

46 Rio Vista Drive

TOWN OF SEWALL'S POINT FLORIDA

Permit No. 1191

Date 5 Aug 81

APPLICATION FOR A PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

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, electrical and air-conditioning layouts, and at least two elevations, as applicable. A copy of the property deed is required for new house or commercial building construction.

Owner GUSTAV SCHICKEDANZ, TRUSTEE Present address 2300 S.E. OCEAN BLVD.
Phone 283-0060 STUART, FL 33494

General contractor SCHICKEDANZ BROS FLA. Address SAME AS ABOVE
Phone SAME AS ABOVE

Where licensed STATE License No. CGCA 15077

Plumbing contractor HEIDINGER License No. COUNTY 024

Electrical contractor HOFF License No. " 00011

Air-conditioning contractor RECH License No. " 00123

Describe the building, or alteration to existing building SINGLE FAMILY
Dwelling w/ Pool

Name the street on which the building, its front building line and its front yard will face RIO VISTA DRIVE

Subdivision RIO VISTA Lot No. 91 Area _____

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet 1504

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 63,000⁰⁰

Cost of permit \$ 345⁰⁰ Plans approved as submitted _____ or, as marked _____

I understand that this permit is good for 12 months from the date of its issue and that the building for which this permit is issued must be completed within that time and in accordance with the approved plans. 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. I agree that the building site will be clean and rough-graded before a Certificate of Occupancy is sought, and, moreover, that I shall be 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 with the above requirements may result in a Building Inspector or a Town Commissioner "Red-tagging" the building project.

Contractor Roger Shugart, SCHICKEDANZ BROS

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 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, as required by the Town's zoning ordinance.

Owner Roger Shugart for G. Schickedanz Trustee

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

TOWN RECORD

Date submitted _____

Approved by Building Inspector (date) 8/11/80

Inspector's initials LS

Approved by Town Commissioner (date) 8/11/80

Commissioner's initials Shugart

Certificate of Occupancy issued (date) _____



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR SEPTIC TANK PERMIT
AND FINAL INSPECTION FORM

Permit VOID if well or septic system is installed in a location other than area permitted.
PRIOR HEALTH DEPARTMENT APPROVAL REQUIRED

Authority
Chapter 387, 386, 387, 388
Chapter 100, 6, 7, 8, 9, 10

Permit No. 120
County FLORIDA
City FLORIDA
Address FLORIDA
Name FLORIDA
Phone FLORIDA
Date FLORIDA

Handwritten notes:
2
33
*2
*3

Water Table At
Hard Pan At
Clay At
Muck At
Other At
Soil Classification Shice
Percolation Rate FLORIDA

Attached Data

INSTALLATION SPECIFICATIONS

Drain Tile (Linear Ft.) FLORIDA
Sand Filter Size (Sq. Ft.) FLORIDA
Absorption Bed Size (Sq. Ft.) FLORIDA
Total Drain Field Size (Sq. Ft.) FLORIDA

Approval
Disapproval

8-4-60
Date Processed

Robert W. ...
Signature of Sanitarian

MARTIN
Sanitarian

FINAL INSPECTION DATA

Date and Time of Inspection FLORIDA
Inspector's Name FLORIDA
Permit No. FLORIDA
Address FLORIDA
Type of Tank (Concrete, Fiberglass, etc.) FLORIDA
No. of Tanks FLORIDA
Grease Trap Size FLORIDA
Sand Filter Size FLORIDA
Who Made Tank (Name) FLORIDA

RECOMMENDATION Approval Disapproval

Inspector's Name FLORIDA
Signature FLORIDA
Date FLORIDA

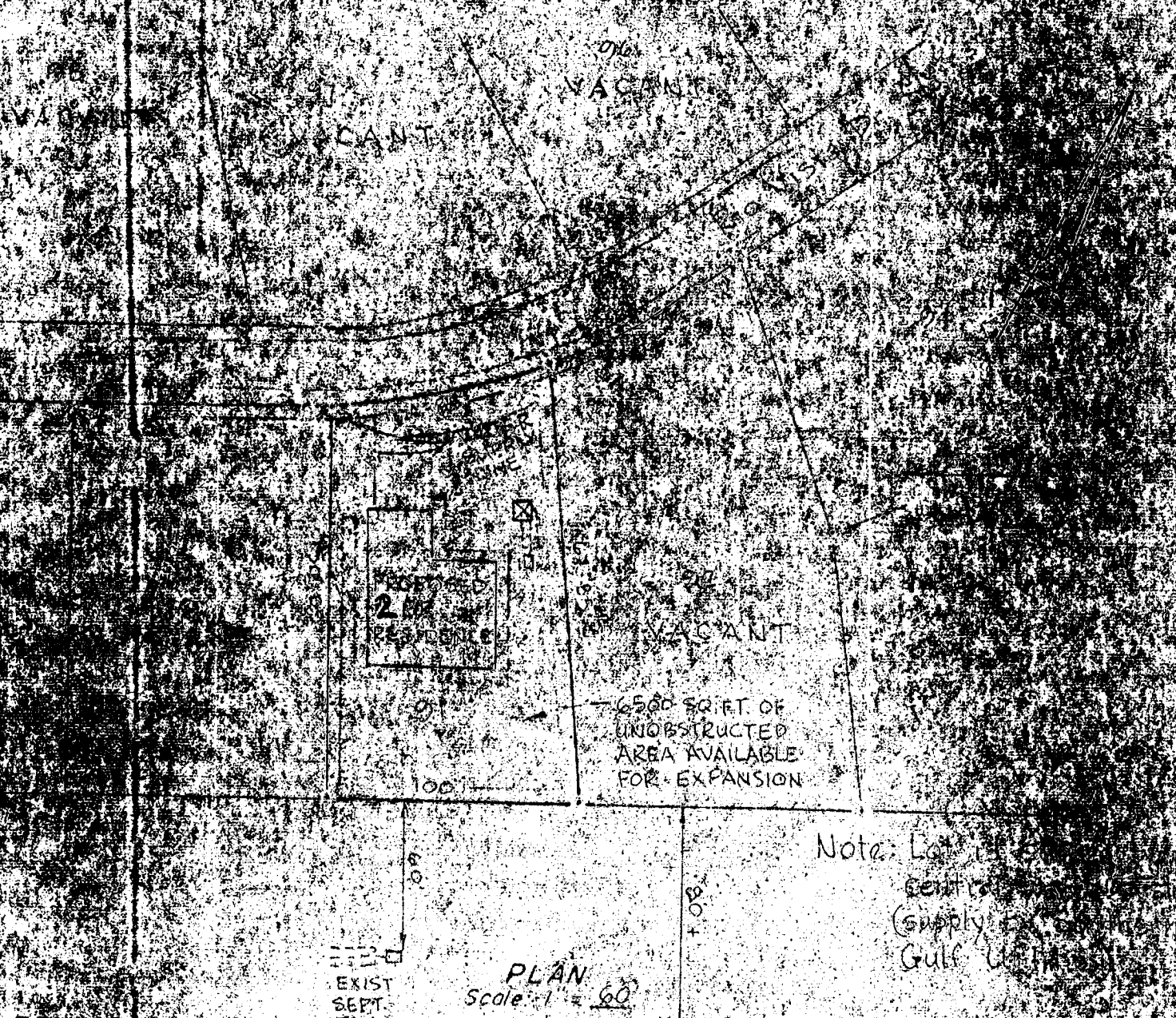
City FLORIDA
County FLORIDA

Handwritten signature:
Arthur Speedy

INDIVIDUAL SEWAGE DISPOSAL FACILITIES
DATA SHEET

Location: RIO VISTA DR., RIO VISTA S/D SEWALL'S POINT Applicant: SCHICKEDANZ BROS. OF FLA.
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

1. GREY SAND
2. MOSTLY WHITE SAND
3. MOSTLY PLANK SAND

LEGEND

- Drainage Pattern
- Proposed Septic Tank and Drain Field
- Proposed Water Supply
- Existing Water Supply
- Soil Borings and Test Locations

Soil Identification: CLASS I GROUP SW
Soil Characteristics: DRY SANDY SOIL

Parcelation Rate: 0.16 min/inch
Water Table Depth: 6'
Water Table Depth During Wet Season: 6'
Compacted Fill: 0 Reqd
Compacted Fill Checked By: _____

CERTIFIED BY: Arthur J. [Signature]
FLORIDA PROFESSIONAL No. 3343
Date: _____
Sheet 2 of 2

FRASER ENGINEERING AND TESTING

PHONE: (305) 461-7508

3504 INDUSTRIAL 33 RD STREET

FORT PIERCE, FLORIDA - 33450

1191

Report
of
DENSITY OF SOIL IN PLACE
ASTM 2167-66

Client: Schickendenz Bros., Constr.
2300 S.E. Ocean Blvd., Stuart

Contractor: Client

Date: September 23, 1980

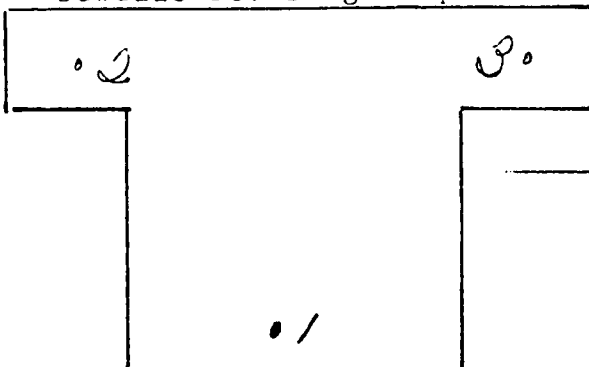
Site: Lot 96, Rio Vista
#49 Rio Vista Drive

Test No.	Location	Elevation	In Place Dry Density	Moisture Density Relationship		Percent Compaction
				Test No.	Max. Dry Density	
37288	Map Location #1	0 - 1'	103.0	37287	104.6	98.5
37289	Map Location #2	0 - 1'	105.4	37287	104.6	100.8
37290	Map Location #2	1 - 2'	99.8	37287	104.6	95.4
37291	Map Location #3	0 - 1'	102.3	37287	104.6	97.8
37292	Map Location #3	1 - 2'	98.5	37287	104.6	94.2

All elevations below slab grade.

Copies

Client - 1
Sewells Pt. Bldg. Dept. - L



Respectfully submitted,

(Handwritten Signature)

ALEXANDER H. FRASER, P. E.

Report
 of
 MOISTURE DENSITY RELATIONSHIP

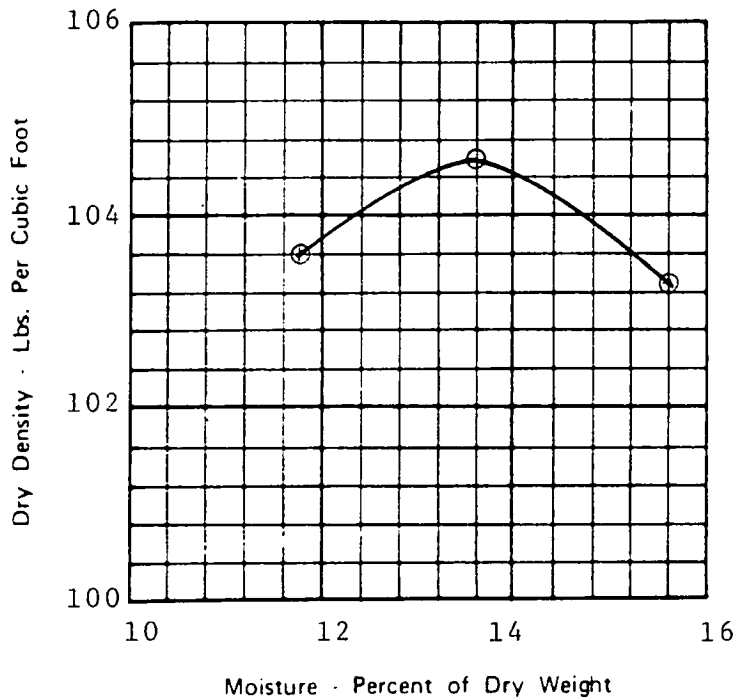
ASTM 1557-70

Client: Schickendenz Bros. Constr.

Date: September 23, 1980

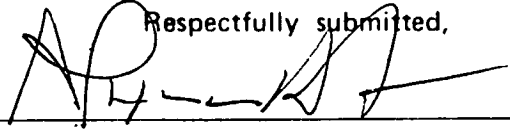
Contractor: Client

Site: Lot 96, Rio Vista
 #49 Rio Vista Drive



Test No.	Test Method	Sample Location	Optimum Moisture %	Max Dry Density-P.C.F.	Soil Description
37287	A	Composite	13.6	104.6	Orange fine sand.

Copies Client - 1
 Sewells Pt. Bldg. Dept. - 1

Respectfully submitted,

 ALEXANDER H. FRASER, P. E.

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 1/21/81

This is to request that a Certificate of Approval for Occupancy be issued to G. Silverthorn
For property built under Permit No. 1191 Dated 8/14/80 when completed in
conformance with the Approved Plans.

Signed

RECORD OF INSPECTIONS

Item	Date	Approved by
Set-backs and footings		
Rough plumbing	9/3/80, 11/7/80	
Slab	9/6/80	Jan
Perimeter beam	9/16/80	
Close-in, roof and rough electric	11/7/80	
Final Plumbing	1/21/81	
Final Electric	1/21/81	

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector J. Maguire date 1/21/81

Approved by Building Commissioner J. C. Strubell date 1/21/81

Utilities notified 1/21/81 date

Original Copy sent to _____

(Keep carbon copy for Town files)

1202

POOL

1202

Permit No. 1202

Date _____

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

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

Owner SCHICKEDANZ BROS Present address 2300 SE OLEAN BLVD ^{STUART}
 Phone 283-0000 STUART, FLA
 Contractor LOU DEN POBS Address 4306 S. US #1
 Phone 465-2100 (283-4000) FT PIERCE, FLA
 Where licensed MANITOWOC & STATE License number CFC 010400
 Electrical contractor _____ License number _____
 Plumbing contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Swimming pool to 12' x 28' (14' x 28' pool)

State the street address at which the proposed structure will be built: 1000 SE DART
46 Rio Vista Dr.

Subdivision RIO VISTA Lot No. 91

Contract price \$ 6,900 Cost of Permit \$ \$35

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 Robert J. Haney

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 Regan Morgan

TOWN RECORD Date submitted 9/15/80
Approved: JAM Building Inspector Date

Approved: B Commissioner Date 9/16/80

Final Approval given: 3/10/81 JAM Date Steel & Grounding 9/25/80
Pat's Steel 11/25/80

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.

1202

1610

SOLAR

WATER HEATER

RECEIVED

SEP 8 1983

Ans'd.....

TOWN OF

SEWALL'S POINT

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.

Permit No. 2783
Date 9/8/83

#1610

APPLICATION FOR BUILDING PERMIT

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 DAVID Schiller Present Address 46 Rio Vista Dr
Phone 287-2509

-General Contractor Seacoast Dist of Stuart Address P.O. Box 782
Phone 286-2183 POBt SALERNO FLA 33492

Where Licensed Martin County License No. 3765-00377

-Plumbing Contractor NA License No. _____

-Electrical Contractor NA License No. _____

Describe building or other structure, or alteration to existing structure Solar Hot

Water and Solar Pool heating on REAR ROOF PER FSEC approved System - 4'x10' Cell + Solar Tank + 440ft. of Solar wall

Name the street on which the building, its front building line and its front yard will face. NA

Subdivision _____ Lot No. _____ Area _____

-Building Area, inside walls (excluding garage, carport, porches, etc.)...square feet _____

-Contract Price (excluding land, carpeting, appliances, landscaping, etc.) \$ 3200⁰⁰

-Total Cost of Permit \$ 16⁰⁰

-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 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. 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

General Contractor Kenneth H. Zangle

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 David M. Schiller

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

TOWN RECORD

Date submitted 9/8/83

Approved: J. Mazza Building Inspector Date 9/9/83

Approved: J.C. Strubell Commissioner Date 9/9/83

Certificate of Occupancy issued Not Req. Date _____

Final Inspection 10/12/83

#1610

Approval of these plans in no way
 Form 9026 relieves the contractor or builder of
 complying with the Town of Sewall's
 Point's Ordinances, the South Florida
 RESIDENTIAL Building Code and the State of Florida
 Model Energy Efficiency Building Code. JAW 9/9/83

SOLAR WATER HEATER CALCULATION: FLAT PLATE SYSTEMS

COLLECTOR PERFORMANCE FACTORS: ATTACH FSEC TEST CERTIFICATION

RI = Intermediate Temperature Rating in BTU/day = $\frac{(38,900)}{40} = 972$
 Area of Collector (in Square Feet)

Table 9-6 FACTORS FROM TESTS BY FLORIDA SOLAR ENERGY CENTER

RI of 900 and above, collector Class 1
 RI between 800 and 899, collector Class 2
 RI between 720 and 799, collector Class 3
 RI between 640 and 719, collector Class 4
 RI between 560 and 639, collector Class 5
 RI 559 and below, collector Class 6

Table 9-7 AREA OF COLLECTOR PER GALLONS OF HOT WATER DEMAND PER DAY

$\frac{AOC}{GPD} = \frac{40}{70} = 0.57$
 AOC = Effective Area of Collector
 GPD = Hot Water Demand = 30 GPD for 1st Bedroom + 20 GPD per additional Bedroom

Table 9-8 SOLAR FRACTION "FS"

AOC GPD	COLLECTOR CLASSES					
	1	2	3	4	5	6
0	0	0	0	0	0	0
0.1	.22	.19	.18	.16	.16	.12
0.2	.40	.34	.32	.29	.28	.22
0.3	.55	.46	.43	.39	.37	.30
0.4	.65	.57	.52	.45	.45	.37
0.5	.79	.66	.59	.56	.51	.43
0.6	.86	.74	.66	.62	.57	.49
0.7	.90	.80	.72	.68	.62	.54
0.8	.93	.85	.77	.74	.67	.59
0.9	.95	.88	.82	.78	.71	.63
1.0	.97	.91	.85	.82	.75	.67
1.1	.99	.92	.87	.85	.78	.71
1.2	1.00	.94	.89	.87	.81	.74
1.3	1.00	.96	.91	.89	.84	.77
1.4	1.00	.97	.92	.90	.85	.80
1.5	1.00	.98	.93	.92	.87	.83

Table 9-9 TILT ANGLE DEGRADATION FACTOR ("TDF")

TILT ANGLE	TDF
0	0.90
6	0.95
16	0.99
26	1.00
36	0.99
46	0.94
56	0.88
66	0.80
76	0.71
90	0.54

Table 9-10 ORIENTATION DEGRADATION FACTOR ("ODF")

ANGLE FROM SOUTH	ODF
0 (South)	1.00
10	0.98
20	0.97
30	0.95
40	0.93
50	0.91
60	0.88
70	0.84
80	0.78

Table 9-11 HEAT EXCHANGER COEFFICIENT (HEC)

DIRECT SYSTEM	1.00
SYSTEM WITH HEAT EXCHANGER	0.96

OVERALL SOLAR FRACTION (OSF)

OSF = (FS) X (TDF) X (ODF) X (HEC)
 = $(0.87) \times (0.99) \times (1.00) \times (1.00) = 0.83$

Building Permit Number: _____

46 Rio Vista Dr.

Address of Solar Installation

Sunport Dist. of Tuont Inc
Donnell G. Ziegler, pres.
 Certified By (Solar Contractor) 9-6-83
 Date

Form Completion Checked By _____ Date _____
 (Building Official)

FLORIDA SOLAR ENERGY CENTER

300 State Road 401, Cape Canaveral, Florida 32920. Telephone: (305) 783-0300



Approved Solar Energy System

FSEC # S1024b

Revised Jan 82

Revised Nov 81

DISTRIBUTOR

Approval of these plans in no way relieves the contractor or builder of

Solar Development, Inc.
3630 Reese Avenue
Riviera Beach, FL 33404

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.

Jan 9/9/83

The system listed below was evaluated by the Florida Solar Energy Center (FSEC) in accordance with the Florida Standards Program for Solar Domestic Water and Pool Heating Systems (FSEC-GP-80-7) and was found to meet the minimum standards established by FSEC.

Description

38,900 SEE NEW SHEET

Collector	Model	Units	Total Rating
	→ 1 SDI SD7CRW(4x10)	1	37,000 Btu
	2 SDI SD7CR	2	31,400 Btu
	3 SDI SD7CRW	2	32,600 Btu
	4 SDI SD6A	2	35,200 Btu

Tank	Model	Capacity
<input checked="" type="checkbox"/> Direct	→ 1 Rheem 81V-80-1	80 gals.
<input type="checkbox"/> Int. Heat Exch.	2	
	3	
	4	

Pump	Model	Power Draw	Rated Power
	→ 1 Taco, Inc. 006B-2	75 watts	1/40 H.P.
	2 March Mfg. 809	30 watts	1/100 H.P.
	3 Grundfos UM25-18SU	75 watts	1/35 H.P.
	4		

Controller	Model
<input checked="" type="checkbox"/> Differential Temperature	→ 1 del Sol Control Corp. 02B
<input type="checkbox"/> Absolute Temperature	2 HI Square, Inc. H-1503-A
<input type="checkbox"/> Thermosiphon	3 Heliotrope General DTT-90
<input type="checkbox"/> Other	4

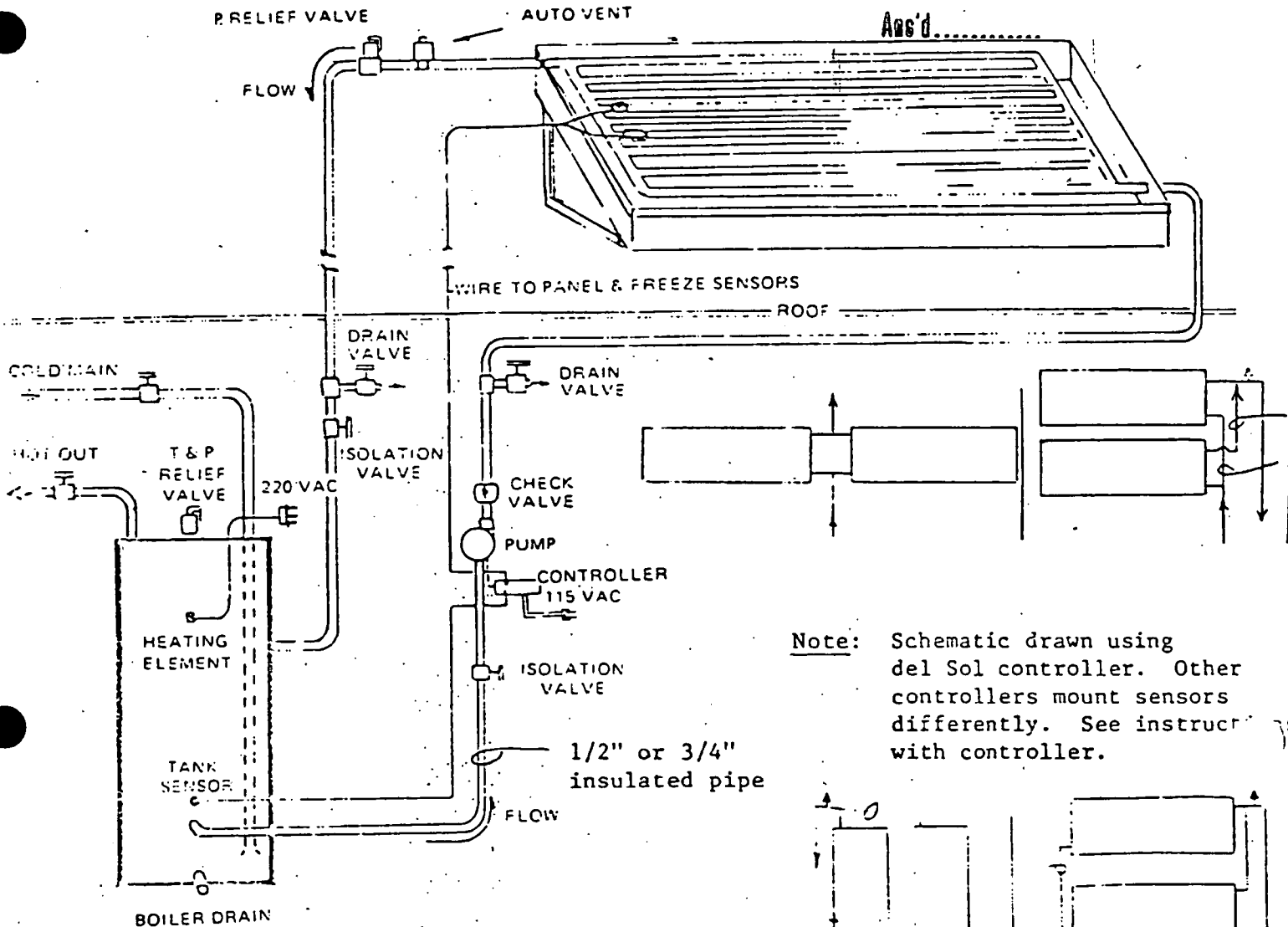
Freeze protection by automatic recirculation or manual draindown during power failure.
Optional freeze protection method manual draindown.

Other	
Major Components	1
In addition to above	2
	3
	4

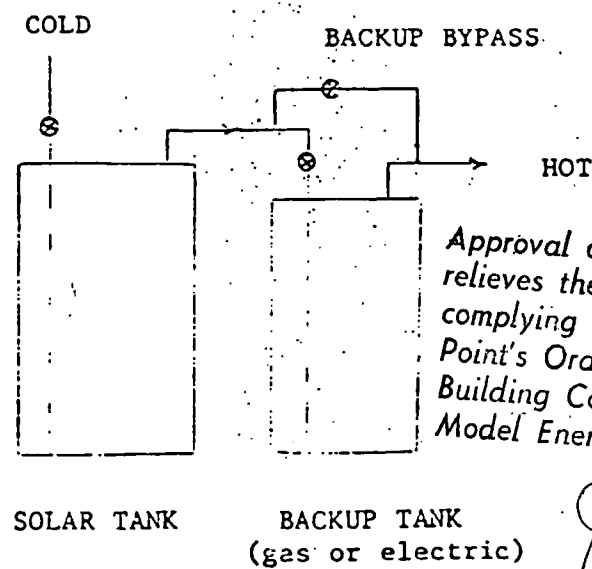
If further information is required you may contact the Florida Solar Energy Center at the above address.

RECEIVED

SEP 8 1983



Note: Schematic drawn using del Sol controller. Other controllers mount sensors differently. See instructions with controller.



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.

SCHEMATIC FOR SYSTEMS 400, 66D, 80D, 120D2, and 120D3

SOLAR DEVELOPMENT, INC.
Garden Industrial Park
3630 Reese Avenue
Riviera Beach, FL 33404
Tel. 305/842-8935

John 9/9/83

SOLAR PRE-HEAT OPTION

SUMMARY INFORMATION SHEET

FLORIDA SOLAR ENERGY CENTER

300 STATE ROAD 401, CAPE CANAVERAL, FLORIDA 32920, (305) 783-0300



April 1983
FSEC #82186

MANUFACTURER / INSTALLER

MANUFACTURER

Solar Development, Inc.
3630 Reese Avenue
Riviera Beach, FL 33404

INSTALLER

Suncoast Dist. of Stuart
P. O. Box 782
Port Salerno, FL 33492
286-2183

Collector Model

SD7CRW(4x10)

This solar collector was tested by the Florida Solar Energy Center (FSEC) in accordance with prescribed methods and was found to meet the minimum standards established by FSEC. The purpose of the tests is to verify initial performance conditions and quality of construction only. The resulting certification is not a guarantee of long term performance or durability.

DESCRIPTION

Gross Length	3.064 meters	10.05 feet
Gross Width	1.226 meters	4.02 feet
Gross Depth	0.098 meters	0.32 feet
Gross Area	3.755 square meters	40.42 square feet
Transparent Frontal Area	3.532 square meters	38.02 square feet
Volumetric Capacity	3.8 liters	1.0 gallons
Weight (empty)	77.7 kilograms	171.3 pounds
Recommended Flow Rate	95 ml/s	1.5 gpm
Maximum Operating Pressure	552 kPag	80 psig
Maximum Wind Load	2633 Pa	55 psf
Number of Cover Plates	One	
Flow Pattern	Parallel	
Number of Flow Tubes	Eleven	

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.

Jan 9/183

MATERIALS

Enclosure	Aluminum frame, aluminum back
Glazing	Tempered low iron glass, 0.48 cm thick
Absorber	Copper tubes welded to copper fins
Absorber Coating	Black chrome selective coating
Insulation	Fiberglass, 2.5 cm thick; Foil faced polyisocyanurate, 2.5 cm thick

THERMAL PERFORMANCE

Tested per ASHRAE 93-77

Incident Angle Modifier $K_{\tau\alpha} = 1.0 - 0.31 \left(\frac{1}{\cos\theta} - 1 \right)$

Efficiency Equations

$\eta = 74.4 - 373 (T_i - T_a)/I$

$\eta = 74.4 - 65 (T_i - T_a)/I$

$\eta = 74.2 - 340 (T_i - T_a)/I - 466 [(T_i - T_a)/I]^2$

$\eta = 74.2 - 59 (T_i - T_a)/I - 14 [(T_i - T_a)/I]^2$

Units of $T_i - T_a/I$ are $\text{Wat}/^\circ\text{C}\cdot\text{m}^2$

Units of $T_i - T_a/I$ are $\text{Btu}/^\circ\text{F}\cdot\text{ft}^2\cdot\text{hr}$

RATING

The collector has been rated for energy output on measured performance and an assumed standard day. Total solar energy available for the standard day is 5045 watt-hours/m² (1600 Btu/ft²) distributed over a 10 hour period.

Output energy ratings for this collector based on the second-order efficiency curve are:

Collector Temperature

Collector Temperature	Energy Output
Low Temperature, 35°C (95°F)	48,000 Kilojoules/day 45,500 Btu/day
Intermediate Temperature, 50°C (122°F)	41,000 Kilojoules/day 38,900 Btu/day
High Temperature, 100°C (212°F)	20,500 Kilojoules/day 19,400 Btu/day

RECEIVED
SEP 8 1983

Ass'd.....

2712

FENCE

Permit No. _____

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 Manny S. Rutts Present Address 46 Rio Vista

Phone 286-5625 408697-0770

Contractor Wisley Fence Co Address 1509 No 43 st

Phone 464 4968

Where licensed Martin's Co. License number SP 00001

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: replace rotten wood fence

46 Rio Vista

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

Subdivision Rio Vista S/D Lot number 91 Block number _____

Contract price \$ 11,500.00 Cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

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

Wilbur Lubkin for
Contractor Gordon Wisley Fence Co

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

Owner _____

TOWN RECORD

Date submitted _____ Approved: _____
Building Inspector _____ Date _____

Approved: _____ Commissioner _____ Date _____
Final Approval given: _____ Date _____

Certificate of Occupancy issued (if applicable) _____
Date _____

SP1282

Permit No. _____

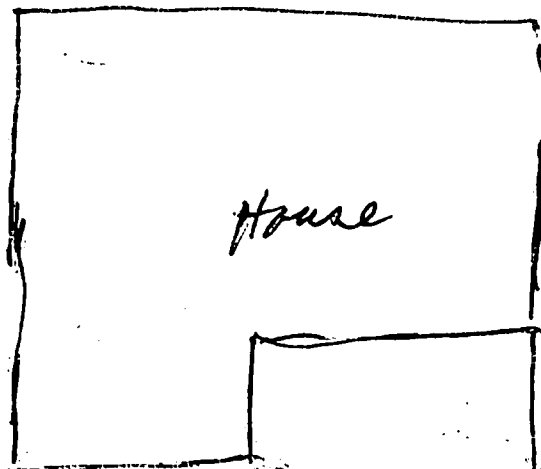
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.

Existing wood fence

6' High

Pin

51' new fence



64' of fence
to remove

72'
4' high.

Rio Vista

Proposal

Page No. _____

of _____

Pages _____

WRISLEY'S FENCE CO.

P.O. BOX 1864
FORT PIERCE, FLORIDA 34954
Phone: 464-4968

PROPOSAL SUBMITTED TO		PHONE	DATE
STREET		JOB NAME	
CITY, STATE AND ZIP CODE		JOB LOCATION	
ARCHITECT	DATE OF PLANS		JOB PHONE

We hereby submit specifications and estimates for:

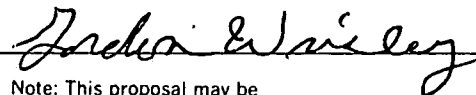
We Propose hereby to furnish material and labor — complete in accordance with above specifications, for the sum of:

_____ dollars (\$ _____).

Payment to be made as follows:

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

Authorized
Signature _____



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

Acceptance of Proposal — The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date of Acceptance: _____

Signature _____

Signature _____

7477

REROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/12/05

BUILDING PERMIT NO. 7477

Building to be erected for SHUTTS Type of Permit REROOF

Applied for by REROOF AMERICA (Contractor) Building Fee _____

Subdivision RIO VISTA Lot 40 Block _____ Radon Fee _____

Address 46 RIO VISTA DR Impact Fee _____

Type of structure SFR A/C Fee _____

Parcel Control Number: _____ Electrical Fee _____

1238410020000091060000 Plumbing Fee _____

Amount Paid 120.00 Check # 4370 Cash _____ Other Fees (_____) 1

Total Construction Cost \$ 275 TOTAL Fees 120.00

Signed Sue Brubaker Signed Jana Simmons

Applicant

Town Building Official

PERMIT

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

INSPECTIONS

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

Town of Sewall's Point BUILDING PERMIT APPLICATION

Date: 03.22.05

Permit Number: _____

OWNER/TITLEHOLDER NAME: Nancy Shotts Phone (Day) 772-223-7959 (Fax) _____

Job Site Address: 46 Rio Vista Drive City: Sewalls Point State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Rio Vista S/D lot 40 Parcel Number: 12-38-41-002-000-00910-6

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

Description of Work To Be Done: remove tile and replace with metal and torch down.

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 27,514.00 (Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

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

CONTRACTOR/Company: ReRoof America, Corp. Phone: 772-464-3636 Fax: 772-461-4167

Street: 3794 Oleander Ave City: Ft. Pierce State: FL Zip: 34996

State Registration Number: _____ State Certification Number: CCC1326253 Martin County License Number: _____

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____ Mechanical: _____ State: _____ License Number: _____ Plumbing: _____ State: _____ License Number: _____ Roofing: _____ State: _____ License Number: _____

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

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 3104 Garage: _____ Covered Patios: _____ Screened Porch: _____ Carport: _____ Total Under Roof 3100 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)

State of Florida, County of: St. Lucie

This the 4 day of April, 2005

by Nancy Shotts who is personally

known to me or produced

as identification.

My Commission Expires: June 2006 # DD127005

CONTRACTOR SIGNATURE (required)

On State of Florida, County of: St. Lucie

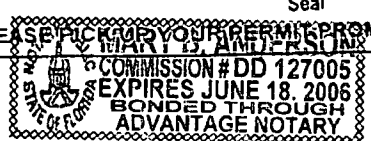
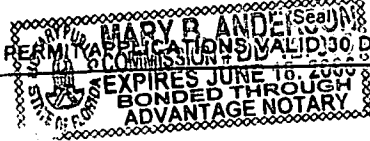
This the 22 day of March, 2005

by John Emrich who is personally

known to me or produced

As identification.

My Commission Expires: June 2006 # DD127005



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

NOTICE OF COMMENCEMENT

Permit No. _____
State of Florida

Property Tax ID No. 75-2427788
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 address if available 46 Rio Vista Drive / PID# 12-38-41-002-000-00910-0
Rio Vista S/D, Lot 91 (code 40 ex expires in 1990)

General description of improvements remove & replace

Owner Nancy Shults

Address 46 Rio Vista Drive, Stuart, FL 34996

Owner's interest in site of improvement _____

Fee Simple Title holder (if other than owner) _____

Address _____

Contractor ReRoof America Corp.

Phone # (772) 464-3636

Address ~~46 Rio Vista~~ 3794 Oleander Ave, Ft. Pierce

Fax # (772) 461-4167

Surety _____

Phone # _____

Address _____

Fax # _____

Amount of Bond _____

Lender _____

INSTR # 1820210

OR PAN # 01989 PG 0483

Address _____

RECORDED 03/08/2005 10:27:24 AM

MARSHA EWING

Persons within the State of Florida designated by Owner upon whom notice of other documents may be served as provided by Section 713.13 (a) 7., Florida Statutes: _____

CLERK OF MARTIN COUNTY, FLORIDA

RECORDED BY M Ferschke

Name _____ Phone # _____

Address _____ Fax # _____

In addition to himself, owner designates _____ of _____

Phone # _____ Fax # _____

to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes. Expiration date of notice of commencement is one year from the date of recording unless a different date is specified.

Nancy Shults
Owner Signature

State of Florida, County of Martin
Acknowledged before me this 4 day of March 2005, by Nancy Shults, who is personally known to me or who has produced _____ as identification.

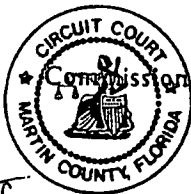
STATE OF FLORIDA
MARTIN COUNTY
Signature of Notary

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

MARSHA EWING, CLERK

BY: M. Anderson D.C.

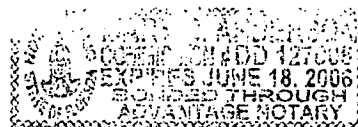
DATE: 2/8/05



M. Anderson
Type or Print Name of Notary

Commission Number 127005

(Seal) 125205



ACORD CERTIFICATE OF LIABILITY INSURANCE		OP ID MA REROO-1	DATE (MM/DD/YYYY) 04/04/05
PRODUCER Monroe & Monroe Insurance Agen 204 Billings Suite 110 Arlington TX 76010 Phone: 817-640-5035 Fax: 817-640-0131		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		INSURERS AFFORDING COVERAGE	NAIC #
Reroof America Corp 2904 Via Esperanza Edmond OK 73013		INSURER A: Clarendon America	
		INSURER B: Southern County Mutual	
		INSURER C: SCOTTSDALE INS CO	
		INSURER D: Mid-Continent Casualty Co.	•
		INSURER E:	

COVERAGES

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

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	HML0004656	04/15/04	04/15/05	EACH OCCURRENCE	\$ 1000000
					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50000
					MED EXP (Any one person)	\$ Excluded
					PERSONAL & ADV INJURY	\$ 1000000
	GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE	\$ 2000000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG	\$ 2000000
B	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	STC543925-3	07/12/04	07/12/05	COMBINED SINGLE LIMIT (Ea accident)	\$ 1000000
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN AUTO ONLY: EA ACC	\$
					AGG	\$
C	EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE	UMS0015661	04/15/04	04/15/05	EACH OCCURRENCE	\$ 1000000
					AGGREGATE	\$ 1000000
						\$
						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS	\$
					OTH-ER	\$
					E.L. EACH ACCIDENT	\$
					E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
D	OTHER Lsd/Rnt Equipmnt	04IM5861	06/07/04	06/07/05	per item	100000
					ded	1000

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

<p>CERTIFICATE HOLDER</p> <p style="text-align: right;">T/SEWAL</p> <p>Town of Sewall's Point 1 S Sewall's Point Road Sewall's Point FL 34996</p>	<p>CANCELLATION</p> <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> 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.</p> <p>AUTHORIZED REPRESENTATIVE <i>Mike Monroe</i></p>
--	---


ACORD. CERTIFICATE OF LIABILITY INSURANCE		OP ID LK RER00-1	DATE (MM/DD/YYYY) 04/05/05
PRODUCER Webb, Young, Webb, Inc. 3007 NW 63 PO Box 22127 Oklahoma City OK 73123 Phone: 405-843-9481		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 Reroof America Corporation 2904 Via Esperanza Edmond OK 73013		INSURERS AFFORDING COVERAGE INSURER A: American Home Assurance INSURER B: American States INSURER C: INSURER D: INSURER E:	NAIC #

COVERAGES

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

INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GENL 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 \$
B		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	01CG751474	03/08/05	03/08/06	COMBINED SINGLE LIMIT (Ea accident) \$ 1000000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY ALTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC 775-51-44	09/30/04	09/30/05	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.I. EACH ACCIDENT \$ 500000 E.I. DISEASE - EA EMPLOYEE \$ 500000 E.I. DISEASE - POLICY LIMIT \$ 500000
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Coverage include in OK IL LA MN MO NE AK AL AR AZ CO CT DC DE FL GA HI IA ID IN KS KY MA MD ME MI MS MT NC NH NJ NM NV NY OR PA RI SC SD TN TX UT VA VT WI

CERTIFICATE HOLDER SEWA002 Town of Sewall's Point 1 S Sewall's Point Road Sewall's Point FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> 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 
--	--

NOTEPAD:

INSURED'S NAME: Reroof America Corporation

REROO-1

PAGE 2

OP:DK

DATE: 04/05/05

This certificate of insurance represents coverage currently in effect any
may or may not be in compliance with any written contract, if applicable



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

EMRICH, JOHN R
REROOF AMERICA CORPORATION
13930 NORTH HARVEY AVENUE
EDMOND OK 73013



STATE OF FLORIDA AC#1816743
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

CCC1326253 01/07/05 04041885

CERTIFIED ROOFING CONTRACTOR
EMRICH, JOHN R
REROOF AMERICA CORPORATION

IS CERTIFIED under the provisions of Ch. 489
Expiration date: AUG 31, 2006 L0501070006

DETACH HERE

AC#1816743

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L0501070006

DATE	BATCH NUMBER	LICENSE NBR
01/07/2005	040418852	CCC1326253

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

EMRICH, JOHN R
REROOF AMERICA CORPORATION
13930 NORTH HARVEY AVENUE
EDMOND OK 73013

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

2004-2005

ACCOUNT 1761-20040041

ST. LUCIE COUNTY OCCUPATIONAL LICENSE

EXPIRES SEP 30, 2005

BOB DAVIS, CPA, CGFO, CFC, ST. LUCIE COUNTY TAX COLLECTOR

ILITIES

CHINES

ROOMS

SEATS

EMPLOYEES 21+

IE OF
INESS

1761 ROOFING/SHEET METAL CONTRACTOR

INESS
ATION

3794 Oleander Avenue
St Lucie County

RENEWAL
XNEW LICENSE
TRANSFER-
ORIGINAL TAX

25.00

AE
LING
RESS

Reroof Amercia Corporation
Emrich, John R
3794 Oleander Avenue
Fort Pierce, FL 34982

CCC1326253

AMOUNT
PENALTY
COLLECTION COST
TOTAL

25.00

243460100640000

PAID BOB DAVIS, TAX COLLECTOR PAID
Please see back for additional information 3/21/05 12:19PM 00001488

P04000134107

2004 1761-20040041
0600 \$25.00

602004 000000000000 0000176120040041 0000 00000002500 000000000000 \$25.00
CK CHANGE \$0.00 5



**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)

**Union Corrugating Company
701 South King Street
Fayetteville, NC 23802-0229**

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: 5V Crimp Metal Roof Panel

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

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

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

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

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

This NOA consists of pages 1 through 5.
The submitted documentation was reviewed by Frank Zuloaga, RRC



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 4/6/05
BUILDING OFFICIAL
Gene Simmons

NOA No.: 02-0322.08
Expiration Date: 04/25/07
Approval Date: 04/25/02
Page 1 of 5

ROOFING ASSEMBLY APPROVAL:

Category: Roofing
Sub-Category: Non-Structural Metal Roofing
Material: Steel
Deck Type: Wood
Maximum Design Pressure -132.5 psf.
Fire Classification Pressure See General Limitation #1

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
SV Crimp Metal Roof Panel	Length: varies Width: 26" (Coverage width : 24") Height: 1/2" Min. Thickness 0.019"	PA 125	Mctal Roof panel coated with various approved coatings of Ceram-A-Star® 900.

TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS:

<u>Product</u>	<u>Dimensions</u>	<u>Product Description</u>	<u>Manufacturer</u>
Fasteners (Panel)	#9	Corrosion resistant, sharp point hex-head screws with neoprene sealing washer.	Generic (with current NOA)

EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Akzo Nobel Coatings, Inc.	Lab Test Certification	ASTM B-117 ASTM G-23	
PRI Asphalt Technologies, Inc.	HTL-001-01-01	PA 100	02/18/02
Hurricane Test Laboratory, Inc.	0293-0102-02	PA 125	01/24/02



NOA No.: 02-0322.08
 Expiration Date: 04/25/07
 Approval Date: 04/25/02
 Page 2 of 5

SYSTEM DESCRIPTION

SYSTEM A-1S:	"5V-Crimp" 26 Ga. Metal Panel
Deck Type:	Wood, Non-insulated
Deck Description:	$1\frac{9}{32}$ " or greater plywood or wood plank.
Slope Range:	2": 12" or greater
Maximum Uplift Pressure:	The maximum allowable design pressure for the 24" wide panel shall be - 132.5 psf.
Deck Attachment:	In accordance with applicable Building Code, but in no case it shall be less than #8 x 2" screws spaced at 6" o. c. <u>Wood sheathing shall be sealed at adjacent joints with continuous bead of urethane sealant.</u>
Underlayment:	Minimum underlayment shall be a ASTM D 226 Type II installed with a minimum 4" side-laps and 6" end-laps. Underlayment shall be fastened with corrosion resistant tin-caps and $1\frac{1}{4}$ " annular ring-shank nails, spaced 6" o.c. at all laps and two staggered rows 12" o.c. in the field of the roll.
Valleys:	Valley construction shall be in compliance with Roofing Application Standard RAS 133 and with Union Corrugating Company's current published installation instructions.
Fire Barrier Board:	For class A or B fire rating, install minimum $\frac{1}{4}$ " thick Georgia Pacific "Dens Deck" (with current NOA) or minimum 4mm thick of Tritex, RockRoof (with current NOA) or $\frac{5}{8}$ " water resistant type X gypsum sheathing with treated core and facer.

Metal Panels and Accessories:

Install the "5V. Steel Roofing Panel" and accessories in compliance with Union Corrugating Company's current published installation instructions and details. Flashing, penetrations, valley construction and other details shall be constructed in compliance with the minimum requirements provided in Roofing Application Standards RAS 133.

5V Roofing Panels shall be fastened with a minimum of #9 Hcx Head Wood corrosion resistant fasteners with sealing washer. Fasteners shall of sufficient length to penetrate through the sheathing a minimum of $\frac{3}{16}$ ". Fasteners shall be place in accordance with fastener detail herein as follows:

1. Panel side ribs shall be fastened along side of the panel inside ribs, one fastener at the overlap and one fastener at the underlap. Center panel rib shall be fastened with one fastener at the overlap side of the panel.
2. All fasteners at center rib, underlap rib, and overlap rib shall be spaced at a maximum of 24 inches o.c. parallel to the roof slope. See detail herein.



NOA No.: 02-0322.08

Expiration Date: 04/25/07

Approval Date: 04/25/02

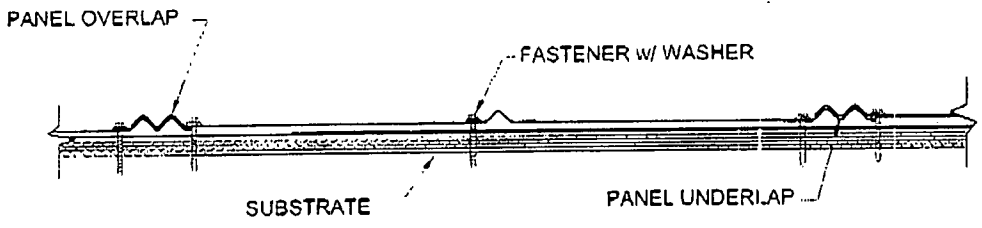
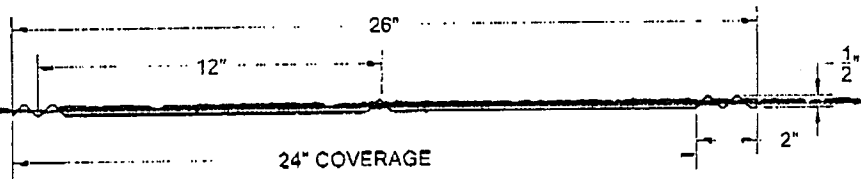
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GENERAL LIMITATIONS:

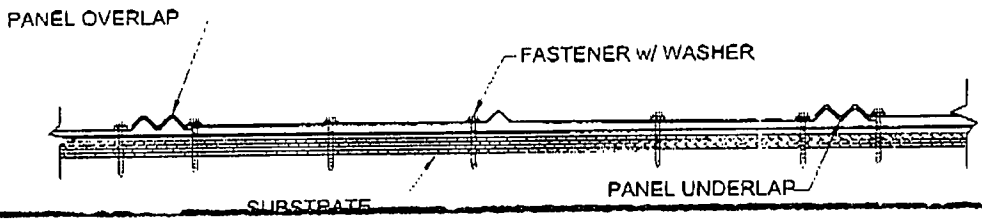
1. Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
 2. The maximum uplift pressures listed herein should meet or exceed the design pressures for the field, areas of the roof as determined by applicable building code. Increased design pressures at perimeter and corner areas may be met through rational analysis by increasing the number of attachment points in these areas. All rational analysis computations shall be conducted signed and sealed by a Registered Architect, Professional Engineer, or Registered Roof Consultant.
 3. All panels shall be permanently labeled with the manufacturer's name or logo, city, state and the following statement: "Miami Dade County Product Control Approved".
-
-



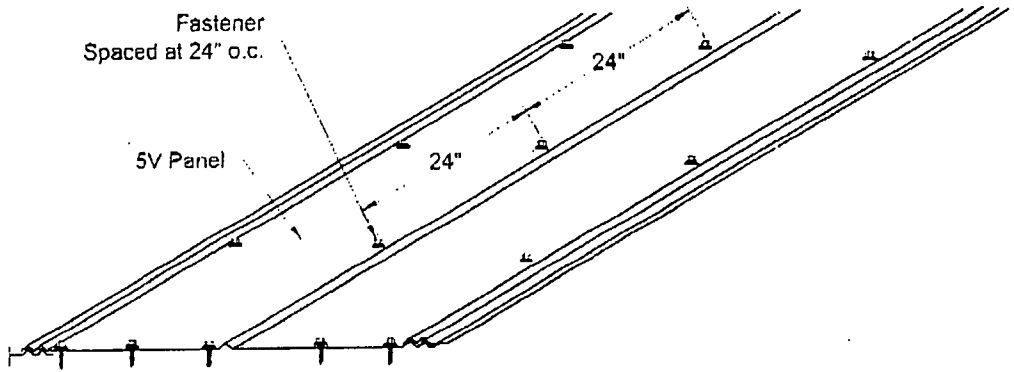
NOA No.: 02-0322.08
Expiration Date: 04/25/07
Approval Date: 04/25/02
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FASTENING PATTERN IN THE FIELD OF PANEL



FASTENING PATTERN AT THE EAVE & RIDGE OF PANEL



5V-Crimp Panel

END OF THIS ACCEPTANCE



NOA No.: 02-0322.08
 Expiration Date: 04/25/07
 Approval Date: 04/25/02
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User: Public User - Not Associated with Organization -

[Need Help ?](#)

Product Manufacturer: UNION CORRUGATING COMPANY
 Category: Roofing
 Subcategory: Non-structural Metal Roofing
 Application/Seq #: (### or ###.#)
 Application Status: (ALL)
 Evaluation Method: (ALL)
 Order by: Manufacturer Category Subcategory
 App / Seq # Status Evaluation Method

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Revising APPROVED (only) Applications: Log in and click the "Revise Approved Application" button.

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App/Seq #	Manufacturer	Category	Subcategory	Validation Entity/Validator	Status
FL72	UNION CORRUGATING COMPANY	Roofing	Non-structural Metal Roofing		Approved
FL732	UNION CORRUGATING COMPANY	Roofing	Non-structural Metal Roofing		Approved
FL2265	UNION CORRUGATING	Roofing	Non-structural	Warren W. Schaefer, P.E.	Approved

	COMPANY		Metal Roofing	(561) 775-4902	
FL2287	UNION CORRUGATING COMPANY	Roofing	Non-structural Metal Roofing	Warren W. Schaefer, P.E. (561) 775-4902	Approved Evaluation Report - Hardcopy Received
FL2665	UNION CORRUGATING COMPANY	Roofing	Non-structural Metal Roofing	Warren W. Schaefer, P.E. (561) 775-4902	Approved Evaluation Report - Hardcopy Received

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PRODUCT APPROVAL

Product Type Detail

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User: Public User - Not Associated with Organization -

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Application #: FL72
 Date Submitted: 10/24/2003
 Product Manufacturer: UNION CORRUGATING COMPANY
 Address/Phone/email: 701 S. KING ST.
 FAYETTEVILLE, NC 28301
 (910) 483-0479

Category: Roofing
 Subcategory: Non-structural Metal Roofing
 Evaluation Method: Certification Mark or Listing

Referenced Standards from the Florida Building Code: Section Standard Year
 1518.9 TAS 125 1995

Certification Agency: Miami-Dade BCCO - CER

Quality Assurance Entity:

Validation Entity:

Authorized Signature: Glenn Hart
 dhart@unioncorrugating.com

Evaluation/Test Reports Uploaded:
 Installation Documents Uploaded:

Product Approval Method: Method 1 Option A

Application Status: Approved
 Date Validated: 10/24/2003
 Date Approved: 11/19/2003

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App/Seq #	Product Model # or Name	Model Description	Limits of Use
72.1	5V CRIMP	24" wide, 26 ga. metal panel	High Velocity Hurricane Zones
72.2	ADVANTAGE -LOK	16" wide, 26 ga. metal panel	High Velocity Hurricane Zones
72.3	MASTER RIB	36" wide, 26 ga. metal panel	High Velocity Hurricane Zones

Next



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MIAMI-DADE COUNTY

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

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

NOTICE OF ACCEPTANCE (NOA)

**Johns Manville Corporation
717 17th Street
Denver, CO 80202**

SCOPE:

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

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

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

DESCRIPTION: Johns Manville Modified Bitumen Roofing Systems Over Wood Decks

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 consists of pages 1 through 21.

The submitted documentation was reviewed by Frank Zuloaga, RRC



**NOA No.: 01-0628.16
Expiration Date: 07/19/06
Approval Date: 05/02/02
Page 1 of 21**

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
DynaLastic 250	39-3/8" x 32'-10"; roll weight: 114 lbs.	ASTM D 6164 Type II Grade G	A 250 gram polyester mat reinforced, granular-surfaced, modified bitumen cap sheet.
DynaLastic 250 FR	39-3/8" x 32'-10"; roll weight: 115 lbs.	ASTM D 6164 Type II Grade G	A 250 gram polyester mat reinforced, granular-surfaced, modified bitumen cap sheet for use in fire-rated systems.
DynaMax	39-3/8" x 32'-10"; roll weight: 99 lbs.	ASTM D 6162 Type III Grade G	A fiberglass/polyester reinforced SBS modified bitumen membrane surfaced with granules for application in hot asphalt or heat weld.
DynaMax FR	39-3/8" x 32'-10"; roll weight: 116 lbs.	ASTM D 6162 Type III Grade G	A fire resistant, fiberglass/ polyester reinforced SBS modified bitumen membrane surfaced with granules for application in hot asphalt.
DynaClad	39-3/8" x 33'-6"; roll weight: 101 lbs.	ASTM D 6298	A foil faced, glass reinforced, SBS modified membrane for application in hot asphalt.
DynaBase XT	39-3/8" x 49'-2"	ASTM D 6163 Type II Grade S	A heavyweight glass reinforced SBS Base/Ply sheet.
DynaGlas FR XT	39-3/8" x 32'-10";	ASTM D 6163 Type II Grade S	A heavyweight glass reinforced granular surfaced SBS Cap sheet.
Ventsulation Felt	36" x 36'	ASTM D 4897 Type II	Heavy duty fiber glass base sheet impregnated and coated on both sides with asphalt with or without fine mineral stabilizer. Surfaced on the bottom side with coarse mineral granules embedded in asphaltic coating.
GlasBase	36" x 108'; roll weight: 84 lbs.	ASTM D 4601 Type I	Type II asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.
GlasBase Plus	36" x 108'; roll weight: 84 lbs.	ASTM D 4601	Type II asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.
GlasPly IV	36" x 200'	ASTM D 2178 Type IV	Type IV asphalt impregnated glass felt for use in conventional and modified bitumen built-up roofing.
GlasPly Premier	36" x 180'	ASTM D 2178 Type VI	Type VI asphalt impregnated glass felt for use in conventional and modified bitumen built-up roofing.
PermaPly No. 28	36" x 108'; roll weight: 72 lbs.	ASTM D 4601 Type II	Type II asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.
Fesco Board	various	ASTM C 728	Rigid perlite roof insulation board for built-up roofing systems; available flat or tapered.
Fesco Foam	various	ASTM C 1289	Rigid polyisocyanurate roof insulation with perlite board facing bonded to one side for use in conventional built-up and other roofing.
Fiber Glass Roof Insulation	various	ASTM C 726	Fiberglass roof insulation.
DuraBoard	various	ASTM C 728	A high density perlite roof insulation board for use in heat welded, modified bitumen systems.



<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
Retro-Fit Board	various	ASTM C 728	A high density perlite roof insulation board for use in conventional and modified bitumen built-up roofing systems.
JM E'NRG'Y-2 or Tapered E'NRG'Y-2	various	ASTM 1289	Polyisocyanurate insulation for use with single-ply, BUR and modified bitumen roof covers (includes all Factory Mutual approved roof covers)
JM E'NRG'Y-2 Plus	various	ASTM 1289	Polyisocyanurate insulation laminated to ½" wood fiber for use with single-ply, BUR and modified bitumen roof covers (includes all Factory Mutual approved roof covers).
JM E'NRG'Y-2 Composite or Tapered Composite	various	ASTM 1289	Polyisocyanurate insulation laminated to ½" perlite for use with single-ply, BUR and modified bitumen roof covers (includes all Factory Mutual approved roof covers).
JM PSI-25 or Tapered PSI-25	various	ASTM 1289	Nominal 25 psi compressive strength polyisocyanurate insulation for single-ply, BUR and modified bitumen roof covers (includes all Factory Mutual approved roof covers).
FesCant Plus Cant Strips, and Taper Edge	various	ASTM C 728	Factory pre-fabricated cant strips and taper edge, manufactured from expanded perlite insulation.
Lightweight Concrete (LWC) CR Base Fastener	various	PA 114	G-90 galvanized double spreading leg fastener for securing base sheets to lightweight insulating concrete and some poured gypsum decks.
NTB 1H and 2H	various	PA 114	A glass-filled nylon, double internal hex drive head, buttress thread, ¾" (19 mm) diameter fastener for securing roof insulation to gypsum and structural wood fiber decks.
MBR Flashing Cement Base and Activator	N/A	Proprietary	A two component elastomeric, cold application adhesive, consisting of a modified proprietary compound with an asphalt base.
MBR Utility Cement	N/A	ASTM D 4586	General purpose trowel grade, cutback bitumen cement mixture including inorganic fibers and mineral stabilizers.
MBR Bonding Cement and Activator	N/A	proprietary	A two component, elastomeric, cold application adhesive.
Bestile Industrial Roof Cement	various	ASTM D 4586, type 1	A trowel grade, cutback bitumen flashing grade cement mixture including inorganic fibers and mineral stabilizers.
Flex-I-Drain	various	BOCA 76-61 SRCCI 89204 UBC 3236	Two piece flexible drain system composed of a Noryl deck flange, a flexible neoprene bellows and no hub connection. Available in various sizes and styles for most retro-fit applications.
PC/PET RetroDrain	various	N/A	Engineered resin copolymer fabricated drain for retrofit applications.
USII RetroDrain	various	N/A	One piece, aluminum fabricated drain for retrofit applications.



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APPROVED ASSEMBLIES

- Membrane Type:** SBS
- Deck Type II:** Wood, Insulated, New Construction
- Deck Description:** 1⁹/₃₂" or greater plywood or wood plank, fastened with #12-3" Olympic STD screws @ 6" o.c.
- System Type A(1):** Anchor sheet mechanically fastened; all layers of insulation fully adhered with approved asphalt.

All General and System limitations apply.

One or more layers of any of the following insulations:

Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft ²
E'NRG'Y 2 Minimum 1.3" thick	N/A	N/A
Fesco Foam Minimum 1.5" thick	N/A	N/A
Fesco Minimum 3/4" thick	N/A	N/A
Retro-Fit Board Minimum 1/2" thick	N/A	N/A

Note: All insulation shall be adhered to the anchor sheet in full mopping of approved hot asphalt within the EVT range and at a rate of 20-40 lbs/100 ft². Please refer to Roofing Application Standard RAS 117 for insulation attachment. Insulation listed as base layer only shall be used only as base layers with a second layer of approved top layer insulation installed as the final membrane substrate. Composite insulation panels may be used as a top layer placed with the polyisocyanurate side facing down.

- Anchor Sheet:** One ply of GlasPly Premier fastened to the deck as described below:
- Fastening:** Anchor sheet shall be lapped 3" and fastened with 2 1/4" Ultrafast screws and 3" plates, 8" o.c. at the lap and three rows staggered in the center of the sheet 8" o.c..
- Base Sheet:** (Optional) One ply of PermaPly No. 28, DynaBasc, DynaBase XT, DynaBase PR, GlasBase, or GlasBase Plus adhered to the insulated substrate in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. If base sheet is applied directly to polyisocyanurate insulation, only a spot or strip mopped application as detailed in this approval is approved; see General Limitation #4.
- Ply Sheet:** (Optional) One or more plies of GlasPly Premier, Glas Ply IV, DynaLastic 180S, DynaBase, DynaBase XT, DynaBasc PR or DynaPly adhered to the a base sheet or perlite top layer with approved mopping of asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. or one ply DynaWeld Base heat welded.



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Membrane:

One or more plies of DynaKap, DynaKap FR, DynaMax, DynaMax FR, DynaGlas, DynaGlas FR, DynaGlas 30 FR, DynaGlas 30 FR XT, DynaLastic 180, DynaLastic 180 FR, DynaLastic 180 S, DynaLastic 250, DynaLastic 250FR or DynaPly adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. or one ply DynaWeld Cap FR heat welded. (See application instructions for approved method of installation).
Or

(Only with a modified Base or Ply sheet) GlasKap Adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Surfacing:

(Optional) Install one of the following:

1. 2-3 gallons TopGard B emulsion/sq. or 2 gallons aluminum coating/sq.. Coatings shall be applied according to the manufacturers' recommendations regarding specific application rates and weathering.
2. Flood coat and gravel/slag with an application rate of 60 lbs./sq. & 400 lbs./sq., respectively.
3. GlasKap Adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Maximum Design Pressure:

-52.5 (See General Limitation #7).



- Membrane Type:** SBS
- Deck Type II:** Wood, Insulated, New Construction
- Deck Description:** 1⁹/₃₂" or greater plywood or wood plank, fastened with #12-3" Olympic STD screws @ 6" o.c.
- System Type A(2):** Anchor sheet mechanically fastened; all layers of insulation fully adhered with approved asphalt.

All General and System limitations apply.

One or more layers of any of the following insulations:

Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft ²
E'NRC'Y 2 Minimum 1.3" thick	N/A	N/A
Fesco Foam Minimum 1.5" thick	N/A	N/A
Fesco Minimum 3/4" thick	N/A	N/A
Retro-Fit Board Minimum 1/2" thick	N/A	N/A

Note: All insulation shall be adhered to the anchor sheet in full mopping of approved hot asphalt within the EVT range and at a rate of 20-40 lbs/100 ft². Please refer to Roofing Application Standard RAS 117 for insulation attachment. Insulation listed as base layer only shall be used only as base layers with a second layer of approved top layer insulation installed as the final membrane substrate. Composite insulation panels may be used as a top layer placed with the polyisocyanurate side facing down.

- Anchor Sheet:** Two plies of PermaPly No.28, DynaBase, GlasBase, GlasBase Plus, or Ventsulation fastened to the deck as described below:
- Fastening:** Anchor sheet shall be lapped 4" and fastened with approved roofing nails and tin caps 9" o.c. at the lap and two rows staggered in the center of the sheet 12" o.c.
- Base Sheet:** (Optional) One ply of PermaPly No. 28, DynaBase, DynaBase XT, DynaBase PR, GlasBase, or GlasBase Plus adhered to the insulated substrate in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. If base sheet is applied directly to polyisocyanurate insulation, only a spot or strip mopped application as detailed in this approval is approved; see General Limitation #4.
- Ply Sheet:** (Optional) One or more plies of GlasPly Premier, Glas Ply IV, DynaLastic 180S, DynaBase, DynaBase XT, DynaBase PR or DynaPly adhered to the a base sheet or perlite top layer with approved mopping of asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. or one ply DynaWeld Base, DynaWeld Base PR or DynaWeld 180S heat welded.



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Membrane:

One or more plies of DynaKap, DynaKap FR, DynaMax, DynaMax FR, DynaGlas, DynaGlas FR, DynaGlas 30 FR, DynaGlas 30 FR XT, DynaLastic 180, DynaLastic 180 FR, DynaLastic 180 S, DynaLastic 250, DynaLastic 250FR or DynaPly adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. or one ply DynaWeld Cap FR heat welded. (See application instructions for approved method of installation).

Or

(Only with a modified Base or Ply sheet) GlasKap Adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Surfacing:

(Optional) Install one of the following:

1. 2-3 gallons TopGard B emulsion/sq. or 2 gallons aluminum coating/sq. Coatings shall be applied according to the manufacturers' recommendations regarding specific application rates and weathering.
2. Flood coat and gravel/slag with an application rate of 60 lbs./sq. & 400 lbs./sq., respectively.
3. GlasKap Adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Maximum Design
Pressure:

-52.5 (See General Limitation #7).



Membrane Type: SBS
Deck Type II: Wood, Insulated, New Construction
Deck Description: 1⁵/₃₂" or greater plywood or wood plank
System Type A(3): Anchor sheet mechanically fastened; all layers of insulation fully adhered with approved asphalt.

All General and System limitations apply.

One or more layers of any of the following insulations:

Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft ²
E'NRG'Y 2 Minimum 1.3" thick	N/A	N/A
Fesco Foam Minimum 1.5" thick	N/A	N/A
Fesco Minimum 3/4" thick	N/A	N/A
Retro-Fit Board Minimum 1/2" thick	N/A	N/A

Note: All insulation shall be adhered to the anchor sheet in full mopping of approved hot asphalt within the EVT range and at a rate of 20-40 lbs/100 ft². Please refer to Roofing Application Standard RAS 117 for insulation attachment. Insulation listed as base layer only shall be used only as base layers with a second layer of approved top layer insulation installed as the final membrane substrate. Composite insulation panels may be used as a top layer placed with the polyisocyanurate side-facing down.

Anchor Sheet: One ply of PermaPly No. 28, DynaBase, GlasBase Plus or Ventsulation fastened to the deck as described below:

Fastening: Anchor sheet shall be lapped 4" and fastened with approved roofing nails and tin caps 9" o.c. at the lap and three rows staggered in the center of the sheet 12" o.c..

Base Sheet: (Optional) One ply of PermaPly No. 28, DynaBase, DynaBase XT, DynaBase PR, GlasBase, or GlasBase Plus adhered to the insulated substrate in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. If base sheet is applied directly to polyisocyanurate insulation, only a spot or strip mopped application as detailed in this approval is approved; see General Limitation #4.

Ply Sheet: (Optional) One or more plies of GlasPly Premier, Glas Ply IV, DynaLastic 180S, DynaBase, DynaBase XT, DynaBase PR or DynaPly adhered to the a base sheet or perlite top layer with approved mopping of asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. or one ply DynaWeld Base heat welded.



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Membrane:

One or more plies of DynaKap, DynaKap FR, DynaMax, DynaMax FR, DynaGlas, DynaGlas FR, DynaGlas 30 FR, DynaGlas 30 FR XT, DynaLastic 180, DynaLastic 180 FR, DynaLastic 180 S, DynaLastic 250, DynaLastic 250FR or DynaPly adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. or one ply DynaWeld Cap FR heat welded. (See application instructions for approved method of installation).

Or

(Only with a modified Base or Ply sheet) GlasKap Adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Surfacing:

(Optional) Install one of the following:

1. 2-3 gallons TopGard B emulsion/sq. or 2 gallons aluminum coating/sq. Coatings shall be applied according to the manufacturers' recommendations regarding specific application rates and weathering.
2. Flood coat and gravel/slag with an application rate of 60 lbs./sq. & 400 lbs./sq., respectively.
3. GlasKap Adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Maximum Design Pressure:

-45 psf (See General Limitation #9).





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PRODUCT APPROVAL Product Search

Overview **Product Search** Organization Search Product Application

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Product Manufacturer: **Johns Manville**
 Category: **Roofing**
 Subcategory: **Modified Bitumen Roof System**
 Application/Seq #:
 (### or ###.#)
 Application Status: (ALL)
 Evaluation Method: (ALL)
 Order by: Manufacturer Category Subcategory
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App/Seq #	Manufacturer	Category	Subcategory	Validation Entity/Validator	Status
FL644	Johns Manville	Roofing	Modified Bitumen Roof System	Miami-Dade BCCO - VAL (305) 375-2901	Approved
FL1046	Johns Manville	Roofing	Modified Bitumen Roof System	Miami-Dade BCCO - VAL (305) 375-2901	Approved

FL2122	Johns Manville	Roofing	Modified Bitumen Roof System		Approved
FL2860	Johns Manville	Roofing	Modified Bitumen Roof System		Approved
FL2948	Johns Manville	Roofing	Modified Bitumen Roof System	Vladimir John Knezevich (954) 522-3690	Approved Evaluation Report - Hardcopy Received

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PRODUCT APPROVAL Product Type Detail

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[Product Application](#)

User: Public User - Not Associated with Organization -

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Application #: FL644
 Date Submitted: 10/17/2003
 Product Manufacturer: Johns Manville
 Address/Phone/email: P.O. Box 5108
 Denver, CO 80217
 (303) 978-2256

Category: Roofing
 Subcategory: Modified Bitumen Roof System

Evaluation Method: Evaluation Report from a Product Evaluation Entity

Referenced Standards from the Florida Building Code:

Section	Standard	Year
1508.5.2	ASTM D6162, D6163, D6164	2003

Evaluation Entity: Miami-Dade BCCO - EVL

Quality Assurance Entity: Underwriters Laboratories Inc.

Validation Entity: Miami-Dade BCCO - VAL

Authorized Signature: Larry Glass
 glassl@jm.com

Evaluation/Test Reports Uploaded:

- [PTID_644_T_Insul.pdf](#)
- [PTID_644_T_SBS concrete.pdf](#)
- [PTID_644_T_SBS cwf.pdf](#)
- [PTID_644_T_SBS gyp.pdf](#)
- [PTID_644_T_SBS lwc.pdf](#)
- [PTID_644_T_SBS recover.pdf](#)
- [PTID_644_T_SBS steel.pdf](#)
- [PTID_644_T_SBS wood.pdf](#)

Installation Documents Uploaded:

Product Approval Method:

Method I Option C

Application Status:

Approved

Date Validated:

11/04/2003

Date Approved:

11/19/2003

Page:

Page 1 / 1

Go

App/Seq #	Product Model # or Name	Model Description	Limits of Use
644.1	"Dyna" series SBS Modified Bit	SBS Roof Membrane	
644.2	DuraBoard	Perlite roof insulation	
644.3	ENRGY 3	Polyisocyanurate roof insulation	
644.4	Fesco Board	Perlite roof insulation	
644.5	RetroFit Board	Perlite roof insulation	

Next



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6601 Lyons Rd A5
Coconut Creek, Fl 33073

July 29, 2008

Town of Seawall's Point Building Department
Chief Building Inspector
One S. Seawall's Point Road
Seawall's Point, FL 34996

RE: Permit # 7477
Permit Address 46 Rio Vista Dr
Permit Type Re-Roof

LICENSED ROOFING CONTRACTOR AFFIDAVIT

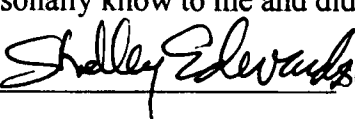
Certification of Roof Metal
Certification of re-nailing roof sheathing and removal and replacement of damaged or rotten wood.
Certification of the installation of roof.

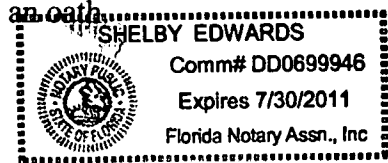
I, John Emrich, am certified as a roofing contractor (License No. CCC1326253) and do hereby certify that all roof work (as indicated above) has been performed at the above address in accordance with Chapter 15 of the 2004 Florida Building Code, Existing Building, as amended, and Manufacturer's Specifications. I understand the Town of Seawall's Point offers progressive inspections. I have notified the owner of the property of this affidavit.

Signature of Qualifier  Date 7/29/2008

John Emrich
Reroof America Corporation
CCC1326253

State of Florida, County of Palm Beach
The foregoing instrument was acknowledged before me 7/29/2008 this Date
by John Emrich and is personally know to me and did not take an oath.

Signature of Notary of Public  Seal





6601 Lyons Rd A5
Coconut Creek, FL 33073

July 29, 2008

Town of Seawall's Point Building Department
Chief Building Inspector
One S. Seawall's Point Road
Seawall's Point, FL 34996

RE: Permit # 7477
Permit Address 46 Rio Vista Dr
Permit Type Re-Roof

*OK KINAL
PER APPROVING
7-29-08*

LICENSED ROOFING CONTRACTOR AFFIDAVIT

Certification of Roof Metal
Certification of re-nailing roof sheathing and removal and replacement of damaged or rotten wood.
Certification of the installation of roof.

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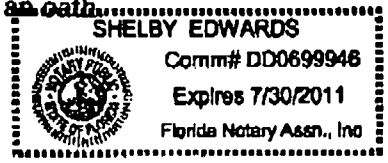
Signature of Qualifier *[Signature]* Date 7/29/2008

John Emrich
Reroof America Corporation
CCC1326253

State of Florida, County of Palm Beach

The foregoing instrument was acknowledged before me 7/29/2008 this Date by John Emrich and is personally know to me and did not take an oath.

Signature of Notary of Public *[Signature]* Seal



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/29, 2002 Page 1 of

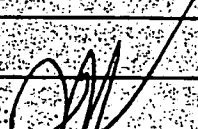

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7384	Regal	Final window	PASS	BUCKS INSPECTED
8	6 Mandalay	<u>CLOSE</u>		PER PICTURES TAKEN BY INSTALLER INSPECTOR: <i>[Signature]</i>
7500	TRUITY	DRY-IN	PASS	ROOF SHEATH ONLY
16	59 S. RIVER RD ANCHOR ROOFING	11:30-12 (last please)		WILL CALL FOR DRY IN INSPECTION INSPECTOR: <i>[Signature]</i>
7496	Mc KAY	FINAL REEROOF	PASS	<u>CLOSE</u>
13	19 S. VIA LUCINDIA FLORIDA REEROOFING			INSPECTOR: <i>[Signature]</i>
6632	SCHERLENG	FINAL SFR	---	RECHEDULE
6	110 ABBIE COURT O/B			NO ONE AT SITE INSPECTOR: <i>[Signature]</i>
7477	SCHUTTS	DRY-IN	PASS	
10B	40 RIO VISTA DR REEROOF AMERICA			INSPECTOR: <i>[Signature]</i>
TREE	VAN AMSTERDAM	TREE	PASS	
1	2 E. HIGH POINT			INSPECTOR: <i>[Signature]</i>
TREE	SCHMADER	TREE	FAIL	
7	102 HENRY SEWAN			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri MON MAY 2, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7483	SCHMADER	POOL STEEL	PASS	
1A	102 HENRY SEWALL OLYMPIC POOLS			INSPECTOR: 
7477	SEWERS	IN Prog	---	MIXT RESCHEDULE
6	46 RIO VISTA DR PEROOF AMERICA	REPAIR		INSPECTOR:
6632	Schepleng 110 Abbie Court O/B	Final SFR	PASS	READY FOR C.O. INSPECTOR: 
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:

OTHER: _____

8385

SCREEN ENCLOSURE

RECEIVED
14-18-06

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

Date: 9/18/06

OWNER/TITLEHOLDER NAME: Nancy S Shotts Phone (Day) 223-7959 (Fax) 221-1447

Job Site Address: 46 Rio Vista Dr City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) RioVista 51D LOT 91 Parcel Number: 123841002 000 009 1060000

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

Description of Work To Be Done: Replace existing enclosure

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 9,100 -
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

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

CONTRACTOR/Company: James D Goodman Phone: 286-0665 Fax: 283-1676

Street: PO Box 0585 City: Sensen Beach State: FL Zip: 34958

State Registration Number: _____ State Certification Number: _____ Martin County License Number: SP 02320

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER Bob Dunlea Lic# _____ Phone Number: 286-6858

Street: 2377 SW Heronwood Rd City: Palm City State: FL Zip: 34990

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: 8327

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

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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)

Nancy S Shotts

State of Florida, County of: Martin

This the 18th day of September 2006

by Nancy S Shotts who is personally

known to me or produced

as identification. Megan M Lane

Notary Public

My Commission Expires: 1/25/10

CONTRACTOR SIGNATURE (required)

James D Goodman

On State of Florida, County of: Martin

This the 14th day of September 2006

by James D Goodman who is personally

known to me or produced

as identification. Megan M Lane

Notary Public

My Commission Expires: 1/25/10

PERMIT APPLICATIONS SHOULD BE DATED FROM APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROMPTLY

Seal
STATE OF FLORIDA
MY COMMISSION # DD310071
EXPIRES: Jan. 25, 2010
Florida Notary Service.com
(407) 398-0153

Seal
STATE OF FLORIDA
MEGAN M. LANE
MY COMMISSION # DD510671
EXPIRES: Jan. 25, 2010
Florida Notary Service.com
(407) 398-0153



MARTIN COUNTY BUILDING PERMIT

CARD MUST BE POSTED ON THE PREMISES TO BE MADE ON THE FRONT OF THE PREMISES WITHIN VIEW OF THE STREET BEFORE WORK IS STARTED.

Permit Number: SP01 - 20060130
Permit Type: SEWALLS POINT
Permit Name:
Date Issued: 21-SEP-2006
Project:
Scope of Work: Replace existing enclosure

Applicant/Contact:	GOODMAN, JAMES D /		
Parcel Control Number:	12-38-41-002-000-0091.0-60000		
Subdivision:	RIO VISTA		
Construction Address:	46 RIO VISTA DR		
Location Description:			
Owner Name:	SHUTTS, NANCY J		
Prime Contractor:	GOODMAN, JAMES D BOX 0585 JENSEN BEACH, FL 34958	772-286-0665	GOODMANS SCREEN & REP CO IN License No.: SP02320

In consideration of the granting of this permit, it is agreed that in all respects the work will be performed and completed in accordance with the permitted plans and the applicable codes for Martin County, Florida. This permit may be revoked at any time upon the violation of any of the provisions of said laws, ordinances or rules and regulations or upon any change in the plans and specifications unauthorized by this department. Permit expires one hundred eighty (180) days from the date of issuance if work is not started or if work is suspended for a period of six months. Per FBC Section 3305, sanitary facilities shall be provided during construction, remodeling, or demolition activities.

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

**"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 RECORDED NOTICE OF COMMENCEMENT MUST BE SUBMITTED TO THE ISSUING AUTHORITY PRIOR TO THE FIRST INSPECTION.**

ALL REINSPCTIONS OR ADDITIONAL INSPECTIONS WILL BE CHARGED AT A RATE ESTABLISHED BY THE BOARD OF COUNTY COMMISSION. NOTICE: DO NOT ORDER CONCRETE UNTIL INSPECTION IS APPROVED.

UPON COMPLETION OF WORK, A FINAL INSPECTION MUST BE CALLED FOR BY THE CONTRACTOR. FAILURE TO DO SO WILL RESULT IN A DENIAL OF FUTURE BUILDING PERMITS TO THE CONTRACTOR.

INSPECTIONS

The inspections listed below may not represent all necessary required inspections for the scope of work.
Phone 221-2364 (IVR) or 288-5489 for inspections. 24 hour notice is required.

6099 Residential Final

TOWN OF SEWALL'S POINT

Receipt

Date 9-25-06

BUILDING PERMIT NO. 8385

Building to be erected for Shutters

Type of Permit Screen Enclosure

Applied for by Goodman's Screen (Contractor)

Building Fee 120-

Subdivision Rio Vista Lot 91 Block _____

Radon Fee _____

Address 46 Rio Vista Dr

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Plumbing Fee _____

Parcel Control Number:

12-3841-002-000-0091-060000

Roofing Fee _____

Amount Paid \$120 Check # 6921 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 9100-

TOTAL Fees 120-

Signed Megan Malone
Applicant

Signed Valerie Meyer
Town Building Official / Dept Clerk

SCREEN ENCLOSURE (Revised 12/28/05)**PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS
FOR SCREEN ENCLOSURES**

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 Appraiser's parcel number or property control number
2. Legal description of property (can be found on your deed, survey or tax bill)
3. Contractor's name, address, phone, fax and license numbers.
4. Name all sub-contractors (properly licensed)
5. Architect or engineer name, address, & phone number.
6. Scope of work
7. Estimated cost of construction.
8. Original signature of owner, notarized
9. Original signature of contractor, notarized.

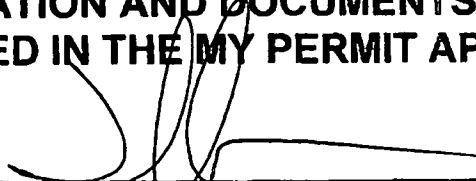
Submittals (~~2~~ copies) 3

1. Survey (**mean high water survey if screen enclosure is being built in rear yard of waterfront property**) containing the following information:
 - a. Legal description of lot
 - b. Lot dimensions and bearings
 - c. Street and waterway names
 - d. Proposed enclosure location with dimensions off property lines
 - e. Easements
 - f. Setbacks
 - g. Road right-of-ways
 - h. Canals, ponds, or riverfront locations
2. Statement of fact (owner/builder affidavit)
3. Proof of ownership (deed or tax recpt.)
4. Application for tree removal or relocation (attach tree survey and removal or relocation plan if required)
5. A certified copy of the Notice of Commencement for any work over \$2500.00
6. Copy of license (either Martin County Certificate of Competency or state certified or registered contractor license)
7. Copy of certificate of workmen's compensation insurance or exemption
8. Copy of certificate of liability insurance

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

1. Manufactures specifications or shop drawings for screen enclosure
2. Verification that existing footing is capable of supporting and resisting uplift of enclosure

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



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: _____

NOTICE OF COMMENCEMENT

Permit No. _____
State Of Florida

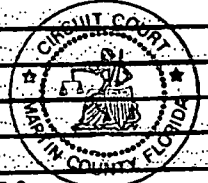
Tax ID No. 12-38-41-002-000-00910-6
County Of Martin

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 Rio Vista S/D Lot 91
46 Rio Vista Dr Stuart FL 34996

General description of improvements Pool Enclosure
Owner Nancy J Shotts
Address 46 Rio Vista Dr Stuart FL 34996
Owner's interest in site of improvement _____

STATE OF FLORIDA
MARTIN COUNTY
THIS IS TO CERTIFY THAT THE
FOREGOING _____ PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL



~~Fee~~ Simple Title holder (if other than owner) _____
Address _____
BY: [Signature] D.C.
DATE: 7.27.08

Contractor Goodman's Account & Copier Co., Inc. Phone# 286-0665
Address P.O. Box 0585 Jensen Bch. FL 34958 Fax# 283-1676

Surety _____ Phone# _____
Address _____ Fax# _____
Amount of Bond \$ _____

Lender _____ Phone# _____
Address _____ 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 James D. Goodman Phone# 286-0665
Address P.O. Box 0585 Jensen Bch., FL 34958 Fax# 283-1676

In addition to himself, owner designates _____ of _____
(Phone# _____ Fax# _____) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

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

[Signature]
OWNERS SIGNATURE

STATE OF FLORIDA, COUNTY OF MARTIN
Sworn to and subscribed before me this 19 day of June, 2008, by Nancy Shotts who is personally known to me or who has produced _____ as identification.

(seal) [Signature]
SIGNATURE OF NOTARY



TYPE OR PRINT NAME OF NOTARY
NOTARY PUBLIC TITLE
COMMISSION NUMBER

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
07/17/2006

PRODUCER

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

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

INSURERS AFFORDING COVERAGE

INSURED

Goodman's Screen & Repair Co. Inc.
P O Box 0585
Jensen Beach, Fl. 34958

INSURER A: **Auto-Owners Insurance Co.**
INSURER B:
INSURER C:
INSURER D:
INSURER E:

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/>	20648160	2/24/06	2/24/07	EACH OCCURRENCE \$ 300,000
	FIRE DAMAGE (Any one fire) \$ 100,000				
	MED EXP (Any one person) \$ 10,000				
	PERSONAL & ADV INJURY \$ 300,000				
	GENERAL AGGREGATE \$ 300,000				
	PRODUCTS - COMP/OP AGG \$ 300,000				
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$
					OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	EXCESS LIABILITY OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$
					AGGREGATE \$
					\$
					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTH-ER
					E.L. EACH ACCIDENT \$
					E.L. DISEASE - EA EMPLOYEE \$
	OTHER				E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER	ADDITIONAL INSURED; INSURER LETTER:	CANCELLATION
Sewalls Point Town Hall 1 South Sewalls Point Rd. Sewalls Point, FL 34996 Attn: Building Dept. Fax (772) 220-4765		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

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		Date 7/17/06
Producer: Lion Insurance Company 2739 U.S. Highway 19 N. Holiday, FL 34691 Phone: 727-838-5562 Fax: 727-937-2138	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: South East Personnel Leasing, Inc. 2739 U.S. Highway 19 N. Holiday, FL 34691 Phone : (727)938-5562	Insurers Affording Coverage	
	Insurer A: Lion Insurance Company	NAIC # 11075
	Insurer B:	
	Insurer C:	
	Insurer D:	
	Insurer E:	

Coverages

The policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of such policies. Aggregate limits shown may have been reduced by paid claims.

INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits																
		GENERAL LIABILITY <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence \$ Damage to rented premises (EA occurrence) \$ Med Exp \$ Personal Adv Injury \$ General Aggregate \$ Products - Comp/Op Agg \$																
		AUTOMOBILE LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident) \$ Bodily Injury (Per Person) \$ Bodily Injury (Per Accident) \$ Property Damage (Per Accident) \$																
		GARAGE LIABILITY <input type="checkbox"/> Any Auto				Auto Only - Ea Accident \$ Other Than EA Acc. \$ Autos Only: AGG. \$																
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made <input type="checkbox"/> Deductible <input type="checkbox"/> Retention				Each Occurrence \$ Aggregate \$																
A		Workers Compensation and Employers' Liability Any proprietor/partner/executive officer/member excluded? If Yes, describe under special provisions below.	WC 71949	01/01/2006	01/01/2007	<table border="1" style="width:100%; font-size: x-small;"> <tr> <td>X</td> <td>WC Statutory Limits</td> <td>OTHER</td> <td></td> </tr> <tr> <td colspan="2">E.L. Each Accident</td> <td></td> <td>\$1000000</td> </tr> <tr> <td colspan="2">E.L. Disease - Ea Employee</td> <td></td> <td>\$1000000</td> </tr> <tr> <td colspan="2">E.L. Disease - Policy Limits</td> <td></td> <td>\$1000000</td> </tr> </table>	X	WC Statutory Limits	OTHER		E.L. Each Accident			\$1000000	E.L. Disease - Ea Employee			\$1000000	E.L. Disease - Policy Limits			\$1000000
X	WC Statutory Limits	OTHER																				
E.L. Each Accident			\$1000000																			
E.L. Disease - Ea Employee			\$1000000																			
E.L. Disease - Policy Limits			\$1000000																			

Other 3457088
 Goodman's Screen & Repair Company **COVERAGE APPLIES ONLY TO THOSE EMPLOYEES LEASED, NOT TO SUBCONTRACTORS.**

Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: **ADD ON DATE: 9/27/04**
COVERAGE APPLIES ONLY IN THE STATE OF FLORIDA TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF Goodman's Screen & Repair Company, Inc.' FAX: 772-220-4786/ISSUE 7/17/06 (JOY)

Lion Insurance Company is A.M. Best Company rated A- (Excellent). AMB # 12616

CERTIFICATE HOLDER SEWALLS POINT TOWN HALL 1 SOUTH SEWALLS POINT RD. SEWALLS FL 34988	CANCELLATION Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.
---	--

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION
CONSTRUCTION INDUSTRY
CERTIFICATE OF EXEMPTION FROM FLORIDA
WORKERS' COMPENSATION LAW



EFFECTIVE: 02/07/2008

** EXPIRATION DATE: 02/07/2008

PERSON: JAMES D. GOODMAN

FEIN: 8500302002

BUSINESS NAME: GOODMAN'S SCREEN & REPAIR CO I
AND ADDRESS: PO BOX 9555
JENSEN BEACH, FL 34958

SCOPE OF BUSINESS OR TRADE:

- 1- SCREENING
- 2- ALUMINUM CONTRACTOR

F
O
L
D
H
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R
E

IMPORTANT

Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.

QUESTIONS? (850) 413-1609

CUT HERE

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

FWC-752 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04

Goodman's Screen & Repair Co

SP 02320



Martin County Building Department

2401 SE Monterey Road

Stuart, FL 34996

(772) 288-5482

Fax (772) 288-5911

GOODMAN, JAMES D
GOODMANS SCREEN & REP CO INC
BOX 0585
JENSEN BEACH, FL 34958

NOTICE TO ALL CONTRACTORS

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

PROHIBITED ACTIVITIES:

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

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

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



MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency

ALUMINUM/CONCRETE CONTRACTOR

License Number SP02320 Expires: 30-SEP-07

GOODMAN, JAMES D

GOODMANS SCREEN & REP CO INC

BOX 0585

JENSEN BEACH, FL 34958

2005-2006 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9012, Stuart, FL 34995
(772) 288-5604

LICENSE 2003-290-011 CERT SP02320
PHONE (772)286-0665 SIC NO 235990

LOCATION:
391 NE BAKER RD STU

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 PERMITTEE ENGAGED IN THE BUSINESS, PROFESSION OR OCCUPATION
OF **ALUMINUM CONTRACTOR**

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

18 DAY OF AUGUST 05
AND ENDING SEPTEMBER 30, 2006

GOODMAN DONNA
GOODMAN'S SCREENS & REPAIR CO INC
PO BOX 0585
JENSEN BEACH FL 34958

12 05081701 003729

PECIFICATION NOTES AND DESIGN PARAMETERS:

THIS OVERALL DESIGN COMPLIES WITH THE GUIDELINES DEFINED IN CHAPTERS 16 AND 20 OF THE FLORIDA BUILDING CODE EDITION 2004 (FBC) AND THE ALUMINUM ASSOCIATION OF FLORIDA, 2003 EDITION (AAF), "GUIDE TO ALUMINUM CONSTRUCTION IN HIGH WIND AREAS" AND IS BASED ON THE FOLLOWING PARAMETERS:

- A. WIND SPEED: 140 M.P.H.
- B. EXPOSURE CATEGORY: 'B'
- C. DESIGN PRESSURES: SIMULTANEOUS LOADING WITH ROOF @ 10 P.S.F., WALLS @ 18 P.S.F.
- D. MAXIMUM SCREEN HEIGHT: 16' (HIGHER JOBS REQUIRE SITE-SPECIFIC DESIGN BY THE ENGINEER OF RECORD AND MAY BE SUBJECT TO ADDITIONAL DESIGN PARAMETERS)
- E. ALLOWABLE DEFLECTION: L / 80 MINIMUM, AS SPECIFIED IN TABLE #1610.1 OF FBC.
- F. CONTINUOUS LOAD PATH IS PROVIDED

MATERIALS (UNLESS OTHERWISE SPECIFIED BY THE ENGINEER OF RECORD)

- A. ALL EXTRUSIONS: ALUMINUM ALLOY #6063-T6 (NOTE: SPLICE PLATE MATERIAL MAY BE EXTRUDED FROM ALUMINUM ALLOY #6061-T6, IF THIS ALLOY IS MORE READILY AVAILABLE)
- B. FASTNERS: ALUMINUM ALLOYS #2024-T4 & #7075-T6, DOUBLE CAD-POLATED STEEL, HOT-DIPPED GALVANIZED STEEL OR 300-SERIES STAINLESS STEEL IT IS THE RESPONSIBILITY OF THE CONTRACTOR TO PROVIDE FOR SEPARATION OF DISSIMILAR MATERIALS AS THEY ARE DEFINED IN SECTION #2003.8.4. HE/SHE MAY IMPLEMENT ANY OF THE MEANS LISTED IN THESE SECTIONS. ANY ALTERNATE MEANS MUST BE REVIEWED AND APPROVED IN WRITING, BY THE ENGINEER OF RECORD, PRIOR TO ANY INSTALLATIONS UTILIZING THE SUBJECT METHOD.
- C. SCREEN CLOTH: SHALL BE VINYL-COATED, WOVEN FIBERGLASS, MAXIMUM DENSITY OF 18 X 14, 58% OPEN MIN.

ALL HOUSE FASCIA DETAILS, BOLTING OR SCREW SELECTIONS, BEAM SPLICE DETAILS, DIAGONAL "K" BRACING DETAILS, COLUMN TO BEAM DETAILS, STRUCTURAL GUTTER DETAILS, WALL AND FASCIA DETAILS, CORNER ANCHOR DETAILS, ROOF BRACING DETAILS, EAVE BRACING DETAILS, ETC., IF NOT EXPLICITLY OUTLINED ON THIS SPECIFICATION, SHALL BE IN ACCORDANCE WITH AAF, EDITION 2003. GUIDE WIRES WILL NOT BE USED IN THIS SPECIFICATION, "K" BRACING WILL BE USED THROUGHOUT.

LOCATION OF ALL "K" BRACING AND CHAIR RAILS, ALONG WITH ANY OTHER DESIGN ABNORMALITY, WILL BE SHOWN AND/OR LISTED ON SHEET 3, THE "SITE SPECIFIC DRAWING".

ALL WIND BRACING SHALL USE 1/4" DIAMETER THROUGH BOLTING (TOP AND BOTTOM) WITH 1-1/8" O.D. FENDER WASHERS OR 1-3/4" SQUARE BY 0.090 THICK ALUMINUM WASHER (#6063-T6). THE WASHERS SHALL BE INSTALLED ON BOTH ENDS OF THE BOLTING.

NEW AND EXISTING FOOTERS SHALL BE CONTROLLED AS FOLLOWS:

- A. ALL NEW FOOTERS WILL BE CONSTRUCTED IN ACCORDANCE WITH THE AAF GUIDELINES.
- B. EXISTING FOOTERS THAT CONSIST OF A SLAB GREATER THAN 4" AND LESS THAN 8", THAT HAS BEEN INSPECTED AND HAS BEEN DETERMINED TO BE IN GOOD CONDITION WITHOUT EXCESSIVE CRACKING, SHALL HAVE THE FOLLOWING REQUIREMENTS:
 - 1. A 2' LONG PLATE SHALL BE INSTALLED ALONG THE OUTER DIAMETER UNDER THE CONCRETE. THE 3/16" THICK PLATE SHALL BE LOCATED UNDER THE CONCRETE AT ALL EXTERIOR CORNERS (OR ANY ANGLE > 45°) OF THE SLAB AND SECURED THROUGH THE CONCRETE TO THE 1 x 2 AT THE TOP WITH 1/2" BOLTS. NOTE: THE PLATE FOR A RIGHTANGLE WILL BE A TRIANGLE, 2' x 2' x 2.828".
 - 2. ALL HOLD DOWN FASTENERS MUST BE NO MORE THAN 12" ON CENTER.

ADDITIONAL NOTES:

THE FOLLOWING TABLES ARE FOR MANSARD AND HALF MANSARD ENCLOSURES WITH A MAXIMUM WALL HEIGHT OF 8 FEET AND 16 FEET BASED ON 140 MPH WIND. THE TABLES ARE BASED ON SIMULTANEOUS LOADING AS DEFINED IN THE AAF "GUIDE TO ALUMINUM CONSTRUCTION IN HIGH WIND AREAS". TABLE LIMITED TO A MAXIMUM VERTICAL RISE OF 3 FEET. (BASED ON 140 MPH WINDS, FOR EXPOSURE CATEGORY "B", APPLIED WALL LOAD IS 18 LBS./SQ.FT., APPLIED ROOF LOAD IS 10 LBS./SQ.FT. AND LIVE LOAD IS 10 LBS./SQ.FT.)

ALLOWABLE SPANS for Primary Members in Screen Roofs (Beams)
 FOR ALL Wind Zones of 140 mph and less
 (Table applies to Exposure "B")

Applied Load = 18 lbs./sq.ft.
 Maximum Wall Height = 8 ft.
 Unit Load = Design Pressure = 10 lbs./sq.ft.

Roof Beams	Load Width and Spacing								
	4.0'	4.5'	5.0'	5.5'	6.0'	6.5'	7.0'	7.5'	8.0'
2 x 4 x 0.045 x 0.100 SMB	23' 9"	23' 3"	22' 9"	22' 4"	22' 0"	21' 8"	21' 5"	21' 2"	20' 11"
2 x 5 x 0.050 x 0.116 SMB	26' 10"	26' 3"	25' 8"	25' 2"	24' 9"	24' 4"	24' 0"	23' 8"	23' 5"
2 x 6 x 0.045 x 0.120 SMB	30' 0"	29' 3"	28' 7"	28' 0"	27' 6"	27' 0"	26' 7"	26' 4"	25' 10"
2 x 7 x 0.055 x 0.120 SMB	32' 7"	31' 9"	31' 0"	30' 4"	29' 9"	29' 3"	28' 9"	28' 4"	27' 11"
2 x 8 x 0.072 x 0.224 SMB	38' 4"	37' 2"	36' 3"	35' 5"	34' 9"	34' 1"	33' 5"	32' 11"	32' 5"
2 x 9 x 0.072 x 0.224 SMB	41' 1"	39' 11"	38' 11"	38' 0"	37' 2"	36' 6"	35' 10"	35' 3"	34' 8"
2 x 9 x 0.072 x 0.306 SMB	43' 3"	42' 0"	40' 11"	39' 11"	39' 1"	38' 4"	37' 7"	37' 0"	36' 5"
2 x 10 x 0.092 x 0.389 SMB	49' 0"	47' 6"	46' 2"	45' 0"	44' 0"	43' 2"	42' 4"	41' 7"	40' 11"

ALLOWABLE SPANS for Primary Members in Screen Roofs (Beams)
 FOR ALL Wind Zones of 140 mph and less
 (Table applies to Exposure "B")

Applied Load = 18 lbs./sq.ft.
 Maximum Wall Height = 16 ft.
 Unit Load = Design Pressure = 10 lbs./sq.ft.

Roof Beams	Load Width and Spacing								
	4.0'	4.5'	5.0'	5.5'	6.0'	6.5'	7.0'	7.5'	8.0'
2 x 4 x 0.045 x 0.100 SMB	21' 11"	21' 5"	21' 0"	20' 7"	20' 3"	20' 0"	19' 8"	19' 6"	19' 3"
2 x 5 x 0.050 x 0.116 SMB	24' 10"	24' 3"	23' 9"	23' 3"	22' 10"	22' 6"	22' 2"	21' 10"	21' 7"
2 x 6 x 0.045 x 0.120 SMB	27' 10"	27' 1"	26' 6"	25' 11"	25' 5"	25' 0"	24' 7"	24' 3"	23' 11"
2 x 7 x 0.055 x 0.120 SMB	30' 3"	29' 5"	28' 9"	28' 1"	27' 7"	27' 1"	26' 8"	26' 3"	25' 11"
2 x 8 x 0.072 x 0.224 SMB	35' 7"	34' 7"	33' 9"	32' 11"	32' 3"	31' 8"	31' 1"	30' 7"	30' 2"
2 x 9 x 0.072 x 0.224 SMB	38' 3"	37' 2"	36' 2"	35' 4"	34' 7"	33' 11"	33' 4"	32' 9"	32' 3"
2 x 9 x 0.072 x 0.306 SMB	40' 4"	39' 2"	38' 1"	37' 2"	36' 4"	35' 8"	35' 0"	34' 5"	33' 10"
2 x 10 x 0.092 x 0.389 SMB	45' 8"	44' 3"	43' 0"	42' 0"	41' 0"	40' 2"	39' 5"	38' 9"	38' 1"

ALLOWABLE SPANS for Primary Members in Screen Walls (Posts/Columns)
 FOR ALL Wind Zones of 140 mph and less
 (Table applies to Exposure "B")

Applied Load = 18 lbs./sq.ft.

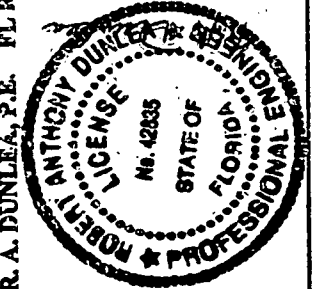
Post / Column	Load Widths or Spacing								
	4.0'	4.5'	5.0'	5.5'	6.0'	6.5'	7.0'	7.5'	8.0'
2 x 4 x 0.045 x 0.100 SMB	9' - 11"	9' - 5"	8' - 11"	8' - 6"	8' - 1"	7' - 10"	7' - 6"	7' - 3"	7' - 0"
2 x 5 x 0.050 x 0.116 SMB	11' - 7"	10' - 11"	10' - 5"	9' - 11"	9' - 6"	9' - 1"	8' - 9"	8' - 6"	8' - 3"
2 x 6 x 0.050 x 0.120 SMB	11' - 8"	11' - 0"	10' - 5"	9' - 11"	9' - 6"	9' - 1"	8' - 10"	8' - 6"	8' - 3"
2 x 7 x 0.055 x 0.120 SMB	12' - 9"	12' - 1"	11' - 5"	10' - 11"	10' - 5"	10' - 0"	9' - 8"	9' - 4"	9' - 0"
2 x 8 x 0.072 x 0.224 SMB	19' - 11"	18' - 9"	17' - 10"	16' - 11"	16' - 3"	15' - 8"	15' - 1"	14' - 7"	14' - 1"

Note: Secondary members for the walls shall be selected from the Table above.

- 1. Florida Building Code 2004 - Building
 - 2. Florida Building Code 2004 - Residential
 - 3. Florida Building Code 2004 - Existing Building
 - 4. Florida Building Code 2004 - Plumbing
 - 5. Florida Building Code 2004 - Mechanical
 - 6. Florida Building Code 2004 - Fuel Gas
 - 7. Florida Fire Prevention Code - 2004
 - 8. National Electric Code (NFPA 70 - 70A)
 - 9. Florida County Code of Laws and Ordinances
 - 10. F.M.A. National Flood Insurance Program
 - 11. Building Department - 2004
- 9/21/04

NAME: Shots
 ADDRESS: 46 Rivista Dr
 CITY/STATE: Stuart FL 34996

R. A. DUNLEA, P.E. FL Reg. No. 42835



GOODMAN'S SCREEN & REPAIR CO., INC.

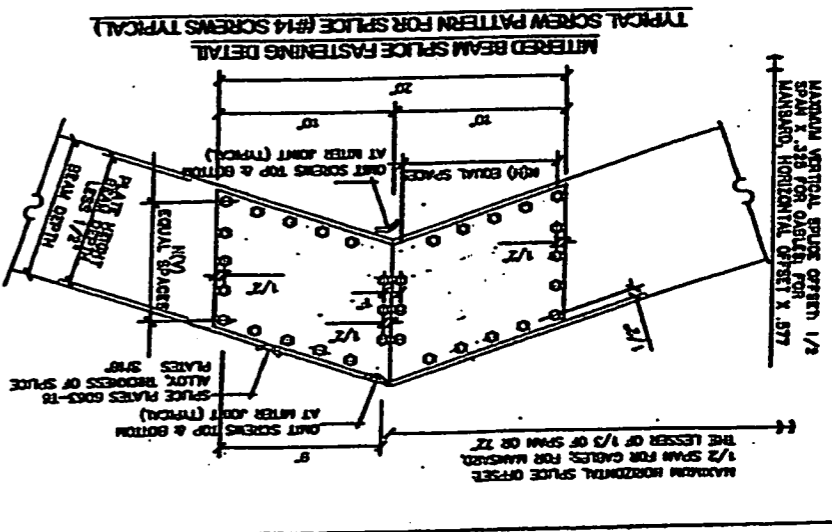
"Let Your Home Be Our Reputation"
 P. O. Box 0585, Jensen Beach, FL 34958
 Office (772) 286-0665 * Fax (772) 283-1676

James D. Goodman, President

POOL SCREEN ENCLOSURE
 (SHEET 1 OF 4)

SEP 13 2006

SPECIFICATION NOTES AND DESIGN PARAMETERS
VARIOUS CONNECTIONS AND BRACING DETAILS

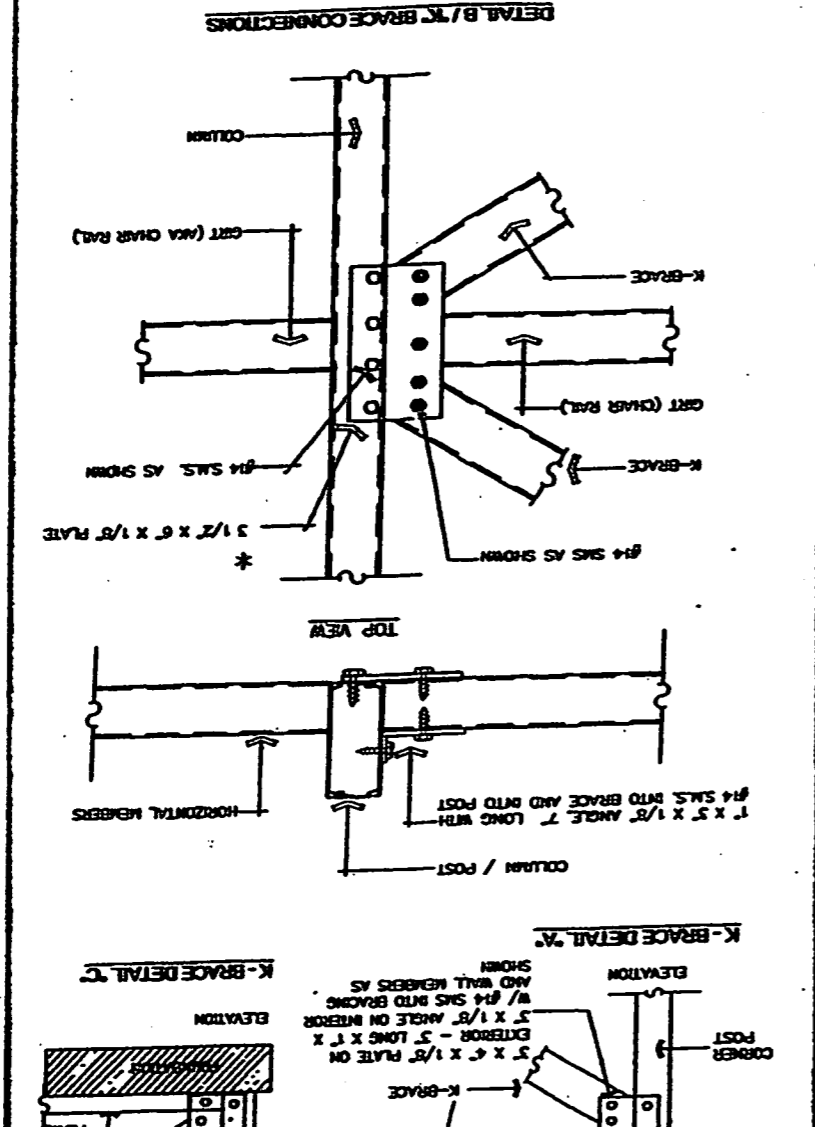
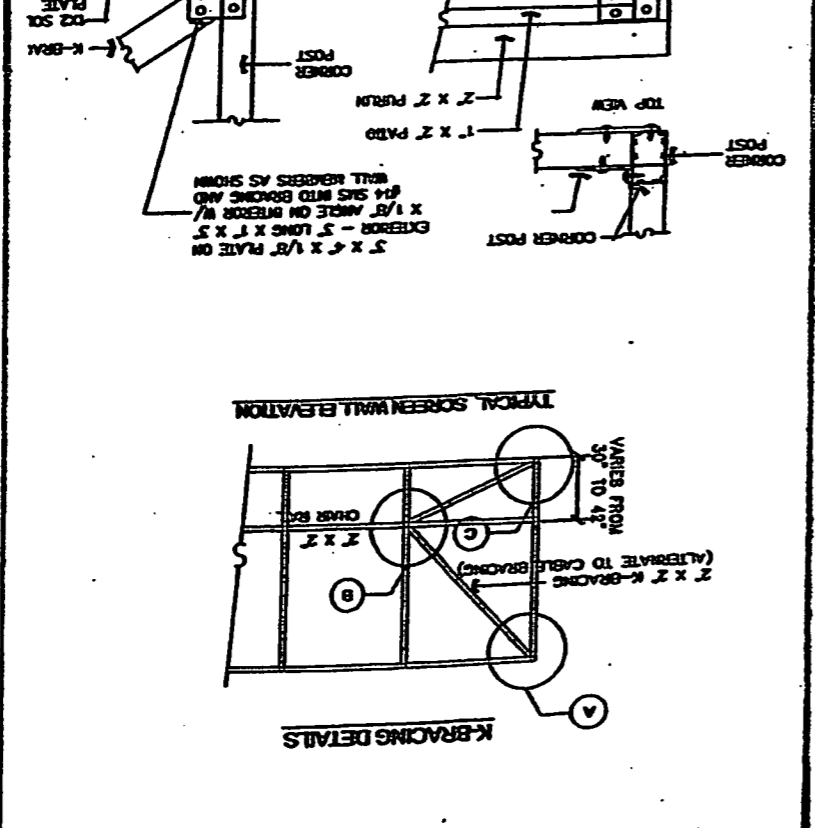
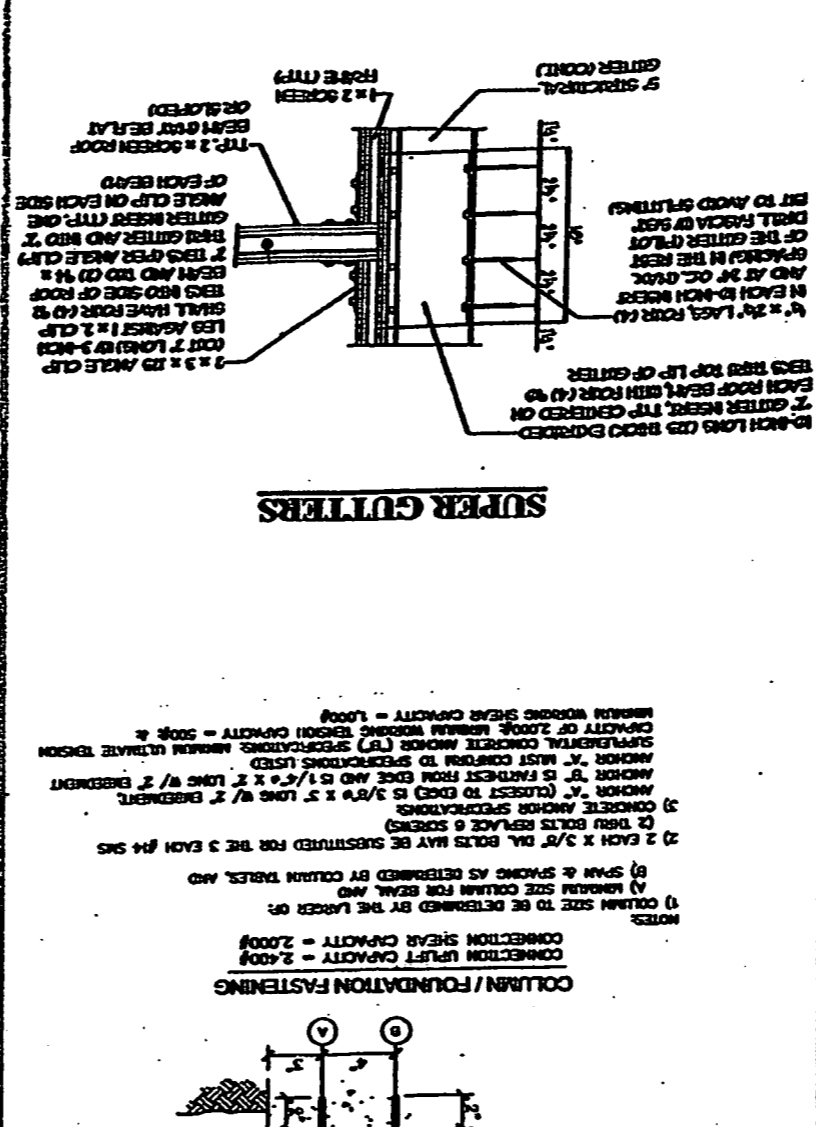
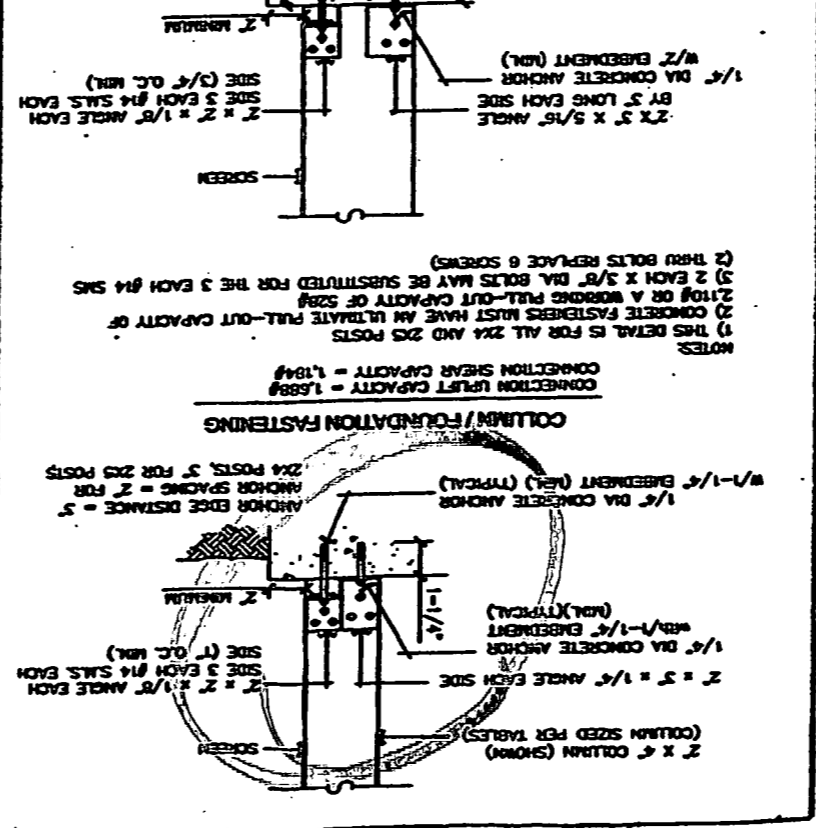
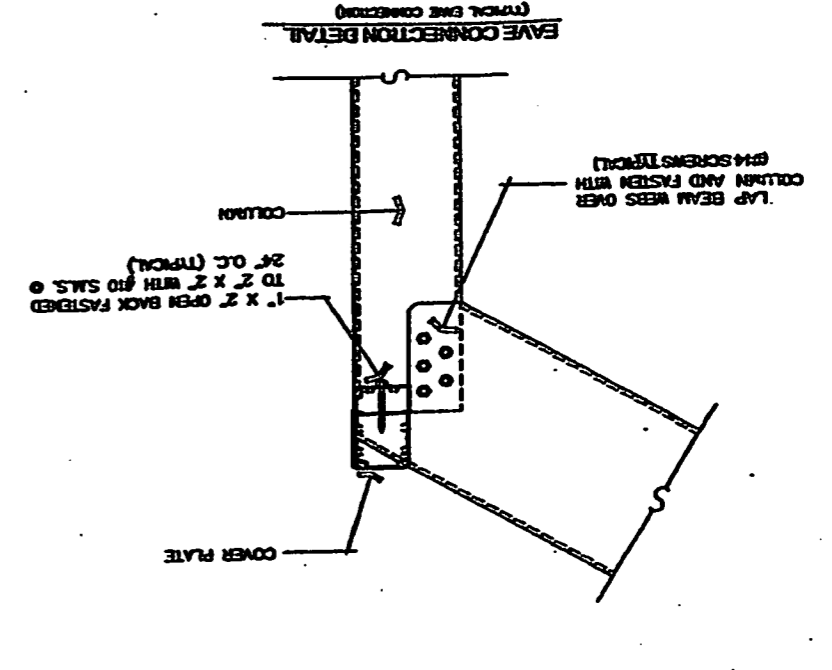


BEAM SPLICE DETAILS

Beam Size	Splice Length	Splice Spacing	Fasteners	Notes
2 X 4 X 0.050 X 10.100 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.175 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.250 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.325 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.400 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.475 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.550 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.625 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.700 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.775 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.850 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 10.925 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.000 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.075 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.150 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.225 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.300 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.375 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.450 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.525 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.600 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.675 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.750 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.825 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.900 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 11.975 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.050 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.125 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.200 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.275 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.350 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.425 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.500 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.575 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.650 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.725 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.800 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.875 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 12.950 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.025 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.100 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.175 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.250 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.325 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.400 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.475 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.550 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.625 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.700 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.775 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.850 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 13.925 SMB	14"	20"	2"	1"
2 X 4 X 0.050 X 14.000 SMB	14"	20"	2"	1"

BEAM SPLICE NOTES

- 1) SPLICE DETAIL SHOWN MAY BE MODIFIED FOR VARIOUS APPLICATIONS
- 2) CABLE SPLICE MAXIMUM OFFSET 1/2 ALLOWABLE SPAN, VERTICAL OFFSET AT TO DECKERS (MAXIMUM)
- 3) MAXIMUM SPAN MAXIMUM OFFSET 1/3 OF ALLOWABLE SPAN OR 6" - 0" (WHICHEVER IS LESS)
- 4) MAXIMUM SPAN MAXIMUM OFFSET 1/3 OF ALLOWABLE SPAN OR 6" - 0" (WHICHEVER IS LESS)
- 5) MAXIMUM SPAN MAXIMUM OFFSET 1/3 OF ALLOWABLE SPAN OR 6" - 0" (WHICHEVER IS LESS)
- 6) MAXIMUM SPAN MAXIMUM OFFSET 1/3 OF ALLOWABLE SPAN OR 6" - 0" (WHICHEVER IS LESS)
- 7) MAXIMUM SPAN MAXIMUM OFFSET 1/3 OF ALLOWABLE SPAN OR 6" - 0" (WHICHEVER IS LESS)
- 8) MAXIMUM SPAN MAXIMUM OFFSET 1/3 OF ALLOWABLE SPAN OR 6" - 0" (WHICHEVER IS LESS)
- 9) MAXIMUM SPAN MAXIMUM OFFSET 1/3 OF ALLOWABLE SPAN OR 6" - 0" (WHICHEVER IS LESS)
- 10) MAXIMUM SPAN MAXIMUM OFFSET 1/3 OF ALLOWABLE SPAN OR 6" - 0" (WHICHEVER IS LESS)

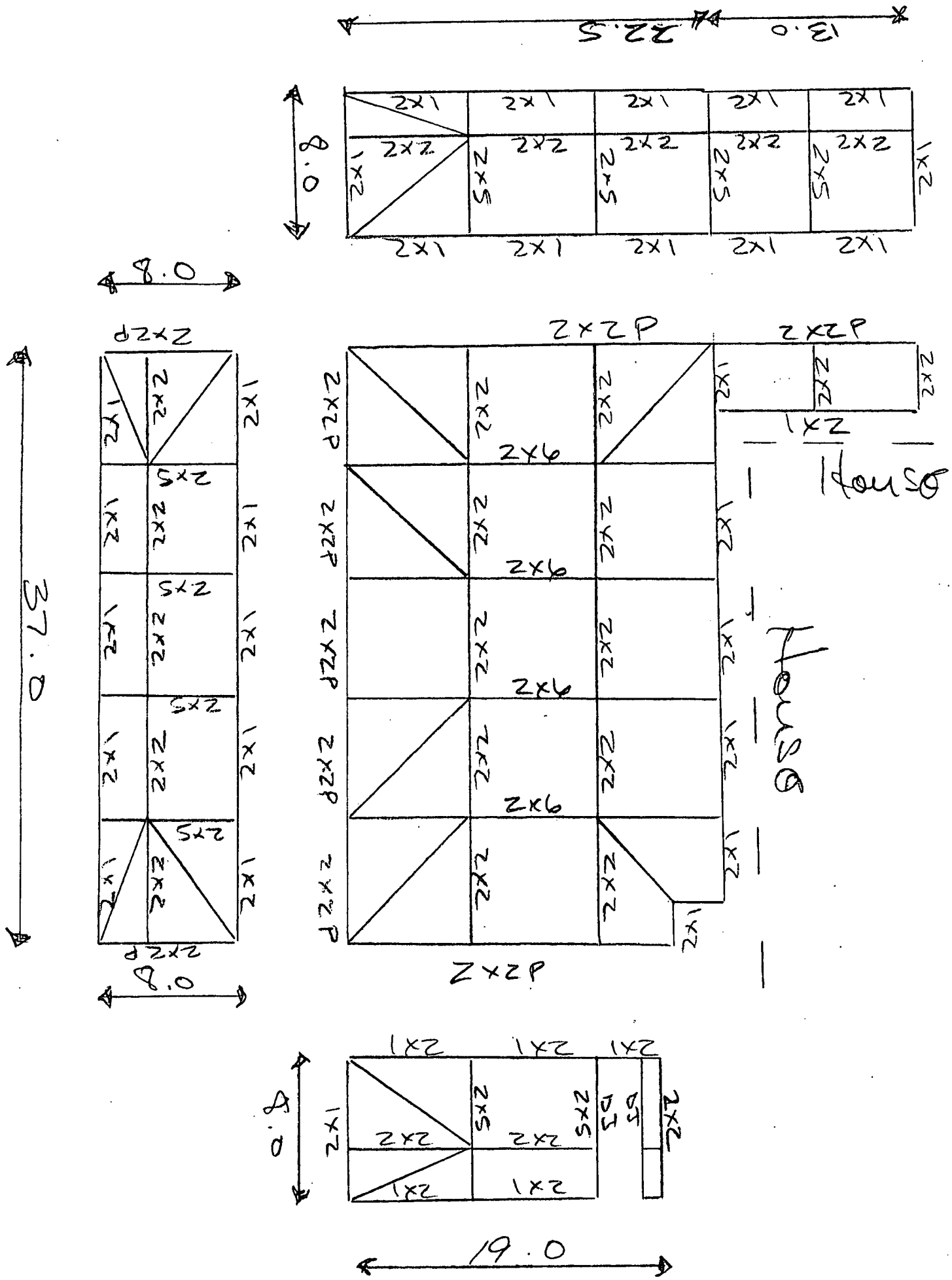


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 "Let Your Home Be Our Reputation"
 P. O. Box 0585, Jensen Beach, FL 34958
 Office (772) 286-0665 • Fax (772) 283-1676
 James D. Goodman, President

ROBERT ANTHONY GUTIERREZ
 LICENSED PROFESSIONAL ENGINEER
 STATE OF FLORIDA
 No. 48388
 SEP 13 2006

NAME: shorts
 ADDRESS: 46 RIVINGTON ST
 CITY/STATE: Stuart FL 34996
 POOL SCREEN ENCLOSURE
 (SHEET 2 OF 4)

SITE SPECIFIC DRAWING FOR A MANSARD ROOF



GOODMAN'S SCREEN & REPAIR CO., INC.
 "Let Your Home Be Our Reputation"
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 Office (772) 286-0665 * Fax (772) 283-1676
 James D. Goodman, President

R. A. DUNLEA, P.E. FL Reg. No. 42835

 SEP 13 2006

NAME *Shotts*
 ADDRESS *46 Rio Vista Dr*
 CITY/STATE *Stuart FL 34996*
 POOL SCREEN ENCLOSURE
 (SHEET 3 OF 4)

2' CONCRETE CURB

R=245.00
L=85.00
D=19°52'41"

CATCH BASIN

SET 3/8" IRON ROD
AND CAP (LB 6018)

21.17'

CONCRETE
DRIVE

COVERED ENTRY

22.70'

18.28'

ONE STORY
CBS RESIDENCE
#46

17.36'

7.51'

29.90'

COVERED CONCRETE DECK

LOT 91

CONCRETE POOL
AND PATIO DECK

20.54'

33.21'

Page 4 of 4
shots
46 Rio Vista Dr
Stuart FL 34996

FOUND 4"x4" CONCRETE
MONUMENT (NO I.D.)

1562°29'57"W 100.00'(P/M)

EDGE CORNER
(0.96' EAST)

N33°21'27"W 167.86' (NON RADIAL)

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9/29, 2006 Page 3 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
0123		FENCE FINAL	PASS	
11	18 CASTLE HILL			INSPECTOR: <i>[Signature]</i>
0126		POOL ENCLOSURE	PASS	
8	18 INDIALUCIE			INSPECTOR: <i>[Signature]</i>
0130		POOL ENCLOSURE	FAIL	9/29/06
5	46 RIO USTA			INSPECTOR: <i>[Signature]</i>
0118		GAS LINE	PASS	
10	97 N.S.P.R.			INSPECTOR: <i>[Signature]</i>
0088		V.G. PLUMBING	PASS	
9	94 N.S.P.R.			INSPECTOR: <i>[Signature]</i>
0040		V.G. TANK & LINE	PASS	
4	26 SIMARA ST.			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 46 RIO VISTA

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

FINAL SCREEN ENCL

NO PERMIT PASTED.

\$40 FEE

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: 9/29

[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10-16, 2006 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<i>Tree</i>	<i>Zechiel</i>	<i>Tree</i>	<i>PASS</i>	
<i>3</i>	<i>1 Riverview DR OB</i>			INSPECTOR: <i>[Signature]</i>
<i>10130</i>		<i>SCREEN ENCL.</i>	<i>PASS</i>	<i>[Signature]</i>
<i>4</i>	<i>46 RIO VISTA</i>			INSPECTOR: <i>[Signature]</i>
<i>8411</i>	<i>COBIELLA</i>	<i>LATH</i>	<i>PASS</i>	
<i>5</i>	<i>8 N SEWALLS PT.</i>			INSPECTOR: <i>[Signature]</i>
		<i>BLINDS</i>		
	<i>1 PALMETTO</i>	<i>SECURITY LIGHT.</i>		INSPECTOR:
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:

OTHER: _____

8960

A/C

CHANGEOUT



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

BUILDING PERMIT CARD

**THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK
 A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	8960	DATE ISSUED:	JULY 24, 2008
SCOPE OF WORK:	AC CHANGEOUT		
CONDITIONS :			
CONTRACTOR:	NISAIR		
PARCEL CONTROL NUMBER:	123841002000009106	SUBDIVISION	RIO VISTA – LOT 91
CONSTRUCTION ADDRESS:	46 RIO VISTA DR		
OWNER NAME:	SHUTTS		
QUALIFIER:	PHILIP NISA	CONTACT PHONE NUMBER:	772-466-8115

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

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

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

REQUIRED INSPECTIONS

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

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

RECEIVED
DATE: 7-22-08
TOWN OF SEWALL'S POINT

Date: 7/22/08

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: NANCY SHUTTS Phone (Day) 260-1697 (Fax) _____

Job Site Address: 46 RIO VISTA DRIVE City: STUART State: FL Zip: 34996

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

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

Scope of work: CHANGE OUT AIR HANDLER + CONDENSER (LIKE FOR LIKE)

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 4800.00
(Notice of Commencement required when over \$2500 prior to first inspection)
Is subject property located in flood hazard area? V _____ A9 _____ A5 _____ 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: NISAIR Air Conditioning Phone: 772 466-8115 Fax: 772 468-9752

Street: 3700 S OUS HURONE FORT PIERCE City: ← State: FL Zip: 34982

State Registration Number: CA0641199 State Certification Number: _____ Municipality License Number: _____

PROJECT SUPERINTENDANT: Philip Nisa, Jr CONTACT NUMBER: (772) 260-2068

ARCHITECT: Ala Lic. #: _____ Phone Number: _____

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

ENGINEER: Lawrence 283-0904 Lic. #: _____ Phone Number: _____

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

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

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

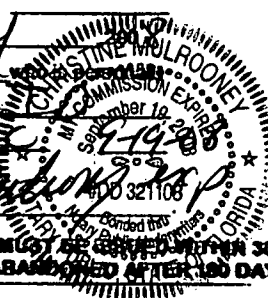
NOTICES TO OWNERS AND CONTRACTORS:
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS TO YOUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 14.04.

THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ALL NULL AND VOID PERMITS. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105A.1, 105A.1.1 - 5.
I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.

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

OWNER SIGNATURE (required)
Nancy Shutts
State of Florida, County of: Martin
This the 22nd day of July
by Nancy Shutts
known to me or produced as identification.
My Commission Expires: _____

CONTRACTOR SIGNATURE (required)
Philip Nisa, Jr
On State of Florida County of: Martin
This the 22nd day of July 2008
by Philip Nisa, Jr who is personally known to me or produced as identification.
As identification: Philip Nisa, Jr
My Commission Expires: _____



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



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

Site Provided by...
governmentmax.com T1.12

Summary

print Owner 2 of 2

Parcel Info

Summary

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

Parcel ID	Unit Address	SerialIndex ID Order	Commercial	Residential
12-38-41-002-000-00910-6	46 RIO VISTA DR	27602Owner	0	1

Summary

Property Location 46 RIO VISTA DR
Tax District 2200 Sewall's Point
Account # 27602
Land Use 101 0100 Single Family
Neighborhood 120250
Acres 0.329

Legal Description
Property Information
 RIO VISTA S/D LOT 91 CODE 40 EX EXPIRES IN 1990

Search By

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

Owner Information
Owner Information
 SHUTTS, NANCY J

Mail Information
 46 RIO VISTA DR
 STUART FL 34996-6422

Assessment Info
 Front Ft. 0.00

Market Land Value \$290,000
Market Impr Value \$180,020
Market Total Value \$470,020

Site Functions

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

Recent Sale
 Sale Amount \$164,000

Sale Date 11/12/1987
Book/Page 0742 0644

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

Legal disclaimer / Privacy Statement

Data updated on 07/16/2008



INSTR # 2096705 OR BK 02341 PG 0878 RECD 07/22/2008 08:50:21 AM
Pg 0878 (1 of 9)
MARSHA EWING MARTIN COUNTY DEPUTY CLERK C Hunter

NOTICE OF COMMENCEMENT
TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00

PERMIT #: _____ TAX FOLIO #: 12-38-41-002-000-00910-6
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):
Rio Vista Lot 91 Code 40

GENERAL DESCRIPTION OF IMPROVEMENT: Change out of a/c (like for like)

OWNER NAME: Nancy Shotts
ADDRESS: 462 Rio Vista Drive Stuart FL 34996
PHONE NUMBER: 772-260-1697 FAX NUMBER: _____

INTEREST IN PROPERTY: owner

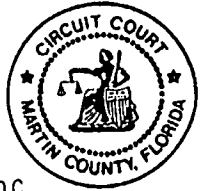
NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER):
n/a

CONTRACTOR: Nis Air Air Conditioning
ADDRESS: 3700 So US Hwy 1 Fort Pierce FL 34982
PHONE NUMBER: (772) 466 7415 FAX NUMBER: (772) 466 9752

SURETY COMPANY (IF ANY): N/A
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____
BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY: N/A
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____

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



MARSHA EWING, CLERK
BY: [Signature] DC
DATE: 7/22/08

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: N/A
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES N/A OF N/A TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.
PHONE NUMBER: N/A FAX NUMBER: N/A

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
(THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED).
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

[Signature]
SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

SIGNATORY'S TITLE/OFFICE: owner
THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 22 DAY OF JULY, 2008
BY: Christine Mulrooney NOTARY FOR Nancy Shotts
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN _____ OR PRODUCED IDENTIFICATION
TYPE OF IDENTIFICATION PRODUCED: FL DR LIC
[Signature]
NOTARY SIGNATURE



UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS IN IT ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF (SECTION 92.52, FLORIDA STATUTES)

[Signature]
(Signature of Natural Person Signing Above)

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri **7:30** 2008 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8943	Schweder	Final soffit	FAIL	
2	4 Redgeland JASD			INSPECTOR: <i>[Signature]</i>
8145	Geisinger	Final	FAIL	
4 11 ⁰⁰	8 Castle Hill OB			INSPECTOR: <i>[Signature]</i>
8894	Kurtin	Final	PASS	CLOSE
1	5 Mandalay Rd Stuart Fence			INSPECTOR: <i>[Signature]</i>
8955	Duane	Final		
9AM	485 Sewalls OB		Cancel	INSPECTOR:
8928	Colston	roughing in		
	WDA removed			
	Tom Brown			INSPECTOR:
8960	Shuts VAPOM	Final A/C	FAIL	
3 ?	46 Rio Vista Nislin			INSPECTOR: <i>[Signature]</i> call owner 260-1697 to meet you there
8937	TAPPER	GAS U.G.	PASS	IN PLACE PER GARY @ GAS CO.
	22 ISLAND EMER. ELEC.	RIBBON		INSPECTOR: <i>[Signature]</i>

OTHER: _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 46 RIO VISTA

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.

A/C CHANGE OUT

SECURE AHU DISCONNECT
BOX & BAKED BOARD

INSULATE CONDENSATE PIPING
EXPOSED IN ATTIC.

SEAL REF. LINE CHASE AT
BOTTOM.

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: 7/30

A handwritten signature in black ink, appearing to be "M. J.", is written over a horizontal line.

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8-1, 2008

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1305	HB Assoc 3766 SE Ocean Roofman	Final	PASS	Close INSPECTOR: A
8964	HB ASSOC 3762 SE Ocean Roofman	in-progress	CANCEL	INSPECTOR: A
8962	CD2 75 N Sewalls SDH	footer	PASS	INSPECTOR: A
8937	Tapper 22 Island Rd Energy Electric	Final	PASS	Close INSPECTOR: JMW
8960	Shiras 46 Rio Vista NIS Air	Final	PASS	Close INSPECTOR: JMW
day 4	Muir 14 Perruinkle La Fine Homes by Lick	Final-paves	PASS	Close INSPECTOR: JMW
7732	Muir 14 Perruinkle La OB	Final-sobbit	PASS	Close INSPECTOR: JMW

OTHER: ~~XXXXXXXXXX~~ ~~XXXXXXXXXX~~ ~~XXXXXXXXXX~~

9214

REPLACE

FRONT DOOR



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:	9214	DATE ISSUED:	JULY 23, 2009
SCOPE OF WORK:	REPLACE FRONT DOOR		
CONDITIONS :			
CONTRACTOR:	OB		
PARCEL CONTROL NUMBER:	123841-002-000-009106	SUBDIVISION	RIO VIST - LOT 91
CONSTRUCTION ADDRESS:	46 RIO VISTA DR		
OWNER NAME:	SHUTTS		
QUALIFIER:	OB	CONTACT PHONE NUMBER:	260-1697

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.

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 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS 8:30AM TO 12:00PM - MONDAY, WEDNESDAY & FRIDAY**

REQUIRED INSPECTIONS

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

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

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

Date: 7/22/09 Permit Number: _____

OWNER/TITLEHOLDER NAME: Nancy Shurts Phone (Day) 260-1097 (Fax) _____

Job Site Address: 46 Pic Vista Dr City: Stuart State: FL Zip: 34996

Legal Description: FR to Vista Lot 91 Parcel Control Number: 12-38-41-002-000-00910-6

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

Scope of work (please be specific): Replace Front Door

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 2,000
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 ___ AE9 ___ AE8 ___ X ___
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

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

State License Number: _____ OR: Municipality: _____ License Number: _____

LOCAL CONTACT: _____ Phone Number: _____

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

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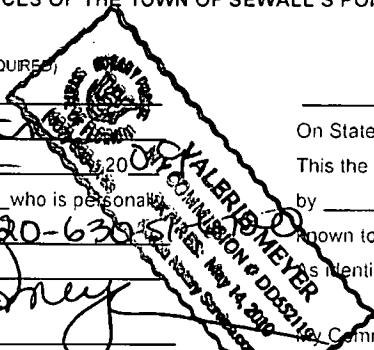
*******A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*******

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 OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Nancy Shurts
State of Florida, County of: Martin
This the 22nd day of July
by Nancy Shurts who is personally
known to me or produced RD# 8820-6320
as identification. Valley
Notary Public

CONTRACTOR SIGNATURE: (required)

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

Site Provided by...
 governmax.com T1.11

Summary

print [navigation icons] Owner 2 of 2

Parcel Info

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
12-38-41-002-000-00910-6	46 RIO VISTA DR	27602	Owner	0	1

Summary

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

Summary

Property Location 46 RIO VISTA DR
Tax District 2200 Sewall's Point
Account # 27602
Land Use 101 0100 Single Family
Neighborhood 120250
Acres 0.329

Legal Description

Property Information
 RIO VISTA S/D LOT 91 CODE 40 EX EXPIRES IN 1990

Search By

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

Owner Information
Owner Information
 SHUTTS, NANCY J

Mail Information
 46 RIO VISTA DR
 STUART FL 34996-6422

Assessment Info
Front Ft. 0.00

Market Land Value \$242,250
Market Impr Value \$173,380
Market Total Value \$415,630

Site Functions

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

Recent Sale
Sale Amount \$164,000

Sale Date 11/12/1987
Book/Page 0742 0644

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

Legal disclaimer / Privacy Statement

Data updated on 6/22/2009





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

**OWNER/BUILDER QUESTIONNAIRE AND DISCLOSURE STATEMENT
 MUST BE COMPLETED AND REVIEWED PRIOR TO PERMIT ISSUANCE**

**APPLICABLE ONLY TO OWNER-OCCUPIED SINGLE FAMILY RESIDENCES
 AND COMMERCIAL IMPROVEMENTS LESS THAN \$75,000 IN VALUE**

NOTICE: FLORIDA STATUTE 489 REQUIRING CONSTRUCTION TO BE DONE ONLY BY LICENSED CONTRACTORS PROVIDES AN EXEMPTION FROM LICENSING FOR A PROPERTY OWNER WHO ACTS AS HIS/HER OWN CONTRACTOR UNDER SPECIFIC CONDITIONS. ANSWERS TO THE FOLLOWING QUESTIONS ARE ESSENTIAL TO DETERMINE IF THOSE STATE QUALIFICATIONS ARE SATISFIED BY AN OWNER/BUILDER APPLICANT.

ALL QUESTIONS MUST BE ANSWERED. IF A QUESTION DOES NOT APPLY, INDICATE BY WRITING "N/A"

Owner/Builder Applicant Name: Nancy Shuttts

Site address of the proposed building work: 460 Rio Vista Dr

Name of legal title owner of the address above: Nancy Shuttts

Describe the scope of work for the proposed new construction: REPLACE FRONT DOOR

Name of Architect of Record: N/A Structural Engineer of Record: N/A

Who will supervise the trade work to meet the applicable code? _____

What provisions have you made for Liability and Property Damage Insurance? _____

What provisions exist for withholding Social Security and Federal Income Taxes, as required by Federal Law, from wages paid to people you hire who are not licensed? N/A

What previous Owner/Builder improvements have you done in the State of Florida?

Location: N/A Scope of Work Done: _____ Year: _____

Location: _____ Scope of Work Done: _____ Year: _____

What code books do you have available for reference? Building: _____

Electric: _____ Plumbing: _____ HVAC: _____

Other: _____

I have internet access and will view The Florida Building code at www.floridabuilding.org YES NO _____

Do you understand that as the permit holder you are liable for following all Local, County, State and Federal codes, laws and requirements, and you are also liable for anyone injured on the construction site? yes (yes/no)

Have you consulted with your Homeowner's Insurance Agent? _____ Lender? _____ Attorney? _____

In order to assure your success in this project, please signify your awareness that the function of the building department is to issue you a building permit and verify code compliance through plan review and the inspection process. I am aware that town staff is not obligated to offer supervision, design or instructional advice prior or during my project. NS (initials).



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

OWNER/BUILDER DISCLOSURE STATEMENT

NOTICE: STATE LAW REQUIRES THAT ALL PERMITTING AGENCIES PROVIDE INDIVIDUALS SUBMITTING APPLICATIONS FOR OWNER/BUILDER PERMITS THE FOLLOWING INFORMATION:

1. THE TOWN OF SEWALL'S POINT CODE OF LAWS AND ORDINANCES REQUIRES THAT ANY PERSON DESIRING TO ENGAGE IN BUSINESS AS A CONTRACTOR IN THE TOWN OF SEWALL'S POINT BE A HOLDER OF A CERTIFICATE OF COMPETENCY.
2. FLORIDA STATUTES 489.103 (7) ALLOWS YOU, AS A PROPERTY OWNER, AN EXEMPTION TO CONSTRUCT OR IMPROVE A SINGLE FAMILY DWELLING AND ACCESSORY-USE STRUCTURES ON SAID PROPERTY FOR YOUR OWN USE OR OCCUPANCY WITHOUT HAVING A CERTIFICATE OF COMPETENCY.
3. AS AN OWNER/BUILDER, YOU MUST PHYSICALLY PERFORM OR MATERIALLY SUPERVISE ALL CONSTRUCTION/IMPROVEMENTS SPECIFIED ON YOUR OWNER/BUILDER PERMIT AND YOU ARE TOTALLY RESPONSIBLE FOR ALL ACTIVITIES ASSOCIATED THEREWITH. OWNER/BUILDERS WHO WISH TO DO ELECTRICAL OR PLUMBING WORK MUST PASS A SHORT OPEN BOOK QUIZ ADMINISTERED BY THE BUILDING DEPARTMENT.
4. IF YOU DO NOT PHYSICALLY PERFORM A SPECIFIC PHASE OF SAID CONSTRUCTION/IMPROVEMENT, BUT CHOOSE TO SUB-CONTRACT IT, THEN SUCH CONSTRUCTION/IMPROVEMENT MUST BE SUB-CONTRACTED TO A LOCALLY LICENSED OR STATE CERTIFIED CONTRACTOR.
5. YOU MAY NOT HIRE AN UNLICENSED INDIVIDUAL WHO IN ANY MANNER ACTS IN THE CAPACITY OF A GENERAL CONTRACTOR, THAT IS, ONE WHO FULFILLS YOUR DUTIES UNDER PARAGRAPH (3) ABOVE.
6. UNDER AN OWNER/BUILDER PERMIT YOU MAY NOT CONSTRUCT A BUILDING WHICH YOU INTEND TO SELL OR LEASE. THE SALE OR LEASE, OR OFFERING FOR SALE OR LEASE, OF ANY SUCH STRUCTURE BY THE OWNER-BUILDER WITHIN 1 YEAR AFTER COMPLETION OF SAME CREATES A PRESUMPTION THAT THE CONSTRUCTION WAS UNDERTAKEN FOR PURPOSES OF SALE OR LEASE WHICH IS A VIOLATION OF THIS EXEMPTION.
7. THIS EXEMPTION SHALL NOT APPLY TO ANY PERSON WHO HAS LEASED, SOLD, OR OFFERED FOR SALE MORE THAN 1 STRUCTURE BUILT UNDER AN OWNER-BUILDER PERMIT IN ANY JURISDICTION WITHIN THE 5 YEARS IMMEDIATELY PRECEDING THE APPLICATION FOR A PERMIT.
8. THERE MUST BE A THIRTY-SIX (36) MONTH PERIOD BETWEEN THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY FOR THE INITIAL DWELLING AND THE SUBMITTAL OF AN OWNER/BUILDER APPLICATION FOR A SUBSEQUENT DWELLING. NO OTHER BUILDING PERMIT FOR A HOME SHALL BE ISSUED TO THAT OWNER/BUILDER, THE OWNER/BUILDER'S SPOUSE OR ANY MEMBER OF THE OWNER/BUILDER'S IMMEDIATE FAMILY UNDER EIGHTEEN YEARS OF AGE UNTIL THREE YEARS AFTER THE HOME BUILT UNDER THE FIRST BUILDING PERMIT HAS RECEIVED A CERTIFICATE OF OCCUPANCY.
9. ALL CONSTRUCTION IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDER PERMIT MUST BE IN STRICT COMPLIANCE WITH FLORIDA STATE STATUTE SECTION 489, SEWALL'S POINTS CODE OF LAWS AND ORDINANCES, ALL BUILDING & ZONING CODES AND REGULATIONS PERTAINING TO SINGLE FAMILY DWELLINGS, ACCESSORY USE STRUCTURES AS APPLICABLE.
10. YOUR OWNER/BUILDER EXEMPTION DOES NOT WAIVE ANY PERMIT CONDITIONS OR REQUIREMENTS OR WAIVE ANY PORTION OR PORTIONS OF ANY APPLICABLE BUILDING OR SWIMMING POOL CODES OR TOWN ORDINANCES.
11. ALL CONSTRUCTION/IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDING PERMIT MUST ALSO BE IN STRICT COMPLIANCE WITH ALL APPLICABLE ZONING REGULATIONS (QUESTIONS REGARDING ZONING REGULATIONS SHOULD BE DIRECTED TO THE TOWN OF SEWALL'S POINT AT 772-287-2455.)



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

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

12. YOU MUST BE FAMILIAR WITH AND CALL FOR THE REQUIRED INSPECTIONS OF ALL CONSTRUCTION/IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDER PERMIT.

13. AS AN OWNER/BUILDER YOU MUST VERIFY THAT ALL INDIVIDUALS OR FIRMS ENGAGED IN CONSTRUCTION/IMPROVEMENTS ACTIVITIES UNDER YOUR OWNER/BUILDER PERMIT ARE PROPERLY LICENSED AS REQUIRED BY STATE LAW OR LOCAL ORDINANCE.

14. AS AN OWNER/BUILDER, YOU ARE LIABLE TO AND RESPONSIBLE FOR THOSE PEOPLE HIRED TO ASSIST YOU. SUCH LIABILITY AND RESPONSIBILITY MAY INCLUDE, BUT IS NOT LIMITED TO, COMPLIANCE WITH APPLICABLE LAWS RELATING TO LIENS, WORKERS' COMPENSATION, SOCIAL SECURITY, UNEMPLOYMENT, FEDERAL WITHHOLDING TAX, AND PUBLIC LIABILITY.

15. I, AS AN OWNER/BUILDER, IN CONSIDERATION OF A BUILDING PERMIT ISSUED BY SEWALL'S POINT, FLORIDA, AGREE TO INDEMNIFY AND HOLD HARMLESS SAID SEWALL'S POINT, FLORIDA, ITS OFFICERS AND AGENTS FROM ANY AND ALL CLAIMS, DAMAGES, OR EXPENSES THAT SEWALL'S POINT MAY BE LIABLE FOR WHICH ARISE FROM THE CONSTRUCTION/IMPROVEMENTS ACCOMPLISHED IN CONNECTION WITH SAID BUILDING PERMIT.

I HEREBY ACKNOWLEDGE THAT I HAVE THOROUGHLY READ AND COMPLETELY UNDERSTAND THE PRECEDING PAGE OF THE OWNER/BUILDER DISCLOSURE STATEMENT.

ON THIS 15th DAY OF July, 2009.

PROPERTY ADDRESS 460 Rio Vista Dr

CITY Stuart STATE FL ZIP 34996

Signature of Nancy Shutt

SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 15th DAY OF July 2009

BY NANCY SHUTTS

PERSONALLY KNOWN [checked]

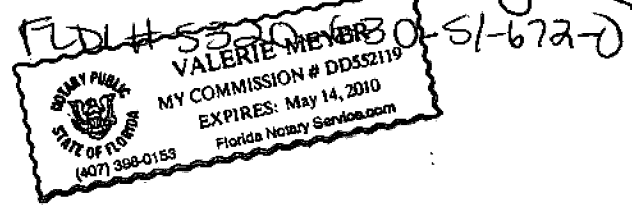
OR PRODUCED ID

TYPE OF ID

Signature of Janice K Webb

NOTARY SIGNATURE

Notary Public seal for Valerie Meyer, State of Florida, County of Martin, On this 15th day of July before me personally appeared Nancy Shutt...



WINDOW/DOOR SCHEDULE

ID NO	APPOX OPENING SIZE (WXH)	DESIGNATION	* TYPE	IMPACT PROTECTION		REMARKS
				IMPACT GLASS	SHUTTER	
	37" X 63"	25	SH		X	EXAMPLE
1	72" X 80"		Doors	X		
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
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27						
28						
29						
30						

FILE COPY

TOWN OF SEWALL'S POINT

THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE

DATE 6-23-09

BUILDING OFFICIAL

TOTAL GLAZED OPENING AREA FOR STRUCTURE: _____ S.F.

*PERCENTAGE OF NEW GLAZED AREA: _____ %
 (TOTAL INSTALLED GLAZED AREA DIVIDED BY TOTAL GLAZED OPENINGS FOR STRUCTURE)

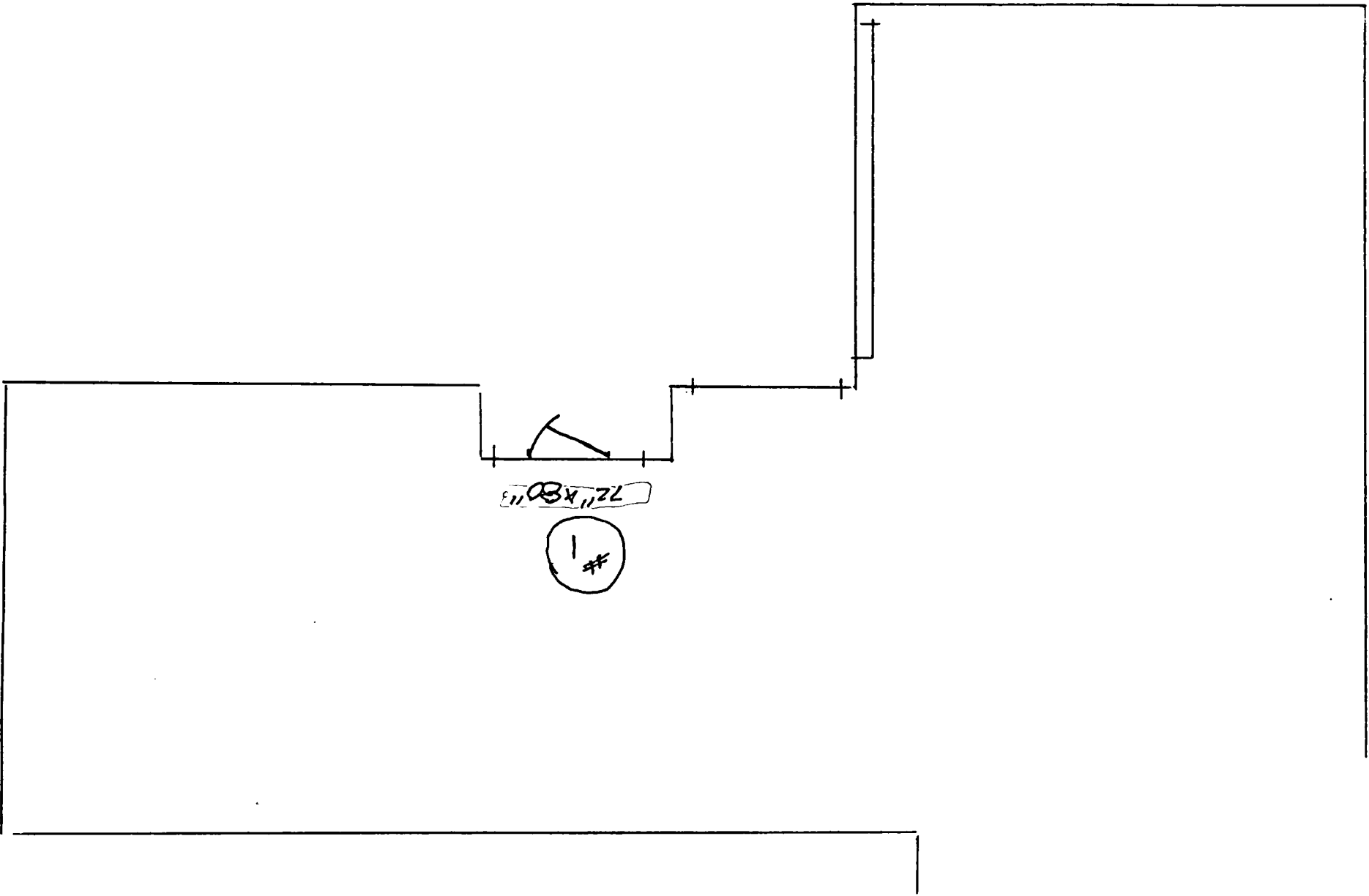
NOTE: The replacement of more than 25% of the aggregate area of exterior glazing (windows & doors) in one & two family dwellings within a 12 month period will require impact protection on all proposed glazed opening replacement (approved shutters or impact resistant glazing(as per 2004 FBC/ EXISTING BUILDING 507.3.

* TYPE WINDOWS

SH - SINGLE HUNG
 DH - DOUBLE HUNG

AWN - AWNING
 CAS - CASEMENT

SL - SLIDING
 FIX - FIXED



72" x 22"

1
#

R
W
B
C

R W Building Consultants, Inc.

Consulting and Engineering Services for the Building Industry
P.O. Box 230 Valrico, FL 33595 Phone 813.659.9197 Facsimile 813.754.9989

Florida Board of Professional Engineers Certificate of Authorization No. 9813

Product Evaluation Report

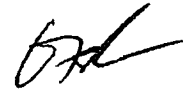
Report No.: FL-11321.3
Date: October 2, 2008
Product Category: Exterior Doors
Product sub-category: Swinging Exterior Door Assemblies
Product Name: Opaque Fiberglass Door
With Sidelites
Inswing/Outswing
"Impact"
Manufacturer: Builders Hardware, Inc.
5615 E. Powhatan Ave.
Tampa, FL 33610
Phone 800.966.7753 Facsimile 813.977.5632

Scope: This is a Product Evaluation report issued by R W Building Consultants, Inc. and Lyndon F. Schmidt, P.E. (System ID # 1998) for Builders Hardware, Inc. based on Rule Chapter No. 9B-72.070, Method 1d of the State of Florida Product Approval, Department of Community Affairs-Florida Building Commission.

RW Building Consultants and Lyndon F. Schmidt, P.E. do not have nor will acquire financial interest in the company manufacturing or distributing the product or in any other entity involved in the approval process of the product named herein.

This product has been evaluated for use in locations adhering to the Florida Building Code (2007 Edition).

See Drawing No. FL-11321.3 prepared by R W Building Consultants, Inc. and signed and sealed by Lyndon F. Schmidt, P.E. (FL # 43409) for specific use parameters.



Lyndon F. Schmidt, P.E.
FL No. 43409
October 2, 2008

Limitations

1. This product has been evaluated and is in compliance with the 2007 Florida Building Code (FBC) structural requirements excluding the "High Velocity Hurricane Zone" (HVHZ).
2. Product anchors shall be as listed and spaced as shown on details. Anchor embedment to base material shall be beyond wall dressing or stucco.
3. When used in areas requiring wind borne debris protection this product complies with Section 1609.1.2 of the FBC and does not require an impact resistant covering. This product meets missile level "D" and includes Wind Zone 4 as defined in ASTM E1996.
4. For 2x stud framing construction, anchoring of these units shall be the same as that shown for 2x buck masonry construction.
5. Site conditions that deviate from the details of drawing FL-11321.3 require further engineering analysis by a licensed engineer or registered architect.
6. See drawing FL-11321.3 for size and design pressure limitations.



Lyndon F. Schmidt, P.E.
FL No. 43409
October 2, 2008

Supporting Documents

A Drawing

1. Drawing No. FL-11321.3 prepared by R W Building Consultants, Inc. (Florida Board of Professional Engineers Certificate of Authorization No. 9813), signed and sealed by Lyndon F. Schmidt, P.E.

B Tests

1. Testing per ASTM E330-02, and ASTM E1996/1886-02 as performed by Testing Evaluation Laboratories, Inc. and reported in test report TEL 2004-07-13-016 Rev., signed by Wendell W. Haney, P.E.
2. Testing per TAS 201-94, 202-94 & TAS 203-94 as performed by Testing Evaluation Laboratories, Inc. and reported in test report TEL 07-0223-1, signed by Wendell W. Haney, P.E.

C Calculations

1. Product anchoring for tested specimens is in accordance with manufacturer's published recommendations as substantiated by tested specimens reported in test report TEL 2004-07-13-016 Rev. and TEL 07-0223-1. Additional product anchor analysis for loading conditions prepared, signed and sealed by Lyndon F. Schmidt, P.E.
2. Buck anchor analysis for loading conditions prepared, signed and sealed by Lyndon F. Schmidt, P.E.

D Other

1. Certificate of Participation issued by National Accreditation and Management Institute, certifying that Builders Hardware, Inc. is manufacturing products within a quality assurance program that complies with ISO/IEC 17020 and Guide 53.



Lyndon F. Schmidt, P.E.
FL No. 43409
October 2, 2008

Builders Hardware Inc.

5615 E. POWHATAN AVE
TAMPA, FL 33610

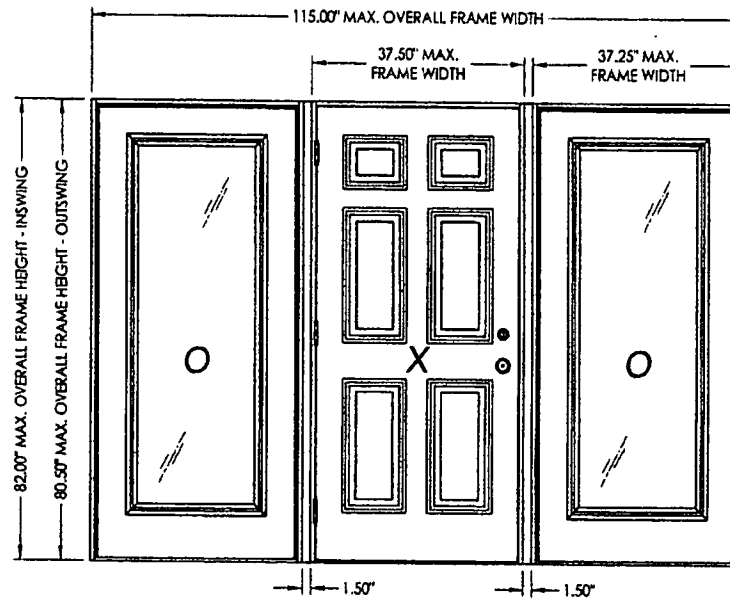
OPAQUE FIBERGLASS DOOR WITH SIDELITES INSWING / OUTSWING "IMPACT"

GENERAL NOTES

1. This product has been evaluated and is in compliance with the 2007 Florida Building Code (FBC) structural requirements excluding the "High Velocity Hurricane Zone" (HVHZ).
2. Product anchors shall be as listed and spaced as shown on details. Anchor embedment to base material shall be beyond wall dressing or stucco.
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TABLE OF CONTENTS

SHEET #	DESCRIPTION
1	Typical elevation, design pressures, & general notes
2	Door panel details
3	Sidelite panel details
4	Horizontal cross sections
5	Vertical cross sections
6	Vertical cross sections
7	Buck and frame anchoring - 2X buck masonry construction
8	Frame anchoring - 1X buck masonry construction
9	Bill of materials, glazing detail & components



SWING	OVERALL FRAME DIMENSION	OVERALL D.L.O. DIMENSION	GLASS TYPE	DESIGN PRESSURE (PSF)	
				POSITIVE	NEGATIVE
INSWING	115.00" x 82.00"	20.50" x 62.75"	G1	+50.0	-50.0
OUTSWING	115.00" x 80.50"	20.50" x 62.75"		+50.0	-50.0

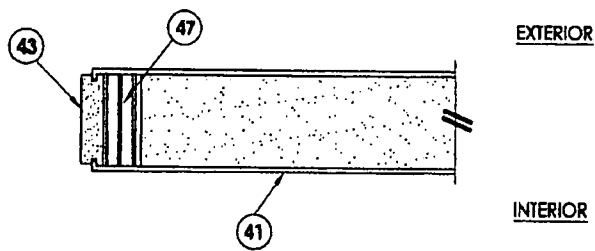
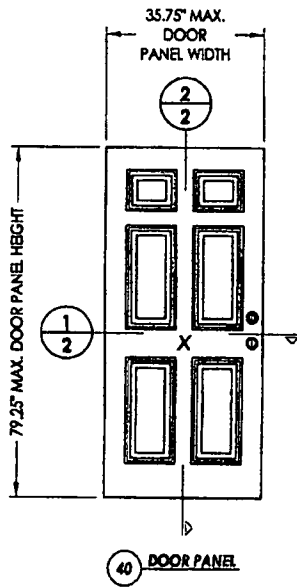
Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
P.O. Box 230 Volusia FL 32895
Phone No.: 813.699.9197
Florida Board of Professional Engineers
Certificate of Authorization No. 8813
6-2-08
Lyndon F. Simms, P.E., No. 45008

PRODUCT: BUILDERS HARDWARE FIBERGLASS DOOR

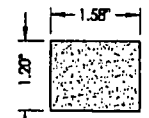
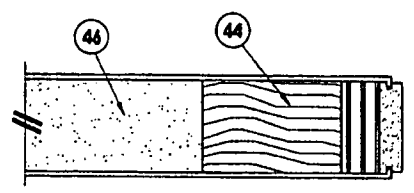
PART OR ASSEMBLY: TYPICAL ELEVATION, DESIGN PRESSURES & GENERAL NOTES

NO.	DATE	BY	REVISIONS

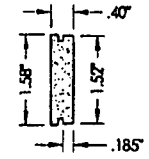
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SCALE: N.T.S.
DWG. BY: AL
CHK. BY: LFS
DRAWING NO.: FL-11321.3
SHEET 1 of 9



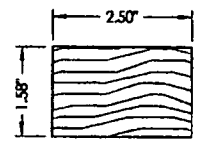
1 HORIZONTAL CROSS SECTION



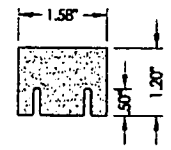
42 TOP RAIL
Cellular PVC



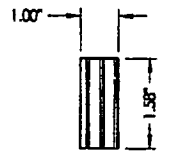
43 LATCH & HINGE STILE
Cellular PVC



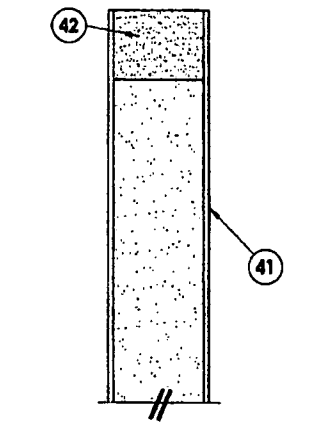
44 REINFORCEMENT WOOD
For lock



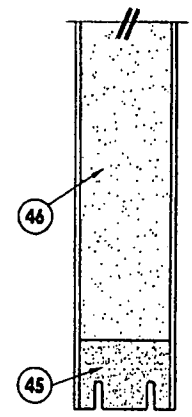
45 BOTTOM RAIL
Cellular PVC



47 LATCH & HINGE STILE
Reinforcement



1 VERTICAL CROSS SECTION



2 VERTICAL CROSS SECTION

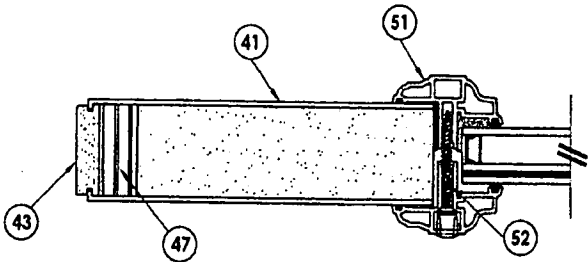
Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Vero Beach, FL 33595
 Phone No.: 813.636.9197
 Florida Board of Professional Engineers
 Certificate Of Authorization No. 9613
London F. Schmidt
 London F. Schmidt, P.E. No. 3349

PRODUCT:
 BUILDERS HARDWARE
 FIBERGLASS DOOR

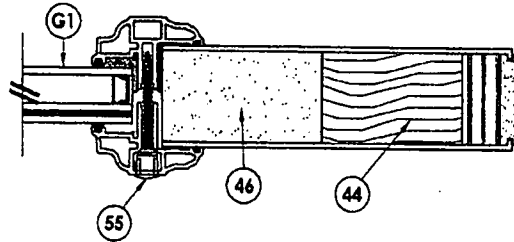
PART OR ASSEMBLY:
 DOOR PANEL DETAILS

NO.	DATE	BY	REVISIONS

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 SCALE: N.T.S.
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 CHK. BY: LFS
 DRAWING NO.:
 FL-11321.3
 SHEET 2 of 8

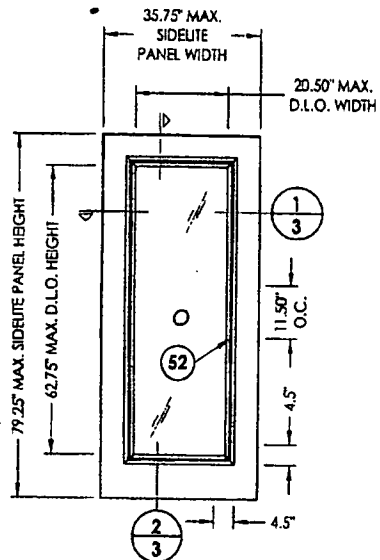


EXTERIOR

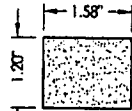


INTERIOR

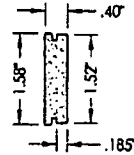
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3 HORIZONTAL CROSS SECTION



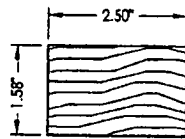
50 SIDELITE PANEL



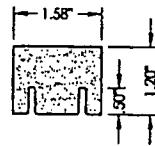
42 TOP RAIL
Cellular PVC



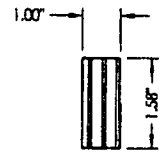
43 LATCH & HINGE STILE
Cellular PVC



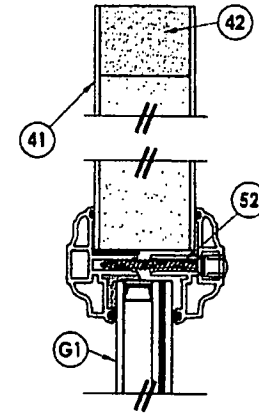
44 REINFORCEMENT WOOD
For lock



45 BOTTOM RAIL
Cellular PVC

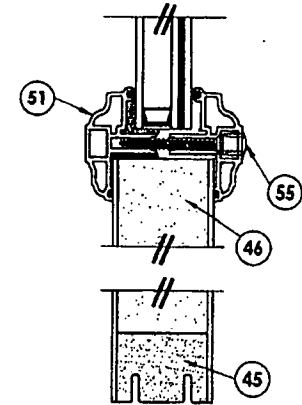


47 LATCH & HINGE STILE
Reinforcement



EXTERIOR

INTERIOR



2
3 VERTICAL CROSS SECTION

Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Vero Beach, FL 33595
 Phone No.: 613.699.9197
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
 Lynden F. Schmidt, P.E. No. 43408

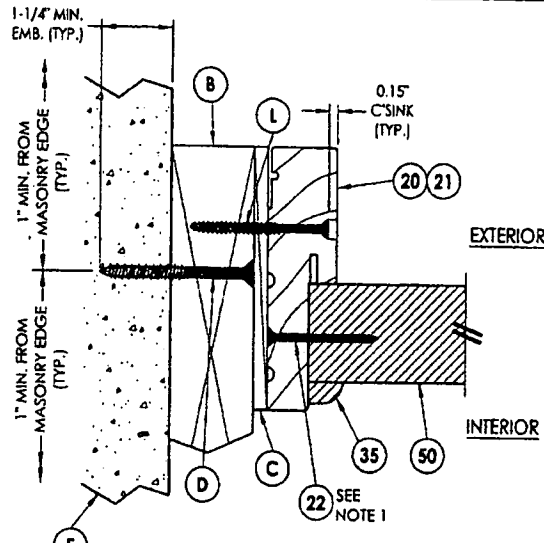
PRODUCT: BUILDERS HARDWARE
 FIBERGLASS DOOR

PART OR ASSEMBLY:
 SIDELITE PANEL DETAILS

REVISIONS	
NO.	DATE

DATE: 9/25/08
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 SHEET 3 of 9

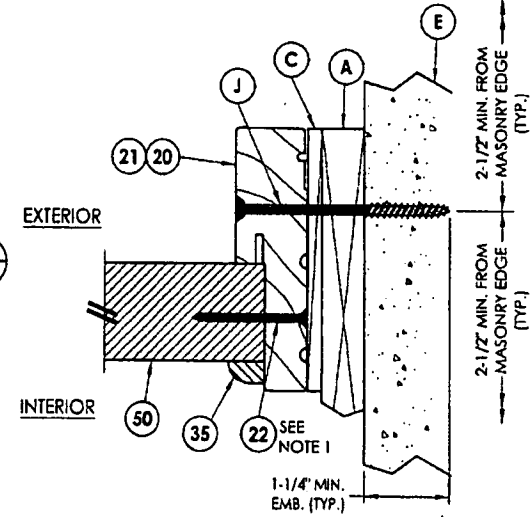
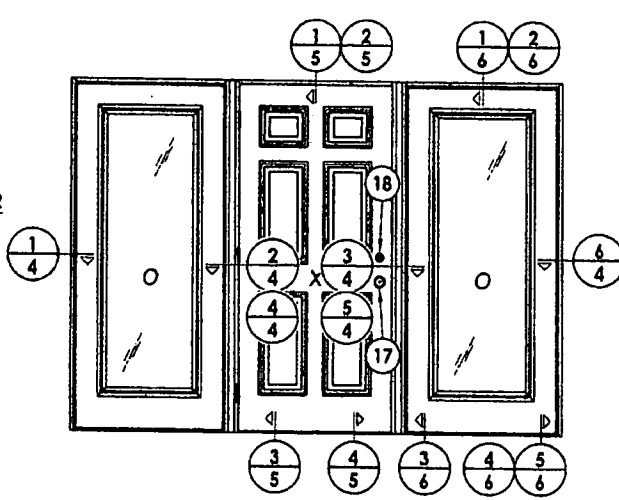
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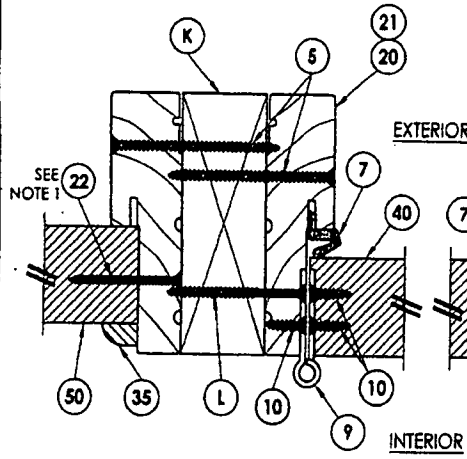
1
4 **HORIZONTAL CROSS SECTION**
Inswing shown - outswing also approved

NOTE:

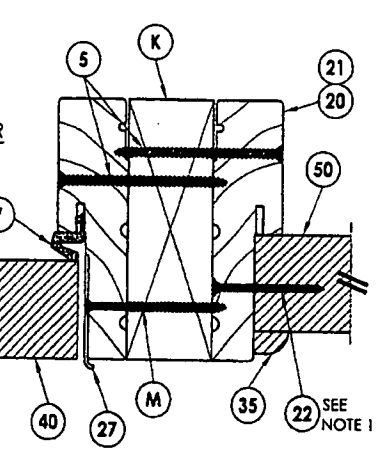
1. Sidelite panels anchored to frame 6" from top of frame then 10" on center (8) screws total each jamb.



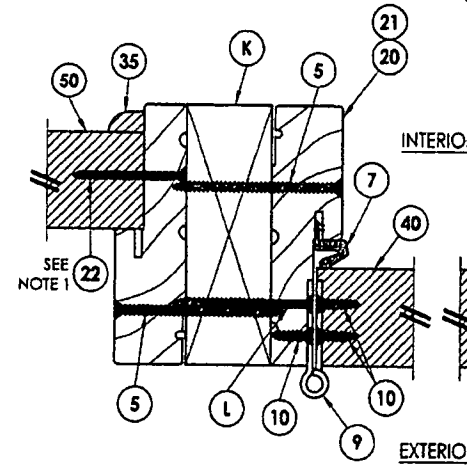
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4 **HORIZONTAL CROSS SECTION**
Shown w/1X sub-buck substituting concrete screws for wood screws per Section 1714.5.4.2 of the FBC



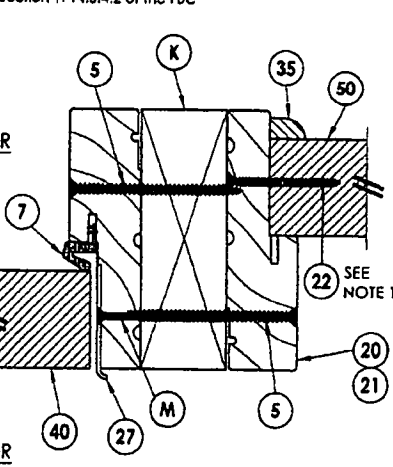
2
4 **HORIZONTAL CROSS SECTION**
Inswing configuration



3
4 **HORIZONTAL CROSS SECTION**
Inswing configuration



4
4 **HORIZONTAL CROSS SECTION**
Outswing configuration



5
4 **HORIZONTAL CROSS SECTION**
Outswing configuration

Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Volusia FL 32905
 Phone No.: 813.699.9197
 Florida Board of Professional Engineers
 Certificate Of Authorization No. 9913
 Lyndon F. Schmidt, P.E. No. 43409

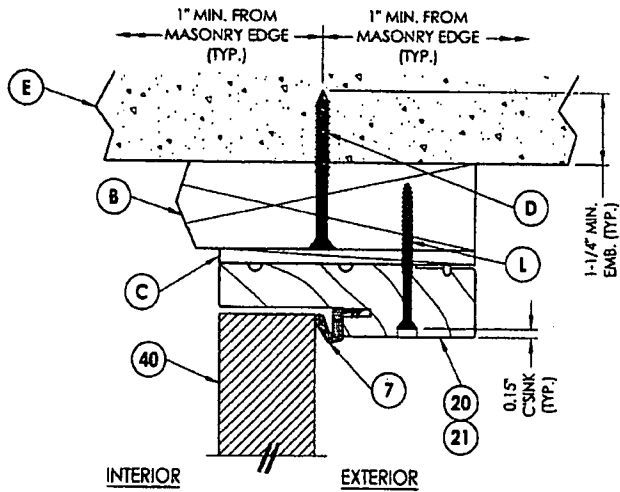
PRODUCT: BUILDERS HARDWARE FIBERGLASS DOOR
 PART OR ASSEMBLY: HORIZONTAL CROSS SECTIONS

NO.	DATE	BY

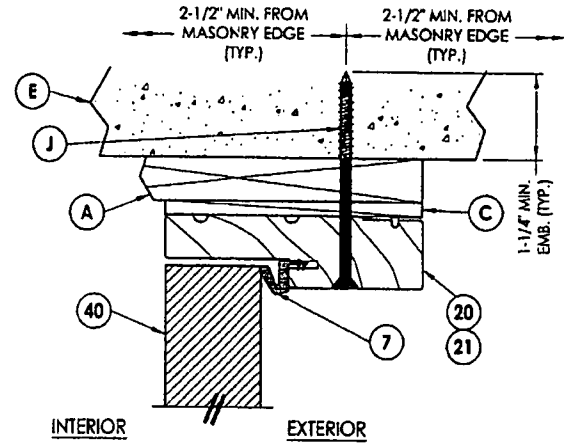
DATE: 9/25/08
 SCALE: N.T.S.
 DWG. BY: AL
 CHK. BY: LFS
 DRAWING NO.: FL-11321.3
 SHEET 4 of 9

© 2008 R.W. BUILDING CONSULTANTS INC.

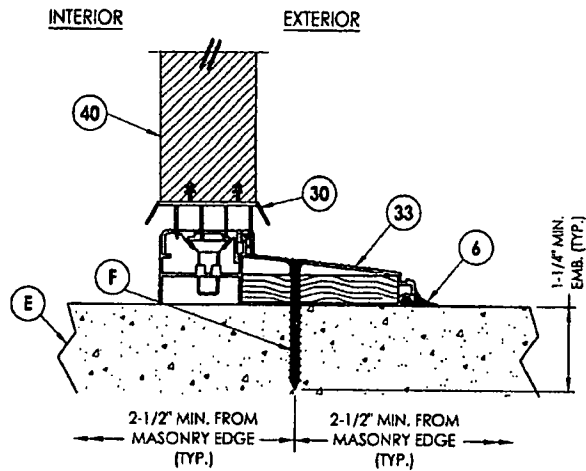
R.W. BUILDERS HARDWARE CONSULTANTS, INC. P.O. BOX 230 VALDEA FL 32985 PHONE NO. 813.659.9187



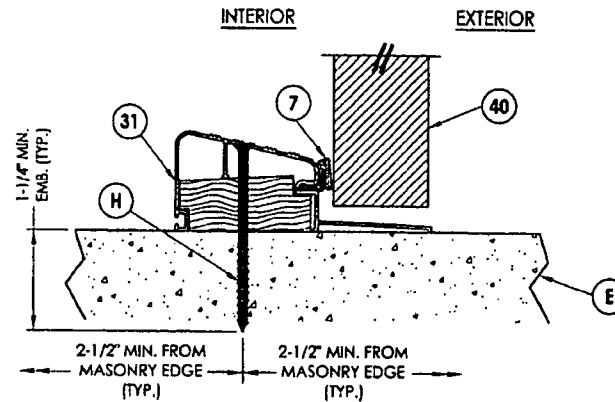
1 VERTICAL CROSS SECTION
5 Inswing shown - outswing also approved



2 VERTICAL CROSS SECTION
5 Shown w/IX sub-buck substituting concrete screws for wood screws per Section 1714.5.4.2 of the F&C



3 VERTICAL CROSS SECTION
5 Inswing configuration



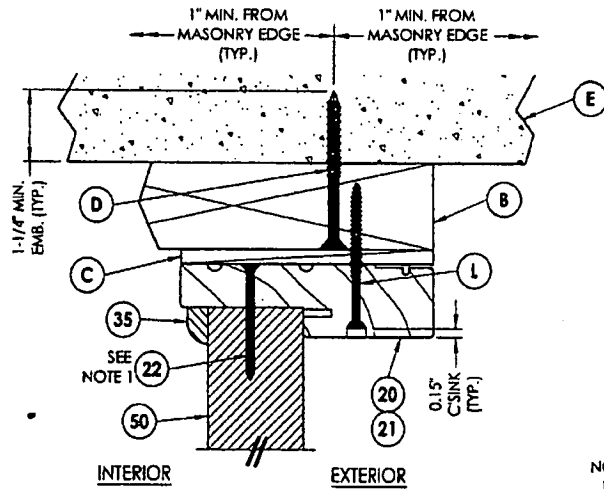
4 VERTICAL CROSS SECTION
5 Outswing configuration

Documents Prepared By:
RW BUILDERS HARDWARE CONSULTANTS, INC.
 P.O. Box 230 Valdeia FL 32985
 Phone No.: 813.659.9187
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
 Lyndon F. Schmidt, P.E. No. 43409

PRODUCT: BUILDERS HARDWARE FIBERGLASS DOOR
 PART OR ASSEMBLY: VERTICAL CROSS SECTIONS

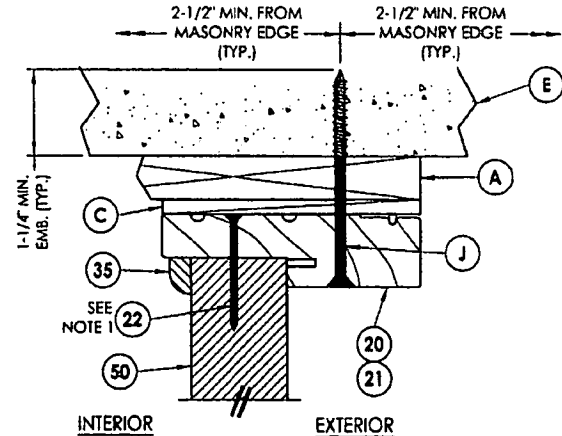
NO.	DATE	BY	REVISIONS

DATE: 9/25/08
 SCALE: N.T.S.
 DWR. BY: AL
 CHK. BY: LFS
 DRAWING NO.: FL-11321.3
 SHEET 5 of 9

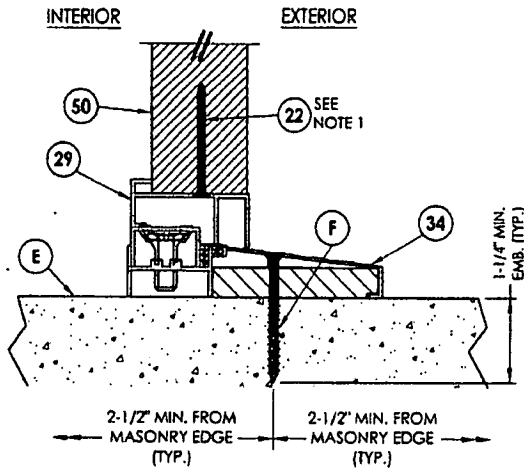


1 VERTICAL CROSS SECTION
6 Inswing shown - outswing also approved

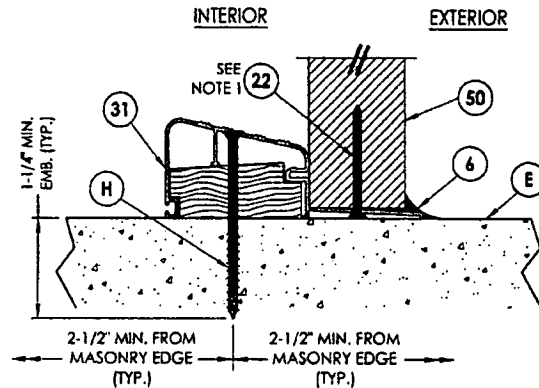
NOTE:
 1. Screws thru frame into sidelite panel located 6" from corners of sidelite and @ centerline of sidelite



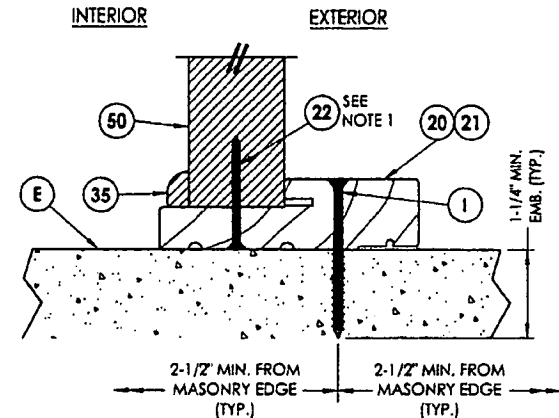
2 VERTICAL CROSS SECTION
6 Shown w/1X sub-buck substituting concrete screws for wood screws per Section 1714.5.4.2 of the FBC



3 VERTICAL CROSS SECTION
6 Inswing configuration



4 VERTICAL CROSS SECTION
6 Outswing configuration



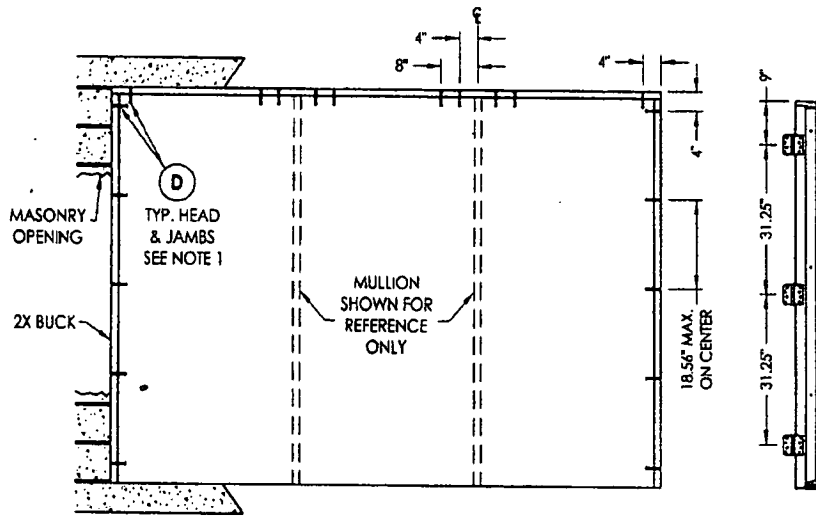
5 VERTICAL CROSS SECTION
6 Outswing configuration

Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Venice, FL 33595
 Phone No.: 813.689.8197
 Florida Board of Professional Engineers
 Certificate of Authorization No. 8613
 Lyndon F. Schmidt, P.E. No. 43400

PRODUCT: BUILDERS HARDWARE FIBERGLASS DOOR
 PART OR ASSEMBLY: VERTICAL CROSS SECTIONS

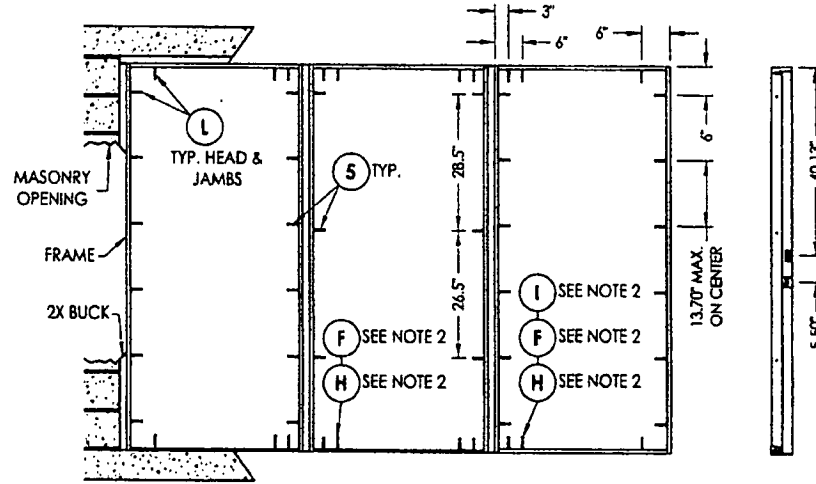
NO.	DATE	BY	REVISIONS

DATE: 9/25/08
 SCALE: N.T.S.
 DWG. BY: AL
 CHK. BY: LFS
 DRAWING NO.: FL-11321.3
 SHEET 6 OF 9



BUCK ANCHORING

HINGE JAMB

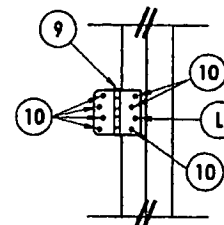


FRAME ANCHORING
Masonry 2x buck construction

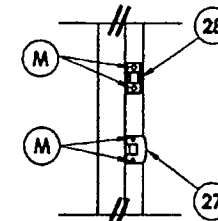
STRIKE JAMB

NOTES:

- 1/4" Elco concrete screws anchoring 2x buck require a minimum 1" clearance to masonry edges, a 1-1/4" minimum embedment and a minimum 4" clearance to adjacent concrete screws. Substitution of equal concrete screws from a different supplier may have different edge distance and center distance requirements. Concrete screw locations at the corners and at mullions locations may be adjusted to maintain the minimum edge distance to mortar joints. If concrete screw locations noted as "MAX. ON CENTER" must be adjusted to maintain the minimum edge distance to mortar joints, additional concrete screws may be required to ensure the maximum on center dimension is not exceeded.
- 1/4" ITW concrete screws anchoring frame and/or sill require a minimum 2-1/2" clearance to masonry edges, a 1-1/4" minimum embedment and a minimum 3" clearance to adjacent concrete screws. Substitution of equal concrete screws from a different supplier may have different edge distance and center distance requirements. Concrete screw locations at the corners and at mullions locations may be adjusted to maintain the minimum edge distance to mortar joints. If concrete screw locations noted as "MAX. ON CENTER" must be adjusted to maintain the minimum edge distance to mortar joints, additional concrete screws may be required to ensure the maximum on center dimension is not exceeded.



HINGE DETAIL



LATCH & DEADBOLT DETAIL

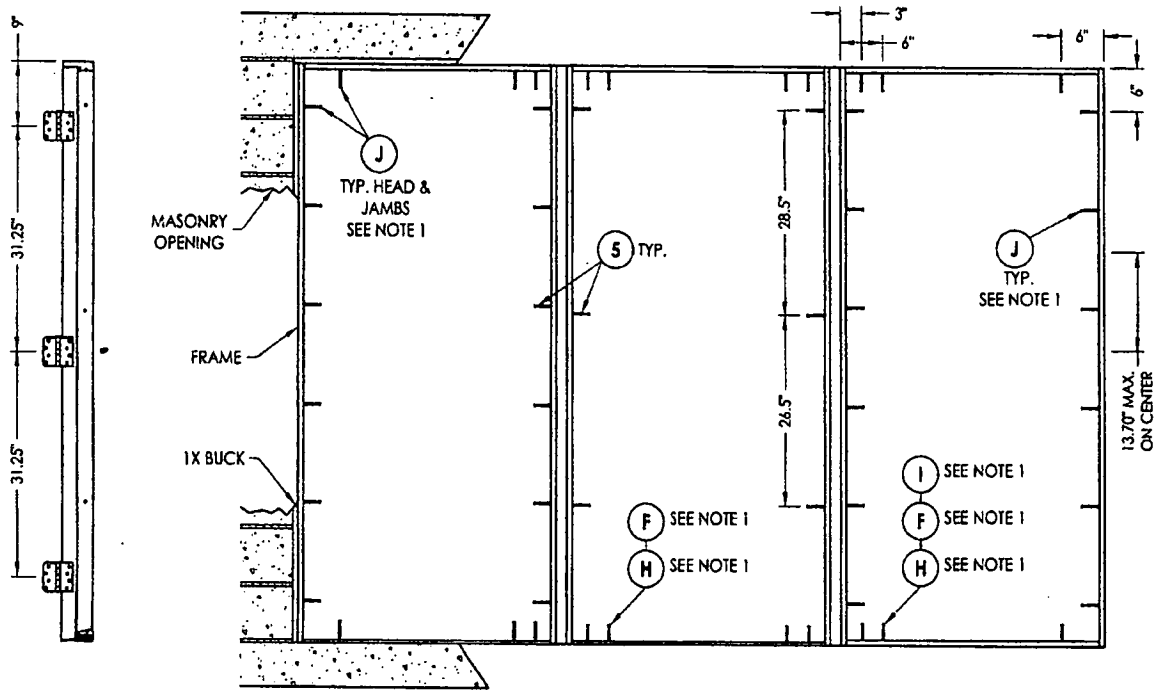
Documents Prepared By:
R.W. BUILDERS HARDWARE CONSULTANTS, INC.
 P.O. Box 230 Vashco FL 33595
 Phone No.: 813.659.9187
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
 LYNZON T. SCHMIDT, P.E. No. 43409

PRODUCT: BUILDERS HARDWARE FIBERGLASS DOOR
PART OR ASSEMBLY: BUCK & FRAME ANCHORING 2X BUCK MASONRY CONSTRUCTION

NO.	DATE	BY	REVISIONS

DATE: 9/25/08
 SCALE: N.T.S.
 DWG. BY: AL
 CHK. BY: LFS
 DRAWING NO.: FL-11321.3
 SHEET 7 of 9

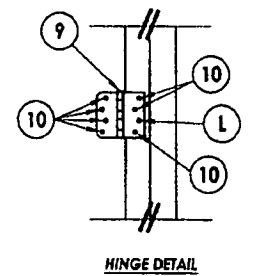
1. 1/4" ITW concrete screws anchoring frame and/or sill require a minimum 2-1/2" clearance to masonry edges, a 1-1/4" minimum embedment and a minimum 3" clearance to adjacent concrete screws. Substitution of equal concrete screws from a different supplier may have different edge distance and center distance requirements. Concrete screw locations at the corners and at mullions locations may be adjusted to maintain the minimum edge distance to mortar joints. If concrete screw locations noted as "MAX. ON CENTER" must be adjusted to maintain the minimum edge distance to mortar joints, additional concrete screws may be required to ensure the maximum on center dimension is not exceeded.



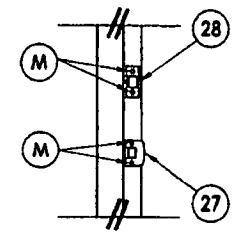
HINGE JAMB

FRAME ANCHORING
Masonry 1X buck construction

STRIKE JAMB



HINGE DETAIL



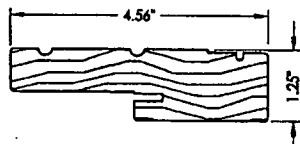
LATCH & DEADBOLT DETAIL

NOTES:

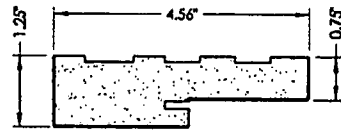
- 1/4" ITW concrete screws anchoring frame and/or sill require a minimum 2-1/2" clearance to masonry edges, a 1-1/4" minimum embedment and a minimum 3" clearance to adjacent concrete screws. Substitution of equal concrete screws from a different supplier may have different edge distance and center distance requirements. Concrete screw locations at the corners and at mullions locations may be adjusted to maintain the minimum edge distance to mortar joints. If concrete screw locations noted as "MAX. ON CENTER" must be adjusted to maintain the minimum edge distance to mortar joints, additional concrete screws may be required to ensure the maximum on center dimension is not exceeded.

Documents Prepared By: RW BUILDERS CONSULTANTS, INC. P.O. Box 230 Vero Beach, FL 33593 Phone No.: 813.658.8187 Florida Board of Professional Engineers Certificate of Authorization No. 9813 Lyndon F. Schmitt, P.E. No. 43409	
PRODUCT: BUILDERS HARDWARE FIBERGLASS DOOR	PART OR ASSEMBLY: FRAME ANCHORING 1X BUCK MASONRY CONSTRUCTION
NO. DATE BY	REVISIONS
DATE: 9/25/08	SCALE: N.T.S.
DWG. BY: AL	CHK. BY: LFS
DRAWING NO.: FL-11321.3	
SHEET 8 of 9	

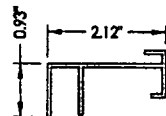
BILL OF MATERIALS					
ITEM	DESCRIPTION	MATERIAL	ITEM	DESCRIPTION	MATERIAL
A	1X BUCK SG >= 0.55	WOOD	20	JAMB FINGER - JOINT - PINE	WOOD
B	2X BUCK SG >= 0.55	WOOD	21	POLYFIBER COMPOSITE JAMB	POLYFIBER
C	1/4" MAX. SHIM SPACE	-	22	#7 X 2" PFH DRYWALL SCREW	STEEL
D	1/4" X 2-3/4" PFH ELCO CONCRETE SCREW	STEEL	27	LATCH STRIKE PLATE	STEEL
E	MASONRY - 3,192 PSI MIN. CONCRETE CONFORMING TO ACI 301 OR HOLLOW BLOCK CONFORMING TO ASTM C90	CONCRETE	28	DEADBOLT PLATE	STEEL
F	1/4" X 2-1/4" PFH ITW CONCRETE SCREW	STEEL	29	SIDELITE SPACER	PVC
H	1/4" X 3-1/4" PFH ITW CONCRETE SCREW	STEEL	30	DOOR SWEEP	-
I	1/4" X 2-3/4" PFH ITW CONCRETE SCREW	STEEL	31	OUTSWING THRESHOLD BY DLP	ALUM. / WOOD
J	1/4" X 3-3/4" PFH ITW CONCRETE SCREW	STEEL	33	INSWING THRESHOLD BY DLP	ALUM. / WOOD
K	2X REINFORCEMENT (CLEAR PINE) SG >= 0.42	WOOD	34	INSWING THRESHOLD SIDELITE BY DLP	ALUM. / WOOD
L	#10 X 2-1/2" PFH WOOD SCREW	STEEL	35	TRIM	-
M	#8 X 2-1/2" PFH WOOD SCREW	STEEL	40	DOOR PANEL - SEE DOOR PANEL DETAIL SHEET FOR CONSTRUCTION DETAILS	-
5	#10 X 3" PFH SCREW	STEEL	41	DOOR SKIN (MIN. 0.075" THICK) PLAST-PRO/MANYA Fy = 11,043 PSI MIN.	FIBERGLASS
6	SEALANT	SILICONE	42	TOP RAIL	CELLULAR PVC
7	WEATHERSTRIP	FOAM	43	LATCH & HINGE STILE	CELLULAR PVC
9	4" HINGE	STEEL	44	REINFORCEMENT WOOD FOR LOCKS	WOOD
10	#10 X 3/4" PFH WOOD SCREW	STEEL	45	BOTTOM RAIL	CELLULAR PVC
17	YALE CIRRUS 100C PASSAGE LOCK	STEEL	46	FOAM CORE	POLYURETHANE
	YALE CIRRUS 100B PASSAGE LOCK	STEEL	47	LATCH & HINGE STILE REINFORCEMENT	LVL
	KWIKSET TITAN PASSAGE LOCK	STEEL	50	SIDELITE PANEL - SEE SIDELITE PANEL DETAIL SHEET FOR CONSTRUCTION DETAILS	-
	BHI #902 PASSAGE LOCK	STEEL	51	ODL LITE FRAME	ALUMINUM
18	YALE 820 DEADBOLT	STEEL	52	#10 1-3/4" PFH SCREW	STEEL
	YALE 83 DEADBOLT	STEEL	53	GLAZING COPOUND RED-SEAL BY ODL, POLYMERIC FOAM	P/MERIC FOAM
	KWIKSET TITAN DEADBOLT	STEEL	54	STRUCTURAL SILICONE DOW #995	SILICONE
	BHI #200 DEADBOLT	STEEL	55	SCREW PLUG	-



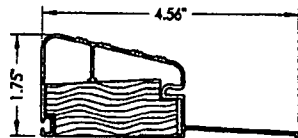
20 HEAD & SIDE Jamb



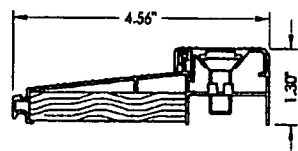
21 HEAD & SIDE Poly fiber jamb



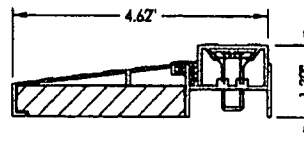
29 SIDELITE SPACER



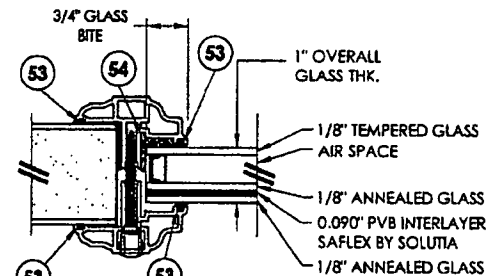
31 OUTSWING THRESHOLD



33 INSWING THRESHOLD



34 INSWING THRESHOLD Sidelite



G1 GLAZING DETAIL

Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 250 Venice, FL 33569
 Phone No.: 813.650.9187
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
 Lynden F. Schmitter, P.E. No. 43409

PRODUCT: BUILDERS HARDWARE FIBERGLASS DOOR
 PART OR ASSEMBLY: BILL OF MATERIALS, GLAZING DETAIL & COMPONENTS

NO.	DATE	BY	REVISIONS

DATE: 9/25/08
 SCALE: N.T.S.
 DWG. BY: AL
 CHK. BY: LFS
 DRAWING NO.: FL-11321.3
 SHEET 9 of 9

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT -- INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

8-3

2009

Page

1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9AM	46 Rio Vista Dr OB	Final door	OK	Inspector [Signature]
9190	Braid 84 N Sewalls Pt Hammerhead	Final deck	PASS	Inspector [Signature]
	102 N SPT RD DAVE STABBT	335-1658		INSPECTOR
9212	Lasky 85 N Sewalls Scott Holmes	slab-generator	PASS	Inspector [Signature]
				INSPECTOR
				INSPECTOR
				INSPECTOR
				INSPECTOR

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # 120

Date Issued 7/28/80

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 as to height and name, common or botanical. Groups of trees may be designated as clumps with an estimated size and number, etc..

Owner GUSTAV SCHICKENDANZ, TRUSTEE Present Address 2300 S.E. OCEAN BLVD Phone 283-0060

Contractor SCHICKENDANZ BROS. FLA. Address SAME AS ABOVE Phone "

Number of trees to be removed TREE REMOVAL TO ACCOMMODATE IMPROVEMENTS
only!

Number of trees to be relocated within 30 days (no fee) NONE

Number of trees to be replaced within 30 days Lot 91 NONE

Permit Fee: \$50 (~~\$250~~) (\$5. for 1st tree, plus \$1. each additional tree - not to exceed \$25.)

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

Plans approved as submitted _____ Plans approved as marked _____

Permit good for one (1) year. Fee for renewal of expired permit is \$5.

Signature of Applicant G. Schickendanz, Trustee Date submitted _____

Approved by Building Inspector _____ Date _____

Approved by Building Commissioner _____ Date _____

Completed _____
Date _____ Checked by _____

121



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

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8:00 AM – 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5:00 PM – NO SUNDAYS

Owner Nancy Shotts Address 40 Rio Vista Dr Phone 260-1697

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE 1 Type: Dead Palm Tree

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

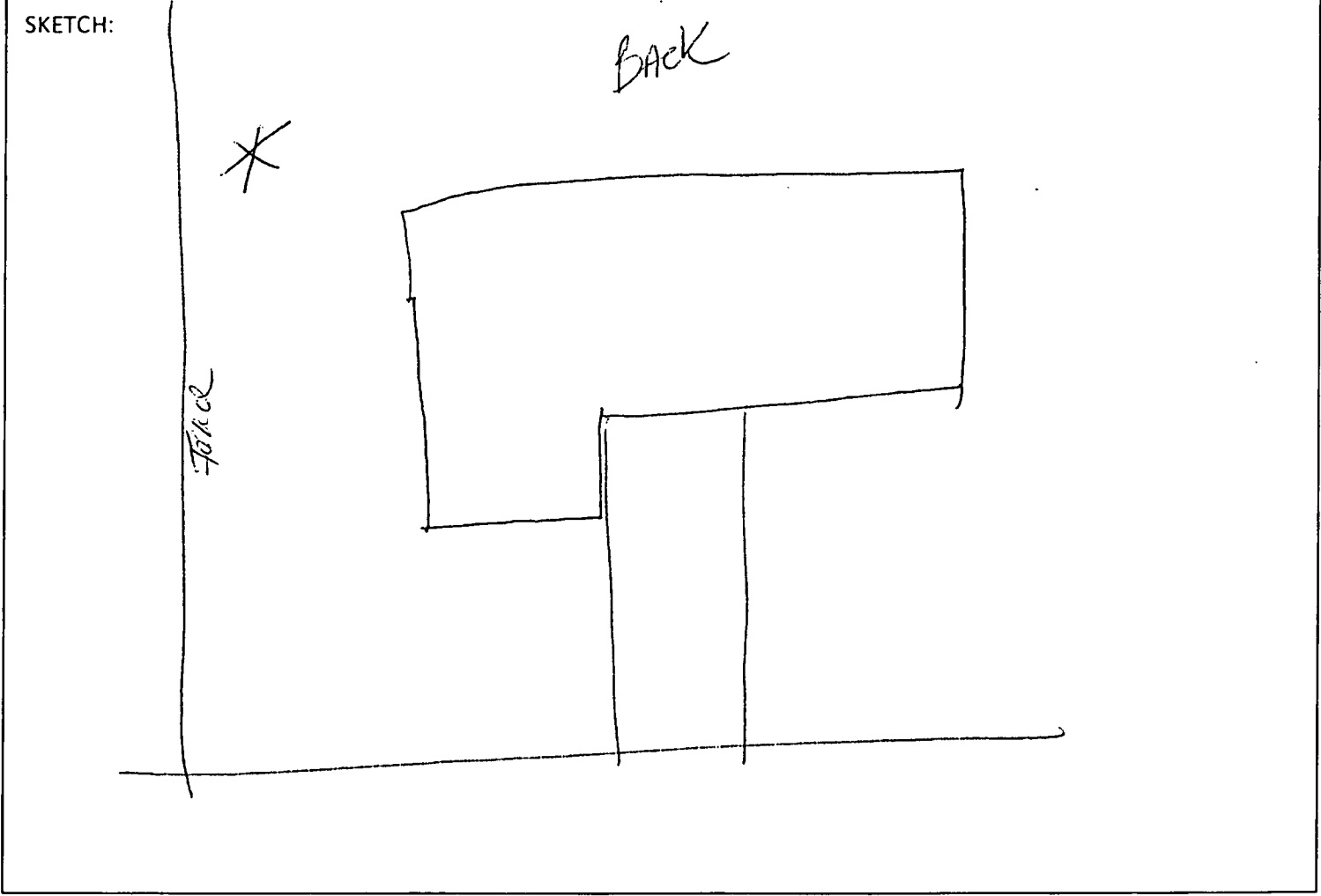
No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Reason for tree removal /relocation _____

Signature of Property Owner Shotts Date 6-19-07

Approved by Building Inspector: [Signature] Date 6/20 Fee: 0

NOTES: _____





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

OP

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8:00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner Nancy Shotts Address [REDACTED] Phone 772-260-1697

Contractor Bugie Stimpflee Address _____ Phone _____

No. of Trees: REMOVE 1 Species: Carrotwood

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

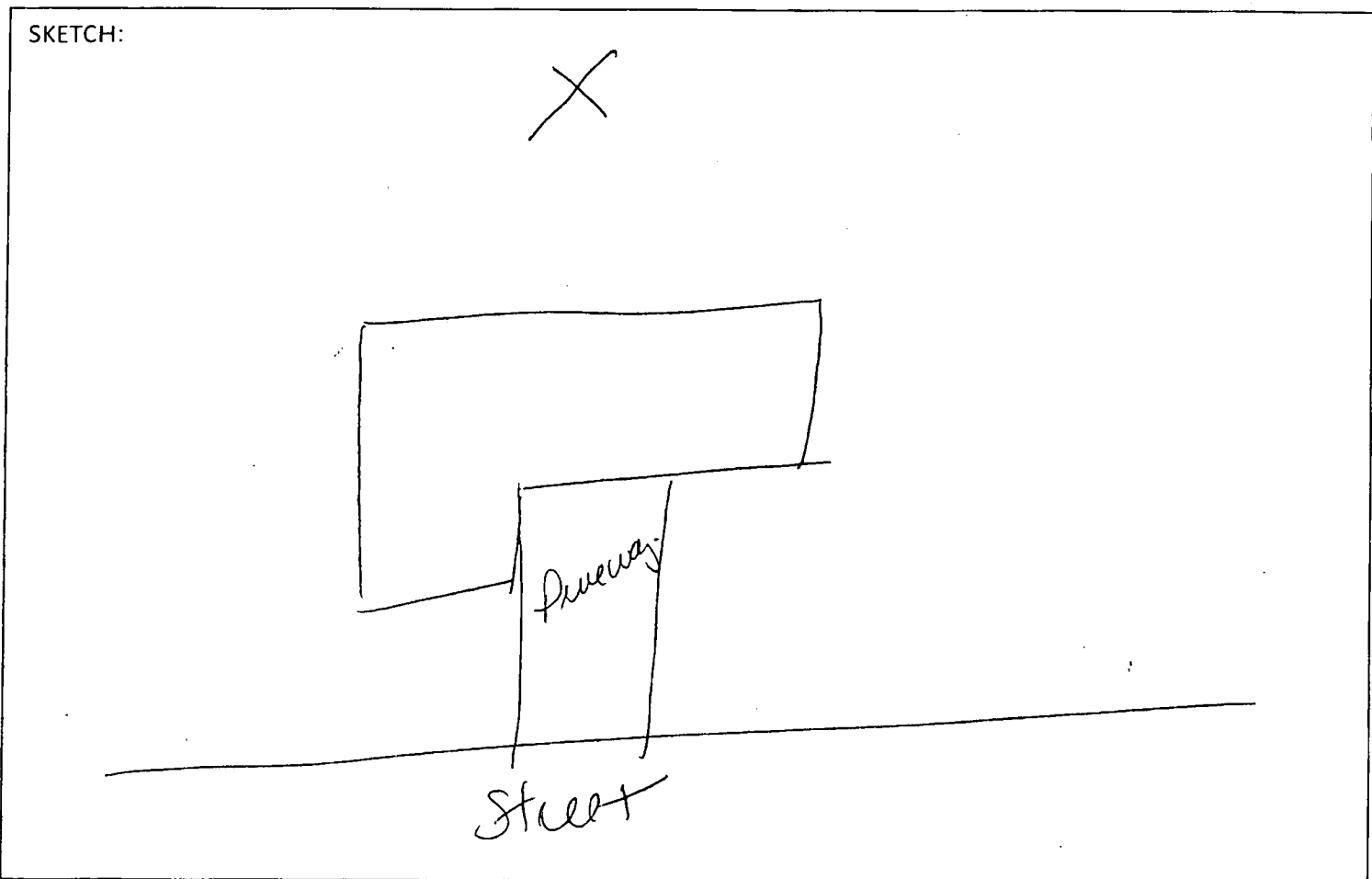
Reason for tree removal/relocation (See notice above) _____

Fell down

Signature of Property Owner [Signature] Date 4-21-09

Approved by Building Inspector: [Signature] Date 4-21-09 Fee: N/E

NOTES: _____



TOWN OF SEWALL'S POINT, FLORIDA

Date October 17 2005 TREE REMOVAL PERMIT No 2589

APPLIED FOR BY SHUTTS (Contractor or Owner)

Owner 46 Rio Vista Drive

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 2 DEAD Palm Trees

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant Signed [Signature] Town Clerk BUILDING OFFICIAL

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Large empty rectangular box with horizontal lines for notes or drawings.

PROJECT DESCRIPTION _____

Four horizontal lines for project description details.

REMARKS _____

Four horizontal lines for remarks.

TOWN OF SEWALL'S POINT APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Tree Defined: Any self-supporting, woody plant which normally grows to an overall height of at least fifteen (15) feet in the vicinity of the town. Replant and landscape trees shall be considered a tree.

No permit required for:

1. Trimming of trees unless it effectively removes it, meaning trimming or pruning to the extent that a plant's natural function is severely altered.
2. Trees with a diameter of less than two inches.

Permit Fee:

1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S.F.R.).

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, Marlberrry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeve, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new S.F.R., a site plan which shall include the dimensional location on a survey, scale drawing or aerial photograph, superimposed with lot lines of scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.
 - d. for an existing residence, a drawing of house with location of trees to be removed, relocated can be submitted in lieu of site plan.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner Nancy Shurts Address 46 Rio Vista Dr Phone 286-5625
 Contractor _____ Address _____ Phone WK 223-7959

No. of Trees: REMOVE 2 Type: Dead Palm Trees
 No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: One in front yard, 1 back yard
 No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: _____

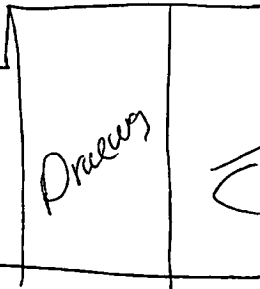
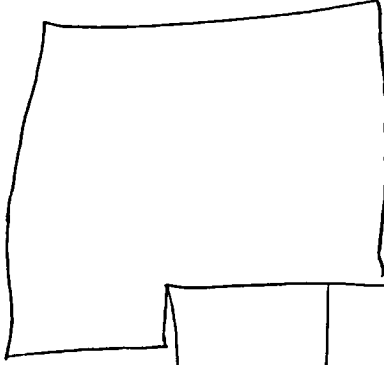
Signature of Property Owner N Shurts Date 9-11-05

Approved by Building Inspector: [Signature] Date 10/14/05 Fee: 10

Plans approved as submitted _____ Plans approved as revised/marked: _____

Palm Tree
*

Palm Tree
Dead



Driveway



Rd -
46 Pro Vista
Dr -

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/17, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7800	JUSTAK	PRE-POUR	Passed	
2	171 S. SEWALL SANDERS SC	SCREEN FOR ADDN		INSPECTOR: <i>[Signature]</i>
7221	CLEMENTS	SEAWALL CAP	Passed	
1	11 W. HIGH POINT WILCO CONST			INSPECTOR: <i>[Signature]</i>
7100	SWITTS	TREE	O.K.	
3	40 RIO VISTADE			INSPECTOR: <i>[Signature]</i>
6911	PREISSMAN	INGR. TANK + LINES	Failed Passed	40
4	28 RIO VISTA DR FORRELL GAS			INSPECTOR: <i>[Signature]</i>
7351	CIFELLI	FINAL SCREEN ENCLOSURE	Passed	
5	8 HERITAGEWAY PIONEER SCREEN		CLOSE	INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>

OTHER: 3/5 HERITAGE WY - STORM DRAIN POSSIBLY COVERED W/ SOO ✓