

12 N Ridgeview Road

2333
FENCE

Permit No. _____

Date _____

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

2333

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 JAT Builders Present Address P.O. Box 2922 Stuart

Phone 283-9992

Contractor JAT Builders Address P.O. Box 2922 Stuart

Phone 283-9992

Where licensed Florida License number CGC

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: Fence over →

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

12 Ridgeview

Subdivision Homewood Lot number 7 Block number B

Contract price \$ 1,400 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 [Signature]

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

Owner [Signature]

TOWN RECORD

Date submitted _____ Approved: Dale Brown 7/7/88
Building Inspector Date

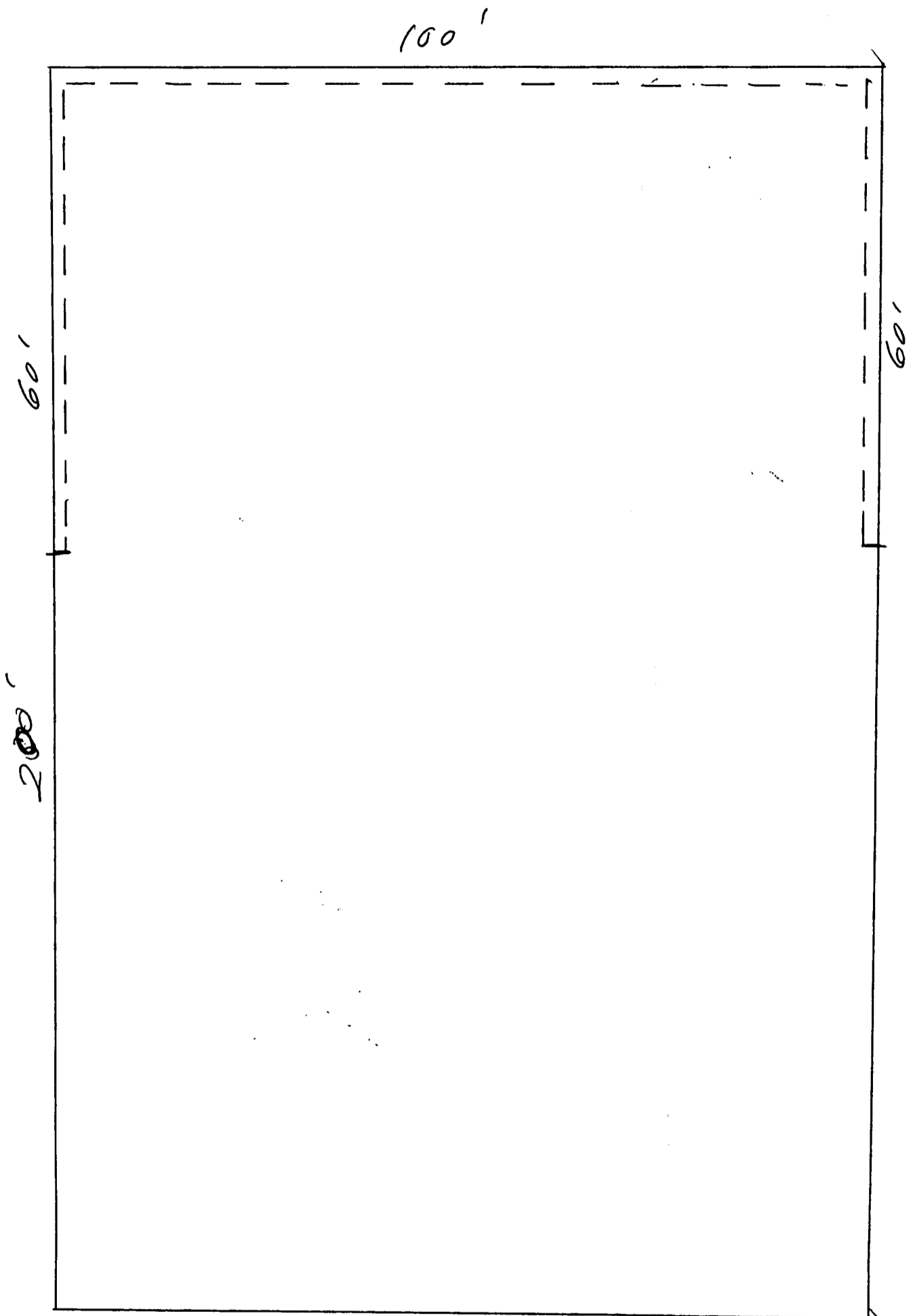
Approved: _____ Commissioner Date Final Approval given: _____ Date

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.



7' high -

address N. Ridgewood
12 ~~Ridgewood~~

Lot 7
Blk. 8 Ridgewood -
Homewood.

not water

2356

POOL

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

DO NOT REMOVE UNTIL JOB IS COMPLETED

OWNER Susan Decker
CONTRACTOR J.A.T. Builders INC
LOT 7 BLOCK _____ SUB Homewood
NO. 12 North Ridgeview St. or Ave.

NO. 2383 Date Issued 8/30/88

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.

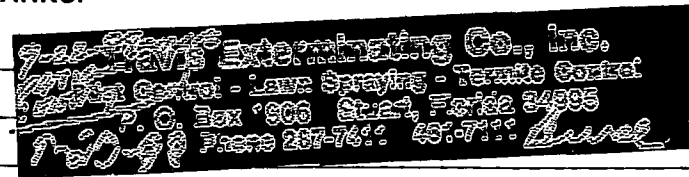
TOWN OF SEWALL'S POINT BUILDING PERMIT

- * 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		
3. FOOTING - SLAB	9/20/88 Footer + Slab OK	9/20/88 DB
4. ROUGH PLUMBING	OK 9/16/88	DB
5. ROUGH ELECTRIC	OK 11/4/88	DB
6. LINTEL		
7. ROOF	OK 10/4/88	DB
8. FRAMING	OK 11/4/88	DB
9. INSULATION	OK 11/9/88	DB
10. A/C DUCTS	OK 10/4/88	DB
11. FINAL ELECTRIC	1/13	
12. FINAL PLUMBING	1/13	
13. FINAL CONSTRUCTION	1/13	

TO CONSTRUCT New Residence

REMARKS:



Permit No. **2356**

Date **7/29/88**

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

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

Owner JAT CONSTRUCTION Present Address _____

Phone 283-9992

Contractor KLINE POOLS Address 2920 SE KENSINGTON

Phone 283-6857 STUART FL

Where licensed _____ License number _____

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

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

~~#12 RIDGEWAY~~ #12 RIDGEVIEW
State the street address at which the proposed structure will be built: _____

Subdivision HOMEWOOD Lot number 7 Block number 6

Contract price \$ 8200 Cost of permit \$ 100

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 Aaron Klein

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 Aaron Klein & Laurie

TOWN RECORD

Date submitted _____ Approved: Dale Brown 8/3/88
Building Inspector _____ Date _____

Approved: Steve Corke 8/3/88 Commissioner Date _____
Final Approval given: _____ Date _____

Certificate of Occupancy issued (if applicable) _____ Date _____

SP1282

Permit No. **# 2356**

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.

APPLICATION FOR PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING A

PERMIT NUMBER

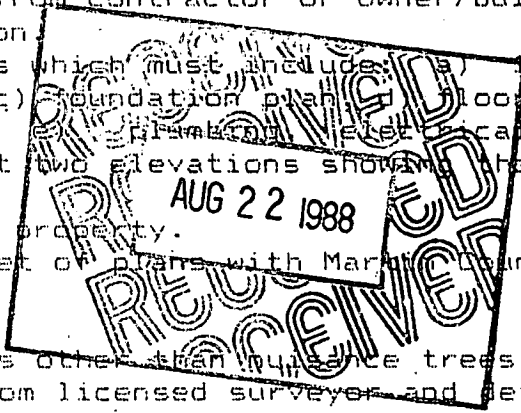
DATE OF APPLICATION

8-22-88

2383

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 and floor plans, e) wall and roof cross-sections, d) 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 nut, pine 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. - AICAN



Owner Susan Decker Current Address 4 - Michael Rd Sewalls Pt.
 Telephone n/a
 General Contractor JAT Builders Inc. Address P.O. Box 2922 Stuart Fla.
 Telephone 283-9992
 Where Licensed Florida License Number CGC023763
 Plumbing Contractor White License Number _____
 Electrical Contractor Cook License Number _____
 Roofing Contractor Panache License Number _____
 A/C Contractor ECT License Number _____

Describe the building or alterations New House
 Name the street on which the building, its front building line and its front yard will face 12^N Ridgewein
 Subdivision Homewood Lot 7 Block B
 Building area (inside walls) 2850 Garage, porch, carport area 1040
 Contract price (excluding carpet, land, appliances, landscaping) \$ 197,000
 Cost of permit \$ 1568 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). cost = 197,000 -
- ✓ 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.

985
 200
 365
 8 1590
 28
 1568

✓ 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.

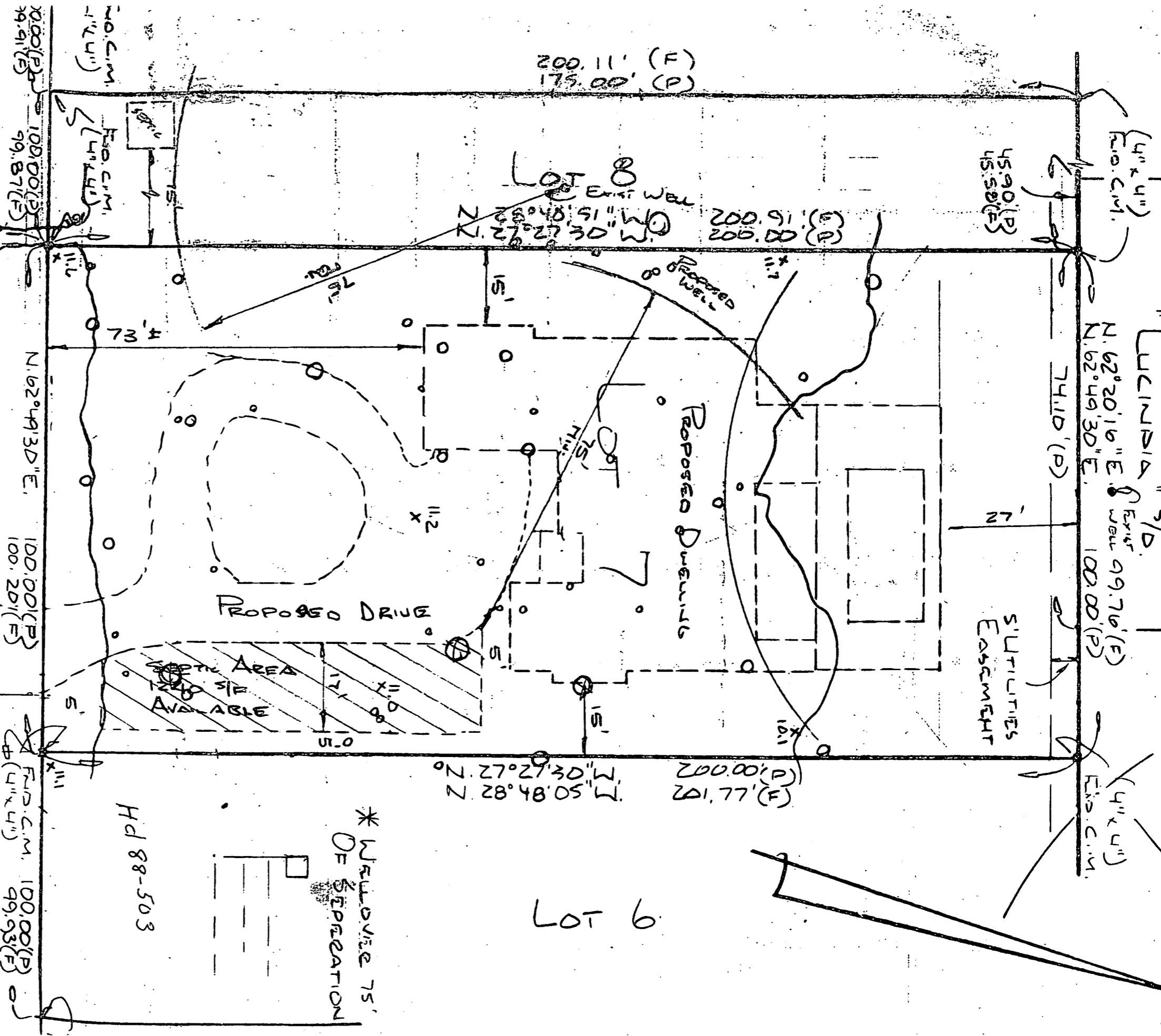
14. In addition to the requirements of this permit there may be additional restrictions applicable to this property that may be found in the public records of this county.

Contractor's Signature [Signature] Owner's Signature _____
 Approval by Building Inspector W. Brown Date 8/25/88
 Approval by Building Commissioner [Signature] Date 8/25/88
 Certificate of Occupancy issued _____ Date _____

LOT 37

LOT 36
"LUCINDA"
"S/D"

LOT 35
"TRISK"



* BEARING BASE: NORTHCELY
 RIDGVIEW (N. 62° 49' 30" E.)
 NO OBSTRUCTIONS

NOTES:

* MALLOW 75'
 OF SEPARATION

Hd 88-503

LOT 6

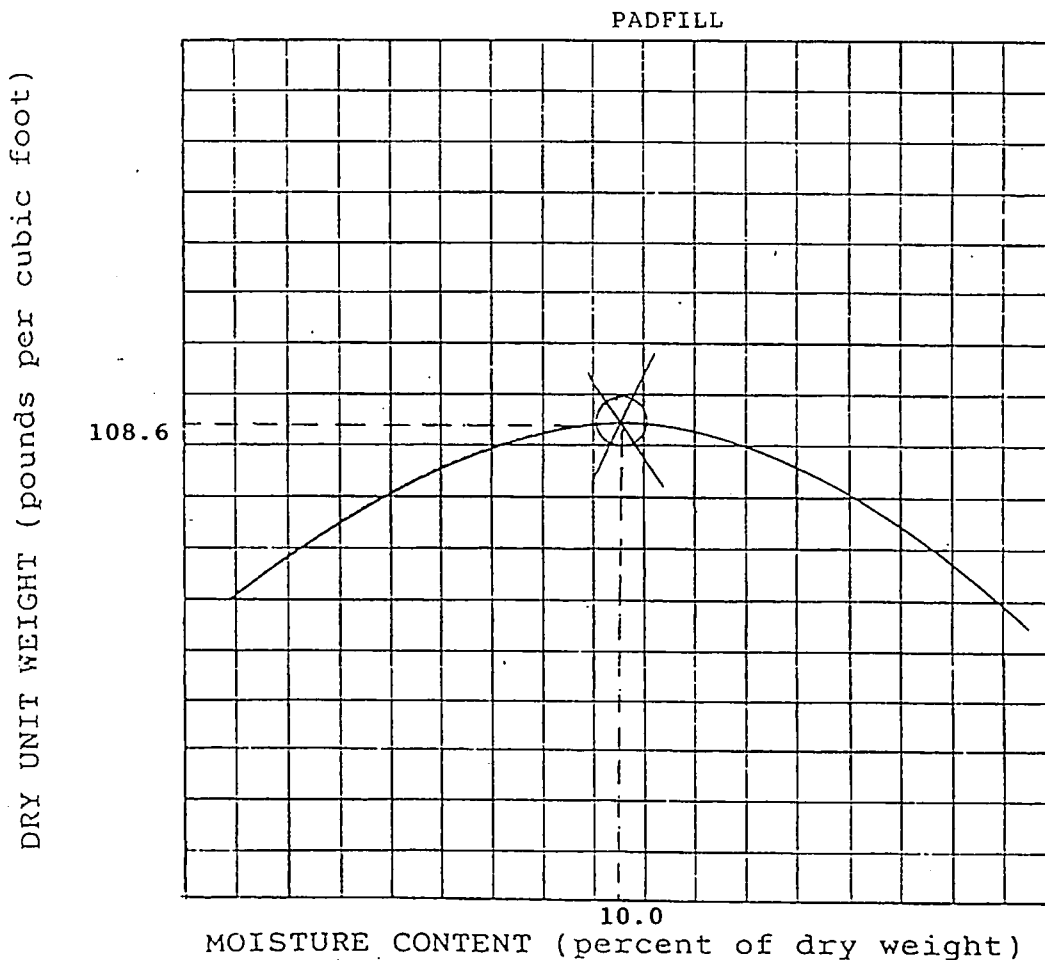
RIDGE

HENRIKSEN ENGINEERING, INC.
CONSULTANTS IN GEOTECHNICAL ENGINEERING AND MATERIALS TESTING

2660 S.E. FAIRMONT STREET
STUART, FLORIDA 34997

P.O. BOX 1710
STUART, FLORIDA 34995

PROJECT Lot #12 Ridgeview JOB/CLIENT NO. 209-1023
LOCATION Sewall's Point DATE 9/12/88
CLIENT J.A.T. Custom Homes REPORT NO. -1-
TYPE OF SOIL Brown medium sand with marl TYPE OF PROCTOR T-180
MAXIMUM DENSITY OF MATERIAL 108.6 (p.c.f) OPTIMUM MOISTURE 10.0



approved by *Carl H.D. Henriksen*
Carl H.D. Henriksen, P.E.

HENRIKSEN ENGINEERING, INC.

Consultants in Soil Mechanics, Foundations and Geotechnical Engineering
Materials Testing and Inspections: Soils—Concrete—Asphalt—Steel

P.O. Box 1710, 2660 SE Fairmont Street, Stuart, Florida 33495, (305) 286-6124 / (305) 286-6047

SOILS INSPECTION

PROJECT Lot #12 Ridgeview PROJECT NO. 209-1023
LOCATION Sewall's Point REPORT NO. -2-
CLIENT J.A.T. Custom Homes DATE 9/12/88
TYPE OF FILL Brown medium sand with marl
METHOD OF COMPACTION N/A TYPE OF PROCTOR T-180
MAXIMUM DENSITY OF MATERIAL 108.6 DENSITY REQUIRED 95%

LOCATIONS AND RESULTS OF TESTS

<u>TEST NUMBER</u>	<u>TEST LOCATION</u>	<u>DEPTH BELOW FINISHED GRADE</u>	<u>PERCENT MOISTURE</u>	<u>PERCENT COMPACTION</u>
1	Northwest corner of pad	0-1'	10.2	96.5
2	Southwest corner of pad	0-1'	9.7	97.2
3	Southeast corner of pad	0-1'	9.9	96.9
4	Northeast corner of pad	0-1'	10.4	96.3
5	Center of pad	0-1'	10.1	96.4
6	Center of pad	1-2'	12.6	96.0

REMARKS: _____

APPROVED BY: _____

CARL H.D. HENRIKSEN, P.E.

713598

THIS WARRANTY DEED Made this 25th day of May, A.D. 1988 by ZDENEK DANIEL PAUK, a single adult, hereinafter called the grantor, to SUSAN DECKER, a single adult, whose postoffice address is 12 Ridgeview, Sewall's Point, Stuart, Florida, 34996 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 7; BLOCK B, HOMEWOOD, SEWALL'S POINT, Martin County, Florida, according to the Plat thereof recorded in Plat Book 3, Page 35, public records of Martin County, Florida.

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:

Bladys Stiles
Magdalena Cassidy

Zdenek Daniel Pauk
ZDENEK DANIEL PAUK

STATE OF FLORIDA)
COUNTY OF MARTIN)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared ZDENEK DANIEL PAUK, to me known to be the person(s) described in and who executed the foregoing instrument and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 25th day of May, A.D. 1988.

Barbara S. Piazza
Notary Public

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. MAY 11, 1991
BONDED THRU GENERAL INS. UND.

My Commission Expires: _____



This instrument prepared by:
Loren E. Bodem
815 Colorado Avenue, Suite 305
Stuart, Florida 34994

FLA. DOC. PAID
\$ 3.50
Marsha Stiller
Clerk of Circuit Court
Martin Co., Fla.
By BV D.C.

C.R. BOOK 766 PAGE 1747

FILED FOR RECORD
MARTIN CO., FLA.

08 MAY 26 AM 10:19

MARSHA STILLER
CLERK OF CIRCUIT COURT

BY [Signature] D.C.

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 2/18/05

BUILDING PERMIT NO. 7319

Building to be erected for ROBERTS

Type of Permit FULL

Applied for by O/B (Contractor)

Building Fee 35.00

Subdivision HOMWOOD Lot 7 Block B

Radon Fee _____

Address 12 N. RIDGEVIEW RD

Impact Fee _____

Type of structure FULL

A/C Fee _____

Parcel Control Number:

138410060020007070000

Electrical Fee _____

Plumbing Fee _____

Amount Paid 35.00 Check # 1037 Cash _____ Other Fees (_____) _____

Roofing Fee _____

Total Construction Cost \$ 500.00

TOTAL Fees 35.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

- | | | |
|-------------------------------------------|----------------------------------------------|----------------------------------------|
| <input type="checkbox"/> BUILDING | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ROOFING | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input type="checkbox"/> DEMOLITION | <input type="checkbox"/> FENCE |
| <input type="checkbox"/> SCREEN ENCLOSURE | <input type="checkbox"/> TEMPORARY STRUCTURE | <input type="checkbox"/> GAS |
| <input checked="" 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 | _____ |

FEB 17 2005

BY:

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

Date: Feb. 17/05

OWNER/TITLEHOLDER NAME: Susan Roberts Phone (Day) 283-0744 (Fax) _____

Job Site Address: 12 N. Ridgeway Rd. City: Stuart State: FL Zip: 34996

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

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

Description of Work To Be Done: Fill for flowerbed

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$500-750 (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 _____ Wood Deck: _____ Accessory Building: _____

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

I 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.

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) _____ CONTRACTOR SIGNATURE (required) _____

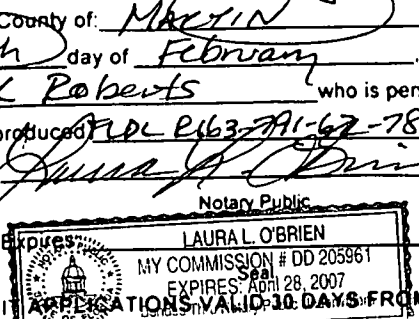
State of Florida, County of: MARTIN On State of Florida, County of: _____

This the 17th day of February, 2005 This the _____ day of _____, 200 _____

by Susan K Roberts who is personally known to me or produced _____ by _____ who is personally known to me or produced _____

as identification _____ as identification. _____


My Commission Expires: _____ Notary Public My Commission Expires: _____ Notary Public



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

N. Ridgerview Road



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 2/18/05

BUILDING OFFICIAL
Gene Simmons

choice

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/18, 2002 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7394	HARTE	SUD GL Dose B	PASS	NO ACCESS - OWNER
4	3 E. HIGH POINT FIRST FLORIDA			NOT HOME INSPECTOR: <i>OW</i>
7389	WALKER	FINAL REEROOF	FAIL	
10	6 CRANE'S NEST LANIERO			INSPECTOR: <i>OW</i>
7466	BURKE	DRY IN		CHECK @ NOON
14	7 MIRAMAR CODE REE ROOFERS			INSPECTOR:
7319	ROBERTS	FINAL FILE	PASS	CLOSE
11	12 N. RIDGEVIEW OLB			INSPECTOR: <i>OW</i>
6772	ELDER	SHEATHING	PASS	
7	4 MARGUERITA RD O/B	(ROOF)		INSPECTOR: <i>OW</i>
7476	AUNE	FORM BOARD	PASS	
1	1 MICHAEL RD KRAUSS + CRANE	PRE FOUR GEN. PAD (FIRST PLEASE)		INSPECTOR: <i>OW</i>
6812	MADER	STEM WALL	FAIL	
2	106 ABBE COURT DREUCKER HOMES	(2ND PLEASE)		INSPECTOR: <i>OW</i>
OTHER:				

6429

ADDITION

Call
New 341-2750 *

Permit Number: _____

Town of Sewall's Point BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: Susan K. Roberts Phone (Day) 283-0744 (Fax) 220-3186

Job Site Address: 12 N Ridgeview City: Sewall's Pt State: FL Zip: _____

Legal Description of Property: Lot 7 Block B Book 3 Page 35 Parcel Number: 01-38-41-006-002-00070-70000

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

Description of Work To Be Done: 160 S.F. addition on back of home (Den)

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

CONTRACTOR/Company: Glen Mark Homes Inc. Phone: 225-7010 Fax: 225-7010

Street: PO Box 654 City: Stuart State: FL Zip: 34985

State Registration Number: PO2000079835 State Certification Number: CBC05605 Martin County License Number: 2001-513-001

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 23,000 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: Eagle Electric State: FL License Number: EC0002750

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: Pacific Roofing State: FL License Number: CCC056793

ARCHITECT Joseph M'Carthy Phone Number: 287-6735

Street: 900 E Osceola St City: Stuart State: FL Zip: 34985

ENGINEER _____ Phone Number: _____

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 3010 Garage: 504 Covered Patios: 80 Screened Porch: 341
Carport: _____ Total Under Roof: 39.35 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)
Susan K. Roberts
State of Florida, County of: Martin
This the 3rd day of June, 2003
by Susan K. Roberts who is personally known to me or produced FL Drivers License as identification. Rosalind M. Green

My Commission Expires: _____


CONTRACTOR SIGNATURE (required)
Glen Hartline
On State of Florida, County of: Martin
This the 20th day of June, 2003
by Glen Hartline who is personally known to me or produced FL H 325-291-58-343-0 as identification. Glen Hartline

My Commission Expires: _____
 Commission # CC 038100 Public Expires Jan 28, 2005
Atlanta Bonding Co., Inc. Seal

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

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9/19/03

BUILDING PERMIT NO. 6429

Building to be erected for ROBERTS

Type of Permit DECK ADDITION

Applied for by GLEN MARK (Contractor)

Building Fee 220.80

Subdivision RIDGEVIEW Lot 7 Block B

Radon Fee _____

Address 12 N. RIDGEVIEW

Impact Fee _____

Type of structure SEK ADDITION

A/C Fee _____

PRINT QUAL. NAME: Glen Hutchins

Electrical Fee 120.00

Parcel Control Number: Lic#: CRC 05605

Plumbing Fee _____

138410060020007070000

Roofing Fee 120.00

Amount Paid _____ Check # 1731 Cash _____

Other Fees (_____) 22.00

Total Construction Cost \$ 22,000.

TOTAL Fees 482.80

Signed [Signature]
Applicant

Signed Gene Summons (AEB)
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

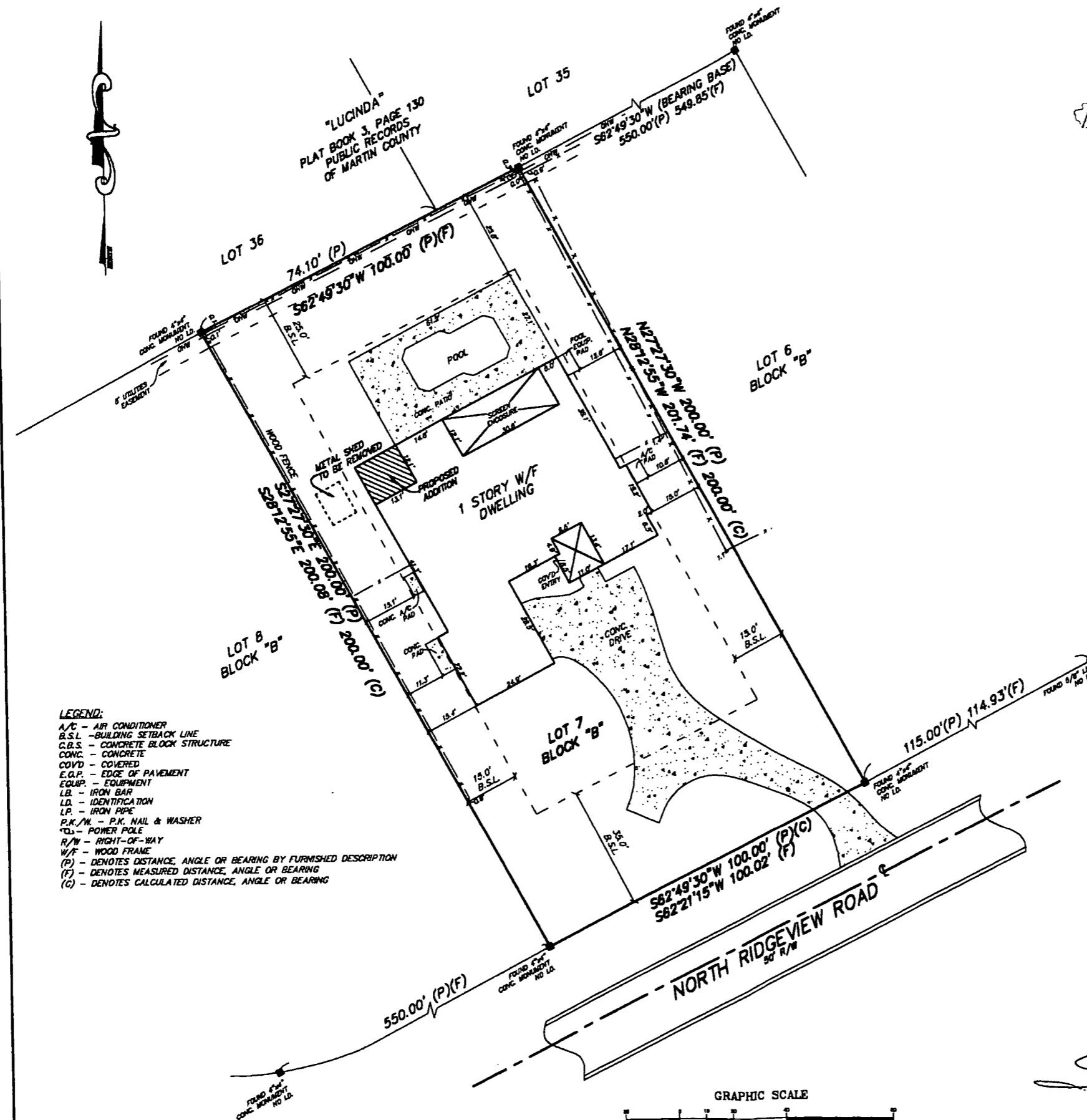
- UNDERGROUND PLUMBING _____
- UNDERGROUND MECHANICAL _____
- STEMWALL FOOTING _____
- SLAB _____
- ROOF SHEATHING _____
- TRUSS ENG/WINDOW/DOOR BUCKS _____
- ROOF TIN TAG/METAL _____
- PLUMBING ROUGH-IN _____
- MECHANICAL ROUGH-IN _____
- FRAMING _____
- FINAL PLUMBING _____
- FINAL MECHANICAL _____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

LOCATION MAP

NOT TO SCALE

REVISION	BY



LEGEND:
 A/C - AIR CONDITIONER
 B.S.L. - BUILDING SETBACK LINE
 C.B.S. - CONCRETE BLOCK STRUCTURE
 CONC. - CONCRETE
 COVD. - COVERED
 E.O.P. - EDGE OF PAVEMENT
 EQUIP. - EQUIPMENT
 I.B. - IRON BAR
 I.D. - IDENTIFICATION
 I.P. - IRON PIPE
 P.K./W. - P.K. NAIL & WASHER
 P.O. - POWER POLE
 R/W - RIGHT-OF-WAY
 W/F - WOOD FRAME
 (P) - DENOTES DISTANCE, ANGLE OR BEARING BY FURNISHED DESCRIPTION
 (F) - DENOTES MEASURED DISTANCE, ANGLE OR BEARING
 (C) - DENOTES CALCULATED DISTANCE, ANGLE OR BEARING

SURVEYOR'S NOTES:
 1. SURVEY OF DESCRIPTION AS FURNISHED BY CLIENT, UNLESS OTHERWISE NOTED.
 2. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS, BUILDING SETBACKS, AND/OR RIGHTS-OF-WAY OF RECORD BY ACCURIGHT LAND SURVEYING, INC.
 3. ELEVATIONS SHOWN HEREON ARE RELATIVE TO NATIONAL GEODETIC VERTICAL DATUM OF 1929. SEE SURVEY FOR REFERENCE BENCH MARK, UNLESS OTHERWISE NOTED.
 4. THERE ARE NO ABOVE GROUND ENCROACHMENTS, UNLESS OTHERWISE NOTED.

SITE DATA
 TOTAL LOT SIZE - 19,999.78 SQUARE FEET - 100%

IMPERVIOUS AREA BREAKDOWN
 HOUSE FOOTPRINT, ENTRY POOL PATIO, PROPOSED ADDITION - 5,484.13 SQUARE FEET ± - 27.4%
 DRIVEWAY & CONC. PADS - 2,345 SQUARE FEET ± - 11.7%
 TOTAL IMPERVIOUS AREA - 7,829.13 SQUARE FEET ± - 39.1%

PROPERTY STREET ADDRESS:
 12 NORTH RIDGEVIEW ROAD
 STUART, FLORIDA 34988

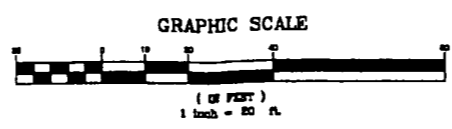
FLOOD ZONE/MAP INFORMATION:
 PROPERTY LOCATED IN FLOOD ZONE "X"
 COMMUNITY PANEL NO.: 120184-0134 F
 EFFECTIVE DATE: 10/1/2002

BOUNDARY SURVEY

CERTIFIED TO:
 1. SUSAN K. ROBERTS
 2. TOWN OF SEWELL'S POINT

LEGAL DESCRIPTION:
 LOT 7, BLOCK "B", AMENDED PLAT OF "HOMWOOD" ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 3 PAGE 33, OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

ACCURIGHT LAND SURVEYING, INC.
 LICENSED BUSINESS NO. #6607



(Signature)
 EARLE R. STARKEY - PROFESSIONAL LAND SURVEYOR
 REGISTRATION NO. 4489 - STATE OF FLORIDA

ACCURIGHT LAND SURVEYING, INC.
 1501 DECKER AVENUE UNIT 419 - STUART, FLORIDA 34994
 OFFICE PHONE NO. (888) 988-7884 - FAX NO. (888) 288-7883
 LAND SURVEYING - CONSULTANTS - LAND PLANNERS - DESIGNERS

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
01/22/2003

PRODUCER (772) 546-5600 FAX (772) 546-1008
Campbell-Wilson Ins. Agency
8882 SE Bridge Road
Hobe Sound, FL 33455

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 Glenmark Homes, Inc.

P.O. Box 654
Stuart, FL 34995 0654
CBC 056057

INSURER A: Owners Insurance Company
INSURER B:
INSURER C:
INSURER D:
INSURER E:

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	002312 20584717 03	03/02/2003	03/02/2004	EACH OCCURRENCE	\$ 500,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$ 100,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 10,000
	<input checked="" type="checkbox"/> Liability plus				PERSONAL & ADV INJURY	\$ 500,000
					GENERAL AGGREGATE	\$ 500,000
					PRODUCTS - COMP/OP AGG	\$ 500,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	
	AUTOMOBILE LIABILITY	NONE			COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY	NONE			AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$
					AUTO ONLY: AGG	\$
	EXCESS LIABILITY	NONE			EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input type="checkbox"/> RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	NONE			WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	\$
					E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
	OTHER					

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

State of Florida - Builder

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER

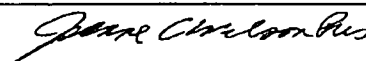
CANCELLATION

Town of Sewall's Point
1 S Sewalls Point Road
Sewalls Point, FL 34996

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

Joanne Wilson/JO



IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.



08:35:03 AM

Licensee Information

Name: **HUTCHINS, GLEN KENNETH (Primary Name)**
INDIVIDUAL (Alternate Name)

Main Address: **P O BOX 654**
STUART, Florida 34995

Lic. Location: **P O BOX 654**
STUART, FL 34995
Martin

License Information

License Type: **Certified Building Contractor**

Rank: **Cert Building**

License Number: **CBC056057**

Status: **Current, Active**

Licensure Date: **08/01/1992**

Expires: **08/31/2004**

ACGRD CERTIFICATE OF LIABILITY INSURANCE

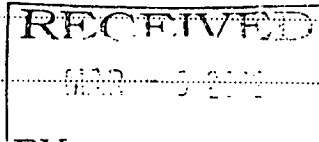
DATE (MM/DD/YY)
02/26/2002

PRODUCER (561) 546-5600 FAX (561) 546-1008
Campbell-Wilson Ins. Agency
8882 SE Bridge Road
Hobe Sound, FL 33455

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 Owners Insurance Company
COMPANY B
COMPANY C
COMPANY D



Attn: Ext:
INSURED
Glen Kenneth Hutchins
Glenmark Homes
P.O. Box 654
Stuart, FL 34995
CBC 056057

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT <input checked="" type="checkbox"/> Liability plus	002312 20584717 02	03/02/2002	03/02/2003	GENERAL AGGREGATE \$ 500,000 PRODUCTS - COMP/OP AGG \$ 500,000 PERSONAL & ADV INJURY \$ 500,000 EACH OCCURRENCE \$ 500,000 FIRE DAMAGE (Any one fire) \$ 100,000 MED EXP (Any one person) \$ 10,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	NONE			COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO	NONE			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	NONE			EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL	NONE			WC STATUTORY LIMITS \$ OTHER \$ EL EACH ACCIDENT \$ EL DISEASE - POLICY LIMIT \$ EL DISEASE - EA EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
State of Florida - Builder

CERTIFICATE HOLDER

CANCELLATION

Town of Sewall's Point
Fax (561) 220 4765 Ed Arnold
1 S Sewalls Point Road
Sewalls Point, FL 34996

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

Joanne Wilson/J0

Joanne Wilson

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

CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION
FROM FLORIDA WORKERS' COMPENSATION LAW

MARCH 25, 1996

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

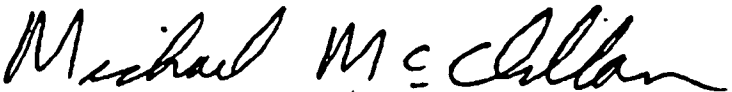
EFFECTIVE DATE OF EXEMPTION 08/31/95

EXEMPTED INDIVIDUAL NAME HUTCHINS GLEN KENNETH S.S. 575-15-3849

BUSINESS NAME GLENMARK HOMES FEIN 575153849

BUSINESS ADDRESS 1298 N W FED HWY
STUART, FL 34994

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



AUTHORIZED SIGNATURE

MASTER PERMIT NO. 6429

TOWN OF SEWALL'S POINT

Date 9-19-03

BUILDING PERMIT NO. 6430

Building to be erected for ROBERTS Type of Permit DEN ADDITION

Applied for by GLENMARK / EAGLE ELEC (Contractor) Building Fee /

Subdivision RIDGEVIEW Lot 7 Block B Radon Fee /

Address 12 N. RIDGEVIEW Impact Fee /

Type of structure SFR ADDITION A/C Fee 895

PRINT QUAL. NAME: Joseph A Commorato Electrical Fee PN6429

Parcel Control Number: 138410060020007070000 Plumbing Fee /

Amount Paid X Check # X Cash / Other Fees (/) Roofing Fee /

Total Construction Cost \$ / TOTAL Fees /

Signed Joseph A. Commorato
Applicant

Signed Gene Simmons (895)
Town Building Official

PERMIT

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

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
05/07/2003

PRODUCER:
WORKERS' COMPENSATION GROUP, INC.
PO BOX 410
BOCA RATON FL 33429-0410
561-392-3300

INSURED: MATTHEW BROWN & ASSOCIATES
dba/ ADVANTAGE HR
P O BOX 1097
PALM CITY, FL 34991

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

INSURER A: ASSOCIATED INDUSTRIES INS. CO.
INSURER B:
INSURER C:
INSURER D:
INSURER E:

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
a	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	2003323724	05-01-03	05-01-04	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$100,000 E.L. DISEASE - POLICY LIMIT \$500,000
	OTHER				

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

COVERING: EAGLE ELECTRIC, INC.
325 SW GRIMALDO TERRACE
PORT ST LUCIE FL 34984

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

TOWNSHIP OF SEWALL'S POINT
1 SOUTH SEWALL'S 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 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE



11:04:17 AM

Licensee Information

Name: **COMMORATO, JOSEPH ANTHONY (Primary I
EAGLE ELECTRIC INC (Alternate Name)
EAGLE ELECTRIC INC (Alternate Name)**

Main Address: **11750 APPALOSSA COURT
PORT ST LUCIE, Florida 34987**

Lic. Location: **325 SW GRIMALDO DR
PORT ST. LUCIE, FL 34984
St. Lucie**

License Information

License Type: **Cert. Electrical Contractors (EC)**

Rank: **Cert Electrical**

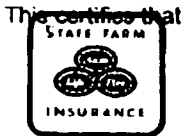
License Number: **EC0002750**

Status: **Current, Active**

Licensure Date: **02/20/2001**

Expires: **08/31/2004**

CERTIFICATE OF INSURANCE



- STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
- STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois
- STATE FARM FIRE AND CASUALTY COMPANY, Scarborough, Ontario
- STATE FARM FLORIDA INSURANCE COMPANY, Winter Haven, Florida
- STATE FARM LLOYDS, Dallas, Texas

insures the following policyholder for the coverages indicated below:

Name of policyholder EAGLE ELECTRIC INC.
 Address of policyholder 11750 APPALOOSA CT., PORT ST LUCIE, FLA. 34987
 Location of operations SAME
 Description of operations ELECTRICAL

The policies listed below have been issued to the policyholder for the policy periods shown. The insurance described in these policies is subject to all the terms exclusions, and conditions of those policies. The limits of liability shown may have been reduced by any paid claims.

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY (at beginning of policy period)
		Effective Date	Expiration Date	
98PG0189-1 This insurance includes:	Comprehensive Business Liability <input checked="" type="checkbox"/> Products - Completed Operations <input checked="" type="checkbox"/> Contractual Liability <input checked="" type="checkbox"/> Underground Hazard Coverage <input checked="" type="checkbox"/> Personal Injury <input checked="" type="checkbox"/> Advertising Injury <input checked="" type="checkbox"/> Explosion Hazard Coverage <input checked="" type="checkbox"/> Collapse Hazard Coverage <input type="checkbox"/> <input type="checkbox"/>	03/03/03	03/03/04	BODILY INJURY AND PROPERTY DAMAGE Each Occurrence \$ 500,000. General Aggregate \$ 1,000,000. Products - Completed Operations Aggregate \$ 1,000,000.
	EXCESS LIABILITY <input type="checkbox"/> Umbrella <input type="checkbox"/> Other			BODILY INJURY AND PROPERTY DAMAGE (Combined Single Limit) Each Occurrence \$ Aggregate \$
	Workers' Compensation and Employers Liability			Part 1 STATUTORY Part 2 BODILY INJURY Each Accident \$ Disease Each Employee \$ Disease - Policy Limit \$
POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY
		Effective Date	Expiration Date	(at beginning of policy period)

THE CERTIFICATE OF INSURANCE IS NOT A CONTRACT OF INSURANCE AND NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR ALTERS THE COVERAGE APPROVED BY ANY POLICY DESCRIBED HEREIN.

Name and Address of Certificate Holder

TOWN OF SEWALLS POINT
 1 S. SEWALLS POINT RD
 SEWALLS POINT, FL. 34998

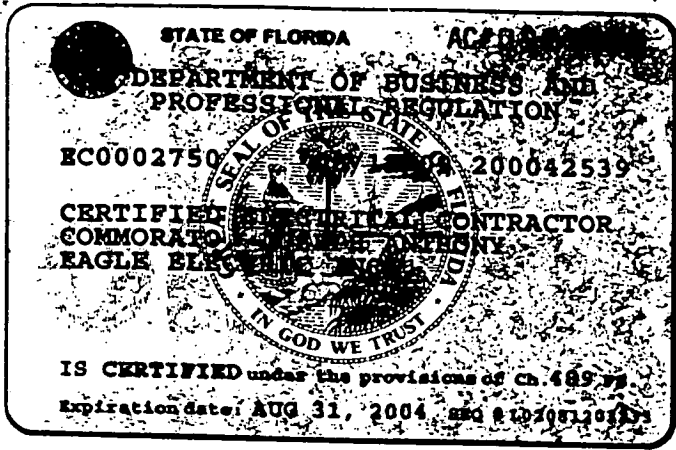
If any of the described policies are canceled before its expiration date, State Farm will try to mail a written notice to the certificate holder 30 days before cancellation. If however, we fail to mail such notice, no obligation or liability will be imposed on State Farm or its agents or representatives.

Keith R Mayfield
 Signature of Authorized Representative
 AGENT
 Title
 Date 02/27/03

Agent's Code Stamp

AFO Code 591

KEITH R MAYFIELD
 STATE FARM INSURANCE
 10610 SOUTH US HWY #1
 PORT ST LUCIE FL 34952
 772 335-4014



CITY OF PORT ST LUCIE
BUILDING DEPARTMENT
 COMPUTER SERVICE MEMBER
 EXPIRES SEPTEMBER 30, 2003

COMMORATO, JOSEPH A
 EAGLE ELECTRIC INC
 11750 APPALOOSA COURT
 PORT ST LUCIE, FL 34987
 Signature: *Joseph A. Commorato*
 ELECTRICAL CONTRACTOR
 FEE \$25.00 PSL03 *4492



**City of Stuart
 Contractor Licensing**

Expires: September 30, 2003

AP 01080228 TYPE: EC

Contractor: Eagle Electric
 Qualifier: 11750 Appaloosa Ct
 Address: Port St Lucie, FL 34987



City of Fort Pierce, Florida
 Building and Community Response
 P. O. Box 1480
 Fort Pierce, Florida 34954
 Local License: CONT03-578
 Expiration: 9/30/2003
 Type: ELECTRICAL CONTR (CERTIFIED)
 EAGLE ELECTRIC
 Qualifier JOSEPH A COMMORATO

2002-2003

ST. LUCIE COUNTY OCCUPATIONAL LICENSE
 STATE OF FLORIDA

ACCOUNT 1731-00950002

EXPIRES SEP 30, 2003

FACILITIES OR MACHINES
 TYPE OF BUSINESS
 BUSINESS LOCATION
 NAME MAILING ADDRESS

ROOMS SEATS EMPLOYEES

1731 ELECTRICAL CONTRACTOR

11750 APPALOOSA COURT
 C - ST LUCIE COUNTY

JOSEPH A COMMORATO IBA CTY 04963
 EAGLE ELECTRIC INC
 COMMORATO, JOSEPH
 11750 APPALOOSA COURT
 PORT ST LUCIE, FLORIDA 34987

X RENEWAL
 NEW LICENSE
 TRANSFER-
 ORIGINAL TAX 11.25

AMOUNT PENALTY COLLECTION COST TOTAL 11.25

THIS LICENSE BECOMES NULL AND VOID IF BUSINESS NAME, CLASSIFICATION, OWNERSHIP OR ADDRESS IS CHANGED, UNLESS LICENSEE APPLIES TO TAX COLLECTOR FOR CORRECTION.

SUBJECT TO SUSPENSION OR REVOCATION IN ACCORDANCE WITH ORDINANCES OF ST. LUCIE COUNTY
 BOB DAVIS, CPA, CGFO, CFC, ST. LUCIE COUNTY TAX COLLECTOR
 P.O. BOX 308 FORT PIERCE, FL 34954-0308

PAID BOB DAVIS, TAX COLLECTOR
 MACH:005 8/22/02 10:11AM 00002076
 0600 \$11.25
 CK \$11.25
 CHANGE \$0.00

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9/19/03

BUILDING PERMIT NO. 6431

Building to be erected for ROBERTS Type of Permit DEW ADDITION

Applied for by GLEN MARK/PACIFIC REG (Contractor) Building Fee _____

Subdivision RIDGEVIEW Lot 7 Block B Radon Fee _____

Address 12 N. RIDGEVIEW Impact Fee _____

Type of structure SFR ADDITION A/C Fee SEE

PRINT QUAL NAME: RICHARD GOMES Electrical Fee PN 6429

Parcel Control Number: Lic #: CC056793 Plumbing Fee _____

138410060020007070000 Roofing Fee _____

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

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

Signed _____ Signed Glen Summons (AS)

Applicant

Town Building Official

PERMIT

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

INSPECTIONS

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

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
11/01/2002

PRODUCER: (561) 746-4346 FAX (561) 746-9599
Tequesta Agency, Inc.
 218 S. US Highway One, Ste 300
 Tequesta, FL 33469
 Debra Hicks

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 **Pacific Roofing Corp., Inc.**
 PO Box 2697
 Stuart, FL 34994

INSURER A: **American Casualty Company**
 INSURER B: **Transportation Insurance**
 INSURER C:
 INSURER D: **NOV 05 2002**
 INSURER E:
 BY: _____

RECEIVED
 NOV 05 2002

COVERAGES

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

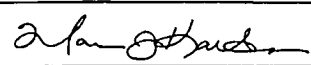
INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	C2020206931	10/28/2002	10/28/2003	EACH OCCURRENCE \$ 1,000,000
	FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000				
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	C2020206945	10/28/2002	10/28/2003	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	BODILY INJURY (Per person) \$ _____ BODILY INJURY (Per accident) \$ _____ PROPERTY DAMAGE (Per accident) \$ _____				
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ _____ OTHER THAN EA ACC \$ _____ AUTO ONLY: AGG \$ _____
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$ _____				EACH OCCURRENCE \$ _____ AGGREGATE \$ _____ \$ _____ \$ _____
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS _____ OTH-ER _____ E.L. EACH ACCIDENT \$ _____ E.L. DISEASE - EA EMPLOYEE \$ _____ E.L. DISEASE - POLICY LIMIT \$ _____
	OTHER				

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

CERTIFICATE HOLDER: _____ ADDITIONAL INSURED; INSURER LETTER: _____ CANCELLATION

TOWN OF SEWALLS POINT
ATTN: ED ARNOLD
1 SOUTH SEWALLS POINT ROAD
STUART, FL 34996

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
Mark Kasten/DEBBIE 

ACORD CERTIFICATE OF LIABILITY INSURANCE

ACORD FORM 1010 (REV. 11/97)
4/24/2003 2:02:10 PM

PRODUCER
Monument Agency
1310 Utica Street
Oriskany, NY 13424
Fax:

INSURED
PACIFIC ROOFING CORPORATION
808 SE DIXIE HWY
STUART, FL 34994
(772) 283-7663 Fax: (772) 283-9505

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

INSURER A: Insurance Company of the Americas
INSURER B:
INSURER C:
INSURER D:
INSURER E:

COVERAGES

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

TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ FIRE DAMAGE (Any One Fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC: \$ AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	WC021201C3	4/1/2003	12/1/2003	X FOR LIMITS EA E.L. EACH ACCIDENT \$ 1000000 E.L. DISEASE - EA EMPLOYEE \$ 1000000 E.L. DISEASE - POLICY LIMIT \$ 1000000
	OTHER				LIMITS \$ LIMITS \$

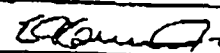
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENTS/SPECIAL PROVISIONS
1. Insured is afforded Workers Compensation & Employers Liability as a co-employer under the policy for employees leased from AMS Staff Leasing, Inc.

CERTIFICATE HOLDER

ADDITIONAL INSURED: INSURER LETTER

CANCELLATION

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

AUTHORIZED REPRESENTATIVE 

ACORD 25-5 (7/97)

© ACORD CORPORATION 1998

2002-2003 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 8013, Stuart, FL 34985
(888) 200-5804

LICENSE # 1993-520-076 CERT _____
PHONE # (561) 283-7663 DOC NO 001761

LOCATION:
808 DIXIE HWY CTY

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 **ROOFING CONTRACTOR**

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

16 DAY OF SEPTEMBER 20 02
AND ENDING SEPTEMBER 30, 2003

GOMES, RICHARD J
PACIFIC ROOFING CORP
RICHARD J GOMES
808 SE DIXIE HWY
STUART FL 34994

RECEIPT of PAYMENT
LARRY C. O'STEEN 6918
99 09/16/2002 OCT1 NORMAL
199352830076609
8228291600721TX 125.00

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L0206100081

DATE	BATCH/ISSUES	LICENSE NBR
06/10/2002	011129085	CCC056793

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

RECEIVED
 NOV 05 2002
 BY:

GOMES, RICHARD JOHN
 PACIFIC ROOFING CORP
 PO BOX 2697
 STUART FL 34995

JEB BUSH
 GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SHYER
 SECRETARY



STATE OF FLORIDA
DEPARTMENT OF HEALTH
MARTIN COUNTY HEALTH DEPARTMENT
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION PERMIT

CENTRAX #: 43-SS-05676
OSTDSNBR: 03-0674-E

OWNER'S COPY

CONSTRUCTION PERMIT FOR:

[] New System [X] Existing System [] Holding Tank [] Innovative Other
[] Repair [] Abandonment [] Temporary [] _____

APPLICANT: ROBERTS, SUSAN AGENT: N/A, N/A

PROPERTY STREET ADDRESS: 12 N RIDGEVIEW STUART FL 34996

LOT: 7 BLOCK: B SUBDIVISION: HOMEWOOD

[Section/Township/Range/Parcel No.]

PROPERTY ID #: 01-38-41-006-0070-70

[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF CHAPTER 64E-6, FAC DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC TIME PERIOD. ANY CHANGE IN MATERIAL FACTS WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE OR LOCAL PERMITTING REQUIRED FOR PROPERTY DEVELOPMENT.

SYSTEM DESIGN AND SPECIFICATIONS

(EXISTING TANK) * *Existing 900 gallon tank may be used if structurally sound and meets requirements.*
T [1050] Gallons SEPTIC TANK MULTI-CHAMBERED/IN SERIES: [Y]
A [0] Gallons MULTI-CHAMBERED/IN SERIES: []
N [0] GALLONS GREASE INTERCEPTOR CAPACITY
K [0] GALLONS DOSING TANK CAPACITY [0] GALLONS @ [0] DOSES PER 24 HRS # PUMPS [0]

D [500] SQUARE FEET PRIMARY DRAINFIELD SYSTEM ~~at Bed~~
R [0] SQUARE FEET SYSTEM
A TYPE SYSTEM: [Y] STANDARD [N] FILLED [N] MOUND [N] _____
I CONFIGURATION: [N] TRENCH [Y] BED [N] _____

F LOCATION TO BENCHMARK: Top of Existing Tank
I ELEVATION OF PROPOSED SYSTEM SITE [14.0] [INCHES] [ABOVE] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [22.0] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [0.0] INCHES NATURAL/ EXISTING SOIL EXCAVATION REQUIRED: [0.0] INCHES
OTHER REMARKS:

* The licensed contractor installing the system is responsible for installing the minimum category of tank in accordance with s. 64E-6.013(3)(f), F.A.C. System installation must meet all requirements of Chapter 64E-6, F.A.C. The drainfield must be at least 5 feet from the property line(s). Install an approved outlet filter device in the septic tank. Septic tank must be pumped prior to installation of the drainfield. Potable water lines within 10' of system must be sleeved and sealed and cannot be within 2'. All attached conditions and items above must be completed prior to Final Inspection and Approval.

* *Existing 900 gallon tank may be used if structurally sound (w/in one tank size is a*

MJ 01-0793

SPECIFICATIONS BY: Fredette, Michelle TITLE: EH Specialist II

APPROVED BY: Fredette, Michelle TITLE: EH Specialist II Martin CHI

DATE ISSUED: 7/11/2003 EXPIRATION DATE: _____

DH 4016, 03/97 (Obsoletes previous editions which may not be used)
(Stock Number: 5744-001-4016-0) [ostds_cons_4016-1]

** NOTE: See attached Applicant's notice of permitting rights. **

NOTICE OF RIGHTS

A party whose substantial interest is affected by this order may petition for an administrative hearing pursuant to sections 120.569 and 120.57, Florida Statutes. Such proceedings are governed by Rule 28-106, Florida Administrative Code. A petition for administrative hearing must be in writing and must be received by the Agency Clerk for the Department, within twenty-one (21) days from the receipt of this order. The address of the Agency Clerk is 4052 Bald Cypress Way, BIN # A02, Tallahassee, Florida 32399-1703. The Agency Clerk's facsimile number is 850-410-1448.

Mediation is not available as an alternative remedy.

Your failure to submit a petition for hearing within 21 days from receipt of this order will constitute a waiver of your right to an administrative hearing, and this order shall become a 'final order'.

Should this order become a final order, a party who is adversely affected by it is entitled to judicial review pursuant to Section 120.68, Florida Statutes. Review proceedings are governed by the Florida Rules of Appellate Procedure. Such proceedings may be commenced by filing one copy of a Notice of Appeal with the Agency Clerk of the Department of Health and a second copy, accompanied by the filing fees required by law, with the Court of Appeal in the appropriate District Court. The notice must be filed within 30 days of rendition of the final order.

RECEIVED

JUL 01 2003



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 13-SS-5676 DATE PAID: 7/1/03 FEE PAID: 25 RECEIPT #: 02691

03-0674-E

APPLICATION FOR:

- [] New System [X] Existing System [] Holding Tank [] Innovative [X] Repair [] Abandonment [] Temporary []

APPLICANT: Susan Roberts Cell-311-2650

AGENT: Glen Mark Homes TELEPHONE: 225-7010

MAILING ADDRESS: PO Box 654 Stuart FL 34985

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 7 BLOCK: B SUBDIVISION: Homewood PLATTED: Book 3 page 3

PROPERTY ID #: 01-38-41-006-0070-7000C ZONING: Residential I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 20,000 SF = 0.4 ACRES WATER SUPPLY: PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: 64 FT

PROPERTY ADDRESS: 12 W Ridgeview Rd, Stuart FL 34985

DIRECTIONS TO PROPERTY: E. Ocean Blvd, go east to Sewalls PT Rd turn right go to N Ridgeview turn right

BUILDING INFORMATION

[X] RESIDENTIAL [] COMMERCIAL

Table with 5 columns: Unit No, Type of Establishment, No. of Bedrooms, Building Area Sqft, Commercial/Institutional System Design. Row 1: 1, Single Family Home, 3, 2850, Addition to be 160 SF T-301.

[] Floor/Equipment Drains [] Other (Specify)

SIGNATURE: [Signature] DATE: 6/24/03

RECEIVED

JUL 01 2003



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
SITE EVALUATION AND SYSTEM SPECIFICATIONS

MARTIN COUNTY
HEALTH DEPARTMENT

PERMIT #.

APPLICANT: Susan Roberts c/o Glenn Hutchins AGENT: COOKES SEPTIC SERVICES

LOT: 7 BLOCK: B SUBDIVISION: Homewood

PROPERTY ID #: _____ (Section/Township/Parcel No. or Tax ID Number)

TO BE COMPLETED BY ENGINEER, HEALTH DEPARTMENT EMPLOYEE, OR OTHER QUALIFIED PERSON. ENGINEERS MUST PROVIDE REGISTRATION NUMBER AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

PROPERTY SIZE CONFORMS TO SITE PLAN: YES NO NET USABLE AREA AVAILABLE: 4 (MP) ACRES
TOTAL ESTIMATED SEWAGE FLOW: 400 GALLONS PER DAY (RESIDENCES-TABLE 1/OTHER-TABLE 2)
AUTHORIZED SEWAGE FLOW: 1000 (MP) GALLONS PER DAY (1500 GPD/ACRE OR 2500 GPD/ACRE)
UNOBSTRUCTED AREA AVAILABLE: 400 SQFT UNOBSTRUCTED AREA REQUIRED: 400 SQFT

BENCHMARK/REFERENCE POINT LOCATION: top of tank
ELEVATION OF PROPOSED SYSTEM SITE IS 14 (INCHES/FT) (ABOVE/BELOW) BENCHMARK/REFERENCE POINT

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES:
SURFACE WATER: N/A FT DITCHES/SWALES: N/A FT NORMALLY WET: YES NO
WELLS: PUBLIC: N/A FT LIMITED USE: N/A FT PRIVATE: N/A FT NON-POTABLE: N/A FT
BUILDING FOUNDATIONS: 10 FT PROPERTY LINES: 5 FT POTABLE WATER LINES: 10 FT

SITE SUBJECT TO FREQUENT FLOODING: YES NO 10 YEAR FLOODING? YES NO
10 YEAR FLOOD ELEVATION FOR SITE: _____ FT MSL/NGVD SITE ELEVATION: _____ FT MSL/NGVD

SOIL PROFILE INFORMATION SITE 1

MUNSELL #/COLOR	TEXTURE	DEPTH
10YR 5/1 GRAY	SAND	0 TO 10"
7/1 white	"	10 TO 60"
4/2 Light Brown	"	60 TO 72"
		TO
		TO
		TO
		TO
		TO
		TO

USDA SOIL SERIES: #6 PADIA sand

SOIL PROFILE INFORMATION SITE 2

MUNSELL #/COLOR	TEXTURE	DEPTH
10YR 5-1 Gray	Sand	0 TO 10"
7-1 white	"	10" TO 60"
4-2 Light Brown	"	60" TO 72"
		TO
		TO
		TO
		TO
		TO
		TO

USDA SOIL SERIES: _____

OBSERVED WATER TABLE: N/A INCHES (ABOVE / BELOW) EXISTING GRADE. TYPE: (PERMANENT / APPARENT)
ESTIMATED WET SEASON WATER TABLE ELEVATION: 60 INCHES (ABOVE / BELOW) EXISTING GRADE
HIGH WATER TABLE VEGETATION: YES NO MOTTILING: YES NO DEPTH: _____ INCHES

SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: 0.8 (MP)
DRAINFIELD CONFIGURATION: TRENCH BED () OTHER (SPECIFY) _____
REMARKS/ADDITIONAL CRITERIA: _____

SITE EVALUATED BY: [Signature]

DATE: 6/16/03

RECEIVED

JUL 01 2003



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
EXISTING SYSTEM AND SYSTEM REPAIR EVALUATION

MARTIN COUNTY
HEALTH DEPARTMENT

PERMIT # _____

APPLICANT: Roberts Susan 12 N Ridgeview Rd. Stuart
CONTRACTOR / AGENT: COOKE'S SEPTIC SERVICES
LOT: 7 BLOCK: B SUBDIV: Honewood ID#: _____

TO BE COMPLETED BY FLORIDA REGISTERED ENGINEER, DEPARTMENT EMPLOYEE, SEPTIC TANK CONTRACTOR OR OTHER CERTIFIED PERSON. SIGN AND SEAL ALL SUBMITTED DOCUMENTS. COMPLETE ALL APPLICABLE ITEMS. COMPLETE TANK CERTIFICATION BELOW OR ATTACH LETTER FROM A PERMITTED SEPTAGE DISPOSAL SERVICE.

EXISTING TANK INFORMATION

900) GALLONS SEPTIC TANK/GPD ATU LEGEND: N/A MATERIAL: CON BAFFLED: (Y / N)
) GALLONS SEPTIC TANK/GPD ATU LEGEND: _____ MATERIAL: _____ BAFFLED: (Y / N)
) GALLONS GREASE INTERCEPTOR LEGEND: _____ MATERIAL: _____
) GALLONS DOSING TANK LEGEND: _____ MATERIAL: _____ # PUMPS: ()

CERTIFY THAT THE ABOVE NOTED TANKS WERE PUMPED ON 6/11/03 HAVE THE VOLUMES SPECIFIED, ARE STRUCTURALLY SOUND, AND HAVE A (SOLIDS DEFLECTION DEVICE / OUTLET FILTER DEVICE) INSTALLED.
Signature of Licensed Contractor: [Signature] Business Name: Cookes Septic Services Date: 6-11-03

EXISTING DRAINFIELD INFORMATION

320) SQUARE FEET PRIMARY DRAINFIELD SYSTEM NO. OF TRENCHES () DIMENSIONS: 12 X 24
) SQUARE FEET _____ SYSTEM NO. OF TRENCHES () DIMENSIONS: _____
TYPE OF SYSTEM: () STANDARD () FILLED () MOUND ()
CONFIGURATION: () TRENCH () BED ()
DESIGN: () HEADER () D-BOX () GRAVITY SYSTEM () DOSED SYSTEM
ELEVATION OF BOTTOM OF DRAINFIELD IN RELATION TO EXISTING GRADE 36 (INCHES) (ABOVE / BELOW)

SYSTEM FAILURE AND REPAIR INFORMATION

1989) SYSTEM INSTALLATION DATE
400) GPD ESTIMATED SEWAGE FLOW BASED ON () DOMESTIC () COMMERCIAL
() METERED WATER () TABLE 1, 64E-6, FAC
SITE () DRAINAGE STRUCTURES () POOL () PATIO / DECK () PARKING
CONDITIONS: () SLOPING PROPERTY ()
NATURE OF () HYDRAULIC OVERLOAD () SOILS () MAINTENANCE () SYSTEM DAMAGE
FAILURE: () DRAINAGE / RUN OFF () ROOTS () WATER TABLE ()
FAILURE () SEWAGE ON GROUND () TANK () D BOX/HEADER () DRAINFIELD
SYMPTOM: () PLUMBING BACKUP ()

REMARKS/ADDITIONAL CRITERIA inspection shows there are roots in the tank and drain system is not working at this time

SUBMITTED BY: [Signature] TITLE/LICENSE SR0031436 DATE: 6/16/03



COOKES

SEPTIC SERVICES

Florida License # SA0890201

Stuart: 561-287-0651

Ft. Pierce: 561-878-7444

Fax: 561-287-1370

Mail: PO Box 64 • Stuart, FL 34995

Plant: 3100 Waaler St. • Stuart, FL 34997

ON-SITE SEWAGE TREATMENT SYSTEM INSPECTION REPORT

Date ordered: 6-6-03

Date/time of inspection: _____

Send copy to: _____

Requested by: Glenn Hutchins

Phone No. 341-2650

Fax No. 286-7010

SITE ADDRESS:

12 N. Ridgeview Rd.

Sewalls Point

BILLING ADDRESS:

Glenmark Homes

P.O. Box 654

Stuart, FL 34995

A. GENERAL INFORMATION

1. Age of dwelling: _____ years (estimate)
2. Number of bedrooms: _____
3. Is there a garbage disposal: yes _____ no _____ unknown _____
4. If dwelling is unoccupied, how long has it been vacant: _____ months

B. SYSTEM TYPE

1. Components of on-site treatment system
 - septic tank size: 900 concrete block _____ fiberglass _____
 - date of last septic tank pumpout: 6-11-03 unknown _____
2. Absorption area
 - drainfield size: 350 sq. ft. _____ trenches _____ bed
 - drainfield type: rock _____ infiltrator _____ waffle _____ EEEZZZLAY
3. Lift station size: _____
 - concrete _____ fiberglass insert _____ fiberglass _____
 - number of sump pumps _____ warning device: yes _____ no _____
 - warning device: visual _____ audio/visual _____
 - sump pump elevated off bottom of lift station? yes _____ no _____
 - check valve: yes _____ no _____
 - purge hole present: yes _____ no _____
 - do electrical connections appear satisfactory? yes _____ no _____
 - was lift station pumped? yes _____ no _____
 - can the surface water infiltrate into the tank? yes _____ no _____
4. Is any part of the system located below a deck, sidewalk, driveway or portion of the building? yes _____ no
5. Comments _____

OPERATION TEST: LOCATE TANK AND OPEN COVER

Approximate depth of tank top 13 inches.
 Approximate depth of top of drainfield 18 inches

- | | | |
|--------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="radio"/> YES | <input type="radio"/> NO | If possible, flush all toilets and run fixtures to determine if they flow into the septic system. Introduce water into the septic system at the rate of 3-5 gpm. for 20-30 minutes (this is the flow of a garden hose fully opened). Observe the level of liquid in tank—did level rise in tank?
Is there any evidence of liquid level line fluctuation?
Is there any evidence of leaking water appliances?
Does the septic tank need pumping due to solid and sludge levels?
Is there root intrusion into the septic tank?
Is the septic tank lid sealed properly?
Does the septic tank have an outlet filter?
Is the septic tank multi-chambered?
When probing the drainfield to determine its location, was there excessive moisture, odor, or effluent on the ground?
When probing the drainfield to determine its location, were roots present?
Is there lush vegetation present?
Do any drainfield lines appear to be dry?
Is there any indication that the drainfield has previously failed?
Do the roof or rain gutters empty onto the drainfield area? |
| <input checked="" type="radio"/> YES | <input type="radio"/> NO | |
| <input type="radio"/> YES | <input checked="" type="radio"/> NO | |
| <input type="radio"/> YES | <input checked="" type="radio"/> NO | |
| <input checked="" type="radio"/> YES | <input type="radio"/> NO | |
| <input checked="" type="radio"/> YES | <input type="radio"/> NO | |
| <input type="radio"/> YES | <input checked="" type="radio"/> NO | |
| <input type="radio"/> YES | <input checked="" type="radio"/> NO | |
| <input type="radio"/> YES | <input checked="" type="radio"/> NO | |
| <input checked="" type="radio"/> YES | <input type="radio"/> NO | |
| <input checked="" type="radio"/> YES | <input type="radio"/> NO | |
| <input checked="" type="radio"/> YES | <input type="radio"/> NO | |
| <input type="radio"/> YES | <input checked="" type="radio"/> NO | |
| <input type="radio"/> YES | <input checked="" type="radio"/> NO | |

Comments:

Upon inspection it was indicated that there were roots in the tank and drainfield. The drainfield is not working at this time.

D. CHECKLIST SUMMARY

- | | | |
|----------------------------------------------|------------------------------------------------|--------------------------------------------------|
| 1. The condition of the septic tank is | <input type="checkbox"/> acceptable | <input checked="" type="checkbox"/> unacceptable |
| 2. The condition of the absorption is | <input type="checkbox"/> acceptable | <input checked="" type="checkbox"/> unacceptable |
| 3. The condition of the sump pump if used is | <input checked="" type="checkbox"/> acceptable | <input type="checkbox"/> unacceptable |

E. COMPANY DISCLAIMER

As a result of our observations and our experience with on-site waste-water technology, this report is submitted based on the present condition of the on-site sewage treatment system. Cookes Septic Service has not been retained to warrant, guarantee, or certify the proper functioning of the system for any period of time in the future. Because of numerous factors (usage, soil characteristics, previous failures, etc.) that may effect the proper operation of a septic system, as well as the inability of Cookes to supervise or monitor the use and maintenance of the system, this report shall not be construed as a warranty by Cookes that the system will function properly.

Cookes Septic Service DISCLAIMS ANY WARRANTY, either expressed or implied, arising from the inspection of the septic system or this report. This report does not address the impact the system may have on ground water.

INSPECTING COMPANY:

Cookes Septic Services
 3100 SE Waaler Street
 PO Box 64
 Stuart, Florida 34905

Stuart: (561) 287-0651
 Ft. Pierce (561) 878-7444
 Fax: (561) 287-1570
 Florida License No: SA 0890201

I have studied the information contained herein and certify that my assessment is honest, thorough, and correct, to the best of my ability.

Name: John Flores Signature: John Flores Name: John Flores Title: Septic Inspector
 Print

James G. [Signature]
 Contractor

SR-000 1349
 License #

6-11-03
 Date

YES

NO

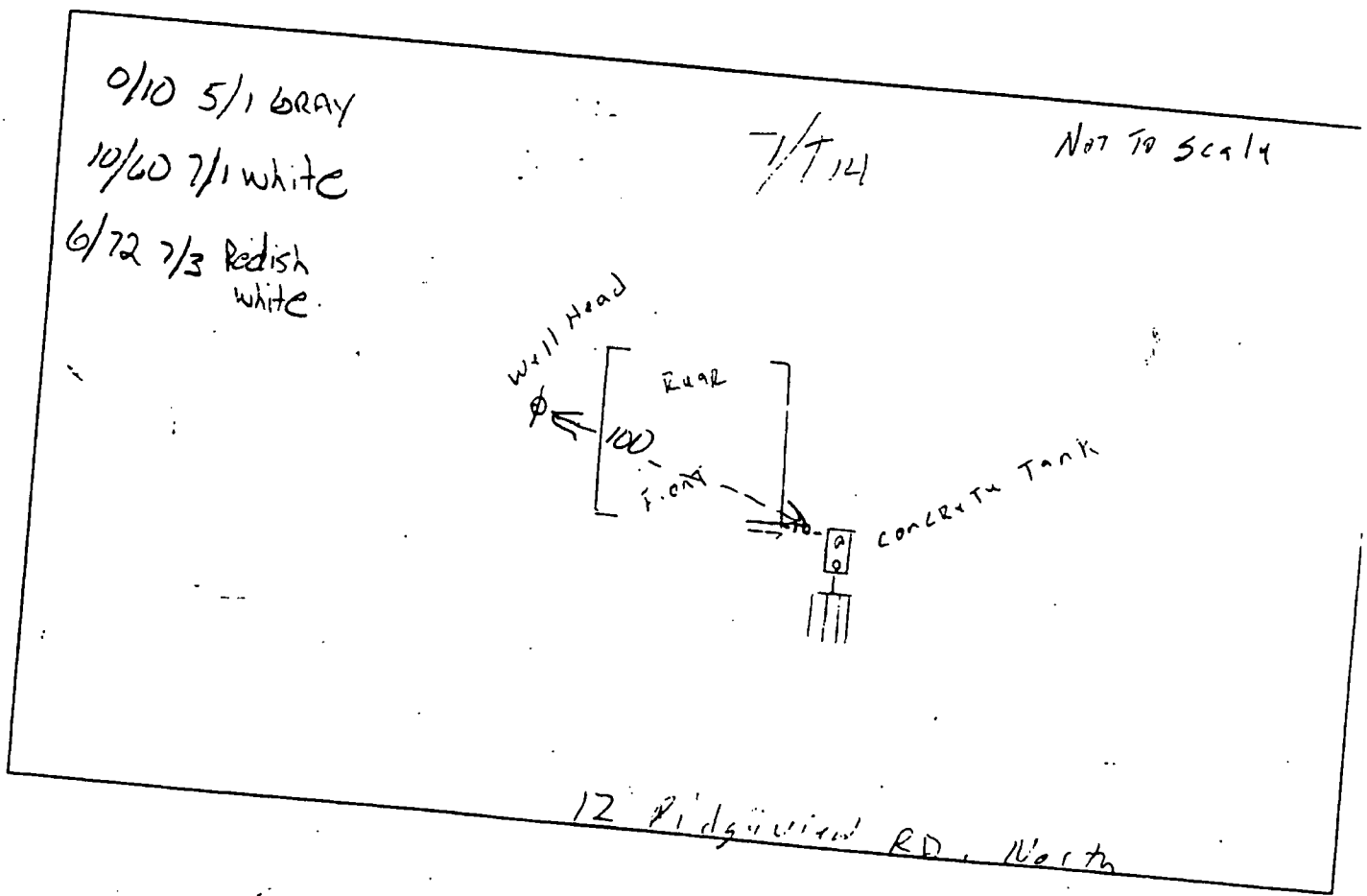
Probe the drainage area to determine its location and to check for excessive moisture, odor, and/or effluent. *None*
Is There:

- Any indication of a previous failure? Yes No
- Seepage visible on the lawn? Yes No
- Lush vegetation present? Yes No
- Ponding water in the aggregate? Yes No
- Even distribution of effluent in the field? Yes No Not de

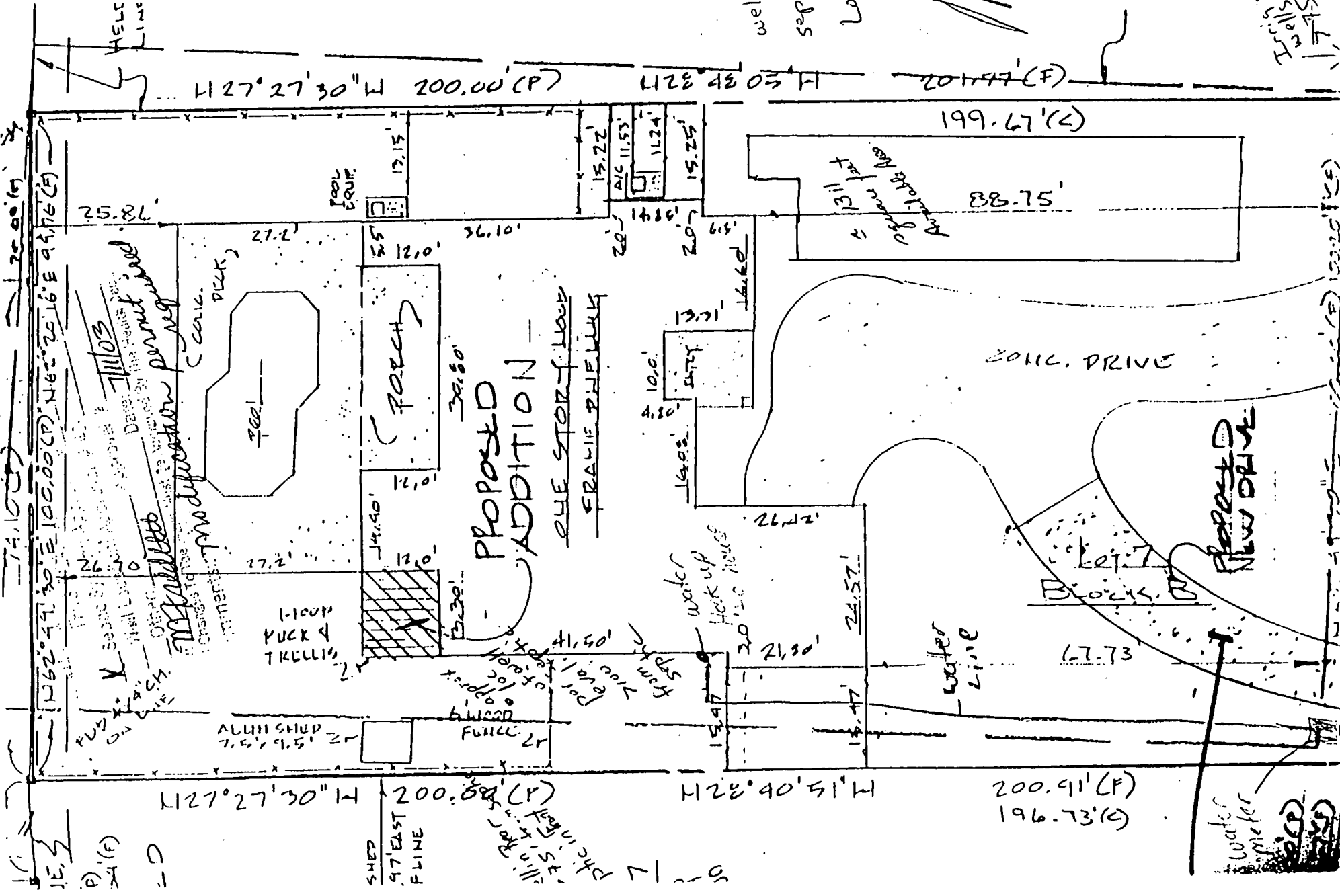
Determine approximate distance between water well and soil absorption sy:
Approximate distance is 100 feet.

Explain answers as necessary:

D. Sketch of system



1. PROVIDE 0' UNREINFORCED EDGE WITH (1) #3 BAR AGAINST EXISTING FOOTING WITH 10" #4 BARS DRILLED AND GROUTED 48" ON CENTER INTO EXISTING SLAB.



PROPOSED ADDITION 12 NORTH RIDGEVIEW

well in Red Front
septic in
Lot 6
6/26/0

Tracy Slattery

11103
Date of this plan is voided by the State of California
Changes to the plan must be approved by the State of California
Professional Engineer
Professional Engineer
Professional Engineer

PROPOSED ADDITION - ONE STORY LOW FRAME PHELLY

PROPOSED NEW DRIVE

2011 C. DRIVE

H 27° 27' 30" W 200.00' (P)
H 28° 42' 03" H 201.47' (F)
199.67' (L)

H 27° 27' 30" W 200.00' (P)
H 28° 40' 51" W 200.91' (F)
196.73' (G)

24' (F)

1-D

SHEP
57' EAST
FLINE

PHC in front
5' in front
PHC in front

water
water
meter

Open for
11/13/11
for 30 days

2011 C. DRIVE

Block 7

67.73

26.92

21.30

24.57

15.47

4.80

16.00

13.71

15.47

30.80

12.00

14.40

12.00

27.2

17.2

17.2

17.2

25.86

26.30

26.30

26.30

Pool Equip.

1-LOUP
PUCK &
TRILLIS

ALLI SHIP
7.5' x 9.5'

6 WOOD
FENCE 2'

Ham
Vice
10' x 10'
Opposite
Pool

water
hook up
20' x 20' house

water
line

water
meter

2011 C. DRIVE

Window



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

PGT Industries
1070 Technology Drive
Nokomis, FL 34275

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

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

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

Your application for Notice of Acceptance (NOA) of:
SH-701 Aluminum Single Hung Window Impact Resistant
under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Types of Construction, and completely described herein, has been recommended for acceptance by the Miami-Dade County Building Code Compliance Office (BCCO) under the conditions specified herein.

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

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

Raul Rodriguez
Chief Product Control Division

ACCEPTANCE NO.: 01-0629.08
EXPIRES: 11/01/2006

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

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

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

APPROVED: 11/01/2001

Vinyl Tech/Progressive Glass Technology

ACCEPTANCE No. : 01-0629.08

APPROVED : November 01, 2001

EXPIRES : November 01, 2006

NOTICE OF ACCEPTANCE: SPECIFIC CONDITIONS

1. SCOPE

This revises & renews Notice of Acceptance No. 98-0223.01, which was issued on October 22, 1998. It approves an aluminum single hung window, as described in Section 2 of this Notice of Acceptance, designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County, for the locations where the pressure requirements, as determined by SFBC Chapter 23, do not exceed the Design Pressure Rating values indicated in the approved drawings.

2. PRODUCT DESCRIPTION

The Series SH-701 Aluminum Single Hung Window – Impact and its components shall be constructed in strict compliance with the following document: Drawing No. 4040, titled "SH-701 Aluminum Single Hung window" Sheets 1 thru 4 of 4, prepared by manufacturer, dated 2/9/98, 08-18-98 and last revised on 10-11-2001, signed and sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division. These documents shall hereinafter be referred to as the approved drawings.

3. LIMITATIONS

- 3.1 This approval applies to single unit applications only, as shown in approved drawings.
- 3.2 Water infiltration requirements: see design pressure table.

4. INSTALLATION

- 4.1 The aluminum single hung window and its components shall be installed in strict compliance with the approved drawings.
- 4.2 The installation of this product will not require a hurricane protection system.

5. LABELING

- 5.1 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".

6. BUILDING PERMIT REQUIREMENTS

- 6.1 Application for building permit shall be accompanied by copies of the following:
 - 6.1.1 This Notice of Acceptance.
 - 6.1.2 Duplicate copies of the approved drawings, as identified in Section 2 of this Notice of Acceptance, clearly marked to show the components selected for the proposed installation.
 - 6.1.3 Any other documents required by the Building Official or the South Florida Building Code (SFBC) in order to properly evaluate the installation of this system.

Ishaq I. Chanda
Ishaq I. Chanda, P.E., Product Control Examiner
Product Control Division

Vinyl Tech/Progressive Glass Technology

ACCEPTANCE No. : 01-0629.08

APPROVED : November 01, 2001

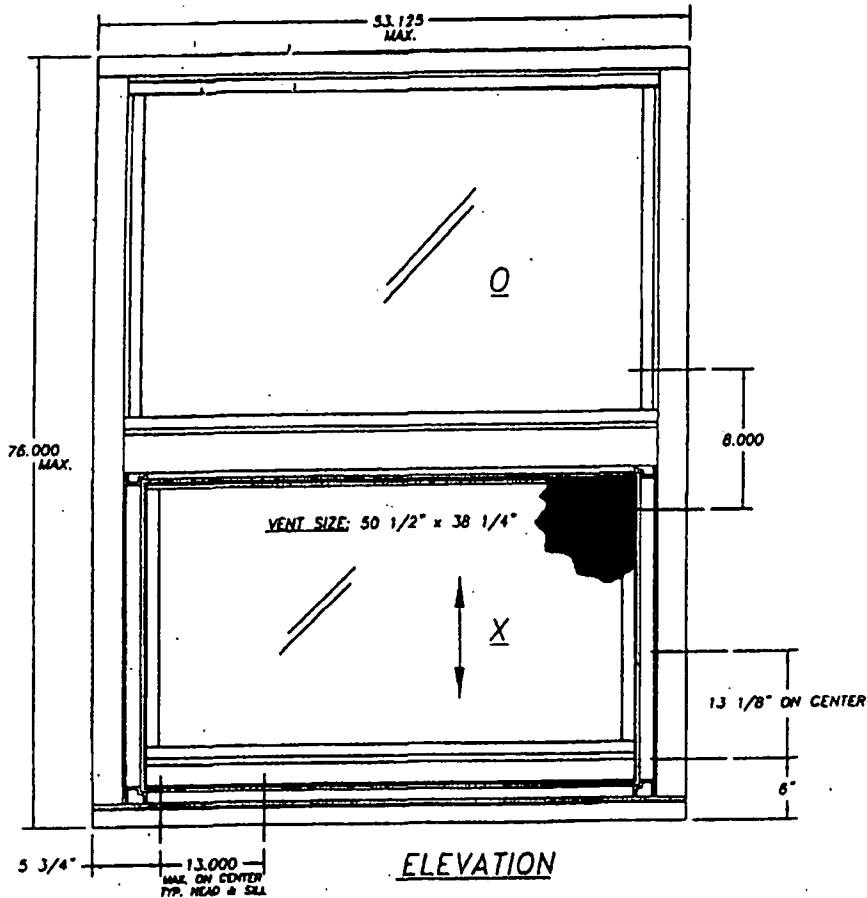
EXPIRES : November 01, 2006

NOTICE OF ACCEPTANCE: STANDARD CONDITIONS

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

END OF THIS ACCEPTANCE

Ishaq I. Chanda
Ishaq I. Chanda, P.E., Product Control Examiner
Product Control Division



ELEVATION

ITEM	DESCRIPTION	V.T. #	QTY. / LOCATION	VENDOR	VENUM #
1	WOOD FRAME HEAD (Anm. 6083-15)	812225		ALUMAX	AF-12225
2	WOOD FRAME SILL (Anm. 6083-15)	812226		ALUMAX	AF-12226
3	WOOD FRAME JAMB (Anm. 6083-15)	812227		ALUMAX	AF-12227
4	WOOD HINGING RAIL (Anm. 6083-15)	812228		ALUMAX	AF-12228
5	SASH TOP RAIL (Anm. 6083-15)	812229		ALUMAX	AF-12229
6	SASH BOTTOM RAIL (Anm. 6083-15)	812230		ALUMAX	AF-12230
7	SASH SIDE RAIL (Anm. 6083-15)	812231		ALUMAX	AF-12231
8	GLAZING BEAD (Anm. 6083-15)	6534571		ALUMAX	AF-334571
9	WEATHERSTRIP - VINYL BULB	61P241K	8 (1 per Glazing Bead)	TEAM PLASTICS	TP-247
10	SCREEN	6289AC		DOV CORNING	899
11	5/16 (.350) W/SAFETY BY SOLUNA INTERLAYER			M.P.G.	
12	5/16 (.350) W/DUPONT PVF INTERLAYER			M.P.G.	
13	78 x 790 PHIL. PN. HD.	7850PFA	2 (to attach Balances to Jamba)	AQUA FASTENERS	
14	SWEEP LATCH		1 (11.5 from end of vent top rail) 2 (if width is >= 42")	MINIATURE DIE CASTING	PGT.214.XX
15	78 x .825 PHIL. FLT. HD.	7858WW	2 (Sweep Latch Screws)	MERCHANTS FASTENER	
16	WINDLOAD ADAPTER (Anm. 6083-15)	612236	2 (from Jamba, 30 from bal.)	ALUMAX	AF-12236
17	78 x 374 PHIL. P.H. TR	78X38PPT	4 (Windload Adapter Screws)	MERCHANTS FASTENER	
18	WEATHERSTRIP - VINYL BULB/SASH	61P249K	1 (at Vent Bottom Rail)	TEAM PLASTICS	TP-249
19	SASH TOP GUIDE		2 (1 per each balance)	MASTER TOOL	
20	SCREEN			VINYL TECH. PGT	
21	BALANCE COVER		2 (1 per each balance)	WYBORC	STAVE
22	BALANCE		2 (1 @ each frame jamb)	CALDWELL	
23	WEATHERSTRIP - PILE/PINSEAL	61002W	3 (at vent jamb & vent top rail)	SCHIEFFEL CORP.	FS7826-107
24	SASH FACE GUIDE	71087	2 (1/vent jamb, 2.5" from bal.)	VINYL TECH. PGT	
25	78 x 500 PHIL. FLT. HD.	78X12PFAW	2 (each face guide screws)	SCHERER IND. PROD.	
26	SASH STOP (Anm. 6083-15)	612244	2 (at top of each frame jamb)	ALUMAX	AF-12244
27	78 x 1,000 PHIL. P.H. SHS	78X1PFA	4 (Frame & Vent Assy. screws)	MERCHANTS FASTENER	
28	SEAM SEALER	65M25W		SCHIEFFEL/WORKHEAD	SH5504
29	WINDLOAD ADAPTER (PLASTIC)	61207	2 (at frame jambs, 30" from bal.)	PROTOTYPE	WP996-1207

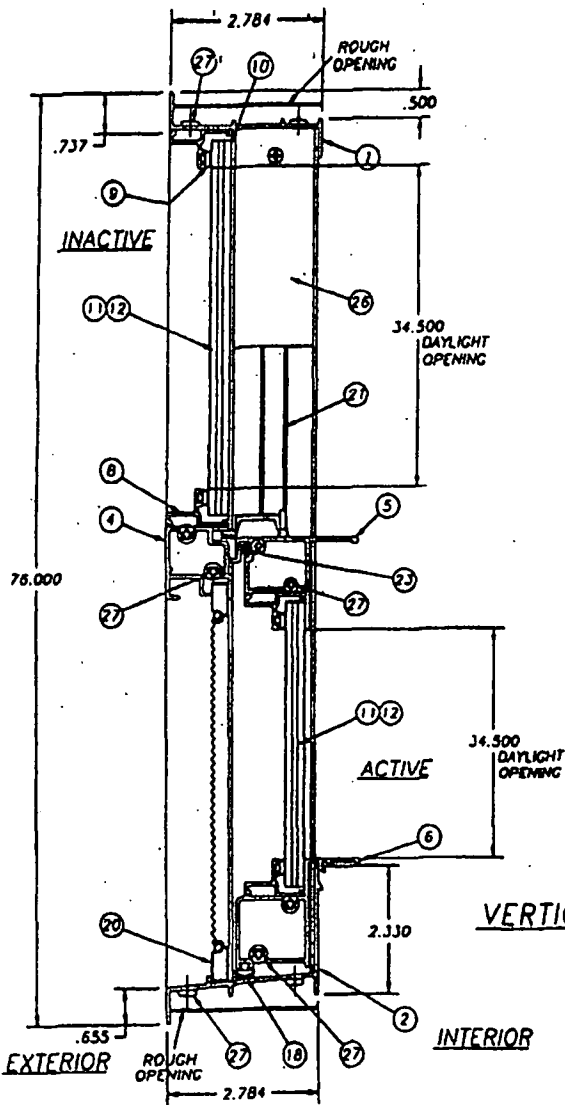
5/16 LAMINATED W/ ANNEALED GLASS		5/16 LAMINATED W/ HEAT STRENGTHENED GLASS	
WATER INFILTRATION REQUIRED	WATER INFILTRATION NOT REQUIRED	WATER INFILTRATION REQUIRED	WATER INFILTRATION NOT REQUIRED
-50.0	+50.0	-50.0	+50.0
		-80.0	+88.7
		-80.0	+80.0

PRODUCT RENEWED
 ACCEPTANCE No. 01-0629-08
 MODIFICATION DATE November 01, 2002
 By: Ishag L. Chanda
 PRODUCT CONTROL DIVISION
 BUILDING CODE COMPLIANCE OFFICE

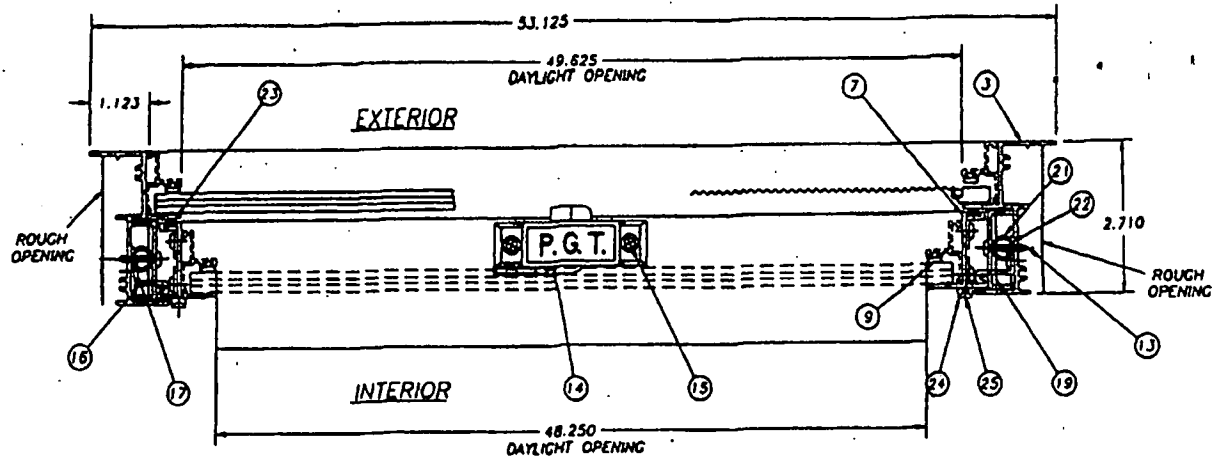
LARGE MISSILE IMPACT WINDOWS

- GLAZING OPTIONS: A. 5/16 (.350) LAMINATED GLASS (1/8" annealed/.090 film/1/8" annealed)
 B. 5/16 (.350) LAMINATED GLASS (1/8" heat strengthened/.090 film/1/8" heat strengthened)
- CONFIGURATIONS: OX
- DESIGN PRESSURE RATING: SEE TABLE
- ANCHORS:
 MAX. 5 3/4" FROM EACH CORNER (HEAD & SILL)
 MAX. 6" FROM EACH CORNER (JAMBS)
 MAX. SPACING AT HEAD & SILL: 13.000
 MAX. SPACING AT JAMBS: 13.125
- SHUTTER REQUIREMENT:
 NO SHUTTERS REQUIRED
- REFERENCE TEST REPORT: FTL-1089

 Robert L. Clark, P.E. PE #39712 Structural	 1070 TECHNOLOGY DRIVE MOKONDIS, FL 34275 P.O. BOX 1529 MOKONDIS, FL 34274	Revisd By: F.K. Revisd Date: 10/11/0 Revisions: TB, TABLE, EXTR.
		Drawn By: D.B. Date: 8/18/98
Description: ELEVATION & PARTS LIST		
Title: ALUMINUM SINGLE HUNG WINDOW		
Series/Model: SH-701	Scale: NTS	Sheet: 1 of 4
Drawing No. 4040		Rev: B



VERTICAL SECTION

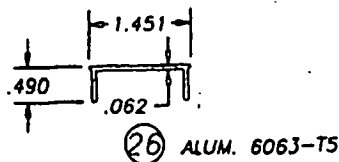
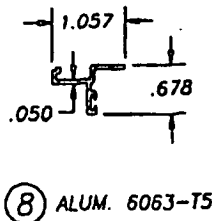
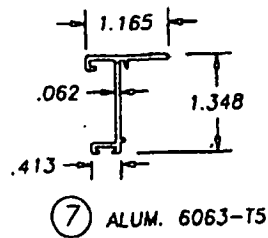
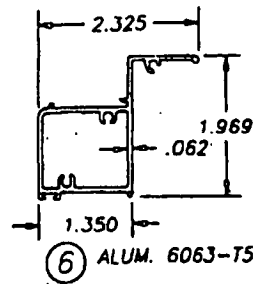
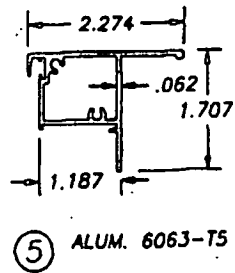
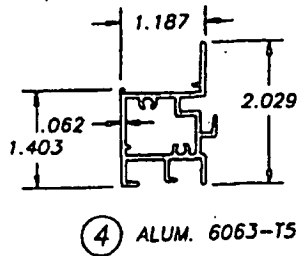
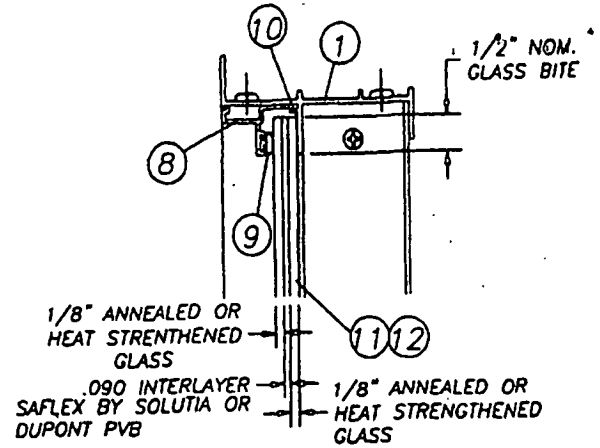
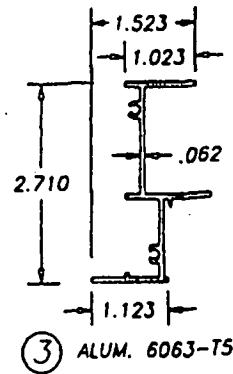
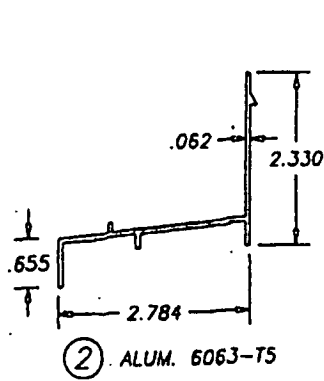
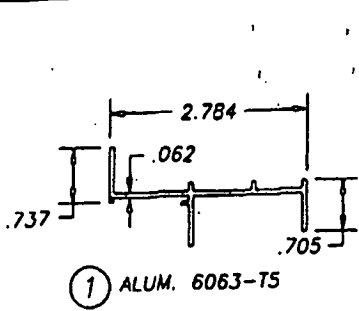


HORIZONTAL SECTION

REFERENCE TEST REPORT: FTL-1889

PRODUCT RENEWED
 ACCEPTANCE No. 01-0629.08
 EXPIRATION DATE Nov 17 2006
 by Shag J. L. Landa
 PRODUCT CONTROL DIVISION
 BUILDING CODE COMPLIANCE OFFICE

 10/14/01 Robert L. Clark, P.E. PE #39712 STRUCTURAL	 1070 TECHNOLOGY DRIVE HOKIAMS, FL 34275 P.O. BOX 1529 HOKIAMS, FL 34274	Revised By: F.K.	Date: 10/11/01	Revisions: TB, TABLE, EXTR.	Description: SECTIONS Title: ALUMINUM SINGLE HUNG WINDOW	
		Revised By: D.B.	Date: 8/18/98	Revisions:		
Drawn By: D.B.	Date: 2/9/98					
		Series/Model: SH-701	Scale: NTS	Sheet: 2 of 4	Drawing No. 1040	Rev: B



REFERENCE TEST REPORT: FTL-1889

Robert L. Clark
10/11/01
Robert L. Clark, P.E.
PE #39712
Structural

RGT INDUSTRIES

1070 TECHNOLOGY DRIVE
NOKOMIS, FL 34275
P.O. BOX 1529
NOKOMIS, FL 34274

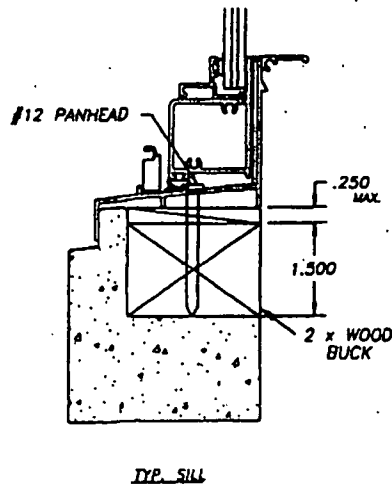
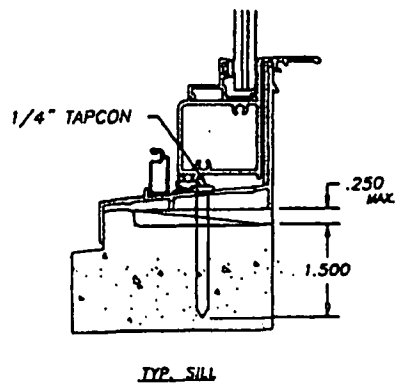
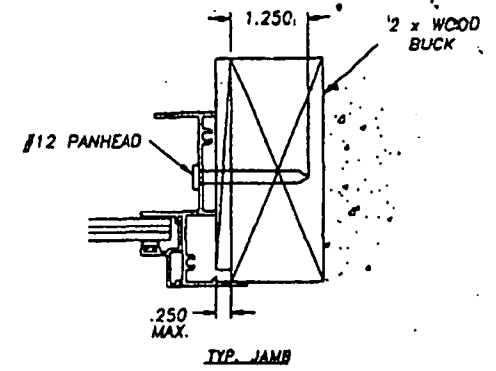
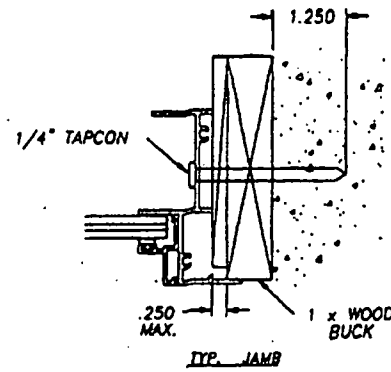
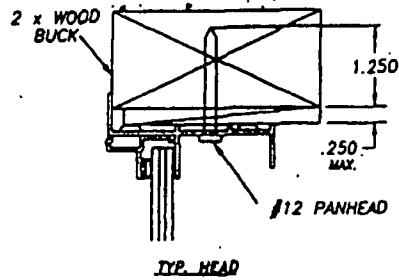
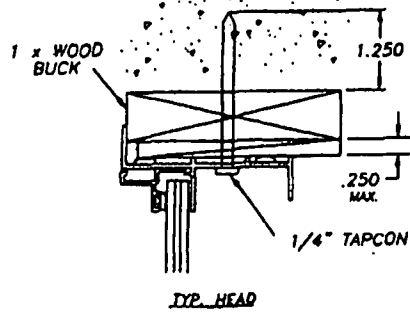
Revised By: F.K.	Date: 10/11/01	Revisions: TB, TABLE, EXTR.
Revised By: D.B.	Date: 8/18/98	Revisions:
Drawn By: D.B.	Date: 2/9/98	

Description:
EXTRUSIONS & GLAZING OPTIONS

ID#:
ALUMINUM SINGLE HUNG WINDOW

Series/Model: SH-701	Scale: NTS	Sheet: 3 of 4	Drawing No. 4040	Rev: B
-------------------------	---------------	------------------	---------------------	-----------

PRODUCT RENEWED	
ACCEPTANCE NO. 01-0629-08	
MODIFICATION DATE 04/06/2006	
By: (Signature)	
PRODUCT CONTROL DIVISION	
BUILDING CODE COMPLIANCE OFFICE	



REFERENCE TEST REPORT: FTL-1889

PRODUCT REVIEWED

ACCEPTANCE NO. 01-0629 OK

3-D0 DATE TIME DATE 11/20/00/2001

By Ishan J. Zhandu

PRODUCT CONTROL DIVISION

BUILDING CODE COMPLIANCE

Robert L. Clark
10/12/01

P&T
INDUSTRIES

1070 TECHNOLOGY DRIVE
NORONDA, FL 34275

P.O. BOX 1539
NORONDA, FL 34274

Robert L. Clark, P.E.
PE #39712
Structural

Revised By: F.K.	Date: 10/11/0	Revisions: TB, TABLE, EXTR.
Revised By: D.B.	Date: 8/18/98	Revisions:
Drawn By: D.B.	Date: 2/9/98	
Description: ANCHORAGE		
Title: ALUMINUM SINGLE HUNG WINDOW		
Series/Model: SH-701	Scale: NTS	Sheet: 4 of 4
Drawing No. 4040		Rev: B



**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)

**PGT Industries
P.O. Box 1529
Nokomis, FL 34274**

SCOPE:

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

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

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

DESCRIPTION: 1"x Heavy Wall-Aluminum Tube Clipped Mullion

APPROVAL DOCUMENT: Drawing No. 6621, titled "1" Heavy Wall Mullion Arrangement Detail", sheets 1 through 6 of 6, prepared, signed and sealed by Robert L. Clark, P.E., dated 5/24/01, bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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.

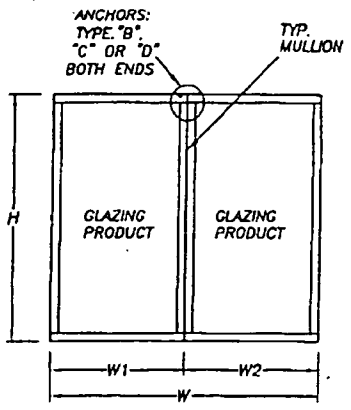
ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

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 # 01-0323.02 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by **Theodore Berman, P.E.**



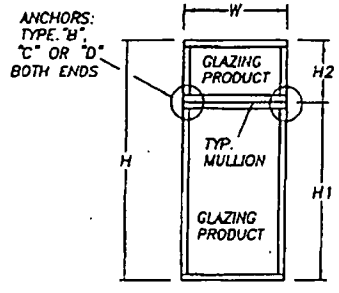
**NOA No 02-0701.09
Expiration Date: June 28, 2006
Approval Date: July 12, 2002
Page 1**



$W = W1 + W2$

(2) WINDOWS MULLED TOGETHER

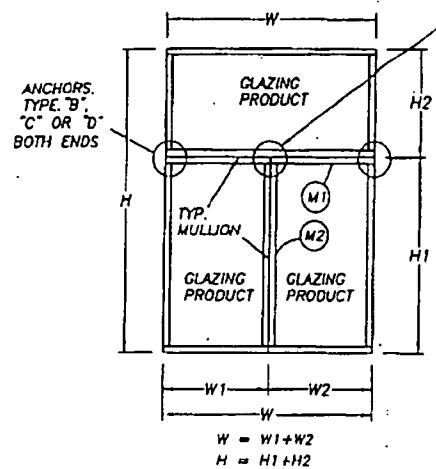
FOR DETERMINING MAX ALLOWABLE DESIGN PRESSURE SEE TABLES ON PAGE 5 & 6
 MAX OPENING = W OR W1+W2
 MULL LENGTH = H



$H = H1 + H2$

(1) WINDOW MULLED W/ONE ABOVE

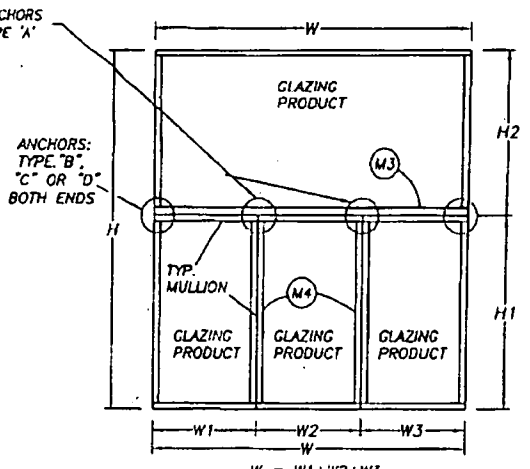
FOR DETERMINING MAX ALLOWABLE DESIGN PRESSURE SEE TABLES ON PAGE 5 & 6
 MAX OPENING = H OR H1+H2
 MULL LENGTH = W



$W = W1 + W2$
 $H = H1 + H2$

(2) WINDOWS MULLED W/ONE ABOVE

FOR DETERMINING MAX ALLOWABLE DESIGN PRESSURE SEE TABLES ON PAGE 5 & 6
 M1) MAX OPENING = H OR H1+H2
 MULL LENGTH = W OR W1+W2
 M2) MAX OPENING = W OR W1+W2
 MULL LENGTH = H1



$W = W1 + W2 + W3$
 $H = H1 + H2$

MULTIPLE WINDOWS MULLED W/ONE ABOVE

FOR DETERMINING MAX ALLOWABLE DESIGN PRESSURE SEE TABLES ON PAGE 5 & 6
 M3) MAX OPENING = H OR H1+H2
 MULL LENGTH = W OR W1+W2+W3
 M4) MAX OPENING = W1+W2 OR W2+W3
 MULL LENGTH = H1

NOTES:

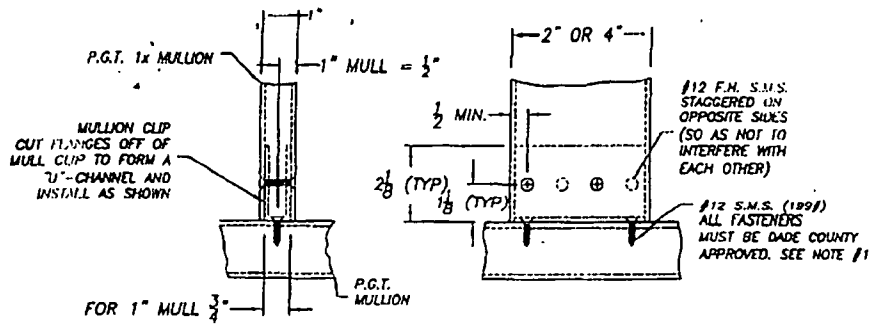
1. FOR ANCHORAGE TYPE, QUANTITY AND LOCATION REFER TO SHEETS 2, 3, 5 AND 6
2. WINDOWS MAY BE MULLED TO A MAX. OF 5 UNITS
3. MULLIONS ARE APPROVED FOR IMPACT AND NON-IMPACT
4. REFERENCE TEST REPORT FTL-2902, 2903 AND 2975

R.L. Clark
 5/24/01
 Robert L. Clark, P.E.
 P.E. #39712
 Structural

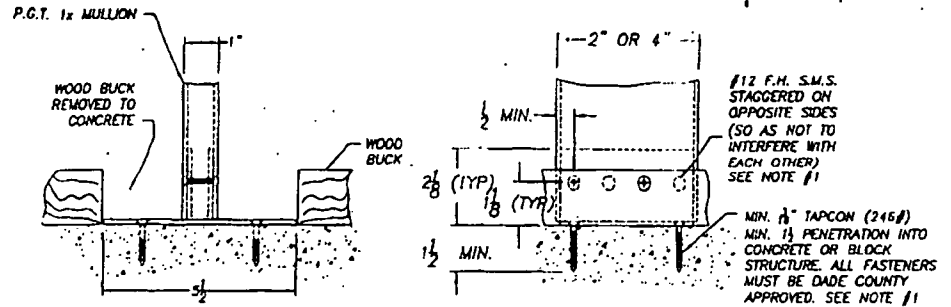
PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 02-0301.09
 Expiration Date 06/28/06
 By *Chadman Kemmer*
 Miami Code Product Control
 Division

APPROVED AS COMPLYING WITH THE
 SOUTH FLORIDA BUILDING CODE
 DATE JUN 28 2001
 BY *Manuel Sery*
 PRODUCT CONTROL DIVISION
 BUILDING CODE COMPLIANCE OFFICE
 ACCEPTANCE NO. 01-0323.02

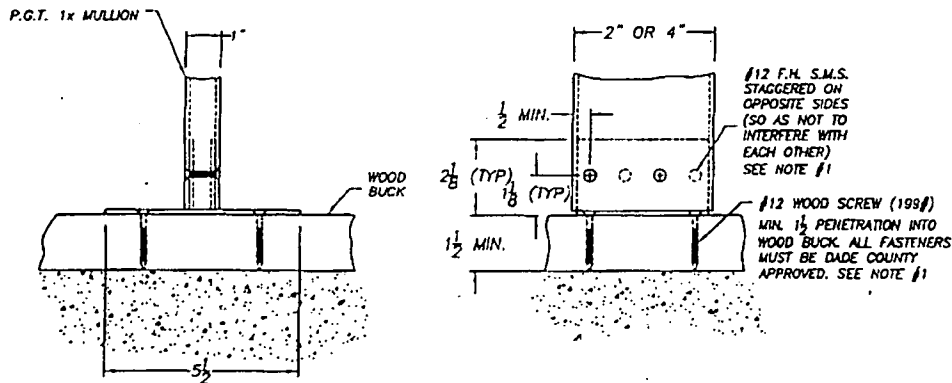
Revised By:	Date:	Child By:	Date:	Revisions:
Drawn By:	P.J.P.	Date:	4/28/00	
Description: 1" HEAVY WALL MULLION ARRANGEMENT DETAIL				
1070 TECHNOLOGY DRIVE NOKOMIS, FL 34275	P.O. BOX 1529 NOKOMIS, FL 34274	Series/Model: MULLS	Scale: 1x	Sheet: 1 of 6
			Drawing No. 6621	Rev



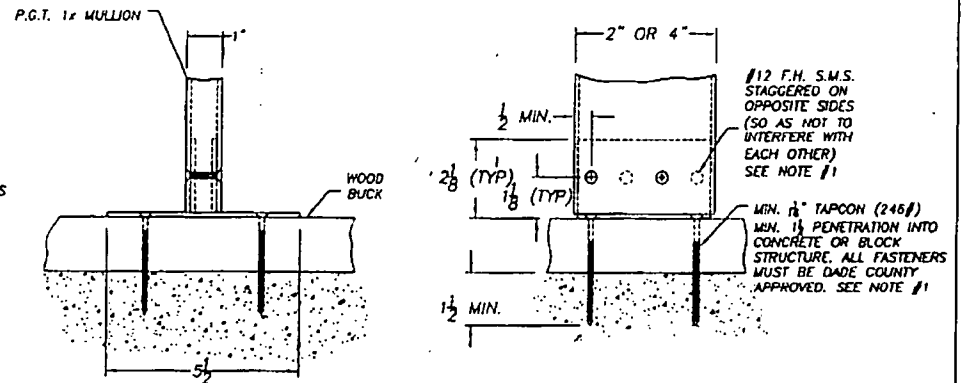
TYPICAL MULLION TO MULLION INSTALLATION TYPE "A"



TYPICAL MULLION TO STRUCTURE WITH WOOD BUCK REMOVED FROM CONC. TYPE "C"



TYPICAL MULLION TO STRUCTURE WITH WOOD BUCK TYPE "B"



TYPICAL MULLION TO STRUCTURE WITH WOOD BUCK AND CONC. TYPE "D"

NOTE:

- FOR MULL SIZE AND QUANTITY OF ANCHORS REQUIRED SEE SHEETS 5 & 6. FOR ANCHOR LOCATIONS SEE SHEET 3. QUANTITY OF ANCHORS FOR MULL-TO-CLIP IS THE SAME AS THE QUANTITY OF ANCHORS FROM CLIP-TO-OPENING.
- REFERENCE TEST REPORT FTL-2902, 2903 AND 2975

IMPORTANT:

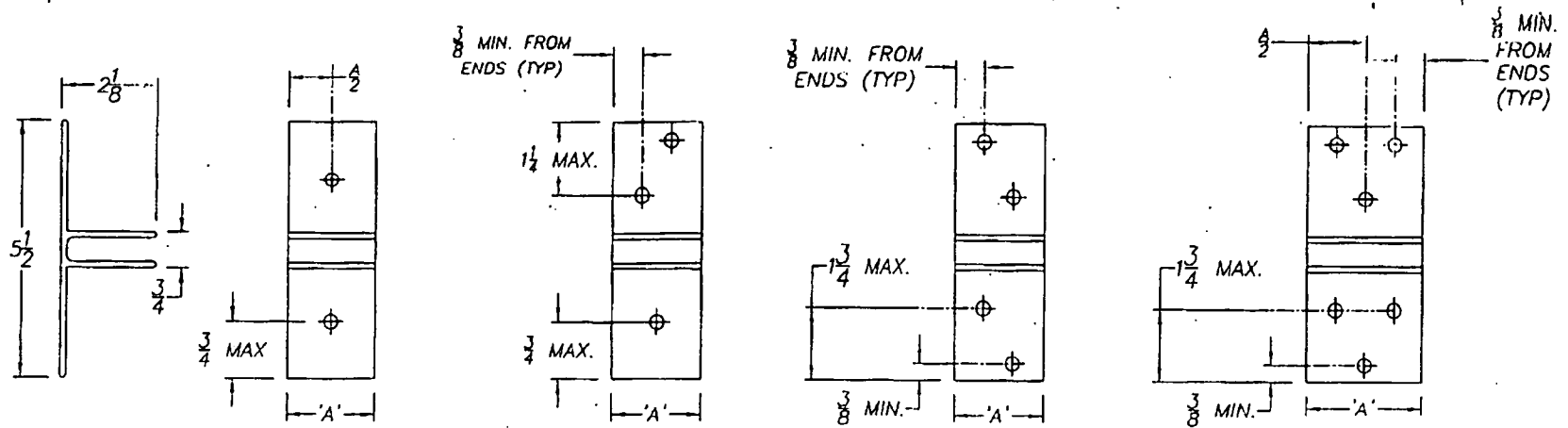
QUANTITY OF ANCHORS SHOWN ARE FOR A PICTORIAL REPRESENTATION ONLY. FOR CORRECT QUANTITY OF ANCHORS PLEASE REFER TO CHARTS AND FIND THE CORRECT MULL SIZE AND PRESSURE REQ'D FOR YOUR SPECIFIC APPLICATION.

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 02-030109
 Expiration Date 02/28/09
 By: *Glenn Brown*
 Miami Dade Product Control
 Division

APPROVED AS COMPLYING WITH THE
 SOUTH FLORIDA BUILDING CODE
 DATE JUN 28 2001
 BY: *Maurice*
 PRODUCT CONTROL DIVISION
 BUILDING CODE COMPLIANCE OFFICE
 ACCEPTANCE NO. 01-0323-02

R-L Clark
 5/24/01
 Robert L. Clark, P.E.
 P.E. #39712
 Structural

Revised By:	Date:	Chkd By:	Date:	Revisions:
Drawn By:	P.J.P.	Date:	4/28/00	
Description: 1" HEAVY WALL MULLION & CLIP INSTALLATION DETAIL				
1070 TECHNOLOGY DRIVE NOKOMIS, FL 34275	P.O. BOX 1529 NOKOMIS, FL 34274	Series/Model MULLS	Scale: 1x	Sheet: 2 of 6
			Drawing No. 6621	Rev:

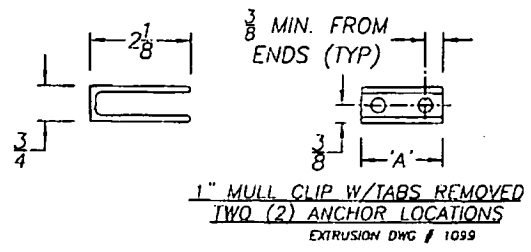


1" MULLION CLIP
TWO (2) ANCHOR LOCATIONS
EXTRUSION DWG # 1099

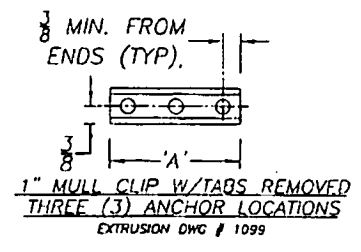
1" MULLION CLIP
THREE (3) ANCHOR LOCATIONS
EXTRUSION DWG # 1099

1" MULLION CLIP
FOUR (4) ANCHOR LOCATIONS
EXTRUSION DWG # 1099

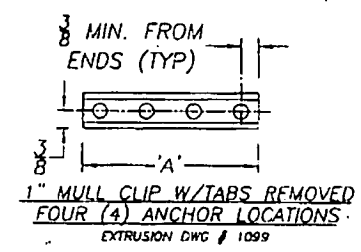
1" MULLION CLIP
SIX (6) ANCHOR LOCATIONS
EXTRUSION DWG # 1099



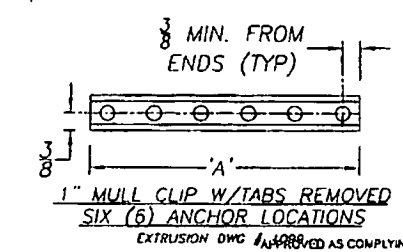
1" MULLION CLIP W/TABS REMOVED
TWO (2) ANCHOR LOCATIONS
EXTRUSION DWG # 1099



1" MULLION CLIP W/TABS REMOVED
THREE (3) ANCHOR LOCATIONS
EXTRUSION DWG # 1099



1" MULLION CLIP W/TABS REMOVED
FOUR (4) ANCHOR LOCATIONS
EXTRUSION DWG # 1099



1" MULLION CLIP W/TABS REMOVED
SIX (6) ANCHOR LOCATIONS
EXTRUSION DWG # 1099

IMPORTANT:
QUANTITY OF ANCHORS SHOWN ARE FOR A PICTORIAL REPRESENTATION ONLY. FOR CORRECT QUANTITY OF ANCHORS PLEASE REFER TO CHARTS AND FIND THE CORRECT MULL SIZE AND PRESSURE REQ'D FOR YOUR SPECIFIC APPLICATION.

MULL SIZE	'A'
1 x 2 x 3/8	1 1/8
1 x 2 1/2 x 3/8	1 3/8
1 x 2 3/4 x 3/8	1 5/8
1 x 4 x 3/8	3 1/8

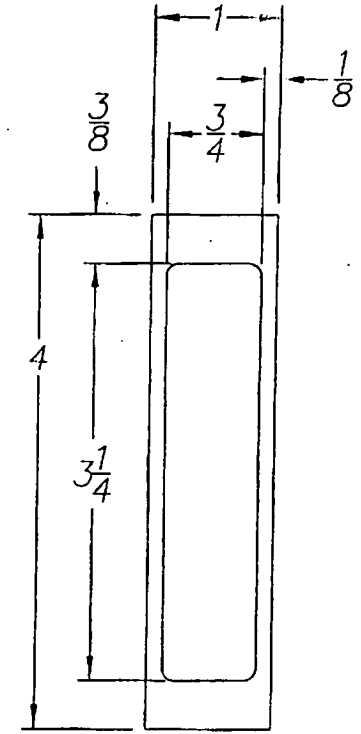
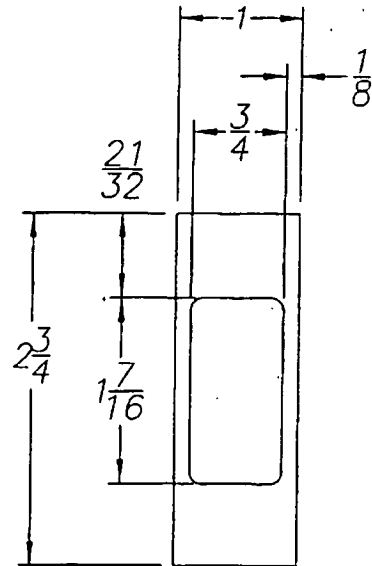
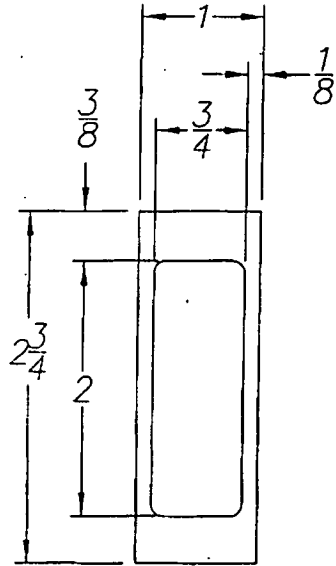
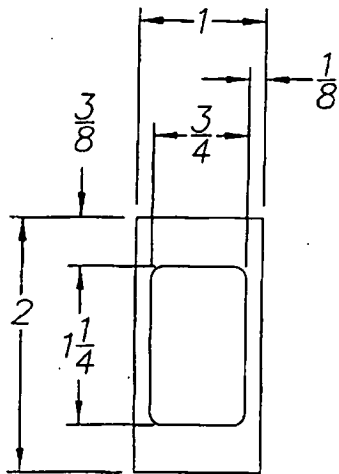
NOTE:
1. REFERENCE TEST REPORT FTL-2902, 2903 AND 2975

PRODUCT REVISED to comply with the Florida Building Code
Acceptance No. 02-070109
Expiration Date 04/28/09
By: *[Signature]*
Initial Under Product Control Division

[Signature]
RECEIVED
3971L
STRUCTURAL

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE (DATE JUN 28 2001) BY *[Signature]* PRODUCT CONTROL DIVISION BUILDING CODE COMPLIANCE OFFICE ACCEPTANCE NO. 01-032522

Revised By:	Date:	Chkd By:	Date:	Revisions:
Drawn By:	P.J.P.	Date:	5/21/01	
Description: ANCHOR LOCATIONS				
Title: 1" MULLION CLIP				
1070 TECHNOLOGY DRIVE NOKOMIS, FL 34275	P.O. BOX 1529 NOKOMIS, FL 34274	Series/Model: MULLIS	Scale: 1	Sheet: 3 of 6
Drawing No. 6621			Rev:	



1x HEAVY WALL MULLS
MAT'L: 6063-T6

PRODUCT REVISED
to comply with the Florida
Building Code
Acceptance No. 02-0201-09
Expiration Date 06/28/06
By: *[Signature]*
Metal Dade Product Control
Division

APPROVED AS COMPLYING WITH THE
SOUTH FLORIDA BUILDING CODE
DATE JUN 28 2001
BY: *[Signature]*
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 01-0322-02

NOTE:

1. REFERENCE TEST REPORT FTL-2902, 2903 AND 2975

[Signature]
Robert L. Clark, P.E.
P.E. #39712
Structural

PGT INDUSTRIES		Revised By:	Date:	Chkd By:	Date:	Revisions:	
		Drawn By:	P.J.P.	Date:	5/22/00		
		Description: 1" HEAVY WALL MULLION PROFILES					
1070 TECHNOLOGY DRIVE NOKOMIS, FL 34275	P.O. BOX 1529 NOKOMIS, FL 34274	Series/Model:	MULLS	Scale:	1x	Sheet:	4 of 6
		Drawing No.:	6621				
		Rev.:					

1x2x.375
2 Anchors

MULL LENGTH IN INCHES

OPENING WIDTH IN INCHES

	50	60	70	80	90	100	110	120	130	160
42	155	142	134	130	130	130	130	130	130	130
48	129	116	107	102	100	99	99	99	99	99
50.625	115	100	91	85	82	80	80	80	80	80
54	94	81	73	68	64	63	62	62	62	62
60	67	58	51	47	44	42	41	41	41	41
63	58	49	44	40	37	35	34	34	34	34
66	50	43	38	34	32	30	29	28	28	28
72	38	32	29	26	24	22	21	20	20	20
76	32	27	24	22	20	18	17	17	16	16
78	30	25	22	20	18	17	16	15	15	-
84	24	20	17	16	-	-	-	-	-	-
90	19	16	-	-	-	-	-	-	-	-
96	16	-	-	-	-	-	-	-	-	-
108	-	-	-	-	-	-	-	-	-	-
111	-	-	-	-	-	-	-	-	-	-
144	-	-	-	-	-	-	-	-	-	-

1x2.75x.375
3/4 Anchors

MULL LENGTH IN INCHES

OPENING WIDTH IN INCHES

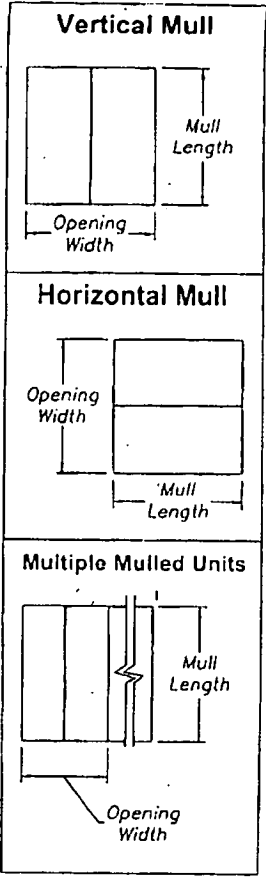
	50	60	70	80	90	100	110	120	130	160
42	170 170	170 170	170 170	170 170	170 170	170 170	170 170	170 170	170 170	170 170
48	170 170	170 170	161 170	154 170	150 170	149 170	149 170	149 170	149 170	149 170
50.625	170 170	161 170	148 170	140 170	136 170	134 170	134 170	134 170	134 170	134 170
54	166 170	147 170	135 165	126 153	121 146	119 142	118 141	118 141	118 141	118 141
60	145 152	127 131	116 116	101 107	100 100	96 96	93 93	92 92	92 92	92 92
63	131 131	112 112	99 99	90 90	84 84	80 80	77 77	76 76	76 76	76 76
66	113 113	97 97	85 85	77 77	72 72	68 68	65 65	64 64	63 63	63 63
72	86 86	73 73	65 65	58 58	54 54	50 50	48 48	46 46	45 45	44 44
76	73 73	62 62	54 54	49 49	45 45	42 42	40 40	38 38	37 37	36 36
78	67 67	57 57	50 50	45 45	41 41	38 38	36 36	35 35	33 33	32 32
84	54 54	45 45	40 40	35 35	32 32	30 30	28 28	27 27	26 26	24 24
90	43 43	37 37	32 32	28 28	26 26	24 24	22 22	21 21	20 20	19 19
96	36 36	30 30	26 26	23 23	21 21	19 19	18 18	17 17	16 16	15 15
108	25 25	21 21	18 18	16 16	-	-	-	-	-	-
111	23 23	19 19	17 17	15 15	-	-	-	-	-	-
144	-	-	-	-	-	-	-	-	-	-

NOTES:

1. MAXIMUM ALLOWABLE PRESSURE IN PSF.
2. DESIGN IS BASED ON OPENING WIDTH. FOR MULTIPLE UNITS, CONSIDER ONLY TWO ADJACENT UNITS AT A TIME. SEE SHEET 1.
3. REFERENCE TEST REPORT FTL-2902, 2903 AND 2975

P.J.P.
5/24/01
R.L. G. M.
439712

STRUKTUM



PRODUCT REVISED
as complying with the Florida
Building Code
Acceptance No. 02-0701.09
Expiration Date: 06/28/06
By: *Richard Bernier*
Miami Dade Product Control
Division

APPROVED AS COMPLYING WITH THE
SOUTH FLORIDA BUILDING CODE
DATE JUN 28 2001
BY: *Mark...*
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 01-0323-02

Revised By: _____ Date: _____	Checked By: _____ Date: _____	Revisions: _____
Drawn By: <i>P.J.P.</i>	Date: 4/28/00	
Description: PRESSURE CHARTS		
Title: 1" HEAVY WALL MULLION		
1070 TECHNOLOGY DRIVE NOKOMIS, FL 34275	P.O. BOX 1529 NOKOMIS, FL 34274	Series/Model: MULLS
Scale: NTS	Sheet: 5 of 6	Drawing No. 6621



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)

PGT Industries
P.O. Box 1529
Nokomis, FL 34274

SCOPE:

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

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

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

DESCRIPTION: SH-701 Aluminum Single Hung Window Impact Resistant

APPROVAL DOCUMENT: Drawing No. 4040, titled "Aluminum Single Hung Window", sheets 1 through 4 of 4, prepared, signed and sealed by Robert L. Clark, P.E., dated 10/11/01, bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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.

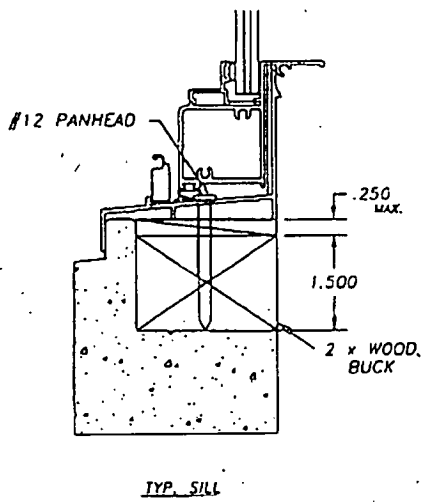
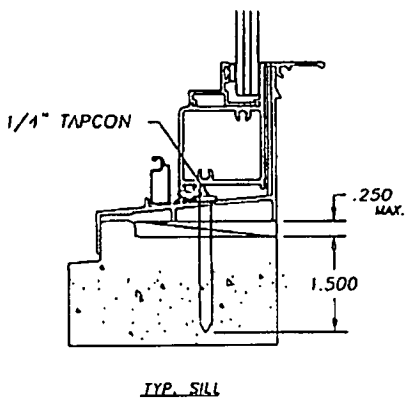
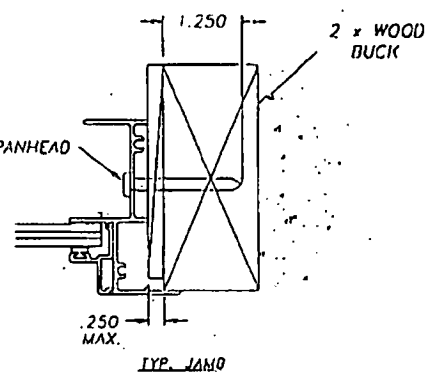
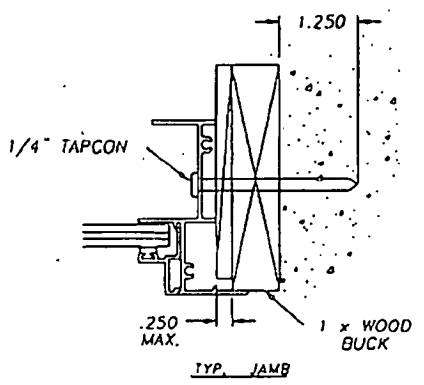
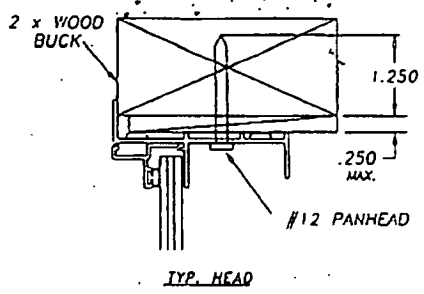
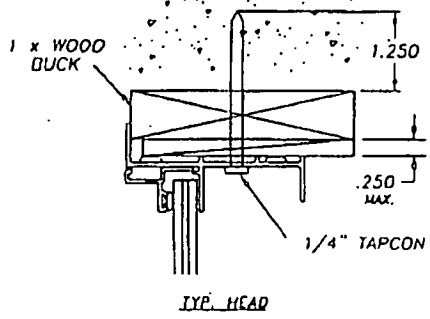
ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

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 # 01-0629.08 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Theodore Berman, P.E.



NOA No 02-0702.04
Expiration Date: November 01, 2006
Approval Date: July 16, 2002
Page 1



PRODUCT REVISED
to comply with the Florida
Building Code
Acceptance No. 02-0302.04
Expiration Date 11/10/02
By: *Glenn Berman*
Miami Dade Product Control
Division
TJH/L

PRODUCT REVISIONS
REVISION: 01-06250
DATE: 11/10/02
BY: *Isheq J. Llanusa*
TJH/L

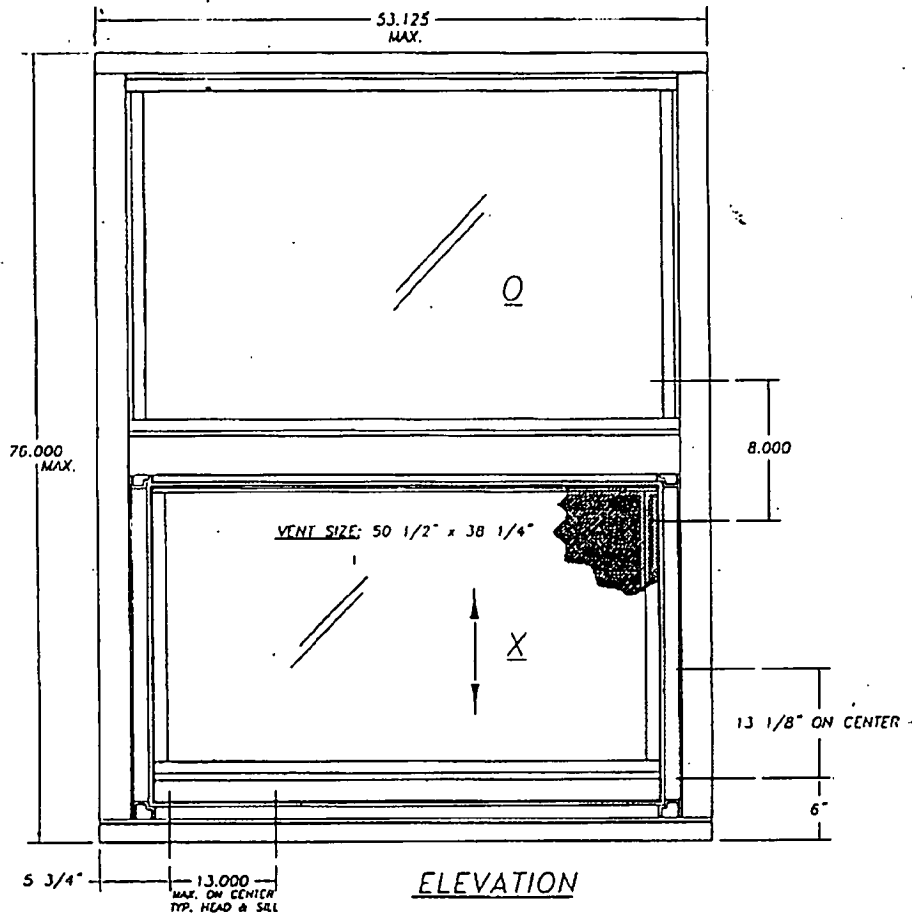
REFERENCE TEST REPORT: FTL-1889

Robert L. Clark
Robert L. Clark, P.E.
PE #39712
Structural

PGT
INDUSTRIES

1070 TECHNOLOGY DRIVE
MOKOWIS, FL 34275
P.O. BOX 1529
MOKOWIS, FL 34274

Revised By: F.K.	Date: 10/11/0	Revisions: TB, TABLE, EXTR.
Revised By: D.B.	Date: 8/18/98	Revisions:
Drawn By: D.B.	Date: 2/9/98	
Description: ANCHORAGE		
Title: ALUMINUM SINGLE HUNG WINDOW		
Series/Model: SH-701	Scale: NTS	Sheet: 4 of 4
Drawing No. 1010		Rev: B



ITEM	DESCRIPTION	V.T. #	QTY. / LOCATION	VEN. #	VENDOR #
1	FLANGED FRAME HEAD (Alum. 6063-T5)	612225	1	ALUMAX	AF-12225
2	FLANGED FRAME SILL (Alum. 6063-T5)	612226	1	ALUMAX	AF-12226
3	FLANGED FRAME JAMB (Alum. 6063-T5)	612227	2	ALUMAX	AF-12227
4	FIXED MEETING RAIL (Alum. 6063-T5)	612228	1	ALUMAX	AF-12228
5	SASH TOP RAIL (Alum. 6063-T5)	612229	1	ALUMAX	AF-12229
6	SASH BOTTOM RAIL (Alum. 6063-T5)	612230	1	ALUMAX	AF-12230
7	SASH SIDE RAIL (Alum. 6063-T5)	612231	2	ALUMAX	AF-12231
8	GLAZING BEAD (Alum. 6063-T5)	6534571	8	ALUMAX	AF-534571
9	WEATHERSTRIP - VINYL BULB	61P247K	8 (1 per Glazing Bead)	TEAM PLASTICS	TP-247
10	SKICON	67899G		DOV CORNING	899
11	5/16 (.350) W/SAFLEX BY SOLUTIA INTERLAYER		2	H.P.G.	
12	5/16 (.350) W/DUPONT PYB INTERLAYER		2	H.P.G.	
13	1/8 x .750 PHIL. PH. HD.	7658PFAA	2 (to attach Balances to Jamb)	AQUA FASTENERS	
14	SWEEP LATCH		1 (11.5" from end of vent top rail) 2 (H width is >= 42")	MINIATURE DIE CASTING	PCT.214.XX
15	1/8 x .625 PHIL. FLT. HD.	7858MW	2 (Sweep Latch Screws) 4 (when using 2 Sweep Latches)	MERCHANIS FASTENLR	
16	WINDLOAD ADAPTER (Alum. 6063-T5)	612236	2 (Ø frame jambs, 30" from bot.)	ALUMAX	AF-12236
17	1/8 x .375 PHIL. P.H. TEK	78X38PPT	4 (Windload Adapter Screws)	MERCHANIS FASTENER	
18	WEATHERSTRIP - VINYL BULB\SASH	61P249K	1 (at Vent Bottom Rail)	TEAM PLASTICS	TP-249
19	SASH TOP GUIDE		2 (1 per each balance)	MASTER TOOL	
20	SCREEN		1	VINYL TECH. PGT	
21	BALANCE COVER		2 (1 per each balance)	WYDORC	51AV
22	BALANCE		2 (1 Ø each frame jamb)	CALOWELL	
23	WEATHERSTRIP - PREVINSEAL	61062W	3 (Ø vent jambs & vent top rail)	SCHLITZEL COMP.	137076-III
24	SASH FACE GUIDE	71087	2 (1/vent jamb, 7.5" from bot.)	VINYL TECH. PGT	
25	1/8 x .500 PHIL. FLT. HD.	76X12PFAW	2 (sash face guide screws)	SCHERER IND. PROD.	
26	SASH STOP (Alum. 6063-T5)	612244	2 (Ø top of each frame jamb)	ALUMAX	AF-12244
27	1/8 x 1.000 PHIL. P.H. SMS	78X1PPA	4 (Frame & Vent Assy. screws)	MERCHANIS FASTENER	
28	SEAM SEALER	65M55W		SCHNEE/MOREHEAD	SM5504
29	WINDLOAD ADAPTER (PLASTIC)	61207	2 (Ø frame jambs, 30" from bot.)	PROTOTYPE	WC996-120

DESIGN PRESSURE RATING (P.S.F.)			
5/16 LAMINATED W/ ANNEALED CLASS		5/16 LAMINATED W/ HEAT STRENGTHENED CLASS	
WATER INFILTRATION REQUIRED	WATER INFILTRATION NOT REQUIRED	WATER INFILTRATION REQUIRED	WATER INFILTRATION NOT REQUIRED
-50.0	+50.0	-80.0	+66.7
		-80.0	+80.0

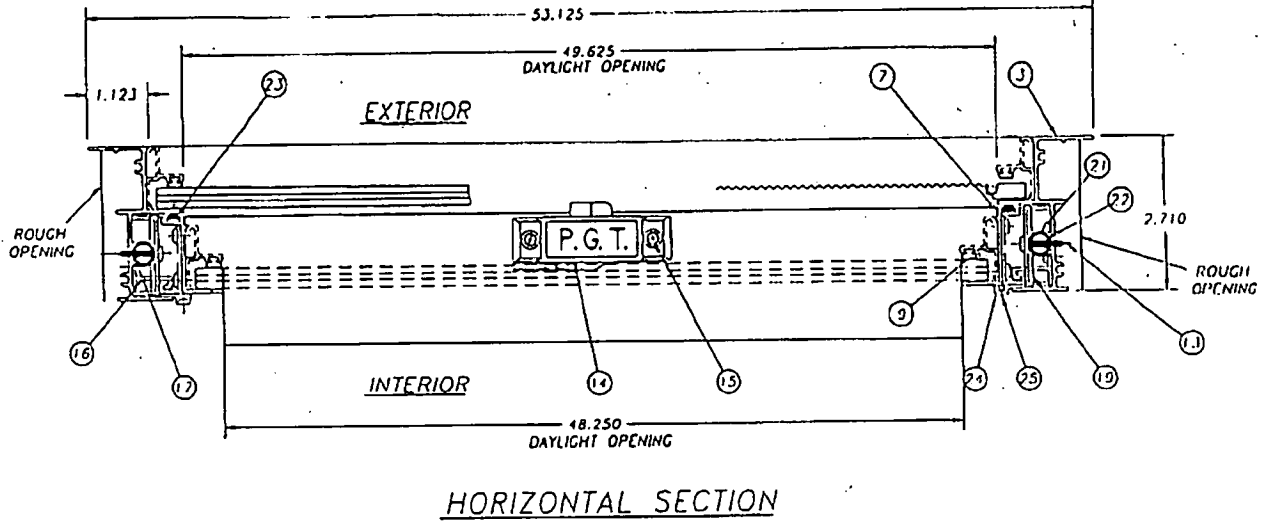
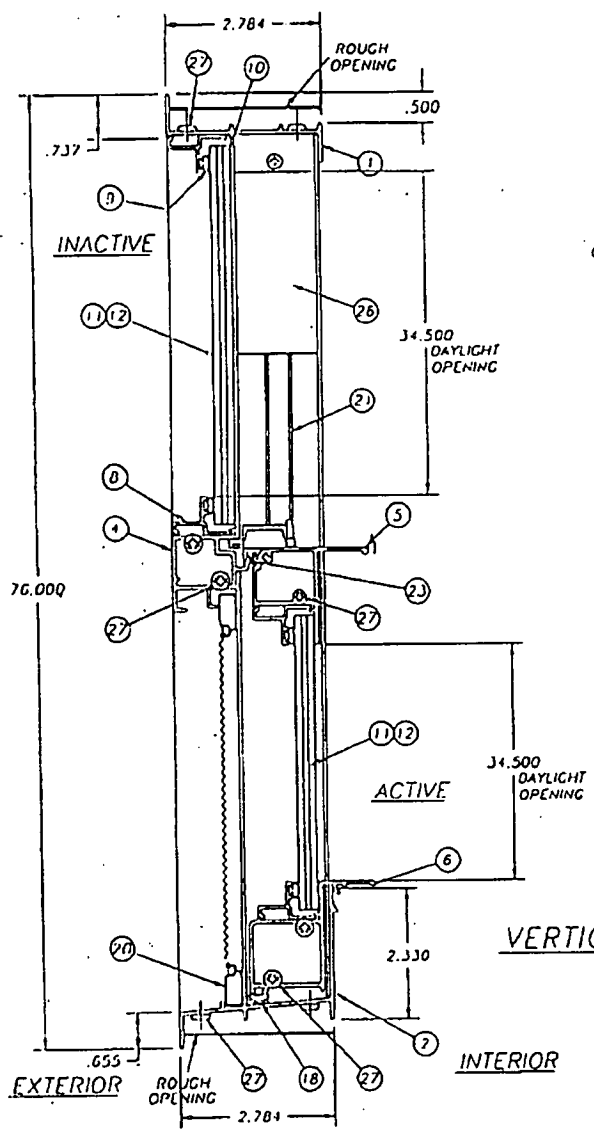
PRODUCT REVISED as complying with the Florida Building Code Acceptance No. 02-0302-04 Expiration Date 11/01/06
 By: [Signature] Miami Dade Product Control Division
 7-11812

PRODUCT REVIEWED ACCEPTANCE No. 01-0629-01 EXPIRATION DATE November 2, 2006
 By: [Signature] PRODUCT CONTROL DIVISION BUILDING CODE COMPLIANCE

LARGE MISSILE IMPACT WINDOWS

- GLAZING OPTIONS: A. 5/16" (.350) LAMINATED CLASS (1/8" annealed/.090 film/1/8" annealed)
 B. 5/16" (.350) LAMINATED CLASS (1/8" heat strengthened/.090 film/1/8" heat strengthened)
- CONFIGURATIONS: OX
- DESIGN PRESSURE RATING: SEE TABLE
- ANCHORS:
 MAX. 5 3/4" FROM EACH CORNER (HEAD & SILL)
 MAX. 6" FROM EACH CORNER (JAMBS)
 MAX. SPACING AT HEAD & SILL: 13.000
 MAX. SPACING AT JAMBS: 13.125
- SHUTTER REQUIREMENT: NO SHUTTERS REQUIRED
- REFERENCE TEST REPORT: FTL-1889

 Robert L. Clark, P.E. PE #39712 Structural	Revisd By: F.K. Date: 10/11/0 Revisions: TB, TABLE, EXTR.
	Revisd By: D.B. Date: 8/18/98 Revisions:
	Drawn By: D.B. Date: 2/9/98
ELEVATION & PARTS LIST Title: ALUMINUM SINGLE HUNG WINDOW	
1070 TECHNOLOGY DRIVE NOKOMIS, FL 34275 P.O. BOX 1529 NOKOMIS, FL 34274	Series/Model: SH-701 Scale: NTS Sheet: 1 of 4. Drawing No. 4040 Rev. B



HORIZONTAL SECTION

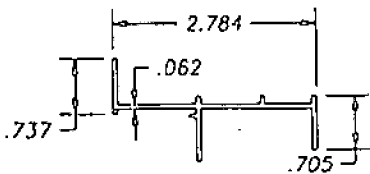
VERTICAL SECTION

REFERENCE TEST REPORT: FTL-1889

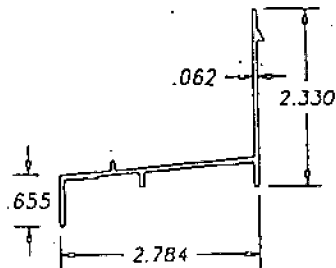
PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 02-0302.04
 Expiration Date 11/01/06
 By: *Michael Berman*
 Miami Dade Product Control
 Division
 7/11/02

PRODUCT REVISED
 ACCEPTANCE No. 01-0679.01
 EXPIRATION DATE: *Never*
10/11/01
 PRODUCT CONTROL DIVISION
 BUILDING CODE COMPLIANCE DIVISION

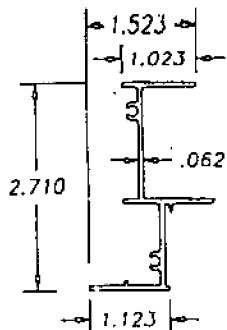
 10/14/01 Robert L. Clark, P.E. PE #39712 Structural		Revis: Dr. F.K. Date: 10/11/01 Revisions: TB, TABLE, EXTR.
	1070 TECHNOLOGY DRIVE HOKOMIS, FL 34275 P.O. BOX 1529 HOKOMIS, FL 34274	Revis: By: D.B. Date: 8/18/98 Revisions:
	Description: SECTIONS Title: ALUMINUM SINGLE HUNG WINDOW	Drawn By: D.B. Date: 2/9/98
Series/Model: SH-701		Scale: NTS Sheet: 2 of 4 Drawing No. 1010 Rev: B



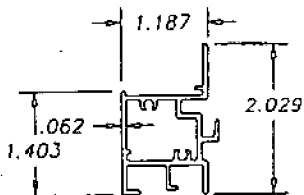
① ALUM. 6063-T5



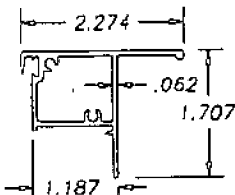
② ALUM. 6063-T5



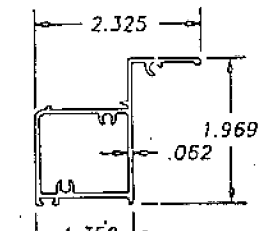
③ ALUM. 6063-T5



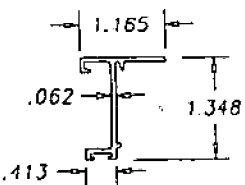
④ ALUM. 6053-T5



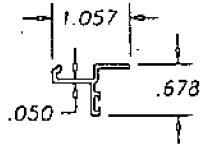
⑤ ALUM. 6063-T5



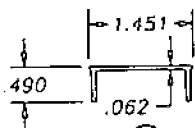
⑥ ALUM. 6063-T5



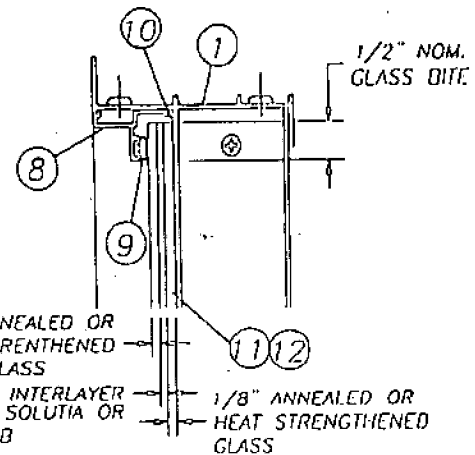
⑦ ALUM. 6063-T5



⑧ ALUM. 6063-T5



⑳ ALUM. 6063-T5



5/16" LAMINATED
GLAZING DETAILS

PRODUCT REVISED
to comply with the Florida
Building Code
Acceptance No. 02-0702.04
Expiration Date 11/01/04

By *Robert L. Clark*
Chief Code Product Control
Division
7/11/02

PRODUCT REVIEWED
ACCEPTED DATE 01-06-29-0
DESIGNED DATE 11/06/2001
By *Robert L. Clark*
Product Control Division
P.O. BOX 1329 NOKOMIS, FL 34274

 10/11/01 Robert L. Clark, P.E. P.E. #3712 Structural			Revised By: F.K. Date: 10/11/01 Revisions: TB, TABLE, EXTR.
	Revised By: D.B. Date: 8/18/98 Revisions:	Drawn By: D.B. Date: 2/9/98	Description: EXTRUSIONS & GLAZING OPTIONS
	Title: ALUMINUM SINGLE HUNG WINDOW		Series/Model: SH-701 Scale: NTS Sheet: 3 of 4 Drawing No. 1010 Rev. B

REFERENCE TEST REPORT: FTL-1889

Roof



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)

Monier Lifetile, LLC
135 NW 20th Street
Boca Raton, FL 33431

SCOPE:

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

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

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

DESCRIPTION: Flat Shake & Slate, Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Concrete Roof Tile

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 consists of pages 1 through 7.

The submitted documentation was reviewed by Frank Zuloaga, RRC



NOA No.: 02-1205.06
Expiration Date: 12/16/07
Approval Date: 01/02/03
Page 1 of 7

ROOFING ASSEMBLY APPROVAL

Category: Roofing
 Sub-Category: Flat Profile Roofing Tiles
 Material: Concrete

1. SCOPE

This renews a system using Monier Lifetile Flat Shake & Slate, Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Concrete Roof Tile, as manufactured Monier Lifetile LLC and described in Section 2 of this Notice of Acceptance. For locations where the pressure requirements, as determined by applicable Building Code does not exceed the design pressure values obtained by calculations in compliance with RAS 127 using the values listed in section 4 herein. The attachment calculations shall be done as a moment based system.

2. PRODUCT DESCRIPTION

<u>Manufactured by Applicant</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Monier Lifetile LLC Flat Shake and Slate Tile	l = 16½" w = 13" 1" thick	PA 112	Flat, interlocking, high pressure extruded concrete shake and slate roof tile equipped with two nail holes. For direct deck or battened nail-on, mortar or adhesive set applications.
Monier Lifetile LLC Sierra Shake™ Tile & Super Shake™ Tile	l = 17" w = 12 ⅜" 1" thick	PA 112	Flat, interlocking, high pressure extruded, concrete shake roof tile, with a textured top face, equipped with two nail holes. For direct deck or battened nail-on, mortar or adhesive set applications.
Monier Lifetile LLC Colonial Slate & Shingle Blend Tile	l = 17" w = 12 ⅜" 1" thick	PA 112	Flat, interlocking, high pressure extruded, concrete roof tile equipped with two nail holes. For direct deck or battened nail-on, mortar or adhesive set applications.
Trim Pieces	l = varies w = varies varying thickness	PA 112	Accessory trim, concrete roof pieces for use at hips, rakes, ridges and valley terminations. Manufactured for each tile profile.

2.1 SUBMITTED EVIDENCE:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Redland Technologies	7161-03 Appendix III	Static Uplift Testing PA 102 & PA 102(A)	Dec. 1991
The Center for Applied Engineering, Inc.	94-084	Static Uplift Testing PA 101 (Mortar Set)	May 1994
The Center for Applied Engineering, Inc.	94-060A	Static Uplift Testing PA 101 (Adhesive Set)	March, 1994



NOA No.: 02-1205.06
 Expiration Date: 12/16/07
 Approval Date: 01/02/03
 Page 2 of 7

The Center for Applied Engineering, Inc.	25-7094-2	Static Uplift Testing PA 102 (4" Headlap, Nails, Direct Deck, New Construction)	Oct. 1994
The Center for Applied Engineering, Inc.	25-7094-8	Static Uplift Testing PA 102 (4" Headlap, Nails, Battens)	Oct. 1994
The Center for Applied Engineering, Inc.	25-7094-5	Static Uplift Testing PA 102 (4" Headlap, Nails, Direct Deck, Recover/Reroof)	Oct. 1994
The Center for Applied Engineering, Inc.	25-7183-6	Static Uplift Testing PA 102 (2 Quik-Drive Screws, Direct Deck)	Feb. 1995
The Center for Applied Engineering, Inc.	25-7183-5	Static Uplift Testing PA 102 (2 Quik-Drive Screws, Battens)	Feb. 1995
The Center for Applied Engineering, Inc.	25-7214-1	Static Uplift Testing PA 102 (1 Quik-Drive Screw, Direct Deck)	March, 1995
The Center for Applied Engineering, Inc.	25-7214-5	Static Uplift Testing PA 102 (1 Quik-Drive Screw, Battens)	March, 1995
Redland Technologies	7161-03 Appendix II	Wind Tunnel Testing PA 108 (Nail-On)	Dec. 1991
Redland Technologies	Letter Dated Aug. 1, 1994	Wind Tunnel Testing PA 108 (Nail-On)	Aug. 1994
Redland Technologies	P0631-01	Wind Tunnel Testing PA 108 (Mortar Set)	July 1994
Redland Technologies	P0402	Withdrawal Resistance Testing of screw vs. smooth shank nails	Sept. 1993
The Center for Applied Engineering, Inc.	Project No. 307025 Test #MDC-77	Wind Driven Rain PA 100	Oct. 1994
Atlanta Testing & Engineering, Inc.	R1.894 R2.894 R3.894	Physical Properties PA 112	Aug. 1994
Professional Service Industries, Inc.	224-47099	Physical Properties PA 112	Sept. 1994
Celotex Corporation Testing Service	520109-1 520111-4	Static Uplift Testing PA 101	Dec. 1998
Celotex Corporation Testing Service	520191-1	Static Uplift Testing PA 101	March 1999
Walker Engineering, Inc.	Calculations	Acrodynamic Multiplier	March 1999
Walker Engineering, Inc.	Evaluation Calculations	25-7094	February 1996
Walker Engineering, Inc.	Evaluation Calculations	25-7496	April 1996



Walker Engineering, Inc.	Evaluation Calculations	25-7584 25-7804b-8 25-7804-4 & 5 25-7848-6	December 1996
Walker Engineering, Inc.	Evaluation Calculations	25-7183	March 1995
Walker Engineering, Inc.	Evaluation Calculations	Aerodynamic Multipliers	April 1999
Walker Engineering, Inc.	Calculations	Two Patty Adhesive Set System	April 1999

3. LIMITATIONS

- 3.1 Fire classification is not part of this acceptance.
- 3.2 For mortar or adhesive set tile applications, a static field uplift test shall be performed in accordance with RAS 106.
- 3.3 Applicant shall retain the services of a Miami-Dade County Certified Laboratory to perform quarterly test in accordance with TAS 112, appendix 'A'. Such testing shall be submitted to the Building Code Compliance Office for review.
- 3.4 Minimum underlayment shall be in compliance with the applicable Roofing Applications Standards listed section 4.1 herein.
- 3.5 30/90 hot mopped underlayment applications may be installed perpendicular to the roof slope unless stated otherwise by the underlayment material manufacturers published literature.
- 3.6 This acceptance is for wood deck applications. Minimum deck requirements shall be in compliance with applicable building code.

4. INSTALLATION

- 4.1 Monier Lifetile Flat Shake & Slate, Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Concrete Roof Tile and its components shall be installed in strict compliance with Roofing Application Standard RAS 118, RAS 119, and RAS 120.
- 4.2 Data For Attachment Calculations

Tile Profile	Weight-W (lbf)	Length-l (ft)	Width-w (ft)
Monier Lifetile Shake & Slate, Tile	10.8	1.38	1.08
Monier Lifetile Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Tile	11.1	1.42	1.03

Tile Profile	λ (ft ³)	λ (ft ³)
	Batten Application	Direct Deck Application
Monier Lifetile Shake & Slate, Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Tile	0.267	0.289



Tile Profile	3":12"		4":12"		5":12"		6":12"		7":12" or greater	
	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck
Monier Lifetile Shake & Slate, Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Tile	6.57	7.52	6.47	7.43	6.33	7.27	6.17	7.09	6.00	6.90

Tile Profile	Fastener Type	Direct Deck	Direct Deck	Battens
		(min 15/32" plywood)	(min. 19/32" plywood)	
Monier Lifetile Shake & Slate, Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Tile	2-10d Ring Shank Nails	30.9	38.1	17.2
	1-10d Smooth or Screw Shank Nail	7.3	9.8	4.9
	2-10d Smooth or Screw Shank Nails	14.0	18.8	7.4
	1 #8 Screw	30.8	30.8	18.2
	2 #8 Screw	51.7	51.7	24.4
	1-10d Smooth or Screw Shank Nail (Field Clip)	24.3	24.3	24.2
	1-10d Smooth or Screw Shank Nail (Eave Clip)	19.0	19.0	22.1
	2-10d Smooth or Screw Shank Nails (Field Clip)	35.5	35.5	34.8
	2-10d Smooth or Screw Shank Nails (Eave Clip)	31.9	31.9	32.2
	2-10d Ring Shank Nails ¹	50.3	65.5	48.3

¹ Installation with a 4" tile headlap and fasteners are located a min. of 2 1/2" from head of tile.

Tile Profile	Tile Application	Minimum Attachment Resistance
Monier Lifetile Shake & Slate, Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Tile	Adhesive	31.3 ³

² See manufacturers component approval for installation requirements.

³ Flexible Products Company TileBond Average weight per patty 13.9 grams. Polyfoam Product, Inc. Average weight per patty 8 grams.



Table 5A: Attachment Resistance Expressed as a Moment - M_r (ft-lbf) for Single Patty Adhesive Set Systems		
Tile Profile	Tile Application	Minimum Attachment Resistance
Monier Lifetile Shake & Slate, Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Tile	PolyPro™	118.9 ⁴
	PolyPro™	40.4 ⁵
4 Large paddy placement of 45 grams of PolyPro™.		
5 Medium paddy placement of 24 grams of PolyPro™.		

Table 5B: Attachment Resistance Expressed as a Moment - M_r (ft-lbf) for Mortar or Adhesive Set Systems		
Tile Profile	Tile Application	Attachment Resistance
Monier Lifetile Shake & Slate, Sierra Shake™ & Super Shake™, and Colonial Slate & Shingle Blend Tile	Mortar Set ⁶	43.9
6 Tile-Tite Roof Tile Mortar.		

5. LABELING

All tiles shall bear the imprint or identifiable marking of the manufacturer's name or logo, or following statement: "Miami-Dade County Product Control Approved".

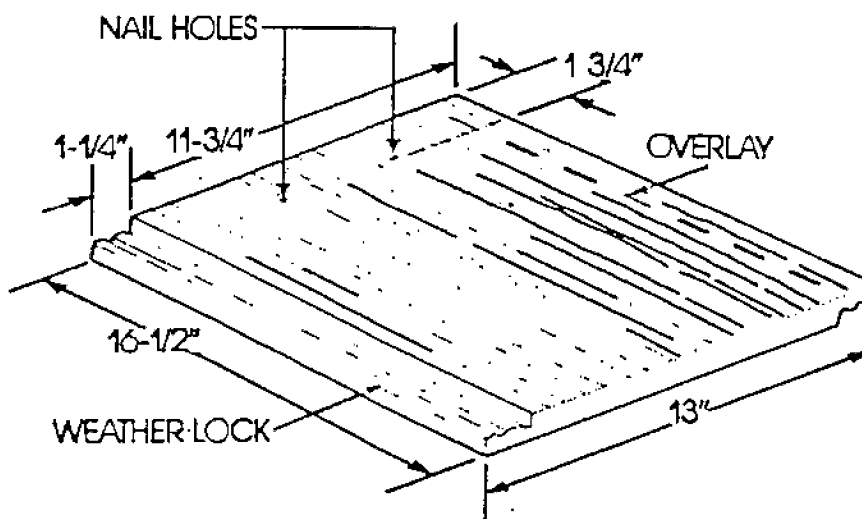
6. BUILDING PERMIT REQUIREMENTS

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

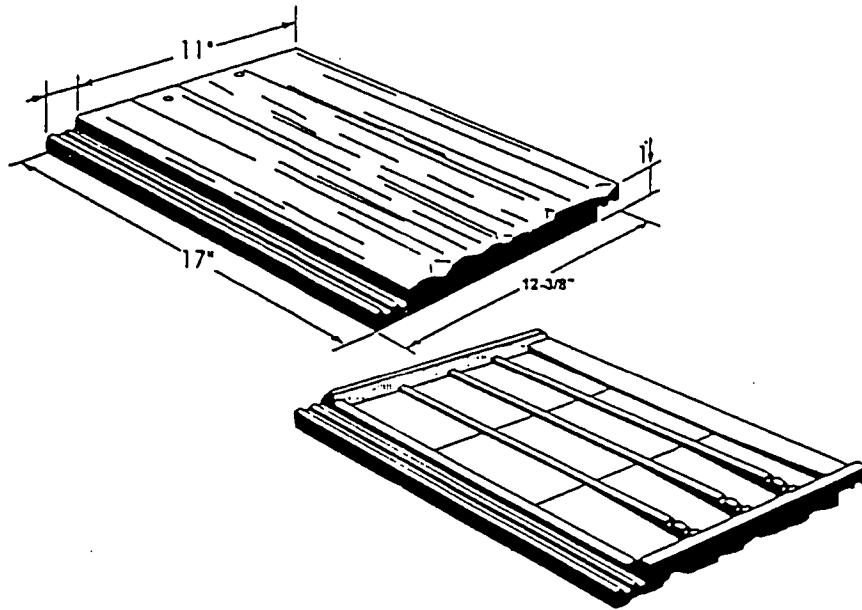
6.1.1 This Notice of Acceptance.

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

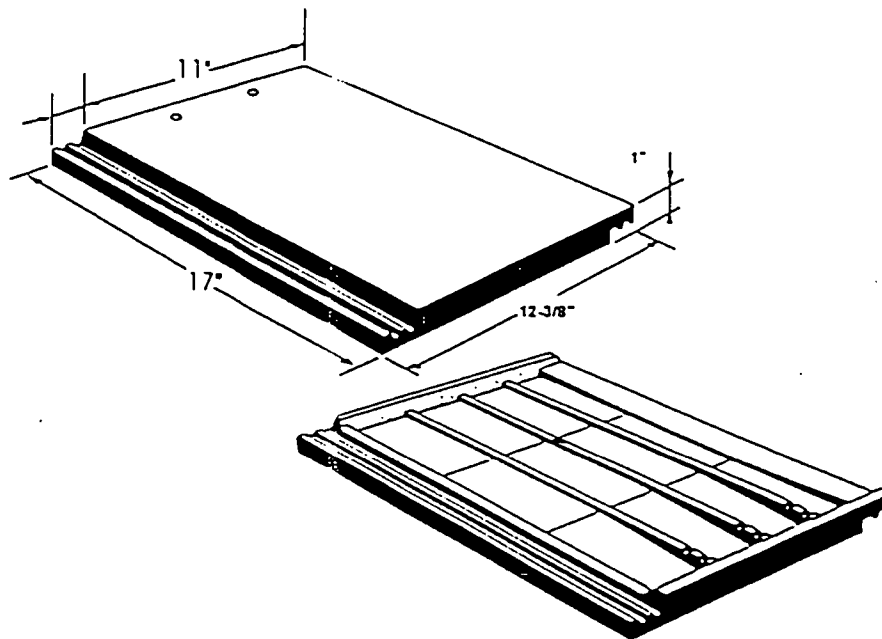
PROFILE DRAWINGS



MONIER LIFETILE SHAKE & SLATE CONCRETE ROOF TILE



MONIER LIFETILE SIERRA SHAKE & SUPER SHAKE CONCRETE ROOF TILE



MONIER LIFETILE COLONIAL SLATE & SHINGLE BLEND CONCRETE ROOF TILE

END OF THIS ACCEPTANCE



NOA No.: 02-1205.06
Expiration Date: 12/16/07
Approval Date: 01/02/03
Page 7 of 7

EAGLE ELECTRIC
11750 Appaloosa Ct.
Port St. Lucie FL 34987

873-6195 off. 260-0959 cell
873-6197 Fax

RECEIVED
JUL 30 2003
BY:

July 9, 2003

Township of Sewell's Point

Attention, Gene Simmons

I My name is Joseph A. Commorato. I am a Master Electrician, State Licensed contractor in the state of Florida - License # EC 0002750 and President of Eagle Electric Inc. Port St. Lucie. I have been asked by the office of Glenmark homes to give you my assurance that the changes on the home of Susan Roberts at 12 N. Ridgeway ^{view} which is a house in your jurisdiction will be able to be made under the current National Electric Code without having to upgrade the service. It is my opinion that the added 6 convince receptacles and 1 added fan will be able to be added without any ill affects to the present 200 amp service
Thank you very much

Sincerely,



Joseph A. Commorato

INSTALLATION

Installing Tongue and Groove Siding

Tongue and groove siding can be installed horizontally or vertically. In horizontal application, start at the bottom and work up with the groove edges facing downwards. Siding up to 6 in. wide can be blind nailed with one casing nail per bearing toe-nailed through the base of each tongue. Wider siding should be face nailed using two nails per bearing. Nails must penetrate 1-1/2 in. into solid wood (see Figure 6).

In vertical application, start at one corner with grooved edge toward the adjacent wall. Use a level or plumbline to ensure that the first board is installed vertically. The grooved edge of the first board may have to be trimmed to ensure a flush fit. Siding is nailed to horizontal blocking lines installed between studs or to furring strips (see Wall Construction). As with horizontal installation, pieces up to 6 in. can be blind nailed and wider pieces should be face nailed.

Installing Lap Siding

Lap siding can be installed horizontally or vertically. For horizontal applications, start with the bottom course and work up with the bevel sides of the channels pointing upwards. Allow a 1/8 in. expansion gap between pieces if the siding is air- or kiln-dried. Do not nail through overlaps. For siding up to 6 in. wide, use one nail one inch up from the lap. Face nail with two nails per bearing for 8 in. patterns and wider, keeping nails 2-1/2 to 3 in. apart to allow for dimensional movement without splitting (see Figure 7).

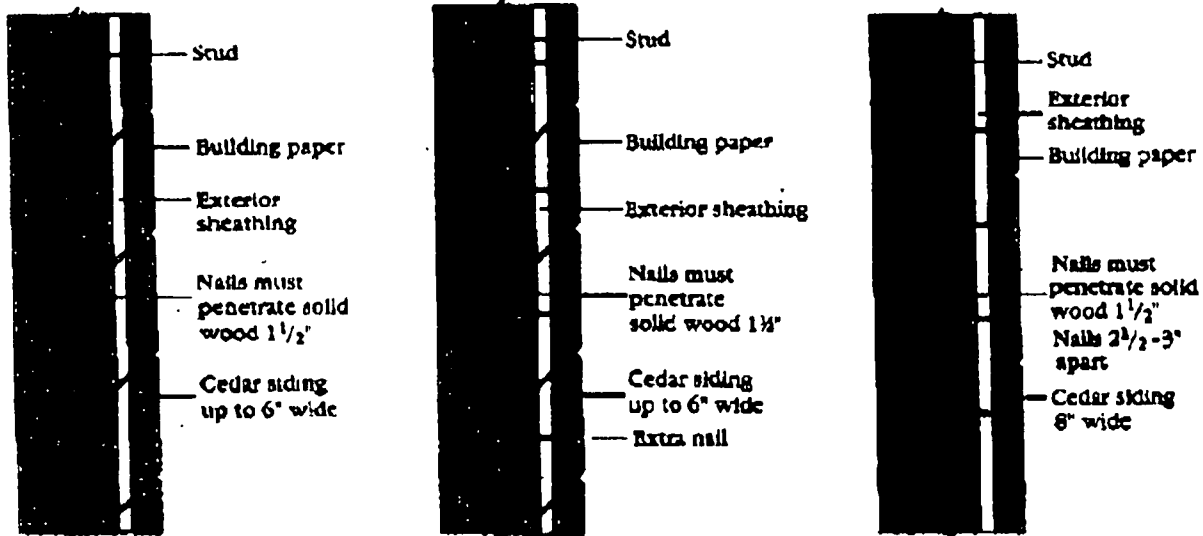
For vertical applications, siding should be nailed to horizontal blocking lines or furring strips (see Wall Construction).

Table 8. Tongue and Groove Siding Dimensions

Thickness (in.)	Nominal Width (in.)	Finished width (in.)
11/16	4, 6, 8	3-3/8, 5-3/8, 7-1/8
23/32	4, 6, 8	3-3/8, 5-3/8, 7-1/8

Table 9. Channel Siding Dimensions (Unseasoned)

Thickness (in.)	Nominal Width (in.)	Finished width (in.)
3/4	6, 8, 10	5-1/2, 7-3/8, 9-3/8
5/8	6, 8	5-1/2, 7-3/8



(A) 6" and narrower siding in normal climatic conditions

(B) 6" and narrower siding in hot, dry, windy or seacoast climates

(C) 8" and wider siding

Figure 6. Nailing T&G Siding

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 1-38-41-006-002-0070: 70000

NOTICE OF COMMENCEMENT

STATE OF Florida

COUNTY OF Martin

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

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

Lot 7 Block B Book 3 Page 35

GENERAL DESCRIPTION OF IMPROVEMENT: 160 SF addition to rear of home (den)

OWNER: _____

ADDRESS: 12 N Ridgeview Sewall's Pt. FL

PHONE #: 283-0744 **FAX #:** _____

CONTRACTOR: Glenmark Homes Inc

ADDRESS: PO Box 654 Stuart FL 34985

PHONE #: 225-7010 **FAX #:** 225-7010

SURETY COMPANY (IF ANY): _____

ADDRESS: _____

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

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

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

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

NAME: _____

ADDRESS: _____

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

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

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

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

Susan K. Roberts
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 3rd DAY OF June 2003 BY Susan K. Roberts

Rosalind M. Greer
NOTARY SIGNATURE



PERSONALLY KNOWN _____
OR PRODUCED ID _____
TYPE OF ID FL Drivers License

TOWN OF SEWALL' S POINT BUILDING DEPARTMENT

**Design Certification for Windload Compliance By Architect or Engineer of Record
(To be submitted with application and construction drawing for permit)**

PROJECT NAME AND ADDRESS

Tyrene Roberts
12 North Ridgeview

BUILDING DEPARTMENT USE ONLY

BLDG. PERMIT # _____
OCCUPANCY TYPE _____
CONSTRUCTION TYPE _____

STATEMENT

I certify that, to the best of my knowledge and belief, these plans and specification have been designed to comply with the applicable structural portion of the Building Codes as amended, adopted, and enforced the Town of Sewall's Point Building Department. I also certify that the structural components, systems, and related elements provide adequate resistance to the wind loads and forces specified by the current Code provisions. I hereby accept responsibility for the structural design.

BUILDING PARAMETERS AND ANALYSIS

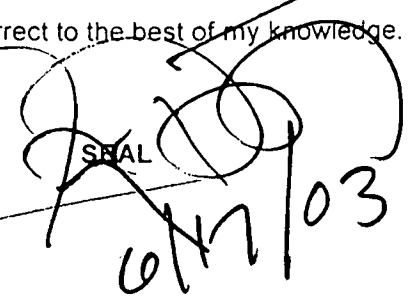
**CODE EDITIONS: 2001 FLORIDA BUILDING CODE
CHAPTER 6 OF ASCE 7- 98**

Building Design as: Partially Enclosed _____ Enclosed Open _____ Wind Tunnel Test _____
 Basic Wind Speed: 140 MPH 3 Second Gusts Importance/Use Factor 1.0
 Velocity Pressure 33.2 psf Garage Door Design Pressure N/A (psf) (End Zone) _____ +psf _____ +psf
 Door Design Pressure (Int. Zone) _____ +psf _____ -psf (End Zone) _____ +psf _____ -psf
 Window Design Pressure (Int. Zone) +34 +psf -45 -psf (End Zone) _____ +psf _____ -psf
 Minimum Soil Bearing Pressure 2500 lbs/psf Exposure B Mean Building Height 630'
 Floor Loads N/A Roof Dead Load 20 psf Shear Wall Considered Yes _____ No _____
 Continuous Load Path Provided Yes _____ No _____
 Components and Cladding Details Provided Yes _____ No _____
 Impact Protection (Exterior Openings): Approved Shutters _____ Impact Resistance Glass
(Must be indicated on permit documents for all residential/commerical buildings, alterations and renovations)

NOTE: ACTUAL DESIGN PRESSURES FOR ALL EXTERIOR WINDOWS, DOORS, GARAGE DOORS, AND SIMILAR ENVELOPE ELEMENTS MUST ALSO BE INDICATED ON CONSTRUCION PLANS.

As witnessed by my seal, I hereby certify that the above information is true and correct to the best of my knowledge.

NAME: Joseph P. McCarty
 CERTIFICATION# 141039
 DATE: 6/17/03
 DESIGN FIRM: Jos P McCarty Architect

SEAL

6/17/03

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION
FORM 600C-01 Residential Limited Applications Prescriptive Method C SOUTH 7 8 9
 Small Additions, Renovations & Building Systems

Compliance with Method C of Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600C-01 for additions of 600 square feet or less, site-installed components of manufactured homes, and renovations to single and multifamily residences. Alternative methods are provided for additions by use of Form 600B-01 or 600A-01.

PROJECT NAME: AND ADDRESS:	<u>12 W Ridgeview</u>	BUILDER:	PERMITTING OFFICE:	CLIMATE ZONE:	7 <input checked="" type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/>
OWNER:	<u>Tylene Roberts</u>	PERMIT NO.:	JURISDICTION NO.:		

SMALL ADDITIONS TO EXISTING RESIDENCES (600 Square feet or less of conditioned area). Prescriptive requirements in Tables 6C-1, 6C-2 and 6C-3 apply only to the components of the addition, not to the existing building. Space heating, cooling, and water heating equipment efficiency levels must be met only when equipment is installed specifically to serve the addition or is being installed in conjunction with the addition construction. Components separating unconditioned spaces from conditioned spaces must meet the prescribed minimum insulation levels. RENOVATIONS (Residential buildings undergoing renovations costing more than 30% of the assessed value of the building). Prescriptive requirements in Tables 6C-1 and 6C-2 apply only to the components and equipment being renovated or replaced. MANUFACTURED HOMES AND BUILDINGS. Only site-installed components and features are covered by this form. BUILDING SYSTEMS Comply when complete new system is installed.

Please Print CK

1. Renovation, Addition, New System or Manufactured Home
2. Single family detached or Multifamily attached
3. If Multifamily—No. of units covered by this submission
4. Conditioned floor area (sq. ft.)
5. Predominant eave overhang (ft.)
6. Glass area and type:
 - a. Clear glass
 - b. Tint, film or solar screen
7. Percentage of glass to floor area
8. Floor type and insulation:
 - a. Slab-on-grade (R-value)
 - b. Wood, raised (R-value)
 - c. Wood, common (R-value)
 - d. Concrete, raised (R-value)
 - e. Concrete, common (R-value)
9. Wall type and insulation:
 - a. Exterior:
 1. Masonry (Insulation R-value)
 2. Wood frame (Insulation R-value)
 - b. Adjacent:
 1. Masonry (Insulation R-value)
 2. Wood frame (Insulation R-value)
 - c. Marriage Walls of Multiple Units* (Yes/No)
10. Ceiling type and insulation:
 - a. Under attic (Insulation R-value)
 - b. Single assembly (Insulation R-value)
11. Cooling system*
(Types: central, room unit, package terminal A.C., gas, existing, none)
12. Heating system*: (Types: heat pump, elec. strip, natural gas, L.P. gas, gas h.p., room or PTAC, existing, none)
13. Air Distribution System*:
 - a. Backflow damper or single package systems* (Yes/No)
 - b. Ducts on marriage walls adequately sealed* (Yes/No)
14. Hot water system:
(Types: elec., natural gas, other, existing, none)

1.	<u>Addition</u>		_____
2.	_____		_____
3.	_____		_____
4.	<u>1160</u>		_____
5.	<u>3</u>		_____
6a.	Single Pane	Double Pane	_____
6b.	<u>0</u> sq. ft.	_____ sq. ft.	_____
7.	<u>0</u> %	_____ %	_____
8a.	R= <u>0</u>	<u>15</u> lin. ft.	_____
8b.	R= _____	_____ sq. ft.	_____
8c.	R= _____	_____ sq. ft.	_____
8d.	R= _____	_____ sq. ft.	_____
8e.	R= _____	_____ sq. ft.	_____
9a-1	R= _____	_____ sq. ft.	_____
9a-2	R= _____	_____ sq. ft.	_____
9b-1	R= _____	_____ sq. ft.	_____
9b-2	R= <u>11</u>	<u>135</u> sq. ft.	_____
9c	_____	_____	_____
10a.	R= <u>30</u>	<u>180</u> sq. ft.	_____
10b.	R= _____	_____ sq. ft.	_____
11.	Type: _____	_____	_____
	SEER/EER: _____	_____	_____
12.	Type: _____	_____	_____
	HSPF/COP/AEUF: _____	_____	_____
13a.	_____	_____	_____
13b.	_____	_____	_____
14.	Type: _____	_____	_____
	EF: _____	_____	_____

Handwritten signature: Tylene Roberts

I hereby certify that the plans and specifications covered by the calculation are in compliance with the Florida Energy Code.	Review of plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed, this building will be inspected for compliance in accordance with Section 553.908, F.S.
PREPARED BY: _____ DATE: <u>10/11/03</u>	BUILDING OFFICIAL: _____
I hereby certify that this building is in compliance with the Florida Energy Code.	DATE: _____
OWNER AGENT: _____ DATE: _____	

TABLE 6C-1. PRESCRIPTIVE REQUIREMENTS FOR SMALL ADDITIONS (600 Sq. Ft. and Less), RENOVATIONS TO EXISTING BUILDINGS AND SITE-INSTALLED COMPONENTS OF MANUFACTURED HOMES.

COMPONENT		MINIMUM INSULATION	INSULATION INSTALLED	EQUIPMENT	MINIMUM EFFICIENCY	INSTALLED EFFICIENCY
WALLS	Concrete Block	R-5	R-11	COOLING	Central A/C - Split Single Pkg. Room unit or PTAC	SEER = 10.0
	Frame, 2' x 4'	R-11				SEER = 9.7
	Frame, 2' x 6'	R-19				EER = 8.5
	Common, Frame	R-11				
	Common, Masonry	R-3				
CEILING	Under Attic	R-30	R-30	SPACE HEATING	Electric Resistance Heat pump - Split Single Pkg. Room unit or PTHR	ANY
	Single Assembly; Enclosed	R-19				HSPF = 6.8
	Frame	R-13				HSPF = 6.6
	Metal Pans	R-10				COP = 2.7
	Single Assembly; Open	R-11				
FLOORS	Slab-on-grade	No Minimum	0.0	HOT WATER	Electric Resistance Gas; Natural or L.P. Fuel Oil	AFUE = .78
	Raised Wood	R-11				AFUE = .78
	Raised Concrete	R-5				EF = .88
	Common, Frame	R-11				EF = .54
DUCT	In unconditioned space	R-6	R-6			EF = .54
	In conditioned space	No minimum				

TABLE 6C-2: PRESCRIPTIVE REQUIREMENTS FOR GLASS AREAS IN ADDITIONS ONLY

See Table 6-3, 6-7

Maximum percentage glass to floor area allowed is selected by type, overhang length, and solar heat gain coefficient. Maximum % = Installed % =

GLASS TYPE, OVERHANG, AND SOLAR HEAT GAIN COEFFICIENT REQUIRED FOR GLASS PERCENTAGE ALLOWED							
UP TO 20%		UP TO 30%		UP TO 40%		UP TO 50%	
Single	Double	Single	Double	Single	Double	Single	Double
OH - SHGC	OH - SHGC	OH - SHGC	OH - SHGC	OH - SHGC	OH - SHGC	OH - SHGC	OH - SHGC
1' .87	0' .78	2' .87	1' .78	3' .87	2' .78	4' .87	3' .78
0' .75		1' .75	0' .61	2' .75	1' .61	3' .75	2' .61
		0' .57		1' .57	0' .44	2' .57	1' .44
				0' .39		1' .39	0' .35
						0' .30	

Get certified SHGC from the manufacturer or use defaults: Single clear SHGC = .87, double clear SHGC = .78, and single tint SHGC = .75.

TABLE 6C-3 MINIMUM REQUIREMENTS FOR ALL PACKAGES

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Exterior Joints & Cracks	606.1	To be caulked, gasketed, weather-stripped or otherwise sealed.	
Exterior Windows & Doors	606.1	Max. 0.3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area.	✓
Sole & Top Plates	606.1	Sole plates and penetrations through top plates of exterior walls must be sealed.	✓
Recessed Lighting	606.1	Type IC rated with no penetrations (two alternatives allowed).	✓
Multi-story Houses	606.1	Air barrier on perimeter of floor cavity between floors.	✓
Exhaust Fans	606.1	Exhaust fans vented to unconditioned space shall have dampers, except for combustion devices with integral exhaust ductwork.	n/a
Combustion Heating	606.1	Combustion space and water heating systems must be provided with outside combustion air, except for direct vent appliances.	n/a
Water Heaters	612.1	Comply with efficiency requirements in Table 6-12. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required for vertical pipe risers.	n/a
Swimming Pools & Spas	612.1	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have minimum thermal efficiency of 78%.	n/a
Hot Water Pipes	612.1	Insulation is required for hot water circulating systems (including heat recovery units).	n/a
Shower Heads	612.1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	n/a
HVAC Duct Construction, Insulation & Installation	610.1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated and installed in accordance with the criteria of Section 610.1. Ducts in attics must be insulated to a minimum of R-6.	✓
HVAC Controls	607.1	Separate readily accessible manual or automatic thermostat for each system.	✓

GENERAL DIRECTIONS:

- On Table 6C-1 indicate the R-value of the insulation being added to each component and the efficiency levels of the equipment being installed. All R-values and efficiencies installed must meet or exceed the minimum values listed. Components and equipment neither being added nor renovated may be left blank.
- ADDITIONS ONLY. Determine the percentage of new glass to conditioned floor area in the addition as follows. Total the areas of all glass windows, sliding glass doors and glass door panels. Double the area of all non-vertical roof glass and add it to the previous total. When glass in existing exterior walls is being removed or enclosed by the addition, an amount equal to the total area of this glass may be subtracted from the total glass area. Divide the adjusted glass area total by the conditioned floor area of the addition. Multiply by 100 to get the percent. Find the largest glass percentage under which your calculated percentage falls on Table 6C-2. Prescriptives are given by the type of glass (Single or Double pane) and the overhang (OH) paired with a solar heat gain coefficient (SHGC). For a given glass type and overhang, the minimum solar heat gain coefficient allowed is specified. Actual glass windows and doors previously in the exterior walls of the house and being reinstalled in the addition do not have to comply with the overhang and solar heat gain coefficient requirements on Table 6C-2. All new glass in the addition must meet the requirement for one of the options in the glass percentage category you indicated. The overhang (OH) distance is measured perpendicularly from the face of the glass to a point directly under the outermost edge of the overhang does not extend further than 8 feet from the overhang. Glass areas being renovated that do not meet this criteria must be either single-pane tinted, double-pane clear or double-pane tinted.
- RENOVATIONS ONLY. Replacement glass needs to meet the following requirements. Any glass type and solar heat gain coefficient may be used for glass areas which are under at least a two foot overhang and whose lowest edge does not extend further than 8 feet from the overhang.
- BUILDING SYSTEMS. Comply when new system is installed for system installed.
- Complete the information requested on the top half of page 1.
- Read "Minimum Requirements for Small Additions and Renovations", Table 6C-3, and check all applicable items.
- Read, sign and date the "Owner/Agent" certification statement on page 1.

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

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

Application form must contain the following information:

1. Property Appraisers Parcel Number or Property Control Number
2. Legal Description of property (Can be found on your deed survey or Tax Bill)
3. Contractors name, address, phone number and license numbers.
4. Name all sub-contractors (properly licensed)
5. Architects or Engineers name, address, & phone number.
6. Estimated cost of construction.
7. Original signature of owner and notarized
8. Original signature of Contractor and notarized.

Submittals (2 copies)

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

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

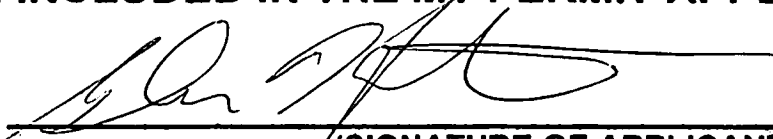
The following documents must be signed and sealed by a registered Architect or Engineer. (2 copies)

1. **Plot/Site plan containing the following information:**
 - a. Location of all structures proposed and existing along with dimensions
 - b. Location of driveway and turnabouts with dimensions
 - c. Walkways and planters
 - d. Location of all fences
 - e. Location of all docks
 - f. Location of all accessory buildings or structures
 - g. Setback requirements
 - h. Easements
 - i. All encroachments into setbacks
 - j. Location of existing septic, wells, retention areas
 - k. Flood Zone line or lines in relationship to structures proposed or existing
 - l. Elevations at three points along front of residence and at crown-of-road
 - m. Stormwater retention areas
 - n. Drainage Arrows
 - o. Computation of pervious and impervious areas
 - p. Desired finish floor elevation relative to Sea Level
2. **Floor Plan containing the following information:**
 - a. Square footage calculations
 - b. Scale – minimum 1/4" per foot
 - o. All proposed and existing layouts of structures
 - p. Location of all pads/porches and patios
 - q. All dimensions exterior and interior to define design and construction
 - r. Room callouts
 - s. Elevations, steps, ramps, curbs, dashed outline for second story outline
 - t. Location of all windows and doors with egress requirements
 - u. Location of all bathroom fixtures
 - v. Location of all kitchen fixtures
 - w. Water heater location
 - x. Attic access with side of opening
 - y. Beam callouts
 - z. All through wall or ceiling ventilation such as garage vents, dryer vent etc.

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

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

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



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: 6/23/03

RESUBMITTAL CRITIQUE

Owner: Susan Roberts

Date: July 30, 2003

Contractor: Glen Mark Homes

Contractor's Phone Number: 225-7010

Plan Reviewer: Edwin B. Arnold

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITALS FOR ADDITION (DEN) LOCATED AT 12 NORTH RIDGELAND DRIVE

Submittals (2 copies)

1. Current survey (**within one year, two copies**) signed and sealed by surveyor containing the following information:
 - a. Survey format must comply w/Town Requirements (Ord. 80-27):
 - (1) Paper shall be standard 24 inches high by 36 inches wide.
 - (2) Scale shall be largest standard engineering scale, which will fit on the paper defined in (1) above).

SUPPLEMENTAL NOTE TO APPLICANT:

This requirement also applies to zoning variance applications. See:

Town of Sewall's Point Administrative Variance Application – Item 6 F.

CRITIQUE

7/29/03 REVISED
CRITIQUE SUBMITTALS

Owner: Susan Roberts

Date: June 25, 2003

Contractor: Glen Mark Homes

Contractor's Phone Number: 225-7110

Plan Reviewer: Gene Simmons

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS
FOR ADDITION (DEN) LOCATED AT 12 NORTH RIDGELAND DRIVE

Submittals (2 copies)

1. Current survey (**within one year, two copies**) signed and sealed by surveyor containing the following information:
 - a. Location of all structures proposed and existing along with dimensions ✓
 - b. Location of all accessory buildings or structures ✓
 - c. Setback requirements ✓
 - d. Easements ✓
 - e. All encroachments into setbacks must be dimensioned, i.e. a/c pad, pool equipment and shed ✓
 - f. Computation of pervious and impervious areas ✓
 - g. All encroachments must be abated or variances received prior to issuance of building permit. You will need to move shed and move or receive variances for a/c pad and pool equipment — APPLICATION SUBMITTED
- Product approvals (**current**) from Miami/Dade or other testing institutes approved by the Florida Building Code for the following items:
 - a. OK Need window product approval for window, you submitted window mullion product approval (must say impact or need product approval for shutters) ✓
 - b. OK Siding
 - c. OK Roof Material
3. OK Need health department approval for addition

REVISED SURVEY NOT IN COMPLIANCE W/ORD. REG. SHEET SIZE/SCALE 2ND GRADING PUBLISHED

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

1. Electrical Plan containing the following information:
 - a. OK Need letter from electrician stating existing panel large enough to carry additional loads REVD
 - b. OK Receptacles missing on bedroom side of new den REVISION - BUILT IN BOOKSHELF OUTLET NOT REQ'D
2. Heating/Air Conditioning Plan containing the following information:
 - a. OK Need letter from air conditional contractor stating existing system large enough to carry addition loads REVD
 - b. OK Need duct size and register size REVD new PTC PLAN w/DOES/REGISTER REVD.

RECEIVED
JUL 29 2003
BY: _____

CRITIQUE

Owner: Susan Roberts
Contractor: Glen Mark Homes
Contractor's Phone Number: 225-7110

Date: June 25, 2003
Plan Reviewer: Gene Simmons

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR ADDITION (DEN) LOCATED AT 12 NORTH RIDGELAND DRIVE

Submittals (2 copies)

1. Current survey (**within one year, two copies**) signed and sealed by surveyor containing the following information:
 - a. Location of all structures proposed and existing along with dimensions
 - b. Location of all accessory buildings or structures
 - c. Setback requirements
 - d. Easements
 - e. All encroachments into setbacks must be dimensioned, i.e. a/c pad, pool equipment and shed
 - f. Computation of pervious and impervious areas
 - g. All encroachments must be abated or variances received prior to issuance of building permit. You will need to move shed and move or receive variances for a/c pad and pool equipment

12. Product approvals (**current**) from Miami/Dade or other testing institutes approved by the Florida Building Code for the following items:

- a. Need window product approval for window, you submitted window mullion product approval (must say impact or need product approval for shutters) ✓
- X - - b. Siding 1x6 T&G cedar pine
- X - - c. Roof Material - concrete tile

3. Need health department approval for addition

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

1. Electrical Plan containing the following information:
 - X a. Need letter from electrician stating existing panel large enough to carry additional loads
 - b. Receptacles missing on bedroom side of new den
2. Heating/Air Conditioning Plan containing the following information:
 - X a. Need letter from air conditional contractor stating existing system large enough to carry addition loads
 - b. Need duct size and register size

873-6197

Joe Fax

Address - Name

Phill - jet letter

XE 900 TTD 718 ~~000~~^{A1}0000

Trane

York Stellar Plus

140 HOGSOGA

Forward ~~AK~~ + Elect.

221-1600

6429

OWNER'S AFFIDAVIT OF BUILDING COSTS

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

**STATE OF FLORIDA
MARTIN COUNTY**



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

1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 23,000.⁰⁰.
4. That this Affidavit is made for the purpose of inducing the Building Official of the Town to issue a Certificate of Occupancy for the improvements, with the intention that it be relied upon for that purpose.

Affidavit's Signature:

Susan K. Roberts

Property Address:

12 N. Ridgeway Rd.

Stuart, FL 34996

SWORN TO and subscribed before me this 3rd day of June, 2003, by Susan K. Roberts, who is personally known to me or produced FL Drivers License as identification.

Rosalind M. Green

Notary Public

My commission expires: _____

(Notary Seal)





6429

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 12 N. RIDGEVIEW

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

FINAL

EXPOSED WIRE MUST BE
IN COVERED JUNCTION BOX
OR FIXTURE INSTALLED.

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: 3/31

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/31, 2004 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5617	ABBOTT	REEROOF FINAL	PASS	CLOSE
10	108 N. SEWALL'S PT WILSON			INSPECTOR:
6581	LASKY	SLAB	PASS	
1	27 W. HIGH POINT SEAGATE BLDGS	FOUR TIMES		INSPECTOR:
6640	SEILER	FENCE	---	NO PERMIT
9	5 KINGSTON CT STUART FENCE			NO ONE HOME INSPECTOR:
6479	ROBERTS	FINAL ADDITION	FAIL	
12	12 N. RIDGEVIEW GLENMARK			INSPECTOR:
5998	CAPLAN	FENCE FINAL	PASS	CLOSE
2	10 E. HIGH POINT UNITED			INSPECTOR:
533	BARRETT	FENCE FINAL	PASS	OWNER NOT HOME
7	23 N. VIA LUCINDIA UNITED			CLOSE INSPECTOR:
TREE	DEULS	TREE	PASS	
8	21 LANTANA			INSPECTOR:
OTHER:	7 SIMARA - TREE CUT W/O PERMIT			

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9/26, 2003 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6429	ROBERTS	SLAB	PASS	
	12 N. RIDGEVIEW			
	GUEN MACK			INSPECTOR:
6131	PFEIFFER	INSULATION	PASS	
	104 HENRY SEWALL WAY			
	BUFORD			INSPECTOR:
6289	M. STE		PASS	GATE
	21 ISLAND ROAD	DRIVEWAY, GATE		FOOTERS
	GULICK & McLAUGHLIN	COLUMNS + FOOTERS		INSPECTOR:
6388	GOVEL	CONCRETE PAV	PASS	Ratio Deck
	5 RIVERVIEW			
	O/B			INSPECTOR:
TREE	CLEMENTS	TREE		
	11 W. HIGH POINT		REPEAT FOR	9/29/03
				INSPECTOR:
6232	MOORE	TIE BEAM	PASS	HOUSE BUMP OUT
	5 OAK HILL			WALL CAP
	ARC HOMES			INSPECTOR:
6231	ROTHOFF	FINAL PAV	PASS	CLOSE
	20 RIVERVIEW	DRIVEWAY		FILE
	CHITWOOD			INSPECTOR:
OTHER:	11 RIVERVIEW	CONTR. CHECK		

TOWN OF SEWALL'S POINT

Building Department - Inspection Log




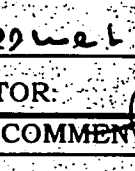


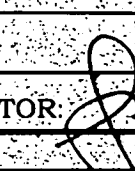
Date of Inspection: Mon Wed Fri 10/3, 2003 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5185	JONES 14 HERON'S NEST O/B	PLUMBING	Pass	Shower Pan URINALS TEST INSPECTOR: PAUL
TREE	DIPPY 38 E. HIGH POINT	TREE	Pass	NO TREE DISCUSSED INSPECTOR: PAUL
6330	BUSSEY 1 PALMETTO PACIFIC ROOFING	TIN TAG	Pass	INSPECTOR:
5937	FOSTER 128 S. SEWALLISH PARKS	POWER REL	FAIL	NOT READY INSPECTOR:
5960	LEWIS 43 RIO VISTA DRIFTWOOD	BLDG FINAL	Pass	EPL CARD TO BE DELIVERED INSPECTOR:
6294	SHEETS 7 KNOWLES RD LAWRENCE	FENCE FINAL	Pass	CLOSE FILE INSPECTOR:
6429	ROBERTS 12 N. RIDGEVIEW CAREN MARK HOMES	TRUSS ENG. SHEATHING	Pass	WALL SHEATHING INSPECTOR:
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log



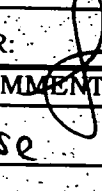
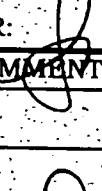
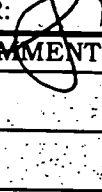

Date of Inspection: Mon Wed Fri 10/15, 20023 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6436	LIZARS	Sub Area Sub Area	Passed	
(11)	4 ISLAND ROAD TREAS COAST CARP	& TRUSS REPAIR		INSPECTOR: 
6447	COTLER	PLUMBING	Passed	
(12)	600 S. RIVER RD TREAS COAST CARP	Rough		INSPECTOR: 
6351	TAYLOR	FRAMING	Passed	
(9)	22 E HIGH POINT NAVARO & MAGGAY			INSPECTOR: 
5734	ABESADA	ELEC POWER	Passed	Subject to signed
(8)	8 MORGAN CIRCLE CONWAY	RELEASE		agreement INSPECTOR: 
6350	LUBINA	FINAL ELEC +	Passed	1100
(13)	10 N. VIA LUCINDIA ABACO BUILDERS	POWER (late as possible)		INSPECTOR: 
6409	ROBERTO	FRAMING	Passed	
(7)	12 N. RIDGEVIEW GLEN MARK HOMES	ELECTRIC ROOF	Passed	INSPECTOR: 
6413	POWERS	COLUMNS	Passed	
(13)	705 SEWALLS PT FLORIDAS FINEST			INSPECTOR: 
OTHER: _____				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

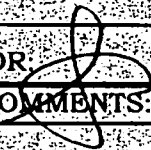
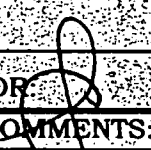




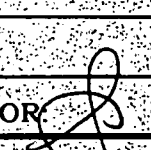
Date of Inspection: Mon Wed Fri 10/17, 2008/3 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5919	Buee 21 RIVERVIEW O/B	COURTESY ELECTRICAL		Cancelled by Contr. INSPECTOR: 
TRFEE	SALLY 3 OAKWOOD	TREE	Passal	 INSPECTOR: 
6429	ROBERTS 12 N. RIDGEVIEW GLEN MARIE	INSULATION	Passal	 INSPECTOR: 
6350	LUBINA 10 N. VIALUCINDIA ABACO BUILDERS	FINAL RENOV.	Passal	→ close INSPECTOR: 
5875	MAXSON 9 S. RIVER LIBERTY ELEC	FINAL ELEC	Passal	 INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5002	SMITH 133 S. RIVER RD MACALI	FINAL SFR	Passal	→ close INSPECTOR: 
OTHER: 				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12/10, 2003 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	GAIL	TREE	Pass	
(11)	135 S. RIVER			INSPECTOR: 
6476	CINIELLO	WINDOW BUGS		
(2)	31 FIELDWAY O/B	E/Plumbing Rough Roofing	Passed	INSPECTOR: 
6525	HAYNES	SHEDDING	Passed	
(6)	6 Palm Road DAN BUTCHER ROOFING	FEN TAG		INSPECTOR: 
6327	PFEIFFER	Pool Deck	Passed	
(9)	104 HENRY SEWALL ADVANTAGE POOL			INSPECTOR: 
6429	ROBERTS	DRY IN	Passed	
(12)	42 N. RIDGEVIEW PACIFIC			INSPECTOR: 
6406	PELICAN GROUP	POWER RELEASE	Passed	
(8)	142 S. SEWALL'S PT OLIVER ELECTEK			INSPECTOR: 
TREE	UTRATA	TREES	Passed	
(20)	117 N. SEWALL'S PT RD			INSPECTOR: 
OTHER: _____				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/2, 2004 Page 1 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6261	SMITH	INSULATION	PASS	
1	7 SIMORA SUNRISE CONST			INSPECTOR: <i>[Signature]</i>
6653	H BASSOC	FRAMING	FAIL	
110	3760 OCEAN ROY J ANDREAU			INSPECTOR: <i>[Signature]</i>
6600	BURGESS QUINN	FINAL SUG DE	PASS	MAKE
2	98 S. SEWALLS Pt RD EAST COAST ALUM			INSPECTOR: <i>[Signature]</i>
6625	BURGESS-QUINN	FINAL SUG DE'S	PASS	CLOSE
2	98 S. SEWALLS Pt RD EAST COAST ALUM.			INSPECTOR: <i>[Signature]</i>
6277	WILBERDING	ROUGH GAS	PASS	
8	2 PALAMA WAY FERRELL GAS			INSPECTOR: <i>[Signature]</i>
TREE	BRUSH	TREE	PASS	
3	2 MINDOCO ST			INSPECTOR: <i>[Signature]</i>
6429	ROBERTS	FINAL ADDITION	PASS	CLOSE
13	12 N. RIDGEVIEW GLENMARK HOMES			INSPECTOR
OTHER:				

7513
REROOF

APR 20 2005

Permit Number: _____

Town of Sewall's Point BUILDING PERMIT APPLICATION

BY: _____

OWNER/TITLEHOLDER NAME: Susan K Roberts Phone (Day) 772-233-0744 (Fax) 772-220-3186

Job Site Address: 12 N. Ridgeview Road City: Shawnee State: FL Zip: 34996

Legal Description of Property: HomeWood Ld + 7 Blk B Parcel Number: 01-38-41-006-002-00070-7

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

Description of Work To Be Done: re-roof

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

CONTRACTOR/Company: Cardinal Roofing Phone: 772-335-9500 Fax: 772-335-9584

Street: 1601 SES Niemeyer Circle City: PSL State: FL Zip: 34952

State Registration Number: CCC032513 State Certification Number: CCC032513 Martin County License Number: 1991-520-118

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 39,000.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: NA State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: FL License Number: CCC032513

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: _____

Carpport: _____ Total Under Roof 3900 SF 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

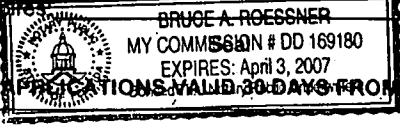
I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.


OWNER OR AGENT SIGNATURE (required)
Susan K Roberts
 State of Florida, County of: MARTIN
 This the 18 day of April, 2005
 by SUSAN K. ROBERTS who is personally
 known to me or produced
 as identification. Bruce A. Roessner

CONTRACTOR SIGNATURE (required)
Brad S. Hogan
 On State of Florida, County of: MARTIN
 This the 19th day of April, 2005
 by BRAD S. HOGAN who is personally
 known to me or produced
 as identification. Bruce A. Roessner

Notary Public

Notary Public

My Commission Expires: _____

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

My Commission Expires: _____

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

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/04/2005

PRODUCER 732-758-6000 FAX 732-359-1990
Conover Beyer Associates, Inc.
36 Monmouth Street - 2nd Floor
Red Bank, NJ 07701

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

INSURED ~~Cardinal Roofing & Siding Co., Inc.~~
~~1601 S.E. South Niemeyer Circle~~
Port St. Lucie, FL 34952

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: United States Fire Ins. Co.	
INSURER B: Commerce & Industry/AIG	
INSURER C: Admiral Insurance Company	
INSURER D: Crum & Forster Specialty Insurance Co.	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTAND 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	DD/INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
D		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Blnkt addt'l insd	GLO-080950	03/03/2005	03/03/2006	EACH OCCURRENCE	\$ 1,000,000
		DAMAGE TO RENTED PREMISES (Ea occurrence)				\$ 50,000	
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	1336691745	01/01/2005	01/01/2006	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
		BODILY INJURY (Per person)				\$	
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION				OTHER THAN AUTO ONLY: EA ACC	\$
B		WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC9683618 OFFICERS ARE INCLUDED	01/01/2005	03/06/2005	E.L. EACH ACCIDENT	\$ 500,000
		OTHER Excess Auto Liability	EX000001473-01	11/04/2004	01/01/2006	E.L. DISEASE - EA EMPLOYEE	\$ 500,000
						E.L. DISEASE - POLICY LIMIT	\$ 500,000
						Limits: \$1,000,000 occurrence \$1,000,000 aggregate	

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

CERTIFICATE HOLDER

City of Sewall's Point
Attn: Dale Brown
1 South Sewall's Point Road
Stuart, FL 34996

CANCELLATION

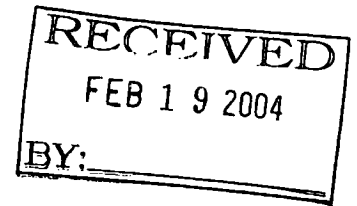
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILLENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER,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

AUTHORIZED REPRESENTATIVE
Conover Beyer



Martin County Building Department

2401 SE Monterey Road
Stuart, FL 34996
(772) 288-5916



HOGAN, BRAD S
CARDINAL ROOFING/SIDING CORP
1682 SE SO NIEMEYER CIR
PORT ST LUCIE, FL 34952

NOTICE TO ALL CONTRACTORS

PLEASE BE ADVISED THAT MARTIN COUNTY, FLORIDA SECTION 43.42 REQUIRES COMPLIANCE WITH THE FOLLOWING EXERPT FROM THE GENERAL ORDINANCES OF THE MARTIN COUNTY CODE:

PROHIBITED ACTIVITIES:

43.42 R Advertising contracting work in any advertisement to the public in a newspaper or telephone directory without including in the advertisement the number of the contractor license issued to the person or business being advertised.

43.42 S Operating any commercial vehicle in the course of conducting the practice of contracting that fails to display the contractor license number of the contractor.

If you have any questions relating to the information in this letter , please contact the Martin County Contractor's Licensing Division of the Martin County Building Department.



**MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency**

ALUMINUM/CONCRETE CONTRACTOR

License Number SP00662 Expires: 30-SEP-05

HOGAN, BRAD S
CARDINAL ROOFING/SIDING CORP
1682 SE SO NIEMEYER CIR
PORT ST LUCIE, FL 34952

AC#1488608

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#E04071400609

DATE	BATCH NUMBER	LICENSE NBR
07/14/2004	040039875	CCC032513

The ROOFING CONTRACTOR
 Named below IS CERTIFIED
 Under the provisions of Chapter 489 FS.
 Expiration date: AUG 31, 2006



HOGAN, BRAD S
 CARDINAL ROOFING & SIDING COMPANY, INC.
 1601 SE SOUTH NIEMEYER CIRCLE
 PORT ST LUCIE FL 34952

JEB BUSH
GOVERNOR

DIANE CARR
SECRETARY

DISPLAY AS REQUIRED BY LAW

STATE OF FLORIDA AC#1488608
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CCC032513 07/14/04 040039875
 CERTIFIED ROOFING CONTRACTOR
 HOGAN, BRAD S
 CARDINAL ROOFING & SIDING COMPANY
 IS CERTIFIED under the provisions of Ch.489 FS.
 Expiration date: AUG 31, 2006 E04071400609

NOTICE OF COMMENCEMENT

00070-7

PERMIT # _____

COUNTY OF Martin

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

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

Homewood Lot 7 Blk B

GENERAL DESCRIPTION OF IMPROVEMENT:

re-roof

OWNER: Susan K Roberts

ADDRESS: 12 N. Ridgeway Road Stuart, FL 34996

PHONE #: 772-283-0744

FAX #: _____

CONTRACTOR: Cardinal Roofing

ADDRESS: 1601 SE S Niemeyer Circle PSL, FL 34952

PHONE #: 772-335-9550

FAX #: 772-335-9554

SURETY COMPANY (IF ANY)

ADDRESS: _____

PHONE #: _____

FAX #: _____

BOND AMOUNT: _____

LENDER:

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

PHONE #: _____

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.

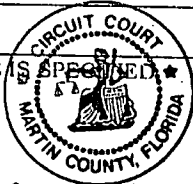
STATE OF FLORIDA
MARTIN COUNTY

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

MARSHA EWING, CLERK

BY: _____

DATE: April 2005

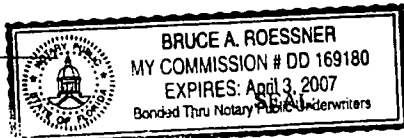


SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 19 DAY OF April 2005

PERSONALLY KNOWN
PRODUCED ID _____
TYPE OF ID _____

Bruce A. Roessner
NOTARY SIGNATURE



INSTR # 1832156 OR BK 02004 PG 2615 RECD 04/20/2005 01:21:04 PM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK L WOOD

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR RE-ROOFING

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

Application form must contain the following information:

1. Property Appraisers Parcel Number or Property Control Number
2. Legal Description of property (Can be found on your deed survey or Tax Bill)
3. Contractors name, address, phone number and license numbers.
4. Name all sub-contractors (properly licensed)
5. Estimated cost of construction.
6. Original signature of owner and notarized
7. Original signature of Contractor and notarized.

Submittals (2 copies)

1. Product approvals from Miami/Dade for the following items:
 - a. Roofing
2. Statement of Fact (owner/builder affidavit)
3. Proof of ownership (deed or tax recpt.)
4. A certified copy of the Notice of Commencement for any work over \$2500.00
5. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
6. Copy of Workmen's Compensation
7. Copy of Liability Insurance

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



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: 4-19-05

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/26/05

BUILDING PERMIT NO. 7513

Building to be erected for ROBERTS

Type of Permit REROOF

Applied for by CARDINAL ROOFING (Contractor)

Building Fee _____

Subdivision HOMWOOD Lot 7 Block 8

Radon Fee _____

Address 12 N. RIDGEVIEW ROAD

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

0138410060020007070000

Roofing Fee 120.00

Amount Paid 120.00 Check # 8577 Cash _____ Other Fees (_____) 1

Total Construction Cost \$ 39,000.

TOTAL Fees 120.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

MIAMI DADE

MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

FILE COPY

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

DATE: 4/25/05

[Signature]

BUILDING OFFICIAL
Gene Simmons

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

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

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

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

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

Your application for Notice of Acceptance (NOA) of:

J.M. Metals Crimp Architectural Metal Roof System

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

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

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

ACCEPTANCE NO. 01-0622702
EXPIRES 08/16/2006

[Signature]

Raul Rodriguez
Chief Product Control Division

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

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

[Signature]

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

WARNING

THIS DOCUMENT CONTAINS PROPRIETARY INFORMATION OWNED BY J.M. METALS. IT IS INTENDED FOR SPECIFIC USE BY J.M. METALS, AND ITS AUTHORIZED DEALERS ONLY, WHEN PROVIDING J.M. METALS PRODUCTS, CALCULATIONS, AND ADVICE CONTAINED HEREIN. AND IS ONLY VALID WHEN USED IN CONJUNCTION WITH CERTIFIED J.M. METALS MATERIAL. OTHER PRODUCTS MAY NOT PERFORM THE SAME, AND ARE SPECIFICALLY OMITTED FROM COVERAGE FROM THIS DOCUMENT AND WARRANTIES AVAILABLE THRU J.M. METALS.

APPROVED: 08/16/2001

ONLY TRUE CERTIFIED COPIES OF THIS DOCUMENT BEAR THE RAISED SEAL OF J. MILA ENTERPRISES, INC. (THE PARENT COMPANY OF J.M. METALS)



Acceptance No.: 01-0622.02

ROOFING SYSTEM APPROVAL:

Category: Roofing
Sub-Category: Metal, Panels
 (Non-Structural)
Material: Steel
Deck Type: Wood
Maximum Design Pressure -85 psf.

Approval Date: August 16, 2001

Expiration Date: August 16, 2006

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
5V Steel Roofing Panel	l = varies w = 26" h = 1/4" Min. Thickness 0.019"	PA 110	Metal Roof panel coated with Fluropon®.

TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS:

<u>Product</u>	<u>Dimensions</u>	<u>Product Description</u>	<u>Manufacturer</u>
Fasteners (Panel)	#9-15 HH	Corrosion resistant, sharp point hex-head screws with 1/4" EPDM Bonded Steel sealing washer.	generic

EVIDENCE SUBMITTED:

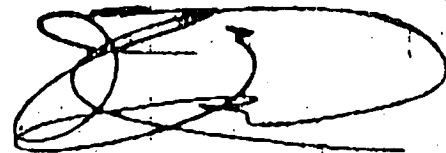
<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
The Valspar Corporation	Lab Test Certification	ASTM B-117 ASTM G-23	
PR1 Asphalt Technologies, Inc.	JMM-001-01-01	PA 100	05/10/01
Underwriters Laboratories, Inc.	01NK5594	UL 580	01/15/01

WARNING

THIS DOCUMENT CONTAINS PROPRIETARY INFORMATION OWNED BY J.M. METALS. IT IS INTENDED FOR SPECIFIC USE BY J.M. METALS, AND ITS AUTHORIZED DEALERS ONLY WHEN PROVIDING J.M. METALS PRODUCTS, CALCULATIONS, AND ADVICE CONTAINED HEREIN. AND IS ONLY VALID WHEN USED IN CONJUNCTION WITH CERTIFIED J.M. METALS MATERIAL. OTHER PRODUCTS MAY NOT PERFORM THE SAME, AND ARE SPECIFICALLY OMITTED FROM COVERAGE FROM THIS DOCUMENT AND WARRANTIES AVAILABLE THRU J.M. METALS.

ONLY TRUE CERTIFIED COPIES OF THIS DOCUMENT BEAR THE RAISED SEAL OF J. MILA ENTERPRISES, INC. (THE PARENT COMPANY OF J.M. METALS)

Page 2



Frank Zuloaga, RRC
 Roofing Product Control Examiner

APPROVED SYSTEMS:

SYSTEM: 5V Steel Roofing Panel

Deck Type: Wood, Non-insulated

Deck Description: New Construction or Re-roof
¹⁹/₃₂" or greater plywood or wood plank.

Slope Range: 2":12" or greater

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

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

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

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

Fire Barrier Board: For class A or B fire rating, install minimum 1/4" thick Georgia Pacific "Dens Deck" (with current NOA) or minimum 4mm thick of Tritox, RockRoof (with current NOA) or 1/2" water resistant type X gypsum sheathing with treated core and facer.

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

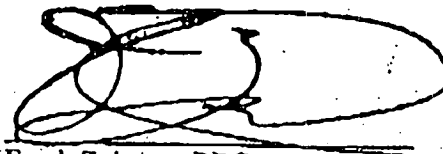
5V Roofing Panels shall be fastened with a minimum of #9-15 HH corrosion resistant fasteners with sealing washer. Fasteners shall of sufficient length to penetrate through the sheathing a minimum of 3/16". Fasteners shall be place in accordance with fastener detail herein as follows:

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

WARNING

THIS DOCUMENT CONTAINS PROPRIETARY INFORMATION OWNED BY J.M. METALS. IT IS INTENDED FOR SPECIFIC USE BY J.M. METALS, AND ITS AUTHORIZED DEALERS ONLY, WHEN PROVIDING J.M. METALS PRODUCTS, CALCULATIONS, AND ADVICE OBTAINED HEREIN. AND IS ONLY VALID WHEN USED IN CONNECTION WITH CERTIFIED J.M. METALS MATERIAL. OTHER PRODUCTS MAY NOT PERFORM THE SAME, AND ARE SPECIFICALLY OMITTED FROM COVERAGE FROM THIS DOCUMENT AND WARRANTIES AVAILABLE THRU J.M. METALS.

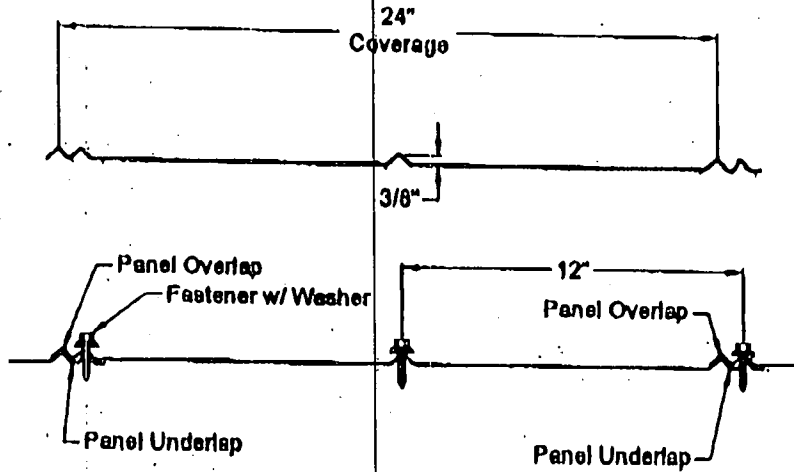
ONLY TRUE CERTIFIED COPIES OF THIS DOCUMENT BEAR THE RAISED SEAL OF J. MILA ENTERPRISES, INC. (THE PARENT COMPANY OF J.M. METALS)



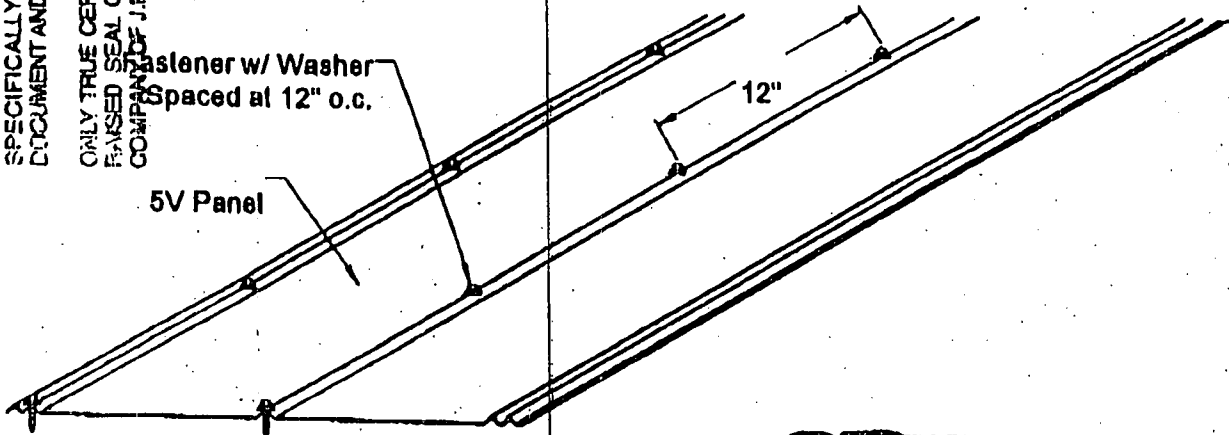
Frank Zuloaga, RRC
Roofing Product Control Examiner

SYSTEM LIMITATIONS:

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



5V STEEL ROOFING PANEL



WARNING

THIS DOCUMENT CONTAINS PROPRIETARY INFORMATION OWNED BY J.M. METALS. IT IS INTENDED FOR SPECIFIC USE BY J.M. METALS AND ITS AUTHORIZED DEALERS ONLY WHEN PROVIDING J.M. METALS PRODUCTS, CALCULATIONS, AND ADVICE CONTAINED HEREIN. AND IS ONLY VALID WHEN USED IN CONNECTION WITH CERTIFIED J.M. METALS MATERIAL. OTHER PRODUCTS MAY NOT PERFORM THE SAME, AND ARE SPECIFICALLY OMITTED FROM COVERAGE FROM THIS DOCUMENT AND WARRANTIES AVAILABLE THRU J.M. METALS.

ONLY TRUE CERTIFIED COPIES OF THIS DOCUMENT BEAR THE RAISED SEAL OF J. MILA ENTERPRISES, INC. (THE PARENT COMPANY OF J.M. METALS)

Frank Zuloaga, RRC
Roofing Product Control Examiner

NOTICE OF ACCEPTANCE STANDARD CONDITIONS

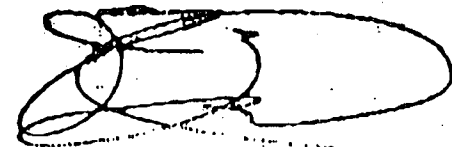
- 1 Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documentation, including test supporting data, engineering documents, are no older than eight (8) years.
- 2 Any and all approved products shall be permanently labeled with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

END OF THIS ACCEPTANCE

WARNING

THIS DOCUMENT CONTAINS PROPRIETARY INFORMATION OWNED BY J.M. METALS. IT IS INTENDED FOR SPECIFIC USE BY J.M. METALS, AND ITS AUTHORIZED DEALERS ONLY, WHEN PROVIDING J.M. METALS PRODUCTS, CALCULATIONS, AND ADVICE CONTAINED HEREIN, AND IS ONLY VALID WHEN USED IN CONJUNCTION WITH CERTIFIED J.M. METALS MATERIAL. OTHER PRODUCTS MAY NOT PERFORM THE SAME, AND ARE SPECIFICALLY OMITTED FROM COVERAGE FROM THIS DOCUMENT AND WARRANTIES AVAILABLE THRU J.M. METALS.

ONLY TRUE CERTIFIED COPIES OF THIS DOCUMENT BEAR THE RAISED SEAL OF J. MILA ENTERPRISES, INC. (THE PARENT COMPANY OF J.M. METALS)



Frank Zuloaga, RRC
Roofing Product Control Examiner



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 12 N. RIDGEVIEW

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

DPV-1N

NEED PRODUCT APPROVAL
FOR PEEL & STICK
UNDERLAYMENT MATERIAL
& ITS APPLICATION

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: 5/25

OM







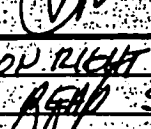
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/25, 20015 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7168	TOPPING	FINAL INT	PASS	CLOSE
1	7 MIDDLE ROAD	REPAIR WORK		
	SPECIAL FORCES			INSPECTOR: 
7513	ROBERTS	DRY-IN	FAIL	
12	12 N. RIDGEVIEW			
	CARDINAL ROOFING			INSPECTOR: 
6581	LASKY	FINAL ADD'N	FAIL	
3	27 W High Point	/REMODEL		
	SEAGATE BLDS			INSPECTOR: 
6839	WADE	FINAL Acc.	PASS	CLOSE
2	9 E. High Point	BLDG		
	PINE OAKHURST			INSPECTOR: 
7247	DELANEY	REPAIR DOCK	PASS	CLOSE
10	116 S. SEWALLS PT	FINAL		
	CUSTOM DECKS			INSPECTOR: 
780	BONIFACE	PARTIAL FRAMING	PASS	
13	63 S RIVER RD			
	WILSON BLDS			INSPECTOR: 
TREE	JORDAN	TREE	PASS	
15	12 CASTLEHILL WY			
				INSPECTOR: 
OTHER:	TREE	6 RIDGELAND	TREE	PASS
				TREE ON RIGHT SIDE HAS BEEN STAMP



7513

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: R. N. RIDGEVIEW

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

FINAL ROOF

NOTICE OF ACCEPTANCE & PRODUCT
APPROVAL WAS NEVER SUBMITTED FOR
UNDERLAYMENT, WHICH WAS DIFFERENT
FROM PRODUCT APPROVAL INITIALLY
SUBMITTED.

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: 6/24

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/24, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7396	HB ASSOC ^{JOYCE'S} FLUES	Pump Water Pump	PASSED	BRING REVISIONS
* 112	3756 Ocean Blvd	Tree Water Pump	PASSED	TO JOB SITE
	KIRCHMAN	Framming	PASSED	INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7610	HARVEY	ALC CHAOUT	FAIL	
1	1 RIDGELAND G			
	DB Classic Coating	Early Please	(649:30)	INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7362	BUTLER	FINAL ROOF	FAIL	RESCHEDULE
8	6 EMARITA WAY	561-902-9069		
	WESTERN ROOFING	BILL JOHNSON		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
Tree	LUDH	TREE	PASS	
2	20 E. HIGHT POINT			
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6809	KADER	Pool Deck	FAIL	
10	5 HERITAGE WAY			\$40
	FLAMINGO POOLS			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7528	SWEET	IN PROGRESS	RESCHEDULE -	
6	19 S. RIDGEVIEW			INCLEMENT WEATHER
	CARDINAL ROOFING			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7513	ROBERTS	FINAL ROOF	FAIL	
7	12 N. RIDGEVIEW			
	CARDINAL ROOFING			INSPECTOR: <i>[Signature]</i>

OTHER: ELDER LATH (PARTIAL) PASS *[Signature]*

THIS IS NOT INDICATING APPLICATION ON BARE PLYWOOD.

Roberts Job permit # 7513
12 N. Ridgeview Rd.

BILL ESMAN
772-342-7247
TECHNICAL.

POYBARRS
www.poybarrs.co.

OK FOR
DIRECT
APPLICATION
TO PLYWOOD
SUBSTRATE

Polystick™ MU

Self-Adhered Roofing and Waterproofing Underlayment

DESCRIPTION
POLYSTICK™ MU is a homogeneous rubberized asphalt waterproofing compound, glass fiber reinforced with non-wicking fabric surface designed specifically for use as an underlayment material for metal roofing. The rubberized asphalt adhesive membrane is well suited for use where a water resistant barrier is required. This membrane is ideally suited for use under metal roofing systems as well as under low-slope tile roof applications. POLYSTICK™ MU membrane has been specially formulated to withstand the high heat environment generated by metal roofing systems (Resistant to 260°F). Split/perforated release backing film aids in easy positioning of sheets to maintain proper line. Material is packaged in a roll of approx. 200 sq. ft. (finished roof coverage) weighing approx. 80 lbs.



ASTM D 1970
DADE County Approved
ICBO Approved ES: ER-2454

INSTALLATION
POLYSTICK™ MU is not intended for application under metal roofing and low slope tile roofing where a water resistant barrier is required. It is also not intended for use in direct contact with POLYSTICK™ MU has been specially formulated to be light temperature resistant up to 260°F. POLYSTICK™ MU may be left exposed to elements for up to 90 days before application on metal roofing.

APPLICATION
POLYSTICK™ MU is to be applied directly to the acceptable substrate. Do not apply to shingles or other roofing materials. Apply only when the weather is dry and material surface temperatures (air, roof deck, membrane) are 40° F and rising. Always start at the lowest point of the roof deck where possible. Cut the POLYSTICK™ MU to a suitable workable length. (This will vary depending on the number of workers and length of runs). Lay the material flat in place, overlap seams 3.5" minimum and overlaps 6" minimum. Peel half of the backing off the roll and apply firm, even pressure from the center to the outer edges. Remove backing from remaining half of the roll and apply pressure in the same manner. For hill roof coverage application, proper venting of the structure must be attained. Consult with a design professional to assure proper venting requirements have been achieved. In steep-slope applications backnailing will be required, be sure that all nails are covered by the overlapping next sheet. Do not expose POLYSTICK™ MU to weathering for longer than 90 days.

- HIPS AND VALLEYS
- FOUNDATION WATERPROOFING
- TILE UNDERLAYMENT
- METAL UNDERLAYMENT

PRODUCT NAME	VERSION	APPROX WEIGHT (lb/roll)	ROLL SIZE	ROLLS/PALLET	COVERAGE (sq)
POLYSTICK™ MU	2.0	80	8'8" x 3'3" (2.6m x 1m)	20	200

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7/8, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7613	PREISSMAN	FOOTER	PASS	
8	28 RIO VISTA WINCHIP			INSPECTOR:
7565	KUHNS	FRAMING	PASS	
5	94 S. RIVER RD O/B	(BBQ GRILL/WALL)		INSPECTOR:
7612	COTTEN	FINAL EXTERIOR SIDING	FAIL	
2	177 S. SEWALLS PT DEMAREST CONST.	REPAIR INT. DENIAL		INSPECTOR:
7641	MADER	FOOTER	FAIL	
1	106 ABBIE CT BUFORD CONST.			INSPECTOR:
7513	ROBERTS	FINAL ROOF	PASS	CLOSE
	12 N. RIOBEVIEW CARDINAL ROOFING			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 12/1/04

BUILDING PERMIT NO. 7.095

Building to be erected for ROBERTS

Type of Permit REPAIR FENCE

Applied for by O/B

(Contractor) Building Fee 30.00

Subdivision HOMENWOOD Lot 7 Block B

Radon Fee _____

Address 12 N. RIDGEVIEW RD

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

138410060020007070000

Electrical Fee _____

Plumbing Fee _____

Amount Paid 30.00 Check # 1899 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 800.00

Roofing Fee _____

TOTAL Fees 30.00

Signed _____

Signed Gene Simmons (Signature)

Applicant

Town Building Official

PERMIT

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

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

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

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 30 2004

Date: 11-30-04

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: Susan Roberts Phone (Day) 283-0744 (Fax) _____

Job Site Address: 12 N. Ridgewiew Rd. City: Stuart State: FL Zip: 34996

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

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

Description of Work To Be Done: Repair fence from hurricane damage

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 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 _____ 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) [Signature]

State of Florida, County of: MARTIN

This the 30th day of NOVEMBER, 2004

by SUSAN K ROBERTS who is personally

known to me or produced by [Signature] R163-781-62-783-0

as identification. [Signature] 8/13/10

My Commission Expires: _____

CONTRACTOR SIGNATURE (required)

On State of Florida, County of: _____

This the _____ day of _____ 2004

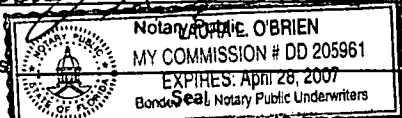
by _____ who is personally

known to me or produced _____

As identification. _____

My Commission Expires: _____ Notary Public

My Commission Expires: _____ Seal



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

"LUCINDA"
 PLAT BOOK 3, PAGE 130
 PUBLIC RECORDS
 OF MARTIN COUNTY

20-25'

FOUND 4"x4"
 CONC. MONUMENT
 NO LD.

OHW S62°49'30"W (BEARING)
 550.00'(P) 549.85'(F)

repair
 spright & board on
 board fence due
 to hurricane
 damage

LOT 36

74.10' (P)
 OHW
 S62°49'30"W 100.00' (P)(F)

FOUND 4"x4"
 CONC. MONUMENT
 NO LD.
 OHW

WOOD FENCE

S27°27'30"E 200.00'(P)
 S28°12'55"E 200.00'(F)

METAL SHED
 TO BE REMOVED

POOL

CONC. PATIO

SCREEN ENCLOSURE

POOL EQUIP. PAD

1 STORY W/F DWELLING

N27°27'30"W 200.00'(P)
 N28°12'55"W 201.74'(F)
 200.00'(C)

REPAIR WORK FOR
 HURRICANE DAMAGE

LOT 8
 BLOCK "B"

CONC. A/C PAD
 CONC. PAD

COVID ENTRY

CONC. DRIVE

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

DATE: 11/30/00

BUILDING OFFICIAL
 Gene Simmons

LOT 7
 BLOCK "B"

15.0' B.S.L.

35.0' B.S.L.

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

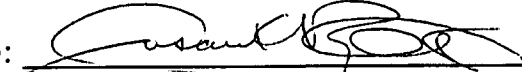
TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT
(To be submitted if permit is to be pulled by Owner/Builder)

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: Susan K Roberts Date: Nov. 30/04

Signature: 

Address: 12 N. Ridgeway Rd.

City & State: Stuart, FL 34996

Permit No. _____

INSPECTION LOG FOR ABANDONED/EXPIRED PERMITS

PERMIT #	OWNER'S NAME	ADDRESS	DESCRIPTION	APPROVED BY & DATE
6092	Plitt	12 Heron's Nest	Addition	
7095	Roberts	12 N Ridgeway	Repair fence	AW 7/6/07
7953	Vance	12 Wendy Ln	Fill	
8037	Marney	121 Hillcrest DR	A/C Changeout (Failed)	
7077	Knudson	13 Via Luincia S.	Repair fence	AW 7/6/07 WORK NEVER DONE
7333	Keller	14 Cranes Nest	Fence	
6085	Rhodes	14 E High Pt	Repl pilings	AW 7/6/07 ✓
7034	Jones	14 Heron's Nest	Dock repair (Failed - has boom lift)	HAS UNPERMITTED BOAT LIFT.
6993	abeel	14 N River Rd	Fence	
7659	Holland	16 N Ridgeway Rd	Fence - failed final	
6258	Lydon	167 S Sewalls	Tiki Hut	AW 7/6/07 ✓
6314	Lydon (McPherson)	167 S Sewalls	Fence	AW 7/6/07 ✓
8144	Borgum	17 Mandelway	Dock repair - replace	

8657

SHUTTERS



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

BUILDING PERMIT CARD

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

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	8657	DATE ISSUED:	JULY 13, 2007
SCOPE OF WORK:	HURRICANE SHUTTERS		
CONTRACTOR:	CHARLES LAW CONSTRUCTION		
PARCEL CONTROL NUMBER:	13841006002000707	SUBDIVISION	HOMEWOOD, LOT 7, BL 8
CONSTRUCTION ADDRESS:	12N RIDGEVIEW RD		
OWNER NAME:	ROBERTS		
QUALIFIER:	CHARLES LAW	CONTACT PHONE NUMBER:	561-741-7523

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

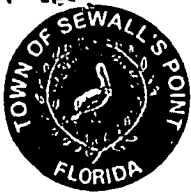
NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN PUBLIC RECORDS OF THIS COUNTY, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES,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

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

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	8657 - 12 N RIDGEVIEW
DATE:	JULY 13, 2007

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$	
Total square feet air-conditioned space: (@ \$104.65 per sq. ft.)		s.f.	
Total square feet non-conditioned space: (@ \$48.90 per sq. ft.)		s.f.	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$75 per insp.)			
Total number of inspections (Value < \$200K) @\$75 ea.		\$	
Radon Fee (\$.005 per sq. ft. under roof):		\$	
DBPR Licensing Fee: (\$.005 per sq. ft. under roof)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)			
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	
Total number of inspections @ \$75.00 each	1	\$	75.00
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	80.00

RECEIVED
DATE: 7-10-07
TOWN OF SEWALL'S POINT

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

Date: _____

OWNER/TITLEHOLDER NAME: SUSAN Roberts Phone (Day) _____ (Fax) _____

Job Site Address: 12 N. Ridgeview Road City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Homewood Lot 7 Bk B Parcel Number: 01-38-41-006-002-00070-7

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

Scope of work: Aluminum Hurricane Panels

WILL OWNER BE THE CONTRACTOR?

(If yes, Owner Builder questionnaire must accompany application)
YES _____ NO

Has a Zoning Variance ever been granted on this property?

YES _____ (YEAR) _____ NO _____

(Must include a copy of all variance approvals with application)

COST AND VALUES:

Estimated Value of Construction or Improvements: \$ 2800.00
(Notice of Commencement required over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____
(FOR ADDITIONS AND REMODEL APPLICATIONS ONLY)

Method of Determining Fair Market Value: _____

CONTRACTOR/Company: Charles Law Construction Phone: 501-741-7523 Fax: 772-781-3824

Street: PO Box 29 City: Palm City State: FL Zip: 34991

State Registration Number: CGC047434 State Certification Number: same Municipality License Number: _____

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

ENGINEER Lic.#: _____ Phone Number: 305-375-2901
Street: 140 W. ... Suite 1603 City: Miami State: FL Zip: 33130

AREA SQUARE FOOTAGE (SEWER & ELECTRIC): Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: _____
Carport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

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

NOTICES TO OWNERS AND CONTRACTORS:

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

THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ALL NULL AND VOID PERMITS. REF. FBC 2004 W/ 2008 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

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

OWNER OR AUTHORIZED AGENT SIGNATURE (required)

State of Florida, County of: Martin
This the 26 day of June, 2007

by Susan Roberts who is personally

known to me or produced as identification: CINDY K. MICKEL known

My Commission Expires: MAY 02, 2009
Notary Public
Bonded through 1st State Insurance

CONTRACTOR SIGNATURE (required)

On State of Florida, County of: Martin
This the 26 day of June, 2007

by Charles Law who is personally

known to me or produced as identification: personally: known

My Commission Expires: MAY 02, 2009
Notary Public
Bonded through 1st State Insurance



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



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

Site Provided by...
governmentmax.com T1.1

Summary

print | | | | | Owner
1 of 1

Parcel Info
Summary

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
01-38-41-006-002-00070-7	12 N RIDGEVIEW RD	17654	Owner	0	1

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

Summary
Property Location 12 N RIDGEVIEW RD
Tax District 2200 Sewall's Point
Account # 17654
Land Use 101 0100 Single Family
Neighborhood 120400
Acres 0.459

Legal Description
Property Information
 HOMEWOOD LOT 7 BLK B

Search By

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

Owner Information
Owner Information
 ROBERTS, SUSAN K

Mail Information
 12 N RIDGEVIEW RD
 STUART FL 34996

Assessment Info
 Front Ft. 0.00

Market Land Value \$290,000
Market Impr Value \$384,060
Market Total Value \$674,060

Site Functions

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

Recent Sale
 Sale Amount \$348,000

Sale Date 8/21/2000
Book/Page 1501 2767

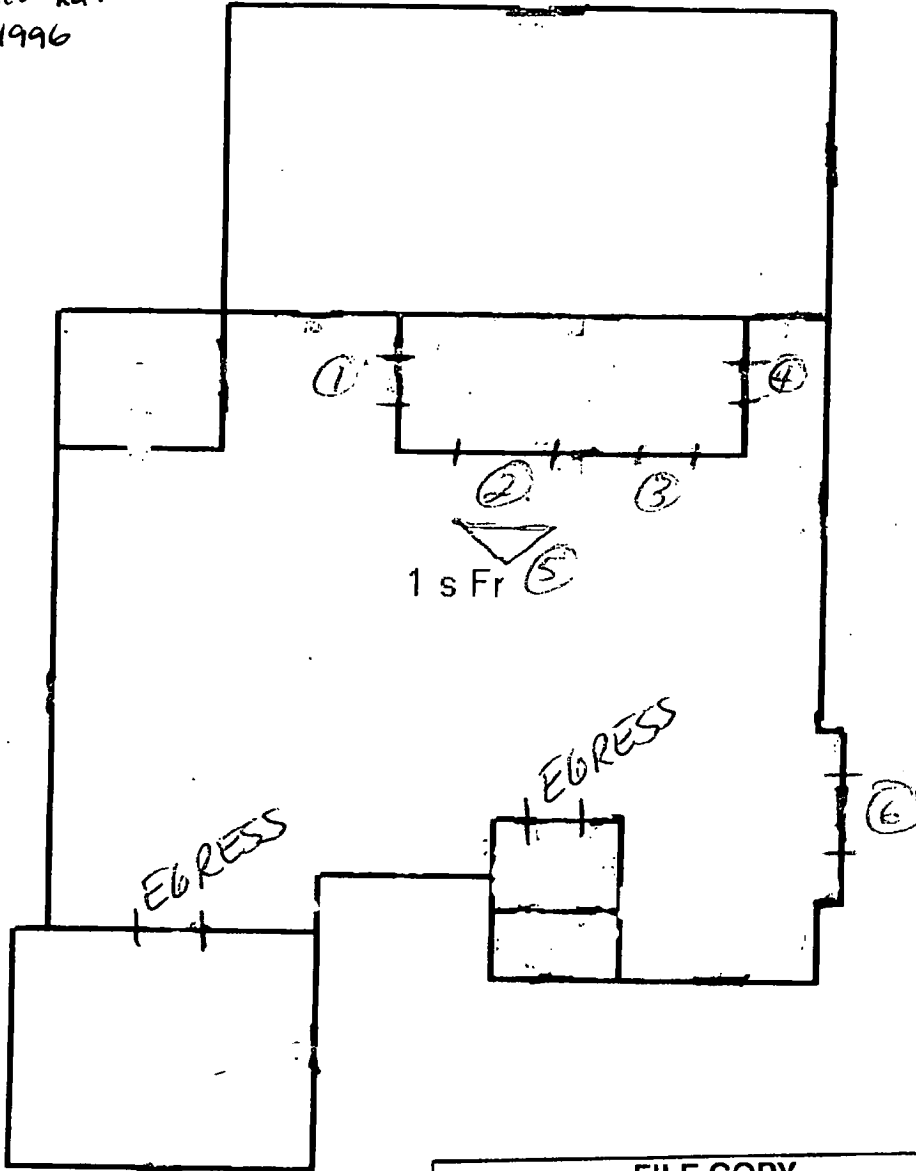
Print | << First < Previous Next > Last >>

Legal disclaimer / Privacy Statement

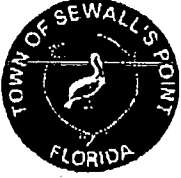
Data updated on 06/11/2007



Susan Roberts
1711 Ridgeview Rd.
Stuart, FL 34996



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE 7/12/17
[Signature]
BUILDING OFFICIAL



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

SHUTTER SCHEDULE

Susan Roberts

I.D. NO.	APPOX OPENING SIZE (WXH)	APPOX SHUTTER WIDTH	APPOX HEIGHT	# OF STORM BARS REQ'D	ANCHOR SPACING	# OF WINDOW BARS EACH SIDE	HEADER REINF. REQ'D YES/NO	REMARKS
	37"X63"	45"	71"	N/A	12"	N/A	NO	EXAMPLE
1	74"X98"	78"	104"		12"			
2	150"X96"	158"	101"		12"			
3	94"X79"	98"	85"		12"			
4	34"X88"	38"	88 1/2"		12"			
5	72"X50"	78"	54"		12"			
6								
7	#5 TRIANGLE Window From 12"-53"-12"							5'3"
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY



MIAMI-DADE COUNTY
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

www.buildingcodeonline.com

NOTICE OF ACCEPTANCE (NOA)

Town & Country Industries, Inc.
400 West McNab Road
Ft. Lauderdale, Florida 33309

SCOPE:

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

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

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

DESCRIPTION: 0.050" (min.) Aluminum Storm Panels Shutter

APPROVAL DOCUMENT: Drawing No. 05-353, titled "0.050" Aluminum Storm Panel", sheets 1 through 6 of 6, prepared by Thornton-Tomasetti Group, dated June 29, 2005, last revision #0 dated June 29, 2005 signed and sealed by V.J. Knezevich, P.E. bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each panel shall bear a permanent label with the manufacturer's name or logo, city, state and the following statement: "Miami-Dade County Product Control Approved", 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 & renews NOA # 03-0421.13 & consists of this page 1, evidence submitted pages E-1 and E-2 as well as approval document mentioned above.

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



TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Helmy A. Makar
02/16/2006

NOA No 05-0713.03
Expiration Date: 11/16/2010
Approval Date: 02/16/2006
Page 1

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

1. **EVIDENCE SUBMITTED UNDER PREVIOUS APPROVAL #00-0809.03**

A. **DRAWINGS:**

1. *Drawing Number 00-159, titled "0.050" Aluminum Storm Panel", sheets 1 through 6 of 6, prepared by Knezevich & Associates, dated August 1, 2000, last revision #1 dated October 26, 2000, signed and sealed by V. J. Knezevich, P.E.*

B. **TESTS:**

1. *Test report on Large Missile Impact Test, Cyclic Wind Pressure Test and Uniform Static Air Pressure Test on 0.050" aluminum storm panels, prepared by Construction Testing Corporation, Test Report No. CTC 00-028 dated 06/28/2000, signed and sealed by Christopher G. Tyson, P.E.*

C. **CALCULATIONS:**

1. *Comparative Analysis and Anchor Analysis, dated 07/12/2000, pages 1 through 56, prepared by Knezevich & Associates, Inc., signed and sealed by V. J. Knezevich, P.E.*
2. *Comparative Analysis, dated 10/26/2000, pages 1 through 3, prepared by Knezevich & Associates, Inc., signed by V. J. Knezevich, P.E.*

D. **MATERIAL CERTIFICATION:**

1. *Mill Certified Inspection Report of coils, for Aluminum Alloy 3004-H34 by Jupiter Aluminum Corp. with physical properties.*
2. *Certified Tensile Test Report by Certified Testing Laboratories, Report No. CTL-592F dated 06/26/2000, for Aluminum Alloy, signed and sealed by Ramsh Patel, P.E.*

2. **EVIDENCE SUBMITTED UNDER PREVIOUS APPROVAL # 03-0421.13**

A. **DRAWINGS**

1. *Drawing No. 03-259, titled "0.050" Aluminum Storm Panel ", sheets 1 through 6 of 6, prepared by Knezevich & Associates, Inc., dated April 04, 2003, last revision #1 dated September 23, 2003 signed and sealed by V.J. Knezevich, P.E.*

B. **TESTS**

1. *None.*

C. **CALCULATIONS**

1. *None.*



Helmy A. Makar, P. E.

Product Control Examiner

NOA No 05-0713.03

Expiration Date: 11/16/2010

Approval Date: 02/16/2006

Town & Country Industries, Inc.

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

D. QUALITY ASSOURANCE

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

E. MATERIAL CERTIFICATIONS

1. *None.*

3. NEW EVIDENCE SUBMITTED

A. DRAWINGS

1. *Drawing No. 05-353, titled " 0.050" Aluminum Storm Panel ", sheets 1 through 6 of 6, prepared by Thornton-Tomasetti Group, dated June 29, 2005, last revision #0 dated June 29, 2005 signed and sealed by V.J. Knezevich, P.E.*

B. TESTS

1. *None.*

C. CALCULATIONS

1. *Anchor Analysis, dated June 15, 2005, 39 pages, prepared by Thornton-Tomasetti Group, signed and sealed by V. J. Knezevich, P.E.*

D. QUALITY ASSOURANCE

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

E. MATERIAL CERTIFICATIONS

1. *None.*



Helmy A. Makar, P. E.
Product Control Examiner
NOA No 05-0713.03
Expiration Date: 11/16/2010
Approval Date: 02/16/2006



KNEZEVICH & ASSOCIATES, INC.
 Consulting Engineers • Product Testing
 330 N. Andrews Avenue, Suite 450
 Fort Lauderdale, Florida 33301
 (954) 522-3690 • (954) 522-3691 – fax

KA Job No.:	04-270.00 and 04-272.00
Date:	March 18, 2004
Manufacturer:	Town and Country Industries, Inc.
Product Name:	Aluminum and Galvanized Steel Storm Panels

EVALUATION REPORT FL2250

Code: Florida Building Code, 2001 with 2003 Revisions
 Product Category: Shutters
 Product Sub-Category: Storm Panels
 Product Name: 0.040", 0.050", and 0.060" Aluminum Storm Panels
 0.0232" and 0.0285" Galvanized Steel Storm Panels
 Manufacturer: Town and Country Industries, Inc.
 400 West McNab Road
 Fort Lauderdale, FL 33309

1. PURPOSE OF EVALUATION REPORT:

This is an Evaluation Report issued by Knezevich and Associates, Inc. (System ID No. 1801), V. John Knezevich, P.E. to Town and Country Industries, Inc., based on Rule Chapter No. 9B-72.070, Method 1(d) Product Approval, Florida Building Commission, Department of Community Affairs. These Storm Panels have been evaluated and found to be in compliance with the Code and that the products are, for the purpose intended, at least equivalent to that required by the Code.

Re-evaluation of this Evaluation Report is required, following any code changes, to maintain its validity.

2. SUBSTANTIATING DATA

2.1 PRODUCT EVALUATION DOCUMENT

- Town and Country Industries, Inc. .040", .050", and .060" Storm Panel Drawing No. 04-272, with a zero revision, dated March 18, 2004, Sheets 1 through 6, prepared by Knezevich

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

Evaluation Report Prepared by:
 KNEZEVICH & ASSOCIATES, INC.

V. J. KNEZEVICH
 No. 10983
 V. John Knezevich, P.E.
 President
 STATE OF
 March 31, 2004
 Florida License No. PE 10983
 Florida Professional Engineer
 No. 3203



KNEZEVICH & ASSOCIATES, INC.
Consulting Engineers • Product Testing
330 N. Andrews Avenue, Suite 450
Fort Lauderdale, Florida 33301
(954) 522-3690 • (954) 522-3691 – fax

KA Job No.:	04-270.00 and 04-272.00
Date:	March 18, 2004
Manufacturer:	Town and Country Industries, Inc.
Product Name:	Aluminum and Galvanized Steel Storm Panels

and Associates, Inc., signed, dated and sealed by V. John Knezevich, P.E. is an integral part of this Evaluation Report.

- Town and Country Industries, Inc. .0232" and .0285" Galvanized Steel Storm Panel, Drawing No. 04-270, with a zero revision, dated March 18, 2004, Sheets 1 through 6, prepared by Knezevich and Associates, Inc., signed, dated and sealed by V. John Knezevich, P.E. is an integral part of this Evaluation Report.

2.2 TEST REPORTS

- Test report for Uniform Static Air Pressure in accordance with ASTM E330-90 and successful testing of impact resistance in conformance with SSTD 12-99. Reports were prepared by Construction Testing Corporation (CTC), and are listed in the referenced drawings.
- Tensile Capacity of aluminum alloy extrusions was determined in accordance with ASTM E8/A370.

2.3 STRUCTURAL ENGINEERING CALCULATIONS

Prepared Rational and Comparative Analyses of Storm Panel performance, as well as anchor calculations. From these analyses, Maximum Panel Span vs. Design Load (PSF) Schedules were prepared for the Aluminum Storm Panels (Tables 1 & 3 in Drawing No. 04-272) and Steel Storm Panel Maximum Span Schedules (Tables 1 & 3 in Drawing No. 04-270). An anchor spacing vs. design load (PSF) schedule was also prepared, indicating maximum anchor spacing for given span conditions at specific design loads (PSF) for each type of anchor used during testing, for both metals.

A 33% increase in allowable stress has not been used in the design of this product.

3. IMPACT RESISTANCE

The Storm Panels satisfactorily passed the large missile impact testing, in accordance with SSTD 12-99. These Storm Panels may be used to protect glazed openings from windborne debris when installed in accordance with the limitations indicated in their respective drawings, prepared by Knezevich and Associates, Inc.

4. WIND LOAD RESISTANCE

These Storm Panels have been designed to resist wind pressures as indicated by the Span Schedules of their respective referenced drawings.

5. ANCHORS

The maximum anchor spacing for each type of anchor, shutter span and design wind load is found in the Anchor Schedule of their respective referenced drawings.

6. INSTALLATION

These Storm Panels are to be installed in accordance with the typical details, general notes, schedules and material specifications found in each respective referenced drawing.



KNEZEVICH & ASSOCIATES, INC.
Consulting Engineers • Product Testing
330 N. Andrews Avenue, Suite 450
Fort Lauderdale, Florida 33301
(954) 522-3690 • (954) 522-3691 – fax

KA Job No.:	<u>04-270.00 and 04-272.00</u>
Date:	<u>March 18, 2004</u>
Manufacturer:	<u>Town and Country Industries, Inc.</u>
Product Name:	<u>Aluminum and Galvanized Steel Storm Panels</u>

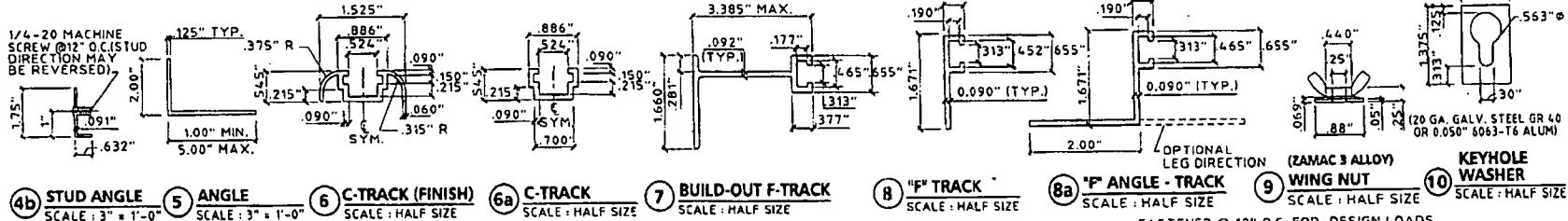
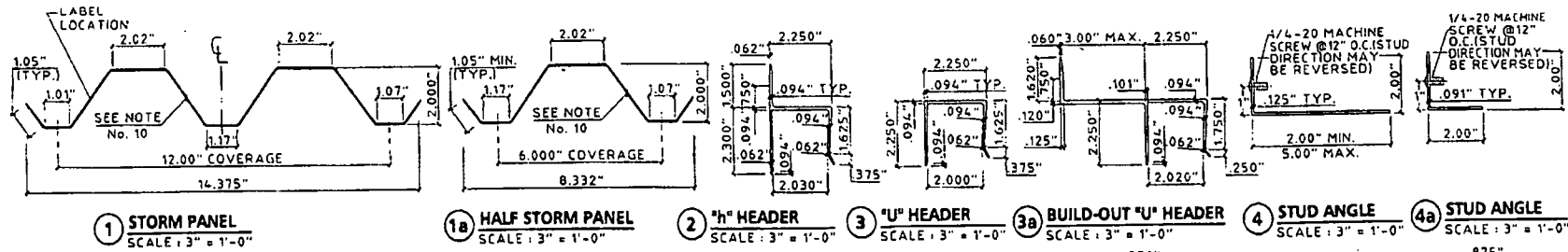
7. MATERIAL SPECIFICATIONS

See General Notes of the referenced drawings, unless otherwise noted, for material specifications. All dimensions of components are indicated in their respective referenced drawings. Anchor specifications including acceptable substrate, minimum embedment, edge distance and manufacturer are indicated in the referenced drawings.

8. LIMITATIONS AND CONDITIONS OF USE

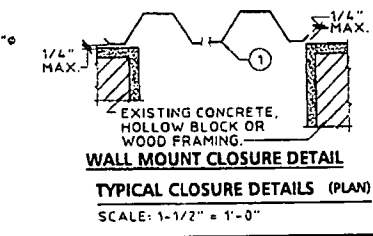
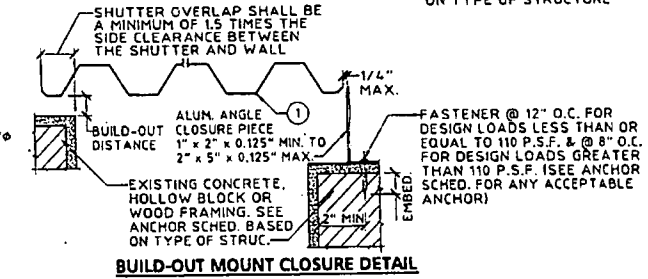
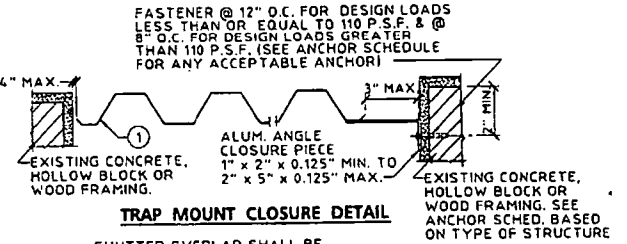
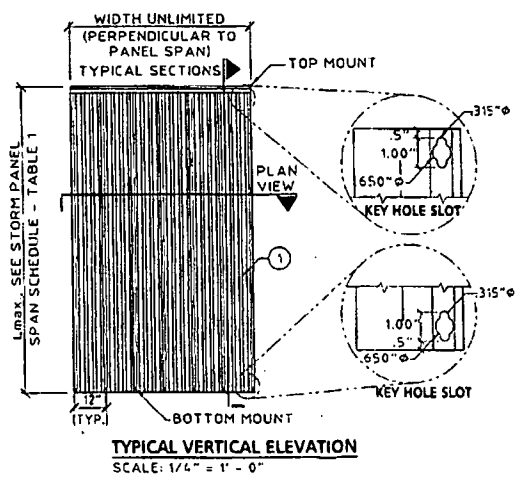
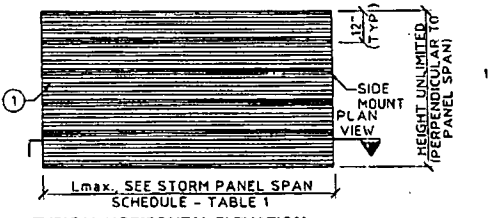
- Use of these products shall be in strict conformance with the requirements of the reference drawings prepared by Knezevich and Associates, Inc. and signed, dated and sealed by V. John Knezevich, PE.
- These products are NOT suitable for installation in the High Velocity Hurricane Zone.
- These products may only be installed on concrete, hollow concrete block or wood substrates. For all other conditions site specific design shall be by this office or our delegated engineer.
- Panel spans less than those noted in the Minimum Panel Length Schedule of the reference drawings are not acceptable per the provisions of SSTD 12-99.

Print Information: P:\V1\Projects\VK353.00\Drawings\VR0-sub\05-353-01.dwg MContu 06/29/2005 04:43:33pm
 06/29/05 16:43



GENERAL NOTES:

- THESE APPROVAL DOCUMENTS REPRESENT A SHUTTER SYSTEM ANALYZED WITH THE PROVISION SET FOR THE ISSUANCE OF A NOTICE OF ACCEPTANCE (NOA) BY MIAMI-DADE COUNTY PRODUCT CONTROL DIVISION FOR THE HIGH VELOCITY HURRICANE ZONE (HVHZ) OF THE FLORIDA BUILDING CODE 2004.
- NO INCREASE IN ALLOWABLE STRESS HAS BEEN USED IN THE DESIGN OF THIS PRODUCT. WIND LOAD DURATION FACTOR $C_d = 1.6$ WAS USED FOR WOOD LAG SCREW DESIGN.
- DETERMINE THE POSITIVE AND NEGATIVE DESIGN LOADS TO USE WHEN REFERENCING THESE DOCUMENTS IN ACCORDANCE WITH THE GOVERNING CODE AND GOVERNING WIND VELOCITY.
- THESE APPROVAL DOCUMENTS ARE GENERIC AND DO NOT INCLUDE INFORMATION FOR SITE-SPECIFIC APPLICATION OF THIS SHUTTER SYSTEM.
- USE OF THESE APPROVAL DOCUMENTS SHALL COMPLY WITH CHAPTER 61G15-23 OF THE FLORIDA ADMINISTRATIVE CODE.
- THESE APPROVAL DOCUMENTS ARE SUITABLE TO BE APPLIED BY THE CONTRACTOR PROVIDED THE CONTRACTOR DOES NOT DEVIATE FROM THE CONDITIONS DETAILED HEREIN AND THE CONTRACTOR VERIFIES THAT THE EXISTING STRUCTURE DOES NOT DEVIATE IN EITHER FORM OR MATERIAL FROM THE STRUCTURAL SUBSTRATES DETAILED HEREIN.
- ANY MODIFICATIONS OR ADDITIONS TO THESE APPROVAL DOCUMENTS WILL VOID THE APPROVAL DOCUMENTS.
- WHEN THE SITE CONDITIONS DEVIATE FROM THESE APPROVAL DOCUMENTS, THE BUILDING OFFICIAL MAY ELECT ONE OF THE FOLLOWING OPTIONS:
 - REQUIRE THAT SITE SPECIFIC DOCUMENTS BE PREPARED, SIGNED, DATED AND SEALED BY A LICENSED ENGINEER OR REGISTERED ARCHITECT, WHICH DETAIL AND JUSTIFY THE DEVIATION. SAID DOCUMENTS SHALL BE SUBMITTED TO THE PRODUCT ENGINEER FOR REVIEW AS A CONDITION TO THE BUILDING OFFICIAL GRANTING HIS/HER APPROVAL.
 - REQUIRE THAT A ONE-TIME SITE SPECIFIC APPROVAL BE APPLIED FOR AND SECURED FROM THE MIAMI-DADE COUNTY PRODUCT CONTROL DIVISION.
- WHEN THE SITE CONDITION DEVIATIONS OCCUR WITHIN THE HIGH VELOCITY HURRICANE ZONE AREAS ONLY OPTION "B" SHALL BE ACCEPTED BY THE BUILDING OFFICIAL.
- PRODUCT MARKINGS SHALL BE WITHIN 12" OF ONE END OF THE PANEL WITH A MINIMUM OF ONE MARKING PER PANEL AND SHALL BE PERMANENTLY LABELED AS FOLLOWS:
 TOWN & COUNTRY INDUSTRIES, INC.
 FT. LAUDERDALE, FL
 MIAMI-DADE COUNTY PRODUCT APPROVED
- STORM PANELS SHALL BE 3004-H34 OR 5052-H34 ALUMINUM ALLOY WITH THE FOLLOWING MINIMUM THICKNESS AND MECHANICAL PROPERTIES: NOMINAL 0.050"
- ALL EXTRUSIONS SHALL BE 6063-T6 ALUMINUM ALLOY, U.O.N.
- ALL BOLTS AND WASHERS SHALL BE GALVANIZED OR STAINLESS STEEL WITH A MINIMUM TENSILE STRENGTH OF 60 K.S.I., U.O.N.
- TOP & BOTTOM DETAILS SHOWN MAY BE INTERCHANGED AS FIELD CONDITIONS DICTATE. PANELS MAY BE MOUNTED HORIZONTALLY WHERE APPLICABLE, EXCEPT FOR "h" AND "U" HEADER MOUNTING CONDITIONS.



PRODUCT REVISED
 as complying with the Florida Building Code
 Acceptance No. 05-0713.03
 Expiration Date 11/15/2010
 By: *Helmut H. Hahn*
 Miami Dade Product Control Division

Thomson-Tomasetti Group

130 Lakeshore Ave., Suite 450 - Ft. Lauderdale, FL 33301
 Tel: (754) 222-1696 Fax: (754) 522-3691 CO.# 7519
 Website: www.TheTTGroup.com
 Copyright © 2005 Thomson-Tomasetti Group, Inc.

0.050" ALUMINUM STORM PANEL
Town & Country
 A Division of Thomson-Tomasetti Group, Inc.
 400 West McAlister Road, Fort Lauderdale, FL 33309
 Phone: (866) 229-9919 Fax: (954) 976-7795

V.J. Knezovich
 Professional Engineer
 FL License No. 16010983

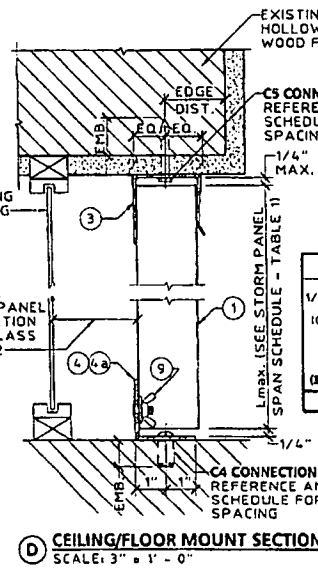
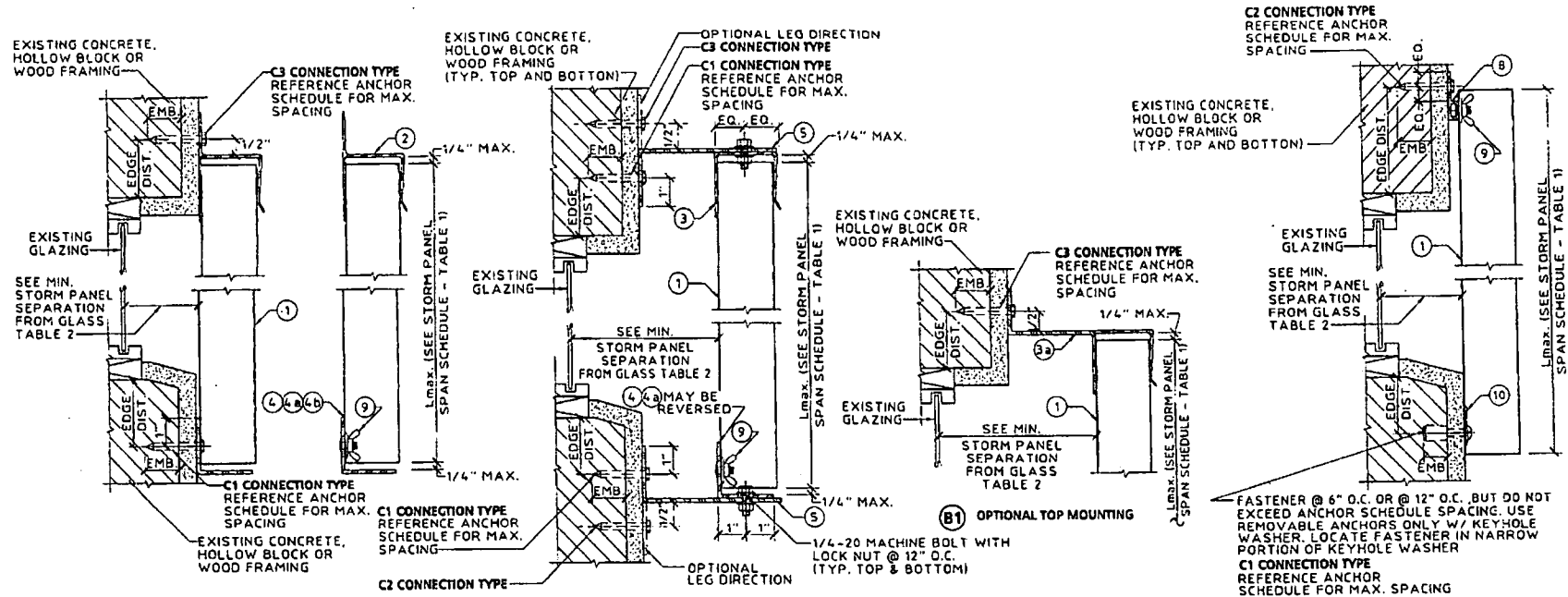
JUN 29 2005

REVISIONS	DESCRIPTION	DATE	BY

Date: 06/29/2005
 Drawn by: MCR
 AS NOTED
 Design by: NW
 Checked by: JVC

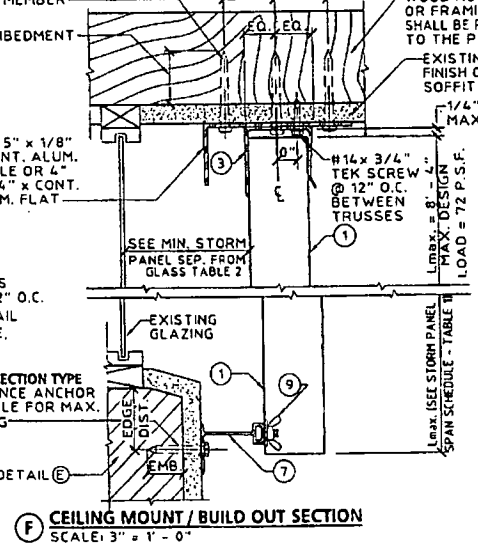
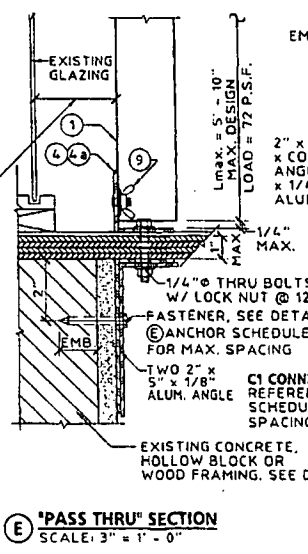
05-353

sheet 1 of 6



DETAIL (E) ("PASS THRU" SEC.) ANCHOR SCHEDULE

CONC. (3.33 KSI)	HOLLOW BLOCK (CMU) BLOCK	CONC. (3.33 KSI)	WOOD
12"	4"	7"	12"



PRODUCT REVISED as complying with the Florida Building Code
Acceptance No. 05-0713.03
Expiration Date 11/16/2010
By: *Helmut J. Knevezich*
Miami Data Product Control Division

Thomton-Tomasetti Group
330 N. Andrews Ave., Suite 430 - Ft. Lauderdale, FL 33301
Tel: (954) 522-3698 - Fax: (954) 522-3699
Website: www.TTCGroup.com
Copyright © 2005 Thomton-Tomasetti Group, Inc.

ALUMINUM STORM PANEL
Span & Country
A Division of ATC Supply Co., Inc.
460 West Atlantic Blvd., Ft. Lauderdale, FL 33309
Phone: (954) 218-8018 - Fax: (954) 218-7703

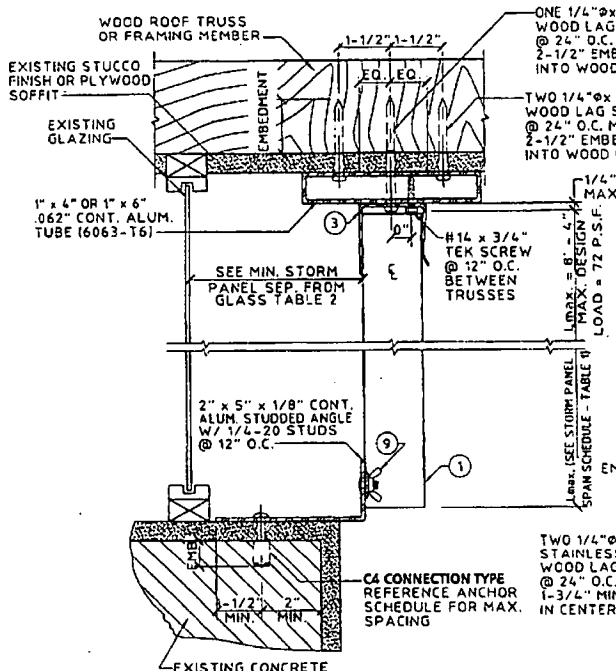
V.J. Knevezich
Professional Engineer
FL License No. 2010981

JUN 29 2005

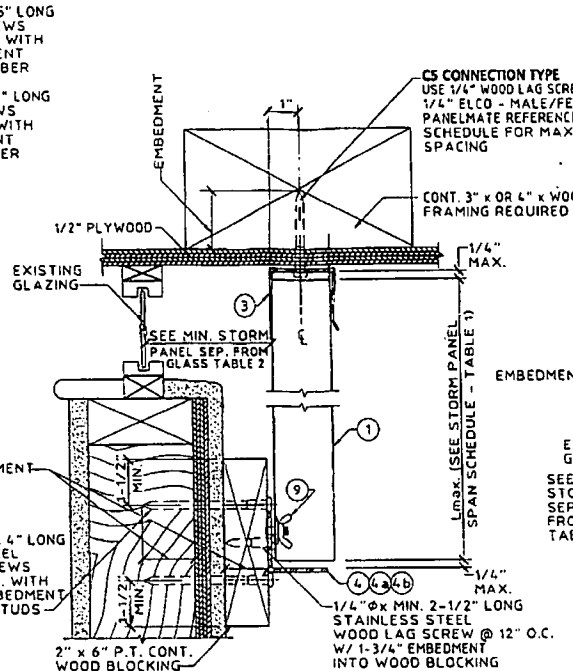
REVISIONS

NO.	DATE	DESCRIPTION	BY	CHKD.

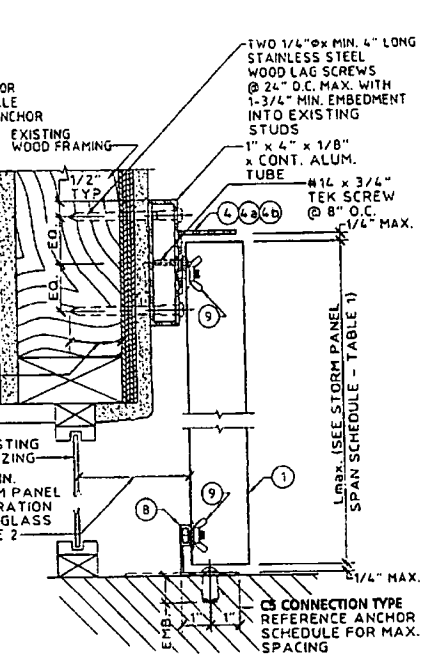
DATE: 06/29/2005
SCALE: AS NOTED
DRAWN BY: NNV
CHECKED BY: VJK
CREATED BY: 05-353
SHEET 2 OF 5



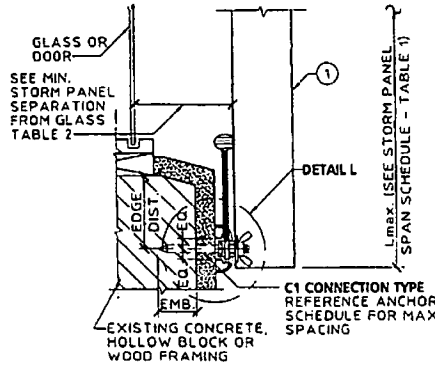
G BUILD-DOWN / BUILD-OUT SECTION
SCALE: 3" = 1' - 0"



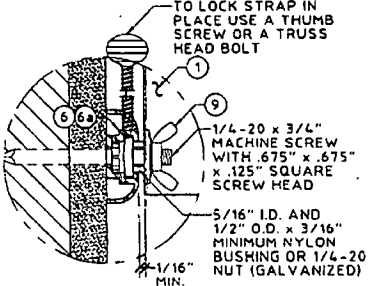
H CEILING/BUILD-OUT MOUNT SECTION
SCALE: 3" = 1' - 0"



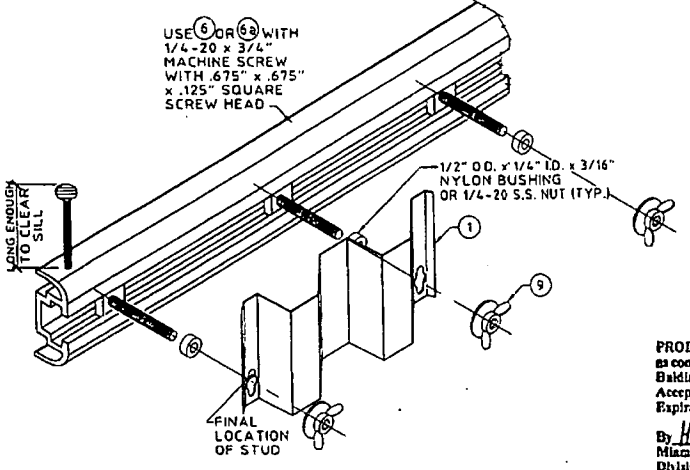
J BUILD-UP/FLOOR MOUNT SECTION
SCALE: 3" = 1' - 0"



K C-TRACK ASSEMBLY - INSIDE MOUNT
SCALE: 3" = 1' - 0"



L C-TRACK ASSEMBLY - (BLOW UP)
SCALE: HALF SIZE



M C-TRACK ASSEMBLY (ISOMETRIC VIEW)
N.T.S.

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 05-0713.03
 Expiration Date 11/16/2010
 By *William A. Knezevich*
 Mixed Data Product Control
 Division

Thornton-Tomasetti Group
 130 N. Andrews Ave., Suite 450 • Ft. Lauderdale, FL 33301
 Tel. (954) 372-3690 • Fax (954) 372-3691 • CON # 7319
 Website: www.tti.com
 Copyright © 2005 Thornton-Tomasetti Group, Inc.

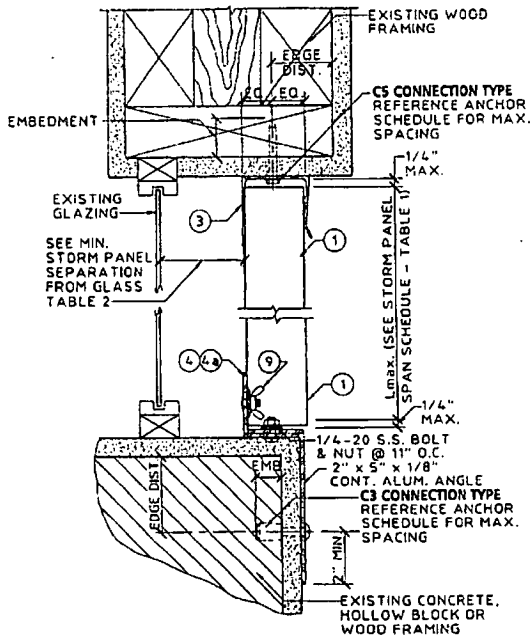
ALUMINUM STORM PANEL
Turn E. Country
 A Division of AIC Supply Co., Inc.
 400 West McAlister Road • Fort Lauderdale, FL 33309
 Phone: (866) 226-5071 • Fax: (954) 372-1713

V.J. Knezevich
 Professional Engineer
 FL License No. 128010563

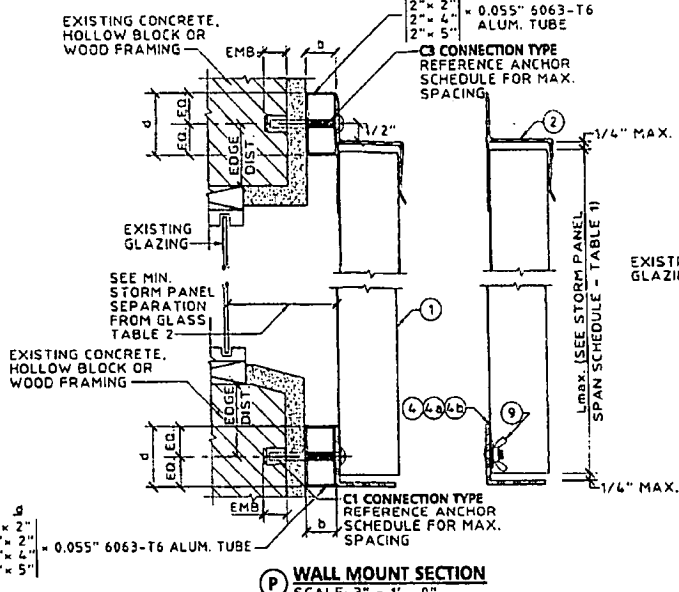
JUN 29 2005

REVISIONS	
NO.	DESCRIPTION

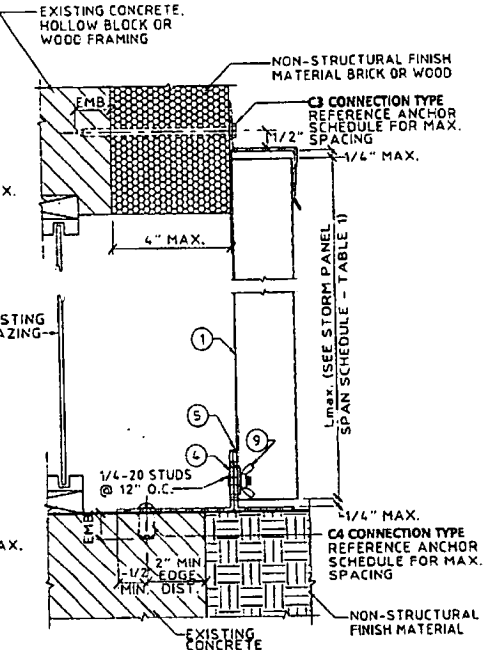
06/29/2005
 AS NOTED
 design by NW
 checked by MCR
 checked by VJK
 Drawing no. **05-353**
 sheet 3 of 6



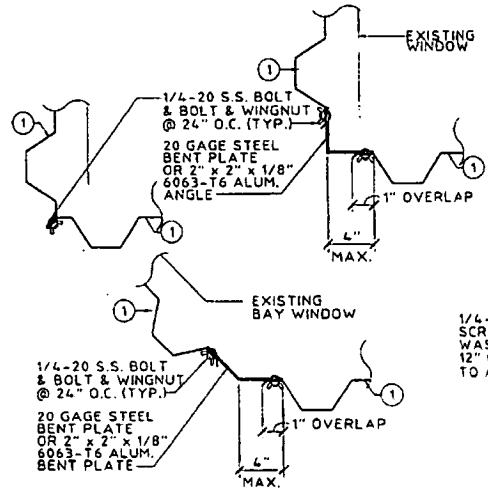
N WOOD CEILING/ INSIDE MOUNT SECTION
SCALE: 3" = 1'-0"



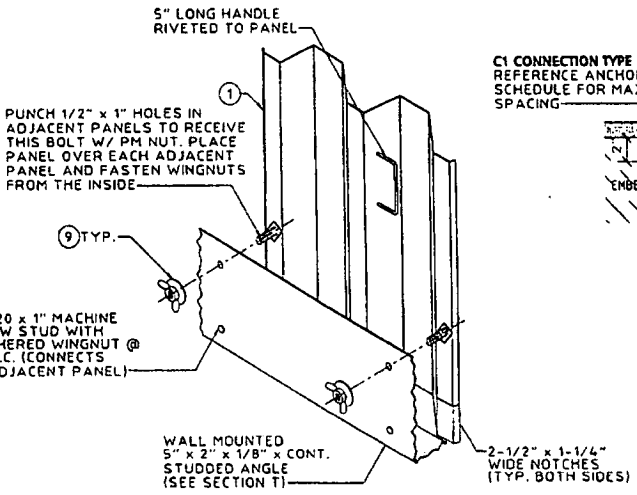
P WALL MOUNT SECTION
SCALE: 3" = 1'-0"



Q WALL MOUNT / BUILD OUT SECTION
SCALE: 3" = 1'-0"

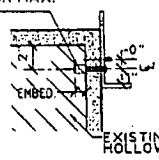


R TYPICAL CORNER CLOSURE DETAILS (PLAN)
SCALE: 1-1/2" = 1'-0"



S OPTIONAL INTERIOR FASTENING DETAIL (ISOMETRIC)
N.T.S.

C1 CONNECTION TYPE
REFERENCE ANCHOR
SCHEDULE FOR MAX.
SPACING



(MAX. PANEL HEIGHT = 7' - 0" & MAX DESIGN LOAD ± 72.00 P.S.F.)

T INTERIOR FASTENING ANGLE ASSEMBLY
SCALE: 1-1/2" = 1'-0"

DETAILS S & T NOTE:
THESE DETAILS DEPICT THE CONNECTION OF THE LAST PANEL FOR AN OPENING WITH PANELS INSTALLED FROM INSIDE. USE OF THESE DETAILS SHALL BE IN CONJUNCTION WITH AN "H" HEADER OR "U" HEADER TOP MOUNT.

PRODUCT REVISED
as complying with the Florida Building Code
Acceptance No 05-0713.03
Expiration Date 11/16/2010
By: *Helmut Alker*
Metal Dade Product Control Division

Thornton-Tomasetti Group
330 N. Andrews Ave., Suite 450 • Ft. Lauderdale, FL 33301
Tel: (954) 372-3696 • Fax: (954) 372-3697 • COA # 7519
Website: www.tti.com
Copyright © 2005 Thornton-Tomasetti Group, Inc.

ALUMINUM STORM PANEL
Iron & Country
A Division of ABC Supply Co., Inc.
408 West Michal Road • Fort Lauderdale, FL 33309
Phone: (954) 370-0919 • Fax: (954) 370-1728

V.J. Knezevich
Professional Engineer
FL License No. 70010016783

JUN 29 2005

NO.	DATE	REVISIONS
1	06/29/05	ISSUED FOR PERIODIC REVIEW

06/29/2005

AS NOTED MCR

Drawn by NW Checked by YK

05-353

Sheet 4 of 6

MINIMUM STORM PANEL SEPARATION FROM GLASS				
TABLE	POSITIVE DESIGN LOAD (W) (P.S.F.)	ACTUAL SPAN (L) (FT - IN)	COLUMN 1	COLUMN 2
			MIN. SEP. FOR ALL INSTALLATIONS LESS THAN 30' ABOVE GRADE (INCHES)	MIN. SEP. FOR ALL INSTALLATIONS GREATER THAN 30' ABOVE GRADE (INCHES)
2	40.0	8-8	3	2-1/4
		10-6	5	3-3/8
	50.0	8-8	3	2-1/2
		9-10	5	3-1/4
	60.0	8-8	3	2-3/4
		9-5	5	3-1/4
	70.0	4-0	3	1-1/2
		8-8	3	3
	80.0	9-0	5	3-1/4
		4-0	3	1-1/2
	90.0	8-4	3	3
		4-0	3	1-1/2
	100.0	7-9	3	2-3/4
		4-0	3	1-1/2
	110.0	7-3	3	2-1/2
		4-0	3	1-1/2
	120.0	6-9	3	2-3/8
		3-0	3	1-1/2
		6-4	3	2-1/4

TABLE 1 NOTES:

1. DETERMINE BOTH THE POSITIVE AND THE NEGATIVE WIND LOADS. CHECK THEIR RESPECTIVE SPANS AND USE THE LESSER VALUE OF THE TWO.
2. FOR DESIGN LOADS BETWEEN TABULATED VALUES USE NEXT HIGHER LOAD OR LINEAR INTERPOLATION MAY BE USED TO DETERMINE ALLOWABLE SPANS.

TABLE 2 NOTE:

1. ENTER TABLE 2 WITH POSITIVE DESIGN LOAD TO DETERMINE MIN. STORM SHUTTER SEPARATION FROM GLASS.

TABLE	MAX. ALLOWABLE STORM PANEL SPAN SCHEDULE		
	POSITIVE OR NEGATIVE DESIGN LOAD (P.S.F.)	SPAN FOR NEG PRESSURE (FT - IN)	SPAN FOR POS PRESSURE (FT - IN)
	4.0	12'-0"	10'-4"
	4.5	11'-3"	10'-1"
	5.0	10'-8"	9'-9"
	5.5	10'-2"	9'-6"
	6.0	9'-9"	9'-3"
	6.2	9'-7"	9'-1"
	6.5	9'-4"	8'-11"
	7.0	9'-0"	8'-7"
	7.2	8'-11"	8'-4"
	7.5	8'-8"	8'-0"
	8.0	8'-3"	7'-6"
	9.0	7'-4"	6'-8"
	10.0	6'-7"	6'-0"
	11.0	6'-0"	5'-5"
	12.0	5'-6"	5'-0"
	13.0	5'-1"	4'-7"
	14.0	4'-8"	4'-3"
	15.0	4'-4"	4'-0"
	16.0	4'-1"	3'-9"
	17.0	3'-10"	3'-6"
	18.0	3'-8"	3'-4"
	19.0	3'-5"	3'-1"
	20.0	3'-3"	3'-0"
	21.0	3'-1"	2'-10"
	22.0	3'-0"	2'-8"
	23.0	2'-10"	2'-7"

PRODUCT REUSED as complying with the Florida Building Code Acceptance No. 05-0718.03 Expiration Date 11/16/09
 By *Helmut A. Knevezich*
 Miami Dade Product Control Division

Thornton-Tomasetti Group
 130 N. Andrews Ave., Suite 150, Ft. Lauderdale, FL 33301
 Tel: (954) 572-3690 Fax: (954) 572-2449
 Website: www.tti-usa.com
 Copyright © 2005 Thornton-Tomasetti Group, Inc.

0-0-0-0" ALUMINUM STORM PANEL
Span & Country
 A Division of ABC Supply Co., Inc.
 408 West McNichols Road - Fort Lauderdale, FL 33309
 Phone: (954) 226-8117 Fax: (954) 226-1031

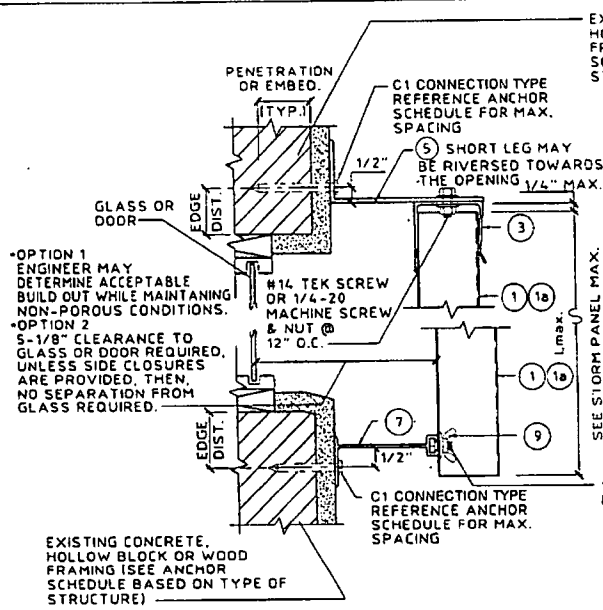
V.J. Knevezich
 Professional Engineer
 FL License No. 70019983

JUN 29 2005

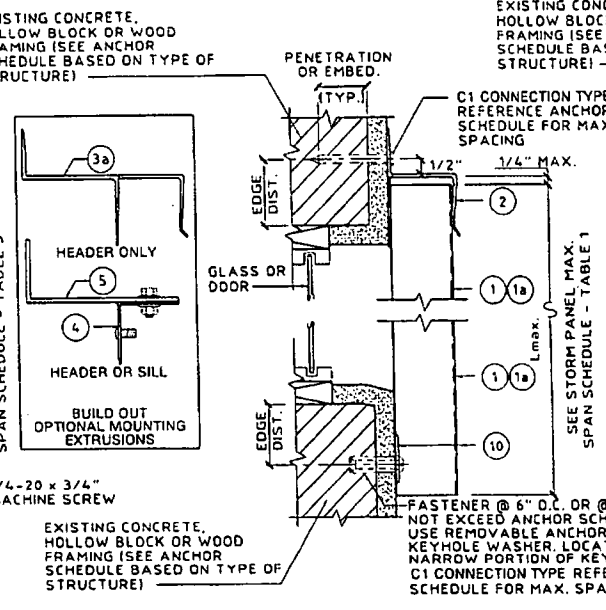
REVISIONS

NO.	DATE	BY	DESCRIPTION

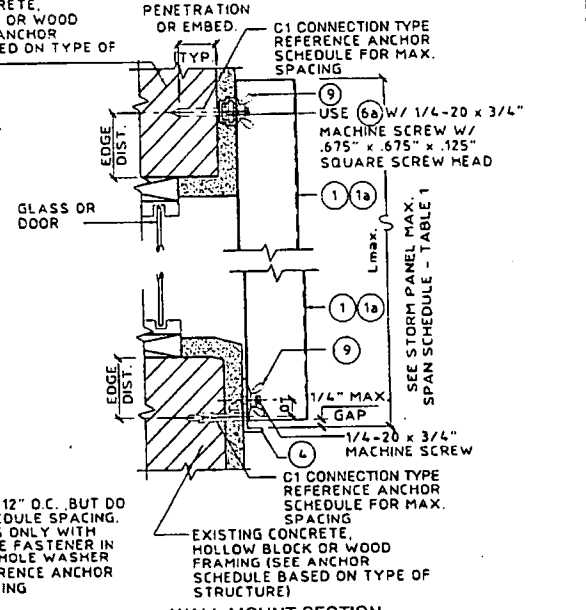
DATE: 06/29/2005
 DRAWN BY: MCR
 CHECKED BY: VIT
 DRAWING NO: 05-353
 SHEET 6 OF 6



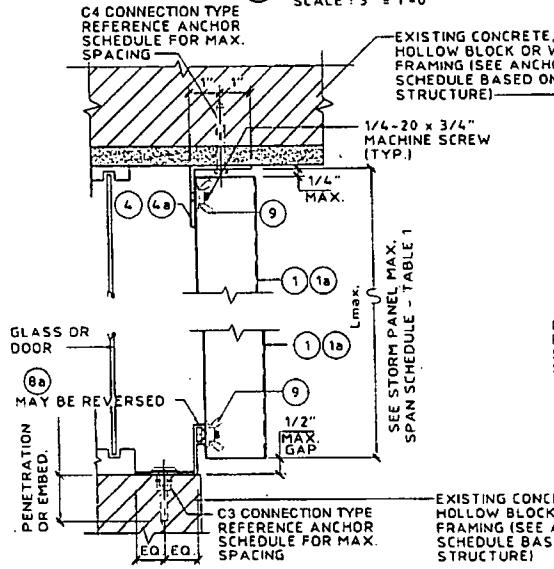
D BUILD-OUT MOUNT SECTION
SCALE: 3" = 1'-0"



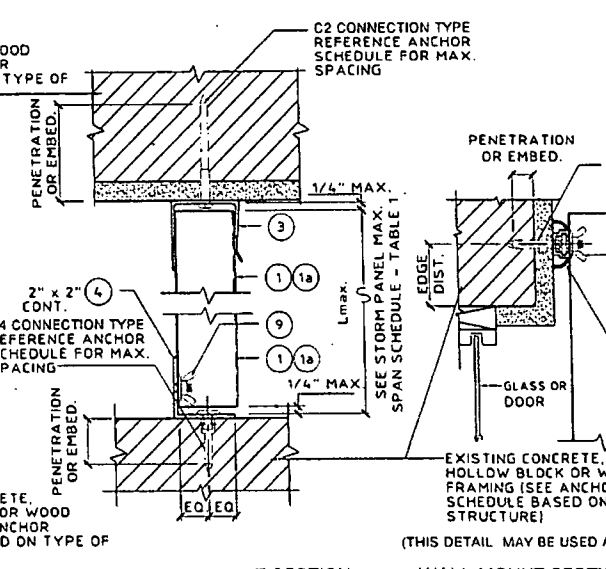
E WALL MOUNT SECTION
SCALE: 3" = 1'-0"



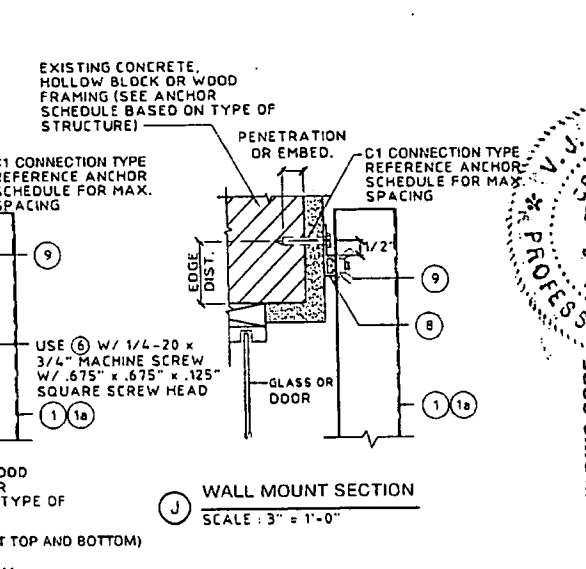
F WALL MOUNT SECTION
SCALE: 3" = 1'-0"



G CEILING/FLOOR MOUNT SECTION
SCALE: 3" = 1'-0"



H CEILING/FLOOR MOUNT SECTION
SCALE: 3" = 1'-0"

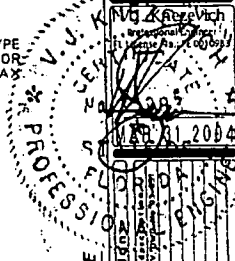


I WALL MOUNT SECTION
SCALE: 3" = 1'-0"



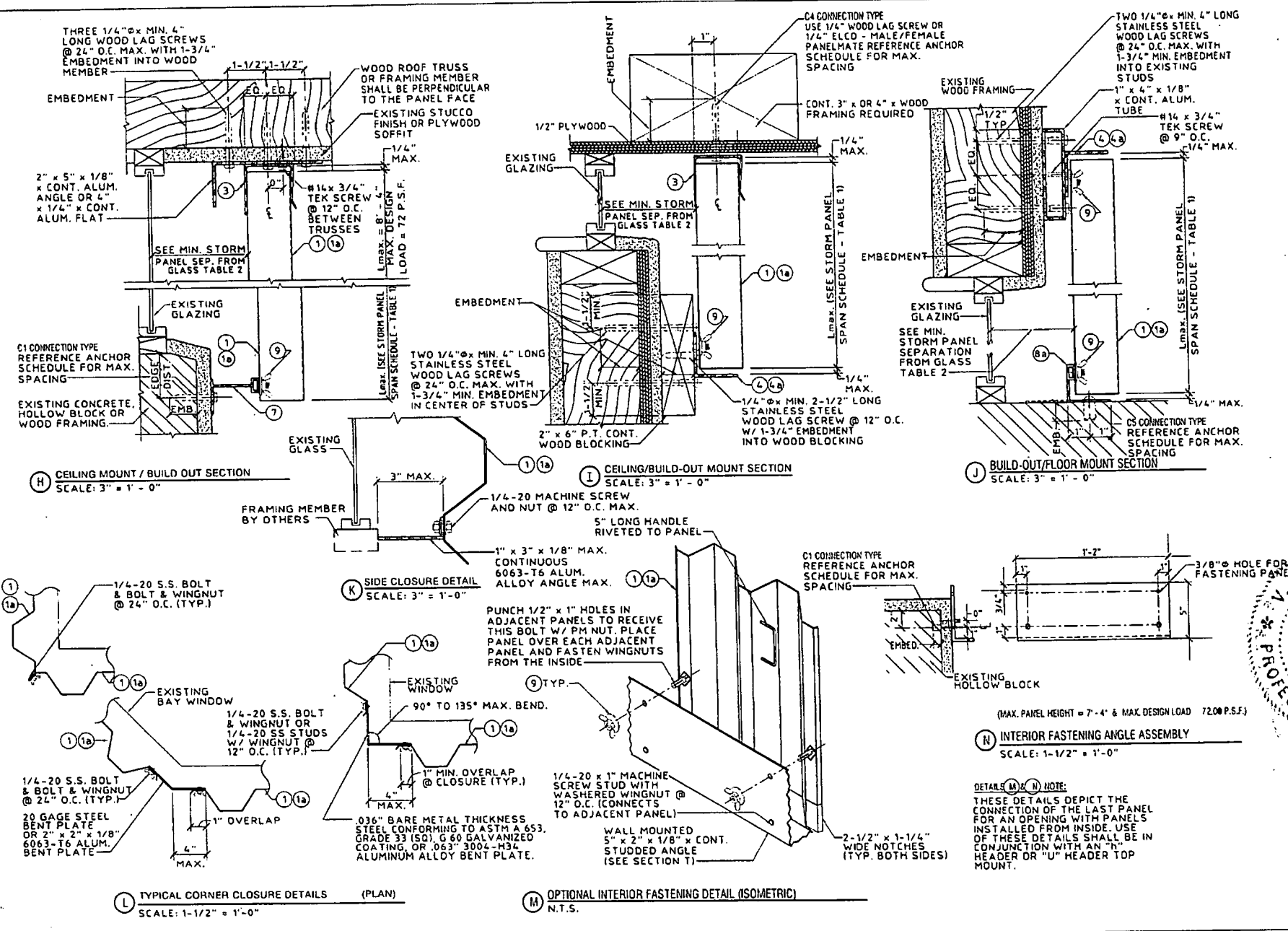
Knezevich & Associates, Inc.
 Consulting Engineers • Product Testing
 330 N. Andrews Ave., Suite 450 • Ft. Lauderdale, FL 33301
 Tel: (954) 522-6690 • Fax: (954) 522-3691 • COA # 3205
 Website: www.knezevich.com • E-mail: k&a@knezevich.com
 Copyright © 2004 Knezevich & Associates, Inc.

ALUM. STORM PANELS
 0.040" 0.050" 0.060"
Storm & County
 INDUSTRIES, INC.
 400 WEST MANAB ROAD • 8809 432-5019
 FT. LAUDERDALE, FL 33309



FLORIDA BUILDING CODE

DESIGNED BY	DATE	SCALE
DRAWN BY		
CHECKED BY		
DATE	03/18/2004	
DRAWING NO.	04-272	
SHEET	2	OF 6



K&A

Knezevich & Associates, Inc.
 Consulting Engineers • Product Testing
 330 N. Andrews Ave., Suite 450 Ft. Lauderdale, FL 33301
 Tel. (954) 522-3890 • Fax (954) 522-3891 • COA # 3205
 Website: www.knezevich.com • Email: k&a@knezevich.com
 Copyright © 2004 Knezevich & Associates, Inc.

FLORIDA BUILDING CODE

PROFESSIONAL SEAL
 Knezevich & Associates, Inc.
 No. 0318/2004
 State of Florida
 Seal No. 100079
 Date: 03/18/2004

04-272
 sheet 3 of 6

ANCHOR SCHEDULE

FASTENER MAXIMUM SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

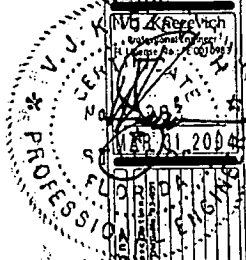
EXIST. STRUC.	ANCHOR TYPE	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	MIN. 2" EDGE DISTANCE																MIN. 3" EDGE DISTANCE																		
			SPANS UP TO 5'-0"				SPANS UP TO 8'-9"				SPANS UP TO 12'-0"				SPANS UP TO 15'-0"				SPANS UP TO 5'-0"				SPANS UP TO 8'-9"				SPANS UP TO 12'-0"				SPANS UP TO 15'-0"						
			(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)						
			CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)						
			C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5
CONCRETE	<p>1/4" ITW TAPCON W/ 1-1/4" MIN. EMBEDMENT (MIN. 3,000 P.S.I. CONCRETE)</p>	33.0	18	18	12	14	15	11	7	8	11	8	5	6	8	6	4	4	18	18	14	17	16	13	8	9	12	9	5	7	9	7	4	5			
		44.2	18	14	9	11	11	8	5	6	8	6	3	4	7	5	3	4	18	17	10	12	12	9	6	7	9	7	4	5	8	6	3	4			
		47.2	18	13	8	10	10	7	4	5	7	5	3	4	7	5	3	4	18	16	9	11	11	9	5	6	8	6	4	4	8	6	3	4			
		64.0	13	10	6	7	7	5	3	4	7	5	3	4	7	5	3	4	15	12	7	8	8	6	4	4	8	6	3	4	8	6	3	4			
		80.0	11	8	5	6	7	5	3	4	7	5	3	4	7	5	3	4	12	9	5	7	8	6	3	4	8	6	3	4	8	6	3	4			
	<p>1/4" ITW TAPCON W/ 2" MIN. EMBEDMENT (MIN. 3,000 P.S.I. CONCRETE)</p>	33.0	18	18	18	18	18	18	13	14	18	13	9	10	18	10	7	8	18	18	18	18	18	18	15	17	18	16	11	12	18	12	8	10			
		44.2	18	18	17	18	18	13	9	11	18	10	7	8	18	9	6	7	18	18	18	18	18	18	16	11	13	18	12	8	9	18	10	7	8		
		47.2	18	18	16	18	18	12	9	10	18	9	6	7	18	9	6	7	18	18	18	18	18	18	15	10	12	18	11	7	8	18	10	7	8		
		64.0	18	16	11	13	18	9	6	7	18	9	6	7	18	9	6	7	18	18	13	15	18	11	7	9	18	10	7	8	18	10	7	8			
		80.0	18	13	9	10	18	9	6	7	18	9	6	7	18	9	6	7	18	15	11	12	18	10	7	8	18	10	7	8	18	10	7	8			
	<p>1/4" ELCO TAPCON W/ 1-3/4" MIN. EMBEDMENT (MIN. 3,350 P.S.I. CONCRETE)</p>	33.0	18	18	18	18	18	18	14	16	18	15	10	12	18	12	8	9	18	18	18	18	18	18	17	18	18	18	13	15	18	15	10	12			
		44.2	18	18	18	18	18	15	10	12	18	11	7	9	17	10	6	8	18	18	18	18	18	18	16	11	13	18	14	9	11	18	13	8	10		
		47.2	18	18	17	18	18	14	9	11	17	10	7	8	17	10	6	8	18	18	18	18	18	18	18	12	14	18	13	9	10	18	13	8	10		
		64.0	18	18	12	14	17	10	7	8	17	10	6	8	17	10	6	8	18	18	16	18	18	18	13	9	10	18	13	8	10	18	13	8	10		
		80.0	18	15	10	11	17	10	6	8	17	10	6	8	17	10	6	8	18	18	12	14	18	13	8	10	18	13	8	10	18	13	8	10			
	<p>1/4" ELCO MALE/FEMALE "PANELMATE" & 1/4-20 MACHINE SCREW FOR FEMALE AND 1/4-20 W/W FOR MALE OR 1/4" ELCO CRETE FLEX W/ 1-3/4" MIN. EMBED. (MIN. 3,350 P.S.I. CONCRETE)</p>	33.0	18	18	18	18	18	18	13	15	18	14	10	11	18	11	8	9	18	18	18	18	18	18	17	18	18	18	17	12	14	18	14	10	11		
		44.2	18	18	18	18	18	14	10	11	18	10	7	8	18	9	6	7	18	18	18	18	18	18	18	13	14	18	13	9	10	18	12	8	9		
		47.2	18	18	17	18	18	13	9	11	18	10	7	8	18	9	6	7	18	18	18	18	18	18	17	12	13	18	12	8	10	18	12	8	9		
		64.0	18	17	12	14	18	10	7	8	18	9	6	7	18	9	6	7	18	18	15	18	18	18	18	8	10	18	12	8	9	18	12	8	9		
		80.0	18	14	10	11	18	9	6	7	18	9	6	7	18	9	6	7	18	17	12	14	18	12	8	10	18	12	8	9	18	12	8	9			
<p>1/4" POWERS ZAMAC NAIL-IN W/ 1-1/8" MIN. EMBEDMENT (MIN. 3,000 P.S.I. CONCRETE)</p>	33.0	18	18	13	15	18	10	7	8	14	7	5	6	11	6	4	5	18	18	16	18	18	14	9	10	16	10	6	8	12	8	5	6				
	44.2	18	14	9	11	14	8	5	6	10	5	4	4	9	5	3	4	18	18	12	14	18	10	6	8	12	7	5	5	10	7	4	5				
	47.2	18	13	9	10	13	7	5	6	10	5	3	4	9	5	3	4	18	17	11	13	15	9	6	7	11	7	4	5	10	7	4	5				
	64.0	17	9	6	7	10	5	3	4	9	5	3	4	9	5	3	4	18	12	8	9	11	7	4	5	10	7	4	5	10	7	4	5				
	80.0	14	7	5	6	9	5	3	4	9	5	3	4	9	5	3	4	16	10	6	7	10	7	4	5	10	7	4	5	10	7	4	5				
<p>5/16" ITW XL TAPCON W/ 2-1/4" MIN. EMBEDMENT (MIN. 3,000 P.S.I. CONCRETE)</p>	33.0	18	18	18	18	18	18	18	18	18	18	18	18	18	18	15	17	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18				
	44.2	18	18	18	18	18	18	18	18	18	18	14	16	18	18	12	15	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18				
	47.2	18	18	18	18	18	18	18	18	18	18	13	15	18	18	12	15	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18				
	64.0	18	18	18	18	18	18	13	15	18	18	12	15	18	18	12	15	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18				
	80.0	18	18	18	18	18	18	12	15	18	18	12	15	18	18	12	15	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18				
<p>1/4" ALL-POINTS SOLID-SET ANCHOR W/ 7/8" EMBEDMENT & 1/4-20 STAINLESS STEEL MACHINE SCREW (MIN. 3,000 P.S.I. CONCRETE)</p>	33.0	18	18	15	17	18	11	8	9	18	8	6	7	15	6	5	5	18	18	18	18	18	18	15	17	18	16	11	12	18	13	8	10				
	44.2	18	15	11	12	18	8	6	7	14	6	4	5	13	5	4	4	18	18	18	18	18	18	17	11	13	18	12	8	9	17	11	7	8			
	47.2	18	14	10	12	18	8	6	6	13	6	4	5	13	5	4	4	18	18	18	18	18	18	16	10	12	18	11	7	9	17	11	7	8			
	64.0	18	10	7	8	13	6	4	5	13	6	4	4	13	5	4	4	18	18	13	16	18	11	7	9	17	11	7	8	17	11	7	8				
	80.0	18	8	6	7	13	5	4	4	13	5	4	4	13	5	4	4	18	16	10	12	17	11	7	8	17	11	7	8	17	11	7	8				

SEE PAGE 6 OF 8 FOR COMPLETE ANCHOR NOTES.



Knezevich & Associates, Inc.
 Consulting Engineers - Product Testing
 330 N. Andrews Ave., Suite 650 - Ft. Lauderdale, FL 33309
 Tel. (954) 522-3690 - Fax (954) 522-2491 - COA # 3200
 Website: www.knezevich.com - Email: k&a@knezevich.com
 Copyright © 2004 Knezevich & Associates, Inc.

ALUM. STORM PANELS
 0.040" 0.050" 0.060"
Storm & Country
 INDUSTRIES, INC.
 400 WEST MADEIRA BLVD. #100
 FT. LAUDERDALE, FL 33309



FLORIDA BUILDING CODE
 REGISTRATION NO. 12345
 EXPIRES 12/31/2008
 SCALE AS NOTED
 DRAWN BY ARV
 DESIGN BY VJK
 CHECKED BY VJK
 DRAWING NO. 04-272
 SHEET 4 OF 6

ANCHOR SCHEDULE

FASTENER MAXIMUM SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

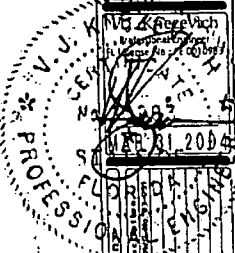
EXIST. STRUC.	ANCHOR TYPE	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	MIN. 2" EDGE DISTANCE								MIN. 3" EDGE DISTANCE																											
			SPANS UP TO 5'-0"				SPANS UP TO 8'-9"				SPANS UP TO 12'-0"				SPANS UP TO 15'-0"				SPANS UP TO 5'-0"				SPANS UP TO 8'-9"				SPANS UP TO 12'-0"				SPANS UP TO 15'-0"							
			(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)			
			CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)							
	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5								
HOLLOW CONCRETE BLOCK		33.0	17	13	8	19	9	7	4	5	7	5	3	4	5	5	4	3	3	18	15	9	11	10	9	5	6	7	5	3	4	6	5	3	3			
		44.2	12	10	6	7	7	5	3	4	5	4	3	3	4	4	3	3	3	13	11	7	8	7	6	3	4	5	4	4	3	5	4	3	3			
		47.2	11	9	5	6	6	5	3	3	4	4	3	3	3	4	4	3	3	13	11	6	7	7	6	3	4	5	4	4	3	5	4	3	3			
		64.0	8	6	4	5	5	3	3	3	4	4	3	3	3	4	4	3	3	9	8	4	5	5	4	3	4	5	4	4	3	5	4	3	3			
		80.0	7	5	3	4	4	3	3	3	4	4	3	3	3	4	4	3	3	7	6	3	4	5	4	3	4	5	4	4	3	5	4	3	3			
		33.0	18	18	16	18	18	14	9	11	16	10	6	8	13	8	5	6	18	18	18	18	18	17	11	13	18	13	8	10	16	10	6	8				
		44.2	18	18	12	14	16	10	7	8	12	7	5	6	11	7	4	5	18	18	15	18	18	13	8	10	15	9	6	7	13	8	5	6				
		47.2	18	17	11	13	15	9	6	7	11	7	4	5	11	7	4	5	18	18	14	16	18	12	8	9	14	9	6	7	13	8	5	6				
		64.0	18	13	8	10	11	7	4	5	11	7	4	5	11	7	4	5	18	16	10	12	14	9	6	7	13	8	5	6	13	8	5	6				
		80.0	16	10	6	8	11	7	4	5	11	7	4	5	11	7	4	5	18	13	8	10	13	8	5	6	13	8	5	6	13	8	5	6				
		33.0	18	18	12	14	17	10	7	8	12	7	5	6	10	6	4	4	18	18	15	18	18	13	8	10	16	9	6	7	12	7	5	6				
		44.2	18	13	9	10	13	7	5	6	9	5	3	4	8	5	3	4	18	17	11	13	16	9	6	7	11	7	4	5	10	6	4	5				
		47.2	18	13	8	10	12	7	4	5	8	5	3	4	8	5	3	4	18	16	10	12	15	9	6	7	11	6	4	5	10	6	4	5				
		64.0	15	9	6	7	9	5	3	4	8	5	3	4	8	5	3	4	18	12	8	9	11	6	4	5	10	6	4	5	10	6	4	5				
		80.0	12	7	5	6	8	5	3	4	8	5	3	4	8	5	3	4	15	9	6	7	10	6	4	5	10	6	4	5	10	6	4	5				
		33.0	18	18	14	16	18	12	7	9	14	8	5	6	11	7	4	5	18	18	17	18	18	15	9	11	15	11	7	8	12	9	5	6				
		44.2	18	15	10	12	14	8	5	6	10	6	4	5	9	5	3	4	18	18	12	15	15	11	7	8	11	8	5	6	10	7	4	5				
		47.2	18	14	9	11	13	8	5	6	9	6	4	4	9	5	3	4	18	18	12	14	14	10	6	8	11	8	5	5	10	7	4	5				
		64.0	17	10	7	8	9	6	4	4	9	5	3	4	9	5	3	4	18	14	8	10	11	8	5	6	10	7	4	5	10	7	4	5				
		80.0	13	8	5	6	9	5	3	4	9	5	3	4	9	5	3	4	15	11	7	8	10	7	4	5	10	7	4	5	10	7	4	5				
	33.0	18	16	10	12	14	9	6	7	10	6	4	5	8	5	3	4	18	18	15	18	18	13	8	10	15	9	6	7	12	7	5	6					
	44.2	18	12	8	9	11	6	4	5	8	5	3	3	7	4	3	3	18	17	11	13	15	9	6	7	11	7	4	5	10	6	4	5					
	47.2	18	11	7	8	10	6	4	4	7	4	3	3	7	4	3	3	18	16	10	12	14	9	6	7	10	6	4	5	10	6	4	5					
	64.0	13	8	5	6	7	4	3	3	7	4	3	3	7	4	3	3	18	11	7	9	10	6	4	5	10	6	4	5	10	6	4	5					
	80.0	10	6	4	5	7	4	3	3	7	4	3	3	7	4	3	3	15	9	6	7	10	6	4	5	10	6	4	5	10	6	4	5					
	33.0	18	15	11	12	17	9	6	7	12	6	4	5	10	5	3	4	18	15	11	12	17	9	6	7	12	6	4	5	10	5	3	4					
	44.2	18	11	8	9	12	6	4	5	9	4	3	3	8	4	3	3	18	11	8	9	12	6	4	5	9	4	3	3	8	4	3	3					
	47.2	18	11	7	8	11	6	4	5	8	4	3	3	8	4	3	3	18	11	7	8	11	6	4	5	8	4	3	3	8	4	3	3					
	64.0	15	8	5	6	8	4	3	3	8	4	3	3	8	4	3	3	15	8	5	6	8	4	3	3	8	4	3	3	8	4	3	3					
	80.0	12	6	4	5	8	4	3	3	8	4	3	3	8	4	3	3	12	6	4	5	8	4	3	3	8	4	3	3	8	4	3	3					

SEE PAGE 6 OF 8 FOR COMPLETE ANCHOR NOTES.



Knezevich & Associates, Inc.
 Consulting Engineers - Product Testing
 330 N. Andrews Ave., Suite 430 - Ft. Lauderdale, FL 33301
 Tel: (954) 572-3890 - Fax: (954) 522-5100
 Website: www.knezevich.com - Email: k&a@knezevich.com
 Copyright © 2004 Knezevich & Associates, Inc.

ALUM. STORM PANELS
 0.040" - 0.050" - 0.060"
Florn & Country INDUSTRIES, INC.
 400 WEST MAGNOLIA ROAD
 FT. LAUDERDALE, FL 33309



FLORIDA BUILDING CODE

DATE	03/18/2004
SCALE	AS NOTED
DESIGN BY	VJK
CHECKED BY	VJK
DRAWING NO.	04-272
SHEET	5 OF 6

ANCHOR SCHEDULE

FASTENER MAXIMUM SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

EXIST. STRUC.	ANCHOR TYPE	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	MIN. 3/4" EDGE DISTANCE																					
			SPANS UP TO 5'-0"				SPANS UP TO 8'-9"				SPANS UP TO 12'-0"				SPANS UP TO 15'-0"									
			(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)									
			CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)									
			C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5		
WOOD		33.0	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	9	8	8	8		
		44.2	12	12	12	12	12	12	12	11	9	10	12	12	9	7	8	12	8	6	7	7		
		64.0	12	12	12	12	12	12	12	8	7	7	12	8	6	7	12	8	6	7	12	8	6	7
		80.0	12	12	12	10	10	12	8	6	7	12	8	6	7	12	8	6	7	12	8	6	7	
		33.0	12	12	12	12	12	12	12	10	12	12	11	8	9	12	9	6	7	12	8	5	6	
		44.2	12	12	12	12	12	12	12	8	9	12	8	5	6	12	8	5	6	12	8	5	6	
		64.0	12	12	12	12	12	12	11	7	8	12	8	5	6	12	8	5	6	12	8	5	6	
		80.0	12	12	12	9	11	12	8	5	6	12	8	5	6	12	8	5	6	12	8	5	6	
		33.0	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	9	8	8	8	
		44.2	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	9	8	8	8	
		64.0	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	9	8	8	8	
		80.0	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	9	8	8	8	

ANCHOR NOTES:

- SPANS AND LOADS SHOWN HERE ARE FOR DETERMINING ANCHOR SPACING ONLY. ALLOWABLE STORM PANEL SPANS FOR SPECIFIC LOADS MUST BE LIMITED TO THOSE SHOWN IN TABLE 1.
- ENTER ANCHOR SCHEDULE BASED ON THE EXISTING STRUCTURE MATERIAL, ANCHOR TYPE AND EDGE DISTANCE. SELECT DESIGN LOAD GREATER THAN OR EQUAL TO NEGATIVE DESIGN LOAD ON SHUTTER AND SELECT SPAN GREATER THAN OR EQUAL TO SHUTTER SPAN.
- EXISTING STRUCTURE MAY BE CONCRETE, HOLLOW BLOCK OR WOOD FRAMING. REFERENCE ANCHOR SCHEDULE FOR PROPER ANCHOR TYPE BASED ON TYPE OF EXISTING STRUCTURE AND APPROPRIATE CONNECTION TYPE. SEE MOUNTING SECTION DETAILS FOR IDENTIFICATION OF CONNECTION TYPE.
- ANCHORS SHALL BE INSTALLED IN ACCORDANCE WITH MANUFACTURERS' RECOMMENDATIONS.
- MINIMUM EMBEDMENT AND EDGE DISTANCE EXCLUDES WALL FINISH OR STUCCO.
- WHERE EXISTING STRUCTURE IS WOOD FRAMING, WOOD FRAMING CONDITIONS VARY. FIELD VERIFY THAT FASTENERS ARE INTO ADEQUATE WOOD FRAMING MEMBERS, NOT PLYWOOD. FASTENING TO PLYWOOD IS ACCEPTABLE ONLY FOR SIDE CLOSURE PIECES.
- WHERE LAG SCREWS FASTEN TO NARROW FACE OF STUD FRAMING, FASTENER SHALL BE LOCATED IN CENTER OF NOMINAL 2" x 4" (MIN) WOOD STUD. 3/4" EDGE DISTANCE IS ACCEPTABLE FOR WOOD FRAMING. WOOD STUD SHALL BE "SOUTHERN PINE" G=0.55 OR GREATER DENSITY. LAG SCREWS SHALL HAVE PHILLIPS PAN HEAD OR HEX HEAD.
- MACHINE SCREWS SHALL HAVE MINIMUM OF 1/2" ENGAGEMENT OF THREADS IN BASE ANCHOR AND MAY HAVE EITHER A PAN HEAD, TRUSS HEAD, OR WAFER HEAD (SIDEWALK BOLT), U.O.N.
- DESIGNATES ANCHOR CONDITIONS WHICH ARE NOT ACCEPTABLE USES.
- * DESIGNATES ANCHORS WHICH ARE REMOVABLE BY REMOVING MACHINE SCREW, NUT OR WASHERED WINGNUT.
- FOR LOADS GREATER THAN THOSE SPECIFIED (ANCHOR SCHEDULE), SITE SPECIFIC FASTENER ANALYSIS SHALL BE PREPARED BY KNEZEVICH & ASSOCIATES, INC.
- SEE THE APPROPRIATE SBCCI PST & EST OR NES EVALUATION REPORT ON THE SPECIFIC FASTENER FOR SPECIAL INSPECTION REQUIREMENTS WHEN REQUIRED AS WELL AS FOR INSTALLATION, LIMITATIONS & IDENTIFICATION PURPOSES.
- FASTENER MAXIMUM SPACING ARE BASED ON FACTOR OF SAFETY OF 4:1 ON TENSION AND SHEAR VALUES WITH THE EXCEPTION OF THE 1/4" WOOD LAG SCREW AND THE 7/16" WOOD BUSHING WHICH ARE BASED ON NDS REQUIREMENTS AND SBCCI TESTING REQUIREMENTS RESPECTIVELY.

TABLE 1

STORM PANEL MAXIMUM SPAN SCHEDULE

NEGATIVE DESIGN LOAD W (P.S.F.)	THICKNESS		
	0.040"	0.050"	0.060"
	ALL MOUNTING CONDITIONS EXCEPT "F" ANGLE TRACK	ALL MOUNTING CONDITIONS EXCEPT "F" ANGLE TRACK	ALL MOUNTING CONDITIONS EXCEPT "F" ANGLE TRACK
	L MAX. (FT - IN)	L MAX. (FT - IN)	L MAX. (FT - IN)
30	11' - 11"	11' - 9"	14' - 11"
33	10' - 7"	11' - 2"	14' - 3"
35.8	10' - 2"	10' - 9"	13' - 8"
38.3	9' - 10"	10' - 4"	13' - 2"
40.7	9' - 6"	10' - 1"	12' - 10"
44.2	9' - 1"	9' - 8"	12' - 3"
47.2	8' - 10"	9' - 4"	11' - 11"
50.9	8' - 6"	9' - 0"	11' - 5"
52.4	8' - 4"	8' - 10"	11' - 2"
56	8' - 1"	8' - 7"	10' - 6"
60	7' - 10"	8' - 3"	9' - 9"
64	7' - 7"	8' - 0"	9' - 2"
68	7' - 4"	7' - 6"	8' - 7"
72	7' - 1"	7' - 1"	8' - 2"
76	6' - 9"	6' - 9"	7' - 8"
80	6' - 5"	6' - 5"	7' - 4"

TABLE 3

STORM PANEL WITH "F" ANGLE TRACK (TOP OR BOTTOM) MAX. SPAN SCHED.

NEGATIVE DESIGN LOAD W (P.S.F.)	THICKNESS		
	0.040"	0.050"	0.060"
	ALL MOUNTING CONDITIONS	ALL MOUNTING CONDITIONS	ALL MOUNTING CONDITIONS
	L MAX. (FT - IN)	L MAX. (FT - IN)	L MAX. (FT - IN)
30	11' - 11"	11' - 9"	14' - 11"
33	10' - 7"	11' - 2"	14' - 1"
35.8	10' - 2"	10' - 9"	12' - 11"
38.3	9' - 10"	10' - 4"	12' - 1"
40.7	9' - 6"	10' - 1"	11' - 5"
44.2	9' - 1"	9' - 8"	10' - 6"
47.2	8' - 10"	9' - 4"	9' - 10"
50.9	8' - 6"	9' - 0"	9' - 1"
52.4	8' - 4"	8' - 10"	8' - 10"
56	8' - 1"	8' - 3"	8' - 3"
60	7' - 9"	7' - 9"	7' - 9"
64	7' - 3"	7' - 3"	7' - 3"
68	6' - 10"	6' - 10"	6' - 10"
72	6' - 5"	6' - 5"	6' - 5"
76	6' - 1"	6' - 1"	6' - 1"
80	5' - 9"	5' - 9"	5' - 9"

TABLES 1 & 3 NOTE:

ENTER TABLE WITH NEGATIVE DESIGN LOAD TO DETERMINE MAX. PANEL SPAN (Lmax). POSITIVE LOADS LESS THAN OR EQUAL TO THE NEGATIVE LOAD ARE ACCEPTABLE. FOR DESIGN LOADS BETWEEN TABULATED VALUES, USE NEXT HIGHER LOAD OR LINEAR INTERPOLATION MAY BE USED TO DETERMINE ALLOWABLE SPANS.

TABLE 2 NOTE:

THIS SHUTTER SYSTEM IS DESIGNED SUCH THAT THERE IS NO SEPARATION FROM GLASS REQUIRED PROVIDED MINIMUM PANEL LENGTHS AS NOTED. PANEL LENGTHS LESS THAN THOSE NOTED IN TABLE ARE NOT ACCEPTABLE, UNLESS SITE SPECIFIC POROSITY CALCULATIONS ARE PERFORMED BY A PROFESSIONAL ENGINEER.

TABLE 2

MINIMUM PANEL LENGTH SCHEDULE

MOUNTING CONDITIONS	MINIMUM PANEL LENGTH- (IN)						
	TOP	DIRECT MOUNT OR RECESSED C-TRACK	2" x 2" STUD ANGLE	C-TRACK (6 OR 6a)	"h" OR "u" HEADER	F-TRACK	C-TRACK (6 OR 6a) W/ SIDE CLOSURE PIECES
BOTTOM							
DIRECT MOUNT OR RECESSED C-TRACK (6a)		52	34	110	30	57	-
2" x 2" STUD ANGLE		36	30	35	30	31	-
F-ANGLE TRACK		57	31	90	31	62	-
C-TRACK (6 OR 6a)		64	55	110	35	90	-
F-TRACK		57	49	90	31	76	-
C-TRACK (6 OR 6a) W/ SIDE CLOSURE PIECES		-	-	-	-	-	52



Knezevich & Associates, Inc.
 Consulting Engineers - Product Testing
 330 N. Andrews Ave., Suite 450 - Ft. Lauderdale, FL 33309
 Tel: (954) 322-5090 - Fax: (954) 322-9999 - CO: 13205
 Website: www.knezevich.com - Email: sales@knezevich.com
 Copyright © 2004 Knezevich & Associates, Inc.

0.040" 0.050" 0.060" ALUM. STORM PANELS
Turn & Country
 INDUSTRIES, INC.
 400 WEST JACKSONDALE, FL 32809



FLORIDA BUILDING CODE

DATE: 03/18/2004
 DRAWN BY: abv
 CHECKED BY: vjk
 DESIGN BY: vjk
 DRAWING NO: 04-272
 SHEET 6 OF 6

**TOWN OF SEWALL'S POINT BUILDING DEPARTMENT**

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

HURRICANE SHUTTER INSTALLATION CHECKLIST


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

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

- 1 Copy Completed Permit application**
- 2 Copies Shutter schedule**
- 2 Copies Floor plan sketch showing the location and ID number of each shutter.
MUST MATCH SHUTTER SCHEDULE.**
- 2 Copies Shutter engineering specifications complying with the
2004 FBC w/2006 revisions**
- 1 Copy Prior to the final inspection; an impact installation affidavit must be
submitted.**



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


 INSTR # 2022341
 OR BK 02259 PG 0636
 Pg 0636; (1pg)
 RECORDED 06/27/2007 12:34:43 PM
 MARSHA EWING
 CLERK OF MARTIN COUNTY FLORIDA
 RECORDED BY S Phoenix

NOTICE OF COMMENCEMENT

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT #: _____ TAX FOLIO #: _____

STATE OF Florida COUNTY OF Martin

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

01-38-41-006-002-00070-7

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

Homewood Lot 7 BLK B

GENERAL DESCRIPTION OF IMPROVEMENT: Aluminum hurricane panels

OWNER: Susan Roberts

ADDRESS: 12 N. Ridgeview Road Stuart FL 34996
 PHONE NUMBER: 772-283-0744 FAX NUMBER: 772-220-3186

INTEREST IN PROPERTY: owner

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

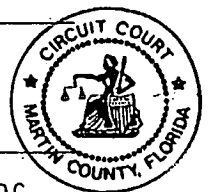
CONTRACTOR: Charles Law

ADDRESS: PO Box 29 Palm City FL 34991
 PHONE NUMBER: 772-219-0770 FAX NUMBER: 772-781-3824

SURETY COMPANY (IF ANY): Na

ADDRESS: _____
 PHONE NUMBER: _____ FAX NUMBER: _____
 BOND AMOUNT: _____

STATE OF FLORIDA
 MARTIN COUNTY
 THIS IS TO CERTIFY THAT THE
 FOREGOING 1 PAGE(S) IS A TRUE
 AND CORRECT COPY OF THE ORIGINAL.
 MARSHA EWING, CLERK



LENDER/MORTGAGE COMPANY: Na

ADDRESS: _____
 PHONE NUMBER: _____ FAX NUMBER: _____
 BY: [Signature] D.C.
 DATE: 6/27/07

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

NAME: Na

ADDRESS: _____
 PHONE NUMBER: _____ FAX NUMBER: _____

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES _____ OF _____ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN

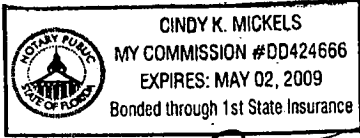
SECTION 713.13(1)(B), FLORIDA STATUTES.

PHONE NUMBER: _____ FAX NUMBER: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT:

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

[Signature]
 SIGNATURE OF OWNER



SWORN TO AND SUBSCRIBED BEFORE ME THIS 26 DAY OF JUNE 2007

BY: Susan Roberts

WHO IS PERSONALLY KNOWN TO ME OR PRODUCED ID _____ TYPE OF ID _____

[Signature]
 NOTARY SIGNATURE

NOTARY SEAL

ACORD	CERTIFICATE OF LIABILITY INSURANCE	OP ID LG LARCO-1	DATE (MM/DD/YYYY) 06/25/07
PRODUCER ARDEN INSURANCE ASSOCIATES KENN NORBERG, LIC. # A192988 525 W. LANTANA RD. LANTANA FL 33462-1625 Phone: 561-582-4101 Fax: 561-586-8061		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED CHARLES LAW CONSTRUCTION, INC. & CHARLES LAW CONSTRUCTION II CHARLES LAW P.O. BOX 7753 JUPITER FL 33468		INSURERS AFFORDING COVERAGE NAIC #	
		INSURER A: FLA. WORKERS COMPENSATION S O A INSURER B: MED-COBTINENT INSURANCE GROUP INSURER C: INSURER D: INSURER E:	

COVERAGES

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

INSR	POLY	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
B	<input checked="" type="checkbox"/>	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	04GL000666523	03/11/07	03/11/08	EACH OCCURRENCE \$ 1,000,000
		DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 100,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000				
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON OWNED AUTOS				COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEFUNCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETARY PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	4214B16-2-07 WILL BE ISSUED BY FWC/JUA			VFC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

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

CERTIFIED GENERAL CONTRACTOR

CERTIFICATE HOLDER

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
 ONE S. SEWALL'S POINT ROAD
 SEWALL'S POINT, FLORIDA 34996
 FAX: 772-220-4765

CANCELLATION

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

AUTHORIZED REPRESENTATIVE
Kenn Norberg

ACORD CERTIFICATE OF INSURANCE

DATE (MM/DD/YY)
 08-28-07

PRODUCER
 ARDEN INS ASSOCIATES INC
 525 W LANTANA RD
 LANTANA FL 33462
 267YG

INSURED
 CHARLES LAW CONSTRUCTION, INC
 II
 P O BOX 7753
 JUPITER FL 33468

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 FLORIDA W.C. JVA
 - COMPANY
B
 - COMPANY
C
 - COMPANY
D

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

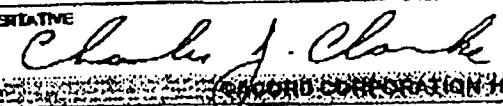
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PRCT.				GENERAL AGGREGATE \$ PRODUCTS-COMP/OP AGG. \$ PERSONAL & ADV. INJURY \$ EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED. EXPENSE (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	WORKERS COMPENSATION AND EMPLOYER'S LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input checked="" type="checkbox"/> INCL. <input type="checkbox"/> EXCL.	(UB-4214816-2-07) MINIMUM PREMIUM POLICY	08-12-07	06-12-08	STATUTORY LIMITS N/A EACH ACCIDENT \$ 100,000 DISEASE - POLICY LIMIT \$ 500,000 DISEASE - EACH EMPLOYEE \$ 100,000
	OTHER				

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

THIS REPLACES ANY PRIOR CERTIFICATE ISSUED TO THE CERTIFICATE HOLDER AFFECTING WORKERS COMP COVERAGE.

CERTIFICATE HOLDER
 TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
 ONE S. SEWALL'S POINT ROAD
 SEWALL'S POINT, FLORIDA 34996
 FAX: 772-220-4765

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




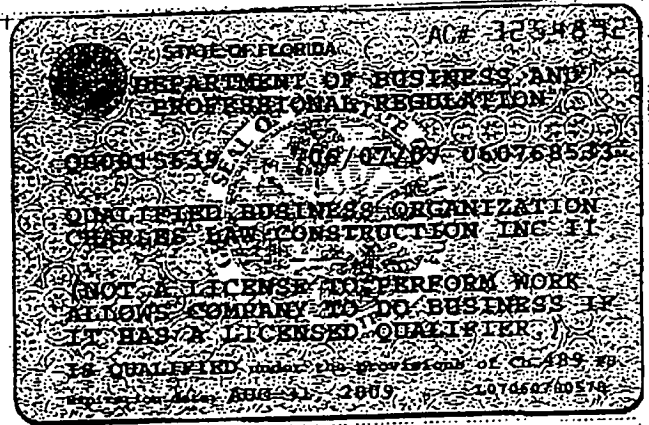
STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

CHARLES LAW CONSTRUCTION INC II
P O BOX 7753
JUPITER FL 33468



DETACH HERE

AC# 3254892

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

SEQ# 007060700578

DATE	BATCH NUMBER	LICENSE NBR
08/01/09	080708537	0880156397



THE BUSINESS ORGANIZATION
NAMED IS OR QUALIFIED
UNDER THE PROVISIONS OF CHAPTER
EXPIRATION DATE: AUG 31, 2009
(THIS IS NOT A LICENSE TO PERFORM WORK, THIS ALTHOUGH
COMPANY TO DO BUSINESS ONLY)
CHARLES LAW CONSTRUCTION INC
516 MARQUETTE
JUPITER

HIGLEY BENSON
SECRETARY

CHARLES CRAMER
GOVERNOR

DISPLAY AS REQUIRED BY LAW

Business name changes require a new license.

This license expires on September 30, 2007. Renewal notices are mailed at the end of July. If you do not receive the notice by the middle of August, please let us know.

I hope you have a successful year.

Tax Collector

*** DETACH AND DISPLAY BOTTOM PORTION, AND KEEP UPPER PORTION FOR YOUR RECORDS ***

2001-05635

STATE OF FLORIDA
PALM BEACH COUNTY
OCCUPATIONAL LICENSE

OC-032

CLASSIFICATION

EXPIRES: SEPTEMBER - 30 - 2007

CHARLES LAW CONSTRUCTION INC
LAW CHARLES FRANCIS

** LOCATED AT

CNTY \$27.50

506 XANADU PLACE
JUPITER FL 33468

TOTAL \$27.50

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

GENERAL CONTRACTOR

CGC047434

THIS IS NOT A BILL - DO NOT PAY

PAID. PBC TAX COLLECTOR
\$27.50 OCC 049 023867 08-17-2006

Peter H. Carney
TAX COLLECTOR PALM BEACH COUNTY

THIS LICENSE VALID ONLY WHEN RECEIPTED BY TAX COLLECTOR

*** DETACH AND DISPLAY BOTTOM PORTION, AND KEEP UPPER PORTION FOR YOUR RECORDS ***

2001-05637

STATE OF FLORIDA
PALM BEACH COUNTY
OCCUPATIONAL LICENSE

CW-001

CLASSIFICATION

EXPIRES: SEPTEMBER - 30 - 2007

CHARLES LAW CONSTRUCTION INC
LAW CHARLES FRANCIS

** LOCATED AT

C/WIDE \$369.60

506 XANADU PLACE
JUPITER FL 33468

TOTAL \$369.60

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

GENERAL CONTRACTOR

CGC047434

THIS IS NOT A BILL - DO NOT PAY

PAID. PBC TAX COLLECTOR
\$369.60 OCC 049 023868 08-17-2006

Peter H. Carney
TAX COLLECTOR, PALM BEACH COUNTY

THIS LICENSE VALID ONLY WHEN RECEIPTED BY TAX COLLECTOR

- 2) 2 - 6' LADDERS
- 6) EXTRA HARDWARE (BOX)
- 3) 1 - CHOP SAW
- 4) 1 - SHAIRS



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
 One S. Sewall's Point Road
 Sewall's Point, Florida 34996
 Tel 772-287-2485 Fax 772-220-4765

IMPACT PROTECTION INSTALLATION AFFIDAVIT

BLDG. PERMIT NUMBER: 8657
 JOB SITE ADDRESS: 12 N. Ridgeview Road Stuart FL 34996
 CONTRACTOR/OWNER: Charles Law Construction
 PHONE NUMBER: 561-741-7523 or 561-252-3994
 QUALIFIER NAME: Charles Law
 LICENSE NUMBER: C G C 047434

I, Charles Law, do hereby affirm:
 Owner or Contractor - Please print name

The following impact protection was used as per the 2004 FBC 1609.1.4 for all exterior glazed openings at the above referenced job site.

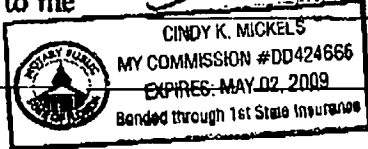
- Impact Resistant Glass
- Approved Shutters

That I personally observed the complete installation of all hurricane panel/shutters on the above referenced project and further affirm that they are fitted properly for the openings they are intended to protect.

[Signature] Date: 7/16/07
 Signature of Owner or Contractor

Sworn to and subscribed before me this
16 Day of July 20 07
 By Charles Law
Cindy K Mickels
 Notary Public, State of Florida Notary Seal/Stamp

Personally known to me
 Produced ID [Notary Seal]
 Type _____



Sewall's Point Building Department will inspect the structural attachment of the panel rails and/or the shutter assembly attachment to the building, per the manufacturer's product approvals, ASCE 7-02 and the 2004 Florida Building code at final inspection.

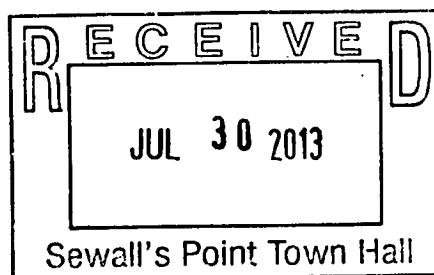
TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8/8, 2007 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1	NPDES CUMMINGS	NPDES	PASS	
	83 S. RIVER			INSPECTOR: <i>[Signature]</i>
4	8668 Kremser	Final powers	PASS	CLOSE
	23 Ridgeland Dr Apey Powers			INSPECTOR: <i>[Signature]</i>
6	8495 Sharfi	Electric on dock	PASS	CLOSE
	13 N Sewalls Pt O/B			INSPECTOR: <i>[Signature]</i>
3	8659 Roberts	Final	PASS	CLOSE
	12 N. Ridgeview Charles Law Cost			INSPECTOR: <i>[Signature]</i>
2	8672 Ferraro	Elec. rough	FAIL	
	4 Kingston Ct Gulick	Hand rough	CANCEL	INSPECTOR: <i>[Signature]</i>
5	Tree Jordan	Tree	PASS	
	110 N. Sewalls O/B			INSPECTOR: <i>[Signature]</i>
7	8677 Barile	Shattering reinspect	FAIL	
	17 Fieldway Dr Rob Hroshberger			INSPECTOR: <i>[Signature]</i>
OTHER:				
C.E.	7 HERITAGE	CUT OAK TREES		
C.E.	134 S. RIVER	ROTTING SIDING IN DUNESTAL		

WITHDRAWAL



July 9, 2013

Ms. Valerie Camlet
Building Department
Town of Sewall's Point
Sewall's Point, Florida

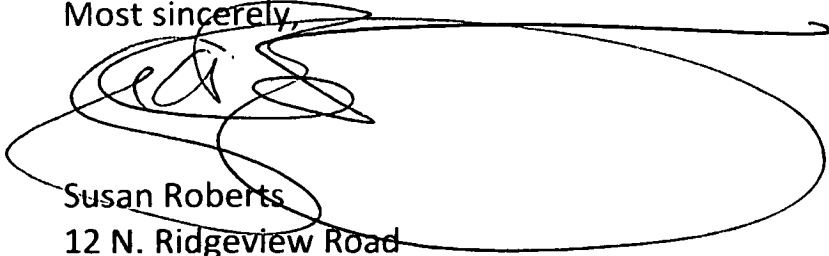
RE: PERMIT PN-9936

TO WHOM IT MAY CONCERN:

I would like you to please cancel Permit PN-9936 as the work was not done.

Thank you for your assistance in this matter.

Most sincerely,



Susan Roberts
12 N. Ridgeview Road
Stuart, Florida 34996
772.283.0744



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

BUILDING PERMIT CARD

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

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	9936	DATE ISSUED:	11-18-2011
SCOPE OF WORK:	DRIVEWAY REPAIR		
CONTRACTOR:	ROBERTS O/B		
PARCEL CONTROL NUMBER:	01-38-41-006-002-0070-7	SUBDIVISION:	HOMEWOOD LOT #7
CONSTRUCTION ADDRESS:	12 NO RIDGEVIEW ROAD		
OWNER NAME:	SUSAN ROBERTS		
QUALIFIER:	SUSAN ROBERTS O/B	CONTACT PHONE NUMBER:	283-0744

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

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

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

INSPECTIONS

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

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

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

TITLEHOLDER NAME: SUSAN ROBERTS Phone (Day) 283-0744 (Fax) _____

Site Address: 12 N. RIDGEVIEW RD. City: STUART State: FL Zip: 34996

Legal Description HOMWOOD LOT 7 BLK B Parcel Control Number: _____

Owner Address (if different): SAME AS ABOVE City: _____ State: _____ Zip: _____

SCOPE OF WORK (PLEASE BE SPECIFIC): Repair of cracked edges on portion of concrete driveway w/grade concrete

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 250.00 +/-
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 AE9 AE8
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: _____ Phone: _____ Fax: _____

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

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

LOCAL CONTACT: _____ Phone Number: _____

DESIGN PROFESSIONAL: _____ Fla. License# _____

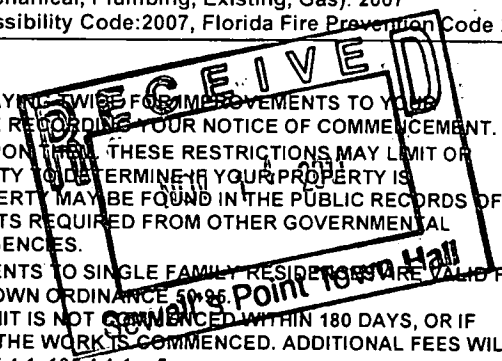
Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

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

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

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

NOTICES TO OWNERS AND CONTRACTORS:
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON TITLE. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 509.5.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1. 105.4.1.1 - .5.

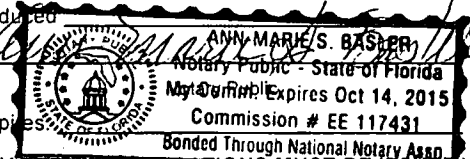


***** A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS *****

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

OWNER NOTORIZED SIGNATURE: (required per 713.135 F.S.)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
X _____
State of Florida, County of: Martin
On This the 14th day of November, 2011
by Susan Roberts who is personally
known to me or produced

CONTRACTOR NOTORIZED SIGNATURE: (required per 713.135 F.S.)
X _____
State of Florida, County of: _____
On This the _____ day of _____, 20____
by _____ who is personally
known to me or produced _____
As identification: _____
Notary Public



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

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

generated on 11/15/2011 10:40:37 AM EST

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-006-002-00070-7	17654	12 N RIDGEVIEW RD, SEWALL'S POINT	\$430,290	11/12/2011

Owner Information

Owner(Current)	ROBERTS SUSAN K
Owner/Mail Address	12 N RIDGEVIEW RD STUART FL 34996
Sale Date	8/21/2000
Document Book/Page	1501 2767
Document No.	JMB
Sale Price	348000

Location/Description

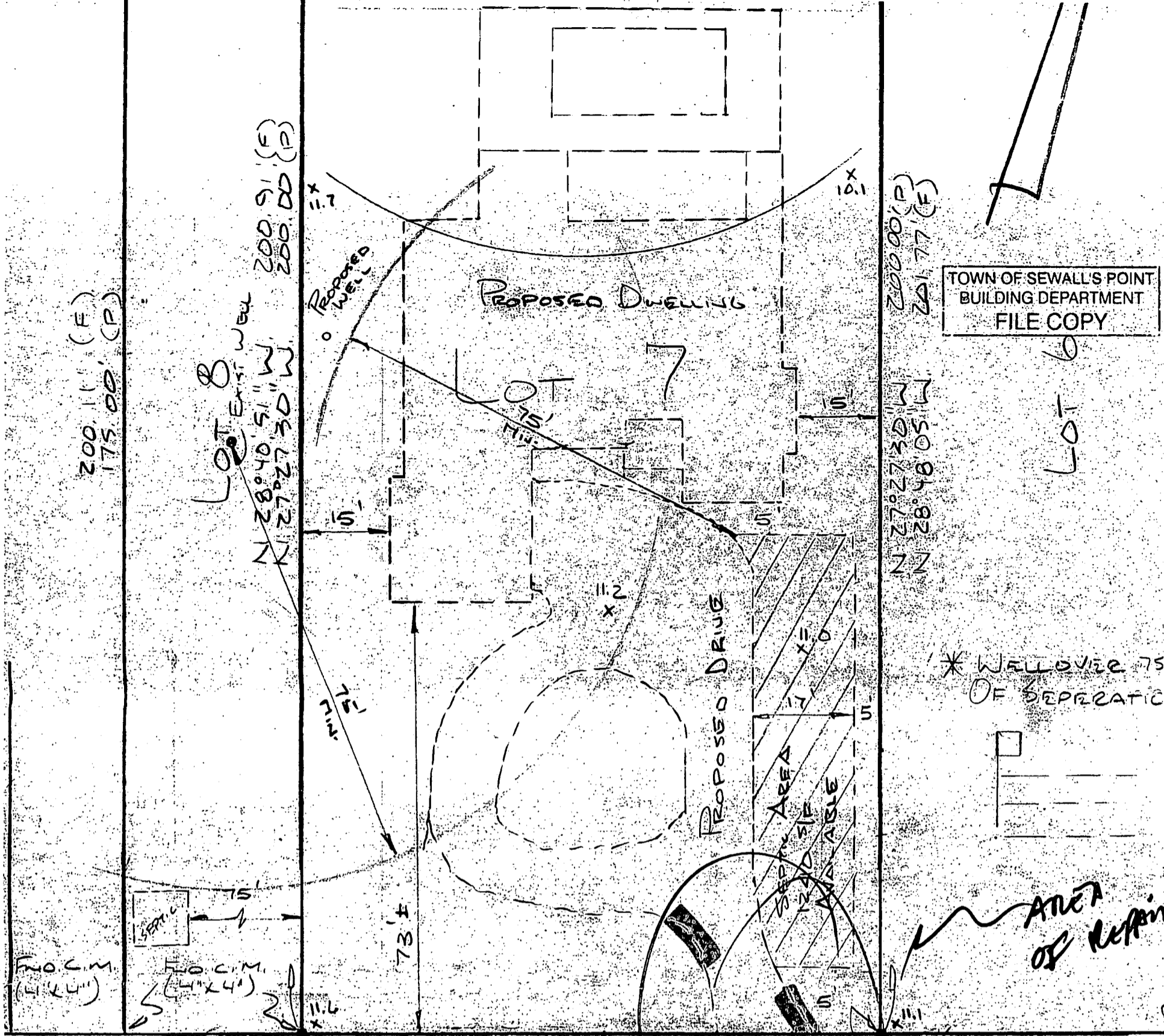
Account #	17654	Map Page No.	SP-04
Tax District	2200	Legal Description	HOMEWOOD LOT 7 BLK B
Parcel Address	12 N RIDGEVIEW RD, SEWALL'S POINT		
Acres	.4590		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120400 Hmwd, Palm Ro, Kngstn, Okwd, Pine

Assessment Information

Market Land Value	\$175,000
Market Improvement Value	\$255,290
Market Total Value	\$430,290



TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

* WELL OVER 75
OF SEPTIC

AREA
OF REPAIRS

100.00 (P) 99.91 (F) 100.00 (P) 99.87 (F) N. 62° 49' 30" E 100.00 (P) 100.20 (F) FOUND C.M. (4" x 4") 100.00 (P) 99.93 (F)

BENCH MARK ELEV. 11.33 * BEARING BASE NORTHERLY ON RIDGEVIEW (N. 62° 49' 30" E) No OBSTRUCTIONS

1. PROPERTY LOCATED WITHIN FLOOD ZONE "B"
2. PROPERTY ADDRESS: RIDGEVIEW ROAD
3. CERTIFIED TO: SUSAN DECKER, CHICAGO TITLE INSURANCE Co.

- NOTES:
1. Survey of description as furnished by
 2. Lands shown hereon were not abstract and/or rights-of-way of record. (P) Denotes distance or bearing by desc (F) Denotes measured distance or bearing (C) Denotes calculated distance or bearing
 3. All bearings are referenced to the Ins as shown hereon, unless otherwise not
 4. Elevations shown hereon are relative Vertical Datum of 1929, and are bas

SET I.B. SET 5/8" IRON BAR & CAP #4049
 FND - FOUND "OBJECT"
 I.P. - IRON PIPE
 C.M. - CONCRETE MONUMENT
 I.B. - IRON BAR
 P.K. - P.K. NAIL
 R.R.S. - RAILROAD SPIKE
 N. & W. - NAIL & WASHER
 N. & TT - NAIL & TIN TAB
 P.P. - POWER POLE
 C.B. - CATCH BASIN



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

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

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

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

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

Owner/Builder Applicant Name: SUSAN ROBERTS

Site address of the proposed building work: 12 N. RIDGEMAN RD.

Name of legal title owner of the address above: SUSAN ROBERTS

Describe the scope of work for the proposed new construction: Not new construction. Need to repair cracked edges of concrete driveway.

Name of Architect of Record: N/A Structural Engineer of Record: N/A

Who will supervise the trade work to meet the applicable code? DOING WORK OURSELVES

What provisions have you made for Liability and Property Damage Insurance? N/A

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

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

Location: N/A Scope of Work Done: _____ Year: _____

Location: N/A Scope of Work Done: _____ Year: _____

What code books do you have available for reference? Building: N/A

Electric: N/A Plumbing: N/A HVAC: N/A

Other: N/A

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

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

Have you consulted with your Homeowner's Insurance Agent? N/A Lender? N/A Attorney? N/A

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



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

OWNER/BUILDER DISCLOSURE STATEMENT

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

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



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

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

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

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

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

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

ON THIS 16 DAY OF Nov., 2011.

PROPERTY ADDRESS 12 N. Ridgeview Rd.

CITY Stuart STATE FL ZIP 34996

SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 16th DAY OF November 2011

BY Susan Roberts

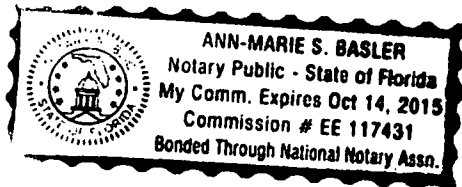
PERSONALLY KNOWN _____

OR PRODUCED ID _____

TYPE OF ID _____

Ann-Marie S. Basler

NOTARY SIGNATURE



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

PERMIT #: _____ TAX FOLIO #: _____

STATE OF FLORIDA COUNTY OF MARTIN

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

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

GENERAL DESCRIPTION OF IMPROVEMENT: _____

OWNER NAME OR LESSEE INFORMATION, IF LESSEE CONTRACTED FOR THE IMPROVEMENT
NAME: _____
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____
INTEREST IN PROPERTY: _____

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

CONTRACTOR: _____
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____

SURETY COMPANY (IF APPLICABLE, A COPY OF THE PAYMENT BOND IS ATTACHED)
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____
BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY: _____
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____

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

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

PHONE NUMBER: _____ FAX NUMBER: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
(EXPIRATION DATE MAY NOT BE BEFORE THE COMPLETION OF CONSTRUCTION AND FINAL PAYMENT TO CONTRACTOR BUT WILL BE ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED).

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

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

SIGNATURE OF OWNER OR LESSEE OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER/ATTORNEY-IN-FACT

SIGNATORY'S TITLE/OFFICE

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS _____ DAY OF _____, 20____

BY: _____ AS _____ FOR _____
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN _____ OR PRODUCED IDENTIFICATION _____

TYPE OF IDENTIFICATION PRODUCED _____



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-2204765

DRIVEWAY PERMIT CHECKLIST

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

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

_____ 1 Copy Completed Permit Application

_____ 2 Copies site plans or survey showing location of proposed driveway, length, and width of driveway culvert (if any), type of driveway, and the materials being used to construct the driveway.

DO NOT SUBMIT PREVIOUSLY STAMPED SITE PLANS

ANY CONCRETE SLAB (DRIVEWAY, PATIO, ETC) WITHIN 1' OF THE SIDEWALLS OF THE STRUCTURE WILL REQUIRE TERMITE TREATMENT AND MUST ALSO HAVE 6 MIL VAPOR RETARDER INSTALLED IN THIS 1' AREA (2004 FBC/RESIDENTIAL R320.1.4 & R320.1.6).

PERMIT APPLICATIONS FOR DRIVEWAYS CONSTRUCTED OF MATERIALS OTHER THAN BROOM FINISHED CONCRETE OR ASPHALT IN THE RIGHT OF WAY MUST HAVE THE FOLLOWING ACCOMPANYING DOCUMENT:

_____ 1 Copy Right of Way Covenant recorded at the Martin County courthouse

Barbara

**RIGHT OF WAY DRIVEWAY COVENANT
FOR MATERIAL OTHER THAN BROOM FINISHED CONCRETE OR ASPHALT**

STATE OF FLORIDA
COUNTY OF MARTIN

PERMIT NUMBER _____

THIS COVENANT, made by _____ and legal owners
(hereinafter "The Owners") of the property described as: Lot _____, Block _____, according to the Plat of
_____, as recorded in Plat Book _____, Page _____, of the Public Records of Martin County,
Florida, also known as _____
(Street address)

WHEREAS, the Owners have applied for a permit to construct a driveway of _____
construction, a portion of which will be constructed in the Town right-of-way, and such construction will not be of asphalt
or regular broom finish concrete, typical for driveways in right-of-way, and such construction will not be of asphalt or
regular broom finish concrete, typical for driveways in right-of-way authorized by the Town of Sewall's Point or of
driveway materials which the Town constructs, repairs, or replaces when it performs activities in its rights-of ways; and

WHEREAS, the Owners desire to construct the driveway and wish to recognize that the Town of Sewall's Point shall
have no responsibility to replace the driveway if it performs any activity on the right-of-way.

NOW THEREFORE, in return for the benefits that will accrue from the construction of their driveway, and in
accordance with the criteria for permits for constructing driveways other than those types aforementioned through
Land Covenant right-of-way, The Owners of the above described property hereby agree and covenant that the Town of
Sewall's Point shall not bear any responsibility for replacement of such driveway located within the right-of-way on this
said property, should the need arise.

The Owners agree and covenant that the cost of replacement of the driveway, if required, will be borne by the
Owners, their heirs, assigns and successors. This Covenant shall run with the land.

OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____ 20____

BY _____

PERSONALLY KNOWN _____ OR PRODUCED ID _____

TYPE OF ID _____

NOTARY SIGNATURE

**THIS COVENANT MUST BE RECORDED AT THE CLERK'S OFFICE AND THE RECORDED COPY
SUBMITTED TO THE BUILDING DEPARTMENT PRIOR TO ISSUING CERTIFICATE OF OCCUPANCY OR A
FINAL DRIVEWAY INSPECTION.**

10590
REMODEL

Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: 10590

Date: 9/13/13

OWNER/LESSEE NAME: Nicholas G. Robson Phone (Day) _____ (Fax) _____

Job Site Address: 12W Ridgeview Rd. City: Sewalls Pt State: FL Zip: 34996

Legal Description: Honewood Lot 7 BIK B Parcel Control Number: 13841 006 002 00070 7

Fee Simple Holder Name: _____ Address: _____

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

*SCOPE OF WORK (PLEASE BE SPECIFIC): Bath remodel, new windows & driveway

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

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

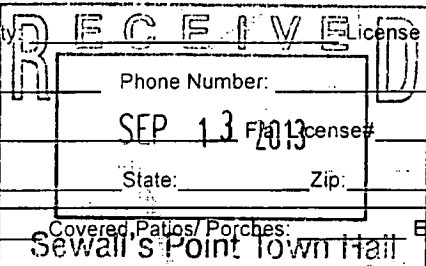
COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 25,000
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: COUNTRY CONSTRUCTION LLC Phone: 772-409-7821 Fax: 863-763-2592

Qualifiers name: JEAN TREVOR Street: 4038 SE 27th St. City: OLDFATHERS State: FL Zip: 34974

State License Number: CGC 045463 OR: Municipal License Number: _____

LOCAL CONTACT: _____
DESIGN PROFESSIONAL: _____
Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____



AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/Porches: _____ Enclosed Storage: _____
Carport: _____ Total under Roof: _____ Elevated Deck: _____ Enclosed area below BFE*: _____
* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010
National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

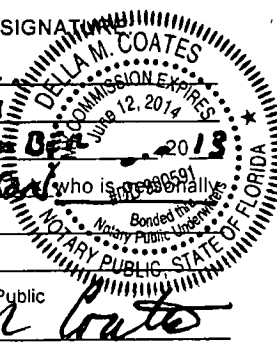
WARNINGS TO OWNERS AND CONTRACTORS:

- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

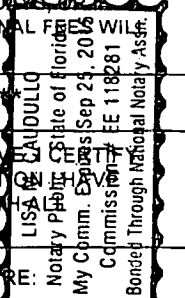
*****A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*****

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE: _____
X _____
State of Florida, County of: MARTIN
On This the 12th day of September, 2013
by NICHOLAS GUY ROBSON who is personally known to me or produced _____
As identification: _____
Notary Public: Della M. Coates
My Commission Expires: Sept 12, 2014



CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: _____
X Jean Trevor
State of Florida, County of: FL
On This the 13 day of Sept
by JEAN TREVOR who is personally known to me or produced Florida Chivalis Nicu
As identification: LISA H. CUNDULLO
Notary Public: _____
My Commission Expires: Sept 25, 2015



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

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

generated on 9/16/2013 1:24:52 PM EDT

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-006-002-00070-7	17654	12 N RIDGEVIEW RD, SEWALL'S POINT	\$404,680	9/14/2013

Owner Information

Owner(Current)	ROBSON NICHOLAS GUY & JAYNE TINA
Owner/Mail Address	12 N RIDGEVIEW RD STUART FL 34996
Sale Date	9/3/2013
Document Book/Page	2674 2468
Document No.	2414989
Sale Price	455000

Location/Description

Account #	17654	Map Page No.	SP-04
Tax District	2200	Legal Description	HOMEWOOD LOT 7 BLK B
Parcel Address	12 N RIDGEVIEW RD, SEWALL'S POINT		
Acres	.4590		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120400 Hmwd,Palm Ro,Kngstn,Okwd, Pine

Assessment Information

Market Land Value	\$165,000
Market Improvement Value	\$239,680
Market Total Value	\$404,680

Prepared by and Return to:
Christopher J. Twohey, P.A.
844 E. Ocean Blvd. Ste. A
Stuart, Florida 34994

Parcel ID Number: 1-38-41-006-002-00070.70000

Warranty Deed

This Indenture, Made this 3RD day of August ~~September~~, 2013 A.D., **Between**
Susan K. Roberts, a married woman, joined by her spouse, Tyrone J. Roberts

of the County of Martin, State of Florida, **, grantor,** and
Nicholas Guy Robson and Jayne Tina Robson, husband and wife

whose address is: 12 N. Ridgeview Rd., Stuart, FL 34996

of the County of Martin, State of Florida, **, grantees.**
Witnesseth that the GRANTOR, for and in consideration of the sum of

-----TEN DOLLARS (\$10)----- DOLLARS,
and other good and valuable consideration to GRANTOR in hand paid by GRANTEES, the receipt whereof is hereby acknowledged, has
granted, bargained and sold to the said GRANTEES and GRANTEES' heirs, successors and assigns forever, the following described land, situate,
lying and being in the County of Martin, State of Florida, to wit:

Lot 7, Block B, Amended Plat of Homewood, according to the plat thereof as recorded in Plat Book 3, Page(s) 29, as
amended recorded in Plat Book 3, Page(s) 35, Public Records of Martin County, Florida.

SUBJECT TO:

1. Taxes for the year 2013, and all subsequent years
2. Zoning restrictions, prohibitions and other requirements imposed by governmental authority;
3. Restrictions and matters appearing on the Plat or otherwise common to the subdivision; and
4. Public utility easements of record, if any.

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

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

Signed, sealed and delivered in our presence:

Printed Name: Christopher J. Twohey

Witness

Angela G. Jordan

Printed Name: Angela G. Jordan

Witness

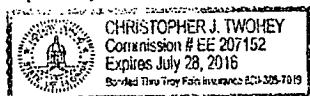
Susan K. Roberts (Seal)
Susan K. Roberts
P.O. Address: 2396 SW Foxpoint Way, Palm City, FL 34990

Tyrone J. Roberts (Seal)
Tyrone J. Roberts
P.O. Address: 2396 SW Foxpoint Way, Palm City, FL 34990

STATE OF Florida
COUNTY OF Martin

The foregoing instrument was acknowledged before me this 3RD day of August ~~September~~, 2013 by
Susan K. Roberts, a married woman, joined by her spouse, Tyrone J. Roberts

who are personally known to me or who have produced their FL D as identification.



Christopher J. Twohey
Printed Name: Christopher J. Twohey
Notary Public
My Commission Expires: 7/28/16



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

VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER: 10590

***IF NOT PERFORMED IN CONJUNCTION WITH A MAIN BUILDING PERMIT NUMBER, THEN THE VERIFICATION OF PARCEL CONTROL NUMBER BELOW MUST BE COMPLETED.

OWNERS NAME: Nicholas Robson

CONSTRUCTION ADDRESS: 12 Ridgeview Rd N.

PERMIT TYPE: RESIDENTIAL COMMERCIAL

- ELECTRIC
- PLUMBING
- HVAC
- IRRIGATION
- FUEL GAS
- ROOFING

Pro Control Services

TYPE OF SERVICE: NEW SERVICE EXISTING SERVICE OTHER

SCOPE OF WORK: Relocate Electrical in Kitchen & Master Bathroom

VALUE OF CONSTRUCTION \$ _____

<input type="checkbox"/> LOW VOLTAGE	
TYPE OF EQUIPMENT: <input type="checkbox"/> SECURITY <input type="checkbox"/> VACUUM <input type="checkbox"/> SOUND SYSTEM <input type="checkbox"/> LANDSCAPE <input type="checkbox"/> OTHER	
SCOPE OF WORK: _____	VALUE _____

IN CONSIDERATION TO THE GRANTING OF THE ABOVE REQUESTED PERMIT, I DO HEREBY AGREE THAT I WILL, IN ALL RESPECTS, PERFORM THE WORK IN ACCORDANCE WITH THE APPROVED PLANS AND ALL APPLICABLE CODES.

[Signature]
 SIGNATURE OF LICENSED CONTRACTOR

PO Box 84 Jensen Beach FL 34958
 ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: Michael Caracciolo

TELEPHONE NO: 561 371 5726 FAX NO: 772 334 2747
PLEASE PRINT

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: _____

** WORK CAN NOT BEGIN UNTIL THIS VERIFICATION IS COMPLETED AND SUBMITTED TO THE BUILDING DEPARTMENT. A PENALTY FEE WILL BE ASSESSED IF WORK IS STARTED PRIOR TO OBTAINING THIS PERMIT.

VERIFICATION OF PARCEL CONTROL NUMBER

OWNER'S FULL NAME AS STATED ON DEED: _____

PARCEL CONTROL #: _____

SUBDIVISION: _____ LOT: _____ BLK: _____ PHASE: _____

SITE ADDRESS: _____

SEND OR FAX TO: TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

1761
OP



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-2204765

VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER: 10390

***IF NOT PERFORMED IN CONJUNCTION WITH A MAIN BUILDING PERMIT NUMBER, THEN THE VERIFICATION OF PARCEL CONTROL NUMBER BELOW MUST BE COMPLETED.

OWNERS NAME: Robson

CONSTRUCTION ADDRESS: 12 N Ridge View Rd

PERMIT TYPE: RESIDENTIAL COMMERCIAL

- ELECTRIC
- PLUMBING
- HVAC
- IRRIGATION
- FUEL GAS

TYPE OF SERVICE: NEW SERVICE EXISTING SERVICE OTHER

SCOPE OF WORK: Bath Room Remodel

VALUE OF CONSTRUCTION \$ _____

<input type="checkbox"/> LOW VOLTAGE
TYPE OF EQUIPMENT: <input type="checkbox"/> SECURITY <input type="checkbox"/> VACUUM <input type="checkbox"/> SOUND SYSTEM <input type="checkbox"/> LANDSCAPE <input type="checkbox"/> OTHER
SCOPE OF WORK: _____ VALUE _____

IN CONSIDERATION TO THE GRANTING OF THE ABOVE REQUESTED PERMIT, I DO HEREBY AGREE THAT I WILL, IN ALL RESPECTS, PERFORM THE WORK IN ACCORDANCE WITH THE APPROVED PLANS AND ALL APPLICABLE CODES.

[Signature]
SIGNATURE OF LICENSED CONTRACTOR

P.O. Box 768 Port Salerno FL 34992
ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: South Park Plumbing Inc

TELEPHONE NO: 287-2548 FAX NO: 287-2559

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: CFC 1426656

** WORK CAN NOT BEGIN UNTIL THIS VERIFICATION IS COMPLETED AND SUBMITTED TO THE BUILDING DEPARTMENT. A PENALTY FEE WILL BE ASSESSED IF WORK IS STARTED PRIOR TO OBTAINING THIS PERMIT. *****

VERIFICATION OF PARCEL CONTROL NUMBER

OWNER'S FULL NAME AS STATED ON DEED: _____

PARCEL CONTROL #: _____

SUBDIVISION: _____ LOT: _____ BLK: _____ PHASE: _____

SITE ADDRESS: _____

SEND OR FAX TO: TOWN OF SEWALL'S POINT BUILDING DEPARTMENT



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

BUILDING PERMIT CARD

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

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	10590	DATE ISSUED:	SEPTEMBER 17, 2013
SCOPE OF WORK:	BATH REMODEL, NEW WINDOWS & DRIVEWAY		
CONTRACTOR:	COUNTRY CONSTRUCTION		
PARCEL CONTROL NUMBER:	013841006-002-000707	SUBDIVISION	HOMEWOOD - LOT 7
CONSTRUCTION ADDRESS:	12 N RIDGEVIEW RD		
OWNER NAME:	ROBSON		
QUALIFIER:	JEAN TREVOR	CONTACT PHONE NUMBER:	772-409-7821

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

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

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

INSPECTIONS

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

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

NOTICE OF COMMENCEMENT

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00 (\$7,500 Mechanical)

PERMIT #: 10590 TAX FOLIO #: 13841006002000707

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE):
HOMELAND BLOCK B LOT 7 (12 RIDGEVIEW RD. N., STUART FL 34996)

GENERAL DESCRIPTION OF IMPROVEMENT: WINDOW AND DOOR REPLACEMENT.

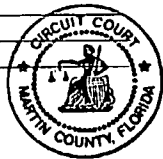
OWNER NAME OR LESSEE INFORMATION, IF LESSEE CONTRACTED FOR THE IMPROVEMENT
NAME: NICHOLAS G. ROBSON
ADDRESS: 12 RIDGEVIEW ROAD N. STUART FL 34996
PHONE NUMBER: 772 286 8581 FAX NUMBER:
INTEREST IN PROPERTY: OWNER

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

CONTRACTOR: JEAN TREW (COUNTRY CONSTRUCTION)
ADDRESS: 4038 SE 27TH ST. OKECHOBLE FL 34974
PHONE NUMBER: 772 409 7821 FAX NUMBER:

SURETY COMPANY (IF APPLICABLE, A COPY OF THE PAYMENT BOND IS ATTACHED)
ADDRESS:
PHONE NUMBER: FAX NUMBER:
BOND AMOUNT:

LENDER/MORTGAGE COMPANY: STATE OF FLORIDA
ADDRESS: MARTIN COUNTY
PHONE NUMBER:



THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGE(S) IS A TRUE AND CORRECT COPY OF THE ORIGINAL DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13 (1) (b) FLORIDA STATUTES. DOCUMENT AS FILED IN THIS OFFICE.

CAROLYN TIMMANN, CLERK
NAME:
ADDRESS: BY: DATE: 09/18/13

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES OF TO RECORD A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES:

PHONE NUMBER: FAX NUMBER: EXPIRATION DATE OF NOTICE OF COMMENCEMENT:
EXPIRATION DATE MAY NOT BE BEFORE THE COMPLETION OF CONSTRUCTION AND FINAL PAYMENT TO CONTRACTOR BUT WILL BE ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED

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

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

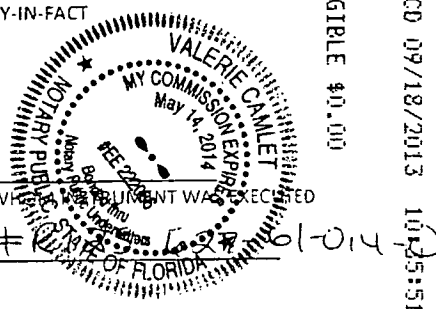
X SIGNATURE OF OWNER OR LESSEE OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER/ATTORNEY-IN-FACT

SIGNATORY'S TITLE/OFFICE OWNER

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 18 DAY OF Sept 20 13

BY: Nicholas G. Robson AS owner FOR PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

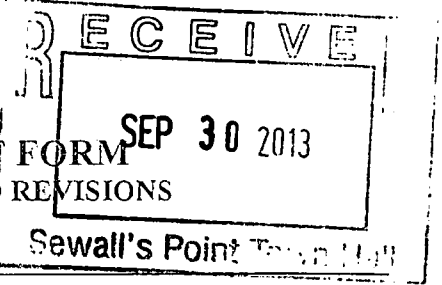
PERSONALLY KNOWN OR PRODUCED IDENTIFICATION TYPE OF IDENTIFICATION PRODUCED FIDUCIARY SEAL
Valerie Camlet
NOTARY SIGNATURE/ SEAL



INSR 2417166 OR BK 2677 PG 239 RECD 09/18/2013 10:25:51 AM
(1 Pgs) CAROLYN TIMMANN MARTIN COUNTY CLERK DEED DOC #0115, MTG DOC #8.002 INTANGIBLE #0.00



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
 One S. Sewall's Point Road
 Sewall's Point, Florida 34996
 Tel 772-287-2455 Fax 772-2204765



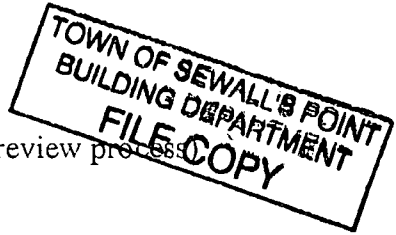
REVISIONS - CORRECTIONS REQUEST FORM
 MUST BE SUBMITTED FOR ALL CORRECTIONS AND REVISIONS

DATE: 9/30/2013 PERMIT NUMBER: [REDACTED]

JOB ADDRESS: 12 W Ridge View

PLEASE CHECK ONE OF THE FOLLOWING:

- CONDITION OF INSPECTION APPROVAL (Needed for an inspection)
- CONDITION OF PERMIT APPROVAL: (Corrections/Permit not issued, in review process)
- REVISIONS (Changes to an issued permit)



****ALL PLAN REVISIONS MUST BE HIGHLIGHTED OR CLOUDED ON DRAWING****

ALL REVISED PAGES ARE REQUIRED TO BE INSERTED IN FIELD PERMIT SET

DESCRIPTION OF REVISION(S): Kitchen USA NEW HEADERS **REMODEL KITCHEN**

DOES REVISION(S) CHANGE THE VALUE OF CONSTRUCTION? YES NO VALUE \$ 10,000
 INCREASED CONSTRUCTION VALUE WILL INCREASE PERMIT FEES AND MUST BE PAID AT TIME OF APPROVAL

CONTACT NAME: Steve Decker SIGNATURE: [Signature]

PHONE NUMBER: 772-320-8072 FAX NUMBER: _____

FOR OFFICE USE ONLY:

Reviewed by: [Signature] Date: 10-4-13 Approve: Deny:

Additional conditioned space _____ sq. ft. @ \$104.65 per sq. ft. _____ x 2% = _____

Additional non-conditioned space _____ sq. ft. @ \$ 48.90 per sq. ft. _____ x 2% = _____

Other declared value increase (must be based on value not cost) 10,000 x 2% = 100.00

Other additional fees: 3147 @ 100 Revision review fee: 1 Pages @ \$25.00/Page 25.00

Radon Fee _____ Professional Regulation Fee _____ Road impact assessment _____

TOTAL ADDITIONAL BUILDING PERMIT FEE \$ 425.00

Applicant notified by: _____ Date: 10/15/13
CK# 1764 (V)

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 9-12-13 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10520	12 N. RIDGEVIEW	INVESTIGATE	Pass	
10520	12 N. RIDGEVIEW	NO PERMIT		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10522	Sharfi 73 N River Worrell	Footer	Pass	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
Tree	Wehner 107 Hillcrest Ct	Tree	N.G.	INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	Walters 122 Sewalls	Dumpster Investigate	OK	INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of inspection

Mon

Tue

Wed

Thur

Fri

9-19-13

Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10586	Nunnelee 32 W High Pt AAA Accent Door	Final Garage Door	Pass	CLOSE INSPECTOR <i>JA</i>
10690	10690 10690 Countryside Const.	10690 10690	10690 10690	10690 10690 INSPECTOR <i>JA</i>
10529	WESTON 30 S. Spr Rd Weston	ELEVATED PLUMBING	RESET FOR FRIDAY	INSPECTOR
10415	Smith 11 PALMETTO Ark Homes	P.P. WALKS & PAOS	Pass	INSPECTOR <i>JA</i>
10560	McIlvane 20 CASTLE HILL Vero Beach Roofing	TILE IN PROGRESS	Pass	INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

Mon

Tue

Wed

Thur

Fri

10-1-13

Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10583	Vance 12 Wendy Ln Stuart Fence	Final Fence	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10590	Kelso 12 N Ridgeview Country Const	Final plumbing plumbing	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10578	Wade 9 E High Pt Walter White	FINAL electric plumbing Bathroom	PASS	CLOSE INSPECTOR <i>[Signature]</i>
Tree	Walser 102 S River Rd	Tree	OK	INSPECTOR
10589	Fitzsimmons 99 N Sewalls Energized Electric	UG Electric for generator	PASS	INSPECTOR <i>[Signature]</i>
10482	Crawford 116 N Sewalls OB	Final	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10609	Carlton 6 PUMPKINLE Nis Air	A/E FINAL	PASS	CLOSE INSPECTOR

9:00 @ BERNIE LAWSON

CATTLE & SUNSHINE

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

Mon

Tue

Wed

Thur

Fri

10-16-13

Page 1 of 2

2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10612	Rose	rough electric		
1st	4 Indialucie	" plumbing	PASS	
	Glenmark			INSPECTOR [Signature]
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10590	Lawson	fire alarm	PASS	
	120 Palmetto	fire alarm	PASS	
	Country Coast			INSPECTOR [Signature]
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10008	Price	Final windows & SGD	PASS	CLOSE
	6 N Via Lucindia			INSPECTOR [Signature]
	O/B			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10603	Price	Final mandoor in garage	PASS	CLOSE
	6 N Via Lucindia			INSPECTOR [Signature]
	Creation Builders			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10620	Price	Final Garage Door	PASS	CLOSE
	6 N Via Lucindia			INSPECTOR [Signature]
	DAD Garage			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10617	Lawson	Final Irrigation	PASS	CLOSE
	129 S Sewalls			INSPECTOR [Signature]
	Controlled Irrigation			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10519	Smith	Final Pool enclosure	PASS	CLOSE
	11 Palmetto			INSPECTOR [Signature]
	Custom Cages			

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 2/7 - 14 Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10590	Robinson	Final		Steve
	12 N Redgemen Country Const.		Pass	320-8072 CLOSE INSPECTOR SA
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10303	Barrett	Final		472-285-1968
	73 Lantana Lane Barrett	Screen door	Pass	CLOSE INSPECTOR SA
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10762	RUSANO	SLAB		
	16 E. HIGH PT DRUMWORKS		CANCEL See Monday	INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
107				
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

11157
SHUTTERS

FL

12292014002

Town of Sewall's Point

11157

Date: 1/20/15 BUILDING PERMIT APPLICATION Permit Number: 11157

OWNER/LESSEE NAME: Christopher & Anne Stuart Phone (Day) 772 678 6886 (Fax)

Job Site Address: 12 N Ridgeview Road City: Sewall's Point State: FL Zip: 34996

Legal Description Homewood Lot 7 Blk B Parcel Control Number: 01 38 41 006 002 00070 7

Fee Simple Holder Name: N/A Address:

City: State: Zip: Telephone:

*SCOPE OF WORK (PLEASE BE SPECIFIC): INSTALL 3 IMPACT Bahama shutters.

WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application) YES NO Has a Zoning Variance ever been granted on this property? YES (YEAR) NO

COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ 4487 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out) Is subject property located in flood hazard area? VE10 AE9 AE8 X FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ (Fair Market Value of the Primary Structure only. Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Folding Shutter Corporation Phone: 561 683 4811 Fax: 561 640 8204

Qualifiers name: Charles J. Stypulkowski Street: 7089 Hemstreet Place City: West Palm Beach State: FL Zip: 33413

State License Number: SCC 131150802 OR: Municipality: License Number:

LOCAL CONTACT: Phone Number:

DESIGN PROFESSIONAL: N/A Fla. License#

Street: City: State: Zip: Phone Number:

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

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. 2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE, AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1; 105.4.1.1 - .5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE: Christopher Stuart State of Florida, County of: Palm Beach On This the 14 day of JAN, 2015 by Christopher Stuart who is personally known to me or produced As identification: Pamela A. Evans Notary Public My Commission Expires: 10.11.18

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: Charles J. Stypulkowski State of Florida, County of: Palm Beach On This the 23 day of JAN, 2015 by Charles J. Stypulkowski who is personally known to me or produced As identification: Pamela A. Evans Notary Public My Commission Expires: 10.11.18

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY! Expires 10/11/2018

2014-2015

MARTIN COUNTY ORIGINAL

BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR
3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994
(772) 288-5604

ACCOUNT 1976-650-0289 CERT SCC131150802
PHONE (561) 683-4811 SIC NO 238190

LOCATION: 7089 HEMSTREET PL PBC

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR.	\$.00	LIC. FEE	\$ 26.25
	\$.00	PENALTY	\$.00
	\$.00	COL. FEE	\$.00
	\$.00	TRANSFER	\$.00
TOTAL		26.25	



HAS SATISFIED REQUIREMENTS TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION OF RETAIL/ALUMINUM CONTR

TUCKER, ROBERT C. (CEO)
FOLDING SHUTTER CORP
CHARLES JOHN STYPULKOWSKI QUALIFIER
7089 HEMSTREET PLACE
WEST PALM BEACH, FL 33413

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

18 DAY OF AUGUST 2014

AND ENDING SEPTEMBER 30, 2015

805-2013-05023.0001 PAID

THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE.

ANYONE DOING BUSINESS WITHOUT A VALID BUSINESS TAX RECEIPT IS SUBJECT TO A \$250 FINE IF NOT PAID BY SEPT 30TH. A DELINQUENT PENALTY OF 10% FOR THE MONTH OF OCTOBER, PLUS A 15% PENALTY FOR EACH MONTH THEREAFTER UP TO 25%. PLUS COLLECTION COSTS WILL APPLY.

NOTE: A PENALTY IS IMPOSED FOR FAILURE TO KEEP THIS BUSINESS TAX RECEIPT EXHIBITED CONSPICUOUSLY AT YOUR ESTABLISHMENT OR PLACE OF BUSINESS!



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/07/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Pritchards and Associates -SLC 10791 SW Tradition Square Port St. Lucie, FL 34987 Kristina M. Mellette- Agency	CONTACT NAME: Kristina M. Mellette- Agency
	PHONE (A/C, No, Ext): 772-345-7700 FAX (A/C, No): 772-345-7703
E-MAIL ADDRESS:	
INSURER(S) AFFORDING COVERAGE	
INSURER A : Bridgefield Employers Ins.	NAIC # 10701
INSURER B : Lloyd's	
INSURER C : Old Dominion	40231
INSURER D : Admiral Insurance Company	
INSURER E : Mt. Hawley Insurance Company	
INSURER F :	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
D	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			CA00001466505	01/01/2014	02/10/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 Emp Ben. \$ 1,000,000
C	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			B2G8482H	05/22/2014	02/10/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
E	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			MXL0371438	01/01/2014	02/10/2015	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	0830-50184	02/10/2015	02/10/2016	PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
B	Property Section			AMR41695	01/01/2015	02/10/2016	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

General Liability: Blanket Addtl Insured Included under CG20100704, Waiver of Transfer of Rights of Recovery Against Others under CG24040509, Primary/Non-Contributing Insurance under AD06571203

CERTIFICATE HOLDER

CANCELLATION

Town of Sewall Point 1 S. Sewall Point Rd Sewalls Point, FL 34996	TOWNO-8
	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE 	

© 1988-2014 ACORD CORPORATION. All rights reserved.



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

BUILDING PERMIT CARD

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

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	11157	DATE ISSUED:	January 28, 2015
SCOPE OF WORK:	Shutters		
CONTRACTOR:	Folding Shutter Corporation		
PARCEL CONTROL NUMBER:	01-38-41-006-002-00070-7	SUBDIVISION:	Homewood Lot 7 Blk B
CONSTRUCTION ADDRESS:	12 N Ridgeview Road		
OWNER NAME:	Steuart		
QUALIFIER:	Charles Stypulkowski	CONTACT PHONE NUMBER:	561-683-4811

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

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

24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE CALL 287-2455 - 8:00AM TO 4:00PM

INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

INSPECTIONS

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

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

12292014002-MC

Prepared by and Return to:

Folding Shutter Corporation

7089 Hemstreet Pl

West Palm Beach, FL 33413

NOTICE OF COMMENCEMENT

To be completed when construction value exceeds \$2,500.00

PERMIT #: _____ TAX FOLIO # 01 38 41 006 002 00070 7

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS, IF AVAILABLE): Homewood Lot 7 Blk B (12 N Ridgeview Road, Sewall's Point FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Installation of Hurricane shutters

OWNER INFORMATION OR LESSEE INFORMATION, IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:

Name: Christopher & Anne Stewart
Address: 12 N Ridgeview Road, Sewall's Point FL 34996
Interest in property: Owner
Name and address of fee simple title holder (if different from Owner listed above):

CONTRACTOR'S NAME: Folding Shutter Corporation Phone No.: 561 683 4811
Address: 7089 Hemstreet Place, West Palm Beach FL 33413

SURETY COMPANY (if applicable, a copy of the payment bond is attached):
Name and address:
Phone No.: Bond amount:

LENDER'S NAME: Phone No.:
Address:

Persons within the State of Florida designated by owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7, Florida Statutes:

Name: Phone No.:
Address:

In addition to himself or herself, owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.
Phone number of person or entity designated by Owner: _____

Expiration date of Notice of Commencement:
(the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): _____

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

Under penalty of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief.

[Signature]
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager/Attorney-in-fact

Signatory's Title/Office

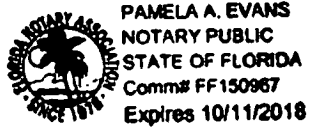
The foregoing instrument was acknowledged before me this 13 day of JAN 20 15

By: Christopher Stewart for _____
Name of person Type of authority (e.g. officer, trustee) Party on behalf of whom instrument was executed

[Signature]
Notary's Signature Personally known [] or produced identification []
Type of identification produced

(Print, Type, or Stamp Commissioned Name of Notary)

T:\BLD\Bldg_Forms\New Applications\Forms\Notice Of Commencement.Docx



Rev 9/15/11

RECORDING AFFIDAVIT

STATE OF FLORIDA
COUNTY OF MARTIN

BEFORE ME, the undersigned authority, personally appeared Giselle Benavides, who after being first Duly sworn, deposes and says of her personal knowledge the following:

1. E-Recording Inc. was established with the Department of Corporation, State of Florida on July 14, 1988.
2. E-Recording Inc. receives legal documents and submits the document for electronic recording in the Official Records.
3. E-Recording Inc. is the recording agent and processed the recording of the Notice of Commencement recorded in Official Record Book 2762 , Page 2537 in Martin County, Florida

ERECORDING INC

By: _____

E-Recording Associate

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 23rd day of January, 2015, by Giselle Benavides who is personally known to me and who did take an oath.

Notary Public State of Florida



Giselle Benavides
COMMISSION # FF116646
EXPIRES: April 22, 2018
WWW.AARONNOTARY.COM



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	11157		
ADDRESS:	12 N Ridgeview Road		
DATE ISSUED:	1/28/2015	SCOPE OF WORK:	Shutters

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$	
Total square feet air-conditioned spa @ \$ 121.75 per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel: @ \$ 59.81 per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: \$ 90.78 per sq. ft. s.f.		\$	-
Total Construction Value:		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Building fee: (1% of construction value < \$200K + \$100 per insp.)		\$	-
Total number of inspections (Value < \$200K) \$ 100.00 per insp. # insp			n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)			n/a
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	\$ -

ACCESSORY PERMIT	Declared Value:	\$	\$
Total number of inspections: @ \$ 100.00 per insp. # insp	1	\$	100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	109.00



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	11157
ADDRESS:	12 N Ridgeview Road
DATE ISSUED:	1/28/2015
SCOPE OF WORK:	Shutters

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$
------------------------------------	----------------	----

Plan Submittal Fee (\$350.00 SEP 9175.00)		
	\$	-
Tot:	\$	-
Tot:	\$	-
Buil:	\$	-
Buil:	\$	-
Tot:	\$	-
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)	\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)	\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)	\$	n/a
Martin County Impact Fee:	\$	-
TOTAL BUILDING PERMIT FEE:	\$	\$ -

ACCESSORY PERMIT	Declared Value:	\$	\$
Total number of inspections:	@ \$ 100.00 per insp. # insp	1	\$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	109.00

**Martin County, Florida
Laurel Kelly, C.F.A**
generated on 1/28/2015 11:54:04 AM EST
Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-006-002-00070-7	17654	12 N RIDGEVIEW RD, SEWALL'S POINT	\$422,390	1/24/2015

Owner Information

Owner(Current)	STEUART CHRISTOPHER KENDRICK STEUART ANNE INSLEY
Owner/Mail Address	3105 HUNTING TWEED DR OWINGS MILLS MD 21117
Sale Date	5/23/2014
Document Book/Page	<u>2720 0026</u>
Document No.	2457425
Sale Price	751000

Location/Description

Account #	17654	Map Page No.	SP-04
Tax District	2200	Legal Description	HOMEWOOD LOT 7 BLK B
Parcel Address	12 N RIDGEVIEW RD, SEWALL'S POINT		
Acres	.4590		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120400 Hmwd,Palm Ro,Kngrstn,Okwd, Pine

Assessment Information

Market Land Value	\$175,000
Market Improvement Value	\$247,390
Market Total Value	\$422,390

12292014002



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-2204765

Call for FWP

IMPACT PROTECTION INSTALLATION AFFIDAVIT

BLDG. PERMIT NUMBER: 11157
JOB SITE ADDRESS: 12 N Ridgeview Rd, Sewall's Point FL 34996
CONTRACTOR/OWNER: Folding Shutter Corporation
PHONE NUMBER: 561 683 4811
QUALIFIER NAME: Charles J. Stypulkowski
LICENSE NUMBER: SCC 131150802

I Charles J. Stypulkowski, do hereby affirm:
Owner or Contractor - Please print name

The following impact protection was used as per the 2010 FBC 1609.1.4 for all exterior glazed openings at the above referenced job site.

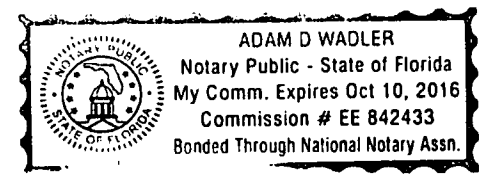
- Impact Resistant Glass
- Approved Shutters

That I personally observed the complete installation of all hurricane panel/shutters on the above referenced project and further affirm that they are fitted properly for the openings they are intended to protect.

Charles J. Stypulkowski
Signature of Owner or Contractor

Date: 2/20/15

Sworn to and subscribed before me this
26 Day of February 2015
By Charles J. Stypulkowski
Notary Public, State of Florida Notary Seal/Stamp



Personally known to me ✓
Produced ID _____
Type _____

Sewall' Point Building Department will inspect the structural attachment of the panel rails and/or the shutter assembly attachment to the building, per the manufacturer's product approvals, ASCE 7 and the 2010 Florida Building code at final inspection.

FOLDING SHUTTER CORP. ENGINEERING LAYOUT SHEET

CUSTOMER NAME

STEUART

WORK ORDER NO.

12292014002

SHEET

OF

BY:

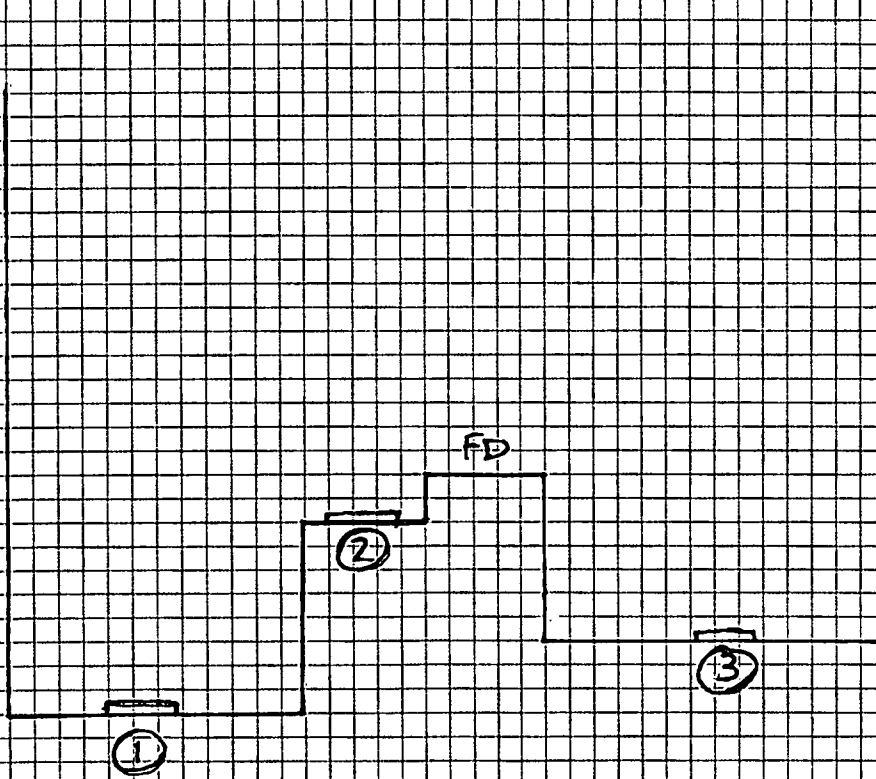
EJH

DATE:

LAYOUT

12 Ridgerview Rd. N
Stuart, FL 34996

165 mph
12' MRH
Exp "D"



TOWN OF SEWALLS POINT
BUILDING DEPARTMENT
FILE COPY

3 openings - Impact Bahama Shutters



FACTORY DIRECT SINCE 1969



COMPLETE HURRICANE PROTECTION SOLUTIONS

7089 Hemstreet Place
West Palm Beach, FL 33413

800.643.6371

Property Information		Building Information	
Owner:	Steuart	Wind Zone:	165 MPH.
Address:	12 Ridgeview Rd. N Stuart, FL 34996	Exposure Category:	D
		Minimum Building Dimension:	45 ft.
		Mean Roof Height:	12 ft.
		Risk Category:	II

Design Pressure Calculations						
Opening Number	Location Zone	Device Width (in)	Device Height (in)	Device Elevation (ft)	Max Positive Pressure (psf)	Max Negative Pressure (psf)
1	Int	73	61.75	7	40.0	-43.7
2	Int	110	61.75	7	38.9	-42.5
3	Int	25.25	61.75	7	43.0	-46.6



DBPR HOME ABOUT DBPR DBPR DIVISIONS CONTACT DBPR



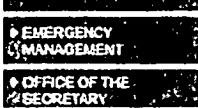
BCIS Home | Log In | User Registration | Hot Topics | Submit Surcharge | Stats & Facts | Publications | FBC Staff | BCIS Site Map | Links | Search



Product Approval
USER: Public User

License efficiently. Regulate fairly.

Product Approval Menu > Product or Application Search > Application List > Application Detail



FL #	FL6412-R3								
Application Type	Revision								
Code Version	2010								
Application Status	Approved								
Comments									
Archived									
Product Manufacturer	Folding Shutter Corporation								
Address/Phone/Email	7089 Hemstreet Place West Palm Beach, FL 33413 (561) 683-4811 gary@foldingshutters.com								
Authorized Signature	Frank Bennardo frank@engexp.com								
Technical Representative									
Address/Phone/Email									
Quality Assurance Representative	Ed Heritage								
Address/Phone/Email	7089 Hemstreet Place West Palm Beach, FL 33413 (561) 209-7675 edh@foldingshutters.com								
Category	Shutters								
Subcategory	Bahama								
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer ✓ Evaluation Report - Hardcopy Received								
Florida Engineer or Architect Name who developed the Evaluation Report	Frank L. Bennardo, P.E.								
Florida License	PE-0046549								
Quality Assurance Entity	PFS Corporation								
Quality Assurance Contract Expiration Date	12/31/2015								
Validated By	Jorge A. Pomerantz, P.E. ✓ Validation Checklist - Hardcopy Received								
Certificate of Independence	FL6412_R3_COI_Cert_Indep.pdf								
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th>Standard</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td>TAS 201</td> <td>1994</td> </tr> <tr> <td>TAS 202</td> <td>1994</td> </tr> <tr> <td>TAS 203</td> <td>1994</td> </tr> </tbody> </table>	Standard	Year	TAS 201	1994	TAS 202	1994	TAS 203	1994
Standard	Year								
TAS 201	1994								
TAS 202	1994								
TAS 203	1994								
Equivalence of Product Standards									
Certified By									

Sections from the Code

Product Approval Method Method 1 Option D

Date Submitted 12/15/2011

Date Validated 12/16/2011

Date Pending FBC Approval 12/26/2011

Date Approved 01/31/2012

Summary of Products		
FL #	Model, Number or Name	Description
6412.1	Impact Bahama Shutter	Impact Bahama Shutter
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: +80psf/-80psf Other: See engineering drawings for design limitations (allowable pressures & spans, mounting conditions, anchor options, etc.)		Installation Instructions FL6412_R3_II_Dwg.pdf Verified By: Frank L. Bennardo, P.E. PE0046549 Created by Independent Third Party: Yes Evaluation Reports FL6412_R3_AE_Eval_Rpt.pdf Created by Independent Third Party: Yes

[Contact Us :: 1940 North Monroe Street, Tallahassee, FL 32399 Phone: 850-487-1824](tel:8504871824)

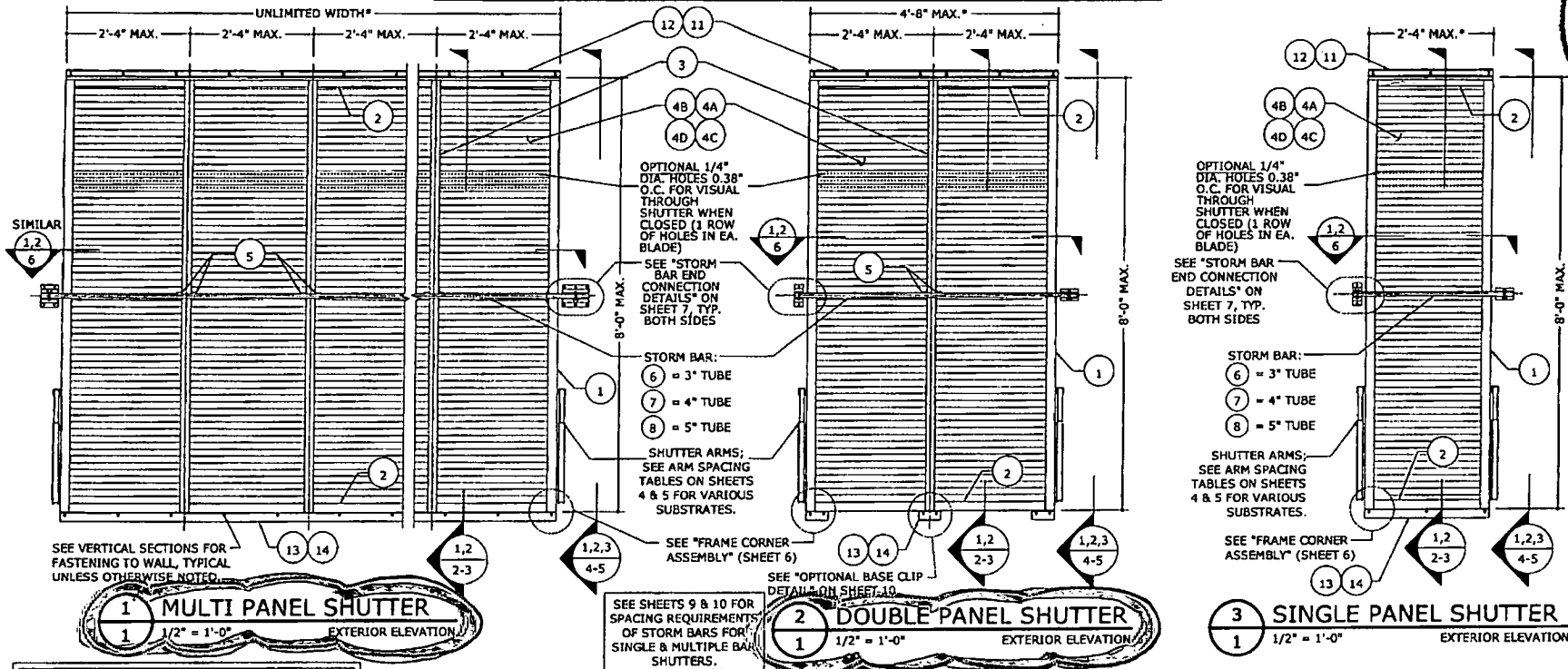
The State of Florida is an AA/EEO employer. [Copyright 2007-2010 State of Florida](#). :: [Privacy Statement](#) :: [Accessibility Statement](#) :: [Refund Statement](#)

Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions regarding DBPR's ADA web accessibility, please contact our Web Master at webmaster@dbpr.state.fl.us.

Product Approval Accepts:



IMPACT BAHAMA SHUTTER



MAXIMUM ALLOWABLE WIND LOADS

POSITIVE AND NEGATIVE DESIGN PRESSURES CALCULATED FOR USE WITH THIS SYSTEM SHALL BE DETERMINED BY OTHERS ON A JOB-SPECIFIC BASIS IN ACCORDANCE WITH THE GOVERNING CODE. SITE-SPECIFIC PRESSURE REQUIREMENTS AS DETERMINED IN ACCORDANCE WITH ASCE 7-10 AND CHAPTER 1609 OF THE 2010 FLORIDA BUILDING CODE SHALL BE LESS THAN OR EQUAL TO THE POSITIVE OR NEGATIVE DESIGN PRESSURE CAPACITY VALUES LISTED HEREIN FOR ANY ASSEMBLY AS SHOWN.

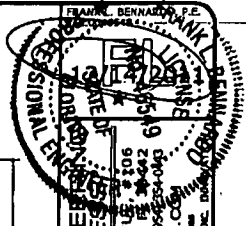
*SEE SHUTTER ELEVATIONS ON SHEET 9 & STORM BAR TABLES ON SHEET 10 FOR DESIGN PRESSURES AS CONTROLLED BY SHUTTER WIDTH & STORM BAR SPACING.

SEE GENERAL NOTES FOR MINIMUM SEPARATION BETWEEN SHUTTER & GLAZING

GENERAL NOTES:

- THIS SYSTEM HAS BEEN TESTED AND EVALUATED AS A LARGE AND SMALL MISSILE IMPACT PROTECTIVE SYSTEM IN ACCORDANCE WITH THE REQUIREMENTS OF THE 2007 AND 2010 FLORIDA BUILDING CODE FOR USE WITHIN AND OUTSIDE THE HIGH VELOCITY HURRICANE ZONE ("HVHZ"), PER TAS 201, 202, & 203 TEST PROTOCOLS.
- NO 33-1/3% INCREASE IN ALLOWABLE STRESS HAS BEEN USED IN THE DESIGN OF THIS PRODUCT. WIND LOAD DURATION FACTOR $C_d = 1.6$ HAS BEEN USED FOR WOOD ANCHOR DESIGN.
- POSITIVE AND NEGATIVE DESIGN PRESSURES TO BE USED WITH THESE DRAWINGS SHALL BE DETERMINED BY OTHERS FOR SPECIFIC JOBS IN ACCORDANCE WITH THE GOVERNING CODE.
- SHUTTER SYSTEM AS SHOWN HEREIN IS APPROVED FOR USE WITH ANY NUMBER OF PANELS, PROVIDED THAT THE LIMITATIONS OF USE FOR STORM BARS AND FOR SINGLE SPAN SHUTTERS AS SHOWN ON SHEETS 9 AND 10 ARE NOT EXCEEDED. MAXIMUM PANEL WIDTH AND MAXIMUM OVERALL SHUTTER HEIGHT AS NOTED ABOVE SHALL NOT BE EXCEEDED.
- WHEN STORM BARS ARE REQUIRED, OVERALL SHUTTER WIDTH SHALL NOT EXCEED DIMENSIONS NOTED ABOVE. WHEN STORM BARS ARE NOT REQUIRED, ANY NUMBER OF PANELS MAY BE USED (INFINITE OVERALL WIDTH) WITH 2'-4" MAX PANEL WIDTH.
- THE NUMBER OF STORM BARS REQUIRED FOR EACH SHUTTER TYPICALLY VARIES FROM 1 TO 3 & IS DEPENDENT ON SHUTTER SIZE & REQUIRED DESIGN PRESSURE. SEE ELEVATION DETAILS & LOAD TABLES ON SHEETS 9 & 10 FOR STORM BAR REQUIREMENTS.
- MINIMUM SEPARATION BETWEEN SHUTTER (IN CLOSED POSITION) & GLAZING SHALL BE AS FOLLOWS:
 - INSIDE THE HVHZ, ASTM WIND ZONE 4 AND ESSENTIAL FACILITIES: 3.35" MIN SEPAR
 - OUTSIDE THE HVHZ, ASTM WIND ZONE 4 AND ESSENTIAL FACILITIES: NO SEPAR REQ'D
- WHEN USED OUTSIDE THE HVHZ, ASTM WIND ZONE 4, AND ESSENTIAL FACILITIES, THIS SHUTTER SYSTEM CONSTITUTES A NON-POROUS ASSEMBLY AS DEFINED IN THE ASTM E1996-06 STANDARD.
- EACH SHUTTER SHALL HAVE A LEGIBLE & READILY VISIBLE MARKING INSTRUCTING THE OWNER/TENANT TO SECURE THE SHUTTER WITH BRACKETS & STORM BARS, PER THESE APPROVED DRAWINGS, DURING PERIODS OF HURRICANE WARNINGS.
- THIS SYSTEM HAS BEEN DESIGNED TO WITHSTAND WIND PRESSURES, IN THE OPEN POSITION, RESULTING FROM FASTEST MILE WIND SPEEDS UP TO 75 MPH (3-SECOND GUST WIND SPEED UP TO 115

- MPH), 30' MRH, EXTERIOR ZONE 5, IN ACCORDANCE WITH THE BUILDING CODE SPECIFIED HEREIN. SEE WALL CLIP DETAILS FOR APPROPRIATE "OPEN SHUTTER" CONDITIONS. SHUTTERS MUST BE CLOSED WHEN FASTEST MILE WIND SPEEDS REACH 75 MPH OR GREATER. WHEN CLOSED, THE OWNER SHALL BE RESPONSIBLE FOR SECURING THE SHUTTER AS REQ'D.
- THE SYSTEM DETAILED HEREIN IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR A SPECIFIC SITE. IF SITE CONDITIONS DEVIATE FROM THE CONDITIONS DETAILED HEREIN, A LICENSED ENGINEER OR REGISTERED ARCHITECT SHALL PREPARE SITE SPECIFIC DOCUMENTS TO BE USED IN CONJUNCTION WITH THIS DOCUMENT.
- THE ARCHITECT/ENGINEER OF RECORD FOR THE PROJECT SUPERSTRUCTURE WITH WHICH THIS DESIGN IS USED SHALL BE RESPONSIBLE FOR THE INTEGRITY OF ALL SUPPORTING SURFACES TO THIS DESIGN WHICH SHALL BE COORDINATED BY THE PERMITTING CONTRACTOR.
- ALL COMPONENTS SHALL CONFORM TO THEIR RESPECTIVE SPECIFICATIONS AS NOTED HEREIN.
- ALL EXTRUSIONS SHALL BE 6063-T5 ALUMINUM ALLOY, UNLESS NOTED OTHERWISE.
- SHUTTERS SHALL BE PERMANENTLY LABELED WITH A MINIMUM OF ONE LABEL PER ASSEMBLY, LOCATED ON THE BOTTOM PLACED ON THE BACK OF THE SHUTTER, CONTAINING THE FOLLOWING:
FOLDING SHUTTER CORPORATION
WEST PALM BEACH, FL
TAS 201, 202, & 203
FLORIDA PRODUCT APPROVAL NUMBER
- THIS SHUTTER SYSTEM HAS BEEN DESIGNED AND TESTED TO THE MAXIMUM SPANS AND CORRESPONDING LOADS SHOWN HEREIN.
- ALL BOLTS, NUTS, & WASHERS SHALL BE ZINC COATED STEEL, GALVANIZED STEEL, STAINLESS STEEL, OR ALUMINUM ALLOY 2024-T4 OR 7075-T5.
- STEEL SURFACES TO BE PLACED IN CONTACT WITH ALUMINUM SHALL BE GIVEN ONE COAT OF ZINC CHROMATE PRIMER OR SHALL BE GALVANIZED.



ENGINEERING EXPERTS
160 SW 12TH AVENUE, SUITE 100
DEERFIELD BEACH, FL 33442
PH: (561) 394-0660 FAX: (561) 394-0445
WWW.ENGINEXP.COM
A FRANK L. BERNARDO, P.E., INC. DESIGN

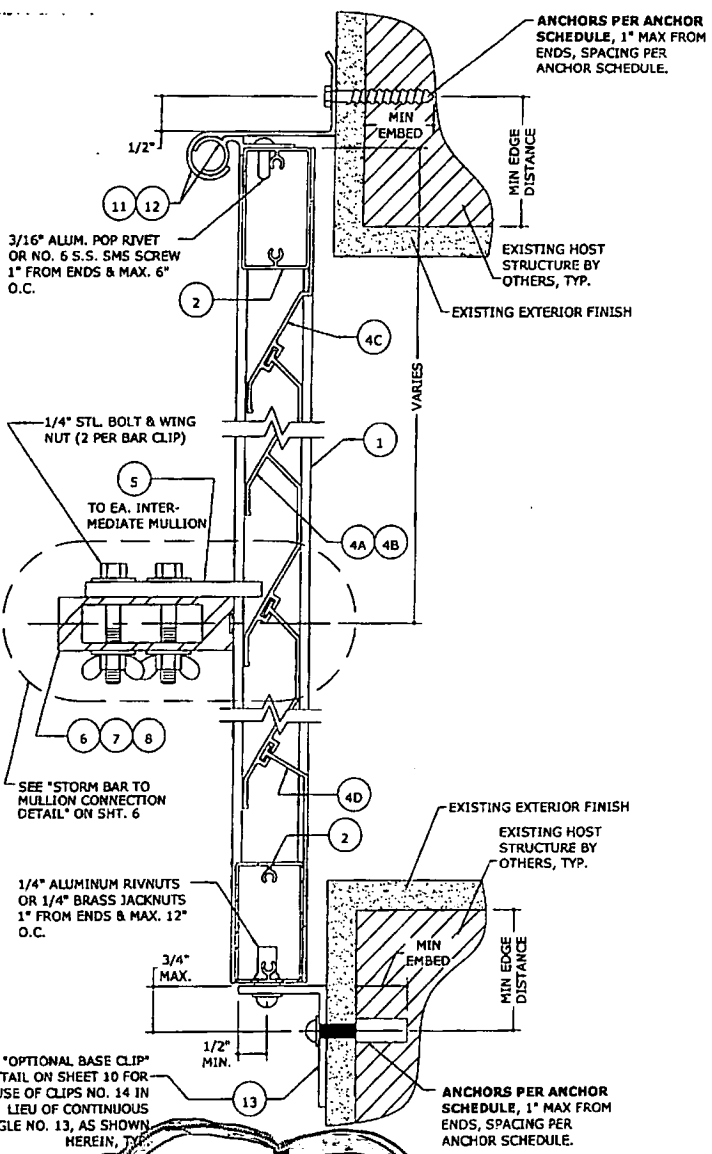
FOLDING SHUTTER CORP
7089 HENRY STREET PLACE
WEST PALM BEACH, FL 33413
WWW.FOLDINGSHUTTERS.COM

EXTRUDED ALUMINUM BAHAMA SHUTTER
LARGE & SMALL MISSILE IMPACT RESISTANT
FLORIDA STATE PRODUCT APPROVAL #6412

REVISION	DATE	BY	CHKD	APP'D
1	01/27/09	FLB	FLB	FLB
2	01/27/09	FLB	FLB	FLB
3	01/27/09	FLB	FLB	FLB
4	01/27/09	FLB	FLB	FLB
5	01/27/09	FLB	FLB	FLB
6	01/27/09	FLB	FLB	FLB
7	01/27/09	FLB	FLB	FLB
8	01/27/09	FLB	FLB	FLB
9	01/27/09	FLB	FLB	FLB
10	01/27/09	FLB	FLB	FLB
11	01/27/09	FLB	FLB	FLB
12	01/27/09	FLB	FLB	FLB
13	01/27/09	FLB	FLB	FLB
14	01/27/09	FLB	FLB	FLB

COPYRIGHT FRANK L. BERNARDO P.E.
06-FSC-0002
SCALE: 1/4" = 1'-0"
PAGE DESCRIPTION: 10

12/14/2011 - 8:40am chm F:\01 Project Plans\Folding Shutter Corp (FSC)\06000-06-FSC-0002 Impact Barona Shutter (FSA)06000-06-FSC-0002 Oak Impact Bahama Shutter (FSA)06000-06-FSC-0002



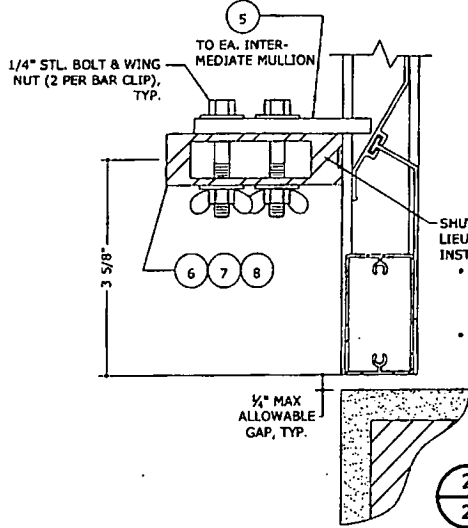
1 TYP FACE MOUNT VERTICAL SECTION
2 6" = 1'-0" VERT SECTION

ANCHOR SCHEDULE						
ANCHOR NO.	ANCHOR TYPE	SUBSTRATE	MINIMUM EMBEDMENT	MINIMUM EDGE DISTANCE	MAXIMUM SPACING FOR HINGE ANCHORS	MAXIMUM SPACING FOR CONTINUOUS BOTTOM ANGLE*
A	#12 316 SS SMS OR SDS	G=0.55 WOOD	1-1/2"	3/4"	18" O.C.	18" O.C.
B	1/4" CARBON STEEL OR STAINLESS STEEL ITW TAPCON	CONCRETE	1-1/4"	1"	12" O.C.	12" O.C.
C	1/4" CARBON STEEL OR STAINLESS STEEL ITW TAPCON	CONCRETE	1-1/4"	2-1/2"	12" O.C.	12" O.C.
D	1/4" CARBON STEEL ITW TAPCON	BLOCK	1-1/4"	1"	8-7/8" O.C.	8-7/8" O.C.
E	1/4" STAINLESS STEEL ITW TAPCON	BLOCK	1-1/4"	1"	8-5/8" O.C.	8-5/8" O.C.
F	1/4" CARBON STEEL ITW TAPCON	BLOCK	1-1/4"	2-1/2"	11-1/2" O.C.	11-1/2" O.C.
G	1/4" STAINLESS STEEL ITW TAPCON	BLOCK	1-1/4"	2-1/2"	9-3/8" O.C.	9-3/8" O.C.
H	1/4-20 ALL POINTS SOLID-SET SCREW ANCHOR	CONCRETE/ BLOCK	7/8"	1-1/4"	12" O.C.	12" O.C.
I	1/4-20 ELCO PANELMATE (MALE/FEMALE)	G=0.55 WOOD	1-7/8"	3/4"	18" O.C.	18" O.C.
J	1/4-20 ELCO PANELMATE (MALE/FEMALE)	CONCRETE	1-3/4"	2-1/2"	12" O.C.	12" O.C.
K	1/4-20 ELCO PANELMATE (MALE/FEMALE)	BLOCK	1-1/4"	2"	12" O.C.	12" O.C.

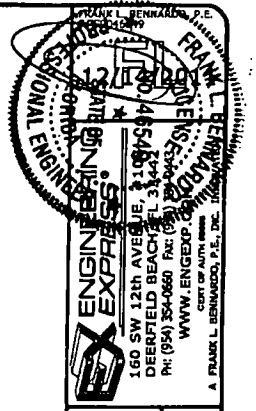
ANCHOR SCHEDULE NOTES:

- ANCHORS SHALL BE INSTALLED IN ACCORDANCE WITH MANUFACTURERS' RECOMMENDATIONS.
- TAPCONS SPECIFIED HEREIN SHALL BE MANUFACTURED BY ITW. "ELCO PANELMATE" ANCHORS MAY BE MALE OR FEMALE.
- WHERE ANCHORS FASTEN TO NARROW FACE OF STUD FRAMING, ANCHOR SHALL BE LOCATED IN CENTER OF NOMINAL 2x (MIN) WOOD STUD (I.E. 3/4" EDGE DISTANCE IS ACCEPTABLE FOR ANCHORS TO WOOD FRAMING).
- WOOD HOST STRUCTURE SHALL BE "SOUTHERN PINE" G=0.55 OR GREATER DENSITY.
- MINIMUM EMBEDMENT, EDGE DISTANCE AND SPACING SHALL BE AS NOTED IN ANCHOR SCHEDULE. MINIMUM EMBEDMENT AND EDGE DISTANCE EXCLUDES STUCCO, FOAM, BRICK AND OTHER WALL FINISHES.
- ALL CONCRETE ANCHORS SPECIFIED HEREIN SHALL BE INSTALLED TO NON-CRACKED CONCRETE ONLY.
- WHERE EXISTING STRUCTURE IS WOOD FRAMING, EXISTING CONDITIONS MAY VARY. FIELD VERIFY THAT FASTENERS ARE INTO ADEQUATE WOOD FRAMING MEMBERS, NOT INTO PLYWOOD.
- ANCHORS H, I, J, AND K SHALL BE INSTALLED WITH 1/4-20 316 SS MACHINE SCREW OR WASHERED NUT, AS APPLICABLE. MACHINE SCREWS SHALL HAVE MINIMUM OF 1/2" ENGAGEMENT OF THREADS IN BASE ANCHOR AND MAY HAVE EITHER A PAN HEAD, TRUSS HEAD, OR WAFER HEAD ("SIDEWALK BOLT") U.N.O.

* SEE "OPTIONAL BASE CLIP" DETAIL ON SHEET 10 FOR USE OF CLIPS NO. 14 IN LIEU OF CONTINUOUS ANGLE.



2 TYP TRAP MOUNT VERTICAL SECTION
2 6" = 1'-0" VERT SECTION

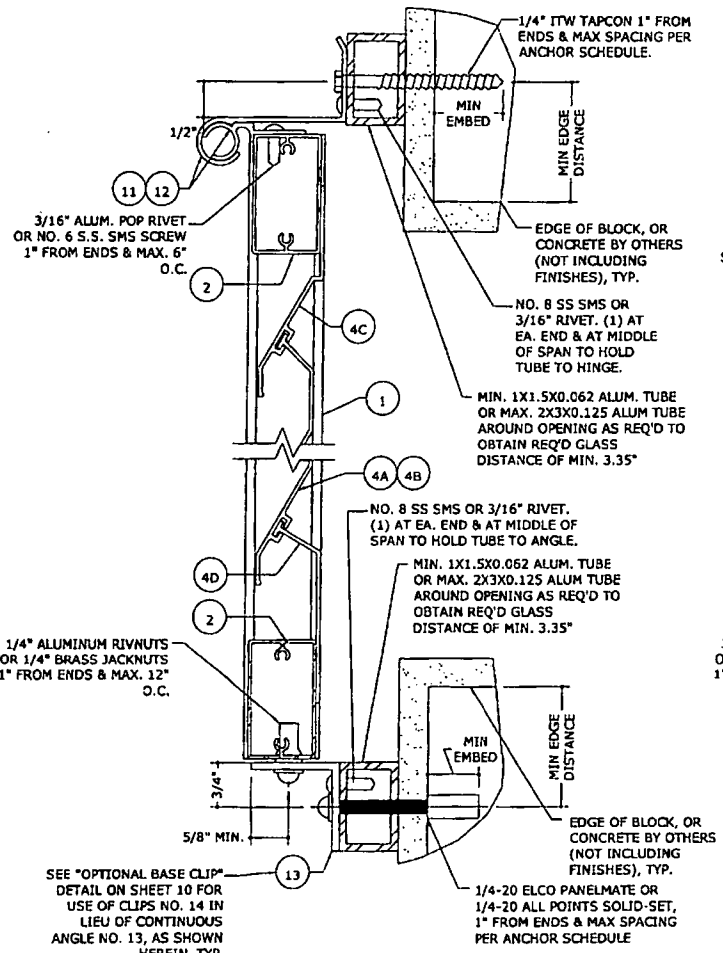


FOLDING SHUTTER CORP
 7089 HEIMSTREET PLACE
 WEST PALM BEACH, FL 33413
 www.foldingshutters.com
 EXTRUDED ALUMINUM BAHAMA SHUTTER
 LARGE & SMALL MISSILE IMPACT RESISTANT
 FLORIDA STATE PRODUCT APPROVAL #6412

DATE	12/20/11
DESIGNER	FLA
CHECKED	FLA
SCALE	AS SHOWN
PROJECT NO.	06-FSC-0002
DATE	12/20/11
SCALE	AS SHOWN
PROJECT NO.	06-FSC-0002
DATE	12/20/11
SCALE	AS SHOWN
PROJECT NO.	06-FSC-0002
DATE	12/20/11
SCALE	AS SHOWN
PROJECT NO.	06-FSC-0002
DATE	12/20/11
SCALE	AS SHOWN
PROJECT NO.	06-FSC-0002

COPYRIGHT FRANK L. BENARDO, P.E.
06-FSC-0002
 REVISION 104
 PAGE DESCRIPTION:
 2

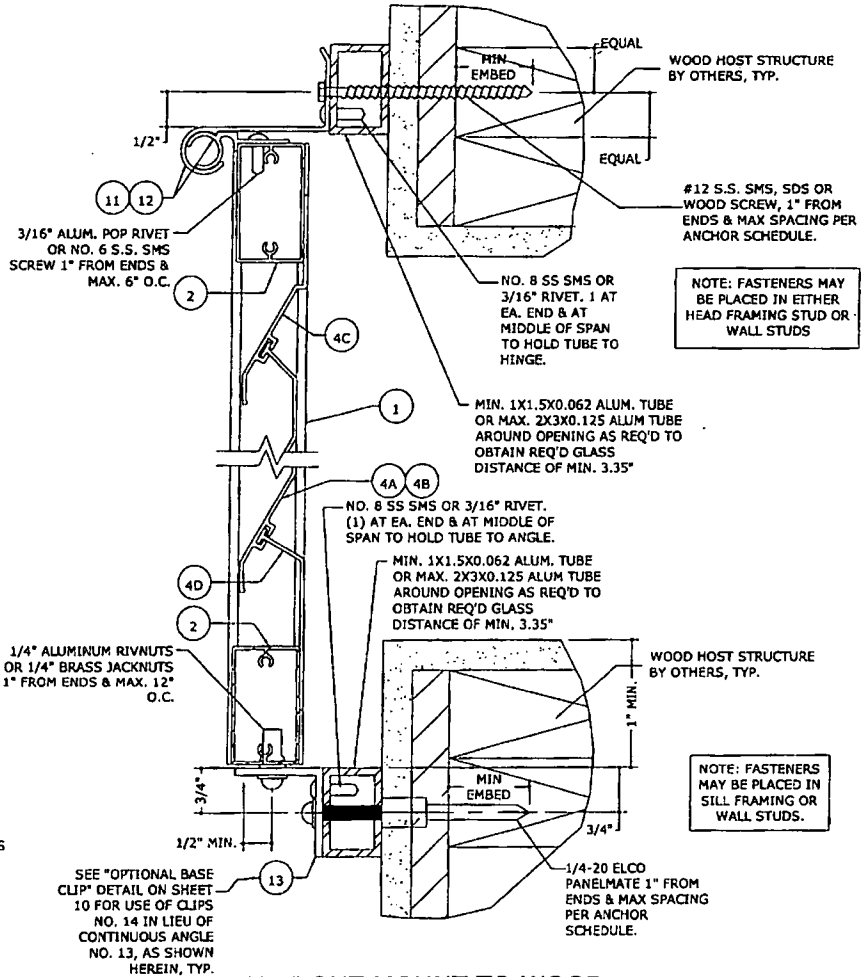
2/14/2011 - 5:48pm
 F:\01 Project Files\Folding Shutter Corp\FSC\0606-FSC-0002 Impact Bahama Shutter (FBA)0606-FSC-0002_04e Impact Bahama Shutter (FBA)0606



1
3

BUILDOUT MOUNT TO BLOCK/CONC
TYPICAL VERTICAL SECTION

6" = 1'-0" VERT SECTION

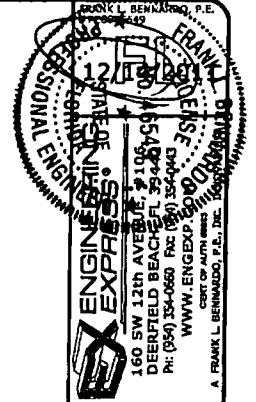
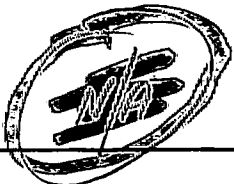


2
3

BUILDOUT MOUNT TO WOOD
TYPICAL VERTICAL SECTION

6" = 1'-0" VERT SECTION

FOR REQUIRED ANCHOR SPACING, EDGE DISTANCE
 AND EMBEDMENT, SEE ANCHOR SCHEDULE AND
 ANCHOR SCHEDULE NOTES ON SHEET 2.

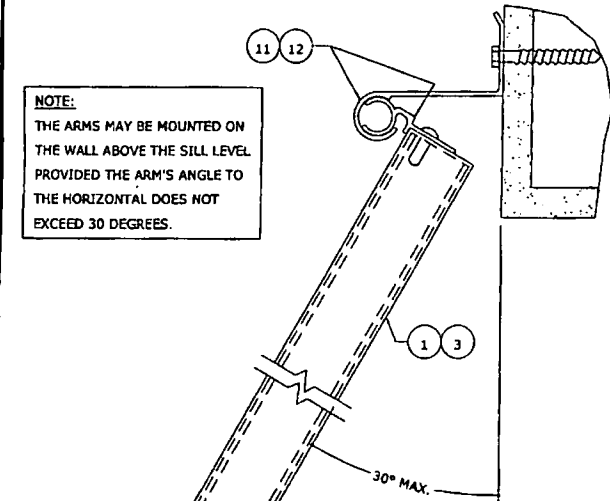


FOLDING SHUTTER CORP
 7899 HENRY STREET PLACE
 WEST PALM BEACH, FL 33413
 www.foldingshutters.com
 EXTRUDED ALUMINUM BAHAMA SHUTTER
 LARGE & SMALL MISSILE IMPACT RESISTANT
 FLORIDA STATE PRODUCT APPROVAL #6412

REVISION	DATE	BY	CHKD	DATE
1	02/23/09	FLB	FLB	02/23/09
2	07/17/09	FLB	FLB	07/17/09
3	12/14/11	FLB	FLB	12/14/11

COPYRIGHT FRANK L. BERNWARD P.E.
06-FSC-0002
 SCALE: 1/4" = 1'-0"
 PAGE DESCRIPTION:

NOTE:
THE ARMS MAY BE MOUNTED ON THE WALL ABOVE THE SILL LEVEL PROVIDED THE ARM'S ANGLE TO THE HORIZONTAL DOES NOT EXCEED 30 DEGREES.



TWO 1/4"-20 BOLTS INTO 1/4"-20 ALUM. RIVNUTS OR BRASS MOLLY JACK-NUTS

BRACKET NOTES

- MAY OPTION TO FASTEN BRACKET TO ANGLE WITH ONE 1/4"-20 S.S. THRU-BOLT IN LIEU OF TO THE SHUTTER FRAME.
- BRACKET MAY BE PLACED ON VERTICAL FRAME OR MULLION MEMBERS WITHIN 6" OF THE SHUTTER BASE EDGE.

1/4"-20 S.S. THRU-BOLT & NUT OR 1/4" DIA. ALUM. LOCK PIN

ANGLE MAY BE REMOVED WHEN SHUTTER IS IN OPEN POSITION

1/4"-20 THUMB SCREW WITH SLEEVE

SEE "ARM SPACING TABLE" ON THIS SHEET FOR SPACING OF ARMS.

1
4

FACE MOUNT TO BLOCK/CONC OPEN SHUTTER SECTION

6" = 1'-0"

VERT SECTION

ARM SPACING TABLE 1 ATTACHMENT TO BLOCK SUBSTRATE:

MAX SHUTTER HEIGHT	MAX ARM SPACING	
	1&2-PANEL SHUTTERS	3+ PANEL SHUTTERS
24"	56"	50"
36"	56"	33"
48"	50"	25"
60"	40"	20"
72"	32"	18"
84"	28"	14"
86"	24"	12"

NOTES:

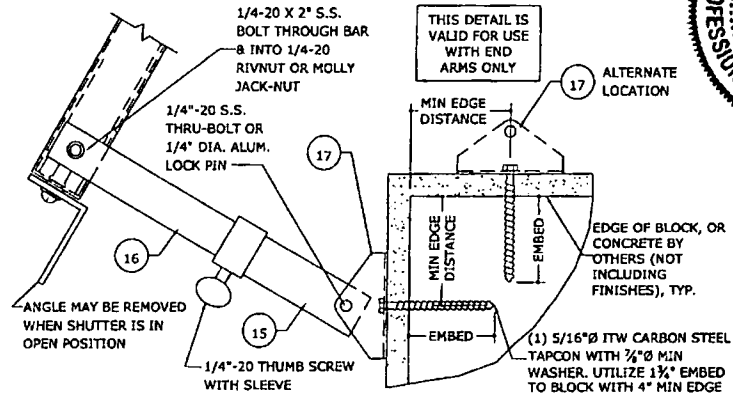
- SEE GENERAL NOTES ON SHEET 1 FOR OPEN SHUTTER POSITION DESIGN CRITERIA.

ARM SPACING TABLE 2 ATTACHMENT TO CONCRETE SUBSTRATE:

MAX SHUTTER HEIGHT	MAX ARM SPACING	
	1&2-PANEL SHUTTERS	3+ PANEL SHUTTERS
24"	56"	84"
36"	56"	66"
48"	56"	42"
60"	56"	33"
72"	56"	28"
84"	48"	24"
86"	42"	21"

NOTES:

- SEE GENERAL NOTES ON SHEET 1 FOR OPEN SHUTTER POSITION DESIGN CRITERIA.



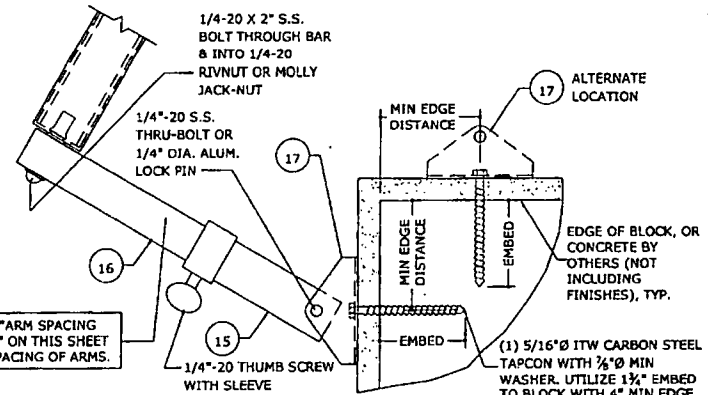
2
4

ALT ARM-TO-SHUTTER CONNECTION DETAIL "A"

N.T.S.

VERT SECTION

(1) 5/16"Ø ITW CARBON STEEL TAPCON WITH 3/8"Ø MIN WASHER. UTILIZE 1 3/4" EMBED TO BLOCK WITH 4" MIN EDGE DISTANCE OR 2 1/4" MIN EMBED TO CONCRETE WITH 3 3/4" MIN EDGE DISTANCE. SEE "ARM SPACING TABLES" ON THIS SHEET FOR SPACING OF ARMS.



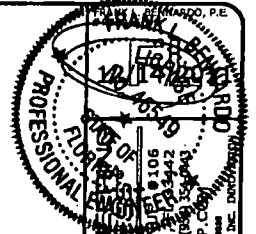
3
4

ALT ARM-TO-SHUTTER CONNECTION DETAIL "B"

N.T.S.

VERT SECTION

(1) 5/16"Ø ITW CARBON STEEL TAPCON WITH 3/8"Ø MIN WASHER. UTILIZE 1 3/4" EMBED TO BLOCK WITH 4" MIN EDGE DISTANCE OR 2 1/4" MIN EMBED TO CONCRETE WITH 3 3/4" MIN EDGE DISTANCE. SEE "ARM SPACING TABLES" ON THIS SHEET FOR SPACING OF ARMS.



FOLDING SHUTTER CORP

7089 HENRY STREET PLACE
WEST PALM BEACH, FL 33413
www.foldingshutters.com

EXTRUDED ALUMINUM BAHAMA SHUTTER
LARGE & SMALL MISSILE IMPACT RESISTANT
FLORIDA STATE PRODUCT APPROVAL #6412

REVISIONS	DATE	BY	APP'D	DESCRIPTION
1	01/27/08	FLB	FLB	ISSUE FOR CONSTRUCTION
2	01/27/08	FLB	FLB	REVISED FOR CONSTRUCTION
3	01/27/08	FLB	FLB	REVISED FOR CONSTRUCTION
4	12/24/11	FLB	FLB	REVISED FOR CONSTRUCTION

COPYRIGHT FRANK L. BERNARDO P.E.

06-FSC-0002

SCALE: 1/4" = 1'-0"

PAGE DESCRIPTION: 04

4

10



NOTE:
THE ARMS MAY BE MOUNTED ON THE WALL ABOVE THE SILL LEVEL PROVIDED THE ARM'S ANGLE TO THE HORIZONTAL DOES NOT EXCEED 30 DEGREES.

**ARM SPACING TABLE 3
ATTACHMENT TO WOOD SUBSTRATE:**

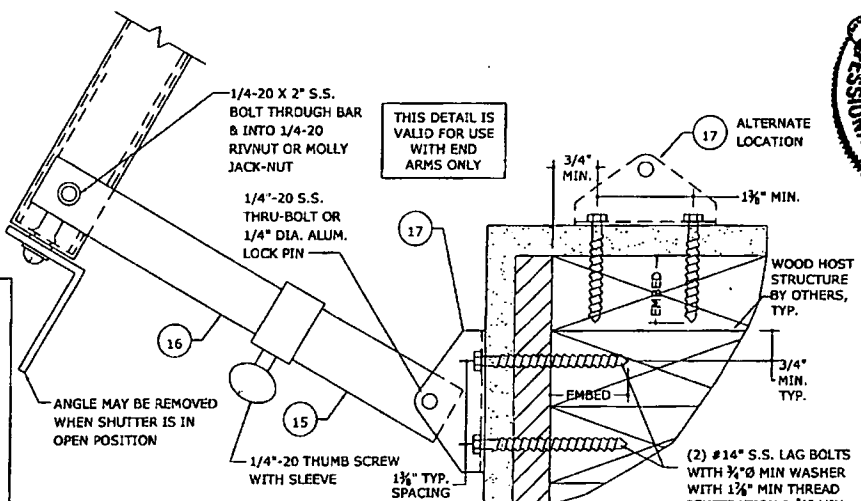
MAX SHUTTER HEIGHT	MAX ARM SPACING	
	1&2-PANEL SHUTTERS	3+ PANEL SHUTTERS
24"	56"	94"
36"	58"	62"
48"	56"	47"
60"	58"	37"
72"	50"	30"
84"	52"	28"
96"	46"	23"

NOTES:
1. SEE GENERAL NOTES ON SHEET 1 FOR OPEN SHUTTER POSITION DESIGN CRITERIA.

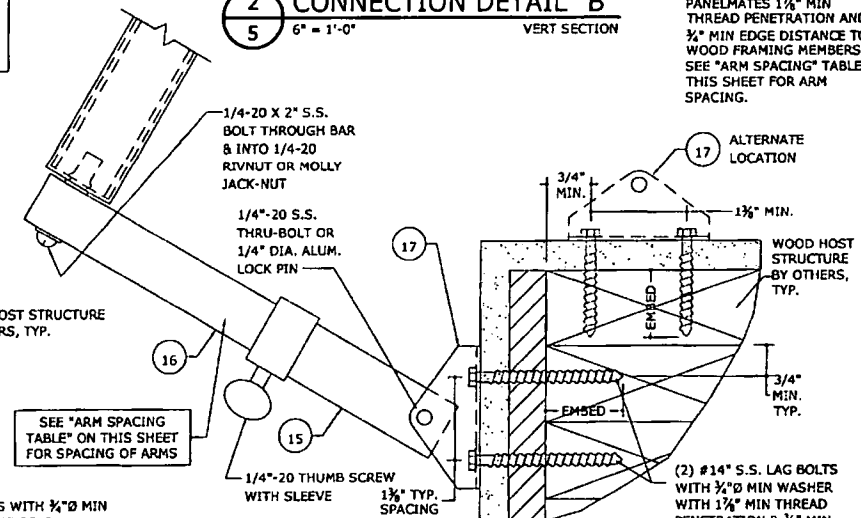
BRACKET NOTES

1. MAY OPTION TO FASTEN BRACKET TO ANGLE WITH ONE 1/4"-20 S.S. THRU-BOLT IN LIEU OF TO THE SHUTTER FRAME.
2. BRACKET MAY BE PLACED ON VERTICAL FRAME OR MULLION MEMBERS WITHIN 6" OF THE SHUTTER BASE EDGE.

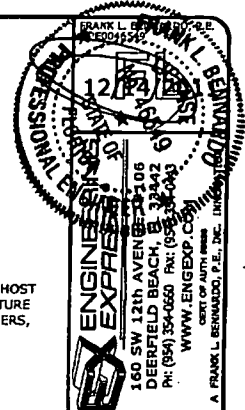
(2) #14" S.S. LAG BOLTS WITH 3/8"Ø MIN WASHER WITH 1 1/4" MIN THREAD PENETRATION & 3/4" MIN EDGE DISTANCE TO WOOD MEMBERS OR 1/4" ELCO PANELMATES 1 1/4" MIN THREAD PENETRATION AND 3/4" MIN EDGE DISTANCE TO WOOD FRAMING MEMBERS. SEE "ARM SPACING" TABLE THIS SHEET FOR ARM SPACING.



2 ALT ARM-TO-SHUTTER CONNECTION DETAIL "B"
5 6" = 1'-0" VERT SECTION



3 ALT ARM-TO-SHUTTER CONNECTION DETAIL "B"
5 6" = 1'-0" VERT SECTION



FOLDING SHUTTER CORP
7089 HENRY STREET PLACE
WEST PALM BEACH, FL 33413
www.foldingshutters.com

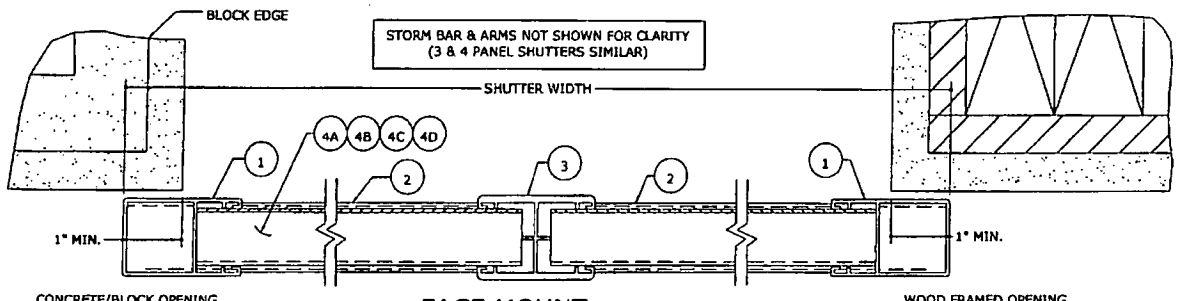
EXTRUDED ALUMINUM BAHAMA SHUTTER
LARGE & SMALL MISSILE IMPACT RESISTANT
FLORIDA STATE PRODUCT APPROVAL #6412

REVISIONS	DATE	BY	DESCRIPTION
1	02/20/06	FLB	ISSUED FOR PERMIT
2	07/17/06	FLB	REVISIONS
3	12/24/11	FLB	REVISIONS

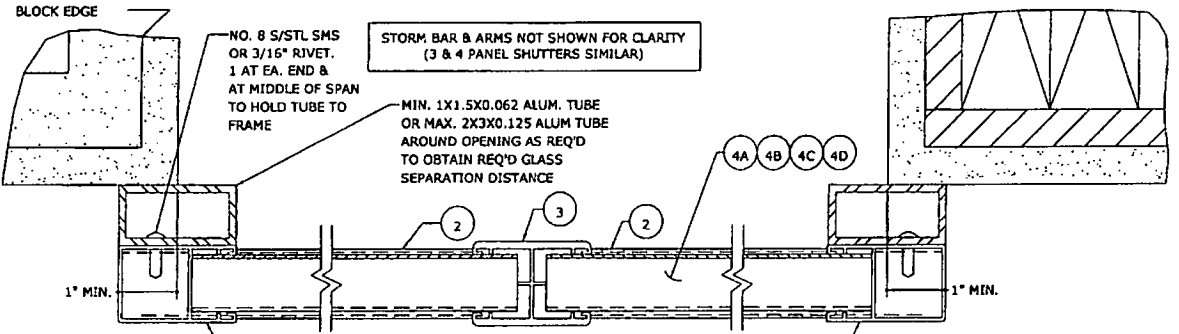
06-FSC-0002
SCALE: 1/4" = 1'-0"
PAGE DESCRIPTION:

12/14/2011 8:48am Chen Full Impact Plastic Folding Shutter Corp (FSC) 06-FSC-0002 Impact Bahama Shutter (FBA) 06-FSC-0002 One Impact Bahama Shutter (FBA) 06-FSC-0002

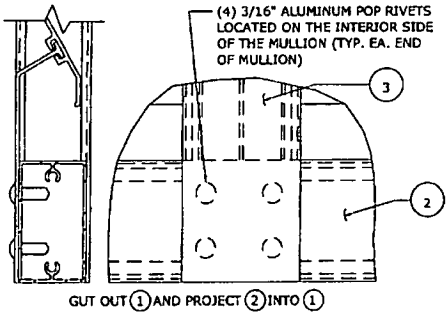
02/16/2011 - 8:13pm
 F:\01 Project Files\Folding Shutter Corp B.SC\000006\FIC-0002 Impact Banana Shutter (FSA)06-FSC-0002_006 Impact Banana Shutter (FSA).dwg



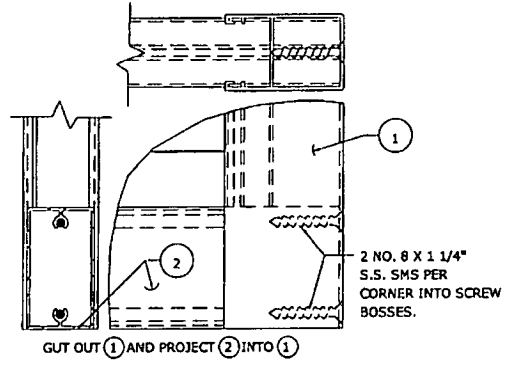
1
6 FACE MOUNT TYP HORIZ SECTION
 6" = 1'-0" HORIZ SECTION



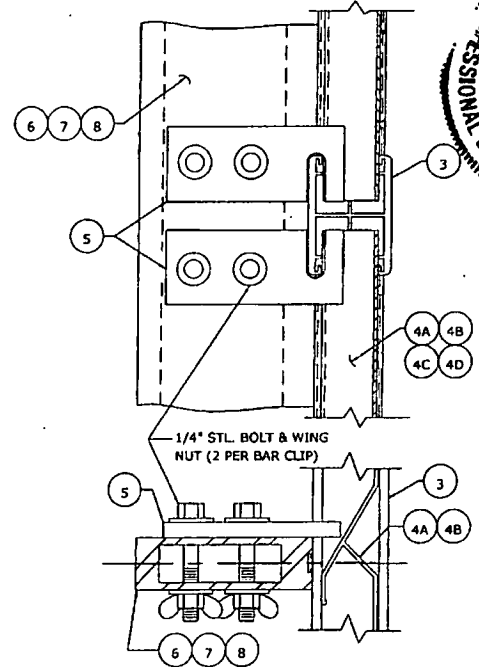
2
6 BUILDOUT MOUNT TYP HORIZ SECTION
 6" = 1'-0" HORIZ SECTION



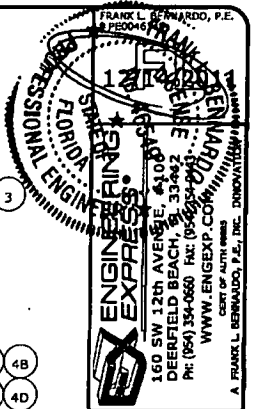
3
6 MULLION END ASSEMBLY
 6" = 1'-0"



4
6 FRAME CORNER ASSEMBLY
 6" = 1'-0"



5
6 CONNECTION DETAIL: STORM BAR TO FRAME
 6" = 1'-0" VERT SECTION

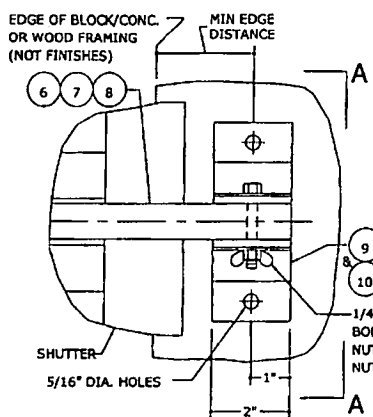


FOLDING SHUTTER CORP
 7089 HENRIESTREET PLACE
 WEST PALM BEACH, FL 33413
 www.foldingshutters.com
 EXTRUDED ALUMINUM BANANA SHUTTER
 LARGE & SMALL MISSILE IMPACT RESISTANT
 FLORIDA STATE PRODUCT APPROVAL #6412

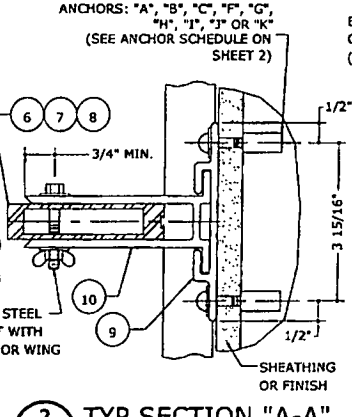
REVISIONS	DATE	BY	CHKD	APP'D
1	02/16/2011	FLB	FLB	FLB
2	02/16/2011	FLB	FLB	FLB
3	02/16/2011	FLB	FLB	FLB
4	02/16/2011	FLB	FLB	FLB
5	02/16/2011	FLB	FLB	FLB
6	02/16/2011	FLB	FLB	FLB

COPYRIGHT FRANK L. BERNARDO P.E.
06-FSC-0002
 SCALE: 1/4" = 1'-0"
 PAGE DESCRIPTION:

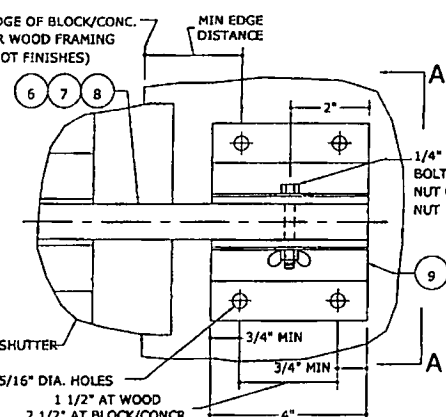
2/14/2011 1:48pm zhen F:\01 Project Plans\Folding Shutter Corp (FSC)\006\FSC-0002 Insect Bahama Shutter (FSC)\06\FSC-0002_04 Insect Bahama Shutter (FSC).dwg



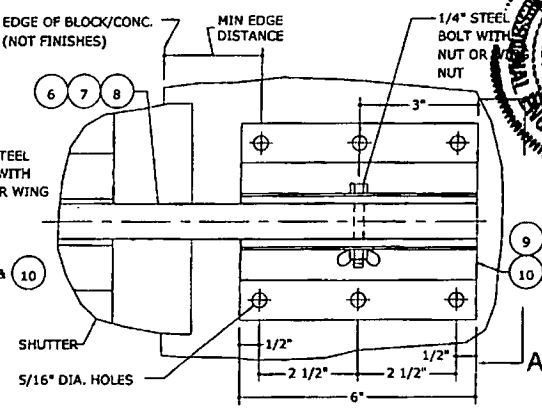
1
7
STORM BAR END CONNECTION "A"
4" = 1'-0" EXTER ELEV



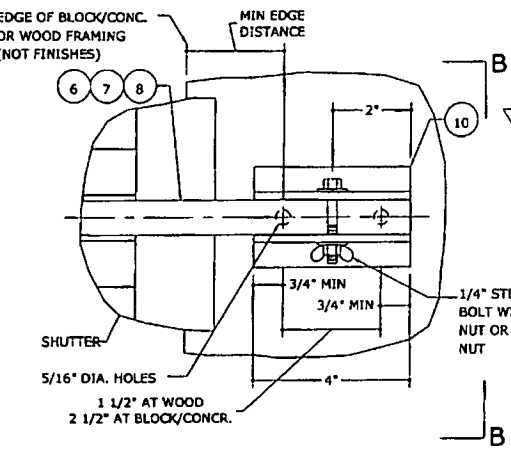
2
7
TYP SECTION "A-A"
4" = 1'-0" VERT SECTION



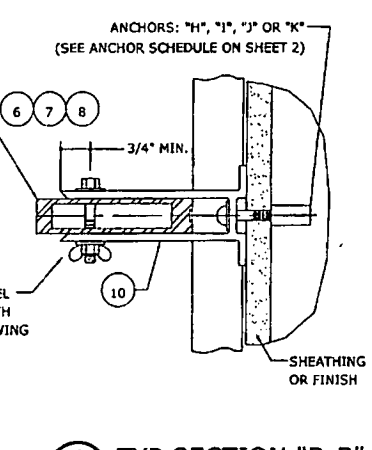
3
7
STORM BAR END CONNECTION "C"
4" = 1'-0" EXTER ELEV



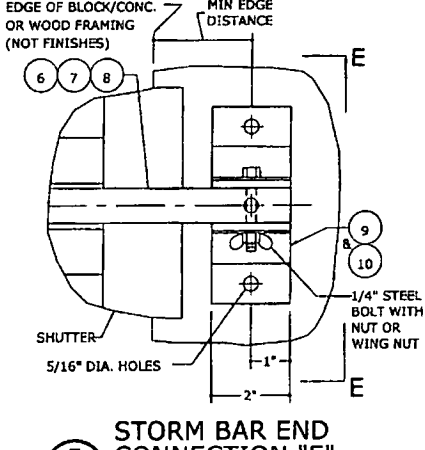
4
7
STORM BAR END CONNECTION "D"
4" = 1'-0" EXTER ELEV



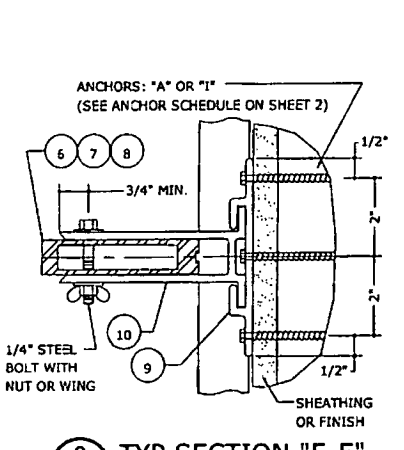
5
7
STORM BAR END CONNECTION "B"
4" = 1'-0" EXTER ELEV



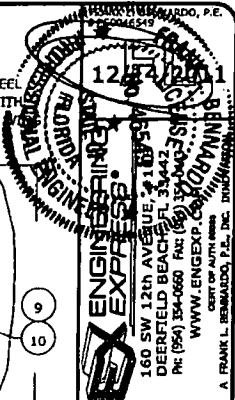
6
7
TYP SECTION "B-B"
4" = 1'-0" VERT SECTION



7
7
STORM BAR END CONNECTION "E"
4" = 1'-0" EXTER ELEV



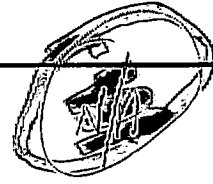
8
7
TYP SECTION "E-E"
4" = 1'-0" VERT SECTION



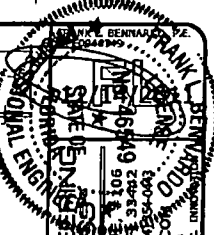
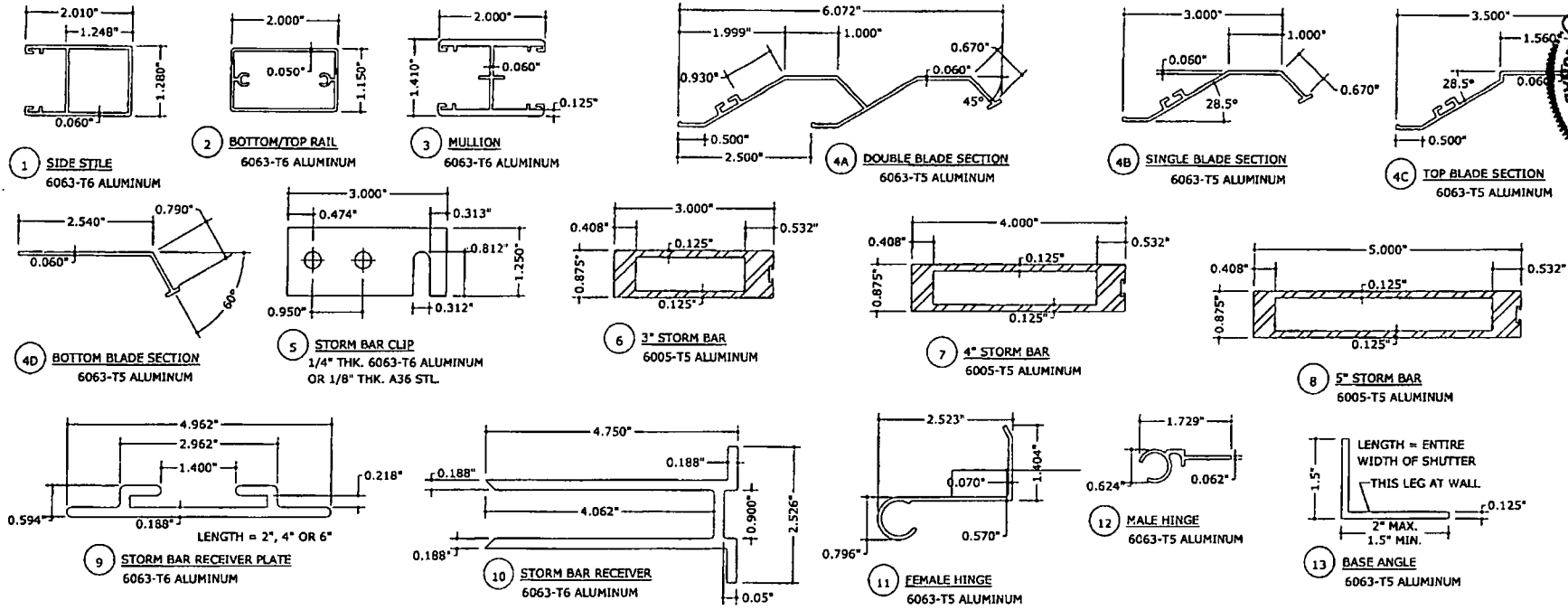
FOLDING SHUTTER CORP
7089 HENNSTREET PLACE
WEST PALM BEACH, FL 33413
www.foldingshutters.com
EXTRUDED ALUMINUM BAHAMA SHUTTER
LARGE & SMALL MISSILE IMPACT RESISTANT
FLORIDA STATE PRODUCT APPROVAL #6412

REVISION	DATE	BY	CHKD	DESCRIPTION

COPYRIGHT FRANK L. BERNARDO P.E.
06-FSC-0002
SCALE: 1/4" = 1'-0"
PAGE DESCRIPTION:



12/14/2011 8:48am F:\01 Project Files\Folding Shutter Corp (FSC)\000008.FSC-0002 Impact Bahama Shutter (FBA).dwg

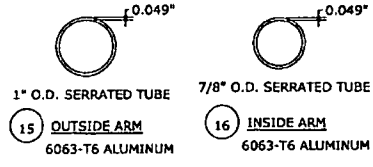
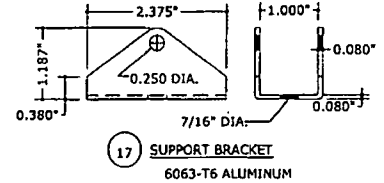
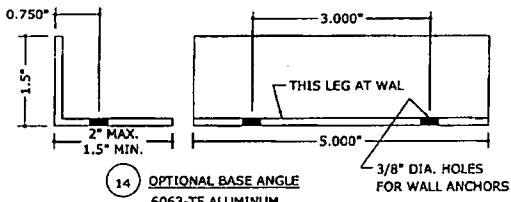


ENGINEERING EXPRESS
160 SW 12TH AVENUE, # 105
DEERFIELD BEACH, FL 33443
PH: (561) 354-0660 FAX: (561) 354-0462
WWW.ENGGEXP.COM
A. FRANK L. HERNANDEZ, P.E., INC.

FOLDING SHUTTER CORP
7089 HEMSTREET PLACE
WEST PALM BEACH, FL 33413
www.foldingshutters.com
EXTRUDED ALUMINUM BAHAMA SHUTTER
LARGE & SMALL MISSILE IMPACT RESISTANT
FLORIDA STATE PRODUCT APPROVAL #6412

MATERIAL LIST

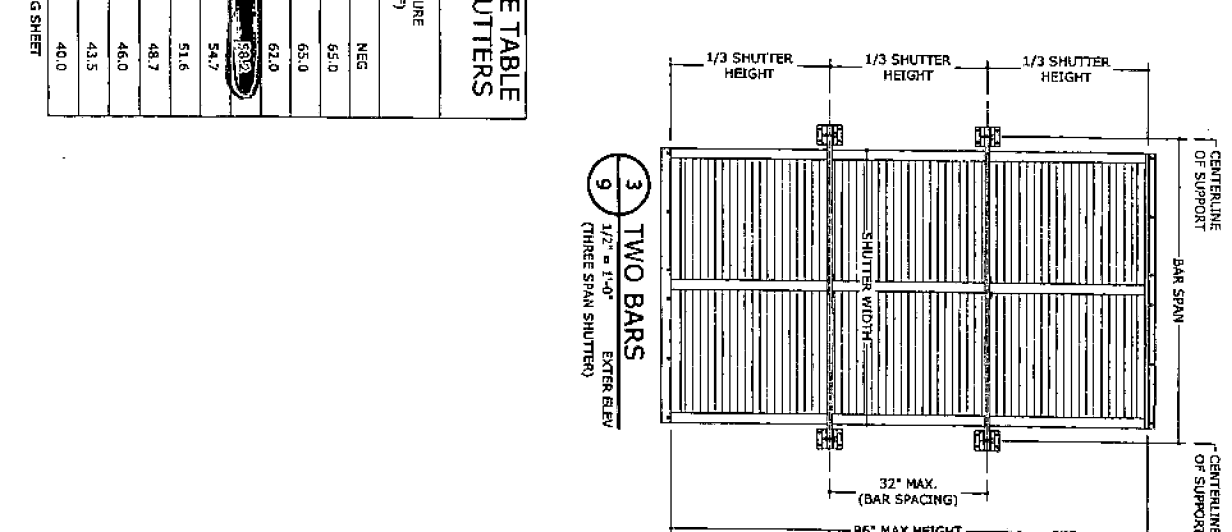
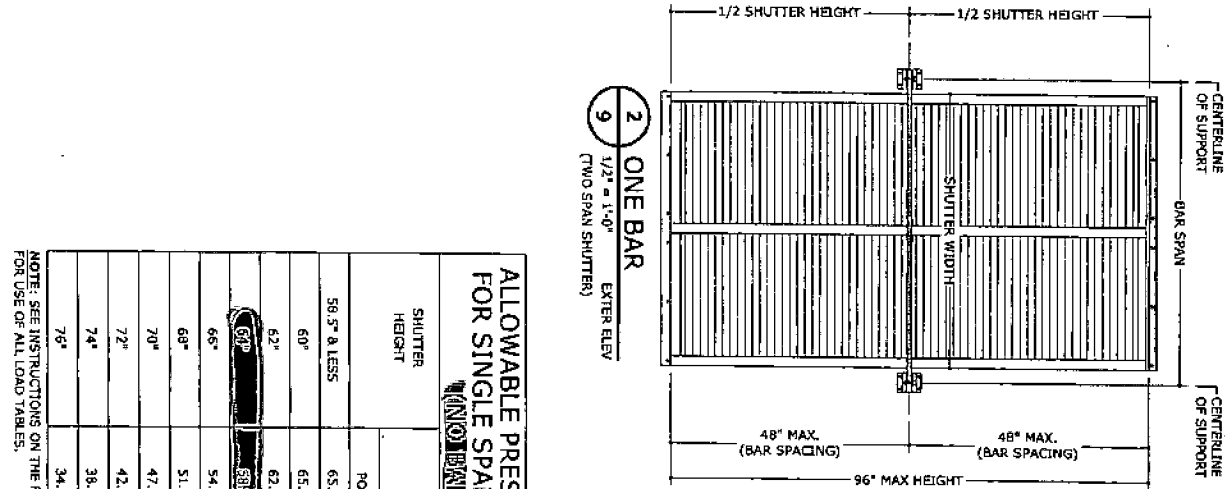
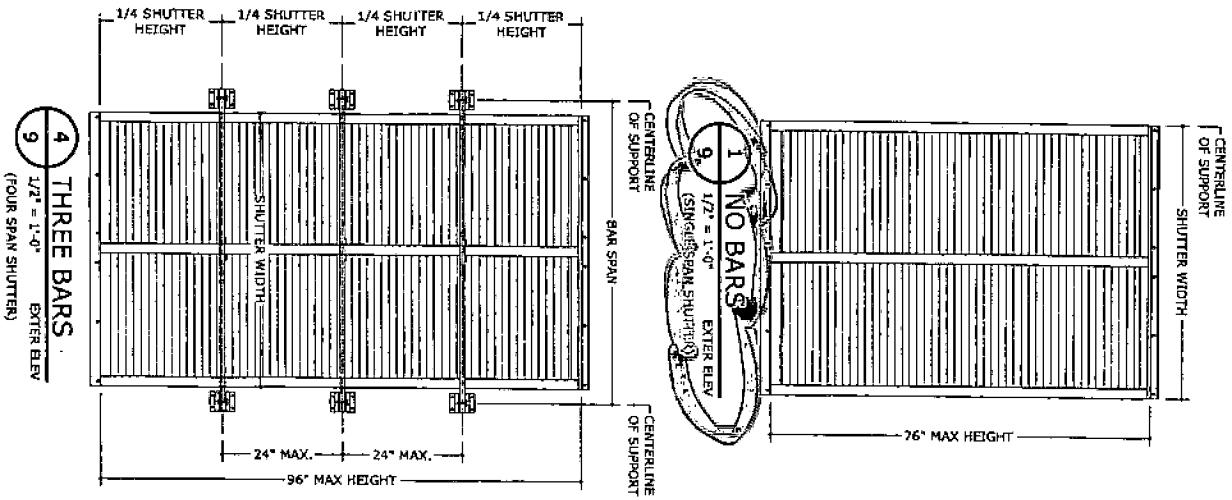
NO.	DESCRIPTION	NOTES
1	SIDE STILE	
2	TOP & BOTTOM RAIL	
3	MULLION	
4A	DOUBLE BLADE SECTION	MAIN BLADE SECTION
4B	SINGLE BLADE SECTION	USED AS FILLER WHEN REQUIRED
4C	TOP SHUTTER BLADE	
4D	BOTTOM SHUTTER BLADE	
5	STORM BAR CLIP	SECURES STORM BAR TO SHUTTER PANEL FRAMES
6	3" STORM BAR	
7	4" STORM BAR	
8	5" STORM BAR	
9	STORM BAR RECEIVER PLATE	GRABS THE STORM BAR END CONNECTOR
10	STORM BAR RECEIVER	
11	FEMALE HINGE	
12	MALE HINGE	
13	CONTINUOUS BASE ANGLE	SHUTTER LEG LENGTH VARIES W/SHUTTER WALL OFFSET
14	OPTIONAL BASE ANGLE	PLACED AT MULLION & SIDE FRAME ENDS
15	OUTER ARM	POSITION PER DETAILS & SPACING TABLE
16	INNER ARM	POSITION PER DETAILS & SPACING TABLE
17	SHUTTER ARM SUPPORT BRACKET	ARM TO SHUTTER & WALL



NOTE: ALL DETAILS ARE DRAWN TO 1/2 FULL SIZE UNLESS NOTED OTHERWISE.

DATE	12/14/2011
DRAWN BY	SAZOR
CHECKED BY	FLB
DESIGNED BY	BZ2000
SCALE	AS SHOWN
PROJECT NO.	06-FSC-0002
REV.	01
DATE	12/14/2011
BY	FLB
CHECKED BY	FLB
DATE	12/14/2011
BY	FLB
CHECKED BY	FLB
DATE	12/14/2011
BY	FLB
CHECKED BY	FLB

06-FSC-0002
SCALE: 1/2"
PAGE DESCRIPTION:



ALLOWABLE PRESSURE TABLE FOR SINGLE SPAN SHUTTERS (NO BARS)

SHUTTER HEIGHT	PRESSURE (PSF)	
	POS	NEG
56.5" & LESS	65.0	65.0
60"	65.0	65.0
62"	62.0	62.0
66"	54.7	54.7
68"	51.6	51.6
70"	47.9	48.7
72"	42.8	46.0
74"	38.4	43.5
76"	34.5	40.0

NOTE: SEE INSTRUCTIONS ON THE FOLLOWING SHEET FOR USE OF ALL LOAD TABLES.

FOLDING SHUTTER CORP
 7089 HEMSTREET PLACE
 WEST PALM BEACH, FL 33413
 www.foldingshutters.com

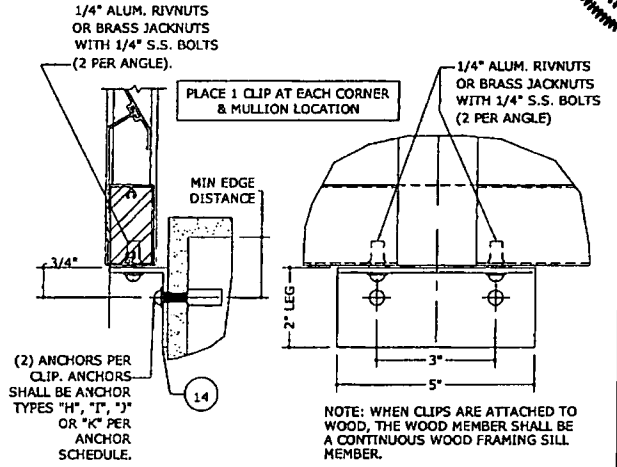
EXTRUDED ALUMINUM BAHAMA SHUTTER
 LARGE & SMALL MISSILE IMPACT RESISTANT
 FLORIDA STATE PRODUCT APPROVAL #5412

ENGINE EXPRESS
 160 SW 12th AVENUE, #105
 DEERFIELD BEACH, FL 33442-9959
 Ph: (561) 354-0560 Fax: (561) 354-0443
 WWW.ENGEKP.COM
 DESIGNED BY FRANK L. BERNARDO, P.E., INC.

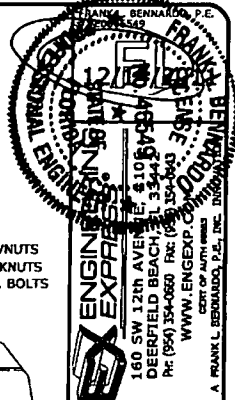
9
 10

STORM BAR ALLOWABLE BAR SPAN

ALLOWABLE PRESSURE (PSF)	HEIGHT OR BAR SPACING (IN)	3" BAR				4" BAR				5" BAR			
		CONNECTION TYPE				CONNECTION TYPE				CONNECTION TYPE			
		"A" OR "B"	"C"	"D"	"E"	"A" OR "B"	"C"	"D"	"E"	"A" OR "B"	"C"	"D"	"E"
+/- 30	24	114.4	120.0	120.0	120.0	114.4	124.0	124.0	124.0	114.4	124.0	124.0	124.0
	30	93.9	112.3	112.3	112.3	93.9	124.0	124.0	124.0	93.9	124.0	124.0	124.0
	36	80.3	106.4	106.4	106.4	80.3	124.0	124.0	124.0	80.3	124.0	124.0	124.0
	42	70.5	101.6	101.6	101.6	70.5	124.0	124.0	124.0	70.5	124.0	124.0	124.0
	48	63.2	97.7	97.7	97.7	63.2	114.4	121.9	121.9	63.2	114.4	124.0	124.0
+/- 35	24	89.8	114.6	114.6	114.6	89.8	124.0	124.0	124.0	89.8	124.0	124.0	124.0
	30	82.2	107.2	107.2	107.2	82.2	124.0	124.0	124.0	82.2	124.0	124.0	124.0
	36	70.5	101.6	101.6	101.6	70.5	124.0	124.0	124.0	70.5	124.0	124.0	124.0
	42	62.2	97.1	97.1	97.1	62.2	112.3	121.2	121.2	62.2	112.3	124.0	124.0
	48	55.9	93.4	93.4	93.4	55.9	99.8	116.4	116.4	55.9	99.8	124.0	124.0
+/- 40	24	88.8	110.1	110.1	110.1	88.8	124.0	124.0	124.0	88.8	124.0	124.0	124.0
	30	73.4	103.1	103.1	103.1	73.4	124.0	124.0	124.0	73.4	124.0	124.0	124.0
	36	63.2	97.7	97.7	97.7	63.2	114.4	121.9	121.9	63.2	114.4	124.0	124.0
	42	55.9	93.4	93.4	93.4	55.9	99.8	116.4	116.4	55.9	99.8	124.0	124.0
	48	50.4	88.8	88.8	88.8	50.4	88.8	111.9	111.9	50.4	88.8	124.0	124.0
+/- 45	24	80.3	106.4	106.4	106.4	80.3	124.0	124.0	124.0	80.3	124.0	124.0	124.0
	30	66.6	99.6	99.6	99.6	66.6	121.2	124.0	124.0	66.6	121.2	124.0	124.0
	36	57.5	94.4	94.4	94.4	57.5	103.0	117.7	117.7	57.5	103.0	124.0	124.0
	42	51.0	90.0	90.0	90.0	51.0	90.0	112.4	112.4	51.0	90.0	124.0	124.0
	48	46.1	80.3	80.3	80.3	46.1	80.3	108.0	108.0	46.1	80.3	114.4	124.0
+/- 50	24	73.4	103.1	103.1	103.1	73.4	124.0	124.0	124.0	73.4	124.0	124.0	124.0
	30	61.2	96.6	96.6	96.6	61.2	110.3	120.4	120.4	61.2	110.3	124.0	124.0
	36	53.0	91.6	91.6	91.6	53.0	93.9	114.1	114.1	53.0	93.9	124.0	124.0
	42	47.1	82.2	82.2	82.2	47.1	82.2	108.9	108.9	47.1	82.2	117.3	124.0
	48	42.7	73.4	73.4	73.4	42.7	73.4	104.2	104.2	42.7	73.4	104.2	119.3
+/- 55	24	67.9	100.3	100.3	100.3	67.9	123.7	124.0	124.0	67.9	123.7	124.0	124.0
	30	56.7	93.9	93.9	93.9	56.7	101.4	117.1	117.1	56.7	101.4	124.0	124.0
	36	49.2	86.5	86.5	86.5	49.2	86.5	110.9	110.9	49.2	86.5	123.7	124.0
	42	43.9	78.6	78.6	78.6	43.9	76.8	105.9	105.9	43.9	76.8	107.8	123.4
	48	39.9	67.9	67.9	67.9	39.9	67.9	95.8	95.8	39.9	67.9	95.8	108.5
+/- 60	24	63.2	97.7	97.7	97.7	63.2	114.4	121.9	121.9	63.2	114.4	124.0	124.0
	30	53.0	91.6	91.6	91.6	53.0	93.9	114.1	114.1	53.0	93.9	124.0	124.0
	36	46.1	80.3	80.3	80.3	46.1	80.3	108.0	108.0	46.1	80.3	114.4	124.0
	42	41.3	70.5	70.5	70.5	41.3	70.5	99.8	99.8	41.3	70.5	99.8	114.2
	48	37.6	63.2	63.2	63.2	37.6	63.2	88.8	88.8	37.6	63.2	88.8	101.4
+/- 65	24	59.3	95.5	95.5	95.5	59.3	106.5	119.0	119.0	59.3	106.5	124.0	124.0
	30	49.8	87.6	87.6	87.6	49.8	87.6	111.4	111.4	49.8	87.6	124.0	124.0
	36	43.5	75.0	75.0	75.0	43.5	75.0	105.5	105.5	43.5	75.0	106.5	122.0
	42	39.0	66.0	66.0	66.0	39.0	66.0	93.0	93.0	39.0	66.0	93.0	108.3
	48	35.8	59.3	59.3	59.3	35.8	59.3	82.9	82.9	35.8	59.3	82.9	94.6
+/- 70	24	55.9	93.4	93.4	93.4	55.9	99.8	116.4	116.4	55.9	99.8	124.0	124.0
	30	47.1	82.2	82.2	82.2	47.1	82.2	108.9	108.9	47.1	82.2	117.3	124.0
	36	41.3	70.5	70.5	70.5	41.3	70.5	99.8	99.8	41.3	70.5	99.8	114.2
	42	37.1	62.2	62.2	62.2	37.1	62.2	87.2	87.2	37.1	62.2	87.2	99.6
	48	33.9	55.9	55.9	55.9	33.9	55.9	77.8	77.8	33.9	55.9	77.8	88.8
+/- 75	24	53.0	91.6	91.6	91.6	53.0	93.9	114.1	114.1	53.0	93.9	124.0	124.0
	30	44.8	77.5	77.5	77.5	44.8	77.5	106.7	106.7	44.8	77.5	110.3	124.0
	36	39.3	66.6	66.6	66.6	39.3	66.6	93.9	93.9	39.3	66.6	93.9	107.3
	42	35.4	58.8	58.8	58.8	35.4	58.8	82.2	82.2	35.4	58.8	82.2	93.7
	48	32.5	53.0	53.0	53.0	32.5	53.0	73.4	73.4	32.5	53.0	73.4	83.5
+/- 80	24	50.4	88.8	88.8	88.8	50.4	88.8	111.9	111.9	50.4	88.8	124.0	124.0
	30	42.7	73.4	73.4	73.4	42.7	73.4	104.2	104.2	42.7	73.4	104.2	119.3
	36	37.6	63.2	63.2	63.2	37.6	63.2	88.8	88.8	37.6	63.2	88.8	101.4
	42	33.9	55.9	55.9	55.9	33.9	55.9	77.8	77.8	33.9	55.9	77.8	88.8
	48	31.2	50.4	50.4	50.4	31.2	50.4	69.6	69.6	31.2	50.4	69.6	79.0



1 10
4" = 1'-0" VERT SECT / EXTER ELEV



FOLDING SHUTTER CORP
 7089 HENRY STREET PLACE
 WEST PALM BEACH, FL 33413
 www.foldingshutters.com

EXTRUDED ALUMINUM BAHAMA SHUTTER
 LARGE & SMALL MISSILE IMPACT RESISTANT
 FLORIDA STATE PRODUCT APPROVAL #6912

DATE	8/22/08
BY	FLB
CHECKED	FLB
SCALE	AS SHOWN
PROJECT	06-FSC-0002
DESCRIPTION	STORM BAR ALLOWABLE BAR SPAN

COPYRIGHT FRANK L. EDWARO P. E.
06-FSC-0002
 SCALE: 1/4" = 1'-0"
 PAGE DESCRIPTION: 10

LOAD TABLE INSTRUCTIONS:

1. DETERMINE THE REQUIRED DESIGN PRESSURE AND SHUTTER HEIGHT OR BAR SPACING.
2. IF THE SHUTTER HEIGHT IS 76" OR LESS, GO TO THE "ALLOWABLE PRESSURE TABLE FOR SINGLE SPAN SHUTTERS" (PREVIOUS SHEET). IF THE REQUIRED DESIGN PRESSURES ARE LESS THAN OR EQUAL TO THOSE IN THE TABLE, NO STORM BAR IS REQUIRED. IF NOT, STORM BAR(S) ARE REQUIRED.
3. IF BARS ARE REQUIRED, GO TO LOAD TABLES ON THIS SHEET.
4. GO TO APPLICABLE DESIGN PRESSURE IN TABLE AND CHOOSE THE DESIRED BAR SPACING.
5. READ ACROSS THE TABLE AND CHOOSE THE BAR AND CONNECTION TYPE WHICH WILL ACHIEVE THE REQUIRED BAR SPAN. USE THAT BAR & THAT CONNECTION. NOTE THAT IF YOU DECIDE THAT THE BAR &/OR CONNECTION IS TOO LARGE FOR YOUR LIKING, ADD A BAR & REPEAT THESE INSTRUCTIONS.
6. NOTE THAT IF STORM BARS ARE REQUIRED, THE MAXIMUM STORM BAR TRIBUTARY WIDTH MAY NOT EXCEED 48".
7. ALL PRESSURES ARE FOR BOTH POSITIVE & NEGATIVE WIND ARE PSF.
8. REF. SHEET 7 FOR CONNECTION TYPES & DETAILS.



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection Mon Tue Wed Thur Fri 3/26/15 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
91157	Stueart	Final		
	12 N. Ridgeview Drive	Shutters	Pass	Close
	Folding Shutter Corp			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
10778	Nehme		FAIL-	OK TO
	44S Sewalls Pt Rd	Final	NOT READY	FURNISH
	Oceanfront Bldrs			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11193	Christie	Final		
PM Requested	103 S Sewalls Pt Rd	Windows	NO ANSWER	
	Glass Plus		287-0816	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

ADMIN VARIANCE

RECEIVED
JUL 29 2003

RECEIVED
JUL 29 2003
BY: _____

TOWN OF SEWALL'S POINT ADMINISTRATIVE VARIANCE APPLICATION

- 1. Owner of Property: Susan Roberts
- 2. Address of Property: 12 N Ridgeview Sewall's Pt.
- 3. Address of Applicant: 12 N Ridgeview Sewall's Pt.
- 4. Phone Number of Applicant: 283 - 0744
- 5. Length and location (front, rear, & side) of encroachment (if more than one, please list separately):

#1 - Pool equipment Pad - 2.4' - East Side rear corner

#2 - A/C pad ; 4.2' - East side - front corner

- 6. The following items must accompany this application:
 - A. \$400.00 Filing Fee (non-refundable).
 - B. Certificate of Ownership (copy of warranty deed or tax receipt).
 - C. A list certifying the name and address of all adjacent property owners as shown in the Official Records of the Martin County Tax Collector's Office.
 - D. A building permit or building permit application with the building permit number indicated on it.
 - E. Original permit drawings, plans or surveys.
 - F. Current surveys (six each) 24" X 36" and one (1) 8 1/2" X 11".
Surveys must be:
 - (1). Prepared by a licensed surveyor registered in Florida in accordance with the minimum technical standards established by the Florida Board of Professional Surveyors and Mappers.
 - (2). Contain the address of the property, including street name and number, and show the proximity of all boundary streets.
 - (3). Show the location of all buildings, structures, and above-ground encroachments and improvements.
 - (4). Show all setback requirements under the Town of Sewall's Point Code of Ordinances.
 - (5). Show location and identification of all encroachments into setbacks under this code, including the type of improvement comprising the encroachments and specifically identifying any encroachment that is the subject of the application.
 - (6). Contain a certification to the Town of Sewall's Point.
 - (7). Contain any other information the Town Commission may require to show whether the setback encroachment is entitled to an administrative variance.
 - G. Letters of No Objection from all adjacent property owners or proof that a copy of the administrative variance application has been sent to all adjacent property owners by certified mail with a written notice informing

them that any objections to the requested administrative variance must be filed with the Town Clerk within fifteen days of the date that the notice was mailed.

7. The Town Commission may grant the variance if the Town Commission finds that:
- A. The encroachment is less than or equal to thirty (30) percent of the setback requirement in effect on the date that the encroachment was created.
 - B. Either letters of no objection have been filed by the applicant for all adjacent property owners, or 15 days have [passed since the mailing to adjacent neighbors informing them of their right to file an objection with the town clerk, and no letter of objections to the administrative variance application have been filed.
 - C. The structure(s) for which a variance is sought was constructed under a valid permit. This requirement does not apply to variances with encroachments of less than twenty (20) inches.
 - D. The setback violation was a good faith error and was not intentional.

I hereby certify that all of the information above and the application materials I have provided are true and correct.



Applicant Signature

Dated this 15th of July 2003

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

MARC S. TEPLITZ
Mayor

JAMES D. BERCAW
Vice Mayor

E. DANIEL MORRIS
Commissioner

THOMAS P. BAUSCH
Commissioner

RICHARD L. BARON
Commissioner



JOSEPH C. DORSKY
Town Manager

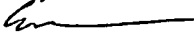
JOAN H. BARROW
Town Clerk

LARRY E. McCARTY
Chief of Police

GENE SIMMONS
Building Official

JOSE TORRES, JR.
Maintenance

To: Mayor and Commissioners

Fm: 
Gene Simmons
Building Official

Ref: Request for Administrative Variance by Susan Roberts

Date: September 9, 2003

Attached for your review and approval is an application for an administrative variance requested by Susan Roberts residing at 12 North Ridgeview Drive.

The encroachments, which need to be addressed, are as follows:

1. NE Corner – existing side setback of 12.6 feet - required 15 feet front setback - encroachment of 2.4 feet exists.
2. SE Corner – existing side setback of 10.8 feet – required 15 feet front setback – encroachment of 4.2 feet exists.

Per Administrative Ordinance No. 292 dated November 19, 2002 the applicant has met the following requirements as outline in the ordinance:

1. The setback violation(s) for the encroachment(s) shown on the survey was/were a good faith error(s) and was/were not intentional.
2. I have inspected the files for 12 North Ridgeview Drive and have determined that the residence a for which this variance is requested was permitted under one permit number 2383 dated August 30, 1988.
3. I have received surveys (24" X 36" and one 8 ½" X 11" for recording) containing all pertinent information.
4. Letters of No Objection or proof of service filed at least 15 days prior to the town meeting.
5. The encroachments are less than 30% of the setback requirements.

If any other information is requested please do not hesitate to contact me at 287-2455.



Sewall's Point Road, Sewall's Point, Florida 34996

Town Hall (561) 287-2455 • Fax (561) 220-4765 • E-Mail: clerk@sewallspoint.org

Police Department (561) 781-3378 • Fax (561) 286-7669 • E-Mail: police@sewallspoint.org

RESOLUTION NO. 600

INSTR # 1696528
OR BK 01822 PG 0736
RECORDED 09/30/2003 11:12:41 AM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY C Burkey

A RESOLUTION OF THE TOWN COMMISSION OF THE TOWN OF SEWALL'S POINT, FLORIDA, GRANTING THE ADMINISTRATIVE VARIANCE OF SUSAN ROBERTS FOR THREE (3) ENCROACHMENTS ON LOT 7, BLOCK "B," AMENDED PLAT OF "HOMWOOD," AS RECORDED IN PLAT BOOK 3, PAGE 35 OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

WHEREAS, Susan Roberts ("Applicant"), the owner of the above-described property, has applied for an administrative variance under the Code (see survey attached as Exhibit "A"); and

WHEREAS, the Town Building Department received, reviewed and recommended approval of the Applicant's application for a variance of the following:

1. An encroachment of 2.4 feet on the NE corner of the residence; and
2. An encroachment of 4.2 feet on the SE corner of the residence.

WHEREAS, the Town Commission held a public hearing on the variance on September 16, 2003; and

WHEREAS, notice of the public hearing was posted at the Town Hall bulletin board and notice of the public hearing was sent by certified mail, return receipt requested, by the Applicants, to all record owners of property located adjacent to the property involved in the variance and the date of the mailing was at least fifteen (15) days before the date of the hearing (or notice was waived by the adjacent owners); and

WHEREAS, the Applicant at the public hearing presented proof of the identity and address of the persons entitled to receive notice by mail and of the mailing of the notice to

those persons (or their waiver); and

WHEREAS, the Town Commission at the public hearing made the finding that: The Applicant demonstrated an extreme hardship, which justified a variance of the Town Code.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COMMISSION OF THE TOWN OF SEWALL'S POINT, FLORIDA, AS FOLLOWS:

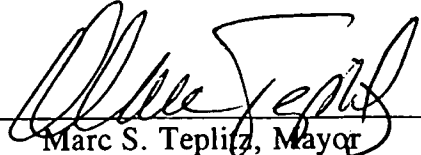
1. The Applicant's variance is hereby conditionally granted by the Town Commission of the Town of Sewall's Point, Florida;
2. This variance is expressly conditioned upon the Applicant reimbursing the Town for all professional expenses of the Town incurred in connection with the application, pursuant to Section 46-31, Town of Sewall's Point Code of Ordinances; and
3. This Resolution shall be recorded by the Applicant in the Martin County, Florida Public Records at the Applicant's expense.

The vote was as follows:

	AYE	NAY
MARC S. TEPLITZ, Mayor	<u>✓</u>	<u> </u>
JAMES D. BERCAW, Vice Mayor	<u>✓</u>	<u> </u>
RICHARD L. BARON, Commissioner	<u>✓</u>	<u> </u>
THOMAS P. BAUSCH, Commissioner	<u>✓</u>	<u> </u>
E. DANIEL MORRIS, Commissioner	<u>✓</u>	<u> </u>

The Mayor thereupon declared this Resolution approved and adopted by the Town Commission of the Town of Sewall's Point on this 16th day of September, 2003.

TOWN OF SEWALL'S POINT, FLORIDA



 Marc S. Teplitz, Mayor

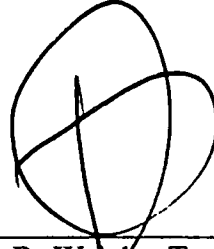
11/16/03

Resolution No. 600
Page 3

ATTEST:


Joan H. Barrow, Town Clerk

(TOWN SEAL)



Tim B. Wright, Town Attorney
Approved as to form and
legal sufficiency

05/02/03

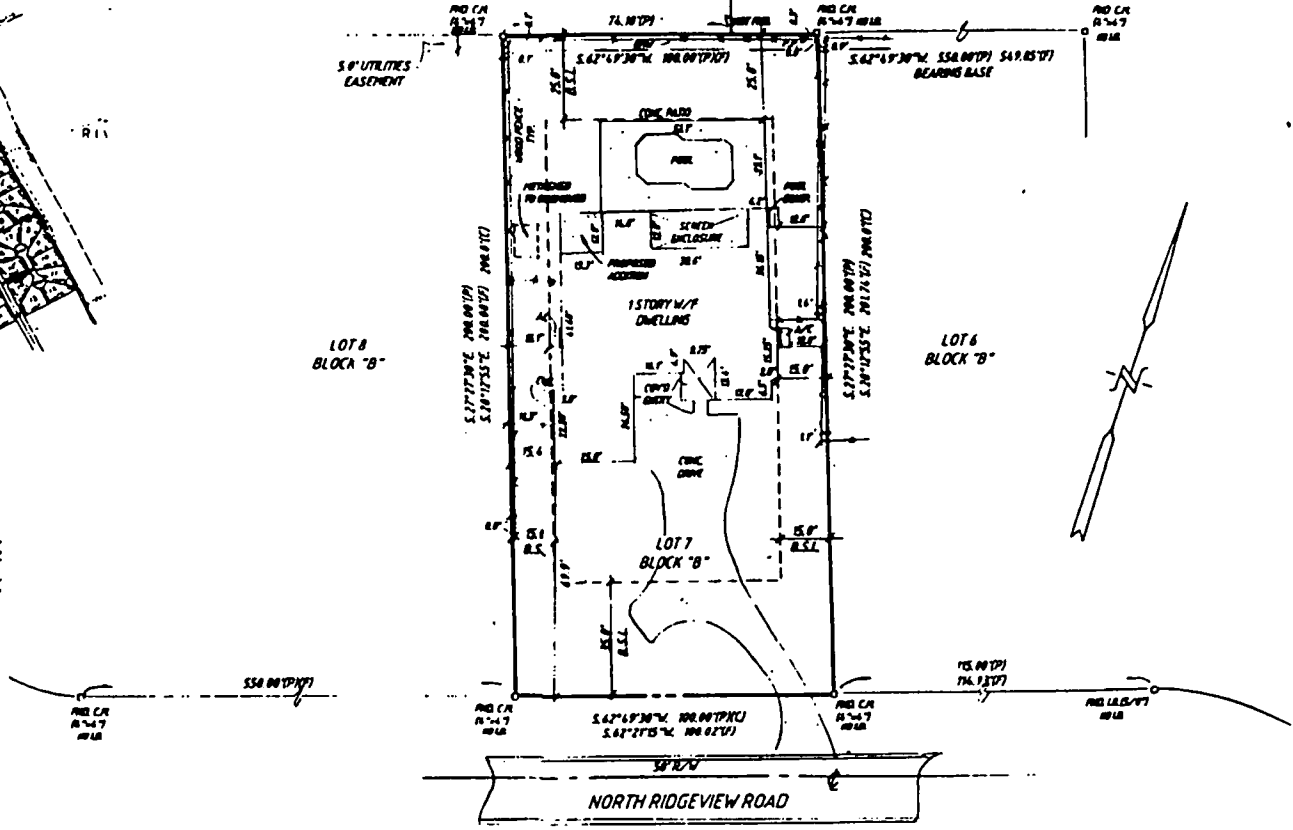


LOCATION MAP

LEGAL DESCRIPTION
 LOT 7, BLOCK "B", AMENDED PLAT OF "HOMWOOD",
 ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT
 BOOK 3, PAGE 35, PUBLIC RECORDS OF MARTIN COUNTY,
 FLORIDA.

LOT 8
 BLOCK "B"

LOT 6
 BLOCK "B"



NORTH RIDGEVIEW ROAD

PROPERTY LOCATED WITHIN FLOOD ZONE: "X"
 COMMUNITY - PANEL NUMBER - 120164 0156 F

PROPERTY STREET ADDRESS: 12 NORTH RIDGEVIEW ROAD
 STUART, FL 34996

CERTIFIED TO: SUSAN K. ROBERTS,
 TOWN OF SEWALL'S POINT

SITE DATA
 TOTAL LOT SIZE - 19,999.76 SQUARE FEET - 100 %
 IMPERVIOUS AREA BREAKDOWN
 HOUSE FOOTPRINT, ENTRY, POOL, PATIO, PROPOSED ADDITION - 5,484.13 SQUARE FEET ± - 27.4 %
 DRIVEWAY & CONC. PADS - 2,345 SQUARE FEET ± - 11.7 %
 TOTAL IMPERVIOUS AREA - 7829.13 SQUARE FEET ± - 39.1 %

SURVEYOR'S NOTES

1. SURVEY OF DESCRIPTION AS FURNISHED BY CLIENT UNLESS OTHERWISE NOTED.
2. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS, BUILDING SETBACKS AND/OR RIGHTS-OF-WAY OF RECORD BY ACCURIGHT LAND SURVEYING INC.
3. ALL BEARINGS ARE REFERENCED TO THE INSTRUMENT OF RECORD AS SHOWN HEREON, UNLESS OTHERWISE NOTED.
4. ELEVATIONS SHOWN HEREON ARE RELATIVE TO NATIONAL GEODETIC VERTICAL DATUM OF 1929. SEE SURVEY FOR REFERENCE BENCH MARK, UNLESS OTHERWISE NOTED.
5. THERE ARE NO ABOVE GROUND ENCROACHMENTS, UNLESS OTHERWISE NOTED.

LEGEND

UP1 - DENOTES DISTANCE, ANGLE OR BEARING BY FURNISHED DESCRIPTION	APPROX - APPROXIMATE	N & W - NAIL & WASHER
UP2 - DENOTES MEASURED DISTANCE, ANGLE OR BEARING	SETLB - SET 1/8" IRON BAR & CAP # 6659	N & TT - NAIL & TIN TAB
UC - DENOTES CALCULATED DISTANCE, ANGLE OR BEARING	PHD - FOUND	PLX - PEARL
COVD - COVERED	LP - IRON PIPE	CB - CATCH BASIN
C.B.S. - CONCRETE BLOCK STRUCTURE	CM - CONCRETE MONUMENT	P.C.P. - PERMANENT REFERENCE MONUMENT
W/P - WOOD FRAME	LB - IRON BAR	P.C.P. - PERMANENT CONTROL POINT
CONC. - CONCRETE	P.H. - P.H. NAIL	R/W - RIGHT-OF-WAY
ALUM. - ALUMINUM	O.R.S. - RAILROAD SPIKE	S.B.T. - SOUTHERN BELL TELEPHONE
PP - POWER POLE	BR - BROWN	PHD - FOUND
OMV - OVERHEAD WIRE		
T.O.B. - TOP OF BANK		
PH - FINE HYDRANT		
I.P. - LIGHT POLE		

SYMBOLS

- Δ - DELTA / CENTRAL ANGLE
- - CENTERLINE
- - ORANGE FLOW
- x - EXISTING ELEVATION
- ⊕ - PROPERTY LINE

NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER

ACCURIGHT LAND SURVEYING, INC.

(Signature)
 EARLE R. STARKEY - PROFESSIONAL LAND SURVEYOR
 REGISTRATION No. 6659 - STATE OF FLORIDA

ADD SITE PLAN	W.G.H.

BOUNDARY SURVEY
 PREPARED FOR:
 ROBERTS
ACCURIGHT LAND SURVEYING, INC.
 SURVEYORS DESIGNERS LANDPLANNERS CONSULTANTS
 OFFICE PHONE: (888) 286-7694
 1501 DECKER AVENUE SUITE 419

DATE	W.G.H.
CHECKED	E.R.S.
REV DATE	8/3/2000
SCALE	1" = 30' 00"
JOB NO	400-207-01
SHEET	1
OF ONE	SHEET

RESUBMITTAL CRITIQUE

COPY
VARIANCE APPL.
E

Owner: Susan Roberts

Date: July 30, 2003

Contractor: Glen Mark Homes

Contractor's Phone Number: 225-7010

Plan Reviewer: Edwin B. Arnold

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITALS FOR ADDITION (DEN) LOCATED AT 12 NORTH RIDGELAND DRIVE

Submittals (2 copies)

1. Current survey (**within one year, two copies**) signed and sealed by surveyor containing the following information:
 - a. Survey format must comply w/Town Requirements (Ord. 80-27):
 - (1) Paper shall be standard 24 inches high by 36 inches wide.
 - (2) Scale shall be largest standard engineering scale, which will fit on the paper defined in (1) above).

SUPPLEMENTAL NOTE TO APPLICANT:

This requirement also applies to zoning variance applications. See:

Town of Sewall's Point Administrative Variance Application – Item 6 F.

HP Fax K1220

Log for
Town of Sewall's Point
(561)220-4765
Jul 30 2003 8:25am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Jul 30	8:22am	Fax Sent	2257010	1:58	2	OK

Account Number: 17653 Parcel Nbr: 0138410060020006090000
Map Number: SP-04 Sec/Twn/Rg: 01 38 41
Associated Acct: 0 Subdivision: 0181006 HOMEWOOD
Millage Code: 2200 SEWALL'S POINT Lot/Blk:

✓ Situs Address: 10 N RIDGEVIEW RD
SEWALL'S POINT

Total Exempt:

Owner Name: MORALES, LUIS I & ANA M
Mailing Addr: 115 HENRY SEWALL WAY
STUART, FL 34996

Owner Type: TE TENANTS BY ENTIRETY
Owner Interest: 1.000000

Former Owners: WATTLES, GURDON STAN Sale Date: 08/31/2000 Amt: \$ 315,000
Book/Page: 1504 /0914
FRANZEN, DIRK G Sale Date: 01/04/1996 Amt: \$
Book/Page: 1392 /2071

Square Feet: 2261 Year Built: 1987
Total Under Roof: 2841

Acres: .000 Lots: 1.000 Mfd. Housing: 0

Legal Desc: Exempt:
HOMEWOOD, LOT 6 BLK B

	MARKET VALUE	ASSESSED VALUE
Market Land:	75,000	75,000
Agric Land:		0
Improvements:	190,225	190,225
Mfd Housing:	0	0
Personal:	0	0
Mineral:	0	0
TOTAL:	265,225	265,225
	Less Cap Loss:	0
	Less Exemptions:	0
	Taxable Value:	265,225
	Estimated Tax:	\$ 4,520

Account Number: 17720 Parcel Nbr: 0138410070000036090000
Map Number: SP-04 Sec/Twn/Rg: 01 38 41
Associated Acct: 0 Subdivision: 0181007 LUCINDIA
Millage Code: 2200 SEWALL'S POINT Lot/Blk:

✓ Situs Address: 11 S VIA LUCINDIA
SEWALL'S POINT

Total Exempt:

OK Owner Name: GORDON, GERALD M & RITA A
Mailing Addr: 51 BELLECREST AVE
EAST NORTHPORT, NY 11731

Owner Type: TE TENANTS BY ENTIRETY
Owner Interest: 1.000000

RP inspected YR 1

Former Owners: GORDON, GERALD M (TR Sale Date: 07/31/2001 Amt: \$ 185,200
Book/Page: 1570 /2970
KONGELBECK, A C Sale Date: 08/14/2000 Amt: \$
Book/Page: 1499 /2300

Square Feet: 1584 Year Built: 1970
Total Under Roof: 2520

Acres: .000 Lots: 1.000 Mfd. Housing: 0

Legal Desc: Exempt:
LUCINDIA LOT 36

	MARKET VALUE	ASSESSED VALUE
Market Land:	75,000	75,000
Agric Land:		0
Improvements:	75,662	75,662
Mfd Housing:	0	0
Personal:	0	0
Mineral:	0	0
TOTAL:	150,662	150,662
	Less Cap Loss:	0
	Less Exemptions:	0
	Taxable Value:	150,662
	Estimated Tax:	\$ 2,568

Account Number: 17719 Parcel Nbr: 0138410070000035010000
Map Number: SP-04 Sec/Twn/Rg: 01 38 41
Associated Acct: 0 Subdivision: 0181007 LUCINDIA
Millage Code: 2200 SEWALL'S POINT Lot/Blk:

✓ Situs Address: 9 S VIA LUCINDIA
SEWALL'S POINT

Total Exempt: N

OK Owner Name: CONRAD, CARTER V &
Mailing Addr: PO BOX 1953
STUART, FL 34995-1953

Owner Type: IN INDIVIDUAL
Owner Interest: 1.000000

RP inspected YR 1

Former Owners:SELLER - see file fo Sale Date:06/01/1971 Amt: \$ 5,000
Book/Page:0327 /2484

Square Feet: 2516 Year Built: 1971
Total Under Roof: 3257

Acres: .000 Lots: 1.000 Mfd. Housing: 0

Legal Desc: LUCINDIA LOT 35 Exempt:
HO HX OWNER TYPE IN
HX CAP

	MARKET VALUE	ASSESSED VALUE
Market Land:	75,000	75,000
Agric Land:		0
Improvements:	101,257	101,257
Mfd Housing:	0	0
Personal:	0	0
Mineral:	0	0
TOTAL:	176,257	176,257
	Less Cap Loss:	30,645
	Less Exemptions:	25,000
	Taxable Value:	120,612
	Estimated Tax:	\$ 2,055

This Information Is Subject To Change And Not Warranted.

06/27/2003
10:47:25

MARTIN COUNTY
GENERAL ACCOUNT INQUIRY REPORT
2002 REAL ESTATE

Page 1
91:1

Account Number: 17655 Parcel Nbr: 0138410060020008050000
Map Number: SP-04 Sec/Twn/Rg: 01 38 41
Associated Acct: 0 Subdivision: 0181006 HOMEWOOD
Millage Code: 2200 SEWALL'S POINT Lot/Blk:

Situs Address: 16 N RIDGEVIEW RD
SEWALL'S POINT Total Exempt: N

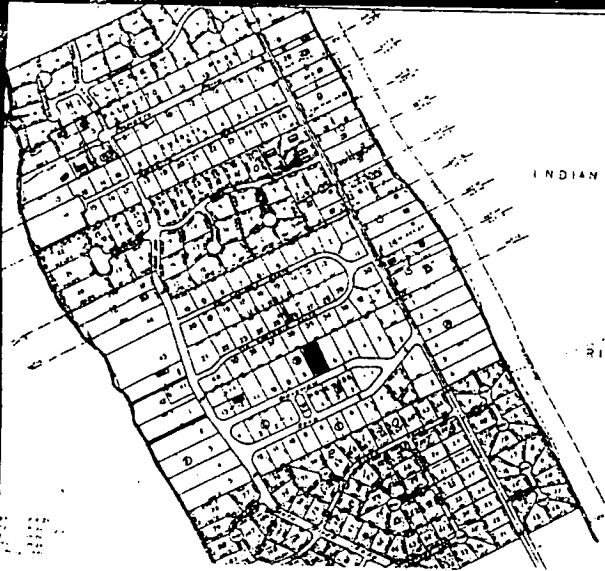
Owner Name: HOLLAND, ROBERT Owner Type: HW HUSBAND & WIFE
Mailing Addr: 16 N RIDGEVIEW ROAD Owner Interest: 1.000000
STUART, FL 34996

Former Owners:SELLER - see file fo Sale Date:05/17/1994 Amt: \$ 285,000
Book/Page:1074 /1746
SELLER - see file fo Sale Date:02/25/1987 Amt: \$ 47,750
Book/Page:0709 /0238

Square Feet: 3685 Year Built: 1988
Total Under Roof: 5256
Acres: .000 Lots: 1.000 Mfd. Housing: 0
Legal Desc: Exempt:
HOMEWOOD, LOT 8 BLK B HX CAP
H6 JT TE AND HW/SP

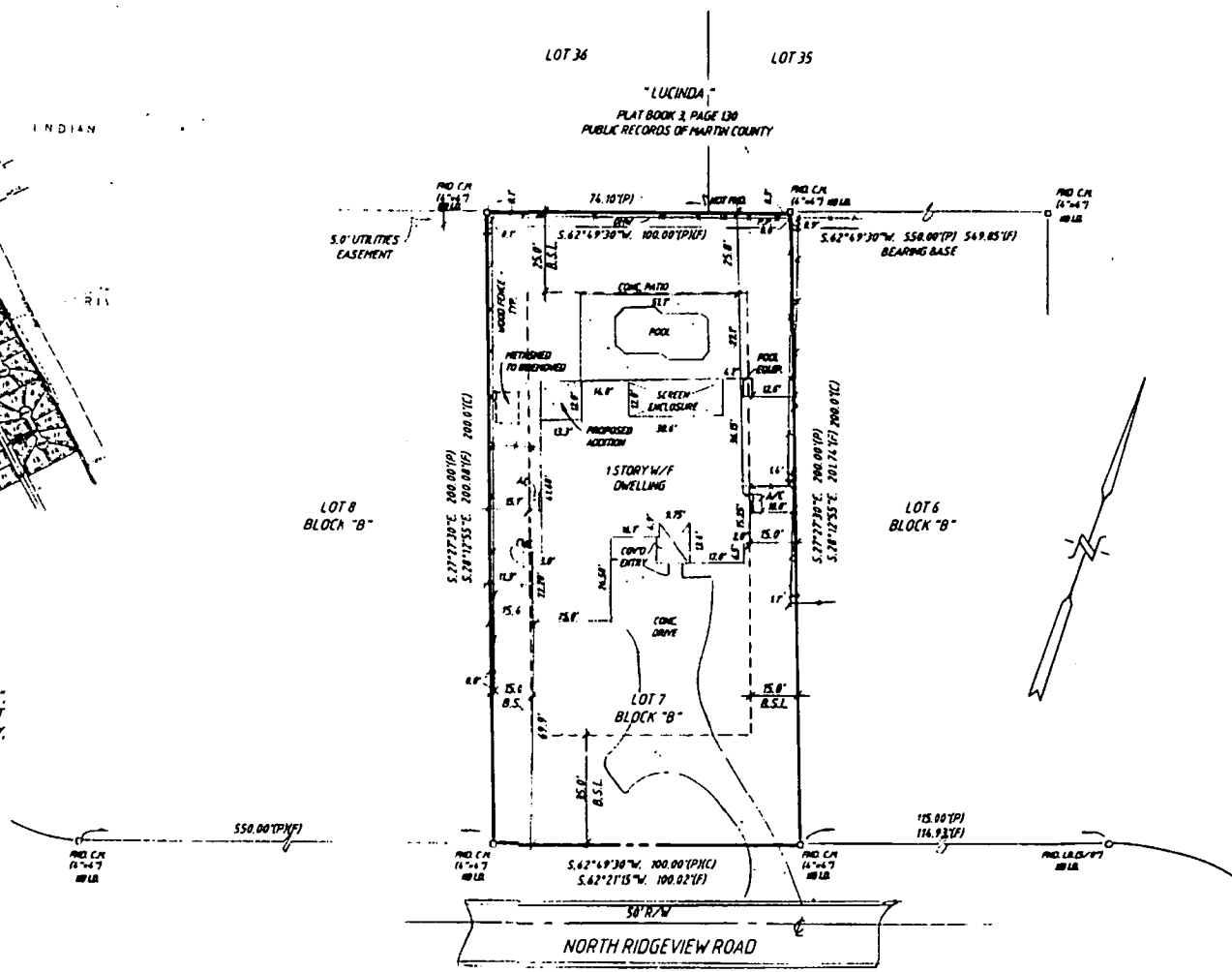
	MARKET VALUE	ASSESSED VALUE
Market Land:	75,000	75,000
Agric Land:		0
Improvements:	265,995	265,995
Mfd Housing:	0	0
Personal:	0	0
Mineral:	0	0
TOTAL:	340,995	340,995
Less Cap Loss:		93,257
Less Exemptions:		25,000
Taxable Value:		222,738
Estimated Tax:		\$ 3,796

This Information Is Subject To Change And Not Warranted.



LOCATION MAP

LEGAL DESCRIPTION
 LOT 7, BLOCK "B", AMENDED PLAT OF "HOMWOOD",
 ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT
 BOOK 3, PAGE 35, PUBLIC RECORDS OF MARTIN COUNTY,
 FLORIDA.



PROPERTY LOCATED WITHIN FLOOD ZONE: "X"
 COMMUNITY - PANEL NUMBER - 120164 0154 F

PROPERTY STREET ADDRESS: 12 NORTH RIDGEVIEW ROAD
 STUART, FL. 34996

CERTIFIED TO: SUSAN K. ROBERTS;
 TOWN OF SEWALL'S POINT

SITE DATA
 TOTAL LOT SIZE - 19,999.76 SQUARE FEET - 100 %
 IMPERVIOUS AREA BREAKDOWN
 HOUSE FOOTPRINT, ENTRY, POOL PATIO, PROPOSED ADDITION - 5,406.13 SQUARE FEET ± - 27.6 %
 DRIVEWAY & CONC. PADS - 2,345 SQUARE FEET ± - 11.7 %
 TOTAL IMPERVIOUS AREA - 7829.13 SQUARE FEET ± - 39.1 %

SURVEYOR'S NOTES

1. SURVEY OF DESCRIPTION AS FURNISHED BY CLIENT, UNLESS OTHERWISE NOTED.
2. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS, BUILDING SETBACKS AND/OR RIGHTS-OF-WAY OF RECORD BY ACCURIGHT LAND SURVEYING, INC.
3. ALL BEARINGS ARE REFERENCED TO THE INSTRUMENT OF RECORD AS SHOWN HEREON, UNLESS OTHERWISE NOTED.
4. ELEVATIONS SHOWN HEREON ARE RELATIVE TO NATIONAL GEODETIC VERTICAL DATUM OF 1929, SEE SURVEY FOR REFERENCE BENCH MARK, UNLESS OTHERWISE NOTED.
5. THERE ARE NO ABOVE GROUND ENCROACHMENTS, UNLESS OTHERWISE NOTED.

LEGEND

- (P) - DENOTES DISTANCE, ANGLE OR BEARING BY FURNISHED DESCRIPTION
- (M) - DENOTES MEASURED DISTANCE, ANGLE OR BEARING
- (C) - DENOTES CALCULATED DISTANCE, ANGLE OR BEARING
- COVD - COVERED
- C.B.S. - CONCRETE BLOCK STRUCTURE
- W/P - WOOD FRAME
- CONC. - CONCRETE
- ALUM. - ALUMINUM
- P.P. - POWER POLE
- OWH - OVERHEAD WIRE
- T.O.B. - TOP OF BANK
- F.H. - FIRE HYDRANT
- L.P. - LIGHT POLE
- APPROX. - APPROXIMATE
- SET I.B. - SET 5/8" IRON BAR & CAP @ 4'LS
- FOUND - FOUND
- IRON PIPE - IRON PIPE
- CONCRETE MONUMENT - CONCRETE MONUMENT
- IRON BAR - IRON BAR
- PK. - P.K. MARK
- RAILROAD SPIKE - RAILROAD SPIKE
- BROKEN - BROKEN
- TYPE - TYPE
- N & W - NAIL & WASHER
- N & TT - NAIL & TIN TAB
- M.H. - MANHOLE
- C.B. - CATCH BASIN
- P.R.M. - PERMANENT REFERENCE MONUMENT
- P.C.P. - PERMANENT CONTROL POINT
- R/W - RIGHT-OF-WAY
- S.B.T. - SOUTHERN BELL TELEPHONE
- TRYP - TYPICAL

SYMBOLS

- Δ - DELTA / CENTRAL ANGLE
- ⊙ - CENTERLINE
- - DRAINAGE FLOW
- x - EXISTING ELEVATION
- ⬢ - PROPERTY LINE

ACCURIGHT LAND SURVEYING, INC.

EARLE R. STARKY - PROFESSIONAL LAND SURVEYOR
 REGISTRATION No. 6459 - STATE OF FLORIDA

ADD SITE PLAN	W.G.H.
07/21/2000	

BOUNDARY SURVEY

PREPARED FOR:
 ROBERTS

ACCURIGHT LAND SURVEYING, INC.
 SURVEYORS DESIGNERS LANDPLANNERS CONSULTANTS

1501 DECKER AVENUE, SUITE 419
 STUART, FL 34994

OFFICE PHONE: (888) 286-7694
 FAX: (888) 220-7993

DRAWN
 W.G.H.

CHECKED
 E.R.S.

FIELD DATE
 8/3/2000

SCALE
 1" = 30.00'

JOB NO
 400-707-01

SHEET
 1

OF ONE SHEETS

Name: Stewart Title of Martin County, Inc.

Address: 1111 SE Federal Hwy, Suite 128
Stuart, FL 34994

This Instrument Prepared by: Donna H Bass

Address: 1111 SE Federal Hwy, Suite 128
Stuart, FL 34994

Property Appraisers Parcel Identification (Folio) Number(s):
1-38-41-006-002-00070.7

Grantee(s) S.S.#(s):

FILE

RECEIVED
JAN 26 2001
BY: *[Signature]*

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Warranty Deed Made the 21st day of August A.D. 2000 by JOANN SCHIRRIPA f/k/a JOANN SABATINO hereinafter called the grantor, to SUSAN K. ROBERTS a married woman whose post office address is, 12 N. Ridgewood Rd, Stuart FL 34994 hereinafter called the grantee:

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

Witnesseth: That the grantor, for and in consideration of the sum of \$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, State of Florida, viz:

Lot 7, Block "B", AMENDED PLAT OF HOMEWOOD, according to the Plat thereof, recorded in Plat Book 3, page 35, Public Records of Martin County, Florida.

GRANTOR hereby certifies that subject property is not her homestead and that she resides at:
4398 NW 26th Avenue, Boca Raton, Florida

Subject To covenants, conditions, restrictions, reservations, limitations, easements and agreements of record, if any, taxes and assessments for the year 2000 and subsequent years; and to all applicable zoning ordinances and/or restrictions and prohibitions imposed by governmental authorities, if any,

Together, with all the tenements, hereditament 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, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.
Signed, sealed and delivered in the presence of:

[Signature: Vivian Swasey]
Witness

[Signature: Vivian Swasey]
Printed Name: Vivian Swasey

[Signature: Patrice L. Pitz]
Witness

[Signature: Patrice L. Pitz]
Printed Name: Patrice L. Pitz

[Signature: Joann Schirripa]
JOANN SCHIRRIPA f/k/a JOANN SABATINO

Address:

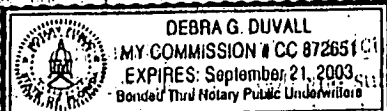
This Warranty Deed Made the 21st day of August A.D. 2000 by JOANN SCHIRRIPA f/k/a JOANN SABATINO hereinafter called the grantor, to SUSAN K. ROBERTS a married woman whose post office address is, 12 N. Ridgewood Rd, Stuart FL 34994 hereinafter called the grantee:

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

Witnesseth: That the grantor, for and in consideration of the sum of \$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, State of Florida, viz:

COUNTY OF MARTIN AMENDED PLAT OF HOMEWOOD, according to the Plat thereof, recorded in Plat Book 3, page 35, Public Records of Martin County, Florida

The foregoing instrument was acknowledged before me this 21st day of August, 2000 by JOANN SCHIRRIPA f/k/a JOANN SABATINO who produced *[Signature]* as identification and who did not take an oath.



[Signature: Debra G. Duvall]
Notary Public, State and County Aforesaid

Donna H Bass
Printed Notary Signature: *[Signature]*
My Commission Expires: October 19, 2000 September 21, 2003

Together, with all the tenements, hereditament 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, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.
Signed, sealed and delivered in the presence of:

[Signature: Vivian Swasey]
Witness

[Signature: Joann Schirripa]
JOANN SCHIRRIPA f/k/a JOANN SABATINO

OK



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

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8:00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner Susan Roberts Address 12 N. Ridgeview Rd Phone 772-283-0744

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE 1 Species: Palm Tree

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

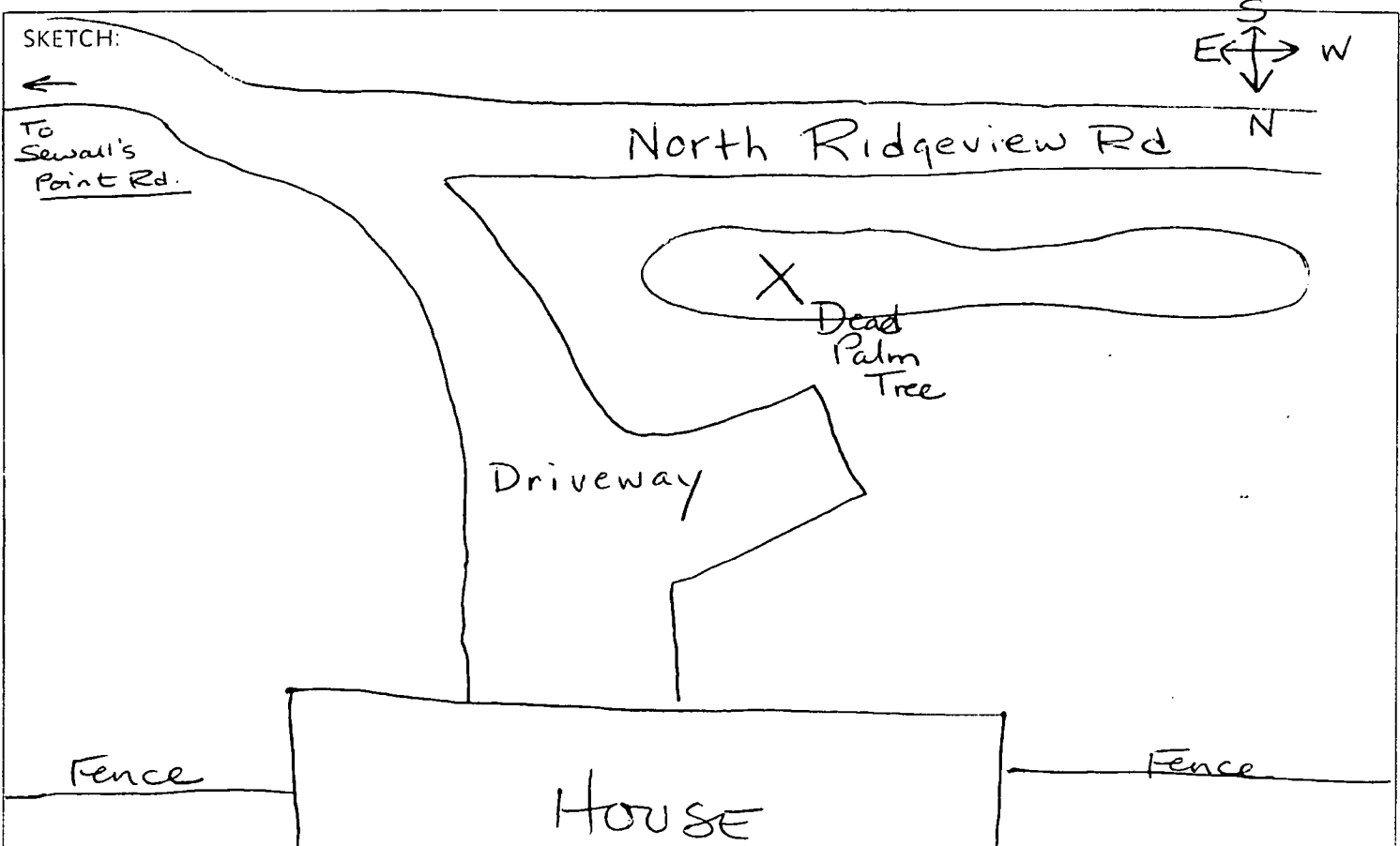
ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

Reason for tree removal /relocation (See notice above) Dead due to cold

Signature of Property Owner [Signature] Date April 26/2010

Approved by Building Inspector: [Signature] Date 5-5-12 Fee: N/E

NOTES: _____



TOWN OF SEWALL'S POINT, FLORIDA

Date APRIL 13 ~~16~~ 2004 TREE REMOVAL PERMIT No 2234

APPLIED FOR BY ROBERTS (Contractor or Owner)

Owner 12 N. RIDGEVIEW

Sub-division _____, Lot _____, Block _____

Kind of Trees UNKNOWN

No. Of Trees: REMOVE 1

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS tree down in storm

FEE \$ 0

Signed _____ Applicant

Signed Jane Simons (R98)
Town Clerk
Building Official

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Large empty rectangular box with horizontal lines, likely for site plan or drawing.

PROJECT DESCRIPTION _____

REMARKS _____

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

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

No permit required for:

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

Permit Fee:

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

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

Application procedures:

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

Owner Susan Roberts **Address** 12 N. Ridgewood Rd. **Phone** 203-0744


Contractor _____ **Address** _____ **Phone** _____

No. of Trees: REMOVE 1 **Type:** ?

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

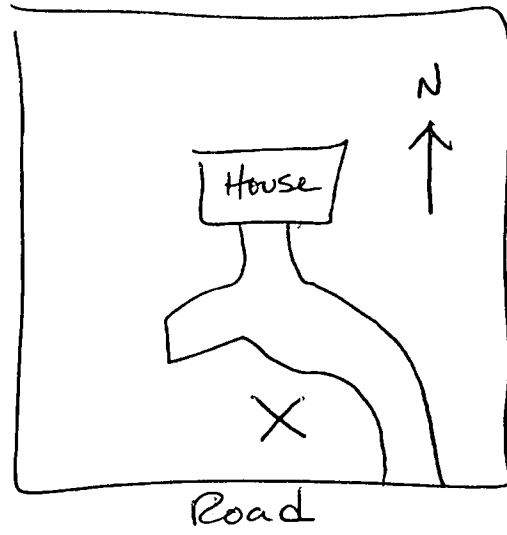
No. of Trees: REPLACE _____ **WITHIN 30 DAYS** **Type:** _____

Written statement giving reasons: Tree blew down in storm

Signature of Applicant  **Date** April 13/04

Approved by Building Inspector:  **Date** 4/13/04 **Fee:** —

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



419

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # _____

Date Issued _____

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

Owner Susan Decker Address _____ Phone _____

Contractor JAT Builders Address P.O. Box 2922 Phone 283-9992
Stuart Fla.

Number of trees to be removed (list kinds of trees) 10

Oak, Elm, Palm

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

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

Permit Fee: \$ 14 (\$5. for first tree plus \$1. for each additional tree - not to exceed \$25.)

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

Plans approved as submitted _____ Plans approved as marked _____

Permit good for one year. Fee for renewal of expired permit \$5.

Signature of applicant [Signature] Date submitted 8-23-88

Approved by Building Inspector [Signature] Date 8/24/88

Approved by Building Commissioner _____ Date _____

Completed _____
Date _____ Checked by _____

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

TOWN OF SEWALL'S POINT, FLORIDA

Date 11-19-02 19____ TREE REMOVAL PERMIT No 1232

APPLIED FOR BY Susan Roberts 283-0744 (Contractor or Owner)

Owner 12 N. Ridgeview

Sub-division _____, Lot _____, Block _____

Kind of Trees 1 Strangler Ficus - 1 Gumbo Limbo (Stump Removal)
1 DEAD Hickory - 1 Strangler Fig

No. Of Trees: REMOVE 4

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

FEE \$ 0

Signed, _____ Applicant Signed, Gene Semmons (Rgn) Town Clerk

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Empty table with 10 rows and 1 column.

PROJECT DESCRIPTION _____

REMARKS _____

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

Permit # _____

Date Issued: _____

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

Owner Susan Roberts Address 12 N. Ridgeview Phone 283-0744/263-0775 ^{Call.}

Contractor Affordable Address 5650 SE mitzi Ln. Phone 341-1110/221-3789 ^{Call.}
Arbourcare Stuart Jim Gamble

Number of trees to be removed (list kinds of trees) | Hickory (Dead) | Strangler Fig (Remove)

| 1 Strangler Ficus (Remove) ^{Stump} | Gumbo Limbo Stump (Remove)

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

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

Permit Fee \$ 0
\$15.00

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

Plans approved as submitted _____ Plans approved as marked _____

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

Signature of applicant _____ Plans approved as marked _____

Approved by Building Inspector [Signature] Date submitted: 11/18/2

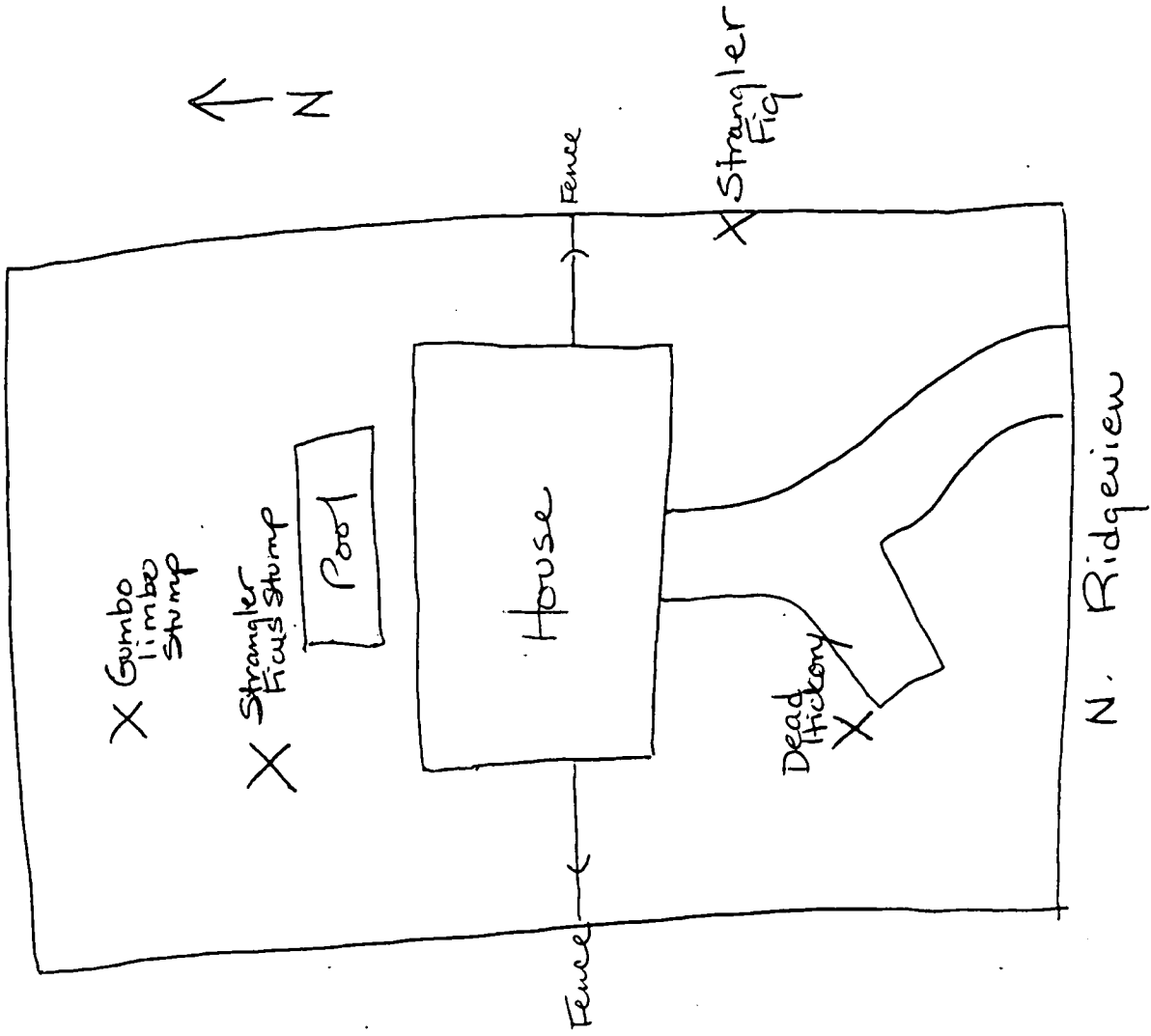
Completed _____
Date _____ Checked by _____

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

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

See attached Tree Species List

[Signature] at
Field verified
4/18/2



TOWN OF SEWALL'S POINT, FLORIDA

Date MAY 1 ~~12~~ 2003 TREE REMOVAL PERMIT No 1270

APPLIED FOR BY ROBERTS (Contractor or Owner)

Owner 12 N. RIDGEVIEW ROAD

Sub-division _____, Lot _____, Block _____

Kind of Trees 1 Bay Tree Stump, 2 Pidgeon Plums

No. Of Trees: REMOVE 5 1 BALLY, 1 MASTIC

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant

Signed Gene Hammond (206) Town Clerk

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # _____

Date Issued: _____

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

Owner Susan Roberts Address 12 N. RIDGEVIEW RD. Phone 283-0744

Contractor Affordable Arborcare (Jim Gamble) Address 5650 SEMITZ LN. Phone 221-3789

Number of trees to be removed (list kinds of trees) 5 - 1 Bolly, 1 Mastic,

1 Bay Tree Stump, 2 Pigeon Plums
Number of trees to be relocated within 30 days (no fee) (list kinds of trees):

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

Permit Fee \$ 0 all trees dead or diseased 4/30
\$15.00

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

Plans approved as submitted _____ Plans approved as marked _____

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

Signature of applicant [Signature] Plans approved as marked _____

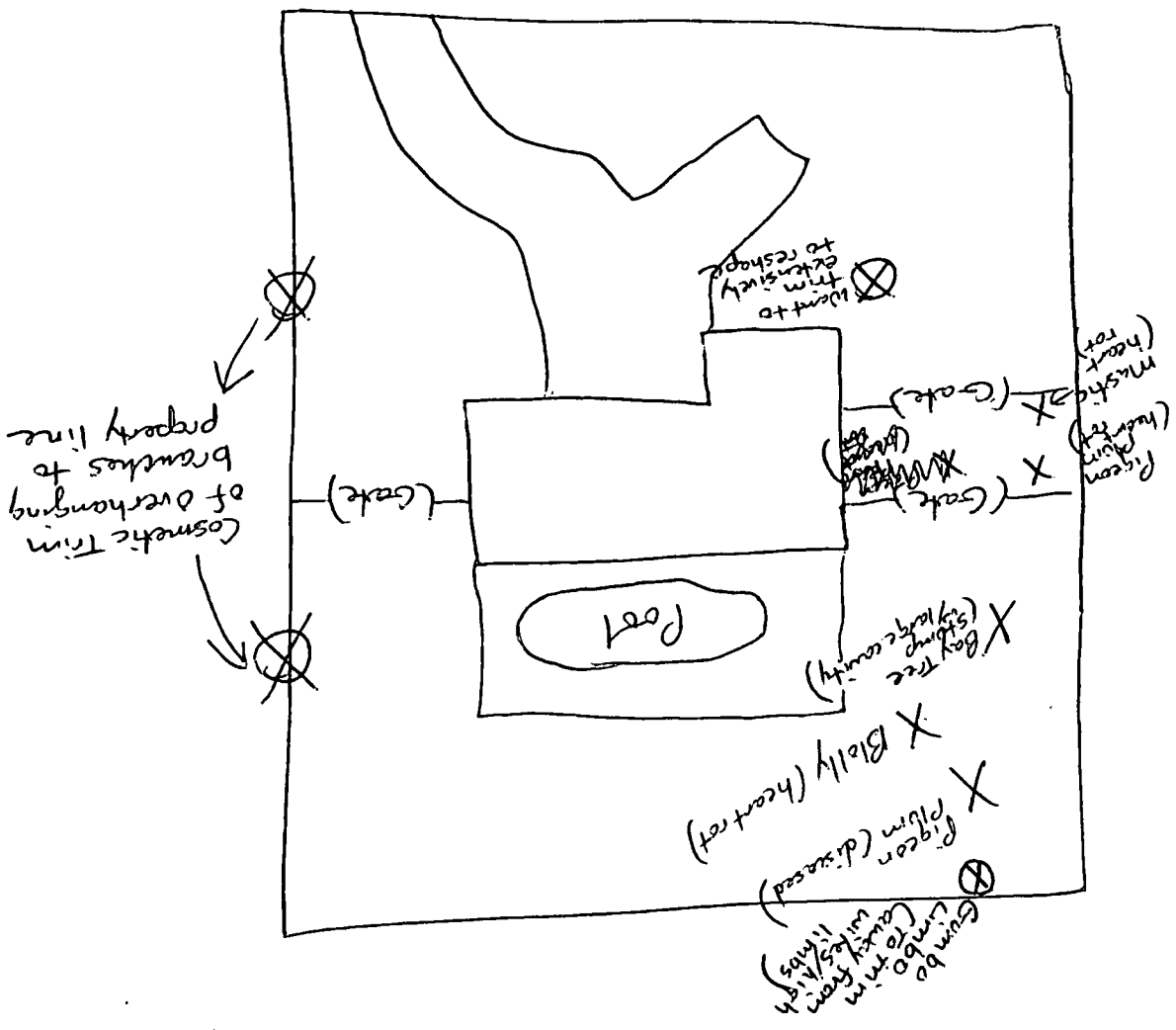
Approved by Building Inspector [Signature] Date submitted: 4/30/3

Completed [Signature] Date _____ Checked by _____

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

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

See attached Tree Species List



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun 2002 3 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6212	WATSON	SUBFACIA	Passal	
(1)	30 N. RIVER ROAD			
	TREASURE CO			INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	GIFFORD	TREE	Passal	
(2)	85 N. SEWALLS PT			INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	ARCH	TREE	Passal	
(3)	18 PALM ROAD			INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	ARCH/PAM ROW INC	TREE	Passal	
(11)	120 S. SEWALLS PT			INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	ROBERTS	TREE	Passal	
(16)	12 N. RIDGEVIEW RD			INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6063	HICKS	SPRUBING	Failed	
(6)	7 EMARITA			INSPECTOR: [Signature]
	ADVANTAGE POOL			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6220	GIBSON	FINAL	Nobody	None, no acc 9
(12)	134 S. RIVER ROAD			
	STEVE FRONTIERA			INSPECTOR: [Signature]
OTHER:				