

39 South River Road

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

DO NOT REMOVE UNTIL JOB IS COMPLETED

OWNER James Troitt
CONTRACTOR Money & Sabon
LOT 13 BLOCK _____ SUB Hillcrest
No. 123 Hillcrest drive

NO. 2797 DATE ISSUED 6/20/90

Call 287-2455 From 8:00 A.M. - 12:00 Noon and
1:00 P.M. - 4:00 P.M. For Inspections of Items 1 - 9

TOWN OF SEWALL'S POINT BUILDING PERMIT

REQUIRED INSPECTIONS	INSPECTOR'S FINDING	INSPECTOR'S SIGNATURE
1. LOT STAKES/SET BACKS		
2. TERMITE PROTECTION		
3. FOOTING - SLAB	OK 7/12/90 DB	
4. ROUGH PLUMBING	OK 7/5/90 DB	
5. ROUGH ELECTRIC	OK 11/15/90 DB	
6. LINTEL	OK 30-90 DB	
7. ROOF		
8. FRAMING	OK 11/15/90 DB	
9. INSULATION	OK 11/27/90 DB	
10. A/C DUCTS	OK 11/14/90 DB	
11. FINAL ELECTRIC		
12. FINAL PLUMBING		
13. FINAL CONSTRUCTION		

• REQUESTS FOR INSPECTIONS REQUIRED

• ALL WORK MUST BE ORDERED

Final Grade Pass-System Approved
 Please allow this office two working days to any questions, contact Getzler at 221-4090. 1090
 REV. 4/90

System Reinspection Not Approved
 Reason(s):
 Do not cover, disapproved for the following
 Well and well reinspection fee
 Other:
 Approved and Cover
 Cover but hold for:
 Final Grade (see Permit for specifications)
 Other:
 HD 40-241
 Your septic system was inspected on 3/17/91

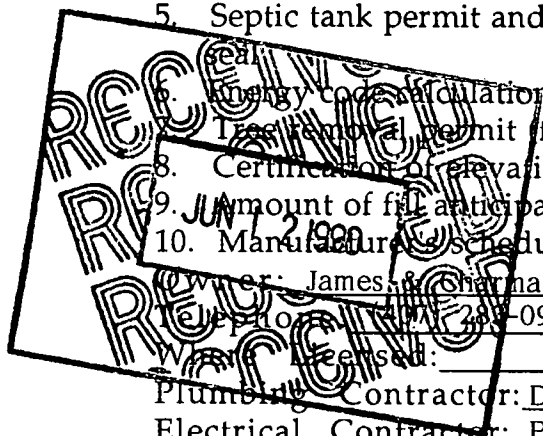
HRS-MARTIN COUNTY
 PUBLIC HEALTH UNIT
 Inspected on 3/17/91

21-2459
3460

PERMIT NUMBER 2797 DATE OF APPLICATION 6/11/90

To obtain this permit the following are required:

1. Florida Certification of builder and sub-contractors.
2. Certification of insurance from contractor or owner/builder re: liability and workers compensation.
3. Two sets of building plans which must include: a) 1/4" scale building drawings, b) plot plan c) foundation plan d) floor plans e) wall and roof cross-sections, f) plumbing, electrical and air conditioning layouts g) at least two elevations showing the height of building from finished floor. Plans must be sealed by a Florida registered architect or engineer.
4. Recorded warranty deed to the property
5. Septic tank permit and one set of plans with Martin County Health Department
6. Energy code calculations
7. Tree removal permit for trees other than nuisance trees)
8. Certification of elevation from licensed surveyor and determination of flood zone.
9. Amount of fill anticipated - rough sketch showing location of fill
10. Manufacturer's schedule of windows.



Owner: James & Charmaine Trutt Current Address: 120 Hillcrest Drive
 Telephone: 407-289-0901 Address: (Same) Stuart, Florida 34996
 Work License: _____ License Number: _____
 Plumbing Contractor: Dylewski License Number: 00089
 Electrical Contractor: Pt. St. Lucie License Number: MC103
 Roofing Contractor: Panache Const. License Number: CGCa07037
 A/C Contractor: Flynn's License Number: _____

Describe the building or alterations: Single Family Residence
 Name the street on which the building, its front building line and its front yard will face: 39 South River Road
 Subdivision: Hillcrest Lot 13 Block _____
 Building area (inside walls) 4973 Garage, porch, Carport area 1712
 Contract price (excluding carpet, land, appliances, landscaping) \$ 341,180
 Cost of permit \$ 1,910.00 Plans approved as submitted _____ as marked _____
 In addition, the following are understood by owner and contractor:

1. Building area inside walls must be a minimum of 1,500 square feet.
2. Building permit fees are \$5. per \$1,000. of the cost of the building, plus \$50. each for plumbing, electric, a.c. and roof. For example a \$100,000. building x \$5. = \$500. plus \$200. (a.c., pl., roof) = \$700. cost of permit + \$365. impact fee = \$1,065. total. Also there is a charge of 1 cent per square foot for radon gas trust fund.
3. If not contract is submitted as proof as cost, the permit will be based on \$60. per square foot (inside walls) and \$25. per square foot (other areas). Owner-builder cost is 25% higher than the regular fee.
4. The town has adopted the South Florida Building Code
5. Building permits are issued for one year's duration.
6. Construction must be started within 180 days or permit will be subject to revocation and forfeiture of fee.
7. All changes in plans must be approved by the Building Department.
8. Work hours are 8:AM to 5:PM Monday through Friday. NO SUNDAY WORK
9. Portable toilets must be on all construction sites.
10. Inspections are made Monday through Friday, 8:AM to Noon, 1:PM to 4:PM. 24 hour notice is required prior to all inspections.
11. String lines along property lines to facilitate set back inspections.
12. Before a certificate of occupancy is issued, the following are required:
 - a. An owners affidavit of building cost (form available) any discrepancy between the original fee and final fee (based on affidavit) will be adjusted.
 - b. Approval of septic tank installation by Martin Co. Health Dept.
 - c. Rough grading and clean up of grounds.

- d. Affidavit from licensed surveyor showing slab elevation (if in "A" zone).
13. THIS SUMMARY IS NOT A SUBSTITUTE FOR TOWN ORDINANCES.
APPROVAL OF THE BUILDING PLANS IN NO WAY RELIEVES THE OWNER OR CONTRACTOR FROM COMPLIANCE WITH TOWN ORDINANCES.
14. In addition to the requirements of this permit there may be additional restrictions applicable to this property that may be found in the public records of the county.

Contractor's Signature: Charles H. Rubin
Owner's Signature: [Signature]
Approval by Building Inspector Dale Brown Date 6/18/90
Approval by Building Commissioner _____ Date _____
Certificate of Occupancy issued: _____ Date _____

Radon 66.85'
2,341.85

778171

THIS INSTRUMENT PREPARED BY:

Lawrence E. Crary III, Esquire
 CRARY, BUCHANAN, BOWDISH & BOVIE, Chtd.
 555 S.W. Colorado Avenue, Suite 1
 Post Office Drawer 24
 Stuart, Florida 34995-0024

WARRANTY DEED
 (FROM CORPORATION)

THIS WARRANTY DEED made and executed the 26 day of June, 1989 by FAIRVIEW PROPERTIES, INC., a Virginia corporation qualified to do business in the State of Florida as FAIRVIEW SOUTH, INC., and having its principal place of business at 2400 S.E. Federal Highway, Suite 300, Stuart, Florida 34994, hereinafter called the grantor, to JAMES P. TRUITT, JR. and CHARMAINE A. TRUITT, his wife, whose post office address is 120 Hillcrest Drive, Stuart, Florida 34996, hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

W I T N E S S E T H:

That the grantor, for and in consideration of the sum of TEN AND NO/100 (\$10.00) DOLLARS, and other good and valuable considerations, the receipt whereof is hereby acknowledged, by these presents does grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee, all that certain land situate in Martin County, Florida, viz:

Lot 13, Plat of HILLCREST, according to the Plat thereof recorded in Plat Book 10, Page 39, Martin County, Florida, public records.

SUBJECT TO the following restrictions which, upon the delivery and acceptance of this Deed, shall be binding upon the Grantee, his heirs, successors and assigns, as follows: Any residence constructed upon this property shall contain a minimum of two thousand (2,000) square feet of air-conditioned living space, exclusive of porches, balconies and garages; said residence shall include an attached garage to accommodate at least two (2) automobiles ("two-car garage"); and said residence shall have a cedar shake, barrel tile or cement tile roof.

THIS CONVEYANCE IS ALSO SUBJECT TO: (1) The Declaration of Covenants and Restrictions for Hillcrest recorded in Official Records Book 701, Page 1092, public records of Martin County, Florida; (2) Reservations, restrictions, easements and rights of way of public record; (3) zoning and other governmental regulations in force and effect; and (4) taxes accruing subsequent to December 31, 1989.

TOGETHER with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

TO HAVE AND TO HOLD the same in fee simple forever.

AND the grantor hereby covenants with said grantee that it is lawfully seized of said land in fee simple; that it has good right and lawful authority to sell and convey said land; that it 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.

BOOK 819 PAGE 2159

FLA. DOC. PAID
 \$ 742.50
 Marsha Stiller
 Clerk of Circuit Court
 Martin Co., Fla.
 By Kew D.C.

IN WITNESS WHEREOF the grantor has caused these presents to be executed in its name, and its corporate seal to be hereunto affixed, by its proper officer thereunto duly authorized, the day and year first above written.

Signed, sealed and delivered in the presence of: FAIRVIEW PROPERTIES, INC., a Virginia corporation qualified to do business in the State of Florida as FAIRVIEW SOUTH, INC.

James S. Gose
Lawrence E. Gray
Witnesses

BY: *Stephen J. Broderick* (SEAL)
Stephen J. Broderick, Vice President

STATE OF FLORIDA
COUNTY OF MARTIN

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Stephen J. Broderick, well known to me to be the Vice-President of the corporation named as grantor in the foregoing deed, and that he acknowledged executing the same in the presence of two subscribing witnesses freely and voluntarily under authority duly vested in him by said corporation and that the seal affixed thereto is the true corporate seal of said corporation.

WITNESS my hand and official seal in the County and State last aforesaid this 26th day of June, 1989.

Lawrence E. Gray
NOTARY PUBLIC
My Commission Expires:

(NOTARY SEAL)

Notary Public, State of Florida
My Commission Expires March 17, 1993
Bonded Thru Troy Fain - Insurance Inc.



Parcel Identification Number: 01-38-41-014-000-00130-9

Grantees' Social Security Numbers:

James P. Truitt, Jr. 018-36-8671
Charmaine A. Truitt ~~298~~ 267-98-7980

FILED FOR RECORD
MARTIN CO., FLA.

89 JUL 12 AM 11:10

MARSHA STILLER
CLERK OF CIRCUIT COURT

BY *[Signature]* D.C.

BOOK 819 PAGE 2160

**HILLCREST PROPERTY OWNERS ASSOCIATION, INC.
4 St. Lucie Court
Stuart, Florida 34996**

June 19, 1990

Dr. and Mrs. James P. Truitt
120 Hillcrest Drive
Stuart, Florida 34996

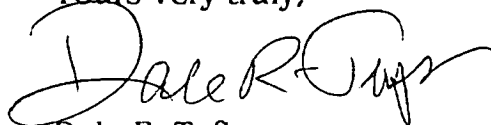
Dear Dr. and Mrs. Truitt:

The Architectural Review Committee of the Hillcrest Property Owners Association, Inc. has reviewed the plans for the residence you propose to construct on Lot 13 of Hillcrest Subdivision.

Your Plans are approved by the Architectural Review Committee as meeting the criteria established in the Declaration of Covenants and Restrictions for Hillcrest adopted December 18, 1986.

A copy of this letter shall serve to notify the Town of Sewall's Point of this action.

Yours very truly,



Dale R. Taft
President
Hillcrest Property Owners
Association, Inc.

✓ cc: Mr. Dale Brown
Building Inspector
Town of Sewall's Point

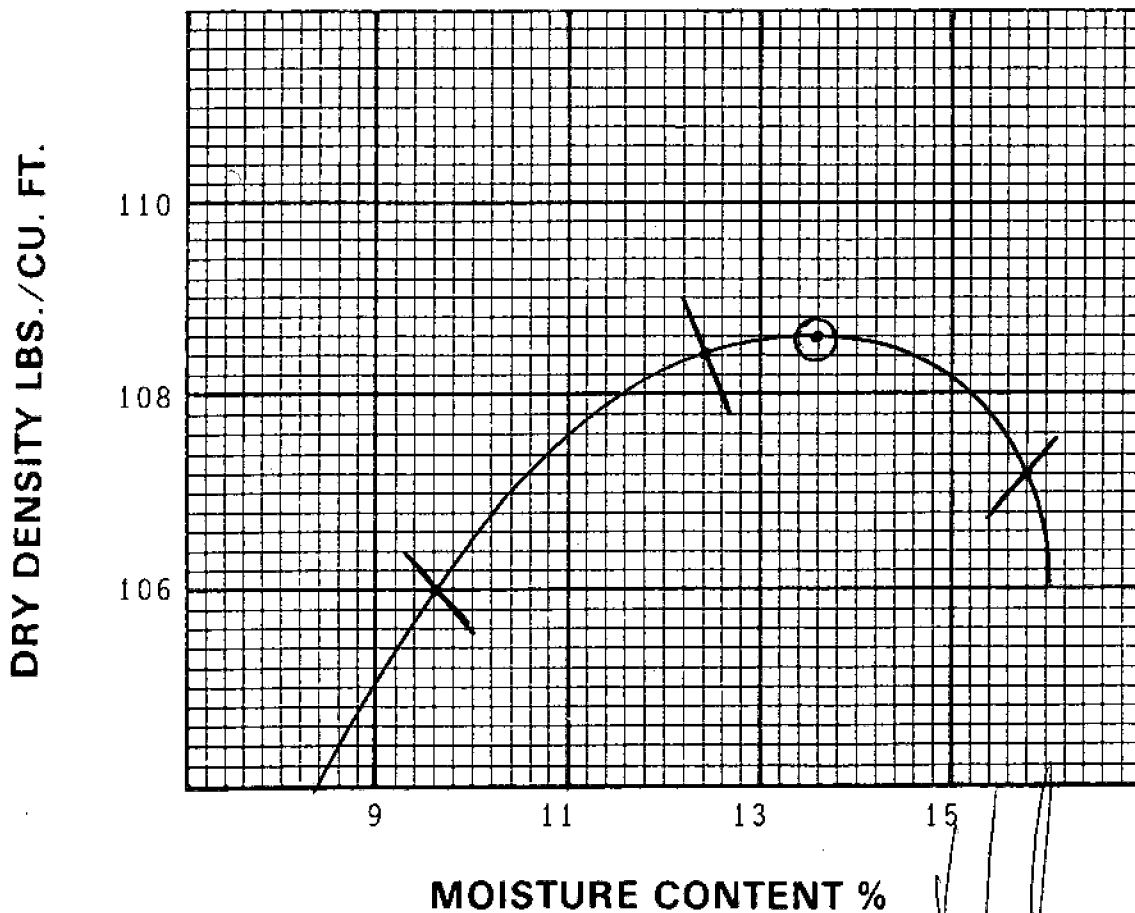
CTES CONSTRUCTION TESTING & ENGINEERING SERVICES, INC.

1666 S.E. Village Green Drive - Unit 5 • Port St. Lucie, Florida 34952
MATERIALS TESTING & INSPECTIONS
SOILS • CONCRETE • ENGINEERING SERVICES
(305) 335-0724 • (305) 878-7772

REPORT OF MOISTURE - DENSITY RELATIONSHIP OF SOIL

PROJECT HOUSE PAD REPORT NO. 093-142-1
LOCATION 123 HILLCREST DRIVE SEWELL'S POINT DATE 6-26-90
CLIENT MOREY & SABIN CONSTRUCTION TYPE PROCTOR T-180
TO BE USED FOR PADFILL
SOIL DESCRIPTION BROWN MEDIUM SAND W/MARL
MAXIMUM DENSITY OF MATERIAL 108.6 P.C.F. OPTIMUM MOISTURE 13.6 %

MOISTURE - DENSITY RELATIONSHIP CURVE



LAB TECHNICIAN RS
PLOTTED BY RS
CHECKED BY VJG

APPROVED VICTOR J. GERLEY, P.E.

CTES CONSTRUCTION TESTING & ENGINEERING SERVICES, INC.

1666 S.E. Village Green Drive - Unit 5 • Port St. Lucie, Florida 34952
 MATERIALS TESTING & INSPECTIONS
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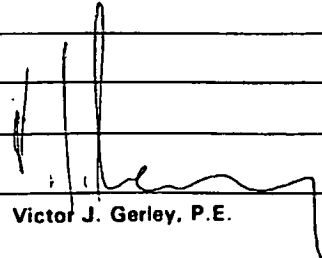
DAILY SOILS INSPECTION

PROJECT HOUSE PAD REPORT NO. 093-142-2
 LOCATION 123 HILLCREST DRIVE SEWELL'S POINT DATE 6-26-90
 CLIENT MOREY & SABIN CONSTRUCTION TYPE PROCTOR T-180
 METHOD OF COMPACTION ROLLER DENSITY REQUIRED 95 %
 SOIL DESCRIPTION BROWN MEDIUM SAND W/MARL
 MAXIMUM DENSITY OF MATERIAL 108.6 P.C.F. OPTIMUM MOISTURE 13.6 %

LOCATIONS AND TEST RESULTS				
TEST NUMBER	TEST LOCATION	DEPTH BELOW FINISHED GRADE	PERCENT MOISTURE	PERCENT COMPACTION
1	15' SW of NE Corner	0-1	10.0	98.7
2	20' N of Center of S Side	0-1	11.1	99.4
3	20' S of Center of N Side	0-1	10.1	97.7
4	15' NE of SW Corner	0-1	11.3	99.1

REMARKS: _____

FIELD TECHNICIAN RS

APPROVED 
 Victor J. Gerley, P.E.

SHEET 2 OF 2

RECORD OF INSPECTIONS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 4/2/91

This is to request that a Certificate of Approval for Occupancy be issued to James Pruitt
 For property built under Permit No. 2797 Dated 6/20/90 when completed in
 conformance with the Approved Plans. 123 Hillcrest Court

Item	Date	Signed	Approved by
1. LOT STAKES/SET BACKS	<u>7/3/90</u>		
2. TERMITE PROTECTION	<u>8/7/90</u>		
3. FOOTING - SLAB	<u>7/12/90</u>		
4. ROUGH PLUMBING	<u>7/5/90</u>		
5. ROUGH ELECTRIC	<u>11/15/90</u>		
6. LINTEL	<u>7/30/90</u>		
7. ROOF	<u>1/29/91</u>		
8. FRAMING	<u>11/15/90</u>		
9. INSULATION	<u>11/27/90</u>		
10. A/C DUCTS	<u>11/15/90</u>		
11. FINAL ELECTRIC	<u>4/2/91</u>		
12. FINAL PLUMBING	<u>4/2/91</u>		
13. FINAL CONSTRUCTION	<u>4/2/91</u>		

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Dale Brown 4/2/91 date

Approved by Building Commissioner [Signature] date

Utilities notified F.P.L. 4/2/91 date

Original Copy sent to OWNER

(Keep carbon copy for Town files)

2849

POOL

Permit No.

2849

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 James D. & Mrs. Truitt Present Address N/A

Phone N/A

Contractor Charles D. Pettill Address 1515 E 16th Ct.

Phone 288-4442 Stuart Fl.

Where licensed Martin Co. License number SP 00034

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: Pool

State the street address at which the proposed structure will be built: 123 Hillcrest Dr. Hillcrest Sub.

Subdivision Hillcrest Lot number 13 Block number Pt 10 Pg 39

Contract price \$ 12,800.00 Cost of permit \$ 100XX

Plans approved as submitted Plans approved as marked

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

Contractor Charles D. Pettill

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 Chaimane [Redacted]

TOWN RECORD

Date submitted Approved: Pale Bro 9/12/90
Building Inspector Date

Approved: Commissioner Date Final Approval given: Date

Certificate of Occupancy issued (if applicable) Date

SP1282

Permit No. 2849

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.

2999

GAZEBO

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 DR + MRS JAMES TRUITT Present Address 39 S. RIVER DR. SEWELL'S POINT, FL
Phone (407) 283-0901

Contractor MOREY + SABIN CONSTRUCTION Address 721 COLORADO AVE STUART, FL 34994
Phone (407) 288-0400

Where licensed STATE OF FLORIDA License number CCCO22768

Electrical contractor P.S.L. ELECTRIC License number ME00103

Plumbing contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: GALEBO

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

39 S. RIVER DR SEWELL'S POINT, FL

Subdivision HILLCREST Lot number 13 Block number _____

Contract price \$ 3000.00 Cost of permit \$ 80.00

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Charles H. Sabo, Jr

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 Charmaine Pruitt

TOWN RECORD

Date submitted _____ Approved: Dale Brown 5/24/91
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.

3050

FENCE

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

3050

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 JAMES TRUIT Present Address 39 S. RIVER RD

Phone 283-0901

Contractor UNITED FENCE Address 367 NOTLEM DR., WHITE CITY

Phone 335-2627

Where licensed MARTIN + PSC License number SP.00544

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: 1000 SQ. FT. PERIMETER FENCE (5') OF

WOOD PICKETT + S' CHAIN LINK OFF ST. LUCAS CT.
State the street address at which the proposed structure will be built:

Subdivision HILL CREST # 39 S. RIVER RD. Lot number _____ Block number _____

Contract price \$ 1109.00 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-tapping" the construction project.

Contractor George Truit

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 James Truit

TOWN RECORD

Date submitted _____ Approved: 1/11 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.

1210 RICKENBACKER TERRACE
PORT ST. LUCIE, FL 34952

**UNITED
UNITED
UNITED
UNITED**
Fence & Steel

GEORGE QUINN
335-2627

CHAIN LINK &
BEAUTIFUL CUSTOM
WOOD FENCES AND
DECKS SINCE 1964

**WE BUILD
ANY FENCE**

LICENSED & INSURED

NAME JAMES TRUIT
ADDRESS 39 S. RIVER RD.
CITY SEWALLS PT. (PINK)
PHONE 283-0901

DATE 8.15.91.
TOTAL FOOTAGE 161'

FENCE 5' CONT. Pickett
TOP RAIL 2x4
LINE POST 4x4
CORNER POST 4x4
END POST 4x4
GATE POST 6x6
WALK GATES 1- 5x5'-6"
DOUBLE DRIVE GATES 0
WOOD FENCE PRES. TREATED
WOOD POSTS 4 11
SURVEY YES
HOT DIPPED GALVO. NAILS 16d YES
FENCE LINE CLEARED YES

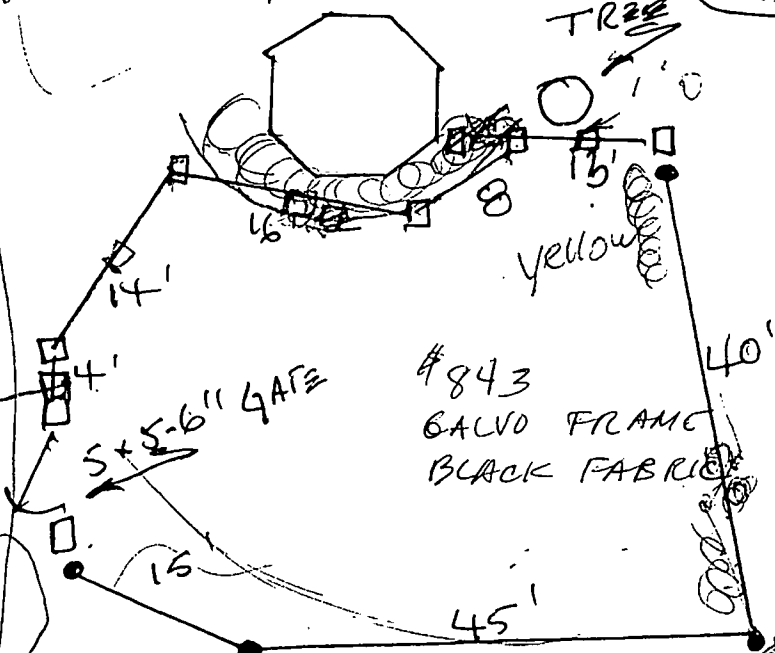
48'- 5' Pickett
100'- 5' CHAIN LINK ~~875.00~~

61' 5' Pickett GALVO
100' 5' CHAIN LINK w/ WOOD GATE 1109.00

WITH BLACK CHAIN LINK \$1306.00

BLACK CHAIN LINK EVERYWHERE
GALVO EVERYWHERE \$770.00 1104.00

	Height	# Rolls	1 1/2"	1 3/4"	2"	2 1/2"
FABRIC		60				
FABRIC		2				
TERMINAL POSTS		7				4
LINE POSTS			8			
RAIL ENDS			6			
BRACE BANDS						6
TENSION BARS		27				24
TENSION BANDS						4
TERMINAL CAPS						4
LOOP CAPS			8			
TOP RAIL	5-1/2"	1047				
BARB ARMS						
BARB WIRE						
TIES	100					
GATES						
MALES						
FEMALES						
FORKS						
BACKS						
DROP RODS						



TOTAL PRICE ~~\$825.00~~ 1109.00
LESS DEPOSIT \$450.00
C.O.D. ON COMPLETION \$659.00
SALESMAN George Quinn
CUSTOMER _____
OFFICE ACCEPTANCE _____

Prices quoted do not include any clearing of fence lines. United will clear fence lines for a fee of \$25.00 per man, per hour. The above is an estimate based on our inspection and does not cover any additional labor which may be required after the work has been opened up. Occasionally, after the work has started, large buried objects are discovered which were not evident on the first inspection. Because of this the above prices may have to be renegotiated. This circumstance is rare.

VARIANCE

THOMAS P. BAUSCH
Mayor

TOWN OF SEWALL'S POINT

JOSEPH C. DORSKY
Town Manager

MARC S. TEPLITZ
Vice Mayor

JOAN H. BARROW
Town Clerk

E. DANIEL MORRIS
Commissioner

LARRY E. McCARTY
Chief of Police

JAMES D. BERCAW
Commissioner

GENE SIMMONS
Building Official

RICHARD L. BARON
Commissioner



JOSE TORRES, JR.
Maintenance

March 31, 2002

Mr. Robert Rimer
39 South River Road
Sewall's Point, FL 34996

Re: Chimney Variance

Dear Mr. Rimer:

This is the final accounting regarding the above-referenced variance:

9/01	Tim B. Wright - legal fees	\$100.00
11/01	Tim B. Wright - legal fees	25.00
1/02	Clerk of Circuit Court recording fees	<u>19.50</u>
	TOTAL DUE	\$144.50

PAID

Kindly make your check payable to the "Town of Sewall's Point."

Also enclosed is a copy of the recorded variance. Please do not hesitate to contact me if you require anything further.

Sincerely,

TOWN OF SEWALL'S POINT

Joan Barrow, Town Clerk/Treasurer



One South Sewall's Point Road, Sewall's Point, Florida 34996
Town Hall (561) 287-2455 • Fax (561) 220-4765 • E-Mail: clerk@sewallspoint.org
Police Department (561) 781-3378 • Fax (561) 286-7669 • E-Mail: police@sewallspoint.org

INSTR # 1536969
OR BK 01600 PG 0099
RECORDED 11/29/2001 03:58 PM
MARSHA EWING
MARTIN COUNTY Florida
RECORDED BY S Phoenix

RESOLUTION NO. 566

A RESOLUTION OF THE TOWN OF SEWALL'S POINT, FLORIDA, GRANTING THE APPLICATION OF S. ROBERT RIMER, PURSUANT TO THE TOWN OF SEWALL'S POINT CODE OF ORDINANCES, PART II, CHAPTER 82 ZONING, ARTICLE V, SUPPLEMENTARY REGULATIONS, DIVISION 2, AREA AND HEIGHT REQUIREMENTS, SECTION 82-421, TO CONSTRUCT TWO CHIMNEYS TO A HEIGHT OF TWO-FEET ABOVE THE THREE FOOT HEIGHT EXCEPTIONS IN SECTION 82-421,

WHEREAS, S. ROBERT RIMER (the "Applicant") has applied to the Town of Sewall's Point Commission for permission to construct two Chimneys to a height of two-feet greater than the height exception in Section 82-421 of the Town of Sewall's Point Code of Ordinances, on the property which is described in Exhibit "A", and;

WHEREAS, the proposed location of the chimneys is set forth in the building plans submitted to the Town of Sewall's Point Building Department and;

WHEREAS, the Town Commission considered the request of the Applicant at a public meeting held on Tuesday, August 21, 2001 and;

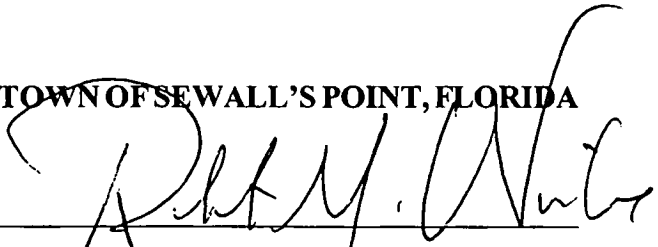
WHEREAS, the Town Commission determined that it was in the interest of the health safety and welfare of the Town to grant the Application.

NOW THEREFORE BE IT RESOLVED, by the Town Commission of Sewall's Point that the Applicant is granted permission pursuant to the Code to construct two-

chimneys on the property which is described in Exhibit "A", to height of two-feet higher than the three foot height exception provide for in Section 82-421 of the Sewall's Point Code of Ordinances attached as Exhibit "B".

PASSED AND ADOPTED this twenty-first day of August, 2001

TOWN OF SEWALL'S POINT, FLORIDA



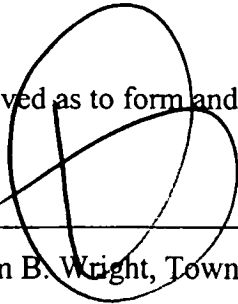
ROBERT M. WIENKE, Mayor

ATTEST:



JOAN BARROW, Town Clerk

Approved as to form and correctness:



Tim B. Wright, Town Attorney

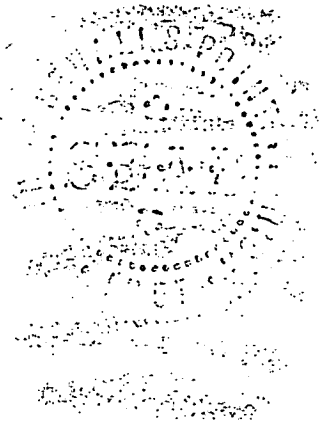


EXHIBIT "A"

LEGAL DESCRIPTION

29 SOUTH RIVER ROAD

**ARBELA PART OF LOT 4 WEST OF
SEWALL'S POINT ROAD, BEING THE
NORTH 125 FEET OF THE WEST 332
FEET AS MEASURED ON NORTH/LN
OF LOT 4 (LOT 1, SATIN LEAF)**

EXHIBIT "B"

APPLICABLE SECTION OF THE CODE OF ORDINANCES

CODE OF ORDINANCES Town of SEWALL'S POINT, FLORIDA
Codified through Ord. No. 282, adopted Feb. 29, 2000. (Supp. No. 1)
PART II CODE OF ORDINANCES
Chapter 82 ZONING*
ARTICLE V. SUPPLEMENTARY REGULATIONS
DIVISION 2. AREA AND HEIGHT REQUIREMENTS
Sec. 82-421. Exceptions to height limitations.

The height limitations of this chapter shall not apply to church spires, belfries, cupolas and domes not used for human occupancy, or to chimneys, ventilators, skylights and other similar features usually carried above the roof level. Such features, however, shall be erected only to such height as is necessary to accomplish the purpose they are to serve, and in no event shall such height exception exceed three feet without the permission of the town commission. Notice is required as provided in section 2-325.
(Ord. No. 95, § XI.C, 11-17-1976; Ord. No. 252, § VII, 12-15-1998)

WRIGHT, PONSOLDT & LOZEAU
TRIAL ATTORNEYS, L.L.P.

1000 S.E. Monterey Commons Boulevard
Suite 208
Stuart, Florida 34996
Telephone: (561) 286566
Facsimile: (561) 286102
E-Mail: timwright@wpltrialattorneys.com

Tim B. Wright
William R. Ponsoldt, Jr.
Louis E. Lozeau, Jr.

October 31, 2001

Mrs. Joan H. Barrow, Town Clerk
Town of Sewall's Point
1 South Sewall's Point Road
Sewall's Point, Florida 34996

Re: Town of Sewall's Point; Rimer Variance Request

Dear Joan:

I enclose the original resolution on the referenced matter prepared by Mr. Rimer. Please have the resolution executed and recorded in the Martin County, Florida, public records at the applicant's expense.

Sincerely yours,


Tim B. Wright

TBW/mcf

cc: Mr. Gene Simmons
Mr. S. Robert Rimer

*Mayor
please
sign
page 2*

*OK to court
house*

Property Owners within 300' of Neil Diamond:

Pennie M. and C. Thomas LaFon, Jr.
120 Hillcrest Drive

Rossina and Douglas Allen
118 Hillcrest Drive

Marjolein Van'T Bosch
Bareld J. Doedens
36 South River Road

Roy Allman (Tr.)
66 North Sewall's Point Road

Margaret N. Innes
113 Hillcrest Drive

John P. Bartels (Tr.)
3 St. Lucie Court

Mary R. Boning
1618 Wales Avenue
Baldwin, NY 11510

Phyllis and Peter Lopilato
4 St. Lucie Court

T. Sharlyn and Landrun B. Page
8 St. Lucie Court

David A. Nehme, M..D.
19 South Sewall's Point Road

Jacqueline and Jeffrey Lazarus, M.D.
31 South River Road

Rita P. McSwiney
16 Miramar Road

Nancy and Thomas Neild, Jr.
12 Miramar Road

Judie C. and J. R. Staples
1122 Park Street North
St. Petersburg, FL 33710-4338

Sonja J. and James C. Davis
900 3rd Street
International Falls, MN 56649

Margaret S. and Louis Volpe
15 Miramar Road

* All addresses are Sewall's Point 34996 unless otherwise noted

** Information from Martin County Property Appraiser 2000 Assessment Tax Roll

A REQUEST TO ADD TWO FEET IN HEIGHT TO THE EXISTING CHIMNEYS IN THE MAIN RESIDENCE ON THIS PROPERTY WILL BE HEARD BY THE SEWALL'S POINT TOWN COMMISSION AT IT'S NEXT REGULAR MEETING AS NOTICED BELOW

Day/date: Tuesday, August 21, 2001

Time: 7:00 P.M.

**Location: Sewall's Point Town Hall
1 South Sewall's Point Road
Sewall's Point, Florida**

CHIMNEY HEIGHT PERMISSION REQUEST

To the

TOWN OF SEWALL'S POINT

For

The Residence of

S. Robert Rimer, Trustee

**29 South River Road
Town of Sewall's Point
Martin County
Florida**

August 2001

Submitted by:
Lear Development Corp.
S. Robert Rimer, President
Post Office Box 1048
Stuart, FL 34995-1048
Phone: (561) 287-8866
Fax: (561) 220-0090

PERMISSION REQUEST SUMMARY

Specific Permission: Chimney structure height

Height Permitted: Twenty-Seven (27) feet plus Three (3) feet for a total of Thirty (30) feet.

Height Requested: Thirty-Two (32) Feet

Differential: Two (2) feet

Reason for Request: To permit chimneys and terminal caps to be architecturally proportioned and aesthetically pleasing, expressing the building style established for this residence and to camouflage the unsightly spark arrester.

M.A. CORSON & ASSOCIATES, INC.

ARCHITECTURE STRUCURAL DESIGN

800 SE Ocean Blvd., Suite C Stuart, Fl. 34994

(561) 223-8227 * Lic.# AA2971

Dear Honorable Mayor and Commissioners;

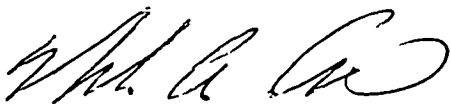
I am writing on behalf of Mr. S. Robert Rimer, to offer my views on the matter of the chimney height at the residence under construction at 29 South River Road.

The South Florida Building Code (Dade County Edition) requires that "Chimneys shall extend to a height not less than 24 inches above the highest point of the roof within a radius of 10 feet.", which is the lowest discharge opening. In addition, a spark-arresting termination cap must be added on top of the chimney. These range in height from approximately 10 inches to almost 3 feet. This places the top at a height of minimally 3 feet above the roof or approximately 30 feet in height, and precludes any architectural expression on a chimney for a two-story dwelling. Additionally, there is no provision for line-of-sight viewing angles which may obscure all or nearly all of the chimney.

Chimney terminal caps similar to those shown on the enclosed page, are not very pleasing and are detrimental to the architectural design. What we have attempted to do is to not only provide protection to said cap, but also to hide it in an architecturally proportioned and aesthetically pleasing enclosure which expresses the building style established for this residence.

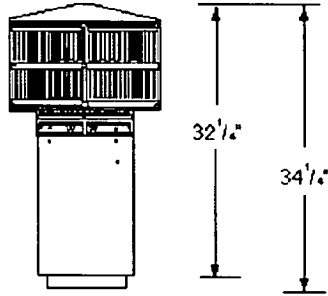
Enclosed are two photographs. The first photograph is of the residence now under construction as viewed from the street. The chimneys in this photograph are 3 feet above the top of the roof at a height of thirty feet. Please notice that as a result of the viewing angle from the street, they are barely visible. The second photograph is identical to the first except that the proposed terminal caps have been digitally added to reflect the residence as it will be viewed from the street if you approve this request. In the event that you do not see fit to grant this request then the present chimneys will, of necessity, be lowered one foot and spark arresting terminal caps added. As you can see from the photographs, all that would be visible from the street would be the rather unattractive caps which would not be befitting a home of this caliber.

I respectfully request that you give Mr. Rimer Commission permission to add a two foot chimney cap enclosure above the 30' current height

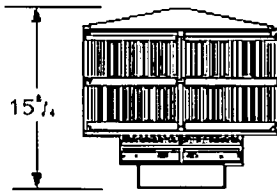


7/25/01

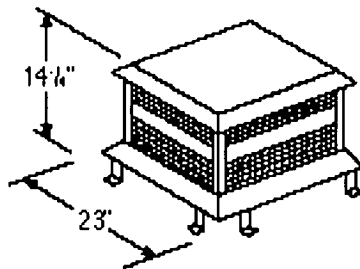
CHIMNEY CAPS



**TR342
ROUND TELESCOPING
TERMINAL CAP**



**TR344
ROUND TERMINAL CAP
WITH STORM COLLAR**



**ST375
SQUARE TERMINAL CAP**

APPLICABLE SECTION OF THE CODE OF ORDINANCES

CODE OF ORDINANCES Town of SEWALL'S POINT, FLORIDA
Codified through Ord. No. 282, adopted Feb. 29, 2000. (Supp. No. 1)

PART II CODE OF ORDINANCES

Chapter 82 ZONING*

ARTICLE V. SUPPLEMENTARY REGULATIONS

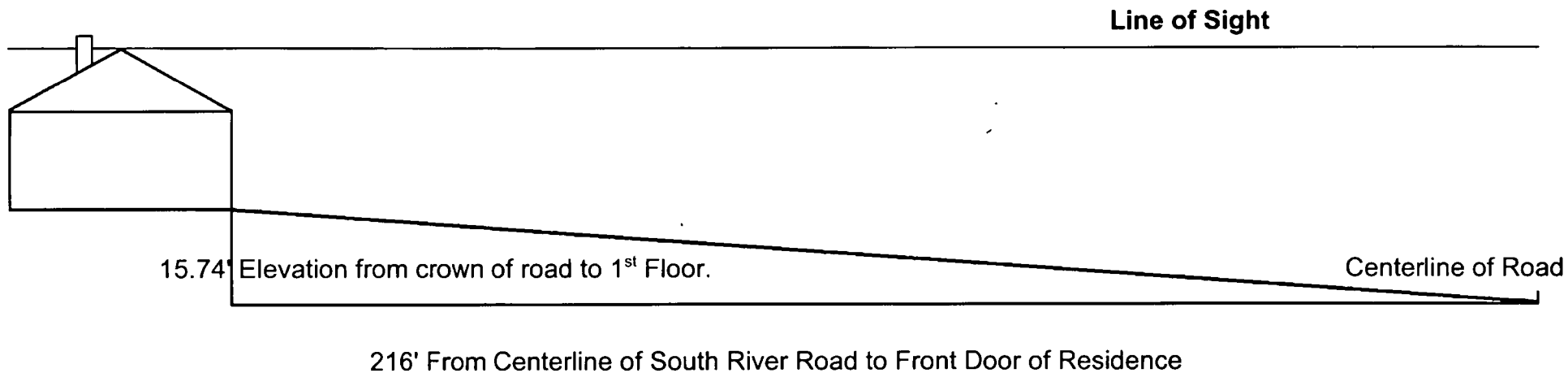
DIVISION 2. AREA AND HEIGHT REQUIREMENTS

Sec. 82-421. Exceptions to height limitations.

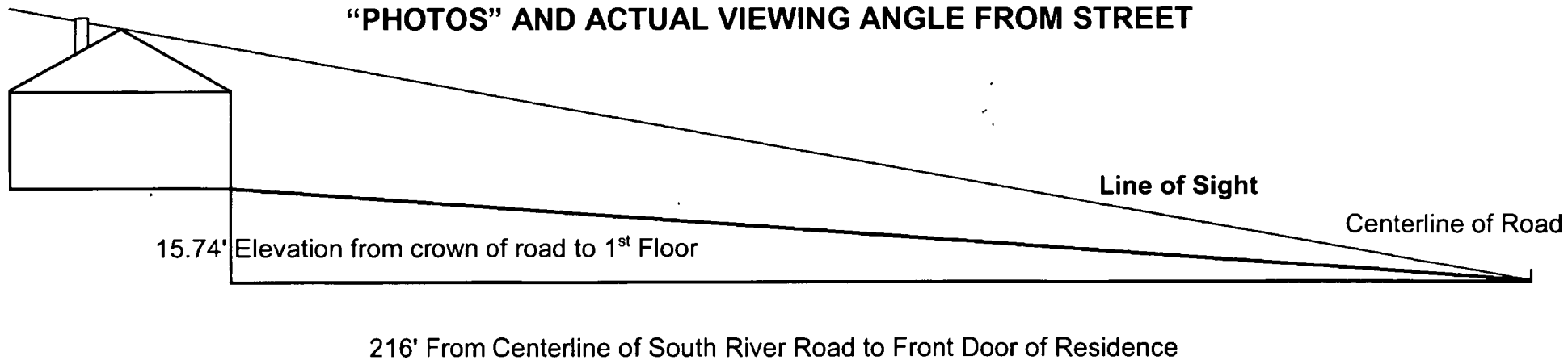
The height limitations of this chapter shall not apply to church spires, belfries, cupolas and domes not used for human occupancy, or to chimneys, ventilators, skylights and other similar features usually carried above the roof level. Such features, however, shall be erected only to such height as is necessary to accomplish the purpose they are to serve, and in no event shall such height exception exceed three feet without the permission of the town commission. Notice is required as provided in section 2-325.
(Ord. No. 95, § XI.C, 11-17-1976; Ord. No. 252, § VII, 12-15-1998)

VIEWING ANGLES

"ELEVATIONS"

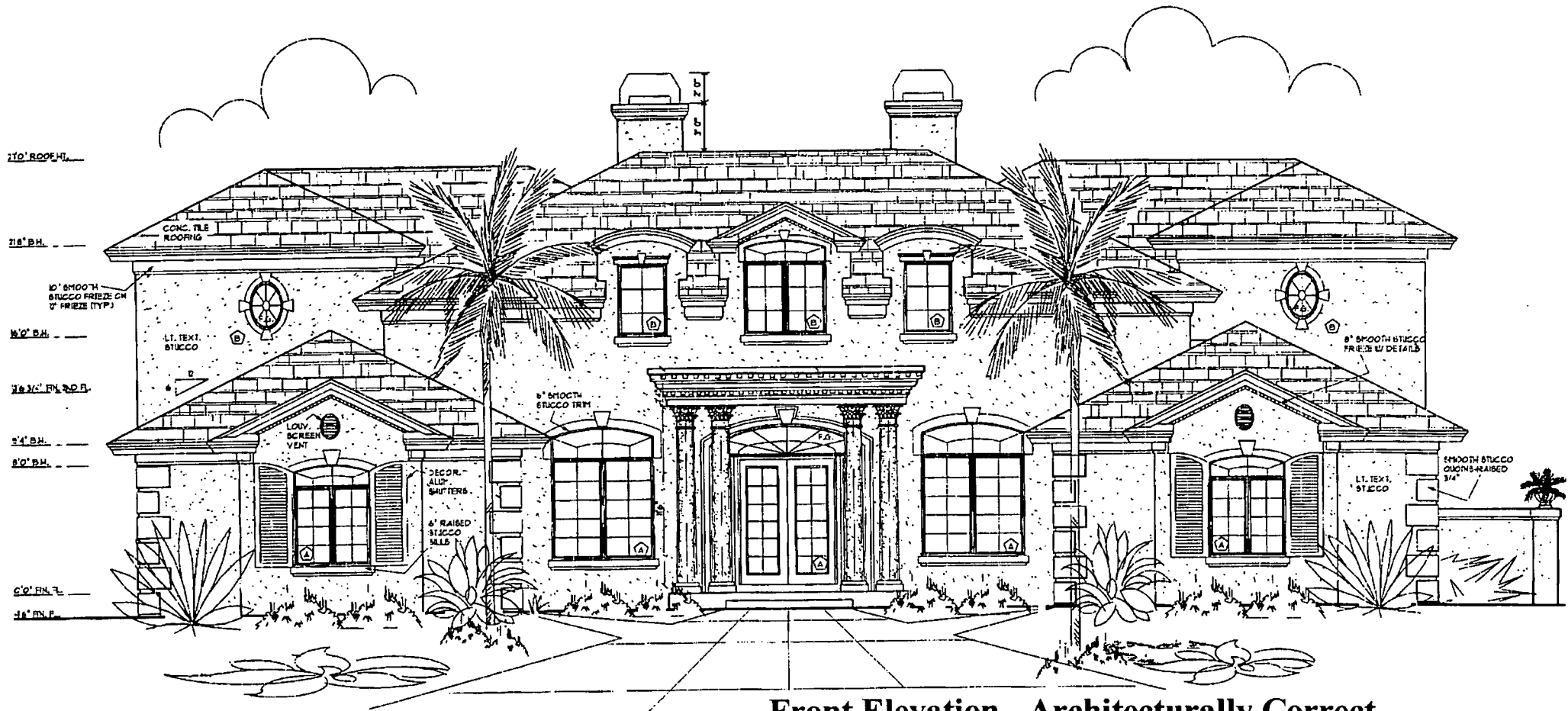


"PHOTOS" AND ACTUAL VIEWING ANGLE FROM STREET





Front Elevation - 2 ft. Chimney - 1 ft. Spark Arrestor



Front Elevation - Architecturally Correct



Residence with chimneys in place at a legally permitted height of 3' above 27'

(Detached Guest House shown in foreground)



Proposed terminal caps digitally added to illustrate the requested 2' height exception

(Detached Guest House shown in foreground)

LEAR DEVELOPMENT CORPORATION

Post Office Box 1048
Stuart, Florida 34995-1048
(561) 287-8866

August 1, 2001

Dear Property Owner;

This notice is sent to you because, according to the records at the Sewall's Point Town Hall and the Martin County Property Appraiser's office, your property is located within 300 feet of the residence we are constructing at 29 South River Road in Sewall's Point..

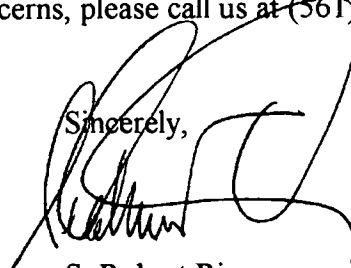
At the next regular meeting of the Town of Sewall's Point Commission, we will ask permission to add an attractive chimney cap, two-foot in height, to the existing chimneys. As a member of the public you will have an opportunity to be heard on this matter if you so choose.

The meeting information is as follows:

Day/date: Tuesday, August 21, 2001
Time: 7:00 P.M.
Location: Sewall's Point Town Hall
1 South Sewall's Point Road
Sewall's Point, Florida

If you have any questions or concerns, please call us at (561) 287-8866.

Sincerely,

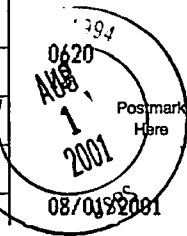


S. Robert Rimer
President

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34
	\$2.10
Certified Fee	
Return Receipt Fee (Endorsement Required)	\$1.50
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



Recip: Pennie M. & C. Thomas LaFon, Jr. (iller)

Street: 120 Hillcrest Drive

City, St: Sewall's Point, FL 34996

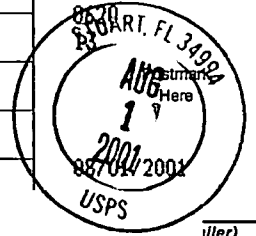
PS Form Instructions

7000 0520 0014 1316 1041

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34
	\$2.10
Certified Fee	
Return Receipt Fee (Endorsement Required)	\$1.50
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



Recip: Roy Allman (Tr.) (iller)

Street: 66 North Sewall's Point Road

City, St: Sewall's Point, FL 34996

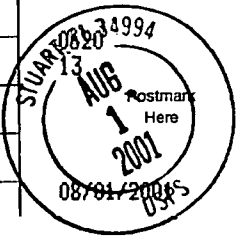
PS Form Instructions

7000 0520 0014 1316 1072

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34
	\$2.10
Certified Fee	
Return Receipt Fee (Endorsement Required)	\$1.50
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



Recip: Rossina and Douglas Allen (iller)

Street: 118 Hillcrest Drive

City, St: Sewall's Point, FL 34996

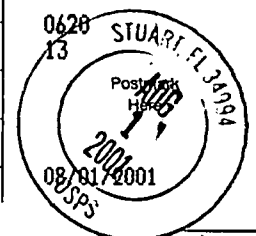
PS Form Instructions

7000 0520 0014 1316 1058

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34
	\$2.10
Certified Fee	
Return Receipt Fee (Endorsement Required)	\$1.50
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



Recip: Margaret N. Innes (iller)

Street: 113 Hillcrest Drive

City, St: Sewall's Point, FL 34996

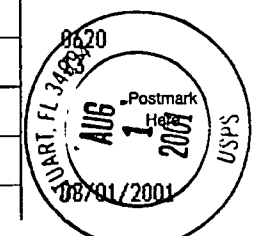
PS Form Instructions

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U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34
	\$2.10
Certified Fee	
Return Receipt Fee (Endorsement Required)	\$1.50
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



Recip: Marjolein Van'T Bosch Bareld J. Doedens (iller)

Street: 36 South River Road

City, St: Sewall's Point, FL 34996

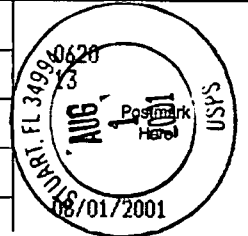
PS Form Instructions

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U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

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Certified Fee	
Return Receipt Fee (Endorsement Required)	\$1.50
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



Recip: John P. Bartels (Tr.) (iller)

Street: 3 St. Lucie Court

City, St: Sewall's Point, FL 34996

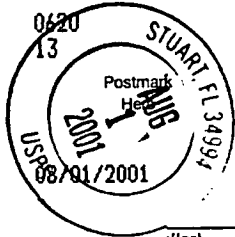
PS Form Instructions

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U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

BALDWIN NY 11510

Postage	\$ 0.34
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Certified Fee	\$1.50
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



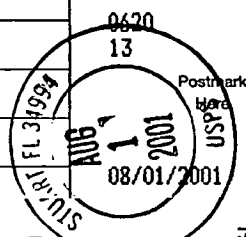
Recip: **Mary R. Boning** (filler)
 Street: **1618 Wales Avenue**
 City: **Baldwin, NY 11510**
 PS Form Instructions

7000 0520 0014 1316 1102

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34
	\$2.10
Certified Fee	\$1.50
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



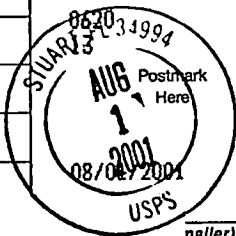
Recip: **David A. Nehme, M.D.** (filler)
 Street: **19 South Sewall's Point Road**
 City: **Sewall's Point, FL 34996**
 PS Form Instructions

7000 0520 0014 1316 1133

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34
	\$2.10
Certified Fee	\$1.50
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



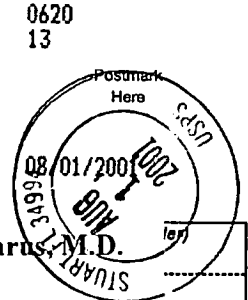
Re: **Phyllis & Peter Lopilato** (filler)
 Street: **4 St. Lucie Court**
 City: **Sewall's Point, FL 34996**
 PS Form Instructions

7000 0520 0014 1316 1119

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34
	\$2.10
Certified Fee	\$1.50
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



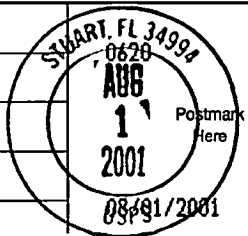
Recip: **Jacqueline & Jeffrey Lazarus, M.D.** (filler)
 Street: **31 South River Road**
 City: **Sewall's Point, FL 34996**
 PS Form Instructions

7000 0520 0014 1316 1140

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34
	\$2.10
Certified Fee	\$1.50
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 3.94



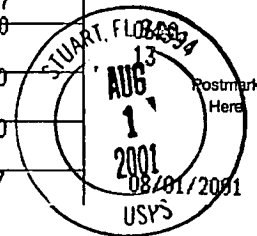
Recip: **T. Sharlyn & Landrun B. Page** (filler)
 Street: **8 St. Lucie Court**
 City: **Sewall's Point, FL 34996**
 PS Form Instructions

7000 0520 0014 1316 1126

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.57
	\$2.10
Certified Fee	\$1.50
Return Receipt Fee (Endorsement Required)	\$0.00
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 4.17



Recip: **Rita P. McSwiney** (filler)
 Street: **16 Miramar Road**
 City: **Sewall's Point, FL 34996**
 PS Form Instructions

7000 0520 0014 1316 1157

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34	0620 13 Stuart, FL 34996 AUG 08/01/2001 USPS
	\$2.10	
Certified Fee	\$1.50	
Return Receipt Fee (Endorsement Required)	\$0.00	
Restricted Delivery Fee (Endorsement Required)	\$3.94	
Total Postage & Fees	\$ 3.94	

Rec: Nancy and Thomas Neild, Jr. (Maller)
 Street: 12 Miramar Road
 City: Sewall's Point, FL 34996
 PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0014 1316 1164

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

STUART FL 34996

Postage	\$ 0.34	0620 13 Stuart, FL 34996 AUG 08/01/2001 USPS
	\$2.10	
Certified Fee	\$1.50	
Return Receipt Fee (Endorsement Required)	\$0.00	
Restricted Delivery Fee (Endorsement Required)	\$3.94	
Total Postage & Fees	\$ 3.94	

Rec: Margaret S. & Louis Volpe (Maller)
 Street: 15 Miramar Road
 City: Sewall's Point, FL 34996
 PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0014 1316 1195

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

SAINT PETERSBURG FL 33710

Postage	\$ 0.34	0620 07 Stuart, FL AUG 2 Postmark Here USPS 08/02/2001
	\$2.10	
Certified Fee	\$1.50	
Return Receipt Fee (Endorsement Required)	\$0.00	
Restricted Delivery Fee (Endorsement Required)	\$3.94	
Total Postage & Fees	\$ 3.94	

Recipient's Name (Please Print Clearly) (To be completed by mailer)
 JUDIE & JR. C. STAPLES
 Street, Apt. No., or PO Box No.
 1122 PARK ST N.
 City, State, ZIP+4
 ST. PETERSBURG FL 33710-4338
 PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0013 7406 1299

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

MIAMI FL 33131

Postage	\$ 0.34	0620 07 Stuart, FL AUG 2 Postmark Here USPS 08/02/2001
	\$2.10	
Certified Fee	\$1.50	
Return Receipt Fee (Endorsement Required)	\$0.00	
Restricted Delivery Fee (Endorsement Required)	\$3.94	
Total Postage & Fees	\$ 3.94	

Recipient's Name (Please Print Clearly) (To be completed by mailer)
 CANTLER HUBBS, LTD, SUITE 3150
 Street, Apt. No., or PO Box No.
 200 S. DISCAINE BLVD.
 City, State, ZIP+4
 MIAMI FL 33131
 PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0013 7406 1305

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

INTERNATIONAL FALLS MN 56649

Postage	\$ 0.34	0620 13 Stuart, FL 34994 AUG 1 Postmark Here USPS 08/01/2001
	\$2.10	
Certified Fee	\$1.50	
Return Receipt Fee (Endorsement Required)	\$0.00	
Restricted Delivery Fee (Endorsement Required)	\$3.94	
Total Postage & Fees	\$ 3.94	

Rec: Sonja J. & James C. Davis (Maller)
 Street: 900 3rd Street
 City: International Falls, MN 56649
 PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0014 1316 1188

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

SAINT PETERSBURG FL 33710

Postage	\$ 0.34	0620 13 Stuart, FL 34994 AUG 1 Postmark Here USPS 08/01/2001
	\$2.10	
Certified Fee	\$1.50	
Return Receipt Fee (Endorsement Required)	\$0.00	
Restricted Delivery Fee (Endorsement Required)	\$3.94	
Total Postage & Fees	\$ 3.94	

Rec: Judie C. & J. R. Staples (Maller)
 Street: 1122 Park Street North
 City, S: St. Petersburg, FL 33710-4338
 PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0014 1316 1177

PROPERTY OWNERS WITHIN 300 FEET

- ✓ Pennie M. and C. Thomas LaFon, Jr.
120 Hillcrest Drive
Sewall's Point, FL 34996
- ✓ Rossina and Douglas Allen
118 Hillcrest Drive
Sewall's Point, FL 34996
- ✓ Marjolein Van'T Bosch Bareld J. Doedens
36 South River Road
Sewall's Point, FL 34996
- ✓ Roy Allman (Tr.)
66 North Sewall's Point Road
Sewall's Point, FL 34996
- ✓ Margaret N. Innes
113 Hillcrest Drive
Sewall's Point, FL 34996
- ✓ John P. Bartels (Tr.)
3 St. Lucie Court
Sewall's Point, FL 34996
- ✓ Mary R. Boning
1618 Wales Avenue
Baldwin, NY 11510
- ✓ Phyllis and Peter Lopilato
4 St. Lucie Court
Sewall's Point, FL 34996
- ✓ T. Sharlyn and Landrun B. Page
8 St. Lucie Court
Sewall's Point, FL 34996
- ✓ David A. Nehme, M..D.
19 South Sewall's Point Road
Sewall's Point, FL 34996
- ✓ Jacqueline and Jeffrey Lazarus, M.D.
31 South River Road
Sewall's Point, FL 34996
- ✓ Rita P. McSwiney
16 Miramar Road
Sewall's Point, FL 34996
- ✓ Nancy and Thomas Neild, Jr,
12 Miramar Road
Sewall's Point, FL 34996
- ✓ Judie C. and J. R. Staples
1122 Park Street North
St. Petersburg, FL 33710-4338
- ✓ Sonja J. and James C. Davis
900 3rd Street
International Falls, MN 56649
- ✓ Margaret S. and Louis Volpe
15 Miramar Road
Sewall's Point, FL 34996
- ✓ Cantler Holdings, LTD
C/O Shulte & Buslang
200 South Biscayne Boulevard
Suite 3150
Miami, FL 33131
- ✓ J.R. & Judie C. Staples
1122 Part Street N.
St. Petersburg, FL 33710-4338

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Roy Allman (Tr.)
 66 North Sewall's Point Road
 Sewall's Point, FL 34996

2. Article Number (Copy from service label)
 7000 0520 0014 1316 1072

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Tyler Burnham B. Date of Delivery 8/3/01

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No
2336 SE Ocean Blvd #202
STUART, FL 34996

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marjolein Van'T Bosch Barend J. Doedens
 36 South River Road
 Sewall's Point, FL 34996

2. Article Number (Copy from service label)
 7000 0520 0014 1316 1065

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 8/2/01

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Margaret N. Innes
 113 Hillcrest Drive
 Sewall's Point, FL 34996

2. Article Number (Copy from service label)
 7000 0520 0014 1316 1089

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 8/2/01

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John P. Bartels (Tr.)
 3 St. Lucie Court
 Sewall's Point, FL 34996

2. Article Number (Copy from service label)
 7000 0520 0014 1316 1096

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 4 AUG

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

T. Sharlyn & Landrun B. Page
 8 St. Lucie Court
 Sewall's Point, FL 34996

2. Article Number (Copy from service label)
 7000 0520 0014 1316 1126

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 8/2/01

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Phyllis & Peter Lopilato
 4 St. Lucie Court
 Sewall's Point, FL 34996

2. Article Number (Copy from service label)
 7000 0520 0014 1316 1119

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 3 A

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

David A. Nehme, M.D.
 19 South Sewall's Point Road
 Sewall's Point, FL 34996

2. Article Number (Copy from service label)
 7000 0520 0014 1316 1133

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 8/2/01

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jacqueline & Jeffrey Lazarus, M.D.
 31 South River Road
 Sewall's Point, FL 34996

2. Article Number (Copy from service label)
 7000 0520 0014 1316 1140

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 8/2/01

C. Signature [Signature] Agent Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nancy and Thomas Neild, Jr.
12 Miramar Road
Sewall's Point, FL 34996

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
NANCY NEILD 8/3/01
C. Signature X Nancy E Neild Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rita P. McSwiney
16 Miramar Road
Sewall's Point, FL 34996

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
8/2/01
C. Signature X Rita P McSwiney Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)
7000 0520 0014 1316 1104
PS Form 3811, July 1999

2. Article Number (Copy from service label)
7000 0520 0014 1316 1157
Form 3811, July 1999

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

I.R. & JUDIE C. STAPLES
1122 PARK ST. N.
ST. PETERSBURG, FL
33710-4338

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
8-4-01
C. Signature X [Signature] Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sonja J. & James C. Davis
900.3rd Street
International Falls, MN 56649

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
SONJA DAVIS 8 AUG 2001
C. Signature X Sonja Davis Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)
7000 0520 0013 7406 1299
PS Form 3811, July 1999

2. Article Number (Copy from service label)
7000 0520 0014 1316 1188
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Margaret S. & Louis Volpe
15 Miramar Road
Sewall's Point, FL 34996

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
8/2/01
C. Signature X [Signature] Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Judie C. & J. R. Staples
1122 Park Street North
St. Petersburg, FL 33710-4338

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
8-3-01
C. Signature X [Signature] Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)
7000 0520 0014 1316 1195
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

2. Article Number (Copy from service label)
7000 0520 0014 1316 1171
S Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary R. Boning
1618 Wales Avenue
Baldwin, NY 11510

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
Mary Boning 8/6/01
C. Signature X Mary Boning Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:
Mary Boning

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

PANTREX HOLDINGS, LTD
10 SHULTZ + BUSLANC
200 S. BISCAYNE BLVD.
SUITE 3150
MIAMI FL
33131

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
8-6-01
C. Signature X Anagnostis, R Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)
7000 0520 0014 1316 1102
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

Article Number (Copy from service label)
000 0520 0013 7406 1305

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Pennie M. & C. Thomas LaFon, Jr.
120 Hillcrest Drive
Sewall's Point, FL 34996

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
GT LAFON JR 8 AUG 2001
C. Signature X [Signature] Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Rossina and Douglas Allen
118 Hillcrest Drive
Sewall's Point, FL 34996

COMPLETE THIS SECTION ON DELIVERY
A. Received by (Please Print Clearly) B. Date of Delivery
ROSSINA ALLEN
C. Signature X [Signature] Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number (Copy from service label)
7000 0520 0014 1316 1041
PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

Article Number (Copy from service label)
7000 0520 0014 1316 1058
Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

7486

A/C CHANGEOUT

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/15/05

BUILDING PERMIT NO. 7486

Building to be erected for TRUITT

Type of Permit A/C CHANGEOUT

Applied for by Flynn's A/C (Contractor)

Building Fee _____

Subdivision HILLCREST Lot 13 Block _____

Radon Fee _____

Address 39 S. RIVER ROAD

Impact Fee _____

Type of structure SFR

A/C Fee 35.00

Parcel Control Number:

13841014000013096000

Electrical Fee _____

Plumbing Fee _____

Amount Paid \$35.00 Check # _____ Cash Other Fees (_____)

Roofing Fee _____

Total Construction Cost \$ 2100.

TOTAL Fees 35.00

Signed [Signature]

Applicant

Signed [Signature]

Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

APR 14 2005

BY:

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number:

Date: 4/14/05

OWNER/TITLEHOLDER NAME: Dr. TRUITT Phone (Day) (Fax)

Job Site Address: 39 S. River Rd. 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: A/C CHANGEOUT

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: \$ 2100
(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: FLYNN'S A/C Phone: 283-4114 Fax: 781-1307

Street: 1323 SW THELMA ST City: PALM CITY State: FL Zip: 34990

State Registration Number: State Certification Number: CAC055482 Martin County License Number:

SUBCONTRACTOR INFORMATION:

Electrical: State: License Number:

Mechanical: State: License Number:

Plumbing: State: License Number:

Roofing: State: License Number:

ARCHITECT Lic.#: Phone Number:

Street: City: State: Zip:

ENGINEER Lic.#: Phone Number:

Street: City: State: Zip:

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 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 15th day of April, 2005

by JAMES PENNINGTON TRUITT JR who is personally known to me or produced FL DL TL30-455-47-016-0 as identification.

My Commission Expires

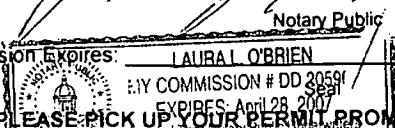
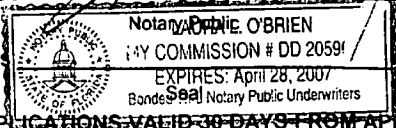
CONTRACTOR SIGNATURE (required)

On State of Florida, County of: MARTIN

This the 14th day of APRIL, 2005

by JOSEPH FLYNN who is personally known to me or produced as identification.

My Commission Expires LAURAL O'BRIEN



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



TOWN OF SEWALL'S POINT

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

7486

CORRECTION NOTICE

ADDRESS: 39 S. RIVER RD

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

A/C CHANGE OUT

BREAKER SITE EXCEEDS
MAX ALLOWABLE FOR
COMP/COND UNIT PER
MANUFACTURER

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: 4/22

[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/22, 2002 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7260	TROULLO	TED'S SHED	PASS	CLOSE
5	3 PALM ROAD O/B	FINAL		INSPECTOR:
7449	FERRARO	ROUGH ELEC	PASS	
7	4 KINGSTON CT ARLINGTON ELEC			INSPECTOR:
7486	TRUITT	A/C CHANGEOUT	FAIL	
14	39 S. RIVER RD, FLYNN'S AC			INSPECTOR:
7335	VAN T BOSCH	ELEC	PASS	
13	36 S. RIVER RD FLORIDA'S FINEST	FRAMING	PASS	INSPECTOR:
7278	LASKY	FINAL RET WALL	PASS	CLOSE
3	27 W. HIGH POINT WILCO CONST			INSPECTOR:
7481	MILLARD	A/C CHANGEOUT	FAIL	
18	5 INDIA LUCIE DR O/B			INSPECTOR:
7429	LAMB	FINAL ROOF	FAIL	
9	110 S SEWALL ST TURTLE ROOFING			INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri MAY 4, 2005 Page 1 of

WESLEY-772-332-1037

(48)

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7486	TRUIT	A/C CHANGE	PASS	
1	32 S. RIVER RD	(New Pad)		
	FLYNN'S A/C	(New Pad)		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7509	Barry	Re-roof - tin	PASS	
7	97 S. Sewall's Pt Rd	tap - nailing	PASS	
	Apostopoulos	metal	FAIL	INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6812	Mader	Slab	FAIL	
2	106 Abbey Court			
	Purucker			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7375	Cooper	Final - gaslines	FAIL	
5	33 W High Point			
	Beecon			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6968	Leighton	Final - Dock	PASS	CLOSE
6	43 W. High Point Rd	Repair		
	Bluewater Marine			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6632	Schepleng	Final SFR	PASS	CLOSE
3	.110 Abbie Court			
	o/b			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i>[Signature]</i>

OTHER: _____

7500

REROOF

(ABANDONED/

VOID)

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/21/05

BUILDING PERMIT NO. 7500

Building to be erected for TRUITY

Type of Permit REROOF

Applied for by ANCHOR ROOFING (Contractor)

WORK W/OUT PERMIT
Building Fee 250.00

Subdivision HILLCREST Lot 13 Block _____

Radon Fee _____

Address 39 S. RIVER ROAD

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

1384101400000013090000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 250.00 Check # _____ Cash Other Fees (_____)

Total Construction Cost \$ 45,000.

TOTAL Fees 250.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

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

INSPECTIONS

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

APR 21 2005

Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: _____

BY: _____
Date: _____

OWNER/TITLEHOLDER NAME: JAMES TRUITT Phone (Day) 283-0901 (Fax) _____

Job Site Address: 39 S. RIVER ROAD City: SEWALL'S PT State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) HILLCREST 13 Parcel Number: 138410140000013090000

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

Description of Work To Be Done: REEROOF

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 45,000.00

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

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

CONTRACTOR/Company: ANCHOR ROOFING Phone: 772-460-0192 Fax: _____

Street: 301 MICHIGAN ST City: FT. PIERCE State: FL Zip: 34946

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

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

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

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

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

State of Florida, County of: MARTIN

This the 21st day of APRIL, 2005

by JAMES TRUITT who is personally known to me or produced as identification. _____

Notary Public
My Commission Expires: _____

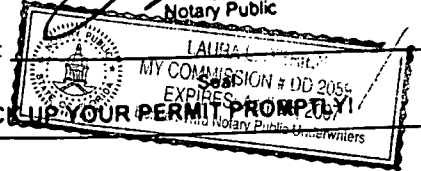
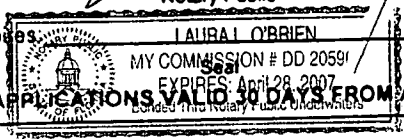
CONTRACTOR SIGNATURE (required) _____

On State of Florida, County of: MARTIN

This the 21st day of APRIL, 2005

by BRYAN RICHARD JONES who is personally known to me or produced as identification. _____

Notary Public
My Commission Expires: _____



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

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PARCEL ID

TAX FOLIO # 138410140000013090000

PERMIT # _____

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): Hilcrest 13
39 South River Rd Sewalls Pt FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Replace old roof with new tiles

OWNER: Mr + Mrs James Truitt

ADDRESS: 39 South River Rd

PHONE #: 283-0901 FAX #: _____

INTEREST IN PROPERTY: _____

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

CONTRACTOR: Aurora Roofing

ADDRESS: 301 Michigan St

PHONE #: 772-460-0192 STATE OF FLORIDA Seville FL 34996
MARTIN COUNTY
FAX #: _____

SURETY COMPANY (IF ANY) NA

ADDRESS: _____

PHONE #: _____

BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY NA

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

NAME: Charles deCarmo

ADDRESS: 2410 HIGH OF RD SUWANEE

PHONE #: 1-772-220-2294 FAX #: 220-8505

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 #: _____ FAX #: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: 4/21/06

THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

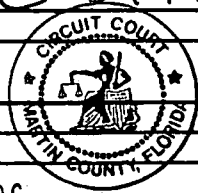
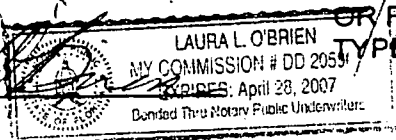
James Truitt
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 21st DAY OF April 2005

BY JAMES TRUITT

PERSONALLY KNOWN X
OR PRODUCED ID _____
TYPE OF ID _____

Laura L. O'Brien
NOTARY SIGNATURE



INSTR # 1832319 OR BK 02005 PG 0258 RECD 04/21/2005
MARSHA EWING MARTIN COUNTY DEPUTY CLERK L WOOD

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (mm/dd/yyyy)
03/01/2005

PRODUCER (239)939-1996 FAX (239)275-0276
Herndon Mahoney & Company
 10501 Six Mile Cypress Pkwy
 Suite 101
 Fort Myers, FL 33912

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
Anchor Roofing of S. W. Florida, Inc.
 6411 Arc Way
 Ft. Myers, FL 33912

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A	Essex 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	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (mm/dd/yyyy)	POLICY EXPIRATION DATE (mm/dd/yyyy)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	2CG2798	11/24/2004	11/24/2005	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 50,000 MED EXP (Any one person) \$ 1,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COM/POP AGG \$ 1,000,000
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EA ACC \$ AGG \$
A		EXCESS UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ <input checked="" type="checkbox"/> RETENTION \$ 0	XMR15013	01/18/2005	11/24/2005	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STAT/LTCRY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E/L EACH ACCIDENT \$ E/L DISEASE - EA EMPLOYEE \$ E/L DISEASE - POLICY LIMIT \$
		OTHER				

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

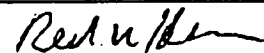
CERTIFICATE HOLDER

CANCELLATION

Town of Sewalls Point
 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 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Reed Herndon/PIPER





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

SELF INSURERS FUND

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

CERTIFICATE OF INSURANCE

ISSUED TO:

COPY PROVIDED TO:

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

Anchor Roofing of Southwest
Florida, Inc.
6411 Arc Way
Fort Myers FL 33912

ATTN: To whom it may concern

Date: 03/01/2005

This is to certify that Anchor Roofing of Southwest Florida, Inc.
6411 Arc Way
Fort Myers FL 33912

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

COVERAGE NUMBER: : 870-033134

LIMITS

Workers' Compensation Statutory - State of Florida

EFFECTIVE DATE: 01/01/2005

Employers' Liability

\$100,000 - Each Accident

EXPIRATION DATE: 01/01/2006

\$100,000 - Disease, Each Employee

\$500,000 - Disease, Policy Limit

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

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

Brad Steigel, Administrator
FRSA-SIF

By:

Debbie Kommerer - Underwriting Manager
FRSA-SIF



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

RECEIVED SEP 7 2004

(850) 487-1355

SCHUMACHER, KURT ROY
ANCHOR ROOFING
5411 ARC WAY
FORT MYERS

FL 33912

STATE OF FLORIDA AC# 1558705
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CCC1325560 08/23/04 040174278
CERTIFIED ROOFING CONTRACTOR
SCHUMACHER, KURT ROY
ANCHOR ROOFING

IS CERTIFIED under the provisions of Ch. 489 F.S.
Expiration date: AUG 31, 2006 :04082301775

DETACH HERE

AC#1558705

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD SEQ#L04082301775

DATE	BATCH NUMBER	LICENSE NBR
08/23/2004	040174278	CCC1325560

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



SCHUMACHER, KURT ROY
ANCHOR ROOFING
6200 TOPAZ CT
FT MYERS

FL 33912-8306

DIANE LARR
SECRETARY

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CITY OF FORT ST LUCIE
BUILDING DEPARTMENT
COMPUTER SERVICE MEMBER
EXPIRES SEPTEMBER 30, 2005

SCHUMACHER, KURT ROY
ANCHOR ROOFING
6411 ARC WAY
FORT MYERS, FL 33907

Signature *Kurt Roy*
ROOFING UNLIMITED

FEE \$25.00 PSL05 7417

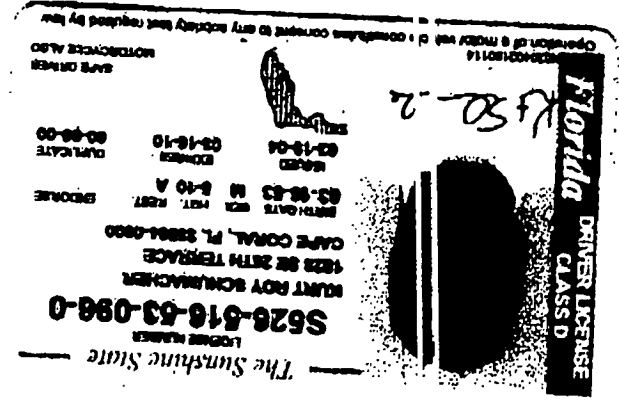
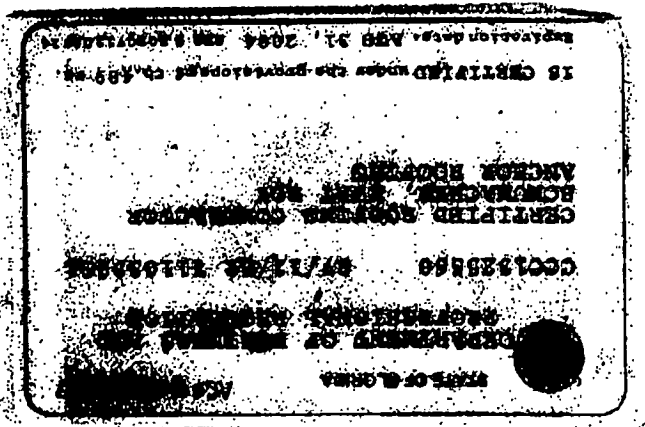
Collector County / City of Marco, State

Contract No. 1125563
Contract Description: Roofing

ROOFING COMP. - CONTRACTED
Cort Mdr: 24062 Exp: 8/31/2006 Status: ACTIVE
Stage Nbr: CCC 1125563 Exp: 8/31/2006

ANCHOR ROOFING
KURT ROY SCHUMACHER
6411 ARC WAY
FT. MYERS FL 33907

Signed: *Kurt Roy*



From: Unreher Keating Affn: Wesley



BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1603
MIAMI, FLORIDA 33133-1563
(305) 375-2901 FAX (305) 375-2908

NOTICE OF ACCEPTANCE (NOA)

Monier Lifetile, LLC
135 NW 20th Street
Boca Raton, FL 33431

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: Atlantis Shake & Slate Concrete Roof Tile

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 pages 1 through 6.

The submitted documentation was reviewed by Frank Zuloaga, RRC



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 4/24/05
[Signature]
BUILDING OFFICIAL
Gene Simmons

NOA No.: 02-1211.08
Expiration Date: 12/16/07
Approval Date: 01/09/03
Page 1 of 6

ROOFING ASSEMBLY APPROVAL

Category: Roofing
Sub-Category: Flat Profile Roofing Tiles
Material: Concrete

1. SCOPE

This renews a system using Monier Lifetile Atlantis Shake & Slate Concrete Roof Tile, a manufactured Monier Lifetile LLC and described in Section 2 of this Notice of Acceptance. For locations where the pressure requirements, as determined by applicable Building Code does not exceed the design pressure values obtained by calculations in compliance with RAS 127 using the values listed in section 4 herein. The attachment calculations shall be done as a moment base system.

2. PRODUCT DESCRIPTION

<u>Manufactured by Applicant</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Monier Lifetile Atlantis Shake and Slate Tile	l = 15" w = 10 3/8" 1 1/4" thick	PA 112	Flat, interlocking, high pressure extruded concrete shake and slate roof tile equipped with two nail holes. For direct deck, mortar or adhesive set applications.
Trim Pieces	l = varies w = varies varying thickness	PA 112	Accessory trim, concrete roof pieces for use at hips, rakes, ridges and valley terminations. Manufactured for each tile profile.

2.1 SUBMITTED EVIDENCE:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Redland Technologies	7161-03 Appendix III	Static Uplift Testing PA 102 & PA 102(A)	Dec. 1991
The Center for Applied Engineering, Inc.	94-060A 94-084	Static Uplift Testing PA 101 (Mortar Set) (Adhesive Set)	March, 1994 May 1994
The Center for Applied Engineering, Inc.	25-7094-2	Static Uplift Testing PA 102 (4" Headlap, Nails, Direct Deck, New Construction)	Oct. 1994
The Center for Applied Engineering, Inc.	25-7094-8	Static Uplift Testing PA 102 (4" Headlap, Nails, Battens)	Oct. 1994
The Center for Applied Engineering, Inc.	25-7094-5	Static Uplift Testing PA 102 (4" Headlap, Nails, Direct Deck, Recover/Reroof)	Oct. 1994



NOA No.: 02-1211-08
 Expiration Date: 12/16/07
 Approval Date: 01/09/03
 Page 2 of 6

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
The Center for Applied Engineering, Inc.	25-7183-6	Static Uplift Testing PA 102 (2 Quik-Drive Screws, Direct Deck)	Feb. 1995
The Center for Applied Engineering, Inc.	25-7183-5	Static Uplift Testing PA 102 (2 Quik-Drive Screws, Battens)	Feb. 1995
The Center for Applied Engineering, Inc.	25-7214-1	Static Uplift Testing PA 102 (1 Quik-Drive Screw, Direct Deck)	March, 1995
The Center for Applied Engineering, Inc.	25-7214-5	Static Uplift Testing PA 102 (1 Quik-Drive Screw, Battens)	March, 1995
Redland Technologies	7161-03 Appendix II	Wind Tunnel Testing PA 108 (Nail-On)	Dec. 1991
Redland Technologies	Letter Dated Aug. 1, 1994	Wind Tunnel Testing PA 108 (Nail-On)	Aug. 1994
Redland Technologies	P0631-01	Wind Tunnel Testing PA 108 (Mortar Set)	July 1994
Redland Technologies	P0402	Withdrawal Resistance Testing of screw vs. smooth shank nails	Sept. 1993
The Center for Applied Engineering, Inc. Professional Service Industries, Inc.	Project No. 307025 Test #MDC-77 224-47099	Wind Driven Rain PA 100 Physical Properties PA 112	Oct. 1994 Sept. 1994
Celotex Corporation Testing Service	520109-1 520111-4 520191-1	Static Uplift Testing PA 101	Dec. 1998 March 1999
Walker Engineering, Inc.	Calculations	Aerodynamic Multiplier	March 1999
Walker Engineering, Inc.	Calculations	Moment of Gravity	Sept. 1999
Walker Engineering, Inc.	Calculations	25-7094	February 1995
Walker Engineering, Inc.	Calculations	25-7496	April 1996
Walker Engineering, Inc.	Calculations	25-7584 25-7804b-8 25-7804-4 & 5 25-7848-6	December 1996
Walker Engineering, Inc.	Calculations	25-7183	March 1995
Walker Engineering, Inc.	Calculations	Aerodynamic Multipliers	April 1999
Walker Engineering, Inc.	Calculations	Two Patty Adhesive Set System	April 1999



NOA No.: 02-1211.08
Expiration Date: 12/16/07
Approval Date: 01/09/03
Page 3 of 6

3. LIMITATIONS

- 3.1 Fire classification is not part of this acceptance.
- 3.2 For mortar or adhesive set tile applications, a static field uplift test shall be performed in accordance with RAS 106.
- 3.3 Applicant shall retain the services of a Miami-Dade County Certified Laboratory to perform a quarterly test in accordance with TAS 112, appendix 'A'. Such testing shall be submitted to the Building Code Compliance Office for review.
- 3.4 Minimum underlayment shall be in compliance with the applicable Roofing Application Standards listed section 4.1 herein.
- 3.5 30/90 hot mopped underlayment applications may be installed perpendicular to the roof slope unless stated otherwise by the underlayment material manufacturers published literature.
- 3.6 This acceptance is for wood deck applications. Minimum deck requirements shall be in compliance with applicable building code.
- 3.7 May be installed on slopes 7:12 and greater with a minimum of two screws.

4. INSTALLATION

- 4.1 Monier Lifetile Atlantis Shake and Slate Concrete Roof Tile and its components shall be installed in strict compliance with Roofing Application Standard RAS 118, RAS 119, and RAS 120.
- 4.2 Data For Attachment Calculations

Table 1: Average Weight (W) and Dimensions (l x w)			
Tile Profile	Weight-W (lbf)	Length-l (ft)	Width-w (ft)
Monier Lifetile Atlantis Shake & Slate Tile	8.5	1.25	0.865

Table 2: Aerodynamic Multipliers - λ (ft ²)	
Tile Profile	λ (ft ²) Direct Deck Application
Monier Lifetile Atlantis Shake & Slate Tile	0.24

Table 3: Restoring Moments due to Gravity - M_g (ft-lbf)					
Tile Profile	3":12"	4":12"	5":12"	6":12"	7":12" or greater
Monier Lifetile Atlantis Shake & Slate Tile	Direct Deck	Direct Deck	Direct Deck	Direct Deck	Direct Deck
	6.0	5.9	5.8	5.6	5.5



NOA No.: 02-1211.08
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 Page 4 of 6

Tile Profile	Fastener Type	Direct Deck (min 15/32" plywood)	Direct Deck (min. 19/32" plywood)	Battens
Monier Lifetile Atlantis Shake & Slate Tile	2-10d Ring Shank Nails	30.9	38.1	17.2
	1-10d Smooth or Screw Shank Nail	7.3	9.8	4.9
	2-10d Smooth or Screw Shank Nails	14.0	18.8	7.4
	1 #8 Screw	30.8	30.8	18.2
	2 #8 Screw	51.7	51.7	24.4
	1-10d Smooth or Screw Shank Nail (Field Clip)	24.3	24.3	24.2
	1-10d Smooth or Screw Shank Nail (Eave Clip)	19.0	19.0	22.1
	2-10d Smooth or Screw Shank Nails (Field Clip)	35.5	35.5	34.8
	2-10d Smooth or Screw Shank Nails (Eave Clip)	31.9	31.9	32.2
	2-10d Ring Shank Nails ¹	50.3	65.5	48.3

¹ Installation with a 4" tile headlap and fasteners are located a min. of 2 1/4" from head of tile.

Tile Profile	Tile Application	Minimum Attachment Resistance
Monier Lifetile Atlantis Shake & Slate Tile	Adhesive	31.3 ¹

² See manufactures component approval for installation requirements.
³ Flexible Products Company TileBond Average weight per patty 13.9 grams.
 Polyfoam Product, Inc. Average weight per patty 8 grams.

Tile Profile	Tile Application	Minimum Attachment Resistance
Monier Lifetile Atlantis Shake & Slate Tile	PolyPro™	118.9 ⁴
	PolyPro™	40.4 ⁵

⁴ Large paddy placement of 45 grams of PolyPro™.
⁵ Medium paddy placement of 24 grams of PolyPro™.

Tile Profile	Tile Application	Attachment Resistance
Monier Lifetile Atlantis Shake & Slate Tile	Mortar Set ¹	39.0



5. LABELING

All tiles shall bear the imprint or identifiable marking of the manufacturer's name or logo, or following statement: "Miami-Dade County Product Control Approved".

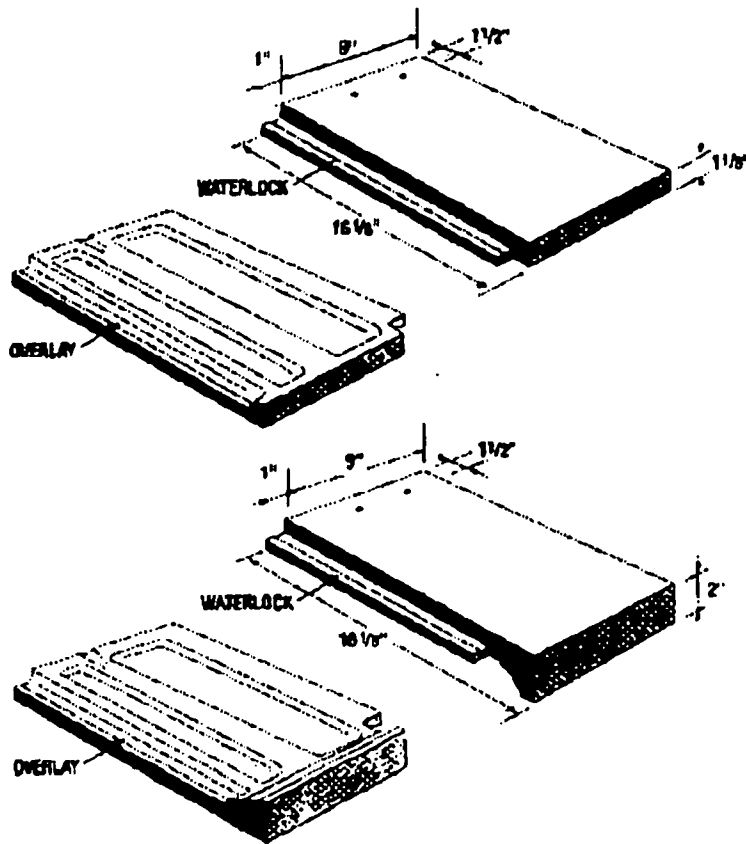
6. BUILDING PERMIT REQUIREMENTS

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

6.1.1 This Notice of Acceptance.

6.1.2 Any other documents required by the Building Official or applicable building code in order to properly evaluate the installation of this system.

PROFILE DRAWINGS



MONIER LIFETILE ATLANTIS SHAKE & SLATE CONCRETE ROOF TILE

END OF THIS ACCEPTANCE



NOA No.: 02-1211.08
Expiration Date: 12/16/07
Approval Date: 01/09/03
Page 6 of 6



The Florida Department of Community Affairs Building Code Information System

PRODUCT APPROVAL

Product Type List

- Overview
- Product Search
- Organization Search
- Product Application

User: Public User - Not Associated with Organization -

[Need Help?](#)

Application #: FL2442
 Date Submitted: 04/28/2004
 Product Manufacturer: Sun-Tek Mfg
 Address/Phone/email: 10303 General Dr
 Orlando, FL 32824

Technical Representative: James Feudner
 Technical Representative Address/Phone/email: 10303 General Dr
 Orlando, FL 32824
 engineering@sun-tek.com

Category: ⁷⁵⁰⁰ FILE COPY
 Subcategory: TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 Evaluation Method:
 DATE: 5/18/05
 Referenced Standards from the Florida Building Code:
 BUILDING OFFICIAL
 Gene Simmons

Sky Lights

Skylight

Certification Mark or Listing

Section	Standard	Year
	AAMA/WDMA	2000
	1600/I.S.7	
	TAS 201	2001
	TAS 202	2001
	TAS 203	2001

Certification Agency: National Accreditation & Management Institute,

Quality Assurance Entity:

Validation Entity:

Authorized Signature: James Feudner
 engineering@sun-tek.com

Evaluation/Test Reports Uploaded:

Installation Documents Uploaded:

[PTID 2442 - CLASSIC SERIES.pdf](#)

Florida Product Approval
#2442



DURA SERIES

SFA SKP-R74 74, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000

SF SKP-R89 89, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000, FMHCSS 3280.305

TP SKP-R60 60, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000

CM SKP-R60 60, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7 2000, FMHCSS 3280.305

CMA SKP-R60 60, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7 2000, FMHCSS 3280.305

IMPACT RATED SKYLIGHTS

MDCMA SKP-R60 60, max size r.o. 22 1/2 x 46 1/2, Large missile Impact rated, 2001 TAS201, 202, 203

CMA-D SKP-R60 60, max size r.o. 46 1/2 x 89 1/2, Large missile Impact rated, 2001TAS 201, 202, 203

HSF SKP-R60 60, max size r.o. 46 1/2 x 46 1/2, , Large missile Impact rated, 2001 TAS 201, 202, 203

STTCM SKP-R65 65, max size r.o. 21 1/8 dia., Large missile Impact rate, 2001 TAS 201, 202, 203

ISFG SKG-R60 60, max size r.o. 46 1/2 x 46 1/2, Large missile Impact rated, 2001 TAS 201, 202, 203

ICMG SKG-R60 60, max size r.o. 46 1/2 x 46 1/2, Large missile Impact rated, 2001 TAS 201, 202, 203

CLASSIC SERIES

FGC SKG-R114 86, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000

LFGC SKG-R60 60, max size r.o. 52 1/2 x 73 1/2, 3/16 glass, AAMA/WDMA 1600/I.S.7-2000

CMG SKG-R114 86, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000

FHP SKG-R55 55, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000

VGC SKG-R55 55, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000

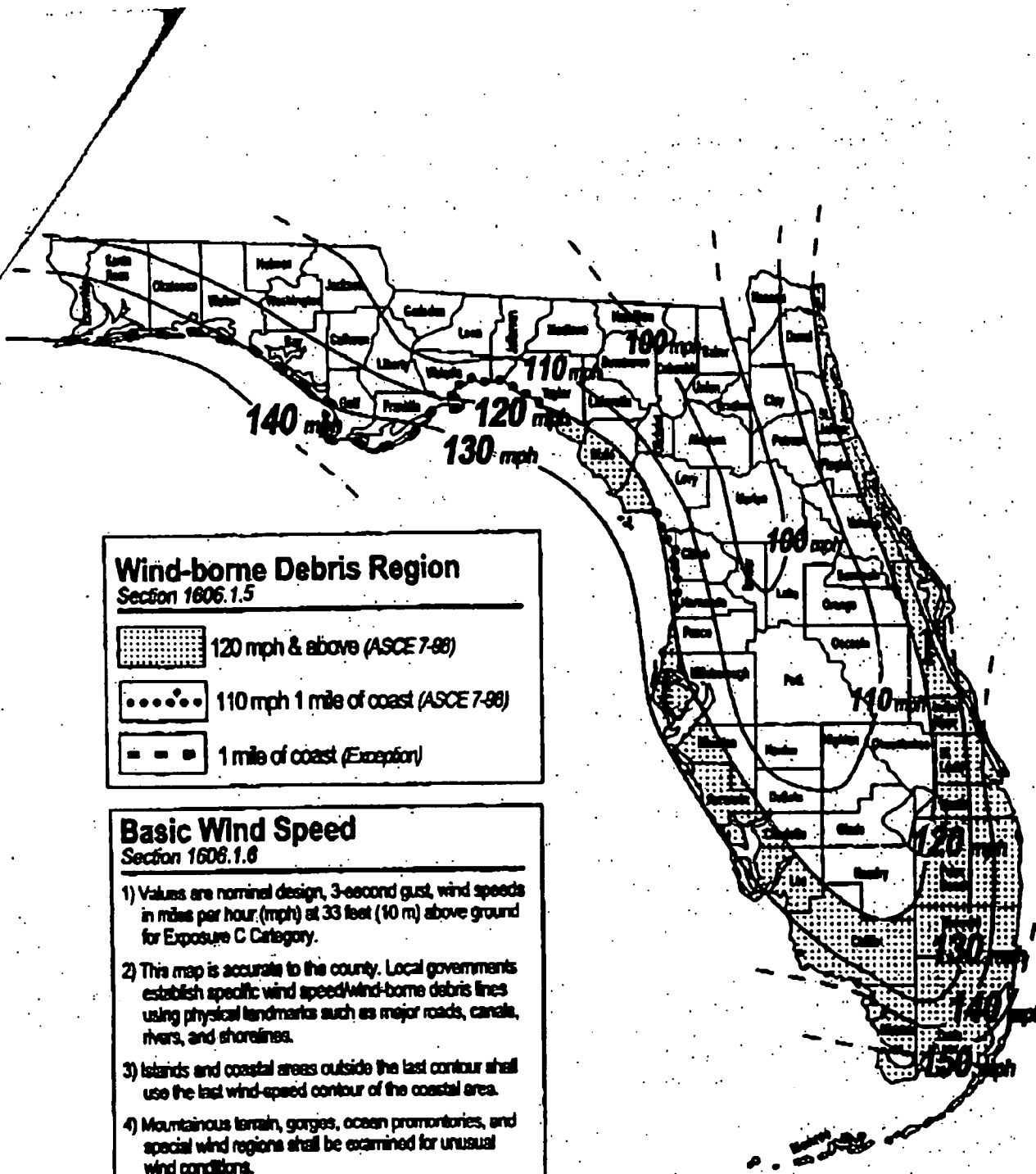
TG SKG-R60 60, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000

LCMG SKG-R56 56, max size r.o. 52 1/2 x 73 1/2, 3/16 glass, AAMA/WDMA 1600/I.S.7-2000


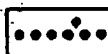

TUBE SKYLIGHT

STT SKP-R50 70, max size r.o. 21 1/8 dia, AAMA/WDMA 1600/I.S.7-2000

This information can also be found online at www.floridabuilding.org
Click on "Product Approval" in left margin. Click on "Product Search" (Tab on top).
Choose "Sun-Tek Mfg" & "Skylights" category.



Wind-borne Debris Region
Section 1606.1.5

 120 mph & above (ASCE 7-88)
 110 mph 1 mile of coast (ASCE 7-88)
 1 mile of coast (Exception)

Basic Wind Speed
Section 1606.1.6

- 1) Values are nominal design, 3-second gust, wind speeds in miles per hour (mph) at 33 feet (10 m) above ground for Exposure C Category.
- 2) This map is accurate to the county. Local governments establish specific wind speed/wind-borne debris lines using physical landmarks such as major roads, canals, rivers, and shorelines.
- 3) Islands and coastal areas outside the last contour shall use the last wind-speed contour of the coastal area.
- 4) Mountainous terrain, gorges, ocean promontories, and special wind regions shall be examined for unusual wind conditions.
- 5) Wind speeds are American Society of Civil Engineers Standard (ASCE 7-88) 50-100-year peak gusts.

FIGURE 1606
STATE OF FLORIDA
WIND-BORNE DEBRIS REGION & BASIC WIND SPEED

2442.9	ISPG	Impact rated self flashing glass	ISFG SKG-R60 60, max size r.o. 46 1/2 x 46 1/2, Large missile Impact rated, 2001 TAS 201, 202, 203
2442.10	LCMG	large size curb mounted glass	LCMG SKG-R56 56, max size r.o. 52 1/2 x 73 1/2, 3/16 glass, AAMA/WDMA 1600/I.S.7-2000
2442.11	LFGC	large size low profile self flashing glass	LFGC SKG-R60 60, max size r.o. 52 1/2 x 73 1/2, 3/16 glass, AAMA/WDMA 1600/I.S.7-2000
2442.12	MDCMA	Impact rated curb mounted bubble	MDCMA SKP-R60 60, max size r.o. 22 1/2 x 46 1/2, Large missile Impact rated, 2001 TAS201, 202, 203
2442.13	SF	self flashing bubble	SF SKP-R89 89, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000, FMHCSS 3280.305
2442.14	SFA	mid profile self flashing bubble	SFA SKP-R74 74, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000
2442.15	STT	self flashing tubular skylight	STT SKP-R50 70, max size r.o. 21 1/8 dia, AAMA/WDMA 1600/I.S.7-2000
2442.16	STTCM	Impact rated curb mounted tubular skylight	STTCM SKP-R65 65, max size r.o. 21 1/8 dia., Large missile Impact rate, 2001 TAS 201, 202, 203
2442.17	TG	high profile fixed glass self flashing	TG SKG-R60 60, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000
2442.18	TP	high profile self flashing bubble	TP SKP-R60 60, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000
2442.19	VGC	low profile venting glass self flashing	VGC SKG-R55 55, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000

← Extreme weather

← Extreme

← Extreme



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Handwritten initials

- [PTID 2442 I CMA-D Install Inst 042704.pdf](#)
- [PTID 2442 I CMTUBE INST 042704.pdf](#)
- [PTID 2442 I dura series1 inst.pdf](#)
- [PTID 2442 I HSF Install Inst 042704.pdf](#)
- [PTID 2442 I ICMG Install Inst 042704.pdf](#)
- [PTID 2442 I JSFG Install Inst 042704.pdf](#)
- [PTID 2442 I MD-CMA Install Inst 042704.pdf](#)
- [PTID 2442 I Self Flashing Tube.pdf](#)

Product Approval Method:

Method 1 Option A

Application Status:

Approved

Date Validated:

07/02/2004

Page:

Page 1 / 1

App/Seq #	Product Model # or Name	Model Description	Limits of Use
2442.1	CM	curb mounted bubble	CM SKP-R60 60, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000, FMHCSS 3280.305
2442.2	CMA	curb mounted bubble w/ alum. ring	CMA SKP-R60 60, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000, FMHCSS 3280.305
2442.3	CMA-D	Impact rated curb mounted bubble	CMA-D SKP-R60 60, max size r.o. 46 1/2 x 89 1/2, Large missile Impact rated, 2001 TAS 201, 202, 203
2442.4	CMG	curb mounted glass	CMG SKG-R114 86, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000
2442.5	FGC	low profile fixed glass self flashing	FGC SKG-R114 86, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000
2442.6	FHP	mid profile fixed glass self flashing	FHP SKG-R55 55, max size r.o. 46 1/2 x 46 1/2, AAMA/WDMA 1600/I.S.7-2000
2442.7	HSF	Impact rated self flashing bubble	HSF SKP-R60 60, max size r.o. 46 1/2 x 46 1/2, Large missile Impact rated, 2001 TAS 201, 202, 203
2442.8	ICMG	Impact rated curb mounted glass	ICMG SKG-R60 60, max size r.o. 46 1/2 x 46 1/2, Large missile Impact rated, 2001 TAS 201, 202, 203

← Extreme weather

← Extreme weather



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)

Birdview Skylights
201 Longhorn Rd.
Fort Worth, TX 76179

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: Aluminum Framed Polycarbonate Domed Skylight.

APPROVAL DOCUMENT: Drawing No. EB696, model "6SFD-DADE", sheets No 1 of 1, prepared by Birdview Skylights dated 07/26/00 with no revisions bearing the Miami-Dade County Product Control Renewal stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large & Small Missile Impact

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

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 renews NOA # 00-0524.02 it consists of this page 1 & approval document mentioned above
The submitted documentation was reviewed by Candido E. Font, P.E.



FILE COPY

TOWN OF SEWALL'S POINT

THESE PLANS HAVE BEEN REVIEWED FOR CODE COMPLIANCE

DATE: 8/8/05

BUILDING OFFICIAL
Gene Simmons

NOA No 03-0303.11
Expiration Date: July 02, 2008
Approval Date: June 05, 2003
Page 1

REVISION

DADE COUNTY ACCEPTANCE NUMBER
00652402

BIRDVIEW SKYLIGHTS
THE CLEAR CHOICE

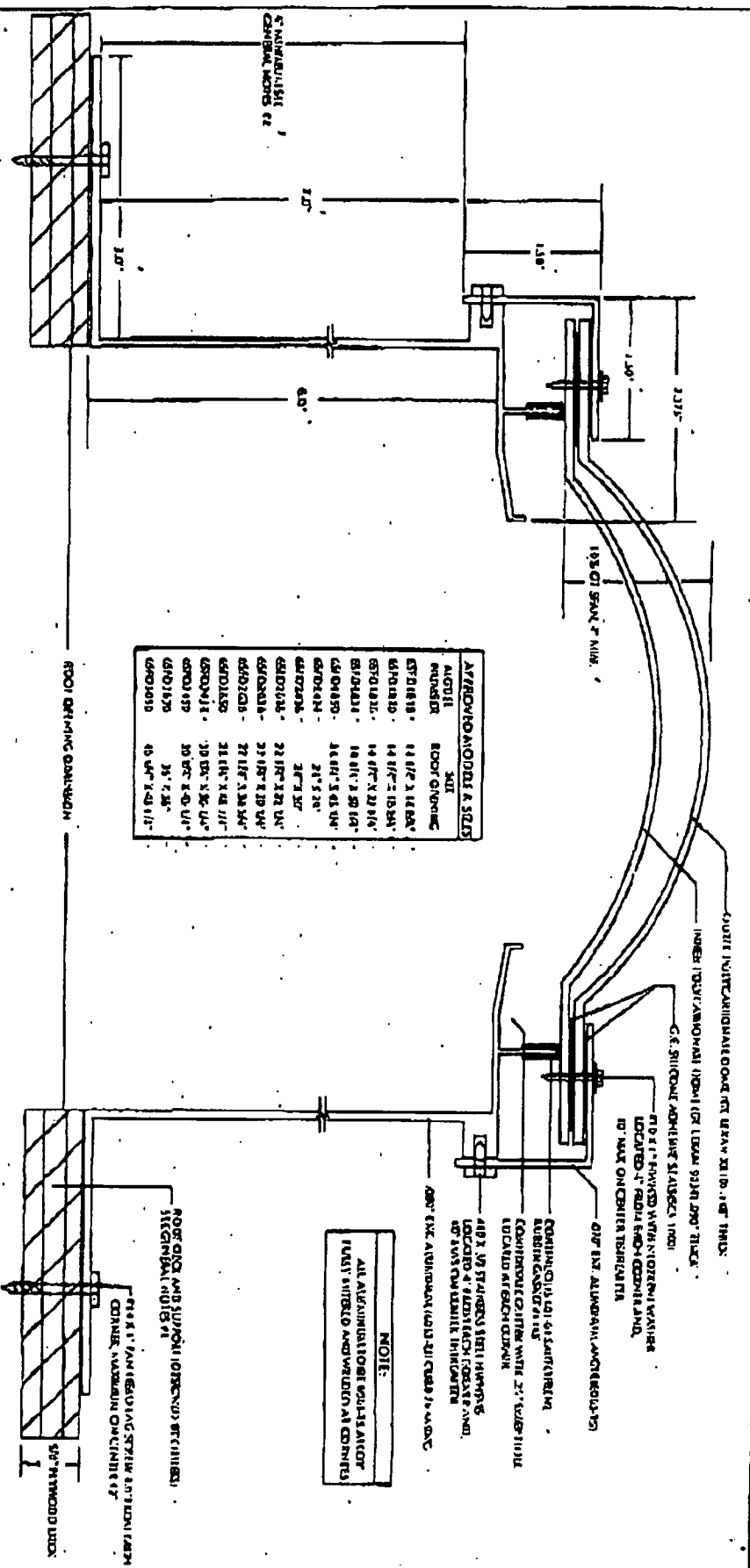
UNAPPROVED REVISED SET 1 OF 1
ISSUED 01-11-06 DATE 7-16-06
MULTI-STEP DRAFT SCALE: FULL

DISCUSS/REQUIREMENTS
REQUIRE A 1/2" AIR SPACE AT THE
VARIABLE IMPACT RESISTANCE

GENERAL NOTES

1. ALL ROOFING DETAILS SHALL COMPLY WITH QUALITY 11 OF THIS S.B.C.
2. SEE WINDBORNE IMPACT RESISTANCE FOR ALL SKYLIGHTS.
FOR REGULATIONS AND LOADS, SEE THE WINDBORNE IMPACT
RESISTANCE TABLE TO THE WINDBORNE IMPACT.

APPROXIMATE NO. & SIZE	APPROXIMATE NO.	APPROXIMATE SIZE
6501818	11	18" x 18"
6501820	14	18" x 18"
6501822	14	18" x 18"
6501824	14	18" x 18"
6501826	14	18" x 18"
6501828	14	18" x 18"
6501830	14	18" x 18"
6501832	14	18" x 18"
6501834	14	18" x 18"
6501836	14	18" x 18"
6501838	14	18" x 18"
6501840	14	18" x 18"
6501842	14	18" x 18"
6501844	14	18" x 18"
6501846	14	18" x 18"
6501848	14	18" x 18"
6501850	14	18" x 18"
6501852	14	18" x 18"
6501854	14	18" x 18"
6501856	14	18" x 18"
6501858	14	18" x 18"
6501860	14	18" x 18"
6501862	14	18" x 18"
6501864	14	18" x 18"
6501866	14	18" x 18"
6501868	14	18" x 18"
6501870	14	18" x 18"
6501872	14	18" x 18"
6501874	14	18" x 18"
6501876	14	18" x 18"
6501878	14	18" x 18"
6501880	14	18" x 18"
6501882	14	18" x 18"
6501884	14	18" x 18"
6501886	14	18" x 18"
6501888	14	18" x 18"
6501890	14	18" x 18"
6501892	14	18" x 18"
6501894	14	18" x 18"
6501896	14	18" x 18"
6501898	14	18" x 18"
6501900	14	18" x 18"

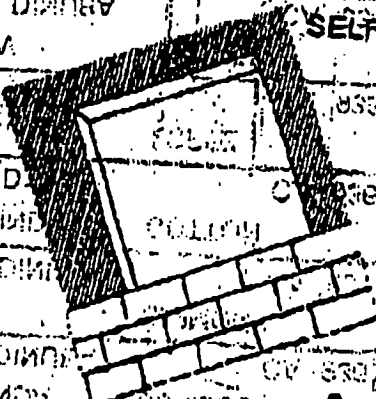


APPROVED AS SHOWN WITH THE
SEALING SYSTEM AND FLASHING
DETAILS. SEE 07-2000
BY *[Signature]*

VINCE R. BOUTER
REGISTERED CIVIL ENGINEER
FLORIDA REG. NO. 1587

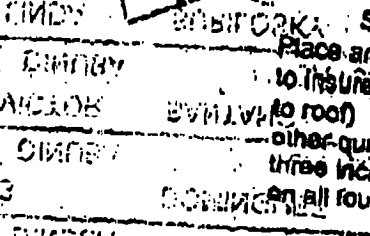
[Signature]
8/7/06

SELF FLASHING INSTALLATION INSTRUCTIONS



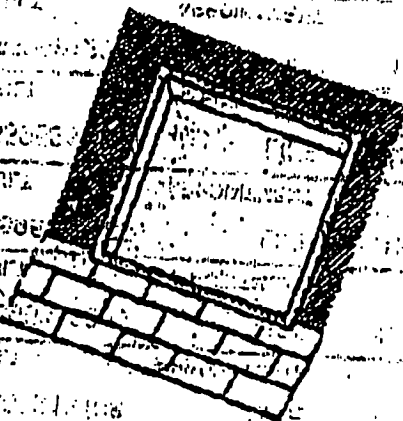
Step One

Make sure roof opening and skylight inside dimensions are the same. Lay felt paper on roof and shingle up to the bottom edge of roof opening and not any further at this time.



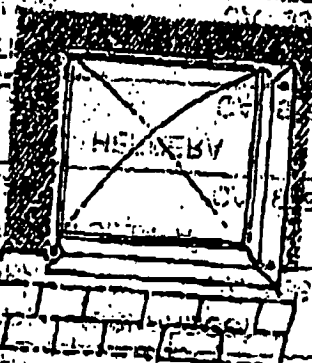
Step Two

Place ample amount (sufficient thickness to insure a complete seal of skylight frame to roof) of roofing cement, silicone or any other quality roofing compound, approximately three inches wide around the roof opening on all four sides.



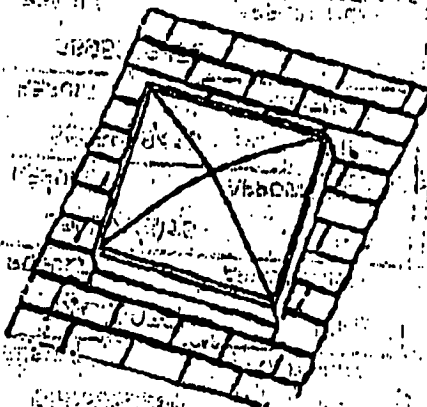
Step Three

Place skylight down on to the roof opening directly on top of the sealant and fasten with nails or screws on the top and on the two sloping sides on the outer edge of the built-in flashing. For extra assurance, caulk or compound over fastener heads.



Step Four

Now you can resume roofing. Run your shingles all the way up against the curb wall of skylight on the two sloping sides and across top, leaving the bottom edge of the built-in flashing exposed and on top of shingles.



CAUTION: Some applications may require additional flashing (wood shingle, flat roof, etc.)

LAZER MFG. & DIST., INC.

P.O. Box 370627
Miami, Florida 33137
1-305-891-8048
1-305-891-8068
Wats Line 1-800-233-0078
Email: blgprod@bellsouth.net

INTERDEPARTMENTAL REFERRAL

To:

Building Dept. Maintenance Dept. Police Dept. Other

Date: 4/20/05 Time: 1500 Location: 39 BRD

Nature of Problem: NO permit pulled for
Roof work. Anchor Roofing.

Observed By: Officer K.S. [Signature] 029-44

Action Taken: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/29, 2002⁵ Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7384	Regal	Final window	PASS	BUCKS INSPECTED
8	6 Mandalay	CLOSE		PER PICTURES TAKEN BY INSTALLER INSPECTOR: <i>[Signature]</i>
7500	TRUITT	DRY-IN	PASS	ROOF SHEATH. ONLY
16	59 S. RIVER RD ANCHOR ROOFING	11:30-12 (last please)		WILL CALL FOR DRY IN INSPECTION INSPECTOR: <i>[Signature]</i>
7496	Mc KAY	FINAL REEROOF	PASS	CLOSE
13	19 S. VIA LUCINDIA FLORIDA REEROOFING			INSPECTOR: <i>[Signature]</i>
6632	SCHERLENG	F. NAL SER		RESCHEDULE
6	110 ABBIE COURT O/B			NO ONE AT SITE INSPECTOR: <i>[Signature]</i>
7477	SCHUTTS	DRY-IN	PASS	
10B	46 RIO VISTA DR REEROOF AMERICA			INSPECTOR: <i>[Signature]</i>
TREE	VAN AMSTERDAM	TREE	PASS	
1	2 E. HIGH POINT			INSPECTOR: <i>[Signature]</i>
TREE	SCHMADER	TREE	FAIL	
7	102 HENRY SEWALL			INSPECTOR: <i>[Signature]</i>

OTHER: _____



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 39 S. RIVER RD.

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.

- DRY IN
- NAIL ALL DRIP EDGES
- @ 4" O.C.
- INSTALL ALL COPPER
- VALLEY FLASHING.
- SEPARATE COPPER & ALUM.
- METALS
- ELIMATE "BIRD MOUTHS"
- ON STARTER COURSE w/ #
- PELL.

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: 5/4

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri MAY 4, 2005 Page 1 of

WESLEY-772-332-1037

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7486	Trinity	ALC	PASS	Close Roofing Insp.
1	39 S. RIVER RD LYNN'S AC	ALC 1/2" x 10" x 10"	PASS	INSPECTOR: [Signature]
7509	Barry	Re roof - tin	PASS	INSPECTOR: [Signature]
7	97 S. Sewall's Pt Rd Apostopoulos	tap - nailing metal	PASS FAIL	INSPECTOR: [Signature]
6812	Mader	Slab	FAIL	
2	106 Abbey Court Purucker			INSPECTOR: [Signature]
7375	Cooper	Final - gaslines	FAIL	
5	33 W High Point Becken			INSPECTOR: [Signature]
6968	Leighton	Final - Deck	PASS	CLOSE
6	43 W. High Point Rd Bluewater Marine	Repair		INSPECTOR: [Signature]
6632	Schepleng	Final SFR	PASS	CLOSE
3	.110 Abbie Court o/b			INSPECTOR: [Signature]
				INSPECTOR: [Signature]

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8/17, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6413	POWERS	PRE POUR RETAIN	PASS	
7	70 S. SEWALL FLORIDA'S FINEST	DRIVEWAY		INSPECTOR: <i>OM</i>
1689	HARTE	INSULATION	PASS	
2	3 E. HIGH POINT FIRST FLORIDA			INSPECTOR: <i>OM</i>
6996	DAINS	FINAL DOCK	PASS	CLOSE
8	62 S. SEWALL ST O/B			INSPECTOR: <i>OM</i>
7500	FRUIT	SKULLGUTS	PASS	
11	39 S. RIVER RD			INSPECTOR: <i>OM</i>
7676	FORD	FINAL SUMMER	PASS	CLOSE
3	5 OAKWOOD DR O/B	REPAIR		INSPECTOR: <i>OM</i>
7705	BRADEN	FINAL TRAILICE	PASS	CLOSE
4	12 OAKWOOD WILSON BUILDERS			INSPECTOR: <i>OM</i>
7717	CONNOLLY	FINAL ROOF	PASS	CLOSE
10	10 RIDGELAND A&P CONSTR.			INSPECTOR: <i>OM</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri OCT 10, 2005

Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6935	MCKINNEY	FINAL DOOR	PASS	CLOSE
2	24 SIMARA ST			INSPECTOR: <i>[Signature]</i>
6934	MCKINNEY	FINAL FENCE	PASS	CLOSE
2	24 SIMARA ST		FAIL	INSPECTOR: <i>[Signature]</i>
6261	SMITH	FINAL ADDN+REM.	FAIL	
1	7 SIMARA ST SUNRISE CONSTRUCTION			INSPECTOR: <i>[Signature]</i>
6038	SMITH	FINAL GAS	PASS	CLOSE
1	7 SIMARA FERRELL GAS		FAIL	NO PERMIT POSTED INSPECTOR: <i>[Signature]</i>
6947	MCKINNEY	SEAWALL	PASS	CLOSE
	24 SIMARA			INSPECTOR: <i>[Signature]</i>
7500	TRUIT	FINAL ROOF	FAIL	RESCHEDULE FOR
	3 S. RIVER RD. TAYLOR ROOF.	TAYLOR ROOFING HAS NO PERMIT		10/12 INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>
OTHER:	24 FIELDWAY (SEE GENE)	TIN TAP	PASS	<i>[Signature]</i>

CORRESPONDENCE

7500
FILE

James P. Truitt, Jr., M.D.

39 South River Road
Stuart, FL 34996

July 10, 2005

Mr. Gene Simmons
Building Inspector
Sewalls Point, FL
34996

Dear Mr. Simmons:

In early April of this year Anchor Roofing, Inc. began the job of replacing my roof which was damaged in the hurricanes of 2004. The crew assigned to the job was inexperienced and poorly supervised. Mr. Wintercorn can attest to the above as he had to have them correct several errors in the work they were doing. On May 4th, we had heavy rain in the evening and as a result of improper dry in, I had 21 different places in my home which were leaking that night. Five locations had water flowing from light fixtures or speakers, or had water falling through wall cavities and pooling on the floor.

Anchor then dismissed the crew working on my roof, brought another crew from Dade County. After removing some of the previous work, installing the copper flashing and hot mopping over a two day period, the roof was adequately dried in. They had ordered the wrong skylights, so the openings were simply covered with 90 lb. Felt and hot mopped.

They were very apologetic about the extensive interior damage and promised to quickly repair the damage and restore the interior to its original state.

At this time I was informed by an employee of Anchor that they had underestimated the amount of roofing tiles by 23 squares! They wanted me to contact my insurance company to request additional money because they had made an error (they were given a set of plans for the house in order to bid the job). Mr. DeGarmo (Pine Orchard Builders), my general contractor for whom Anchor is doing this work, told Anchor that it was their problem that they made an error, and that they were to complete the work as they agreed and at the price they had agreed.

Since about May 7th, there has been no additional work done on my roof. On June 16th a crew from Anchor came to start the repair of one ceiling. They worked several hours, and then came two days later to remove their tools and material. They have not been seen or contacted me since.

No one from Anchor has contacted me about my roof in two months. I have continuously contacted them by phone. They have never called me back when I have left messages. The few times I managed to catch someone in the office I have gotten empty promises – they don't come as promised, and they do not even call to say why. I believe they have abandoned the job, probably because they underestimated the materials required and don't want to finish a job on which they will not make their usual exorbitant profit.

Please allow Mr. DeGarmo to hire another roofing contractor to finish my roof before we get further into hurricane season. I would also suggest that Anchor not be allowed to do any additional work on Sewalls Point, for the protection of our residents.

Sincerely,



James P. Truitt, Jr., M.D.



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

FILE

Charles W. DeGarmo
24 W. W. High Point Road
Stuart, Florida 34996

Case No: 2005-036478
Subject: Kurt Roy Schumacher, d/b/a Anchor Roofing, Inc.

Florida's Future...
DBPR
*Right Here,
Right Now.*

Jeb Bush
Governor

Simone Marstiller
Secretary

Office of the
General Counsel

1940 North Monroe Street
Tallahassee, Florida
32399-0750

VOICE
850.488.0062

FAX
850.921.9186

INTERNET
www.myflorida.com

Dear Mr. DeGarmo:

This is in reference to the complaint you filed with this agency against the above named contractor. Upon completion of the investigation, the complaint was forwarded to the Office of the General Counsel for my review. The complaint was then submitted for consideration by the Probable Cause Panel of the Construction Industry Licensing Board. At a recent meeting, the panel found probable cause to believe that the contractor violated applicable sections of Chapter 489, Florida Statutes, the practice act that governs licensed contractors. Accordingly, formal charges in the way of an Administrative Complaint have been filed against the contractor.

This office is in the process of serving the Administrative Complaint on the contractor. Once served, if the contractor disputes the charges and requests a formal evidentiary hearing, your testimony may be required. In any event, you will be informed as the case progresses and advised of the ultimate outcome.

Sincerely,

Brian Elzweig
Assistant General Counsel

BE/sh

Jim, thought you'd enjoy this
Jan

7985

REROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 1/4/06

BUILDING PERMIT NO. 7985

Building to be erected for TRUITT Type of Permit REEROOF

Applied for by JA TAYLOR ROOFING (Contractor) Building Fee _____

Subdivision HILLCREST Lot 13 Block _____ Radon Fee _____

Address 39 S. RIVER ROAD Impact Fee _____

Type of structure SFR A/C Fee _____

Parcel Control Number: _____ Plumbing Fee _____

0138410140000013090000 Roofing Fee 120.00

Amount Paid 120.00 Check # 36174 Cash _____ Other Fees (_____) 1

Total Construction Cost \$ 29050 TOTAL Fees 120.00

Signed Ryan Taylor
Applicant

Signed Gene Summou
Town Building Official

PERMIT

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

INSPECTIONS

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

RECEIVED

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 10-18-05

Permit Number: _____

OWNER/TITLEHOLDER NAME: JAMES TRUITT Phone (Day) _____ (Fax) _____

Job Site Address: 39 SOUTH RIVER ROAD City: STUART State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) HILLCREST LOT 13 Parcel Number: 01-38-41-014-000-00130-9

Owner Address (if different): 39 SILVER ROAD City: STUART State: FL Zip: 34996

Description of Work To Be Done: REROOF - INSTALL TILE ROOF SYSTEM

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 29,050.00 (Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: JA TAYLOR ROOFING, INC. Phone: 466-4040 Fax: 468-8397

Street: 302 MELTON DRIVE City: FORT PIERCE State: FL Zip: 34982

State Registration Number: _____ State Certification Number: 1325720 Martin County License Number: _____

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER _____ Lic.# _____ Phone Number: _____

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

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

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) Charmaine A. Truitt

State of Florida, County of: St. Lucie

This the 18th day of October, 2005

by Charmaine Truitt who is personally

known to me or produced

as identification. Georgiana R. Kingston

My Commission Expires: 11/09/07

Georgiana R. Kingston My Commission DD285828

Expires November 09, 2007

CONTRACTOR SIGNATURE (required) Chad Taylor

On State of Florida, County of: St. Lucie

This the 18th day of October, 2005

by Chad Taylor who is personally

known to me or produced

As identification. Georgiana R. Kingston

My Commission Expires: 11/09/07

Georgiana R. Kingston My Commission DD285828

Expires November 09, 2007



LET'S ELIMINATE AGGRESSIVE DRIVING

DO NOT
RELEASE
UNTIL
10/31



Funding provided by the Florida Department of Transportation.

LET'S ELIMINATE AGGRESSIVE DRIVING

✓ W/ GENE
MARK
7500 AS VOID?
AS OF 10/29/05



Funding provided by the Florida Department of Transportation.



TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 21-38-41-014-000-
00130-9

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):

HILLCREST, LOT 13

GENERAL DESCRIPTION OF IMPROVEMENT: REROOF

OWNER: JAMES & CHARMAINE TRUITT

ADDRESS: 39 SILVER ROAD, STUART, FLORIDA 34996

PHONE #: _____

FAX #: _____

INTEREST IN PROPERTY: _____

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

CONTRACTOR: J.A. TAYLOR ROOFING, INC.

ADDRESS: 302 MELTON DRIVE, FORT PIERCE, FLORIDA 34982

PHONE #: 772-466-4040

FAX #: 772-468-8397

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____

FOREGOING _____ PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.

FAX #: _____
BY [Signature] D.C.



IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES DATE 10/18/05
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.

Charmaine Truitt
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 18th DAY OF October 2005
BY Charmaine Truitt

PERSONALLY KNOWN _____
OR PRODUCED ID _____
TYPE OF ID _____

Georgiana R. Kingston
NOTARY SIGNATURE





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

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

Summary

print Owner 2 of 3

Parcel Info

Summary

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

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
01-38-41-014-000-00130-9	39 SOUTH RIVER RD	17860	Owner	0	1

Summary

Property Location 39 SOUTH RIVER RD
Tax District 2200 Sewall's Point
Account # 17860
Land Use 101 0100 Single Family
Neighborhood 120200
Acres

Legal Description
Property Information
 HILLCREST, LOT 13

Search By

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

Owner Information
Owner Information
 TRUITT, JAMES P JR
 "TRUITT, CHARMAINE A

Mail Information
 39 S RIVER RD
 STUART FL 34996

Assessment Info
 Front Ft. 0.00

Market Land Value \$225,000
Market Impr Value \$422,220
Market Total Value \$647,220

Site Functions

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

Recent Sale
 Sale Amount \$135,000

Sale Date 7/12/1989
Book/Page 0819 2159

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

[Legal disclaimer / Privacy Statement](#)

Data updated on 10/16/2005



ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID RM
JATAY-1

DATE (MM/DD/YYYY)
04/26/05

PRODUCER HARBOR INSURANCE AGENCY 2222 Colonial Road, Suite 100 Fort Pierce FL 34950-5309 Phone: 772-461-6040 Fax: 772-460-2315	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 J A Taylor Roofing Inc Taylor Made Metals 302 Melton Drive Fort Pierce FL 34982	INSURER A: North Pointe Insurance	
	INSURER B: FCCI Insurance Company	
	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	2094107974	01/01/05	01/01/06	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 2,000,000
					PRODUCTS - COMP/OP AGG	\$ 2,000,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	
A	AUTOMOBILE LIABILITY	2094107974	01/01/05	01/01/06	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input 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	2094110645	01/01/05	01/01/06	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$ 1,000,000
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input checked="" type="checkbox"/> RETENTION \$10,000					\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	001WC05A46147	05/19/05	05/19/06	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$ 500,000
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$ 500,000
	OTHER				E.L. DISEASE - POLICY LIMIT	\$ 500,000

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

CERTIFICATE HOLDER SEWAL-1 Town of Sewalls Point Fax: 772 220 4765 1 South Sewalls Point Road Stuart FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE Cindy McCall <i>Cindy McCall/Em</i>

LICENSE NBR

06/14/2004 030719245 CCC1325895

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

WHITE, KYLE L
 J.A. TAYLOR ROOFING, INC.
 302 MELTON DRIVE
 FT PIERCE FL 34982

JEB BUSH
 GOVERNOR

DIANE CARR
 SECRETARY

DISPLAY AS REQUIRED BY LAW

1448348

STATE OF FLORIDA

DATE BATCH NUMBER LICENSE NBR

/14/2004 030719236 CCC1325720

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

TAYLOR, CHAD GEROME
 A TAYLOR ROOFING INC
 30 FRENCH CREEK LANE
 FT PIERCE FL 34982

JEB BUSH
 GOVERNOR

DIANE CARR
 SECRETARY

DISPLAY AS REQUIRED BY LAW

2003-2004

ACCOUNT 1761-00930004

ST. LUCIE COUNTY OCCUPATIONAL LICENSE
 STATE OF FLORIDA

EXPIRES SEP 30, 2004

CLASSIFICATION

ROOMS

SEATS

EMPLOYEES

21+

1761 ROOFING CONSTRUCTOR

302 Melton Drive
 C - St Lucie County

Terrence Mager Affl/w
 J A Taylor Roofing Inc
 Mager, Terrence
 302 Melton Drive
 Ft Pierce, Fl 34982

CC C057019

X RENEWAL
 NEW LICENSE
 TRANSFER-
 ORIGINAL TAX 25.00

AMOUNT
 PENALTY
 COLLECTION COST
 TOTAL 25.00

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

SUBJECT TO SUSPENSION OR REVOCATION IN
 ACCORDANCE WITH ORDINANCES OF ST. LUCIE COUNTY
 BOB DAVIS, CPA, CGFO, CFC, ST. LUCIE COUNTY TAX COLLECTOR
 BOB DAVIS, TAX COLLECTOR PAID
 08/26/03 12:51PM 00005832
 1761-00930004

2003 1761-00930004

\$25.00

2005-2006

FACILITIES
CR

MACHINES

TYPE OF
BUSINESS

BUSINESS
LOCATION

NAME
MAILING
ADDRESS

1761-ROOFING CONSTRCTOR

302 Melton Drive
St Lucie County

Terrence Mager Affl/w
J A Taylor Roofing Inc
Mager, Terrence
302 Melton Drive
Fort Pierce FL 34982

ST. LUCIE COUNTY OCCUPATIONAL LICENSE

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

ROOMS

SEATS

EMPLOYEES 21+

CC C057019

ACCOUNT 1761-00930004

EXPIRES SEP 30, 2006

X RENEWAL
NEW LICENSE
TRANSFER-
ORIGINAL TAX 25.00

AMOUNT
PENALTY
COLLECTION COST
TOTAL 25.00

Please see back for additional information

PAID 08/03/2005

99-20050003-161676

25.00



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Entegra Roof Tile Corporation
1201 N.W. 18 Street
Pompano Beach ,FL 33069

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

CONTRACTOR LICENSING SECTION
(305) 375-2527 FAX (305) 375-2558

CONTRACTOR ENFORCEMENT DIVISION
(305) 375-2966 FAX (305) 375-2908

PRODUCT CONTROL DIVISION
(305) 375-2902 FAX (305) 372-6339

Your application for Notice of Acceptance (NOA) of:

Concrete Flat Roofing Tile

under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Types of Construction, and completely described herein, has been recommended for acceptance by the Miami-Dade County Building Code Compliance Office (BCCO) under the conditions specified herein.

This NOA shall not be valid after the expiration date stated below. BCCO reserves the right to secure this product or material at any time from a jobsite or manufacturer's plant for quality control testing. If this product or material fails to perform in the approved manner, BCCO may revoke, modify, or suspend the use of such product or material immediately. BCCO reserves the right to revoke this approval, if it is determined by BCCO that this product or material fails to meet the requirements of the South Florida Building Code.

The expense of such testing will be incurred by the manufacturer.

ACCEPTANCE NO.: 01-0417.09
EXPIRES: 06/07/2006

Raul Rodriguez
Chief Product Control Division

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

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

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
APPROVED: 06/07/2001 DATE: 10/20/05

BUILDING OFFICIAL
Gene Simmons

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



Category: Roofing
Sub Category: Roofing Tile
Material: Concrete

Approval: June 7, 2001
Expiration Date: June 7, 2006

1. SCOPE

This revises a roofing system using Entegra Flat Concrete Roof Tile, as manufactured Entegra Roof Tile Corporation described in Section 2 of this Notice of Acceptance, designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County. For the locations where the pressure requirements, as determined by applicable Building Code, does not exceed the design pressure values obtain by calculations in compliance with RAS 127 using the values listed in section 4 herein. The attachment calculations shall be done as a moment based system.

2. PRODUCT DESCRIPTION

<u>Manufactured by Applicant</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Entegra Flat Tile	l = 16" w = 10" 1-1/4" thick	PA 112	Flat profile, interlocking, high pressure extruded concrete roof tile equipped with two nail holes. For direct deck or batten nail on, mortar or adhesive set applications.
Trim Pieces	l = varies w = varies varying thickness	PA 112	Accessory trim, concrete roof pieces for use at hips, rakes, ridges and valley terminations. Manufactured for each tile profile.


2.1 Components or products manufactured by others

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
Rainproof II	30" x 75' roll 36" x 75' roll or 60" x 75' roll	PA 104	Single ply, nail-on underlayment with 2" self-adhering top edge.	Protect-O-Wrap, Inc. (with current NOA)
Ice and Water Shield	36" x 75' roll	PA 103	Self-adhering underlayment	W.R. Grace Co. (with current NOA)

Frank Zuloaga, RRC
Roofing Product Control Examiner

ENTEGRA ROOF TILE CORPORATIONACCEPTANCE No. : 01-0417.09

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
Wood Battens	<u>Vertical</u> Min. 1"x 4" <u>Horizontal</u> Min. 1"x 4" for use with vertical battens or Min. 1"x 2" for use alone	Wood Preservers Institute LP - 2	Salt pressure treated or decay resistant lumber battens	generic
Tile Nails	Min. 10dx 3"	PA 114 Appendix E	Corrosion resistant screw or smooth shank nails	generic
Tile Screws	#8x 2 1/2" long 0.335" head dia. 0.131" shank dia. 0.175" screw thread dia.	PA 114 Appendix E	Corrosion resistant, coated, square drive, galvanized, coarse thread wood screws	generic
Roof Tile Mortar ("TileTite™")	N/A	PA 123	Prepared mortar mix designed for mortar set roof tile applications.	Bermuda Roof Company, Inc. with current PCA
Roof Tile Mortar ("Quikrete® Roof Tile Mortar #1140")	N/A	PA 123	Prepared mortar mix designed for mortar set roof tile applications.	Quikrete Construction Products with Current PCA
Roof Tile Mortar ("BONSAL® Roof Tile Mortar Mix")	N/A	PA 123	Prepared mortar mix designed for mortar set roof tile applications.	W. R. Bonsal Co. with current PCA
Roof Tile Adhesive ("Polypro® AH160")	N/A	See PCA	Two component polyurethane adhesive designed for adhesive set roof tile applications.	Polyfoam Products, Inc.
Roof Tile Adhesive TileBond	Factory premixed canisters	See PCA	Single component polyurethane foam roof tile adhesive	Flexible Products (with current NOA)



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Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
Hurricane Clip & Fasteners	Clips Min. ½” width Min. 0.060” thick Clip Fasteners Min. 8d x 1 ¼”	PA 114 Appendix E	Corrosion resistant clips with corrosion resistant nails.	Generic

3. LIMITATIONS

- 3.1 Fire classification is not part of this acceptance.
- 3.2 For mortar or adhesive set tile applications, a static field uplift test shall be performed in accordance with RAS 106.
- 3.3 Applicant shall retain the services of a Miami-Dade County Certified Laboratory to perform quarterly test in accordance with PA 112, appendix ‘A’. Such testing shall be submitted to the Building Code Compliance Office for review.
- 3.4 Minimum underlayments shall be in compliance with the applicable Roofing Applications Standards listed section 4.1 herein.
- 3.5 30/90 hot mopped underlayment applications may be installed perpendicular to the roof slope unless stated otherwise by the underlayment material manufacturers published literature.
- 3.6 This acceptance is for wood deck applications. Minimum deck requirements shall be in compliance with applicable Building Code.

4. INSTALLATION

- 4.1.1 Entegra ‘Flat’ Concrete Roof Tile and its components shall be installed in strict compliance with Miami Dade County Roofing Application Standard RAS 118, RAS 119, and RAS 120.
- 4.2 Data For Attachment Calculations

Tile Profile	λ (ft³)	
	Direct Deck Application	Direct Deck Application
Entegra Flat Tile	0.189	0.205



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Table 2: Restoring Moments due to Gravity - M_g (ft-lbf)

Tile Profile	3":12"		4":12"		5":12"		6":12"		7":12" or greater	
	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck
Entegra Flat Tile	6.53	6.97	6.43	6.86	6.29	6.71	6.14	6.54	5.97	N/A

Table 3: Attachment Resistance Expressed as a Moment - M_r (ft-lbf) for Nail-On Systems

Tile Profile	Fastener Type	Direct Deck (min 15/32" plywood)	Direct Deck (min. 19/32" plywood)	Battens
Entegra Flat Tile	2-10d Ring Shank Nails	30.9	38.1	17.2
	1-10d Smooth or Screw Shank Nail	7.3	9.8	4.9
	2-10d Smooth or Screw Shank Nails	14.0	18.8	7.4
	1 #8 Screw	30.8	30.8	18.2
	2 #8 Screw	51.7	51.7	24.4
	1-10d Smooth or Screw Shank Nail (Field Clip)	24.3	24.3	24.2
	1-10d Smooth or Screw Shank Nail (Eave Clip)	19.0	19.0	22.1
	2-10d Smooth or Screw Shank Nails (Field Clip)	35.5	35.5	34.8
	2-10d Smooth or Screw Shank Nails (Eave Clip)	31.9	31.9	32.2
	2-10d Ring Shank Nails ¹	50.3	65.5	48.3

¹ Installation with a 4" tile headlap and fasteners are located a min. of 2 1/2" from head of tile.

Table 4: Attachment Resistance Expressed as a Moment M_r (ft-lbf) for Two Patty Adhesive Set Systems

Tile Profile	Tile Application	Minimum Attachment Resistance
Entegra Flat Tile	Adhesive	31.3 ³

² See manufactures component approval for installation requirements.
³ Flexible Products Company TileBond Average weight per patty 13.9 grams.
 Polyfoam Product, Inc. Average weight per patty 8 grams.



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 Roofing Product Control Examiner

Table 4A: Attachment Resistance Expressed as a Moment - M_t (ft-lbf) for Single Paddy Adhesive Set Systems		
Tile Profile	Tile Application	Minimum Attachment Resistance
Entegra Flat Tile	PolyPro™	118.9 ⁴
	PolyPro™	40.4 ⁵
4 Large paddy placement of 45 grams of PolyPro™.		
5 Medium paddy placement of 24 grams of PolyPro™.		

5. LABELING

All tiles shall bear the imprint or identifiable marking of the manufacturer's name or logo, or following statement: "Miami-Dade County Product Control Approved".

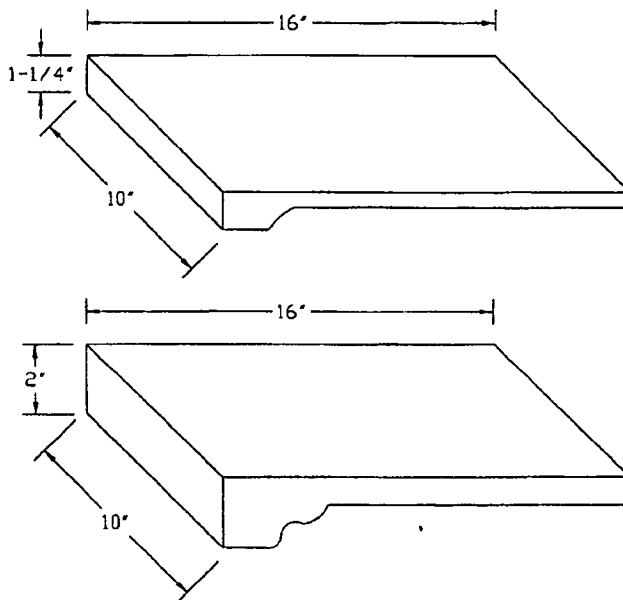
6. BUILDING PERMIT REQUIREMENTS

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

6.1.1 This Notice of Acceptance.

6.1.2 Any other documents required by the Building Official or applicable Building Code in order to properly evaluate the installation of this system.

PROFILE DRAWING



ENTEGRA "FLAT" CONCRETE ROOF TILE

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Roofing Product Control Examiner

1. Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documents, including test-supporting data, engineering documents, are no older than eight (8) years.
2. Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Miami-Dade County Product Control Approval", or as specifically stated in the specific conditions of this Acceptance.
3. Renewals of Acceptance will not be considered if:
 - a. There has been a change in the South Florida Building Code affecting the evaluation of this product and the product is not in compliance with the code changes.
 - b. The product is no longer the same product (identical) as the one originally approved.
 - c. If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product.
 - d. The engineer who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.
4. Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.
5. Any of the following shall also be grounds for removal of this Acceptance:
 - a. Unsatisfactory performance of this product or process.
 - b. Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.
6. The Notice of Acceptance number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the Notice of Acceptance is displayed, then it shall be done in its entirety.
7. A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all time. The engineer need not reseal the copies.
8. Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
9. This Notice of Acceptance consists of pages 1 through 6 and this last page 7.

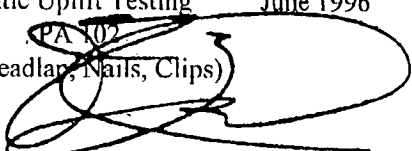
END OF THIS ACCEPTANCE



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Roofing Product Control Examiner

A. TESTS:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Redland Technologies	7161-03 Appendix III	Static Uplift Testing PA 102	Dec. 1991
Redland Technologies	7161-03 Appendix III	Static Uplift Testing PA 102(A)	Dec. 1991
Redland Technologies	7161-03 Appendix II	Wind Tunnel Testing PA 108 (Nail-On)	Dec. 1991
Redland Technologies	P0402	Withdrawal Resistance Testing of screw vs. smooth shank nails	Sept. 1993
Redland Technologies	Letter Dated Aug. 1, 1994	Wind Tunnel Testing PA 108 (Nail-On)	Aug. 1994
Redland Technologies	P0631-01	Wind Tunnel Testing PA 108 (Mortar Set)	July 1994
Professional Service Industries, Inc.	IC-1320-94	Physical Properties PA 112	Feb. 1995
The Center for Applied Engineering, Inc.	25-7688-10	Static Uplift Testing PA 101 (Mortar Set)	July 1996
The Center for Applied Engineering, Inc.	25-7688-3	Static Uplift Testing PA 101 (Adhesive Set)	June 1996
The Center for Applied Engineering, Inc.	25-7688-5	Static Uplift Testing PA 102 (3" Headlap, Nails, Direct Deck, New Construction)	June 1996
The Center for Applied Engineering, Inc.	25-7688-4	Static Uplift Testing PA 102 (4" Headlap, Nails, Clips)	June 1996


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B. OTHER

1. NTRMA Association Member
2. Notice of Acceptance number 99-1220.12



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Roofing Product Control Examiner



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

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

CONTRACTOR LICENSING SECTION
(305) 375-2527 FAX (305) 375-2558

CONTRACTOR ENFORCEMENT DIVISION
(305) 375-2966 FAX (305) 375-2908

PRODUCT CONTROL DIVISION
(305) 375-2902 FAX (305) 372-6339

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Polyfoam Products, Inc.
2400 Spring-Stuebner Road
Spring, TX 77383-1132

Your application for Notice of Acceptance (NOA) of:

Two Component Polyurethane Foam Adhesive

under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Types of Construction, and completely described herein, has been recommended for acceptance by the Miami-Dade County Building Code Compliance Office (BCCO) under the conditions specified herein.

This NOA shall not be valid after the expiration date stated below. BCCO reserves the right to secure this product or material at any time from a jobsite or manufacturer's plant for quality control testing. If this product or material fails to perform in the approved manner, BCCO may revoke, modify, or suspend the use of such product or material immediately. BCCO reserves the right to revoke this approval, if it is determined by BCCO that this product or material fails to meet the requirements of the South Florida Building Code.

The expense of such testing will be incurred by the manufacturer.

ACCEPTANCE NO.: 01-0521.02
EXPIRES: 05/10/2006

Raul Rodriguez
Chief Product Control Division

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

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

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

APPROVED: 06/14/2001

ROOFING ASSEMBLY APPROVAL

Category: Roofing
Sub-Category: Roof Tile Adhesive

Approval Date: **June 14, 2001**

Materials: Polyurethane

Expiration Date: **May 10, 2006**

1. SCOPE

This approves **Polypro® AH160** as manufactured by **Polyfoam Products, Inc.** as described in Section 2 of this Notice of Acceptance. For the locations where the design pressure requirements, as determined by applicable building code, does not exceed the design pressure values obtained by calculations in compliance with Roofing Application Standard RAS 127, for use with approved flat, low, and high profile roof tiles system using Polypro® AH 160. Where the attachment calculations are done as a moment based system for single patty placement, and as an uplift based system for double patty systems

2. PRODUCT DESCRIPTION

<u>Manufactured by Applicant</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Polypro® AH160	N/A	PA 101	Two component polyurethane Dispensing Equipment
Foampro® RTF1000	N/A		Dispensing Equipment
ProPack® 30 & 100	N/A		Dispensing Equipment

2.1 Components or products manufactured by others:

Any Miami-Dade County Product Control Accepted Roof Tile Assembly having a current NOA which list uplift resistance values with the use of Polypro AH160 roof tile adhesive.

2.2 Typical Physical Properties:

<u>Property</u>	<u>Test</u>	<u>Results</u>
Density	ASTM D 1622	1.6 lbs./ft. ³
Compressive Strength	ASTM D 1621	18 PSI Parallel to rise 12 PSI Perpendicular to rise
Tensile Strength	ASTM D 1623	28 PSI Parallel to rise
Water Absorption	ASTM D 2127	0.08 Lbs./Ft ²
Moisture Vapor Transmission	ASTM E 96	3.1 Perm / Inch
Dimensional Stability	ASTM D 2126	+0.07% Volume Change @ -40° F., 2 weeks +6.0% Volume Change @ 158°F., 100% Humidity, 2 weeks



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Product Control Examiner

Note: The physical properties listed above are presented as typical average values as determined by accepted ASTM test methods and are subject to normal manufacturing variation.

3. LIMITATIONS

- 3.1 Fire classification is not part of this acceptance. Refer to the Prepared Roof Tile Assembly for fire rating.
- 3.2 Polypro® AH160 shall solely be used with flat, low, & high tile profiles.
- 3.3 Minimum underlayments shall be in compliance with the Roofing Application Standard RAS 120.
- 3.4 Roof Tile manufactures acquiring acceptance for the use of Polypro® AH160 roof tile adhesive with their tile assemblies shall test in accordance with PA 101.
- 3.5 Roof Tile manufactures acquiring acceptance for two paddy placement with the use of Polypro® AH160 roof tile adhesive with their tile assemblies shall test in accordance with PA 101 and with section 10.4 as modified herein.

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

4. INSTALLATION

- 4.1 Polypro® AH160 may be used with any roof tile assembly having a current NOA that lists uplift resistance values with the use of Polypro® AH160.
- 4.2 Polypro® AH160 shall be applied in compliance with the Component Application section and the corresponding Placement Details noted herein. The roof tile assembly's adhesive attachment with the use of Polypro® AH160 shall provide sufficient attachment resistance, expressed as an uplift based system, to meet or exceed the uplift resistance determined in compliance with Miami-Dade County Roofing Application Standards RAS 127. The adhesive attachment data is noted in the roof tile assembly NOA
- 4.3 Polypro® AH160 roof tile adhesive and its components shall be installed in accordance with Roofing Application Standard RAS 120, and Polyfoam Products, Inc. Polypro® AH160 Operating Instruction and Maintenance Booklet.
- 4.4 Installation must be by a Factory Trained 'Qualified Applicator' approved and licensed by Polyfoam Products, Inc. Polyfoam Products Inc. shall supply a list of approved applicators to the authority having jurisdiction.
- 4.5 Calibration of the Foampro® dispensing equipment is required before application of any adhesive. The mix ratio between the "A" component and the "B" component shall be maintained between 1.0-1.15 (A) : 1.0 (B). The dispense timer shall be set to deliver 0.0175 to 0.15 pounds per tile as determined at calibration. No other settings shall be approved.
- 4.6 Polypro® AH160 shall be applied with Foampro RTF1000 or ProPack® 30 & 100 dispensing equipment only.
- 4.7 Polypro® AH160 shall not be exposed permanently to sunlight.



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Product Control Examiner

- 4.8 Tiles must be adhered in freshly applied adhesive. Tile must be set within 2 to 3 minutes after Polypro® AH160 has been dispensed.
- 4.9 Polypro® AH160 placement and minimum patty weight shall be in accordance with the 'Placement Details' herein. Each generic tile profile requires the specific placement noted herein.

Table 1: Adhesive Placement For Each Generic Tile Profile

TileProfile	Placement Detail	Single Paddy Weight Min. (grams)	Two Paddy Weight per paddy Min. (grams)
Flat, Low, High Profiles	#1	35	N/A
High Profile (2 Piece Barrel)	#1	17/side on cap and 34/pan	N/A
Flat, Low, High Profiles	#2	24	N/A
Flat, Low, High Profiles	#3		8

5. LABELING

All Polypro® AH160 containers shall comply with the Standard Conditions listed herein.

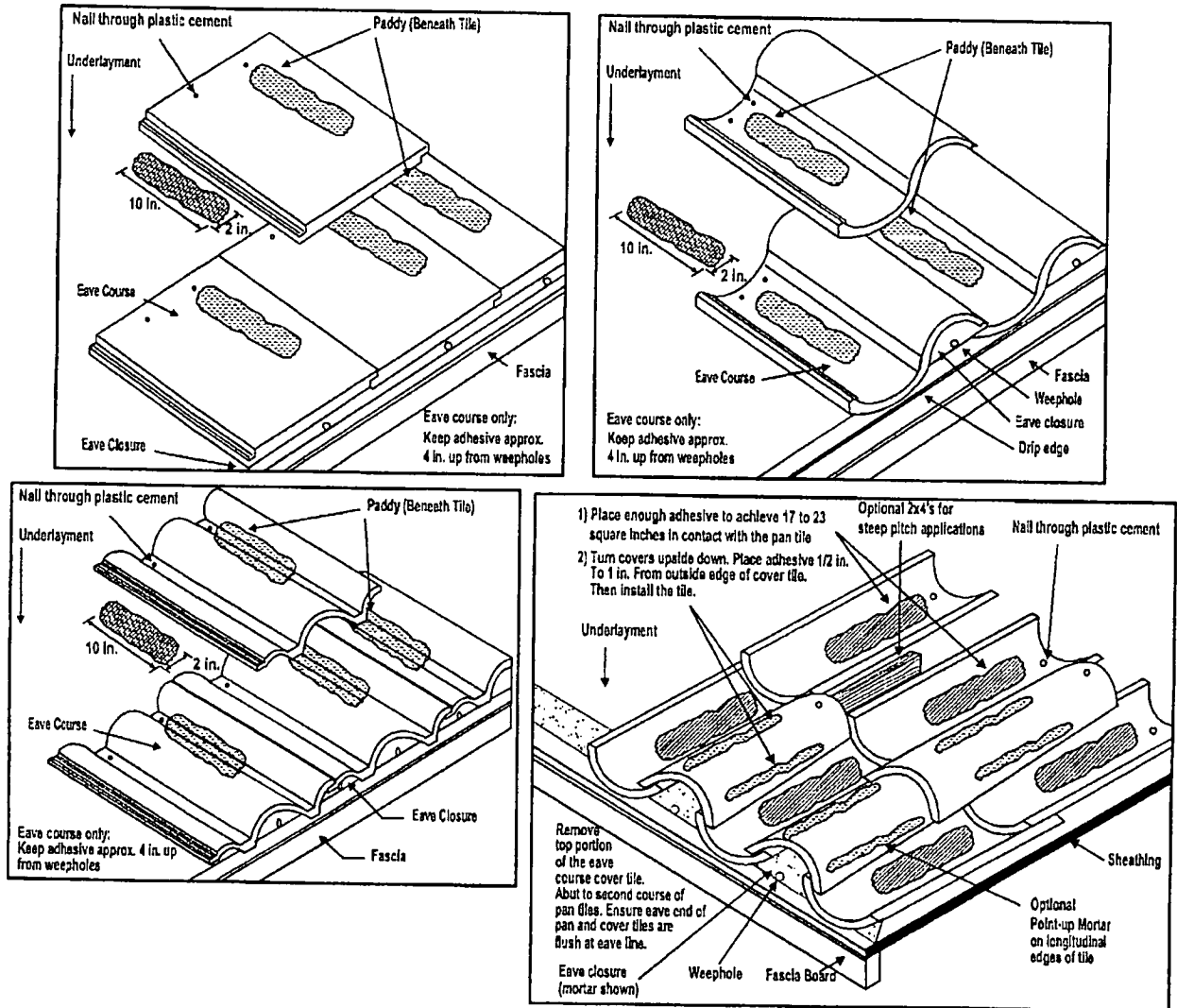
6. BUILDING PERMIT REQUIREMENTS

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



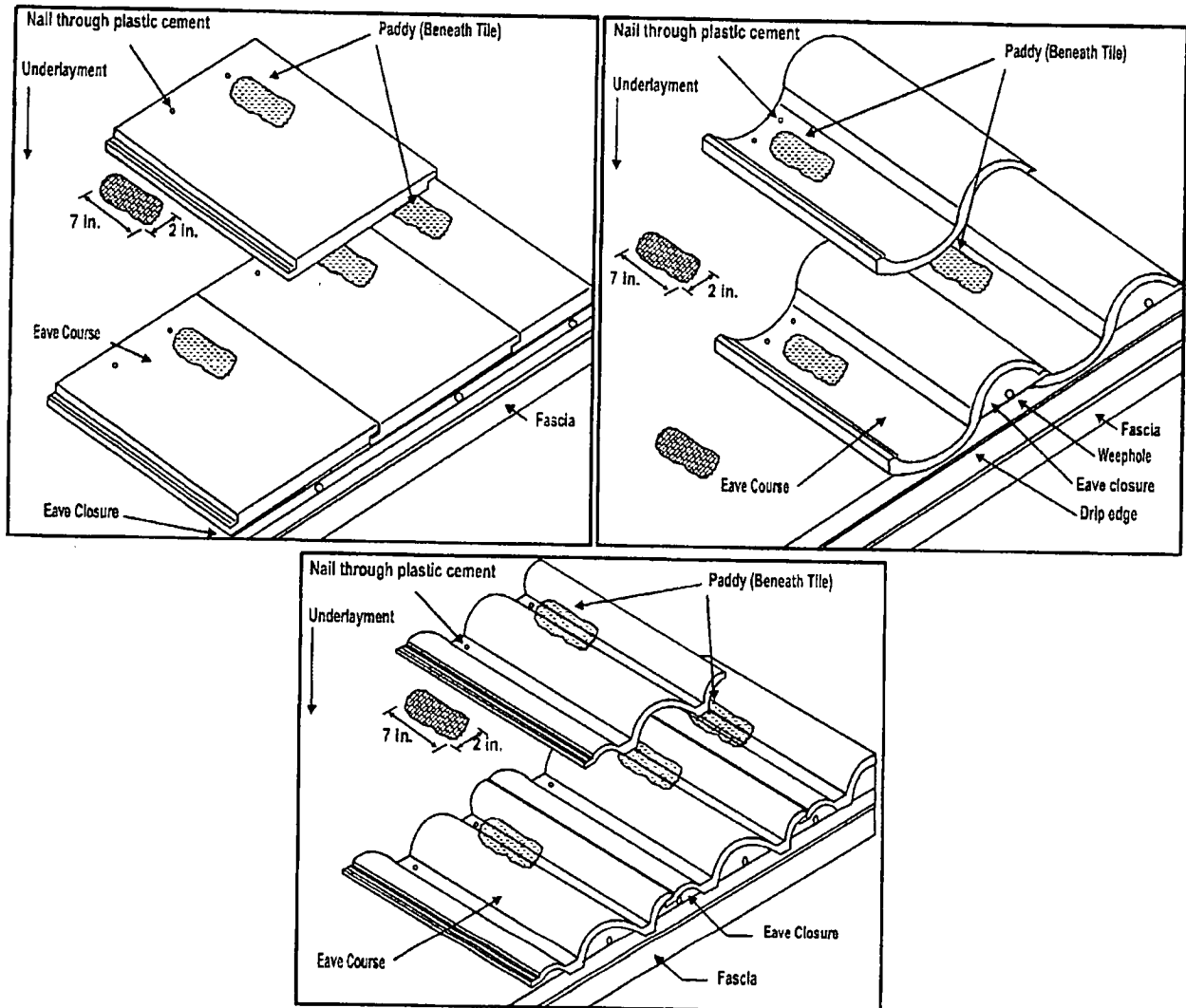
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Product Control Examiner

ADHESIVE PLACEMENT DETAIL 1 SINGLE PATTY



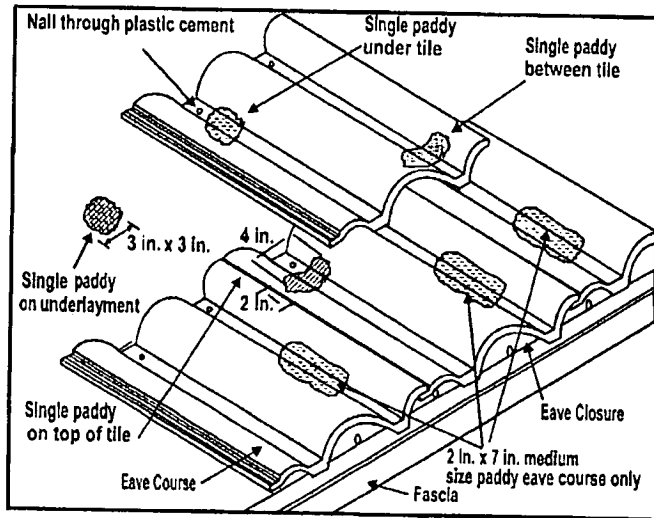
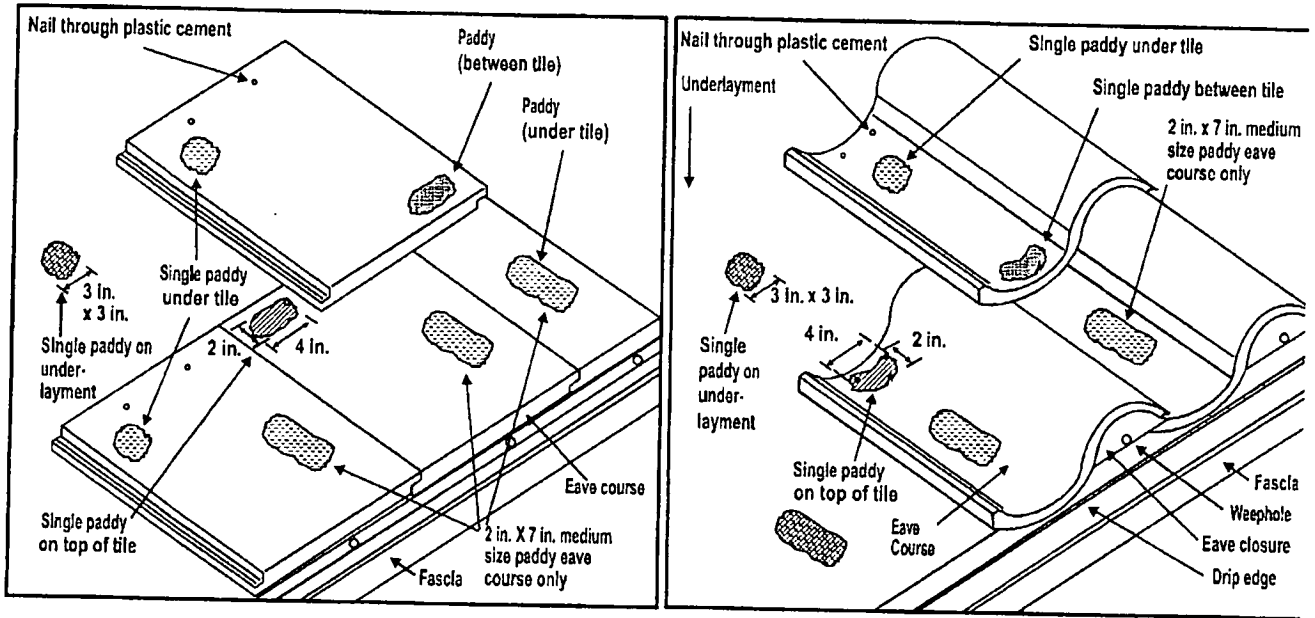
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Product Control Examiner

**ADHESIVE PLACEMENT DETAIL 2
SINGLE PATTY**



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ADHESIVE PLACEMENT DETAIL 3 DOUBLE PATTY



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Product Control Examiner

1. Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documents, including test-supporting data, engineering documents, are no older than eight (8) years.
2. Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Miami-Dade County Product Control Approval", or as specifically stated in the specific conditions of this Acceptance.
3. Renewals of Acceptance will not be considered if:
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 - b. The product is no longer the same product (identical) as the one originally approved.
 - c. If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product.
 - d. The engineer who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.
4. Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.
5. Any of the following shall also be grounds for removal of this Acceptance:
 - a. Unsatisfactory performance of this product or process.
 - b. Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.
6. The Notice of Acceptance number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the Notice of Acceptance is displayed, then it shall be done in its entirety.
7. A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all time. The engineer need not reseal the copies.
8. Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
9. This Notice of Acceptance consists of pages 1 through 8.

END OF THIS ACCEPTANCE



Frank Zuloaga, RRC
Product Control Examiner

NOTICE OF ACCEPTANCE:


EVIDENCE SUBMITTED

(For File ONLY. Not part of NOA.)

A. DRAWINGS: NONE

B. TESTS:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Center for Applied Engineering	#94-060	Miami Dade Protocol PA 101	04/08/94
Center for Applied Engineering	257818-1PA	Miami Dade Protocol PA 101	12/16/96
Center for Applied Engineering	25-7438-3 25-7438-4	SSTD 11-93	10/25/95
Center for Applied Engineering	25-7438-7	SSTD 11-93	11/02/95
Center for Applied Engineering	25-7492	SSTD 11-93	12/12/95
Miles Laboratories Polymers Division	NB-589-631	ASTM D 1623	02/01/94
Ramtech Laboratories, Inc.	9637-92	ASTM E 108	04/30/93
Southwest Research Institute	01-6743-011	ASTM E 108	11/16/94
Southwest Research Institute	01-6739-062b[1]	ASTM E 84	01/16/95
Trinity Engineering	7050.02.96-1	PA 114	03/14/96
Celotex Corp. Testing Services	528454-2-1 528454-9-1 528454-10-1	Miami Dade Protocol PA 101	10/23/98
Celotex Corp. Testing Services	520109-1 520109-2 520109-3 520109-6 520109-7	Miami Dade Protocol PA 101	12/28/98
Celotex Corp. Testing Services	520191-1 520109-2-1	Miami Dade Protocol PA 101	03/02/99


Frank Zuloaga, RRC
Product Control Examiner

Polyfoam Products Inc.

ACCEPTANCE No. : 01-0521.02

NOTICE OF ACCEPTANCE: _____ **EVIDENCE SUBMITTED**
(For File ONLY. Not part of NOA.)

- C. CALCULATIONS: Walker Engineering, Inc., Evaluation of Tests. Dated 04/07/99**
- D. MATERIAL CERTIFICATIONS: NONE**
- E. STATEMENTS: NONE**



Frank Zuloaga, RRC
Product Control Examiner



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 39. S.S.P. S. RIVER RD

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 ROOF

ROOF HIP TILES @ S.W. CORNER
INTERFERED W/ OPERATION OF
HURRICANE SHUTTERS - CUT BACK
TILES AND SEAL TOP OF HIP
@ WINDOW SILL.

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: 1/6

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1/6, 2006 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7962	HALGAS	FINAL DOCK	PASS	CLOSE
9	11 RIVER CREST CT			INSPECTOR: <i>OM</i>
	DELLA-PIETRA			
7985	TRUITT	FINAL ROOF	FAIL	
2	39 S. RIVER			INSPECTOR: <i>OM</i>
	JA TAYLOR ROOFING			
7919	FERRARO	FINAL FENCE	PASS	CLOSE
1	4 KINGSTON COURT			INSPECTOR: <i>OM</i>
	STUART FENCE			
7858	DIMITRIOU	FINAL MINOR ROOF REPAIR	PASS	CLOSE
7	6 BANYAN ROAD			INSPECTOR: <i>OM</i>
	O/B			
7896	HOLLY	PRE-DRYWALL	PASS	
3	41 S. RIVER RD			INSPECTOR: <i>OM</i>
	PHOENIX COMETA			
7938	BONIFACE	FOUNTAIN PUMBING	PASS	
4	63 S. RIVER ROAD			INSPECTOR: <i>OM</i>
	ADVANTAGE POOLS			
7727	SLATER	ELEC	FAIL	
8	4 LAGOON ISLAND	PUMBING	PASS	INSPECTOR: <i>OM</i>
	CONWAY	A/C	FAIL	
OTHER:		FRAMING	FAIL	

9203

DOORS



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:	9203	DATE ISSUED:	07/13/2009
SCOPE OF WORK:	REPLACE 2 DOORS		
CONDITIONS:			
CONTRACTOR:	KAMRELL WINDOWS AND DOORS		
PARCEL CONTROL NUMBER:	013841-014-000-00130-9	SUBDIVISION	Hillcrest Lot 13
CONSTRUCTION ADDRESS:	39 S. RIVER RD.		
OWNER NAME:	TRUITT		
QUALIFIER:	BRUCE TYRELL	CONTACT PHONE NUMBER:	288-6205

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.



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:	9203		
ADDRESS	39 S. RIVER RD.		
DATE:	07/13/2009	SCOPE:	DOOR REPLACEMENT

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submit	if declared value is less than \$100,000)		

Total square feet

Total square feet

Total Constructi

Building fee: (2

Building fee: (1

Total number o:

Radon Fee (\$.0

DBPR Licensir

Road impact assessment: (.04% of construction value - \$5.00 min.)

Martin County Impact Fee:

TOTAL BUILDING PERMIT FEE:

BRUCE M TYRRELL JR
 2441 SE Golfwood Dr
 Stuart, FL 34996-5127

1457

[Signature]
 BRANCH 78140

7/13/09

Pay to the order of

Town of Sewall's Point

Date

\$ 155

One hundred fifty five dollars



WACHOVIA

Wachovia Bank, N.A.
 wachovia.com

For Tract Permit

[Signature]



Security Features
 Details on Back.

ACCESSORY PERMIT	Declared Value:	\$	6700
Total number of inspections @ \$75.00 each	2	\$	150.00
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00

TOTAL ACCESSORY PERMIT FEE: \$ 155.00



Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: James Truitt Phone (Key) 772 283-0901 (Fax) _____

Job Site Address: 39 S. River Road City: Stuart State: FL Zip: 34994

Legal Description _____ Parcel Control Number: _____

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

REMOVE/REPLACE EXIST EXT. DOORS

WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application) YES _____ NO [X] 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: \$ 6700 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change at it) Is subject property located in flood hazard area? VE10 AEB AEB [X] FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ (Fair Market Value of the Primary Structure only, Minus the Land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Kamrell Windows & Doors Phone: 772 286 6205 Fax: 6208 Street: 2301 SE Indian St Bldg Q-4 City: Stuart State: FL Zip: 34997

State License Number: CGC 06011FD OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Bruce Tyrrell Jr. Phone Number: (772) 286 6205

DESIGN PROFESSIONAL: _____ Lic: _____ Phone Number: _____

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

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

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

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

NOTICES TO OWNERS AND CONTRACTORS:

- 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 YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCLUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 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 59-95. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W7 2006 REVISIONS SECT. 105.4.1, 106.4.1.1 - 5.

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

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

OWNER SIGNATURE: (required) OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED) State of Florida, County of: _____ This the 6th day of July 2009 by James Truitt who is personally known to me or produced as identification. My Commission Expires: 12/21/09

CONTRACTOR SIGNATURE: (required) On State of Florida, County of: Martin This the 8 day of July 20 by Bruce Tyrrell Jr. who is personally known to me or produced as identification. My Commission Expires: 9/7/2010

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!

NOTARY PUBLIC-STATE OF FLORIDA Cheryl L. Stannard Commission # DD488544 Expires: DEC. 21, 2009 Bonded Thru Atlantic Bonding Co., Inc.

NOTARY PUBLIC LINDA J. WELCH MY COMMISSION # DD 588472 EXPIRES: September 7, 2010 Bonded Thru Budget Notary Services



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

Site Provided by...
 governmax.com T1.13

Summary

print Owner 2 of 3

Parcel Info

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
01-38-41-014-000-00130-9	39 SOUTH RIVER RD	17860	Owner	0	1

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

Summary

Property Location 39 SOUTH RIVER RD
Tax District 2200 Sewall's Point
Account # 17860
Land Use 101 0100 Single Family
Neighborhood 120200
Acres 0.615

Legal Description

Property Information
 HILLCREST, LOT 13

Search By

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

Owner Information
Owner Information
 TRUITT, JAMES P JR
 TRUITT, CHARMAINE A

Mail Information
 39 S RIVER RD
 STUART FL 34996

Assessment Info
 Front Ft.

Market Land Value \$261,250
Market Impr Value \$647,990
Market Total Value \$909,240

Site Functions

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

Recent Sale
Sale Amount \$135,000

Sale Date 7/12/1989
Book/Page 0819 2159

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

Legal disclaimer / Privacy Statement

Data updated on 6/22/2009



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

PERMIT #: _____ TAX FOLIO #: _____

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE):
Hillcrest Lot 13

GENERAL DESCRIPTION OF IMPROVEMENT: Replace 2 door openings w/ impact door

OWNER NAME: James P. Truitt
ADDRESS: 39 S River Road Stuart Fl. 34996
PHONE NUMBER: _____ FAX NUMBER: _____

INTEREST IN PROPERTY: _____

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

CONTRACTOR: Kamrell Windows & Doors
ADDRESS: 2441 SE. Coltonwood Dr Stuart Fl. 34996
PHONE NUMBER: 772 288-6342 FAX NUMBER: 772 288-6308

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

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

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13 (1) (a) 7., FLORIDA STATUTES:
110109

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: _____
(THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED).
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 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.

X James P. Truitt
SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

SIGNATORY'S TITLE/OFFICE _____
THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 6th DAY OF July, 2009.
BY: _____ AS _____ FOR _____
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

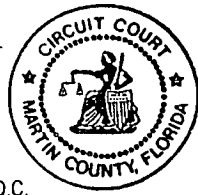
PERSONALLY KNOWN OR PRODUCED IDENTIFICATION _____
TYPE OF IDENTIFICATION PRODUCED _____
Cheryl L. Stannard
NOTARY SIGNATURE

NOTARY PUBLIC-STATE OF FLORIDA
Cheryl L. Stannard
Commission # DD488544
Expires: DEC. 21, 2009
NOTARY SEALED Thru Atlantic Bonding Co., Inc.

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

X James P. Truitt
(Signature of Natural Person Signing Above)


INSTR # 2156083 OR BK 02400 PG 1264 RECD 07/10/2009 02:24
Pg 1264; (1pp)
MARSHA EWING MARTIN COUNTY DEPUTY CLERK C Hunter



WINDOW/DOOR SCHEDULE

ID NO	APPOX OPENING SIZE (WXH)	DESIGNATION	* TYPE	IMPACT PROTECTION		REMARKS
				IMPACT GLASS	SHUTTER	
	37" X 63"	25	SH		X	EXAMPLE
1	100x96			X		Sidelite / Door / Sidelite
2	122x96			X		Sidelite / Door
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
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22						
23						
24						
25						
26						
27						
28						
29						
30						

Sidelite / Door / Sidelite

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 7-8-09

BUILDING OFFICIAL

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

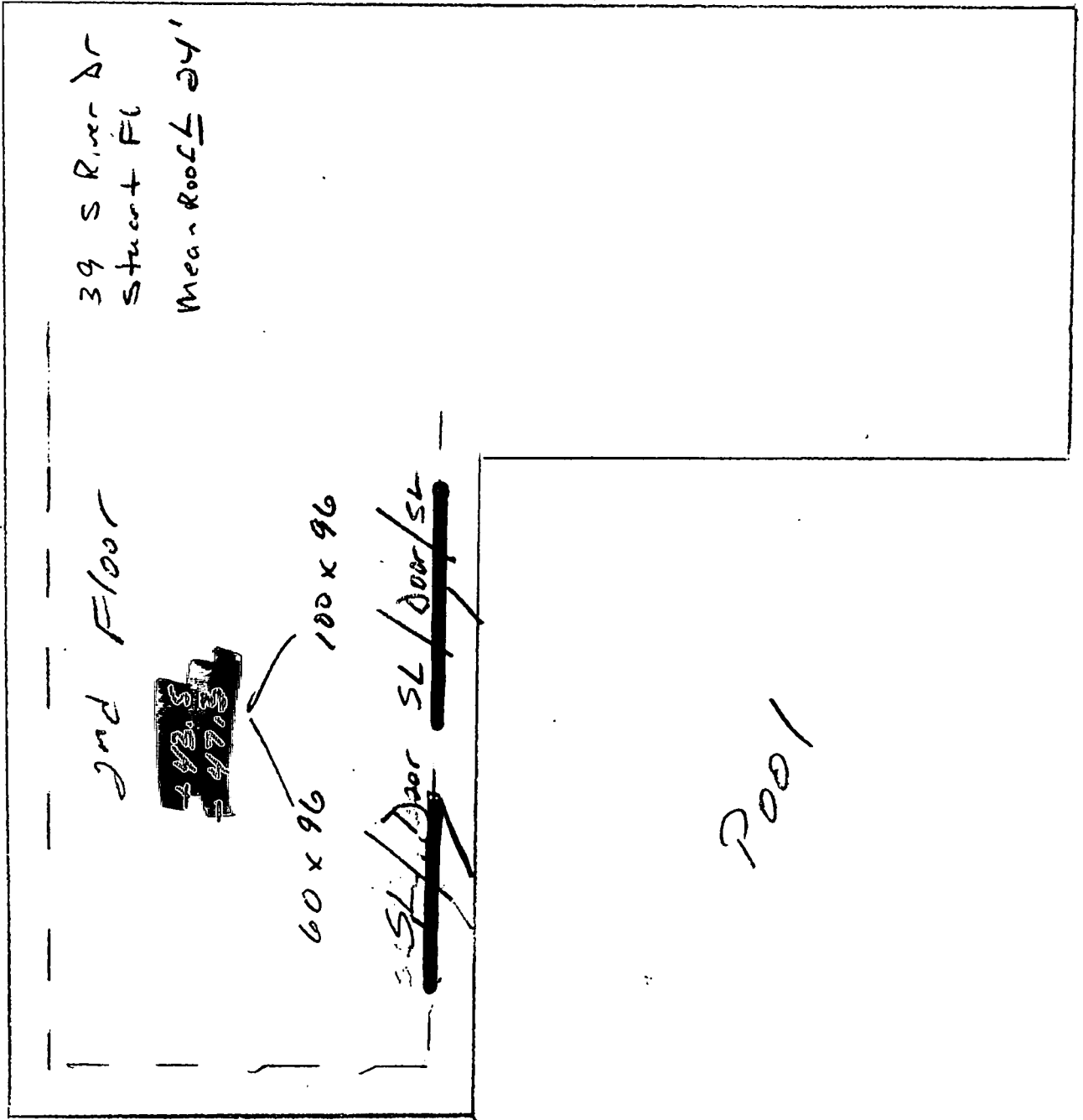
*PERCENTAGE OF NEW GLAZED AREA: _____ %
 (TOTAL INSTALLED GLAZED AREA DIVIDED BY TOTAL GLAZED OPENINGS FOR STRUCTURE)

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

*** TYPE WINDOWS**

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

Entry





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

NOTICE OF ACCEPTANCE (NOA)

E.S. Windows, LLC
10653 NE Quaybridge Ct.
Miami, FL 33138

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 High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series "3000" Aluminum Outswing French Doors w / wo Sidelites

APPROVAL DOCUMENT: Drawing No. W04-51, titled "series -3000 Alum Outswing French Doors (LMI)", sheets 1 through 7 of 7, prepared by Al-Farooq Corporation, dated 06-10-04 and last revised on Sep 28, 2007, signed and sealed by Dr. Humayoun Farooq, 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

Limitation: 1. Door installation require total four (4) flush bolts for double doors & two(2) for single doors

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 # 04-0712.02 consists of this page 1 and evidence page E-1, as well as approval document mentioned above.

The submitted documentation was reviewed by Ishaq I. Chanda, P.E.



NOA No 07-0828.09
Expiration Date: September 16, 2009
Approval Date: October 25, 2007
Page 1

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

- A. DRAWINGS** (transferred from file # 04-0712.02)
1. Manufacturer's die drawings and sections.
 2. Drawing No. **W04-51**, titled "series -3000 Alum Outswing French Doors (LMI)", sheets 1 through 7 of 7, prepared by Al-Farooq Corporation, dated 06-10-04 and last revised on Sep 28, 2007, signed and sealed by Dr. Humayoun Farooq, P.E. (Note: the revision consists of an additional glazing & hi-bottom rail options)
- B. TESTS** (transferred from file # 04-0712.02)
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 and TAS 202-94along with marked-up drawing and installation diagram of aluminum outswing French door, prepared by Fenestration Testing Laboratory, Inc., No. **FTL-3947 & FTL-3955**, dated 02/04/04, both signed and sealed by Edmundo J. Largaespada, P.E.
 2. Additional test report: Test report No. **FTL-5164** per TAS 201/203-94, issued by Fenestration Testing Laboratory, Inc, dated 08/01/07, signed & sealed by Carlos S. Roinda, P. E.
- C. CALCULATIONS** (transferred from file # 04-0712.02)
1. Anchor verification calculations and structural analysis, prepared by Al Farooq Corporation, dated 04/09/07 signed and sealed by Dr. Humayoun Farooq, P.E.
 2. Glazing complies w/ ASTM E-1300-02
- D. QUALITY ASSURANCE BY:**
1. Miami-Dade County Building Code Compliance Office (BCCO)
- E. MATERIAL CERTIFICATIONS**
1. Notice of Acceptance No. **05-1208.02** issued to E.I. DuPont DeNemours for "Butacite PVB Interlayer", expiring on 12-11-2010
 2. Notice of Acceptance No. **06-1205.10** issued to E.I. DuPont DeNemours for "SentryGlas Plus", expiring on 01-14-2008.
- F. STATEMENTS**
1. Addendum letter dated September xx, 2007, issued by Fenestration testing lab, signed & sealed by Carlos S. Roinda, P. E.
 2. Statement letter of conformance and "No financial interest", dated 06/11/07, signed and sealed by Dr. Humayoun Farooq, P.E.
 3. Laboratory compliance statements, part of the above referenced test reports.
- G. OTHER**
1. This NOA revises NOA # 04-0712.02, expiring September 16, 2009.
 2. Test proposal approved by BCCO dated 02/06/06 & 07/31/07.

Ishaq I. Chanda

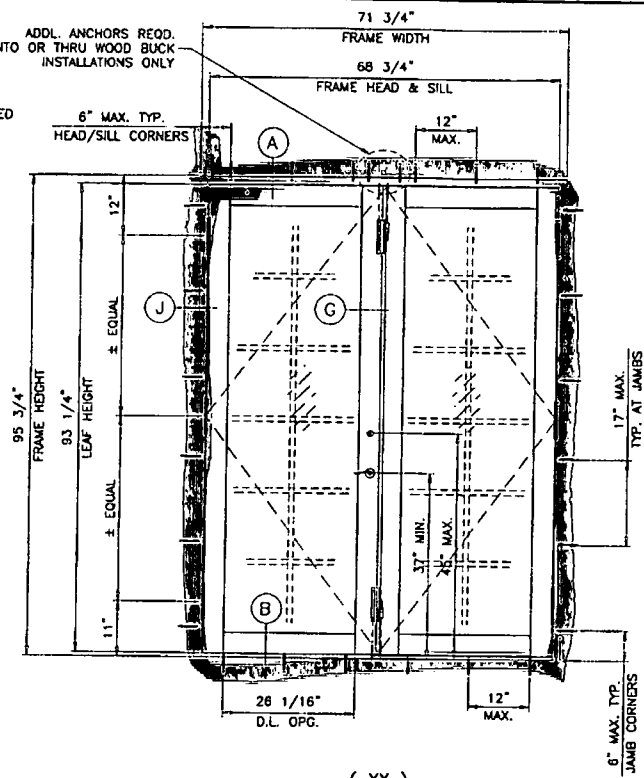
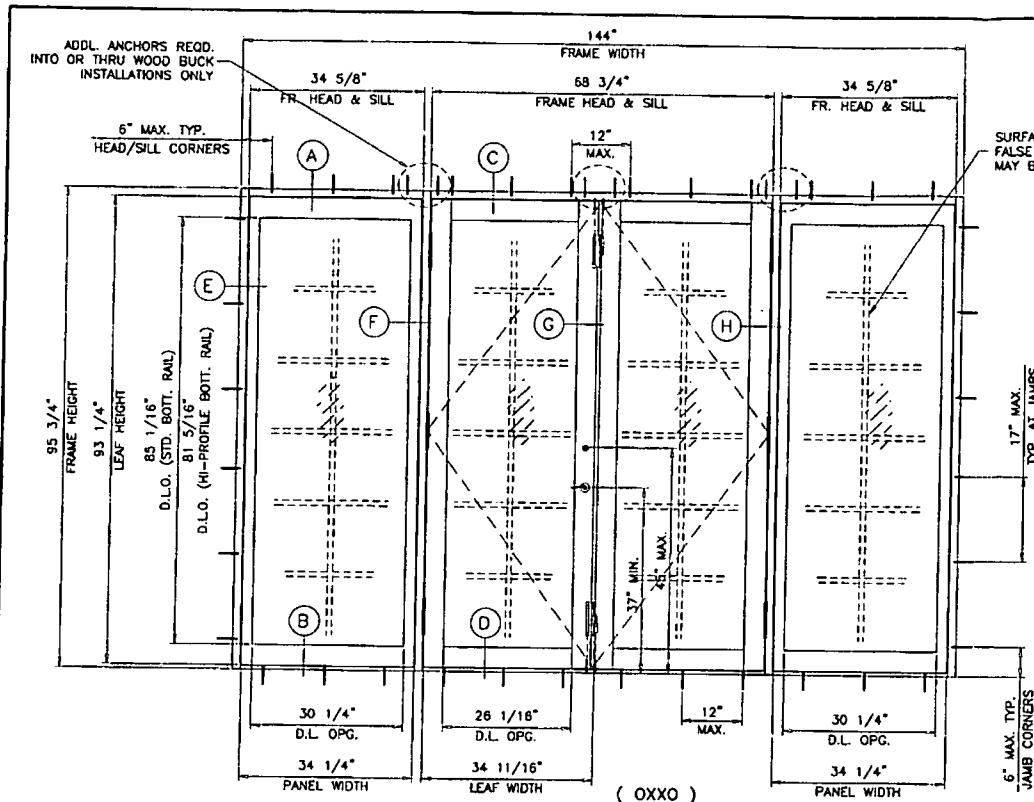
Ishaq I. Chanda, P.E.

Product Control Examiner

NOA No 07-0828.09

Expiration Date: September 16, 2009

Approval Date: October 25, 2007



TYPICAL ELEVATIONS
TESTED UNITS

SERIES-3000 ALUM OUTSWING FRENCH DOOR

THESE PRODUCTS GLAZED WITH LAMINATED GLASS RATED FOR LARGE MISSILE IMPACT AND REQUIRE NO SHUTTERS.

APPROVAL APPLIES TO SINGLE (X) AND DOUBLE (XX) LEAF DOORS WITH OR WITHOUT SIDELITES.
SIDE LITES CAN BE ON ONE OR BOTH SIDES OF DOOR.
SEE SHEET 2 FOR DESIGN LOAD CAPACITIES.

THIS PRODUCT HAS BEEN DESIGNED AND TESTED TO COMPLY WITH THE REQUIREMENTS OF THE FLORIDA BUILDING CODE 2004 EDITION INCLUDING HIGH VELOCITY HURRICANE ZONE (HVHZ).

WOOD BUCKS BY OTHERS, MUST BE ANCHORED PROPERLY TO TRANSFER LOADS TO THE STRUCTURE.

ANCHORS SHALL BE AS LISTED, SPACED AS SHOWN ON DETAILS, ANCHORS EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO.

ANCHORING OR LOADING CONDITIONS NOT SHOWN IN THESE DETAILS ARE NOT PART OF THIS APPROVAL.

A LOAD DURATION INCREASE IN ALLOWABLE STRESS IS USED IN DESIGN OF ANCHORS INTO WOOD ONLY.

MATERIALS INCLUDING BUT NOT LIMITED TO STEEL/METAL SCREWS, THAT COME INTO CONTACT WITH OTHER DISSIMILAR MATERIALS SHALL MEET THE REQUIREMENTS OF 2004 FLORIDA BLDG. CODE SECTION 2003.8.4.

NOTE:
FLUSH BOLTS ARE CONCEALED ON INACTIVE LEAF AND EXPOSED ON ACTIVE LEAF
SEE DETAIL G ON SHEET 5.

PRODUCT REVISED
as complying with the Florida
Building Code
Acceptance No **07-0828-09**
Expiration Date **SEP 16, 2009**
By Ishtaq I. Chaudh
Miami Dade Product Control
Division

Engr: DR. HUMAYOON FAROOQ
STRUCTURES
FLA. PE # 16557
C.A.N. 3538

SEP 28 2007

afC

AL-FAROOQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
1236 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL (305) 264-8100 FAX (305) 264-8100
COMP-ANL W04-51ESW

SERIES-3000 ALUM OUTSWING FRENCH DOOR (L.M.I.)

E.S. WINDOWS LLC
5220 N.W. 72 AVE. BAY #4
MIAMI, FL 33166
TEL (305) 640-3857 FAX (305) 593-2074

NO	DATE	BY	DESCRIPTION	REV. PER	REASON	COMMENTS
A	06/06/04					
B	08/21/04					
C	03/17/07					

REVISIONS:

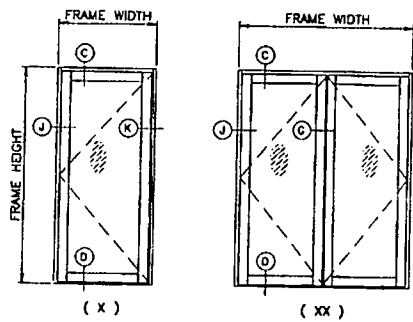
DATE:	04-10-04
SCALE:	1/2" = 1'-0"
DR. BY:	HAMID
CHK. BY:	

drawing no.
W04-51

sheet 1 of 7

DESIGN LOAD CAPACITY - PSF
SINGLE OR DOUBLE LEAF DOORS WITHOUT SIDELITES
GLASS TYPE 'A', 'B', 'C' OR 'D'

MAXIMUM DESIGN LOAD RATING = + 70.0 PSF
(FOR SIZES SHOWN BELOW OR SMALLER) - 80.0 PSF

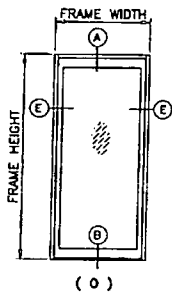


HEIGHTS:

NOMINAL HEIGHT	FRAME HEIGHT	LEAF HEIGHT	DAYLITE OPG.	
			STANDARD BOTTOM RAIL	HI-PROFILE BOTTOM RAIL
6/8	79-3/4"	77-1/4"	89-1/16"	65-5/16"
8/0	95-3/4"	93-1/4"	85-1/16"	81-5/16"

WIDTHS:

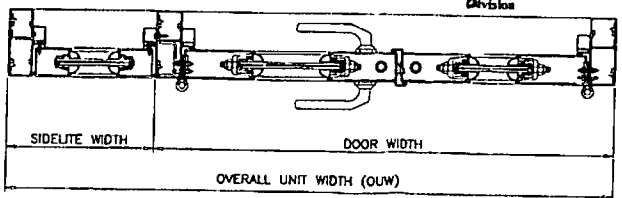
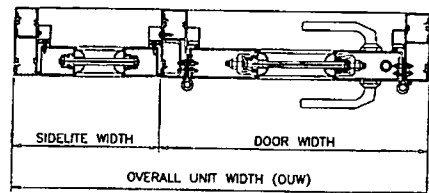
NOMINAL WIDTH	FRAME WIDTH	LEAF WIDTH	DAYLITE OPG.
2/8 (X)	31-1/2"	28-11/16"	20-1/16"
3/0 (X)	37-1/2"	34-11/16"	28-1/16"
5/0 (XX)	59-3/4"	28-11/16"	20-1/16"
6/0 (XX)	71-3/4"	34-11/16"	28-1/16"



DESIGN LOAD CAPACITY - PSF STATIONARY PANEL (O)			
FRAME WIDTH INCHES	FRAME HEIGHT FT./IN.	GLASS TYPE 'A', 'B', 'C' OR 'D'	
		EXT. (+)	INT. (-)
36	8/0	70.0	80.0
39	7/0	70.0	80.0
42	6/8	70.0	80.0

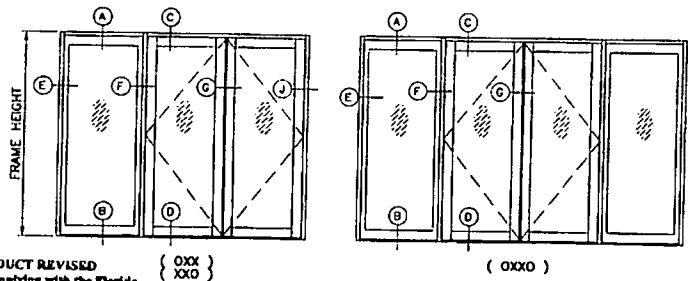
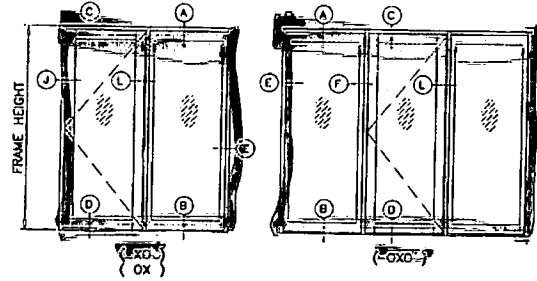
DESIGN LOAD CAPACITY - PSF SINGLE OR DOUBLE LEAF DOORS WITH SIDELITES					
SIDELITE WIDTH INCHES	FRAME HEIGHT FT./IN.	GLASS TYPE 'A', 'B', 'C' OR 'D'			
		UNREINFORCED MULLION		REINFORCED MULLION	
		EXT. (+)	INT. (-)	EXT. (+)	INT. (-)
24	6/8	70.0	80.0	70.0	80.0
27		70.0	80.0	70.0	80.0
30		70.0	80.0	70.0	80.0
33		70.0	80.0	70.0	80.0
36		70.0	80.0	70.0	80.0
39		70.0	80.0	70.0	80.0
42	7/0	70.0	80.0	70.0	80.0
24		70.0	80.0	70.0	80.0
27		70.0	80.0	70.0	80.0
30		70.0	80.0	70.0	80.0
33		70.0	80.0	70.0	80.0
36		70.0	80.0	70.0	80.0
39	8/0	70.0	80.0	70.0	80.0
18		70.0	78.9	70.0	80.0
21		70.0	74.8	70.0	80.0
24		70.0	71.1	70.0	80.0
27		67.9	67.9	70.0	80.0
30		65.0	65.0	70.0	80.0
33	36	62.4	62.4	70.0	78.9
36		60.0	60.0	70.0	76.0

NOTE:
FOR DOORS WITH SIDELITES USE SIDELITE RATING
TO QUALIFY DOOR & SIDELITES.



SIDELITE WIDTH = OUW - DOOR WIDTH

SEE SHEET 4 FOR CLASS TYPES DESCRIPTION.



PRODUCT REVISED
in compliance with the Florida
Building Code
Acceptance No. 07-0828-09
Expiration Date Sep 14, 2009
By: *Isaac J. Chande*
Missed Detail/Project Control
Division

NOTE:
GLASS CAPACITIES ON THIS SHEET ARE
BASED ON ASTM E1300-02 (3 SEC. GUSTS)
AND FLORIDA BUILDING COMMISSION
DECLARATORY STATEMENT DCA05-DEC-219

Engr. DR. HUMAYOON FAROOQ
STRUCTURES
FLA. PE # 18557
C.A.N. 3538

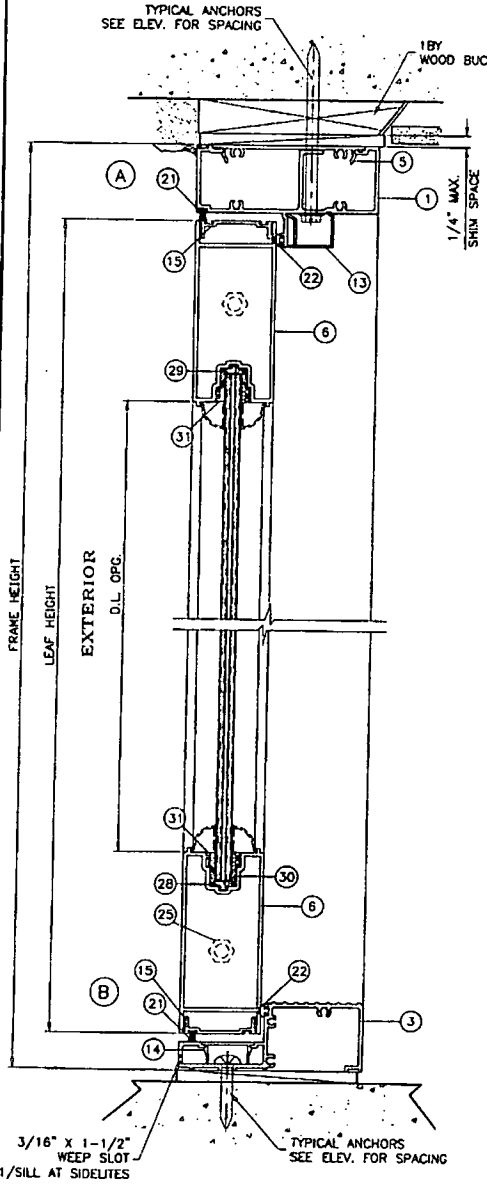
SEP 28 2007

afC
AL-FAROOQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
1235 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL (305) 264-8100 FAX (305) 262-8978
COMP-ANL\W04-51ESW

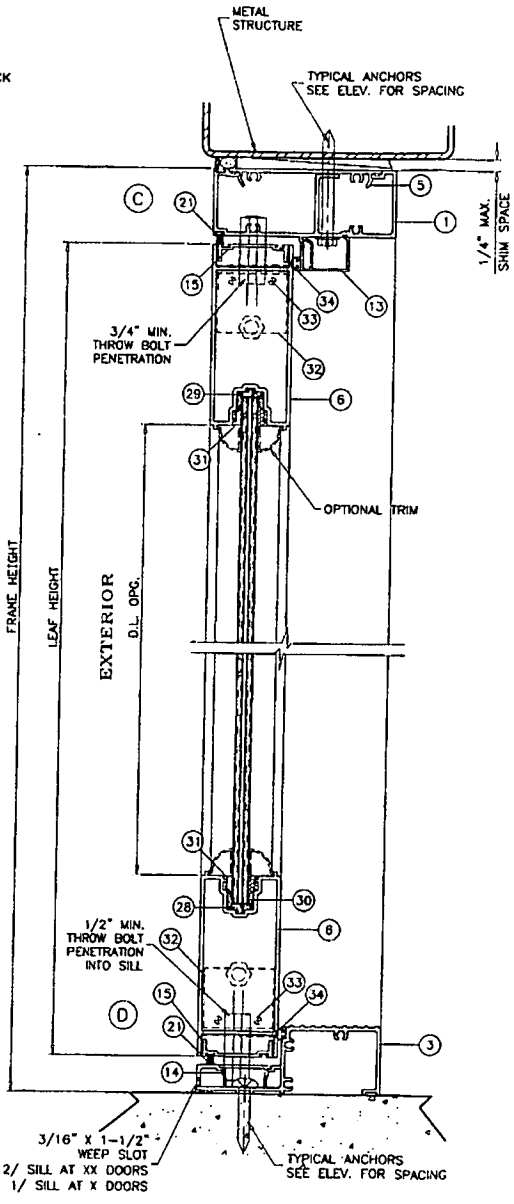
SERIES-3000 ALUM. OUTSWING FRENCH DOOR (L.W.I.)
E.S. WINDOWS LLC
5220 N.W. 72 AVE. BAY #4
MIAMI, FL 33166
TEL (305) 640-9957 FAX (305) 593-2074

NO.	DATE	BY	DESCRIPTION
A	08/06/04	REV. PER BECO COMMENTS	
B	08/21/06	UPDATED FOR 700A FBC	
C	08/17/07	REV. PER BECO COMMENTS	
			GLASS 'D' & BOT. RAIL ADDED

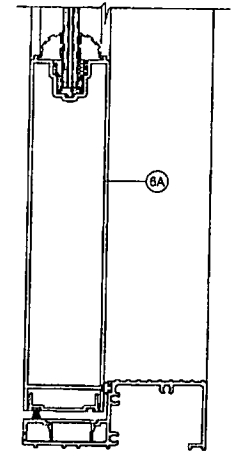
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scale: 1/2" = 1'-0"
dr. by: HAMID
chd. by:
drawing no. **W04-51**
sheet 2 of 7



STATIONARY UNITS



OPERABLE UNITS



HI-PROFILE BOTTOM RAIL
APPLICABLE TO STATIONARY AND OPERABLE UNITS

Engr. DR. HUMAYUN FAROOQ
STRUCTURES
FLA. PE # 16557
C.A.N. 3538

SEP 28 2007

PRODUCT REVISED
as complying with the Florida
Building Code
Acceptance No. 07-0828.09
Expiration Date SEP 16, 2009
By: Ishag J. Ahmad
Miami Dade Product Control
Division

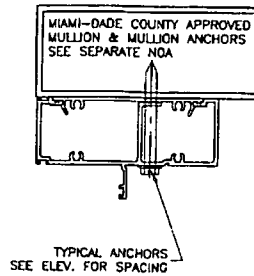
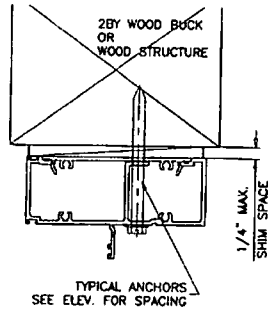
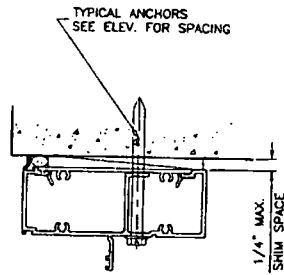
REV.	DATE	DESCRIPTION	BY
A	04/04/04	NO CHANGE THIS SHEET	
B	04/21/04	UPDATED FOR 2004 IBC	
C	04/17/07	REV. PER 600 COMMENTS DUPLICATE & BOTT. DATE ADDED	

date: 06-10-04
scale: 3/8" = 1"
dr. by: HAWID
chk. by:

drawing no.
W04-51
sheet 3 of 7

af c
AL-FAROOQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
1238 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL (305) 264-8100 FAX (305) 262-6978
COMP-ANL W04-51ESW

SERIES-3000 ALUM OUTSWING FRENCH DOOR (LM1)
E.S. WINDOWS LLC
5220 N.W. 72 AVE. BAY #4
MIAMI, FL 33166
TEL (305) 640-9857 FAX (305) 593-2074



WOOD BUCKS AND METAL STRUCTURE NOT BY E.S. WINDOWS MUST SUSTAIN LOADS IMPOSED BY GLAZING SYSTEM AND TRANSFER THEM TO THE BUILDING STRUCTURE.

TYPICAL ANCHORS: SEE ELEV. FOR SPACING

ANCHORS BY ELEV.

INTO 2BY WOOD BUCKS OR WOOD STRUCTURES
1-3/8" MIN. PENETRATION INTO WOOD

THRU 1BY BUCKS INTO CONC. OR MASONRY
1-3/8" MIN. EMBED INTO CONC. OR MASONRY

DIRECTLY INTO CONC. OR MASONRY
1-1/4" MIN. EMBED INTO CONC. OR MASONRY

#14 SMS OR SELF DRILLING SCREWS

INTO METAL STRUCTURES

STEEL : 12 GA. MIN. (Fy = 36 KSI MIN.)
ALUMINUM : 1/8" THK. MIN. (6063-T5 MIN.)
(STEEL IN CONTACT WITH ALUMINUM TO BE PLATED OR PAINTED)

#14 SMS OR SELF DRILLING SCREWS

INTO DADE COUNTY APPROVED MULLIONS (MIN. THK. = .090")
(NO SHIM SPACE)

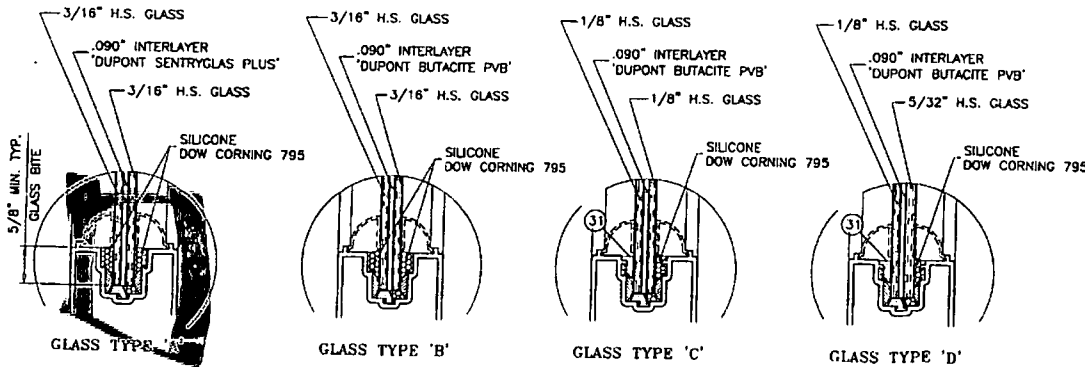
TYPICAL EDGE DISTANCE

INTO CONCRETE AND MASONRY = 2-1/2" MIN.
INTO WOOD STRUCTURE = 1" MIN.
INTO METAL STRUCTURE = 5/8" MIN.

SEALANTS:

ALL JOINTS AND FRAME CONNECTIONS SEALED WITH WHITE/ALUMINUM COLORED SILICONE.

PRODUCT REVIEWED
as complying with the Florida Building Code
Acceptance No. 07-0828-09
Expiration Date SEP 16, 2007
By *Clayton I. Clark*
Miami Dade Product Control Division



GLAZING OPTIONS

Engr: DR. HUMAYOUN FAROOQ
STRUCTURES
FLA. PE # 16337
C.A.N. 3538

SEP 28 2007

afC
AL-FAROOQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
12336 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL. (305) 264-8100 FAX. (305) 262-6978
COMP-ANL\W04-51ESW

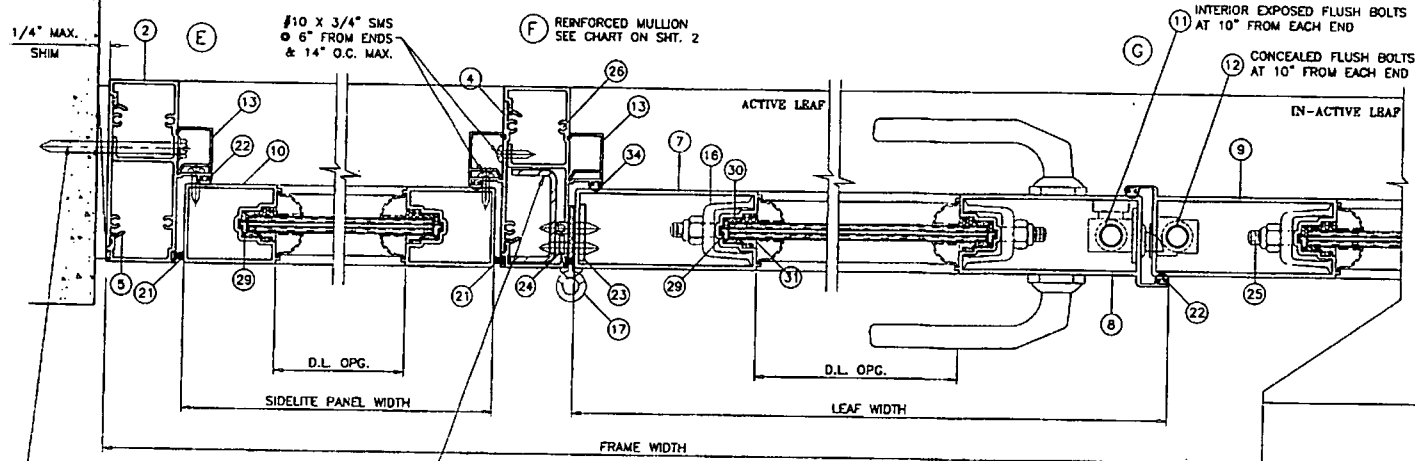
SERIES-3000 ALUM. OUTSWING FRENCH DOOR (L.M.I.)
E.S. WINDOWS LLC
5220 N.W. 72 AVE. BAY #4
MIAMI, FL. 33166
TEL. (305) 640-9857 FAX. (305) 593-2074

NO.	DATE	BY	DESCRIPTION
A	08.08.04	NO CHANGE	THIS SHEET
B	08.21.04	REV.	UPDATED FOR 2004 FBC
C	08.17.07	REV.	PER BIDD COMMENTS CLASS 'D' & BIDD. BAK. ADDED

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scale: 3/8" = 1"
dr. BY: HAWTD
chk. by:

drawing no.
W04-51
sheet 4 of 7

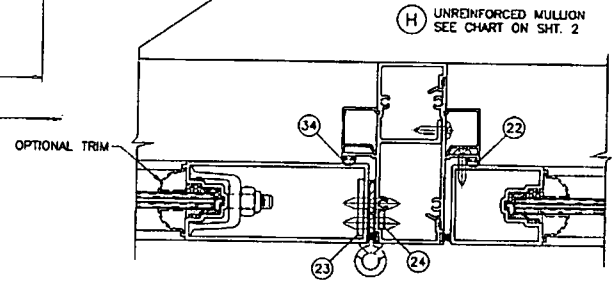
(FLUSH BOLTS AT ACTIVE AND INACTIVE LEAFS MUST BE ENGAGED DURING PERIODS OF HURRICANE WARNING)



TYPICAL ANCHORS SEE ELEV. FOR SPACING

.96" X 2" X .96" X 1/8" FULL LENGTH STL CHANNEL (STEEL TO BE PAINTED OR PLATED)

EXTERIOR (OXXO)



H UNREINFORCED MULLION SEE CHART ON SHT. 2

TYPICAL ANCHORS SEE ELEV. FOR SPACING

TYPICAL ANCHORS SEE ELEV. FOR SPACING

TYPICAL ANCHORS SEE ELEV. FOR SPACING

1/4" MAX. SHIM SPACE

1/4" MAX. SHIM SPACE

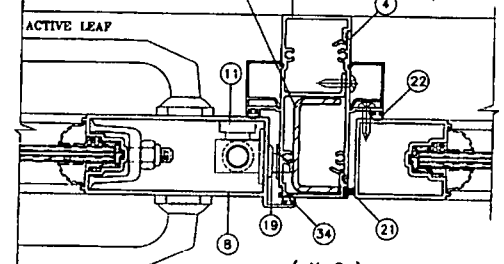
MULLION REINFORCING CHANNEL .96" X 2" X .96" X 1/8" FULL LENGTH (STEEL TO BE PAINTED OR PLATED)

L REINFORCED MULLION SEE CHART ON SHT. 2

METAL STRUCTURE

18BY WOOD BUCK

2BY WOOD BUCK OR WOOD STRUCTURE



EXTERIOR (X)

PRODUCT REVISED as complying with the Florida Building Code Acceptance No. 07-0828-09 Expiration Date SEP 16, 2009 By *Wesley L. Chanda* Miami Dade Product Control Division

Engr: DR. HUMAYOUN FAROOQ STRUCTURES FLA. PE # 16557 C.A.N. 3538

SEP 28 2007

af c
AL-FAROOQ CORPORATION
 ENGINEERS & PRODUCT DEVELOPMENT
 1335 S.W. 87 AVE
 MIAMI, FLORIDA 33174
 TEL (305) 264-8100 FAX (305) 262-0378
 COMP-ANL W04-STESW

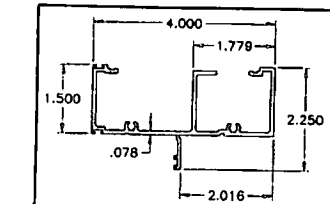
SERIES-3000 ALUM OUTSWING FRENCH DOOR (L.M.I.)
E.S. WINDOWS LLC
 5220 N.W. 72 AVE. BAY #4
 MIAMI, FL 33166
 TEL. (305) 640-9857 FAX. (305) 593-2074

REV. NO.	DATE	DESCRIPTION
1	08/03/04	REV. PER BIDD COMMENTS
2	08/21/06	UPDATED FOR 2004 FBC
3	08/17/07	REV. PER BIDD COMMENTS
4		CLASS 'D' & BOTT. RAIL ADDED

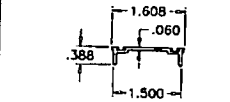
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dr. by:	HAUD
chk. by:	

drawing no.
W04-51

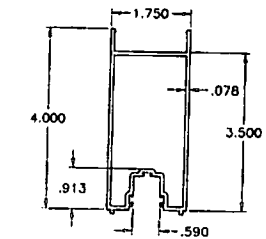
sheet 5 of 7



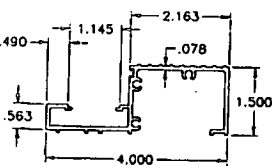
① ② FRAME HEAD/JAMB



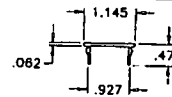
⑬ WEATHERSTRIP ADAPTER



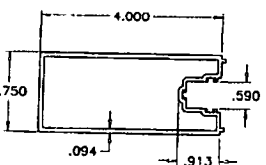
⑥ TOP/BOTTOM RAIL



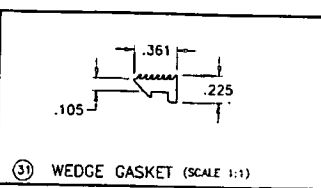
③ FRAME SILL



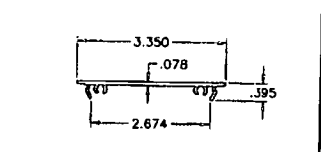
⑭ SILL COVER



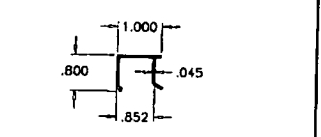
⑦ HINGE STILE



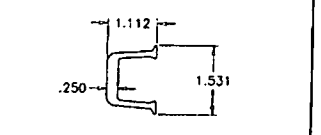
⑤ WEDGE GASKET (SCALE 1:1)



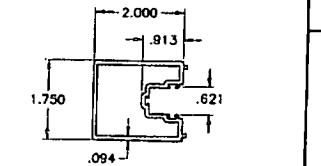
⑤ SHEAR PLATE



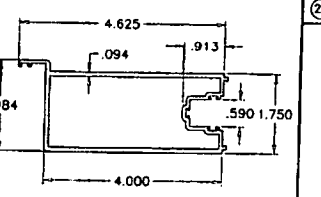
⑬ JAMB TRIM (OPTIONAL)



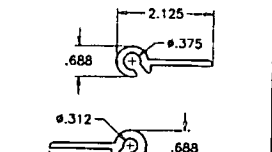
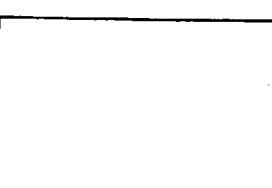
⑬ PANEL CLAMP



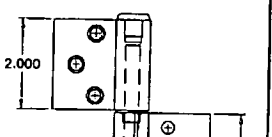
⑩ SIDE LITE STILE



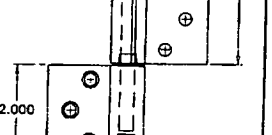
⑧ ⑨ LOCK STILE/KEEPER STILE



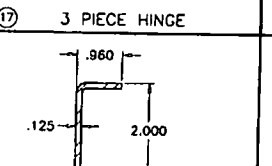
⑤ SHEAR PLATE



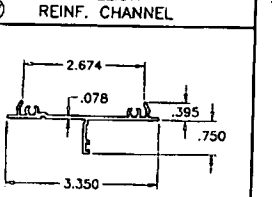
⑬ JAMB TRIM (OPTIONAL)



⑬ PANEL CLAMP

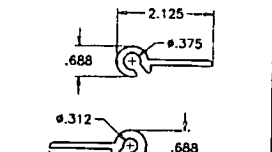


⑩ SIDE LITE STILE

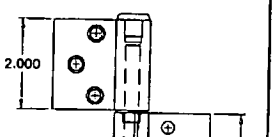


⑧ ⑨ LOCK STILE/KEEPER STILE

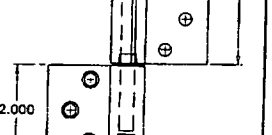
ITEM #	PART #	QUANTITY	DESCRIPTION	MATERIAL	MANF./SUPPLIER/REMARKS
1	ES3001-1	1	FRAME HEAD	6063-T6	-
2	ES3001-2	2	DOOR FRAME JAMB	6063-T6	-
3	ES3002-1	1	DOOR FRAME SILL	6063-T5	-
4	ES3003-1	AS REQD.	SIDELITE ADAPTER	6063-T6	-
5	ES3004	AS REQD.	SHEAR PLATE @ ANCHOR LOCATIONS	6063-T6	3" LONG
6	ES3005-1	2/ LEAF	TOP AND BOTTOM RAIL	6063-T5	-
6A	ES3024	2/ LEAF	HI-PROFILE BOTTOM RAIL	6063-T5	-
7	ES3006-1	1/ LEAF	DOOR LEAF JAMB - HINGE SIDE	6063-T5	-
8	ES3007-1	1/ LEAF	DOOR LEAF - LOCK SIDE	6063-T6	-
9	ES3007-2	1/ LEAF	DOOR LEAF - KEEPER SIDE	6063-T6	-
10	ES3008-1	AS REQD.	SIDELITE STILE	6063-T5	-
11	FB-1202-914	2/ LEAF	EXPOSED FLUSH BOLT	STEEL	SULLIVAN & ASSOCIATES
12	FB-1202-914	2/ LEAF	CONCEALED FLUSH BOLT	STEEL	SULLIVAN & ASSOCIATES
13	ES3011	AS REQD.	JAMB TRIM	6063-T5	OPTIONAL
14	ES3012	1	SILL COVER	6063-T6	-
15	ES3013	2/ LEAF	WEATHERSTRIP ADAPTER	6063-T5	-
16	ES3014-1	4/ PANEL	PANEL CLAMP	6063-T6	-
17	ES3003-3	3/ OPER. LEAF	HINGE ASSEMBLY	6063-T6	-
19	-	-	DOOR LOCK (SAVANNAH 201SL)	-	YALE
20	-	-	DEAD BOLT LOCK (PREMIER)	-	YALE
21	W22321NG	AS REQD.	FIN-SEAL PILE W/STRIPPING	-	ULTRAFAB
22	ES3020	AS REQD.	BULB WEATHERSTRIPPING	VNYL	AT SIDELITE PANELS
23	-	1/ HINGE	HINGE REINFORCING BAR	ALUMINUM	1-1/4"x1/8"x4-1/4" LONG
24	-	AS REQD.	HINGE REINFORCING BAR	ALUMINUM	1/8" THK. X 7-7/8" LONG
25	-	2/ LEAF	3/8" DIA. THREADED ROD W/ NUTS	STEEL	-
26	-	AS REQD.	FRAME ASSY. SCREWS	-	#10 PAN HEAD SMS
27	-	AS REQD.	MULLION REINFORCING CHANNEL	A36 STEEL	-
28	ES4014	AS REQD.	BOTTOM RAIL GLASS STOP	NEOPRENE	-
29	ES4018	AS REQD.	PANEL SILICONE STOP	NEOPRENE	-
30	-	AS REQD.	3/8" DIA. X 1/8" HT. BUMPER	SILICONE	FRANK LOWE RUBBER CO.
31	ES4013	AS REQD.	WEDGE GASKET	-	-
32	ES3022	2/ STILE	FLUSH BOLT BRACKET	6063-T5	-
33	-	2/ BKT.	BRACKET INSTALLATION SCREWS	-	#10 X 1" FH SMS
34	Q/LON	AS REQD.	DOOR PANEL W/STRIPPING	-	SCHLEGEL



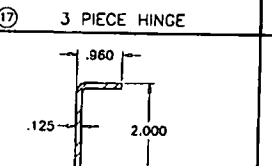
⑤ SHEAR PLATE



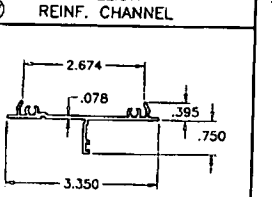
⑬ JAMB TRIM (OPTIONAL)



⑬ PANEL CLAMP

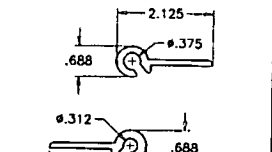


⑩ SIDE LITE STILE

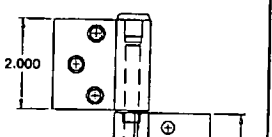


⑧ ⑨ LOCK STILE/KEEPER STILE

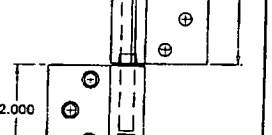
ITEM #	PART #	QUANTITY	DESCRIPTION	MATERIAL	MANF./SUPPLIER/REMARKS
1	ES3001-1	1	FRAME HEAD	6063-T6	-
2	ES3001-2	2	DOOR FRAME JAMB	6063-T6	-
3	ES3002-1	1	DOOR FRAME SILL	6063-T5	-
4	ES3003-1	AS REQD.	SIDELITE ADAPTER	6063-T6	-
5	ES3004	AS REQD.	SHEAR PLATE @ ANCHOR LOCATIONS	6063-T6	3" LONG
6	ES3005-1	2/ LEAF	TOP AND BOTTOM RAIL	6063-T5	-
6A	ES3024	2/ LEAF	HI-PROFILE BOTTOM RAIL	6063-T5	-
7	ES3006-1	1/ LEAF	DOOR LEAF JAMB - HINGE SIDE	6063-T5	-
8	ES3007-1	1/ LEAF	DOOR LEAF - LOCK SIDE	6063-T6	-
9	ES3007-2	1/ LEAF	DOOR LEAF - KEEPER SIDE	6063-T6	-
10	ES3008-1	AS REQD.	SIDELITE STILE	6063-T5	-
11	FB-1202-914	2/ LEAF	EXPOSED FLUSH BOLT	STEEL	SULLIVAN & ASSOCIATES
12	FB-1202-914	2/ LEAF	CONCEALED FLUSH BOLT	STEEL	SULLIVAN & ASSOCIATES
13	ES3011	AS REQD.	JAMB TRIM	6063-T5	OPTIONAL
14	ES3012	1	SILL COVER	6063-T6	-
15	ES3013	2/ LEAF	WEATHERSTRIP ADAPTER	6063-T5	-
16	ES3014-1	4/ PANEL	PANEL CLAMP	6063-T6	-
17	ES3003-3	3/ OPER. LEAF	HINGE ASSEMBLY	6063-T6	-
19	-	-	DOOR LOCK (SAVANNAH 201SL)	-	YALE
20	-	-	DEAD BOLT LOCK (PREMIER)	-	YALE
21	W22321NG	AS REQD.	FIN-SEAL PILE W/STRIPPING	-	ULTRAFAB
22	ES3020	AS REQD.	BULB WEATHERSTRIPPING	VNYL	AT SIDELITE PANELS
23	-	1/ HINGE	HINGE REINFORCING BAR	ALUMINUM	1-1/4"x1/8"x4-1/4" LONG
24	-	AS REQD.	HINGE REINFORCING BAR	ALUMINUM	1/8" THK. X 7-7/8" LONG
25	-	2/ LEAF	3/8" DIA. THREADED ROD W/ NUTS	STEEL	-
26	-	AS REQD.	FRAME ASSY. SCREWS	-	#10 PAN HEAD SMS
27	-	AS REQD.	MULLION REINFORCING CHANNEL	A36 STEEL	-
28	ES4014	AS REQD.	BOTTOM RAIL GLASS STOP	NEOPRENE	-
29	ES4018	AS REQD.	PANEL SILICONE STOP	NEOPRENE	-
30	-	AS REQD.	3/8" DIA. X 1/8" HT. BUMPER	SILICONE	FRANK LOWE RUBBER CO.
31	ES4013	AS REQD.	WEDGE GASKET	-	-
32	ES3022	2/ STILE	FLUSH BOLT BRACKET	6063-T5	-
33	-	2/ BKT.	BRACKET INSTALLATION SCREWS	-	#10 X 1" FH SMS
34	Q/LON	AS REQD.	DOOR PANEL W/STRIPPING	-	SCHLEGEL



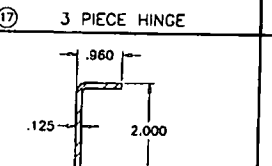
⑤ SHEAR PLATE



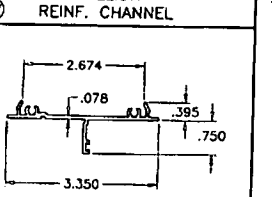
⑬ JAMB TRIM (OPTIONAL)



⑬ PANEL CLAMP

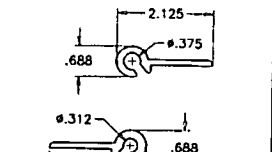


⑩ SIDE LITE STILE

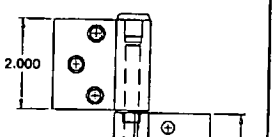


⑧ ⑨ LOCK STILE/KEEPER STILE

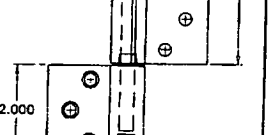
ITEM #	PART #	QUANTITY	DESCRIPTION	MATERIAL	MANF./SUPPLIER/REMARKS
1	ES3001-1	1	FRAME HEAD	6063-T6	-
2	ES3001-2	2	DOOR FRAME JAMB	6063-T6	-
3	ES3002-1	1	DOOR FRAME SILL	6063-T5	-
4	ES3003-1	AS REQD.	SIDELITE ADAPTER	6063-T6	-
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7	ES3006-1	1/ LEAF	DOOR LEAF JAMB - HINGE SIDE	6063-T5	-
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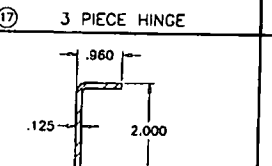
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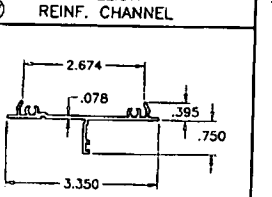
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⑬ PANEL CLAMP

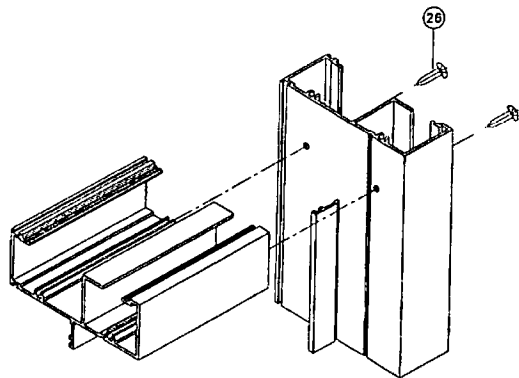


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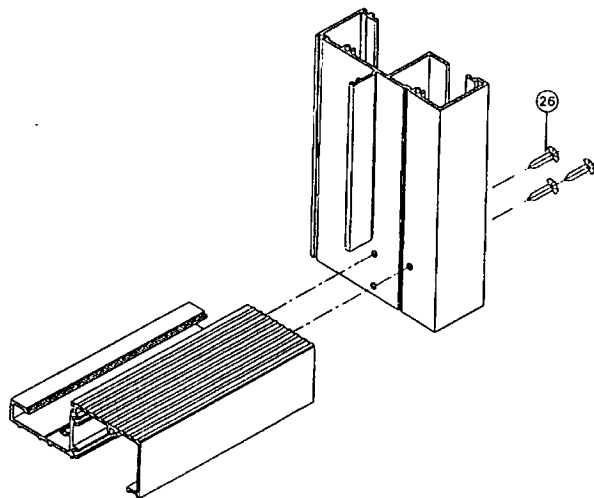


⑧ ⑨ LOCK STILE/KEEPER STILE

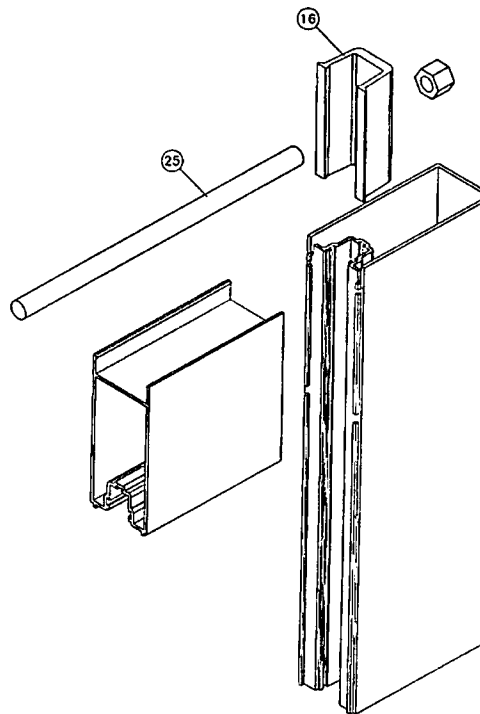
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32	ES3022	2/ STILE	FLUSH BOLT BRACKET	6063-T5	-
33	-	2/ BKT.	BRACKET INSTALLATION SCREWS	-	#10 X 1" FH SMS
34	Q/LON	AS REQD.			



FRAME TOP CORNER



FRAME BOTTOM CORNER



DOOR LEAF CORNER

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 07-0826.09
 Expiration Date SEP 16, 2009
 By: *Shay L. Gandy*
 Miami Dade Product Control
 Division

Engr: DR. HUMAYOUN FAROOQ
 STRUCTURES
 FLA. PE # 16557
 C.A.N. 3536

SEP 28 2007

afc

AL-FAROOQ CORPORATION
 ENGINEERS & PRODUCT DEVELOPMENT
 1235 S.W. 87 AVE
 MIAMI, FLORIDA 33174
 TEL. (305) 264-8100 FAX. (305) 263-6978
 COMP-ANL W04-51ESW

SERIES-3000 ALUM OUTSWING FRENCH DOOR (L.M.I.)
E.S. WINDOWS LLC
 5220 N.W. 72 AVE. BAY #4
 MIAMI, FL. 33166
 TEL. (305) 640-9857 FAX. (305) 593-2074

NO	DATE	BY	DESCRIPTION
A	08/08/04		NO CHANGE THIS SHEET
B	08/21/06		NO CHANGE THIS SHEET
C	08/17/07		NO CHANGE THIS SHEET

date: 08-10-04	scale: 3/8" = 1"
dr. by: HAUID	chk. by:

drawing no.
W04-51

sheet 7 of 7

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

7-24

2009

Page

1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9203	Trusell	Final		
93	395 River Rd Kamell	Doors	Pass	Close INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9142	Henners 4 Morgan Cir Gubler	retaining walls FINAL CONCRETE	Pass	INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
CE	2 Via de Cristo	lawn again		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9200	Conway 4 Oakhill Way Conway (285-2673)	Final windows	Pass	Close INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9196	Jenkins ^{OFF RIDGELAND} 4 Sabal Ct H Solar East	Final solar	Pass	Close INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9195	Merkin 93 N Sewalls OB	Final concrete	Pass	Close INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9162	Ames 114 S Sewalls Jensen Beach Alum (code 1994)	Window buck	Pass	INSPECTOR <i>JA</i>

9234

GARAGE DOOR



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

BUILDING PERMIT CARD

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

PERMIT NUMBER:	9234	DATE ISSUED:	AUGUST 14, 2009
SCOPE OF WORK:	REPLACE GARAGE DOOR		
CONDITIONS :			
CONTRACTOR:	PROFESSIONAL INSULATIONS		
PARCEL CONTROL NUMBER:	013841014-000-001309	SUBDIVISION	HILLCREST - LOT 13
CONSTRUCTION ADDRESS:	39 S RIVER RD		
OWNER NAME:	TRUITT		
QUALIFIER:	DANIEL RITTER	CONTACT PHONE NUMBER:	561-738-0422

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

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

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

REQUIRED INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	9234		
ADDRESS	39 S RIVER RD		
DATE:	8/14/09	SCOPE:	REPLACE GARAGE DOOR

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

ACCESSORY PERMIT	Declared Value:	\$	
Total number of inspections @ \$75.00 each	1	\$	75
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5
TOTAL ACCESSORY PERMIT FEE:		\$	80 pd cash

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

PERMIT #: _____ TAX FOLIO #: 013841-014-000-60130-9

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE): 39 S. River Road, Stuart, Florida 34996, lot # 13 Hillcrest

GENERAL DESCRIPTION OF IMPROVEMENT: Garage Door Replacement

OWNER NAME: CHARMAINE TRUITT
 ADDRESS: 39 South River Road, Stuart, Florida, 34996
 PHONE NUMBER: _____ FAX NUMBER: _____

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

CONTRACTOR: Professional Insulators
 ADDRESS: 1209 S. Swinboro Ave
 PHONE NUMBER: 861-733-0422 FAX NUMBER: 861-364-1055

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

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

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

NAME: Professional Insulators
 ADDRESS: 1209 S. Swinboro Ave
 PHONE NUMBER: 861-733-0422 FAX NUMBER: 861-364-0155

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 I, SECTION 713.13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

X Charmaine A. Truitt
 SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER
 SIGNATORY'S TITLE/OFFICE _____

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 21 DAY OF July, 2009

BY Charmaine A. Truitt Owner FOR _____
 NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN X OR PRODUCED IDENTIFICATION _____
 TYPE OF IDENTIFICATION PRODUCED _____

Eleanor G. Davis
 NOTARY SIGNATURE/ SEAL

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

X Charmaine A. Truitt
 (Signature of Natural Person Signing Above)



STATE OF FLORIDA
 MARTIN COUNTY
 THIS IS TO CERTIFY THAT THE FOREGOING _____ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.
 BY [Signature]
 MARSHA EWING, CLERK
 D.C.

INST. # 2161953 DR BK 02406 PG 0218 RECD 08/10/2009 04:17:23 PM
 Pg 0218 (1pg)
 MARSHA EWING MARTIN COUNTY DEPUTY CLERK G VOZZAHLA

RECEIVED
DATE 8-12-09
TOWN OF SEWALL'S POINT

Date: 7/31/09 **TRUITT** Town of Sewall's Point
BUILDING PERMIT APPLICATION Permit Number: _____

OWNER/TITLEHOLDER NAME: ~~Charles A. Truitt~~ Phone (Day) (904) 738-0422 (Fax) (904) 364-1055

Job Site Address: 39 S RIVER ROAD City: STUART State: FL Zip: 34

Legal Description: _____ Parcel Control Number: 013841-014-000-00130-9

Owner Address (if different): Hillcrest, Lot 13 City: _____ State: _____ Zip: _____

Scope of work (please be specific): [Handwritten]

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 4,000.00
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)

Is subject property located in flood hazard area? VE10 ___ AE9 ___ AE8 ___ X ___
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISAL MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Professional Insulators Phone: (904) 738-0422 Fax: (904) 364-0155

Street: 1209 S. Swinton Ave City: Delray Beach State: Florida Zip: 33444

State License Number: C001254039 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Chris Lawstar Phone Number: (561) 441-8255

DESIGN PROFESSIONAL: _____ Lic# _____ Phone Number: _____

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

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

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

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

NOTICES TO OWNERS AND CONTRACTORS:
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 YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

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

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

X
OWNER SIGNATURE: (required)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Charmaine A. Truitt

CONTRACTOR SIGNATURE: (required)
[Handwritten Signature]

State of Florida, County of: MARTIN

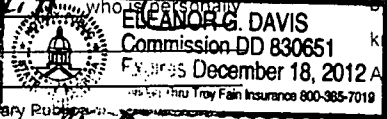
On State of Florida, County of: _____

This the 21ST day of JULY, 2009

This the _____ day of _____, 20__

by Charmaine A. Truitt who is personally known to me or produced _____

by _____ who is personally known to me or produced _____



as identification. _____

as identification. _____

My Commission Expires: Eleanor G. Davis

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 PERMIT APPLICATION

Date: 7/31/09 **TRUITT** Permit Number: _____
 OWNER/TITLEHOLDER NAME: Professional Insulation Phone (Day) (561) 738-0422 (Fax) (561) 364-1055
 Job Site Address: 39 S RIVER ROAD City: STUART State: FL Zip: 34
 Legal Description: Garage Door Replacement Parcel Control Number: _____
 Owner Address (if different): _____ City: _____ State: _____ Zip: _____

Scope of work (please be specific):

<p>WILL OWNER BE THE CONTRACTOR? (If yes, Owner/Builder questionnaire must accompany application) YES _____ NO <u>X</u></p> <p>Has a Zoning Variance ever been granted on this property? YES _____ (YEAR) _____ NO _____ (Must include a copy of all variance approvals with application)</p>	<p>COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ <u>4,000.00</u> (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out) Is subject property located in flood hazard area? VE10 _____ AE9 _____ AE8 _____ X _____ FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ _____ (Fair Market Value of the Primary Structure only. Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION</p>
--	---

CONTRACTOR/Company: Professional Insulation Phone (561) 738-0422 Fax (561) 364-0155
 Street: 109 S. Swinton Ave City: Delray Beach State: Florida Zip: 3344
 State License Number: C001254039 OR: Municipality: _____ License Number: _____
 LOCAL CONTACT: Chris Lawton Phone Number: (561) 441-8255
 DESIGN PROFESSIONAL: _____ Lic# _____ Phone Number: _____
 Street: _____ City: _____ State: _____ Zip: _____
 AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/ Porches: _____ Enclosed Storage: _____
 Carport: _____ Total under Roof _____ Elevated Dock: _____ Enclosed area below BFE: _____
 * Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.


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

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

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

<p>OWNER SIGNATURE: (required) OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED) <u>Charmaine A. Truitt</u> State of Florida, County of: <u>MARTIN</u> This the <u>21st</u> day of <u>July</u>, 20<u>09</u></p>	<p>CONTRACTOR SIGNATURE: (required) <u>Daniel W. Ritter</u> On State of Florida, County of: <u>HIGHLANDS</u> This the <u>5th</u> day of <u>July</u>, 20<u>09</u></p>
<p>by <u>Charmaine A. Truitt</u> who is personally known to me or produced as identification.  Notary Public My Commission Expires: <u>9/22/2011</u></p>	<p>by <u>Daniel W. Ritter</u> who is personally known to me or produced as identification. <u>Christina N. Under</u> Notary Public My Commission Expires: <u>9/22/2011</u></p>

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.2) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!
 Expires 04/22/2011



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

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

Summary

print [navigation icons] Owner 2 of 3

Parcel Info

Summary

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

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
01-38-41-014-000-00130-9	39 SOUTH RIVER RD	17860	Owner	0	1

Summary

Property Location 39 SOUTH RIVER RD
Tax District 2200 Sewall's Point
Account # 17860
Land Use 101 0100 Single Family
Neighborhood 120200
Acres 0.615

Legal Description
Property Information
 HILLCREST, LOT 13

Search By

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

Owner Information

Owner Information
 TRUITT, JAMES P JR
 TRUITT, CHARMAINE A

Mail Information

39 S RIVER RD
 STUART FL 34996

Assessment Info

Front Ft.

Market Land Value \$261,250
Market Impr Value \$647,990
Market Total Value \$909,240

Site Functions

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

Recent Sale

Sale Amount \$135,000

Sale Date 7/12/1989
Book/Page 0819 2159

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

Legal disclaimer / Privacy Statement

Data updated on 6/22/2009





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

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 8-13-09
BUILDING OFFICIAL

TABLE 1609.6(2)

ADJUSTMENT FACTOR FOR BUILDING HEIGHT AND EXPOSURE (C)

MEAN ROOF HEIGHT (feet)	EXPOSURE		
	B	C	D
15	1.00	1.21	1.47
20	1.00	1.21	1.55
25	1.00	1.35	1.81
30	1.00	1.40	1.86
35	1.05	1.45	1.70
40	1.09	1.49	1.74
45	1.12	1.53	1.78
50	1.16	1.56	1.81
55	1.19	1.59	1.84
60	1.22	1.62	1.87

For SI: 1 foot = 304.8mm

FORMULA FOR DESIGN PRESSURES

Example: 25 ft mean roof height, exposure C
 16 X 7 Door 140mph.

Pressure	Exposure C multiplier	Req. Design Pressure
29.7	X 1.35	= +40.095
-33.1	X 1.35	= -44.685

Garage Door must be rated at +40.1/-44.68 minimum. **This formula must be completed for exposure C:**

Pressure	Exposure C multiplier	Req. Design Pressure
31.0	X 1.21	= 37.5 (+)
-33.1	X 1.21	= -40.0 (-)

TABLE 1609.6(1)

GARAGE DOOR WIND LOADS FOR A BUILDING WITH A MEAN ROOF HEIGHT OF 30 FEET LOCATED IN EXPOSURE B (psf)

EFFECTIVE WIND AREA		Basic Wind Speed V (mph - 3 second gust)								
Width (ft)	Height (ft)	85	90	100	110	120	130	140	150	
Roof Angle 0-10 degrees										
8	9	10.5 -11.9	11.7 -13.3	14.5 -16.4	17.5 -19.9	20.9 -23.6	24.5 -27.7	29.4 -32.2	32.6 -36.8	
10	10	10.1 -11.4	11.4 -12.7	14.0 -15.7	17.0 -19.0	20.2 -22.7	23.7 -26.6	27.5 -30.3	31.6 -35.4	
14	14	10.0 -10.7	10.8 -12.0	13.3 -14.8	16.1 -17.9	19.2 -21.4	22.5 -25.1	26.1 -29.1	30.0 -33.4	
Roof Angle > 10										
9	7	11.4 -12.9	12.6 -13.5	15.8 -17.9	19.1 -21.6	22.8 -25.8	26.7 -30.2	31.0 -35.1	35.6 -40.2	
16	7	10.9 -12.2	12.3 -13.7	15.2 -16.9	18.3 -20.4	21.8 -24.3	25.6 -28.5	29.7 -33.1	34.1 -38.0	

For SI: 1 Square foot = 0.0929 Sqm, 1 mph = 0.447 m/s, 1 psf = 47.88 N/m²

1. For effective areas or wind speeds between those given above the load may be interpolated, otherwise use the load associated with the lower effective area.

2. Table values shall be adjusted for height and exposure by multiplying by adjustment coefficients in Table 1609.2D.

3. Plus and minus signs signify pressures acting toward and away from the building surfaces.

4. Negative pressures assume door has 2 feet of width in building's end zone.

1609.6 Garage doors. Pressures from Table 1609.6(1) for wind loading actions on garage doors for Buildings designed as enclosed shall be permitted.

(12)



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

MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1107
MIAMI, FLORIDA 33130-1563
(305) 375-2902 FAX (305) 375-2908

www.buildingcodeonline.com

NOTICE OF ACCEPTANCE (NOA)

Amarr Garage Doors.
165 Carriage Court
Winston-Salem, N.C. 27105

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: Model 1200-D WeatherGuard Plus with DuraSafe.

APPROVAL DOCUMENT: Drawing No.SFC-590-011, Sheets 1 of 1, titled "Model #1200-D WeatherGuard Plus w/DuraSafe Short Panel, Long Panel and Flush Panel," dated 06/26/01, last revision 05/21/07, prepared by Amarr Garage Doors. Signed and sealed by Thomas L. Shelmerdine, PE. Bearing the Miami-Dade County Product Control Renewal stamp with the NOA number and approval date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large & Small Missile.

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.

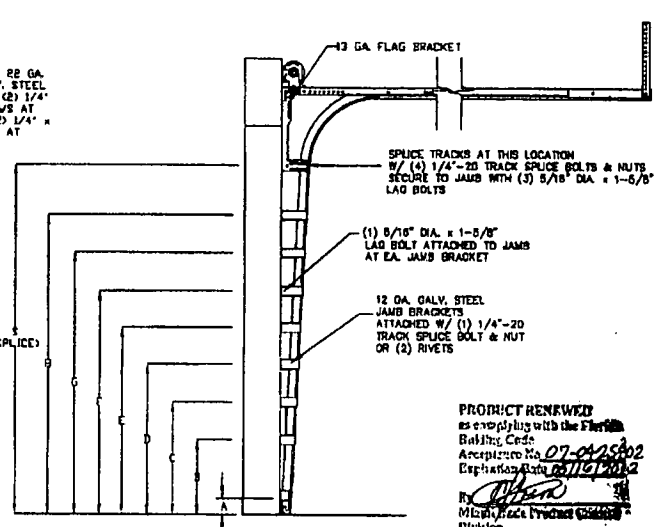
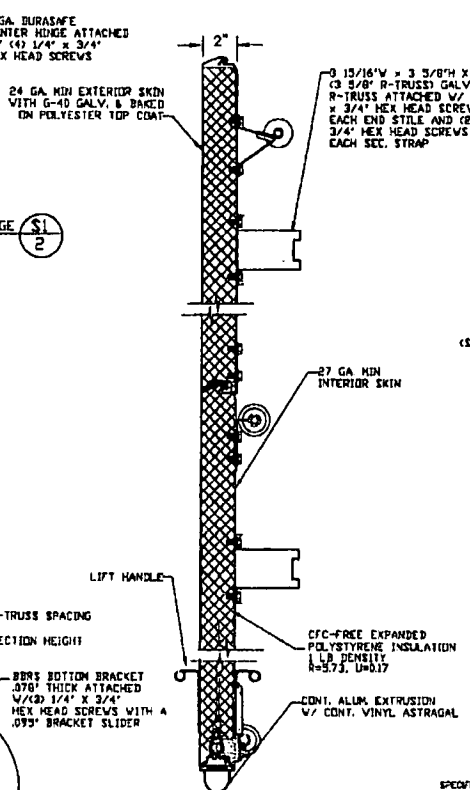
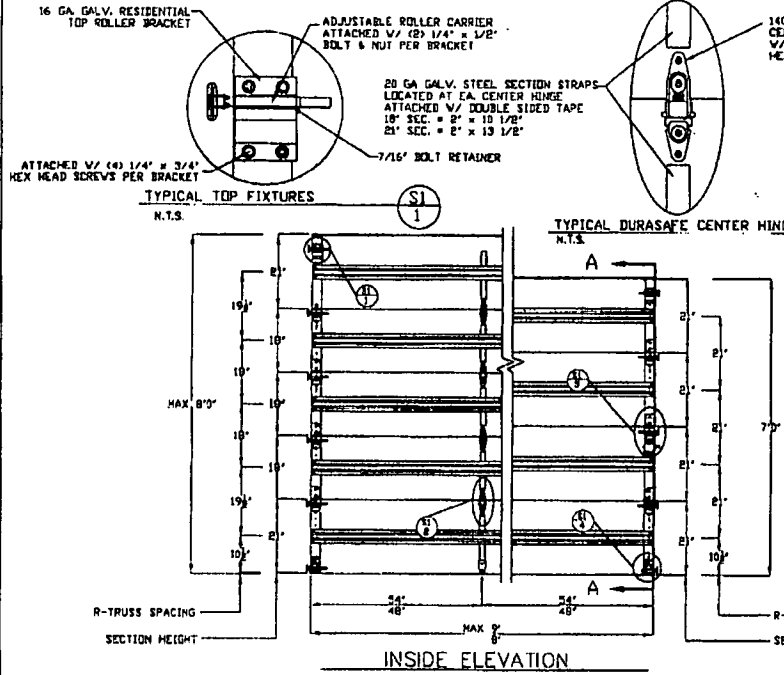
INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA renews NOA No. 01-1017.02 and consists of this page 1, evidence page E-1, as well as approval document mentioned above.

The submitted documentation was reviewed by Carlos M. Utrera, P.E.

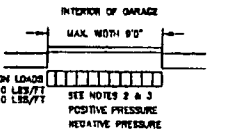


NOA No: 07-0425.02
Expiration Date: May 16, 2012
Approval Date: June 14, 2007
Page 1

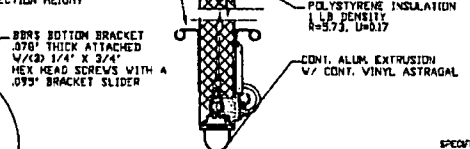
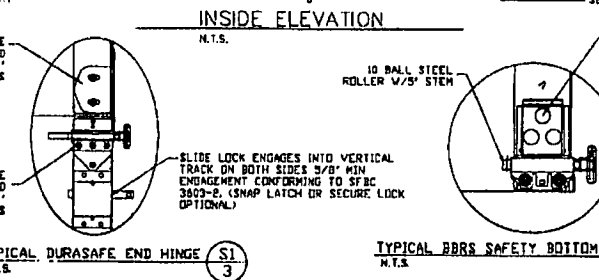


TRACK CONFIGURATION FOR 6'8" UP TO 8' TALL DOORS
N.T.S.

JAMB BRACKET LOCATIONS								
	A	B	C	D	E	F	G	H
6'-6"	3"	14"	24"	35"	43"	53"	65"	70"
7'-0"	3"	14"	27"	38"	46"	56"	68"	76"
7'-6"	3"	17"	24"	35"	43"	53"	65"	75"
8'-0"	3"	14"	27"	38"	46"	56"	68"	80"



PRODUCT RENEWED
as complying with the Florida
Building Code
Amendment No. 07-04-2502
Department of Building
R. [Signature]
Miami, FL 33102
Division



SECTION A-A (SIDE VIEW)
N.T.S.

- SPECIFICATIONS AND NOTES
- ALL THE LOAD FROM THE DOOR IS TRANSFERRED TO THE VERTICAL TRACK. FROM THE TRACK THE LOAD IS TRANSFERRED TO THE VERTICAL JAMB. THE HORIZONTAL JAMB OR HEADER RECEIVES NO PORTION OF THE LOAD TRANSFERRED FROM THE DOOR.
 - EACH VERTICAL JAMB RECEIVES MAXIMUM DESIGN LOADS OF:
 - +234.0 LBS/FT. @ +379.0 LBS/FT.
 - DOORS AND HARDWARE WILL BE DESIGNED, MANUFACTURED AND INSTALLED WITH STANDARDS AS SET FORTH BY ASMA.
 - DOOR SECTIONS SHALL BE 27 GA. (0.018) MIN. INTERIOR AND 24 GA. (0.022) MIN. EXTERIOR ROLLED FORMED, G-40 GALVANIZATION W/ BAKED ON POLYESTER FINISH.
 - DOORS UP TO 7'0" HIGH CONSIST OF (14) SECTIONS AS SHOWN.
 - DOORS UP TO 8'0" HIGH CONSIST OF (8) SECTIONS AS SHOWN.
 - USE (1) 3-8" R-TRUSS PER SECTION.
 - DOORS UP TO 8'0" HIGH CONSIST OF (8) SECTIONS AS SHOWN.
 - USE (1) 3-8" R-TRUSS PER SECTION.
 - SUPPORTING STRUCTURAL ELEMENTS SHALL BE DESIGNED BY A REGISTERED PROFESSIONAL ENGINEER FOR WIND LOADS INDICATED ON THIS DRAWING IN ADDITION TO OTHER LOADINGS.
 - THE METHOD OF TESTING WAS IN SUBSTANTIAL CONFORMANCE WITH THE PROCEDURES DESCRIBED IN ASTM E330, ASSE 7-52, AND FIB PROVA PROTOCOLS 801, 802, 803 WIND LOAD DESIGN CRITERIA. THE PRESSURES SHOWN ON THE DRAWINGS WERE CALCULATED USING THE FOLLOWING PARAMETERS:
 - A. 150 MPH PEAK OUST WIND SPEED
 - B. DOOR CAN BE REINSTALLED WITH 0 FEET OF DOORS WITH INSIDE THE EDGE STOP.
 - C. 2% MEAN ROOF RISE AT ANY SLOPE
 - D. IMPORTANCE FACTOR OF 1.03
 - E. EXPOSURE RATING OF C
 - THIS APPROVAL REQUIRES THE MANUFACTURER TO DO TESTING OF ALL DOOR TYPES TO FURNISH DATA UNDER THIS NOTICE OF ACCEPTANCE. A MINIMUM OF 3 SPECIMENS SHALL BE CUT FROM EACH CODE AND TYPE SIZE TESTED ACCORDING TO ASTM E-8 BY A DADE COUNTY APPROVED LAB SELECTED AND PAID BY THE MANUFACTURER. EVERY 3 MONTHS, A TIMES A YEAR, THE MANUFACTURER SHALL MAIL TO THIS OFFICE A COPY OF THE TEST REPORTS WITH CERTIFICATION THAT THE SPECIMENS WERE SELECTED FROM COLE AS THE MANUFACTURER PRODUCTION FACILITIES. AND A NOTARIZED STATEMENT FROM THE MANUFACTURER THAT ONLY COLE WITH YIELD STRENGTH OF 31,000 PSI OR MORE SHALL BE USED TO MAKE DOOR PANELS FOR DADE COUNTY UNDER THIS NOTICE OF ACCEPTANCE.

REV	DESCRIPTION OF REVISIONS	DATE	BY
A	UPDATE OF JAMB ATTACHMENTS TO STRUCTURE	4/3/07	SKV
B	UPDATE CODE REFERENCES	3/21/07	SKV

MAX SIZE
9' x 8'

DESIGN LOADS
+52.0 PSF
-82.0 PSF

LARGE MISTLE
IMPACT
RESISTANCE

05/12/07

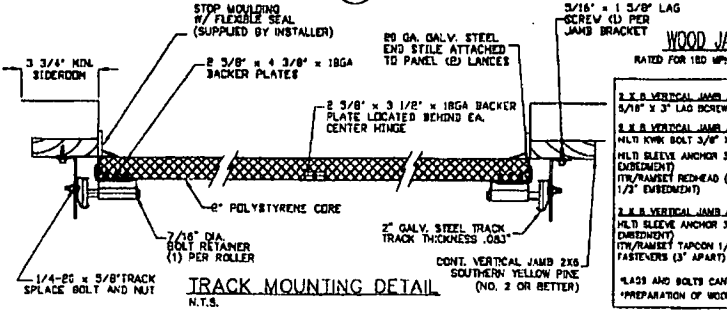
Amarr

185 CARRIAGE COURT WINSTON-SALEM, N.C. 27105 WWW.AMARR.COM

MODEL #1200-D WeatherGuard Plus w/DuraSafe Short Panel, Long Panel, and Flush Panel

SIZE	DRAWN BY	DLJ	DATE	01/26/01	DRAWING NUMBER	
	CHECKED BY		DATE		SFC-590-011	

ENGINEER: THOMAS L. SHAWDOME P.E. LIC. NO. 004879 SHEET 1 OF 1



WOOD JAMB ATTACHMENT TO STRUCTURE
RATED FOR 180 MPH PEAK OUST (130 MPH FASTEST-MAZE BASIC WIND SPEEDS)

3/16" = 1 3/8" LAG SCREW (1 PER JAMB BRACKET)

2 x 8 VERTICAL JAMB ATTACHMENT TO WOOD FRAME STRUCTURE
5/16" x 3" LAG SCREWS STARTING 6" FROM ENDS THEN 24" O.C. (1 1/4" EMBEDMENT)

2 x 8 VERTICAL JAMB ATTACHMENT TO 2,000 PSI CONCRETE
MULTI HWK BOLT 3/8" x 4" STARTING 6" FROM ENDS THEN 34" O.C. (2 1/2" EMBEDMENT)

MULTI SLEEVE ANCHOR 3/8" x 3-3/4" STARTING 6" FROM ENDS THEN 18" O.C. (1 1/4" EMBEDMENT)

2 x 8 VERTICAL JAMB ATTACHMENT TO C-80 BLOCK
MULTI SLEEVE ANCHOR 3/8" x 3-3/4" STARTING 6" FROM ENDS THEN 18" O.C. (1 1/4" EMBEDMENT)

2" DIA. ANCHOR TAPCON 1/4" x 2-3/4" STARTING 6" FROM ENDS. USE PARS OF FASTENERS (3" APART) AT 12" O.C. (1 1/4" EMBEDMENT)

*LAGS AND BOLTS CAN BE COUNTERSUNK TO PROVIDE A FLUSH MOUNTING SURFACE.
*PREPARATION OF WOOD JAMBS BY OTHERS

Amarr Garage Doors.

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS:

1. Drawing No. SFC-590-011, Sheets 1 of 1, titled "Model #1200-D WeatherGuard Plus w/DuraSafe Short Panel, Long Panel and Flush Panel," dated 06/26/01, last revision 05/21/07, prepared by Amarr Garage Doors signed and sealed by Thomas L. Shelmerdine, P.E.

B. TESTS: (submitted under NOA # 01-1017.02)

1. Test report on Large Missile Impact Test, Cyclic Wind Pressure Test and Uniform Static Air Pressure Test for a 9' x 7' sectional steel garage door, prepared by American Test Lab of South Florida, report # 0709.01-01, dated 08/23/01, signed and sealed by W. R. Mehner, PE. And H. Hattem, PE.
2. Test report on Evaluation of painted panels per ASTM D1654 & B117, prepared by Subtropical Testing Service, test # AMR-1, signed and sealed by M. Mosbat, PE.

C. CALCULATIONS:

1. Calculations prepared by Structural Solutions, P.A., project 01-034, dated 04/06/07, signed and sealed by Thomas L. Shelmerdine, P.E.

D. STATEMENTS: (submitted under NOA # 01-1017.02)


1. Code compliance letter issued by Structural Solutions, PA., on 02/13/02, signed and sealed by T. L. Shelmerdine, PE.
2. No financial interest letter issued by Structural Solutions PA, on 10/01/01, signed and sealed by T. L. Shelmerdine, PE.
3. Protocol compliance letter issued by American Test Lab of South Florida on 08/30/01, signed and sealed by W. R. Mehner & H. Hattem.

E. MATERIAL CERTIFICATION: (submitted under NOA # 01-1017.02)

1. Test report on Tensile Test from 3 Samples ATL 0712.01-01A,B&C, prepared by Q. C. Metallurgical, Inc., report # 1GM-1038 dated 08/02/01, signed and sealed By F. Grate, PE.

F. OTHERS:

1. Renewal Request Letter issued by Amarr Garage Doors, dated 05/15/07, signed by Danny L. Joyner, Manager of Applications Engineering.



Carlos M. Utrera, P.E.
Product Control Examiner
NOA No 07-0425.02
Expiration Date: May 16, 2012
Approval Date: June 14, 2007



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

MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1107
MIAMI, FLORIDA 33130-1563
(305) 375-2902 FAX (305) 375-2908

www.buildingcodeonline.com

NOTICE OF ACCEPTANCE (NOA)

Amarr Garage Doors.
165 Carriage Court
Winston-Salem, N.C. 27105

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: Model 1200-D WeatherGuard Plus with DuraSafe.

APPROVAL DOCUMENT: Drawing No.SFC-590-011, Sheets 1 of 1, titled "Model #1200-D WeatherGuard Plus w/DuraSafe Short Panel, Long Panel and Flush Panel," dated 06/26/01, last revision 05/21/07, prepared by Amarr Garage Doors. Signed and sealed by Thomas L. Shelmerdine, PE. Bearing the Miami-Dade County Product Control Renewal stamp with the NOA number and approval date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large & Small Missile.

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.

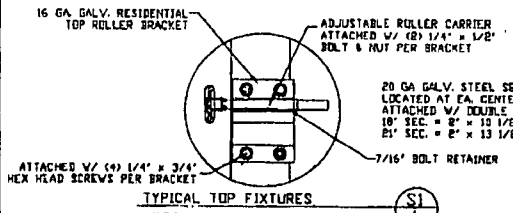
INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA renews NOA No. 01-1017.02 and consists of this page 1, evidence page E-1, as well as approval document mentioned above.

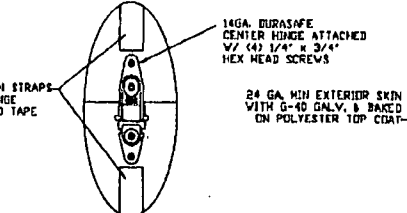
The submitted documentation was reviewed by Carlos M. Utrera, P.E.



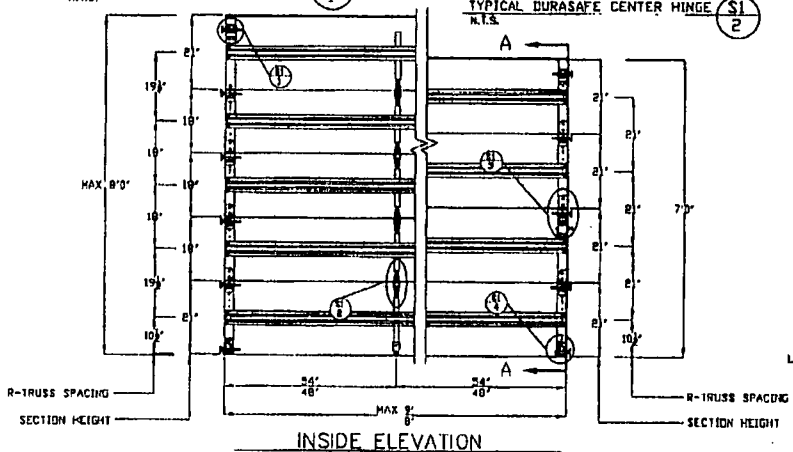
NOA No: 07-0425.02
 Expiration Date: May 16, 2012
 Approval Date: June 14, 2007
 Page 1



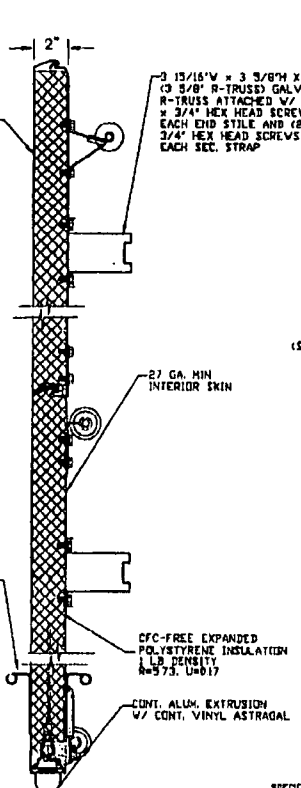
TYPICAL TOP FIXTURES
N.T.S.



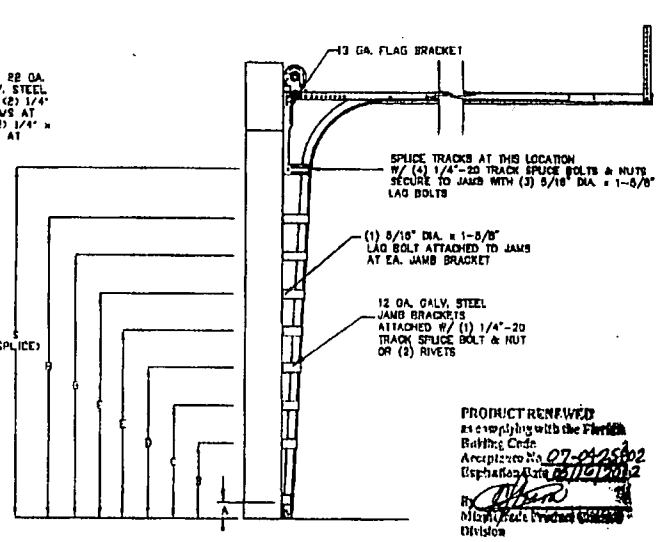
TYPICAL DURASAFE CENTER HINGE
N.T.S.



INSIDE ELEVATION
N.T.S.



SECTION A-A (SIDE VIEW)
N.T.S.

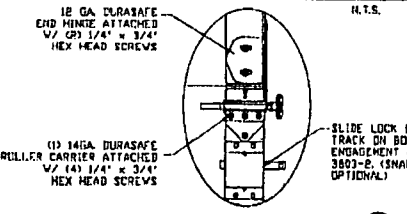
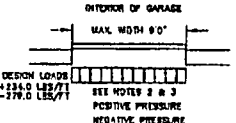


TRACK CONFIGURATION FOR 6'8" UP TO 8' TALL DOORS
N.T.S.

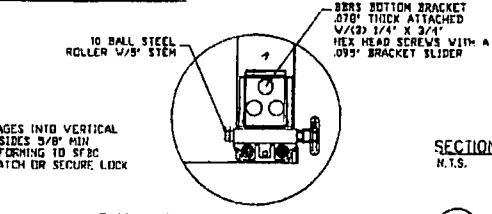
JAMB BRACKET LOCATIONS

	A	B	C	D	E	F	G	H	S
6'-8"	3"	14"	24"	35"	43"	53"	63"	73"	78"
7'-0"	3"	14"	27"	38"	46"	56"	66"	76"	82"
7'-6"	3"	17"	24"	35"	43"	53"	63"	73"	82"
8'-0"	3"	14"	27"	38"	46"	56"	66"	76"	88"

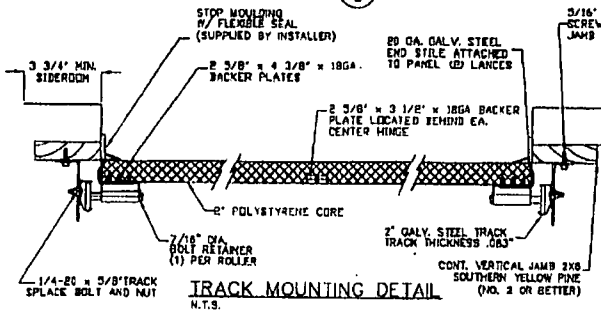
PROJECT RENEWED
as complying with the Florida
Building Code
Acceptance No. 07-0125802
Espharinos Date 11/10/2012
R. [Signature]
Miami, State of Florida Building
Division



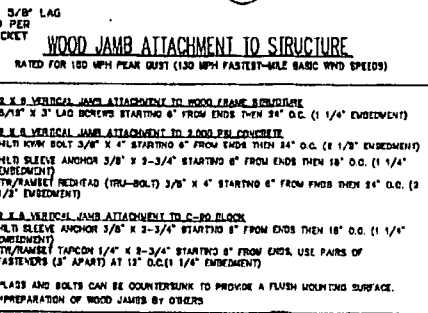
TYPICAL DURASAFE END HINGE
N.T.S.



TYPICAL BRS SAFETY BOTTOM BRACKET
N.T.S.



TRACK MOUNTING DETAIL
N.T.S.



WOOD JAMB ATTACHMENT TO STRUCTURE
RATED FOR 100 MPH PEAK GUST (130 MPH FASTEST-MILE BASIC WIND SPEEDS)

- 2 X 8 VERTICAL JAMB ATTACHMENT TO WOOD FRAME STRUCTURE
5/8" x 3" LAG BOLTS STARTING 6" FROM ENDS THEN 34" O.C. (1 1/4" EMBEDMENT)
 - 2 X 4 VERTICAL JAMB ATTACHMENT TO 3,000 PSI CONCRETE
MULTI ROW BOLT 3/8" x 4" STARTING 6" FROM ENDS THEN 34" O.C. (1 1/8" EMBEDMENT)
MLD SLEEVE ANCHOR 3/8" x 3-3/4" STARTING 6" FROM ENDS THEN 18" O.C. (1 1/4" EMBEDMENT)
TYP. JAMBET REDHEAD (TUB-BOLT) 3/8" x 4" STARTING 4" FROM ENDS THEN 34" O.C. (3 1/2" EMBEDMENT)
 - 2 X 4 VERTICAL JAMB ATTACHMENT TO C-10 BLOCK
MLD SLEEVE ANCHOR 3/8" x 3-3/4" STARTING 6" FROM ENDS THEN 18" O.C. (1 1/4" EMBEDMENT)
TYP. JAMBET TAPCON 1/4" x 3-3/4" STARTING 6" FROM ENDS. USE PAIRS OF FASTENERS (3" APART) AT 12" O.C. (1 1/4" EMBEDMENT)
- *LAGS AND BOLTS CAN BE COUNTERSUNK TO PROVIDE A FLUSH MOUNTING SURFACE.
*PREPARATION OF WOOD JAMBS BY OTHERS

- SPECIFICATIONS AND NOTES
- ALL THE LOAD FROM THE DOOR IS TRANSFERRED TO THE VERTICAL TRACK. FROM THE TRACK THE LOAD IS TRANSFERRED TO THE VERTICAL JAMB. THE HORIZONTAL JAMB OR HEADS RECEIVE NO PORTION OF THE LOAD TRANSFERRED FROM THE DOOR.
 - EACH VERTICAL JAMB RECEIVES MAXIMUM DESIGN LOADS OF:
+234.0 LB/FT² & -278.0 LB/FT²
 - DOORS AND HARDWARE WILL BE DESIGNED, MANUFACTURED AND INSTALLED WITH STANDARDS AS SET FORTH BY DATA.
 - DOOR SECTIONS SHALL BE 84 GA. (120) GALV. INTERIOR AND 24 GA. (27) MIN EXTERIOR ROLLED FORMED, 0-40 GALVANIZATION W/ BASED ON POLYESTER 1048H
 - DOORS UP TO 7'0" HIGH CONSIST OF (4) SECTIONS AS SHOWN. USE (1) 3-8/8" R-TRUSS PER SECTION.
 - DOORS UP TO 8'0" HIGH CONSIST OF (5) SECTIONS AS SHOWN. USE (1) 3-8/8" R-TRUSS PER SECTION.
 - SUPPORTING STRUCTURAL ELEMENTS SHALL BE DESIGNED BY A REGISTERED PROFESSIONAL ENGINEER FOR WIND LOADS INDICATED ON THIS DRAWING IN ADDITION TO OTHER LOADS.
 - THE METHOD OF TESTING WAS IN SUBSTANTIAL CONFORMANCE WITH THE PROCEEDURES DESCRIBED IN ASTM E130-90, ASCE 7-02, AND IBC 2003 PROTOCOLS 201, 202, 203 WIND LOAD DESIGN CRITERIA. THE PRESSURES SHOWN ON THE DRAWINGS WERE CALCULATED USING THE FOLLOWING PARAMETERS:
A. 100 MPH PEAK GUST WIND SPEED
B. DOOR CAN BE INSTALLED WITH 0 FEET OF DOORS WITH INSIDE THE EDGE STRIP.
C. 25' MEAN ROOF HEIGHT AT ANY SLOPE
D. IMPORTANCE FACTOR OF 1.05
E. EXPOSURE RATING OF C
 - THIS APPROVAL REQUIRES THE MANUFACTURER TO DO TESTING OF ALL PANELS USED TO FABRICATE DOOR PANELS UNDER THIS NOTICE OF ACCEPTANCE. A MINIMUM OF 8 SPECIMENS SHALL BE CUT FROM EACH COIL AND TESTABLE TESTED ACCORDING TO ASTM E-8 BY A DADE COUNTY APPROVED LAB SELECTED AND PAID BY THE MANUFACTURER. EVERY 3 MONTHS, 4 TIMES A YEAR, THE MANUFACTURER SHALL MAIL TO THIS OFFICE A COPY OF THE TEST REPORTS WITH CONTRIBUTION THAT THE SPECIMENS WERE SELECTED FROM COILS AT THE MANUFACTURER PRODUCTION FACILITIES, AND A NOTARIZED STATEMENT FROM THE MANUFACTURER THAT ONLY COILS WITH YIELD STRENGTH OF 31,000 PSI OR MORE SHALL BE USED TO MAKE DOOR PANELS FOR DADE COUNTY UNDER THIS NOTICE OF ACCEPTANCE.

REV	DESCRIPTION OF REVISIONS	DATE	BY
A	UPDATE OF JAMB ATTACHMENTS TO STRUCTURE	4/3/07	SMW
B	UPDATE CODE REFERENCES	3/21/07	SMW

MAX SIZE
9' x 8'

DESIGN LOADS
+52.0 PSF
-82.0 PSF

LARGE MISSILE
IMPACT
RESISTANCE

05/12/07

Amarr

155 CARRIAGE COURT WINSTON-SALEM, NC 27103 WWW.AMARR.COM
 MODEL #1200-D WeatherGuard Plus w/Durasafe
 Short Panel, Long Panel, and Flush Panel

SIZE	DRAWN BY	DW	DATE	02/20/01	DRAWING NUMBER
B	CHECKED BY		DATE		SFC-590-011

DIGNITER: THOMAS L. SHERIDAN P.E. LIC. NO. 008797 SHEET 1 OF 1

Amarr Garage Doors.

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS:

1. Drawing No.SFC-590-011, Sheets 1 of 1, titled "Model #1200-D WeatherGuard Plus w/DuraSafe Short Panel, Long Panel and Flush Panel," dated 06/26/01, last revision 05/21/07, prepared by Amarr Garage Doors signed and sealed by Thomas L. Shelmerdine, P.E.

B. TESTS: (submitted under NOA # 01-1017.02)

1. Test report on Large Missile Impact Test, Cyclic Wind Pressure Test and Uniform Static Air Pressure Test for a 9' x 7' sectional steel garage door, prepared by American Test Lab of South Florida, report # 0709.01-01, dated 08/23/01, signed and sealed by W. R. Mehner, PE. And H. Hattem, PE.
2. Test report on Evaluation of painted panels per ASTM D1654 & B117, prepared by Subtropical Testing Service, test # AMR-1, signed and sealed by M. Mosbat, PE.

C. CALCULATIONS:

1. Calculations prepared by Structural Solutions, P.A., project 01-034, dated 04/06/07, signed and sealed by Thomas L. Shelmerdine, P.E.

D. STATEMENTS: (submitted under NOA # 01-1017.02)

1. Code compliance letter issued by Structural Solutions, PA., on 02/13/02, signed and sealed by T. L. Shelmerdine, PE.
2. No financial interest letter issued by Structural Solutions PA, on 10/01/01, signed and sealed by T. L. Shelmerdine, PE.
3. Protocol compliance letter issued by American Test Lab of South Florida on 08/30/01, signed and sealed by W. R. Mehner & H. Hattem.

E. MATERIAL CERTIFICATION: (submitted under NOA # 01-1017.02)

1. Test report on Tensile Test from 3 Samples ATL 0712.01-01A,B&C, prepared by Q. C. Metallurgical, Inc., report # 1GM-1038 dated 08/02/01, signed and sealed By F. Grate, PE.

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1. Renewal Request Letter issued by Amarr Garage Doors, dated 05/15/07, signed by Danny L. Joyner, Manager of Applications Engineering.



Carlos M. Utrera, P.E.
Product Control Examiner
NOA No 07-0425.02
Expiration Date: May 16, 2012
Approval Date: June 14, 2007

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **8-18** 2009 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9231	Conway	Pelour		
1st	16 S Via Lucinda Parker Const		PASS	
				INSPECTOR <i>[Signature]</i>
9231	Trout	Final	AM FAIL	TIGHTEN BOLTS
945	39 S River Rd Professional Inst.	Garage Door	AM PASS	Close
				INSPECTOR <i>[Signature]</i>
Tree	Sewalls Meadow POA	Trees	PASS	
	So. Sewalls Pt Rd	Henry Sewal Way		INSPECTOR <i>[Signature]</i>
9193	Allen	in progress	AM FAIL	WRONG NOA
	171 S River Rd On Shore Roof.		AM PASS	
				INSPECTOR <i>[Signature]</i>
9217	Lochem	Final		
	22 Ridgeland Dr	roof repair	PASS	Close
	Country Const.			INSPECTOR <i>[Signature]</i>
9000	CO2	insulation		
10 AM	4 River Oak Pl SOH		FAIL	RE SCHEDULE
				INSPECTOR
Tree	Jabinsky	Tree		
	10 Mandalay		<i>[Signature]</i>	
				INSPECTOR <i>[Signature]</i>

9560

POOL WIRING



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:	9560	DATE ISSUED:	SEPTEMBER 7, 2010
SCOPE OF WORK:	WIRING FOR POOL EQUIPMENT		
CONDITIONS :			
CONTRACTOR:	KEN WENDELL		
PARCEL CONTROL NUMBER:	013841-014-000-001309	SUBDIVISION	HILLCREST - LOT 13
CONSTRUCTION ADDRESS:	39 S RIVER RD		
OWNER NAME:	TRUITT		
QUALIFIER:	KEN WENDELL	CONTACT PHONE NUMBER:	263-1176

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

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

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

REQUIRED INSPECTIONS

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

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



TOWN OF SEWALL'S POINT BUILDING 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:	9560		
ADDRESS	39 S RIVER RD		
DATE:	9/7/10	SCOPE:	WIRING FOR POOL EQUIPMENT

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			

KEN WENDELL GENERAL CONTRACTORS, INC.
 P.O. BOX 688
 STUART, FL 34995
 772-263-1176

BANKATLANTIC
 JENSEN BEACH
 JENSEN BEACH, FL 34857

14629

63-8376/2670
 182

9/07/2010

PAY TO THE ORDER OF TOWN OF SEWALL'S POINT \$ 80⁰⁰
Eighty and no/100 DOLLARS

MEMO PERMIT / TRUITT


 AUTHORIZED SIGNATURE

0066724699

ACCESSORY PERMIT	Declared Value:	\$	1000
Total number of inspections @ \$75.00 each		\$	75
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5
TOTAL ACCESSORY PERMIT FEE:		\$	80

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

Date: 9-2-10 Permit Number: 9560

OWNER/TITLEHOLDER NAME: JAMES & CHARMAINE TRUITT Phone (Day) (772) 283 0901 (Fax) _____

Job Site Address: 39 SOUTH RIVER ROAD City: STUART State: FL Zip: 34996

Legal Description _____ Parcel Control Number: _____

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

SCOPE OF WORK (PLEASE BE SPECIFIC): Pool rewireing for equipment

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 1,000.00
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 ___ AE9 ___ AE8 ___ X ___
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: KEN WENDELL GEN CON INC Phone: 772 263 1176 Fax: 772 934 6936

Qualifiers name: KENNETH J. WENDELL Street: _____ City: _____ State: _____ Zip: _____

State License Number: CGC060321 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: KEN WENDELL CGC Phone Number: (772) 263 1176

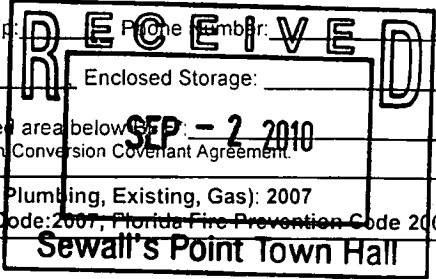
DESIGN PROFESSIONAL: _____ Fla. License# _____

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

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

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

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



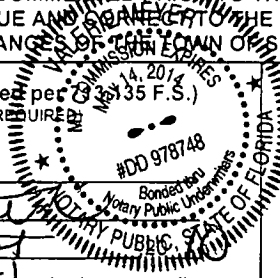
NOTICES TO OWNERS AND CONTRACTORS:

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 YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

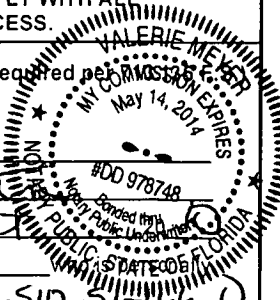
******* A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS *******

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

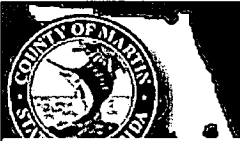
OWNER NOTORIZED SIGNATURE: (required per 330.35 F.S.)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
X [Signature]
State of Florida, County of: Martin
On This the 02nd day of Sept
by James P. Truitt who is personally
known to me or produced FDL# T630-455-47-016
As identification: [Signature]
Notary Public
My Commission Expires: _____



CONTRACTOR NOTORIZED SIGNATURE: (required per 330.35 F.S.)
X [Signature]
State of Florida, County of: Martin
On This the 02nd day of Sept
by Kenneth Wendell
known to me or produced FDL# W534-510-517166-0
As identification: [Signature]
Notary Public
My Commission Expires: _____



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



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

Site Provided by...
 governmax.com 1.14

Summary

print

Address
 5 of 66

Tabs

- Summary**
- Print View
- Land
- Improvements
- Assessments & Exemptions
- Sales
- Taxes →
- Parcel Map →

Parcel ID	Account #	Unit Address	Market Total Value	Data as of
01-38-41-014-000-00130-9	17860	39 SOUTH RIVER RD, SEWALL'S POINT	\$747,520	8/28/2010

Owner Information

Owner(Current)	TRUITT JAMES P JR TRUITT CHARMAINE A
Owner/Mail Address	39 S RIVER RD STUART FL 34996
Transfer Date	07/12/1989
Document Number	
Document Reference No.	0819 2159

Searches

- Parcel ID
- Owner
- Address**
- Account #
- Land Use
- Legal Description
- Neighborhood
- Sales
- Maps →

Location/Description			
Account #	17860	Map Page No.	SP-03
Tax District	2200	Legal Description	HILLCREST, LOT 13
Parcel Address	39 SOUTH RIVER RD, SEWALL'S POINT		
Acres	.6150		

Parcel Type

Land Use	0100 Single Family
Neighborhood	120100 Hillcrest, Noni Est, West End

Functions

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

Assessment Information

Market Land Value	\$227,700
Market Improvement Value	\$519,820
Market Total Value	\$747,520

Print Back to List First Previous Next Last

Legal Disclaimer / Privacy Statement





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

BUILDING PERMIT NUMBER: _____

***IF NOT PERFORMED IN CONJUNCTION WITH A MAIN BUILDING PERMIT NUMBER, THEN THE VERIFICATION OF PARCEL CONTROL NUMBER BELOW MUST BE COMPLETED.

OWNERS NAME: JAMES & CHARMAINE TRUITT

CONSTRUCTION ADDRESS: 39 S RIVER RD

PERMIT TYPE: RESIDENTIAL [X] COMMERCIAL

- [X] ELECTRIC
PLUMBING
HVAC
IRRIGATION
FUEL GAS
ROOFING

TYPE OF SERVICE: NEW SERVICE EXISTING SERVICE [X] OTHER

SCOPE OF WORK: NEW CONNECTIONS @ POOL EQ.

VALUE OF CONSTRUCTION: N/A

LOW VOLTAGE
TYPE OF EQUIPMENT: SECURITY VACUUM SOUND SYSTEM LANDSCAPE OTHER
SCOPE OF WORK: VALUE

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] Pres 4250 SE COMMERCE AVE
SIGNATURE OF LICENSED CONTRACTOR ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: COOK ELECTRIC INC

TELEPHONE NO: 287-0938 FAX NO: 287-9084

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: _____

** WORK CAN NOT BEGUN 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: _____

PARCEL CONTROL #: _____

SUBDIVISION: LOT: BLK: PHASE:

SITE ADDRESS: _____

SEND OR FAX TO: TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

4250 SE Commerce Ave
Stuart, FL 34997

COOK ELECTRIC INC
ELECTRICAL CONTRACTORS

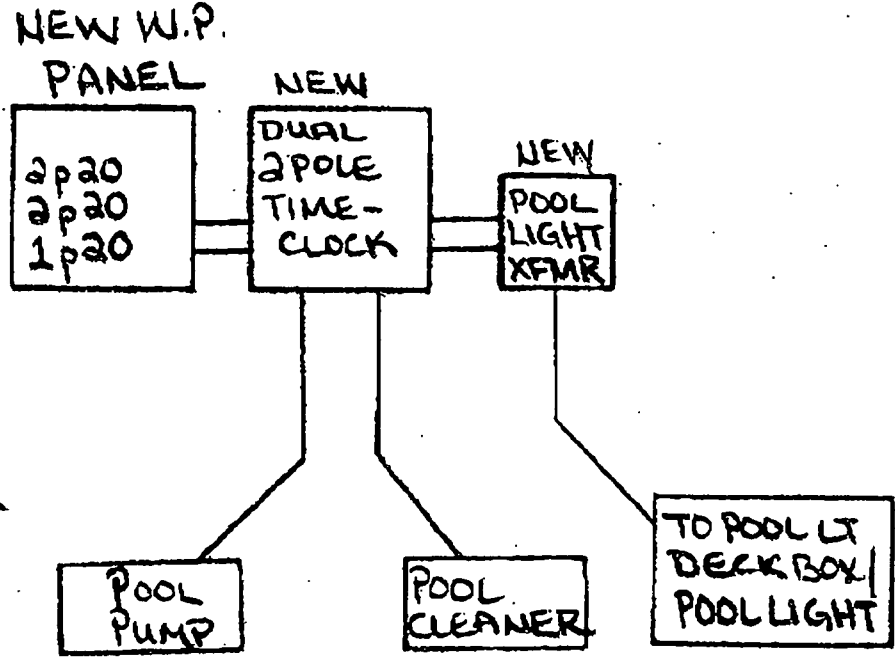
Lic. # EC0002265
772-287-0938 Fax: 772-287-9084

POOL EQ. RISER DIAGRAM
C 39 S. RIVER ROAD

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE 9.7.10
[Signature]
BUILDING OFFICIAL

REUSE
EXISTING
FEED FROM
MAIN PANEL

*NEW #8 SOLID Cu
BOND EQWP.



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

9-20-2010 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9568	Neild	slab for generator	PASS	
1st	12 Miramar Elec Conn. by Mike	Pre pour slab		INSPECTOR JA
9166	Truitt	Final		
2nd	395 River Rd Ken Wendell	working pool equip	PASS	Close INSPECTOR JA
9271	FRANTOM 102 N. SP Rd	Pre pour	PASS	
	Resort Const	curb		INSPECTOR JA
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

9732

A/C CHANGOUT



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:	9732	DATE ISSUED:	MARCH 9, 2011
SCOPE OF WORK:	AC CHANGEOUT		
CONDITIONS :			
CONTRACTOR:	FLYNN'S AC		
PARCEL CONTROL NUMBER:	013841014-000-001309	SUBDIVISION	HILLCREST - LOT 13
CONSTRUCTION ADDRESS:	39 S RIVER RD		
OWNER NAME:	TRUITT		
QUALIFIER:	JOSEPH FLYNN	CONTACT PHONE NUMBER:	283-4114

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

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

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

REQUIRED INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	9732		
ADDRESS	39 S RIVER RD		
DATE:	3/9/11	SCOPE:	AC CHANGEOUT

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$
Total square feet air-conditioned space: (@ \$110.25 per sq. ft.)		s.f.
Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)		s.f.
		\$

Flynn's Air Conditioning Service, Inc.

1323 SW THELMA STREET PALM CITY, FLORIDA 34990
 (772) 283-4114

63-8419-2670
 15758

McBee® One-Write

PAY <i>Security four and 00/100</i>	TO THE ORDER OF <i>TOWN OF SEWALL'S POINT</i>	DESCRIPTION <i>TRUITT PERMIT</i>	DOLLARS	CHECK AMOUNT
DATE <i>3/8/11</i>			CHECK NO.	\$ <i>84.00</i>

PNC BANK

[Signature]

ACCESSORY PERMIT FEE:

Total number of inspections @ \$75.00 each	\$	75
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 minimum)	\$	2
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 minimum)	\$	2
Road impact assessment: (.04% of construction value - \$5.00 min.)	\$	5
TOTAL ACCESSORY PERMIT FEE:	\$	84

*pd
 CK# 15758*

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

Date: 3/1/11 Permit Number: 9732
 OWNER/TITLEHOLDER NAME: DR. TRUITT Phone (Day) _____ (Fax) _____
 Job Site Address: 39 S. River Rd. City: STUART State: FL Zip: 34996
 Legal Description _____ Parcel Control Number: _____
 Owner Address (if different): _____ City: _____ State: _____ Zip: _____

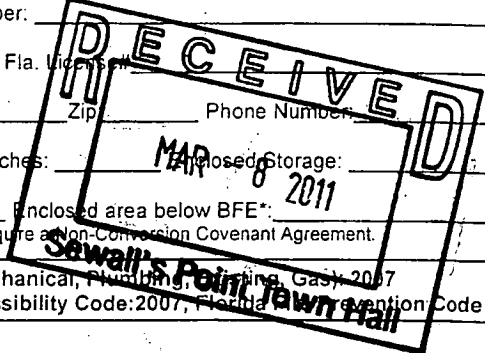
SCOPE OF WORK (PLEASE BE SPECIFIC): 2 TON SYSTEM REPLACEMENT

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: \$ 4025.00
 (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: FLYNN'S A/C Phone: 283-4114 Fax: 781-1307
 Qualifiers name: JOSEPH FLYNN Street: 1323 THEUMA ST City: PAWM State: FL Zip: 34990
 State License Number: CAC055482 OR: _____ Municipality: _____ License Number: _____

LOCAL CONTACT: _____ Phone Number: _____
 DESIGN PROFESSIONAL: _____ Fla. License No. _____
 Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____
 AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/ Porches: _____
 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, Fire, Gas) 2007
 National Electrical Code: 2005(2008 after 6/1/09) Florida Energy Code: 2007, Florida Accessibility Code: 2007, Florida Fire Prevention Code 2007

NOTICES TO OWNERS AND CONTRACTORS:

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 YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1. 105.4.1.1 - .5.

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

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

OWNER NOTORIZED SIGNATURE: (required per Florida Statute 135 F.S.)
 OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
 X [Signature]
 State of Florida, County of: Martin
 On This the 4 day of March
 by James P. Truitt Jr who is personally
 known to me or produced FUN# 630-455-47-016-0
 As identification. [Signature]
 Notary Public
 My Commission Expires: _____

CONTRACTOR NOTORIZED SIGNATURE (required per Florida Statute 135 F.S.)
 X [Signature]
 State of Florida, County of: Martin
 On This the 3rd day of March
 by Joseph Flynn who is personally
 known to me or produced _____
 As identification. [Signature]
 Notary Public
 My Commission Expires: _____

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



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

Site Provided by...
 governmax.com 1.12

Summary

Address 5 of 66

Tabs

- Summary**
- Print View
- Land
- Improvements
- Assessments & Exemptions
- Sales
- Taxes →
- Parcel Map →
- Trim Notice →

Parcel ID	Account #	Unit Address	Market Total Value	Data as of
01-38-41-014-000-00130-9	17860	39 SOUTH RIVER RD, SEWALL'S POINT	\$747,520	2/26/2011

Searches

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

Owner Information

Owner(Current)	TRUITT JAMES P JR TRUITT CHARMAINE A
Owner/Mail Address	39 S RIVER RD STUART FL 34996
Sale Date	07/12/1989
Document Number	
Document Reference No.	0819 2159
Sale Price	135000

Location/Description			
Account #	17860	Map Page No.	SP-03
Tax District	2200	Legal Description	HILLCREST, LOT 13
Parcel Address	39 SOUTH RIVER RD, SEWALL'S POINT		
Acres	.6150		

Functions

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

Parcel Type	
Use Code	0100 Single Family
Neighborhood	120100 Hillcrest, Noni Est, West End

Assessment Information

Market Land Value	\$227,700
Market Improvement Value	\$519,820
Market Total Value	\$747,520

Print Back to List First Previous Next Last

Legal Disclaimer / Privacy Statement





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

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

Air Conditioning Change out Affidavit

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

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: <u>CARRIER</u> Model# <u>FXYDNEFS</u>	Condenser: Mfg: <u>SAME</u> Model# <u>24AR624</u>
Volts ___ CFM's _____ Heat Strip <u>5</u> Kw	Volts ___ SEER/EER <u>16</u> BTU's _____
Min. Circuit Amps _____ Wire gauge <u>10</u>	Min. Circuit Amps _____ Wire gauge <u>10</u>
Max. Breaker size <u>30</u> Min. Breaker size <u>30</u>	Max. Breaker size <u>25</u> Min. Breaker size <u>25</u>
Ref. line size: Liquid <u>3/8</u> Suction <u>5/8</u>	Ref. line size: Liquid <u>3/8</u> Suction <u>5/8</u>
Refrigerant type <u>410</u>	Refrigerant type <u>410</u>
Location: Existing <input checked="" type="checkbox"/> New _____	Location: Existing <input checked="" type="checkbox"/> New _____
Attic/Garage/Closet (specify) <u>ATTIC</u>	Left/Right/Rear/Front/Roof <u>LEFT FRONT</u>
Access: <u>DOOR</u>	Condensate Location _____

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: <u>LENNOX</u> Model# _____	Condenser: Mfg: <u>LENNOX</u> Model# _____
Volts ___ CFM's _____ Heat Strip <u>5</u> Kw	Volts ___ SEER/EER _____ BTU's _____
Min. Circuit Amps _____ Wire gauge <u>10</u>	Min. Circuit Amps _____ Wire gauge <u>10</u>
Max. Breaker size <u>30</u> Min. Breaker size _____	Max. Breaker size <u>25</u> Min. Breaker size <u>25</u>
Ref. line size: Liquid <u>3/8</u> Suction <u>5/8</u>	Ref. line size: Liquid <u>3/8</u> Suction <u>5/8</u>
Refrigerant type _____	Refrigerant type _____
Location: Ext. <input checked="" type="checkbox"/> New _____	Location: Ext. <input checked="" type="checkbox"/> New _____
Attic/Garage/Closet (specify) <u>ATTIC</u>	Left/Right/Rear/Front/Roof <u>SAME</u>
Access: _____	Condensate Location _____

Certification:

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

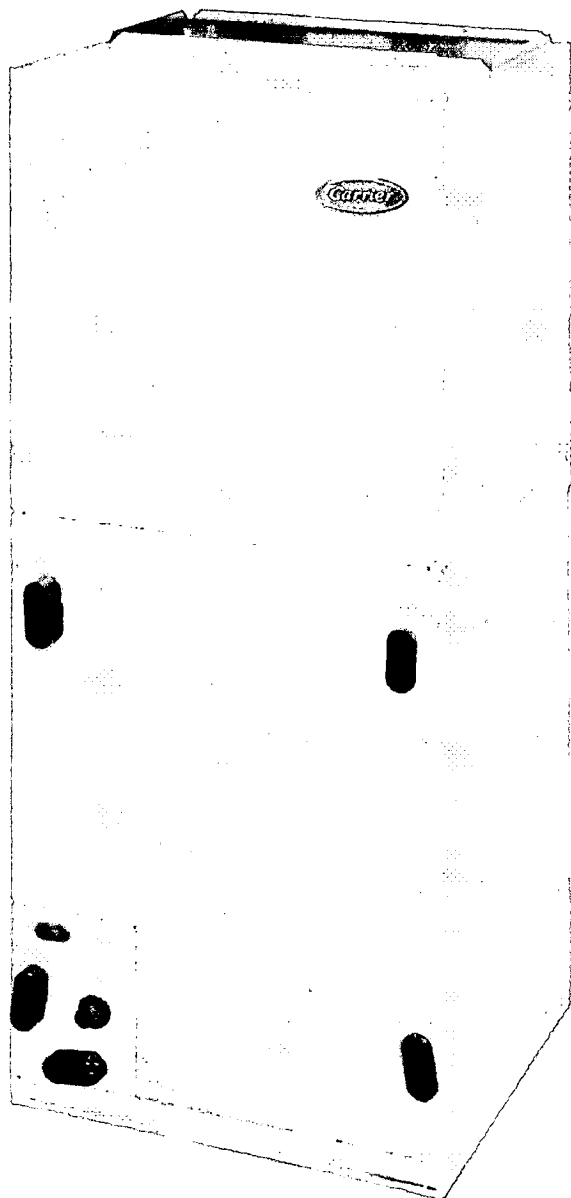
[Signature]
 Signature

3-8-11
 Date

**FX4D
Comfort™ Series Fan Coil
Sizes 019 thru 061**



Product Data



AIR HANDLER TECHNOLOGY AT ITS FINEST

The FX4D fan coils combine the proven technology of Carrier fan coil units with Puron®, the environmentally sound refrigerant. These fan coils are loaded with popular features. Factory-installed, refrigerant-specific thermostatic expansion valves (TXV) are standard with these fan coil designs. The designs feature contoured condensate pans with rugged, drain connections, ensuring that little water is left in the unit at the end of the cooling duty cycle. The lack of standing condensate and corrosion free pans improves IAQ and product life, features homeowners appreciate.

Standard features include grooved copper tubing and louvered aluminum fins. The large face areas of the refrigerant coils provide superior efficiency for high SEER and HSPF performance. Coil circuiting has also been updated to make the most of all Carrier heat pumps and air conditioners. Also units come with solid state fan controls, 1-in (25mm) thick insulation with R-value of 4.2, multi-speed motors, and fully-wettable coils. Units can accommodate factory- and/or field-installed heaters from 3 to 30 kW.

It also should be noted that the unique cabinet design of these fan coils meet new stringent regulations for cabinet air leakage - a requirement of 2% cabinet leakage rate when tested at 1.0 inches of static pressure.

The FX4D fan coil is the Puron® refrigeration design loaded with popular features. It comes in a pre-painted (taupe metallic) galvanized steel casing and is shipped with a cleanable, permanent framed filter, and a factory-supplied power plug. ArmorCoat™ provides a tin plating of the indoor coil's copper hairpins. This creates a barrier between the corrosion-causing elements and the coil. These fan coils utilize the latest in electronic commutation motor (ECM) technology through the use of high efficiency, X13, blower motors.

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

ELECTRICAL DATA FOR UNITS WITH FACTORY-INSTALLED HEAT

FX4DNF MODEL NO.	MTR HP	MTR FLA	VOLTS/PH/ HZ	HEAT PACK INSTALLED MKFCEH	SINGLE CIRCUIT			DUAL CIRCUIT						
					Heater Amps	MCA	MOCP	Htr. Amps	MCA	MOCP	Htr. Amps	MCA	MOCP	
								L1/L2	L1/L2	L1/L2	L3/L4	L3/L4	L3/L4	
019005	1/3	2.8	208/230/1/60	0501N05	18.1/20.0	26.1/28.5	30/30	N/A	N/A	N/A	N/A	N/A	N/A	N/A
025005	1/3	2.8	208/230/1/60	0501N05	18.1/20.0	26.1/28.5	30/30	N/A	N/A	N/A	N/A	N/A	N/A	N/A
031008	1/2	4.1	208/230/1/60	0801N08	28.9/32.0	41.3/45.2	45/50	N/A	N/A	N/A	N/A	N/A	N/A	N/A
037010	1/2	4.1	208/230/1/60	0901N10	36.2/40.0	50.4/55.1	60/60	N/A	N/A	N/A	N/A	N/A	N/A	N/A
043010	1/2	4.1	208/230/1/60	0901N10	36.2/40.0	50.4/55.1	60/60	N/A	N/A	N/A	N/A	N/A	N/A	N/A
049010	3/4	6.0	208/230/1/60	0901N10	36.2/40.0	52.8/57.5	60/60	N/A	N/A	N/A	N/A	N/A	N/A	N/A
061010	3/4	6.0	208/230/1/60	0901N10	36.2/40.0	52.8/57.5	60/60	N/A	N/A	N/A	N/A	N/A	N/A	N/A
061(0,T)015	3/4	6.0	208/230/1/60	1501F15	54.2/59.9	75.3/82.4	80/90	36.2/40.0	52.8/57.5	60/60	18.1/20.0	22.6/25.0	25/25	

MCA – Minimum Circuit Amps

MOCP – Maximum Overcurrent Protection

ELECTRICAL DATA FOR UNITS WITHOUT ELECTRICAL HEAT

MODEL NO.	MTR HP	MTR FLA	VOLTS/PH/HZ	SINGLE CIRCUIT		BRANCH CIRCUIT MIN WIRE SIZE* AWG
				MCA	MAXIMUM OVERCURRENT PROTECTION	
FX4DNF019(0,T)00	1/3	2.8	208/230/1/60	3.5	15	14
FX4DNF025(0,T)00	1/3	2.8	208/230/1/60	3.5	15	14
FX4DNF031(0,T)00	1/2	4.1	208/230/1/60	5.1	15	14
FX4DNF037(0,T)00	1/2	4.1	208/230/1/60	5.1	15	14
FX4DNF043(0,T)00	1/2	4.1	208/230/1/60	5.1	15	14
FX4DNF049(0,T)00	3/4	6.0	208/230/1/60	7.5	15	14
FX4DNF061(0,T)00	3/4	6.0	208/230/1/60	7.5	15	14
FX4DNB031T00	1/2	4.1	208/230/1/60	5.1	15	14
FX4DNB037T00	1/2	4.1	208/230/1/60	5.1	15	14
FX4DNB043T00	1/2	4.1	208/230/1/60	5.1	15	14
FX4DNB049T00	3/4	6.0	208/230/1/60	7.5	15	14
FX4DNB061T00	3/4	6.0	208/230/1/60	7.5	15	14

* Use copper wire only. Use 75°C only in this application. When using non-metallic (NM) sheathed cable, wire size required should be based on that of 60°C conductors, instead of wire sizes shown in table above per NEC Article 336-26.

NOTE: If branch circuit wire length exceeds 100 ft (30 m), consult NEC 215-2 to determine maximum wire length. Use 2% voltage drop.

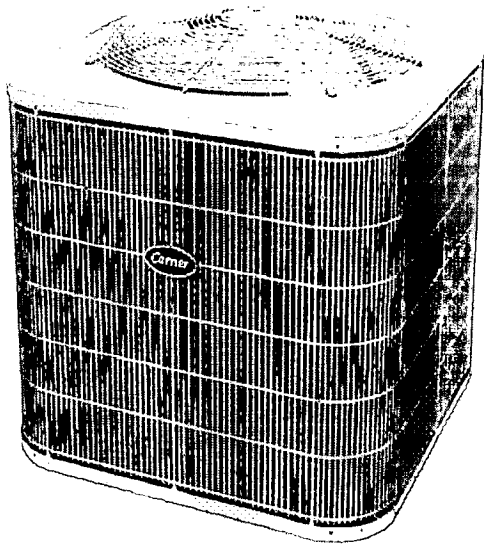
FLA – Full Load Amps

FX4D

**24ABC6
Base™ 16 Air Conditioner
with Puron® Refrigerant
1-1/2 Through 5 Tons**



Product Data



Carrier's Air Conditioners with Puron® refrigerant provide a collection of features unmatched by any other family of equipment. The 24ABC has been designed utilizing Carrier's Puron refrigerant. The environmentally sound refrigerant allows you to make a responsible decision in the protection of the earth's ozone layer.

As an Energy Star® Partner, Carrier Corporation has determined that this product meets the Energy Star® guidelines for energy efficiency. Refer to the combination ratings in the Product Data for system combinations that meet Energy Star® guidelines.

NOTE: Ratings contained in this document are subject to change at any time. Always refer to the AHRI directory (www.ahridirectory.org) for the most up-to-date ratings information.

INDUSTRY LEADING FEATURES / BENEFITS

Efficiency

- 14 - 16.5 SEER/11.0- 13.5 EER
- Microtube Technology™ refrigeration system
- Indoor air quality accessories available

Sound

- Sound level as low as 76 dBA
- Sound level as low as 74 dBA with accessory sound blanket

Comfort

- System supports Edge® Thermostat™ or standard thermostat controls

Reliability

- Puron® refrigerant - environmentally sound, won't deplete the ozone layer and low lifetime service cost.
- Scroll compressor
- Internal pressure relief valve
- Internal thermal overload
- Filter drier
- Balanced refrigeration system for maximum reliability

Durability

WeatherArmor™ protection package:

- Solid, durable sheet metal construction
- Dense wire coil guard standard
- Baked-on, complete outer coverage, powder paint

Applications

- Long-line - up to 250 feet (76.20 m) total equivalent length, up to 200 feet (60.96 m) condenser above evaporator, or up to 80 ft. (24.38 m) evaporator above condenser (See Longline Guide for more information.)
- Low ambient (down to -20°F/-28.9°C) with accessory kit

ELECTRICAL DATA

UNIT SIZE	V/PH	OPER VOLTS*		COMPR		FAN	MCA	MIN WIRE SIZE† 60° C	MIN WIRE SIZE† 75° C	MAX LENGTH ft. (m)‡ 60° C	MAX LENGTH ft. (m)‡ 75° C	MAX FUSE** or CKT BRK AMPS
		MAX	MIN	LRA	RLA	FLA						
18-31	208/230/1-60	253	197	48.0	9.0	0.50	11.8	14	14	67 (20.4)	64 (19.5)	20
24-30				58.3	13.5	0.75	17.7	14	14	46 (14.0)	43 (13.1)	25
30-30				64.0	12.8	0.75	16.8	14	14	44 (13.4)	41 (12.5)	25
36-30				77.0	14.1	0.50	18.1	12	12	57 (17.4)	54 (16.5)	30
42-30				112.0	17.9	1.20	23.6	10	10	85 (25.9)	81 (24.7)	40
48-31				109.0	19.9	1.20	26.1	10	10	70 (21.3)	67 (20.4)	40
49-30				117.0	21.8	1.20	26.1	10	10	70 (21.3)	67 (20.4)	40
60-30				135.0	21.4	1.20	28.0	8	10	91 (27.7)	56 (17.1)	40
61-30				134.0	25.0	1.20	32.5	8	10	94 (28.7)	58 (17.7)	50

* Permissible limits of the voltage range at which the unit will operate satisfactorily

† If wire is applied at ambient greater than 30°C, consult table 310-16 of the NEC (NFPA 70). The ampacity of non-metallic-sheathed cable (NM), trade name ROMEX, shall be that of 60°C conditions, per the NEC (NFPA 70) Article 334-80. If other than uncoated (no-plated), 60 or 75°C insulation, copper wire (solid wire for 10 AWG or smaller, stranded wire for larger than 10 AWG) is used, consult applicable tables of the NEC (NFPA 70).

‡ Length shown is as measured one way along wire path between unit and service panel for voltage drop not to exceed 2%.

** Time-Delay fuse.

FLA - Full Load Amps

LRA - Locked Rotor Amps

MCA - Minimum Circuit Amps

RLA - Rated Load Amps

NOTE: Control circuit is 24-V on all units and requires external power source. Copper wire must be used from service disconnect to unit.

All motors/compressors contain internal overload protection.

Complies with 2007 requirements of ASHRAE Standards 90.1

24ABC6

A-WEIGHTED SOUND POWER LEVEL (dBA)

Unit Size - Voltage, Series	Standard Rating (dBA)	TYPICAL OCTAVE BAND SPECTRUM (dBA without tone adjustment)						
		125	250	500	1000	2000	4000	8000
018-31	76	52.5	59.0	65.5	70.5	64.5	59.0	54.5
024-30	76	57.5	64.0	69.0	71.0	69.0	64.5	60.0
030-30	76	55.0	63.5	68.0	69.5	67.0	63.5	58.5
036-30	76	50.5	59.5	64.5	70.5	62.0	59.5	54.5
042-30	78	52.5	62.0	66.0	73.5	68.0	62.0	55.5
048-31	78	57.5	61.5	66.0	70.5	65.5	59.5	53.5
049-30	78	51.5	62.0	67.5	73.5	69.0	64.5	62.0
060-30	78	55.0	62.5	67.5	70.5	65.0	61.0	53.5
061-30	78	56.5	63.0	65.5	69.0	67.0	61.5	56.0

NOTE: Tested in accordance with AHRI Standard 270-08 (not listed in AHRI).

A-WEIGHTED SOUND POWER LEVEL (dBA) WITH SOUND SHIELD

Unit Size - Voltage, Series	Standard Rating (dBA)	TYPICAL OCTAVE BAND SPECTRUM (dBA without tone adjustment)						
		125	250	500	1000	2000	4000	8000
018-31	74	55.5	59.0	65.0	68.5	63.5	58.0	52.0
024-30	75	58.0	64.0	69.0	70.5	68.5	64.5	59.5
030-30	75	55.5	63.0	68.0	69.0	67.0	63.0	58.5
036-30	74	51.5	58.5	62.0	65.0	61.0	58.0	52.0
042-30	76	53.0	62.0	65.5	72.0	65.0	61.0	54.0
048-31	76	58.5	61.5	66.0	69.0	64.0	58.5	51.0
049-30	76	53.0	61.5	67.5	72.0	68.0	61.5	59.0
060-30	75	56.5	62.5	66.5	68.0	63.0	59.5	51.5
061-30	75	57.0	63.0	65.5	67.0	65.5	59.0	52.5

NOTE: Tested in accordance with AHRI Standard 270-08 (not listed in AHRI).

CHARGING SUBCOOLING (TXV-TYPE EXPANSION DEVICE)

UNIT SIZE - VOLTAGE, SERIES	REQUIRED SUBCOOLING °F (°C)
18-31	10 (5.6)
24-30	10 (5.6)
30-30	10 (5.6)
36-30	10 (5.6)
42-30	9 (5.0)
48-31	10 (5.6)
49-30	8 (4.4)
60-30	9 (5.0)
61-30	9 (5.0)

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **3-18-11** Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9471	WILSON 40 N. RIVER SVI	ALARM FINAL	Pass	215-5648 Ron SVI CLOSE INSPECTOR <i>[Signature]</i>
9732	Truitt	Final AC	Pass	CLOSE INSPECTOR <i>[Signature]</i>
1ST	305 River Rd Hennis AC		Pass	CLOSE INSPECTOR <i>[Signature]</i>
9740	SINARFI 73 N SPT RD K.L. AMERICAN S... ..	SIROTER FINAL	Pass	CLOSE INSPECTOR <i>[Signature]</i>
9735	SINARFI 73 N SPT RD Mosley	SLAB GUEST HOUSE REMODEL	Pass	INSPECTOR <i>[Signature]</i>
9734	SINARFI 73 N Sewalls Mosley	FRAMING * TRADES MEDIA ROOM	Pass	INSPECTOR <i>[Signature]</i>
9741	SITONE 22 Emmiter Esber Concrete	PRE PORN DRIVEWAY	Pass	INSPECTOR <i>[Signature]</i>
9709	HARVY 1 Ridgeland Ct Raising the Bar	FENCE FINAL	Fail	221-3140 See Harvey? INSPECTOR <i>[Signature]</i>

11068

A/C CHANGEOUT



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

BUILDING PERMIT CARD

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

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	11068	DATE ISSUED:	October 29, 2014
SCOPE OF WORK:	A/C Change Out		
CONTRACTOR:	Flynn's A/C		
PARCEL CONTROL NUMBER:	01-38-41-014-000-00130-9	SUBDIVISION:	Hillcrest Lot 13
CONSTRUCTION ADDRESS:	39 S River Road		
OWNER NAME:	Truitt		
QUALIFIER:	Joseph Flynn	CONTACT PHONE NUMBER:	283-4114

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

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

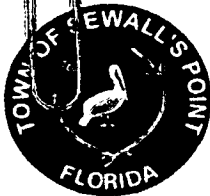
**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM**

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

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	11068		
ADDRESS:	39 S River Road		
DATE ISSUED:	10/29/2014	SCOPE OF WORK:	A/C Change Out
SINGLE FAMILY OR ADDITION /REMODEL		Declared Value	\$
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)			\$
(No plan submittal fee when value is less than \$100,000)			

DOCUMENT CONTAINS COLORED BRICK PATTERN BACKGROUND ON WHITE PAPER, MICRO-PRINT SIGNATURE LINE, "VOID" COMPONENT, MICRO-PRINT ENDORSEMENT LINES ON REVERSE

FLYNN'S AIR CONDITIONING SERVICE INC.
 1323 S.W. THELMA ST.
 PALM CITY, FL 34990
 772-283-4114

PNC BANK
 1251 S.W. 27TH STREET
 PALM CITY, FL 34990
 63-8419/2670

2492

PAY TO THE ORDER OF

TOWN OF SEWALL'S POINT

11/3/14

One hundred nine and 00/100

\$ *109.00*

DOLLARS

MEMO

[Signature]
 AUTHORIZED SIGNATURE

DO NOT ACCEPT THIS CHECK WITHOUT CONFIRMING PRESENCE OF ARTIFICIAL WATERMARK ON REVERSE. OTHER SECURITY FEATURES ARE LISTED ON REVERSE.

TOTAL BUILDING PERMIT FEE:	\$	\$	-
ACCESSORY PERMIT	Declared Value:	\$	\$ 4,500.00
Total number of inspections:	@ \$ 100.00 per insp. # insp	1	\$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	\$ 5.00
TOTAL ACCESSORY PERMIT FEE:		\$	\$ 109.00



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:	11068		
ADDRESS:	39 S River Road		
DATE ISSUED:	10/29/2014	SCOPE OF WORK:	A/C Change Out

SINGLE FAMILY OR ADDITION /REMODEL		Declared Value	\$	
---	--	----------------	----	--

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

ACCESSORY PERMIT	Declared Value:	\$	\$ 4,500.00
Total number of inspections: @ \$ 100.00 per insp. # insp.		\$	\$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	\$ 5.00
TOTAL ACCESSORY PERMIT FEE:		\$	\$ 109.00

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: 11068

Date: 10/28/14

OWNER/LESSEE NAME: TRUITT Phone (Day) 283-0901 (Fax) _____

Job Site Address: 39 S. RIVER RD City: STUART State: FL Zip: 34996

Legal Description _____ Parcel Control Number: _____

Fee Simple Holder Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** 2 TON A/C CHANGE OUT

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 4500
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: FLYNN A/C Phone: 283-4114 Fax: 781-1307

Qualifiers name: JOSEPH FLYNN Street: 1323 TRULINE City: PALM State: FL Zip: 34990

State License Number: CAC55482 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: JOE FLYNN Phone Number: 283-4114

DESIGN PROFESSIONAL: _____ Fla. License# _____

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

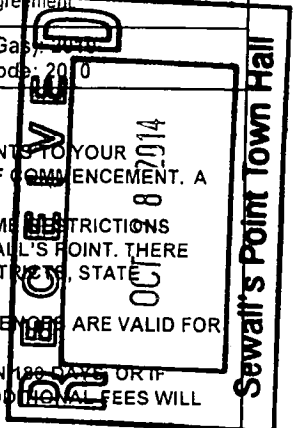
AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/ Porches: _____ Enclosed Storage: _____

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), 2008
National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS:

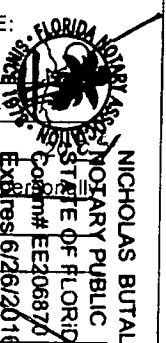
- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST 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.



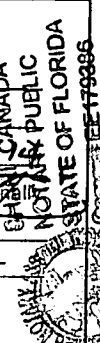
***** A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS *****

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:
X Joe Flynn
State of Florida, County of: Martin
On This the 28 day of OCT
by _____ who is personally
known to me or produced
As identification: Nicholas Butala
Notary Public
My Commission Expires: 6/26/2016



CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
X Joe Flynn
State of Florida, County of: Martin
On This the 28 day of October 2014
by Joseph Flynn who is personally
known to me or produced
As identification: Manuela
Notary Public
My Commission Expires: 03/14/16



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



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

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

Air Conditioning Change out Affidavit

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

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: CARRIER Model# EV4002
 Volts ___ CFM's _____ Heat Strip 5 Kw
 Min. Circuit Amps _____ Wire gauge 8
 Max. Breaker size 30 Min. Breaker size _____
 Ref. line size: Liquid 3/8 Suction 5/8
 Refrigerant type 410A
 Location: Existing New _____
 Attic/Garage/Closet (specify) 2ND FL ATTIC
 Access: _____

Condenser: Mfg CARRIER Model# 24ABC624
 Volts _____ SEER/EER 16 BTU's 24
 Min. Circuit Amps _____ Wire gauge 8
 Max. Breaker size 30 Min. Breaker size 25
 Ref. line size: Liquid 3/8 Suction 5/8
 Refrigerant type 410A
 Location: Existing New _____
 Left/Right/Rear/Front/Roof R REAR
 Condensate Location _____

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

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: _____ Model# _____
 Volts ___ CFM's _____ Heat Strip 5 Kw
 Min. Circuit Amps _____ Wire gauge 8
 Max. Breaker size 30 Min. Breaker size _____
 Ref. line size: Liquid 3/8 Suction 5/8
 Refrigerant type 22
 Location: Ext. New _____
 Attic/Garage/Closet (specify) 2ND FL ATTIC
 Access: _____

Condenser: Mfg _____ Model# _____
 Volts _____ SEER/EER _____ BTU's 24
 Min. Circuit Amps _____ Wire gauge 8
 Max. Breaker size 30 Min. Breaker size _____
 Ref. line size: Liquid 3/8 Suction 5/8
 Refrigerant type 22
 Location: Ext. New _____
 Left/Right/Rear/Front/Roof R REAR
 Condensate Location _____

Certification:

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

[Signature]
 Signature

10/28/14
 Date

Flynn's Air Conditioning Service Inc.

1323 SW Thelma St.
Palm City, FL 34990
(772) 283-4114 Fax: (772) 781-1307
#CACO55482

PROPOSAL

To Dr. Truitt 39 S. River Rd. Stuart, FL 34997	Phone 283-0901	Date 10-20-14
	Job Name	
	Job Phone	Job Number

We hereby submit specifications and estimates for:

1. Install (1) 2-ton high efficiency Carrier air conditioning system.
2. Install matching air handler with 5kw electric heater.
3. Install new emergency drain pan with float switch.
4. Install new digital thermostat.
5. Install liquid line filter drier.
6. Secure condenser to slab.
7. Install time delay relay on condenser.
8. Undercoat condenser base pan with rust preventative.
9. Supply (6) High efficiency R-85 filters.
10. Ten year limited manufacturers parts warranty.
11. Ten year limited manufacturers compressor warranty.
12. One year labor warranty.
13. Includes permit fees.

Equipment:

1. 16.0 SEER Model #24ABC624/FV4CNF002 \$5,400.00 - \$405.00(FPL) = \$4,995.00

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

Dollars

Payment to be made as follows: Customer agrees to pay all court costs, attorney fees or other expenses incurred in the collection of the above Payments upon default by customer. **50% at contract acceptance/ 50% at completion**

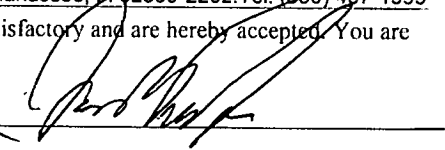
Prices include 6% Florida sales tax

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

CONSTRUCTION INDUSTRIES RECOVERY FUND. Payment may be available from the CIRF if you lose money on a project performed under contract, where the loss results from specified violations of Florida law by a state licensed contractor. For more information about the recovery fund and filing a claim, contact the Florida Construction Industry Licensing Board at the following number and address: 1940 N. Monroe St., Tallahassee, FL 32399-2202. Tel. (850) 487-1395

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

Authorized Signature _____

Customer Signature 

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



LICENSE NUMBER	
CAC055482	

The CLASS A AIR CONDITIONING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2016

FLYNN, JOSEPH BRIAN
FLYNN'S A/C SERVICE INC
1323 SW THELMA STREET
PALM CITY FL 34990



ISSUED: 08/17/2014,

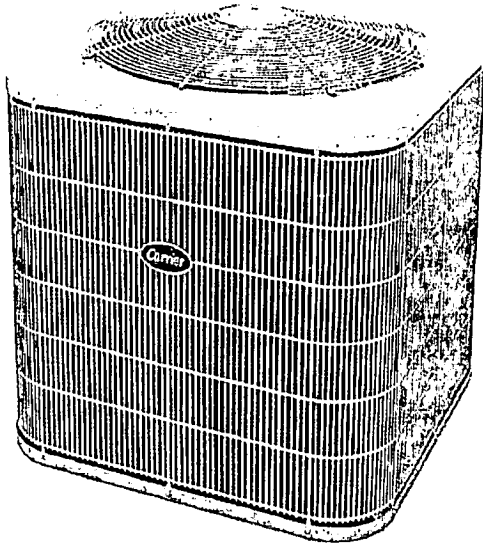
DISPLAY AS REQUIRED BY LAW

SEQ # L1408170002006

**24ABC6
Comfort™ 16 Air Conditioner
with Puron® Refrigerant
1-1/2 to 5 Nominal Tons**



Product Data



Comfort
SERIES

Carrier's Air Conditioners with Puron® refrigerant provide a collection of features unmatched by any other family of equipment. The 24ABC has been designed utilizing Carrier's Puron refrigerant. The environmentally sound refrigerant allows you to make a responsible decision in the protection of the earth's ozone layer.

This product has been designed and manufactured to meet Energy Star® criteria for energy efficiency when matched with appropriate coil components. Refer to the combination ratings in the Product Data for system combinations that meet Energy Star® guidelines.

NOTE: Ratings contained in this document are subject to change at any time. Always refer to the AHRI directory (www.ahridirectory.org) for the most up-to-date ratings information.

INDUSTRY LEADING FEATURES / BENEFITS

Efficiency

- 14 - 16.5 SEER/11.0- 13.5 EER
- Microtube Technology™ refrigeration system
- Indoor air quality accessories available

Sound

- Sound level as low as 76 dBA
- Sound level as low as 74 dBA with accessory sound blanket

Comfort

- System supports Edge® Thermostat™ or standard thermostat controls

Reliability

- Puron® refrigerant - environmentally sound, won't deplete the ozone layer and low lifetime service cost.
- Scroll compressor
- Internal pressure relief valve
- Internal thermal overload
- Filter drier
- Balanced refrigeration system for maximum reliability

Durability

WeatherArmor™ protection package:

- Solid, durable sheet metal construction
- Dense wire coil guard standard
- Baked-on, complete outer coverage, powder paint

Applications

- Long-line - up to 250 feet (76.20 m) total equivalent length, up to 200 feet (60.96 m) condenser above evaporator, or up to 80 ft. (24.38 m) evaporator above condenser (See Longline Guide for more information.)
- Low ambient (down to -20°F/-28.9°C) with accessory kit

ELECTRICAL DATA

UNIT SIZE	V/PH	OPER VOLTS*		COMPR		FAN	MCA	MIN WIRE SIZE† 60° C	MIN WIRE SIZE† 75° C	MAX LENGTH ft. (m)‡ 60° C	MAX LENGTH ft. (m)‡ 75° C	MAX FUSE** or CKT BRK AMPS
		MAX	MIN	LRA	RLA	FLA						
18-31	208/230/1-60	253	197	48.0	9.0	0.50	11.8	14	14	67 (20.4)	64 (19.5)	20
24-30				58.3	13.5	0.75	17.7	14	14	46 (14.0)	43 (13.1)	25
30-30				64.0	12.8	0.75	16.8	14	14	44 (13.4)	41 (12.5)	25
36-30				77.0	14.1	0.50	18.1	12	12	57 (17.4)	54 (16.5)	30
42-30				112.0	17.9	1.20	23.6	10	10	85 (25.9)	81 (24.7)	40
48-31				109.0	19.9	1.20	26.1	10	10	70 (21.3)	67 (20.4)	40
49-30				117.0	21.8	1.20	26.1	10	10	70 (21.3)	67 (20.4)	40
60-30				135.0	21.4	1.20	28.0	8	10	91 (27.7)	56 (17.1)	40
61-30				134.0	25.0	1.20	32.5	8	10	94 (28.7)	58 (17.7)	50

* Permissible limits of the voltage range at which the unit will operate satisfactorily

† If wire is applied at ambient greater than 30°C, consult table 310-16 of the NEC (NFPA 70). The ampacity of non-metallic-sheathed cable (NM), trade name ROMEX, shall be that of 60°C conditions, per the NEC (NFPA 70) Article 334-80. If other than uncoated (no-plated), 60 or 75°C insulation, copper wire (solid wire for 10 AWG or smaller, stranded wire for larger than 10 AWG) is used, consult applicable tables of the NEC (NFPA 70).

‡ Length shown is as measured one way along wire path between unit and service panel for voltage drop not to exceed 2%.

** Time-Delay fuse.

- FLA - Full Load Amps
- LRA - Locked Rotor Amps
- MCA - Minimum Circuit Amps
- RLA - Rated Load Amps

NOTE: Control circuit is 24-V on all units and requires external power source. Copper wire must be used from service disconnect to unit. All motors/compressors contain internal overload protection.

Complies with 2007 requirements of ASHRAE Standards 90.1

24ABC6

A-WEIGHTED SOUND POWER LEVEL (dBA)

Unit Size - Voltage, Series	Standard Rating (dBA)	TYPICAL OCTAVE BAND SPECTRUM (dBA without tone adjustment)						
		125	250	500	1000	2000	4000	8000
018-31	76	52.5	59.0	65.5	70.5	64.5	59.0	54.5
024-30	76	57.5	64.0	69.0	71.0	69.0	64.5	60.0
030-30	76	55.0	63.5	68.0	69.5	67.0	63.5	58.5
036-30	76	50.5	59.5	64.5	70.5	62.0	59.5	54.5
042-30	78	52.5	62.0	66.0	73.5	68.0	62.0	55.5
048-31	78	57.5	61.5	66.0	70.5	65.5	59.5	53.5
049-30	78	51.5	62.0	67.5	73.5	69.0	64.5	62.0
060-30	78	55.0	62.5	67.5	70.5	65.0	61.0	53.5
061-30	78	56.5	63.0	65.5	69.0	67.0	61.5	56.0

NOTE: Tested in accordance with AHRI Standard 270-08 (not listed in AHRI).

A-WEIGHTED SOUND POWER LEVEL (dBA) WITH SOUND SHIELD

Unit Size - Voltage, Series	Standard Rating (dBA)	TYPICAL OCTAVE BAND SPECTRUM (dBA without tone adjustment)						
		125	250	500	1000	2000	4000	8000
018-31	74	55.5	59.0	65.0	68.5	63.5	58.0	52.0
024-30	75	58.0	64.0	69.0	70.5	68.5	64.5	59.5
030-30	75	55.5	63.0	68.0	69.0	67.0	63.0	58.5
036-30	74	51.5	58.5	62.0	65.0	61.0	58.0	52.0
042-30	76	53.0	62.0	65.5	72.0	65.0	61.0	54.0
048-31	76	58.5	61.5	66.0	69.0	64.0	58.5	51.0
049-30	76	53.0	61.5	67.5	72.0	68.0	61.5	59.0
060-30	75	56.5	62.5	66.5	68.0	63.0	59.5	51.5
061-30	75	57.0	63.0	65.5	67.0	65.5	59.0	52.5

NOTE: Tested in accordance with AHRI Standard 270-08 (not listed in AHRI).

CHARGING SUBCOOLING (TXV-TYPE EXPANSION DEVICE)

UNIT SIZE - VOLTAGE, SERIES	REQUIRED SUBCOOLING °F (°C)
18-31	10 (5.6)
24-30	10 (5.6)
30-30	10 (5.6)
36-30	10 (5.6)
42-30	9 (5.0)
48-31	10 (5.6)
49-30	8 (4.4)
60-30	9 (5.0)
61-30	9 (5.0)

MODEL NUMBER NOMENCLATURE

1	2	3	4	5	6	7	8	9	10	11	12	13
N	N	A	A	A/N	N	N	N	A/N	A/N	A/N	N	N
2	4	A	B	C	6	3	6	A	0	0	3	0
Product Series	Product Family	Tier	Major Series	SEER	Cooling Capacity	Grille Variations	Open	Open	Open	Voltage	Series	
24=AC	A=RES AC	B=Comfort	C=Puron	6=16 SEER		A = Dense W = Standard	0=Not Defined	0=Not Defined	3=208/230-1	0 = Original Series		

24ABC6



Use of the AHRI Certified TM Mark indicates a manufacturer's participation in the program. For verification of certification for individual products, go to www.ahridirectory.org.



ISO 9001
QMI-SAI Global



This product has been designed and manufactured to meet Energy Star® criteria for energy efficiency when matched with appropriate coil components. However, proper refrigerant charge and proper air flow are critical to achieve rated capacity and efficiency. Installation of this product should follow all manufacturing refrigerant charging and air flow instructions. Failure to confirm proper charge and air flow may reduce energy efficiency and shorten equipment life.

STANDARD FEATURES

Feature	18	24	30	36	42	48 / 49	60 / 61
Puron Refrigerant	X	X	X	X	X	X	X
Maximum SEER *	16.0	16.0	16.5	16.5	16.0	16.0	16.0
Scroll Compressor	X	X	X	X	X	X	X
Field Installed Filter Drier	X	X	X	X	X	X	X
Front Seating Service Valves	X	X	X	X	X	X	X
Internal Pressure Relief Valve	X	X	X	X	X	X	X
Internal Thermal Overload	X	X	X	X	X	X	X
Long Line capability	X	X	X	X	X	X	X
Low Ambient capability with Kit	X	X	X	X	X	X	X
Dense Grille	X	X	X	X	X	X	X

* With approved combinations
X = Standard

PHYSICAL DATA

UNIT SIZE - VOLTAGE, SERIES	18-31	24-30	30-30	36-30	42-30	48-31	49-30	60-30	61-30
Operating Weight lb (kg)	125 (56.7)	147 (66.5)	153 (69.3)	165 (74.8)	213 (96.4)	264 (119.7)	231 (104.8)	272 (123.4)	272 (123.4)
Shipping Weight lb (kg)	154 (69.9)	183 (82.8)	188 (85.2)	204 (92.5)	254 (115.2)	317 (143.8)	269 (222.0)	310 (140.6)	310 (140.6)
Compressor Type	Scroll								
REFRIGERANT	Puron® (R-410A)								
Control	TXV (Puron® Hard Shutoff)								
Charge lb (kg)	4.60 (2.09)	6.00 (2.72)	6.81 (3.09)	7.00 (3.18)	8.62 (3.91)	13.0 (5.90)	9.00 (4.08)	14.50 (6.58)	14.50 (6.58)
COND FAN	Propeller Type, Direct Drive								
Air Discharge	Vertical								Vertical
Air Qty (CFM)	1881	2614	2614	3223	3810	4046	4046	4046	4046
Motor HP	1/12	1/10	1/10	1/12	1/5	1/4	1/4	1/4	1/4
Motor RPM	1100	1100	1100	800	800	800	800	800	800
COND COIL									
Face Area (Sq ft)	11.50	15.10	17.20	17.60	25.15	25.15	25.15	30.15	30.15
Fins per in.	25	25	25	25	25	20	20	20	20
Rows	1	1	1	1	1	2	1	2	2
Circuits	3	4	4	4	6	7	7	8	8
VALVE CONNECT. (In. ID)									
Vapor	3/4	3/4	3/4	7/8	7/8	7/8	7/8	7/8	7/8
Liquid	3/8	3/8	3/8	3/8	3/8	3/8	3/8	3/8	3/8
REFRIGERANT TUBES (In. OD)									
Rated Vapor*	3/4			7/8			1-1/8		
Max Liquid Line †	3/4			3/8					

* Units are rated with 25 ft (7.6 m) of lineset length. See Vapor Line Sizing and Cooling Capacity Loss table when using other sizes and lengths of lineset.
Note: See unit Installation Instruction for proper installation.

† See Liquid Line Sizing For Cooling Only Systems with Puron Refrigerant tables.



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

Certificate of Product Ratings

AHRI Certified Reference Number: 6937462 Date: 10/28/2014

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

Outdoor Unit Model Number: 24ABC624A**30

Indoor Unit Model Number: FV4CNF002L

Manufacturer: CARRIER AIR CONDITIONING

Trade/Brand name: CARRIER

Series name: COMFORT SERIES PURON AC

Manufacturer responsible for the rating of this system combination is CARRIER AIR CONDITIONING

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):	23200
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.00
IEER Rating (Cooling):	

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

DISCLAIMER

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

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.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.



we make life better™

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CERTIFICATE NO.: 130589704679452560

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

generated on 10/28/2014 2:16:02 PM EDT

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-014-000-00130-9	17860	39 S RIVER RD, SEWALL'S POINT	\$815,480	10/25/2014

Owner Information

Owner(Current)	TRUITT JAMES P JR TRUITT CHARMAINE A
Owner/Mail Address	39 S RIVER RD STUART FL 34996
Sale Date	7/12/1989
Document Book/Page	<u>0819 2159</u>
Document No.	
Sale Price	135000

Location/Description

Account #	17860	Map Page No.	SP-03
Tax District	2200	Legal Description	HILLCREST, LOT 13
Parcel Address	39 S RIVER RD, SEWALL'S POINT		
Acres	.6150		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120100 Hillcrest, Noni Est, West End

Assessment Information

Market Land Value	\$253,000
Market Improvement Value	\$562,480
Market Total Value	\$815,480

TOWN OF SEWALL'S POINT

Building Department – Inspection Log

Date of Inspection Mon Tue Wed Thur Fri 11/14/14 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11008	Truitt	Final Mechanical		
AM Requested	3915 S. River Rd	Call Joe 772-284-2760	Pass	close
	Flynn's A/C	to meet you with Ladder		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11043	Allen			
AM Requested	6 St. Lucie Ct		Pass	close
	Flynn's A/C			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11059	Cavalcanti	In Progress		
	11 S. Via Lucinda	Windows	Pass	
	Vero Glass + Mirror			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
10973	Conch Property Holdings	Roof	Pass	A+ underlay Check blocking @ valleys
	19 Lantana Lane	Sheathing		issue @ Front entry told contractor to have engineer advise.
	Conch Property Holdings			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

11241

REMODEL

(EXPIRED)

JAMES W. CAMPO, CFP
Mayor

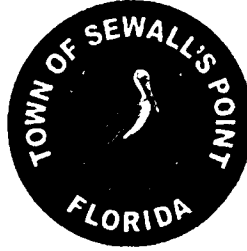
PAUL LUGER
Vice Mayor

VINCENT N. BARILE
Commissioner

FRANK FENDER
Commissioner

DAN MORRIS
Commissioner

TOWN OF SEWALL'S POINT



PAMELA MAC'KIE WALKER
Town Manager

LAKISHA Q. BURCH, CMC
Town Clerk

TINA CIECHANOWSKI
Chief of Police

JOHN ADAMS
Building & Facilities Director

February 2, 2017

NOTICE OF EXPIRED PERMIT

This correspondence is intended as a follow-up to a building permit and specific improvements associated with 39 S. River Road, more specifically permit #11241 issued on April 14, 2015 for Bathroom Remodel and Window/Door Replacement.

Town records indicate that at least 180 days have passed without a successful recorded inspection. Your permit is now expired without benefit of a required final inspection.

Town of Sewall's Point Code of Ordinances section 50-94 states: (1) Failure to obtain an approved inspection within 180 days of the previous approved inspection shall constitute suspension or abandonment. (2) If a new permit is not obtained within 180 days from the date the initial permit became null and void, the building official is authorized to require that any work which has been commenced or completed be removed from the building site. Alternately, a new permit may be issued on application, providing the work in place and the work required to complete the structure meets all applicable regulations in effect at the time the initial permit became null and void and any regulations which may have become effective between the date of expiration and the date of issuance of the new permit.

In order to avoid further administrative action please arrange to schedule a final inspection of this permit by the Town of Sewall's Point Building Department no later than ten days from date of this letter. Your permit will need to be renewed and is subject to any applicable renewal or inspection fees.

Failure to renew your permit and receive a final inspection will result in your permit becoming null and void, and the Town will report this to the property owner and the appropriate agencies as required. This will also constitute justification for denying any future permits requested by you, or your company.

Please contact me with any questions.

With Best Regards,

John R. Adams, C.B.O.
Building Official

One South Sewall's Point Road, Sewall's Point, Florida 34996
Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: pwalker@sewallspoint.org
Police Department (772) 781-3378 • Fax (772) 286-7669 • E-Mail: sppd@sewallspoint.org



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:	11241	DATE ISSUED:	April 14, 2015
SCOPE OF WORK:	Bathroom Remodel & Window/Door Replacement		
CONTRACTOR:	Ken Wendell General Contractors, Inc		
PARCEL CONTROL NUMBER:	01-38-41-014-000-00130-9	SUBDIVISION:	Hillcrest Lot 13
CONSTRUCTION ADDRESS:	39 S River Road		
OWNER NAME:	Truitt		
QUALIFIER:	Ken Wendell	CONTACT PHONE NUMBER:	263-1176

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

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

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

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

INSPECTIONS

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

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

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

Permit Number: 11241

Date: _____
 OWNER/LESSEE NAME: JAMES P. TRUITT JR. Phone (Day) 77283-0901 (Fax) _____
 Job Site Address: 395 RIVER ROAD City: STUART State: FL Zip: 34996
 Legal Description: HILCREST LOT 13 Parcel Control Number: 01-38-41-014-000-00130-9
 Fee Simple Holder Name: JAMES P. TRUITT JR. Address: 395 RIVER RD
 City: STUART State: FL Zip: 34996 Telephone: 772-283-0901

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Remodel Bath + Window/Door Replacement

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: \$ 15,000
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 AE9 AE8
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: KEN WENDELL CONCRETE, INC. Phone: 7722631176 Fax: 7729346347
 Qualifiers name: KEN WENDELL Street: 4644 NEAULANUE City: JBCA State: FL Zip: 34957
 State License Number: C6C060321 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: _____ Phone Number: _____

DESIGN PROFESSIONAL: FRED SHAFFER Fla. License# 26694
 Street: 2440 FED HWY City: STUART State: FL Zip: 34994 Phone Number: 7722204990

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.

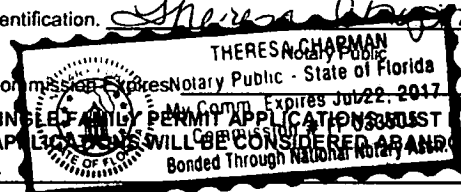
CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010
 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

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:
 X [Signature]
 State of Florida, County of: Martin
 On This the 6th day of February, 2015
 by James P. Truitt who is personally
 known to me or produced FL DIL
 As identification: [Signature]

 My Commission Expires: _____

CONTRACTOR / LICENSEE NOTARIZED SIGNATURE:
 X [Signature]
 State of Florida, County of: Martin Co.
 On This the 8th day of April, 2015
 by JAMES P. TRUITT JR. & KENNETH WENDELL who is personally
 known to me or produced E.A. Drivers Lic
 As identification: [Signature]
 Notary Public
 My Commission Expires: 4-14-2018

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.4.1.1) OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!
 EXPIRES: April 14, 2018
 Bonded Through National Surety



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:	11241		
ADDRESS:	39 S River Road		
DATE ISSUED:	4/14/2015	SCOPE OF WORK:	Bathroom Remodel & Window/Door Replacement

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	\$ 15,000.00
------------------------------------	----------------	----	--------------

Plan Submittal Fee (\$350.00 SFR, Remodel >\$200K)		\$	
Plan Submittal Fee (175.00 Remodel <\$200K, Tennant Improvement)		\$	
Plan Submittal Fee (100.00 Remodel <\$100k)		\$	\$ 100.00
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:		\$	\$ 15,000.00
Building fee: (2% of construction value)		\$	\$ 300.00
Total number of inspections (Value < \$200K) \$ 150.00 per insp. # insp		\$	-
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 4.50
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 4.50
Technology Fee: (0.04% of Construction Value - \$5 min)		\$	\$ 6.00
Road impact assessment: (0.4% of construction value - \$20 min.)		\$	\$ 60.00
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	\$ 475.00

SECURITY FEATURES INCLUDE TRUE WATERMARK PAPER, HEAT SENSITIVE ICON AND FOIL HOLOGRAM.

KEN WENDELL GENERAL CONTRACTORS, INC.
 P.O. BOX 688
 STUART, FL 34995
 772-263-1176

BB&T
 BRANCH BANKING AND TRUST COMPANY
 1-800-BANK BBT BBT.com
 83-9138/2831

15667

4/20/15

PAY TO THE ORDER OF

TOWN OF SEWALL'S POINT

\$ 475⁰⁰

Four Hundred seventy five and 00/100

DOLLARS

MEMO *Town Permit*



[Signature]
 AUTHORIZED SIGNATURE



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:	11241		
ADDRESS:	39 S River Road		
DATE ISSUED:	4/14/2015	SCOPE OF WORK:	Bathroom Remodel & Window/Door Replacement

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---	----------------	----	--------------

Plan Submittal Fee (\$350.00 SFR, Remodel >\$200K)		\$	
Plan Submittal Fee (175.00 Remodel <\$200K, Tennant Improvement)		\$	
Plan Submittal Fee (100.00 Remodel <\$100k)		\$	\$ 100.00
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:		\$	\$ 15,000.00
Building fee: (2% of construction value)		\$	\$ 300.00
Total number of inspections (Value < \$200K) \$ 150.00 per insp. # insp		\$	-
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 4.50
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 4.50
Technology Fee: (0.04% of Construction Value - \$5 min)		\$	6.00
Road impact assessment: (0.4% of construction value - \$20 min.)		\$	60.00
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	\$ 475.00

ACCESSORY PERMIT	Declared Value:	\$	
Total number of inspections: @ \$ 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
TOTAL ACCESSORY PERMIT FEE:		\$	-

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

generated on 4/10/2015 11:57:01 AM EDT

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-014-000-00130-9	17860	39 S RIVER RD, SEWALL'S POINT	\$815,480	4/4/2015

Owner Information

Owner(Current)	TRUITT JAMES P JR TRUITT CHARMAINE A
Owner/Mail Address	39 S RIVER RD STUART FL 34996
Sale Date	7/12/1989
Document Book/Page	<u>0819 2159</u>
Document No.	
Sale Price	135000

Location/Description

Account #	17860	Map Page No.	SP-03
Tax District	2200	Legal Description	HILLCREST, LOT 13
Parcel Address	39 S RIVER RD, SEWALL'S POINT		
Acres	.6150		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120100 Hillcrest, Noni Est, West End

Assessment Information

Market Land Value	\$253,000
Market Improvement Value	\$562,480
Market Total Value	\$815,480

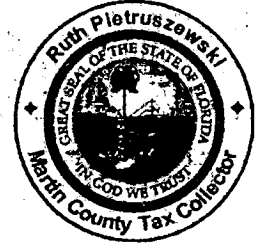
2014-2015

**MARTIN COUNTY ORIGINAL
BUSINESS TAX RECEIPT**

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

ACCOUNT 1999-513-0014 CERT CGC 060321
PHONE (772) 263-1176 SIC NO 233210

LOCATION:
4644 NE ALLEN CIR MAR



CHARACTER COUNTS IN MARTIN COUNTY

PREV YR. \$	00	LIC. FEE	\$ 26.25
\$	00	PENALTY	\$ 6.56
\$	00	COL. FEE	\$ 6.60
\$	00	TRANSFER	\$.00
TOTAL			39.41

WENDELL, KENNETH JAMES
KEN WENDELL GENERAL CONTRACTOR INC
PO BOX 688
STUART, FL 34995

HAS SATISFIED REQUIREMENTS TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF
CERTIFIED GENERAL CONTRACTOR
AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

11 DAY OF FEBRUARY 2015
AND ENDING SEPTEMBER 30, 2015

800 2014 01935.0001 PAID

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD**

LICENSE NUMBER	
CGC060321	

The GENERAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2016



WENDELL, KENNETH JAMES
KEN WENDELL GENERAL CONTRACTORS INC
4644 NE ALLEN CIRCLE
JENSEN BEACH FL 34957



ISSUED: 08/05/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L1408050001906

PLEASE CUT OUT CARD BELOW AND RETAIN FOR FUTURE REFERENCE

**STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION
CONSTRUCTION INDUSTRY EXEMPTION**



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

EFFECTIVE DATE: 6/14/2013

EXPIRATION DATE: 6/14/2015

PERSON: WENDELL

KENNETH

J

FEIN: 200534647

BUSINESS NAME AND ADDRESS:

KEN WENDELL GENERAL CONTRACTORS INC

PO BOX 688

STUART

FL

34995

SCOPES OF BUSINESS OR TRADE:

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.

F
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H
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E

LICENSED GENERAL
CONTRACTOR



CERTIFICATE OF LIABILITY INSURANCE

KENWE-1

OP ID: CR

DATE (MM/DD/YYYY)

03/19/2015

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

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

PRODUCER R.V. Johnson Insurance 2041 SE Ocean Blvd Stuart, FL 34996 R.V. Johnson Agency, Inc.	CONTACT NAME: R V Johnson Agency	
	PHONE (A/C, No, Ext): 772-287-3366	FAX (A/C, No): 772-287-4439
E-MAIL ADDRESS: crzaca@rvjohnson.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Auto-Owners Insurance Co		18988
INSURER B: Southern Owners Insurance		10190
INSURER C:		
INSURER D:		
INSURER E:		
INSURER F:		

INSURED
Ken Wendell General Contractors, Inc.
PO Box 688
Stuart, FL 34995


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			72722461	09/21/2014	09/21/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
							MED EXP (Any one person) \$ 10,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 1,000,000
							PRODUCTS - COMP/OP AGG \$ 1,000,000
							\$
A	AUTOMOBILE LIABILITY			9659858800	02/06/2014	02/06/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 100,000
	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS						BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (PER ACCIDENT) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER**CANCELLATION**

TOWN024 Town of Sewalls Point Building department 1 S. Sewalls Point Road Stuart, FL 34996	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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WINDOW/DOOR SCHEDULE

ID NO	APPOX OPENING SIZE (WXH)	DESIGNATION	* TYPE	IMPACT PROTECTION		REMARKS
				IMPACT GLASS	SHUTTER	
	37" X 63"	25	SH	X	X	EXAMPLE
1	3068x2	1	Door	X		
2	PWS20	2	Fixed	X		
3	PWS20	3	Fixed	X		
4	PWS20	4	Fixed	X		
5	CAS40					
6	PWS40	5	Fixed	X		
7	CA2740	6	Casement	X		
8						
9						
10						
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12						
13						
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30						

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

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

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

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

* TYPE WINDOWS

SH - SINGLE HUNG
DH - DOUBLE HUNG

AWN - AWNING
CAS - CASEMENT

SL - SLIDING
FIX - FIXED

KEN WENDELL GENERAL CONTRACTORS, I NC.

P. O. BOX 688 STUART, FL. 34995 TEL 772 - 263 - 1176

FAX 772 - 934 - 6437 E MAIL kwgcfi@aol.com

PN 11241

Fax Cover Sheet

Send to: SEWALLS POINT BUILDING DEPT.	From: Ken Wendell
Attention: John Adams	Date: 7-20-2015
Fax Number: 772 220 4765	Phone Number:

FOR IMMEDIATE HANDLING

4 pgs incl cover pg

Ref: Contractor Licensing

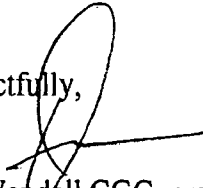
Dear John,

We will be submitting permit applications for James Truitt Res. @ 39 S River Rd. in the near future. The proposed work to include the following;

1. Septic sys. drain field replacement – permit applied for.
2. Tree relocation or replacement.
3. Master bath renovation
4. Window/door replacement
5. Pool & deck renovation
6. New fence

Please find attached contractor license, wc exempt. Docs.
Cert of Comm Gen Liab has already been sent.

Respectfully,



Ken Wendell CGC, president
KEN WENDELL GENERAL CONTRACTORS, INC.



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

WENDELL, KENNETH JAMES
KEN WENDELL - GENERAL CONTRACTORS INC
P O BOX 688
STUART FL 34995

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. 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

CGC060321

ISSUED: 08/05/2014

CERTIFIED GENERAL CONTRACTOR
WENDELL, KENNETH JAMES
KEN WENDELL - GENERAL CONTRACTORS

IS CERTIFIED under the provisions of Ch. 489 FS.
Expiration date : AUG 31, 2016 L1408050001906

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER	
CGC060321	



The GENERAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2016

WENDELL, KENNETH JAMES
KEN WENDELL - GENERAL CONTRACTORS INC
4644 NE ALLEN CIRCLE
JENSEN BEACH FL 34957



3/20/2015

License Menu (login.licenseMenu)



Home | About Us | Contact Us | My Account | My Profile | My Licenses | My Applications | My Renewals | My Expirations | My Expirations | My Expirations

Certified General Contractor #CGC060321

Logged in as **Wendell, Kenneth James**

License Menu

Select the function you wish to perform.
Press "Back" to return to the main menu.

License Issued To:	WENDELL, KENNETH JAMES
DBA Name:	KEN WENDELL - GENERAL CONTRACTORS INC
License Status:	Current, Active
Originally Licensed On:	01/07/1999 (mm/dd/yyyy)
Expires On:	08/31/2016 (mm/dd/yyyy)
Modifiers:	Construction Business 12/14/2004 (mm/dd/yyyy)

Functions

- [Print Inactive Receipt](#)
- [Address Change](#)
- [Certified General Contractor - Change of Status from Active to Inactive](#)
- [View My Continuing Education](#)
- [Remove This License From My Account](#)

Back

The State of Florida is an AA/EEO employer. [Copyright 2007-2013 State of Florida, Privacy Statement](#)

Under Florida law, email addresses are public records. If you do not want your e-mail 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 email 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.



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: 6/14/2013

EXPIRATION DATE: 6/14/2015

PERSON: WENDELL

KENNETH

J

FEIN: 200534647

BUSINESS NAME AND ADDRESS:

KEN WENDELL GENERAL CONTRACTORS INC

PO BOX 688

STUART

FL

34995

SCOPES OF BUSINESS OR TRADE:

LICENSED GENERAL
CONTRACTOR

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

FAX COVER SHEET

TO

COMPANY

FAX NUMBER 17722204765

FROM Post Insurance

DATE 2015-03-19 20:49:54 GMT

RE SUNCO-2 Town of Sewalls Point

COVER MESSAGE

SUNCO-2 Town of Sewalls Point

Kelley Booth

"Securing Lives & Property since 1979"

Post Insurance & Financial, Inc.

146 NW Central Park Plaza, Suite 102

Port St. Lucie, FL 34986

Main Phone: 772-878-8184 Fax: 772-878-8292

Email: Kelley@InsurewithPost.com

Request Quotes online at www.InsureWithPost.com



CERTIFICATE OF LIABILITY INSURANCE

SUNCO-2 OP ID: KB

DATE (MM/DD/YYYY)
03/19/2015

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

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

PRODUCER Post Insurance & Financial, In Katherine E. Post 146 NW Central Park Plaza, 102 Port St. Lucie, FL 34986 Katherine Post	CONTACT NAME: Post Insurance PHONE (A/C, No, Ext): 772-878-8184 FAX (A/C, No): 772-878-8292 E-MAIL ADDRESS: <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; border: none;">INSURER(S) AFFORDING COVERAGE</td> <td style="text-align: center; border: none;">NAIC #</td> </tr> <tr> <td style="border: none;">INSURER A: Progressive Ins Co</td> <td style="border: none;">24252</td> </tr> <tr> <td style="border: none;">INSURER B: Nationwide Ins Co. of America</td> <td style="border: none;">25453</td> </tr> <tr> <td style="border: none;">INSURER C:</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER D:</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER E:</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">INSURER F:</td> <td style="border: none;"></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Progressive Ins Co	24252	INSURER B: Nationwide Ins Co. of America	25453	INSURER C:		INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #														
INSURER A: Progressive Ins Co	24252														
INSURER B: Nationwide Ins Co. of America	25453														
INSURER C:															
INSURER D:															
INSURER E:															
INSURER F:															
INSURED Suncoast Painting Service Inc Anita Dean 750 Emerald Ave. Ft. Pierce, FL 34945															

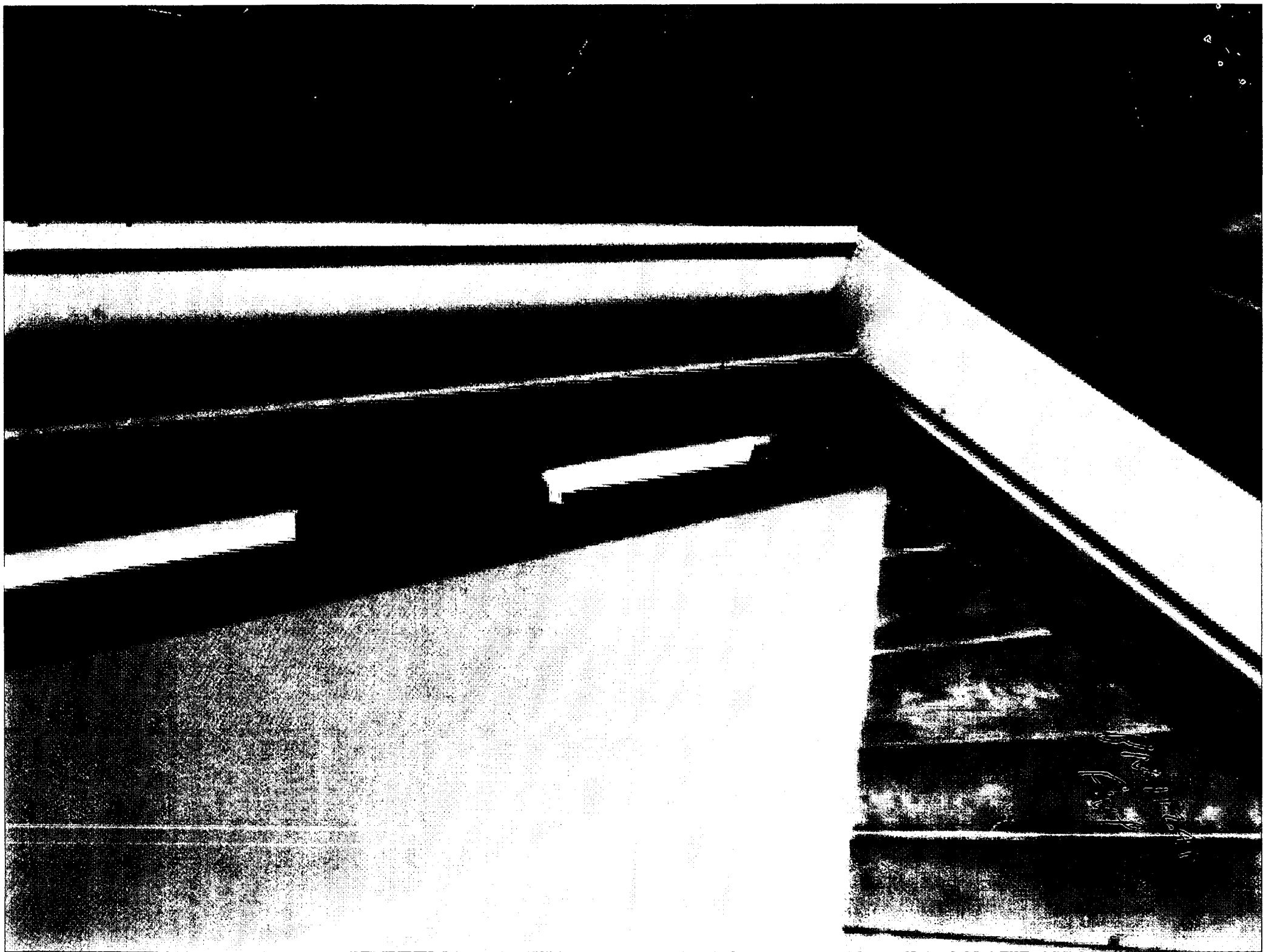
COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

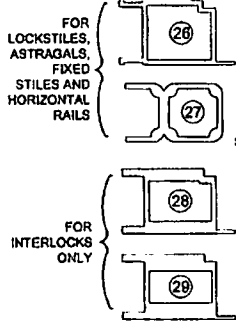
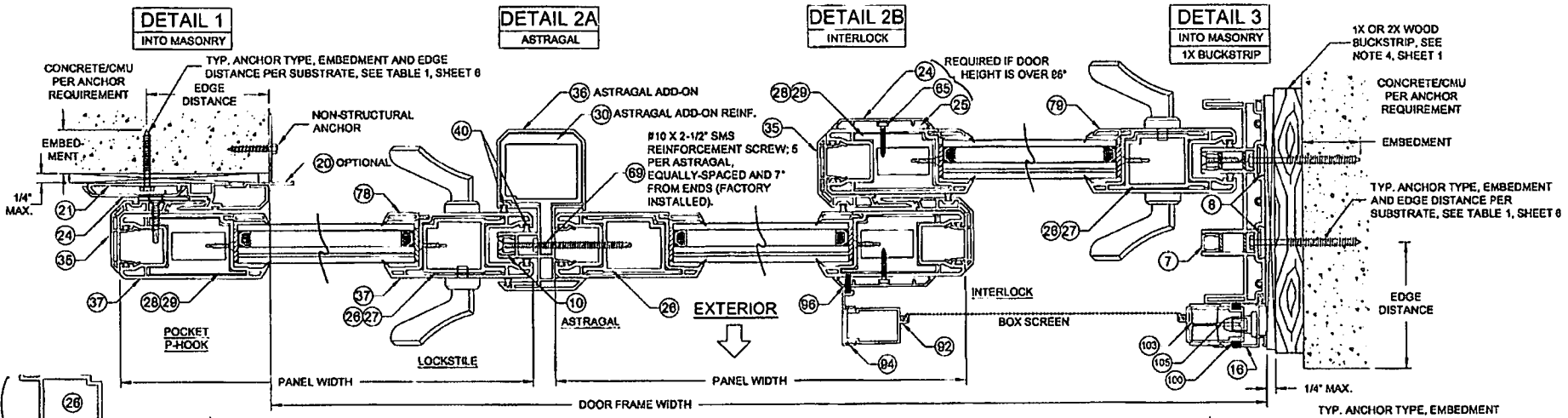
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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.

NSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR INSD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
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 type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			ACP5944927006	03/17/2015	03/17/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPI/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			08215099-9	08/26/2014	08/26/2015	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER TOWNO-7 Town of Sewalls Point 1 South Sewalls Point Rd Sewalls Point, FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	--





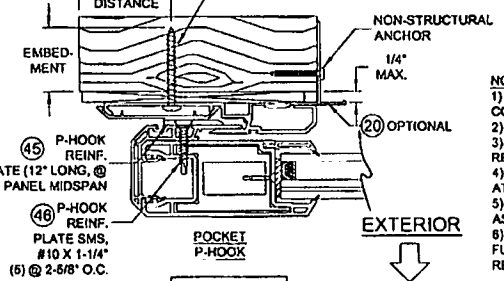
SEE NOTES 3 & 6 BELOW

TYP. ANCHOR TYPE, EMBEDMENT AND EDGE DISTANCE PER SUBSTRATE, SEE TABLE 1, SHEET 6

2X WOOD BUCKSTRIP OR FRAMING, SEE NOTE 4, SHEET 1

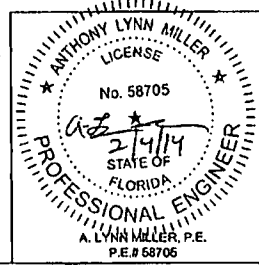
TYP. ANCHOR TYPE, EMBEDMENT AND EDGE DISTANCE PER SUBSTRATE, SEE TABLE 1, SHEET 6

2X WOOD BUCKSTRIP OR FRAMING, SEE NOTE 4, SHEET 1



DETAIL 1 INTO WOOD

- NOTES
- 1) DETAILS APPLY TO 2, 3 AND 4 TRACK CONFIGURATIONS.
 - 2) SEE SHEETS 2-4 FOR ANCHOR LOCATION & SPACING.
 - 3) SEE TABLES 2-4 FOR REINFORCEMENT REQUIREMENTS.
 - 4) CONTIGUOUS ANCHOR PLATE, ITEM #8, IS REQUIRED AT ALL FRAME ANCHOR LOCATIONS.
 - 5) PANEL WIDTH DOES NOT INCLUDE INTERLOCK OR ASTRAGAL ADD-ON.
 - 6) ALL REINFORCEMENTS ARE APPROXIMATELY THE FULL LENGTH OF THE EXTRUSION. REFER TO TEST REPORTS FOR EXACT DIMENSIONS.



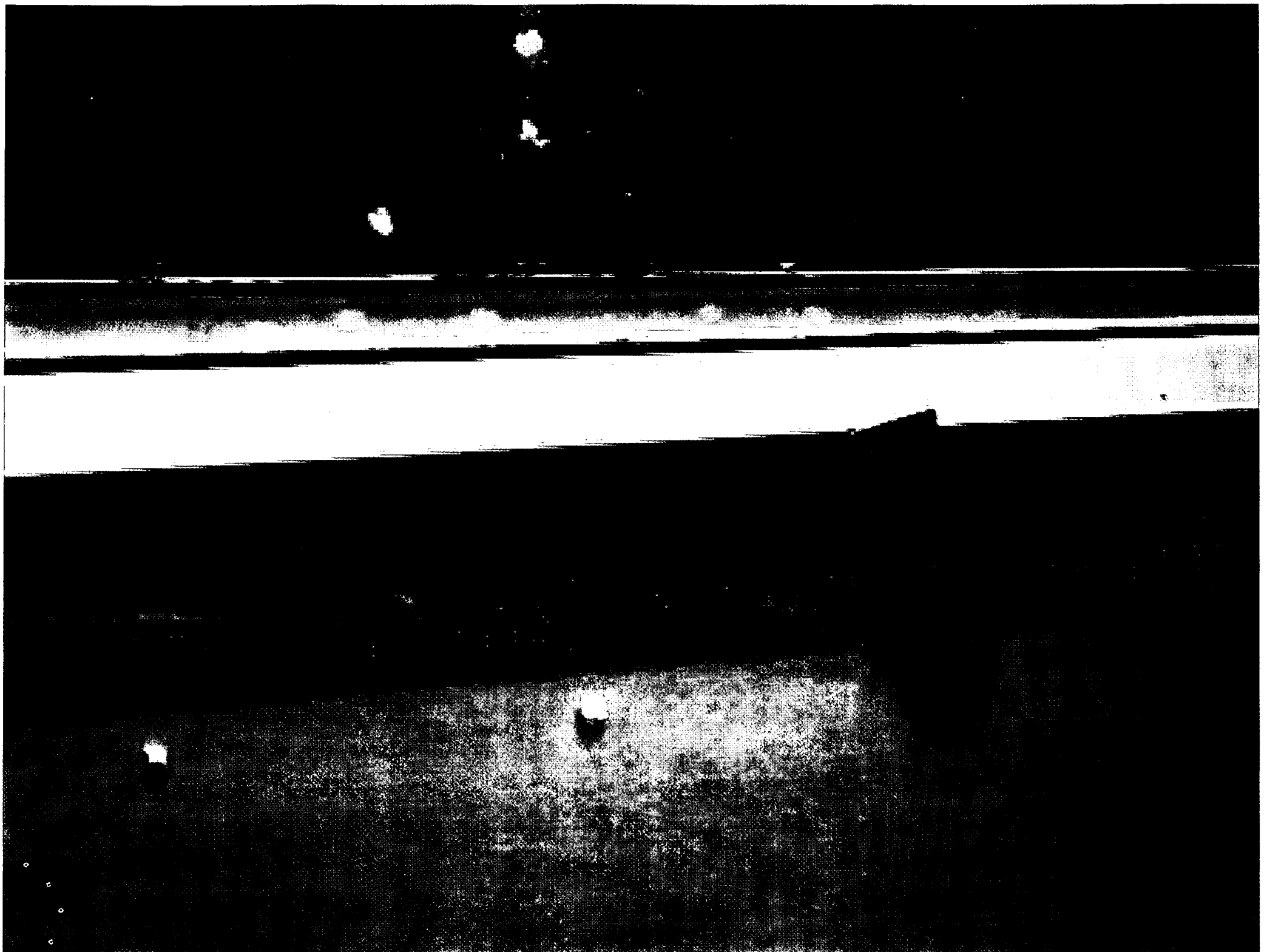
PGT

1070 TECHNOLOGY DRIVE
N. VENICE, FL 34275
P.O. BOX 1628
NOKOMIS, FL 34274

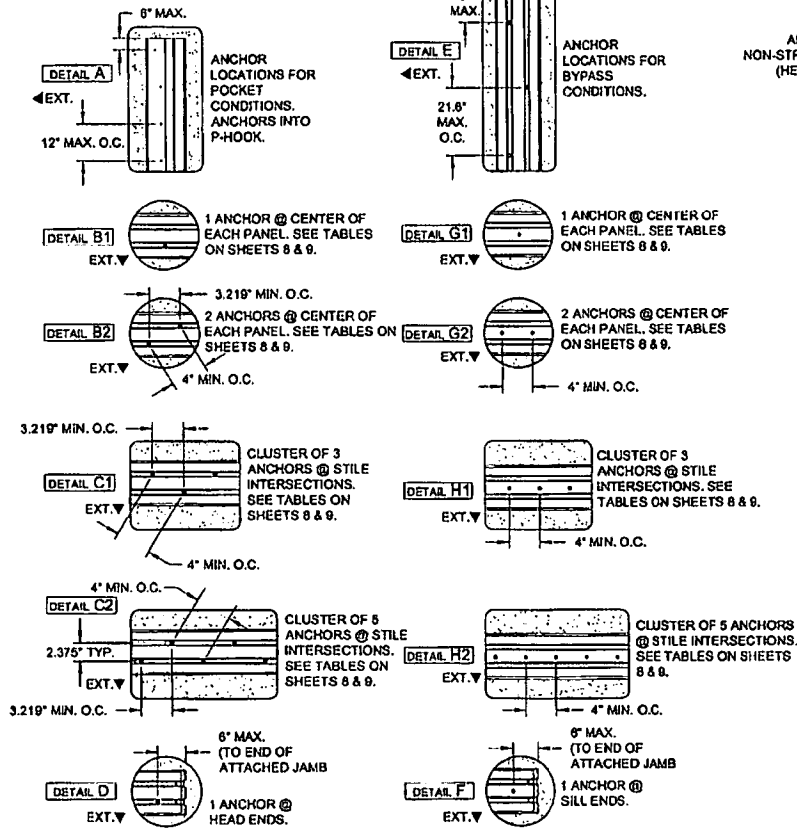
CERT. OF AUTH. #20298

Revised By:	Date:	Revision:
J.J.	10/11/11	FBC 2010 CODE
Revised By:	Date:	Revision:
J.R.	11/05/13	N/A THIS SHEET
Description:		Drawn By:
HORIZONTAL INSTALLATION DETAILS		J ROSOWSKI
Title:		Date:
VINYL SGD INSTALLATION GUIDELINES		11/18/10
Series/Model:	Scale:	Sheet:
570/2770	NTS	5 OF 13
Drawing No.:	Rev.:	
MD-SGD570-01	E	

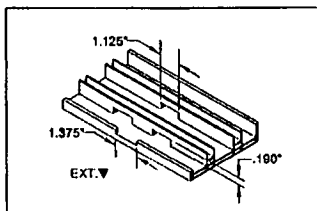
PRODUCT REVISED to comply with the Florida Building Code Amendment No. 13-1125-05 Expiration Date 5/1/2016 By: [Signature] Michael Decker Product Control



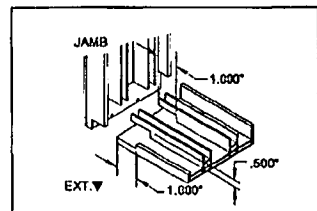
2-TRACK CONFIGURATIONS



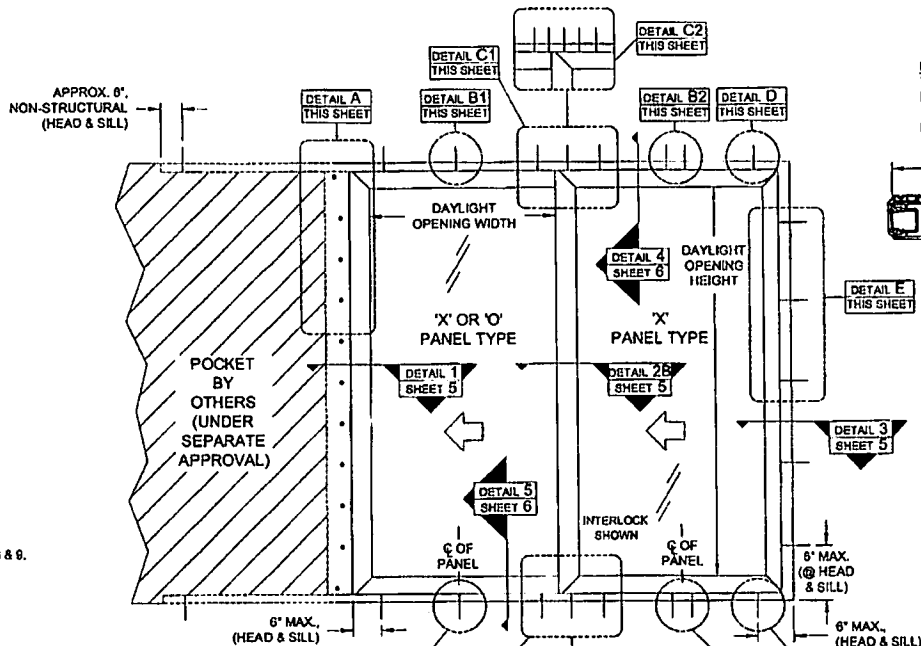
NOTE: SEE TABLE 1, SHEET 6 FOR ANCHOR EDGE DISTANCE AND EMBEDMENT.



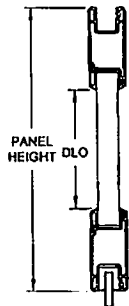
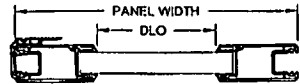
WEEPHOLE PATTERN @ 24" O.C.



WEEPHOLE PATTERN @ SILL ENDS

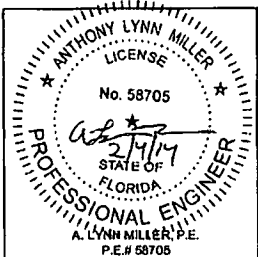


DAYLIGHT OPENING (DLO) FORMULAS
 WIDTH: PANEL WIDTH - 8-8/16"
 HEIGHT: PANEL HEIGHT - 8-8/16"
 PANEL HEIGHT = FRAME HEIGHT - 2.5"



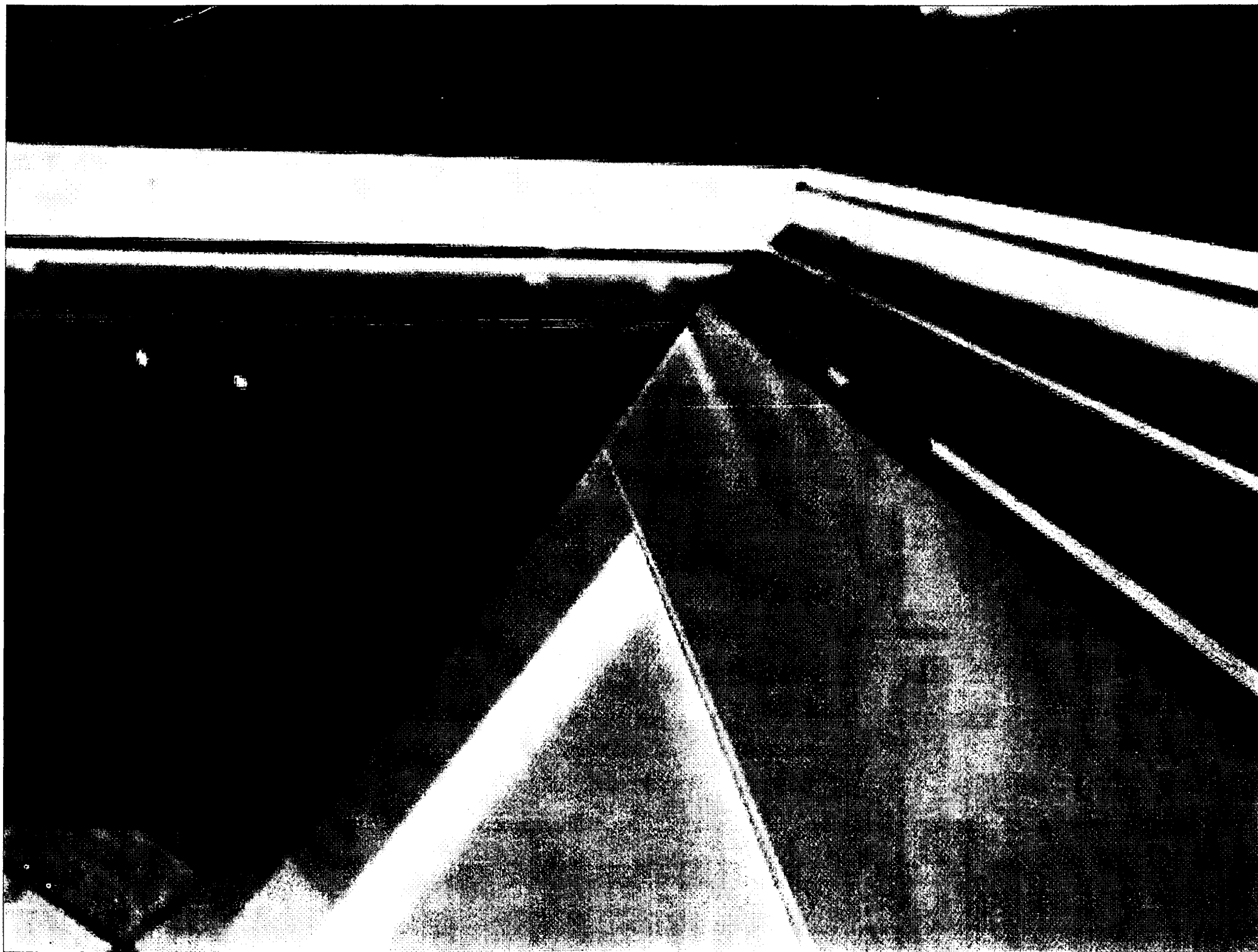
PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 13-1125-05
 Expiration Date 4/11/16
 By: Isham J. Chavis
 Material Grade Product Control

NOTES:
 1) FOR CONFIGURATIONS, SEE SHEET 12.
 2) FOR ANCHOR EDGE DISTANCE AND EMBEDMENT, SEE TABLE 1 SHEET 6.
 3) DAYLIGHT OPENING (DLO) FORMULAS:
 WIDTH: PANEL WIDTH - 8-8/16"
 HEIGHT: PANEL HEIGHT - 8-8/16"

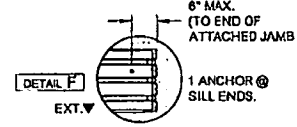
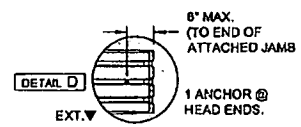
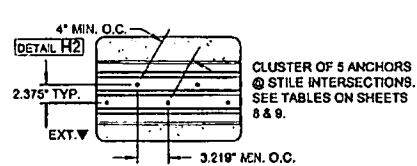
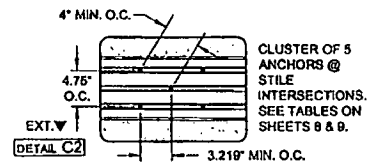
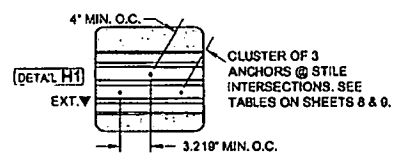
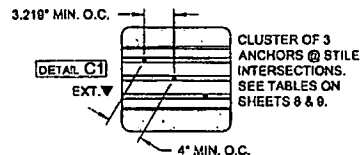
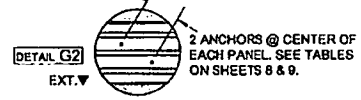
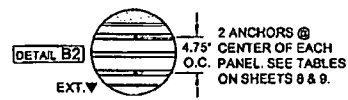
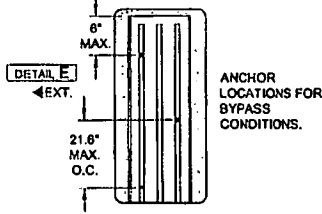
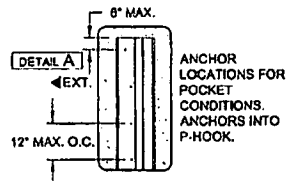


1070 TECHNOLOGY DRIVE
 N. VENICE, FL 34275
 P.O. BOX 1629
 NOKOMIS, FL 34274
 CERT. OF AUTH. #29298

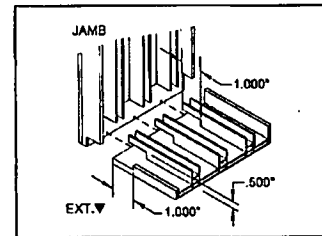
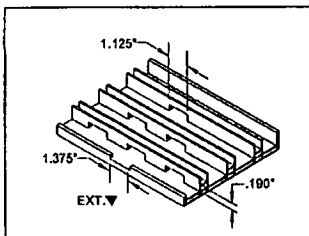
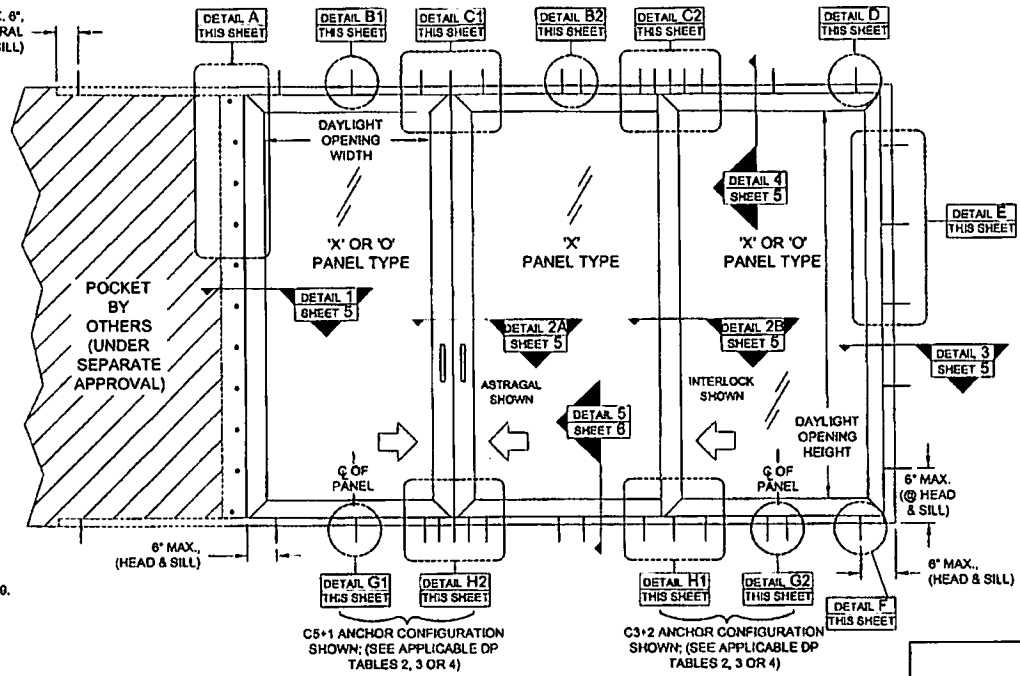
Revised By:	Date:	Revision:
J.J.	10/11/11	FBC 2010 CODE
Revised By:	Date:	Revision:
J.R.	11/05/13	CORRECT DLO
Description:		Drawn By:
ANCHOR LOCATIONS (2 TRACKS)		J ROSOWSKI
Title:		Date:
VINYL SGD INSTALLATION GUIDELINES		11/18/10
Series/Model:	Scale:	Sheet:
570/2770	NTS	2 OF 13
Drawing No.	Rev:	
MD-SGD570-01	B	



3-TRACK CONFIGURATIONS



APPROX. 6"
NON-STRUCTURAL
(HEAD & SILL)

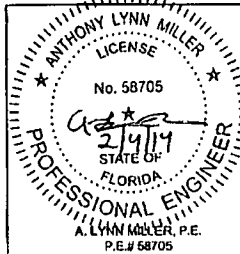


WEEPHOLE PATTERN @ 24" O.C.

WEEPHOLE PATTERN @ SILL ENDS

- NOTES:**
 1) FOR CONFIGURATIONS, SEE SHEET 12.
 2) FOR ANCHOR EDGE DISTANCE AND EMBEDMENT, SEE TABLE 1 SHEET 9.
 3) DAYLIGHT OPENING (DLO) FORMULAS:
 WIDTH: PANEL WIDTH - 8-9/16"
 HEIGHT: PANEL HEIGHT - 8-9/16"
 4) PANEL HEIGHT = FRAME HEIGHT - 2.6"

PRODUCT REVISIONED
 as complying with the Florida
 Building Code
 Acceptance No. 13-1125-01
 Expiration Date 5/14/16
 By: [Signature]
 Miami Dade Product Control



1070 TECHNOLOGY DRIVE
 N. VENICE, FL 34276
 P.O. BOX 1529
 NOKOMIS, FL 34274

CERT. OF AUTH. #29298

Revised By:	Date:	Revision:
J.J.	10/11/11	FBC 2010 CODE
Revised By:	Date:	Revision:
J.R.	11/05/13	DETAIL E

Description:		Drawn By:
ANCHOR LOCATIONS (3 TRACKS)		J ROSOWSKI
Title:	Date:	
VINYL SGD INSTALLATION GUIDELINES	11/18/10	
Series/Model:	Scale:	Sheet:
570/2770	NTS	3 OF 13
Drawing No.	Rev:	
MD-SGD570-01	B	



GENERAL NOTES: SERIES 570 & 2770 LARGE MISSILE, IMPACT-RESISTANT, VINYL REINFORCED SLIDING GLASS DOOR

1) THIS PRODUCT HAS BEEN DESIGNED & TESTED TO COMPLY WITH THE REQUIREMENTS OF THE FLORIDA BUILDING CODE. THE RIGID WHITE, BROWN & TAN PVC MANUFACTURED BY VISION EXTRUSIONS, LTD. HAS BEEN TESTED TO COMPLY WITH THE FLORIDA BUILDING CODE FOR PLASTICS, (COMPONENT REQUIREMENTS).

2) GLAZING TYPE OPTIONS: (FROM EXTERIOR TO INTERIOR); T=TEMPERED, HS=HEAT STRENGTHED, AN=ANNEALED, SG=.090 DUPONT SENTRYGLAS (FORMERLY KNOWN AS SENTRYGLAS® PLUS). PVB=.090° DUPONT BUTACITE PVB:
 GLASS TYPE A: 3/16" HS GLASS + .090" SG INTERLAYER + 3/16" HS GLASS + 7/16" AIR SPACE + 3/16" I CAP
 GLASS TYPE B: 3/16" HS GLASS + .090" PVB INTERLAYER + 3/16" AN GLASS + 7/16" AIR SPACE + 3/16" I CAP
 GLASS TYPE C: 3/16" HS GLASS + .090" PVB INTERLAYER + 3/16" AN GLASS + 9/16" AIR SPACE WITH HEAT-MIRROR FILM + 3/16" I CAP
 APPROVED BACKBEDDINGS ARE GE 7700 AND DOW-CORNING 995.

3) FOR MASONRY APPLICATIONS IN MIAMI-DADE COUNTY, USE ONLY THE FOLLOWING MIAMI-DADE COUNTY APPROVED MASONRY ANCHORS: 1/4" ELCO ULTRACON OR 1/4" ELCO CRETEFLEX. SEE TABLE 1, SHEET 6 FOR DETAILS.

4) MASONRY ANCHORS MAY BE USED INTO WOOD AS PER TABLE 1, SHEET 6. ALL WOOD BUCKS LESS THAN 1-1/2" THICK ARE TO BE CONSIDERED 1X INSTALLATIONS. 1X WOOD BUCKS ARE OPTIONAL IF UNIT IS INSTALLED DIRECTLY TO SUBSTRATE. WOOD BUCKS DEPICTED AS 2X ARE 1-1/2" THICK OR GREATER. 1X AND 2X BUCKS (WHEN USED) SHALL BE DESIGNED TO PROPERLY TRANSFER LOADS TO THE STRUCTURE. WOOD BUCK DESIGN AND INSTALLATION IS THE RESPONSIBILITY OF THE ENGINEER OR ARCHITECT OF RECORD.

5) IF SILL IS TIGHT TO SUBSTRATE, GROUT IS NOT REQUIRED. IF USED, NON-SHRINK, NON-METALLIC GROUT, 3400 PSI MIN., (DONE BY OTHERS) (MAX. 1/4" SHIM SPACE FOR GROUT) MUST FULLY SUPPORT THE ENTIRE LENGTH OF THE SILL THAT IS NOT TIGHT TO THE SUBSTRATE, AND TRANSFER SHEAR LOAD TO SUBSTRATE. IF SUBSTRATE IS WOOD, 30# FELT PAPER OR MASTIC IS REQUIRED BETWEEN THE GROUT AND WOOD SUBSTRATE, OR AS APPROVED BY THE AUTHORITY HAVING JURISDICTION, COMPLYING WITH FBC.

6) ANCHOR EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO. USE ANCHORS OF SUFFICIENT LENGTH TO ACHIEVE THE EMBEDMENTS SHOWN ON TABLE 1, SHEET 6. PROPER SEALING OF ENTIRE ASSEMBLY IS THE RESPONSIBILITY OF OTHERS AND IS BEYOND THE SCOPE OF THESE INSTRUCTIONS.

7) DESIGN PRESSURES:
 A. NEGATIVE DESIGN LOADS BASED ON TESTED PRESSURE AND GLASS TABLES ASTM E-1300.
 B. POSITIVE DESIGN LOADS BASED ON WATER TEST PRESSURE AND GLASS TABLES ASTM E-1300.

8) THE ANCHORAGE METHODS SHOWN HAVE BEEN DESIGNED TO RESIST THE WINDLOADS CORRESPONDING TO THE REQUIRED DESIGN PRESSURE. THE 33 1/3% STRESS INCREASE HAS NOT BEEN USED IN THE DESIGN OF THIS PRODUCT. THE 1.8 LOAD DURATION FACTOR WAS USED FOR THE EVALUATION OF ANCHORS INTO WOOD. ANCHORS THAT COME INTO CONTACT WITH OTHER DISSIMILAR MATERIALS SHALL MEET THE REQUIREMENTS OF THE FLORIDA BUILDING CODE FOR CORROSION RESISTANCE.

9) SHUTTERS ARE NOT REQUIRED.

10) SIZES MUST BE VERIFIED FOR COMPLIANCE WITH EGRESS REQUIREMENTS PER THE FLORIDA BUILDING CODE. MAXIMUM OF (8) EIGHT PANEL CONFIGURATION FOR FRAME HEIGHTS UP TO 96" OR (4) FOUR PANEL CONFIGURATION FOR FRAME HEIGHTS OVER 96" AND UP TO 120".

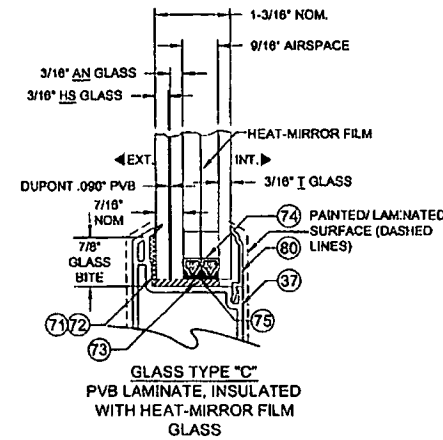
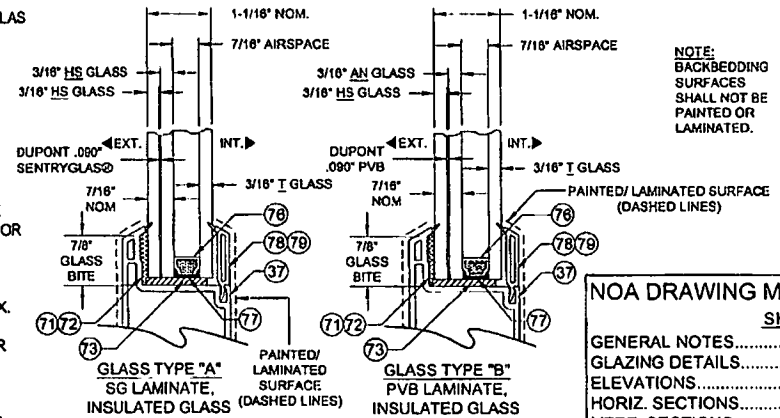
11) REFERENCES: TEST REPORTS FTL-6337 & 6338; EXOVA-10-002-792(A) & 10-006-10231; CAMBRIDGE 535753-09; ELCO ULTRACON PER CURRENT NOA; ELCO CRETEFLEX PER CURRENT NOA; VISION EXTRUSION, LTD: WHITE RIGID PVC PER CURRENT NOA, VE 1000 TAN 202 AND LIGHTER SHADES (NON-WHITE) RIGID PVC PER CURRENT NOA AND BROWN COATED (PAINTED OR LAMINATED) WHITE RIGID PVC PER CURRENT NOA; ANSI/AF&PA NDS-2005 FOR WOOD CONSTRUCTION AND ADM-2005 ALUMINUM DESIGN MANUAL

12) THE 2770 SERIES USES A EITHER A PVB OR SENTRYGLAS, (SG) INTERLAYER. UNITS GLAZED WITH GLASS CONTAINING SG INTERLAYER WERE PREVIOUSLY KNOWN AS THE 2870 SERIES.

INSTRUCTIONS:

- KNOWING THE REQUIRED DESIGN PRESSURE OF THE OPENING, THE ANCHOR REQUIREMENTS FOR THE SLIDING GLASS DOORS MAY BE DETERMINED FROM THE DESIGN PRESSURE TABLES. FOR GLASS TYPES B OR C, USE TABLE 4, SHEET 9. FOR GLASS TYPE A, USE TABLE 3, SHEET 9 IF THE REQUIRED DESIGN PRESSURE IS ABOVE 80 PSF, OTHERWISE USE TABLE 2, SHEET 8.
- LOCATE THE SLIDING GLASS DOOR SIZE ON THE TABLE, USING THE FRAME HEIGHT AND THE NOMINAL PANEL WIDTH. WHEN FINDING YOUR SIZE IN THE TABLE, ALWAYS ROUND UP TO THE NEXT LISTED SIZE.
- CHOOSE WHICH ANCHOR OPTION (A-D) IS MOST APPLICABLE. ANCHORS ARE DEFINED IN TABLE 1, SHEET 6, ALONG WITH THE APPROPRIATE SUBSTRATE, MINIMUM EMBEDMENT AND MINIMUM EDGE DISTANCE.
- FROM THE DESIGN PRESSURE TABLES (TABLES 2-4, SHEETS 8 & 9), VERIFY THAT THE REQUIRED DESIGN PRESSURE IS MET OR EXCEEDED. USE THE ANCHOR QUANTITIES SHOWN.
- INSTALL AS PER THE INSTRUCTIONS AND DETAILS ON SHEETS 2-7.
- ADDITIONAL INSTALLATION CLIPS MUST BE INSTALLED AS SHOWN ON SHEET 7.

DESIGN PRESSURE RATING	IMPACT RATING
VARIES, SEE SHEETS 8 & 9	LARGE & SMALL MISSILE IMPACT

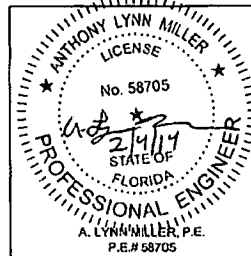


NOTE: BACKBEDDING SURFACES SHALL NOT BE PAINTED OR LAMINATED.

NOA DRAWING MAP SHEET

GENERAL NOTES.....	1
GLAZING DETAILS.....	1
ELEVATIONS.....	2-4
HORIZ. SECTIONS.....	5
VERT. SECTIONS.....	8
ACCESSORIES.....	7
DESIGN PRESSURES.....	8-9
EXTRUSIONS.....	10
PARTS LIST.....	11
CONFIGURATIONS.....	12
PANEL TYPES.....	13

PRODUCT HAS VISAO in compliance with the Florida Building Code Acceptance No. 13-12505 Expiration Date APR 14, 2016 By Ishan J. Khan Internal Code Freedom Control



PGT

1070 TECHNOLOGY DRIVE
 N. VENICE, FL 34275
 P.O. BOX 1520
 NOKOMIS, FL 34274

CERT. OF AUTH. #29208

Revised By: J.J.	Date: 10/11/11	Revision: FBC 2010 CODE
Revised By: J.R.	Date: 11/05/13	Revision: RENAMED 2870
Description: GENERAL NOTES & GLASS TYPES		Drawn By: J ROSOWSKI
Title: VINYL SGD INSTALLATION GUIDELINES	Date: 11/18/10	
Series/Model: 570/2770	Scale: NTS	Sheet: 1 OF 13
Drawing No. MD-SGD570-01	Rev: B	



NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

E. MATERIAL CERTIFICATIONS (continue):

5. Notice of Acceptance No. **11-0624.02** issued to E.I. DuPont DeNemours & Co., Inc. for their “**DuPont Sentry Glass ®**”, expiring on 01/14/17.
6. Notice of Acceptance No. **11-0624.01** issued to E.I. DuPont DeNemours for “**Butacite PVB Interlayer**”, expiring on 12-11-2016.

F. STATEMENTS

1. Statement letters dated NOV 14, 2013 of compliance to FBC 2010 and “No financial interest”, prepared by PGT, signed & sealed by Lynn Miller, P.E
2. Statement letters dated OCT 11, 2011 of compliance to FBC 2007 & FBC 2010 and “No financial interest”, prepared by PGT, signed & sealed by Lynn Miller, P.E. (Submitted under file #11-0107.04)
3. Letter of lab compliance, part of the above test reports.

G. OTHER

1. This NOA revises #11-1018.19 (# 11-0107.04), expiring April 14, 2016.
2. PGT e-mail dated 02/04/2014 and 11/23/11 by Lynn Miller, P.E. confirming extent of revisions.
3. Test proposal # 10-0767, dated 08/25/10 approved by BCCO.
4. Test verification calculation dated 07/30/10, prepared by PGT, Anthony L. Miller, P.E.

Ishaq I. Chanda

Ishaq I. Chanda, P.E.
Product Control Examiner
NOA No 13-1125.05
Expiration Date: April 14, 2016
Approval Date: February 13, 2014



NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS

1. Manufacturer's die drawings and sections (Submitted under files # 11-1018.19 /#11-0107.04).
2. Drawing No. MD-SGD570-01 Rev B, titled "Vinyl SGD", sheets 1 through 13 of 13, prepared by manufacturer, dated 10/11/11 and last revised on 02/04/14, signed and sealed by Lynn Miller, P.E.
Note: This revision consists of series changes, addition of Tan & Brown coated PVC and non-sill riser water rating use and limitations.

B. TESTS (Submitted under files # 11-1018.19 /#11-0107.04)

1. Test report on
 - 1) Air Infiltration Test, per FBC, TAS 202-94
 - 2) Uniform Static Air Pressure Test, 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 (b) and TAS 202-94along with marked-up drawings and installation diagram of vinyl sliding glass door, prepared by Fenestration Testing Lab, Inc., Test Report No. FTL 6638 (samples A-1 thru A-22), dated 11/19/10, signed and sealed by Jorge A. Causo, P. E.
(The above test report has an addendum letter dated 3-11-11, issued by FTL, signed and sealed by Marlin D. Brinson, P.E. (reviewing Engineer).
2. Additional test report No. FTL 6637 (samples A-1 thru A-5) per TAS 202-94, issued by Fenestration Testing Lab, Inc., dated 12/06/10, signed and sealed by Jorge A. Causo, P. E.

C. CALCULATIONS (Submitted under files # 11-1018.19 /#11-0107.04)

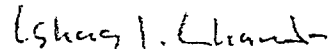
1. Anchor verification calculations and structural analysis, complying with FBC-2007, prepared by PGT, dated 02/16/11 and last revised on 3-11-11, signed and sealed by Anthony L. Miller, P.E.
2. Glazing complies with ASTM E-1300-02 &-04

D. QUALITY ASSURANCE

1. Miami Dade Department of Regulatory and Economic Resources (RER).

E. MATERIAL CERTIFICATIONS

1. Notice of Acceptance No. 10-0420.06 issued to Vision Extrusion Ltd for their "White Rigid PVC", expiring on 09/30/14.
2. Notice of Acceptance No. 11-0902.10 issued to Vision Extrusion Ltd for their "VE 1000 Tan (Non-White) Rigid PVC", expiring on 12/29/16.
3. Notice of Acceptance No. 12-1017.01 issued to Vision Extrusion Ltd for their "Brown Coated (Painted or Laminated) White Rigid PVC", expiring on 09/30/14
4. Test reports No(s). 10-002-792(A), 10-006-10231, 535753-09, per ASTM E-84, ASTM D1929 and ASTM D-635, issued by EXOVA to Vision Extrusion for cellulosic composite material.



Ishaq I. Chanda, P.E.

Product Control Examiner

NOA No 13-1125.05

Expiration Date: April 14, 2016

Approval Date: February 13, 2014



TABLE 8A

1.25" x 3.188" x .265" Alum Tube Mull		Mullion Capacity Table (lbs/ft ²)																			
		Opening Width (for vertically-sparring mullions) or Opening Height (for horizontally-sparring mullions)																			
		50 in		60 in		70 in		80 in		90 in		100 in		120 in		140 in		160 in			
Rectangular Loading		Trap/Hang. Loading		Rectangular Loading		Trap/Hang. Loading		Rectangular Loading		Trap/Hang. Loading		Rectangular Loading		Trap/Hang. Loading		Rectangular Loading		Trap/Hang. Loading			
Mullion Capacity (lbs/ft ²)		Anchor Capacity Required (lbs)		Mullion Capacity (lbs/ft ²)		Anchor Capacity Required (lbs)		Mullion Capacity (lbs/ft ²)		Anchor Capacity Required (lbs)		Mullion Capacity (lbs/ft ²)		Anchor Capacity Required (lbs)		Mullion Capacity (lbs/ft ²)		Anchor Capacity Required (lbs)			
42 in	170.0	620	170.0	435	170.0	744	170.0	478	170.0	868	170.0	508	170.0	992	170.0	519	170.0	1118	170.0	521	
48 in	170.0	708	170.0	524	170.0	850	170.0	564	170.0	992	170.0	630	170.0	1133	170.0	661	170.0	1275	170.0	677	
60, 62.5 in	170.0	747	170.0	563	170.0	898	170.0	631	170.0	1048	170.0	684	170.0	1195	170.0	723	170.0	1345	170.0	747	
54 in	170.0	797	170.0	612	170.0	956	170.0	691	170.0	1110	170.0	754	170.0	1276	170.0	803	170.0	1438	170.0	837	
60 in	170.0	885	170.0	701	170.0	1063	170.0	787	158.9	1168	170.0	878	138.0	1158	170.0	930	123.6	1158	156.8	919	
63 in	170.0	930	170.0	745	160.1	1091	170.0	850	137.2	1091	155.9	882	120.1	1051	142.0	848	100.7	1051	132.3	837	
68 in	167.1	957	170.0	789	139.3	957	151.6	805	119.4	957	134.0	790	104.4	957	121.6	777	92.0	957	112.8	787	
72 in	128.7	804	135.2	688	107.3	804	115.2	684	81.8	804	101.3	671	80.4	804	91.4	660	71.5	804	84.1	650	
78 in	109.4	722	114.4	630	91.2	722	97.2	618	78.2	722	85.3	608	68.4	722	78.7	598	60.8	722	70.3	588	
78 in	101.2	685	105.8	600	84.4	685	89.6	568	72.3	685	78.5	577	63.3	685	70.5	565	56.2	685	64.5	560	
90 in	85.9	515	68.0	457	54.9	515	57.5	449	47.1	515	50.1	441	41.2	515	44.7	434	36.8	515	40.6	428	
96 in	54.3	358	45.8	323	31.8	358	32.6	318	27.2	358	28.4	313	23.8	358	26.2	308	21.2	358	22.7	304	
108 in	38.1	258	32.0	223	21.8	258	22.2	218	17.2	258	17.8	213	13.8	258	15.2	208	11.2	258	12.7	204	
111 in	35.1	238	29.8	208	19.3	238	20.1	201	15.1	238	15.8	203	12.3	238	13.8	195	10.3	238	11.8	198	
120 in	27.8	190	23.0	164	14.8	190	15.2	164	11.8	190	12.2	158	9.8	190	10.8	154	8.4	190	9.8	154	
144 in	16.1	101	13.3	98	8.8	101	9.2	98	6.8	101	7.2	98	5.2	101	5.8	98	4.2	101	4.8	98	

TABLE 8B

Anchor Clip Patterns		Anchor Capacity Table (lbs)														
		2.7k Concrete				Hollow CMU				Filled CMU		PT Wood		Metal		
Anchor Type		3/16" Elco Ultracon		1/4" Elco Ultracon		3/8" Elco Ultracon		5/16" Elco Ultracon		1/4" SS Elco Aggregator		#10 Steel Screw (GS)		#12 Steel Screw (GS)		#12 Steel Screw (GS)
Edge Distance (in)		1"		2-1/2"		1"		2-1/2"		2"		2"		2"		2"
Embedment (in)		1-3/4"		1-3/4"		2"		1-1/4"		1-1/4"		1-1/4"		1-1/4"		1-3/8"
2 Anchors @ 4.75" Min. O.C. / Standard Clip (Fig. 1)		390 lbs	300 lbs	450 lbs	890 lbs	1844 lbs	270 lbs	280 lbs	354 lbs	740 lbs	458 lbs	664 lbs	1182 lbs	326 lbs	420 lbs	560 lbs
4 Anchors @ 1.15" Min. O.C. / Standard Clip (Fig. 2)		480 lbs	700 lbs	N/A	N/A	N/A	N/A	360 lbs	N/A	N/A	N/A	N/A	652 lbs	840 lbs	1120 lbs	
4 Anchors @ 3" Min. O.C. / (2) 2x5 Angle Clips (Fig. 3)		700 lbs	780 lbs	680 lbs	1560 lbs	1698 lbs	640 lbs	660 lbs	N/A	760 lbs	938 lbs	880 lbs	2364 lbs	652 lbs	840 lbs	1120 lbs
4 Anchors @ 0.45" Min. O.C. / U-Clip (Fig. 4)		N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	1432 lbs
1 Anchor / F-Clip (Fig. 5)		195 lbs	195 lbs	225 lbs	445 lbs	822 lbs	135 lbs	140 lbs	177 lbs	370 lbs	234 lbs	332 lbs	591 lbs	163 lbs	210 lbs	260 lbs
2 Anchors @ 1.15" Min. O.C. / F-Clip (Fig. 6)		240 lbs	350 lbs	N/A	N/A	N/A	N/A	190 lbs	N/A	N/A	N/A	N/A	N/A	326 lbs	420 lbs	560 lbs

NOTE: FOR THE OFFSET CLIP, USE THE SAME ANCHOR PATTERN AND ANCHOR VALUES AS THE STANDARD CLIP.

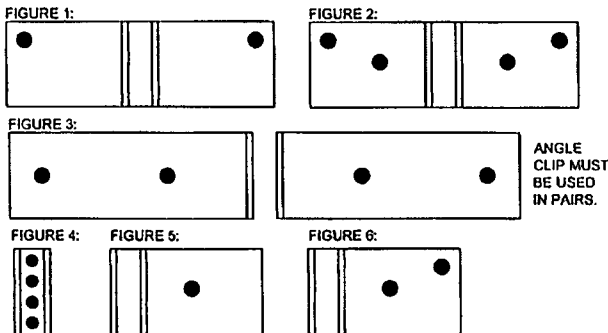
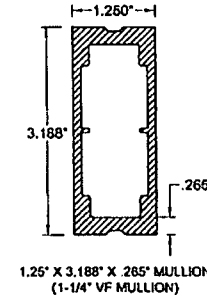


TABLE NOTES:

- SEE SHEET 1 FOR INSTRUCTIONS ON USING THE TABLES AND SHEET 22 FOR INFORMATION ON LOADING. SEE SHEETS 2-4 FOR GENERAL INSTALLATION METHODS.
- LINEAR INTERPOLATION BETWEEN MULL LENGTHS AND/OR OPENING WIDTHS IS ALLOWABLE.
- MULLION AND MULLION CLIPS SHOWN ARE NOT TO SCALE. FOR EXACT DIMENSIONS, SEE SHEETS 18-20. HOLES TO BE DRILLED IN THE FIELD FOLLOWING DIMENSIONAL RESTRICTIONS SHOWN ON SHEETS 18-20. FIGURES SHOW SUGGESTED, APPROXIMATE HOLE LOCATIONS.
- SUBSTRATES: CONCRETE SHALL CONFORM TO ACI 301 SPECIFICATIONS. HOLLOW AND GROUT-FILLED CONCRETE BLOCK UNIT (CMU) SHALL CONFORM TO ASTM C-90. WOOD SHALL BE PRESSURE-TREATED YELLOW SOUTHERN PINE WITH AN SG OF 0.55. ALUMINUM SHALL BE 6083-T5 AND BE A MINIMUM OF .125" THICK. STEEL STUDS TO BE A MINIMUM GRADE 33 AND .045" THICK (18 GAUGE). STRUCTURAL STEEL TO BE AT LEAST .125" THICK AND A36. ALL ANCHORS INTO METAL SHALL EXTEND AT LEAST 3 SCREW THREADS BEYOND THE MATERIAL.



ANCHOR CAPACITY ADJUSTMENT FORMULA:

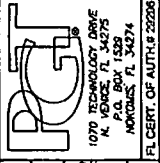
$$(DP_{req}) \times \left(\frac{\text{ANCHOR CAP}_{(from table)}}{\text{MULLION CAP}_{(from table)}} \right) = \text{ANCHOR CAP}_{req}$$

USE THIS FORMULA TO OBTAIN THE "ANCHOR CAPACITY REQUIRED" CORRESPONDING TO AN ACTUAL PRESSURE REQUIREMENT FOR THE OPENING, WHEN IT IS LOWER THAN THE MULLION CAPACITY (FROM THE TABLE) OF THE SELECTED MULLION. IT WILL YIELD A MINIMUM ANCHOR CAPACITY WHICH MAY BE USED TO QUALIFY ADDITIONAL ANCHOR OPTIONS FROM THE ANCHOR CAPACITY TABLE.

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 13-0815-05
 Expiration Date 05/26/2016

By: *[Signature]*
 Miami Dade Product Control

ANTHONY LYNN MILLER
 LICENSE
 No. 58705
 10/15/13
 STATE OF
 FLORIDA
 PROFESSIONAL ENGINEER
 A. LYNN MILLER, P.E.
 FL P.E.# 58705



IMPACT-RESISTANT ALUMINUM TUBE MULLIONS

Description: 1.25 X 3.188 X .265 MULL SPECS

Sheet: 12 of 22

Series: N/A

Drawing No.: 6300JR

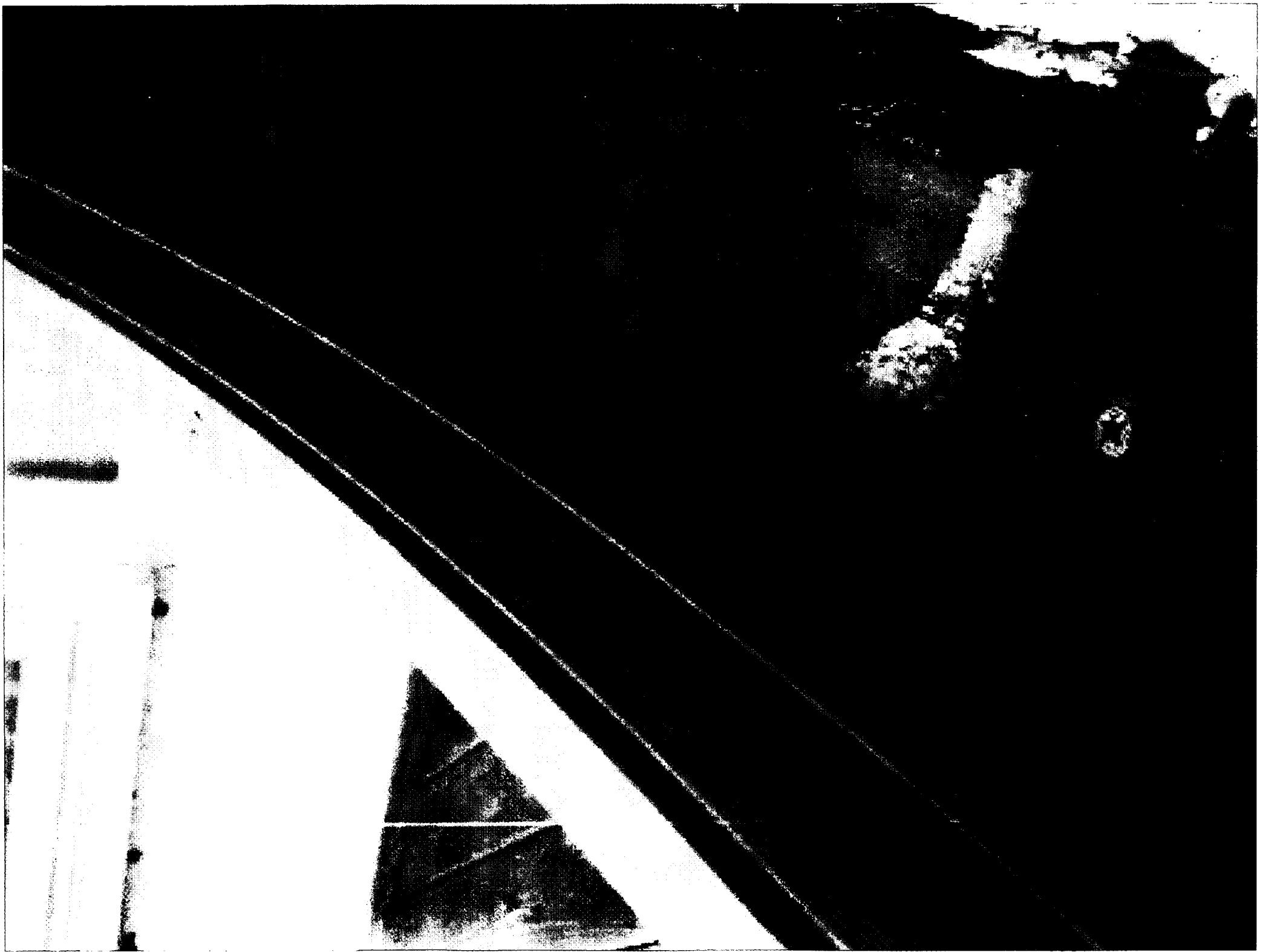
Drawn By: J ROSOWSKI

Checked By: J ROSOWSKI

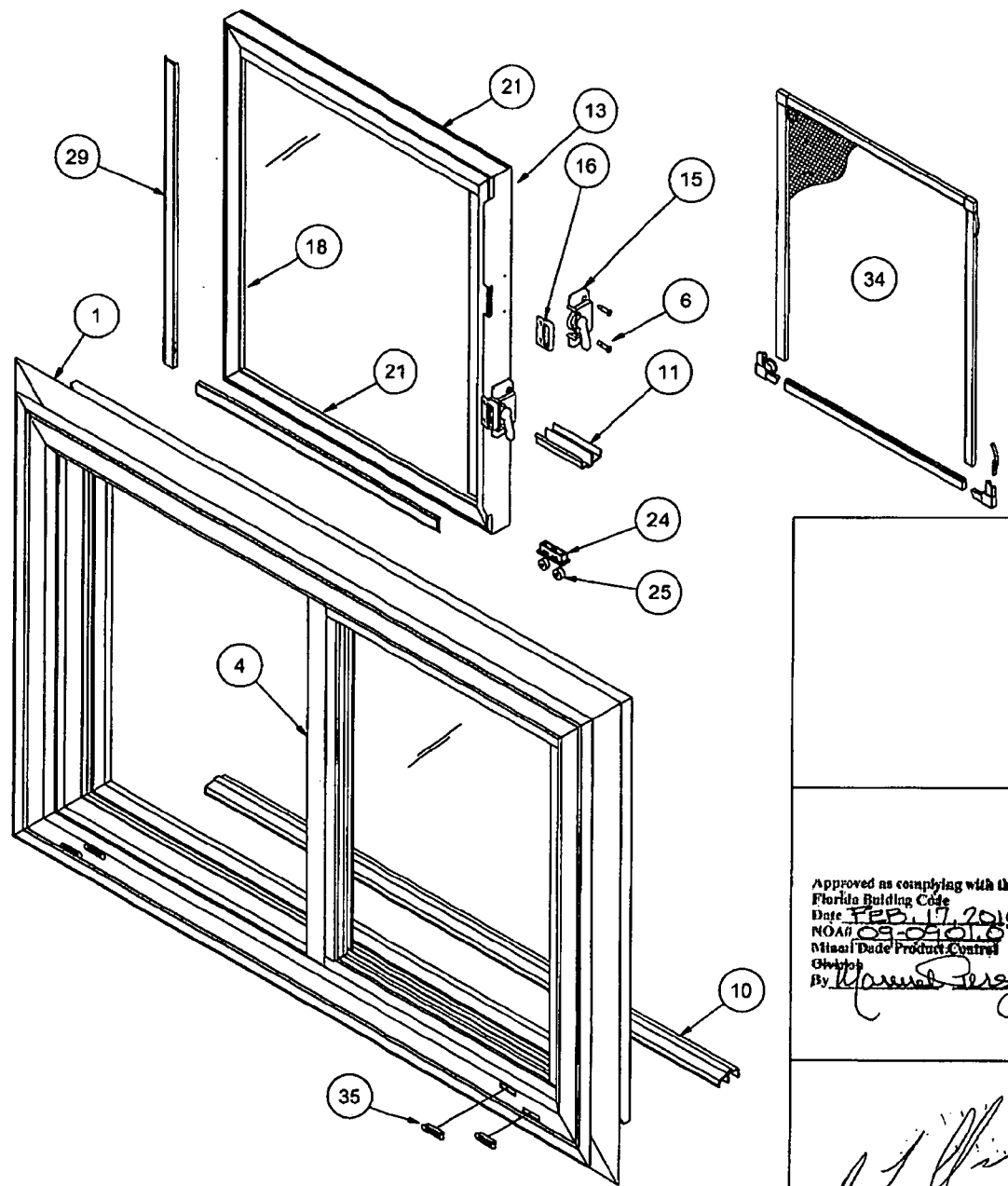
Date: 08/29/11

Revised: 07/15/13

Revised CLIP FIGURES



ITEM	DWG NO.	PART #	DESCRIPTION	QTY
1	5168	65166	FRAME HEAD, SILL AND JAMBS (FIN ONLY)	4
2	5189	65189	FRAME HEAD, SILL AND JAMBS (BOX ONLY)	4
4	5102	65102	FIXED MEETING RAIL	1
5	5123	65123	FIXED MEETING RAIL - ALUMINUM REINF.	1
6		76X1FPAW	6 x 1" FH TECH (CAM LOCK, KEEPER)	4
8		76X312FPA BX	SCR. 8X3 1/2" PP TYPE AB (FIXED MR)	4
9		71669SP	330025 ALUM SCREW SUPPORT PLATES	2
10	5138	65138	ROLLER TRACK	1
11	5138	65138	ANTI LIFT	2
12		71038W	INSTALLATION HOLE PLUGS (BOX ONLY)	VARIES
13	5105	65105	SASH INTERLOCK RAIL	1
14	5114	65114	INTERLOCK RAIL - ALUMINUM REINF.	1
15		76208SLAW	CAM SWEEP LOCKS	2
16		76133SLKW	CAM SWEEP LOCK KEEPER	2
17	1644	61644W	WSTP. .187 x .270 FIN SEAL	1
18	5137	65137	SASH SIDE RAIL	1
19	5114	65114	SIDE RAIL - ALUMINUM REINF.	1
20	1644	61644W	WSTP. .187 x .270 FIN SEAL	1
21	5105	65105	SASH TOP & BOTTOM RAIL	2
22	5114	65114	TOP & BOTTOM RAIL - ALUMINUM REINF.	2
23	1644	61644W	WSTP. .187 x .270 FIN SEAL	2
24	225-1	42112HD	ROLLER HOUSING	2
25		78RWHL2	BRASS WHEELS	4
26		7012FW	9 x 1/2 FH PHIL #2PT S/D/S	VARIES
27		7638FW	7 x 3/8 FH PHIL #2PT S/D/S	VARIES
28A		65WVGK716	7/16" SUPER-SPACER	-
28B		65WVGK38	3/8" SUPER-SPACER	-
29A	5112	65112	GLAZING BEAD, 1-LITE	-
32A			7/8" LAM I.G. GLASS: 1/8" TEMPERED OUTBOARD - AIRSPACE - 1/8" ANNEALED - .090 PVB INTERLAYER - 1/8" ANNEALED (5/16" LAM)	-
32B			7/8" LAM I.G. GLASS: 1/8" ANNEALED OUTBOARD - AIRSPACE - 1/8" ANNEALED - .090 PVB INTERLAYER - 1/8" ANNEALED (5/16" LAM)	-
34			SCREEN	1
35			WEEP COVERS	4
37			SETTING BLOCK	-
39			SILICONE DOW 1199	-
40				



Approved as complying with the
 Florida Building Code
 Date FEB 17, 2010
 NOA# 09-090107
 Miami Dade Product Control
 Glazier
 By *[Signature]*

[Signature]
 1/21/10
 Robert L. Clark, P.E.
 PE #38712
 Structural

Revised By: J.R.	Date: 01/18/10	Revision: A	Removed 3/4" glass and boading from BOM.
Revised By:	Date:	Revision:	
Revised By:	Date:	Revision:	
Drawn By: J.R.	Date: 08/12/09	Checked By:	Date:

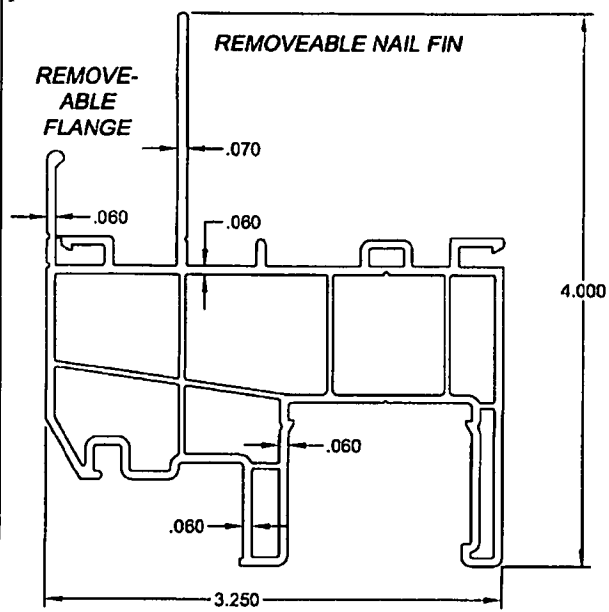
1070 TECHNOLOGY DRIVE
 NOKOMIS, FL 34275
 P.O. BOX 1620
 NOKOMIS, FL 34274



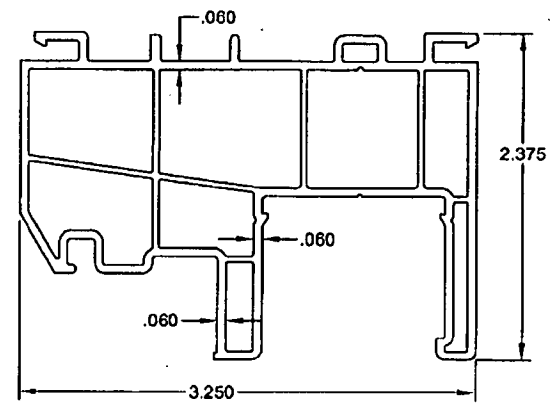
Description: BOM & EXPLODED VIEW			
Title: Vinyl Horiz. Roller Window, Impact-resistant			
Series/Model: HR610	Scale: NTS	Sheet: 6 of 10	Drawing No: 5191-2
			Rev: A



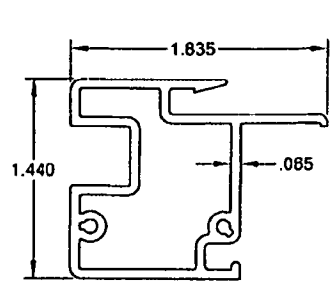
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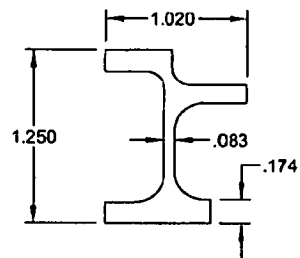
1 **I.F. FRAME**
DWG #5116
RIGID PVC



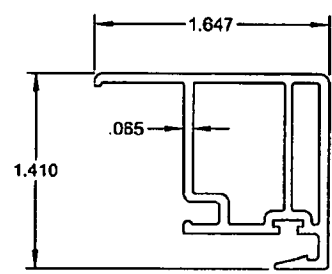
2 **BOX FRAME**
DWG #5189
RIGID PVC



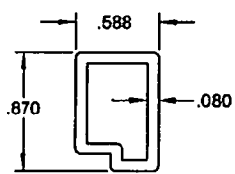
4 **FIXED MEETING RAIL**
DWG #5102
RIGID PVC



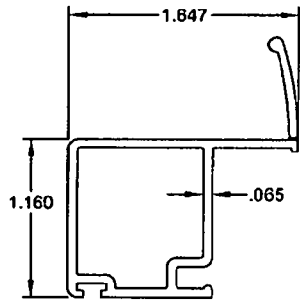
5 **FIXED MEETING RAIL REINFORCEMENT**
DWG #5123
AI 6005-T6



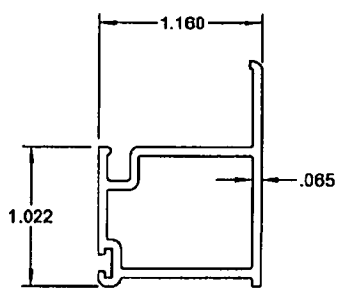
13 **SASH INTERLOCK RAIL**
DWG #5105
RIGID PVC



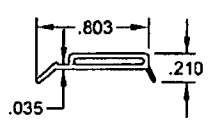
14 19 22 **SASH INTERLOCK RAIL REINFORCEMENT**
DWG #5114
AI 6063-T6



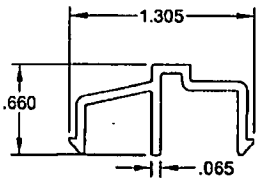
18 **SASH SIDE RAIL**
DWG #65137
RIGID PVC



21 **SASH TOP/BOTTOM RAIL**
DWG #65106
RIGID PVC



29A **I.G. BEAD**
DWG #5112
DUAL PVC



10 **ROLLER TRACK /ANTI LIFT**
DWG #5138
RIGID PVC

Approved as complying with the Florida Building Code
Date: FEB. 17, 2010
NOA# 02-090107
Miami Dade Product Control
Division
By: *Manuel Perez*

[Signature]
1/21/10

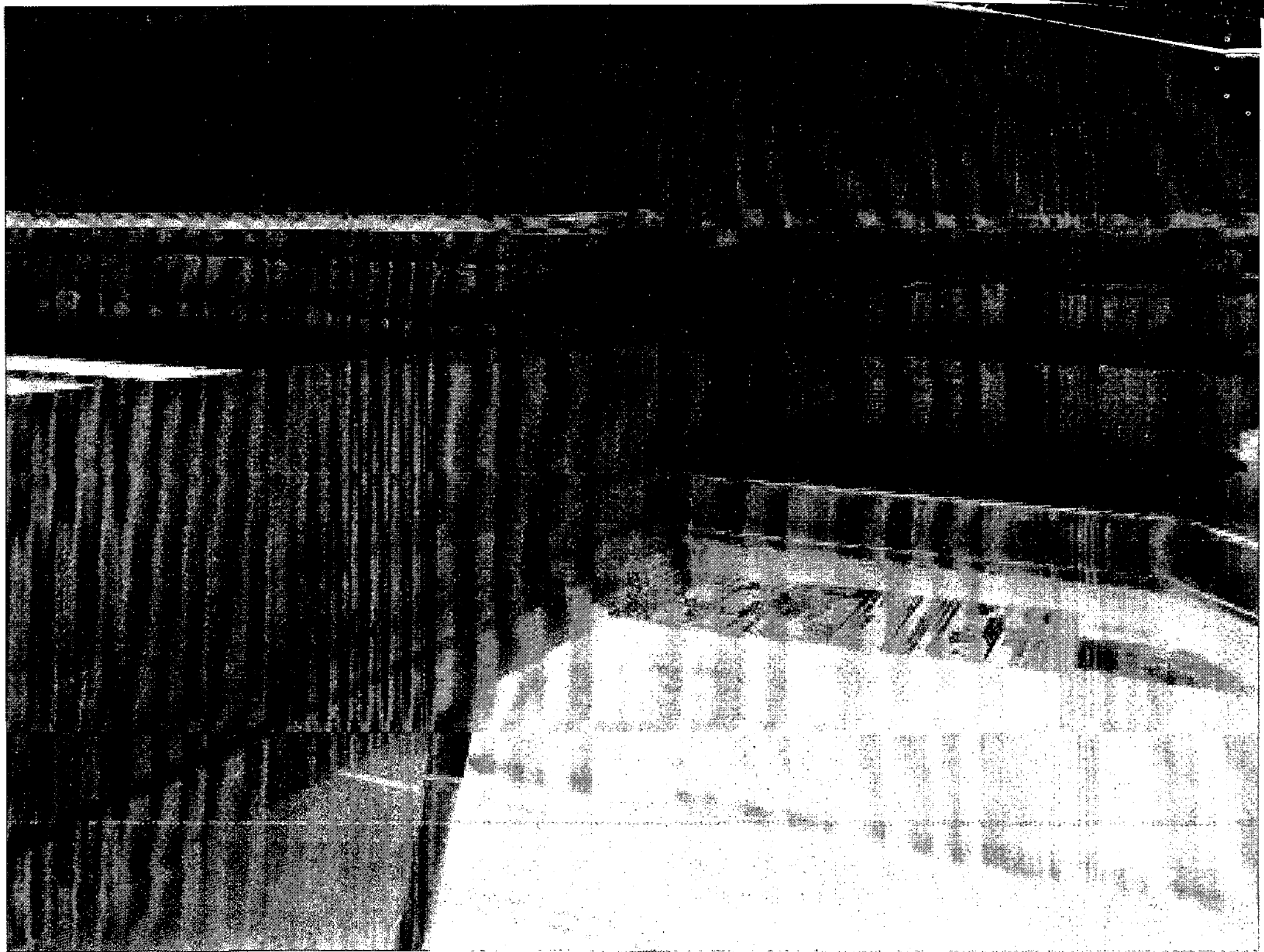
Robert L. Clark, P.E.
PE #39712
Structural

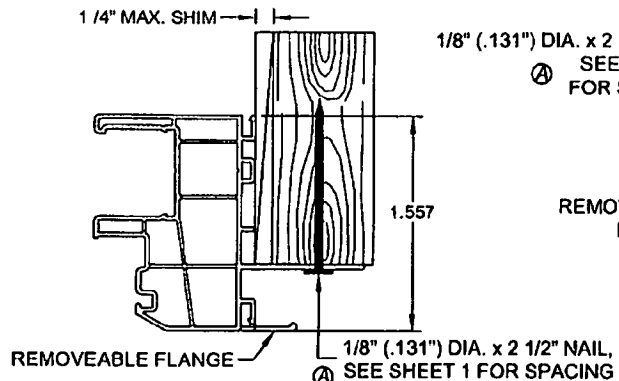
Revised By: J.R.	Date: 01/18/10	Revisions: A	Added wall thickness to all extrusions, removed beading for 3/4" glass.
Revised By:	Date:	Revisions:	
Revised By:	Date:	Revisions:	
Drawn By: J.R.	Date: 08/12/09	Checked By:	Date:

1070 TECHNOLOGY DRIVE
NOKOMIS, FL 34278
P.O. BOX 1629
NOKOMIS, FL 34274

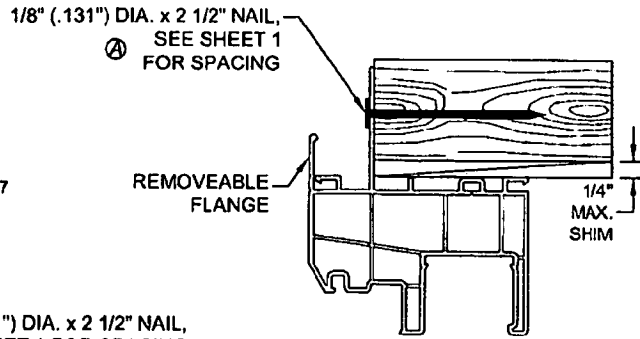


Description: EXTRUSION CROSS SECTIONS			
Title: Vinyl Horiz. Roller Window, Impact-resistant			
Series/Code: HR510	Scale: 1:1	Sheet: 7 of 10	Drawing No.: 5191-2
			Rev: A



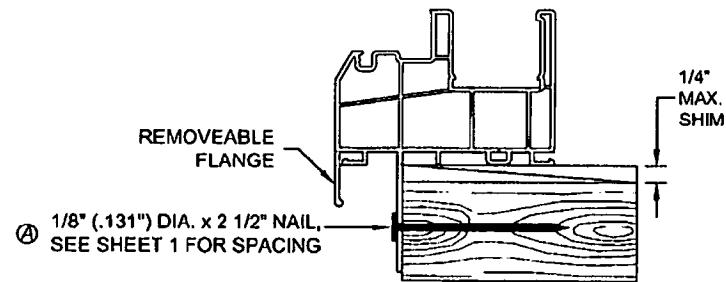


**JAMB W/ NAIL FIN
THRU NAIL FIN INTO WOOD FRAMING**



**HEAD W/ NAIL FIN
THRU NAIL FIN INTO WOOD FRAMING**

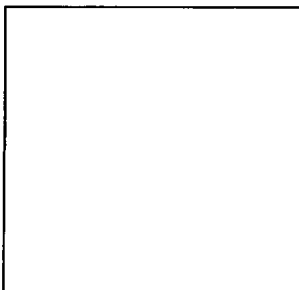
NOTE: INSTALLATION TO THE SUBSTRATE OF 1x OR 2x WOOD BUCKS TO BE ENGINEERED BY OTHERS



**SILL W/ NAIL FIN
THRU NAIL FIN INTO WOOD FRAMING**

NOTES:

- FOR INTEGRAL FIN APPLICATIONS IN MIAMI-DADE COUNTY, USE 1/8" (.131") DIA. x 2 1/2" NAIL.
- 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 CAN BE 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.
- FOR ATTACHMENT TO ALUMINUM: THE MATERIAL SHALL BE A MINIMUM STRENGTH OF 6083-T5 AND A MINIMUM OF 1/8" THICK. THE ALUMINUM STRUCTURAL MEMBER SHALL BE OF A SIZE TO PROVIDE FULL SUPPORT TO THE WINDOW FRAME SIMILAR TO THAT SHOWN IN THESE DETAILS FOR 2x WOOD BUCKS. THE ANCHOR SHALL BE A #10 SHEET METAL SCREW WITH FULL ENGAGEMENT INTO THE ALUMINUM. IF THESE CRITERIA ARE MET, THE RESPECTIVE DESIGN PRESSURES AND ANCHORAGE SPACING FOR ULTRACONS MAY BE USED.

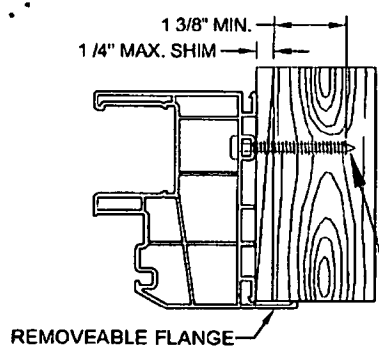


Approved as complying with the Florida Building Code
 Date: FEB 17 2010
 NOA#: 09-090107
 Miami Dade Product Control Division
 By: Manuel Perez

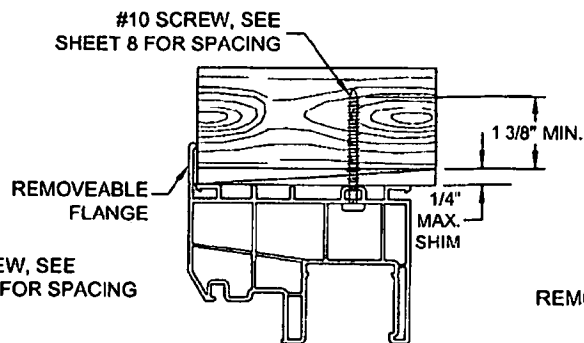
Robert L. Clark
 Robert L. Clark, P.E.
 PE #39712
 Structural

Revised By: J.R.	Date: 01/18/10	Revisions: A	Corrected nail length to 2-1/2", added dia. in decimal.	1070 TECHNOLOGY DRIVE NOKOMIS, FL 34275		Description: INSTALLATION DETAILS - INT. FIN FRAME			
Revised By:	Date:	Revisions:				Title: Vinyl Horiz. Roller Window, Impact-resistant			
Revised By:	Date:	Revisions:				Series/Model: HRS10	Scale: 1:2	Sheet: 10 of 10	Drawing No. 5191-2
Drawn By: J.R.	Date: 08/12/09	Checked By:	Date:	P.O. BOX 1529 NOKOMIS, FL 34274					

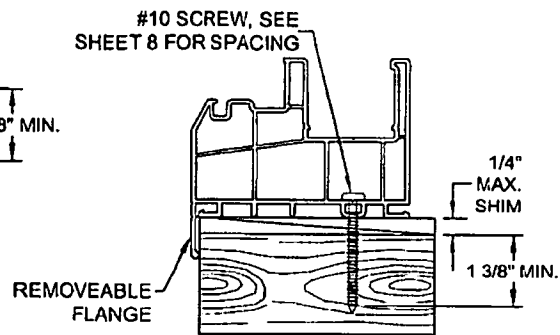




**JAMB W/ BOX FRAME
THROUGH FRAME INTO 2x WOOD**

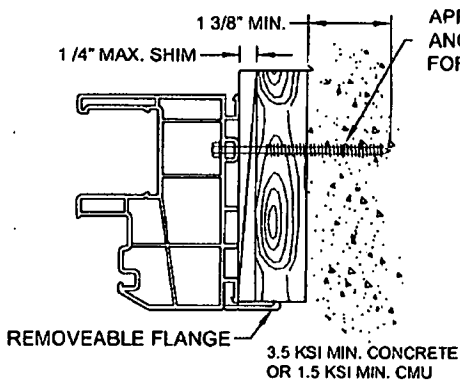


**HEAD W/ BOX FRAME
THROUGH FRAME INTO 2x WOOD**

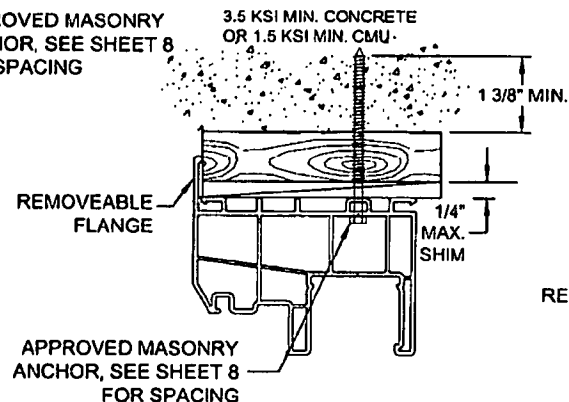


**SILL W/ BOX FRAME
THROUGH FRAME INTO 2x WOOD**

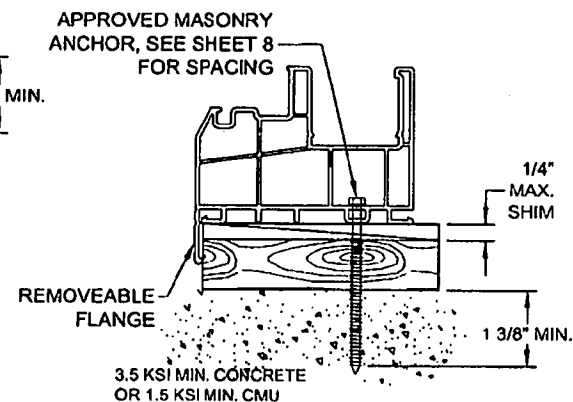
NOTE: INSTALLATION TO THE SUBSTRATE OF 1x OR 2x WOOD BUCKS TO BE ENGINEERED BY OTHERS



**JAMB W/ BOX FRAME
THROUGH FRAME INTO CONCRETE
1x BUCK OPTIONAL**



**HEAD W/ BOX FRAME
THROUGH FRAME INTO CONCRETE
1x BUCK OPTIONAL**



**SILL W/ BOX FRAME
THROUGH FRAME INTO CONCRETE
1x BUCK OPTIONAL**

NOTES:

- FOR CONCRETE APPLICATIONS IN MIAMI-DADE COUNTY, USE ONLY MIAMI-DADE COUNTY APPROVED 3/16" ULTRACON, EMBEDDED 1 3/8" MIN., DISTANCE FROM ANCHOR TO CONCRETE EDGE IS 1" MINIMUM.
- FOR WOOD APPLICATIONS IN MIAMI-DADE COUNTY, USE #10 STEEL SCREW, EMBEDDED 1 3/8" MIN.
- 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 CAN BE 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.
- FOR ATTACHMENT TO ALUMINUM: THE MATERIAL SHALL BE A MINIMUM STRENGTH OF 6063-T5 AND A MINIMUM OF 1/8" THICK. THE ALUMINUM STRUCTURAL MEMBER SHALL BE OF A SIZE TO PROVIDE FULL SUPPORT TO THE WINDOW FRAME SIMILAR TO THAT SHOWN IN THESE DETAILS FOR 2x WOOD BUCKS. THE ANCHOR SHALL BE A #10 SHEET METAL SCREW WITH FULL ENGAGEMENT INTO THE ALUMINUM. IF THESE CRITERIA ARE MET, THE RESPECTIVE DESIGN PRESSURES AND ANCHORAGE SPACING FOR ULTRACONS MAY BE USED.

Approved as complying with the Florida Building Code
Date FEB 17 2010
NOA# 08-096107
Miami Dade Product Control
By *Manuel*

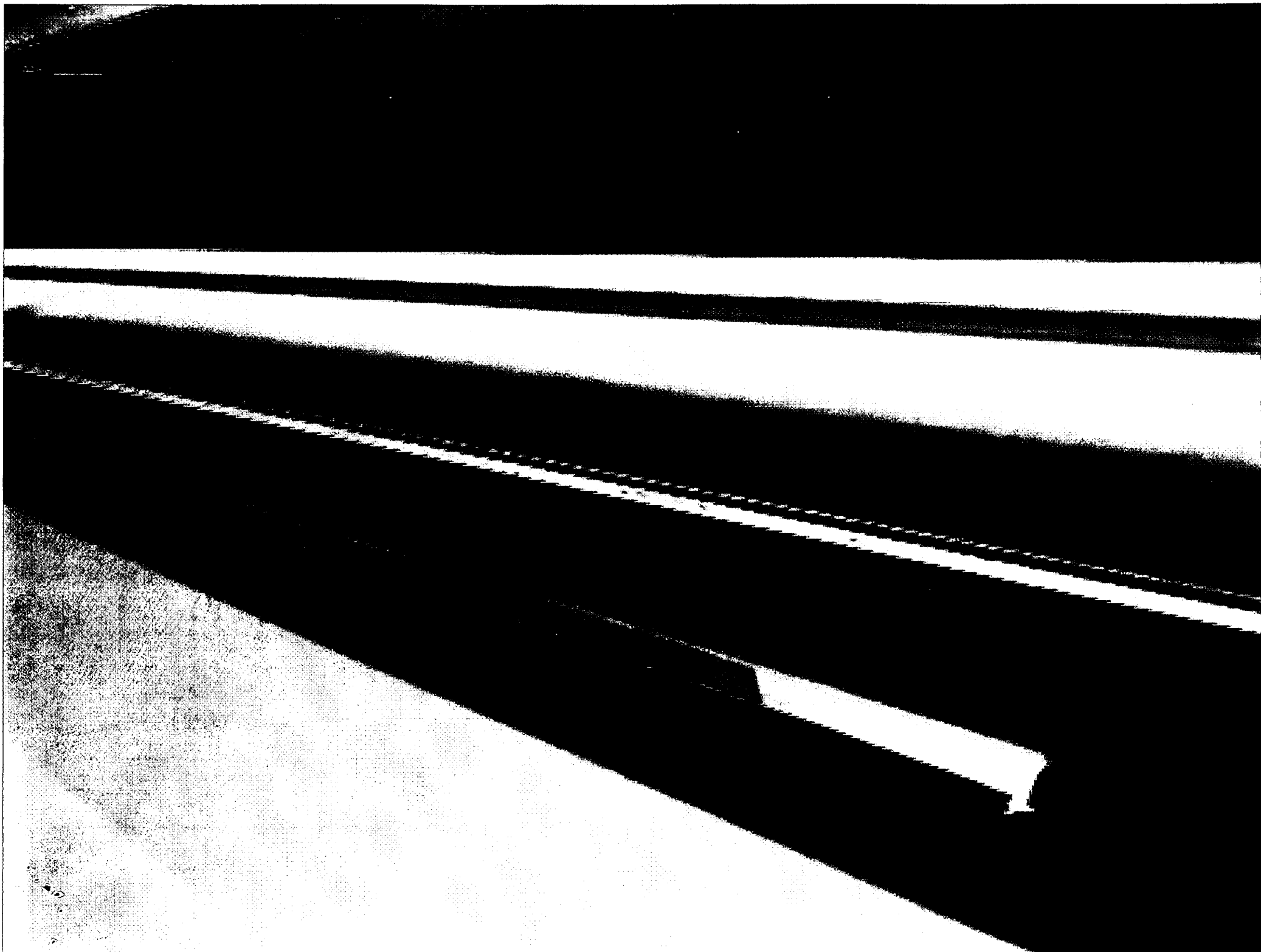
Robert L. Clark
1/21/10
Robert L. Clark, P.E.
PE #39712
Structural

Revised By: J.R.	Date: 01/18/10	Revisions: A	No changes this sheet.
Revised By:	Date:	Revisions:	
Revised By:	Date:	Revisions:	
Drawn By: J.R.	Date: 08/12/09	Checked By:	Date:

1070 TECHNOLOGY DRIVE
NOKOMIS, FL 34275
P.O. BOX 1529
NOKOMIS, FL 34274



Description: INSTALLATION DETAILS-BOX/FLANGE FRAME			
Title: Vinyl Horiz. Roller Window, Impact-resistant			
Series/Model: HR510	Scale: 1:2	Sheet: 9 of 10	Drawing No. 5191-2
			Rev: A



TRM 11

560

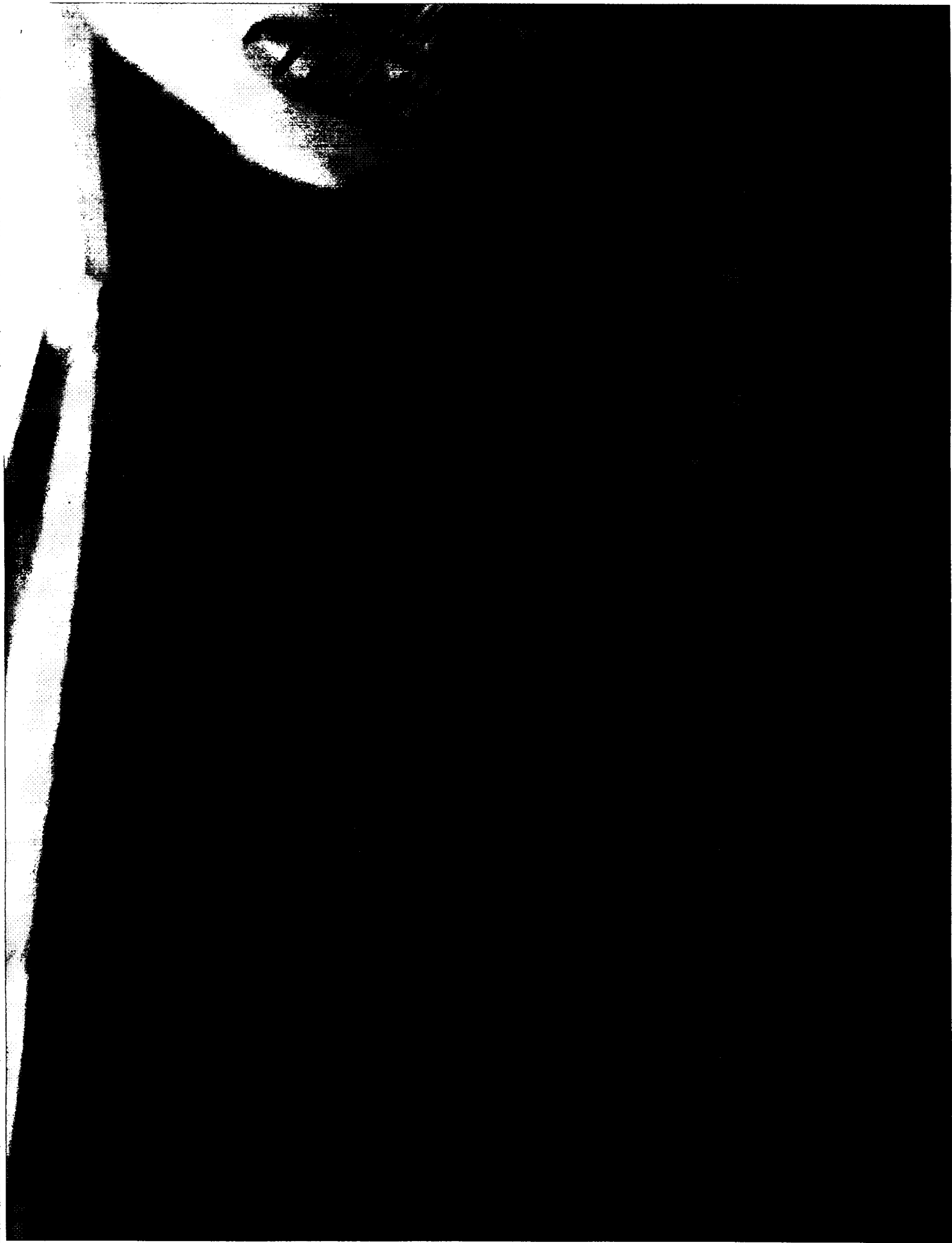






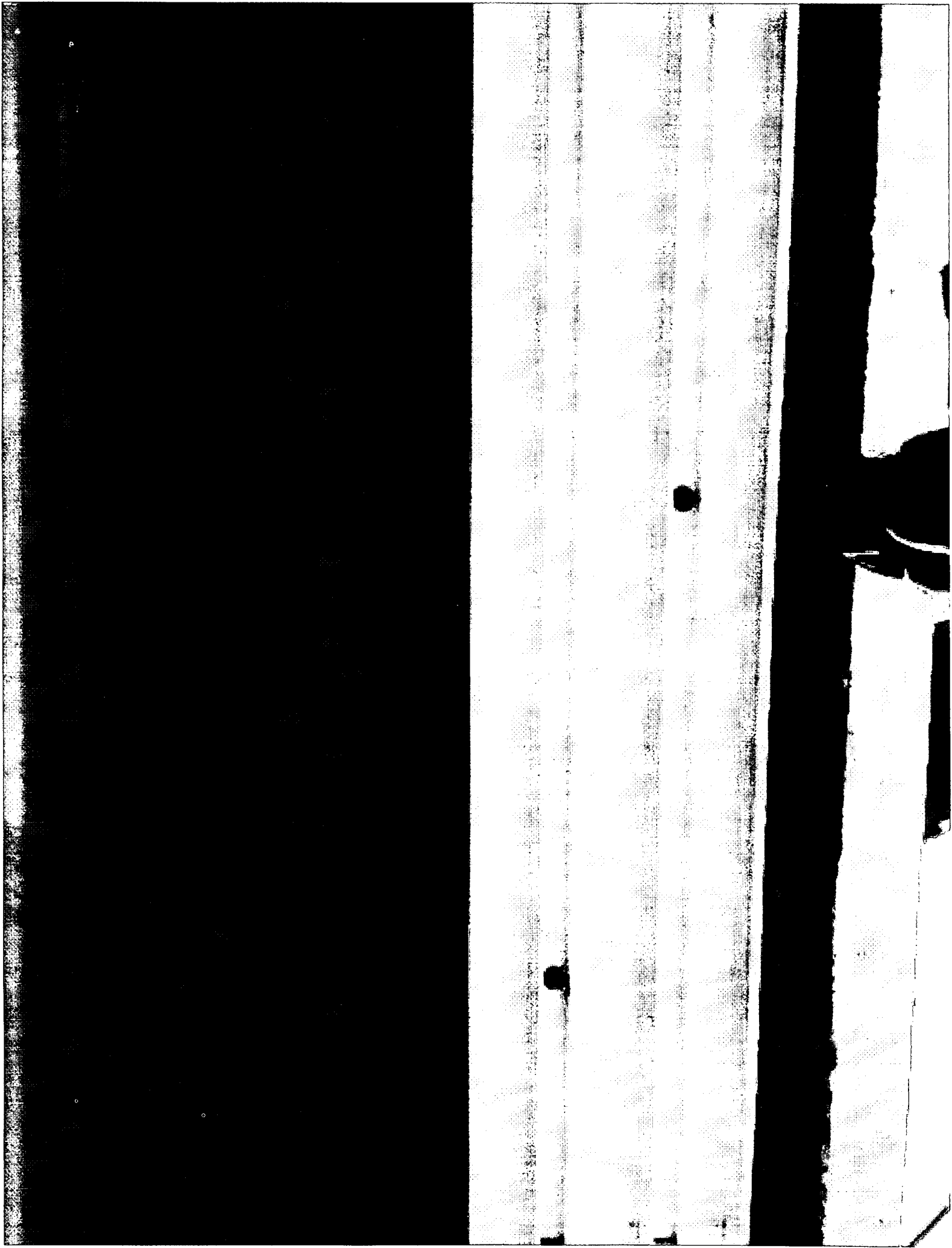






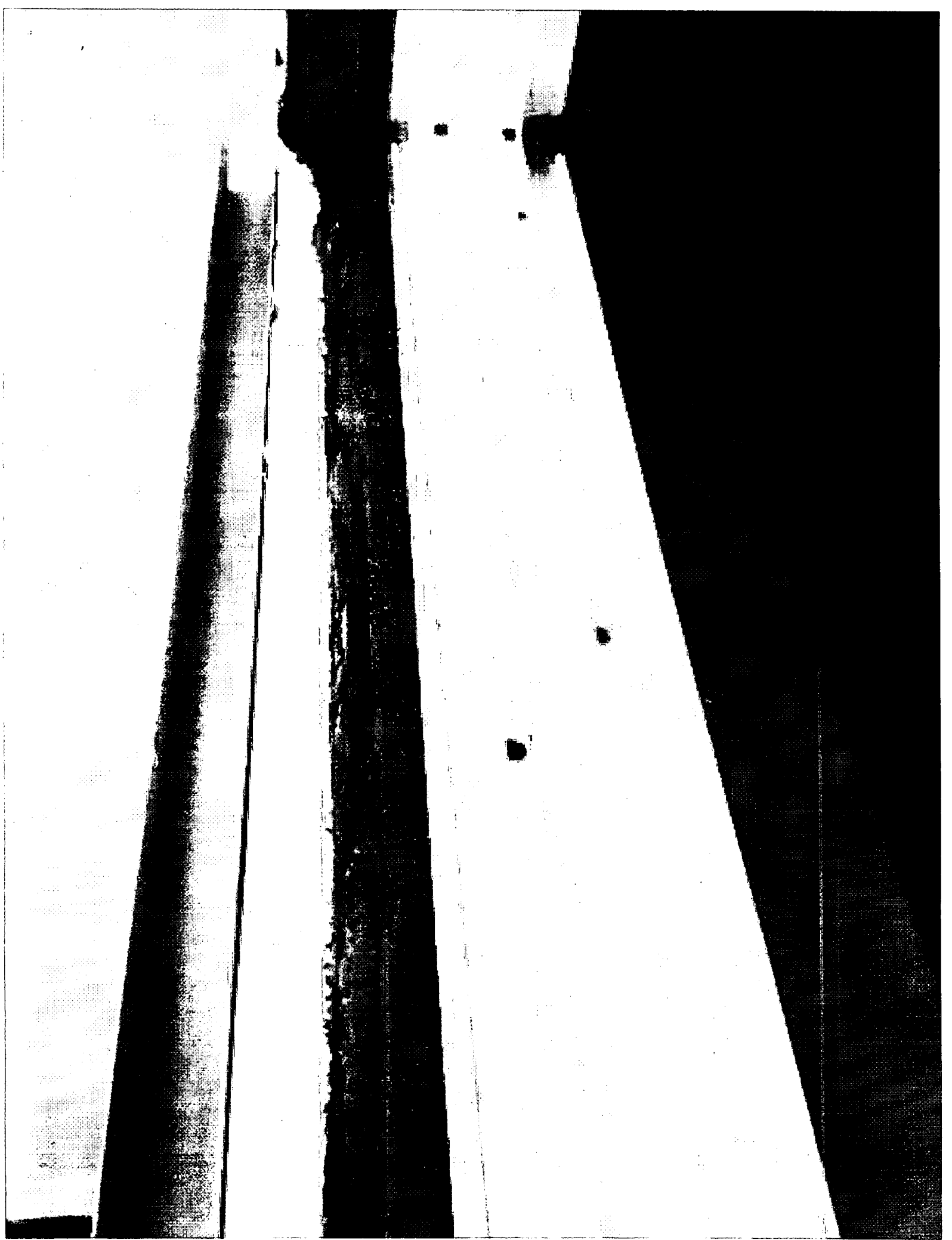


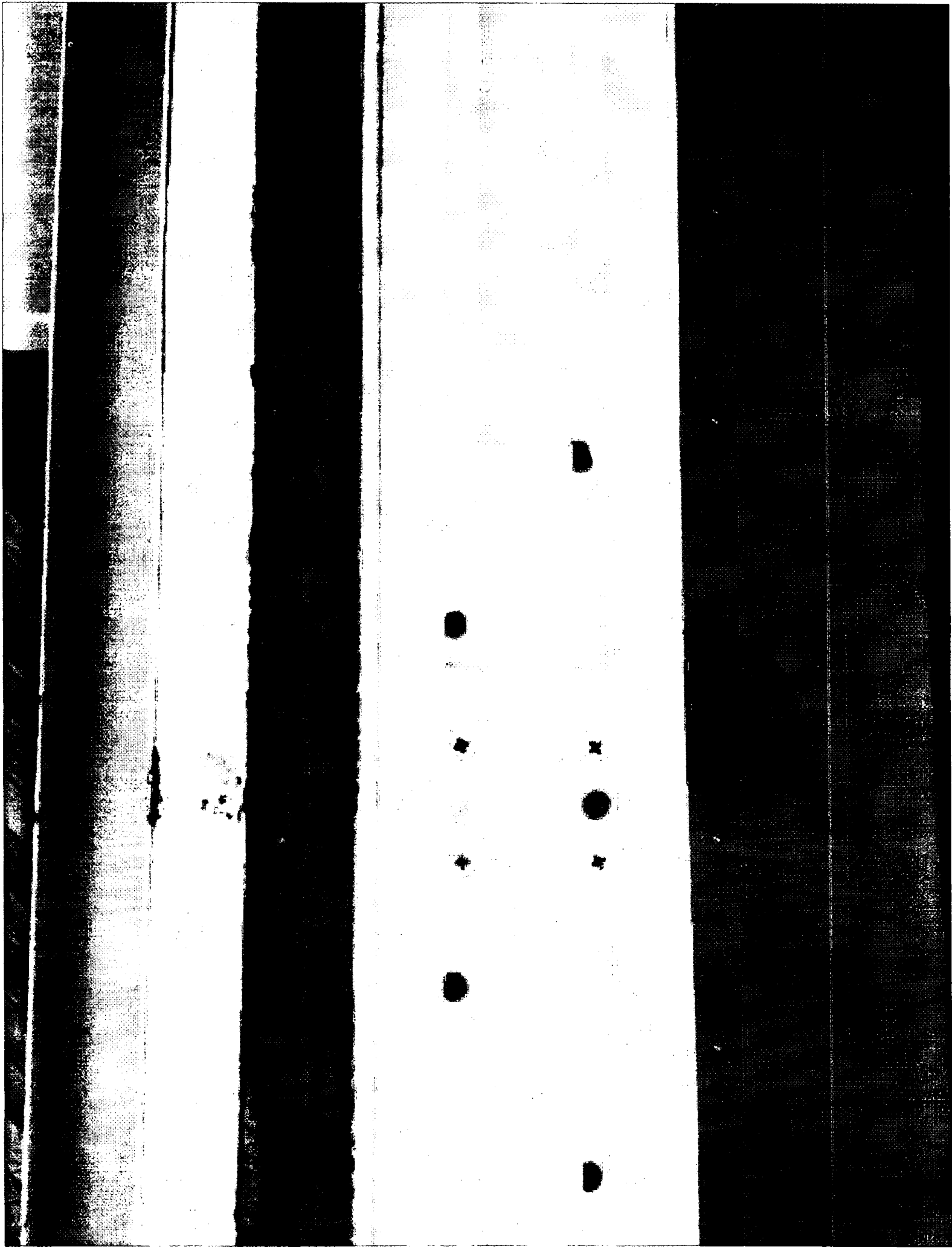


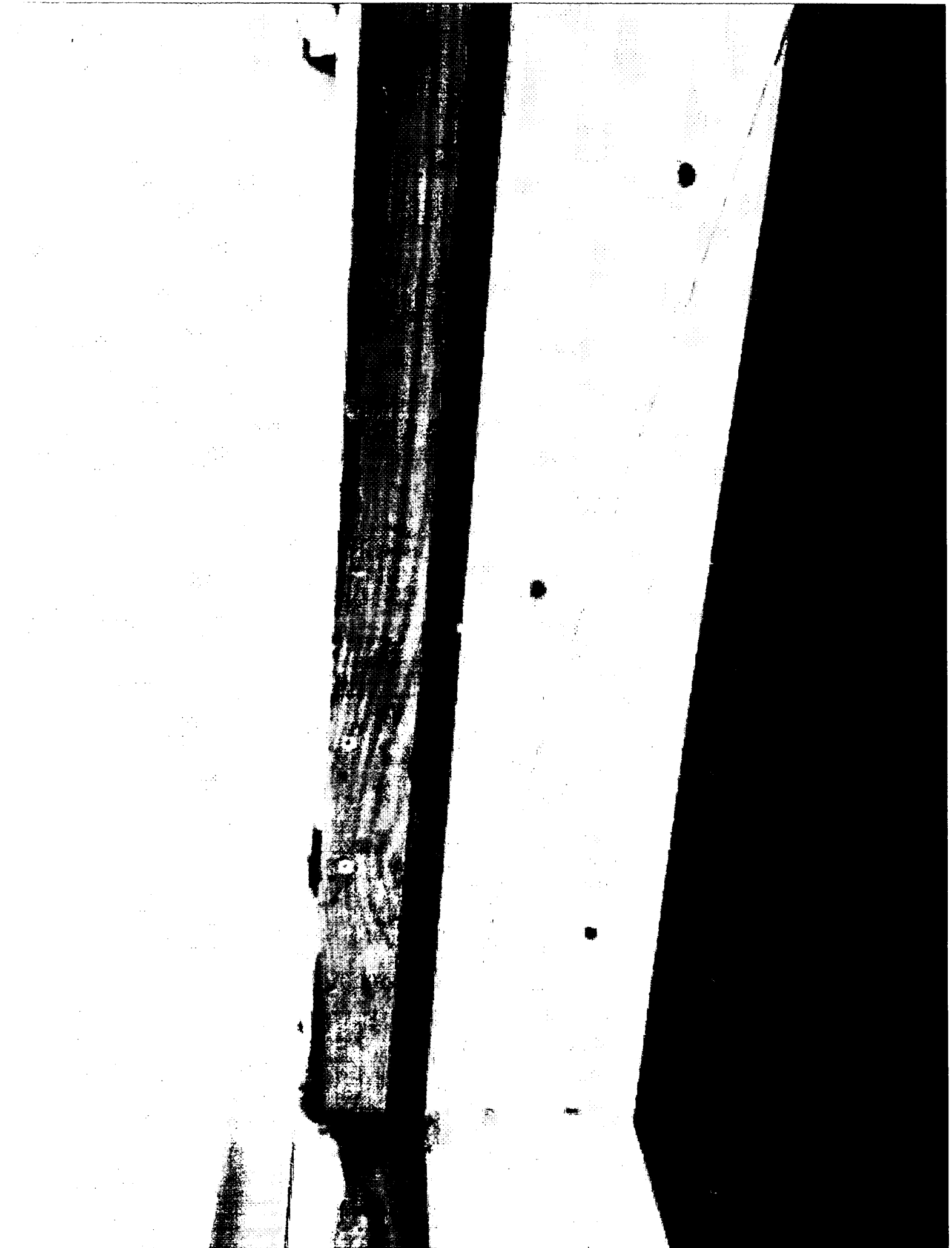


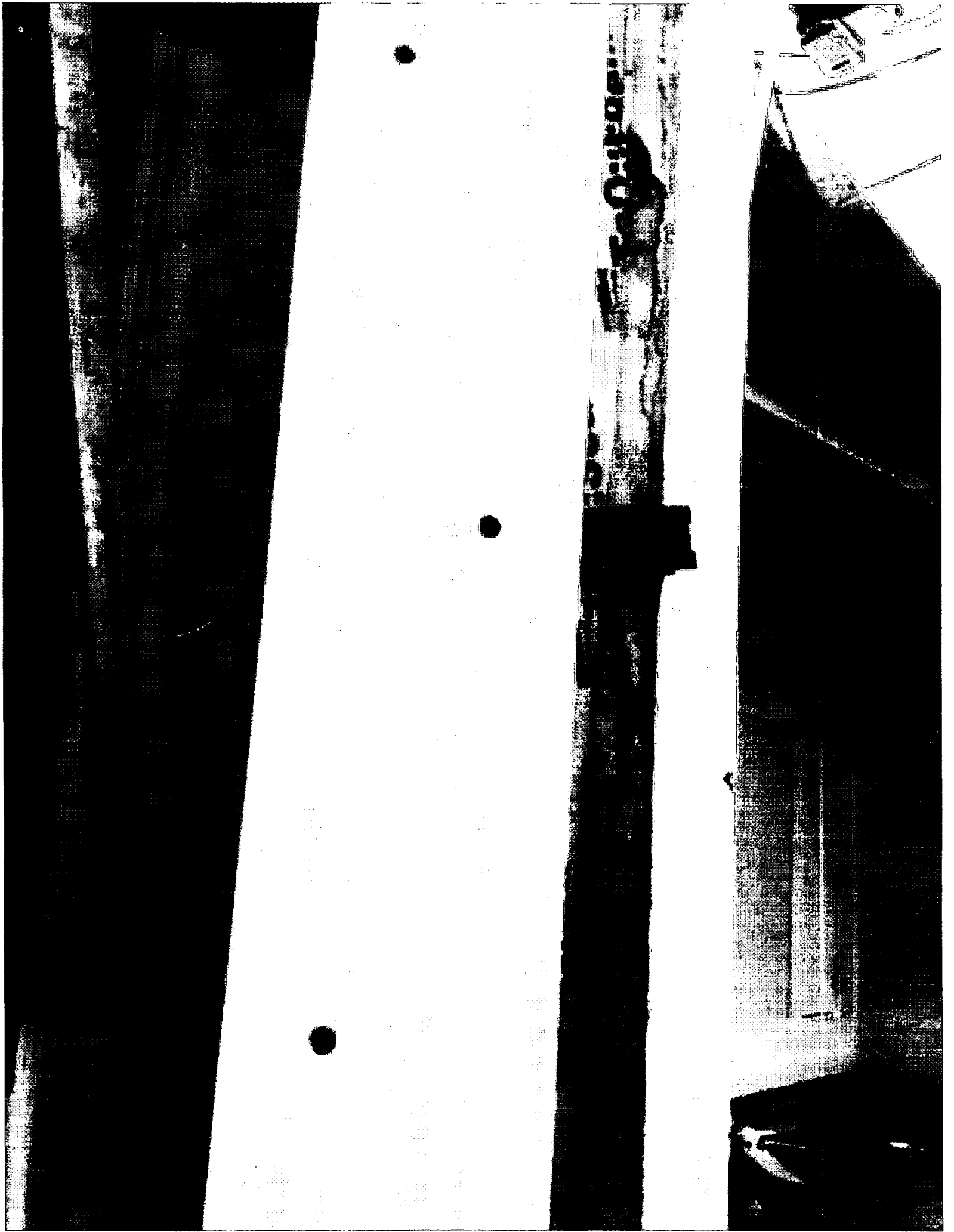




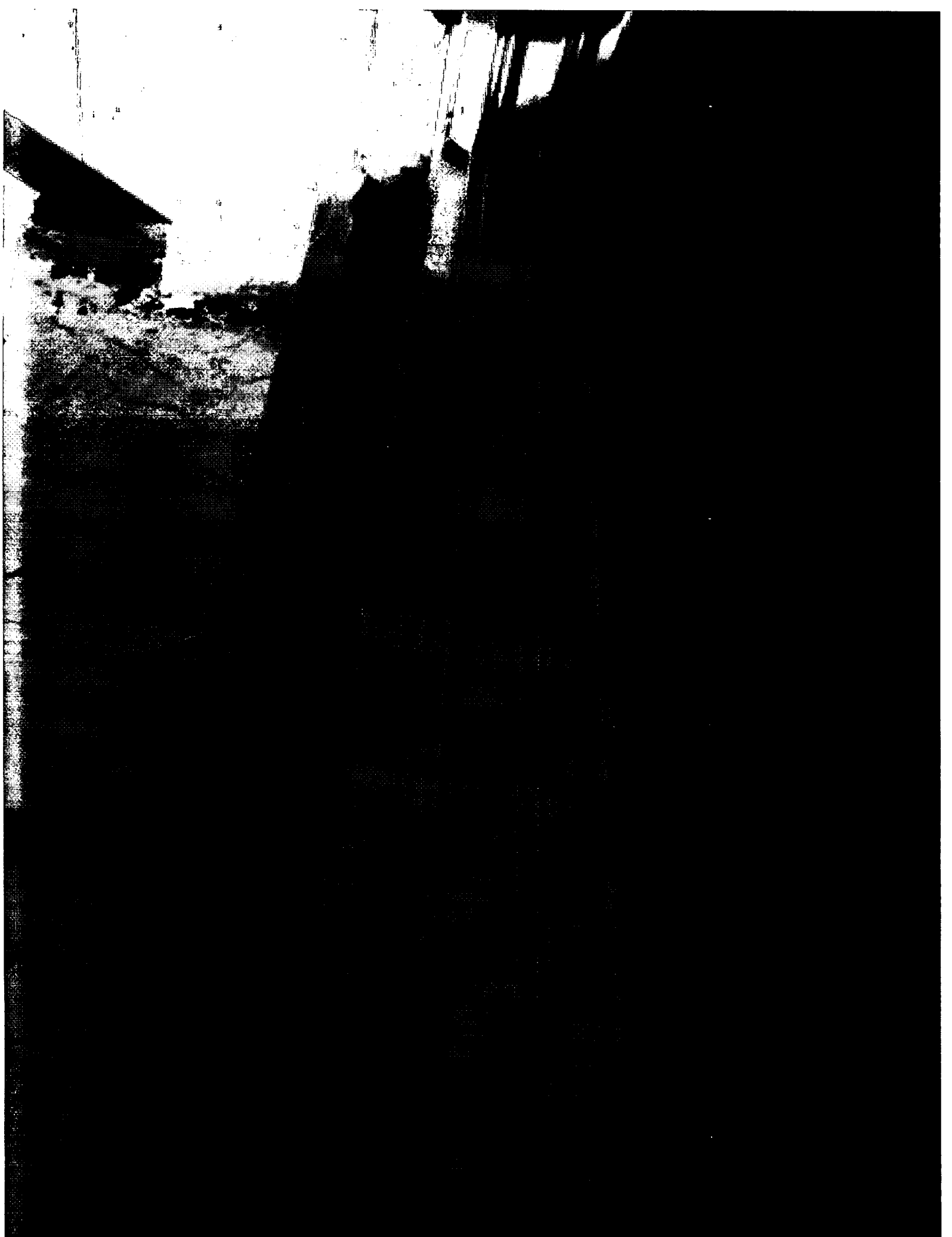














THE SHAFFER GROUP, INC.

2440 SE FEDERAL HWY (SUITE 110)
STUART, FL 34997-1795
PH: 772.220.4990

06/01/15

To: TOWN OF SEWALL'S POINT
1 S. SEWALL'S POINT ROAD
SEWALL'S POINT, FLORIDA 34996
ATT'N: JOHN R. ADAMS C.B.O.

FWP

RE: TRUITT RESIDENCE @
39 S. RIVER ROAD
MASTER BATH CHANGES

PERMIT: # 11241

John,

At the Contractor's request we have visited the jobsite and observed the changes requested in the master bath area:

Windows:

Windows in the shower & toilet room have been removed and new 12" high windows to be installed (all new windows to be impact rated). Infill under the new windows to be solid concrete with horizontal #4 rebars doweled into existing concrete columns on each side. Rebars placed 6" from top & bottom and spaced approx. 24" apart.

The bay window sill to be raised approx. 9" with concrete with (1)- #4 rebar doweled into existing concrete columns at each side and vertical #4 x 8" dowels into existing concrete sill @ 16" o.c. a 2" P.T. spacer to be inserted at each end of new sill.

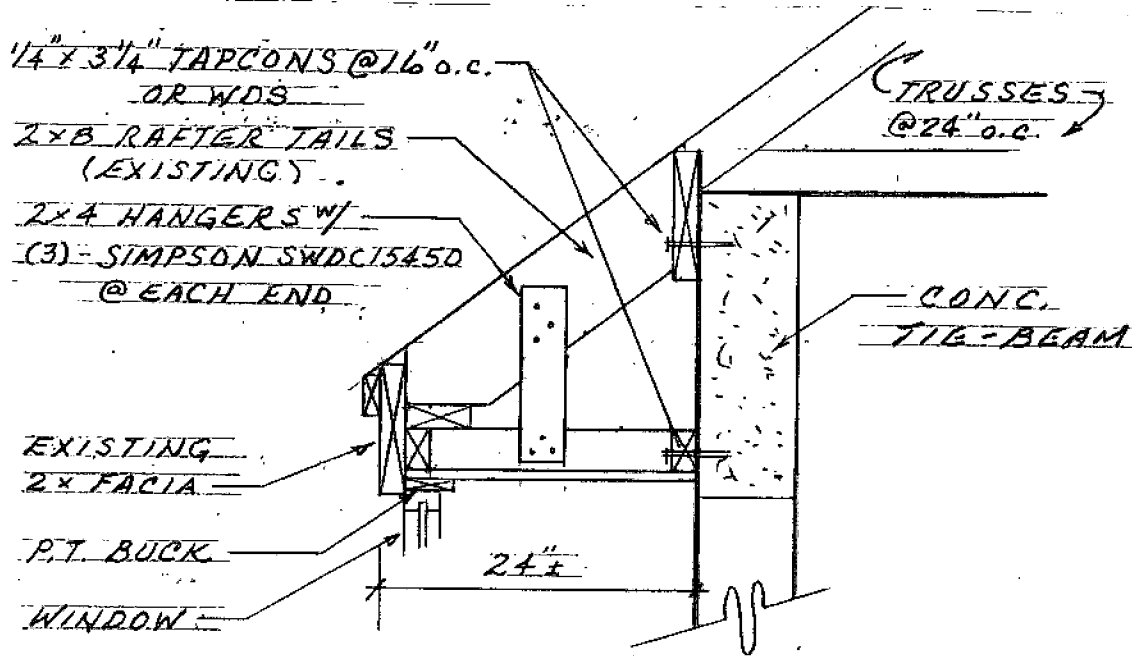
Use 1"x 4" bucks (min.) on all openings, install windows with ¼" tapcons (min. 1½" concrete embed) fill all holes in frame. Rebar dowels to have 4" (min.) epoxy embed.

Recessed shower:

The existing shower recess to be filled with concrete with (2) #4 rebar one way & (3) rebars the other way, approx. 6" below surface of slab. A fiberglass cast in place shower pan to be installed per mfg specs.

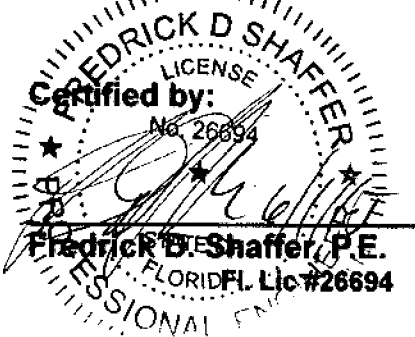
Roof over Bay window:

In order to align the window header heights the roof overhang structure over the bay window was modified.



FRAMING DETAIL

We hereby certify that these changes are in substantial compliance with the 2010 FBC and ASCE 7-10.

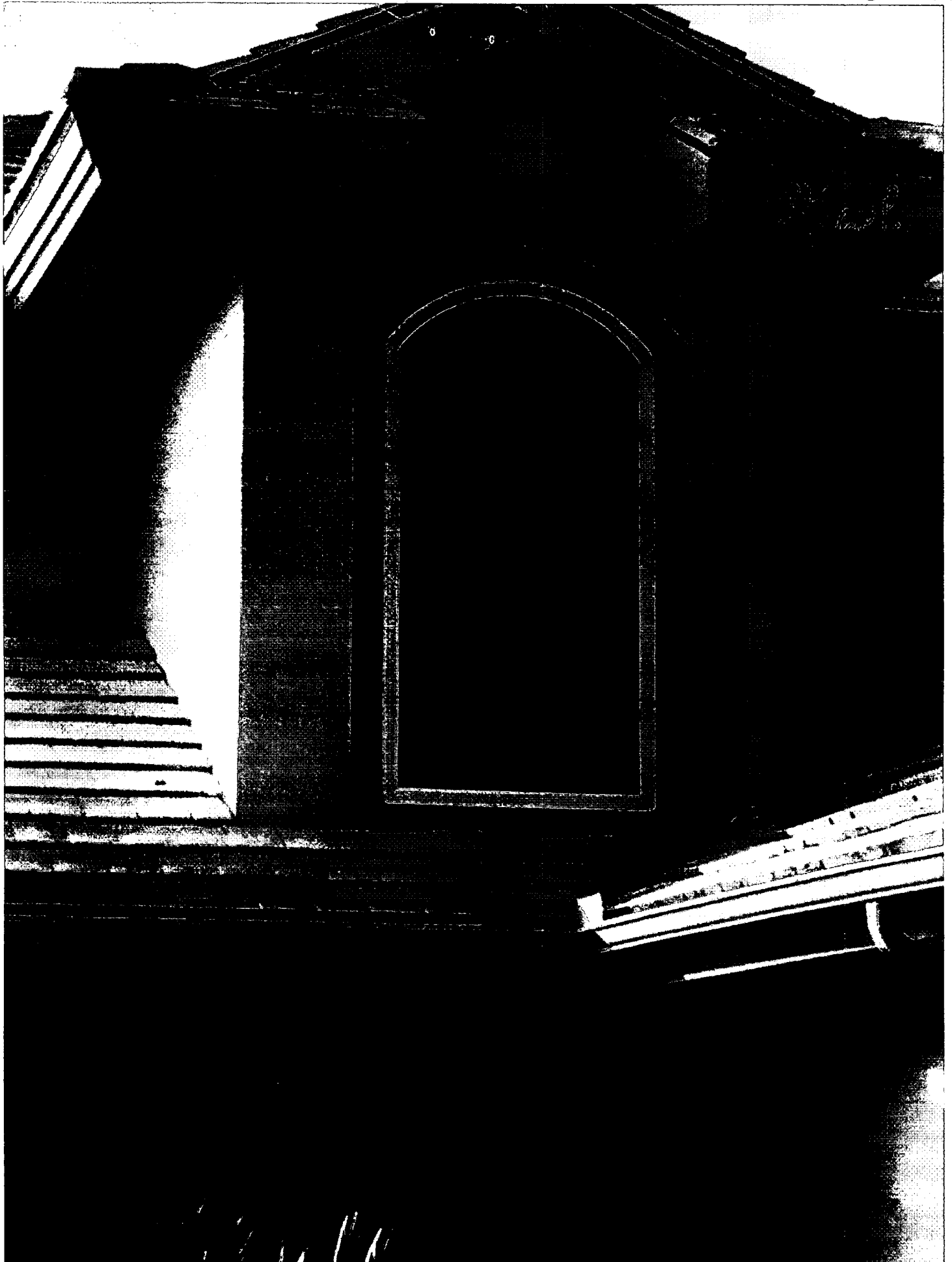


Inspected by:

Richard A. Jemison, BSCE
Fl. G.C. Lic # CGCA 09308

Permit # 11241

TRANSOM WINDOW



10/10/10

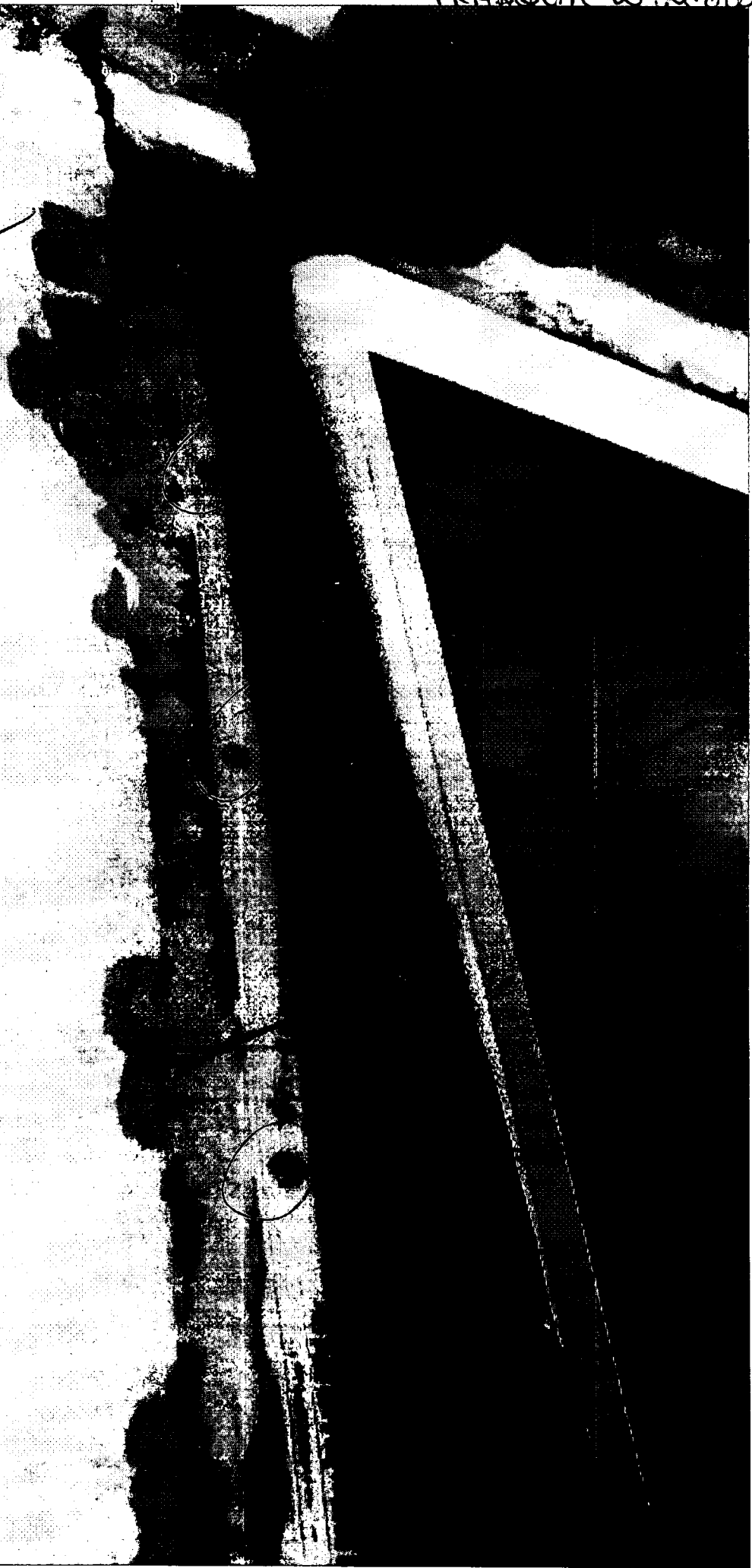
10/10/10
30 S. 2nd St.
Squaw Pt.
P.O. Box 1111
Squaw Pt. 96355

Permit # 11241

TRANSOM WINDOW

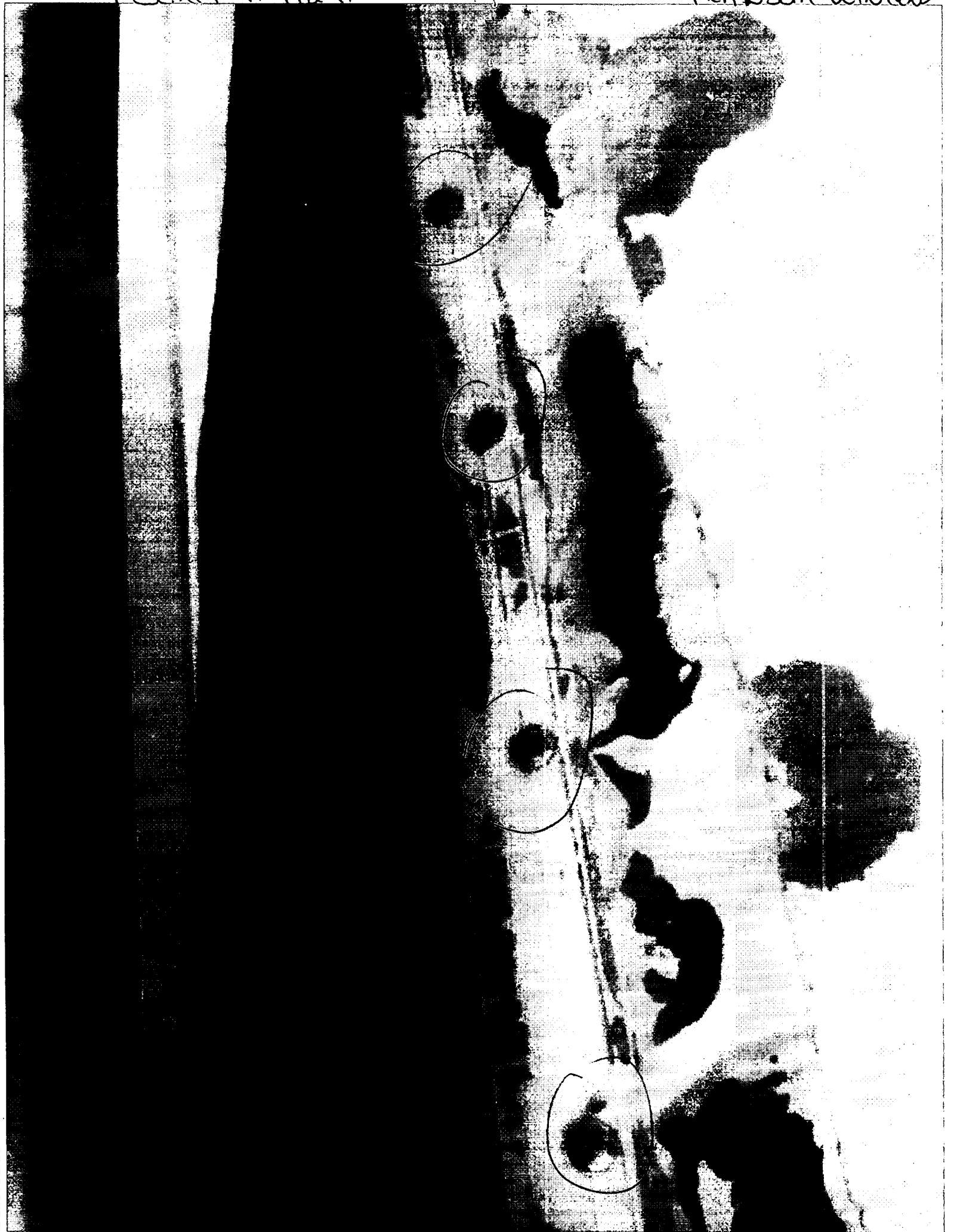
All screws
#10 x 3" stainless steel

Brace mending
COC 061180



Permit # 11241

TRAWSON Window



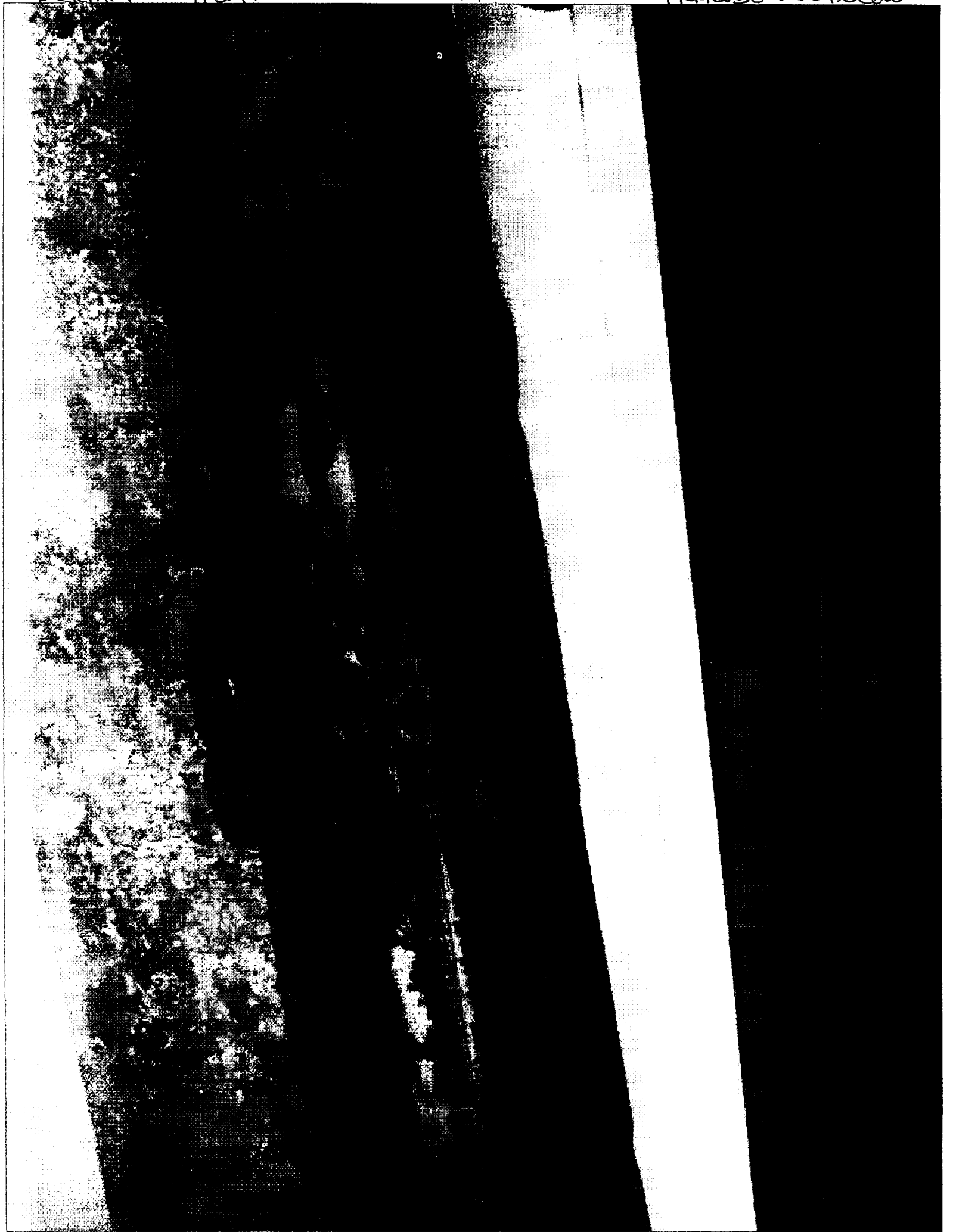
Permit # 11241

TRANSON window



Permit # 11241

TRAWSON window



TOWN OF SEWALL'S POINT

Building Department – Inspection Log

Date of Inspection Mon Tue Wed Thur Fri 6/1/15 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11236	Kaplan			
	11 River Crest Ct	Roof final	PASS	CLOSE
	JA Taylor Roofing			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11201	Truitt	Underground		
Am requested	39 S River Rd	Plumbing	PASS	
	Ken Wendell Gen Contract.			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11146	Batson			
	3 Palmetto	Insulation	PASS	
	O/B			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11269	Diaz	Final		
B15-000021	15 Palm Road	Garage Door	PASS	CLOSE
	D+D Garage Door			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
Tree	Janson	Tree		
	132 S River Road	Removal	OK	
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALL'S POINT

Building Department – Inspection Log

Date of Inspection Mon Tue Wed Thur Fri 8/10/15 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
B15-0000 90	Sharfi 73 N Sewalls Point Rd Team Parks	Underground Plumbing	PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
B15-0000 07	Whalen 9 Knowles Rd Duren Roofing	Roof Final	PASS	CLOSE INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11191	Whalen 9 Knowles Rd ~ THE Z GROUP?	Framing Electrical Rough	FAIL	NEED NEW PLANS INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11241	Truitt 39 S River Rd Ken Wendell Contractors	Plumbing Mechanical Electric Rough	PASS PASS PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
	ELDEN 110 S. Services Rd e/b	P. PLUMB P. EECT.	> PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

500

Permit # _____

Date Issued _____

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

Owner Truit Address 39 S. River Rd Phone _____

Contractor Applark Tree Expert Co Address Willow Grove, Pa Phone 407/285-2610

Number of trees to be removed(list kinds of trees) 1 Cabbage Palm, 1 Vinygar Tree

5 Tongue-pal Trees, all marked w/ orange flagging
Number of trees to be relocated within 30 days(no fee)(list kinds of trees):

N/A

Number of trees to be replaced within 30 days(list kinds of trees):

N/A

Permit Fee \$ _____ (25.00 for first tree plus 10.00 for each additional tree - not exceed \$100.00)

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

Plans approved as submitted _____ Plans approved as marked _____

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

Signature of applicant [Signature] (FPL) Date submitted 7-6-94

Approved by Building Inspector [Signature] Date 7-6-94

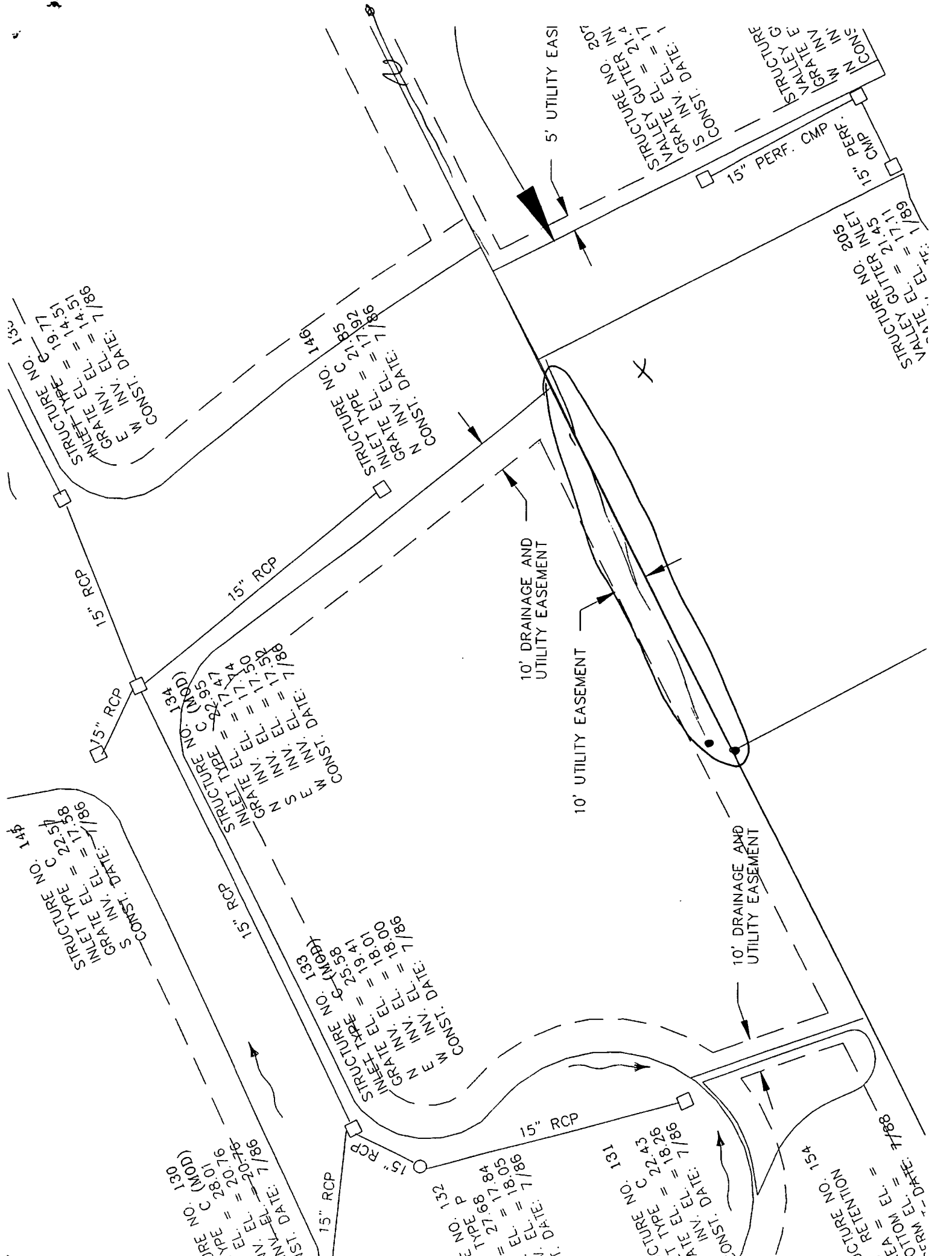
Approved by Building Commissioner _____ Date _____

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 PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

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

The listed trees pose a threat to the electric facilities as well as the property owner at this location.



STRUCTURE NO. 134
INLET TYPE C (MOD)
N INLET EL. = 17.44
S INLET EL. = 17.50
W INLET EL. = 17.50
CONST. DATE: 7/88

STRUCTURE NO. 133
INLET TYPE C (MOD)
N INLET EL. = 19.41
S INLET EL. = 19.58
W INLET EL. = 18.01
CONST. DATE: 7/88

STRUCTURE NO. 132
INLET TYPE P
N INLET EL. = 17.84
S INLET EL. = 18.05
W INLET EL. = 17.68
CONST. DATE: 7/88

STRUCTURE NO. 131
INLET TYPE C
N INLET EL. = 22.26
S INLET EL. = 18.26
W INLET EL. = 20.76
CONST. DATE: 7/88

STRUCTURE NO. 139
INLET TYPE C
N INLET EL. = 25.58
S INLET EL. = 19.41
W INLET EL. = 18.00
CONST. DATE: 7/88

STRUCTURE NO. 140
INLET TYPE C (MOD)
N INLET EL. = 17.44
S INLET EL. = 17.50
W INLET EL. = 17.50
CONST. DATE: 7/88

STRUCTURE NO. 141
INLET TYPE C
N INLET EL. = 21.85
S INLET EL. = 17.76
W INLET EL. = 17.76
CONST. DATE: 7/88

STRUCTURE NO. 142
INLET TYPE G
N INLET EL. = 14.51
S INLET EL. = 19.77
W INLET EL. = 14.51
CONST. DATE: 7/88

STRUCTURE NO. 143
INLET TYPE G
N INLET EL. = 21.45
S INLET EL. = 17.11
W INLET EL. = 17.11
CONST. DATE: 7/89

STRUCTURE NO. 207
INLET TYPE G
N INLET EL. = 21.4
S INLET EL. = 17.4
W INLET EL. = 17.4
CONST. DATE: 1

STRUCTURE NO. 154
RETENTION
CONST. DATE: 7/88

STRUCTURE NO. 153
INLET TYPE C
N INLET EL. = 22.26
S INLET EL. = 18.26
W INLET EL. = 20.76
CONST. DATE: 7/88

STRUCTURE NO. 146
INLET TYPE C
N INLET EL. = 21.85
S INLET EL. = 17.76
W INLET EL. = 17.76
CONST. DATE: 7/88

STRUCTURE NO. 205
INLET TYPE G
N INLET EL. = 21.45
S INLET EL. = 17.11
W INLET EL. = 17.11
CONST. DATE: 7/89

STRUCTURE NO. 154
RETENTION
CONST. DATE: 7/88

STRUCTURE NO. 153
INLET TYPE C
N INLET EL. = 22.26
S INLET EL. = 18.26
W INLET EL. = 20.76
CONST. DATE: 7/88

STRUCTURE NO. 146
INLET TYPE C
N INLET EL. = 21.85
S INLET EL. = 17.76
W INLET EL. = 17.76
CONST. DATE: 7/88

STRUCTURE NO. 205
INLET TYPE G
N INLET EL. = 21.45
S INLET EL. = 17.11
W INLET EL. = 17.11
CONST. DATE: 7/89



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



Since 1990,
Sewall's Point
has proudly been
designated a
"Tree City USA"

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

WORK PERMITTED FROM 8:00 AM TO 5:00 PM – NO SUNDAYS

Owner JAMES TRUITT Address 395 RIVER RD STUART Phone 772 2830901

Contractor KEN WENDELYG Address PO BOX 688 STUART Phone 772 2631176

No. of Trees REMOVE 4 Species: CABBAGE PALM Caliper @ 4' above soil 12 (inches) Height 25-35 (ft.)

No. of Trees RELOCATE 2 Species: Dwarf Robellini Caliper @ 4' above soil (inches) Height 14 (ft.)

No. of Trees REPLACE 4 Species: CABBAGE PALM Caliper @ 4' above soil 12 (inches) Height 25-35 (ft.)

REPLACED OR RELOCATED TREES MUST BE INSPECTED WITHIN 30 DAYS OF PERMIT ISSUANCE

ALL PROHIBITED SPECIES AND VEGETATIVE WASTE MUST BE REMOVED FROM PROPERTY

Reason for tree removal /relocation SEPTIC DRAINFIELD REPLACEMENT

Signature of Property Owner [Signature] Date 4-13-15

This space for Official Use only:

Approved by Building Official: [Signature] Date 4-22-15 Fee: 15⁰⁰

BUILDING INSPECTOR NOTES: SEE SITE PLAN IN FILE

Minimum Tree Requirements Met On Property

Prohibited Species Identified for Removal

SKETCH (Show location of tree(s) to be removed/relocated; dimensions of lot; location of structures):

PLEASE SEE ATTACHED SITE PLAN



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

OK

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

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

Owner James P. Travis Jr Address [Redacted] Phone 283-0901
 Contractor Shade Tree Address _____ Phone 772-223-7307
 No. of Trees: REMOVE 1 Species: Reclinata
 No. of Trees: RELOCATE _____ Species: _____
 No. of Trees: REPLACE _____ Species: _____

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

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

Signature of Property Owner [Signature] Date 7-1-2011

Approved by Building Inspector: [Signature] Date 7-5-11 Fee: N/C

NOTES: _____

