

15 Palm Road

4161

SFR

TOWN OF SEWALL'S POINT BUILDING PERMIT

PARCEL CONTROL NUMBER 1388410050000009030000

PERMIT NUMBER 4161
 DATE ISSUED 3/25/97
 CONTRACTOR OR OWNER/BUILDER DIAZ
 ADDRESS 15 PALM ROAD
 CITY/ST/ZIP SEWALL'S POINT
 TELEPHONE _____

OWNER Rafael Diaz
 ADDRESS 5725 SW WOODHAM ST
 CITY/ST/ZIP PALM CITY 34990
 TELEPHONE 283.7870

FLOOD ZONE C
 TO BE CONSTRUCTED SFR
 SITE ADDRESS LOT 9
 SUBDIVISION PALM ROW
 CONSTRUCTION VALUE 210,700

FEES	
REMODELING/NEW CONSTRUCTION	<u>1614.00</u>
IMPACT	<u>1500.00</u>
RADON	<u>42.41</u>
SEPTIC	_____
WELL	_____
FENCE	_____
POOL	_____
DOCK	_____

PLUMBING	<u>100</u>
ELECTRICAL	<u>100</u>
MECH./A.C.	<u>100</u>
ROOF	<u>100</u>
WALL	_____
POOL ENCLOSURE	_____
OWNER/BUILDER	_____
TOTAL	<u>3564.01</u>
PAID BY CHECK	<u>2044</u>

ISOLATE DRAINS AT BATH 1 & LAUNDRY - DO NOT ALLOW BOND AT PIPES

OK

BUILDING INSPECTION (SIGN OFF)	
FORM BOARD SURVEY	DATE <u>3/31/97</u>
ROUGH PLUMBING	DATE <u>3/31/97</u>
TERMITE PROTECTION	DATE <u>3/28/97</u>
FOOTING-SLAB	DATE <u>3/28/97 / 4/3/97</u>
LINTEL	DATE <u>4/21/97</u>
ROUGH ELECTRIC	DATE <u>6/16/97</u>
FRAMING	DATE <u>6/16/97</u>
A/C DUCTS	DATE <u>6/16/97</u>

(FOR OFFICIAL USE ONLY)	
NAILING	DATE <u>4/20/97</u>
ROOF	DATE _____
INSULATION	DATE _____
FINAL ELECTRIC	DATE _____
FINAL PLUMBING	DATE _____
SEPTIC FINAL	DATE _____
DRIVEWAY	DATE _____
FINAL C.O.	DATE _____

PERMIT AUTHORIZED BY _____

- Call 287-2455 from 8:00 a.m. to 4:00 p.m. for inspections.
- Requests for inspections require 24 hours notice.
- All work must be in compliance with the Town of Sewall's Point Ordinance, the South Florida Building Code, the State of Florida Building Code, the Florida Energy Efficiency Building Code and Elevations based on the current insurance rate map.
- Portable toilet facilities and haul-off trash containers are required for initial inspection.
- Working hours are from 8:00 a.m. to 5:00 p.m.
- No trucks, trailers or other commercial vehicles on residential streets.

Patrick Exterminating Inc.
 3061 S.E. JAY ST. STUART, FL 34997
 561-286-6812 / 561-546-3722
 561-562-3700 / 561-744-2681

Patrick Exterminating Inc.
 3061 S.E. JAY ST. STUART, FL 34997
 561-286-6812 / 561-546-3722
 561-562-3700 / 561-744-2681

3/28/97

PERMIT # _____ TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE):
LOT 9, REVISED & AMENDED PLAT OF PALM ROW (15 PALM ROAD)

GENERAL DESCRIPTION OF IMPROVEMENT: _____

OWNER: RAFAEL DIAZ

ADDRESS: 5125 S.W. WOODHAM ST PALM CITY, FL 34990

PHONE #: (361) 283-7870 FAX #: _____

CONTRACTOR: ENGINEERED HOMES, INC

ADDRESS: 5125 S.W. WOODHAM ST PALM CITY, FL 34990

PHONE #: (361) 283-7870 FAX #: _____

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

PHONE #: _____ FAX #: _____

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

Rafael Diaz
SIGNATURE OF OWNER

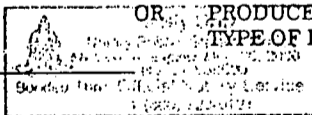
SWORN TO AND SUBSCRIBED BEFORE ME THIS 18 DAY OF March 1997 BY Rafael Diaz

PERSONALLY KNOWN

OR PRODUCED ID

TYPE OF ID _____

Willy Smith
NOTARY SIGNATURE



4161

Tax Folio No. _____

TOWN OF SEWALL'S POINT, FLORIDA

BUILDING PERMIT APPLICATION

Owner's Name RAFAEL & CATHERINE DIAZ

Owner's Address 5125 S.W. WOODHAM ST. PALM CITY, FL 34990

Owner's Telephone (561) 283-7870

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

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

City _____ State _____ Zip _____

Contractor's Name RAFAEL DIAZ (ENGINEERED HOMES, INC.)

Contractor's Address 5125 S.W. WOODHAM ST

City PALM CITY State FL Zip 34990

Contractor's Telephone (561) 283-7870 License Number CR 0039458

Job Name DIAZ RESIDENCE

Job Address LOT 9 PALM ROW

City Town of Sewall's Point State Florida Zip 34996

Legal Description LOT 9 PALM ROW

Bonding Company _____

Bonding Company Address _____

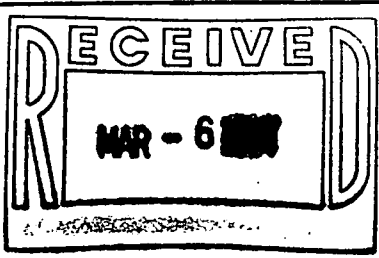
City _____ State _____

Architect/Engineer's Name ENGINEERED HOMES, INC. / JOHN OLSON

Architect/Engineer's Address 5125 S.W. WOODHAM ST. PALM CITY / 917 SE. CENTRAL PKWY

Mortgage Lender's Name NONE

Mortgage Lender's Address _____



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

OWNER'S AFFIDAVIT: 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.

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.

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

Plumbing Contractor SOUTH PARK PLUMBING License No. MP00049
Electrical Contractor CIUFO & SONS License No. ME00186
Roofing Contractor RTS License No. ACC047888
A/C Contractor NISAIR License No. CA0041199
Description of Building or Alterations NEW HOUSE

Name of Street Designated as Front Building Line and Front Yard

PALM ROAD

Subdivision PALM POW Lot 9 Block _____

Building Area (air conditioned) 2734 sq. ft.

Garage, Porch, Carport Area 1507 sq. ft.

Contract Price (excluding carpet, land, appliance, landscaping)

\$ 180,000

[Signature]
(Owner or Authorized Agent)

DATE 3/6/97

Sworn and Subscribed before me this
6th day of March 1997

(SEAL)

[Signature]

NOTARY PUBLIC
State of Florida at Large
My Commission Expires:

OFFICIAL NOTARY SEAL
JOAN H BARROW
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC423705
MY COMMISSION EXP. NOV. 30, 1995

[Signature]
(Contractor)

DATE 3/6/97

Sworn and Subscribed before me this
6th day of March 1997

(SEAL)

[Signature]

NOTARY PUBLIC
State of Florida at Large
My Commission Expires:

OFFICIAL NOTARY SEAL
JOAN H BARROW
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC423705
MY COMMISSION EXP. NOV. 30, 1995

Certificate of Competency Holder

Contractor's State Certification or Registration No. CR C039458

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY [Signature] Permit Officer

For Official Use Only

Plans approved as submitted _____ Date _____

Plans approved as marked _____ Date _____

A/C Area _____ sq. ft. x \$60. = \$ 164 040

Non A/C Area _____ sq. ft. x \$25. = \$ 37 675

Total = \$ 201 715

Contract Price \$ 180,000 (fee will be charged on higher amount)

201.7
~~100~~ M. x \$8.00 = \$ 1614 ~~1440~~ Building Fee
 25% Owner/Builder Fee \$ — 0 — (if applicable) CERTIFIED R.C.
 A/C Fee \$ 100
 Electrical Fee \$ 100
 Plumbing Fee \$ 100
 Roofing Fee \$ 100
 Radon Fee \$ 42.41
 County Impact Fee \$ 1508.20
 TOTAL PERMIT FEE \$ 3564.61

PAYMENT RECEIVED _____
 Signature _____ Date _____

Contractor's License CR-C039458
 Sub-Contractors' Licenses ✓
 Workers' Comp. Insurance _____
 General Liability Insurance _____
Two Three sets of Plans ✓
 Plans sealed by architect or engineer ✓
 Plot Plan ✓
 Boundary survey _____
 Topographic survey certified to the ✓
 Town of S.P.
 Recorded warranty deed _____
 Septic tank permit ✓
 Energy Code calculations ✓
 Elevation certificate N/A
 Recorded notice of commencement ✓
 Application for c.o. _____

Lennox Objective Guide to Installation Comparison

Nisair Airconditioning Inc.,
 1501 Decker Ave D-404
 Stuart, Fla
 1-407-283-0904

02/17/97

LOGIC 1000 RESIDENTIAL LOADS ANALYSIS

PAGE 1

MR MRS RALPH DIAZ

PREPARED FOR: ENGINEERED HOMES INC.

PREPARED BY: PHILIP NISA JR

FILE TITLE: DIAZ
 DESIGN TEMPERATURES (DEGREES F)
 WINTER INSIDE 68 WINTER OUTSIDE 45
 SUMMER INSIDE 75 SUMMER OUTSIDE 91
 DAILY TEMPERATURE RANGE INDICATOR M
 DESIGN GRAINS RELATIVE HUMIDITY 41
 DEGREES NORTH LATITUDE 27
 SUMMER AIR CHANGES PER HOUR 0.4
 WINTER AIR CHANGES PER HOUR 0.7



			AREA SQ FT	BTUH LOSS	BTUH GAIN
ROOM -	1 WHOLEHOUSE IN ZONE 1	60 X 45			
WALL	14B 8 INCH BLOCK R-5 INSUL OVERHANG = 2.0		1,757	5,821	3,113
WINDOW	1A SNGL Pn CLR GLASS WD FRM FACING-SE TINT-TINTED SHADING-DRAPES HALF DRAWN SHADING COEFFICIENT = 1 REVEAL = 2.0		70	1,594	2,578
WINDOW	1A SNGL Pn CLR GLASS WD FRM FACING-SW TINT-TINTED SHADING-DRAPES HALF DRAWN SHADING COEFFICIENT = 1 REVEAL = 2.0		120	2,732	4,121
WINDOW	1A SNGL Pn CLR GLASS WD FRM FACING-NW TINT-TINTED SHADING-DRAPES HALF DRAWN SHADING COEFFICIENT = 1 REVEAL = 2.0		80	1,822	3,104
WINDOW	1A SNGL Pn CLR GLASS WD FRM FACING-NE TINT-TINTED SHADING-DRAPES HALF DRAWN SHADING COEFFICIENT = 1 REVEAL = 2.0		60	1,366	2,328
DOOR	10D SOLID CORE		82	863	462
CEILING	16G LIGHT R-30 INSULATION		2,700	2,049	2,851
FLOOR	22A NO EDGE INSULATION		241	4,490	0
WINTER INFILTRATION	284 CFM			7,187	
SUMMER INFILTRATION	162 CFM				
		SENSIBLE GAIN			2,857
		LATENT GAIN			4,526 L
MECHANICAL VENTILATION	50.0 CFM			1,265	880
PEOPLE	4				
		SENSIBLE GAIN			1200
		LATENT GAIN			920 L

MR MRS RALPH DIAZ

			AREA SQ FT	BTUH LOSS	BTUH GAIN
APPLIANCES					1200
DUCT	LOSS MULT=.20	GAIN MULT=.20		5,838	4,939
TOTAL FOR ROOM 1	24,300 CU FT		2,700	35,027	29,632
					6,840 L

=====

STRUCTURE TOTALS	24,300 CU FT		2,700	35,027	29,632
					6,840 L

 MINIMUM Cooling Capacity needed is 36,472 btu
 at 91 degrees outside and 75 degrees inside

Maximum desired Sensible Cooling Capacity is 34,077 btu
 (115% of Sensible Load)

=====

***** Version 92.10 *****
 * This Heating and Cooling Load Computation was produced using the procedures *
 * and tables of the Air Conditioning Contractors of America's Manual J, *
 * Seventh Edition. The accuracy of the calculated loads depends upon the *
 * accuracy of the data used and the accuracy of the Manual J load calculation *
 * procedures for the given conditions. No warranty, either expressed or *
 * implied, is given by Lennox Industries Inc. with respect to the accuracy *
 * and/or sufficiency of the information provided by this report. *

=====
 MR MRS RALPH DIAZ
 =====

CFM CHART FOR A 1,600 CFM BLOWER

ROOM NO#	ROOM NAME	AREA SQ FT	<-- HEATING -->		<----- COOLING ----->		
			TOTAL LOSS BTUH	HEATING AIR CFM	SENS GAIN BTUH	TOTAL GAIN BTUH	COOLING AIR CFM
1	WHOLEHOUSE	2700	35027	1600	29632	36472	1600
	ZONE 1 TOTALS	2700	35027	1600	29632	36472	1600

* NO WARRANTY, EITHER EXPRESSED OR IMPLIED IS GIVEN WITH RESPECT TO THE ACCURACY OR SUFFICIENCY OF THE INFORMATION PROVIDED, AND THE USER MUST ASSUME ALL RISKS AND RESPONSIBILITIES IN CONNECTION WITH ITS USE THEREOF.

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

FORM 600A-93

Residential Component Prescriptive Method A

SOUTH

PROJECT NAME: DIAZ RESIDENCE

BUILDER: ENGINEERED HOMES INC.

AND ADDRESS: LOT #6 PALM ROW

PERMITTING

CLIMATE

STUART FL 34996

OFFICE:

ZONE: 7 | 8 | 9

OWNER: MR MRS RALPH DIAZ

PERMIT NO.

JURISDICTION NO.

CK

1. New construction or addition	1. New Construction	_____
2. Single family detached or Multifamily attached	2. Single-Family	_____
3. If Multifamily-No. of units	3. 0	_____
4. If Multifamily, is this a worst case (yes/no)	4.	_____
5. Conditioned floor area (sq.ft.)	5. 2734.00	_____
6. Predominant eave overhang (ft.)	6. 2.00	_____
7. Porch overhang length (ft.)	7. 11.00	_____
8. Glass area and type:	Single Pane Double Pane	
a. Clear Glass	8a. 0.0sqft 0.00sqft	_____
b. Tint, film or solar screen	8b. 321.0sqft 0.00sqft	_____
9. Floor type and insulation:		
a. Slab on grade (R-value, perimeter)	9a. R= 0.00 , 241.00 ft	_____
10. Net Wall type area and insulation:		
a. Exterior: 1. Concrete (Insulation R-value)	10a-1 R= 4.50, 1899.00sqft	_____
a. Adjacent: 2. Wood frame (Insulation R-value)	10a-2 R=11.00, 270.00sqft	_____
11. Ceiling type area and insulation:		
a. Under attic (Insulation R-value)	11a. R=30.00 , 2734.00sqft	_____
12. Air distribution systems		
a. Ducts (Insulation + Location)	12a. R= 6.50 , uncond	_____
13. Cooling system	13. Type: Central A/C	_____
	SEER: 12.00	_____
14. Heating System:	14. Type: Strip Heat	_____
	COP: 1.00	_____
15. Hot water system:	15. Type: Electric	_____
	EF: 0.90	_____
16. Hot Water Credits: (HR-Heat Recovery, DHP-Dedicated Heat Pump)	16.	_____
17. Infiltration practice: 1, 2 or 3	17. 2	_____
18. HVAC Credits (CF-Ceiling Fan, CV-Cross vent, HF-Whole house fan, RB-Attic radiant barrier, MZ-Multizone)	18.	_____
19. EPI (must not exceed 100 points)	19. 77.28	_____
a. Total As_Built points	19a. 38171.27	_____
b. Total Base points	19b. 49394.63	_____

I Hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY: [Signature]
DATE: 2/17/97

I hereby certify that this building is in compliance with the Florida Energy Code.

OWNER/AGENT: _____
DATE: _____

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance in accordance with Section 553.908 F.S.

BUILDING OFFICIAL: _____
DATE: _____

SUMMER CALCULATIONS

=== BASE ===

=== AS-BUILT ===

GLASS-----										
ORIEN	AREA	x BSPM =	POINTS	TYPE	SC	ORIEN	AREA	x SPM	x SOF	= POINTS
NE	57.00	109.7	6252.9	SGL TINT		NE	57.0	94.5	.44	2370.1
SE	70.00	109.7	7679.0	SGL TINT		SE	70.0	143.0	.52	5205.2
SW	114.00	109.7	12505.8	SGL TINT		SW	96.0	143.0	.28	3843.8
				SGL TINT		SW	18.0	143.0	.52	1338.5
NW	80.00	109.7	8776.0	SGL TINT		NW	80.0	94.5	.64	4838.4

.15 x COND. FLOOR /	TOTAL GLASS	= ADJ.	x	GLASS	=	ADJ GLASS	GLASS
AREA	AREA	FACTOR		POINTS		POINTS	POINTS
.15	2,734.00	321.00	1.278	35,213.70		44,987.97	17,595.98

NON GLASS-----										
AREA	x	BSPM =	POINTS	TYPE	R-VALUE	AREA	x	SPM =	POINTS	

WALLS-----										
Ext	1899.0	1.6	3038.4	Ext NormWtBlock In	4.5	1899.0	2.17	4130.3		
Adj	270.0	1.0	270.0	Adj Wood Frame	11.0	270.0	1.00	270.0		

DOORS-----										
Ext	80.0	6.4	512.0	Ext Wood		80.0	9.40	752.0		
Adj	24.0	2.6	62.4	Adj Wood		24.0	3.80	91.2		

CEILINGS-----										
UA	2734.0	.8	2187.2	Under Attic	30.0	2734.0	.80	2187.2		

FLOORS-----										
Slb	241.0	-20.0	-4820.0	Slab-on-Grade	.0	241.0	-20.00	-4820.0		

INFILTRATION-----										
	2734.0	14.7	40189.8	Practice #2		2734.0	14.70	40189.8		

TOTAL SUMMER POINTS										
			86,427.77						60,396.50	

TOTAL	x	SYSTEM	=	COOLING	TOTAL	x	CAP	x	DUCT	x	SYSTEM	x	CREDIT	=	COOLING
SUM PTS	MULT			POINTS	COMPON	RATIO		MULT		MULT		MULT			POINTS
86,427.77	.37			31,978.28	60,396.50	1.00	1.093		.280		1.000				18,481.33

WINTER CALCULATIONS

=== BASE ===				=== AS-BUILT ===							
GLASS-----											
ORIEN	AREA	x BWPM =	POINTS	TYPE	SC	ORIEN	AREA	x WPM	x WOF	= POINTS	
NE	57.00	-.4	-22.8	SGL TINT		NE	57.0	2.9	1.51	249.6	
SE	70.00	-.4	-28.0	SGL TINT		SE	70.0	-2.0	-.03	4.2	
SW	114.00	-.4	-45.6	SGL TINT		SW	96.0	-2.0	-1.46	280.3	
				SGL TINT		SW	18.0	-2.0	-.03	1.1	
NW	80.00	-.4	-32.0	SGL TINT		NW	80.0	2.9	1.30	301.6	

.15 x COND. FLOOR /		TOTAL GLASS =		ADJ. x		GLASS		=		ADJ GLASS	GLASS
AREA		AREA		FACTOR		POINTS				POINTS	POINTS
.15	2,734.00		321.00		1.278		-128.40			-164.04	836.80

NON GLASS-----											
AREA x BWPM = POINTS				TYPE		R-VALUE	AREA	x	WPM	= POINTS	

WALLS-----											
Ext	1899.0	.3	569.7	Ext NormWtBlock In		4.5	1899.0	.98		1851.5	
Adj	270.0	.5	135.0	Adj Wood Frame		11.0	270.0	.50		135.0	

DOORS-----											
Ext	80.0	1.8	144.0	Ext Wood			80.0	2.80		224.0	
Adj	24.0	1.3	31.2	Adj Wood			24.0	1.90		45.6	

CEILINGS-----											
UA	2734.0	.1	273.4	Under Attic		30.0	2734.0	.10		273.4	

FLOORS-----											
Slb	241.0	-2.1	-506.1	Slab-on-Grade		.0	241.0	-2.10		-506.1	

INFILTRATION-----											
	2734.0	1.2	3280.8	Practice #2			2734.0	1.20		3280.8	
=====											
TOTAL WINTER POINTS			3,763.96								6,141.03
=====											
TOTAL	x SYSTEM	=	HEATING	TOTAL	x CAP	x DUCT	x SYSTEM	x CREDIT	=	HEATING	
WIN PTS	MULT		POINTS	COMPON	RATIO	MULT	MULT	MULT		POINTS	
3,763.96	1.10		4,140.36	6,141.03	1.00	1.093	1.000	1.000		6,711.27	
=====											

WATER HEATING

```

*****
=== BASE === | === AS-BUILT ===
=====
NUM OF x MULT = TOTAL | TANK VOLUME EF TANK x MULT x CREDIT. = TOTAL
BEDRMS          |          RATIO          MULT
-----
4      3319.0  13,276.00 | 65      .90  1.000  3244.7  1.00  12,978.67
=====
    
```

SUMMARY

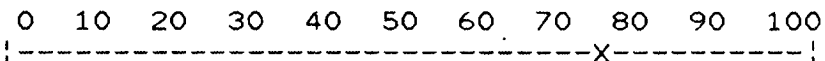
```

*****
=== BASE === | === AS-BUILT ===
=====
COOLING HEATING HOT WATER TOTAL | COOLING HEATING HOT WATER TOTAL
POINTS + POINTS + POINTS = POINTS | POINTS + POINTS + POINTS = POINTS
-----
31978.3  4140.4  13276.0  49,394.63 | 18481.3  6711.3  12978.7  38,171.27
=====
    
```

 * EPI = 77.28 *

For detailed information
of the EPI rating number
or for any ITEM listed,
ask your Builder for
DCA Form 600A-93
or Form 600B-93

EPI= 77.3



The maximum allowable EPI is 100. The lower the EPI the more efficient the home

RESIDENTIAL ENERGY PERFORMANCE RATING SHEET

ITEM	HOME VALUE	Low Efficiency		High Efficiency	
		SINGL CLR		DBL TINT	
WINDOWS.....	Single Tint	-----X-----			
INSULATION.....					
Ceiling R-Value.....	30.0	R-10		R-30	
Wall R-Value.....	5.3	R-0		R-7	
Floor R-Value.....	0.0	R-0		R-19	
AIR CONDITIONER.....					
SEER/EER.....	12.0	10.0	SEER	17.0	
		9.7	EER	16.0	
HEATING SYSTEM.....					
Electric COP/HSPF.....	1.0	2.50	COP	4.19	
Gas AFUE.....	0.00	0.78	AFUE	0.90	
WATER HEATER.....					
Electric EF.....	0.90	0.88		0.96	
Gas EF.....	0.00	0.54		0.90	
Solar EF.....		0.40		0.80	
OTHER FEATURES.....					

I certify that these energy saving features required for the Florida Energy Code have been installed in this house.

Address: _____ Builder Signature: _____ Date: _____

City/Zip _____

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: Rafael Diaz SEPTIC TANK PERMIT NO.: HD 97-0058
LEGAL DESCRIPTION: Lot 9 Palm Row

The items which are checked off below must be certified by a surveyor or engineer and returned to the Martin County Health Department prior to the first plumbing inspection by the Building Department. Approval of this stubout elevation certification constitutes commencement of building construction for septic system permits.

- 1. Building Permit Number: _____ (Certification not required for this item).
- 2. I certify that the elevation of the top of the lowest plumbing stubout is _____ inches (circle one) above / below benchmark elevation as indicated on septic tank permit.
- 3. I certify that the top of the lowest building plumbing stubout is _____ inches (circle one) above/ below crown of road elevation shown on septic tank permit.
- 4. I certify that the top of the drainfield pipe elevation is _____
- 5. I certify that all moderate and or severely limited soils have been removed from an area of _____ feet by _____ feet a minimum depth of _____. Surveyor must submit 2 plot plans to scale of excavated area. (See diagram _____ A/ _____ B on reverse side) Date Observed: ____/____/____
- 6. I certify that all moderately and or severely limited soils have been removed in an area _____ feet wide or 33% of the area of the drainfield. This area is centered in the drainfield and extends to a depth of _____ feet where slightly limited soils exist. Surveyor must submit 2 plot plans to scale of excavated area. (See diagram B on reverse side) Date Observed: ____/____/____

- NOTE:
- a. Severely limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
 - b. Drainfield must be centered in the excavated area. Drainfield will not be approved if severe limited soils are not removed.
 - c. Condition numbers 5, 6 and 7 may be satisfied with excavation certification from the certified septic installer responsible for drainfield installation.

CERTIFIED BY: _____

As applicant or applicant's representative,
I understand the above requirements.

Date: _____ Job Number: _____

Susan Gray
(Signature)

FOR MARTIN COUNTY HEALTH DEPARTMENT USE ONLY

Martin County Health Department Approval Signature

(Date)

Stubcert.doc forms disk I Revised 01/17/97

Martin County Health Department
620 South Dixie Highway • Stuart, FL 34994
(561) 221-4090 SunCom 269-4090 Fax (561) 221-4967

0070

GARAGE 986

$$\text{LOT} = 150.5 \times 108 = 16254$$

ENTRY 283

$$- 25 \times 25 = -625$$

PORCH 238

$$+ (\pi \times 25^2 / 4) = 491$$

LIVING 2734

16120

TOTAL 4241

$$\text{HOUSE} + \text{GARAGE} = 3720$$

$$3720 / 16120 = 23\%$$

$$\text{DRIVEWAY} = (27 \times 35) + (23.3 \times 27) - (15.8 \times 13.5)$$

$$= 945 + 629 - 213.3$$

$$= 1360.7$$

$$\text{HOUSE} + \text{GARAGE} + \text{PORCHES} + \text{DRIVEWAY} = 5601$$

$$5601 / 16120 = 34.7\%$$

Paul

283-7870

Town of Sewall's Point

DAVID L. MILLARD
Mayor

VINCENT A. VORRASO
Vice Mayor

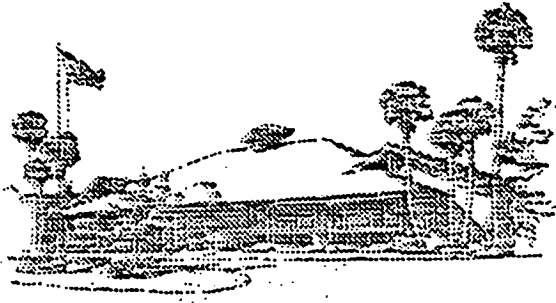
CYRUS KISSLING
Commissioner

KATHRYN J. KRAMER
Commissioner

DONALD B. WINER
Commissioner

JOAN H. BARROW
Town Clerk

WILBUR C. KIRCHNER
Chief of Police



March 10, 1997

Mr. Rafael Diaz
Engineered Homes, Inc.
5125 SW Woodham St.
Palm City, FL 34990

Dear Mr. Diaz:

Upon review of your Permit Application package, I find the following deficiencies:

1. The trusses are engineered to Southern Standard Building Code criteria. The Town of Sewall's Point is under the South Florida Building Code (1994 edition, revised). Please resubmit.

2. Typical wall section contains a note referencing a table which matches uplift to connector. This would leave the computations to the ability of the Inspector or the Contractor. The engineer must specify.

3. Detail at bay window is not acceptable for the following reasons:

A. Filled U-blocks for tie-beam must be specifically engineered (2704.2(c)(2)(Cont.), South Florida Building Code).

B. CBS termination at bay window interrupts required continuous tie-beam.

C. No shear-panels were proposed nor engineering presented to demonstrate how loads will be transferred to the footing at this detail.

4. Survey must contain area calculations for pervious v. impervious surfaces.

Yours truly,

Philip Caruana
Building Inspector

4161

PATRICK EXTERMINATING, INC. SUBTERRANEAN TERMITE CONTROL LIMITED GUARANTEE

Treatment Address 15 PALM ROAD SEWALLS POINT FL
Original Treatment Date 3/28/97 Annual Renewal Commences on 3/28/98
Annual Renewal Fee (not to be increased within first 5 years) ONE HUNDRED AND TEN DOLLARS
Contract # 71364 Area Treated Under This Contract 3,770 SQ FT

YOUR LIMITED GUARANTEE

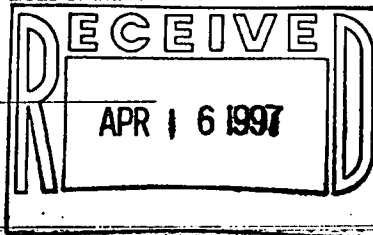
IN consideration of sums received and to be received by us for treating the above premises for Subterranean Termites, we guarantee to inspect annually the above premises and to apply any necessary treatment to said premises, AT NO EXTRA COST, if Subterranean Termite infestation is found therein during the period that this Limited Guarantee remains in force. UNDER NO CIRCUMSTANCES, UNLESS PROVIDED IN WRITING, will damage repair be covered under this limited guarantee.

TERMS AND CONDITIONS

Initial payment under this Limited Guarantee for termite treatment performed by us is the amount stated above under "Initial Treatment," receipt of which is hereby acknowledged. Initial period of the Limited Guarantee shall be ONE year(s), commencing on the date of the initial treatment. In addition to initial period you may, at your option, renew this Limited Guarantee annually for a period of ONE additional years by making the above annual renewal payments on or before said renewal date of each subsequent year. If such annual renewal payments are made without lapse during said additional period, this Limited Guarantee shall be for LIFE year(s) from the date of initial treatment. If annual renewal payment is NOT made on or before said renewal date, this Limited Guarantee shall terminate and become null and void as of the renewal date on which said payment is due. Patrick Exterminating, Inc. reserves the right to adjust the annual renewal rate, if necessary, to offset ever increasing operating costs.

THIS Limited Guarantee covers the premises as of the date of initial treatment and in the event the premises are structurally modified, altered, or otherwise changed after the date of initial treatment, this Limited Guarantee shall terminate, unless a prior written agreement shall have been entered into by the owner for the Company to re-inspect the premises, provide additional treatment if necessary and/or adjust the annual renewal payment. Patrick Exterminating, Inc. will not be held responsible for termites or termite damage which enter structures from outside treated areas or that occur as a result of wood in direct contact with the soil.

BY OWNER OR AGENT



BY PATRICK EXTERMINATING, INC.

3061 S.E. Jay Street, Stuart, FL 34997
Telephone: 407-546-3722 (Hobe Sound)
407-744-2681 (Jupiter)
407-286-6812 (Stuart/Palm City)

Town of Sewall's Point

DAVID L. MILLARD
Mayor

VINCENT A. VORRASO
Vice Mayor

CYRUS KISSLING
Commissioner

KATHRYN J. KRAMER
Commissioner

DONALD B. WINER
Commissioner

JOAN H. BARROW
Town Clerk

WILBUR C. KIRCHNER
Chief of Police



March 10, 1997

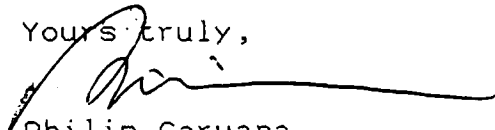
Mr. Rafael Diaz
Engineered Homes, Inc.
5125 SW Woodham St.
Palm City, FL 34990

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 - C. No shear-panels were proposed nor engineering presented to demonstrate how loads will be transferred to the footing at this detail.
4. Survey must contain area calculations for pervious v. impervious surfaces.

Yours truly,


Philip Caruana
Building Inspector

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

OWNER'S AFFIDAVIT: 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.

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.

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

Plumbing Contractor _____ License No. _____

Electrical Contractor _____ License No. _____

Roofing Contractor _____ License No. _____

A/C Contractor _____ License No. _____

Description of Building or Alterations _____

Name of Street Designated as Front Building Line and Front Yard

Subdivision _____ Lot _____ Block _____

Building Area (inside walls) _____ Garage, Porch, Carport
Area _____

Contract Price (excluding carpet, land, appliance, landscaping)

\$ _____

TOWN OF SEWALL'S POINT, FLORIDA

Before a certificate of occupancy is issued, development permit holders shall provide an "as built" survey meeting the requirements prescribed below. This shall apply to all new building construction and any improvements to existing buildings which alter the dimension or height of the building. The survey shall:

- (a) Be prepared by a licensed surveyor registered in Florida, signed, dated and sealed, and shall bear the name, firm or residence address, city, certificate number of the surveyor and date of the field survey;
- (b) Be dated not more than 30 days prior to the certificate of occupancy;
- (c) Contain a complete legal description;
- (d) Reference the source of information used in making the survey;
- (e) Contain the address of the property, including street name and number, and show the proximity of all boundary streets;
- (f) Indicate the flood zone(s) in which any portion of the building is located, even though the property may not be in a flood hazard area;
- (g) Show the exact lot dimensions, including boundary lines and arcs, which must match the Plat, with any variations being noted;
- (h) The scale of the map shown on the survey shall be at least 1" = 10'.
- (i) Show the location, dimensions, and accurate identity of all easements as required under Rule 21 HH-6.03(15) of the Minimum Technical Standards;
- (j) Show all setback requirements;
- (k) Show the location and identification of all encroachments, including the type of improvement comprising the encroachment;
- (l) Show the location and dimension of all structures, driveways, sidewalks, irrigation wells, septic tanks, drain fields and drainage improvements (including swales, berms and pipe invert elevation);
- (m) Contain a certification to the Town of Sewall's Point;
- (n) State for whom the survey is done;
- (o) Show the location, dimensions and square footage of the native habitat preservation area required by Section 11-60 of this Code.

(p) Indicate the lowest habitable floor, average natural grade, and average crown of road elevations in accordance with applicable Code provisions.

(q) Contain a tabulation of the impermeable and permeable areas;

(r) In coastal high hazard areas (V-Zones), indicate the elevation of the top of pier, pile or column.

(s) Contain any other information the building department may require to confirm the construction or improvements comply with applicable Code provisions. *(BUILDING HEIGHT FROM F.F.E.)*

Ordinance # 215, 3/11/92

ADDITIONAL MATERIALS REQUIRED
WITH
BUILDING PERMIT APPLICATION

THIS LIST IS FOR THE APPLICANT'S CONVENIENCE ONLY. THE APPLICANT MAY BE REQUIRED TO SUBMIT MATERIALS TO THE TOWN IN CONNECTION WITH THE BUILDING PERMIT APPLICATION WHICH ARE NOT LISTED HERE. COMPLETE INFORMATION REGARDING BUILDING PERMIT APPLICATION MATERIALS AND LAND DEVELOPMENT REGULATIONS ARE FOUND IN CHAPTERS 2, 2.5, 4, 6.1, 11, 13, APPENDIX A AND APPENDIX B OF THE TOWN CODE OF ORDINANCES, THE SOUTH FLORIDA BUILDING CODE, AND THE TOWN OF SEWALL'S POINT COMPREHENSIVE PLAN.

1. Florida Certification of Contractor and Sub-Contractor.
2. Certification of Liability and Workers' Compensation Insurance.
3. Three sets of Building Plans which must include:
 - a. 1/4" scale building drawings.
 - b. Plot plan at a minimum scale of 1" = 10' certifying proposed coverage by impermeable materials; show existing trees 4 or more inches in diameter at chest height; show all completed structures (C.O. issued), existing or proposed wells, all structures under construction (Building Permit issued), and all proposed structures (Building Permit Application filed or being filed); detailed surface water management practices shall be shown through use of swales, berms, retaining walls, etc. designed to meet the water quality requirements of South Florida Water Management District retain, on site, water from a 3-day 25-year storm event, and to prevent normal run-off onto adjoining parcels. Common swales on property lines are encouraged.
 - c. A topographic survey, sealed by an appropriate professional, indicating existing natural grade and grade changes proposed on the site, except when grade changes are limited to the area beneath the floor of dwelling units.

Each sheet of plans, and the cover sheet of specifications, for buildings and structures; alterations; repairs and improvements; replacements and additions; costing \$15,000.00 or more, shall bear the date, impress seal and signature of a licensed Architect or registered Professional Engineer. Plans for work which is predominately of Architectural nature shall be prepared by and bear the impress seal of a licensed Architect, and work which involves extensive computation based on structural stresses shall, in addition, bear the impress seal of a Professional Engineer.

- c. Foundation Plan.
- d. Floor Plan.

- e. Wall and Roof cross-sections.
 - f. Plumbing, electrical and A/C layouts.
 - g. At least two elevations showing height of building from finished floor.
4. Landscaping and Habitat Management Permit if the removal, relocation, or replacement of any vegetation or habitat is necessitated by the land development
 5. Recorded warranty deed to the property.
 6. Septic tank permit and one set of plans with Martin County Health Department seal.
 7. Energy code calculations.
 8. Certification of elevation from licensed surveyor and determination of flood zone.
 9. Amount of fill anticipated - rough sketch showing location and height of fill.
 10. Manufacturers' schedule of windows.
 11. Except for an improvement which is exempt pursuant to Florida Statutes, an owner or authorized agent before actually commencing to improve any real property, or re-commencing completion of any improvement after default or abandonment, whether or not a project has a payment bond complying with Florida Statutes, shall record a Notice of Commencement in the clerk's office and immediately post either a certified copy of the notice or a notarized statement that the Notice of Commencement has been filed for recording along with a copy of the unrecorded notice.
 12. In special flood hazard areas, a certificate of an appropriately licensed professional stating fully enclosed areas below lowest floor are designed to automatically equalize hydrostatic flood forces on exterior walls by allowing for the entry and exit of flood waters.
 13. In coastal high hazard areas (V Zones), a certificate of an appropriately licensed professional stating breakaway wall collapse shall result from a water load less than that which would occur during the base flood; and the elevated portion of the building and supporting foundation shall not be subject to collapse, displacement or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (structural and non-structural).

THE TOWN'S APPROVAL OF A BUILDING PERMIT APPLICATION DOES NOT RELIEVE OWNER OR CONTRACTOR FROM COMPLIANCE WITH THE TOWN CODE OF ORDINANCES OR OTHER REGULATIONS.

THE TOWN OFFICE HOURS ARE 8:00 A.M. TO 4:00 P.M. MONDAY THROUGH FRIDAY. INSPECTIONS ARE MADE FROM 8:00 A.M. TO 12:00 P.M. NOON ONLY. TWENTY-FOUR HOURS PRIOR NOTICE IS REQUIRED FOR INSPECTIONS.

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

FORM 600A-93

Residential Component Prescriptive Method A

SOUTH

PROJECT NAME: DIAZ RESIDENCE

BUILDER: ENGINEERED HOMES INC.

AND ADDRESS: LOT #6 PALM ROW

PERMITTING

CLIMATE

STUART FL 34996

OFFICE:

ZONE: 7 | 8 | 9 |

OWNER:

MR MRS RALPH DIAZ

PERMIT NO.

JURISDICTION NO.

CK

1. New construction or addition	1. New Construction	_____
2. Single family detached or Multifamily attached	2. Single-Family	_____
3. If Multifamily-No. of units	3. 0	_____
4. If Multifamily, is this a worst case (yes/no)	4.	_____
5. Conditioned floor area (sq.ft.)	5. 2734.00	_____
6. Predominant eave overhang (ft.)	6. 2.00	_____
7. Porch overhang length (ft.)	7. 11.00	_____
8. Glass area and type:	Single Pane Double Pane	
a. Clear Glass	8a. 0.0sqft 0.00sqft	_____
b. Tint, film or solar screen	8b. 321.0sqft 0.00sqft	_____
9. Floor type and insulation:		
a. Slab on grade (R-value, perimeter)	9a. R= 0.00 , 241.00 ft	_____
10. Net Wall type area and insulation:		
a. Exterior: 1. Concrete (Insulation R-value)	10a-1 R= 4.50, 1899.00sqft	_____
a. Adjacent: 2. Wood frame (Insulation R-value)	10a-2 R=11.00, 270.00sqft	_____
11. Ceiling type area and insulation:		
a. Under attic (Insulation R-value)	11a. R=30.00 , 2734.00sqft	_____
12. Air distribution systems		
a. Ducts (Insulation + Location)	12a. R= 6.50 , uncond	_____
13. Cooling system	13. Type: Central A/C	_____
	SEER: 12.00	_____
14. Heating System:	14. Type: Strip Heat	_____
	COP: 1.00	_____
15. Hot water system:	15. Type: Electric	_____
	EF: 0.90	_____
16. Hot Water Credits: (HR-Heat Recovery, DHP-Dedicated Heat Pump)	16.	_____
17. Infiltration practice: 1, 2 or 3	17. 2	_____
18. HVAC Credits (CF-Ceiling Fan, CV-Cross vent, HF-Whole house fan, RB-Attic radiant barrier, MZ-Multizone)	18.	_____
19. EPI (must not exceed 100 points)	19. 77.28	_____
a. Total As_Built points	19a. 38171.27	_____
b. Total Base points	19b. 49394.63	_____

I Hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY: [Signature]
DATE: 2/17/97

I hereby certify that this building is in compliance with the Florida Energy Code.

OWNER/AGENT: [Signature]
DATE: _____

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance in accordance with Section 553.908 F.S.

BUILDING OFFICIAL: _____
DATE: _____

Date: 8/28/97

This is to request a Certificate of Approval for Occupancy to be issued to: RAFAEL DIAZ for Permit No: 4161 issued to construct SINGLE FAMILY RESIDENCE upon Property described as follows: Lot 9, Block _____, Sect. _____, Sub PALM ROW, REV. known as: 15 PALM ROAD when completed in conformance with the approved plans, and approval of the following required inspections.

[Signature]
Owner

Certificate of Occupancy

Town of Sewall's Point, Florida

Lot Stakes/Setbacks	Approved: <u>3/31/97</u>	Termite Protection	Approved: <u>3/28/97</u>
Footings/ Slab	Approved: <u>3/28/97/4/3/97</u>	Rough Plumbing	Approved: <u>3/31/97</u>
Rough Electric	Approved: <u>6/16/97</u>	Lintel/Tie-beam	Approved: <u>4/24/97</u>
Roofing	Approved: <u>6/30/97</u>	Framing/Furring	Approved: <u>6/16/97</u>
Insulation	Approved: <u>6/24/97</u>	HVAC Rough	Approved: <u>6/16/97</u>
Final Electric	Approved: <u>6/27/97</u>	Final Plumbing	Approved: <u>6/27/97</u>
Final HVAC	Approved: <u>6/27/97</u>	Storm Shutters	Approved: <u>6/27/97</u>
Tie-in Survey	Approved: <u>8/8/97</u>	Landscape	Approved: <u>8/28/97</u>

Issued this 28th day of August, 199 7

[Signature]
Building Inspector

[Signature]
Building Commissioner

Town Clerk

Record this document or store in a safe place.

ENGINEERED HOMES, INC.
5125 S.W. WOODHAM ST. 407-283-7870
PALM CITY, FL 34990

2433

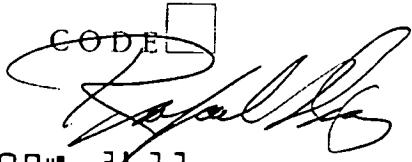
AUGUST 27 19 97

63-2/630
00890

PAY TO THE
ORDER OF

ONE HUNDRED AND 00/100 \$ 100.00
DOLLARS

FIRST UNION First Union National Bank
of Florida
Palm City, Florida

CODE 

FOR

⑆06300002⑆: 9980329909⑈ 2433

MASTER PERMIT NO. 4161

TOWN OF SEWALL'S POINT

Date 8/27/97

BUILDING PERMIT NO. 4249

Building to be erected for RAUL DIAZ Type of Permit ACC.

Applied for by ENGINEERED HOMES, INC. (Contractor) Building Fee

Subdivision PALM ROW Lot 9 Block Radon Fee

Address 15 PALM ROAD Impact Fee


Type of structure STORM SHUTTERS A/C Fee

Parcel Control Number: 1338410050000009030000 Electrical Fee

Amount Paid 100 Check # 2433 Cash Other Fees (SHUTTERS) 100

Total Construction Cost \$ 3000 TOTAL Fees 100

Signed Applicant

Signed 
Town Building Inspector

Town of Sewall's Point

P.I.N. _____

Date 8/28/90

ACCESSORY STRUCTURE PERMIT APPLICATION

to construct:

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

Owner's Name RAFAEL DIAZ

Owner's Address 15 PALM ROAD

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

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

City SEWELL'S POINT State FL Zip 34996

Contractor's Name ENGINEERED HOMES, INC.

Contractor's Address 15 PALM ROAD

City SEWELL'S POINT State FL Zip 34996

Job Name DIAZ RESIDENCE

Job Address SAME AS ABOVE

City _____ County _____

Legal Description _____

Bonding Company _____

Bonding Company Address _____

City _____ State _____

Architect/Engineer's Name JOHN OLSEN

Architect/Engineer's Address _____

Mortgage Lender's Name _____

Mortgage Lender's Address _____

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



4161

OWNER'S AFFIDAVIT: 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.

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.

Robert King
Owner or Agent

8/27/97
Date

Contractor

Date

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this ___ day of _____, 199_, by _____, who: [] is/are personally known to me, or [] has/have produced _____ as identification, and who did not take an oath.

(NOTARY SEAL)

Name: _____
Typed, printed or stamped
I am a Notary Public of the State of Florida having a commission number of _____
and my commission expires: _____

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this ___ day of _____, 199_, by _____, who: [] is/are personally known to me, or [] has/have produced _____ as identification, and who did not take an oath.

(NOTARY SEAL)

Name: _____
Typed, printed or stamped
I am a Notary Public of the State of Florida having a commission number of _____
and my commission expires: _____

Certificate of Competency Holder

Contractor's State Certification or Registration No. _____

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY _____

Michael J. ...
Permit Officer



PERMIT 4161

OFFICIAL RECEIPT
(FOR MONEY RECEIVED)

No. 536339

DATE 3.24, 1997

RECEIVED FROM Legal Services SCHOOL
Engineered Homes (NAME OR ORGANIZATION) \$ 1,000.03
FOR Imp. Fee - Lot 9, Palm Row FUND(S)
FOR DEPOSIT IN _____
D. Falls
PRINCIPAL OR RESPONSIBLE OFFICER

TOWN OF SEWALL'S POINT, FLORIDA
CERTIFICATE OF APPROVAL FOR OCCUPANCY

RECORD OF INSPECTIONS

Date 3/25/97

This is to request a Certificate of Approval for Occupancy to be issued to Rafael Diaz for a structure built under Permit # 4161
(Owner of Property)

Subdivision Palm Row Lot 9 Street Address 15 PALM ROAD

when completed in conformance with the approved plans


Signed (Owner)

1. Lot Stakes/Set Backs _____
2. Termite Protection _____
3. Footing - Slab _____
4. Rough Plumbing _____
5. Rough Electric _____
6. Lintel _____
7. Roof _____
8. Framing _____
9. Insulation _____
10. A/C Ducts _____
11. Final Electric _____
12. Final Plumbing _____
13. Final Construction _____

Final Inspection for Issuance of Certificate of Occupancy.

Approved by Building Inspector _____ date

Approved by Building Commissioner _____ date

Utilities notified _____ date

4405

DRIVEWAY

EXTENSION

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 6/9/98

BUILDING PERMIT NO. 4405

Building to be erected for DIAZ Type of Permit _____

Applied for by DIAZ (Contractor) Building Fee _____

Subdivision Palm Row Lot 9 Block _____ Radon Fee _____

Address 15 PALM ROAD Impact Fee _____

Type of structure DRIVEWAY EXTENSION TO ROAD A/C Fee _____

~~EXTEND DRIVE TO NEW ROAD PAVEMENT~~

Electrical Fee _____

Parcel Control Number: _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 25 Check # 1567 Cash _____ Other Fees (DRIVE) 25

Total Construction Cost \$ 500 TOTAL Fees 25

Signed _____
Applicant

Signed [Signature]
Town Building Inspector

**ACCESSORY BUILDING
NON-HABITABLE STRUCTURE
PERMIT**

INSPECTIONS

SETBACKS DATE _____

FOUNDATION
FINAL

DATE _____
DATE _____

24 HOURS NOTICE REQUIRED FOR INSPECTIONS.

CALL 287-2455

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

MONDAY THROUGH SATURDAY

New Construction Remodel Addition Demolition

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

4405

Town of Sewall's Point

PLN _____

Date _____

BUILDING PERMIT APPLICATION

to construct

NEW CONSTRUCTION ADDITION ALTERATION DEMOLITION

RESIDENTIAL COMMERCIAL _____ SF _____ CR

OTHER: DRIVEWAY EXTENSION CONTRACT PRICE \$500.00

Owner's Name RAFAEL DIAZ

Owner's Address 15 PALM ROAD

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

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

City SEWELL'S PT State FL Zip 34996

Contractor's Name RAFAEL DIAZ

Contractor's Address 15 PALM ROAD

City SEWELL'S PT. State FL Zip 34996

Job Name _____

Job Address SAME

City _____ State _____ Zip _____

Legal Description LOT 9 OF PALM ROW

Bonding Company _____

Bonding Company Address _____

City _____ State _____ Zip _____

Architect/Engineer's Name _____

Architect/Engineer's Address _____

Mortgage Lender's Name _____

Mortgage Lender's Address _____

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

OWNERS AFFIDAVIT: 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.

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.

[Signature] _____ 6/9/98
Owner or Agent Date

[Signature] _____ 6/9/98
Contractor Date

COUNTY OF MARTIN
STATE OF FLORIDA

Sworn to and subscribed before me this 9th day of June 1998 by
R. Diaz who: [] is/are personally known to me, or [] has/have produced
Fl. d.L. as identification, and who did not take an oath.

Name: [Signature]

Typed, printed or stamped

(NOTARY SEAL)

OFFICIAL NOTARY SEAL
JOAN H BARROW
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC423705
MY COMMISSION EXP. NOV. 30, 1998

I am a Notary Public of the State of Florida having a
commission number of _____ and my
commission expires: _____

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 9th day of June 1998 by
R. Diaz who: [] is/are personally known to me, or [] has/have produced
Fl. d.L. as identification, and who did not take an oath.

Name: [Signature]

Typed, printed or stamped

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OFFICIAL NOTARY SEAL
JOAN H BARROW
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC423705
MY COMMISSION EXP. NOV. 30, 1998

I am a Notary Public of the State of Florida having a
commission number of _____ and my
commission expires: _____

Certificate of Competency Holder

Contractor's State Certification or Registration No. _____

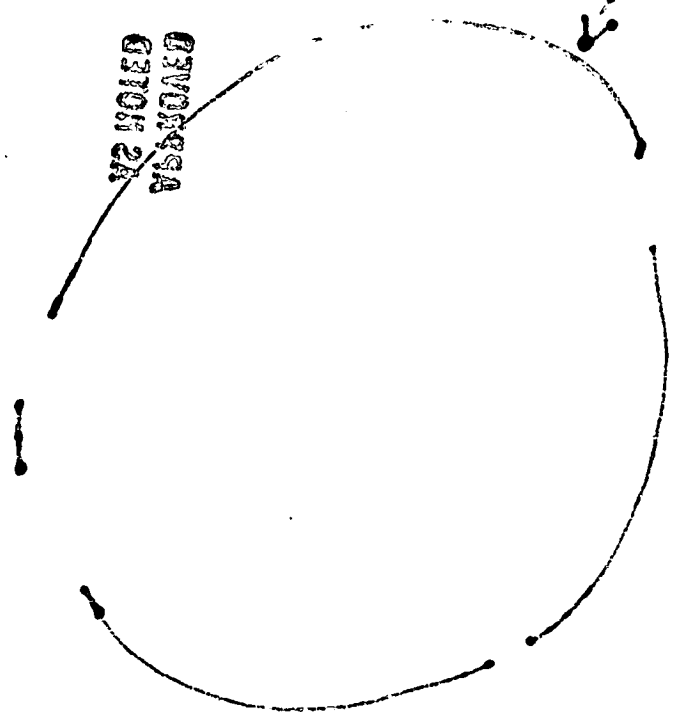
Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY _____ Permit Officer

_____ Building Commissioner

3112.2

BYONDRA
BYONDRA



8933

GATES - FENCE



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:	8933	DATE ISSUED:	JUNE 25, 2008
SCOPE OF WORK:	GATES – FENCE		
CONDITIONS :			
CONTRACTOR:	OB		
PARCEL CONTROL NUMBER:	133841005000000903	SUBDIVISION	PALM ROW – LOT 9
CONSTRUCTION ADDRESS:	15 PALM RD		
OWNER NAME:	DIAZ		
QUALIFIER:	OB	CONTACT PHONE NUMBER:	283-7870

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.

RECEIVED
DATE: 6-23-08
TOWN OF SEWALL'S POINT

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

Date: _____

OWNER/TITLEHOLDER NAME: CATHERINE DIAZ Phone (Day) (772) 2837870 (Fax) -NA-

Job Site Address: 15 PARM Rd City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) _____ Parcel Number: _____

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

Scope of work: REPLACE 10 YR. OLD P.T. GATES (1) SO. SIDE (1) NO. SIDE

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: \$ 48500
(Notice of Commencement required when over \$2500 prior to first inspection)
Is subject property located in flood hazard area? V A9 A8 X NO
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

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

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

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

State Registration Number: _____ State Certification Number: _____ Municipality License Number: _____

PROJECT SUPERINTENDANT: _____ CONTACT NUMBER: _____

ARCHITECT -NA- Lic.#: _____ Phone Number: _____

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

ENGINEER _____ Lic# _____ Phone Number: _____

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

AREA SQ. FOOTAGE (W /SEWER & ELECTRIC): Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: _____

Carport: _____ Total Under Roof _____ Wood Deck: _____ 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. 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.

OWNER OR AUTHORIZED AGENT SIGNATURE (required) _____ CONTRACTOR SIGNATURE (required) _____

State of Florida, County of: Martin On State of Florida, County of: _____

This the 23rd day of June, 2008 This the _____ day of _____, 2008

by Catherine Diaz who is personally known to me or produced _____ by _____ who is personally known to me or produced _____

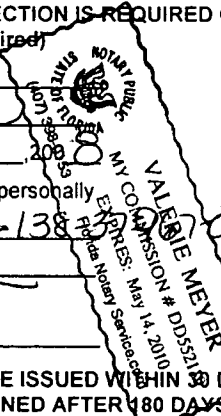
as identification. Valued Meyer as identification. _____

My Commission Expires: _____ My Commission Expires: _____

My Commission Expires: _____ My Commission Expires: _____

My Commission Expires: _____ 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

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

Summary

print Address 1 of 8

Parcel Info

Summary

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

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
13-38-41-005-000-00090-3	Confidential Information	27815Address		0	1

Summary

Property Location Confidential Information
Tax District 2200 Sewall's Point
Account # 27815
Land Use 101 0100 Single Family
Neighborhood 120400
Acres 0.370

Legal Description
Property Information
 PALM ROW REVISED & AMENDED
 LOT 9 OR 349/1477

Search By

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

Owner Information

Owner Information
 Confidential Owner
 Confidential Owner

Mail Information

Confidential Information
 STUART FL 34996

Assessment Info

Front Ft. 0.00

Market Land Value \$290,000
Market Impr Value \$418,620
Market Total Value \$708,620

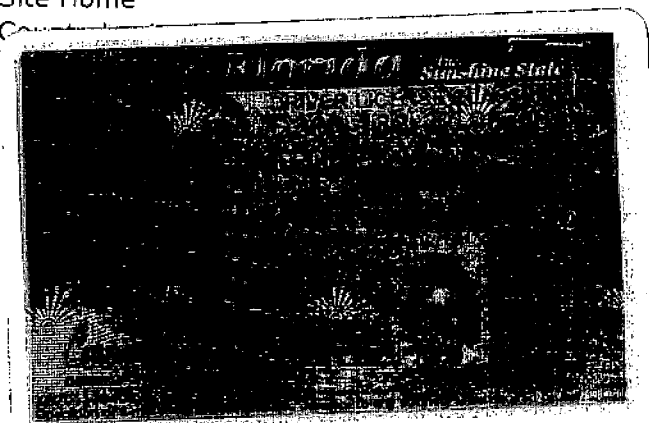
Site Functions

Property Search

- Contact Us
- On-Line Help
- County Home
- Site Home

Recent Sale
Sale Amount \$0

Sale Date 7/30/1999
Book/Page 1412 1893



st | << First < Previous Next > Last >>

Disclaimer / Privacy Statement

Data updated on 05/01/2008

Powered by
MANATRON



Martin County, Florida

Laurel Kelly, C.F.A

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

Summary

print [navigation icons] Address 1 of 8

Parcel Info

Summary

- Land
- Residential
- Improvement
- Commercial
- Image
- Sales & Transfers
- Assessments →
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Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
13-38-41-005-000-00090-3	Confidential Information	27815Address		0	1

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- Map →

Owner Information
Owner Information
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 Confidential Owner

Mail Information
 Confidential Information
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Sale Amount \$0

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

Legal disclaimer / Privacy Statement

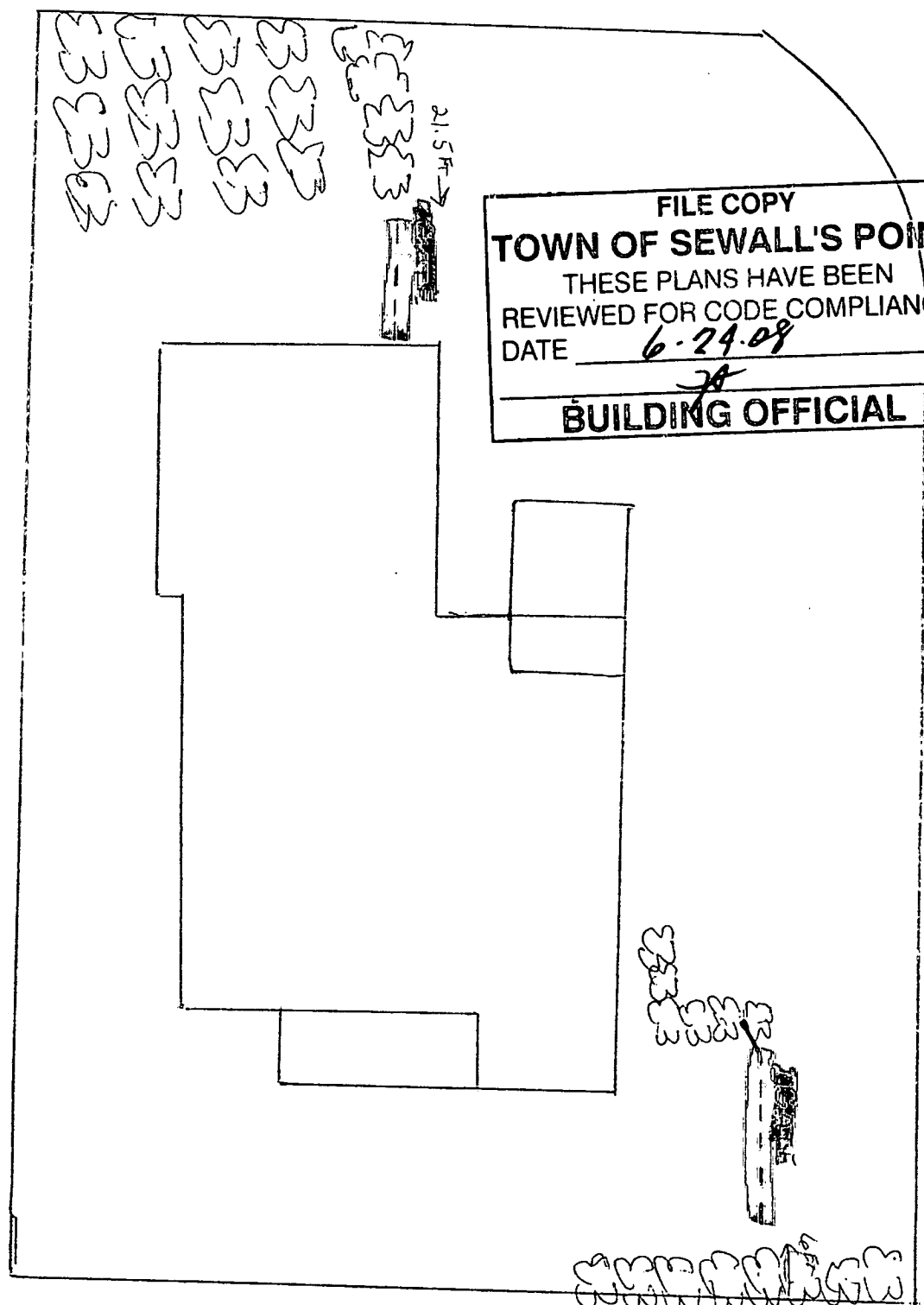
Data updated on 05/01/2008



RECEIVED
DATE: 6-24-08
TOWN OF SEWALL'S POINT

PALM ROAD

-N-



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE 6-24-08
JA
BUILDING OFFICIAL

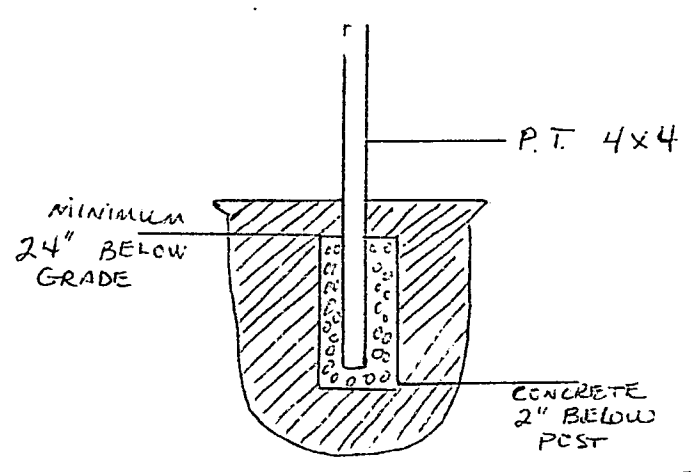
-W-

15 PALM ROAD

SOUTH RIVER ROAD

-S-

HEIGHT / TYPE OF GATES / MATERIALS &
GATE SUPPORT
FOOTER



TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FIELD COPY

GATES
 56 1/2' ↑ NO. SIDE
 71 1/2' ↑ SO. SIDE
 5 1/2' x 1/2' SLATES

PRESSURE
 TREATED

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

P.T. WOOD USED THROUGHOUT WITH
 STAINLESS STEEL EXTERIOR SCREWS,
 TURNBUCKLES AND LARGE SIZE HINGES



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

FENCE and or POOL BARRIER CHECKLIST

A document review will be performed on the following items prior to the submittal of a permit application. Failure to submit these items will result in the application package returned to the applicant until the deficient documents are included. This review sheet must accompany the application submittal.

Please make sure you have ALL required copies before submitting permit application

- ___ 1 Copy Completed permit application
- ___ 2 Copies Survey or site plan showing the following:
 - o All existing structures on property
 - o Location of proposed fence
 - o Setbacks from the fence to property lines
 - o Height & type of fence
 - o Location of all easements
 - o Street & house number on site plans

DO NOT SUBMIT PREVIOUSLY STAMPED SITE PLANS

- 2 Copies support post footer sketch indicating size of footers. Fences to be used as a Pool Barrier (other than chain link fence) must include an accurate sketch or drawing indicating barrier requirement compliance.
- ___ 2 Copies, if fence crosses any easement, Easement agreement from all utility Companies are required. Agreement form included in permit package.

Typical Fence Footer

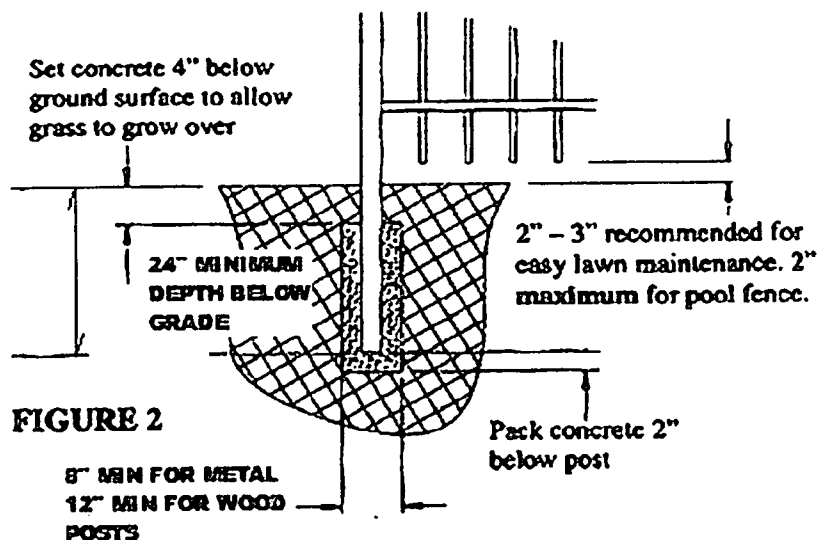


FIGURE 2



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

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

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

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

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

Owner/Builder Applicant Name: CATHERINE DIAZ

Site address of the proposed building work: 15 PALM RD.

Name of legal title owner of the address above: CATHERINE DIAZ

Describe the scope of work for the proposed new construction: REPLACEMENT OF TWO PRIVACY GATES, WHICH STAND ALONE. THERE IS NO FENCING ON THE PROPERTY

Name of Architect of Record: NA Structural Engineer of Record: NA

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

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

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

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

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

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

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

Electric: NA Plumbing: NA HVAC: NA

Other: _____

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

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

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

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

THIS IS 2 WOODEN REPLACEMENT GATES - PRIVACY 10 YR. OLD STAND ALONE GATES - PRIVACY



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

OWNER/BUILDER DISCLOSURE STATEMENT

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

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



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

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

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

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

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

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

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

ON THIS 23 DAY OF June, 2008.

PROPERTY ADDRESS 15 Palm Rd.

CITY Stuart (Sewall's Pt) STATE Fl. ZIP 34996

Catherine Diaz
SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 23rd DAY OF June 2008

BY Catherine Thompson Diaz

PERSONALLY KNOWN _____

OR PRODUCED ID

TYPE OF ID FD6#D200-138-3967-0

Valerie Meyer
NOTARY SIGNATURE

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~Thurs~~ Thurs 6-26, 2008

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8735	Stark	huro eng.	PASS	
3 AM	87 S River Rd Emil LaVula	planter wall (SOUTH SIDE OF POOL)	PASS	INSPECTOR: <i>AM</i>
8709	Durante 48 S Sewalls Lot 27	on-progers wc?		
	VASKO	METER	FAIL	
1	98 S. RIVER	8:15		INSPECTOR: <i>AM</i>
8933	15 Palm Rd OB	Final fence gates	PASS	CLOSE
2	15 Palm Rd OB			INSPECTOR: <i>AM</i>
8589	Hardin	in-progers	—	CANCEL
4	27 S River Rd Station			INSPECTOR: <i>AM</i>
8820	Jerhane	plumbing	CANCEL	
5	64 N River TMC			INSPECTOR:
6		NO Permit	—	WILL APPLY FOR PERMIT
CE	133 S River Rd	(Plumbing)		INSPECTOR:
OTHER:	DURANTE			
8709	48 S SPIL	ROOF FINAC	PASS	CLOSE
	LATITUDE 27			<i>AM</i>

9933

SKYLIGHT

STOP WORK ORDER

DATE: 11-15-11

ADDRESS: 15 PALM RD

OWNER/CONTRACTOR is hereby notified to STOP WORK immediately upon reading this notice.

The work described below requires a permit:

INSTALLATION OF SKYLIGHT

REQUIRES A BUILDING PERMIT

2ND ADVISEMENT

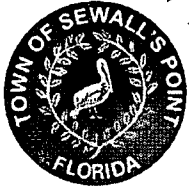
DRY-IN ROOF AND SAFE OFF
THEN STOP WORK UNTIL PERMIT
IS SECURED

Continued work from the date of this notice will constitute additional fines and prosecution through the Sewall's Point Code Enforcement Board and/or the State Licensing Board.

JANN ADAMS 201-2221

BUILDING OFFICIAL OR INSPECTOR

**DO NOT REMOVE THIS NOTICE
UNTIL PERMIT IS OBTAINED!**



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:	9933	DATE ISSUED:	11-17-2011
SCOPE OF WORK:	SKYLIGHT		
CONTRACTOR:	TRIUNE BUILDERS		
PARCEL CONTROL NUMBER:	133841-005-000-000903	SUBDIVISION:	Hansel's Grant Lot 9
CONSTRUCTION ADDRESS:	15 PALM ROAD		
OWNER NAME:	KATHY DIAZ		
QUALIFIER:	ROBERT AUSTIN	CONTACT PHONE NUMBER:	260-7507

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:	9933		
ADDRESS	15 PALM ROAD		
DATE: 11/17/11	SCOPE OF WORK	AD SKYLIGHT	
SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$	
Total square feet air-conditioned space: (@ \$121.75 per sq. ft.)		s.f.	
Total square feet non-conditioned space, or interior remodel: (@ \$59.81 per sq. ft.)		s.f.	
Total square feet remodel with new trusses: @ \$90.78 per sq. ft.		\$	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$75 per insp.)			
Total number of inspections (Value < \$200K) @\$75 ea.		\$	
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)			
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	1,898.00
Total number of inspections @ \$75.00 each	2		237.88
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	3.56
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	3.56
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	250.00

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 11-12-11 Page ___ of ___

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9907	Crouch	A/C	will	CME APPROV 2/5
②	103 Henry Sewall's N/S Air	Final	have \$4500 per Nick	PASS INSPECTOR <i>A</i>
9906	Vance	Inspection		
Asst 12/13/11	12 Wendy Lane Vance O/B	R. Plumb R. GLENN V.G. Plumb	PASS	INSPECTOR <i>A</i>
9869	Bauer	A/C Final		
11/12	105 Abbile Ct. Stephen & Denny		PASS	CLOSE INSPECTOR <i>A</i>
9901	DEMAKARIAN	R. ELECTRIC		
	19 Castle Hill way S. Conway		PASS	INSPECTOR <i>A</i>
9918	Bonnes	Initial		
	17 W High Birt Cardinal Ref in Dry-IN	SNAPPING &	PASS	INSPECTOR <i>A</i>
9933	TECH LOGIX, COM 49 W. ALG A POINT			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 RECEIPT

PERMIT NUMBER:	9917
ADDRESS	98 NORTH SEWALL'S POINT ROAD
DATE 10/28/2011	SCOPE OF WORK REBUILD

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	979,000.00
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)		\$	19,580.00
Building fee: (1% of construction value < \$200K + \$75 per insp.)			

Town of Sewall's Point BUILDING PERMIT APPLICATION

Date: 11/15/11

Permit Number: _____

OWNER/TITLEHOLDER NAME: Diaz, Cathy

Phone (Day) 772.214.0880 (Fax) N/A

Job Site Address: 15 Palm Road

City: Stuart State: FL Zip: 34996

Legal Description _____ Parcel Control Number: _____

Owner Address (if different): Same

City: _____ State: _____ Zip: _____

SCOPE OF WORK (PLEASE BE SPECIFIC):

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: \$ 1,898.-
(Note: Conversion required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? E10 _____ 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: Triune Builders, Inc. (Robins) Phone: 772.287.1949 Fax: 772.287.1948

Qualifiers name: Robert A. Austin Street: P.O. Box 631 City: Seawall's Point State: FL Zip: 33475

State License Number: CCC1327362 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Rob Austin Phone Number: 772.260.7507

DESIGN PROFESSIONAL: _____ Fla. License# _____

Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

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

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

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

NOTICES TO OWNERS AND CONTRACTORS:

1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEAWALL'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 30-98.
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. 106.4.1, 106.4.1.1 - 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 SEAWALL'S POINT DURING THE BUILDING PROCESS.

OWNER NOTICED SIGNATURE: (required per 713.135 F.S.)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)

*See proposal (signed by owner)

State of Florida, County of: _____

On This the _____ day of _____, 2011

by _____ who is personally known to me or produced _____

As Identification, _____

Notary Public

My Commission Expires: _____

CONTRACTOR NOTICED SIGNATURE: (required per 713.135 F.S.)

[Signature]

State of Florida, County of: MARTIN

On This the 15 day of NOVEMBER, 2011

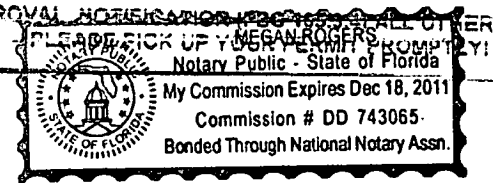
by _____ who is personally known to me or produced _____

As Identification, _____

Notary Public

My Commission Expires: Dec 18, 2011

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL. NOTIFICATION IS REQUIRED. ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2)



Scope of Work Proposal



Office: 772-219-ROOF (7663)
Fax: 772-287-1948
Email: TriuneRoofing@yahoo.com
Web: www.TriuneRoofing.com
P.O. Box 631, Hobe Sound, FL 33475

October 07, 2011

Reference #: 1618-101

Due Date: 11/6/2011
#0#1340

C Kathy Diaz
15 Palm Road
Sewalls Point
Stuart, FL 34996

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Job Name:

C Kathy Diaz
15 Palm Road
Sewalls Point
Stuart, FL 34996

772-214-0880 MAIN

Job Tel 772-214-0880 MAIN

We Hereby Submit Specifications And Estimates For:

SOLAR TUBE REPLACEMENT:

1. REMOVE TWO (2) EXISTING SOLAR TUBES.
2. REMOVE TILE AT BASE OF EXISTING SOLAR TUBES DOWN TO PLYWOOD SHEATHING.
3. INSTALL TWO (2) NEW 21" CURB MOUNT SOLAR TUBES. NOTE: EACH SOLAR TUBE INCLUDES 72" OF TUBING.
4. INSTALL NEW 30# ASTM FELT OVER EXISTING PLYWOOD.
5. INSTALL A MODIFIED TILE UNDERLAYMENT OVER NEW FELT USING A MODIFIED ADHESIVE. AT THIS STAGE, ALLOW ROOF TO REMAIN OPEN AT LEAST TWO WEEKS FOR NEW MATERIAL TO SET-UP AND CURE.
6. INSTALL EXISTING TILE USING POLYSET FOAM TILE ADHESIVE. INSTALL OWNER SUPPLIED TILE, IF NECESSARY.
7. INCLUDES CLEAN-UP, LABOR AND MATERIALS.

NOTE: 19.5 TOTAL MAN HOURS ALLOWED, INCLUDING REMOVAL AND REINSTALLATION OF TILE. AN ADJUSTMENT WILL BE MADE TO TOTAL CONTRACT AMOUNT IF MORE OR LESS TIME IS NEEDED.

RESPECTFULLY SUBMITTED: ROB AUSTIN

We propose hereby to furnish material and labor - complete in accordance with the above specifications, for the sum of: \$1,898.00

#950 accept. 10/18/11, ck# 1478.

Payment to be made as follows:

50% acceptance / 50% completion

All material is guaranteed to be as specified. All work to be completed in a professional manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders and will become an extra charge over and above the estimate. All agreements contingent upon delays beyond our control. Purchaser agrees to pay all costs of collection, including attorney's fees. This proposal may be withdrawn by us if not accepted by the above due date.

Authorized
Signature

Acceptance
Signature

Date

10-14-11



BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1603
MIAMI, FLORIDA 33130-1563
(305) 375-2901 FAX (305) 372-6339

NOTICE OF ACCEPTANCE (NOA)

www.miamidade.gov/buildingcode

Sun-Tek Manufacturing, Inc.
10303 General Drive.
Orlando, Florida 32824

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

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

DESCRIPTION: Sun-Tek Tubular Skylight

APPROVAL DOCUMENT: Drawing No. TL-22001, titled "21", 14" & 10" Tube Light/Tubular Skylights", sheets 1 through 7 of 7, prepared by Sun-Tek Industries, Inc., dated 02/12/09, signed and sealed by James D. Wells, Jr., 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 Division.

MISSILE IMPACT RATING: Large and Small Missile Impact Resistant.

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 # 08-0417.01 and consists of this page 1 and evidence page E-1, as well as approval document mentioned above.

The submitted documentation was reviewed by Carlos M. Utrera, P.E.



[Signature]
5/20/09

NOA No 09-0422.01
Expiration Date: May 26, 2013
Approval Date: June 10, 2009
Page 1

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS

1. Drawing No. TL-22001, titled "21", 14" & 10" Tube Light/Tubular Skylights", sheets 1 through 7 of 7, prepared by Sun-Tek Industries, Inc., dated 02/12/09, signed and sealed by James D. Wells, Jr., P.E.

B. TESTS

1. Test reports on
 - 1) Air Infiltration Test, per FBC, TAS 202-94
 - 2) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
 - 3) Water Resistance Test, per FBC, TAS 202-94
 - 4) Large Missile Impact Test per FBC, TAS 201-94
 - 5) Cyclic Wind Pressure Loading per FBC, TAS 203-94
 - 6) Forced Entry Test, per FBC 2411 3.2.1, TAS 202-94along with marked-up drawings and installation diagram of 21" Tube Aluminum Skylights, prepared by National Certified Testing Laboratories, Test Report No. 210-3520-01, dated 03/04/09, signed and sealed by Gerard J. Ferrara, P.E.

C. CALCULATIONS

1. Anchor calculations prepared by J & L Wells Consulting, LLC, dated 04/14/09, signed and sealed by James D. Wells, Jr., P.E.

D. QUALITY ASSURANCE

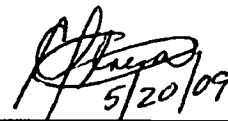
1. Miami Dade Building Code Compliance Office (BCCO)

E. MATERIAL CERTIFICATIONS

1. Notice of Acceptance No. 08-0305.02, issued to SABIC Innovative Plastics, for their Lexan Sheet Products, approved on 04/24/08 and expiring on 07/17/13.
2. Notice of Acceptance No. 05-0907.03, issued to Palram Americas, Inc., for their Corrugated and Flat Polycarbonate Panels, approved on 08/31/06 and expiring on 01/22/2011.

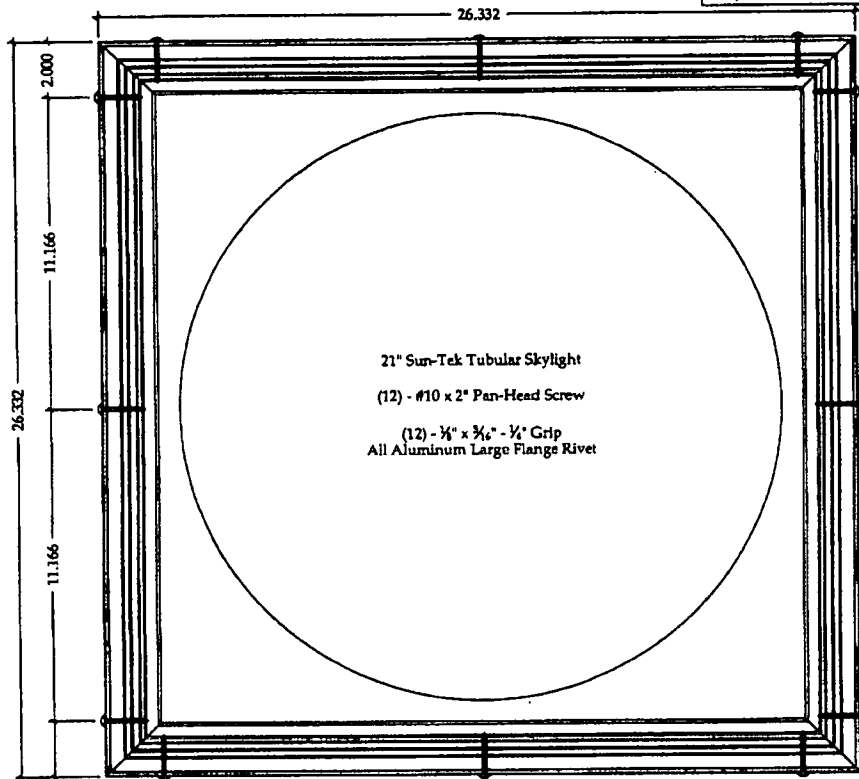
F. STATEMENTS

1. Code compliance statement issued by J & L Wells Consulting, LLC, dated 04/14/09, signed and sealed by James D. Wells, Jr., P.E.



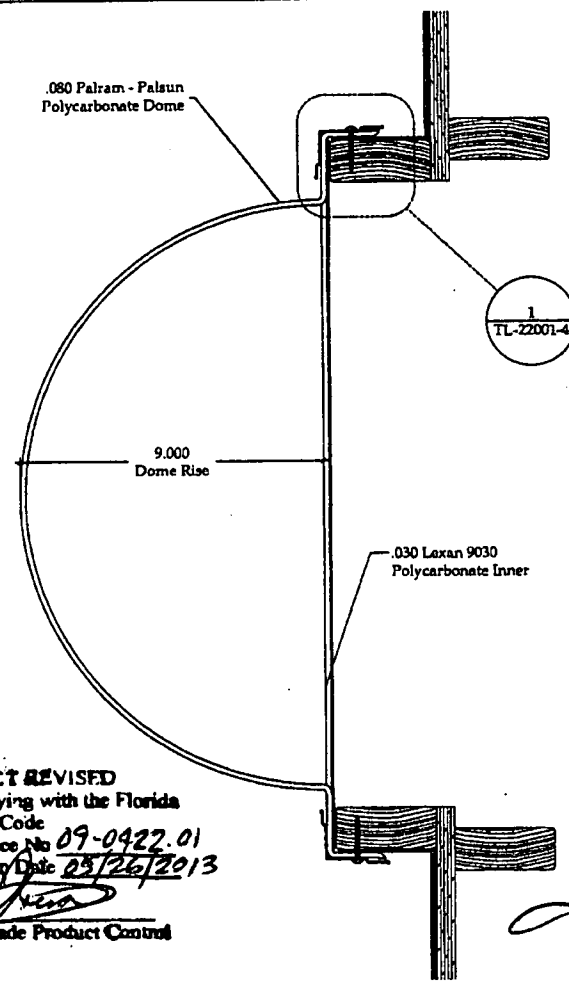
5/20/09

Carlos M. Utrera, P.E.
Product Control Examiner
NOA No 09-0422.01
Expiration Date: May 26, 2013
Approval Date: June 10, 2009



- Note:
- (1) All Roofing details Shall Comply With Chapter 15 Of The Florida Building Code.
 - (2) 4" Minimum Distance From Angle Lip To Roof Surface Is For Shingle Or B.U.R. Without Insulation. For Insulation And Tile Roof Add Tile Height And Insulation Thickness To 4" Minimum Height.
 - (3) Anchor To Be Made Of Non-Corrosive Material, Compatible With Aluminum.

Curb To Deck Mounting Requirements
 #10 x 2 1/2" Deck Screw
 21" - (4) Per Side 16 Total
 Positive Design Load 65 psf.
 Negative Design Load 65 psf.
 Water Test Pressure .15 psf.
 Dome Material:
 .080 Palram - Palsun Polycarbonate
 Acceptance No. 05-0907.03
 .030 Lexan 9030 Polycarbonate Inner
 Acceptance No. 08-0305.02



PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 09-0422.01
 Expiration Date 03/26/2013
 By: *[Signature]*
 Miami, Dade Product Control
 Division

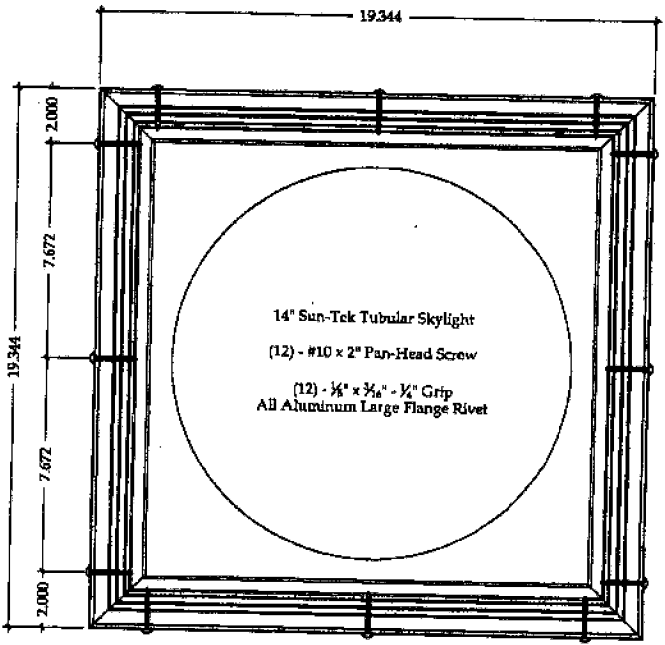
[Signature]
 4/14/09

J & L Wells Consulting LLC
 1345 Unity Court
 Casselberry, FL 32707
 (407) 496-5489
 Certificate of Authorization No. 27162
 James D. Wells, Jr., P.E.
 Professional Engineer No. 53616

1 Plan View - 21" Tubular Skylight
 Scale: 3" = 1'-0"

2 Section View - 21" Tubular Skylight
 Scale: 3" = 1'-0"

REVISION:		REVISION:		PRODUCT NAME:	
DATE:	DATE:	DATE:	DATE:	DATE:	DATE:
				02-12-09	TL-22001
SCALE: AS NOTED				DWG #: TL-22001	
21" TUBE LIGHT			SUN-TEK MANUFACTURING, INC.		
			10303 GENERAL DRIVE		ORLANDO, FL 32824



14" Sun-Tek Tubular Skylight
 (12) - #10 x 2" Pan-Head Screw
 (12) - 1/4" x 3/8" - 1/2" Grip
 All Aluminum Large Flange Rivet

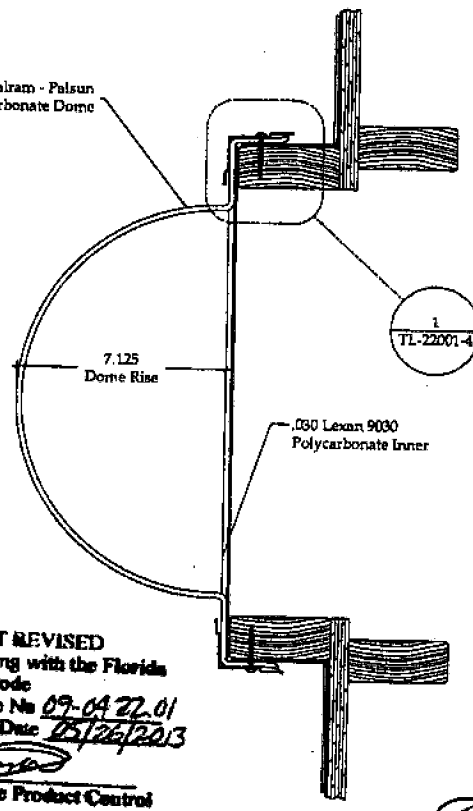
- Note:
- (1) All Roofing details Shall Comply With Chapter 15 Of The Florida Building Code.
 - (2) 4" Minimum Distance From Angle Lip To Roof Surface Is For Shingle Or B.U.R. Without Insulation. For Insulation And Tile Roof Add Tile Height And Insulation Thickness To 4" Minimum Height.
 - (3) Anchor To Be Made Of Non-Corrosive Material, Compatible With Aluminum.

Curb To Deck Mounting Requirements
 #10 x 2 1/2" Deck Screw
 14" - (4) Per Side 16 Total

Positive Design Load 65 psf.
 Negative Design Load 65 psf.
 Water Test Pressure .15 psi.

Dome Material:
 .080 Palram - Palsun Polycarbonate
 Acceptance No. 05-0907 03
 .030 Laxan 9030 Polycarbonate Inner
 Acceptance No. 08-0305 02

.080 Palram - Palsun
 Polycarbonate Dome



PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No 09-04 22.01
 Expiration Date 05/26/2013

[Signature]
 Miami/Dade Product Control
 Division

J & L Wells Consulting LLC
 1345 Unity Court
 Casselberry, FL 32707
 (407) 496-5489
 Certificate of Authorization No. 27162 P

James D. Wells, Jr., P.E.
 Professional Engineer No. 53616

1 Plan View - 14" Tubular Skylight
 Scale: 3/8" = 1'-0"

2 Section View - 14" Tubular Skylight
 Scale: 3/8" = 1'-0"

REVISION	DATE	REVISION	DATE	PRODUCT NAME	SCALE	DWG#
				14" TUBE LIGHT	AS NOTED	TL-22001
	02-12-09					

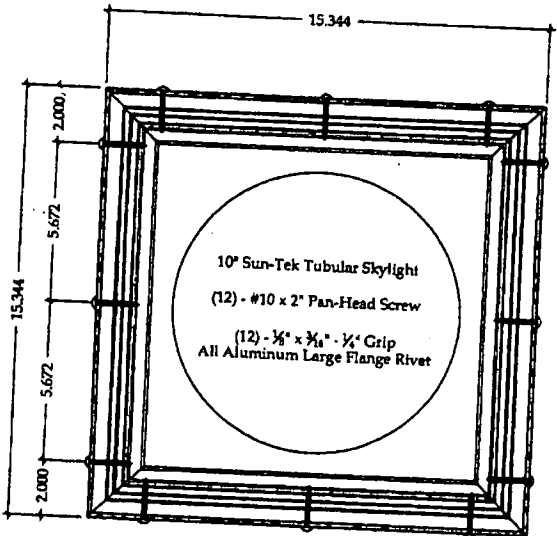
SUN-TEK MANUFACTURING, INC.
 10303 GENERAL DRIVE
 ORLANDO, FL 32824

PART NAME: EXTERIOR DOME TUBE LIGHT / METRO DADE

DRAWN BY: KB

SHEET #: 3 OF 7

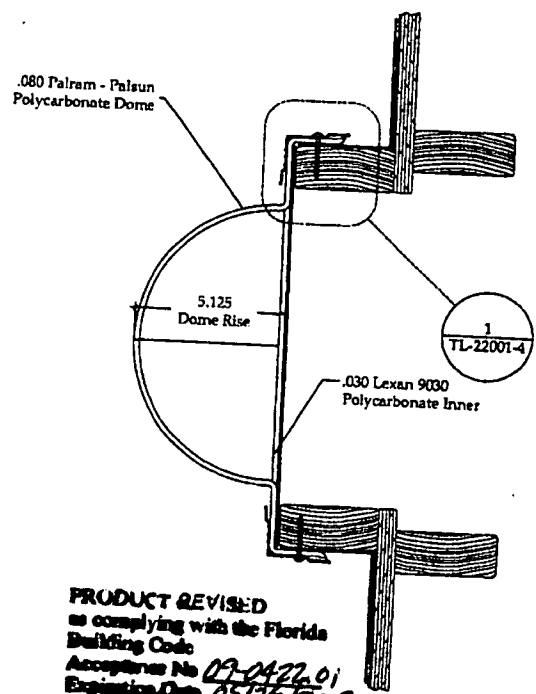
DWG #: TL-22001-3



- Note:
- (1) All Roofing details Shall Comply With Chapter 15 Of The Florida Building Code.
 - (2) 4" Minimum Distance From Angle Lip To Roof Surface Is For Shingle Or B.U.R. Without Insulation. For Insulation And Tile Roof Add Tile Height And Insulation Thickness To 4" Minimum Height.
 - (3) Anchor To Be Made Of Non-Corrosive Material, Compatible With Aluminum.

Curb To Deck Mounting Requirements
 #10 x 2 1/2" Deck Screw
 10" - (4) Per Side 16 Total

Positive Design Load 65 psf.
 Negative Design Load 65 psf.
 Water Test Pressure .15 psf.
 Dome Material:
 .080 Palram - Palsun Polycarbonate
 Acceptance No. 05-0907.03
 .030 Lexan 9030 Polycarbonate Inner
 Acceptance No. 08-0305.02



PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 05-0422.01
 Engineering Date 05/26/2013
 By: [Signature]
 Metro Dade Product Control
 Division

[Signature]
 4/14/09

J & L Wells Consulting LLC
 1345 Unity Court
 Casselberry, FL 32707
 (407) 496-5489
 Certificate of Authorization No. 27162

James D. Wells, Jr., P.E.
 Professional Engineer No. 53616

1 Plan View - 10" Tubular Skylight
 Scale: 3/4" = 1'-0"

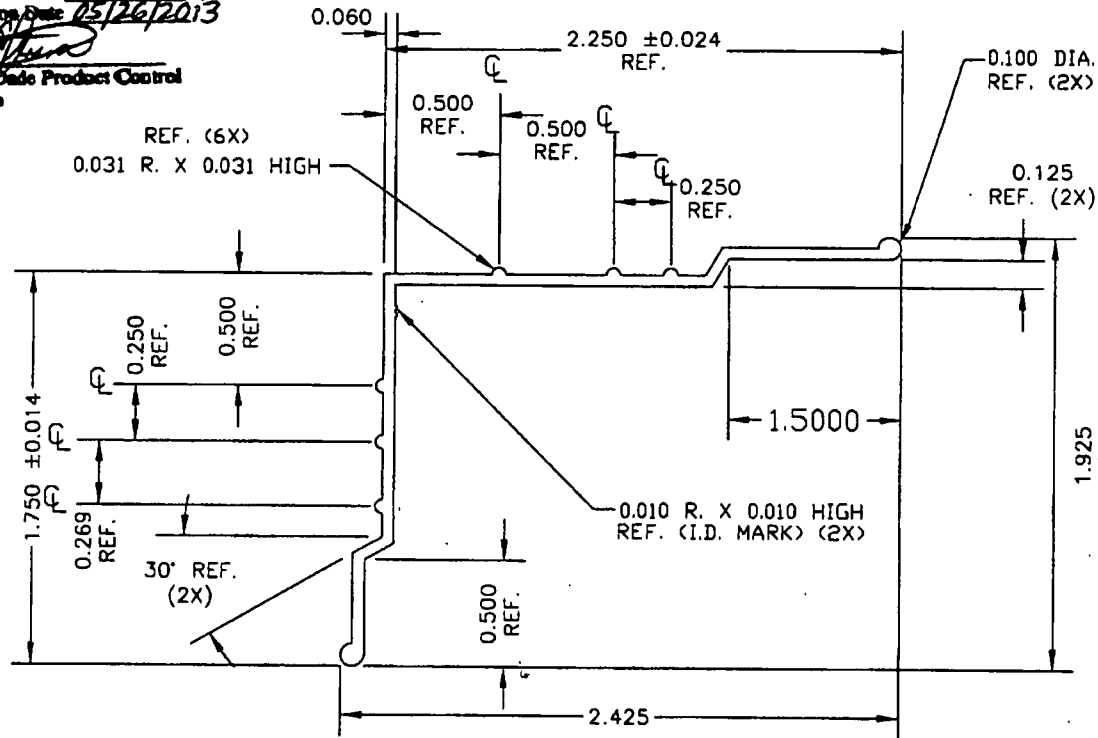
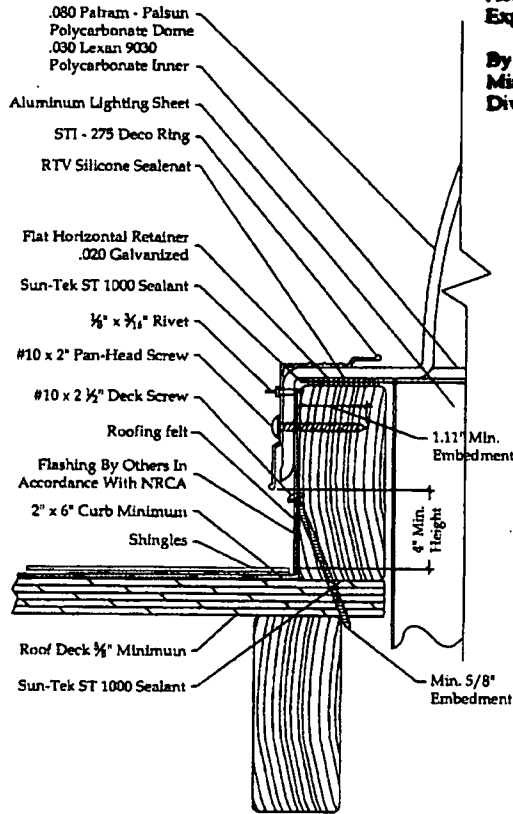
2 Section View - 10" Tubular Skylight
 Scale: 3/4" = 1'-0"

REVISION:	DATE:	DESCRIPTION:	DATE:	PRODUCT NAME:	DATE:	SCALE:	DWG #:
				10" TUBE LIGHT	02-12-09	AS NOTED	TL-22001

SUN-TEK MANUFACTURING, INC.
 10303 GENERAL DRIVE
 ORLANDO, FL 32824

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. *09-0472-01*
 Expiration Date *03/26/2013*

By *[Signature]*
 Miami Dade Product Control
 Division



Material: Solid Aluminum, 6063 T6 grade
 .264 wt./ft.

J & L Wells Consulting LLC
 1345 Unity Court
 Casselberry, FL 32707
 (407) 496-5489
 Certificate of Authorization No. 27162

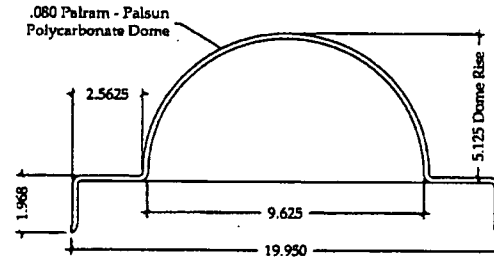
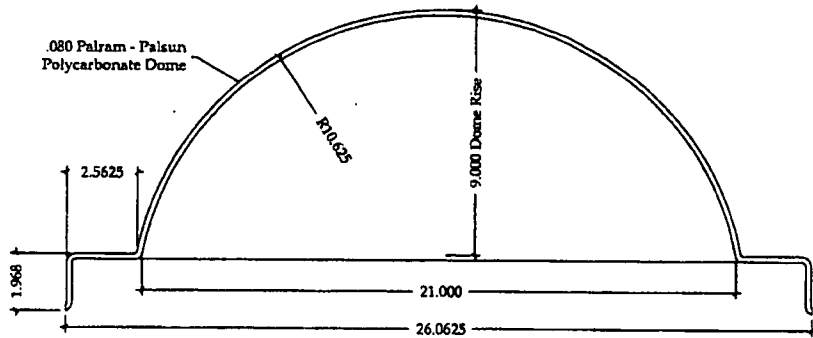
James D. Wells, Jr., P.E.
 Professional Engineer No. 53616

1 Enlarged Detail - Tubular Skylight Mounting Connection
 Scale: 3" = 1'-0"

2 Enlarged Detail - Tubular Skylight Mounting Clip STI-275
 Scale: 1'-0" = 1'-0"

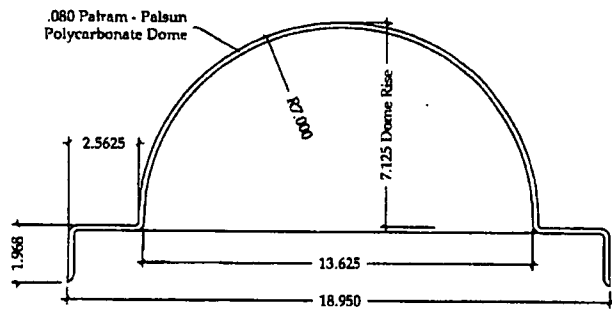
[Signature]
 4/14/10

REVISION:		REVISION:		PRODUCT NAME:		DATE:		SCALE:		DWG #:	
				21", 14" & 10" TUBE LIGHT		02-12-09		AS NOTED		TL-22001	
SUN-TEK MANUFACTURING, INC.						10303 GENERAL DRIVE		ORLANDO, FL 32824			



1 Enlarged Detail - 21" Tubular Skylight Dome
Scale: 3" = 1'-0"

3 Enlarged Detail - 10" Tubular Skylight Dome
Scale: 3" = 1'-0"



2 Enlarged Detail - 14" Tubular Skylight Dome
Scale: 3" = 1'-0"

J & L Wells Consulting LLC
 1345 Unity Court
 Casselberry, FL 32707
 (407) 496-5489
 Certificate of Authorization No. 27162
 James D. Wells, Jr., P.E.
 Professional Engineer No. 53616

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No 09-0422-01
 Expiration Date 05/26/2013
 By: *[Signature]*
 Miami Dade Product Control
 Division

[Handwritten Signature]
4/14/09

REVISION:		REVISION:		PRODUCT NAME:		DATE:		SCALE:		DWG #:	
				21", 14" & 10" TUBE LIGHT		02-12-09		AS NOTED		TL-22001	
SUN-TEK MANUFACTURING, INC.						10303 GENERAL DRIVE		ORLANDO, FL 32824			

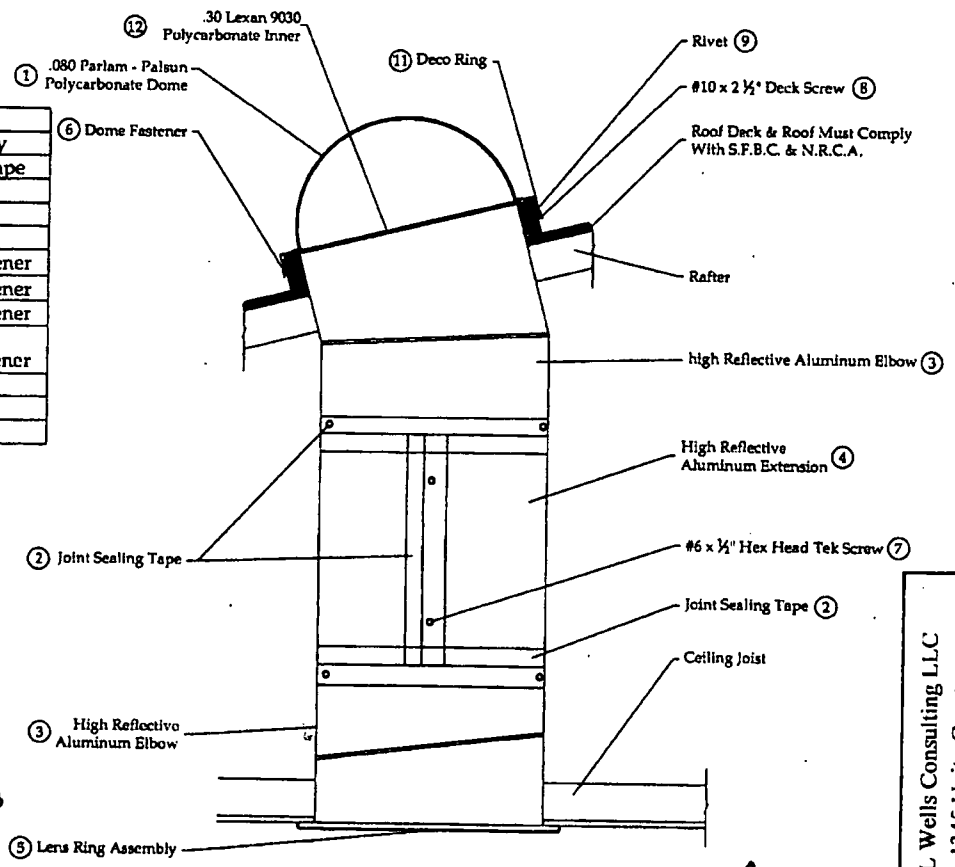
Item	Part Name	Description	Vendor
1	Exterior Dome	.080 Palram - Palsun	R.S. Supply
2	*Sealing Tape	Duct Tape (2")	Venture Tape
3	*Elbows	MIRO 4	Alanod
4	*Connector	MIRO 4	Alanod
5	Lens Ring Assembly	Interior Dome	
6	#10 PHS x 2"	Fasteners Exterior Dome	Merit Fastener
7	*#6 x 1/2" Hex Tek Screw	Tube Fasteners	Merit Fastener
8	#10 x 2 1/2" Deck Screws	Curb Anchors	Merit Fastener
9	1/8" x 3/16" - 1/4" Grip All Alum Large Flange Rivet	Deco Ring Fastener	Merit Fastener
10	*.020 Galvanized	Tube Retainer	
11	Deco Ring	Extrusion	Loxscreen
12	Inner Panel	.030 Lexan-9030	Sabic

* This Approval Is Limited To The Dome And The Attachment To The Structure And The Roof. All Others Are Not Part Of This Approval.

Dome Specifications:

21" Dome Height =	9"
14" Dome Height =	7 1/8"
10" Dome Height =	5 1/8"

PRODUCT REVISED
 as complying with the Florida Building Code
 Acceptance No. 09-0422-01
 Expiration Date 05/26/2013
 By [Signature]
 Miami Dade Product Control Division



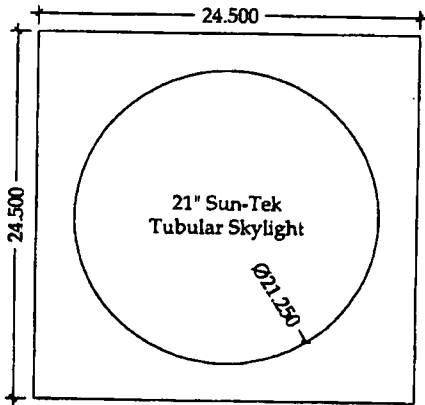
1 Section View - Tubular Skylight Assembly
 Scale: 3" = 1'-0"

James D. Wells, Jr., P.E.
 Professional Engineer No. 53616
 P.

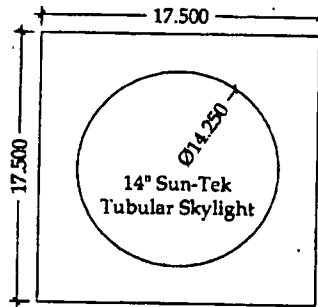
J & L Wells Consulting LLC
 1345 Unity Court
 Casselberry, FL 32707
 (407) 496-5489
 Certificate of Authority No. 27162

[Signature]
 4/14/09

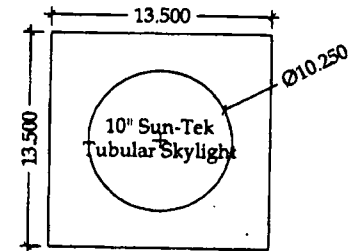
J & L Wells Consulting LLC
 1345 Unity Court
 Casselberry, FL 32707
 (407) 496-5489
 Certificate of Authorization No. 27162
 James D. Wells, Jr., P.E.
 Professional Engineer No. 53616



1 Enlarged Detail - 21" Tube Retainers
 Scale: 3" = 1'-0"



2 Enlarged Detail - 14" Tube Retainers
 Scale: 3" = 1'-0"



3 Enlarged Detail - 10" Tube Retainers
 Scale: 3" = 1'-0"

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 09-0422.01
 Expiration Date 03/26/2013
 By: *[Signature]*
 James D. Wells, Jr. Product Control
 Division

[Signature]
 4/1/09

REVISION:		REVISION:		PRODUCT NAME		DATE		SCALE		DWG#		SUN-TEK MANUFACTURING, INC.	
				21", 14" & 10" TUBE LIGHT		02-12-09	AS NOTED	TL-22001	10303 GENERAL DRIVE	ORLANDO, FL 32824			

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 11-8-11 Page ___ of ___

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9908	R Fleetwood 34 No River Rd Zane Carter Elec	Fole Inspec SEAGATE BUILDERS	PASS	INSPECTOR <i>[Signature]</i>
9909	Twohey 112 Henry Sewall Zane Carter Elec	Fole Inspec SEAGATE BUILDERS	PASS	INSPECTOR <i>[Signature]</i>
9901	Demarkavian 19 Castle Hill Steve Conway	Roof Metal & DRY-IN	PASS	INSPECTOR <i>[Signature]</i>
10:00	85 N. S Pt Rd	Temp Structures WALK THROUGH	OK	INSPECTOR
9908	Fleetwood 34 No River Rd SEAGATE BUILDERS	STEM WALL	PASS	INSPECTOR
9908	SEAGATE BUILDERS	SKYLIGHT KIT	NO PERMIT	INSPECTOR
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 1/28-11 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9908	Fleetwood	Slab		
After 11 ⁰⁰	34 N. RR	SLAB	PASS	
	Seagate			INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9906	Vance	back,	PASS	
1st AAA	12 Wendy Ln	insulation	PASS	
	OB			INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9932	Palmer	Skylight	PASS	INSPECTOR
PM	15 Palmer Ln	skylight	PASS	INSPECTOR <i>[Signature]</i>
	Truene			

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

10007

GENERATOR, PAD,

ATS & WIRING



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:	10007	DATE ISSUED:	FEBRUARY 13, 2012
SCOPE OF WORK:	INSTALL GENERATOR, PAD, ATS & WIRING		
CONTRACTOR:	ELECTRICAL CONNECTIONS		
PARCEL CONTROL NUMBER:	133841005-000-000903	SUBDIVISION	PALM ROW REV - L 9
CONSTRUCTION ADDRESS:	15 PALM RD		
OWNER NAME:	CONFIDENTIAL		
QUALIFIER:	MIKE PETTINGILL	CONTACT PHONE NUMBER:	283-5792

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

Date: 2/3/12 **BUILDING PERMIT APPLICATION** Permit Number: 10007

OWNER/TITLEHOLDER NAME: CATHERINE DIAZ Phone (Day) 283-7890 (Fax) _____

Job Site Address: 15 PALM RD City: STUART State: FL Zip: 34996

Legal Description PALM AOE REVISED LOT? Parcel Control Number: 1338-41-005-000-000 90 3

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

Scope of work (please be specific): INSTALL BEN, PAD, ATS WIRING

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: \$ 2400.00
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
 Estimated Fair Market Value prior to improvement: \$ _____
 (Fair Market Value of the Primary Structure only, Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company ELECTRICAL CONNECTIONS Phone: 283-5792 Fax: 283-5890

Street: 1209 SE DIXIE CUTOFF RD City: STUART State: FL Zip: 34994

State License Number: EC3001494 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: MIKE PETTENGILL Phone Number: 772 370 4384

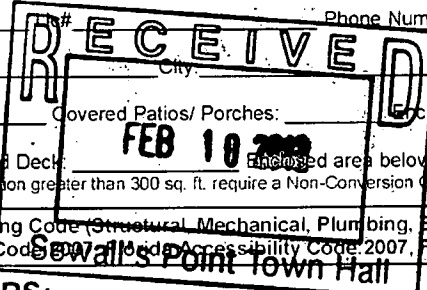
DESIGN PROFESSIONAL: _____ Phone Number: _____

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

AREAS SQUARE FOOTAGE: Living: 2300 Garage: _____ Covered Patios/ Porches: _____ Enclosed Storage: _____

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

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



NOTICES TO OWNERS AND CONTRACTORS:

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

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

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

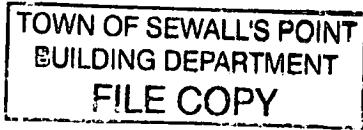
OWNER SIGNATURE: (required)
 OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Catherine Diaz
 State of Florida, County of: Martin
 This the 9 day of Feb, 2012
 by Catherine Diaz who is personally
 known to me or produced _____
 as identification. D200-138-37-9070 FLDL

CONTRACTOR SIGNATURE: (required)
Mike Pettengill
 On State of Florida, County of: Martin
 This the 9 day of Feb, 2012
 by Mike Pettengill who is personally
 known to me or produced _____

Notary Public
Deborah B. Hollister
 My Commission Expires: May 3, 2015

Notary Public
Deborah B. Hollister
 MY COMMISSION # EE 089727
 EXPIRES: May 3, 2015

APPLICANTS 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!



GENERATOR SPECIFICATIONS:

MANUFACTURER: KOHLER MODEL: 20RESA

NEW: X USED: _____ IF USED YEAR MANUFACTURED _____

MAXIMUM ELECTRICAL OUTPUT: 20 KW

PROPOSED ELECTRICAL DEMAND SERVED: 62 AMPS

FUEL SOURCE: GASOLINE _____ DIESEL _____ LP _____ X OTHER _____

TANK SIZE: 500 GALLONS

TANK TYPE: UNDERGROUND X ABOVE GROUND _____ EXISTING TANK _____

IF EXISTING YEAR INSTALLED _____ SUB BASE (ATTACHED TO GENERATOR) _____

MAXIMUM Db: FULL LOAD 65 Db; EXERCISE/TEST: 62 Db

GENERATOR LOCATION:

PROPOSED CLEARANCES TO STRUCTURE: 3 FT (3' min. non-combustibles - 5' combustible)

NFPA 37 (4.1.4) Engines Located Outdoors. Engines, and their weatherproof housings if provided, that are installed outdoors shall be located at least 1.5 m (5 ft) from openings in walls and at least 1.5 m (5 ft) from structures having combustible walls. A minimum separation shall not be required where the following conditions exist:

- (a) The adjacent wall of the structure has a fire resistance rating of at least 1 hour.
- (b) The weatherproof enclosure is constructed of noncombustible materials, and it has been demonstrated that a fire within the enclosure will not ignite combustible materials outside the enclosure.

PROPOSED SETBACKS FROM PROPERTY LINES: FRONT 75-78' ft. SIDE 32' ft. REAR 25' ft.
5' MINIMUM SIDE SETBACK ALLOWED ONLY FOR EXISTING HOMES PRIOR TO 02/27/2007.
Generators installed on newly developed or substantially improved lots after 02/27/2007 must meet current required setbacks. Ref: Ordinance no. 330.

OUTSIDE MOUNTING REQUIRES A MINIMUM OF 4" Poured in place concrete slab, OR OTHER ENGINEERED BASE TO MEET MINIMUM WIND LOADING.

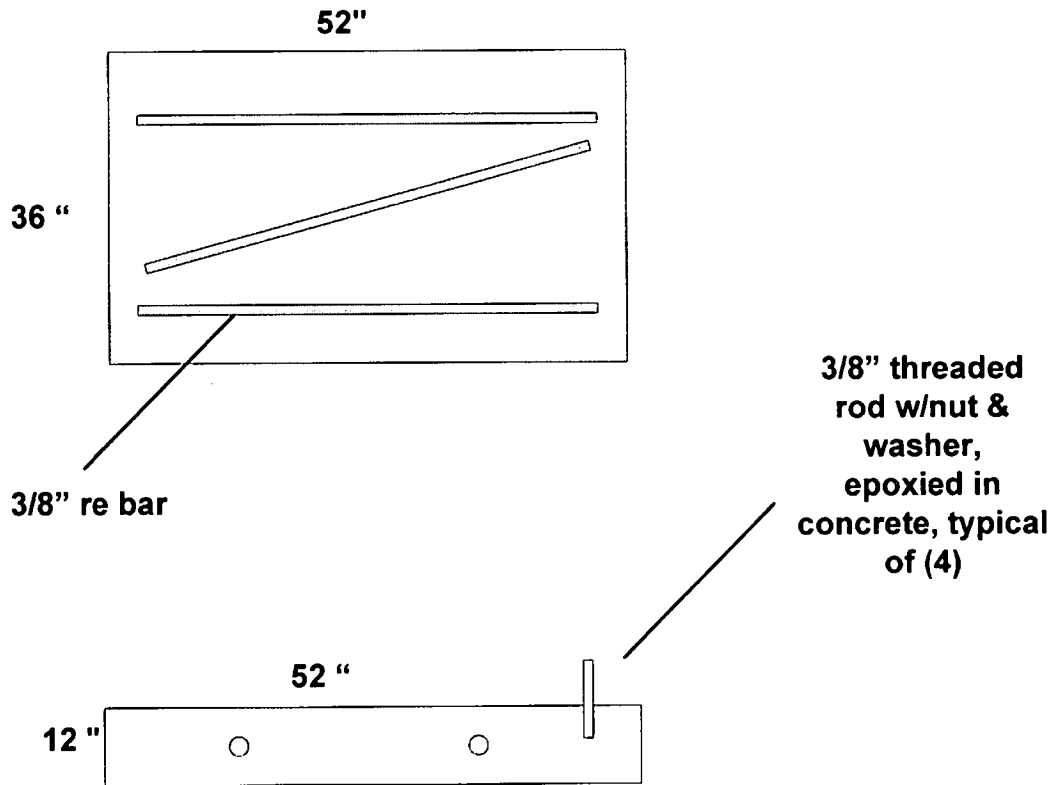
CONCRETE SLAB: NEW X EXISTING _____ OTHER BASE _____

SLAB SIZE: LENGTH 52" WIDTH 36" THICKNESS 4"

GENERATOR ANCHORING SPECIFICATIONS (SIZE, TYPE AND SPACING)
PROVIDE DETAIL BELOW

4 - 3/8" threaded Rod w/ nut + washer - EP0X100 IN concrete

**Diaz
Residence
Concrete Pad
for 20 KW
Generator**



Electrical Connections
1209 SE Dixie Cutoff Rd.
Stuart, Fl. 34994
772-283-5792 fax 283-5890
EC13001494
mike@eleconnections.com

Diaz Residence
15 Palm Rd.
Sewall's Pt., Fl. 34996

Load calculation for Standby Generator System 20 KW Kohler 83 Amps

2300 sq ft x 3	6900 W
(General lighting & receptacle circuits)	
1 refrigerators	780
1 freezer	600
2 Small appliance	3000
1 Microwave	1548
1 a/c condenser (relay to disconnect heat)	4608
water heater (gas)	
stove (gas)	
dryer (gas)	
<hr/>	
Total	14,736 W / 240 V = 61.40 A

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[Sales & Service Locator](#)

[International Locations](#)

Enter Keyword or Model

Search

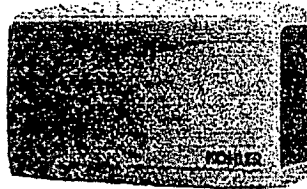


Product & Equipment Quickfinder

Residential Generators / 20RES

Features

- **REMARKABLE POWER QUALITY**
- KOHLER(R) home generators deliver exceptional voltage and frequency regulation along with ultra-low levels of harmonic distortion for optimal power quality, protecting even the most sophisticated electronics.
- **EXTRAORDINARY RELIABILITY**
- Kohler is known for extraordinary reliability and performance and backs that up with an industry-leading 5-year or 2000 hour warranty.
- **POWERFUL PERFORMANCE**
- Exclusive Powerboost technology provides power to easily start and run multiple central air conditioners without dropping power to other appliances
- **EXCLUSIVE 100% CORROSION-PROOF ENCLOSURE**
- Unlike aluminum or steel enclosures, the bold new Kohler design is completely corrosion-proof, even in harsh seaside environments
- **FAST RESPONSE**
- Kohler home generators restore power to your house considerably faster than competitive models.
- **QUIET OPERATION**
- Kohler home generators provide quiet neighborhood-friendly performance. Now with the Model RRT transfer switch, you will experience even quieter operation during the ultra-quiet weekly diagnostic test.
- **MORE SOPHISTICATED DIAGNOSTIC SELF-TEST**
- When used with the Model RRT transfer switch, Kohler's ultra-quiet weekly diagnostic test adapts to variable conditions to ensure the unit is fully exercised and tested.
- Sophisticated fault codes on Kohler's exclusive Residential Digital Control let you know where service may be needed.
- **AN INDUSTRY LEADER IN INNOVATION AND QUALITY**
- Named one of Green Builder's Hot 50 Products of 2010 and also rated the highest quality brand of home generators by 2009 Builder Magazine independent brand study.
- **SUPERIOR FIVE-YEAR LIMITED WARRANTY INCLUDED**
- **DESIGNED FOR EASY INSTALLATION**
- Kohler's easy-connection terminal block provides fast, flexible installations.

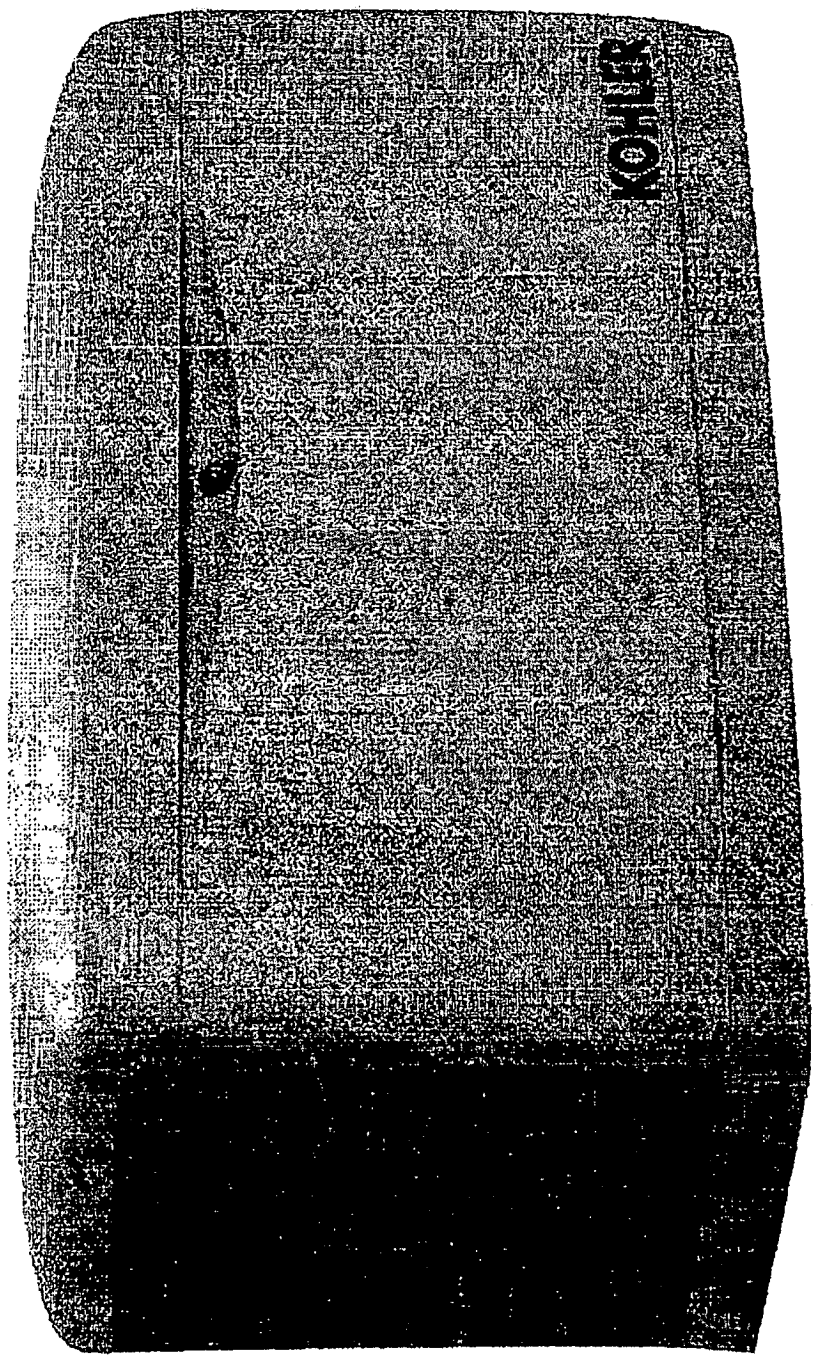


Alternator features:

- Compliance with NEMA, IEEE, and ANSI standards for temperature rise
- Self-ventilated and drip-proof construction.
- Vacuum-impregnated windings with fungus-resistant epoxy varnish for dependability and long life.
- Superior voltage waveform and minimum harmonic distortion from skewed alternator construction
- Digital voltage regulator with $\pm 1.6\%$ no-load to full-load RMS regulation
- Rotating field alternator with static exciter for excellent load response
- Skewed generator construction produces a smooth AC waveform

Engine features:

Copyright © 2010 Kohler Co.



KOHLEN

Application Data

Engine

Engine Specifications	14RES	20RES
Manufacturer	Kohler	
Engine: model, type	CH740 4-Cycle	CH1000 4-Cycle
Cylinder arrangement	V-2	
Displacement, cm ³ (cu. in.)	725 (44)	999 (61)
Bore and stroke, mm (in.)	83 x 67 (3.27 x 2.64)	90 x 78.5 (3.54 x 3.1)
Compression ratio	9:1	8.8:1
Main bearings: quantity, type	2, Parent Material	
Rated RPM	3600	
Max. engine power at rated rpm, kW (HP)		
LP vapor, 60 Hz	17.6 (23.6)	23.0 (30.9)
Natural gas, 60 Hz	15.3 (20.5)	20.2 (27.1)
Cylinder head material	Aluminum	
Valve material	Steel/Stellite®	
Piston type and material	Aluminum Alloy	
Crankshaft material	Heat Treated, Ductile Iron	
Governor: type	Electronic	
Frequency regulation, no load to full load	Isochronous	
Frequency regulation, steady state	±0.5%	
Air cleaner type	Dry	

Engine Electrical

Engine Electrical System	
Ignition system	Electronic, Capacitive Discharge
Starter motor rated voltage (DC)	12
Battery charging alternator, amp rating	15
Battery (purchased separately):	
Ground	Negative
Volts (DC)	12
Battery quantity	1
Recommended cold cranking amps (CCA) rating for -18°C (0°F)	500
Group size	51

Exhaust

Exhaust System	
Exhaust temperature exiting the enclosure at rated kW, dry, °C (°F)	260 (500)

Lubrication

Lubricating System	14RES	20RES
Type	Full Pressure	
Oil capacity (with filter), L (qt.)	1.9 (2.0)	2.8 (3.0)
Oil filter: quantity, type	1, Cartridge	
Oil cooler	Integral	

Fuel Requirements

Fuel System	14RES	20RES
Fuel types	Natural Gas or LP Vapor	
Fuel supply inlet	1/2 NPT	
Fuel supply pressure, kPa (in. H ₂ O):		
Natural gas	1.2-2.7 (5-11)	
LP	1.7-2.7 (7-11)	
Fuel flow rates, Btu/hr.		
Natural gas	193,000	281,000
LP	203,000	340,000

Fuel Pipe Size

Pipe Length, m (ft.)	Minimum Gas Pipe Size Recommendation, in. NPT			
	14RES		20RES	
	Natural Gas (193,000 Btu/hr.)	LP Vapor (203,000 Btu/hr.)	Natural Gas (281,000 Btu/hr.)	LP Vapor (340,000 Btu/hr.)
8 (25)	3/4	3/4	1	3/4
15 (50)	1	3/4	1	1
30 (100)	1	1	1 1/4	1
46 (150)	1 1/4	1	1 1/4	1 1/4
61 (200)	1 1/4	1	1 1/4	1 1/4

Fuel Consumption

Fuel Consumption, m ³ /hr. (cfh)				
Fuel Type	% Load	14RES	20RES	
Natural Gas	100%	5.4 (193)	8.0 (281)	
	75%	4.7 (163)	6.9 (243)	
	50%	3.5 (124)	4.6 (161)	
	25%	2.6 (93)	3.6 (127)	
LP Vapor	100%	2.3 (81)	3.9 (136)	
	75%	2.1 (75)	3.1 (109)	
	50%	1.8 (60)	2.3 (82)	
	25%	1.2 (45)	1.7 (59)	

LP vapor conversion factors:
 8.33 ft.³ = 1 lit.
 0.535 m³ = 1 kg
 36.29 ft.³ = 1 gal.

Nominal fuel rating:
 Natural gas: 37 MJ/m³ (1000 Btu/ft.³)
 LP vapor: 93 MJ/m³ (2500 Btu/ft.³)

Standard Features

- Battery cables
- CARB- and EPA-certified fuel system
- Critical silencer
- Engine-mounted 15 amp battery charging alternator
- Field-connection terminal block
- Fuel solenoid valve and secondary regulator
- Multi-fuel system, LP vapor/natural gas, field-convertible
- Oil drain extension with shutoff valve
- RDC generator set/ATS controller
- Rodent-resistant construction
- Sound-deadening, flame-retardant foam per UL 94, class HF-1
- Corrosion-proof polymer sound enclosure
- Premium 5-year limited warranty
- 6-amp battery charger
- Line circuit breaker:
 - 14RES: 70 amps
 - 20RES: 125 amps

Available Accessories

Communication Accessories

- OnCue Home™ Generator Management System

Electrical System

- Battery
- Battery heater

Fuel System

- Gas strainer
- Braided stainless steel flexible fuel line

Maintenance

- Maintenance kit (air and oil filters)
- General maintenance literature kit
- Overhaul literature kit
- Production literature kit

Starting Aids

- Carburetor heater, 120 VAC (recommended for reliable starting at temperatures below 0°C [32°F])

Transfer Switch

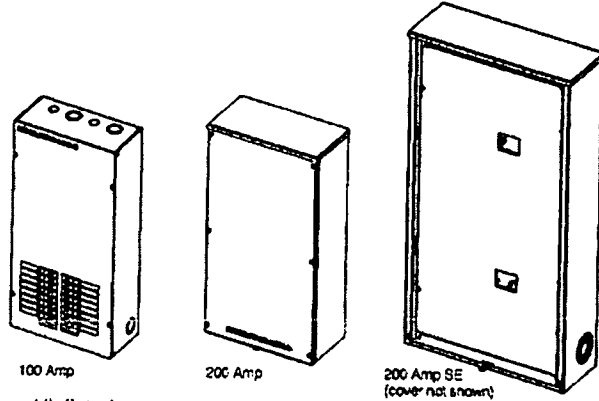
- Kohler automatic transfer switch

Miscellaneous Accessories

- _____
- _____
- _____

Available Accessories

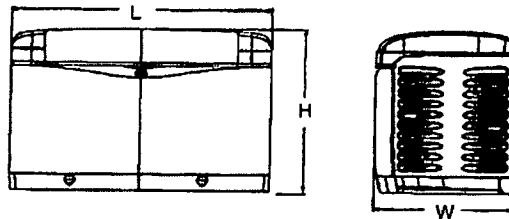
Model RRT Automatic Transfer Switch



- UL listed
- 240 VAC/60 Hz
- Withstand short circuit rating 10,000 amps with specified breakers. Service entrance models are rated 22,000 amps.
- Three models available:
 - 100 amp NEMA 1 with load center for indoor installation
 - 200 amp NEMA 3R for outdoors or indoors (no load center)
 - 200 amp NEMA 3R service entrance-rated model
- Designed for the 14/20RES/RESL generator sets with RDC or DC integrated generator set/ATS controller
- Use with the 14/20RES generator set for unloaded, quiet diagnostic test, utility voltage sensing, and smart engine cooldown

Dimensions and Weights

Overall Size, L x W x H:	1216 x 665 x 733 mm (48 x 26.2 x 29 in.)				
Weight:	<table border="0"> <tr> <td>14RES</td> <td>188 kg (410 lb.)</td> </tr> <tr> <td>20RES</td> <td>227 kg (500 lb.)</td> </tr> </table>	14RES	188 kg (410 lb.)	20RES	227 kg (500 lb.)
14RES	188 kg (410 lb.)				
20RES	227 kg (500 lb.)				



NOTE: These dimensions are provided for reference only and should not be used for planning installation. Contact your local distributor for more detailed information.

DISTRIBUTED BY:

- Natural gas or LP fueled.
- Electronic engine controls for optimized fuel and spark performance
- Four cylinder, four cycle engine.
- An electronic, isochronous governor for precise frequency regulation
- High silicon content pistons for improved durability.
- Kohler Command PRO OHV engine with hydraulic valve lifters for reliable performance without routine valve adjustment or lengthy break-in requirements

Specifications

Standby Ratings:	20 kW (20 kVa)
Hertz:	60 Hz
Alternator Type:	2-Pole, Rotating Field
Engine Manufacturer:	Kohler
Engine Model:	CH1000
Cylinder Arrangement:	V-2
Max Power at Rated RPM:	23 kWm (30.9 BHP)
Standby Fuel Consumption at	
100% load:	3.9 m ³ /hr (136 cfm)
75% load:	3.1 m ³ /hr (109 cfm)
50% load:	2.3 m ³ /hr (82 cfm)
25% load:	1.7 m ³ /hr (59 cfm)

Accessories

- Battery
- Battery heater
- Braided stainless steel flexible fuel line
- Gas strainer
- Carburetor heater, 120 VAC (recommended for reliable starting at temperatures below 0°C (32°F))

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 2-16-12 Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10011	Besson	Underground		
PM	7 Copaire Blasus	Electrical HOT TUB	Pass	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10001	Schweder			
	4 RIDGELAND	WINDOW	Pass	
	Gregory Maida	DOOR BUCK		INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9561	WOODS	SPA		
	32 E AREA PT	FINN	Pass	Close
	Paul Crafters			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10007	Confidential	Electrical	Pass	
	5 Pine...	...	Pass	
	Electrical Conn	...	Pass	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10008	Price	Window Buck		
2PM	6 N Via Lucinda OB		Pass	INSPECTOR <i>[Signature]</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 Mon Tue Wed ~~2-27-12~~ Fri 2-29-12 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	12/14 CONF NEST Hedon's	BRILLIANT PEPPER BY MAILBOX		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10009 PM 1-130	Confidential 15 Palm Rd Eledown	Feral com pact welens	Pass	Close INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10012 PM 1-130	Confidential 15 Palm Rd Florida Gas	Feral Gas	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
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 **3-5-12** Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
Tree	137 S. River Rd	TREE	OK	
Tree	12 Herons Nest	"	OK	
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
Tree	22 S Sewalls	Tree	See Permit	
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
1009	15th St Ed	Gen Electric	OK	OK
	Elec Conn	Gen Electric	OK	
				INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

10012

GAS TANK & LINES



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:	10012	DATE ISSUED:	FEBRUARY 15, 2012
SCOPE OF WORK:	GAS TANK & LINES		
CONTRACTOR:	FLORIDA GAS EXPRESS		
PARCEL CONTROL NUMBER:	133841005-000-000903	SUBDIVISION	PALM ROW REVISED-L9
CONSTRUCTION ADDRESS:	15 PALM RD		
OWNER NAME:	CONFIDENTIAL		
QUALIFIER:	JAMES GEISLER	CONTACT PHONE NUMBER:	781-1127

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:	10012	
ADDRESS	15 PALM RD -	
DATE : 2/15/12	SCOPE OF WORK	GAS TANK & LINES

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

ACCESSORY PERMIT	Declared Value:	\$		
Total number of inspections @ \$75.00 each	2		150	
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	2.25	
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	2.25	
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00	
TOTAL ACCESSORY PERMIT FEE:		\$	159.50	

Date: 2/3/2012 **Town of Sewall's Point** BUILDING PERMIT APPLICATION Permit Number: 10012

OWNER/TITLEHOLDER NAME: DIAZ, CATHERINE Phone (Day) 283-7870 (Fax) _____

Job Site Address: 15 Palm Rd City: Stuart State: FL Zip: 34996

Legal Description: Palm Roe Revised LOT 9 Parcel Control Number: 1335641-005-000-00090 B

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

Scope of work (please be specific): NEW GAS TANK + LINES

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: \$ 4300.00
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: FLORIDA GAS EXPRESS LLC Phone: 781-1127 Fax: 781-1128

Street: 1650 S. Kanner Hwy City: Stuart State: FL Zip: 34994

State License Number: 26515 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: JD Geisler Phone Number: 772-781-1127

DESIGN PROFESSIONAL: _____ Phone Number: _____

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

AREAS SQUARE FOOTAGE: Living: _____ Garage: FEB 10 2012 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.

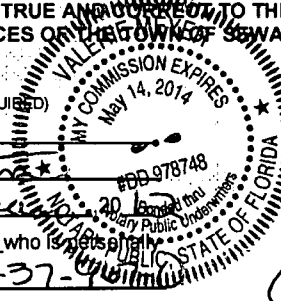
CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2007
National Electrical Code: 2005(2008 after 6/1/09) Florida Safety Code: 2007, Florida Accessibility Code: 2007, Florida Fire Prevention Code 2007

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

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

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

OWNER SIGNATURE: (required)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Catherine Diaz
State of Florida, County of: Martin
This the 14 day of February
by Catherine Diaz who is personally
known to me or produced
as identification. Valery
Notary Public
My Commission Expires: _____



CONTRACTOR SIGNATURE: (required)
James Geisler
On State of Florida, County of: Martin
This the 3rd day of February 2012
by James Geisler who is personally
known to me or produced
As identification. CINDY LYNN LACONTE
Notary Public
My Commission # DD985821
Expires 2/25 2014
FloridaNotaryService.com



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!

GAS CHECKLIST
COMPLIANT TO 2007 FBC FUEL GAS CODE & NFPA 54 & 58

USE:

RESIDENTIAL: COMMERCIAL: _____

HOOK UP:

TANK METERED UTILITY GAS: _____ OTHER: _____

TANK SPECS:

SIZE: 500 GALS ABOVE GROUND: _____ UNDERGROUND:

TANK TYPE: D.O.T. _____ ASME: OTHER: _____

TANK DISTANCE: (MINIMUM)

SOURCE OF IGNITION: 10 FT. BUILDING OPENINGS: 10 FT. BUILDING: 10 FT.

PROPOSED SETBACKS FROM LOT LINE:

FRONT: 10 FT. SIDE 1: 10 FT. SIDE 2: 65 FT. REAR: 103 FT.

GAS SPECS: (SEE FBC/FUEL GAS TABLES 402)

NATURAL: _____ LP: OTHER: _____

GAS PRESSURE OF 10 psi AND PRESSURE DROP OF 1/2 psi

BASED ON A _____ SPECIFIC GRAVITY GAS

PIPE/TUBING SPECS: (CHECK ALL THAT APPLY)

IRON _____ SCH. 40 SEMI-RIGID _____ CSST _____ COPPER _____

POLYETHYLENE PLASTIC S. S.: _____ OTHER: _____

COMBUSTION AIR:

REQUIRED: YES: _____ NO:

METHOD FOR SUPPLYING COMBUSTION AIR: _____

WHO PROVIDED THE COMBUSTION AIR CALCS?

ARCHITECT/ENGINEER OF RECORD: _____ GAS COMPANY: _____

OTHER: _____

GAS APPLIANCE SPECS: (LIST APPLIANCE TYPE AND BTU)

APPLIANCE #1: Generator 250,000 BTU 3/4 *DIA. PIPE 3' FT.-LENGTH

APPLIANCE #2: _____ BTU _____ *DIA. PIPE _____ FT.-LENGTH

APPLIANCE #3: _____ BTU _____ *DIA. PIPE _____ FT.-LENGTH

APPLIANCE #4: _____ BTU _____ *DIA. PIPE _____ FT.-LENGTH

APPLIANCE #5: _____ BTU _____ *DIA. PIPE _____ FT.-LENGTH

APPLIANCE #6: _____ BTU _____ *DIA. PIPE _____ FT.-LENGTH

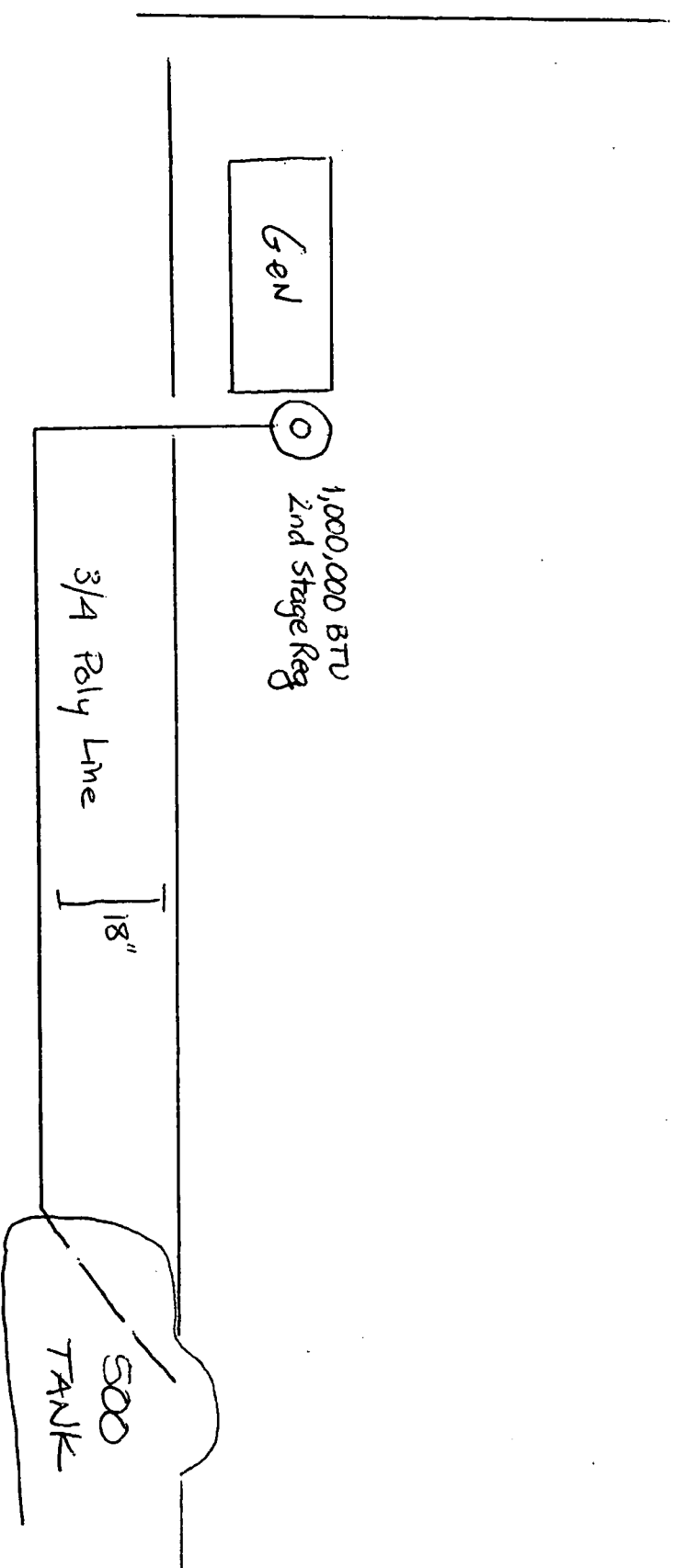
(LENGTH BASED ON THE TOTAL PIPE LENGTH FROM THE GAS SOURCE TO THE APPLIANCE)

*THE ABOVE PIPE SIZES WERE TAKEN FROM 2007 FBC FUEL GAS TABLE NO. _____

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

15 Palm Road

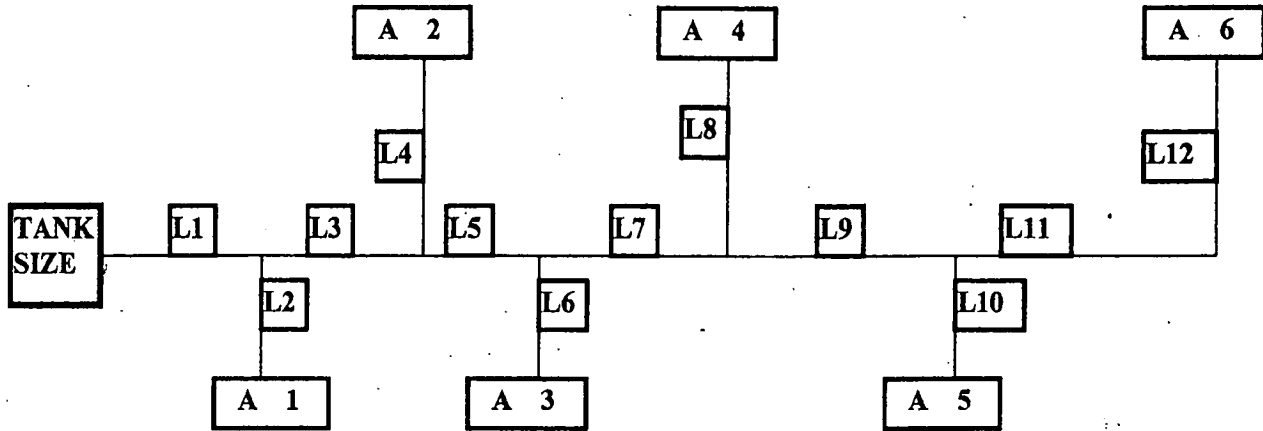
House





MARTIN COUNTY BUILDING DEPARTMENT
 900 SE RUHNKE STREET
 STUART, FL 34994
 (772) 288-5916
 FAX (772) 288-5911

GAS PIPING SCHEMATIC



TANK SIZE 500 GALS

APPLIANCE - TYPE/SIZE

A1	<u>Generator</u>	<u>250,000</u>	BTU
A2	_____	_____	BTU
A3	_____	_____	BTU
A4	_____	_____	BTU
A5	_____	_____	BTU
A6	<u>1</u>	_____	BTU

PIPING LENGTH & SIZE

L1	<u>110</u> FT.	<u>3/4</u> INCH DIA.
L2	<u>10</u> FT.	<u>3/4</u> INCH DIA.
L3	_____ FT.	_____ INCH DIA.
L4	_____ FT.	_____ INCH DIA.
L5	_____ FT.	_____ INCH DIA.
L6	_____ FT.	_____ INCH DIA.
L7	_____ FT.	_____ INCH DIA.
L8	_____ FT.	_____ INCH DIA.
L9	_____ FT.	_____ INCH DIA.
L10	_____ FT.	_____ INCH DIA.
L11	_____ FT.	_____ INCH DIA.
L12	_____ FT.	_____ INCH DIA.

PIPE SIZE WAS TAKEN FROM THE 2007
 FBC FUEL GAS CODE - TABLE 402
 ()

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 2-17-12 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9996	Custora	in progress		
PM	22 Sewalls Pt Cardinal Roofing		Pass	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10003	LAWLESS	MAIN DRAIN		
PM	12 MANDRAY SKILLEN	JOEL SPOER SPOER BOND	Pass	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10012	CONFIDENTIAL	CONFIDENTIAL		
	155 PINEHURST RD	CONFIDENTIAL	Pass	
	FET GAS			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10001	SCARVEDEN			
	4 RIDGELAND	FRAMING	Pass	
	GREG MAIDA			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10005	Benson	A/c		
	7 COPAIRE	FINAL	Pass	CLOSE
	Hymis AC			INSPECTOR <i>[Signature]</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 Mon Tue Wed Thur Fri 2-22-12 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10012	15 Merr Rd	UG GAS LINES	Pass	
	Florida Gas			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9991	Burkeard 106 SSP Way Morris Alan	Temp Power Pole		Contact FPL INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9969	Frisoli 50 SSP Rd. Morris Alan	Fdn. GRADE BEAMS 9 SLAB	Pass	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
Tree	32 W High Pt	Tree	Oh	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 SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

Mon

Tue

Wed

Thu

Fri

2-29-12

Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
----------	--------------------------	-----------------	---------	----------

781-1128

~~12/14 ~~6:00~~ NEST Installation Permitted by MAILBOX~~

~~PERMITS~~

INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
----------	--------------------------	-----------------	---------	----------

10007	Confidential	Final	Pass	gas pad + wiring
PM	15 Palm Rd			
1-130	Florida Gas			

INSPECTOR *[Signature]*

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
----------	--------------------------	-----------------	---------	----------

10012	Confidential	Final	Pass	close
PM	15 Palm Rd	Gas		
1-130	Florida Gas			

INSPECTOR *[Signature]*

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
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INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
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INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
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INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
----------	--------------------------	-----------------	---------	----------

INSPECTOR

HP Color LaserJet *CM1312nfi MFP*

Fax Confirmation Report

HP LASERJET FAX
772-287-2455
Apr-3-2012 10:05AM

Job	Date	Time	Type	Identification	Duration	Pages	Result
4533	4/ 3/2012	10:03:57AM	Send	7811128	1:23	1	OK

10361

REPLACE GATES



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:	10361	DATE ISSUED:	FEBRUARY 20, 2013
SCOPE OF WORK:	GATES (2)		
CONTRACTOR:	OB		
PARCEL CONTROL NUMBER:		SUBDIVISION	PALM ROW - LOT 9
CONSTRUCTION ADDRESS:	15 PALM RD		
OWNER NAME:	CONFIDENTIAL		
QUALIFIER:	OB	CONTACT PHONE NUMBER:	

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 PERMIT APPLICATION

Permit Number: 10361

Date: 02-19-13

OWNER/LESSEE NAME: CATHERINE DIAZ Phone (Day) 283-7870 (Fax) —

Job Site Address: 15 PALM RD City: STUART State: FL Zip: 34996

Legal Description: Palm Row Lot 9 Parcel Control Number: _____

Fee Simple Holder Name: Palm Row Lot 9 Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Replace old P.T GATES (2) with vinyl panel gates

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 500
(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 NO

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: _____ Phone: _____ Fax: _____

Qualifiers name: _____ Street: _____ City: _____ State: _____ Zip: _____

State License Number: _____ OR: Municipally: _____ License Number: _____

LOCAL CONTACT: _____ Phone Number: _____

DESIGN PROFESSIONAL: _____ Fla. License# _____

Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered 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: _____
#EE 222086

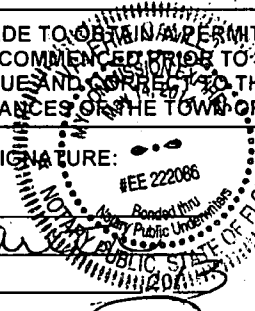
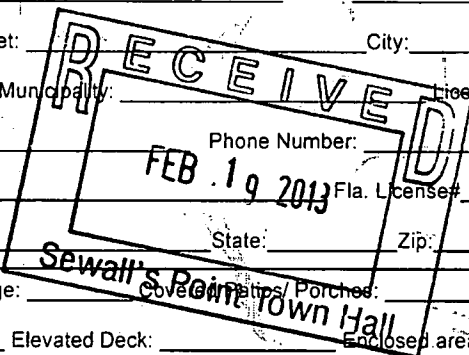
X Catherine Diaz
State of Florida, County of: Martin
On This the 19 day of Feb
by Catherine Diaz who is personally
known to me or produced
As identification: Valerie Carmel
Notary Public

My Commission Expires: _____

CONTRACTOR/LICENSEE 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: _____

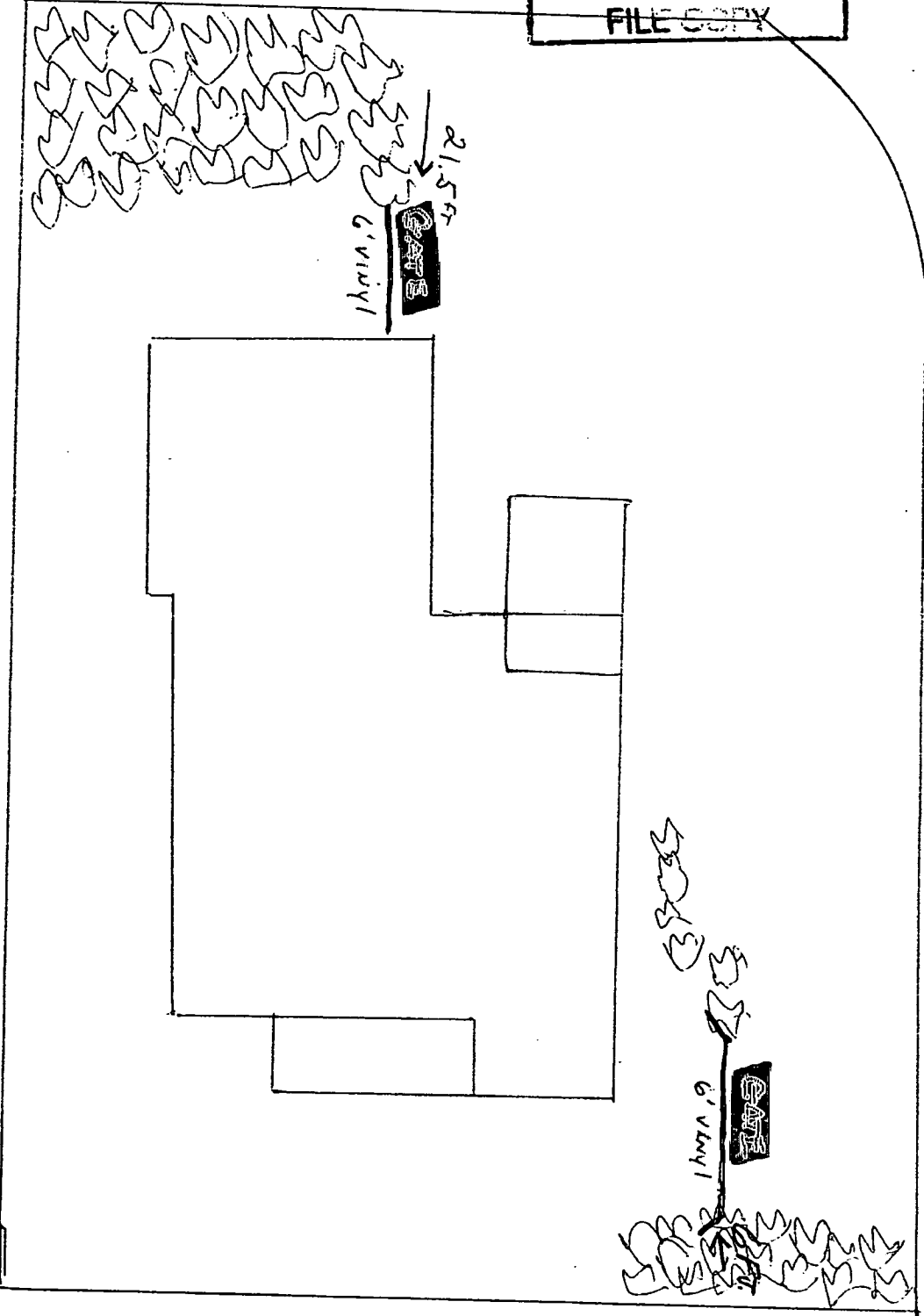


SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

-N-

PALM ROAD

TOWN OF SEWALTON QINT
BUILDING DEPARTMENT
FILE COPY



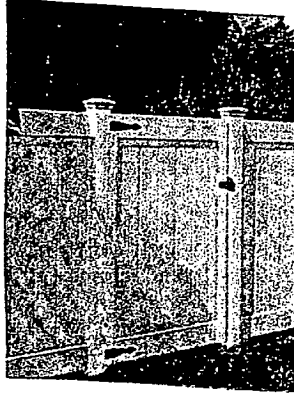
SOUTH RIVER ROAD

-E-

-W-

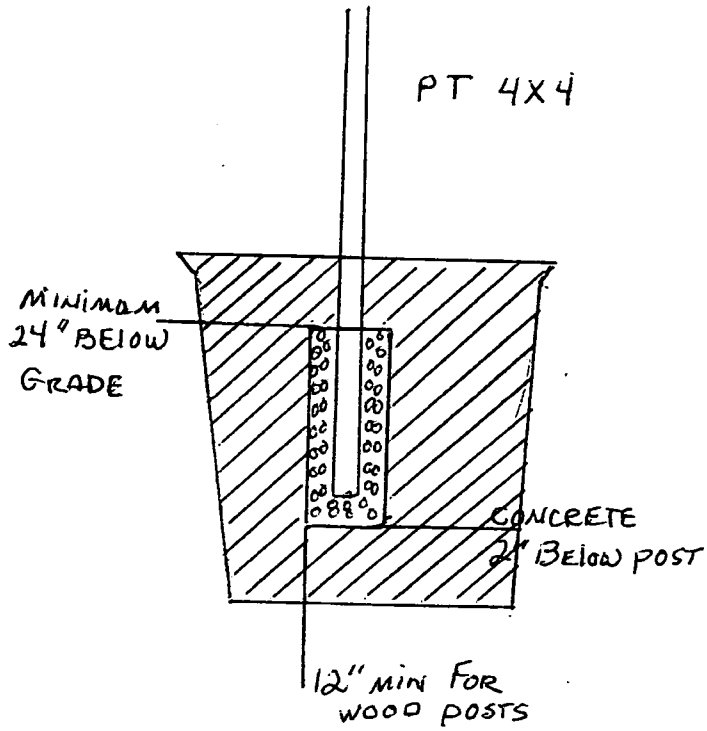
15. PALM Rd

-S-



15 PALM ROAD

6 FT VINYL PRIVACY FENCE / GATES



P.T. POSTS \bar{c} VINYL COVERS



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

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

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

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

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

Owner/Builder Applicant Name: CATHERINE DIAZ

Site address of the proposed building work: 15 PALM Rd

Name of legal title owner of the address above: CATHERINE DIAZ

Describe the scope of work for the proposed new construction: REPLACEMENT OF TWO PRIVACY GATES

Name of Architect of Record: NA Structural Engineer of Record: NA

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

What provisions have you made for Liability and Property Damage Insurance? OWNER/BUILDER

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

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

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

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

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

Electric: NA Plumbing: NA HVAC: NA

Other: _____

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

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

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

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



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

OWNER/BUILDER DISCLOSURE STATEMENT

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

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



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

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

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

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

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

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

ON THIS 19 DAY OF Feb, 2013.

PROPERTY ADDRESS 15 Palm Rd.

CITY Stuart (Sewall's Pt) STATE Fl. ZIP 34996

Catherine Diaz

SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 19 DAY OF Feb 2013

BY Catherine Diaz

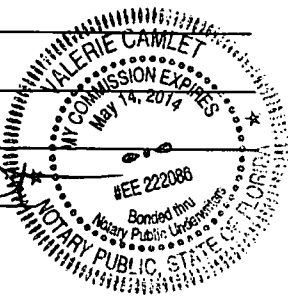
PERSONALLY KNOWN

OR PRODUCED ID _____

TYPE OF ID _____

Valerie Camlet

NOTARY SIGNATURE





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

FENCE and or POOL BARRIER CHECKLIST

A document review will be performed on the following items prior to the submittal of a permit application. Failure to submit these items will result in the application package returned to the applicant until the deficient documents are included. This review sheet must accompany the application submittal.

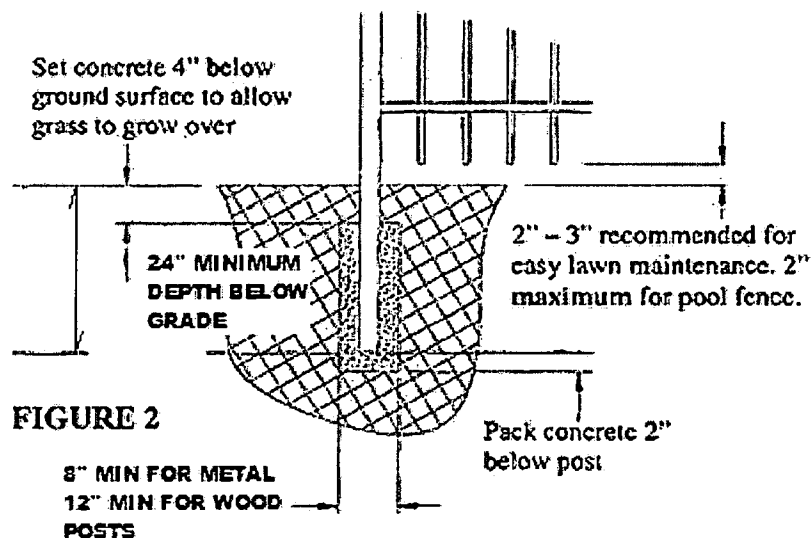
Please make sure you have ALL required copies before submitting permit application

- _____ 1 Copy Completed permit application
- _____ 2 Copies Survey or site plan showing the following:
 - All existing structures on property
 - Location of proposed fence
 - Setbacks from the fence to property lines
 - Height & type of fence
 - Location of all easements
 - Street & house number on site plans

DO NOT SUBMIT PREVIOUSLY STAMPED SITE PLANS

- _____ 2 Copies support post footer sketch indicating size of footers. Fences to Be used as a Pool Barrier (other than chain link fence) must include an Accurate sketch or drawing indicating barrier requirement compliance.
- _____ 2 Copies, if fence crosses any easement, Easement agreement from all utility Companies are required. Agreement form included in permit package.

Typical Fence Footer



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon

Tue

Wed

Thur

Fri

8-22-13

Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10511	Elliott 25 W High Pt Alfred Ac	Final AC	Pass	CLOSE INSPECTOR <i>[Signature]</i>
	Elliott 25 W High Pt	Final Window & Door (AC)		INSPECTOR
10526	Fitzsimmons 99 N Sewalls Capps Roofing	Final Roof	Pass	CLOSE INSPECTOR <i>[Signature]</i>
10361	Dean 15 Palm Rd OIB	Final Gates (permit on right side)	Pass	CLOSE INSPECTOR <i>[Signature]</i>
10511	Fitzsimmons 99 N Sewalls Pt Classic Cooling	Final AC (Permit by AH)	Pass	CLOSE INSPECTOR <i>[Signature]</i>
10503	McBride 19 N Via Lucania OB	window column	Pass	INSPECTOR <i>[Signature]</i>
10547	Elliott 25 W High Pt DeGrisia Contract	Final Window & door	Pass	CLOSE INSPECTOR

10504

A/C CHANGEOUT



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

BUILDING PERMIT CARD

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

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	10504	DATE ISSUED:	JUNE 25, 2013
SCOPE OF WORK:	AC CHANGEOUT		
CONTRACTOR:	NIS AIR		
PARCEL CONTROL NUMBER:		SUBDIVISION	
CONSTRUCTION ADDRESS:	15 PALM RD		
OWNER NAME:	CONFIDENTIAL		
QUALIFIER:	PHIL NISA	CONTACT PHONE NUMBER:	466-8115

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 PERMIT APPLICATION**

Date: 6-21-13 Permit Number: 10504
 OWNER/LESSEE NAME: Cathy Diaz Phone (Day) 283-7870 (Fax) _____
 Job Site Address: 15 Palm rd City: Stuart State: FL Zip: 34996
 Legal Description _____ Parcel Control Number: _____
 Fee Simple Holder Name: _____ Address: _____
 City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Wife for wife A/C Change out

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)

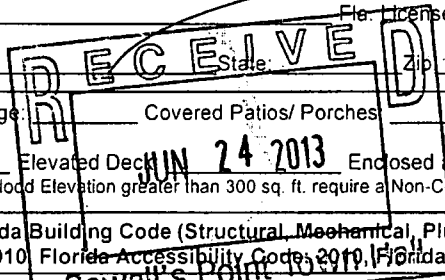
COST AND VALUES: (Required on ALL permit applications)
 Estimated Value of Improvements: \$ 3100
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF 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: NISAR A/C Phone: 406-8115 Fax: 408-9745
 Qualifiers name: Philip Nisara Street: 3700 S. US Hwy 1 City: Ft Pierce State: FL Zip: 34982
 State License Number: _____ OR: Municipality: _____ License Number: CC04195

LOCAL CONTACT: Philip Nisara Phone Number: 406-8115
 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:
 X Catherine Diaz
 State of Florida, County of: St Lucie
 On This the 24 day of June, 2013
 by Catherine Diaz who is personally
 known to me or produced
 As identification: Nichole L. Simmons
 My Commission Expires _____
 NICHOLE L. SIMMONS
 Notary Public
 STATE OF FLORIDA

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
 X Philip Nisara
 State of Florida, County of: St. Lucie
 On This the 24 day of June, 2013
 by Philip Nisara who is personally
 known to me or produced
 As identification: Nichole L. Simmons
 My Commission Expires _____
 NICHOLE L. SIMMONS
 Notary Public
 STATE OF FLORIDA
 Comm# EE133197

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!
 Expires 10/2/2013



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

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
Air Conditioning Change out Affidavit FILE COPY

Residential Commercial _____
 Package Unit ___ Yes No (Use Condenser side of form below for equipment listing)
 Duct Replacement ___ Yes No - Refrigerant line replacement ___ Yes No
 Flushing Existing Refrigerant lines ___ Yes No - Adding Refrigerant Drier ___ Yes ___ No
 Rooftop A/C Stand Installation ___ Yes No - Curb Installation ___ Yes No
 Smoke Detector in Supply (over 2000 CFM) ___ Yes No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: Lennox Model# CBX270H048
 Volts 240 CFM's 1600 Heat Strip 10 Kw
 Min. Circuit Amps 50 Wire gauge #6
 Max. Breaker size 60 Min. Breaker size 50
 Ref. line size: Liquid 3/8 Suction 7/8
 Refrigerant type R-22
 Location: Existing New _____
 Attic/Garage/Closet (specify) Hall closet
 Access: _____

Condenser: Mfg: Lennox Model# _____
 Volts _____ SEER/EER _____ BTU's _____
 Min. Circuit Amps _____ Wire gauge _____
 Max. Breaker size _____ Min. Breaker size _____
 Ref. line size: Liquid _____ Suction _____
 Refrigerant type _____
 Location: Existing _____ New _____
 Left/Right/Rear/Front/Roof _____
 Condensate Location _____

NOTE: CONTRACTOR MUST SUPPLY A PROPER LADDER IF REQUIRED FOR INSPECTION

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: Lennox Model# CB30MS11P
 Volts 240 CFM's 1600 Heat Strip 10 Kw
 Min. Circuit Amps 50 Wire gauge #6
 Max. Breaker size 60 Min. Breaker size 50
 Ref. line size: Liquid 3/8 Suction 7/8
 Refrigerant type R-22
 Location: Ext. New _____
 Attic/Garage/Closet (specify) Hall closet
 Access: _____

Condenser: Mfg _____ Model# _____
 Volts _____ SEER/EER _____ BTU's _____
 Min. Circuit Amps _____ Wire gauge _____
 Max. Breaker size _____ Min. Breaker size _____
 Ref. line size: Liquid _____ Suction _____
 Refrigerant type _____
 Location: Ext. _____ New _____
 Left/Right/Rear/Front/Roof _____
 Condensate Location _____

Certification:

I hereby certify that the information entered on this form accurately represents the equipment installed and further that this equipment is considered matched as required by FBC - R (N)1107 & 1108

Signature

[Handwritten Signature]

Date

10-24-13



DesignStar Load Calculation

Results are intended for use with Rheem heating and cooling systems

The New Degree of Comfort™

Customer Information

Street Address: 15 Palm Road, Stuart, FL 34996

Latitude / Longitude: 26.6726°, -80.0706°

House Square Footage: 1700 sq. ft.

Name: Catherine Diaz

Phone: 772-283-7870

Email: example@mail.com

House Information

SHR: 75

Number of residents: 2

Ceiling height: 9

Wall U-value | R-value: 0.09 | 1.1

Floor U-value | R-value: 0.2 | 5

Ceiling U-value | R-value: 0.053 | 19

Window U-value: 0.5

Window SHGF: 0.85

Moisture grains: 64

Duct loss %: 10

Duct gain %: 10

Cooling infiltration (ACH): 0.6

Heating infiltration (ACH): 0.8

Winter ventilation: 0

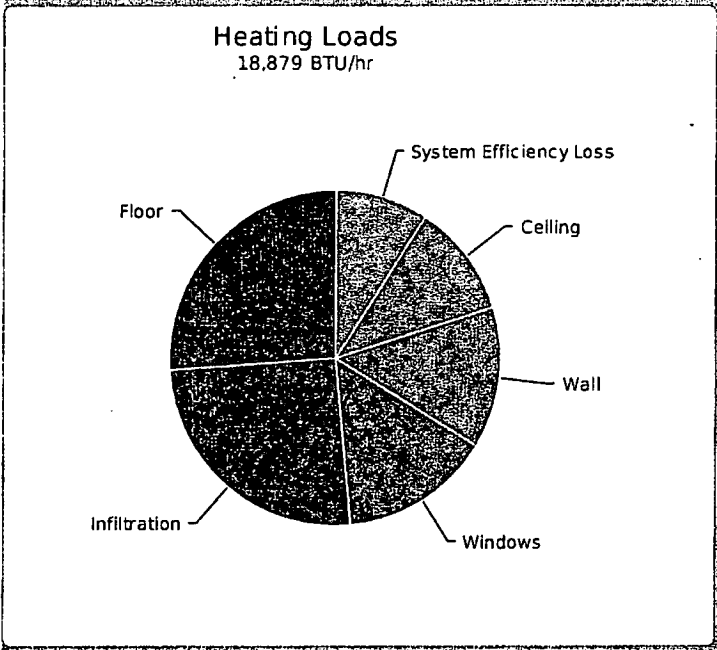
Summer ventilation: 0

Design Conditions

Outdoor	Heating	Cooling
Dry bulb (°F)	47	90
Daily range		M
Relative humidity		50%
Moisture difference		64
Indoor	Heating	Cooling
Indoor temperature (°F)	70	75
Design temperature difference(°F)	23	15

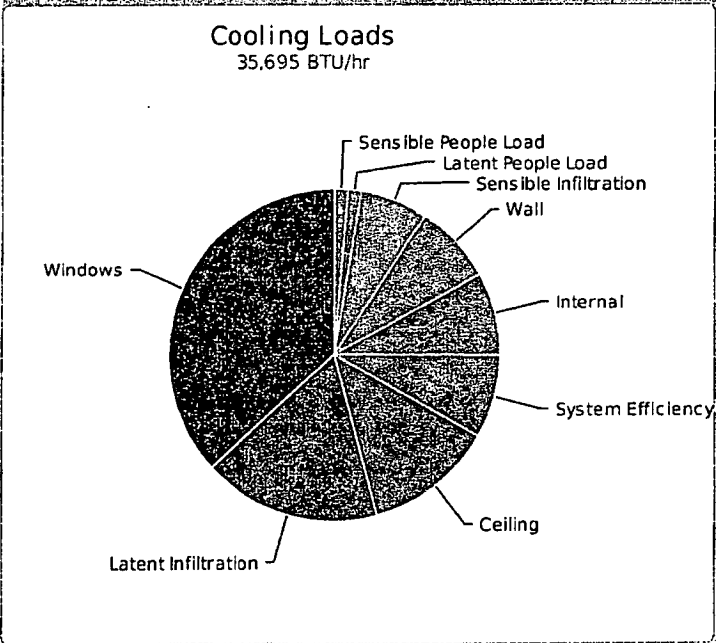
Heating Loads

Area	Btuh	% of load
Wall	2570	13.6
Floor	4927	26.1
Ceiling	2072	11.0
Windows	2795	14.8
Infiltration	4800	25.4
System Efficiency Loss	1716	9.1
Total	18879	

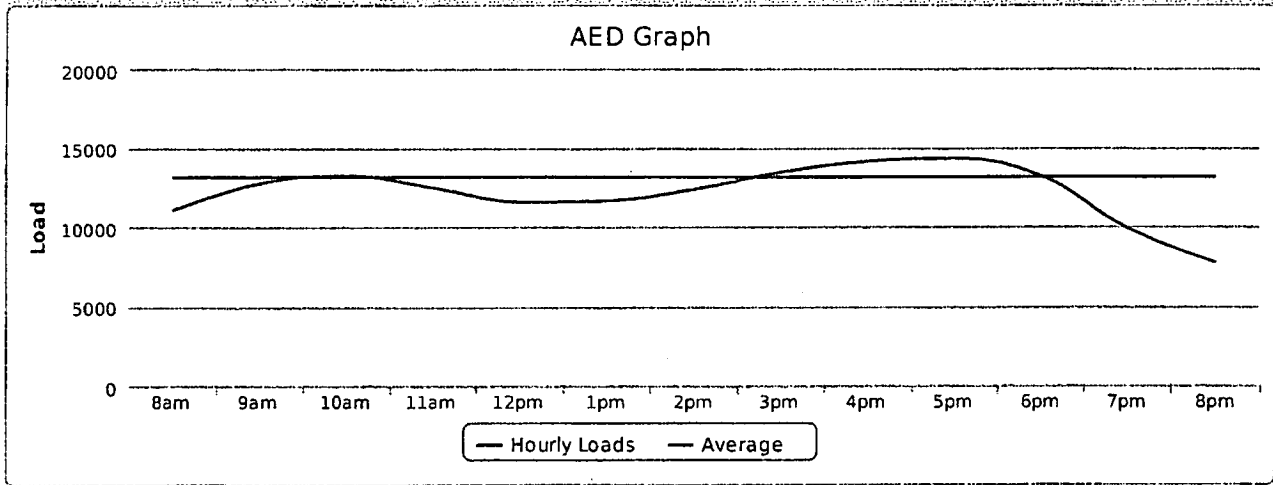


Cooling Loads

Area	Btuh	% of load
Wall	2793	7.8
Ceiling	4505	12.6
Windows	13148	36.8
Sensible Infiltration	2348	6.6
Latent Infiltration	6192	17.3
System Efficiency Gain	2899	8.1
Internal	2890	8.1
Sensible People Load	460	1.3
Latent People Load	460	1.3
Total	35695	
Sensible load	29043	
Latent load	6652	
SHR	0.81	
Capacity at 75 SHR	3.23 Tons	



Adequate Exposure Diversity



Equipment selection

System equipment selection will be made using the following derived values

Glass (E)	123 sq. ft.
Glass (S)	17 sq. ft.
Glass (N)	17 sq. ft.
Glass (W)	86 sq. ft.
Summer Outdoor	90°F
Summer Wet Bulb	78°F
Summer Indoor	75°F
Summer Design Grains	50%
Winter Outdoor	47°F
Winter Indoor	70°F
Sensible Cooling	29,043 Btuh
Latent Cooling	6,652 Btuh
Required Cooling Airflow	1,320 CFM
Sensible Heating	18,879 Btuh
Required Heating Airflow	245 CFM

All calculations are based upon approved hvac industry standards and procedures, and comply with all local, state and federal code requirements. All computed results are Estimates. Product provided by Energy Design Systems and Idea Tree.



Certificate of Product Ratings

AHRI Certified Reference Number: 5615606

Date: 6/24/2013

Product: Split System: Air-Cooled Condensing Unit, Coil with Blower

Outdoor Unit Model Number: 13ACX-048-230-**

Indoor Unit Model Number: CBX27UH-048-230*+TDR

Manufacturer: LENNOX INDUSTRIES, INC.

Trade/Brand name: 13ACX SERIES

Manufacturer responsible for the rating of this system combination is LENNOX INDUSTRIES, INC.

Rated as follows in accordance with AHRI Standard 210/240-2008 for Unitary Air-Conditioning and Air-Source Heat Pump Equipment and subject to verification of rating accuracy by AHRI-sponsored, independent, third party testing:

Cooling Capacity (Btuh):	49500
EER Rating (Cooling):	11.00
SEER Rating (Cooling):	13.00

FootNote 11 - The AHRI 210/240 certified EER ratings are calculated under the same methodology as the EER ratings at T1 conditions of ISO 5151:2010 and ISO 13253:2011.

* Ratings followed by an asterisk (*) indicate a voluntary rerate of previously published data, unless accompanied with a WAS, which indicates an involuntary rerate.

DISCLAIMER

AHRI does not endorse the product(s) listed on this Certificate and makes no representations, warranties or guarantees as to, and assumes no responsibility for, the product(s) listed on this Certificate. AHRI expressly disclaims all liability for damages of any kind arising out of the use or performance of the product(s), or the unauthorized alteration of data listed on this Certificate. Certified ratings are valid only for models and configurations listed in the directory at www.ahridirectory.org.

TERMS AND CONDITIONS

This Certificate and its contents are proprietary products of AHRI. This Certificate shall only be used for individual, personal and confidential reference purposes. The contents of this Certificate may not, in whole or in part, be reproduced; copied; disseminated; entered into a computer database; or otherwise utilized, in any form or manner or by any means, except for the user's individual, personal and confidential reference.

CERTIFICATE VERIFICATION

The information for the model cited on this certificate can be verified at www.ahridirectory.org, click on "Verify Certificate" link and enter the AHRI Certified Reference Number and the date on which the certificate was issued, which is listed above, and the Certificate No., which is listed below.



Air-Conditioning, Heating, and Refrigeration Institute

©2013 Air-Conditioning, Heating, and Refrigeration Institute

CERTIFICATE NO.:

130165532532618300



PRODUCT CATALOG

**AIR HANDLERS
CBX32MV**

DAVE LENNOX SIGNATURE COLLECTION

**Multi-Position - R-410A - Variable Speed Blower
1.5 to 5+ Tons**

Optional Electric Heat - 2.5 to 25 kW

Page 1

April 2007

Supersedes November 2006

FEATURES

Refrigerant System

Copper tube construction with enhanced ripple-edged aluminum fins.

Twin coil construction in an "A" configuration for large surface area.

Dual anti-microbial drain pans resist growth of mold and mildew.



Factory installed R-410A Check/Expansion Valve.

Controls

BDC3 Electronic Blower Control

24-Volt Transformer

Blower Cooling Relay

Terminal Strip

Variable-Speed Blower Motor

High efficiency, variable speed ECM (Electronically Commutated Motor)

Maintains specified air volumes up to a maximum of 0.8 in. w.g. total external static.

Cabinet

Multi-Position Capability

Pre-painted cabinet finish.

Fully insulated cabinet with thick fiberglass insulation.

Tool-less access to disposable, frame-type filter

Limited Warranty

All covered components - ten years

Refer to Lennox Equipment Limited

Warranty certificate included with equipment for details



OPTIONAL ACCESSORIES

See Page 16

Cabinet

- Down-Flow Combustible Base
- Horizontal Support Frame Kit (Up-Flow)
- Side Return Unit Stand (Up-Flow)
- Wall Hanging Bracket Kit

Controls

- SignatureStat™ Home Comfort Control
- Thermostat

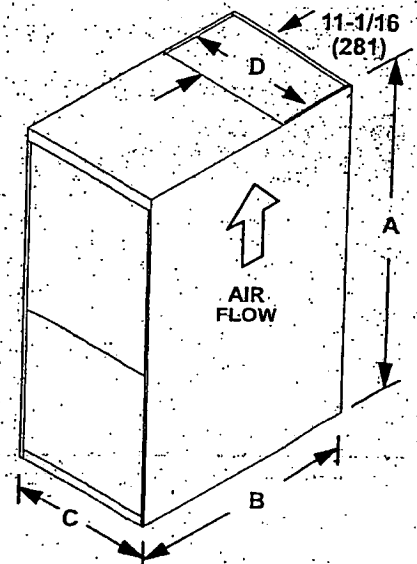
ELECTRIC HEAT

See Page 15

- Electric Heat
- Circuit Breaker Cover Kit
- Single-Point Power Source Control Box

DIMENSIONS - in: (mm)

	-018/ 024	-024/ 030	-036	-048 -060	068	
A	45-1/4 (1149)	49-1/4 (1251)	51 (1295)	58-1/2 (1486)	64 (1626)	
B	20-5/8 (524)	20-5/8 (524)	22-5/8 (575)	24-5/8 (625)	26-5/8 (676)	
C	16-1/4 (413)	21-1/4 (540)	21-1/4 (540)	21-1/4 (540)	21-1/4 (540)	
D	14-3/4 (375)	19-3/4 (502)	19-3/4 (502)	19-3/4 (502)	19-3/4 (502)	
Return Air	Width	15 (381)	20 (508)	20 (508)	20 (508)	20 (508)
	Depth	19 (483)	19 (483)	21 (533)	23 (584)	25 (635)



NOTE - Due to Lennox' ongoing commitment to quality, Specifications, Ratings and Dimensions subject to change without notice and without incurring liability. Improper installation, adjustment, alteration, service or maintenance can cause property damage or personal injury. Installation and service must be performed by a qualified installer and servicing agency.

SPECIFICATIONS

General Data		Model Number	CBX32MV -018/024	CBX32MV -024/030	CBX32MV -036	CBX32MV -048	CBX32MV -060	CBX32MV -068
	Nominal size - tons (kW)		1.5 - 2 (5 - 7)	2 - 2.5 (7 - 8.5)	3 (10.6)	4 (14)	5 (17.5)	5+ (17.5+)
	Refrigerant		R-410A	R-410A	R-410A	R-410A	R-410A	R-410A
Connections in. (mm)	Suction (vapor) line - sweat		5/8 (15.8)	3/4 (19)	3/4 (19)	7/8 (22.2)	1-1/8 (28)	1-1/8 (28)
	Liquid line - sweat		3/8 (9.5)	3/8 (9.5)	3/8 (9.5)	3/8 (9.5)	3/8 (9.5)	3/8 (9.5)
	Condensate drain (fpt)		(2) 3/4 (19)	(2) 3/4 (19)	(2) 3/4 (19)	(2) 3/4 (19)	(2) 3/4 (19)	(2) 3/4 (19)
Blower Data	Wheel nominal diameter x width - in. (mm)		10 x 7 (279 x 178)	10 x 8 (279 x 203)	10 x 8 (279 x 203)	12 x 9 (305 x 229)	12 x 9 (305 x 229)	15 x 9 (381 x 229)
	Motor output - hp (W)		1/2 (373)	1/2 (373)	1/2 (373)	1 (746)	1 (746)	1 (746)
	Air Volume Range - cfm (L/s)		385 - 1130 (180 - 535)	540 - 1320 (255 - 625)	900 - 1545 (425 - 730)	1205 - 2150 (570 - 1015)	1205 - 2150 (570 - 1015)	1250 - 2150 (590 - 1015)
Filters	¹ Number of filters		1	1	1	1	1	1
	¹ Number and size - in.		15 x 20 x 1	20 x 20 x 1	20 x 20 x 1	20 x 24 x 1	20 x 24 x 1	20 x 25 x 1
	mm		381 x 508 x 25	508 x 508 x 25	508 x 508 x 25	508 x 610 x 25	508 x 610 x 25	508 x 635 x 25
Shipping Data - 1 Package	lbs. (kg)		126 (57)	152 (69)	183 (83)	212 (96)	212 (96)	244 (111)

ELECTRICAL DATA

	Voltage - phase	208/230V-1ph	208/230V-1ph	208/230V-1ph	208/230V-1ph	208/230V-1ph	208/230V-1ph
² Maximum overcurrent protection (unit only)		15	15	15	20	20	20
³ Minimum circuit ampacity (unit only)		5	5	5	11	11	11

¹ Disposable frame type filter.² HACR type circuit breaker or fuse.³ Refer to National or Canadian Electrical Code manual to determine wire, fuse and disconnect size requirements. Use wires suitable for at least 167°F (75°C).

NOTE - Due to Lennox' ongoing commitment to quality, Specifications, Ratings and Dimensions subject to change without notice and without incurring liability. Improper installation, adjustment, alteration, service or maintenance can cause property damage or personal injury. Installation and service must be performed by a qualified installer and servicing agency.



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

Handwritten initials/signature

FLORIDA ENERGY CONSERVATION CODE

Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912)

Owner: Catherine Diaz Contractor name: Desair A/C
 Street address: 15 Palm Road Jurisdiction: _____
 City: Stuart Permit No.: 10504
 Zip: 34996 Final inspection date: _____

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101.4.7.1.1 as indicated below:

- Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent.
- Ducts are located within conditioned space. (Section 101.4.7.1.1 exception 1)
- The joints or seams are already sealed with fabric and mastic (Section 101.4.7.1.1 exception 2)
- System was tested (see below) and repairs were made as necessary – (Section 101.4.7.1.1 exception 3)

Signature: [Signature] Date: 6-26-13

Printed Name: Phillip Nisante Jr

Contractor License #: CA041199

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in. w.c.).

Signature: _____ Date: _____

Printed Name: _____

10-210 VCS

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 7-2-13 Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10401	15 Palm Rd	Final	Pass	Inspector
after 2pm	Nisdei	AC	Pass	INSPECTOR
10439	Goudis	sea wall cap		
pm	25 S River Rd Ferreira Const	(rebar)	Pass	INSPECTOR
Tree	Novino	Tree		NEEDS ADDITIONAL
	111 S Sewalls		NG.	OK
				INSPECTOR
10503	McBride			
pm	19 N. Via Lucinda O/B	SLAB	Pass	INSPECTOR
10156	Robinson			
	173 S. River Rd A#6 Pools 173 S. River Rd	Pool work - 2nd FINAL	Pass	INSPECTOR
	AAA Rio Vista	TREE FELL ON DR PACE'S YARD		
				INSPECTOR
	LEONARD			
	1 HERITAGE	TREE	OK	
				INSPECTOR

● 11269

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:	11269	DATE ISSUED:	May 11, 2015
SCOPE OF WORK:	Garage Door		
CONTRACTOR:	D&D Garage Doors		
PARCEL CONTROL NUMBER:	13-38-41-005-000-00090-3	SUBDIVISION:	Palm Row Lot 9
CONSTRUCTION ADDRESS:	15 Palm Road		
OWNER NAME:	Diaz		
QUALIFIER:	Denver Miller	CONTACT PHONE NUMBER:	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 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:	11269		
ADDRESS:	15 Palm Road		
DATE ISSUED:	5/11/2015	SCOPE OF WORK:	Garage Door

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, Remodel >\$200K)		\$	
Plan Submittal Fee (175.00 Remodel <\$200K, Tennant Improvement)		\$	
Plan Submittal Fee (100.00 Remodel <\$100k)		\$	
Total square feet air-conditioned spa @ per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel: @ per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: @ per sq. ft. s.f.		\$	-
Total Construction Value:		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Total number of inspections (Value < \$200K) \$ 150.00 per insp. # insp.		\$	-
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
Technology Fee: (0.04% of Construction Value - \$5 min)			n/a
Road impact assessment: (0.4% of construction value - \$20 min.)			n/a
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	\$ -

ACCESSORY PERMIT	Declared Value:	\$	\$
Total number of inspections: @ \$ 150.00 per insp. # insp.		\$	2,382.00
		\$	150.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	2.25
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	2.25
Technology Fee (0.04% of Construction Value - \$5 min.)		\$	5.00
Road impact assessment: (0.4% of construction value - \$20 min.)		\$	20.00
TOTAL ACCESSORY PERMIT FEE:		\$	179.50

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: 11269

Date: _____

OWNER/LESSEE NAME: Catherine Diaz Phone (Day) 283-7870 (Fax) _____

Job Site Address: 15 Palm Rd City: Stuart State: FL Zip: 34996

Legal Description Palm Row Lot 9 Parcel Control Number: 13-38-41-005-000-00903

Fee Simple Holder Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):**

GARAGE DOOR REPLACEMENT

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: \$ 2382.00
 (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: 460-7630 Fax: 460-7635

Qualifiers name: Denver Miller Street: 435 NW Enterprise Dr City: PSL State: FL Zip: 34986

State License Number: _____ OR: Municipality: MARTIN License Number: MC6D03359

LOCAL CONTACT: Tiffany Phone Number: 772-460-7630

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.

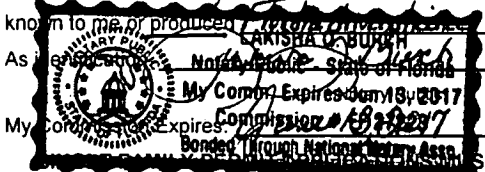
******* A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*******

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:
 x Catherine Diaz
 State of Florida, County of: Martin
 On This the 7th day of May, 2015
 by Catherine Thompson Diaz who is personally
 known to me or produced _____
 As _____
 My Commission Expires 01/18/2017
 Bonded Through National Notary Assn

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
 x Denver Miller
 State of Florida, County of: St Lucie
 On This the 1 day of May, 2015
 by Denver Miller who is personally
 known to me or produced _____
 As identification: Tiffany Lee
 Notary Public
 My Commission Expires: 4-26-18

PERMIT 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!



NOTARY PUBLIC
 TIFFANY A. LEE
 MY COMMISSION # 101474
 EXPIRES: April 26, 2018
 Bonded Thru Barject Notary Services
 STATE OF FLORIDA



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

Site Provided by...
 governmax.com 1.11

Summary

Address 52 of 61

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
13-38-41-005-000-00090-3	27815	15 PALM RD, STUART	\$553,030	4/25/20

Owner Information

Owner(Current)	DIAZ CATHERINE A TR
Owner/Mail Address	15 PALM RD STUART FL 34996
Sale Date	7/30/1999
Document Book/Page	<u>1412 1893</u>
Document No.	
Sale Price	0

Searches

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

Location/Description

Account #	27815	Map Page No.	SP-05
Tax District	2200	Legal Description	PALM ROW REVISE & AMEND LOT 9 C 349/147
Parcel Address	15 PALM RD, STUART		
Acres	.3700		

Parcel Type

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

Functions

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

Assessment Information

Market Land Value	\$211,000
Market Improvement Value	\$342,030
Market Total Value	\$553,030

[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 140 mph

Pressure	Exposure C multiplier	Req. Design Pressure
29.7	X 1.35	= +40.095
-33.1	X 1.35	= -44.685

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

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
35.6	X 1.29	= 45.924(+)
40.2	X 1.29	= 51.858(-)

TABLE 1609.3.1
 EQUIVALENT BASIC WIND SPEEDS_{a,b,c}

V3S	85	90	100	105	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								
Roof Angle 0 - 10 degrees																	
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
Roof Angle > 10																	
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 m², 1 mph = 0.447 m/s, 1 psf = 47.88 N/m²

- 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

www.miamidade.gov/pera/

NOTICE OF ACCEPTANCE (NOA)

DAB Door Company, Inc.
12195 NW 98th 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: 9'- 4" Wide x 16' High Steel Sectional Garage Door w/ Window Lite Option

APPROVAL DOCUMENT: Drawing No. 01-09, titled "Sectional Garage Door", dated 02/01/2001, with last revision F dated 10/13/2011, sheets 1 through 5 of 5, 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 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 # 11-0119.21 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]
02/21/2012

NOA No. 12-0110.06
Expiration Date: August 9, 2016
Approval Date: March 1, 2012
Page 1

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS

1. Drawing No. **01-09**, titled "Sectional Garage Door", dated 02/01/2001, with last revision F dated 10/13/2011, sheets 1 through 5 of 5, prepared by Al-Farooq Corporation, signed and sealed by Javad Ahmad, P.E.

B. TESTS "Submitted under NOA # 09-0128.04"

1. Test reports on 1) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
2) Large Missile Impact Test per FBC, TAS 201-94
3) Cyclic Wind Pressure Loading per FBC, TAS 203-94
4) Forced Entry Test, per FBC 2411 3.2.1, TAS 202-94
along with marked-up drawings and installation diagram of a DAB 824 24 GA Sectional Garage Door with Fixed Windows, prepared by Hurricane Engineering & Testing, Inc, Test Reports No. **HETI-08-2149A/B**, dated 06/27/2008, signed and sealed by Candido F. Font, P.E.

"Submitted under NOA # 09-0128.04"

2. Test report of Tensile Test per ASTM E 8, Report No. **HETI 08-T182**, prepared by Hurricane Engineering & Testing, Inc., dated 12/23/2008, signed and sealed by Candido F. Font, P.E.

"Submitted under NOA # 03-0210.04"

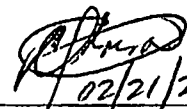
3. Test report on Salt Spray (Corrosion) Test per ASTM B 117 of a painted G-40 steel panels, prepared by Celotex Corporation, Test Report No. **258592**, dated 08/17/1998, signed by W. A. Jackson, P.E.

C. CALCULATIONS "Submitted under NOA # 09-0128.04"

1. Anchor verification calculations prepared by Al-Farooq Corporation, complying with F.B.C 2007, dated 12/19/08, signed and sealed by Humayoun Farooq, P.E.

D. QUALITY ASSURANCE

1. Miami-Dade Department of Permitting, Environment, and Regulatory Affairs (PERA)



02/21/2012

Carlos M. Utrera, P.E.

Product Control Examiner

NOA No. 12-0110.06

Expiration Date: August 9, 2016

Approval Date: March 1, 2012

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

E. MATERIAL CERTIFICATIONS

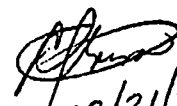
1. Notice of Acceptance No. **08-0305.02**, issued to SABIC Innovative Plastics, for their Lexan Sheet Products, approved on 04/24/2008 and expiring on 07/17/2013.
2. Notice of Acceptance No. **07-1016.07**, issued to Insulfoam, LLC, for their Insulfoam Expanded Polystyrene Insulation, approved on 11/29/2007 and expiring on 11/29/2012.
3. Notice of Acceptance No. **07-1107.08**, issued to Dyplast Products, LLC, for their Expanded Polystyrene Block Type Insulation, approved on 04/26/2007 and expiring on 08/27/2008.
4. Notice of Acceptance No. **07-0301.10**, issued to Dyplast Products, LLC, for their Dyplast ISO-C1 Polyisocyanurate Insulation, approved on 06/07/2007 and expiring on 01/11/2012.

"Submitted under NOA # 05-0228.02"

5. Test Report on Accelerated Weathering Using Xenon Arc Light Apparatus Test per ASTM G155 of "PVC Extrusion Material", prepared by Hurricane Engineering & Testing, Inc., Report No. **HETI 04-A002**, dated 09/27/2004, signed and sealed by Rafael E. Droz-Seda, P.E.
6. Test Reports on Tensile Test per ASTM D638 of "PVC Extrusion Material", prepared by Hurricane Engineering & Testing Inc., Report No. **HETI 04-T251**, dated 11/29/2004 signed and sealed by I. Ghia, P.E.
7. Test Report on Self-Ignition Temperature Test, Rate of Burn Test and Smoke Density Test of "REHAU non-foam PVC extrusion material", prepared by ETC Laboratories, Report No. **04-761-15019.0**, dated 05/06/2004, signed and sealed by J. L. Doldan, P.E.

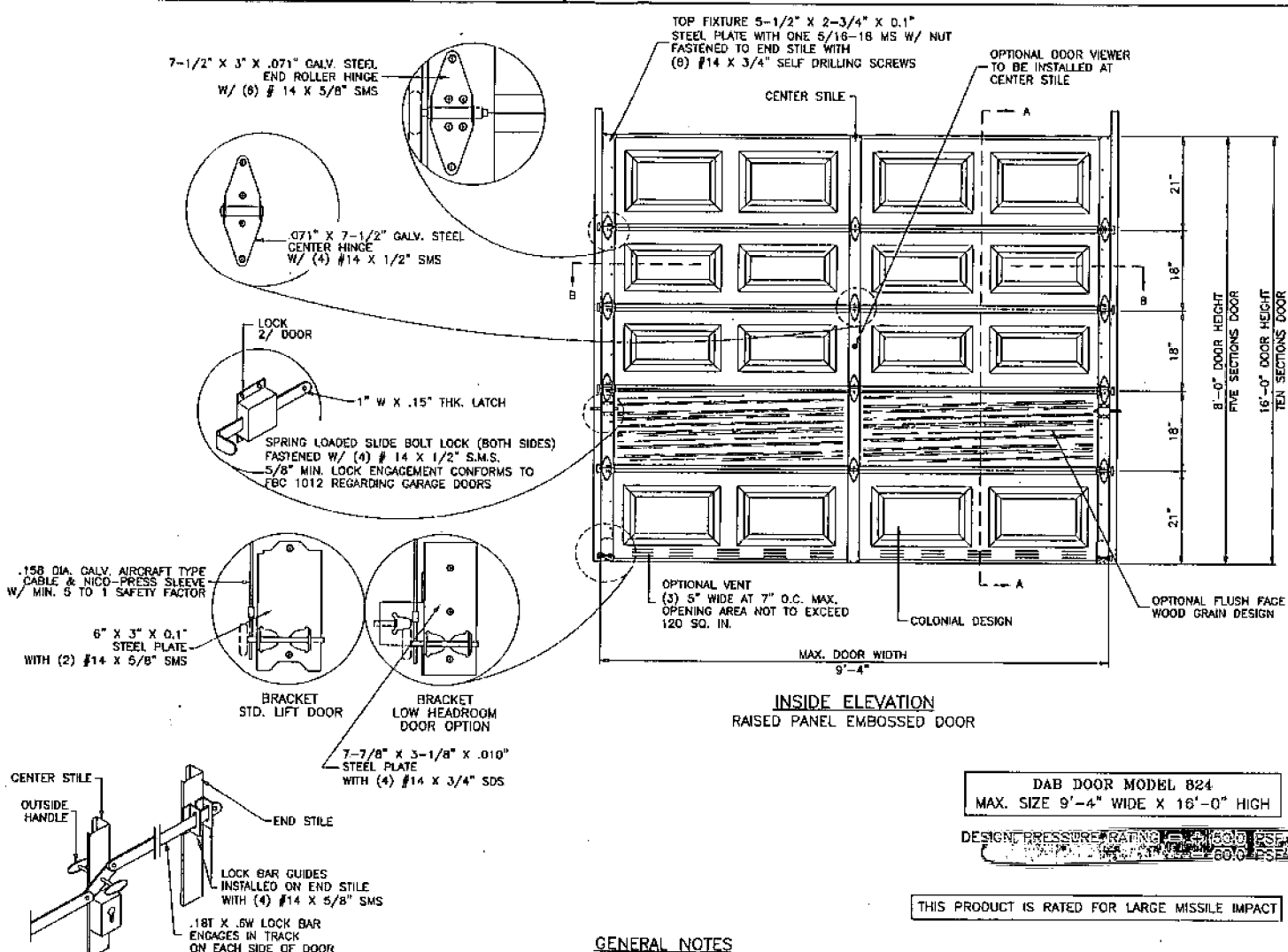
F. STATEMENTS

1. Statement letter of code conformance to 2010 FBC and no financial interest, issued by Al-Farooq Corporation, dated 10/26/2011, signed and sealed by Javad Ahmad, P.E.


102/21/2012

Carlos M. Utrera, P.E.
Product Control Examiner
NOA No. 12-0110.06
Expiration Date: August 9, 2016
Approval Date: March 1, 2012

DOOR HEIGHT	CONSISTS OF	
8'-0"	2 SECTIONS 18"	2 SECTIONS 21"
8'-0"	1 SECTION 18"	3 SECTIONS 21"
7'	4 SECTIONS 21"	
7'-3"		
7'-6"	8 SECTIONS 18"	
7'-9"	4 SECTIONS 18"	1 SECTION 21"
8'	3 SECTIONS 18"	2 SECTIONS 21"
8'-3"	2 SECTIONS 18"	3 SECTIONS 21"
8'-6"	1 SECTION 18"	4 SECTIONS 21"
8'-9"	5 SECTIONS 21"	
9'	6 SECTIONS 18"	
9'-3"	5 SECTIONS 18"	1 SECTION 21"
9'-6"	4 SECTIONS 18"	2 SECTIONS 21"
9'-9"	3 SECTIONS 18"	3 SECTIONS 21"
10'	2 SECTIONS 18"	4 SECTIONS 21"
10'-3"	1 SECTION 18"	5 SECTIONS 21"
10'-6"	6 SECTIONS 21"	
10'-9"	5 SECTIONS 18"	1 SECTION 21"
11'	5 SECTIONS 18"	2 SECTIONS 21"
11'-3"	4 SECTIONS 18"	3 SECTIONS 21"
11'-6"	3 SECTIONS 18"	4 SECTIONS 21"
11'-9"	2 SECTIONS 18"	5 SECTIONS 21"
12'	1 SECTION 18"	6 SECTIONS 21"
12'-3"	7 SECTIONS 21"	
12'-6"	6 SECTIONS 18"	2 SECTIONS 21"
12'-9"	5 SECTIONS 18"	3 SECTIONS 21"
13'	4 SECTIONS 18"	4 SECTIONS 21"
13'-3"	3 SECTIONS 18"	5 SECTIONS 21"
13'-6"	2 SECTIONS 18"	6 SECTIONS 21"
13'-9"	1 SECTION 18"	7 SECTIONS 21"
14'	8 SECTIONS 21"	
14'-3"	6 SECTIONS 18"	3 SECTIONS 21"
14'-6"	5 SECTIONS 18"	4 SECTIONS 21"
14'-9"	4 SECTIONS 18"	5 SECTIONS 21"
15'	3 SECTIONS 18"	6 SECTIONS 21"
15'-3"	2 SECTIONS 18"	7 SECTIONS 21"
15'-6"	1 SECTION 18"	8 SECTIONS 21"
15'-9"	9 SECTIONS 21"	
16'	8 SECTIONS 18"	4 SECTIONS 21"



OUTSIDE KEYED LOCK
 LOCK BAR LOCKING SHOWN ALTERNATE TO LOCKS SHOWN ABOVE

- GENERAL NOTES**
1. THIS PRODUCT HAS BEEN DESIGNED AND TESTED TO COMPLY WITH THE REQUIREMENTS OF THE FLORIDA BUILDING CODE, 2010 EDITION INCLUDING HIGH VELOCITY HURRICANE ZONE.
 2. ANCHORS SHALL BE AS LISTED, SPACED AS SHOWN ON DETAILS. ANCHOR EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO.
 3. ALL BOLTS, NUTS AND WASHERS SHALL BE ZINC PLATED CARBON STEEL.
 4. ANCHORING OR LOADING CONDITIONS OTHER THAN THOSE SHOWN IN THESE DETAILS ARE NOT PART OF THIS APPROVAL.
 5. A LOAD DURATION INCREASE IS USED IN DESIGN OF ANCHORS INTO WOOD ONLY.

Engr: JAWAD AHMAD
 CML
 P.A. PE # 70562
 C.A.N. 3558

NOV 07 2011
 NOV 07 2011

PRODUCT REVISED
 as complying with the Florida Building Code
 Expiration Date 12/01/2016

By: [Signature]
 Material Product Control

DAB DOOR MODEL 824
 MAX. SIZE 9'-4" WIDE X 16'-0" HIGH

DESIGN PRESSURE RATING: 150 PSF

THIS PRODUCT IS RATED FOR LARGE MISSILE IMPACT

af c

AL-FAROOQ CORPORATION
 ENGINEERS & PRODUCT DEVELOPMENT
 12295 S.W. 87 AVE.
 MIAMI, FLORIDA 33174
 TEL: (305) 264-8100 FAX: (305) 262-6878
 GARAGE 01-09DAB

SECTIONAL GARAGE DOOR

DAB DOORS INC.
 12195 N.W. 98 TH. AVE.
 HIALEAH GARDENS, FL. 33018
 TEL: (305) 566 - 8624

REV.	DATE	DESCRIPTION
B	07/23/03	ISSUED FOR FBC DOOR VIEWER 02
C	08/11/05	UPDATED FOR 2004 FBC
D	02/28/06	REV. PER 9000 COMMENTS
E	12/23/08	UPDATED FOR 2007 FBC
F	10/13/11	UPDATED TO 2010 FBC

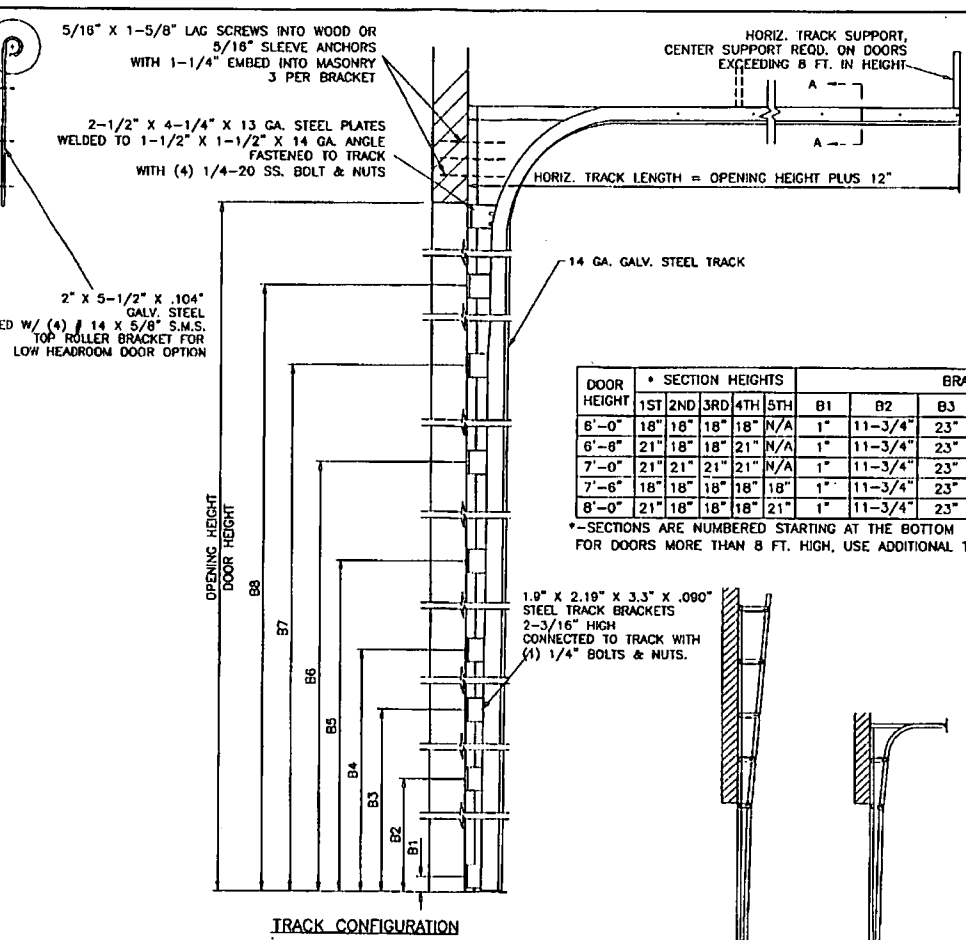
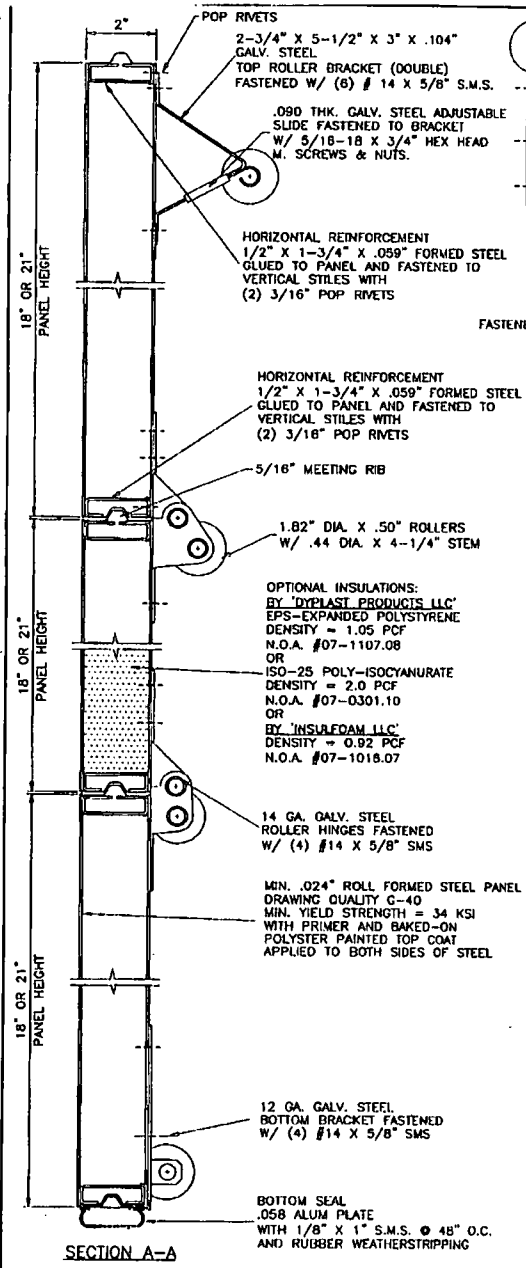
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Dr. By: HAMD

CML By:

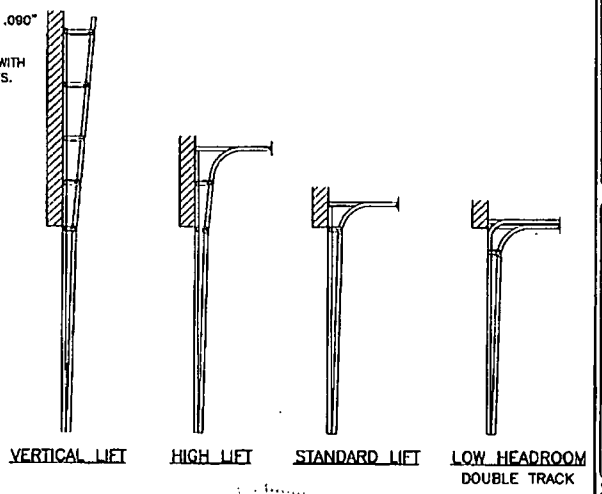
drawing no. **01-09**

sheet 1 of 5



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'-8"	21"	18"	18"	21"	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.



AVAILABLE TRACK OPTIONS

Engr. JAVAD AHMAD
CIVIL
FLA. PE # 70592
C.A.N. 3538

PRODUCT REVISED as complying with the Florida Building Code
Acceptance No 12-0110,06
Expiration Date 08/09/2016

By: *[Signature]*
Manufacture Product Control

date: 02-01-01
scale: -
cr. by: HAMID
chk. by:

drawing no. 01-09
sheet 3 of 5

AL-FAROQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
2325 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL. (305) 264-8100 FAX. (305) 263-9878
GARAGE\01-08D(3)

SECTIONAL GARAGE DOOR
DAB DOORS INC.
12,195 N.W. 88 TH. AVE.
HIALEAH GARDENS, FL 33018
TEL. (305) 556 - 6624

NO.	DATE	BY	DESCRIPTION
A			NO CHANGE THIS SHEET
B	10/23/04		ANCHOR SPACING REV.
C	10/11/05		REV. PER BIDD COMMENTS
D	02/28/06		UPDATED FOR 2007 IBC
E	11/23/08		NO CHANGE THIS SHEET
F	10/13/11		NO CHANGE THIS SHEET

WOOD FRAME BUILDINGS

STUD WALLS OR DOOR OPENING (NOT BY DAB DOORS) SHALL BE FRAMED SOLID BY NOT LESS THAN (3) 2X6 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 2X6 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 20" O.C. INTO BLOCK WALL, WITH 2-1/4" MIN. EMBED 18" O.C. INTO 3000 PSI CONCRETE, WITH 1-3/4" MIN. EMBED 2-1/2" MIN. EDGE DISTANCE

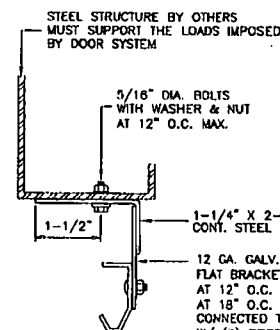
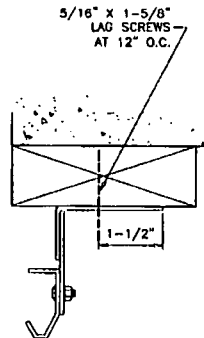
1/4" TAPPER BY 'POWERS' WITH SPACING OF 14" O.C. INTO BLOCK WALL, WITH 1-1/2" MIN. EMBED 16" O.C. INTO 3000 PSI CONCRETE, WITH 1-3/4" MIN. EMBED 3" MIN. EDGE DISTANCE

3/8" CONFLX BY 'ELCO' OR 3/8" LDT BY 'ITW' WITH SPACING OF 17" O.C. INTO BLOCK WALL, WITH 1-1/4" MIN. EMBED, 4" MIN. EDGE DIST. 18" O.C. INTO 3000 PSI CONCRETE, WITH 1-1/4" MIN. EMBED AND 2-1/2" MIN. EDGE DISTANCE

3/8" HLC SLEEVE BY 'HILTI' WITH SPACING OF 17" O.C. INTO BLOCK WALL, WITH 1-1/4" MIN. EMBED, 4" MIN. EDGE DIST. 18" O.C. INTO 3000 PSI CONCRETE, WITH 1-1/4" MIN. EMBED AND 2-1/2" MIN. EDGE DISTANCE

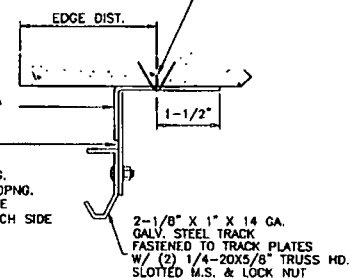
THE BLOCK WALL CELLS SHALL BE GROUT FILLED AND REINFORCED WITH FOUR # 5 BARS EXTENDING INTO FOOTING AND INTO THE BEAMS ALL BARS SHALL BE CONTINUOUS FROM THE BEAMS TO FOOTING.

PREPARATION OF JAMBS BY OTHERS



ANCHORS		ANCHOR SPACING		
ANCHORS	STRUCTURE	EMBED	SPACING	EDGE DIST.
3/8" HLC SLEEVE BY 'HILTI'	CONC.	1-1/4"	8"	1-5/8"
3/8" HLC SLEEVE BY 'HILTI'	FILLED BLOCK	1-1/4"	8"	4"
3/8" DYNABOLT BY 'ITW'	CONC.	1-1/2"	8"	2"
3/8" DYNABOLT BY 'ITW'	FILLED BLOCK	1-1/2"	8"	3-3/4"
3/8" POWER-BOLT BY 'POWERS'	CONC.	2"	8"	1-7/8"
3/8" SLEEVE-ALL BY 'SIMPSON'S'	CONC.	1-1/2"	8"	1-7/8"

CONCRETE f'c = 3000 PSI MIN.
C-90 GROUT FILLED BLOCK f'm = 2000 PSI MIN.



ALTERNATE TRACK INSTALLATION

Engr: JAVAD AHMAD
CIVIL
FLA. PE # 70592
C.A.M. 3530
NOV 27 2011

PRODUCT REVISED
as complying with the Florida Building Code
Acceptance No 12-0110-06
Expiration Date 08/09/2016
By: [Signature]
Miami Dade Product Control

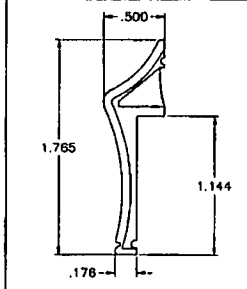
af c
AL-FAROOQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
1239 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL: (305) 264-8300 FAX: (305) 262-8978
GARAGE VOT-09DAB

SECTIONAL GARAGE DOOR
DAB DOORS INC.
12195 N.W. 98 TH. AVE.
HIALEAH GARDENS, FL 33018
TEL: (305) 556 - 6624

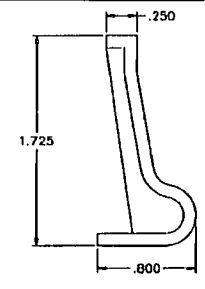
NO.	DATE	BY	DESCRIPTION
B	07.23.04		NO CHANGE THIS SHEET
C	08.11.04		ANCHOR SPACING REV
D	02.28.06		REV. PER BOOZ CONSULTANTS
E	12.22.06		UPDATES PER 2007 IBC
F	10.13.11		NO CHANGE THIS SHEET

date: 02-01-01
book: -
dr: DR. HANID
chk: BY
drawing no.
01-09
sheet 4 of 5

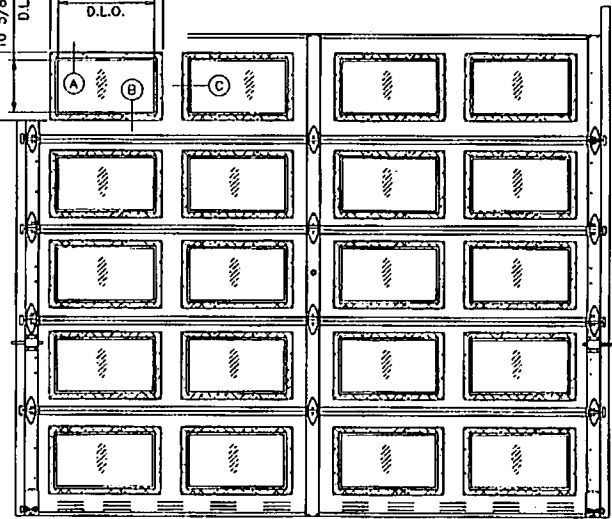
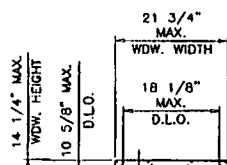
* PLASTIC COMPLIES WITH SECTION 2612 OF FBC 2007 SEE EVIDENCE PAGE



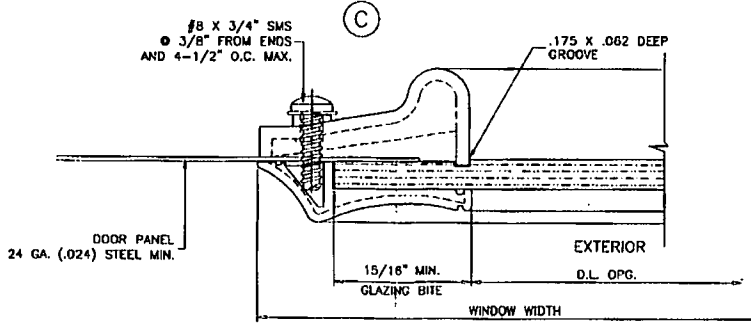
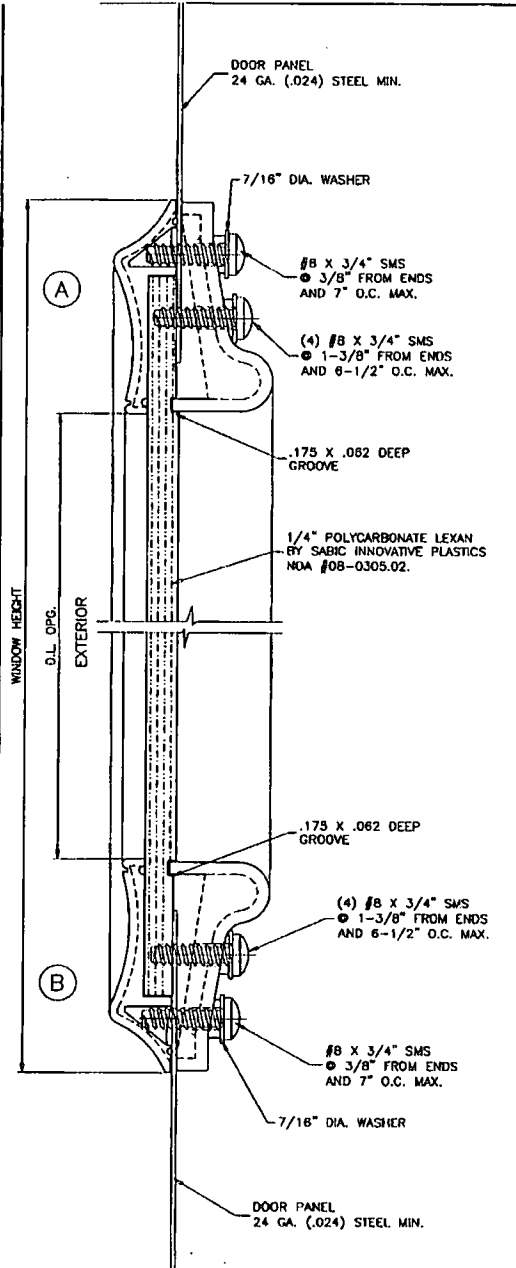
* EXTERIOR FRAME
RIGID PVC ONE PIECE INJECTION



* INTERIOR FRAME
RIGID PVC ONE PIECE INJECTION



INSIDE ELEVATION
RAISED PANEL EMBOSSED DOOR WITH OPTIONAL WINDOWS



Engr: JAVAD AHMAD
CIVIL
FLA. PE # 70592
C.A.N. 3638

NOV 07 2011

PRODUCT REVISED
as complying with the Florida
Building Code
Acceptance No. 12-0110.06
Expiration Date 02/10/2016

By: [Signature]
Metal Edge Product Control

afc
AL-FAROQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
12335 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL: (305) 264-8100 FAX: (305) 262-5978
GARAGE\01-09DAB

SECTIONAL GARAGE DOOR
DAB DOORS INC.
12195 N.W. 98 TH. AVE.
HIALEAH GARDENS, FL 33018
TEL: (305) 556 - 6824

REVISIONS:

NO.	DATE	BY	DESCRIPTION
1	10/23/10	MS	CHANGE 2ND SHEET
2	10/11/10	ANWAR	SPACING REV.
3	10/28/10	REV.	FOR BIDD COMMENTS
4	1/22/10	E	UPDATED FOR 2007 FBC
5	1/10/11	F	NO CHANGE THIS SHEET

date: 02-01-11
sheet: 01-09
drawing no. 01-09
sheet 5 of 5

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # 331

Date Issued 3/6/97

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

Owner RAFAEL DIAZ Address 5125 S.W. WOODHAM ST PALM CITY Phone 283-7870

Contractor RAFAEL DIAZ Address 5125 S.W. WOODHAM ST Phone 283-7870

Number of trees to be removed(list kinds of trees) 14 PALMS, OAKS, HICKORY

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

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

AT FINAL OF JOB

Permit Fee \$ 100.00 (~~\$5.00~~^{25.00} for first tree plus ~~\$1.00~~^{10.00} for each additional tree - not to exceed \$25.00)

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

Plans approved as submitted _____ Plans approved as marked _____

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

Signature of applicant Rafael Diaz Date submitted 3/6/97

Approved by Building Inspector [Signature] Date 3/6/97

Approved by Building Commissioner _____ Date _____

Completed _____ Date _____ Checked by _____

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

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

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

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

No permit required for:

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

Permit Fee:

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

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

Application procedures:

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

Owner Catherine/Ralph DIAZ Address 15 Palm Rd Phone 283-7870

Contractor - SA - OWNER Address _____ Phone _____

No. of Trees: REMOVE (1) Type: AVACADO

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

No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: OK to remove, hazard

Written statement giving reasons: PLANTED SEED - TREE HAS GROWN STRAIGHT UP WITHOUT SIDE BRANCHES - LEAVES TOWARD HOUSE - FEAR OF DAMAGE IF WINDS CAUSE IT TO BREAK

Signature of Applicant Catherine Diaz Date 10/07/03





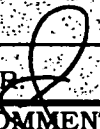
Approved by Building Inspector [Signature] Date 6/8/03 Fee: 0

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

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/18, 2008 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6355	PARADISE	TIE BEAM	Passed	
(5)	11 RIDGE LANE TODD CUSTOM HOMES			INSPECTOR: 
6312	LUTZ	Remodel		after 10:00
(7)	6 RIVERVIEW SOUTHERN EXPOSURE	KITCHEN + Stairway Interior Panel	Passed	INSPECTOR: 
6131	PREFFER	FINAL ROOFING	Passed	
(10)	104 HENRY SEWALL HEATON ROOFING			INSPECTOR: 
6330	BUSSEY	TIE BEAM	Passed	
(4)	1 PALMETTO	Balcony		INSPECTOR: 
FREE	DIAZ	TREES	Passed	
(12)	15 PALM ROAD			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
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

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 CATHERINE DIAZ Address 15 Palm Rd Phone 283-7870

Contractor BERNIE'S TREE SERVICE Address _____ Phone _____

No. of Trees: REMOVE (1) Species: DISEASED HICKORY

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

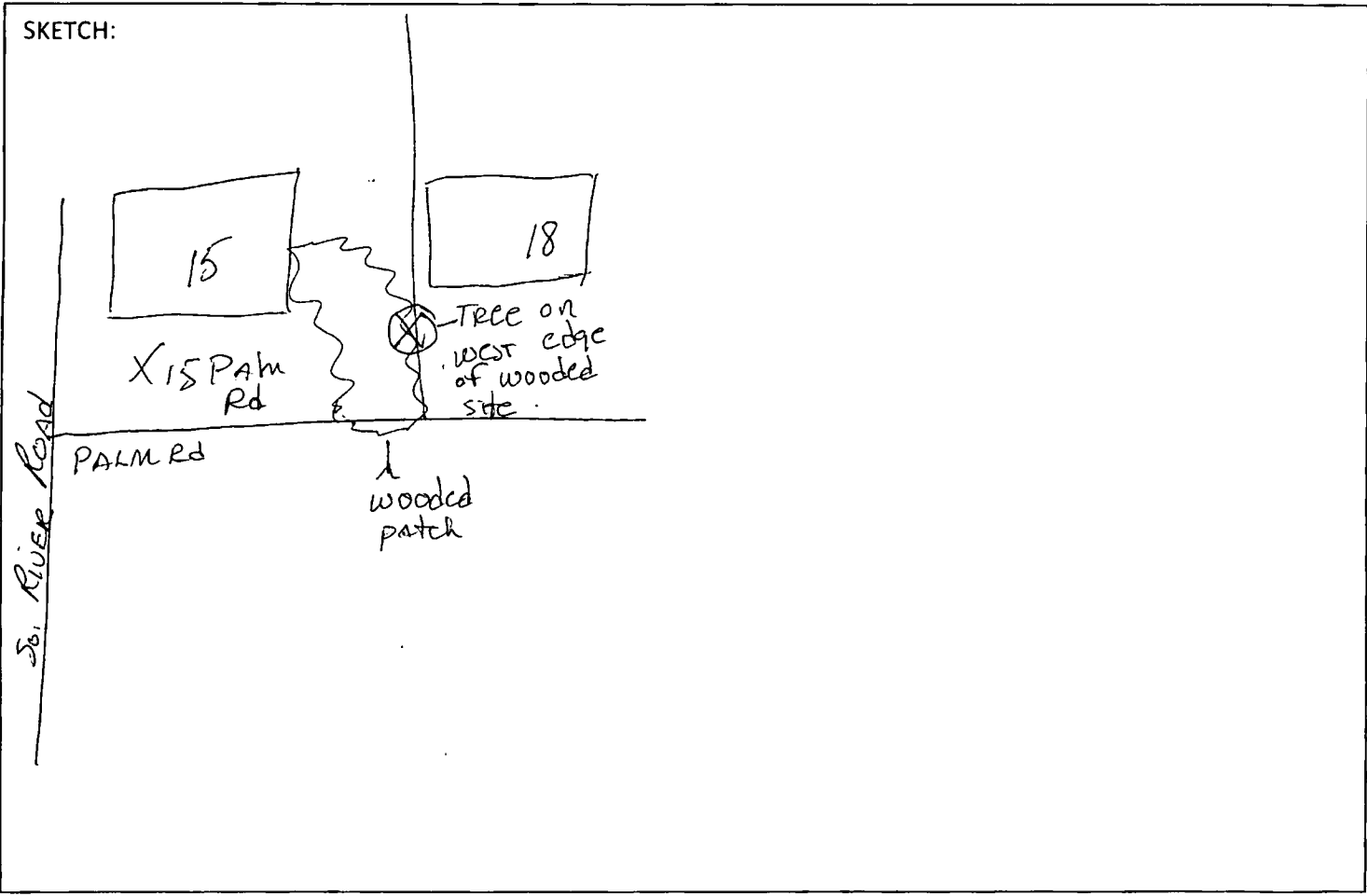
ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

Reason for tree removal /relocation (See notice above) Fungus DISEASE - interior of tree compromised - possibility of falling on house on either side

Signature of Property Owner Catherine Diaz Date 04-09-08

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

NOTES: _____



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 4-8-11 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9968	R Fleetwood 34 No River Rd Zona Center Elec	Pool Inspec SEAGATE BUILDERS	 PASS	 INSPECTOR <i>[Signature]</i>
9909	Twohey 112 Henry Sewall Zona Center Elec	Pool Inspec SEAGATE BUILDERS	 PASS	 INSPECTOR <i>[Signature]</i>
9901	Demarkavian 19 Castle Hill Steve Conway	Roof Metal \$ Dry - in	 PASS	 INSPECTOR <i>[Signature]</i>
10:00	85 N. S Pt Rd	Temp Structures WALK THROUGH	OK	INSPECTOR
9908	Fleetwood 34 No River Rd SEAGATE BUILDERS	STEM WALL	PASS	INSPECTOR
	34 No River Rd TOWN OF SEWALLS POINT	SKYLIGHT	NO PERMIT	INSPECTOR
				INSPECTOR

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

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 CATHERINE DIAZ Address ~~153 Palm Rd~~ Phone 283-7870

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE ① Species: Hickory

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

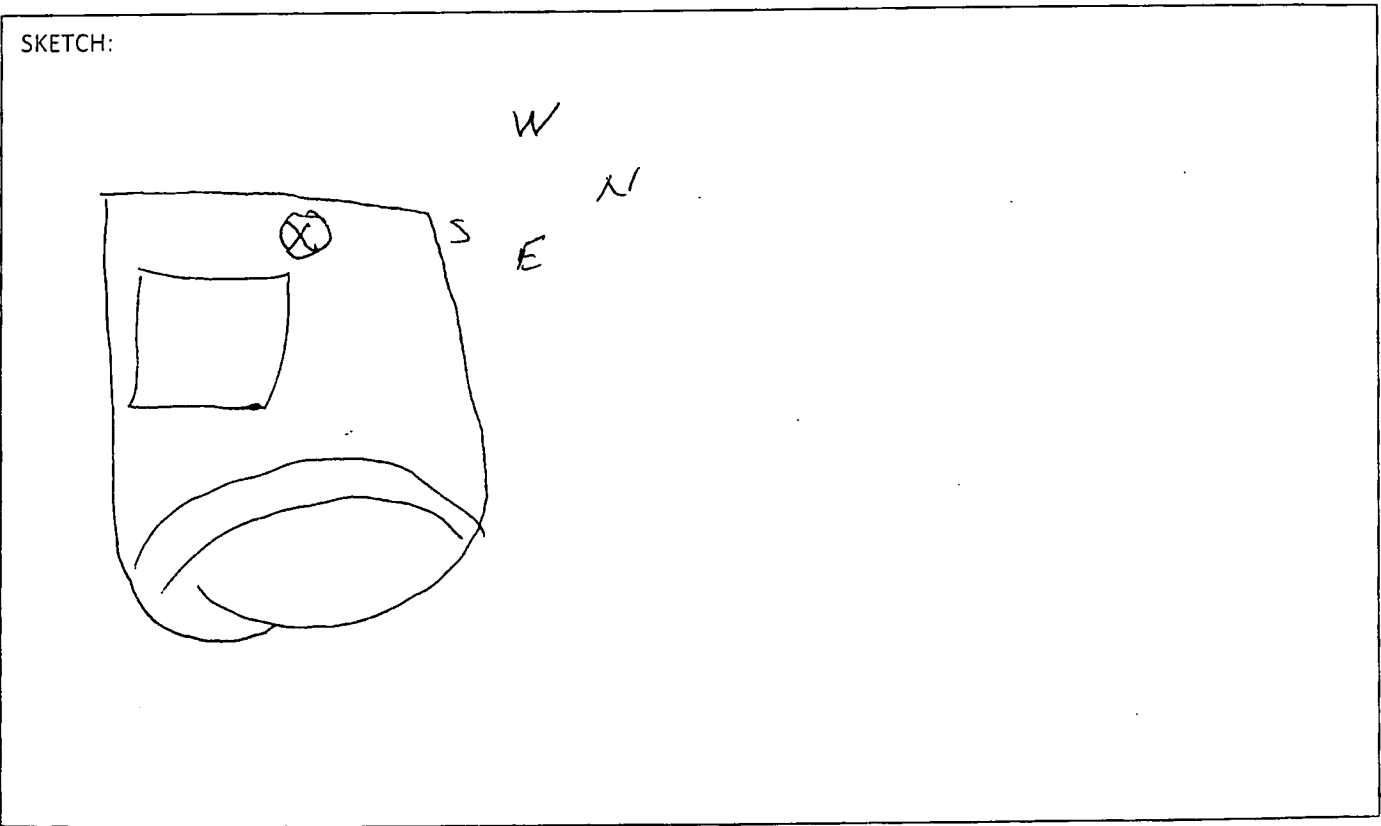
ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY

Reason for tree removal /relocation (See notice above) TREE infested with bores

Signature of Property Owner Catherine Diaz Date 10-12-12

Approved by Building Inspector: [Signature] Date 10-16-12 Fee: N/C

NOTES: _____



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

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 CATHERINE DIAZ Address 15 Palm Rd Phone 772-283-7870

Contractor BERNIE'S TREE SERVICE Address _____ Phone _____

No. of Trees: REMOVE 1 Species: HICKORY

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) _____

TREE DEAD DUE to pine BORERS

Signature of Property Owner Catherine Diaz Date 12-4-13

Approved by Building Inspector: [Signature] Date 12-9-13 Fee: N/A

NOTES: _____

