

**22 N Ridgeview Road**

**1072**  
**RE-ROOF**

1072 TOWN OF SEWALL'S POINT FLORIDA

Permit No. 1072

Date \_\_\_\_\_

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 sets of complete plans, to scale, including a plot plan showing set-backs; plumbing and electrical layouts, if applicable, and at least two elevations, as applicable.

Owner Richard Cook Present address P.O. Box 132 Dayton N.J.

Phone 1-201-329-6038

Contractor Damon Roofing Co Address 505 S.E. Loberna Rd

Phone 287-6604

Where licensed Martin Co License number 28846-1

Electrical contractor \_\_\_\_\_ State No \_\_\_\_\_ License number RC.0029636

Plumbing contractor \_\_\_\_\_ License number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Re Roof House, Re Place Rotten wood

Re Place Rotten wood  
State the street address at which the proposed structure will be built:

22 Ridge View Dr.

Subdivision \_\_\_\_\_

Lot No. \_\_\_\_\_

Contract price \$ 4,135.98 Cost of Permit \$ 850

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 a Town Commissioner "Red-tagging" the construction project.

Contractor Damon Roofing Co  
Damon Roofing Co

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 Richard Cook

TOWN RECORD

Date submitted 16 Nov '79

Approved: \_\_\_\_\_ Building Inspector

Date

Approved: J.P. Brunette Commissioner

19 Nov '79  
Date

Final Approval given: 12/23/80 Date

Certificate of Occupancy issued \_\_\_\_\_ Date

SP/1-79

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

1072

**2970**  
**RE-ROOF**

Date

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

2990

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

Owner Robert C Cook Present Address # 22 Ridge View Rd

Phone \_\_\_\_\_ Sewalls Point

Contractor Horton Enterprises Inc Address PO Box 1143

Phone \_\_\_\_\_ Palm City FL

Where licensed FLA License number CCC 036970

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: Receipt

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

Parcel Control # 1-38-41-006-002-00110

Subdivision \_\_\_\_\_ Lot number \_\_\_\_\_ Block number \_\_\_\_\_

Contract price \$ 4000.00 Cost of permit \$ \_\_\_\_\_

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

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

Contractor [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: [Signature] 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.

**3586**

**REPLACEMENT  
WINDOWS**

880487

NOTICE OF COMMENCEMENT

STATE OF Florida  
COUNTY OF Martin

The undersigned hereby informs all concerned that improvements will be made to certain real property, and in accordance with Section 713.13, Florida Statutes, the following information is stated in this NOTICE OF COMMENCEMENT. This notice shall be void and of no force and effect if construction is not commenced within 30 days of recordation.

DESCRIPTION OF PROPERTY:

General description of improvements: Reroof.

Owner: Richard C. Cook #  
Address: #22 Ridge View Rd Sewells Pt.

Owner's interest in site of the improvement: Owner.

Contractor: HEATON Enterprises Inc.  
Address: P.O. Box 1143 Palm City FL.

Surety (if any): \_\_\_\_\_  
Address: \_\_\_\_\_  
Amount of Bond: \_\_\_\_\_

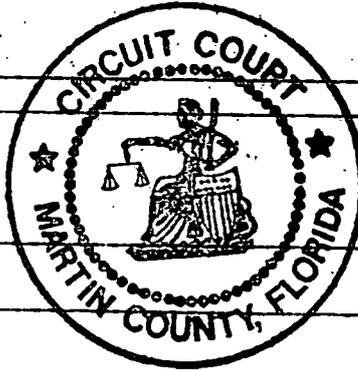
Lender : \_\_\_\_\_  
Address: \_\_\_\_\_

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

Name: \_\_\_\_\_  
Address: \_\_\_\_\_

In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.06(2)(b), Florida Statutes:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_



STATE OF FLORIDA  
COUNTY OF MARTIN

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

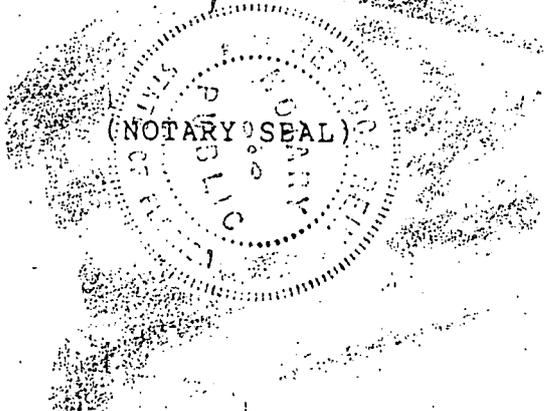
MARSHA STILLER, CLERK  
BY Charlotte Burley D.C.

DATE 4-22-91

Sworn to and subscribed before me this 22 day of April, 1991.

[Signature]

I am a Notary Public of the STATE OF Florida AT LARGE, and My Commission Expires: 4/18/94



3586

TAX FOLIO NO. \_\_\_\_\_

DATE 4/8/94

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 MR COOK Present address 22 N. RIDGEVIEW DR

Phone 283-2731 SEWEL PT.

Contractor BETTER HOMES INC Address 3830 JOG RD.

Phone 1-800-330-3499 GREENACRES

Where licensed STATE WIDE/PBCNTY License number CBC 024062

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: REPLACEMENT WINDOWS

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

Subdivision HOMWOOD ~~BLK 8~~ Lot Number 11 Block Number 8 B

Contract price \$ 4100.00 Cost of permit \$ 50.00

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

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

Contractor *[Signature]*

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

Owner \_\_\_\_\_

TOWN RECORD

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

Approved: *[Signature]* 4-8-94  
Building Inspector Date

Approved: *[Signature]* 4/15/94 Final approval given: \_\_\_\_\_  
Commissioner Date Date

CERTIFICATE OF OCCUPANCY issued (if applicable) \_\_\_\_\_  
Date

PERMIT NO. 3586

CERTIFICATE OF AUTHORITY

I, Robert Gregory Plimpton the undersigned am the certified building contractor (#CB-C024062) qualifying BETTER HOMES EXTERIORS, INC. as building contractor.

I hereby authorize either of the following:

- 1. John Fitzpatrick *[Signature]*
- 2. \_\_\_\_\_

To sign any and all building permits and/or occupational licenses in any municipality, town, city, or county within the State of Florida in my place and stead.

Address of Property 22 N. RIDGEVIEW DR  
SEWALLS PT.

Owners Name MR COOK

*[Signature]*  
Robert Gregory Plimpton  
Certified Building Contractor

STATE OF FLORIDA  
COUNTY OF PALM BEACH

Before me personally appeared Robert Gregory Plimpton to me well known and known to me to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that Robert Gregory Plimpton executed the above instrument for the purposes therein expressed.

WITNESS my hand and official seal, this 8<sup>th</sup> day of APRIL  
A.D., 19 94.

*[Signature]*  
\_\_\_\_\_  
NOTARY OF FLORIDA

MY COMMISSION EXPIRES:



ROSE M. CARLISLE  
My Comm Exp. 3-15-95  
Bonded By Service Ins  
No. CC085340

SEAL: \_\_\_\_\_

Personally Known  Not Personally Known

**3786**  
**FENCE**

TOWN OF SEWALL'S POINT FLORIDA

Permit No. 3786

Date 5-3-95

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 sets of complete plans, to scale, including a plot plan showing set-backs; plumbing and electrical layouts, if applicable, and at least two elevations, as applicable.

Owner Richard MVA Cook Present address 2240 Ridge view

Phone 283-2731

Contractor MARTIN FENCE CO Address \_\_\_\_\_

Phone 930 862 EAST STREET  
7303 LAKE PARK, FL 33403

Where licensed Palm Bch Co License number U10591

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: 106' 4" CL Fence

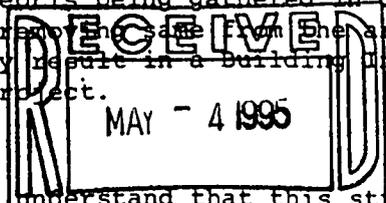
State the street address at which the proposed structure will be built: \_\_\_\_\_

Subdivision Home wood Lot No. 11

Contract price \$ 500.00 Cost of Permit \$ 25.00

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

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

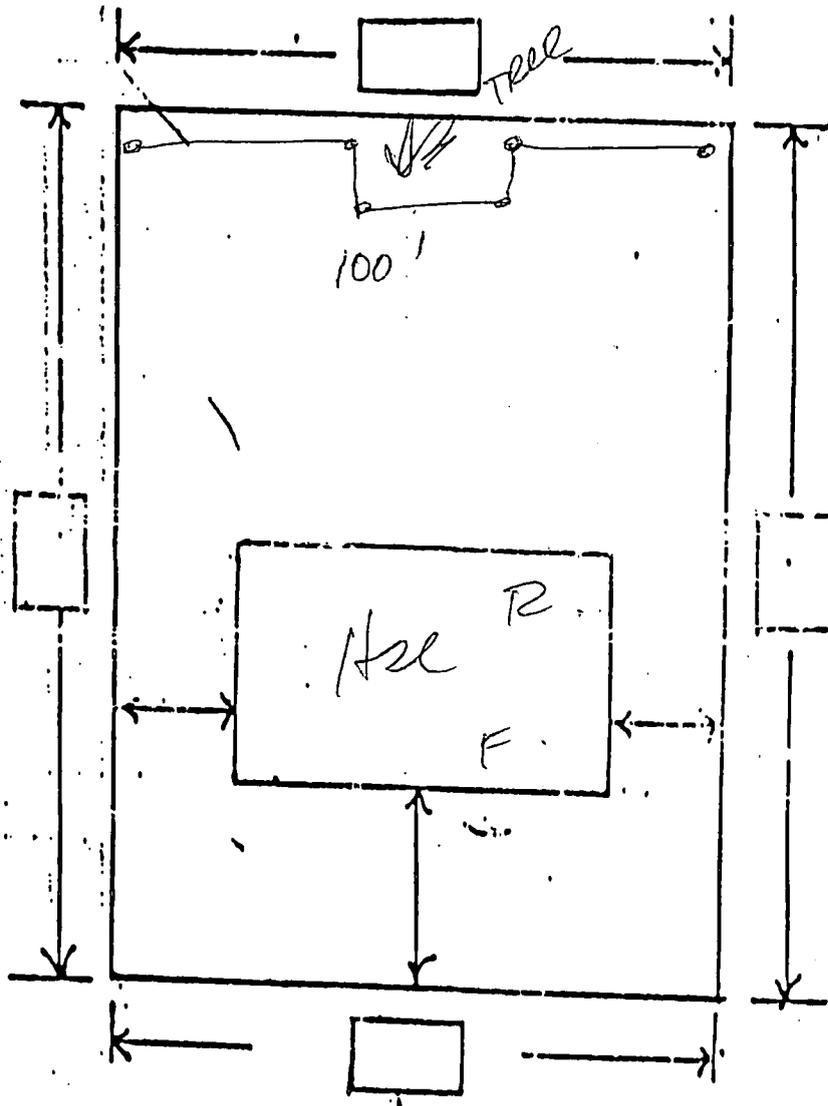
Owner Winfred I. Cook

TOWN RECORD Date submitted \_\_\_\_\_

Approved: [Signature] Building Inspector Date 5/4/95

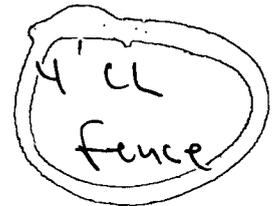
Approved: [Signature] Commissioner Date \_\_\_\_\_

PILOT PLAN



NORTH ARROW

Indicate fence with small x x x x



Address: 22 No Ridge view

Owner's Name: COOK

Subdivision: Home wood Lot: 11 Blk: B Zone: \_\_\_\_\_

Valuation: \_\_\_\_\_ Type of Fence: \_\_\_\_\_ Height of Fence: \_\_\_\_\_

Type of Posts: (1) Corner: \_\_\_\_\_ (2) Line: \_\_\_\_\_ Depth in Ground: \_\_\_\_\_

Distance between Posts: \_\_\_\_\_ Top Rail Size: \_\_\_\_\_ In Conc. yes or no

Length of Fence: \_\_\_\_\_

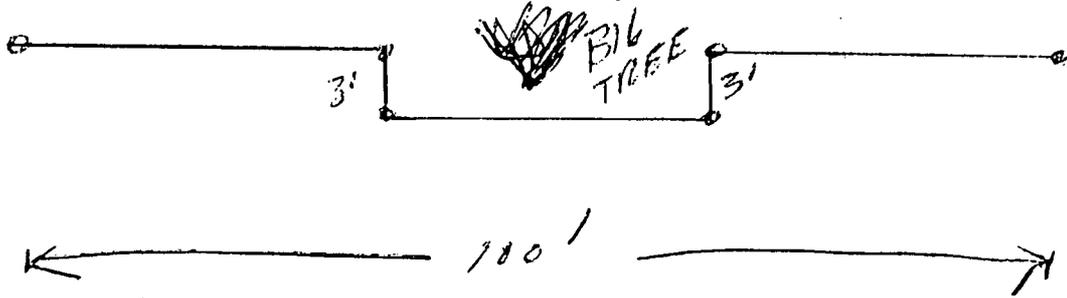


PHONE: 407-848-2666 • FAX: 407-848-4466  
 TOLL FREE: 930-9303 - SEBASTIAN TO KEY WEST  
 862 13TH STREET, LAKE PARK, FLORIDA 33403-2383  
 LIC. # U10591

Date: 5/1/95

SOLD TO: Name Mr Cook SHIP TO: \_\_\_\_\_  
 Address 22 NO RIDGEVIEW \_\_\_\_\_  
 City SEWELL'S POINT \_\_\_\_\_  
 Phone 283 2731 Business \_\_\_\_\_ Total Footage \_\_\_\_\_  
 Lot: 11 Block: B Plat: \_\_\_\_\_ Page: \_\_\_\_\_ Subdivision: Home wood

Fence 4' HOT DIP GAL.  Top Rail Level  Follow Contour  Barb Up  Knuckle Up  
 Top Rail 13/8"  
 Line Posts 15/8"  
 Cor. Posts 2 1/2"  
 Gate Posts NONE  
 Gates NONE



Tension Wire NONE  
 Core Drills NONE  
 Panelweave NONE

I hereby authorize the installation of the fence in accordance with the sketch and any attached specifications and I agree to assume all liability and responsibility for accuracy of sketches.

All fence lines must be cleared by customer or a fee will be charged - \$40 per hour/minimum of 1 hour.

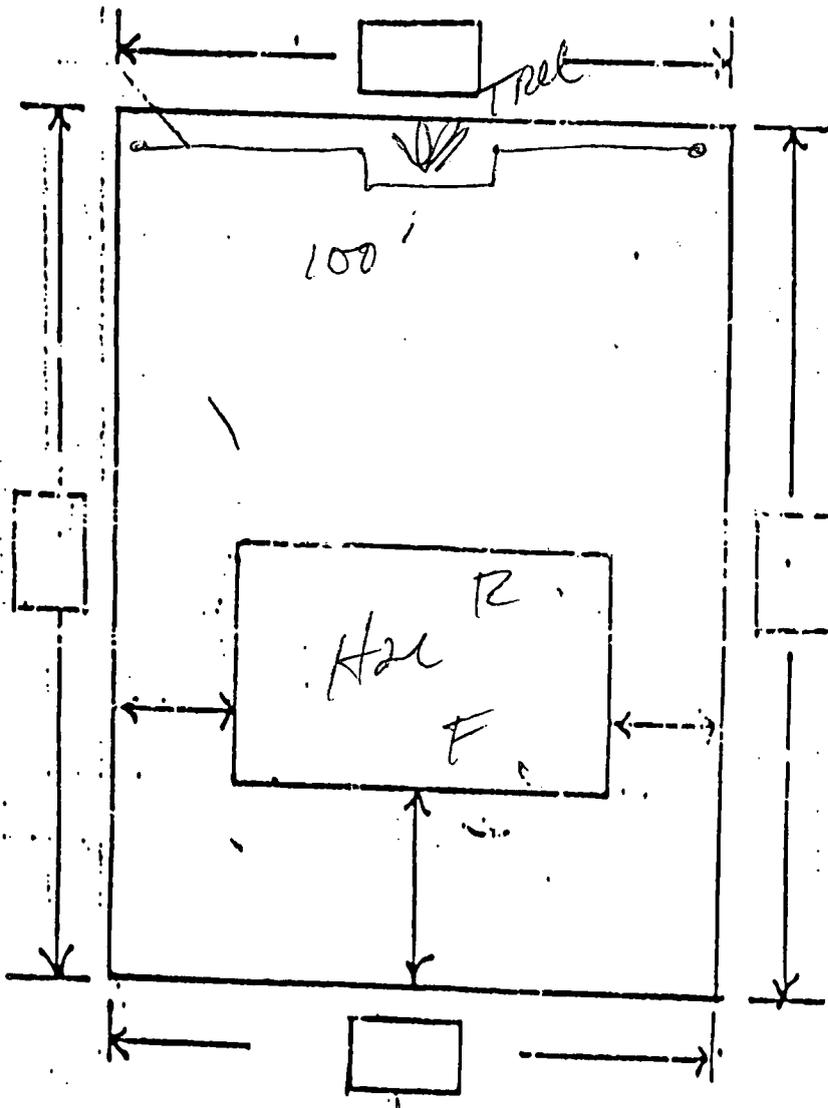
Total Price \$530.00 approx. Delivery Date \_\_\_\_\_  
 Less Deposit 200.00 \$530.00 Week of: \_\_\_\_\_  
 C.O.D. on Completion 0.00

This contract subject to Terms and Conditions on reverse side. Oral representation's cannot be relied on. No modifications to this contract will be honored unless in writing and signed by both parties.

Customer \_\_\_\_\_  
 Salesman M. [Signature] Customer Winfred L. Cook

Per \_\_\_\_\_

LOT PLAN



NORTH ARROW

Indicate fence with small x x x x

4" x 4" Fence

Address: 22 No Ridge view

Owner's Name: COU

Subdivision: Homewood Lot: 11 Blk: B Zone: \_\_\_\_\_

Valuation: \_\_\_\_\_ Type of Fence: \_\_\_\_\_ Height of Fence: \_\_\_\_\_

Type of Posts: (1) Corner: \_\_\_\_\_ (2) Line: \_\_\_\_\_ Depth in Ground: \_\_\_\_\_

Distance between Posts: \_\_\_\_\_ Top Rail Size: \_\_\_\_\_ In Conc. yes or no

Length of Fence: \_\_\_\_\_

**6579**  
**RE-ROOF**

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

### TOWN OF SEWALL'S POINT

Date 1/23/04

BUILDING PERMIT NO. 6579

Building to be erected for COOK Type of Permit REROOF

Applied for by STUART ROOFING (Contractor) Building Fee \_\_\_\_\_

Subdivision HOMENWOOD Lot 11 Block B Radon Fee \_\_\_\_\_

Address 22 RIDGEVIEW ROAD Impact Fee \_\_\_\_\_

Type of structure SFR A/C Fee \_\_\_\_\_

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

Parcel Control Number: Plumbing Fee \_\_\_\_\_

0138410060020011090000 Roofing Fee 120.00

Amount Paid 120.00 Check # 5902 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) 1

Total Construction Cost \$ 4116.00 TOTAL Fees 120.00

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 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 _____         |

RECEIVED

JAN 22 2004

Town of Sewall's Point

BUILDING PERMIT APPLICATION

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

Owner or Titleholder Name: RICHARD C COOK City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Legal Description of Property: HomeWood, Lot 11, Blk B Parcel Number: 01-38-41-006-002-0010-9

Location of Job Site: 22 Ridgeview Rd Type of Work To Be Done: Reroof

CONTRACTOR/Company Name: STUART Roofing Phone Number: 692-9854

Street: 140 NE Dixie Hwy City: STUART State: FL Zip: 34994

State Registration Number: CC024411 State Certification Number: \_\_\_\_\_ Martin County License Number: 1761

ARCHITECT: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

ENGINEER: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ ScreenedPorch: \_\_\_\_\_

Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

Type Sewage: \_\_\_\_\_ Septic Tank Permit Number From Health Depart. \_\_\_\_\_ Well Permit Number: \_\_\_\_\_

FLOOD HAZARD INFORMATION Flood Zone: \_\_\_\_\_ Minimum Base Flood Elevation (BFE): \_\_\_\_\_ NGVD

Proposed First Floor Habitable Floor Finished Elevation: \_\_\_\_\_ NGVD (Minimum 1 Foot Above BFE)

COST AND VALUES Estimated Cost of Construction or Improvements: 4,116 Estimated Fair Market Value (FMV) Prior

To Improvements: \_\_\_\_\_ If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES \_\_\_\_\_ NO \_\_\_\_\_

SUBCONTRACTOR INFORMATION

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) \_\_\_\_\_ South Florida Building Code (Structural, Mechanical, Plumbing, Gas) \_\_\_\_\_

National Electrical Code \_\_\_\_\_ Florida Energy Code \_\_\_\_\_

Florida Accessibility Code \_\_\_\_\_

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

OWNER OR AGENT SIGNATURE (Required)

State of Florida, County of: Manatee

This the 20th day of January, 2004

by Richard C Cook who is personally

known to me or produced Richard C Cook

as identification. \_\_\_\_\_

My Commission Expires: \_\_\_\_\_ Notary Public: Joseph M. Locigno

NOTARY PUBLIC - STATE OF FLORIDA  
MY COMMISSION EXPIRES APR 8, 2004  
COMMISSION# CC914793

CONTRACTOR SIGNATURE (Required)

On State of Florida, County of: Manatee County

This the 16th day of January, 2004

by John W. Turner who is personally

known to me or produced \_\_\_\_\_

As identification. \_\_\_\_\_

My Commission Expires: \_\_\_\_\_ Notary Public: Joseph M. Locigno

NOTARY PUBLIC - STATE OF FLORIDA  
MY COMMISSION EXPIRES APR 8, 2004  
COMMISSION# CC914793

**PRODUCER**  
Atlantic Pacific Insurance-PBG  
11382 Prosperity Farms, #123  
Palm Beach Gardens FL 33410  
Phone: 800-538-0487 Fax: 561-626-3153

**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**  
Stuart Roofing, Inc.  
P.O. Box 2556  
Stuart FL 34995

<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>
INSURER A: Transportation Insurance Co.	20494
INSURER B: Progressive American	24252
INSURER C:	
INSURER D:	
INSURER E:	

**RECEIVED**  
SEP 03 2003  
BY: \_\_\_\_\_

**COVERAGES**

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

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		<b>GENERAL LIABILITY</b>	C2025193591	08/27/03	08/27/04	EACH OCCURRENCE \$ 500,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5,000
		GEN'L AGGREGATE LIMIT APPLIES PER:				PERSONAL & ADV INJURY \$ 500,000
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				GENERAL AGGREGATE \$ 500,000
B		<b>AUTOMOBILE LIABILITY</b>	CA04701890-1	08/27/03	08/27/04	COMBINED SINGLE LIMIT (Ea accident) \$ 300,000
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
		<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
		<input checked="" type="checkbox"/> HIRED AUTOS				AUTO ONLY - EA ACCIDENT \$
		<input checked="" type="checkbox"/> NON-OWNED AUTOS				OTHER THAN EA ACC AGG \$
		<b>GARAGE LIABILITY</b>				EACH OCCURRENCE \$
		<input type="checkbox"/> ANY AUTO				AGGREGATE \$
		<b>EXCESS/UMBRELLA LIABILITY</b>				\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				\$
		DEDUCTIBLE				\$
		RETENTION \$				\$
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				WC STATU-TORY LIMITS OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$
		<b>OTHER</b>				E.L. DISEASE - POLICY LIMIT \$

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

**CERTIFICATE HOLDER**

**CANCELLATION**

**SEWELLS**  
  
TOWN OF SEWELL'S POINT  
1 SO. SEWELL'S POINT RD.  
STUART FL 34996

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

# ACORD CERTIFICATE OF LIABILITY INSURANCE

CERTIFICATE NO. / DATE  
AC03-1300703-04494  
12/01/2003 02:16 PM

**PRODUCER**  
Eisenmann Risk Placements, Inc.  
14160 Dallas Parkway, Suite 500  
Dallas, TX 75254  
(972) 404-0295 Fax: (972) 404-4450

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**  
STUART ROOFING, INC.  
140 N.E. DIXIE HWY.  
STUART, FL 34994  
(772) 692-9854 Fax: (772) 692-9856

INSURER A: PROVIDENCE PROPERTY & CASUALTY INSURANCE CONPA  
INSURER B:  
INSURER C:  
INSURER D:  
INSURER E:

RECEIVED  
DEC 03 2003

### 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
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GENL. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO. <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 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	<b>EXCESS LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	WC0100062	12/01/2003	12/01/2004	X W/C STATE TOV/LIMITS P/B PER E.L. EACH ACCIDENT \$ 1000000 E.L. DISEASE - EA EMPLOYEE \$ 1000000 E.L. DISEASE - POLICY LIMIT \$ 1000000
	<b>OTHER</b> <input type="checkbox"/>				LIMITS \$ LIMITS \$

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLESEXCLUSIONS ADDED BY ENDORSEMENT/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. 2. This certificate remains in effect, provided the client's account is in good standing with AMS. Coverage is not provided for any employee for which the client is not reporting wages to AMS. Applies to 100% of the employees of AMS leased to STUART ROOFING, INC., effective 12/01/2003

### 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

*[Signature]*

Town of Sewalls Point Bldg Dept  
1 S. Sewalls Point Rd.  
Stuart, FL 34996

RECEIVED  
 JAN 07 2003  
 BY: \_\_\_\_\_  
 RECEIVED  
 JAN 07 2003

AC# 0566988

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
 CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L02090300989

DATE	BATCH NUMBER	LICENSE NBR
09/03/2002	142547795	CC024411

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

TURNER, JOHN WESLEY  
 STUART ROOFING INC  
 140 NE DIXIE HWY  
 STUART

FL 34994

JEB BUSH  
 GOVERNOR

DISPLAY AS REQUIRED BY LAW  
 STUART ROOFING

KIM BINKLEY-BRYER  
 SECRETARY

01/07/2003 09:51 7726929856

2003-2004 MARTIN COUNTY ORIGINAL  
COUNTY OCCUPATIONAL LICENSE

Larry G. Orban, Tax Collector, P.O. Box 2013, Stuart, FL 34989  
(772) 288-9804

LICENSE 1284-316-782 CERT CCC024411  
PHONE (561) 884-2313 EXT NO 091761  
LOCATION:

140 NE DIXIE HWY ST

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR	\$	.00	LIC FEE	\$	25.00
	\$	.00	PENALTY	\$	0.00
	\$	.00	COL FEE	\$	0.00
	\$	.00	TRANSFER	\$	0.00
TOTAL				\$	25.00

OF ROOFING CONTRACTOR SUPERVISOR, ARCHITECT OR OCCUPATIONAL LICENSEE

JOHN WESLEY  
ROOFING INC  
2514  
STUART FL 34995

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

25 DAY OF SEPTEMBER 2003  
AND ENDING SEPTEMBER 2004

12 03092501 004703



**MIAMI-DADE COUNTY**  
**BUILDING CODE COMPLIANCE OFFICE (BCCO)**  
**PRODUCT CONTROL DIVISION**

**MIAMI-DADE COUNTY, FLORIDA**  
**METRO-DADE FLAGLER BUILDING**  
**140 WEST FLAGLER STREET, SUITE 1400**  
**MIAMI, FLORIDA 33130-1363**  
**(305) 375 2901 FAX (305) 375-2908**

**NOTICE OF ACCEPTANCE (NOA)**

**Johns Manville Corporation**  
**717 17<sup>th</sup> Street**  
**Denver, CO 80202**

**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: Johns Manville Modified Strapped Racking Systems Over Wood Decks**

**LABELLING:** 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 provided 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 consists of pages 1 through 21.

The submitted documentation was reviewed by Frank Zulusga, RRC



NOA No.: 03-0812.12  
Expiration Date: 07/19/06  
Approval Date: 07/17/05  
Page 1 of 21

FILE COPY  
TOWN OF SEWALL'S POINT  
THESE PLANS HAVE BEEN  
REVIEWED FOR CODE COMPLIANCE  
DATE: 1/23/04  
  
BUILDING OFFICIAL  
Gene Simmons

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 1/26 2024 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6550	JOYNER	DOOR+WINDOW	FAIL	
2	85 S. SEWALL MASTERPIECE	(early please)		INSPECTOR: <i>M</i>
6574	ESCUE	SHEATHING ROOF	PASS	
7	2 BANYAN DR COOPER ROOFING	TIN TAG		INSPECTOR: <i>M</i>
6564	LANCASTER	DRY IN ROOF	<del>FAIL</del>	NO PERMIT POSTED
1	5 S. VIA LUCINDIA STUART ROOFING	(first please)	PASS	OK INSPECTOR: <i>M</i>
6579	<del>COOK</del>	IN PROGRESS ROOF	<del>PASS</del>	WILL SCHEDULE FINAL
8	22 RIDGEVIEW STUART ROOFING	(last please)		INSPECTOR: <i>M</i>
6456	SHARFI	FLOOR CARPORT	PASS	
6	73 N. SEWALL'S PT O/B-WINCHIP			INSPECTOR: <i>M</i>
* TREE	ROSE	TREE	PASS	
3	9 N. RIDGEVIEW	REINSPECT		INSPECTOR: <i>M</i>
* TREE	SMITH	TREE	PASS	
5	133 S. RIVER RD	REINSPECT		INSPECTOR: <i>M</i>
OTHER:				

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 2/6, 2004 Page 2 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6396	MUFSON	TIE BEAM	FAIL	
98	17 S. RIVER BURFORD	1ST FLOOR		INSPECTOR:
6590	REIFFER	FINAL SCR. ENCL	FAIL	
7	104 HENRY SEWALL PIONEER SCREEN			INSPECTOR:
6500	HINES	TIE/BEAM/CORNER	FAIL	<del>MUST PAY FEE</del>
8	113 HENRY SEWALL WINCHP CONST			NO FEE INSPECTOR:
6579	<del>COOPER</del>	FINAL	PASS	
5	22 RIDGEVIEW STUART ROOFING			INSPECTOR:
4	DONALDSON 35 N. RIVER RD.	TREE		RESCHEDULE FOR 2/9/04 INSPECTOR:
3	DUNN 31 N. RIVER RD	TREE	PASS	INSPECTOR:
6330	BUSSEY	POWER REL.	FAIL	
12	1 PALMETTO WORRELL			\$30 FEE INSPECTOR:
OTHER: _____				

**7315**

**ROOF REPAIR**

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

### TOWN OF SEWALL'S POINT

Date 2/16/05

BUILDING PERMIT NO. 7315

Building to be erected for COOK

Type of Permit ROOF REPAIR

Applied for by ALL AREA ROOFING (Contractor)

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

Subdivision HOMENWOOD Lot 11 Block B

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

Address 22 N. RIDGEVIEW ROAD

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

Type of structure SFR

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

Parcel Control Number:

013841-0060020011090000

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

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

Amount Paid 35.00 Check # 1173 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) 1

Roofing Fee 35.00

Total Construction Cost \$ 6,000.00

TOTAL Fees 35.00

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Official

## PERMIT

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

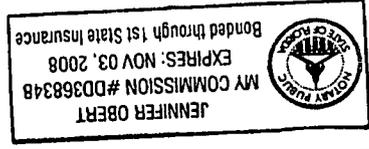
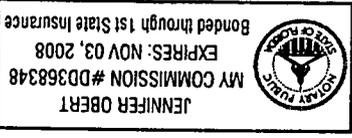
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL

- 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 \_\_\_\_\_



PERMIT APPLICATIONS VALID 90 DAYS FROM APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROMPTLY!

My Commission Expires: NOV 3, 2008
As Identification: Jennifer Ober
Known to me or produced: Jennifer Ober
By: Richard Cook
This the: 15 day of February 2005
Date of Month, County or State: Ft. Pierce
ON STATE OF FLORIDA, COUNTY OF FT. PIERCE
CONTAIN OR BORN OF (Required): Charles Richards

I HEREBY CERTIFY THAT THE INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES REGARDING THE BUILDING PROCESS.
I understand that a separate permit from the town may be required for ELECTRICAL, PLUMBING, MECHANICAL, SIGNS, POOLS, WELLS, FURNACE, and other mechanical tanks, boilers, sea walls, accessory buildings, and on fill addition or removal, and tree removal and relocation.

AREA SQUARE FOOTAGE - SEWER - ELECTRIC: 1867
Total Under Roof: 1867
Wood Deck:
Screened Porch:
Covered Patios:
Accessory Building:
Roofing:
Plumbing:
Mechanical:
Electric:
License Number:
State:
Roofing:
Plumbing:
Mechanical:
Electric:
License Number:
State:

ENGINEER:
ARCHITECT:
Street:
City:
State:
Zip:
Phone Number:
City:
State:
Zip:
Phone Number:

CONTRACTOR INFORMATION:
State Registration Number:
Contractor/Company: Hill Area Roofing & Waterproofing
Address: 3921 S. US Hwy 1
City: Fort Pierce
State: FL
Zip: 34982
Phone: 772-464-6828
Fax: 772-464-6828

WILL OWNER BE THE CONTRACTOR? YES
Estimated Cost of Construction or Improvements: \$ 10,000.00
Estimated Fair Market Value prior to improvement: \$ 280,430
Method of Determining Fair Market Value: Property Appraiser

OWNER TITLE HOLDER NAME: Richard Cook
Job Site Address: 28 Ridgeway Road
City: Seawallis Point
State: FL
Zip: 34994
Parcel Number: 01-38-41-006-00A-00110-9
Owner Address (if different):
Description of Work To Be Done: Remove & Replace damaged tiles & Repair all leaks.

Town of Seawallis Point
BUILDING PERMIT APPLICATION
Permit Number:
Date: 2-15-05
OWNER TITLE HOLDER NAME: Richard Cook
Phone (Day): 772-283-2731 (Fax):

BY: FEB 15 2005

# All Area Roofing & Waterproofing, Inc.



CCC1326177

February 15, 2005

Sewalls Point Building Dept.

To Whom It May Concern:

I, Charles Richards, contractor license number CCC1326177 hereby authorize Jennifer Obert to act as my agent in obtaining licensing and permits.

Jennifer Obert          O163-436-76-954-0

Should you have any questions, please call.

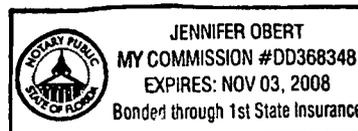
Respectfully,  
ALL AREA ROOFING & WATERPROOFING INC.

Charles Richards  
Residential Manager

State of Florida  
County of St. Lucie

Sworn and subscribed to before me this 15 day of Feb 2004 by Charles Richards, who is personally known to me.

\_\_\_\_\_  
Notary



NOTICE OF COMMENCEMENT

Permit No. \_\_\_\_\_  
State of Florida

Property Tax ID No. 01-38-41-006-002-  
County of Martin 00110-9

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 address if available Homewood, lot 11 BIK B  
OR 342/2448

General description of improvements Tear off & re-roof due to hurricane damage

Owner Richard Cook

Address 22 Ridgeway Rd. Swalls Point, FL 34996

Owner's interest in site of improvement \_\_\_\_\_

Fee Simple Title holder (if other than owner) \_\_\_\_\_

Address \_\_\_\_\_

Contractor All Area Roofing & Waterproofing Phone # 772-464-6800

Address 3501 S. US Hwy 1 Fort Pierce, FL 34982 Fax # 772-464-6600

Surety STATE OF FLORIDA Phone # \_\_\_\_\_

MARTIN COUNTY

Address \_\_\_\_\_ Fax # \_\_\_\_\_

Amount of Bond GOING PAGES IS A TRUE

AND CORRECT COPY OF THE ORIGINAL

Lender \_\_\_\_\_ Phone # \_\_\_\_\_

JENNIFER OBERT EWMING CLERK

Address \_\_\_\_\_ Fax # \_\_\_\_\_

BY JENNIFER OBERT D.C.

Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided

by Section 713.13 (a) 7., Florida Statutes:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ Fax # \_\_\_\_\_

In addition to himself, owner designates \_\_\_\_\_ of

\_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes. Expiration date of notice of

commencement is one year from the date of recording unless a different date is specified.

Richard J. Cook  
Owner Signature

State of Florida, County of Martin

Acknowledged before me this 24 day of January 2005, by Richard Cook,

who is personally known to me or who has produced FLDL as identification.

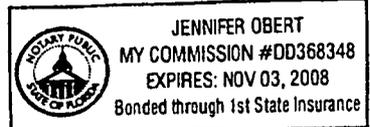
Jennifer Obert  
Signature of Notary

Jennifer Obert  
Type or Print Name of Notary

(Seal)

Title: Notary Public

Commission Number DD368348



INSTR # 1814983 OR BK 01982 PG 2474 RECD 02/15/2005 03:41:56 PM  
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S Phoenix



Feb.15. 2005- 2:52PM Insurance Office of America Inc  
**ACORD CERTIFICATE OF LIABILITY INSURANCE**

No.1121 P. 1/2  
 02/15/2005

PRODUCER (813)637-8877 FAX (813)637-8484  
 Insurance Office of America, Inc.  
 4915 W. Cypress Street  
 Suite 100  
 Tampa, FL 33607

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 NAIC #

INSURED All Area Roofing & Waterproofing, Inc.  
 1820 N. 57th Street  
 Tampa, FL 33619  
 FAX: 813-241-9623

INSURER A: Transcontinental Insurance Co.	20486C
INSURER B: Continental Casualty Co.	20443C
INSURER C: Transportation Insurance Co.	20494C
INSURER D:	
INSURER E:	

**COVERAGES**

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

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS		
A	GENERAL LIABILITY	TCP2071960908	07/15/2004	07/15/2005	EACH OCCURRENCE	\$ 1,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000	
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:				PERSONAL & ADV INJURY	\$ 1,000,000	
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				GENERAL AGGREGATE	\$ 2,000,000	
					PRODUCTS - COMP/OP AGG	\$ 2,000,000	
B	AUTOMOBILE LIABILITY	BUA2071960861	07/15/2004	07/15/2005	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	<input checked="" 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 checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS						
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$	
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	\$	
					AGG	\$	
C	EXCESS/UMBRELLA LIABILITY	CUP2071961864 UMBRELLA FORM	07/15/2004	07/15/2005	EACH OCCURRENCE	\$ 2,000,000	
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$ 2,000,000	
	<input type="checkbox"/> DEDUCTIBLE					\$	
	<input checked="" type="checkbox"/> RETENTION \$ 10,000					\$	
						\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$	
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$	
					E.L. DISEASE - POLICY LIMIT	\$	
OTHER							

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
 Town of Sewall's Point is listed as additional insured with respect to General Liability.

**CERTIFICATE HOLDER**

**CANCELLATION**

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

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

AUTHORIZED REPRESENTATIVE  
 Bruce Johnson/CORSIE *Bruce Johnson*

## 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.



FLORIDA ROOFING, SHEET METAL &amp; AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

# SELF INSURERS FUND

P.O. BOX 4907 • WINTER PARK, FL 32793 • (407) 671-FRSA  
1-800-767-3772 • FAX (407) 671-2520

## CERTIFICATE OF INSURANCE

ISSUED TO:

COPY PROVIDED TO:

Town of Sewall's Point  
1 S. Sewall's Point Rd.  
Sewall's Point FL 34996

All Area Roofing And  
Water Proofing, Inc.  
1820 N. 57th Street  
Tampa FL 33619

ATTN: To whom it may concern

Date: 02/15/2005

This is to certify that All Area Roofing And Water Proofing, Inc.  
1820 N. 57th Street  
Tampa FL 33619

being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND.

COVERAGE NUMBER: : 870-033305**LIMITS**

Workers' Compensation Statutory - State of Florida

EFFECTIVE DATE: 01/01/2005

Employers' Liability

\$100,000 - Each Accident

EXPIRATION DATE: 01/01/2006

\$100,000 - Disease, Each Employee

\$500,000 - Disease, Policy Limit

**REMARKS:** Non-cancelable without 30 days prior written notice, except for non-payment of premium which will be a 10 day written notice.

Employers Liability Limits amended to:  
\$1,000,000/\$1,000,000/\$1,000,000

This certificate is not a policy and of itself does not afford any insurance. Nothing contained in this certificate shall be construed as extending coverage not afforded by the policy(ies) shown above or as affording insurance to any insured not named above. This provides coverage for Florida policyholders and Florida domicile employees only.

Brett Steigel, Administrator  
FRSA-SIF

By:

Debbie Kemmerer - Underwriting Manager  
FRSA-SIF



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

RICHARDS, CHARLES W  
ALL AREA ROOFING & WATERPROOFING INC  
1820 NORTH 57TH STREET  
TAMPA FL 33619

STATE OF FLORIDA AC#1738083  
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
 CCC1326177 11/10/04 040398077  
 CERTIFIED ROOFING CONTRACTOR  
 RICHARDS, CHARLES W  
 ALL AREA ROOFING & WATERPROOFING  
 IS CERTIFIED under the provisions of Ch. 489 FS.  
 Expiration date: AUG 31, 2006 L04111000049

DETACH HERE

AC#1738083

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L04111000049

DATE	BATCH NUMBER	LICENSE NBR
11/10/2004	040398077	CCC1326177

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

RICHARDS, CHARLES W  
ALL AREA ROOFING & WATERPROOFING INC  
130 BERMUDA CT  
WINTER HAVEN FL 33880

JEB BUSH  
GOVERNOR

DIANE CARR  
SECRETARY

DISPLAY AS REQUIRED BY LAW

2004-2005 HILLSBOROUGH COUNTY OCCUPATIONAL LICENSE EXPIRES 9-30-2005 FOLIO NO.

FACILITIES OR MACHINES	ROOMS	SEATS	EMPLOYEES	RENEWAL	113152.0000
0	0	0	5		

OCC. CODE 090.000 BUSINESS TYPE CONTRACTOR - ROOFING H. WASTE SURCHARGE 40.00 TAX 18.00

**2004-2005**

BUSINESS LOCATION 1820 N 57TH ST TAMPA 33619

ALL AREA ROOFING & WATERPROOFING INC  
1820 N 57TH ST  
TAMPA FL 33619-0000

**LICENSE**

IS HEREBY LICENSED TO ENGAGE IN BUSINESS, PROFESSION, OR OCCUPATION SPECIFIED HEREON.

DOUG BELDEN, TAX COLLECTOR  
813-635-5200  
THIS BECOMES A TAX RECEIPT WHEN VALIDATED.  
(SEE REVERSE SIDE)

PAID - 24592 - 15  
09/22/2004 \*\*\* 58.00



**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)**

**The Dow Chemical Company  
2050 N. Broadway  
Crest Hill, IL 60435**

**SCOPE:**

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

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

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

**DESCRIPTION: Tile Bond-Roof Tile Adhesive**

**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



**FILE COPY  
TOWN OF SEWALL'S POINT  
THESE PLANS HAVE BEEN  
REVIEWED FOR CODE COMPLIANCE  
DATE: 2/16/05  
\_\_\_\_\_  
BUILDING OFFICIAL  
Gene Simmons**

**NOA No.: 01-1011.01  
Expiration Date: 08/23/06  
Approval Date: 12/27/01  
Page 1 of 7**

## ROOFING ASSEMBLY APPROVAL

**Category:** Roofing  
**Sub Category:** 07320 Roof Tile Adhesive  
**Material:** Polyurethane

### 1. SCOPE

This approves **TILE BOND** as manufactured by **The Dow Chemical Company**, 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 applicable building code, do not exceed the design pressure values; as obtained by calculations in compliance with RAS127, using **TILE-BOND**, and where the attachment calculations shall be done as an uplift based system.

### 2. PRODUCT DESCRIPTION

<u>Manufactured by Applicant</u>	<u>Dimensions</u>	<u>Product Description</u>
Tile-Bond	Factory premixed canisters	Single component polyurethane foam roof tile adhesive

#### 2.1 Components or products manufactured by others:

Any Miami-Dade County Product Control Accepted Roof Tile Assembly having a current NOA which list uplift resistance values with the use of **TILE-BOND** roof tile adhesive.

#### 2.2 Typical Physical Properties:

<u>Property</u>	<u>Test</u>	<u>Results</u>
Density	ASTM D 1622	1.91 lbs./ft. <sup>3</sup>
Compressive Strength	ASTM D 1621	10 PSI @ 10% deflection
Tensile Strength	ASTM D 1623	17.0 lbf @ 180°F, 65% RH for 90 days, concrete to concrete
Water Absorption	ASTM D 2842	3.96% absorbed by Volume
Moisture Vapor Transmission	ASTM E 96	2.67 Perm / Inch
Dimensional Stability	ASTM D 2126	1.01% Volume Change @ -40°C., 2 weeks 10.44% Volume Change @ 70°C., 97% Humidity, 2 weeks

### 3. LIMITATIONS

- 3.1 Fire classification is not part of this acceptance.
- 3.2 **TILE BOND** shall solely be used with flat, low, medium, and high tile profiles.
- 3.3 Minimum underlayment shall be in compliance with the Roofing Application Standard RAS 120.



NOA No.: 01-1011.01  
Expiration Date: 08/23/06  
Approval Date: 12/27/01  
Page 2 of 7

- 3.4 Roof Tile manufactures acquiring acceptance for the use of TILE-BOND roof tile adhesive with their tile assemblies shall test in accordance with RAS 101 with section 10.4 as modified herein.

$$F' = \frac{\left(\frac{F}{2}\right) - W}{MS}$$

**4. INSTALLATION**

- 4.1 TILE BOND may used with any roof tile assembly having a current NOA that lists uplift resistance values with the use of TILE BOND.
- 4.2 TILE BOND shall be applied in compliance with the Component Application section and the corresponding Placement Details noted herein. The roof tile assembly's adhesive attachment with the use of TILE BOND shall provide sufficient attachment resistance, expressed as an uplift based system, to meet or exceed the uplift resistance determined in compliance with Roofing Application Standards RAS 127. The adhesive attachment data is noted in the roof tile assembly NOA
- 4.3 TILE-BOND roof tile adhesive and its components shall be installed in accordance with Roofing Application Standard RAS 120, and The Dow Chemical Company TILE BOND Operating Instruction and Maintenance Booklet.
- 4.4 Installation must be by a Factory Trained 'Qualified Applicator' approved and licensed by The Dow Chemical Company.
- 4.5 Pressure treated wood filler block shall be required on all eave course of all tile profiles, except on two piece barrel tile
- 4.6 Tiles must be adhered in freshly applied adhesive. Tile must be set within 4 minutes after TILE BOND has been dispensed.
- 4.7 TILE BOND placement and minimum patty weight shall be in accordance with the 'Placement Details' herein. Each generic tile profile requires the specific placement noted herein.

<b>Tile Profile</b>	<b>Placement Detail</b>	<b>Minimum patty Weight per tile (grams)</b>
Flat / Low Profile	#1	11.1
Medium Profile	#2	11.0
High Profile ( Head)	#3	22.0
High Profile (Nose)		11.0
Two Piece Barrel	#4	11.6

**5. LABELING**

All TILE BOND containers shall comply with the Standard Conditions listed herein.

**6. BUILDING PERMIT REQUIREMENTS**

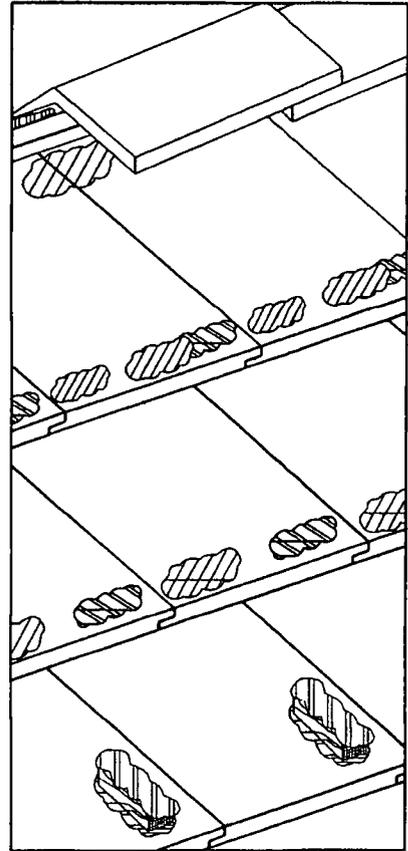
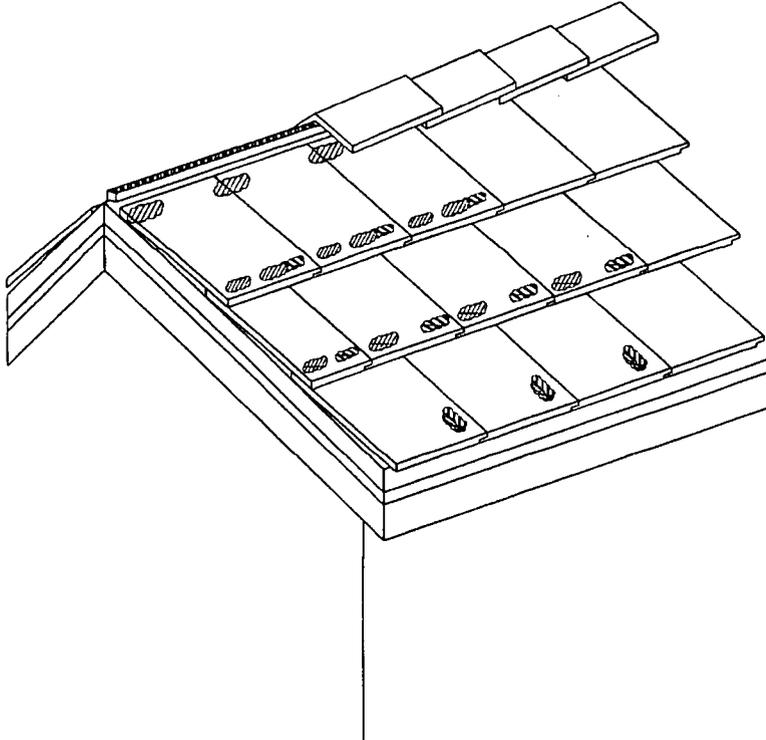
- 6.1 As required by the Building Official or applicable building code in order to properly evaluate the installation of this system



NOA No.: 01-1011.01  
 Expiration Date: 08/23/06  
 Approval Date: 12/27/01  
 Page 3 of 7

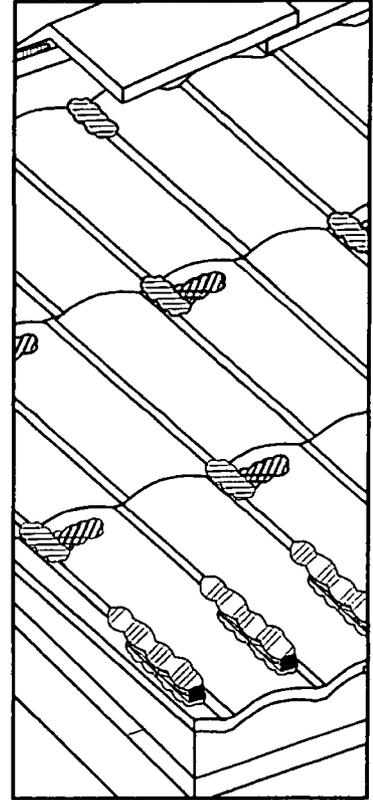
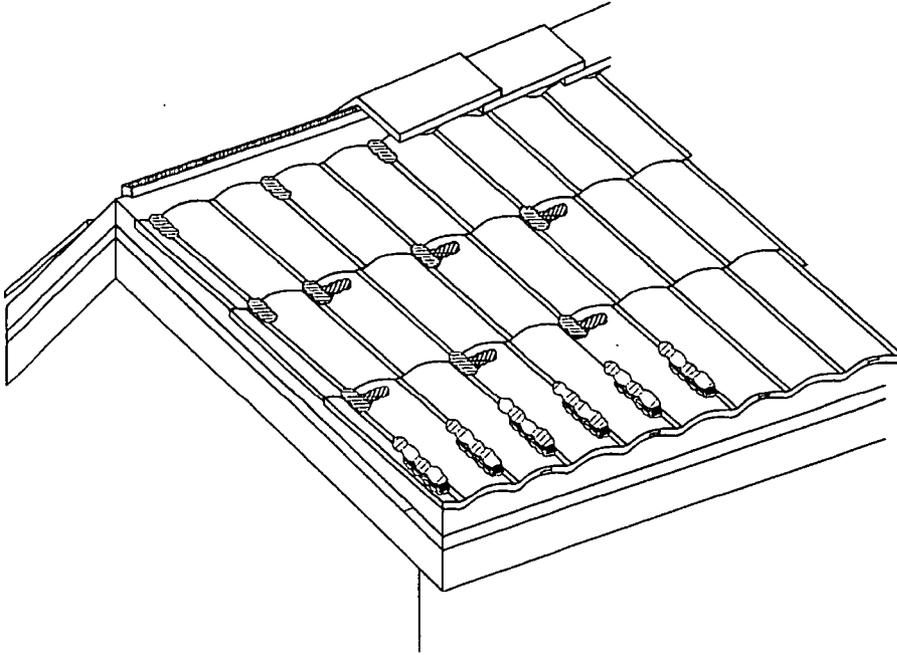
**ADHESIVE PLACEMNT DETAIL**

**LOW (FLAT) PROFILE  
DETAIL #1**



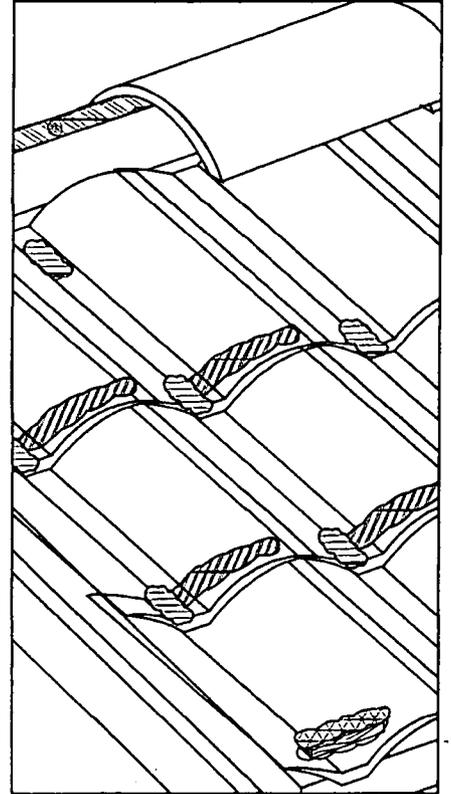
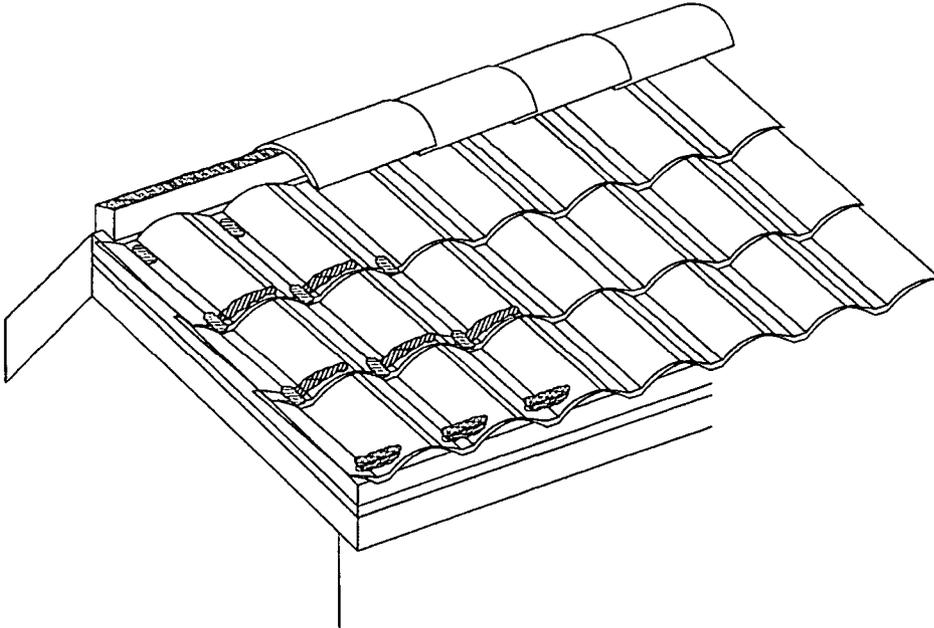
NOA No.: 01-1011.01  
Expiration Date: 08/23/06  
Approval Date: 12/27/01  
Page 4 of 7

**MEDIUM PROFILE  
DETAIL #2**



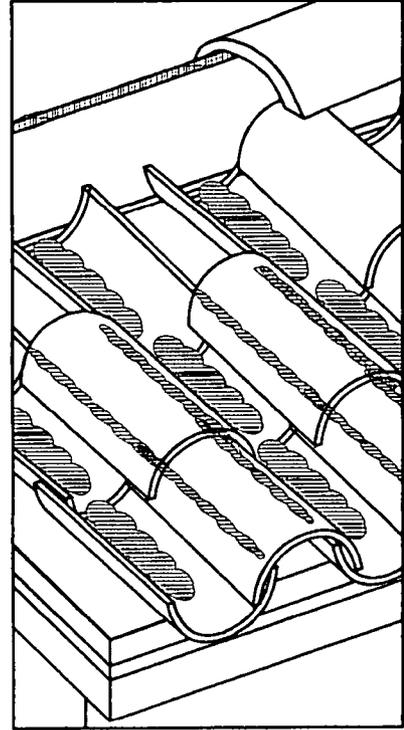
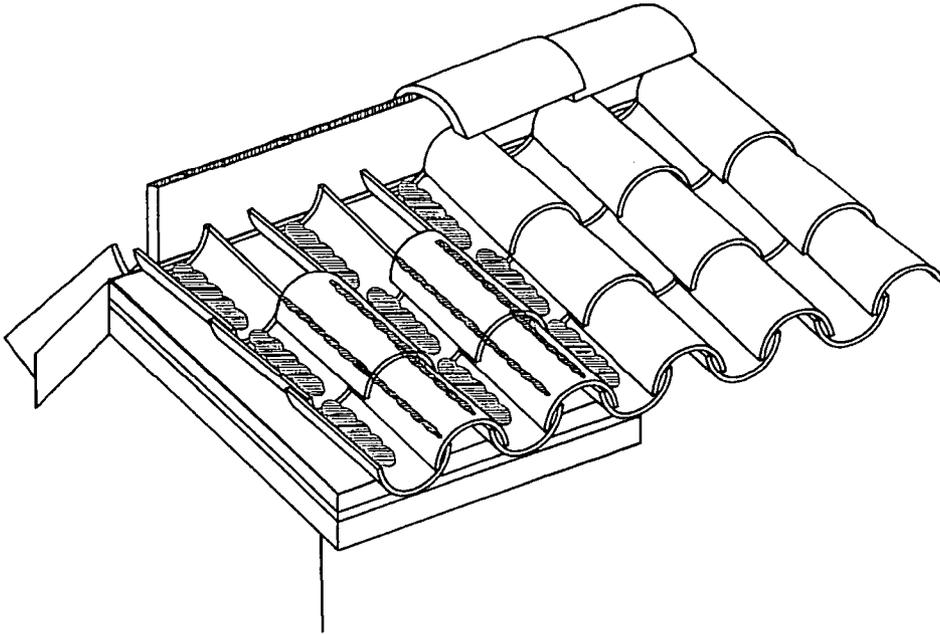
**NOA No.: 01-1011.01  
Expiration Date: 08/23/06  
Approval Date: 12/27/01  
Page 5 of 7**

**HIGH PROFILE  
DETAIL #3**



**NOA No.: 01-1011.01  
Expiration Date: 08/23/06  
Approval Date: 12/27/01  
Page 6 of 7**

**BARREL PROFILE  
DETAIL #4**



**END OF THIS ACCEPTANCE**



**NOA No.: 01-1011.01  
Expiration Date: 08/23/06  
Approval Date: 12/27/01  
Page 7 of 7**

**A. DRAWINGS: NONE**

**B. TESTS:**

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Center for Applied Engineering	25-7512-1	Miami Dade Protocol PA 101□	01/25/96
Center for Applied Engineering	25-7512-2	Miami Dade Protocol PA 101□	01/25/96
Center for Applied Engineering	25-7512-3	Miami Dade Protocol PA 101□	01/25/96
Center for Applied Engineering	25-77512-4	Miami Dade Protocol PA 101□	01/25/96
Center for Applied Engineering	25-7781	Physical Testing	11/7/96
Center for Applied Engineering	257794-2	SSTD 11-93	10/3/96
South Research Institute	01.8366-014	ASTM E108-95a	February 1997
Walker Engineering, Inc.	N/A	Evaluation of Test on a Two-pad System	12/16/97
Celotex Corp. Testing Services	520111-1	Miami Dade Protocol PA 101□	12/28/98
Celotex Corp. Testing Services	520111-2	Miami Dade Protocol PA 101□	12/28/98
Celotex Corp. Testing Services	520111-3	Miami Dade Protocol PA 101□	12/28/98
Celotex Corp. Testing Services	520111-4	Miami Dade Protocol PA 101□	12/28/98
Celotex Corp. Testing Services	520111-7	Miami Dade Protocol PA 101□	12/28/98
Celotex Corp. Testing Services	520111-8	Miami Dade Protocol PA 101□	12/28/98
Celotex Corp. Testing Services	520111-12	Miami Dade Protocol PA 101□	12/28/98
Celotex Corp. Testing Services	520135-3	Miami Dade Protocol PA 101□	2/1/99
Celotex Corp. Testing Services	520135-4	Miami Dade Protocol PA 101□	2/1/99
Celotex Corp. Testing Services	520135-5	Miami Dade Protocol PA 101□	2/1/99

- C. CALCULATIONS: Walker Engineering, Inc., Evaluation of Test on a Two-pad System. Dated 12/16/97**
- D. MATERIAL CERTIFICATIONS: NONE**
- E. STATEMENTS: NONE**



MIAMI-DADE COUNTY, FLORIDA  
METRO-DADE FLAGLER BUILDING

**PRODUCT CONTROL NOTICE OF ACCEPTANCE**

Santa Fe Tile Corporation  
10302 N.W. South River Drive, Bay #16  
Medley ,FL 33178

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

Your application for Notice of Acceptance (NOA) of:

**Spanish "S" Clay Tile**

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.: 00-1212.06

EXPIRES: 02/01/2006

Raul Rodriguez  
Chief Product Control Division

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

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

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

APPROVED: 02/01/2001

**ROOFING ASSEMBLY APPROVAL**

**Category:** Roofing  
**Sub-Category:** 07320 Roofing Tiles

**Approval Date:** February 1, 2001

**Expiration Date:** February 1, 2006

**Materials** Clay Roof Tiles  
**Deck Type:** Wood

**1. SCOPE**

This renews a roofing system using Santa Fe "Santafe 'S'" clay roofing tile, manufactured by Santafe Tile Corporation 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 locations where the design pressure requirements, as determined by applicable building code, does not exceed the design pressure values obtain by calculations in compliance with RAS 127 using the values listed in 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>
Santafé 'S' Clay Roof Tile	l = 18" w = 11.5" ½" thick	PA 112	One piece high profile clay roof tile equipped with two nail holes. For nail-on, mortar set and adhesive set applications.
Trim Pieces	l = varies w = varies varying thickness	PA 112	Accessory trim, clay roof pieces for use at hips, rakes, ridges and valley terminations. Manufactured for each tile profile.

**2.1 COMPONENTS OR PRODUCTS MANUFACTURED BY OTHERS**

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
Tile Screws	#8 x 2-½" long 0.130" shank dia. 0.178 flute dia.	PA 114 Appendix E	Stainless Steel	generic

**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 PA 112, appendix 'A'. Such testing shall be submitted to the Building Code Compliance Office for review.



Frank Zuloaga, RRC  
Roofing Product Control Examiner

- 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**

- 4.1.1 Santafe 'S' and its components shall be installed in strict compliance with Miami Dade County Roofing Application Standard RAS 118, RAS 119, and RAS 120.
- 4.1.2 Data For Attachment Calculations

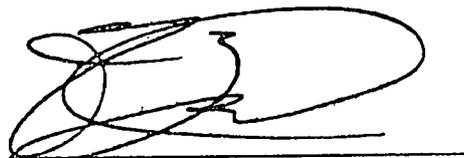
Table 1: Aerodynamic Multipliers- $\lambda$ (ft <sup>3</sup> )		
Tile Profile	$\lambda$ (ft <sup>3</sup> ) Batten Application	$\lambda$ (ft <sup>3</sup> ) Direct Deck
Santafe 'S'	0.274	0.297

Table 2: Restoring Moments due to Gravity - M <sub>g</sub> (ft-lbf)												
Tile Profile	2":12"		3":12"		4":12"		5":12"		6":12"		7":12" or greater	
	Battens	Direct Deck	Battens	Direct Deck								
Santafe 'S'	5.93	5.90	5.85	5.82	5.73	5.69	5.56	5.53	5.32	5.29	5.03	N/A

Table 3: Attachment Resistance Expressed as a Moment- M <sub>f</sub> (ft-lbf) For Nail-On System						
Tile Profile	Tile Application	Two Nails	One Screw	Two Screws	One Screw w/ Clip	Two Screws w/ Clip
Santafe S	Direct Deck	21.8	29.16 <sup>1</sup>	38.28 <sup>1</sup>	57.31 <sup>1</sup>	57.60 <sup>1</sup>
	Battens					61.77 <sup>1</sup>

1. Approved screws as noted 'Product manufactured by others'.

Table 4: Attachment Resistance Expressed as a Moment - M <sub>r</sub> (ft-lbf) for Mortar or Adhesive Set Systems		
Tile Profile	Tile Application	Attachment Resistance
Santafe 'S'	Mortar Set	23.6
	Adhesive Set	61.9



Frank Zuloaga, RRC  
Roofing Product Control Examiner

**5. LABELING**

5.1 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**

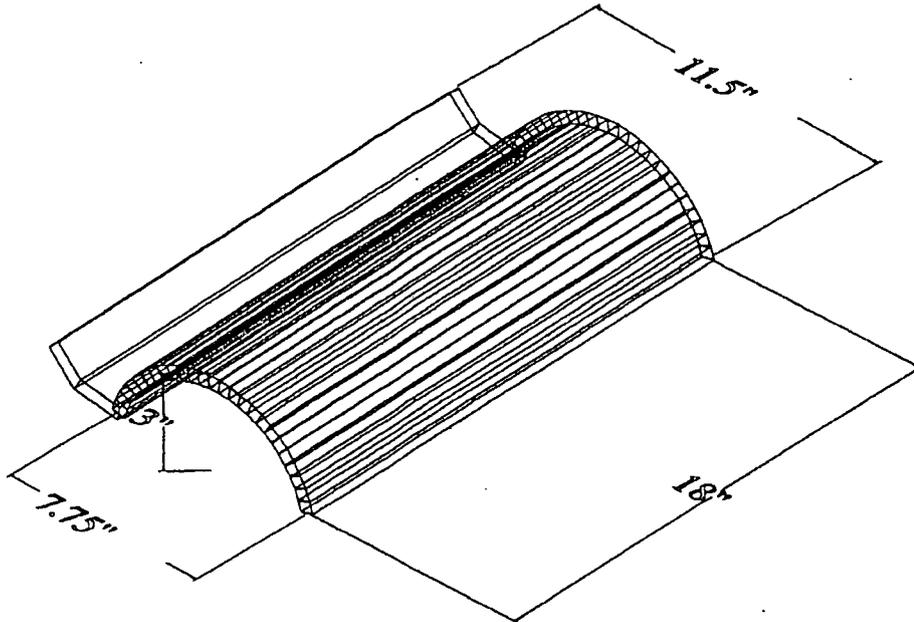
6.1 Application for building permit shall be accompanied by copies of the following:

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 DRAWING**

**SANTAFÉ "SANTAFE S" CLAY ROOF TILE**



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**



Frank Zuloaga, RRC  
Roofing Product Control Examiner

- 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**

- 4.1.1 Santafe 'S' and its components shall be installed in strict compliance with Miami Dade County Roofing Application Standard RAS 118, RAS 119, and RAS 120.
- 4.1.2 Data For Attachment Calculations

<b>Table 1: Aerodynamic Multipliers- <math>\lambda</math>(ft<sup>3</sup>)</b>		
<b>Tile Profile</b>	<b><math>\lambda</math> (ft<sup>3</sup>) Batten Application</b>	<b><math>\lambda</math> (ft<sup>3</sup>) Direct Deck</b>
Santafe 'S'	0.274	0.297

# INSPECTION LOG FOR ABANDONED/EXPIRED PERMITS

PERMIT #	OWNER'S NAME	ADDRESS	DESCRIPTION	APPROVED BY & DATE
6348	HOFFLER	173 S.S.P.R.	REPLACE WINDOW.	JW 12/29/08
7661	LITCHEY	5 MIDDLE RD.	" A/C	JW 12/29/08
6788	MACRI	6 ADMIRAL WALK	WORK NOT DONE	JW 12/29/08
7507	HUDSON	157 S. RIVER	REPLACE WINDOWS	JW 12/29/08
<del>7315</del>	<del>COOK</del>	<del>22 N. RIDGEVIEW</del>	<del>WORK DONE</del>	<del>JW 12/29/08</del>
7359	BRODERICK	44 RIO VISTA	" "	JW 12/29/08
6141	FERRARO	4 KINGSTON CT.	" "	JW 12/29/08
6749	NAUDIN	19 N. RIDGEVIEW	GAR. DONE	JW 12/29/08
6221	RUSSEL	47 S. S. P. R.	WORK DONE	JW 12/29/08
6884	MCMATHON	57 S.S. P. R.	WORK DONE	JW 12/29/08
7470	GARVIN	109 HILLCREST	" "	JW 12/29/08
7475	KNOBEL	58 S.S. P. R.	" "	JW 12/29/08
6199	CONROY	12 PALMETTO	" "	JW 12/29/08
7206	FRIBOURG	9 COPAIRE	" "	JW 12/29/08

**9414**

**SERVICE CHANGE**



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:	9414	DATE ISSUED:	APRIL 21, 2010
SCOPE OF WORK:	SERVICE CHANGE		
CONDITIONS :			
CONTRACTOR:	ED'S ELECTRIC		
PARCEL CONTROL NUMBER:	013841-006-002-001109	SUBDIVISION	HOMEWOOD-LOT 11, BL B
CONSTRUCTION ADDRESS:	22 N RIDGEVIEW RD		
OWNER NAME:	COOK		
QUALIFIER:	EDWARD JUNE	CONTACT PHONE NUMBER:	489-2196

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE CALL 287-2455 - 8:00AM TO 4:00PM**

### REQUIRED INSPECTIONS

UNDERGROUND PLUMBING _____ UNDERGROUND 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: \_\_\_\_\_

Date: 4/20/10

OWNER/TITLEHOLDER NAME: Richard Cook

Phone (Day): 283-2731

Job Site Address: 22 Ridgeview Rd N

City: Sewall's Point State: FL Zip: \_\_\_\_\_

Legal Description: \_\_\_\_\_ Parcel Control Number: \_\_\_\_\_

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

Scope of work (please be specific): Service Charge

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

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

**COST AND VALUES:** (Required on ALL permit applications)  
Estimated Value of Improvements: \$ 2300.00  
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
Is subject property located in flood hazard area? VE10 \_\_\_\_\_ AE9 \_\_\_\_\_ AE8 X  
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
(Fair Market Value of the Primary Structure only, Minus the land value)  
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: E'S Electric

Phone: 489 2196 Fax: 489 0470

Street: 6201 Oleander Ave

City: FL Pierce State: FL Zip: 34982

State License Number: EC0001569 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_

LOCAL CONTACT: Edward June

Phone Number: 772 201 7832

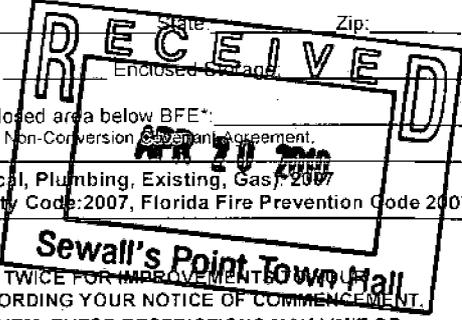
DESIGN PROFESSIONAL: \_\_\_\_\_ Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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

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

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



**NOTICES TO OWNERS AND CONTRACTORS:**

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

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

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

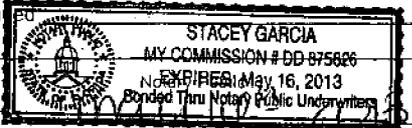
OWNER SIGNATURE: (required)  
OR OWNER'S LEGAL AUTHORIZED AGENT (PROOF REQUIRED)  
Richard A Cook

CONTRACTOR SIGNATURE: (required)  
Edward June

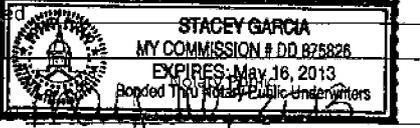
State of Florida, County of: ST. MADEIRA  
This the 20th day of April, 2010  
by \_\_\_\_\_ who is personally

On State of Florida, County of: ST. MADEIRA  
This the 20th day of April, 2010  
by Edward June who is personally

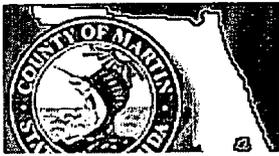
known to me or produced as identification.



known to me or produced as identification.



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...  
governmax.com T1.12

### Summary

print [navigation icons] Owner 55 of 99

#### Parcel Info

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
01-38-41-006-002-00110-9	22 N RIDGEVIEW RD	17658	Owner	0	1

#### Summary

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

#### Summary

**Property Location** 22 N RIDGEVIEW RD  
**Tax District** 2200 Sewall's Point  
**Account #** 17658  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120400  
**Acres** 0.459

#### Legal Description

**Property Information**  
 HOMEWOOD, LOT 11 BLK B OR 342/2448

#### Search By

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

#### Owner Information

**Owner Information**  
 COOK, RICHARD C (TR)

#### Mail Information

22 NORTH RIDGEVIEW RD  
 STUART FL 34996

#### Assessment Info

Front Ft. 0.00

**Market Land Value** \$229,500  
**Market Impr Value** \$103,140  
**Market Total Value** \$332,640

#### Site Functions

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

#### Recent Sale

Sale Amount \$0

**Sale Date** 1/15/1998  
**Book/Page** 1283 1738

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

Legal disclaimer / Privacy Statement

Data updated on 4/13/2010





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

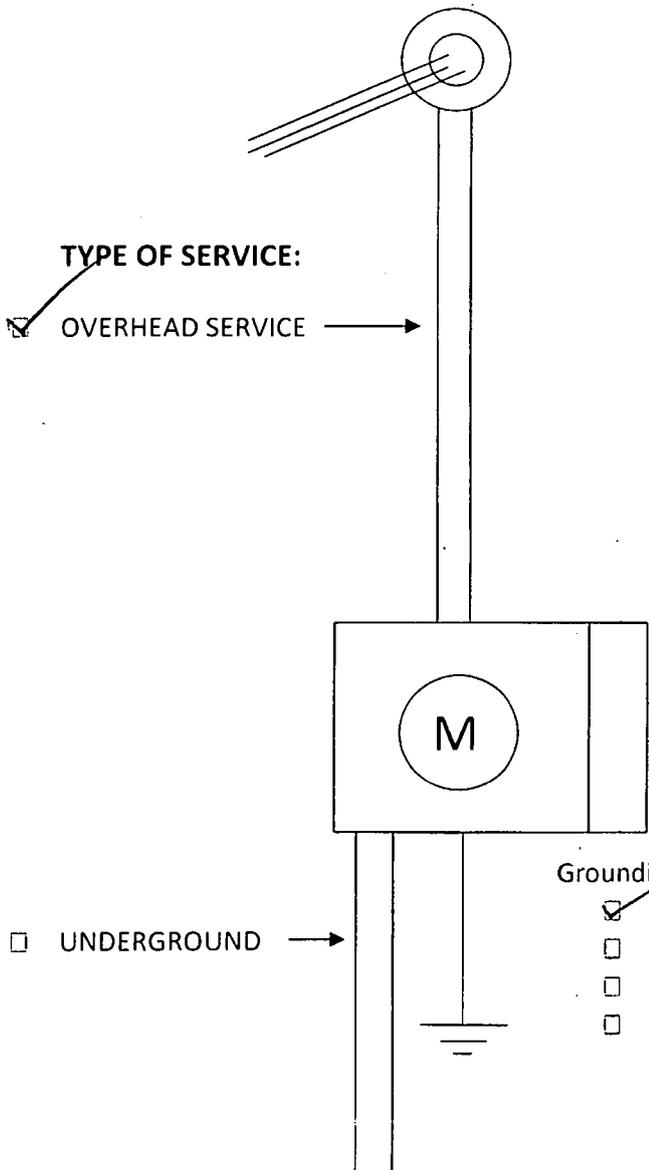


### ELECTRICAL RISER PLAN

For Temporary Power Pole and Single Family Service Change Only

ALL NEW SERVICES (INCLUDING SERVICE CHANGES) MUST BE INSTALLED AT OR ABOVE THE BASE FLOOD ELEVATION. IF YOU ARE UNSURE OF THE BFE ON IN THE AREA OF YOUR PROJECT, PLEASE CALL THE BUILDING DEPARTMENT AT 287-2455.

FILE COPY  
**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN REVIEWED FOR CODE COMPLIANCE  
 DATE 4-26-10  
**BUILDING OFFICIAL**



Service size 150 Amps  
 Conductor size 2 #100  
1 #300  
 Meter Main \_\_\_\_\_  
 Meter Can only   
 Service Change   
 New Installation \_\_\_\_\_

Grounding Electrode Conductor Size  
 #6  
 #4  
 #2  
 Other \_\_\_\_\_

*150 Amp weatherproof panel*



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



### Electrical Load Calculations

Electrical Contractor: EES Electric License No. EC0001569  
 Phone #: 772 489 2196 Fax #: 772 489 0470  
 Project: Service change Location: 22 Ridgeview Rd N.  
 Existing Service Feeder Size: #3 cu Existing Panel Size: 100 Amps  
 Main Breaker Size: 100 Amps Number of Breakers: 9

Existing Loads

<u>1200</u> Sq. Ft. X 3 watts per sq. ft.....	<u>3600</u> watts
<u>2</u> Appliance cir. @1500 watts each.....	<u>3000</u> watts
<u>1</u> Laundry cir. @ 1500 watts each.....	<u>1500</u> watts
<u>1</u> Range @ 8 kw.....	<u>8000</u> watts
_____ Dishwasher and disposal @ 1500 watts each.....	_____ watts
_____ Microwave @ 2000 watts.....	_____ watts
<u>1</u> Water heater @ 4.5 kw.....	<u>4500</u> watts
_____ Tank less water heater.....	_____ watts
<u>1</u> Dryer @ 5 kw.....	<u>5000</u> watts
<u>1</u> Refrigerator @ 1500 watts.....	<u>1500</u> watts
_____ Bathroom 1 @ 1500 watts.....	_____ watts
<u>1</u> Sprinkler Pump .....	<u>1500</u> watts
_____ Other .....	_____ watts
_____ Other .....	_____ watts
_____ Other .....	_____ watts
	<u>28600</u> Subtotal Watts

New Loads

_____ Pool pump.....	_____ watts
_____ Pool light.....	_____ watts
_____ Heat pump.....	_____ watts
_____ Chlorine generator.....	_____ watts
_____ Blower.....	_____ watts
_____ Boatlift.....	_____ watts
_____ Other .....	_____ watts
_____ Other .....	_____ watts
_____ Other .....	_____ watts
	<u>28600</u> Total Watts

_____ First 10 kw @ 100%.....	<u>10000</u> watts
_____ Remainder @ 40%.....	<u>7440</u> watts
_____ A/C heat @ 100%.....	<u>10000</u> watts

Total watts 27440 Divided by 240 volts = \_\_\_\_\_ Amps 114.33 Amp service provided

Prepared by: Edward Jure Date: 4/19/10

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri 4-22-10 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9414	<del>Coole</del>	<del>for</del>		<del>Contractor</del>
1PM	<del>720 Ridgeview</del> Ed's Elec	<del>Sevens</del>	Pass	<del>Close</del> INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
Tree	Karr 1 Palama Way	Tree	OK	INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9388	Sharpe 73 N Sewalls Straticon	wall	Pass	INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9311	SUBIN 8 Palm Ct. DRAFT WOOD	ROOF SHEATHING	Pass	INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
Tree	Cotton 11 Island Rd	Tree	OK	INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9413	SHARPE 73 N. 5th Rd STRATICON	POND Plumbing	Pass	PENDING REVISIONS INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9327	Woods 32 E High Pt Capital Auto Dev	Pre pour wall partial	Pass	<i>A</i> INSPECTOR

## Valerie Meyer

---

**From:** Valerie Meyer [vmeyer@sewallspoint.martin.fl.us]  
**Sent:** Thursday, April 22, 2010 1:32 PM  
**To:** 'FPL (tc\_inspections@fpl.com)'  
**Subject:** Service change

**Importance:** High

All inspections done and passed – please reenergize service at the following location:

Cook Residence  
22 N Ridgeview Rd  
Sewall's Point, FL

Please call if you have any questions.

Thank you,

Valerie Meyer  
Building Dept  
Town of Sewalls Point  
772-287-2455 Ext 13

**10836**  
**RE-ROOF**



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:	10836	DATE ISSUED:	4/23/2014
SCOPE OF WORK:	RE-ROOF		
CONTRACTOR:	DAN BUTCHER ROOFING		
PARCEL CONTROL NUMBER:	013841006002001109	SUBDIVISION	HOMEWOOD LOT 11 BLK B
CONSTRUCTION ADDRESS:	22 N. RIDGEVIEW ROAD		
OWNER NAME:	RICHARD C COOK TRUST		
QUALIFIER:	DAN BUTCHER	CONTACT PHONE NUMBER:	772 221-3252

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE  
 CALL 287-2455 - 8:00AM TO 4:00PM**

INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

### INSPECTIONS

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

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



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

**BUILDING PERMIT RECEIPT**

<b>PERMIT NUMBER:</b>	<b>10836</b>		
<b>ADDRESS:</b>	<b>22 N. RIDGEVIEW ROAD</b>		
<b>DATE ISSUED:</b>	<b>4/23/2014</b>	<b>SCOPE OF WORK:</b>	<b>RE-ROOF</b>

<b>SINGLE FAMILY OR ADDITION /REMODEL</b>		<b>Declared Value</b>	<b>\$</b>	
---	--	-----------------------	-----------	--

Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned spa @ \$ 121.75 per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel: @ \$ 59.81 per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: \$ 90.78 per sq. ft. s.f.		\$	-
Total Construction Value:		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Building fee: (1% of construction value < \$200K + \$100 per insp.)		\$	-
Total number of inspections (Value < \$200K) \$ 100.00 per insp. # insp			n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)			n/a
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		<b>\$</b>	<b>\$ -</b>

<b>ACCESSORY PERMIT</b>	<b>Declared Value:</b>	<b>\$</b>	<b>\$ 16,200.00</b>
Total number of inspections: @ \$ 100.00 per insp. # insp		\$ 4.00	\$ 400.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 6.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 6.00
Road impact assessment: (.04% of construction value - \$5 min.)			\$ 6.48

<b>TOTAL ACCESSORY PERMIT FEE:</b>	<b>\$</b>	<b>418.48</b>
------------------------------------	-----------	---------------

4-23-14 Pd CK 7151  
 PERMITS 836 + 835

## Christine Bergeron

---

**From:** Christine Bergeron  
**Sent:** Wednesday, April 23, 2014 10:20 AM  
**To:** DANBUTCHERROOFING@MSN.COM  
**Subject:** Permit

Your permit for Andrew Spencer, 85 S Sewall's Point Road is ready for pick up. Total due is \$314.00.

Your permit for Richard C. Cook Trust, 22 N. Ridgeview Road is ready for pick up. Total due is \$418.48

Christine

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

[cbergeron@sewallspoint.org](mailto:cbergeron@sewallspoint.org)  
[www.sewallspoint.org](http://www.sewallspoint.org)

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

*generated on 4/23/2014 9:56:13 AM EDT*

**Summary**

<b>Parcel ID</b>	<b>Account #</b>	<b>Unit Address</b>	<b>Market Total Value</b>	<b>Website Updated</b>
01-38-41-006-002-00110-9	17658	22 N RIDGEVIEW RD, SEWALL'S POINT	\$212,430	4/19/2014

---

**Owner Information**

<b>Owner(Current)</b>	COOK RICHARD C (TR)
<b>Owner/Mail Address</b>	22 N RIDGEVIEW RD STUART FL 34996
<b>Sale Date</b>	1/15/1998
<b>Document Book/Page</b>	1283 1738
<b>Document No.</b>	
<b>Sale Price</b>	0

---

**Location/Description**

<b>Account #</b>	17658	<b>Map Page No.</b>	SP-04
<b>Tax District</b>	2200	<b>Legal Description</b>	HOMEWOOD, LOT 11 BLK B OR 342/2448
<b>Parcel Address</b>	22 N RIDGEVIEW RD, SEWALL'S POINT		
<b>Acres</b>	.4590		

---

**Parcel Type**

<b>Use Code</b>	0100 Single Family
<b>Neighborhood</b>	120400 Hmwd, Palm Ro, Kngstr, Okwd, Pine

---

**Assessment Information**

<b>Market Land Value</b>	\$165,000
<b>Market Improvement Value</b>	\$47,430
<b>Market Total Value</b>	\$212,430

danbutcherroofing@msn.com

# Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: 10836

Date: 4/20/2014

OWNER/LESSEE NAME: Richard Cook Phone (Day) \_\_\_\_\_ (Fax) \_\_\_\_\_  
Job Site Address: 22 N Ridgewood Rd City: Sewalls Pt State: FL Zip: \_\_\_\_\_  
Legal Description: Homeown, Lot 11, Block B Parcel Control Number: 01-38-41-006-002-00110-9  
Fee Simple Holder Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

### \*SCOPE OF WORK (PLEASE BE SPECIFIC): RE-ROOF

**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: \$ 16,200  
(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: Dan Butler Roofing Inc Phone: 772-221-3252 Fax: \_\_\_\_\_  
Qualifiers name: DAN BUTLER Street: 1620 SW Beverly Terr City: Sevast State: FL Zip: 34997  
State License Number: CC 1326250 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_  
LOCAL CONTACT: DAN Phone Number: 772-240-4828

DESIGN PROFESSIONAL: \_\_\_\_\_ Fla. License# \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

AREAS SQUARE FOOTAGE: Living: 2600 Garage: \_\_\_\_\_ Covered Patios/ Porches: \_\_\_\_\_ Enclosed Storage: \_\_\_\_\_  
Carport: \_\_\_\_\_ Total under Roof 2600 Elevated Deck: \_\_\_\_\_ Enclosed area below BFE\*: \_\_\_\_\_  
\* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas) 2010  
National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

### WARNINGS TO OWNERS AND CONTRACTORS:

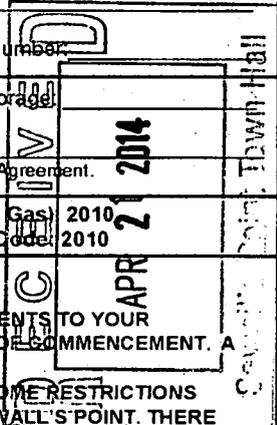
- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE: Richard C Cook  
State of Florida, County of: Martin  
On This the 8 day of APRIL, 2014  
by RICHARD C COOK who is personally known to me or produced \_\_\_\_\_  
As identification: Lynne Ellen Butcher  
Notary Public  
My Commission Expires: 10/10/2016

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: Dan Butler  
State of Florida, County of: MARTIN  
On This the 21st day of April, 2014  
by Dan Butler who is personally known to me or produced Florida License  
As identification: S. TOWNE  
Notary Public - State of Florida  
My Comm. Expires May 23, 2015  
My Commission Expires: May 23, 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!

NOTICE OF COMMENCEMENT

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00 (\$7,500 Mechanical)

PERMIT #: \_\_\_\_\_ TAX FOLIO #: 01-38-41.006-002-00110-9

STATE OF FLORIDA COUNTY OF MARTIN

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

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

HOMELWOOD, LOT 11, BLK B OR 342/2448, 22 N RIDGEVIEW RD., SEWALL'S POINT

GENERAL DESCRIPTION OF IMPROVEMENT: RE-ROOF

OWNER NAME OR LESSEE INFORMATION, IF LESSEE CONTRACTED FOR THE IMPROVEMENT

NAME: RICHARD C COOK
ADDRESS: 22 N. RIDGEVIEW RD, STUART, FL 34996
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_
INTEREST IN PROPERTY: OWNER

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

CONTRACTOR: DAN BUTCHER ROOFING INC.
ADDRESS: 1620 SW BEVERLY TERR., STUART FL 34997
PHONE NUMBER: 772-221-3252 FAX NUMBER: \_\_\_\_\_

SURETY COMPANY (IF APPLICABLE, A COPY OF THE PAYMENT BOND IS ATTACHED)

ADDRESS: \_\_\_\_\_
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_
BOND AMOUNT: \_\_\_\_\_

LENDER/MORTGAGE COMPANY:

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

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

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

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

PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_ EXPIRATION DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_

EXPIRATION DATE MAY NOT BE BEFORE THE COMPLETION OF CONSTRUCTION AND FINAL PAYMENT TO CONTRACTOR BUT WILL BE ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED

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

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

\* Richard C Cook
SIGNATURE OF OWNER OR LESSEE OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER/ATTORNEY-IN-FACT

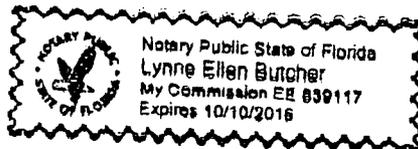
SIGNATORY'S TITLE/OFFICE OWNER

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 9 DAY OF April, 2014

BY: RICHARD C. COOK AS OWNER FOR \_\_\_\_\_
NAME OF PERSON TYPE OF AUTHORITY PARTY ON BEHALF OF WHOM INSTRUMENT WAS FILED

PERSONALLY KNOWN OR PRODUCED IDENTIFICATION TYPE OF IDENTIFICATION PRODUCED

Lynne Ellen Butcher
NOTARY SIGNATURE/ SEAL



RECORDED 04/21/2014 09:56:26 AM
CAROLYN TIMMANN
MARTIN COUNTY CLERK
INST 2450923
OR BK 2713 PG 1428



THIS IS TO CERTIFY THAT THE FOREGOING PAGE(S) IS (ARE) A TRUE AND CORRECT COPY OF THE ORIGINAL DOCUMENT AS FILED IN THIS OFFICE
CAROLYN TIMMANN, CLERK
BY: [Signature] DATE: 4/17/14



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/25/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER 561-308-8973 561-743-2982 Irion and Associates, Inc. 11416 162nd PL N Jupiter, FL 33478	CONTACT NAME: Chris Irion PHONE (A/C, No, Ext): 561-308-8973 E-MAIL ADDRESS: irionhc@gmail.com	FAX (A/C, No): 561-743-2982
INSURED 772-221-3252 772-223-1012 Dan Butcher Roofing, Inc 1620 SW Beverly Ter. Stuart, FL 34997	INSURER(S) AFFORDING COVERAGE INSURER A : Preferred Contractors Ins. Co. NAIC # 12497 INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input type="checkbox"/> OCCUR			PC89176	06/26/2013	06/26/2014	EACH OCCURRENCE \$ 1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 2000000 PRODUCTS - COMP/OP AGG \$ 2000000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	AUTOMOBILE LIABILITY ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/>						EACH OCCURRENCE \$ AGGREGATE \$
	UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER 772-220-4765 CANCELLATION

Town of Sewall's Point Building Department One S. Sewall's Point Rd. Stuart, FL 34997	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
08/21/2012	128047665	CCC1326250

The ROOFING CONTRACTOR  
 Named below IS CERTIFIED  
 Under the provisions of Chapter 489, FS.  
 Expiration date: AUG 31, 2014

BUTCHER, DANNY STEPHEN  
 DAN BUTCHER ROOFING INC  
 1620 SW BEVERLY TERRACE  
 STUART FL 34997

RICK SCOTT  
 GOVERNOR

KEN LAWSON  
 SECRETARY

DISPLAY AS REQUIRED BY LAW

2013-2014 MARTIN COUNTY ORIGINAL BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI, CFC, TAX COLLECTOR  
 3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994  
 (772) 288-5604

ACCOUNT 1999-520-0006  
 PHONE (772) 221-3252  
 LOCATION 1620 SW BEVERLY TER, STU

CE# CCC1326250  
 SIC NO 238160

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR	\$ 00	LIC. FEE	\$ 26.25
	\$ 00	PENALTY	\$ 00
	\$ 00	COL. FEES	\$ 00
	\$ 00	TRANSFER	\$ 00
TOTAL		26.25	

BUTCHER, DANNY STEPHEN  
 DAN BUTCHER ROOFING  
 1620 SW BEVERLY TER  
 STUART, FL 34997

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION  
 OF STATE CERTIFIED ROOFING CONTRACTOR  
 AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE  
 26 DAY OF JULY 2013  
 AND ENDING SEPTEMBER 30, 2014

91, 2012 03971 0001 26.25 PAID



JEFF ATWATER  
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA  
DEPARTMENT OF FINANCIAL SERVICES  
DIVISION OF WORKERS' COMPENSATION

**\*\* CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW \*\***

**CONSTRUCTION INDUSTRY EXEMPTION**

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

EFFECTIVE DATE: 4/4/2014                      EXPIRATION DATE: 4/3/2016  
PERSON: BUTCHER                              DANNY                              S  
FEIN: 650970322

**BUSINESS NAME AND ADDRESS:**

DAN BUTCHER ROOFING INC

1620 SW BEVERLY TERRACE

STUART                              FL                              34997

**SCOPES OF BUSINESS OR TRADE:**

LICENSED ROOFING  
CONTRACTOR

Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.





EXTERIOR RESEARCH & DESIGN, LLC.  
Certificate of Authorization #9503  
353 Christian Street  
Oxford, CT 06478  
PHONE: (203) 262-9245  
FAX: (203) 262-9243

## EVALUATION REPORT

**Polyglass USA, Inc.**  
150 Lyon Drive  
Fernley, NV 89408

**Evaluation Report P9290.02.08-R10**  
**FL1654-R12**  
**Date of Issuance: 02/11/2008**  
**Revision 10: 08/21/2013**

### SCOPE:

This Evaluation Report is issued under Rule 9N-3 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code. The product described herein has been designed to comply with the 2010 Florida Building Code sections noted herein.

### DESCRIPTION: Polyglass SBS and APP Modified Bitumen Roof Systems

**LABELING:** Each unit shall bear labeling in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

**CONTINUED COMPLIANCE:** This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

**ADVERTISEMENT:** The Evaluation Report number preceded by the words "Trinity | ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

**INSPECTION:** Upon request, a copy of this entire Evaluation Report 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 Evaluation Report consists of pages 1 through 5, plus a 31-page Appendix.

### Prepared by:

**Robert J.M. Nieminen, P.E.**

Florida Registration No. 59166, Florida DCA ANE1983

#### CERTIFICATION OF INDEPENDENCE:

1. Exterior Research & Design, LLC. d/b/a Trinity | ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Exterior Research & Design, LLC. d/b/a Trinity | ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 08/21/2013. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.



**ROOFING SYSTEMS EVALUATION:**

**1. SCOPE:**

**Product Category:** Roofing  
**Sub-Category:** Modified Bitumen Roof Systems  
**Compliance Statement:** Polyglass SBS and APP Modified Bitumen Roof Systems, as produced by Polyglass USA, Inc., have demonstrated compliance with the following sections of the Florida Building Code through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

**2. STANDARDS:**

<u>Section</u>	<u>Property</u>	<u>Standard</u>	<u>Year</u>
1504.3.1	Wind	FM 4474	2004
1504.7	Impact	FM 4470	1992
1507.11.2	Physical Properties	ASTM D6163	2000
1507.11.2	Physical Properties	ASTM D6164	2005
1507.11.2	Physical Properties	ASTM D6222	2002
1507.11.2	Physical Properties	ASTM D6509	2000

**3. REFERENCES:**

<u>Entity</u>	<u>Examination</u>	<u>Reference</u>	<u>Date</u>
ERD (TST6049)	Physical Properties	P10490.10.08-2	10/30/2008
ERD (TST6049)	FM 4470/4474	P13760.09.09	09/10/2009
ERD (TST6049)	FM 4470/4474	P13770.09.09	09/10/2009
ERD (TST6049)	FM 4470/4474	P30540.11.09-R1	11/30/2009
ERD (TST6049)	FM 4470/4474	P30550.12.09	12/02/2009
ERD (TST6049)	Physical Properties	P33960.12.10	12/30/2010
ERD (TST6049)	FM 4470/4474	P33970.03.11	03/15/2011
ERD (TST6049)	Physical Properties	P37590.03.13-3A	03/06/2013
ERD (TST6049)	FM 4470/4474	P39680.03.13	03/04/2013
ERD (TST6049)	Physical Properties	P37590.03.13-1-R1	06/26/2013
ERD (TST6049)	Physical Properties	P37590.03.13-2-R1	07/01/2013
ERD (TST6049)	Physical Properties	P37590.07.13-2	07/01/2013
ERD (TST6049)	Physical Properties	P37590.03.13-5-R1	07/01/2013
ERD (TST6049)	Physical Properties	P37590.07.13-1	07/02/2013
ERD (TST6049)	FM 4470/4474	P41630.08.13	08/06/2013
FM Approvals (TST1867)	FM 4470	2W7A7.AM	08/04/1994
FM Approvals (TST1867)	FM 4470	0D3A3.AM	04/04/1997
FM Approvals (TST1867)	FM 4470	2D0A0.AM	12/23/1998
FM Approvals (TST1867)	FM 4470	2D5A9.AM	06/22/1999
FM Approvals (TST1867)	FM 4470	3006646	01/04/2000
FM Approvals (TST1867)	FM 4470	3001334	01/25/2000
FM Approvals (TST1867)	FM 4470	3001334	02/15/2000
FM Approvals (TST1867)	FM 4470	3000857	01/12/2000
FM Approvals (TST1867)	FM 4470	3004091	01/12/2000
FM Approvals (TST1867)	FM 4470	3006115	05/02/2001
FM Approvals (TST1867)	FM 4470	3012321	07/29/2002
FM Approvals (TST1867)	FM 4470	3014692	08/05/2003
FM Approvals (TST1867)	FM 4470	3014751	08/27/2003
FM Approvals (TST1867)	FM 4470	3007170	01/13/2004
FM Approvals (TST1867)	FM 4470	3019317	06/30/2004
FM Approvals (TST1867)	FM 4470	3020703	07/30/2004
FM Approvals (TST1867)	FM 4470/4474	3018332	01/31/2006
FM Approvals (TST1867)	FM 4470/4474	3023368	03/20/2006
FM Approvals (TST1867)	FM 4470/4474	3024594	05/23/2006
FM Approvals (TST1867)	FM 4470/4474	3023458	07/18/2006
FM Approvals (TST1867)	FM 4470/4474	3030668	09/12/2007
FM Approvals (TST1867)	FM 4470/4474	3032172	06/12/2009
PRI (TST5878)	Physical Properties	PUSA-062-02-01	12/04/2007



<b>Entity</b>	<b>Examination</b>	<b>Reference</b>	<b>Date</b>
PRI (TST5878)	Physical Properties	PUSA-061-02-02	01/28/2008
PRI (TST5878)	Physical Properties	PUSA-064-02-02	02/27/2008
PRI (TST5878)	Physical Properties	PUSA-062-02-02	12/04/2008
Miami-Dade (CER1592)	HVHZ Compliance	Various NOAs	Various
Miami-Dade (CER1592)	Proposal for Review	10-0823	10/12/2010
UL LLC (QUA9625)	Quality Control	Service Confirmation, R14571	Exp. 08/08/2015

**4. PRODUCT DESCRIPTION:**

This Evaluation Report covers Polyglass Modified Bitumen Roof Systems installed in accordance with Polyglass USA, Inc. published installation instructions and the Limitations / Conditions of Use herein. The following Polyglass membranes make up the subject systems.

<b>Type</b>	<b>Product</b>	<b>Specification</b>		
		<b>Reference</b>	<b>Grade</b>	<b>Type</b>
<b>Base Sheets</b>	Polyglass G2 Base	ASTM D4601	N/A	II
	Polyglass APP Base	ASTM D6509	N/A	N/A
<b>SBS Membranes</b>	Elastobase	ASTM D6163	S	I
	Elastoflex V	ASTM D6163	S	I
	Elastoflex SA V Base	ASTM D6163, Table 2	S	I
	Elastoflex SA V FR Base	ASTM D6163, Table 2	S	I
	Elastoflex SA V Plus	ASTM D6163	S	I
	Elastoflex SA V Plus FR	ASTM D6163	S	I
	Elastobase Poly	ASTM D6164	S	I
	Elastoflex S6	ASTM D6164	S	I
	Elastoflex S6 G	ASTM D6164	G	I
	Elastoflex S6 G FR	ASTM D6164	G	I
	Polyfresko MOP	ASTM D6164	S	I
	Polyfresko MOP FR	ASTM D6164	S	I
	Elastoshield TS G	ASTM D6164	G	I
	Elastoshield TS G FR	ASTM D6164	G	I
	Elastoflex SA P	ASTM D6164	G	I
	Elastoflex SA P FR	ASTM D6164	G	I
	Polyfresko SBS SAP	ASTM D6164	S	I
	Polyfresko SBS SAP FR	ASTM D6164	S	I
<b>APP Membranes</b>	Polyflex	ASTM D6222	S	I
	Polyflex G	ASTM D6222	G	I
	Polyflex G FR	ASTM D6222	G	I
	Polyfresko Torch	ASTM D6222	S	I
	Polyfresko Torch FR	ASTM D6222	S	I
	Polybond	ASTM D6222	S	I
	Polybond G	ASTM D6222	G	I
	Polyflex SA P	ASTM D6222	G	I
	Polyflex SA P FR	ASTM D6222	G	I
	Polyfresko APP SAP	ASTM D6222	S	I
	Polyfresko APP SAP FR	ASTM D6222	S	I
	Polykool	ASTM D6222	S	I
	Polybianko	ASTM D6222	S	I



## 5. LIMITATIONS:

- 5.1 This Evaluation Report is not for use in HVHZ.
- 5.2 Refer to a current Roofing Materials Directory for fire ratings of this product.
- 5.3 For steel deck installations, foam plastic insulation shall be separated from the building interior in accordance with FBC 2603.4 unless the exceptions stated in FBC 2603.4.1 and 2603.6 apply.
- 5.4 Unless otherwise noted in Appendix 1, roof decking and its attachment shall be specified and installed to meet project design criteria to the satisfaction of the AHJ.
- 5.5 For recover installations, the existing roof shall be examined in accordance with FBC 1510.
- 5.6 For mechanically attached insulation or membrane or strip-bonded insulation, the maximum design pressure for the selected assembly shall meet or exceed the Zone 1 design pressure determined in accordance with FBC Chapter 16. Zones 2 and 3 shall employ an attachment density designed by a qualified design professional to resist the elevated pressure criteria. Commonly used methods are RAS 117 and FM LPDS 1-29. Assemblies marked with an asterisk\* carry the limitations set forth in Section 2.2.1.5.1(a) of FM LPDS 1-29 for Zone 2/3 enhancements.
- 5.7 For fully-adhered insulation, the maximum design pressure for the selected assembly shall meet or exceed critical design pressure determined in accordance with FBC Chapter 16. No rational analysis is permitted for these systems
- 5.8 For mechanically attached insulation or membrane over existing roof decks, fasteners shall be tested in the existing deck for withdrawal resistance. A qualified design professional shall review the data for comparison to the minimum requirements for the system. Testing and analysis shall be in accordance with TAS 105 or ANSI/SPRI FX-1.
- 5.9 For bonded insulation or membrane over existing substrates in a re-roof (tear off) or recover installation, the existing deck or existing roof surface shall be examined for compatibility with the adhesive to be installed. If any surface conditions exist that bring system performance into question, field uplift testing in accordance with ASTM E907, FM LPDS 1-52, ANSI/SPRI IA-1 or TAS 124 shall be conducted on mock-ups of the proposed new roof assembly.
- 5.10 For bonded insulation or membrane over existing substrates in a recover installation, the existing roof system shall be capable of resisting project design pressures on its own merit to the satisfaction of the AHJ, as documented through field uplift testing in accordance with ASTM E907, FM LPDS 1-52 or TAS 124.
- 5.11 Metal edge attachment (except gutters), shall be designed and installed for wind loads in accordance with FBC Chapter 16 and tested for resistance in accordance with ANSI/SPRI ES-1 or RAS 111, except the basic wind speed shall be determined from FBC Figure 1609.
- 5.12 All products in the roof assembly shall have quality assurance audit in accordance with the FBC and F.A.C. Rule 9N-3.

## 6. INSTALLATION:

- 6.1 Polyglass Modified Bitumen roof systems shall be installed in accordance with Polyglass USA, Inc. published installation instructions, subject to the Limitations / Conditions of Use noted herein.
- 6.2 System attachment requirements for wind load resistance are set forth in Appendix 1.



6.3 Any of the following FBC Approved coatings may be applied to the top roof membrane without adverse effect on the system wind load performance. Refer to current Roofing Materials Directory for fire ratings associated with coating usage.

- PG200 Non Fibered Roof Coating or Mule-Hide 111 Non-Fibrated Roof Coating;
- PG300 Fibered Roof Coating or Mule-Hide 102 Fibrated Roof Coating;
- PG600 Non-Fibered Aluminum Roof Coating or Mule-Hide 416 Standard Non-Fibrated Aluminum Roof Coating;
- PG650 Fibered Aluminum Roof Coating or Mule-Hide 406 Standard Fibrated Aluminum Roof Coating;
- PG700 White Reflective Roof Coating;
- PG800 Non-Fibered Asphalt Emulsion Roof Coating or Mule-Hide 311 Emulsion Non-Fibrated;
- PG850 Fibered Asphalt Emulsion Roof Coating or Mule-Hide 301 Emulsion Fibrated;
- Polyplus 60 Premium Non-Fibered Aluminum Roof Coating or Mule-Hide 410 Premium Non-Fibrated Aluminum Roof Coating;
- Polyplus 65 Premium Fibered Aluminum Roof Coating or Mule-Hide 401 Premium Fibrated Aluminum Roof Coating;
- Polybrite 70 White Elastomeric Roof Coating.

**7. BUILDING PERMIT REQUIREMENTS:**

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

**8. MANUFACTURING PLANTS:**

Contact the noted QA agency for information on product locations covered for F.A.C. Rule 9N-3 QA requirements

**9. QUALITY ASSURANCE ENTITY:**

UL LLC – QUA9625; (314) 578-3406, k.chancellor@us.ul.com

**- THE 31-PAGES THAT FOLLOW FORM PART OF THIS EVALUATION REPORT -**



**APPENDIX 1: ATTACHMENT REQUIREMENTS FOR WIND UPLIFT RESISTANCE**

Table	Deck	Application	Type	Description	Page
1A-1	Wood	New or Reroof (Tear-Off)	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	4-5
1A-2	Wood	New, Reroof (Tear-Off) or Recover	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	6
1B	Wood	New, Reroof (Tear-Off) or Recover	B	Mech. Attached Base Insulation, Bonded Top Insulation, Bonded Roof Cover	7
1C	Wood	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	7
1D	Wood	New, Reroof (Tear-Off) or Recover	D	Prelim. Attached Insulation, Mech. Attached Base Sheet, Bonded Roof Cover	8
1E	Wood	New or Reroof (Tear-Off)	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	9-11
1F	Wood	New or Reroof (Tear-Off)	F	Non-Insulated, Bonded Roof Cover	11
2A	Steel or Conc.	New, Reroof (Tear-Off) or Recover	B	Mech. Attached Base Insulation, Bonded Top Insulation, Bonded Roof Cover	12
2B	Steel or Conc.	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	13
2C	Steel or Conc.	New, Reroof (Tear-Off) or Recover	D	Prelim. Attached Insulation, Mech. Attached Base Sheet, Bonded Roof Cover	14
3A-1	Concrete	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	15-18
3A-2	Concrete	New or Reroof (Tear-Off)	A-1	Bonded Temporary Roof, Bonded Insulation, Bonded Roof Cover	18-19
3B	Concrete	New or Reroof (Tear-Off)	F	Non-Insulated, Bonded Roof Cover	19
4A	LWIC	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	20-21
4B	LWIC	New or Reroof (Tear-Off)	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	21
4C	LWIC	New or Reroof (Tear-Off)	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	22-24
5A	CWF	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	25
5B	CWF	New, Reroof (Tear-Off) or Recover	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	26
5C	CWF	New, Reroof (Tear-Off) or Recover	B	Mech. Attached Base Insulation, Bonded Top Insulation, Bonded Roof Cover	27
5D	CWF	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	27
5E	CWF	New, Reroof (Tear-Off) or Recover	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	27
6A	Gypsum	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	28
6B	Gypsum	New, Reroof (Tear-Off) or Recover	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	28-29
6C	Gypsum	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	29
6D	Gypsum	New, Reroof (Tear-Off) or Recover	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	29
7A	Various	Recover	A-1	Bonded Insulation, Bonded Roof Cover	30-31
7B	Various	Recover	F	Non-Insulated, Bonded Base Sheet, Bonded Roof Cover	31

**The following notes apply to the systems outlined herein:**

- Roof decks shall be in accordance with FBC requirements to the satisfaction of the AHJ. Wind load resistance of the roof deck shall be documented through proper codified and/or FBC Approval documentation.
- Insulation / base sheet fasteners shall be of sufficient length for the following deck engagement:
  - > Wood: Minimum 0.75-inch penetration.
  - > Steel: Minimum 0.75-inch penetration and engage the top flute of the steel deck.
  - > Concrete: Minimum 1-inch embedment into pilot hole in accordance with fastener manufacturer's published installation instructions.
- Unless otherwise noted, insulation may be any one layer or combination of polyisocyanurate, polystyrene, wood fiberboard, perlite, DensDeck, DensDeck Prime, DensDeck DuraGuard, SECUROCK Gypsum-Fiber Roof Board or SECUROCK Glass-Mat Roof Board that meets the QA requirements of F.A.C. Rule 9N-3 and is documented as meeting FBC 1505.1 and, for foam plastic, FBC 2603.4.1 or 2603.6, when installed with the roof cover.



4. Minimum 200 psi, minimum 2-inch thick lightweight insulating concrete may be substituted for rigid insulation board for System Type D (mechanically attached base sheet, bonded roof cover), whereby the base sheet fasteners are installed through the LWIC to engage the structural steel or concrete deck. The structural deck shall be of equal or greater configuration to the steel and concrete deck listings.
5. Unless otherwise noted, insulation adhesive application rates are as follows. Ribbon or bead width is at the time of application; the ribbons/beads shall expand as noted in the manufacturer's published instructions.
  - > HA (HA): Full coverage at 25-30 lbs/square.
  - > Dow Insta-Stik Roofing Adhesive (D-IS): Continuous 0.75 to 1-inch wide ribbons, 12-inch o.c.
  - > Millennium One Step Foamable Adhesive (M-OSFA): Continuous 0.25 to 0.5-inch wide ribbons, 12-inch o.c.
  - > OMG OlyBond 500 (OB500): Continuous 0.75 to 1-inch wide ribbons, 12-inch o.c. (PaceCart or SpotShot). *Note: OlyBond Green may be used where OlyBond 500 is referenced.*
  - > OlyBond Classic (OB Classic): Full coverage at 1 gal/square.
  - > 3M CR-20: Continuous 2.5-3.5-inch wide ribbons, 12-inch o.c. *Note: TITSESET may be used where CR-20 is referenced.*
  - > *Note: When multiple layers(s) of insulation and/or coverboard are installed in ribbon-applied adhesive, adhesive ribbons shall be staggered from layer-to-layer a distance of one-half the ribbon spacing.*
  - > *Note: The maximum edge distance from the adhesive ribbon to the edge of the insulation board shall be not less than one-half the specified ribbons spacing.*
6. Unless otherwise noted, all insulations are flat stock or taper board of the minimum thickness noted. Tapered polyisocyanurate at the following thickness limitations may be substituted with the following Maximum Design Pressure (MDP) limitations. In no case shall these values be used to 'increase' the MDP listings in the tables; rather if MDP listing below meets or exceeds that listed for a particular system in the tables, then the thinner board listed below may be used as a drop-in for the equivalent thicker material listed in the table:
  - > Millennium One Step Foamable Adhesive (M-OSFA): MDP -157.5 psf (Min. 0.5-inch thick)
  - > OMG OlyBond 500 (OB500): MDP -45.0 psf (Min. 0.5-inch thick Multi-Max FA-3)
  - > OMG OlyBond 500 (OB500): MDP -187.5 psf (Min. 0.5-inch thick ISO 95+ GL)
  - > OMG OlyBond 500 (OB500): MDP -315.0 psf (Min. 0.5-inch thick ENRGY 3)
  - > OMG OlyBond 500 (OB500): MDP -487.5 psf (Min. 0.5-inch thick ACFoam II)
  - > 3M CR-20: MDP -117.5 psf (Min. 1.0-inch thick)
7. Bonded polyisocyanurate insulation boards shall be maximum 4 x 4 ft.
8. For mechanically attached components or partially bonded insulation, the maximum design pressure for the selected assembly shall meet or exceed the Zone 1 design pressure determined in accordance with FBC Chapter 16, and Zones 2 and 3 shall employ an attachment density designed by a qualified design professional to resist the elevated pressure criteria. Commonly used methods are RAS 117 and FM LPDS 1-29. Assemblies marked with an asterisk\* carry the limitations set forth in Section 2.2.1.5.1(a) of FM LPDS 1-29 for Zone 2/3 enhancements.
9. For fully bonded assemblies, the maximum design pressure for the selected assembly shall meet or exceed critical design pressure determined in accordance with FBC Chapter 16, and no rational analysis is permitted.
10. For mechanically attached components over existing decks, fasteners shall be tested in the existing deck for withdrawal resistance. A qualified design professional shall review the data for comparison to the minimum requirements for the system. Testing and analysis shall be in accordance with TAS 105 or ANSI/SPRI FX-1.
11. For existing substrates in a bonded recover installation, the existing roof system shall be examined for compatibility and bond performance with the selected adhesive, and the existing roof system shall be capable of resisting project design pressures on its own merit to the satisfaction of the AHJ, as documented through field uplift testing in accordance with ASTM E907, FM LPDS 1-52, ANSI/SPRI IA-1 or TAS 124.
12. For Recover Applications using System Type D, the insulation is optional; however, the existing roof system shall be suitable for a recover application.

13. Unless otherwise noted, refer to the following references for bonded base, ply or cap sheet applications.

TABLE 1: POLYGLASS ROOF COVERS			
Reference	Layer	Material	Application
BP-AA (Base and Ply sheets, Asphalt-Applied)	Base	Polyglass G2 Base, FBC Approved ASTM D4601, Type II	HA at 20-40 lbs/square
	Ply	FBC Approved ASTM D2178, Type IV or VI or ASTM D4601, Type II	
SBS-AA (SBS, Asphalt-Applied)	Base or Ply	Elastobase, Elastobase Poly, Elastoflex V, Elastoflex S6	HA at 20-40 lbs/square
	Cap	Elastoflex S6, Elastoflex S6 G, Elastoflex S6 G FR, Elastoshield TS-G, Elastoshield TS-G FR, Polyfresko MOP, Polyfresko MOP FR	
SBS-TA (SBS, Torch-Applied)	Base or Ply	Elastoflex V, Elastoflex S6	Torch-Applied
	Cap	Elastoflex V, Elastoflex S6, Elastoflex S6 G, Elastoflex S6 G FR, Elastoshield TS-G, Elastoshield TS-G FR, Polyfresko MOP, Polyfresko MOP FR	
SBS-SA (SBS, Self-Adhering)	Base	Elastoflex SA V Base, Elastoflex SA V FR Base, Elastoflex SA V Plus, Elastoflex SA V Plus FR	Self-Adhering
	Cap	Elastoflex SA P, Elastoflex SA P FR, Polyfresko SBS SAP, Polyfresko SBS SAP FR	
APP-TA (APP, Torch-Applied)	Base or Ply	Polyglass APP Base, Polyflex, Polybond	Torch-Applied
	Cap	Polyflex, Polyflex G, Polyflex G FR, Polybond, Polybond G, Polyfresko Torch, Polyfresko Torch FR	
APP-SA (APP, Self-Adhering)	Cap	Polyflex SA P, Polyflex SA P FR, Polyfresko APP SAP, Polyfresko APP SAP FR, Polykool, Polybianko	Self-Adhering

14. Any of the following FBC Approved coatings may be applied to the top roof membrane without adverse effect on the system wind load performance. Refer to current Roofing Materials Directory for fire ratings associated with coating usage.
- > PG200 Non Fibered Roof Coating or Mule-Hide 111 Non-Fibrated Roof Coating;
  - > PG300 Fibered Roof Coating or Mule-Hide 102 Fibrated Roof Coating;
  - > PG600 Non-Fibered Aluminum Roof Coating or Mule-Hide 416 Standard Non-Fibrated Aluminum Roof Coating;
  - > PG650 Fibered Aluminum Roof Coating or Mule-Hide 406 Standard Fibrated Aluminum Roof Coating;
  - > PG700 White Reflective Roof Coating;
  - > PG800 Non-Fibered Asphalt Emulsion Roof Coating or Mule-Hide 311 Emulsion Non-Fibrated;
  - > PG850 Fibered Asphalt Emulsion Roof Coating or Mule-Hide 301 Emulsion Fibrated;
  - > Polyplus 60 Premium Non-Fibered Aluminum Roof Coating or Mule-Hide 410 Premium Non-Fibrated Aluminum Roof Coating;
  - > Polyplus 65 Premium Fibered Aluminum Roof Coating or Mule-Hide 401 Premium Fibrated Aluminum Roof Coating;
  - > Polybrite 70 White Elastomeric Roof Coating.
15. The following represent priming requirements for gypsum-based coverboards:
- > DensDeck and DensDeck Prime shall be field-primed with PG100 prior to self-adhering or torch-applied membrane application. No priming is required for hot-asphalt membrane applications.
  - > SECUROCK Gypsum-Fiber Roof Board or DensDeck DuraGuard do not require field priming for any membrane application.
16. "MDP" = Maximum Design Pressure is the result of testing for wind load resistance based on allowable wind loads. Refer to FBC 1609.1.5 for determination of design wind loads.

**TABLE 1A-1: WOOD DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)**  
**SYSTEM TYPE A-2: MECHANICALLY ATTACHED ANCHOR SHEET, BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Anchor Sheet			Base Insulation		Top Insulation		Roof Cover			MDP (psf)
		Type	Fasten	Attach	Type	Attach	Type	Attach	Base	Ply	Cap	
W-1	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 4-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) FBC Approved, ASTM C1289 polyiso	HA	Min. 0.25-Inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board, Min. 0.75-Inch Fesco Board (homogeneous) or min. 0.5-Inch Structodek High Density Fiberboard Roof Insulation	HA	BP-AA or SBS-AA	(Optional) BP-AA or SBS-AA	SBS-AA, SBS-TA, APP-TA	-52.5
W-2	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 4-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) FBC Approved, ASTM C1289 polyiso	HA	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board	HA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-52.5
W-3	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 4-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) FBC Approved, ASTM C1289 polyiso	HA	Min. 0.25-Inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board, Min. 0.75-Inch Fesco Board (homogeneous) or min. 0.5-Inch Structodek High Density Fiberboard Roof Insulation	HA	BP-AA or SBS-AA	(Optional) BP-AA or SBS-AA	SBS-AA, SBS-TA, APP-TA	-60.0
W-4	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 4-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) FBC Approved, ASTM C1289 polyiso	HA	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board	HA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0
W-5	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	Elastobase or Elastobase Poly	32 ga., 1-5/8-inch diameter tin caps with 12 ga. annular ring shank nails	6-inch o.c. in 4-inch lap and 6-inch o.c. in four, equally spaced, staggered center rows	Min. 2-inch ACFoam II, III, H-Shield, H-Shield CG, Multi-Max FA3 or ENRGY-3	D-IS, OB500, CR-20 or M-OSFA, atop fastener rows, 7-inch o.c.	Min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	D-IS, OB500, CR-20 or M-OSFA	BP-AA or SBS-AA	(Optional) BP-AA or SBS-AA	SBS-AA, SBS-TA, APP-TA	-60.0

**TABLE 1A-1: WOOD DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-2: MECHANICALLY ATTACHED ANCHOR SHEET, BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Anchor Sheet			Base Insulation		Top Insulation		Roof Cover			MDP (psf)
		Type	Fasten	Attach	Type	Attach	Type	Attach	Base	Ply	Cap	
W-6	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	Elastobase or Elastobase Poly	32 ga., 1-5/8-inch diameter tin caps with 12 ga. annular ring shank nails	6-inch o.c. in 4-inch lap and 6-inch o.c. in four, equally spaced, staggered center rows	Min. 2-inch ACFoam II, III, H-Shield CG, Multi-Max FA3 or ENRGY-3	D-IS, OB500, CR-20 or M-OSFA, atop fastener rows, 7-inch o.c.	(Optional) Additional layers of base insulation	D-IS, OB500, CR-20 or M-OSFA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0

**TABLE 1A-2: WOOD DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER  
SYSTEM TYPE A-2: MECHANICALLY ATTACHED ANCHOR SHEET, BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Anchor Sheet			Base Insulation		Top Insulation		Roof Cover			MDP (psf)
		Type	Fasten	Attach	Type	Attach	Type	Attach	Base	Ply	Cap	
W-7	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) FBC Approved, ASTM C1289, type II polyisocyanurate	HA	Min. 0.25-Inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board, Min. 0.75-Inch Fesco Board (homogeneous) or min. 0.5-Inch Structodek High Density Fiberboard Roof Insulation	HA	BP-AA or SBS-AA	(Optional) BP-AA or SBS-AA	SBS-AA, SBS-TA, APP-TA	-52.5
W-8	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) FBC Approved, ASTM C1289, type II polyisocyanurate	HA	Min. 0.25-Inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board	HA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-52.5
W-9	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	Elastobase or Elastobase Poly	OMG Flat Bottom Plates (square) with Roofgrip #12	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) FBC Approved, ASTM C1289, type II polyisocyanurate	HA	Min. 0.25-Inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board, Min. 0.75-Inch Fesco Board (homogeneous) or min. 0.5-Inch Structodek High Density Fiberboard Roof Insulation	HA	BP-AA or SBS-AA	(Optional) BP-AA or SBS-AA	SBS-AA, SBS-TA, APP-TA	-60.0
W-10	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	Elastobase or Elastobase Poly	OMG Flat Bottom Plates (square) with Roofgrip #12	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) FBC Approved, ASTM C1289, type II polyisocyanurate	HA	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board	HA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0



**TABLE 1B: WOOD DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER  
SYSTEM TYPE B: MECHANICALLY ATTACHED BASE INSULATION, BONDED TOP INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Insulation Layer			Top Insulation Layer		Roof Cover			MDP (psf)
		Type	Fasten	Attach	Type	Attach	Base	Ply	Cap	
W-11	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	Min. 1.5-inch ENRGY 3, H-Shield or Polytherm	Dekfast Hex with Dekfast #12 or TruFast MP-3 with TruFast DP	1 per 1.33 ft <sup>2</sup>	Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-52.5
W-12	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	Min. 1.5-inch ENRGY 3, H-Shield or Polytherm	Dekfast Hex with Dekfast #12 or TruFast MP-3 with TruFast DP	1 per 1.33 ft <sup>2</sup>	Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-60.0

**TABLE 1C: WOOD DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER  
SYSTEM TYPE C: MECHANICALLY ATTACHED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Insulation Layer	Top Insulation Layer			Roof Cover			MDP (psf)
			Type	Fasten	Attach	Base	Ply	Cap	
W-13	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	(Optional) One or more layers, any combination, loose laid	Min. 0.5-inch Structodek High Density Fiberboard Roof Insulation or min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	Dekfast Galvalume Steel Hex with Dekfast #12 DP	1 per 1.33 ft <sup>2</sup>	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-52.5
W-14	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails	(Optional) One or more layers, any combination, loose laid	Min. 0.5-inch Structodek High Density Fiberboard Roof Insulation or min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	Dekfast Galvalume Steel Hex with Dekfast #12 DP	1 per 1.33 ft <sup>2</sup>	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-67.5
W-15	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with #8 screws	(Optional) One or more layers, any combination, loose laid	Min. 0.5-inch Structodek High Density Fiberboard Roof Insulation or min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	Dekfast Galvalume Steel Hex with Dekfast #12 DP	1 per 1.33 ft <sup>2</sup>	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-82.5
W-16	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with #8 screws	(Optional) One or more layers, any combination, loose laid	Min. 1.5-inch ENRGY 3, H-Shield or Polytherm	Dekfast Galvalume Steel Hex with Dekfast #12 DP or TruFast MP-3 with TruFast DP	1 per 1.33 ft <sup>2</sup>	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-82.5

**TABLE 1D: WOOD DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER  
SYSTEM TYPE D: PRELIMINARILY ATTACHED INSULATION, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Insulation Layer(s)		Base Sheet			Roof Cover		MDP (psf)
		Type	Attach	Base	Fasten	Attach	Ply	Cap	
W-17	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	One or more layers, any combination	Prelim. Attached	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12-inch o.c. In 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-52.5
W-18	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	One or more layers, any combination	Prelim. Attached	Elastobase or Elastobase Poly with poly top surface	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12-inch o.c. In 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-52.5
W-19	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	One or more layers, any combination	Prelim. Attached	Elastobase or Elastobase Poly	OMG Flat Bottom Plates (square) with Roofgrip #12	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-60.0
W-20	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	One or more layers, any combination	Prelim. Attached	Elastobase or Elastobase Poly with poly top surface	OMG Flat Bottom Plates (square) with Roofgrip #12	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0

**TABLE 1E: WOOD DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE E: NON-INSULATED, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Sheet			Roof Cover		MDP (psf)
		Base	Fasten	Attach	Ply	Cap	
W-21	Min. 15/32-inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase	Simplex MAXX Cap	9-inch o.c. at 2-inch lap and 18-inch o.c. in two, equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-45.0*
W-22	Min. 15/32-inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase	Simplex MAXX Cap	9-inch o.c. at 2-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-52.5
W-23	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 4-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-52.5
W-24	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	Elastobase or Elastobase Poly with poly top surface	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 4-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-52.5
W-25	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-52.5
W-26	Min. 19/32-inch plywood at max. 24-inch spans attached 6-inch o.c. with 8d common nails	Elastobase or Elastobase Poly with poly top surface	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-52.5
W-27	Min. 15/32-inch thick exterior grade plywood attached per Code to meet pressure requirements.	Polyglass APP Base	Original Simplex Cap Nails (1-inch metal head diameter, 11 gauge x min. 1.25-inch long annular grooved shank)	6-inch o.c. at 3-inch lap and 6-inch o.c. in four, equally spaced, staggered center rows	(Optional) SBS-SA, APP-SA or APP-TA	SBS-SA, APP-SA or APP-TA	-52.5
W-28	Min. 15/32-inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase (with poly top surface)	Original Simplex Cap Nails (1-inch metal head diameter, 11 gauge x min. 1.25-inch long annular grooved shank)	6-inch o.c. at 3-inch lap and 6-inch o.c. in four, equally spaced, staggered center rows	(Optional) SBS-SA or APP-SA	SBS-SA or APP-SA	-52.5
W-29	Min. 15/32-inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase (with sand top surface)	Original Simplex Cap Nails (1-inch metal head diameter, 11 gauge x min. 1.25-inch long annular grooved shank)	6-inch o.c. at 3-inch lap and 6-inch o.c. in four, equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-52.5
W-30	Min. 19/32-inch plywood at max. 24-inch spans attached 4-inch o.c. with 8d common nails or 6-inch o.c. with #8 screws	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 4-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-60.0

**TABLE 1E: WOOD DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE E: NON-INSULATED, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Sheet			Roof Cover		MDP (psf)
		Base	Fasten	Attach	Ply	Cap	
W-31	Min. 19/32-Inch plywood at max. 24-Inch spans attached 4-Inch o.c. with 8d common nails or 6-Inch o.c. with #8 screws	Elastobase or Elastobase Poly with poly top surface	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 4-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0
W-32	Min. 19/32-inch plywood at max. 24-Inch spans attached 4-Inch o.c. with 8d common nails or 6-Inch o.c. with #8 screws	Elastobase or Elastobase Poly	OMG Flat Bottom Plates (square) with Roofgrip #12	12-inch o.c. in 4-Inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-60.0
W-33	Min. 19/32-Inch plywood at max. 24-Inch spans attached 4-Inch o.c. with 8d common nails or 6-Inch o.c. with #8 screws	Elastobase or Elastobase Poly with poly top surface	OMG Flat Bottom Plates (square) with Roofgrip #12	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0
W-34	Min. 15/32-Inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase	Simplex MAXX Cap	6-inch o.c. at 2-inch lap and 6-Inch o.c. in two, equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-90.0
W-35	Min. 15/32-Inch thick exterior grade plywood attached per Code to meet pressure requirements.	Polyglass APP Base	OMG #12 Standard Roofgrip or OMG #14 Heavy Duty (min. 1-5/8-inch long) with OMG 3" Round Metal Plates or OMG Flat Bottom Metal Plates	6-inch o.c. at 4-inch lap and 6-Inch o.c. in three, equally spaced, staggered center rows	(Optional) APP-TA	APP-TA	-90.0
W-36	Min. 15/32-Inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase (with sand top surface)	OMG #12 Standard Roofgrip or OMG #14 Heavy Duty (min. 1-5/8-inch long) with OMG 3" Round Metal Plates or OMG Flat Bottom Metal Plates	6-Inch o.c. at 4-inch lap and 6-inch o.c. in three, equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-90.0
W-37	Min. 15/32-Inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase (with sand top surface)	Trufast #12 DP or Trufast #14 HD (min. 1-5/8-inch long) with Trufast 3" Metal Insulation Plates	6-inch o.c. at 4-inch lap and 6-Inch o.c. in three, equally spaced, staggered center rows	(Optional) BP-AA or SBS-AA	SBS-AA	-90.0
W-38	Min. 19/32-Inch plywood at max. 24-Inch spans attached 6-Inch o.c. with #8 screws	Elastobase or Elastobase Poly with poly top surface	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails.	4-inch o.c. in 4-inch lap and 4-inch o.c. in four, equally spaced, staggered center rows	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-97.5
W-39	Min. 15/32-Inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase	Simplex MAXX Cap	6-Inch o.c. at 2-Inch lap and 6-Inch o.c. in three, equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-105.0

**TABLE 1E: WOOD DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE E: NON-INSULATED, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Sheet			Roof Cover		MDP (psf)
		Base	Fasten	Attach	Ply	Cap	
W-40	Min. 19/32-Inch plywood at max. 24-Inch spans attached 6-Inch o.c. with #8 screws	Elastobase or Elastobase Poly	32 ga., 1-5/8-Inch diameter tin caps with 11 ga. annular ring shank nails	6-inch o.c. in 4-inch lap and 6-inch o.c. in four, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-112.5
W-41	Min. 19/32-Inch plywood at max. 24-Inch spans attached 6-inch o.c. with #8 screws	Elastobase or Elastobase Poly with poly top surface	32 ga., 1-5/8-inch diameter tin caps with 11 ga. annular ring shank nails. Note: Tin caps are to be primed with PG100 or ASTM D41 primer.	6-inch o.c. in 4-inch lap and 6-inch o.c. in four, equally spaced, staggered center rows	(Optional) One or more SBS-SA (no Elastoflex SA V Base or Elastoflex SA V FR Base), SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-112.5
W-42	Min. 15/32-Inch thick exterior grade plywood attached per Code to meet pressure requirements.	Polyglass APP Base	OMG #12 Standard Roofgrip or OMG #14 Heavy Duty (min. 1-5/8-Inch long) with OMG 3" Round Metal Plates or OMG Flat Bottom Metal Plates	6-inch o.c. at 4-Inch lap and 6-inch o.c. in five, equally spaced, staggered center rows	(Optional) APP-TA	APP-TA	-120.0
W-43	Min. 15/32-Inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase (with sand top surface)	OMG #12 Standard Roofgrip or OMG #14 Heavy Duty (min. 1-5/8-Inch long) with OMG 3" Round Metal Plates or OMG Flat Bottom Metal Plates	6-inch o.c. at 4-Inch lap and 6-Inch o.c. in five, equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-120.0
W-44	Min. 15/32-Inch thick exterior grade plywood attached per Code to meet pressure requirements.	Elastobase (with sand top surface)	Trufast #12 DP or Trufast #14 HD (min. 1-5/8-Inch long) with Trufast 3" Metal Insulation Plates	6-Inch o.c. at 4-inch lap and 6-inch o.c. in five, equally spaced, staggered center rows	(Optional) BP-AA or SBS-AA	SBS-AA	-120.0

**TABLE 1F: WOOD DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE F: NON-INSULATED, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Primer	Roof Cover				MDP (psf)
			Joint Treatment	Base	Ply	Cap	
W-45	Min. 19/32-Inch plywood at max. 24-Inch spans attached 6-inch o.c. with 8d ring shank nails	(Optional) PG100	None	SBS-SA	(Optional) SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-90.0
W-46	Min. 15/32-Inch plywood at max. 24-inch spans attached 6-inch o.c. with #12 screws	(Optional) PG100	Plywood joints are covered with 4-inch wide strips of Elastoflex SA V Plus, rolled into place to create continuous bond.	Elastoflex SA V Base or Elastoflex SA V FR Base	(Optional) SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-97.5
W-47	Min. 15/32-Inch plywood at max. 24-Inch spans attached 6-Inch o.c. with #12 screws	(Optional) PG100	Plywood joints are covered with 4-inch wide strips of Elastoflex SA V Plus, rolled into place to create continuous bond.	Elastoflex SA V Plus or Elastoflex SA V Plus FR	(Optional) SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-135.0

**TABLE 2A: STEEL OR CONCRETE DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER  
SYSTEM TYPE B: MECHANICALLY ATTACHED BASE INSULATION, BONDED TOP INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Insulation Layer			Top Insulation Layer		Roof Cover			MDP (psf)
		Type	Fasten	Attach	Type	Attach	Base	Ply	Cap	
SC-1.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	Min. 1.5-inch ACFoam II, ENRGY 3, H-Shield or Polytherm	Dekfast Hex with Dekfast #14, Trufast MP-3 with Trufast HD or OMG 3-inch Galv Plate with OMD HD	1 per 2 ft <sup>2</sup>	Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional If using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*
SC-2.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	Min. 2-inch ACFoam II, ENRGY 3, H-Shield or Polytherm	Dekfast Hex with Dekfast #14, Trufast MP-3 with Trufast HD or OMG 3-inch Galv Plate with OMD HD	1 per 4 ft <sup>2</sup>	Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*
SC-3.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	Min. 1.5-inch ENRGY 3, H-Shield or Polytherm	Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	1 per 1.33 ft <sup>2</sup>	Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-90.0
SC-4.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	Min. 1.5-inch ENRGY 3, H-Shield or Polytherm	Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	1 per 1.33 ft <sup>2</sup>	Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	BP-AA, SBS-AA (Top surface primed with PG100 primer)	One or more layers, SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-90.0



**TABLE 2B: STEEL OR CONCRETE DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER  
SYSTEM TYPE C: MECHANICALLY ATTACHED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Insulation Layer	Top Insulation Layer			Roof Cover			MDP (psf)
			Type	Fasten	Attach	Base	Ply	Cap	
SC-5.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	(Optional) One or more layers, any combination, loose laid	Min. 0.5-inch SECUROCK Gypsum-Fiber Roof Board	OMG 3-inch Galvalume Steel Plate with OMG #14 HD	1 per 1.78 ft <sup>2</sup>	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-75.0
SC-6.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	One or more layers, any combination, loose laid	Min. 0.5-inch Structodek High Density Fiberboard Roof Insulation or min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	Dekfast Galvalume Steel Hex with Dekfast #12 (steel only) or #14 or TruFast MP-3 with TruFast DP (steel only) or HD	1 per 1.33 ft <sup>2</sup>	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-82.5
SC-7.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	(Optional) One or more layers, any combination, loose laid	Min. 1.5-inch ENRGY 3, H-Shield or Polytherm	Dekfast Galvalume Steel Hex with Dekfast #12 (steel only) or #14 or TruFast MP-3 with TruFast DP (steel only) or HD	1 per 1.33 ft <sup>2</sup>	SBS-SA	(Optional) One or more SBS-AA, SBS-TA, SBS-SA or APP-TA	SBS-AA, SBS-TA, SBS-SA, APP-TA, APP-SA	-82.5

**TABLE 2C: STEEL OR CONCRETE DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER**  
**SYSTEM TYPE D: PRELIMINARILY ATTACHED INSULATION, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**  
**NOTE: INSULATION IS OPTIONAL FOR RECOVER APPLICATIONS**

System No.	Deck (See Note 1)	Insulation Layer(s)		Base Sheet			Roof Cover		MDP (psf)
		Type	Attach	Base	Fasten	Attach	Ply	Cap	
SC-8.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	One or more layers, any combination	Prelim. Attached	Elastobase, Elastobase Poly or JM Perma-Ply 28	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12-inch o.c. in 4-inch lap and 18-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*
SC-9.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	One or more layers, any combination	Prelim. Attached	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-52.5
SC-10.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	One or more layers, any combination	Prelim. Attached	Elastobase or Elastobase Poly with poly top surface	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-52.5
SC-11.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	One or more layers, any combination	Prelim. Attached	Elastobase or Elastobase Poly	OMG Flat Bottom Plates (square) with Roofgrip #12 (steel only) or #14	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-60.0
SC-12.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	One or more layers, any combination	Prelim. Attached	Elastobase or Elastobase Poly with poly top surface	OMG Flat Bottom Plates (square) with Roofgrip #12 (steel only) or #14	12-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0
SC-13.	Min. 22 ga., type B, Grade 80 steel or min. 2,500 psi structural concrete	One or more layers, any combination	Prelim. Attached	Polyflex	Dekfast Isofast IF-2.375-AT Plates with Dekfast #15 HS	12-inch o.c. in the 5-inch wide, heat-welded side lap	(Optional) APP-TA	SBS-TA, APP-TA	-82.5
SC-14.	Min. 22 ga., type B, Grade 80 steel or min. 2,500 psi structural concrete	One or more layers, any combination	Prelim. Attached	Polybond or Polyflex	Trufast 2.4 in. Barbed Seam Plates with Trufast EHD Fasteners	12-inch o.c. in the 6-inch wide, heat-welded side lap	(Optional) APP-TA	SBS-TA, APP-TA	-82.5
SC-15.	Min. 22 ga., type B, Grade 33 steel or min. 2,500 psi structural concrete	One or more layers, any combination	Prelim. Attached	Polybond, Polyflex	Dekfast Hex with Dekfast #14 or OMG Flat Bottom Plates with OMG Roofgrip #14	12-inch o.c. in the 4-inch lap and 18-inch o.c. in two, equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-112.5



**TABLE 3A-1: CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Primer	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
			Type	Attach	Type	Attach	Base	Ply	Cap	
<b>SELF-ADHERING SYSTEMS WITH BASE INSULATION AND OPTIONAL TOP INSULATION OF THE SAME TYPE:</b>										
C-1	Concrete	(Optional) PG100	Min. 1.5-inch H-Shield or Multi-Max FA3	D-IS	(Optional) additional layers(s) of base insulation	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-67.5
C-2	Concrete	(Optional) PG100	Min. 1.5-inch ACFoam II or ENRGY 3	D-IS	(Optional) additional layers(s) of base insulation	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-135.0
C-3	Concrete	None	Min. 1.5-inch, min. 1.5 pcf EPS insulation board	D-IS	(Optional) additional layers of base insulation	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-157.5
C-4	Concrete	None	Min. 1.5-inch, min. 2.0 pcf EPS insulation board	OB500	(Optional) additional layers of base insulation	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-120.0
C-5	Concrete	None	Min. 1.5-inch ENRGY 3	OB500	(Optional) additional layers(s) of base insulation	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-127.5
C-6	Concrete	None	Min. 1.5-inch ACFoam II, or H-Shield	OB500	(Optional) additional layers(s) of base insulation	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-150.0
C-7	Concrete	None	Min. 1.5-inch ACFoam II, ENRGY 3, H-Shield or Multi-Max FA3	M-OSFA	(Optional) additional layers(s) of base insulation	M-OSFA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-232.5
C-8	Concrete	None	Min. 1.5-inch, min. 2.0 pcf EPS insulation board	CR-20	(Optional) additional layers of base insulation	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-240.0
C-9	Concrete	None	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG, Multi-Max FA3, or ISO 95+ GL	CR-20	(Optional) additional layers(s) of base insulation	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-270.0
C-10	Concrete	None	Min. 2-inch ACFoam II or H-Shield	OB Classic	(Optional) additional layers(s) of base insulation	OB Classic	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-270.0
C-11	Concrete	PG100	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG or Multi-Max FA3	HA	(Optional) additional layers(s) of base insulation	HA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-480.0
<b>SELF-ADHERING SYSTEMS WITH BASE INSULATION AND COVERBOARD:</b>										
C-12	Concrete	None	Min. 1.5-inch Multi-Max FA3	D-IS	Min. 0.25-inch SECURROCK Gypsum-Fiber Roof Board	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-67.5

**TABLE 3A-1: CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Primer	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
			Type	Attach	Type	Attach	Base	Ply	Cap	
C-13	Concrete	None	Min. 1.5-Inch, min. 2.0 pcf ASTM C578 Expanded Polystyrene	D-IS	Min. 0.25-inch DensDeck, DensDeck Prime	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-120.0
C-14	Concrete	None	Min. 2-inch ACFoam II, ENRGY-3 or H-Shield	D-IS	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-247.5
C-15	Concrete	None	Min. 1.5-Inch ENRGY 3	OB500	Min. 0.25-inch DensDeck, DensDeck Prime	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-127.5
C-16	Concrete	None	Min. 1.5-inch ACFoam II, H-Shield or ISO 95+GL	OB500	Min. 0.25-inch DensDeck, DensDeck Prime	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-150.0
C-17	Concrete	None	Min. 2-inch ACFoam II, ENRGY-3 or H-Shield	OB500	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-247.5
C-18	Concrete	None	Min. 1.5-inch ACFoam II, ENRGY 3, H-Shield or Multi-Max FA3	M-OSFA	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	M-OSFA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-232.5
C-19	Concrete	None	Min. 2-inch ACFoam II, ENRGY-3 or H-Shield	M-OSFA	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	M-OSFA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-247.5
C-20	Concrete	None	Min. 1.5-inch, min. 2.0 pcf ASTM C578 Expanded Polystyrene	CR-20	Min. 0.25-inch DensDeck, DensDeck Prime	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-240.0
C-21	Concrete	None	Min. 2-Inch ACFoam IV, min. 1.5-inch Ultra-Max or Multi-Max FA-3, min. 1.3-inch ACFoam III or min. 1.0-inch ISO 95+GL, H-Shield, H-Shield CG or ENRGY 3	CR-20	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-240.0
C-22	Concrete	None	Min. 2-inch ACFoam II, ENRGY-3 or H-Shield	CR-20	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-247.5
C-23	Concrete	None	Min. 2-Inch ACFoam II or H-Shield	OB Classic	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	OB Classic	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-350.0
C-24	Concrete	PG100	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG or Multi-Max FA3	HA	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	HA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-350.0

**ASPHALT AND/OR TORCH APPLIED SYSTEMS:**



**TABLE 3A-1: CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Primer	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
			Type	Attach	Type	Attach	Base	Ply	Cap	
C-25	Concrete	None	Min. 2-inch ACFoam II or H-Shield	D-IS	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	D-IS	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA	SBS-AA	-225.0
C-26	Concrete	None	Min. 2-inch ACFoam II or H-Shield	D-IS	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	D-IS	APP-TA	(Optional) One or more APP-TA	APP-TA	-232.5
C-27	Concrete	None	Min. 2-inch ACFoam II or H-Shield	OB500	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	OB500	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA	SBS-AA	-225.0
C-28	Concrete	None	Min. 2-inch ACFoam II or H-Shield	OB500	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	OB500	APP-TA	(Optional) One or more APP-TA	APP-TA	-232.5
C-29	Concrete	None	Min. 2-inch ACFoam II or H-Shield	M-OSFA	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	M-OSFA	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA	SBS-AA	-225.0
C-30	Concrete	None	Min. 2-inch ACFoam II or H-Shield	M-OSFA	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	M-OSFA	APP-TA	(Optional) One or more APP-TA	APP-TA	-232.5
C-31	Concrete	None	Min. 2-inch ACFoam IV, min. 1.5-inch Ultra-Max or Multi-Max FA-3, min. 1.3-inch ACFoam III or min. 1.0-inch ISO 95+GL, H-Shield, H-Shield CG or ENRGY 3	CR-20	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA	SBS-AA	-225.0
C-32	Concrete	None	Min. 2-inch ACFoam IV, min. 1.5-inch Ultra-Max or Multi-Max FA-3, min. 1.3-inch ACFoam III or min. 1.0-inch ISO 95+GL, H-Shield, H-Shield CG or ENRGY 3	CR-20	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	APP-TA	(Optional) One or more APP-TA	APP-TA	-232.5
C-33	Concrete	None	(Optional) Min. 2-inch ACFoam II or H-Shield	OB Classic	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	OB Classic	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA	SBS-AA	-225.0
C-34	Concrete	None	(Optional) Min. 2-inch ACFoam II or H-Shield	OB Classic	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	OB Classic	APP-TA	(Optional) One or more APP-TA	APP-TA	-232.5
C-35	Concrete	PG100	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG or Multi-Max FA3	HA	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	HA	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA	SBS-AA	-225.0
C-36	Concrete	PG100	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG or Multi-Max FA3	HA	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	HA	APP-TA	(Optional) One or more APP-TA	APP-TA	-232.5

**TABLE 3A-1: CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Primer	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
			Type	Attach	Type	Attach	Base	Ply	Cap	
C-37	Concrete	PG100	Min. 0.75-Inch Fesco Board (homogeneous)	HA	None	N/A	(Optional if using AA Ply) One or more BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-277.5
C-38	Concrete	PG100	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG or Multi-Max FA3	HA	Min. 0.75-Inch Fesco Board (homogeneous)	HA	(Optional if using AA Ply) One or more BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-290.0
C-39	Concrete	PG100	Min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	None	N/A	(Optional if using AA Ply) One or more BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-285.0
C-40	Concrete	PG100	Min. 1.5-Inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG or Multi-Max FA3	HA	Min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	(Optional if using AA Ply) One or more BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-480.0
C-41	Concrete	PG100	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG or Multi-Max FA3	HA	Min. 0.25-inch DensDeck Prime	HA	(Optional if using AA Ply) One or more BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-480.0
C-42	Concrete	PG100	Min. 0.25-inch DensDeck Prime	HA	None	N/A	(Optional if using AA Ply) One or more BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-510.0

**TABLE 3A-2: CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED TEMP ROOF, BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Primer	Temp Roof	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
				Type	Attach	Type	Attach	Base	Ply	Cap	
C-43	Conc	PG100	Elastoflex SA V Plus	Min. 1.5-Inch, min. 2.0 pcf ASTM C578 Expanded Polystyrene or Min. 1.5-Inch ACFoam II, ENRGY-3, H-Shield or Multi-Max FA3	D-IS	(Optional if using polyisocyanurate base insulation) Min. 0.25-inch DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0
C-44	Conc	PG100	Elastoflex SA P or Polyglass Base (torched)	Min. 1.5-Inch, min. 2.0 pcf ASTM C578 Expanded Polystyrene or Min. 1.5-inch ACFoam II or ENRGY 3	D-IS	(Optional if using polyisocyanurate base insulation) Min. 0.25-inch DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-75.0

**TABLE 3A-2: CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED TEMP ROOF, BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Primer	Temp Roof	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
				Type	Attach	Type	Attach	Base	Ply	Cap	
C-45	Conc	PG100	Elastoflex SA V Plus	Min. 1.5-Inch, min. 2.0 pcf ASTM C578 Expanded Polystyrene or Min. 1.5-Inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG, Multi-Max FA3 or ISO 95+GL	CR-20	(Optional If using polyisocyanurate base insulation) Min. 0.25-inch DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0
C-46	Conc	PG100	Polyglass Base, (torched)	Min. 1.5-Inch, min. 2.0 pcf ASTM C578 Expanded Polystyrene or Min. 1.5-Inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG, Multi-Max FA3 or ISO 95+GL	CR-20	(Optional If using polyisocyanurate base insulation) Min. 0.25-inch DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-75.0
C-47	Conc	PG100	Elastoflex SA P	Min. 1.5-Inch, min. 2.0 pcf ASTM C578 Expanded Polystyrene	CR-20	Min. 0.25-Inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-240.0
C-48	Conc	PG100	Elastoflex SA P	Min. 1.5-Inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG, Multi-Max FA3 or ISO 95+GL	CR-20	(Optional) Additional layers of base insulation	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-250.0
C-49	Conc	PG100	Elastoflex SA P	Min. 1.5-Inch ACFoam II, ACFoam III, ENRGY 3, H-Shield, H-Shield CG, Multi-Max FA3 or ISO 95+GL	CR-20	Min. 0.5-Inch Temple HD6 or Structodek High Density Fiberboard Roof Insulation or min. 0.25-Inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-270.0

**TABLE 3B: CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE F: NON-INSULATED, BONDED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Primer	Roof Cover			MDP (psf)
			Base	Ply	Cap	
C-50	Concrete	PG100	SBS-SA	(Optional) SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-315.0
C-51	Concrete	PG100	BP-AA (Optional If using asphalt applied Ply)	(Optional If using asphalt applied Base) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-622.5

**TABLE 4A: LIGHTWEIGHT CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)		Base Insulation Layer		Coverboard		Roof Cover			MDP (psf)
	Struct. Deck	LWC	Type	Attach	Type	Attach	Base	Ply	Cap	
<b>SELF-ADHERING SYSTEMS WITH BASE INSULATION AND OPTIONAL TOP INSULATION OF THE SAME TYPE:</b>										
LWC-1	Concrete	Min. 200 psi, min 2-inch Elastizell	Min. 1.5-Inch, min. 2.0 pcf ASTM C578 expanded polystyrene	OB500	(Optional) Additional layers of base insulation	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-120.0
LWC-2	Concrete	Min. 200 psi, min 2-inch Elastizell	Min. 1.5-Inch ACFoam II, ENRGY 3, ISO 95+ GL or H-Shield	OB500	(Optional) Additional layers of base insulation	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-225.0
LWC-3	Concrete	Min. 200 psi, min. 2-inch Elastizell	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, ISO 95+ GL, H-Shield, H-Shield CG, Multi-Max FA3 or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	(Optional) Additional layers of base insulation	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-180.0
LWC-4	Concrete	Min. 200 psi, min. 2-inch Celcore or Mearlcrete	Min. 1.5-Inch ACFoam II, ACFoam III, ENRGY 3, ISO 95+ GL, H-Shield, H-Shield CG, Multi-Max FA3 or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	(Optional) Additional layers of base insulation	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-222.5
<b>SELF-ADHERING SYSTEMS WITH BASE INSULATION AND COVERBOARD:</b>										
LWC-5	Concrete	Min. 200 psi, min 2-inch Elastizell	Min. 1.5-inch, min. 2.0 pcf ASTM C578 expanded polystyrene	OB500	Min. 0.25-Inch SECUROCK Gypsum-Fiber Roof Board	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-120.0
LWC-6	Concrete	Min. 200 psi, min 2-inch Elastizell	Min. 1.5-inch ACFoam II, ENRGY 3, ISO 95+ GL or H-Shield	OB500	Min. 0.25-Inch SECUROCK Gypsum-Fiber Roof Board	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-225.0
LWC-7	Concrete	Min. 200 psi, min. 2-inch Elastizell	Min. 1.5-Inch ACFoam II, ACFoam III, ENRGY 3, ISO 95+ GL, H-Shield, H-Shield CG, Multi-Max FA3 or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	Min. 0.25-Inch SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-180.0
LWC-8	Concrete	Min. 200 psi, min. 2-inch Celcore or Mearlcrete	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, ISO 95+ GL, H-Shield, H-Shield CG, Multi-Max FA3 or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	Min. 0.25-Inch SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-222.5
<b>ASPHALT AND/OR TORCH APPLIED SYSTEMS:</b>										
LWC-9	Concrete	Min. 200 psi, min 2-inch Elastizell	Min. 1.5-inch ACFoam II, ENRGY 3, ISO 95+ GL or H-Shield	OB500	Min. 0.25-Inch SECUROCK Gypsum-Fiber Roof Board	OB500	BP-AA, SBS-AA, APP-TA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-225.0

**TABLE 4A: LIGHTWEIGHT CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)		Base Insulation Layer		Coverboard		Roof Cover			MDP (psf)
	Struct. Deck	LWC	Type	Attach	Type	Attach	Base	Ply	Cap	
LWC-10	Concrete	Min. 200 psi, min. 2-inch Elastzell	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, ISO 95+ GL, H-Shield, H-Shield CG, Multi-Max FA3 or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	BP-AA, SBS-AA, APP-TA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-180.0
LWC-11	Concrete	Min. 200 psi, min. 2-inch Celcore or Mearcrete	Min. 1.5-inch ACFoam II, ACFoam III, ENRGY 3, ISO 95+ GL, H-Shield, H-Shield CG, Multi-Max FA3 or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	BP-AA, SBS-AA, APP-TA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-222.5

**TABLE 4B: LIGHTWEIGHT CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-2: MECHANICALLY ATTACHED ANCHOR SHEET, BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)		Anchor Sheet			Base Insulation		Top Insulation		Roof Cover			MDP (psf)
	Struct	LWC	Type	Fasten	Attach	Type	Attach	Type	Attach	Base	Ply	Cap	
LWC-12	Min. 22 ga., Type B, vented steel at max. 5 ft spans	Min. 300 psi Approved cellular LWC	GAFGLAS #75	OMG CR BSF	7-inch o.c. at 4-inch lap and 7-inch o.c. in two, equally spaced center rows	(Optional) Min. 1.5-inch ACFoam II, H-Shield, Multi-Max FA3 or Polytherm	HA	Min. 1.5-inch Thermofoam Composite, Polytherm Composite, or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation or min. 0.75-inch Fesoo Board (homogeneous)	HA	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0
LWC-13	Min. 22 ga., Type B, vented steel at max. 5 ft spans	Min. 300 psi Approved cellular LWC	GAFGLAS #75	OMG CR BSF	7-inch o.c. at 4-inch lap and 7-inch o.c. in two, equally spaced center rows	Min. 1.5-inch ACFoam II, H-Shield, Multi-Max FA3 or Polytherm	HA	None	N/A	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-45.0

**TABLE 4C: LIGHTWEIGHT CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE E: MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (See Note 1)		Base Sheet (See Note A below)			Roof Cover		MDP (psf)
	Structural Deck	Lightweight Concrete	Type (See Note A)	Fasten	Attach	Ply	Cap	
<b>'GENERIC' CELLULAR LIGHTWEIGHT INSULATING CONCRETE:</b>								
LWC-14	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 300 psi, min. 2-inch thick cellular LWC. <i>Note: To qualify the LWIC under this assembly, an OMG CR BPF shall achieve an average withdrawal of 53 lbf when tested per TAS 105 or ANSI/SPRI FX-1</i>	B3	OMG CR BPF	7-inch o.c. in a 3-inch lap and 7-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	(Optional) One or more BP-AA, SBS-AA	SBS-AA, APP-TA	-45.0
<b>CELCORE CELLULAR LIGHTWEIGHT INSULATING CONCRETE:</b>								
LWC-15	Min. 0.0179-inch Tensiform S-75 or min. 0.0205-inch Tensiform 75 at max. 5 ft spans or structural concrete	Min. 200 psi, min. 2-inch thick Celcore	B1, B2, B3 or B7	ES FM-90 or OMG CR BPF	8-inch o.c. in a 3-inch lap and 16-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA	SBS-AA	-37.5
LWC-16	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 200 psi, min. 2-inch thick Celcore	B1 through B12	ES FM-90 or OMG CR BPF	7-inch o.c. in a 3-inch lap and 7-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA	SBS-AA	-45.0
LWC-17	Min. 26 ga., type HF steel at max 5 ft spans or structural concrete	Min. 225 psi, min. 2-inch thick Celcore MF	B1, B2, B3, B4, B7, B8, B10, B11 or B12	OMG CR BPF	9-inch o.c. in a 3-inch lap and 9-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA	SBS-AA	-45.0
LWC-18	Min. 22 ga., type B steel at max 6 ft spans or structural concrete	Min. 225 psi, min. 2-inch thick Celcore MF	B1, B2, B3, B4, B7, B8, B10, B11 or B12	OMG CR BPF	7-inch o.c. in a 3-inch lap and 14-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA	SBS-AA	-45.0
LWC-19	Min. 22 ga., type B steel at max 6 ft spans or structural concrete	Min. 225 psi, min. 2-inch thick Celcore MF	B1, B2, B3, B4, B7, B8, B10, B11 or B12	OMG CR BPF	9-inch o.c. in a 3-inch lap and 9-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA	SBS-AA	-45.0
LWC-20	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 225 psi, min. 2-inch thick Celcore MF	B1 or B2	ES Twin Loc-Nail	9-inch o.c. in a 4-inch lap and 18-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, or APP-TA	-45.0
LWC-21	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 225 psi, min. 2-inch thick Celcore MF	B2 (with poly-film top surface)	ES Twin Loc-Nail	9-inch o.c. in a 4-inch lap and 18-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-45.0
LWC-22	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 300 psi, min. 2-inch thick Celcore MF	B2	ES FM-90	8-inch o.c. in a 4-inch lap and 8-inch o.c. in three equally spaced, staggered center rows	BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, or APP-TA	-60.0



**TABLE 4C: LIGHTWEIGHT CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE E: MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (See Note 1)		Base Sheet (See Note A below)			Roof Cover		MDP (psf)
	Structural Deck	Lightweight Concrete	Type (See Note A)	Fasten	Attach	Ply	Cap	
LWC-23	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 300 psi, min. 2-inch thick Celcore MF	B2 (with poly-film top surface)	ES FM-90	8-inch o.c. in a 4-inch lap and 8-inch o.c. in three equally spaced, staggered center rows	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0
LWC-24	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 300 psi, min. 2-inch thick Celcore	B1 through B12	ES FM-90 or OMG CR BPF	7-inch o.c. in a 3-inch lap and 7-inch o.c. in the field of the sheet	One or more BP-AA, SBS-AA	SBS-AA	-75.0
LWC-25	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 300 psi, min. 2-inch thick Celcore MF	Elastobase Poly	ES FM-260	10-inch o.c. in a 4-inch lap and 10-inch o.c. in three equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-90.0
<b>ELASTIZELL CELLULAR LIGHTWEIGHT INSULATING CONCRETE:</b>								
LWC-26	Min. 0.0179-inch Tensiform S-75 or min. 0.0205-inch Tensiform 75 at max. 5 ft spans or structural concrete	Min. 200 psi, min. 2-inch thick Elastzell Range II	B1 through B12	ES FM-90 or OMG CR BPF	7.5-inch o.c. in a 3-inch lap and 7.5-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA, SBS-TA, or APP-TA	SBS-AA, SBS-TA, or APP-TA	-30.0
LWC-27	Min. 0.0179-inch Tensiform S-75 or min. 0.0205-inch Tensiform 75 at max. 5 ft spans or structural concrete	Min. 200 psi, min. 2-inch thick Elastzell Range II	B2 (with poly-film top surface)	ES FM-90 or OMG CR BPF	7.5-inch o.c. in a 3-inch lap and 7.5-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-30.0
LWC-28	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 200 psi, min. 2-inch thick Elastzell Range II	B1 through B12	ES FM-90 or OMG CR BPF	7-inch o.c. in a 3-inch lap and 7-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA, SBS-TA, or APP-TA	SBS-AA, SBS-TA, or APP-TA	-45.0
LWC-29	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 200 psi, min. 2-inch thick Elastzell Range II	B2 (with poly-film top surface)	ES FM-90 or OMG CR BPF	7-inch o.c. in a 3-inch lap and 7-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-45.0
LWC-30	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 350 psi, min. 2-inch thick Elastzell with Zell-Crete Fibers, supplemental attached with Roofgrip #21 and 3-inch plates at 1 per 8 ft <sup>2</sup>	B2	ES Twin Loc-Nails (min. 1.8-inch)	6-inch o.c. in a 4-inch lap and 6-inch o.c. in three, equally spaced, staggered rows in the field of the sheet	One or more BP-AA or SBS-AA	SBS-AA, SBS-TA, SBS-SA, APP-TA or APP-SA	-60.0
LWC-31	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 350 psi, min. 2-inch thick Elastzell with Zell-Crete Fibers, supplemental attached with Roofgrip #21 and 3-inch plates at 1 per 8 ft <sup>2</sup>	B2 (with poly-film top surface)	ES Twin Loc-Nails (min. 1.8-inch)	6-inch o.c. in a 4-inch lap and 6-inch o.c. in three, equally spaced, staggered rows in the field of the sheet	SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-60.0
<b>MEARLCRETE CELLULAR LIGHTWEIGHT INSULATING CONCRETE:</b>								

**TABLE 4C: LIGHTWEIGHT CONCRETE DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE E: MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (See Note 1)		Base Sheet (See Note A below)			Roof Cover		MDP (psf)
	Structural Deck	Lightweight Concrete	Type (See Note A)	Fasten	Attach	Ply	Cap	
LWC-32	Min. 24 ga., type B steel at max 5 ft spans or structural concrete	Min. 200 psi, min. 2-inch thick Mearlcrete	B1 through B12	ES FM-90 or OMG CR BPF	7.5-inch o.c. in a 3-inch lap and 10-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA	SBS-AA	-30.0
LWC-33	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 300 psi, min. 2-inch thick Mearlcrete	B1, B2 or B12	ES FM-90 or OMG CR BPF	7-inch o.c. in a 4-inch lap and 7-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA, SBS-TA, or APP-TA	SBS-AA, SBS-TA, or APP-TA	-45.0
LWC-34	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 300 psi, min. 2-inch thick Mearlcrete	B2 (with poly-film top surface)	ES FM-90 or OMG CR BPF	7-inch o.c. in a 4-inch lap and 7-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-45.0
LWC-35	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 300 psi, min. 2-inch thick Mearlcrete	B1, B2, B3, B7 or B11	ES FM-90 or OMG CR BPF	7-inch o.c. in a 4-inch lap and 7-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more BP-AA, SBS-AA, SBS-TA, or APP-TA	SBS-AA, SBS-TA, or APP-TA	-52.5
LWC-36	Min. 22 ga., type B steel at max 5 ft spans or structural concrete	Min. 300 psi, min. 2-inch thick Mearlcrete	B2 (with poly-film top surface)	ES FM-90 or OMG CR BPF	7-inch o.c. in a 4-inch lap and 7-inch o.c. in two, equally spaced, staggered rows in the field of the sheet	One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-52.5

A. Base Sheets options are coded as follows:

- > B1: Polyglass G2 Base;
- > B2: Elastobase or Elastobase Poly;
- > B3: GAFGLAS #75;
- > B4: Stratavent Eliminator Venting Base Sheet (Nailable);
- > B5: GAFGLAS Ply 4;
- > B6: GAFGLAS FlexPly 6;
- > B7: JM Perma Ply No. 28;
- > B8: JM Vensulation;
- > B9: JM GlasPly IV;
- > B10: JM GlasPly Premier;
- > B11: Tamko Glass-Base;
- > B12: Tamko Vapor-Chan



**TABLE 5A: CEMENTITIOUS WOOD FIBER DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
		Type	Attach	Type	Attach	Base	Ply	Cap	
CWF-1	Min. 2.5-inch Tectum Plank or Tectum LS Plank	Min. 1.5-inch ACFoam II, ISO 95+GL, H-Shield, Polytherm, ENRGY-3	D-IS or OB500	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	D-IS or OB500	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0
CWF-2	Min. 2.5-Inch Tectum Plank or Tectum LS Plank	Min. 1.5-inch ACFoam II, ISO 95+GL, H-Shield, Polytherm, ENRGY-3	D-IS or OB500	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board	D-IS or OB500	SBS-TA, SBS-SA or APP-TA	(Optional) One or more SBS-TA, SBS-SA or APP-TA	SBS-TA, SBS-SA, APP-TA, APP-SA	-45.0
CWF-3	Min. 2.5-Inch Tectum Plank or Tectum LS Plank	Min. 1.5-inch ACFoam II, ISO 95+GL, H-Shield, Polytherm, ENRGY-3	CR-20	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board or min. 0.5-Inch Structodek High Density Fiberboard Roof Insulation	CR-20	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-52.5
CWF-4	Min. 2.5-Inch Tectum Plank or Tectum LS Plank	Min. 1.5-inch ACFoam II, ISO 95+GL, H-Shield, Polytherm, ENRGY-3	CR-20	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-TA, SBS-SA or APP-TA	(Optional) One or more SBS-TA, SBS-SA or APP-TA	SBS-TA, SBS-SA, APP-TA, APP-SA	-52.5

**TABLE 5B: CEMENTITIOUS WOOD FIBER DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE A-2: MECHANICALLY ATTACHED ANCHOR SHEET, BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Anchor Sheet			Base Insulation		Top Insulation		Roof Cover			MDP (psf)
		Type	Fasten	Attach	Type	Attach	Type	Attach	Base	Ply	Cap	
CWF-5	Min. 2.5-inch Tectum Plank or Tectum LS Plank	Elastobase, Elastobase Poly, Polyglass G2 Base	ES Inuldek Loc-Nail	9-Inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	Min. 1.5-Inch ACFoam II, ACFoam III, ISO95+GL, H-Shield, ENRGY 3, Polytherm or Multi-Max FA3,	HA	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board, Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-Inch Structodek High Density Fiberboard Roof Insulation	HA	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-30.0*
CWF-6	Min. 2.5-inch Tectum Plank or Tectum LS Plank	Elastobase, Elastobase Poly, Polyglass G2 Base	ES Inuldek Loc-Nail	9-Inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	Min. 1.5-Inch ACFoam II, ACFoam III, ISO95+GL, H-Shield, ENRGY 3, Polytherm or Multi-Max FA3,	HA	Min. 0.25-Inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board	HA	SBS-TA, SBS-SA or APP-TA	(Optional) One or more SBS-TA, SBS-SA or APP-TA	SBS-TA, SBS-SA, APP-TA, APP-SA	-30.0*
CWF-7	Min. 2.5-Inch Tectum Plank or Tectum LS Plank	Elastobase, Elastobase Poly, Polyglass G2 Base	ES Twin Loc-Nail	9-Inch o.c. In 4-inch lap and 18-inch o.c. In two, equally spaced, staggered center rows	Min. 1.5-Inch ACFoam II, ACFoam III, ISO95+GL, H-Shield, ENRGY 3, Polytherm or Multi-Max FA3,	HA	Min. 0.25-Inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board, Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-Inch Structodek High Density Fiberboard Roof Insulation	HA	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*
CWF-8	Min. 2.5-inch Tectum Plank or Tectum LS Plank	Elastobase, Elastobase Poly, Polyglass G2 Base	ES Twin Loc-Nail	9-Inch o.c. In 4-inch lap and 18-inch o.c. in two, equally spaced, staggered center rows	Min. 1.5-Inch ACFoam II, ACFoam III, ISO95+GL, H-Shield, ENRGY 3, Polytherm or Multi-Max FA3,	HA	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board	HA	SBS-TA, SBS-SA or APP-TA	(Optional) One or more SBS-TA, SBS-SA or APP-TA	SBS-TA, SBS-SA, APP-TA, APP-SA	-45.0*

**TABLE 5C: CEMENTITIOUS WOOD FIBER DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER  
SYSTEM TYPE B: MECHANICALLY ATTACHED BASE INSULATION, BONDED TOP INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Insulation Layer			Top Insulation Layer		Roof Cover			MDP (psf)
		Type	Fasten	Attach	Type	Attach	Base	Ply	Cap	
CWF-9	Min. 2.5-Inch Tectum Plank or Tectum LS Plank	Min. 2-Inch H-Shield or Polytherm	OMG Polymer GypTec Plate with Polymer GypTec or TruFast TL 3 In. Plate with TL Fastener	1 per 4 ft <sup>2</sup>	Min. 0.5-Inch Structodek High Density Fiberboard Roof Insulation	HA	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*

**TABLE 5D: CEMENTITIOUS WOOD FIBER DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER  
SYSTEM TYPE C: MECHANICALLY ATTACHED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Insulation Layer	Top Insulation Layer			Roof Cover			MDP (psf)
			Type	Fasten	Attach	Base	Ply	Cap	
CWF-10	Min. 2.5-Inch Tectum Plank or Tectum LS Plank	(Optional) One or more layers, any combination, loose laid	Min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	ES Twin Loc-Nails (min. 1-Inch embedment)	1 per 2 ft <sup>2</sup>	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*

**TABLE 5E: CEMENTITIOUS WOOD FIBER DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)  
SYSTEM TYPE E: NON-INSULATED, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Sheet			Roof Cover		MDP (psf)
		Base	Fasten	Attach	Ply	Cap	
CWF-11	Min. 2.5-Inch Tectum Plank or Tectum LS Plank	Elastobase, Elastobase Poly, Polyglass G2 Base	ES Inuldek Loc-Nail	9-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-30.0*
CWF-12	Min. 2.5-Inch Tectum Plank or Tectum LS Plank	Elastobase, Elastobase Poly, Polyglass G2 Base	ES Twin Loc-Nails	9-inch o.c. in 4-inch lap and 18-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*

**TABLE 6A: GYPSUM DECKS – REROOF (TEAR-OFF)  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
		Type	Attach	Type	Attach	Base	Ply	Cap	
G-1	Existing, sound poured gypsum or gypsum plank deck	Min. 1.5-inch AC Foam II, ENRGY 3 or H-Shield or min. 2.0 pcf, ASTM C578 expanded polystyrene	OB500	(Optional) additional layers(s) of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-112.5
G-2	Existing, sound poured gypsum or gypsum plank deck	Min. 1.5-inch AC Foam II, ENRGY 3, H-Shield or Multi-Max FA3	M-OSFA	(Optional) additional layers(s) of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	M-OSFA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-202.5
G-3	Existing, sound poured gypsum or gypsum plank deck	Min. 1.5-inch, min. 2.0 pcf EPS insulation board	CR-20	(Optional) additional layers of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-240.0
G-4	Existing, sound poured gypsum or gypsum plank deck	Min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	CR-20	None	N/A	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional If using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-245.0
G-5	Existing, sound poured gypsum or gypsum plank deck	Min. 1.5-inch AC Foam II, AC Foam III, ENRGY 3, H-Shield, H-Shield CG or Multi-Max FA3	CR-20	(Optional) additional layers(s) of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-257.5

**TABLE 6B: GYPSUM DECKS – REROOF (TEAR-OFF)  
SYSTEM TYPE A-2: MECHANICALLY ATTACHED ANCHOR SHEET, BONDED INSULATION, BONDED ROOF COVER**

System No.	Deck (See Note 1)	Anchor Sheet			Base Insulation		Top Insulation		Roof Cover			MDP (psf)
		Type	Fasten	Attach	Type	Attach	Type	Attach	Base	Ply	Cap	
G-6	Existing, sound poured gypsum or gypsum plank deck	Elastobase, Elastobase Poly, Polyglass G2 Base	ES FM-45 or FM-60	9-inch o.c. in 4-inch lap and 18-inch o.c. in two, equally spaced, staggered center rows	Min. 1.5-inch AC Foam II, AC Foam III, ISO95+GL, H-Shield, ENRGY 3, Polytherm or Multi-Max FA3,	HA	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board, Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-30.0*

TABLE 6B: GYPSUM DECKS – REROOF (TEAR-OFF)												
SYSTEM TYPE A-2: MECHANICALLY ATTACHED ANCHOR SHEET, BONDED INSULATION, BONDED ROOF COVER												
System No.	Deck (See Note 1)	Anchor Sheet			Base Insulation		Top Insulation		Roof Cover			MDP (psf)
		Type	Fasten	Attach	Type	Attach	Type	Attach	Base	Ply	Cap	
G-7	Existing, sound poured gypsum or gypsum plank deck	Elastobase, Elastobase Poly, Polyglass G2 Base	ES FM-75 or FM-90 or Twin Loc-Nails	9-inch o.c. in 4-inch lap and 18-inch o.c. in two, equally spaced, staggered center rows	Min. 1.5-Inch ACFoam II, ACFoam III, ISO95+GL, H-Shield, ENRGY 3, Polytherm or Multi-Max FA3,	HA	Min. 0.25-inch DensDeck, DensDeck Prime, SECUROCK Gypsum-Fiber Roof Board, Min. 0.75-inch Fesco Board (homogeneous) or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	HA	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*

TABLE 6C: GYPSUM DECKS – REROOF (TEAR-OFF) OR RECOVER										
SYSTEM TYPE C: MECHANICALLY ATTACHED INSULATION, BONDED ROOF COVER										
System No.	Deck (See Note 1)	Base Insulation Layer	Top Insulation Layer			Roof Cover			MDP (psf)	
			Type	Fasten	Attach	Base	Ply	Cap		
G-8	Existing sound poured gypsum or gypsum plank deck	(Optional) One or more layers, any combination, loose laid	Min. 0.25-Inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board or min. 0.5-inch Structodek High Density Fiberboard Roof Insulation	ES Twin Loc-Nails (min. 1-inch embedment)	1 per 2 ft <sup>2</sup>	(Optional if using AA Ply) BP-AA, SBS-AA	(Optional if using AA Base) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*	

TABLE 6D: GYPSUM DECKS – REROOF (TEAR-OFF)							
SYSTEM TYPE E: NON-INSULATED, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER							
System No.	Deck (See Note 1)	Base Sheet			Roof Cover		MDP (psf)
		Base	Fasten	Attach	Ply	Cap	
G-9	Existing sound poured gypsum or gypsum plank deck	Elastobase, Elastobase Poly, Polyglass G2 Base	ES FM-45 or FM-60	9-Inch o.c. in 4-inch lap and 18-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-30.0*
G-10	Existing sound poured gypsum or gypsum plank deck	Elastobase, Elastobase Poly, Polyglass G2 Base	ES FM-75 or FM-90 or Twin Loc-Nails	9-inch o.c. in 4-inch lap and 18-inch o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0*

**TABLE 7A: RECOVER APPLICATIONS  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Substrate (See Notes 1 & 11)	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
		Type	Attach	Type	Attach	Base	Ply	Cap	
R-1	Existing asphaltic roof	Min. 1.5-inch Multi-Max FA3	D-IS	(Optional) additional layers(s) of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-67.5
R-2	Existing asphaltic roof	Min. 1.5-inch ACFoam II or ENRGY 3 or min. 2.0 pcf EPS insulation board	D-IS	(Optional) additional layers(s) of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	D-IS	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-90.0
R-3	Existing asphaltic roof	Min. 1.5-inch, min. 2.0 pcf EPS insulation board	OB500	(Optional) additional layers of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-120.0
R-4	Existing asphaltic roof	Min. 1.5-inch ACFoam II, ENRGY 3 or H-Shield	OB500	(Optional) additional layers(s) of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	OB500	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-127.5
R-5	Existing asphaltic roof	Min. 1.5-inch ACFoam II, ENRGY 3, H-Shield or Multi-Max FA3	M-OSFA	(Optional) additional layers(s) of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	M-OSFA	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-157.5
R-6	Existing asphaltic roof	Min. 2-inch ACFoam IV, min. 1.5-inch Ultra-Max or Multi-Max FA-3, min. 1.3-inch ACFoam III or min. 1.0-inch ISO 95+GL, H-Shield, H-Shield CG or ENRGY 3 or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	(Optional) additional layers(s) of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-240.0
R-7	Existing asphaltic roof	Min. 2-inch ACFoam II, ENRGY-3 or H-Shield or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	(Optional) additional layers(s) of base insulation and/or min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	SBS-SA	(Optional) One or more SBS-SA, SBS-TA or APP-TA	SBS-SA, APP-SA, SBS-TA or APP-TA	-247.5
R-8	Existing asphaltic roof	Min. 1.5-inch Multi-Max FA3	D-IS	Min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	D-IS	BP-AA, SBS-AA, SBS-TA, SBS-SA, APP-TA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-67.5
R-9	Existing asphaltic roof	Min. 1.5-inch ACFoam II or ENRGY 3 or min. 2.0 pcf EPS insulation board	D-IS	Min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	D-IS	BP-AA, SBS-AA, SBS-TA, SBS-SA, APP-TA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, or APP-TA	-90.0

**TABLE 7A: RECOVER APPLICATIONS  
SYSTEM TYPE A-1: BONDED INSULATION, BONDED ROOF COVER**

System No.	Substrate (See Notes 1 & 11)	Base Insulation Layer		Top Insulation Layer		Roof Cover			MDP (psf)
		Type	Attach	Type	Attach	Base	Ply	Cap	
R-10	Existing asphaltic roof	Min. 1.5-inch ACFoam II, ENRGY 3, H-Shield or ISO 95+GL	OB500	Min. 0.25-inch DensDeck, DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board	OB500	BP-AA, SBS-AA, SBS-TA, SBS-SA, APP-TA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, or APP-TA	-127.5
R-11	Existing asphaltic roof	Min. 1.5-Inch ACFoam II, ENRGY 3, H-Shield or Multi-Max FA3	M-OSFA	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	M-OSFA	BP-AA, SBS-AA, SBS-TA, SBS-SA, APP-TA	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, or APP-TA	-157.5
R-12	Existing asphaltic roof	Min. 2-inch ACFoam IV, min. 1.5-inch Ultra-Max or Multi-Max FA-3, min. 1.3-inch ACFoam III or min. 1.0-inch ISO 95+GL, H-Shield, H-Shield CG or ENRGY 3 or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	BP-AA, SBS-AA	(Optional) One or more BP-AA, SBS-AA	SBS-AA	-225.0
R-13	Existing asphaltic roof	Min. 2-inch ACFoam IV, min. 1.5-inch Ultra-Max or Multi-Max FA-3, min. 1.3-inch ACFoam III or min. 1.0-inch ISO 95+GL, H-Shield, H-Shield CG or ENRGY 3 or min. 2.0 pcf ASTM C578 expanded polystyrene	CR-20	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board	CR-20	APP-TA	(Optional) One or more APP-TA	APP-TA	-232.5

**TABLE 7B: RECOVER APPLICATIONS  
SYSTEM TYPE F: NON-INSULATED, BONDED BASE SHEET, BONDED ROOF COVER**

System No.	Substrate (See Notes 1 & 11)	Primer	Roof Cover			MDP (psf)
			Base	Ply	Cap	
R-14	Existing asphaltic roof	PG100	BP-AA (Optional if using asphalt applied Ply)	(Optional if using asphalt applied Base) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA	-45.0



EXTERIOR RESEARCH & DESIGN, LLC.  
*Certificate of Authorization #9503*  
 353 CHRISTIAN STREET, UNIT #13  
 OXFORD, CT 06478  
 PHONE: (203) 262-9245  
 FAX: (203) 262-9243

**EVALUATION REPORT**

**SDP, Inc.**  
**410-130 Bridgeland Avenue**  
**Toronto, Ontario M6A 1Z4**  
**Canada**

**Evaluation Report S19010.07.09-R1**  
**FL5325-R5**  
**Date of Issuance: 07/03/2009**  
**Revision 1: 04/22/2012**

**SCOPE:**

This Evaluation Report is issued under Rule 9N-3 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been designed to comply with the 2010 Florida Building Code sections noted herein.

**DESCRIPTION: PALISADE™ Roof Underlayments**

**LABELING:** Each unit shall bear labeling in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

**CONTINUED COMPLIANCE:** This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

**ADVERTISEMENT:** The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

**INSPECTION:** Upon request, a copy of this entire Evaluation Report 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 Evaluation Report consists of pages 1 through 6.

**Prepared by:**

**Robert J.M. Nieminen, P.E.**  
*Florida Registration No. 59166, Florida DCA ANE1983*



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 04/22/2012. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

**CERTIFICATION OF INDEPENDENCE:**

1. Trinity|ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Trinity|ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.



**ROOFING COMPONENT EVALUATION:**

**1. SCOPE:**

**Product Category:** Roofing  
**Sub-Category:** Underlayment

**Compliance Statement:** PALISADE™ Roof Underlayments, as produced by SDP, Inc., have demonstrated compliance with the intent of the following sections of the Florida Building Code through testing in accordance with the applicable sections of the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

**2. STANDARDS:**

Section	Property	Standard	Year
1507.2.3, 1507.3.3, 1507.5.3, 1507.7.3, 1507.8.3, 1507.9.3, 1507.9.5, 1518.4	Unrolling, Breaking Strength, Pliability, Loss on Heating	ASTM D226	2006
1507.3.3, 1518.4	Unrolling, Pliability, Behavior on Heating, Breaking Strength, Water Vapor Permeance	ASTM D2626	2004
1523.6.5.2.1	Dimensional Stability, Tear Resistance, Breaking Strength, Water Absorption, Low Temp Flex, UV Exposure, Accelerated Aging, Cyclic Elongation, Water Vapor Transmission	TAS 104	1995
1523.6.5.2.9	Comparative Rupture	TAS 117, Appendix B	1995
1507.2.4, 1507.5.3	Unrolling, Thickness, Max Load, Elongation at Break, Adhesion, Thermal Stability, Low Temp Flex, Tear Resistance, Moisture Vapor Permeance, Self-Sealability	ASTM D1970	2001
TAS 110	Accelerated Weathering	ASTM D4798	2001

**3. REFERENCES:**

Entity	Examination	Reference	Date
ERD (TST6049)	Physical Properties	S4240.10.06	10/03/2006
ERD (TST6049)	Physical Properties & Rupture	S0404C.12.05-R2	02/23/2009
ERD (TST6049)	Accelerated Weathering	S37000.06.11	06/14/2011
ICC-ES (EVL2396)	IBC Compliance	ESR-1847	03/01/2011
Miami-Dade (CER1592)	HVHZ Compliance	11-0714.05	11/10/2011
ITS-ETL/WH (QUA1673)	Quality Control	Inspection Report	04/10/2012

**4. PRODUCT DESCRIPTION:**

**4.1 Mechanically Fastened Underlayments:**

4.1.1 PALISADE™ is a synthetic roofing underlayment comprised of a polyolefin-coated, woven construction with dual skid resistant surfaces. PALISADE™ is acceptable for use in non-HVHZ and HVHZ jurisdictions. Refer to Limits of Use herein.

**4.2 Self-Adhering Underlayments:**

4.2.1 PALISADE™ SA-HT is a self-adhering roofing underlayment comprised of a polyolefin-coated, woven construction with skid resistant upper surface and self-adhering bottom surface. PALISADE™ SA-HT is not for use in HVHZ. Refer to Limits of Use herein.



**5. LIMITATIONS:**

**5.1 For Non-HVHZ Jurisdictions:**

5.1.1 Fire Classification is not part of this report; refer to current Approved Roofing Materials Directory for fire ratings of this product.

5.1.2 PALISADE™ Roof Underlayments may be used with any prepared roof cover where the product is specifically referenced within FBC approval documents. If not listed, a request may be made to the AHJ for approval based on this evaluation combined with supporting data for the prepared roof covering.

5.1.3 Allowable roof covers applied atop the underlayments are follows:

Table 1: Roof Cover Options						
Underlayment	Asphalt Shingles	Nail-On Tile	Foam-On Tile	Metal	Wood Shakes & Shingles	Slate
PALISADE™	Yes	Yes	Yes (as base layer only)	Yes	Yes	Yes
PALISADE™ SA-HT	Yes	No	No	Yes	Yes	Yes

5.1.4 Allowable Substrates:

5.1.4.1 PALISADE™ SA-HT adhered to plywood or mechanically attached PALISADE™.

5.1.5 Exposure Limitations:

5.1.5.1 PALISADE™ shall not be left exposed for longer than 180-days after installation.

5.1.5.2 PALISADE™ SA-HT shall not be left exposed for longer than 30-days after installation

5.1.6 For tile roof installations governed by the FRSA/TRI 07320/8-05 Installation Manual, Fourth Edition, use is limited to the following:

Table 2: Tile System Options for SDP Roof Underlayments per FRSA/TRI 07320/8-05				
System	Underlay Option	Section	Reference	SDP Product(s)
<u>System One:</u> Mechanically Fastened Tile, Unsealed or Sealed Underlayment System	1	3.02A	No. 43	PALISADE™
	4	3.02D	No. 30 or No. 43	PALISADE™
	6	3.02F	No. 30	PALISADE™ (See Section 5.1.6.1)
<u>System Two:</u> Mechanically Fastened Tile, Sealed Underlayment System	5	3.02E	No. 30	PALISADE™ (See Section 5.1.6.1)
<u>System Four "A":</u> Adhesive-Set Tile, Unsealed or Sealed Underlayment System	5	3.02E	No. 30	PALISADE™ (See Section 5.1.6.2)
<u>System Four "B":</u> Adhesive-Set Tile, Sealed Underlayment System	4	3.02D	No. 30	PALISADE™ (See Section 5.1.6.2)

5.1.6.1 For System One, Option 6 and System Two, Option 5, approved underlayment systems are as follows:

- > PALISADE™ attached to deck per FRSA/TRI 07320/8-05 requirements followed by cap layer of Tamko TW Metal and Tile Underlayment, GAF UnderRoof 2 Tile Underlayment or CertainTeed Flintlastic SA Cap.



- 5.1.6.2 For System 4A, Option 5 and System 4B, Option 4, approved underlayment systems are as follows:
- PALISADE™ attached to deck per FRSA/TRI 07320/8-05 requirements followed by cap layer of GAF UnderRoof 2 Tile Underlayment or CertainTeed Flintlastic SA Cap.

**5.2 For HVHZ Jurisdictions:**

- 5.2.1 PALISADE™ SA-HT is not for use in HVHZ.
- 5.2.2 Fire Classification is not part of this Laboratory Report; refer to current Approved Roofing Materials Directory for fire ratings of this product.
- 5.2.3 This Evaluation is for prepared roofing applications. Minimum deck requirements shall be compliant with applicable FBC sections.
- 5.2.4 PALISADE™ shall not be applied in hot asphalt.
- 5.2.5 PALISADE™ shall be installed in strict compliance with the requirements for ASTM D226, Type II or ASTM D2626 underlayment in Section 1518 for the type of prepared roof covering to be installed.
- 5.2.6 PALISADE™ may be used with asphalt shingles, tile roofs (See 5.2.6.1), non-structural metal roofing / metal shingles, quarry slate, slate-type shingles and wood shakes & shingles.
- 5.2.6.1 For tile roof applications, PALISADE™ shall be mechanically attached as an anchor sheet in accordance with RAS 118, RAS 119 or RAS 120 and Section 6 herein, followed by Tamko TW Metal and Tile Underlayment.
- 5.2.6.2 The above noted cap underlayment membrane (Tamko TW Metal and Tile Underlayment) shall hold HVHZ Product Approval and/or Miami-Dade NOA as an underlayment for use in tile roof systems.
- 5.2.7 If PALISADE™ is not specifically listed in the prepared roof covering NOA, this report may be submitted to the AHJ or Miami-Dade Product Control Dept., along with fire classification information, for their consideration.
- 5.2.8 PALISADE™ underlayment shall not be left exposed for longer than 180-days after installation.
- 5.3 All products listed herein shall have quality assurance audit in accordance with F.A.C. Rule 9N-3 requirements.

**6. INSTALLATION:**

- 6.1 PALISADE™ Roof Underlayments shall be installed in accordance with SDP published installation requirements subject to the Limitations set forth in Section 5 herein and the specifics noted below.
- 6.2 Re-fasten any loose decking panels, and check for protruding nail heads. Sweep the substrate thoroughly to remove any dust and debris prior to application, and prime the substrate with Elastocol Stick.
- 6.3 **For Non-HVHZ Jurisdictions:**
- 6.3.1 **PALISADE™:**
- 6.3.1.1 Shall be installed in compliance with the requirements for ASTM D226, Type I or II or ASTM D2626 underlayment in FBC Sections 1507 for the type of prepared roof covering to be installed.
- 6.3.1.2 For non-tile applications:



PALISADE™ is installed horizontally with the printed side up, and with 3-inch horizontal laps and 6-inch vertical laps. Overlaps must run with the flow of the water in a shingle pattern. The underlayment is only attached to the roof deck with roofing nails (smooth or ring-shanked) having 1-inch minimum diameter plastic or steel caps compliant with FBC 1507.2.6. Cap nails are spaced at 6 inches on center at vertical laps, and at 11 inches on center at horizontal laps. In the field area, apply fasteners at 13 inches spaced vertically and 22 inches on center horizontally. All caps (including nails) must be fully flush with the underlayment surface. Do not install fasteners over unsupported areas/voids. Repair all tears, holes, or damage to the underlayment. For slopes less than 4:12, use a full 20" half lap over the underlying course. Apply underlayment up all abutments at least 6 inches.

In non-HVHZ high wind regions where  $V_{ult} > 181$  mph ( $V_{osd} > 140$  mph) or exposure beyond 30 days, increase the fastener density to cap nails spaced 3 inches on center at vertical laps, and at 5.5 inches on center at horizontal laps. In the field area, apply fasteners at 6.5 inches spaced vertically and 11 inches on center horizontally. In addition, secure laps by folding all laps over before nailing, or taping securely across lap seams using exterior grade sheathing tape, or sealants such as roofing cement (asbestos free meeting ASTM D4586), EPDM or butyl to seal laps.

6.3.1.3 For tile applications:

Fastening of PALISADE™ in tile applications per Table 2 herein should be proportionate to that outlined in FRSA/TRI 07320/8-05 Installation Manual, Fourth Edition, taking into account the wider sheet width. Tile shall be loaded and staged in a manner that prevents tile slippage and/or damage to the underlayment.

6.3.2 PALISADE SA-HT™:

6.3.2.1 Shall be installed in compliance with the requirements for ASTM D1970 underlayment in FBC Sections 1507 for the type of prepared roof covering to be installed.

6.3.2.2 The installer is responsible to determine whether priming is required to ensure PALISADE™ SA-HT will stay adhered to the substrate.

6.3.2.3 For non-tile applications:

PALISADE SA-HT™ is installed horizontally with the printed side up, and with 3-inch horizontal laps and 6-inch vertical laps. Starting at the low point, and with salvage edge at the high point, position horizontally a full roll or cut the membrane into 10–15 ft. (3–5m) lengths and re-roll loosely. Peel back 1–2 ft. (300–600mm) of release film, align the membrane, and continue to peel the release film from the membrane. Press the membrane in place with heavy hand pressure. Apply uniform pressure to the membrane roll side and end laps to insure water tightness and bonding to the substrate.

Always work from the low to the high point of the roof. Follow good roofing practice by orientating PALISADE-SA-HT™ so side laps shed water. Apply the membrane in valleys before the membrane is applied to the eaves. For valley and ridge application, peel the release film; center the sheet over the valley or ridge, drape, and press into in place. Work the center of the valley or ridge outward in each direction. Following placement along the eaves, continue application of the membrane up slope. If nailing of the membrane is necessary on steep slopes, especially during hot or cold weather, back nail and cover the nails by overlapping with the next sheet.



**6.4 For HVHZ Jurisdictions:**

**6.4.1. Approved Assemblies:**

- 6.4.1.1 System E(1):** Underlayment mechanically fastened to deck  
Deck Type 1: Wood, Non-Insulated  
Deck Description: Min. 19/32" plywood or wood plank  
Underlayment: One or more plies of PALISADE™ with minimum 4" wide head laps and minimum 6" wide end laps, mechanically fastened to deck.  
Fastening: HVHZ Approved nails and tin caps 6" o.c. at lap and three equally spaced staggered rows 12" o.c. in the field.  
Surfacing: HVHZ Approved asphalt shingle, non-structural metal, wood shakes & shingles or slate.
- 6.4.1.2 System E(2):** Base underlayment mechanically fastened to deck, top layer adhered  
Deck Type 1: Wood, Non-Insulated  
Deck Description: Min. 19/32" plywood or wood plank  
Base Layer: One or more plies of PALISADE™ with minimum 4" wide head laps and minimum 6" wide end laps, mechanically fastened to deck.  
Fastening: HVHZ Approved nails and tin caps 6" o.c. at lap and three equally spaced staggered rows 12" o.c. in the field.  
Top Layer: Tamko TW Metal and Tile Underlayment, self-adhered to the base layer with minimum 3" head laps and minimum 6" staggered end laps.  
Surfacing: HVHZ Approved asphalt shingle, non-structural metal, wood shakes & shingles, slate or tile.  
Note: For tile applications, AHJ shall verify that top layer underlayments listed herein hold current HVHZ Product Approval and/or Miami-Dade NOA for use as a tile underlayment.

**7. LABELING:**

Each unit shall bear a permanent label with the manufacturer's name, logo, city, state and logo of the Accredited Quality Assurance Agency noted herein.

**8. BUILDING PERMIT REQUIREMENTS:**

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

**9. MANUFACTURING PLANTS:**

Contact the manufacturer or the named QA entity for information on plants covered under Rule 9N-3 QA requirements.

**10. QUALITY ASSURANCE ENTITY:**

Intertek Testing Services NA Inc. - ETL/Warnock Hersey - QUA1673  
(905) 678-4913

**- END OF EVALUATION REPORT -**

## Evaluation Report "5V Crimp" Metal Roof Assembly

**Manufacturer:**  
Sunlast Metal, Inc.  
2120 SW Poma Drive  
Palm City, FL 34990  
(772) 223-4055

*for*

**Florida Product Approval  
# FL 10490.6 R3  
Florida Building Code 2010  
Per Rule 9N-3**

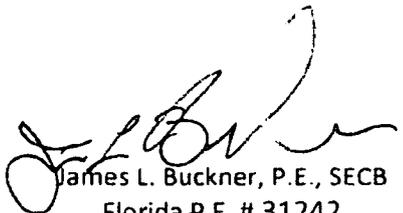
**Method: 1 - D  
Category: Roofing  
Sub - Category: Metal Roofing**

**Product: "5V Crimp" Roof Panel  
Material: Steel  
Panel Thickness: 26 gauge  
Panel Width: 24"  
Support: Wood Deck**

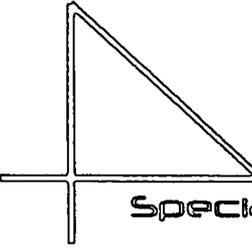
**Prepared by:**  
James L. Buckner, P.E., S.E.C.B.  
Florida Professional Engineer # 31242  
Florida Evaluation ANE ID: 1916  
Project Manager: Diana Galloway  
Report No. 12-139-5V-S6W-ER  
Date: 4 / 16 / 12

Contents:  
Evaluation Report                      Pages 1 - 7

**CBUCK, Inc.**  
1399 N. Killian Drive, Suite 4, West Palm Beach, Florida 33403  
Phone: (561)491-9927 Fax: (561)491-9928 Website: www.cbuckinc.net



James L. Buckner, P.E., SECB  
Florida P.E. # 31242  
4/19/12



# CBUCK Engineering

Specialty Structural Engineering

CBUCK, Inc. Certificate of Authorization #8064

**Manufacturer:** Sunlast Metal, Inc.

**Product Name:** "5V Crimp"

**Product Category:** Roofing

**Product Sub-Category:** Metal Roofing

**Compliance Method:** State Product Approval Rule 9N-3.005 (1) (d)

**Product/System Description:** "5V Crimp"  
26 gauge Steel roof panel mechanically attached to Plywood Deck with screws.

**Product Assembly as Evaluated:** Refer to Page 4 of this report for product assembly components/materials & standards:

1. Roof Panel
2. Fasteners
3. Underlayment

**Support:** **Type:**  
Wood Deck  
(Design of support and its attachment to support framing is outside the scope of this evaluation.)

**Description:**

- 15/32 (min.) or greater plywood,
- or Wood plank (min. specific gravity of 0.42)

**Slope:** Minimum slope shall be in accordance with manufacturer's recommendations, FBC Section 1507.4.2 and applicable code sections.

**Performance:** Wind Uplift Resistance:

- Design Uplift Pressure: **METHOD 1: - 50.5 PSF**  
(Refer to "Table A" attachment details herein) **METHOD 2: - 106.75 PSF**

- Performance Standards:** The product described herein has demonstrated compliance with:
- UL580-06 – *Test for Uplift Resistance of Roof Assemblies*
  - UL 1897-04 – *Uplift test for roof covering systems*
  - TAS 125-03 – *Standard Requirements for Metal Roofing Systems*
- Standards Equivalency:** The UL 580-94 & UL 1897-98 standard version used to test the evaluated product assembly is equivalent with the prescribed standards in UL 580-06 & UL 1897-04 adopted by the Florida Building Code 2010.
- Code Compliance:** The product described herein has demonstrated compliance with Florida Building Code 2010, Section 1504.3.2.
- Evaluation Report Scope:** This product evaluation is limited to compliance with the structural requirements of the Florida Building Code, as related to the scope section to Florida Product Approval Rule 9N-3.001.
- Limitations and Conditions of Use:**
- Scope of "Limitations and Conditions of Use" for this evaluation:  
This evaluation report for "Optional Statewide Approval" contains technical documentation, specifications and installation method(s) which include "Limitations and Conditions of Use" throughout the report in accordance with Rule 9N-3.005. Per Rule 9N-3.004, the Florida Building Commission is the authority to approve products under "Optional Statewide Approval".
  - Option for application outside "Limitations and Conditions of Use"  
Rule 9N-3.005(1)(e) allows engineering analysis for "project specific approval by the local authorities having jurisdiction in accordance with the alternate methods and materials authorized in the Code". Any modification of the product as evaluated in this report and approved by the Florida Building Commission is outside the scope of this evaluation and will be the responsibility of others.
  - Design of support system is outside the scope of this report.
  - Fire Classification is outside the scope of Rule 9N-3, and is therefore not included in this evaluation.
  - This evaluation report does not evaluate the use of this product for use in the High Velocity Hurricane Zone code section. (Dade & Broward Counties)
- Quality Assurance:** The manufacturer has demonstrated compliance of roof panel products in accordance with the Florida Building Code and Rule 9N-3.0005 (3) for manufacturing under a quality assurance program audited by an approved quality assurance entity through **Keystone Certifications, Inc.** (FBC Organization #: QUA 1824).

**Components/Materials  
(by Manufacturer):**

**Roof Panel:** "5V Crimp"  
**Material:** Steel  
**Thickness:** 26 gauge (min.)  
**Panel Width:** 24" (max.) Coverage  
**Rib Height:** 1/2"  
**Yield Strength:** 40 ksi min.  
**Corrosion Resistance:** In compliance with FBC Section 1507.4.3:  

- ASTM A792 coated, or
- ASTM A653 G90 galvanized steel

**Fastener:**  
**Type:** Hex-Head Wood Screw with WSW  
**Size :** #10 x 1-1/2" "  
**Corrosion Resistance:** Per FBC Section 1506.6 and 1507.4.4  
**Standard:** Per ANSI/ASME B18.6.4

**Underlayment:**  
Per roofing manufacturer's guidelines in compliance with FBC Section 1507.4.5

**Insulation (Optional):**  
**Type:** Rigid Insulation Board  
**Thickness:** 3" (max.)  
**Properties:**  
**Density:** 2.25 pcf (lbs/ft<sup>3</sup>) min.  
**Or Compressive Strength:** 20 psi min.

Insulation shall comply with FBC Section 1508. When insulation is incorporated, fastener length shall conform to penetrate thru bottom of support a minimum of 3/16".

**Installation:**

**Installation Method:**

(Refer to drawings on Pages 6-7 of this report.)

- Row spacing: **Refer to Table "A"**  
(along the length of the panel)
- Fastener spacing: Nominal pattern of **12" o.c.**  
(along the row, across the panel profile & at the top of corrugation peaks)
- Rib Interlock: Lapped
- Minimum fastener penetration thru bottom of support, **3/16"**.
- For panel construction at the end of panels, refer to manufacturer's instructions and any site specific design.

<b>TABLE "A"</b>		
	<b>METHOD 1:</b>	<b>METHOD 2:</b>
<b>Design Pressure:</b>	<b>- 50.5 PSF</b>	<b>- 106.75 PSF</b>
<b>Row Spacing:</b>	<b>16"</b>	<b>8"</b>
<b>Fastener Spacing:</b>	<b>12"</b>	<b>12"</b>

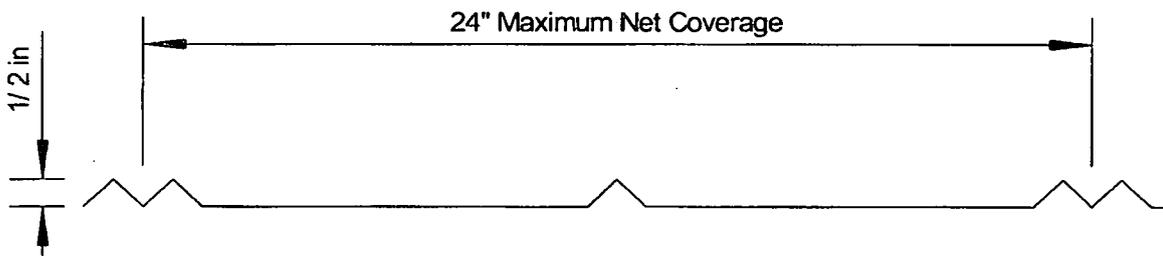
Install the "5V Crimp" roof panel assembly in compliance with the installation method listed in this report and applicable code sections of FBC 2010. The installation method described herein is in accordance with the scope of this evaluation report. Refer to manufacturer's installation instructions as a supplemental guide for attachment.

**Referenced Data:**

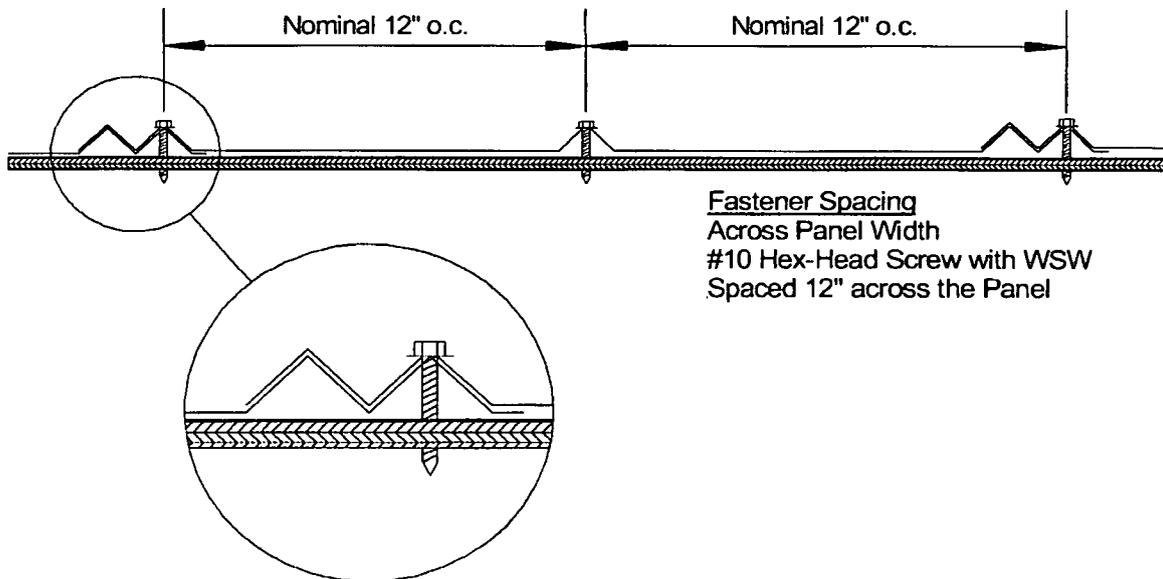
1. TAS 125-03 Uplift Test  
Hurricane Test Laboratory, LLC (FBC Organization #TST ID: 1527)  
Report #: 0412-1017-05, Report Date: 02/22/06
2. Quality Assurance  
By Keystone Certifications, Inc. (QUA ID: 1824)  
Sunlast Metal & Solar, Inc. Licensee # 385
3. Engineering Analysis  
By CBUGK Engineering
4. Equivalency of Test Standard Certification  
By James L. Buckner, P.E. @ CBUGK Engineering  
(FBC Organization # ANE 1916)
5. Certification of Independence  
By James L. Buckner, P.E. @ CBUGK Engineering  
(FBC Organization # ANE 1916)

**Installation Method**  
**Sunlast Metal, Inc.**  
**"5V Crimp" (26 Gauge) Roof Panel Attached to Wood Deck**

**Profile Drawings**

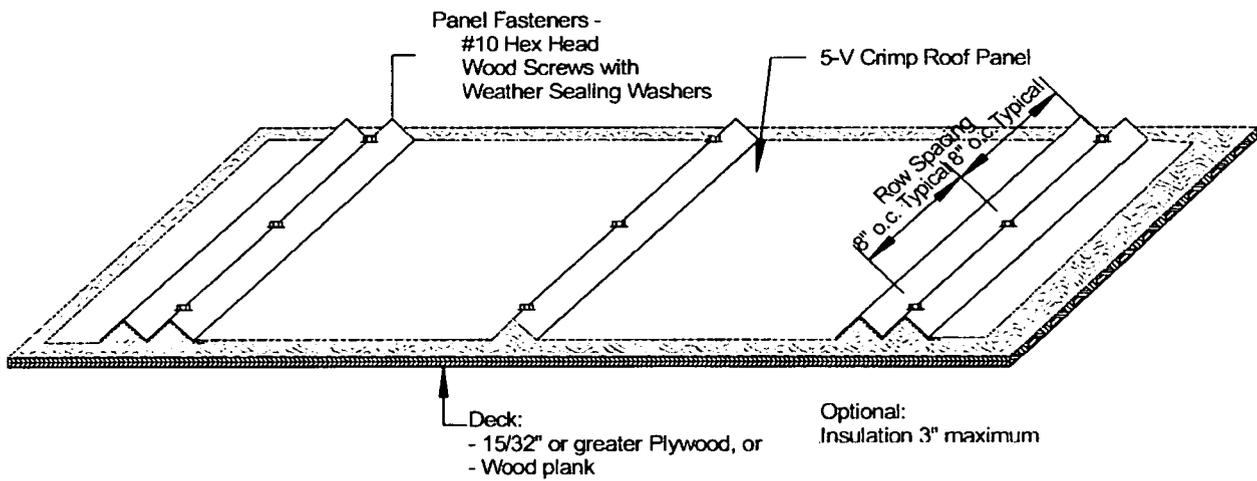


**"5V Crimp" Panel**  
**Typical Panel Profile View**



**Assembly Profile View**  
**Typical Fastening Pattern Across Row**

## Installation Method Sunlast Metal, Inc. "5V Crimp" (24 Gauge) Roof Panel Attached to Wood Deck



**Typical Assembly Isometric View**

TABLE "A"		
	METHOD 1:	METHOD 2:
<b>Design Pressure:</b>	- 50.5 PSF	- 106.75 PSF
Row Spacing:	16"	8"
Fastener Spacing:	12"	12"



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

RE-ROOF CERTIFICATION

PERMIT # \_\_\_\_\_  
 CONTRACTOR'S NAME: DAN BUTCHER ROOFING PHONE #: 772-221-3252 FAX: \_\_\_\_\_

OWNER'S NAME: Richard Cook  
 CONSTRUCTION ADDRESS: 22 N Ridgeview RD CITY Sewalls Pt STATE FL

RE-ROOF:  RESIDENTIAL(SINGLE FAMILY)  
 COMMERCIAL \*\*--REMOVE/REINSTALL ROOF TOP HVAC EQUIP  YES  NO

\*\*...DISCONNECT/RECONNECT HVAC ELECTRIC  YES  NO  
 \*\* REQUIRES A CONTRACTOR VERIFICATION FORM (HVAC AND/OR ELECTRICAL) W/ PERMIT APPLICATION

RE-ROOF DEEMED TO COMPLY WITH 553.844 F. S.  YES  NO - INSURED VALUE OF RESIDENCE: \$ \_\_\_\_\_

ROOF TYPE:  HIP  BOSTON-HIP  GABLE  FLAT  OTHER

ROOF PITCH: 5 /12 SLOPE

ROOF DECK: \*  SHEATH-OVER - (APPLYING PLYWOOD PANELS OVER EXISTING SPACED  
 RE-SHEATH - (REMOVAL OF SPACED SHEATHING/PLYWOOD FOR APPLICATION OF NEW PLYWOOD PANELS) - REQUIRES USE OF MINIMUM PLYWOOD AS PER FLORIDA BUILDING CODE "2004".  
 SPACED SHEATH FILL-IN - SPACES BETWEEN EXISTING SPACED-SHEATHING BOARD MAY BE FILLED-IN WITH BOARDS OF THE SAME SIZE AND THICKNESS TO PROVIDE A CLOSELY FITTED SOLID DECK NAIL NEW BOARDS AS PER FLORIDA BUILDING CODE "2004".  
 EXISTING DECK TO REMAIN/REPAIRED& RENAILED

EXISTING ROOF COVERING: Tile EXISTING COVERING TO BE REMOVED? YES  NO

PROPOSED NEW ROOF COVERING: 24 GAUGE M/F 5-V Crimp Metal

MANUFACTURER Senlast PRODUCT NAME 5-V PRODUCT APPR # FL-10490.623

(APPROVED ROOF COVERING MATERIAL WITH CURRENT FLORIDA PRODUCT APPROVAL)  
 MANUFACTURER'S INSTALLATION SPECS MUST BE ON THE JOB SITE AT TIME OF INSPECTION.

\*WHEN CONCRETE/CLAY TILES REPLACE ANY OTHER TYPE OF ROOF COVERING, THE EXISTING TRUSSES SHALL BE INSPECTED BY A FLORIDA REGISTERED ARCHITECT OR ENGINEER TO VERIFY ADEQUACY OF THE TRUSSES TO SUPPORT INCREASED DEAD LOADS. AN ENGINEERING INSPECTION REPORT SHALL BE SUBMITTED WITH THE PERMIT APPLICATION.

PROPOSED FLASHING:  GALV./STEEL  ALUMINUM  COPPER  OTHER \_\_\_\_\_

RIDGEVENT TO BE INSTALLED:  YES  NO

DESCRIPTION OF WORK: Remove Tile -- re-nail -- Apply 5-V Re roof  
Flat roof with Polyglass System

I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

[Signature] DATE: 4/20/2014  
 SIGNATURE OF CONTRACTOR



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

*Am A  
FWP*

RE: Permit # 10836

Date 4/21/2014

**Inspection Affidavit**

I DAN BUTCHER, licensed as a(n) Contractor\* /Engineer/Architect,  
 (please print name and circle Lic. Type) FS 468 Building Inspector\*

License #; CCC 1326250

On or about \_\_\_\_\_, I did personally inspect the roof  
 (Date & time)

deck-nailing and/or secondary water barrier work at 22 IV  
 (circle one) (Job Site Address)

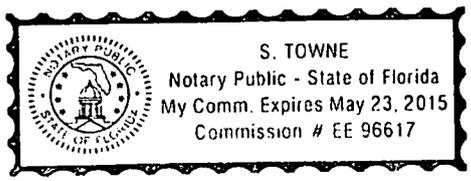
Ridgeview Dr In Sewalls Point

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

[Signature]  
 Signature

STATE OF FLORIDA  
 COUNTY OF MARTIN  
 Sworn to and subscribed before me this 21st day of April, 2014

By Dan Butcher  
 Notary Public, State of Florida



[Signature]  
 (Print, type or stamp name)

Commission No.: 96617

Personally known \_\_\_\_\_ or  
 Produced Identification   
 Type of identification produced. FL Drivers License

\* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection. Include photographs of each plane of the roof with the permit # or address # clearly shown marked on the deck for each inspection.

# TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri 4/25 - 14 Page      of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10:00	11 OAKWOOD	SW LEAK RIVER # OAKWOOD	RE: PROZ SCREEN ✓ MIAMI E	INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
<del>10-836</del>	<del>COOK</del>	<del>ROOF</del>		
	22 N. RIDGEVIEW DAN BUTCHER ROW	<del>STRUCTURAL</del>	PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10658	EKSTROM 23 N. RIDGEVIEW WILSON M/D/R	<del>ROOF</del> ROOF ELECTRICAL	PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri **4/30** - **14** Page **14** of **14**

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10710	Darrow 6 Oak Hill Way JMC	Stem Wall REPAIR	PASS	260-8525  INSPECTOR <i>[Signature]</i>
10832	KLOSE 2 BAKU ST HEYTON ROOFING	ROOF FINAL	PICTURES PASS	CLOSE  INSPECTOR <i>[Signature]</i>
10797	CARUSO 24 S. Sewalls Pt Rd A GREAT FENCE	FENCE FINAL	PASS	CLOSE  INSPECTOR <i>[Signature]</i>
<del>10835</del>	<del>COOK 22 N. RIDGEVIEW</del>	<del>ROOF FIN</del> <del>PROGRESS</del>	<del>PASS</del>	<del>INSPECTOR <i>[Signature]</i></del>
10674	MORAN 2 Palm Rd BROWNIE & COMP.	PRE-PAYMENT REQUEST INSPECTION	OK FOR PAYMENT	INSPECTOR
10800	MILICI 14 E. HIGH PT S. HOLMES	DEMO FUEL TANK	PASS	INSPECTOR <i>[Signature]</i>
				INSPECTOR

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri 5:10 - 14 Page \_\_\_\_ of \_\_\_\_

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
108536	COOK	ROOF FINISH		
	22 N. RIDGVIEW RD		Pass	CLOSE
	DAN BUTCHER ROOFING			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

# TREE PERMITS

TOWN OF SEWALL'S POINT, FLORIDA

Date APRIL 19 ~~19~~ 2004 TREE REMOVAL PERMIT No 2240

APPLIED FOR BY COOK (Contractor or Owner)

Owner 22 N. RIDGEVIEW ROAD

Sub-division \_\_\_\_\_, Lot \_\_\_\_\_, Block \_\_\_\_\_

Kind of Trees \_\_\_\_\_

No. Of Trees: REMOVE 1 SILK OAK

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

No. Of Trees: REPLACE \_\_\_\_\_ WITHIN 30 DAYS

REMARKS Dead

FEE \$ 0

Signed, \_\_\_\_\_ Applicant

Signed [Signature]  
Town Clerk  
Building Official

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

TOWN OF SEWALL'S POINT

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Large empty rectangular box for drawing or site plan]

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 RICHARD C COOK Address 23 N RIDGEVIEW RD Phone 283-2731

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

No. of Trees: REMOVE 1 Type: SICK OAK

No. of Trees: RELOCATE \_\_\_\_\_ WITHIN 30 DAYS Type: \_\_\_\_\_

No. of Trees: REPLACE \_\_\_\_\_ WITHIN 30 DAYS Type: \_\_\_\_\_

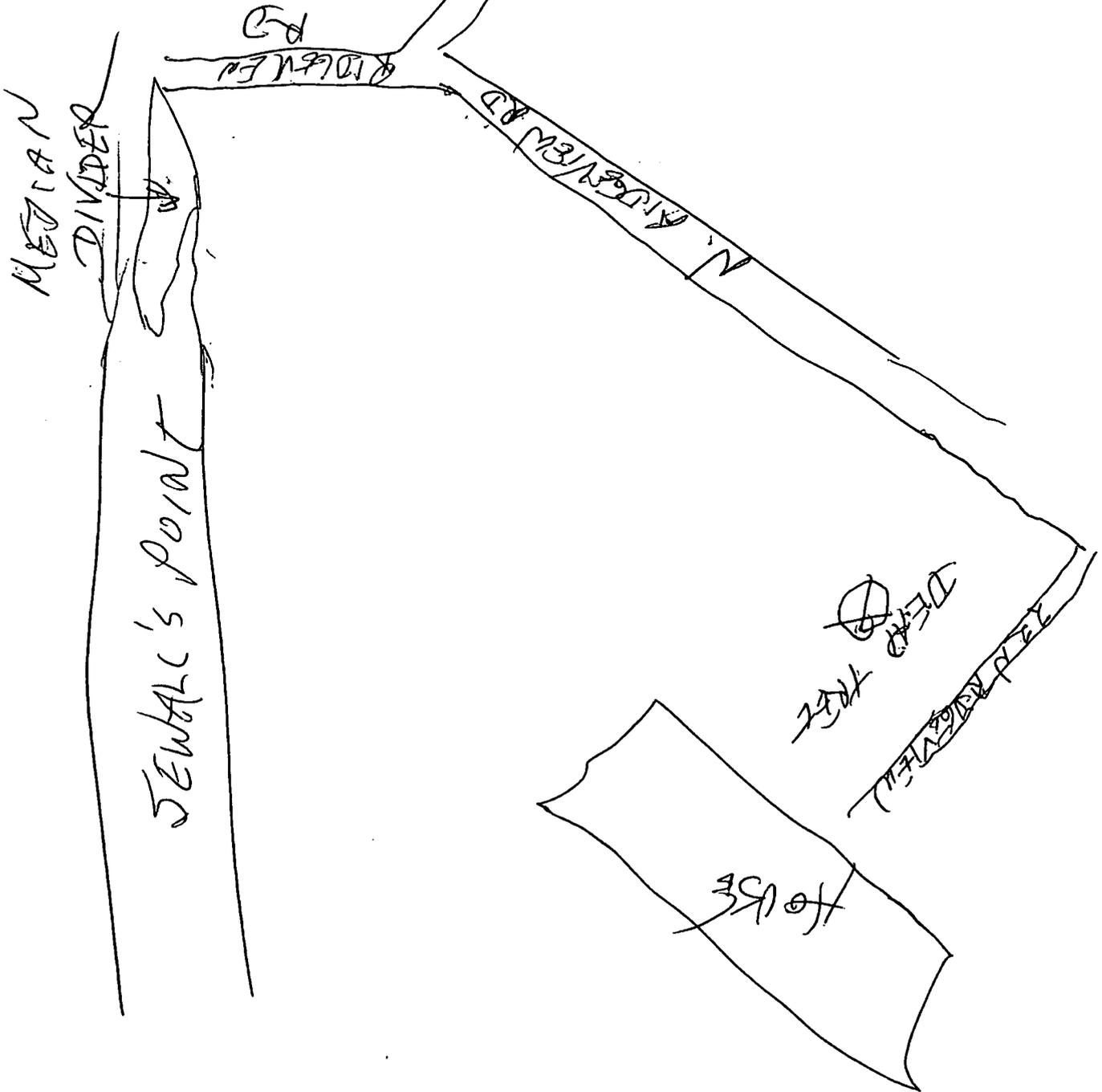
Written statement giving reasons: DEAD

Signature of Applicant [Signature] Date 4/16/04

Approved by Building Inspector: [Signature] Date 4/19 Fee: 0

Plans approved as submitted \_\_\_\_\_ Plans approved as revised/marked: \_\_\_\_\_

South



# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 4/19, 2004 Page 1 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6391	WHITWELL	ROUGH PLUMBING	PASS	BATH DUCT TO OUTSIDE
6	1 MARGUERITA	ROUGH A/C	PASS	
	HEMMINGWAY HOMES	FRAMING	FAIL	INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6073	FALCO	ELEC ROUGH	PASS	
5	15 N. RIVER RD	PLUMBING RGH		
	DENNIS PROCTOR			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6518	GUSTAFSON	2ND FL PORCH FINAL	PASS	NO ONE HOME (CLOSE)
2	17 PALM ROAD			NO PERMIT POSTED
	O/B			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6571	GUSTAFSON	FLAT ROOF FINAL	PASS	(CLOSE)
2	17 PALM ROAD			
	ALL AMERICAN ROOFING			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6646	RONIN	SHEATHING	---	WILL RESCHEDULE.
4	14 COPAIRE ROAD			
	CARDINAL ROOFING			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<del>6653</del>	<del>COOK</del>	<del>TRUSS</del>	PASS	
3	22 N. RIDGEVIEW			
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6232	MOORE	FRAMING	FAIL	
7	5 OAK HILL WAY	LATH	FAIL	
	AR HOMES			INSPECTOR: <i>[Signature]</i>

**OTHER:**

CHECK SILT SCREEN ON LOT ON S. SEWALLS ACROSS FROM COPIERS