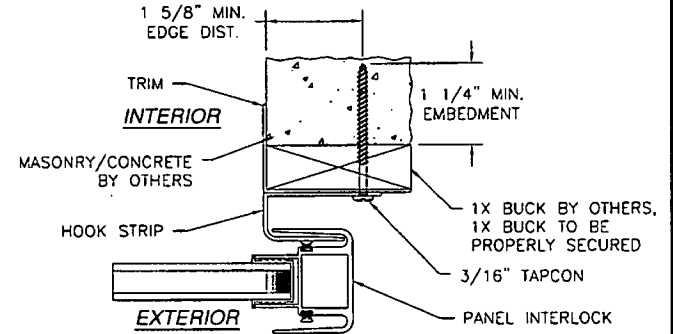
DRAWN: F.A.	DWG NO. 08-00498	REV C
SCALE NTS	DATE 02/23/09	SHEET 9 OF 10



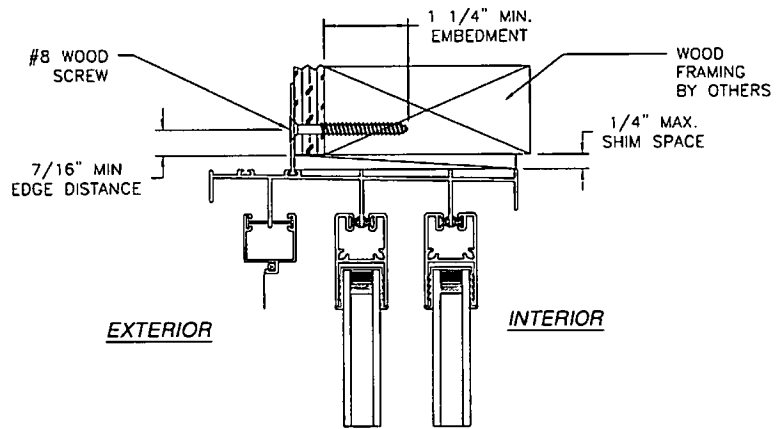
REVISIONS			
REV	DESCRIPTION	DATE	APPROVED
A	ADDED CHARTS	03/05/12	R.L.
B	REVISED PER NEW TESTING	10/29/13	R.L.
C	ADDED FLANGE AND FIN INSTALLATIONS	12/06/13	R.L.



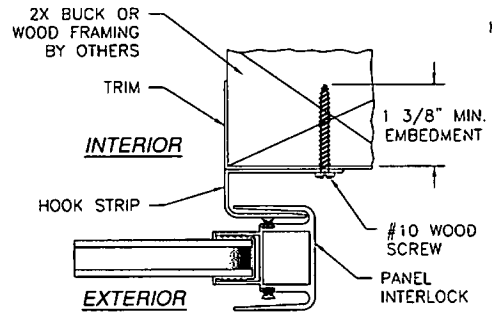
**JAMB INSTALLATION DETAIL**  
WOOD FRAMING OR 2X BUCK INSTALLATION



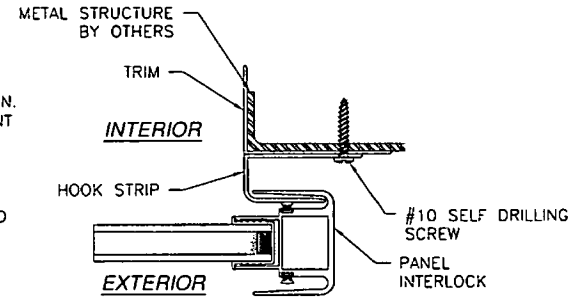
**HOOK STRIP INSTALLATION**  
MASONRY/CONCRETE



**VERTICAL CROSS SECTION**  
WOOD FRAMING OR 2X BUCK INSTALLATION  
FOR SILL INSTALLATION SEE SHEETS 4-9.



**HOOK STRIP INSTALLATION**  
2X BUCK/WOOD FRAMING



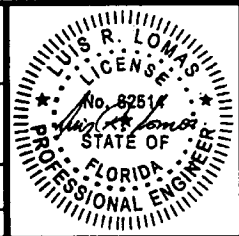
**HOOK STRIP INSTALLATION**  
METAL STRUCTURE

NOTES:  
1. INTERIOR AND EXTERIOR FINISHES, BY OTHERS, NOT SHOWN FOR CLARITY.  
2. PERIMETER AND JOINT SEALANT BY OTHERS TO BE DESIGNED IN ACCORDANCE WITH ASTM E2112

MI WINDOWS AND DOORS LLC  
1001 W. CROSBY RD  
CARROLLTON, TX 75006

SERIES 420 SGD  
96" X 80" NON-REINFORCED  
FIN AND HOOK INSTALLATION DETAILS

DRAWN: F.A.	DWG NO. 08-00498	REV C
SCALE NTS	DATE 02/23/09	SHEET 10 OF 10



*L. Roberto Lomas P.E.*  
233 W. Main St.  
Danville, VA 24541  
434-688-0609  
rlomas@trlomaspe.com

## Engineering Evaluation Report

Report No.: 510805B

**Manufacturer:** MI Windows and Doors LLC  
1001 W. Crosby Road  
Carrollton, TX 75006

**Product Line:** Series 420 Aluminum SGD 96"x80 Non-Reinforced

### **Compliance:**

The above mentioned product has been evaluated for compliance with the requirements of the Florida Department of Community Affairs for Statewide Acceptance per Rule 61G20-3.005 method 1(d). The product listed herein complies with requirements of the Florida Building Code.

### **Supporting Technical Documentation:**

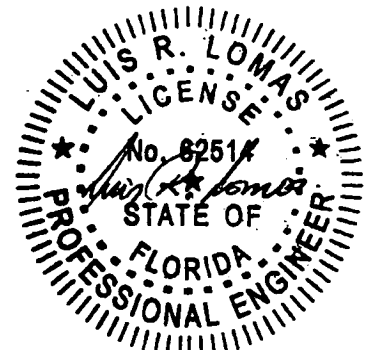
1. Approval document: drawing number 08-00498, Revision C, titled Series 420 Aluminum SGD, prepared, signed and sealed by Luis Roberto Lomas P.E.
2. Report No.: CCLI-12-119 signed by Wesley Wilson  
Construction Consulting Laboratory International, Carrollton, TX  
AAMA/WDMA/CSA 101/I.S.2/A440-05  
Design pressure: ±40.0psf  
Water penetration resistance 6.0psf
3. Report No.: C1716.03-109-47 signed by Michael D. Stremmel, P.E.  
Architectural Testing, Inc., York, PA  
AAMA/WDMA/CSA 101/I.S.2/A440-08  
Design pressure: ±25.0psf  
Water penetration resistance 3.76psf
4. Anchor calculations, report number 510805-1B, prepared, signed and sealed by Luis Roberto Lomas P.E.

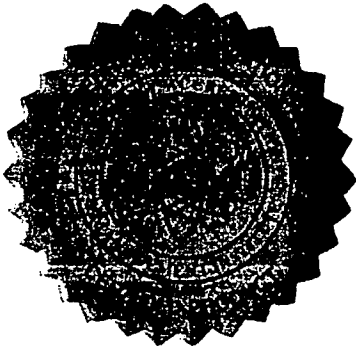
### **Limitations and Conditions of use:**

- Maximum design pressure: Refer to approval document.
- Maximum unit size: 96" x 80"
- Approved configurations: OX, XO, XX, XP, PX, XIP and PIX
- Units must be glazed per ASTM E 1300-04, see installation instructions for glass options.
- This product is not rated to be used in the HVHZ.
- This product is not impact resistant and requires impact protection in wind borne debris regions.
- Frame material to be aluminum 6063-T5.

**Installation:** Units must be installed in accordance with approval document, 08-00498, Revision C.

**Certification of Independence:** Please note that I don't have nor will acquire a financial interest in any company manufacturing or distributing the product(s) for which this report is being issued. Also, I don't have nor will acquire a financial interest in any other entity involved in the approval process of the listed product(s).





## NOTICE OF PRODUCT CERTIFICATION

**Company:** Therma-Tru Corporation  
 108 Mutzfeld Road  
 Butler, IN 46721

**Certification No.:** NI005329-R3  
**Certification Date:** 10/15/2003  
**Expiration Date:** 12/31/2015  
**Revision Date:** 01/04/2012

**Product:** Fiberclassic Opaque Fiberglass Door Inswing/Outswing w/ and w/o Sidelites  
**Benchmark by Therma-Tru Opaque Fiberglass Door Inswing/Outswing w/ and w/o Sidelites**  
**Specifications Tested To:** ASTM E330/E331/TAS202

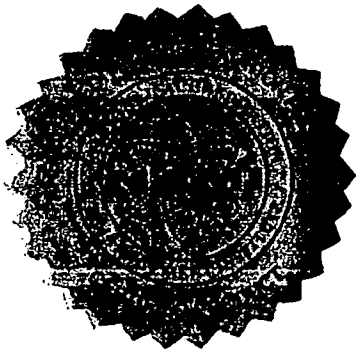
To verify that the "Notice of Product Certification" is valid, please visit [www.NAMICertification.com](http://www.NAMICertification.com) to assure that the product is active and currently listed. This certification represents product conformity to the applicable specification and that certification criteria has been satisfied. Please review and advise NAMI if any corrections are required to this document.

Configuration	Inswing or Outswing	Glazed or Opaque	Maximum Size	Design Pressure Pos/Neg	Missile Impact Rated	Test Report Number & Comments
X Single	I/S	Opaque	3'0" x 8'0"	+67/-67	No	ETC-01-741-10703.0/L-2097/TTF-253F
X Single	O/S	Opaque	3'0" x 8'0"	+67/-67	No	ETC-01-741-10703.0/L-2097/TTF-254F
XX Double	I/S	Opaque	6'0" x 8'0"	+40/-40	No	ETC-01-741-10703.0/L-2097/TTF-253F Standard Aluminum Astragal
XX Double	O/S	Opaque	6'0" x 8'0"	+40/-40	No	ETC-01-741-10703.0/L-2097/TTF-254F Standard Aluminum Astragal
XX Double	I/S	Opaque	6'0" x 8'0"	+47/-47	No	ETC-01-741-10703.0/L-2097/TTF-253F Coastal Aluminum Astragal
XX Double	O/S	Opaque	6'0" x 8'0"	+47/-47	No	ETC-01-741-10703.0/L-2097/TTF-254F Coastal Aluminum Astragal
O XO/O X/XO Single w/Sidelites	I/S	Opaque Door Glazed Sidelites	5'4" x 8'0"	+40/-40	No	ETC-01-741-10593.0/L-2173/TTF-253F
O XO/O X/XO Single w/Sidelites	O/S	Opaque Door Glazed Sidelites	5'4" x 8'0"	+40/-40	No	ETC-01-741-10593.0/L-2173/TTF-254F
O X X O Double w/Sidelites	I/S	Opaque Doors Glazed Sidelites	8'4" x 8'0"	+40/-40	No	ETC-01-741-10593.0/L-2173/TTF-253F Standard Aluminum Astragal
O X X O Double w/Sidelites	O/S	Opaque Doors Glazed Sidelites	8'4" x 8'0"	+40/-40	No	ETC-01-741-10593.0/L-2173/TTF-254F Standard Aluminum Astragal
O X X O Double w/Sidelites	I/S	Opaque Doors Glazed Sidelites	8'4" x 8'0"	+47/-47	No	ETC-01-741-10593.0/L-2173/TTF-253F Coastal Aluminum Astragal
O X X O Double w/Sidelites	O/S	Opaque Doors Glazed Sidelites	8'4" x 8'0"	+47/-47	No	ETC-01-741-10593.0/L-2173/TTF-254F Coastal Aluminum Astragal

National Accreditation & Management Institute, Inc./4794 George Washington Memorial Highway/Hayes, VA 23072

Tel: (804) 684-5124/Fax: (804) 684-5122

NAMI AUTHORIZED SIGNATURE: \_\_\_\_\_



## NOTICE OF PRODUCT CERTIFICATION

**Company:** Therma-Tru Corporation  
 108 Mutzfeld Road  
 Butler, IN 46721

**Certification No.:** NI005327-R4  
**Certification Date:** 10/15/2003  
**Expiration Date:** 12/31/2015  
**Revision Date:** 01/04/2012

**Product:** FiberClassic/Smooth Star Glazed Fiberglass Inswing/Outswing w/ and w/o Sidelites  
 Benchmark by Therma-Tru Series Glazed Fiberglass Door Inswing/Outswing w/ and w/o Sidelites  
 Specifications Tested To: ASTM E330

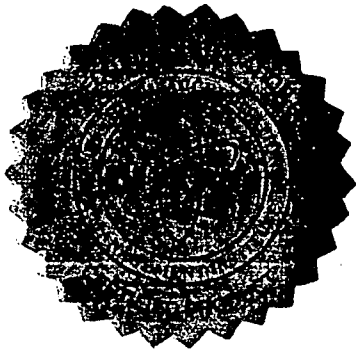
To verify that the "Notice of Product Certification" is valid, please visit [www.NAMICertification.com](http://www.NAMICertification.com) to assure that the product is active and currently listed. This certification represents product conformity to the applicable specification and that certification criteria has been satisfied. Please review and advise NAMI if any corrections are required to this document.

Configuration	Inswing or Outswing	Glazed or Opaque	Maximum Size	Design Pressure Pos/Neg	Missile Impact Rated	Test Report Number & Comments
X Single	I/S	Glazed	3'0" x 8'0"	+47/-47	No	NCTL-210-1940-1.2.3.4/TTF-257F
X Single	O/S	Glazed	3'0" x 8'0"	+47/-47	No	NCTL-210-1940-1.2.3.4/TTF-257F
XX Double	I/S	Glazed	6'0" x 8'0"	+40/-40	No	NCTL-210-1940-1.2.3.4/TTF-257F Standard Aluminum Astragal
XX Double	O/S	Glazed	6'0" x 8'0"	+40/-40	No	NCTL-210-1940-1.2.3.4/TTF-257F Standard Aluminum Astragal
XX Double	I/S	Glazed	6'0" x 8'0"	+47/-47	No	NCTL-210-1940-1.2.3.4/TTF-257F Coastal Aluminum Astragal
XX Double	O/S	Glazed	6'0" x 8'0"	+47/-47	No	NCTL-210-1940-1.2.3.4/TTF-257F Coastal Aluminum Astragal
OXXO Single w/Sidelites	I/S	Glazed Door Glazed Sidelites	5'4" x 8'0"	+40/-40	No	ETC-01-741-10593.0/L-2173/TTF-257F
OXXO Single w/Sidelites	O/S	Glazed Door Glazed Sidelites	5'4" x 8'0"	+40/-40	No	ETC-01-741-10593.0/L-2173/TTF-257F
OXXO Double w/Sidelites	I/S	Glazed Doors Glazed Sidelites	8'4" x 8'0"	+40/-40	No	ETC-01-741-10593.0/L-2173/TTF-257F Standard Aluminum Astragal
OXXO Double w/Sidelites	O/S	Glazed Doors Glazed Sidelites	8'4" x 8'0"	+40/-40	No	ETC-01-741-10593.0/L-2173/TTF-257F Standard Aluminum Astragal
OXXO Double w/Sidelites	I/S	Glazed Doors Glazed Sidelites	8'4" x 8'0"	+47/-47	No	ETC-01-741-10593.0/L-2173/TTF-257F Coastal Aluminum Astragal
OXXO Double w/Sidelites	O/S	Glazed Doors Glazed Sidelites	8'4" x 8'0"	+47/-47	No	ETC-01-741-10593.0/L-2173/TTF-257F Coastal Aluminum Astragal

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Tel: (804) 684-5124/Fax: (804) 684-5122

NAMI AUTHORIZED SIGNATURE: \_\_\_\_\_



## NOTICE OF PRODUCT CERTIFICATION

**Company:** Therma-Tru Corporation  
 108 Mutzfeld Road  
 Butler, IN 46721

**Certification No.:** NI005330-R4  
**Certification Date:** 10/15/2003  
**Expiration Date:** 12/31/2015  
**Revision Date:** 01/04/2012

**Product:** FiberClassic/Smooth Star Glazed Fiberglass Door Inswing/Outswing w/ and w/o Sidelites  
 Benchmark by Therma-Tru Series Glazed Fiberglass Door Inswing/Outswing w/ and w/o Sidelites  
**Specifications Tested To:** ASTM E330/E331/TAS202

To verify that the "Notice of Product Certification" is valid, please visit [www.NAMICertification.com](http://www.NAMICertification.com) to assure that the product is active and currently listed. This certification represents product conformity to the applicable specification and that certification criteria has been satisfied. Please review and advise NAMI if any corrections are required to this document.

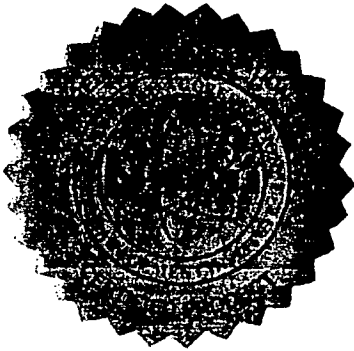
Configuration	Inswing or Outswing	Glazed or Opaque	Maximum Size	Design Pressure Pos/Neg	Missile Impact Rated	Test Report Number & Comments
X Single	I/S	Glazed	3'0" x 6'8"	+47/-47	No	NCTL-210-1940-1.2.3.4/TTF-256F
X Single	O/S	Glazed	3'0" x 6'8"	+47/-47	No	NCTL-210-1940-1.2.3.4/TTF-255F
XX Double	I/S	Glazed	6'0" x 6'8"	+40/-40	No	NCTL-210-1940-1.2.3.4/TTF-256F Standard Aluminum Astragal
XX Double	O/S	Glazed	6'0" x 6'8"	+40/-40	No	NCTL-210-1940-1.2.3.4/TTF-255F Standard Aluminum Astragal
XX Double	I/S	Glazed	6'0" x 6'8"	+47/-47	No	NCTL-210-1940-1.2.3.4/TTF-256F Coastal Aluminum Astragal
XX Double	O/S	Glazed	6'0" x 6'8"	+47/-47	No	NCTL-210-1940-1.2.3.4/TTF-255F Coastal Aluminum Astragal
O XO/O X/X O Single w/Sidelites	I/S	Glazed Door Glazed Sidelites	5'4" x 6'8"	+40/-40	No	ETC-01-741-11008.0/L-2151/TTF-256F
O XO/O X/X O Single w/Sidelites	O/S	Glazed Door Glazed Sidelites	5'4" x 6'8"	+40/-40	No	ETC-01-741-11008.0/L-2151/TTF-255F
O X X O Double w/Sidelites	I/S	Glazed Doors Glazed Sidelites	8'4" x 6'8"	+40/-40	No	ETC-01-741-11008.0/L-2151/TTF-256F Standard Aluminum Astragal
O X X O Double w/Sidelites	O/S	Glazed Doors Glazed Sidelites	8'4" x 6'8"	+40/-40	No	ETC-01-741-11008.0/L-2151/TTF-255F Standard Aluminum Astragal
O X X O Double w/Sidelites	I/S	Glazed Doors Glazed Sidelites	8'4" x 6'8"	+47/-47	No	ETC-01-741-11008.0/L-2151/TTF-256F Coastal Aluminum Astragal
O X X O Double w/Sidelites	O/S	Glazed Doors Glazed Sidelites	8'4" x 6'8"	+47/-47	No	ETC-01-741-11008.0/L-2151/TTF-255F Coastal Aluminum Astragal

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Tel: (804) 684-5124/Fax: (804) 684-5122

NAMI AUTHORIZED SIGNATURE: \_\_\_\_\_





## NOTICE OF PRODUCT CERTIFICATION

**Company:** Therma-Tru Corporation  
 108 Mutzfeld Road  
 Butler, IN 46721

**Certification No.:** NI005331-R4  
**Certification Date:** 10/15/2003  
**Expiration Date:** 12/31/2015  
**Revision Date:** 01/04/2012

**Product:** FiberClassic/Smooth Star Opaque Fiberglass Door Inswing/Outswing w/ and w/o Sidelites  
 Benchmark by Therma-Tru Series Opaque Fiberglass Door Inswing/Outswing w/ and w/o Sidelites  
**Specifications Tested To:** ASTM E330/E331/TAS202

To verify that the "Notice of Product Certification" is valid, please visit [www.NAMICertification.com](http://www.NAMICertification.com) to assure that the product is active and currently listed. This certification represents product conformity to the applicable specification and that certification criteria has been satisfied. Please review and advise NAMI if any corrections are required to this document.

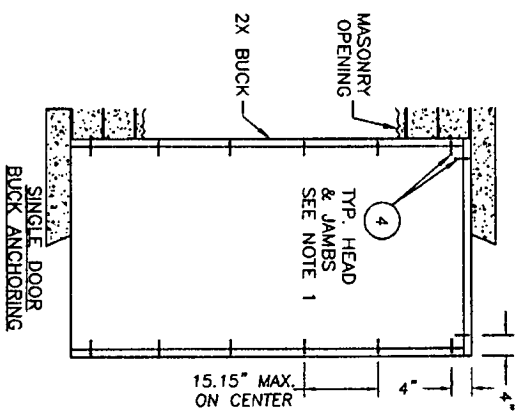
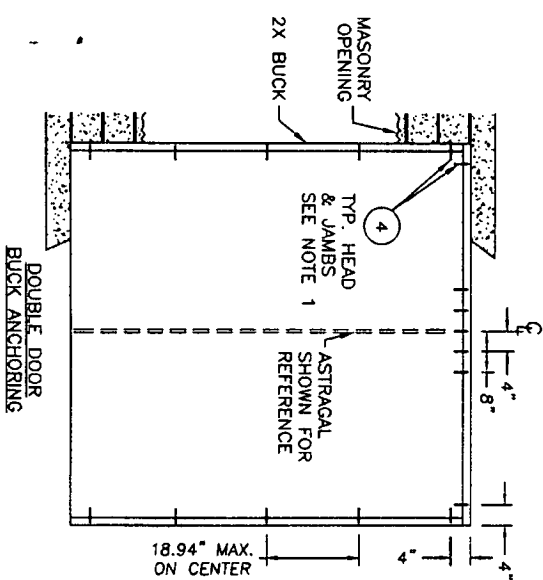
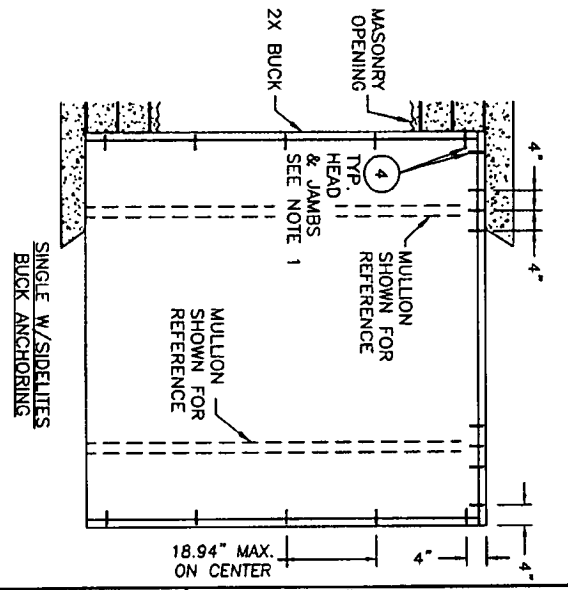
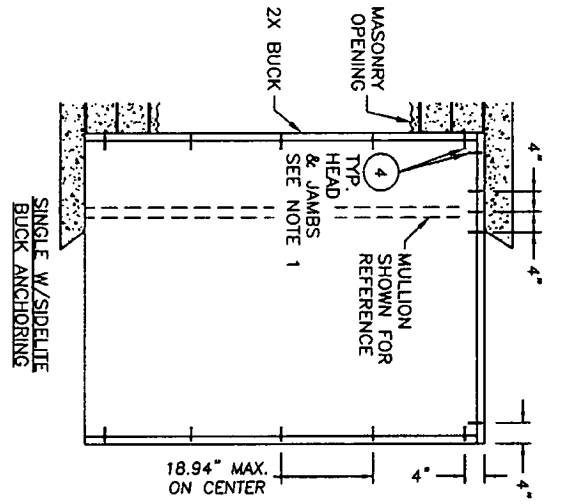
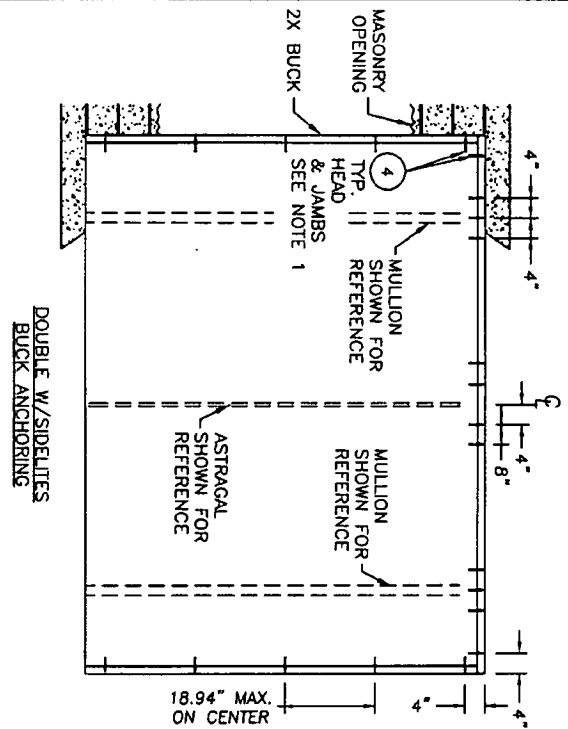
Configuration	Inswing or Outswing	Glazed or Opaque	Maximum Size	Design Pressure Pos/Neg	Missile Impact Rated	Test Report Number & Comments
X Single	I/S	Opaque	3'0" x 6'8"	+67/-67	No	ETC-01-741-10702.0/L-2096/TTF252F
X Single	O/S	Opaque	3'0" x 6'8"	+67/-67	No	ETC-01-741-10702.0/L-2096/TTF251F
XX Double	I/S	Opaque	6'0" x 6'8"	+40/-40	No	ETC-01-741-10702.0/L-2096/TTF252F Standard Aluminum Astragal
XX Double	O/S	Opaque	6'0" x 6'8"	+40/-40	No	ETC-01-741-10702.0/L-2096/TTF251F Standard Aluminum Astragal
XX Double	I/S	Opaque	6'0" x 6'8"	+55/-55	No	ETC-01-741-11008.0/L-2151/TTF252F Coastal Aluminum Astragal
XX Double	O/S	Opaque	6'0" x 6'8"	+55/-55	No	ETC-01-741-11008.0/L-2151/TTF251F Coastal Aluminum Astragal
O XO/O X/X O Single w/Sidelites	I/S	Opaque Door Glazed Sidelites	5'4" x 6'8"	+40/-40	No	ETC-01-741-11008.0/L-2151/TTF-252F
O XO/O X/X O Single w/Sidelites	O/S	Opaque Door Glazed Sidelites	5'4" x 6'8"	+40/-40	No	ETC-01-741-11008.0/L-2151/TTF-251F
O X X O Double w/Sidelites	I/S	Opaque Doors Glazed Sidelites	8'4" x 6'8"	+40/-40	No	ETC-01-741-11008.0/L-2151/TTF-252F Standard Aluminum Astragal
O X X O Double w/Sidelites	O/S	Opaque Doors Glazed Sidelites	8'4" x 6'8"	+40/-40	No	ETC-01-741-11008.0/L-2151/TTF-251F Standard Aluminum Astragal
O X X O Double w/Sidelites	I/S	Opaque Doors Glazed Sidelites	8'4" x 6'8"	+55/-55	No	ETC-01-741-11008.0/L-2151/TTF-252F Coastal Aluminum Astragal
O X X O Double w/Sidelites	O/S	Opaque Doors Glazed Sidelites	8'4" x 6'8"	+55/-55	No	ETC-01-741-11008.0/L-2151/TTF-251F Coastal Aluminum Astragal

National Accreditation & Management Institute, Inc./4794 George Washington Memorial Highway/Hayes, VA 23072

Tel: (804) 684-5124/Fax: (804) 684-5122

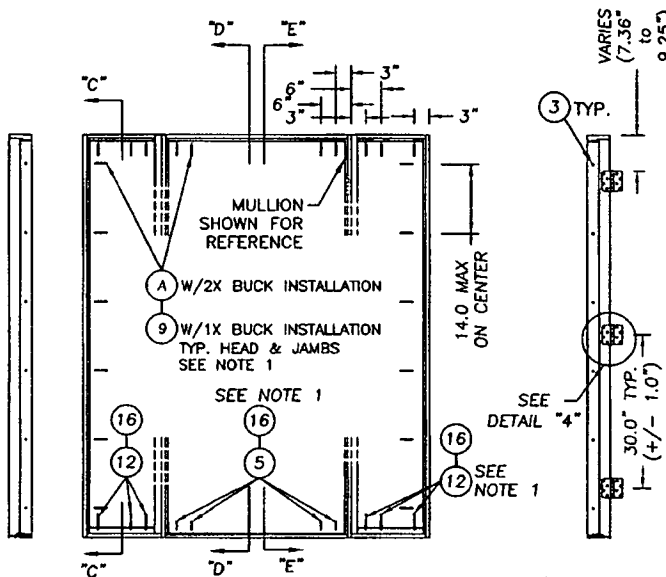
NAMI AUTHORIZED SIGNATURE: \_\_\_\_\_





- NOTES:**
1. 1/4" Eco Concrete screws anchoring 2x buck require a minimum 1" clearance to masonry edges, a 1-1/4" minimum embedment and a minimum 4" clearance to adjacent concrete screws. Substitution of equal concrete screws from a different supplier may have different edge distance and center distance requirements. Concrete screw locations of the corners, of mullion locations, and of astragal locations may be adjusted to maintain the minimum edge distance to mortar joints. If concrete screw locations noted as "MAX. ON CENTER" must be adjusted to maintain the minimum edge distance to mortar joints, additional concrete screws may be required to ensure the maximum on center dimension is not exceeded.
  2. 2X buck min. S.G. ≥ 0.55.

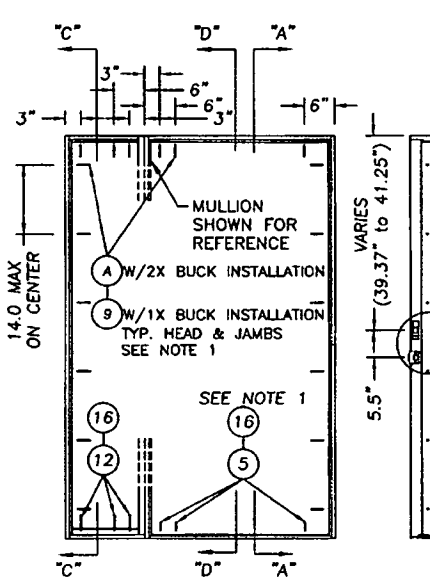
PRODUCT: THERMA-TRU FIBERGLASS DOOR		Documents Prepared By: <i>RW</i> BUILDING CONSULTANTS, INC. P.O. Box 230 Volusia FL 33595 Phone No.: 813.659.9197 Florida Board of Professional Engineers Certificate of Authorization No. 9813 LFS 2.21.12 Lyndon F. Schmidt, P.E. No. 43409
PART OR ASSEMBLY: BUCK ANCHORING		
NO. DATE	REVISIONS	BY
DATE: 2/21/12	SCALE: N.T.S.	DWG. BY: JK
CHK. BY: LFS	DRAWING NO.: FL-15225.3-68	SHEET 2 of 6



SINGLE DOOR W/SIDELITES

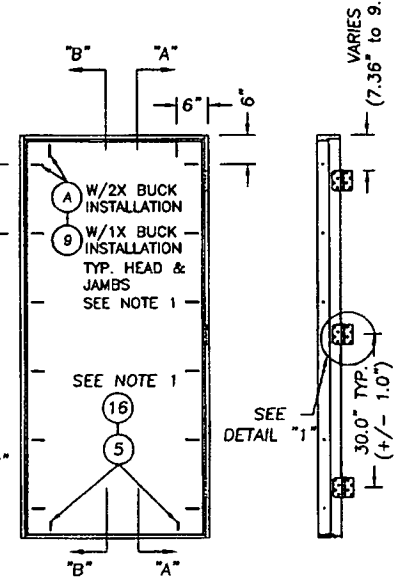
VIEW "E"- "E"

VIEW "D"- "D"



SINGLE DOOR W/SIDELITE

VIEW "B"- "B"



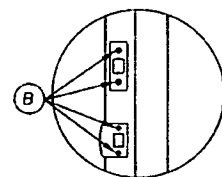
SINGLE DOOR

VIEW "A"- "A"

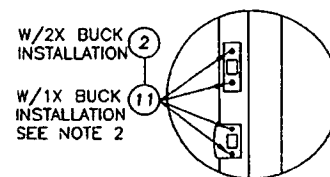
SHOWN W/ OPTIONAL CORRUGATED FASTENERS, ITEM #30 (TYP. ALL SIDELITE TO DOOR JAMB CONNECTIONS)

NOTES:

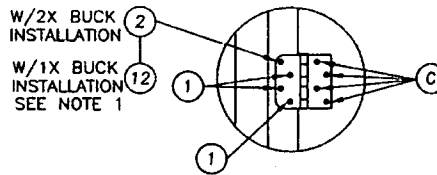
- 1/4" ITW concrete screws anchoring frame and/or sill require a minimum 2-1/2" clearance to masonry edges, a 1-1/4" minimum embedment and a minimum 3" clearance to adjacent concrete screws. Substitution of equal concrete screws from a different supplier may have different edge distance and center distance requirements. Concrete screw locations at the corners, and at mullion locations, may be adjusted to maintain the minimum edge distance to mortar joints. If concrete screw locations noted as "MAX. ON CENTER" must be adjusted to maintain the minimum edge distance to mortar joints, additional concrete screws may be required to ensure the maximum on center dimension is not exceeded.
- 3/16" ITW concrete screws anchoring frame and/or sill require a minimum 2-5/8" clearance to masonry edges, a 1-1/4" minimum embedment and a minimum 2-1/4" clearance to adjacent concrete screws unless otherwise noted by concrete screw manufacturer.
- The sidelite is direct set into the jamb with (4) #8 x 2" p/h. wood screws. There are (4) at each vertical jamb, from the top down at 13.5", 31", 48.5" & 66". There are (2) at the header at 4" from the outside corners. There are (2) at the sill, 4" from the outside corners.
- For optional sidelite construction with staples, sidelite is direct set into the jamb with (4) 7/16" X 1-3/4" 16 ga. staples along each jamb (6" from ends and equally spaced thereafter).



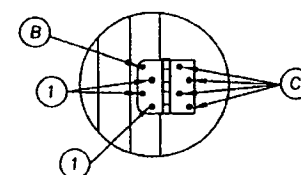
DETAIL "6"



DETAIL "2"



DETAIL "1"



DETAIL "4"

Documents Prepared By: **R.W. BUILDING CONSULTANTS, INC.**  
P.O. Box 230 Vero Beach, FL 33595  
Phone No.: 813.659.9197  
Florida Board of Professional Engineers  
Certificate of Authorization No. 9813  
Lynden F. Schmidt, P.E. No. 43408

2-21-12

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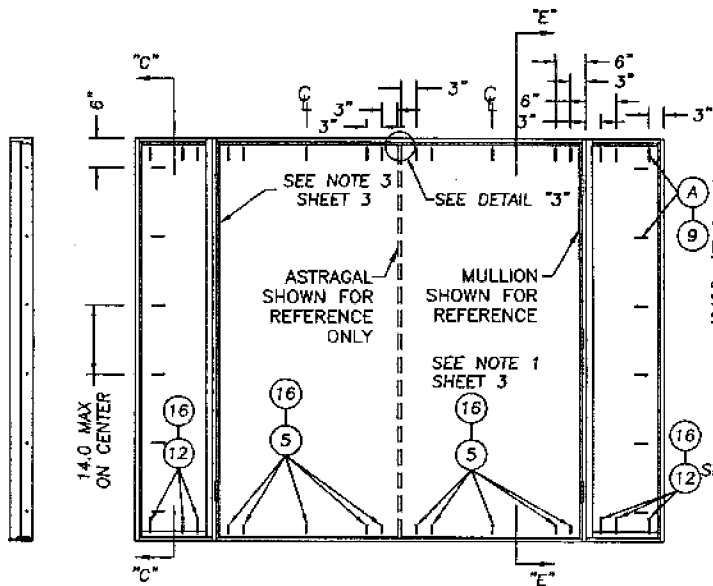
PRODUCT: THERMA-TRU FIBERGLASS DOOR  
PART OR ASSEMBLY: FRAME ANCHORING

NO.	DATE	REVISIONS	BY

DATE: 2/21/12  
SCALE: N.T.S.  
DWG. BY: JK  
CHK. BY: LFS  
DRAWING NO.: FL-15225.3-68  
SHEET 3 OF 6

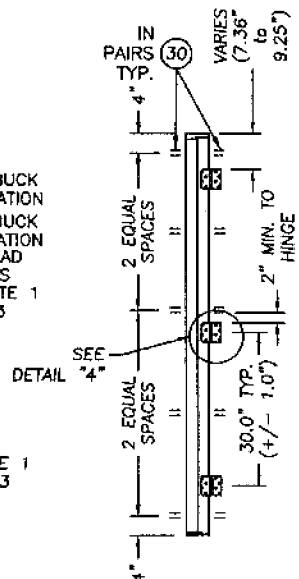
R.A. - Project\Project Folders\Proj 1201-1300\p1208\DWG. RWBC Drawings\15225\FL-15225.3.dwg. 3

© 2012 R.W. BUILDING CONSULTANTS INC.



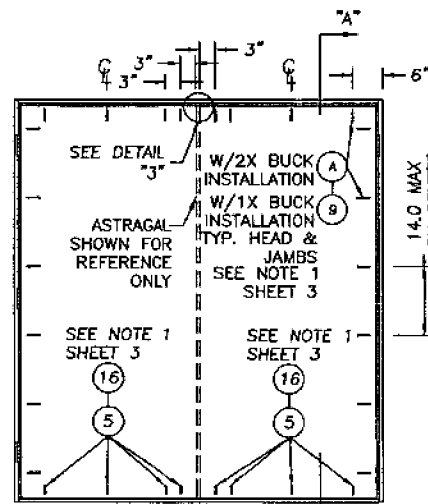
VIEW "C"- "C"

DOUBLE DOOR W/SIDELITES

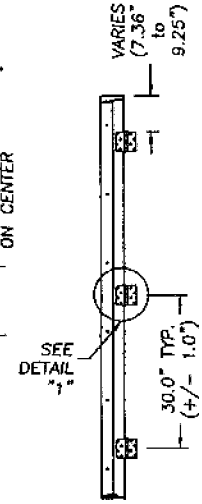


VIEW "E"- "E"

SHOWN W/ OPTIONAL CORRUGATED FASTENERS, ITEM #30 (TYP. ALL SIDELITE TO DOOR JAMB CONNECTIONS)

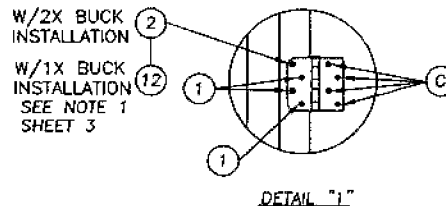


DOUBLE DOOR



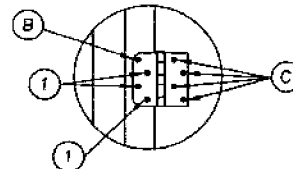
VIEW "A'-" "A'"

Item	DESCRIPTION	Material
A	#10 x 2-1/2" PFH WOOD SCREW	STEEL
B	#10 X 1-3/4" PFH WOOD SCREW	STEEL
C	#10 X 1" PFH WOOD SCREW	STEEL
1	#10 x 3/4" LG. PFH WOOD SCREW (Hinge to Frame)	STEEL
2	#10 x 2" LG. PFH WOOD SCREW	STEEL
3	#8 x 2-1/2" LG. PFH WOOD SCREW	STEEL
4	1/4" x 2-3/4" PFH ELCD CONCRETE SCREW	STEEL
5	1/4" x 1-3/4" ITW PFH CONCRETE SCREW	STEEL
9	1/4" x 3-3/4" ITW PFH CONCRETE SCREW	STEEL
11	3/16" x 3-1/4" ITW PFH CONCRETE SCREW	STEEL
12	1/4" x 3-1/4" ITW PFH CONCRETE SCREW	STEEL
13	MASONRY - 3,192 PSI MIN. CONCRETE CONFORMING TO ACI 301 OR HOLLOW BLOCK CONFORMING TO ASTM C90	CONCRETE
16	1/4" X 2-1/4" PFH ITW CONCRETE SCREW	STEEL
20	HEADER JAMB (4.656" X 1.25" THERMA-TRU, SUGAR PINE) SG >= 0.34	WOOD
21	3/4" THK. PRESSURE TREATED SIDELITE PAD	WOOD
30	1/2" X 1" X 25 GA. CORRUGATED FASTENER	STEEL

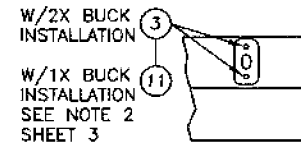


DETAIL "1"

W/1X BUCK INSTALLATION SEE NOTE 1 SHEET 3



DETAIL "4"



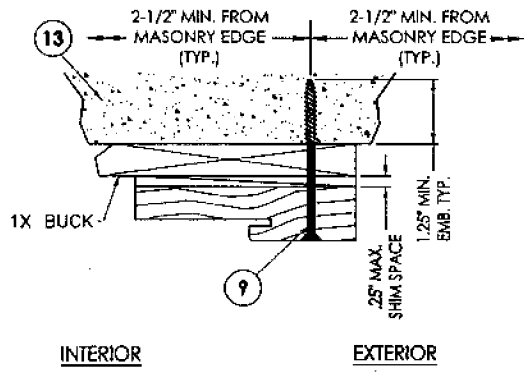
DETAIL "3"  
ATTACH ASTRAGAL THROW BOLT STRIKE PLATE TO FRAME AS SHOWN.

Documents Prepared By:  
**RW** BUILDING CONSULTANTS, INC.  
 P.O. Box 230 Venice FL 33595  
 Phone No.: 813.659.9197  
 Florida Board of Professional Engineers  
 Certificate of Authorization No. 9813  
 LYNDA F. SCHMIDT, P.E. No. 43469

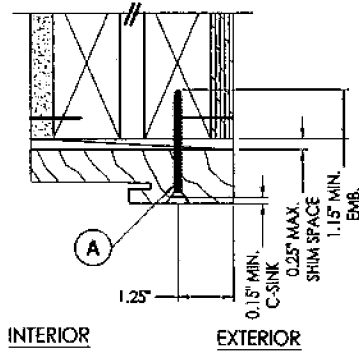
PRODUCT: THERMA-TRU FIBERGLASS DOOR  
 PART OR ASSEMBLY: FRAME ANCHORING & BILL OF MATERIALS

NO.	DATE	BY	REVISIONS

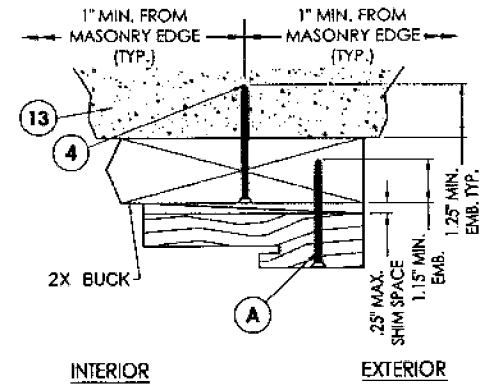
DATE: 2/21/12  
 SCALE: N.T.S.  
 DWG. BY: JK  
 CHK. BY: LFS  
 DRAWING NO.: FL-15225.3-68  
 SHEET 4 OF 6



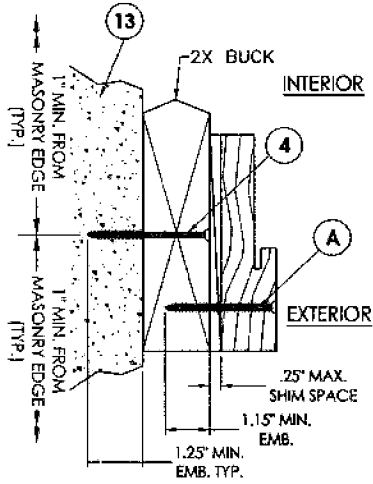
**1 HEAD JAMB**  
**5** To 1x sub-buck  
 Inswing shown



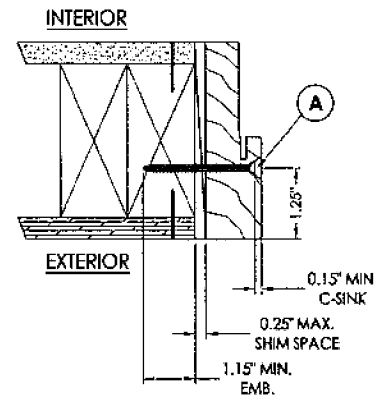
**2 HEAD JAMB**  
**5** To wood frame  
 Inswing shown



**3 HEAD JAMB**  
**5** To 2x sub-buck  
 Inswing shown



**4 VERTICAL SIDE JAMB**  
**5** To 2x sub-buck  
 Inswing shown



**5 VERTICAL SIDE JAMB**  
**5** To wood frame  
 Inswing shown

Documents Prepared By:  
**R.W.** BUILDING CONSULTANTS, INC.  
 P.O. Box 230 Valrico FL 33593  
 Phone No.: 813.859.6187  
 Florida Board of Professional Engineers  
 Certificate of Authorization No. 9813  
 Lynden F. Schmidt, P.E. No. 43409

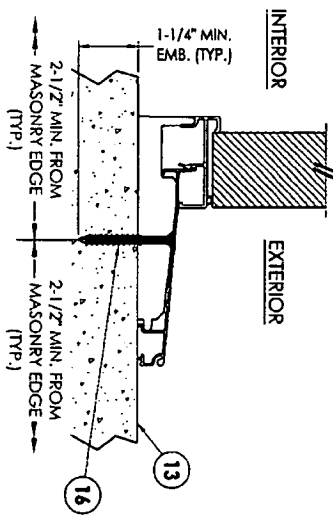
PRODUCT: THERMA-TRU FIBERGLASS DOOR  
 PART OR ASSEMBLY: HORIZONTAL & VERTICAL CROSS SECTIONS

NO.	DATE	BY

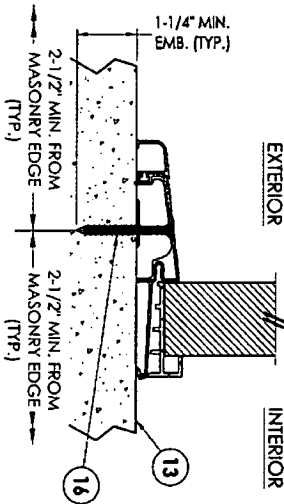
DATE: 2/21/12  
 SCALE: N.T.S.  
 DWG. BY: JK  
 CHK. BY: LFS  
 DRAWING NO.: FL-15225.3-68  
 SHEET 5 of 6

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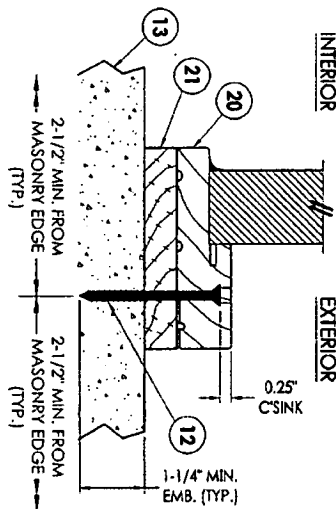
FL-15225.3.dwg, 3



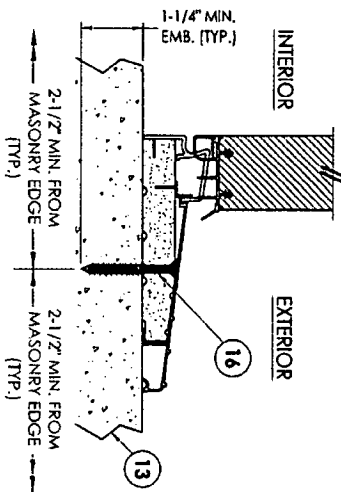
1 VERTICAL CROSS SECTION  
6 Inswing configuration



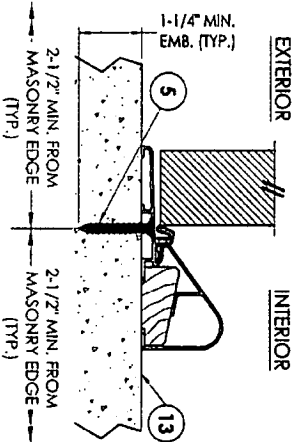
2 VERTICAL CROSS SECTION  
6 Outswing configuration



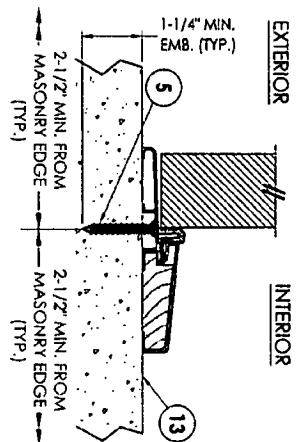
3 VERTICAL CROSS SECTION  
6 Inswing configuration



4 VERTICAL CROSS SECTION  
6 Inswing configuration



5 VERTICAL CROSS SECTION  
6 Outswing configuration

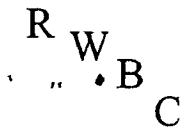


6 VERTICAL CROSS SECTION  
6 Outswing configuration

DATE	2/21/12	
SCALE	N.T.S.	
DRW. BY	JK	
CHK. BY	LFS	
DESIGNING NO.	FL-15225.3-68	
SHEET	6 of 6	
NO.	DATE	REVISIONS

PRODUCT:	THERMA-TRU FIBERGLASS DOOR
PART OR ASSEMBLY:	VERTICAL CROSS SECTIONS

Documents Prepared By:  
*Rw* BUILDING CONSULTANTS, INC.  
 P.O. Box 230 Valrico FL 33595  
 Phone No.: 813.659.9197  
 Florida Board of Professional Engineers  
 Certificate of Authorization No. 8813  
*LFS 2-21-12*  
 Lyndon F. Schmidt, P.E. No. 43409



# R W Building Consultants, Inc.

Consulting and Engineering Services for the Building Industry

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

Florida Board of Professional Engineers Certificate of Authorization No. 9813

## Anchor Evaluation Report Report No.: FL-15225.3-68 Date: February 20, 2012

Product Category	Sub Category	Manufacturer	Product Name
Exterior Doors	Swinging Exterior Door Assemblies	Therma Tru Corporation 118 Industrial Dr Edgerton, OH 43517 Phone 419.298.1740	"Fiber Classic" and "Benchmark by Therma-Tru" 6'8 Single & Double Opaque or Glazed Panels w/ & w/o Sidelites Inswing / Outswing Insulated Fiberglass Door with Wood Frames

**Scope:** Product Evaluation report issued by R W Building Consultants, Inc. & Lyndon F. Schmidt, P.E. (System ID # 1998) for Therma Tru Corporation, based on Rule Chapter No. 9N-3, Method 1A of the State of Florida Product Approval, Dept. of Business & Professional Regulation.

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

### Limitations:

1. This product anchoring has been developed in compliance with the 2010 Florida Building Code (FBC) structural requirements excluding the "High Velocity Hurricane Zone". See the Certification Agency Certificate for sizes, specifications and design pressure ratings.
2. Product anchors shall be as listed and spaced as shown on details. Anchor embedment to base material shall be beyond wall dressing or stucco.
3. Wood screws shall be installed following installations instructions of ANSI AF&PA NDS 2005. All other fastener types to be installed following fastener manufacture's installation instructions.
4. Fastener embedment depths, edge distance and center-center distances shall be specified by the fastener manufacture, but in no instance shall they be less than shown in drawing FL-15225.3-68.
5. Where shims are used, they must be a "rigid / stiff" material that complies with the requirements of the FBC.
6. Positive and negative design pressure requirements for use with drawing FL-15225.3-68 shall be determined by others for specific jobs in accordance with the governing code.
7. Site conditions that deviate from the details of drawing FL-15225.3-68 require further engineering analysis by a licensed engineer or registered architect.

### Supporting Documents:

1. <u>Test Report No.</u> ETC-01-741-10702.0 ETC-01-741-11008.0 NCTL 210-1940-1,2,3,4 TEL 01460147	<u>Test Standard</u> ASTM E330-02 ASTM E330-02 ASTM E330-02 ASTM E330-02	<u>Testing Laboratory</u> ETC Laboratories ETC Laboratories NCTL Testing Evaluation Lab.	<u>Signed by</u> Wendell W. Haney, P.E. Joseph L. Dolden, P.E. Barry Portnoy, P.E. Lyndon F. Schmidt, P.E.
2. <u>Drawing No.</u> No. FL-15225.3-68	<u>Prepared by</u> RW Building Consultants, Inc. (CA #9813)		<u>Signed &amp; Sealed by</u> Lyndon F. Schmidt, P.E.
3. <u>Calculations</u> Product Anchoring Buck Anchoring	<u>Prepared by</u> RW Building Consultants, Inc. (CA #9813) RW Building Consultants, Inc. (CA #9813)		<u>Signed &amp; Sealed by</u> Lyndon F. Schmidt, P.E. Lyndon F. Schmidt, P.E.

Lyndon F. Schmidt, P.E.  
FL PE No. 43409  
2/20/2012



[Back to Quote](#)

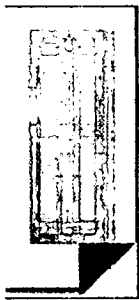


Date: 08/12/2014

LOWE'S HOME CENTERS, LLC #1109  
3620 SOUTHEAST FEDERAL HIGHWAY  
STUART, FL 34997-4920  
USA  
(772) 283-4229



Project #: 418273727 Description: 36" entrance door unit  
Customer Name: ROBERT CHAPMAN  
Customer Phone: (772) 267-5206  
Customer Address: 11 PALM RD  
SEWALL'S POINT,  
FL 34996  
USA

Line Item	Product Code	Unit Price	Quantity	Total Price
Frame Size	Description			
0001	<b>Manufacturer:</b> Therma-Tru Benchmark Doors			
RO Size = 38 1/4" W x 82" H FS Size = 37 1/2" W x 81 1/2" H	Product Type: Pre-Hung Doors Product Line: Fiberglass Product Style: Smooth Fiberglass Collection Product : Pre-colored Smooth Surface Product Configuration: Single Door Unit Handing: Left Inswing Glass Collection: DunThorpe - Paçina Caming Door Style: Full Lite Nominal Width: 36" Nominal Height: 80" Frame Width: 37 1/2" Frame Height: 81 1/2" Rough Opening Width: 38 1/4" Rough Opening Height: 82" Exterior Finish: TT Black Interior Finish: TT White Jamb Width: 4 9/16" Jamb Finish: Primed Rot-Resistant Threshold: Bronze Finish w/ Adjustable Cap Hinge Finish: Matte Black 3-Point Locking System - Active: No Bore: Double Bore Lock Prep Backset: 2 3/8" Deadbolt Prep Diameter: 2 1/8" Matching Brickmould: No Brickmould Lead Time: 21 Days Handle Set Not Included Bores are measured from the top of the slab to the center of the bore.			
				
		\$873.77	1	\$873.77

\*\*\*\*15% off Promo from 08/06/14 - 08/19/14\*\*\*\*

**Project Total:** \$873.77

**Salesperson:** BRANKO GRGEK (S1109BG3)

**Accepted by:** \_\_\_\_\_

Date: 08/12/2014

[Print this Page](#)

This Millwork Quote is valid until 8/18/2014. This is an estimate only. This estimate does not include tax or delivery charges. Delivery of all materials contained in this estimate are subject to availability from the manufacturer or supplier. All the above quantities, dimensions, specifications and accessories have been verified and accepted.

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

Mon

Tue

Wed

Thur

Fri

9-22-14

Page 2 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
11662	Chapman	Window + Slider		
	<del>11662</del> Haddam LLC	screw inspection	<del>Pass</del>	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10877	Ponn High Pt. LLC	Final Wet		
	49 W High Point Van Kirk + Sons	Niche	Pass	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
Tree	Combs	Tree		
	140 SSPR Eco tec Landscaping	Removal	PENDING	INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

# TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection  Mon  Tue  Wed  Thur  Fri 4/16/15 Page 1 of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11191	Whalen 9 Knowles Road The Z Group	Window Buck, Rough, Framing, Plumbing + Electric	PASS Fair	
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11238	Rao 16 Rio Vista Drive Treasure Coast Roofing	Roof Pry-in + Metal	NOT READY	
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
10973	Conch Property Holdings 19 Lantana Lane Conch Property Holdings	Rough Electrical	PASS	
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
<del>11002</del>	Chapman <del>1 Palm Road</del> Karam Haddad	Window/Door Final	<del>PASS</del>	<del>INSPECTOR</del> <del>COMMENTS</del>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
				INSPECTOR

**11025**  
**BRICK PAVERS**



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

## BUILDING PERMIT CARD

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

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	11025	DATE ISSUED:	September 25, 2014
SCOPE OF WORK:	Brick Paver Driveway, Walkway, Entry, Sidewalk, Patio & Pool Deck		
CONTRACTOR:	Apex Pavers		
PARCEL CONTROL NUMBER:	13-38-41-005-000-00110-9	SUBDIVISION:	Palm Row R&A Lot 11
CONSTRUCTION ADDRESS:	11 Palm Road		
OWNER NAME:	Chapman		
QUALIFIER:	Ryan Figman	CONTACT PHONE NUMBER:	419-5151

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

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

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

**INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY**

### INSPECTIONS

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

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



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

### BUILDING PERMIT RECEIPT

<b>PERMIT NUMBER:</b>	11025		
<b>ADDRESS:</b>	11 Palm Road		
<b>DATE ISSUED:</b>	9/25/2014	<b>SCOPE OF WORK:</b>	Brick Paver Driveway, Walkway, Entry, Sidewalk, Patio & Pool Deck

<b>SINGLE FAMILY OR ADDITION /REMODEL</b>	Declared Value	\$	
---	----------------	----	--

Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned spa @ \$ 121.75 per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel: @ \$ 59.81 per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: \$ 90.78 per sq. ft. s.f.		\$	-
Total Construction Value:		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Building fee: (1% of construction value < \$200K + \$100 per insp.)		\$	-
Total number of inspections (Value < \$200K) \$ 100.00 per insp. # insp			n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)			n/a
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		\$	\$ -

<b>ACCESSORY PERMIT</b>	Declared Value:	\$	\$ 26,590.00
Total number of inspections: @ \$ 100.00 per insp. # insp		\$ 1.00	\$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	10.64
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	114.64

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

Date: 8-19-14

Permit Number: 11025

OWNER/LESSEE NAME: Robert Chapman Phone (Day) 267-5206 (Fax) \_\_\_\_\_

Job Site Address: 11 Palm Rd Sewalls Pt City: \_\_\_\_\_ State: FL Zip: 34996

Legal Description: Palm Row Revised & Expanded Lot 11 Parcel Control Number: 133841005000001109

Fee Simple Holder Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**\*SCOPE OF WORK (PLEASE BE SPECIFIC):**

Brick paver driveway, walkway, Entry, sidewalk, Patio & pool deck

**WILL OWNER BE THE CONTRACTOR?**

(If yes, Owner Builder questionnaire must accompany application)  
YES \_\_\_\_\_ NO X

**Has a Zoning Variance ever been granted on this property?**

YES \_\_\_\_\_ (YEAR) \_\_\_\_\_ NO X  
(Must include a copy of all variance approvals with application)

**COST AND VALUES: (Required on ALL permit applications)**

Estimated Value of Improvements: \$ 26,590

(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC charge out)

Is subject property located in flood hazard area? VE10 \_\_\_\_\_ AE9 \_\_\_\_\_ AE8 \_\_\_\_\_ X \_\_\_\_\_  
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**

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

(Fair Market Value of the Primary Structure only. Minus the land value)  
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Apex Powers Phone: 772-419-5151 Fax: 772-419-5101

Qualifiers name: Ryan Figmar Street: 834 SE Lincoln Ave City: Stuart State: FL Zip: 34994

State License Number: \_\_\_\_\_ OR: Municipality: Martin County License Number: MCPB4701

LOCAL CONTACT: Doreen Buffa Phone Number: 772-419-5151

DESIGN PROFESSIONAL: \_\_\_\_\_ Fla. License# \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

AREAS SQUARE FOOTAGE: Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios/Porches: 2899 Enclosed Storage: \_\_\_\_\_

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

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010  
National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

**WARNINGS TO OWNERS AND CONTRACTORS:**

1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

SEP 23 2014  
 Sewall's Point Town Hall

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

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

**OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:**

[Signature]  
State of Florida, County of: Martin  
On This the 19 day of August, 2014  
by Robert Chapman who is personally  
known to me or produced FL DL C155 718 66 1090  
As identification. Doreen Buffa

Notary Public

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

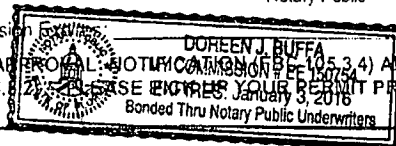
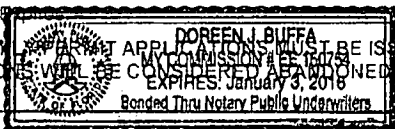
**CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:**

[Signature]  
State of Florida, County of: Martin  
On This the 19 day of August, 2014  
by Ryan Figmar who is personally  
known to me or produced \_\_\_\_\_  
As identification. Doreen Buffa

Notary Public

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

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL. NOTIFICATION BE 105.3.4) AND OTHER APPLICATIONS MUST BE CONSIDERED REJECTED AFTER 180 DAYS (FBC 105.3.4) PLEASE EXPIRES YOUR PERMIT PROMPTLY!







# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/27/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


<b>PRODUCER</b> Insurance By Ken Brown, Inc. PO Box 948117 Maitland, FL 32794-8117 Kerry C. Tait	<b>CONTACT NAME:</b> Kerry C. Tait <b>PHONE (A/C, No., Ext):</b> 321-397-3870 <b>E-MAIL ADDRESS:</b> ktait@insbykenbrown.com	<b>FAX (A/C, No):</b> 321-397-3888													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Amerisure Mutual Ins. Co</td> <td>23396</td> </tr> <tr> <td>INSURER B : Amerisure Ins Company</td> <td>19488</td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Amerisure Mutual Ins. Co	23396	INSURER B : Amerisure Ins Company	19488	INSURER C :		INSURER D :		INSURER E :		INSURER F :
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INSURER E :															
INSURER F :															
<b>INSURED</b> Apex Pavers, Inc. 834 SE Lincoln Ave. Stuart, FL 34994															

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL/SUBR (NSD, WVD)	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:		GL20775280202	07/01/2014	07/01/2015	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 \$
B	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		CA20775270201	07/01/2014	07/01/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	WC2088501000	07/01/2014	07/01/2015	<input checked="" type="checkbox"/> PER STATUTE <input checked="" type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>  <b>SEWALLS</b>  City of Sewalls Point 1 South Sewalls Point Rd. Sewalls Point, FL 34996	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
--	--



## Martin County Building Department

900 SE Ruhnke Street  
Stuart, FL 34994  
(772) 288-5482  
Fax (772) 419-6935

FIGMAN, RYAN P  
APEX PAVERS INC  
834 LINCOLN AVE  
STUART, FL 34994

### NOTICE TO ALL CONTRACTORS

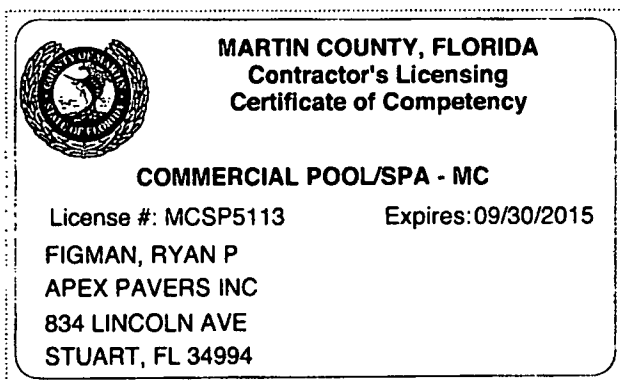
**PLEASE BE ADVISED THAT MARTIN COUNTY, FLORIDA SECTION 43.42 REQUIRES COMPLIANCE WITH THE FOLLOWING EXERPT FROM THE GENERAL ORDINANCES OF THE MARTIN COUNTY CODE:**

#### PROHIBITED ACTIVITIES:

43.42 R Advertising contracting work in any advertisement to the public in a newspaper or telephone directory without including in the advertisement the number of the contractor license issued to the person or business being advertised.

43.42 S Operating any commercial vehicle in the course of conducting the practice of contracting that fails to display the contractor license number of the contractor.

If you have any questions relating to the information in this letter , please contact the Martin County Contractor's Licensing Division of the Martin County Building Department.



2013-2014

MARTIN COUNTY ORIGINAL  
BUSINESS TAX RECEIPT

ACCOUNT 2006-520-1455 CERT CPB4701 MARTIN  
PHONE (772) 419-5151 SIGN 235710

HONORABLE RUTH PIETRUSZEWSKI CFC TAX COLLECTOR  
3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994  
(772) 288-5604

LOCATION 834 LINCOLN AVE STU

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR.	00	LIC. FEE	26.25
	00	PENALTY	00
	00	COL. FEE	00
	00	TRANSFER	00
TOTAL	26.25		

FIGMAN, RYAN  
APEX PAVERS, INC.  
834 LINCOLN AVENUE  
STUART, FL 34994

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS PROFESSION OR OCCUPATION OF

CONCRETE PAVER CONTRACTOR

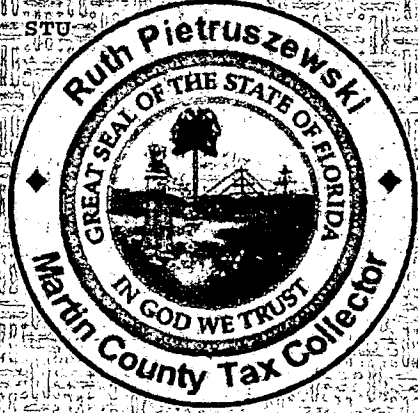
AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

06 DAY OF AUGUST 2013

AND ENDING SEPTEMBER 30,

2014

201 2012 06056.0001 PAID



THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE

ANYONE DOING BUSINESS WITHOUT A VALID BUSINESS TAX RECEIPT IS SUBJECT TO A \$250 FINE IF NOT PAID BY OCT. 1. A DELINQUENT PENALTY OF 10% FOR THE MONTH OF OCTOBER PLUS A 5% PENALTY FOR EACH MONTH THEREAFTER UP TO 25% PLUS COLLECTION COSTS WILL APPLY.

NOTE: A PENALTY IS IMPOSED FOR FAILURE TO KEEP THIS BUSINESS TAX RECEIPT EXHIBITED CONSPICUOUSLY AT YOUR ESTABLISHMENT OR PLACE OF BUSINESS.



## Martin County Building Department

900 SE Ruhnke Street  
Stuart, FL 34994  
(772) 288-5482  
Fax (772) 419-6935

FIGMAN, RYAN P  
APEX PAVERS INC  
834 LINCOLN AVE  
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**MARTIN COUNTY, FLORIDA  
Contractor's Licensing  
Certificate of Competency**

**PAVER BLOCK - MC**

License #: MCPB4701 Expires: 09/30/2015

FIGMAN, RYAN P  
APEX PAVERS INC  
834 LINCOLN AVE  
STUART, FL 34994



**CITY OF STUART**  
**LOCAL BUSINESS TAX RECEIPT**  
 2013-2014

RECEIPT NO.	ACCOUNT NO.	CATEGORY NO.
10356	23110	170580

TAX YEAR BEGINS OCTOBER 1 AND ENDS SEPTEMBER 30.  
 PAYMENT OCTOBER 1 CONSTITUTES VIOLATION  
 OF CITY CODE OF ORDINANCES

BUSINESS TYPE	CONTRACTOR - POOL
OWNER AND LOCATION	FIGMAN, RYAN 834 SE LINCOLN AVE
ST/CITY LICENSE	CPB4701
DESCRIPT	

This local business tax receipt does not permit the holder to operate in violation of any City law, ordinance, or regulation. Any changes in location or ownership must be approved by the City License Section, subject to zoning restrictions. This receipt does not constitute an endorsement, approval, or disapproval of the holder's skill or competence or of the compliance or non-compliance of the holder with other laws, regulations, or standards.

Local Business Taxing Questions 772-288-5319

FEE	PENALTY	TRANSFER	MISCELLANEOUS	PAID
100.00	0.00	0.00	0.00	100.00

BUSINESS NAME AND MAILING ADDRESS	APEX PAVERS, INC FIGMAN, RYAN 834 LINCOLN AVE STUART FL 34996
-----------------------------------	--

DATE
07/22/2013

**CHERYL WHITE**  
 CITY CLERK

**KEEP THIS RECEIPT - NO TRANSFER WITHOUT ORIGINAL RECEIPT**



**CITY OF STUART**  
**LOCAL BUSINESS TAX RECEIPT**  
 2013-2014

RECEIPT NO.	ACCOUNT NO.	CATEGORY NO.
6658	23110	170880

BUSINESS TYPE	CONTRACTOR - PAVING
OWNER AND LOCATION	FIGMAN, RYAN 834 SE LINCOLN AVE
ST/CTY. LICENSE	CPB4701
DESCRIPT	

TAX YEAR BEGINS OCTOBER 1 AND ENDS SEPTEMBER 30.  
 PAYMENT OCTOBER 1 CONSTITUTES VIOLATION  
 OF CITY CODE OF ORDINANCES

This local business tax receipt does not permit the holder to operate in violation of any City law, ordinance, or regulation. Any changes in location or ownership must be approved by the City License Section, subject to zoning restrictions. This receipt does not constitute an endorsement, approval, or disapproval of the holder's skill or competence or of the compliance or non-compliance of the holder with other laws, regulations, or standards.

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FEE	PENALTY	TRANSFER	MISCELLANEOUS	PAID
100.00	0.00	0.00	0.00	100.00

BUSINESS NAME AND MAILING ADDRESS	APEX PAVERS, INC FIGMAN, RYAN 834 LINCOLN AVE STUART FL 34996
-----------------------------------	--

DATE  
07/22/2013

CHERYL WHITE  
CITY CLERK

**KEEP THIS RECEIPT - NO TRANSFER WITHOUT ORIGINAL RECEIPT**

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

*generated on 9/25/2014 2:49:16 PM EDT*

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
13-38-41-005-000-00110-9	27818	11 PALM RD, SEWALL'S POINT	\$362,110	9/20/2014

Owner Information	
Owner(Current)	CHAPMAN ROBERT T
Owner/Mail Address	11 PALM RD STUART FL 34996
Sale Date	12/30/2013
Document Book/Page	<u>2695 1395</u>
Document No.	2433428
Sale Price	448000

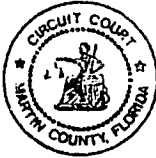
Location/Description			
Account #	27818	Map Page No.	SP-05
Tax District	2200	Legal Description	PALM ROW REVISED & AMENDED LOT 11
Parcel Address	11 PALM RD, SEWALL'S POINT		
Acres	.3460		

Parcel Type	
Use Code	0100 Single Family
Neighborhood	120200 Heritage P, Palmtto Pk,Rdglnd,

Assessment Information	
Market Land Value	\$195,000
Market Improvement Value	\$167,110
Market Total Value	\$362,110

STATE OF FLORIDA  
MARTIN COUNTY

THIS IS TO CERTIFY THAT THE  
FOREGOING 1 PAGE(S) IS A TRUE  
AND CORRECT COPY OF THE ORIGINAL  
DOCUMENT AS FILED IN THIS OFFICE



CAROLYN TIMMANN, CLERK

2  
**RIGHT OF WAY DRIVEWAY COVENANT  
FOR MATERIAL OTHER THAN BROOM FINISHED CONCRETE OR ASPHALT**

BY: [Signature] D.C.  
DATE: 9-18-14

STATE OF FLORIDA COUNTY OF MARTIN PERMIT NUMBER \_\_\_\_\_

THIS COVENANT, made by Robert Chapman and legal owners (hereinafter "The Owners") of the property described as: Lot 11, Block \_\_\_\_\_, according to the Plat of Palm ROW, as recorded in Plat Book 4, Page 68, of the Public Records of Martin County, Florida, also known as 11 Palm Rd Sewalls Pt. FL  
(Street address)

WHEREAS, the Owners have applied for a permit to construct a driveway of Brick Pavers construction, a portion of which will be constructed in the Town right-of-way, and such construction will not be of asphalt or regular broom finish concrete, typical for driveways in right-of-way, and such construction will not be of asphalt or regular broom finish concrete, typical for driveways in right-of-way authorized by the Town of Sewall's Point or of driveway materials which the Town constructs, repairs, or replaces when it performs activities in its rights-of ways; and

WHEREAS, the Owners desire to construct the driveway and wish to recognize that the Town of Sewall's Point shall have no responsibility to replace the driveway if it performs any activity on the right-of-way.

NOW THEREFORE, in return for the benefits that will accrue from the construction of their driveway, and in accordance with the criteria for permits for constructing driveways other than those types aforementioned through Land Covenant right-of-way, The Owners of the above described property hereby agree and covenant that the Town of Sewall's Point shall not bear any responsibility for replacement of such driveway located within the right-of-way on this said property, should the need arise.

The Owners agree and covenant that the cost of replacement of the driveway, if required, will be borne by the Owners, their heirs, assigns and successors. This Covenant shall run with the land.

[Signature]  
OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 18 DAY OF August 2014

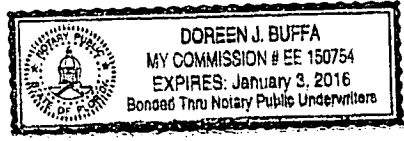
BY Robert Chapman

PERSONALLY KNOWN \_\_\_\_\_ OR PRODUCED ID

TYPE OF ID FL DL C155778661090

[Signature]  
NOTARY SIGNATURE

THIS COVENANT MUST BE RECORDED AT THE CLERK'S OFFICE AND THE RECORDED COPY SUBMITTED TO THE BUILDING DEPARTMENT PRIOR TO ISSUING CERTIFICATE OF OCCUPANCY OR A FINAL DRIVEWAY INSPECTION.



INST# 2476839 OR BK 2741 PG 1613 RECD 09/18/2014 03:58:14 PM  
(1 Page)  
CAROLYN TIMMANN MARTIN COUNTY CLERK  
DEED DOC \$0.00, HTG DOC \$0.00, INTANGIBLE \$0.00



Record and Return to:  
Apex Pavers  
834 SE Lincoln Ave  
Stuart, FL 34994

2  
**NOTICE OF COMMENCEMENT**  
To be completed when construction value exceeds \$2,500.00

PERMIT #: \_\_\_\_\_ TAX FOLIO # 13 3841 005 000 00110 9

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS, IF AVAILABLE):  
11 Palm Rd  
Stuart FL 34996  
Palm Row Revised & amended lot 11

GENERAL DESCRIPTION OF IMPROVEMENT: Brick paver pld, w/h, dlw, patio

**OWNER INFORMATION OR LESSEE INFORMATION, IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:**

Name: Robert Chapman  
Address: 11 Palm Rd Sewalls Point FL  
Interest in property: owner  
Name and address of fee simple title holder (if different from Owner listed above): \_\_\_\_\_

CONTRACTOR'S NAME: Ryan Figman, Apex Pavers Phone No.: (772) 419-5151  
Address: 834 SE Lincoln Ave, Stuart, FL 34994

SURETY COMPANY (if applicable, a copy of the payment bond is attached):  
Name and address: \_\_\_\_\_ Bond amount: \_\_\_\_\_  
Phone No.: \_\_\_\_\_

LENDER'S NAME: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Address: \_\_\_\_\_

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

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Address: \_\_\_\_\_

In addition to himself or herself, owner designates \_\_\_\_\_ of \_\_\_\_\_  
receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.  
Phone number of person or entity designated by Owner: \_\_\_\_\_

Expiration date of Notice of Commencement:  
(the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): \_\_\_\_\_

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

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

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager/Attorney-in-fact

Robert Chapman, Owner  
Signatory's Title/Office

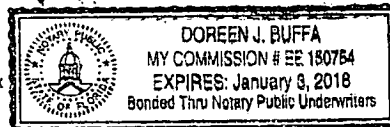
The foregoing instrument was acknowledged before me this 18 day of August, 2014

By: Robert Chapman as owner for \_\_\_\_\_  
Name of person Type of authority (e.g. officer, trustee) Party on behalf of whom instrument was executed

Doreen J. Buffa  
Notary's Signature

(Print, Type, or Stamp Commissioned Name of Notary)

Personally known  or produced identification   
Type of identification produced FL DL C 155 778661094

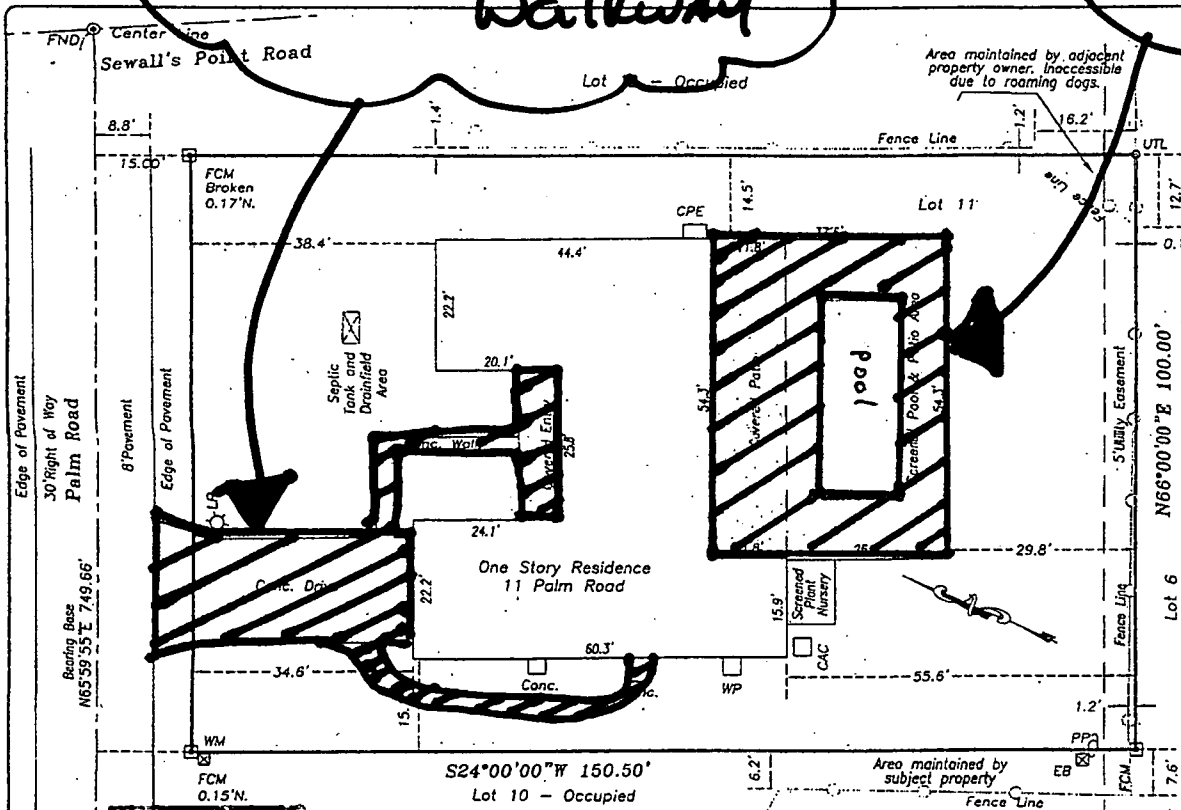


STATE OF FLORIDA  
MARTIN COUNTY  
THIS IS TO CERTIFY THAT THE  
FOREGOING PAGE(S) IS/ARE A TRUE  
AND CORRECT COPY OF THE ORIGINAL  
DOCUMENT AS FILED IN THIS OFFICE  
DATE 9-15-14 BY CAROLYN TIMMANN, CLERK  
INSTR # 2475840 DR BK 2741 PG 1614 RECD 09/18/2014  
(1 Pgs)  
CAROLYN TIMMANN MARTIN COUNTY CLERK  
DEED DOC \$0.00, MTG DOC \$0.00, INTANGIBLE \$0.00  
03:58:14 PM

CLM  
TOST  
12/14

Install Sand Set  
Paver Driveway +  
Walkway

COVER Existing Pool Deck  
w/ BRICK Pavers



**LEGAL DESCRIPTION**  
 Lot 11, PALM ROW, according to the REVISED AND AMENDED PLAT OF PALM ROW, as recorded in the Office of the Clerk of Circuit Court in and for Martin County, Florida, in Plat Book 4, Page 68, of the Public Records of Martin County, Florida.

**SURVEYOR'S REPORT**  
 1 This Survey shall not be valid unless sealed with an embossed Surveyor's Seal;  
 2 No underground improvements have been located as part of this Survey.  
 3 The last field date of this Survey was: 5.23.11. Updated on 12.17.2013  
 4 This Survey was prepared using the Plat of Record only. No other documents were provided and no search of the public records was performed by this office.  
 5 The Survey shown hereon meets the requirement for field accuracy in a suburban area as set forth by the Minimum Technical Standards (5J-17.050-D52FAC).  
 6 Left Blank  
 7 Unless otherwise noted all bearing and distances are in accordance with the record plat and have been verified by field measurements. See map for bearing base.  
 8 Parcel/Lot line locations have been based on found survey control along the center line of Palm Road.  
 9 Left Blank  
 10 The Legal Description shown hereon was provided by the client and/or his/her representatives.  
 11 No ownership of fence lines has been determined as part of this Survey.  
 12 Off set calls to found survey control are relative to the nearest property corner, intersection of lines, point of curvatures (PC), point of reverse curvatures (PRC) or other identifiable point.  
 13 Compliance with local zoning requirements and or with requirements set forth by other State, Public, and/or Private entities has not been verified as part of this Survey.

**LEGEND**  
 CAC - Concrete Pad with Air Conditioning  
 CPE - Concrete Pad with Pool Equipment  
 Conc. - Concrete  
 EB - Electric Box  
 GV - Water Gate Valve  
 HYD - Fire Hydrant  
 LP - Light Post  
 O/L - Overhead Utility Line  
 PP - Power Pole  
 TCB - Telephone Communications Box  
 SSMH - Sanitary Sewer Manhole  
 UB - Utility Box  
 WM - Water Meter

**LEGEND**  
 FCM - Found 4"x4" Concrete Monument  
 FIR - Found #5 Iron Rod  
 FIRC - Found #5 Iron Rod with Cap  
 SIRC - Set #5 Iron Rod with Cap LB#735  
 FN - Found Nail  
 FNTH - Found Nail with Tin Tab  
 FPK - Found PK Nail  
 FND - Found Nail with Disk

**PREPARED FOR:**  
 Robert T. Chapman  
 American Airlines Federal Credit Union, its successors  
 and/or assignees  
 Mariner Title Insurance Company  
 Old Republic National Title Insurance Company

Prepared by: Georgia C. Karner, PSM#4363  
 Karner Surveying, Inc. LB#7357

Flood Zone Data derived by scaling methods of the official FEMA Maps and limited to the accuracy of such maps.  
 Flood Zone: X, Community #: 120164  
 Panel #: 0162 Suffix: F Date: 10.04.2002

DRIVEWAYS, DRIVEWAYS, DRIVEWAYS  
 THE PUBLIC RECORDS MUST NOT  
 RESTRICT OR DIRECT THE  
 FLOW OF SURFACE WATER.  
 PROVIDE SWALE OR APPROVED  
 CULVERTS TO SEE TAIL

FILED COPY  
 TOWN OF SEWELL'S POINT  
 BUILDING DEPARTMENT

Prepared For: ROBERT T. CHAPMAN  
 Martin County, Florida

**KARNER SURVEYING, INC.**  
 Residential & Commercial Surveying Services  
 2740 SW Martin Downs Blvd. #333  
 Palm City, Florida 34990  
 PHONE: (772) 288 7206 FAX: (771) 223 8181

Date	Revision Description
12.17.13	Survey update

Sheet Title	
Boundary Survey	
Scale: 1" = 20'	Sheet No: 23-11
Drawn By: TOST	1102
Job No: 1102	CAD File: 1102-0801
File No: 1102-0801	

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection  Mon  Tue  Wed  Thur  Fri 11/3/14 Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
10693	117 N SPR	Electrical		E-MAIL FPL
	Baley	Meter Final	PASS	
	Morse			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11016	Serls	Generator		INSPECTOR <i>[Signature]</i> COMMENTS
	4 River Oak	Final	PASS	
	Electrical Connection			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11030	Hilschlers	Footer		INSPECTOR <i>[Signature]</i> COMMENTS
	22 Banyan Rd		FAIL	
	Florida Screen Blders			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
10945	Carter	Slab +		INSPECTOR <i>[Signature]</i> COMMENTS
	51 N River	Roof Dry-in	PASS	
	Masterpiece Blders			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
10973	<del>19 Conch Property</del>	Tie Beam		INSPECTOR <i>[Signature]</i> COMMENTS
	<del>19 Lantana</del>		PASS	
	Conch Property			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
<del>11025</del>	Chapman	Final		INSPECTOR <i>[Signature]</i> COMMENTS
	<del>11025</del>		<del>PASS</del>	
	Apex Pavers			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11038	Reich	Window		INSPECTOR <i>[Signature]</i> COMMENTS
	22 Middle Rd	In-Progress	CANCEL	
	TV Trim Package			

OK



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

**FREE REMOVAL, RELOCATION, REPLACEMENT PERMIT**

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

~~Owner: [redacted] Address: [redacted] Phone: 287 0767~~

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

No. of Trees: REMOVE \_\_\_\_\_ Species: \_\_\_\_\_

No. of Trees: RELOCATE \_\_\_\_\_ Species: \_\_\_\_\_

No. of Trees: REPLACE \_\_\_\_\_ Species: \_\_\_\_\_

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

Reason for tree removal/relocation (See notice above) ROYAL PALM - DEAD

Signature of Property Owner [Signature] Date \_\_\_\_\_

~~Approved by Building Inspector: [redacted] Date: 4/28/12 Fee: n/c~~

NOTES: \_\_\_\_\_

SKETCH:

FRONT LAWN - CENTER

PALM RD



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

OK

**TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT**

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

Owner Richard Rausch Address [Redacted] Palm Rd Phone 919-522-9993

Contractor Out on a Limb Address \_\_\_\_\_ Phone 772-631-6211

No. of Trees: REMOVE 3 Species: Oak

No. of Trees: RELOCATE \_\_\_\_\_ Species: \_\_\_\_\_

No. of Trees: REPLACE \_\_\_\_\_ Species: \_\_\_\_\_

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

**ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY**

Reason for tree removal/relocation (See notice above) Diseased Oaks and 1 is over our power line, we just paid for fallen tree that was rott

Signature of Property Owner [Signature] Date 8-7-12

at base to be removed

Approved by Building Inspector: [Signature] Date 8-8-12 Fee: \$15

NOTES:

7 - TREES APPROVED

[Signature]  
 8-20-12  
 (M)



N NEED ADJUST  
 O.N.G.

LEAVING ONE BRANCH  
 OK

OVER POWER LINE  
 OK

\* Dead Palm Tree (by woodpecker)