

4 Palmetto Drive

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

DO NOT REMOVE UNTIL JOB IS COMPLETED

OWNER Mr & Mrs Paul + Annie Hemmers
CONTRACTOR Page 2000, Inc
LOT 15 BLOCK _____ SUB Palmetto
NO. Palmetto drive St. or Ave.

NO. 2394 Date Issued 8/12/88

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

TOWN OF SEWALL'S POINT BUILDING PERMIT

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

REQUIRED INSPECTIONS	INSPECTOR'S FINDING	INSPECTOR'S SIGNATURE
1. LOT STAKES/SET BACKS		
2. TERMITE PROTECTION	ABSOLUTE PEST 9-29-88	
3. FOOTING - SLAB	OK 8-29-88	
4. ROUGH PLUMBING	OK 9/22/88	DB
5. ROUGH ELECTRIC	OK 11/9/88	DB
6. LINTEL	OK 10/11/88	DB
7. ROOF	OK 11/9/88	DB
8. FRAMING	OK 11/9/88	DB
9. INSULATION	OK 11/11/88	DB
10. A/C DUCTS	OK 11/9/88	DB
11. FINAL ELECTRIC		
12. FINAL PLUMBING		
13. FINAL CONSTRUCTION		

TO CONSTRUCT Residence

REMARKS:

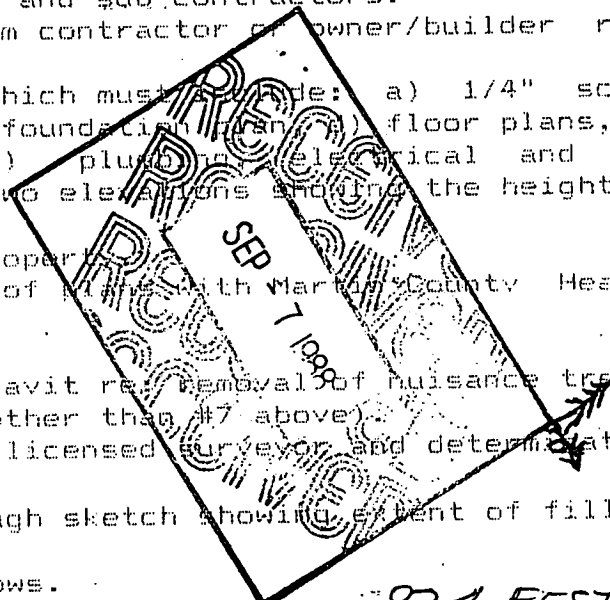
TOWN OF SEWALL'S POINT, FLORIDA
 APPLICATION FOR PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

PERMIT NUMBER

DATE OF APPLICATION

To obtain a permit the following are required:

1. Florida certification of builder and sub-contractors.
2. Certification of insurance from contractor or owner/builder re: liability and workers compensation.
3. Two sets of building plans which must include: a) 1/4" scale building drawings, b) plot plan, c) foundation plan, d) floor plans, e) wall and roof cross-sections, e) plumbing, electrical and air conditioning layouts, f) at least two elevations showing the height of building from finished floor.
4. Recorded warranty deed to the property.
5. Septic tank permit and one set of plans with Martin County Health Department seal.
6. Energy code calculations.
7. Notarized copy of attached affidavit re: removal of nuisance trees.
8. Tree removal permit (for trees other than #7 above).
9. Certification of elevation from licensed surveyor and determination of flood zone.
10. Amount of fill anticipated - rough sketch showing extent of fill on lot.
11. Manufacturer's schedule of windows.



Owner PAUL & ANNE HEMMERS Current Address 824 FESTIVO CT.
 Telephone 879-3014 P.S.L. FL. 33452
 General Contractor PACE 2000, INC. Address 10766 S. U.S. 1
 Telephone 335-7223 P.S.L. FL. 34953
 Where Licensed FLORIDA License Number CGC 024776
 Plumbing Contractor STILL PLUMBING! License Number 1391
 Electrical Contractor HERNDON ELEC. License Number ME 00161
 Roofing Contractor PACE 2000, INC. License Number 5638
 A/C Contractor COMFORT CONTROL License Number 5071

Describe the building or alterations NEW 3 B.R. / 2 BATH PRIVATE RES. W/ ATTACHED GARAGE
 Name the street on which the building, its front building line and its front yard will face 4 PALMETTO DRIVE

Subdivision PALMETTO PARK Lot 15 Block ---
 Building area (inside walls) 1,948 Garage, porch, carport area 1111
 Contract price (excluding carpet, land, appliances, landscaping) \$ 100,400.00
 Cost of permit ~~\$50~~ \$320 approved as submitted as marked

- In addition, the following are understood by owner and contractor:
1. Building area inside walls must be a minimum of 1,500 square feet.
 2. Building permit fees are \$5. per \$1,000. of the cost of the building, plus \$10. each for plumbing, electric, a.c. and roof. For example a \$100,000. building x \$5. = \$500. plus \$40. (a.c., pl., el., roof) = \$540. cost of permit + \$365. impact fee = \$905. total.
 3. If no contract is submitted as proof as cost, the permit will be based on \$60. per square foot (inside walls) and \$25. per square foot (other areas).
 4. The Town has adopted the South Florida Building Code as a part of its ordinances.
 5. Building permits are issued for one year's duration.
 6. Construction must be started within 180 days or permit will be subject to revocation and forfeiture of fee.
 7. ALL changes in plans must be approved by the Building Department.
 8. Work hours are 8:AM to 5:PM Monday through Friday. NO SUNDAY WORK
 9. Portable toilets must be on all construction sites.
 10. Inspections are made Monday through Friday, 8:AM to Noon, 1:PM to 4:PM. 24 hour notice is required prior to all inspections.
 11. String lines along property lines to facilitate set back inspections.

12. Before a certificate of occupancy is issued, the following are required:
- a. An owner's affidavit of building cost (form available) any discrepancy between the original fee and final fee (based on affidavit) will be adjusted.
 - b. Approval of septic tank installation by Martin Co. Health Dept.
 - c. Rough grading and clean up of grounds.
 - d. Affidavit from licensed surveyor showing slab elevation (if in "A" zone).
 - e. Certification by a qualified engineer or architect of the structural adequacy of the building.

13. THIS SUMMARY IS NOT A SUBSTITUTE FOR TOWN ORDINANCES. APPROVAL OF THE BUILDING PLANS IN NO WAY RELIEVES THE OWNER OR CONTRACTOR FROM COMPLIANCE WITH TOWN ORDINANCES.

Contractor's Signature [Signature] Kochen
 Owner's Signature [Signature] Paul Hemmers
 Approval by Building Inspector [Signature] Dale Bunn Date 9/6/88
 Approval by Building Commissioner _____ Date _____
 Certificate of Occupancy issued [Signature] Dale Bunn Date 12/31/88

Addendum A

Owner PAUL H. TANNING HEMMERS

Additions and Agreements

Items below have priority over the specifications

Item	\$
1. Base Model. <u>FLAMINGO 3/2 BRADLEY STYLE</u>	75,900
2. Impact Fee Allowance <u>MARTIN COUNTY</u>	659.00
3. <u>MARTIN COUNTY - BUILDER FEE</u>	2,950.00
4. <u>WATER CONDITIONER BY OWNER</u>	
5. <u>GUTTERS IN FRONT AS MODEL FOR SEPTIC</u>	345.00
6. <u>EXTRA CONCRETE FOR DRIVE 7x14 = 112 @ 2.25</u>	252.00
7. <u>CUT + PREPARE TOWN ROAD FOR DRIVE ALLOWANCE</u>	650.00
8. <u>CREDIT SOD</u>	- 753.00
9. <u>" DINNER RM FIX 163.62</u>	- 163.62
10. <u>GARAGE SERVICE DOOR, PAD, L.I.F. & SW</u>	325.00
11. <u>4' WINDOW REAR GAR WLN</u>	150.00
12. <u>RD. TOP WINDOW TRIM GAR. END ALLOWANCE</u>	650.00
13. <u>BIRGGS ELONGATED COLOR TOILET</u>	120.00
14. <u>EXTRA PAINT</u>	245.00
15. <u>KOOL DECK ON PORCH</u>	831.00
16. <u>FIRE PLACE</u>	2,200.00
17. <u>BOOK SHELVES IN LIV. RM</u>	395.00
18. <u>1/2" TACK @ 2 EXTRA CLOSET SPACE ALLOW</u>	250.00
19. <u>(LIKE LIV. RM SHELVES)</u>	
20. <u>EXTRA SIDEWALK CONC. ALLOWANCE</u>	168.00
21. <u>CARDINAL POOL - W.F. + RAISED DK.</u>	- 1,150.00
22. <u>SCR. ENCLURE</u>	- 3,300.00
23. <u>MILKON RESISTANT STAINLES</u>	- 785.00
24.	
25.	100,930.00
26.	+ 245.00
27.	FROM SHT #2 { 35.00
28. <u>OCCUPANCY BY</u>	105.00
29. <u>END OF NOV. OR MID. DEC.</u>	\$ 101,315.00
30.	915.00
31.	753
32.	163
33.	\$ 9,160.00
34.	\$ 100,400.00
35.	
36.	
37. <u>OWNER WILL FURNISH A/C RING TO</u>	
38. <u>INSTALL LOW IN GAS BURN WALL</u>	
39. <u>CREDIT FOR DEN CLOSET</u>	
40. <u>STUB OUT FOR FUTURE CITY WATER</u>	

6/29/88 150' wide x 134.79 DEEP

Witness Frank Supt Buyer Paul Hemmers

Witness _____ Buyer Paul Hemmers

Witness _____ Contractor Paul Hemmers

STATE OF FLORIDA Department of Professional Regulation
CONSTRUCTION INDUSTRY LICENSING BOARD

DATE: **06/03/87** LICENSE NO. **CG-024776** BATCH NO. **08174**

THE CERTIFIED GENERAL CONTRACTOR
NAMED BELOW IS CERTIFIED
UNDER THE PROVISIONS OF CHAPTER 489 FOR
THE YEAR EXPIRING JUNE 30, 1989

KOEHNEN, HARVEY EDWARD
PACE-2000 INC
10766 S US 1
PORT ST. LUCIE FL 33452

Bob [Signature]
GOVERNOR

DISPLAY IN A CONSPICUOUS PLACE

40 (11/83)



CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

07/21/88

PRODUCER



Rick Carroll Insurance Agency
P.O. Box 877
Jensen Beach, FL 34958

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

COMPANIES AFFORDING COVERAGE

COMPANY LETTER **A**

Continental Insurance Company

COMPANY LETTER **B**

The Builders Trust

COMPANY LETTER **C**COMPANY LETTER **D**COMPANY LETTER **E**

INSURED

Pace 2000, Inc.
10766 So. US Hwy. #1
#104
Port St. Lucie, FL 34952

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS		
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCURRENCE <input type="checkbox"/> OWNER'S & CONTRACTORS PROTECTIVE	37CBP603193189	05/26/88	05/26/89	GENERAL AGGREGATE		\$ 1,000
					PRODUCTS-COMP/OPS AGGREGATE		\$ 1,000
					PERSONAL & ADVERTISING INJURY		\$ 1,000
					EACH OCCURRENCE		\$ 1,000
					FIRE DAMAGE (ANY ONE FIRE)		\$ 50,
					MEDICAL EXPENSE (ANY ONE PERSON)		\$ 5,
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY	37CBP603193189	07/25/88	07/25/89	CSL	\$ 1,000	
					BODILY INJURY (PER PERSON)	\$	
					BODILY INJURY (PER ACCIDENT)	\$	
					PROPERTY DAMAGE	\$	
					EACH OCCURRENCE	\$	
B	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY	05074	03/01/88	03/01/89	STATUTORY		
					\$ 100	(EACH ACCIDENT)	
					\$ 500	(DISEASE-POLICY LIMIT)	
					\$ 100	(DISEASE-EACH EMPLOYEE)	
OTHER							

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

Carpentry-Dwellings

CERTIFICATE HOLDER

St. Lucie County Contractors,
Certification & Licensing Division
2300 Virginia Ave.
Room #201
Ft. Pierce, FL 34982

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Keith Carroll

683762

PARCEL I.D.# _____

THIS WARRANTY DEED Made this 12th day of November, A.D. 1987 by WAYNE J. JOHNSON and MARTHA COLLINS JOHNSON, his wife, hereinafter called the grantor, to PAUL H. HEMMERS and ANNE HEMMERS, his wife, whose postoffice address is 824 Festivo Court, Port St. Lucie, Florida, 34952, hereinafter called the grantee:

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

Lot 15, PALMETTO PARK, according to the plat thereof, filed June 11, 1957, and recorded in Plat Book 3, Page 66, Martin County, Florida, public records.

SUBJECT TO restrictions, conditions, limitations, easements and reservations of record.

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

TO HAVE AND TO HOLD the same in fee simple forever.

AND the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes subsequent to December 31, 1987.

IN WITNESS WHEREOF, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

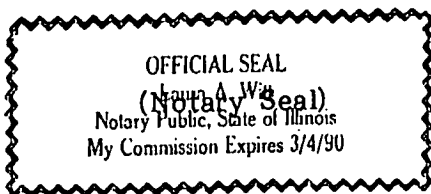
Elizabeth Taylor Swenson
520 GREENBAY, WINNETKA, IL
Jana A. Witt
520 GREENBAY RD. WINNETKA, IL

Wayne J. Johnson
WAYNE J. JOHNSON
Martha Collins Johnson
MARTHA COLLINS JOHNSON

STATE OF ILLINOIS)
COUNTY OF COOK)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared WAYNE J. JOHNSON and MARTHA COLLINS JOHNSON, to me known to be the person(s) described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

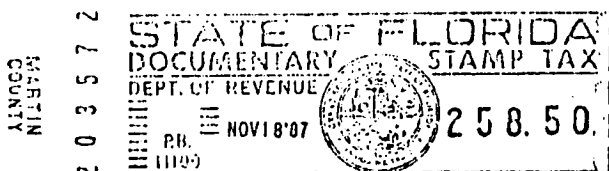
12th WITNESS my hand and official seal in the County and State last aforesaid this day of November, A.D. 1987.



Jana A. Witt
Notary Public
My Commission Expires: 3-4-90

This Instrument prepared by:

BOOK 742 PAGE 2453



NOV 18 A10:42
D.C. 11

NOTICE OF COMMENCEMENT

THE UNDERSIGNED HEREBY INFORMS ALL CONCERNED THAT IMPROVEMENTS WILL BE MADE TO CERTAIN REAL PROPERTY, AND, IN ACCORDANCE WITH SECTION 713.13 OF THE FLORIDA STATUTES, THE FOLLOWING INFORMATION IS STATED IN THIS NOTICE OF COMMENCEMENT. THIS NOTICE SHALL BE VOID AND OF NO FORCE AND EFFECT IF CONSTRUCTION IS NOT COMMENCED WITHIN 30 DAYS OF RECORDATION.

Legal Description of Property(include street address, if available)

LOT 15 PALMETO PARK
PALMETO DRIVE SEWALLS POINT

General Description of Improvements: SINGLE FAMILY RESIDENCE
3 B.R. / 2 BATH W/ ATTACHED GARAGE

Owner: PAUL & ANNE HEMMERS

Address: 827 FESTIVO COURT, P.S.L., FL, 33452

Owner's interest in site of the improvement:

Fee Simple Title holder(if other than owner):

Name:

Address:

Contractor:

Address:

Surety(if any):

Address: Amt. of bond \$

Any person making a loan for the construction of the improvements:

Name: NONE

Address:

Person within the State of Florida designated by owner upon whom notices or other documents may be served:

Name:

Address:

In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(h), Florida Statutes. (Fill in at Owner's option).

Name:

Address:

This Space For Recorder's Use Only

Paul Hemmers
Anne Hemmers
Owner's Signature
Sworn to and subscribed before me
this 7 day of April 1988

PSG

MARTIN COUNTY PUBLIC HEALTH UNIT
131 East 7th Street
Stuart, Florida, 34997
287-2277

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: PACE 2000 / HEMMERS
LEGAL DESCRIPTION: LOT 15 Palmetto Park
SEPTIC TANK PERMIT NUMBER: HD 98-516

The items noted below must be certified by a surveyor or engineer and returned to the Health Department prior to the first plumbing inspection by the Building Department.

- 1. Building Permit Number: _____.
- 2. I certify that the elevation of the top of the lowest plumbing stubout is _____ inches above benchmark elevation as indicated on septic tank permit.
- 3. I certify that the top of the lowest building plumbing stubout is _____ inches above crown of road elevation shown on septic tank permit.
- 4. I certify that all severe limited soil has been removed from an area of _____ feet by _____ feet to a minimum depth of six (6) feet below top of required stubout elevation. Submit plot plan to scale of excavated area.

Date Observed: _____

- NOTE: a. Severe limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
- b. Drainfield must be centered in the excavated area. Please set stakes to identify the excavated area boundaries. Drainfield will not be approved if severe limited soils are not removed.

CERTIFIED BY: _____

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

Date: _____ Job Number: _____

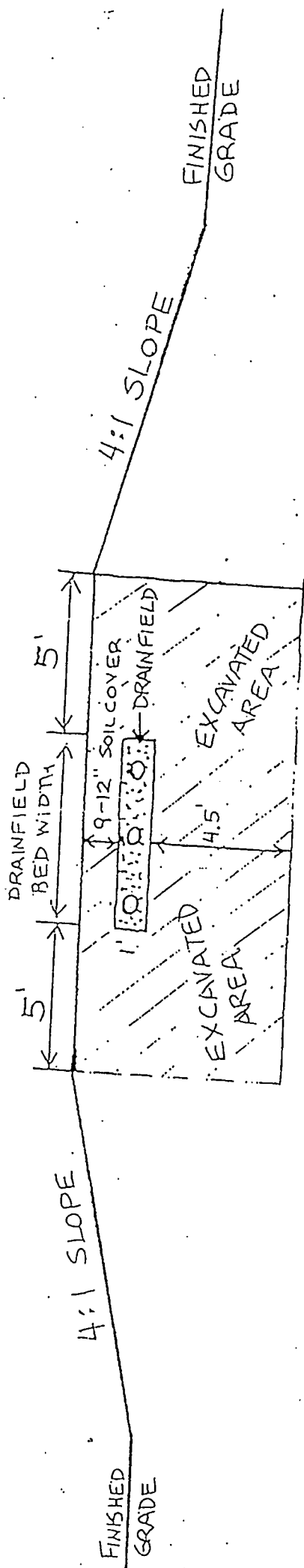
Andrew D. Edwards
(Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

(Signature of Environmental Health Specialist)

(Date)

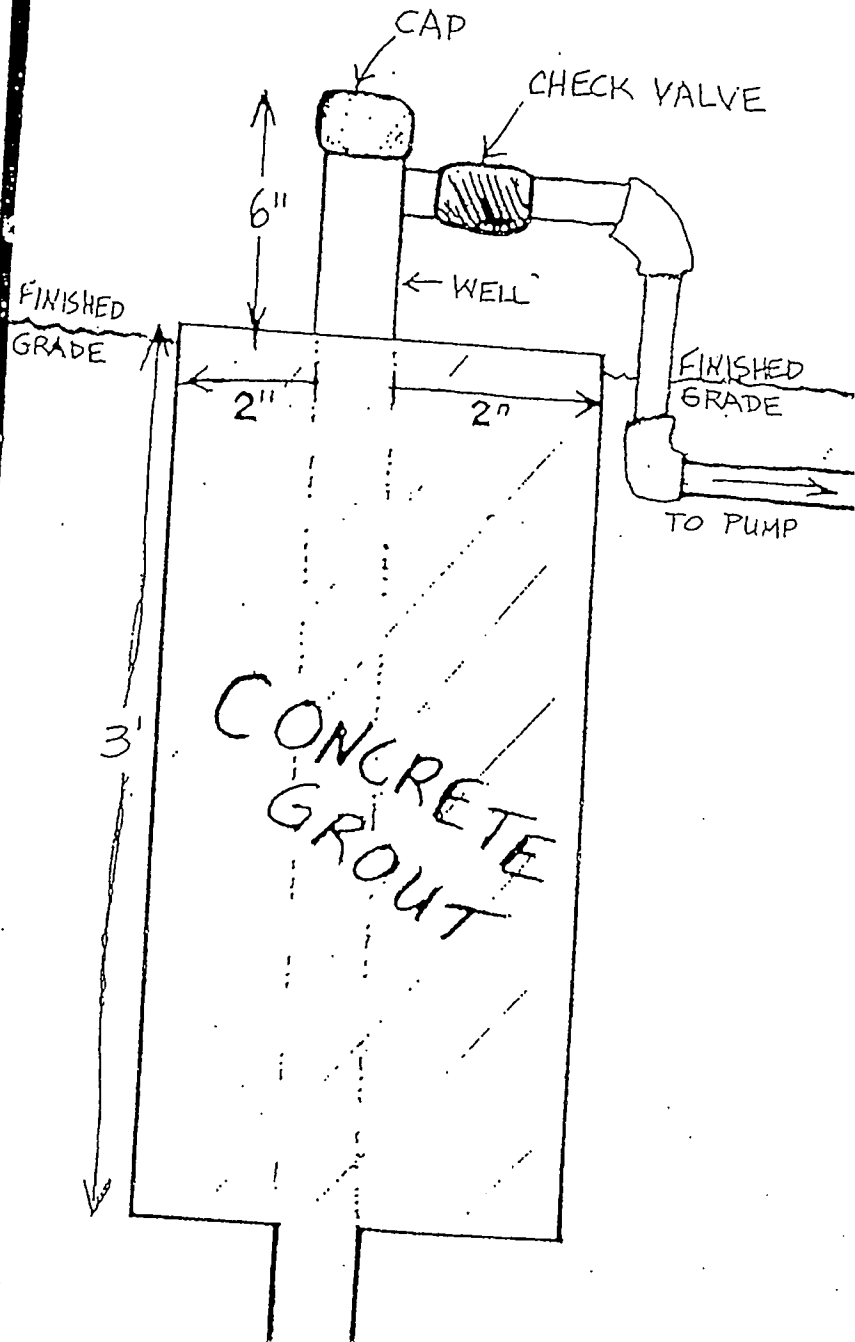
DRAINFIELD MOUND REQUIREMENTS



NOTE: THESE REQUIREMENTS MUST BE MET PRIOR TO FINAL APPROVAL.

WELL REQUIREMENTS

NOTE: ALL WELLS MUST BE GROUTED AT LEAST 2" AROUND WELL CASING TO A DEPTH OF 3'. WELL CASING MUST EXTEND 6" ABOVE FINISHED GRADE AS SHOWN BELOW. NOTE LOCATION OF CHECK VALVE.



NMC 4185



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

PERMIT NUMBER HD 88-516 HOME PHONE _____
 NAME OF APPLICANT PACE 2000/HEMMERS WORK PHONE 335-7223
 MAILING ADDRESS OF APPLICANT 10766 S. U.S. 1, P.S.L., FL. 34952
 _____ ZIP CODE _____
 LOT 15 BLOCK _____ SUBDIVISION Palmetto Park
 IF NOT SUBDIVIDED, ATTACH A COMPLETE LEGAL DESCRIPTION
 PLAT BOOK 3 PAGE 66 DATE SUBDIVIDED 6-57
 RESIDENTIAL: NUMBER DWELLING UNITS 1 NUMBER BEDROOMS 3
 LOT SIZE 20215 FT² HEATED OR COOLED AREA OF HOME 1948 FT²
 COMMERCIAL: TYPE OF BUSINESS PROPOSED _____
 BUILDING SIZE _____ FT²

-----AFFIDAVIT-----

I HAVE REVIEWED THIS PERMIT AND I CERTIFY THAT ALL WORK WILL BE PERFORMED IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THIS PERMIT AND ANY APPLICABLE STATE OR COUNTY REGULATIONS.

SIGNATURE OF ~~PROPERTY OWNER OR~~ OWNER'S
LEGALLY AUTHORIZED REPRESENTATIVE

[Signature]

-----INSTALLATION SPECIFICATIONS-----

SEPTIC TANK CAPACITY 900 GALLONS
 DRAINFIELD SIZE 300 SQUARE FEET

DRAINFIELD ROCK MUST BE 5 FEET FROM FRONT OR REAR PROPERTY LINES
 AND 5 FEET FROM SIDE PROPERTY LINES. EXCAVATION CAN NOT EXTEND MORE
 THAN FIVE FEET FROM APPROVED INSTALLATION AREA.

TOP OF BUILDING STUB OUT IS REQUIRED
 TO BE A MINIMUM ELEVATION OF * Not to exceed
FINISH SOIL GRADE 18" of cover.

ISSUED BY: [Signature] DATE 8-26-88
 MARTIN COUNTY PUBLIC HEALTH UNIT

PLEASE NOTE:

- (1) IF BUILDING CONSTRUCTION DOES NOT START WITHIN ONE YEAR FROM DATE OF ISSUANCE, THIS PERMIT EXPIRES. IF BUILDING CONSTRUCTION STARTS WITHIN 1 YEAR FROM DATE OF ISSUANCE, THE DATE OF EXPIRATION WILL BE EXTENDED AN ADDITIONAL 90 DAYS.
- (2) APPLICANT IS RESPONSIBLE FOR REPLACING EXCAVATED SOILS WITH A GOOD GRADE OF SAND.
- (3) \$60. REINSPECTION FEE IF WELL NOT INSTALLED AT TIME OF ONSITE SEWAGE DISPOSAL SYSTEM INSPECTION.
- (4) INSPECTION RESULTS WILL BE POSTED ON BUILDING PERMIT OR ON ELECTRICAL BOX.
- (5) IF BUILDING STUBOUT IS PLACED MORE THAN 20 FEET FROM SEPTIC TANK OR DRAINFIELD, A HIGHER STUBOUT ELEVATION THAN SHOWN ABOVE WILL BE REQUIRED.
- (6) IF FILL IS REQUIRED, CONTACT MARTIN COUNTY BUILDING DIVISION.
- (7) IF ANY INFORMATION ON THIS PERMIT CHANGES, AN UPDATED APPLICATION IS REQUIRED.
- (8) IF WELL OR MOUND DRAINFIELD IS PROPOSED, SEE ATTACHED SKETCH OF ADDITIONAL SPECIAL REQUIREMENTS.

-----FINAL INSPECTION-----

CONSTRUCTION APPROVED BY: _____ DATE _____
 MARTIN COUNTY PUBLIC HEALTH UNIT

AN APPROVED SYSTEM DOES NOT GUARANTEE PERFORMANCE



APPLICANT PACE 2000/HEMMERS

LEGAL DESCRIPTION ALL OF LOT 15, PALMETTO PARK

-----SITE INFORMATION-----

1. IS THERE A SEPTIC SYSTEM OR OTHER INTERFERENCE WITHIN 75 FEET OF THE PROPOSED PRIVATE WELL? NO
2. IS THERE A POTABLE PRIVATE WELL WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
3. IS THERE AN IRRIGATION WELL WITHIN 50 FEET OF THE AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
4. IS THERE A PUBLIC WELL THAT SERVES LESS THAN 25 PEOPLE OR LESS THAN 15 HOMES WITHIN 100 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
5. IS THERE A PUBLIC WELL WHICH SERVES MORE THAN 25 PEOPLE OR MORE THAN 15 HOMES WITHIN 200 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
6. IS THERE A GRAVITY SEWER LINE OR LIFT STATION WITHIN 100 FEET OF THE PROPOSED LOT? NO
7. IS THERE A LAKE, STREAM, WETLAND, OR SURFACE WATER WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
8. IS THERE A PROPOSED OR EXISTING PUBLIC DRINKING WATER LINE WITHIN 10 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
9. IS THERE A STORM WATER RETENTION AREA OR DRAINAGE EASEMENT WITHIN 15 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
10. IS THE SEPTIC SYSTEM IN AN AREA PROPOSED FOR PAVING OR VEHICULAR TRAFFIC? NO
11. ARE ALL PRIVATE WELLS, SEPTIC SYSTEMS AND SURFACE WATER ON ADJACENT OR CONTIGUOUS LAND WITHIN 75 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? YES
12. ARE ALL PUBLIC WELLS WITHIN 200 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? YES
13. DOES THE PLOT PLAN INCLUDE A PLAT OF THE LOT OR TOTAL SITE OWNERSHIP DRAWN TO SCALE, BOUNDARIES WITH DIMENSIONS, LOCATIONS OF BUILDING OR RESIDENCES, SWIMMING POOLS, RECORDED EASEMENTS, THE PROPOSED SEPTIC SYSTEM, ANY PROPOSED OR EXISTING WELLS, PUBLIC WATER LINES, PAVED AREAS OR DRIVEWAYS, AND SURFACE WATERS SUCH AS LAKES, PONDS, STREAMS, CANALS, OR WETLANDS? YES
14. THERE IS 1200 SQUARE FEET OF AVAILABLE LAND TO INSTALL THE SEPTIC SYSTEM. THIS AREA EXCLUDES INTERFERENCES. SHADE THIS AVAILABLE AREA ON PLOT PLAN.

-----ELEVATIONS-----

1. CROWN OF ROAD ELEVATION 6.14 NGVD SHOW LOCATION ON PLOT PLAN. IF ROAD IS NOT PAVED, BENCHMARK ELEVATION _____ NGVD SHOW LOCATION ON PLOT PLAN.
2. NATURAL GRADE ELEVATION IN AREA OF PROPOSED SEPTIC SYSTEM 6.6 NGVD SHOW LOCATION ON PLOT PLAN.
2. IS BUILDING LOCATED IN FLOOD HAZARD AREA "A" OR "V" AS IDENTIFIED ON FEMA MAPS? YES IF YES, WHAT IS THE MINIMUM REQUIRED FLOOD HAZARD FLOOR ELEVATION OF BUILDING? 8 FEET NGVD.

NOTE: MUST BE CERTIFIED BY A FLORIDA REGISTERED SURVEYOR OF ENGINEER.

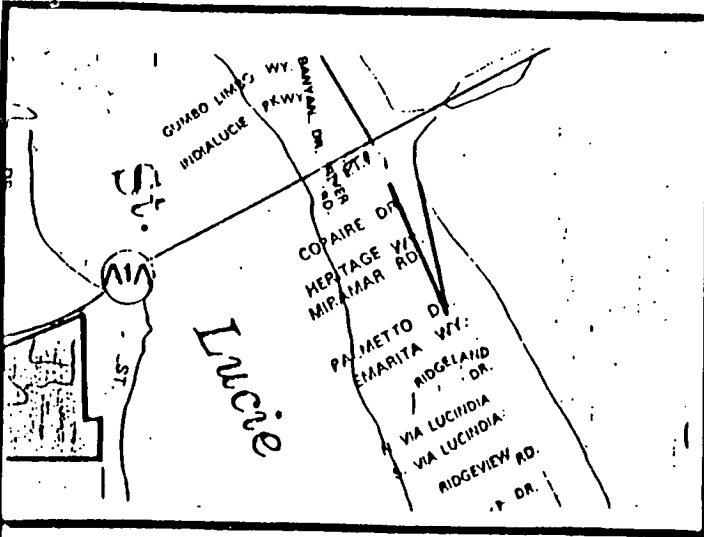
CERTIFIED BY: [Signature]
FL. PROFESSIONAL NO. 3366
DATE: 8.5.88 JOB NO. 88-357

LEGAL DESCRIPTION

ALL OF LOT 15, PALMETTO PARK,
 ACCORDING TO THE PLAT THEREOF
 AS RECORDED IN PLAT BOOK 3 PAGE 66
 PUBLIC RECORDS OF MARTIN CO., FLORIDA
 SAID LANDS LYING IN MARTIN CO., FLORIDA

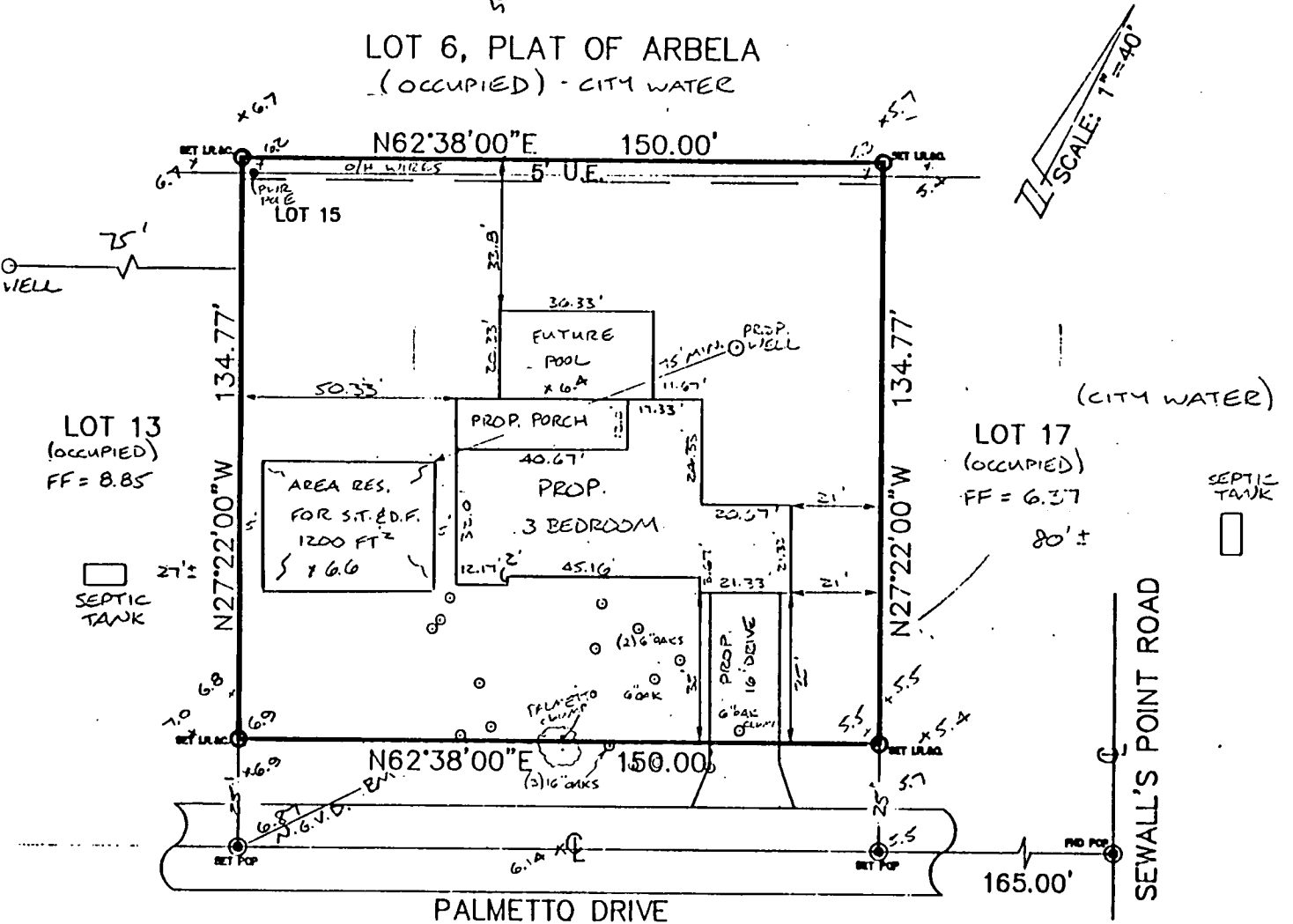
SURVEY NOTES:

1. LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THE SURVEYOR FOR RIGHTS-OF-WAY AND/OR EASEMENTS OF RECORD OR OWNERSHIP.
2. THE LAND DESCRIPTION AND EASEMENTS SHOWN HEREON ARE IN ACCORD WITH THE DESCRIPTION PROVIDED BY THE CLIENT.
3. BEARINGS REFER TO THE PLAT UNLESS OTHERWISE NOTED.
4. FLOOD ZONE. A10 120164 0001 C 4-3-84
5. ELEVATIONS REFER TO N.G.V.D.
6. ○ DENOTES EXISTING 14"-18" PALMS UNLESS OTHERWISE NOTED.



LOCATION MAP

LOT 6, PLAT OF ARBELA
 (OCCUPIED) - CITY WATER



CERTIFIED TO:
 PACE 2000 AND THEIR CLIENT, HEMMERS

PLOT PLAN

BY: *Richard D. Adams Jr.* DATE: 8-9-88
 RICHARD D. ADAMS JR.

ADAMS & ASSOCIATES, INC.

Professional Land Surveyors

2400 S.E. Midport Road — Suite 330
 Port St. Lucie, Florida 34952
 407-335-9444

FLORIDA REGISTRATION NO. 3366

BOUNDARY SURVEY 7-11-88

TIE-IN SURVEY

AS-BUILT SURVEY

JOB NUMBER

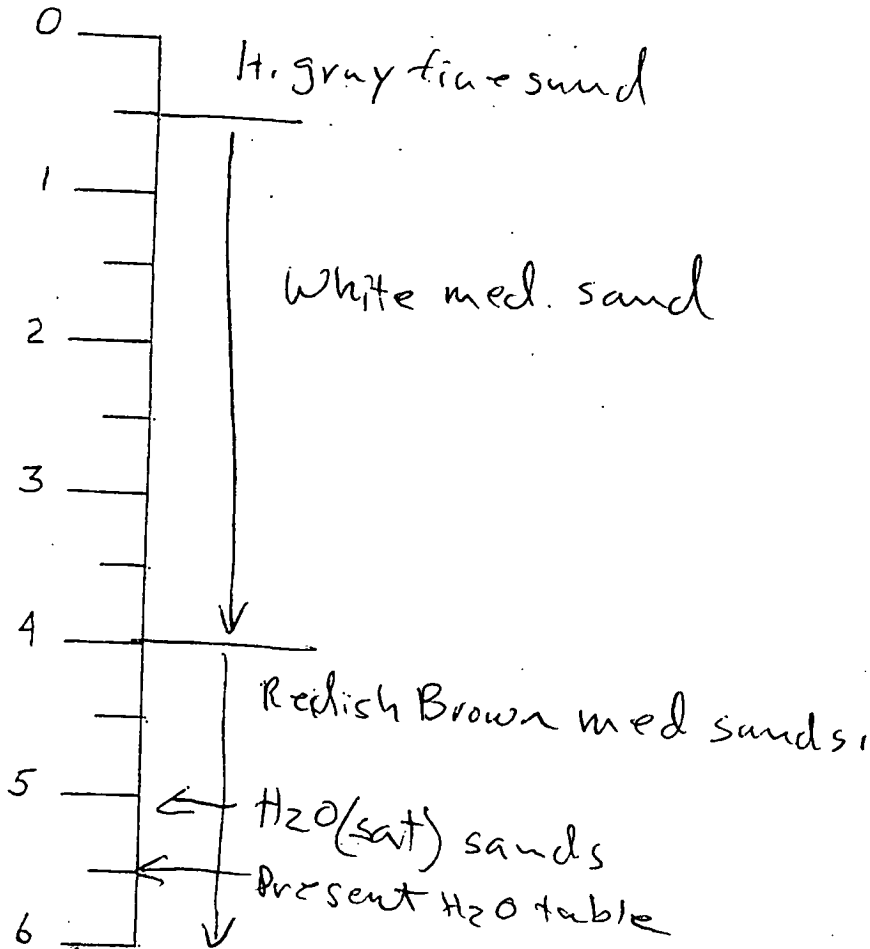
88-357

MARTIN COUNTY PUBLIC HEALTH UNIT
131 East 7th Street
Stuart, Florida 33497
287-2277

SITE EVALUATION

APPLICANT: PACE 2000 / HEMMERS
LEGAL DESCRIPTION: LOT 15 Palmetto Park.

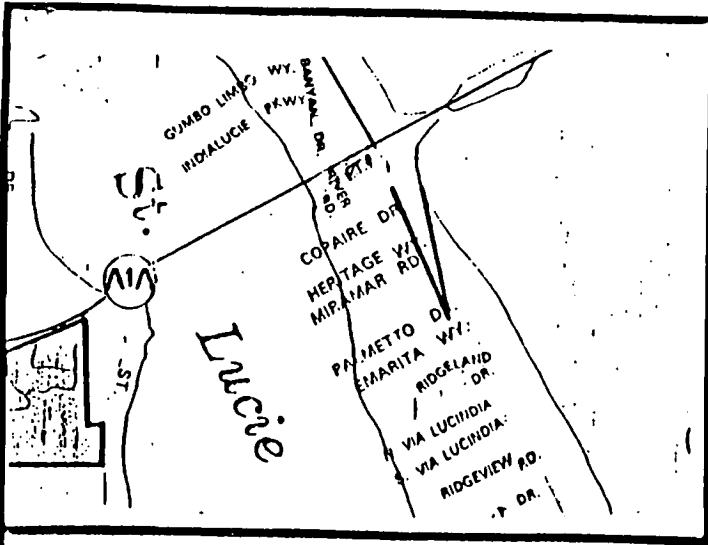
SOIL PROFILE



USDA SOIL TYPE Paola
USDA SOIL NUMBER #6
No Impervious soils are present at
6 feet below natural
grade.

Present Water Depth Below Natural Grade 5.5' Feet.
Wet Season Range Per Soil Survey 6' Feet.
Estimated Wet Season Water Depth Below Natural Grade 5' Feet.
Indicator Vegetation Present live oak, cabbage palm, scrub palmetto
Is Benchmark Located on Plot Plan and Present on Site? No
Approximate Amount of Fill on Neighboring Lots 0'-1'
Other Findings:

EVALUATION BY: Keith Ferris
DATE: 8-22-88



LEGAL DESCRIPTION

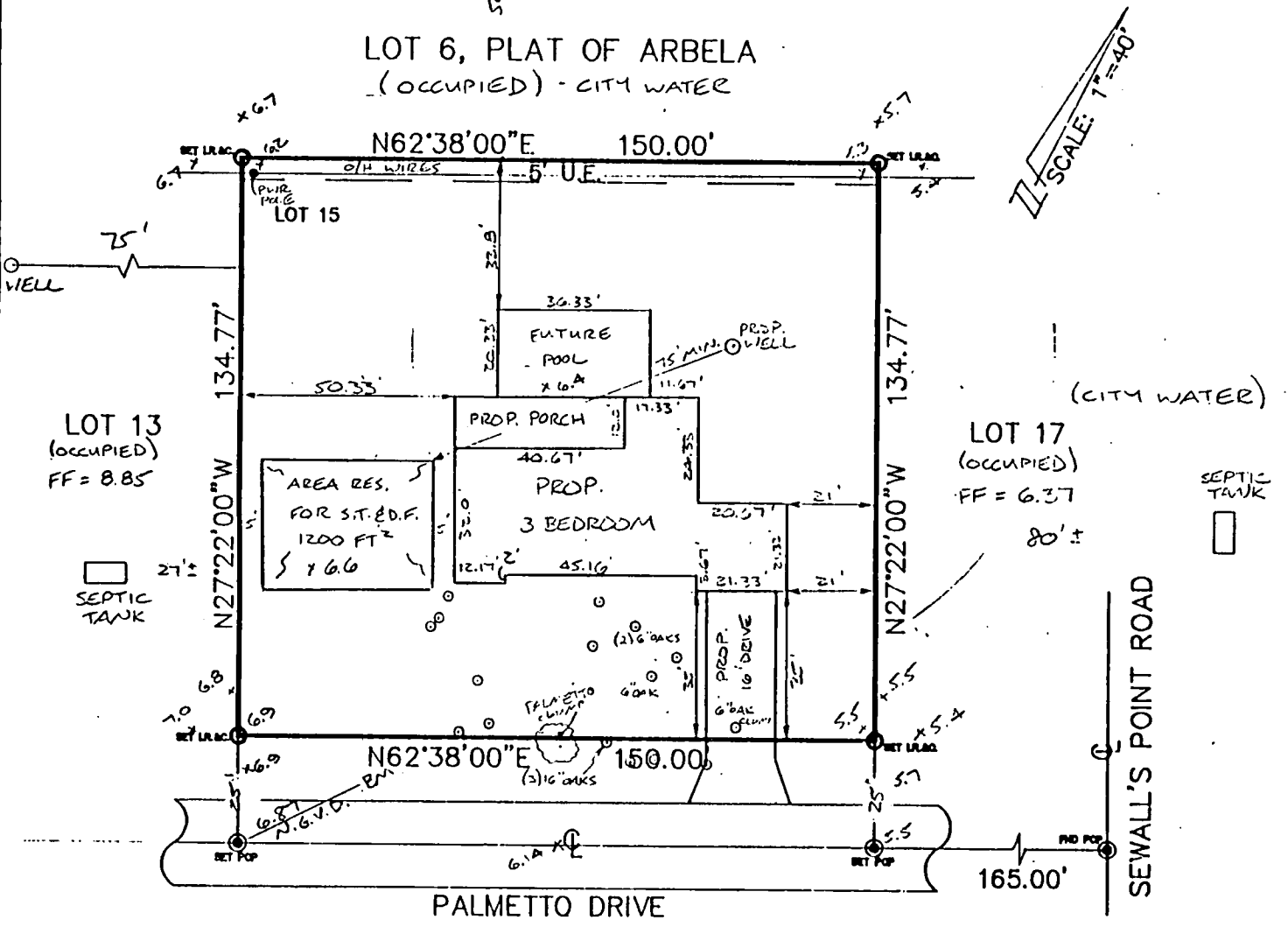
ALL OF LOT 15, PALMETTO PARK,
 ACCORDING TO THE PLAT THEREOF
 AS RECORDED IN PLAT BOOK 3 PAGE 66
 PUBLIC RECORDS OF MARTIN CO., FLORIDA
 SAID LANDS LYING IN MARTIN CO., FLORIDA

SURVEY NOTES:

1. LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THE SURVEYOR FOR RIGHTS-OF-WAY AND/OR EASEMENTS OF RECORD OR OWNERSHIP.
2. THE LAND DESCRIPTION AND EASEMENTS SHOWN HEREON ARE IN ACCORD WITH THE DESCRIPTION PROVIDED BY THE CLIENT.
3. BEARINGS REFER TO THE PLAT UNLESS OTHERWISE NOTED.
4. FLOOD ZONE. A10 120164 0001 C 4-3-84
5. ELEVATIONS REFER TO N.G.V.D.
6. ○ DENOTES EXISTING 14"-18" PALMS UNLESS OTHERWISE NOTED.

LOCATION MAP

LOT 6, PLAT OF ARBELA
 (OCCUPIED) - CITY WATER



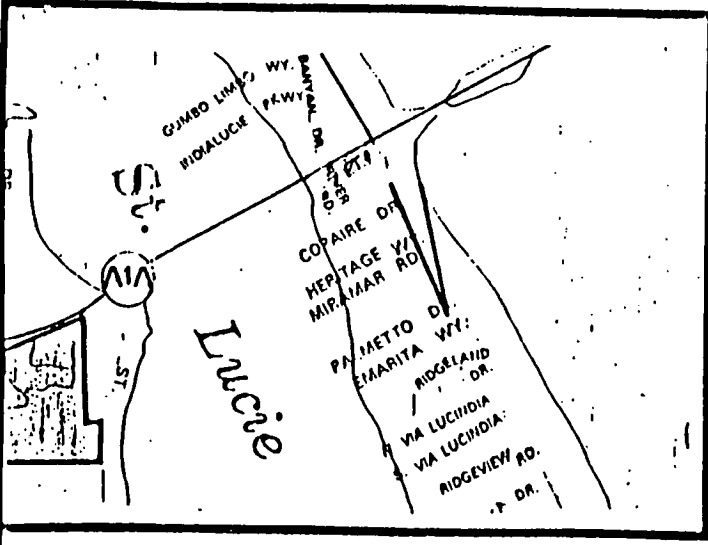
CERTIFIED TO:
 PAGE 2000 AND THEIR CLIENT, HEMMERS

PLOT PLAN

BY: *Richard D. Adams Jr.* DATE: 8-9-88
 RICHARD D. ADAMS JR.

ADAMS & ASSOCIATES, INC.
 Professional Land Surveyors
 2400 S.E. Midport Road — Suite 330
 Port St. Lucie, Florida 34952
 407-335-9444

FLORIDA REGISTRATION NO. <u>3386</u>	
BOUNDARY SURVEY <u>7-11-88</u>	JOB NUMBER <u>88-357</u>
TIE-IN SURVEY	
AS BUILT SURVEY	



LEGAL DESCRIPTION

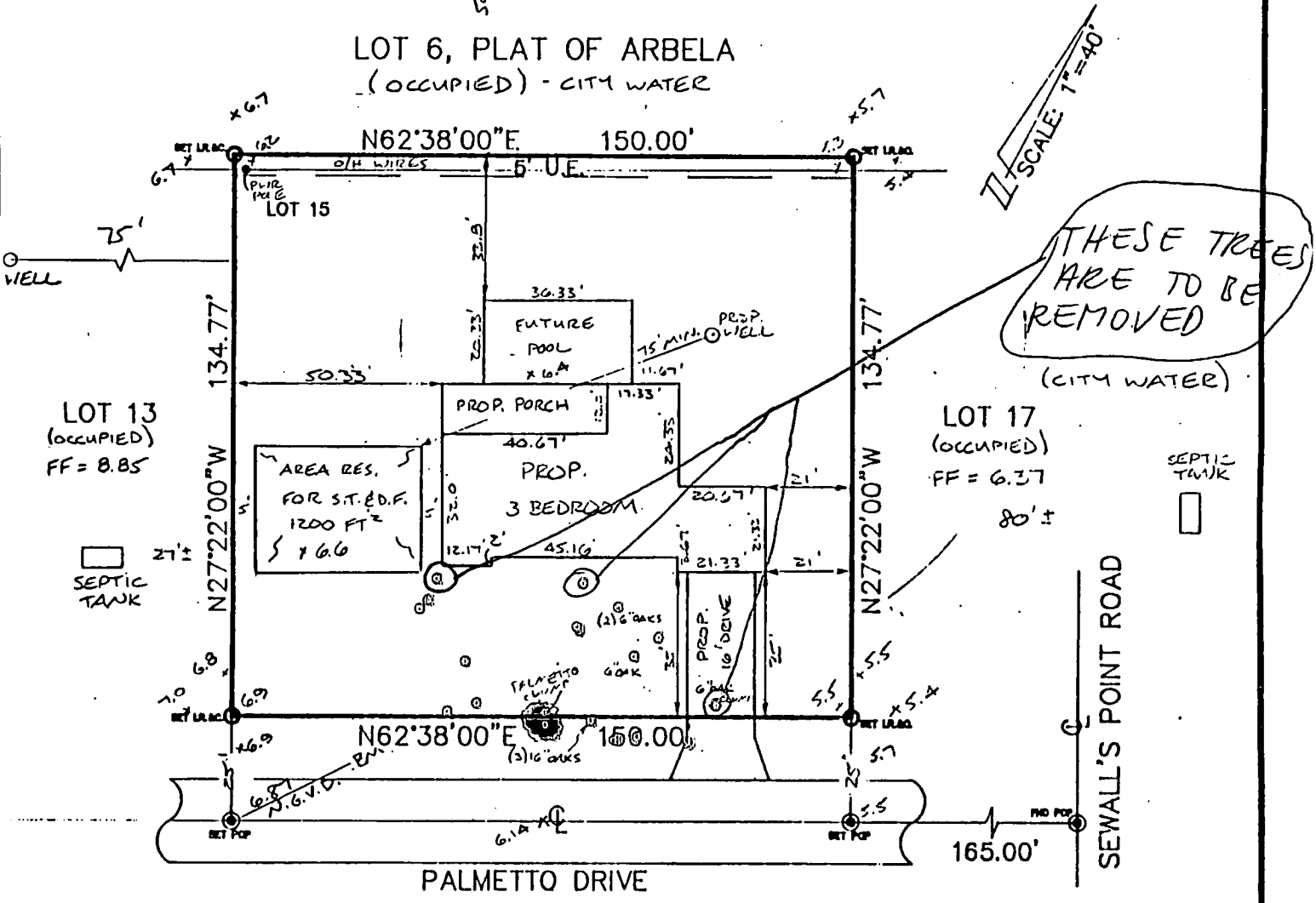
ALL OF LOT 15, PALMETTO PARK,
 ACCORDING TO THE PLAT THEREOF
 AS RECORDED IN PLAT BOOK 3 PAGE 66
 PUBLIC RECORDS OF MARTIN CO., FLORIDA
 SAID LANDS LYING IN MARTIN CO., FLORIDA

SURVEY NOTES:

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3. BEARINGS REFER TO THE PLAT UNLESS OTHERWISE NOTED.
4. FLOOD ZONE. A10 120164 0001 C 4-3-84
5. ELEVATIONS REFER TO N.G.V.D.
6. ~~NOTES EXISTING 14" - 18" PALMS~~
~~UNLESS OTHERWISE NOTED.~~

LOCATION MAP

LOT 6, PLAT OF ARBELA
 (OCCUPIED) - CITY WATER



CERTIFIED TO:
 PACE 2000 AND THEIR CLIENT, HENMERS

PLOT PLAN

BY: *Richard D. Adams Jr.* DATE: 8.9.88
 RICHARD D. ADAMS JR.

ADAMS & ASSOCIATES, INC.
 Professional Land Surveyors
 2400 S.E. Midport Road — Suite 330
 Port St. Lucie, Florida 34952
 407-335-9444

FLORIDA REGISTRATION NO. 3366	
BOUNDARY SURVEY 7.11.88	JOB NUMBER 88-357
TIE-IN SURVEY	
AS-BUILT SURVEY	



Ardaman & Associates, Inc.

P.O. BOX 8687
Port St. Lucie, Florida 34985
(305) 337-1200

B.P.# 2394
City of Sewalls Pt.

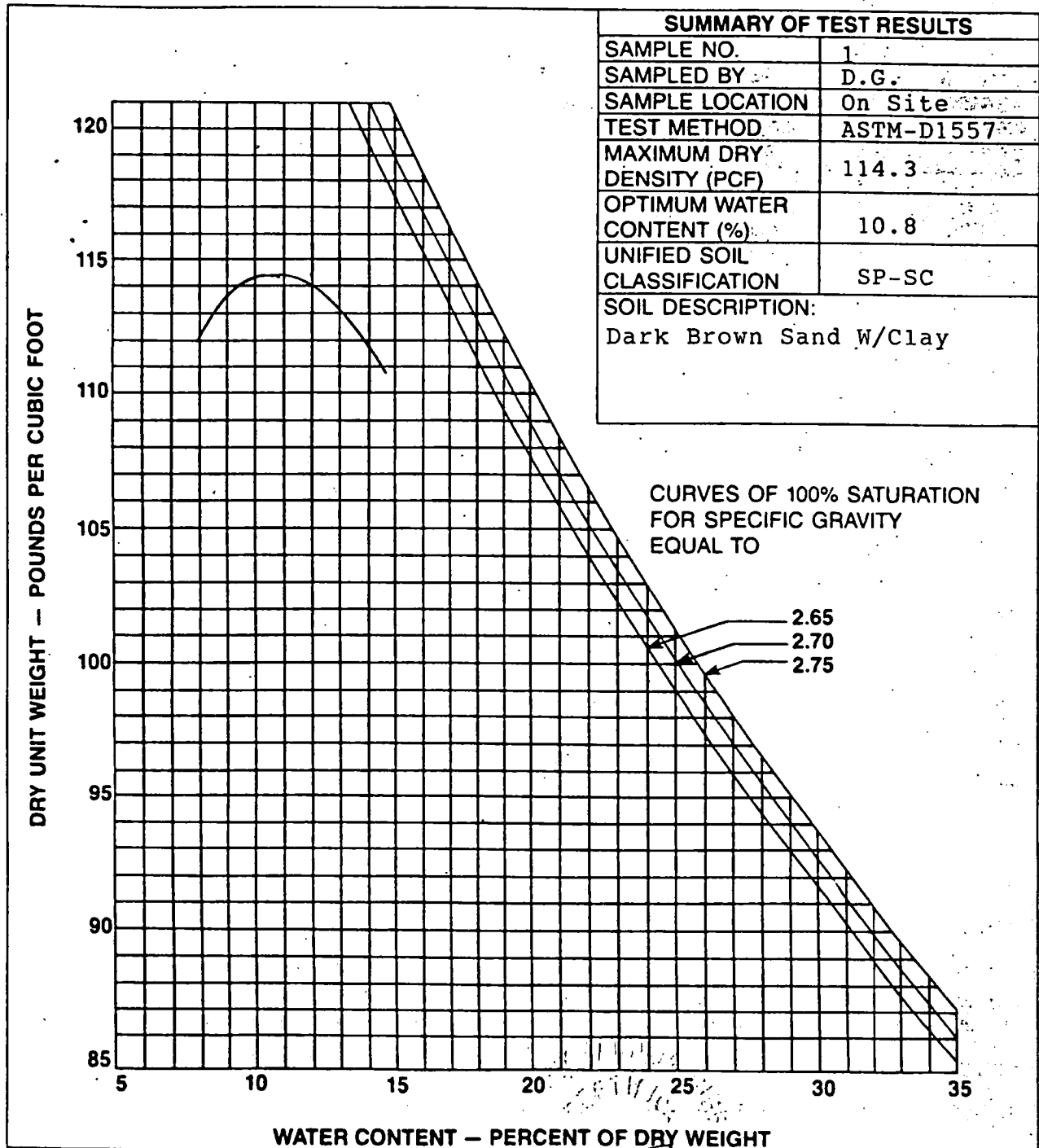


MOISTURE — DENSITY RELATIONSHIP

PROJECT: Hemers Residence
Lot 15 Palmetto Drive
REPORTED TO: Pace 2000

FILE NO.: 88-5557 Report # 7

DATE: September 15, 1988



FORM 407 (Rev. 4/86)

By *[Signature]*

MARTIN COUNTY PUBLIC HEALTH UNIT
131 East 7th Street
Stuart, Florida, 34997
287-2277

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: PACE 2000 / HEMMERS
LEGAL DESCRIPTION: LOT 15 Palmetto Park
SEPTIC TANK PERMIT NUMBER: MD 98-516

The items noted below must be certified by a surveyor or engineer and returned to the Health Department prior to the first plumbing inspection by the Building Department.

1. Building Permit Number: 2394
2. I certify that the elevation of the top of the lowest plumbing stubout is _____ inches above benchmark elevation as indicated on septic tank permit.
3. I certify that the top of the lowest building plumbing stubout is _____ inches above crown of road elevation shown on septic tank permit.
4. I certify that all severe limited soil has been removed from an area of _____ feet by _____ feet to a minimum depth of six (6) feet below top of required stubout elevation. Submit plot plan to scale of excavated area.

Date Observed: _____

- NOTE: a. Severe limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
- b. Drainfield must be centered in the excavated area. Please set stakes to identify the excavated area boundaries. Drainfield will not be approved if severe limited soils are not removed.

CERTIFIED BY: _____

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

Date: _____ Job Number: _____

Andrew D. Edwards
(Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

Environmental Health

612 So. Dixie Hwy.

Stuart, FL 34994 - 887/220-2330

(Signature of Environmental Health Specialist)

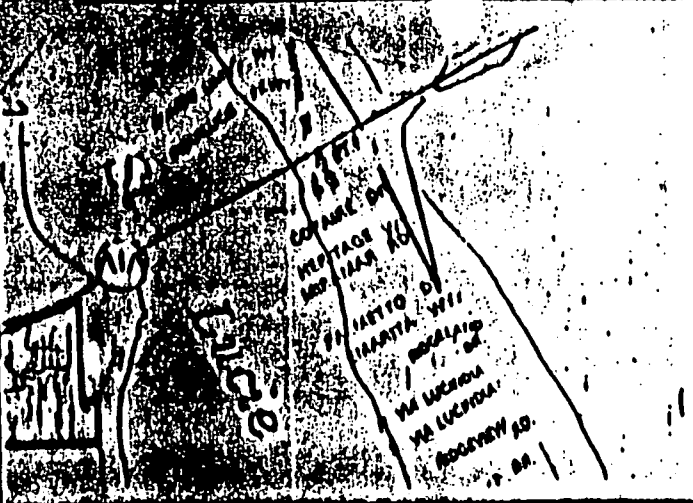
9-21-88
(Date)

LEGAL DESCRIPTION

ALL OF LOT 15, PALMETTO PARK
 ACCORDING TO THE PLAT THEREOF
 AS RECORDED IN PLAT BOOK 93 PAGE 68
 PUBLIC RECORDS OF MARTIN CO., FLORIDA
 SAID LANDS LYING IN MARTIN CO., FLORIDA

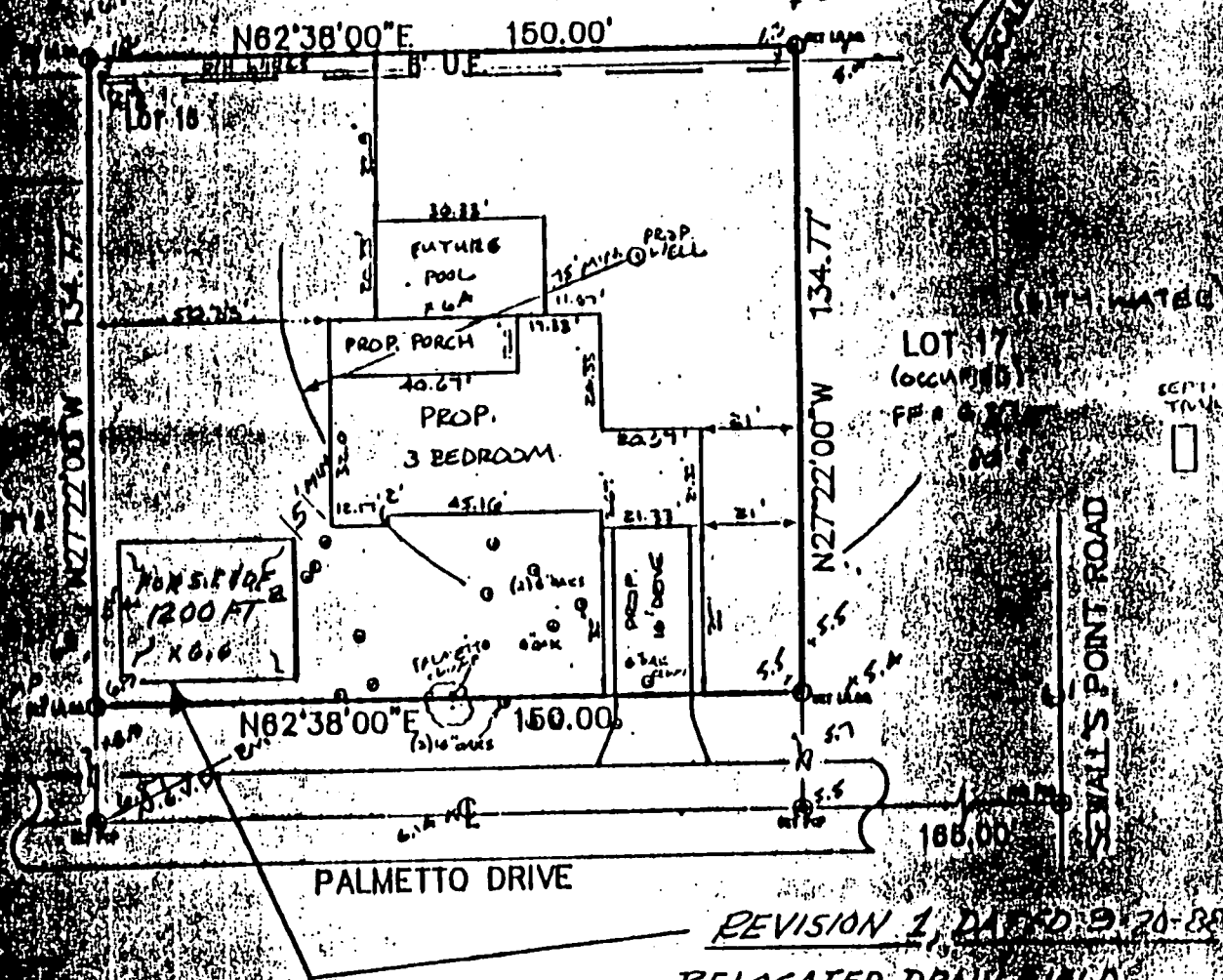
SURVEY NOTES:

1. LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THE SURVEYOR FOR RIGHTS OF WAY AND/OR EASEMENTS OF RECORD OR OWNERSHIP.
2. THE LAND DESCRIPTION AND EASEMENTS SHOWN HEREON ARE IN ACCORD WITH THE DESCRIPTION PROVIDED BY THE CLIENT.
3. BEARINGS REFER TO THE PLAT UNLESS OTHERWISE NOTED.
4. FLOOD ZONE: A10 120104:000 0 4-3-01
5. ELEVATIONS REFER TO N.G.V.D.
6. ○ DENOTES EXISTING 14" IPS PIPES UNLESS OTHERWISE NOTED.



LOCATION MAP

LOT 6, PLAT OF ARBELA
 (OCCUPIED) - CITY WATER



REVISION 1, DATED 9-20-88

RELOCATED DRAIN CIELD AS SHOWN

CERTIFIED TO PAGE 2000 AND THEIR CLIENT, HENMERS

PLOT PLAN

BY: *[Signature]* 8-19-88
 RICHARD D. ADAMS JR.
 FLORIDA REGISTRATION NO. 3306

ADAMS & ASSOCIATES, INC.
 Professional Land Surveyors
 1400 S.W. Midport Road - Suite 330
 Fort St. Lucie, Florida 34952
 407-335-9444

BOUNDARY SURVEY	7-11-88	JOB NUMBER	80-397
TIE-IN SURVEY			
AS BUILT SURVEY			

TOWN of SEWALL'S POINT

COMMISSIONERS:

DOLORES deI.C. CLARKE, MAYOR
CLARK T. DONLIN, VICE MAYOR
IRENE E. O'BRIEN, COMMISSIONER
WILLIAM H. BEDELL, COMMISSIONER
ERIC B. HOLLY, COMMISSIONER



TELEPHONE: (407) 287-2455

TOWN CLERK
JOAN H. BARROW

CHIEF OF POLICE
LOUIS J. SAVINI

One South Sewall's Point Road, Sewall's Point, Stuart, Florida 34996

December 16, 1988

Pace 2000, Inc.
10766 South U.S. 1
Port St. Lucie, Florida 34952

Attention: Mr. Harvey Koehnen

Dear Mr. Koehnen:

Re: Permit # 2394 - Hemmers

On this date while your sub-contractors were pouring the driveway at 4 Palmetto Drive in Sewall's Point, a large portion of blacktop was torn up on Palmetto Drive.

It will be necessary for this damage to be repaired immediately. In no case will a certificate of occupancy be issued for the above project until this work is satisfactorily completed.

Please do not hesitate to contact me if you have any questions about this.

Sincerely,
TOWN OF SEWALL'S POINT

Dale Brown, Building Inspector

RECORD OF INSPECTIONS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 12/21/88

This is to request that a Certificate of Approval for Occupancy be issued to Hammers
 For property built under Permit No. 2394 Dated 8/12/88 when completed in
 conformance with the Approved Plans.

Ralph E Henderson
 Signed

Approved by _____

Item	Date
1. LOT STAKES/SET BACKS	
2. TERMITE PROTECTION	<u>9/29/88</u>
3. FOOTING - SLAB	<u>9/29/88</u>
4. ROUGH PLUMBING	<u>9/22/88</u>
5. ROUGH ELECTRIC	<u>11/9/88</u>
6. LINTEL	<u>10/11/88</u>
7. ROOF	<u>11/9/88</u>
8. FRAMING	<u>11/9/88</u>
9. INSULATION	<u>11/11/88</u>
10. A/C DUCTS	<u>11/9/88</u>
11. FINAL ELECTRIC	<u>12/21/88</u>
12. FINAL PLUMBING	<u>12/21/88</u>
13. FINAL CONSTRUCTION	<u>12/21/88</u>

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Dale Brown 12/21/88 date

Approved by Building Commissioner Rolando C. Clarke 12-21-88 date

Utilities notified F.P.L. 12/21/88 date

Original Copy sent to _____

(Keep carbon copy for Town files)

2425

POOL

Permit No. _____

Date _____

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

2425

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

Owner PAUL HEMMERS Present Address _____

Phone 335-7223

Contractor RUINE POOLS AND SPA Address 2920 SE KENSINGTON ST

Phone 283-6857 STUART

Where licensed MARTIN License number _____

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

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

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

4 Palmetto Drive

Subdivision PALMETTO PARK Lot number 15 Block number _____

Contract price \$ 12,269 Cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Dyane K. O...

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

Owner Paul Hemmers

TOWN RECORD

Date submitted _____

Approved: Dale Brun 11/1/88
Building Inspector Date

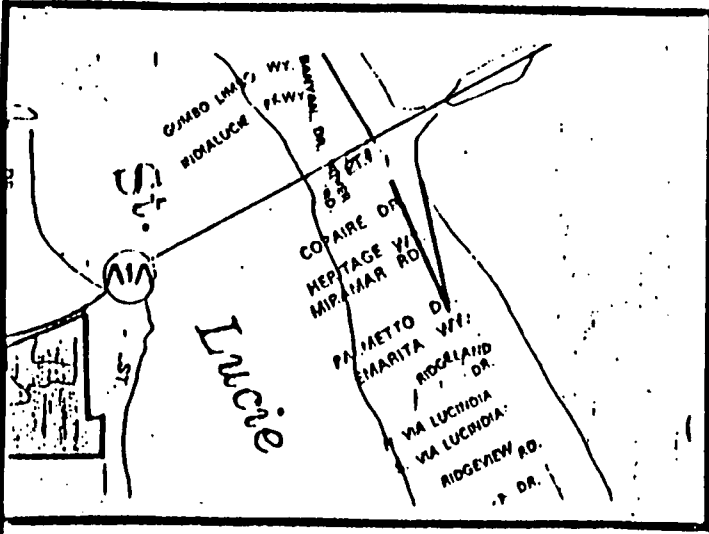
Approved: _____ Commissioner Date Final Approval given: _____ Date

Certificate of Occupancy issued (if applicable) _____ Date

SP1282

Permit No. _____

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



LEGAL DESCRIPTION

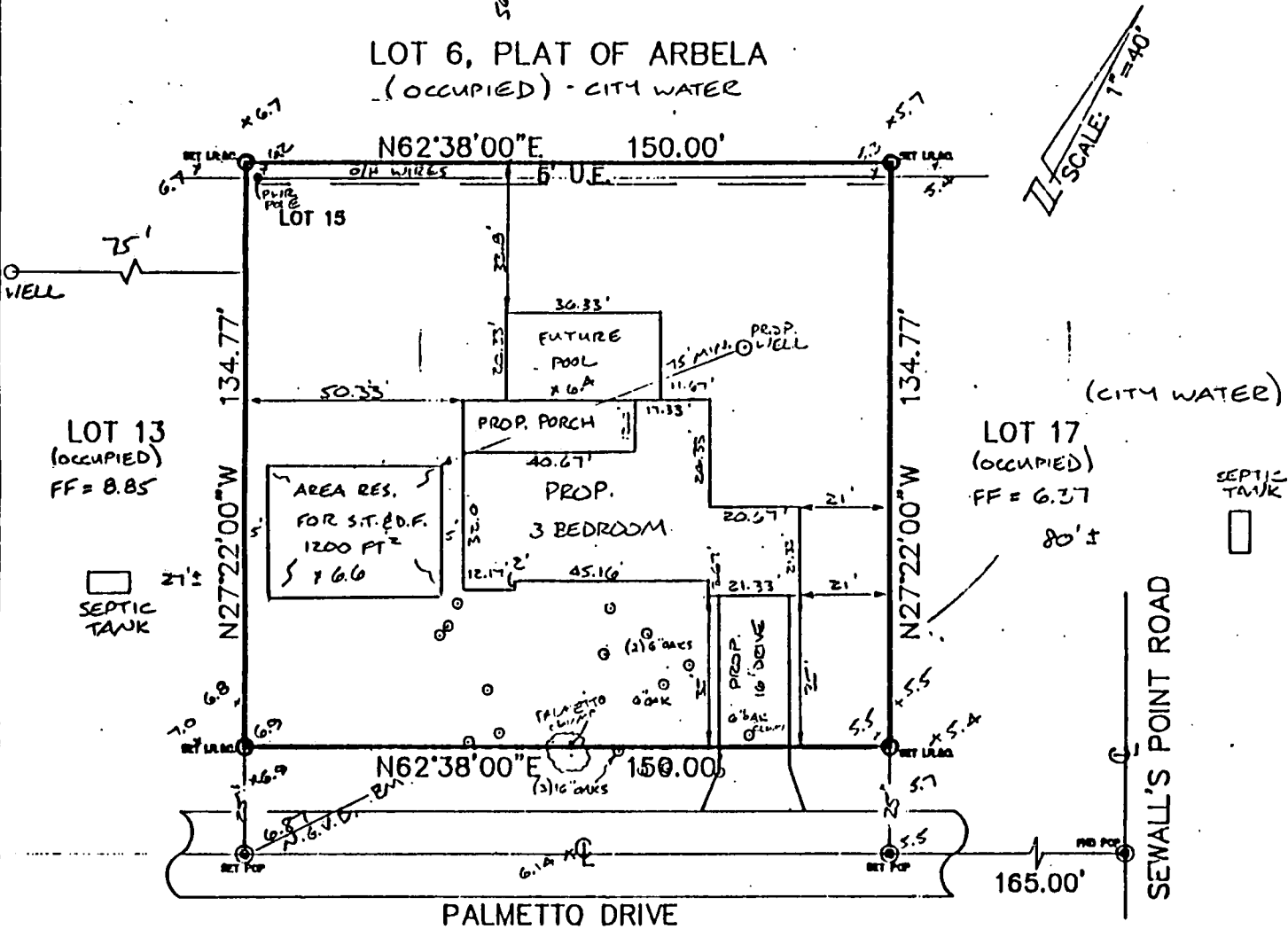
ALL OF LOT 15, PALMETTO PARK,
 ACCORDING TO THE PLAT THEREOF
 AS RECORDED IN PLAT BOOK 3 PAGE 66
 PUBLIC RECORDS OF MARTIN CO., FLORIDA
 SAID LANDS LYING IN MARTIN CO., FLORIDA

SURVEY NOTES:

1. LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THE SURVEYOR FOR RIGHTS-OF-WAY AND/OR EASEMENTS OF RECORD OR OWNERSHIP.
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4. FLOOD ZONE. A10 120164 0001 C 4-3-84
5. ELEVATIONS REFER TO N.G.V.D.
6. ○ DENOTES EXISTING 14"-18" PALMS UNLESS OTHERWISE NOTED.

LOCATION MAP SEPTIC TANK

LOT 6, PLAT OF ARBELA
 (OCCUPIED) - CITY WATER



CERTIFIED TO:

PAGE 2000 AND THEIR CLIENT, HEMMERS

PLOT PLAN

BY: Richard D. Adams Jr. DATE: 8-9-88
 RICHARD D. ADAMS JR.

ADAMS & ASSOCIATES, INC.
 Professional Land Surveyors
 2400 S.E. Midport Road - Suite 330
 Port St. Lucie, Florida 34952
 407-335-9444

FLORIDA REGISTRATION NO. <u>3306</u>	JOB NUMBER
BOUNDARY SURVEY <u>7-11-88</u>	88-357
TIE-IN SURVEY	
AS-BUILT SURVEY	

2459

POOL ENCLOSURE

APPLICATION FOR PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

PERMIT NUMBER _____ DATE OF APPLICATION 11-28-08

To obtain a permit the following are required:

1. Florida certification of builder and sub-contractors.
2. Certification of insurance from contractor or owner/builder re: liability and workers' compensation.
3. 2 sets of building plans which must include: a) 1/4" scale building drawings, b) plot plan, c) foundation plan, d) floor plans, e) wall and roof cross-sections, e) plumbing, electrical and air conditioning layouts, f) at least two elevations showing the height of building from finished floor.
4. Recorded warranty deed to the property.
5. Septic tank permit and one set of plans with Martin County Health Department seal.
6. Energy code calculations.
7. Tree removal permit (for trees other than nuisance trees)
8. Certification of elevation from licensed surveyor and determination of flood zone.
9. Amount of fill anticipated - rough sketch showing location of fill
10. Manufacturer's schedule of windows.

Owner M/M HERMAN Current Address _____
 Telephone 335-7223
 General Contractor S&K ALUMINUM Address 1725 S.W. BILTMORE ST. PORT ST. LUCIE
 Telephone 335-3254 License Number SP 00356
 Where Licensed MARTIN CO.
 Plumbing Contractor _____ License Number _____
 Electrical Contractor _____ License Number _____
 Roofing Contractor _____ License Number _____
 A/C Contractor _____ License Number _____

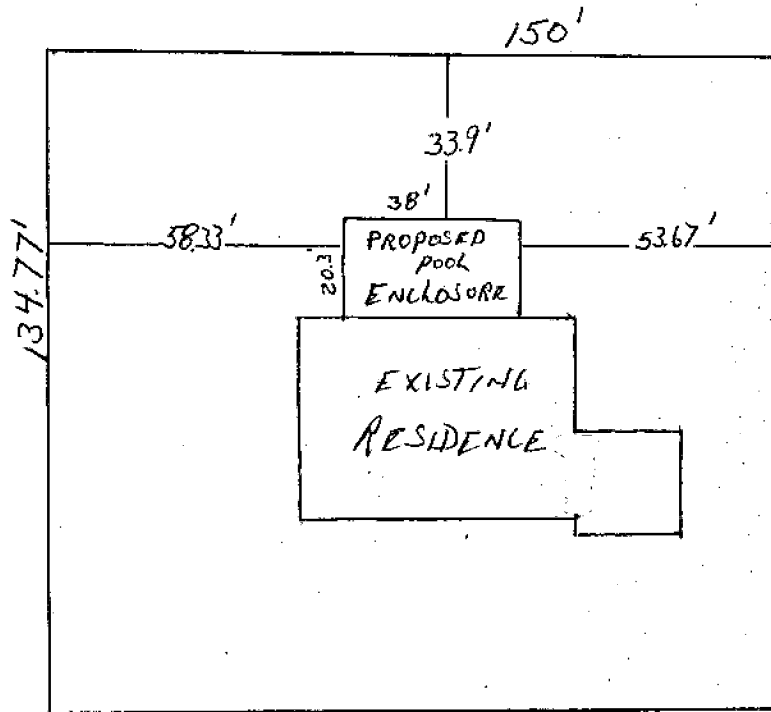
Describe the building or alterations POOL SCREEN ENCLOSURE
 Name the street on which the building its front building line and its front yard will face 4 PALMETTO DR.
 Subdivision PALMETTO PARK Lot 15 Block _____
 Building area (inside walls) _____ Garage, porch, carport area 7
 Contract price (excluding carpet, land, appliances, landscaping) \$ 2400
 Cost of permit \$ _____ Plans approved as submitted _____ as marked _____

- In addition, the following are understood by owner and contractor:
1. Building area inside walls must be a minimum of 1,500 square feet.
 2. Building permit fees are \$5. per \$1,000. of the cost of the building, plus \$10. each for plumbing, electric, a.c. and roof. For example a \$100,000. building x \$5. = \$500. plus \$40. (a.c., pl., el., roof) = \$540. cost of permit + \$365. impact fee = \$905. total.
 3. If no contract is submitted as proof as cost, the permit will be based on \$60. per square foot (inside walls) and \$25. per square foot (other areas).
 4. The Town has adopted the South Florida Building Code
 5. Building permits are issued for one year's duration.
 6. Construction must be started within 180 days or permit will be subject to revocation and forfeiture of fee.
 7. ALL changes in plans must be approved by the Building Department.
 8. Work hours are 8:AM to 5:PM Monday through Friday. NO SUNDAY WORK
 9. Portable toilets must be on all construction sites.
 10. Inspections are made Monday through Friday, 8:AM to Noon, 1:PM to 4:PM. 24 hour notice is required prior to all inspections.
 11. String lines along property lines to facilitate set back inspections.
 12. Before a certificate of occupancy is issued, the following are required:
 - a. An owner's affidavit of building cost (form available) any discrepancy between the original fee and final fee (based on affidavit) will be adjusted.
 - b. Approval of septic tank installation by Martin Co. Health Dept.
 - c. Rough grading and clean up of grounds.
 - d. Affidavit from licensed surveyor showing slab elevation (if in "A" zone).
 - e. Certification by a qualified engineer or architect of the structural adequacy of the building.

13. THIS SUMMARY IS NOT A SUBSTITUTE FOR TOWN ORDINANCES. APPROVAL OF THE BUILDING PLANS IN NO WAY RELIEVES THE OWNER OR CONTRACTOR FROM COMPLIANCE WITH TOWN ORDINANCES.

14. In addition to the requirements of this permit there may be additional restrictions applicable to this property that may be found in the public records of this county.

Contractor's Signature [Signature] Owner's Signature [Signature]
 Approval by Building Inspector _____ Date _____
 Approval by Building Commissioner _____ Date _____
 Certificate of Occupancy issued _____ Date _____



PALMETTO DR.

PLOT PLAN

S & K ALUMINUM

CUSTOMER: M/M HEMMER

SCALE: 1" = 40 FT.

ADDRESS: 15 PALMETTO DR.

DATE: 11-22-88 BY: *sh*

LOT 15 BLK. SEC.

S/D PALMETTO PARK

ADAMS & ASSOCIATES, INC.

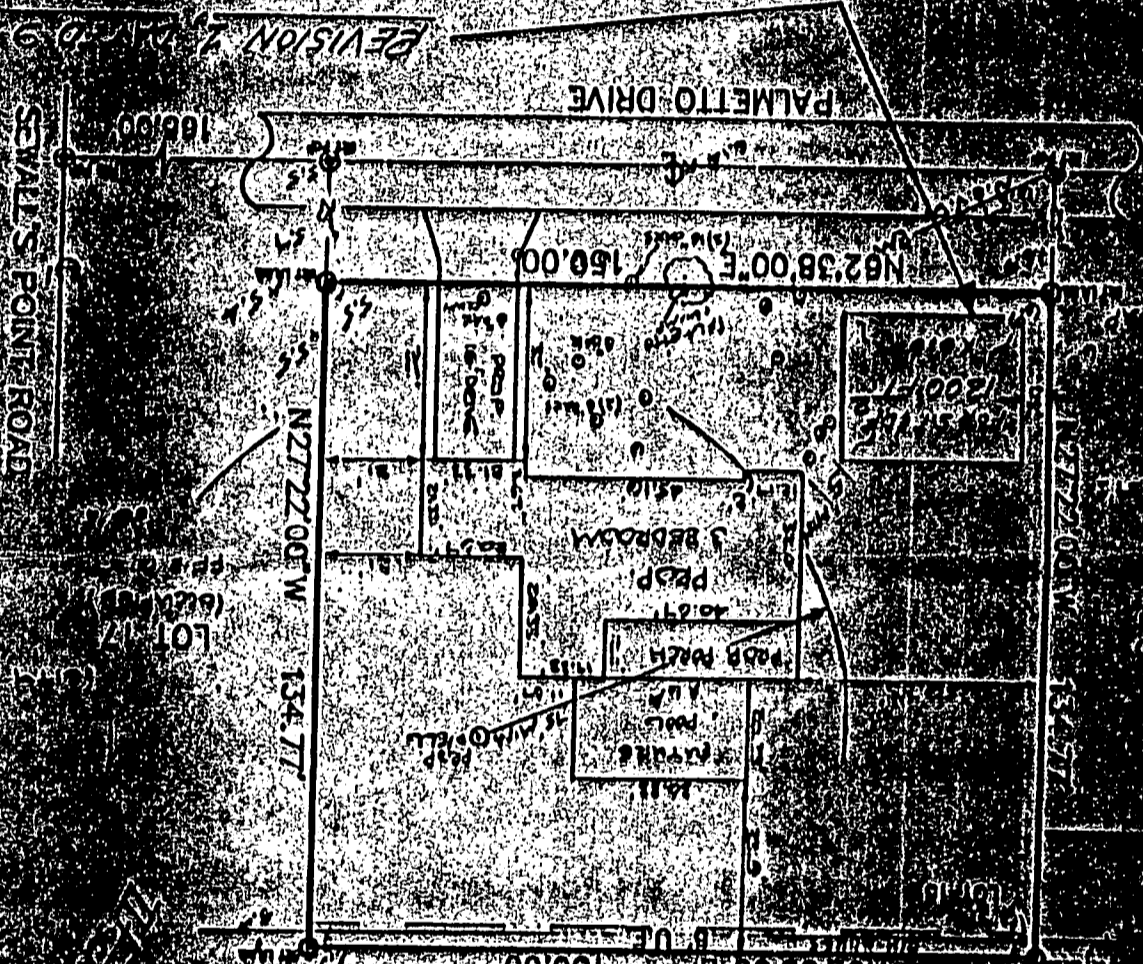
PROFESSIONAL LAND SURVEYORS
 2400 S. MIDLAND ROAD, SUITE 330
 FORT LAUDERDALE, FLORIDA 34882
 407-338-8444

BOUNDARY SURVEY 7.11.88
 THE IN-SURVEY
 AS BUILT SURVEY

FLORIDA REGISTRATION NO. 13800
 RICHARD D. ADAMS, JR.
 BY: [Signature]

PLOT PLAN

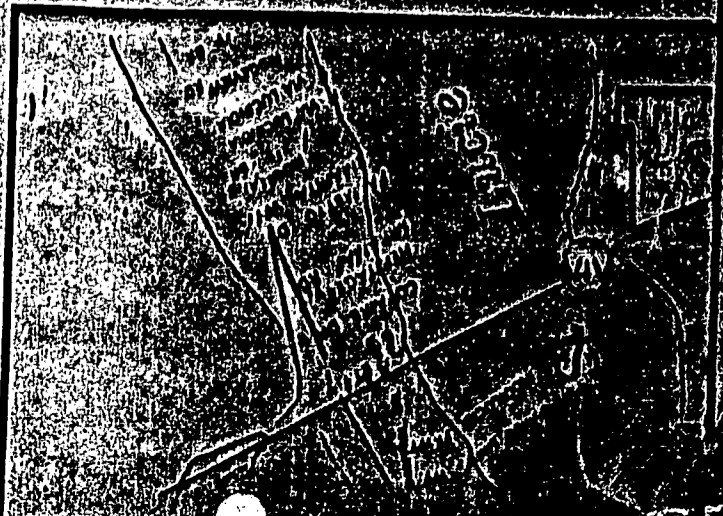
AS SHOWN
 RELOCATED DEPARTMENT



LOT 6, PLAT OF ARBELA

(As recorded in Plat Book 12014-000, Page 4-3-01)

1. LANDS SHOWN HEREON WERE NOT CONTACTED BY THE SURVEYOR FOR RIGHTS OF WAY AND ENCUMBRANCES OR RECORD OF OWNERSHIP.
2. THE LAND DESCRIPTION AND EASEMENTS SHOWN HEREON ARE IN ACCORD WITH THE DESCRIPTION PROVIDED BY THE CLIENT.
3. BEARINGS REFER TO THE PLAT UNLESS OTHERWISE NOTED.
4. FLOOD ZONE A10 - 12014-000, Page 4-3-01.
5. ELEVATIONS REFER TO NAVD83.
6. FEATURES EXISTING IN ALL PLATS UNLESS OTHERWISE NOTED.



ALL OR LOT 15, PALMETTO DRIVE

SEPTEMBER 1987

TREASURE COAST CHAPTER, INC
OF THE ALUMINUM ASSOCIATION
OF FLORIDA



PREPARED BY:

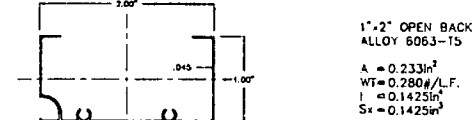
NASH ENGINEERING, INC.
810 SATURN ST. SUITE 16
JUPITER, FLORIDA 33477
(305)747-7254

ROOF PAN (ALLOY 3003 H-16)	PAN THICKNESS	Sx	MAX. SPAN @ WIND VELOCITIES SHOWN
1.75" PAN #/032 CLEAT			100MPH 110MPH 120MPH
	.032	.738in ³	10'
CLEAT ALTERNATIVES FOR 1-3/4" PAN			
T-BAR	.032		11'
T-BAR	.032		11'
EXTRUDED "T" CLEAT	.032		13'

NOTE:
PANS MAY OVERHANG 1/3 OF SIMPLE SPAN. SPANS MAY BE INCREASED 2% FOR EACH 12" OF OVERHANG UP TO 3'-0". CONSULT AN ENGINEER FOR GREATER OVERHANG.

ROOF PAN (ALLOY 3003 H-16)	PAN THICKNESS	Sx	MAX. SPAN @ WIND VELOCITIES SHOWN
2" INTERLOCKING PANEL			100MPH 110MPH 120MPH
	.024	.450in ³	13'-4"
	.032	.608in ³	15'-6"
	.032	.346in ³	11'-0"

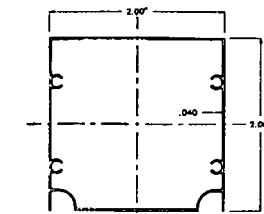
NOTE:
PANS MAY OVERHANG 1/3 OF SIMPLE SPAN. SPANS MAY BE INCREASED 2% FOR EACH 12" OF OVERHANG UP TO 3'-0". CONSULT AN ENGINEER FOR GREATER OVERHANG.



1"x2" OPEN BACK
ALLOY 6063-T5
A = 0.233in²
WT = 0.280#/L.F.
I = 0.1425in⁴
Sx = 0.1425in³

SPACING AND SPAN TABLES

SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	8'-6"	7'-4"	4'-6"	4'-0"
4'	7'-4"	6'-2"	3'-10"	3'-6"
5'	6'-7"	5'-2"	3'-6"	3'-2"
6'	6'-0"	5'-0"	3'-2"	2'-10"
7'	5'-6"	4'-8"	2'-11"	2'-8"
8'	5'-2"	4'-4"	2'-9"	2'-6"
9'	4'-10"	4'-2"	2'-6"	2'-4"
10'	4'-8"	3'-10"	2'-5"	2'-3"



2"x2" PATIO BEAM
ALLOY 6063-T5
A = 0.412in²
WT = 0.494#/L.F.
I = 0.2133in⁴
Sx = 0.2133in³

SPACING AND SPAN TABLES

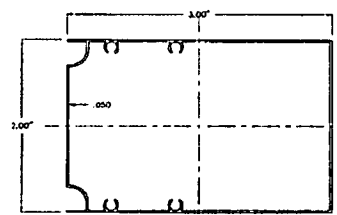
SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	10'-5"	8'-8"	5'-6"	5'-0"
4'	9'-0"	7'-6"	4'-9"	4'-4"
5'	8'-0"	6'-9"	4'-3"	3'-10"
6'	7'-4"	6'-2"	3'-10"	3'-6"
7'	6'-10"	5'-8"	3'-8"	3'-4"
8'	6'-4"	5'-4"	3'-4"	3'-0"
9'	6'-0"	5'-0"	3'-2"	2'-11"
10'	5'-8"	4'-9"	3'-0"	2'-9"

CLEATED ROOF PANS

INTERLOCKING ROOF PANS

1"x2" OPEN BACK

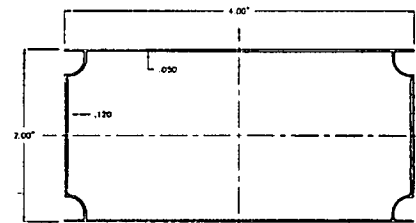
2"x2" PATIO BEAM



2"x3" PATIO BEAM
ALLOY 6063-T5
A = 0.65in²
WT = 0.78#/L.F.
I = 0.741in⁴
R = 1.068in³
Sb = 0.4359in³
Sx = 0.57in³

SPACING AND SPAN TABLES

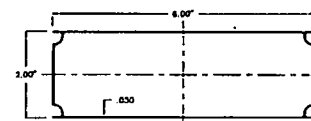
SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	16'-5"	13'-9"	8'-8"	8'-0"
4'	14'-3"	11'-11"	7'-6"	6'-11"
5'	12'-9"	10'-8"	6'-9"	6'-2"
6'	11'-8"	9'-9"	6'-2"	5'-7"
7'	10'-9"	9'-1"	5'-8"	5'-2"
8'	10'-1"	8'-5"	5'-4"	4'-10"
9'	9'-6"	7'-11"	5'-0"	4'-7"
10'	9'-1"	7'-6"	4'-9"	4'-4"



2"x4" SELF MATING BEAM
ALLOY 6063-T6
WALL = .050
FLANGE = .120
A = 0.950in²
WT = 1.144#/L.F.
I = 2.43in⁴
Sx = 1.25in³

SPACING AND SPAN TABLES

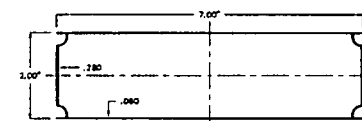
SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	25'-0"	20'-11"	13'-3"	12'-0"
4'	21'-8"	18'-1"	11'-5"	10'-5"
5'	19'-4"	16'-2"	10'-3"	9'-4"
6'	17'-8"	14'-9"	9'-4"	8'-6"
7'	16'-4"	13'-8"	8'-8"	7'-11"
8'	15'-3"	12'-10"	8'-0"	7'-4"
9'	14'-4"	12'-0"	7'-8"	7'-0"
10'	13'-8"	11'-5"	7'-3"	6'-7"



2"x6" SELF MATING BEAM
ALLOY 6063-T6
A = 1.396in²
WT = 1.67#/L.F.
I = 8.46in⁴
Sx = 2.82in³

SPACING AND SPAN TABLES

SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	37'-10"	31'-8"	20'-0"	18'-3"
4'	32'-9"	27'-5"	17'-4"	15'-10"
5'	29'-4"	24'-6"	15'-6"	14'-2"
6'	26'-9"	22'-5"	14'-2"	12'-11"
7'	24'-9"	20'-8"	13'-1"	12'-0"
8'	23'-2"	19'-5"	12'-3"	11'-2"
9'	21'-10"	18'-3"	11'-6"	10'-6"
10'	20'-9"	17'-4"	11'-0"	10'-0"



2"x7" SELF MATING BEAM
ALLOY 6063-T6
A = 1.782in²
WT = 2.14#/L.F.
I = 17.13in⁴
Sx = 4.89in³

SPACING AND SPAN TABLES

SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	49'-4"	41'-4"	26'-2"	23'-10"
4'	42'-9"	35'-9"	22'-8"	20'-8"
5'	38'-3"	32'-0"	20'-3"	18'-5"
6'	35'-0"	29'-2"	18'-5"	16'-10"
7'	32'-4"	27'-0"	17'-1"	15'-7"
8'	30'-3"	25'-3"	16'-0"	14'-7"
9'	28'-6"	23'-10"	15'-0"	13'-9"
10'	27'-0"	22'-8"	14'-4"	13'-0"

2"x3" PATIO BEAM

2"x4" SELF MATING BEAM

2"x6" SELF MATING BEAM

2"x7" SELF MATING BEAM

DATE	BY	DESCRIPTION

TREASURE COAST CHAPTER, INC.
OF THE ALUMINUM ASSOCIATION
OF FLORIDA

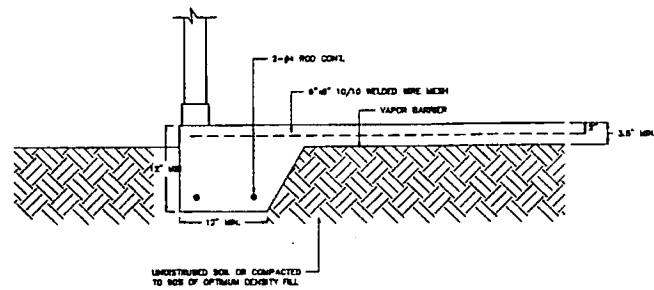


ALUMINUM CONSTRUCTION
DETAILS

DRAWN	COMPTON
CHECKED	NASH
SCALE	N.T.S.
DATE	SEPTEMBER 1987
JOB NO.	87-031

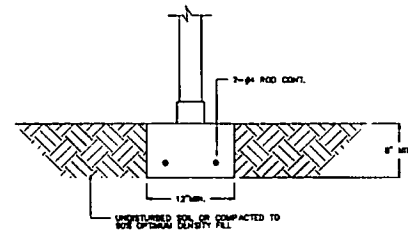
John Nash
9/18/87
SEAL

SHEET
1
OF FIVE SHEETS



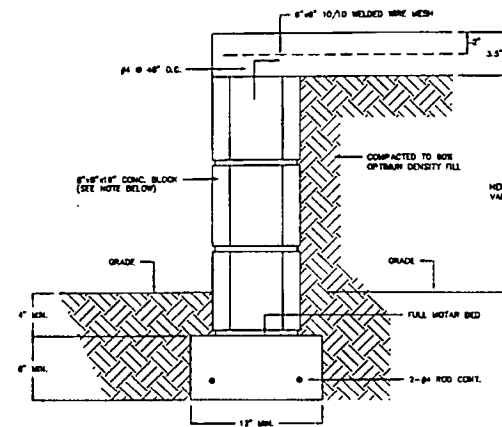
SLAB ON GRADE

ALUMINUM SCREEN ROOMS, GLASS ROOMS, PATIO COVERS AND CARPORTS



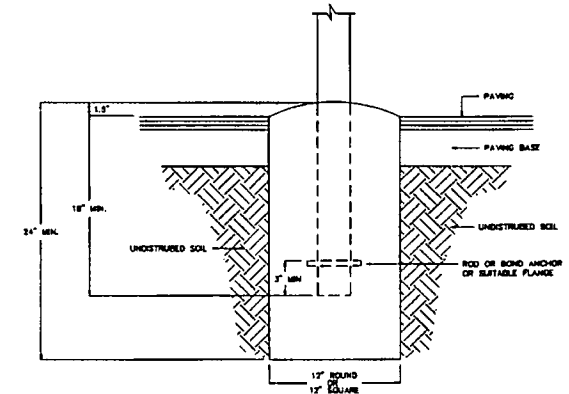
CONTINUOUS WALL FOOTING

FOR ALUMINUM ENCLOSURES WITH SOLID ALUMINUM ROOFS

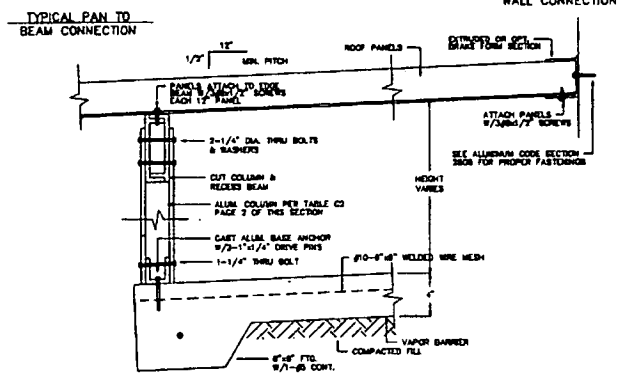
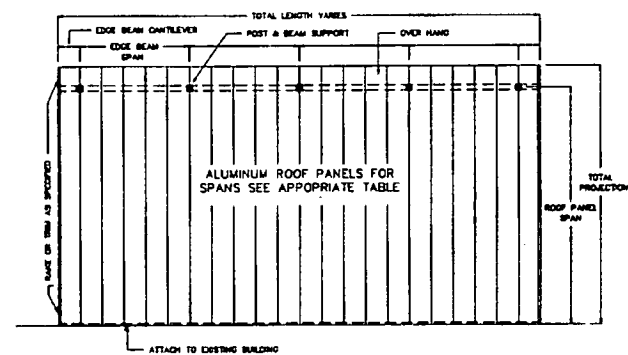


RAISED SLAB

WITH 8" CONC. BLOCK FOR ALUMINUM SCREEN ROOMS, GLASS ROOMS AND PATIO COVERS



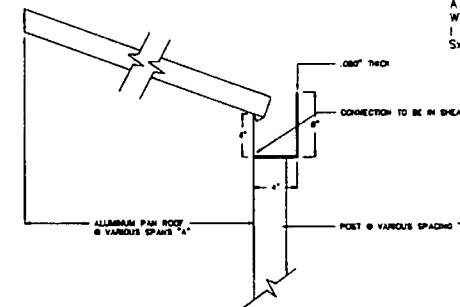
PIER TYPE FOOTING



CARPORT
(ATTACHED)

BEAM SIZE AND SHAPE	MAXIMUM CLEAR BEAM SPANS CONT. EDGE BEAM FOR ROOF SPANS BELOW					TYPICAL POST SIZE & NO. OF BASE ANCHORS
	10'	12'	14'	15'	15'	
2"x2" L800	4'-10"	4'-8"	4'-0"	3'-11"	3'-10"	2"x2" L800 POST 9/32" DIA. ANCHORS
2"x2" L800	6'-0"	5'-10"	5'-4"	5'-2"	5'-0"	FLAT POST 9/32" DIA. ANCHORS
1.5"x2" L800	5'-8"	5'-0"	4'-8"	4'-5"	4'-3"	
2"x2" S.L. BEAM	10'-0"	8'-1"	8'-0"	8'-2"	8'-0"	
2"x2" S.L. BEAM W/WELD	17'-0"	11'-0"	10'-1"	8'-0"	8'-0"	2"x2" L800 OR 2"x2" POST W/ANCH. OF 3"-37/64" BOLTS (OR) 4"-25" BOLTS
2"x2" S.L. BEAM	17'-2"	12'-1"	11'-2"	10'-2"	10'-0"	
2"x2" S.L. BEAM	20'-0"	16'-2"	17'-0"	16'-0"	15'-8"	2"x2" POST W/ANCH. OR 2"-37/64" ANCHOR BOLTS 4"-25" ANCHOR BOLTS
2"x2" S.L. BEAM W/WELD	22'-0"	20'-10"	19'-2"	18'-8"	18'-0"	
3"x3" I BEAM	17'-0"	16'-0"	14'-10"	14'-4"	14'-0"	
3"x3" I BEAM W/DIAP	18'-2"	14'-8"	12'-8"	12'-2"	12'-0"	
4"x4" I BEAM W/DIAP	20'-0"	18'-1"	16'-10"	16'-2"	15'-8"	

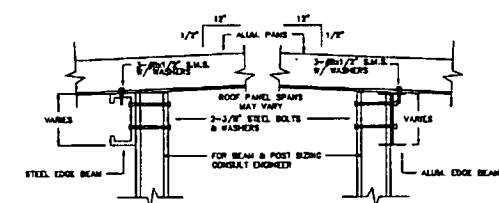
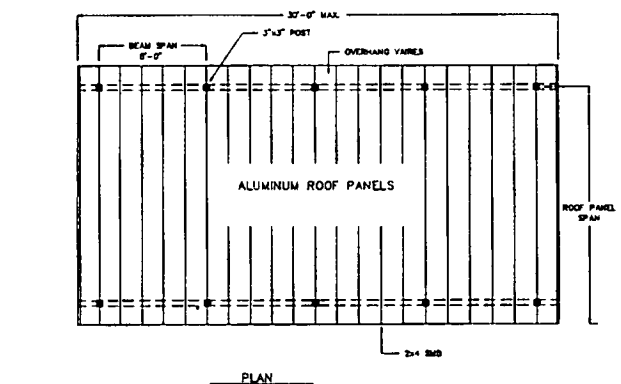
EDGE BEAM & POST SPAN TABLE C-1
(ATTACHED ROOFS ONLY)



SPAN TABLE - FOR SUPER GUTTER AS EDGE BEAM

GUTTER/EDGE BEAM SPAN B	VARIOUS SPANS OF PAN ROOF A				
	8'	10'	12'	14'	18'
	13'-9"	12'-4"	11'-3"	10'-5"	9'-9"

SUPER GUTTER AS EDGE BEAM
SPAN TABLE C-2

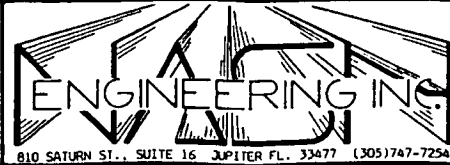


NOTE: FOR BEAM & POST SIZING CONSULT ENGINEER
SEE THIS SHEET, CARPORT (ATTACHED), FOR DETAILS

CARPORT
(FREE STANDING)

DATE	BY	DESCRIPTION

TREASURE COAST CHAPTER, INC.
OF THE ALUMINUM ASSOCIATION
OF FLORIDA

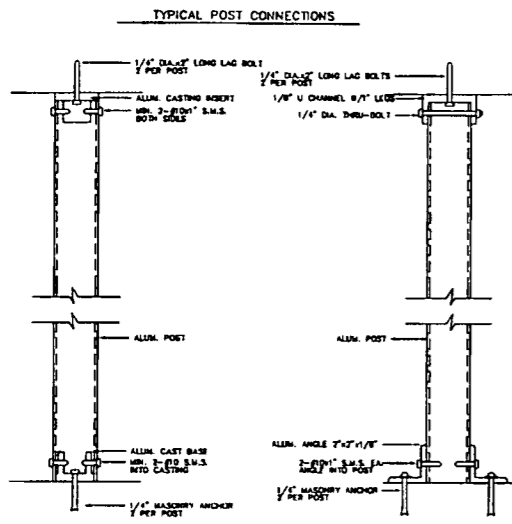


ALUMINUM CONSTRUCTION
DETAILS

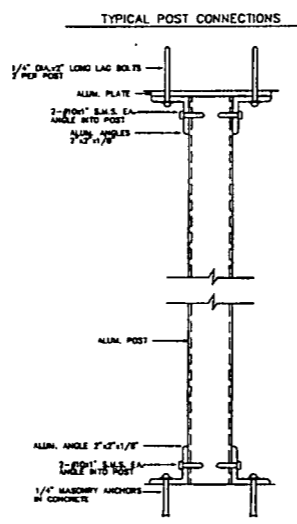
DRAWN	COMPTON
CHECKED	NASH
SCALE	N.T.S.
DATE	SEPTEMBER 1987
JOB NO.	87-031

Jim Nash
9/23/87

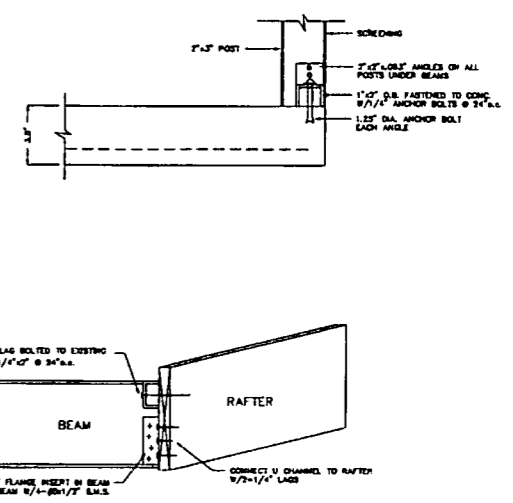
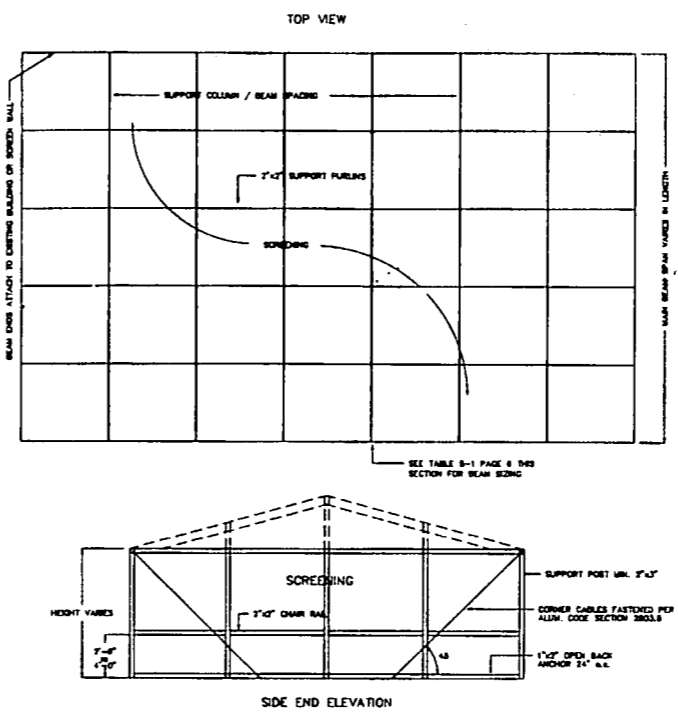
SHEET
2
OF FIVE SHEETS



NOTE: ANGLES MAY HAVE 1 LEG INSIDE POST



NOTE: ANGLES MAY HAVE 1 LEG INSIDE POST

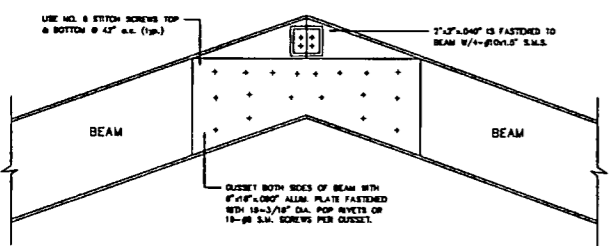


SCREEN ROOM
(UNDER WOOD ROOF)

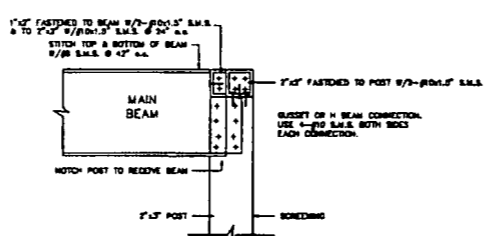
SCREEN ROOM
(UNDER WOOD ROOF)

POOL ENCLOSURE
(TYPICAL)

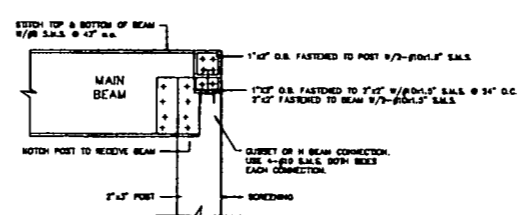
POOL ENCLOSURE
(CONNECTION TYPICALS)



POOL ENCLOSURE
(CONNECTION TYPICALS)



POOL ENCLOSURE
(POST TO BEAM TYPICALS)



POOL ENCLOSURE
(POST TO BEAM TYPICALS)

BEAM SIZE	MAXIMUM CLEAR SPAN FOR SCREENED ROOF BEAMS @ VARIOUS SPACING							
	4'-0\"/>							
2\"/>	21'-8"	19'-4"	18'-8"	17'-8"	17'-0"	16'-4"	15'-10"	15'-3"
2\"/>	25'-5"	22'-9"	21'-9"	20'-9"	20'-0"	19'-3"	18'-8"	18'-0"
2\"/>	32'-9"	29'-4"	28'-0"	26'-9"	25'-9"	24'-9"	24'-0"	23'-2"
2\"/>	42'-9"	38'-3"	36'-7"	35'-0"	33'-8"	32'-4"	31'-4"	30'-3"
2\"/>	49'-2"	44'-0"	42'-0"	40'-2"	38'-8"	37'-2"	36'-0"	34'-9"
3\"/>	25'-10"	25'-0"	24'-3"	23'-7"	23'-0"	22'-5"	21'-11"	21'-5"
3\"/>	34'-10"	31'-1"	29'-10"	28'-6"	27'-5"	26'-4"	25'-5"	24'-8"
4\"/>	42'-10"	38'-4"	36'-8"	35'-0"	33'-9"	32'-5"	31'-5"	30'-4"

NOTE: THIS TABLE IS BASED ON:
 WINDLOAD OF 120 MPH LIVELOAD = 7 LBS/SQ. FT. SCREEN MESH 18x14

SCREEN ROOF BEAM - SPAN TABLE S-1

DATE	BY	DESCRIPTION

REVISIONS

TREASURE COAST CHAPTER, INC.
OF THE ALUMINUM ASSOCIATION
OF FLORIDA

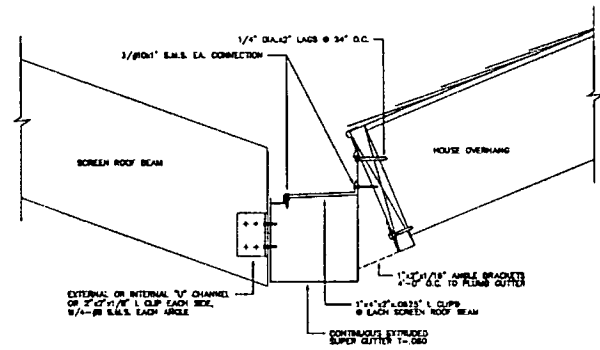


ALUMINUM CONSTRUCTION
DETAILS

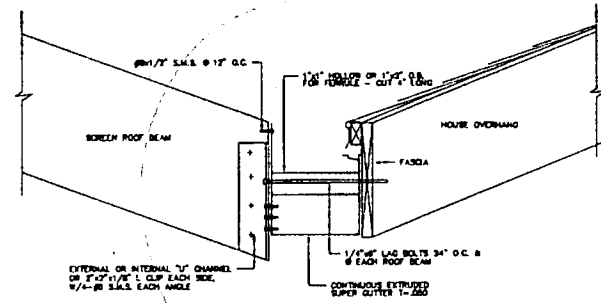
DRAWN	COMPTON
CHECKED	NASH
SCALE	NT.S.
DATE	SEPTEMBER 1987
JOB NO.	67-031

Signature: *Tom Nash*
9/12/87

SHEET 3 OF FIVE SHEETS



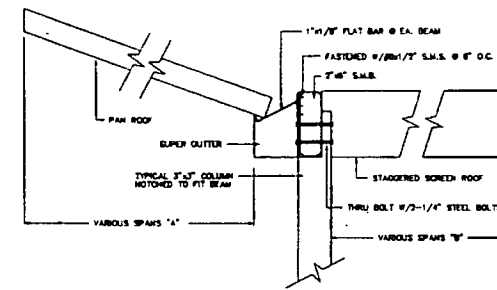
SUPER GUTTER - FASCIA ATTACHMENT
(*CANTED* FASCIA TYPICAL)



SUPER GUTTER - FASCIA ATTACHMENT
(*PLUMB* FASCIA TYPICAL)



COMBINATION Sx = 4.80in³

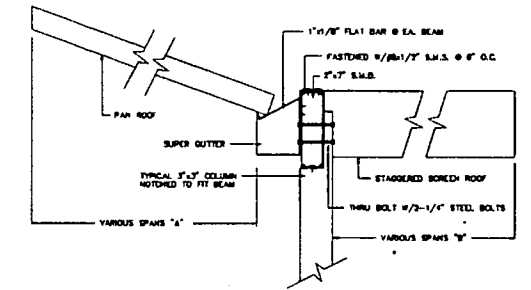


SPAN TABLE - FOR COMBINATION - SUPER GUTTER + 2"x6" S.M.B.

VARIOUS SPANS OF ROOF PANS "A"	VARIOUS SPANS OF SCREEN ROOFS "B"												
	18'	20'	22'	24'	26'	28'	30'	32'	34'	36'	38'	40'	42'
4'-0"	20'-5"	18'-10"	18'-4"	18'-10"	18'-4"	17'-10"	17'-8"	17'-1"	16'-8"	16'-5"	16'-2"	15'-10"	15'-4"
6'-0"	18'-5"	16'-0"	17'-8"	17'-3"	16'-10"	16'-8"	16'-3"	15'-10"	15'-7"	15'-4"	15'-1"	14'-10"	14'-7"
8'-0"	17'-0"	15'-8"	16'-3"	15'-0"	15'-8"	15'-3"	15'-3"	14'-11"	14'-8"	14'-5"	14'-2"	14'-0"	13'-10"
10'-0"	15'-8"	15'-8"	15'-3"	15'-0"	14'-8"	14'-5"	14'-2"	14'-0"	13'-8"	13'-5"	13'-2"	13'-1"	13'-1"
12'-0"	14'-10"	14'-7"	14'-4"	14'-3"	14'-0"	13'-8"	13'-4"	13'-3"	13'-0"	12'-10"	12'-8"	12'-4"	12'-4"
14'-0"	14'-0"	13'-10"	13'-7"	13'-5"	13'-5"	13'-0"	12'-11"	12'-10"	12'-8"	12'-4"	12'-2"	12'-0"	12'-0"



COMBINATION Sx = 6.87in³

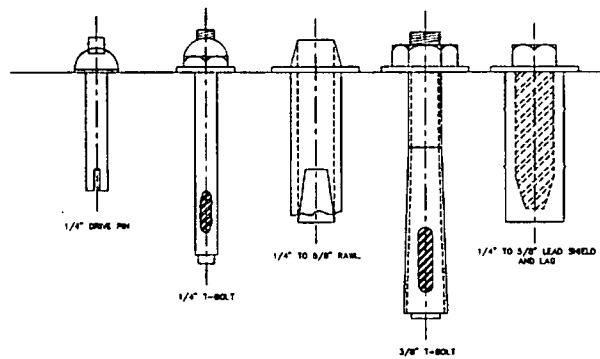


SPAN TABLE - FOR COMBINATION - SUPER GUTTER + 2"x7" S.M.B.

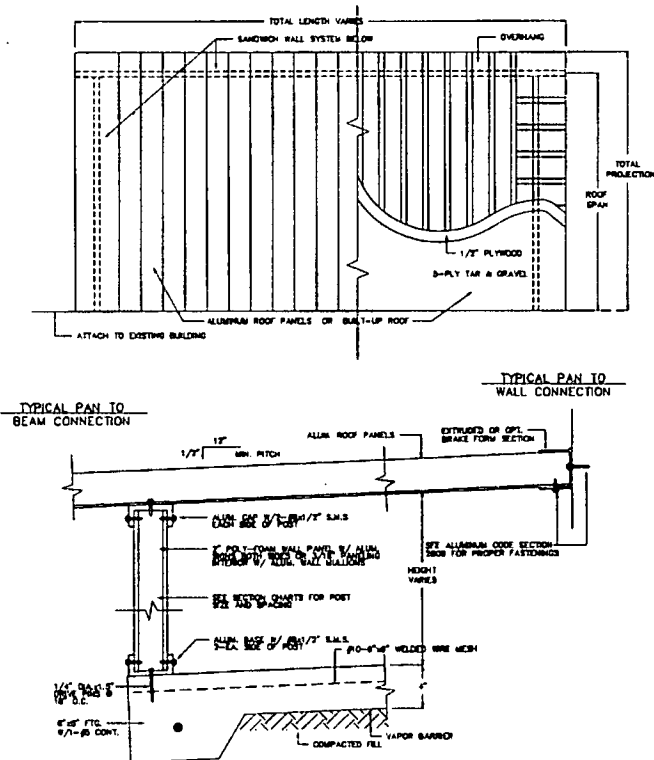
VARIOUS SPANS OF ROOF PANS "A"	VARIOUS SPANS OF SCREEN ROOFS "B"												
	18'	20'	22'	24'	26'	28'	30'	32'	34'	36'	38'	40'	42'
4'-0"	24'-8"	23'-8"	23'-8"	22'-8"	22'-8"	21'-8"	21'-8"	20'-8"	20'-8"	19'-7"	18'-7"	18'-11"	18'-7"
6'-0"	22'-0"	21'-8"	21'-8"	20'-7"	20'-7"	19'-6"	19'-6"	18'-6"	18'-6"	17'-5"	17'-5"	17'-0"	17'-0"
8'-0"	20'-3"	19'-11"	19'-8"	19'-3"	19'-3"	18'-10"	18'-10"	17'-10"	17'-8"	17'-3"	17'-0"	16'-8"	16'-8"
10'-0"	18'-10"	18'-7"	18'-3"	18'-0"	17'-8"	17'-4"	17'-1"	16'-10"	16'-7"	16'-4"	16'-2"	16'-0"	15'-8"
12'-0"	17'-8"	17'-4"	17'-1"	16'-11"	16'-8"	16'-4"	16'-1"	15'-10"	15'-8"	15'-5"	15'-3"	15'-1"	15'-1"
14'-0"	16'-8"	16'-4"	16'-1"	15'-10"	15'-8"	15'-4"	15'-1"	14'-10"	14'-8"	14'-5"	14'-3"	14'-1"	14'-1"

CARRIER BEAM - SPAN TABLE S-2
(SUPER GUTTER & 2"x6" S.M.B.)

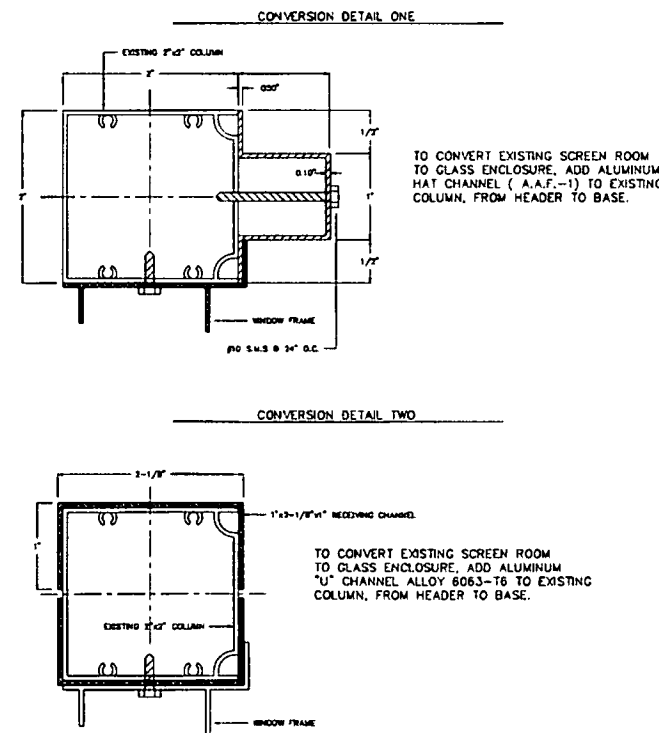
CARRIER BEAM - SPAN TABLE S-3
(SUPER GUTTER & 2"x7" S.M.B.)



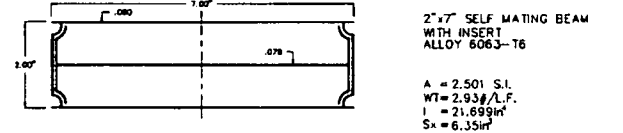
MASONRY - CONCRETE FASTENERS



GLASS ROOMS
(SANDWICH SYSTEM)



GLASS ROOM "HAT"
(REINFORCEMENT OF .040 POST)



SPACING AND SPAN TABLES

SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	56'-9"	47'-6"	30'-0"	27'-5"
4'	49'-2"	41'-2"	26'-0"	23'-9"
5'	44'-0"	36'-10"	24'-3"	21'-3"
6'	40'-2"	33'-8"	21'-3"	19'-4"
7'	37'-2"	31'-1"	19'-8"	17'-11"
8'	34'-9"	29'-0"	18'-5"	16'-0"
9'	32'-9"	27'-5"	17'-4"	15'-10"
10'	31'-0"	26'-0"	16'-5"	15'-0"

2"x7" S.M.B. WITH INSERT

DATE	BY	DESCRIPTION

TREASURE COAST CHAPTER, INC.
OF THE ALUMINUM ASSOCIATION
OF FLORIDA

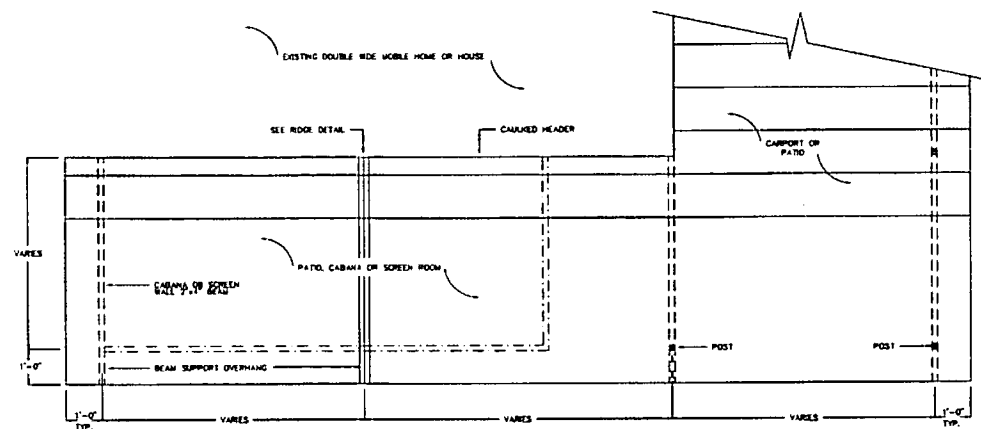


ALUMINUM CONSTRUCTION
DETAILS

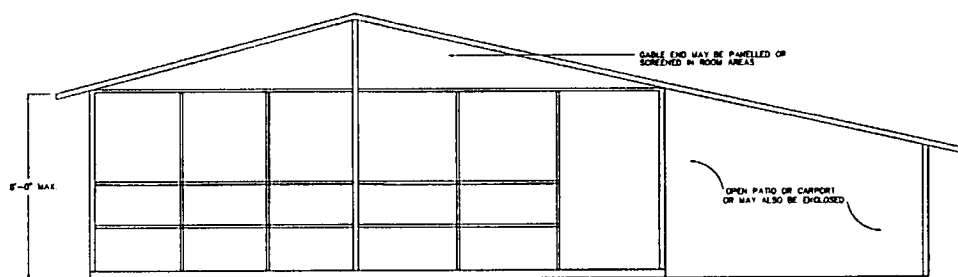
DRAWN	COMPTON
CHECKED	NASH
SCALE	NT.S.
DATE	SEPTEMBER 1987
JOB NO.	87-031

Handwritten signature and date: 9/23/87

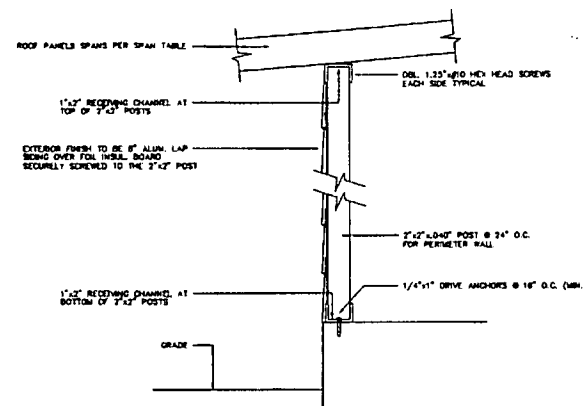
SHEET	4
OF	FIVE SHEETS



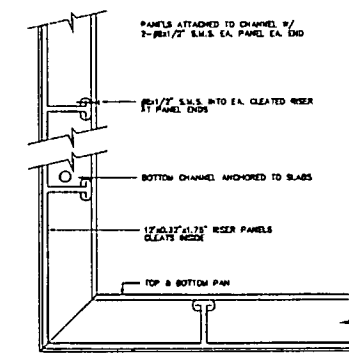
TYPICAL PLAN VIEW



TYPICAL ELEVATION



TYPICAL SECTION

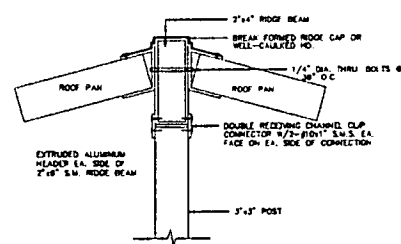


WALL DETAIL

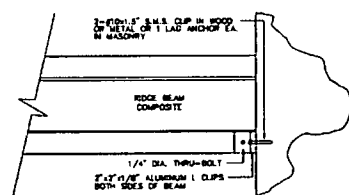
ATTACHED A-FRAME COMBINATION PATIO-CABANA OR CARPORT

TYPICAL UTILITY ROOM

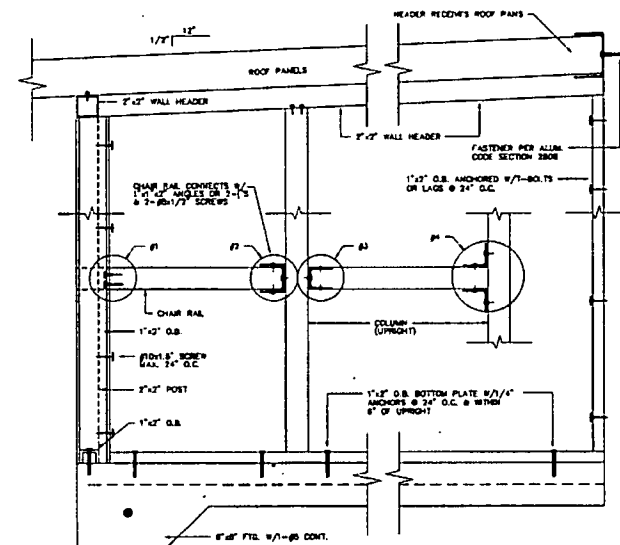
TYPICAL UTILITY ROOM



TYPICAL DETAIL



END CONNECTION



CHAIR RAIL CONNECTION ALTERNATIVES (PER CHAP. XXVII SECTION 2803.)

- 1. INTERNAL SCREWS
- 2. EXTERNAL SCREWS
- 3. INTERNAL "U" CHANNEL
- 4. EXTERNAL ANGLES

RIDGE BEAM

RIDGE BEAM

SCREEN ROOM (WITH ALUMINUM ROOF)

DATE	BY	DESCRIPTION

REVISIONS

TREASURE COAST CHAPTER, INC.
OF THE ALUMINUM ASSOCIATION
OF FLORIDA



810 SATURN ST., SUITE 16 JUPITER FL. 33477 (305)747-7254

ALUMINUM CONSTRUCTION
DETAILS

DRAWN	COMPTON
CHECKED	NASH
SCALE	HT.S.
DATE	SEPTEMBER 1987
JOB NO.	87-031

John Nash
9/23/87

SEAL

SHEET
5
OF FIVE SHEETS

6368

A/C CHANGEOUT

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 8/8/03

BUILDING PERMIT NO. 6368

Building to be erected for HEMMER

Type of Permit CHANGE A/C

Applied for by WATTS AC (Contractor)

Building Fee 35.00

Subdivision PALMETTO PARK Lot 15 Block _____

Radon Fee _____

Address 4 PALMETTO DRIVE

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

138410100000015080000

Roofing Fee _____

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

Total Construction Cost \$ 2850.00

TOTAL Fees 35.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

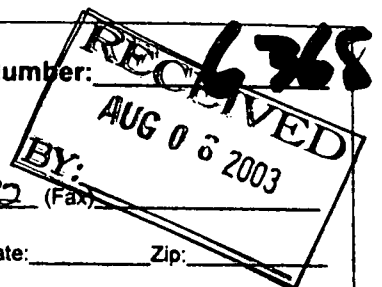
- | | | |
|---|--|--|
| <input type="checkbox"/> BUILDING | <input type="checkbox"/> ELECTRICAL | <input checked="" type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ROOFING | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT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

INSPECTIONS

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

Date: 8/8/03

Permit Number: _____



Town of Sewall's Point BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: PAUL HAMMER Phone (Day) 220-3082 (Fax) _____

Job Site Address: 4 PALMISTO City: _____ State: _____ Zip: _____

Legal Description of Property: _____ Parcel Number: _____

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

Description of Work To Be Done: CHANGE OUT 3TON A/C UNIT

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

CONTRACTOR/Company: WATTS A/C Phone: 4635050 Fax: 288-0333

Street: 1865 SE AIR PORT RD City: STUART State: FL Zip: 34956

State Registration Number: _____ State Certification Number: _____ Martin County License Number: SP08152

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 2850 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Phone Number: _____

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

ENGINEER _____ Phone Number: _____

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

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

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

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

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

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

OWNER OR AGENT SIGNATURE (required) _____

State of Florida, County of: _____

This the _____ day of _____, 2003

by _____ who is personally

known to me or produced _____

as identification. _____

Notary Public

My Commission Expires: _____

Seal

CONTRACTOR SIGNATURE (required) _____

On State of Florida, County of: MARTIN

This the 8th day of Aug, 2003

by JOHN G MORRISON who is personally

known to me or produced: FLDL M62546743261 X 7/2/02

As identification. John G. Morrison

My Commission Expires: _____



ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID SB
WATTE-1

DATE (MM/DD/YY)
08/23/02

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

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

INSURERS AFFORDING COVERAGE

INSURED
Watts Electric Corporation
Worrell Building Corporation
Watts A/C Mechanical Corp
Airport RV & Storage
1865 SE Airport Road
Stuart FL 34996

INSURER A: Southern Owners Insurance Co
INSURER B: Auto Owners Insurance Co
INSURER C:
INSURER D:
INSURER E:
RECEIVED
AUG 28 2002
BY: _____

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	20607101	08/25/02	08/25/03	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$ 50,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
B	AUTOMOBILE LIABILITY	4129686501	08/25/02	08/25/03	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	ANY AUTO				
B	EXCESS LIABILITY	20607108	08/25/02	08/25/03	EACH OCCURRENCE \$ 4,000,000
	<input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> CLAIMS MADE				AGGREGATE \$ 4,000,000
	<input type="checkbox"/> DEDUCTIBLE				
	<input checked="" type="checkbox"/> RETENTION \$ 10,000				
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	OTHER RENTED EQUIPMENT	20607107	08/25/02	08/25/03	50,000 500 ded

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

CERTIFICATE HOLDER

N

ADDITIONAL INSURED; INSURER LETTER: _____

CANCELLATION

TOWNS-1

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

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

AUTHORIZED REPRESENTATIVE

Mike Halcomb

07/03/2003

PRODUCER

RISK TRANSFER SOLUTIONS, INC.
LANDMARK CENTER ONE
315 EAST ROBINSON STREET, STE 580
ORLANDO, FL 32801

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

COMPANIES AFFORDING COVERAGE

- COMPANY A FIRST COMMERCIAL INSURANCE COMPANY
- COMPANY B
- COMPANY C
- COMPANY D

RECEIVED
 JUL 11 2003

INSURED PRESIDION SOLUTIONS I - V, INC.
 4400 PGA BOULEVARD, SUITE 1000
 PALM BEACH GARDENS, FL 33410
 PH: 800-477-5606

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				GENERAL AGGREGATE \$ PRODUCTS-COMP/OP AGG \$ PERSONAL & ADV INJURY \$ EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY-EA ACCIDENT \$ OTHER THAN AUTO ONLY: \$ EACH ACCIDENT AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
A	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL	17603-00	07/01/2003	06/30/2004	X WC STATU- OTH- TORY LIMITS ER EL EACH ACCIDENT \$ 1,000,000 EL DISEASE-POLICY LIMIT \$ 1,000,000 EL DISEASE-EA EMPLOYEE \$ 1,000,000
	OTHER LOCATION COVERAGE		07/01/2003	06/30/2004	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS ONLY THOSE EMPLOYEES LEASED TO, IN FLORIDA, BUT NOT SUBCONTRACTORS OF:
 7831 WATTS ELECT CORP/WORRELL BLDG.
 1865 SE AIRPORT ROAD, STUART, FL 34996

CERTIFICATE HOLDER

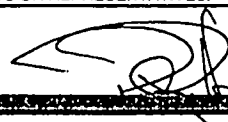
FAX: 561 288-0333
TOWN OF SEWALL'S POINT
 1 SOUTH SEWALL'S POINT RD.
 STUART, FL 34996-

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Paul R. Hughes



AC# 0445166

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION, INDUSTRY LICENSING BOARD

SEQ# L02060300439

DATE	BATCH NUMBER	LICENSE NBR
06/03/2002	324181395	CGC048703

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

WORRELL, JOHN
WORRELL BUILDING CORP
1865 SE AIRPORT ROAD
STUART FL 34996-5217

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER
SECRETARY

2002-2003 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(861) 288-5604

LICENSE 1990-513-166 CERT _____
PHONE 5612203421 SIC NO 001521

LOCATION:
1865 SE AIRPORT RD MAR

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR \$	<u>00</u>	LIC. FEE \$	<u>25.00</u>
\$	<u>00</u>	PENALTY \$	<u>00</u>
\$	<u>00</u>	COL. FEE \$	<u>00</u>
\$	<u>00</u>	TRANSFER \$	<u>00</u>
TOTAL			<u>25.00</u>

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF **GENERAL CONTRACTOR**
AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

WORRELL, JOHN/QUALIFIER
WORRELL BUILDING CORP
JOHN WORRELL/QUALIFIER
1865 SE AIRPORT ROAD
STUART FL 34997

29 DAY OF AUGUST 02
AND ENDING SEPTEMBER 30, 2003

12 02082601 000426

SUBMITTAL DATA SHEET



Heating and Air Conditioning

SPLIT SYSTEM CONDENSING UNITS
1.5 THRU 5 TON
MODELS: 13 SEER H*RD 018 THRU 060

JOB NAME:		LOCATION: <u>4 TALLMESSO</u>	
PURCHASER: <u>PUAL HEMMER</u>		ORDER NO:	
ENGINEER:			
SUBMITTED TO:	FOR:	REF:	APPROVAL: CONSTRUCTION:
SUBMITTED BY:		DATE:	
UNIT DESIGNATION:		SCHEDULE NO.	MODEL NO.

PRODUCT DATA

Cooling Performance

Total Capacity 36 MBH

Outdoor Design Temp 95 °F

Electrical Data

Power Supply 230/1/60

Total Unit Ampacity 18.9 AMPs

Power Input Req _____ KW

Minimum Wire Size _____ AWG

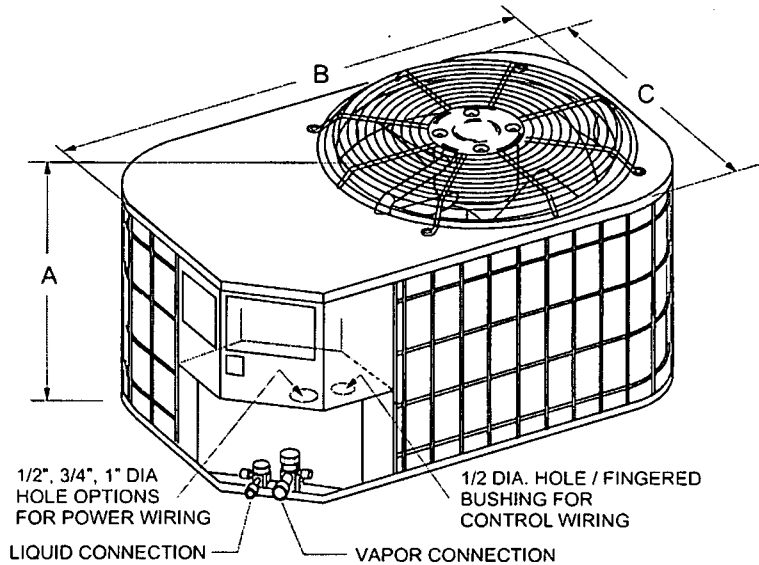
Maximum Overcurrent Device

Fuses Circuit Breaker

Unit Weight

Unit Weight _____ LBS

DIMENSIONS - INCHES



All dimensions are in inches. They are subject to change without notice. Certified dimensions will be provided upon request.

FILE COPY
TOWN OF SEVENNIS POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR BUILDING COMPLIANCE
 DATE: 8/8/03

 ACTING BUILDING OFFICIAL
 Gene Simmons

UNIT MODEL	DIMENSIONS			REFRIGERANT CONNECTION		
	A ¹	B	C	LINE SIZE		
				LIQUID	VAPOR	
018	27	37	27	3/8"	3/4"	
024	27	37	27		7/8"	
030	33	37	27			
036	39	37	27			
042	39	37	27			
048	38	43	32			
060	38	43	32		1-1/8"	



1. Included Fan Guard
 *Reducer Fan Guard

PN 6368

SUBMITTAL DATA SHEET



Heating and Air Conditioning

**SINGLE PIECE AIR HANDLER
SPLIT-SYSTEM FAN/COIL**

MODELS: F2RP / F2FP / F2RC / F2FC / F3RP / F3FP / F2FV / F3FV

JOB NAME:			LOCATION:		
PURCHASER:			ORDER NO:		
ENGINEER:					
SUBMITTED TO:		FOR:	REF:	APPROVAL:	CONSTRUCTION:
SUBMITTED BY:			DATE:		
UNIT DESIGNATION:			SCHEDULE NO.	MODEL NO.	

PRODUCT DATA

Cooling Performance

Total Capacity* 36 MBH
 Sensible Capacity* _____ MBH
 Temperature of Air Entering _____ °F (DB/WB)
 Indoor Coil _____ °F (DB/WB)

Supply Air Blower Performance

Total Supply Air 1200 CFM
 Total External Static Pressure .1 IWG
 Blower Speed (circle) HIGH ML L
 Motor Rating _____ HP
 Power Input Requirement 10 KW

Electrical Data

Power Supply 230 1160
 Total Unit Ampacity _____ AMPS
 Minimum Wire Size _____ AWG
 (Copper conductors)

Maximum Overcurrent Device
 Fuses (Dual Element)
 Circuit Breaker (HACR)

Unit Weight

Total Unit Weight _____ LBS
 (Include field-installed accessories)

* Shown in Outdoor Unit Technical Guide

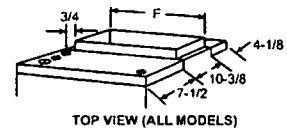
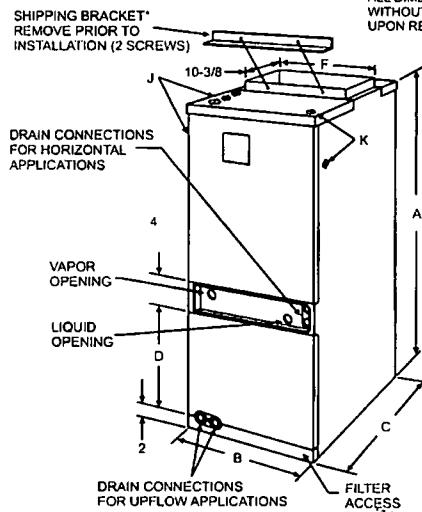
CLEARANCES

Front	24"
Rear	1"
Sides	1"

* 0 Clearance allowed when Electric Heater is not installed.

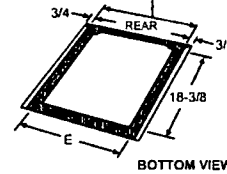
DIMENSIONS - INCHES

ALL DIMENSIONS ARE IN INCHES. THEY ARE SUBJECT TO CHANGE WITHOUT NOTICE. CERTIFIED DIMENSIONS WILL BE PROVIDED UPON REQUEST.



=DRAIN PAN FOOTPRINT

MAX. FILTER LENGTH (21 INCHES)
 MAX. FILTER WIDTH (B MINUS 1-1/2 INCHES)



MODEL	Dimensions						Wiring K.O.'s*		Refrigerant Connections	
	A	B	C	D	E	F	J	K	Liquid	Vapor
	Height	Width	Depth				Power	Control		
F*RP / F*FP / F*RC / F*FC										
018	40-3/4	18			14-7/8	16-1/2				5/8
024	40-3/4	18			14-7/8	16-1/2				5/8
030	40-3/4	18			14-7/8	16-1/2				3/4
036(RC)	40-3/4	18		12-1/8	14-7/8	16-1/2	7/8 (1/2)			3/4
036(RP)	40-3/4	21-1/2			18-3/8	20	1-3/8 (1)			3/4
040 ¹	40-3/4	21-1/2	22		18-3/8	20		7/8 (1/2)	3/8	7/8
042	40-3/4	21-1/2			18-3/8	20				7/8
045 ¹	50-3/4	24			20-7/8	22-1/2	7/8 (1/2)			7/8
048	50-3/4	24		17-3/8	20-7/8	22-1/2	1-3/8 (1),			7/8
060	50-3/4	24			20-7/8	22-1/2	1-23/32 (1-1/4)			7/8
F*FV										
060 ¹	50-3/4	24	22	17-3/8	20-7/8	22-1/2	Same as 060 above	7/8 (1/2)	3/8	7/8

1. Only available with factory installed horizontal drain pan.
 * Actual conduit size is shown in parenthesis.



TABULAR DATA SHEET



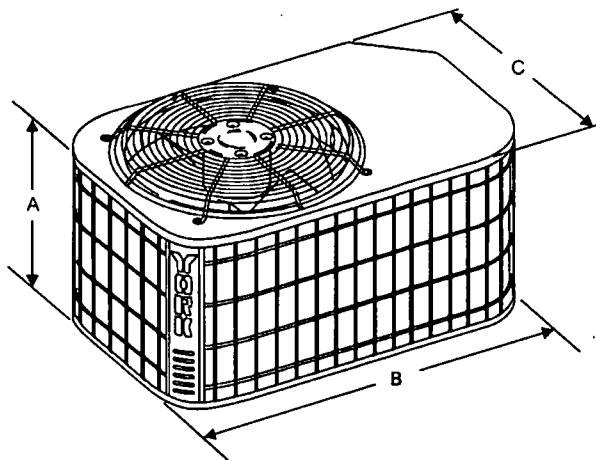
Outdoor Split System Air Conditioner 1.5 Thru 5 Tons

MODELS: H*RD018* THRU 060*
13 SEER

Physical and Electrical Data

MODEL	H1RD018S06	H1RD024S06	H1RD030S06	H1RD036S06	H1RD042S06	H1RD048S06	H1RD060S06
Unit Supply Voltage	208/230 - 1 - 60						
Normal Voltage Range ¹	187 to 252						
Minimum Circuit Ampacity	10.1	11.8	16.7	18.9	21.9	20.6	31.8
Max. Overcurrent Device Amps ²	15	20	25	30	35	35	50
Compressor Type ³	Recip	Recip	Recip	Recip	Scroll ^C	Scroll ^C	Scroll ^B
Compressor Amps	Rated Load	7.7	9.0	12.2	14.1	16.5	24.3
	Locked Rotor	48	48	60	73	95	150
Crankcase Heater	No	Yes	Yes	Yes	No	No	No
Fan Motor Amps	Rated Load	0.5	0.5	0.5	1.3	1.3	1.4
Fan Diameter Inches	22	22	22	22	22	24	24
Fan Motor	Rated HP	1/15	1/15	1/15	1/4	1/4	1/3
	Nominal RPM	850	850	850	1,100	1,100	1,100
	Nominal CFM	2,200	2,200	2,400	3,800	3,500	3,500
Coil	Face Area Sq. Ft.	15.72	15.72	19.65	23.60	23.60	27.00
	Rows Deep	1	1	1	1	1	2
	Fin / Inches	18	18	18	20	18	18
Liquid Line OD	3/8	3/8	3/8	3/8	3/8	3/8	3/8
Vapor Line OD	3/4	3/4	7/8	7/8	7/8	7/8	1-1/8
Unit Charge (Lbs. - Oz.) ⁴	4 - 11	5 - 8	7 - 9	9 - 1	9 - 8	14 - 3	15 - 13
Charge Per Foot, Oz.	0.68	0.68	0.70	0.70	0.70	0.70	0.76
Operating Weight Lbs.	151	151	204	224	221	264	270

1. Rated in accordance with ARI Standard 110, utilization range "A".
2. Dual element fuses or HACR circuit breaker.
3. All scrolls listed with a superscript "B" are Bristol scrolls. All scrolls listed with a superscript "C" are Copeland scrolls.
4. The Unit Charge is correct for the outdoor unit, matched indoor coil and 15 feet of refrigerant tubing. For tubing lengths other than 15 feet, add or subtract the amount of refrigerant, using the difference in length multiplied by the per foot value.



All dimensions are in inches. They are subject to change without notice. Certified dimensions will be provided upon request.

Unit Model	Dimensions (Inches)			Refrigerant Connection Line Size	
	A ¹	B	C	Liquid	Vapor
018	27	37	27	3/8"	3/4"
024	27	37	27		
030	33	37	27		
036	39	37	27		7/8"
042	39	37	27		
048	38	43	32		
060	38	43	32		1-1/8"

1. Included Fan Guard
- * Reducer Fan Guard

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8/13, 2003 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6131	PFEIFFER	DRY IN+	Passed	
(5)	104 HENRY SEWALL HEATON ROOFING	T.N.TAQ		INSPECTOR: <i>[Signature]</i>
6358	HEATON	CHANGE OVER	Passed	930 close
(1)	4 PALMETTO DR WATTS A/C	FINAL		INSPECTOR: <i>[Signature]</i>
6096	McMAHON	HARD PLANK	Passed	
(6)	5 MELODY HILL O/B	SIDING-FINAL		INSPECTOR: <i>[Signature]</i>
6319	WEST	FINAL REPAIR	Passed	close
(2)	7 PALMETTO CONROY	BASEBOARD DRY WALL		INSPECTOR: <i>[Signature]</i>
TREE	GARY	TREE	Passed	partial
(4)	36 RIO VISTA DR			INSPECTOR: <i>[Signature]</i>
6341	LAW	HOT MOP	Passed	
(3)	4 COPAIRE CARDINAL			INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>
OTHER:	133 S. RIVER (SEE 6) Trees = Passed <i>[Signature]</i>			

7126

RE-ROOF/REPAIR

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 12/13/04

BUILDING PERMIT NO. 7.126

Building to be erected for Hemmers

Type of Permit ROOF REPAIRS

Applied for by O/B (Contractor)

Building Fee _____

Subdivision PALMETTO Lot 15 Block _____

Radon Fee _____

Address 4 PALMETTO DRIVE

Impact Fee _____

Type of structure SFR

A/C Fee N/C

Electrical Fee HURRICAN

Parcel Control Number:
138410100000015080000

Plumbing Fee DAMAGE

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

Roofing Fee _____

Total Construction Cost \$13,800.

TOTAL Fees /

Signed Paul James
Applicant

Signed Gene Summers
Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

RECEIVED

NOV 09 2004

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

Date: _____
BY: PAUL OR ANNIE HEMMERS Phone (Day) 220-3032 (Fax) SAME

OWNER/TITLEHOLDER NAME: _____
Job Site Address: 4 PALMETTO DR City: SEWALLS PT State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) LOT 15-PALMETTO PARK Parcel Number: _____

Owner Address (if different): 4 PALMETTO DR City: SEWALLS PT State: FL Zip: 34996

Description of Work To Be Done: REPLACING SHINGLES, ROOF

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 13,800.00
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

(If no, fill out the Contractor & Subcontractor sections below)
(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

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

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

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER _____ Lic.# _____ Phone Number: _____

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

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

Carport: _____ Total Under Roof 3115 Wood Deck: _____ Accessory Building: _____

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

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

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

OWNER OR AGENT SIGNATURE (required)

Paul Hemmers

State of Florida, County of: Martin
This the 8th day of November, 2004

by _____ who is personally known to me or produced Florida Driver License as identification.

My Commission Expires: February 19-2005
Notary Public Natalie Pottinger DD183651 EXPIRES February 12, 2007

CONTRACTOR SIGNATURE (required)

On State of Florida, County of: _____
This the _____ day of _____, 200

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

My Commission Expires: _____
Notary Public _____

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





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

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

NOTICE OF ACCEPTANCE (NOA)

**Owens Corning
One Owens Corning Parkway
Toledo, OH 43659**

SCOPE:

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

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

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

DESCRIPTION: Oakridge PRO 40 AR

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

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

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

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

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

This NOA revises NOA #01-1127.08 and consists of pages 1 through 4.
The submitted documentation was reviewed by Frank Zuloaga, RRC.



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 11/9/04

BUILDING OFFICIAL
Gene Simmons

NOA No.: 03-1028.04
Expiration Date: 07/19/06
Approval Date: 02/26/04
Page 1 of 4

**REPAIR WORK FOR
HURRICANE DAMAGE**

ROOFING ASSEMBLY APPROVAL

Category: Roofing
Sub-Category: 07310 Asphalt Shingles
Materials: Laminate
Deck Type: Wood

1. SCOPE

This revises a roofing system using Owens Corning Oakridge PRO 40 AR. Asphalt shingles manufactured by Owens Corning as described in Section 2 of his Notice of Acceptance.

2. PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Oakridge PRO 40 AR	13 1/4" x 39 3/8"	PA 110	A heavy weight, fiberglass reinforced four tab asphalt shingle.
Accessory Shingles	various	proprietary	Accessory shingles for hip, ridge and starter strip applications.

3. EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Celotex Corp. Testing Services	258495B	TAS 100	06/01/98
PRI Asphalt Technologies, Inc.	OCF-069-02-01	TAS 100	08/21/03
	OCF-071-02-01		08/22/03
Underwriters Laboratories, Inc.	94NK9632	TAS 107	07/01/98
	03NK21814		08/28/03
	96NK30503	ASTM E 108	10/11/96
	98NK16342	ASTM D 3462	05/14/98
	02NK02878		10/15/03
	02NK02878		10/20/03

4. LIMITATIONS

- 4.1 Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
- 4.2 Shall not be installed on roof mean heights in excess of 33 ft.
- 4.3 All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.

5. INSTALLATION

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

6. LABELING

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



NOA No.: 03-1028.04
Expiration Date: 07/19/06
Approval Date: 02/26/04
Page 2 of 4

7. BUILDING PERMIT REQUIREMENTS

7.1 Application for building permit shall be accompanied by copies of the following:

7.1.1 This Notice of Acceptance.

7.1.2 Any other documents required by the Building Official or the applicable code in order to properly evaluate the installation of this system.

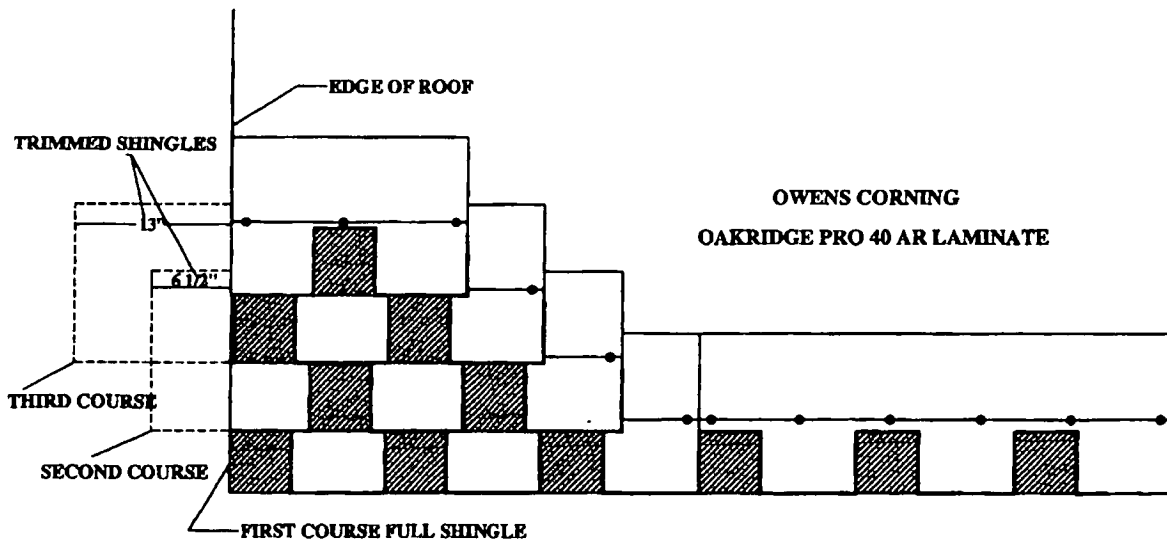
8. MANUFACTURING PLANTS

8.1 Savannah, GA

8.2 Medina, OH

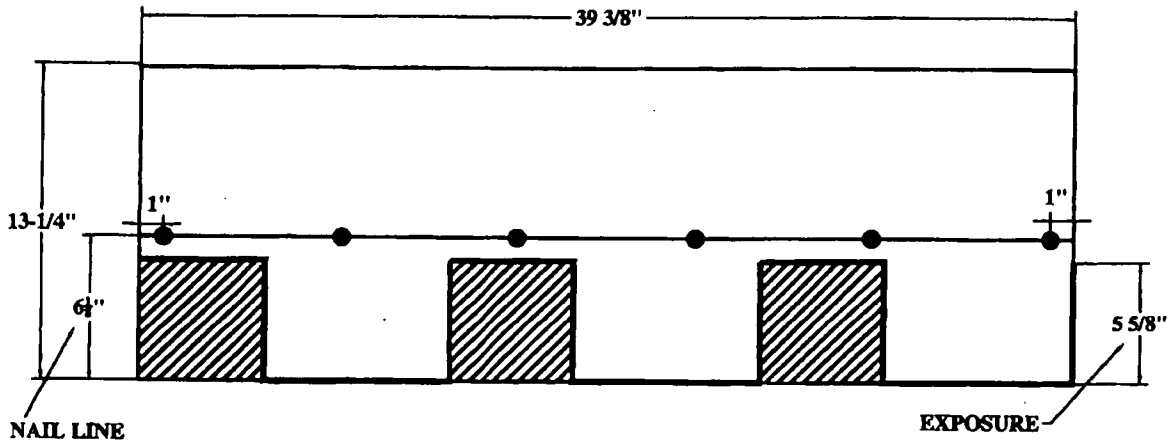
8.3 Jacksonville, FL

DETAIL A



DETAIL B

OWENS CORNING
FASTENING PATTERN & PHYSICAL DIMENSIONS
OAKRIDGE PRO 40 AR LAMINATE



END OF THIS ACCEPTANCE



NOA No.: 03-1028.04
Expiration Date: 07/19/06
Approval Date: 02/26/04
Page 4 of 4

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF FLORIDA

COUNTY OF MARTIN CO.

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):

4 PALMETTO DR, SEWALL'S POINT (PALMETTO PARK) LOT 15

GENERAL DESCRIPTION OF IMPROVEMENT: REPLACING SHINGLES FL. 34996

OWNER: PAUL H. & ANKIE HEMMERS

ADDRESS: 4 PALMETTO DR, SEWALL'S POINT, FL. 34996

PHONE #: 220-3032 FAX #: 220-3032

CONTRACTOR: OWNER - (BUILDER)

ADDRESS: STATE OF FLORIDA MARTIN COUNTY

PHONE #: _____ THIS IS TO CERTIFY THAT THE FOREGOING _____ PAGES IS A TRUE

SURETY COMPANY (IF ANY) CORRECT COPY OF THE ORIGINAL

ADDRESS: _____ BY Marsha Ewing D.C.

PHONE #: _____ DATE 11/9/04

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.

Paul H. Hemmers
Paul H. Hemmers
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 8th DAY OF November 192004 BY _____

Natalie Pottinger
NOTARY SIGNATURE

PERSONALLY KNOWN OR PRODUCED ID TYPE OF ID Florida DL
Natalie Pottinger



MY COMMISSION # DD183631 EXPIRES February 12, 2007 BONDED THRU TROY FAIN INSURANCE, INC.

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

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

DISCLOSURE STATEMENT

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

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

Name: PAUL HORST HEMMERS Date: NOV 9, 2004

Signature: Paul Horst Hemmers

Address: 4 PALMETTO DR

City & State: SEWALL'S POINT FL. 34996

Permit No. _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 PALMETTO

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

DRY-IN

NAILING ON METAL DRIP
EDGE TO BE 4-6" O.C.

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

DATE: 4/25

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/25, 2025 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7195	THOMPSON	INSULATION	PASS	
2	179 S. RIVER RD FLORIDA'S FINEST			INSPECTOR: <i>[Signature]</i>
7335	VAN T BOSCH	INSULATION	PASS	
8	36 S. RIVER ROAD FLORIDA'S FINEST			INSPECTOR: <i>[Signature]</i>
6749	NAUDIN	FORMBOARD	PASS	
7	19 N. RIDGEVIEW O/B			INSPECTOR: <i>[Signature]</i>
7126	HENNINGES	DRY-IN	FAIL	
91	4. PALMISTO DE O/B			INSPECTOR: <i>[Signature]</i>
7453	SAUL	FINAL FENCE	PASS	CLOSE
4	107 S. RIVER RD O/B			INSPECTOR: <i>[Signature]</i>
7348	MCCARTHY	FINAL ROOF	PASS	CLOSE
3	3 KINGSTON CT STUART ROOFING			INSPECTOR: <i>[Signature]</i>
6863	Johnsten	Final SFR Bldg	PASS	CLOSE (see attached for other inspections)
1	34 W High Point Masterpiece Bldgs			INSPECTOR: <i>[Signature]</i>





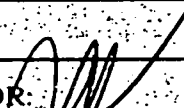
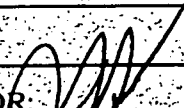
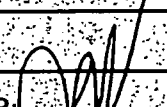
OTHER:

3 RIVERVIEW FENCE TOO TALL? 6' MAX.
(OK)

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/13, 2015 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7126	Hemmens	FINAL ROOF REPAIR	PASS	CLOSE
11	4 PALMETTO DRIVE OIB			INSPECTOR: 
7313	McALPIN	FENCE FINAL	FAIL	
4	5 PINEAPPLE LA STUART FENCE			#140 INSPECTOR: 
7512	LENIHAN	FINAL ROOF	PASS	CLOSE
9	25 LANTANA LA COLLINS ROOFING			INSPECTOR: 
7528	SWEET	DECK-IN	PASS	
10	19 S. RIDGEVIEW RD CARDINAL ROOFING			INSPECTOR: 
6753	RADER	ELEC	PASS	
1A	5 HERITAGEWAY A&P CONSTRU.	ALC PUMBING	FAIL PASS	INSPECTOR: 
11	11	FRAMING	FAIL	
				INSPECTOR: 
TREE	SEAMAN	TREE	PASS	
7	104 S. RIVER RD			INSPECTOR: 
OTHER: _____				