

**48 Rio Vista Drive**

**1958**

**SFR**

Permit No. 1958

Date May 20, 1986

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 Jonathan Burkard Present address 391 S.W. South River Dr.

Phone 692-1122 Jensen Beach, Fla.

General contractor Herrlin-Deinard Dev. Address 499 S.E. Seville St.

Phone 287-6000 Stuart, Fla.

Where licensed Florida License No. CGC 013733

Plumbing contractor Dave's Plumbing License No. 00030

Electrical contractor Forward Electric License No. 00092

Air-conditioning contractor C & R Air Conditioning License No. CACO 15167

Describe the building, or alteration to existing building 3 Bedroom, Two Story CBS construction, cedar shake roof.

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. 92 Area \_\_\_\_\_

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet 2,400

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$120,500.00

Cost of permit \$ 6400 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 [Signature]

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 [Signature]

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

TOWN RECORD

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

Approved by Building Inspector (date) 5/30/86

Inspector's initials [Signature]

Approved by Town Commissioner (date) 6/9/86

Commissioner's initials [Signature]

Certificate of Occupancy issued (date) \_\_\_\_\_

541931

This instrument was prepared by:

JOHN FENNIMAN, CHARTERED

Attorney at Law

501 E. Osceola Street

Post Office Box 2473

STUART, FLORIDA 33494

# Warranty Deed

(STATUTORY FORM — SECTION 689.02 F.S.)

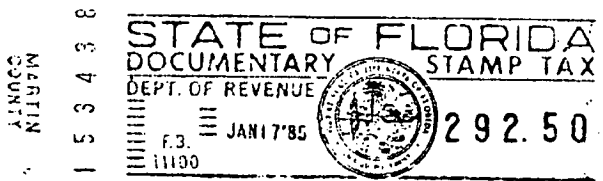
This Indenture, Made this 18<sup>th</sup> day of January 19 85, Between  
 HENRY R. KRZEPISZ and HILDEGARD KRZEPISZ, husband and wife  
 of the County of Martin, State of Florida, grantor\*, and  
 JONATHAN W. BURKARD  
 whose post office address is 391 S. W. South River Drive, Apt. 201, Stuart, Florida 33497  
 of the County of Martin, State of Florida, grantee\*,

Witnesseth, That said grantor, for and in consideration of the sum of TEN AND NO/100-----

Dollars, and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Martin County, Florida, to-wit:

Lot 92, RIO VISTA SUBDIVISION, according to the plat thereof, filed December 11, 1975, in Plat Book 6, page 95, Martin County, Florida, public records.

SUBJECT TO taxes accruing subsequent to December 31, 1984.



LOUISIANA RECORDS  
 BY [Signature]  
 1/18/85

85 JAN 21 A10:48

MARTIN COUNTY CLERK

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

\*"Grantor" and "grantee" are used for singular or plural, as context requires.

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

[Signature]  
Robert C. Burson

[Signature] (Seal)  
 Henry R. Krzepisz  
[Signature] (Seal)  
 Hildegard Krzepisz  
[Signature] (Seal)  
 Hildegard Krzepisz

STATE OF FLORIDA  
COUNTY OF MARTIN

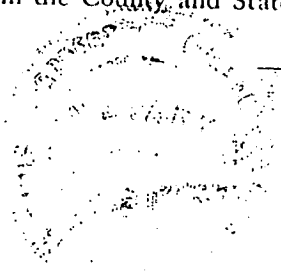
I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared

HENRY R. KRZEPISZ and HILDEGARD KRZEPISZ, husband and wife

to me known to be the persons described in and who executed the foregoing instrument and acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County, and State last aforesaid this \_\_\_\_\_ day of January, 1985.

My commission expires: 1/31/85 [Signature] Notary Public



COMMUNITY SAVINGS, F.A.

Construction Loan Statement

THIS STATEMENT is made this 16th day of May, 19 86, by JONATHAN W. BURKARD and JULIE BURKARD, his wife.

Hereinafter called "Owner", who state under oath that it is made for the purpose of inducing COMMUNITY SAVINGS, F.A., hereinafter called "Association", to lend Owners the sum of \$ 143,000.00, to be secured by a mortgage encumbering the following described property owned by the Owner, and the improvements to be constructed thereon, located in Martin County, Florida, to-wit:

Lot 92, RIO VISTA SUBDIVISION, according to the Plat thereof, filed December 11, 1975 in Plat Book 6, Page 95, Martin County, Florida, Public Records.

and in consideration of said mortgage loan, Owner hereby represents to Association and covenants and agrees as follows:

1. Said loan is being obtained to enable the Owner to complete certain improvements upon the property hereinabove described in accordance with plans and specifications of said improvements filed with the related mortgage loan application.

2. No "Notice of Commencement" of any improvements on said property has been filed for record or posted on said property by the Owner, or by anyone for or on his behalf, or by anyone else; no notice has been served on the Owner, or on anyone for or on his behalf, or posted on said property, informing that services or materials have been furnished or are being furnished for any improvements on said property; and no claim of lien has been filed for record or served on the Owner, or on anyone for or on his behalf, or posted on said property, by anyone claiming a lien on said property. No improvement of said property was commenced, either by performing work thereon or delivering materials thereto, prior to October 1, 1983. No one has or claims to have a lien or encumbrance against said property superior to the lien of the Association's mortgage hereinabove mentioned.

3. Owner shall cause Association to be named in said Notice of Commencement as a party to receive a copy of the Notice to Owner from lienors under Section 713.13(1)(f) Florida Statutes, and in addition thereto shall deliver all such notices served upon the Owner to the Association within 24 hours after receipt thereof.

4. The Association will pay out the amount of \$ 129,400.00, shown in said Loan Settlement Statement as the amount to be withheld for completion of improvements, (hereinafter called the Construction Fund), in stages as follows:

DRAW SCHEDULE - 2 Story Frame

1st Draw	19,410.00	(15%)	When foundation in, walls up to floor level, rough plumbing in, slab poured.
2nd Draw	25,880.00	(20%)	When exterior framing completed, roof on and dried in.
3rd Draw	25,880.00	(20%)	When interior framing completed, rough electric in, rough plumbing completed, air-conditioning ductwork installed, exterior sheathing or felt completed.
4th Draw	25,880.00	(20%)	When drywall taped and sprayed or plaster completed, window frames installed, exterior siding completed.
5th Draw	19,410.00	(15%)	When trim completed, doors installed, tile work completed, cabinets installed, roof finished.
6th Draw	12,940.00	(10%)	When all work completely finished (including carpet, landscaping, and appliances), and the building is ready for occupancy, and contractor has furnished the affidavit required by Section 713.06(3)(d) Florida Statutes, and full release of liens have been obtained from all lienors giving notice as defined in Section 713.01(19) Florida Statutes, and from all lienors recording claims of lien.

Provided that the Association may, at any time in its discretion, withhold payment of any part of said Construction Fund until the construction of said improvements has progressed enough that the remainder of such amount withheld be sufficient, in the judgment of the Association, to complete fully such improvements in accordance with said plans and specifications.

5. A survey sketch by a licensed surveyor showing the location of the improvements on the said property with no encroachments and no violation of setbacks will be furnished by the Owner to the Association before the first payment from the construction fund.

6. Before any of the several payments from the construction fund are made, the work performed to the time of such payment must meet the approval of the Association. The Owner will be required to furnish such affidavits, lien waivers, lien releases, subordination of lien agreements, paid bills, receipts and other documents as the Association may deem necessary for its proper protection.

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CONSTRUCTION LOAN INFORMATION

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Thank you for choosing Community Federal to assist in the Construction of your home. In order to make the procedure for obtaining draws run smoothly we would like to call your attention to the following procedures and ask that you also advise your contractor of them.

The following items will be needed prior to the disbursement of your first draw:

- WORKING ON*
- 1.) Insurance Memorandum - to be completed and given to our Mortgage Loan Service Department not later than the first draw. This memorandum is evidence of fire, windstorm and extended coverage whichever applies to your loan.
- NEED TO DO WHEN SLAB POURED*
- 2.) A Tie In Survey - showing the location of the house and improvements in relationship to the boundaries of the lot. (This must be done by a Registered Surveyor.)
- ONCE FILL IS BROUGHT IN*
- 3.) Termite Treatment Report - this is a certification from a licensed exterminator showing that the soil has been treated for subterranean termites.

When you are ready for an inspection in accordance to your Construction Draw Schedule:

- 1.) Please call the Community Federal office where your draws are to be disbursed from and ask to speak to a Mortgage Loan Secretary. (i.e., Riviera Beach, Tequesta or Stuart)
- 2.) You should make the call at least two days in advance so that we can schedule your inspection.
- 3.) At this time we will notify you of any Partial/Final releases which may be required in order to disburse your draw. Please keep in mind that we will need a partial release from any sub-contractor or supplier from whom we have received a Notice to Owner. We will need this release each time a draw is made.

When you are ready for your final draw on your construction loan keep the following in mind:

- 1.) Both the contractor and owners must be present to sign the necessary affidavits.
- 2.) You must have a Certificate of Occupancy (issued by the Building Department).

As you know, interest will be billed to you monthly during construction based on the amount of funds disbursed.

Please bear in mind that your Note indicated the date your first regular payment starts (usually five (5) months after closing). This date cannot be changed and payments must commence on that date, regardless of whether or not construction has been completed. Of course the interest taken out of that payment will still be based only on the amount disbursed.

OWNER'S AFFIDAVIT OF BUILDING COSTS

STATE OF FLORIDA  
COUNTY OF MARTIN

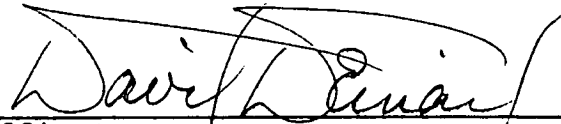
BEFORE ME, the undersigned notary public, personally appeared the undersigned Affiant, who, being first duly sworn, under penalties of perjury, deposes and says:

1. That Affiant is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affiant's signature.

2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.

3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 120,500.00.

4. That this affidavit is made for the purpose of inducing the building official of the Town to issue a certificate of occupancy for the improvements, with the intention that it be relied upon for that purpose.

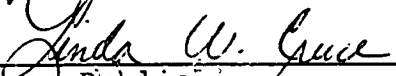


\_\_\_\_\_  
Affiant

Property street address:

LOT 92 RIO VISTA DRIVE  
48 RIO VISTA SUBDIVISION

Sworn to and subscribed  
before me this 22nd day of  
May, 1986.

  
\_\_\_\_\_  
Notary Public

STATE OF FLORIDA AT LARGE  
My Commission Expires:

(NOTARY SEAL)

NOTARY PUBLIC STATE OF FLORIDA  
MY COMMISSION EXP. DEC 11, 1989  
BONDED THRU GENERAL INS. CO.

MARTIN COUNTY PUBLIC HEALTH UNIT  
131 East 7th Street  
Stuart, Florida 33497  
287-2277

STUBOUT ELEVATION AND FILL CERTIFICATION

APPLICANT: Jon ~~John~~ BURKARD  
LEGAL DESCRIPTION: LOT 92 RIO VISTA  
SEPTIC TANK PERMIT NUMBER: H-086-58

The items noted below must be certified by a surveyor or engineer and returned to the Health Department prior to the first plumbing inspection by the Building Department.

1. Building Permit Number: \_\_\_\_\_.
2. I certify that the elevation of the top of the lowest plumbing stubout is at or above the approved elevation as shown on septic tank permit application.  
Date elevation checked: \_\_\_\_\_.
3. I certify that the top of the lowest building plumbing stubout is \_\_\_\_\_ feet above the crown of road.
4. I certify that all severe limited soil has been removed from an area of \_\_\_\_\_ feet by \_\_\_\_\_ feet to a minimum depth of six (6) feet below top of required stubout elevation. Submit plot plan to scale of excavated area.  
Date observed: \_\_\_\_\_.

- NOTE: a. Severe limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
- b. Drainfield must be centered in the excavated area. Please set stakes to identify the excavated area boundaries. Drainfield will not be approved if severe limited soils are not removed.

CERTIFIED BY: \_\_\_\_\_ As applicant or applicant's representative, I understand the above requirements.  
Florida Professional Number: \_\_\_\_\_  
Date: \_\_\_\_\_, Job Number: \_\_\_\_\_  
David DeMa  
(Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

\_\_\_\_\_  
(Signature of Environmental Health Specialist)

\_\_\_\_\_  
(Date)

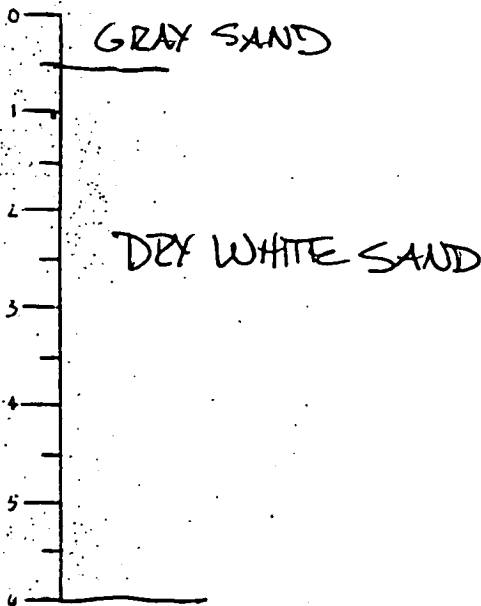


MARTIN COUNTY PUBLIC HEALTH UNIT  
131 East 7th Street  
Stuart, Florida 33497  
287-2277

SITE EVALUATION

APPLICANT: JOHN BURKARD  
LEGAL DESCRIPTION: LOT 92 RIO VISTA (SEAVAS POINT)

SOIL PROFILE



USDA SOIL TYPE PAOLA SAND  
USDA SOIL NUMBER 6

Impervious soils are present at  
NONE feet below natural grade.

PRESENT WATER DEPTH BELOW NATURAL GRADE >6 FEET.  
WET SEASON RANGE PER SOIL SURVEY >6 FEET.  
ESTIMATED WET SEASON WATER DEPTH BELOW NATURAL GRADE >6 FEET  
INDICATOR VEGETATION PRESENT LIVE OAK,  
IS BENCHMARK LOCATED ON PLOT PLAN AND PRESENT ON SITE? YES  
APPROXIMATE AMOUNT OF FILL ON NEIGHBORING LOTS NONE.

OTHER FINDINGS:

EVALUATION BY: Robert B. Walden  
DATE: 2-5-86

Prepared by:

Mathers & Associates, Inc.

295 Florida Street

Stuart, FL 33497

MARTIN COUNTY PUBLIC HEALTH UNIT Phone: 287-0525

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

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

PERMIT NUMBER: HD 86-58

NAME OF APPLICANT: Jon BURKARD

HOME PHONE: 692-1122

MAILING ADDRESS OF APPLICANT: 111 N. FED HWY, SEJACK, FLA.

WORK PHONE: \_\_\_\_\_

LOT 92 BLOCK \_\_\_\_\_ SUBDIVISION RIO VISTA

PLAT BOOK 6 PAGE 95 DATE SUBDIVIDED 11/25/75

RESIDENTIAL: NUMBER DWELLING UNITS 1 NUMBER BEDROOMS 3

HEATED OR COOLED AREA OF HOME 2400± SQUARE FEET

COMMERCIAL: TYPE OF BUSINESS PROPOSED \_\_\_\_\_ NUMBER PEOPLE \_\_\_\_\_

AFFIDAVIT

I HAVE REVIEWED THIS PERMIT AND I CERTIFY THAT ALL WORK WILL BE PERFORMED IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THIS PERMIT AND ANY APPLICABLE STATE OR COUNTY REGULATIONS.

SIGNATURE OF PROPERTY OWNER OR OWNER'S LEGALLY AUTHORIZED REPRESENTATIVE:

STEPHEN S. BROWN

INSTALLATION SPECIFICATIONS

SEPTIC TANK CAPACITY 900 GALLONS

DRAINFIELD SIZE 300 SQUARE FEET

TOP OF SEPTIC TANK IS REQUIRED TO BE A MINIMUM ELEVATION OF

FINISHED SOIL GRADE

THIS PERMIT EXPIRES ONE (1) YEAR FROM DATE OF ISSUANCE

ISSUED BY: Daniel M. Sadowsky DATE: 2-6-86  
ENVIRONMENTAL HEALTH SPECIALIST

- PLEASE NOTE:
1. THIS PERMIT EXPIRES ONE YEAR FROM DATE OF ISSUANCE.
  2. IF BUILDING STUBOUT IS MORE THAN 20 FEET FROM SEPTIC TANK AND DRAINFIELD, A HIGHER STUBOUT ELEVATION THAN SHOWN ABOVE WILL BE REQUIRED.
  3. IF FILL IS REQUIRED, CONTACT MARTIN COUNTY BUILDING DIVISION.
  4. IF ANY INFORMATION ON THIS PERMIT CHANGES, PLEASE SUBMIT AN UPDATED APPLICATION TO THIS OFFICE.
  5. IF WELL OR MOUND DRAINFIELD IS PROPOSED, SEE ATTACHED SKETCH OF ADDITIONAL SPECIAL REQUIREMENTS.

Inspection results will be posted in electrical box

FINAL INSPECTION

CONSTRUCTION APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_  
ENVIRONMENTAL HEALTH SPECIALIST

AN APPROVED SYSTEM DOES NOT GUARANTEE PERFORMANCE

MARTIN COUNTY PUBLIC HEALTH UNIT

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

SITE INFORMATION

1. IS THERE A SEPTIC SYSTEM OR OTHER INTERFERENCE WITHIN 75 FEET OF THE PROPOSED PRIVATE WELL? No
2. IS THERE A PRIVATE WELL WITHIN 75 FEET OF THE PROPOSED SEPTIC SYSTEM? No
3. IS THERE A LIMITED USE NON-COMMUNITY OR OTHER PUBLIC WELL WITHIN 100 FEET OF PROPOSED SEPTIC SYSTEM? No
4. IS THERE A PUBLIC WELL WITHIN 200 FEET OF THE PROPOSED SEPTIC SYSTEM? No
5. IS THERE A PUBLIC SEWER WITHIN 100 FEET OF THE PROPOSED LOT? No
6. IS THERE A LAKE, STREAM, WETLAND, OR OTHER BODY OF WATER WITHIN 75 FEET OF THE PROPOSED SEPTIC SYSTEM? No
7. IS THERE A PROPOSED OR EXISTING PUBLIC WATER LINE WITHIN TEN FEET OF THE PROPOSED SEPTIC SYSTEM? No
8. IS THERE A STORM WATER RETENTION AREA OR DRAINAGE EASEMENT WITHIN 15 FEET OF THE PROPOSED SEPTIC SYSTEM? No
9. IS THE SEPTIC SYSTEM IN AN AREA PROPOSED FOR PAVING OR VEHICULAR TRAFFIC? No
10. ARE ALL PRIVATE WELLS, SEPTIC SYSTEMS AND SURFACE WATER ON ADJACENT OR CONTIGUOUS LAND WITHIN 75 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? YES
11. ARE ALL PUBLIC WELLS WITHIN 200 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? YES
12. DOES THE PLOT PLAN INCLUDE A PLAT OF THE LOT OR TOTAL SITE OWNERSHIP DRAWN TO SCALE, BOUNDARIES WITH DIMENSIONS, LOCATIONS OF BUILDINGS OR RESIDENCES, SWIMMING POOLS, RECORDED EASEMENTS, THE PROPOSED SEPTIC SYSTEM, ANY PROPOSED OR EXISTING WELLS, PUBLIC WATER LINES, PAVED AREAS OR DRIVEWAYS, AND SURFACE WATERS SUCH AS LAKES, PONDS, STREAMS, CANALS, OR WETLANDS? YES
13. THERE IS 900 SQUARE FEET OF AVAILABLE LAND TO INSTALL THE SEPTIC SYSTEM. THIS AREA EXCLUDES INTERFERENCES. SHADE THIS AVAILABLE AREA.

ELEVATIONS

1. CROWN OF ROAD ELEVATION NONE SHOW LOCATION ON PLOT PLAN. IF ROAD IS NOT PAVED, BENCHMARK ELEVATION 20.25 SHOW LOCATION ON PLOT PLAN.
2. NATURAL GRADE ELEVATION IN AREA OF PROPOSED SEPTIC SYSTEM 23.45 SHOW LOCATION ON PLOT PLAN.
3. IS BUILDING LOCATED IN FLOOD HAZARD AREA "A" OR "V" AS IDENTIFIED ON FEMA MAPS? No IF YES, WHAT IS THE MINIMUM REQUIRED FLOOD HAZARD FLOOR ELEVATION OF BUILDING? \_\_\_\_\_ NGVD 1929 (ELEVATION OPTIONAL)

NOTE: MUST BE CERTIFIED BY REGISTERED SURVEYOR OF ENGINEER IN THE STATE OF FLORIDA.

CERTIFIED BY: STEPHEN J. BROWN  
FL. PROFESSIONAL NO: 4049  
DATE: 2/5/86 JOB NO: 766-01-01

SITE DIRECTIONS

ATTACH SITE LOCATION MAP OR EXPLAIN DIRECTION TO SITE BELOW

RECORD OF INSPECTIONS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date ~~2/1/87~~ 2/1/87

This is to request that a Certificate of Approval for Occupancy be issued to BURKARD  
For property built under Permit No. 1958 Dated 5/20/86 when completed in  
conformance with the Approved Plans.

Item		
1. LOT STAKES/SET BACKS	<u>7/15/86</u>	Signed _____
2. TERMITE PROTECTION		
3. FOOTING - SLAB	<u>7/28/86</u>	Approved by _____
4. ROUGH PLUMBING	<u>7/22/86</u>	
5. ROUGH ELECTRIC	<u>11/14/86</u>	
6. LINTEL		
7. ROOF		
8. FRAMING	<u>11/14/86</u>	
9. INSULATION	<u>11/8/86</u>	
10. A/C DUCTS	<u>11/14/86</u>	
11. FINAL ELECTRIC	<u>2/1/87</u>	
12. FINAL PLUMBING	<u>2/1/87</u>	
13. FINAL CONSTRUCTION	<u>2/1/87</u>	

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Dale Brown 2/1/87 date

Approved by Building Commissioner \_\_\_\_\_ date

Utilities notified FPL 1/28/87 date

Original Copy sent to \_\_\_\_\_

(Keep carbon copy for Town files)

**2300**

**POOL**

Permit No. \_\_\_\_\_

**2300**

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 JON BURKARD Present Address 48 RIO VISTA DR

Phone 286-3319

Contractor DESTEFANO & MARTIN POOLS Address 1501 Decker Ave #304

Phone 692-2450 STUART 34994

Where licensed MARTIN CO License number SP00807

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

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

48 RIO VISTA DR

Subdivision RIO VISTA Lot number 92 Block number \_\_\_\_\_

Contract price \$ 20,000.00 Cost of permit \$ \_\_\_\_\_

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

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

Contractor Terry Destefano

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 Jon Burkard

TOWN RECORD

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

Approved: Dale Brown 5/12/88  
Building Inspector Date

Approved: \_\_\_\_\_ Commissioner Date Final Approval given: \_\_\_\_\_ Date

Certificate of Occupancy issued (if applicable) \_\_\_\_\_  
Date

SP1282

Permit No. \_\_\_\_\_

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

**3219**

**CONCRETE DECK**

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

3219

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

Owner Judith Lynn Charnitzki Present Address 48 RIO VISTA DR.

Phone (407) 220-4170

Contractor Bentley III Corporation Address 1554 SW college street

Phone (407) 220-2305

Where licensed Martin County License number SP 01775

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 wood deck with concrete deck around

existing SPA (250 SQ FT) - NO CHANGES IN SHAPE OR SIZE

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

48 RIO VISTA DRIVE

Subdivision Rio Vista Sub Div Lot number 92 Block number

Contract price \$ 1,900.00 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-tacking~~ the construction project.

Contractor *[Signature]*

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

Owner Judith Lynn Charnitzki

TOWN RECORD

Date submitted 7/15/92 Approved: *[Signature]* 7/15/92  
Building Inspector Date

Approved: *[Signature]* 7/15/92 Final Approval given: 7/15/92  
Commissioner Date 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.



**3930**

**PORCH ENCLOSURE**

Mortgage Lender's Address

Mortgage Lender's Name

Architect/Engineer's Address 417 COCONUT AVE. STUART, FL. 34994

Architect/Engineer's Name BRADEN & BRADEN

City State

Bonding Company Address

Bonding Company

LOT: 92

Legal Description SUB-DIVISION: RIO VISTA

City Town of Sewall's Point State Florida ZIP 34996

Job Address

Job Name

Contractor's Telephone (407) 286-5600 License Number CBC057431

City State ZIP

Contractor's Address 2115 S.E. OCEAN BLVD. STUART, FL. 34996

Contractor's Name PALM COAST DEVELOPMENT, INC.

City State ZIP

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

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

Owner's Telephone (407) 220-4170

Owner's Address 48 RIO VISTA DR. STUART, FL. 34996

Owner's Name JUDITH L. D'ANGELO

BUILDING PERMIT APPLICATION

TOWN OF SEWALL'S POINT, FLORIDA

ISS 2 0 1993

Tax Folio No.

3930



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

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

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

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

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

Plumbing Contractor WJA License No. \_\_\_\_\_  
Electrical Contractor Blair File License No. 11600345  
Roofing Contractor Blair License No. 11711244  
A/C Contractor PCT License No. 04101123

Description of Building or Alterations Enclose Back Porch

Name of Street Designated as Front Building Line and Front Yard \_\_\_\_\_

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

Building Area (air conditioned) 360 sq. ft.

Garage, Porch, Carport Area \_\_\_\_\_ sq. ft.

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

919000

John A. D'Amico DATE 2/28/96  
(Owner or Authorized Agent)

Sworn and Subscribed before me this

20<sup>th</sup> day of Feb. 1996

(SEAL)

*[Signature]*



NOTARY PUBLIC  
State of Florida at Large  
My Commission Expires:

*[Signature]*  
(Contractor)

DATE 2/28/96

Sworn and subscribed before me this

20<sup>th</sup> day of Feb. 1996

(SEAL)

*[Signature]*



NOTARY PUBLIC  
State of Florida at Large  
My Commission Expires:

Certificate of Competency Holder

Contractor's State Certificate of Registration or Registration No. 10025712

Contractor's Certificate of Competency No. \_\_\_\_\_

APPLICATION APPROVED BY *[Signature]* Permit Officer

For Official Use Only

Plans approved as submitted \_\_\_\_\_ Date \_\_\_\_\_

Plans approved as marked \_\_\_\_\_ Date \_\_\_\_\_

A/C Area \_\_\_\_\_ sq. ft. x \$60. = \$ \_\_\_\_\_

Non A/C Area \_\_\_\_\_ sq. ft. x \$25. = \$ \_\_\_\_\_

Total = \$ \_\_\_\_\_

Contract Price \$ 10,000 (fee will be charged on higher amount)

\_\_\_\_\_ M. x \$3.00 = \$ \_\_\_\_\_ Building Fee

25% Owner/Builder Fee \$ \_\_\_\_\_ (if applicable)

A/C Fee \$ 100.00

Electrical Fee \$ 100.00

Plumbing Fee \$ MM

Roofing Fee \$ 100.00

Radon Fee \$ MM

County Impact Fee \$ MM

TOTAL PERMIT FEE \$ 375.00

PAYMENT RECEIVED Rob Brown 1/21/06  
Signature Date

Contractor's License \_\_\_\_\_

Sub-Contractors' Licenses \_\_\_\_\_

Workers' Comp. Insurance \_\_\_\_\_

General Liability Insurance \_\_\_\_\_

Three sets of Plans \_\_\_\_\_

Plans sealed by architect or engineer \_\_\_\_\_

Plot Plan \_\_\_\_\_

Boundary survey \_\_\_\_\_

Topographic survey \_\_\_\_\_ certified to the  
Town of S.P.

Recorded warranty deed \_\_\_\_\_

Septic tank permit \_\_\_\_\_

Energy Code calculations \_\_\_\_\_

Elevation certificate \_\_\_\_\_

Recorded notice of commencement \_\_\_\_\_

Application for C.O. \_\_\_\_\_

**6791**

**FENCE**

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

### TOWN OF SEWALL'S POINT

Date 6/7/04

BUILDING PERMIT NO. 6791

Building to be erected for BOOYSEN

Type of Permit FENCE

Applied for by STUART FENCE (Contractor)

Building Fee 30.00

Subdivision RIO VISTA Lot 92 Block \_\_\_\_\_

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

Address 48 RIO VISTA DR

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

Type of structure SFR

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

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

Parcel Control Number:

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

1238410020000092040000

Roofing Fee \_\_\_\_\_

Amount Paid 30.00 Check # 1693 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ )

TOTAL Fees 30.00

Total Construction Cost \$ 2487.00

Signed Jerry Loudin  
Applicant

Signed Gene Summers (PMB)  
Town Building Official

## PERMIT

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

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

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

## INSPECTIONS

UNDERGROUND PLUMBING \_\_\_\_\_

UNDERGROUND MECHANICAL \_\_\_\_\_

STEMWALL FOOTING \_\_\_\_\_

SLAB \_\_\_\_\_

ROOF SHEATHING \_\_\_\_\_

TRUSS ENG/WINDOW/DOOR BUCKS \_\_\_\_\_

ROOF TIN TAG/METAL \_\_\_\_\_

PLUMBING ROUGH-IN \_\_\_\_\_

MECHANICAL ROUGH-IN \_\_\_\_\_

FRAMING \_\_\_\_\_

FINAL PLUMBING \_\_\_\_\_

FINAL MECHANICAL \_\_\_\_\_

FINAL ROOF \_\_\_\_\_

UNDERGROUND GAS \_\_\_\_\_

UNDERGROUND ELECTRICAL \_\_\_\_\_

FOOTING \_\_\_\_\_

TIE BEAM/COLUMNS \_\_\_\_\_

WALL SHEATHING \_\_\_\_\_

LATH \_\_\_\_\_

ROOF-IN-PROGRESS \_\_\_\_\_

ELECTRICAL ROUGH-IN \_\_\_\_\_

GAS ROUGH-IN \_\_\_\_\_

EARLY POWER RELEASE \_\_\_\_\_

FINAL ELECTRICAL \_\_\_\_\_

FINAL GAS \_\_\_\_\_

BUILDING FINAL \_\_\_\_\_

RECEIVED

JUN 03 2004

Town of Sewall's Point
BUILDING PERMIT APPLICATION

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

OWNER/TITLEHOLDER NAME: JOHN BOOYSEN Phone (Day) 219-1930 (Fax) \_\_\_\_\_

Job Site Address: 48 RIO VISTA DR City: Sewall's Point State: FL Zip: \_\_\_\_\_

Legal Description of Property: Lot 92, Rio Vista Subdivision Parcel Number: 12-38-41-002-000-00920.4

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

Description of Work To Be Done: INSTALL 162' of BOARD ON BOARD FENCE WITH (2) WALK GATES

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

CONTRACTOR/Company: STUART FENCE CO Phone: 288 1151 Fax: 288 3035

Street: 2826 SE IRIS ST City: STUART State: FL Zip: 34995

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Martin County License Number: CFE 3584

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 2487.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

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

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

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

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

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

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

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

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ ScreenedPorch: \_\_\_\_\_
Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

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

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

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

OWNER OR AGENT SIGNATURE (required) K BOOYSEN

State of Florida, County of: MARTIN

This the 3 day of JUNE, 2004

by Kelly Booyesen who is personally known to me or produced FL DL

as identification Janis L. Loudin

My Commission Expires May 21, 2006

Bonded Thru Atlantic Bonding Co., Inc.

CONTRACTOR SIGNATURE (required) Chester Richmond

On State of Florida, County of: MARTIN

This the 3 day of JUNE, 2004

by CHESTER RICHMOND who is personally known to me or produced

As identification Janis L. Loudin

My Commission Expires May 21, 2006

Bonded Thru Atlantic Bonding Co., Inc.



# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
8/21/03

**PRODUCER**

**MARIE HOWELL INSURANCE SERVICES**  
3215 S US 1 SUITE B-201  
FORT PIERCE FL 34982  
772-461-4733

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

**INSURERS AFFORDING COVERAGE**

INSURER A: **NATIONAL INSURANCE CO**  
INSURER B:  
INSURER C:  
INSURER D:  
INSURER E:

**RECEIVED**  
NAIC  
AUG 21 2003  
BY: \_\_\_\_\_

**INSURED**

**STUART FENCE COMPANY, INC.**  
CHESTER J. RICHMOND & JOHN JAMASON  
P O B 2636  
STUART, FL 34995

**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.

INSUR LTR	ADD'L POLY	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
		<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO. JECT <input type="checkbox"/> LOC	<b>BINDER 03GL014</b>	<b>08/18/03</b>	<b>08/18/04</b>	EACH OCCURRENCE \$ <b>500,000</b> DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ <b>50,000</b> MED EXP (Any one person) \$ <b>5,000</b> PERSONAL & ADV INJURY \$ <b>INC</b> GENERAL AGGREGATE \$ <b>500,000</b> PRODUCTS - COM/PROP AGG \$ <b>INC</b>
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA ACCIDENT) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				<input type="checkbox"/> WC STAT. <input type="checkbox"/> TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

**CERTIFICATE HOLDER**

**TOWN OF SEWELLS POINT**  
1 SOUTH SEWELLS POINT RD.  
SEWELLS POINT, FL 34996

FAX# 772-226-4765


**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL \_\_\_\_\_ 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

*Marie E. Howell*

**RECEIVED**  
 AUG 21 2003  
 BY: \_\_\_\_\_



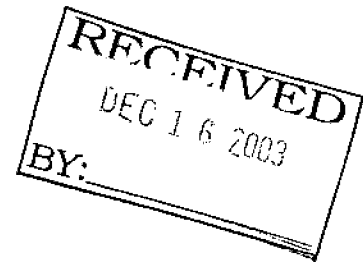
**MARTIN COUNTY, FLORIDA**  
**Construction Industry Licensing Board**  
**Certificate of Competency**

**FENCE ERECTION**

License Number CFE3584 Expires: 30-SEP-04

RICHMOND, CHESTER J III  
 STUART FENCE & WIRE  
 4604 SE MANATEE LN  
 STUART, FL 34997

<b>2003-2004 MARTIN COUNTY ORIGINAL COUNTY OCCUPATIONAL LICENSE</b> Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995 (772) 288-6604		2004-518-003 CFE3584 (772) 519-6263 444 00	
<b>CHARACTER COUNTS IN MARTIN COUNTY</b>		4604 SE MANATEE LANE MAH	
PREVIOUS \$ .00 \$ .00 \$ .00 \$ .00 <b>TOTAL \$ 25.00</b>	LICENSE \$ 25.00 FEE \$ .00 TAX \$ .00 TOTAL \$ 25.00	<b>RECEIPT OF PAYMENT</b> LARRY C. O'STEEN BY 08/19/2003 DEBIT NUMBER 2004518003000 02208308190066/10X	
<b>FENCE ERECTION</b>			
19 AUGUST 03 ENDING SEPTEMBER 2004		RICHMOND, CHESTER/QUALITY ET STUART FENCE COMPANY INC 4604 SE MANATEE LANE STUART FL 34997	



09-12-2003

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

CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW

CONSTRUCTION INDUSTRY EXEMPTION

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

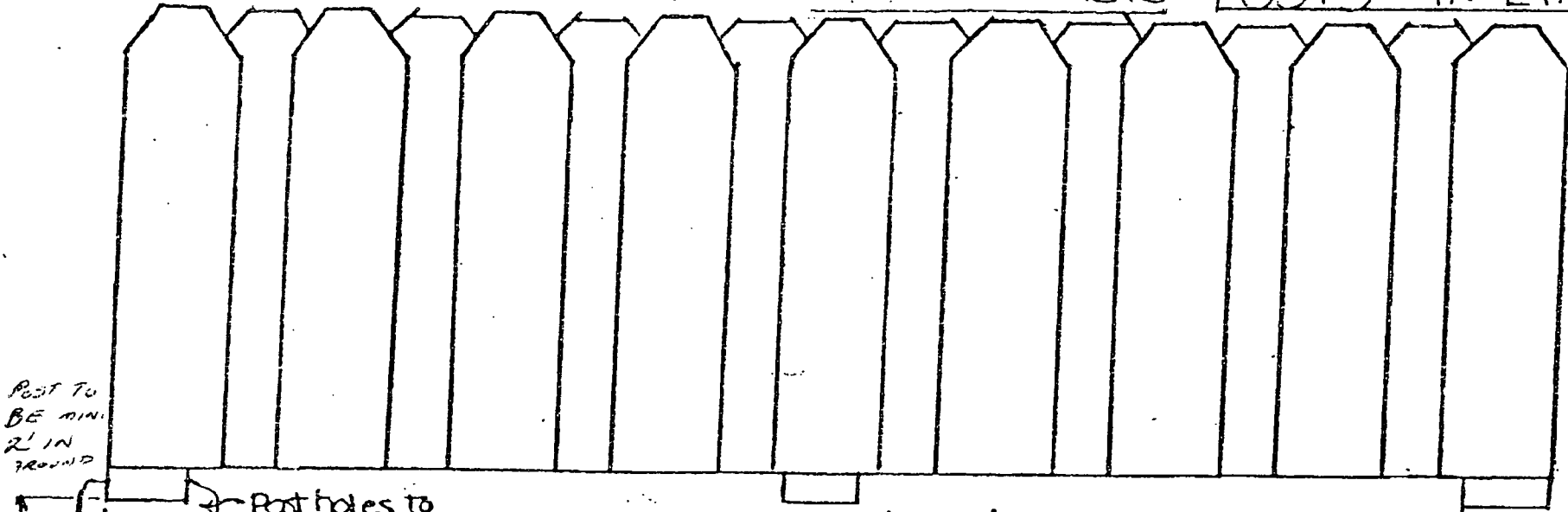
EFFECTIVE	08/21/2003	EXPIRATION DATE	08/20/2005
PERSON	RICHMOND	CHESTER	J
SSN	046-48-7885		
FEIN	861077639		
BUSINESS	STUART FENCE COMPANY, INC. P O BOX 2636 STUART	FL	34995

---

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

BOARD ON BOARD WOOD FENCE

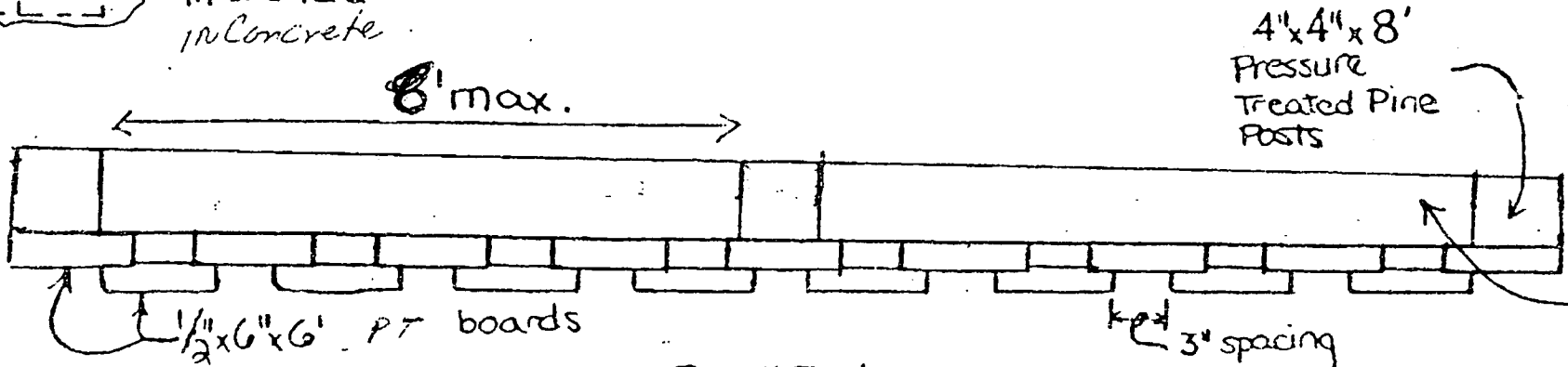
PICKETS POSTS - IN-LINE



POST TO BE MIN. 2' IN GROUND

Post holes to be 10" in diameter in concrete

FRONT VIEW



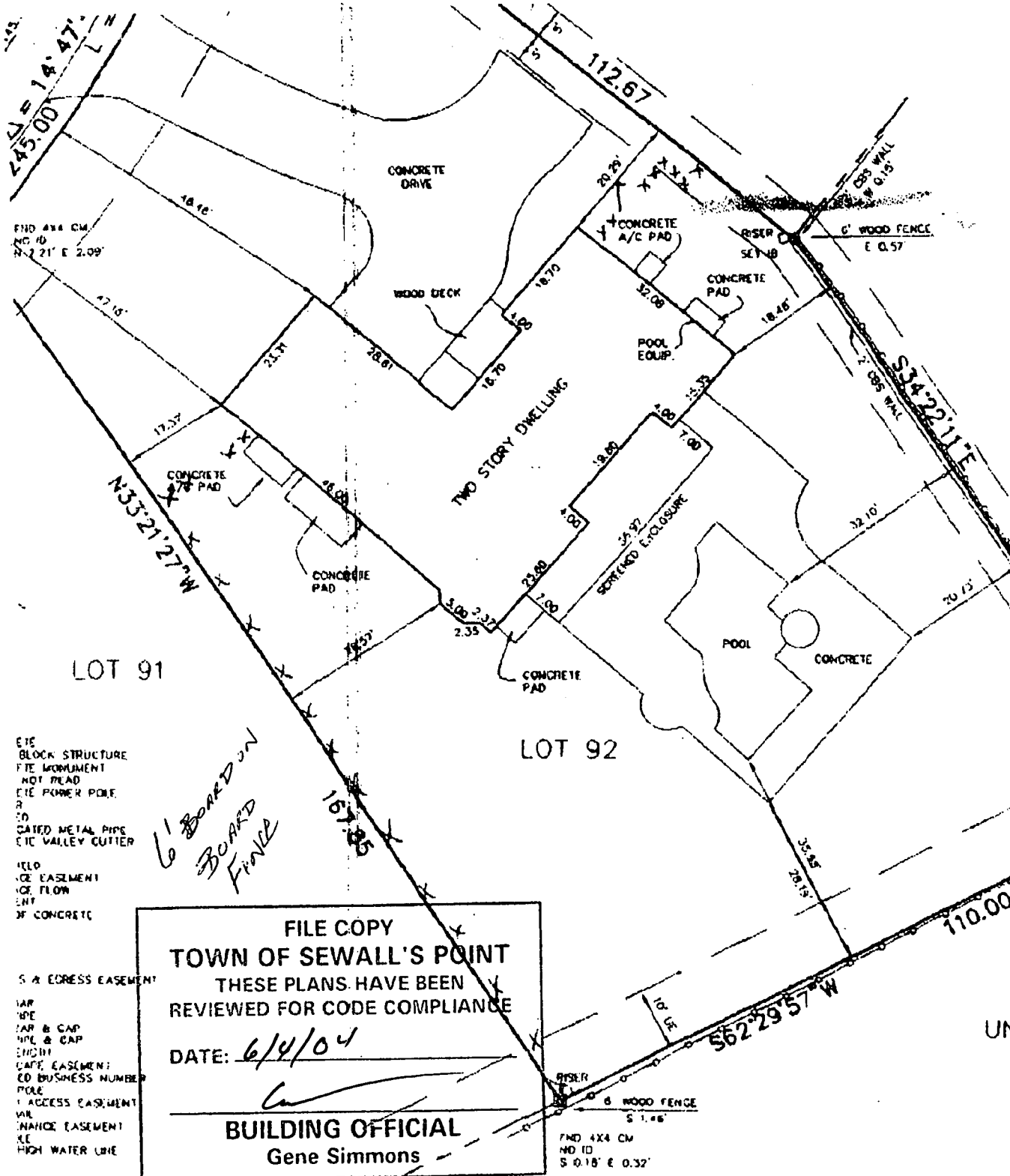
1/2 x 6 x 6 PT boards

4 x 4 x 8 Pressure Treated Pine Posts

3 inch spacing

BEACH  
2 x 4 Pressure Treated Pine Rails

TOP VIEW



LOT 91

LOT 92

- EIE
- BLOCK STRUCTURE
- FTE MONUMENT
- NOT DEAD
- EIE POWER POLE
- R
- ED
- GATED METAL PIPE
- EIE VALLEY CUTTER
- FIELD
- ICE EASEMENT
- ICE FLOW
- ENT
- OF CONCRETE

FILE COPY  
**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE: 6/4/04  
 \_\_\_\_\_  
**BUILDING OFFICIAL**  
 Gene Simmons

8 RIO VISTA WAY  
 3 KELLY LYNN BOOYSEN

**NOT VALID WITHOUT THE SIGNATURE  
 ORIGINAL RAISED SEAL OF A FLORIDA  
 SURVEYOR AND MAPPER**

UN

# EASEMENT AGREEMENT

Date: 5/20/04

Gentlemen:

I propose to apply for a Martin County permit to erect a FENCE in the (utility/drainage) easement on my property at \_\_\_\_\_

48 RIO VISTA DRIVE . LEGAL DESCRIPTION:  
LOT 92 , BLOCK \_\_\_\_\_ , SUBDIVISION RIO VISTA

(Brief description of dimensions and location from property lines)  
SEE SURVEY

In the event you have no objection to this project, please complete this form and return to me at FAX TO: 772-288-3035

I understand your company will not be responsible in any way for repair or replacement of any portion of this FENCE and that any removal or replacement of such, necessary for your use of this easement will be done at my expense.

I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure.

Signed: [Signature] Phone: 219-1930

\*\*\*\*\*

### FOLLOWING TO BE COMPLETED BY UTILITY COMPANY

We agree to the proposed construction under the circumstances described above.

Company: Martin County Utilities  
By: Phillip M. Heasley  
Title: Environmental Engineer II

Company records indicate that a potential conflict (DOES) NOT exist. The conflict consists of \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

# EASEMENT AGREEMENT

Date: 5/20/04

Gentlemen:

I propose to apply for a Martin County permit to erect a FENCE in the (utility/drainage) easement on my property at \_\_\_\_\_

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(Brief description of dimensions and location from property lines)  
SEE SURVEY

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I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure.

Signed: [Signature] Phone: 219-1930

.....  
**FOLLOWING TO BE COMPLETED BY UTILITY COMPANY**

We agree to the proposed construction under the circumstances described above.

Company: Bell South  
By: Henry L. Kof  
Title: ENGINEER

Company records indicate that a potential conflict (DOES) (~~DOES NOT~~) exist. The conflict consists of \_\_\_\_\_

CALL FOR LOCATES PRIOR TO DIGGING  
HAND TRENCH ONLY WITHIN 3' OF  
BELL SOUTH FACILITIES.

# EASEMENT AGREEMENT

Date: 5/20/04

Gentlemen:

I propose to apply for a Martin County permit to erect a FENCE in the (utility/drainage) easement on my property at \_\_\_\_\_

48 RIO VISTA DRIVE LEGAL DESCRIPTION:

LOT 92, BLOCK \_\_\_\_\_, SUBDIVISION RIO VISTA

(Brief description of dimensions and location from property lines)  
SEE SURVEY

In the event you have no objection to this project, please complete this form and return to me at FAX TO: 772-288-3035

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I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure.

Signed: [Signature] Phone: 219-1930

.....  
**FOLLOWING TO BE COMPLETED BY UTILITY COMPANY**

We agree to the proposed construction under the circumstances described above.

Company: BellSouth

By: Susan Morse

Title: OSP-Specialist

Company records indicate that a potential conflict (DOES) (DOES NOT) exist. The conflict consists of buried cable in

rear easement. Please call for locates before digging 1-800 4324770



# EASEMENT AGREEMENT

Date: 5/20/04

Gentlemen:

I propose to apply for a Martin County permit to erect a FENCE in the (utility/drainage) easement on my property at \_\_\_\_\_

48 RIO VISTA DRIVE . LEGAL DESCRIPTION:  
LOT 92 , BLOCK \_\_\_\_\_ , SUBDIVISION RIO VISTA

(Brief description of dimensions and location from property lines)  
SEE SURVEY

In the event you have no objection to this project, please complete this form and return to me at FAX TO: 772-288-3035

I understand your company will not be responsible in any way for repair or replacement of any portion of this FENCE and that any removal or replacement of such, necessary for your use of this easement will be done at my expense.

I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure.

Signed: [Signature] Phone: 219-1930

.....  
**FOLLOWING TO BE COMPLETED BY UTILITY COMPANY**

We agree to the proposed construction under the circumstances described above.

Company: ADELPHIA CABLE  
By: BOB CRANT  
Title: CONSTRUCTION SUPERVISOR

Company records indicate that a potential conflict (DOES) (DOES NOT) exist. The conflict consists of \_\_\_\_\_

HOWEVER WE DO HAVE A UNDERGROUND LINE IN THE REAR, PLEASE CALL LOCATES @ 1-800-432-4770 PRIOR TO STARTING WORK.

# EASEMENT AGREEMENT

Date: 5/20/04

Gentlemen:

I propose to apply for a Martin County permit to erect a FENCE

in the (utility/drainage) easement on my property at \_\_\_\_\_

48 RIO VISTA DRIVE

LEGAL DESCRIPTION:

LOT 92, BLOCK \_\_\_\_\_, SUBDIVISION RIO VISTA

(Brief description of dimensions and location from property lines)

SEE SURVEY

In the event you have no objection to this project, please complete this form and return to me at FAX TO: 772-288-3035

I understand your company will not be responsible in any way for repair or replacement of any portion of this FENCE and that any removal or replacement of such, necessary for your use of this easement will be done at my expense.

I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure.

Signed: Dan Hoffman Phone: 219-1930

\*\*\*\*\*  
FOLLOWING TO BE COMPLETED BY UTILITY COMPANY

We agree to the proposed construction under the circumstances described above.

Company: FLORIDA Power & Light CO

By: Bobby Pinson

Title: Distribution Engineer

Company records indicate that a potential conflict ~~(DOES)~~ ~~(DOES)~~ exist. The conflict consists of \_\_\_\_\_

UNDERGROUND ELECTRIC LINES ON WEST, EAST, AND NORTH SIDES OF LOT

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 6/23, 20014 Page \_\_\_\_\_ of \_\_\_\_\_

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6789	BAUMGARTNER	FINAL ROOF	PASS	CLOSE
7A	20 BANYAN ALL AMERICAN			INSPECTOR:
6762	<del>GIANCHINO</del> 96 S. SEWALL'S PT BAYVIEW CONST	<del>Final Plumbing</del> BATHROOM		MON INSPECTOR:
5707	WOLLOTT	FINAL RETIC WALK	PASS	CLOSE
1	32 RIO VISTA DR O/B			INSPECTOR:
6082	MILORD	TIE BEAM	PASS	
7B	10 N. SEWALL'S PT MILORD CO.			INSPECTOR:
6791	BOYSEN	FENCE	PASS	CLOSE ?
2	48 RIO VISTA STUART F			INSPECTOR:
6695	VOLPE	FINAL	PASS	CLOSE
3	15 M. RAMAR O/B	REPAIR POOL DECK + FILL		INSPECTOR:
6787	O'KEEFE	FINAL POOL EXH	PASS	CLOSE
7	29 FIELDWAY SAILFISH ALUMINUM			INSPECTOR:

OTHER: \_\_\_\_\_

**7139**

**GARAGE DOOR**

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

### TOWN OF SEWALL'S POINT

Date 12/17/04

BUILDING PERMIT NO. 7139

Building to be erected for BOOYSEN

Type of Permit GARAGE DOOR

Applied for by AMERICAN PB GARAGE (Contractor)

Building Fee 35.00

Subdivision RIO VISTA Lot 92 Block \_\_\_\_\_

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

Address 48 RIO VISTA DRIVE

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

Type of structure SFR

AC Fee \_\_\_\_\_

Parcel Control Number:

1238410020000092040000

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

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

Amount Paid 35.00 Check # \_\_\_\_\_ Cash

Roofing Fee \_\_\_\_\_

Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 2254.00

TOTAL Fees 35.00

Signed [Signature]

Applicant

Signed [Signature]

Town Building Official

## PERMIT

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

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

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

## INSPECTIONS

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

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

DEC 16 2004

Town of Sewall's Point

Date: 12/16/04 RECEIVED BUILDING PERMIT APPLICATION Permit Number: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: JOHN BOOYSEN Phone (Day) 219-1930 (Fax) \_\_\_\_\_

Job Site Address: 48 Rio Vista DR. City: STUART State: FL Zip: 34996

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

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

Description of Work To Be Done: REPLACE GARAGE DOOR & OPERATOR

WILL OWNER BE THE CONTRACTOR?:

YES

NO

(If no, fill out the Contractor & Subcontractor sections below)

(If yes, Owner Builder Affidavit must accompany application)

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 22,540.00

(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: \_\_\_\_\_

CONTRACTOR/Company: AMERICA PALM BEACH GARAGE DOOR Phone: 293-4566 Fax: 419-0576

Street: 2201 SE INDIAN STREET UNIT #11-2 City: STUART State: 34997 Zip: FL

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Martin County License Number: SPO 1904

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_
Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_
Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_
Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

ARCHITECT \_\_\_\_\_ Lic.#: \_\_\_\_\_ Phone Number: \_\_\_\_\_
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER \_\_\_\_\_ Lic.# \_\_\_\_\_ Phone Number: \_\_\_\_\_
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

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

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

OWNER OR AGENT SIGNATURE (required) \_\_\_\_\_

State of Florida, County of: MARTIN

This the 16th day of December, 2004

by JOHN BOOYSEN who is personally known to me or produced FDPL B-50706-08-081-0 as identification.

CONTRACTOR SIGNATURE (required) \_\_\_\_\_

On State of Florida, County of: MARTIN

This the 16th day of December, 2004

by ERIC W. O'BRIEN who is personally known to me or produced FDPL M-60-39852-061-0 As identification.

My Commission Expires \_\_\_\_\_ Notary Public O'BRIEN MY COMMISSION # DD 205961 EXPIRES: April 28, 2007 Bonded \$25,000 Secretary Public Underwriters

My Commission Expires \_\_\_\_\_ LAURAY O'BRIEN MY COMMISSION # DD 205961 EXPIRES: April 28, 2007 Bonded Thru Notary Public Underwriters

**RECEIVED**  
DEC 29 2003  
BY:



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

**GARAGE DOOR**

License Number SP01904 Expires: 30-SEP-05

MAFERA, FRED III  
AMER-PALM BCH GARAGE DOOR CORP  
2201 SE INDIAN ST H-2  
STUART, FL 34997

# ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID RG  
AMEPA01

DATE (MM/DD/YYYY)  
07/22/04

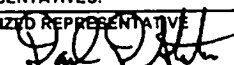
<b>PRODUCER</b>  Gateway Insurance Agency 2430 W. Oakland Park Blvd. Fort Lauderdale FL 33311 Phone: 954-735-5500 Fax: 954-735-2852	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>
<b>INSURED</b>  American Palm Beach Garage Door Corporation 2201 SE Indian Street Stuart FL 34997	INSURER A: <b>FCCI Insurance Company</b>	10178
	INSURER B: AmCOMP Preferred Insurance Co.	
	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 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	CP0000109	08/01/04	08/01/05	EACH OCCURRENCE	\$ 1000000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5000
					PERSONAL & ADV INJURY	\$ 1000000
					GENERAL AGGREGATE	\$ 2000000
					PRODUCTS - COMP/OP AGG	\$ 1000000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC.					
A	AUTOMOBILE LIABILITY	CA0000151	08/01/04	08/01/05	COMBINED SINGLE LIMIT (Ea accident)	\$ 1000000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS					
	<input checked="" type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$
					AUTO ONLY: AGG	\$
A	EXCESS/UMBRELLA LIABILITY	UMB0000109	08/01/04	08/01/05	EACH OCCURRENCE	\$ 1000000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$ 1000000
						\$
	<input type="checkbox"/> DEDUCTIBLE					\$
	RETENTION \$					\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC7009931	08/01/04	08/01/05	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$ 500000
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$ 500000
	OTHER				E.L. DISEASE - POLICY LIMIT	\$ 500000

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

<b>CERTIFICATE HOLDER</b>  SEWPO01  TOWN OF SEWALL'S POINT 1 SOUTH SEWALL'S POINT RD STUART FL 34996	<b>CANCELLATION</b>  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 
--	--



18x8 Clopay  
mdl 94

DCC



**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)**

Clopay Building Products Co.  
8585 Duke Boulevard  
Mason, OH 45040

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: Sectional Garage Door 18' Wide.**

**APPROVAL DOCUMENT:** Drawing No. 102621, titled "Clopay M/N 84A, 94 & H94, Ideal M/N 4RST & H4ST, Holmes M/N 48", dated 06/17/02 with last revision on 01/13/03, sheets 1 of 1, prepared by Clopay Building Products Company, signed and sealed by M. W. Westerfield, P.E., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

**MISSILE IMPACT RATING: Large and Small Missile Impact**

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

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

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

**LIMITATION:** This approval requires the manufacturer to do testing of all coils used to fabricate door panels under this Notice of Acceptance. A minimum of 2 specimens shall be cut from each coil and tensile tested according to ASTM E-8 by a Dade County approved laboratory selected and paid by the manufacturer. Every 3 months, four times a year, the manufacturer shall mail to this office: a copy of the tested reports with confirmation that the specimen were selected from coils at the manufacturer production facilities. And a notarized statement from the manufacturer that only coils with yield strength of 34,300 psi or more shall be used to make door panels for Dade County under this Notice of Acceptance

**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 this page 1 as well as the approval document mentioned above. The submitted documentation was reviewed by Candice F. Font PE.

FILE COPY  
TOWN OF SEVILLA SPAIN  
THESE PLANS HAVE BEEN  
**REVIEWED FOR CODE COMPLIANCE**  
DATE: 12/16/04  
  
**BUILDING OFFICIAL**  
Gene Simmons



NOA No 02-1115.05  
Expiration Date: February 13, 2008  
Approval Date: February 13, 2003

**EVALUATION ENTITY**

Gary Pfuehler, P. E.  
5665 Green Oak Court  
Fairfield, OH 45014

**Product Evaluation Report  
for Florida DCA**

Evaluation Report # 94W7-18

**MANUFACTURER**

Clopay Building Products Company  
8585 Duke Blvd.  
Mason, OH 45040  
513.770.4800

**Statement of Compliance:**

The Clopay Building Products Company sectional doors as described on the drawings listed below meet the design and test pressures shown. Based on the testing and rational analysis detailed below, this product is evaluated to be in compliance with the following provisions of the Florida Building Code:

- 1601.1 Wind Loads
- 1625 Cyclic Tests for HVHZ
- 1626 Impact Tests for HVHZ
- Other:

Description of Product: Steel Pan (min. 24 ga.) 16'4" to 18'-2" wide WindCode® W7 Garage Door  
Design Pressures: +42/-46 Test Pressures: +63/-69

**Specific Models and Technical Documentation:**

Model	Test Report	Drawing No.	Comments
84AW7, 94W7	ATL 0924.02-02	102621	
48W7	ATL 0924.02-02	102621	
4RSTW7	ATL 0924.02-02	102621	
H73, H94W7, H4STW7	ATL 0924.02-02	102621	

**Installation requirements:** Installation must be in accordance with manufacturer's installation instructions.

**Limitations and conditions of use:** Jambs, lintels, sills or other structural elements required to prepare openings are not covered. The design of the supporting structural elements shall be the responsibility of the professional of record for the building or structure and in accordance with current building codes for the loads listed on the drawing referenced above.

**Certification of Independence of Evaluation Entity:** I hereby certify that (1) I have no financial interest in Clopay Building Products Company; (2) I am an independent licensed Professional Engineer in the State of Florida; and (3) I comply with the criteria of independence as stated in 9B-72.110 F.A.C.

Signature:

Gary Pfuehler, P. E.  
Florida P. E. No. 49850

Date:

10/3/03

CLOPAY MODELS 84A, 94, H94  
 IDEAL MODELS 4RST, H4ST  
 HOLMES MODELS 48

ATTACH PLATES AT THESE LOCATIONS ON EACH SECTION OF THE DOOR SEE VIEW 'C'

10 GA. PAINTED END STILES ATTACHED TO DOOR SHOWN WITH PATENTED TOG-L-LOC SYSTEM (TOP, BOTTOM & CENTER).  
 18 GA. GALV. DOUBLE END STILES ATTACHED TO TOP AND BOTTOM RAIL WITH PATENTED TOG-L-LOC SYSTEM.

ONE 20 GA. INTERMEDIATE STILE BETWEEN EACH END STILE LOCATION ATTACHED W/ TOG-L-LOC (TOP & BOT) AND URETHANE ADHESIVE (ALONG CENTER)

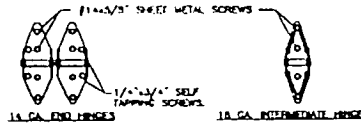
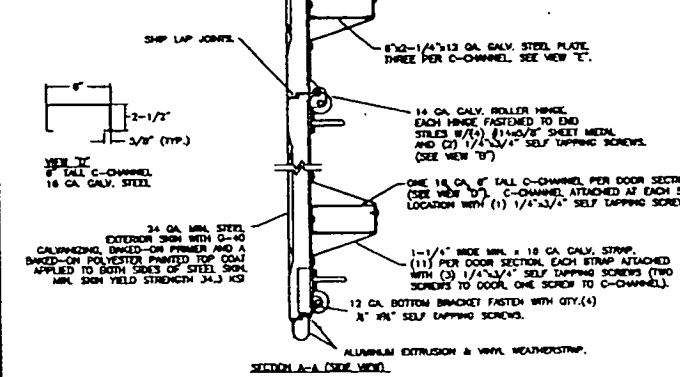
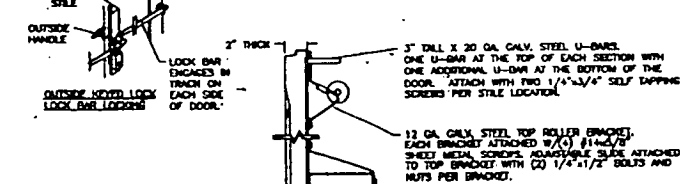
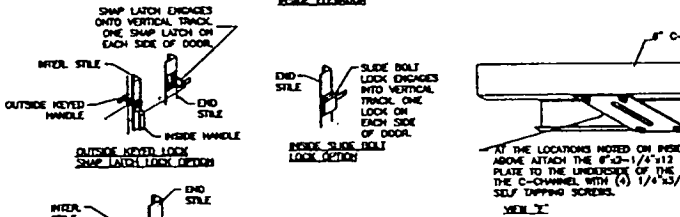
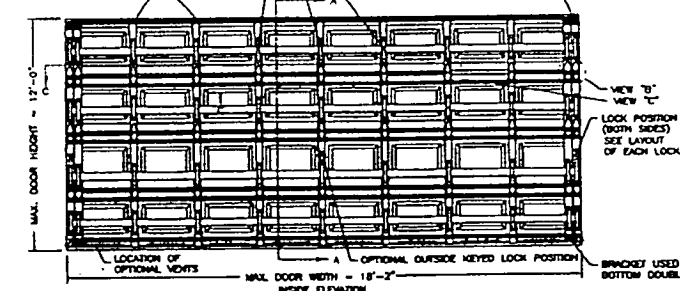
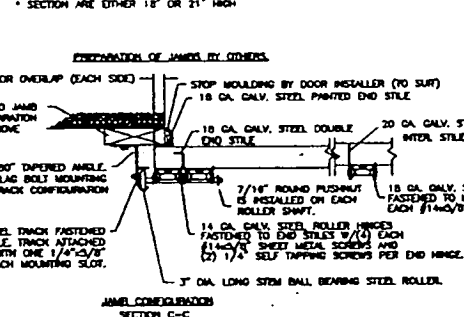


TABLE 1

DOOR HEIGHT	NUMBER OF SECTIONS *
8'0" TO 7'0"	3
7'6" TO 8'0"	3
8'0" TO 8'6"	4
8'6" TO 9'0"	4
9'0" TO 12'0"	7

\* SECTION ARE EITHER 18" OR 21" HIGH



JAMB TO SUPPORTING STRUCTURE ATTACHMENT

- NOTES:
- 1) ALL THE LOAD FROM THE DOOR IS TRANSFERRED TO THE TRACK AND THEN FROM THE TRACK TO THE 2x6 VERTICAL YELLOW PINE (GRADE #2 OR BETTER) JAMBS. NO LOAD FROM THE DOOR IS TRANSFERRED TO THE HORIZONTAL (TOP) JAMB.
  - 2) ALL JAMB FASTENERS MAY BE (BUT NOT REQUIRED) COUNTERSUNK TO PROVIDE A FLUSH MOUNTING SURFACE.

WOOD FRAME BUILDINGS

STUD WALLS OF DOOR OPENING SHALL BE FRAMED SOLID BY NOT LESS THAN (1) 2x6 PRESSURE TREATED GRADE #2 OR BETTER WOOD STUDS OF A STRESS GRADE NOT LESS THAN 1200 PSF MINIMUM. EXTREME FLOOR STRESS IN DOORING (0, 1). STUD WALLS TO BE CONTINUOUS FROM FOOTING TO THE BEAMS.

BLOCK WALL OR 2000 P.S.I. MIN. CONCRETE

2x6 WOOD JAMB SHALL BE ANCHORED TO CURT REINFORCED BLOCK WALL OR CONCRETE COLUMN. BLOCK WALL CELLS SHALL BE FILLED WITH CONCRETE AND REINFORCED WITH REINFORCING BARS EXTENDING INTO THE FOOTING AND INTO THE BEAMS. ALL BARS SHALL BE CONTINUOUS FROM THE THE BEAMS TO FOOTING PER BLOCK WALL OR CONCRETE COLUMN. BLOCK WALLS AND CONCRETE COLUMNS TO BE DESIGNED BY THE BUILDING ENGINEER OR ARCHITECT OF RECORD.

2x6 JAMB TO SUPPORTING STRUCTURE ATTACHMENT

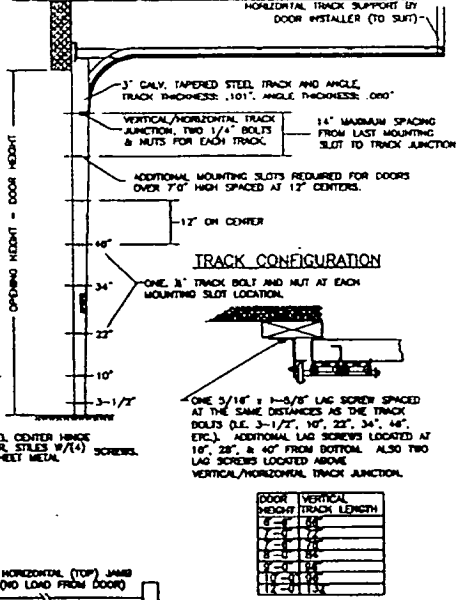
BUILDING TYPE	FASTENER TYPE	MAXIMUM * ON CENTER DISTANCE BETWEEN FASTENERS	STEEL WAGHERS (REQUIRED)
WOOD FRAME	1 1/2" x 1-3/8" EMBED LAG SCREW (ASTM A307) GRADE A1	11'-0"	0
2000 P.S.I. CONCRETE	1 1/2" x 1-3/8" EMBED LAG SCREW (ASTM A307) GRADE A1	11'-0"	0
12" BLOCK WALL	3/8" x 1-1/2" HLN EMBED STEEL ANCHOR BOLT	11'-0"	10 LIPS
2000 P.S.I. MIN. CONCRETE	3/8" x 1-3/8" HLN EMBED STEEL ANCHOR BOLT	11'-0"	PROHIBIT

\* - FIRST ANCHOR/SCREW STARTING FROM BOTTOM AT NO MORE THAN HALF OF MAXIMUM ON CENTER DISTANCE. SUBSEQUENT ANCHOR/SCREW INSTALLED AT LEAST AS HIGH AS THE DOOR OPENING HEIGHT.

† - TAPED/SLIDE ANCHORS CAN BE INSTALLED DIRECTLY THROUGH TAPERED TRACK ANGLE IN LIEU OF 3/8" x 1-3/8" LAG SCREWS

DESIGN LOADS: +42.0 P.S.F. & -48.0 P.S.F.  
 TEST LOADS: +83.0 P.S.F. & -89.0 P.S.F.

REV	DATE	DESCRIPTION
1	9/2003	DOUBLE TRACK LHR AS OPTION
2	11/2003	ADD 34.3 KSI MIN. YIELD



DOOR VERTICAL HEIGHT TRACK LENGTH

DOOR HEIGHT	TRACK LENGTH
8'-0"	18'-0"
8'-6"	18'-0"
9'-0"	18'-0"
9'-6"	18'-0"
10'-0"	18'-0"
10'-6"	18'-0"
11'-0"	18'-0"
11'-6"	18'-0"
12'-0"	18'-0"

THIS DOOR MEETS OR EXCEEDS THE DESIGN LOADS FOR THE WIND SPEEDS LISTED BELOW ACCORDING TO THE 2001 FLORIDA BLDG. CODE OR 2000 IBC (ASCE 7-98) FOR THE FOLLOWING CONDITIONS 1) ENCLOSED BUILDING, 2) DOOR HAS 2' OF HEAD IN BUILDING'S END ZONE, 3) IMPORTANCE FACTOR OF 1.0, 4) ANY ROOF SLURF AND SLAB SIZE SAFETY FACTOR.

WIND SPEED (MPH)	5	10	15	20	25	30
EXPOSURE LEVEL	B or C	B	C	B	C	B
MEAN ROOF HEIGHT	30'	30'	20'	30'		

THIS DOOR MEETS THE REQUIREMENTS OF THE LARGE MESSILE IMPACT AND CYCLIC TESTING.



**Clopay**  
 Building Products  
 Company

CLOPAY BUILDING PRODUCTS COMPANY  
 8885 DUKE BLVD.  
 MASON, OH 45040  
 (513) 770-4800

SCALE: NONE  
 DATE: 6/17/02  
 DRAWN BY: RJK  
 CHECKED BY: MWW

DESIGN ENGINEER:  
 MARK H. WESTERFIELD, P.E.  
 FLORIDA P.E. #48400, NC P.E. #23832, TEXAS P.E. #91513

THIS DOOR SIZE: 18'2" W x 12'0" H  
 DESCRIPTION: CLOPAY M/W 84A, 94 & H94  
 IDEAL M/W 4RST & H4ST; HOLMES M/W 48

102621

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 1/5, 20005 Page      of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6719	DONAHUE	TIE DOWN	FAIL	
4	163 S. SEWALLS HALL-SAMMONS			INSPECTOR:
TREE	LAGANA	TREE	—	RECHECKED BY OWNER
3	19 E. HIGH PKRD			INSPECTOR:
7093	LANGER	GAS ROUGH	—	RECHECKED FOR 1-5-05
12	3 LOFTING FERRELL GAS			INSPECTOR:
7047	D'ALESSANDRO	LATT STRUCTURE	PASS	CLOSE
10	4 EMAKITA WAY GULFSTREAM	FINAL		INSPECTOR:
7139	BOOYSEN	GARAGE DOOR	PASS	CLOSE
6	48 RIO VISTA DR AMOR ROLL BEACH	FINAL		INSPECTOR:
6876	PETERSEN	ROOF SHEATHING	PASS	
7	49 RIO VISTA DRIFTWOOD HOMES			INSPECTOR:
		<del>SHEATHING</del>		
	<del>4 RIVERVIEW</del>	<del>FINISH SHEATHING</del>		
	<del>MAST</del>			INSPECTOR:

OTHER: \_\_\_\_\_

**7468**

**FENCE**

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

**TOWN OF SEWALL'S POINT**

Date 4/8/05

BUILDING PERMIT NO. 7468

Building to be erected for DUNN Type of Permit FENCE

Applied for by STUART FENCE (Contractor) Building Fee 30.00

Subdivision RIO VISTA Lot 92 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_

Address 48 RIO VISTA DRIVE Impact Fee \_\_\_\_\_

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

Parcel Control Number:

1238410020000092040000 Electrical Fee \_\_\_\_\_

Amount Paid 30.00 Check # 3294 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 2345.00 Plumbing Fee \_\_\_\_\_

TOTAL Fees 30.00 Roofing Fee \_\_\_\_\_

Signed Jerry L. Loudin Signed Gene Summers

Applicant

Town Building Official

**PERMIT**

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

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

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

**INSPECTIONS**

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

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

APR 06 2005

BY:

Town of Sewall's Point  
BUILDING PERMIT APPLICATION

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

OWNER/TITLEHOLDER NAME: ELIZABETH DUNN

Phone (Day) 223-6272 (Fax) \_\_\_\_\_

Job Site Address: 48 Rio Vista Dr

City: STUART

State: FL Zip: 34996

Legal Description of Property: Rio Vista sp lot 92

Parcel Number: 12384100200000920-4

Owner Address (if different): \_\_\_\_\_

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

Description of Work To Be Done: INSTALL 144' OF 4' HIGH GREEN CHAIN LINK FENCE TO REPAIR EXISTING

WILL OWNER BE THE CONTRACTOR?:

Yes  No

(If no, fill out the Contractor & Subcontractor sections below)

CONTRACTOR/Company: Stuart Fence Co

Phone: 288-1511 Fax: 288-3035

Street: 2832 SE Iris St

City: Stuart State: Fl Zip: \_\_\_\_\_

State Registration Number: \_\_\_\_\_

State Certification Number: \_\_\_\_\_

Martin County License Number: LFE 3584

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 2345- (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_  
Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_  
Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_  
Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

ARCHITECT

Street: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER

Street: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

AREA SQUARE FOOTAGE - SEWER - ELECTRIC

Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ ScreenedPorch: \_\_\_\_\_  
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)

Elizabeth S. Dunn

State of Florida, County of: MARTIN

This the 22 day of MARCH, 2005

by ELIZABETH DUNN who is personally

known to me or produced DL

as identification Janis L. Loudin

My Commission # DD119654

Bonded Thru Atlantic Bonding Co., Inc.

Expires May 21, 2006

CONTRACTOR SIGNATURE (required)

Charles Richmond

On State of Florida, County of: MARTIN

This the 22 day of MARCH, 2005

by CHARLES RICHMOND who is personally

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

As identification Janis L. Loudin

My Commission # DD119654

Bonded Thru Atlantic Bonding Co., Inc.

Expires May 21, 2006

REVISION

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

TOWN OF SEWALL'S POINT

RECEIVED  
4/18/05 DAY

Date 4/8/05

BUILDING PERMIT NO. 7468

Building to be erected for DUNN Type of Permit FENCE

Applied for by STUART FENCE (Contractor) Building Fee 30.00

Subdivision RIO VISTA Lot 92 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_

Address 48 RIO VISTA DRIVE Impact Fee \_\_\_\_\_

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

Parcel Control Number: \_\_\_\_\_ Electrical Fee \_\_\_\_\_

1238410020000092040000 Plumbing Fee \_\_\_\_\_

Amount Paid 30.00 Check # 3294 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 2345.00 TOTAL Fees 30.00

Signed Jamie L. Loudin Applicant Signed Gene Simmons Town Building Official

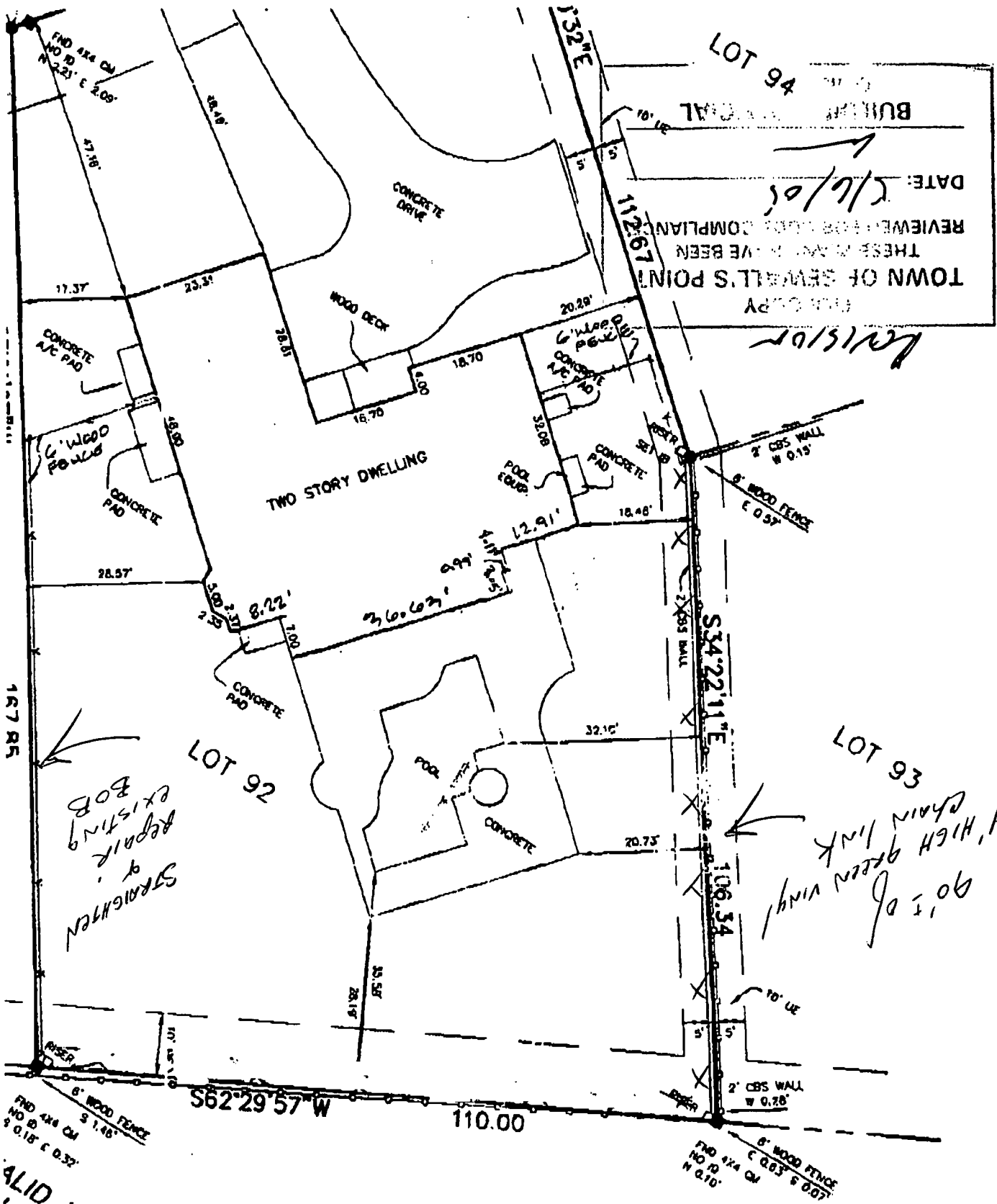
PERMIT

- BUILDING
- ELECTRICAL
- MECHANICAL
- PLUMBING
- ROOFING
- POOL/SPA/DECK
- DOCK/BOAT LIFT
- DEMOLITION
- FENCE
- SCREEN ENCLOSURE
- TEMPORARY STRUCTURE
- GAS
- FILL
- HURRICANE SHUTTERS
- RENOVATION
- TREE REMOVAL
- STEMWALL
- ADDITION

INSPECTIONS

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





DATE: 5/6/05  
 REVIEWED FOR LOCAL COMPLIANCE  
 THESE PLANS HAVE BEEN  
 TOWN OF SEWELL'S POINT  
 APPROVED

*Revised*

*STRAIGHTEN  
 &  
 REPAIR  
 EXISTING  
 BOB*

*90' of  
 HIGHER GREEN VINYL  
 FENCE*

VALID WITHOUT THE S  
 RAISED SEAL  
 AND MA  
 TE

UNPLATTED

7722883035



# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
8/23/04

PRODUCER

**MARIE HOWELL INSURANCE SERVICES**  
3215 S US 1 SUITE B-201  
PORT PIERCE FL 34982  
772-461-4733

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

INSURED

**STUART FENCE COMPANY, INC.**  
CHESTER J. RICHMOND & JOHN JAMASON  
P O B 2636  
STUART, FL 34995

INSURERS AFFORDING COVERAGE

NAIC#

INSURER A: WESTERN WORLD

INSURER B:

INSURER C:

INSURER D:

INSURER E:

8-22-04

**COVERAGES**

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

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER POLICY: <input type="checkbox"/> PROJ <input type="checkbox"/> LOC	04GL010	8/18/04	8/16/05	EACH OCCURRENCE \$ 1,000,000 PRODUCTS - LIMITED PREMISES (Eq. occupied) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PROP AGG \$ 1,000,000
AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Eq. accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
GARAGE LIABILITY ANY AUTO				AUTO OBLY - EA ACC \$ OTHER THAN AUTO OBLY EA ACC \$ AGG \$
UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE PRODUCTS RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
OFFICERS COMPENSATION AND EMPLOYERS' LIABILITY NOT FOR FORTUNE AND EXECUTIVE AND GENERAL EXCLUDED (See Schedule and SPECIAL PROVISIONS below)				YEARLY LIMIT \$ \$1. EACH ACCIDENT \$ EL DISEASE - EA EMPLOYEE \$ EL DISEASE - POLICY LIMIT \$
OTHER				

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

FENCE ERECTION

**CERTIFICATE HOLDER**

TOWN OF SEWELL'S POINT  
1 S. SEWELL'S POINT ROAD  
SEWELL'S POINT, FL 34996

ATTN: LORA  
PHONE 772-220-4765

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL \_\_\_\_\_ 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

*M. Howell*

ACORD 25 (09/1/02)

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

Date  
12/16/200

**Producer:** Lion Insurance Company  
2739 U.S. Highway 19 N.  
Holiday, FL 34691  
Phone: 727-938-5562 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.**

**Insurers Affording Coverage**

NAIC #

**Insured:** South East Personnel Leasing  
2739 U.S. Highway 19 N.  
Holiday, FL 34691  
Phone : (727)938-5562

Insurer A: Lion Insurance Company  
Insurer B:  
Insurer C:  
Insurer D:  
Insurer E:

**Coverages**

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

INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits	
		<b>GENERAL LIABILITY</b> <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur  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	\$
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident)	\$
						Bodily Injury (Per Person)	\$
						Bodily Injury (Per Accident)	\$
						Property Damage (Per Accident)	\$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> Any Auto				Auto Only - Ea Accident	\$
						Other Than EA Acc.	\$
						Autos Only: AGG.	\$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made <input type="checkbox"/> Deductible <input type="checkbox"/> Retention				Each Occurrence	
						Aggregate	
A		<b>Workers Compensation and Employers' Liability</b> Any proprietor/partner/executive officer/member excluded? If Yes, describe under special provisions below.	WC 71949	01/01/2005	01/01/2006	<input checked="" type="checkbox"/> WC Statutory Limits <input type="checkbox"/> OTH-ER	
		Other 3465485 Stuart Fence Company				E.L. Each Accident	\$1000000
						E.L. Disease - Ea Employee	\$1000000
						E.L. Disease - Policy Limits	\$1000000
			<b>COVERAGE APPLIES ONLY TO THOSE EMPLOYEES LEASED, NOT TO SUBCONTRACTORS.</b>				

**Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions:** ADD ON DATE: 5/10/2004  
 COVERAGE APPLIES ONLY IN THE STATE OF FLORIDA TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF Stuart Fence Company \* FAX: 772-288-3035 & 772-220-4765 / ISSUE: 10-21-04 (PDC)

**CERTIFICATE HOLDER**

**CANCELLATION**

TOWN OF SEWALLS POINT  
ATTN: LAURA  
1 S. SEWALLS POINT RD.  
SEWALLS POINT

FL 34996

Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.

*John L. Powers*

**2004-2005 MARTIN COUNTY ORIGINAL  
COUNTY OCCUPATIONAL LICENSE**

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995  
(772) 288-5604

LICENSE 2004-518-003 CERT. CFE3584  
PHONE (772) 519-6263 SIC NO 235990

LOCATION:  
**2832 SE IRIS ST MAR**

**CHARACTER COUNTS IN MARTIN COUNTY**

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

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

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

21 DAY OF SEPTEMBER 20 04  
AND ENDING SEPTEMBER 30 2005

**RICHMOND, CHESTER - QUALIFIER  
STUART FENCE COMPANY INC  
2832 SE IRIS STREET  
STUART FL 34997**

12 04091402 002561 PAID

This Certificate is subject to St. Lucie County revocation  
and suspension by Contractor Certification St. Lucie County  
Examining Board.

Chap. 20978

STATUS: ACTV

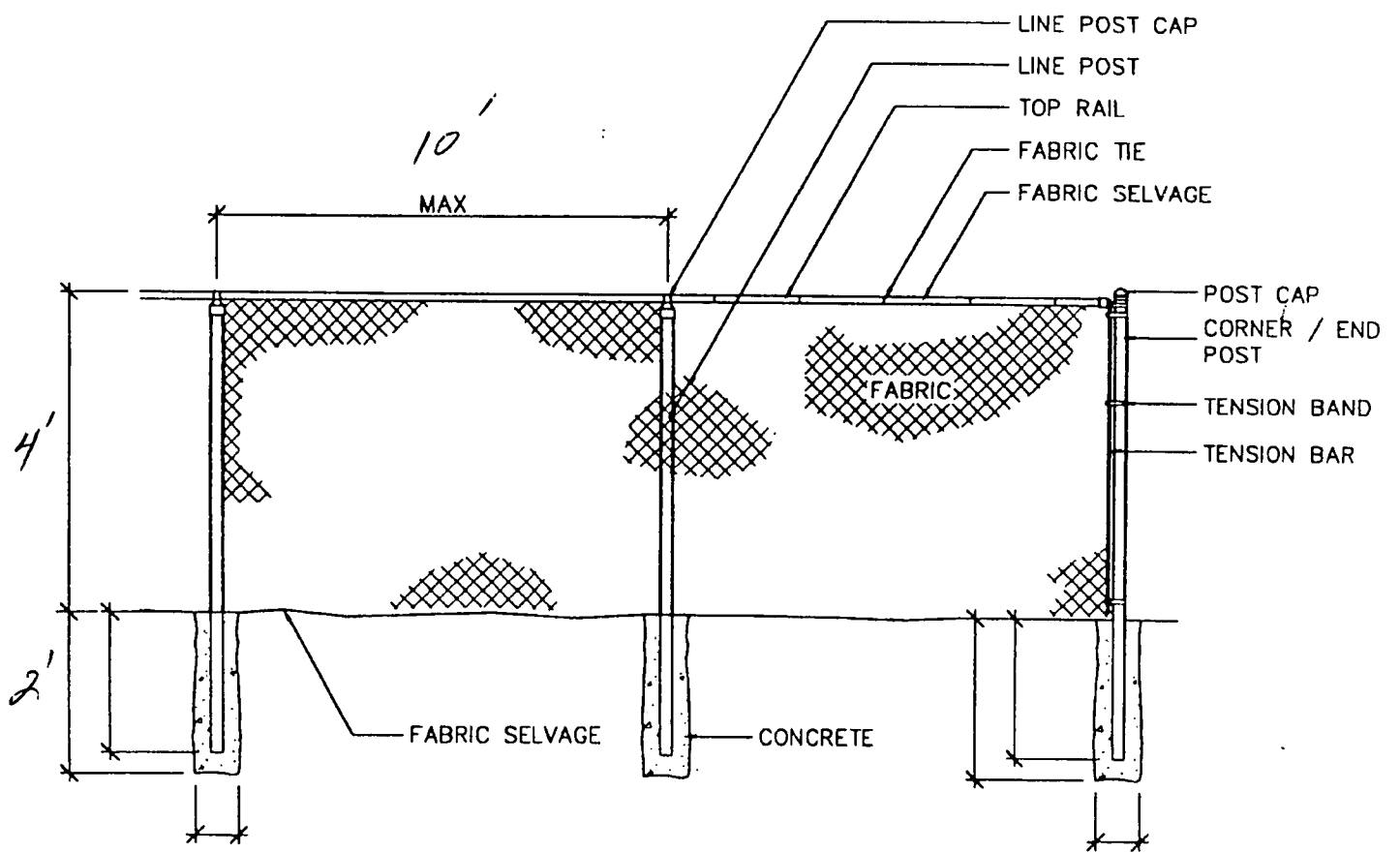
DBA: STUART FENCE CO. INC

THIS IS TO CERTIFY THAT CHESTER J. III RICHMOND has qualified  
as a certified FENCE contractor  
for period from 10/1/2004 to 9/30/2005 subject to St. Lucie  
County Code of Ordinances and Compiled Laws.

DATE: 08/30/04

*Charles Wenzel*

Contractor Licensing official



**CHAIN LINK FENCING DETAIL**

# EASEMENT AGREEMENT

Date: March 28, 2005

Gentlemen:

I propose to apply for a Martin County permit to erect a FENCE

in the (utility/drainage) easement on my property at \_\_\_\_\_

48 Bio Vista

LEGAL DESCRIPTION:

LOT 92, BLOCK \_\_\_\_\_, SUBDIVISION BIO VISTA

(Brief description of dimensions and location from property lines)

In the event you have no objection to this project, please complete this form and return to me at \_\_\_\_\_

I understand your company will not be responsible in any way for repair or replacement of any portion of this FENCE and that any removal or replacement of such, necessary for your use of this easement will be done at my expense.

I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure.

X Signed: Elizabeth S. Dunn Phone: 223-6272

\*\*\*\*\*  
FOLLOWING TO BE COMPLETED BY UTILITY COMPANY

We agree to the proposed construction under the circumstances described above.

Company: Martin County Utilities

By: Riley M. Beatalay

Title: Environmental Engineer II

Company records indicate that a potential conflict (DOES) (DOES) exist. The conflict consists of \_\_\_\_\_

# EASEMENT AGREEMENT

Date: March 28, 2005

Gentlemen:

I propose to apply for a Martin County permit to erect a FENCE in the (utility/drainage) easement on my property at \_\_\_\_\_

48 Rio Vista Dr LEGAL DESCRIPTION:  
LOT 92 BLOCK \_\_\_\_\_ SUBDIVISION RIO VISTA

(Brief description of dimensions and location from property lines)

In the event you have no objection to this project, please complete this form and return to me at \_\_\_\_\_

I understand your company will not be responsible in any way for repair or replacement of any portion of this FENCE and that any removal or replacement of such, necessary for your use of this easement will be done at my expense.

I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure.

X Signed: Elizabeth S. Dunn Phone: 223-6272

\*\*\*\*\*  
FOLLOWING TO BE COMPLETED BY UTILITY COMPANY

We agree to the proposed construction under the circumstances described above.

Company: BellSouth  
By: Susan Morse  
Title: Engineering Specialist

Company records indicate that a potential conflict (DOES) (DOES NOT) exist. The conflict consists of \_\_\_\_\_

BellSouth has buried facilities in this easement. These facilities must be located prior to digging by calling 1-800-432-4770. Hand digging must be done within 2 feet of facilities. Should we need access to our facilities in the future, it will be at customer expense.



# EASEMENT AGREEMENT

Date: March 28, 2005

Gentlemen:

I propose to apply for a Martin County permit to erect a FENCE in the (utility/drainage) easement on my property at \_\_\_\_\_

42 Rio Vista LEGAL DESCRIPTION:

LOT 92 BLOCK \_\_\_\_\_ SUBDIVISION RIO VISTA

(Brief description of dimensions and location from property lines)

In the event you have no objection to this project, please complete this form and return to me at \_\_\_\_\_

I understand your company will not be responsible in any way for repair or replacement of any portion of this FENCE and that any removal or replacement of such, necessary for your use of this easement will be done at my expense.

I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure.

X Signed: Elizabeth S. Dunn Phone: 223-6272

\*\*\*\*\*  
FOLLOWING TO BE COMPLETED BY UTILITY COMPANY

We agree to the proposed construction under the circumstances described above.

Company: Adelphia Cable

By: Bob Grant

Title: Construction Supervisor

Company records indicate that a potential conflict (DOES) DOES ~~NOT~~ exist. The conflict consists of \_\_\_\_\_

PLEASE CALL FOR UNDERGROUND LOCATES PRIOR TO STARTING WORK @

1-800-432-4770

Mar-29-05 08:25am From:RNO/SVC/CTR

+1-561-337-7098

T-134 P.002/003 F-258

# EASEMENT AGREEMENT

Date: March 28, 2005

Gentlemen:

I propose to apply for a Martin County permit to erect a FENCE in the (utility/drainage) easement on my property at \_\_\_\_\_

42 Rio Vista LEGAL DESCRIPTION:  
lot 92, block \_\_\_\_\_, SUBDIVISION RIO VISTA  
(brief description of dimensions and location from property lines)

If, in the event you have no objection to this project, please complete this form and return to me at \_\_\_\_\_

I understand your company will not be responsible in any way for repair or replacement of any portion of this FENCE and that any removal or replacement of such, necessary for your use of this easement will be done at my expense.

I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure.

X Signed: Elizabeth S. Dunn Phone: 223-6272

\*\*\*\*\*  
FOLLOWING TO BE COMPLETED BY UTILITY COMPANY

We agree to the proposed construction under the circumstances described above.

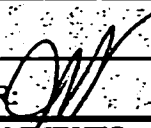

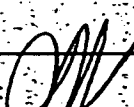



Company: FPL  
By: Bobby Pinson  
Title: Designer

Company records indicate that a potential conflict (DOES) (DOES NOT) exist. The conflict consists of \_\_\_\_\_

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 5/18, 20015 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7540	LIZANO	DRY-IN	PASS	
3	16 CRANE'S NEST A+ BUILDERS+CONT.			INSPECTOR: 
<del>7489</del>	<del>HAREGAN</del>	<del>SCR. ENCL FINAL</del>		<del>CXL</del>
	2 PALMETTO DR ADAM PAZZAGUA			INSPECTOR:
7380	BONIFACE	SHOWER PAN	PASS	
4	63 S RIVER RD WILSON BUILDERS			INSPECTOR: 
7117	MCGRATH	WINDOW BOX	PASS	PARTIAL
2	123 S. SEWALL ST O/B	PARTIAL		INSPECTOR: 
7468	DUNN	FENCE FINAL	PASS	CLOSE
5	48 RIO VISTA STUART FENCE			INSPECTOR: 
7328	SCHMADEK	TIE BEAM	PASS	
1	102 HENRY SEWALL O/B			INSPECTOR: 
6753	MADER	LATH	FAIL	
6	5 HERITAGE WAY A+P CONSTR			INSPECTOR: 

OTHER:

**7639**

**FENCE**

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

### TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 7639

Date 6/23/05

Building to be erected for DUNN Type of Permit FENCES

Applied for by O/B (Contractor) Building Fee 30.00

Subdivision RIO VISTA Lot 92 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_

Address 48 RIO VISTA DR Impact Fee \_\_\_\_\_

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

Parcel Control Number: \_\_\_\_\_ Electrical Fee \_\_\_\_\_

123841002 0000092040000 Plumbing Fee \_\_\_\_\_

Amount Paid 30.00 Check # 1646 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 2100.00 TOTAL Fees 30.00

Signed Elizabeth S. Dunn  
Applicant

Signed Gene Simmons (RD)  
Town Building Official

## PERMIT

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

## INSPECTIONS

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

RECEIVED

Town of Sewall's Point BUILDING PERMIT APPLICATION

Date: \_\_\_\_\_ Perm number: \_\_\_\_\_
OWNER/TITLEHOLDER NAME ELIZABETH DUNN Phone (Day) 228-6272 (F
Job Site Address: 423 Rio Vista DR City: Sewall's Point State: FL Zip: 34996
Legal Desc. Property (Subd/Lot/Block) Rio Vista 3rd lot 92 Parcel Number: 138 41 0
Owner Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Description of Work To Be Done: INSTALL 15' OF VERTICAL SHUTTER BOX

WILL OWNER BE THE CONTRACTOR?:

YES (circled) NO (crossed out)

COST AND VALUES:

Estimated Cost of Construction (Notice of Commencement) or Improvement over \$2500
Estimated Fair Market Value or to improve
Is Improvement cost 50% or more of Fair Market Value?
Method of Determining Fair Market Value:

2100.00

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

CONTRACTOR/Company: STUART FENCE CO Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
Street: 2832 SE IRIS ST. City: Stuart State: FL Zip: 34997
State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_
Florida County License Number: CFE 3584

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_
Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_
Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_
Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

ARCHITECT \_\_\_\_\_ Lic.#: \_\_\_\_\_
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

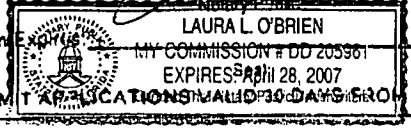
ENGINEER \_\_\_\_\_ Lic.#: \_\_\_\_\_
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Cov
Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_
Patios: \_\_\_\_\_ Screened Porch: \_\_\_\_\_
Accessory Building: \_\_\_\_\_

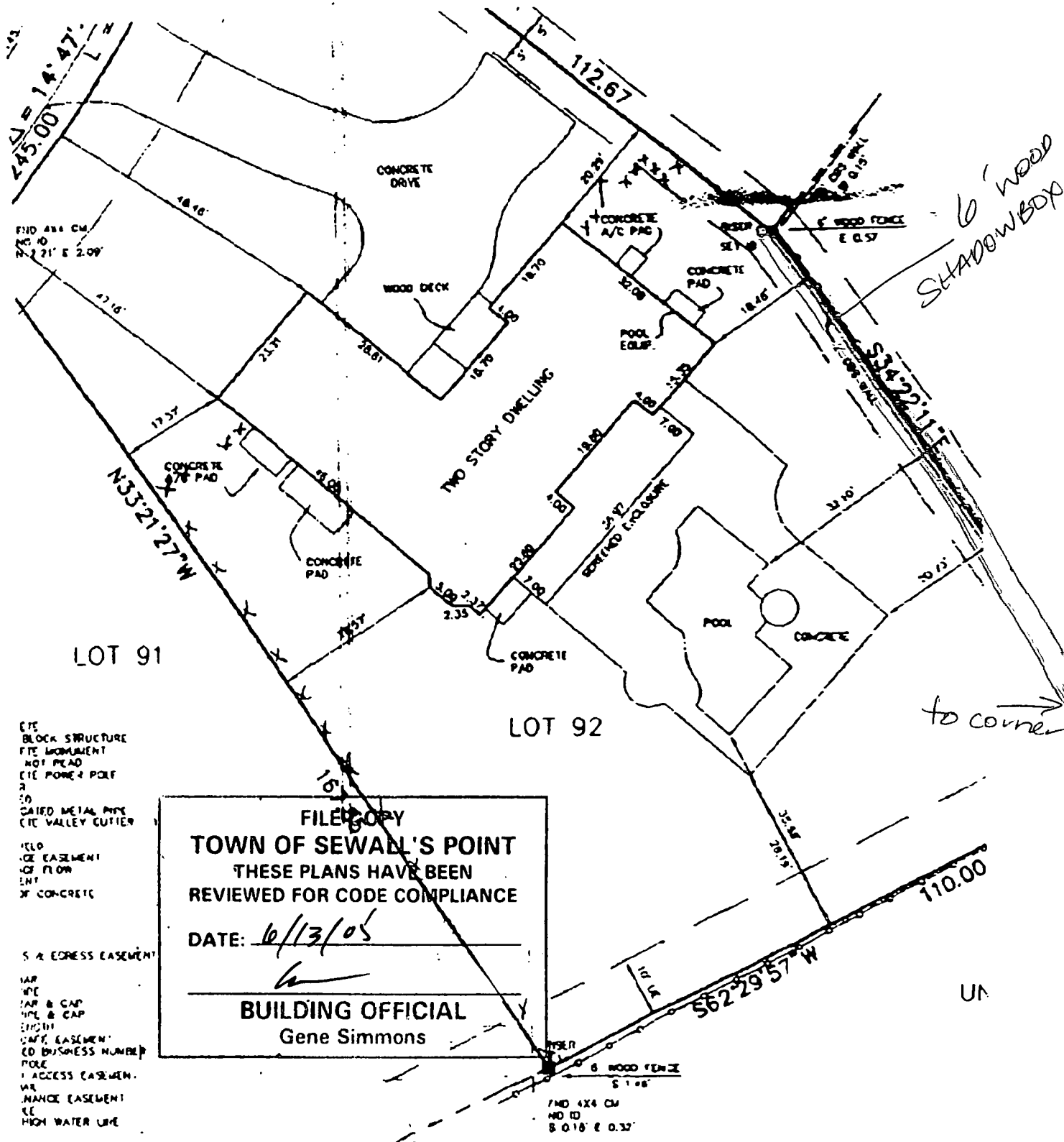
I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, MECHANICAL, SIGNS, BOILERS, HEATERS, TANKS DOCKS, SEA WALLS, ACCESSORY BUILDING, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL.
CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (S) Florida A
National Electrical Code: 2002 Florida Energy Code: 2001
PLUMBING, GAS: 2001
DISABILITY 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) ELIZABETH S. DUNN CONTRACTOR SIGNATURE (required)
State of Florida, County of: MARTIN On State of Florida, County of: \_\_\_\_\_
This the 9th day of JUNE 2005 This the \_\_\_\_\_ day of \_\_\_\_\_ 2005
by ELIZABETH DUNN who is personally known to me or produced by \_\_\_\_\_ known to me or produced by \_\_\_\_\_
As identification: \_\_\_\_\_ As identification: \_\_\_\_\_



PERMIT APPLICATIONS VALID FOR 30 DAYS FROM DATE OF ISSUANCE APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROMPTLY!



6' WOOD SHADOWBOX

to corner

LOT 91

LOT 92

- ETC
- BLOCK STRUCTURE
- ETC MONUMENT
- NOI PLACD
- ETC POWER POLE
- R
- ETC
- ETC VALLEY CUTTER

- FIELD
- ETC EASEMENT
- ETC FLOOR
- ENT
- W CONCRETE

- S & ADDRESS EASEMENT
- WAP
- WPE
- WPE & CAP
- WPE & CAP
- ETC
- WAP EASEMENT
- ED BUSINESS NUMBER
- POLE
- W ACCESS EASEMENT
- WAP
- FINANCE EASEMENT
- ETC
- HIGH WATER USE

FILE COPY  
**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE: 10/13/05  
 \_\_\_\_\_  
**BUILDING OFFICIAL**  
 Gene Simmons

8 RIO VISTA WAY

KELLY LYNN BOOYSEN

NOT VALID WITHOUT THE SIGNATURE ORIGINAL RAISED SEAL OF A FLORIDA SURVEYOR AND MAPPER

**FRANCIS PIZZERI**

---

Certified General Contractor  
CGC 057775  
Stuart, FL  
Phone (772) 220-9124

**June 8, 2005**


**Mr. Gene Simmons  
One South Sewall's Point Road  
Town Hall  
Sewall's Point, FL 34996**

**Re. Building Permit No. 6500**

**Dear Mr. Simmons:**

**I have contacted the Cobiellas and am acting according to their instructions. To wit: Please remove me from the contractor on above building permit number as they plan to engage another contractor.**

**Regards,**

  
**Francis Pizzeri  
General Contractor**



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

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

**DISCLOSURE STATEMENT**

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

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

Name: Elizabeth S. Dunn Date: 6/9/05

Signature: Elizabeth S. Dunn

Address: 48 Rio Vista Dr

City & State: Stuart, Fl. 34996

Permit No. \_\_\_\_\_

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 8/31, 2005

Page 2 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7511	Hart	Final	FAIL	
10A	113 N Sewall's Pt Rd Black Diamond			INSPECTOR: <i>OM</i>
<del>TREE</del>	TROOATO	TREE	PASS	
5	99 S Sewall's Pt			INSPECTOR: <i>OM</i>
<del>TREE</del>	DAYTON	TREE	PASS	
<del>11A</del>	14 Palm Court			INSPECTOR: <i>OM</i>
<del>7639</del>	DUNN	FENCE FINAL	PASS	CLOSE!
6	48 Rio Vista O/B			INSPECTOR: <i>OM</i>
6719	DONAHE	FINAL SFR	—	SCHEDULE FOR FRIDAY 9/2
2	163 S. Sewall's Pt HALL-SAMMONS			INSPECTOR:
7412	DONAHE	FINAL GAS	—	SCHEDULE FOR FRIDAY 9/2
2	163 S. Sewall's Pt PROPANE DISCOUNTERS			INSPECTOR:
7122	DONAHE	FINAL REMAINING WALL	—	↓
2	163 S. Sewall's Pt O/B			INSPECTOR:

OTHER: \_\_\_\_\_

**8638**

**IMPACT WINDOWS**



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:	8638	DATE ISSUED:	06/22/2007
SCOPE OF WORK:	REPLACE WINDOWS AND DOORS		
CONTRACTOR:	MONTEREY GLASS		
PARCEL CONTROL NUMBER:	123841002000009204	SUBDIVISION	RIO VISTA
CONSTRUCTION ADDRESS:	48 RIO VISTA DR		
OWNER NAME:	MCKINLEY		
QUALIFIER:	R. STIEGERWALT	CONTACT PHONE NUMBER:	772-341-0103

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

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

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

### INSPECTIONS

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

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

RECEIVED

Town of Sewall's Point

Date: 5/21/07 BUILDING PERMIT APPLICATION Permit Number: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: McKinley Joseph + Elizabeth Phone (Day) 403-7710 (Fax) \_\_\_\_\_

Job Site Address: 48 Rio Vista Dr City: STUART State: FLA Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Rio Vista S/D Lot 92 Parcel Number: \_\_\_\_\_

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

Scope of work: REPLACE Windows with New Impact Units

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

COST AND VALUES: Estimated Value of Construction or Improvements: \$113,000.00 (Notice of Commencement required over \$2500) Estimated Fair Market Value prior to improvement: \$ Method of Determining Fair Market Value: \_\_\_\_\_

CONTRACTOR/Company Monterey Glass Spec. Phone: 772-283-1999 Fax: 772-283-1999

Street: 851 SE Monterey Road City: STUART State: FLA Zip: 34994

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Municipality License Number: SP0-2965

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_ Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_ Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_ Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

ARCHITECT \_\_\_\_\_ Lic.#: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER \_\_\_\_\_ Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_ Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ Screened Porch: \_\_\_\_\_ Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

NOTICE: In addition to the requirements of this permit, there may be other 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 (W/2006 Rev.) National Electrical Code: 2005 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 AUTHORIZED AGENT SIGNATURE (required) Elizabeth McKinley State of Florida, County of: Martin This the 15th day of May, 2007 by Elizabeth McKinley who is personally known to me or produced PD# M54-221-62-762-0 as identification. Valerie Meyer Notary Public My Commission Expires: \_\_\_\_\_

CONTRACTOR SIGNATURE (required) Robert Steigerwalt On State of Florida, County of: Martin This the 18 day of May, 2007 by Robert A Steigerwalt who is personally known to me or produced PD# S326-761-41-350-0 as identification. Valerie Meyer Notary Public My Commission Expires: \_\_\_\_\_

Valerie Meyer Notary Public (407) 398-0153 Florida Notary Service.com

Valerie Meyer Notary Public (407) 398-0153 Florida Notary Service.com

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

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

**TOWN OF SEWALL'S POINT**

Date 6-22-07

BUILDING PERMIT NO. 8638

Building to be erected for MCKINLEY

Type of Permit WINDOWS

Applied for by MONTELEONE GLASS

(Contractor)

Building Fee ~~20.00~~ 125.00

Subdivision RIO VISTA Lot \_\_\_\_\_ Block \_\_\_\_\_

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

Address \_\_\_\_\_

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

Type of structure WINDOW REPLACEMENT

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

Parcel Control Number:

12-38-41-002-000-00920-4

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

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

Amount Paid \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 13,000

TOTAL Fees ~~20.00~~ 125.00

Signed [Signature]

Applicant

Signed [Signature]

Town Building Official

125.00  
✓ #5761

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # \_\_\_\_\_ TAX FOLIO # \_\_\_\_\_

**NOTICE OF COMMENCEMENT**

STATE OF Florida COUNTY OF Martin

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

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

48 Rio Vista Dr Rio Vista S/D Lot 92

GENERAL DESCRIPTION OF IMPROVEMENT: REPLACE WINDOWS WITH IMPACT WINDOWS

OWNER: McKinley Joseph W. Jr. & Elizabeth

ADDRESS: 48 Rio Vista Dr.

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

CONTRACTOR: Monterey Glass Specialist

ADDRESS: 851 SE Monterey Road Stuart, FLA. 34994

PHONE #: 772-283-1999 FAX #: 772-283-1999

SURETY COMPANY (IF ANY) \_\_\_\_\_

ADDRESS: STATE OF FLORIDA MARTIN COUNTY

PHONE # \_\_\_\_\_

BOND AMOUNT: \_\_\_\_\_

LENDER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

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

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

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

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

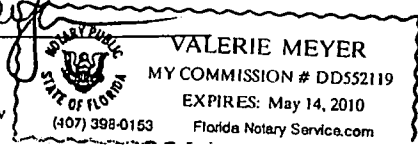
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_ THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

Elizabeth McKinley  
SIGNATURE OF OWNER

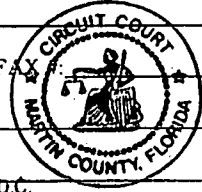
SWORN TO AND SUBSCRIBED BEFORE ME THIS 15th DAY OF May, 2007  
BY Elizabeth McKinley

OR  
Valerie Meyer  
NOTARY SIGNATURE

PERSONALLY KNOWN  
PRODUCED ID  
TYPE OF ID FLDL # m254-221-62-762-0



INSTR # 2014938 DR BK 02250 PG 0520 RECD 05/22/2007 12:32:08 PM  
Pg 05201 (1pg)  
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S Phoenix



**EXTERIOR DOORS (INCLUDING GARAGE) AND OR WINDOWS  
(Revised 12/28/05)**

**PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS  
FOR EXTERIOR DOORS (INCLUDING GARAGE) AND OR WINDOWS**

**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)**

- FLORIDA - 2006*
1. ~~Product approvals from Miami/Dade~~ for the following items:
    - a. ~~Windows~~
    - b. ~~Exterior doors~~
    - c. Garage door
    - d. Hurricane shutters (if doors or windows are not impact resistant)
  2. Statement of fact (owner/builder affidavit)
  3. Proof of ownership (deed or tax recpt.)
  4. A certified copy of the ~~Notice of Commencement~~ for any work over \$2500.00
  5. ~~Copy of license (either Martin County Certificate of Competency or state certified or registered contractor license)~~ *Martin Cty Occupational*
  6. ~~Copy of certificate of workmen's compensation insurance or exemption~~
  7. ~~Copy of liability insurance~~ *Waming Town of Sewalls Pt as Certificate Holder*

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

\_\_\_\_\_  
(SIGNATURE OF APPLICANT)

DATE SUBMITTED: \_\_\_\_\_





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

Site Provided by...  
 governmax.com T1.14

**Summary**

print [navigation icons] Owner 3 of 7

**Parcel Info**

**Summary**

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

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
12-38-41-002-000-00920-4	48 RIO VISTA DR	27603	Owner	0	1

**Summary**

**Property Location** 48 RIO VISTA DR  
**Tax District** 2200 Sewall's Point  
**Account #** 27603  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120250  
**Acres** 0.444

**Legal Description**  
**Property Information**  
 RIO VISTA S/D LOT 92

**Search By**

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

**Owner Information**

**Owner Information**  
 MCKINLEY, JOSEPH W JR & ELIZABETH  
 A

**Mail Information**

48 RIO VISTA DR  
 STUART FL 34996

**Assessment Info**

**Front Ft.** 0.00

**Market Land Value** \$290,000  
**Market Impr Value** \$271,650  
**Market Total Value** \$561,650

**Site Functions**

**Property Search**

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

**Recent Sale**  
**Sale Amount** \$730,000

**Sale Date** 5/22/2006  
**Book/Page** 2145 2181

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

Legal disclaimer / Privacy Statement

Data updated on 05/14/2007



**PROPOSAL**

Monterey Glass Specialists  
 851 SE MONTEREY RD.  
 STUART, FLA. 34994 772-283-1999

PROPOSAL NO. *Revised*  
 SHEET NO.  
 DATE *5/14/07*

PROPOSAL SUBMITTED TO:

NAME *Mc Kinley*  
 ADDRESS *48 Rio Vista*  
*Swells Point*  
 PHONE NO. *463-7710*

WORK TO BE PERFORMED AT:

ADDRESS  
 DATE OF PLANS  
 ARCHITECT  
*cell 954-661-1000*

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

*P. St. White frame Louvered Aluminum Impact Window  
 1/2 galange french screens*

<i>3</i>	<i>6040 Gray Roller</i>	<i>626.50</i>	<i>1879.50</i>
<i>2</i>	<i>4040 Gray Roller</i>	<i>442.00</i>	<i>884.00</i>
<i>2</i>	<i>6050 Gray Roller</i>	<i>763.50</i>	<i>1527.00</i>
<i>2</i>	<i>2040 Casements L.H. - R.H.</i>	<i>441.50</i>	<i>883.00</i>
<i>1</i>	<i>47 3/4 x 48 Picture Window 1 lite</i>	<i>513.00</i>	<i>513.00</i>
<i>2</i>	<i>415 Casements L.H. - R.H.</i>	<i>463.75</i>	<i>927.50</i>
<i>1</i>	<i>50" x 63" Picture Window 1 lite</i>	<i>709.00</i>	<i>709.00</i>
<i>2</i>	<i>4050 Gray Roller</i>	<i>535.50</i>	<i>1071.00</i>
<i>2</i>	<i>12 5/8 Casements L.H. - R.H.</i>	<i>482.75</i>	<i>965.50</i>
<i>2</i>	<i>60 x 61B 1 lite french doors L.H.O.S</i>	<i>1795.00</i>	<i>3590.00</i>
<i>2</i>	<i>1 x 2 3/4 Mull Bars 47" w/clips</i>	<i>45.00</i>	<i>90.00</i>
			<i>13039.00</i>

All material is guaranteed to be as specified, and the above work to be performed in accordance with the drawings and specifications submitted for above work, and completed in a substantial workmanlike manner for the sum of *6226.54* Dollars (\$ *13,886.54*)

with payments to be made as follows:  
*Deposit 4000.00*  
*Balance on Delivery*

Respectfully submitted:  
*Bob Steigerwalt*  
 cell 772 341-0103

any alteration or deviation from above specifications involving extra work will be executed only upon written order, and will become an extra charge over and above the estimate. All agreements are subject to our standard terms and conditions of sale, which are available upon request.

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. Payments will be made as outlined above.

Signature \_\_\_\_\_  
 Date \_\_\_\_\_  
 Signature \_\_\_\_\_

### CERTIFICATE OF INSURANCE

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 LISTED BELOW.

<b>FLORIDA FARM BUREAU INSURANCE COMPANIES</b> <b>P.O. BOX 147030</b> <b>GAINESVILLE, FLORIDA 32614-7030</b>	<b>COMPANIES AFFORDING COVERAGES:</b>  Company Letter A:  <b>Florida Farm Bureau General Ins. Co.</b>  Company Letter B:  <b>Florida Farm Bureau Casualty Ins. Co.</b>
<b>NAME AND ADDRESS OF INSURED:</b> MONTEREY GLASS SPECIALIST INC 851 SE MONTEREY RD STUART, FL 34994-4506	

The policies of insurance listed below have been issued to the insured named above and are in force at this time. 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.

CO. LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS		
A	<b>General Liability:</b> <input checked="" type="checkbox"/> Commercial General Liability (Occurrence Form) <input type="checkbox"/> Owner's & Contractor's Protective <input type="checkbox"/> Farmer's Personal Liability	SGL 9511816	09/18/2006	09/18/2007	General Aggregate		\$ 2,000
					Products-completed operations aggregate		\$ 2,000
					Personal & Advertising Injury		\$ 1,000
					Each Occurrence		\$ 1,000
					Fire Damage (Any one fire)		\$ 50
					Medical Expense (Any one person)		\$ 5
	<b>Automobile Liability:</b> <input type="checkbox"/> Any auto <input type="checkbox"/> All owned autos <input type="checkbox"/> Scheduled autos <input type="checkbox"/> Hired autos <input type="checkbox"/> Non-owned autos				Combined Single Unit Bodily Injury (Per Person) Bodily Injury (Per Accident) Property Damage	\$	
	<b>Excess Liability:</b> <input type="checkbox"/> Umbrella Form <input type="checkbox"/> Other than Umbrella form				Each Occurrence	Aggregate	
	<b>Employers Liability:</b> <input type="checkbox"/> Farm Employer's Liability <input type="checkbox"/> Farm Employee's Medical				\$	\$	
	Other:				\$	\$	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES:

CANCELLATION: Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 10 days written notice to the below named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company.

**NAME AND ADDRESS OF CERTIFICATE HOLDER:**  
 TOWN OF SEWALLS POINT  
 1 SEWALLS POINT ROAD  
 SEWALLS POINT, FL 34996

COUNTY CODE 43 DATE ISSUED 05/18/07  
 Served by MARTIN County Farm Bureau  
**WANDA C GREGORY LUTCF, CLU, ChPC, RHU**  
 AUTHORIZED REPRESENTATIVE

# ACORD. CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

05/18/2007

**PRODUCER**

WANDA C GREGORY  
 FARM BUREAU INSURANCE  
 2227 S KANNER HIGHWAY  
 STUART, FL 34994

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

**COMPANIES AFFORDING COVERAGE**

COMPANY LETTER **A** FFVA MUTUAL INSURANCE  
 COMPANY LETTER **B**  
 COMPANY LETTER **C**  
 COMPANY LETTER **D**  
 COMPANY LETTER **E**

**INSURED**

MONTEREY GLASS SPECIALIST INC  
 851 SE MONTEREY RD  
 STUART, FL 34994

**COVERAGES**

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	<b>GENERAL LIABILITY</b>				GENERAL AGGREGATE \$ PRODUCTS-COMP/OP AGG. \$ PERSONAL & ADV. INJURY \$ EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED. EXPENSE (Any one person) \$
	<b>AUTOMOBILE LIABILITY</b>				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	<b>EXCESS LIABILITY</b>				EACH OCCURRENCE \$ AGGREGATE \$
<b>A</b>	<b>WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY</b>	WC840-0014608-2997A	01-02-2007	01-02-2008	STATUTORY LIMITS EACH ACCIDENT \$ 100,000 DISEASE-POLICY LIMIT \$ 500,000 DISEASE-EACH EMPLOYEE \$ 100,000
	<b>OTHER</b>				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

**CERTIFICATE HOLDER**

TOWN OF SEWALLS POINT  
 1 SEWALLS POINT ROAD  
 SEWALLS POINT, FL 34996

**CANCELLATION**

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

AUTHORIZED REPRESENTATIVE

*Wanda C Gregory*

ACORD CORPORATION 1000



## Martin County Building Department

2401 SE Monterey Road

Stuart, FL 34996

(772) 288-5482

Fax (772) 288-5911

DELVECCHIO, JOSEPH M  
MONTEREY GLASS SPECIALISTS INC  
851 SE MONTEREY RD  
STUART, FL 34994

### 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 F Advertising contracting work in any advertisement to the public in a news paper 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 Construction Industry Licensing Division of the Martin County Building Department.



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

#### **GLASS & GLAZING**

License Number SP02965 Expires: 30-SEP-07

DELVECCHIO, JOSEPH M  
MONTEREY GLASS SPECIALISTS INC  
851 SE MONTEREY RD  
STUART, FL 34994

**CITY OF STUART  
OCCUPATIONAL LICENSE  
2006-2007**

LICENSE NO.	ACCOUNT NO.	CATEGORY NO.
1346	14906	170950

TAX YEAR BEGINS OCTOBER 1 AND ENDS SEPTEMBER 30.  
PAYMENT AFTER OCTOBER 1 CONSTITUTES VIOLATION  
OF CITY CODE OF ORDINANCES

This occupational license does not permit the holder to operate in violation of any City law, ordinance, or regulation. Any changes in location or ownership must be approved by the City License Section, subject to zoning restrictions. This License does not constitute an endorsement, approval, or disapproval of the holder's skill or competence or of the compliance or non-compliance of the holder with other laws, regulations, or standards.

Occupational Licensing 772-288-5319

BUSINESS TYPE	CONTRACTOR - GLASS
OWNER AND LOCATION	JOSEPH M DELVECCHIO 851 MONTEREY RD
ST/CTY LICENSE	
DESCRIPTION	SAMPLES/GLASS

FEE	PENALTY	TRANSFER	MISCELLANEOUS	PAID
100.00	0.00	0.00	0.00	100.00

BUSINESS NAME AND MAILING ADDRESS	MONTEREY GLASS SPECIALISTS INC JOSEPH M DELVECCHIO 851 MONTEREY RD STUART FL 34994
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DATE
09/20/2006

CHERYL WHITE

CITY CLERK

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Lan

MARTIN COUNTY ORIGINAL  
OCCUPATIONAL LICENSE  
Tax Collector, P.O. Box 9013, Stuart, FL 34995  
(772) 288-5604

2003-650-0130  
(772) 283-1999  
LICENSING  
EDUCATION

851 SE MONTEREY RD STU

CHAI : COUNTS IN MARTIN COUNTY

RECEIPT of PAYMENT  
LARRY C. O'STEEN  
99 09/06/2006 NORMA  
20030006500013  
002 2005 0014195  
MONTEREY GLASS SPEC

00  
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00  
TOTAL 25.00

DELVECCHIO, JOSEPH M. (PRESIDENT)  
MONTEREY GLASS SPECIALIST, INC.  
851 SE MONTEREY RD  
STUART, FL 34994

08  
EPTMEER 06  
2007



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



**WINDOW/DOOR SCHEDULE**

cavity  
 3  
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 2

ID NO	APPOX OPENING SIZE (WxH)	DESIGNATION	* TYPE	IMPACT PROTECTION		REMARKS
				IMPACT GLASS	SHUTTER	
	37" X 63"	#5	SH		X	EXAMPLE
1	72x48	6040	H.R	X		
2	48x48	4040	H.R	X		
3	72x60	6050	H.R	X		
4	24x48	2040	CASE	X		
5	47 1/4 x 48	47 3/4 x 48	P.W	X		Picture Window
6	19 1/2 x 63	#15	CASE	X		Picture Window
7	50x63	50x63	P.W	X		
8	48x60	4050	H.R	X		
9	2 1/2 x 58 1/2	1234	CASE	X		
10	72x80	6068	DOOR	X		double French dr.
11						
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FILE COPY  
**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE 6-19-07  
  
**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)

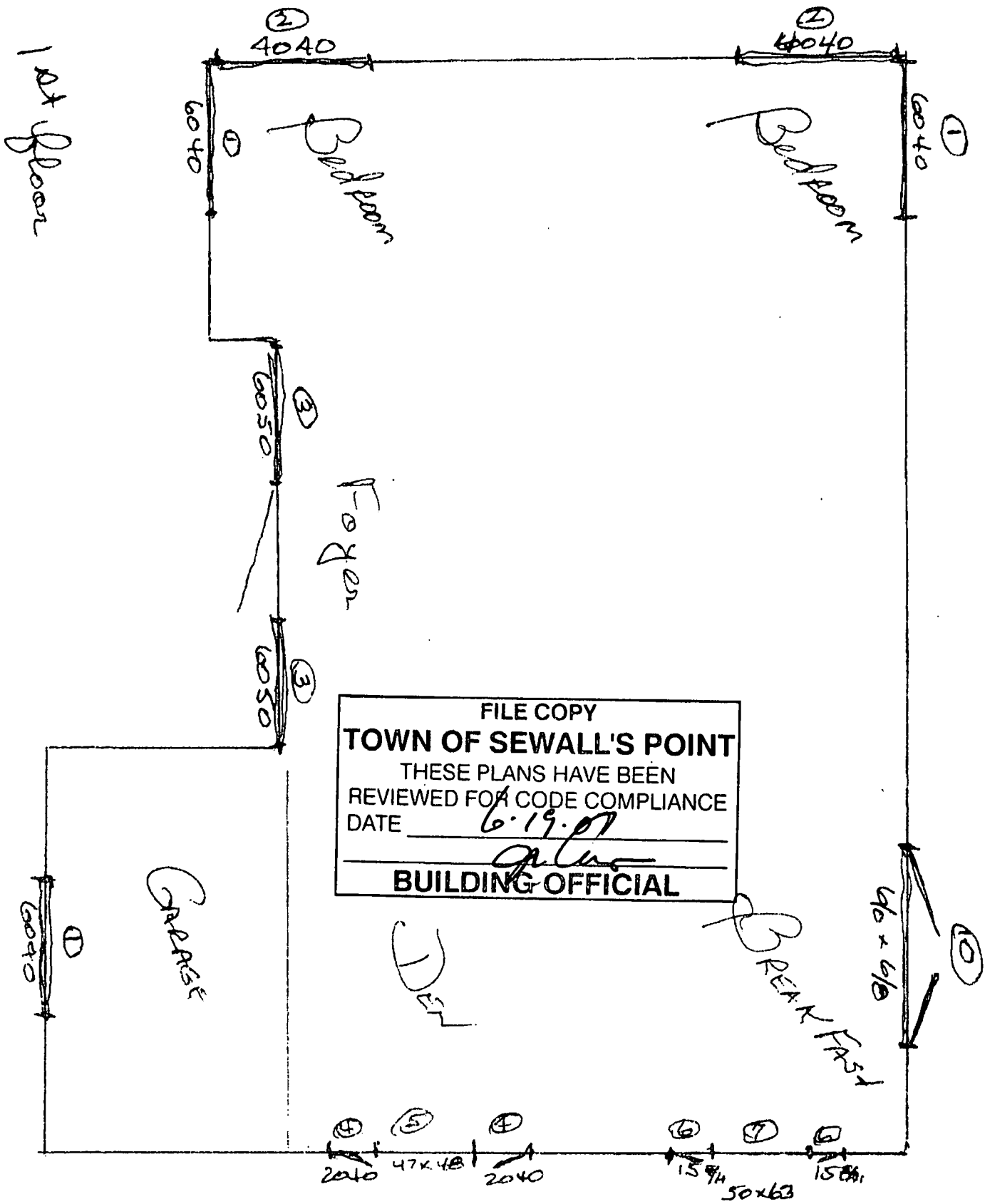
NOTE: The replacement of more than 25% of the aggregate area of exterior glazing (windows & doors) in one & two family dwelling; within a 12 month period will require impact protection on all proposed glazed opening replacement (approved shutters or impact resistant glazing) as per 2004 FBC EXISTING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

**\* TYPE WINDOWS**

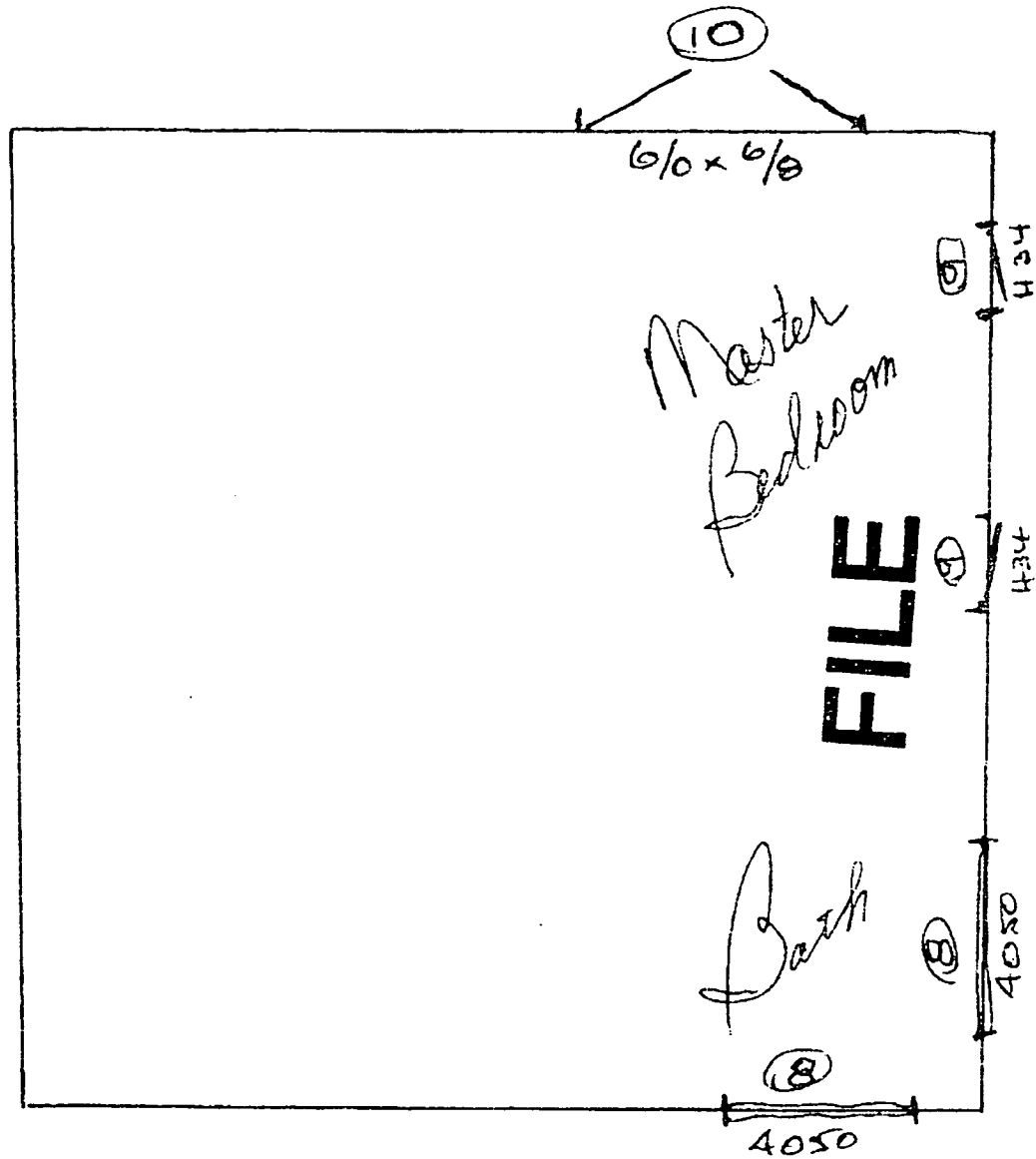
SH - SINGLE HUNG	AWN - AWNING	SL - SLIDING
DH - DOUBLE HUNG	CAS - CASEMENT	FIX - FIXED



Mr. Kimberly Ter.  
48 Rio Vista Dr  
STUART, FLA



McKinley Res  
48 Rio Vista Dr  
STUART, FLA



2<sup>ND</sup> FLOOR



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)**

[www.buildingcodeonline.com](http://www.buildingcodeonline.com)

**PGT Industries, Inc.**  
1070 Technology Drive  
Nokomis, FL 34275

**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 Florida Building Code, including the High Velocity Hurricane Zone.

**DESCRIPTION:** Series 22-710 Aluminum Horizontal Roller Window-LMI

**APPROVAL DOCUMENT:** Drawing No. 4127-16, titled "Alum. Horizontal Roller Window, Impact", sheets 1 through 11 of 11, dated 02/28/06, prepared by manufacturer, signed and sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

**MISSILE IMPACT RATING:** Large Missile Impact Resistant

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

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

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

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

**INSPECTION:** A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA consists of this page 1 and evidence page E-1, as well as approval document mentioned above. The submitted documentation was reviewed by Jaime D. Gascon, P.E.



*J. Gascon*  
*12/1/06*

NOA No 06-0405.06  
Expiration Date: November 21, 2011  
Approval Date: December 21, 2006

Page 1

**FILE**

**PGT Industries, Inc.****NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED****A. DRAWINGS**

1. Manufacturer's die drawings and sections.
2. Drawing No. **4127-10**, titled "Alum. Horizontal Roller Window, Impact", sheets 1 through 11 of 11, dated 02/28/06, prepared by manufacturer, signed and sealed by Robert L. Clark, P.E.

**B. TESTS**

1. Test reports on 1) Air Infiltration Test, per FBC, TAS 202-94  
2) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94  
3) Water Resistance Test, per FBC, TAS 202-94  
4) Small Missile Impact Test per FBC, TAS 201-94  
5) Cyclic Wind Pressure Loading per FBC, TAS 203-94  
6) Forced Entry Test, per FBC 2411 3.2.1, TAS 202-94  
along with marked-up drawings and installation diagram of XOX aluminum horizontal sliding window, prepared by Fenestration Testing Laboratory, Inc., Test Report No. **FTL-4858** and **FTL-4859**, dated 03/08/06, signed and sealed by Edmundo Largaespada, P.E.

**C. CALCULATIONS**

1. Anchor Calculations and structural analysis, complying with FBC-2004, prepared by PGT Engineering, dated 10/26/06, signed and sealed by Robert L. Clark, P.E.  
**Complies with ASTM E1300-98 and 02**

**D. QUALITY ASSURANCE**

1. Miami Dade Building Code Compliance Office (BCCO).

**E. MATERIAL CERTIFICATIONS**

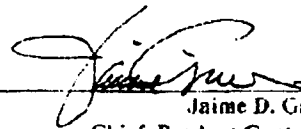
1. Notice of Acceptance No. **05-1208.02** issued to E.I. DuPont DeNemours for "Dupont Butacite PVB Interlayer" dated 01/05/06, expiring on 12/11/10.

**F. STATEMENTS**

1. Statement letter of compliance, and no financial interest, dated March 30, 2006, signed and sealed by Robert L. Clark, P.E.
2. Laboratory compliance letter for Test Report no. **FTL- 4770**, issued by Fenestration Testing Laboratory, Inc., dated March 09, 2006, signed and sealed by Edmundo Largaespada, P.E.

**G. OTHER**

1. Letter from the consultant stating that the product is in compliance with the Florida Building Code (FBC)

  
Jaime D. Gascon, P.E.  
Chief, Product Control Division  
NOA No 06-0405.06  
Expiration Date: December 21, 2011  
Approval Date: December 21, 2006





**(XOX 1/4, 1/2, 1/4) DESIGN PRESSURES** **TABLE 1.**

WINDOW WIDTH	GLASS TYPE	WINDOW HEIGHT																	
		28"	36"	38 3/8"	48"	50 5/8"	64"	60"	63"										
84"	A,B,G,H	+60.0	-60.0	-60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-30.0	+60.0	-30.0	+60.0	-60.0	+60.0	60.0		
96"	A,B,G,H	+60.0	-60.0	+60.0	-60.0	-60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+59.1	-59.1	+56.0	-59.0		
108 3/8"	A,B,G,H	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+55.5	-55.5	+52.1	-52.1		
108"	A,B,G,H	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+55.0	-55.0	+51.7	-51.7		
111"	A,B,G,H	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+60.0	-60.0	+54.0	-54.0	+50.9	-50.9		
UP TO 111"	C,I																+50.0	-60.0	
UP TO 111"	D,E,F,J,K,L																	+75.0	-75.0

**(XOX 1/3, 1/3, 1/3) DESIGN PRESSURES** **TABLE 2.**

WINDOW WIDTH	GLASS TYPE	WINDOW HEIGHT																	
		28"	36"	38 3/8"	48"	50 5/8"	64"	60"	63"										
TO 85 7/16"	A,B,C,G,H,I																	+60.0	-60.0
TO 85 7/16"	D,E,F,J,K,L																	+75.0	-75.0

**(OX AND XO) DESIGN PRESSURES** **TABLE 3.**

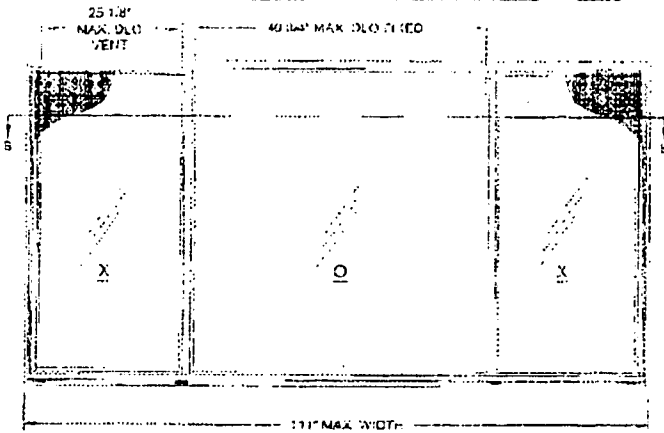
WINDOW WIDTH	GLASS TYPE	WINDOW HEIGHT																	
		28"	36"	38 3/8"	48"	50 5/8"	64"	60"	63"										
80"	A,B,G,H	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00
	C,I	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00
66"	A,B,G,H	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+74.7	-74.70	+70.0	-70.00	+75.0	-75.00
	C,I	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00
72"	A,B,G,H	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+70.1	-70.10	+65.0	-65.00	+75.0	-75.00
	C,I	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00
74"	A,B,G,H	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+68.6	-68.60	+63.5	-63.50	+70.0	-70.00
	C,I	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00	+75.0	-75.00
UP TO 74"	D,E,F,J,K,L													+74.7	-74.70	+70.0	-70.00	+75.0	-75.00

- GLASS TYPES: TEST REPORT FTL-4958 (XOX), FTL-4859 (OX & XO)**
- |   |   |
|---|---|
| A. 5/16" LAMI - (1/8" A, .090 1/8" A)     | G. 13/16" LAMI G-1/8" OR 3/16" A, 5/16" CR 3/8" AIR SPACE, 5/16" LAMI - (1/8" A, .090 1/8" A)   |
| B. 5/16" LAMI - (1/8" A, .090 1/8" HS)    | H. 13/16" LAMI G-1/8" OR 3/16" A, 5/16" CR 3/8" AIR SPACE, 5/16" LAMI - (1/8" A, .090 1/8" HS)  |
| C. 5/16" LAMI - (1/8" HS, .090 1/8" HS)   | I. 13/16" LAMI G-1/8" OR 3/16" A, 5/16" CR 3/8" AIR SPACE, 5/16" LAMI - (1/8" HS, .090 1/8" HS) |
| D. 7/16" LAMI - (3/16" A, .090 3/16" A)   | J. 13/16" LAMI G-1/8" OR 3/16" A, 3/16" CR 1/4" SPACE, 7/16" LAMI - (3/16" A, .090 3/16" A)     |
| E. 7/16" LAMI - (3/16" A, .090 3/16" HS)  | K. 13/16" LAMI G-1/8" OR 3/16" A, 3/16" CR 1/4" SPACE, 7/16" LAMI - (3/16" A, .090 3/16" HS)    |
| F. 7/16" LAMI - (3/16" HS, .090 3/16" HS) | L. 13/16" LAMI G-1/8" OR 3/16" A, 3/16" CR 1/4" SPACE 7/16" LAMI - (3/16" HS, .090 3/16" HS)    |

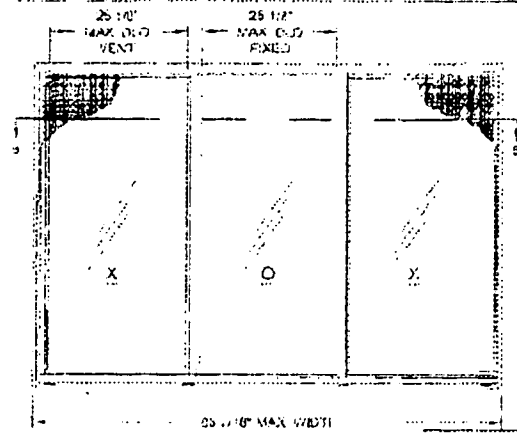
REVISIONS TO SPECIFICATIONS	DESIGN PRESSURES
ALUM HORIZONTAL ROLLER WINDOW, IMPACT	
NTS	4127-0

Agreed and stamped into the  
 Florida Building Code  
 Code Book, Part 1, 2001  
 with the Florida Building Code  
 Division 7  
*[Signature]*

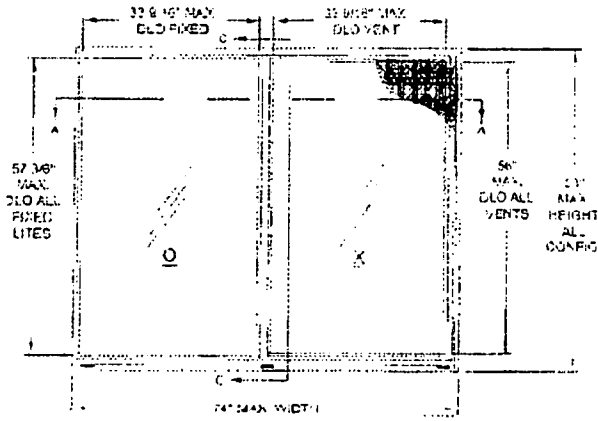
*[Signature]*  
 10/24/06  
 Date: 10/24/06  
 10/24/06



DETAIL B - XO (1/4-1/2-1/4)



DETAIL C - XO (1/3-1/3-1/3)



DETAIL A - OX OR XO

NOTES:  
1. SEE SHEETS FOR VERTICAL AND HORIZONTAL SECTION DETAILS.

Approved by: *[Signature]*  
 Project Manager  
 10/24/06

<table border="1"> <tr> <td>NO.</td> <td>DATE</td> <td>BY</td> <td>DESCRIPTION</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	NO.	DATE	BY	DESCRIPTION					<table border="1"> <tr> <td>NO.</td> <td>DATE</td> <td>BY</td> <td>DESCRIPTION</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	NO.	DATE	BY	DESCRIPTION					<table border="1"> <tr> <td>NO.</td> <td>DATE</td> <td>BY</td> <td>DESCRIPTION</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	NO.	DATE	BY	DESCRIPTION					<table border="1"> <tr> <td>NO.</td> <td>DATE</td> <td>BY</td> <td>DESCRIPTION</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	NO.	DATE	BY	DESCRIPTION					<table border="1"> <tr> <td>NO.</td> <td>DATE</td> <td>BY</td> <td>DESCRIPTION</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	NO.	DATE	BY	DESCRIPTION					<table border="1"> <tr> <td>NO.</td> <td>DATE</td> <td>BY</td> <td>DESCRIPTION</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	NO.	DATE	BY	DESCRIPTION				
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ELEVATIONS  
 ALUM. HORIZONTAL ROLLER WINDOW, IMPACT

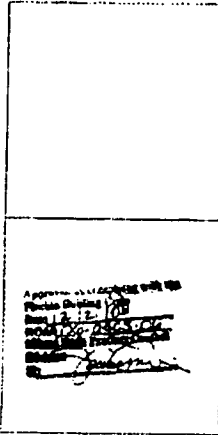
*[Signature]*  
 10/24/06  
 Project Manager





ITEM	DWG	REV	DESCRIPTION	MAT'L	PGI#
1	4002	A	FLANGE FRAME HEAD	6063-T5 AL	612537
2	4003		SASH STOP (SIDE) AND LEFT CLIP	6063-T5 AL	612538
3			22 X 24 PL. PAK HEAD		7833AA
4	4003		SASH STOP COVER (SASH STOP)	6063-T5 AL	
5	4136		FLANGE FRAME SILL	6062-T6 AL	64114
6	4137		SILL ADAPTOR	6062-T6 AL	64137
7	4137		ROLLER TRACK	6063-T5 AL	64111
8	71219		WEPP HOLE COVER	POLYPROP.	71263
9	1626		ADHESIVE OPEN CELL FOAM PAD		72AD125
10	4202	A	FLANGE FRAME JAMB	6063-T5 AL	612535
11	4134		GASKET FOR MAIN FRAME SILL JOINT		713197K
12	1157		24 X 100 QUAD PN. SMS		78110A
13	4136	C	SCREEN ADAPTOR	6063-T5 AL	64110C
14	4055	B	FINISH MEETING RAIL	6063-HD-16 AL	6464A
15	4056		WSTP. 137 X 230, FIN SEAL		64666C
16	4057		SASH TOP & BOTTOM RAIL	6063-T5 AL	612240
17	1631		WSTP. 250 X 270 BACK, FIN SEAL		61655C
18	2251		ROLLER HOUSING & GUIDE		2211001
19	176		BRASS ROLLER WHEELS	BRASS	70RWB12
20	4125		HORIZONTAL ROLLER SASH TOP GUIDE	POLYPROP.	41128N
21	4055	D	SASH MEETING RAIL	6063-HD-16 AL	64000
22	1231		WSTP. 130 X 270 BACK, FIN SEAL		675160
23	1096		SWEEP PLATE	DIE-CAST	71286
24	1016		24 X 60 PH. GL. SMS		7838
25	4126		SASH SHIELD RAIL	6063-T5 AL	64126
26	1683		WSTP. 250 X 270 BACK, FIN SEAL		51830C
27	7070		FOR B WEATHERSTRIP 183 X 172		64070K
28			LIFT RAIL COVER CAP		64070L OR R
29			GLAZING SILICONE, DOW 899, 995 OR HILTI VAL-DNY		
30	1224		VINYL GLAZING BEAD (BULB THIN)		51P247W, S
31	1225		VINYL GLAZING BEAD (BULB THIN)		51P248K
32	4019	B	GLAZING BEAD - 5/16"	6063-T5 AL	61039B
33	4044	B	GLAZING BEAD - 5/16" W/GRILL KIT	6063-T5 AL	64473C
34	4222	A	GLAZING BEAD - 7/16"	6063-T5 AL	64222
35	382	C	GLAZING BEAD - 7/16" W/GRILL KIT	6063-T5 AL	6485
36	4367		GLAZING BEAD - 1 1/16"	6063-T5 AL	64007
37			CLASS 5/16" LAMI (3/16" A, .090 PVB, 1/8" HS)		
38			5/16" LAMI (3/16" A, .090 PVB, 1/8" HS)		
39			5/16" LAMI (28" HS, .090 PVB, 1/8" HS)		
40			7/16" LAMI (3/16" A, .090 PVB, 3/16" HS)		
41			7/16" LAMI (3/16" A, .090 PVB, 3/16" HS)		
42			7/16" LAMI (3/16" HS, .090 PVB, 3/16" HS)		
43			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (3/16" A, .090 PVB, 1/8" HS)		
44			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		

ITEM	DWG	REV	DESCRIPTION	MAT'L	PGI#
45			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
46			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
47			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
48			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
49			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
50			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
51			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
52			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
53			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
54			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
55			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
56			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
57			13/16" LAMI (3/16" A, 3/8" AIR SPACE, 5/16" LAMI (1/8" A, .090 PVB, 1/8" HS)		
58	1614		SCREEN FRAME BUSH & WFL	3055AL AL	
59	1633		SCREEN CORNER KEY W/ RINGS	POLYPROP.	
60	1634		SCREEN CORNER KEY W/OUT RINGS	POLYPROP.	
61	1073		SCREEN SPRING	STAIN	
62	1634		SCREEN SPLINE - .135 DIA. FOAM	EM PVC	
63	1634		SCREEN SPLINE - .135 DIA. HARD	EM PVC	
64			SCREEN	GLASS	

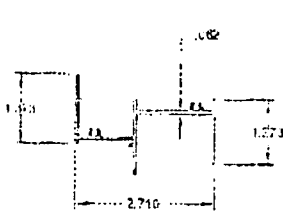


*[Handwritten signature]*  
 Date: 1/24/04  
 PGT Industries

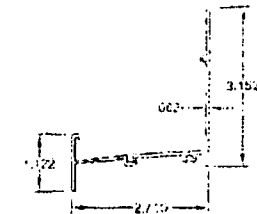
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0		ISSUED FOR PRODUCTION
1		ADD CHANGE SHEET FROM REV. OF PART 1
2		



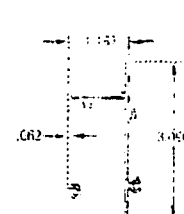
**PARTS LIST**  
 ALUM. HORIZONTAL ROLLER WINDOW, IMPACT  
 1/24/04



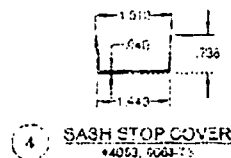
1 FLANGE FRAME HEAD  
#4122A, 6063-T5



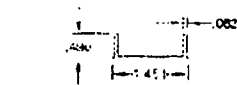
6 FLANGE FRAME SILL  
#4126, 6063-T5



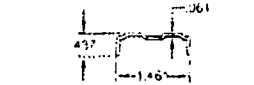
7 FRAME SILL ADAPTER  
#4137, 6063-T5



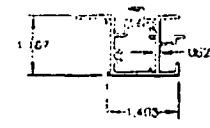
4 SASH STOP COVER  
#4053, 6063-T5



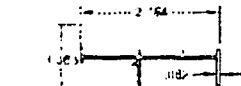
2 SASH STOP  
#4025, 6063-T5



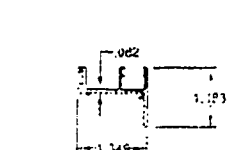
8 HORIZ. ROLLER TRACK  
#4131, 6063-T5



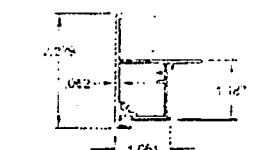
17 FIXED MEETING RAIL  
#4074B, 6063-T5



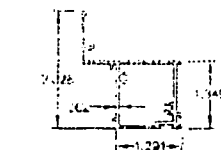
13 FLANGE FRAME JAMB  
#4072A, 6063-T5



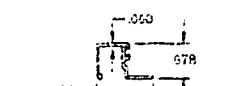
21 SASH TOP & BOTTOM RAIL  
#4133, 6063-T5



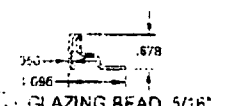
32 SASH MTG. RAIL  
#40340, 8061HS-T5



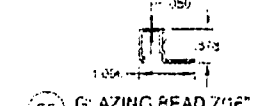
37 SASH SIDE RAIL  
#4129, 6063-T5



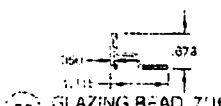
53 GLAZING BEAD, 5/16"  
#4035B, 6063-T5



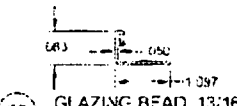
54 GLAZING BEAD, 5/16"  
#4041B, 6063-T5  
(USED W/ GRIL - KIT)



55 GLAZING BEAD, 7/16"  
#7222A, 6063-T5



56 GLAZING BEAD, 7/16"  
#9365, 6063-T5  
(USED W/ GRIL - KIT)



59 GLAZING BEAD, 13/16"  
#4067, 6063-T5

Approved for use with the  
Harris Energy Lab  
Date: 1/21/00  
By: [Signature]  
[Signature]

[Signature]  
1/21/00

REV	DATE	BY	DESCRIPTION	PGT	EXTRUSIONS
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ANCHOR QUANTITIES, XX (1/3-1/3) WINDOWS TABLE 5

CLASS TYPE ANCHOR TYPE & SUBSTRATE	4 P.G.C.					
	2. WOOD ZONE		2. CONC ZONE		2. CONC ZONE	
	HEAD & SILL	JAMBS	HEAD & SILL	JAMBS	HEAD & SILL	JAMBS
38.500 x 38.575	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
38.500	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
38.500 x 38.575	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
38.500	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
38.500 x 38.575	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
38.500	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
38.500 x 38.575	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
38.500	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
38.500 x 38.575	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
38.500	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
50.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2
90.000	1-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2	2-C2-1-C2-1	1-C2-1-C2-2

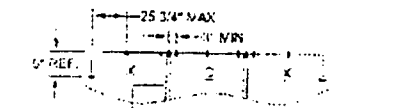
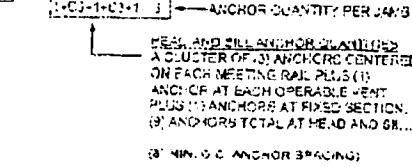
NOTES:

- ANCHOR TYPES:  
1. 1/4" EPOXY CAPSULES 2. 1/4" EPOXY SS4 CRITE-FLEX 3. #12 STEEL SCREWS (K1)
- CLASS TYPES:  
A. 5/16" LAMI - (1/8" A, 3/16" H)  
B. 5/16" LAMI - (1/8" A, 3/16" H)  
C. 5/16" LAMI - (1/8" A, 3/16" H)  
D. 7/16" LAMI - (3/16" A, 3/16" H)  
E. 7/16" LAMI - (3/16" A, 3/16" H)  
F. 7/16" LAMI - (3/16" H, 3/16" H)  
G. 1/2" LAMI - (1/2" A, 3/16" H) OR 3/4" SPACE, 5/16" LAMI - (1/2" A, 3/16" H)  
H. 1/2" LAMI - (1/2" A, 3/16" H) OR 3/4" SPACE, 5/16" LAMI - (1/2" A, 3/16" H)  
I. 1/2" LAMI - (1/2" A, 3/16" H) OR 3/4" SPACE, 5/16" LAMI - (1/2" A, 3/16" H)  
J. 1/2" LAMI - (1/2" A, 3/16" H) OR 3/4" SPACE, 7/16" LAMI - (1/2" A, 3/16" H)  
K. 1/2" LAMI - (1/2" A, 3/16" H) OR 3/4" SPACE, 7/16" LAMI - (1/2" A, 3/16" H)  
L. 1/2" LAMI - (1/2" A, 3/16" H) OR 3/4" SPACE, 7/16" LAMI - (1/2" A, 3/16" H)

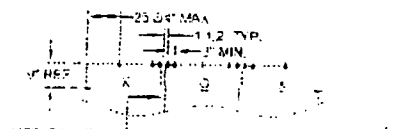
3. WINDOW ANCHOR QUANTITIES ARE PER ADJACENT TABLE AND BASED ON THE FOLLOWING DIMENSIONS. FOR WINDOW SIZES NOT SHOWN, GO TO NEXT LARGER WINDOW IN TABLE.

HEAD & SILL: 1/8" MAX. ON EACH SIDE OF MEETING RAIL CENTERLINE  
23 3/4" MAX. FROM CORNERS  
JAMBS: 1/8" MAX. FROM CORNERS AND 22 1/2" MAX. O.C.

TABLE KEY:



EXAMPLE CLUSTER W/ QTY. OF (3) ANCHORS (SHOWN IN TABLE KEY ABOVE)



EXAMPLE CLUSTER W/ QTY. OF (4) ANCHORS

ANCHORAGE SPACING, XX (1/3-1/3)  
ALUM. HORIZONTAL ROLLER WINDOW, IMPACT

Approved by: [Signature]  
Date: 10/21/04  
Checked by: [Signature]  
10/21/04



**ANCHOR QUANTITIES, XO & OX WINDOWS TABLE 4**

GLASS TYPE ANCHOR TYPE & SUBSTRATE	A, B, G, H						C, D, E, I, J, K					
	2, 3. CONC ZONES		2. CONC ZONES		1. CONC ZONES		2, 3. WOOD ZONES		2. CONC ZONES		1. CONC ZONES	
	HEAD & SILL	JAMBS	HEAD & SILL	JAMBS	HEAD & SILL	JAMBS	HEAD & SILL	JAMBS	HEAD & SILL	JAMBS	HEAD & SILL	JAMBS
57 009 x 38.375	1-C2+1	2	1-C2+1	2	1-C2+1	2	1-C2+1	2	1-C2+1	2	1-C2+1	2
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
48 000	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
50 025	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
54 000	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
60 000	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
63 000	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
48 000	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
50 025	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
54 000	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
60 000	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
63 000	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3	1-C2+1	3
48 000	2-C2+2	2	2-C2+2	2	2-C2+2	2	2-C2+2	2	2-C2+2	2	2-C2+2	2
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
50 025	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
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	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
54 000	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
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60 000	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
63 000	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3	2-C2+2	3
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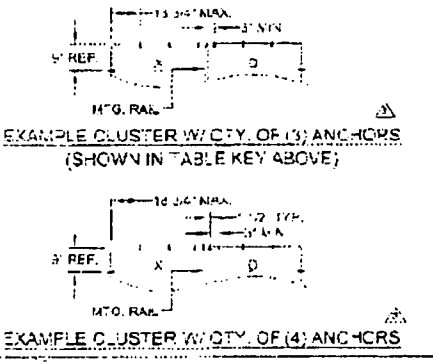
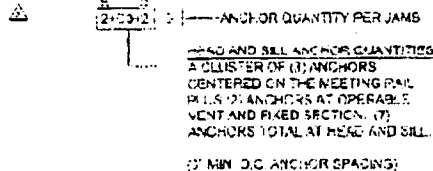
**NOTES**

- ANCHOR TYPES  
 1 - 1/4" ELDU TAPSCONS 2 - 1/4" ELDU SS4 CRETE-FLEX 3 - #3 STEEL SCREWS (60)
- CLASS TYPES:  
 A - 5/16" LAMI - (1/2" A, 2/8" H, 1/2" H)  
 B - 5/16" LAMI - (1/2" A, 2/8" H, 1/2" H)  
 C - 5/16" LAMI - (3/16" A, 2/8" H, 1/2" H)  
 D - 7/16" LAMI - (3/16" A, 2/8" H, 1/2" H)  
 E - 7/16" LAMI - (3/16" A, 2/8" H, 1/2" H)  
 F - 7/16" LAMI - (3/16" A, 2/8" H, 1/2" H)  
 G - 1 1/8" LAMI - (1/2" OR 3/4" A, 3/16" OR 1/4" SPACE, 5/16" LAMI - (1/2" A, 2/8" H, 1/2" H)  
 H - 1 1/8" LAMI - (1/2" OR 3/4" A, 3/16" OR 1/4" SPACE, 5/16" LAMI - (1/2" A, 2/8" H, 1/2" H)  
 I - 1 1/8" LAMI - (1/2" OR 3/4" A, 3/16" OR 1/4" SPACE, 5/16" LAMI - (1/2" A, 2/8" H, 1/2" H)  
 J - 1 1/8" LAMI - (1/2" OR 3/4" A, 3/16" OR 1/4" SPACE, 5/16" LAMI - (1/2" A, 2/8" H, 1/2" H)  
 K - 1 1/8" LAMI - (1/2" OR 3/4" A, 3/16" OR 1/4" SPACE, 5/16" LAMI - (1/2" A, 2/8" H, 1/2" H)  
 L - 1 1/8" LAMI - (1/2" OR 3/4" A, 3/16" OR 1/4" SPACE, 5/16" LAMI - (1/2" A, 2/8" H, 1/2" H)

3. WINDOW ANCHOR QUANTITIES ARE PER ADJACENT TABLE AND BASED ON THE FOLLOWING DIMENSIONS. FOR WINDOW TYPES NOT SHOWN, GO TO NEXT LARGER WINDOW IN TABLE.

HEAD & SILL: 1/2" MAX. ON EACH SIDE OF MEETING RAIL CENTERLINE.  
 3/4" MAX. FROM CORNERS.  
 JAMBS: 1/2" MAX. FROM CORNERS AND 1/2" MAX. O.C.

**TABLE KEY:**

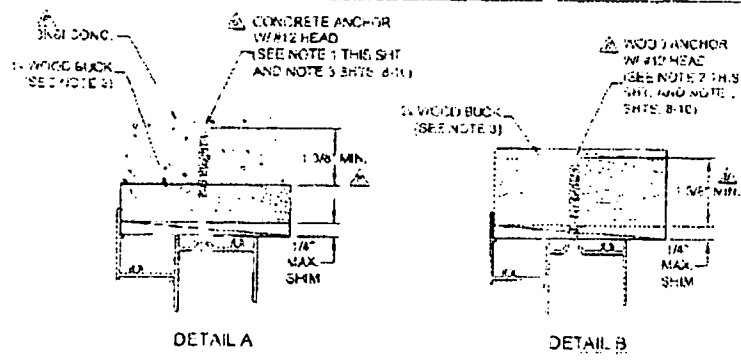


Approved by: [Signature]  
 Date: 1/24/02

[Signature]  
 1/24/02

PLEASE CHECK SPACING OF HEAD & SILL ANCHORS  
 AND VERIFY DIMENSIONS TO CLASSIFIED TABLE

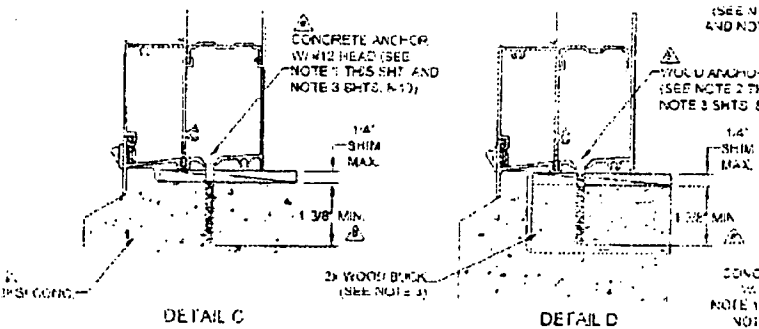
**RGI** ANCHORAGE SPACING, OX AND XO WINDOWS  
 ALUM. HORIZONTAL ROLLER WINDOW, IMPACT



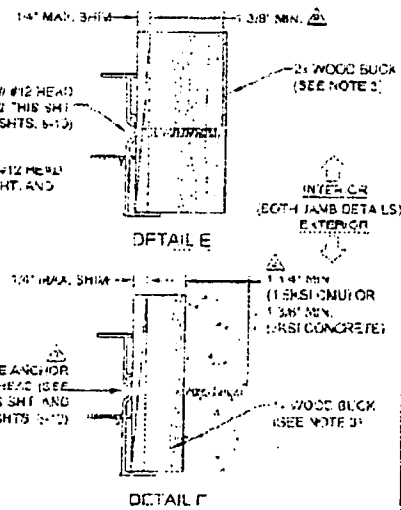
TYPICAL HEAD SECTIONS

- NOTES:**
- FOR CONCRETE APPLICATIONS IN MIAMI-DADE COUNTY, USE ONLY MIAMI-DADE COUNTY APPROVED 1/4\"/>
  - FOR WOOD APPLICATIONS IN MIAMI-DADE COUNTY, USE #12 STEEL SCREWS WITH 1/4\"/>
  - WOOD BUCKS DEPICTED IN THE SECTIONS ON THIS PAGE AS 1x ARE BUCKS WHOSE TOTAL THICKNESS IS LESS THAN 1/2\"/>
  - FOR ATTACHMENT TO ALUMINUM, THE MATERIAL SHALL BE A MINIMUM STRENGTH OF 6000 PSI AND A MINIMUM OF 1/8\"/>
  - MATERIALS, INCLUDING BUT NOT LIMITED TO STEEL SCREWS, THAT COME INTO CONTACT WITH OTHER DISSIMILAR MATERIALS SHALL MEET THE REQUIREMENTS OF FBC 2004, SECTION 24.03.2.4 (SUPPLEMENT 2005).

EXTERIOR INTERIOR (HEAD & SILL DETAILS)



TYPICAL SILL SECTIONS



TYPICAL JAMB SECTIONS

Approved as shown by the Florida Building Code, Miami-Dade County, Florida, on 10/24/10.

*[Signature]*

*[Signature]*

10/24/10

PROJECT	ANCHORAGE DETAILS
DATE	10/24/10
BY	[Signature]
CHECKED	[Signature]
APPROVED	[Signature]
SCALE	AS SHOWN



BUILDING CODE COMPLIANCE OFFICE (BCCO)  
PRODUCT CONTROL DIVISION

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

[www.buildingcodeonline.com](http://www.buildingcodeonline.com)

**NOTICE OF ACCEPTANCE (NOA)**

PGT Industries  
1070 Technology Drive  
Nokomis, FL 34274

**SCOPE:**

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

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

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

**DESCRIPTION:** ~~Series C-700 Aluminum Casement Window - LMI~~

**APPROVAL DOCUMENT:** Drawing No. 7045-8, titled "Aluminum Casement Window, Impact", sheets 1 through 13 of 13, dated 12/17/02 with revision "D" dated 06/23/05, prepared by PGT Industries, signed and sealed by Lucas A. Turner, P.E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

**MISSILE IMPACT RATING:** Large and Small Missile Impact

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

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

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

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

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

This NOA revises NOA # 03-0611.02 and consists of this page 1 and evidence pages E-1, E-2 and E-3, as well as approval document mentioned above.

The submitted documentation was reviewed by Herminio F. Gonzalez, P.E., Director, BCCO



**FILE**

NOA No 05-1129.11  
Expiration Date: May 22, 2008  
Approval Date: February 23, 2006  
Page 1

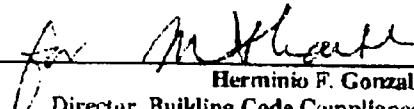


PGT IndustriesNOTICE OF ACCEPTANCE; EVIDENCE SUBMITTED**A. DRAWINGS**

1. Manufacturer's die drawings and sections.
2. Drawing No. **7045-8**, titled "Aluminum Casement Window, Impact", sheets 1 through 13 of 13, dated 12/17/02 with revision "D" dated 06/23/05, prepared by PGT, signed and sealed by Lucas A. Turner, P.E.

**B. TESTS**

1. Test reports on 1) Uniform Static Air Pressure Test, Loading per FBC, TAS 202-94  
2) Large Missile Impact Test per FBC, TAS 201-94  
3) Cyclic Wind Pressure Loading per FBC, TAS 203-94  
along with marked-up drawings and installation diagram of two outswing aluminum casement windows, prepared by Fenestration Testing Laboratory, Test Report No. **FTL 4608** dated 05/10/05, signed and sealed by Edmundo Largespada, P.E.
2. Test reports on 1) Air Infiltration Test, per FBC, TAS 202-94  
2) Uniform Static Air Pressure Test, Loading per FBC, TAS 202-94  
3) Water Resistance Test, per FBC, TAS 202-94  
4) Large Missile Impact Test per FBC, TAS 201-94  
5) Cyclic Wind Pressure Loading per FBC, TAS 203-94  
6) Forced Entry Test, per FBC 2411 3.2.1 and TAS 202-94  
along with marked-up drawings and installation diagram of two outswing aluminum casement windows, prepared by Fenestration Testing Laboratory, Test Report No. **FTL 4607** dated 05/10/05, signed and sealed by Edmundo Largespada, P.E.
3. Test reports on 1) Uniform Static Air Pressure Test, Loading per FBC, TAS 202-94  
2) Large Missile Impact Test per FBC, TAS 201-94  
3) Cyclic Wind Pressure Loading per FBC, TAS 203-94  
along with marked-up drawings and installation diagram of two outswing aluminum casement windows, prepared by Fenestration Testing Laboratory, Test Report No. **FTL 3729** dated 2/28/03, signed and sealed by Joseph Chan, P.E.  
*"Submitted under NOA# 03-0611.02"*
4. Test reports on 1) Air Infiltration Test, per FBC, TAS 202-94  
2) Uniform Static Air Pressure Test, Loading per FBC, TAS 202-94  
3) Water Resistance Test, per FBC, TAS 202-94  
4) Large Missile Impact Test per FBC, TAS 201-94  
5) Cyclic Wind Pressure Loading per FBC, TAS 203-94  
6) Forced Entry Test, per FBC 2411 3.2.1 and TAS 202-94  
along with marked-up drawings and installation diagram of two outswing aluminum casement windows, prepared by Fenestration Testing Laboratory, Test Report No. **FTL 3587** dated 10/3/02, signed and sealed by Joseph Chan, P.E.  
*"Submitted under NOA# 03-0611.02"*

  
\_\_\_\_\_  
Herminio F. Gonzalez, P.E.  
Director, Building Code Compliance Office  
NOA No 05-1129.11  
Expiration Date: May 22, 2008  
Approval Date: February 23, 2006

PGT Industries

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

- 5. Test reports on
  - 1) Air Infiltration Test, per FBC, TAS 202-94
  - 2) Uniform Static Air Pressure Test, Loading per FBC, TAS 202-94
  - 3) Water Resistance Test, per FBC, TAS 202-94
  - 4) Large Missile Impact Test per FBC, TAS 201-94
  - 5) Cyclic Wind Pressure Loading per FBC, TAS 203-94
  - 6) Forced Entry Test, per FBC 2411 3.2.1 and TAS 202-94
 along with marked-up drawings and installation diagram of one outswing aluminum casement window, prepared by Fenestration Testing Laboratory, Test Report No. FTL 3582 dated 10/3/02, signed and sealed by Joseph Chan, P.E.  
 "Submitted under NOA# 03-0611.02"
- 6. Test reports on
  - 1) Air Infiltration Test, per FBC, TAS 202-94
  - 2) Uniform Static Air Pressure Test, Loading per FBC, TAS 202-94
  - 3) Water Resistance Test, per FBC, TAS 202-94
  - 4) Large Missile Impact Test per FBC, TAS 201-94
  - 5) Cyclic Wind Pressure Loading per FBC, TAS 203-94
  - 6) Forced Entry Test, per FBC 2411 3.2.1 and TAS 202-94
 along with marked-up drawings and installation diagram of three aluminum outswing casement windows, prepared by Fenestration Testing Laboratory, Test Report No. FTL 3580 dated 10/3/02, signed and sealed by Joseph Chan, P.E.  
 "Submitted under NOA# 03-0611.02"

**C. CALCULATIONS**

- 1. Revised Anchor Calculations and structural analysis, prepared by manufacturer, dated 11/21/05, signed and sealed by Lucas A. Turner, P.E.  
 Complies with ASTM E 1300-98

**D. QUALITY ASSURANCE**

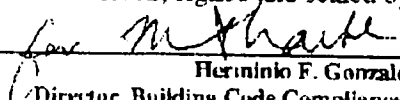
- 1. Miami Dade Building Code Compliance Office (BCCO).

**E. MATERIAL CERTIFICATIONS**

- 1. Notice of Acceptance No. 01-0205.02 issued to Solutia, Inc. for "Saflex/Keepsafe Maximum" dated 5/17/01, expiring on 5/21/06.
- 2. Notice of Acceptance No. 05-1208.02 issued to E.I. DeNemours for "Dupont Butacite © PVB" dated 01/05/06, expiring on 12/11/10.

**F. STATEMENTS**

- 1. Statement letter of conformance, dated 12/19/02, signed and sealed by Robert L. Clark, P.E.
- 2. Statement letter of no financial interest, dated 12/19/02, signed and sealed by Robert L. Clark, P.E.

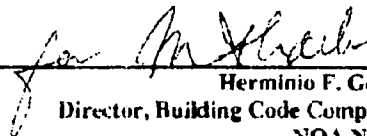
  
 Herminio F. Gonzalez, P.E.  
 Director, Building Code Compliance Office  
 NOA No 05-1129.11  
 Expiration Date: May 22, 2008  
 Approval Date: February 23, 2006

**PGT Industries**

**NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**

**G. OTHER**

1. Notice of Acceptance No. **03-0611.02**, issued to PGT Industries, Series "640" Aluminum Casement Window, approved on 10/09/03 and expiring on 5/22/08.
2. Letter from the consultant, dated 01/25/06, stating that the product is in compliance with the Florida Building Code (FBC).



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Herminio F. Gonzalez, P.E.

Director, Building Code Compliance Office

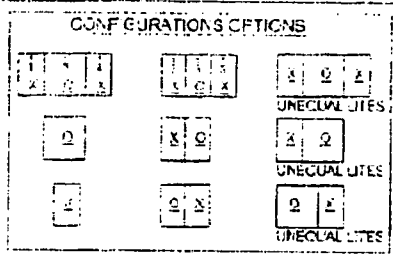
NOA No 05-1129.11

Expiration Date: May 22, 2008

Approval Date: February 23, 2006

NOTES: LARGE MISSILE WINDOWS

1. GLAZING OPTIONS:
- A. 5/16" LAMINATED GLASS COMPRISED OF (1) LITE OF 1/8" ANNEALED GLASS AND (1) LITE OF 1/8" HEAT STRENGTHENED GLASS W/ AN .090 INTERLAYER OF SOLUTIA OR DUPONT PVB.
  - B. 5/16" LAMINATED GLASS COMPRISED OF (2) LITES OF 1/8" HEAT STRENGTHENED GLASS W/ AN .090 INTERLAYER OF SOLUTIA OR DUPONT PVB.
  - C. 7/16" LAMINATED GLASS COMPRISED OF (1) LITE OF 3/16" ANNEALED GLASS AND (1) LITE OF 3/16" HEAT STRENGTHENED GLASS W/ AN .090 INTERLAYER OF SOLUTIA OR DUPONT PVB.
  - D. 7/16" LAMINATED GLASS COMPRISED OF (2) LITES OF 3/16" HEAT STRENGTHENED GLASS W/ AN .090 INTERLAYER OF SOLUTIA OR DUPONT PVB.
  - E. 13/16" I.G. GLASS COMPRISED OF (1) LITE OF 1/8" HEAT STRENGTHENED GLASS AND (1) 5/16" LAMINATED COMPONENT WITH A 3/8" AIR SPACE. 5/16" LAMINATED GLASS COMPRISED OF (2) LITES OF 1/8" HEAT STRENGTHENED GLASS WITH AN .090 SOLUTIA OR DUPONT PVB INTERLAYER.
  - F. 13/16" I.G. GLASS COMPRISED OF (1) LITE OF 1/8" ANNEALED GLASS AND (1) 7/16" LAMINATED COMPONENT WITH AN AIR SPACE. 7/16" LAMINATED GLASS COMPRISED OF (1) LITE OF 3/16" ANNEALED GLASS AND (1) LITE OF 3/16" HEAT STRENGTHENED GLASS WITH AN .090 SOLUTIA OR DUPONT PVB INTERLAYER.
  - G. 13/16" I.G. GLASS COMPRISED OF (1) LITE OF 1/8" ANNEALED GLASS AND (1) 7/16" LAMINATED COMPONENT WITH AN AIR SPACE. 7/16" LAMINATED GLASS COMPRISED OF (2) LITES OF 3/16" HEAT STRENGTHENED GLASS WITH AN .090 SOLUTIA OR DUPONT PVB INTERLAYER.



NOA DRAWING TABLE OF CONTENTS SHEET

NOTES	1
GLAZING DETAILS	2
ELEVATIONS	3-4
DESIGN PRESSURE TABLES	5-6
SECTIONS	10
CORNER CONSTRUCTION	11
EXTRUSION PROFILES	11-12
PARTS LIST	12
ANCHORAGE	13,4,13

2. CONFIGURATIONS: X, XX, XO, CX, KOX AND O
3. DESIGN PRESSURE RATINGS / COMPARATIVE ANALYSIS TABLES:
- A. NEGATIVE DESIGN LOADS BASED ON TESTED PRESSURE AND GLASS TABLES ASTM E 1300-98.
  - B. POSITIVE DESIGN LOADS BASED ON WATER TEST PRESSURE AND GLASS TABLES ASTM E 1300-98.
  - C. DESIGN PRESSURES UNDER 40 P.S.F. NOT APPLICABLE IN MIAMI-DADE COUNTY.
  - D. FOR "X" CONFIGURATIONS SEE SHEET 5.
  - E. FOR "XX" CONFIGURATIONS SEE SHEET 6.
  - F. FOR "XO" & "O" CONFIGURATIONS SEE SHEET 7.
  - G. FOR "CX" & "CO" OR "CX" CONFIGURATIONS SEE SHEET 8.
  - H. FOR UNEQUAL LITE "XOX", "XO" & "OX" CONFIGURATIONS SEE SHEET 9.
4. ANCHORAGE: THE 23 1/3% STRESS INCREASE HAS NOT BEEN USED IN THE DESIGN OF THIS PRODUCT. SEE SHEETS 3, 4 AND 13 FOR ADDITIONAL ANCHORAGE INFORMATION.
- HEAD & SILL:** MAX. 4" FROM CORNERS  
 MAX. 4" & 7" ON EACH SIDE OF MEETING RAILS  
 MAX. 14 1/2" SPACING ON VENTS  
 MAX. 13" SPACING ON FIXED LITES  
 (2) ANCHORS 3" APART AT MID-SPAN ON FIXED LITE ONLY
- JAMBS:** MAX. 4" FROM CORNERS  
 MAX. 13" SPACING  
 (2) ANCHORS 3" APART AT MID-SPAN
5. SEE SHEET 13 FOR APPROVED ANCHORS. 1/4" TAPCONS OR 1/4" SS4 CRETE-FLEX MAY BE USED IN CONCRETE OR WOOD APPLICATIONS TO ACHIEVE THE DESIGN PRESSURES SHOWN IN SHEETS 5 THROUGH 9. SEE SHEETS 5 THROUGH 9 FOR DESIGN PRESSURE LIMITATIONS WHEN ANCHORING WITH #12 SCREWS.
6. SHUTTER REQUIREMENT: NONE REQUIRED
7. NARROW JOINT SEALANT IS USED ON ALL FOUR CORNERS OF THE FRAME.
8. REFERENCE TEST REPORTS: FTL-3580, FTL-3582, FTL-3587, FTL-3725, FTL-4607 AND FTL-4608

PROJECT REVIEWED  
 in accordance with the Florida  
 Building Code  
 Approved On: 05-11-99  
 Expires On: 05-11-02  
 [Signature]

*L. J. [Signature]*  
 1/21/01

APP 4, 10/14/01 PE  
 10-1582-1  
 1/21/01

NO. 1	01/21/01	REVISED & MOVE GLAZING DETAILS TO SHEET 2
NO. 2	01/21/01	NO CHANGE THIS SHEET
NO. 3	01/21/01	ADD 1/4" TAPCONS TO ALL 4 CORNERS ANCHORAGE
NO. 4	01/21/01	

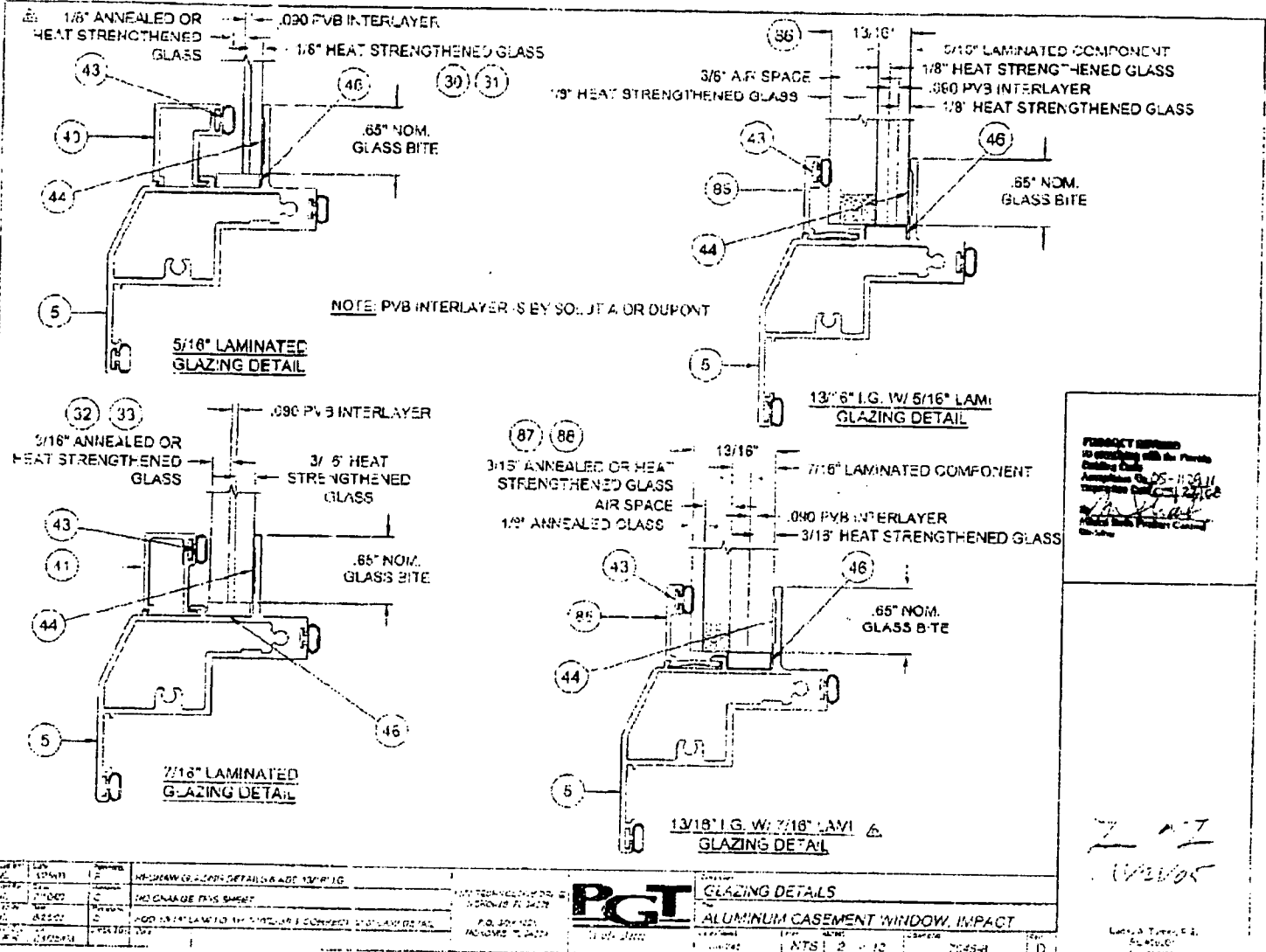
NOA TECHNICAL DRAWING  
 PROJECT NO. 01-019  
 PGI INDUSTRIES  
 11000 SW 15th St  
 Miami, FL 33187



NOTES AND TABLE OF CONTENTS

ALUMINUM CASEMENT WINDOW, IMPACT

NO. 1	01/21/01	REVISED & MOVE GLAZING DETAILS TO SHEET 2
NO. 2	01/21/01	NO CHANGE THIS SHEET
NO. 3	01/21/01	ADD 1/4" TAPCONS TO ALL 4 CORNERS ANCHORAGE
NO. 4	01/21/01	



PRODUCT DESIGNER  
 IS CONSULTING WITH THE PROVIDER  
 Building Code  
 American Code 2015-11-29-11  
 International Code 2015-11-29-11  
 By: [Signature]  
 Project: [Project Name]

2017  
 1/23/05

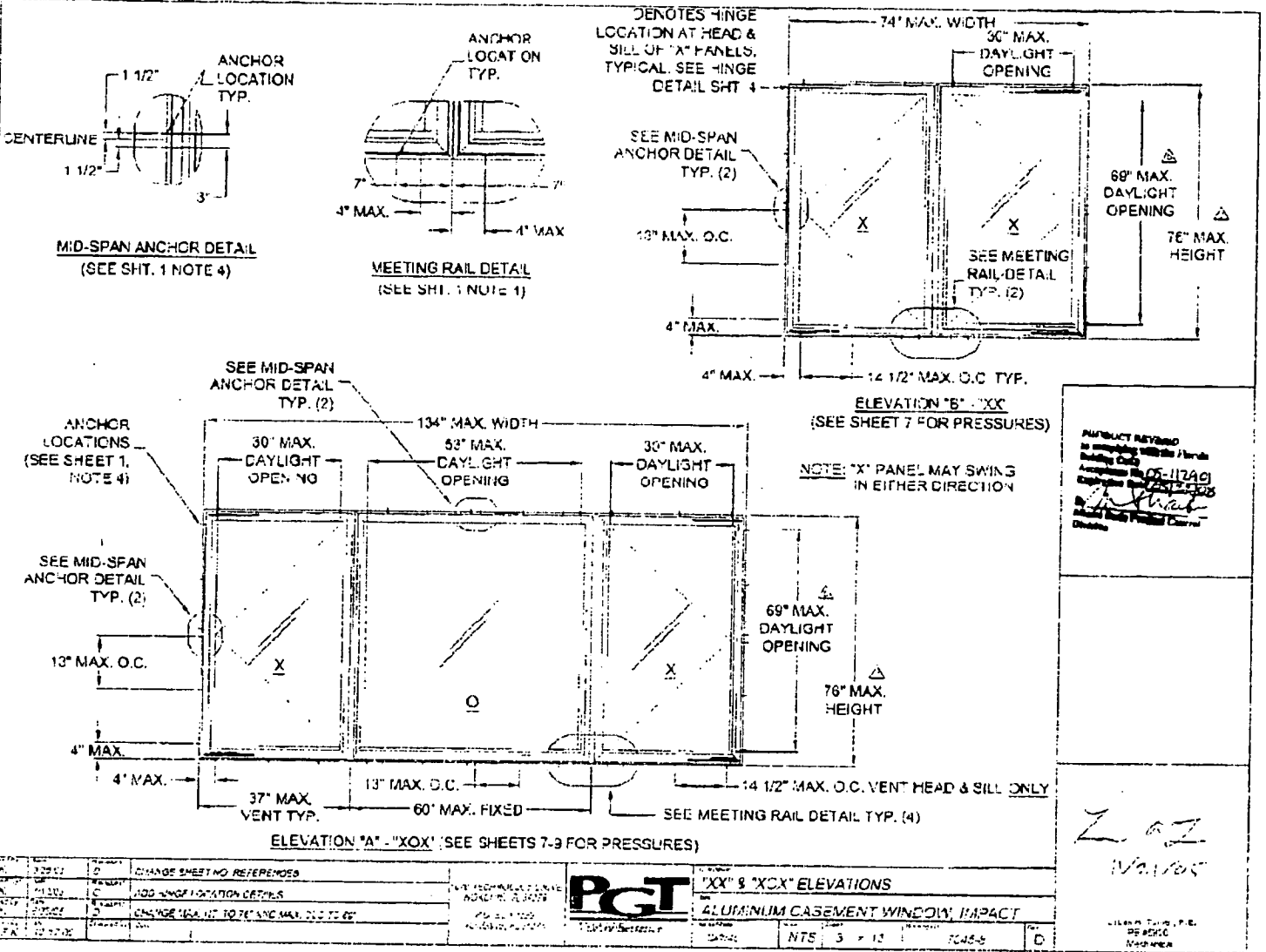
REV	DATE	BY	DESCRIPTION	REVISIONS
1	12/14/11	JE	REWORKED GLAZING DETAILS & ADDED 13/16" I.G.	
2	11/10/12	C	NO CHANGE THIS SHEET	
3	05/20/12	C	ADD 13/16" I.G. W/ 5/16" LAM. & CORRECT 13/16" I.G. DETAIL	
4	02/20/13	JE		



GLAZING DETAILS  
 ALUMINUM CASEMENT WINDOW, IMPACT

NTS 2 - 12

Let's A Team, E.S.  
 616.600.0000  
 www.letsateam.com

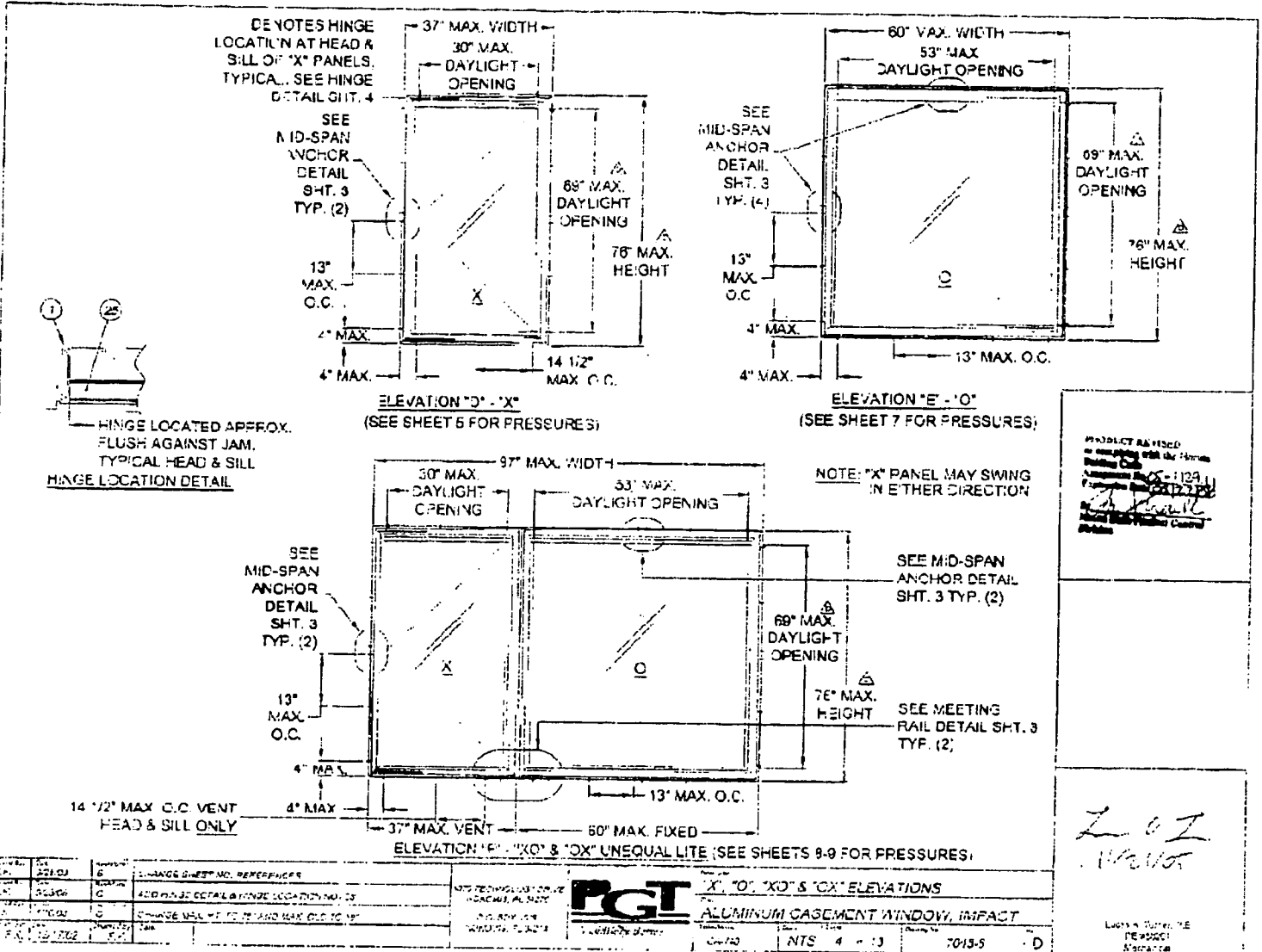


PRODUCT REVIEWED  
 in compliance with Florida  
 Building Code  
 Appendix 6, 05-1124C  
 Approved by 05/22/2008  
*[Signature]*  
 State Building Official  
 Florida

*L. J. Vailos*

<table border="1"> <tr> <td>NO.</td> <td>DATE</td> <td>DESCRIPTION</td> </tr> <tr> <td>1</td> <td>05/22/08</td> <td>CHANGE SHEET NO. REFERENCES</td> </tr> <tr> <td>2</td> <td>05/22/08</td> <td>ADD ANCHOR LOCATION DETAILS</td> </tr> <tr> <td>3</td> <td>05/22/08</td> <td>CHANGE HEIGHT TO 76" AND MAX. D.L. TO 60"</td> </tr> </table>	NO.	DATE	DESCRIPTION	1	05/22/08	CHANGE SHEET NO. REFERENCES	2	05/22/08	ADD ANCHOR LOCATION DETAILS	3	05/22/08	CHANGE HEIGHT TO 76" AND MAX. D.L. TO 60"	<p>DATE TECHNICAL DRAWING          APPROVED: 05/22/08          PROJECT NO. 05-1124C          REVIEWED: 05/22/08</p>	<p><b>PGT</b>          Profiles Systems, Inc.</p>	<p>"XX" &amp; "XCX" ELEVATIONS          ALUMINUM CASEMENT WINDOW, IMPACT</p>	<table border="1"> <tr> <td>DATE</td> <td>NTS</td> <td>3 x 12</td> <td>SCALE</td> <td>TC48-5</td> <td>REV.</td> <td>D</td> </tr> </table>	DATE	NTS	3 x 12	SCALE	TC48-5	REV.	D
NO.	DATE	DESCRIPTION																					
1	05/22/08	CHANGE SHEET NO. REFERENCES																					
2	05/22/08	ADD ANCHOR LOCATION DETAILS																					
3	05/22/08	CHANGE HEIGHT TO 76" AND MAX. D.L. TO 60"																					
DATE	NTS	3 x 12	SCALE	TC48-5	REV.	D																	

WILSON JONES, P.E.  
 95 ASPIC  
 1000 WEA



COMPARATIVE ANALYSIS TABLE 1. "X" WINDOWS TEST REPORTS: FTL-3582, FTL-3587, FTL-3729

Table with columns for 'X' WIDTH, GLAZING OPTIONS (A, B, E), HEIGHT (26, 31, 36, 38 3/9, 43, 46, 50 5/8, 54, 57, 60, 63, 66, 69, 72), and NEG/POS values for each height.

TABLE 2. "X" WINDOWS TEST REPORTS: FTL-3580, FTL-3587. GLAZING OPTION: C. 7/16" LAMI (3/16" A, .090, 3/16" HS). ALL "X" SIZES UP TO 37" WIDE x 63" HIGH AND ALL "X" SIZES UP TO 32" WIDE x 72" HIGH.

TABLE 2A. "X" WINDOWS TEST REPORTS: FTL-4607, FTL-4608. GLAZING OPTIONS: C. 7/16" LAMI (3/16" A, .090, 3/16" HS) F. 13/16" LAMI (1/8" A, AIR SPACE, 7/16" LAMI-W/ 3/16" A, .090, 3/16" HS). ALL "X" SIZES UP TO 37" WIDE x 76" HIGH.

NOTES: 1. FOR INSTALLATIONS IN WOOD OR CONCRETE TO THE FULL DESIGN PRESSURES IN THE ABOVE TABLES, USE ELCO "M" TAPCONS OR 1/4" S94 CRETE-FLEX ANCHORS. 2. IF INSTALLING WITH #12 SCREWS DESIGN PRESSURE IS LIMITED TO 50.3 P.S.F.



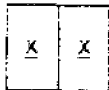
Product Review section with handwritten notes and signatures. Includes text: 'PRODUCT REVIEW is being done with the Plans... Approved by: [Signature]'. Also includes a signature at the bottom right.

Form with fields for 'ADD GLASS TYPES TO TABLES 1 & 4', 'NO. CHANGING IN S. SHIRT', 'REVIEW IN CHARGES & ADD IN DESIGN OPTION', and 'PRESSURES - X CONFIG. WINDOWS ALUMINUM CASEMENT WINDOW, IMPACT'. Includes PGT logo and technical specifications.



COMPARATIVE ANALYSIS TABLE 3 "XX" WINDOWS TEST REPORTS: FTL-3582

Table with columns for 'XX' size, WIDTH, HEIGHT, and various test results (NEG, POS) for different window configurations (28, 31, 36, 38 3/8, 43, 48, 50 5/8, 54, 57, 60, 63).



PRODUCT REVIEW: ... Building Code ...

TABLE 4 "XX" WINDOWS TEST REPORTS: FTL-3582, FTL-3723

Table with columns for GLAZING OPTIONS: B 5/16" LAMI (1/8" HS, .090, 1/8" HS) and E 13/16" LAMI (1/8" HS, 3/8" SPACE, 5/16" LAMI-W/ 1/8" HS, .090, 1/8" HS).

TABLE 5 "XX" WINDOWS TEST REPORT: FTL-3580

Table with columns for GLAZING OPTION: C 7/16" LAMI (3/16" A, .090, 3/16" HS) and ALL "XX" SIZES UP TO 74" WIDE x 63" HIGH.

TABLE 5A "XX" WINDOWS TEST REPORTS: FTL-3560, FTL-4807, FTL-4808

Table with columns for GLAZING OPTIONS: C 7/16" LAMI (3/16" A, .090, 3/16" HS) and F 13/16" LAMI (1/8" A, AIR SPACE 7/16" LAMI-W/ 3/16" A, .090, 3/16" HS).

NOTES: 1. FOR INSTALLATIONS IN WOOD OR CONCRETE TO THE FULL DESIGN PRESSURES IN THE ABOVE TABLES, USE ELCO 1/4" TAPCONS OR 1/4" SS4 CRCTE-FLEX ANCHORS. 2. IF INSTALLING WITH #12 SCREWS, DESIGN PRESSURE IS LIMITED TO 60.6 P.S.F.

Handwritten signature and date: L. M. Z. 1/27/11

Header section containing PGT logo, 'PRESSURES- XX CONFIG. WINDOWS', 'ALUMINUM CASEMENT WINDOW: IMPACT', and various technical specifications and codes.



COMPARATIVE ANALYSIS TABLE 8 "XO" OR "OX" & "1/3-1/3-1/3 XO" WINDOWS TEST REPORT: FTL-3522

		GLAZING OPTION: A 5/16" LAMI (1/8" A, 0.60, 1/8" HS)																								
"XO" WIDTH	"OX" WIDTH		HEIGHT																							
			26		31		36		38 3/8		43		48		50 5/8		54		57		5C		53			
			NEG	POS	NEG	POS	NEG	POS	NEG	POS	NEG	POS	NEG	POS	NEG	POS	NEG	POS	NEG	POS	NEG	POS	NEG	POS		
37	55 1/2	A	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0		
40	72	A	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0		
49 1/2	74	A	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0		
53 1/8	79 2/3	A	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-72.1	70.0	-69.5	69.5	-37.5	67.3		
58	84	A	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-71.9	70.0	-67.7	67.7	-34.9	34.9	-62.7	62.7		
60	90	A	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-83.4	63.4	-63.9	63.9	-60.0	60.0	-58.5	58.5	-60.2	53.4		
64	96	A	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-71.1	70.0	-61.8	61.8	-56.9	56.9	-66.1	66.1	-53.8	53.8	-60.4	60.4	-47.7	47.7		
67.333	101	A	-75.0	70.0	-75.0	70.0	-75.0	70.0	-75.0	70.0	-66.4	66.4	-59.2	59.2	-55.6	55.6	-52.8	52.8	-49.4	49.4	-45.9	45.9	-42.1	43.1		
70 3/17	106 3/8	A	-75.0	70.0	-75.0	70.0	-70.1	70.0	-71.8	70.0	-61.6	61.6	-55.1	55.1	-51.8	51.8	-48.9	48.9	-45.8	45.8	-42.8	42.8	-40.3	40.3		
72	108	A	-75.0	70.0	-75.0	70.0	-75.0	70.0	-72.4	70.0	-60.4	60.4	-54.3	54.3	-51.1	51.1	-47.0	47.0	-44.8	44.8	-42.2	42.2	-35.7	33.7		
74	111	A	-75.0	70.0	-75.0	70.0	-73.7	70.0	-67.9	67.9	-59.6	59.6	-52.8	52.8	-49.9	49.9	-48.4	48.4	-43.5	43.5	-41.1	41.1	-38.3	33.6		

1/3	1/3	1/3
X	O	X
X	O	
O	X	

TABLE 9 "XO" OR "OX" & "1/3-1/3-1/3 XO" WINDOWS TEST REPORTS: FTL-3682, FTL-3729  
 GLAZING OPTIONS: B. 5/16" LAMI (1/8" HS, 0.90, 1/8" HS); E. 13/16" LAMI (1/8" HS, 3/8" SPACE, 5/16" LAMI-W/ 1/8" HS, 0.60, 1/8" HS)  
 ALL "XO" OR "OX" SIZES UP TO 74" WIDE x 63" HIGH AND ALL "1/3-1/3-1/3 XO" SIZES UP TO 111" WIDE x 63" HIGH [-75.0] 70.0

TABLE 10 "XO" OR "OX" & "1/3-1/3-1/3 XO" WINDOWS TEST REPORT: FTL-3680  
 GLAZING OPTION: C. 7/16" LAMI (3/16" A, 0.60, 3/16" HS)  
 ALL "XO" OR "OX" SIZES UP TO 74" WIDE x 63" HIGH AND ALL "1/3-1/3-1/3 XO" SIZES UP TO 111" WIDE x 63" HIGH [-50.0] 70.0

TABLE 10A "XO" OR "OX" & "1/3-1/3-1/3 XO" WINDOWS TEST REPORTS: FTL-3660, FTL-4607, FTL-4608  
 GLAZING OPTIONS: C. 7/16" LAMI (3/16" A, 0.60, 3/16" HS); F. 13/16" LAMI (1/8" AIR SPACE, 7/16" LAMI-W/ 3/16" A, 0.60, 3/16" HS)  
 ALL "XO" OR "OX" SIZES UP TO 74" WIDE x 78" HIGH AND ALL "1/3-1/3-1/3 XO" SIZES UP TO 111" WIDE x 78" HIGH [-55.0] 55.0

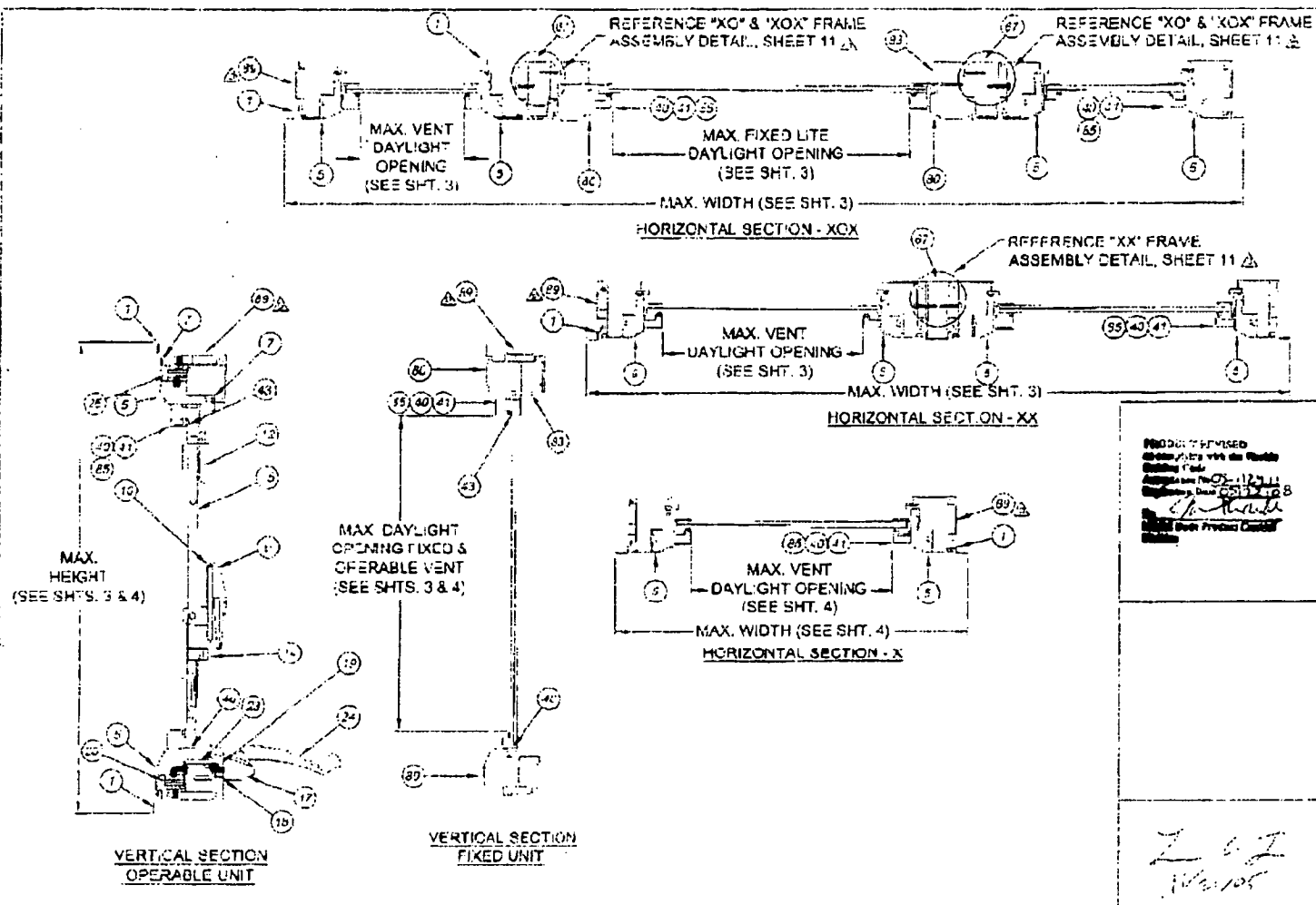
- NOTES:   
 1. FOR INSTALLATIONS IN WOOD OR CONCRETE TO THE FULL DESIGN PRESSURES IN THE ABOVE TABLES, USE ELCO 1/4" TAPCONS OR 1/4" SS4 CRETE-FLEX ANCHORS.   
 2. IF INSTALLING WITH #12 SCREWS DESIGN PRESSURE IS LIMITED TO 69.8 P.S.F.

PRODUCT REVIEW  
 by *[Signature]*  
 Approved by *[Signature]*  
 Approved by *[Signature]*  
 Approved by *[Signature]*

*[Handwritten Signature]*

REVISIONS: 1. ADD Q. USE TYPE E TO TABLE 8 2. NO CHANGE THIS SHEET 3. CHANGE: TAPCONS AND ANCHORS TO #12 DRAWN BY: <i>[Signature]</i>	DATE: 10/1/00 CHECKED BY: <i>[Signature]</i> APPROVED BY: <i>[Signature]</i>	PROJECT: <i>[Signature]</i> DRAWING NO.: <i>[Signature]</i> SCALE: <i>[Signature]</i>	PGT PRESSURES - XO, OX, & 1/3-1/3-1/3 XO WINDOWS ALUMINUM CASEMENT WINDOW, IMPACT 10/1/00 MTS 8 x 13 7045-8
---	--	---	--

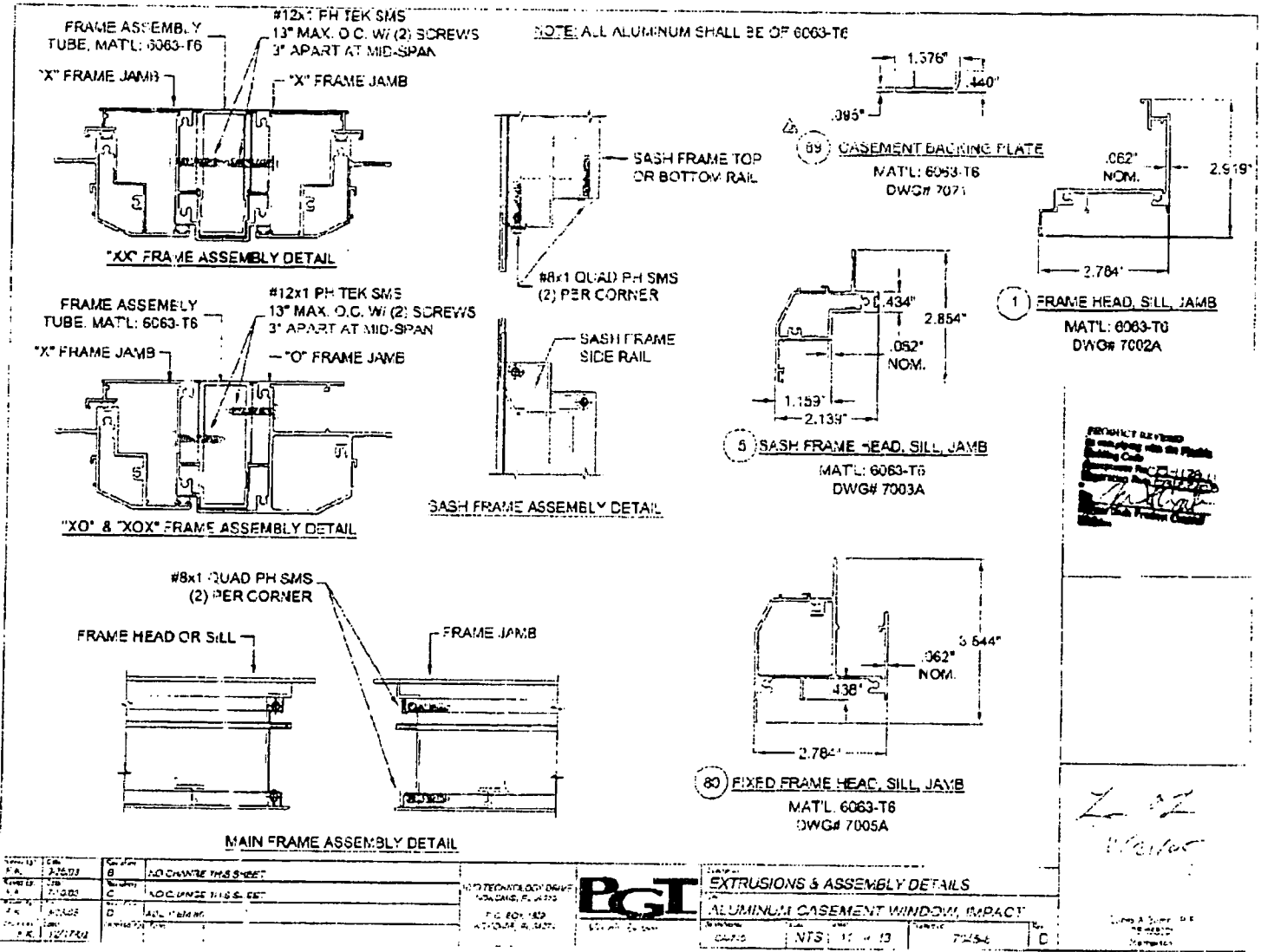




PROVIDED BY THE  
 ARCHITECT WITH THE  
 BUILDING PLAN  
 APPROVED BY THE  
 ENGINEER DATE 05/13/08  
 [Signature]  
 [Stamp]

*Z. G. Z.*  
*11/10/08*

<table border="1"> <tr> <td>DATE</td> <td>12/17/03</td> <td>REVISION</td> <td>1</td> <td>ADD 10" X 16" GLAZING BEARING</td> </tr> <tr> <td>DATE</td> <td>05/13/08</td> <td>REVISION</td> <td>2</td> <td>ADJUST TOP RISE</td> </tr> <tr> <td>DATE</td> <td>05/13/08</td> <td>REVISION</td> <td>3</td> <td>CHANGE NO. REF. AND ADD DIMS</td> </tr> </table>	DATE	12/17/03	REVISION	1	ADD 10" X 16" GLAZING BEARING	DATE	05/13/08	REVISION	2	ADJUST TOP RISE	DATE	05/13/08	REVISION	3	CHANGE NO. REF. AND ADD DIMS	<p><b>PGT</b></p> <p>ALUMINUM CASERMENT WINDOW, IMPACT</p>	<p>SECTIONS</p> <p>DATE: 05/13/08</p> <p>PROJECT: NYS 13-13</p> <p>SCALE: 7045-R</p>	<p>LOCUS A. F. 11/10/08</p> <p>PE 05/13/08</p> <p>SECTION</p>
DATE	12/17/03	REVISION	1	ADD 10" X 16" GLAZING BEARING														
DATE	05/13/08	REVISION	2	ADJUST TOP RISE														
DATE	05/13/08	REVISION	3	CHANGE NO. REF. AND ADD DIMS														



PERMANENTLY RE-DESIGNED  
 by reworking with the Plastic  
 Building Club  
 Approved by [Signature]  
 [Signature]

*L. O. [Signature]*

NO. 1	REV. 1	DATE	DESCRIPTION
1	1	3-15-03	NO CHANGE THIS SHEET
2	2	3-15-03	NO CHANGE THIS SHEET
3	3	3-15-03	NO CHANGE THIS SHEET
4	4	3-15-03	NO CHANGE THIS SHEET
5	5	3-15-03	NO CHANGE THIS SHEET
6	6	3-15-03	NO CHANGE THIS SHEET
7	7	3-15-03	NO CHANGE THIS SHEET
8	8	3-15-03	NO CHANGE THIS SHEET
9	9	3-15-03	NO CHANGE THIS SHEET
10	10	3-15-03	NO CHANGE THIS SHEET

NO. 1 TECHNOLOGY DRIVE  
 WILMINGTON, DE 19805  
 P.O. BOX 180  
 WILMINGTON, DE 19805

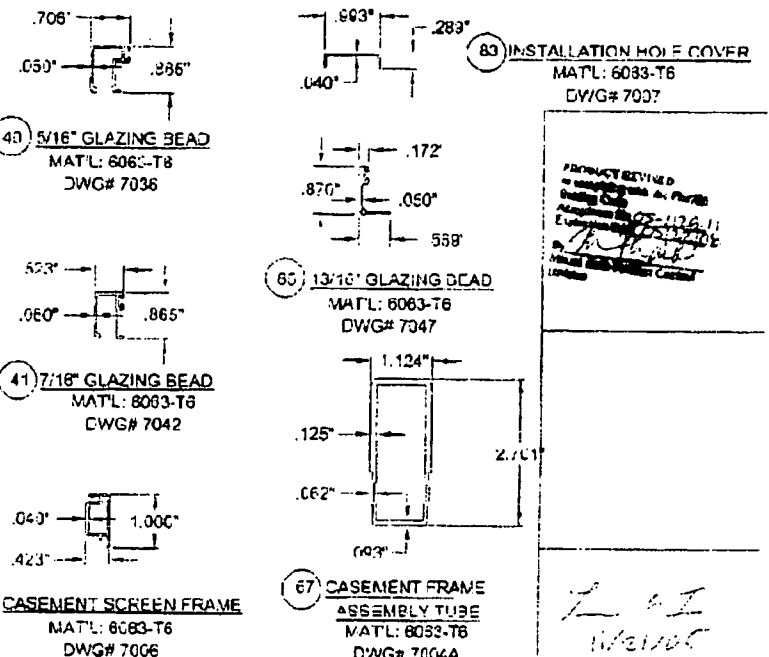


DATE	NTS: 11.13.13	SCALE	7/45-4
NO.			

DATE: 11.13.13

ITEM	DWG #	QTY	DESCRIPTION
1	7002A		MAIN FRAME - HEAD, SILL & LAMBS
2	1115	7010A	FIXED LOAD PIN SMS
3	2008		FRAME CORNER KEY
4			1/2" X 1/2" X 1/8" CLONED GILL (OAM) 1" W
5	7002A		SAEH - TOP, BOTTOM & SIDE RAILS
6	1155	7010A	FIXED LOAD PIN SMS
7	2017	67617K	FLOR WEATHERSTRIP - 3/8" X 1/2"
8	7009		SAEH CORNER KEY
9	2024		MAXIM DUAL ARM OPERATOR
10	2026		LOCK SUPPORT PLATE
11			610-24 X .262 PH. TYP. F
12	2014		SLIP LOCK KEEPER (R/L & L/R)
13	1137	7010A	FIXED LOAD PIN SMS
14	2012		FIX BAR GUIDE
15	2013		FIX BAR ASSEMBLY
16	2025		SCAM DUAL OPERATOR
17	2027		MAXIM DUAL ARM OPER. CR
18	2030		OPERATOR HANDLE
19	2031		HACKING PLATE
20			610-24 X .262 PH. TYP. F
21	2032		STUD BRACKET (L & R)
22			610-24 X .262 PH. TYP. F
23	2033		OPERATOR HANDLE & ARM (FIXED ARM)
24	2034		SNAP-ON HANDLE K-08
25	2035		1/2" LINGE (HEAVY DUTY)
26			610 X .500 PH. PHL.
30			515" LAMINATED (1/8" & 1/8" IS GLASS) 099 INTERLAYER - SOLUTRA - DR DEPOSIT PVB
31			515" LAMINATED (1/8" & 1/8" IS GLASS) 099 INTERLAYER - SOLUTRA - DR DEPOSIT PVB
32			715" LAMINATED (3/16" & 3/16" IS GLASS) 099 INTERLAYER - SOLUTRA - DR DEPOSIT PVB
33			715" LAMINATED (1/8" & 1/8" IS GLASS) 099 INTERLAYER - SOLUTRA - DR DEPOSIT PVB
40	7016		GLAZING BEAD (7/16")
41	7047		GLAZING BEAD (7/16")
42	1224	61024	VINYL RUBB (WSP) THICK
43			150 ICONS - DOW CORNING 99-265 OR EQUIV.
44			BARABOND
49	1034	61034	SEALING BLOCK
49	7043		SCREEN FRAME
51	7040		SCREEN CORNER KEY
52			SCREEN COVER
53	1035	61035	SCREEN BUSH - LAMINATED
54	7011	61076	CASEMENT SCREEN CLIP
55			610 X .500 SC. PH. TSK SMS
57	7004A	67004	CASEMENT FRAME ASSEMBLY TUBE
58			612 X 1/2" PH. PHL. TSK
59	7011		BLACK SUPPORT PLATE
60	7012		BLACK SPACER
71	7012	71157	SNAP-ON HANDLE K-08
72	7018	77157	POURING HANDLE

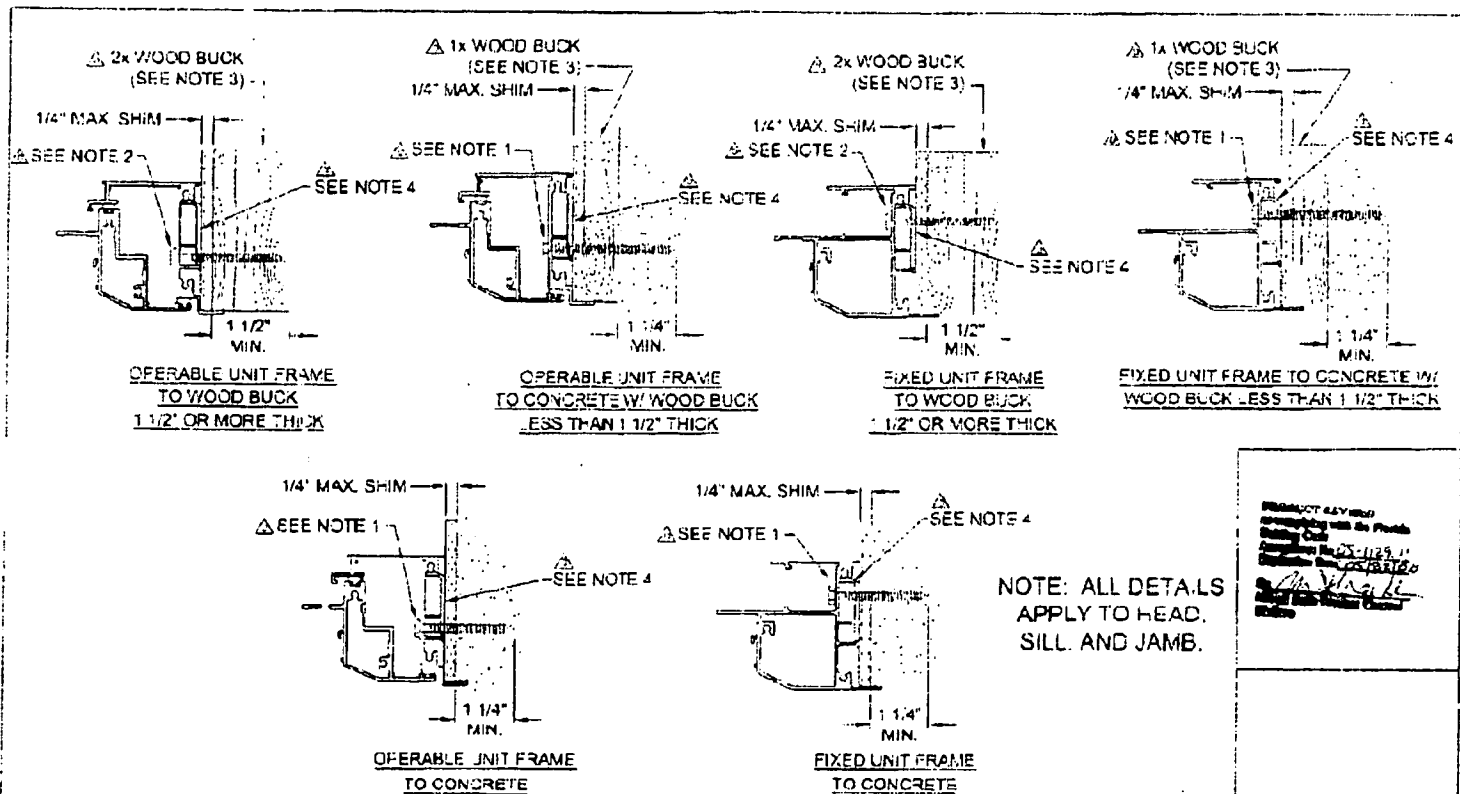
ITEM	DWG #	QTY	DESCRIPTION
73	7022		MAXIM SINGLE LOCK
74	7023		SINGLE LOCK KEYP-E
75		7010A	FIXED LOAD PIN SMS
76	7001A		FIXED WINDOW FRAME - HEAD, SILL & LAMBS
81	1155	7010A	FIXED LOAD PIN SMS
82	7010		FIXED FRAME CORNER KEY
83	7007		INSTALLATION HOLE COVER
85	7047	67047	GLAZING BEAD (7/16" LG.)
86			1/2" GLASS (1/8" AIR SPACE, 3/16" LAM) 516" LAM - 099 LITES OF 1/8" IS GLASS WITH AN 099 INTERLAYER - SOLUTRA OR DR DEPOSIT PVB
87			1/2" GLASS (1/8" AIR SPACE, 3/16" LAM) 516" LAM - 099 LITES OF 1/8" IS GLASS WITH AN 099 INTERLAYER - SOLUTRA OR DR DEPOSIT PVB
88			1/2" GLASS (1/8" AIR SPACE, 3/16" LAM) 716" LAM - 099 LITES OF 1/8" IS GLASS WITH AN 099 INTERLAYER - SOLUTRA OR DR DEPOSIT PVB
89	7011	67011	CASEMENT JACKING PLATE (SEE NOTE 4, SHEET 15)



PRODUCT REVISED  
 by [Signature]  
 Date: 05-11-2011  
 Approved: [Signature]  
 Date: 05-11-2011

*L. H. I.*  
*W. C. I.*

122502 ADD 13/16" GLASS A GLAZING BEAD NO CHANGE THIS SHEET ADD 801A TO ITEM 44 GLAZING AND 13/16" IS GLASS	<b>PGT</b> PARTS LIST & EXTRUSIONS ALUMINUM CASEMENT WINDOW IMPACT	NTS 12 x 12 7045-1
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- NOTES:**
1. FOR CONCRETE APPLICATIONS IN MIAMI-DADE COUNTY USE ONLY MIAMI-DADE COUNTY APPROVED 1/4" ELCO TAPCONS OR 1/4" SS4 CRETE-FLEX CONCRETE ANCHORS. MINIMUM DISTANCE FROM ANCHOR TO CONCRETE EDGE IS 2 1/2". SEE SHEET 1 FOR SPACING.
  2. FOR WOOD APPLICATIONS IN MIAMI-DADE COUNTY, USE #2 SCREWS, 1/4" ELCO TAPCONS OR 1/4" ELCO SS4 CRETE-FLEX. SEE SHEET 1 FOR SPACING.
  3. WOOD BUCKS DEPICTED IN THE SECTIONS ON THIS PAGE AS 1x ARE BUCKS WHOSE TOTAL THICKNESS IS LESS THAN 1 1/2". 1x WOOD BUCKS ARE OPTIONAL IF UNIT IS INSTALLED DIRECTLY TO SOLID CONCRETE. WOOD BUCKS DEPICTED AS 2x ARE 1 1/2" THICK OR GREATER. INSTALLATION TO THE SUBSTRATE OF WOOD BUCKS TO BE ENGINEERED BY OTHERS OR AS APPROVED BY AUTHORITY HAVING JURISDICTION.
  4. ITEM 89, BACKING PLATE, NOT REQUIRED FOR INSTALLATIONS OUTSIDE OF MIAMI-DADE COUNTY.

NOTE: ALL DETAILS APPLY TO HEAD, SILL AND JAMB.

REWORK 4/27/05  
 Approved with the Florida Building Code  
 Date: 05-11-05  
 Signature: [Signature]  
 Title: [Title]

L. R.  
 1/21/05

REVISIONS: NO. 1: 05/28/04 NO. 2: 07/03/04 NO. 3: 02/23/05 DATE: 07/21/07	NO CHANGE THIS SHEET NO CHANGE THIS SHEET REVISE NOTES AND REMOVE 3/8" WOODS & #14 SCREWS	PGT TECHNOLOGY OFFICE 1000 W. 15th Ave. Ft. Lauderdale, FL 33304	<b>PGT</b> PLUMBING DIVISION	ANCHORAGE DETAILS ALUMINUM CASEMENT WINDOW, IMPACT	SCALE: NTS DATE: 04/24/04 DRAWING NO: 70-45-3	MADE IN THE U.S.A. SEE PAGE 20 National
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BUILDING CODE COMPLIANCE OFFICE (BCCO)  
PRODUCT CONTROL DIVISION

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

**NOTICE OF ACCEPTANCE (NOA)**

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

**SCOPE:**

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

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

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

**DESCRIPTION:** Series ED-101 Outswing Aluminum French Door w/ Sidelites - Impact

**APPROVAL DOCUMENT:** Drawing No. 972, titled "Aluminum French Door w/ Sidelites", sheets 1 through 9 of 9, prepared by PGT Industries, dated 7-12-99 and last revised on 09-27-06, signed and sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

**MISSILE IMPACT RATING:** Large and Small Missile Impact

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

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

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

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

**INSPECTION:** A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA revises NOA # 02-0927.13 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Ishaq I. Chanda



A.  
10/25/06

**FILE**

NOA No. 06-0807.07  
Expiration Date: February 13, 2008  
Approval Date: November 08, 2006  
Page 1

**PGT Industries****NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**

- A. DRAWINGS** (transferred from file #02-0927.13)
1. Manufacturer's die drawings and sections.
  2. Drawing No. **972**, titled "Aluminum French Door w/ Sidelites", sheets 1 through 9 of 9, prepared by PGT Industries, dated 7-12-99 and last revised on 09-27-06, signed and sealed by Robert L. Clark, P.E.
- B. TESTS** (transferred from file #02-0927.13) Original test conducted per FBC, PA 201, 202 & 203-94 now known as FBC, TAS 201, 202 & 203-94.
1. Test report on 1) Air Infiltration Test, per PA 202-94  
 2) Uniform Static Air Pressure Test, Loading per PA 202-94  
 3) Water Resistance Test, per PA 202-94.  
 4) Forced Entry Test, per SFBC 3603.2 (b) and PA 202-94  
 5) Large Missile Impact Test per SFBC and PA201-94  
 6) Cyclic Wind Pressure Loading per SFBC and PA203-94  
 along with marked-up drawings and installation diagram of an aluminum out swinging French door w/ sidelites, prepared by Fenestration Testing Laboratory, Inc., Test Report No. **FTL-2067**, dated August 12, 1998, signed and sealed by Gilbert Diamond, P.E.
  2. Additional test report on (submitted for hardware & glazing qualification) (transferred from file #02-0927.13)  
 1) Air Infiltration Test, per PA 202-94  
 2) Uniform Static Air Pressure Test, Loading per PA 202-94  
 3) Large Missile Impact Test per SFBC, PA201-94  
 4) Cyclic Wind Pressure Loading per SFBC, PA 203-94  
 5) Water Resistance Test, per PA 202-94.  
 6) Forced Entry Test, per SFBC 3603.2 (b) and PA 202-94  
 along with marked-up drawings and installation diagram of an aluminum out swinging French door, prepared by Fenestration Testing Laboratory, Inc., Test Report No. **FTL-2612**, dated September 29, 2000, signed and sealed by Aldo P. Gonzales, P.E.
  3. Additional reference test reports FTL-1973 & FTL-2241 per PA201, 202 & 203, issued by Fenestration Testing Laboratory, Inc., dated March 19, 1998 and January 14, 1999, signed and sealed by Gilbert Diamond, P.E.
- C. CALCULATIONS**
1. Anchor verification dated 07-21-06 and last revised on 09/27/06 complying w/ FBC 2004 prepared, signed and sealed by Robert L. Clark, P.E.
  2. Anchor Verification Calculations dated 07-12-99 and revised on 1-14-00, prepared, signed and sealed by Robert L. Clark, P.E. (transferred from file #02-0927.13)
  3. Glazing complies with ASTM E-1300-02

Ishaq I. Chanda

Ishaq I. Chanda, P.E.

Product Control Examiner

NOA No. 06-0807.07

Expiration Date: February 13, 2008

Approval Date: November 08, 2006

PGT IndustriesNOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**D MATERIAL CERTIFICATIONS**

1. Notice of Acceptance No. 05-1208.02 issued to E. I. DuPont DeNemours, for "*Butacite PVB*", expiring on 12/11/2010.
2. Notice of Acceptance No. 03-0827.08 issued to Solutia, Inc. for "*Solutia Interlayers*", expiring on 03/04/09.

**E. STATEMENTS (transferred from file# 02-0702.01).**

1. Statement letter of conformance and no financial interest, dated July 12, 1999, signed by Robert L. Clark, P.E.
2. Letter of lab compliance, dated August 12, 1998, prepared by Fenestration Testing Laboratory, Inc., signed and sealed by Gilbert Diamond, P.E.
3. Addendum letter, along with marked-up drawing of reinforcement (sidelite) dated 2-3-2000, issued by Fenestration Testing Laboratory.
4. Letter of lab compliance, dated September 28, 2000, prepared by Fenestration Testing Laboratory, Inc., signed and sealed by Aldo P. Gonzales, P.E.
6. Meeting Summary dated January 26, 1999, issued by BBCO

**D. OTHER**

1. This NOA revises NOA # 02-0927.13.
2. E-mail correspondences dated May-September 2006 between PGT and BCCO.
3. Manufacturer's "Quality Operation Procedure", submitted per meeting summary dated January 26, 1999 (Note: This series FD-101 door is related to file 98-0506.02, requiring strict manufacturing quality procedure to be followed.)
4. Prior related file NOA(s) 02-0927.13, 01-0417.06 & 98-0506.02.

*Ishaq I. Chanda*

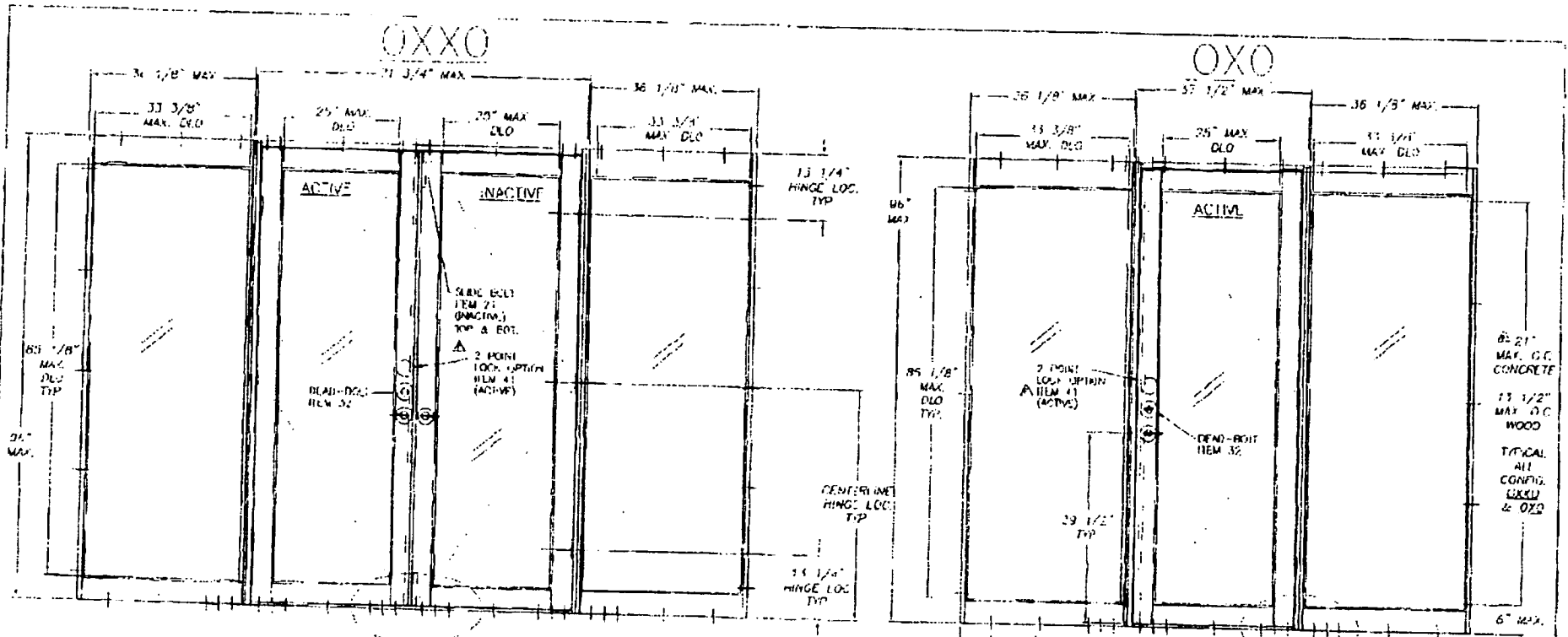
Ishaq I. Chanda, P.E.

Product Control Examiner

NOA No. 06-0807.07

Expiration Date: February 13, 2008

Approval Date: November 08, 2006



ASTRAGAL INTERSECTION  
 (SEE NOTE 5 & CLUSTER)  
 A. SCANS A, B, C & F, SHEET 3  
 HEAD - CONC (3), WOOD (7)  
 SILL - CONC (6), WOOD (7)  
 TYPICAL ALL CONFIGURATIONS

DOWN SLOPINE INTERSECTION  
 (NOTE 6 & CLUSTER DETAILS)  
 C, D, G & H, SHEET 3  
 ANCHORAGE CONDITION  
 HEAD - CONC (3), WOOD (7)  
 SILL - CONC (6), WOOD (7)  
 TYPICAL ALL CONFIGURATIONS

STANDARD REVIEW  
 Consistency with the Florida  
 Building Code  
 Approval No. 06-4007-07  
 Registration Date: 07/18/08  
 By: *Shaghi Akhavan*  
 Licensed Professional Engineer

**LARGE MISSILE IMPACT DOORS**

- GLAZING OPTIONS: (SEE SHEET 4 FOR GLAZING DETAILS)
  - OPTION 1 - 402 (3/8") LAMINATED (3/16" HEAT STRENGTHENED .090 INTERLAYER 1/8" ANNEALED)
  - OPTION 2 - 402 (5/8") LAMINATED (3/16" HEAT STRENGTHENED .090 INTERLAYER 1/8" ICA STRENGTHENED)
  - OPTION 3 - 7/16" LAMINATED (3/16" HEAT STRENGTHENED .090 INTERLAYER 3/16" ANNEALED)
  - OPTION 4 - 7/16" LAMINATED (3/16" HEAT STRENGTHENED .090 INTERLAYER 3/16" HEAT STRENGTHENED)
- DESIGN PRESSURE RATING: (SEE TABLE SHEET 3)
- ANCHORAGE: THE 33 1/8" STRESS INCREASE HAS NOT BEEN USED IN THE DESIGN OF THIS PRODUCT FOR ANCHOR SPACING SEE NOTES 6 AND 7, SHEET 3
- SHUTTER REQUIREMENT: SHUTTERS NOT REQUIRED
- REFERENCES: TEST REPORTS FL-2007-2241 AND FL-2012-ELCO TELEPHON NCA 04-072101 AND 01-0225505  
 ANS/A/ASPA NDS-2001 FOR WOOD CONSTRUCTION
- SEALANT TO BE APPLIED AROUND THE FRAME CORNER & PANEL CORNER SEAM.
- THIS PRODUCT HAS BEEN DESIGNED AND TESTED TO COMPLY WITH THE REQUIREMENTS OF THE FLORIDA BUILDING CODE, 2004 EDITION FOR THE HIGH WINDS HURRICANE ZONE (H147)
- CONFIGURATIONS: PANEL D/O, SE, AD, DD, 3 AND 5

*[Signature]*  
 Robert A. Clark, P.E.  
 M. #24712  
 Structural



1070 TECHNOLOGY DRIVE  
 NEWNOMIS, FL 34275  
 P.O. BOX 1524  
 NEWNOMIS, FL 34276

Rev'd By:	Date:	REVISIONS
J.A.	7/19/06	REVISE ANCHORAGE
Rev'd By:	Date:	REVISIONS
J.S.	9/23/06	REVISIONS - ADD 1 (L-201)
Rev'd By:	Date:	REVISIONS
D.B.	7/17/09	A MSG. MARKED CHANGE

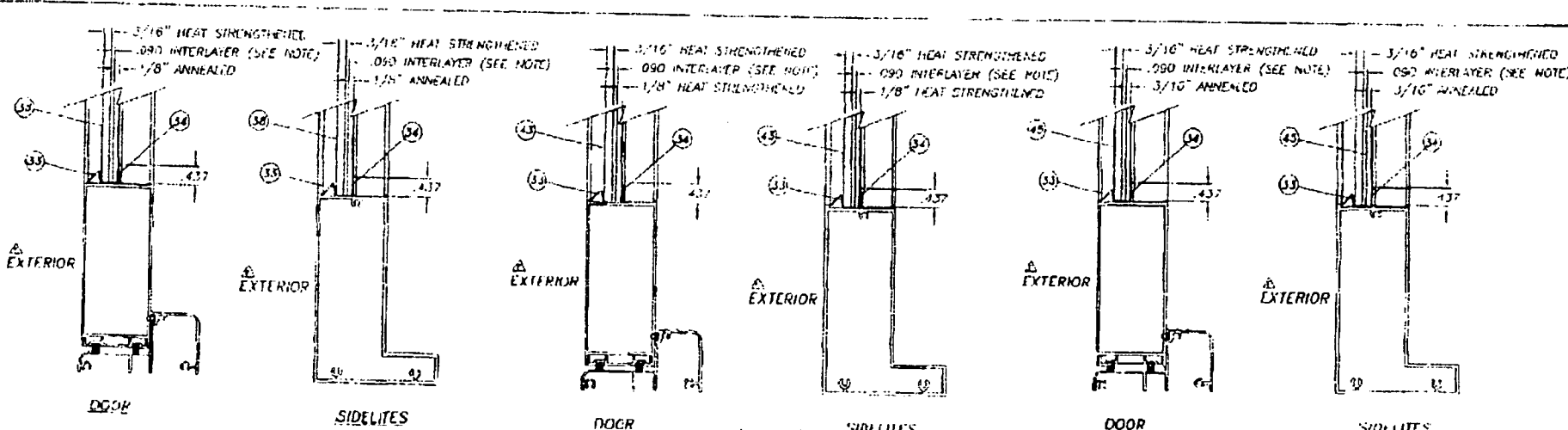
Description			
ELEVATIONS OXXO & OXO			
ALUMINUM FRENCH DOOR W/ SHUTTERS			
Series/Model	Spec.	Sheet	Drawing No.
FD-101	NIS	1 of 9	9/2
			Rev.
			1

COST TO COMPANY 100%

PART C



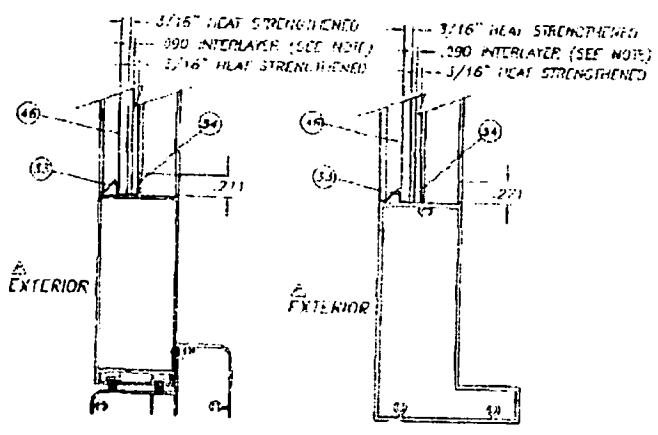




**GLAZING OPTION 1**  
 402 (5/8") LAMINATED

**GLAZING OPTION 2**  
 402 (3/8") LAMINATED

**GLAZING OPTION 3**  
 7/16" LAMINATED



**GLAZING OPTION 4**  
 7/16" LAMINATED

NOTE: INTERLAYER MAY BE DUPONT BUTACRL PWB OR SOLITA SAFLEX/KEEPSAFE MAXIMUM

**REVISIONS**  
 AS SUPPLIED WITH THIS SET  
 Drawing Code: **98-0807-07**  
 Replaces Drawing: **98-0807-08**  
 By: **Richard L. Clark**  
 Date: **7/12/99**

*[Signature]*  
 7/27/06  
 Richard L. Clark, P.E.  
 # 609712  
 Structural



1070 TECHNOLOGY DRIVE  
 NORMANS, IL 34275  
 P.O. BOX 1024  
 NORMANS, IL 34274

Drawn By: **FX**  
 Date: **7/15/06**  
 Checked By: **FX**  
 Date: **8/22/06**  
 U.S. Date: **7/12/99**

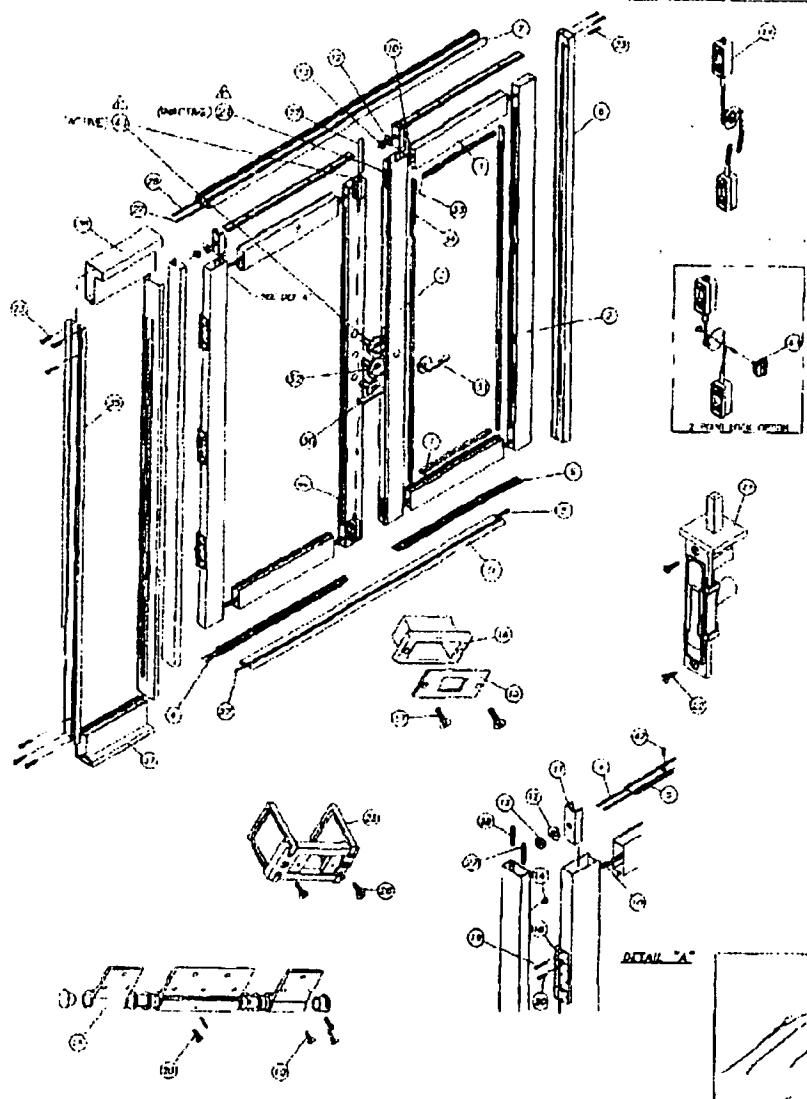
Personnel: **F-ND** THIS SET  
 Function: **F-ND** SIDLITES & EXT

Description: <b>GLAZING DETAILS</b>			
Title: <b>ALUMINUM FRENCH DOOR W/ SIDELITES</b>			
Scale: <b>FD-101</b>	Sheet: <b>NTS</b>	Drawings: <b>4 of 9</b>	Rev: <b>972</b>

REFERENCE TEST REPORT: **FTL-2067**



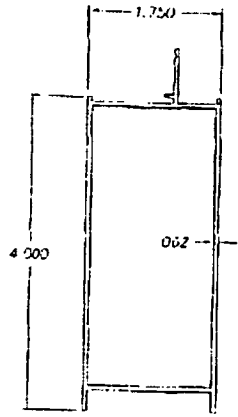




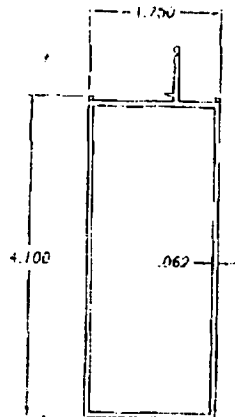
ITEM	DESCRIPTION	QTY	VENOR	VENDOR #
1	DOOR HEAD/SH (AL 6063-15/052 WALL)	00152	ALUMAX	AT-10373
2	DOOR JAMB (AL 6063-15/052 WALL)	00152	ALUMAX	AT-10373
3	DOOR ASTINGAL INT. (AL 6063-15/052 WALL)	00377	ALUMAX	AT-10377
4	200 x 107 FINISH # STRIP	079240	SCHLEGEL CORP.	AT-10474
5	WSP. CHANNEL (AL 6063-15/050 WALL)	00172	ALUMAX	AT-10373
6	FRAME JAMB (AL 6063-16/050 WALL)	00380	ALUMAX	AT-10380
7	FRAME HEAD (AL 6063-16/050 WALL)	00411	ALUMAX	AT-12320
8	1 1/2 x 1 PAD			
9	Cutw. Hinges (AL 6063 16/002 WALL)	01089	ALUMAX	AT-12375
10	5/16x18 THROUGH ROD	01001A	FASLEC INDUSTRIAL	
11	Truss Chime (AL 6063 15/062 WALL)	00178M	ALUMAX	AT-10378
12	5/16x17/8 TRUSS WASHER	27038A	FASLEC INDUSTRIAL	
13	5/16x18 TRUSS NUT	27038A	FASLEC INDUSTRIAL	
14	FRAME SCR COVER CAP	41720	PCT INDUSTRIES	41720
15	SHAKE PLATE	7055V	CAMCORP	
16	SHAKE PLATE INSERT	41721	PCT INDUSTRIES	41721
17	10x374 SCR. FLT. HD. PH.	71034A	MERCHANTS FASTENER	
18	HANG ASSY	71037M	NATIONWIDE INT.	
19	10x625 SCR. FLT. HD. PH.	71037M	MERCHANTS FASTENER	
20	10x172 SCR. FLT. HD. PH.	71037M	MERCHANTS FASTENER	
21	10x625 SLIDE DOOR LOCK (INACTIVE PANEL)	41720	PCT INDUSTRIES	41720
22	6x172 FLT. HD. PH.	70321W	MERCHANTS FASTENER	
23	7x172 FLT. HD. PH.	70321W	FASLEC INDUSTRIAL	
24	8 x 1 SCR. PAN HD. PH.	70321W	FASLEC INDUSTRIAL	
25	LOCK SUPPORT ASSY	41010K	PCT INDUSTRIES	41010K
26	6x174 FLT. HD. PH.	7034E	FASLEC INDUSTRIAL	
27	200 x 100 OLON	00300K	SCHLEGEL CORP.	00300190
28	32 x 100 OLON	00300K	SCHLEGEL CORP.	00300190
29	1 POINT LOCK ASSY (ACTIVE PANEL)	41010K	PCT INDUSTRIES	41010K
30	LOCK (ACTIVE)	41010K	PCT INDUSTRIES	41010K
31	LOCK (DORMIT)	41010K	PCT INDUSTRIES	41010K
32	DEAD-BOLT LOCK	41010K	PCT INDUSTRIES	41010K
33	Roller Arm Assy. Wood	00103	FLORENZ SCHLITZ	00103
34	ROLLER	00103	FLORENZ SCHLITZ	00103
35	SIDELITE JAMB (AL 6063-16/050 WALL)	00381	ALUMAX	AT-10381
36	SIDELITE HEAD (AL 6063-16/075 WALL)	00414	ALUMAX	AT-10414
37	SIDELITE BOTTOM BAR (AL 6063-16/075 WALL)	00415	ALUMAX	AT-10415
38	402 Laminated (1/8" HS / 125 HS w/ Dupont Butacite PV or Scilia Sulfex/Kevlar Maximum Inner Layer)	00155W	SEHNE/MORTENSON	00155W
39	SEAL SEALER	01041	ALUMAX	AT-10411
40	SIDELITE JAMB AMPHEN (PANEL ORIENTED)	00414	ALUMAX	AT-10414
41	2 POINT LOCK (ACTIVE PANEL)	00414	ALUMAX	AT-10414
42	18 x 750 Ph. Fl. Jct.	70347M	PRG LOR	
43	402 Laminated (1/8" HS / 125 HS w/ Dupont Butacite PV or Scilia Sulfex/Kevlar Maximum Inner Layer)	00155W	SEHNE/MORTENSON	00155W
44	VAMP ASTINGAL EXT. (AL 6063-15/002 WALL)	00384	ALUMAX	AT-10384
45	1/16" Laminated (3/16 HS & 3/16 Anodized w/ Dupont Butacite PV or Scilia Sulfex/Kevlar Maximum Inner Layer)	00155W	SEHNE/MORTENSON	00155W
46	1/16" Laminated (3/16 HS & 3/16 HS w/ Dupont Butacite PV or Scilia Sulfex/Kevlar Maximum Inner Layer)	00155W	SEHNE/MORTENSON	00155W
47	FILLER HEAD ADAPTER, DRIP CAP (AL 6063-16/050 WALL)	00377	ALUMAX	AT-10377

CHECK BY YOU  
 Consistency with the Plan.  
 Building Code  
 Approved by 06-08-7-07  
 Inspector: [Signature]  
 Date: 7/18/99

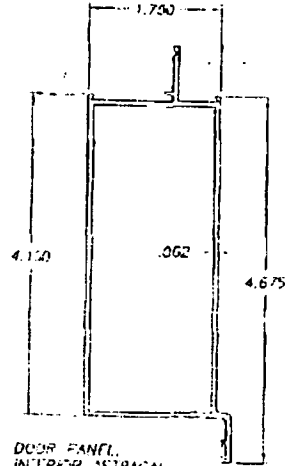
 Date: 7/27/99 Robert L. Clark, P.E. PE #32712 Structural		Prepared By: [Signature] Date: 7/18/99	Checked By: [Signature] Date: 7/18/99	Approved By: [Signature] Date: 7/18/99
		Description: <b>BILL OF MATERIALS</b> Title: <b>ALUMINUM FRENCH DOOR W/ SIDELITES</b>		
1070 TECHNOLOGY DRIVE WILCOX, FL 34275 P.O. BOX 1022 WILCOX, FL 34274				



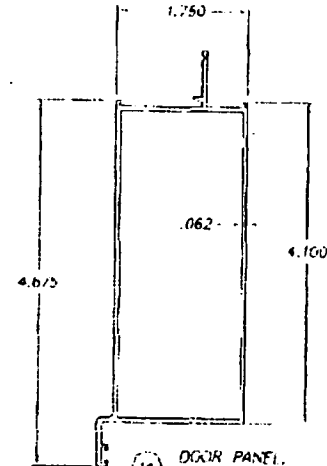
① DOOR PANEL HEAD & SILL  
6063-15 ALUM.



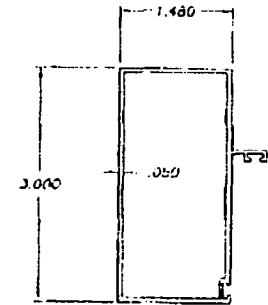
② DOOR PANEL JAMB  
6063-15 ALUM.



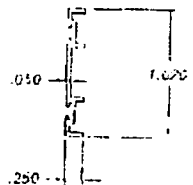
③ DOOR PANEL,  
INTERIOR ASTRAGAL  
6063-15 ALUM.



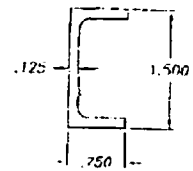
④ DOOR PANEL,  
EXTERIOR ASTRAGAL  
6063-15 ALUM.



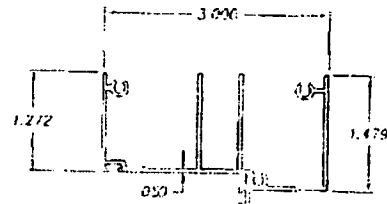
⑤ FRAME JAMB  
6063-15 ALUM.



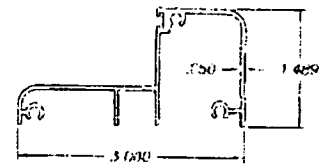
⑥ WEATHER STRIP CHANNEL  
6063-15 ALUM.



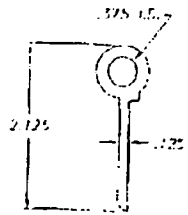
⑦ GLASS CLAMP  
6063-15 ALUM.



⑧ FRAME HEAD  
6063-16 ALUM.



⑨ OUTSWING THRESHOLD  
6063-16 ALUM.



⑩ HINGE EXTRUSION  
6063-15 ALUM.

DESIGN REVIEWED  
AS SUPPLYING WITH FLORIDA  
BUILDING CODE  
Application No. 01-061267  
Expiration Date: 06/13/08  
By: *William J. Chanda*  
Professional Engineer  
Mechanical

*[Signature]*  
10/27/06  
Robert L. Clark, P.E.  
14 930717  
Structural



1070 TECHNOLOGY DRIVE  
MORRIS, FL 34275  
P.O. BOX 1823  
MORRIS, FL 34274

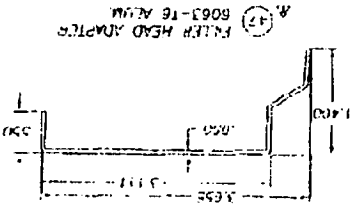
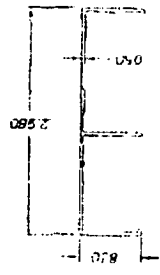
Revised By: F.P.	Date: 7/15/06	Revision: E-UPGRADE ALLOY, 6/02
Drawn By: F.P.	Date: 9/22/06	Revision: F-NO CHG THIS SIT
Checked By: F.P.	Date: 9/20/02	

Description: EXTRUSIONS PROFILES, DOORS			
Title: ALUMINUM FRENCH DOOR W/ SIDELITES			
Series/Model: FG-101	Scale: NTS	Sheet: 7 of 9	Drawing No. 972
			Rev: 1

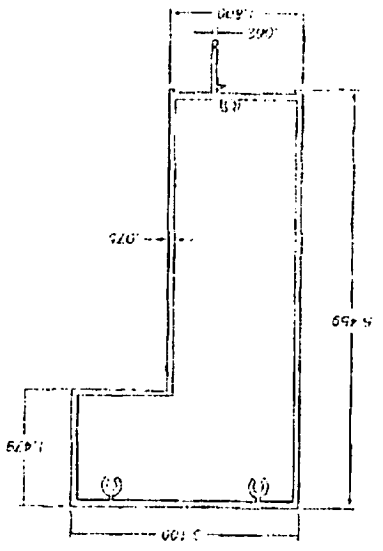
FD-101	NTS 8 x 9	979
1070 TECHNOLOGICAL PARK MONROE, LA 70470	1070 TECHNOLOGICAL PARK MONROE, LA 70470	ROBERT L. SIMS, P.E. TE 388132 388-0900
EXTRUSIONS PROFILS, SIDELITES	EXTRUSIONS PROFILS, SIDELITES	ALUMINIUM FRENCH DOOR W/ SIDELITES
Date: 7/19/06 Order: 7/19/06 L.S. F-UPGRADE ALLOY, ALL 9/22/06 F-ADD ITEM 47 9/9/02 L.R.	<b>PCT INDUSTRIES</b>	9/27/06 

PROJECT REVIEW  
 TO BE COMPLETED BY  
 DATE: 10/15/06  
 BY: [Signature]  
 APPROVED BY: [Signature]  
 DATE: 10/15/06

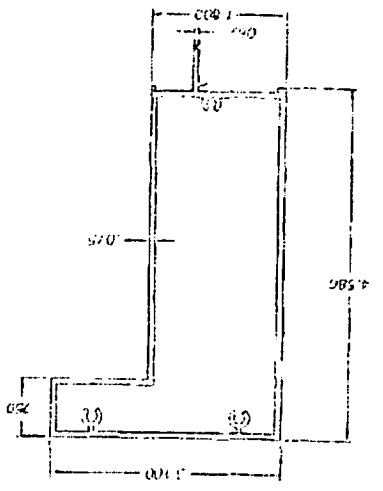
34) Sidelite Rear Adapter 6063-T6 ALUM



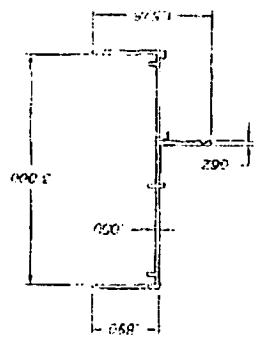
36) Sidelite Header 6063-T6 ALUM

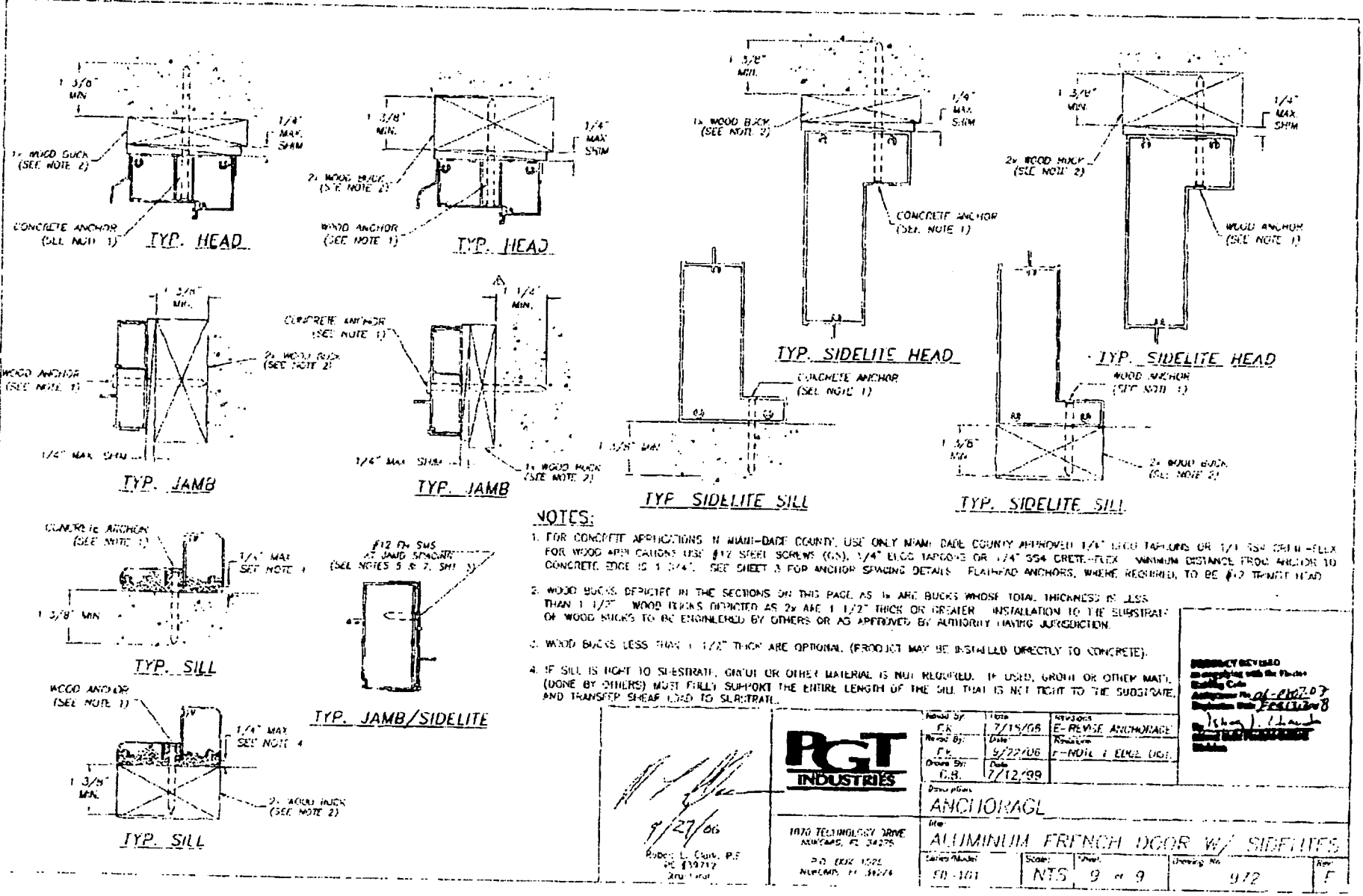


37) Sidelite Bottom Rail 6063-T6 ALUM



35) Sidelite Jam 6063-T6 ALUM





**NOTES:**

1. FOR CONCRETE APPLICATIONS IN MIAMI-DADE COUNTY, USE ONLY MIAMI-DADE COUNTY APPROVED 1/4" EGG TAPLONS OR 1/4" 554 DRETT-FLEX FOR WOOD APPLICATIONS USE #12 STEEL SCREWS (G.S.), 1/4" EGG TAPLONS OR 1/4" 554 DRETT-FLEX. MINIMUM DISTANCE FROM ANCHOR TO CONCRETE EDGE IS 1 3/4". SEE SHEET 3 FOR ANCHOR SPACING DETAILS. FLASHING ANCHORS, WHERE REQUIRED, TO BE #12 TRIPLE HEAD.
2. WOOD BUCKS DEPICTED IN THE SECTIONS ON THIS PAGE AS 1x ARE BUCKS WHOSE TOTAL THICKNESS IS LESS THAN 1 1/2". WOOD BUCKS DEPICTED AS 2x ARE 1 1/2" THICK OR GREATER. INSTALLATION TO THE SUBSTRATE OF WOOD BUCKS TO BE ENGINEERED BY OTHERS OR AS APPROVED BY AUTHORITY HAVING JURISDICTION.
3. WOOD BUCKS LESS THAN 1 1/2" THICK ARE OPTIONAL. (PRODUCT MAY BE INSTALLED DIRECTLY TO CONCRETE).
4. IF SILL IS TIGHT TO SUBSTRATE, GROUT OR OTHER MATERIAL IS NOT REQUIRED. IF USED, GROUT OR OTHER MAT'L (DONE BY OTHERS) MUST FULLY SUPPORT THE ENTIRE LENGTH OF THE SILL THAT IS NOT TIGHT TO THE SUBSTRATE, AND TRANSFER SHEAR LOAD TO SUBSTRATE.

**PROPERTY REVIEWED**  
 in compliance with the Florida  
 Building Code  
 Amendment No. 01-2007  
 Department Rule 600.008  
 By John J. Lynch  
 State Building Commissioner

 9/27/06 Robert L. Clark, P.E. P.O. Box 1522 North Palm Beach, FL 33420		Prepared by: C.K. Date: 7/15/08	Checked by: E. RYAN ARCHONAGE Date: 7/22/08
		Drawn by: C.K. Date: 7/12/09	Title: ANCHORAGE Project: ALUMINUM FRENCH DOOR W/ SIDELITES
Project Name: ANCHORAGE		Scale: NTS	Sheet: 9 of 9
Drawing No: 50-101		Drawing No: 912	Rev: 5

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 7-11, 2007

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<del>2638</del>	<del>McKinley</del>	<del>Window</del>	<del>FAIL</del>	<del></del>
4	48 Rio Vista Monterey Glass			INSPECTOR: <i>OM</i>
7748	Steck	Final	PASS	CLOSE
9	32 Fieldway Dr Advantage AC			INSPECTOR: <i>OM</i>
8642	Van Pooch	Plumbing	PASS	SOLDERED PIPES UNDER SLAB - OK.
6	8 Dragon Isl. Ct OB			INSPECTOR: <i>OM</i>
<del>8144</del>	<del>Lingamfelter</del>	<del>Final dock</del>	<del></del>	<del>NO WORK DONE</del>
1	<del>17 Main St OB</del>	<del>DO you want copy of permit? Renew permit</del>	<del></del>	<del>INSPECTOR: <i>OM</i></del>
2	Van Verno 15 S Ridgeway	Pool equipment pad	FAIL	NEW PAD IS IN SET BACK INVESTIGATE? See <i>OM</i>
8440	Tidikis	Final	FAIL	
3	12 Cranes Nest A&G Pool			INSPECTOR: <i>OM</i>
7113	DeBerard	Final-dock repair	<del></del>	NO WORK DONE ABANDONED INSPECTOR: <i>OM</i>
7	37 N River Rd Blue Water Marine			
OTHER				



**TOWN OF SEWALL'S POINT**

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

**CORRECTION NOTICE**

ADDRESS: 48 RID 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.

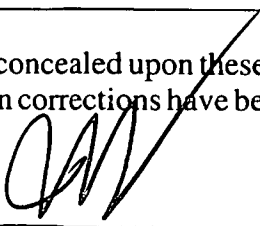
FINAL WINDOW

CRACK IN GLASS @ FRONT ENTRY

DRYWALL @ BOW WINDOW IS NOT SECURED

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: 7/11



INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 7-20, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
3608	Cushing	Final	PASS	CLOSE
1	102 Abbie Ct Coastal Shutters			INSPECTOR: <i>[Signature]</i>
8647	Tompeck	Final	PASS	CLOSE
3	20 Emarta Coastal Shutters			INSPECTOR: <i>[Signature]</i>
7682	Olsen	Final-dock repair	FAIL	
4	19 N River Rd O/B			INSPECTOR: <i>[Signature]</i>
8401	Olsen	Final-seawall	PASS	CLOSE
4	19 N River Rd 7681 (Olsen)			INSPECTOR: <i>[Signature]</i>
8636	McKenley	Final	PASS	CLOSE
2	48 Rio Vista Monterey Glass			INSPECTOR: <i>[Signature]</i>
8528	Masterpiece Sys. Smandalay Masterpiece Bldg.	Dry in	PASS	INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER:

**8730**

**TIKI HUT**





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:	8730	DATE ISSUED:	OCTOBER 8, 2007
		RENEWED 6/11/09 \$155 PD CASH <span style="float: right;">(initials)</span>	
SCOPE OF WORK:	TIKI HUT (GARDEN STRUCTURE)		
CONDITIONS :			
CONTRACTOR:	O/B		
PARCEL CONTROL NUMBER:	123841002000009204	SUBDIVISION	RIO VISTA - LOT 92
CONSTRUCTION ADDRESS:	48 RIO VISTA DR		
OWNER NAME:	MC KINLEY		
QUALIFIER:	O/B	CONTACT PHONE NUMBER:	463-7710

**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 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**

**RECEIVED**  
DATE: 9/16/08  
TOWN OF SEWALL'S POINT

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

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

Date: 9/16/08

OWNER/TITLEHOLDER NAME: JOSEPH MCKINLEY Phone (Day) 772-463-7710 (Fax) 772-463-7762

Job Site Address: 48 RIO VISTA DR. City: SEWALLS PT State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) RIO VISTA S/D LOT 92 Parcel Number: 12-38-41-002-000-00920-4

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

Scope of work: GARDEN STRUCTURE OUTDOOR TIKI HUT

**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: \$ 10,000-  
(Notice of Commencement required when over \$2500 prior to first inspection)  
**FOR ADDITIONS AND REMODELS IN FLOOD HAZARD AREAS ONLY:**  
SUBJECT PROPERTY IS LOCATED IN FLOOD ZONE: V \_\_\_\_\_ A9 \_\_\_\_\_ A8 \_\_\_\_\_ X \_\_\_\_\_  
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 Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Municipality License Number: \_\_\_\_\_

ARCHITECT JOSEPH MCCARTY Lic.#: \_\_\_\_\_ Phone Number: 772-287-6735

Street: 900 E. OSCEOLA ST. City: STUART State: FL Zip: 34994

ENGINEER \_\_\_\_\_ Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

AREA SQ. FOOTAGE (W/SEWER & ELECTRIC): Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ Screened Porch: \_\_\_\_\_

Carport: \_\_\_\_\_ Total Under Roof 300 sq ft Wood Deck: 300 sq ft Accessory Building: \_\_\_\_\_

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

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

THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ALL NULL AND VOID PERMITS. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

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

\*\*\*\*\*A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS\*\*\*\*\*  
OWNER OR AUTHORIZED AGENT SIGNATURE (required) CONTRACTOR SIGNATURE (required)

Joseph W. McKinley Jr.  
State of Florida, County of: Manatee  
This the 16th day of Sept, 2008  
by JOSEPH MCKINLEY who is personally  
known to me or produced R.D.H. Masil 499-61067-U  
as identification.

\_\_\_\_\_  
On State of Florida, County of: \_\_\_\_\_  
This the \_\_\_\_\_ day of \_\_\_\_\_, 2008  
by \_\_\_\_\_ who is personally  
known to me or produced \_\_\_\_\_  
as identification.

VALERIE MEYER  
Notary Public  
MY COMMISSION # DD552110  
EXPIRES: May 14, 2010  
My Commission Expires: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

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



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:	8730	DATE ISSUED:	OCTOBER 8, 2007
SCOPE OF WORK:	TIKI HUT (GARDEN STRUCTURE) <span style="float: right; font-family: cursive;">Renewed 6/11/09</span>		
CONDITIONS:			
CONTRACTOR:	O/B		
PARCEL CONTROL NUMBER:	123841002000009204	SUBDIVISION	RIO VISTA - LOT 92
CONSTRUCTION ADDRESS:	48 RIO VISTA DR		
OWNER NAME:	MC KINLEY		
QUALIFIER:	O/B	CONTACT PHONE NUMBER:	463-7710

**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**

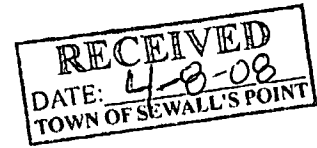
### REQUIRED INSPECTIONS

UNDERGROUND PLUMBING _____ UNDERGROUND 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.**

64-09  
 called owner - left mess - needs to be renewed will be in 1 wk -

April 8, 2008



Dear John,

This letter is in regards to the tiki hut at my property 48 Rio Vista Drive, Sewalls Point.

I realize I have a time restraint on the permit that was issued, although, my time has been spent primarily on a new job I undertook as of 3 months ago running a car dealership. Thus, my plans to begin this project have been delayed. I can tell you that I have a survey planned for tomorrow, April 9th, to make the set back and plans are set for Monday, April 14th to pour the concrete. Completion for the tiki hut should be no more than 3 months, hopefully less.

I am asking for an extension on the permit so that I may continue with my plans to finish this job.

I truly appreciate your time concerning this matter and I apologize for any inconvenience.

Very Sincerely,  
Joseph McKinley

*OK TO EXTEND PERMIT  
90 DAYS TO 7/8/08  
[Signature]  
4/8/08*



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

Site Provided by...  
 governmentmax.com T1.14

**Summary**

print [navigation icons]

Address  
 1 of 1

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
12-38-41-002-000-00920-4	48 RIO VISTA DR	27603	Address	0	1

**Summary**

**Property Location** 48 RIO VISTA DR  
**Tax District** 2200 Sewall's Point  
**Account #** 27603  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120250  
**Acres** 0.444

**Legal Description**  
**Property Information**  
 RIO VISTA S/D LOT 92

**Owner Information**

**Owner Information**  
 MCKINLEY, JOSEPH W JR &  
 ELIZABETH A

**Mail Information**

48 RIO VISTA DR  
 STUART FL 34996

**Assessment Info**

Front Ft. 0.00

**Market Land Value** \$290,000  
**Market Impr Value** \$262,500  
**Market Total Value** \$552,500

**Recent Sale**

**Sale Amount** \$730,000

**Sale Date** 5/22/2006  
**Book/Page** 2145 2181

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

*Legal disclaimer / Privacy Statement*

*Data updated on 08/26/2007*



INSTR # 1935165  
 OR BK 02145 PG 2181  
 Pgs 2181 - 2182; (2pgs)  
 RECORDED 05/22/2006 02:19:19 PM  
 MARSHA EWING  
 CLERK OF MARTIN COUNTY FLORIDA  
 DEED DOC TAX 5,110.00  
 RECORDED BY T Coeus (asst mgr)

Prepared by  
 Michelle Blaszkowiak, an employee of  
 First American Title Insurance Company  
 729 South Federal Highway, Suite 103  
 Stuart, Florida 34994  
 (772)286-0850

Return to: Grantee

File No.: 1071-1165246

**WARRANTY DEED**

This Indenture made on **May 19, 2006 A.D.**, by

**Elizabeth S. Dunn, a single woman**

whose address is: **475 SE Riverside Drive, Stuart, FL 34994**  
 hereinafter called the "grantor", to

\* **Joseph W. McKinley and Elizabeth A. McKinley, husband and wife**

**a/k/a Joseph W. McKinley, Jr.**  
 whose address is: **48 Rio Vista Drive, Stuart, FL 34996**  
 hereinafter called the "grantee":

(Which terms "Grantor" and "Grantee" shall include singular or plural, corporation or individual, and either sex, and shall include heirs, legal representatives, successors and assigns of the same)

**Witnesseth**, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in **Martin County, Florida**, to-wit:

**LOT 92, RIO VISTA SUBDIVISION, ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 6, PAGE 95, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.**

Parcel Identification Number: **12-38-41-002-000-00920.40000**

**Subject to** all reservations, covenants, conditions, restrictions and easements of record and to all applicable zoning ordinances and/or restrictions imposed by governmental authorities, if any.

**Together** with all the tenements, hereditaments and appurtenances thereto belonging or in any way appertaining.

**To Have and to Hold**, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31st of 2005.

In Witness Whereof, the grantor has hereunto set their hand(s) and seal(s) the day and year first above written.

Elizabeth S. Dunn  
Elizabeth S. Dunn

Signed, sealed and delivered in our presence:

Michelle Blazkowiak  
Witness Signature

Print Name: Michelle Blazkowiak

Susan McCauley  
Witness Signature

Print Name: Susan McCauley

State of FL

County of Martin

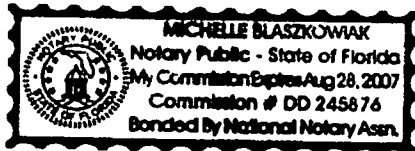
The Foregoing Instrument Was Acknowledged before me on May 19, 2006, by Elizabeth S. Dunn, a single woman who is/are personally known to me or who has/have produced a valid driver's license as identification.

Michelle Blazkowiak  
NOTARY PUBLIC

Michelle Blazkowiak

Notary Print Name

My Commission Expires: \_\_\_\_\_





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: JOSEPH W. MCKINLEY JR.  
 Site address of the proposed building work: 48 RID VISTA DR. STUART, FL 34996  
 Name of legal title owner of the address above: JOSEPH & ELIZABETH MCKINLEY  
 Describe the scope of work for the proposed new construction: OUTDOOR GARDEN STRUCTURE

Name of Architect of Record: JOSEPH MCCARTY Structural Engineer of Record: \_\_\_\_\_  
 Who will supervise the trade work to meet the applicable code? JOE MCCARTY - ARCHITECT  
 What provisions have you made for Liability and Property Damage Insurance? NA - EXISTING

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? NA

What previous Owner/Builder improvements have you done in the State of Florida?  
 Location: 2213 NE 33 AVE FT LAUD, FL 33305 Scope of Work Done: ENCLOSURE Year: '95  
 Location: 2630 NE 2014 ST FT LAUD, FL 33304 Scope of Work Done: ENCLOSURE Year: '97

What code books do you have available for reference? Building: NA  
 Electric: \_\_\_\_\_ Plumbing: \_\_\_\_\_ HVAC: \_\_\_\_\_  
 Other: \_\_\_\_\_

I have internet access and will view The Florida Building code at [www.floridabuilding.org](http://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? YES Lender? YES Attorney? YES

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. Joe (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. **OWNER/BUILDER APPLICANTS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT APPLICATION.**

**PHOTO ID IS REQUIRED FOR PERSON SUBMITTING PERMIT APPLICATION.**

PERSON'S NAME SUBMITTING APPLICATION JOSEPH MCKINLEY

ON THIS 6<sup>th</sup> DAY OF Sept, 2007

PROPERTY ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Joseph McKinley  
 SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 6<sup>th</sup> DAY OF Sept 2007

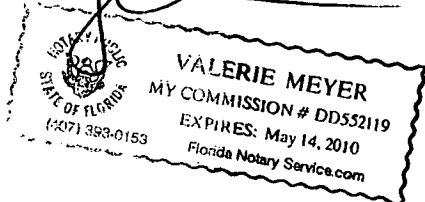
BY Joseph McKinley

PERSONALLY KNOWN \_\_\_\_\_

OR PRODUCED ID  \_\_\_\_\_

TYPE OF ID FDH# M054-499-61-047-U

Valerie Meyer  
 NOTARY SIGNATURE



NOTICE OF COMMENCEMENT

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

PERMIT #: \_\_\_\_\_ TAX FOLIO #: 12-3841-002-000-00920-4
STATE OF FLA. COUNTY OF MARTIN COUNTY

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 B/D LOT 92 - 48 RIO VISTA DR. STUART, FL 34996.

GENERAL DESCRIPTION OF IMPROVEMENT: OUTDOOR GARDEN STRUCTURE.

OWNER NAME: JOSEPH W. MCKINLEY JR
ADDRESS: 48 RIO VISTA DR STUART, FL 34996
PHONE NUMBER: (772) 463-7710 FAX NUMBER: (772) 463-7762

INTEREST IN PROPERTY: NA

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

CONTRACTOR: OWNER/BUILDER
ADDRESS: 48 RIO VISTA DR
PHONE NUMBER: (772) 463-7710 FAX NUMBER: (772) 463-7762

SURETY COMPANY (IF ANY):
ADDRESS:
PHONE NUMBER:
BOND AMOUNT:
STATE OF FLORIDA MARTIN COUNTY

LENDER/MORTGAGE COMPANY:
ADDRESS:
PHONE NUMBER:
MARSHA EWING, CLERK
D. DENUE D.C.
DATE 9-16-07

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

NAME:
ADDRESS:
PHONE NUMBER:
FAX NUMBER:

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

FLORIDA STATUTES: PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_
(EXPIRATION DATE 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 1, 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 OF OWNER OR OWNER'S AUTHORIZED AGENT: [Signature]
SIGNATORY'S TITLE/OFFICE: \_\_\_\_\_

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 6th DAY OF Sept, 2007

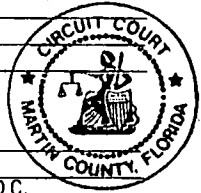
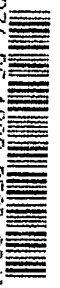
BY: JOSEPH MCKINLEY AS \_\_\_\_\_ FOR \_\_\_\_\_
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN \_\_\_\_\_ OR PRODUCED IDENTIFICATION [check]

TYPE OF IDENTIFICATION PRODUCED: FLID#mas4-499-61-067-0

Valerie Meyer
NOTARY SIGNATURE NOTARY SEAL
VALERIE MEYER
MY COMMISSION # DD552119
EXPIRES: May 14, 2010
Florida Notary Seal

INSTR # 2037084 DR BK 02276 PG 1802 RECD 09/06/2007 01:23:29 PM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S Phoenix





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

**CONTRACTOR, OWNER /BUILDER ASBESTOS NOTIFICATION STATEMENT**

Date: 9/10/07 Building Permit # \_\_\_\_\_

Site Address: 48 RID VISTA DR SEWALLS PT FL 34996.

**FBC 104.1.10 Asbestos.** The enforcing agency shall require each building permit for the demolition or renovation of an existing structure to contain an asbestos notification statement which indicates the owner's or operator's responsibility to comply with the provisions of s. 469.003 Florida Statutes and to notify the Department of Environmental Protection of her or his intentions to remove asbestos, when applicable, in accordance with state and federal law. 469.003 License required.--

(1) No person may conduct an asbestos survey, develop an operation and maintenance plan, or monitor and evaluate asbestos abatement unless trained and licensed as an asbestos consultant as required by this chapter.

(2)(a) No person may prepare asbestos abatement specifications unless trained and licensed as an asbestos consultant as required by this chapter.

(b) Any person engaged in the business of asbestos surveys prior to October 1, 1987, who has been certified by the Department of Labor and Employment Security as a certified asbestos surveyor, and who has complied with the training requirements of s. 469.013(1)(b), may provide survey services as described in s. 255.553(1), (2), and (3). The Department of Labor and Employment Security may, by rule, establish violations, disciplinary procedures, and penalties for certified asbestos surveyors.

(3) No person may conduct asbestos abatement work unless licensed by the department under this chapter as an asbestos contractor, except as otherwise provided in this chapter.

**FBC 105.3.6 Asbestos removal. (Owner /Builder Exemption)**

Moving, removal or disposal of asbestos-containing materials on a residential building where the owner occupies the building, the building is not for sale or lease, and the work is performed according to the owner-builder limitations provided in this paragraph. To qualify for exemption under this paragraph, an owner must personally appear and sign the building permit application. The permitting agency shall provide the person with a disclosure statement in substantially the following form: **Disclosure Statement:** State law requires asbestos abatement to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within 1 year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

\_\_\_\_ Contractor or \_\_\_\_ Owner/Builder Signature \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared \_\_\_\_\_ who is personally known to me or produced \_\_\_\_\_ as identification, and who did/did not take an oath.

Notary Public Signature \_\_\_\_\_

Seal



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

VERIFICATION OF CONTRACTOR PERMIT

BUILDING PERMIT NUMBER: \_\_\_\_\_

OWNERS NAME: JOSEPH MCKINLEY

CONSTRUCTION ADDRESS: 48 RIO VISTA DR. STUART, FL 34996.

PERMIT TYPE:  RESIDENTIAL \_\_\_\_\_ COMMERCIAL

\_\_\_\_\_ ELECTRIC

\_\_\_\_\_ ROOFING

\_\_\_\_\_ PLUMBING

\_\_\_\_\_ CONCRETE FORM AND PLACE

\_\_\_\_\_ HVAC

\_\_\_\_\_ MASONRY

\_\_\_\_\_ IRRIGATION

\_\_\_\_\_ CARPENTRY

\_\_\_\_\_ FUEL GAS

OTHER (SPECIFY) OUTSIDE GARDEN STRUCTURE.

FOR GAS OR ELECTRIC: TYPE OF SERVICE: \_\_\_\_\_ NEW SERVICE \_\_\_\_\_ EXISTING SERVICE \_\_\_\_\_ OTHER

SCOPE OF WORK: \_\_\_\_\_

VALUE OF CONSTRUCTION \$ \_\_\_\_\_

<p>_____ LOW VOLTAGE</p> <p>TYPE OF EQUIPMENT: _____ SECURITY _____ VACUUM _____ SOUND SYSTEM _____ LANDSCAPE _____ OTHER</p> <p>SCOPE OF WORK: _____ VALUE _____</p>
---

IN CONSIDERATION TO THE GRANTING OF THE ABOVE REQUESTED PERMIT, I DO HEREBY AGREE THAT I WILL, IN ALL RESPECTS, PERFORM THE WORK IN ACCORDANCE WITH THE APPROVED PLANS AND ALL APPLICABLE CODES.

\_\_\_\_\_  
 SIGNATURE OF LICENSED CONTRACTOR ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: \_\_\_\_\_

TELEPHONE NO: \_\_\_\_\_ FAX NO: \_\_\_\_\_  
PLEASE PRINT

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: \_\_\_\_\_

\*\* WORK CAN NOT BEGIN UNTIL THIS VERIFICATION IS COMPLETED AND SUBMITTED TO THE BUILDING DEPARTMENT. A PENALTY FEE WILL BE ASSESSED IF WORK IS STARTED PRIOR TO OBTAINING THIS PERMIT. \*\*\*\*\*

\*\*\*VERIFICATION OF PARCEL CONTROL NUMBER\*\*\*

OWNER'S FULL NAME AS STATED ON DEED: JOSEPH W MCKINLEY AND ELIZABETH A MCKINLEY

PARCEL CONTROL #: 12-38-41-002-000 00920-40000.

SUBDIVISION: RIO VISTA S/D LOT 92 LOT: 92 BLK: \_\_\_\_\_ PHASE: \_\_\_\_\_

SITE ADDRESS: 48 RIO VISTA DR., STUART, FL 34996.

SEND OR FAX TO: TOWN OF SEWALL'S BUILDING DEPARTMENT



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

## ADDITION/REMODEL APPLICATION CHECKLIST

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

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

- 1 COPY COMPLETED PERMIT APPLICATION INCLUDING:
- LEGAL DESCRIPTION
  - NOTARIZED SIGNATURE OF OWNER AND CONTRACTOR
  - PROOF OF OWNERSHIP (RECORDED WARRANTY DEED OR TAX BILL)
- NA 2 COPIES CURRENT SURVEYS (DATED 2006 OR NEWER) SHOWING THE FOLLOWING:  
\*\*ADDITIONS OR SUBSTANTIAL IMPROVEMENT(GREATER THAT 50% OF FAIR MARKET VALUE) ONLY\*\*
- CURRENT FLOOD ZONES PER LOCAL FLOOD INSURANCE RATE MAP (FIRM)
  - NGVD ELEVATIONS AT ALL CORNERS, MID POINTS AND AVERAGE CROWN OF ROAD
  - ALL EXISTING STRUCTURES ON PROPERTY AND PROPOSED SETBACKS FROM THE PROPERTY LINE TO ALL SIDES OF THE PROPOSED ADDITION.
  - ELEVATION OF PROPOSED ADDITION
  - DRAINAGE ARROWS AND PERVIOUS/IMPERVIOUS CALCS. TO SHOW PROPOSED STORMWATER RETENTION
- \*\*\*DO NOT SUBMIT PREVIOUSLY STAMPED SITE PLANS\*\*\*
- NA 2 COPIES SEPTIC TANK PERMIT, IF APPLICABLE (PLANS MUST BE STAMPED BY HEALTH DEPT.).  
(\*\*ADDITIONS W/ LIVING SPACE ONLY\*\*)
- 2 COPIES COMPLETE SETS OF PLANS WITH ALL REQUIRED PAGES SIGNED & SEALED BY A FLORIDA REG. ARCHITECT OR ENGINEER. MAXIMUM SIZE PLANS 24" X 36".
- NA 2 COPIES THE FLORIDA ENERGY CODE FOR THE "SOUTH" ZONE 8, FORM 600A-04R (VERSION 4.0 OR LATER) OR 600C-04R. MUST BE SIGNED & DATED.
- NA 2 COPIES MANUAL "J" (ADDITIONS OVER 600 S.F. OR ENCLOSED AREAS PREVIOUSLY UNCONDITIONED)
- NA 2 COPIES WINDLOAD CERTIFICATION SIGNED & SEALED BY A FLORIDA REG. ARCHITECT OR ENGINEER OR INDICATE ON THE PLANS. LEVEL 3 ALTERATIONS REQUIRES STRUCTURAL ANALYSIS BY ARCH/ENG
- NA 2 COPIES PRODUCT APPROVAL CHECKLIST SIGNED & SEALED BY THE ARCHITECT OR ENGINEER OR INDICATE ON THE PLANS.
- 1 COPY NOTICE OF COMMENCEMENT, IF VALUE IS OVER \$2500.00. MUST BE SUBMITTED PRIOR TO THE FIRST INSPECTION.
- 1 COPY ASBESTOS NOTIFICATION STATEMENT

### SPECIFICATIONS AND PRODUCT APPROVALS

- SPECS. FOR ALL EXTERIOR WINDOWS, DOORS, GARAGE DOORS, SHUTTERS, SIDING, ROOF COVERING AND SIMILAR ENVELOPE ELEMENTS MUST BE ON-SITE FOR INSPECTIONS. THESE PRODUCTS MUST BE TESTED BY AN APPROVED TESTING LAB AND DESIGN PRESSURES STATED. MUST HAVE ARCHITECT/ENGINEER OF RECORD REVIEW, TO VERIFY THAT IT MEETS DESIGN.
- ROOF COVERING SPECIFICATIONS/DADE COUNTY OR FLORIDA APPROVAL MUST INCLUDE MANUFACTURER/PRODUCT NAME AND TEST NUMBER.
- SHUTTERS MUST BE DESIGNED IN ACCORDANCE WITH ASCE 7-02 AND SSTFD-12. SPECIFICATIONS MUST BE HIGHLIGHTED AS TO WHICH MOUNT, DESIGN PRESSURE, FASTENER, AND FASTENER SPACING THAT WILL BE USED.

**IMPACT PROTECTION FOR ALL EXTERIOR GLAZED OPENINGS REQUIRED PER  
F.B.C. 2004 W/2006 REVISIONS 1609.1.4 (IMPACT RESISTANT GLASS OR APPROVED SHUTTERS)**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  ~~Tues~~  Fri 5-27, 2008 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<del>8800</del>	<del>Geller</del>	<del>stair column</del>		
	10 Palmetto Dr Ken Wendell	Cancel		
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8884	Harte	Final		CLOSE
1	3 E. High Pt Elec County Mike	GENERATION	PASS	
				INSPECTOR: <i>A</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8848	NOHEIGL	TIE BEAM.		
2	26 W. HIGH PT. MONTALTO CONST.	COLUMNS & BEAM	PASS	
				INSPECTOR: <i>A</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<del>8130</del>	<del>MEK...</del>	<del>...</del>		
3	48 Kw Vista OB			
				INSPECTOR: <i>A</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection:  Mon  Tue  Wed  **Thur**  Fri **1-7-10** Page **1** of **1**



PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9191	<del>FRANKTON</del>			
2PM	<del>102 N. SPY RD</del> RESORT.	BOND		<i>Reschedule Friday</i>
8730	<del>McKendry</del>	<del>Time</del>		
	48 Rio Vista DR			
	OB			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR





P/N: 8730

**TOWN OF SEWALL'S POINT**  
One South Sewall's Point Road  
Sewall's Point, Florida 34996  
(772) 287-2455

**CORRECTION NOTICE**

ADDRESS: 48 RIO VISTA DR

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.

- FAIL - 1. PURLINS NOT BOLTED
- PER PLANS (1/2" THRU BOLT TYPE)
- 2. POSTS ARE MORE THAN 1 1/2" OUT  
OF PLUMB.
- 3. STAIN SPACERS AND FORM USED  
FOR STRUCTURAL SUPPORT
- 4. ROOF BEAMS ARE NOT  
THRU BOLTED

THIS STRUCTURE WILL REQUIRE  
INSPECTION & APPROVAL BY AGEN. OF RECORD

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: 1-7-10

  
INSPECTOR

**DO NOT REMOVE THIS TAG**

**Joseph P. McCarty, Architect, Inc.**

900 East Osceola Street

Stuart, Florida, 34994

772-287-6735 fax: 772-287-4618

RECEIVED  
1-21-10

---

DPR Registration Number 9639

January 20, 2010

Sewall's Point Building Department

One South Sewall's Point Road

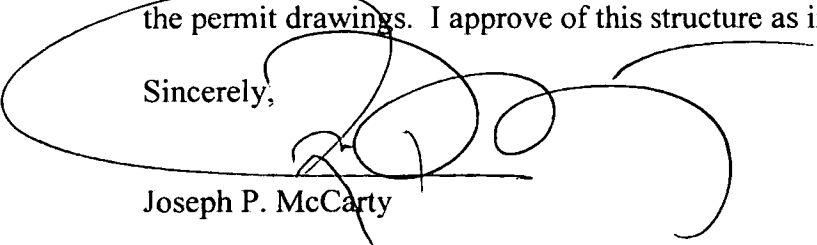
Sewall's Point, Florida 34996

RE: Garden Structure – 48 Rio Vista

To whom it may concern:

Please be advised that I have inspected this structure on this date and certify that it was built per the permit drawings. I approve of this structure as installed.

Sincerely,



Joseph P. McCarty



TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # 191

Date Issued 6/11/86

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

Owner V Burkard Address 391 SW SOUTH RIVER PT Phone \_\_\_\_\_

Contractor Herrlin Deinaud per Address 499 SE Seville Phone \_\_\_\_\_

Number of trees to be removed (list kinds of trees) 5

5 trees per attached drawing

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

Number of trees to be replaced within 30 days (list kinds of trees) NONE

Permit Fee: \$ 9.00 (\$5. for first tree plus \$1. for each additional tree - not to exceed \$25.)

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

Plans approved as submitted 6/10/86 Plans approved as marked 6/11/86

Permit good for one year. Fee for renewal of expired permit \$5.

Signature of applicant \_\_\_\_\_ Date submitted 6/10/86

Approved by Building Inspector GC Stuebel Date 6/5/86

Approved by Building Commissioner GC Stuebel Date 6/5/86

Completed \_\_\_\_\_  
Date \_\_\_\_\_ Checked by \_\_\_\_\_

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

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

HERRLIN - DEINARD  
DEVELOPMENT COMPANY

BOX 897 STUART FLORIDA 33495  
TELEPHONE (305) 287-6000

May 22, 1986

Mr. Joeseeph A. Mazzucca  
Acting Building Inspector  
Town of Sewalls Point  
1 S. Sewall's Point Road  
Stuart, Fla. 33494

Re: Lot 92  
Rio Vista Subdivision  
Burkard

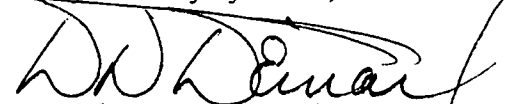
Dear Mr. Mazzucca:

Because of the overgrown state of the above referenced,  
we wish approval to: property

1. Clear and remove the dense undergrowth on this site to identify trees for removal and preservation.
2. Remove undersirable trees while conducting item #1 above.
3. Accomplish these tasks without a permit, to a point in time when we can complete and file a permit.

If the above is correct we shall begin immediately. If not, please notify us as soon as possible. If there are any additions or deletions, please contact us.

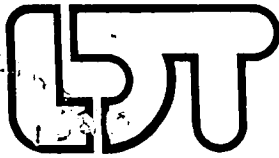
Very truly yours,



David N. Deinard  
HERRLIN-DEINARD DEVELOPMENT CO.

er

cc: Jon Burkard



#191

## LANDesign Team

J. McELHENY AND ASSOCIATES, INC.  
LANDSCAPE ARCHITECTS AND LAND PLANNERS

10 CENTRAL PARK WAY, SUITE 310, STUART, FL 33494 • (305) 286-0452  
1001 ALTERNATE A1A, JUPITER, FL 33458 • (305) 744-0031

Mr. Dale Brown, Building Inspector  
Town of Sewalls Point  
1 S Sewalls Point Road  
Stuart, FL 33494

June 9, 1986

RE: Burkard Lot 12 Rio Vista

Dear Mr. Brown,

This memo is to certify as-per your code, Article IV, Sec. 11-52,  
(b) the Pepper, Australian Pine and Stragler Fig have been removed  
from the site.

Should any suckers or the like reappear the owner will remove them  
to conform to this ordinance.

Also, as previously determined, please find enclosed a check for \$9.00  
for the permit.

If you have any questions please do not hesitate to contact me.

Very truly yours,  
LANDesign Team/J.R. McElheny & Associates, Inc.

  
James R. McElheny, President

TOWN OF SEWALL'S POINT, FLORIDA

Date April 25 2005 TREE REMOVAL PERMIT No 2470

APPLIED FOR BY PETERSEN (Contractor or Owner)

Owner 49 RIO VISTA

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

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

No. Of Trees: REMOVE 1 Flowering

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

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

REMARKS \_\_\_\_\_

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

Signed [Signature] FEE \$ 0  
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 for drawing or site plan]

PROJECT DESCRIPTION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
REMARKS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TOWN OF SEWALL'S POINT, FLORIDA

Date MAY 24 1/2 2004 TREE REMOVAL PERMIT No 2264

APPLIED FOR BY BOOYSEN (Contractor or Owner)

Owner 48 RIO VISTA DR

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

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

No. Of Trees: REMOVE 1 Gumbo Limbo

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

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

REMARKS \_\_\_\_\_

FEE \$ 15.00

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

Signed, Gene Simmons Town Clerk

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Large empty rectangular box for drawing or site plan.

PROJECT DESCRIPTION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REMARKS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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

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

**No permit required for:**

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

**Permit Fee:**

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

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

**Application procedures:**

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

Owner John Booyen Address 48 Rio Vista Drive Phone 214 1930

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

No. of Trees: REMOVE 1 Type: Gumbo limbo

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

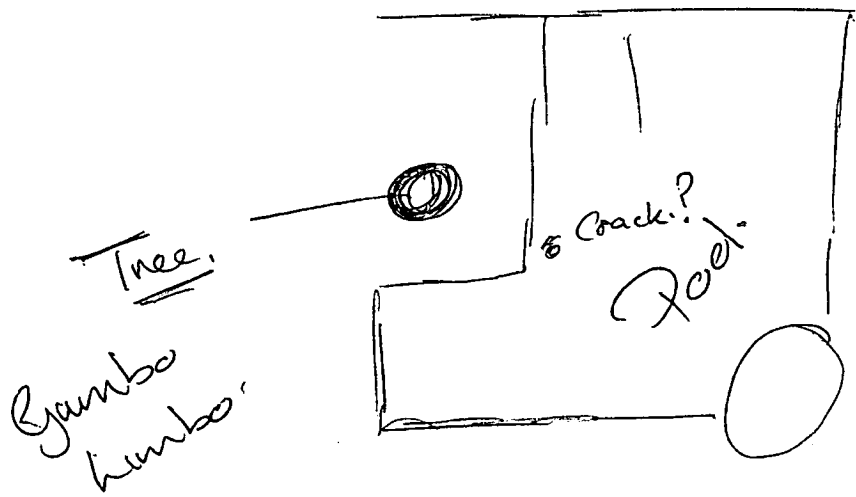
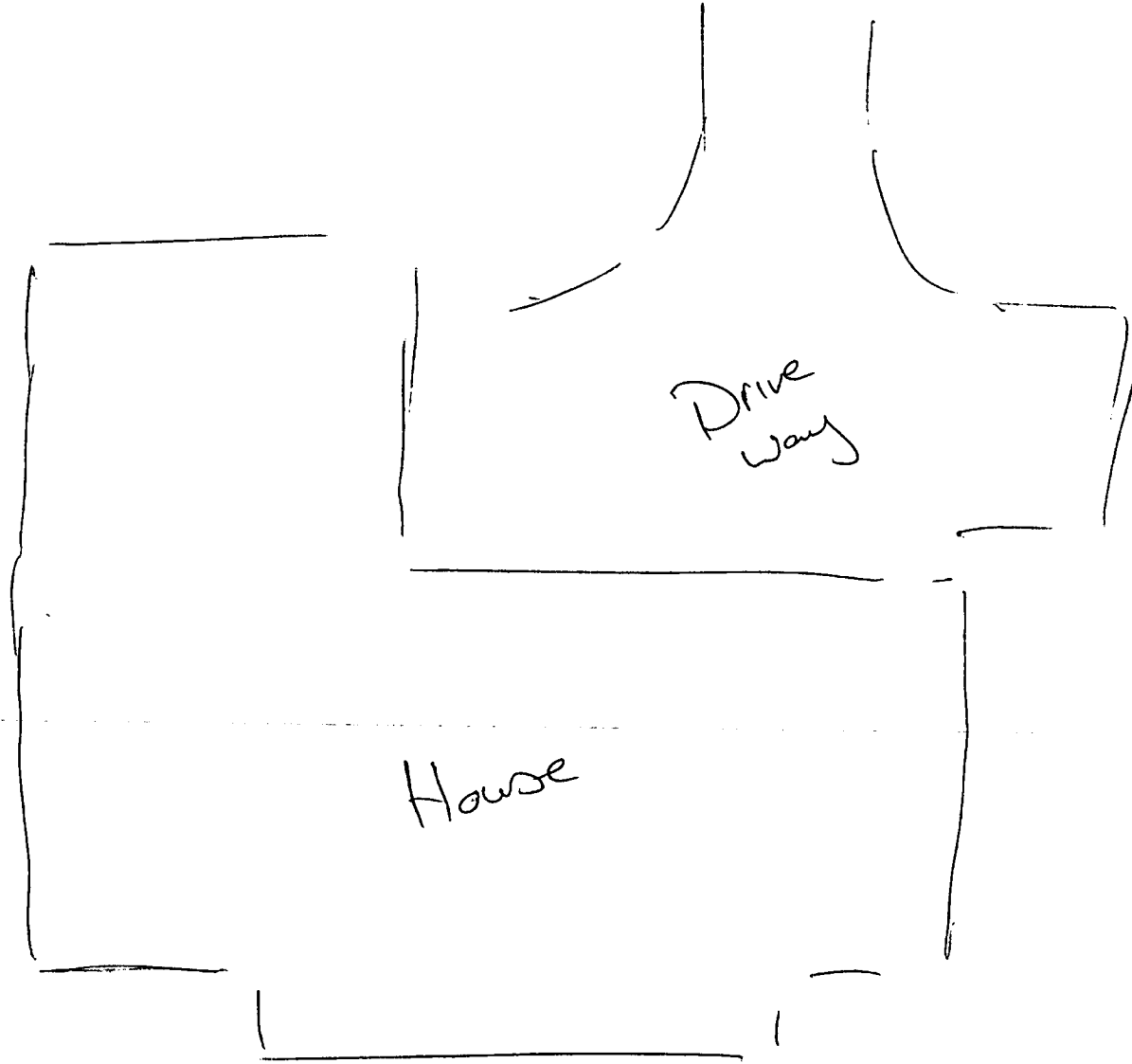
No. of Trees: REPLACE \_\_\_\_\_ WITHIN 30 DAYS Type: \_\_\_\_\_

Written statement giving reasons: Hazard to Pool, pool seems to be cracking?

Signature of Applicant [Signature] Date 20 May 2004

Approved by Building Inspector: [Signature] Date 5/21 Fee: -15-

Plans approved as submitted REPLACE w/ COMPARABLE TREE. Plans approved as revised/marked: MUST



**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.

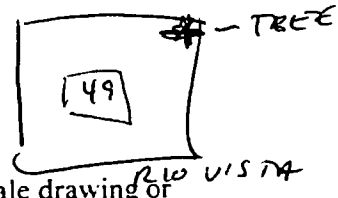
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1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, 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, Marberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

**Application procedures:**

1. Fill out application information below to include:
  - a. applicant information
  - b. written statement giving reasons for removal, relocation, or replacement if necessary
  - c. for a new S.F.R., a site plan which shall include the dimensional location on a survey, scale drawing of 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 IVUE PETERSEN Address 49 RIO VISTA Phone \_\_\_\_\_

Contractor ALAN MORRIS Address 2163 PINE RIDGE ST Phone 215-0074

No. of Trees: REMOVE 1 Type: FLOWERING TYPE

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

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

Written statement giving reasons: IN WAY OF FENCE/WALL ALREADY PERMITTED - LEFT REAR CORNER

Signature of Property Owner [Signature] Date 4/22/05

Approved by Building Inspector: [Signature] Date 4/25 Fee: 0

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

**11228**

**A/C Change out**

# Town of Sewall's Point

## BUILDING PERMIT APPLICATION

Date: 3/30/15

Permit Number: 11228

OWNER/LESSEE NAME: Joseph & Elizabeth McKinley Phone (Day) (561) 644-8589 (Fax) \_\_\_\_\_  
 Job Site Address: 48 Rio Vista Drive City: Stuart State: FL Zip: 34996  
 Legal Description RIO VISTA S/D LOT 92 Parcel Control Number: 12-38-41-002-000-00920-4 27603  
 Fee Simple Holder Name: n/a Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**\*SCOPE OF WORK (PLEASE BE SPECIFIC):** Replace two 2.0 ton a/c systems, like for like, equip. only

**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: \$ 5400.00  
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
 Is subject property located in flood hazard area? VE10  AE9  AE8   
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
 Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
 (Fair Market Value of the Primary Structure only, Minus the land value)  
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

**Construction Company:** Jack Frost AC of South Florida, Inc. Phone: (772) 336-9030 Fax: (772) 336-9032

Qualifiers name: Jacques C. Stiegelman Street: 1716 SW Biltmore St. City: Port St. Lucie State: FL Zip: 34984

State License Number: CAC1815725 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_

**LOCAL CONTACT:** Kristi Parsons Phone Number: (772) 336-9030

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

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

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

**WARNINGS TO OWNERS AND CONTRACTORS:**

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

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

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

**OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:**  
Joseph W. McKinley  
 State of Florida, County of: Martin  
 On this the 30th day of March, 20 15  
 by Joseph McKinley who is personally known to me or produced FL ID# M254499-61-067-0  
 As identification: Kristina R. Parsons  
 Notary Public  
 My Commission Expires: 04/23/19

**CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:**  
Jacques C. Stiegelman  
 State of Florida, County of: St. Lucie  
 On this the 27th day of March, 20 15  
 by Jacques C. Stiegelman who is personally known to me or produced N/A  
 As identification: Kristina R. Parsons  
 Notary Public  
 My Commission Expires: 04/23/2017

**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!**

EXP. 4/23/2017

NOTARY PUBLIC

STATE OF FLORIDA

Comm# FF007935

Expires 4/23/2017

KRISTINA R. PARSONS

NOTARY PUBLIC

STATE OF FLORIDA

Comm# FF007935

Expires 4/23/2017

1152

1152



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

**Air Conditioning Change out Affidavit**

**SYSTEM #1**

Residential  Commercial \_\_\_\_\_

Package Unit  Yes  No (Use Condenser side of form below for equipment listing)

Duct Replacement  Yes  No - Refrigerant line replacement  Yes  No

Flushing Existing Refrigerant lines  Yes  No - Adding Refrigerant Drier  Yes  No PROVIDED BY MANUFACTURER

Rooftop A/C Stand Installation  Yes  No - Curb Installation  Yes  No

Smoke Detector in Supply (over 2000 CFM)  Yes  No

**One form required for each A/C system installed**

**REPLACEMENT SYSTEM COMPONENTS**

**Air handler:** Mfg: TRANE Model# 4FWHF024A  
 Volts 240 CFM's \_\_\_\_\_ Heat Strip 5 Kw \_\_\_\_\_  
 Min. Circuit Amps 29 Wire gauge 10  
 Max. Breaker size 30 Min. Breaker size 29  
 Ref. line size: Liquid 3/8 Suction 3/4  
 Refrigerant type R410A  
 Location: Existing  New \_\_\_\_\_  
 Attic/Garage/Closet (specify) CLOSET  
 Access: INSIDE

**Condenser:** Mfg TRANE Model# 4TTR6024B1  
 Volts 240 SEER/EER 16.0 BTU's 21400  
 Min. Circuit Amps 9 Wire gauge 10  
 Max. Breaker size 15 Min. Breaker size 9  
 Ref. line size: Liquid 3/8 Suction 3/4  
 Refrigerant type R410A  
 Location: Existing  New \_\_\_\_\_  
 Left/Right/Rear/Front/Roof RIGHT  
 Condensate Location RIGHT

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

**EXISTING SYSTEM COMPONENTS**

**Air handler:** Mfg: RHEEM Model# REAB1005  
 Volts 240 CFM's \_\_\_\_\_ Heat Strip 5 Kw \_\_\_\_\_  
 Min. Circuit Amps \_\_\_\_\_ Wire gauge 10  
 Max. Breaker size 30 Min. Breaker size \_\_\_\_\_  
 Ref. line size: Liquid 3/8 Suction 3/4  
 Refrigerant type R22  
 Location: Ext.  New \_\_\_\_\_  
 Attic/Garage/Closet (specify) CLOSET  
 Access: INSIDE

**Condenser:** Mfg RHEEM Model# RAKA024  
 Volts 240 SEER/EER UNKNOWN BTU's 24000  
 Min. Circuit Amps \_\_\_\_\_ Wire gauge 10  
 Max. Breaker size 15 Min. Breaker size \_\_\_\_\_  
 Ref. line size: Liquid 3/8 Suction 3/4  
 Refrigerant type R22  
 Location: Ext.  New \_\_\_\_\_  
 Left/Right/Rear/Front/Roof RIGHT  
 Condensate Location OUTSIDE

**Certification:**

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

\_\_\_\_\_  
 Signature

~03/27/15  
 Date





## Features and Benefits

---

- **CLIMATUFF®** compressor
- Efficiency up to **17.0 SEER**
- All aluminum **SPINE FIN™** coil
- **WEATHERGUARD™** fasteners
- **QUICK-SESS™** cabinet, service access and refrigerant connections with full coil protection
- **DURATUFF™** base, fast complete drain, weatherproof
- **COMFORT-R™** mode approved
- Glossy corrosion resistant finish
- Internal compressor high/low pressure & temperature protection
- 018, 024 & 030 ship with start kit
- Liquid line filter/drier
- Tarpaulin gray cabinet with anthracite gray badge and cap
- High pressure switch
- Service valve cover
- R-410A refrigerant
- S.E.E.T. design testing
- 100% line run test
- Low ambient cooling to 30°F with AY28X079
- Low ambient cooling to 55°F as shipped
- **Extended warranties available**





# General Data

## Product Specifications

Model No. ①	4TTR6018B1000A	4TTR6024B1000A	4TTR6030B1000A	4TTR6036B1000A
Electrical Data V/Ph/Hz ②	208/230/1/60	208/230/1/60	208/230/1/60	208/230/1/60
Min Cir Ampacity	9	9	12	19
Max Fuse Size (Amps)	15	15	20	30
Compressors	CLIMATUFF®	CLIMATUFF®	CLIMATUFF®	CLIMATUFF® - SCROLL
No. Used - No. Stages	1-1	1-1	1-1	1-1
RL AMPS - LR AMPS	6.4 - 38.6	6.8 - 38.6	9.1 - 57.8	14.1 - 77
Outdoor Fan FL Amps	0.74	0.74	0.93	0.93
Fan HP	1/8	1/8	1/5	1/5
Fan Dia (inches)	23	23	27.6	27.6
Coil	Spine Fin™	Spine Fin™	Spine Fin™	Spine Fin™
Refrigerant R-410A	5/2-LB/OZ	6/3-LB/OZ	7/0-LB/OZ	7/4-LB/OZ
Line Size - (in.) O.D. Gas ③	5/8	3/4	3/4	3/4
Line Size - (in.) O.D. Liquid ③	3/8	3/8	3/8	3/8
Dimensions H x W x D (Crated)	34 x 30.1 x 33	34 x 30.1 x 33	38.4 x 35.1 x 38.7	42.4 x 35.1 x 38.7
Weight - Shipping	200	201	234	228
Weight - Net	173	174	201	193
Start Components	YES	YES	YES	NO
Sound Enclosure	YES	YES	YES	YES
Compressor Sump Heat	NO	NO	NO	NO
<b>Optional Accessories: ④</b>				
Anti-short Cycle Timer	TAYASCT501A	TAYASCT501A	TAYASCT501A	TAYASCT501A
Evaporator Defrost Control A/C	AY28X079	AY28X079	AY28X079	AY28X079
Rubber Isolator Kit	BAYISLT101	BAYISLT101	BAYISLT101	BAYISLT101
Crank Case Heater Kit	BAYCCHT300A	BAYCCHT300A	BAYCCHT300A	BAYCCHT302A
Hard Start Kit Scroll				BAYKSKT263
Extreme Condition Mounting Kit	BAYECMT023	BAYECMT023	BAYECMT004	BAYECMT004
Snow Leg - Base & Cap 4" High	BAYLEGS002	BAYLEGS002	BAYLEGS002	BAYLEGS002
Snow Leg - 4" Extension	BAYLEGS003	BAYLEGS003	BAYLEGS003	BAYLEGS003
Seacoast Kit	BAYSEAC001	BAYSEAC001	BAYSEAC001	BAYSEAC001
Refrigerant Lineset ⑤	TAYREFLN950	TAYREFLN7*	TAYREFLN7*	TAYREFLN7*

① Certified in accordance with the Air-Source Unitary Heat Pump Equipment certification program which is based on AHRI Standard 210/240.

② Calculated in accordance with N.E.C. Only use HACR circuit breakers or fuses.

③ Standard line lengths - 80'. Standard lift - 60' Suction and Liquid line.

For Greater lengths and lifts refer to refrigerant piping software Pub# 32-3312-01. (\*denotes latest revision)

④ For accessory description and usage, see page 5.

⑤ \* = 15, 20, 25, 30, 40 and 50 foot lineset available.

### Sound Power Level

Model	A-Weighted Sound Power Level [dB(A)]	Full Octave Sound Power [dB]							
		63 Hz	125 Hz	250 Hz	500 Hz	1000 Hz	2000 Hz	4000 Hz	8000 Hz
4TTR6018B1	75	51	61	65	74	74	72	61	51
4TTR6024B1	75	49	62	66	74	74	69	62	54
4TTR6030B1	75	54	69	72	78	76	72	64	54
4TTR6036B1	75	49	68	73	76	74	70	62	51
4TTR6042B1	75	49	69	74	77	75	70	62	51
4TTR6048B1	75	49	69	74	77	75	70	62	51
4TTR6049B1	74	70	70	65	64	62	56	49	42
4TTR6060B1	75	49	69	74	77	75	70	62	51
4TTR6061C1	75	68	70	67	68	64	56	53	48

Note: Rated in accordance with AHRI Standard 270-2008

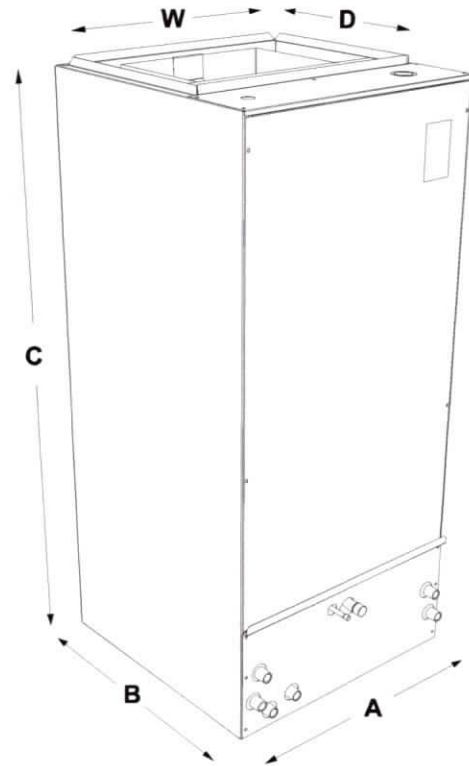
## Section 6. Dimensional Data

### 4FWHF Air Handlers

#### **CAUTION**

Coil is pressurized. Release pressure at service port before opening tube.

- **3/8" Liquid Line**  
3/8" coupler is supplied.
- **3/4" Suction Line (1.5-3 Tons)**
- 7/8" Suction Line (3.5-5 Tons)
- 3/4" NPT Primary and Secondary Drain connections are standard.



PRODUCT DIMENSIONS						SHIP WEIGHT LBS.
Air Handler Model	Cabinet			Plenum		
	Width A	Depth B	Height C	Width W	Depth D	
4FWHF024A1000B	19.75	21.50	45.00	18.25	15.0	73
4FWHF025A1000B	19.75	21.50	45.00	18.25	15.0	73
4FWHF030A1000B	19.75	21.50	45.00	18.25	15.0	73
4FWHF036A1000B	19.75	21.50	45.00	18.25	15.0	73
4FWHF042A1000C	22.00	22.75	51.00	20.75	15.5	94
4FWHF048A1000C	22.00	22.75	51.00	20.75	15.5	94
4FWHF060A1000C	22.00	22.75	51.00	20.75	15.5	94
4FWHF061A1000C	22.00	22.75	51.00	20.75	15.5	94

All dimensions are in inches.

6200 Troup Highway  
Tyler, TX 75707  
www.trane.com  
www.americanstandardair.com



The manufacturer has a policy of continuous product and product data improvement and it reserves the right to change design and specifications without notice.

© Trane U.S. Inc. 2013

## Performance and Electrical Data – 4FWHF024,025

AIR FLOW PERFORMANCE										
4FWHF024, 4FWHF025										
EXTERNAL STATIC (in w.g)	AIRFLOW									
	Speed Taps - 230 VOLTS					Speed Taps - 208 VOLTS				
	1	2	3*	4**	5	1	2	3*	4**	5
0.1	680	730	820	910	1010	680	730	820	900	1000
0.2	610	690	790	870	970	610	690	780	860	970
0.3	550	650	750	830	940	540	650	740	830	930
0.4	490	610	710	800	910	490	610	700	790	900
0.5	-	570	670	760	870	-	570	670	750	870
0.6	-	530	630	730	840	-	530	630	720	840
0.7	-	-	-	-	810	-	-	-	-	810
0.8	-	-	-	-	780	-	-	-	-	780
0.9	-	-	-	-	750	-	-	-	-	750

### NOTES:

1. Values are with dry coil, filter in place, and no heaters.
2. CFM Correction for wet coil = 4%
3. Cool Speed is factory set at Tap 4\*\*
4. Heat Speed factory set at Tap 3\*

MINIMUM HEATER AIRFLOW CFM		
4FWHF024, 4FWHF025		
Heater	Minimum Heat Speed Tap	
	With Heat Pump	Without Heat Pump
BAYHTR**1403SL0	Tap 1	Tap 1
BAYHTR**1405SL0	Tap 1	Tap 1
BAYHTR**1406SL0	Tap 1	Tap 1
BAYHTR**1408SL0	Tap 2	Tap 1
BAYHTR**1410SL0	Tap 3	Tap 2

ELECTRICAL DATA											
4FWHF024 / 4FWHF025											
Heater Model No	No. of Cir- cuits	240 Volt					208 Volt				
		Capacity		Heater Amps per Circuit	Minimum Circuit Ampacity	Maximum Overload Protection	Capacity		Heater Amps per Circuit	Minimum Circuit Ampacity	Maximum Overload Protection
		kW	BTUH				kW	BTUH			
No Heater					4	15				4	15
BAYHTR**1403SL0	1	3	10200	12.5	19	20	2.25	7700	10.8	17	20
BAYHTR**1405SL0	1	4.8	16400	20	29	30	3.6	12300	17.3	25	25
BAYHTR**1406SL0	1	6	20500	25	35	35	4.5	15400	21.6	31	35
BAYHTR**1408SL0	1	8	27300	33.3	45	45	6	20500	28.8	40	40
BAYHTR**1410SL0	1	9.6	32800	40	54	60	7.2	24600	34.6	47	50

Note: Heaters with two circuits are displayed as Circuit 1/Circuit 2 (Minimum Circuit Ampacity for Circuit 1 includes Blower Motor Amp)

\*\* = DS, BK, or Blank (DS = Pull Disconnect, BK = Circuit Breaker Disconnect, Blank = terminal block)



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2014.

# Certificate of Product Ratings

AHRI Certified Reference Number: 6179499

Date: 3/24/2015

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

Outdoor Unit Model Number: 4TTR6024B1

Manufacturer: TRANE

Indoor Unit Model Number: 4FWH(A,F)024A\*

Manufacturer: TRANE U.S. INC.

Trade/Brand name: TRANE

Series name:

Manufacturer responsible for the rating of this system combination is TRANE U.S. INC.

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

Cooling Capacity (Btuh):	21400
EER Rating (Cooling):	13.50
SEER Rating (Cooling):	16.00
IEER Rating (Cooling):	



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

#### DISCLAIMER

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

#### TERMS AND CONDITIONS

This Certificate and its contents are proprietary products of AHRI. This Certificate shall only be used for individual, personal and confidential reference purposes. The contents of this Certificate may not, in whole or in part, be reproduced; copied; disseminated; entered into a computer database; or otherwise utilized, in any form or manner or by any means, except for the user's individual, personal and confidential reference.

#### CERTIFICATE VERIFICATION

The information for the model cited on this certificate can be verified at [www.ahrirectory.org](http://www.ahrirectory.org), click on "Verify Certificate" link and enter the AHRI Certified Reference Number and the date on which the certificate was issued, which is listed above, and the Certificate No., which is listed at bottom right.

© 2014 Air-Conditioning, Heating, and Refrigeration Institute

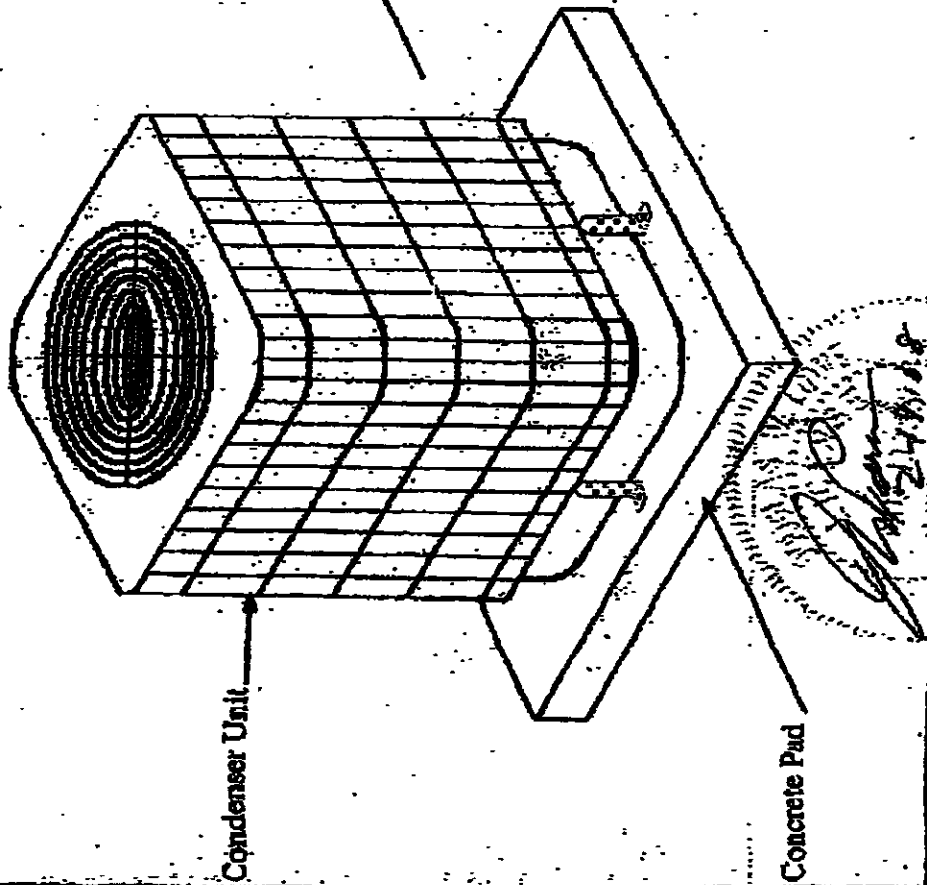


we make life better™

CERTIFICATE NO.:

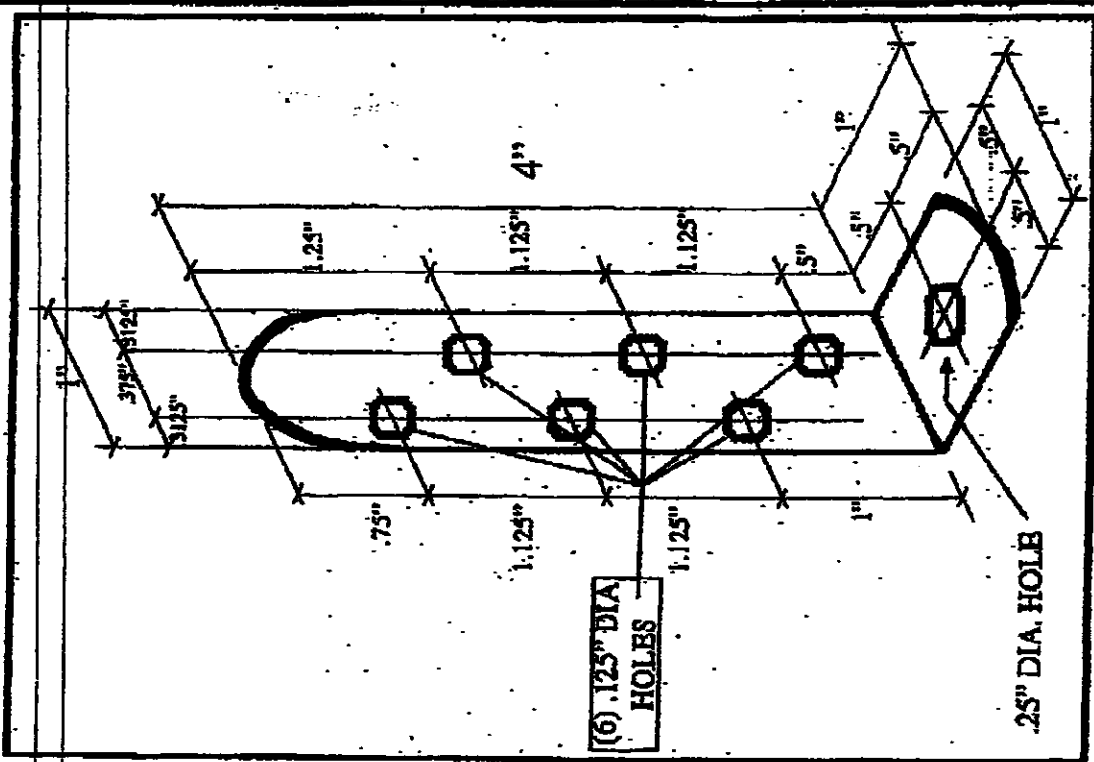
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**#771 (4 pk.) / #772 (100 pk.) Anchor CHB**



Condenser Unit

Concrete Pad



Metal thickness = 16 gauge

<p><b>The Metal Shop</b>          1139 Eldridge Street          Clearwater          FL 33755</p> <p>Ph: (727) 441-2492          Fax: (727) 442-8495          Web: www.metalshop.org</p>	<p><b>Consulting Engineer:</b>          Douglas W. Lowe, P.E.          FLA # 13555          1206 Millennium Parkway          Brandon, FL 33511</p>	<p><b>Revision Date:</b>          2/14/08</p>	<p><b>Drawn by:</b>          K.P.R.</p>	<p><b>Page:</b>          1 of 1</p>
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Scale - Not to scale

# THE METAL SHOP

Custom Metal Manufacturer

## ANCHOR CLIPS Installer's Guide

Consulting Engineer:

*[Signature]*  
4/17/89

Douglas W. Lowe, P.E.  
FLA# 13355  
1206 Millennium Parkway  
Brandon, FL 33511

**WARNING: HAZARDOUS VOLTAGE - DISCONNECT POWER BEFORE SERVICING**

### PART NUMBER

#771 (4 pk)  
#772 (100 box)  
#770 (4 pk including hardware)

### CONSTRUCTION

16 gauge galvanized steel, G-90 rated for corrosion coastal applications.

### PACKAGING DETAILS

All anchor clips are supplied in per package quantities described above.

### INSTALLATION

Minimum of 4 clips required per condenser unit.  
Minimum of 2 #14 x 3/4" screws with neoprene washer required to fasten clip to condenser unit.

1/4" x 1 3/4" Tapcon screws required to fasten clip to condenser pad.

Locate the anchor clips to fit comfortably between condenser unit and pad.

Adjust clip accordingly to fit on condenser unit and screw together, at the same time ensuring that the base of the clip is still in contact with the pad.

All hardware must be fastened prior to connecting refrigerant lines and electrical power to the unit.

Suitable for ground isolated units.

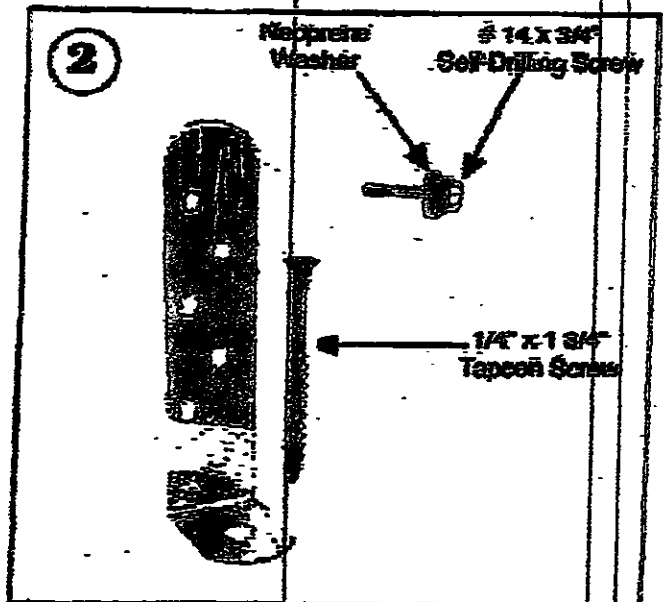
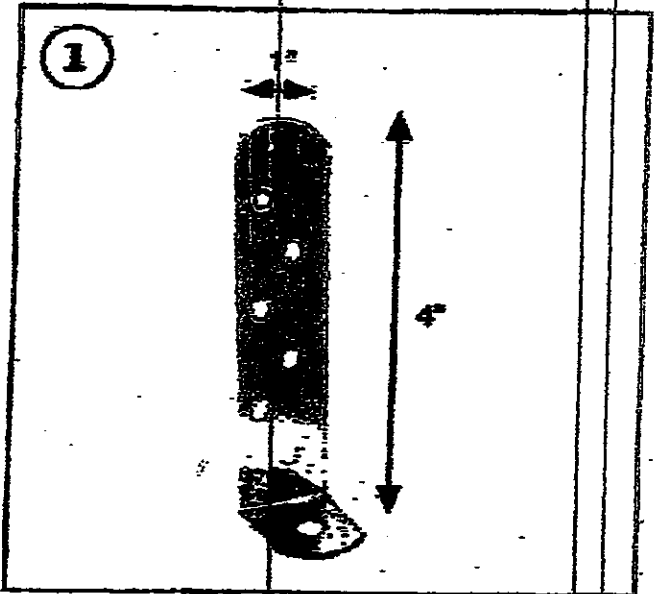
Anchor clip design meets requirements of The Florida Building Code 2007 (Building) Chapter 301.12 for wind resistance up to 140 MPH.

### FEATURES

The use of "sized to fit" screw holes compared to slots means that security is never compromised. A tight, secure fit between pad and condenser ensures security for the condenser and offers great assurance during extreme weather conditions.

### NOTE

Above installation instruction suitable for up to 5 ton units.





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

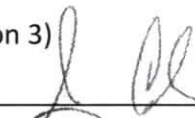
**FLORIDA ENERGY CONSERVATION CODE**  
**Mandatory Duct Inspection Certification for HVAC change-out**

For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912)

Owner: Joseph & Elizabeth McKinley Contractor name: Jack Frost AC of South Florida, Inc.  
Street address: 48 Rio Vista Dr. Jurisdiction: Sewall's Point  
City: Stuart Permit No.: \_\_\_\_\_  
Zip: 34996 Final inspection date: \_\_\_\_\_

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

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

Signature:  Date: 03/27/2015  
Printed Name: Jacques C. Stiegelman  
Contractor License #: CAC1815725

---

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_

---



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

**BUILDING PERMIT RECEIPT**

PERMIT NUMBER:	11228		
ADDRESS:	48 Rio Vista Drive		
DATE ISSUED:	3/30/2015	SCOPE OF WORK:	A/C Change Out
SINGLE FAMILY OR ADDITION /REMODEL		Declared Value	\$

Plan Submittal Fee (\$350.00 SFR, Remodel >\$200K)	\$
Plan Submittal Fee (175.00 Remodel <\$200K)	

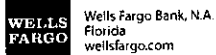
**JACK FROST AC  
 OF SOUTH FLORIDA INC**  
 10700 SW GREENRIDGE LANE  
 PALM CITY, FL 34990

2294

63-751/631 10892  
 2000041959383

Date 03-30-15

Pay to the Town of Sewall's Point \$ 181.<sup>10</sup>/<sub>100</sub>  
 Order of One hundred eighty-one + 10/100 Dollars



FOR 336-9030

⑈0000002294⑈ ⑆063107513⑆ 2000041959383⑈

Technology Fee: (0.04% of Construction Value - \$5 min)		n/a
Road impact assessment: (0.4% of construction value - \$20 min.)		n/a
Martin County Impact Fee:	\$	
<b>TOTAL BUILDING PERMIT FEE:</b>	\$	\$ -

<b>ACCESSORY PERMIT</b>	Declared Value:	\$	\$ 5,400.00
Total number of inspections:	@ \$ 150.00 per insp. # insp	1	\$ 150.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.25
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.25
Technology Fee (0.04% of Construction Value - \$5 min.)		\$	\$ 5.00
Road impact assessment: (0.4% of construction value - \$20 min.)		\$	\$ 21.60
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	\$ 181.10





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

**BUILDING PERMIT RECEIPT**

<b>PERMIT NUMBER:</b>	11228		
<b>ADDRESS:</b>	48 Rio Vista Drive		
<b>DATE ISSUED:</b>	3/30/2015	<b>SCOPE OF WORK:</b>	A/C Change Out

<b>SINGLE FAMILY OR ADDITION /REMODEL</b>	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, Remodel >\$200K)		\$	
Plan Submittal Fee (175.00 Remodel <\$200K, Tennant Improvement)		\$	
Plan Submittal Fee (100.00 Remodel <\$100k)		\$	
Total square feet air-conditioned spa @ per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel: @ per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: @ per sq. ft. s.f.		\$	-
Total Construction Value:		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Total number of inspections (Value < \$200K) \$ 150.00 per insp. # insp		\$	-
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	n/a
Technology Fee: (0.04% of Construction Value - \$5 min)			n/a
Road impact assessment: (0.4% of construction value - \$20 min.)			n/a
Martin County Impact Fee:		\$	
<b>TOTAL BUILDING PERMIT FEE:</b>		\$	\$ -

<b>ACCESSORY PERMIT</b>	Declared Value:	\$	\$
Total number of inspections: @ \$ 150.00 per insp. # insp	1	\$	150.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.25
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.25
Technology Fee (0.04% of Construction Value - \$5 min.)			\$ 5.00
Road impact assessment: (0.4% of construction value - \$20 min.)			\$ 21.60
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	<b>181.10</b>



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:	11228	DATE ISSUED:	March 30, 2015
SCOPE OF WORK:	A/C Change Out		
CONTRACTOR:	Jack Frost A/C of South Florida		
PARCEL CONTROL NUMBER:	12-38-41-002-000-00920-4	SUBDIVISION:	Rio Vista S/D Lot 92
CONSTRUCTION ADDRESS:	48 Rio Vista Drive		
OWNER NAME:	McKinley		
QUALIFIER:	Jacques Stiegelman	CONTACT PHONE NUMBER:	336-9030

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

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

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

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

### INSPECTIONS

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

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



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

TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY

**Air Conditioning Change out Affidavit**

**SYSTEM #1**

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

**One form required for each A/C system installed**

**REPLACEMENT SYSTEM COMPONENTS**

**Air handler:** Mfg: TRANE Model# 4FWHF024A  
 Volts 240 CFM's \_\_\_\_\_ Heat Strip 5 Kw \_\_\_\_\_  
 Min. Circuit Amps 29 Wire gauge 10  
 Max. Breaker size 30 Min. Breaker size 29  
 Ref. line size: Liquid 3/8 Suction 3/4  
 Refrigerant type R410A  
 Location: Existing  New \_\_\_\_\_  
 Attic/Garage/Closet (specify) CLOSET  
 Access: INSIDE

**Condenser:** Mfg TRANE Model# 4TTR6024B1  
 Volts 240 SEER/EER 16.0 BTU's 21400  
 Min. Circuit Amps 9 Wire gauge 10  
 Max. Breaker size 15 Min. Breaker size 9  
 Ref. line size: Liquid 3/8 Suction 3/4  
 Refrigerant type R410A  
 Location: Existing  New \_\_\_\_\_  
 Left/Right/Rear/Front/Roof RIGHT  
 Condensate Location RIGHT

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

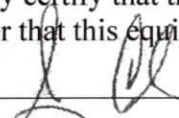
**EXISTING SYSTEM COMPONENTS**

**Air handler:** Mfg: RHEEM Model# REAB1005  
 Volts 240 CFM's \_\_\_\_\_ Heat Strip 5 Kw \_\_\_\_\_  
 Min. Circuit Amps \_\_\_\_\_ Wire gauge 10  
 Max. Breaker size 30 Min. Breaker size \_\_\_\_\_  
 Ref. line size: Liquid 3/8 Suction 3/4  
 Refrigerant type R22  
 Location: Ext.  New \_\_\_\_\_  
 Attic/Garage/Closet (specify) CLOSET  
 Access: INSIDE

**Condenser:** Mfg RHEEM Model# RAKA024  
 Volts 240 SEER/EER UNKNOWN BTU's 24000  
 Min. Circuit Amps \_\_\_\_\_ Wire gauge 10  
 Max. Breaker size 15 Min. Breaker size \_\_\_\_\_  
 Ref. line size: Liquid 3/8 Suction 3/4  
 Refrigerant type R22  
 Location: Ext.  New \_\_\_\_\_  
 Left/Right/Rear/Front/Roof RIGHT  
 Condensate Location OUTSIDE

**Certification:**

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

  
 \_\_\_\_\_  
 Signature

~03/27/15  
 \_\_\_\_\_  
 Date



## Features and Benefits

---

- **CLIMATUFF®** compressor
- **Efficiency up to 17.0 SEER**
- All aluminum **SPINE FIN™** coil
- **WEATHERGUARD™** fasteners
- **QUICK-SESS™** cabinet, service access and refrigerant connections with full coil protection
- **DURATUFF™** base, fast complete drain, weatherproof
- **COMFORT-R™** mode approved
- Glossy corrosion resistant finish
- Internal compressor high/low pressure & temperature protection
- 018, 024 & 030 ship with start kit
- Liquid line filter/drier
- Tarpaulin gray cabinet with anthracite gray badge and cap
- High pressure switch
- Service valve cover
- R-410A refrigerant
- S.E.E.T. design testing
- 100% line run test
- Low ambient cooling to 30°F with AY28X079
- Low ambient cooling to 55°F as shipped
- **Extended warranties available**



# General Data

## Product Specifications

Model No. ①	4TTR6018B1000A	4TTR6024B1000A	4TTR6030B1000A	4TTR6036B1000A
Electrical Data V/Ph/Hz ②	208/230/1/60	208/230/1/60	208/230/1/60	208/230/1/60
Min Cir Ampacity	9	9	12	19
Max Fuse Size (Amps)	15	15	20	30
Compressors	CLIMATUFF®	CLIMATUFF®	CLIMATUFF®	CLIMATUFF® - SCROLL
No. Used - No. Stages	1-1	1-1	1-1	1-1
RL AMPS - LR AMPS	6.4 - 38.6	6.8 - 38.6	9.1 - 57.8	14.1 - 77
Outdoor Fan FL Amps	0.74	0.74	0.93	0.93
Fan HP	1/8	1/8	1/5	1/5
Fan Dia (inches)	23	23	27.6	27.6
Coil	Spine Fin™	Spine Fin™	Spine Fin™	Spine Fin™
Refrigerant R-410A	5/2-LB/OZ	6/3-LB/OZ	7/0-LB/OZ	7/4-LB/OZ
Line Size - (in.) O.D. Gas ③	5/8	3/4	3/4	3/4
Line Size - (in.) O.D. Liquid ③	3/8	3/8	3/8	3/8
Dimensions H x W x D (Crated)	34 x 30.1 x 33	34 x 30.1 x 33	38.4 x 35.1 x 38.7	42.4 x 35.1 x 38.7
Weight - Shipping	200	201	234	228
Weight - Net	173	174	201	193
Start Components	YES	YES	YES	NO
Sound Enclosure	YES	YES	YES	YES
Compressor Sump Heat	NO	NO	NO	NO
<b>Optional Accessories: ④</b>				
Anti-short Cycle Timer	TAYASCT501A	TAYASCT501A	TAYASCT501A	TAYASCT501A
Evaporator Defrost Control A/C	AY28X079	AY28X079	AY28X079	AY28X079
Rubber Isolator Kit	BAYISLT101	BAYISLT101	BAYISLT101	BAYISLT101
Crank Case Heater Kit	BAYCCHT300A	BAYCCHT300A	BAYCCHT300A	BAYCCHT300A
Hard Start Kit Scroll				BAYKSKT263
Extreme Condition Mounting Kit	BAYECMT023	BAYECMT023	BAYECMT004	BAYECMT004
Snow Leg - Base & Cap 4" High	BAYLEGS002	BAYLEGS002	BAYLEGS002	BAYLEGS002
Snow Leg - 4" Extension	BAYLEGS003	BAYLEGS003	BAYLEGS003	BAYLEGS003
Seacoast Kit	BAYSEAC001	BAYSEAC001	BAYSEAC001	BAYSEAC001
Refrigerant Lineset ⑤	TAYREFLN950	TAYREFLN7*	TAYREFLN7*	TAYREFLN7*

① Certified in accordance with the Air-Source Unitary Heat Pump Equipment certification program which is based on AHRI Standard 210/240.

② Calculated in accordance with N.E.C. Only use HACR circuit breakers or fuses.

For Greater lengths and lifts refer to refrigerant piping software Pub# 32-3312-01. (1 denotes latest revision)

④ For accessory description and usage, see page 5.

⑤ \* = 15, 20, 25, 30, 40 and 50 foot lineset available.

## Sound Power Level

Model	A-Weighted Sound Power Level [dB(A)]	Full Octave Sound Power [dB]							
		63 Hz	125 Hz	250 Hz	500 Hz	1000 Hz	2000 Hz	4000 Hz	8000 Hz
4TTR6018B1	75	51	61	65	74	74	72	61	51
4TTR6024B1	75	49	62	66	74	74	69	62	54
4TTR6030B1	75	54	69	72	78	76	72	64	54
4TTR6036B1	75	49	68	73	76	74	70	62	51
4TTR6042B1	75	49	69	74	77	75	70	62	51
4TTR6048B1	75	49	69	74	77	75	70	62	51
4TTR6049B1	74	70	70	65	64	62	56	49	42
4TTR6060B1	75	49	69	74	77	75	70	62	51
4TTR6061C1	75	68	70	67	68	64	56	53	48

Note: Rated in accordance with AHRI Standard 270-2008

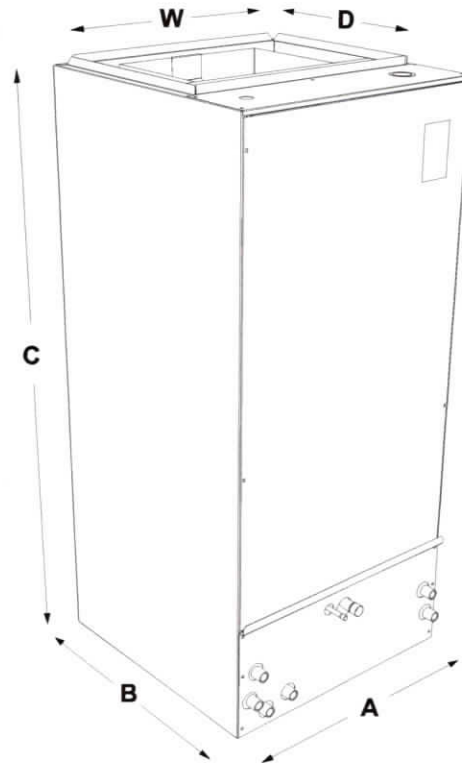
## Section 6. Dimensional Data

### 4FWHF Air Handlers

#### CAUTION

Coil is pressurized. Release pressure at service port before opening tube.

- **3/8" Liquid Line**  
3/8" coupler is supplied.
- **3/4" Suction Line (1.5-3 Tons)**
- 7/8" Suction Line (3.5-5 Tons)
- 3/4" NPT Primary and Secondary Drain connections are standard.



PRODUCT DIMENSIONS						SHIP WEIGHT LBS.
Air Handler Model	Cabinet			Plenum		
	Width A	Depth B	Height C	Width W	Depth D	
4FWHF024A1000B	19.75	21.50	45.00	18.25	15.0	73
4FWHF025A1000B	19.75	21.50	45.00	18.25	15.0	73
4FWHF030A1000B	19.75	21.50	45.00	18.25	15.0	73
4FWHF036A1000B	19.75	21.50	45.00	18.25	15.0	73
4FWHF042A1000C	22.00	22.75	51.00	20.75	15.5	94
4FWHF048A1000C	22.00	22.75	51.00	20.75	15.5	94
4FWHF060A1000C	22.00	22.75	51.00	20.75	15.5	94
4FWHF061A1000C	22.00	22.75	51.00	20.75	15.5	94

All dimensions are in inches.

## Performance and Electrical Data – 4FWHF024,025

AIR FLOW PERFORMANCE										
4FWHF024, 4FWHF025										
EXTERNAL STATIC (in w.g)	AIRFLOW									
	Speed Taps - 230 VOLTS					Speed Taps - 208 VOLTS				
	1	2	3*	4**	5	1	2	3*	4**	5
0.1	680	730	820	910	1010	680	730	820	900	1000
0.2	610	690	790	870	970	610	690	780	860	970
0.3	550	650	750	830	940	540	650	740	830	930
0.4	490	610	710	800	910	490	610	700	790	900
0.5	-	570	670	760	870	-	570	670	750	870
0.6	-	530	630	730	840	-	530	630	720	840
0.7	-	-	-	-	810	-	-	-	-	810
0.8	-	-	-	-	780	-	-	-	-	780
0.9	-	-	-	-	750	-	-	-	-	750

### NOTES:

1. Values are with dry coil, filter in place, and no heaters.
2. CFM Correction for wet coil = 4%
3. Cool Speed is factory set at Tap 4\*\*
4. Heat Speed factory set at Tap 3\*

MINIMUM HEATER AIRFLOW CFM		
4FWHF024, 4FWHF025		
Heater	Minimum Heat Speed Tap	
	With Heat Pump	Without Heat Pump
BAYHTR**1403SL0	Tap 1	Tap 1
BAYHTR**1405SL0	Tap 1	Tap 1
BAYHTR**1406SL0	Tap 1	Tap 1
BAYHTR**1408SL0	Tap 2	Tap 1
BAYHTR**1410SL0	Tap 3	Tap 2

ELECTRICAL DATA											
4FWHF024 / 4FWHF025											
Heater Model No	No. of Cir- cuits	240 Volt					208 Volt				
		Capacity		Heater Amps per Circuit	Minimum Circuit Ampacity	Maximum Overload Protection	Capacity		Heater Amps per Circuit	Minimum Circuit Ampacity	Maximum Overload Protection
		kW	BTUH				kW	BTUH			
No Heater					4	15			4	15	
BAYHTR**1403SL0	1	3	10200	12.5	19	20	2.25	7700	10.8	17	20
BAYHTR**1405SL0	1	4.8	16400	20	29	30	3.6	12300	17.3	25	25
BAYHTR**1406SL0	1	6	20500	25	35	35	4.5	15400	21.6	31	35
BAYHTR**1408SL0	1	8	27300	33.3	45	45	6	20500	28.8	40	40
BAYHTR**1410SL0	1	9.6	32800	40	54	60	7.2	24600	34.6	47	50

Note: Heaters with two circuits are displayed as Circuit 1/Circuit 2 (Minimum Circuit Ampacity for Circuit 1 includes Blower Motor Amp)  
 \*\* = DS, BK, or Blank (DS = Pull Disconnect, BK = Circuit Breaker Disconnect, Blank = terminal block)



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2014.

# Certificate of Product Ratings

AHRI Certified Reference Number: 6179499

Date: 3/24/2015

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

Outdoor Unit Model Number: 4TTR6024B1

Manufacturer: TRANE

Indoor Unit Model Number: 4FWH(A,F)024A\*

Manufacturer: TRANE U.S. INC.

Trade/Brand name: TRANE

Series name:

Manufacturer responsible for the rating of this system combination is TRANE U.S. INC.

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

Cooling Capacity (Btuh):	21400
EER Rating (Cooling):	13.50
SEER Rating (Cooling):	16.00
IEER Rating (Cooling):	

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

#### DISCLAIMER

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

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#### CERTIFICATE VERIFICATION

The information for the model cited on this certificate can be verified at [www.ahridirectory.org](http://www.ahridirectory.org), click on "Verify Certificate" link and enter the AHRI Certified Reference Number and the date on which the certificate was issued, which is listed above, and the Certificate No., which is listed at bottom right.

© 2014 Air-Conditioning, Heating, and Refrigeration Institute



we make life better™

CERTIFICATE NO.:

130716862826019143





# THE METAL SHOP

Custom Metal Manufacturer

## ANCHOR CLIPS Installer's Guide

Consulting Engineer:

*[Handwritten Signature]*  
12/17/89

Douglas W. Lowe, P.E.  
FLA# 13335  
1206 Millennium Parkway  
Brandon, FL 33511

**WARNING: HAZARDOUS VOLTAGE - DISCONNECT POWER BEFORE SERVICING**

**PART NUMBER**

- #771 (4 pk)
- #772 (100 box)
- #770 (4 pk including hardware)

**CONSTRUCTION**

16 gauge galvanized steel, G-90 rated for corrosion coastal applications.

**PACKAGING DETAILS**

All anchor clips are supplied as per package quantities described above.

**INSTALLATION**

Maximum of 4 clips required per condenser unit.  
Maximum of 2 #14 x 3/4" screws with neoprene washer required to fasten clip to condenser unit.

1/4" x 1 3/4" Tapcon screw required to fasten clip to condenser pad.

Locate the anchor clips to fit comfortably between condenser unit and pad.

Adjust clip accordingly to fit on condenser unit and screw together, at the same time ensuring that the base of the clip is still in contact with the pad.

All hardware must be fastened prior to connecting refrigerant lines and electrical power to the unit.

Suitable for ground mounted units.

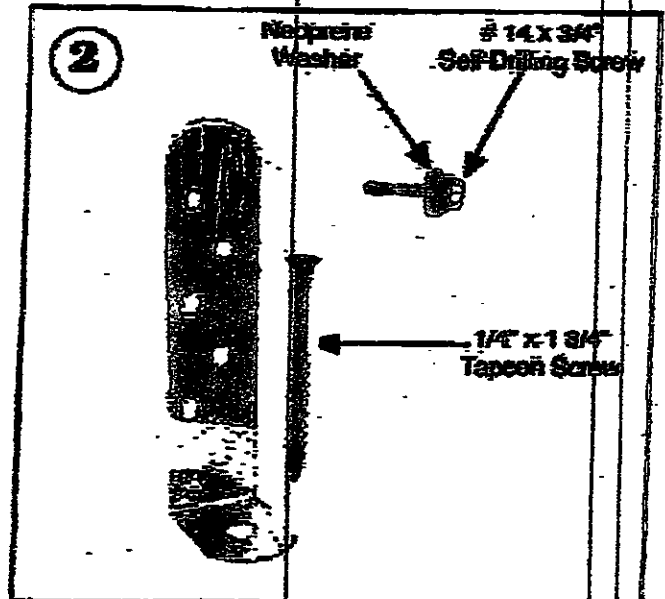
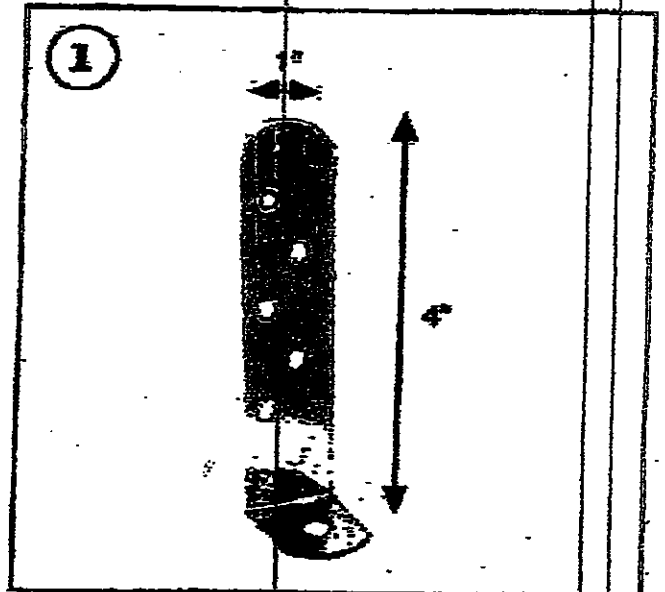
Anchor clip design meets requirements of The Florida Building Code 2007 (Building) Chapter 301.12 for wind resistance up to 140 MPH.

**FEATURES**

The use of "slotted fit" screw holes compared to slots means that security is never compromised. A tight, secure fit between pad and condenser ensures security for the condenser and offers great assurance during extreme weather conditions.

**NOTE**

Above installation instruction suitable for up to 5 ton units.





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

**FLORIDA ENERGY CONSERVATION CODE**

**Mandatory Duct Inspection Certification for HVAC change-out**

For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912)

Owner: Joseph & Elizabeth McKinley Contractor name: Jack Frost AC of South Florida, Inc.

Street address: 48 Rio Vista Dr. Jurisdiction: Sewall's Point

City: Stuart Permit No.: \_\_\_\_\_

Zip: 34996 Final inspection date: \_\_\_\_\_

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

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

Signature:  Date: 03/27/2015

Printed Name: Jacques C. Stiegelman

Contractor License #: CAC1815725

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Jack Frost AC of South Florida, Inc.

1716 SW Biltmore Street

Port St. Lucie, FL 34984

Office(772) 336-9030

Fax (772) 336-9032

Email [jackfrostflorida@aol.com](mailto:jackfrostflorida@aol.com)

Contact: Kristi Parsons - permitting

State License #CAC1815725



# CITY OF PORT ST. LUCIE LOCAL BUSINESS TAX RECEIPT

TERM: October 1, 2014 to September 30, 2015

This receipt does not warrant that the receipt holder is competent to perform in the business, but that the holder has paid the required tax. Valid only when all state and local regulated trade licenses / competency cards are valid for the current fiscal year as required by law.

**THIS RECEIPT MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS**

**VALID AT THIS BUSINESS ADDRESS ONLY**

**Business Address:** 1716 SW BILTMORE ST  
**Classification:** CONT CONTRACTOR  
**Issued to:** JACK FROST AC OF SOUTH FLORIDA INC  
1716 SW BILTMORE ST  
PORT ST LUCIE, FL 34984

**Business Tax** 135718 / 15-1068139  
**Fee:** 134.00  
**Discount:** 0.00

**BUSINESS TAX AUTHORITY**

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

Fees: 134.00 Late Fees: 0.00 Total this payment: 134.00  
LOCAL BUSINESS TAX RECEIPT CITY OF PORT ST. LUCIE 404 / 015 Ireid

This receipt does not warrant that the receipt holder is competent to perform in the business, but that the holder has paid the required tax and provided the necessary documentation ( if required ) for this business. Valid only when all state and local regulated trade licenses / competency cards are valid for the current fiscal year as required by law.

**THIS RECEIPT MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS** TERM: October 1, 2014 to September 30, 2015

# RECEIPT FOR PAYMENT

**Business Address:** 1716 SW BILTMORE ST  
**Classification:** CONT CONTRACTOR  
**Issued to:** JACK FROST AC OF SOUTH FLORIDA INC  
1716 SW BILTMORE ST  
PORT ST LUCIE, FL 34984

**Business Tax** 135718 / 15-1068139  
**Fee:** 134.00  
**Discount:** 0.00

Fees: 134.00 Late Fees: 0.00 Total this payment: 134.00  
THIS IS A RECEIPT FOR TAX PAID AND IS NOT REGULATORY IN NATURE 404 / 015 Ireid

LOCAL BUSINESS TAX RECEIPT CITY OF PORT ST. LUCIE

This receipt does not warrant that the receipt holder is competent to perform in the business, but that the holder has paid the required tax and provided the necessary documentation ( if required ) for this business. Valid only when all state and local regulated trade licenses / competency cards are valid for the current fiscal year as required by law. TERM: October 1, 2014 to September 30, 2015

Fees: 134.00 Late Fees: 0.00 Total this payment: 134.00

# FILE COPY

**Business Address:** 1716 SW BILTMORE ST  
**Classification:** CONT CONTRACTOR  
**Issued to:** JACK FROST AC OF SOUTH FLORIDA INC  
1716 SW BILTMORE ST

**Business Tax** 135718 / 15-1068139  
**Fee:** 134.00  
**Discount:** 0.00  
404 / 015 Ireid

CK# 2197  
9-9-14

CHRIS CRAFT, ST. LUCIE COUNTY TAX COLLECTOR

FACILITIES OR MACHINES / ROOMS SEATS EMPLOYEES 11  
 TYPE OF BUSINESS 1711 AIR COND/PLUMBING CONTRACTOR (AIR CONDITIONING)

EXPIRES SEPTEMBER 30, 2015

BUSINESS/ Jack Frost AC Of South Florida Inc

DBA NAME

MAILING ADDRESS Jacques C Stiegelman Sr  
 10700 SW Green Ridge Ln  
 Palm City, FL 34990

BUSINESS LOCATION 1716 SW Biltmore St  
 Port St Lucie, FL 34984  
 City of Pt St Lucie



RENEWAL ORIGINAL TAX	\$3.00
PENALTY COLLECTION COST	\$24.75
<b>TOTAL</b>	<b>\$27.75</b>

CAC1815725  
 P07000100411

Paid 09/09/2014 3.00

0208-20140909-003895

Law requires this Local Business Tax Receipt to be displayed conspicuously at the place of business in such a manner that it can be open to the view of the public and subject to inspection by all duly authorized officers of the county. Upon failure to do so, the Local Business Taxpayer shall be subject to the payment of another Local Business Tax for the same business, profession, or occupation.

Pursuant to State Law, all Local Business Tax Receipts shall be sold by the Tax Collector beginning July 1st of each year and shall expire on September 30th of the succeeding year. Those Local Business Tax Receipts renewed beginning October 1st shall be delinquent and subject to a delinquency penalty of 10% for the month of October, plus an additional 5% penalty for each month of delinquency thereafter until paid; provided that the total delinquency penalty shall not exceed 25% of the Local Business Tax for the delinquent establishment.

In addition to the penalty, the Tax Collector shall be entitled to a collection cost fee of from \$1.00 to \$5.00, based on the amount of the Local Business Tax, which shall be collected from delinquent taxpayers after September 30th, of the business year.

This receipt is a Local Business Tax only. It does not permit the Local Business Taxpayer to violate any existing regulatory or zoning laws of the state, county or cities. It also does not exempt the Local Business Taxpayer from any other taxes, licenses or permits that may be required by law.

Local Business Taxes are subject to change according to law.

Jacques C Stiegelman Sr  
 10700 SW Green Ridge Ln  
 Palm City, FL 34990



STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

STIEGELMAN, JACQUES CHARLES  
JACK FROST AC OF SOUTH FLORIDA INC  
1732 SW BILTMORE STREET  
PORT ST. LUCIE FL 34984

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto [www.myfloridalicense.com](http://www.myfloridalicense.com). There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently. Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CAC1815725 ISSUED: 07/24/2014

CERTIFIED AIR COND CONTR  
STIEGELMAN, JACQUES CHARLES  
JACK FROST AC OF SOUTH FLORIDA INC

IS CERTIFIED under the provisions of Ch. 489 FS  
Expiration date AUG 31, 2016 L1407240000776

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

<b>LICENSE NUMBER</b>	
CAC1815725	

The CLASS B AIR CONDITIONING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2016

STIEGELMAN, JACQUES CHARLES  
JACK FROST AC OF SOUTH FLORIDA INC  
1732 SW BILTMORE STREET  
PORT ST. LUCIE FL 34984



1 10:55 PM 9/8/2014

### Licensee Details

#### Licensee Information

Name: **STIEGELMAN, JACQUES CHARLES (Primary Name)**  
**JACK FROST AC OF SOUTH FLORIDA INC (DBA Name)**

→ Main Address: **1716 SW BILTMORE STREET**  
**PORT ST. LUCIE Florida 34984**

County: **ST. LUCIE**

License Mailing:

LicenseLocation:

#### License Information

License Type: **Certified Air Conditioning Contractor**

Rank: **Cert Air**

License Number: **CAC1815725**

Status: **Current,Active**

Licensure Date: **02/11/2008**

Expires: **08/31/2016**

**Special Qualifications** **Qualification Effective**

**Class B** **02/11/2008**

**Construction Business** **02/11/2008**

#### [View Related License Information](#)

#### [View License Complaint](#)

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

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





# CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)  
06/10/2014

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

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

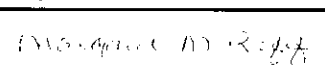
<b>PRODUCER</b> <b>PAYCHEX INSURANCE AGENCY, INC.</b> <b>150 SAWGRASS DRIVE</b> <b>ROCHESTER, NY 14620</b>	<b>CONTACT NAME:</b> Paychex Insurance Agency Inc <b>PHONE (A/C, NO. EXT):</b> 877-266-6850 <b>E-MAIL ADDRESS:</b> Certs@paychex.com	<b>FAX (A/C, No):</b> 585-389-7426
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> <b>Paychex Business Solutions, Inc.</b> <b>Jack Frost AC of South Florida Inc</b> <b>911 PANORAMA TRAIL SOUTH</b> <b>ROCHESTER, NY 14625-0397</b>	<b>INSURER A:</b> ILLINOIS NATIONAL INSURANCE COMPANY	<b>NAIC #</b> 23817
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	
	<b>INSURER F:</b>	

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

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <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</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$	
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED      RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$	
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	011732318	06/01/2014	06/01/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000.00 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000.00 E.L. DISEASE - POLICY LIMIT \$ 1,000,000.00	

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)**  
 Worker's Compensation coverage is provided to only those employees leased to, but not subcontractors of the named insured.

<b>CERTIFICATE HOLDER</b> TOWN OF SEWALL'S POINT ONE SOUTH SEWALL'S POINT ROAD SEWALL'S POINT, FL 34996	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.  <b>AUTHORIZED REPRESENTATIVE</b> 
--	---

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/27/2015

**PRODUCER**

**R V HOWARD & ASSOCIATES**  
 600 SW Darwin Blvd # 206  
 Port St. Lucie, FL 34953  
 (772) 343-9878

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**

Jack Frost AC of South Florida, Inc  
 1716 SW Biltmore St.  
 Port St Lucie, FL 34984  
 772-285-5553

**INSURERS AFFORDING COVERAGE**

NAIC#

INSURER A: **Lloyds of London**

INSURER B: **Progressive**

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	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY	BUF51711	5/17/14	5/17/15	EACH OCCURRENCE \$ <b>\$1,000,000</b>
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>\$100,000</b> MED EXP (Any one person) \$ <b>5,000</b> PERSONAL & ADV INJURY \$ <b>\$1,000,000</b> GENERAL AGGREGATE \$ <b>\$2,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>\$2,000,000</b>
B		AUTOMOBILE LIABILITY	066408560	10/23/14	10/23/15	COMBINED SINGLE LIMIT (Ea accident) \$ <b>300,000</b>
		<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				BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY	NOT COVERED BY OUR AGENCY			AUTO ONLY - EA ACCIDENT \$
		<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY	NOT COVERED BY OUR AGENCY			EACH OCCURRENCE \$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				AGGREGATE \$ \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	NOT COVERED BY OUR AGENCY			WC STATUTORY LIMITS OTH-ER \$
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER	NOT COVERED BY OUR AGENCY			

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

**certificate holder is added as additional insured**

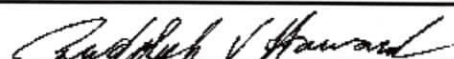
**CERTIFICATE HOLDER**

**Town of Sewall's Point**  
 One South 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 \_\_\_\_\_ DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE





11-12-2014

JEFF ATWATER  
CHIEF FINANCIAL OFFICER

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

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

**CONSTRUCTION INDUSTRY EXEMPTION**

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

EFFECTIVE DATE: 02/19/2014                      EXPIRATION DATE: 02/19/2016

PERSON:                      STIEGELMAN                      JACQUES                      C JR

FEIN:                                      261122069

BUSINESS NAME AND ADDRESS:  
JACK FROST AC OF SOUTH FLORIDA INC  
10700 GREEN RIDGE LANE  
PALM CITY                      FL 34990

SCOPES OF BUSINESS OR TRADE:  
1- HEATING, VENTILATION, AIR-COND

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. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

QUESTIONS? (850) 413-1609

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11

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 ELECTION TO BE EXEMPT FROM FLORIDA  
WORKERS' COMPENSATION LAW



EFFECTIVE: 02/19/2014                      EXPIRATION DATE: 02/19/2016

PERSON:                      JACQUES C STIEGELMAN JR

FEIN:                                      261122069

BUSINESS NAME AND ADDRESS:  
JACK FROST AC OF SOUTH FLORIDA INC  
10700 GREEN RIDGE LANE  
PALM CITY, FL 34990

SCOPE OF BUSINESS OR TRADE:  
1- HEATING, VENTILATION, AIR-COND

**IMPORTANT**

**F** 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.

**H** Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt.

**E** Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

QUESTIONS? (850) 413-1609

CUT HERE

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

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11



11-12-2014

JEFF ATWATER  
CHIEF FINANCIAL OFFICER

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

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

CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE DATE: 03/03/2014      EXPIRATION DATE: 03/02/2016

PERSON: STIEGELMAN      JACQUES      C      SR

FEIN: 261122069

BUSINESS NAME AND ADDRESS:

JACK FROST AC OF SOUTH FLORIDA INC  
10700 GREEN RIDGE LANE  
PALM CITY      FL 34990

SCOPES OF BUSINESS OR TRADE:


1- HEATING, VENTILATION, AIR-COND

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. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

QUESTIONS? (850) 413-1609

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

<p>STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION CONSTRUCTION INDUSTRY CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW</p>  <p>EFFECTIVE: 03/03/2014      EXPIRATION DATE: 03/02/2016</p> <p>PERSON: JACQUES C STIEGELMAN SR</p> <p>FEIN: 261122069</p> <p>BUSINESS NAME AND ADDRESS: JACK FROST AC OF SOUTH FLORIDA INC 10700 GREEN RIDGE LANE PALM CITY, FL 34990</p> <p>SCOPE OF BUSINESS OR TRADE: 1- HEATING, VENTILATION, AIR-COND</p>	<p><b>IMPORTANT</b></p> <p><b>F</b> 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.</p> <p><b>O</b></p> <p><b>L</b></p> <p><b>D</b></p> <p><b>H</b> Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt.</p> <p><b>E</b> Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.</p> <p>QUESTIONS? (850) 413-1609</p>
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CUT HERE

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

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11



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

## A/C PERMIT APPLICATION 2010 FLORIDA BUILDING CODE

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

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

- 1 Copy Completed permit application
- 2 Copies of the following:
  - a. Manufacturer's data sheet to include make, model, seer/eer, tonnage, electrical requirements, refrigerant piping size, and AHRI listing page.
  - b. Replacing ductwork requires Manual D layout plan with grille sizes
  - c. Manual J calculations.
  - d. Condenser tie down and Air Handler mounting details
  - e. A/C change out affidavit
  - f. Mandatory Duct inspection Certification

**\*\*\*\*NOTE: LOCKING ACCESS PORT CAPS ARE REQUIRED FOR REFRIGERANT LINES  
LOCATED OUT DOORS PER FBC/R – M1411.6**

### **COMMERCIAL APPLICATIONS ADDITIONALLY REQUIRE**

- 2 Copies A/C Stand NOA or Engineers letter to retrofit to existing mounts.
- Smoke Detectors in supply duct for units over 2000 CFM

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection  Mon  Tue  Wed  Thur  Fri 5/10/15 Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
11147	Darrow 7 Oak Hill Way Pools by Greg	Pool Final	PASS	CLOSE INSPECTOR <i>[Signature]</i>
11060	Fabrizy 6 Oak Hill Way Pools by Greg	Pool Final	PASS	CLOSE INSPECTOR <i>[Signature]</i>
11210	Pare 61 N River Road Jensen Beach A/C	A/C Final	PASS	CLOSE INSPECTOR <i>[Signature]</i>
11146	Batson 3 Palmetto O/B	Gas Lines	PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
11228	McKinley 48 Rio Vista Jack Frost A/C	A/C Final	FAIL	WRONG CABLE INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
11188	Morris 64 S Sewalls Pt Rd Electric Connections	Temp Electric	PASS	E-MAIL FPL INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
Tree	Schepleng 110 Abbie Court	Tree Permit	OK	INSPECTOR <i>[Signature]</i>

# TOWN OF SEWALL'S POINT

## Building Department – Inspection Log

Date of Inspection  Mon  Tue  Wed  Thur  Fri 4/23/15 Page 1 of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11228	McKinley 48 Rio Vista Dr Jack Frost A/c	A/c Final	FAIL	NO LADDER PROVIDED BY CON
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
	ELDEN 110 S. SEWALLS RD O/D	ROUGH A/c FRAMING	PARTIAL PASS	
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
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PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS

INSPECTOR