

25 N Ridgeview Road

3887

Tax Folio No. _____

TOWN OF SEWALL'S POINT, FLORIDA

BUILDING PERMIT APPLICATION

Owner's Name DENNIS & PAMELA RYAN

Owner's Address 4680 N.E. SANDPEBBLE TR. STUART, FL 34996

Owner's Telephone 407.225.3518

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

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

City _____ State _____ Zip _____

Contractor's Name COMMERCIAL CONSTRUCTION DIVISION, INC.

Contractor's Address 833 E. 5TH ST.

City STUART State FL Zip 34994

Contractor's Telephone 407.220.3488 License Number CBC 052954

Job Name RESIDENCE FOR DENNIS & PAMELA RYAN

Job Address #24 NORTH RIDGEVIEW SEWALL'S PT., FL 34996

City 25 Town of Sewall's Point State Florida Zip 34996

Legal Description _____

Bonding Company _____

Bonding Company Address _____

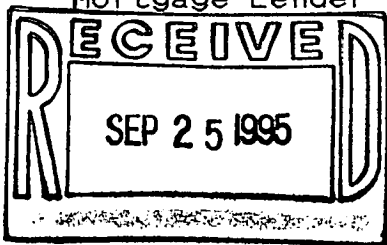
City _____ State _____

Architect/Engineer's Name JOSEPH P. McCLARY

Architect/Engineer's Address 900 E. OSCEOLA ST. STUART, FL.

Mortgage Lender's Name SUN TRUST

Mortgage Lender's Address 111 E. OSCEOLA ST. STUART, FL.



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

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

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

Plumbing Contractor TROPIC PLUMBING License No. CFC 032565
Electrical Contractor GRIFFIN EVLET. License No. ME 00229
Roofing Contractor PACIFIC ROOFING License No. CCC 056793
A/C Contractor CTR A/C License No. CAC 049289
Description of Building or Alterations NEW HOUSE

Name of Street Designated as Front Building Line and Front Yard

RIDGEVIEW
Subdivision HOMWOOD Lot #4 Block e

Building Area (air conditioned) 2710 sq. ft.

Garage, Porch, Carport Area 460 sq. ft.

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

\$ 240,000⁰⁰

2710
460
2
3170

[Signature] DATE 9/14/95
(Owner or Authorized Agent)

Sworn and Subscribed before me this
_____ day of _____ 199__ (SEAL)

NOTARY PUBLIC
State of Florida at Large
My Commission Expires:
[Signature]
(Contractor)

DATE _____

Sworn and Subscribed before me this
_____ day of _____ 199__ (SEAL)

NOTARY PUBLIC
State of Florida at Large
My Commission Expires:

Certificate of Competency Holder

Contractor's State Certification or Registration No. CBC 052954

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY [Signature] Permit Officer
[Signature]

For Official Use Only

Plans approved as submitted _____ Date _____

Plans approved as marked ✓ Date 9/25/95

A/C Area 2710 sq. ft. x \$60. = \$ 162,600⁰⁰

Non A/C Area 460 sq. ft. x \$25. = \$ 11,500⁰⁰

Total = \$ 174,100

Contract Price \$ 240,000⁰⁰ (fee will be charged on higher amount)

240,000 M. x \$8.00 = \$ 1,920.00 Building Fee
 25% Owner/Builder Fee \$ N/A (if applicable)
 A/C Fee \$ 100.00
 Electrical Fee \$ 100.00
 Plumbing Fee \$ 100.00
 Roofing Fee \$ 100.00
 Radon Fee \$ 31.70
 County Impact Fee \$ 1508.20
 TOTAL PERMIT FEE \$ 3859.90

PAYMENT RECEIVED _____
 Signature Date

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

Name:

RETURN TO: 16524 R
CHICAGO TITLE INS. CO.
555 Colorado Ave., Suite 4
Stuart, Florida 34994

Address:

This Instrument Prepared by: R. L. Woodams
CHICAGO TITLE INSURANCE COMPANY
Address: 555 Colorado Avenue, Suite 4
Stuart, FL 34994

Property Appraisers Parcel Identification (Folio Number(s)):
01-38-41-006-003-00030-4
Grantee(s) S.S. #s)

Continental Paper & Printing Co., Inc., 1987

WARRANTY DEED
INDIVID. TO INDIVID.

MARSHA STILLER
CLERK OF CIRCUIT COURT
MARTIN CO., FL

RECORDED & VERIFIED
BY
D.C.

01033627

595.00 93 DEC -7 AM 11:08

BOOK DEED # MARSHA STILLER
BOOK # MARTIN COUNTY
BOOK # CLERK OF CIRCUIT COURT

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Warranty Deed, Made the 6th day of December, 1993, by
WILLIAM D. CONNOLLY AND CORNELIA J. CONNOLLY, his wife,
hereinafter called the Grantor, to DENNIS J. RYAN AND PAMELA C. RYAN, his wife
whose post office address is 4680 Sandpebble Trace, Stuart, FL 34996
hereinafter called the Grantee.

(Wherever used herein the terms "Grantor" and "Grantee" include all the parties to this instrument and the heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

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

Lot 4, Block C, AMENDED PLAT OF HOMEWOOD, Sewalls Point, Martin County, Florida,
on file and of record in the office of the Clerk of the Circuit Court in and for
Martin County, Florida, in Plat Book 3, page 35.

Together, with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.
To Have and to Hold, the same in fee simple forever.

And the Grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple;
that the grantor has good right and lawful authority to sell and convey said land, and hereby warrants the title to said
land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all
encumbrances, except taxes accruing subsequent to December 31, 1993.

In Witness Whereof, the said Grantor has signed and sealed these presents the day and year first above
written.

Signed, sealed and delivered in the presence of:

[Signature]
Witness Signature (as to first Grantor)

Douglas K. Sands
Printed Name

Renee L. Woodams
Witness Signature (as to first Grantor)

Renee L. Woodams
Printed Name

[Signature]
Witness Signature (as to Co-Grantor, if any)

Douglas K. Sands
Printed Name

Renee L. Woodams
Witness Signature (as to Co-Grantor, if any)

Renee L. Woodams
Printed Name

[Signature]
Grantor Signature

William D. Connolly
Printed Name

23 N. Ridgeview Road
Post Office Address
Stuart, Florida 34996

[Signature]
Co-Grantor Signature, if any

Cornelia J. Connolly
Printed Name

23 N. Ridgeview Road
Post Office Address
Stuart, Florida 34996

STATE OF Florida
COUNTY OF Martin

I hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared

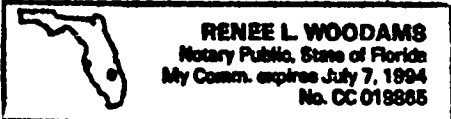
William D. Connolly and Cornelia J. Connolly, his wife
known to me to be the person S described in and who executed the foregoing instrument, who acknowledged before me that they executed the same, and an oath was not taken. (Check one: Said person(s) is/are personally known to me. Said person(s) provided the following type of identification: drivers license

NOTARY RUBBER STAMP SEAL

Witness my hand and official seal in the County and State last aforesaid this
6th day of December, A.D. 1993

[Signature]
Notary Signature

Printed Notary Signature



AC# 2803871

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

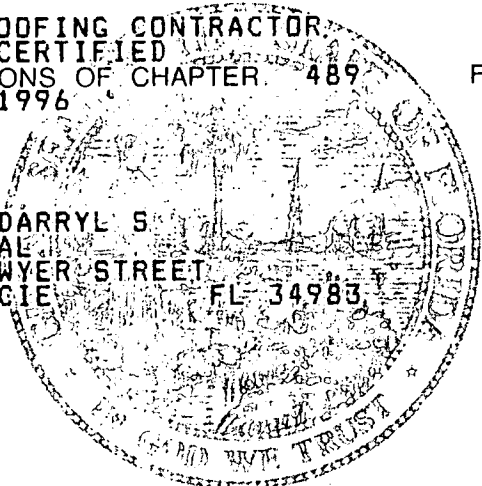
CONST INDUSTRY LICENSING BOARD

DATE	LICENSE NO.	BATCH NO.
08/03/94	CC C055580	94900220

THE CERTIFIED ROOFING CONTRACTOR
 NAMED BELOW IS CERTIFIED
 UNDER THE PROVISIONS OF CHAPTER 489
 EXPIRING AUG 31, 1996

F.S., FOR THE YEAR

SAIBIC, DARRYL S.
 INDIVIDUAL
 821 SW DWYER STREET
 PT ST LUCIE FL 34983



Lawton Chiles
 LAWTON CHILES
 GOVERNOR

DISPLAY IN A CONSPICUOUS PLACE

George Stuart, Jr.
 GEORGE STUART, JR.
 SECRETARY, D.B.P.R.

AGRI. CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

5/15/95

PRODUCER

COMMONWEALTH INSURANCE UND.
410 EAST BOYNTON BEACH BLVD.
BOYNTON BEACH, FL 33435

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

COMPANIES AFFORDING COVERAGE

COMPANY LETTER A	ASSOCIATED INTERNATIONAL
COMPANY LETTER B	
COMPANY LETTER C	
COMPANY LETTER D	
COMPANY LETTER E	

INSURED

DARRYL SAIBIC
821 SW DWYER STREET
PORT ST. LUCIE, FL 34983

COVERAGES

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

CO. / LTA	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR OWNER'S & CONTRACTOR'S PROT.	CCP 031123-1	5/9/95	5/9/96	GENERAL AGGREGATE \$ 300,000 PRODUCTS COMP/OP AGG. \$ EXCLUDED PERSONAL & ADV. INJURY \$ EXCLUDED EACH OCCURRENCE \$ 300,000 FIRE DAMAGE (Any one fire) \$ EXCLUDED MED. EXPENSE (Any one person) \$ EXCLUDED
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY LIMITS EACH ACCIDENT \$ DISEASE - POLICY LIMIT \$ DISEASE - EACH EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS



OCCUPATIONAL LICENSE

CITY OF PORT ST. LUCIE
.....

121 S.W. Port St. Lucie Boulevard
Port St. Lucie, Florida 34984-5099

TERM: OCTOBER 1, 19 **95** TO SEPTEMBER 30, 19 **96**

This license does not warrant or hold that the licensee is competent to perform in the business(es) as licensed, but that the licensee has paid the required fee(s) and provided the necessary documentation (if required) to be licensed in this business.

LICENSE MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS

BUSINESS ADDRESS: **821 SW DWYER STREET**

CLASSIFICATION: **CONTRACTOR**

ISSUED TO: **DARRYL S. SAIBIC**
821 SW DWYER STREET

PORT ST LUCIE FL

LICENSE NO.: **00009908**

This license valid when all state and local
regulated trade licenses/competency cards are
valid for the current fiscal year.

FEE: **100.00**

Mary B. Mastro

CITY LICENSE OFFICIAL

34983

VALID AT THE ABOVE BUSINESS ADDRESS ONLY

AC# 2814480

STATE OF FLORIDA

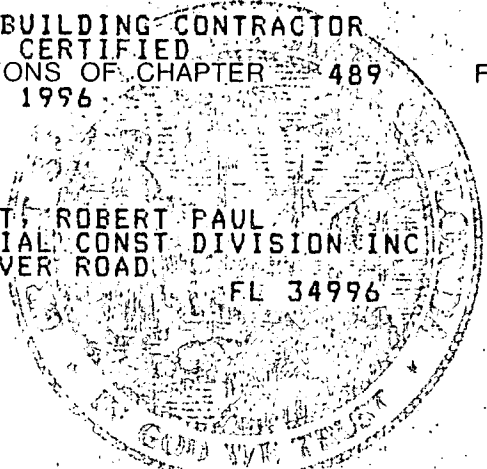
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONST INDUSTRY LICENSING BOARD

DATE	LICENSE NO.	BATCH NO.
08/09/94	CB C052954	94900344

THE CERTIFIED BUILDING CONTRACTOR NAMED BELOW IS CERTIFIED UNDER THE PROVISIONS OF CHAPTER 489 F.S., FOR THE YEAR EXPIRING AUG 31, 1996.

DEMAREST, ROBERT PAUL
 COMMERCIAL CONST DIVISION INC
 92 S RIVER ROAD
 STUART FL 34996



Lawton Chiles
 LAWTON CHILES
 GOVERNOR

DISPLAY IN A CONSPICUOUS PLACE

George Stuart, Jr.
 GEORGE STUART, JR.
 SECRETARY, D.B.P.R.

08/09/94	AUDIT CONTROL NO. 2814480	
LICENSE NO.	BATCH NO.	AMOUNT PAID
CB C052954	94900344	\$209.00

CONST INDUSTRY LICENSING BOARD
 7960 ARLINGTON EXPRESSWAY
 SUITE 300
 JACKSONVILLE FL 32211-7467

Robert Paul Demarest
 LICENSEE SIGNATURE

WALLET CARD — FOLD HERE

STATE OF FLORIDA
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONST INDUSTRY LICENSING BOARD

CERTIFIED BUILDING CONTRACTOR

DEMAREST, ROBERT PAUL
 COMMERCIAL CONST DIVISION INC

HAS PAID THE FEE REQUIRED BY CHAPTER 489 F.S., FOR THE YEAR EXPIRING AUG 31, 1996

Lawton Chiles

George Stuart, Jr.

COPELAND, KRAMER, SEWELL & SOPKO, P.A.

ATTORNEYS AT LAW

JOHN K. COPELAND
ROBERT S. KRAMER
LAURIE RUSK SEWELL
JAMES SOPKO

Board Certified Tax Lawyer
Board Certified Wills, Trusts
and Estates Lawyer

2307 S.E. MONTEREY RD.
POST OFFICE BOX 2421
STUART, FLORIDA 34995

STUART (407) 288-0048
FAX (407) 288-0049

November 3, 1995

Commerical Construction Division, Inc.
833 E. 5th Street
Stuart, Florida 34994

Re: Legal Description: Lot 4, Homewood
Owner's: Dennis & Pamela Ryan

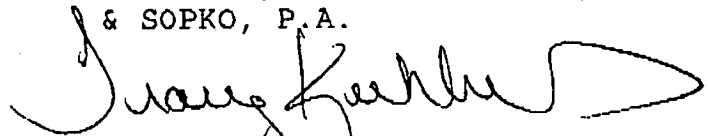
Dear Sir:

Enclosed please find a certified copy of the Notice of Commencement in connection with the above described property.

If we can of be further assistance please feel free to contact the undersigned.

Sincerely,

COPELAND, KRAMER, SEWELL,
& SOPKO, P.A.



Tracy Kuhlers
Real Estate Assistant

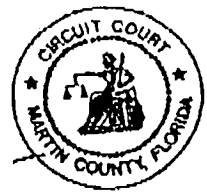
/tmk
Enclosure

RECEIVED NOV - 4 1995

PREPARED BY/RETURN TO: Copeland, Newman
Falk
SunTrust Bank, Treasure Coast, N. A.
111 Orange Avenue
Fort Pierce, FL 34950
(name and address)

STATE OF FLORIDA
MARTIN COUNTY

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



BY [Signature]
DATE 10/27/95

NOTICE OF COMMENCEMENT

Building Permit No. _____ Tax Folio No. _____
STATE OF Florida
COUNTY OF Martin

(Do not write in this blank area.
Reserved for recording purposes only)

THE UNDERSIGNED hereby gives notice that Improvements 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.

- 1. Description of Property: XXX N. RIDGEVIEW DRIVE
(legal description of the property, STUART, FL 34996
and street address if available) SEE ATTACHED "EXHIBIT A"
- 2. General Description of Improvements: Single Family Dwelling

- 3. Owner Information:
 - a. Name and Address: DENNIS J. RYAN and PAMELA C. RYAN
 - b. Interest in property: JOINT
 - c. Name and address of fee simple titlholder (if other than owner): _____

- 4. Contractor: COMMERCIAL CONSTRUCTION DIVISION, INC.
833 E. 5TH STREET, STUART, FL 34994

- 5. Surety:
 - a. Name and address: _____
 - b. Amount of bond \$ _____

- 6. Lender Information:
 - a. Name and Address: SunTrust Bank, Treasure Coast, N. A.
111 Orange Avenue, Fort Pierce, FL 34950
 - b. Designated Contact: Candy McIlwain

- 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a) 7., Florida Statutes :
(name and address)

- 8. In addition to himself, Owner designates _____
of SunTrust Bank, Treasure Coast, N. A., National Banking Association
to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes :

- 9. Expiration date of Notice of Commencement (the expiration date is one (1) Year from the date of recording unless a different date is specified). Other expiration date: _____

[Signature]
Signature of Owner DENNIS J. RYAN

Signature of Owner

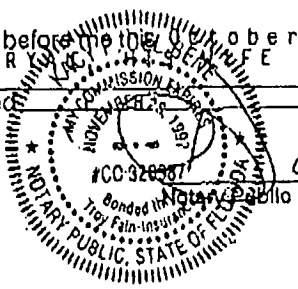
Pamela C. Ryan
Signature of Owner PAMELA C. RYAN

Signature of Owner

STATE OF Florida
COUNTY OF Martin

The foregoing instrument was acknowledged before me this 27 day of October, 1995 by DENNIS J. RYAN and PAMELA C. RYAN

who are personally known to me or who have produced _____ as identification.



[Signature]

[Seal]
Serial Number:
CFM 000756 (7/95)

RECEIVED NOV 4 1995

FRASER ENGINEERING AND TESTING, INC.

3504 INDUSTRIAL 33rd STREET

FORT PIERCE, FLORIDA 34946

FORT PIERCE: (407) 461-7508
 VERO BEACH: (407) 567-6167
 STUART: (407) 283-7711

Report of DENSITY OF SOIL IN PLACE ASTM D2922

Client Commercial Construction Div., Inc. **Date** December 1, 1995

Contractor Client

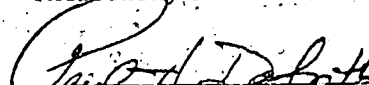
Site 24 N. Ridgeview - Homewood S/D
 Stemwall Footings

Permit #3887

Test No.	Location	Elevation	In Place Dry Density	Moisture Density Relationship		Percent Compaction
				Test No.	Max Dry Density	
909	West Side	0 - 1'	100.0	909	104.9	95.3
	"	1 - 2'	105.2			100.3
	North Side	0 - 1'	99.9			95.2
	"	1 - 2'	104.8			99.9
	East Side	0 - 1'	100.3			95.6
	"	1 - 2'	105.0			100.1
	South Side	0 - 1'	99.9			95.2
	"	1 - 2'	103.6			98.8
All elevations below footing grade.						

Copies Client - 1
 Sewalls Point Bldg. Dept. - 1

Respectfully submitted.


 PAUL H. DANFORTH, P.E.

FRASER ENGINEERING AND TESTING, INC.

3504 INDUSTRIAL 33rd STREET

FORT PIERCE, FLORIDA 34946

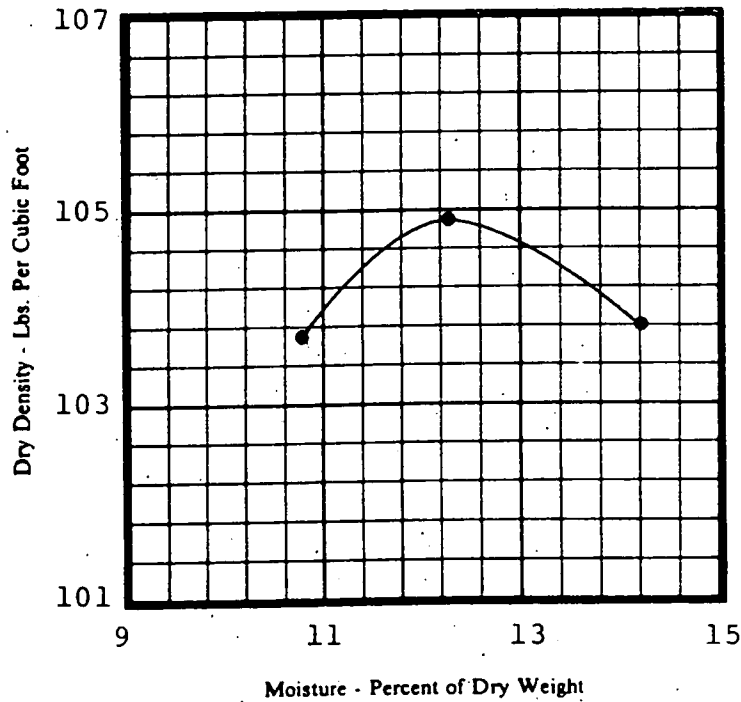
Report
 of
MOISTURE DENSITY RELATIONSHIP
 ASTM 1557-70

Client Commercial Construction Div., Inc. **Date** December 1, 1995

Contractor Client

Site 24 N. Ridgeview - Homewood S/D
 Stemwall Footings

Permit #3887



Test No.	Test Method	Sample Location	Optimum Moisture %	Max Dry Density-P.C.F.	Soil Description
909	B	Composite	12.3	104.9	Orange fine sand.

Copies

Respectfully submitted,

Paul H. Danforth
 PAUL H. DANFORTH, P.E.

3887



STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: Pam / Dennis Ryan SEPTIC TANK PERMIT NO. HD 95-0021

LEGAL DESCRIPTION: Lot 4, Block C, Homewood

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

- 1. Building Permit Number: (Certification not required for this item).
2. I certify that the elevation of the top of the lowest plumbing stubout is inches (circle one) above / below benchmark elevation as indicated on septic tank permit.
3. I certify that the top of the lowest building plumbing stubout is inches (circle one) above / below crown of road elevation shown on septic tank permit.
4. I certify that the top of the drainfield pipe elevation is
5. I certify that all severely limited soil has been removed from an area of feet by feet a minimum depth of Surveyor must submit 2 plot plans to scale of excavated area.
6. I certify that all moderately and severely limited soils have been removed in an area feet wide or 33% of the area of the drainfield.
7. I certify that all severely limited soils have been removed from an area one foot beyond the perimeter of the drainfield rock and the excavation meets all detail requirements as shown in 'Diagram A', or 'Diagram B' on reverse side.

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

CERTIFIED BY: As applicant or applicant's representative, I understand the above requirements. Mike Zavello (Signature)

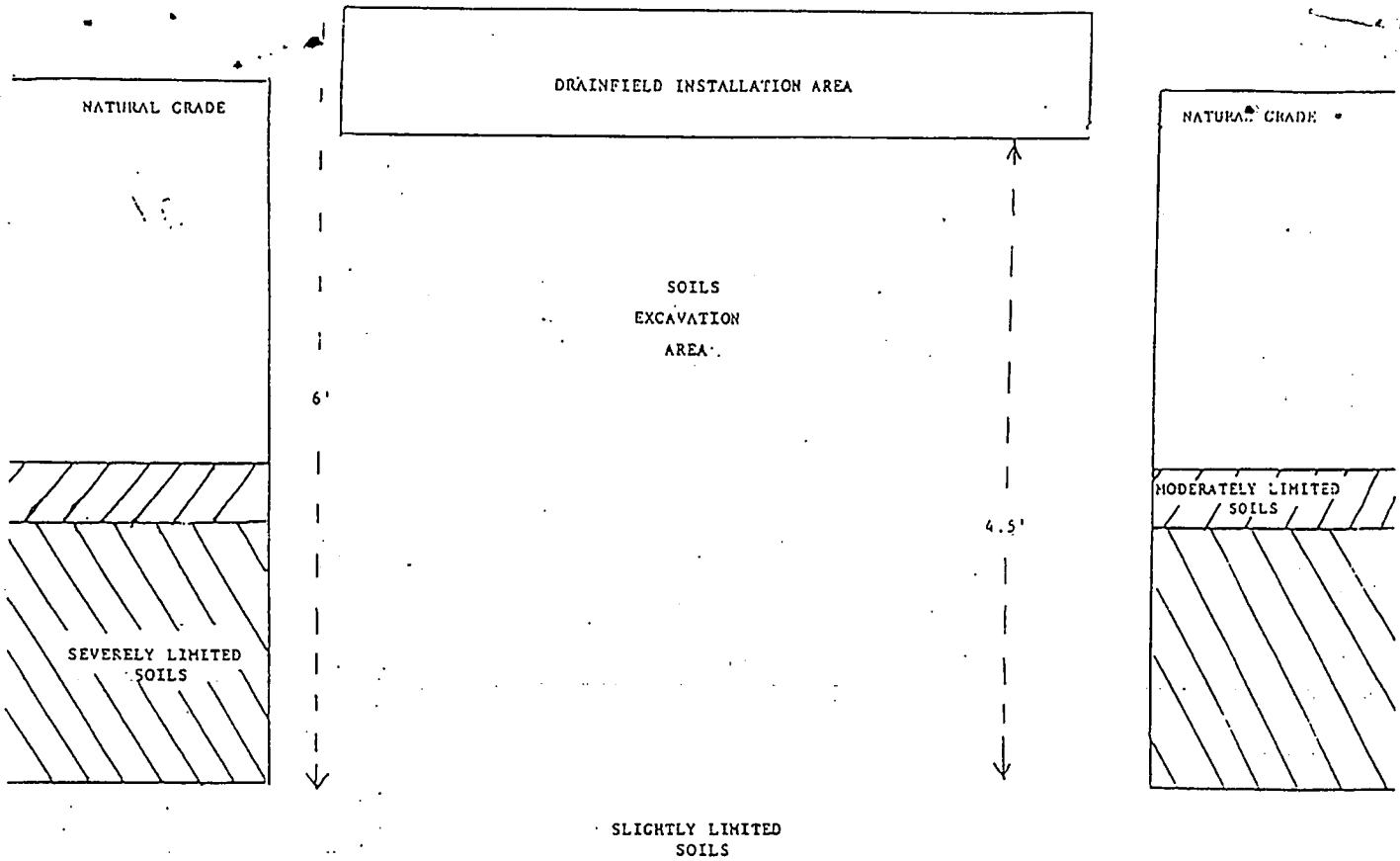
Date: Job Number:

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

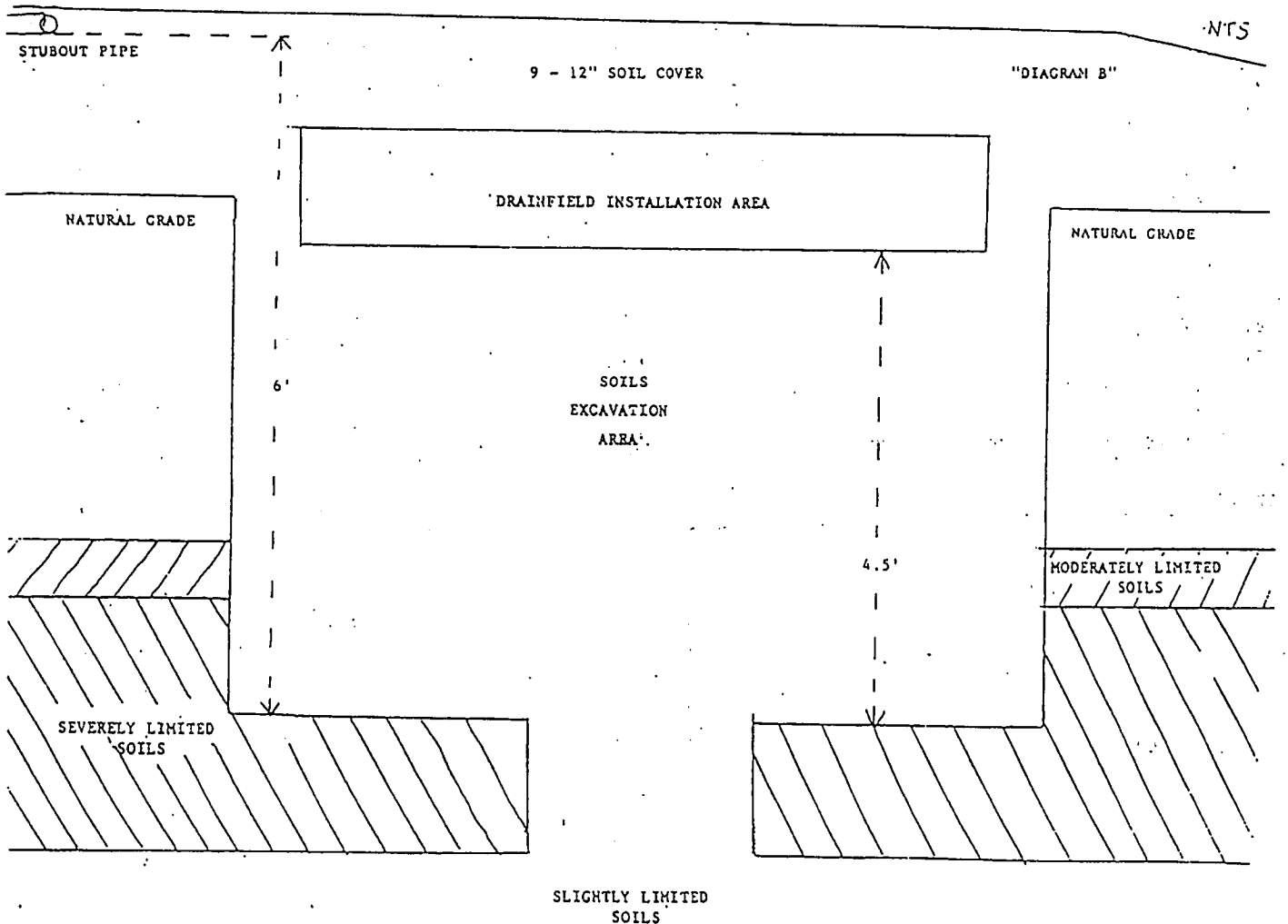
Martin County Health Unit Approval Signature (Date)

9 - 12" SOIL COVER

"DIAGRAM A"



4/92





SEPTIC TANK SYSTEM SPECIAL CONDITIONS LIST

APPLICATION NAME: Pam Dennis Ryan PERMIT NO. (HD) 95-0021
SUBDIVISION: _____

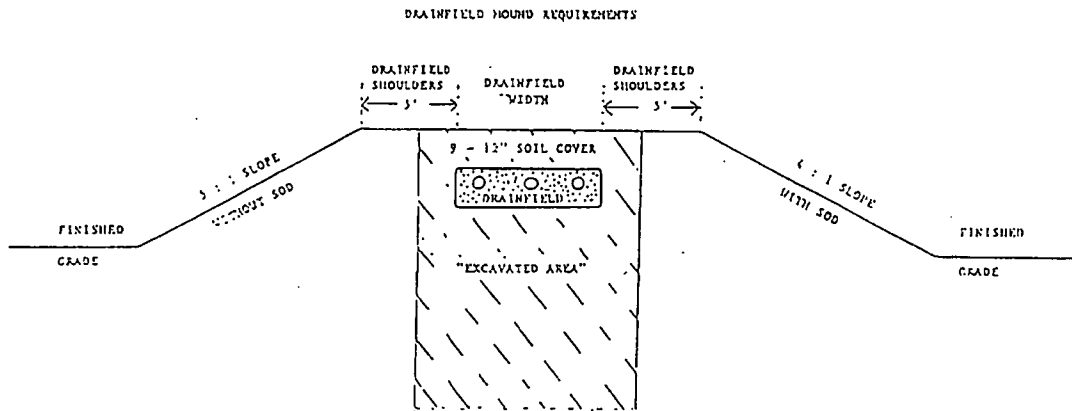
N O T E Special Condition(s) marked "X" are in effect.

1. Drainfield must be maintained under grass; _____ and protected from vehicular traffic (traffic barriers).
2. Operational test of dosing pump(s) and high water alarm (audible and visual) required prior to final construction approval.
3. Driveway / sidewalk elevation must be 9" higher than drainfield pipe elevation.
4. Septic system must be 75' from surface water / wetlands / mean high water line.
5. Excavate one / three feet beyond drainfield area to a depth of _____
6. In addition to item #5, 33% of unsuitable soils at depths greater than _____ must be removed to a depth of slightly limited soils.
7. Existing well(s) must be properly abandoned by a certified well driller. The attached well abandonment form(s) must be completed by the well driller and submitted to this office prior to initial building construction or system installation.
8. Septic tank abandonment notices from the Septic Tank Contractor must be received by this office prior to final construction approval.
9. Mound area must be sodded or stabilized with seed and hay prior to final grade inspection (Sod or seed/hay must be applied within seven days of drainfield approval).
10. Any future ponds or surface water created onsite must be 75' from septic system(s).
11. Available area for septic installation must to be evenly filled and leveled.
12. _____ reinspection fee is required if the well is not installed at time of initial onsite sewage disposal system inspection.

SEE REVERSE SIDE FOR ADDITIONAL REQUIREMENTS. Page 1 of 3

MARTIN COUNTY PUBLIC HEALTH UNIT
ENVIRONMENTAL HEALTH
612 SOUTH DIXIE HIGHWAY • STUART, FLORIDA 34994

- 25. If fill is required, contact Martin County Building Division.
- 26. Inspection results will be posted on the building permit. A copy of the construction approval is available upon request.
- 27. An approved outlet filter device, tank baffle or tanks in series is required.
- 28. If any information on this permit changes, an amended application is required to be filed immediately.
- 29. Any alteration of the information or conditions of this permit found to be in non-compliance with 10D-6 FAC shall be sufficient cause for immediate revocation of this permit.
- ___ 30. The engineer of record must certify that the installed system complies with the approved design and installation requirements.
- ___ 31. Prior to final construction approval, the property owner must apply for an annual operating permit and pay the \$_____ annual permit fee (For ___Indust./Manuf. ___Aerobic system(s)).
- ___ 32. If a mound drainfield is proposed, see following sketch of additional requirements (No retaining walls are allowed within drainfield shoulder or slope areas of a mound system).



NOTE: THESE REQUIREMENTS MUST BE MET PRIOR TO FINAL APPROVAL.
SEE EXCAVATION CERTIFICATION SHEET FOR EXCAVATION DETAILS.

33. Other: SEPTIC TANK IS REQUIRED TO BE AT FINISHED SOIL GRADE. DO NOT EXCEED 18 INCHES OF COVER OVER DRAINFIELD ROCK.

N O T E - \$25.00 RE-INSPECTION FEE WILL BE CHARGED IF REQUIREMENTS ARE NOT MET DURING INSPECTION.

Questions concerning special conditions can be answered by calling EMR at (407) 221-4090.

STATE OF FLORIDA
 DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
 ONSITE SEWAGE DISPOSAL SYSTEM
 SITE EVALUATION AND SYSTEM SPECIFICATIONS

PERMIT # 95-0021-
 BUILD PERM _____

APPLICANT: PAM / DENNIS RYAN

AGENT: STEPHEN BROWN

LOT: 4 BLOCK: C SUBDIVISION: HOMEWOOD

PROPERTY ID #: _____ [SECTION/TOWNSHIP/RANGE/PARCEL NO. OR TAX ID NUMBER]

TO BE COMPLETED BY ENGINEER, HEALTH UNIT EMPLOYEE OR OTHER QUALIFIED PERSON. ENGINEER'S MUST PROVIDE REGISTRATION NO. AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

PROPERTY SIZE CONFORMS TO SITE PLAN: YES [] NO NET USABLE AREA AVAILABLE: .34 ACRES
 TOTAL ESTIMATED SEWAGE FLOW: 400 GALLONS PER DAY [RESIDENCES-TABLE-1 / OTHER-TABLE-2]
 AUTHORIZED SEWAGE FLOW: 850 GALLONS PER DAY [1500 GPD/ACRE OR 2500 GPD/ACRE]
 UNOBSTRUCTED AREA AVAILABLE: 1200 SQFT UNOBSTRUCTED AREA REQUIRED: 666 SQFT

BENCHMARK/REFERENCE POINT LOCATION: 26.57 benchmark
 ELEVATION OF PROPOSED SYSTEM SITE IS 41.5 INCHES [ABOVE / BELOW] BENCHMARK/REFERENCE POINT.
65.5

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURE:
 SURFACE WATER: NA FT DITCHES/SWALES: NA FT NORMALLY WET? [] YES [X] NO
 WELLS: PUBLIC: NA FT LIMITED USE: NA FT PRIVATE: NA FT NON-POTABLE: NA FT
 BUILDING FOUNDATIONS: 8 FT PROPERTY LINES: 8 FT POTABLE WATER LINES: 50 FT

SITE SUBJECT TO FREQUENT FLOODING: [] YES [X] NO 10 YEAR FLOODING? [] YES [X] NO
 10 YEAR FLOOD ELEVATION FOR SITE: _____ FT MSL/NGVD SITE ELEVATION: 30 FT MSL/NGVD
32

SOIL PROFILE INFORMATION SITE 1

SOIL PROFILE INFORMATION SITE 2

Munsell #/Color	Texture	Depth
<u>10YR5/1 Gray</u>	<u>sand</u>	<u>0 to 6</u>
<u>10YR8/1 white</u>	<u>sand</u>	<u>6 to 72</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Munsell #/Color	Texture	Depth
<u>10YR5/1 Gray</u>	<u>sand</u>	<u>0 to 3</u>
<u>10YR8/1 white</u>	<u>sand</u>	<u>3 to 72</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

USDA SOIL SERIES: St Lucie Series #7

USDA SOIL SERIES: St Lucie Series #7

OBSERVED WATER TABLE: not observed INCHES [ABOVE / BELOW] EXISTING GRADE. TYPE: [PERCHED / APPARENT]
 ESTIMATED WET SEASON WATER TABLE ELEVATION: 52 INCHES [ABOVE / BELOW] EXISTING GRADE.
 HIGH WATER TABLE VEGETATION: [] YES [X] NO MOTTLING: [] YES [X] NO DEPTH: _____ INCHES

SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: 1.20 DEPTH OF EXCAVATION: N/A INCHES
 DRAINFIELD CONFIGURATION: [X] TRENCH [] BED [] OTHER (SPECIFY) _____

REMARKS/ADDITIONAL CRITERIA: _____

SITE EVALUATED BY: [Signature] DATE: 1/20/95

RECEIVED

JAN 17 1995



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS & Chapter 10D-6, FAC
PREPARED BY: STEPHEN J. BROWN, INC.
290 FLORIDA STREET
STUART, FL. 34994 407-288-7176

PERMIT # HD 95-0021
DATE PAID 1-17-95
FEE PAID \$ 80.
RECEIPT # 14009

HD 95-0021

APPLICATION FOR:

[X] New System [] Existing System [] Holding Tank [] Temporary/Experimental
[] Repair [] Abandonment [] Other (Specify)

APPLICANT: FAN AND DENNIS RYAN TELEPHONE: 238-7176

AGENT: STEPHEN J. BROWN INC.

MAILING ADDRESS: 290 FLORIDA ST. SUITE C, STUART, FL. 34994

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 10D-6, FLORIDA ADMINISTRATIVE CODE.

PROPERTY INFORMATION (IF LOT IS NOT IN A RECORDED SUBDIVISION, ATTACH LEGAL DESCRIPTION OR DEED)

LOT: 4 BLOCK: C SUBDIVISION: HOMEWOOD DATE OF SUBDIVISION: 10-19-1957

PROPERTY ID #: [Section/Township/Range/Parcel No.] ZONING:

PROPERTY SIZE: 14,913 ACRES (Sqft/48560) PROPERTY WATER SUPPLY: [X] PRIVATE [] PUBLIC

PROPERTY STREET ADDRESS: Ridgewood Dr., Sewall's Point.

DIRECTIONS TO PROPERTY: "SEE LOCATION MAP"

BUILDING INFORMATION [X] RESIDENTIAL [] COMMERCIAL

Table with 6 columns: Unit No, Type of Establishment, No. of Bedrooms, Building Area Sqft, # Persons Served, Business Activity For Commercial Only. Row 1: 1, SINGLE FAMILY, 3, 2890.

[X] Garbage Grinders/Disposals [N] Spas/Hot Tubs [N] Floor/Equipment Drains
[X] Ultra-low Volume Flush Toilets [] Other (Specify)

APPLICANT'S SIGNATURE: STEPHEN J. BROWN DATE: 1/13/95



APPLICANT PAM AND DENNIS EYAN
LEGAL DESCRIPTION LOT 4, BLOCK C, HOMEWOOD

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

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

-----ELEVATIONS-----

1. CROWN OF ROAD ELEVATION _____ NGVD SHOW LOCATION ON PLOT PLAN. IF ROAD IS NOT PAVED, BENCHMARK ELEVATION 26.54 NGVD SHOW LOCATION ON PLOT PLAN.
2. NATURAL GRADE ELEVATION IN AREA OF PROPOSED SEPTIC SYSTEM 32.00 NGVD SHOW LOCATION ON PLOT PLAN.
2. IS BUILDING LOCATED IN FLOOD HAZARD AREA "A" OR "V" AS IDENTIFIED ON FEMA MAPS? NO IF YES, WHAT IS THE MINIMUM REQUIRED FLOOD HAZARD FLOOR ELEVATION OF BUILDING? _____ NGVD.

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

PREPARED BY: STEPHEN J. BROWN, INC.
290 FLORIDA ST., SUITE C
STUART, FL 34996
(407) 288-7176

CERTIFIED BY: STEPHEN J. BROWN
FL. PROFESSIONAL NO. 19049
DATE: 1/13/96 JOB NO. 2205-01-01

V.J.GERLEY AND ASSOCIATES
CONSULTING ENGINEERS
3190 N.E.MAPLE AVE
JENSEN BEACH, FL. 34957
(407) 334-2600

Title : RYAN RES.
Scope :
Number: 95-19
Misc :
Dsng: V.J.GERLEY Date: 06-Feb-95

PLYWOOD SHEAR WALL DESIGN & ANALYSIS Page

DESCRIPTION)) RYAN RES SW #22(18,19,20,21)
))

LOADS

LATERAL:

- #1 : LAT. SHEAR APPLIED TO WALL= 640 plf x Length = 4000 lbs
- #2 : LAT. SHEAR APPLIED TO WALL= plf x Length = lbs
- #3 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
- #4 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
- #5 : MOMENT APPLIED @ TOP OF WALL = ft-#

VERTICAL:

	Load	X-Left	X-Right
#1 : CONCENTRATED	= lbs		ft
#2 : CONCENTRATED	= lbs		ft
#3 : CONCENTRATED	= lbs		ft
#1 : UNIFORM	= 15 plf		ft
#2 : UNIFORM	= plf		ft

DESIGN DATA

PLYWOOD APPLIED TO ONE OR BOTH SIDES ? 1,2 ---)) 2 ((--
 PLYWOOD GRADE: STR I:1, STR II:2 ---)) 2 ((--
 NAIL SIZE: 6d, 8d, 10d ---)) 10 ((--
 SHEATHING THICKNESS: .3125", .375", .50", .594" ---)) 0.5 ((--

STUD SPACING = 16 in WALL LENGTH = 6.25 ft
 LEAST DIM. OF END POST = 3 in WALL HEIGHT = 10 ft
 SEIS. FACTOR FOR WALL WT= WALL WEIGHT = 15 psf
 NOMINAL SILL THICKNESS = 3 Ht/Width Ratio= 1.6

SUMMARY

USE..... 0.5 in Plywood Applied To ---)) 2 Side/s

Required Nail Size = 10 d Req'd Nail Spacing = 4 in
 Req'd Field Spacing= 12 in

Shear Wall Capacity = 460 plf x # of Sides = 920.00 plf
 Actual Total Shear = 4000 lbs Required = 640.00 plf

UPLIFT CHECK Moments about lower: ..Left.. ..Right..
 Overturning Moment on Wall = 40000 ft-# 40000
 Resisting Moment From Vert. Loads = 3223 ft-# 3223

Uplift @ End w/o D.L. reductions = 5884.4 lbs 5884.4 lbs

Use Simpson HD7A @ Left Side of Wall : Capacity = 7570 lbs
 Use Simpson HD7A @ Right Side of Wall : Capacity = 7570 lbs

Sill Attachment..... Use 1/2" Anchor Bolt @ 15.8 in o/c
 or 5/8" Anchor Bolt @ 24.8 in o/c
 or 3/4" Anchor Bolt @ 35.7 in o/c

Use SW # 1

FOOTING DESIGN.....

Reinf. Area @ Left	=	1.562 in ²	Shear @ Left	: OK
@ Right	=	1.562	@ Right	: OK

FOOTING DESIGN & ANALYSIS

V.J.GERLEY AND ASSOCIATES
CONSULTING ENGINEERS
3190 N.E.MAPLE AVE
JENSEN BEACH,FL.34957
(407) 334-2600

Title : RYAN RES.
Scope :
Number: 95-19
Misc :
Dsngn : V.J.GERLEY Date:06-Feb-95

PLYWOOD SHEAR WALL DESIGN & ANALYSIS

FOOTING SIZE :	(F2)		
LEFT OF WALL	=	2 ft	CONCRETE WEIGHT = 145 pcf
Wall Length	=	6.25 ft	REBAR COVER = 3 in
RIGHT OF WALL	=	2 ft	f'c = 3,000
			Fy = 60,000
Overall Length	=	10.25 ft	MIN. As % = 0.0014
FOOTING WIDTH	=	3 ft	Total Vert Loads= 13,664 lbs
THICKNESS	=	34 in	Kern Distance = 1.71 ft

18" FIBER + 16" (CMT + SOIL)

Lateral Load Applied Toward	----->>>	Left	Right
Ecc. of resultant @ footing CL	=	-3.76 ft	3.76 ft
Soil Pressure @ LEFT Side of Footing	=	2,219 psf	psf
Soil Pressure @ RIGHT Side of Footing	=	psf	2,219 psf
Mn @ Left Face Of Wall	=	8268.1 ft-#	3451.0 ft-#
Mn @ Right Face Of Wall	=	3451.0 ft-#	8268.1 ft-#
vu/.85 @ 'd' from Left Face Of Wall	=	psi	psi
vu/.85 @ 'd' from Right Face Of Wall	=	psi	psi
Allowable Shear	=	109.5 psi	109.5 psi
Overturning Moment	=	51333 ft-#	51333 ft-#
Resisting Moment	=	70030 ft-#	70030 ft-#
.....FACTOR OF SAFETY	=	1.36 ft-#	1.36

V.J.GERLEY AND ASSOCIATES Title : RYAN RES.
CONSULTING ENGINEERS Scope :
3190 N.E.MAPLE AVE Number: 95-19
JENSEN BEACH,FL.34957 Misc :
(407) 334-2600 Dsngnr : V.J.GERLEY Date:06-Feb-95

PLYWOOD SHEAR WALL DESIGN & ANALYSIS Page

DESCRIPTION)) RYAN RES SW # 2 (1,3,4,10,11,12,13,14,15,16,17,26,27,28,
)) 29,30)

(TYP EXT WALL)

LOADS

LATERAL:

#1 : LAT. SHEAR APPLIED TO WALL= 290 plf x Length = 1812.5 lbs
#2 : LAT. SHEAR APPLIED TO WALL= plf x Length = lbs
#3 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
#4 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
#5 : MOMENT APPLIED @ TOP OF WALL = ft-#

	Load	X-Left	X-Right
VERTICAL:			
#1 : CONCENTRATED	= lbs		ft
#2 : CONCENTRATED	= lbs		ft
#3 : CONCENTRATED	= lbs		ft
#1 : UNIFORM	= 60 plf		ft
#2 : UNIFORM	= plf		ft

DESIGN DATA

PLYWOOD APPLIED TO ONE OR BOTH SIDES ? 1,2 ---)) 1 ((--
PLYWOOD GRADE: STR I:1, STR II:2 ---)) 2 ((--
NAIL SIZE: 6d, 8d, 10d ---)) 10 ((--
SHEATHING THICKNESS: .3125", .375", .50", .594" ---)) 0.5 ((--

STUD SPACING = 16 in WALL LENGTH = 6.25 ft
LEAST DIM. OF END POST = 3 in WALL HEIGHT = 10 ft
SEIS. FACTOR FOR WALL WT= WALL WEIGHT = 15 psf
NOMINAL SILL THICKNESS = 3 Ht/Width Ratio= 1.6

SUMMARY

USE..... 0.5 in Plywood Applied To ---)) 1 Side/s
Required Nail Size =10 d Req'd Nail Spacing = 6 in
Req'd Field Spacing= 12 in
Shear Wall Capacity = 310 plf x # of Sides = 310.00 plf
Actual Total Shear = 1812.5 lbs Required = 290.00 plf
UPLIFT CHECK Moments about lower: ..Left.. ..Right..
Overturning Moment on Wall = 18125 ft-# 18125
Resisting Moment From Vert. Loads = 4102 ft-# 4102
Uplift @ End w/o D.L. reductions = 2243.8 lbs 2243.8 lbs
Use Simpson HD2A @ Left Side of Wall : Capacity = 3270 lbs
Use Simpson HD2A @ Right Side of Wall : Capacity = 3270 lbs
Sill Attachment..... Use 1/2" Anchor Bolt @ 34.9 in o/c
or 5/8" Anchor Bolt @ 48.0 in o/c

or 3/4" Anchor Bolt @ 48.0 in o/c

FOOTING DESIGN.....

Reinf. Area @ Left	=	1.042 in ²	Shear @ Left	: OK
@ Right	=	1.042	@ Right	: OK

FOOTING DESIGN & ANALYSIS

V.J.GERLEY AND ASSOCIATES
CONSULTING ENGINEERS
3190 N.E.MAPLE AVE
JENSEN BEACH,FL.34957
(407) 334-2600

Title : RYAN RES.
Scope :
Number: 95-19
Misc :
Dsngn : V.J.GERLEY Date:06-Feb-95

PLYWOOD SHEAR WALL DESIGN & ANALYSIS

FOOTING SIZE :

F1

LEFT OF WALL	=	2 ft	CONCRETE WEIGHT	=	145 pcf
Wall Length	=	6.25 ft	REBAR COVER	=	3 in
RIGHT OF WALL	=	2 ft	f'c	=	3,000
			Fy	=	60,000
Overall Length	=	10.25 ft	MIN. As %	=	0.0014

FOOTING WIDTH	=	2 ft	Total Vert Loads=	9,735 lbs
THICKNESS	=	34 in	Kern Distance	= 1.71 ft

18" PLY + 16" (CRUSH SOIL)

Lateral Load Applied Toward	-----))	Left	Right
-----------------------------	---------	------	-------

Ecc. of resultant @ footing CL	=	-2.39 ft	2.39 ft
Soil Pressure @ LEFT Side of Footing	=	1,186 psf	psf
Soil Pressure @ RIGHT Side of Footing	=	psf	1,186 psf
Mn @ Left Face Of Wall	=	2295.5 ft-#	2300.7 ft-#
Mn @ Right Face Of Wall	=	2300.7 ft-#	2295.5 ft-#
vu/.85 @ 'd' from Left Face Of Wall	=	psi	psi
vu/.85 @ 'd' from Right Face Of Wall	=	psi	psi
Allowable Shear	=	109.5 psi	109.5 psi
Overturning Moment	=	23260 ft-#	23260 ft-#
Resisting Moment	=	49890 ft-#	49890 ft-#
.....FACTOR OF SAFETY	=	2.14 ft-#	2.14

V. J. GERLEY & ASSOCIATES
CONSULTING ENGINEERS

3190 N.E. MAPLE AVENUE JENSEN BEACH, FL 34957 (407) 334-2600

BY V. J. GERLEY

DATE 3-5-95

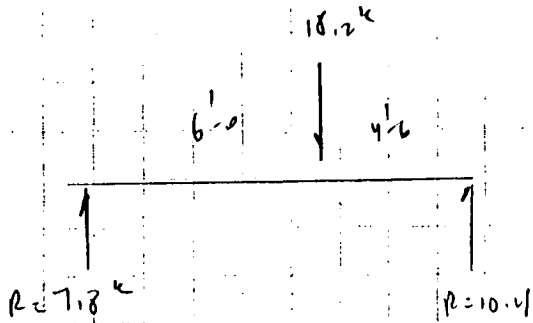
SHEET 10 OF

PROJECT

RYAN RES.

SUBJECT

(RB1)



$$M_{max} = 7.8 \times 6 = 46.8 \text{ k-ft}$$

$$S_p = \frac{46.8 \times 12}{2.8} = 200.6 \text{ in}^3$$

try 3-17/8 x 16 H LAM
 $S = 222 \text{ in}^3$
 $I = 1785$

V. J. GERLEY & ASSOCIATES
CONSULTING ENGINEERS

3190 N.E. MAPLE AVENUE JENSEN BEACH, FL 34957 (407) 334-2600

BY V. J. GERLEY

DATE 3-5-95

SHEET 01 OF

PROJECT

RYAN RES.

SUBJECT

R02

$L = 12' - 6"$

$$W = 0.43 \text{ k/ft}$$

$$M = 0.113 \times \frac{12.5^2}{8} = 8.11 \text{ k-ft}$$

$$S_{req} = \frac{8.11 \times 12}{1.4} = 72 \text{ in}^3 \quad \text{USE } 3 \times 2 \times 12$$

R1DHE 011

$L = 28' - 0"$

R03

$$W = 1.13 \text{ k}$$

$$W_U = 0.91 \text{ k/ft (UPLIFT)}$$

$$M = \frac{1.13 \times 28^2}{8} = 127.4 \text{ k-ft}$$

$$S_{req} = \frac{127.4 \times 12}{2.8} = 546 \text{ in}^3$$

$$A = 1.76 \text{ ft}^2 = \frac{L}{190}$$

USE 7

~~T/R~~ $\beta = 1'4 \times 18 \text{ PLAN}$

$$S = 94 \times 6 = 564$$

$$I = 5100$$

V.J.GERLEY AND ASSOCIATES
 CONSULTING ENGINEERS
 3190 N.E.MAPLE AVE
 JENSEN BEACH,FL. 34957
 (407) 334-2600

Title :RYAN RES.
 Scope :
 Number:95-19
 Misc :
 Dsngr :V.J.GERLEY Date:01-Mar-95

GENERAL TIMBER BEAM ANALYSIS & DESIGN Page

DESCRIPTION)) RYAN R81
)) ERR)3-1 3/4X 16 MLAM

----- BEAM DATA -----		----- DESIGN DATA -----	
TIMBER SECTION	= ----	LOAD DURATION FACTOR=	1
BEAM WIDTH	= 5.125 in	USE BEAM WEIGHT ?	Y y/n
BEAM DEPTH	= 16 in	REDUCE SHR BY 'd' ?	Y y/n
LAMINATION THICKNESS	= 1.75 in		
Fb - BENDING	= 2800 psi	----- END CONDITIONS -----	
Fv - SHEAR	= 285 psi	FIXITY CODE	-----)) 1 ((
Fc - BEARING	= 500 psi	1=Pin/Pin, 2=Fix/Fix	
ELASTIC MODULUS	=2000000 psi	3=Fix/Pin, 4=Pin/Fix	
BEAM DENSITY	= 33 pcf	5=Fix/Free	
----- SPAN DATA -----		----- UNBRACED LENGTHS -----	
CENTER SPAN	= 10.5 ft	Le : CENTER SPAN	= ft
LEFT CANTILEVER	= ft	Le : LEFT CANT.	= ft
RIGHT CANTILEVER	= ft	Le : RIGHT CANT.	= ft

----- APPLIED LOADS -----

..... Use '-' distances for left cantilever !

.....Uniform.....			
@ Center: Trapezoidal		
Dead =	plf		
Live =	plf	Dead @ Left =	plf
@ Left Cant:		@ Right=	plf
Dead =	plf	Live @ Left =	plf
Live =	plf	@ Right=	plf
@ Right Cant:		...X-Left =	ft
Dead =	plf	...X-Right =	ft
Live =	plf		
..... Concentrated			
	..#1..	..#2..	..#3..
Dead =	9100		lbs
Live =	9100		lbs
Dist. =	6		ft

..... Applied Moments

	..#1..	..#2..	..#3..	..#4..	..#5..	..#6..	..#7..	..#8..
Dead =								in-#
Live =								in-#
Dist =								ft

----- SUMMARY -----

USING: 5.125" x 16.00" Beam, Bending = 95.1%, Shear = 67.22%			
		Reactions:	
Max. M+@	6.0 ft = 46.9912 ft-k	Left	= 4.00 7.90 k
Max. M-@	10.5 ft = ft-k	Right	= 5.30 10.50 k
Max @ Left	= ft-k	Deflections:	
Max @ Right	= ft-k	Center.	= -0.11 -0.21 in
Max. Allow Moment	= 49.4171 ft-k	...L/Defl.=	1178 593
		...Dist. =	5.46 5.46 ft
fb : Max. Actual	= 2,579 psi	Left	= in
fb : Allowable	= 2,712 psi	...L/Defl.=	

Fv : Max. Actual	= 191.6 psi	Right	=	in
Fv : Allowable	= 285.0 psi	...L/Defl. =		
Max. Shear @ Left	= 7.89865 k			
Max. Shear @ Right	= 10.4986 k	Ck = .811(E/Fb)^.5 =	21.67	
Sxx - Supplied	= 218.7 in^3	Cs = (LeD/B^2)^.5 =		
Area Supplied	= 82.00 in^2	Cf = (12/d)^.111 =	0.97	

V.J.GERLEY AND ASSOCIATES
CONSULTING ENGINEERS
3190 N.E.MAPLE AVE
JENSEN BEACH,FL.34957
(407) 334-2600

Title :RYAN RES.
Scope :
Number:95-19
Misc :
Dsngnr :V.J.GERLEY Date:01-Mar-95

GENERAL TIMBER BEAM ANALYSIS & DESIGN

----- REQUIRED Sxx & Area -----		----- ALLOWABLE STRESSES -----	
Max. Center Mom	= 47.0 ft-k	Fb	Fv
....Sxx Req'd	= 207.9 in^3	Center Span = 2.71	ksi
Max. Left Mom	= ft-k	Left Support = 2.71	0.29 ksi
....Sxx Req'd	= in^3	Right Support = 2.71	0.29 ksi
Max. Right Mom	= 0.0 ft-k		
....Sxx Req'd	= 0.0 in^3		
Design Shear @ Left	= 11.8 kips	----- QUERY VALUES -----	
....Area Req'd	= 41.4 in^2	Left Center Right	
Design Shear @ Right	= 15.7 kips	Dist. =	ft
....Area Req'd	= 55.1 in^2	Shear = 7.90	k
		Moment =	ft-k
		Defl =	in
Brg Req'd @ Left	= 3.08 in Live Load Location	
Brg Req'd @ Right	= 4.10 in	@ LEFT CANT. ?	Y y/n
Camber @ Left	= in	@ CENTER SPAN ?	Y y/n
@ Center	= -0.16 in	@ RIGHT CANT. ?	Y y/n
@ Right	= in		

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CONSULTING ENGINEERS
3190 N.E.MAPLE AVE
JENSEN BEACH,FL.34957
(407) 334-2600

Title :RYAN RES.
Scope :
Number:95-19
Misc :
Dsng: V.J.GERLEY Date:01-Mar-95

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GENERAL TIMBER BEAM ANALYSIS & DESIGN Page

OPTIONAL

DESCRIPTION)) RYAN RB3
)) ERR)7-1 3/4X 18 MLAM

----- BEAM DATA -----		----- DESIGN DATA -----	
TIMBER SECTION	= ----	LOAD DURATION FACTOR=	1
BEAM WIDTH	= 12.25 in	USE BEAM WEIGHT ?	Y y/n
BEAM DEPTH	= 18 in	REDUCE SHR BY 'd' ?	Y y/n
LAMINATION THICKNESS	= 1.75 in		
Fb - BENDING	= 2800 psi	----- END CONDITIONS -----	
Fv - SHEAR	= 285 psi	FIXITY CODE	-----)) 1 ((
Fc - BEARING	= 500 psi	1=Pin/Pin, 2=Fix/Fix	
ELASTIC MODULUS	=2000000 psi	3=Fix/Pin, 4=Pin/Fix	
BEAM DENSITY	= 33 pcf	5=Fix/Free	
----- SPAN DATA -----		----- UNBRACED LENGTHS -----	
CENTER SPAN	= 28 ft	Le : CENTER SPAN	= ft
LEFT CANTILEVER	= ft	Le : LEFT CANT.	= ft
RIGHT CANTILEVER	= ft	Le : RIGHT CANT.	= ft

----- APPLIED LOADS -----

..... Use '-' distances for left cantilever !

.....Uniform.....
@ Center: Trapezoidal
Dead = 650 plf
Live = 650 plf Dead @ Left = plf
@ Left Cant: @ Right= plf
Dead = plf Live @ Left = plf
Live = plf @ Right= plf
@ Right Cant: ...X-Left = ft
Dead = plf ...X-Right = ft
Live = plf

..... Concentrated

	..#1..	..#2..	..#3..	..#4..	..#5..	..#6..	..#7..	..#8..	
Dead =									lbs
Live =									lbs
Dist. =	6								ft

..... Applied Moments

	..#1..	..#2..	..#3..	..#4..	..#5..	..#6..	..#7..	..#8..	
Dead =									in-#
Live =									in-#
Dist =									ft

----- SUMMARY -----

USING: 12.250" x 18.00" Beam, Bending = 89.7%, Shear = 40.44%

		Reactions:	Dead	Max.
Max. M+@	14.0 ft = 132.352 ft-k	Left	= 9.81	18.91 k
Max. M-@	ft = ft-k	Right	= 9.81	18.91 k
Max @ Left	= ft-k	Deflections:		
Max @ Right	= ft-k	Center.	= -0.81	-1.57 in
Max. Allow Moment	= 147.550 ft-k	...L/Defl.=	413	214
		...Dist. =	14.00	14.00 ft
fb : Max. Actual	= 2,401 psi	Left	=	in
Fb : Allowable	= 2,677 psi	...L/Defl.=		

fv : Max. Actual	= 115.2 psi	Right	=	in
Fv : Allowable	= 285.0 psi	...L/Defl.=		
Max. Shear @ Left	= 18.9074 k			
Max. Shear @ Right	= 18.9074 k	Ck = .811(E/Fb)^.5=	21.67	
Sxx - Supplied	= 661.5 in^3	Cs = (LeD/8^2)^.5 =		
Area Supplied	= 220.50 in^2	Cf = (12/d)^.111 =	0.96	

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Number:95-19
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Dsngnr :V.J.GERLEY Date:01-Mar-95

GENERAL TIMBER BEAM ANALYSIS & DESIGN

----- REQUIRED Sxx & Area -----		----- ALLOWABLE STRESSES -----		
Max. Center Mom	= 132.4 ft-k	Fb	Fv	
....Sxx Req'd	= 593.4 in^3	Center Span =	2.68	ksi
Max. Left Mom	= ft-k	Left Support =	2.68	0.29 ksi
....Sxx Req'd	= in^3	Right Support=	2.68	0.29 ksi
Max. Right Mom	= 0.0 ft-k			
....Sxx Req'd	= 0.0 in^3	----- QUERY VALUES -----		
Design Shear @ Left	= 25.4 kips	Left Center	Right	
....Area Req'd	= 89.2 in^2	Dist. =		ft
Design Shear @ Right	= 25.4 kips	Shear =	18.91	k
....Area Req'd	= 89.2 in^2	Moment=		ft-k
		Defl =		in
Brg Req'd @ Left	= 3.09 in Live Load Location		
Brg Req'd @ Right	= 3.09 in	@ LEFT CANT.	?	Y y/n
Camber @ Left	= in	@ CENTER SPAN	?	Y y/n
@ Center	= -1.22 in	@ RIGHT CANT.	?	Y y/n
@ Right	= in			

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Scope :
Number:95-19
Misc :
Dsngn :V.J.GERLEY Date:01-Mar-95

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OPTIONAL

STEEL BEAM DESIGN & ANALYSIS Page

DESCRIPTION))RYAN ALT.RB3
))

----- BEAM DATA -----		----- MEMBER DATA -----	
AISC SECTION [F8][S]]w21x44		Fy	= 36 ksi
CENTER SPAN LENGTH =	28 ft	LOAD DURATION FACTOR =	1.00
LEFT ' ' =	ft	MINOR AXIS ?	N y/n
RIGHT ' ' =	ft	Graphics: (1,2,3,4) :	3
UNBRACED LENGTH =	ft	----- END CONDITIONS -----	
INCLUDE BEAM WT ?	Y y/n	FIXITY CODE -----))	1 ((
INCLUDE LL w/ ST ?	N y/n	1:P/P,2:F/F,3:F/P,4:P/F,5:F/Free	

----- APPLIED LOADS -----

---)) All distances refer to left support, use '-' for left cantilever

POINT.....#1..	..#2..	..#3..	..#4..	..#5..	..#6..	..#7..	..#8..	
Dead =								k
Live =								k
Short=								k
Dist.=								ft
DISTRIBUTED.....								
Dead =	0.65							klf
Live =	0.65							klf
Short=								klf
X Lft=								ft
X Rt =								
MOMENTS.....								
Dead =								k-ft
Live =								k-ft
Short=								k-ft
Dist.=								ft
TRAPEZOIDAL....								
	Dead	Live	Short					Location
Load @ Left =			klf	X Left	=			ft
' @ Right=			klf	X Right	=			ft
Load @ Left =			klf	X Left	=			ft
' @ Right=			klf	X Right	=			ft

----- SUMMARY -----

USE : W21X44, Max Stress Ratio = 0.82, Max Defl Ratio = 441.893

Max Values:	..Actual..	..Allow..	fb / Fb :	% max	=	0.82 OK
Moment	= 131.7	161.6 k-ft	fv / Fv :	% max	=	0.18 OK
.....Stress	= 19.37	23.76 ksi	Max. DL Defl Ratio	=	856	
Shear	= 18.8	104.1 k	Max. TL Defl Ratio	=	442	
.....Stress	= 2.60	14.40 ksi				
Deflection	= -0.760	in				

TABULAR SUMMARY OF LOAD COMBINATIONS...	Placed for Max	OL Only	Dead Load + Skip Loadings			
			LL @Cntr	LL+ST @Cntr	LL @Cants	LL+ST @Cants
Moments..M+ @ Center =	131.7	68.0	131.7			k-ft
M- @ Center =						k-ft
@ Left =						k-ft
@ Right =						k-ft

Shears...@ Left	=	18.8	9.7	18.8		kips
@ Right	=	18.8	9.7	18.8		kips
Defl.....@ Center	=	-0.76	-0.39	-0.76	-0.39	in
@ Left	=					in
@ Right	=					in
@ ft	=					in
Reaction.@ Left	=	18.8	9.7	18.8	9.7	kips

V.J.GERLEY AND ASSOCIATES Title :RYAN RES.
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STEEL BEAM DESIGN & ANALYSIS

@ Right	=	18.8	9.7	18.8	9.7	kips
----- STEEL SECTION DATA -----						
DEPTH	=	20.66 in		Ixx		= 843 in^4
WEB THICKNESS	=	0.350 in		Iyy		=20.700 in^4
FLANGE WIDTH	=	6.500 in		Sxx		=81.606 in^3
FLANGE THICKNESS	=	0.450 in		Syy		= 6.37 in^3
SECTION AREA	=	13.00 in^2		rxx		= 8.053 in
SECTION WEIGHT	=	44.14 #/ft		ryy		= 1.262 in
				rT, y		= 1.570

----- NOTES FROM ALLOWABLE STRESS DETERMINATION -----
F'b : Allowable = 23.76 ksi

Fa calc'd per 1.5-1, K*L/r < Cc
I Beam Passes 1.5.1.4.1, Para 1, 2, 4, & 5, Fb = 0.66 Fy

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BY V. J. GERLEY DATE 3-5-95

SHEET AB OF _____

PROJECT RYAN RES.

SUBJECT _____

COL @ RIGID BM
L = 9'-0"

$P_{DL} = 18.2^k$
 $U = 12.6^k$ USE HDN 20 $P_{ALL} = 15040^k$

$$L/d = \frac{9 \times 12}{5.5} = 20$$

$$F_c' = 100,000 \text{ psi}$$

$$f_c = \frac{18.2}{5.5^2} = 60,000 \text{ psi} < 100,000 \text{ psi}; \text{ OK}$$

V.J.GERLEY AND ASSOCIATES Title :
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 (407) 334-2600 Dsngr : Date:06-Feb-95

PLYWOOD SHEAR WALL DESIGN & ANALYSIS Page

DESCRIPTION)) RYAN RES SW #25 ✓
))

LOADS

LATERAL:

#1 : LAT. SHEAR APPLIED TO WALL= 1040 plf x Length =21496.8 lbs
 #2 : LAT. SHEAR APPLIED TO WALL= plf x Length = lbs
 #3 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
 #4 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
 #5 : MOMENT APPLIED @ TOP OF WALL = ft-#

VERTICAL:

	Load	X-Left	X-Right
#1 : CONCENTRATED	= lbs		ft
#2 : CONCENTRATED	= lbs		ft
#3 : CONCENTRATED	= lbs		ft
#1 : UNIFORM	= 270 plf		ft
#2 : UNIFORM	= plf		ft

DESIGN DATA

PLYWOOD APPLIED TO ONE OR BOTH SIDES ? 1,2 ---)) 2 ((--
 PLYWOOD GRADE: STR I:1, STR II:2 ---)) 2 ((--
 6d, 8d, 10d ---)) 10 ((--
 S: .3125", .375", .50", .594" ---)) 0.5 ((--
 = 16 in WALL LENGTH = 20.67 ft
 POST = 5.5 in WALL HEIGHT = 10 ft
 L WT= WALL WEIGHT = 15 psf
 S = 3 Ht/Width Ratio=0.48379

(S₀ & 1)

SUMMARY

USE..... 0.5 in Plywood Applied To ---)) 2 Side/s
 Required Nail Size =10 d Req'd Nail Spacing = 3 in
 Req'd Field Spacing= 12 in
 Shear Wall Capacity = 600 plf x # of Sides = 1200.00 plf
 Actual Total Shear = 21496.8 lbs Required = 1040.00 plf
 UPLIFT CHECK Moments about lower: ..Left.. ..Right..
 Overturning Moment on Wall = 214968 ft-# 214968
 Resisting Moment From Vert. Loads = 89722 ft-# 89722
 Uplift @ End w/o D.L. reductions = 6059.3 lbs 6059.3 lbs
 Use Simpson HD7A @ Left Side of Wall : Capacity = 9555 lbs
 Use Simpson HD7A @ Right Side of Wall : Capacity = 9555 lbs
 Sill Attachment..... Use 1/2" Anchor Bolt @ 9.7 in o/c
 or 5/8" Anchor Bolt @ 15.3 in o/c
 or 3/4" Anchor Bolt @ 21.9 in o/c

FOOTING DESIGN.....

Reinf. Area @ Left	=	1.411 in ²	Shear @ Left	: OK
@ Right	=	1.411	@ Right	: OK

FOOTING DESIGN & ANALYSIS

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Title :
Scope :
Number :
Misc :
Dsngn : Date:06-Feb-95

PLYWOOD SHEAR WALL DESIGN & ANALYSIS

FOOTING SIZE :

LEFT OF WALL	=	2 ft	CONCRETE WEIGHT	=	145 pcf
Wall Length	=	20.67 ft	REBAR COVER	=	3 in
RIGHT OF WALL	=	ft	f'c	=	3,000
			Fy	=	60,000
Overall Length	=	22.67 ft	MIN. As %	=	0.0014

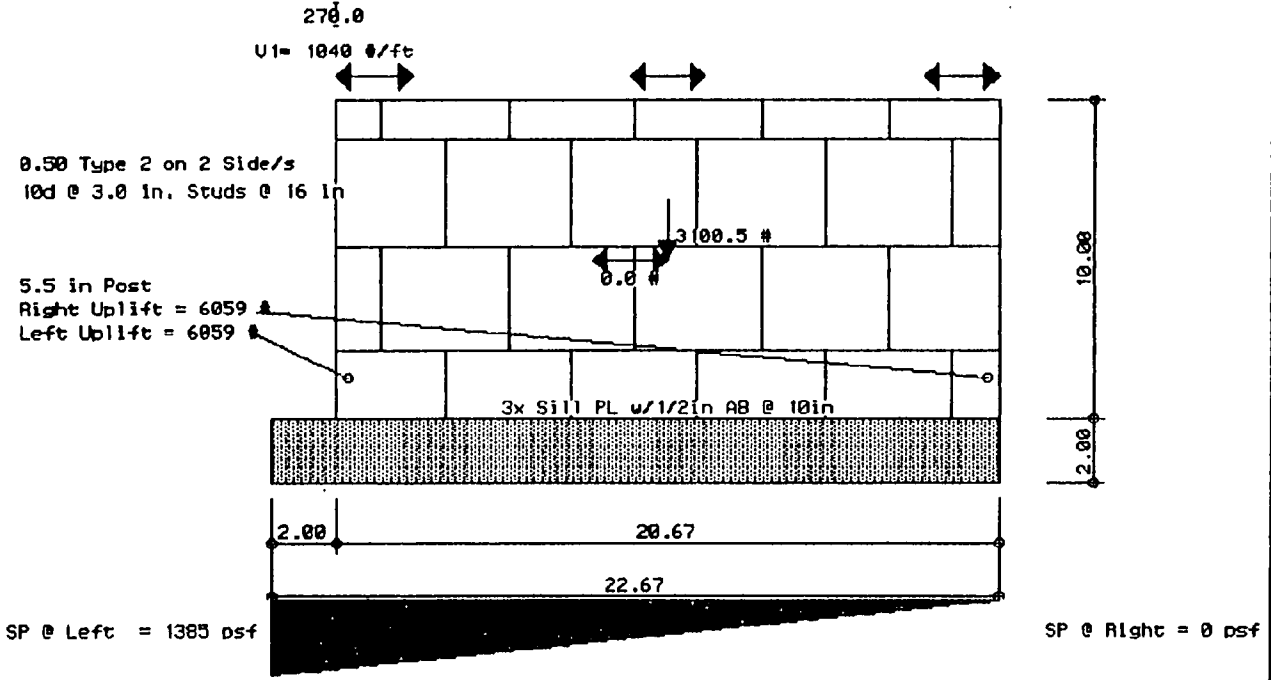
FOOTING WIDTH	=	4 ft	Total Vert Loads	=	34,979 lbs
THICKNESS	=	24 in	Kern Distance	=	3.78 ft

Lateral Load Applied Toward	-----))	Left	Right
		-----	-----
Ecc. of resultant @ footing CL	=	-7.13 ft	7.62 ft
Soil Pressure @ LEFT Side of Footing	=	1,385 psf	psf
Soil Pressure @ RIGHT Side of Footing	=	psf	1,571 psf
Mn @ Left Face Of Wall	=	7962.4 ft-#	3248.0 ft-#
Mn @ Right Face Of Wall	=	ft-#	ft-#
vu/.85 @ 'd' from Left Face Of Wall	=	psi	psi
vu/.85 @ 'd' from Right Face Of Wall	=	psi	psi
Allowable Shear	=	109.5 psi	109.5 psi
Overturning Moment	=	257962 ft-#	257962 ft-#
Resisting Moment	=	405164 ft-#	387801 ft-#
.....FACTOR OF SAFETY	=	1.57 ft-#	1.50

PLYWOOD SHEAR WALL & FOOTING DESIGN

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SU #25



[ESC]:QUIT

[F1]:Forces Acting LEFT

[F2]:Forces Acting RIGHT

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Title : RYAN RES.
Scope :
Number: 95-19
Misc :
Dsngr : V.J.GERLEY Date:06-Feb-95

PLYWOOD SHEAR WALL DESIGN & ANALYSIS Page

DESCRIPTION)) RYAN RES SW #23 (9)
))

LOADS

LATERAL:

#1 : LAT. SHEAR APPLIED TO WALL= 422 plf x Length = 1899 lbs
#2 : LAT. SHEAR APPLIED TO WALL= plf x Length = lbs
#3 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
#4 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
#5 : MOMENT APPLIED @ TOP OF WALL = ft-#

VERTICAL:

	Load	X-Left	X-Right
#1 : CONCENTRATED	= lbs		ft
#2 : CONCENTRATED	= lbs		ft
#3 : CONCENTRATED	= lbs		ft
#1 : UNIFORM	= 60 plf		ft
#2 : UNIFORM	= plf		ft

DESIGN DATA

PLYWOOD APPLIED TO ONE OR BOTH SIDES ? 1,2 ---)) 2 ((--
PLYWOOD GRADE: STR I:1, STR II:2 ---)) 2 ((--
NAIL SIZE: 6d, 8d, 10d ---)) 10 ((--
SHEATHING THICKNESS: .3125", .375", .50", .594" ---)) 0.5 ((--

STUD SPACING = 16 in WALL LENGTH = 4.5 ft
LEAST DIM. OF END POST = 3 in WALL HEIGHT = 10 ft
SEIS. FACTOR FOR WALL WT= WALL WEIGHT = 15 psf
NOMINAL SILL THICKNESS = 3 Ht/Width Ratio=2.22222

SUMMARY

USE..... 0.5 in Plywood Applied To ---)) 2 Side/s

Required Nail Size =10 d Req'd Nail Spacing = 6 in
Req'd Field Spacing= 12 in

Shear Wall Capacity = 310 plf x # of Sides = 620.00 plf;
Actual Total Shear = 1899 lbs Required = 422.00 plf;

UPLIFT CHECK Moments about lower: ..Left.. ..Right..
Overturning Moment on Wall = 18990 ft-# 18990
Resisting Moment From Vert. Loads = 2126 ft-# 2126

Uplift @ End w/o D.L. reductions = 3747.5 lbs 3747.5 lbs;

Use Simpson HD5A @ Left Side of Wall : Capacity = 4385 lbs;
Use Simpson HD5A @ Right Side of Wall : Capacity = 4385 lbs;

Sill Attachment..... Use 1/2" Anchor Bolt @ 24.0 in o/c
or 5/8" Anchor Bolt @ 37.6 in o/c
or 3/4" Anchor Bolt @ 48.0 in o/c

USE SW #1 ✓

FOOTING DESIGN.....
 Reinf. Area @ Left = 1.411 in² Shear @ Left : OK
 @ Right = 1.411 @ Right : OK

----- FOOTING DESIGN & ANALYSIS -----

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 CONSULTING ENGINEERS Scope :
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----- PLYWOOD SHEAR WALL DESIGN & ANALYSIS -----

FOOTING SIZE : **F3**
 LEFT OF WALL = 2 ft CONCRETE WEIGHT = 145 pcf
 Wall Length = 4.5 ft REBAR COVER = 3 in
 RIGHT OF WALL = 2 ft f'c = 3,000
 ----- Fy = 60,000
 Overall Length = 8.5 ft MIN. As % = 0.0014

FOOTING WIDTH = 4 ft Total Vert Loads= 10,805 lbs
 THICKNESS = 24 in Kern Distance = 1.42 ft

Lateral Load Applied Toward	----->>>	Left	Right
		-----	-----
Ecc. of resultant @ footing CL	=	-2.11 ft	2.11 ft
Soil Pressure @ LEFT Side of Footing	=	841 psf	psf
Soil Pressure @ RIGHT Side of Footing	=	psf	841 psf
Mn @ Left Face Of Wall	=	3101.1 ft-#	3248.0 ft-#
Mn @ Right Face Of Wall	=	3248.0 ft-#	3101.1 ft-#
vu/.85 @ 'd' from Left Face Of Wall	=	psi	psi
vu/.85 @ 'd' from Right Face Of Wall	=	psi	psi
Allowable Shear	=	109.5 psi	109.5 psi
Overturning Moment	=	22788 ft-#	22788 ft-#
Resisting Moment	=	45921 ft-#	45921 ft-#
.....FACTOR OF SAFETY	=	2.02 ft-#	2.02

RYAN RESIDENCE
FOOTING SCHEDULE

MK	SIZE B D t	REINFORCING	T/EL	REMARKS
F1	2'-0" x L x 1'-6"	4#5 BOT	(-) 2'-0"	
F2	3'-0" x L x 1'-6"	5#5 BOT	(-) 2'-0"	
F3	4'-0" x L x 2'-0"	5#5 BOT	0'-0"	
F4	2'-0" x L x 1'-6"	4#5 BOT	0'-0"	
F5	4'-0" x 4'-0" x 2'-0"	5#5 BOT F.W.	0'-0"	
F6	4'-0" x 4'-0" x 2'-0"	5#5 BOT F.W.	(-) 2'-0"	

BEAM SCHEDULE

MK	SIZE	REINFORCING	STIRRUP	T/EL	REMARKS
B1					
B2					
B3					
B4					
B5					

COLUMN SCHEDULE

MK	SIZE	REINFORCING	TIES	TYPE	REMARKS
C1	6 x 6	-	-	#2 PINE	
C2	3-2 x 6	-	-	#2 PINE	
C3					
C4					
C5					

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RYAN RES,
SHEAR WALL SCHEDULE

MK	DESCRIPTION
SW #1	2x6 @ 12" WALL BLOCKED @ 1/3 POINTS & 6x6 END POSTS W/ HD 7A ANCHOR W/ 1/2" PLYWOOD E.F. W/ 10d NAILS @ 3" C.C. & SPC FROM PLATE TO STUD & 2-2x6 BOTI PLATE W/ 3d & AB'S @ 2'-0" C.C.
SW #2	2x4 @ 16" WALL BLOCKED @ MID POINT & 4x4 END POSTS W/ HD 2A ANCHOR W/ 5/8" DRYSWALL EAFMC W/ 6d NAILS @ 4" C.C. & SPC FROM PLATE TO STUD & 2-2x4 BOTI PLATE W/ 3d & AB'S @ 4'-0" C.C.
SW	
SW	
SW	
SW	
SW	
SW	

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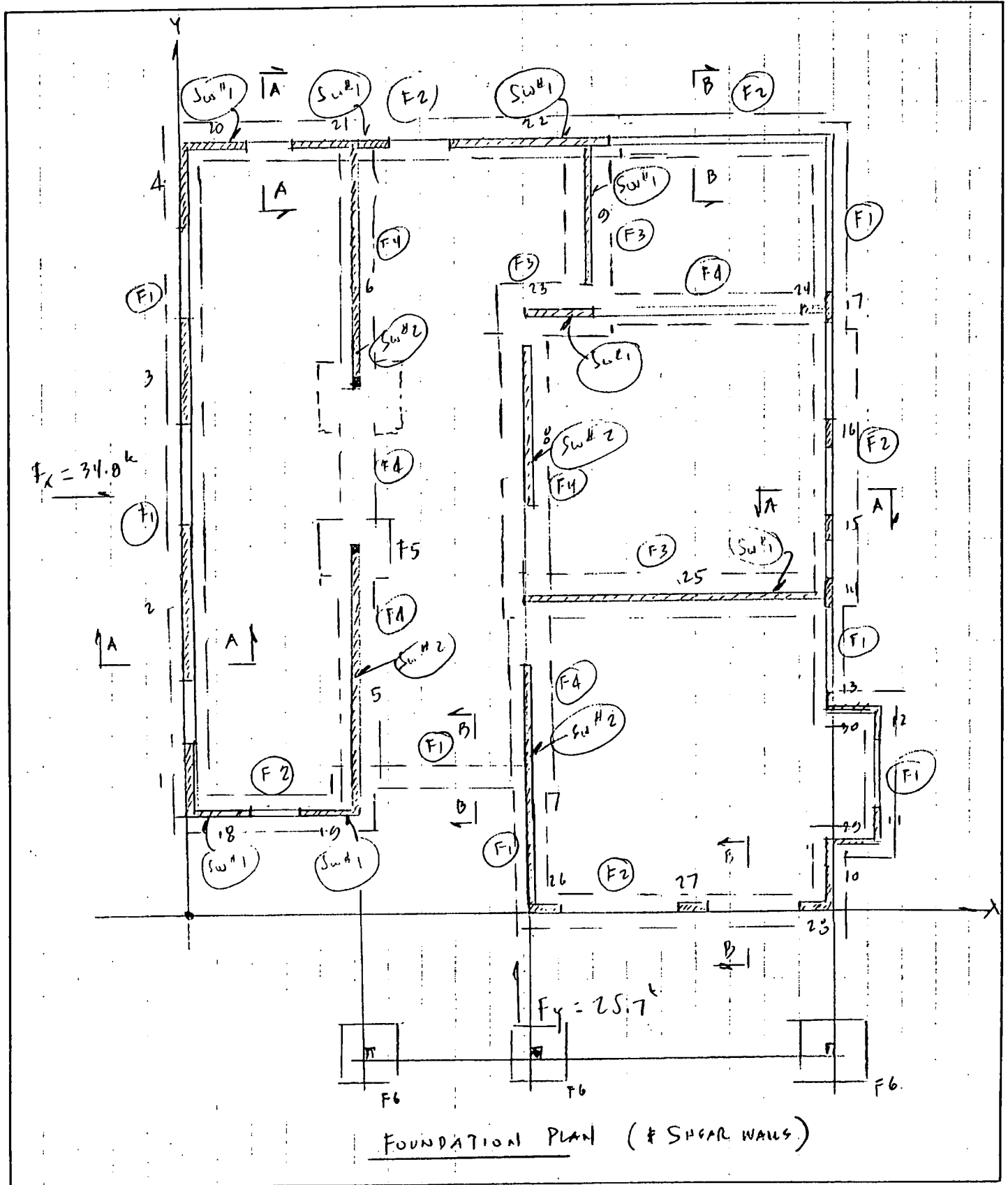
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DATE 3-3-95

SHEET 4 OF

PROJECT RYAN RFS.

SUBJECT



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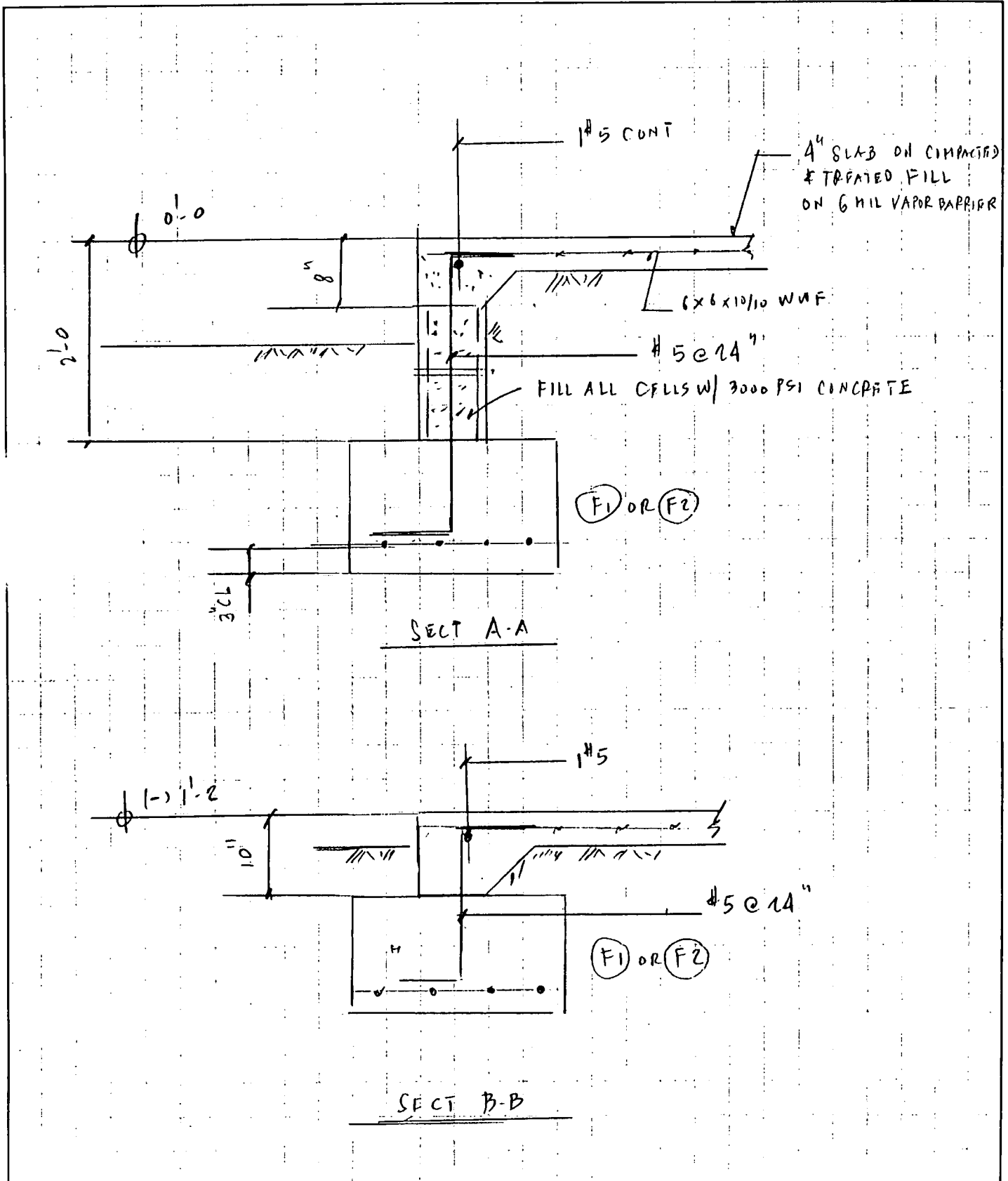
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SHEET 5 OF _____

PROJECT RYAN RESIDENCE

SUBJECT _____



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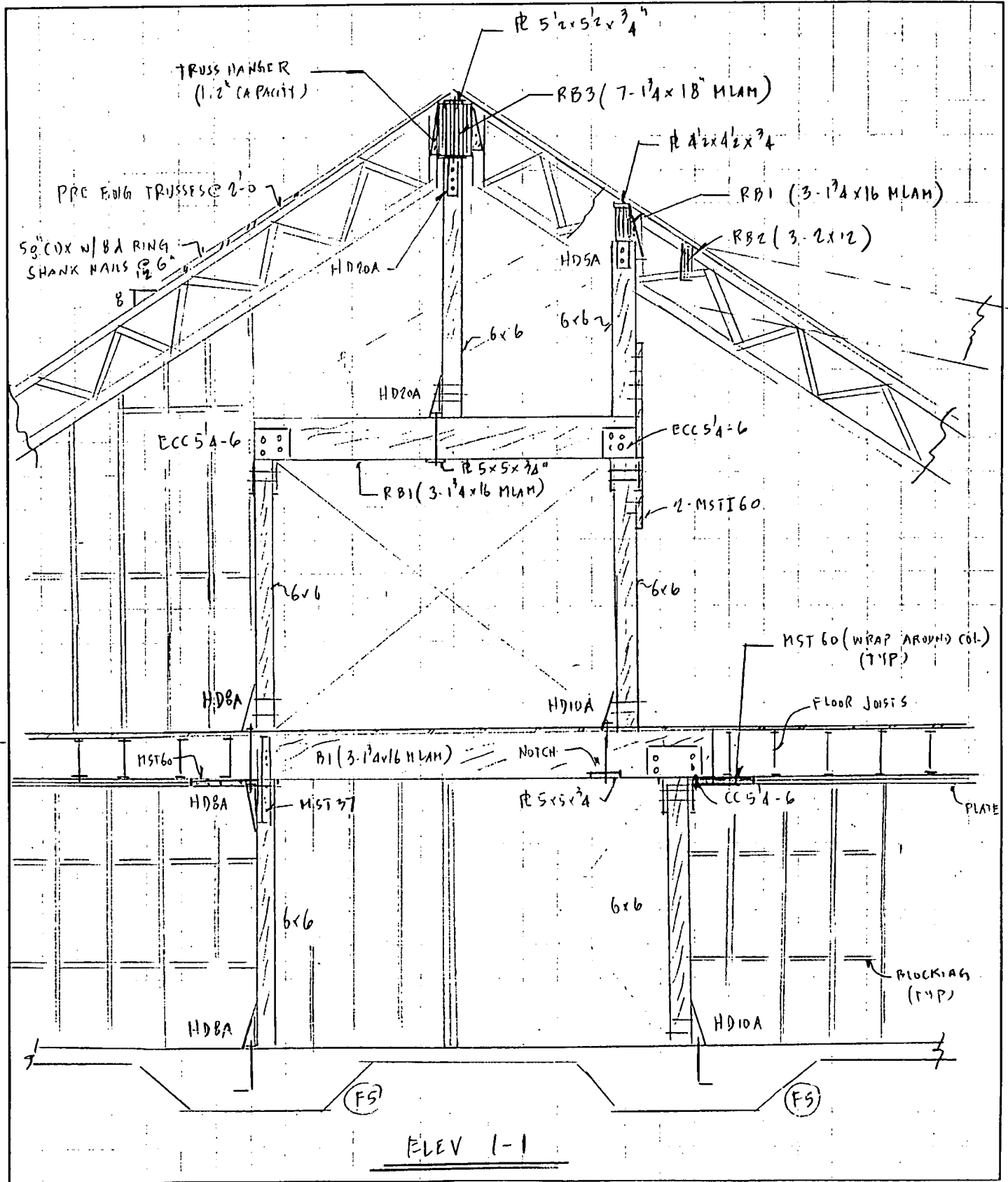
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SHEET 6 OF

PROJECT RYAN RES.

SUBJECT



912

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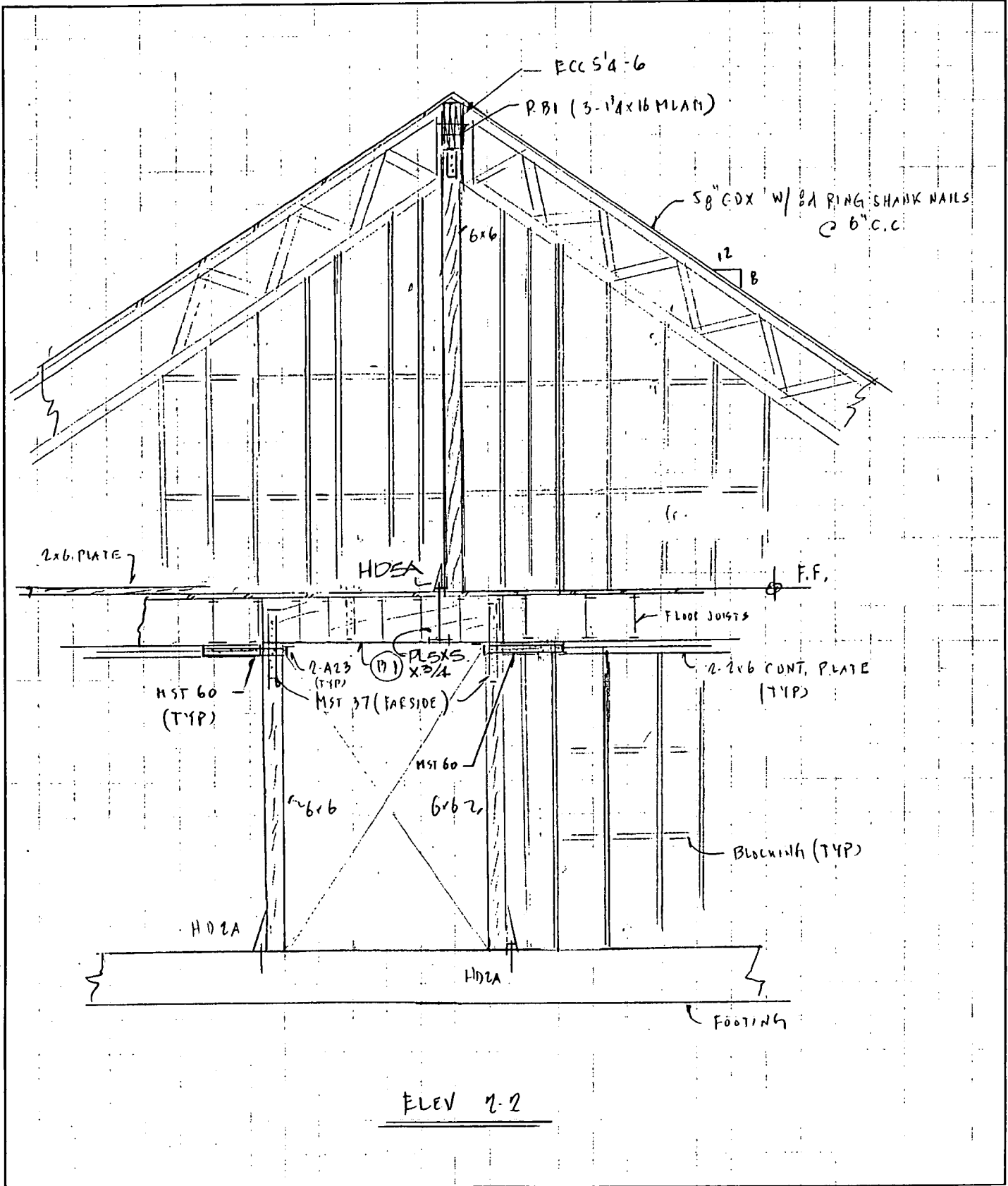
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SHEET 7 OF

PROJECT RYAN RES.

SUBJECT



ELEV 2-2

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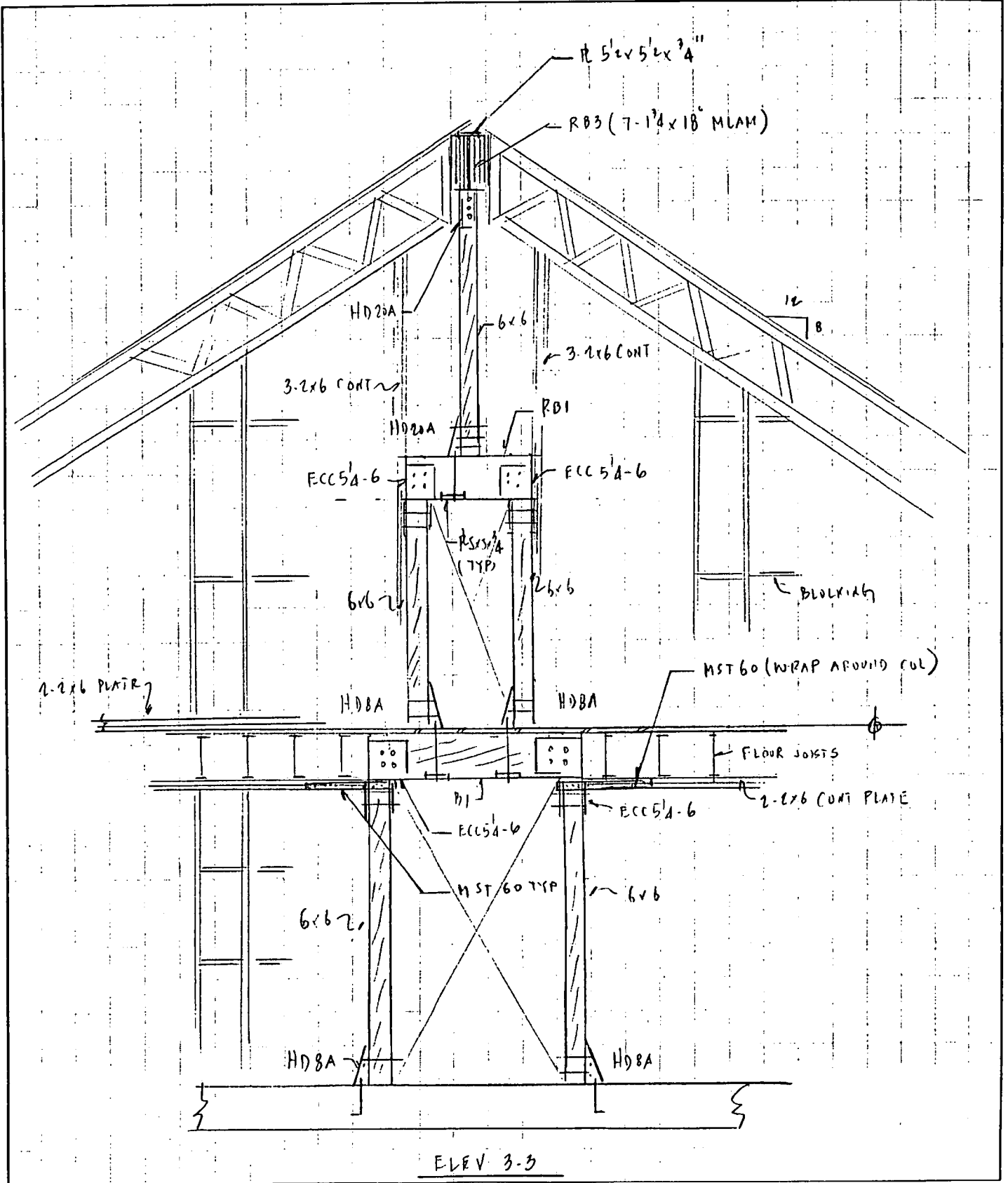
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SHEET 8 OF

PROJECT RYAN RES.

SUBJECT



9
12.

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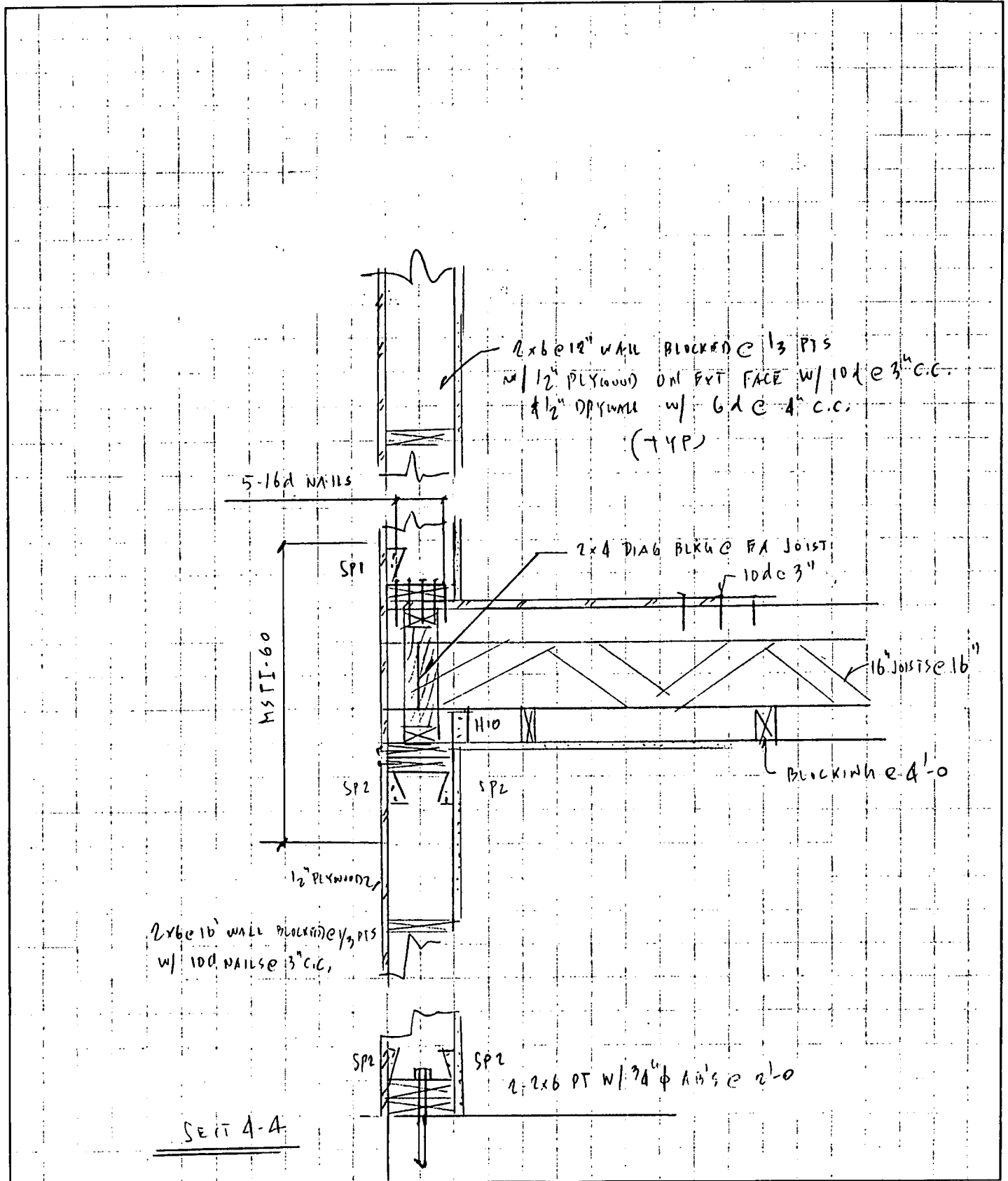
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PROJECT RYAN RES.

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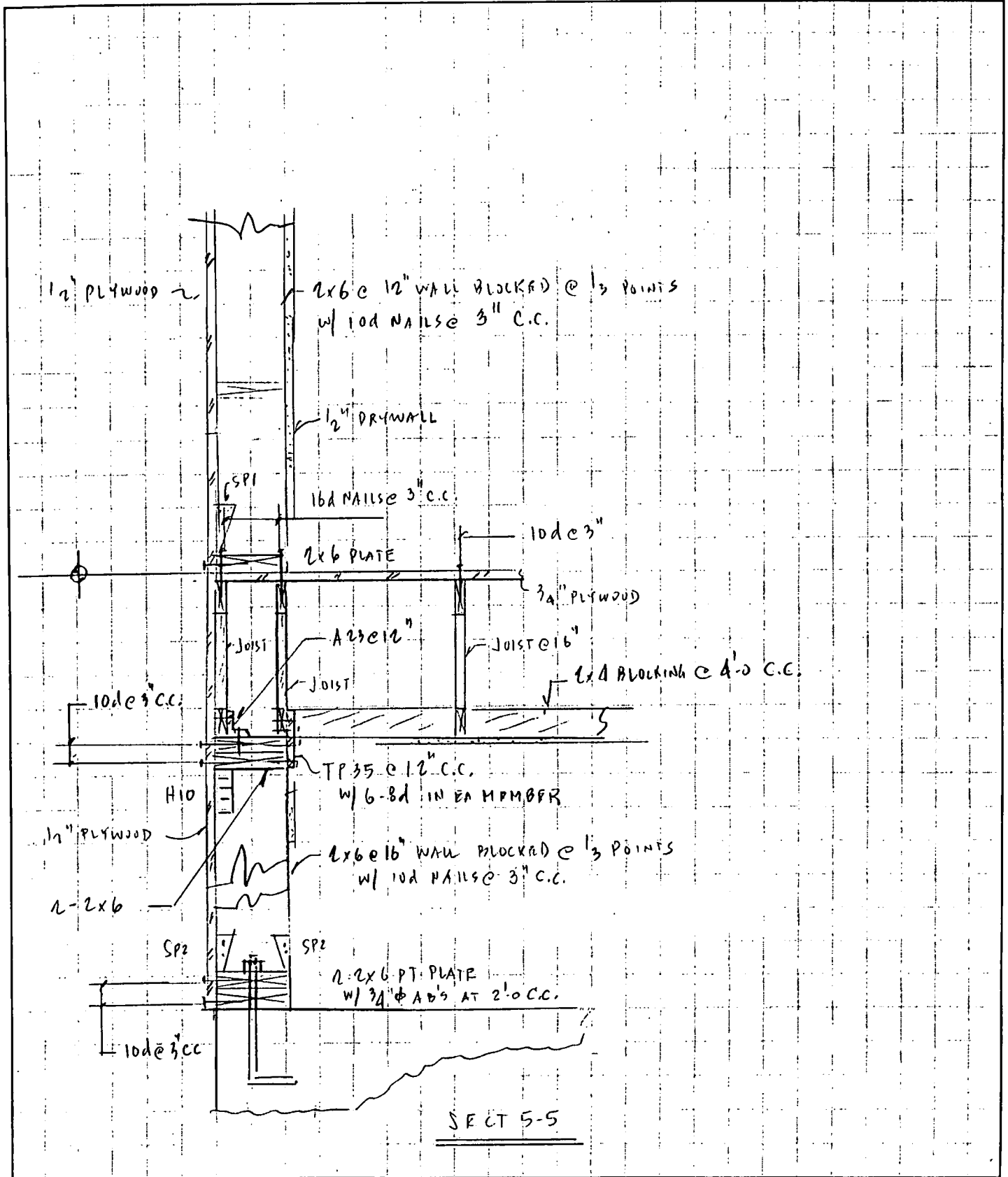
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SHEET 10 OF

PROJECT RYAN RES.

SUBJECT



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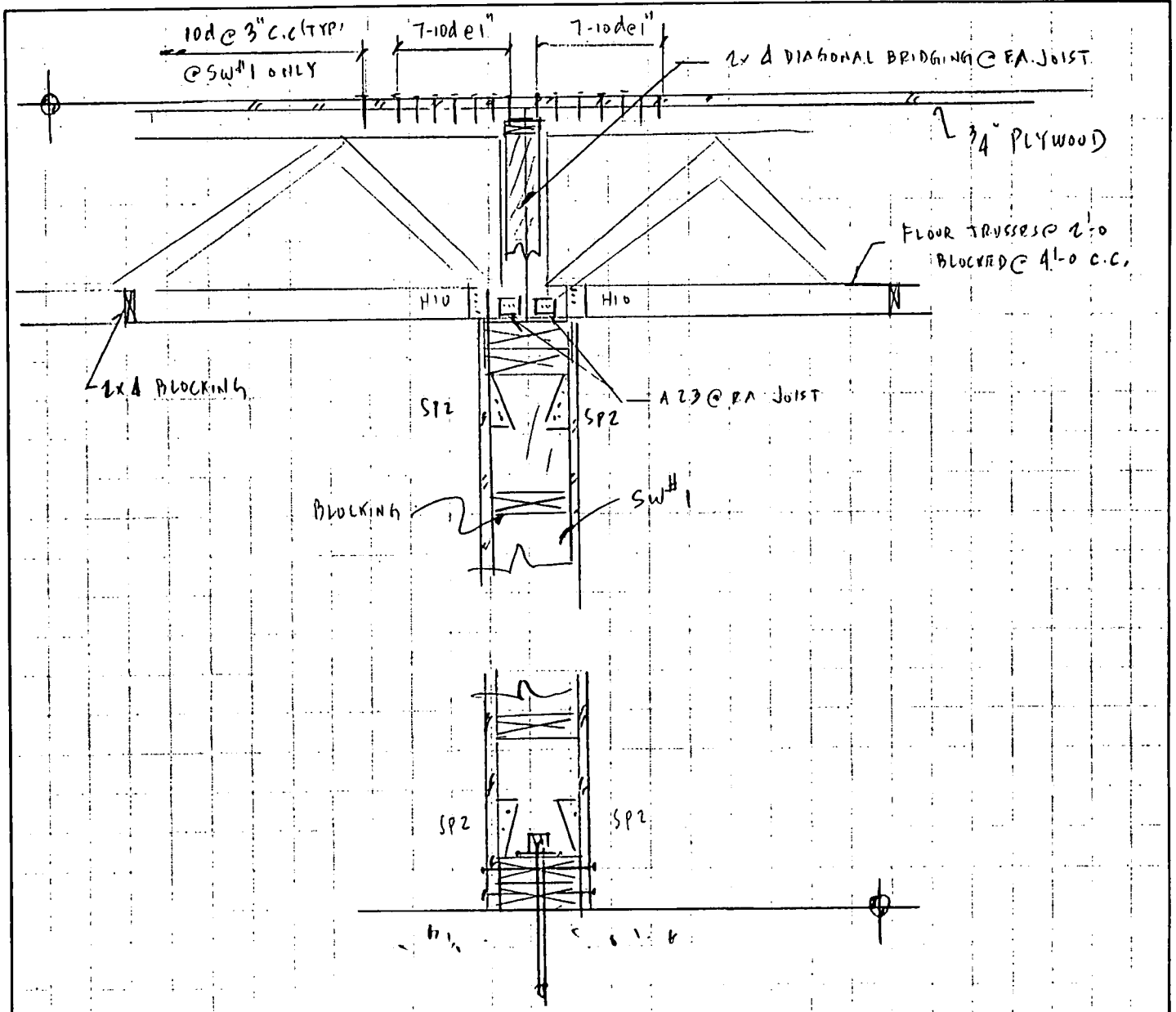
BY V.J. GERLEY

DATE 3-3-95

SHEET 11 OF

PROJECT RYAN RES.

SUBJECT



V.L.C

SECT. 6-6

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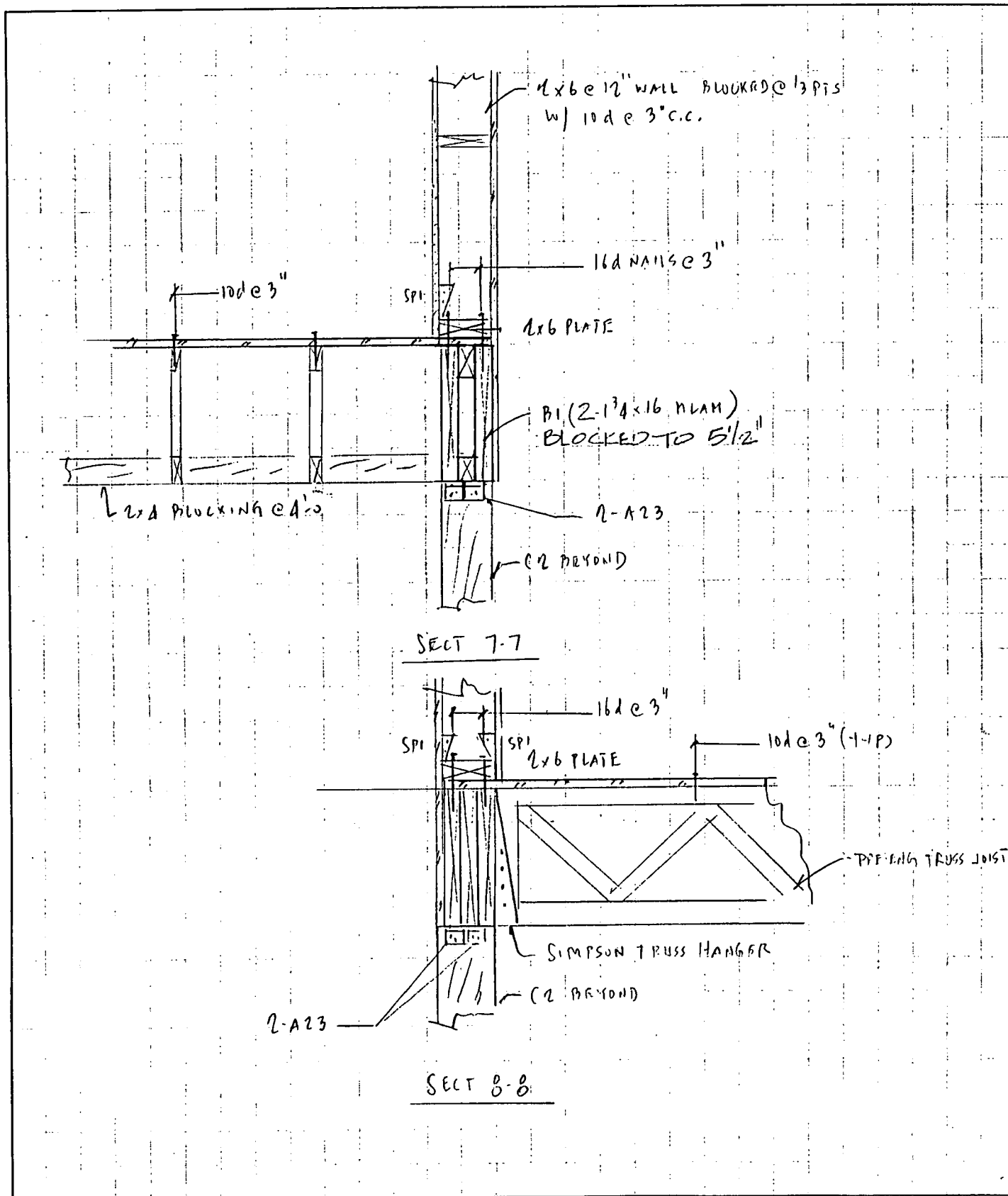
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DATE 3-3-95

SHEET 12 OF

PROJECT RYAN RES.

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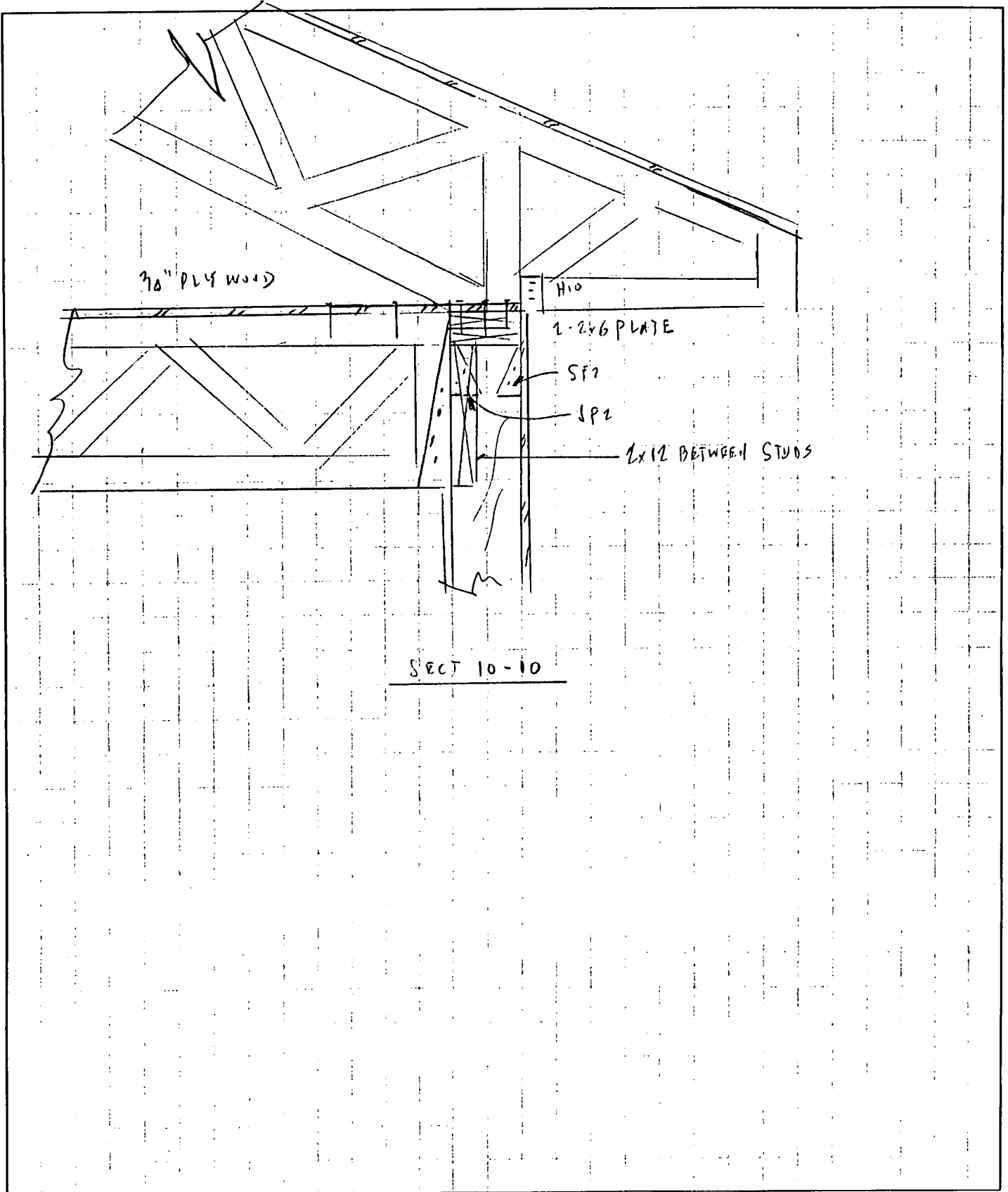
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BY V. J. GERLEY DATE 3-3-95

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PROJECT _____ RYAN RES.

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BY V. J. GERLEY

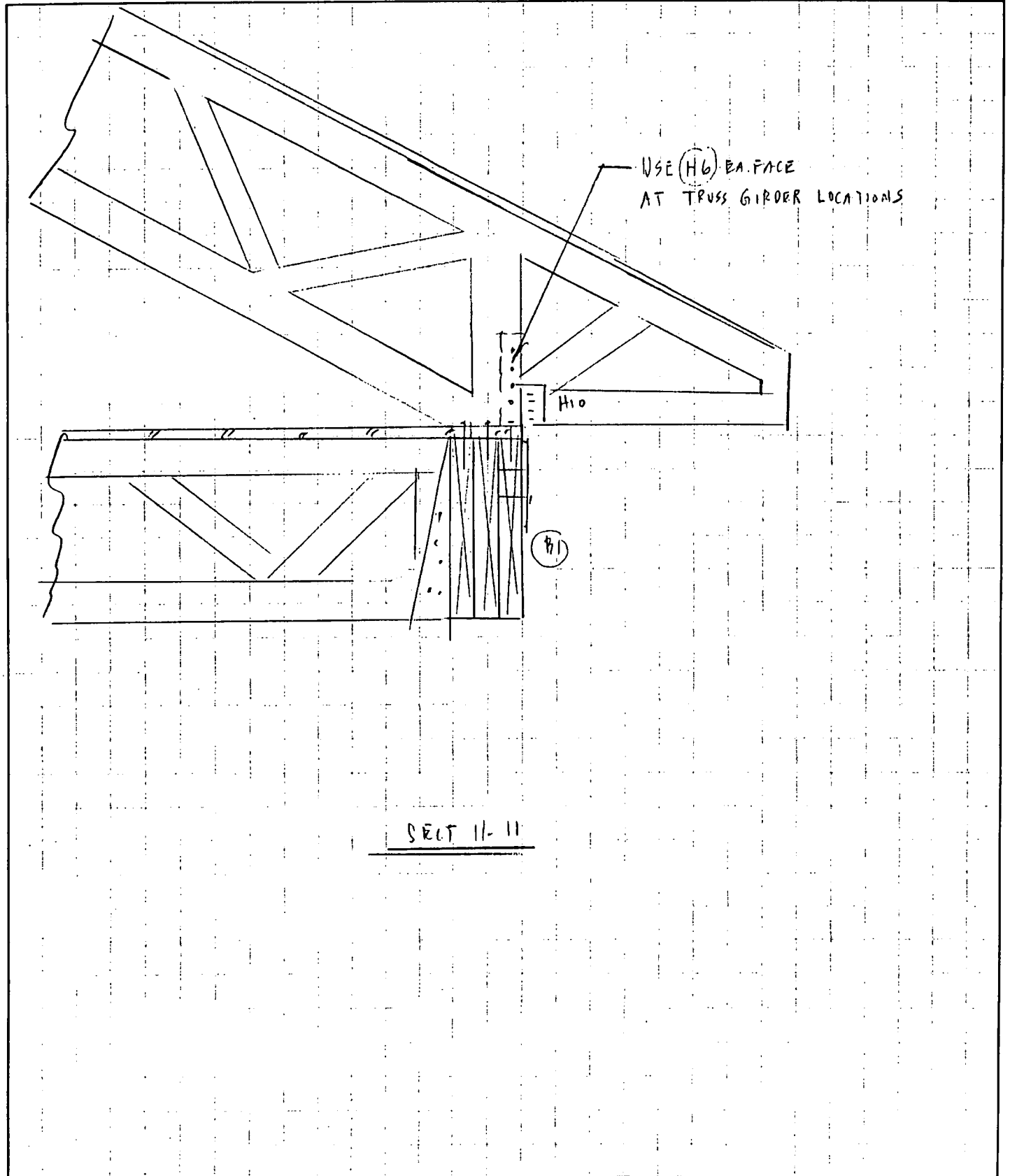
DATE 3-3-95

SHEET 15 OF

PROJECT

RYAN RESIDENCE

SUBJECT



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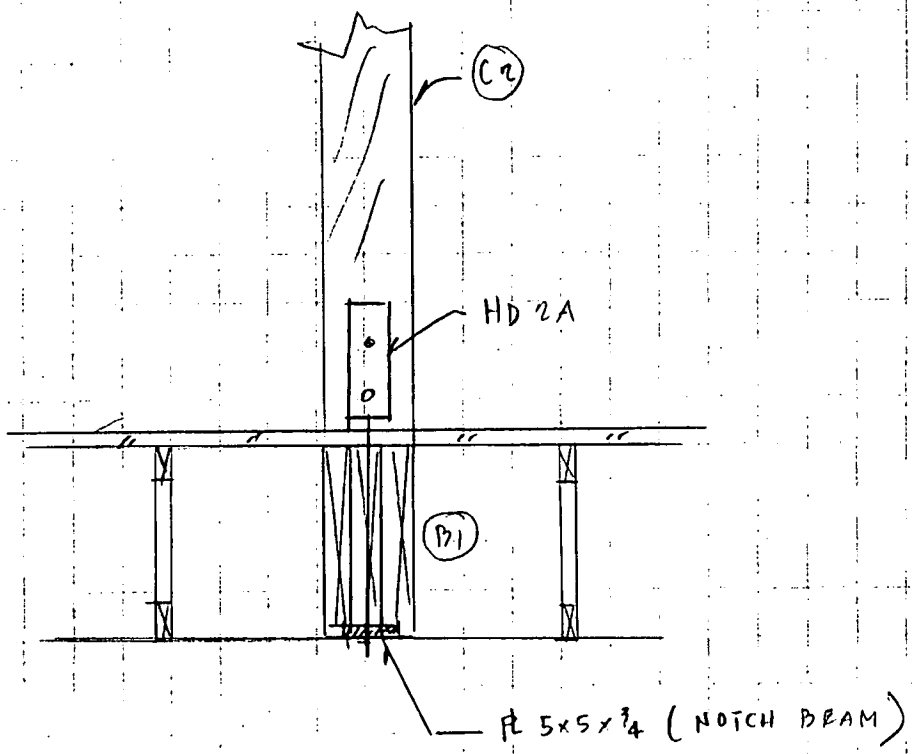
BY V. J. GERLEY

DATE 3-3-95

SHEET 16 OF

PROJECT RYAN RES.

SUBJECT



SECT 12-12

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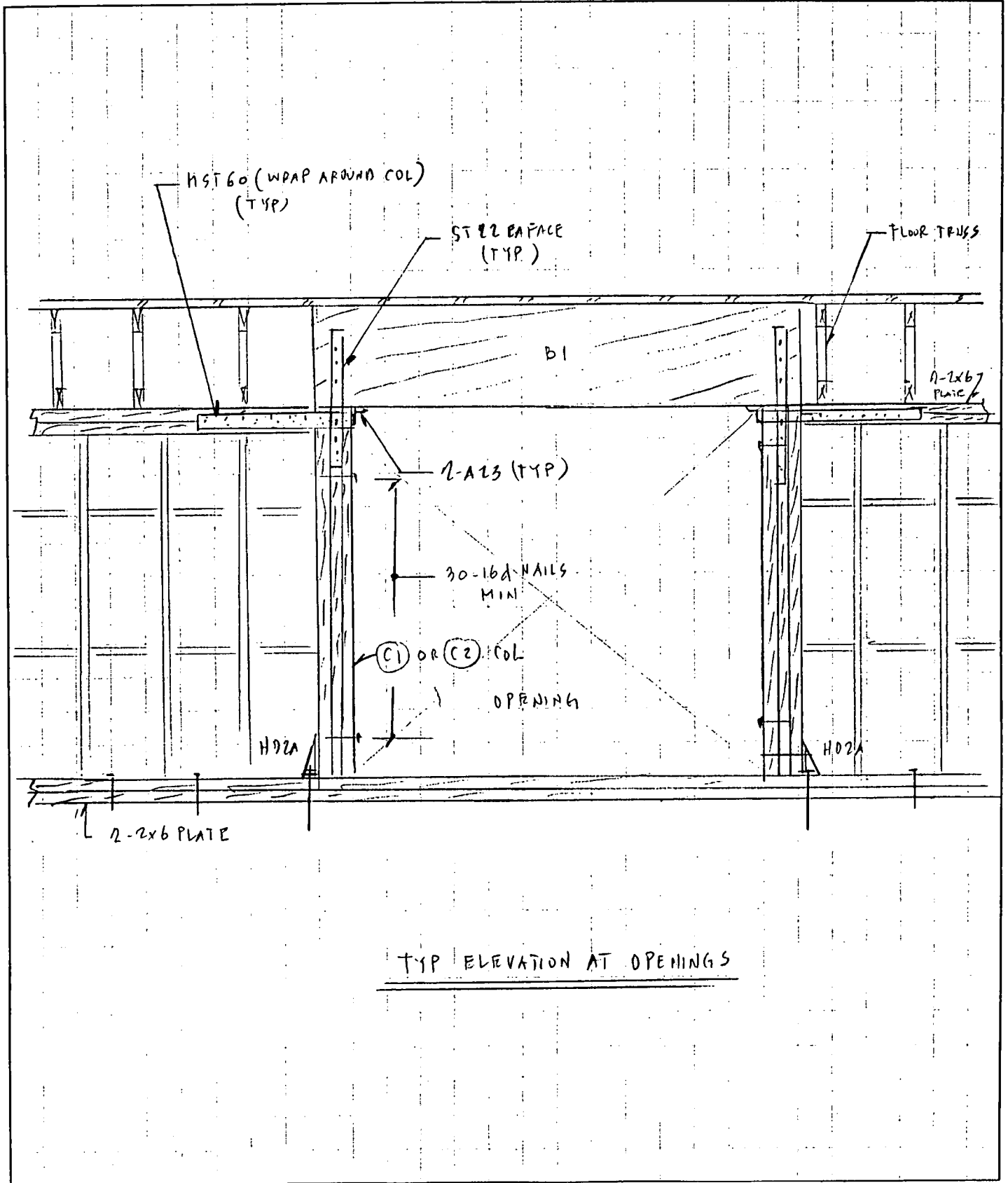
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SHEET 17 OF

PROJECT RYAN RESIDENCE

SUBJECT



TYP ELEVATION AT OPENINGS

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GENERAL NOTES

DESIGN:

Design of the structure is based on the South Florida Building Code and all other applicable Standards.

SUPERIMPOSED LOADS:

Floor: 40psf L.L. Wind Velocity: 140 mph
Roof : 30psf L.L. 15psf D.L.(Partitions)

SOIL:

Clear the building areas of trees, roots, organics and other deleterious materials.
Backfill with selected granular material in 15" maximum lifts and compact to a minimum density of 95% as determined by ASTM D-1557
Areas that are re-excavated for foundation installation shall be tested and satisfy a minimum of 95% Modified Proctor density. Allowable gross soil pressure for foundation design shall be 2500 psf and shall be verified by a Testing Laboratory.

CONCRETE:

Concrete shall develop a minimum strength of 3000 psi at 28 days.
All concrete shall be ready-mixed and in accordance with ASTM C-94. Provide 1.5 lbs/C.Y. of FIBERMESH for concrete to be used for footings, grade beams and slabs.
Slump and cylinder tests shall be performed by an independent testing laboratory. Provide 4 tests for each concrete placement and/or 4 tests for each 50 cu.yds.
Maximum allowable slump shall be 5 inches.

REINFORCING:

Reinforcing steel shall be deformed, new billet steel in accordance with ASTM A-615 Grade 60 and detailed per ACI 315.
All splices shall be in accordance with Chapter 7 of ACI 318-81, with a minimum splice of 40 bar diameters.
Fabricator shall submit four sets of shop drawings for the review and approval of the Engineer.

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MASONRY:

Concrete block units shall conform with ASTM C-90.
Placement of unit masonry shall be in straight, plumb and true to a tolerance of 1/8" in ten feet.
Provide "Dur-O-Wal" standard weight all galvanized #9 gage truss reinforcing at every second course of masonry.
Lay concrete blocks in running bond with successive courses lapped 1/2 of a unit.

WOOD:

Wood for beams, columns and decking for exterior applications shall be pressure treated SOUTHERN PINE No.2 KD
Minimum Fb=1500 psi and E=1,600,000 psi

Wood for interior applications shall be HEM-FIR No.1
Minimum Fb=1200 psi and E=1,500,000 psi

MICRO-LAM beams shall be fabricated and erected in accordance with the specifications of the TRUS JOIST CORPORATION.

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SHEET 20 OF

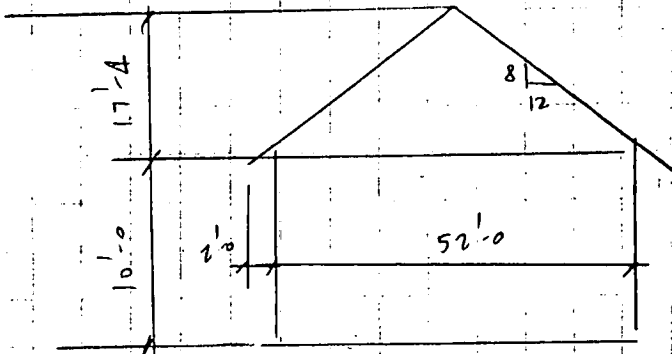
PROJECT RYAN RES.

SUBJECT

SEWAN'S PT

V = 140 mph
SFBC

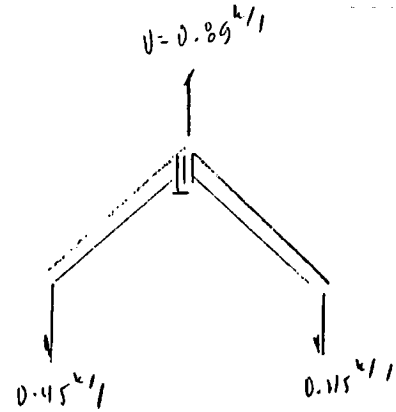
$\phi = 34^\circ$



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SFBC3.WKS	ENCL.BLDG.	PROJECT:RYAN RES	SO.FLA.BLDG CODE
18.671 H to select w	30(A<40	-0.8=u	-0.3=u
10 H1		H2	V2
17.342 H2 select A		M2	V2
52 B		H1	
2 b Overhang		Mb	B
.024 u uplift(psf)	H		U
.8865689 U Uplift(k/ft)			
.052 p			
.26 V1			
3.23879 M2			
.63352 V2 select A			
6.3352 Mbase(k-ft/ft)	-Vwall-	V1---	
.63352 Vwall(k/ft)			
40 w select			

V=140 mph
 GCps=-0.8(roof)
 GCps=1.30(wall)
 GCpc=1.50(overhg)
 GCpc=1.10(wall)
 <
 <
 < p
 <
 <
 <
 <
 <



H	w	SLOPE	TAN A(To calc.H2 & V2)	
		30<40		
0-5	30			
6-15	37			
16-25	45	8:12	.667	
26-35	50	9:12	.75	
36-55	56	10:12	.833	Wall design w= .044
				Wall moment = .55
				Roof D.L.=8psf

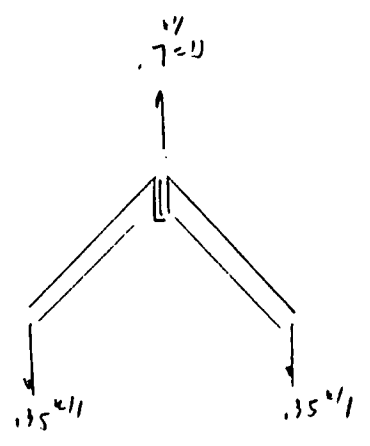
Variables H,w,S effect: u,p,Wwall,Mwall

SFBC.WKS	STORY	ANGLE	TYPE
1	1	10<20	ENCL
2	1	20<30	ENCL
3	1	30<40	ENCL
4	1	40<50	ENCL

5	2	10<20	ENCL
6	2	20<30	ENCL
7	2	30<40	ENCL
8	2	40<50	ENCL

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SFBC3.WKS	ENCL.BLDG.	PROJECT:RYAN RES	SO.FLA.BLDG CODE
16.3365 H to select w	30(A(40	-0.8=u	-0.3=u
10 H1		H2	V=140 mph
			GCps=-0.8(roof)
			GCps=1.30(wall)
12.673 H2 select A			GCpc=1.50(overhg
38 B		H2	GCpc=1.10(wall)
2 b Overhang			
.024 u uplift(psf)			
.6874267 U Uplift(k/ft)	H		
.052 p		H1	p
.26 V1			
1.77511 M2			
.54014 V2 select A		Mb	
5.4014 Mbase(k-ft/ft)			
.54014 Vwall(k/ft)			
40 w select			



H	w	SLOPE	TAN A(To calc.H2 & V2)	
		30(40		
0-5	30			
6-15	37			
16-25	45	8:12	.667	
26-35	50	9:12	.75	
36-55	56	10:12	.833	Wall design w= .044
				Wall moment = .55
				Roof D.L.=8psf

Variables H,w,S effect: u,p,Wwall,Mwall

SFBC.WKS	STORY	ANGLE	TYPE
1	1	10(20	ENCL
2	1	20(30	ENCL
3	1	30(40	ENCL
4	1	40(50	ENCL

5	2	10(20	ENCL
6	2	20(30	ENCL
7	2	30(40	ENCL
8	2	40(50	ENCL

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BY V. J. GERLEY

DATE 3-3-95

SHEET 23 OF

PROJECT

RYAN RES

SUBJECT

VERTICAL DIAPH.

WAVE #	t	φ	L	X	Y	V _{MAX}	H _{MAX} ^{√ VV10}	S	f _V (K11)	f _H (K11)
1	6 ⁹	90	4.0	0.25	6.0	.55	5.5	1.73	.14	4.14
2	6	90	8.0	0.25	18.0	2.3	23	5.33	.29	4.31
3	6	90	8.0	0.25	32.25	2.3	23	5.33	.29	4.31
4	6	90	4.5	0.25	45.0	.72	7.2	1.7	.16	4.23
5(I)	4 ⁹	90	15.5	12.5	12.75	4.1	41	13.2	.265	3.1
6(J)	4 ⁹	90	19.0	12.5	37.7	5.3	33	19.9	.29	2.7
7(I)	4	90	16.5	20.0	8.0	5.2	32	15.0	.315	3.5
8(I)	4	90	9.0	20.0	78.0	2.2	22	4.5	.244	4.9
9	6 ⁹	90	7.75	23.5	43.5	2.8	28	5.0	.301	5.6
10	↓	90	5.0	40.25	2.5	1.7	17	2.1	.324	8.1
11	↓	90	3.5	43.25	6.5	.8	8	1.0	.329	8.0
12	↓	90	3.5	43.25	13.5	.8	8	1.0	.329	8.0
13	↓	90	2.0	40.25	10.5	.2	2	.33	0.1	6.1
14	↓	90	2.0	40.25	20.0	.2	2	.33	0.1	6.1
15	↓	90	2.0	40.25	25.5	.2	2	.33	0.1	6.1
16	↓	90	2.0	40.25	33.5	.2	2	.33	0.1	6.1
17	↓	90	2.0	40.25	36.0	.2	2	.33	0.1	6.1
18	↓	90	4.5	2.25	4.0	2.0	20	1.7	0.414	11.8
19	6 ⁹	—	4.0	10.75	4.0	1.5	15	1.33	0.375	11.3
20	↓	—	4.0	2.0	47.0	1.5	15	1.33	0.375	11.3
21	↓	—	4.0	11.75	47.0	1.5	15	1.33	0.375	11.3
22	↓	—	6.75	21.25	47.0	4.0	40	3.26	0.640	12.3
23	↓	—	4.5	27.0	36.5	1.9	19	1.7	0.422	11.2
24	↓	—	1.0	40.0	36.5	0	0	.1	0	0
25	6 ⁹	—	20.75	30.0	20.5	21.6	216	35.9	1.04	6.0
26	↓	—	1.5	70.5	0.25	.11	1	.2	0.07	5
27	↓	—	1.5	70.0	0.25	.11	1	.2	0.07	5
28	↑	—	2.25	39.5	0.25	.34	3.4	.4	0.18	3.5
29	↑	—	3.5	42	11.75	1.1	11	1.0	0.286	11.0
30	6	—	3.5	42	15.25	1.0	10	1.0	0.286	10.0

I = Interior

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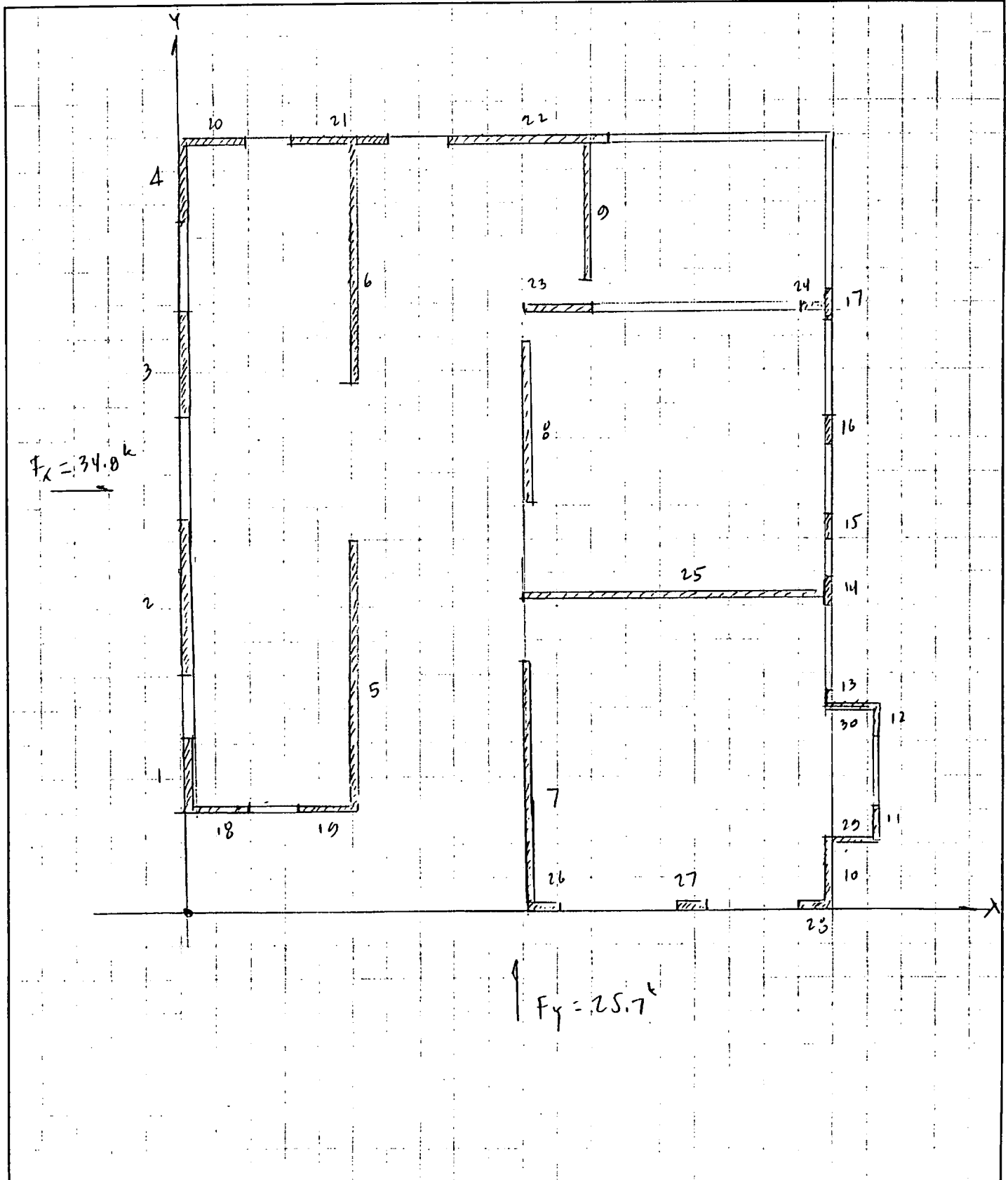
DATE 3-5-95

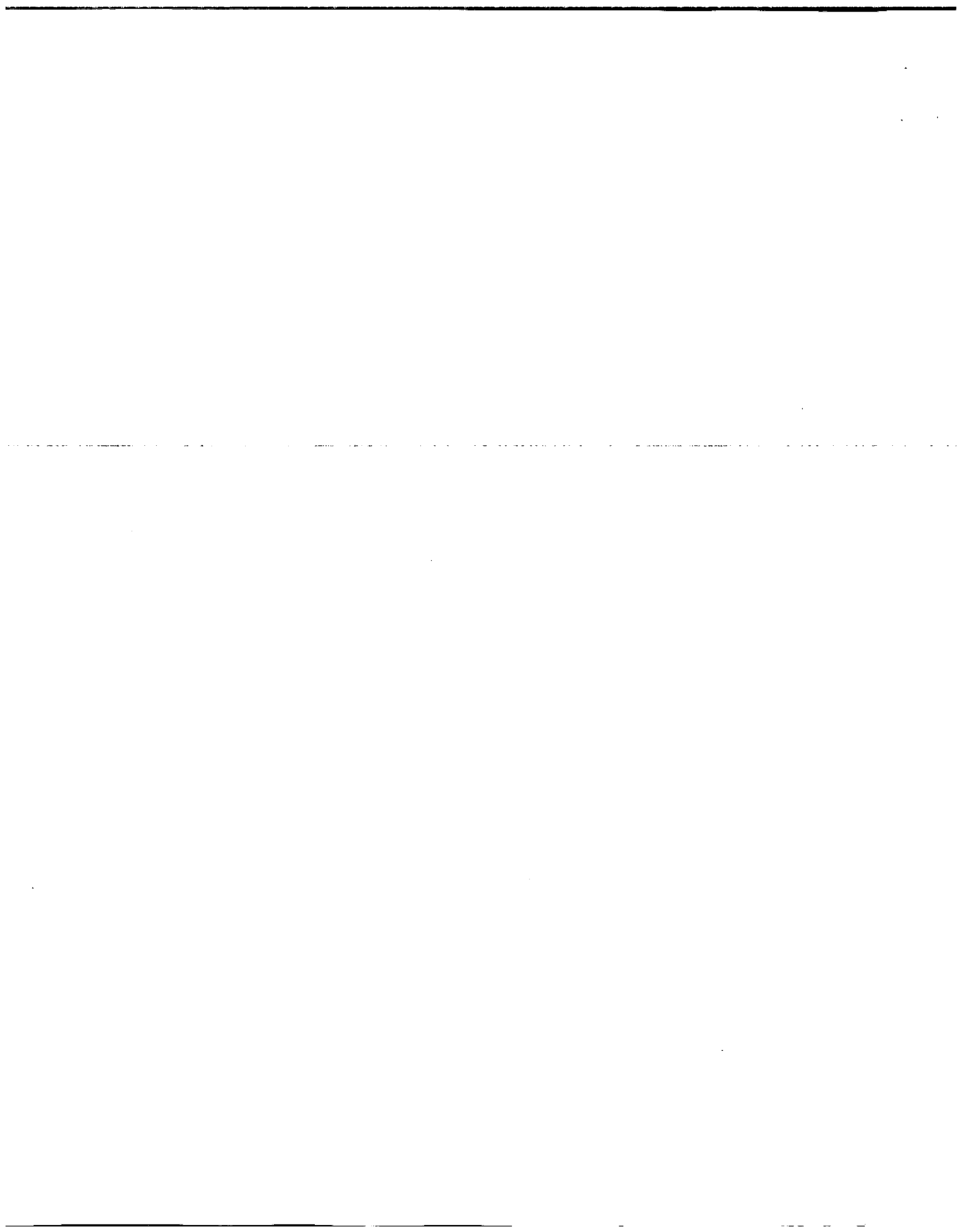
SHEET 24 OF _____

PROJECT _____

RYAN RES.

SUBJECT _____





CONSULTING ENGINEERS
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 JENSEN BEACH, FL. 34957
 (407) 334-2600

Scope :
 Number: 95-19
 Misc :
 Dsngr : V.J. GERLEY Date: 01-Mar-95

25

LATERAL/TORSIONAL FORCE DISTRIBUTION FOR RIGID DIAPHRAGMS Page

DESCR.)) RYAN RES
))

----- DESIGN DATA -----

LATERAL SHEAR FORCES: DISTANCE TO CENTER OF MASS:
 ... Along Y-Y axis = 26 kips ..X Dist from datum = 20 ft
 ... Along X-X axis = 35 ..Y Dist from datum = 23.5
 ... Do These Forces
 act together ? N y/n MAX 'X' DIMENSION = 43.25 ft
 MAX 'Y' DIMENSION = 47
 MIN 'X' Axis Ecc. = 5 %
 MIN 'Y' Axis Ecc. = 5 %

----- CALCULATED DATA -----

Center of Rigidity: Accidental Eccentricity:
 X Dist from Datum= 14.92 ft .05 * MAX 'X' = 2.16 ft
 Y Dist from Datum= 23.72 ft .05 * MAX 'Y' = 2.35

Torsional Forces From "Y-Y" Shear...
 Xcm + 5% Max X - Xcr = 7.24 ft Torsion = 188.313 ft-k
 Xcm - 5% Max X - Xcr = 2.92 ft Torsion = 75.8634 ft-k
 Torsional Forces From "X-X" Shear...
 Ycm + 5% Max Y - Ycr = 2.13 ft Torsion = 74.5287 ft-k
 Ycm - 5% Max Y - Ycr = -2.57 ft Torsion = -89.971 ft-k

WALL ID LABEL	WALL THICK (in)	WALL LNTH (ft)	WALL HEIGHT (ft)	DATUM DIST.		WALL ANGLE (deg)	FIXITY 1:FF 2:FP	'E' ELAS. MOD.	Y-Y Shear Values			X-X Shear Values			Maximum Force To Wall
				'X' (ft)	'Y' (ft)				Governing Ecc. (ft)	Direct Shear (k)	Total Shear (k)	Governing Ecc. (ft)	Direct Shear (k)	Total Shear (k)	
1	6	4	10	0.25	6	90	1	1.5	2.91782	0.54422	0.54422	-2.5706	0.02906	0.03249	0.545191
2	6	8	10	0.25	18	90	1	1.5	2.91782	2.30250	2.30250	-2.5706	0.05812	0.06033	2.303294
3	6	8	10	0.25	32.25	90	1	1.5	2.91782	2.30250	2.30250	2.12939	0.05812	0.06086	2.303308
4	6	4.5	10	0.25	45	90	1	1.5	2.91782	0.71822	0.71822	2.12939	0.03269	0.03653	0.719153
5	4	15.5	10	12.5	12.25	90	1	1.5	2.91782	4.08951	4.08951	-2.5706	0.03348	0.03605	4.089677
6	4	19	10	12.5	37.7	90	1	1.5	2.91782	5.25221	5.25221	2.12939	0.04105	0.04422	5.252405
7	4	16.5	10	20	8	90	1	1.5	7.24282	4.42417	5.18302	-2.5706	0.03564	0.03938	5.183174
8	4	9	10	20	28	90	1	1.5	7.24282	1.87303	2.19430	2.12939	0.01944	0.01990	2.194393
9	6	7.75	10	23.5	43.5	90	1	1.5	7.24282	2.17747	2.80826	2.12939	0.05630	0.06245	2.808963
10	6	5	10	40.25	2.5	90	1	1.5	7.24282	0.91079	1.68970	-2.5706	0.03632	0.04146	1.690216
11	6	3.5	10	43.25	6.5	90	1	1.5	7.24282	0.39186	0.76667	-2.5706	0.02542	0.02834	0.767194
12	6	3.5	10	43.25	13.5	90	1	1.5	7.24282	0.39186	0.76667	-2.5706	0.02542	0.02716	0.767151
13	6	2	10	40.25	14.5	90	1	1.5	7.24282	0.08752	0.16236	-2.5706	0.01453	0.01542	0.163099
14	6	2	10	40.25	20	90	1	1.5	7.24282	0.08752	0.16236	-2.5706	0.01453	0.01489	0.163049
15	6	2	10	40.25	25.5	90	1	1.5	7.24282	0.08752	0.16236	2.12939	0.01453	0.01467	0.163030
16	6	2	10	40.25	33.5	90	1	1.5	7.24282	0.08752	0.16236	2.12939	0.01453	0.01531	0.163089
17	6	2	10	40.25	36	90	1	1.5	7.24282	0.08752	0.16236	2.12939	0.01453	0.01551	0.163108
18	6	4.5	10	2.25	4	1	1	1.5	2.91782	0.01351	0.01351	-2.5706	1.73705	1.96552	1.965569
19	6	4	10	10.75	4	1	1	1.5	2.91782	0.01201	0.01201	-2.5706	1.31622	1.48934	1.489388
20	6	4	10	2	47	1	1	1.5	2.91782	0.01201	0.01201	2.12939	1.31622	1.48550	1.485553
21	6	4	10	11.75	47	1	1	1.5	2.91782	0.01201	0.01201	2.12939	1.31622	1.48550	1.485553
22	6	6.25	10	21.25	47	1	1	1.5	7.24282	0.01877	0.02278	2.12939	3.51598	3.96819	3.968257
23	6	4.5	10	22	36.5	1	1	1.5	7.24282	0.01351	0.01674	2.12939	1.73705	1.85969	1.859769
24	6	1	10	40	36.5	1	1	1.5	7.24282	0.00300	0.00554	2.12939	0.02850	0.03051	0.031013

25	6	20.75	10	30	20.5	1	1.5	7.24282	0.06233	0.09406	-2.5706	21.1332	21.5871	21.58735
26	6	1.5	10	20.5	0.25	1	1.5	7.24282	0.00450	0.00535	-2.5706	0.09319	0.10778	0.107914
27	6	1.5	10	30	0.25	1	1.5	7.24282	0.00450	0.00680	-2.5706	0.09319	0.10778	0.107995
28	6	2.25	10	39.5	0.25	1	1.5	7.24282	0.00675	0.01236	-2.5706	0.29392	0.33993	0.340162
29	6	3.5	10	42	4.75	1	1.5	7.24282	0.01051	0.02012	-2.5706	0.94772	1.06763	1.067828

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JENSEN BEACH,FL.34957
(407) 334-2600

Title :RYAN RES.
Scope :
Number:95-19
Misc :
Dsngn :V.J.GERLEY Date:01-Mar-95

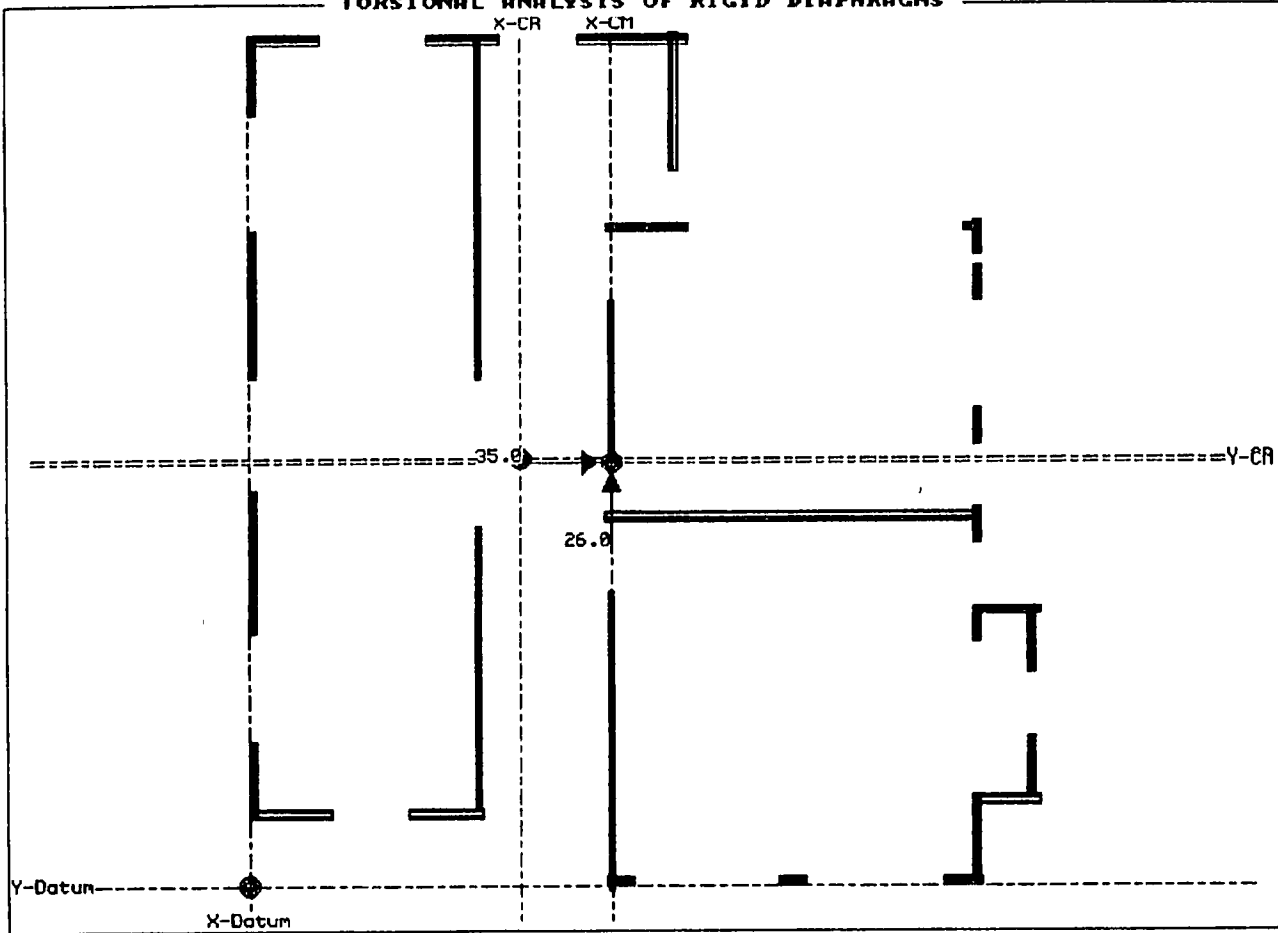
LATERAL/TORSIONAL FORCE DISTRIBUTION FOR RIGID DIAPHRAGMS

30	6	3.5	10	42	15.25	1	1.5	7.24282	0.01051	0.02012	-2.5706	0.94772	1.00126	1.001471
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RYAN PES

V.J. Gerley & Associates
3190 N.E. Maple Ave.
Jensen Beach, FL 34957

TORSIONAL ANALYSIS OF RIGID DIAPHRAGMS



V. J. GERLEY & ASSOCIATES
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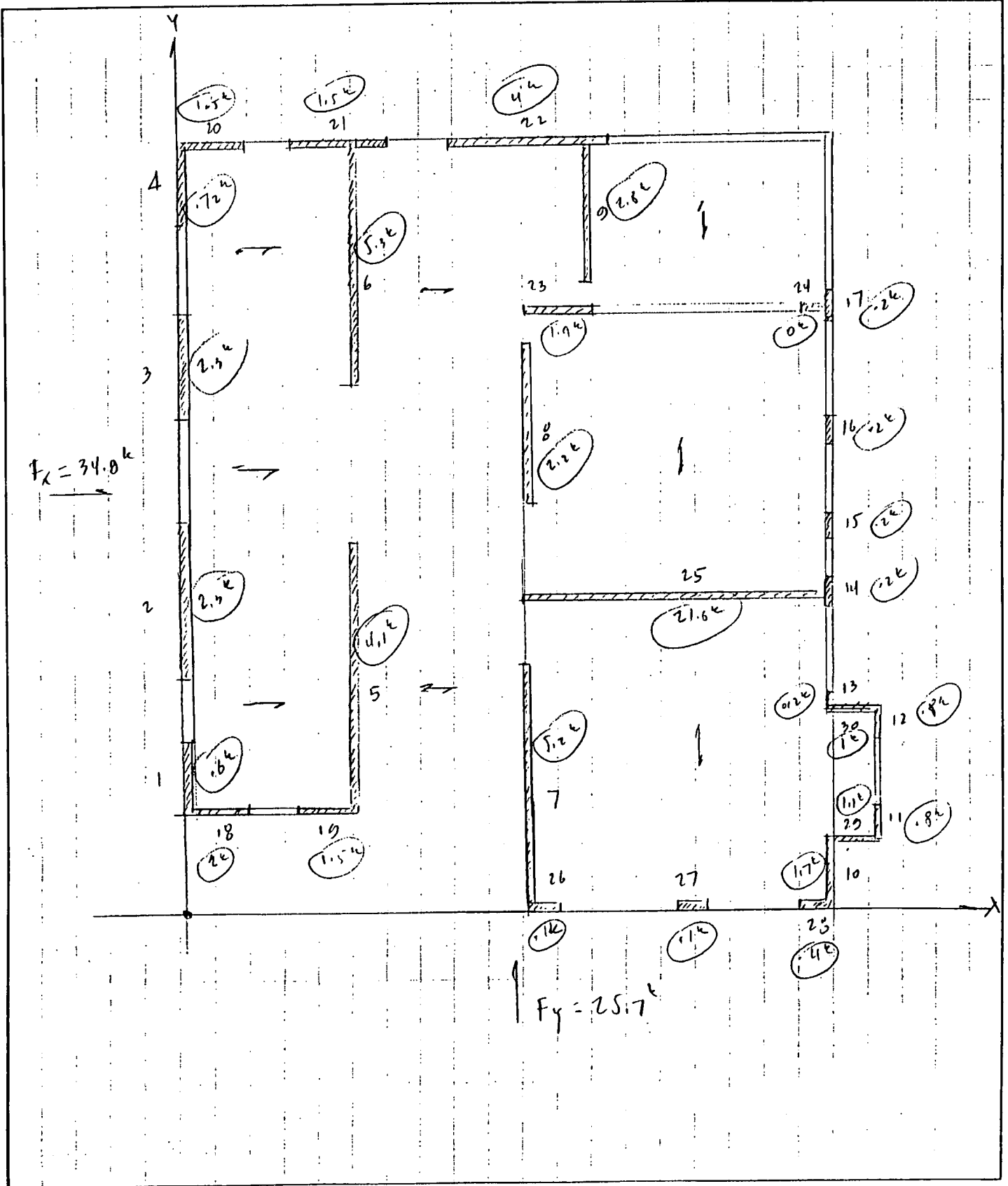
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BY V.J. GERLEY DATE 3-5-95

SHEET 18 OF

PROJECT RYAN RES.

SUBJECT



V.J.GERLEY AND ASSOCIATES
CONSULTING ENGINEERS
3190 N.E.MAPLE AVE
JENSEN BEACH, FL 34957
(407) 334-2600

Title : RYAN RES.
Scope :
Number: 95-19
Misc :
Dsng : V.J.GERLEY Date:06-Feb-95

29

PLYWOOD SHEAR WALL DESIGN & ANALYSIS Page

DESCRIPTION)) RYAN RES SW #5 (6,7,8)
)) DRY-WALL

(TYP INT SW) ✓

LOADS

LATERAL:

#1 : LAT. SHEAR APPLIED TO WALL= 315 plf x Length = 5197.5 lbs
#2 : LAT. SHEAR APPLIED TO WALL= plf x Length = lbs
#3 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
#4 : STRUT FORCE APPLIED TO TOP OF WALL = lbs
#5 : MOMENT APPLIED @ TOP OF WALL = ft-#

	Load	X-Left	X-Right
VERTICAL:			
#1 : CONCENTRATED	= lbs		ft
#2 : CONCENTRATED	= lbs		ft
#3 : CONCENTRATED	= lbs		ft
#1 : UNIFORM	= 60 plf		ft
#2 : UNIFORM	= plf		ft

DESIGN DATA

PLYWOOD APPLIED TO ONE OR BOTH SIDES ? 1,2 ---)) 1 (---
PLYWOOD GRADE: STR I:1, STR II:2 ---)) 2 (---
NAIL SIZE: 6d, 8d, 10d ---)) 6 (---
SHEATHING THICKNESS: .3125", .375", .50", .594" ---)) 0.3125 (---)

EQUVALENT TO 1/2" DRY WALL EA FACE

STUD SPACING = 16 in WALL LENGTH = 16.5 ft
LEAST DIM. OF END POST = 3 in WALL HEIGHT = 10 ft
SEIS. FACTOR FOR WALL WT= WALL WEIGHT = 15 psf
NOMINAL SILL THICKNESS = 3 Ht/Width Ratio=0.60606

SUMMARY

USE..... 0.3125 in Plywood Applied To ---)) 1 Side/s
Required Nail Size = 6 d Req'd Nail Spacing = 3 in
Req'd Field Spacing= 12 in
Shear Wall Capacity = 350 plf x # of Sides = 350.00 plf;
Actual Total Shear = 5197.5 lbs Required = 315.00 plf;
UPLIFT CHECK Moments about lower: ..Left.. ..Right..
Overturning Moment on Wall = 51975 ft-# 51975
Resisting Moment From Vert. Loads = 28586 ft-# 28586
Uplift @ End w/o D.L. reductions = 1417.5 lbs 1417.5 lbs
Use Simpson HD2A @ Left Side of Wall : Capacity = 3270 lbs;
Use Simpson HD2A @ Right Side of Wall : Capacity = 3270 lbs;
Sill Attachment..... Use 1/2" Anchor Bolt @ 32.2 in o/c
or 5/8" Anchor Bolt @ 48.0 in o/c
or 3/4" Anchor Bolt @ 48.0 in o/c



COMMERCIAL CONSTRUCTION DIVISION, INC.

June 21, 1996

Mr. Dave Brown, Building Inspector
Town of Sewall's Point
1 South Sewall's Point Road
Sewalls Point, FL 34996

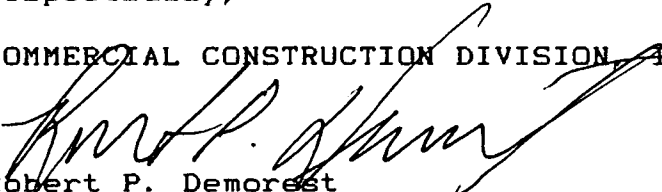
Project: Ryan Residence: Permit #3887
Lot 4 Block C Subdivision: Homewood
25 N. Ridgeview Road
Sewalls Point, FL 34996

AFFIDAVIT OF COST

The cost of construction of the above noted project
did not exceed the construction value as permitted.

Respectfully,

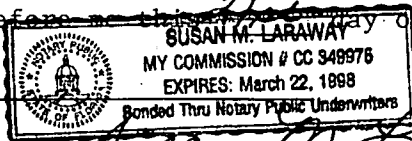
COMMERCIAL CONSTRUCTION DIVISION, INC.


Robert P. Demorest
Vice President

file:ryanaiff

Sworn to and subscribed before me this 21st day of June, 1996

My Commission Expires:




Notary Public

RECORD OF INSPECTIONS
TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 6/17/96

This is to request that a Certificate of Approval for Occupancy be issued to Mr Dennis Ryan.

For property at 24 N Ridge View built under Permit No. 3887 Dated 10/31/95 when completed in conformance with the Approved Plans.

Signed *[Signature]*

ITEM	DATE	APPROVED BY (initials)
1. Form board tie in	<u>12/10/95</u>	<u>DB</u>
2. Termite protection	<u>12/5/95</u>	<u>DB</u>
3. Footing - slab	<u>12/4/95</u> <u>12/19/95</u>	<u>DB</u>
4. Rough plumbing - slab	<u>12/18/95</u>	<u>DB</u>
5. Rough electric - slab	<u>12/19/95</u>	<u>DB</u>
6. Lintel	<u>N/A</u>	<u>_____</u>
7. Dry in (final)	<u>1/6/96</u>	<u>DB</u>
8. Roof	<u>3/19/96</u>	<u>DB</u>
9. Framing	<u>3/17/96</u>	<u>DB</u>
10. Rough electric	<u>3/17/96</u>	<u>DB</u>
11. Rough plumbing	<u>3/17/96</u>	<u>DB</u>
12. A/C Ducts	<u>3/17/96</u>	<u>DB</u>
13. Insulation	<u>3/19/96</u>	<u>DB</u>
14. Final electric	<u>6/13/96</u>	<u>DB</u>
15. Final plumbing	<u>6/13/96</u>	<u>DB</u>
16. Final construction	<u>6/14/96</u>	<u>DB</u>
17. As-built survey	<u>_____</u>	<u>_____</u>
18. Affidavit of cost	<u>6-21-96</u>	<u>OK DB</u>

Final Inspection for Issuance of Certificate for Occupancy

Approved by Building Inspector Dale Brown 4/17/96 date

Approved by Building Commissioner _____ date

Utilities notified FPL 6/14/96 date

Original Copy sent to OWNER _____ date
(owner)

(Keep carbon copy for Town files)

3969
POOL

3969

TAX FOLIO NO. _____

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 M/M DENNIS RYAN Present Address 4680 SANDY BEACH TRAIL
STUNNY, FL. 34996

Contractor Pools by Greg, Inc. Address 8886 S. Fed Hwy P.O. 34952
Phone 337-9713

Where licensed M ARDEN CO. License Number RP-0035370

Electrical Contractor DJ. Harmon & Sons License Number 00059 MC

Plumbing Contractor Pools by Greg License Number RP-0035370

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: POOL (NO DECK)
24 N. RIDGEVIEW RD.

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

Subdivision HomeWood Lot Number 4 Block Number C

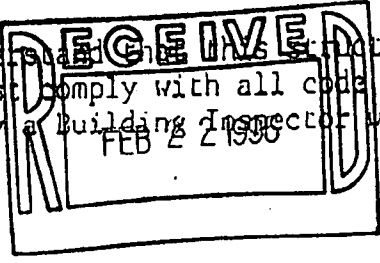
Contract Price \$ 8500. Cost of Permit \$ 200.00

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 of Town Commissioner "Red-Tagging" the construction project.

Contractor [Signature]

I understand that the 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] 2/22/96
Building Inspector Date

Approved: [Signature]
Commissioner Date

Final Approval given: _____ Date

Certificate of Occupancy issued (if applicable) _____ Date

Permit # 3969

— Copy —

TO BE COMPLETE WHEN CONSTRUCTION VALUE IS \$2500.00 OR MORE

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

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

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS, IF KNOWN)

Lot # 4, BK C Home wood

GENERAL DESCRIPTION OF IMPROVEMENTS Const Pool.

OWNER: MR. DENNIS RYAN

ADDRESS: 4620 Sand pebble trace, Apt 203, Stunard Hl.

OWNER'S INTEREST IN PROPERTY: SOLE

FEE SIMPLE TITLE HOLD (IF OTHER THAN OWNER): _____

ADDRESS: _____

CONTRACTOR: Pools by Greg, Inc. . .

ADDRESS: 8886 S. Fed. Hwy, PSC, FL, 34952

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

LENDER'S NAME: _____

ADDRESS: _____

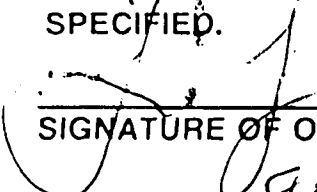
PERSON WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.3(1) (A)7., FLORIDA STATUTES:

NAME: _____


ADDRESS: _____


IN ADDITION TO HIMSELF, OWNER DESIGNATES _____ 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: THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED.


SIGNATURE OF OWNER
STATE OF Florida
COUNTY OF Marion

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 16th DAY OF Feb., 1996, BY Dennis Ryan WHO IS KNOWN TO ME OR WHO PRODUCED _____ AND WHO DID NOT TAKE AN OATH.


NOTARY SIGNATURE
GARY R. DICK, JR.
Notary Public, State of Fla.
My Comm. Exp. Dec. 6, 1997
Comm No. CC 334254


GARY R. DICK, JR.
Notary Public, State of Fla.
My Comm. Exp. Dec. 6, 1997
Comm No. CC 334254

TAX FOLIO NO. _____

DATE 8-20-96

4044

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 Donnis Ryan Present address 25 N Ridgview

Phone 283 0229 Sewalls Pt. Fl.

Contractor Professional Fence Address 581 Kenwood Terr PSC

Phone 878-2159

Where licensed Stuart, PSC, St. Lucie County License number PSL 4270

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: 4' black chain link fence around pool.

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

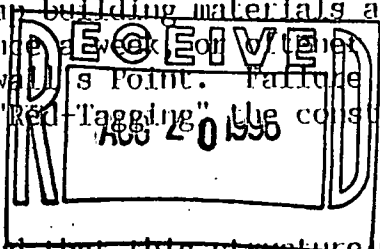
25 N Ridgview

Subdivision _____ Lot Number _____ Block Number _____

Contract price \$ 1500.00 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, 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 William Burt

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 Donnis Ryan

TOWN RECORD

Date submitted _____

Approved: Dele Brown
Building Inspector Date

Approved: [Signature]
Commissioner Date

Final approval given: _____
Date

CERTIFICATE OF OCCUPANCY issued (if applicable) _____
Date

PERMIT NO. _____

To: Dale Brown

I hope this is what you want. Jim is not in the office
So I don't know where to find everything -

Thank you
Jeanne

2882989 STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST INDUSTRY LICENSING BOARD

DATE	LICENSE NO.	BATCH NO.
09/14/94	CG C023769	94005686

CERTIFIED GENERAL CONTRACTOR
MED BELOW IS CERTIFIED
DER THE PROVISIONS OF CHAPTER 489 F.S., FOR THE YEAR
PIRING AUG 31, 1996

CONNERY, JAMES JOSEPH
CONNERY CORP
1501 DECKER AVE #301
STUART FL 34994-3964

George Stuart, Jr.
TON CHILES
WERNOR

DISPLAY IN A CONSPICUOUS PLACE

George Stuart, Jr.
STUART, JR.
SECRETARY, D.B.P.R.

09/14/94 AUDIT CONTROL NO. 2882989
LICENSE NO. BATCH NO. AMOUNT PAID
CG C023769 94005686 \$209.00

CONST INDUSTRY LICENSING BOARD
7960 ARLINGTON EXPRESSWAY
SUITE 300
JACKSONVILLE FL 32211-7467

LICENSEE SIGNATURE

(WALLET CARD - FOLD HERE)

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST INDUSTRY LICENSING BOARD

CERTIFIED GENERAL CONTRACTOR

CONNERY, JAMES JOSEPH
CONNERY CORP

HAS PAID THE FEE REQUIRED BY CHAPTER 489 F.S.
FOR THE YEAR EXPIRING AUG 31, 1996

George Stuart, Jr.
LAWTON CHILES
GOVERNOR

George Stuart, Jr.
GEORGE STUART, JR.
SECRETARY, D.B.P.R.

ACORD. CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

08/20/96

PRODUCER

Sid Banack Insurance
 2045 - 14th Avenue
 P.O. Box 130
 Vero Beach, FL 32961

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

COMPANIES AFFORDING COVERAGE

- COMPANY LETTER **A** OWNERS INS CO
- COMPANY LETTER **B** CAPITAL ASSURANCE CO INC
- COMPANY LETTER **C** PCA PROPERTY & CASUALTY INS. C
- COMPANY LETTER **D**
- COMPANY LETTER **E**

INSURED

CONNERY CONCRETE
 d/b/a Connery Corporation
 917 Beachland Blvd, Ste 4
 Vero Beach, FL 32963

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	912312 20526087 96	01/01/96	01/01/97	GENERAL AGGREGATE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS-COMP/OP AGG. \$ 500,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR.				PERSONAL & ADV. INJURY \$ 500,000
	<input type="checkbox"/> OWNERS & CONTRACTOR'S PROT.				EACH OCCURRENCE \$ 500,000
	<input checked="" type="checkbox"/> PREMISES/OPERATIO				FIRE DAMAGE (Any one fire) \$ 50,000
					MED. EXPENSE (Any one person) \$ 5,000
B	AUTOMOBILE LIABILITY	04-SBA-0410898-1	12/23/95	12/23/96	COMBINED SINGLE LIMIT \$ 500,000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	<input checked="" type="checkbox"/> HIRED AUTOS				EACH OCCURRENCE \$
<input checked="" type="checkbox"/> NON-OWNED AUTOS	AGGREGATE \$				
<input type="checkbox"/> GARAGE LIABILITY					
EXCESS LIABILITY	UMBRELLA FORM				
	OTHER THAN UMBRELLA FORM				
C	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY	09017434096	01/01/96	01/01/97	STATUTORY LIMITS
					EACH ACCIDENT \$ 100,000
					DISEASE-POLICY LIMIT \$ 500,000
					DISEASE-EACH EMPLOYEE \$ 100,000
OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

SEWELLS POINT BUILDING DEPT.
 ATTN: DALE BROWN
 1 SOUTH SEWELLS POINT RD
 SEWELLS POINT, FL 34996

CANCELLATION

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

AUTHORIZED REPRESENTATIVE



Professional Fence Contractors

Phone/FAX (407) 878-2159 • 800-778-2159
265 S.W. Port St. Lucie Blvd., Suite 196, Port St. Lucie, Florida 34984

Page No. of Pages

PROPOSAL SUBMITTED TO <i>Dennis Ryan</i>		PHONE <i>H 283-0229</i> <i>W 286-8292</i>	DATE <i>8-3-96</i>
STREET <i>25 N Ridgeway</i>		JOB NAME <i>Lot 286-7535</i>	
CITY, STATE AND ZIP CODE <i>Sewall's Pt., Fl.</i>		JOB LOCATION	
ARCHITECT.	DATE OF PLANS	JOB PHONE	

We hereby propose to furnish materials and labor necessary for the completion of:

Thank you for the opportunity to present you with this proposal.

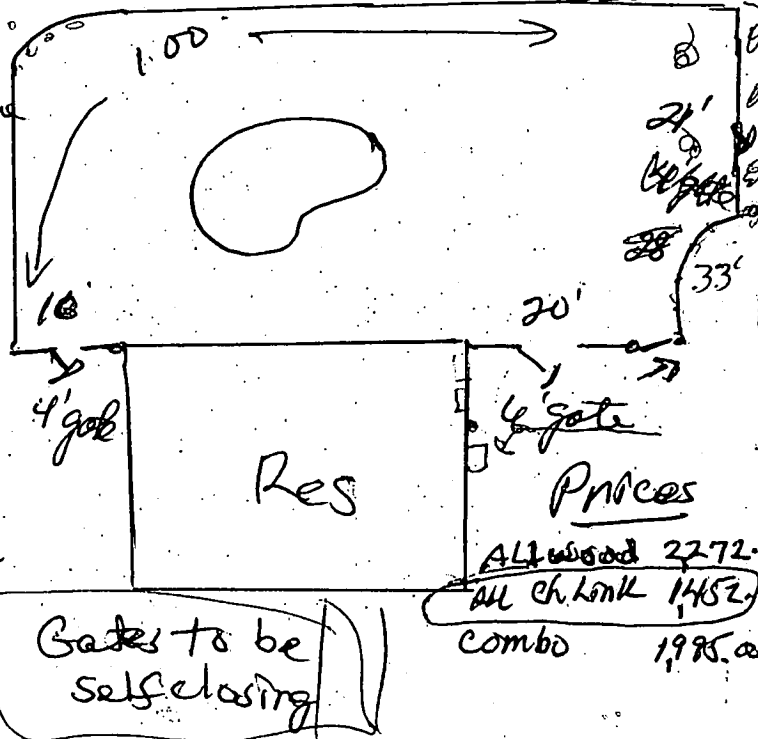
Furnish and Install! Custom built
Approx 175' of fence
Wood - picket - All Pressure Treated Pine

- 1" x 4" dog eared pickets
- 2" x 4" horizontal runners
- 4" x 4" posts - set in concrete
- galv nails
- 6" x 6" gate posts w/ tops

Charcoal

- 4" Black vinyl system
 - 4" x 9 ga wire
 - 1 3/8" x .055 top rail
 - 1 5/8" x .055 line posts
 - 2 1/2" x .065 farm + gate posts
- } set in conc.

2 gates - 4" x 4" w/ gravity hinges
with scrolls



Prices
 All wood 2272.
 All charcoal 1452.
 Combo 1985.00

WE PROPOSE hereby to furnish material and labor - complete in accordance with above specifications, for the sum of:

dollars (\$ _____)

Payment to be made as follows:

50% deposit *50% upon completion*
250.00

RECEIVED

All materials is guaranteed to be as specified! All work to be completed in a substantial workmanlike manner according to specifications submitted, per standard practices. Any alteration or deviation from above specifications involving extra costs will be exacted only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance.

Authorized Signature *Bill Rutter*

Note: This proposal may be withdrawn by us if not accepted within *30* days.

ACCEPTANCE OF PROPOSAL The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outline above.

Signature _____

Date of Acceptance: *8-6-96*

Signature _____

4608
FENCE

Homewood Lot 4
BLK C

Town of Sewall's Point

PLN 1-38-41-006-003-00040-20000

Date 5/7/99

#4608

BUILDING PERMIT APPLICATION

to construct

NEW CONSTRUCTION ADDITION ALTERATION DEMOLITION

RESIDENTIAL COMMERCIAL _____ SF _____ CF

OTHER: Fence 48" C.L. BLACK CONTRACT PRICE 500⁰⁰

Owner's Name JENNIS & PAM RYAN

Owner's Address 25 N. Ridgeview Rd

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

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

City STUART State FL Zip 34996

Contractor's Name TREASURE COAST FENCE

Contractor's Address 2340 SW Deepwood PASS

City PALM CITY State FLA Zip 34990

Job Name RYAN

Job Address 25 N Ridgeview Rd

City STUART (Sewells Point) State FL Zip 34996

Legal Description Homewood Lot 4 BLK C

Bonding Company

Bonding Company Address

City State Zip

Architect/Engineer's Name

Architect/Engineer's Address

Mortgage Lender's Name

Mortgage Lender's Address

5/12/99 Fence OK

Follow BU979

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

8853

**EXTERIOR TRIM
REPAIR**



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:	8853	DATE ISSUED:	04/01/2008
SCOPE OF WORK:	EXTERIOR TRIM REPAIR		
CONDITIONS :			
CONTRACTOR:	DEMOREST		
PARCEL CONTROL NUMBER:	3841006003000402000	SUBDIVISION	HOMEWOOD
CONSTRUCTION ADDRESS:	25 N. RIDGEVIEW		
OWNER NAME:	DENNIS RYAN		
QUALIFIER:	ROBERT DEMOREST	CONTACT PHONE NUMBER:	215-6495

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

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

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

REQUIRED INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	8853		
ADDRESS	25 N RIDGEVIEW		
DATE:	04/01/2008	SCOPE:	EXTERIOR TRIM REPAIRS

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

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

RECEIVED
DATE: 3-28-08
TOWN OF SEWALL'S POINT

Town of Sewall's Point

Date: MARCH 28 2008 BUILDING PERMIT APPLICATION Permit Number: _____

OWNER/TITLEHOLDER NAME: DENNIS RYAN Phone (Day) 774-237-0515 (Fax) _____

Job Site Address: 25 N. RIDGEVIEW DR City: Sewalls Point State: FL Zip: 34996

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

Owner Address (if different): 648 MAIN ST City: HARWICH State: MA Zip: 02645

Scope of work: MISC. WOOD ROT REPAIRS - CEILING JOIST TRIM & WINDOW SILLS w/ CEDAR

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 2200
(Notice of Commencement required when over \$2500 prior to first inspection)
Is subject property located in flood hazard area? V A9 A8 X
FOR ADDITIONS, 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: Demorest Construction Group Phone: 772-220-0065 Fax: 772-220-0227

Street: 800 SE INDIAN ST City: STUART State: FL Zip: 34983

State Registration Number: _____ State Certification Number: CBCA052954 Municipality License Number: _____

PROJECT SUPERINTENDANT: MICHAEL PRINCIPLE CONTACT NUMBER: 772-215-6495

ARCHITECT _____ Lic.#: _____ Phone Number: _____

Street: N/A City: _____ State: _____ Zip: _____

ENGINEER _____ Lic# _____ Phone Number: _____

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

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

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

NOTICES TO OWNERS AND CONTRACTORS:
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS TO YOUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50.05

THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ALL NULL AND VOID PERMITS. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.
I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.

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

OWNER SIGNATURE (required)
[Signature]

State of Florida, County of: Martin

This the 26th day of March, 2008

by Dennis Ryan who is personally known to me or produced as identification. [Signature]

My Commission Expires: 6/4/11
Notary Public, State of Florida
Veronica L Taylor
My Commission DD657845
Expires 06/04/2011

CONTRACTOR SIGNATURE (required)
[Signature]

On State of Florida, County of: Martin

This the 26th day of March, 2008

by Robert P Demorest who is personally known to me or produced as identification. [Signature]

My Commission Expires: 6/4/11
Notary Public, State of Florida
Veronica L Taylor
My Commission DD657845
Expires 06/04/2011

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



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

Site Provided by...
governmentmax.com T1.11

Summary

print [grid icons] Owner 7 of 60

Parcel Info

Summary

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

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
01-38-41-006-003-00040-2	25 N RIDGEVIEW RD	17663	Owner	0	1

Summary

Property Location 25 N RIDGEVIEW RD
Tax District 2200 Sewall's Point
Account # 17663
Land Use 101 0100 Single Family
Neighborhood 120400
Acres 0.341

Legal Description

Property Information
 HOMEWOOD, LOT 4 BLK C
 PI# 1-38-41-006-003-00040-20000

Search By

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

Owner Information

Owner Information
 RYAN, DENNIS J
 RYAN, PAMELA C

Mail Information

25 N RIDGEVIEW ROAD
 STUART FL 34996

Assessment Info

Front Ft. 0.00

Market Land Value \$275,000
Market Impr Value \$293,330
Market Total Value \$568,330

Site Functions

Property Search

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

Recent Sale

Sale Amount \$85,000

Sale Date 12/7/1993
Book/Page 1044 1540

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

[Legal disclaimer](#) / [Privacy Statement](#)

Data updated on 03/19/2008



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-30, 2008

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8823	Sebastian	tie down	—	WILL MEET
1	Low High Pt OB	wind brace (has letter from arch.)		W/ ARCHITECT INSPECTOR: <i>OM</i>
	XXXXXXXXXX			INSPECTOR:
8853	RYAN	Final	PASS	CLOSE
3	25 N. Ridgeway Demorest	EXT. trim + sill		INSPECTOR: <i>OM</i>
8900	Mulcahy	Final	PASS	CLOSE
2	1385 Sewalls Anchor Screens			INSPECTOR: <i>OM</i>
8820	Deschane	sheathing	PASS	
7	64 N River Rd JMC	tie down TRUSS ENDR	FAIL FAIL	INSPECTOR: <i>OM</i>
8867	Geller	gas rough	FAIL	
5	10 Palmetto Ken Wendell	UG tank	PASS	INSPECTOR: <i>OM</i>
8911	Willis	footing	PASS	
4	3 Worth Ct Eric Johnson			INSPECTOR: <i>OM</i>

OTHER:

10723

A/C CHANGEOUT



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

BUILDING PERMIT CARD

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

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	10723	DATE ISSUED:	DECEMBER 19, 2013
SCOPE OF WORK:	AC CAHANGEOUT		
CONTRACTOR:	HONEST AIR		
PARCEL CONTROL NUMBER:	013841006003-000402	SUBDIVISION	HOMEWOOD - L 4, BL C
CONSTRUCTION ADDRESS:	25 N RIDGEVIEW RD		
OWNER NAME:	BARATTA		
QUALIFIER:	MITCH MAZZILLI	CONTACT PHONE NUMBER:	232-1114

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

Date: 12/16/13 BUILDING PERMIT APPLICATION Permit Number: 10723

OWNER/LESSEE NAME: Bridget Baratta Phone (Day) 486-4046 (Fax)

Job Site Address: 25 N. Ridgeview Rd. City: Stuart State: FL Zip: 34996

Legal Description: Homewood Lot 4 BKC Parcel Control Number: 01-38-41-006-003-00040-2

Fee Simple Holder Name: Address:

City: State: Zip: Telephone:

*SCOPE OF WORK (PLEASE BE SPECIFIC): X A/C change - out (#2 of 2 systems)

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: \$ 3333 (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

GL WC

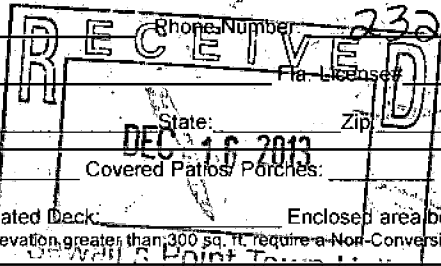
Construction Company: Honest Air Inc Phone: 772-232-1114 Fax: 232-1118

Qualifiers name: Mitch Mazzilli Street: 12605 SW 34th Terr City: Palm City State: FL Zip: 34990

State License Number: CAC058508 OR: Municipality: License Number:

LOCAL CONTACT: Penny Mazzilli Phone Number: 232-1114

DESIGN PROFESSIONAL: MA State: Zip: Phone Number:



Street: City: State: Zip: Phone Number:

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

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

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

WARNINGS TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. 2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCLUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

CONTRACTOR OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE: x [Signature] State of Florida, County of: Martin On This the 16th day of December 2013 by Mitch Mazzilli who is personally known to me or produced As identification: [Signature] Notary Public My Commission Expires: April 24, 2017

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: x [Signature] State of Florida, County of: On This the day of day of 20 by who is personally known to me or produced As identification: Notary Public My Commission Expires:

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



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

generated on 12/17/2013 1:21:07 PM EST

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-006-003-00040-2	17663	25 N RIDGEVIEW RD, SEWALL'S POINT	\$349,830	12/14/2013

Owner Information

Owner(Current)	BARATTA BRIDGET D
Owner/Mail Address	25 N RIDGEVIEW RD STUART FL 34996
Sale Date	6/4/2008
Document Book/Page	2334 0598
Document No.	2089647
Sale Price	478000

Location/Description

Account #	17663	Map Page No.	SP-04
Tax District	2200	Legal Description	HOMEWOOD, LOT 4 BLK C PI# 1-38-41- 006-003-00040- 20000
Parcel Address	25 N RIDGEVIEW RD, SEWALL'S POINT		
Acres	.3410		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120400 Hmwd,Palm Ro,Kngstn,Okwd, Pine

Assessment Information

Market Land Value	\$181,500
Market Improvement Value	\$168,330
Market Total Value	\$349,830

Business Tax Receipt Details

[New Search](#) [Back to Search Results](#) [Help](#)

Business Tax Account	2001-000520-00066.000	Status	ACTIVE FULL
Business Name	HONEST AIR, INC.	Current Amount Due	0.00
Business Category	MISC CONTR - A/C		
Additional Description	ACCOUNT PAID IN FULL	New Business Date	05/03/2001
Business Address	OCCY	Date Closed	
Doing Business As			
Owner Name	MAZILLI, MITCHELL		
Mailing Address	HONEST AIR, INC. MAZILLI, MITCHELL 1465 SW 34TH ST PALM CITY FL 34990		

[Update Business Details](#)

License Renewal History

Year	License Amount	Penalty	Fees	Transfer	Duplicate	Exempt	Amount Due	Paid
2013	26.25						26.25	PAID
2012	26.25						26.25	PAID
2011	26.25	6.56	6.60				39.41	PAID
2010	26.25						26.25	PAID
2009				3.00			3.00	PAID
2009	26.25	2.63	6.50				35.48	PAID
2008				3.00			3.00	PAID
2008	26.25	2.63	6.60				35.48	PAID

Handwritten initials

2:43:40 PM 4/24/2013

Handwritten checkmark

Data Contained In Search Results Is Current As Of 04/24/2013 02:42 PM.

Search Results

Please see our [glossary of terms](#) for an explanation of the license status shown in these search results.

For additional information, including any complaints or discipline, click on the name.

License Type	Name	Name Type	License Number/ Rank	Status/Expires
Certified Air Conditioning Contractor	<u>HONEST AIR INC</u>	DBA	CAC058508 Cert Air	Current, Active 08/31/2014
	License Location Address*:	1265 SW 34TH TERRACE PALM CITY, FL 34990		
	Main Address*:	1265 SW 34TH TERRACE PALM CITY, FL 34990		
Certified Air Conditioning Contractor	<u>MAZZILLI, MITCHELL</u>	Primary	CAC058508 Cert Air	Current, Active 08/31/2014
	License Location Address*:	1265 SW 34TH TERRACE PALM CITY, FL 34990		
	Main Address*:	1265 SW 34TH TERRACE PALM CITY, FL 34990		

[Back](#) [New Search](#)

*** denotes**

- Main Address - This address is the Primary Address on file.
- Mailing Address - This is the address where the mail associated with a particular license will be sent (if different from the Main or License Location addresses).
- License Location Address - This is the address where the place of business is physically located.

.....
[1940 North Monroe Street, Tallahassee FL 32399](#) :: Email: [Customer Contact Center](#) :: Customer Contact Center: 850.487.1395

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Under Florida law, email addresses are public records. If you do not want your email address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. Please see our [Chapter 455](#) page to determine if you are affected by this change.

FLORIDA ENERGY CONSERVATION CODE
Mandatory Duct Inspection Certification for HVAC change-out
For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912)

Oh FWP
10723

Owner: <u>B. Baratta</u>	Contractor name: <u>Harvest Air, Inc.</u>
Street address: <u>25 N. Ridgeview Blvd</u>	Jurisdiction: <u>Martin/St. Lucie</u>
City: <u>Stuart</u>	Permit No.: _____
Zip: <u>34996</u>	Final inspection date: _____

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

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

Signature: *Mitch Mazzilli* Date: 12/17/13

Printed Name: Mitch Mazzilli

Contractor License #: CAC058508

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

Signature: _____ Date: _____

Printed Name: _____



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

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

Air Conditioning Change out Affidavit

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

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: <u>Rheem</u> Model# <u>RBHP20071A</u>	Condenser: Mfg: <u>Rheem</u> Model# <u>14AJM3DA01</u>
Volts <u>240</u> CFM's <u>1000</u> Heat Strip <u>7</u> Kw	Volts <u>240</u> SEER/EER <u>14/13</u> BTU's <u>28,600</u>
Min. Circuit Amps <u>39</u> Wire gauge <u>#8</u>	Min. Circuit Amps <u>25</u> Wire gauge <u>#10</u>
Max. Breaker size <u>40</u> Min. Breaker size <u>39</u>	Max. Breaker size <u>30</u> Min. Breaker size <u>25</u>
Ref. line size: Liquid <u>3/8</u> Suction <u>3/4</u>	Ref. line size: Liquid <u>3/8</u> Suction <u>3/4</u>
Refrigerant type <u>R410A</u>	Refrigerant type <u>R410A</u>
Location: Existing <input checked="" type="checkbox"/> New _____	Location: Existing <input checked="" type="checkbox"/> New _____
Attic/Garage/Closet (specify) <u>Closet</u>	Left/Right/Rear/Front/Roof _____
Access: <u>2nd floor</u>	Condensate Location <u>ground</u>

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

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: <u>Goodman</u> Model# <u>ARUF182416A</u>	Condenser: Mfg: <u>Rheem</u> Model# <u>RAND024JAZ</u>
Volts <u>240</u> CFM's <u>1000</u> Heat Strip <u>7</u> Kw	Volts <u>240</u> SEER/EER <u>unknown</u> BTU's <u>unknown</u>
Min. Circuit Amps <u>40</u> Wire gauge <u>#8</u>	Min. Circuit Amps <u>30</u> Wire gauge <u>#10</u>
Max. Breaker size <u>unknown</u> Min. Breaker size <u>unknown</u>	Max. Breaker size <u>unknown</u> Min. Breaker size <u>unknown</u>
Ref. line size: Liquid <u>3/8</u> Suction <u>3/4</u>	Ref. line size: Liquid <u>3/8</u> Suction <u>3/4</u>
Refrigerant type <u>R-22</u>	Refrigerant type <u>R-22</u>
Location: Ext. <input checked="" type="checkbox"/> New _____	Location: Ext. <input checked="" type="checkbox"/> New _____
Attic/Garage/Closet (specify) <u>Closet</u>	Left/Right/Rear/Front/Roof _____
Access: <u>2nd floor</u>	Condensate Location <u>ground</u>

Certification:

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

[Signature]
 Signature

12/16/13
 Date



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2013.

Certificate of Product Ratings

AHRI Certified Reference Number: 3412342

Date: 12/12/2013

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

Outdoor Unit Model Number: 14AJM30

Indoor Unit Model Number: RBHP-21+RCHL-36A1

Manufacturer: RHEEM SALES COMPANY, INC.

Trade/Brand name: RHEEM, RUUD, WEATHERKING

Series name:

Manufacturer responsible for the rating of this system combination is RHEEM SALES COMPANY, INC.

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

Cooling Capacity (Btuh):	28600
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.00
IEER Rating (Cooling):	

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

DISCLAIMER

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

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CERTIFICATE VERIFICATION

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



Air-Conditioning, Heating, and Refrigeration Institute

©2013 Air-Conditioning, Heating, and Refrigeration Institute

CERTIFICATE NO.: 130313590818401184

Project Information

For: Baratta Bridget D
 25 N Ridgeview Rd, Stuart, FL 34996

Notes: Calcs are for whole house with 2 systems. Replacing system number 2 of 2. (2nd floor system)

Design Information

Weather: West Palm Beach Intl AP, FL, US

Winter Design Conditions

Outside db 48 °F
 Inside db 70 °F
 Design TD 22 °F

Summer Design Conditions

Outside db 90 °F
 Inside db 75 °F
 Design TD 15 °F
 Daily range L
 Relative humidity 50 %
 Moisture difference 59 gr/lb

Heating Summary

Structure 29370 Btuh
 Ducts 0 Btuh
 Central vent (0 cfm) 0 Btuh
 Humidification 0 Btuh
 Piping 0 Btuh
 Equipment load 29370 Btuh

Sensible Cooling Equipment Load Sizing

Structure 44435 Btuh
 Ducts 0 Btuh
 Central vent (0 cfm) 0 Btuh
 Blower 0 Btuh
 Use manufacturer's data n
 Rate/swing multiplier 0.95
 Equipment sensible load 42303 Btuh

Infiltration

Method Simplified
 Construction quality Average
 Fireplaces 0

	Heating	Cooling
Area (ft ²)	2697	2697
Volume (ft ³)	24273	24273
Air changes/hour	0.32	0.16
Equiv. AVF (cfm)	129	65

Latent Cooling Equipment Load Sizing

Structure 2602 Btuh
 Ducts 0 Btuh
 Central vent (0 cfm) 0 Btuh
 Equipment latent load 2602 Btuh
 Equipment total load 44905 Btuh
 Req. total capacity at 0.70 SHR 5.0 ton

Heating Equipment Summary

Make n/a
 Trade n/a
 Model n/a
 AHRI ref n/a
 Efficiency n/a
 Heating input n/a
 Heating output 0 Btuh
 Temperature rise 0 °F
 Actual air flow 0 cfm
 Air flow factor 0 cfm/Btuh
 Static pressure 0 in H2O
 Space thermostat n/a

Cooling Equipment Summary

Make n/a
 Trade n/a
 Cond n/a
 Coil n/a
 AHRI ref n/a
 Efficiency n/a
 Sensible cooling 0 Btuh
 Latent cooling 0 Btuh
 Total cooling 0 Btuh
 Actual air flow 0 cfm
 Air flow factor 0 cfm/Btuh
 Static pressure 0 in H2O
 Load sensible heat ratio 0

Calculations approved by ACCA to meet all requirements of Manual J 8th Ed.

Project Information

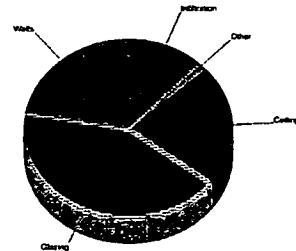
For: Baratta Bridget D
 25 N Ridgeview Rd, Stuart, FL 34996

Design Conditions

Location:		Indoor:		Heating	Cooling
West Palm Beach Intl AP, FL, US		Indoor temperature (°F)		70	75
Elevation: 20 ft		Design TD (°F)		22	15
Latitude: 27°N		Relative humidity (%)		50	50
Outdoor:		Moisture difference (gr/lb)		14.7	59.2
Heating	Cooling	Infiltration:			
Dry bulb (°F)	48	90	Method	Simplified	
Daily range (°F)	-	13 (L)	Construction quality	Average	
Wet bulb (°F)	-	78	Fireplaces	0	
Wind speed (mph)	15.0	7.5			

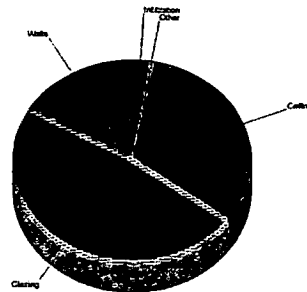
Heating

Component	Btuh/ft²	Btuh	% of load
Walls	2.1	2907	22.1
Glazing	27.6	5589	42.5
Doors	0	0	0
Ceilings	2.4	2936	22.3
Floors	2.4	168	1.3
Infiltration	1.0	1553	11.8
Ducts		0	0
Piping		0	0
Humidification		0	0
Ventilation		0	0
Adjustments		0	0
Total		13153	100.0



Cooling

Component	Btuh/ft²	Btuh	% of load
Walls	2.7	3718	16.5
Glazing	53.7	10894	48.3
Doors	0	0	0
Ceilings	6.0	7259	32.2
Floors	1.7	118	0.5
Infiltration	0.3	544	2.4
Ducts		0	0
Ventilation		0	0
Internal gains		0	0
Blower		0	0
Adjustments		0	0
Total		22532	100.0



Latent Cooling Load = 1309 Btuh
 Overall U-value = 0.191 Btuh/ft²·°F

Data entries checked.



Project Information

For: Baratta Bridget D
25 N Ridgeview Rd, Stuart, FL 34996

Design Conditions

Location:			Indoor:	Heating	Cooling
West Palm Beach Intl AP, FL, US			Indoor temperature (°F)	70	75
Elevation: 20 ft			Design TD (°F)	22	15
Latitude: 27°N			Relative humidity (%)	50	50
			Moisture difference (gr/lb)	14.7	59.2
Outdoor:	Heating	Cooling	Infiltration:		
Dry bulb (°F)	48	90	Method	Simplified	
Daily range (°F)	-	13 (L)	Construction quality	Average	
Wet bulb (°F)	-	78	Fireplaces	0	
Wind speed (mph)	15.0	7.5			

Construction descriptions

	Or	Area ft²	U-value Btu/ft²-°F	Insul R ft²-F/Btu	Htg HTM Btu/ft²	Loss Btu/h	Clg HTM Btu/ft²	Gain Btu/h
Walls								
12B-0sw: Frm wall, wd ext, r-11 cav ins, 1/2" gypsum board int fnsh, 2"x4" wood frm	n	326	0.097	11.0	2.10	686	2.69	878
	e	383	0.097	11.0	2.10	806	2.69	1030
	s	290	0.097	11.0	2.10	610	2.69	780
	w	383	0.097	11.0	2.10	806	2.69	1030
	all	1381	0.097	11.0	2.10	2907	2.69	3718
Partitions (none)								
Windows								
1A-clom: 1 glazing, clr glz, mtl no brk frm mat, 1/8" thk	n	52	1.270	0	27.6	1433	35.0	1821
	e	31	1.270	0	27.6	860	91.4	2851
	s	88	1.270	0	27.6	2436	38.1	3371
	w	31	1.270	0	27.6	860	91.4	2851
	all	203	1.270	0	27.6	5589	53.7	10894
Doors (none)								
Ceilings								
16B-7ad: Attic ceiling, asphalt shingles roof mat, r-7 ceil ins, 5/8" gypsum board int fnsh		1208	0.112	7.0	2.43	2936	6.01	7259
Floors								
19A-0bscp: Part floor, carpet fir fnsh, frm flr, 10" thkns, 5/8" gypsum board int fnsh		70	0.295	0	2.40	168	1.68	118

Project Information

For: Baratta Bridget D
25 N Ridgeview Rd, Stuart, FL 34996

Notes: Calcs are for whole house with 2 systems. Replacing system number 2 of 2. (2nd floor system)

Design Information

Weather: West Palm Beach Intl AP, FL, US

Winter Design Conditions

Outside db 48 °F
Inside db 70 °F
Design TD 22 °F

Summer Design Conditions

Outside db 90 °F
Inside db 75 °F
Design TD 15 °F
Daily range L
Relative humidity 50 %
Moisture difference 59 gr/lb

Heating Summary

Structure 13153 Btuh
Ducts 0 Btuh
Central vent (0 cfm) 0 Btuh
Humidification 0 Btuh
Piping 0 Btuh
Equipment load 13153 Btuh

Sensible Cooling Equipment Load Sizing

Structure 22532 Btuh
Ducts 0 Btuh
Central vent (0 cfm) 0 Btuh
Blower 0 Btuh
Use manufacturer's data n
Rate/swing multiplier 0.95
Equipment sensible load 21451 Btuh

Infiltration

Method Simplified
Construction quality Average
Fireplaces 0

	Heating	Cooling
Area (ft ²)	1208	1208
Volume (ft ³)	10872	10872
Air changes/hour	0.36	0.18
Equiv. AVF (cfm)	65	33

Latent Cooling Equipment Load Sizing

Structure 1309 Btuh
Ducts 0 Btuh
Central vent (0 cfm) 0 Btuh
Equipment latent load 1309 Btuh
Equipment total load 22759 Btuh
Req. total capacity at 0.70 SHR 2.6 ton

Heating Equipment Summary

Make
Trade
Model
AHRI ref
Efficiency 100 EFF
Heating input 4.5 kW
Heating output 15403 Btuh
Temperature rise 14 °F
Actual air flow 1000 cfm
Air flow factor 0.076 cfm/Btuh
Static pressure 0.10 in H2O
Space thermostat

Cooling Equipment Summary

Make Rheem
Trade Rheem
Cond 14AJM30
Coil RBHP21+RCHL36A1
AHRI ref 3412342
Efficiency 13.0 EER, 16 SEER
Sensible cooling 20020 Btuh
Latent cooling 8580 Btuh
Total cooling 28600 Btuh
Actual air flow 1000 cfm
Air flow factor 0.044 cfm/Btuh
Static pressure 0.10 in H2O
Load sensible heat ratio 0.95

Calculations approved by ACCA to meet all requirements of Manual J 8th Ed.

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 1-8-14 Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10723	Baratta	Final		
1st	25 N Ridgewood Honest Air	AC	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10695	Farrow	attachment		
9:30	47 N River Rd MV Custom	FINAL	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10350	Farrow	Final		
	47 N River Rd OB	Fence	PASS	CLOSE INSPECTOR <i>[Signature]</i>
	26 SIMMRA		<i>[Signature]</i>	INSPECTOR
10728	Smith	attachment		
	2 Heritage Way Smith Bros		PASS	INSPECTOR <i>[Signature]</i>
10650	122 S Sewalls W 122 S. Sewalls McPropane	UG tank		
			PASS	INSPECTOR <i>[Signature]</i>
				INSPECTOR