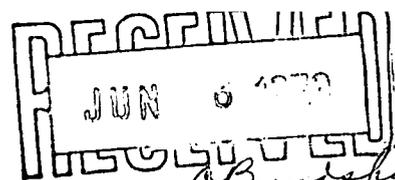


5 S Ridgeview Road

TOWN OF SEWALL'S POINT, FLORIDA

APPLICATION FOR BUILDING PERMIT



--Permit No. 407
Date 6-13-73

(This application must be accompanied by 3 sets of complete plans, to proper scale, including plot plan, foundation plan, floor plans, wall and roof cross sections, plumbing and electrical layouts, and at least, two elevations as applicable)

Owner C. RICHARD SHACKFORD Present Address 518 FAIRMONT AVE Ph 287-7665

General Contractor SUB CONTRACTOR Address _____ Ph _____

Where licensed _____ License No. _____

✓ Plumbing Contractor HOWARD BROS. License No. 515

✓ Electrical Contractor EVANS ELECTRIC License No. 41

Street building will front on RIDGEVIEW ROAD

Subdivision Home Wood Lot No. 4 Area BLOCKE

Building area, inside walls (excluding garage, carport, porches) Sq ft 1670

Other Construction (Pools, additions, etc.) _____

Contract Price (excluding land, rugs, appliances, landscaping) \$ 27,000.⁰⁰

Total cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

I understand that this permit is good for 12 months from date of issue and that the building must be completed in accordance with the approved plan and that the site be clean and rough-graded within 12 month period.

Signed by General Contractor _____

I understand that this building must be in accordance with the approved plan and comply with all code requirements before a Certificate of Approval for Occupancy will be issued and the property approved for all utility services. I, also, agree that within 90 days after the building has been approved for occupancy, that the property will, also, be landscaped as to be compatible with the neighborhood.

C. Richard Shackford
Signed by Owner

Note: Speculation Builders will be required to sign both statements.

TOWN RECORD

Date submitted 6-8-73

Date approved 6/13/73 ✓

Certificate of Occupancy issued _____ Date 407

Application/Permit No. MC3-544

DEPARTMENT OF POLLUTION CONTROL
Application and Permit
Of
Individual Sewage Disposal Facilities

Section I - Instructions:

1. Percolation test data, soil profile and watertable elevation information must be attached. (Note: Test must be made at proposed location of System).
2. Existing building and proposed buildings on lot must be shown and drawn to scale at their location or proposed location. (Use block on this sheet or attach plot plan).
3. Proposed location of septic tank must be shown on plan.
4. Any pond or stream areas must be indicated on the plan.
5. Indicate name and date of recording of subdivision. If not recorded, attach metes and bounds description.
6. Complete the following information section.

Notes:

1. Not valid if sewer is available.
2. Individual well must be 75 feet from any part of system.
3. Call (305) 464-8525 and give this office an 8-hour notice when ready for inspection.

Section II - Information:

1. Property Address (Street & House No.) PLTBK 3 PP 35 (MARTIN Co)
Lot 4 Block "E" Subdivision HOMEWOOD
Date Recorded 1-11-56 Directions to Job SEE ATTACHED

2. Owner or Builder RICHARD SHACKFORD
P. O. Address TWIN RIVERS TRAILER CITY STUART, FLORIDA 33494

3. Specifications PARK
4 BED ROOMS

1200 Gals 93.3 Tank Drainfield
ft of 6" clay tile
or 5" perforated
plastic drain in a
3' trench or
1200 Gals 186.6 ft of 4" clay drain
or 4" perforated
plastic drain in an
18" trench

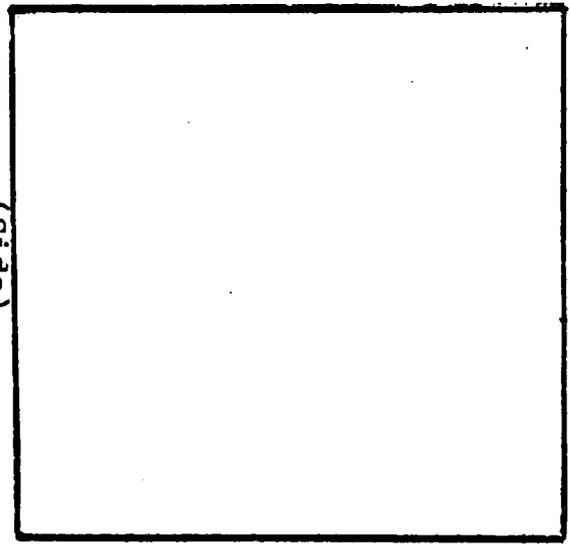
Scale 1" - 50'

(Rear)

4. House to be constructed:
Check one: VA FHA
 Conventional X

This is to certify that the project described in this application, and as detailed by the plans and specifications and attachments will be constructed in accordance with state requirements.

(Name of Street or State Rd.)



(Name of Street or State Rd.)

Applicant: R. SHACKFORD
Please Print

Signature: [Handwritten Signature]

(Front)
(Name of Street or State Road)

Date: _____

***** DO NOT WRITE BELOW THIS LINE *****

Section III - Application Approval & Construction Authorization

Installation subject to following special conditions: _____

The above signed application has been found to be in compliance with Chapter 10D-6, DPC rules and construction is hereby approved, subject to the above specifications and conditions.

BY: [Handwritten Signature] Date: 5/2/73

Section IV - Final Construction Approval

Construction of installation approved: Yes No.

Date: _____ By: _____

FHA No. _____ VA No. _____

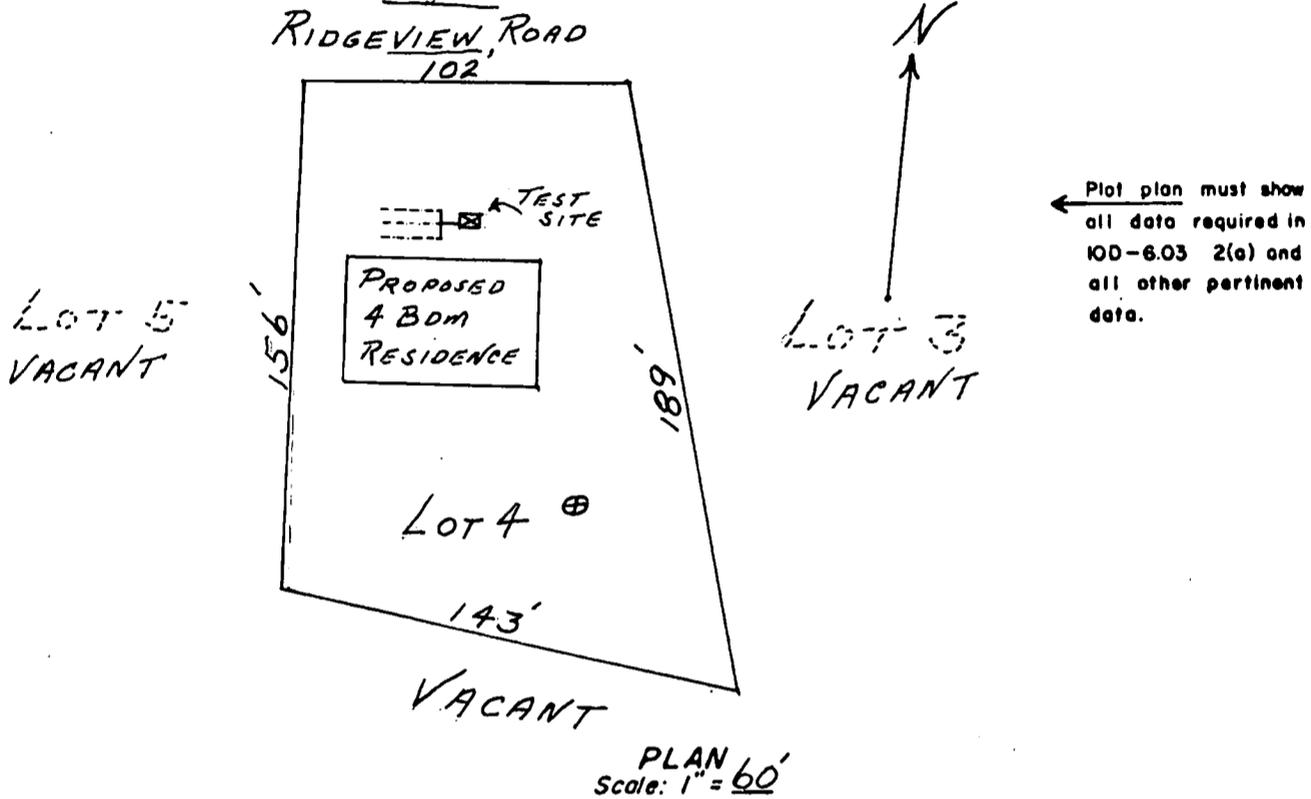
FLORIDA DEPARTMENT OF POLLUTION CONTROL

S. E. Subregion
 806 South 6th Street
 Fort Pierce, Florida 33450
 Tel. (305) 464-8525

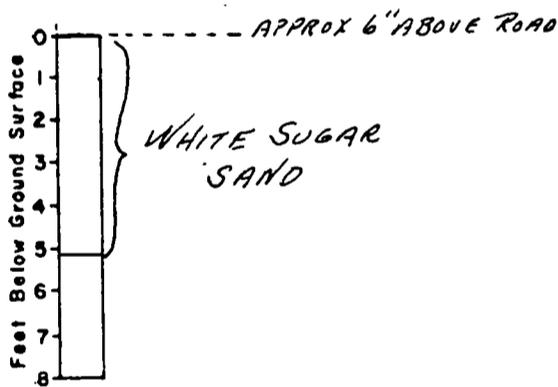
INDIVIDUAL SEWAGE DISPOSAL FACILITIES
 DATA SHEET

Location: LOT 4, BLOCK "E" Applicant: RICHARD SHACKFORD
HOMEWOOD S/D, PLT BK 3, 1P35 (MC) County: MARTIN

NOTE: This septic tank system is not located within 50 feet of the high water line of a lake, stream, canal or other waters, nor within 75 feet of any private well; nor within 100 feet of any public water supply; nor within 10 feet of water supply pipes; nor within 100 feet of any public sewer system.



SOIL DATA



SOIL BORING LOG

Soil Identification: CLASS I GROUP SW
 Soil Characteristics WELL GRADED WHITE SUGAR SAND
 Percolation Rate 20 SEC PER 1 INCH min/inch
 Water Table Depth 5'
 Water Table Depth During Wet Season 4'
 Compacted Fill Of NONE Req'd
 Compacted Fill Checked By: _____
 Date _____

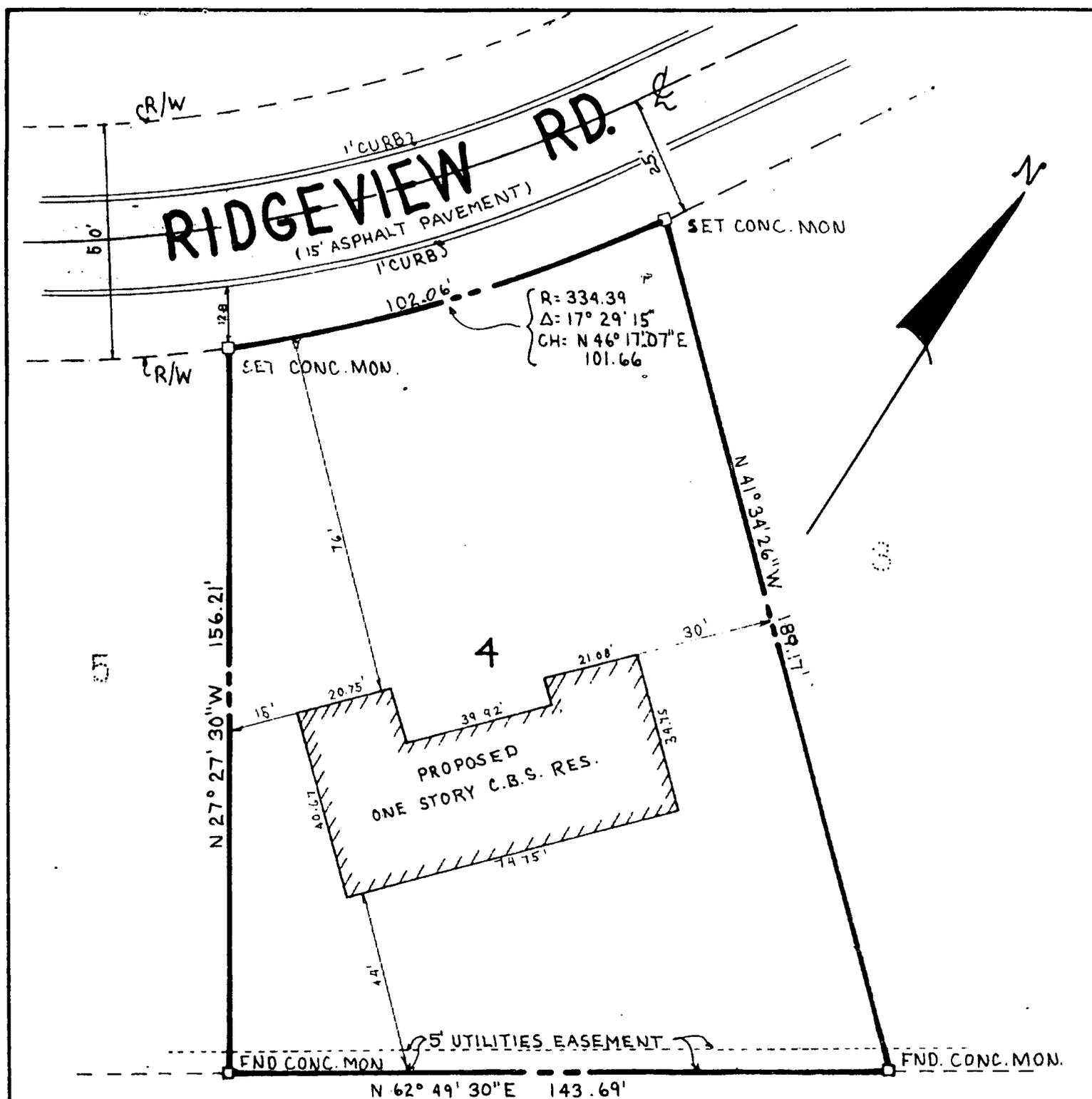
LEGEND

- Drainage Pattern
- Proposed Septic Tank and Drainfield
- Proposed Water Supply Well
- Existing Water Supply Well
- Soil Boring and Percolation Test Location



CERTIFIED BY: Bertin C. Tash
 FLORIDA PROFESSIONAL No. 2292
 Date 4-28-73 Job No. _____

Sheet _____ of _____



MAP OF SURVEY
 FOR
C. RICHARD SHACKFORD
 DESCRIPTION

LOT 4 OF BLOCK "E" OF A PLAT ENTITLED "HOMWOOD" A SUBDIVISION OF LOTS 16, 17 AND 18, PLAT OF ARBELLA, PLAT BOOK 3, PAGE 29, PUBLIC RECORDS OF PALM BEACH COUNTY, FLORIDA; AMENDED PLAT OF "HOMWOOD" FILED JANUARY 11, 1956 AND RECORDED IN PLAT BOOK 3, PAGE 35, MARTIN COUNTY, FLORIDA, PUBLIC RECORDS.

ROGERS - TASH, INC.

CONSULTING ENGINEERS AND LAND SURVEYORS

508 COLORADO AVENUE STUART, FLORIDA 33494
 PH. (305) 287-5628 STUART, FLORIDA OR (305) 465-0505 FT. PIERCE, FLORIDA

I HEREBY CERTIFY that the plat shown hereon is a true and correct representation of a survey made under my direction and that said survey is accurate to the best of my knowledge and belief, and that unless otherwise shown, there are no encroachments.

Robert C. Tash

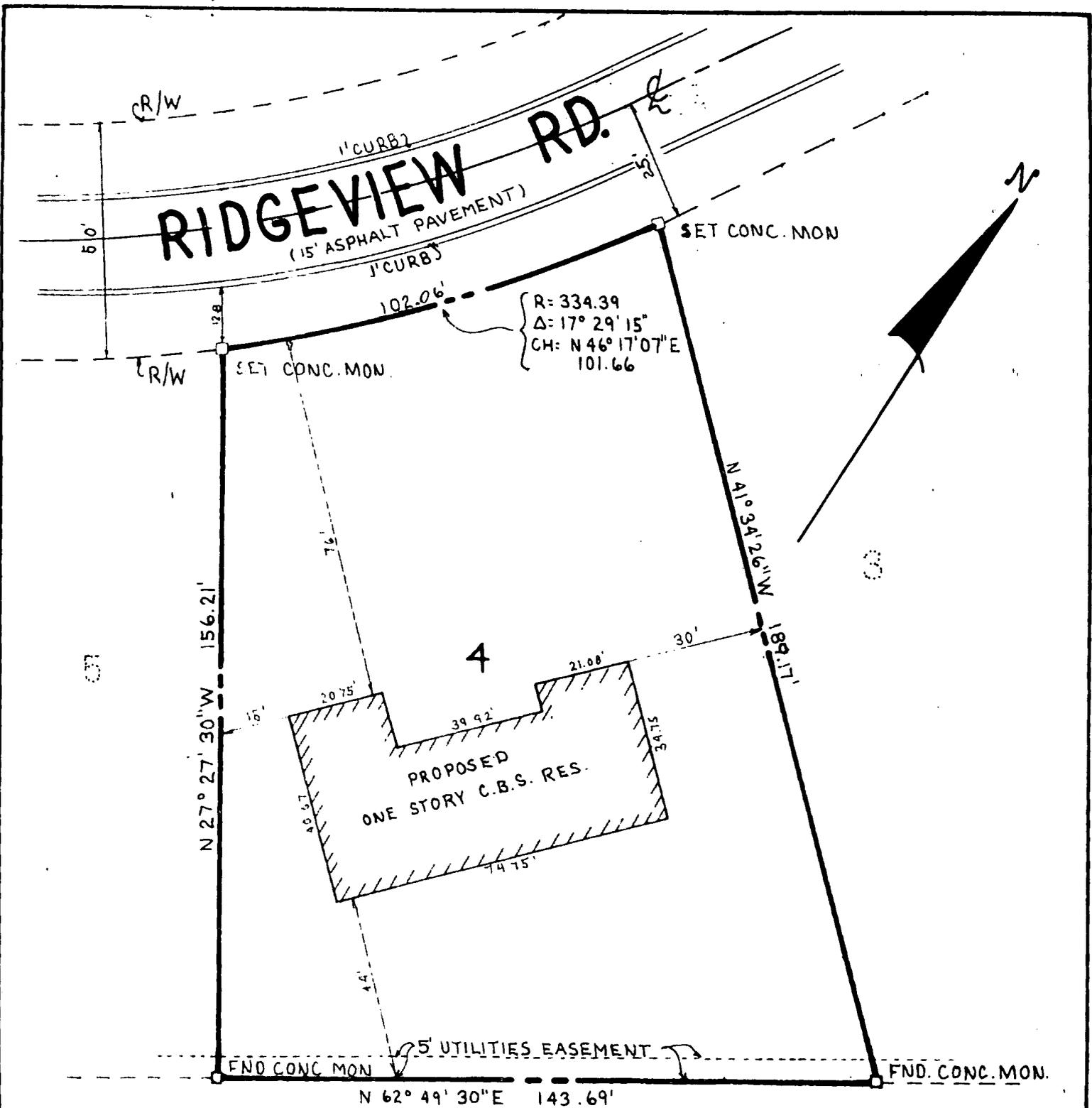
Registered Land Surveyor
 Florida Certificate No. 2292

Date:
4/30/73

Scale:
1" = 30'

Drawn By:
N.P.

Job No.:
73-098



MAP OF SURVEY
FOR
C. RICHARD SHACKFORD
DESCRIPTION

LOT 4 OF BLOCK "E" OF A PLAT ENTITLED "HOMWOOD" A SUBDIVISION OF LOTS 16, 17 AND 18, PLAT OF ARBELLA, PLAT BOOK 3, PAGE 29, PUBLIC RECORDS OF PALM BEACH COUNTY, FLORIDA; AMENDED PLAT OF "HOMWOOD" FILED JANUARY 11, 1956 AND RECORDED IN PLAT BOOK 3, PAGE 35, MARTIN COUNTY, FLORIDA, PUBLIC RECORDS.

ROGERS - TASH, INC.

CONSULTING ENGINEERS AND LAND SURVEYORS

508 COLORADO AVENUE STUART, FLORIDA 33494
PH. (305) 287-5628 STUART, FLORIDA OR (305) 465-0505 FT. PIERCE, FLORIDA

I HEREBY CERTIFY that the plat shown hereon is a true and correct representation of a survey made under my direction and that said survey is accurate to the best of my knowledge and belief, and that unless otherwise shown, there are no encroachments.

Arthur C. Tash

Registered Land Surveyor
Florida Certificate No. 2292

Date: 4/30/73	Scale: 1"=30'	Drawn By: N.P.	Job No.: 73-098
------------------	------------------	-------------------	--------------------

837

POOL & PATIO

TOWN OF SEWALL'S POINT, FLORIDA

#407

APPLICATION FOR BUILDING PERMIT

Permit No. 837

Date MAY 15, 1978

(This application must be accompanied by 3 sets of complete plans, to prop scale, including plot plan, foundation plan, floor plans, wall and roof cr sections, plumbing and electrical layouts, and at least, two elevations as applicable)

Owner Edwin Dederer Present Address 55 Ridgeview Rd Ph 283-6446

General Contractor LOWEN POOLS Address 13065 US 1 - Ft Pierce Ph 283-4040

Where licensed MARTIN CO. License No. 245

Plumbing Contractor _____ License No. _____
Electrical Contractor _____ License No. _____

Street building will front on _____

Subdivision Homewood Lot No. 54 Area E

Building area, inside walls (excluding garage, carport, porches) Sq ft _____

Other Construction (Pools, additions, etc.) Pool + Patio

Contract Price (excluding land, rugs, appliances, landscaping) \$ 5,900.00

Total cost of permit \$ _____

Plans approved as submitted ✓ Plans approved as marked _____

I understand that this permit is good for 12 months from date of issue and that the building must be completed in accordance with the approved plan and that the site be clean and rough-graded within 12 month period.
Robert J. Haney CFCO 10400
Signed by General Contractor

I understand that this building must be in accordance with the approved plan and comply with all code requirements before a Certificate of Approval for Occupancy will be issued and the property approved for all utility services. I, also, agree that within 90 days after the building has been approved for occupancy, that the property will, also, be landscaped as to be compatible with the neighborhood.

Signed by Owner _____

Note: Speculation Builders will be required to sign both statements.

TOWN RECORD

Date submitted John O. Guenther 18 May 1978

Date approved Charles A. [unclear] 5/18/78

Certificate of Occupancy issued 7/11/78 Date

#837

848

POOL ENCLOSURE

Ref = 837

TOWN OF SEWAPORT FLORIDA JUN 22 1978 APPLICATION FOR BUILDING PERMIT

Permit No. 848 Date 6-22-78

This application must be accompanied by three sets of complete plans, to scale (1/4" scale for building drawings), including plot plan, foundation plan, floor plans, wall and roof cross-sections, plumbing and electrical layouts, and at least two elevations, as applicable. A copy of the property deed is required for new house construction.

- Owner MR DEDERER Present address 5 S. RIDGEVIEW RD Phone 465-2700
-General contractor CLIMATROL FLA. Corp address 539 S. INDUSTRIAL RD Phone 727-2600 COCOA FLA
Where licensed FLA License No. CRC001786
-Plumbing contractor License No.
-Electrical contractor License No.
-Street the building will front on 5 S. RIDGEVIEW RD
Subdivision Home wood Lot No. 4 Area E
-Building area, inside walls (excluding garage, carport, porches, etc.)..square feet 736' sq
-Other construction (pools, additions, etc.) POOL SCREEN ENCLOSURE
-Contract price (excluding land, carpeting, appliances, landscaping, etc) \$ 1400.00
-Total cost of permit \$ 7,100 10.00
-Plans approved as submitted [checked] Plans approved as marked

I understand that this permit is good for 12 months from the date of its issue and that the building must be completed in accordance with the approved plan, and that the site will be clean and rough-graded within the 12 month period.

Agent [Signature] General Contractor

I understand that this building must be in accordance with the approved plans and that it must comply with all code requirements before a Certificate of Approval for Occupancy will be issued and the property approved for all utility services. I agree that within 90 days after the building has been approved for occupancy, the property will be landscaped so as to be compatible with its neighborhood.

Owner

Note: speculation builders will be required to sign both of the above statements.

TOWN RECORD Date submitted
Approved: [Signature] Building Inspector Date 6/27/78

Approved: [Signature] Commissioner Date 28 June 1978

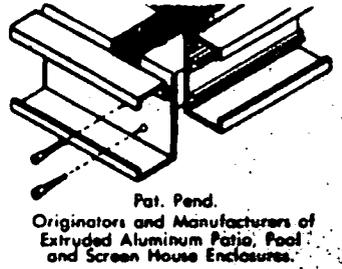
Certificate of Occupancy issued [Signature] Date 7/13/78 #848



CLIMATROL FLORIDA CORPORATION

529 South Industry Road
COCOA, FLORIDA 32922
Telephone: 632-0264

MELBOURNE: (305) 727-2600
ORLANDO: (305) 422-2646
JACKSONVILLE: (904) 269-2201



Job No. _____

SOLD TO Louden (Deolena) PHONE 465-2700 DATE 6/7/78 1978

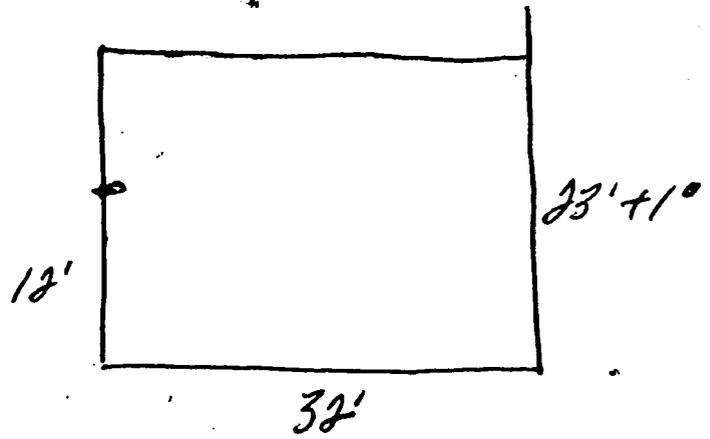
ADDRESS 5 S. Ridgeview Rd. CITY Pewee Point.

INSTALLATION ADDRESS _____ CITY _____

TERMS & FINANCE _____ DELIVERY DATE _____

- SCREEN WALLS COLOR: Char. 20/20
- SCREEN ROOF COLOR: " "
- FLAT GABLE BUBBLE
- DIVING DOME _____
- BEAMS 603
- ALUM. ROOF No
- VINYL STRIPS No
- CHAIR RAIL 16" 24" 36"
- FLA. GLASS 16" Fla. Glass
- KICK PLATE SIZE _____
- DOORS (1)
- GUTTERS 44' 2 Q.S.
- COLUMNS _____
- WINDOWS TYPE _____
- CABLEBRACES _____
- ENGINEER DRAWINGS _____
- PERMIT _____
- LOT BLOCK _____

SKETCH



Add ~~1359.00~~
TOTAL PRICE \$ 1159.00 DEPOSIT \$ _____ BALANCE \$ _____

THIS PRICE IS BASED ON DIMENSIONS SHOWN IN THE ABOVE SKETCH

SUBDIVISION _____

MATERIAL & WORKMANSHIP GUARANTEED FOR 1 YEAR

1. For the total price including tax the seller agrees to fabricate, deliver and install the screen enclosure described above.
2. This proposal does not become a contract until accepted and signed by an officer of the seller-company, and if not accepted, any cash payment will be returned.
3. Price terms and other elements of this proposal are good for 90 days from date _____ and void thereafter at the seller's option.
4. No statement, warranty, implied or expressed, representation or agreement, written or verbal, not appearing upon the face of this contract shall be binding upon the parties hereto.
5. Seller expressly reserves all contractors, mechanics and material man's lien which may be asserted under any provision of law to secure payment of the contract price and may assert and fix the same as lien upon the real property on which installation is made.
6. In the event payment on this contract is enforced through attorneys or by suit or in bankruptcy or probate proceedings, seller may recover and purchaser hereby agrees to pay reasonable attorney fees and costs of court.
7. All sums not paid as due shall bear interest of 8% per annum and unless otherwise stated all sums become due and payable upon completion of work.
8. Seller agrees to take all reasonable steps to insure the fulfillment of orders received, but our performance is subject to delays or cancellations caused by war, accident strikes, inability to secure labor and raw materials, fires, embargoes, transportation shortages and delays, government conscription, priorities, and restraint, failure on your part to give notice of your requirements and/or proper measurements and other information and all other causes whether of the same or different class affecting the whole or any part of seller's obligation hereunder.
9. Contractor or owner agrees to supply electrical power at job site.
10. Climatrol Florida Corporation will retain title until full payment of obligation of indebtedness is met.

I/WE have read the foregoing proposed contract and accept the same on the terms and conditions stated above.

PURCHASER Don Martin

DATE 6/9/78

CLIMATROL FLORIDA CORPORATION

By [Signature]

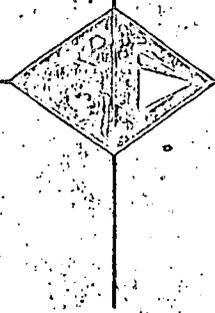
[Signature]
6/27/78

[Signature]
26 June 1978

#848

CLIMATROL FLORIDA CORPORATION

529 SOUTH INDUSTRY ROAD - COCOA, FLORIDA - 632-0264



CLIMATROL FLORIDA CORPORATION
Salvatore Fapore
State Certification No. CRC001786

To Whom It May Concern:

Please accept this letter as my authorization for the undersign to acquire Building Permits in my behalf for Climatrol Florida Corporation.

G. BROWN HART
Undersigned

For the job located at

5 S. RIDGEVIEW RD. SEVENS POINT

Lot _____ Block _____
Subdivision _____

property owner MR. DEDERER

Sincerely,
Salvatore Fapore
Salvatore Fapore

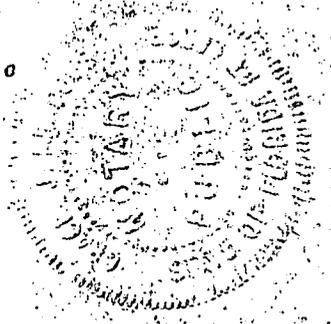
State of Florida
County of Brevard

Sworn to and subscribed before me this 22nd
day of JUNE, 1978

Grace Meadows
Notary

NOTARY PUBLIC - STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES NOV. 9, 1979

chd #848



STATE OF FLORIDA Department of Professional And Occupational Regulation
CONSTRUCTION INDUSTRY LICENSING BOARD

DATE: 05/29/77 FILE NO. CR C001786 BATCH NO. 300

THE CERTIFIED RESIDENTIAL CONTRACTOR
NAMED BELOW IS CERTIFIED
UNDER THE PROVISIONS OF CHAPTER 468 FOR
THE YEAR EXPIRING JUNE 30, 1979

FAPORE, SALVATORE
CLIMATROL FLORIDA CORP
529 S INDUSTRY ROAD
COCOA FL 32922

Robert L. ...
GOVERNOR

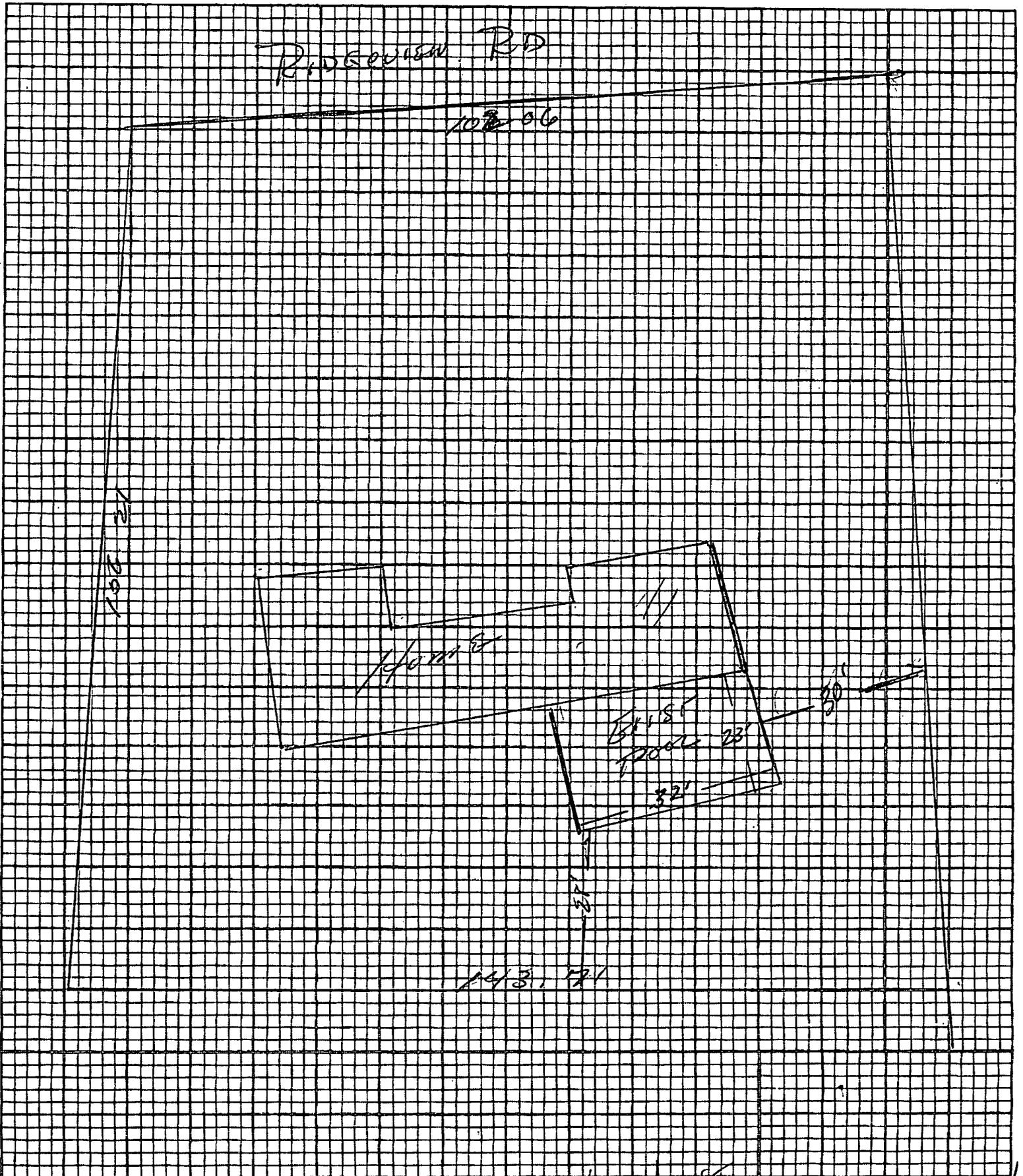
DISPLAY IN A CONSPICUOUS PLACE

Raymond W. ...
SECRETARY OF PROFESSIONAL
AND OCCUPATIONAL REGULATION

Job Name Louden Pools (Mc DODSREE-
Job Address 5 S. RIDGEVIEW RD
Lot 4 Block E
Subdivision HOMEROOD

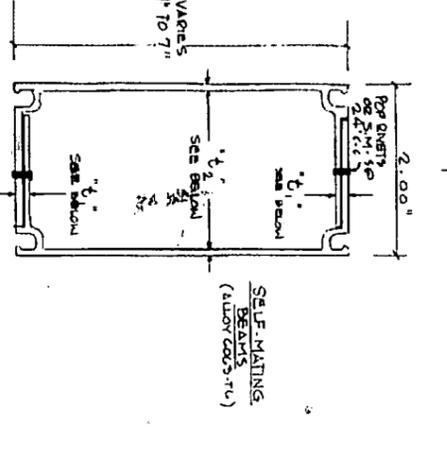
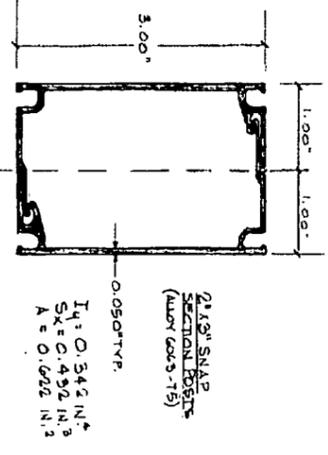
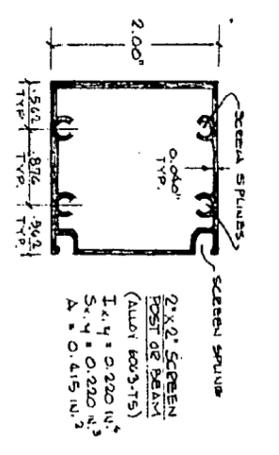
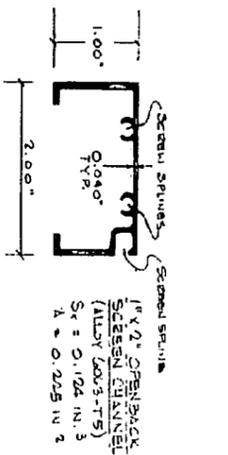
Date Issued _____
Date Wanted _____
Beams 1 x _____
Color Roof _____
Sides _____
Ch. RI. _____
RATE _____

SKETCH



6/27/78
Chad Almyre
John J. Guethner
28 June 1978
#848

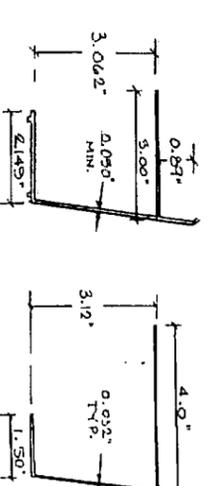
EXTRUDED POST AND BEAM SECTIONS:



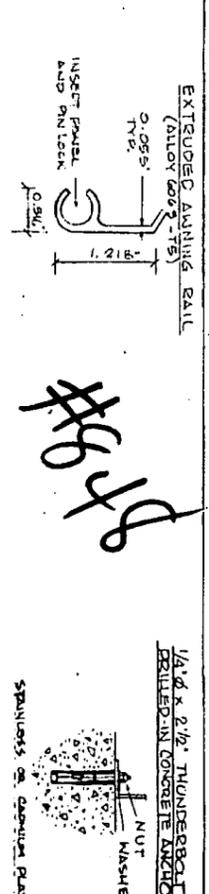
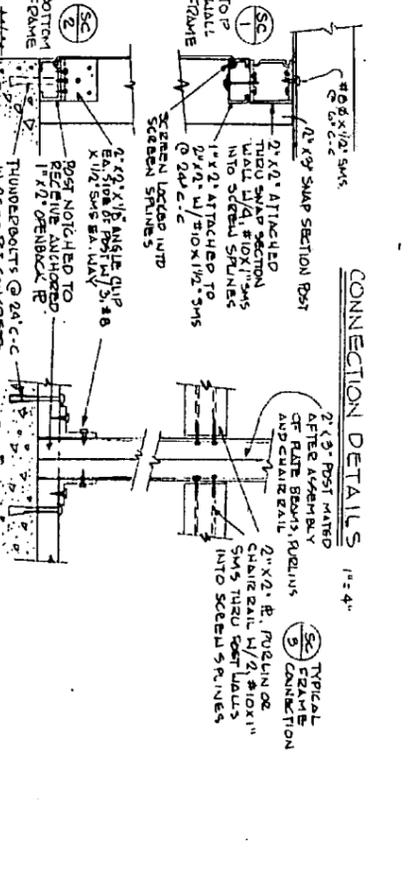
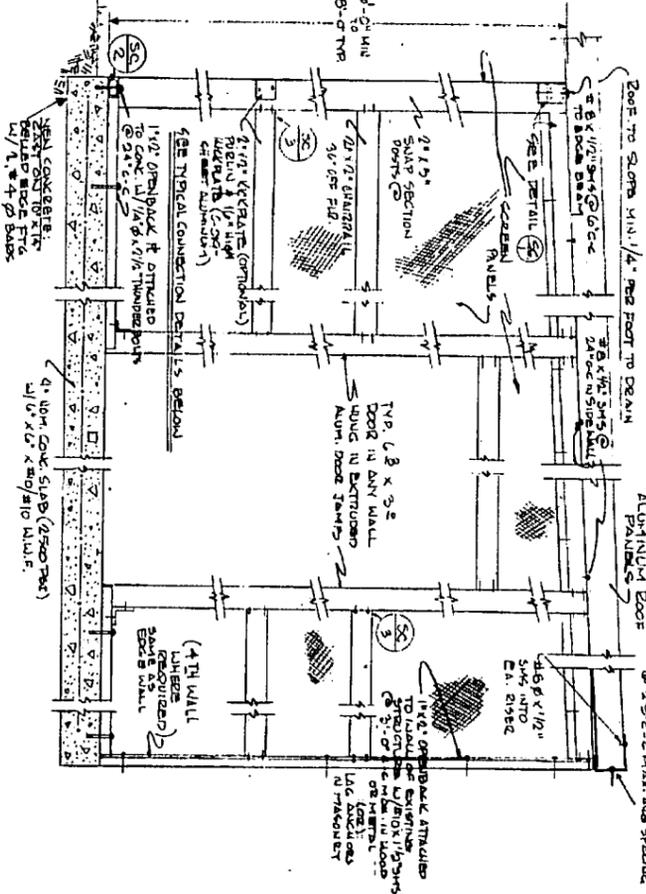
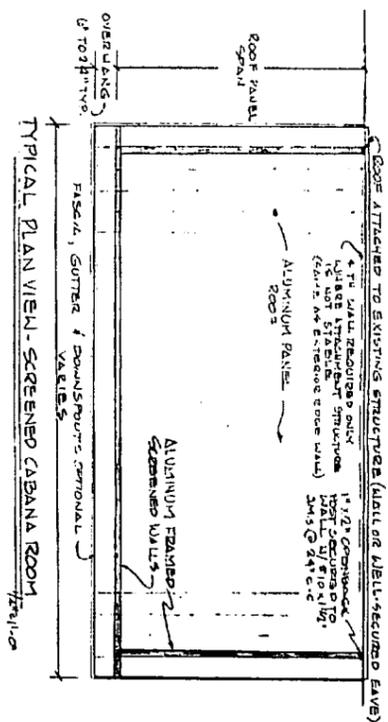
PROPERTIES OF SELF-MATING BEAMS

DEPTH	Wt.	Sx	Iy
4"	0.118	0.045	1.08 IN ⁴ 0.48 IN ⁴
6"	0.104	0.095	1.86 IN ⁴ 0.75 IN ⁴
7"	0.225	0.095	3.69 IN ⁴ 0.98 IN ⁴

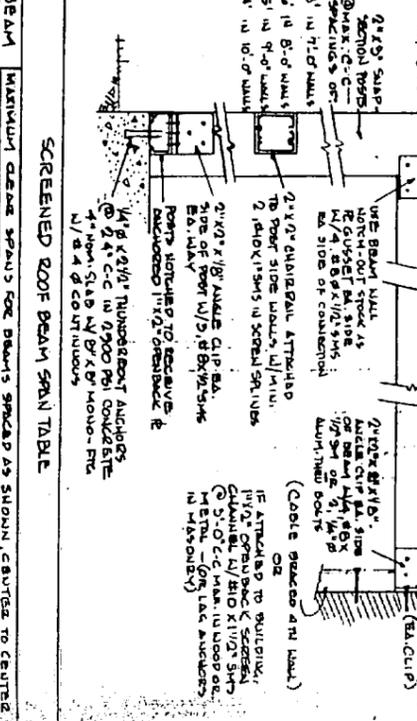
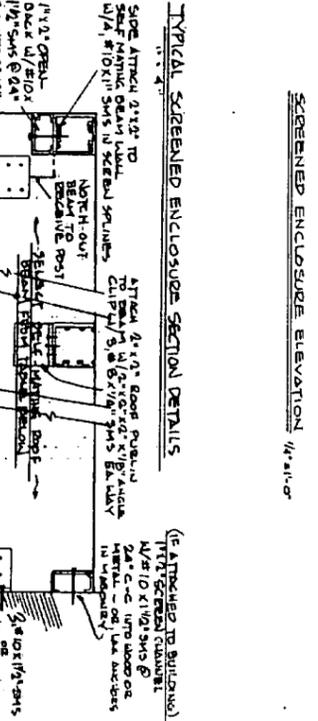
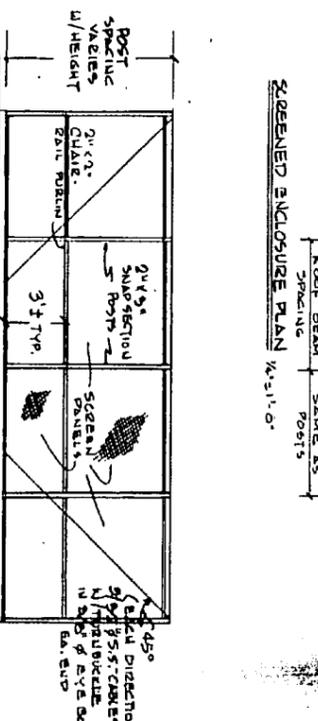
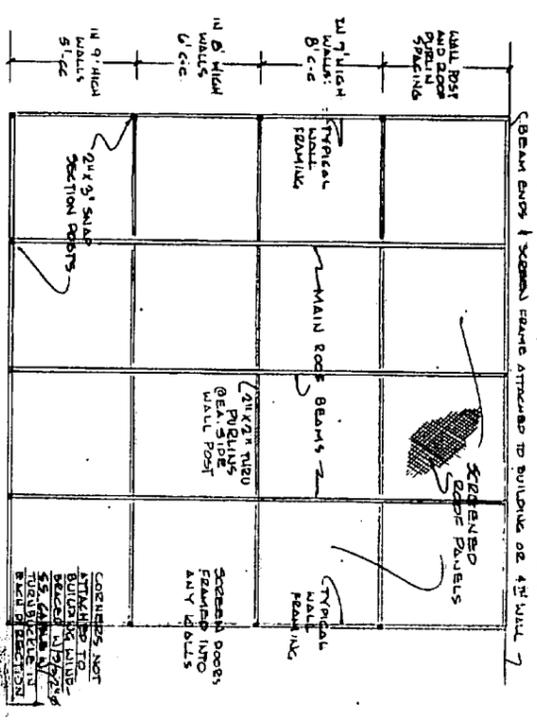
EXTRUDED MAIN HEADERS (ALLOY 6063-T5)



SCREENED CABANA ROOM DETAILS



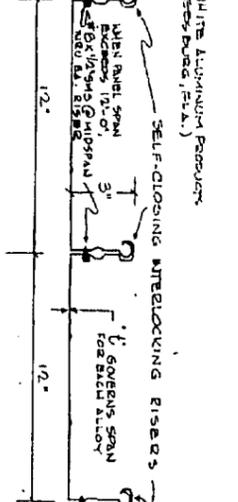
SCREEN ENCLOSURE DETAILS



SCREENED ROOF BEAM SPAN TABLE

BEAM SIZE	MAXIMUM CLEAR SPAN FOR BEAMS SPACED AS SHOWN CHANGE TO CENTER
2 1/2" x 4" SELF-MATING	25'-0"
2 1/2" x 4" SELF-MATING	22'-6"
2 1/2" x 4" SELF-MATING	21'-6"
2 1/2" x 4" SELF-MATING	20'-0"
2 1/2" x 4" SELF-MATING	19'-0"
2 1/2" x 4" SELF-MATING	18'-0"
2 1/2" x 4" SELF-MATING	17'-0"
2 1/2" x 4" SELF-MATING	16'-0"
2 1/2" x 4" SELF-MATING	15'-0"
2 1/2" x 4" SELF-MATING	14'-0"
2 1/2" x 4" SELF-MATING	13'-0"
2 1/2" x 4" SELF-MATING	12'-0"
2 1/2" x 4" SELF-MATING	11'-0"
2 1/2" x 4" SELF-MATING	10'-0"
2 1/2" x 4" SELF-MATING	9'-0"
2 1/2" x 4" SELF-MATING	8'-0"
2 1/2" x 4" SELF-MATING	7'-0"
2 1/2" x 4" SELF-MATING	6'-0"
2 1/2" x 4" SELF-MATING	5'-0"
2 1/2" x 4" SELF-MATING	4'-0"
2 1/2" x 4" SELF-MATING	3'-0"
2 1/2" x 4" SELF-MATING	2'-0"
2 1/2" x 4" SELF-MATING	1'-0"
2 1/2" x 4" SELF-MATING	0'-0"

ALUMINUM ROOF PANEL SYSTEM



MAXIMUM SPANS FOR 120 MPH WIND - 20 PSF LL

ALLOY	1/2" = 0.092"	3/4" = 0.092"
3003 H14	14'-0"	12'-0"
3003 H16	14'-9"	12'-7"

(* EXCEPT WHERE FURNISH UNIFORM BY LOCAL ORDINANCE)
SAFE LOAD-CARRYING PROPERTIES AND SPANS FOR THESE ROOF PANELS HAVE BEEN VERIFIED BY LOAD TESTS ON ROOF ASSEMBLIES CONDUCTED UNDER THE SUPERVISION OF THE UNDERWRITERS ENGINEERING DEPARTMENT IS LIMITED TO 1/80 OF DEFLECTION AT 20 PSF LL IN ALL CASES.
WHERE LOCAL ORDINANCES IMPOSE FURTHER LIMITATIONS OR SPANS OR PROPORTIONS, SUCH ORDINANCES SHOULD BE ADHERED TO IN APPLICATION OF THE DESIGN.
ALUMINUM BOLTS SHALL BE ALLOY 3004-T4

ENGINEERING NOTE:

STRUCTURES DETAILED IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH SOUTHERN STANDARD BUILDING CODE 1974 AMENDMENTS.
DESIGN LOADS CONSIDERED:
DL + 20 PSF LL
120 MPH WIND VEL CITY PRESSURES
WHERE LOCAL ORDINANCES IMPOSE FURTHER LIMITATIONS OR SPANS OR PROPORTIONS, SUCH ORDINANCES SHOULD BE ADHERED TO IN APPLICATION OF THE DESIGN.

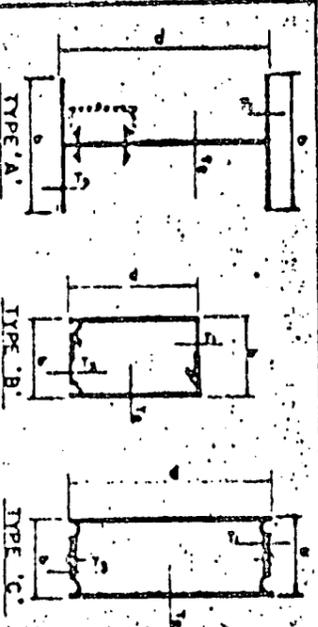
CHARLES R. CLINE, P.E.
FLORIDA REG. NO. 12,259

Handwritten signatures and notes:
Charles R. Cline
Date: 7/11/76
Project: Cabana Room Enclosure

HADLAN ENGINEERING LABORATORIES, INC.
PO BOX 5050
LAVENAND, FLORIDA 39605

DATE: 7/11/76

MASTER PLAN FOR SCREENED CABANA ROOMS ENCLOSURES
FOR
CLIMATEROL, INC.
229 SOUTH INDUSTRY ROAD
CORONA, FLORIDA 32922



BEAMS AND COLUMNS

BEAM AND COLUMN SCHEDULE

MARK	TYPE	SIZE	THICKNESS	MAX BEAM SPAN	SECTION	REMARKS						
603	A	300	600	300	094	060	094	16'-0"	6'-0"	6'-0"	6'-0"	W/21X25 SHAPED ON
703	A	300	750	300	123	066	123	21'-0"	6'-0"	6'-0"	6'-0"	DO
804	A	400	800	400	123	070	123	21'-0"	6'-0"	6'-0"	6'-0"	DO
904	A	400	1000	400	140	096	140	21'-0"	6'-0"	6'-0"	6'-0"	DO
302	B	200	300		090	090	090	12'-5"	11'-0"	10'-0"		
402	B	200	400		094	094	094	9'-0"	6'-0"	7'-0"		PROV 2" SMS AT 24" OC
502	C	200	600		094	094	094	11'-0"	11'-0"	11'-0"		DO
602	C	200	800		094	094	094	11'-0"	11'-0"	11'-0"		DO
702	C	200	700		094	094	094	11'-0"	11'-0"	11'-0"		DO

MISCELLANEOUS FASTENING SCHEDULE

MARK	TYPE	SIZE	THICKNESS	MAX COLUMN HT	SECTION	REMARKS						
202	MISC	200	200		040	040	040	9'-0"	6'-0"	7'-0"		PROV 2" SMS AT 24" OC
402	B	200	400		094	094	094	11'-0"	11'-0"	11'-0"		DO
502	C	200	600		094	094	094	11'-0"	11'-0"	11'-0"		DO
602	C	200	800		094	094	094	11'-0"	11'-0"	11'-0"		DO
702	C	200	700		094	094	094	11'-0"	11'-0"	11'-0"		DO

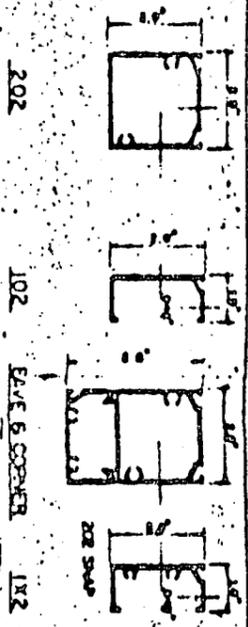
SCREEN WALL CABLE SCHEDULE

MARK	TYPE	SIZE	THICKNESS	MAX COLUMN HT	SECTION	REMARKS
8'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
10'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
12'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
14'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
16'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
18'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
20'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
22'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
24'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
26'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
28'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			
30'-0"	1 SET (2 CABLES)	1/2"	2 SETS (4 CABLES)			

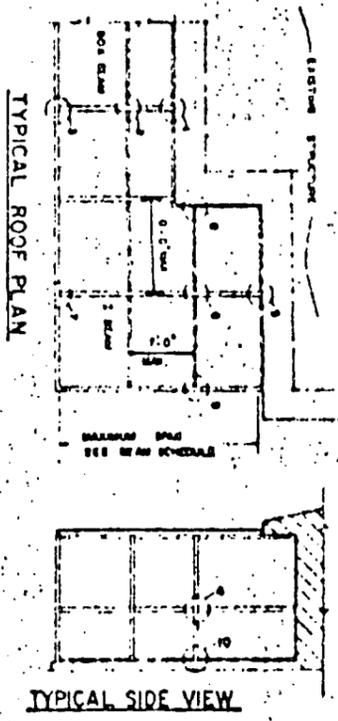
MISCELLANEOUS FASTENING SCHEDULE

MARK	DESCRIPTION	FASTENER
202	STEEL TO L2 AT BEAM	2 @ 1/2" X 3/8" SMS
202	STEEL TO L2 AT SECTION	DO
202	CHAIR SAIL TO COLUMN	DO
112	PERIMETER WEM TO COL	DO
112	PERIMETER WEM TO CONC	ANCHOR AT 24" C-C
112	PERIMETER WEM TO WOOD	PROV 2" SMS AT 24" C-C

ANCHORS TO CONCRETE & MASONRY SHALL BE 1/4" X 2 1/2" THREESCREWTS #10 X 2 1/2" SMS IN JORDAN 1020 ANCHOR OR APPROVED EQUIV.



MISCELLANEOUS COMPONENTS

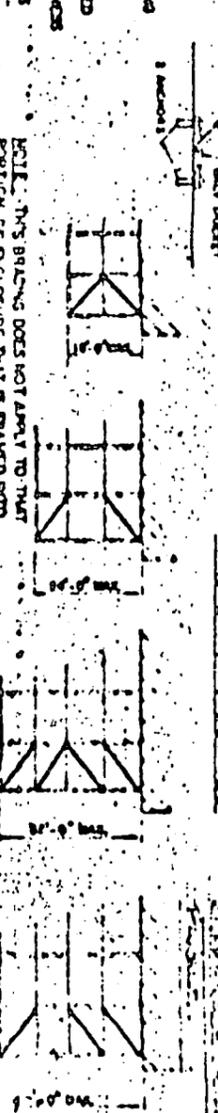


TYPICAL ELEVATION



DETAIL 8, 9, 10

WIND BRACING DETAILS



SCREEN ENCLOSURE DETAIL SHEET

CLIMATROL FLORIDA CORP.
599 SO. NORTHERN RD., COVINGTON, FLORIDA

ENGINEER: CLAYTON S. WILSON
DATE: JAN 15, 1975
REVISION: MAY 27, 1975

1252

**SOLAR HOT
WATER SYSTEM**

#

TOWN OF SEWALL'S POINT FLORIDA

Permit No.

1252

Date

11/24/80

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

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

Owner Edwin Dodson Present address 5 S. Ridgeway Rd.

Phone 283-6446

Contractor Seacoast Dist of Stuart Inc Address P.O. Box 282 Port Salerno

Phone 286-2183

Where licensed Martin County License number 1106-00377

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: Solar Hot Water System - Collector mounted on Pean Roof - Same System Approved Permit 1132 for State the street address at which the proposed structure will be built. T.A. Farmstead

Subdivision Honolulu Lot No. 4 - BLOCK E

Contract price \$ 1330.00 Cost of Permit \$ 7.00 (PAID)

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Harold R. Ziegler

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 Edwin D. Dodson

TOWN RECORD

Date submitted

Approved: J. Mazzurra
Building Inspector

Date 12/3/80

Approved: H.C. Stubbell
Commissioner

Date 12/6/80

Final Approval given: 12/17/80 Jim
Date

Certificate of Occupancy issued _____
Date

SP/1-79

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

1252

SUN COAST DISTRIBUTORS OF STUART, INC.

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

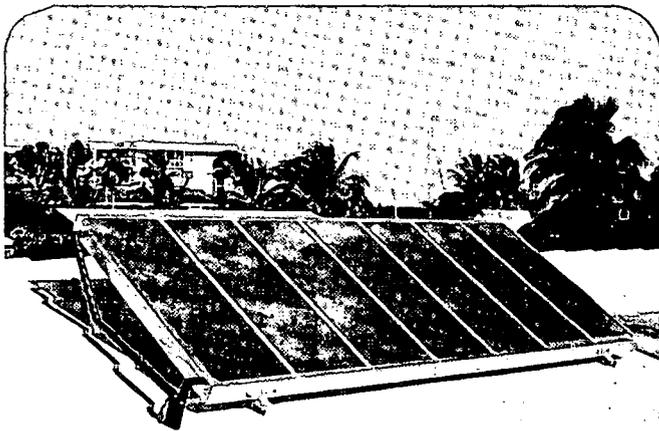
SDI

P. O. BOX 782
PORT SALERNO, FLA. 33492
286-2183

12/3
Jan 12/3/80

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

SOLAR HOT WATER HEATER



SOLAR WATER HEATING

In a world of rapidly vanishing supplies of fossil fuels, use of gas or electricity for low temperature applications such as water heating is not prudent. Solar energy can do the job as it has in Florida for over 40 years. Solar energy will easily heat water to over 150° and can supply most of our needs right now. The energy is infinite and the technology is up to date. In the average family, SDI recommends one 4' x 10' copper solar panel with an 82 gallon tank, and one 2' x 10' panel with a 40 gallon tank for two people. Since a high percentage of an annual utility bill is for heating hot water (every day, 365 days per year), a solar water heater makes sense — with an occasional boost from the back up electric unit, most of the water heating bill can be saved. This provides an excellent "tax free" return on an investment and is particularly attractive in new construction where the SDI system can be included in all types of home mortgages, including FHA.

SDI SYSTEM

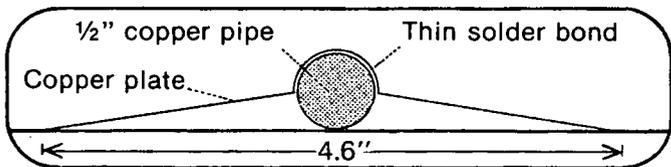
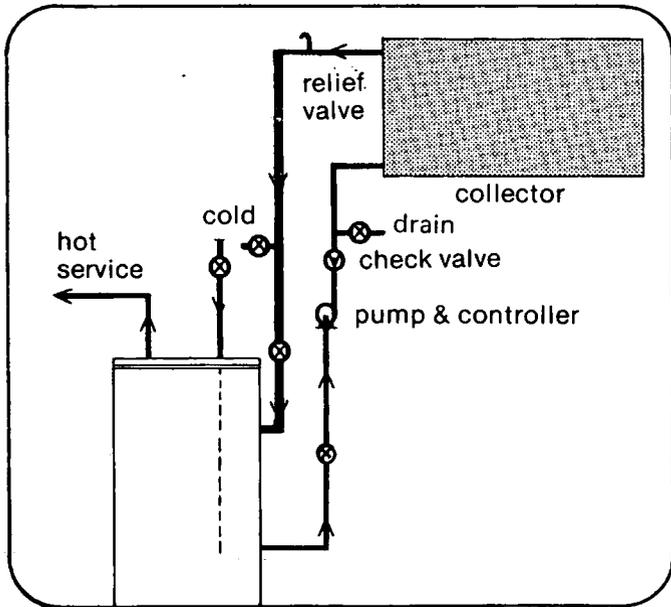
The heart of a solar water heater is a solar collector that transfers energy from the sun to water. The collector is basically a formed copper plate that has several rows of copper tubing soldered in the grooves. The plate and tubes are painted black to absorb heat. Thermax insulation is used to insulate the plate and the entire assembly is housed in an insulated extruded aluminum box with sheet aluminum backing.

Above the collector plate is a sheet of tough Kalwall Sun-Lite Premium glazing. The glazing has two purposes. It prevents cooling of the plate by the wind and provides a "greenhouse effect" which allows solar radiation to enter the collector but traps the heat inside the unit. As the sun's energy penetrates the Kalwall, it heats the plate. Water circulating through the tubes extracts this energy. The collector is normally roof mounted facing south at an angle of latitude or latitude + 10°.

SDI's hot water heater is uniquely designed to be compatible with today's existing household and commercial plumbing systems. Instead of utilizing a separate hot water tank that circulates water by the slow thermal siphon principle, SDI uses a standard hot water tank and forces circulation to speed up heat transfer and system effectiveness.

A small hot water circulating pump transfers water through a copper line leading to the solar collector. After the water passes through the collector and is heated by the sun, it is returned to the side of the existing hot water tank.

Attached to the circulating pump is a small solid-state, electronic controller. This device compares temperatures of the water in the tank to that of the collector plate and instructs the pump to circulate only when energy can be added to the system. Each time the water from the tank is passed through the collector, it picks up heat thereby saving dollars.



SDI Plate/Tube Design for High Heat Transfer

DISTRIBUTED BY:

TECHNICAL SPECIFICATIONS

DIMENSIONS — 4' x 10', dual 2' x 10' or single 2' x 10'

WEIGHT — 100 lbs. + 9.5 lbs. for roof mounting hardware, 57 lbs. for 2' x 10'.

COLLECTOR PLATE — .012" thick copper.

PIPING — 100 ft. of 1/2" copper tubing, 4.6" on center.

PLATE/PIPE CONNECTION — Plate grooved to accept half of pipe circumference for excellent heat transfer, 100% capillary flow solder bond.

BOX — 6063T5 extruded aluminum with .032" aluminum backing.

COATING — High quality flat black paint or black chrome on nickel flash.

INSULATION — 1" Celotex Thermax (R8). 2" available on large orders.

GLAZING — .025" Kalwall Sun-Lite Premium.

WIND LOADING — Designed for 30 lbs./sq. ft. (48 lbs./sq. ft. available).

FREEZE PROTECTION — Geographic location dictates the type of freeze protection device needed. Contact SDI for recommendations.

PERFORMANCE — The SDI Collectors have been tested by the Florida Solar Energy Center in accordance with National Standards. Test data is available on request.

HOT WATER ALWAYS AVAILABLE

Normally this method of heating water will provide adequate hot water. However, in periods of prolonged cloudiness and high water usage at night, extra heat will be needed. By setting the thermostat on your electric hot water heater at approximately 120-125 degrees, hot water will always be available.

© SOLAR DEVELOPMENT, INC. 1976

SDI



SUN COAST DISTRIBUTORS OF STUART, INC.

P. O. BOX 782
PORT SALERNO, FLA. 33492
286-2183

SOLAR SYSTEM INSTALLATION
DRAWINGS AND DATA

SUN COAST DISTRIBUTORS OF STUART, INC.

P. O. BOX 782
PORT SALERNO, FLA. 33492
286-2183

SOLAR DEVELOPMENT, INC.
3630 REESE AVENUE
GARDEN INDUSTRIAL PARK
RIVIERA BEACH, FLORIDA 33404

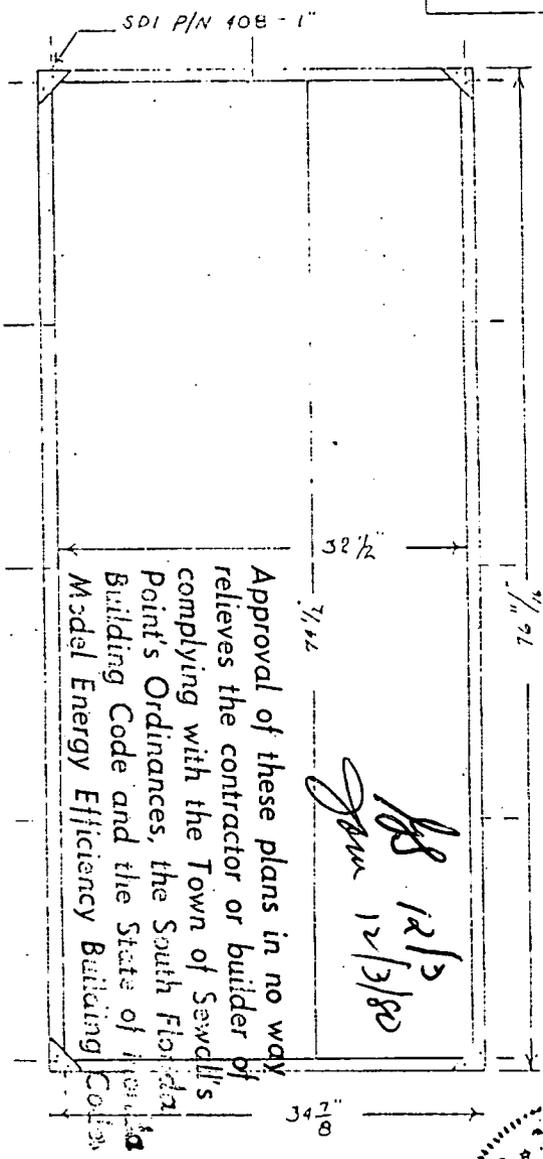
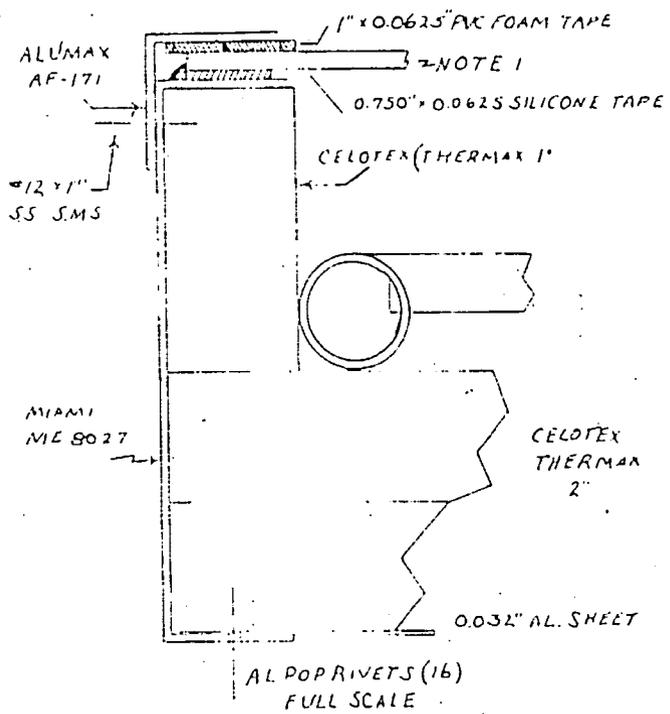
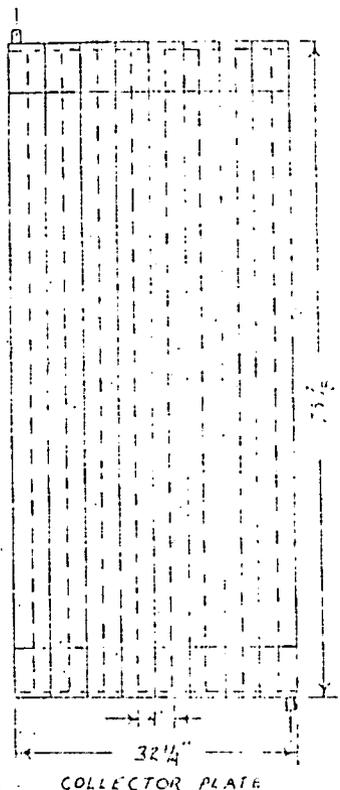
SUN COAST DISTRIBUTORS OF STUART, INC.
P. O. BOX 782
PORT SALERNO, FLA. 33492
286-2183

SUN COAST DISTRIBUTORS OF STUART, INC.
P. O. BOX 782
PORT SALERNO, FLA. 33492
286-2183

ES 12/3
Jan 12/3/80

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

These drawings have been prepared to substitute for blueprint drawings utilized for building permit applications. Nothing in these drawings shall be interpreted to conflict with the drawings filed with the cognizant Building Official which are signed and sealed by William G. Wallace, Professional Engineer, North Palm Beach, Florida.

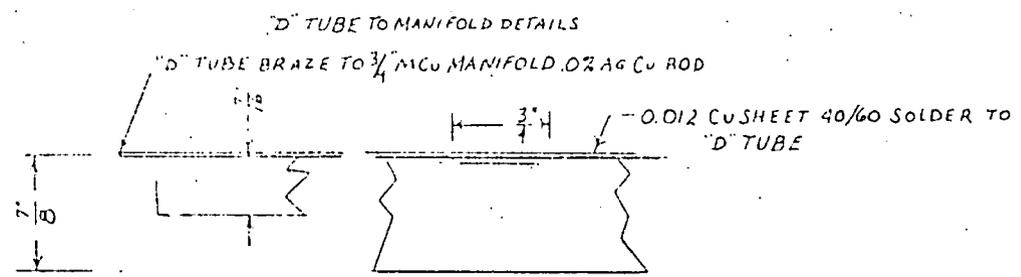


Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point's Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.

REMOVE PANEL WIND LOADS 214 FROM EACH END OF EACH 76 11/16 SIDE.

P. O. BOX 792
FORT PALERMO, FLA. 33402
230-2183

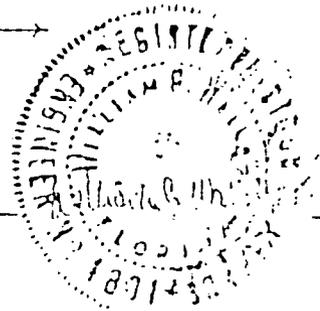
SUN COAST DISTRIBUTORS OF SUNDT, INC.



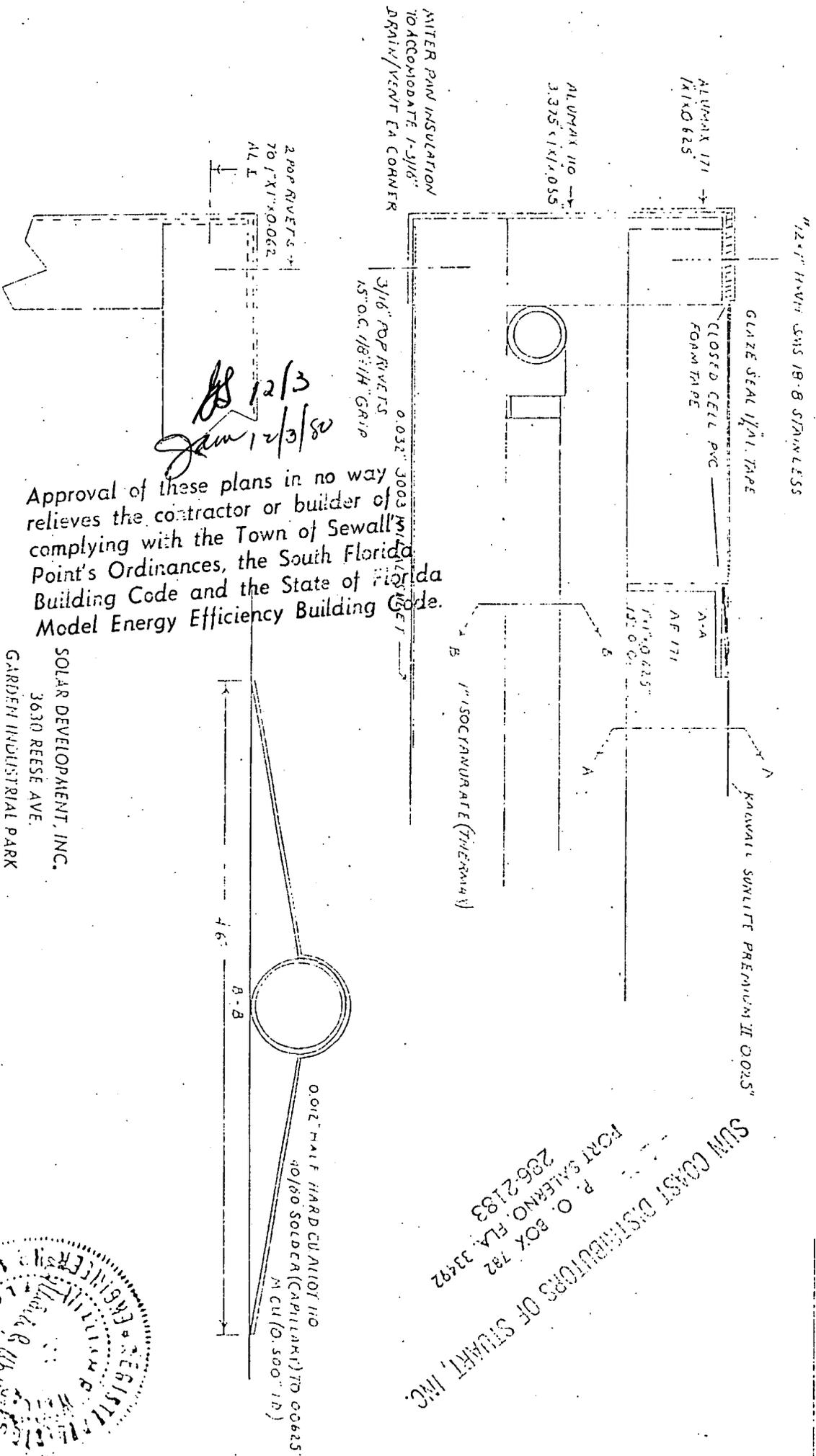
1. ASG SUNDEX TRU-TEMP (WATER WHITE, TEMPERED, PATTERNED) GLAZING. BED TO FRAME W. GE CLEAR SILICONE SEAL OR EQUIV.
2. FOR ASSEMBY SEE SD 6 SHOP NOTES.

SD-6 COLLECTOR
RHEEM/RUUD RCG-307

WET WEIGHT 86.00 LBS.
APERTURE 16.99 FT.²
GROSS 18.58 FT.²
ROOF MOUNT 37.25" GC



SOLAR DEVELOPMENT, INC.
3610 REESE AVE.
GARDEN INDUSTRIAL PARK
RIVIERA BEACH, FLA. 33404



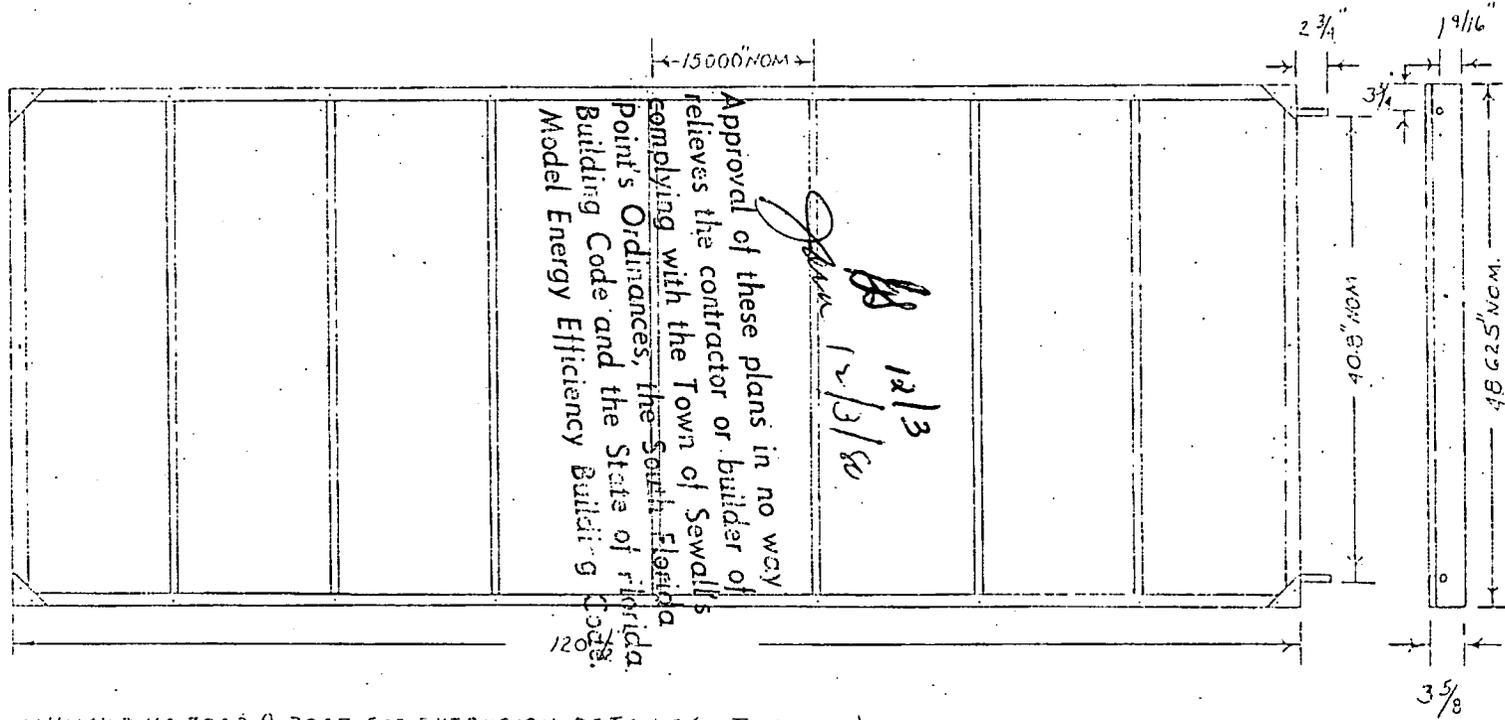
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point's Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.

SOLAR DEVELOPMENT, INC.
 3630 REESE AVE.
 GARDEN INDUSTRIAL PARK
 RIVIERA BEACH, FLA. 33404
 305/842-8935

SUN COAST DISTRIBUTORS OF STUART, INC.
 P. O. BOX 782
 FORT SALEM, FLA. 32492
 206-2183



SD-5 SOLAR COLLECTOR ASSEMBLY



ALUMAX DWG 3802 & 3803 FOR EXTRUSION DETAILS (ALT. 171-1101)

SOLAR DEVELOPMENT, INC.
 3630 REESE AVE.
 GARDEN INDUSTRIAL PARK
 RIVIERA BEACH, FLA. 33404
 305-12-8935

SUN COAST DISTRIBUTORS OF STUART, INC.
 P. O. BOX 782
 FORT SALENO, FLA. 33492
 236-2183

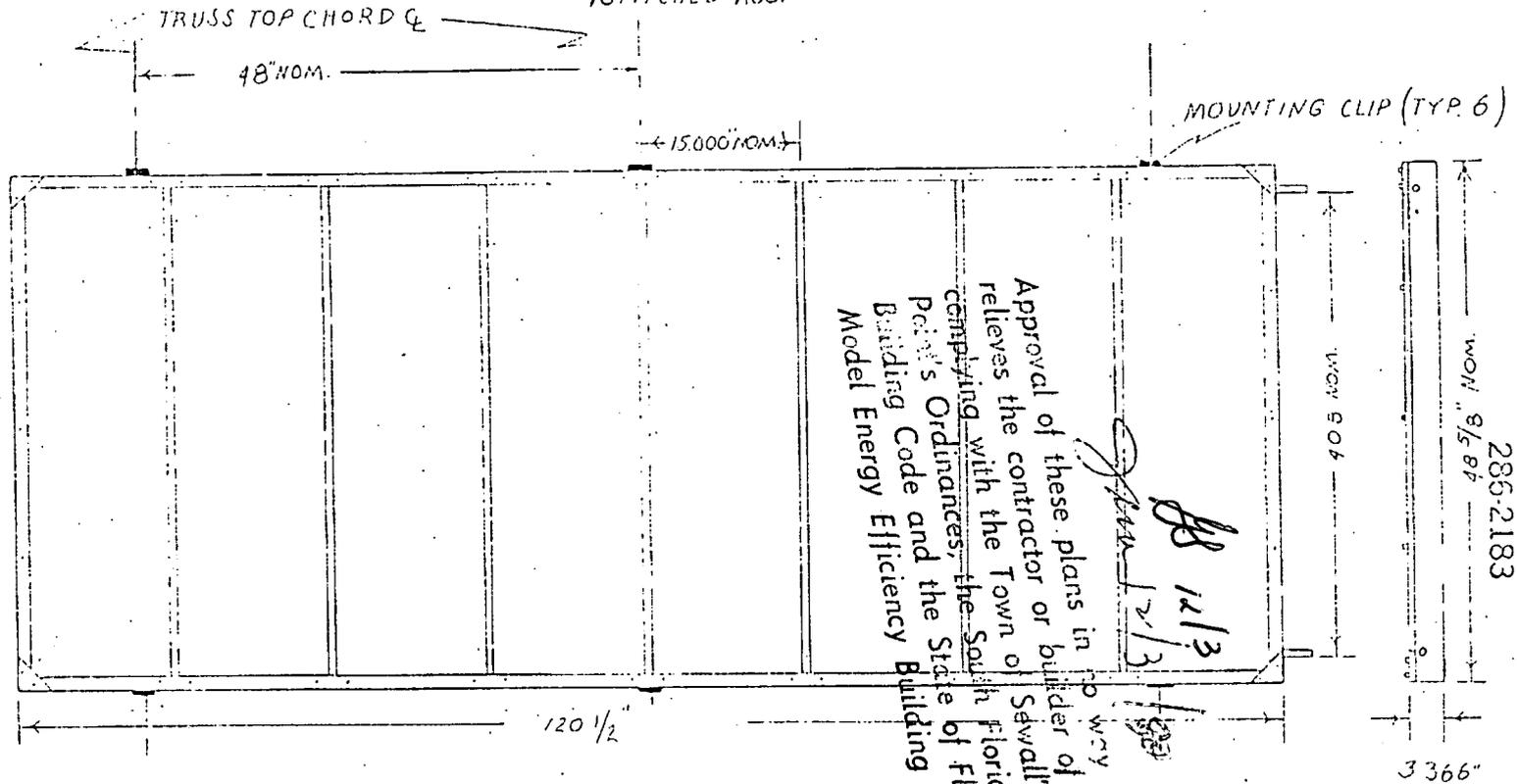
REGISTERED PROFESSIONAL ENGINEER
 STATE OF FLORIDA
 No. 12818
 J. B. ...

3510 WEEDE AVE
 GARDEN INDUSTRIAL PARK
 RIVIERA BEACH, FLA. 33404
 3051842-8935

PLATE 3-0-B

SD-5 SOLAR COLLECTOR ASSEMBLY

FLUSH MOUNT
 TOPITCHED ROOF



Approval of these plans in
 relieves the contractor or builder of
 complying with the Town of
 Ordinance, the State of Florida
 Building Code and the State of Florida
 Model Energy Efficiency Building Code

P. O. BOX 782
 FORT SALERNO, FLA. 33492
 285-2183

SUN COAST DISTRIBUTIONS OF STUART, INC.

ALUMAX DWG 3802 & 3803 FOR EXTRUSION DETAILS (ALT. 171-1101)
 1 1/4" x 1" TEKS-3 SS. (2)

3" x 2" x 0.125" AL
 2 - 5/16" x 2 1/2" LAG W. L.W.

COLLECTOR BOX

BED EACH CLIP TO MEMBRANE W. SILICONE SEAL.
 SEAL EA. LAG HEAD TO BRACKET W. SILICONE SEAL. MAX PILOT DIA. 0.250"

MEMBRANE

MOUNTING CLIP

SHIM 3/8" - 1/2"

ATEA. BRACKET BEFORE FASTENING

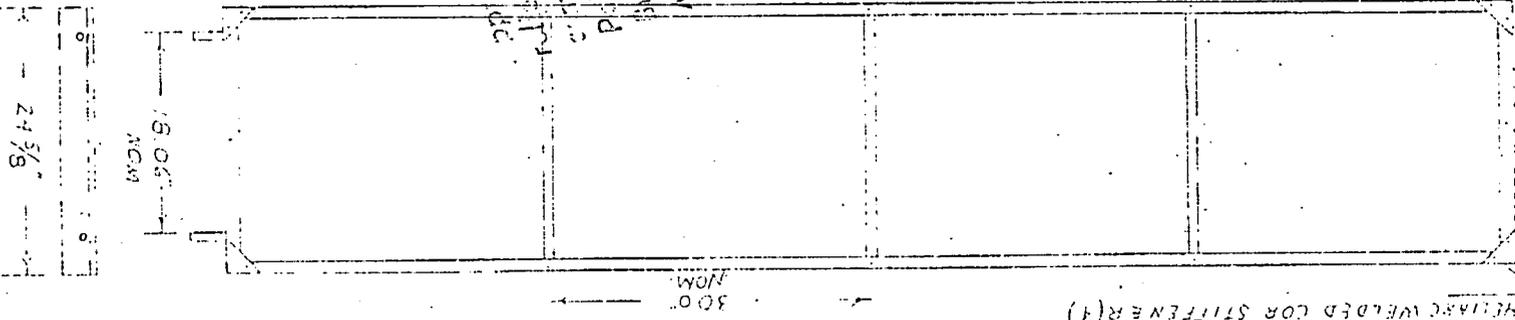


3610 KEST AVENUE
GARDEN INDUSTRIAL PARK
RIVIERA BEACH, FLA 33404
3051842-8935

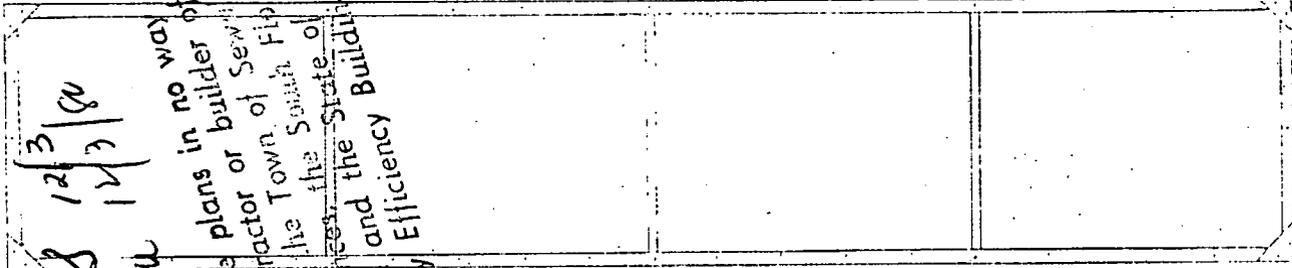
PLATE #3-0-A

SD-5 SOLAR COLLECTOR ASSEMBLY (2'-10")

SUN COAST DISTRIBUTORS OF FLORIDA, INC.
P.O. BOX 111
POST SALEM, FLA 32073
239-2183



ALUMAX DWG. 3802 & 3803 FOR EXTRUSION DETAILS



Approval of these plans in no way
constitutes approval of the contractor or builder of these plans.
It is the contractor's responsibility to verify the contractor of South Florida
complies with the Town of South Florida Building Code and the State of
Florida Building Code and the State of Florida Building Code.

12/3/00
12/3/00



ISOLATE CU TUBING FROM ALL
GROMMETS (2)

SOLAR DEVELOPMENT, INC.
 3610 LINDA AVE
 GARDNER INDUSTRIAL PARK
 RIVIERA BEACH, FLA. 33404
 30518-12-8935

PLATE 4-0

SD-5 SOLAR COLLECTOR MOUNTING SYSTEM - RHEIN/ALCOA RCP210

ONE BRACKET ASSY. EA. END 96" O.C.

SUN COAST ENGINEERS OF FLORIDA, INC.

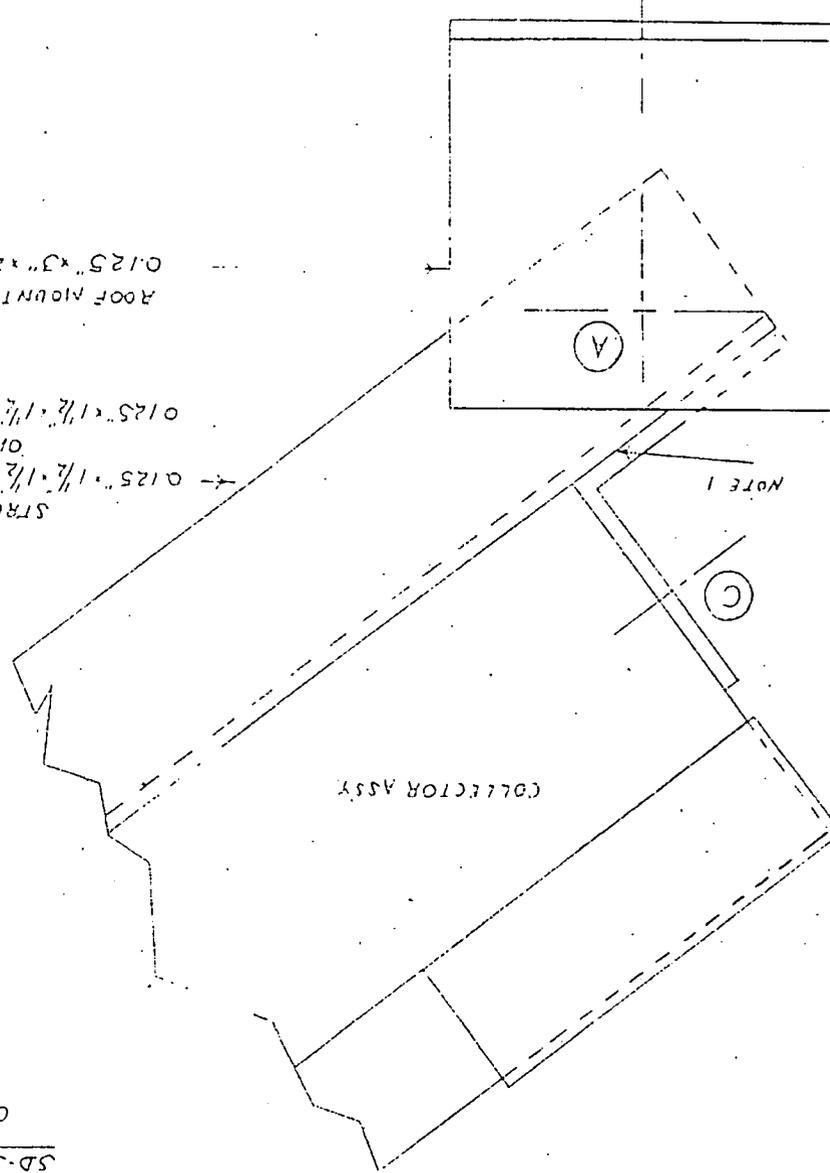
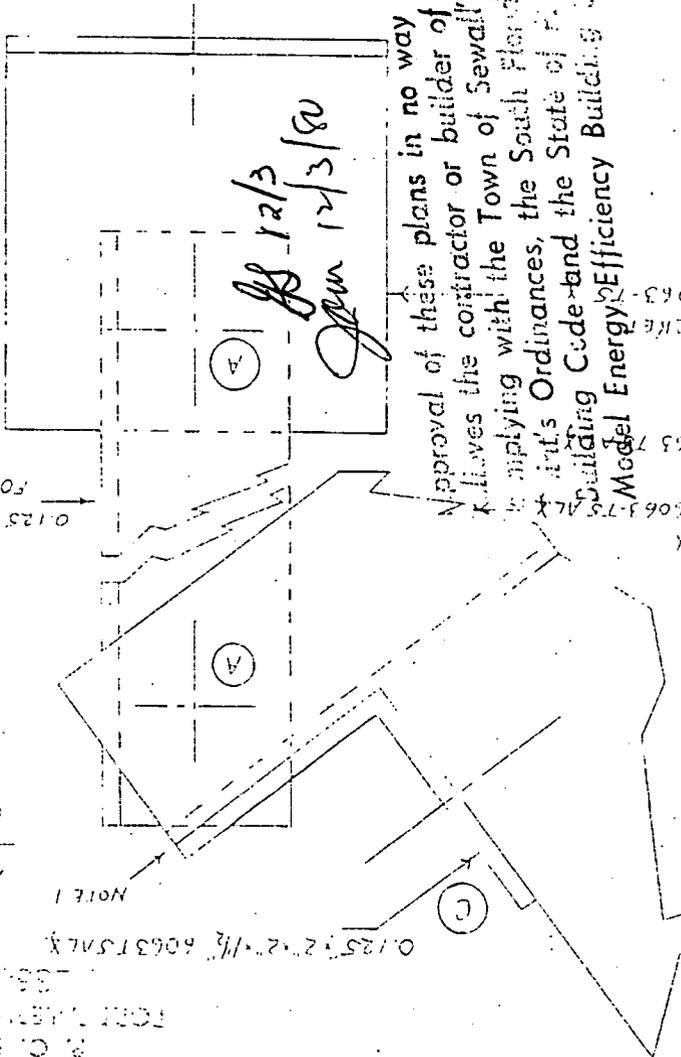
R. C. BOX 777
 FOOT 1/2" DIA. FLAT WASH
 1/8" DIA. FLAT WASH

FASTENER SCHEDULE
 A 3/8" x 1/4" 18-B STAINLESS
 C TEK 3 1/4" (2) 1/8" STAINLESS
 LOCK WASHER ALL NUTS

FOR FLAT HOOT 379 COLL A

REAR STRUT
 0.125" x 1 1/2" x 1/2" x 32 3/16 6063 T5 ALX
 0.125" x 1 1/2" x 1/2" x 32 3/16 6063 T5 ALX

NOTE 1: FULL PEN. WELD
 ARC WELD EA. BRACKET
 TO STRONGBACK (2 SIDES)
 MIN WELD LENGTH 175"
 EA. WELD



STRONG BACK
 0.125" x 1 1/2" x 1/2" x 52 1/2" 6063 T5 ALX
 OR
 0.125" x 1 1/2" x 1/2" x 50 6063 T5 ALX
 ROOF MOUNTING BRACKET
 0.125" x 3" x 2" x 3" 6063

FULL SCALE

NOTE 1

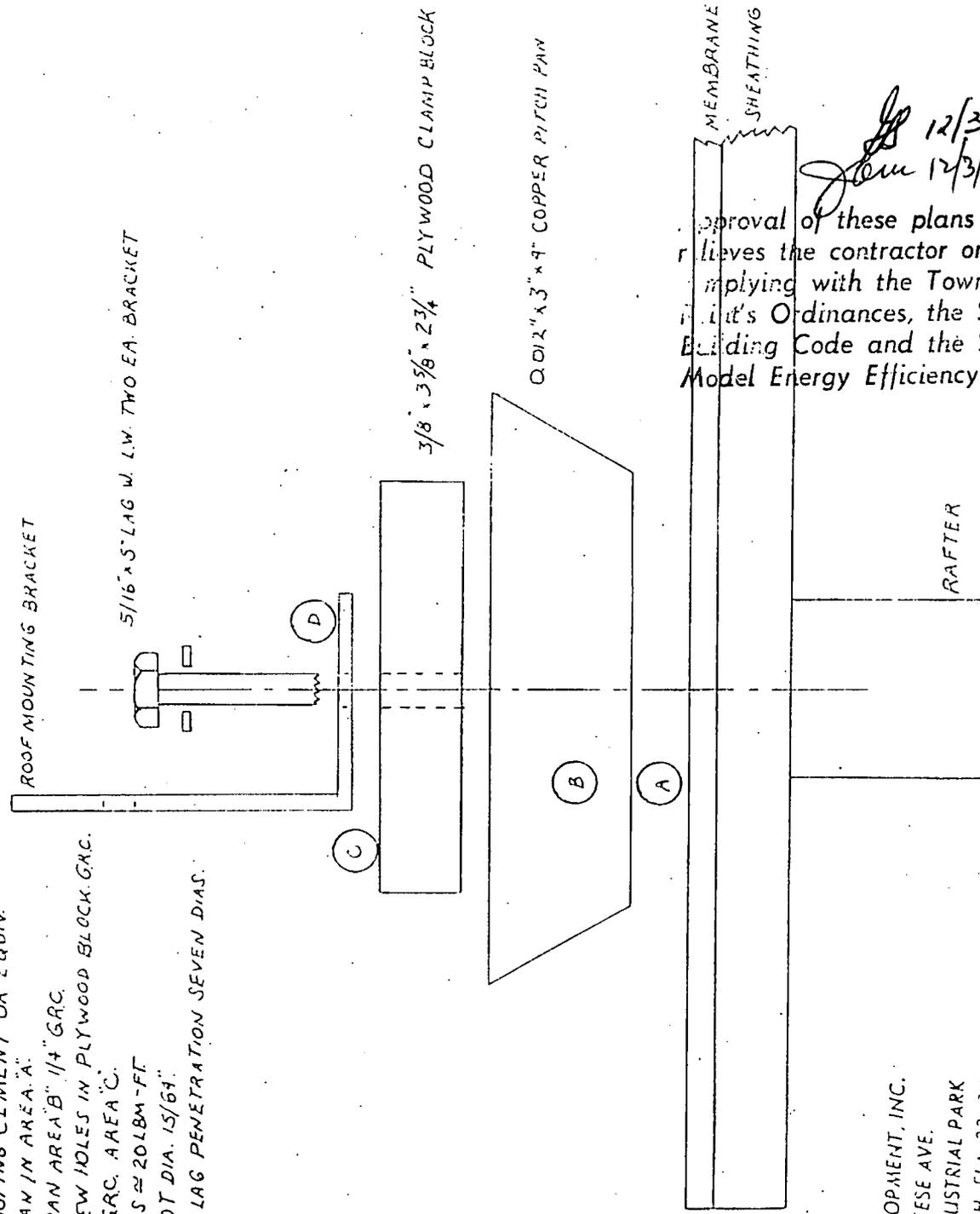
SUN COAST DISTRIBUTORS OF STUART, INC.

P. O. BOX 782
 PORT SALERNO, FLA. 33492
 286-2183



1. TROWELL 6"x6" SQUARE 3/16" THICK (AREA A).
2. SET PITCH PAN IN AREA A.
3. FILL PITCH PAN AREA B 1/4" GRC.
4. FILL LAG SCREW HOLES IN PLYWOOD BLOCK GRC.
5. TROWELL 1/8" GRC. AREA C.
6. TORQUE LAGS ≈ 20 LB-M-FT.
7. MAX. LAG-PILOT DIA. 15/64"
8. MIN. RAFTER LAG PENETRATION SEVEN DIAS. OR 2.20"

SD-5 SOLAR COLLECTOR ROOF SEAL



MEMBRANE SHEATHING

RAFTER

0.012" x 3" x 4" COPPER PITCH PAN

3/8" x 3 5/8" x 2 3/4" PLYWOOD CLAMP BLOCK

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

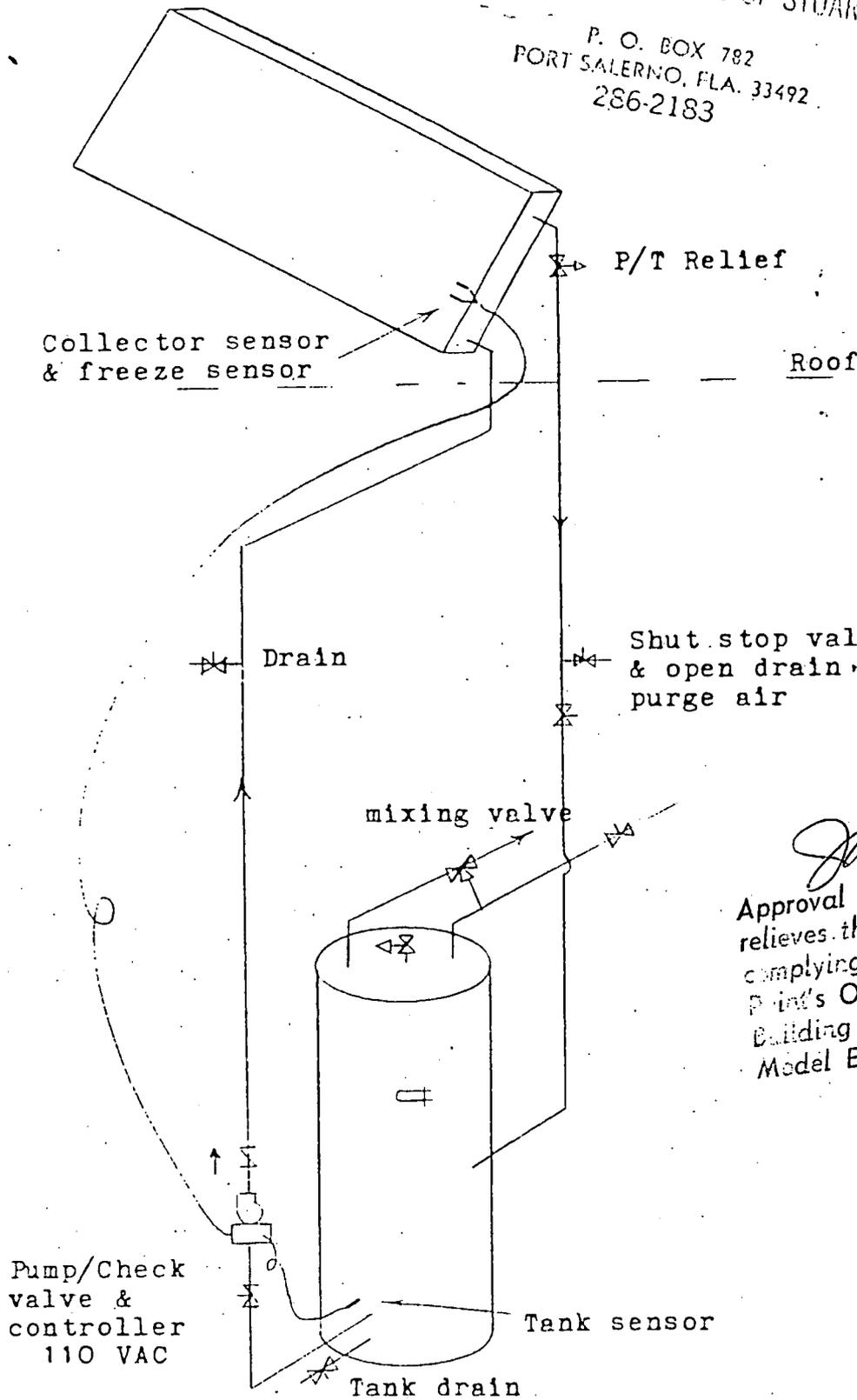
James B. White 12/3/88

SOLAR DEVELOPMENT, INC.
 3630 REESE AVE.
 GARDEN INDUSTRIAL PARK
 RIVIERA BEACH, FLA. 33404
 305/942-8935

SUN COAST DISTRIBUTORS OF STUART, INC. NOTES:

P. O. BOX 782
 PORT SALERNO, FLA. 33492
 286-2183

- 1. Set Watts 70A 3/4 in. mixing valve at 140°.
- 2. Insulate all lines and outside valves with Armstrong Armaflex (1/2 in. wall thickness) or equivalent.
- 3. All piping 1/2 in. copper to and from collector.
- 4. Set heating element of tank at 120 deg.
- 5. Pressure/temp. relief valves (2) Watts 1L 1/2 in. or equivalent.



Shut stop valve & open drain to purge air

Jan 12/3/80

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

Solar Development, Inc.
 3630 Reese Ave.
 Riviera Beach, Florida 33404

SD5 Standard
 4' x 10'

SUN COAST DISTRIBUTORS OF STUART, INC.

P. O. BOX 782
PORT SALERNO, FLA. 33492
288-2183

SOLAR DEVELOPMENT, INC.
3630 REESE AVENUE
GARDEN INDUSTRIAL PARK
RIVIERA BEACH, FLORIDA 33404

ll 12/13
Jan 12/3/80

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

P. O. BOX 782
PORT SALERNO, FLA. 33492
288-2183

SUN COAST DISTRIBUTORS OF STUART, INC.

3530
BATHROOM
REMODEL
&
CONCRETE
FRONT WALK

TAX FOLIO NO. 1-38-41-006-005-00040,70000 DATE JAN 18, 94

3530

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

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

Owner MR ERNEST L. WARD (FR) Present Address 5 RIDGEVIEW RD.

Phone 220-6025 STUART, FLA. 34996

Contractor WILLIAM K. PRATT Address P.O. Box 2331, STUART, FLA. 34992

Phone 287-3532

Where licensed MARTIN COUNTY STATE License Number CGC-006414

Electrical Contractor NONE License Number _____

Plumbing Contractor SOUTH PARK PLUMBING License Number #49

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: REMOVE TUB SHOWER (MB), REPLACE WITH SHOWER ONLY. REMOVE

AND REPLACE 2 TOILETS. TILE SHOWER. CONCRETE FRONT WALK.
State the street address at which the proposed structure will be built:

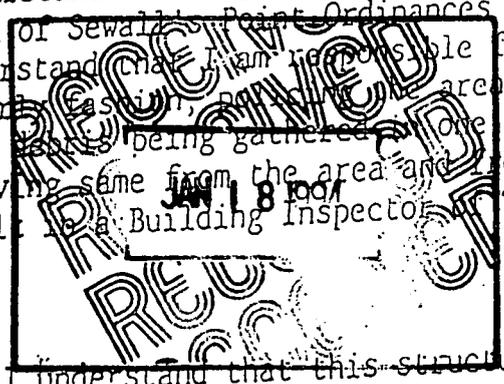
5 RIDGEVIEW RD., STUART, FLA.

Subdivision HOMWOOD Lot Number 4 Block Number E

Contract Price \$ 3500 Cost of Permit \$ 132.⁰⁰

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, providing an area for trash, scrap building materials and other debris, such as 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 K. Pratt

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 Bertha J. Ward
(Mrs. Ernest L. Ward)

TOWN RECORD

Approved: Dale Brown 1/18/94
Building Inspector Date

Date submitted _____

Approved: [Signature] 1/31/94 Final Approval given: _____ Date
Commissioner Date

Certificate of Occupancy issued (if applicable) _____ Date

Permit No. _____

PRODUCER

DEAKINS-CARROLL INS AGCY
P. O. BOX 1597
PT. SALERNO FL 34992

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**
- COMPANY LETTER **B ASSURANCE CO OF AMERICA**
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

INSURED

WILLIAM K. PRATT
P. O. BOX 2331
STUART, FL 34995

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
B	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR. <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT.	ECA18464504	02/23/94	02/23/95	GENERAL AGGREGATE \$ 500,000 PRODUCTS-COMP/OP AGG. \$ 500,000 PERSONAL & ADV. INJURY \$ 500,000 EACH OCCURRENCE \$ 500,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED. EXP. (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <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

CERTIFICATE HOLDER

CITY OF SEWALLS PT

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

C. J. Deakins

PAID

CONSTRUCTION INDUSTRY

NOTICE OF ELECTION TO BE EXEMPT FROM THE PROVISIONS OF THE FLORIDA WORKERS' COMPENSATION LAW

MAIL TO: Department of Labor & Employment Security 5-2492
Bureau of W.C. Compliance EFFECTIVE
2728 Centerview Drive, 100 FORWARDED TO
Tallahassee, Florida 32399-0661 CARRIER

STATE USE ONLY
POSTMARK DATE 4/23/92
This notice shall be in effect for two (2) years from the
effective date of 5-24-92 until 5-24-94
or until revoked, whichever comes first.

PLEASE TYPE OR PRINT EMPLOYER 50536

RE: William K Pratt
(Legal/Business Name of Sole Proprietorship, Partnership, or Corporation) (D/B/A If Applicable)
P.O. 2331

(Mailing Address) Stuart FL 34995 (Street Address, if different) 592201802
(City) (State) (Zip) (Federal Employer Identification Number)

Nature of Business or Trade: Carpentry Contractor

As of 12:01 a.m. 30 days following the date of the mailing of this form, you are hereby notified that the following Sole Proprietor, Partner or Corporate Officer of the above named business does elect to be exempt from the provisions of the Florida Workers' Compensation Law. I understand that by this action I am not entitled to benefits under chapter 440, Florida Statutes. By filing this form I have not exceeded the exemption limit of three partners or three Corporate Officers. I further certify that any employees of the business named above are covered by workers' compensation insurance.

The following are the certified or registered licenses held by me pursuant to chapter 489 Florida Statutes (If none, so state):
(1) Type: CERTIFIED Number: CG-C006414 (2) Type: Number:

INSURANCE CARRIER INFORMATION (If Applicable): A construction industry employer with one (1) or more employees must maintain Workers' Compensation coverage. Failure to comply will result in a five-hundred dollar (\$500) fine and a one-hundred dollar (\$100) fine for each day of noncompliance (see section 440.43, F.S.).

Name of Carrier Liberty Mutual Insurance Company
Carrier Address P.O. Box 2376 Gainesville FL 30503
Policy Number WC1-351-206537-001 EFFECTIVE DATE 12-16-92
Insurance Agent (Agency) John Heemsath Ins Inc
Agency Address P.O. Box 948 Palm City FL 34990
Phone 407-283-1667 407-283-1665 FAX

Signature William K. Pratt Social Security Number 055-34-8594
Type/Print Name WILLIAM K PRATT
Position: Proprietor XXX/Partner /or/Officer (Title)

IMPORTANT: Individual exemption filing fee pursuant to Section 440.05, F.S., is seven dollars and fifty cents (\$7.50) and is payable only by money order or cash to W.C. Administrative Trust Fund. Failure to enclose fee will result in return of request and delay of certification.

SWORN TO AND SUBSCRIBED BEFORE ME THIS 7th DAY OF March 1992
AT STUART, FLORIDA Personally Known to Me.

Notary Public, State of Florida
My Commission Expires:
JOHN HHEEMSATH

4025
RE-ROOF

TAX FOLIO NO. 1-38-41-006-005-000-40-.70000

DATE 7/29/96

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

4025

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 SCOTT JAMES Present address #5 RIVERVIEW ROAD
SEWALL'S POINT
STUART, FL

Phone 223-8247

Contractor J.A. TAYLOR ROOFING, INC Address 302 MELTON DRIVE
TERRENCE J. MAGER
Phone 407-466-4040 FT. PIERCE, FL 34982

Where licensed STATE OF FL License number CC-C057019
ST. LUCIE CO. OCCU. 1761-0930004

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: _____

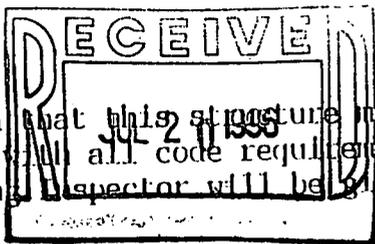
State the street address at which the proposed structure will be built: _____

Subdivision Homewood Lot Number 4 Block Number E

Contract price \$5,700.00 Cost of permit \$ 100.00

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.



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.

Contractor [Signature]

Owner [Signature]

TOWN RECORD

Approved: [Signature] Building Inspector Date _____

Date submitted _____

Approved: [Signature] Commissioner Date _____

Final approval given: _____ Date _____

CERTIFICATE OF OCCUPANCY issued (if applicable) _____ Date _____

PERMIT NO. _____

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

PERMIT # _____

TAX FOLIO # 1-38-41-006-025-000-40
70000

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)

GENERAL DISCRETION OF IMPROVEMENTS _____

OWNER: Scott James

ADDRESS: # 5 River View Road - Seville Point
Stuart, FL

OWNER'S INTEREST IN PROPERTY: _____

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

ADDRESS: _____

CONTRACTOR: J.A. TAYLOR ROOFING, INC.

ADDRESS: 302 MELTON DRIVE - FORT PIERCE, FL 34982

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: _____

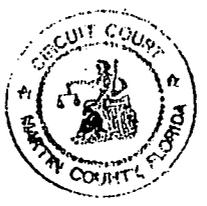
IN ADDITION TO HIMSELF, OWNER DESIGNATES _____ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13 (1) (B), FLORIDA STATUTES.

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]
SIGNATURE OF OWNER

STATE OF Florida
COUNTY OF St. Lucie

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 Charlotte Bliska
DATE 7-29-96



THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 17th DAY OF July, 1996, BY Scott James WHO IS KNOWN TO ME OR WHO PRODUCED _____ AND WHO DID NOT TAKE AN OATH.

[Signature]
NOTARY SIGNATURE



OFFICIAL NOTARY SBAL
LISA L TAYLOR
COMMISSION NO. CC395441
MY COMMISSION EXP. MAY 19, 1997

4182

POOL ENCLOSURE

TAX FOLIO NO. _____

4182 DATE _____

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

This application must be accompanied by three (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 Scott James Present address 5 Ridgeview Rd
Phone _____ Stuart FL 34996

Contractor Pioneer Screen Address 9011 SW Old Kansas Ave
Phone 283-9197 Stuart FL 34997

Where licensed State License number 800046064

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: Screen enclosure over pool

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

5 Ridgeview Road

Subdivision Arbella Homewood Lot Number 4 Block Number E

Contract price \$ 2475.00 Cost of permit \$ 100xx

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 Craig McEl

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 Craig McEl

TOWN RECORD

Date submitted _____

Approved: _____
Building Inspector Date

Approved: [Signature]
Commissioner Date

Final approval given: _____
Date

CERTIFICATE OF OCCUPANCY issued (if applicable) _____
Date

PERMIT NO. 4182

45.36
FD 4X4

FD
CM

THE HOMEWOOD A SUBDIVISION OF LOTS
1 PLAT OF ARBELLA ACCORDING TO THE
RECORDED IN PLAT BOOK 3, PAGE 29,
RECORDS OF PALM BEACH NOW MARTIN
COUNTY, FLORIDA, AMENDED PLAT OF HOMEWOOD FILED
IN 1956 AND RECORDED IN PLAT BOOK 3,
THE PUBLIC RECORDS OF MARTIN COUNTY.

SITUATE IN MARTIN COUNTY, FLORIDA.
ASS: 5 RIDGEVIEW DRIVE

LOT
5

LOT
4

CONCRETE DRIVE

N 41° 33' 36" W M

156.21' P
154.18' M
S 29° 03' 51" E

= 1729' 15" R = 334.39' A = 102.05

72.08'

12.87'

20.8

12.05

32.9

21.15'

6.0

ONE STY RESIDENCE

WOOD SHED

SCREEN DECK WITH POOL

28.75'

39.8

34.8

28.50'

5' UE

FD 4X4
CM

CHAIN LINK FENCE
1.5' SOUTH

N 62° 54' 28" E
139.39' M

143.71 P

NOT INCLUDED

1" = 20'

FLOOD ZONE A10 ELEV. = 9.0
FIRM PANEL 120164 0002C
DATED APRIL 3, 1984

SURVEYOR'S CERTIFICATE:

THIS CERTIFIES THAT A SURVEY OF THE PROPERTY DESCRIBED HEREON
WAS MADE UNDER MY SUPERVISION AND THAT THE SURVEY MEETS THE
MINIMUM TECHNICAL STANDARDS SET FORTH BY THE FLORIDA BOARD OF
PROFESSIONAL LAND SURVEYORS IN CHAPTER 61G17-6, FLORIDA
ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA
STATUTES. AND, THAT THE SKETCH HEREON IS A TRUE AND ACCURATE
REPRESENTATION THEREOF TO THE BEST OF MY KNOWLEDGE AND BELIEF.
SUBJECT TO NOTES AND NOTATIONS SHOWN HEREON.

NOT VALID UNLESS SEALED WITH AN EMBROSSED SURVEYOR'S SEAL.

NOTES:

- 1) REPRODUCTIONS OF THIS SKETCH ARE NOT VALID UNLESS SEALED WITH AN EMBROSSED SURVEYOR'S SEAL.
- 2) LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THIS OFFICE FOR RIGHTS-OF-WAY, EASEMENTS OF RECORD, OWNERSHIP, HURPHY ACT DEEDS, OR ADJOINING INTERESTS.
- 3) LAND DESCRIBED SHOWN HEREON WAS PROVIDED BY CLIENT OR HIS/HER AGENT.
- 4) NO ATTEMPT WAS MADE BY THIS OFFICE TO LOCATE SUBSURFACE IMPROVEMENTS OR ENCROACHMENTS OTHER THAN THOSE SHOWN HEREON.
- 5) UNDERGROUND UTILITIES NOT LOCATED.
- 6) BASE OF BEARINGS IS THE CENTERLINE OF RIDGEVIEW DRIVE AS SHOWN ON THE AMENDED PLAT OF HOMEWOOD, RECORDED IN PLAT BOOK 3, PAGE 35, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

GERALD W. TANSKY

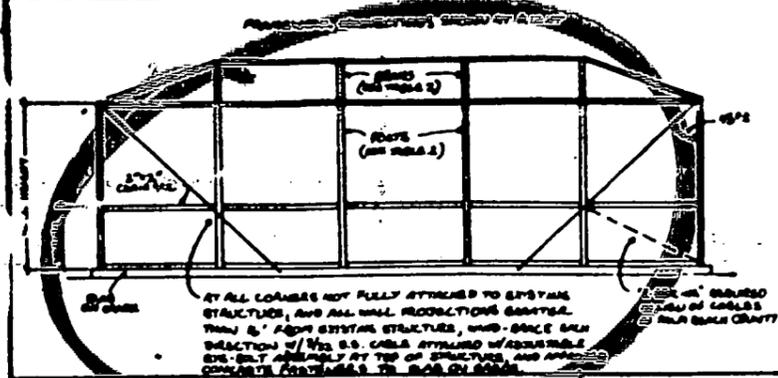
PROFESSIONAL REGISTRATION NO. 4464

ED 4/7/95

- UMENT
- EASEMENT
- ROD & CAP
- ASHER
- ELECTRIC
- CURVE
- COMPOUND CURVE
- REVERSE CURVE
- TANGENT
- CONTROL POINT
- REFERENCE MARKER
- EASEMENT
- IT

FLOOR
SET FROM ROD &
SCALE

ROOF BRACKETS - TYPICAL ELEVATION AND DETAILS



EXTRUSION SPECIFICATIONS

1 1/2" SPAN BEAM OR CHANNEL

SECTION PROPERTIES		
S _x (in ³)	0.040	0.060
S _y (in ³)	0.124	0.178
A (in ²)	0.320	0.352
R _y	1.175	1.178

ALLOY 6063-T5

2 1/2" BEAM OR POST

SECTION PROPERTIES			
S _x (in ³)	0.040	0.060	0.090
S _y (in ³)	0.120	0.170	0.240
A (in ²)	0.320	0.370	0.520
R _y	1.175	1.178	1.820

ALLOY 6063-T5

2 1/2" PERIMETER SHIP BEAM

SECTION PROPERTIES			
S _x (in ³)	0.040	0.060	0.090
S _y (in ³)	0.120	0.170	0.240
A (in ²)	0.320	0.370	0.520
R _y	1.175	1.178	1.820

ALLOY 6063-T5

2 1/2" x 0.050 RIBTED BEAM

SECTION PROPERTIES			
S _x (in ³)	0.432	0.432	0.432
I _y (in ⁴)	0.242	0.242	0.242
A (in ²)	0.822	0.822	0.822
R _y	1.175	1.175	1.175

ALLOY 6063-T5

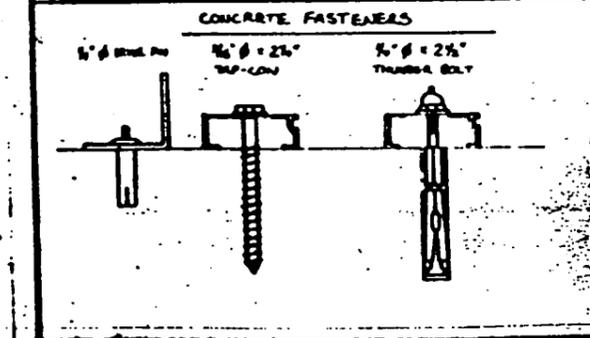
NOTE: COMPOSITE 2 1/2" x 0.050 RIBTED WITH 1/2" SPAN BEAM IS EQUAL TO ABOVE SECTION.

2 1/2" x 0.050 SELF-NATURAL SHIP BEAM IS ALSO EQUAL.

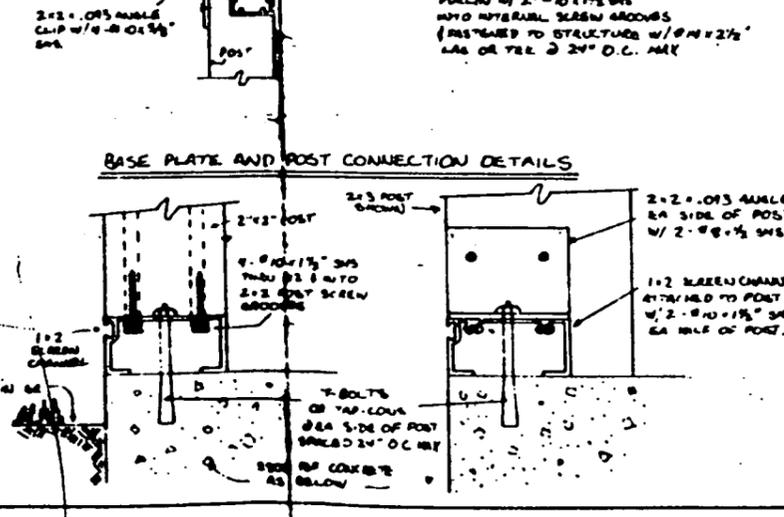
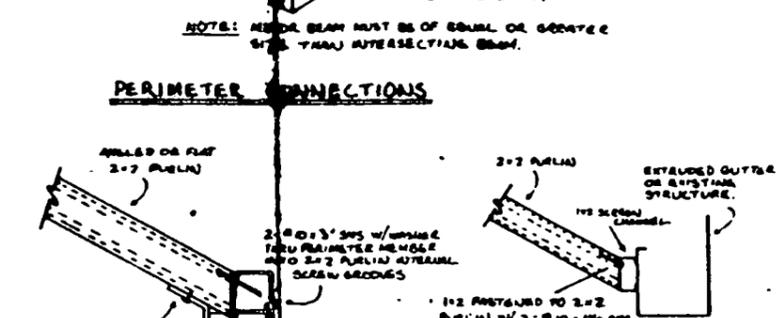
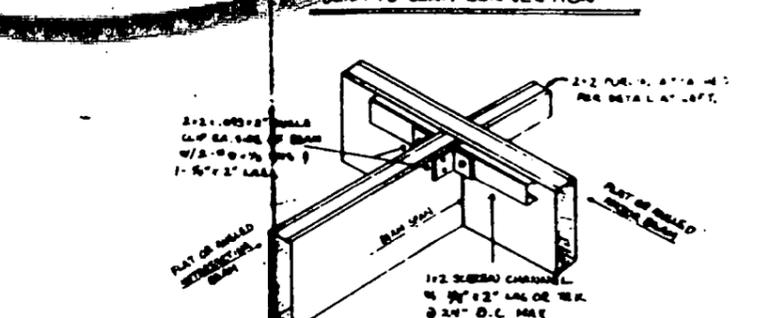
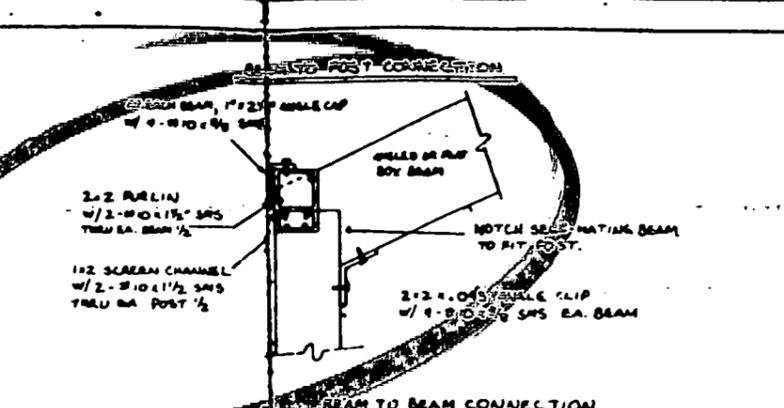
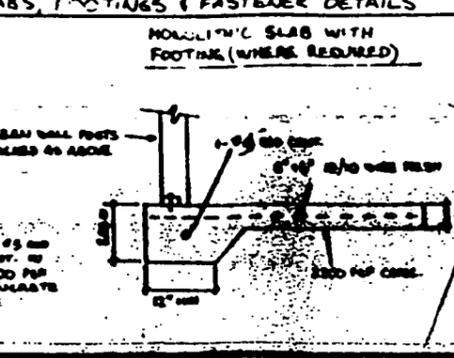
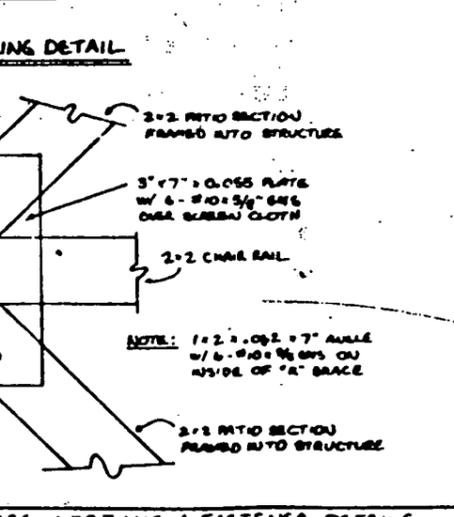
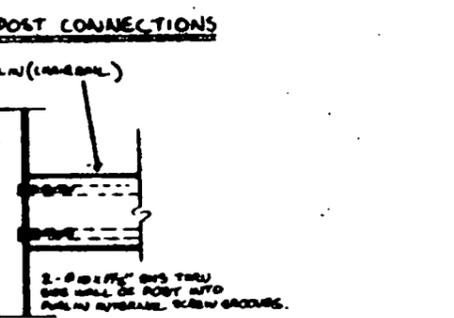
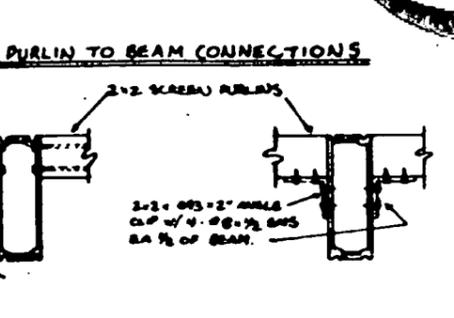
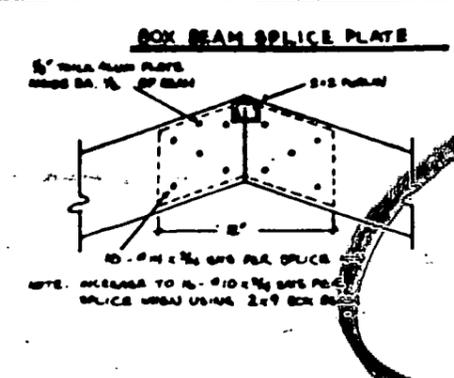
2" WIDE SELF-NATURAL BOX BEAMS

SECTION PROPERTIES			
S _x (in ³)	0.040	0.060	0.090
S _y (in ³)	0.120	0.170	0.240
A (in ²)	0.320	0.370	0.520
R _y	1.175	1.178	1.820

NOTE: FASTENERS MAY BE ELIMINATED WHEN SELF-NATURAL CONTINUOUS SHIP TYPE BEAMS ARE SUBSTITUTED.



STRUCTURAL CONNECTION DETAILS



ATTACHMENT TO EXISTING STRUCTURE - DETAILS & COMPONENTS

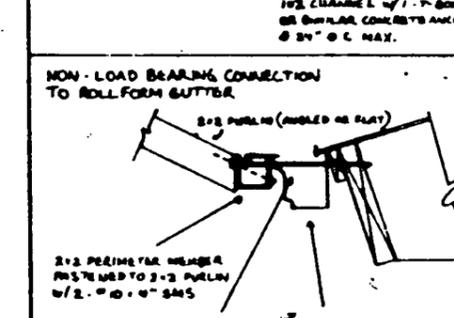
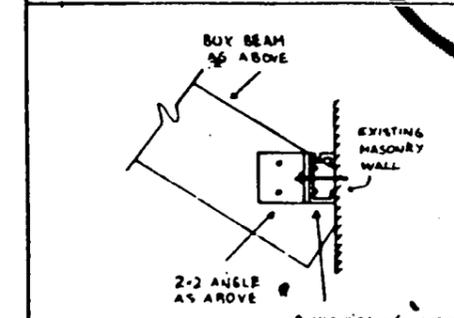
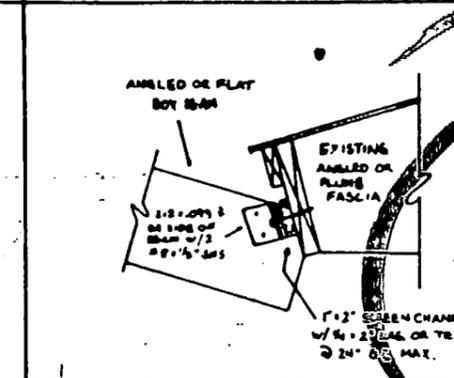


TABLE 1 - POST LENGTHS AND SPACING - SCREENED WALLS

POST SIZE	MAX. WALL HEIGHT	MIN. POST SPACING
2 1/2" x 0.050 OR EQUIV	7'-7"	7'-11"
2 1/2" x 0.050 OR EQUIV	7'-6"	7'-10"
2 1/2" x 0.050 OR EQUIV	7'-5"	7'-9"
2 1/2" x 0.050 OR EQUIV	7'-4"	7'-8"
2 1/2" x 0.050 OR EQUIV	7'-3"	7'-7"
2 1/2" x 0.050 OR EQUIV	7'-2"	7'-6"
2 1/2" x 0.050 OR EQUIV	7'-1"	7'-5"
2 1/2" x 0.050 OR EQUIV	7'-0"	7'-4"
2 1/2" x 0.050 OR EQUIV	6'-11"	7'-3"
2 1/2" x 0.050 OR EQUIV	6'-10"	7'-2"
2 1/2" x 0.050 OR EQUIV	6'-9"	7'-1"
2 1/2" x 0.050 OR EQUIV	6'-8"	7'-0"
2 1/2" x 0.050 OR EQUIV	6'-7"	6'-11"
2 1/2" x 0.050 OR EQUIV	6'-6"	6'-10"
2 1/2" x 0.050 OR EQUIV	6'-5"	6'-9"
2 1/2" x 0.050 OR EQUIV	6'-4"	6'-8"
2 1/2" x 0.050 OR EQUIV	6'-3"	6'-7"
2 1/2" x 0.050 OR EQUIV	6'-2"	6'-6"
2 1/2" x 0.050 OR EQUIV	6'-1"	6'-5"
2 1/2" x 0.050 OR EQUIV	6'-0"	6'-4"

TABLE 2 - SPAN TABLE FOR SCREENED ROOF BOX BEAMS (SELF-NATURAL BEAMS)

BEAM SIZE	MAXIMUM CLEAR SPANS FOR SCREENED ROOF BEAMS AT VARIOUS SPACINGS							
	4'0" O.C.	5'0" O.C.	6'0" O.C.	6'6" O.C.	7'0" O.C.	7'6" O.C.	8'0" O.C.	8'6" O.C.
2 1/2" x 5/8"	22'6"	20'0"	19'6"	19'0"	18'6"	18'0"	17'6"	17'6"
2 1/2" x 3/4"	31'0"	29'0"	28'0"	27'0"	26'3"	25'6"	25'0"	25'0"
2 1/2" x 7/8"	38'0"	35'0"	34'0"	33'0"	32'8"	32'4"	32'2"	32'0"
2 1/2" x 1"	46'0"	44'0"	42'0"	41'0"	40'3"	39'6"	38'9"	38'0"

STRUCTURE DETAILS IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH STANDARD BUILDING CODE FOR LOAD CONDITIONS AS FOLLOWS:
 DEAD LOADS - 30 PSF LIVE LOAD (Δ = 450 MM)
 120 MPH WIND VELOCITY PRESSURES

ADHERE TO LOCAL ORDINANCES WHICH IMPOSE FURTHER LIMITATIONS ON PROJECTS, SPANS, AND LOAD CONDITIONS

ALSO DESIGNED TO CONFORM TO RAIN BEAM CLEARANCE CODE (30 PSF LL AND 20 PSF WL W/ 0.050" GUTTER) AND 20 PSF LL W/ 0.050" GUTTER

ALSO CONFORMS TO THE 2015 IBC BUILDING CODE (LATEST EDITION) 1996

2 1/2" x 1" FASTENERS HOLDING CARRY CAPACITY IS CALCULATED PER ALUMINUM ASSOCIATION HANDBOOK

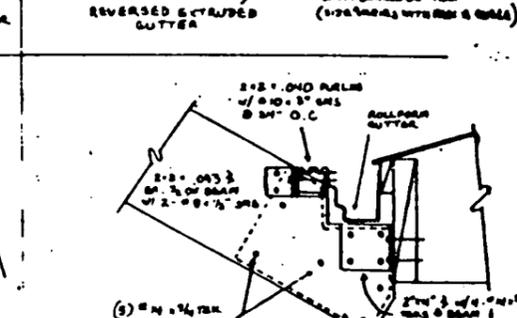
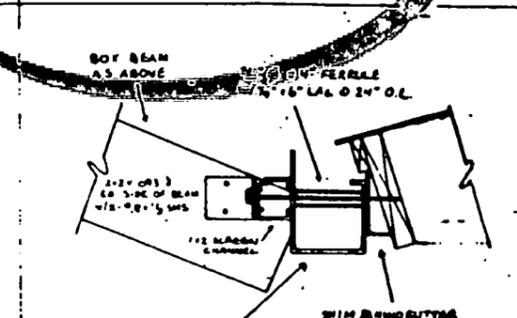
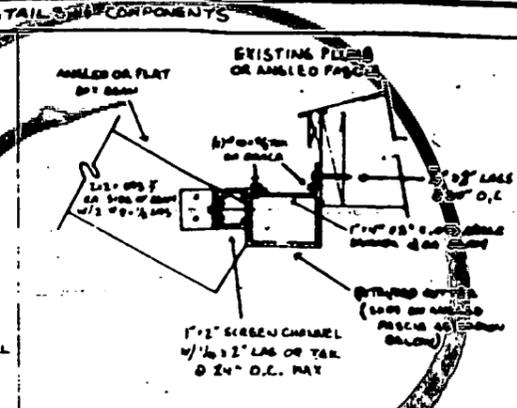
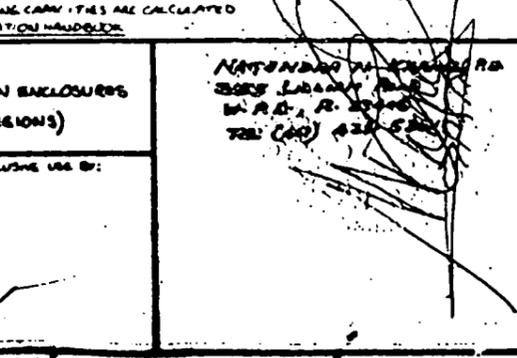


TABLE 1 - POST LENGTHS AND SPACING - SCREENED WALLS

POST SIZE	MAX. WALL HEIGHT	MIN. POST SPACING
2 1/2" x 0.050 OR EQUIV	7'-7"	7'-11"
2 1/2" x 0.050 OR EQUIV	7'-6"	7'-10"
2 1/2" x 0.050 OR EQUIV	7'-5"	7'-9"
2 1/2" x 0.050 OR EQUIV	7'-4"	7'-8"
2 1/2" x 0.050 OR EQUIV	7'-3"	7'-7"
2 1/2" x 0.050 OR EQUIV	7'-2"	7'-6"
2 1/2" x 0.050 OR EQUIV	7'-1"	7'-5"
2 1/2" x 0.050 OR EQUIV	7'-0"	7'-4"
2 1/2" x 0.050 OR EQUIV	6'-11"	7'-3"
2 1/2" x 0.050 OR EQUIV	6'-10"	7'-2"
2 1/2" x 0.050 OR EQUIV	6'-9"	7'-1"
2 1/2" x 0.050 OR EQUIV	6'-8"	7'-0"
2 1/2" x 0.050 OR EQUIV	6'-7"	6'-11"
2 1/2" x 0.050 OR EQUIV	6'-6"	6'-10"
2 1/2" x 0.050 OR EQUIV	6'-5"	6'-9"
2 1/2" x 0.050 OR EQUIV	6'-4"	6'-8"
2 1/2" x 0.050 OR EQUIV	6'-3"	6'-7"
2 1/2" x 0.050 OR EQUIV	6'-2"	6'-6"
2 1/2" x 0.050 OR EQUIV	6'-1"	6'-5"
2 1/2" x 0.050 OR EQUIV	6'-0"	6'-4"



NOTHING IS TO BE CONSIDERED AS A GUARANTEE OR WARRANTY BY THE DESIGNER FOR ANY DAMAGE OR LOSS OF ANY KIND, INCLUDING REASONABLE ATTORNEY'S FEES, ARISING OUT OF OR FROM THE USE OF THESE PLANS.

DATE: 10/15/15

DESIGNER: [Signature]

4189

**ADDITION TO
CONCRETE SLAB**

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 4189

Date 5/23 19 97

Building to be erected for MATHEW SCOTT JAMES **FINAL**

Applied for by MAHAFFY POOLS (Contractor)

Subdivision HOMEWOOD Lot 4 Block _____

Address 5 RIDGE VIEW DR

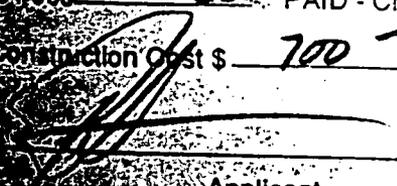
Type of structure addin to conc Slab 50¢

Building Fee _____, A/C Fee \$100.00, Electrical Fee \$100.00, Plumbing Fee \$100.00, Roofing Fee \$100.00,

Radon Fee _____ Impact Fee (If applicable) _____

TOTAL Fees 50 PAID - Check # 5997, Cash _____

Total Construction Cost \$ 700



Applicant



Signed

Town Building Inspector

Town of Sewall's Point

P.I.N. _____

Date 5/2/97

ACCESSORY STRUCTURE PERMIT APPLICATION
to construct:

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

Owner's Name MATHEW SCOTT JAMES

Owner's Address 5 RIDGEVIEW DRIVE

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

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

City _____ State _____ Zip _____

Contractor's Name MAHAFFY POOLS

Contractor's Address 1710 Biltmore

City Port St Lucie State FLA Zip 34984

Job Name Scott James

Job Address # 5 Ridgeview Dr

City Sewells Pt County Martin

Legal Description Lot 4 Block E Homewood Sub

Bonding Company _____

Bonding Company Address _____

City _____ State _____

Architect/Engineer's Name _____

Architect/Engineer's Address _____

Mortgage Lender's Name _____

Mortgage Lender's Address _____

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



4189

Permit No. _____

Tax Folio No. _____

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF MARTIN

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Fla. Statutes, the following information is provided in this Notice of Commencement.

1. Description of property: LOT 4, BLOCK E, HOMEWOOD - A SUBDIVISION of LOTS 16, 17 AND 18 PLAT OF ARBELLA ACCORDING TO RECORDS . . . PB 3. PG. 29 PALM BEACH - NOW MARTIN CO. (M012
2. General description of improvement.
3. Owner information:
 - a. Name and address: Matthew Scott James
5 Ridgeview Dr.
 - b. Interest in property: Sewall's Point, PA.
 - c. Name and address of fee simple titleholder (if other than owner):

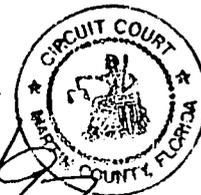
4. Contractor:
 - a. Name and address: Keith Mahaffey Pools, Inc
1710 S.W. Biltmore St Port St. Lucie, FL 34984
 - b. Phone number: (561) 871-0526
 - c. Fax number (optional, if service by fax is acceptable).

5. Surety:
 - a. Name and address:
 - b. Phone number:
 - c. Fax number (optional, if service by fax is acceptable).
 - d. Amount of bond \$ _____

6. Lender:
 - a. Name and address:
 - b. Phone number:
 - c. Fax number (optional, if service by fax is acceptable).

STATE OF FLORIDA
MARTIN COUNTY

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



BY: [Signature] D.C.
DATE: 5/23/99

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Sect. 713.13 (1) (a)7., Florida Statutes.
 - a. Name and address:
 - b. Phone number:
 - c. Fax number (optional, if service by fax is acceptable).

8. In addition to himself, Owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.
 - a. Phone number:
 - b. Fax number (optional, if service by fax is acceptable).

9. Expiration date of notice of commencement: _____ (The expiration date is 1 year from the date of recording unless a different date is specified).

[Signature]
Signature of Owner
Name: Matthew Scott James
Please Print, Type or Stamp

STATE OF FLORIDA
COUNTY OF MARTIN

The foregoing instrument was acknowledged before me this 22 day of May, 1999, by MATTHEW S. JAMES personally known to me, or has produced _____ as identification, and who did did not take an oath.

[Signature]
Signature of Notary
Name: DEBERA K THOMPSON
Please Print, Type or Stamp



DEBERA K THOMPSON
My Comm Exp. 6/26/00
Bonded By Service Ins
No. CC567030
 Personally Known Other I. D.

I am a Notary Public of the State of Florida having a
commission number of CP 547039
and my commission expires: 6/26/00

NOTARY SEAL)

4189

PERMIT GENERAL CONDITIONS

Permit Applications must be accompanied by two (2) sets of the following:

(1) Plans, Sections, and Elevations with wind load and energy calculations signed and sealed by an architect or engineer and including plumbing, mechanical, and electrical drawings and calculations. **Plumbing, Mechanical, and Electrical** (also wells, pools, fences, etc.) require separate applications.

(2) Sketch or survey showing elevations and the locations of existing and proposed improvements, property lines, all setback lines, easements, rights-of-way, and any encroachments.

The permit is valid for twelve (12) months from date of issuance. Renewal of the permit may result in additional requirements and fees prevailing at the time of renewal.

All construction must conform to the Code of Ordinances of the Town of Sewall's Point ("Town Code") and the South Florida Building Code (Dade County 1994 edition, with revisions) ("Building Code"). An approval or permit issued based upon faulty documents or errors and/or omissions by the Building Official does not relieve the owner or the contractor of compliance with the Town Code or the Building Code, nor is it a license to circumvent the Town Code or the Building Code.

A temporary toilet is to be provided for workers or an existing toilet is provided and open to workers.

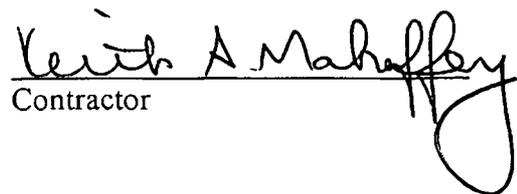
Debris must be contained in a dumpster-type metal container or must be immediately loaded in a truck (as reroofing may require). Debris will not be allowed to accumulate.

Inspections and permits may be suspended or revoked, work stoppage may be ordered, and other actions may be taken for failure to correct defects, concealing work without inspection, or for willful violations of any of the above conditions or the special conditions, attached, if any.

*NOTE: NOTICE OF COMMENCEMENT required for work with a cumulative value of \$2,500.00 or more.

ATTACHMENTS: _____

ACCEPTED: _____
Owner


Contractor

Building Official

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.

Keith A Mahaffey
Owner or Agent

5/3/97
Date

Keith A Mahaffey
Contractor

5/3/97
Date

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 3rd day of May, 1997, by Keith A Mahaffey, who: [] is/are personally known to me, or [] has/have produced _____ as identification, and who did not take an oath.

(NOTARY SEAL)

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

STATE OF FLORIDA
COUNTY OF MARTIN

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

(NOTARY SEAL)

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

Certificate of Competency Holder

Contractor's State Certification or Registration No. CPC 033767

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY [Signature] Permit Officer

CERTIFIED TO:

SUNBANK/TREASURE COAST, N.A., IT'S SUCCESSORS AND/OR ASSIGNS, ATIMA MATTHEW SCOTT JAMES MORRIS TILTON, P.A. ATTORNEY'S TITLE INSURANCE FUND, INC.

RIDGEVIEW

ROW=50'

DESCRIPTION

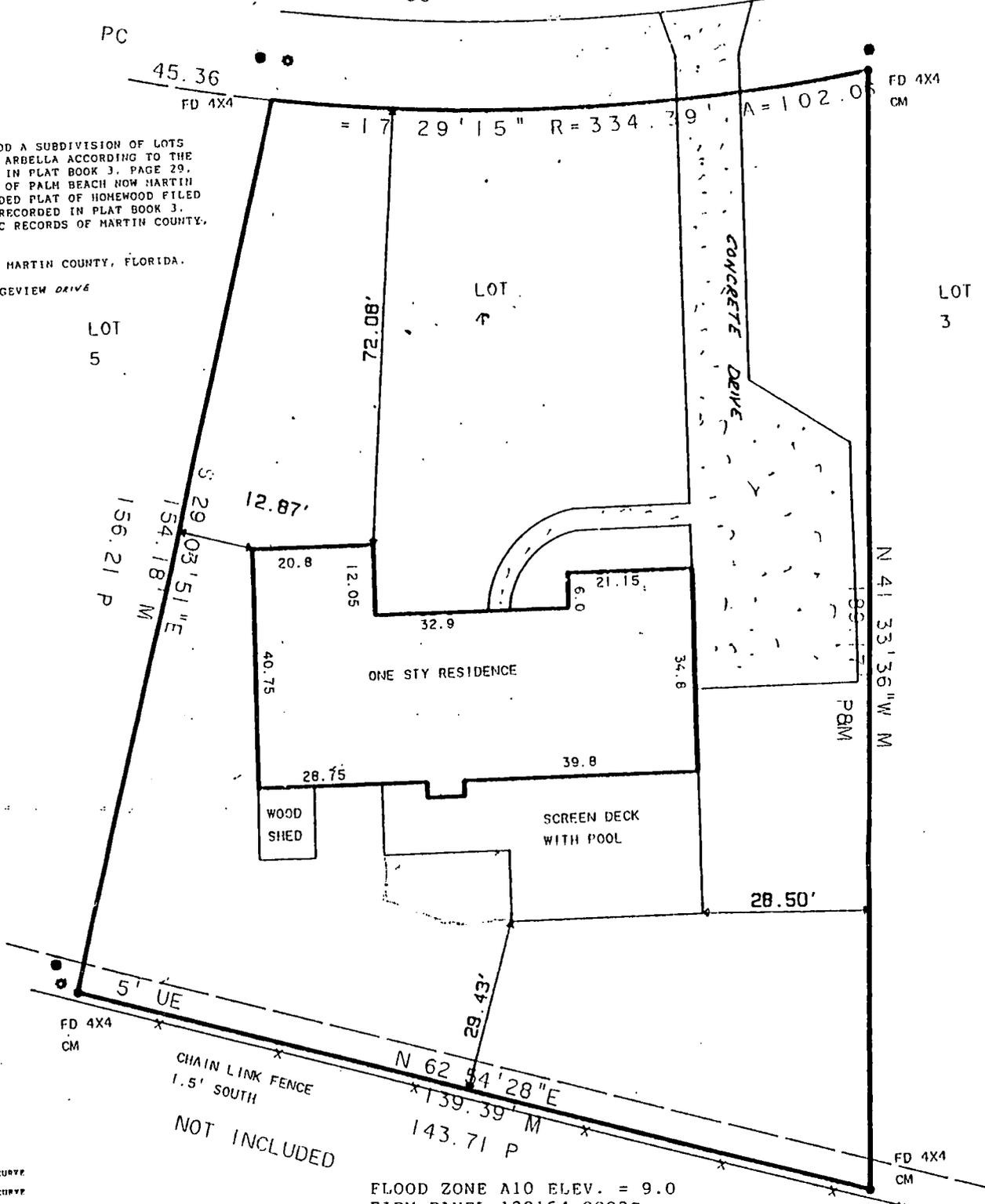
LOT 4, BLOCK E HOMWOOD A SUBDIVISION OF LOTS 16, 17 AND 18 PLAT OF ARBELLA ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 3, PAGE 29, OF THE PUBLIC RECORDS OF PALM BEACH NOW MARTIN COUNTY, FLORIDA, AMENDED PLAT OF HOMWOOD FILED JANUARY 11, 1956 AND RECORDED IN PLAT BOOK 3, PAGE 35, OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

SAID LANDS SITUATE IN MARTIN COUNTY, FLORIDA.

STREET ADDRESS: 5 RIDGEVIEW DRIVE

LOT 5

LOT 3



- LEGEND
- A-ARC
 - ASHL - ASHWALT
 - C - CALCULATED
 - CH - CHORD
 - C/L - CENTERLINE
 - CM - CONCRETE MONUMENT
 - Q - DELTA
 - D - DESCRIPTION
 - D.E. - DRAINAGE EASEMENT
 - FD. - FOUND
 - G.W. - GUY WIRE
 - I.P. - IRON PIPE
 - I.R. & C. - IRON ROD & CAP
 - L.P. - LIGHT POLE
 - M - MEASURED
 - N & M - NAIL & WAGNER
 - O.E. - OVERHEAD ELECTRIC
 - P. - PLAT
 - PAVT. - PAVEMENT
 - P.C. - POINT OF CURVE
 - P.C.C. - POINT OF COMPOUND CURVE
 - P.F. - POWER POLE
 - P.R.C. - POINT OF REVERSE CURVE
 - P.T. - POINT OF TANGENT
 - P.C.P. - PERMANENT CONTROL POINT
 - P.P.M. - PERMANENT REFERENCE MARKER
 - R - RADIUS
 - ROM - RIGHT OF WAY
 - U.E. - UTILITY EASEMENT
 - H.P. - HIGH POINT
 - BLK. - BLOCK
 - B.M. - BENCHMARK
 - F.F. - FINISHED FLOOR
 - SET I.P. & C. - SET IRON ROD & CAP
 - CONC. - CONCRETE
 - N.T.S. - NOT TO SCALE

FLOOD ZONE A10 ELEV. = 9.0
FIRM PANEL 120164 0002C
DATED APRIL 3, 1984

SURVEYOR'S CERTIFICATE:

THIS CERTIFIES THAT A SURVEY OF THE PROPERTY DESCRIBED HEREON WAS MADE UNDER MY SUPERVISION AND THAT THE SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS IN CHAPTER 61G17-8, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES, AND, THAT THE SKETCH HEREON IS A TRUE AND ACCURATE REPRESENTATION THEREOF TO THE BEST OF MY KNOWLEDGE AND BELIEF, SUBJECT TO NOTES AND NOTATIONS SHOWN HEREON.

NOTES:

- 1) REPRODUCTIONS OF THIS SKETCH ARE NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.
- 2) LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THIS OFFICE FOR RIGHTS-OF-WAY, EASEMENTS OF RECORD, OWNERSHIP, MURPHY ACT DEEDS, OR ADJOINING DEEDS.
- 3) LAND DESCRIBED SHOWN HEREON WAS PROVIDED BY THE CLIENT OF HIS/HER AGENT.
- 4) NO ATTEMPT WAS MADE BY THIS OFFICE TO LOCATE SUBSURFACE IMPROVEMENTS OR ENCROACHMENTS OTHER THAN THOSE SHOWN HEREON.
- 5) UNDEGROUND UTILITIES WERE NOT LOCATED.
- 6) BASE OF BEARINGS IS THE CENTERLINE OF RIDGEVIEW DRIVE AS SHOWN ON THE AMENDED PLAT OF HOMWOOD, RECORDED IN PLAT BOOK 3, PAGE 35, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.

DATED 7/3/95

[Signature]
GERALD W. TANSKY

PROFESSIONAL REGISTRATION NO. 4164

BOUNDARY SURVEY W/INTERIOR IMPROVEMENTS PREPARED FOR: SUNBANK/TREASURE COAST

DRAWN: S.W.T.
CHECKED: S.W.T.
DATE: 5-2-95
SCALE: 1"=20'
JOB # 25-253
SHEET OF 1

TREASURE COAST LAND SURVEYORS
PROFESSIONAL LAND SURVEYORS
PHONE # 3250 CANDICE AVE. BOX 113
334-2663 JENSEN BEACH, FLORIDA 34957

REVISIONS	BY	DATE

TOWN OF SEWALL'S POINT

Date 1/30/03

BUILDING PERMIT NO. 6108

Building to be erected for JAMES

Type of Permit FENCE

Applied for by O/B

(Contractor) Building Fee 30.00

Subdivision HOMWOOD Lot 4 Block _____

Radon Fee _____

Address 5 SOUTH RIDGEVIEW RD

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

01-38-41-006-005-000407

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 30.00 Check # 1710 Cash _____ Other Fees (_____)

Total Construction Cost \$ 900.00

TOTAL Fees 30.00

Signed Lynn James
Applicant

Signed Gene Summers (TBO)
Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Building Permit Number: _____

Owner or Titleholder Name: Matthew Scott James City: Sewalls Point State: FL Zip: 34996

Legal Description of Property: Lot 4 Block E Homewood Parcel Number: 01-38-41-006-005-

Location of Job Site: 5 South Ridgeview Rd Type of Work To Be Done: 0004.0-

A 40 ft fence 6ft high built along driveway with a gate

CONTRACTOR/Company Name: Owner/Builder Phone Number: 723-8247

Street: 5 S. Ridgeview Rd City: Sewall's Pt State: FL Zip: 34996

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

ARCHITECT: _____ Phone Number: _____

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

ENGINEER: _____ Phone Number: _____

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

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

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

Type Sewage: _____ Septic Tank Permit Number From Health Dept. _____ Well Permit Number: _____

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

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

COST AND VALUES Estimated Cost of Construction or Improvements: \$ 960 Estimated Fair Market Value (FMV) Prior

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

SUBCONTRACTOR INFORMATION

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____ South Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____

National Electrical Code _____ Florida Energy Code _____

Florida Accessibility Code _____

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

OWNER OR AGENT SIGNATURE (Required) Lynn E. James

State of Florida, County of: Martin

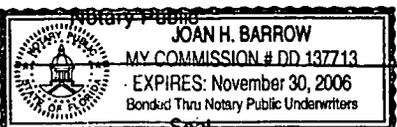
This the 24th day of January, 2003

by L.F. James who is personally

known to me or produced F.I.D.

as identification: Joan H. Barrow

My Commission Expires _____



CONTRACTOR SIGNATURE (Required) _____

On State of Florida, County of: _____

This the _____ day of _____, 2003

by _____ who is personally

known to me or produced _____

As identification: _____

My Commission Expires: _____

Notary Public

Seal

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR A FENCE

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

Application form must contain the following information:

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

Submittals (2 copies)

1. Current survey (boundary & topographic) containing the following information:
 - a. Legal Description of Lot
 - b. Lot dimensions and bearings
 - c. Street and Waterway names
 - d. Easements
 - e. ROW's
 - f. Canals, Ponds, or Riverfront locations
 - g. Location of existing and proposed fences
 - h. Description of type and height of fence at all locations
2. Statement of Fact (owner/builder affidavit)
3. Proof of ownership (deed or tax recpt.)
4. Letter from Home Owners or Subdivision Associations stating design is per their deed restriction or covenants
5. Application for tree removal or relocation (attach tree survey and removal or relocation plan)
6. A certified copy of the Notice of Commencement for any work over \$2500.00
7. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
8. Copy of Workmen's Compensation
9. Copy of Liability Insurance

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



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: 1-24-03

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

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

DISCLOSURE STATEMENT

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

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

Name: Lynn E. James Date: 1-24-03

Signature: Lynn E. James

Address: 5 S. Ridgeview Rd

City & State: Sewall's Point, Florida

Permit No. _____

This form is for all permits except electrical.

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # _____

Date Issued: _____

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

Owner Matthew Scott & Lynn James Address 5 S. Ridgeview Rd Phone 223-8247

Contractor _____ Address _____ Phone _____

Number of trees to be removed (list kinds of trees) 1 Arica Palm to be removed for a gate being built. I plan to

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

plant a magnolia tree in the front yard.

Number of trees to be replaced: _____ (list kinds of trees): _____

Permit Fee \$ _____

\$15.00

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

Plans approved as submitted _____ Plans approved as marked _____

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

Signature of applicant _____ Plans approved as marked _____

Approved by Building Inspector _____ Date submitted: _____

Completed _____
Date _____ Checked by _____

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

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

CERTIFIED TO:

SUNTRUST BANK, SOUTH FLORIDA, N.A.
ATLANTIC COASTAL TITLE CORPORATION
FIDELITY NATIONAL TITLE INSURANCE
COMPANY OF NEW YORK
MATTHEW SCOTT JAMES PC

RIDGEVIEW

ROW=50'

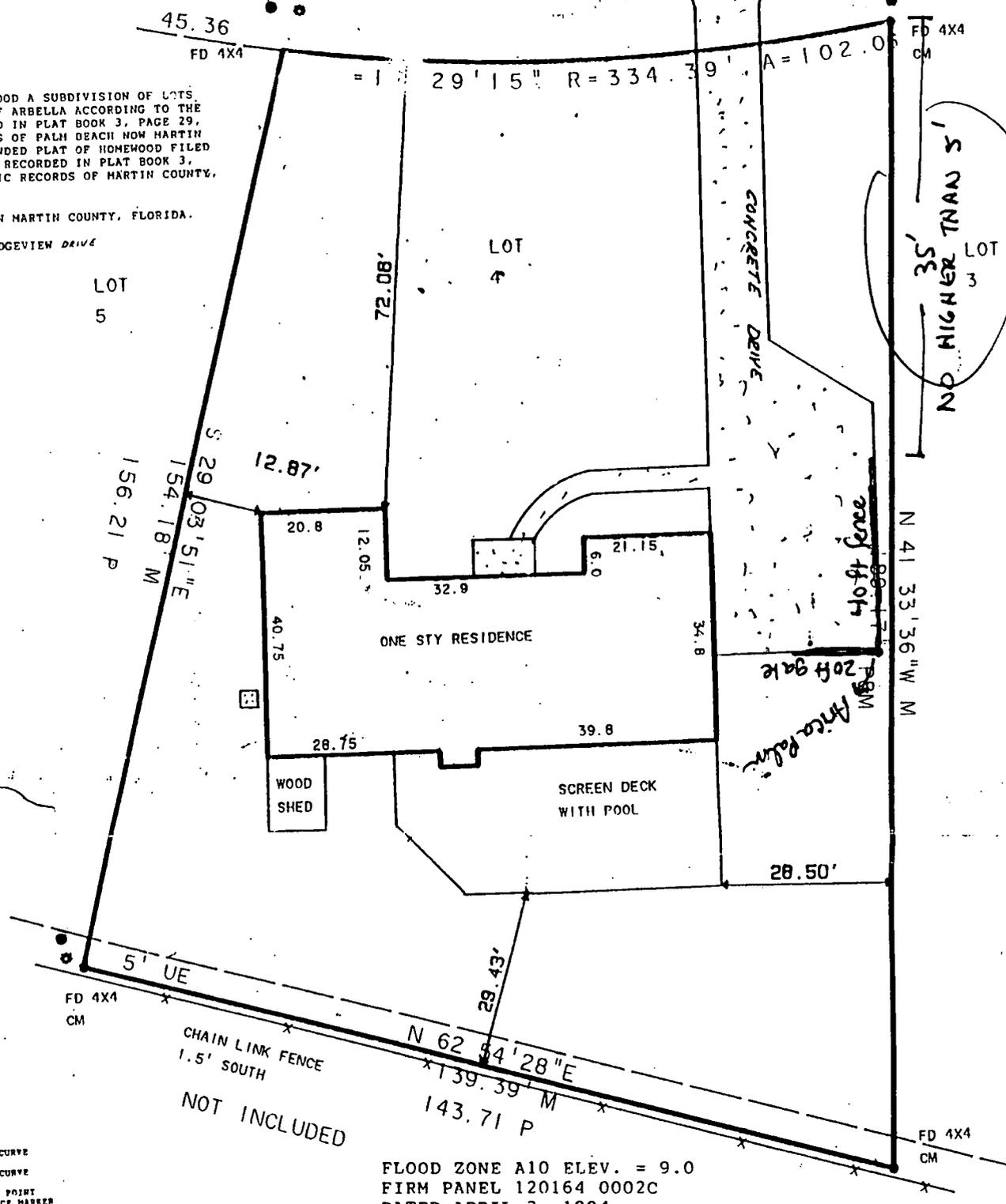
DESCRIPTION

LOT 4, BLOCK E HOMEWOOD A SUBDIVISION OF LOTS 16, 17 AND 18 PLAT OF ARBELLA ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 3, PAGE 29, OF THE PUBLIC RECORDS OF PALM BEACH NOW MARTIN COUNTY, FLORIDA, AMENDED PLAT OF HOMEWOOD FILED JANUARY 11, 1956 AND RECORDED IN PLAT BOOK 3, PAGE 35, OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

SAID LANDS SITUATE IN MARTIN COUNTY, FLORIDA.

STREET ADDRESS: 5 RIDGEVIEW DRIVE

LOT 5



- LEGEND**
- A-ARC
 - ASPH. - ASPHALT
 - C - CALCULATED
 - CH - CHORD
 - C/L - CENTERLINE
 - CM - CONCRETE MONUMENT
 - Δ - DELTA
 - D - DESCRIPTION
 - D.E. - DRAINAGE EASEMENT
 - FD - FOUND
 - G.W. - GUT WIRE
 - I.P. - IRON PIPE
 - I.R. & C. - IRON ROD & CAP
 - L.P. - LIGHT POLE
 - M - MEASURED
 - M & W - NAIL & WASHER
 - O.E. - OVERHEAD ELECTRIC
 - P. - PLAT
 - PAV. - PAVEMENT
 - P.C. - POINT OF CURVE
 - P.C.C. - POINT OF COMPOUND CURVE
 - P.P. - POWER POLE
 - P.R.C. - POINT OF REVERSE CURVE
 - P.T. - POINT OF TANGENT
 - P.C.P. - PERMANENT CONTROL POINT
 - P.R.M. - PERMANENT REFERENCE MARKER
 - R - RADIUS
 - ROW - RIGHT OF WAY
 - U.S. - UTILITY EASEMENT
 - H.P. - HIGH POINT
 - BLK. - BLOCK
 - B.M. - BENCHMARK
 - F.F. - FINISHED FLOOR
 - SET I.R. & C. - SET IRON ROD & CAP
 - CONC. - CONCRETE
 - N.T.S. - NOT TO SCALE

FLOOD ZONE A10 ELEV. = 9.0
FIRM PANEL 120164 0002C
DATED APRIL 3, 1984

SURVEYOR'S CERTIFICATE:

THIS CERTIFIES THAT A SURVEY OF THE PROPERTY DESCRIBED HEREON WAS MADE UNDER MY SUPERVISION AND THAT THE SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS IN CHAPTER 61G17-6, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES, AND, THAT THE SKETCH HEREON IS A TRUE AND ACCURATE REPRESENTATION THEREOF TO THE BEST OF MY KNOWLEDGE AND BELIEF. SUBJECT TO NOTES AND NOTATIONS SHOWN HEREON.

FILE COPY

TOWN OF SEWALL'S POINT

NOT VALID UNLESS SEAL OF AN APPROVED SURVEYOR'S SEAL.

THESE PLANS HAVE BEEN REVIEWED FOR CODE COMPLIANCE

DATE: 1/27/03

DATED 10/7/97

Gene Simmons

- NOTES:**
- 1) REPRODUCTIONS OF THIS SKETCH ARE NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.
 - 2) LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THIS OFFICE FOR RIGHTS-OF-WAY, EASEMENTS OF RECORD, OWNERSHIP, HURRY ACT DEEDS, OR ADJOINING DEEDS.
 - 3) LAND DESCRIBED SHOWN HEREON WAS PROVIDED BY THE CLIENT OR HIS/HER AGENT.
 - 4) NO ATTEMPT WAS MADE BY THIS OFFICE TO LOCATE SUBSURFACE IMPROVEMENTS OR ENCROACHMENTS OTHER THAN THOSE SHOWN HEREON.
 - 5) UNDERGROUND UTILITIES NOT LOCATED.
 - 6) BASE OF BEARING IS THE CENTERLINE OF RIDGEVIEW DRIVE AS SHOWN ON THE AMENDED PLAT OF HOMEWOOD, RECORDED IN PLAT BOOK 3, PAGE 35, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

BOUNDARY SURVEY W/INTERIOR IMPROVEMENTS PREPARED FOR: SUNBANK/TREASURE COAST

DRAWN: G.W.T.
CHECKED: G.S.Y.T.
DATE: 5-3-95
SCALE: 1"=20'
JOB #: 25-253

TREASURE COAST LAND SURVEYORS
PROFESSIONAL LAND SURVEYORS
3250 CANDICE AVE. BOX 113
JENSEN BEACH, FLORIDA 34957

PHONE # 334-2663

REVISIONS	BY	DATE
RE-SURVEYED	D.R.T.	10-7-97

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/20 2004 Page of

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6355	TAYLOR	FINAL PLUMBING		CANCELLED
	22 E HIGH POINT	II BLDG		EVUEN NAVARRO
	NAVARO+MAGGART			INSPECTOR
See # below	6470 James	Remodel Kitchen	FAIL	
1	SS RIDGEVIEW	FINAL		
	Mc Ry	(8am - Please?)		INSPECTOR: <i>OM</i>
6511	KING	DECK	PASS	CLOSE
3	30 RIO VISTA DR			
	RIC PAULY			INSPECTOR: <i>OM</i>
6606	BERNSTON	REROUTE WATER	PASS	
2	176 S. SEWALLS PT	LINE		
	O/B			INSPECTOR: <i>OM</i>
* 6608	JAMES	FENCE	PASS	CLOSE
1	5 S. RIDGEVIEW			
	D/B	(8am - Please?)		INSPECTOR: <i>OM</i>
6093	MC BRIDE	SOFFIT REPAIR		CLOSE PERMIT
6340	9 S. RIOVIEW	REROOF		
				INSPECTOR: <i>OM</i>
6035	MORRISON	FINAL STAIRS +	PASS	CLOSE
6268	23 SIMARA ST	WALKWAY		
	O/B	REPAIR DECK	PASS	INSPECTOR: <i>OM</i>
OTHER:	CLOSE			

6470

REMODEL KITCHEN

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 10/23/03

BUILDING PERMIT NO. 6470

Building to be erected for JAMES

Type of Permit REMODEL KITCHEN

Applied for by MEL-RY CONSTRUCTION (Contractor)

Building Fee 211.20
~~2249.60/1000~~

Subdivision HOMENWOOD Lot 4 Block E

Radon Fee _____

Address 5 S. RIDGEVIEW

Impact Fee _____

Type of structure SFR

A/C Fee _____

PRINT QUAL NAME: MACK MATOS

Electrical Fee 120.00

Parcel Control Number: LIC#: CGC 059412

Plumbing Fee _____

0138410060050004070000

Roofing Fee _____

Amount Paid _____ Check # _____ Cash _____

Other Fees (10% PLAN REV) 21.70

Total Construction Cost \$ 22,000

TOTAL Fees 352.40

Signed Mack Matos

Applicant

Signed Gene Samson

Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

Date: _____

Permit Number: _____

Town of Sewall's Point BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: Matthew S. James + Lynn E. James Phone (Day) 223-8247 (Fax) _____

Job Site Address: 5 S. RIDGEVIEW ROAD City: SEWALLS POINT State: FL Zip: 34996

Legal Description of Property: Homewood, LOT 4 B1K E Parcel Number: 01-38-41-006-005-00046-7

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

Description of Work To Be Done: KITCHEN CABINETS / KITCHEN REMODELING

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

CONTRACTOR/Company: MEL-RY Construction, Inc. Phone: 223-8979 Fax: 223-8979

Street: 320 SW SALERNO Circle City: STUART State: FL Zip: 34997

State Registration Number: PGC 059412 State Certification Number: _____ Martin County License Number: _____

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 22,000 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: HAIDANE ELECTRIC State: FL License Number: _____

Mechanical: N/A State: _____ License Number: _____

Plumbing: N/A State: _____ License Number: _____

Roofing: N/A State: _____ License Number: _____

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

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 415 Garage: _____ Covered Patios: _____ Screened Porch: _____
Carpport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

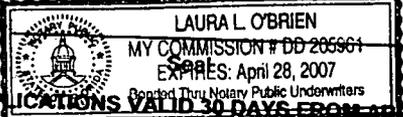
I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, MECHANICAL, SIGNS, POOLS, WELLS, FURNACE, BOILERS, HEATERS, TANKS DOCKS, SEA WALLS, ACCESSORY BUILDING, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL AND RELOCATIONS.

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

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

OWNER OR AGENT SIGNATURE (required)
Lynn James
State of Florida, County of: MARTIN
This the 13th day of OCTOBER, 2003
by LYNN ELIZABETH JAMES who is personally known to me or produced FD DL JS0052566-7230 as identification. Janna R. O'Brien 11/6/05
Notary Public

CONTRACTOR SIGNATURE (required)
M. M. S.
On State of Florida, County of: Martin
This the 8th day of October 2003
by Nack Matos who is personally known to me or produced Known to Me as identification.

My Commission Expires: _____


My Commission Expires: 1/16/05
Niclette Larabee Notary Public
Niclette Larabee Seal

PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL NOTIFICATION. PLEASE PICK UP YOUR PERMIT PROMPTLY!
 MY COMMISSION # CC993905 EXPIRES January 16, 2005 BONDED THRU TROY FAJN INSURANCE, INC.

This Document Prepared By:
C. NORRIS TILTON, ESQUIRE
C. NORRIS TILTON, P.A.
1935 N.E. RICOU TERRACE
JENSEN BEACH, FL 34957

MARSHA STILLER
CLERK OF CIRCUIT COURT
MARTIN CO., FL

RECORDED & VERIFIED
BY

01119790

95 MAY 31 PM 2:32

RECORDED 1,057.00 MARSHA STILLER
BOOK-MTG # _____ MARTIN COUNTY
SERIAL-ARM # _____ CLERK OF CIRCUIT COURT
LIT. TAX # _____ BY _____ D.C.

Parcel ID Number: 1-38-41-006-005-00040-70000

Warranty Deed

This Indenture, Made this 31st day of May, 1995 A.D., Between
C. Norris Tilton, Trustee for the Ernest L. Ward Trust, dated
March 11, 1977,

of the County of MARTIN, State of Florida, grantor, and
Matthew Scott James,

whose address is: 2500 SE Midport Road, PORT SAINT LUCIE, Florida 34952

of the County of SAINT LUCIE, State of Florida, grantee.

Witnesseth that the GRANTOR, for and in consideration of the sum of

----- TEN & NO/100 (\$10.00) ----- DOLLARS,

and other good and valuable consideration to GRANTOR in hand paid by GRANTEE, the receipt whereof is hereby acknowledged, has
granted, bargained and sold to the said GRANTEE and GRANTEE'S heirs and assigns forever, the following described land, situate,
lying and being in the County of MARTIN State of Florida to wit:

Lot 4, Block E, HOMEWOOD, a subdivision of Lots, 16, 17 and 18,
Plat of Arbella, according to the Plat thereof recorded in Plat
Book 3, Page 29, of the Public Records of Palm Beach (Now Martin
County, Florida, Amended Plat of Homewood filed January 1, 1956,
and recorded in Plat Book 3, Page 35, of the Public Records of
Martin County, Florida.

Subject to taxes, easements and restrictions of record.

and the grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

In Witness Whereof, the grantor has hereunto set his hand and seal the day and year first above written.
Signed, sealed and delivered in our presence:

Angela Grant
Angela Grant
Witness

Joyce C. Tilton
Joyce C. Tilton
Witness

C. Norris Tilton, Trustee for
the Ernest L. Ward Trust dated
March 11, 1977

C. Norris Tilton (Seal)
C. Norris Tilton, Trustee
P.O. Address 1935 N.E. Ricou Terrace, JENSEN BEACH, FL 34957

STATE OF Florida
COUNTY OF MARTIN

The foregoing instrument was acknowledged before me this 31st day of May, 1995 by
C. Norris Tilton, Trustee for the Ernest L. Ward Trust, dated March
11, 1977,
who is personally known to me.



OFFICIAL SEAL
ANGELA GRANT
My Commission Expires
Aug. 31, 1996
Comm. No. CC 224449

Angela Grant
Angela Grant #CC 224449
NOTARY PUBLIC
My Commission Expires: 08/31/96

LAST PAGE

01-38-41-006-005-0040-7

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____ TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF FLORIDA COUNTY OF MARIN

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

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE): Homewood lot 4 B1K E 5 South Ridgerview Road

GENERAL DESCRIPTION OF IMPROVEMENT: REMODEL KITCHEN

OWNER: Matthew S. + Lynn E. James
ADDRESS: 5 South Ridgerview Rd Stuart FL 34996
PHONE #: 223-8247 FAX #: _____

INTEREST IN PROPERTY: _____

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

CONTRACTOR: Mel-Ry Construction, Inc.
ADDRESS: 200 SW SAERNO Rd. Stuart FL 34997
PHONE #: 223-8979 FAX #: 223-8979

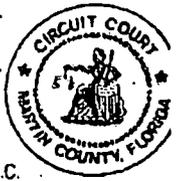
SURETY COMPANY (IF ANY) _____
ADDRESS: _____
PHONE # _____ FAX #: _____
BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY Wachovia Bank
ADDRESS: Orange Ave Ft. Pierce
PHONE #: _____ FAX #: _____

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

NAME: Matthew S. + Lynn E. James
ADDRESS: 5 South Ridgerview Rd Stuart 34996 STATE OF FLORIDA
PHONE #: 223-8247 FAX #: _____ MARTIN COUNTY

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES _____
OF _____ TO RECEIVE A COPY OF THE TENORS
NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.
PHONE #: _____ FAX #: _____
MARGHA EWING, CLERK



EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.
DATE 10-16-03 D.C.

Lynn James
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 13th DAY OF OCTOBER 2003
BY LYNN ELIZABETH JAMES

PERSONALLY KNOWN OR PRODUCED ID FLD 1520-525-66-723-0 x 6/0

Laura L. O'Brien
NOTARY SIGNATURE



ACORD™ CERTIFICATE OF LIABILITY INSURANCE		DATE (MM/DD/YY) MAY 27 03
PRODUCER CHOICES INSURANCE & FINANCIAL SERVICES 883 E BLOOMINGDALE AVENUE BRANDON FL 33811 PHONE: 813-881-8300 FAX: 813-881-8338	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED MACK MATOS DBA MEL RY CONSTRUCTION 320 SW SALERNO CIRCLE STUART FL 34997	INSURERS AFFORDING COVERAGE INSURER A: Mid-Continent Casualty Company INSURER B: INSURER C: INSURER D: INSURER E:	NAIC # 23418

COVERAGES

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

CLASS	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> SUBJECT <input type="checkbox"/> LOC	040L1225878/B	MAY 13 03	MAY 13 04	EACH OCCURRENCE \$ 1,000,000
					DAMAGE TO RENTED EQUIPMENT \$ 300,000
					MED. EXP (Any One Person) \$ 10,000
					PERSONAL & ADV INJURY \$ 1,000,000
					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS-COMP/OP AGG. \$ 2,000,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<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				BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE \$
	DAMAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY AGG \$
	EXCESS / UMBRELLA LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
	EMPLOYERS COMPENSATION AND EMPLOYERS' LIABILITY				<input type="checkbox"/> NO START-UP COSTS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				E.L. EACH ACCIDENT \$
					E.L. DISEASE-CA EMPLOYEE \$
					E.L. DISEASE-POLICY LIMIT \$
	OTHER:				

DESCRIPTION OF OPERATIONS/LOCATION/VEHICLE/EXCLUSIONS ADDED ENDORSEMENT/ SPECIAL PROVISIONS

CERTIFICATE HOLDER	ADDITIONAL INSURED; DISOPER LETTER:	CANCELLATION
INSURED COPY Attention:		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 

03-14-2003

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

CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW

CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE	02/08/2003	EXPIRATION DATE	02/07/2005
PERSON	MATOS	MACK	R
SSN	261-79-4578		
FEIN	134235498		
BUSINESS	MEL-RY CONSTRUCTION, INC. 320 SW SALERNO CIRCLE STUART FL 34997		

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

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

<p>STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION</p> <p>CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW</p> <p>EFFECTIVE: 02/08/2003 EXPIRATION: 02/07/2005 PERSON: MATOS MACK SSN: 261-79-4578 FEIN: 134235498 BUSINESS: MEL-RY CONSTRUCTION, INC. 320 SW SALERNO CIRCLE STUART FL 34997</p>	 <p style="writing-mode: vertical-rl; text-orientation: mixed;">F O L D H E R E</p> <p>NOTE: Pursuant to chapter 440.10(1), (g), 2, F.S., a sole proprietor, partner, or officer of an corporation who elects exemption from the Florida Workers' Compensation Law may not recover benefits or compensation under Chapter 440.</p>
---	--

CUT HERE

* Carry bottom portion on the Job, keep upper portion for your records.

AC#0886090

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L03041100614

DATE	BATCH NUMBER	LICENSE NBR
04/11/2003	801278385	CGC059412

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

MATOS, MACK RICARDO
MEL-RY CONSTRUCTION
3607 SW SUNSET TRACE CIR
PALM CITY FL 34990

JEB BUSH
GOVERNOR

DIANE CARR
SECRETARY

DISPLAY AS REQUIRED BY LAW

2003-2004 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(561) 288-5604

LICENSE 2003-513-027 CERT CGC059412

PHONE (772)223-8979 SIC NO 233210

LOCATION:
320 SW SALERNO CIR MAR

CHARACTER COUNTS IN MARTIN COUNTY

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

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF **GENERAL CONTRACTOR**

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

20 DAY OF AUGUST 03
AND ENDING SEPTEMBER 30, 2004

12 03081901 001321

MATOS MACK R
MEL-RY CONSTRUCTION INC
320 SW SALERNO CIRCLE
STUART FL 34997

TOWN OF SEWALL'S POINT

Date 10/22/03

BUILDING PERMIT NO. 647.1

Building to be erected for JAMES

Type of Permit SUB-ELEC

Applied for by MEL-RY CONST/HALDANE EL (Contractor)

Building Fee _____

Subdivision HOMWOOD Lot 4

Block E

Radon Fee _____

Address 5 S. RIDGEVIEW ROAD

Impact Fee _____

Type of structure SFR

A/C Fee SEE PN 6470

PRINT QUAL NAME: THOMAS W. HALDANE

Electrical Fee _____

Parcel Control Number: Lot # EC 000 1346

Plumbing Fee _____

01384-006005000407000

Roofing Fee _____

Amount Paid Check # Cash _____

Other Fees (_____) _____

Total Construction Cost \$ 22,000.00

TOTAL Fees _____

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
12/05/02

PRODUCER
Kearns Agency of Florida, Inc.
P.O. Box 1849
Jensen Beach, FL 34958

INSURED
Haldane Electric, Inc.
2133 SE Bryson Ave.
Port St. Lucie, FL 34952

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

INSURERS AFFORDING COVERAGE

INSURER A: **Auto-Owners Insurance**

INSURER B:

INSURER C:

INSURER D:

INSURER E:

RECEIVED
DEC 12 2002
BY: _____

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/>	20506633-03	01-01-03	01-01-04	EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$1,000,000 PRODUCTS - COMP/OP AGG \$1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	95-434-642-00	01-01-03	01-01-04	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

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

Electrical Contractor - State of Florida

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

Town of Sewall's Point
1 South Sewall's Point Rd.
Sewall's Point, FL 34996

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

AUTHORIZED REPRESENTATIVE

Lawrence E. Kearns



Certificate of Insurance

This certificate is issued as a matter of information only and confers no rights upon you the certificate holder. This certificate is not an insurance policy and does not amend, extend, or alter the coverage afforded by the policies listed below.

Named Insured(s):

Gevity HR, Inc and its wholly owned subsidiaries including Gevity HR, LP; Gevity HR IV, LP; Gevity HR IX, LP; Gevity HR X, LP

600 301 Boulevard West
Bradenton, Florida 34205

RECEIVED

DEC 30 2002

BY:

MARSH

Insurer Affording Coverage

American Home Assurance Co.,
Member of American International Group, Inc. (AIG)

Coverages:

The policy(ies) of insurance listed below have been issued to the insured named above for the policy period indicated. The insurance afforded by the policy(ies) described herein is subject to all the terms, exclusions and conditions of such policy(ies).

Type of Insurance	Certificate Exp. Date <input type="checkbox"/> Continuous <input type="checkbox"/> Extended <input checked="" type="checkbox"/> Policy Term	Policy Number	Limits	
			Employers Liability	
Workers' Compensation	1-1-2004	RMWC0977182 RMWC0977183 RMWC0977184 RMWC0977185 RMWC0977186	Bodily Injury By Accident	Each Accident
			\$ 1,000,000	
			Bodily Injury By Disease	Policy Limit
			\$ 1,000,000	
			Bodily Injury By Disease	Each Person
			\$ 1,000,000	

Other:

Employees Leased To:

7885 Haldane Electric Inc.
Haldane Electric Inc.

Effective Date: 1/1/03

The above referenced workers' compensation policy(ies) provide(s) statutory benefits only to the employees of the Named Insured(s) on such policy(ies), not to the employees of any other employer.

*If the certificate expiration date is continuous or extended term, you will be notified if coverage is terminated or reduced before the certificate expiration date. However, you will not be notified annually of the continuation of coverage.

Notice of Cancellation: Should any of the policies described herein be cancelled before the expiration date thereof, the insurer affording coverage will endeavor to mail 30 days written notice to the certificate holder named herein, but failure to mail such notice shall impose no obligation or liability of any kind upon the insurer affording coverage, its agents or representatives.

Certificate Holder:

Town of Sewall's Point
1 S Sewall's Point Rd
Sewalls Point, FL 34996-6736



Michael C. Weiss

Michael C. Weiss
Authorized Representative of Marsh USA Inc.

(866) 443-8489
Phone

12/9/2002
Date Issued



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ELECT CONTRACTORS LICENSING BD
1940 N MONROE ST
TALLAHASSEE FL 32399-0771

(850) 488-3109

FILE
UC/WS

RECEIVED
JUL 12 2001
BY: *[Signature]*

HALDANE, THOMAS W
DITTO ENT INC DBA SUNSET SECURITY & SOUND
2133 S E BRYSON AVE
PORT ST LUCIE FL 34952

STATE OF FLORIDA AC# 5880861
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
EC -A001346-06/14/2000 99902181
CERTIFIED ELECTRICAL CONTRACTOR
HALDANE, THOMAS W
DITTO ENT INC DBA SUNSET SECURITY
IS CERTIFIED under the provisions of Ch. 489 FS
Expiration Date: AUG 31, 2002

License # EC 0001346

DETACH HERE

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECT CONTRACTORS LICENSING BD

DATE	BATCH NUMBER	LICENSE NBR
6/14/2000	0001346	A001346

The **ELECTRICAL CONTRACTOR** named below is **CERTIFIED** under the provisions of Chapter 489 FS.
Expiration date: **AUG 31, 2002**

HALDANE, THOMAS W
DITTO ENT INC DBA SUNSET SECURITY & SOUND
2133 S E BRYSON AVE
PORT ST LUCIE FL 34952



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ELECTRICAL CONTRACTORS LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

(850) 487-1395

HALDANE, THOMAS W
HALDANE ELECTRIC INC
2133 S E BRYSON AVE
PORT ST LUCIE FL 34952

STATE OF FLORIDA AC# 046487
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 EC0001346 06/21/02 011143174
 CERTIFIED ELECTRICAL CONTRACTOR
 HALDANE, THOMAS W
 HALDANE ELECTRIC INC
 IS CERTIFIED under the provisions of Ch. 489 F.
 Expiration date: AUG 31, 2004 SEQ # L02062102

DETACH HERE

AC# 0464877 STATE OF FLORIDA
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 ELECTRICAL CONTRACTORS LICENSING BOARD SEQ# L020621020

DATE	BATCH NUMBER	LICENSE NBR
06/21/2002	011143174	EC0001346

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

HALDANE, THOMAS W
 HALDANE ELECTRIC INC
 2133 S E BRYSON AVE
 PORT ST LUCIE FL 34952

JEB BUSH GOVERNOR DISPLAY AS REQUIRED BY LAW KIM BINKLEY-SEYER SECRETARY

OCCUPATIONAL TAX RECEIPT

CITY OF PORT ST. LUCIE

**121 SW PORT ST. LUCIE BOULEVARD
PORT ST. LUCIE, FLORIDA 34984-5099**

THIS LICENSE VALID WHEN ALL STATE AND LOCAL
REGULATED TRADE LICENSES / COMPETENCY
CARDS ARE VALID FOR THE CURRENT FISCAL YEAR.

TERM: October 1, 2003 to September 30, 2004

THIS IS A RECEIPT FOR TAX PAID AND IS NOT REGULATORY IN NATURE

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.

VALID AT THIS BUSINESS ADDRESS ONLY

Business/Lic. 100226/04-1013351

Business Address: 2133 SE BRYSON AVE
Classification: CONT CONTRACTOR
Issued to: HALDANE ELECTRIC INC
2133 SE BRYSON AVE

Fee: 110.25
Discount: 0.00

PORT ST LUCIE FL 34952

[Signature]
BUSINESS LICENSE COORDINATOR
926/049 YB BUSINESS COPY

Fees: 110.25 Late Fees: 0.00 Total this payment : 110.25

* 2003-2004

**ST. LUCIE COUNTY OCCUPATIONAL LICENSE
STATE OF FLORIDA**

ACCOUNT 731-00008298

EXPIRES SEP 30, 2004

FACILITIES OR MACHINES ROOMS SEATS EMPLOYEES 21+
TYPE OF BUSINESS 1731 ELECTRICAL CONTRACTOR

BUSINESS LOCATION 2133 SE Bryson Ave - CITY OF PT ST LUCIE

X RENEWAL NEW LICENSE TRANSFER- ORIGINAL TAX 25.00

NAME Haldane, Thomas W
MAILING Haldane Electric Inc
ADDRESS 2133 SE Bryson Ave
PORT SAINT LUCIE FLORIDA 34952
CO 2806

AMOUNT PENALTY COLLECTION COST TOTAL 25.00

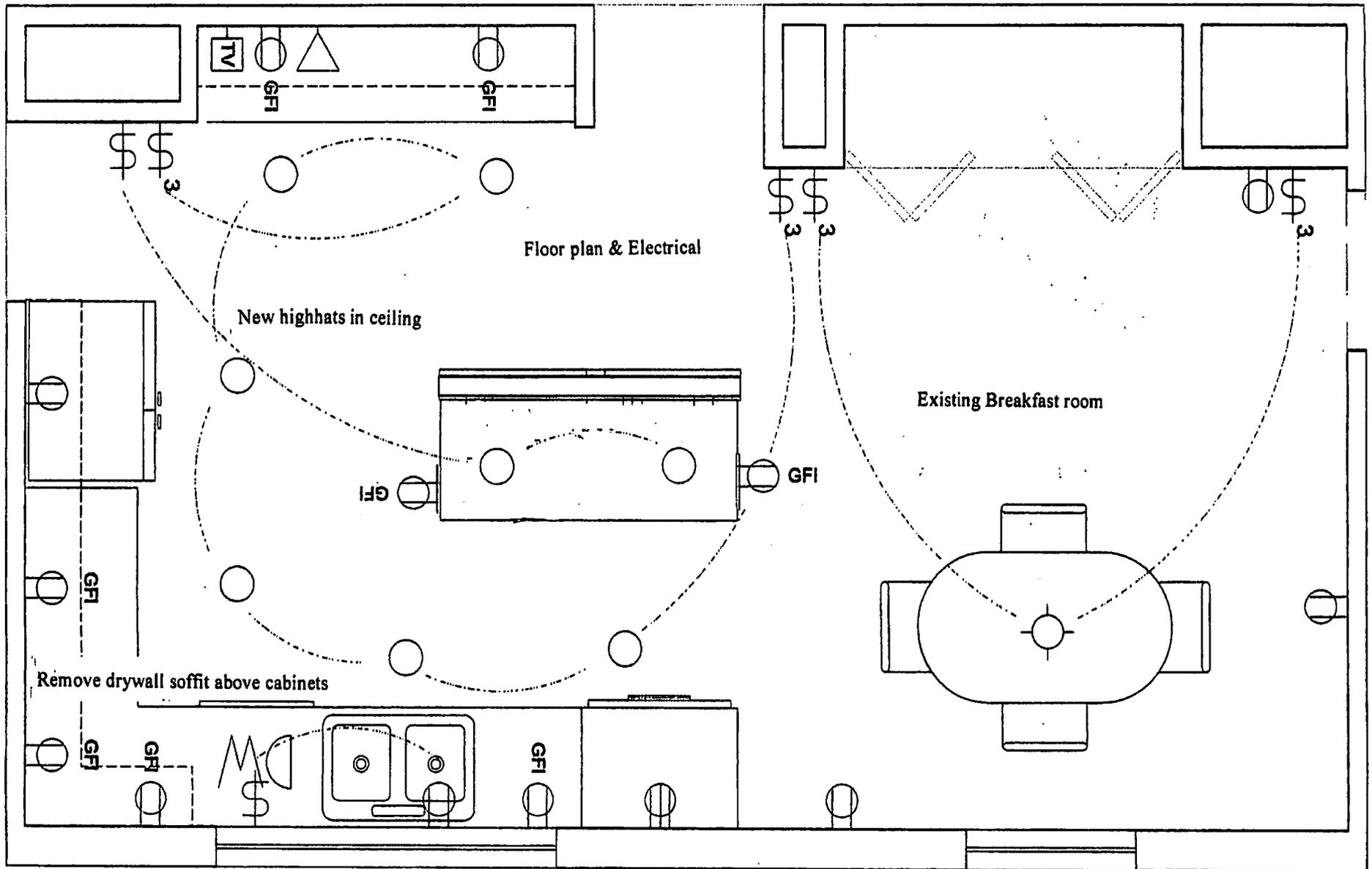
THIS LICENSE BECOMES NULL AND VOID IF BUSINESS NAME, CLASSIFICATION, OWNERSHIP OR ADDRESS IS CHANGED, UNLESS LICENSEE APPLIES TO TAX COLLECTOR FOR CORRECTION.

SUBJECT TO SUSPENSION OR REVOCATION IN ACCORDANCE WITH ORDINANCES OF ST. LUCIE COUNTY
BOB DAVIS, CPA, CGFO, CFC, ST. LUCIE COUNTY TAX COLLECTOR
P.O. BOX 308 FORT PIERCE, FL 34984-0308

PAID
MACH:011 8/7/2003 9:06AM 00010695
2003 1731-00008298

0600 \$25.00
CK \$25.00
CHANGE \$0.00

Larger closet for new cabinets
Remove drywall Relocate Electric



New window with shutters or impact glass

CRITIQUE

Owner: Mathew & Lynn James
Contractor: Mel-Ry Construction
Contractor's Phone Number: 223-8979

Date: October 16, 2003
Plan Reviewer: Gene Simmons

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR KITCHEN REMODEL FOR 5 SOUTH RIDGEVIEW ROAD

Submittals (2 copies)

1. Product approvals (**current**) from Miami/Dade or other testing institutes approved by the Florida Building Code for the following items:
 - a. Windows
 - b. Hurricane Shutters (~~if~~ impact not used)
2. Proof of Ownership
- ✓3. Notice of Commencement
- ✓4. Copy of State, Martin County Licenses
- ✓5. Copy of Liability Insurance
- ✓6. Copy of Workmen's Compensation

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

1. Floor Plan containing the following information:
 - a. Existing layout of kitchen in order to compare new layout
2. Section/Detail Drawings and Schedules showing the following information:
 - a. Window showing design pressures (+ and -)
 - b. Window buck detail showing type, size, length and spacing of connectors to be used.

CRITIQUE

Owner: Mathew & Lynn James
Contractor: Mel-Ry Construction
Contractor's Phone Number: 223-8979

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4. Copy of State, Martin County Licenses
5. Copy of Liability Insurance
6. Copy of Workmen's Compensation

MEL-RY

*JAMES
MEL-RY
MEL-RY
MEL-RY
MEL-RY*

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

1. Floor Plan containing the following information:
 - a. Existing layout of kitchen in order to compare new layout
2. Section/Detail Drawings and Schedules showing the following information:
 - a. Window showing design pressures (+ and -)
 - b. Window buck detail showing type, size, length and spacing of connectors to be used.

- MEL-RY ENGINEER

MEL-RY ENGINEER



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

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

NOTICE OF ACCEPTANCE (NOA)

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

SCOPE:

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

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

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

DESCRIPTION: Series "PW-701" Aluminum Fixed Window-Impact

APPROVAL DOCUMENT: Drawing No. 4214, titled "Aluminum Fixed Impact Window", sheets 1 through 4 of 4, prepared by manufacturer dated 02-16-98 and last revised on 09-09-02, signed and sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large Missile Impact Resistant

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

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

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

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

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

This NOA revises and renews NOA # 99-0218.01 and, consists of this page 1 as well as approval document mentioned above.

The submitted documentation was reviewed by **FILE COPY** Ishaq Y. Chanda, P.E.



TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 10/20/03

BUILDING OFFICIAL
Gene Simmons

NOA No 02-0716.03
Expiration Date: October 03, 2007.
Approval Date: October 03, 2002
Page 1

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/29/, 20083 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6410	HALL	DECK	Passal	
(3)	4 N VIA LUCINDIA TWIN POOLS			INSPECTOR:
6438	BONING	FINAL ROOF	Passal	(*) Gage ? 4/16/8
(2)	5 ST LUCIE COURT STUART ROOFING			INSPECTOR:
TREE	HOCHSTETTER	TREE	Passal	
(4)	72 S. RIVER RD			INSPECTOR:
6330	BUSSEY	ELEC. MECH	Passed/Passal	
(8)	1 PALMETTO WORRELL	PLUMBING WINDOWS	Passed	INSPECTOR: <i>late am please -> Friday</i>
TREE	BEAN	TREE	Passal	
(5)	112 S. Sewallis Pt			INSPECTOR:
TREE	MCMANON	TREE	Passal	
(6)	5 MELODY AVE			INSPECTOR:
6470	JAMES	ROUGH PLUMBING	Passed	
(1)	5 S. RIDGEVIEW MELRY CONSTR.	Electric		INSPECTOR:
OTHER:	133 S. River 745 0394 Permit/CO/Bldg. \$/Occupancy			
(7)				



TOWN OF SEWALL'S POINT

One South Sewall's Point Road **6470**
Sewall's Point, Florida 34996 ~~2100~~
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 5 S. RIDGEVIEW

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

KITCHEN FINAL

GFCL TO LEFT OF RANGE
IS LOOSE

SCREEN MISSING ON FIXED
W/DW FRAME OVER SINK

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

DATE: 2/20/04 PHIL
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

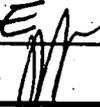
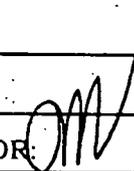
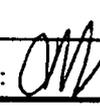
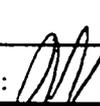
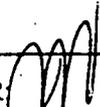
Date of Inspection: Mon Wed Fri 2/20, 2004 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6355	TAYLOR	FINAL RUMBLE		CANCELLED
	22 E. HIGH POINT	11 BLDG		EVENET NAVARRO
	NAVARRO+MAGGART			INSPECTOR
6470	JAMES	REMODEL KITCHEN	FAIL	
1	SS RIDGEVIEW	FINAL		
	MEL RY	(8am - Please?)		INSPECTOR: MW
6511	KING	DECK	PASS	CLOSE
3	30 RIO VISTA DR			
	RIC PAULY			INSPECTOR: MW
6606	BERNSTON	REROUTE WATER	PASS	
2	176 S. SEWALLS PT	LINE		
	O/B			INSPECTOR: MW
6108	JAMES	FENCE	PASS	CLOSE
1	5 S. RIDGEVIEW			
	D/B	(8am - Please?)		INSPECTOR: MW
6093	M C BRIDE	SOFFIT REPAIR		CLOSE PERMIT
6340	9 S. RIDGEVIEW	REROOF		
				INSPECTOR: MW
6035	MORRISON	FINAL SAIRS +	PASS	CLOSE
	23 SIMARA ST	WALKWAY		
6268	O/B	REPAIR DECK	PASS	INSPECTOR: MW
OTHER:				CLOSE

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/4, 2004 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6470	JAMES	FINAL KITCHEN REMODEL	PASS	AFTER 9:30
3	5 S. RIDGEVIEW MEL-RY CONST			CLOSE INSPECTOR: 
6500	COBIELLA	FRAMING	PASS	
7	8 N. SEWALL'S PT PIZZERI	(MID MORNING?)		INSPECTOR: 
6774	CIFELLI	AC CHG OUT	PASS	CLOSE
1	8 HERITAGE WAY ADVANTAGE AC			INSPECTOR: 
TREE	ANDERSON	TREE	PASS	
2	9 PALMETTO DR			INSPECTOR: 
TREE	BEEELITZ/MALONE	TREE	PASS	
3	10/14 S. VIALUCINOIA			INSPECTOR: 
6719	DONATUE	SLAB	FAIL	
8	163 S. SEWALL'S PT SAMMONS	?late morning please?		INSPECTOR: 
6413	POWERS	SLAB	PASS	
4	70 S. SEWALL'S PT FLORIDA'S FINEST	not first?		INSPECTOR: 
OTHER: _____				

9968

DEMO WOOD SHED



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:	9968	DATE ISSUED:	JANUARY 11, 2012
SCOPE OF WORK:	DEMO SMALL WOOD SHED		
CONTRACTOR:	OB		
PARCEL CONTROL NUMBER:	013841006005000407	SUBDIVISION	HOMEWOOD, L4, BL E
CONSTRUCTION ADDRESS:	5 S RIDGEVIEW RD		
OWNER NAME:	ALDRICH		
QUALIFIER:	OB	CONTACT PHONE NUMBER:	618-843-9125

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 | _____ |

FINAL INSPECTION IS REQUIRED
 FAILURE TO RECEIVE A PASSED FINAL INSPECTION MAY RESULT IN A PERMIT RENEWAL FEE

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

**Town of Sewall's Point
BUILDING PERMIT APPLICATION**

Permit Number: 9968

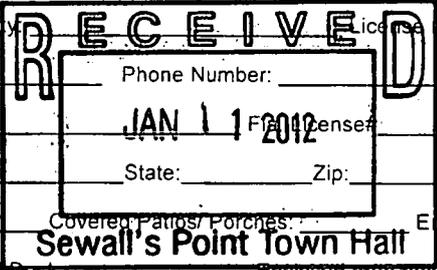
Date: _____
 OWNER/TITLEHOLDER NAME: Kelly L. Aldrich Phone (Day) 618-843-9125 (Fax) _____
 Job Site Address: 5 South Ridgewire Road City: _____ State: _____ Zip: _____
 Legal Description _____ Parcel Control Number: _____
 Owner Address (if different): _____ City: _____ State: _____ Zip: _____

X SCOPE OF WORK (PLEASE BE SPECIFIC): DEMO SMALL WOOD SHED

<p>WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application) YES <input checked="" type="checkbox"/> NO _____ Has a Zoning Variance ever been granted on this property? YES _____ (YEAR) _____ NO _____ (Must include a copy of all variance approvals with application)</p>	<p>COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ <u>100</u> (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 <input checked="" type="checkbox"/> _____ 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</p>
--	--

Construction Company: _____ Phone: _____ Fax: _____
 Qualifiers name: _____ Street: _____ City: _____ State: _____ Zip: _____
 State License Number: _____ OR: Municipal _____ License Number: _____

LOCAL CONTACT: _____
 DESIGN PROFESSIONAL: _____
 Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____
 AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/Porches: _____ Enclosed Storage: _____
 Carport: _____ Total under Roof _____ Elevated Deck _____ Enclosed area below BFE* _____
 * Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.



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

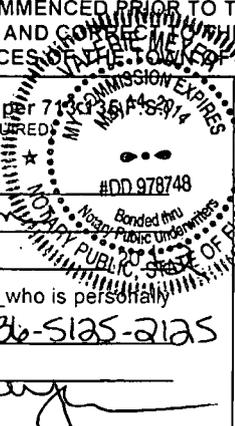
NOTICES TO OWNERS AND CONTRACTORS:

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

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

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

OWNER NOTORIZED SIGNATURE: (required per 713.135 F.S.)
 OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
X Kelly L. Aldrich
 State of Florida, County of: Martin
 On This the 11th day of Jan
 by Kelly Aldrich who is personally
 known to me or produced Valery
 As identification. Valery
 Notary Public
 My Commission Expires: _____



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

 State of Florida, County of: _____
 On This the _____ day of _____ 20____
 by _____ who is personally
 known to me or produced _____
 As identification. _____
 Notary Public
 My Commission Expires: _____

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

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

generated on 1/11/2012 10:55:04 AM EST

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-006-005-00040-7	17672	5 S RIDGEVIEW RD, SEWALL'S POINT	\$284,060	1/7/2012

Owner Information

Owner(Current)	ALDRICH KELLY L & NORMAN JEAN
Owner/Mail Address	12241 SALUKIS RD SUMNER IL 62466
Sale Date	12/15/2011
Document Book/Page	2553 1849
Document No.	2309379
Sale Price	231500

Location/Description

Account #	17672	Map Page No.	SP-04
Tax District	2200	Legal Description	HOMEWOOD, LOT 4 BLK E
Parcel Address	5 S RIDGEVIEW RD, SEWALL'S POINT		
Acres	.4660		

Parcel Type

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

Assessment Information

Market Land Value	\$175,000
Market Improvement Value	\$109,060
Market Total Value	\$284,060

CERTIFIED TO:

SUNTRUST BANK, SOUTH FLORIDA, N.A.
ATLANTIC COASTAL TITLE CORPORATION
FIDELITY NATIONAL TITLE INSURANCE
COMPANY OF NEW YORK
MATTHEW SCOTT JAMES PC

RIDGEVIEW
ROW=50'

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

DESCRIPTION

LOT 4, BLOCK E HOMEROOD A SUBDIVISION OF LOTS 16, 17 AND 18 PLAT OF ARBELLA ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 3, PAGE 29, OF THE PUBLIC RECORDS OF PALM BEACH NOW MARTIN COUNTY, FLORIDA, AMENDED PLAT OF HOMEROOD FILED JANUARY 11, 1956 AND RECORDED IN PLAT BOOK 3, PAGE 35, OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

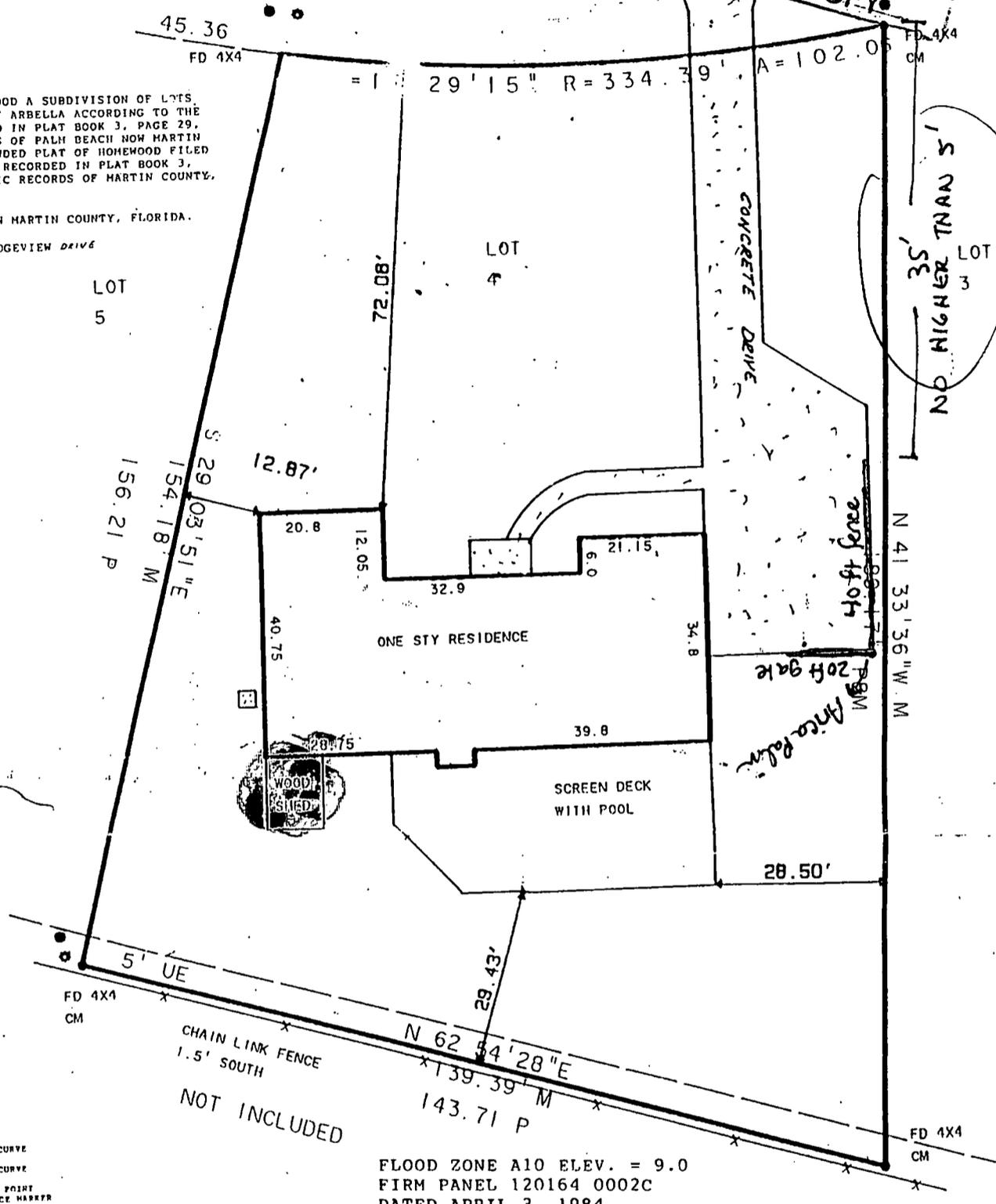
SAID LANDS SITUATE IN MARTIN COUNTY, FLORIDA.

STREET ADDRESS: 5 RIDGEVIEW DRIVE

LOT 5

LOT 4

LOT 3



- LEGEND
- A-ARC
 - ASPH. = ASPHALT
 - C = CALCULATED
 - CH = CHORD
 - C/L = CENTERLINE
 - CM = CONCRETE MONUMENT
 - Δ = DELTA
 - D = DESCRIPTION
 - D.E. = DRAINAGE EASEMENT
 - FD. = FOUND
 - G.W. = GUY WIRE
 - I.P. = IRON PIPE
 - I.R. & C. = IRON ROD & CAP
 - L.P. = LIGHT POLE
 - H = MEASURED
 - N & W = NAIL & WASHER
 - O.E. = OVERHEAD ELECTRIC
 - P. = FLAT
 - PAV. = PAVEMENT
 - P.C. = POINT OF CURVE
 - P.C.C. = POINT OF COMPOUND CURVE
 - P.P. = POWER POLE
 - P.R.C. = POINT OF REVERSE CURVE
 - P.T. = POINT OF TANGENT
 - P.C.P. = PERMANENT CONTROL POINT
 - P.R.H. = PERMANENT REFERENCE MARKER
 - R = RADIUS
 - ROW = RIGHT OF WAY
 - U.E. = UTILITY EASEMENT
 - H.P. = HIGH POINT
 - BLK. = BLOCK
 - B.M. = BENCHMARK
 - F.F. = FINISHED FLOOR
 - SET I.R. & C. = SET IRON ROD & CAP
 - CONC. = CONCRETE
 - UTS = NOT TO SCALE

FLOOD ZONE A10 ELEV. = 9.0
FIRM PANEL 120164 0002C
DATED APRIL 3, 1984

SURVEYOR'S CERTIFICATE:

THIS CERTIFIES THAT A SURVEY OF THE PROPERTY DESCRIBED HEREON WAS MADE UNDER MY SUPERVISION AND THAT THE SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS IN CHAPTER 61G17-6, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES, AND, THAT THE SKETCH HEREON IS A TRUE AND ACCURATE REPRESENTATION THEREOF TO THE BEST OF MY KNOWLEDGE AND BELIEF. SUBJECT TO NOTES AND NOTATIONS SHOWN HEREON.

NOTES:

- 1) REPRODUCTIONS OF THIS SKETCH ARE NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.
- 2) LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THIS OFFICE FOR RIGHTS-OF-WAY, EASEMENTS OF RECORD, OWNERSHIP, MURPHY ACT DEEDS, OR ADJOINING DEEDS.
- 3) LAND DESCRIBED SHOWN HEREON WAS PROVIDED BY THE CLIENT OR HIS/HER AGENT.
- 4) NO ATTEMPT WAS MADE BY THIS OFFICE TO LOCATE SUBSURFACE IMPROVEMENTS OR ENCROACHMENTS OTHER THAN THOSE SHOWN HEREON.
- 5) UNDERGROUND UTILITIES NOT LOCATED.
- 6) BASE OF BEARINGS IS THE CENTERLINE OF RIDGEVIEW DRIVE AS SHOWN ON THE AMENDED PLAT OF HOMEROOD, RECORDED IN PLAT BOOK 3, PAGE 35, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

TOWN OF SEWALL'S POINT

NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.

REMEMBER FOR YOUR COMPLIANCE

DATE: 4/7/97

GERALD W. TANBRY

PROFESSIONAL REGISTRATION NO. 4464

DATED 10/7/97

BOUNDARY SURVEY W/INTERIOR IMPROVEMENTS PREPARED FOR: SUNBANK/TREASURE COAST

DRAWN: G.W.T.
CHECKED: G.W.T.
DATE: 5-3-95
SCALE: 1"=20'
HW: 25-253

TREASURE COAST LAND SURVEYORS
PROFESSIONAL LAND SURVEYORS
3250 CANDICE AVE. BOX 113
JENSEN BEACH FLORIDA 34957

REVISIONS	BY	DATE
RE-SURVEYED	D.A.T.	10-7-97

10009
PAVER DRIVEWAY
& WALKWAY



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:	10009	DATE ISSUED:	FEBRUARY 14, 2012
SCOPE OF WORK:	PAVER DRIVEWAY & WALKWAY		
CONTRACTOR:	APEX PAVERS		
PARCEL CONTROL NUMBER:	013841006005-000407	SUBDIVISION	HOMEWOOD, L4, BL E
CONSTRUCTION ADDRESS:	5 S RIDGEVIEW RD		
OWNER NAME:	ALDRICH		
QUALIFIER:	RYAN FIGMAN	CONTACT PHONE NUMBER:	772-419-5151

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY**

INSPECTIONS

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

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

David (361) 262-6313

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: 10009

Date: _____
OWNER/TITLEHOLDER NAME: Kelly Albrecht Phone (Day) 618-843-9120 (Fax) _____
Job Site Address: 5 S. Ridgeview Rd City: Sewalls Pt State: FL Zip: 34996
Legal Description: Homewood, Lot 4, BIKÉ Parcel Control Number: 01-38-41-006-005 00407
Owner Address (if different): 12241 Salukis Rd City: Sumner State: IL Zip: 62466

Scope of work (please be specific): PAVER & DRIVEWAY & WALKWAY
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: \$ 13350 -
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 ___ AE9 ___ AE8 X ___
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Apex Pavers Phone: 772-419-5151 Fax: 772-419-5101
Street: 834 SE Lincoln Ave City: Stuart State: FL Zip: 34994
State License Number: _____ OR: Municipality: Martin County License Number: MCPB 4701

LOCAL CONTACT: Doreen Buffa Phone Number: 772-419-5151
DESIGN PROFESSIONAL: _____ Lic# _____ Phone Number: _____
Street: _____ City: _____ State: _____ Zip: _____
AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/Porches: _____ Enclosed Storage: _____
Carport: _____ Total under Roof: _____ Elevated Deck: _____ Enclosed Area below BFE: _____
* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

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

NOTICES TO OWNERS AND CONTRACTORS:

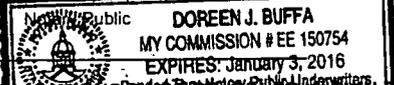
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- 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF: FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

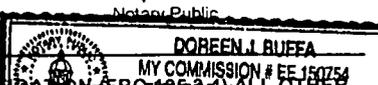
*****A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*****

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

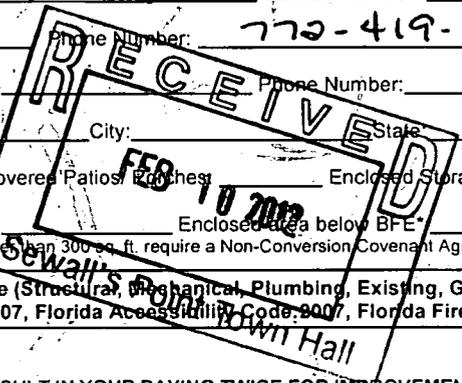
OWNER SIGNATURE (required)
OR OWNER'S AUTHORIZED AGENT (PROOF REQUIRED)
Kelly Albrecht
State of Florida, County of: Martin
This the 10 day of February, 2012
by Kelly Albrecht who is personally
known to me or produced
as identification: Doreen Buffa

CONTRACTOR SIGNATURE (required)
Ryan Figman
On State of Florida, County of: Martin
This the 10 day of February, 2012
by Ryan Figman who is personally
known to me or produced
As identification: Doreen Buffa

My Commission Expires: _____


My Commission Expires: _____


SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTICE. FBC EXPIRES JANUARY 3, 2016
APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOURS BEFORE THEY ARE ABANDONED



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

generated on 2/13/2012 1:48:04 PM EST

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-006-005-00040-7	17672	5 S RIDGEVIEW RD, SEWALL'S POINT	\$284,060	2/11/2012

Owner Information

Owner(Current)	ALDRICH KELLY L & NORMA JEAN
Owner/Mail Address	12241 SALUKIS RD SUMNER IL 62466
Sale Date	12/15/2011
Document Book/Page	2553 1849
Document No.	2309379
Sale Price	231500

Location/Description

Account #	17672	Map Page No.	SP-04
Tax District	2200	Legal Description	HOMEWOOD, LOT 4 BLK E
Parcel Address	5 S RIDGEVIEW RD, SEWALL'S POINT		
Acres	.4660		

Parcel Type

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

Assessment Information

Market Land Value	\$175,000
Market Improvement Value	\$109,060
Market Total Value	\$284,060

INSTR # 2315758
OR BK 02560 PG 0283
Pg 0283: (1pg)
RECORDED 02/10/2012 03:08:50 PM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY C Oliveri

NOTICE OF COMMENCEMENT
To be completed when construction value exceeds \$2,500.00

PERMIT #: _____ TAX FOLIO # 013841006005000407

STATE OF FLORIDA COUNTY OF MARTIN

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS, IF AVAILABLE):
Homewood, Lot 4, Block E, 5 S. Ridgeview Rd, Sewalls Pt.

GENERAL DESCRIPTION OF IMPROVEMENT: Brick Paver driveway

OWNER INFORMATION OR LESSEE INFORMATION, IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:
Name: Nelly Aldrich
Address: 5 S. Ridgeview Rd, Sewalls Pt FL
Interest in property: Owner
Name and address of fee simple title holder (If different from Owner listed above): _____

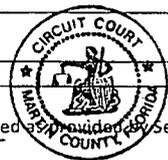
CONTRACTOR'S NAME: Apex Pavers Phone No.: (772) 419-5151
Address: 834 SE Lincoln Ave, Stuart, FL 34994

SURETY COMPANY (if applicable, a copy of the payment bond is attached):
Name and address: _____
Phone No.: _____ Bond amount: _____

LENDER'S NAME: _____ Phone No.: _____
Address: _____

Persons within the State of Florida designated by owner upon whom copies of other documents may be served as provided by Section 713.13 (1) (a) 7, Florida Statutes:

STATE OF FLORIDA
MARTIN COUNTY
BOND AMOUNT: _____
THIS IS TO CERTIFY THAT THE
FOREGOING 4 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL
MARSHA EWING, CLERK
BY [Signature] Phone No.: _____ D.C.
DATE 02/10/12



Name: _____ Phone No.: _____
Address: _____

In addition to himself or herself, owner designates _____ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.
Phone number of person or entity designated by Owner: _____

Expiration date of Notice of Commencement: _____
(the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): _____

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

Under penalty of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief.

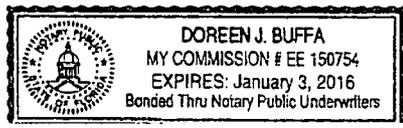
[Signature]
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager/Attorney-in-fact
Owner
Signatory's Title/Office

The foregoing instrument was acknowledged before me this 10 day of February, 20 12

By: Kelly Aldrich as Owner for _____
Name of person Type of authority (e.g. officer, trustee) Party on behalf of whom instrument was executed

[Signature]
Notary's Signature Personally known or produced identification
Type of identification produced _____

(Print, Type, or Stamp Commissioned Name of Notary)



INSTR # 2315757
OR BK 02560 PG 0282
Pg 0282; (1pg)
RECORDED 02/10/2012 03:08:50 PM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY C Oliveri

**RIGHT OF WAY DRIVEWAY COVENANT
FOR MATERIAL OTHER THAN BROOM FINISHED CONCRETE OR ASPHALT**

STATE OF FLORIDA PERMIT NUMBER _____
COUNTY OF MARTIN

THIS COVENANT, made by Kelly Aldrich and legal owners
(hereinafter "The Owners") of the property described as: Lot 4, Block E, according to the Plat of
Homewood, as recorded in Plat Book _____, Page _____, of the Public Records of Martin County,
Florida, also known as S S. RIDGEVIEW RD, SEWALLS Pt
(Street address)

WHEREAS, the Owners have applied for a permit to construct a driveway of Brick Pavers
construction, a portion of which will be constructed in the Town right-of-way, and such construction will not be of asphalt
or regular broom finish concrete, typical for driveways in right-of-way, and such construction will not be of asphalt or
regular broom finish concrete, typical for driveways in right-of-way authorized by the Town of Sewall's Point or of
driveway materials which the Town constructs, repairs, or replaces when it performs activities in its rights-of ways; and

WHEREAS, the Owners desire to construct the driveway and wish to recognize that the Town of Sewall's Point shall
have no responsibility to replace the driveway if it performs any activity on the right-of-way.

NOW THEREFORE, in return for the benefits that will accrue from the construction of their driveway, and in
accordance with the criteria for permits for constructing driveways other than those types aforementioned through
Land Covenant right-of-way, The Owners of the above described property hereby agree and covenant that the Town of
Sewall's Point shall not bear any responsibility for replacement of such driveway located within the right-of-way on this
said property, should the need arise.

The Owners agree and covenant that the cost of replacement of the driveway, if required, will be borne by the
Owners, their heirs, assigns and successors. This Covenant shall run with the land.

Kelly L Aldrich
OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 10 DAY OF Feb 20 12

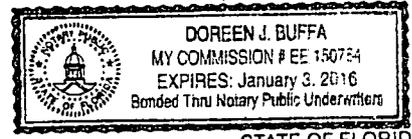
BY Kelly Aldrich

PERSONALLY KNOWN OR PRODUCED ID _____

TYPE OF ID _____

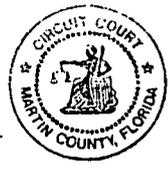
Doreen J. Buffa
NOTARY SIGNATURE

THIS COVENANT MUST BE RECORDED AT THE CLERK'S OFFICE AND THE RECORDED COPY
SUBMITTED TO THE BUILDING DEPARTMENT PRIOR TO ISSUING CERTIFICATE OF OCCUPANCY OR A
FINAL DRIVEWAY INSPECTION.



STATE OF FLORIDA
MARTIN COUNTY

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



BY: [Signature] D.C.
DATE: 2/10/12

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FIELD COPY

CERTIFIED TO:

SUNTRUST BANK, SOUTH FLORIDA, N.A.
ATLANTIC COASTAL TITLE CORPORATION
FIDELITY NATIONAL TITLE INSURANCE
COMPANY OF NEW YORK
MATTHEW SCOTT JAMES PC

RIDGEVIEW

ROW=50'

DESCRIPTION

LOT 4, BLOCK E HOMEWOOD A SUBDIVISION OF LOTS 16, 17 AND 18 PLAT OF ARBELLA ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 3, PAGE 29, OF THE PUBLIC RECORDS OF PALM BEACH COUNTY, MARTIN COUNTY, FLORIDA, AMENDED PLAT OF HOMEWOOD FILED JANUARY 11, 1956 AND RECORDED IN PLAT BOOK 3, PAGE 35, OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

SAID LANDS SITUATE IN MARTIN COUNTY, FLORIDA.

STREET ADDRESS: 5 RIDGEVIEW DRIVE

LOT 5

INSTALL SAND-SET BRICK PAVERS

DRIVEWAYS THAT TRANSVERSE THE PUBLIC ROW MUST NOT RESTRICT OR RE-DIRECT THE FLOW OF STORMWATER - PROVIDE SWALE OR APPROVED CULVERT PIPE - SEE DETAIL

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

NO. HIGHER THAN 5'

LEGEND

- A - ARC
- ASPH. - ASPHALT
- C - CALCULATED
- CH - CHORD
- C/L - CENTERLINE
- CH - CONCRETE MONUMENT
- Δ - DELTA
- D - DESCRIPTION
- D.E. - DRAINAGE EASEMENT
- FD. - FOUND
- G.W. - GUT WIRE
- I.P. - IRON PIPE
- I.R. & C. - IRON ROD & CAP
- L.P. - LIGHT POLE
- M - MEASURED
- M & W - MAIL WASHER
- O.E. - OVERHEAD ELECTRIC
- P - PLAT
- PAV. - PAVEMENT
- P.C. - POINT OF CURVE
- P.C.C. - POINT OF COMPOUND CURVE
- P.P. - POWER POLE
- P.R.C. - POINT OF REVERSE CURVE
- P.T. - POINT OF TANGENT
- P.C.P. - PERMANENT CONTROL POINT
- P.R.M. - PERMANENT REFERENCE MARKER
- R - RADII
- ROW - RIGHT OF WAY
- U.E. - UTILITY EASEMENT
- H.P. - HIGH POINT
- BLK. - BLOCK
- B.M. - BENCHMARK
- F.T. - FINISHED FLOOR
- SET I.R. & C. - SET IRON ROD & CAP LN # 4953
- CONC. - CONCRETE
- GPS - NOT TO SCALE

SURVEYOR'S CERTIFICATE:

THIS CERTIFIES THAT A SURVEY OF THE PROPERTY DESCRIBED HEREON WAS MADE UNDER MY SUPERVISION AND THAT THE SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS IN CHAPTER 61G17-6, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES, AND, THAT THE SRETCH HEREON IS A TRUE AND ACCURATE REPRESENTATION THEREOF TO THE BEST OF MY KNOWLEDGE AND BELIEF. SUBJECT TO NOTES AND NOTATIONS SHOWN HEREON.

FLOOD ZONE A10 ELEV. = 9.0
FIRM PANEL 120164 0002C
DATED APRIL 3, 1984

NOTES:

- 1) REPRODUCTIONS OF THIS SKETCH ARE NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.
- 2) LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THIS OFFICE FOR RIGHTS-OF-WAY EASEMENTS OF RECORD, OWNERSHIP, MURPHY ACT DEEDS, OR ADJOINING DEEDS.
- 3) LAND DESCRIBED SHOWN HEREON WAS PROVIDED BY THE CLIENT OR HIS/HER AGENT.
- 4) NO ATTEMPT WAS MADE BY THIS OFFICE TO LOCATE SUBSURFACE IMPROVEMENTS OR ENCROACHMENTS OTHER THAN THOSE SHOWN HEREON.
- 5) UNDERGROUND UTILITIES NOT LOCATED.
- 6) BASE OF BEARINGS IS THE CENTERLINE OF RIDGEVIEW DRIVE AS SHOWN ON THE AMENDED PLAT OF HOMEWOOD, RECORDED IN PLAT BOOK 3, PAGE 35, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.

TOWN OF SEWALL'S POINT

REVIEWED FOR COMPLIANCE

DATE: 10/7/97

DATED 10/7/97

GERALD W. TANISKY

PROFESSIONAL REGISTRATION NO. 4464

BOUNDARY SURVEY W/INTERIOR IMPROVEMENTS PREPARED FOR: SUNBANK/TREASURE COAST

DRAWN: G.W.T.
CHECKED: G.W.T.
DATE: 5-3-95
SCALE: 1"=20'
INR # 25-253

TREASURE COAST LAND SURVEYORS
PROFESSIONAL LAND SURVEYORS
3250 CANDICE AVE. BOX 113
JENSEN BEACH FLORIDA 34957

REVISIONS	BY	DATE
RE-SURVEYED	D.A.T.	10-7-97

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 2-21-12 Page 1 of 6

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9403	Allen 171 S Levee Rd Knauss Crane	AC Final	Pass	Close INSPECTOR <i>J</i>
9984	Pryce 22 FIELDWAY o/o	POOR FINAL	Pass	Close INSPECTOR <i>J</i>
9996	Castro 22 S SPT RD CARDINAL Roofing	ROOF FINAL	Pass	Close INSPECTOR <i>J</i>
10016	Nelme 46 S. SPT RD BANTON	U.G. ELECT	Pass	→ PENDING VOLTAGE DROP Close INSPECTOR <i>J</i>
10002	Zayas 10 COPAIRE FL Screen Doors	SCREEN FINAL	Fail	PENDING BOND WIRE CONT. INSP INSPECTOR <i>J</i>
10026	Schwartz 70 N. SEWALLS Pt RD SPILLER POOLS	POOL STEEL / BOND & M.D	PASS	INSPECTOR <i>J</i>
10003	Apex 5 K... APEX	ROOF FINAL	Pass	Close INSPECTOR <i>J</i>

10741
RE-ROOF



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

BUILDING PERMIT CARD

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

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	10741	DATE ISSUED:	01/28/2014
SCOPE OF WORK:	REROOF		
CONTRACTOR:	STEVE FRONTERA ROOFING		
PARCEL CONTROL NUMBER:	0138410060050000407	SUBDIVISION	HOMEWOOD LOT 4
CONSTRUCTION ADDRESS:	5 SOUTH RIDGEVIEW		
OWNER NAME:	ALDRICH		
QUALIFIER:	STEVE FRONTERA	CONTACT PHONE NUMBER:	772 971-9022

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

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

24 HOUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	10741
ADDRESS	5 SOUTH RIDGEVIEW
DATE 01/28/2014	SCOPE OF WORK REROOF

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

ACCESSORY PERMIT	Declared Value:	\$	19001.56
Total number of inspections @ \$100.00 each	3		300.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	4.50
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	4.50
Road impact assessment: (.04% of construction value - \$5 min.)		\$	7.60
TOTAL ACCESSORY PERMIT FEE:		\$	376.00

*Pd 2/5/14
 OK 3387*

Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: 10741

Date: 01/28/2014

OWNER/LESSEE NAME: aldrich Phone (Day) _____ (Fax) _____
 Job Site Address: S South Ridgeview City: _____ State: _____ Zip: _____
 Legal Description: L-38-41-006-005-00040-7 Parcel Control Number: Homewood Lot 4 BIK E
 Fee Simple Holder Name: _____ Address: _____
 City: sewall's Pt State: FL Zip: _____ Telephone: _____

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

WILL OWNER BE THE CONTRACTOR?
 (If yes, Owner Builder questionnaire must accompany application)
 YES _____ NO X
Has a Zoning Variance ever been granted on this property?
 YES _____ (YEAR) _____ NO _____
 (Must include a copy of all variance approvals with application)

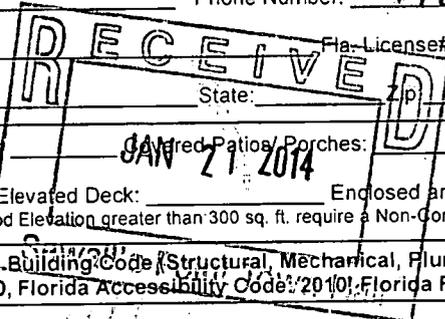
COST AND VALUES: (Required on ALL permit applications)
 Estimated Value of Improvements: \$ 19,001.56
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
 Estimated Fair Market Value prior to improvement: \$ _____
 (Fair Market Value of the Primary Structure only, Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Steve Frontera Roofing Phone: 1-800-520-3880 Fax: 772-336-8568
 Qualifiers name: Steve Frontera Street: PO Box 9661 City: PSC State: FL Zip: 34985
 State License Number: CCC1326920 OR: Municipality: _____ License Number: _____
 LOCAL CONTACT: Steve Frontera Phone Number: 772-971-9022

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

AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Red Patios/Porches: _____ Enclosed Storage: _____
 Carport: _____ Total under Roof: 4000 Elevated Deck: _____ Enclosed area below BFE*: _____
 * Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

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



WARNINGS TO OWNERS AND CONTRACTORS:

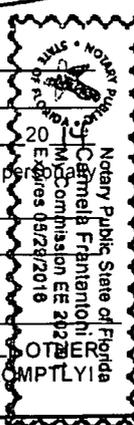
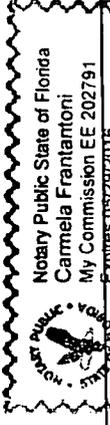
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST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

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

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

OWNER / AGENT / LESSEE - NOTARIZED SIGNATURE: _____
 State of Florida, County of: Martin
 On This the 21st day of January, 2014
 by Kelly L. Aldrich who is personally known to me or produced _____
 As identification: Dr. Lic
 Notary Public
 My Commission Expires: 5/29/16

CONTRACTOR / LICENSEE NOTARIZED SIGNATURE: _____
 State of Florida, County of: Martin
 On This the 21st day of January, 2014
 by Steve Frontera who is personally known to me or produced _____
 As identification: _____
 Notary Public
 My Commission Expires: 5/29/16



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 1/22/2014 10:36:03 AM EST

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-006-005-00040-7	17672	5 S RIDGEVIEW RD, SEWALL'S POINT	\$262,710	1/18/2014

Owner Information

Owner(Current)	ALDRICH KELLY L & NORMA JEAN
Owner/Mail Address	12241 SALUKIS RD SUMNER IL 62466
Sale Date	12/15/2011
Document Book/Page	2553 1849
Document No.	2309379
Sale Price	231500

Location/Description

Account #	17672	Map Page No.	SP-04
Tax District	2200	Legal Description	HOMEWOOD, LOT 4 BLK E
Parcel Address	5 S RIDGEVIEW RD, SEWALL'S POINT		
Acres	.4660		

Parcel Type

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

Assessment Information

Market Land Value	\$165,000
Market Improvement Value	\$97,710
Market Total Value	\$262,710



THIS IS TO CERTIFY THAT THE
FOREGOING PAGE(S) IS A TRUE
AND CORRECT COPY OF THE ORIGINAL
DOCUMENT AS FILED IN THIS OFFICE

INSTR # 2436329
OR BK 2698 PG 1555
(1 Pgs)
RECORDED 01/21/2014 02:52:45 PM
CAROLYN TIMMANN
MARTIN COUNTY CLERK

BY: Carolyn Timmann D.C.
DATE: 1/21/14

NOTICE OF COMMENCEMENT

To be completed when construction value exceeds \$2,500.00

PERMIT #: _____ TAX FOLIO # 01-38-41-006-005-00040-7

STATE OF FLORIDA COUNTY OF MARTIN

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

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

Homewood Lot 4 BIK E

GENERAL DESCRIPTION OF IMPROVEMENT:

Reroof

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

Name: Aldrich Kelly

Address: 5 South Ridgeview Rd SE Walls Point FL

Interest in property: owner

Name and address of fee simple title holder (if different from Owner listed above):

CONTRACTOR'S NAME: Steve Frantz Phone No.: 1-800-520-3880
Address: P.O. Box 9661 Port St Lucie FL 34985

SURETY COMPANY (If applicable, a copy of the payment bond is attached):

Name and address: _____

Phone No.: _____ Bond amount: _____

LENDER'S NAME: _____ Phone No.: _____

Address: _____

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

Name: _____ Phone No.: _____

Address: _____

In addition to himself or herself, owner designates _____ of _____ to

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

Phone number of person or entity designated by Owner: _____

Expiration date of Notice of Commencement:

(the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): _____

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

Under penalty of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief.

Kelly L. Aldrich Kelly L. Aldrich
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager/Attorney-in-fact

Signatory's Title/Office

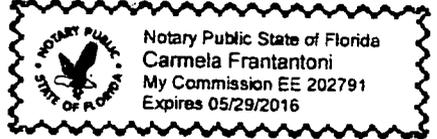
The foregoing instrument was acknowledged before me this 21st day of January, 2014

By: Kelly L. Aldrich as homeowner for _____
Name of person Type of authority (e.g. officer, trustee) Party on behalf of whom instrument was executed

Carmela Frantantoni
Notary's Signature

Personally known or produced identification
Type of identification produced _____

(Print, Type, or Stamp Commissioned Name of Notary)





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/11/2013

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

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

PRODUCER The Contractors Choice Agency PO Box 13645 Chandler AZ 85248	CONTACT NAME: Jon Rock PHONE (A/C No. Ext.): (800) 918-3584 E-MAIL ADDRESS: Jon@nginsuranceonline.com	FAX (A/C No.): (877) 684-9951
	INSURER(S) AFFORDING COVERAGE	
INSURED Steve Frontera Roofing Inc 612 N. Orange Ave Suite A-5 Jupiter FL 33458	INSURER A: Preferred Contractors Insurance NAIC # 12497	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: CL09121505707 REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADOL	SUBR	INSR	WYD	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY					12/15/2013	12/15/2014	EACH OCCURRENCE \$ 1,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR							MED EXP (Any one person) \$ 5,000	
								PERSONAL & ADV INJURY \$ 1,000,000	
								GENERAL AGGREGATE \$ 1,000,000	
								PRODUCTS - COMP/OP AGG \$ 1,000,000	
	GENL AGGREGATE LIMIT APPLIES PER:								\$
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC							\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident) \$	
	<input type="checkbox"/> ANY AUTO							BODILY INJURY (Per person) \$	
	<input type="checkbox"/> ALL OWNED AUTOS							BODILY INJURY (Per accident) \$	
	<input type="checkbox"/> HIRED AUTOS							PROPERTY DAMAGE (Per accident) \$	
								\$	
	UMBRELLA LIAB							EACH OCCURRENCE \$	
	<input type="checkbox"/> EXCESS LIAB							AGGREGATE \$	
								\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							WC STATUTORY LIMITS OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)							E.L. EACH ACCIDENT \$	
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - EA EMPLOYEE \$	
								E.L. DISEASE - POLICY LIMIT \$	

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

CERTIFICATE HOLDER

(772) 220-4765

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

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Robert Rock/JDA

ACORD 25 (2010/05)

INS025 (2010/05) 01

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STEVF-1

OP ID: SN



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/27/14

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

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

PRODUCER Stuart Insurance, Inc. 3070 S W Mapp Palm City, FL 34990 Susan Naumann	Phone: 772-286-4334 Fax: 772-286-9389	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS:																				
	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>Bridgefield Employers Ins. Co.</td> <td>10701</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Bridgefield Employers Ins. Co.	10701	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:	
INSURER(S) AFFORDING COVERAGE		NAIC #																				
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INSURER D:																						
INSURER E:																						
INSURER F:																						
INSURED Steve Frontera Roofing, Inc. Steve Frontera PO Box 9661 Port St Lucie, FL 34985																						

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADOLTSUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR <hr/> GEN'L AGGREGATE LIMIT APPLIES PER. <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	83052849	07/25/13	07/25/14	<input checked="" type="checkbox"/> WC STATU. TORT. LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. OISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

CERTIFICATE HOLDER TOWSP-1 Town of Sewalls Point 1 South Sewalls Point Road Sewalls Point, FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	--



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/11/2013

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

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

PRODUCER The Contractors Choice Agency PO Box 13645 Chandler AZ 85248	CONTACT NAME: Jon Rock PHONE (A/C No. Ext): (800) 918-3584 FAX (A/C. No): (877) 684-9951 E-MAIL ADDRESS: Jon@nginsuranceonline.com														
INSURED Steve Frontera Roofing Inc 612 N. Orange Ave Suite A-5 Jupiter FL 33458	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: center;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: center;">NAIC #</th> </tr> <tr> <td>INSURER A: Preferred Contractors Insurance</td> <td style="text-align: center;">12497</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Preferred Contractors Insurance	12497	INSURER B:		INSURER C:		INSURER D:		INSURER E:		INSURER F:	
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INSURER A: Preferred Contractors Insurance	12497														
INSURER B:															
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															

COVERAGES **CERTIFICATE NUMBER:** CL09121505707 **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			PC81442-03	12/15/2013	12/15/2014	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-ECT <input type="checkbox"/> LOC						GENERAL AGGREGATE \$ 1,000,000
	AUTOMOBILE LIABILITY						PRODUCTS - COMP/OP AGG \$ 1,000,000
	<input type="checkbox"/> ANY AUTO						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per person) \$
	<input type="checkbox"/> HIRED AUTOS						BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS						PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> NON-OWNED AUTOS						\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED						\$
	RETENTION \$						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER (772) 220-4765 The Town of Sewall's Point 1 S. Sewall's Point Rd. Sewall's Point, FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Robert Rock/JON
--	---



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

RE-ROOF CERTIFICATION

PERMIT # _____
 CONTRACTOR'S NAME: Steve Frontera PHONE #: 1-810-520-3880 FAX: 772-336-8568

OWNER'S NAME: aldrich

CONSTRUCTION ADDRESS: S South ridgeview CITY sewells STATE FL

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

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

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

ROOF TYPE: HIP BOSTON-HIP GABLE FLAT OTHER

ROOF PITCH: 5 /12 SLOPE

ROOF DECK: * SHEATH-OVER - (APPLYING PLYWOOD PANELS OVER EXISTING SPACED
 RE-SHEATH - (REMOVAL OF SPACED SHEATHING/PLYWOOD FOR APPLICATION OF
 NEW PLYWOOD PANELS) - REQUIRES USE OF MINIMUM PLYWOOD AS PER
 FLORIDA BUILDING CODE "2004".

SPACED SHEATH FILL-IN - SPACES BETWEEN EXISTING SPACED-
 SHEATHING BOARD MAY BE FILLED-IN WITH BOARDS OF THE SAME
 SIZE AND THICKNESS TO PROVIDE A CLOSELY FITTED SOLID DECK
 NAIL NEW BOARDS AS PER FLORIDA BUILDING CODE "2004".

EXISTING DECK TO REMAIN/REPAIRED & RENAILED

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

PROPOSED NEW ROOF COVERING: Shingles

MANUFACTURER _____ PRODUCT NAME _____ PRODUCT APPR # _____

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

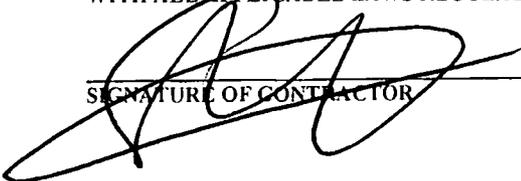
*WHEN CONCRETE/CLAY TILES REPLACE ANY OTHER TYPE OF ROOF COVERING, THE EXISTING TRUSSES SHALL BE
 INSPECTED BY A FLORIDA REGISTERED ARCHITECT OR ENGINEER TO VERIFY ADEQUACY OF THE TRUSSES TO SUPPORT
 INCREASED DEAD LOADS. AN ENGINEERING INSPECTION REPORT SHALL BE SUBMITTED WITH THE PERMIT APPLICATION.

PROPOSED FLASHING: GALV./STEEL ALUMINUM COPPER OTHER _____

RIDGEVENT TO BE INSTALLED: YES NO

DESCRIPTION OF WORK: re roof shls To shls

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.

 DATE: 1-21-14
 SIGNATURE OF CONTRACTOR



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

LICENSED GENERAL, BUILDING OR RESIDENTIAL CONTRACTORS' REROOF WINDSTORM LOSS MITIGATION COMPLIANCE AFFIDAVIT

A RESIDENTIAL STRUCTURE VALUED AT \$300,000 OR MORE SHALL COMPLY WITH THE FOLLOWING:

- Roof to wall connections must be enhanced up to 15% additional cost of the reroofing cost.
- A certified or registered general, building or residential contractor compliance affidavit must accompany the re-roof permit application and submit details to perform the following:
 1. Sufficient amount of eave sheathing shall be removed to view 6 ft. of roof rafters.
 2. Wherever a strap is missing or an existing strap has fewer than 4 fasteners on each end of connection with the wall, the connection shall be strengthened by adding:
 - a. Metal connectors, clips, straps and fasteners to achieve an uplift capacity as specified in Table 201.3 OR
 - b. Approved strap ties or right angle gusset brackets with a minimum uplift capacity of 500 lbs shall be installed to the top plate or masonry wall below
 - c. Refer to sections 201.3.1 to 201.3.4 for prescriptive requirements.

A RESIDENTIAL STRUCTURE VALUED AT \$750,000 OR MORE SHALL COMPLY WITH THE FOLLOWING:

When any activity requiring a building permit that is applied for on or after July 1, 2008, and for which the estimated cost is \$50,000 or more for a building that is located in the wind borne debris region as defined in s. 1609.2 of the Florida Building Code, Building: Opening protections as required within the Florida Building Code, Building or Florida Building Code, Residential for new construction shall be provided.

TO BE COMPLETED IF INSURED VALUE OF SINGLE FAMILY IS OVER \$300,000.00 AND WAS PERMITTED PRIOR TO MARCH 1, 2002.

YEAR PERMITTED 1973 INSURED OR P.A. IMPROVED VALUE \$ 267,710.00
 DETAILS OF MITIGATION WORK TO BE PERFORMED (Add additional sheets if necessary):

JOB SITE ADDRESS: _____

QUALIFIER NAME: _____

COMPANY NAME: _____

X _____

Qualifier's Signature

Date: 1/21/14

Sworn to and subscribed before me

this 21st day of January 2014

By Steve Frontera

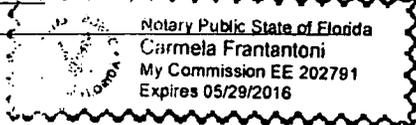
Carmela Frantantoni

Notary Public, State of Florida

Personally known to me

Produced ID _____

Type: _____



LICENSE NO.: _____

PHONE NO.: _____

X _____

Owner's Signature

Date: 1/21/14

Sworn to and subscribed before me

this 21st day of January 2014

By Kelly L. Aldrich

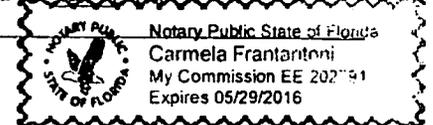
Carmela Frantantoni

Notary Public, State of Florida

Personally known to me _____

Produced ID _____

Type: _____





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

**RESIDENTIAL REROOF WINDSTORM LOSS
MITIGATION CERTIFICATION (FLORIDA STATUTE 553.844)**

ALL RE-ROOFS REGARDLESS OF VALUE SHALL COMPLY WITH THE FOLLOWING:

Re-nailing: All sheathing and decking shall be re-nailed per section 201.1 and a secondary water barrier installed.

- Existing fasteners that are 8d clipped head, round head or ring shank and spaced 6 in. or less o.c. may be counted. Additional fasteners shall be 8d ring shank nails with round heads spaced at 6 in. o.c. along framing.
- Indicate below which method is to be used to satisfy the secondary water barrier requirements:

_____ All joints in roof sheathing shall be covered with a minimum of 4 in. strip of self-adhering polymer modified bitumen tape. Wood deck and self-adhering tape shall be covered by one layer of approved underlayment.

~~_____~~ Entire roof deck shall be covered with an approved self-adhering polymer modified bitumen cap sheet. No additional underlayment is required.

_____ Outside of the HVHZ, an underlayment complying with section 1507.2.3 of the Florida Building Code, Building fastened as described below or a layer of asphalt impregnated approved #30 felt shall be installed. The felt is to be fastened with 1" round plastic cap or metal cap nails, attached to a nailable deck in a grid pattern of 12 inches (305 mm) staggered between the overlaps, with 6-inch (152 mm) spacing at the overlaps. For slopes of 2:12 to 4:12 an additional layer of felt shall be installed in a single-fashion and lapped 19" and fastened as described above. (No additional underlayment shall be required over the top of this sheet.)

_____ Exception: An approved 30# underlayment installed per HVHZ using nails and tin-tags and covered with an approved self-adhering polymer modified bitumen cap sheet or an approved cap sheet hot-moped shall be deemed to meet the requirements for secondary water barrier.

Residential Structures valued at \$300,000 or more shall comply with the following:

- Roof to wall connections must be enhanced up to 15% additional cost of the re-roofing cost.
- A certified or registered general, building or residential contractor compliance affidavit must accompany the re-roof permit application and submit details to perform the following:
 1. Sufficient amount of eave sheathing shall be removed to view 6 ft. of roof rafters.
 2. Wherever a strap is missing or an existing strap has fewer than 4 fasteners on each end of connection with the wall, the connection shall be strengthened by adding:
 - a. Metal connectors, clips, straps and fasteners to achieve an uplift capacity as specified in Table 201.3 OR
 - b. Approved strap ties or right angle gusset brackets with a minimum uplift capacity of 500 lbs shall be installed to the top plate or masonry wall below
 - c. Refer to sections 201.3.1 to 201.3.4 for prescriptive requirements.



DEPARTMENT OF PERMITTING, ENVIRONMENT, AND REGULATORY AFFAIRS (PERA)
BOARD AND CODE ADMINISTRATION DIVISION

MIAMI-DADE COUNTY
PRODUCT CONTROL SECTION
11805 SW 26 Street, Room 208
Miami, Florida 33175-2474
T (786) 315-2590 F (786) 315-2599
www.miamidadecounty.gov/pera

NOTICE OF ACCEPTANCE (NOA)

CertainTeed Corporation
1400 Union Meeting Road
Blue Bell, PA. 19422

SCOPE:

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

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

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

DESCRIPTION: Presidential Shake, Presidential Shake AR, Presidential TL, and Presidential TL AR Shingles

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

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

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

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

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

This renews and revises NOA #11-0415.07 and consists of pages 1 through 4.
The submitted documentation was reviewed by Alex Tigera.



NOA No.: 12-0305.18
Expiration Date: 06/14/16
Approval Date: 06/07/12

ROOFING ASSEMBLY APPROVAL

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

SCOPE

This approves Presidential Shake, Presidential Shake AR, Presidential TL, and Presidential TL AR shingles as manufactured by Certaineed Corporation described in this Notice of Acceptance.

PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Presidential Shake & Presidential Shake AR	14- $\frac{1}{4}$ " x 40"	TAS 110	A heavy weight proprietary saw tooth asphalt shingle laid in a staggered pattern to achieve a dimensional profile. Available with or without fungus resistant granules.
Presidential TL & Presidential TL AR	14- $\frac{1}{4}$ " x 40"	TAS 110	A heavy weight proprietary saw tooth asphalt shingle laid in a staggered pattern to achieve a dimensional profile. Available with or without fungus resistant granules.

MANUFACTURING LOCATIONS:

1. Shakopee, MN.

EVIDENCE SUBMITTED

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Underwriters Laboratories, Inc.	ASTM D3462	11NK08333	04/15/12
Underwriters Laboratories, Inc.	TAS 107	06CA11166	05/23/06
PRI Asphalt Technologies	TAS 100	PRJ06108	05/30/06
Underwriters Laboratories, Inc.	ASTM E 108	99NK29506	11/23/99
Underwriters Laboratories, Inc.	ASTM D3462	99NK29506	11/29/99



NOA No.:12-0305.18
 Expiration Date: 06/14/16
 Approval Date: 06/07/12
 Page 2 of 4

LIMITATIONS

1. Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
2. Shall not be installed on roof mean heights in excess of 33 ft.
3. All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9N-3 of the Florida Administrative Code.

INSTALLATION

1. Shingles shall be installed in compliance with Roofing Application Standard RAS 115.
2. Flashing shall be in accordance with Roofing Application Standard RAS 115
3. The manufacturer shall provide clearly written application instructions.
4. Exposure and course layout shall be in compliance with Detail 'A', attached.
5. Nailing shall be in compliance with Detail 'B', attached.

LABELING

1. Shingles shall be labeled with the Miami-Dade Seal as seen below, or the wording "Miami-Dade County Product Control Approved".

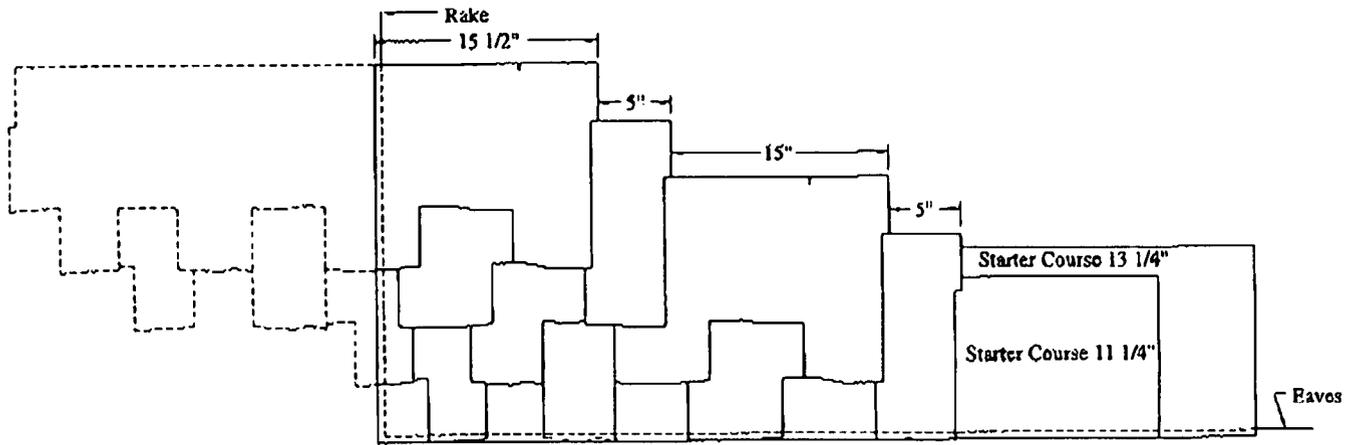
**BUILDING PERMIT REQUIREMENTS**

1. Application for building permit shall be accompanied by copies of the following:
 - 1.1 This Notice of Acceptance.
 - 1.2 Any other documents required by the Building Official or the applicable code in order to properly evaluate the installation of this system.

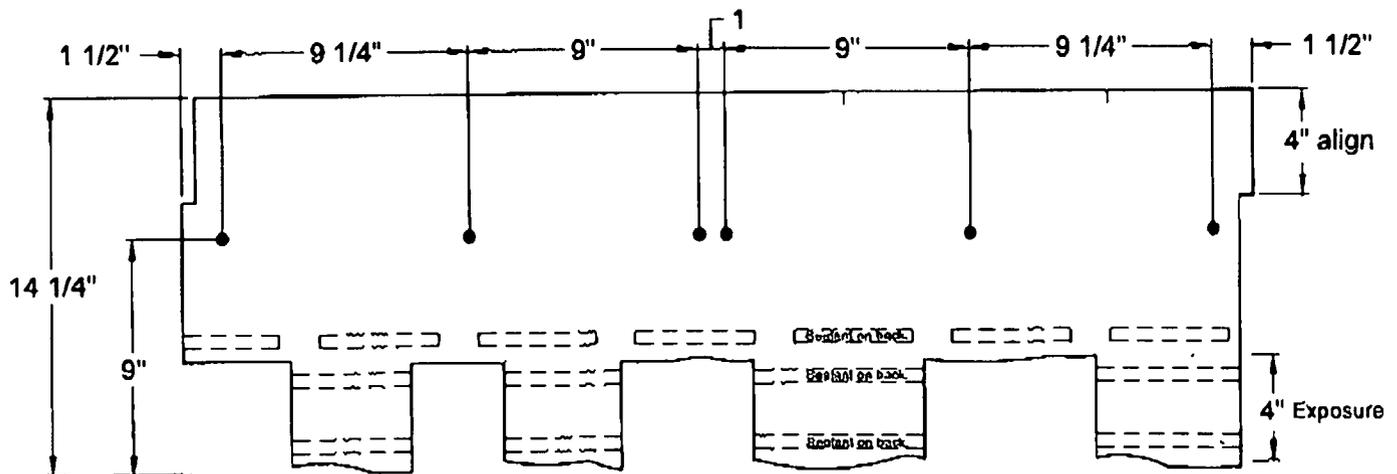


NOA No.:12-0305.18
Expiration Date: 06/14/16
Approval Date: 06/07/12
Page 3 of 4

DETAIL A



DETAIL B



END OF THIS ACCEPTANCE



NOA No.:12-0305.18
 Expiration Date: 06/14/16
 Approval Date: 06/07/12
 Page 4 of 4



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

EVALUATION REPORT

Carlisle Coatings & Waterproofing
 900 Hensley Lane
 Wylie, TX 75098

Evaluation Report C39180.12.11-R1
FL6785-R4
Date of Issuance: 12/09/2011
Revision 1: 04/22/2012

SCOPE:

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

DESCRIPTION: CCW Roof Underlayments

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

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

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

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

This Evaluation Report consists of pages 1 through 4.

Prepared by:

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



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

CERTIFICATION OF INDEPENDENCE:

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

ROOFING COMPONENT EVALUATION:

1. SCOPE:

Product Category: Roofing

Sub-Category: Underlayment

Compliance Statement: CCW Roof Underlayments, as produced by Carlisle Coatings & Waterproofing, have demonstrated compliance with the following sections of the Florida Building Code through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

2. STANDARDS:

Section	Property	Standard	Year
1507.2.4, 1507.2.9.2, 1507.5.3	Physical Properties	ASTM D1970	2001

3. REFERENCES:

Entity	Examination	Reference	Date
MTI (TST2508)	Physical Properties	PX02M0A	01/17/2011
MTI (TST2508)	Physical Properties	PX16M0A	01/18/2011
MTI (TST2508)	Physical Properties	PX13M0B	01/18/2011
M-D (CER1592)	HVHZ Compliance	09-0630.13	08/12/2009
ICC-ES (EVL2396)	2006 IBC Compliance	ESR-1556	08/01/2007
UL, LLC. (QUA9625)	Quality Control	Inspection Report, R18678	02/20/2012

4. PRODUCT DESCRIPTION:

- 4.1 ~~CCW WIP 100 is a self-adhering, fiberglass reinforced, granule-surfaced, rubberized asphalt roof underlayment.~~
- 4.2 CCW WIP 250 is a self-adhering, fiberglass reinforced, film surfaced, rubberized asphalt roof underlayment.

5. LIMITATIONS:

- 5.1 This Evaluation Report is not for use in the HVHZ.
- 5.2 Fire Classification is not part of this report; refer to current Approved Roofing Materials Directory for fire ratings of this product.
- 5.3 CCW Roof Underlayments may be used with any prepared roof cover where the product is specifically referenced within FBC approval documents. If not listed, a request may be made to the AHJ for approval based on this evaluation combined with supporting data for the prepared roof covering.
- 5.4 Allowable roof covers applied atop the underlayments are follows:

Underlayment	Asphalt Shingles	Nail-On Tile	Foam-On Tile	Metal	Wood Shakes & Shingles	Slate & Synthetic Slate/Shake
CCW WIP 100	Yes	No	No	No	No	No
CCW WIP 250	Yes	No	No	Yes	No	No

5.5 Allowable substrates are noted below:

5.5.1 Direct-Bond to Deck:

Self-adhering membranes applied to:

- New untreated plywood;
- Primed new untreated plywood;
- Existing plywood;
- Primed existing plywood;

Note: While not required, CCW-702 or CAV-GRIP primer may be used when deemed appropriate or when temperatures are below 40°F.

5.5.2 Bond to Mechanically Attached Base Layer:

Self-adhering membranes applied to:

- ASTM D226, Type I or II felt;

For installations under mechanically attached prepared roof coverings, base layer shall be attached per minimum codified requirements.

5.6 Exposure Limitations:

5.6.1 CCW WIP 100 and CCW WIP 250 shall not be left exposed for longer than 30-days after installation.

6. INSTALLATION:

6.1 CCW Roof Underlayments shall be installed in accordance with Carlisle Coatings & Waterproofing published installation requirements subject to the Limitations set forth in Section 5 herein and the specifics noted below.

6.2 Re-fasten any loose decking panels, and check for protruding nail heads. Sweep the substrate thoroughly to remove any dust and debris prior to application. Prime the substrate (if applicable) with CCW-702 or CAV-GRIP Primer.

6.3 CCW WIP 100 and CCW WIP 250:

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

6.3.2 While not required, CCW-702 or CAV-GRIP primer may be used when deemed appropriate. Priming is required when temperatures are below 40°F.

6.3.3 Cut WIP roofing underlayment into 10 to 15 ft lengths. Remove 2 to 3 ft of release film and align the edge of the membrane, sticky-side down, so it overhangs the drip edge by 3/8-inch. Continue to remove release film and press as you move across the roof. Use a hand roller and/or hand pressure to press into place.

6.3.4 Horizontal seams should be minimum 3.5-inches, configured to shed water. Vertical seams should be 6-inches and staggered not less than 2-ft from vertical seams in the course below.

6.3.5 Consult Carlisle Coatings & Waterproofing for steep slope & back nailing requirements.

6.3.6 For Valleys and Ridges: Cut WIP 100 roofing underlayment into manageable lengths. Align over the center of the valley, hip or ridge. Remove release film. Press the middle of the membrane first before working toward the edges. For open valleys, cover roofing underlayment with metal valley liners.



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

RE: Permit # 10741

Date 2-5-2014

Inspection Affidavit

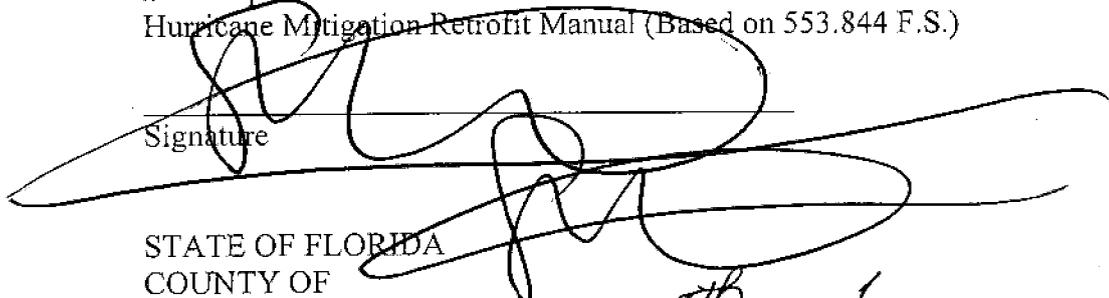
I Steve Frontera, licensed as a(n) Contractor* /Engineer/Architect,
 (please print name and circle Lic. Type) FS 468 Building Inspector*

License #: CCC 1326920

On or about 2/6/2014, I did personally inspect the roof
 (Date & time)

deck nailing and/or secondary water barrier work at _____,
 (circle one) (Job Site Address)

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

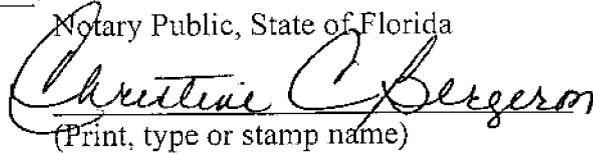
Signature 

STATE OF FLORIDA
 COUNTY OF _____

Sworn to and subscribed before me this 5th day of FEBRUARY, 2014

By STEVEN V. FRONTERA

Notary Public, State of Florida


 (Print, type or stamp name)



Commission No.: _____

Personally known _____ or
 Produced Identification

Type of identification produced. FL D/L F653-798-62-467-0

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

HOLIDAY

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection ~~Mon~~

Tue

Wed

Thur

Fri

2/18-14 Page ___ of ___

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10710	Darrow 7 Oak Hill Way JMC Contracting	Initial Stem wall - Steel Inspect. Pump Pole	PASS PASS	Waug 287-0390 * CALL FPL INSPECTOR <i>JA</i>
	West 7 Palmetto Dr. All American Roofing	Reinspect - Final	See Fri 2/14/14	Alenda 781-4410 NOTIFIED 2/14/14 PASSED ON 2/14/14 INSPECTOR <i>JA</i>
	Carl King 30 Rio Vista Kenneth Leppard - Leppard Co. Inc.	needs to meet you at site prior to permit app	<i>OK</i>	772-370-7548 * After 9:30 AM Tues. INSPECTOR
	30 Sewalls	FRAME & ROOF TRADES	ALL PASS EXCEPT PLUMB.	NOB REMOY INSPECTOR <i>JA</i>
10741	Medway 5 S. RIDGEVIEW S. FONTANA ROOFING	DRUM IN INITIAL	--- PASS	--- INSPECTOR <i>JA</i>
				R404.4 INSPECTOR 1610.
				1605.1.1 1807.2 INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **3-11-14** Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10791	BLOSSOM	A/E FINAL		Mike
Between 9+10A	158 S River Rd Nesler	w/ladder	Pass	CLOSE
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10791	ACACIA	FINAL ROOF		
	5 S. RIDGEVIEW		Pass	CLOSE
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10750	GARY	dry - IN		
	36 RIO VISTA DR	METAL	Pass	
	ROOF AUTHORITY			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10788	CHAPMAN	FINAL SHUTTER		
	11 PALM PD		Pass	CLOSE
	EXPERT SHUTTER			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
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				INSPECTOR