

134 South River Road

1794

SFR

To: The town of Sewall's Pt. Town Manager
From: Martin County Health Department.

Be it known that the individual sewage disposal system(s) installed
on lot 7 Kensington Ct.
for Stuart Kaye
has been found to be in compliance with Chapter 10D-6, Florida
Administrative Code, and therefore is granted final approval.

HD # 85-103

By: Jaqueline D. Kelly
(Sanitarian)

DN 1794

TOWN OF SEWALL'S POINT, FLORIDA

HD. 85-103
2-22-85

1794

Permit Number

SFR

Date Feb 27 1985

APPLICATION FOR PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

This application must be accompanied by three (3) sets of plans, to scale, (1/4" scale for building drawings), including plot plan, foundation plan, floor plans, wall and roof cross-sections, plumbing, electrical and airconditioning layouts, and at least two elevations, as applicable. A copy of the property deed is required for new house or commercial building construction.

Owner SURROUNDINGS Present Address PO Box 2782

Phone 305 286 2660 STUART FL 33495

General Contractor Robert E Stein Address 5412 DAVIS ST

Phone 469 8175 FT. PIERCE, FL.

Where Licensed ST. OF FLORIDA License Number CG C018452

Plumbing contractor BOWATON License Number RF 0037089

Electrical contractor HERNDON License Number _____

Airconditioning contractor SUNCOAST License Number CAC 029397

Roofing contractor Stein & Co License Number CG C018452

Describe the building, or alteration to existing building Single Family Res.

Name the street on which the building, its front building line and its front yard will face: Kingston Court #9 134 South River Road NP95

Subdivision Kingston Lot Number 7 Block Number _____

Building area, inside walls 2900 square feet Affidavit
Garage, carport, porches, etc. 724 square feet FILED

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 135,000.00

Cost of permit \$ 715.00 Plans approved as submitted _____ or, as marked

I understand that this permit is good for twelve months from the date of its issue and that the building for which this permit is issued must be completed within that time and in accordance with the approved plans. I further understand that approval of these plans in no way relieves me of complying with the Town of Sewall's Point Ordinances and the South Florida Building Code. I agree that the building site will be clean and rough-graded before a Certificate of Occupancy is sought, and, moreover, that I shall be responsible for maintaining the construction site in a neat and orderly fashion, policing the area for trash, scrap building materials and other debris, such debris being gathered in one area and at least once a week, or oftener when necessary, removing same from the area and from the Town of Sewall's Point. Failure to comply with the above requirements may result in a Building Inspector or a Town Commission "red-tagging" the building project. All debris must be contained in a dumpster.

Contractor's signature Robert E Stein

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

Owner's signature [Signature]

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

TOWN RECORD

Approved by Building Inspector (date) 2/5/85 inspector's initials [Signature]

Approved by Town Commissioner (date) 3/6/85 inspector's initials [Signature]

Certificate of occupancy issued (date) _____

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 FLORIDA MODEL EFFICIENCY BUILDING CODE.

See Attachment

WARRANTY DEED
(STATUTORY FORM - SECTION 689.02 F.S.)

This Instrument Prepared By:
M. LANNING FOX
WARNER, FOX & SCOLEY
Attorneys At Law
200 Atlanta Avenue
P. O. Drawer 6
Stuart, Florida 33495

487927

THIS INDENTURE, made this 14th day of September, 1983, between ROBERT A. LAKE, of the County of Broward, State of Florida, grantor*, and STUART KAYE and MARCIA D. KAYE, his wife, whose post office address is 18 Simara Street, Stuart, of the County of Martin, State of Florida, grantee*,

WITNESSETH, that said grantor, for and in consideration of the sum of \$10.00 and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Martin County, Florida, to-wit:

Lots 6, 7, 8 and 9, KINGSTON COURT, according to the Amended Plat thereof recorded in Plat Book 8, page 82, Martin County, Florida, Public Records;

SUBJECT TO taxes accruing subsequent to December 31, 1982, zoning regulations in force and effect, restrictions, easements and road rights-of-way of public record;

GRANTOR COVENANTS THAT NEITHER HE NOR ANY PERSON LEGALLY OR NATURALLY DEPENDENT UPON HIM NOW RESIDE ON SAID LANDS OR ANY LANDS CONTIGUOUS THERETO, AND THAT HE PERMANENTLY RESIDES WITH ALL OF SUCH PERSONS, IF ANY, AT 2816 N.E. 37TH COURT, FORT LAUDERDALE, FLORIDA.

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

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

IN WITNESS WHEREOF, Grantor has hereunto set grantor's hand and seal the day and year first above written.

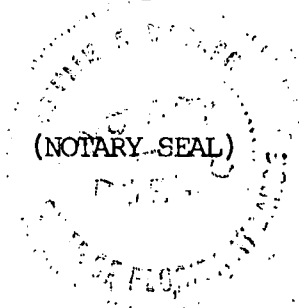
Signed, sealed and delivered in our presence:

Stephen E. [Signature]
W. Thomas Adelbert
As to Grantor

[Signature] L.S.
ROBERT A. LAKE

STATE OF FLORIDA
COUNTY OF MARTIN

The foregoing instrument was acknowledged before me this 14th day of September, 1983, by ROBERT A. LAKE.



BOOK 580 PAGE 1957

Connie S. Wagner
Notary Public
STATE OF FLORIDA AT LARGE
My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES JUNE 11 1984
BONDED THRU GENERAL INS. UNDERWRITERS



CERTIFICATE OF INSURANCE

SET TAB STOPS AT ARROWS
ISSUE DATE (MM/DD/YY)

2/26/85

PRODUCERHAYNES & HAYNES INSURANCE CO.
P. O. Box 3231
Ft Pierce, Fl 33448

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

COMPANIES AFFORDING COVERAGE

COMPANY LETTER A	South Carolina Insurance Co.
COMPANY LETTER B	Hartford Accident & Indemnity Co.
COMPANY LETTER C	
COMPANY LETTER D	
COMPANY LETTER E	

INSUREDR. E. Stein
5412 Davis Street
Ft Pierce, Fl 33450**COVERAGES**

THIS IS TO CERTIFY THAT 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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIABILITY LIMITS IN THOUSANDS		
						EACH OCCURRENCE	AGGREGATE
A	<input checked="" type="checkbox"/> GENERAL LIABILITY	GLA4042647	5/4/84	5/4/85	BODILY INJURY	\$ 300	\$
	<input type="checkbox"/> COMPREHENSIVE FORM				PROPERTY DAMAGE	\$ 50	\$ 50
	<input type="checkbox"/> PREMISES/OPERATIONS UNDERGROUND EXPLOSION & COLLAPSE HAZARD				BI & PD COMBINED	\$	\$
	<input type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS				PERSONAL INJURY	\$	\$
	<input type="checkbox"/> CONTRACTUAL						
	<input type="checkbox"/> INDEPENDENT CONTRACTORS						
	<input type="checkbox"/> BROAD FORM PROPERTY DAMAGE						
<input type="checkbox"/> PERSONAL INJURY							
	AUTOMOBILE LIABILITY				BODILY INJURY (PER PERSON)	\$	
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (PER ACCIDENT)	\$	
	<input type="checkbox"/> ALL OWNED AUTOS (PRIV. PASS.)				PROPERTY DAMAGE	\$	
	<input type="checkbox"/> ALL OWNED AUTOS (OTHER THAN PRIV. PASS.)				BI & PD COMBINED	\$	
	<input type="checkbox"/> HIRED AUTOS						
<input type="checkbox"/> NON-OWNED AUTOS							
<input type="checkbox"/> GARAGE LIABILITY							
	EXCESS LIABILITY				BI & PD COMBINED	\$	\$
	<input type="checkbox"/> UMBRELLA FORM						
<input type="checkbox"/> OTHER THAN UMBRELLA FORM							
B	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY	21 WZ DD9916	5/5/84	5/5/85	STATUTORY		
					\$ 100	(EACH ACCIDENT)	
					\$	(DISEASE-POLICY LIMIT)	
<input type="checkbox"/> OTHER					\$	(DISEASE-EACH EMPLOYEE)	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDERTown of Sewalls Point
1 N. Sewalls Road
Sewall's Point, Fl 33494**CANCELLATION**

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

AUTHORIZED REPRESENTATIVE



FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

SECTION 9—RESIDENTIAL POINT SYSTEM METHOD
DEPARTMENT OF COMMUNITY AFFAIRS

CLIMATE ZONES
SOUTH 7 8 9

FORM 900-A-84

This form may be used to demonstrate compliance with the Energy Code for new single-family detached or multifamily attached dwellings under Section 9 of the Energy Code. An alternative to this method for single-family detached dwellings, and multifamily attached dwellings of three stories or less, is provided in Section 10 of this Code. Only dwellings which are above ground frame (wood siding, brick veneer, etc.) or concrete wall type construction may be calculated using Sections 9 and 10. Other types of construction must comply under Section 4 or Section 5 of this Code. Additions to existing residential buildings shall comply with the requirements of Section 10 of this Code. Detailed information on how to complete this form may be obtained from your local building department or the Department of Community Affairs, Energy Code Program, 2571 Executive Center Circle East, Tallahassee, Florida 32301.

PROJECT NAME AND ADDRESS: <u>Single Family Residence</u> <u>5077 Kingston Ct, Seville FL</u>	PERMITTING OFFICE: CIRCLE CLIMATE ZONE: 7 8 9
BUILDER: <u>Stuart Kaye - Surroundings Inc.</u>	PERMIT NO.:
OWNER:	JURISDICTION NO.:

<input type="checkbox"/> DETACHED <input type="checkbox"/> ATTACHED	IF MULTIFAMILY, NO. OF UNITS COVERED BY THIS CALCULATION: 	GLASS AREA AND TYPE	
	SEPARATE CALCULATIONS ARE REQUIRED FOR EACH WORST CASE UNIT TYPE. CHECK IF THIS CALCULATION REPRESENTS A WORST CASE CONDITION. <input type="checkbox"/>	CLEAR	TINT, FILM, SOLAR SCREEN
		 SGL	 SGL
		 DBL	 DBL

NET WALL AREA AND INSULATION				CONDITIONED FLOOR AREA	CEILING INSULATION	
CBS	R=	FRAME	R=		UNDER ATTIC	SGL. ASSEMBLY
 	 	 3291	 19.0	 3924	R= 19.0	R=

COOLING SYSTEM	PRIMARY HEATING SYSTEM	PRIMARY HOT WATER SYSTEM
<input checked="" type="checkbox"/> CENTRAL <input type="checkbox"/> NONE <input type="checkbox"/> ROOM <input type="checkbox"/> PACKAGE TERMINAL AC EER/SEER = 8.75	<input checked="" type="checkbox"/> ELECTRIC STRIP <input type="checkbox"/> GAS <input type="checkbox"/> NONE <input type="checkbox"/> OIL <input type="checkbox"/> SOLAR <input type="checkbox"/> HEAT PUMP: COP = <input type="checkbox"/> OTHER: _____	<input checked="" type="checkbox"/> ELECTRIC RESISTANCE <input type="checkbox"/> SOLAR <input type="checkbox"/> HEAT RECOVERY <input type="checkbox"/> GAS <input type="checkbox"/> DED. HEAT PUMP: COP = <input type="checkbox"/> OTHER: _____

CALCULATED E.P.I.: 99.8	CALCULATED E.P.I. MUST NOT EXCEED 100 POINTS
In accordance with Section 553.907 F.S., I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code. OWNER/AGENT: <u>Barbara L. Hufford</u> DATE: <u>2-22-85</u> <u>Carol D. Subuluan</u>	Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed, this building will be inspected for compliance in accordance with Section 553.908, F.S. BUILDING OFFICIAL: _____ DATE: _____

9A PRESCRIPTIVE MEASURES (Must be met or exceeded by all residences.)		
COMPONENTS	MINIMUM REQUIREMENTS	CHECK TO INDICATE COMPLIANCE
WINDOWS (903.1)	MAXIMUM OF 0.5 CFM per LINEAR FOOT OF OPERABLE SASH CRACK.	✓
DOORS (903.1)	MAXIMUM OF 0.5 CFM PER SQUARE FOOT OF DOOR AREA. INCLUDES SLIDING GLASS DOORS.	✓
EXT. JOINTS & CRACKS (903.1)	TO BE CAULKED, GASKETED, WEATHER-STRIPPED OR OTHERWISE SEALED.	✓
CEILING INSULATION (903.9)	MINIMUM OF R-19.	✓
WATER HEATERS (903.2)	MUST BEAR ASHRAE STANDARD 90-80 LABEL OR A MAX. 4 WATT/SQ. FT. STAND-BY LOSS. SWITCH OR CLEARLY MARKED CIRCUIT BREAKER (ELECTRIC) OR CUT-OFF VALVE (GAS) MUST BE PROVIDED.	✓
SWIMMING POOLS (903.3)	IF HEATED BY OTHER THAN SOLAR, MUST HAVE POOL COVER DESIGNED TO MINIMIZE HEAT LOSS. ALL NON-COMMERCIAL POOLS MUST BE EQUIPPED WITH A POOL PUMP TIMER.	✓
HOT WATER PIPES (903.4)	INSULATION IS REQUIRED ONLY FOR RECIRCULATING SYSTEMS. IN SUCH CASES, PIPING HEAT LOSS SHALL BE LIMITED TO A MAX. OF 17.5 BTU /H PER LINEAR FOOT OF PIPE (SEE 504.4).	✓
SHOWER HEADS (903.5)	WATER FLOW MUST BE RESTRICTED TO NO MORE THAN 3 GALLONS PER MINUTE.	✓
HVAC DUCT CONSTRUCTION (903.6)	CONSTRUCTED IN ACCORDANCE WITH INDUSTRY STANDARDS AND LOCAL MECHANICAL CODE. DUCTS IN UNCONDITIONED SPACE MUST BE INSULATED TO A MINIMUM R-4.2.	✓
HVAC CONTROLS (903.7)	A SEPARATE, READILY ACCESSIBLE MANUAL OR AUTOMATIC THERMOSTAT FOR EACH SYSTEM.	✓

RESIDENTIAL CALCULATION

FORM 900-A-84

CLIMATE ZONES 7 8 9

COMPONENT			WINTER		GROSS WINTER POINTS	SUMMER		GROSS SUMMER POINTS				
WALLS			AREA	×	WPM	=	AREA	×	SPM	=	GROSS SUMMER POINTS	
			CONCRETE	R 0-2.6				10.9				24.8
R 2.7-3.9					6.6				17.5			
R 4.0-5.9					5.0				15.0			
R 6.0 & UP					4.4				13.9			
FRAME OR BRICK VENEER	R 0-10.9					9.6				30.5		
	R 11.0-18.9					2.5				13.9		
	R 19-25.9				1.5				8.6			
COMMON	R 26 & UP				1.1				6.5			
					2.7				3.8			
			3291			4936.5	3291				28302.6	

DOORS	WOOD OR METAL		80	86.5	6920	80	55.4	4432	
	INSULATED				84.0			22.2	
	STORM DOOR				44.6			44.3	
	COMMON				21.6			6.9	

CEILING	UNDER ATTIC	R 19-21.9	3924	1.9	7455.6	3924	8.4	32961.6	
		R 22-29.9			1.7			7.6	
		R 30 & UP			1.5			5.5	
	SINGLE ASSEMBLY NO ATTIC	R 6-7.9			5.4			22.6	
		R 8-9.9			4.0			17.3	
		R 10-11.9			3.5			14.6	
		R 12-18.9			2.5			10.6	
		R 19-21.9			1.9			8.4	
	COMMON				1.7			2.0	

FLOOR OVER UNCONDITIONED SPACE	WOOD	R 0-6.9			5.8			6.6	
		R 7-10.9			2.4			2.9	
		R 11-18.9	746		2.1	1566.6	746	2.3	1715.8
		R 19 & UP			1.4			1.5	
	CONCRETE	R 0-2.9			6.8			8.2	
		R 3-5.9			4.3			5.7	
		R 6-10.9			3.4			3.6	
		R 11-18.9			2.3			2.9	
		R 19 & UP			1.5			1.9	
	COMMON				1.7			2.0	

SLAB ON GRADE	EDGE INSULATION		PERIMETER	WPM	GROSS POINTS
	PERIMETER	R 0-2.9	164	28.3	4641.2
		R 3-5.9		20.4	
		R 6 & UP		12.4	

WINTER

SUMMER

GLASS
DO NOT INCLUDE INTERIOR SHADING

OR	AREA	SGL	DBL	WOF (9F)	GROSS WINTER POINTS
N		55.4	38.5		
NE	90	55.4	38.5	.99	3430.4
E	156	55.4	38.5	.89	5345.3
SE	90	55.4	38.5	.83	2876.0
S		55.4	38.5		
SW	36	55.4	38.5	.99	1372.1
W	90	55.4	38.5	1.	3465.
NW	204	55.4	38.5	1.	7854.
H		22.6	6.8		
SE	144		38.5	1.	5544.
E	72		38.5	.98	2716.6

H = HORIZONTAL GLASS (SKYLIGHTS).

OR	AREA	SINGLE		DOUBLE		SOF (9F)	GROSS SUMMER POINTS
		CLR	TINT	CLR	TINT		
N		204	176	163	139		
NE	90	309	264	258	218	.91	17854.2
E	156	425	360	362	304	.84	39836.2
SE	90	418	354	355	298	.81	21724.2
S		346	294	287	242		
SW	36	418	354	355	298	.81	8689.7
W	90	425	360	362	304	.84	22982.4
NW	204	309	264	258	218	.91	40469.5
H		720	605	627	524		
SE	144				298	.59	25318.1
E	72				304	.65	14227.2

FOR SC OTHER THAN 0.83 SEE SEC. 902.2(a)5. TINT MULT. MAY BE USED FOR GLASS WITH SOLAR SCREENS, FILM, OR TINT.

TOTAL GROSS WINTER POINTS **58123.3**

TOTAL GROSS SUMMER POINTS **258513.5**

DUCT MULT	R = 4.2-4.9	58123.3	1.14	66260.4
	R = 5.0-6.6		1.12	
	R = 6.7 & UP		1.09	
	DUCTS IN CONDITIONED SPACE		1.00	

DUCT MULT	R = 4.2-4.9	258513.5	1.14	294705.4
	R = 5.0-6.6		1.12	
	R = 6.7 & UP		1.09	
	DUCTS IN CONDITIONED SPACE		1.00	

HSM FROM 9G $66260.4 \times 1. = 66260.4$

CSM FROM 9H $294705.4 \times .76 = 223976.1$

DIVIDE BY CONDITIONED FLOOR AREA $66260.4 \div 3924 = 16.9$ WINTER POINTS

DIVIDE BY CONDITIONED FLOOR AREA $223976.1 \div 3924 = 57.1$ SUMMER POINTS

CALCULATE ENERGY PERFORMANCE INDEX									
WINTER POINTS	SUMMER POINTS	HOT WATER PTS. (9I)	E.P.I. SUBTOTAL	ADJUSTMENT MULTI. (9B)	ADJUSTED E.P.I.	CREDIT PTS. (9C + 9D)	PENALTY PTS. (9E)	CALCULATED E.P.I.	
16.9	57.1		74	1.47	108.8	12	3	99.8	

THE CALCULATED E.P.I. MUST BE EQUAL TO OR LESS THAN 100 POINTS.

9B	ADJUSTMENT MULTIPLIERS								
CONDITIONED FLOOR AREA (SQ. FT.)	0-900	901-1100	1101-1300	1301-1500	1501-1700	1701-1900	1901-2100	2101-2300	2301-ABOVE
ADJUSTMENT MULTIPLIER	1.03	1.07	1.11	1.16	1.21	1.27	1.33	1.40	1.47

9C DESIGN CREDIT POINTS (CP)		
CEILING FAN IN COND SPACE (max 5 CP)	1	5
MULTIZONE A/C SEPARATED BY DOOR	5	5
CROSS VENTILATION (1 CP per room)	1	1
WHOLE HOUSE FAN (min. 1.5 cfm/s.f.)	5	
WOOD STOVE	2	
FIREPLACE WITH OUTSIDE COMBUSTION AIR	2	2
9C TOTAL (not to exceed 12 points)		12

9D HEATING SYSTEM CREDIT POINTS	
NATURAL GAS/PROPANE HEATING	8.0
OIL HEATING	6.4

9E DESIGN PENALTY POINTS	
WASHER AND DRYER IN COND SPACE	3
TOTAL GLASS OPENS LESS THAN 40%	5
FIREPLACE WITH INSIDE COMBUSTION AIR	5

9F WINTER OVERHANG FACTOR (WOF)								
FEET	N	NE	E	SE	S	SW	W	NW
0-0.9	1.00	0.99	0.85	0.75	0.83	0.98	1.00	1.00
1-1.9	1.00	0.99	0.85	0.76	0.84	0.98	1.00	1.00
2-2.9	1.00	0.99	0.86	0.77	0.86	0.99	1.00	1.00
3-3.9	1.00	0.99	0.87	0.80	0.87	0.99	1.00	1.00
4-4.9	1.00	0.99	0.89	0.83	0.90	0.99	1.00	1.00
5-5.9	1.00	0.99	0.91	0.86	0.92	1.00	1.00	1.00
6-6.9	1.00	0.99	0.92	0.90	0.94	1.00	1.00	1.00
7-7.9	1.00	1.00	0.94	0.92	0.96	1.00	1.00	1.00
8-8.9	1.00	1.00	0.96	0.95	0.97	1.00	1.00	1.00
9-9.9	1.00	1.00	0.97	0.97	0.98	1.00	1.00	1.00
10-10.9	1.00	1.00	0.98	0.98	0.99	1.00	1.00	1.00
11-11.9	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
12 UP	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00

9F SUMMER OVERHANG FACTOR (SOF)								
FEET	N	NE	E	SE	S	SW	W	NW
0-0.9	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
1-1.9	1.00	1.00	0.99	0.99	0.98	0.99	0.99	1.00
2-2.9	1.00	0.98	0.95	0.93	0.92	0.93	0.95	0.98
3-3.9	1.00	0.95	0.89	0.87	0.86	0.87	0.89	0.95
4-4.9	1.00	0.91	0.84	0.81	0.80	0.81	0.84	0.91
5-5.9	0.99	0.88	0.80	0.76	0.76	0.76	0.80	0.88
6-6.9	0.99	0.85	0.76	0.72	0.72	0.72	0.76	0.85
7-7.9	0.99	0.83	0.72	0.68	0.70	0.68	0.72	0.83
8-8.9	0.98	0.81	0.69	0.66	0.68	0.66	0.69	0.81
9-9.9	0.98	0.79	0.67	0.64	0.66	0.64	0.67	0.79
10-10.9	0.98	0.78	0.65	0.62	0.65	0.62	0.65	0.78
11-11.9	0.97	0.76	0.63	0.61	0.65	0.61	0.63	0.76
12 UP	0.97	0.76	0.62	0.59	0.64	0.59	0.62	0.76

9G HEATING SYSTEM MULTIPLIER (HSM)							
HEAT PUMP	COP	2.5-2.6	2.7-2.8	2.9-3.0	3.1-3.2	3.3-3.4	3.5 & UP
	HSM	.40	.37	.34	.32	.30	.29
SOLAR HEATING SYSTEM	(BACKUP SYSTEM FRACTION) × (BACKUP SYSTEM HSM)						
ELECTRIC STRIP HEAT	1.0						
NATURAL GAS/PROPANE/OIL	1.0 (SEE TABLE 9D FOR CREDITS)						
PTAC & ROOM HEAT PUMPS	MINIMUM COP 2.2. HSM FOR COP 2.2 - 2.4 = .45. SEE TABLE ABOVE FOR COP > 2.4						

9H COOLING SYSTEM MULTIPLIER (CSM)										
ELECTRIC	EER/SEER	7.8-7.9	8.0-8.4	8.5-8.9	9.0-9.4	9.5-9.9	10.0-10.4	10.5-10.9	11.0-11.9	12.0-UP
	CSM	.83	.81	0.76	0.72	0.68	0.65	0.62	0.59	0.54
GAS	COP	0.40-0.44	0.45-0.49	0.50-0.54	0.55-0.59	0.60-0.64	0.65-0.69	0.70 & UP		
	CSM	1.50	1.25	1.20	1.09	1.00	0.92	0.89		
MINIMUM SEER/EER LEVEL 7.8 FOR STRAIGHT COOL OR HEAT PUMPS; MINIMUM OF 7.5 EER FOR ROOM UNITS AND PTAC. FOR ROOM UNITS AND PTAC, CSM FOR EER 7.5 - 7.7 = .87. SEE TABLE ABOVE FOR EER > 7.7.										

9I HOT WATER CREDIT POINTS (HWCP)													
ELECTRIC RESISTANCE WATER HEATER												0	
GAS WATER HEATER												10	
INSTANTANEOUS WATER HEATER	ELECTRIC											4.5	
	GAS											12.6	
HRU (A/C) WATER HEATER	ELECTRIC BACKUP											8.9	
	GAS BACKUP											15.2	
HRU (HP) WATER HEATER	ELECTRIC BACKUP											9.7	
	GAS BACKUP											15.4	
HEAT PUMP WATER HEATER (DEDICATED HEAT PUMP)	COP		1.60-1.89	1.90-2.19	2.20-2.49	2.50-2.79	2.80-3.00						
	CREDIT POINTS		9.0	11.4	13.1	14.4	15.4						
SOLAR HOT WATER	OVERALL SOLAR FRACTION*		0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0	
	CREDIT POINTS	ELECTRIC BACKUP		2.4	4.8	7.2	9.6	12.0	14.4	16.8	19.2	21.6	24.0
		GAS BACKUP		11.4	12.8	14.2	15.6	17.0	18.8	19.8	21.2	22.6	24.0
*PERCENT OF ANNUAL HOT WATER PROVIDED BY SOLAR SYSTEM ÷ 100 = OVERALL SOLAR FRACTION													

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

STUBOUT ELEVATION AND FILL CERTIFICATION

APPLICANT: Stuart Kaye
LEGAL DESCRIPTION: 7 Kingston Court
SEPTIC TANK PERMIT NUMBER: HPD-85-103

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

1. Building Permit Number: _____.
- ___ 2. I certify that the elevation of the top of the lowest plumbing stubout is at or above the approved elevation as shown on septic tank permit application.
Date elevation checked: _____.
- ___ 3. I certify that the top of the lowest building plumbing stubout is _____ feet above the crown of road.
- ___ 4. I certify that all severe limited soil has been removed from an area of 20 feet by 50 feet to a minimum depth of six (6) feet below top of required stubout elevation. Submit plot plan to scale of excavated area.

Date observed: _____

OR

that the results of at least four (4) soil borings to a minimum depth of six (6) feet below top of required stubout elevation at the above boundary corners of the proposed septic system indicate that severe limited soils do not exist.

Date of borings: _____.

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

CERTIFIED BY: _____

As applicant or applicant's representative, I understand the above requirements.

Florida Professional Number: _____

Date: _____ Job Number: _____

(Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

(Signature of Environmental Health Specialist)

(Date)



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR SEPTIC TANK PERMIT
AND FINAL INSPECTION FORM

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

Permit Number: HD85-103

Name of Applicant Stuart Kaye Telephone number 286-2660
Mailing Address of Applicant 18 Simara Street
Stuart, FL 33494

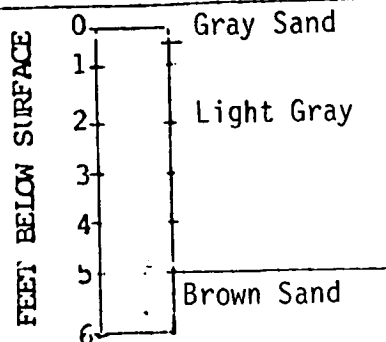
Lot 7 Block - Subdivision Kingston Court
Plat Book & Page M-8-82 Date Recorded 1981
Residential: No. living units 1 No. Bedrooms 3
Commercial: Type of Business _____ No. People _____ No. Toilets _____

*Note: Attach site location map and other supportive documents.

SITE INFORMATION

Is there a private well within 75 feet of the proposed septic system no
Is there a public well within 200 feet of the proposed septic system no
Is there a public sewer within 100 feet of the proposed lot? no
Is there a lake, stream, canal or other body of water within 75 feet of the proposed septic system? no
Is there a septic system or other interference within 75 feet of the proposed private well? no
Is the proposed or existing public water line within 10 feet of the proposed septic system? no
There is 700 square feet of unobstructed land for future expansion of the drainfield. Unobstructed land is the entire area in which to install the septic system, excluding interferences. Shade this unobstructed area.

SOIL PROFILE AND SOIL TYPE



USDA SOIL TYPE: Johnathan Sand
USDA SYMBOL #: 41

Certified by: Stephen J. Brown
Fla. Professional No: 4049
Date: 2/21/85 Job No. 541-02-02

Note:
If fill is required to obtain proper elevation, fill permit must be obtained from Martin County Building Division.

INSTALLATION SPECIFICATIONS

Septic Tank Capacity 1050 Gallons Absorption Bed Size 400 square ft.
Dosing Tank Capacity _____ Gallons Lateral Drainfield Size _____ Sq. ft.
Grease Trap Capacity _____ Gallons Sand Filter Size _____ Square ft.

Specifications:

Date Processed 2/22/85

TOP OF SEPTIC TANK IS REQUIRED TO BE A MINIMUM ELEVATION OF
FINISHED SOIL GRADE

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

Maitha M. Canoll
Signature of Sanitarian

Martin County Health Department

FINAL INSPECTION DATA

Date and Time of Inspection _____ Type of Tank (Concrete, Fiberglass, Etc.) _____
Size Tank Installed _____ Drainfield Size _____
Dosing Tank Size _____ Grease Trap Size _____ Sand Filter Size _____
Who Made Installation _____

RECOMMENDATION: Approval Disapproval
Signature of Sanitarian

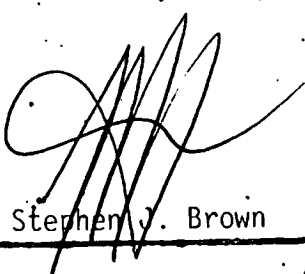
MARTIN COUNTY HEALTH DEPT.
131 E. 7th Street
Stuart, Fl 33497
287-2277

SITE INFORMATION

APPLICANT: Stuart Kaye

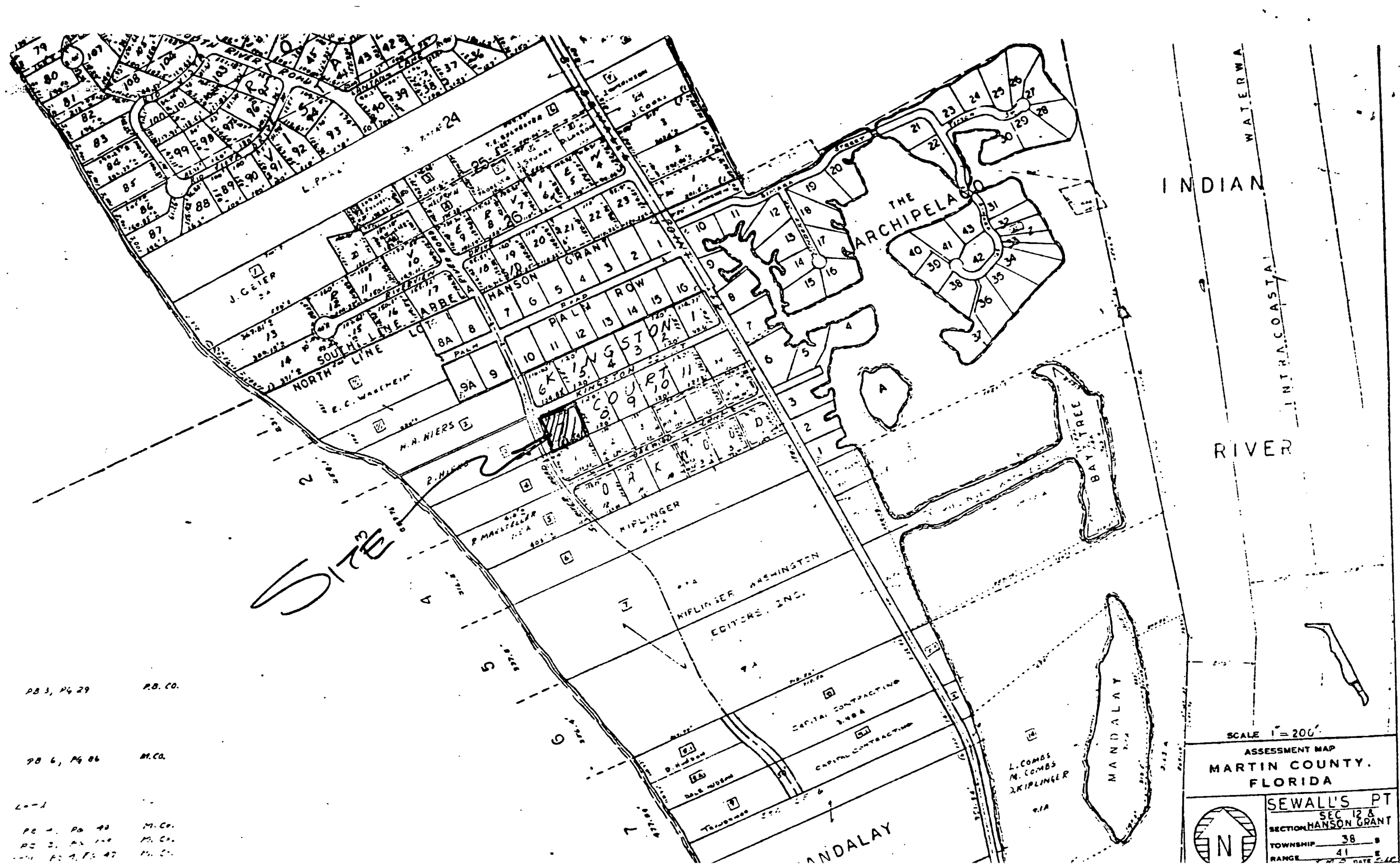
LEGAL DESCRIPTION: Lot 7, Kingston Court

1. Present water depth 6'-0" feet below natural grade, not including fill.
2. Wet season water depth 6'-0" feet below natural grade, not including fill.
3. Elevation of crown of road, midway between front lot boundary 8.56. If road is not paved, another permanent reference point must be noted. Show location on plot plan.
4. Elevation of natural grade at soil boring in area of proposed septic system 9.4.
5. Are all wells, septic systems and surface water on adjacent or contiguous land within 75 feet of the applicants lot shown on plot plan? yes
6. Is there a storm water retention area within 15 feet of the proposed septic system? no
7. Is the septic system in an area proposed for paving? no
8. Attach site location map or explain directions to site below:

CERTIFIED BY:  Stephen J. Brown

Florida Professional Number: 4049

Date: 2/21/85 Job Number: 541-02-02



SITE

PB 3, PG 29 M. Co.
 PB 6, PG 86 M. Co.
 L-1
 PB 1, PG 49 M. Co.
 PB 2, PG 104 M. Co.
 PB 3, PG 47 M. Co.

WATERWAY
 INDIAN RIVER
 INTRA-COASTAL WATERWAY

THE ARCHIPELAGO
 MANDALAY

HANSON GRANT
 PALM ROW
 KINGSTON COURT
 MIPLINGER WASHINGTON EDITORS, INC.
 CAPITAL CONTRACTING
 CAPITAL CONTRACTING
 L. COMBS
 M. COMBS
 K. KIPLINGER

J. CETER
 S. BARRELLA
 N. N. NERS
 P. MARSTELLER
 H. H. HANSON
 D. HANSON
 B. S. BUSH
 T. H. THOMPSON

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SCALE 1" = 200'
 ASSESSMENT MAP
 MARTIN COUNTY,
 FLORIDA
 SEWALL'S PT
 SEC 12 &
 SECTION HANSON GRANT
 TOWNSHIP 38 S
 RANGE 41 E
 DATE 2-16-66

$$\begin{array}{r} 135 \text{ } \cancel{00} \\ 5 \overline{) 675} \\ \underline{60} \\ 75 \\ \underline{75} \\ 0 \end{array}$$

OWNER'S AFFIDAVIT OF BUILDING COSTS

STATE OF FLORIDA
COUNTY OF MARTIN

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

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

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

3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 135,000.00

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



Affiant
Property street address:
#9 KINASTON CT
STUART, FLA.

Sworn to and subscribed
before me this 14th day of
August, 1985.

John D. Barrow

Notary Public
STATE OF FLORIDA AT LARGE
My Commission Expires:

(NOTARY SEAL)

Notary Public, State of Florida
My Commission Expires Nov. 16, 1986
Bonded thru Troy Fair Insurance, Inc.

RECORD OF INSPECTIONS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 7/10/85

This is to request that a Certificate of Approval for Occupancy be issued to SURROUNDINGS
 For property built under Permit No. 1794 Dated 2/27/1985 when completed in
 conformance with the Approved Plans.

Item	Signed	Approved by
1. LOT STAKES/SET BACKS		
2. TERMITE PROTECTION	<u>3/2/85 PJ</u>	
3. FOOTING - SLAB	<u>3/12/85 PJ</u>	<u>Perms steps STEEL 7/16/85</u>
4. ROUGH PLUMBING	<u>3/8/85 PJ</u>	<u>Perms steps STEEL 7/16/85</u>
5. ROUGH ELECTRIC	<u>4/30/85 PJ</u>	
6. LINTEL		
7. ROOF Framing & cups	<u>4/30/85 PJ</u>	
8. FRAMING	<u>7/30/85 PJ</u>	
9. INSULATION	<u>5/6/85 PJ</u>	
10. A/C DUCTS	<u>7/10/85 PJ</u>	
11. FINAL ELECTRIC	<u>9/10/85 PJ</u>	
12. FINAL PLUMBING	<u>7/10/85 PJ</u>	
13. FINAL CONSTRUCTION	<u>7/10/85 PJ</u>	

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector [Signature] 7/16/85 date

Approved by Building Commissioner [Signature] date 7/17/85

Utilities notified 7/11/85 Temp Final 7/16/85 date

Original Copy sent to _____

(Keep carbon copy for Town files)

1813

POOL

Permit No. 1813

Date 4/29/85

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 Stuart Kaye Present Address 18 Simara St
Phone 286-2660 Jensen Bch, Fla 33457

Contractor Olympic Pools Address 1565 S.W. Martin Hwy
Phone 286-6070 Palm City, Fla 33490

Where licensed CPCA11014 License number State of Fla

Electrical contractor / License number /

Plumbing contractor / License number /

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

State the street address at which the proposed structure will be built:
Corner of Kingston Court + River Rd.

Subdivision Kingston Lot number 7 Block number

Contract price \$ 9315. Cost of permit \$ 50.00

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 [Signature]

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

Owner [Signature]

TOWN RECORD
Date submitted 5/2/85 Approved: [Signature] 5/7/85
Building Inspector Date

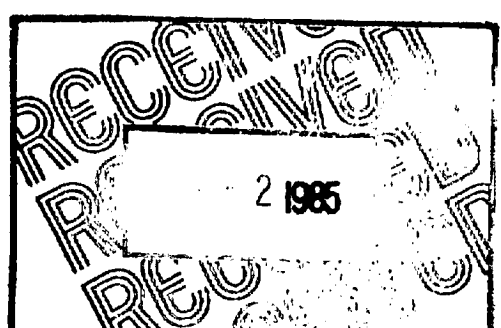
Approved: [Signature] 5/13/85 Final Approval given: 7/8/85
Commissioner Date Date

Certificate of Occupancy issued (if applicable) _____
Date

SP1282

Permit No. _____

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



3084

FENCE

3084

Permit No. _____

Date 10/30/91

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 DON GALINAT Present Address 134 S. RIVER RD

Phone 288-0989 SEWALL'S PT.

Contractor ALL AMERICAN FENCE Address 1622 SE. FALLON DR

Phone 878-1650 PSC

Where licensed MARTIN License number SP00872

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: WOOD FENCE (6' HIGH - (160')
SAME

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

Subdivision KINGSTON CT. Lot number 7 Block number _____

Contract price \$ 984.00 Cost of permit \$ 25.00 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 Michael J. Dempsey

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 Don Galinat

TOWN RECORD

Date submitted _____ Approved: Dale Brown 11/1/91
Building Inspector _____ Date

Approved: _____ Final Approval given: _____
Commissioner Date Date

Certificate of Occupancy issued (if applicable) _____
Date

SP1282

Permit No. 3084

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.



All American Fence Contractors Inc.

1622 S.E. Fallon Dr. - Port St. Lucie, FL 34984
(407) 335-0928 / 878-1650

LICENSES
St. Lucie County #2151
Indian River County #1060
Martin County #00872
State of Florida #RX0054663

Date 10-30-91

Name <u>Don Galinat</u>		Job Name	
Address		Job Address	
City			
Phones		Job Phone	Installation Date Week of:

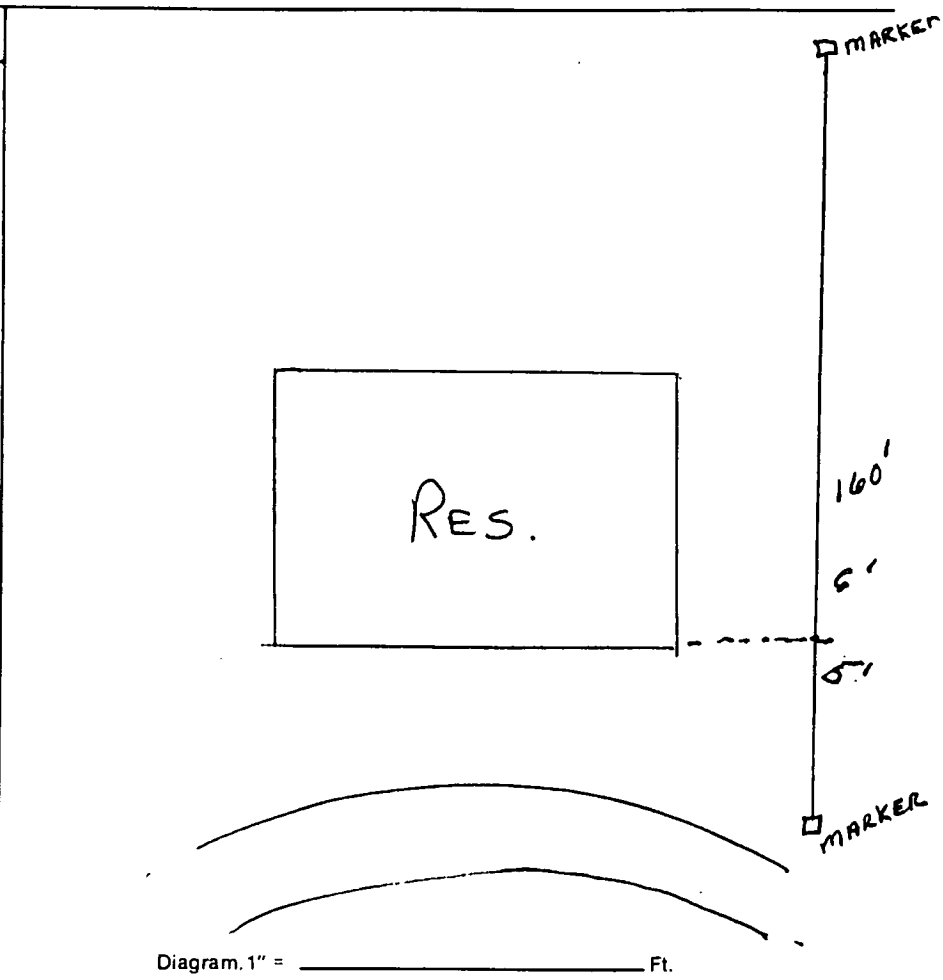
LEGAL DESCRIPTION

Lot	Block	Section	Plat	Subdivision
-----	-------	---------	------	-------------

SPECIFICATIONS

Top Rail Straight Follow Contour Split Knuckle Up Barb Up Lines Clear of Obstruction

CHAIN LINK	
Total Footage	_____
Height	_____
Gauge Wire	_____
Dia. Top Rail	_____
Dia. Line Post	_____
Dia. Terminal Post	_____
Dia. Gate Post	_____
Gates	_____
Sizes	_____
Tension Wire	_____
Specialty Items	_____
WOOD	
Style	_____
Height	_____
Stain	_____
# Sections	_____ <input type="checkbox"/> In <input type="checkbox"/> Out



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

THE FENCE REMAINS THE PROPERTY OF ALL AMERICAN FENCE CONTRACTORS INC. UNTIL CHARGES ARE COMPLETELY PAID.

ALL AMERICAN FENCE CONTRACTORS INC. IS NOT RESPONSIBLE FOR PROPERTY LINES OR UNDERGROUND UTILITIES, INCLUDING SPRINKLER SYSTEMS.

Total Price _____

Deposit _____

Balance Due on Completion _____

Authorized Signature _____

ACCEPTED: The above prices, specifications and conditions are satisfactory and are hereby accepted, you are authorized to do the work as specified. Payment will be made as outlined above.

Date _____

5167

RE-ROOF

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 11/16/00

BUILDING PERMIT NO. 5167

Building to be erected for JULIE GIBSON

Type of Permit RE ROOF (FLAT)

Applied for by A & W ROOFING

(Contractor)

Building Fee _____

Subdivision KINGSTON COURT Lot 7

Block _____

Radon Fee _____

Address 134 S. RIVER ROAD

Impact Fee _____

Type of structure S.F.R.

A/C Fee _____

NOTE: CK # 1907 (240.00)
PN 5167 - 120.00
5168 - 120.00

Parcel Control Number:

13-38-41-010-000-0007.0-00000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee \$120.00

Amount Paid \$120.00

Check # 1907

Cash _____

Other Fees (_____)

Total Construction Cost \$ 20,315.00

TOTAL Fees \$120.00

Signed

K. Stephen Schubert

Applicant

Signed

[Signature]

Town Building Inspector *OPPELCAK*

RE-ROOFING PERMIT

INSPECTIONS

DRY IN
PROGRESS

DATE _____
DATE _____

PROGRESS
FINAL

DATE _____
DATE 12/6/00

24 HOURS NOTICE REQUIRED FOR INSPECTIONS.

CALL 287-2455

WORK HOURS - 8:00 AM UNTIL 5:00 PM

MONDAY THROUGH SATURDAY

- New Construction
- Remodel
- Addition
- Demolition

This permit must be visible from the street, accessible to the inspector.

**FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT,
NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.
DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!**



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

Bldg. Permit Number: _____

RECEIVED

NOV - 7 2000

Owner or Titleholder's Name Julie Gibson Phone No. (561) 286-5258
 Street: 134 S. River Rd City Sewalls Point State: FL Zip 34996
 Legal Description of Property: Kingston Court, Lot 7

Parcel Number: 13-38-41-010-000 - 0007.0 - 00000

Location of Job Site: 134 S. River Rd

TYPE OF WORK TO BE DONE: Re-roof Flat to Flat
 CONTRACTOR/Company Name: A & W Roofing Phone No. (561) 283-8100
 Street: 3301 Slater St. City Stuart State: FL Zip 34997
 State Registration: _____ State License: CCC057686

ARCHITECT: _____ Phone No. () _____
 Street: _____ City _____ State: _____ Zip _____

ENGINEER: _____ Phone No. () _____
 Street: _____ City _____ State: _____ Zip _____

AREA SQUARE FOOTAGE - SEWER - ELECTRIC:
 Living Area: _____ Garage Area: _____ Carport: _____ Accessory Bldg: _____
 Covered Patio: _____ Scr. Porch: _____ Wood Deck: _____
 Type Sewage: _____ Septic Tank Permit # from Health Dept. _____
 New Electrical Service Size: _____ AMPS

FLOOD HAZARD INFORMATION
 Flood zone: _____ Minimum Base Flood Elevation (BFE): _____ NGVD
 Proposed first habitable floor finished elevation: _____ NGVD (minimum 1 foot above BFE)

COSTS AND VALUES
 Estimated cost of construction or Improvement: \$ 20,315.00
 Estimated Fair Market Value (FMV) prior to improvement: \$ _____
 If Improvement, is cost greater than 50% of Fair Market Value? YES _____ NO
 Method of determining Fair Market Value: _____

SUBCONTRACTOR INFORMATION: (Notification to this office of subcontractor change is mandatory.)
 Electrical: _____ State: _____ License # _____
 Mechanical: _____ State: _____ License # _____
 Plumbing: _____ State: _____ License # _____
 Roofing: _____ State: _____ License # _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standard of all laws regulating construction in this jurisdiction. I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, DOCKS, SEA WALLS, ACCESSORY BUILDINGS, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL.

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, INCLUDING FLORIDA MODEL ENERGY CODES.

OWNER or AGENT SIGNATURE (Required)
Julie Lang Gibson
 Owner

State of Florida, County of: MARTIN On this the 6th day of Nov., 2000, by JULIE LANG GIBSON who is personally known to me or produced FL DL as identification.

Kendra S. Bramble
 Notary Public

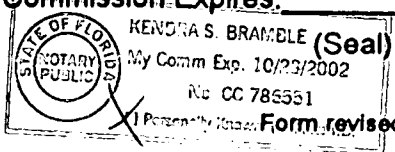
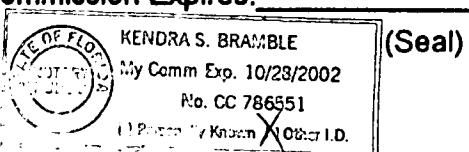
My Commission Expires: _____

CONTRACTOR SIGNATURE (Required)
Kristopher Ashenback
 Contractor

State of Florida, County of: MARTIN On this the 6th day of Nov., 2000, by KRISTOPHER ASHENBACK who is personally known to me or produced _____ as identification.

Kendra S. Bramble
 Notary Public

My Commission Expires: _____



TREE REMOVAL (Attach sealed survey)

Number of trees to be removed: _____ Number of trees to be retained: _____ Number of trees to be planted: _____ Number of Specimen trees removed: _____
Fee: \$ _____ Authorized/Date: _____

DEVELOPMENT ORDER # _____

1. **ALL APPLICATIONS REQUIRE**
 - a. Property Appraisers Parcel Number.
 - b. Legal Description of your property. (Can be found on your deed survey or Tax Bill.)
 - c. Contractors name, address, phone number & license numbers.
 - d. Name all sub-contractors (properly licensed).
 - e. Current Survey
2. Take completed application to the Permits and Inspections Office for approval. Provide construction details and a plot plan(s) showing setbacks, yard coverage, parking and position of all buildings on the property, stormwater retention plan, etc. Compliance with subdivision regulations can also be determined at this time.
3. Take the application showing Zoning approval (complete with plans & plot plan) to the Health Department for septic tank. Attach the pink copy to the building application.
4. Return all forms to the Permits and Inspection Office. All planned construction requires: two (2) sets of plans, drawn to scale with engineer's or architects seal and the following items:
 - a. Floor Plan
 - b. Foundation Details
 - c. Elevation Views - Elevation Certificate due after slab inspection,
 - d. Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
 - e. Truss layout
 - f. Vertical Wall Sections (one detail for each wall that is different)
 - g. Fireplace drawing: If prefabricated submit manufacturers data

ADDITIONAL Required Documents are:

1. Use permit (for driveway connection to public Right of Way). Return form with plot plan showing driveway location (State Road A-1-A East Ocean Boulevard only).
2. Well Permit or Information on existing well & pump.
3. Flood Hazard Elevation (if applicable).
4. Energy Code Compliance Certification plus any Approved Forms and/or Energy Code Compliance Sheets.
5. Statement of Fact (for Homeowner Builder), and proof of ownership (Deed or Tax receipt).
6. Irrigation Sprinkler System layout showing location of heads, valves, etc.
7. A certified copy of the Notice of Commencement must be filed in this office and posted at the job site prior to the first inspection.
8. Replat required upon completion of slab or footing inspection And Prior to any further inspections.

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

Approved by Building Official: _____ Date: _____

Approved by Town Engineer _____ Date: _____
(If required)

PERMIT # _____

TAX FOLIO # 13-38-41-010-000-0007.0-0000

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 THE NOTICE OF COMMENCEMENT.

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE):
Kingston Court Lot 7

GENERAL DESCRIPTION OF IMPROVEMENT Re-roof Flat

OWNER: Julie Gibson

ADDRESS 134 S. River Rd Sewalls Point, FL 34996

PHONE #: 256-5258

CONTRACTOR: A&W Construction Roofing Division

ADDRESS 3301 SE Slater Ave. Stuart, FL 34997

PHONE #: 561-283-8100

FAX #: 561-283-0292

SURETY COMPANY (IF ANY) _____

ADDRESS _____

BOND AMOUNT: _____

LENDER: _____

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)7., FLORIDA STATUTES.

NAME: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

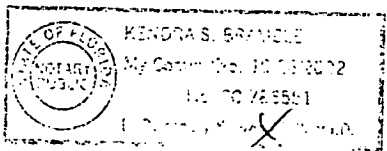
IN ADDITION TO HIMSELF, OWNER DESIGNATES _____ OF _____ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.

PHONE #: _____

FAX #: _____

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

Julie Gibson
SIGNATURE OF OWNER



SWORN TO AND SUBSCRIBED BEFORE ME THIS 6th DAY OF NOVEMBER 20 00 BY JULIE

Kendra S. Bramble
NOTARY SIGNATURE

OR PERSONALLY KNOWN _____
PRODUCED ID X
TYPE OF ID FLDL

CERTIFICATE OF LIABILITY INSURANCE

CSR MR. R&WCO-3

DATE (MM/DD/YY) 07/19/00

PRODUCER

Stuart Insurance, Inc.
3070 S W Mapp
Palm City FL 34990
Phone: 561-286-4334 Fax: 561-286-9389

COPY FILE

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

INSURERS AFFORDING COVERAGE

INSURED

AWR of the Treasure Coast, Inc
A & W Construction
3301 S. Slaters Street
Stuart FL 34994

FILE

INSURER A:	Employers SIF
INSURER B:	Auto Owners Insurance Co
INSURER C:	Bridgefield Insurance Co
INSURER D:	
INSURER E:	

RECEIVED
JUL 14 2000
BY: *[Signature]*

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <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	REDACTED	07/16/00	07/16/01	EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 300,000 MEDEXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	4130139500	01/01/00	01/01/01	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	083024864	04/01/00	04/01/01	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
	OTHER				

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

CERTIFICATE HOLDER

N ADDITIONAL INSURED; INSURER LETTER: _____

CANCELLATION

TOWNS-1
Town of Sewalls Point
1 S Sewalls Point Road
Stuart 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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
[Signature]
Cabot W. Lord, CIC.

RECEIVED
SEP 26 2000
BY: *[Signature]*

FILE
bc/mis

OC# 5947199

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

DATE	BATCH NUMBER	LICENSE NBR
8/15/2000	00004460	CB - C054507

The **BUILDING CONTRACTOR**
named below **IS CERTIFIED**
Under the provisions of Chapter 489 FS.
Expiration date: **AUG 31, 2002**



ASHENBACK, KRISTOPHER TODD
A & W CONSTRUCTION INC
3301 SLATER ST
STUART FL 34997

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON
SECRETARY

OC# 5947302

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

DATE	BATCH NUMBER	LICENSE NBR
8/15/2000	00004460	CC - C057686

The **ROOFING CONTRACTOR**
named below **IS CERTIFIED**
Under the provisions of Chapter 489 FS.
Expiration date: **AUG 31, 2002**



ASHENBACK, KRISTOPHER TODD
A & W CONSTRUCTION
3301 SLATER ST
STUART FL 34997

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON
SECRETARY

MARTIN COUNTY ORIGINAL
2000 COUNTY OCCUPATIONAL LICENSE 2001

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

LICENSE 1999 513 020 CERT CCC57686

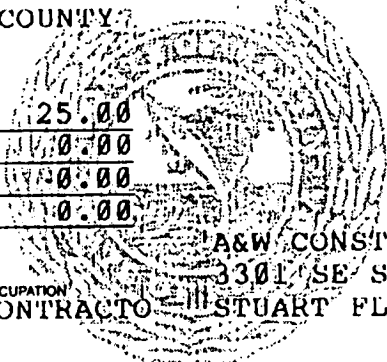
PHONE 561 283 8100 C NO 1761

LOCATION:

5186 SLATER ST SE

CHARACTER COUNTS IN MARTIN COUNTY:

PREV YR. \$	<u>0.00</u>	LIC. FEE \$	<u>25.00</u>
\$	<u>0.00</u>	PENALTY \$	<u>0.00</u>
\$	<u>0.00</u>	COL. FEE \$	<u>0.00</u>
\$		TRANSFER \$	<u>0.00</u>
TOTAL			<u>25.00</u>



A&W CONSTRUCTION ROOFING DIVISION
3301 SE SLATER STREET
STUART FL 34997

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION

OF CONSTRUCTION/ROOFING CONTRACTOR

AT ABOVE ADDRESS FOR THE PERIOD BEGINNING ON THE

8 DAY OF SEPTEMBER 2000
AND ENDING SEPTEMBER 30. 2001

RECEIPT OF PAYMENT
L.C. O'STEEN, T.C.
99 09/08/2000 900 NORMAL
179951320
0220000903005123CK
\$25.00

A&W

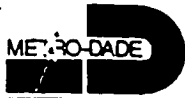
ROOFING
DIVISION

CONSTRUCTION

EST. 1982

SCOPE OF WORK

- Complete removal of existing roof down to substrate.
- Install 43# base sheet.
- Install 2-ply glass and modified rubber cap sheet.



11/19/97

METROPOLITAN 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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

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

GAF Materials Corporation
1361 Alps Road
Wayne, NJ 07470

Your application for Product Approval of:

GAF Ruberoid® Modified Bitumen Roof Systems for Wood Decks ?

under Chapter 8 of the Metropolitan Dade County Code governing the use of Alternate Materials and Types of Construction, and completely described in the plans, specifications and calculations as submitted by:

Dynatech Engineering, Inc., Factory Mutual Research Corporation, and Underwriters Laboratories, Inc.

has been recommended for acceptance by the Building Code Compliance Office to be used in Dade County, Florida under the specific conditions set forth on pages 2-60 and the standard conditions on page 61.

This approval shall not be valid after the expiration date stated below. The Building Code Compliance Office 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, the Building Code Compliance Office may revoke, modify, or suspend the use of such product or material immediately. The Building Code Compliance Office reserves the right to revoke this approval, if it is determined by the Building Code Compliance Office that this product or material fails to meet the requirements of the Building Code Compliance Office 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.: 97-0804.14
Expires: 11/06/00

Revises No.: 95-1003.03

Raul Rodriguez
Product Control Supervisor

THIS IS THE COVERSHEET. SEE ADDITIONAL PAGES FOR SPECIFIC AND GENERAL CONDITIONS BUILDING CODE COMMITTEE

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

11/14/00 TOWN OF SEWALL'S POINT REVIEW

Charles Danger, P.E.
Director
Building Code Compliance Dept.
Metropolitan Dade County

Approved: 11/06/97

BUILDING OFFICIAL

FILE TOWN COPY
134S. RIVER RD.

PN 5167



**PRODUCT CONTROL NOTICE OF ACCEPTANCE
ROOFING SYSTEM APPROVAL**

Applicant:
GAF Materials Corporation
1361 Alps Road
Wayne, NJ 07470

Product Control No.: 97-0804.14

Approval Date: November 6, 1997

Expiration Date: November 6, 2000

Category: Membrane Roofing System
Sub-Category: Built-up Roofing
Type: Modified Bitumen
Sub-Type: APP and SBS

System Description

GAF Materials Corporation has been manufacturing commercial roofing products for more than 100 years.

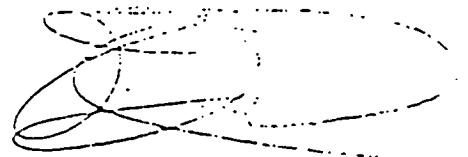
GAF produces a wide range of roof products for built-up roofing systems. The modified bitumen products include both APP and SBS products in smooth, granule and fire rated versions. In addition, GAF offers two ply modified systems to meet the specification requirements for multilayer SBS modified specifications.

GAF products are distributed through a wide network of roofing wholesale distributors throughout the South Florida area.

GAF provides warranted systems over various insulated and non-insulated substrates, copies of which can be obtained from GAF and can be found in the Ruberoid Modified Bitumen Application and Specification manual published annually.

GAF roof system assemblies have been extensively tested at Factory Mutual Research Corporation and Underwriters Laboratories. GAF modified bitumen membranes have been tested in compliance with ASTM D 5147 test requirements.

Contact:
William J. Woodring
Director of Technical Services
(973) 628-4134



Frank Zuloaga,
Roofing Product Control Examiner

Insulation Types:

- Basalt Wool
- Perlite
- Polyisocyanurate
- Composite Board
- Wood Fiberboard
- High Density Wood Fiberboard
- Rockwool

Maximum Design Pressure

<u>Material</u>	<u>Design Pressure</u>
Wood	-75psf

Maximum Fire Classification

<u>Material</u>	<u>Classification</u>
Wood	Class 'A'

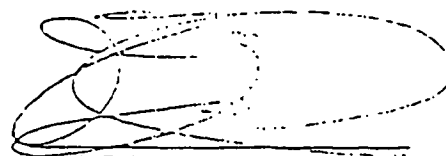
Note: Fire classifications and maximum design pressures do not reference all assemblies over all deck types. Review system listings for design pressures and the Underwriters Laboratories Roofing Materials Directory for Fire Classifications.



Frank Zuloaga,
Roofing Product Control Examiner

**TRADE NAMES OF PRODUCTS MANUFACTURED OR
LABELED BY APPLICANT**

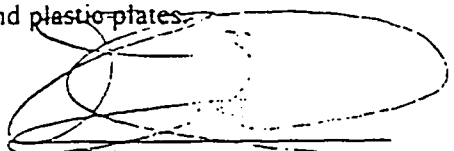
<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
GAF Asphalt Concrete Primer	5, 55 gallons	ASTM D 41	Asphalt concrete primer used to promote adhesion of asphalt in built-up roofing.
GAF Mineral Shield® Granules	60 lb. bags	ASTM D 1863	Granules for surfacing of exposed asphalt, cold process cement or emulsion. GAF Mineral Shield® Granules shall be used for flashing applications only.
GAF WeatherCoat® Emulsion	5 gallons	ASTM 1227	Surface coating for smooth surfaced roofs.
GAF Premium Fibered Aluminum Roof Coating	1. 5 gallons	ASTM D 2824	Fibered aluminum coating.
GAF Jetblak All Weather Plastic Cement	1. 5 gallons	ASTM D 3019 ASTM D 3409	Refined asphalt blended with a mineral stabilizer and fibers. Permits adhesion to wet and dry surfaces.
GAFGLAS #75®	3 sq. roll 75 lb. roll	ASTM D 4601	Asphalt impregnated and coated glass mat base sheet.
GAFGLAS #80 Ultima™ Base Sheet	2 Sq. Roll 70 lbs./roll	ASTM D4601	Asphalt impregnated and coated, fiberglass base sheet
GAFGLAS Ply 6®	5 sq. roll 45 lb. roll	ASTM D 2178	Type VI asphalt impregnated glass felt with asphalt coating.
GAFGLAS Flex Ply™ 6	5 sq. roll 45 lb. roll	ASTM D 2178	Type VI asphalt impregnated glass felt with asphalt coating.
GAFGLAS Ply 4®	5 sq. roll	ASTM D 2178	Type IV asphalt impregnated glass felt with asphalt coating.
GAFGLAS® Mineral Surfaced Cap Sheet	76 lb. roll	ASTM D 3909	Asphalt coated, glass fiber mat cap sheet surfaced with mineral granules.


 Frank Zuloaga,
 Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
RUBEROID® Modified Bitumen Adhesive	5 gallons	ASTM D 3019 Type III	Fiber reinforced, rubberized Adhesive
GAFGLAS® STRATAVENT® Perforated	60 lb. roll	ASTM D 4897 D 3672	Fiber glass base sheet impregnated and coated on both sides with asphalt. Surfaced on the bottom side with mineral granules embedded in asphaltic coating with factory perforations.
GAFGLAS® Flashing	various		Asphalt coated glass fiber mat flashing sheet available in three sizes.
GAFGLAS® STRATAVENT Nailable	69 lb. roll	ASTM D 489 D 3672	Fiber glass base sheet impregnated and coated on both sides with asphalt. Surfaced on the bottom side with mineral granules embedded in asphaltic coating.
RUBEROID® Modified Base Sheet	3 sq. roll 67 lbs.	ASTM D4601, Type II, UL Type G2 BUR	Premium glass fiber reinforced SBS-modified base sheet
GAFTEMP® Isotherm R	various	PA 110	Polyisocyanurate foam insulation.
Tapered GAFTEMP® Isotherm R	various	PA 110	Tapered Polyisocyanurate foam insulation
GAFTEMP Isotherm RA	various	PA 110	Polyisocyanurate foam insulation
Tapered GAFTEMP Isotherm RA	various	PA 110	Tapered Polyisocyanurate foam insulation
GAFTEMP Isotherm RN	various	PA 110	Polyisocyanurate foam insulation
Tapered GAFTEMP Isotherm RN	various	PA 110	Tapered Polyisocyanurate foam insulation
GAFTEMP® Composite	various	PA 110	Polyisocyanurate foam insulation with high density fiberboard or Perlalite perlite insulation.

Frank Zuloaga,
Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
Tapered GAFTEMP® Composite	various	PA 110	Tapered Polyisocyanurate foam insulation with high density fiberboard or Permalite perlite insulation.
GAFTEMP® Composite A	various	PA 110	Polyisocyanurate foam insulation with high density fiberboard or Permalite perlite insulation.
Tapered GAFTEMP® Composite A	various	PA 110	Tapered Polyisocyanurate foam insulation with high density fiberboard or Permalite perlite insulation.
GAFTEMP® Composite N	various	PA 110	Polyisocyanurate foam insulation with high density fiberboard or Permalite perlite insulation.
Tapered GAFTEMP® Composite N	various	PA 110	Tapered Polyisocyanurate foam insulation with high density fiberboard or Permalite perlite insulation.
GAFTEMP® Fiberboard	various	PA 110	Fiberboard insulation.
GAFTEMP® Permalite	various	PA 110	Perlite insulation board.
GAFTEMP Recover Board	1/2" thick	PA 110	Perlite recover board
GAFTEMP® High Density Fiberboard	various	PA 110	High density wood fiberboard insulation.
GAFTITE® #12 Standard Roofing Fastener		PA 114	Insulation fastener for steel and plywood decks.
GAFTITE® #14 Heavy Duty Roofing Fastener		PA 114	Insulation fastener for steel, wood and concrete decks.
GAFTITE ASAP		PA 114	Pre-assembled GAFTITE Fasteners and metal and plastic plates.



 Frank Zuloaga,
 Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
GAFTITE® Base Sheet Fastener and Plate		PA 114	Base sheet fastening assembly.
Galvalume Plates	3" and 3 ½"	PA 114	Round galvalume stress plates.
NTB Fasteners		PA 114	Fastener for use in gypsum, tectum and lightweight insulating concrete decks.
Polypropylene Plates	3" and 3 ½"	PA 114	Round polypropylene stress plates.
Ruberoid® 20	1.5 sq. roll	ASTM D 5147	SBS modified asphalt base sheet and interply sheet reinforce with a glass fiber mat.
Ruberoid® Mop Granule	1 sq. roll 103 lbs.	ASTM D 5147	Non-woven polyester mat coated with polymer modified asphalt and surfaced with mineral granules.
RUBEROID MOP Smooth	1 sq. roll 87 lbs.	ASTM D 5147	Non-woven polyester mat coated with polymer modified asphalt and smooth surfaced.
RUBEROID MOP PLUS	1 sq. roll 102 lbs.	ASTM D 5147	Non-woven polyester mat coated with polymer modified asphalt and surfaced with mineral granules.
RUBEROID MOP 170FR	1 sq. roll 103 lbs.	ASTM D 5147	Non-Woven polyester mat coated with fire retardant polymer modified asphalt and surfaced with mineral granules.
RUBEROID MOP FR	1 sq. roll 105 lbs.	ASTM D 5147	Non-Woven polyester mat coated with fire retardant polymer modified asphalt and surfaced with mineral granules.
RUBEROID TORCH Smooth	1 sq. roll 87 lbs.	ASTM D 5147	Heavy duty, polyester reinforced, asphalt modified bitumen membrane, smooth surface.
RUBEROID TORCH Granule	1 sq. roll 102 lbs.	ASTM D 5147	Heavy duty, polyester reinforced, asphalt modified bitumen membrane, granule surface.

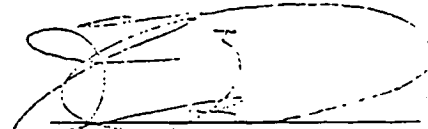


Frank Zuloaga,
Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
RUBEROID TORCH PLUS	¼ sq. roll 93 lbs.	ASTM D 5147	Heavy duty, polyester reinforced, asphalt modified bitumen membrane, granule surface
RUBEROID TORCH FR	¼ sq. roll 90 lbs.	ASTM D 5147	Heavy duty, polyester reinforced, coated with fire retardant asphalt modified bitumen membrane, granule surface.
RUBEROID 30	1 sq. roll 92 lbs.	ASTM D 5147	Non woven fiberglass mat coated with polymer modified asphalt and surfaced with mineral granules.
RUBEROID 30 FR	1 sq. roll 92 lbs.	ASTM D 5147	Non woven fiberglass mat coated with fire retardant polymer modified asphalt and surfaced with mineral granules.
Vent Stacks (metal and plastic)		PA 100(A) ASTM D 1929 ASTM D 635	One way valve vent used to relieve built-up pressure within the roof system. GAF Vent Stacks are available in metal or plastic.
GAF Aluminum Emulsion	5 gallons	None	Mineral colloidal bituminous emulsion with reflective aluminum flakes
RUBEROID® ULTRA CLAD® SBS	109. Roll 101 lbs.	ASTM D 5147	Woven fiberglass mat coated with Polymer modified asphalt surfaced with aluminum, copper or stainless steel foil.
GAF Aluminum Roof Paint	5 gallons	ASTM D2824, Type I	Non-fibered. aluminum pigmented. asphalt roof coating
GAF Built-Up Roofing Asphalt	100 lb. cartons, bulk	ASTM D312, Types I, II, III and IV	Interply mopping and surfacing asphalt
RUBEROID MOD Asphalt	60 lb. kegs		SEBS modified asphalt
RUBEROID MOD Asphalt L	60 lb. kegs		SEBS modified asphalt
RUBEROID MOD Asphalt P	60 lb. kegs		SEBS modified asphalt

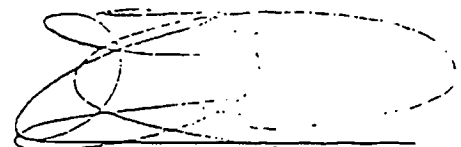

Frank Zuloaga,
Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
GAFTEMP Tapered Isotherm R	Various	PA 110	Tapered polyisocyanurate foam
GAFTEMP Tapered Isotherm RA	Various	PA 110	Tapered polyisocyanurate foam
GAFTEMP Tapered Isotherm RN	Various		Tapered polyisocyanurate foam
GAFTEMP GAFCANT™	Various		Cut perlite board
GAFTEMP GAFEDGE™ Tapered Edge Strip	Various		Tapered perlite board
GAFTEMP PERMALITE® Tapered Roof Insulation	Various	PA 110	Tapered perlite board
GAFTEMP Recover Board	1/2" thick, Various sizes	PA 110	Perlite board
Shingle-Mate™ Underlayment	4 sq. roll 30 lbs.		Fiberglass reinforced shingle underlayment
GAFTITE® ASAP	500 per box	PA 114	Pre-assembled fastener and metal and plastic plates
RUBEROID® Modified Bitumen Adhesive	5 gallons	ASTM D 3019 Type III	Fiber reinforced, rubberized Adhesive


 Frank Zuloaga,
 Roofing Product Control Examiner

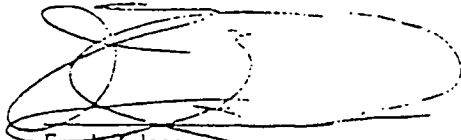
TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>	<u>Manufacturer</u>
Pyrox	various	PA 110	Polyisocyanurate foam insulation	Apache Products Co. (with current PCA)
ACFoam I	various	PA 110	Polyisocyanurate foam insulation	Atlas Energy Products (with current PCA)
ACFoam II	various	PA 110	Polyisocyanurate foam insulation	Atlas Energy Products (with current PCA)
Hy-Therm Nail-line	various	PA 110	Polyisocyanurate foam insulation	Celotex Corp. (with current PCA)
Hy-Therm SP	various	PA 110	Polyisocyanurate foam insulation.	Celotex Corp. (with current PCA)
Hy-Therm AP	various	PA 110	Polyisocyanurate foam insulation	Celotex Corp. (with current PCA)
Hy-Therm Stable R	various	PA 110	Polyisocyanurate foam insulation	Celotex Corp. (with current PCA)
Hy-Therm White Line	various	PA 110	Polyisocyanurate foam insulation	Celotex Corp. (with current PCA)
Anchorbond Fastener		PA 114	Insulation fastening assembly	Celotex Corp. (with current PCA)
Dekfast Fasteners #14		PA 114	Insulation fastener for steel and concrete decks	Construction Fasteners Inc. (with current PCA)
Dekfast Hex Plate	2 7/8" x 3 1/4"	PA 114	Galvalume hex stress plate.	Construction Fasteners Inc. (with current PCA)

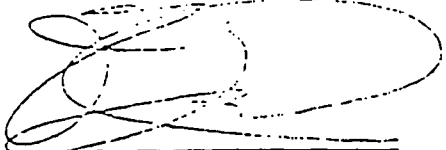


Frank Zuloaga,
Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>	<u>Manufacturer</u>
Dekfast Lock Plate	3" x 3 1/4"	PA 114	Polypropylene locking plate.	Construction Fasteners Inc. (with current PCA)
Dekfast Fasteners #15		PA 114	Insulation fasteners for concrete decks	Construction Fasteners Inc. (with current PCA)
Dekfast Fasteners #12		PA 114	Insulation fastener for steel and wood decks.	Construction Fasteners Inc. (with current PCA)
ISO 95+ Composite		PA 110	Polyisocyanurate / perlite ridged insulation	Firestone (with current PCA)
Asphalt		ASTM D 312	Type III or IV Hot asphalt bitumin adhesive	generic
Asphalt Primer		ASTM D 41	Asphalt Primer	generic
EPS	various	PA 110	Extruded polystyrene insulation	generic
High Density Wood Fiberboard	various	PA 110	Wood fiber insulation board	generic
Pelite/Urethane Composite	various	PA 110	Perlite / urethane composite board insulation	generic
Perlite Insulation	various	PA 110	Perlite insulation board	generic
Polyethylene	4 mil min.		Vapor barrier / Air barrier	generic
Red Rosin	various		Rosin paper for barrier layer on wood decks	generic
Roofing Nails	Minimum # 12	PA 114	Corrosion-resistant annular ring shank nails	generic



Frank Zuloaga,
Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>	<u>Manufacturer</u>
Tin Caps	Min. 32 ga. x 1 1/4"		Corrosion resistant circular discs.	generic
MB aluminum roof coating		PA 121	Aluminum roof coating	Grundy Industries (with current PCA)
Dens-Deck	various	PA 110	Gypsum insulation board.	Georgia Pacific (with current PCA)
#12 Roofgrip		PA 114	Insulation fastener for steel or wood decks	ITW Buildex (with current PCA)
#14 Roofgrip		PA 114	Insulation fastener steel, wood or concrete decks	ITW Buildex (with current PCA)
Gripdek Fastener		PA 114	Insulation fastener	ITW Buildex (with current PCA)
Hexcel Fastener		PA 114	Insulation fastener	ITW Buildex (with current PCA)
Hextra		PA 114	Insulation fastener and metal or plastic plate	ITW Buildex (with current PCA)
Standard Plastic Plate	3" round	PA 114	Polyolefin plastic plate	ITW Buildex (with current PCA)
ISO 95+	various	PA 110	Polyisocyanurate foam insulation	International Permalite (with current PCA)
ENRG'Y-2	various	PA 110	Polyisocyanurate foam insulation	NRG Barriers, Inc. (with current PCA)
ISORoc	various	PA 110	Polyisocyanurate foam / rockwool composite insulation	NRG Barriers, Inc. (with current PCA)



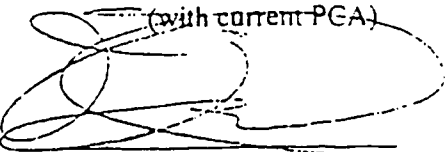
Frank Zuloaga,
Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>	<u>Manufacturer</u>
Olympic Standard	3" round	PA 114	3" round galvalume AZ55 steel plate	Olympic Manufacturing Group, Inc. (with current PCA)
Olympic Fastener #14		PA 114	Insulation fastener	Olympic Manufacturing Group, Inc. (with current PCA)
Olympic Polypropylene	3.25" round	PA 114	Polypropylene plastic plate	Olympic Manufacturing Group, Inc. (with current PCA)
Olympic Fastener #12		PA 114	Insulation fastener	Olympic Manufacturing Group, Inc. (with current PCA)
Olympic Fastener ASAP		PA 114	Pre-assembled Insulation fastener and plate	Olympic Manufacturing Group, Inc. (with current PCA)
Olympic CR Base Felt Fastener and Base Sheet Disc		PA 114	Insulation fastener assembly for Base Sheet fastening only	Olympic Manufacturing Group, Inc. (with current PCA)
GlasFast Fastener		PA 114	Insulation fastener assembly with recessed plastic plate	Owens-Corning Fiberglas Corp. (with current PCA)
Paroc Base Board	various	PA 110	Rockwool insulation	Partek, Inc. (with current PCA)
Paroc Cap Board	various	PA 110	Rockwool insulation	Partek, Inc. (with current PCA)




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Roofing Product Control Examiner

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>	<u>Manufacturer</u>
UltraGard	various	PA 110	Polyisocyanurate foam insulation	Schuller International Inc. (with current PCA)
Insul-Fixx Fastener		PA 114	Insulation fastener for steel and wood decks	SFS/Stadler (with current PCA)
Insul-Fixx P	3" round	PA 114	3" round polyethylene stress plate	SFS/Stadler (with current PCA)
Rawl Fasteners #12		PA 114	Insulation fastener for steel and wood decks	The Rawlplug Company Inc. (with current PCA)
Rawl Fasteners #14		PA 114	Insulation fastener for use in steel, wood or concrete	The Rawlplug Company Inc. (with current PCA)
Rawl 2" Plate	2" round	PA 114	2" round galvalume AZ55 membrane plate	The Rawlplug Company Inc. (with current PCA)
Rawl 3" Plate	3" round	PA 114	3" round galvalume AZ55 steel plate	The Rawlplug Company Inc. (with current PCA)
Rawlite 3" Plate	3" round	PA 114	3" round galvalume AZ55 steel plate for use with Rawlite fasteners	The Rawlplug Company Inc. (with current PCA)
202 HS		PA 121	Roof coating	Thermo-Materials, Inc. (with current PCA)
Super Prep II		PA 121	Roof coating	Thermo-Materials, Inc. (with current PCA)
Tru-Fast DL		PA 114	Insulation fastener for steel, or wood	Tru-Fast (with current PCA)


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<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>	<u>Manufacturer</u>
Tru-Fast Plastic Plate	3.04" round	PA 114	3.04" round polyethylene plastic plate	Tru-Fast (with current PCA)
Tru-Fast MP-3	3.23" round	PA 114	3.23" round galvalume AZ50 steel plate	Tru-Fast (with current PCA)
Tru-Fast HD		PA 114	Insulation fastener for use in wood, steel or concrete decks	Tru-Fast (with current PCA)
Tru-Fast Ultra		PA 114	Stainless Steel fastener for use in steel, wood and concrete decks	Tru-Fast (with current PCA)
Tru-Fast DP		PA 114	Insulation fastener for use in steel or wood decks	Tru-Fast (with current PCA)
Tru-Fast TP		PA 114	Insulation fastener for use in steel or wood decks	Tru-Fast (with current PCA)
Structodeck	various	PA 110	High density wood fiber	Wood Fiber Industries (with current PCA)



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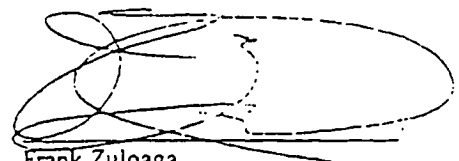
TEST REPORTS

<u>Test Agency/Identifier</u>	<u>Name</u>	<u>Report</u>	<u>Date</u>
Factory Mutual Research Corporation	Current Insulation Attachment Requirements	FMRC 1996	01.01.96
Factory Mutual Research Corporation	Wind Uplift FMRC 4470 - PA 114	J.I. 0T4A1.AM	08.26.92
Factory Mutual Research Corporation	Wind Uplift FMRC 4470 - PA 114	J.I. 1V8A4.AM	06.28.93
Factory Mutual Research Corporation	Wind Uplift FMRC 4470 - PA 114	J.I. 1R1A6.AM	11.15.91
Factory Mutual Research Corporation	Wind Uplift FMRC 4470 - PA 114	J.I. 0T2Q4.AM	10.17.91
Factory Mutual Research Corporation	Wind Uplift FMRC 4470 - PA 114	J.I. 0Q6A6.AM	07.16.91
Factory Mutual Research Corporation	Wind Uplift FMRC 4470 - PA 114	J.I. 3X3A2.AM	08.02.94
Factory Mutual Research Corporation	Wind Uplift FMRC 4470 - PA 114	J.I. 0Y9Q5.AM	07.29.94
Factory Mutual Research Corp.	Wind Uplift, FMRC 4470 - PA 114	J.I. 1B9A8.AM	09.04.97
Factory Mutual Research Corp.	Wind Uplift, FMRC 4470 - PA 114	J.I. 3D4Q2.AM	04.30.97
Trinity Engineering	Wind Uplift PA 114	4483.04 97-1	06.06.97
Underwriters Laboratories, Inc.	Fire Resistance Classification UL 790 - PA 114	R1306, 87NK11819	01.01.93
Dynatech Engineering Corporation	Wind Uplift PA 114	#3600.02.95-1	02.02.95



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<u>Test</u> <u>Agency/Identifier</u>	<u>Name</u>	<u>Report</u>	<u>Date</u>
Dynatech Engineering Corporation	Wind Uplift PA 114	#4482.02.95-1	02.02.95



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Roofing Product Control Examiner

SYSTEMS

- Membrane Type:** SBS
- Deck Type II:** Wood, Insulated, New Construction or Reroof
- Deck Description:** $\frac{19}{32}$ " or greater plywood or wood plank
- System Type A(1):** Anchor sheet mechanically fastened, all layers of insulation adhered with approved asphalt.

All General and System Limitations shall apply.

<u>Insulation Layer</u>	<u>Fastener Type</u>	<u>Fastening Detail No.</u> (see PA 117)	<u>Fasteners Per Board</u>	<u>Fastener Density</u>
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One or more layers of any of the following insulations.

Approved Type(s): AC Foam-I, E'NRG'Y 2, GAFTEMP® Isotherm R, E'NRG'Y 2 Plus, GAFTEMP Isotherm RA, GAFTEMP Isotherm RN, GAFTEMP Composite, GAFTEMP Composite A, GAFTEMP Composite N

Minimum: 1" x 3' x 4' N/A N/A N/A N/A

Approved Type(s): ISORoc, GAFTEMP® Tapered

Minimum: 1" x 4' x 4' N/A N/A N/A N/A

Approved Type(s): High Density Wood Fiber, GAFTEMP® High Density Wood Fiber, GAFTEMP RecoverBoard

Minimum: ½" x 4' x 4' N/A N/A N/A N/A

Approved Type(s): Wood Fiber, GAFTEMP® Fiberboard

Minimum: ½" x 2' x 4' N/A N/A N/A N/A

Approved Type(s): Paroc

Minimum: ¾" x 4' x 4' N/A N/A N/A N/A

Approved Type(s): Perlite, GAFTEMP® Permalite

Minimum: ¾" x 2' x 4' N/A N/A N/A N/A

Approved Type(s): Fiberglas

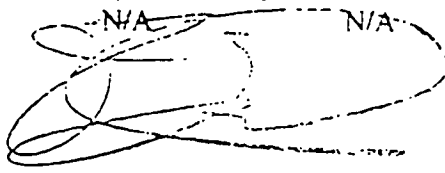
Minimum: 1⁵/₁₆" x 4' x 4' N/A N/A N/A N/A

Approved Type(s): Permalite Tapered Roof Insulation, GAFTEMP® Isotherm Tapered

Minimum: ¼" x 2' x 4' N/A N/A N/A N/A

Approved Type(s): Tapered Isotherm R, Tapered Isotherm RA, Tapered Isotherm RN, GAFTEMP Composite Tapered, GAFTEMP Composite A Tapered, GAFTEMP Composite N Tapered

Minimum: ¼" x 4' x 4' N/A N/A N/A N/A



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Roofing Product Control Examiner

Membrane Type: SBS

Deck Type 1: ~~Wood, Non-Insulated~~

Deck Description: ~~19/12" or greater plywood or wood plank~~

System Type E-2: RUBEROID® Tile Underlayment, Base Sheet mechanically attached.

All General and System Limitations shall apply.

Anchor sheet: ASTM 2626, GAFGLAS® GAFGLAS #80 Ultima™ Base Sheet, STRATAVENT® Nailable, or RUBEROID® 20 base sheet applied with a minimum 2" side lap and a minimum 6" end lap. Base sheet may be applied at a right angle (90°) to the slope of the deck with approved annular ring shank nails and tin caps at a fastener spacing of 6" o.c. at the 2" side lap, and two 12" o.c. staggered rows along the center of the sheet.

Ply Sheet: (Optional) one, or more plies GAFGLAS PLY 4®, or GAFGLAS® PLY 6® Ply or GAFGLAS FlexPly™ 6 sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq..

Membrane: One ply RUBEROID® MOP, or RUBEROID® MOP PLUS, membrane may be applied at a right angle (90°) to the slope of the deck* adhered in a full mopping of Type IV asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. Membrane shall be backnailed to deck with approved annular ring shank nails and tin caps at a maximum fastener spacing of 6" o.c. No nails or tincaps shall be exposed

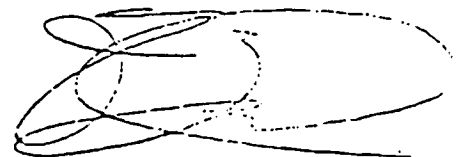
* Membrane may also be installed parallel to the slope of the roof (i.e. strapping). If membrane is strapped, then anchor sheet and ply sheet must also be strapped.

Maximum Design Pressure: Must comply with Metro-Dade County Roofing Application Standard PA 115.

Maximum Fire Classification: Must comply with Tile System Fire Classification

Maximum Slope: Must Comply with Metro-Dade County Roofing Application Standard PA 118, PA 119, PA 120

Specification No.:



Frank Zuloaga,
Roofing Product Control Examiner

Membrane Type: SBS

Deck Type II: Wood, Insulated, New, Recover or Reroof

Deck Description: $\frac{19}{32}$ " or greater plywood or wood plank

System Type D(3-D): Base sheet and insulation simultaneously mechanically fastened.

All General and System Limitations shall apply.

One or more layers of any of the following insulations.

Approved Type(s): Minimum thickness, 1.3" of ACFOAM-I, E'NRG'Y 2, GAFTEMP® Isotherm R, E'NRG'Y 2 Plus, GAFTEMP Isotherm RA, GAFTEMP Isotherm RN, GAFTEMP Composite, GAFTEMP Composite A, GAFTEMP Composite N loosely laid with firmly butted joints.

Minimum thickness, 1" GAFTEMP High Density Fiberboard, GAFTEMP Fiberboard, minimum thickness 1" loosely laid with firmly butted joints.

Base sheet: GAFGLAS® #75 Base Sheet, GAFGLAS #80 Ultima™ Base Sheet, STRATAVENT® Nailable, or RUBEROID® 20 base sheet applied over the loose laid insulation with 2" side laps. GAFTITE #12 or #14 Screws and 3" Plates are installed through the base sheet and insulation in 4 rows 8" on center. One row is in the 2" side lap. The other 3 rows are equally spaced approximately 9" OC in the field of the sheet.

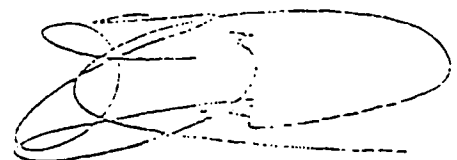
Membrane: One or more plies of RUBEROID® MOP Granule, MOP 170 FR, MOP PLUS MOP FR, ULTRACLAD®, installed in a solid application of RUBEROID Modified Adhesive applied at a rate of 1.3 to 2 gallons/ 100ft².

Maximum Design Pressure: -75 psf (See General Limitation #7)

Maximum Fire Classification: 'A'. See General Limitation #2.

Maximum Slope: 1":12"; See General Limitation #3.

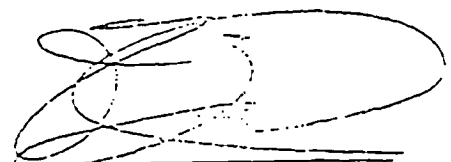
Specification No.:



Frank Zuloaga,
Roofing Product Control Examiner

Wood Deck System Limitations:

1. Fastener spacing for anchor sheet attachment is based on a Minimum Characteristic Force (F') of 95 lbf or greater as tested in compliance with Merto-Dade County Protocol PA 105. If F' as tested is below 95 lbf, a professional engineer may submit a revised fastener spacing utilizing the withdrawal resistance value taken from Merto-Dade County Protocol PA 105 and calculations in compliance with Metro-Dade Roofing Application Stanadrd PA 117.
- 2 All standard insulation panel sizes are acceptable for mechanical attachment. When panels are applied in hot asphalt, maximum panel size shall be 4' x 4'.
 - a. Fastener spacing for insulation attachment is based on a Minimum Characteristic Force (F') of 275 lbf. as tested in compliance with Merto-Dade County Protocol PA 105 & Roofing Application Standard PA 117. If the fastener value, as field tested, are below 275-lbf. insulation attachment shall not be acceptable.
- 3 A slip sheet is required with GAFGLAS FlexPly 4® and Ply 6® when used as a mechanically fastened base or anchor sheet.
4. ½ Type X gypsum board is acceptable to be installed directly over the wood deck..



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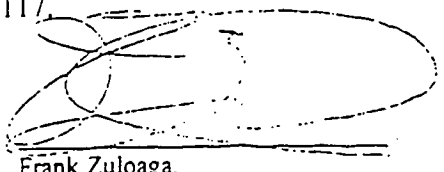
GENERAL LIMITATIONS

- 1 All asphalt shall comply with ASTM D 312 type III or type IV requirements, and approved by applicant.
- 2 Fire ratings are determined by a combination of slope, deck type and assembly. Refer to current Underwriters Roofing Materials Directory or other fire testing data listed in the testing file. Fire ratings shall be in strict compliance with Sections 3401.5 and 3401.6 of the South Florida Building Code.
- 3 Maximum slope range shall vary for each system; consult current Underwriters Laboratories Roofing Materials Directory and manufacturer's specifications for compliance with design criteria for each project.
- 4 An overlay and/or recovery board insulation panel is required on all applications over closed cell foam insulations when the base sheet is fully mopped. If no recovery board is used, install one layer of GAFGLASS STRATAVENT Perforated, laid dry. A base sheet may be applied using spot mopping with approved asphalt, 12" diameter circles, 24" o.c.: or strip mopped 8" ribbons in three rows, one at each sidelap and one down the center of the sheet allowing a continuous area of ventilation. Encircling of the strips is not acceptable. A 6" break shall be placed every 12' in each ribbon to allow cross ventilation. Asphalt application of either system shall be at a minimum rate of 12 lbs./sq. **Note: Spot attached systems shall be limited to a maximum design pressure of -45 psf. Where STRATAVENT Perforated is used over approved isocyanurate foam insulation, the maximum design pressure is limited to -60psf.**
- 5 All work shall be performed by a contractor licensed to do roofing work in Metro-Dade County. Contractor shall be familiar with the details and specifications published by the manufacturer, and the requirements of the SFBC.
- 6 The submission of system specifications and details shall accompany the Section II Building Code Permit. This information is available in the publications listed in the 'System Description' of this Product Control Approval. The submission of these documents, as well as the proper application and installation of all materials shall be the sole responsibility of the contractor.



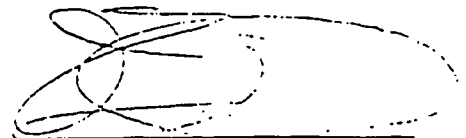
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Roofing Product Control Examiner

- 7 Perimeter and corner areas shall comply with the enhanced uplift pressure of these areas, as calculated in compliance with Chapter 23 of the South Florida Building Code. Fastener densities shall be increase for both insulation and base sheet as needed calculated in compliance with Metro-Dade County Roofing Application Standard PA 117. **(When this limitation is specifically referred within this NOA, General Limitation #20 will not be applicable.)**
- 8 All attachment and sizing of perimeter nailers, metal profile, and/or flashing termination designs shall conform with Metro-Dade County Roofing Application Standard PA 111 and the wind load requirements of Chapter 23 of the South Florida Building Code.
- 9 Flashings shall be installed according to the manufacturers standard details, and may be applied in cold application adhesive, approved asphalt or may be applied in conjunction with an approved torch applied modified bitumen membrane. Specific details, approved by the manufacturer, shall be submitted with the Section II Permit Application. All details shall comply with the provision of the South Florida Building Code.
- 10 Fastener spacing for base sheet attachment is based on a Minimum Characteristic Force (F') value as tested in compliance with Metro-Dade County Protocol PA 105. If the fastener values as tested are below those listed in the System Limitations, a professional engineer may submit a revised fastener spacing utilizing the withdrawal resistance value taken from a Metro-Dade County Protocol PA 105 test report and calculations that comply with the wind load requirements of Chapter 23 of the South Florida Building Code and Roofing Application Standard PA 117.
- 11 Fastener spacing for insulation attachment is based on a Minimum Characteristic Force (F') value of 275 lbf., as tested in compliance with PA 105. If the fastener value, as field tested, are below 275 lbf. insulation attachment shall not be acceptable.
- 12 Asphalt moppings shall be with applied with approved asphalt and shall be in compliance with equiviscous temperature (EVT) methods of asphalt determination. Asphalt containers or bulk tickets shall indicate an EVT, finished blowing temperature (FBT) and flash point. Asphalt types and temperature ranges shall be in compliance with Subsection 3403.4(a)(3) of the South Florida Building Code.
- 13 Insulation may be installed in multiple layers. The first layer shall be attached in compliance with Product Control Approval guidelines. All other layers shall be adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq., or mechanically attached using the fastening pattern of the top layer. Refer to manufacturer's literature and/or the NRCA Roofing and Waterproofing Manual for correct application procedures of insulation panels in approved asphalt or adhesive, which shall comply with provision of Roofing Application Standard PA 117.



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Roofing Product Control Examiner

- 14 All standard panel sizes are acceptable for mechanical attachment. When applied in approved asphalt, panel size shall be 4' x 4' maximum.
- 15 In re-recovery/re-roofing applications, prior to the application, all existing roof surfaces used as a bonding substrate shall be tested in compliance with Metro-Dade County Protocol PA 124 for uplift resistance. Test pressures shall be calculated in compliance with the wind load requirements of Chapter 23 of the South Florida Building Code to the design pressure of the roof.
- 16 In re-roofing applications, moisture content in an existing roof must be in compliance with Section 3401.10(m), (n) of the South Florida Building Code.
- 17 Roll good materials shall be stored on end and on a clean, flat and dry surface.
- 18 If required, any Factory Mutual Approved vapor barrier in conjunction with proprietary or approved adhesives may be used prior to the application of the insulation layer.
- 19 Consult current Underwriters Laboratories Directory for the appropriate coating for each roofing assembly to obtain the required fire rating. The assembly shall be installed in strict compliance with sections 3401.5 and 3401.6 of the South Florida Building Code for maximum fire classification.
- 20 The maximum designed pressure limitation listed shall be applicable to all roof pressure zones (i.e. field, perimeters, corners). No rational analysis, nor extrapolation shall be permitted for enhanced fastening at enhanced pressure zones (i.e. perimeters, extended corners, and corners). **(When this limitation is specifically referred within this NOA, General Limitation #7 will not be applicable.)**



Frank Zuloaga,
Roofing Product Control Examiner


GAF Materials Corporation
1361 Alps Road
Wayne, NJ 07470

ACCEPTANCE NO.: 97-0814.14
APPROVED: November 6, 1997
EXPIRES: November 6, 2000

NOTICE OF ACCEPTANCE STANDARD CONDITIONS

- 1 Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documentation, 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: "Metro-Dade County Product Control Approved", 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 Metro-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 times. The copies need not be resealed by the engineer.
- 8 Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
- 9 This Acceptance contains pages 1 through 61

END OF THIS ACCEPTANCE



Frank Zuloaga,
Roofing Product Control Examiner

A & W

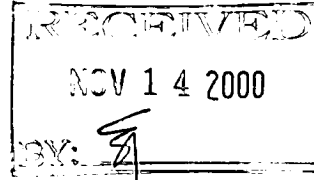
ROOFING DIVISION

CONSTRUCTION

EST. 1982

November 13, 2000

FILE



Gibson Residence
134 S. River Road
Sewalls Point, FL 34996

To Whom It May Concern:

Please be advised that the existing flat deck at the above referenced property is structurally tapered to provide positive pitch of 1/4" per foot. There is no possibility of any ponding water.

Respectfully,

Kristopher Ashenback
Lic.# CCC057686

A&W CONSTRUCTION, ROOFING DIVISION

BY:
Authorized Signature

Date: 11/13/00

STATE OF FLORIDA)

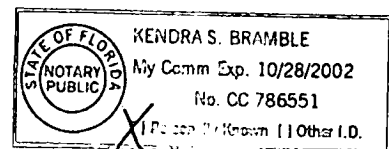
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COUNTY OF MARTIN)

Sworn to and subscribed before me this 13th day of November, 2000 by KRISTOPHER ASHENBACK, who is personally known to me and who did not take an oath.

Notary Signature

Seal:



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ~~11-29~~, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ S (2)	4978 Rimer/Bird 29 S. River Rd. Lear	tie down of studio	PASSED g	
✓ S (6)	5167 Gibson 194 S. River Rd. A & W	sheathing	PASSED g	
✓ N (3)	4813 Follweiler 11 Lofting Way NE ARK	storm shutters (REINSPECT)	PASSED g	10:30 ✓ FINAL INSP. COMPLETE - OK FOR C.O.
✓ N (4)	4527 SEELY 37 NE LOFTING WAY GRIBBEN	DRY WALL + NAIL (REINSPECT - GARAGE)	PASSED g	
✓ N (7)	5086 Karr 1 Paloma Conway	mech. FRAMING (AW)	PASSED g	
✓ S (5)	5075 Vasquez 82 S.S.P. Rd. GROZA	sheathing (ROOF. 2ND PT.)	PASSED g	
✓ S (4)	4965 Danielson 161 S. River Rd. Miller	steps	PASSED g	9:30 +

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ~~Mon or Wed~~ ~~Thu~~ ~~12-11~~ , 2000;

Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5013	Dennis	partial	PASSED	SEALED EDGES. REV. DUGS
S (4)	16 Ridgeland FL. FINEST	beam & col	(PTC) E	REQUIRED FOR INSP. (SHT A.S.1 - SLABS)
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5161	BRENNAN	TEMP. POWER	PASSED	LATE AM
S (5)	111 Henry Sewall ^{LDY} Glenmark	FRONT TO (RESCHEDULE FOR 12/6)	E	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5063	ROBINSON	Beam & col	PASSED	
S (3)	173 S. River Rd DRIFTWOOD HOMES	1st FL. (PTC).	E	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5171	NADIR	INTAGR	X	CANCEL BY CONTR 12/4
S X	8 Heron's Nest Pacific Roofing		X	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5170	N.W. BANK	INTERING	PASSED	LATE AM
S (6)	18 Heron's ^{ROB} Pacific Roofing ²⁶³⁻⁰¹¹⁶		E	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5086	KARR	Insulation	PASSED	
N (8)	1 Palama Wy Conway		E	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5177	GIBSON	FRONT	X	CANCEL BY CONTR 12/4
S X	144 S. Green A+W Roofing		X	(RESCHED. 12/6)

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed 12/6, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5167	GIBSON	FINAL (RM)	PASS	12/6/00
S (3)	134 S. RIVER RD. A&W RFG.			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5013	Dennis	beam (SLABS)	FAILED	REV. EDGE 'G RCM 12/5/00
S (6)	16 Ridgeland Flo's Finest			PTC (BSP. 12/4/00 → PTC NOT PER EDGE 'G.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5161	Brennan	footing	PASSED	
S (5)	111 H. Sewall Way Hutchins			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5132	Brent	Roof - final	Pass	12/6/00
N (4)	16 Knowles. A&W Roofing			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5170	NW Bank Minn.	tin tag &	Pass	12/6/00
S (2)	18 Heron's Nest Pacific	metal		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5168	Schulk	dry-in		
S (1)	8 Palm Road Pacific A&W	metal/Tin Tag	Pass	12/6/00
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
T/R	ACRES 288-2833	FIELD VERIF.	PASSED	
S (7)	15 S. RIVER RD MONTE'S TREE SERVICE	(2ND ATTEMPT)		

OTHER: _____

INSPECTOR (Name/Signature): _____
 NOTE: ALL INSPECTIONS BY HELMUT GUNDELE UNDER DIRECT SUPERVISION OF BLDG. OFFICER. →

5606

PAVER DRIVEWAY

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 11/27/01

BUILDING PERMIT NO. 5606

Building to be erected for MR. & MRS. GIBSON

Type of Permit PAVER DRIVE

Applied for by CHITWOOD + CO.

(Contractor)

Building Fee \$40.00

Subdivision KINGSTON CT.

Lot 7

Block _____

Radon Fee _____

Address 134 S. RIVER RD.

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

1338410100000007000000

Roofing Fee _____

Amount Paid 44⁰⁰ Check # 2643 Cash _____

Other Fees (PLAN REV.) \$4.00

Total Construction Cost \$ \$4,180.00

TOTAL Fees \$44.00

Signed D. Chitwood

Signed _____

Applicant

Town Building Inspector
OFFICIAL

BUILDING PERMIT

FORM BOARD SURVEY DATE _____
 COMPACTION TESTS DATE _____
 GROUND ROUGH DATE _____
 SOIL POISONING DATE _____
 FOOTINGS / PIERS DATE _____
 SLAB ON GRADE DATE _____
 TIE-BEAMS & COLUMNS DATE _____
 STRAPS AND ANCHORS DATE _____
 DRIVEWAY DATE _____
 AS-BUILT SURVEY DATE _____

SHEATHING DATE _____
 FRAMING DATE _____
 INSULATION DATE _____
 ROOF DRY-IN DATE _____
 ROOF FINAL DATE _____
 METER FINAL DATE _____
 AS BUILT SURVEY DATE _____
 STORM PANELS DATE _____
 LANDCAPE & GRADE DATE _____
 FINAL INSPECTION DATE 3/4/02

FLOOD ZONE _____

LOWEST HABITABLE FLOOR ELEV. _____

24 HOURS NOTICE REQUIRED FOR INSPECTIONS.

CALL 287-2455

WORK HOURS – 8:00 AM UNTIL 5:00 PM

MONDAY THROUGH SATURDAY

New Construction Remodel Addition Demolition

This permit must be visible from the street, accessible to the inspector.

FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT,
 NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.
 DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Building Permit Number: 5604

Owner or Titleholder Name: Mrs Mrs Gibson City: SEWALL'S POINT State: FL Zip: 34995

Legal Description of Property: Kingston Court, Lot 7 Parcel Number: 133841010000007000000

Location of Job Site: 134 South River Road Type of Work To Be Done: BRICK PAVEMENT INSTALLATION

CONTRACTOR/Company Name: CHITWOOD COMPANY Phone Number: (861) 220 1767

Street: 5653 SE LAMAY DRIVE City: SMART State: FL Zip: 34997

State Registration Number: State Certification Number: Martin County License Number: SP 01559

ARCHITECT: Phone Number:

Street: City: State: Zip:

ENGINEER: Phone Number:

Street: City: State: Zip:

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

Carport: Total Under Roof Wood Deck: Accessory Building:

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

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

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

COST AND VALUES Estimated Cost of Construction or Improvements: 4,180.00 Estimated Fair Market Value (FMV) Prior

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

SUBCONTRACTOR INFORMATION

Electrical: State: License Number:

Mechanical: State: License Number:

Plumbing: State: License Number:

Roofing: State: License Number:

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) South Florida Building Code (Structural, Mechanical, Plumbing, Gas) 94 w/ add

National Electrical Code 1999 Florida Energy Code 1997

Florida Accessibility Code 1997

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

OWNER OR AGENT SIGNATURE (Required)

State of Florida, County of: Martin

This the 16th day of November, 2001

by who is personally

known to me or produced

as identification.

Notary Public

My Commission Expires: Linda A. Demeritt

CONTRACTOR SIGNATURE (Required)

On State of Florida, County of: Martin County

This the 14th day of November, 2001

by Darlene Chitwood who is personally

known to me or produced

As identification. FL DL # C330-172-50-525-0

Notary Public

My Commission Expires: Dec 17, 2004

Seal



Linda A. Demeritt MY COMMISSION # CC694264 EXPIRES February 26, 2002 BONDED THRU TROY FAIR INSURANCE, INC.



Carmen L. Rodriguez Commission # CC 988597 Expires Dec 17, 2004 Bonded Thru Atlantic Bonding Co., Inc.

ACORD

CERTIFICATE OF LIABILITY INSURANCE

OP ID SB
CHITM-1

DATE (MM/DD/YY)
01/18/01

PRODUCER

Stuart Insurance, Inc.
3070 S W Mapp
Palm City FL 34990
Phone: 561-286-4334 Fax: 561-286-9389

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

INSURERS AFFORDING COVERAGE

INSURED

Marvin Chitwood dba Chitwood & Company
5653 SE Lamay Drive
Stuart FL 34997

Mc/Dir

INSURER A: Owners Insurance Company

INSURER B:

INSURER C:

INSURER D:

INSURER E:

RECEIVED

JAN 23 2001

BY: *[Signature]*

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR Contractual Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	20556575-00	01/14/01	01/14/02	EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
	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 \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- TORY LIMITS OTH- ER 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

Driveways Installation / State of Florida

CERTIFICATE HOLDER

N ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

TOWSP-1

Town of Sewalls Point
1 South Sewalls Point Road
Sewalls Point FL 34996

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

AUTHORIZED REPRESENTATIVE

Vicki Hill, CIC

Certificate of Insurance

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

Named Insured(s):

PLC

Staff Leasing, LP, By Staff Acquisition, Inc., The General Partner, And The Affiliated Limited Partnerships Of Which Staff Acquisition, Inc. Is The General Partner And Staff Leasing, Inc. Is The Limited Partner including Staff Leasing of Texas, LP, Staff Leasing of Texas II, LP, Staff Leasing IV, LP
600 301 Boulevard West, Suite 202
Bradenton, Florida 34205



Insurer Affording Coverage

Continental Casualty Company

Coverages:

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

Type of Insurance	Certificate Exp. Date <input type="checkbox"/> Continuous <input type="checkbox"/> Extended <input checked="" type="checkbox"/> Policy Term	Policy Number	Limits	
Workers' Compensation	1-1-2002	WC 189165165 WC 189165182 WC 247848874 WC 247848888	Employer's Liability	
			Bodily Injury By Accident \$1,000,000	Each Accident
			Bodily Injury By Disease \$1,000,000	Policy Limit
			Bodily Injury By Disease \$1,000,000	Each Person

Other:

Employees Leased To:
9322 Chitwood & Company
Marvin Chitwood DBA

Effective Date: 1/1/01

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

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

Notice of Cancellation: (Not applicable unless a number of days are entered below)

Before the stated expiration date the company will not cancel or reduce the insurance afforded under the above policy(ies) until at least 30 days notice of such cancellation has been mailed to:

Certificate Holder:

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



Martin Oosterbaan
Authorized Representative

Office: St. Louis, MO 12/15/00
Phone: (877) 427-5567 Date Issued

ORIGINAL FOR MARTIN COUNTY REAL ESTATE

I.D. NUMBER: 13-38-41-010-000-00070.00000
ASSESSED VALUE: 408,753 EXEMPTIONS:

2001 TAX DISTRICT: 2200
00 TAXABLE VALUE: 408,753

COUNTY	COUNTY-GENERAL FUND-OP	5.4910	2,244.46
	CNTY-F.I.T. BOND	.0620	25.34
	CNTY-GOVT BONDS 1986	.2920	119.36
	CNTY-BONDS LANDS FOR YOU	.1570	64.17
SCHOOL	SCHOOL-GENERAL FUND	8.4150	3,439.66
CHLD SVC	CHILDRENS SERVICES ORDNCS	.3143	128.47
F.I.N.D.	FL-INLAND NAVIGATION DIST	.0385	15.74
CITY	SEWALLS POINT	1.8890	772.13
S.F.W.M.	SOUTH FLA WATER MANAGEMNT	.6970	284.91

TOTAL MILLAGE 17.35580 AD VALOREM TAXES 7,094.24

COMBINED TAXES & ASSESSMENTS TOTAL: 7,094.24

EXEMPTION:NONE

13 38 41
KINGSTON COURT LOT 7

PROPERTY
ADDR:134 S RIVER RD SP



13-38-41-010-000-00070.00000 2001
GIBSON, STEPHEN P & JULIE L
134 S RIVER RD
STUART FL 34996-6328

NOV 1-NOV 30	DEC 1-DEC 31	JAN 1-JAN31	FEB 1-FEB28	MAR 1-MAR 31	DELINQUENT ON
6,810.47	6,881.41	6,952.36	7,023.30	7,094.24	APRIL 1, 2002

ORIGINAL FOR MARTIN COUNTY REAL ESTATE

NOV 1-NOV 30	DEC 1-DEC 31	JAN 1-JAN31	FEB 1-FEB28	MAR 1-MAR 31	DELINQUENT ON
6,810.47	6,881.41	6,952.36	7,023.30	7,094.24	APRIL 1, 2002

ASSESSED TAXABLE	408,753	2200 TAXES TOTAL	7,094.24	HON. LARRY C. O'STEEN
	408,753		7,094.24	P.O. BOX 9013
				STUART, FL 34995

13 38 41
KINGSTON COURT LOT 7

13-38-41-010-000-00070.00000 2001
GIBSON, STEPHEN P & JULIE L
134 S RIVER RD
STUART, FL 34996-6328

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____ TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF Florida COUNTY OF MARTIN

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

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

134 SOUTH RIVER ROAD, SUAPT, FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: REICK PAVEMENT APRONS TO ENDS OF DRIVEWAY

OWNER: MR & MRS GIBSON

ADDRESS: 134 SOUTH RIVER ROAD, SUAPT, FL 34996

PHONE #: (561) 286 5258 **FAX #:** 283 2094

CONTRACTOR: CHILWOOD & COMPANY

ADDRESS: 5653 S.E. LAMAR DRIVE, SUAPT, FL 34997

PHONE #: (561) 220 467 **FAX #:** (561) 781 1357

SURETY COMPANY(IF ANY): _____ **STATE OF FLORIDA**

ADDRESS: _____ **MARTIN COUNTY**

PHONE #: _____ **FAX #:** _____

BOND AMOUNT: _____

LENDER: _____ **BY** T. COPLIS **D.C.**

ADDRESS: _____ **DATE** 11-19-01

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: _____

ADDRESS: _____

PHONE #: _____ **FAX #:** _____

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

PHONE #: _____ **FAX #:** _____

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

Stephen P. Gibson
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 16th DAY OF November 2001 BY _____

PERSONALLY KNOWN
OR PRODUCED ID _____
TYPE OF ID _____

Linda A. Demeritt
NOTARY SIGNATURE
Linda A. Demeritt
MY COMMISSION # CC694264 EXPIRES
February 26, 2002
BONDED THRU TROY FAIR INSURANCE, INC



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Mar 4, 2007 Page 1 of 1.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5636	FRANCIS.	TIE-BEAM	Passed	→ need letter re
(5)	J S. River Rd.	SLAB	Passed	depth of beams!
	WILBOING			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5676	HENRY.	FMM DRIVE.	Passed	Remove bricks!
(1)	B E. NICH POINT RD.		Failed	need swales!
	CHITWOOD.			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5587	WILLIAMS	FINAL DRIVE.	Passed	
(3)	36 FIELDWAY DR			INSPECTOR: <i>[Signature]</i>
	CHITWOOD			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5406	GIBSON	FMM DRIVE	Passed	
(2)	134 S. RIVER RD.			INSPECTOR: <i>[Signature]</i>
	CHITWOOD			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5590	SEBASTIANO.	FMM DRIVE	Failed	not finished
(4)	99 N. SEWALL'S PT RD.			INSPECTOR: <i>[Signature]</i>
	CHITWOOD.			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

6206

WATER DAMAGE

REPAIR

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 3/31/03

BUILDING PERMIT NO. 6206

Building to be erected for GIBSON

Type of Permit WATER DAMAGE REPAIR

Applied for by PAUL DAVIS RESTORATIONS (Contractor)

$35,000 \times 9.60/1000 = 336.00$
Building Fee 336.00

Subdivision KINASTON CT Lot 7 Block _____

Radon Fee _____

Address 134 S RIVER ROAD

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

1338410100000007000000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 336.00 Check # 12610 Cash _____

Other Fees (_____)

Total Construction Cost \$ 35,000.00

TOTAL Fees 336.00

Signed [Signature]

Applicant

Signed [Signature]

Town Building Official

PERMIT

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> BUILDING | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ROOFING | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input type="checkbox"/> DEMOLITION | <input 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 _____ |

Permit Number: _____

Town of Sewall's Point BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: STEVE & JULIE GIBSON Phone (Home) 772-286-5258 (Work) 772-285-9045

Job Site Address: 134 S. River Rd City: SEWELL'S PT State: FL Zip: 34996

Legal Description of Property: Kingston Ct Lot 7 Parcel Number: _____

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

Description of Work To Be Done: repair water damage to drywall & insulation & cabinets

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

CONTRACTOR/Company Name: PAU DAVIS RESTORATIONS Phone Number: 772-340-2080

Street: 1950 SW Biltmore St City: PSL State: FL Zip: 34984

State Registration Number: _____ State Certification Number: EGCA17648 Martin County License Number: _____

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 35,000 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: N/A State: FL License Number: 29683
 Mechanical: PREP (Tech Art) State: FL License Number: 29683
 Plumbing: _____ State: _____ License Number: _____
 Roofing: _____ State: _____ License Number: _____

ARCHITECT N/A Phone Number: 1321
Street: _____ City: _____ State: _____ Zip: _____

ENGINEER Tech Art Design & Engineer Phone Number: 1-772-663-6991
Street: 8530 US#1 Unit 8 City: MICCO State: FL Zip: 32926

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 3400 Garage: 400 Covered Patios: _____ Screened Porch: _____
Carpport: N/A Total Under Roof: 3800 Wood Deck: N/A Accessory Building: N/A

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.

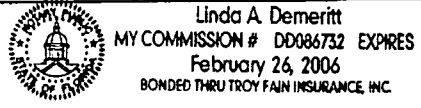
OWNER OR AGENT SIGNATURE (required)
Julie Gibson - Stephen P. Gibson
 State of Florida, County of: _____
 This the 25th day of March, 2003
 by _____ who is personally
 known to me or produced _____
 as identification. _____

CONTRACTOR SIGNATURE (required)
D.J. Ottaviani For POR
 On State of Florida, County of: Manatee
 This the 27th day of March, 2003
 by D.J. Ottaviani who is personally
 known to me or produced Fl. d.l.
 As identification. Joan H. Barrow

My Commission Expires: _____
Notary Public Linda A. Demeritt
Seal

My Commission Expires: _____
Notary Public
Seal

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



ACORD

DATE (MM/DD/YY)

03/25/2003

PRODUCER
 INSURANCE MATTERS OF FLORIDA INC.
 1781 NO. CONGRESS AVE.
 BOYNTON BEACH, FL. 33426
 561-736-2277

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

COMPANIES AFFORDING COVERAGE

COMPANY
A NATIONAL INS CO

INSURED
 PDS OF THE TREASURE COAST INC.DBA
 PAUL DAVIS SYSTEMS OF THE
 TREASURE COAST & THE SPACE COAST
 1950 BILTMORE STREET
 PORT ST.LUCIE, FL. 34984

COMPANY
B
 COMPANY
C
 COMPANY
D

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR OWNER'S & CONTRACTOR'S PROT	CLP01008282	06-01-02	06-01-03	GENERAL AGGREGATE \$2,000,000
					PRODUCTS - COMP/OP AGG \$1,000,000
					PERSONAL & ADV INJURY \$1,000,000
					EACH OCCURRENCE \$1,000,000
					FIRE DAMAGE (Any one fire) \$ 100,000
					MED EXP (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT \$
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$
					OTHER THAN AUTO ONLY:
					EACH ACCIDENT \$
A	EXCESS LIABILITY <input checked="" type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	CU0000280	06-01-02	06-01-03	EACH OCCURRENCE \$1,000,000
					AGGREGATE \$1,000,000
					\$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL				WC STATU- TORY LIMITS <input type="checkbox"/> OTH- ER <input type="checkbox"/>
					EL EACH ACCIDENT \$
					EL DISEASE - POLICY LIMIT \$
					EL DISEASE - EA EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATION/LOCATION/VEHICLE/SPECIAL ITEMS

RESTORATION OF DAMAGED PROPERTY

*EXCEPT 10 DAY NOTICE FOR NON-PAYMENT OF PREMIUM

SEWALLS POINT TOWNHALL
 SOUTH SEWALLS POINT ROAD
 SEWALLS POINT, FL 34996

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

AUTHORIZED REPRESENTATIVE

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE
3/25/2003

PRODUCER:
BOUCHARD INSURANCE, INC.
101 STARCREST DRIVE
PO BOX 6090
CLEARWATER, FL 33758-6090
PHONE: 727-447-6481 FAX: 727-449-1267

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:
SOUTHEAST PERSONNEL LEASING
905 MLK JR. DRIVE SUITE 110
TARPON SPRINGS, FL 34689
PHONE: 7279385562

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: AMERICAN CASUALTY COMPANY OF READING, PA	
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 ADDL LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
						DAMAGE TO RENTED PREMISES (EA OCCURENCE)	\$
						MED EXP	\$
						PERSONAL & ADV INJURY	\$
						GENERAL AGGREGATE	\$
						PRODUCTS - COMP/OP AGG	\$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA ACCIDENT)	\$
						BODILY INJURY (PER PERSON)	\$
						BODILY INJURY (PER ACCIDENT)	\$
						PROPERTY DAMAGE (PER ACCIDENT)	\$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN AUTOS ONLY: EA ACC	\$
						AGG	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? IF YES, DESCRIBE UNDER SPECIAL PROVISIONS BELOW	WC247857915	12/31/2002	4/30/2003	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	
						E.L. EACH ACCIDENT	\$1000000
						E.L. DISEASE - EA EMPLOYEE	\$1000000
						E.L. DISEASE - POLICY LIMIT	\$1000000
		OTHER	3/25/03 MAIL HOLDER (LM)				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:
 COVERAGE APPLIES ONLY TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF PAUL DAVIS SYSTEMS OF THE CLIENT # 1355005 ADD ON DATE 08/30/00

CERTIFICATE HOLDER

SEWALLS POINT TOWN HALL
 SOUTH SEWALLS POINT ROAD
 SEWALLS POINT, FL 34996

CANCELLATION

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

AG# 0453609

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L0206110102

DATE	BATCH NUMBER	LICENSE NBR
06/11/2002	011130316	CGCA17648

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

CAROTHERS, GARY D
PAUL DAVIS SYSTEMS/TREASURE COAST
1242 SW KNOLLWOOD DRIVE
PALM CITY FL 34990

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER
SECRETARY

OCCUPATIONAL TAX RECEIPT

CITY OF PORT ST. LUCIE

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

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

TERM: October 1, 2002 to September 30, 2003

THIS IS A RECEIPT FOR TAX PAID AND IS NOT REGULATORY IN NATURE
This license does not warrant or hold that the licensee is competent to perform in the business(es) as licensed, but that the
licensee has paid the required fee(s) and provided the necessary documentation (if required) to be licensed in this business.
LICENSE MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS.

VALID AT THIS BUSINESS ADDRESS ONLY

Business Address: 1950 SW BILTMORE ST

Classification: CONT CONTRACTOR

Issued to: PAUL DAVIS SYSTEMS OF THE TREASURE COAST
1950 SW BILTMORE ST

PORT ST LUCIE FL 34984

Business/Lic. 112173/03-1016608

Fee: 110.25
Discount: 0.00

Mary S. Masto
BUSINESS LICENSE COORDINATOR

Fees: 110.25 Late Fees: 0.00 Total this payment : 110.25 **BUSINESS COPY**

667/123 KA

2002-2003

ST. LUCIE COUNTY OCCUPATIONAL LICENSE
STATE OF FLORIDA

ACCOUNT 7299-00960209

EXPIRES SEP 30, 2003

FACILITIES ROOMS SEATS EMPLOYEES 6+

7299 PUB SERV/CARPET CLEANING

X RENEWAL
NEW LICENSE
TRANSFER-
ORIGINAL TAX 25.00

1950 SW BILTMORE ST
P - CITY OF PT ST LUCIE
PAUL DAVIS SYSTEMS OF THE T C
CAROTHER, GARY/EDWARDS, MICHAEL
1950 SW BILTMORE STREET
PORT ST LUCIE, FL 34983

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

NOTICE OF COMMENCEMENT

Permit No. _____
State Of Florida

Tax ID # _____
County Of _____

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 134 S RIVER Rd. Kingstow Ct Lot 7
SEWELL'S POINT, FL. MARTIN COUNTY, FL

General description of improvements Repair Insulation, Drywall + Cabinets From water Damage
Owner STEVE + JULIE GIBSON
Address 134 S. RIVER Rd. STUART, FL. 34996
Owner's interest in site of improvement _____

Fee Simple Title holder (if other than owner) _____
Address _____

Contractor Paul Davis Restorations of the Trpswe Coast Phone # 772-340-2080
Address 1950 SW Biltmore St. PSL, FL 34984 Fax # 772-340-2469

Surety N/A Phone # _____
Address _____ Fax # _____
Amount of Bond \$ _____

Lender HOMESIDE LENDING INC. Phone # _____
Address _____ Fax # _____

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

Name _____ Phone # _____
Address _____ Fax # _____

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


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

Stephen P. Gibson
OWNERS SIGNATURE

STATE OF FLORIDA, COUNTY OF Martin
Acknowledged before me this 25th day of March, 2003, by _____, who is personally known to me or
who has produced _____ as identification.

(seal)

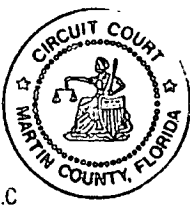
Linda A. Demeritt
SIGNATURE OF NOTARY
Linda A. Demeritt
TYPE OR PRINT NAME OF NOTARY

 Linda A. Demeritt
MY COMMISSION # DD086732 EXPIRES
February 26, 2006
BONDED THRU TROY FAIR INSURANCE INC.

NOTARY PUBLIC TITLE
DD086732 COMMISSION NUMBER

STATE OF FLORIDA
MARTIN COUNTY
THIS IS TO CERTIFY THAT THE
FOLLOING 1 PAGES IS A TRUE
& CORRECT COPY OF THE ORIGINAL

CERK
Linda Perren D.C.
3-25-03



ARTHUR F. PRIEP, P.E.

March 26, 2003

8530 U.S. Highway 1, Suite 8
Micco, Florida 32976

Phone (772) 664-8893
Fax (772) 664-8893

Paul Davis Restoration
3815 N. U.S. Highway 1, Suite 8
Cocoa, Florida 32926

RE: *Gibson Residence*
134 S. River Road, Stuart, FL
Water Damaged House

To Whom It May Concern:

A site inspection was made to the above-referenced residence on March 24, 2003, to assess any potential structural damage due to water intrusion into the roof truss system.

Heavy rain apparently resulted in water build-up on the low pitch parapet wall roof. Rapid built-up of the water level on the roof caused water to back-flow through the roof vents and flood the attic space. The damaged ceiling and insulation had been removed in several areas, thereby exposing the roof trusses and bottom of the roof plywood sheathing.

There did not appear to be any structural damage to the roof truss system. One area at the hallway leading to the Master Bathroom showed evidence of prior leaking and darkening of the roof sheathing. I recommend adding a 2x4 Y.P. scab approximately 4' in length to the top chord of this truss with 12d nails @ 8" O.C. to provide more support for this sheathing. The area of leaking should be investigated on the roof and repaired.

One other area of concern was over the Master Bedroom sliding glass door. The homeowner pointed out that the door was dragging slightly after this flooding occurred in the area of this door. The header over this door receives roof truss loading from the Master Bedroom and rear porch. It is possible that slight weakening and sagging of this header could cause the sliding glass door to stick and/or drag. I recommend a minimum 2x8 Y.P. strongback be added just above this sliding glass door in the vertical web of the floor trusses. Extend the 2x8 a minimum of (2) trusses past the opening each side of the sliding glass door. Nail this strongback to each truss with (3) 16d nails. Install the strongback with the crown up and shim the top of the door frame/header up slightly prior to nailing.

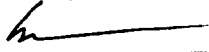
Inspection of the roof showed no structural damage. The screening over a couple of the roof drains were partially clogged with debris. The homeowner indicated that the drain pipe screening would be enlarged to help prevent clogging of the drains. Also, a scupper will be installed through the parapet wall in the low area of the roof to help relieve water build up.

Please feel free to contact me if you have any further questions or concerns.

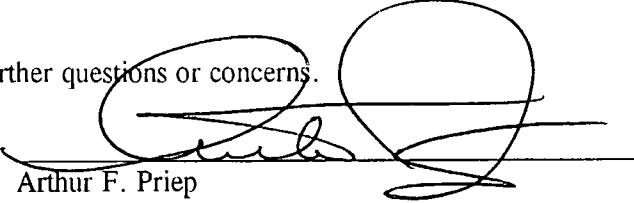
FILE COPY

TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE

DATE: 3/28/03



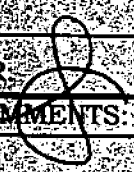

BUILDING OFFICIAL
Gene Simmons


Arthur F. Priep
Professional Engineer #24683

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/2, 2003 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5960	LEWIS	LATH	Pass	
⑥	41 RIO VISTA DR DRIEWOOD CONS			INSPECTOR: 
6295	GIBSON	INSULATION	Pass	9/10
④	1345 RIVER ROAD PAUL DAVIS RES			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
				INSPECTOR:

OTHER: _____

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 2-25 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
8589	Hardin	Final	CANCEL	
4	27 Skiver Rd Stratton			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9104	Jenkins	Final	PASS	CLOSE
5	3 Heritage Way Am Palm Beach	GAR. DOOR		INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9084	Stark	Final	PASS	CLOSE
1	87 Skiver Rd Emil LaTula	(deck)		INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9095	Orlandi	in-progress	PASS	
3	8 Subal Ct Gay Mary			INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9101	Smith	Final	PASS	CLOSE
2	2 Morgan Cir Keith Halberger	SLAB.		INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
6206	Gibson	Final	PASS	CLOSE
	134 Skiver Davis			INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

6220

SKYLIGHT

TOWN OF SEWALL'S POINT

Date 4/11/03

BUILDING PERMIT NO. 6220

Building to be erected for GIBSON Type of Permit _____

Applied for by FRONTERA ROOFING (Contractor) Building Fee 35.00

Subdivision KINASTON CT Lot 7 Block _____ Radon Fee _____

Address 134 S. RIVER ROAD Impact Fee _____

Type of structure SFR A/C Fee _____

Parcel Control Number: _____ Electrical Fee _____

13-38-41-010-000-000700 Plumbing Fee _____

Amount Paid 35.00 Check # 5766 Cash _____ Other Fees (_____) _____ Roofing Fee _____

Total Construction Cost \$ 2350.00 TOTAL Fees 35.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> BUILDING | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ROOFING | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input type="checkbox"/> DEMOLITION | <input 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 _____ |

"Roof Repair"

Permit Number: _____

Town of Sewall's Point BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: Stephen + Julie Gibson Phone (Home) 286-5258 (Work) _____

Job Site Address: 134 S. RIVER RD. City: STUART State: FL Zip: 34996

Legal Description of Property: KINGSTON COURT LOT 7 Parcel Number: 13-38-41-010-000-0007.0-0

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

Description of Work To Be Done: Replace 2 vents, install 3 drain screens, install overflow drain in wall. RAISE SKYLIGHT. install new skylight dome.

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

CONTRACTOR/Company Name: STEVE FRONTERA ROOFING INC. Phone Number: 336-3880

Street: P.O. BOX 91601 City: PORT ST LUCIE State: FL Zip: 34985

State Registration Number: RC-0066919 State Certification Number: _____ Martin County License Number: SP02630

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 2350.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT N/A Phone Number: _____

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

ENGINEER N/A 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)
[Signature]
State of Florida, County of: St Lucie
This the 10 day of April, 2003
by Steve Frontera who is personally
known to me or produced [Signature]
as identification. [Signature]

CONTRACTOR SIGNATURE (required)
[Signature]
On State of Florida, County of: St Lucie
This the 10 day of April, 2003
by Steve Frontera who is personally
known to me or produced [Signature]
as identification. [Signature]

Notary Public Dawn L Pendleton
My Commission Expires: 3/10/06 My Commission DD098799 Expires March 10, 2006

Notary Public Dawn L Pendleton
My Commission Expires: 3/10/06 My Commission DD098799 Expires March 10, 2006

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



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(904) 727-6530

FRONTERA, STEVE
STEVE FRONTERA ROOFING INC
P O BOX 9661
PORT SAINT LUCIE FL 34985-9661

STATE OF FLORIDA AC# 0063487
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 RC -0066919 06/12/2001 00902745
 REGISTERED ROOFING CONTRACTOR
 FRONTERA, STEVE
 STEVE FRONTERA ROOFING INC
 (INDIVIDUAL MUST MEET ALL LOCAL LICENSING REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)
 HAS REGISTERED under the provisions of Ch.489 FS
 Expiration date: AUG 31, 2003 SEQ # 01061201370

DETACH HERE

AC# 0063487

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST INDUSTRY LICENSING BOARD

SEQ# 01061201370

DATE	BATCH NUMBER	LICENSE NBR
06/12/2001	00902745	RC -0066919

The ROOFING CONTRACTOR
 Named below HAS REGISTERED
 Under the provisions of Chapter 489 FS.
 Expiration date: AUG 31, 2003
 (INDIVIDUAL MUST MEET ALL LOCAL LICENSING REQUIREMENTS
 PRIOR TO CONTRACTING IN ANY AREA)

FRONTERA, STEVE
 STEVE FRONTERA ROOFING INC
 P O BOX 9661
 PORT SAINT LUCIE FL 34985-9661



JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER
SECRETARY

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID CN
STEVE-4

DATE (MM/DD/YYYY)
04/08/03

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.

INSURED

Steve Frontera Roofing, Inc.
PO Box 9661
Pt St Lucie FL 34985-9661

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: North Pointe Insurance
INSURER B: Transcontinental Insurance Co
INSURER C: FCCI Insurance Co
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 <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENTL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	209410325200	12/15/02	12/15/03	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 1,000,000
B	AUTOMOBILE LIABILITY <input checked="" 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	B1099445657	07/20/02	07/20/03	COMBINED SINGLE LIMIT (Ea accident) \$ 100,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	001WC03A45605	03/21/03	03/21/04	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
	OTHER				

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

CERTIFICATE HOLDER

CANCELLATION

Town of Sewalls Point
Fax 561-220-4765
Edwin B Arnold/Town Hall
1 South Sewalls Point Road
Sewalls Point FL 34996

SEWAL-1

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.






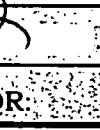

AUTHORIZED REPRESENTATIVE
Cindy McCall

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/30, 2003 Page 1 of 2

N
N

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6212	WATSON	SUBFACIA	Passed	
(1)	30 N. RIVER ROAD			
	TREASURE CO			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	GIFFORD	TREE	Passed	
(2)	85 N. SEWALLS PT			
				INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	ARCH	TREE	Passed	
(a)	18 PALM ROAD			
				INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	ARCH/PALM ROW INC	TREE	Passed	
(11)	120 S. SEWALLS PT			
				INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	ROBERTS	TREE	Passed	
(b)	12 N. RIDGEVIEW RD			
				INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6163	HICKS	SPA PLUMBING	Failed	
(c)	7 EMARITA			
	ADVANTAGE POOLS			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6220	GIBSON	FINAL	Nobody home, no access	
(12)	134 S. RIVER ROAD			
	STEVE FRONTERA			INSPECTOR: 
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/12, 2003 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6255	GOODMAN 6 OAKWOOD SAM CHESS	TIN TAG + METAL	Passed	early INSPECTOR:
6217	PLITT 12 HERON'S NEST ALLAME	FINAL Roof only	Passed	 INSPECTOR:
6131	PFEIFFER 10 HENRY SEWALL BURFORD CONSTR.	Partial Gypsum + Beam PARTIAL EPICORS	Passed Passed	 INSPECTOR:
5949	HOFFLER 173 S. SEWALL'S Pt Rd O/B	FINAL-ADDITION 757 695 & roof	Passed	10/20/11 INSPECTOR:
	Greene 26 Island Rd.	Delive Ings.	Passed	 INSPECTOR:
	Lewis 41 Rio Vista	Pick up drgs.	Passed	 INSPECTOR:
	Greene 134 S. River Rd. Frontier	286 5258	Passed	close roof INSPECTOR:

OTHER: _____

6280

SIDING

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 5/29/03

BUILDING PERMIT NO. 6280

Building to be erected for GIBSON

Type of Permit REPL SIDING

Applied for by MARK LOPEZ

(Contractor) Building Fee 59.52
 $9.60 \times 6200/1000 = 59.52$

Subdivision KINGSTON CT Lot 7 Block _____

Address 134 S. RIVER ROAD

Type of structure SFR

Radon Fee _____

Impact Fee _____

A/C Fee _____

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

TOTAL Fees 59.52

Parcel Control Number:

1338410100000000700

Amount Paid 59.52 Check # 1759 Cash _____

Other Fees (_____)

Total Construction Cost \$ 6200.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

- | | | |
|---|--|--|
| <input type="checkbox"/> BUILDING | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ROOFING | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input type="checkbox"/> DEMOLITION | <input 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 |
| | | <input checked="" type="checkbox"/> REPLACE SIDING |

INSPECTIONS

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

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: Steve Gibson Phone (Day) 286-5258 (Fax) _____
Job Site Address: 134 S. River Rd. City: Stuart State: FL Zip: 34997
Legal Description of Property: Kingston Court Lot 7 Parcel Number: 13-38-41-010-000-0007.0-0
Owner Address (if different): _____ City: _____ State: _____ Zip: _____
Description of Work To Be Done: Replace Rotten T&G siding in areas around house

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

CONTRACTOR/Company: Mark Lopez Carpentry Phone: 561-351-3975 Fax: 561-743-9530
Street: 18997 S.E. Bryant Dr. City: Jupiter State: FL Zip: 33469
State Registration Number: RR0067686 State Certification Number: _____ Martin County License Number: MC00412

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 6,200.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

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

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

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

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

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

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

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

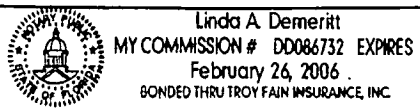
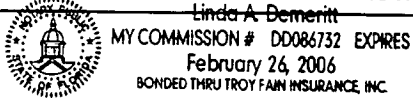
OWNER OR AGENT SIGNATURE (required)
Stephen P. Gibson
State of Florida, County of: Martin
This the 28th day of May, 2003
by _____ who is personally
known to me or produced _____
as identification. _____

CONTRACTOR SIGNATURE (required)
Mark Lopez
On State of Florida, County of: _____
This the 28th day of May, 2003
by _____ who is personally
known to me or produced _____
As identification. _____

My Commission Expires: Linda A. Demeritt
Notary Public
Seal

My Commission Expires: Linda A. Demeritt
Notary Public
Seal

5/29/03 PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROMPTLY!

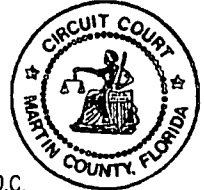


STATE OF FLORIDA
MARTIN COUNTY

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

MARSHA EWING, CLERK

BY T. COPUS D.C.
DATE 5-28-03



Notice of Commencement Form
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:

1. Description of property: 134 S. River Rd. Stuart Fl. 34996
Kingston Court Lot 7 OR Book & Page 1018/1615
2. General description of improvement: Remove and Replace
Some Rotten Siding in areas around house
3. Owner information:
 - A. Name Stephen P. Gibson, Julie L. Gibson
 - B. Address 134 S. River Rd. Stuart Fl. 34996-6328
 - C. Interest in property Owner
 - D. Name and address of fee simple title holder _____

4. Contractor Information:

- A. Name Mark Lopez Carpentry
- B. Address 18997 S.E. Bryant Dr. Jupiter Fl. 33469

5. Surety:

- A. Name N/A
- B. Address _____

6. Lender Information:

- A. Name N/A
- B. Address _____

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

8. In addition to himself, owner designates Mark Lopez Carpentry

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

9. Expiration date of Notice of Commencement (the expiration date is 1 year from the date of the recording unless a different date is specified)...

Signature of Owner

State of Florida
County of Martin

The foregoing instrument was acknowledged before me this 5/28/03 by _____ who is personally known to me or who has produced _____ as identification and who did/did not take an oath.

Notary Linda A. Demeritt

Signature of person taking acknowledgment

Print Name



Linda A. Demeritt
MY COMMISSION # DD086732 EXPIRES
February 26, 2006
BONDED THRU TROY FAIR INSURANCE, INC.



Linda A. Demeritt
MY COMMISSION # DD086732 EXPIRES
February 26, 2006
BONDED THRU TROY FAIR INSURANCE, INC.

RECEIVED
MAY 15 2003
BY:

AC# 0123003

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST INDUSTRY LICENSING BOARD SEQ# 01082100056

DATE	BATCH NUMBER	LICENSE NBR
08/21/2001	01004954	RR - 0067686

The RESIDENTIAL CONTRACTOR
Named below HAS REGISTERED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2003
(INDIVIDUAL MUST MEET ALL LOCAL LICENSING REQUIREMENTS
PRIOR TO CONTRACTING IN ANY AREA)

LOPEZ, MARK A
MARK LOPEZ CARPENTRY
18997 SE BRYANT DRIVE
JUPITER FL 33469

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER
SECRETARY

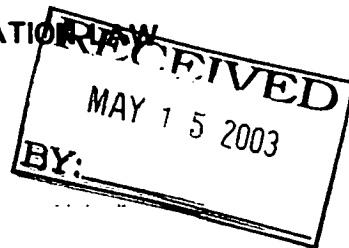


MARTIN COUNTY, FLORIDA
Construction Industry Lic Bd
Certificate of Competency
License: MC00412
Expires September 30, 2003

Name: MARK A LOPEZ
Company: MARK LOPEZ CARPENTRY
Address: 18997 SE Bryant Dr
City, St: Jupiter FL 33469
License Type: RESIDENTIAL CONTRACTOR

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

CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW



CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE	04/28/2003	EXPIRATION DATE	04/27/2005
PERSON	LOPEZ	MARK	
SSN	264-87-7619		
FEIN	264877619		
BUSINESS	MARK LOPEZ CARPENTRY 18997 SE BRYANT DR JUPITER	FL	33469

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

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION		F O L D H E R E	NOTE: Pursuant to chapter 440.10(1),(g),2, F.S., a sole proprietor, partner, or officer of an corporation who elects exemption from the Florida Workers' Compensation Law may not recover benefits or compensation under Chapter 440.
CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW			
EFFECTIVE:	04/28/2003		
EXPIRATION:	04/27/2005		
PERSON:	LOPEZ	MARK	
SSN:	264-87-7619		
FEIN:	264877619		
BUSINESS:	MARK LOPEZ CARPENTRY 18997 SE BRYANT DR JUPITER		FL 33469

CUT HERE

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

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/28/2003

PRODUCER
PALM BEACH INSURANCE GROUP, INC.
13700 US HWY ONE, SUITE 102
JUNO BEACH, FL 33408

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
MARK LOPEZ CARPENTRY
18997 S.E. BRYANT DR
JUPITER, FL 33489

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: ATLANTIC CASUALTY	
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.

INSRT ADDY LTR INSRD	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 checked="" type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	L039000487-0	04/30/03	04/30/04	EACH OCCURRENCE \$ 300,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 1,000 PERSONAL & ADV INJURY \$ 300,000 GENERAL AGGREGATE \$ 300,000 PRODUCTS - COMPROP AGG \$ 300,000
	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 \$
	EXCESS UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE \$ <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER				WC STATU-TORY LIMITS \$ OTH-ER \$ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER

TOWN OF SEWALL'S POINTE TOWN HALL
1 SOUTH SEWALL'S POINTE
SEWALLS POINTE, FL 34986

CANCELLATION

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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Edurna VanZandt

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/20, 2003 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6280	GIBSON	REAL SIDING	Passed	close
(4)	134 S. RIVER RD LOPEZ	FINAL		INSPECTOR:
6092	PLITT	LATH	Failed	(wrong staples)
(10)	12 HERON'S NEST O/B			INSPECTOR:
6106	PLITT	REAL WINDOWS-	Mix up.	not called
(11)	12 HERON'S NEST O/B	FINAL		INSPECTOR:
5945	PLITT	DEMOWALL/DECK	Passed	close
(12)	12 HERON'S NEST O/B	FINAL		INSPECTOR:
6293	Mc GOVERN	FINAL ROOF	Passed	
(12)	2 CASTLE HILL WAY. CERTIFIED INSURANCE	REPAIR.		INSPECTOR:
TREE	COMBS	TREES	Passed	
(5)	1 MANDALAY ISLAND			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER:

8632

STORM SHUTTER



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:	8632	DATE ISSUED:	JUNE 19, 2007
SCOPE OF WORK:	HURRICANE SHUTTERS		
CONTRACTOR:	GULFSTEAM ALUMINUM		
PARCEL CONTROL NUMBER:	133841010000007000	SUBDIVISION	KINGSTON CT - LOT 7
CONSTRUCTION ADDRESS:	134 S RIVER RD		
OWNER NAME:	GIBSON		
QUALIFIER:	JOHN OBRIEN	CONTACT PHONE NUMBER:	772-287-6476

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

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

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

INSPECTIONS

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

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

Date: 6/6/07 6-11-07 **Town of Sewall's Point**
BUILDING PERMIT APPLICATION Permit Number: _____
 OWNER/TITLEHOLDER NAME: Stephen Gibson Phone (Day) 296-5258 (Fax) _____
 Job Site Address: 134 S River Rd City: Stuart State: FL Zip: 34996
 Legal Desc. Property (Subd/Lot/Block) Kingston Court lot 7 Parcel Number: 13-39-41-010-000-00700-0
 Owner Address (if different): _____ City: _____ State: _____ Zip: _____
 Scope of work: Shutters

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
 Estimated Value of Construction or Improvements: \$ 26,036
 (Notice of Commencement required over \$2500)
 Estimated Fair Market Value prior to improvement: \$ _____
 (FOR ADDITIONS AND REMODEL APPLICATIONS ONLY)
 Method of Determining Fair Market Value: _____

CONTRACTOR/Company John O'Brien Phone: 287-6474 Fax: 287-9740
 Street: 309 SW Canal Park City: Stuart State: FL Zip: 34997
 State Registration Number: CRS 05807 State Certification Number: _____ Municipal License Number: _____

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

ENGINEER _____ License # _____ 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: _____

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas) 2004 (w/2006 Rev.)
 National Electrical Code: 2005 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

NOTICES TO OWNERS AND CONTRACTORS:
 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
 2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS TO YOUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 61.05.

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

OWNER OR AUTHORIZED AGENT SIGNATURE (required) Stephen L. Gibson **CONTRACTOR SIGNATURE (required)** John L. O'Brien
 State of Florida, County of: Martin On State of Florida, County of: Martin
 This the 6th day of June, 2007 This the 6th day of June, 2007
 by Stephen L. Gibson who is personally known to me or produced by John L. O'Brien who is personally known to me or produced
 as identification. Kenneth A. King as identification. Kenneth A. King

My Commission Expires: Kenneth A. King MY COMMISSION # DD 334790 MY COMMISSION # DD 334790
 EXPIRES: November 3, 2008 EXPIRES: November 3, 2008
 Bonded To: Secretary Public Underwriters Bonded To: Secretary Public Underwriters

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*generated on 6/6/2007 12:58:26 PM EDT***Summary**

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
13-38-41-010-000-00070-0	134 S RIVER RD	27857	Owner	0	1

Summary

Property Location 134 S RIVER RD
Tax District 2200 Sewall's Point
Account # 27857
Land Use 101 0100 Single Family
Neighborhood 120400
Acres 0.459

Legal Description

Property Information
 KINGSTON COURT LOT 7

Owner Information

Owner Information
 GIBSON, STEPHEN P
 GIBSON, JULIE L

Mail Information

134 S RIVER RD
 STUART FL 34996-6328

Assessment Info

Front Ft. 0.00

Market Land Value \$290,000
Market Impr Value \$414,890
Market Total Value \$704,890

Recent Sale

Sale Amount \$425,000

Sale Date 6/24/1993
Book/Page 1018 1615

Data updated on 06/04/2007

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID LP
GULFS-5

DATE (MM/DD/YYYY)
12/08/06

PRODUCER

R.V. Johnson Agency, Inc.
2041 SE Ocean Blvd
Stuart FL 34996
Phone: 772-287-3366 Fax: 772-287-4255

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

Gulfstream Aluminum & Shutter Corp dba Gulfstream Alum. Prod
3001 SE Gran Parkway
Stuart FL 34997

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Safeco Ins. Co. of America	24740
INSURER B: Auto-Owners Insurance Co	18988
INSURER C: Bridgefield Casualty Ins Co	
INSURER D: Southern Owners Insurance	10190
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	
D	GENERAL LIABILITY	72654247	07/08/06	07/08/07	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 10,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 2,000,000
					PRODUCTS - COM/OP AGG	\$ 2,000,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	Emp Ben.	1,000,000
A	AUTOMOBILE LIABILITY	01CH34890701	11/20/06	11/20/07	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS					
	<input checked="" type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC AGG	\$
						\$
B	EXCESS/UMBRELLA LIABILITY	4514445401	07/08/06	07/08/07	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					\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	196-03957	12/12/06	12/12/07	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input checked="" type="checkbox"/> OTH-ER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$ 500000
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$ 500000
					E.L. DISEASE - POLICY LIMIT	\$ 500000
D	OTHER					
	Equipment Floater	72654247	07/08/06	07/08/07	Leased & Rent Equi	\$60,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
30 days notice of cancellation for workeres compensation coverage.
Companies have the option to cancel 10 days for non-payment.

CERTIFICATE HOLDER

TOWN024

Town of Sewalls Point
1 S. 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 10* DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
AUTHORIZED REPRESENTATIVE
[Signature]

C# 2623157

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L06062001046

DATE	BATCH NUMBER	LICENSE NBR
06/20/2006	050841334	CRC058017

The RESIDENTIAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2008

O'BRIEN, JOHN L
GULFSTREAM ALUMINUM & SHUTTER CORP
3001 SE GRAN PARK WAY
STUART FL 34997

JEB BUSH
GOVERNOR

SIMONE MARSTILLER
SECRETARY

DISPLAY AS REQUIRED BY LAW

AC# 3004012

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L06122800075

DATE	BATCH NUMBER	LICENSE NBR
12/28/2006	060408148	QB52216

The BUSINESS ORGANIZATION
Named below IS QUALIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2007
(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)

GULFSTREAM ALUMINUM & SHUTTER CORPORATION
3001 S.E. GRAN PARK WAY
STUART FL 34997

JEB BUSH
GOVERNOR

SIMONE MARSTILLER
SECRETARY

DISPLAY AS REQUIRED BY LAW

2006-2007 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

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

LICENS# 900-518-0362 CERT _____
PHONE# 772)287-6476 SIC NO 001541

LOCATION:
3001 SE GRAN PARK WAY MAR

RECEIPT of PAYMENT
LARRY C. O'STEEN
99 09/01/2006 NORMA
19000005180036
002 2006 0013523
GULFSTREAM ALUMINUM

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	.00	LIC. FEE \$	25.00
\$	.00	PENALTY \$	.00
\$	.00	COL. FEE \$	.00
\$	.00	TRANSFER \$	.00
TOTAL		25.00	

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

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

01 DAY OF SEPTEMBER 2006
AND ENDING SEPTEMBER 2007

O'BRIEN, JOHN L
GULFSTREAM ALUMINUM & SHUTTER CORP
3001 SE GRAN PARK WAY
STUART, FL 34997



MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency

ALUMINUM/CONCRETE CONTRACTOR

License Number SP00107 Expires: 30-SEP-07

O'BRIEN, JOHN L

GULFSTREAM ALUMINUM PROD INC

3001 SE GRAN PARKWY

STUART, FL 34997

P.001/001

(FAX) 2879740

GULFSTREAM ALUMINUM & SHUTTER

07:56

MAY-19-2006(FRI)

INSTR # 2018672 OR BK 02255 PG 0137 RECD 06/08/2007 01:26:58 PM
Pg 0137; (1ps)
MARSHA EWING MARTIN COUNTY DEPUTY CLERK L GARZA

3

NOTICE OF COMMENCEMENT

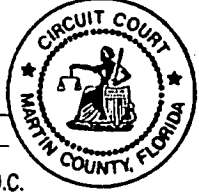
Property Appraisers Parcel ID No. 13-38-41-010-000-00070-0

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 Statute, the following information is provided in this Notice of Commencement:

- 1). Description of property: Kingston Court Lot 7
Address: 134 S River Rd
Stuart FL 34996
- 2). General description of improvement: HURRICANE SHUTTERS
- 3). Owner information:
Name Stephen Gibson
Address: 134 S River Rd Stuart FL
Interest in property: _____
Name & address of fee simple title holder _____
- 4). Contractor information:
Name: Gulfstream Aluminum & Shutter Corp. STATE OF FLORIDA
Address: 3001 SE Gran Park Way, Stuart, FL 34997 MARTIN COUNTY
(702) 287-6476
- 5). Surety: N/A
Name: _____
Address: _____
- 6). Lender Information: N/A
Name: _____
Address: _____
- 7). Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by section 713.13(1)(a)(7), Florida Statutes. Name & Address: _____
- 8). In addition to himself, Owner designates _____ to receive a copy of the Lienor as provided in Section 713.13(1)(b), Florida Statutes.
- 9). Expiration date of Notice of Commencement (the expiration date is One (1) year from the date of recording unless a different date is specified).

THIS IS TO CERTIFY THAT THE
FOREGOING 1 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.
MARGHA EWING, CLERK
BY: [Signature] D.C.
DATE: 6/8/07

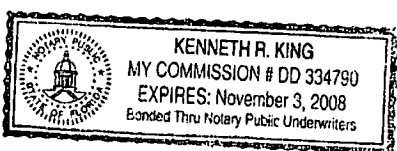


Sworn to and subscribed before me by Stephen Gibson who is personally known to me or produced _____ as identification, and who did take an oath this 6th day of June, 20 07

Signature of Notary: [Signature]
Printed Name of Notary: KENNETH R KING
Commission Number: DD 334790
Expiration Date: 11-3-08

Signature of Owner: [Signature]
Printed Name of Owner: STEPHEN P. GIBSON
Owner's Address: 134 S. River Rd
STUART, FL 34996

SEAL:





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

SHUTTER SCHEDULE

I.D. NO.	APPOX OPENING SIZE (WXH)	APPOX SHUTTER WIDTH	APPOX HEIGHT	# OF STORM BARS REQ'D	ANCHOR SPACING	# OF WINDOW BARS EACH SIDE	HEADER REINF. REQ'D YES/NO	REMARKS
	37"X63"	45"	71"	N/A	12"	N/A	NO	EXAMPLE
1	74x78	81	86	N/A	12"	N/A	NO	SP
2	24x72	27	80					SP
3	61x72	72	80					AC
4	61x72	72	80					
5	61x72	72	80					
6	61x48	72	56					
7	61x72	72	80					
8	30x72	36.25	80					
9	30x72	36.25	80					
10	73x92	85	100					
11	108x92	123.5	100					
12	108x92	123.5	100					
13	108x92	123.5	100					
14	30x72	36.25	80					
15	30x72	36.25	80					
16								
17	24x72	27	80					SP
18	61x72	72	80					AC
19	61x72	72	80					
20	61x72	72	80					
21	61x72	72	80					
22	61x72	72	80					
23	61x72	72	80					
24	61x72	72	80					
25	30x72	36.25	80					
26	30x72	36.25	80					
27	61x72	72	80					
28	108x72	123.5	80					
29	108x72	123.5	80					
30	108x92	123.5	100					
31	30x72	36.25	80					

FILE COPY
 TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 6/28/09
 BUILDING OFFICIAL

3001 S.E. Gran Park Way, Stuart, Florida 34997
 (772) 287-6476 • (800) 244-4143 • FAX (772) 287-9740
 E-Mail: sales@gulfshutters.com
 www.gulfshutters.com
 Lic. #MC00231, PB# U-17051, SL 1211



Do It Once. Do It Right.
 Since 1979

ORDER FORM

Key
 Storm Panels - SP
 Accordians - AC
 Bahamas - BA
 Colonial - CO
 Rollups - RU
 Lexan - LX
 Garage Brace - GB

Application Key
 Wood - W
 Block - B
 Stucco Over - SO

Name MR + MRS STEVE GIBSON Date 5/13/07
 Address 134 S. River Rd Subdivision Sewalls Pt
 City Sewalls Point State FL Zip _____
 Phone (Home) 772 286-5258 (Work) _____ Approximate Installation 4-6 wks ^{Upon Sign}

OPG #	TYPE	OPENING WIDTH	OPENING HEIGHT	TRACK COLOR	COLOR PANEL/SLAT	GAUGE	STACK R/L	LOCK I/O	REMOVABLE TRACKS	BUILD OUT	MOTOR/CRANK	STORM BARS	APPLICATION	FLOOR
1	SP	74	78	Beige	ALUM	050			✓				W	1st
2	SP	24	72	Beige	ALUM	050								
3	AC	61	72	Beige	Beige	AV								
4	AC	61	72					0						
5	AC	61	72					0						
6	AC	61	48					0						
7	AC	61	72					0						
8	AC	30	72					0						
9	AC	30	72					0						
10	AC	73	92					0						
11	AC	108	92					I	✓					
12	AC	108	92					0	✓					
13	AC	108	92					I	✓					
14	AC	30	72					0						
15	AC	30	72					0						
17	SP	24	72	Beige	ALUM	050		0						

26036⁰⁰
 DEPOSIT
 50%
 8678.⁰⁰
 BALANCE ON
 COMPLETION
 17358⁰⁰

It is understood that there are no verbal agreements and all items discussed are covered by this written contract. This is a proposal until signed by an officer of the corporation at which time it becomes a contract. Acceptance by owner must be within 30 days of proposal date. Buyer may cancel this contract within 3 working days after signing. No changes in measurements will be allowed except at price mutually agreed upon, at the time these changes are made. Any physical or verbal changes after signing must be approved in writing by both parties. All agreements are contingent upon strikes, lockouts accidents, acts of God, weather, fire carrier delays, delay or failure to receive raw material deliveries, or by other causes, whether of like or different nature beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance. All material is property of Gulfstream until final payment and can be removed if not paid.

DO NOT SIGN THIS CONTRACT UNTIL YOU HAVE READ ALL CONDITIONS OF THIS AGREEMENT

Interest - Buyer agrees to pay a 1 1/2% per month interest charge on any unpaid balances. **Costs of Collection** - Buyer agrees to be responsible for seller's attorney's fees (both trial and appeal) and all other costs of collection in the event full payment as outlined herein is not made within 10 days of the completion of the work outlined herein. **Acceptance of Proposal** - The above prices, specifications and conditions are satisfactory and hereby accepted. You are authorized to do the work as specified. Cancellation Fee 20% of contract. Payment will be made as outlined above.

Signature _____ Date _____ Salesperson Laura Sifor Date 5/13/07
 Gulfstream Aluminum and Shutter Corp.

5 YEAR GUARANTEE

3001 S.E. Gran Park Way, Stuart, Florida 34997
 (772) 287-6476 • (800) 244-4143 • FAX (772) 287-9740
 E-Mail: sales@gulfshutters.com
 www.gulfshutters.com
 Lic. #MC00231, PB# U-17051, SL 1211



Do It Once. Do It Right.
 Since 1979

ORDER FORM

Key
 Storm Panels - SP
 Accordians - AC
 Bahamas - BA
 Colonial - CO
 Rollups - RU
 Lexan - LX
 Garage Brace - GB

Application Key
 Wood - W
 Block - B
 Stucco Over - SO

Name MR + MRS STEVE GIBSON Date 5/13/07
 Address 134 S. RIVER RD Subdivision SEWALLS POINT
 City SEWALLS POINT State FL Zip _____
 Phone (Home) 772-286-5258 (Work) _____ Approximate Installation 4-6 WKS *Upon Sign*

OPG #	TYPE	OPENING WIDTH	OPENING HEIGHT	TRACK COLOR	COLOR PANEL/SLAT	GAUGE	STACK R/L	LOCK I/O	REMOVABLE TRACKS	BUILD OUT	MOTOR/CRANK	STORM BARS	APPLICATION	FLOOR
18	AC	61	72	Blue	Blue	HV		0					W	2ND
19	AC	61	72					0						
20	AC	61	72					0						
21	AC	61	72					0						
22	AC	61	72					0						
23	AC	61	72					0						
24	AC	61	72					0						
25	AC	30	72					0						
26	AC	30	72					0						
27	AC	61	72					0						
28	AC	108	72					T						
29	AC	108	72					0						
30	AC	108	92					0						
31	AC	30	72					0						

26 036⁰⁰
 DEPOSIT
 50% 8678⁰⁰
 BALANCE ON COMPLETION
 17 358⁰⁰

It is understood that there are no verbal agreements and all items discussed are covered by this written contract. This is a proposal until signed by an officer of the corporation at which time it becomes a contract. Acceptance by owner must be within 30 days of proposal date. Buyer may cancel this contract within 3 working days after signing. No changes in measurements will be allowed except at price mutually agreed upon, at the time these changes are made. Any physical or verbal changes after signing must be approved in writing by both parties. All agreements are contingent upon strikes, lockouts accidents, acts of God, weather, fire carrier delays, delay or failure to receive raw material deliveries, or by other causes, whether of like or different nature beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance. All material is property of Gulfstream until final payment and can be removed if not paid.

DO NOT SIGN THIS CONTRACT UNTIL YOU HAVE READ ALL CONDITIONS OF THIS AGREEMENT

Interest - Buyer agrees to pay a 1 1/2 % per month interest charge on any unpaid balances. **Costs of Collection** - Buyer agrees to be responsible for seller's attorney's fees (both trial and appeal) and all other costs of collection in the event full payment as outlined herein is not made within 10 days of the completion of the work outlined herein. **Acceptance of Proposal** - The above prices, specifications and conditions are satisfactory and hereby accepted. You are authorized to do the work as specified. Cancellation Fee 20% of contract. Payment will be made as outlined above.

Signature _____ Date _____ Salesperson Laura Sifras Date 5/13/07
 Gulfstream Aluminum and Shutter Corp.

5 YEAR GUARANTEE



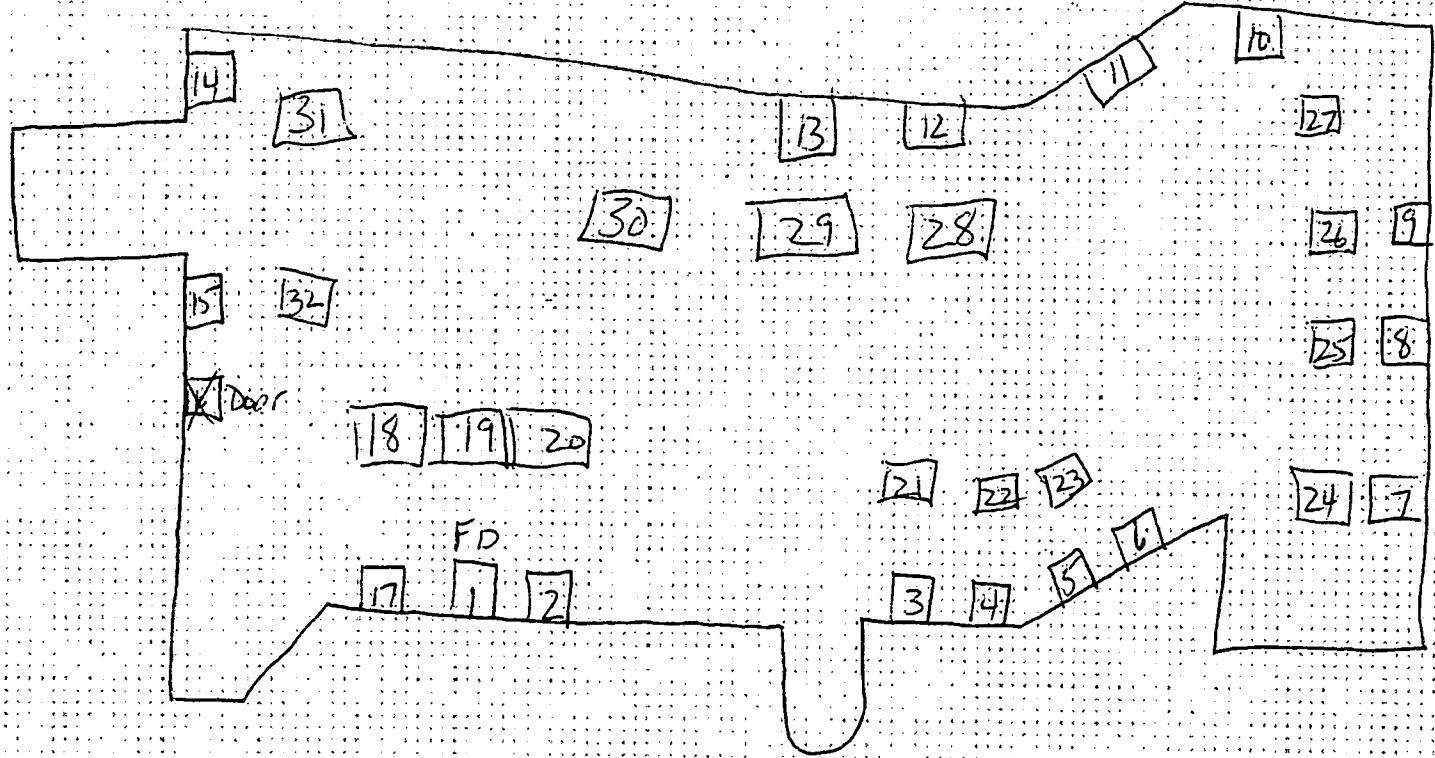
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Since 1979

3001 S.E. Gran Park Way, Stuart, Florida 34997
(772) 287-6476 • (800) 244-4143
FAX (772) 287-9740
E-mail: jobrien@gulfshutters.com
www.gulfshutters.com
Lic. #MC00231, SL 1211, PB# U-17051 & CRC58017

Key	
Storm Panels - SP	Rollups - RU
Accordions - AC	Lexan - LX
Bahamas - BA	Garage Brace - GB
Colonial - CO	

LAYOUT SHEET

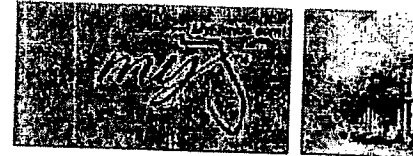
GIBSON



Special Instructions: 1, 2, 3, 4, 5, 6, 17, 18, 19, 20, 21, 22, 23, 7, 24 \$ 10,690⁰⁰
 10, 11, 12, 13, 30, 29, 28 \$ 11,205⁰⁰
 permit INCLUDED.

Signature _____ Date _____ Salesperson Laura Sifrar Date 5/13/07
Gulfstream Aluminum and Shutter Corp.

FLORIDA DEPARTMENT OF Community Affairs



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Product Approval
USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**

- COMMUNITY PLANNING
- HOUSING & COMMUNITY DEVELOPMENT
- GRANT PROGRAMS
- FLORIDA GOVERNMENT TRUST
- FRONT PORCH FLORIDA
- EMERGENCY MANAGEMENT
- OFFICE OF THE SECRETARY
- NEWS
- FREQUENTLY ASKED QUESTIONS
- ABOUT OUR OFFICE
- CONTACT THE SECRETARY
- CONTACT OUR GENERAL
- OVERSIGHT
- CONTACT US
- OUR LOGO
- OUR EMPLOYEE SERVICES

FL #	FL419-R1
Application Type	Revision
Code Version	2004
Application Status	Approved
Comments	
Archived	<input type="checkbox"/>
Product Manufacturer	Eastern Metal Supply
Address/Phone/Email	4268 Westroads Drive West Palm Beach, FL 33407 (561) 841-5480 bfeeley@easternmetal.com
Authorized Signature	Bill Feeley bfeeley@easternmetal.com
Technical Representative	
Address/Phone/Email	
Quality Assurance Representative	
Address/Phone/Email	
Category	Shutters
Subcategory	Storm Panels
Compliance Method	Evaluation Report from a Florida Registered Architec Licensed Florida Professional Engineer <input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name	Walter A. Tillit, Jr.
who developed the Evaluation Report	
Florida License	PE-44167

Quality Assurance Entity
Validated By

National Accreditation and Management Institute
John Henry Kampmann Jr.

Certificate of Independence

Referenced Standard and Year (of Standard)

Standard
SSTD 12-99

Year
2001

Equivalence of Product Standards Certified By

Sections from the Code

1606.1.4

Product Approval Method

Method 1 Option D

Date Submitted

09/15/2005

Date Validated

09/23/2005

Date Pending FBC Approval

09/29/2005

Date Approved

10/11/2005

Summary of Products

FL #	Model, Number or Name	Description
419.1	05-270	0.050 Bertha Aluminum Storm Panel
Limits of Use Approved for use in HVHZ: Approved for use outside HVHZ: Impact Resistant: Design Pressure: +/- Other: Product to be installed only within NON HIGH VELOCITY HURRICANE ZONES as defined on section 1619.2 of the Florida Building Code.		Installation Instructions Verified By: Evaluation Reports PTID_419_R1_T_Certification of Independence.pdf PTID_419_R1_T_Drawing.No05-271.pd PTID_419_R1_T_Dwg_05-270.pdf PTID_419_R1_T_Dwg.No. 05-276.pdf PTID_419_R1_T_Product Evaluation No 0907.04.pdf PTID_419_R1_T_Product Evaluation Re 05-0907.03.pdf PTID_419_R1_T_Report.No. 05-0907.0
419.2	05-271	24ga. Galvanized Bertha Steel Panel
Limits of Use Approved for use in HVHZ: Approved for use outside HVHZ: Impact Resistant: Design Pressure: +/- Other: Product to be installed only within NON HIGH VELOCITY HURRICANE ZONES as defined		Installation Instructions Verified By: Evaluation Reports

on section 1619.2 of the Florida Building Code.

419.3	05-276	Clear Bertha Storm Panel
Limits of Use Approved for use in HVHZ: Approved for use outside HVHZ: Impact Resistant: Design Pressure: +/- Other: Product to be installed only within NON HIGH VELOCITY HURRICANE ZONES as defined on section 1619.2 of the Florida Building Code.		Installation Instructions Verified By: Evaluation Reports

Back

Next

DCA Administration

Department of Community Affairs

Florida Building Code Online

Codes and Standards

2555 Shumard Oak Boulevard

Tallahassee, Florida 32399-2100

(850) 487-1824, Suncom 277-1824, Fax (850) 414-8436

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Product Approval Accepts:



GENERAL NOTES:

1. STORM PANEL SHOWN ON THIS PRODUCT EVALUATION DOCUMENT (P.E.D.) HAS BEEN VERIFIED FOR COMPLIANCE IN ACCORDANCE WITH THE 2004 EDITION OF THE FLORIDA BUILDING CODE. THIS STORM PANEL SHALL NOT BE INSTALLED AT HIGH VELOCITY HURRICANE ZONES (MIAMI-DADE / BROWARD COUNTIES). DESIGN WIND LOADS SHALL BE DETERMINED AS PER SECTION 1609 OF THE ABOVE MENTIONED CODE FOR A BASIC WIND SPEED AS REQUIRED BY THE JURISDICTION WHERE STORM PANEL WILL BE INSTALLED, AND FOR A DIRECTIONALITY FACTOR $K_d=0.85$, IN ACCORDANCE WITH ASCE 7-98 STANDARD. IN ORDER TO VERIFY THAT COMPONENTS AND ANCHORS ON THIS P.E.D. AS TESTED WERE NOT OVER STRESSED, A 33% INCREASE IN ALLOWABLE STRESS FOR WIND LOADS WAS NOT USED IN THEIR ANALYSIS. A DURATION FACTOR $C_D=1.00$ WAS USED FOR VERIFICATION OF FASTENERS IN WOOD.

STORM PANEL'S ADEQUACY FOR IMPACT AND FATIGUE RESISTANCE HAS BEEN VERIFIED IN ACCORDANCE WITH SECTION 1609.1.4 OF THE ABOVE MENTIONED CODE AS PER ATL REPORTS # 0121.01-98R, # 0329.01-00, # 0523.01-00 AND #0512.01-03 AND #0817.02-04, AS PER SSTD 12-99 STANDARD.

- 2. ALL ALUMINUM SHEET METAL PANELS SHALL HAVE 5052-H32 OR 3004-H34 ALLOY.
- 3. ALL ALUMINUM EXTRUSIONS SHALL BE ALUMINUM ASSOCIATION 8063-T8 ALLOY & TEMPER UNLESS OTHERWISE NOTED. STORM PANEL COMPONENTS (1) STUCCO PLATE AND (2) SNAP CAP ARE PATENT PENDING.
- 4. ALL SCREWS TO BE STAINLESS STEEL 304 OR 316 AISI SERIES OR CORROSION RESISTANT COATED CARBON STEEL AS PER DIN 50018 W/ 50 ksi YIELD STRENGTH AND 90 ksi TENSILE STRENGTH.
- 5. BOLTS TO BE ASTM A-307 GALVANIZED STEEL OR AISI 304 SERIES STAINLESS STEEL WITH 35 ksi MINIMUM YIELD STRENGTH.
- 6. ANCHORS TO WALL SHALL BE AS FOLLOWS: (UNLESS OTHERWISE NOTED)

- (A) TO EXISTING POURED CONCRETE:
 - 1/4" # TAPCON ANCHORS AS MANUFACTURED BY I.T.W. BULDEX.
 - 1/4" # CF TAP-GRIP ANCHORS (BERTHA STUD-CON), AS MANUFACTURED BY TRU-FAST CORPORATION.
 - 1/4" # ZAMAC NAILIN ANCHORS AS MANUFACTURED BY POWER FASTENERS, INC.
 - 1/4" # x 7/8" CALK-IN ANCHORS OR ELCO male & female "PANELMATE" AS MANUFACTURED BY POWER FASTENERS, INC. AND ELCO TEXTRON, RESPECTIVELY.
 - 1/4" # x 3/4" ALL POINTS SOLID-SET ANCHORS AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.
 - 1/4" # RED HEAD DYNABOLT SLEEVE ANCHORS AS MANUFACTURED BY I.T.W. BULDEX/RAMSET.

- NOTES:
- A.1) MINIMUM EMBEDMENT INTO POURED CONCRETE OF TAPCON ANCHORS IS 1 3/4", FOR ZAMAC NAILIN ANCHORS IS 1 3/8", FOR ELCO PANELMATE ANCHORS IS 1 3/4", FOR RED HEAD DYNABOLT SLEEVE ANCHORS IS 1 1/8", AND FOR CF TAP-GRIP ANCHORS IS 1 1/4".
 - A.2) 7/8" CALK-IN ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - A.3) MINIMUM EMBEDMENT OF 1/4" # x 3/4" ALL POINTS SOLID-SET ANCHORS SHALL BE 7/8" INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 S.S. MACHINE SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - A.4) IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, OR PAVERS BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1) & A.2) ABOVE.

- (B) TO EXISTING CONCRETE BLOCK WALL:
 - 1/4" # TAPCON ANCHORS AS MANUFACTURED BY I.T.W. BULDEX.
 - 1/4" # CF TAP-GRIP ANCHORS (BERTHA STUD-CON), AS MANUFACTURED BY TRU-FAST CORPORATION.
 - 1/4" # ZAMAC NAILIN ANCHORS AS MANUFACTURED BY POWER FASTENERS, INC.
 - 1/4" # x 7/8" CALK-IN ANCHORS OR ELCO male & female "PANELMATE" AS MANUFACTURED BY POWER FASTENERS, INC. AND ELCO TEXTRON, RESPECTIVELY.
 - 1/4" # x 3/4" ALL POINTS SOLID-SET ANCHORS AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.
 - 1/4" # RED HEAD DYNABOLT SLEEVE ANCHORS AS MANUFACTURED BY I.T.W. BULDEX.

- NOTES:
- B.1) MINIMUM EMBEDMENT OF TAPCON, ELCO PANELMATE, AND CF TAP-GRIP ANCHORS INTO CONCRETE BLOCK UNIT SHALL BE 1 1/4"; 1 3/8" FOR ZAMAC NAILIN ANCHORS AND 1 1/8" FOR RED HEAD DYNABOLT SLEEVE ANCHORS.
 - B.2) 7/8" CALK-IN ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE CONCRETE BLOCK UNIT. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - B.3) MINIMUM EMBEDMENT OF 1/4" # x 3/4" ALL POINTS SOLID-SET ANCHORS SHALL BE 7/8" INTO THE CONCRETE BLOCK. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 S.S. MACHINE SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - B.4) IN CASE THAT PRECAST STONE OR PRECAST CONCRETE PANELS BE FOUND ON THE EXISTING WALL, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES IN B.1) AND B.2) ABOVE.

(C) ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.

7. PANELS MAY ALSO BE INSTALLED HORIZONTALLY FOLLOWING INSTALLATION DETAILS SHOWN ON SECTIONS 1 THRU 8 (SHEET 3 & 4 OF 9) EXCEPT THAT HEADERS 3, 4 & 5 SHALL NOT BE USED.

8. IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE SOUNDNESS OF THE STRUCTURE WHERE SHUTTER IS TO BE ATTACHED TO INSURE PROPER ANCHORAGE. THIS SHUTTER SHALL ONLY BE ATTACHED TO CONCRETE, BLOCK OR WOOD FRAME BUILDINGS.

9. THE INSTALLATION CONTRACTOR IS TO SEAL/CAULK ALL SHUTTER COMPONENT EDGES WHICH REMAIN IN CONTINUOUS CONTACT WITH THE BUILDING TO PREVENT WIND/RAIN INTRUSION. CAULK AND SEAL SHUTTER TRACKS ALL AROUND FULL LENGTH.

10. (a) THIS P.E.D. PREPARED BY THIS ENGINEER IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR A SITE SPECIFIC PROJECT; I.E. WHERE THE SITE CONDITIONS DEVIATE FROM THE P.E.D.

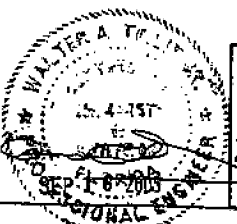
(b) CONTRACTOR TO BE RESPONSIBLE FOR THE SELECTION, PURCHASE AND INSTALLATION INCLUDING LIFE SAFETY OF THIS PRODUCT, BASED ON THIS P.E.D. PROVIDED HE/SHE DOES NOT DEVIATE FROM THE CONDITIONS DETAILED ON THIS DOCUMENT. CONSTRUCTION SAFETY AT SITE IS THE CONTRACTOR'S RESPONSIBILITY.

(c) THIS P.E.D. WILL BE CONSIDERED INVALID IF ALTERED BY ANY MEANS.

(d) SITE SPECIFIC PROJECTS SHALL BE PREPARED BY A FLORIDA REGISTERED ENGINEER OR ARCHITECT WHICH WILL BECOME THE ENGINEER OF RECORD (E.O.R.) FOR THE PROJECT AND WHO WILL BE RESPONSIBLE FOR THE PROPER USE OF THE P.E.D. ENGINEER OF RECORD, ACTING AS A DELEGATED ENGINEER TO THE P.E.D. ENGINEER, SHALL SUBMIT TO THIS LATTER THE SITE SPECIFIC DRAWINGS FOR REVIEW.

(e) THIS P.E.D. SHALL BEAR THE DATE AND ORIGINAL SEAL AND SIGNATURE OF THE PROFESSIONAL ENGINEER OF RECORD THAT PREPARED IT.

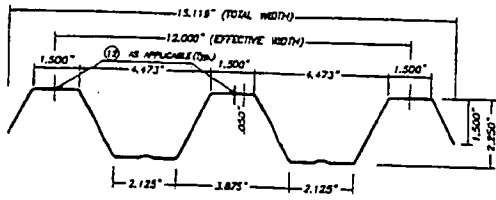
11. SHUTTER MANUFACTURER'S LABEL SHALL BE PLACED ON A READILY AND VISIBLE LOCATION AT PANEL. ONE LABEL SHALL BE PLACED FOR EVERY OPENING. LABEL SHALL READ AS FOLLOWS:
EASTERN METAL SUPPLY, INC.
WEST PALM BEACH, FL.
FLORIDA STATEWIDE PRODUCT APPROVED.



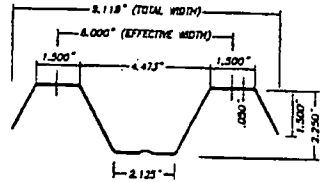
TILTECO Inc.
TILLET TESTING & ENGINEERING COMPANY
1322 A.W. JOHN ST., BOX 225 WILMINGTON, MASSACHUSETTS 01898
Phone: (508) 471-1830 Fax: (508) 471-1831
03-0006718
WALTER A. TILLET, P. E.
FLORIDA Lic. # 47157

F.B.C. (Non High Velocity Hurricane Zone)

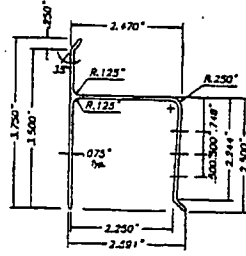
0.050" BERTHA ALUMINUM STORM PANEL		L.G. DRAWN BY:
EASTERN METAL SUPPLY, INC		5/8/03 DATE
4282 WEST ROAD DRIVE WEST PALM BEACH, FL 33407		05-270 DRAWING No
REV. NO.	DESCRIPTION	DATE
1	OLD ONE (S-OFF) 5/8/03	
2	OLD ONE (S-OFF) 5/8/03	
3	OLD ONE (S-OFF) 5/8/03	
		SHEET 1 OF 2



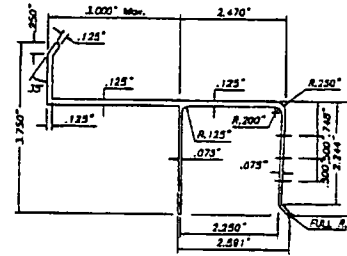
① ALUMINUM PANEL
SCALE: 1/4" = 1"



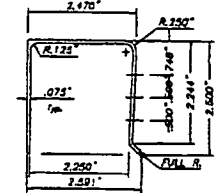
①A ALUMINUM HALF PANEL
SCALE: 1/4" = 1"



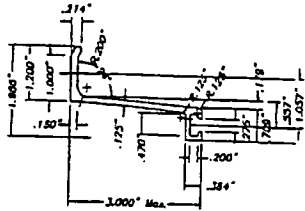
③ "h" HEADER
SCALE: 3/8" = 1"



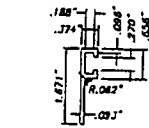
④ 3" Max. "U" BUILD OUT
SCALE: 1/8" = 1"



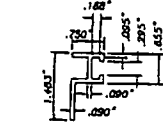
⑤ "U" HEADER
SCALE: 3/8" = 1"



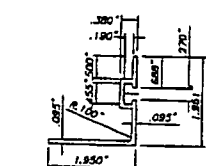
⑥ 3" ANGLE BUILD OUT BRACKET
SCALE: 1/8" = 1"



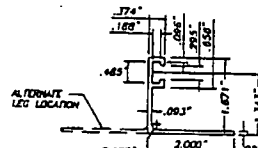
⑦ 3/8" B. O. "F" TRACK
SCALE: 1/8" = 1"



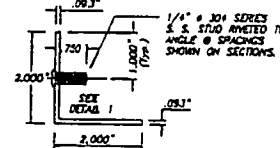
⑦A 3/4" B. O. "F" TRACK
SCALE: 1/8" = 1"



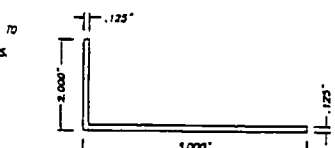
⑧ REVERSED "F" ANGLE TRACK
SCALE: 1/8" = 1"



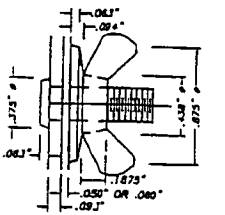
⑨ "F" TRACK ANGLE
SCALE: 1/8" = 1"



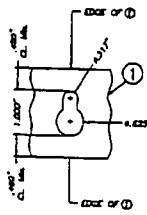
⑩ STUDDED ANGLE
6063-T5 ALUM. ALLOY
SCALE: 1/8" = 1"



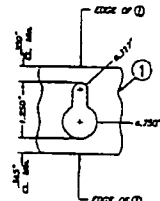
⑪ 2" x 5" (Max.) x .125" ANGLE
SCALE: 1/8" = 1"



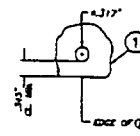
DETAIL 1: STUD W/ DIE CAST ZINC NICKEL PLATED WING NUT



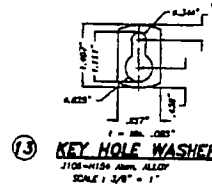
OPTION 1



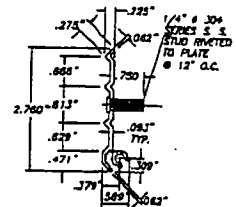
OPTION 2



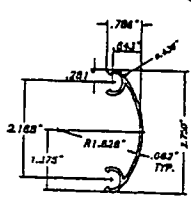
⑫A ROUND HOLE AT PANEL (OPTION TO 12)



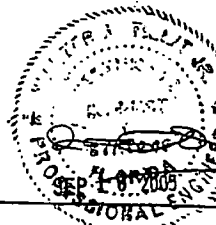
⑬ KEY HOLE WASHER
3105-H150 ALUM. ALLOY
SCALE: 1/8" = 1"



⑭ STUDDED PLATE
6063-T5 ALLOY
SCALE: 1" = 1"



⑮ SNAP CAP
6063-T5 ALLOY
SCALE: 1" = 1"

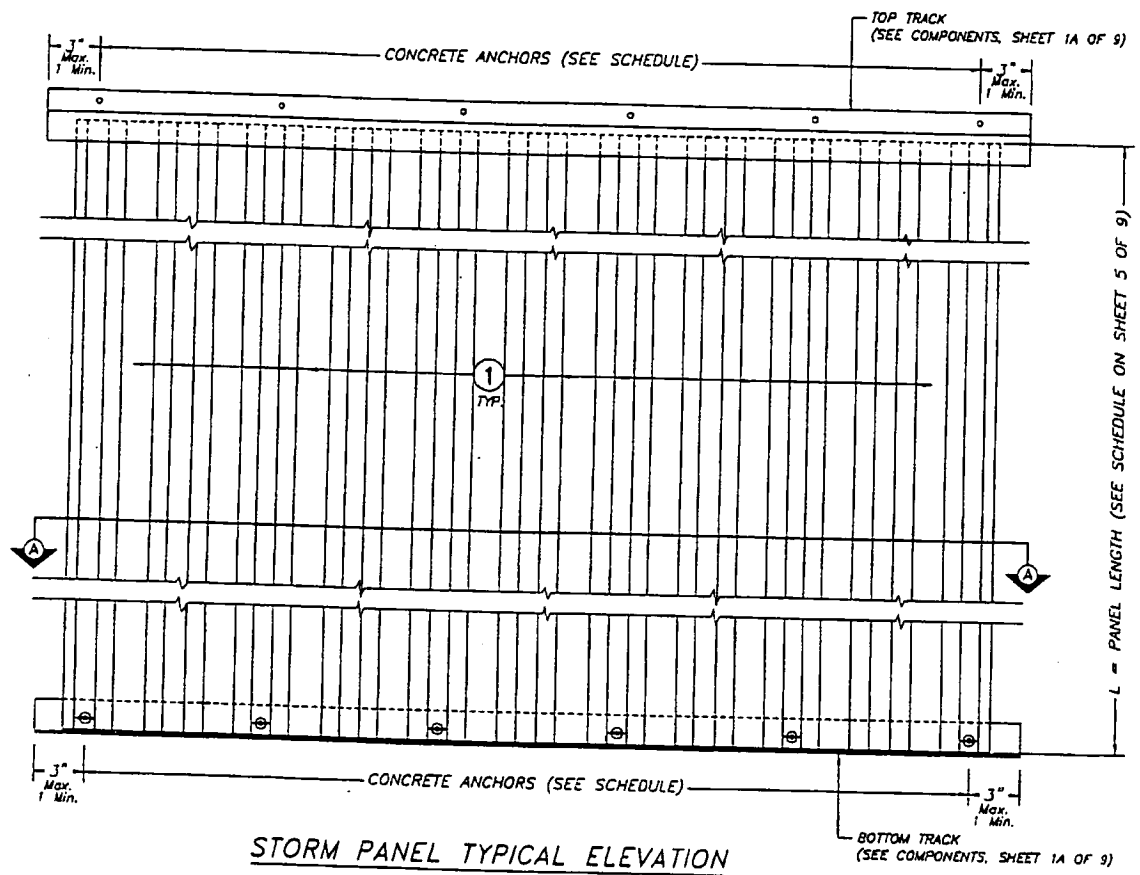


TILECO INC.
TILLIT TESTING & ENGINEERING COMPANY
2502 A.W. JOHNS BLVD., 2ND FLOOR, WEST PALM BEACH, FL 33411
PHONE 1 (561) 713-1830 FAX 1 (561) 713-1831
E3-0006718
WALTER A. TILLIT, P. E.
FLORIDA Lic. # 44182

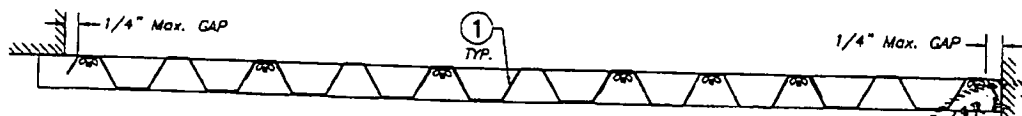
F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL		L.C. DRAWN BY:
EASTERN METAL SUPPLY, INC		0/9/03 DATE
1268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		05-270 DRAWING NO
REV. NO.	DESCRIPTION	DATE
1	OLD DWG 04-024	9/2/03
2	KEY HOLE OPTION 1	9/2/03
3	OLD DWG 03-553	8/15/04

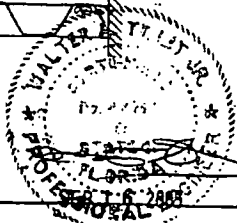
SHEET 1A OF 9



STORM PANEL TYPICAL ELEVATION
SCALE: 1/8" = 1"



SECTION A-A
SCALE: 1/8" = 1"

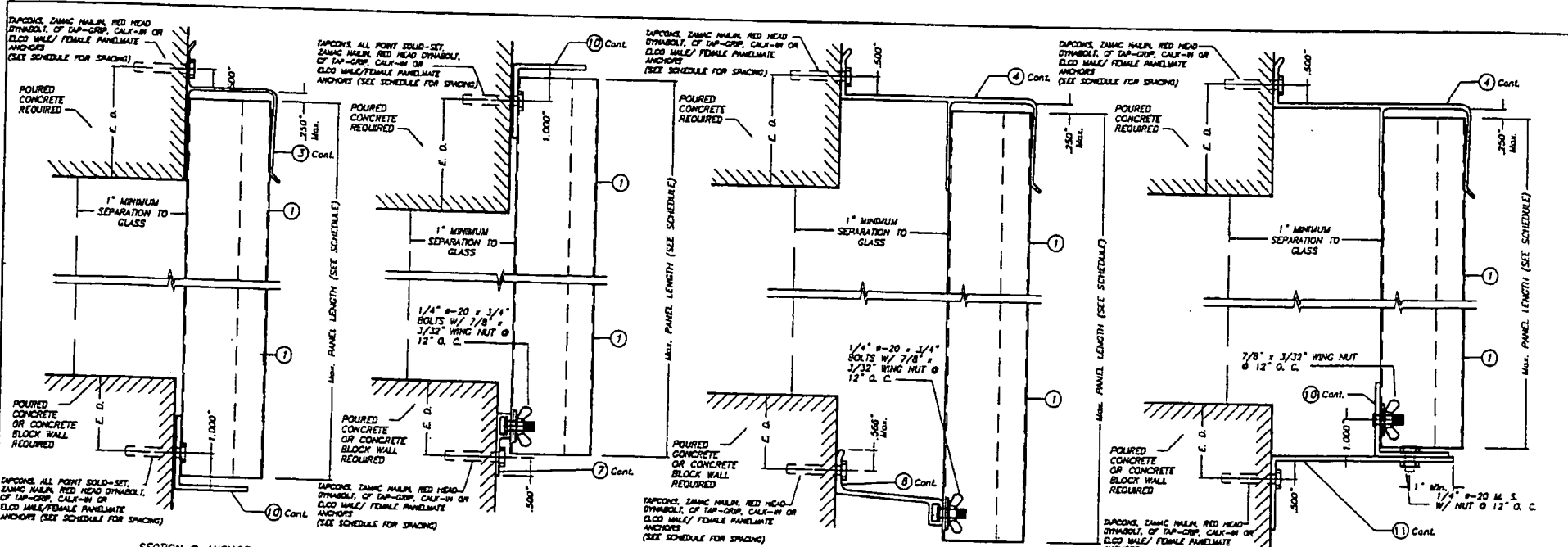


TILECO INC.
TILLY TESTING & ENGINEERING COMPANY
4225 N.W. 30th St., Suite 202, Fort Lauderdale, FL 33309
Phone: (305) 871-1530 Fax: (305) 871-1531
CB-0006719
WALTER A. TILLY, P. E.
FLORIDA LIC. # 2868

F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL		L.C. DRAWN BY:	
EASTERN METAL SUPPLY, INC		4/8/03 DATE	
4208 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		05-270 DRAWING No	
REV. NO.	DESCRIPTION	DATE	BY
1	OLD DWG 04-238 11/4/03	2	
1	OLD DWG 02-151 11/15/04	1	

SHEET 2 OF 9



SECTION 2 ANCHOR

WALL MOUNTING INSTALLATION
SECTION 2

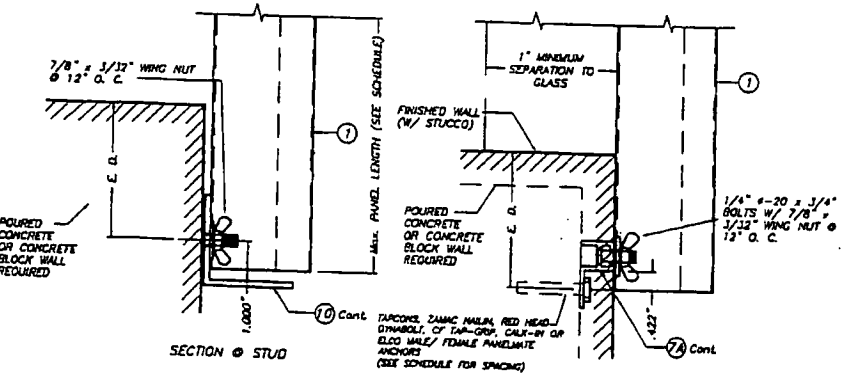
SCALE: 3/8" = 1"

BUILD OUT INSTALLATION
SECTION 3

SCALE: 3/8" = 1"

BUILD OUT INSTALLATION
SECTION 4

SCALE: 3/8" = 1"



SECTION 1 STUD

WALL MOUNTING INSTALLATION
SECTION 1

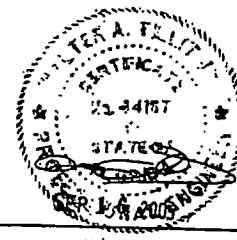
SCALE: 3/8" = 1"

WALL MOUNTING INSTALLATION
SECTION 2A

SCALE: 3/8" = 1"

E. D. = EDGE DISTANCE
(SEE SCHEDULE ON
SHEETS 6 & 7 OF 9)

NOTE FOR COMBINATION OF SECTIONS :
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE
COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



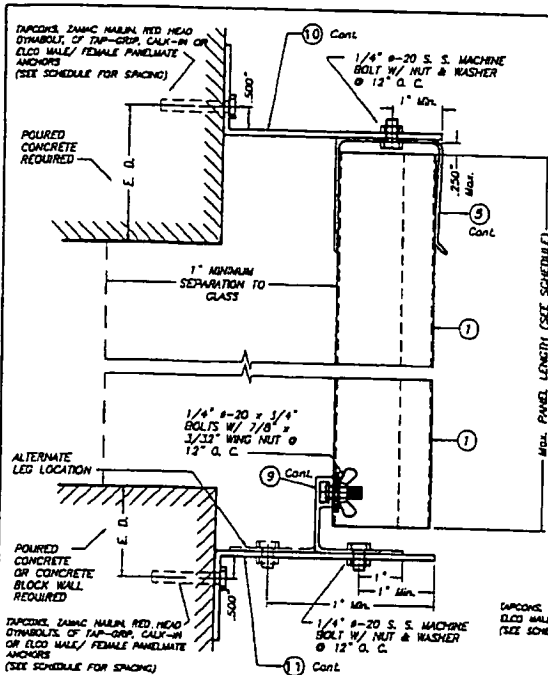
TILECO INC.
TILLIT TESTING & ENGINEERING COMPANY
4225 A.W. JOHNS BL. SW. 2ND FLOOR WASHINGTON GARDENS, P. O. BOX 13118
PALM BEACH, FL 33411-1311
TEL: (561) 831-1830 FAX: (561) 831-1311
EQ-0004718
WALTER A. TILLIT, P. E.
FLORIDA Lic. # 44167

F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL		L.C. DRAWN BY:
EASTERN METAL SUPPLY, INC		8/9/05 DATE
4228 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		05-270 DRAWING No
REV. NO.	DESCRIPTION	DATE
1	OLD DWD 04-04 9/9/05	
2	OLD DWD 03-03 11/13/04	

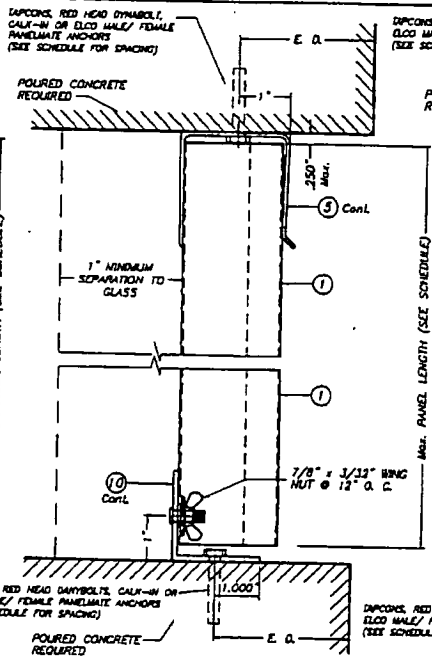
SHEET 3 OF 9

NOTE: DETAIL OF SECTION 2 STUD WOULD ALSO FOR WALL MOUNTING INSTALLATION - SECTION 2 (TOP)



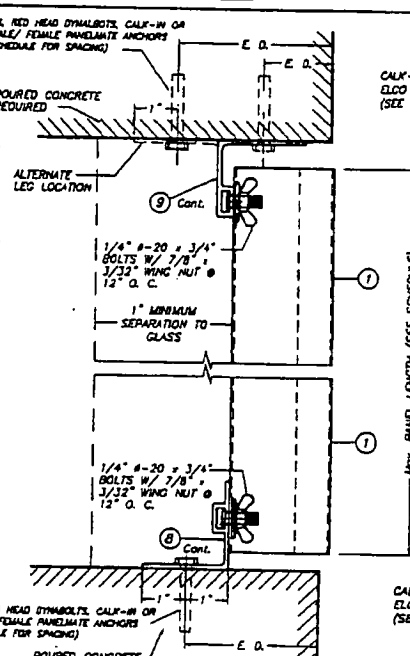
BUILD OUT INSTALLATION

- SECTION 5 SCALE: 3/8" = 1"



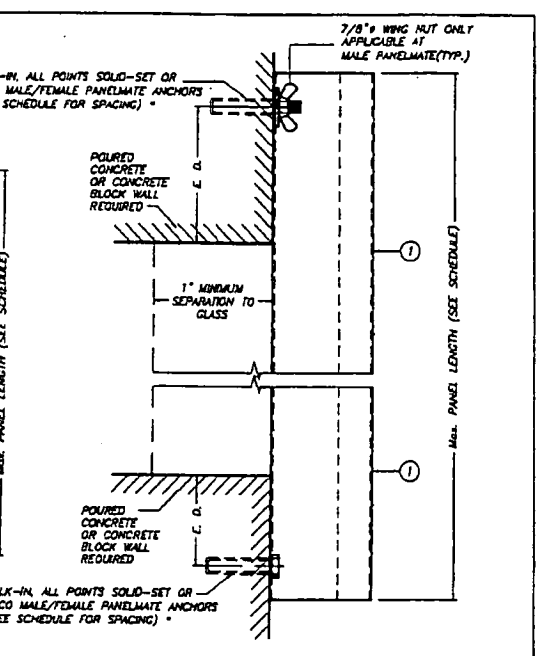
CEILING & FLOOR MOUNTING INSTALLATION - SECTION 6

SCALE: 3/8" = 1"



CEILING & FLOOR MOUNTING INSTALLATION - SECTION 7

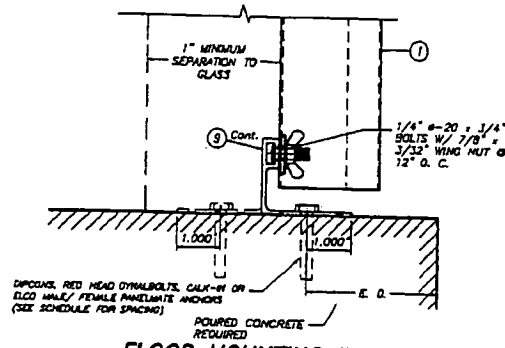
SCALE: 3/8" = 1"



WALL MOUNTING INSTALLATION (D. M.)

- SECTION 8

SCALE: 3/8" = 1"



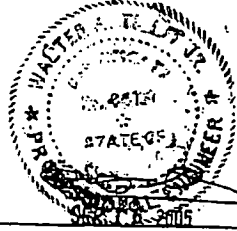
FLOOR MOUNTING INSTALLATION

- SECTION 5A SCALE: 3/8" = 1"

E. D. - EDGE DISTANCE
(SEE SCHEDULE ON SHEET 6 & 7 OF 9)

NOTE FOR COMBINATION OF SECTIONS:
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

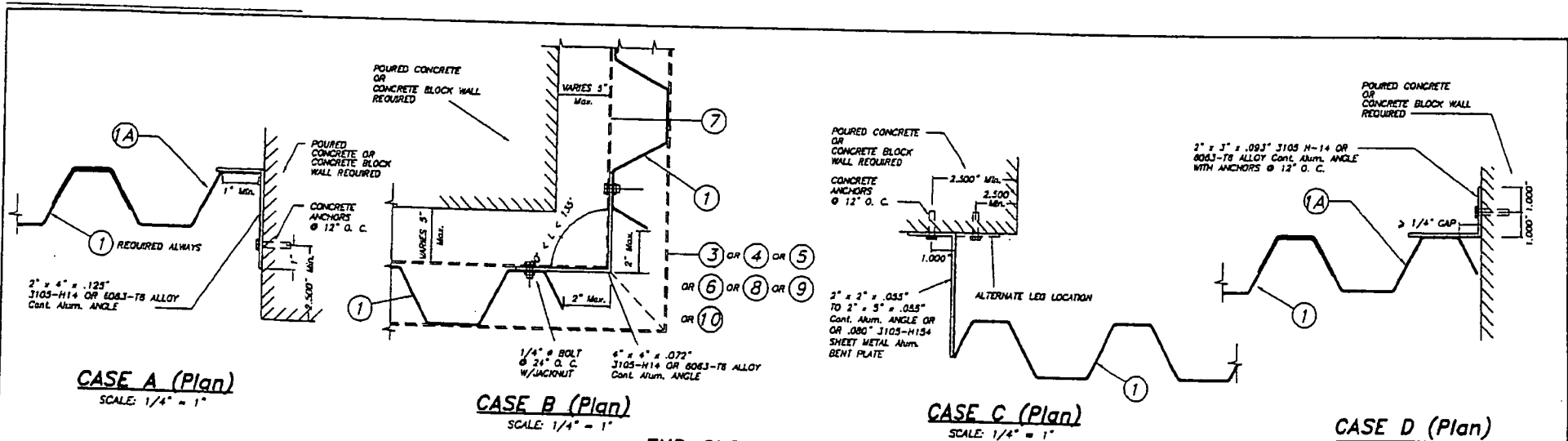
- * SCREWS USED AT ANCHORS MAY BE 1/4" x 20 SIDE WALK BOLT W/ (2) OR 1/4" x 20 TRUSS HEAD BOLT W/ (3) & (3)
- * SIDE WALK BOLTS ARE 3/4" x 1/32" THICK HEAD MACHINE SCREW W/ LENGTH AS PER NOTES A.2 & B.2 (SHEET 1).
- * TRUSS HEAD BOLTS ARE 1/2" x 1/8" THICK HEAD MACHINE SCREW W/ LENGTH AS PER NOTES A.2 & B.2 (SHEET 1)



TILECO INC.
TILLY TESTING & ENGINEERING COMPANY
1125 P.E. BLVD., SUITE 205, WEST PALM BEACH, FL 33411
Phone: (561) 771-1830 • Fax: (561) 771-1331
ED-0006719
WALTER A. TILLY, P. E.
FLORIDA LIC. # 44182

F.B.C./ (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL		L.C. DRAWN BY:
EASTERN METAL SUPPLY, INC		S./M./S. DATE
4288 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		05-270
REV. NO.	DESCRIPTION	DATE
1	OLD DWG 04-026	9/2/78
1	OLD DWG 02-033	6/15/74
		DRAWING No
		SHEET 4 OF 6



CASE B (Plan)
SCALE: 1/4" = 1"

CASE C (Plan)
SCALE: 1/4" = 1"

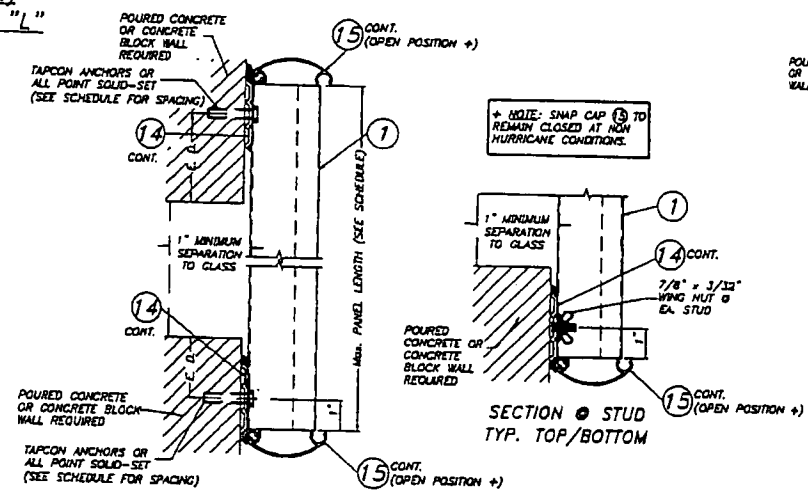
CASE D (Plan)
SCALE: 1/4" = 1"

END CLOSURES DETAILS

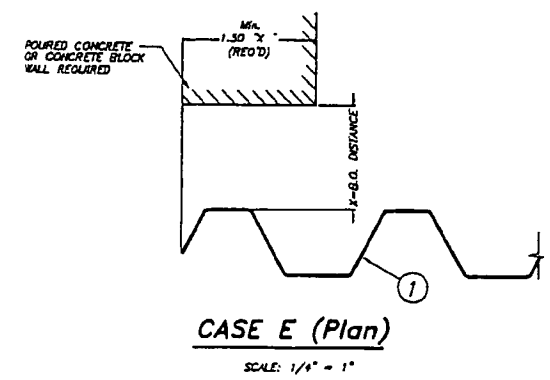
MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM PANEL LENGTH "L" SCHEDULE FOR A GIVEN PANEL SYSTEM

MAXIMUM DESIGN PRESSURE RATING W (p.s.f.)	Max. PANEL LENGTH L (ft.)		
	MOUNTING W/ 7" HEADER (1)	MOUNTING W/ 7" HEADER (2)	WALL MOUNTING W/ COMPONENT (3) & (3)
+30.0, -30.0	12'-11"	12'-11"	12'-11"
+30.0, -35.0	12'-11"	12'-11"	12'-11"
+35.0, -40.0	12'-0"	12'-0"	12'-0"
+40.0, -45.0	11'-2"	11'-2"	11'-2"
+45.0, -50.0	10'-7"	10'-4"	10'-7"
+50.0, -55.0	10'-0"	9'-4"	10'-0"
+55.0, -60.0	9'-7"	8'-8"	9'-7"
+60.0, -65.0	9'-2"	7'-9"	9'-2"
+65.0, -70.0	8'-9"	7'-2"	8'-9"
+70.0, -75.0	8'-6"	6'-8"	8'-6"
+75.0, -80.0	8'-2"	6'-3"	8'-2"

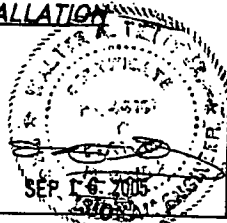
NOTE: MINIMUM PANEL LENGTH IS 3'-0".



WALL MOUNTING INSTALLATION SECTION 9
SCALE: 3/8" = 1"



CASE E (Plan)
SCALE: 1/4" = 1"



TILECO INC.
TILLIT TESTING & ENGINEERING COMPANY
1325 N.W. 20th St., 2nd. FL. WEST PALM BEACH, FL 33411
Phone 1 (304) 771-1233, Fax 1 (304) 771-1521
EQ-0000718
WALTER A. TILLIT, P. E.
FLORIDA Lic. # 64187

F.B.C./Non High Velocity Hurricane Zone

0.050" BERTHA ALUMINUM STORM PANEL

EASTERN METAL SUPPLY, INC
4208 WEST ROADS DRIVE
WEST PALM BEACH, FL 33407

LEG. DRAWN BY: L/R/03 DATE: 05-270 DRAWING NO: SHEET 3 OF 8

REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD DWG 04-004	9/8/03	2		
1	OLD DWG 02-031	12/13/04			

THIS SCHEDULE INDICATES REQUIRED ANCHOR SPACING FOR A GIVEN DESIGN LOAD AND PANEL LENGTH. HOWEVER, MAXIMUM PANEL LENGTH FOR A GIVEN DESIGN LOAD MUST BE VERIFIED AS PER SCHEDULE ON SHEET # 05-270.

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO CONCRETE AND CONCRETE BLOCK STRUCTURES *

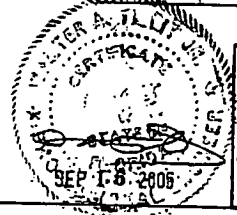
E. D. = EDGE DISTANCE

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **												APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L' (ft.)	
	TAPCONS		ZAMAC NAIL/ RED HD. DYNABOLT		CALK-IN		SOLID-SET		PANELMATES		CF TAP-GRIP				
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY			
+35.0 -40.0 OR LESS	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	1	(TOP)	8'-0" OR LESS
	12"	10"	12"	12"	12"	8"	12"	12"	12"	12"	12"	10 1/2"	1	9" (BOTTOM)	
	12"	-	12"	-	12"	12"	12"	12"	12"	-	12"	-	2	9" (TOP)	
	12"	10"	12"	12"	12"	8"	-	-	12"	12"	12"	10 1/2"	2	(BOTTOM)	
	12"	10"	12"	12"	12"	8"	-	-	12"	12"	12"	10 1/2"	2A	(BOTTOM)	
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	3 & 4	(TOP)	
	12"	10"	12"	12"	12"	8"	-	-	12"	12"	12"	10 1/2"	3	(BOTTOM)	
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	4	(BOTTOM)	
	12"	10"	12"	12"	12"	8"	-	-	12"	12"	12"	10 1/2"	5	(TOP)	
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	5	(BOTTOM)	
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	6	(TOP)	
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	6	(BOTTOM)	
	11"	-	12"	-	11"	-	-	-	12"	-	12"	-	5A	(BOTTOM)	
	11"	-	12"	-	12"	-	-	-	12"	-	12"	-	7	(TOP)	
	-	-	-	-	12"	6"	12"	12"	12"	12"	-	-	7	(BOTTOM)	
+35.0 -40.0 OR LESS	12"	-	12"	-	12"	6"	12"	12"	12"	-	-	8	(TOP/BOTTOM)	>8'-0" TO 10'-0"	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	12"	8 1/2"	1	9" (BOTTOM)		
	12"	-	12"	12"	12"	12"	6"	-	-	12"	12"	8 1/2"	2		(BOTTOM)
	12"	8"	12"	12"	12"	6"	-	-	12"	12"	12"	8 1/2"	2A		(BOTTOM)
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	3 & 4		(TOP)
	12"	8"	12"	12"	12"	8"	-	-	12"	12"	12"	8 1/2"	3		(BOTTOM)
	12"	8"	12"	12"	12"	8"	-	-	12"	12"	12"	8 1/2"	4		(BOTTOM)
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	5		(TOP)
	12"	8"	12"	12"	12"	8"	-	-	12"	12"	12"	8 1/2"	5		(BOTTOM)
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	6		(TOP)
	10"	-	12"	-	10"	-	-	-	12"	-	12"	-	6		(BOTTOM)
	9"	-	10"	-	9"	-	-	-	12"	-	12"	-	5A		(BOTTOM)
	9"	-	11"	-	9"	-	-	-	12"	-	12"	-	7		(TOP)
	-	-	-	-	12"	6"	12"	12"	12"	12"	-	-	7		(BOTTOM)

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **												APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L' (ft.)	
	TAPCONS		ZAMAC NAIL/ RED HD. DYNABOLT		CALK-IN		SOLID-SET		PANELMATES		CF TAP-GRIP				
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY			
+35.0 -40.0 OR LESS	12"	-	12"	-	12"	-	-	-	12"	-	10"	-	1	(TOP)	>10'-0" TO 12'-11"
	12"	6"	12"	12"	12"	5"	12"	12"	12"	12"	11 1/2"	6 1/2"	1	9" (BOTTOM)	
	12"	6"	11"	-	12"	12"	12"	12"	12"	-	11 1/2"	-	2	9" (TOP)	
	12"	6"	12"	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	2	(BOTTOM)	
	12"	6"	12"	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	2A	(BOTTOM)	
	12"	-	12"	-	12"	-	-	-	12"	-	11 1/2"	-	3 & 4	(TOP)	
	12"	6"	12"	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	3	(BOTTOM)	
	12"	6"	12"	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	4	(BOTTOM)	
	12"	-	12"	-	12"	-	-	-	12"	-	11 1/2"	-	5	(TOP)	
	12"	6"	12"	12"	12"	5"	-	-	12"	12"	11 1/2"	6 1/2"	5	(BOTTOM)	
	10"	-	12"	-	10"	-	-	-	12"	-	-	-	6	(TOP)	
	8"	-	8"	-	8"	-	-	-	11"	-	-	-	6	(BOTTOM)	
	7"	-	8"	-	7"	-	-	-	9 1/2"	-	-	-	5A	(BOTTOM)	
	7"	-	9"	-	7"	-	-	-	10"	-	-	-	7	(BOTTOM)	
	-	-	-	-	12"	-	12"	12"	12"	12"	-	-	8	(TOP/BOTTOM)	

- + ONLY TAPCON ANCHORS OR ALL POINT SOLID-SET ALLOWED FOR MOUNTING SECTION 9.
- ++ ANCHORS SPACING ONLY VALID FOR RED HEAD DYNABOLT ANCHORS.
- * SEE SHEET 8 & 9 OF 9 FOR ANCHORS TYPE & SPACING FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS.
- ** MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACINGS SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (Min. E. D. FOR CALK-IN ANCHORS & ELCO PANELMATE IS 2 1/2", AND 3 1/2" FOR SOLID-SET ANCHORS).

ACTUAL E. D.	FACTOR			
	TAPCON/ZAMAC NAIL/ RED HD. DYNABOLT/ PANELMATES	CALK-IN	SOLID-SET	CF TAP-GRIP
3"	.88	.75	.78	1.00
2 1/2"	.71	.50	-	.80
2"	.50	-	-	-



TILECO INC.
TILIT TESTING & ENGINEERING COMPANY
4338 ALA. AVE. SUITE 200 WILMINGTON, CAROLINA 28403
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E3-0002718
WALTER A. TILIT, J. P. E.
FLORIDA Lic. # 44187

F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL

LC DRAWN BY: 1/4/05 DATE: 05-270 DRAWING NO: SHEET # OF 9

EASTERN METAL SUPPLY, INC
4388 WEST ROADS ORME WEST PALM BEACH, FL 33407

REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD DWG 06-094 9/26/05	2			
1	OLD DWG 06-094 12/19/04				

THIS SCHEDULE INDICATES REQUIRED ANCHOR SPACING FOR A GIVEN DESIGN LOAD AND PANEL LENGTH. HOWEVER, MAXIMUM PANEL LENGTH FOR A GIVEN DESIGN LOAD MUST BE VERIFIED AS PER SCHEDULE ON SHEET 4 OF 8.

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO CONCRETE AND CONCRETE BLOCK STRUCTURES *

E. D. = EDGE DISTANCE

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **												APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH ℓ' (ft.)	
	TAPCONS		ZAMAC NAIL/ RED HD. DYNABOLT		CALK-IN		SOLID-SET		PANELMATES		CF DP-CRIP				
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY			
+33.0 -80.0 TO +55.0 -80.0	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	1	(TOP)	6'-0" OR LESS
	12"	8"	12"	12"	12"	5"	12"	12"	12"	12"	12"	7"	1	9" (BOTTOM)	
	12"	-	12"	-	12"	-	12"	12"	12"	-	12"	-	2	9" (TOP)	
	12"	8"	12"	12"	12"	5"	-	-	12"	12"	12"	7"	2	(BOTTOM)	
	12"	8"	12"	12"	12"	5"	-	-	12"	12"	12"	7"	2A	(BOTTOM)	
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	3	4" (TOP)	
	12"	8"	12"	12"	12"	5"	-	-	12"	12"	12"	7"	3	(BOTTOM)	
	12"	-	12"	-	12"	-	-	-	12"	-	12"	-	4	(BOTTOM)	
	12"	8"	12"	12"	12"	5"	-	-	12"	12"	12"	7"	5	(TOP)	
	12"	8"	12"	12"	12"	5"	-	-	12"	12"	12"	7"	5	(BOTTOM)	
+33.0 -80.0 TO +75.0 -80.0	10"	-	12"	-	10"	-	-	-	12"	-	-	-	6	(TOP)	>6'-0" TO 12'-0"
	8"	-	10"	-	8"	-	-	-	12"	-	-	-	6	(BOTTOM)	
	7"	-	9"	-	7"	-	-	-	10 1/2"	-	-	-	3A	(BOTTOM)	
	8"	-	9"	-	8"	-	-	-	11"	-	-	-	7	(TOP)	
	-	-	-	-	12"	12"	12"	12"	-	-	-	-	7	(BOTTOM)	
	8"	-	10"	-	8"	-	-	-	9 1/2"	-	4"	-	8	(TOP/BOTTOM)	
	11"	4"	9"	8"	11"	3"	12"	12"	12"	6"	7 1/2"	4"	1	(TOP)	
	12"	-	9"	-	11"	-	12"	12"	12"	-	7 1/2"	-	1	9" (BOTTOM)	
	11"	4"	9"	8"	11"	3"	-	-	12"	6"	7 1/2"	4"	2	(BOTTOM)	
	11"	4"	9"	8"	11"	3"	-	-	12"	8"	7 1/2"	4"	2A	(BOTTOM)	

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **												APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH ℓ' (ft.)		
	TAPCONS		ZAMAC NAIL/ RED HD. DYNABOLT		CALK-IN		SOLID-SET		PANELMATES		CF DP-CRIP					
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY				
+55.0 -80.0 TO +75.0 -80.0	8"	-	7"	-	9"	-	-	-	12"	-	8"	-	1	(TOP)	6'-0" OR LESS	
	12"	5"	11"	10"	12"	4"	12"	12"	12"	9 1/2"	9"	5"	1	9" (BOTTOM)		
	12"	-	9"	-	12"	-	12"	12"	12"	-	9"	-	2	9" (TOP)		
	12"	5"	11"	10"	12"	4"	-	-	12"	12"	9 1/2"	9"	5"	2		(BOTTOM)
	12"	5"	11"	10"	12"	4"	-	-	12"	9 1/2"	9"	5"	2A	(BOTTOM)		
	12"	-	11"	-	12"	-	-	-	12"	-	9"	-	3	4" (TOP)		
	12"	5"	11"	10"	12"	4"	-	-	12"	9 1/2"	9"	5"	3	(BOTTOM)		
	12"	-	11"	-	12"	-	-	-	12"	-	9"	-	4	(BOTTOM)		
	12"	5"	11"	10"	12"	4"	-	-	12"	9 1/2"	9"	5"	5	(TOP)		
	12"	5"	11"	10"	12"	4"	-	-	12"	9 1/2"	9"	5"	5	(BOTTOM)		
+55.0 -80.0 TO +75.0 -80.0	8"	-	10"	-	8"	-	-	-	10 1/2"	-	-	-	6	(TOP)	>6'-0" TO 8'-0"	
	8"	-	8"	-	8"	-	-	-	9"	-	-	-	6	(BOTTOM)		
	5"	-	6"	-	5"	-	-	-	7 1/2"	-	-	-	3A	(BOTTOM)		
	8"	-	7"	-	8"	-	-	-	8"	-	-	-	7	(TOP)		
	-	-	-	-	12"	-	12"	12"	12"	6"	-	-	-	8		(TOP/BOTTOM)
	5"	-	4"	-	5"	-	-	-	8"	-	3"	3 1/2"	1	(TOP)		
	10"	3"	8"	7"	10"	3"	12"	12"	12"	7"	6 1/2"	-	1	9" (BOTTOM)		
	10"	-	7"	-	12"	-	12"	12"	12"	-	6 1/2"	-	2	9" (TOP)		
	10"	3"	8"	7"	10"	3"	-	-	12"	7"	6 1/2"	3 1/2"	2	(BOTTOM)		
	10"	4"	8"	7"	10"	3"	-	-	12"	7"	6 1/2"	3 1/2"	2A	(BOTTOM)		

ACTUAL E. D.	FACTOR			
	TAPCON/ZAMAC NAIL/ RED HD. DYNABOLT/ PANELMATES	CALK-IN	SOLID-SET	CF DP-CRIP
3"	.88	.75	.78	1.00
2 1/2"	.71	.50	-	.80
2"	.50	-	-	-

- * ONLY TAPCON ANCHORS OR ALL POINT SOLID-SET ALLOWED FOR MOUNTING INTO WOOD FRAME BUILDINGS.
- ** ANCHORS SPACING ONLY VALID FOR RED HEAD DYNABOLT ANCHORS.
- SEE SHEET 8 & 9 OF 9 FOR ANCHORS TYPE & SPACING FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS.
- ** MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACINGS SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (Min. E. D. FOR CALK-IN ANCHORS & ELCO PANELMATE IS 2 1/2", AND 3 1/2" FOR SOLID-SET ANCHORS).



TILECO INC.
 TILIT TESTING & ENGINEERING COMPANY
 2323 A.W. JOHNSON BL. SUITE 205 WASHINGTON GARDENS, FL 33167
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 03-0002718
 WALTER A. TILIT, P. E.
 FLORIDA LIC. # 44167

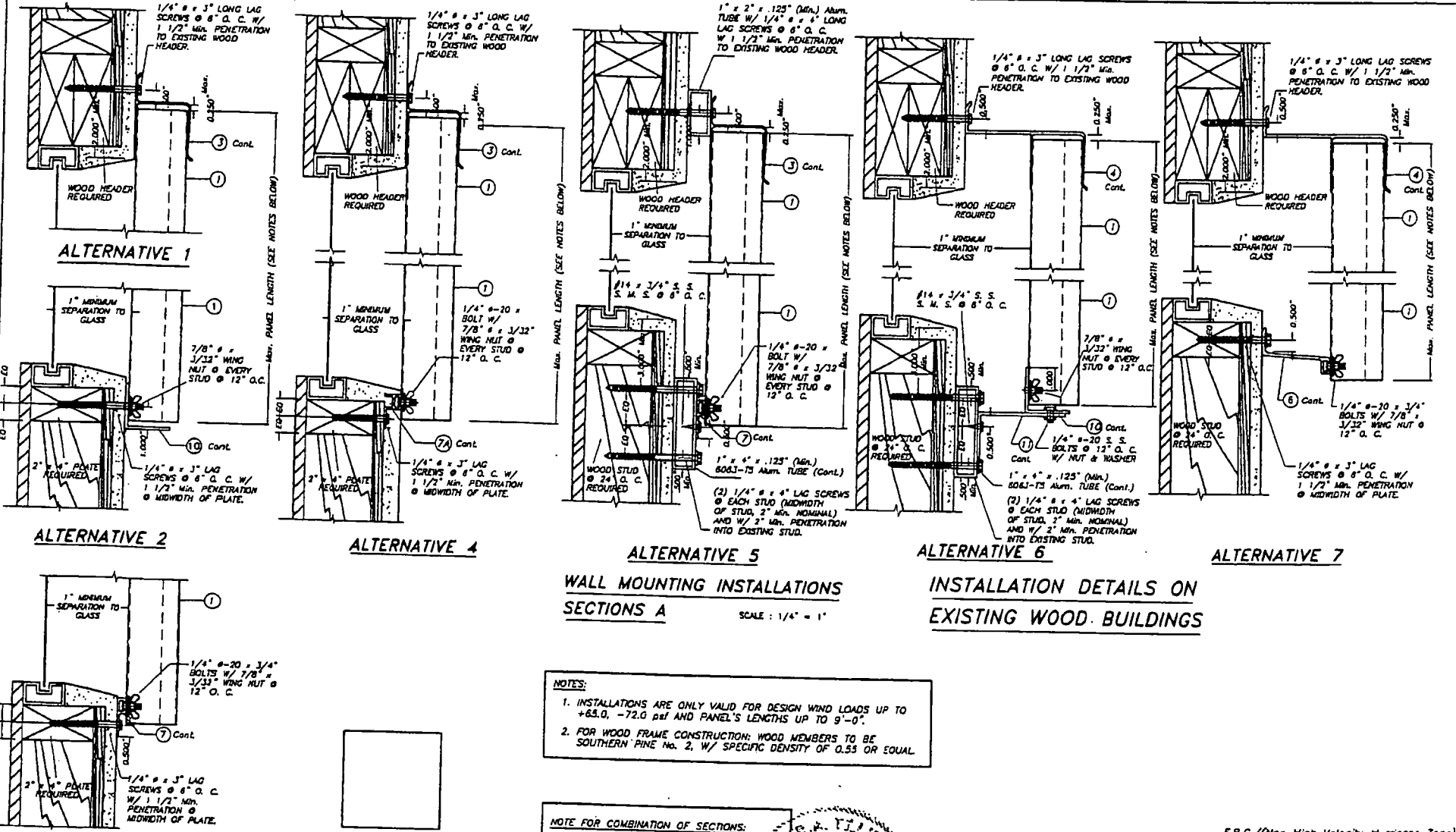
F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL

EASTERN METAL SUPPLY, INC
 4288 WEST ROADS DRIVE
 WEST PALM BEACH, FL 33407

L.C. DRAWN BY: 9/4/05 DATE: 05-270 DRAWING NO: SHEET 7 OF 9

REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD DWG 04-058 9/8/05		1	OLD DWG 04-058 9/8/05	
1	OLD DWG 04-058 9/8/05		1	OLD DWG 04-058 9/8/05	



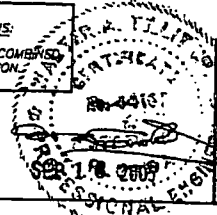
**WALL MOUNTING INSTALLATIONS
SECTIONS A**

SCALE: 1/4" = 1"

- NOTES:**
1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS UP TO +63.0, -72.0 psf AND PANEL'S LENGTHS UP TO 9'-0".
 2. FOR WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

NOTE FOR COMBINATION OF SECTIONS:
WALL MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

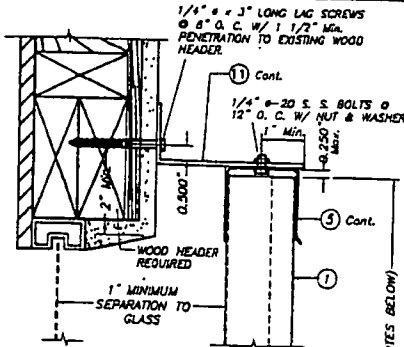
**INSTALLATION DETAILS ON
EXISTING WOOD BUILDINGS**



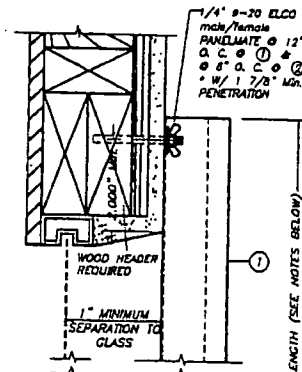
TILECO INC.
TILE TESTING & ENGINEERING COMPANY
2500 A.W. JOHNS BL. RD., 225 WOODLAND DRIVE, N. 23140
Phone 1 (800) 471-1330 Fax 1 (800) 471-1331
25-008719
WALTER A. TELFORD, P. E.
FLORIDA Lic. # 44187

F.B.C. / (Non High Velocity Hurricane Zone)

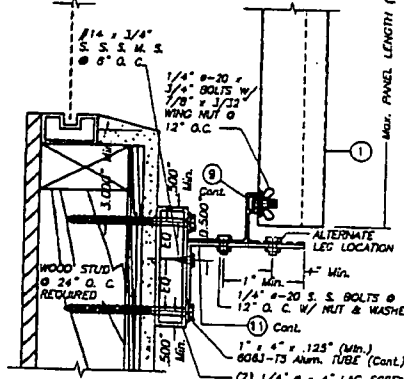
0.050" BERTHA ALUMINUM STORM PANEL		L.C. DRAWN BY:
EASTERN METAL SUPPLY, INC		9/8/03 DATE
4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		05-270 DRAWING No.
REV. NO.	DESCRIPTION	DATE
1	OLD DWG 05-264 9/2/03	
2	OLD DWG 05-264 9/15/04	
SHEET 8 OF 9		



ALTERNATIVE 8



ALTERNATIVE 10



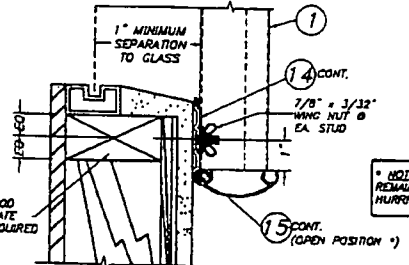
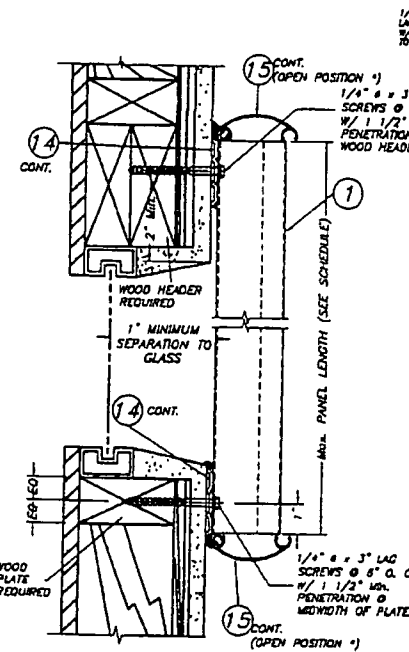
ALTERNATIVE 9

WALL MOUNTING INSTALLATIONS

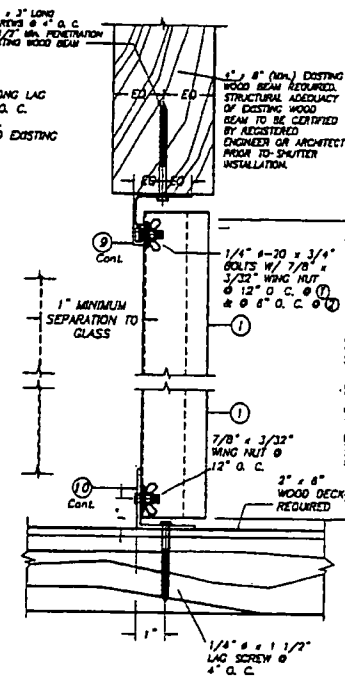
SECTIONS A SCALE: 1/4" = 1"

NOTE FOR COMBINATION OF SECTIONS:
FLOOR/WALL/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

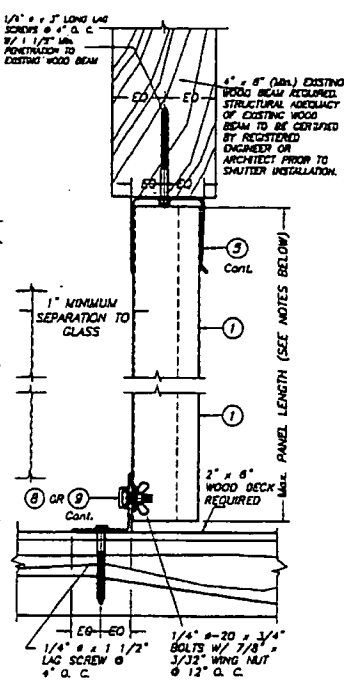
NOTES:
1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS UP TO +65.0, -72.0 psf AND PANEL'S LENGTHS UP TO 9'-0".
2. FOR WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.



SECTION @ STUD TYP. TOP/BOTTOM ALTERNATIVE 11



ALTERNATIVE 1



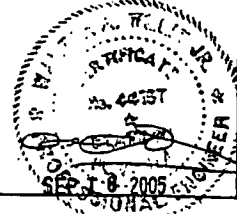
ALTERNATIVE 2

CEILING & FLOOR MOUNTING INSTALLATIONS

SECTIONS B SCALE: 1/4" = 1"

* NOTE: SNAP CAP (3) TO REMAIN CLOSED AT NON HURRICANE CONDITIONS.

INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS

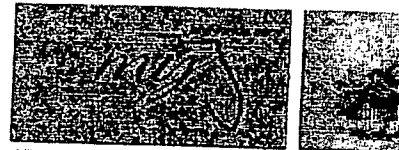


TILECO INC.
TILT TESTING & ENGINEERING COMPANY
448 N.W. 20th St., 2nd. Fl. Miramar, Florida, FL 33189
Phone: (305) 877-1530 Fax: (305) 877-1531
E9-0008719
WALTER A. TILT, P. E.
FLORIDA Lic. # 44187

F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL		L.G. DRAWN BY:
EASTERN METAL SUPPLY, INC		9/8/03 DATE
4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407		05-270 DRAWING No
REV. NO.	DESCRIPTION	DATE
1	OLD Dwg 05-024 9/8/03	2
1	OLD Dwg 05-024 9/8/03	1

SHEET 9 OF 9



Product Approval

USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**

- COMMUNITY PLANNING
- HOUSING & COMMUNITY DEVELOPMENT
- BUILDING CODES
- DEVELOPMENTAL DISABILITIES
- FLORIDA ENERGY CODE
- EMERGENCY MANAGEMENT
- OFFICE OF THE SECRETARY
- CONTRACTS
- FREQUENTLY ASKED QUESTIONS
- STATE BOARD SECRETARIES
- STATE HEALTH SECRETARIES
- INSURANCE GENERAL
- OVERSIGHT STAFF
- STAFF CONTACTS
- FOUR FOCUS
- STATE EMPLOYEE SERVICE

FL #	FL389-R1
Application Type	Revision
Code Version	2004
Application Status	Approved
Comments	
Archived	<input type="checkbox"/>
Product Manufacturer	American Shutter Systems Association, Inc.
Address/Phone/Email	4268 Westroads Drive West Palm Beach, FL 33407 (561) 841-5480 bfeeley@easternmetal.com
Authorized Signature	Bill Feeley bfeeley@easternmetal.com
Technical Representative	
Address/Phone/Email	
Quality Assurance Representative	
Address/Phone/Email	
Category	Shutters
Subcategory	Accordion
Compliance Method	Evaluation Report from a Florida Registered Architect Licensed Florida Professional Engineer <input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Walter A.. Tillit, Jr. P.E.
Florida License	PE-44167

Quality Assurance Entity
Validated By

National Accreditation and Management Institute
John Henry Kampmann Jr.

Certificate of Independence

Referenced Standard and Year (of Standard)

Standard	Year
ASTM E-1886	2002
ASTM E-1996	2002

Equivalence of Product Standards Certified By

Sections from the Code
1609.1.4
1609.1.4

Product Approval Method
Method 1 Option D

Date Submitted
8/5/2005
Date Validated
9/23/2005
Date Pending FBC Approval
9/29/2005
Date Approved
10/11/2005

Summary of Products		
FL #	Model, Number or Name	Description
389.1	Bertha HV Accordion Shutter (Non-HVHZ)- Drwg #05-196	Extruded aluminum interlocking blades by tracks (top and bottom) for storm pr
Limits of Use Approved for use in HVHZ: Approved for use outside HVHZ: Impact Resistant: Design Pressure: +/- Other: This product shall not be installed within High Velocity Hurricane Zone as defined on section 1620.2 of the Florida Building Code.		Installation Instructions Verified By: Evaluation Reports PTID_389_R1_T_CERT_INDEPENDENCE_0715.01.pdf PTID_389_R1_T_Drawing_No.05-196.p PTID_389_R1_T_PROD_EVALUATION_R05-0715.01.pdf

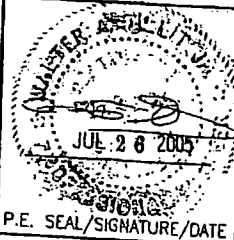
DCA Administration

Department of Community Affairs
Florida Building Code Online
Codes and Standards
2555 Shumard Oak Boulevard
Tallahassee, Florida 32399-2100

GENERAL NOTES:

1. BERTHA H.V. ACCORDION SHUTTER SYSTEM SHOWN ON THIS PRODUCT EVALUATION DOCUMENT (P.E.D.) HAS BEEN VERIFIED FOR COMPLIANCE IN ACCORDANCE WITH THE 2004 EDITION OF THE FLORIDA BUILDING CODE.
THIS ACCORDION SHUTTER SYSTEM SHALL NOT BE INSTALLED AT HIGH VELOCITY HURRICANE ZONES. DESIGN WIND LOADS SHALL BE DETERMINED AS PER SECTION 1609 OF THE ABOVE MENTIONED CODE FOR A BASIC WIND SPEED AS REQUIRED BY THE JURISDICTION WHERE SHUTTER WILL BE INSTALLED, AND FOR A DIRECTIONALITY FACTOR $K_d=0.85$, IN ACCORDANCE WITH ASCE 7-98 STANDARD. IN ORDER TO VERIFY THAT ANCHORS ON THIS P.A.D., AS TESTED, WERE NOT OVERSTRESSED, A 33% INCREASE IN ALLOWABLE LOADS FOR WIND LOADS WAS NOT USED IN THEIR ANALYSIS.
BERTHA H.V. ACCORDION SHUTTER SYSTEM'S ADEQUACY FOR WIND AND IMPACT LOAD HAS BEEN VERIFIED IN ACCORDANCE WITH SECTION 1609.1.4 OF THE ABOVE MENTIONED CODE AS PER ATL REPORTS #0214.01-03 AND #0715.01-03 AS PER TAS-201, TAS-202 AND TAS-203 PROTOCOLS AND ASTM E-1886 AND E-1996 STANDARDS.
2. BERTHA H.V. ACCORDION PINS (HV SCREWS), USED AT BLADES KNUCKLE AND FOR DIRECT MOUNT CONNECTION TO TRACKS SHALL BE # 14X2.75 AND # 14X1.75 RESPECTIVELY, 410-HT MINIMUM SERIES STAINLESS STEEL SCREWS WITH 135.0 ksi YIELD STRENGTH AND 180 ksi TENSILE STRENGTH. PINS SHALL BE COATED WITH BERTHA HV DACROSHIELD® COATING SYSTEM AS MANUFACTURED BY APPROVED COATING APPLICATORS, REGISTERED WITH AMERICAN SHUTTER SYSTEMS ASSOCIATION. PINS MUST BEAR THE HV MARKING ON THEIR HEAD.
3. ALL ALUMINUM EXTRUSIONS SHALL BE ALUMINUM ASSOCIATION 6063-T8 ALLOY AND TEMPER, WITH $F_y = 25.0$ ksi MINIMUM (UNLESS OTHERWISE NOTED).
4. ALL SCREWS TO BE STAINLESS STEEL 304 OR 316 AISI SERIES OR CORROSION RESISTANT COATED CARBON STEEL AS PER DIN 50018 WITH 50 ksi YIELD STRENGTH AND 90 ksi TENSILE STRENGTH.
5. BOLTS TO BE ALUMINUM ASSOCIATION 2024-T4 ALLOY AND TEMPER, ASTM A-307 GALVANIZED STEEL, OR AISI 304 SERIES STAINLESS STEEL WITH 35 ksi MINIMUM YIELD STRENGTH.
6. SEE SHEETS 10, 11 AND 12 FOR ANCHORS SPECIFICATIONS.
7. THIS BERTHA H.V. ACCORDION SHUTTER SYSTEM IS PATENT PENDING. COMPONENTS OF THIS APPROVAL ARE COVERED, IN WHOLE OR IN PART BY U.S. PATENT ISSUED TO EASTERN METAL SUPPLY, INC.
8. IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE SOUNDNESS OF THE STRUCTURE WHERE SHUTTER IS TO BE ATTACHED TO INSURE PROPER ANCHORAGE.
CONTRACTOR TO SEAL/CAULK ALL SHUTTER COMPONENT EDGES WHICH REMAIN, THRU FASTENING IN CONTINUOUS CONTACT WITH THE BUILDING TO PREVENT WIND/RAIN INTRUSION.
9. EACH UNIT MUST BEAR A PERMANENT LABEL IN A VISIBLE PLACE WITH WARNING NOTE INSTRUCTING THE TENANT OR HOME OWNER THAT THE H.V. LOCK (W) OR ALTERNATE LOCK (Y) MUST BE PROPERLY LOCKED DURING PERIODS OF HURRICANE WARNING. FOR EGRESS CONDITIONS, AN INSIDE HV LOCK (W) (WHERE KEY MUST REMAIN IN THE LOCK), AN INSIDE ALTERNATE LOCK (Y), OR AN EGRESS H.V. LOCK (W) SHALL BE USED.
10. SHUTTER'S MANUFACTURER LABEL SHALL BE PLACED ON A READILY VISIBLE LOCATION.
ONE LABEL SHALL BE PLACED FOR EVERY OPENING. LABEL SHALL READ AS FOLLOWS:
AMERICAN SHUTTER SYSTEMS ASSOCIATION INC.
WEST PALM BEACH, FL
FLORIDA STATEWIDE PRODUCT APPROVED.

11. BERTHA H.V. ACCORDION SHUTTER SYSTEM'S INSTALLATION SHALL COMPLY WITH SPECS INDICATED IN THIS DRAWING PLUS ANY BUILDING AND ZONING REGULATIONS PROVIDED BY THE JURISDICTION WHERE PERMIT IS APPLIED TO.
12. (a) THIS P.E.D. PREPARED BY THIS ENGINEER IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR A SITE SPECIFIC PROJECT; i.e. WHERE THE SITE CONDITIONS DEVIATE FROM THE P.E.D.
- (b) CONTRACTOR TO BE RESPONSIBLE FOR THE SELECTION, PURCHASE AND INSTALLATION INCLUDING LIFE SAFETY OF THIS PRODUCT, BASED ON THIS P.E.D., PROVIDED HE/SHE DOES NOT DEVIATE FROM THE CONDITIONS DETAILED ON THIS DOCUMENT. CONSTRUCTION SAFETY AT SITE IS THE CONTRACTOR'S RESPONSIBILITY.
- (c) THIS P.E.D. WILL BE CONSIDERED INVALID IF ALTERED BY ANY MEANS.
- (d) SITE SPECIFIC PROJECTS SHALL BE PREPARED BY A FLORIDA REGISTERED ENGINEER OR ARCHITECT WHICH WILL BECOME THE ENGINEER OF RECORD (E.O.R.) FOR THE PROJECT AND WHO WILL BE RESPONSIBLE FOR THE PROPER USE OF THE P.E.D. ENGINEER OF RECORD, ACTING AS A DELEGATED ENGINEER TO THE P.E.D. ENGINEER SHALL SUBMIT TO THIS LATTER THE SITE SPECIFIC DRAWINGS FOR REVIEW.
- (e) THIS P.E.D. SHALL BEAR THE DATE AND ORIGINAL SEAL AND SIGNATURE OF THE PROFESSIONAL ENGINEER OF RECORD THAT PREPARED IT.



P.E. SEAL/SIGNATURE/DATE



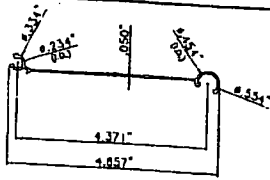
TILLIT TESTING & ENGINEERING COMPANY
 4333 N.W. 36th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33188
 Phone : (305)871-1530 . Fax : (305)871-1531
 e-mail: Tilteco@aol.com
 EB-0008719
 WALTER A. TILLIT JR., P. E.
 FLORIDA Lic. # 44167

A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

F.B.C. (Non High Velocity Hurricane Zone)
 © 2003 EASTERN METAL SUPPLY, INC.

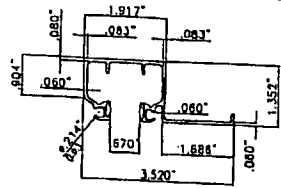
BERTHA HV™
 Accordion Shutter System

REV. NO.	DESCRIPTION	DATE	Drawn by: J.A.S.
1	03-03-03	7/13/05	DATE: 7/13/05
2			DRAWING No
3			05-196
4			SHEET
5			1 OF 14
6			

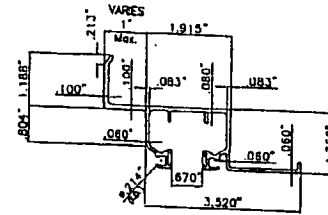


A HV BLADE # 1

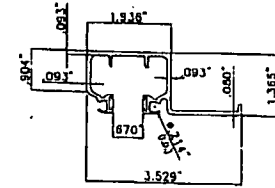
COVERED UNDER US PATENT # 5458179



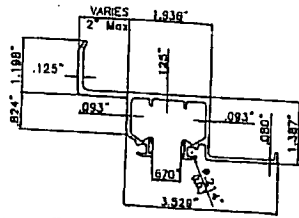
B HV CEILING HEADER # 1



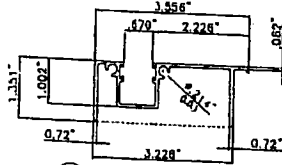
C HV 1\" (Max.) B/O HEADER/SILL # 1



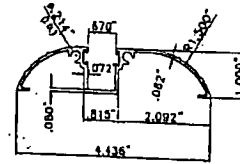
E HD CEILING HEADER/SILL # 2



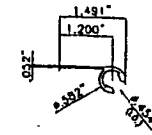
F HD 2\" (Max.) B/O HEADER/SILL # 2



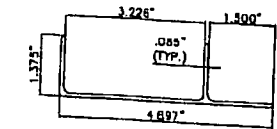
I HV ADJ. TRACK



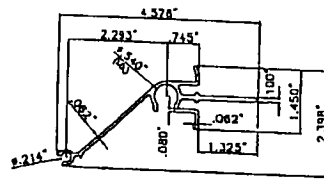
J HV WALK-OVER TRACK



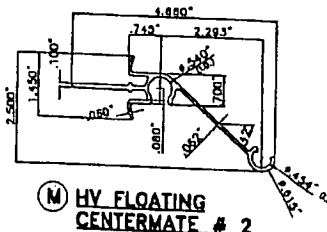
K HV 90\"/180\" STARTER



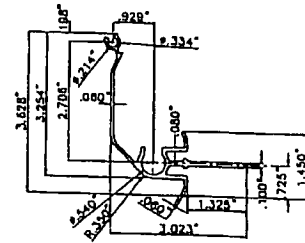
H HV ADJ. ADAPTER W/LIP



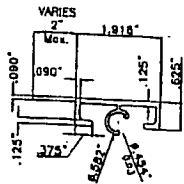
**L HV CENTERMATE # 1
(SELF MATING)**



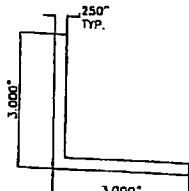
**M HV FLOATING
CENTERMATE # 2**



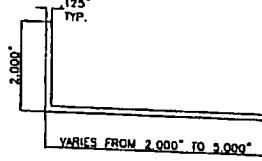
X HV CORNER CENTERMATE # 3



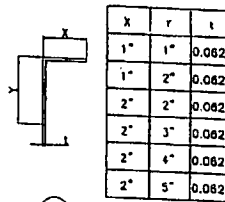
N H.V. 2\" (Max.) DIRECT MOUNT



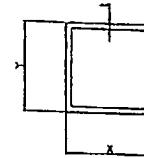
O 3\" FLOOR ANGLE



Q B.O. WALL ANGLE



R SIDE ANGLE

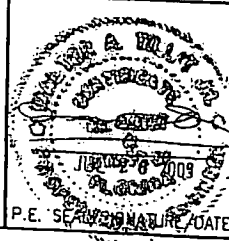


S CORNER POST

X	Y	t
1"	1"	0.082"
1"	2"	0.062"
2"	2"	0.062"
2"	3"	0.062"
2"	4"	0.062"
2"	5"	0.082"

F.B.C. (Non High Velocity Hurricane Zone)

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TILTECO INC.

TILLIT TESTING & ENGINEERING COMPANY
 8333 N.W. 35th St., Ste. 305, WINDY GARDENS, FLORIDA 33166
 Phone : (305)871-1530 Fax : (305)871-1531
 e-mail: tillit@tillit.com
 WALTER A. TILLIT, Jr., P. E.
 FLORIDA Lic. # 44167

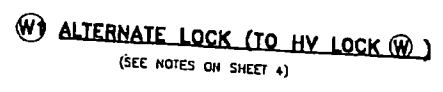
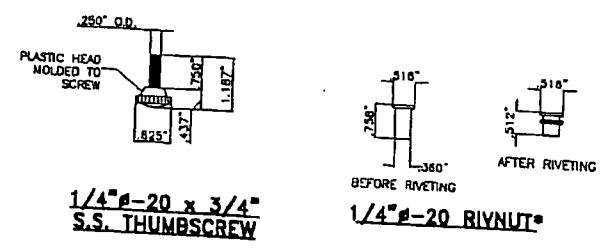
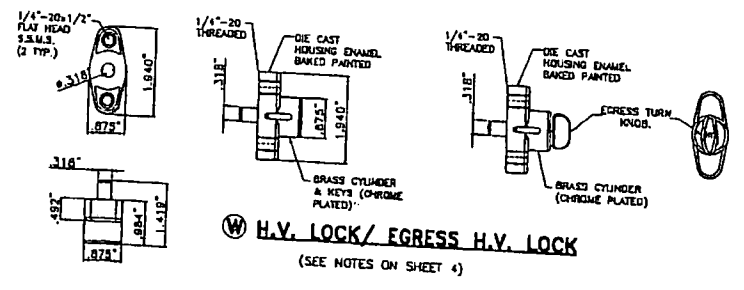
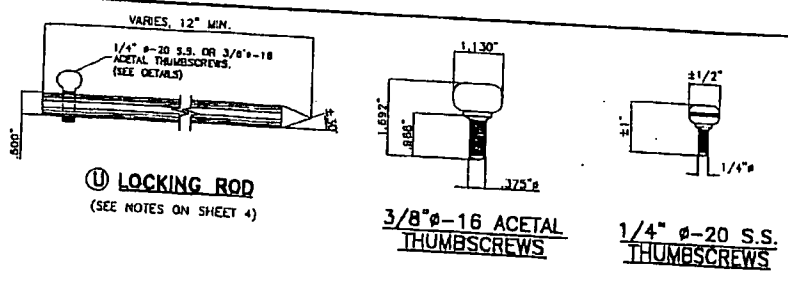
A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

BERTHA HV™
 Accordion Shutter System

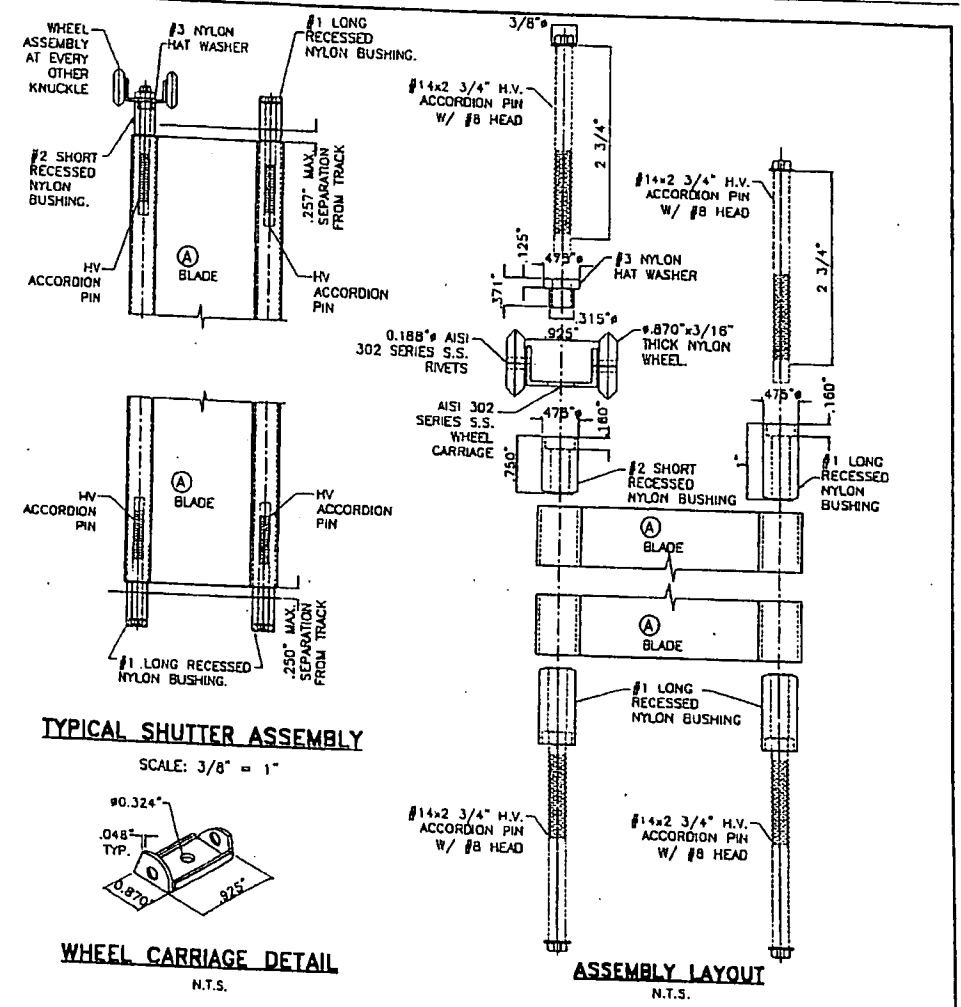
REV. No	DESCRIPTION	DATE	Drawn by: J.A.S.
1	OLD 03-034	7/13/05	DATE: 7/13/05
2			
3			
4			
5			
6			

DRAWING No
05-196

SHEET
2 OF 14



*: SERIES 9444 ALUMINUM (2024-T3 ALLOY) LARGE FLANGE THIN SHEET NUTSERT. PART # 0820, AS MANUFACTURED BY AVDEL CHERRY TEXTON, PARSIPPANY, NEW JERSEY 07054 OR EQUAL.



WALTER A. TILLIT JR. P. E.
FLORIDA Lic. # 44167

TILTECO INC.
TILLIT TESTING & ENGINEERING COMPANY
8333 N.W. 38th St., Ste. 304, WILMINGTON, FLORIDA 33108
Phone: (305)871-1530 Fax: (305)871-1531
e-mail: tilteco@aol.com
EB-0006710
WALTER A. TILLIT JR. P. E.
FLORIDA Lic. # 44167

A.S.S.A.
American Shutter Systems Association, Inc.
4268 Westroads Drive
West Palm Beach, FL 33407

F.B.C. (Non High Velocity Hurricane Zone)
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BERTHA HV™
Accordion Shutter System

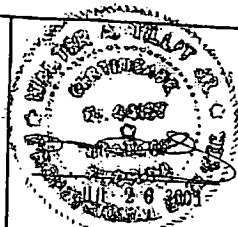
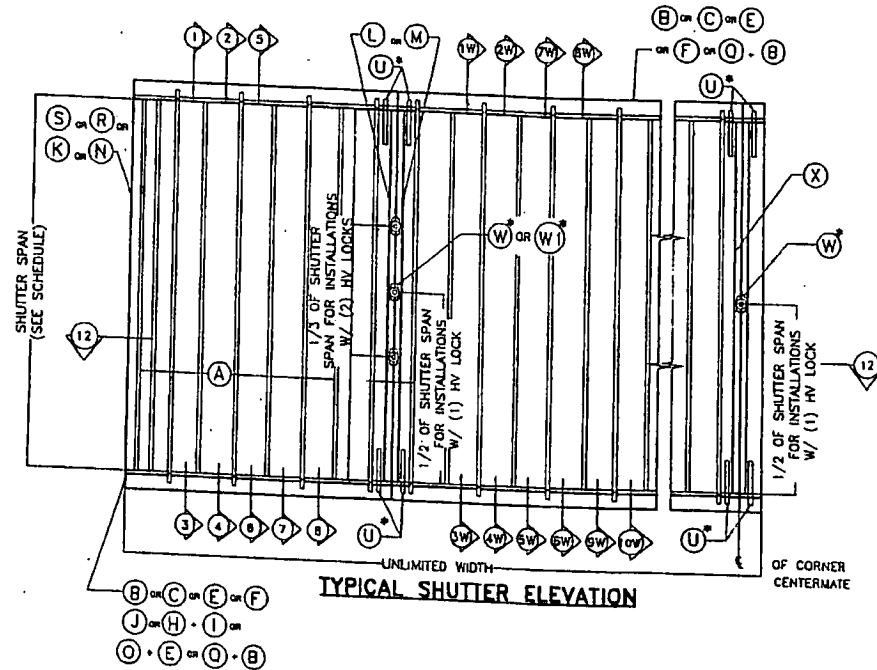
REV. NO.	DESCRIPTION	DATE	Drawn by J.A.S.
1	OLD 83-434	7/14/05	DATE: 7/13/05
2			
3			
4			
5			
6			

DRAWING No
05-196

SHEET
3 OF 14

* **NOTES ON LOCKING RODS (U), HV LOCK (W) AND ALTERNATE (W1) LOCK:**

1. **MANDATORY CONDITION #1:** ONE HV LOCK (W) SHALL BE USED FOR ANY SPAN AND INSTALLATIONS AT ANY ELEVATION. HV LOCK (W) MAY BE USED AS AN INSIDE OR OUTSIDE LOCK, ATTACHED TO (U) OR (W) CENTERMATES W/(2) 1/4"Ø-20 x 1/2" LONG FLAT HEAD S.S. M.S. LOCATION OF LOCK SHALL BE AS INDICATED ON TYPICAL SHUTTER ELEVATION.
2. **OPTIONAL CONDITION #1:** IF DESIRED, FOR BETTER PERFORMANCE OR FOR SECURITY PURPOSES, UP TO TWO HV LOCKS (W) MAY BE USED AS AN INSIDE OR OUTSIDE LOCK. CONNECTION OF LOCKS TO CENTERMATES (U) OR (W) SHALL BE AS INDICATED ON NOTE (1) ABOVE. LOCATION OF LOCKS SHALL BE AS INDICATED ON TYPICAL SHUTTER ELEVATION.
3. **OPTIONAL CONDITION #2:** LOCKING RODS (U) ARE NOT REQUIRED AT HURRICANE POSITION, BUT MAY BE USED IF DECIDED TO ENHANCE SHUTTER PERFORMANCE. LOCKING RODS (U) OR AN ALTERNATIVE DEVICE MAY ALSO BE USED AT STACKING POSITION (NON HURRICANE POSITION).
4. **MANDATORY CONDITION #2:** ONE HV LOCK (W) SHALL BE USED AT CORNER CENTERMATES FOR ANY SPAN AND INSTALLATIONS AT ANY ELEVATION. HV LOCK (W) SHALL BE USED AS AN OUTSIDE OR INSIDE LOCK, ATTACHED TO CORNER CENTERMATE W/(2) 1/4"Ø-20 x 1/2" LONG FLAT HEAD S.S. M.S. TWO LOCKING RODS (U) AT TOP & BOTTOM SHALL BE USED. LOCATION OF LOCK SHALL BE AS INDICATED ON TYPICAL SHUTTER ELEVATION. MAXIMUM SHUTTER SPAN SHALL BE DETERMINED AS PER SCHEDULES SHOWN ON SHEET 9.
5. **ALTERNATE TO MANDATORY CONDITION #1 VALID ONLY FOR SYMMETRICAL CENTERMATES:** ONE ALTERNATE LOCK (W1) MAY BE USED IN LIEU OF HV LOCK (W) FOR ANY SPAN AND INSTALLATIONS AT ANY ELEVATION. ALTERNATE LOCK (W1) MAY BE USED AS AN INSIDE OR OUTSIDE LOCK. ATTACHMENT OF 1/4"Ø-20x3/4" S.S. THUMBSCREW TO (U) OR (W) CENTERMATES SHALL BE MADE W/ 1/4"Ø-20x3/4" ALUM. RIVNUT AS SHOWN ON ALTERNATE SECTION 12, SHEET 7.



P.E. SEAL/SIGNATURE/DATE



TILLIT TESTING & ENGINEERING COMPANY
 6355 N.W. 30th St., Ste. 305, WOODHIA GARDENS, FLORIDA 33188
 Phone : (305)871-1530 Fax : (305)871-1531
 e-mail: tilteco@aol.com
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 WALTER A. TILLIT, Jr., P. E.
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 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

F.B.C. (Non High Velocity Hurricane Zone)

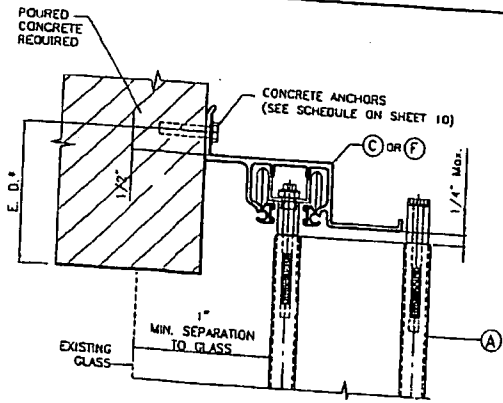
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BERTHA HV™
 Accordion Shutter System

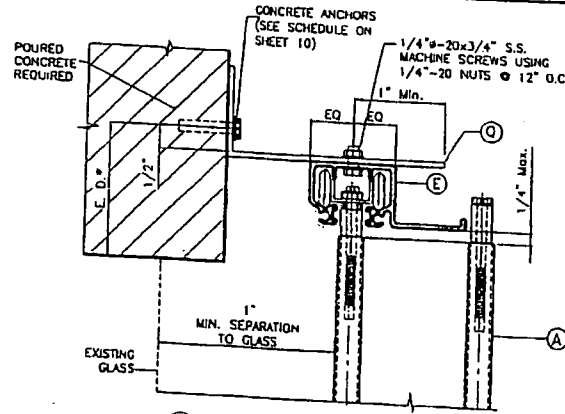
REV. No	DESCRIPTION	DATE	Drawn By: SWBWN
1	OLD 03-034	7/13/05	DATE: 7/13/05
2			
3			
4			
5			
6			

DRAWING No
05-196

SHEET
4 OF 14



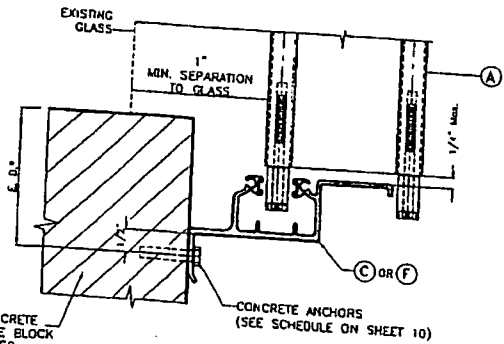
① WALL MOUNTING INSTALLATION



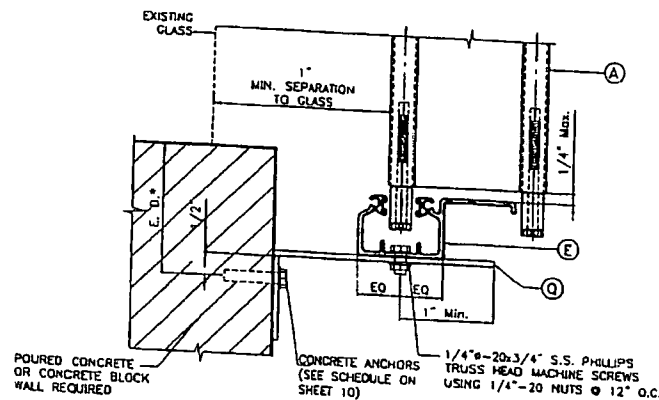
② WALL MOUNTING INSTALLATION

NOTE FOR COMBINATION OF SECTIONS:
 1- SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
 2- MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

* E. D. - EDGE DISTANCE
 (SEE NOTES & SCHEDULE ON SHEET 11)

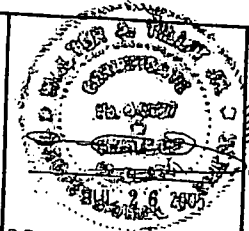


③ WALL MOUNTING INSTALLATION



④ WALL MOUNTING INSTALLATION

INSTALLATION DETAILS



P.E. SEAL/SIGNATURE/DATE



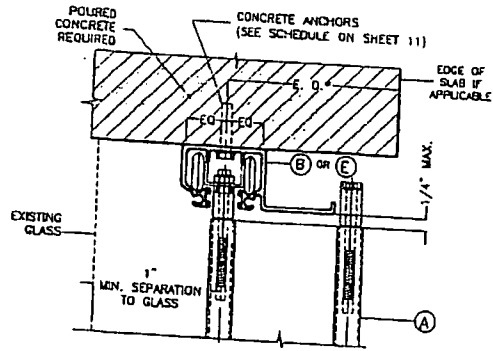
TILLIT TESTING & ENGINEERING COMPANY
 8355 N.W. 38th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33168
 Phone : (305)871-1530 . Fax : (305)871-1531
 e-mail: tilteco@aol.com
 EB-0008719
 WALTER A. TILLIT JR., P. E.
 FLORIDA Lic. # 44187

A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

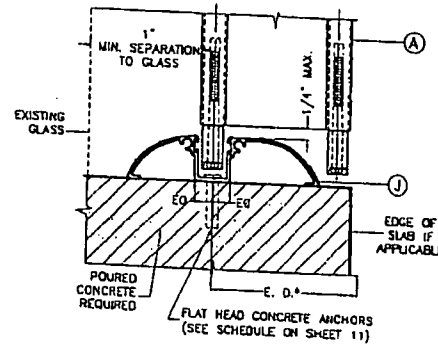
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 Accordion Shutter System

REV. No.	DESCRIPTION	DATE	Drawn by J.A.S.
1	OLD 83-834	7/11/05	DATE: 7/13/05
2			DRAWING No
3			05-196
4			SHEET
5			5 OF 14
6			



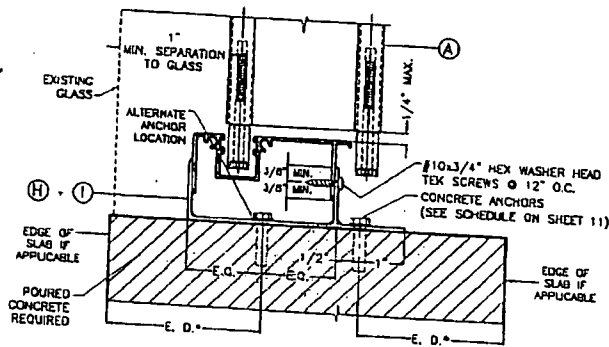
5 CEILING MOUNTING INSTALLATION



6 WALK-OVER MOUNTING INSTALLATION

NOTE FOR COMBINATION OF SECTIONS:
 1- SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
 2- MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

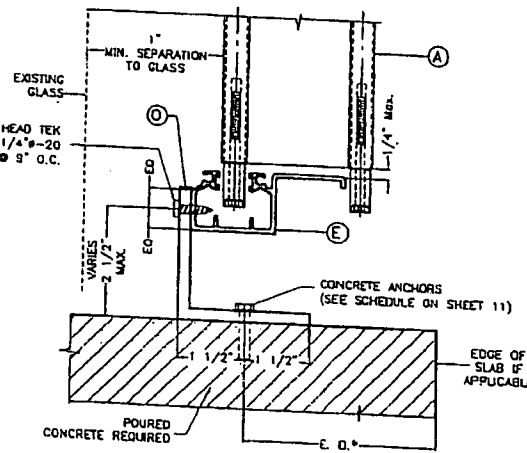
* E. D. = EDGE DISTANCE (SEE NOTES & SCHEDULE ON SHEET 11)



7 FLOOR MOUNTING INSTALLATION †

#14x3/4" S.S. HEX HEAD TEK SCREWS @ 9" O.C. OR 1/4" @ 20 S.S. M.S. W/ NUT @ 9" O.C.

NOTE:
 THIS INSTALLATION SHALL BE REMOVABLE WHEN PERFORMED ADJACENT TO AN OPERABLE EXIT OR ENTRANCE



8 FLOOR MOUNTING INSTALLATION †

INSTALLATION DETAILS

TILTECO INC.
 TILT TESTING & ENGINEERING COMPANY
 8333 N.W. 34th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33168
 Phone: (305)871-1530 Fax: (305)871-1531
 e-mail: tilt@coast.com
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 WALTER A. TILTY Jr., P. E.
 FLORIDA Lic. # 44187

JUL 26 2005
 P.E. SEAL/SIGNATURE/DATE

TILTECO INC.
 TILT TESTING & ENGINEERING COMPANY
 8333 N.W. 34th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33168
 Phone: (305)871-1530 Fax: (305)871-1531
 e-mail: tilt@coast.com
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 WALTER A. TILTY Jr., P. E.
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 American Shutter Systems Association, Inc.
 4288 Westroads Drive
 West Palm Beach, FL 33407

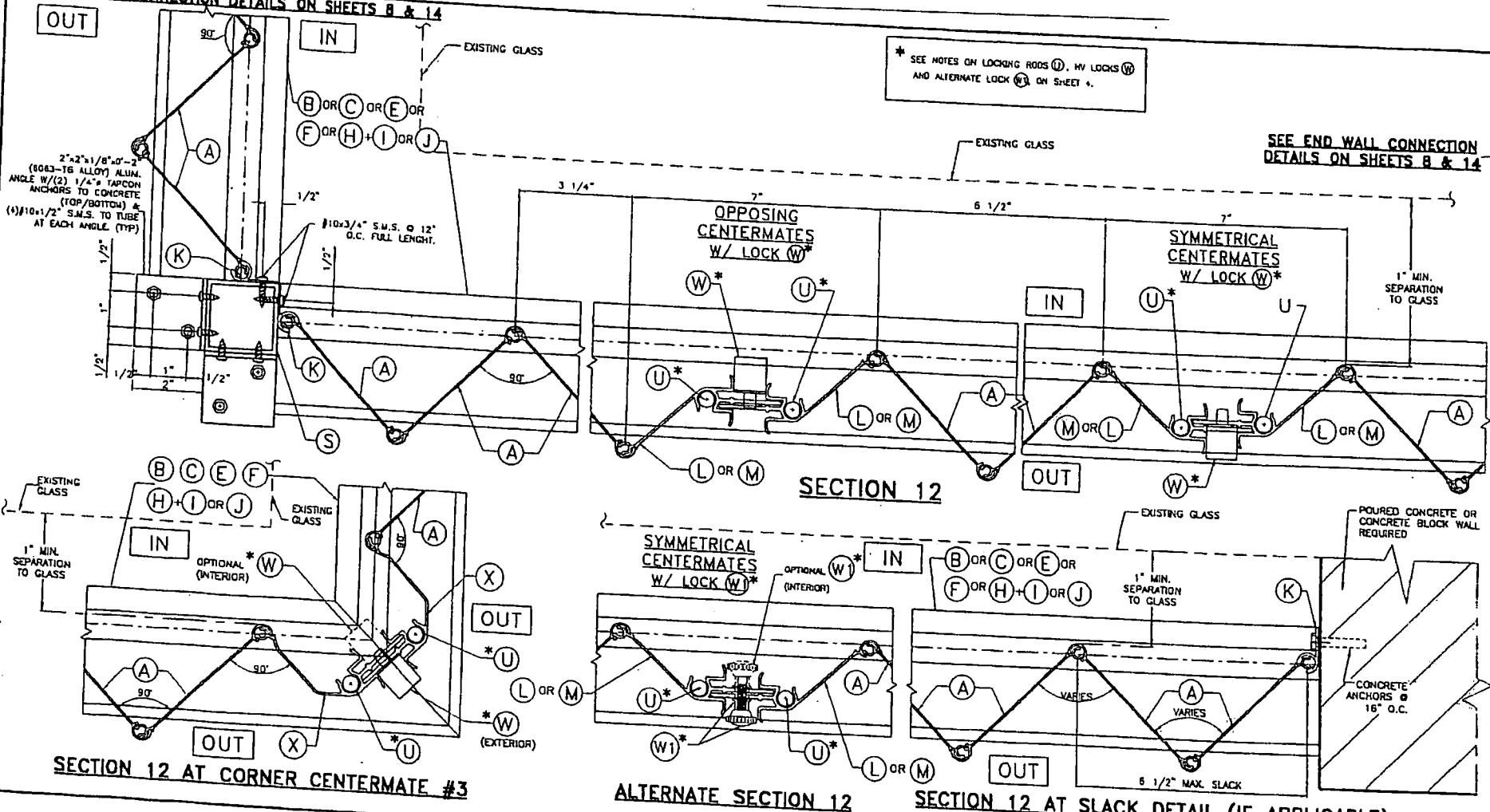
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BERTHA HV™			
Accordion Shutter System			
REV. No	DESCRIPTION	DATE	Drawn by: J.A.S.
1	OLD 05-196	7/13/03	DATE: 7/13/03
2			DRAWING No
3			05-196
4			SHEET
5			8
6			OF 14

SEE END WALL CONNECTION DETAILS ON SHEETS B & 14

* SEE NOTES ON LOCKING RODS (U), HV LOCKS (W) AND ALTERNATE LOCK (W1) ON SHEET 4.

SEE END WALL CONNECTION DETAILS ON SHEETS B & 14



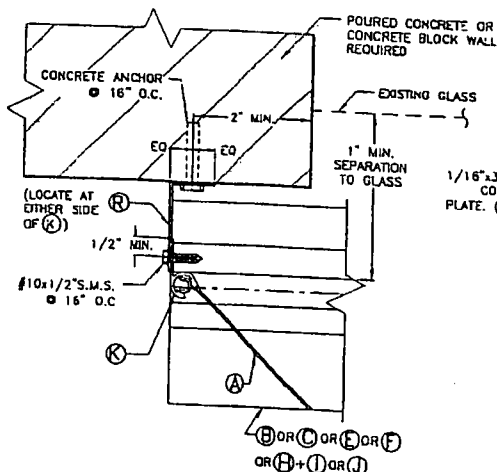
P.E. SEAL/SIGNATURE/DATE

TILTECO INC.
 TILLIT TESTING & ENGINEERING COMPANY
 4353 N.W. 36th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33146
 Phone: (305) 871-1530 Fax: (305) 871-1531
 e-mail: tiltco@aol.com
 EB-0008719
 WALTER A. TILIT Jr., P. E.
 FLORIDA Lic. # 44167

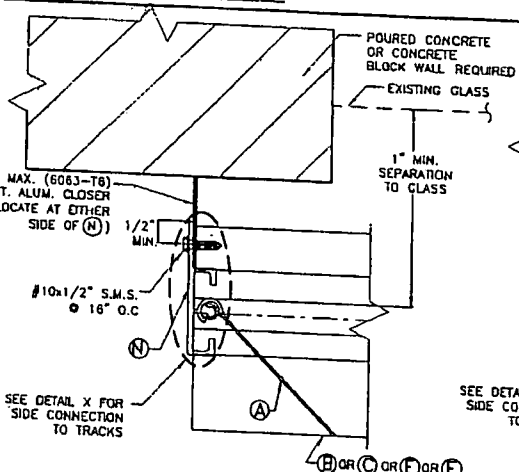
A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

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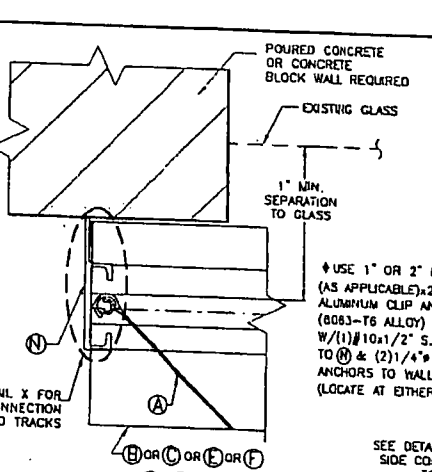
BERTHA HV™ Accordian Shutter System			
REV. NO.	DESCRIPTION	DATE	Drawn by: J.A.S.
1	CLP 03-03*	7/13/05	DATE: 7/13/05
2			
3			DRAWING No
4			05-196
5			SHEET
6			7 OF 14



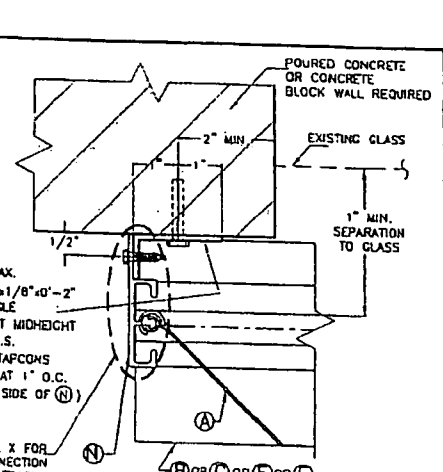
END CONNECTION DETAIL ①



END CONNECTION DETAIL ②

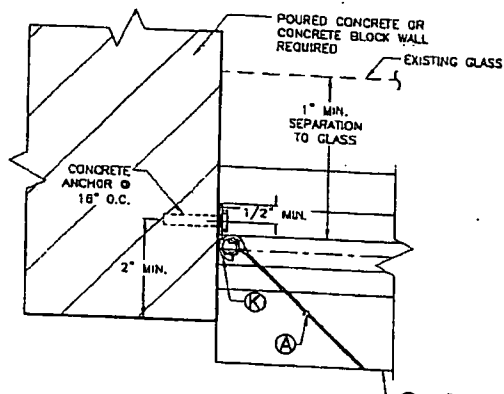


END CONNECTION DETAIL ③

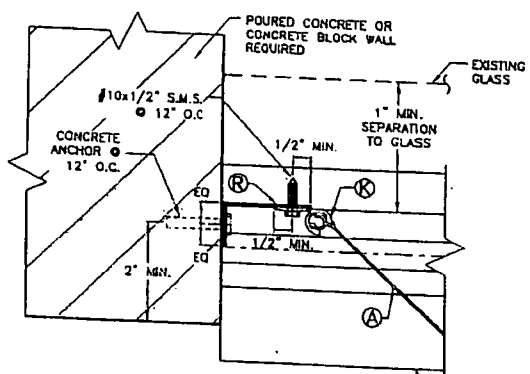


END CONNECTION DETAIL ④

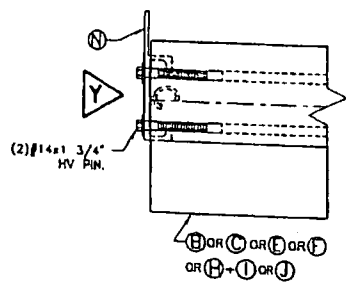
♦ REQUIRED ONLY FOR SPANS GREATER THAN 12'-0"



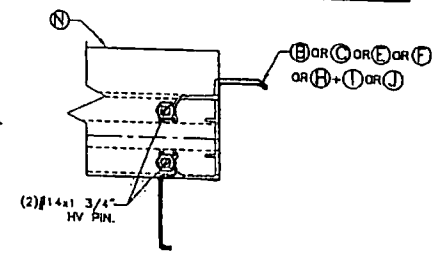
END CONNECTION DETAIL ⑤



END CONNECTION DETAIL ⑥

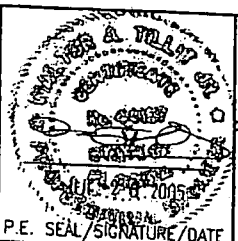


PLAN



VIEW Y

DETAIL X



TILTECO INC.
 TILLIT TESTING & ENGINEERING COMPANY
 8323 N.W. 35th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 32168
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 West Palm Beach, FL 33407

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REV. No.	DESCRIPTION	DATE	Drawn by: J.A.S.
1	OLD 03-03a	7/13/03	DATE: 7/13/03
2			DRAWING No
3			05-196
4			SHEET
5			8 OF 14

MAXIMUM SHUTTER SPAN
"L+" OR "L-" (ft.) INSTALLATIONS
W/ SYMMETRICAL CENTERMATES,
ONE HV LOCK & NO LOCKING RODS *
(SEE NOTE †)

MAXIMUM DESIGN LOAD (p.s.f.) (+ OR -)	CONCRETE & WOOD INSTALLATIONS ▲			
	WALL MOUNTING		FLOOR/CEILING MOUNTING	
	L+ (ft.)	L- (ft.)	L+ (ft.)	L- (ft.)
30 OR LESS	16'-0"	16'-0"	16'-0"	16'-0"
35	14'-10"	14'-10"	15'-2"	16'-0"
40	13'-10"	13'-10"	14'-2"	15'-2"
45	13'-1"	13'-1"	13'-4"	14'-3"
50	12'-5"	12'-5"	12'-8"	13'-7"
55	11'-10"	11'-10"	12'-1"	12'-11"
60	11'-4"	11'-4"	11'-7"	12'-4"
65	10'-10"	10'-10"	11'-1"	11'-11"
70	10'-8"	10'-8"	10'-9"	11'-5"
75	10'-1"	10'-1"	10'-4"	11'-1"
80	9'-10"	9'-10"	10'-0"	10'-9"
85	9'-8"	9'-8"	9'-9"	10'-5"
90	9'-3"	9'-3"	9'-5"	10'-1"
95	9'-0"	8'-9"	9'-2"	9'-10"
100	8'-9"	8'-4"	8'-9"	9'-4"
105	8'-7"	7'-11"	8'-9"	9'-2"
110	8'-4"	7'-7"	8'-7"	8'-11"
115	8'-2"	7'-3"	8'-4"	8'-9"
120	8'-0"	6'-9"	8'-2"	8'-5"
125	7'-10"	6'-5"	7'-10"	8'-1"
130	7'-8"	6'-2"	7'-9"	7'-9"
135	7'-7"	5'-11"	7'-7"	7'-6"
140	7'-5"	5'-8"	7'-5"	7'-3"
145	7'-0"	5'-5"	7'-2"	6'-9"
150	6'-11"	5'-2"	7'-1"	6'-7"
155	6'-10"	4'-11"	6'-11"	6'-4"
160	6'-9"	4'-8"	6'-8"	6'-0"
165	6'-7"	4'-5"	6'-5"	5'-10"
170	6'-6"	4'-3"	6'-3"	5'-6"
175	6'-5"	4'-1"	6'-1"	5'-3"
180	6'-4"	3'-11"	5'-11"	5'-1"
185	6'-3"	3'-9"	5'-9"	4'-11"
190	6'-2"	3'-7"	5'-7"	4'-9"
195	6'-1"	3'-5"	5'-5"	4'-8"
200	6'-0"	3'-3"	5'-3"	4'-6"
205	5'-11"	3'-1"	5'-1"	4'-5"

MAXIMUM SHUTTER SPAN
"L+" OR "L-" (ft.)
INSTALLATIONS W/
OPPOSING CENTERMATES,
ONE HV LOCK & NO
LOCKING RODS *
(SEE NOTE †)

MAXIMUM DESIGN LOAD (p.s.f.) (+ OR -)	CONCRETE & WOOD INSTALLATIONS ▲	
	WALL MOUNTING & FLOOR/CEILING MOUNTING	
	L+ (ft.)	L- (ft.)
30	16'-0"	16'-0"
35	14'-10"	14'-10"
40	13'-10"	13'-10"
45	13'-1"	13'-1"
50	12'-5"	12'-5"
55	11'-10"	11'-10"
60	11'-4"	11'-4"
65	10'-10"	10'-10"
70	10'-8"	10'-6"
75	10'-1"	10'-1"
80	9'-10"	9'-10"
85	9'-6"	9'-6"
90	9'-3"	9'-3"
95	9'-0"	8'-9"
100	8'-9"	8'-4"
105	8'-7"	7'-11"
110	8'-4"	7'-7"
115	8'-2"	7'-3"
120	8'-0"	6'-11"
125	7'-10"	6'-8"
130	7'-8"	6'-5"
135	7'-7"	6'-2"
140	7'-5"	5'-11"
145	7'-3"	5'-8"
150	7'-0"	5'-5"
155	7'-0"	5'-2"
160	6'-11"	5'-1"
165	6'-10"	4'-11"
170	6'-9"	4'-8"
175	6'-7"	4'-5"
180	6'-6"	4'-3"
185	6'-5"	4'-1"
190	6'-4"	3'-11"
195	6'-3"	3'-9"
200	6'-2"	3'-7"
205	6'-1"	3'-5"

INSTALLATION LEGEND		
	CONCRETE & MANSORY	WOOD
WALL MOUNTING	1, 2, 3 & 4	1W, 2W, 3W, 4W, 5W & 6W
FLOOR/CEILING MOUNTING	5, 6, 7 & 8	8W, 9W & 10W

A MAXIMUM SHUTTER SPAN "L+" OR "L-" FOR INSTALLATIONS INTO WOOD SHALL BE LIMITED TO 110 psf. DESIGN LOAD.

† CORNER CENTERMATE #3 MAY BE USED AT ALL MOUNTING INSTALLATIONS. LOCKING SPECIFICATIONS SHALL BE AS INDICATED ON MANDATORY CONDITION #2 NOTE #4, SHEET 4 OF 14.

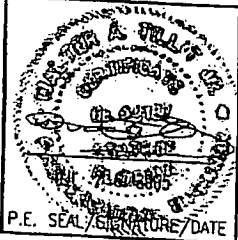
* NOTES:

(1) L+: MAXIMUM ALLOWABLE SPAN FOR A GIVEN POSITIVE DESIGN LOAD.
L-: MAX. ALLOWABLE SPAN FOR A GIVEN NEGATIVE DESIGN LOAD.

(2) PROCEDURE TO DETERMINE MAXIMUM SPAN FOR WALL MOUNTINGS (TOP/BOTTOM) OR FLOOR/CEILING:
GIVEN A POSITIVE DESIGN LOAD, DETERMINE MAXIMUM SPAN L+ FROM SCHEDULE.
GIVEN A NEGATIVE DESIGN LOAD, DETERMINE MAXIMUM SPAN L- FROM SCHEDULE.
FINAL MAXIMUM ALLOWABLE SPAN IS EQUAL TO THE MINIMUM DETERMINED SPAN BETWEEN "L+" AND "L-".

(3) PROCEDURE TO DETERMINE MAXIMUM SPAN FOR COMBINATIONS IN BETWEEN WALL MOUNTINGS W/ FLOOR/CEILING MOUNTINGS:
FOR A GIVEN POSITIVE DESIGN LOAD:
DETERMINE:
L1+ = MAX. SPAN FOR WALL MOUNTING INSTALLATIONS.
L2+ = MAX. SPAN FOR FLOOR/CEILING MOUNTING INSTALLATIONS.
FOR A GIVEN NEGATIVE DESIGN LOAD:
DETERMINE:
L1- = MAX. SPAN FOR WALL MOUNTING INSTALLATIONS.
L2- = MAX. SPAN FOR FLOOR/CEILING MOUNTING INSTALLATIONS.
FINAL MAXIMUM ALLOWABLE SPAN IS EQUAL TO THE MINIMUM BETWEEN "L1+", "L2+", "L1-" AND "L2-".

(4) GO TO ANCHOR SCHEDULE WITH FINAL MAXIMUM ALLOWABLE SPAN AND NEGATIVE DESIGN LOAD TO DETERMINE MAXIMUM ANCHOR SPACING.



TILTECO INC.
TILIT TESTING & ENGINEERING COMPANY
4355 N.W. 38th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33166
Phone: (305)871-1830, Fax: (305)871-1831
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E#-0008719
WALTER A. TILL JR. P. E.
FLORIDA LIC. # 44167

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4288 Westroads Drive
West Palm Beach, FL 33407

F.B.C. (Non High Velocity Hurricane Zone)

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Accordion Shutter System

REV. NO.	DESCRIPTION	DATE	Drawn by: J.A.S.
1	OLD 05-05	7/12/05	DATE: 7/13/05
2			
3			
4			
5			
6			

DRAWING No
05-196

SHEET
9 OF 14

ANCHOR SPACING LEGEND

TAPCON
ALL POINTS SOLID-SET
WEDGE-BOLT

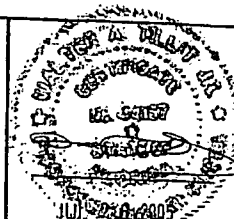
MAXIMUM DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR* SPACING (in.) SCHEDULE FOR A GIVEN MAX. SHUTTER SPAN, DESIGN NEGATIVE LOAD AND A CORRESPONDING MOUNTING TYPE FOR CONCRETE OR CONCRETE BLOCK INSTALLATIONS
(SEE MOUNTINGS 1, 2, 3 & 4 ON SHEET 5)

* SEE ANCHOR SPECIFICATIONS ON SHEET 11

MAXIMUM SHUTTER SPAN (ft)	POURED CONCRETE																												POURED CONCRETE/CONCRETE BLOCK																																											
	WALL MOUNTING 1 W/ HV 1" (Max.)B/O HEADER/ SILL #1														WALL MOUNTING 2														WALL MOUNTING 3 W/ HV 1" (Max.)B/O HEADER/ SILL #1							WALL MOUNTING 4																																				
	NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)																																											
	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205																																
3'-0" OR LESS	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6								
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13'-0"	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6								
14'-0"	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6								
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F.B.C. (Non High Velocity Hurricane Zone)

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P.E. SEAL/SIGNATURE/DATE



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 WALTER A. TILLIT JR. P. E.
 FLORIDA Lic. # 44167

A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

BERTHA HV™
 Accordion Shutter System

REV. No	DESCRIPTION	DATE	Drawn by: J.A.S.
1	OLD 05-196	7/13/05	DATE: 7/13/05
2			
3			
4			
5			
6			

DRAWING No
05-196
 SHEET
10 OF 14

ANCHORS SPACING LEGEND

TAPCON
ALL POINTS SOLID-SET
WEDGE-BOLT

MAXIMUM DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING (in.) SCHEDULE FOR A GIVEN MAX. SHUTTER SPAN, DESIGN NEGATIVE LOAD AND A CORRESPONDING MOUNTING TYPE FOR CONCRETE INSTALLATIONS
(SEE MOUNTINGS 5, 6, 7, & 8 ON SHEET 6).

MAXIMUM SPAN (ft)	POURED CONCRETE																																							
	CEILING MOUNTING 5										FLOOR MOUNTING 6										FLOOR MOUNTING 7										FLOOR MOUNTING 8									
	NEGATIVE DESIGN LOAD (psf)										NEGATIVE DESIGN LOAD (psf)										NEGATIVE DESIGN LOAD (psf)										NEGATIVE DESIGN LOAD (psf)									
	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205								
3'-0" OR LESS	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6								
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5'-0"	14	12	10	9	8	8	6	5	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	5								
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7'-0"	14	12	10	9	8	8	6	5	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								
8'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								
9'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								
10'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								
11'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								
12'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								
13'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								
14'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								
15'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								
16'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	3								

***NOTES ON ANCHOR REQUIREMENTS: POURED CONCRETE OR CONCRETE BLOCK SUBSTRATES**

- ANCHORS TO WALL SHALL BE AS FOLLOWS:
 - (A) TO EXISTING POURED CONCRETE: (Min. f'c = 3 ksi)
 - 1/4" TAPCON ANCHORS, AS MANUFACTURED BY L.T.W. RAMSET/ RED HEAD.
 - 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.
 - 1/4" WEDGE-BOLT ANCHORS AS MANUFACTURED BY POWERS FASTENING, INC.

NOTES:
A.1) MINIMUM EMBEDMENT INTO POURED CONCRETE OF TAPCON ANCHORS IS 1 3/4", AND 2" FOR WEDGE-BOLT ANCHORS.

A.2) MINIMUM EMBEDMENT OF 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS SHALL BE 7/8" INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #20 S.S. MACHINE SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.

A.3) IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, PAVERS OR ANY VENEER BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SAID WALL FINISHES. ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1) & A.2) ABOVE. FOR INSTALLATIONS ON VINYL SIDING OR EPS CONSULT THIS ENGINEER.

(B) TO EXISTING CONCRETE BLOCK WALL:
- 1/4" TAPCON ANCHORS, AS MANUFACTURED BY L.T.W. RAMSET/ RED HEAD.
- 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.
- 1/4" WEDGE-BOLT W/ 1/4" BLOCK-PLUG ANCHORS AS MANUFACTURED BY POWERS FASTENING, INC.

NOTES:
B.1) MINIMUM EMBEDMENT INTO CONCRETE BLOCK OF TAPCON & WEDGE-BOLT ANCHORS, IS 1 1/4".

B.2) MINIMUM EMBEDMENT OF 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE CONCRETE BLOCK. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #20 S.S. MACHINE SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.

B.3) IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, PAVERS OR ANY VENEER BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SAID WALL FINISHES. ANCHORAGE SHALL BE AS INDICATED ON NOTES B.1) & B.2) ABOVE. FOR INSTALLATIONS ON VINYL SIDING OR EPS CONSULT THIS ENGINEER.

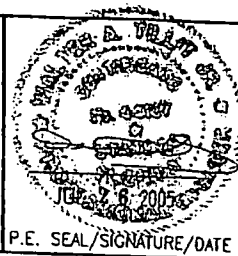
(C) ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.

(D) SEE SCHEDULE BELOW FOR EDGE DISTANCE (E.O.) VERSUS SPACING RELATIONSHIP FOR ANCHORS.

EDGE DISTANCE VERSUS SPACING FOR ANCHORS

MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE FOR 1/4" TAPCON AND SOLID SET AND WEDGE-BOLT FOR E. O. LESS THAN THE ABOVE MENTIONED. REDUCE ANCHOR SPACING BY MULTIPLYING SPACING SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (NOTE: MIN. E. O. FOR ALL POINT SOLID SET ANCHORS IS 3"). REDUCED SPACING OBTAINED USING FACTOR SHALL NOT BE LESS THAN MINIMUM SPACING INDICATED FOR EACH ANCHOR TYPE.

ACTUAL E. O.	FACTOR		
	WEDGE-BOLT	1/4" TAPCON	SOLID SET
3"	0.83	0.63	0.78
2 1/2"	0.66	0.66	-
2"	0.50	0.50	-



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FLORIDA Lic. # 44187

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BERTHA HV™
Accordion Shutter System

REV. NO.	DESCRIPTION	DATE	Drawn by: J.A.S.
1	02-03-03A	7/13/05	DATE: 7/13/05
2			
3			
4			
5			
6			

DRAWING NO. **05-196**
SHEET 11 OF 14

**MAXIMUM DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR⁺ SPACING (in.) SCHEDULE FOR
A GIVEN MAX. SHUTTER SPAN, NEGATIVE DESIGN LOAD AND A CORRESPONDING MOUNTING TYPE.**
(SEE MOUNTINGS ON SHEETS 13 & 14).


SUBSTRATE

MAXIMUM SPAN (ft)	SOUTHERN PINE No. 2 W/ MIN. G=0.55, DOUGLAS FIR W/ MIN. G=0.50										SPRUCE PINE FIR NORTH W/ MIN. G=0.43										SPRUCE PINE FIR SOUTH W/ MIN. G=0.36										1/2" MIN. CDX PLYWOOD											
	WALL MOUNTINGS 1W, 2W, 3W & 6W					CEILING MOUNT 8W FLOOR MOUNTINGS 9W & 10W					WALL MOUNTINGS 1W, 2W, 3W & 6W					CEILING MOUNT 8W FLOOR MOUNTINGS 9W & 10W					WALL MOUNTINGS 1W, 2W, 3W & 6W					CEILING MOUNT 8W FLOOR MOUNTINGS 9W & 10W					WALL MOUNTINGS 4W & 5W											
	NEGATIVE DESIGN LOAD (psf)					NEGATIVE DESIGN LOAD (psf)					NEGATIVE DESIGN LOAD (psf)					NEGATIVE DESIGN LOAD (psf)					NEGATIVE DESIGN LOAD (psf)					NEGATIVE DESIGN LOAD (psf)																
	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105						
3'-0" OR LESS	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	6	6	6	6	6	6
4'-0"	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	6	5	4	4	4	3
5'-0"	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	6	5	4	4	4	3
6'-0"	12	10	10	9	8	6.5	6	6	6	6	6	5.5	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	6	5	4	4	4	3
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10'-0"	12	10	7.5	4	-	-	6	6	5	4	3	-	12	10	9	4	-	-	6	6	4.5	4	3	3	12	10	10	4	-	-	6	6	5	4.5	3.5	3	6	5	4	4	-	-
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14'-0"	12	10	-	-	-	-	6	6	-	-	-	-	12	10	-	-	-	-	6	4.5	-	-	-	-	12	7.5	-	-	-	-	6	5	3.5	-	-	-	6	5	-	-	-	-
15'-0"	12	-	-	-	-	-	6	5.5	-	-	-	-	12	7	-	-	-	-	5.5	4.5	-	-	-	-	12	7	-	-	-	-	6	4.5	-	-	-	-	6	4.5	-	-	-	-
16'-0"	12	-	-	-	-	-	6	-	-	-	-	-	12	-	-	-	-	-	5	-	-	-	-	-	12	-	-	-	-	-	5.5	4.5	-	-	-	-	6	3	-	-	-	-

+ NOTES ON ANCHORS REQUIREMENTS, WOOD SUBSTRATES.

- ANCHORS TO WALL, FLOOR OR SOLID WOOD SOFFIT SHALL BE AS FOLLOWS:
- 1/4" TAPCON ANCHORS, AS MANUFACTURED BY I.T.W. BUILDX W/ MINIMUM EMBEDMENT AS INDICATED AT EACH SECTION ON SHEETS 13 & 14.
EXCEPTION: SEE NOTE 2 BELOW.
- ANCHORS TO HOLLOW CEILING SHALL BE AS PER MOUNTING TYPE 7W, SHEET 14 AND SHALL CONSIST OF LAB SCREWS AS PER MDS 1997 SPECIFICATIONS.
- SUBSTRATE SHALL CONSIST OF THE FOLLOWING:
- SOUTHERN PINE No. 2 W/ G=0.55 (N.D.S.)
- DOUGLAS FIR W/ G=0.50 (N.D.S.)
- SPRUCE PINE FIR NORTH W/ G=0.43 (N.D.S.)
- SPRUCE PINE FIR SOUTH W/ G=0.36 (N.D.S.)
- MIN. 1/2" CDX PLYWOOD (1985 APA)
- ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.


 P.E. SEAL/SIGNATURE/DATE


TILTECO INC.
 TILIT TESTING & ENGINEERING COMPANY
 3155 N.W. 26th St., Ste. 302, VERNAL CARRIAGE, FLORIDA 33189
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 WALTER A. TILLIT, JR., P. E.
 FLORIDA Lic. # 44167


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 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

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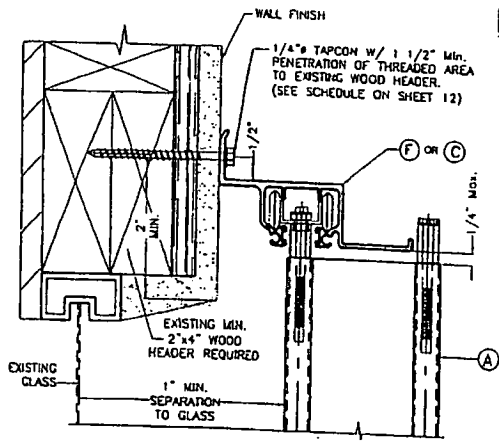
BERTHA HV™
Accordian Shutter System

REV. No	DESCRIPTION	DATE	Drawn by: J.A.S.
1	OLD 05-196	7/13/03	DATE: 7/13/03
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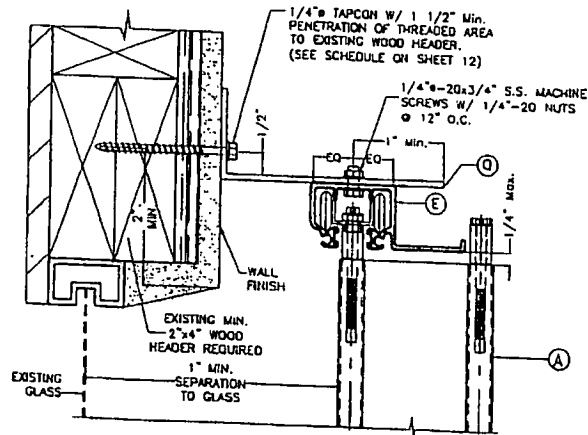
DRAWING No
05-196
 SHEET
12 OF 14

INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS

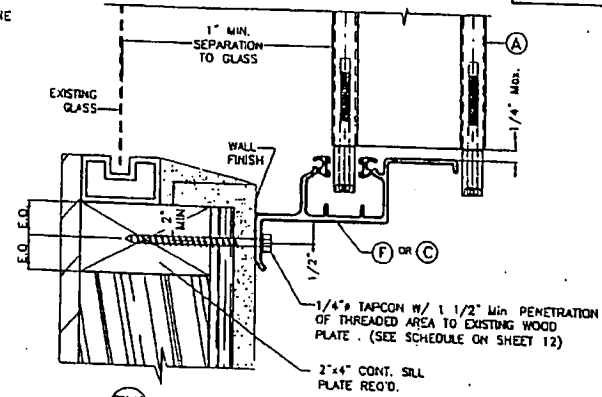
NOTE:
1-SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
2-MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



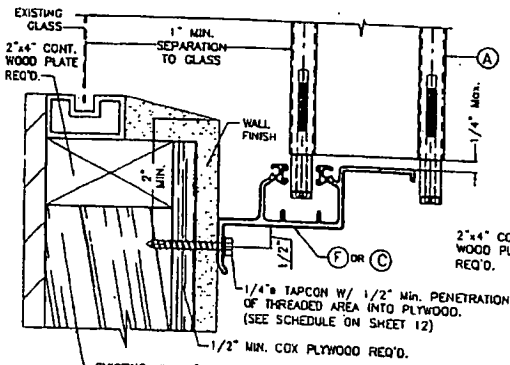
1W WALL CONNECTION AT TOP



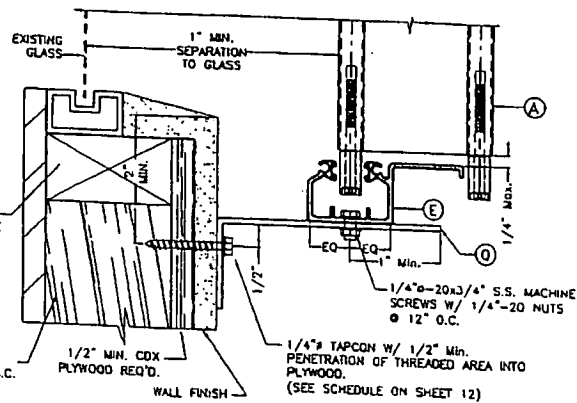
2W WALL CONNECTION AT TOP



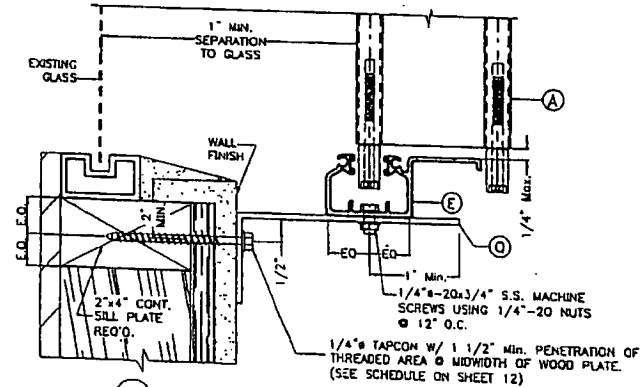
3W WALL CONNECTION AT BOTTOM



4W WALL CONNECTION AT BOTTOM



5W WALL CONNECTION AT BOTTOM



6W WALL CONNECTION AT BOTTOM

WALTER A. TILIT JR. P. E.
FLORIDA U.L. # 44187
P.E. SEAL/SIGNATURE/DATE

TILTECO INC.

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4268 Westroads Drive
West Palm Beach, FL 33407

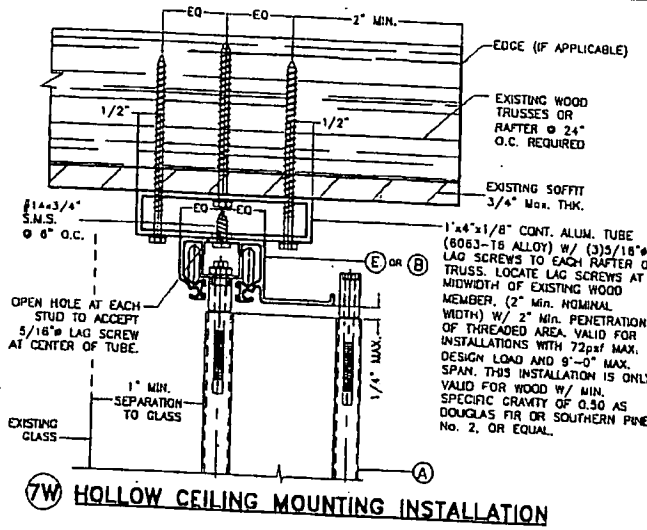
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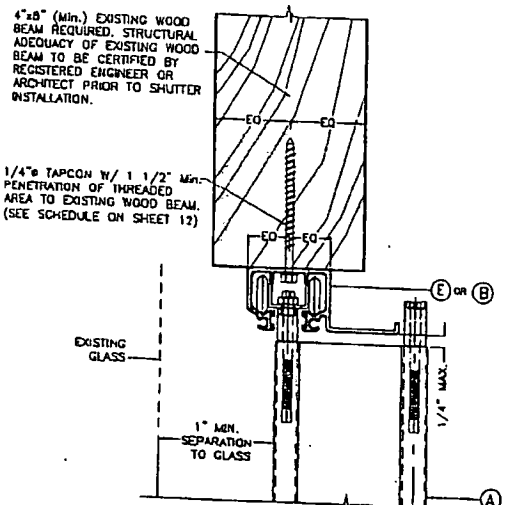
BERTHA HV™
Accordion Shutter System

REV. No	DESCRIPTION	DATE	Drawn by/Blm.1
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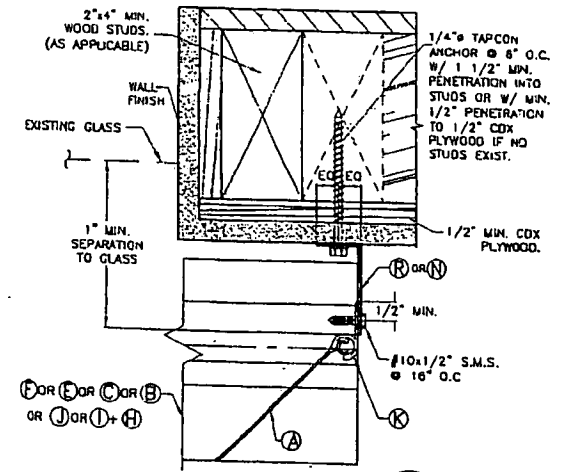
DRAWING No
05-196
SHEET
13 OF 14



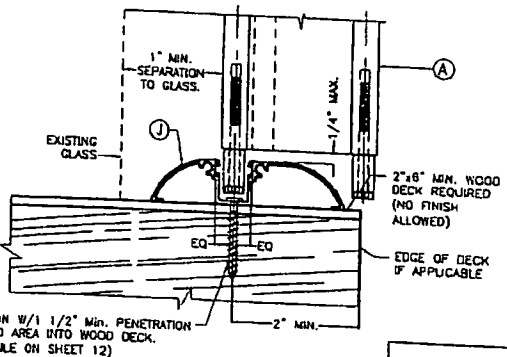
7W HOLLOW CEILING MOUNTING INSTALLATION



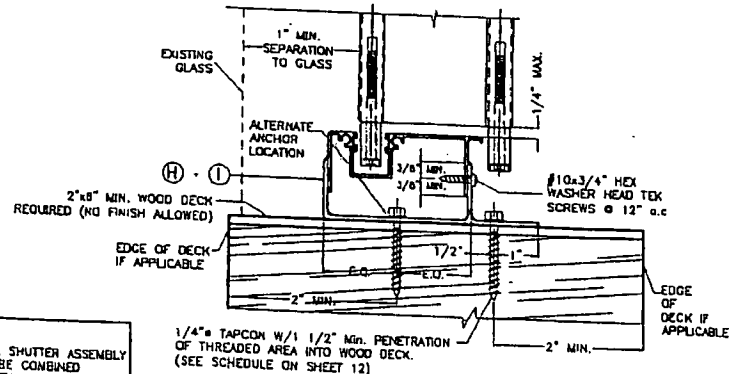
8W SOFFIT MOUNTING INSTALLATION



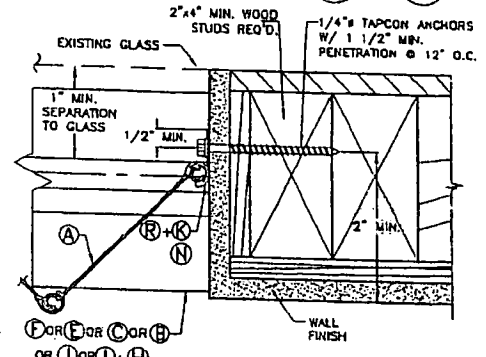
END CONNECTION DETAIL (1W & 4W)



9W FLOOR CONNECTION



10W FLOOR CONNECTION



END CONNECTION DETAIL (5W)

NOTES:
 1-SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
 2-MOUNTING SECTIONS CAN BE COMBINED
 IN ANY WAY TO SUIT ANY INSTALLATION.

(Signature)
 P.E. SEAL/SIGNATURE/DATE

TILECO INC.
 TILLIT TESTING & ENGINEERING COMPANY
 4335 N.W. 38th St., Ste. 303, WINGRA GARDENS, FLORIDA 33168
 Phone: (305)871-1330 Fax: (305)871-1531
 e-mail: tileco@aol.com
 EB-0008719
 WALTER A. TILLIT JR., P. E.
 FLORIDA Lic. # 44167

A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

F.B.C. (Non High Velocity Hurricane Zone)
 © 2003 EASTERN METAL SUPPLY, INC.

BERTHA HV™			
Accordion Shutter System			
REV. NO.	DESCRIPTION	DATE	Drawn by: J.A.S.
1	OLD CD-034	7/14/03	DATE: 7/13/03
2			
3			
4			
5			
6			

DRAWING No
05-196
 SHEET
14 OF 14



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 134 S. RIVER

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.

SHUTTERS

NO PERMIT POSTED

\$40 REINSPECT FEE

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

DATE: 7/16

A handwritten signature of the inspector, appearing to be "M", written over a horizontal line.

INSPECTOR

DO NOT REMOVE THIS TAG

118 N SPR
 DECKS / PORCH
 HOUSE -

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7-16, 2007

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8668	Beattie	Final	PASS	CLOSE
3	4 Admirals Walk			INSPECTOR: <i>AM</i>
	Gulfstream Alum			
5619	Schramm	Final	PASS	CLOSE
2	109 S Sewall Pt			INSPECTOR: <i>AM</i>
	Gulfstream Alum			
8632	Quinn	Final	FAIL	NO PERM
1	1345 River Rd			INSPECTOR: <i>AM</i>
	Gulfstream Alum			
8486	Van Vorno	Made correction on equip. PAD	PASS	
4	15 S Ridgeway			INSPECTOR: <i>AM</i>
	Pool People			
8472	Kremser	Final left stucco	PASS	CLOSE
5	23 Ridgeland Dr	same for permit		INSPECTOR: <i>AM</i>
	lots plastering			
7344	Cabrera	Fill	PASS	CLOSE
8170	3 Melody Ln	Fence	PASS	CLOSE
8171	O/B	Shed	PASS	INSPECTOR: <i>AM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7-18, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8441	Dressler 12 Island Rd Harbor Course	Temp power pole	PASS	contacted FPL INSPECTOR: <i>[Signature]</i>
3566	Hepworth 8 Rio Vista Keith Mahaffey	Final checked on comment re: sand field shallow end	PASS	CLOSE INSPECTOR: <i>[Signature]</i>
7308	Rothberg (Ayeris) 103 N Sewalls Custom Decks	Final failed for electric IS ELECTRIC FIXED? NO!	FAIL	INSPECTOR: <i>[Signature]</i>
8632	Gibson 134 S River Rd Gulfstream Alum	Final fee PAID	PASS	CLOSE INSPECTOR: <i>[Signature]</i>
7495	DE SANTIS 73. S. RIVER	BOAT LIFT ELEC.	PASS	CLOSE INSPECTOR: <i>[Signature]</i>
CE	LOT E. OF 21 LANTANA	MONITORING		INSPECTOR:
6829	Kearney 12 N River JA Taylor	Final - closure steps	FAIL	INSPECTOR: <i>[Signature]</i>
OTHER	- 772 - 460 - 4040 KAREN VIA DEL CRISTO			

15 ~~112 66 17~~ ~~DEAD PILES~~

9088

FENCE



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:	9088	DATE ISSUED:	JANUARY 21, 2009
SCOPE OF WORK:	FENCE		
CONDITIONS :	COORDINATE HOMEOWNER BEING OPEN TO CLOSE OUT OLD PERMIT		
CONTRACTOR:	A GREAT FENCE		
PARCEL CONTROL NUMBER:	133841010-000-000700	SUBDIVISION	KINGSTON CT - LOT 7
CONSTRUCTION ADDRESS:	134 S RIVER RD		
OWNER NAME:	GIBSON		
QUALIFIER:	DARRICK BAILEY	CONTACT PHONE NUMBER:	812-0223

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.

RECEIVED
DATE: 1-13-09
TOWN OF SEWALL'S POINT

Date: 1-13-09 BUILDING PERMIT APPLICATION Down of Sewall's Point Permit Number: _____

OWNER/TITLEHOLDER NAME: Julie Gibson Phone (Day) 772-286-5258 (Fax) _____

Job Site Address: 134 S. River Road City: Stuart State: FL Zip: 34916

Legal Description _____ Parcel Control Number: _____

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

Scope of work (please be specific): 76' of 4' 2rail Bronzecaluminum w/ 50' of wood fence

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: \$ 2480.00
(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

CONTRACTOR/Company: A Great Fence, LLC Phone: 772-812-0223 Fax: 772-408-0272

Street: 361 sw Undallo Road City: PSL State: FL Zip: 34953

State License Number: N/A OR: Municipality: Martin County License Number: CFE 5176

LOCAL CONTACT: Darrick Bailey Phone Number: 772-812-0223

DESIGN PROFESSIONAL: N/A 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): 2004 W/ 2006 REV. National Electrical Code: 2005 Florida Energy Code: 2004/6 Florida Accessibility Code: 2004/6 Florida Fire Prevention Code 2004/6

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

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

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

OWNER SIGNATURE: (required)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
x Julie Gibson
State of Florida, County of: St. Lucie
This the 13th day of January, 2009
by Julie Gibson who is personally

CONTRACTOR SIGNATURE: (required)
On State of Florida, County of: St. Lucie
This the 13th day of January, 2009
by Julie Gibson Darrick Bailey who is personally

as identification
NOTARY PUBLIC STATE OF FLORIDA
Deborah V. Raffel Notary Public
My Commission # DD538876
Expires: APR. 10, 2010

As identification
NOTARY PUBLIC STATE OF FLORIDA
Deborah V. Raffel Notary Public
My Commission # DD538876
Expires: APR. 10, 2010

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



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	9088		
ADDRESS	134 S RIVER RD		
DATE:	1/21/09	SCOPE:	FENCE

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



Martin County, Florida

Laurel Kelly, C.F.A

Site Provided by...
governmentmax.com T1.14

Summary

print Address 1 of 2

Parcel Info

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
13-38-41-010-000-00070-0	134 S RIVER RD	27857	Address	0	1

Summary

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

Summary

Property Location 134 S RIVER RD
Tax District 2200 Sewall's Point
Account # 27857
Land Use 101 0100 Single Family
Neighborhood 120400
Acres 0.459

Legal Description
Property Information
 KINGSTON COURT LOT 7

Search By

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

Owner Information
Owner Information
 GIBSON, STEPHEN P
 GIBSON, JULIE L

Mail Information
 134 S RIVER RD
 STUART FL 34996-6328

Assessment Info
Front Ft. 0.00

Market Land Value \$242,250
Market Impr Value \$338,390
Market Total Value \$580,640

Site Functions

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

Recent Sale
Sale Amount \$425,000

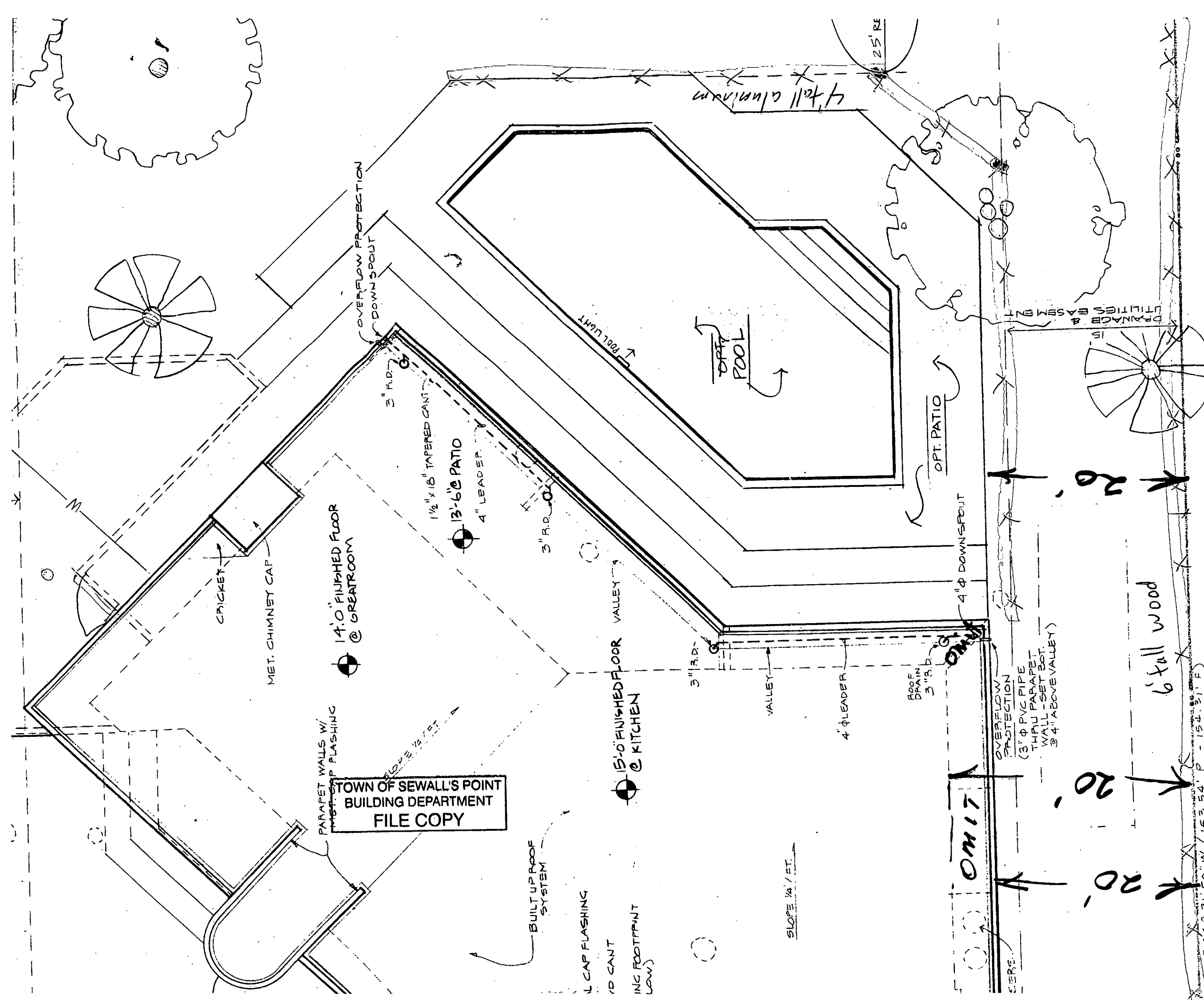
Sale Date 6/24/1993
Book/Page 1018 1615

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

Legal disclaimer / Privacy Statement

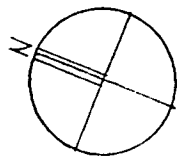
Data updated on 12/22/2008





TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

SURVEY INFORMATION FROM SURVEY DATED 2-9-84,
BY MARC L. CAIGU, PROFESSIONAL LAND SURVEYOR,
STATE OF FLORIDA, NO. 3194
LOT DESCRIPTION: LOT 7 OF "KINGSTON COURT" ACCORDING
TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 8
AT PAGE 82 OF THE PUBLIC RECORDS OF MARTIN CO., FL.



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 2-27 2009 Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
8589	Hardin	Final	FAIL	
6	27 Silverld Skaticon	SFR 11:00 A.M.		INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9095	Orlandi	Final	PASS	CLOSE
4	8 Sabal Ct Gonzalez	Roof		INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9112	Ronan	Final	PASS	CLOSE
5	14 Copaine Rd Fla Solar East	(solar panels)		INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9045	Morris	Final	PASS	Attorney
3	120 Hillcrest Dr Wilson Bldgs	(bathroom)	CLOSE	3/2/09 8:30 INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9098	Wolcott	Final	PASS	CLOSE
1	7 Island Rd Wilson Bldgs	(patio)		INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9088	Gibson	Final	PASS	CLOSE
2	1345 River A Great Fence			INSPECTOR <i>JM</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9068	Taylor	in-progress		
	22 E High Pt Seagate		PASS	INSPECTOR <i>JM</i>

9288

WINDOWS, DOOR

&

STUCCO



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:	9288	DATE ISSUED:	10/06/2009 <i>11/16/09</i>
SCOPE OF WORK:	WINDOW, DOOR AND STUCCO		
CONDITIONS :			
CONTRACTOR:	PRESTON BALL HOME SERVICES		
PARCEL CONTROL NUMBER:	1338410100 <i>000-00070-0</i>	SUBDIVISION	KINGSTON Ct <i>Lot 7</i>
CONSTRUCTION ADDRESS:	134 S. RIVER RD		
OWNER NAME:	GIBSON		
QUALIFIER:	PRESTON BALL	CONTACT PHONE NUMBER:	528-4714

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:	9288		
ADDRESS	134 S RIVER RD		
DATE:	11/06/2009	SCOPE:	WINDO, DOOR AND STUCCO

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			

6779
63-515/670 01

H. PRESTON BALL 11-94
DBA PRESTON BALL HOME SERVICES
 440 S.W. BUXTON AVE. 772-879-1548
 PORT ST. LUCIE, FL 34983

DATE 11/6/09

PAY TO THE ORDER OF Town of Sewall's Point \$ 230
Two Hundred Thirty 4/00/100 DOLLARS

Seacoast NATIONAL BANK
 STUART, FLORIDA 34994

FOR PERRY GIBSON

Total sq
 Total Co
 Building
 Building
 Total num
 Radon Fee
 DBPR Lic
 Road impa
 Martin Cou

		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	10,000
Total number of inspections @ \$75.00 each	3	\$	225.00
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	230.00

RECEIVED
11-3-09

Town of Sewall's Point

9288

Date: _____ BUILDING PERMIT APPLICATION Permit Number: _____
OWNER/TITLEHOLDER NAME: STEPHEN P. GIBSON Phone (Day) 286-5258 (Fax) _____
Job Site Address: 134 SOUTH RIVER ROAD City: SPARTAN State: FL Zip: 34996
Legal Description KINGSTON COURT LOT 7 Parcel Control Number: 13-38-41-010-000-00070-0
Owner Address (if different): _____ City: _____ State: _____ Zip: _____

Scope of work (please be specific): DOOR REPLACEMENT / STUCCO PARTIAL EXTERIOR
WILL OWNER BE THE CONTRACTOR?
(If yes, Owner Builder questionnaire must accompany application)
YES _____ NO
Has a Zoning Variance ever been granted on this property?
YES _____ (YEAR) _____ NO
(Must include a copy of all variance approvals with application)
COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 10,000
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 ___ AE9 ___ AE8 ___ X ___
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: PRESTON BALL HOME SERVICES Phone: 528-4714 Fax: 336-3590
Street: 440 SW BUXTON AVE City: PT ST LUCIE State: FL Zip: 34983
State License Number: _____ OR: Municipality: MARTIN COUNTY License Number: CAR 4987
LOCAL CONTACT: PRESTON BALL Phone Number: 528-4714
DESIGN PROFESSIONAL: N/A Lic# _____ Phone Number: _____
Street: _____ City: _____ State: _____ Zip: _____
AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/ Porches: _____ Enclosed Storage: _____
Carport: _____ Total under Roof _____ Elevated Deck: _____ Enclosed area below BFE*: _____
* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

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

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OWNER SIGNATURE: (required)
OR OWNER'S LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Stephen P. Gibson
State of Florida, County of: MARTIN
This the 27th day of October, 2009
by STEPHEN P. GIBSON who is personally
known to me or produced
as identification. Kathy Spencer
Notary Public
My Commission Expires: _____

CONTRACTOR SIGNATURE: (required)
H. Preston Ball
On State of Florida, County of: MARTIN
This the 27th day of October, 2009
by H. PRESTON BALL who is personally
known to me or produced
As identification. Kathy Spencer
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!

NOTARY PUBLIC STATE OF FLORIDA
Kathy Spencer
Commission # DD730742
Expires: DEC. 20, 2011
BONDED THRU ATLANTIC BONDING CO., INC.

NOTARY PUBLIC STATE OF FLORIDA
Kathy Spencer
Commission # DD730742
Expires: DEC. 20, 2011
BONDED THRU ATLANTIC BONDING CO., INC.



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

Site Provided by...
governmax.com T1.12

Summary

[print](#) [list](#) [table](#) [help](#) [home](#) Owner 33 of 35

Parcel Info

Summary

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

Parcel ID	Unit Address
13-38-41-010-000-00070-0	134 S RIVER RD

Serial Index ID	Order	Commercial	Residential
27857	Owner	0	1

Summary

Property Location 134 S RIVER RD
Tax District 2200 Sewall's Point
Account # 27857
Land Use 101 0100 Single Family
Neighborhood 120400
Acres 0.459

Legal Description
Property Information
 KINGSTON COURT LOT 7

Search By

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

Owner Information
Owner Information
 GIBSON, STEPHEN P
 GIBSON, JULIE L

Mail Information
 134 S RIVER RD
 STUART FL 34996-6328

Assessment Info
Front Ft. 0.00

Market Land Value \$229,500
Market Impr Value \$299,900
Market Total Value \$529,400

Site Functions

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

Recent Sale
Sale Amount \$425,000

Sale Date 6/24/1993
Book/Page 1018 1615

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

Legal disclaimer / Privacy Statement

Data updated on 10/29/2009





STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

AC# 3889167

CBC1252876 08/03/08 088020795

CERTIFIED BUILDING CONTRACTOR
ROSEMANN, FREDERICK
F D R CUSTOM HOMES INC

IS CERTIFIED under the provisions of Ch. 489 FS
Expiration date: AUG 31, 2010 L08080300136

Frederick Rosemann

SIGNATURE

9288

NOTICE OF COMMENCEMENT

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

PERMIT #: SP-110509 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):
LOT 7 KINGSTON COURT

GENERAL DESCRIPTION OF IMPROVEMENT: DOORS, STUCCO & W/STAIN

OWNER NAME: STEPHEN P. GIBSON STATE OF FLORIDA
ADDRESS: 134 S RIVER RD MARTIN COUNTY

PHONE NUMBER: 772-286-5258 FAX NUMBER: _____

INTEREST IN PROPERTY: OWNER

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

CONTRACTOR: PRESTON BAIL HOME SERVICES

ADDRESS: 440 SW BIXTON AVE

PHONE NUMBER: 529-4214 FAX NUMBER: 326-3590

SURETY COMPANY (IF ANY): N/A

ADDRESS: _____

PHONE NUMBER: _____ FAX NUMBER: _____

BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY: N/A

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: N/A

ADDRESS: _____

PHONE NUMBER: _____ FAX NUMBER: _____

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES N/A OF _____

FLORIDA STATUES: _____ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B).

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.

Stephen P. Gibson
SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

SIGNATORY'S TITLE/OFFICE: OWNER

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 27 DAY OF Dec, 2009

BY: Kathy Spencer AS Notary FOR Stephen Gibson

NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF

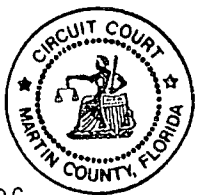
PERSONALLY KNOWN OR PRODUCED IDENTIFICATION _____

TYPE OF IDENTIFICATION PRODUCED _____

NOTARY SIGNATURE/SEAL

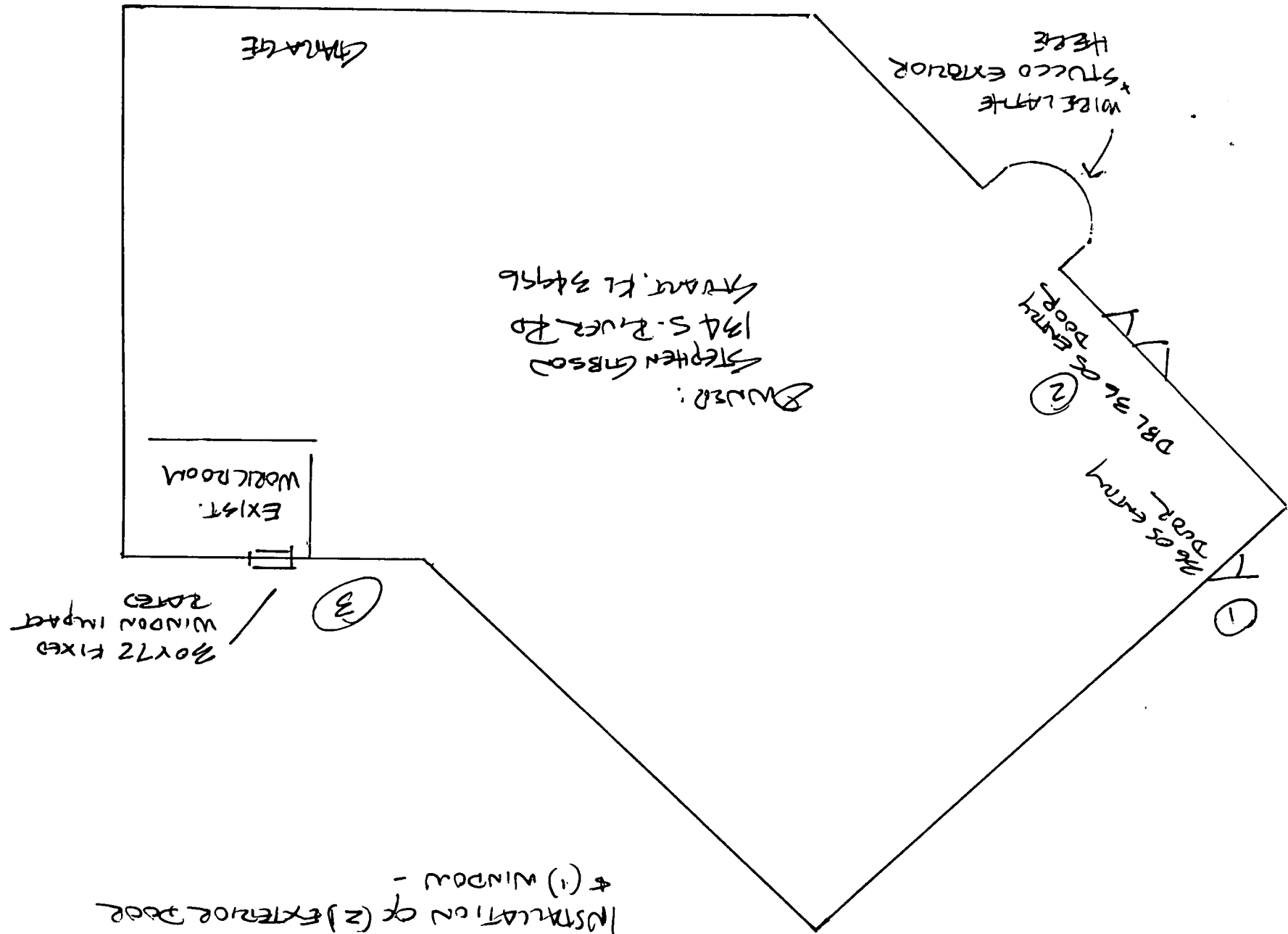
UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS IN IT ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF (SECTION 92.525, FLORIDA STATUTES).

Stephen P. Gibson
(Signature of Natural Person Signing Above)



NOTARY PUBLIC-STATE OF FLORIDA
Kathy Spencer
Commission # DD730742
Expires: DEC. 20, 2011
BONDED THRU ATLANTIC BONDING CO., INC.

INSTR # 2177592 OR BK 02421 PG 1469 RECD 11/10/2009 02:57:59 PM
Pg 1469; (1pg)
MARSHA EWING CLERK



INSTALLATION OF (2) EXTERIOR DOOR & (1) WINDOW -

FRAME ELEVATION FOR WINDOW

Residence of:
 STEVE GIBSON
 174 S. River Road
 SUANT, VA 24996

EXIST. TOP PLATE

EXISTING 2X6 STUD

DOUBLE 2X12 HEADER

(2) SIMPSON ANCHORS TYPICAL

2X6 JACK STUDS

72"

FRAME 30X72 ROUGH
 CRANKING FOR PARTS SERIES
 701 FIXED IMPACT GLASS
 WINDOW / NOA 07-0418, 06

DOUBLE 2X6 SILL

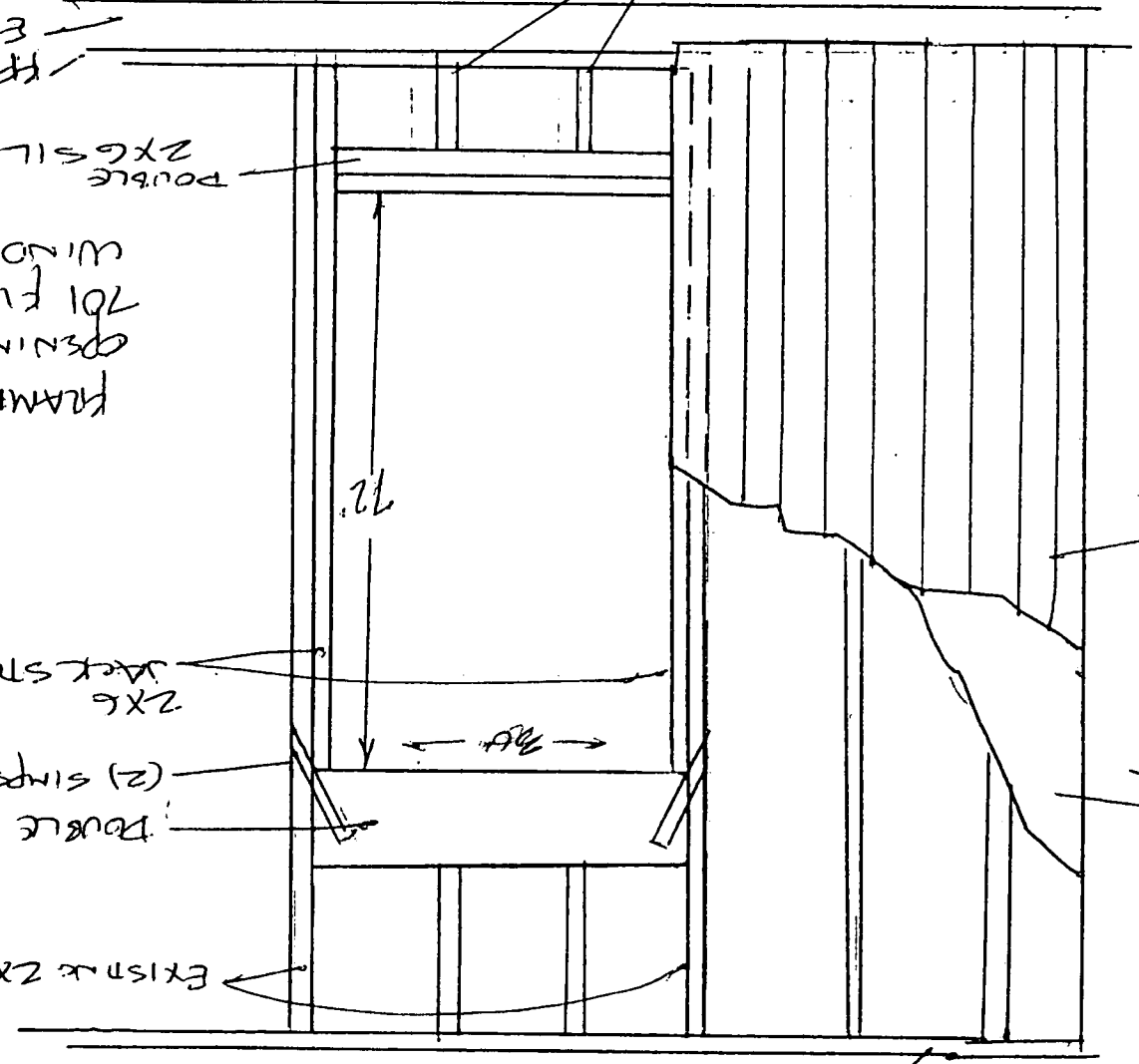
EXISTING SCAB
 FF

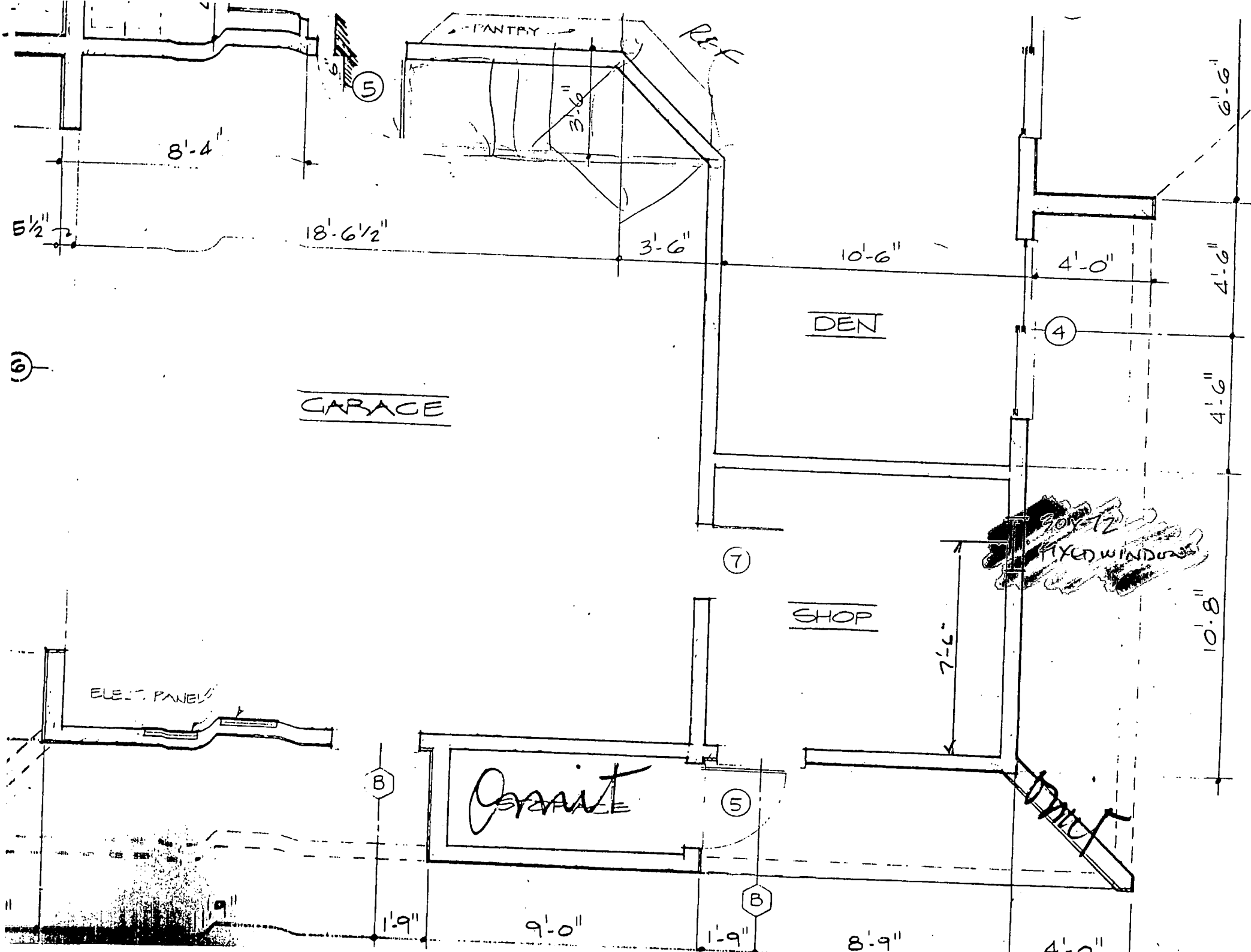
2X6
 SCAB STUDS

Job Room
 CBCU52876

1X6 TAG
 CEDAR FASCIA

1/2" PLYWOOD
 w/ VAPOR BARRIER







MARTIN COUNTY BUILDING DEPARTMENT
 900 SE RUHNKE STREET
 STUART, FL 34994
 (772) 288-5916
 FAX (772) 288-5911

WINDOW/DOOR SCHEDULE

ID NO	APPOX OPENING SIZE (WXH)	DESIGNATION	** TYPE	IMPACT PROTECTION			REMARKS
				IMPACT GLASS	NEW SHUTTER	* EXISTING SHUTTER	
	37" X 63"	25	SH		X		EXAMPLE
1	36x80			NO GLASS			SWGL DOOR OS
2	72x80			NO GLASS			DBL DOOR OS
3	30x72	NA	FIXED	✓			
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
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19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							

FILE COPY
 TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 11-5-09
 BUILDING OFFICIAL

**Window Replacement using existing shutters to comply with impact protection will require the existing shutters to meet the requirements of the 2007 FBC/Residential R301.2.1.2*

TOTAL GLAZED OPENING AREA FOR STRUCTRE: _____ 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 2007 FBC/ EXISTING BUILDING 606.4.

**** TYPE WINDOWS**

SH – SINGLE HUNG AWN – AWNING SL – SLIDING
 DH – DOUBLE HUNG CAS – CASEMENT FIX – FIXED
NOTICE OF COMMENCEMENT

10#3
FIXED WINDOW



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.miamidade.gov/buildingcode

NOTICE OF ACCEPTANCE (NOA)

PGT Industries
1070 Technology Drive,
Nokomis, Fl. 34275

SCOPE:

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

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

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

DESCRIPTION: Series ~~PW-7012~~ **Aluminum Fixed Window -LMI**

APPROVAL DOCUMENT: Drawing No. 4259-4, titled "Aluminum Picture Window, Impact", sheets 1 through 12 of 12, prepared by manufacturer, dated 7/14/03 and last revised revision "B" on dated 4/4/07, signed and sealed by Robert L. Clark, P.E., 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 Missile Impact Resistant

Limitation:

1. Max DLO =Width-3.75" and /or=Height-3.75". The Annealed glass to be on exterior side of laminate.
2. Max. corner distance for anchors is 8.5", except Hexagon & Octagon corner dist not to exceed 3". Max. corner distance for Nail (Integral Fin Frame) into wood substrate is 1" and max. OC spacing is 5".
3. The anchor installation shown is applicable without geographical limitation.

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 # 07-0418.06 consists of this page 1 and evidence sheet E-1 as well as approval document mentioned above.

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

NOA No 08-1112.10
Expiration Date: February 19, 2014
Approval Date: January 08, 2009
Page 1

12-11-10



PGT Industries

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

- A. **DRAWINGS** (transferred from file # 07-0418.06)
1. Manufacturer's die drawings and sections.
 2. Drawing No. 4259-4, titled "Aluminum Picture Window, Impact", sheets 1 through 12 of 12, prepared by manufacturer, dated 7/14/03 and last revised revision "B" on dated 4/4/07, signed and sealed by Robert L. Clark, P.E.
- B. **TESTS** (transferred from file # 07-0418.06)
1. Test reports on
 - 1) Air Infiltration Test, per FBC, TAS 202-94
 - 2) Water Infiltration resistant Test
 - 3) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
 - 4) Small Missile Impact Test per FBC, TAS 201-94
 - 5) Cyclic Wind Pressure Loading per FBC, TAS 203-94along with marked-up drawings and installation diagram of alum. Fixed windows of various shapes, prepared by Fenestration Testing Laboratory, Inc., Test Report No. FTL-3835, dated 07/18/03 and test report FTL-3850, dated 07/31/03, both signed and sealed by Joseph Chan, P.E.
- C. **CALCULATIONS**
1. Anchor verification, comparative and structural analysis dated 04/13/2007, prepared, signed and sealed by Robert L. Clark, P.E.
 2. Glazing complies w/ ASTM E-1300-02/04
- D. **QUALITY ASSURANCE**
1. Miami Dade /Building Code Compliance Office (BCCO).
- F. **MATERIAL CERTIFICATIONS**
1. Notice of Acceptance No. 06-0216.06 issued to Solutia Inc. for the "Saflex IIIIG Clear or colored Interlayer", expiring on 05/21/11.
 2. Notice of Acceptance No. 05-1208.02 issued to E.I. DuPont DeNemours for "DuPont Butacite ® PVB", expiring on 12/11/2010.
- E. **STATEMENTS**
1. Statement letter of code compliance, "No change from previous approval and "No financial interest", dated 11-06-08 signed and sealed by Robert L. Clark, P. E.
 2. Statement letter of Lab compliance, as a part of above referenced test reports
- F. **OTHER**
1. This NOA renews NOA # 07-0418.06 expires on February 19, 2009.

Ishaq I. Chanda

Ishaq I. Chanda, P. E.
Product Control Examiner
NOA No 08-1112.10
Expiration Date: February 19, 2014
Approval Date: January 08, 2009

NOTES: LARGE MISSILE WINDOWS

1. GLAZING OPTIONS:
 - A. 7/16" LAMINATED GLASS COMPRISED OF (1) LITE OF 3/16" ANNEALED GLASS AND (1) LITE OF 3/16" HEAT STRENGTHENED GLASS WITH AN .090 INTERLAYER OF DUPONT BUTACITE OR SAFLEX KEEPSAFE MAXIMUM PVB.
 - B. 7/16" LAMINATED GLASS COMPRISED OF (2) LITES OF 3/16" HEAT STRENGTHENED GLASS WITH AN .090 INTERLAYER OF DUPONT BUTACITE OR SAFLEX KEEPSAFE MAXIMUM PVB.
 - C. 1 1/16" LAMI I.G. GLASS COMPRISED OF (1) LITE OF 3/16" HEAT STRENGTHENED GLASS, A 7/16" AIRSPACE AND 7/16" LAMINATED GLASS WHICH IS COMPRISED OF (1) LITE OF 3/16" ANNEALED GLASS AND (1) LITE OF 3/16" HEAT STRENGTHENED GLASS WITH AN .090 INTERLAYER OF DUPONT BUTACITE OR SAFLEX KEEPSAFE MAXIMUM PVB.
 - D. 1 1/16" LAMI I.G. GLASS COMPRISED OF (1) LITE OF 3/16" HEAT STRENGTHENED GLASS, A 7/16" AIRSPACE AND 7/16" LAMINATED GLASS WHICH IS COMPRISED OF (2) LITES OF 3/16" HEAT STRENGTHENED GLASS WITH AN .090 INTERLAYER OF DUPONT BUTACITE OR SAFLEX KEEPSAFE MAXIMUM PVB.
2. DESIGN PRESSURE RATINGS: (FLANGED - SEE SHEET 5, TABLE 1 AND INTEGRAL FIN - SEE SHEET 6, TABLE 2)
 - A. NEGATIVE DESIGN LOADS BASED ON TESTED PRESSURE AND GLASS TABLES ASTM E 1300-02.
 - B. POSITIVE DESIGN LOADS BASED ON WATER TEST PRESSURE AND GLASS TABLES ASTM E 1300-02.
3. ANCHORAGE: THE 33 1/3% STRESS INCREASE HAS NOT BEEN USED IN THE DESIGN OF THIS PRODUCT. MATERIALS, INCLUDING BUT NOT LIMITED TO STEEL SCREWS, THAT COME INTO CONTACT WITH OTHER DISSIMILAR MATERIALS SHALL MEET THE REQUIREMENTS OF THE FLORIDA BUILDING CODE, CURRENT EDITION.


FOR ANCHORAGE INFORMATION SEE SHEETS 10 THROUGH 12.
4. SHUTTER REQUIREMENT: NONE REQUIRED
5. NARROW JOINT SEALANT IS USED ON ALL FOUR CORNERS OF THE FRAME.
6. REFERENCES: TEST REPORTS, FTL-3835 & FTL-3850
 ELCO TEXTRON NOA: 04-0721.01, 03-0225.05
 ANSI/AF&PA NDS-2001 FOR WOOD CONSTRUCTION
 ADM-2000 ALUMINUM DESIGN MANUAL
 & 12.15.12
7. THIS PRODUCT HAS BEEN DESIGNED & TESTED TO COMPLY WITH THE REQUIREMENTS OF THE FLORIDA BUILDING CODE, CURRENT EDITION INCLUDING THE HIGH VELOCITY HURRICANE ZONE (HVHZ).

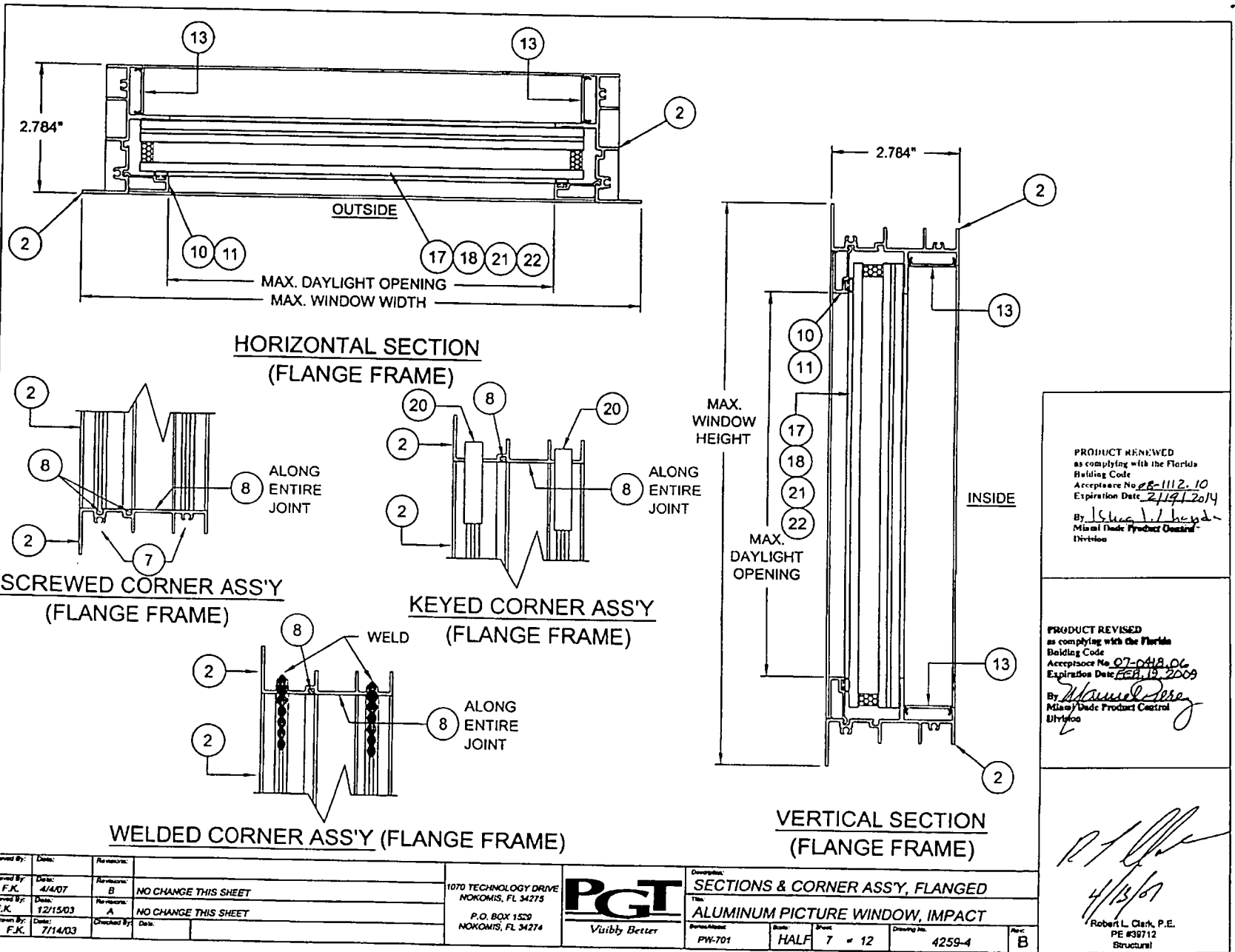
NOA DRAWING TABLE OF CONTENTS	
	SHEET
GENERAL NOTES.....	1
GLAZING DETAILS.....	2
ELEVATIONS, FLANGED.....	3
ELEVATIONS, INTEGRAL FIN.....	4
DESIGN PRESSURES FLANGED..	5
DESIGN PRESSURES FINNED.....	6
SECTIONS, FLANGED.....	7
CORNER ASSY, FLANGED.....	7
SECTIONS, INTEGRAL FIN.....	8
CORNER ASSY, INTEGRAL FIN...	8
EXTRUSION PROFILES.....	9
PARTS LIST.....	9
ANCHORAGE.....	10-12

PRODUCT RENEWED
 as complying with the Florida
 Building Code
 Acceptance No. 09-1112-10
 Expiration Date 2/19/2014
 By Stacy J. Chandler
 Miami/Dade Product Control
 Division

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 07-0418-06
 Expiration Date FEB 19, 2009
 By Manuel Jerez
 Miami/Dade Product Control
 Division

[Signature]
 4/13/07
 Robert L. Clark, P.E.
 PE #38712
 Structural

Revised By:	Date:	Revisions:	1070 TECHNOLOGY DRIVE MOKOMIS, FL 34275	 Visibly Better	Description: NOTES & TABLE OF CONTENTS The ALUMINUM PICTURE WINDOW, IMPACT			
Revised By: F.K.	Date: 4/4/07	Revisions: B	CHG. NOTE 2 TO REF. ASTM E 1300-02 AND REVISE ANCHORAGE NOTE 3. ADD REFERENCES TO NOTE 6 AND ADD NOTE 7.		Sheet/Total PW-701	Series: NTS	Sheet: 1 of 12	Drawing No. 4259-4	Panel: B
Revised By: F.K.	Date: 12/15/03	Revisions: A	REDUCE ANCHOR SPACING					
Drawn By: F.K.	Date: 7/14/03	Checked By:	Date:					



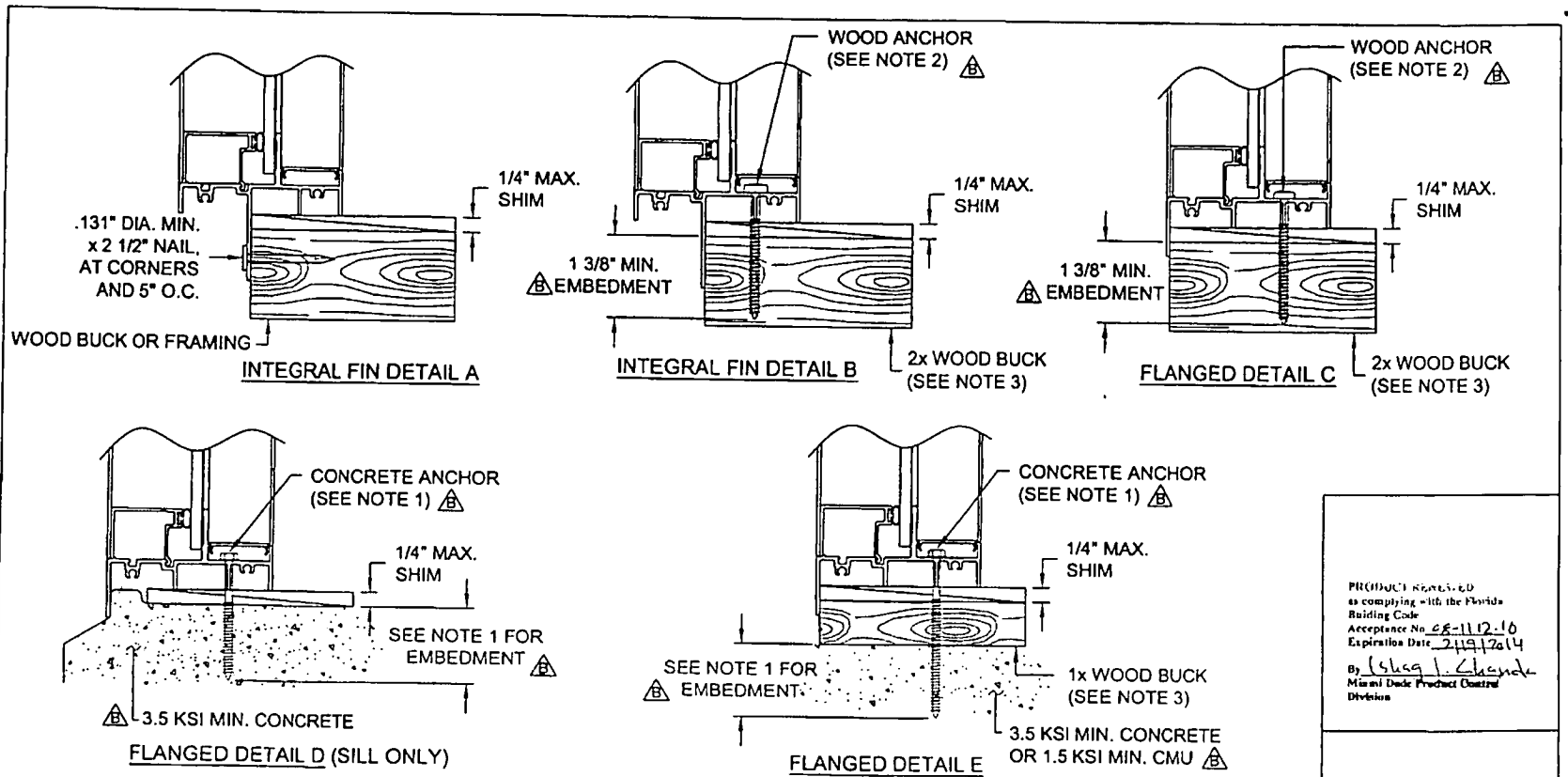
PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 08-1112.10
 Expiration Date 2/19/2014
 By J. S. ...
 Miami Trade Product Control
 Division

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 07-0418.06
 Expiration Date FEB. 19, 2009
 By ...
 Miami Trade Product Control
 Division

[Signature]
 4/15/07
 Robert L. Clark, P.E.
 PE #38712
 Structural

Approved By:	Date:	Revisions:	Date:
F.K.	4/4/07	B	NO CHANGE THIS SHEET
F.K.	12/15/03	A	NO CHANGE THIS SHEET
F.K.	7/14/03		

1070 TECHNOLOGY DRIVE NOKOMIS, FL 34275		PGT Visibly Better	Description: SECTIONS & CORNER ASS'Y, FLANGED	
P.O. BOX 1529 NOKOMIS, FL 34274			Title: ALUMINUM PICTURE WINDOW, IMPACT	
Part/Sheet	Book	Sheet	Drawing No.	Rev.
PW-701	HALF	7	4259-4	B



- NOTES:**
- FOR CONCRETE APPLICATIONS IN MIAMI-DADE COUNTY, USE ONLY MIAMI-DADE COUNTY APPROVED 1/4" ELCO TAPCONS, EMBEDDED 1 3/8" MIN., 5/16" ELCO TAPCONS EMBEDDED 1 3/4" MIN. OR 1/4" SS4 CRETE-FLEX EMBEDDED 1 3/4" MIN. DISTANCE FROM ANCHOR TO CONCRETE EDGE IS 1 3/4" MIN.
 - FOR WOOD APPLICATIONS IN MIAMI-DADE COUNTY, USE #12 OR #14 STEEL SCREWS (G5) OR 1/4" SS4 CRETE-FLEX.
 - 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 #12 SHEET METAL SCREW WITH FULL ENGAGEMENT INTO THE ALUMINUM. IF THESE CRITERIA ARE MET, THE RESPECTIVE DESIGN PRESSURES AND ANCHORAGE SPACING FOR TAPCONS MAY BE USED.

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 08-1112-10
 Expiration Date 2/19/2014
 By: *[Signature]*
 Miami Dade Product Control
 Division

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 07-0418-06
 Expiration Date FEB 19, 2009
 By: *[Signature]*
 Miami Dade Product Control
 Division

[Signature]
 4/13/17
 Robb L. Clark, P.E.
 PE #38712
 Structural

Revised By:	Date:	Revisions:		1070 TECHNOLOGY DRIVE NOKOMIS, FL 34275	PGT Visibly Better	Description: ANCHORAGE - HEAD, SILL AND JAMBS				
Revised By:	Date:	Revisions:	REVISE AND UPDATE ANCHORAGE PER CURRENT FBC	P.O. BOX 1520 NOKOMIS, FL 34274		Title: ALUMINUM PICTURE WINDOW, IMPACT				
Revised By:	Date:	Revisions:	CHANGE NOTE 1 AND FASTENER SPACING			Manufacturer:	Series:	Sheet:	Drawing No.:	Rev.:
Drawn By:	Date:	Checked by:				PW-701	NTS	10 of 12	4259-4	B

TABLE 3. ANCHOR ON-CENTER DIMENSION BY ANCHOR TYPE - WOOD SUBSTRATE

WIND DIM.	ANCHOR TYPE	WINDOW "Y" DIMENSION													
		15.0"	20.0"	25.0"	28.5"	30.0"	34.0"	36.5"	45.0"	46.5"	48.0"				
96.0"	O.C.	12	10	12	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12
93.0"	O.C.	11 5/8	10	12 5/8	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12
87.5"	O.C.	12 5/8	10	12 5/8	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12
82.0"	O.C.	11 11/16	10 3/4	12 1/2	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12
76.5"	O.C.	10 3/4	10	12 1/2	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12
71.0"	O.C.	11 13/16	10 3/4	12 1/2	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12
65.5"	O.C.	10 3/4	10 3/4	12 1/2	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12
60.0"	O.C.	12	10	12 1/2	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12
54.5"	O.C.	10 5/8	10 5/8	12 1/2	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12
49.0"	O.C.	12 3/8	10	12 1/2	8 1/4	9	10 1/2	11	9 3/8	11	10 1/2	12	12	10 1/2	12

NOTES:
 1. ANCHOR SPACING FOR SQUARE AND RECTANGULAR WINDOWS:
 MAX. ON-CENTER (O.C.) "X" AND "Y" DIMENSION FROM TABLE 3 (MIN. 2 1/8" O.C. CONCRETE SUBSTRATE)
 MAX. 8 1/2" FROM CORNERS

2. ANCHOR SPACING FOR WINDOW SHAPES OTHER THAN SQUARE OR RECTANGULAR:
 FIND THE SMALLEST WINDOW SIZE IN TABLE 3 WHICH THE OVERALL WIDTH AND HEIGHT DIMENSIONS COMPLETELY FIT WITHIN AND USE THE ON-CENTER DIMENSION FOR THE RESPECTIVE ANCHOR TYPE AROUND THE PERIMETER OR CIRCUMFERENCE, NOT EXCEEDING 8 1/2" FROM ANY CORNER.

ANCHORAGE, WOOD SUBSTRATE

ANCHOR TYPE:
 1. #12 STEEL SCREW (G5)
 2. #14 STEEL SCREW (G5)
 3. 1/4" ELCO TAPCON
 4. 1/4" ELCO S54 CRETIFLEX
 5. 5/16" ELCO TAPCON

WIND DIM.	ANCHOR TYPE	WIND DIM.	ANCHOR TYPE
96.0"	O.C.	96.0"	O.C.
93.0"	O.C.	93.0"	O.C.
87.5"	O.C.	87.5"	O.C.
82.0"	O.C.	82.0"	O.C.
76.5"	O.C.	76.5"	O.C.
71.0"	O.C.	71.0"	O.C.
65.5"	O.C.	65.5"	O.C.
60.0"	O.C.	60.0"	O.C.
54.5"	O.C.	54.5"	O.C.
49.0"	O.C.	49.0"	O.C.

PRODUCT REVIEWED
 on compliance with the Florida
 Building Code
 Acceptance No. **07-2418-O.C.**
 Expiration Date **12/31/2014**
 By: *(Signature)*
 Michael Bruce Product Control
 Division

ANCHORAGE, WOOD SUBSTRATE
 ALUMINUM PICTURE WINDOW, IMPACT

1077 TECHNICAL DRIVE
 NOKOMAH, FL 34273
 P.O. BOX 1520
 NOKOMAH, FL 34274



Visible Ducter
 PW-701
 NTS 11 x 12
 4259-3

(Signature)
 Robert L. Cain, P.E.
 PE 368712
 Structural

#2

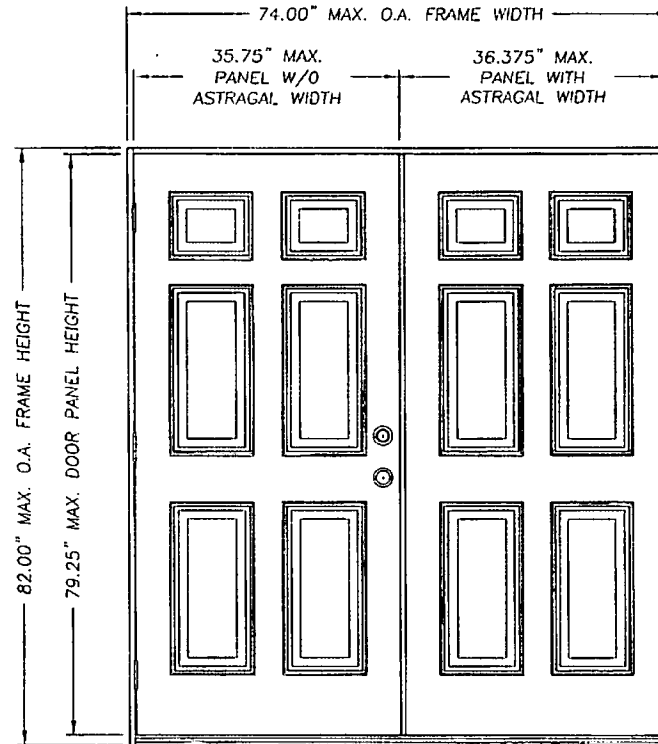
**NAN YA PLASTICS CORP.
PLASTPRO INC.**

9 PEACH TREE HILL ROAD
LIVINGSTON, NEW JERSEY 07039
PH: 800-779-0561 FAX: 973-758-4001

**DISTINCTION SERIES
6'0" x 6'8" OPAQUE FIBERGLASS DOOR
INSWING / OUTSWING**

GENERAL NOTES

1. THIS PRODUCT HAS BEEN EVALUATED AND IS IN COMPLIANCE WITH THE FLORIDA BUILDING CODE EXCLUDING THE "HIGH VELOCITY HURRICANE ZONE".
2. PRODUCT ANCHORS SHALL BE AS LISTED AND SPACED AS SHOWN ON DETAILS. ANCHOR EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO.
3. WHEN USED IN WIND-BORNE DEBRIS REGIONS THIS PRODUCT COMPLIES WITH SECTION 1609.1.4 OF THE FLORIDA BUILDING CODE AS AN IMPACT RESISTANT PRODUCT AND DOES NOT REQUIRE THE USE OF AN EXTERNAL IMPACT RESISTANT COVERING. THIS PRODUCT DOES NOT MEET THE REQUIREMENTS FOR ENHANCED PROTECTION OF ESSENTIAL FACILITIES AS DEFINED IN ASTM E1996.
4. FOR 2X STUD FRAMING CONSTRUCTION, ANCHORING OF THESE UNITS SHALL BE THE SAME AS THAT SHOWN FOR 2X BUCK MASONRY CONSTRUCTION.
5. CONDITIONS NOT COVERED BY THIS DRAWING ARE SUBJECT TO FURTHER ENGINEERING ANALYSIS.



X X

DOUBLE OPAQUE DOOR

TABLE OF CONTENTS	
SHEET #	DESCRIPTION
1	TYPICAL ELEVATION, DESIGN PRESSURES & GENERAL NOTES
2	HORIZONTAL & VERTICAL CROSS SECTION
3	BUCK & FRAME ANCHORING
4	ASTRAGAL DETAILS
5	BILL OF MATERIALS & COMPONENTS

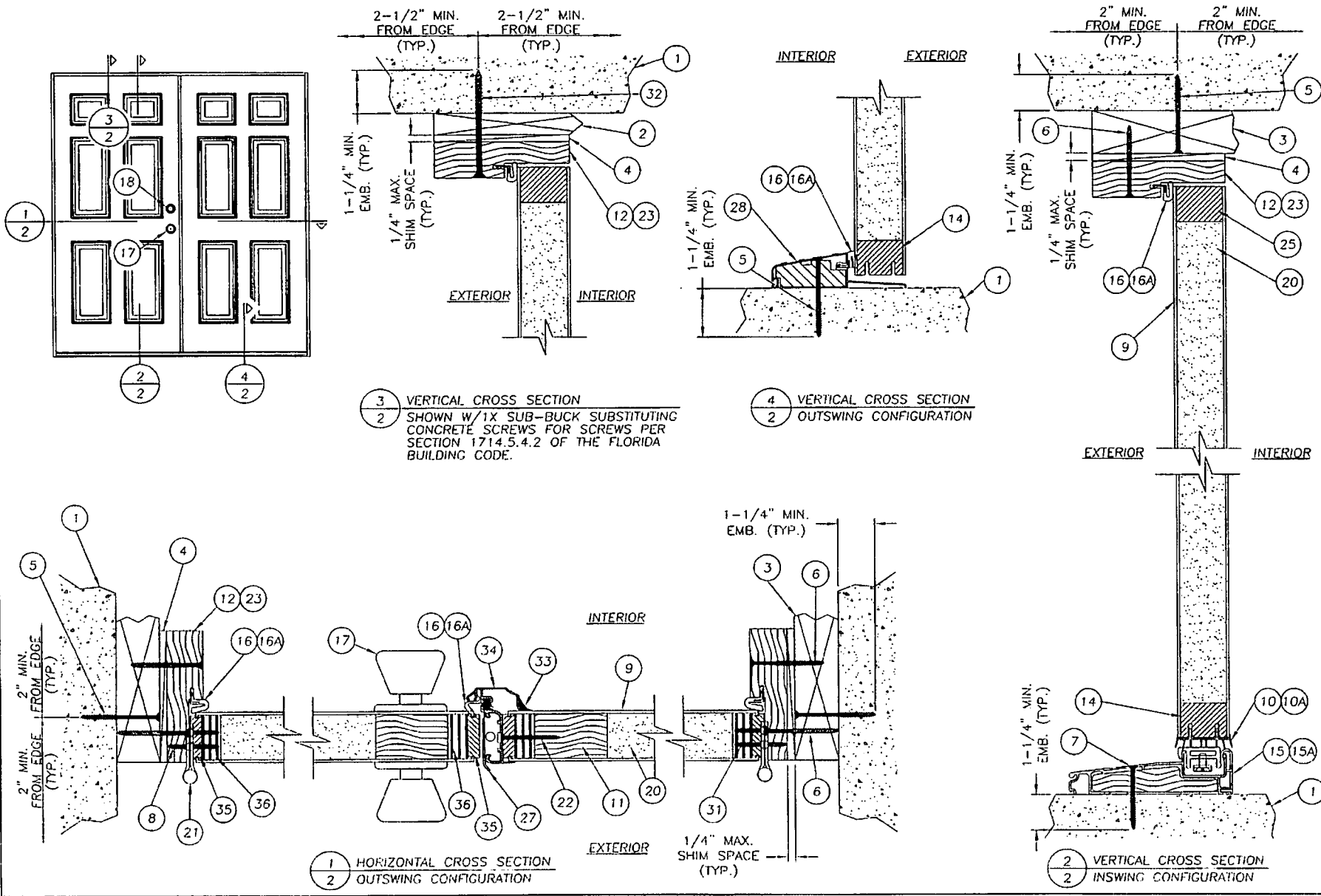
TYPE	OVERALL FRAME DIMENSION	DESIGN PRESSURE (PSF)	
		POSITIVE	NEGATIVE
INSWING	74.00" x 82.00"	+50.0	-50.0
OUTSWING	74.00" x 80.37"	+50.0	-50.0

Documents Prepared By:
RW
BUILDING CONSULTANTS, INC.
P.O. Box 230, Vero Beach, FL 33565
Phone No.: 813.659.9197
Florida Board of Professional Engineers
Certificate of Authorization No. 8513
Robert W. Waddell 2-23-06
Waddell & Waddell, P.E. No. 54158

PRODUCT: DISTINCTION SERIES 6'0" x 6'8" OPAQUE FIBERGLASS DOOR
PART OR ASSEMBLY: INSWING / OUTSWING
TYPICAL ELEVATION DESIGN PRESSURES & GENERAL NOTES

NO.	DATE	BY	REVISIONS

DATE: 01/13/06
SCALE: N.T.S.
DWG. BY: AEM
CHK. BY: WWH
DRAWING NO.: FL-854
SHEET 1 of 5



3 VERTICAL CROSS SECTION
 2 SHOWN W/1X SUB-BUCK SUBSTITUTING
 CONCRETE SCREWS FOR SCREWS PER
 SECTION 1714.5.4.2 OF THE FLORIDA
 BUILDING CODE.

4 VERTICAL CROSS SECTION
 2 OUTSWING CONFIGURATION

1 HORIZONTAL CROSS SECTION
 2 OUTSWING CONFIGURATION

2 VERTICAL CROSS SECTION
 2 INSWING CONFIGURATION

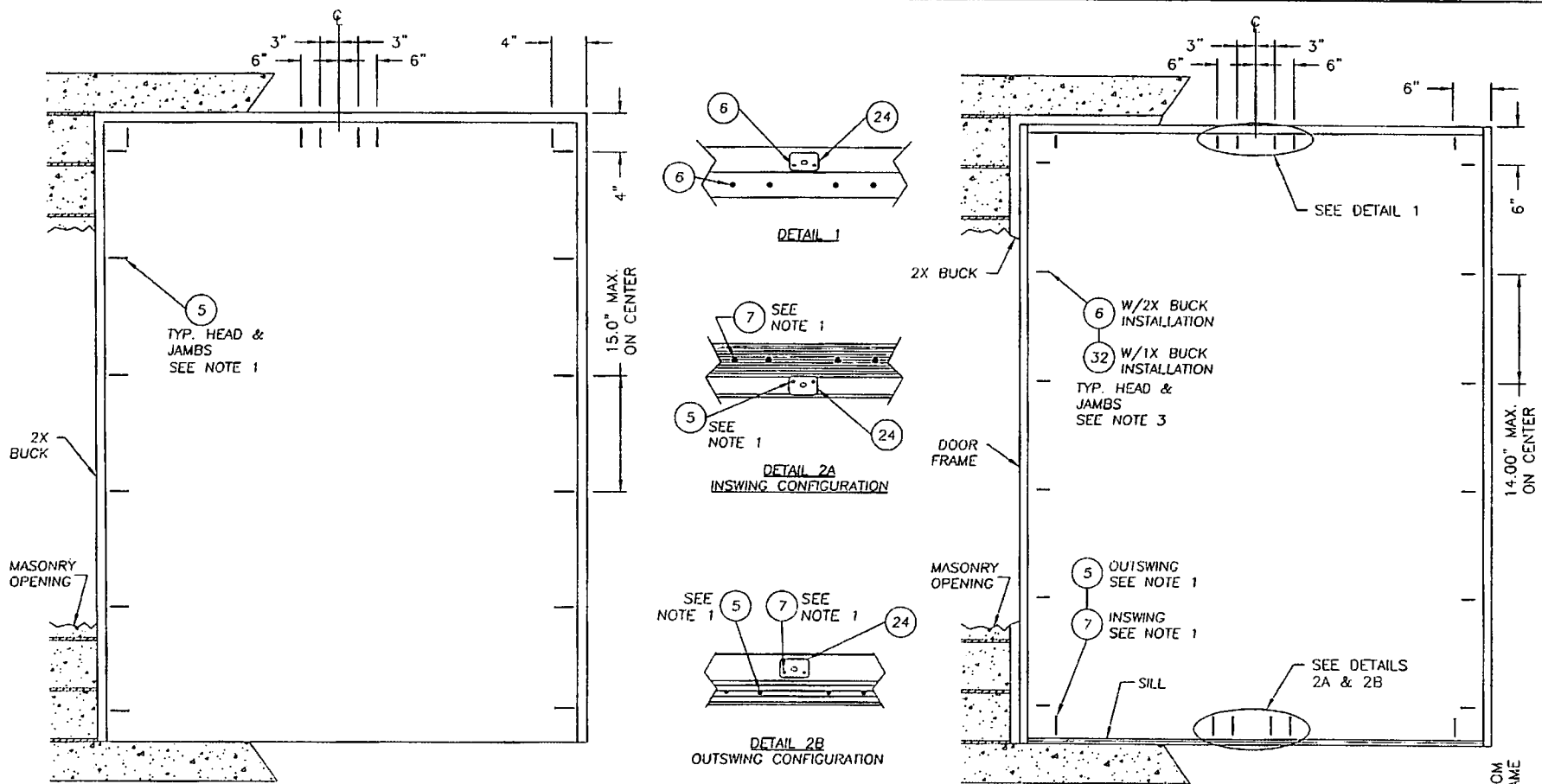
Documents Prepared By:
 BUILDING CONSULTANTS, INC.
 P.O. Box 230 Vero Beach, FL 33595
 Phone No.: 813.859.9197
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
 Wendell W. Honey, P.E. 2-23-06
 No. 54158

PRODUCT: DISTINCTION SERIES 60" X 68" OP-AQUE FIBERGLASS DOOR
 PART OR ASSEMBLY: INSWING / OUTSWING

HORIZONTAL & VERTICAL CROSS SECTIONS

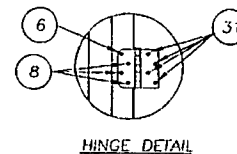
NO.	DATE	BY	REVISIONS

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 SCALE: N.T.S.
 DWG. BY: AEM
 CHK. BY: WWH
 DRAWING NO.: FL-854
 SHEET 2 of 5

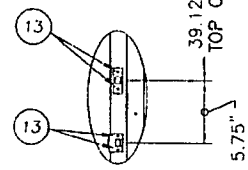


BUCK ANCHORING

FRAME ANCHORING



HINGES (3) LOCATED @ 9.46, 40.71" AND 71.965" FROM TOP OF FRAME TO CENTER LINE OF HINGE.



STRIKE PLATE DETAIL

NOTES:

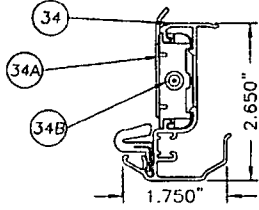
1. 3/16" TAPCONS REQUIRE A MINIMUM 2" CLEARANCE TO MASONRY EDGES AND A MINIMUM 2-1/4" CLEARANCE TO ADJACENT TAPCONS.
2. 1/4" TAPCONS REQUIRE A MINIMUM 2-1/2" CLEARANCE TO MASONRY EDGES AND A MINIMUM 3" CLEARANCE TO ADJACENT TAPCONS.
3. WHEN ANCHORING DOOR FRAME UTILIZING A 1X BUCK THEN ITEM #6 IS SUBSTITUTED WITH ITEM #32 (1/4" X 3-3/4" ELCO ANCHOR). THE QUANTITY AND SPACING OF ANCHORS DOES NOT CHANGE. SEE NOTE 2.

Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230, Yorida, FL 33593
 Phone No.: 813.859.8187
 Florida Board of Professional Engineers
 Certificate of Authorization No. 0813
Wm. W. Kinney 2-23-06
 Wm. W. Kinney, P.E. No. 54158

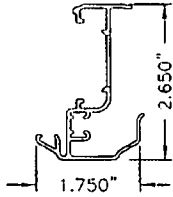
PRODUCT: DISTANCE SERIES 60" X 68" OPERATING SERIES 60" X 68" INSWING / OUTSWING
 PART OR ASSEMBLY: BUCK & FRAME ANCHORING

NO.	DATE	BY	REVISIONS

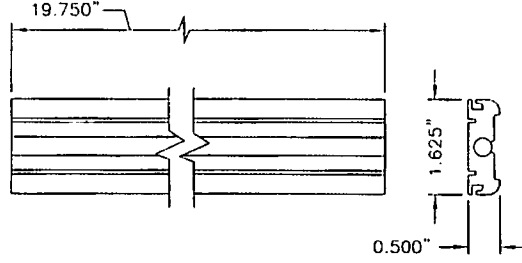
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 SCALE: N.T.S.
 DWG. BY: AEM
 CHK. BY: WWH
 DRAWING NO.: FL-854
 SHEET 3 OF 5



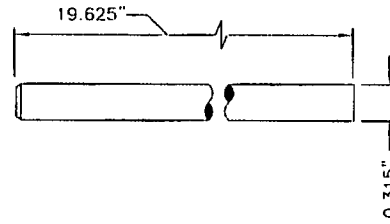
ASTRAGAL ASSEMBLY
BY ENDURA



34 ALUMINUM ASTRAGAL
BY ENDURA PRODUCTS



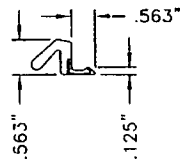
34A BOLT RET.
TOP / BOTTOM



34B SLIDE BOLT ROD

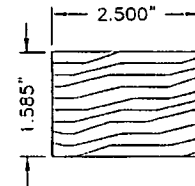
Documents Prepared By: RW BUILDING CONSULTANTS, INC. P.O. Box 230 Venice FL 33585 Phone No.: 813.659.1917 Florida Board of Professional Engineers Certificate of Authorization No. 9813 <i>Wendell W. Hines, P.E.</i> 2-23-06 Wendell W. Hines, P.E. No. 54158	
PRODUCT: DISTINCTION SERIES 6'0" x 6'8" OPAQUE FIBERGLASS DOOR INSWING / OUTSWING	PART OR ASSEMBLY: ASTRAGAL DETAILS
NO. _____ DATE _____	BY _____ REVISIONS
DATE: 01/13/06	SCALE: N.T.S.
DWG. BY: AEM	CHK. BY: WWH
DRAWING NO.: FL-854	SHEET 4 OF 5

ITEM	DESCRIPTION	MATERIAL
1	MASONRY	CONC.
2	1X BUCK	WOOD
3	2X BUCK	WOOD
4	1/4" MAX. SHIM SPACE	WOOD
5	3/16" x 2-3/4" TAPCON	STEEL
6	#10 x 2-1/2" PFH WOOD SCREW	STEEL
7	3/16" x 2-1/4" TAPCON	STEEL
8	#9 x 3/4" PFH WOOD SCREW	STEEL
9	DOOR SKIN (MIN. 0.075" THICK)	FIBERGLASS
10	INSWING VINYL DOOR BOTTOM SWEEP BY ENDURA	VINYL
10A	VINYL DOOR BOTTOM SWEEP #362B BY HOLM IND.	VINYL
11	REINFORCEMENT WOOD FOR LOCKS DOOR	WOOD
12	FINGER JOINTED PINE JAMB	WOOD
13	#9 x 2-1/4" PHILLIPS FLAT HEAD WOOD SCREW	STEEL
14	DOOR BOTTOM RAIL	FOAM PVC
15	INSWING ADJUSTABLE THRESHOLD BY ENDURA	AL./WOOD
15A	INSWING ADJUSTABLE ALUMINUM THRESHOLD BY DLP	AL./WOOD
16	FORCE 5 WEATHER STRIPPING BY ENDURA	FOAM
16A	COMPRESSION WEATHER STRIP OLON 650 BY SCHLEGEL	FOAM
17	KWIKSET KEYPED ENTRY GRADE 2	STEEL
18	KWIKSET DEADBOLT GRADE 2	STEEL
19	NOT USED	-
20	POLYURETHANE FOAM BY NANYA	FOAM
21	4" x 4" BUTT HINGE	STEEL
22	#8 x 2" PFH SCREW	STEEL
23	POLY FIBER JAMB	COMP. / VINYL
24	FLUSH BOLT STRIKE PLATE	STEEL
25	DOOR TOP RAIL	FOAM PVC
26	NOT USED	-
27	STRIKE PLATE	STEEL
28	OUTSWING BUMP THRESHOLD	ALUM.
29	NOT USED	-
30	NOT USED	-
31	#9 x 1" PFH WOOD SCREW	STEEL
32	1/4" x 3-3/4" TAPCON	STEEL
33	SEALANT	SILICONE
34	ASTRACAL BY ENDURA	ALUM.
34A	BOLT RETAINER	PLASTIC
34B	SLIDE BOLT ROD	STEEL
35	HINGE & LATCH STILE	FOAM PVC
36	HINGE & LATCH STILE REINFORCEMENT	LVL

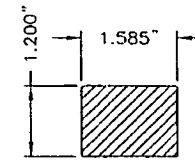


16 WEATHER STRIP

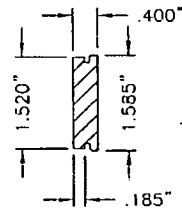
16A



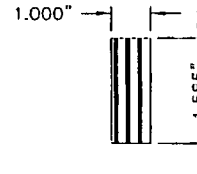
11 REINFORCEMENT WOOD FOR LOCKS



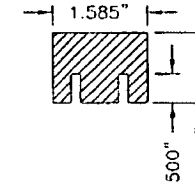
25 DOOR TOP RAIL



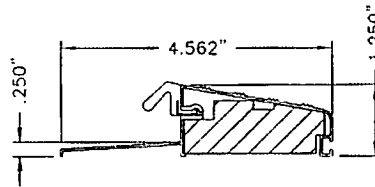
35 HINGE & LATCH STILE



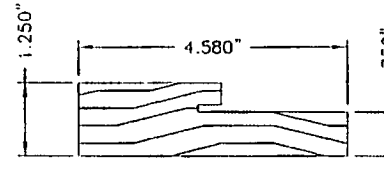
36 HINGE & LATCH STILE REINFORCEMENT



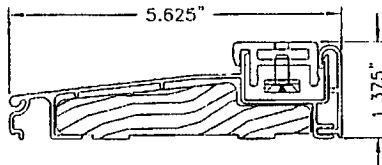
14 DOOR BOTTOM RAIL



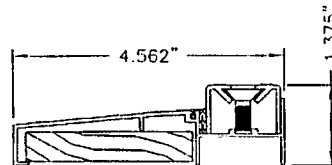
28 OUTSWING BUMP THRESHOLD



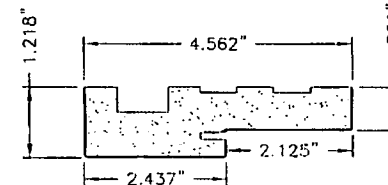
12 JAMB



15 ADJUSTABLE INSWING SILL



15A ADJUSTABLE INSWING SILL



23 POLY FIBER JAMB

Documents Prepared By: **RW** BUILDING CONSULTANTS, INC.
 P.O. Box 230 Venice FL 33595
 Phone No.: 813.859.9197
 Florida Board of Professional Engineers
 Certificate of Authority No. 9813
 Registered Professional Engineer
 Kenneth W. Henry, P.E. No. 5-1-158

PRODUCT: DISTINCTION SERIES 6'0" x 6'6" OPAQUE FIBERGLASS DOOR
 PART OR ASSEMBLY: INSWING / OUTSWING

BILL OF MATERIAL & COMPONENTS

NO.	DATE	BY	REVISIONS

DATE: 01/13/06
 SCALE: N.T.S.
 DWG. BY: AEM
 CHK. BY: WWH
 DRAWING NO.: FL-854
 SHEET 5 OF 5

10# 1

R
W
B
C

R W Building Consultants, Inc.

Consulting and Engineering Services for the Building Industry

P.O. Box 230 Valrico, FL 33595 Phone 813.659.9197 Facsimile 813.754.9989

Florida Board of Professional Engineers Certificate of Authorization No. 9813

Product Evaluation Report

Report No.: FL-11321.1

Date: October 2, 2008

Product Category: Exterior Doors

Product sub-category: ~~Swinging Exterior Door Assemblies~~

Product Name: ~~Opaque Fiberglass Door~~
~~Inswing/Outswing~~
~~Impact~~

Manufacturer: Builders Hardware, Inc.
5615 E. Powhatan Ave.
Tampa, FL 33610
Phone 800.966.7753 Facsimile 813.977.5632

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

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


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

See Drawing No. FL-11321.1 prepared by R W Building Consultants, Inc. and signed and sealed by Lyndon F. Schmidt, P.E. (FL # 43409) for specific use parameters.

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

Limitations

1. This product has been evaluated and is in compliance with the 2007 Florida Building Code (FBC) structural requirements excluding the "High Velocity Hurricane Zone" (HVHZ).
2. Product anchors shall be as listed and spaced as shown on details. Anchor embedment to base material shall be beyond wall dressing or stucco.
3. When used in areas requiring wind borne debris protection this product complies with Section 1609.1.2 of the FBC and does not require an impact resistant covering. This product meets missile level "D" and includes Wind Zone 4 as defined in ASTM E1996.
4. For 2x stud framing construction, anchoring of these units shall be the same as that shown for 2x buck masonry construction.
5. Site conditions that deviate from the details of drawing FL-11321.1 require further engineering analysis by a licensed engineer or registered architect.
6. See drawing FL-11321.1 for size and design pressure limitations.



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

Supporting Documents

- A Drawing
1. Drawing No. FL-11321.1 prepared by R W Building Consultants, Inc. (Florida Board of Professional Engineers Certificate of Authorization No. 9813), signed and sealed by Lyndon F. Schmidt, P.E.
- B Tests
1. Testing per ASTM E330-02, and ASTM E1996/1886-02 as performed by Testing Evaluation Laboratories, Inc. and reported in test report TEL 2004-07-13-016 Rev., signed by Wendell W. Haney, P.E.
- C Calculations
1. Product anchoring for tested specimens is in accordance with manufacturer's published recommendations as substantiated by tested specimens reported in test report TEL 2004-07-13-016 Rev. Additional product anchor analysis for loading conditions prepared, signed and sealed by Lyndon F. Schmidt, P.E.
 2. Buck anchor analysis for loading conditions prepared, signed and sealed by Lyndon F. Schmidt, P.E.
- D Other
1. Certificate of Participation issued by National Accreditation and Management Institute, certifying that Builders Hardware, Inc. is manufacturing products within a quality assurance program that complies with ISO/IEC 17020 and Guide 53.



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

#1

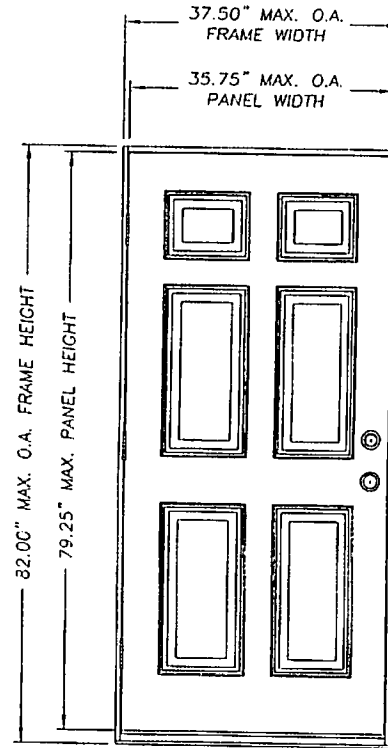
NAN YA PLASTICS CORP.
PLASTPRO INC.

9 PEACH TREE HILL ROAD
 LIVINGSTON, NEW JERSEY 07039
 PH: 800-779-0561 FAX: 973-758-4001

DISTINCTION SERIES
3'0" x 6'8" OPAQUE FIBERGLASS DOOR
IN SWING / OUT SWING

GENERAL NOTES

1. THIS PRODUCT HAS BEEN EVALUATED AND IS IN COMPLIANCE WITH THE FLORIDA BUILDING CODE EXCLUDING THE "HIGH VELOCITY HURRICANE ZONE".
2. PRODUCT ANCHORS SHALL BE AS LISTED AND SPACED AS SHOWN ON DETAILS. ANCHOR EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO.
3. WHEN USED IN WIND-BORNE DEBRIS REGIONS THIS PRODUCT COMPLIES WITH SECTION 1609.1.4 OF THE FLORIDA BUILDING CODE AS AN IMPACT RESISTANT PRODUCT AND DOES NOT REQUIRE THE USE OF AN EXTERNAL IMPACT RESISTANT COVERING. THIS PRODUCT DOES NOT MEET THE REQUIREMENTS FOR ENHANCED PROTECTION OF ESSENTIAL FACILITIES AS DEFINED IN ASTM E1996.
4. FOR 2X STUD FRAMING CONSTRUCTION, ANCHORING OF THESE UNITS SHALL BE THE SAME AS THAT SHOWN FOR 2X BUCK MASONRY CONSTRUCTION.
5. CONDITIONS NOT COVERED BY THIS DRAWING ARE SUBJECT TO FURTHER ENGINEERING ANALYSIS.



X
 SINGLE OPAQUE DOOR

TABLE OF CONTENTS	
SHEET #	DESCRIPTION
1	TYPICAL ELEVATION, DESIGN PRESSURES & GENERAL NOTES
2	HORIZONTAL & VERTICAL CROSS SECTIONS
3	BUCK & FRAME ANCHORING
4	BILL OF MATERIALS & COMPONENTS

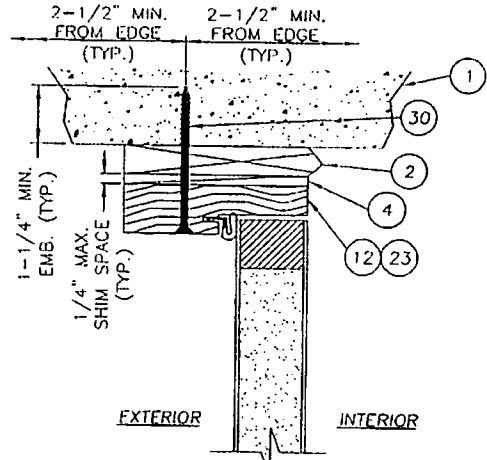
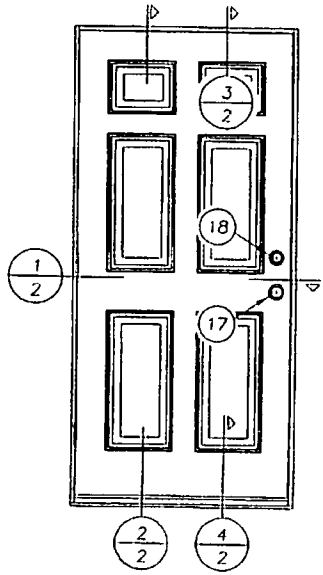
TYPE	OVERALL FRAME DIMENSION	DESIGN PRESSURE (PSF)	
		POSITIVE	NEGATIVE
IN SWING	37.50" x 82.00"	+65.0	-70.0
OUT SWING	37.50" x 80.37"	+65.0	-65.0

Documents Prepared By:
 RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Venice FL 33585
 Phone No.: 813.659.9187
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
 2-22-06
 Wensell W. Jones, P.E. No. 54128

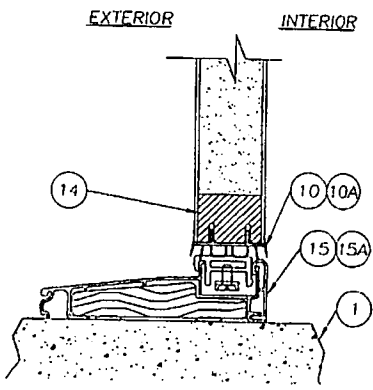
PRODUCT:
 DISTINCTION SERIES 3'0" x 6'8"
 OPAQUE FIBERGLASS DOOR
 IN SWING / OUT SWING
 PART OR ASSEMBLY:
 TYPICAL ELEVATION, DESIGN
 PRESSURES & GENERAL NOTES

NO.	DATE	BY	REVISIONS

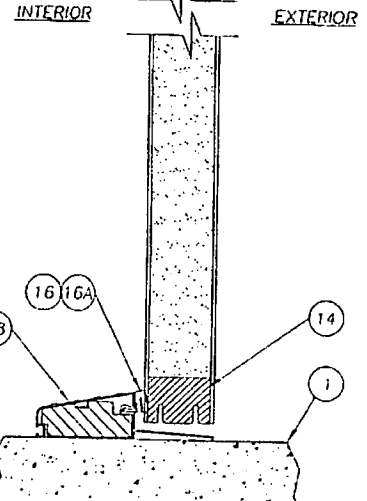
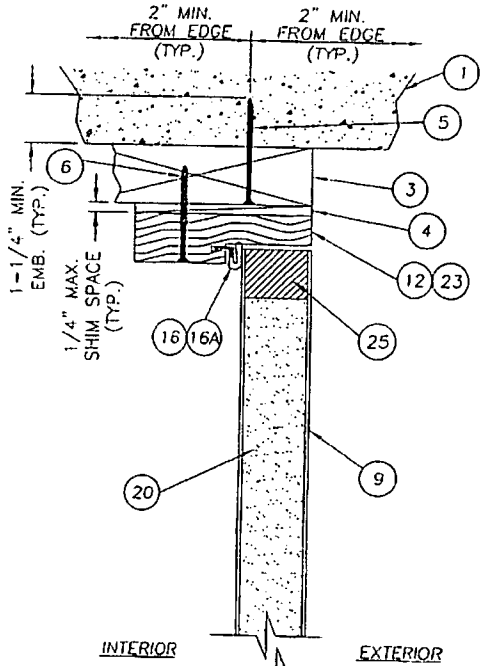
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 SCALE: N.T.S.
 DWG. BY: AEM
 CHK. BY: WWH
 DRAWING NO.:
 FL-853
 SHEET 1 OF 4



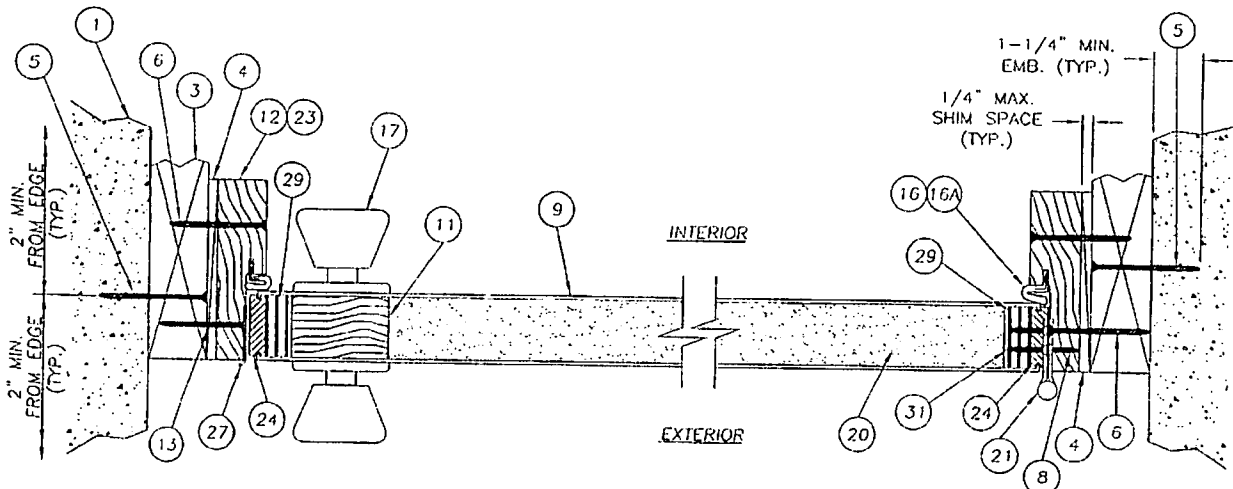
3 VERTICAL CROSS SECTION
2 SHOWN W/1X SUB-BUCK SUBSTITUTING
CONCRETE SCREWS FOR SCREWS PER
SECTION 1714.5.4.2 OF THE FLORIDA
BUILDING CODE.



4 VERTICAL CROSS SECTION
2 INSINGING CONFIGURATION



2 VERTICAL CROSS SECTION
2 OUTSWING CONFIGURATION



1 HORIZONTAL CROSS SECTION
2 OUTSWING CONFIGURATION

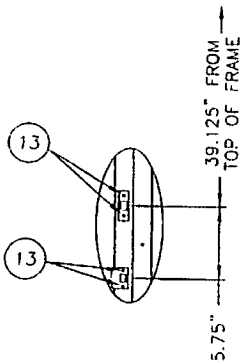
Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Venice, FL 33595
 Phone No.: 813.659.9197
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
W. H. Money 5-22-06
 W. H. Money, P.E. No. 54158

PRODUCT:
 DISTINCTION SERIES 3'0" x 6'6"
 OPAL GLASS DOOR
 INSINGING / OUTSWING

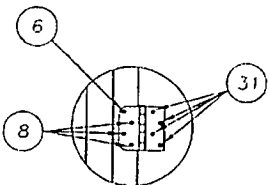
PART OR ASSEMBLY:
 HORIZONTAL & VERTICAL
 CROSS SECTIONS

NO.	DATE	BY	REVISIONS

DATE: 01/13/06
 SCALE: N.T.S.
 DWG. BY: AEM
 CHK. BY: WWH
 DRAWING NO.: FL-853
 SHEET 2 of 4

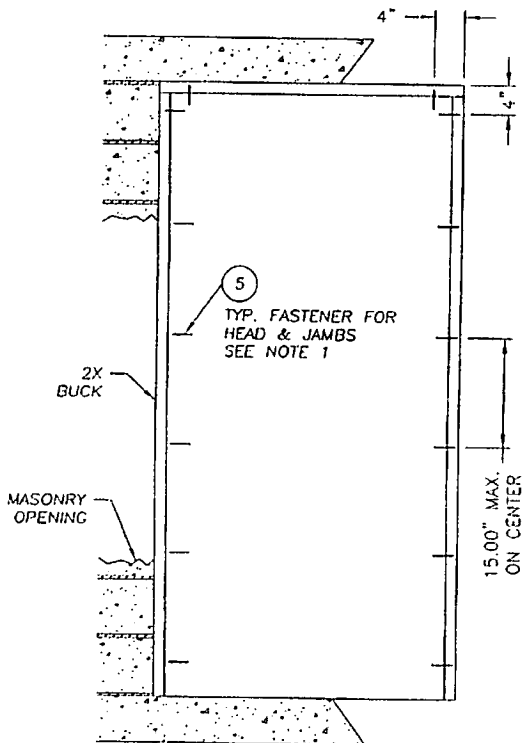


STRIKE PLATE DETAIL

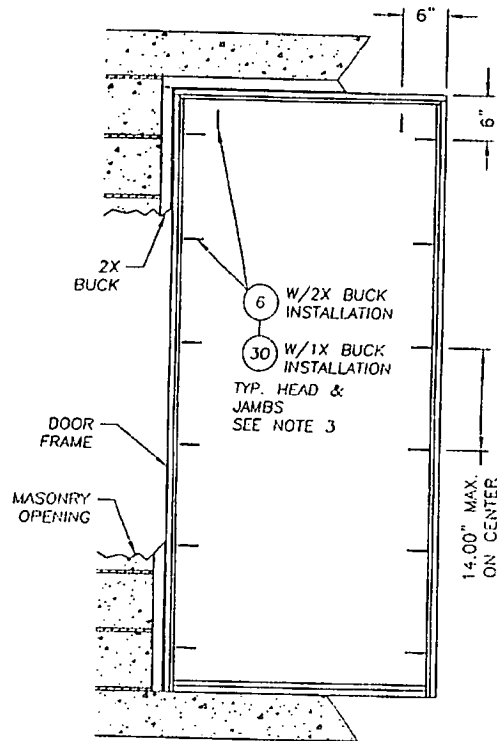


HINGE DETAIL

HINGES (3) LOCATED @ 9.46",
40.71" AND 71.965" FROM TOP
OF FRAME TO CENTER LINE
OF HINGE.



BUCK ANCHORING



FRAME ANCHORING

NOTES:

1. 3/16" TAPCONS REQUIRE A MINIMUM 2" CLEARANCE TO MASONRY EDGES AND A MINIMUM 2-1/4" CLEARANCE TO ADJACENT TAPCONS.
2. 1/4" TAPCONS REQUIRE A MINIMUM 2-1/2" CLEARANCE TO MASONRY EDGES AND A MINIMUM 3" CLEARANCE TO ADJACENT TAPCONS.
3. WHEN ANCHORING DOOR FRAME UTILIZING A 1X BUCK THEN ITEM #6 IS SUBSTITUTED WITH ITEM #30 (1/4" X 3-3/4" ELCO ANCHOR). THE QUANTITY AND SPACING OF ANCHORS DOES NOT CHANGE. SEE NOTE 2.

Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Venice FL 33593
 Phone No.: 813.859.9197
 Florida Board of Professional Engineers
 Certificate of Authorization No. 6813
Wendell W. Kennedy
 Wendell W. Kennedy, P.E., No. 54158

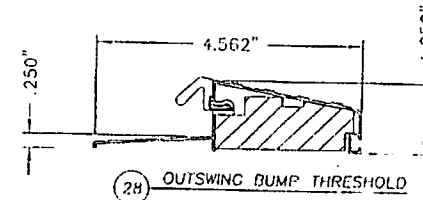
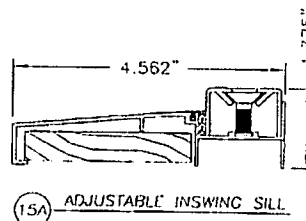
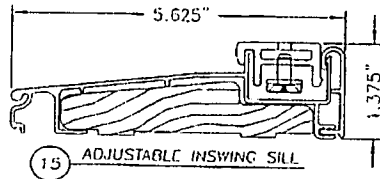
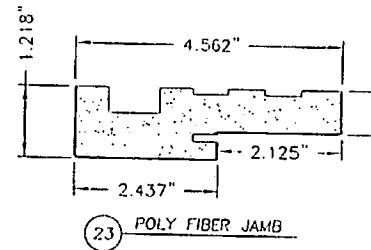
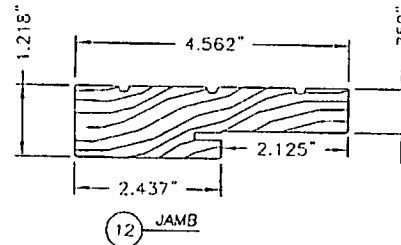
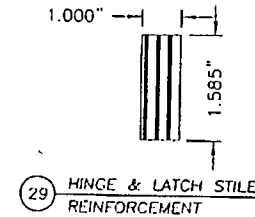
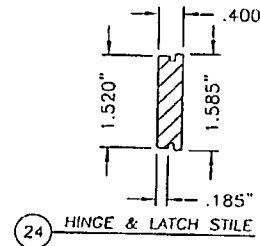
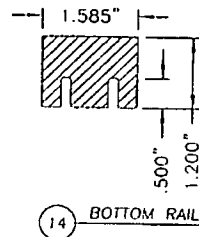
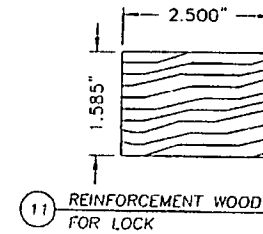
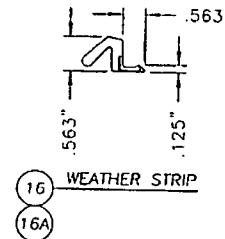
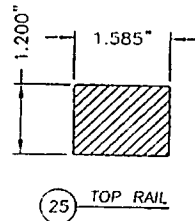
PRODUCT: DISTINCTION SERIES 310" x 6'8"
 OPALQUE FIBERGLASS DOOR
 INSULATED / GLASSING

PART OR ASSEMBLY: BUCK & FRAME ANCHORING

NO.	DATE	BY	REVISIONS

DATE: 01/13/06
 SCALE: N.T.S.
 DWG. BY: AEM
 CHK. BY: WWH
 DRAWING NO.: FI-853
 SHEET 3 of 4

ITEM	DESCRIPTION	MATERIAL
1	MASONRY	CONC.
2	1X BUCK	WOOD
3	2X BUCK	WOOD
4	1/4" MAX. SHIM SPACE	WOOD
5	3/16" x 2-3/4" TAPCON	STEEL
6	#10 x 2-1/2" PFH WOOD SCREW	STEEL
7	3/16" x 2-1/4" TAPCON	STEEL
8	#9 x 3/4" PFH WOOD SCREW	STEEL
9	DOOR SKIN (MIN. 0.075" THICK)	FIBERGLASS
10	INSWING VINYL DOOR BOTTOM SWEEP BY ENDURA	VINYL
10A	VINYL DOOR BOTTOM SWEEP #3628 BY HOLM IND.	VINYL
11	REINFORCEMENT WOOD FOR LOCKS	WOOD
12	FINGER JOINTED PINE JAMB	WOOD
13	#9 x 2-1/4" PFH WS	STEEL
14	BOTTOM RAIL	FOAM PVC
15	INSWING ADJUSTABLE THRESHOLD BY ENDURA	AL./WOOD
15A	INSWING ADJUSTABLE ALUMINUM THRESHOLD BY DLP	AL./WOOD
16	FORCE 5 WEATHER STRIPPING BY ENDURA	FOAM
16A	COMPRESSION WEATHER STRIP OLON 650 BY SCHLEGEL	FOAM
17	KWIKSET KEYS ENTRY GRADE 2	STEEL
18	KWIKSET DEADBOLT GRADE 2	STEEL
19	NOT USED	-
20	POLYURETHANE FOAM BY NANYA	FOAM
21	4" x 4" BUTT HINGE	STEEL
22	#8 x 2" PFH WOOD SCREW	STEEL
23	POLY FIBER JAMB	COMP. / VINYL
24	HINGE & LATCH STILE	FOAM PVC
25	TOP RAIL	FOAM PVC
26	NOT USED	-
27	STRIKE PLATE	STEEL
28	OUTSWING BUMP THRESHOLD	ALUM.
29	HINGE & LATCH STILE REINFORCEMENT	LVL
30	1/4" x 3-3/4" TAPCON	STEEL
31	#9 x 1" PFH WOOD SCREW	STEEL



Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Vero Beach, FL 33595
 Phone No.: 813.599.9197
 Florida Board of Professional Engineers
 Certificate Of Registration No. 8813
 Wenden M. Jolley, P.E. No. 94150

PRODUCT:
 DISTINCTION SERIES 30" x 68"
 OP-QUEL FIBERGLASS DOOR
 INSWING / OUTSWING
 PART OR ASSEMBLY:

BILL OF MATERIALS
 & COMPONENTS

NO.	DATE	BY

REVISIONS

DATE: 01/13/06
 SCALE: N.T.S.
 DWG. BY: AFM
 CHK. BY: WJWH
 DRAWING NO.: 11-853
 SHEET 4 of 4

R
W
B
C

R W Building Consultants, Inc.

Consulting and Engineering Services for the Building Industry

P.O. Box 230 Valrico, FL 33595 Phone 813.659.9197 Facsimile 813.754.9989

Florida Board of Professional Engineers Certificate of Authorization No. 9813

Product Evaluation Report

Report No.: FL 6184.6

Date: February 20, 2006

Product Category: Exterior Doors

Product sub-category: Swinging Exterior Door Assemblies

Product Name: ~~Distinction Series 6'0" x 6'8" Opaque Fiberglass Door~~
Inswing / Outswing

Manufacturer: Nan Ya Plastics Corporation
Plastpro Inc.
9 Peach Tree Hill Road
Livingston, NJ 07039
Phone: 800-779-0561 Facsimile: 973-758-4001

Scope: This is a Product Evaluation report issued by R W Building Consultants, Inc. and Wendell W. Haney, P.E. (System ID # 1993) for Nan Ya Plastics Corporation, Plastpro Inc. based on Rule Chapter No. 9B-72.070, Method 1d of the State of Florida Product Approval, Department of Community Affairs-Florida Building Commission.

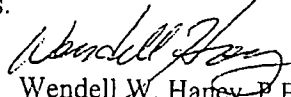
RW Building Consultants and Wendell W. Haney, P.E. do not have nor will acquire financial interest in the company manufacturing or distributing the product or in any other entity involved in the approval process of the product named herein.

This product has been evaluated for use in locations adhering to the Florida Building Code (2004 Edition) and where pressure requirements, as determined by Chapter 16 of The Florida Building Code, do not exceed the following design pressures:

Design Pressure Rating:

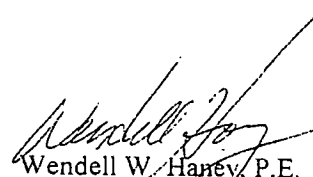
Maximum Design Pressure Rating Positive 50.0 PSF Negative 50.0 PSF
(See Limitations for size restrictions)

See Drawing No.: FL 854 prepared by R W Building Consultants, Inc. and signed and sealed by Wendell W. Haney, P.E. (FL # 54158) for specific use parameters.


Wendell W. Haney, P.E.
FL No. 54158
February 20, 2006

Supporting Documents

- A Drawing
1. Drawing No. FL 854 titled Distinction Series 6'0" x 6'8" Opaque Fiberglass Door Inswing / Outswing prepared by R W Building Consultants, Inc. (Florida Board of Professional Engineers Certificate of Authorization No. 9813), signed and sealed by Wendell W. Haney, P.E.
- B Tests Performed
1. Testing per ASTM E330-02, ASTM E1886/E1996, ASTM E283-91, and ASTM E547-00 as performed by Testing Evaluation Laboratories Inc., and reported in test report number TEL 2004-07-13-016, dated July 16, 2004, and signed and sealed by Wendell W. Haney, P.E.
- C Calculations
1. Product anchoring is in accordance with manufacturer's published recommendations as substantiated by tested specimens reported in test report number TEL 2004-07-13-016.
 2. Buck anchor analysis for loading conditions, prepared, signed and sealed by Wendell W. Haney, P.E.
- D Other
1. Certificate of Participation issued by National Accreditation & Management Institute, Inc., certifying that Nan Ya Plastics Corporation, Plastpro Inc is manufacturing products within a quality assurance program.




Wendell W. Haney, P.E.
FL No. 54158
February 20, 2006

Limitations

1. The Distinction Series 6'0" x 6'8" Opaque Fiberglass Door Inswing / Outswing has been evaluated and meets the requirements for use within the State of Florida excluding the "High Velocity Hurricane Zone".
2. When used in wind-borne debris regions this product complies with Section 1609.1.4 of the Florida Building Code as an Impact resistant product and does not require the use of an external impact resistant covering. This product does not meet the requirements for enhanced protection of essential facilities as defined in ASTM E1996.
3. This product is intended for use where Section R 314.2.4 of the Florida Building Code is applicable.
4. Size Limitations:

<u>Configurations</u>		<u>MAX. Width</u>	<u>MAX. Height</u>
Double	XX	74.00"	82.0"

5. See Drawing # FL 854 for Design Pressure ratings.


Wendell W. Haney, P.E.
FL No. 54158
February 20, 2006

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 11-19 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9296	Bellingham	Final AC		
<u>2PM</u>	2 Via de Christo Grimes		Pass	Close INSPECTOR <i>[Signature]</i>
9297	HB Assoc	framing	Pass	
<u>1st</u>	3718 SE Ocean Rubin Custom	ROUGH ELEC.	Pass	INSPECTOR <i>[Signature]</i>
9188	Zerner	Gas Tanker		
	37 E. High Pt. Rd.	Line rough in	Pass	INSPECTOR <i>[Signature]</i>
9298	GIBSON			
	134. S. RIVER		Pass	
	Preston Ball Home			INSPECTOR <i>[Signature]</i>
	MC GOVERN			
	2 TUSCAN	TREES	OK	
				INSPECTOR <i>[Signature]</i>
9271	Frantom			
	102 N SP RD	GARAGE SLAB	Pass	
	Resort Condo			INSPECTOR <i>[Signature]</i>
	McCabe			
	31 W HIGH PT	TILE		
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 4-21 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9387	Jaley 113 Hillcrest Seagate	frame all mechanics TRADES	PASS	INSPECTOR <i>JA</i>
9370	Taylor 22E High Pt Seagate	Final Wall removal REMODEL 263-4448	PASS	CLOSE INSPECTOR <i>JA</i>
9401	WALDO 113 N. SPD RD ALL AMERICAN	FINAL ROOF	PASS	CLOSE INSPECTOR <i>JA</i>
	Tree Miraglia 66 N Sewalls	Trees	OK	INSPECTOR <i>JA</i>
9388	Green 1345 River Rd Preston Ball Home	Final	PASS	CLOSE INSPECTOR <i>JA</i>
				INSPECTOR
				INSPECTOR

9651

SCREEN WALLS



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:	9651	DATE ISSUED:	DECEMBER 9, 2010
SCOPE OF WORK:	SCREEN WALLS		
CONDITIONS:			
CONTRACTOR:	PRESTON BALL HOME SERVICE		
PARCEL CONTROL NUMBER:	133841-010-000-000700	SUBDIVISION	KINGSTON CT - LOT 7
CONSTRUCTION ADDRESS:	134 S RIVER RD		
OWNER NAME:	GIBSON		
QUALIFIER:	PRESTON BALL	CONTACT PHONE NUMBER:	528-4714

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 PERMIT APPLICATION

Permit Number: 9651

Date: _____

OWNER/TITLEHOLDER NAME: STEPHEN P. GIBSON

Phone (Day) 772.280.5258 (Fax) _____

Job Site Address: 134 S. RIVER ROAD

City: SEWALL'S POINT State: FL Zip: 34996

Legal Description KINGSTON G LOT 7

Parcel Control Number: 13384101000007000

Owner Address (if different): _____

City: _____

State: _____

Zip: _____

SCOPE OF WORK (PLEASE BE SPECIFIC): SCREEN WAU'S

WILL OWNER BE THE CONTRACTOR?

(If yes, Owner Builder questionnaire must accompany application) YES _____ NO [X]

Has a Zoning Variance ever been granted on this property?

YES _____ (YEAR) _____ NO [X] (Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)

Estimated Value of Improvements: \$ 2300

(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: PRESTON BALL HOME SERV.

Phone: 772 528 4714 Fax: 772 336 3590

Qualifiers name: PRESTON BALL

Street: 4405 W BUXTON AVE

City: PSLUCHE

State: FL

Zip: 34903

State License Number: _____

OR: Municipality: SEWALL'S POINT

License Number: _____

LOCAL CONTACT: PRESTON BALL

Phone Number: 772 528-4714

DESIGN PROFESSIONAL: N/A

Fla. License# _____

Street: _____ City: _____

State: _____

Zip: _____

Phone Number: _____

AREAS SQUARE FOOTAGE: Living: _____

Garage: _____

Covered Patios/Porches: _____

Enclosed Storage: _____

Carport: _____ Total under Roof _____

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 2007 SECT. 105.4.1. 105.4.1.1 - .5.

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

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

OWNER NOTORIZED SIGNATURE: (required per 713.135 F.S.) OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)

X Stephen P. Gibson

State of Florida, County of: Martin

On This the 3rd day of December, 2010

by Stephen P. Gibson who is personally

known to me or produced

As identification: Kathryn Spencer

NOTARY PUBLIC-STATE OF FLORIDA Notary Public

Kathy Spencer

Commission # DD730742

Expires: DEC 20, 2011

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

X Preston Ball

State of Florida, County of: Martin

On This the 3rd day of December, 2010

by Preston Ball who is personally

NOTARY PUBLIC STATE OF FLORIDA

Known to me or produced

Kathy Spencer

Commission # DD730742

Expires: DEC. 20, 2011

BONDED THRU ATLANTIC BONDING CO., INC.

My Commission Expires: 12-20-11

APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER PERMITS 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

print Address 2 of 4

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
13-38-41-010-000-00070-0	27857	134 S RIVER RD, SEWALL'S POINT	\$481,640	12/4/2010

Searches

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

Owner Information

Owner(Current)	GIBSON STEPHEN P GIBSON JULIE L
Owner/Mail Address	134 S RIVER RD STUART FL 34996-6328
Sale Date	06/24/1993
Document Number	
Document Reference No.	1018 1615
Sale Price	425000

Location/Description

Account #	27857	Map Page No.	SP-05
Tax District	2200	Legal Description	KINGSTON COURT LOT 7
Parcel Address	134 S RIVER RD, SEWALL'S POINT		
Acres	.4590		

Functions

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

Parcel Type

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

Assessment Information

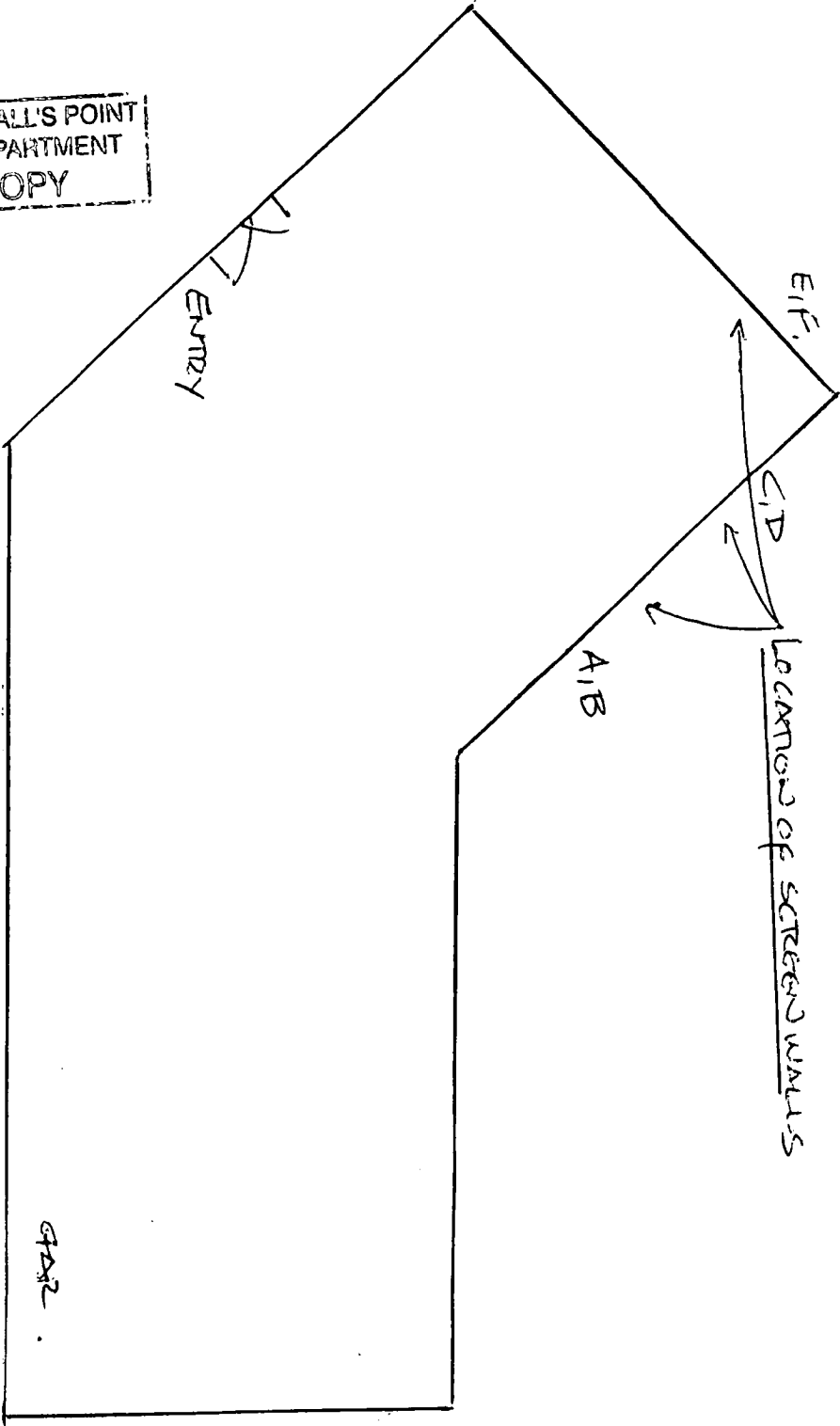
Market Land Value	\$195,800
Market Improvement Value	\$285,840
Market Total Value	\$481,640

Print Back to List First Previous Next Last

Legal Disclaimer / Privacy Statement



TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY



SCREEN WALLS FOR GIBSON RES. 134 S. RIVER RD.

KINGSTON

S. RIVER ROAD

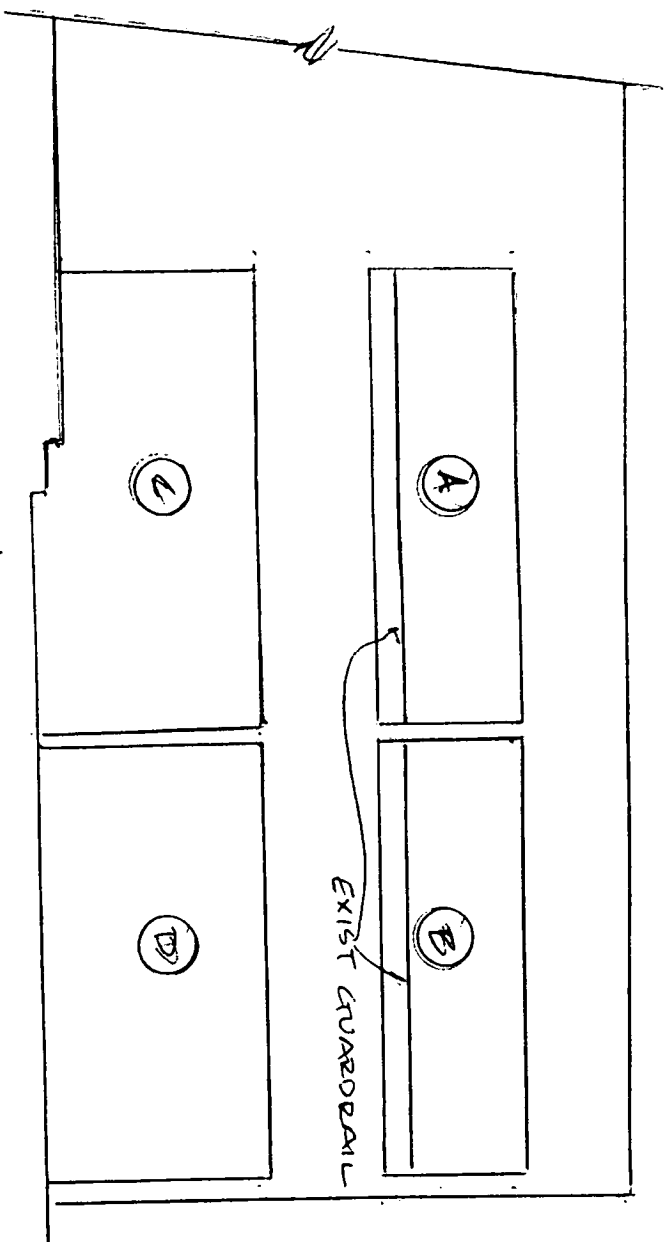
GIBSON RESIDENCE

1345. RIVER RD

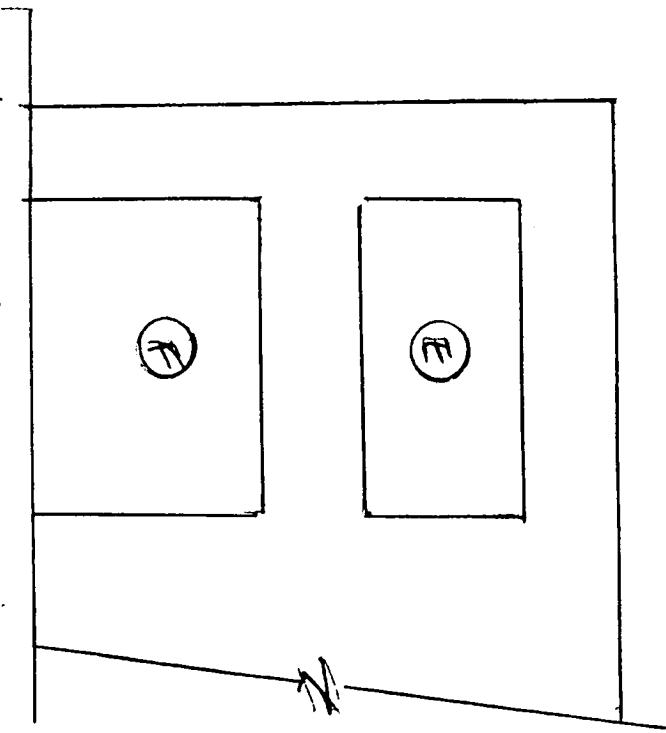
SCREEN WALL PLAN

NOTES:

1. ALL MATERIALS, FRAMING PROCESSES, SIZING, SPANS, ETC. ARE IN ACCORDANCE WITH AAF GUIDE TO ALUMINUM CONST. IN HIGH WIND AREAS 2007.
 2. HORIZONTAL & VERTICAL MEMBERS & SPANS ARE SIZED ACCORDING TO CHART # 304 OF AAF MANUAL.
 3. OPENINGS THROUGH ARE COVERED UNDER THESE DRAWINGS & SPECS.
 4. FRAMING CONNECTIONS COPY W/ AAF MANUAL PG 30 & 31 "CONNECTED W/ EXPOSED FASTENERS"
 5. ALL EXTRUSIONS BRONZE ALUM. MINIMUM .040 GAUGE
6. ANCHORS TO CONCRETE TO BE 1/4" TAPCON TYPE SCREWS W/ MIN 1 1/2" EMBEDMENT, 24" O.C.
7. ANCHORS TO WOOD STRUCTURE TO BE 3/8" X 3" LONG LAGS, 24" O.C. AS PER AAF MANUAL PG 151



REAR ELEVATION NTS



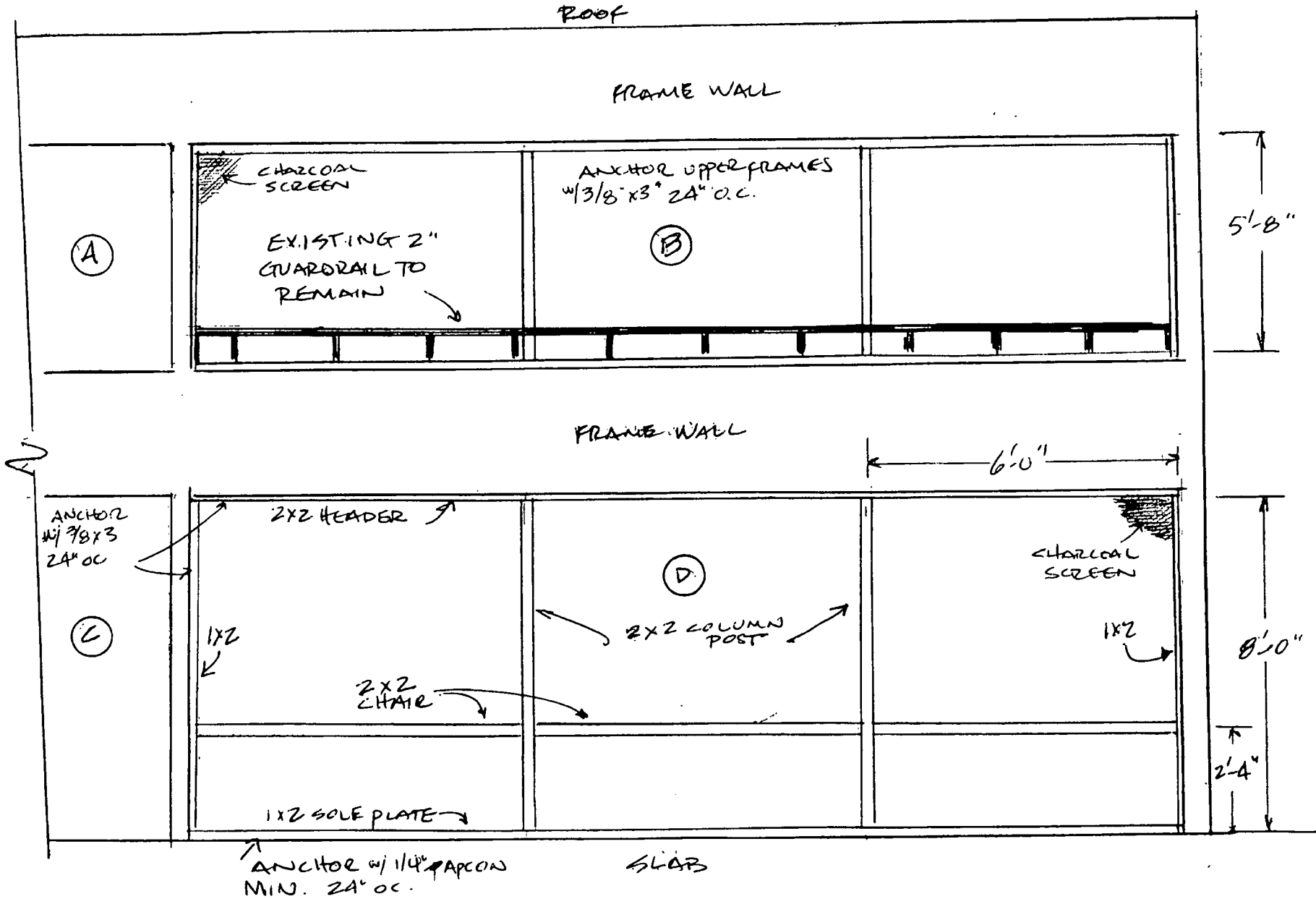
SIDE ELEVATION NTS

GIBSON RES.

1345 River Rd.

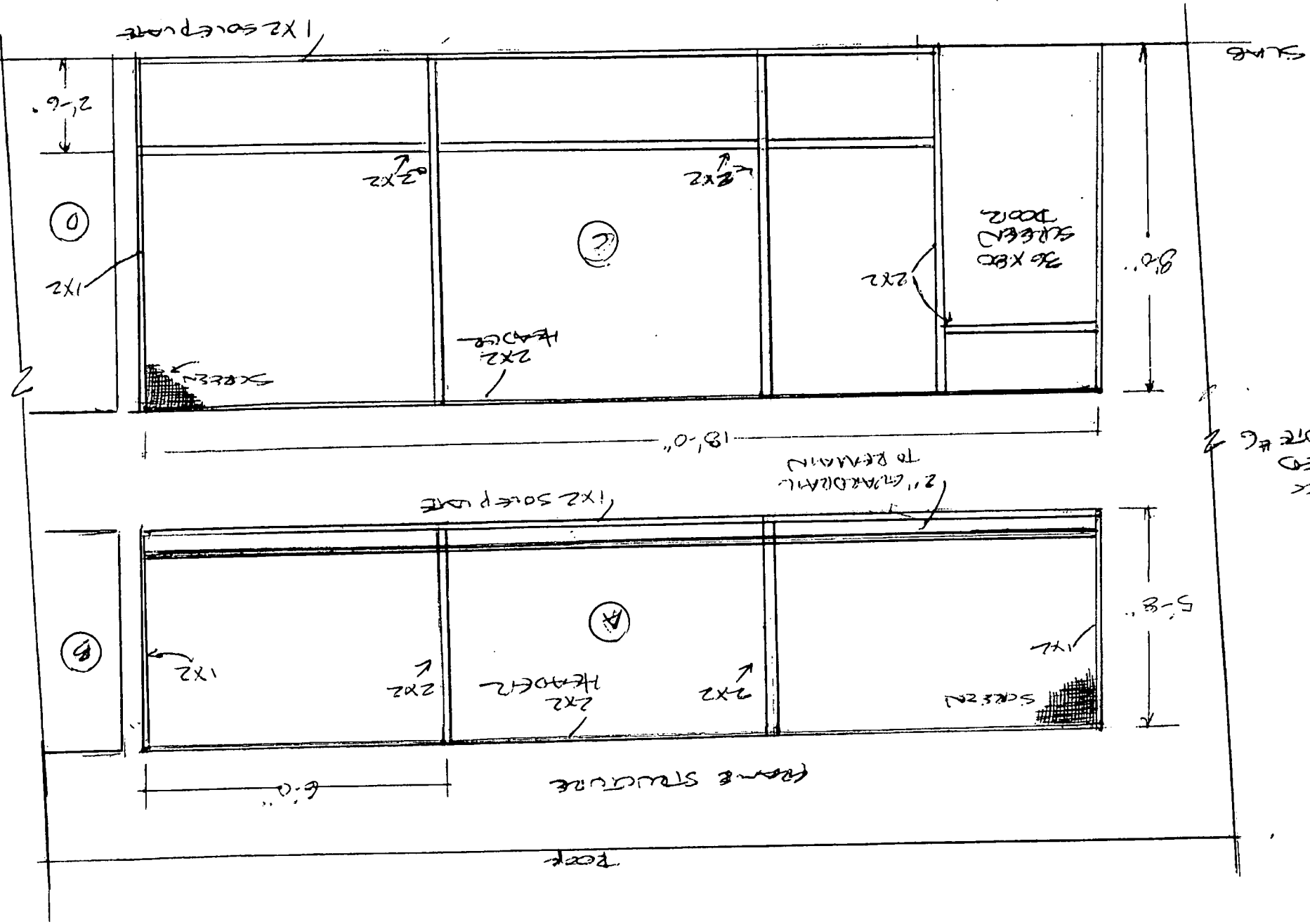
SCREEN WALL FRAMING

ALL FRAMING 1X2 OR 2X2 BRONZE
EXTENSION P40 MN GUDGE



THOMSON BROS.
137A S. RIVER RD

SCREEN WALL FRAMING Δ 1C



NOTE:
FRAMING
FASTENED
AS PER NOTE #6
PAGE 1.

SLAB

8'-0"

5'-8"

18'-0"

FRAME STRUCTURE

POOR

2x2
SCREEN
DOOR

2x2

2x2

2x2
HEADER

2x2

1x2 SOLEPLATE

2" GUARDRAIL
TO REMAIN

SCREEN

A

2x2
HEADER

2x2

2x2

1x2

6'-0"

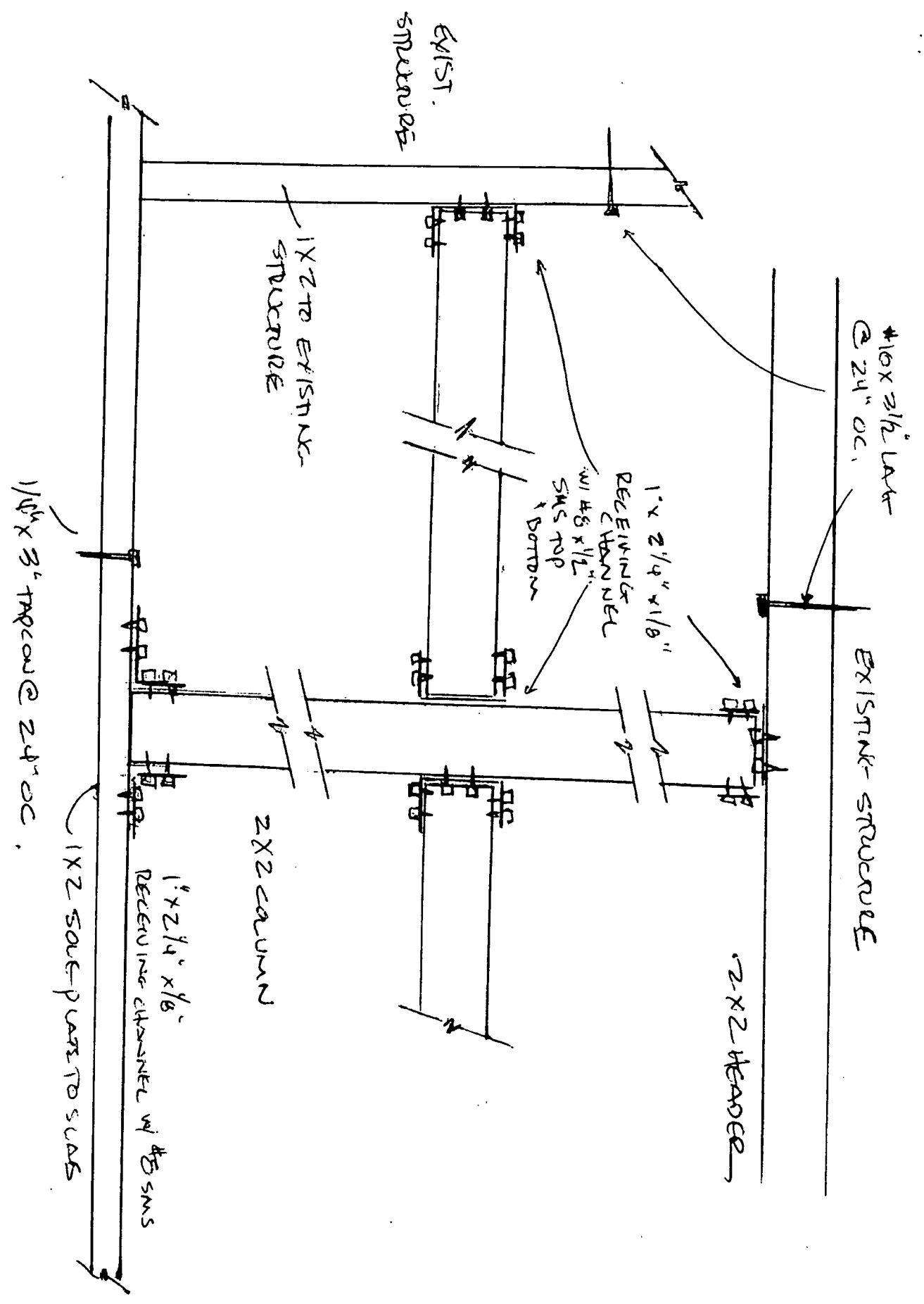
0

1x2

2'-6"

1x2 SOLEPLATE

ONE 1



TYPICAL FRAME CONNECTIONS

10084

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:	10084	DATE ISSUED:	MAY 4, 2012
SCOPE OF WORK:	AC CHANGEOUT		
CONTRACTOR:	NISAIR		
PARCEL CONTROL NUMBER:	133841010-000-000700	SUBDIVISION	KINGSTON CT - L7
CONSTRUCTION ADDRESS:	134 S RIVER RD		
OWNER NAME:	GIBSON		
QUALIFIER:	PHILIP NISA	CONTACT PHONE NUMBER:	466-8115

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

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

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

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	10084
ADDRESS	134 S RIVE RD - GIBSON
DATE 5/4/12	SCOPE OF WORK AC CHANGEOUT

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	

GULFSTREAM BUSINESS BANK
 2400 S.E. MONTEREY ROAD
 STUART, FL 34996

28098

63-4712/670
01

PERSONALIZED SERVICE INC
DBA NISAIR AIR CONDITIONING
 3700 S US HIGHWAY 1
 FORT PIERCE, FL 34982-8211
 1-877-764-7247

PAY TO THE ORDER OF

Town of Sewall's Point
Eighty four and no

\$ 84.-

DOLLARS

MEMO



Christine Mulvaney
Christine Mulvaney
 AUTHORIZED SIGNATURE

TOTAL BUILDING PERMIT FEE:	\$	
----------------------------	----	--

ACCESSORY PERMIT	Declared Value:	\$	7495
Total number of inspections @ \$75.00 each			75
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	2
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	2
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5
TOTAL ACCESSORY PERMIT FEE:		\$	84

84
CR# 28098

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

Date: 5-1-12 Permit Number: 10084

OWNER/TITLEHOLDER NAME: Stephen Gibson Phone (Day) _____ (Fax) _____

Job Site Address: 134 South River Rd City: Stuart State: FL Zip: 34996

Legal Description: Kingston Court Lot 7 Parcel Control Number: 13-38-41-010-000-00070-0

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

Scope of work (please be specific): AC Changeout

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: \$ 7495.00
(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

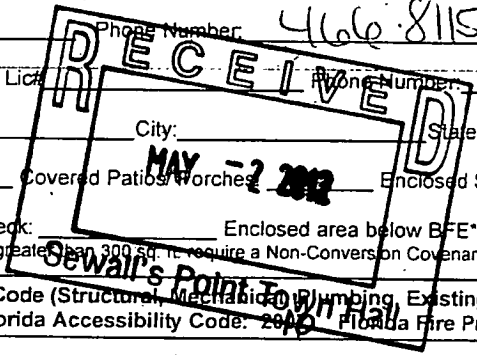
CONTRACTOR/Company: Nisa Jr A/c Phone: 466-8115 Fax: 468-9745
Street: 3700 S. US Hwy 1 City: A. Ponce State: FL Zip: 34982

State License Number: CA041199 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Philip Nisa Jr Phone Number: 466-8115

DESIGN PROFESSIONAL: _____ License 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): 2010 Edition
National Electrical Code: 2009 Florida Energy Code: 2009 Florida Accessibility Code: 2009 Florida Fire Prevention Code 2009

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.

OWNER SIGNATURE: (required)
OR OWNER'S LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Julie Gibson
State of Florida, County of: St. Lucie
This the 1 day of May, 2012
by Julie Gibson who is personally known to me or produced as identification.
NICHOLE L SIMMONS
NOTARY PUBLIC
STATE OF FLORIDA
My Commission Expires 10/2/2015 Comm# EE133197

CONTRACTOR SIGNATURE: (required)
Philip Nisa Jr
On State of Florida, County of: St. Lucie
This the 1 day of May, 2012
by Philip Nisa Jr who is personally known to me or produced as identification.
NICHOLE L SIMMONS
NOTARY PUBLIC
STATE OF FLORIDA
My Commission Expires 10/2/2015 Comm# EE133197

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

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

generated on 5/3/2012 1:12:02 PM EDT

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
13-38-41-010-000-00070-0	27857	134 S RIVER RD, SEWALL'S POINT	\$469,730	4/21/2012

Owner Information

Owner(Current)	GIBSON STEPHEN P GIBSON JULIE L
Owner/Mail Address	134 S RIVER RD STUART FL 34996-6328
Sale Date	6/24/1993
Document Book/Page	1018 1615
Document No.	
Sale Price	425000

Location/Description

Account #	27857	Map Page No.	SP-05
Tax District	2200	Legal Description	KINGSTON COURT LOT 7
Parcel Address	134 S RIVER RD, SEWALL'S POINT		
Acres	.4590		

Parcel Type

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

Assessment Information

Market Land Value	\$192,500
Market Improvement Value	\$277,230
Market Total Value	\$469,730



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 [checked] 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

2 @

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: Lennox Model# CBX270W-416 Condenser: Mfg Lennox Model# XC14-042

Volts 240 CFM's Heat Strip 10 Kw Volts 240 SEER/EER 16 BTU's

Min. Circuit Amps Wire gauge 6-2 Min. Circuit Amps Wire gauge 10-2

Max. Breaker size 60 Min. Breaker size 60 Max. Breaker size 40 Min. Breaker size 40

Ref. line size: Liquid 3/8 Suction 3/4 Ref. line size: Liquid 3/8 Suction 3/4

Refrigerant type R-410A Refrigerant type R-410A

Location: Existing [checked] New

Attic/Garage/Closet (specify) Garage Left/Right/Rear/Front/Roof

Access: Condensate Location

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: Lennox Model# TW6048 CO30M-46 Condenser: Mfg Lennox Model# H527-042 H527-042

Volts CFM's Heat Strip 10 Kw Volts SEER/EER BTU's

Min. Circuit Amps 40 Wire gauge 10-2 Min. Circuit Amps 40 Wire gauge 10-2

Max. Breaker size Min. Breaker size Max. Breaker size Min. Breaker size

Ref. line size: Liquid 3/8 Suction 3/4 Ref. line size: Liquid Suction

Refrigerant type R-22 Refrigerant type R-22

Location: Ext. [checked] New

Attic/Garage/Closet (specify) Left/Right/Rear/Front/Roof

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 [Handwritten Signature]

Date 5-1-12



FEATURES

Refrigerant System

Copper tube construction with enhanced ripple-edged aluminum fins.

Twin coil construction in an "A" configuration.

Factory installed R-410A or R-22 Check/Expansion Valve.

Controls

- 24 Volt Transformer
- Blower Cooling Relay
- Terminal Strip

Programmable Multi-speed Blower

High efficiency, multi-speed ECM (Electronically Commutated Motor) with electronic braking.

Cabinet

Up-Flow / Horizontal Configuration
Shipped in one piece but can be separated for ease of installation.

Pre-painted cabinet finish.

Fully insulated cabinet with thick fiberglass insulation.

Tool-less access to disposable, frame-type filter

Limited Warranty

All covered components - five years
Refer to Lennox Equipment Limited Warranty certificate included with equipment for details



OPTIONAL ACCESSORIES

See Page 16

Cabinet

- Down-Flow Combustible Base
- Down-Flow Conversion Kit
- Horizontal Support Frame Kit
- Side Return Unit Stand (Up-Flow)
- Side Return Filter Adaptor (CB30U)
- Wall Hanging Bracket Kit (Up-Flow)

Controls

- Thermostat

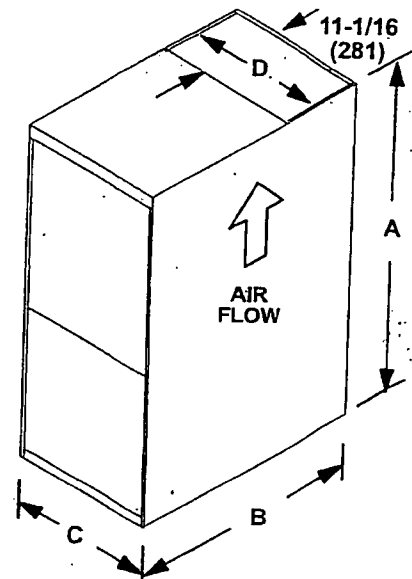
ELECTRIC HEAT

See Page 15

- Electric Heat
- Circuit Breaker Cover Kit
- Single-Point Power Source Control Box

DIMENSIONS - in. (mm)

		-018	-030	-042	-060
		-024	-036	-048	
A		49-1/4 (1251)	51 (1295)	58-1/2 (1486)	52-1/2 (1588)
		20-5/8 (524)	22-5/8 (575)	24-5/8 (625)	24-5/8 (625)
B		21-1/4 (540)	21-1/4 (540)	21-1/4 (540)	21-1/4 (540)
		19-3/4 (502)	19-3/4 (502)	19-3/4 (502)	19-3/4 (502)
Return Air	Width	20 (508)	20 (508)	20 (508)	20 (508)
	Depth	19 (483)	21 (533)	23 (584)	23 (584)



NOTE - Due to Lennox' ongoing commitment to quality, Specifications, Ratings and Dimensions subject to change without notice and without incurring liability. Improper installation, adjustment, alteration, service or maintenance can cause property damage or personal injury. Installation and service must be performed by a qualified installer and servicing agency.

SPECIFICATIONS

General Data	R-22 Model Number	CB27UH-018	CB27UH-024	CB27UH-030	CB27UH-036
	R-410A Model Number	CBX27UH-018	CBX27UH-024	CBX27UH-030	CBX27UH-036
	Nominal Size - Tons	1.5	2.5	3	3
Connections	Suction (vapor) line (o.d.) - in. sweat	3/4	3/4	3/4	3/4
	Liquid line (o.d.) - in. sweat	3/8	3/8	3/8	3/8
	Condensate - in. fpt	(2) 3/4	(2) 3/4	(2) 3/4	(2) 3/4
Blower	Wheel nominal diameter x width - in.	10 x 8	10 x 8	11 x 8	11 x 8
	Blower motor output - hp	1/2	1/2	1/2	1/2
	Air Volume Range - cfm	170-1010	320-1190	360-1365	515-1555
¹ Filters	Size of filter - in.	20 x 20 x 1	20 x 20 x 1	20 x 20 x 1	20 x 22 x 1
Shipping Data -1 package lbs.		148	148	159	159

ELECTRICAL DATA

	Voltage - phase	208/230V-1ph	208/230V-1ph	208/230V-1ph	208/230V-1ph
³ Maximum overcurrent protection (unit only)		15	15	15	15
Minimum circuit ampacity (unit only)		2	2	2	2
Blower Motor Full Load Amps		1.5	1.73	1.73	1.72

¹ Disposable frame type filter.
³ HACR type circuit breaker or fuse.

SPECIFICATIONS

General Data	R-22 Model Number	CB27UH-042	CB27UH-048	CB27UH-060
	R-410A Model Number	CBX27UH-042	CBX27UH-048	CBX27UH-060
	Nominal tonnage	3.5	4	5
Connections	Suction (vapor) line (o.d.) - in. sweat	7/8	7/8	7/8
	Liquid line (o.d.) - in. sweat	3/8	3/8	3/8
	Condensate - in. fpt	(2) 3/4	(2) 3/4	(2) 3/4
Blower	Wheel nominal diameter x width - in.	12 x 9	12 x 9	12 x 9
	Blower motor output - hp	1	1	1
	Air Volume Range	825-1815	810-1860	965-2365
¹ Filters	Size of filter - in.	20 x 24 x 1	20 x 24 x 1	20 x 24 x 1
Shipping Data -1 package lbs.		194	194	216

ELECTRICAL DATA

	Voltage - phase	208/230V-1ph	208/230V-1ph	208/230V-1ph
³ Maximum overcurrent protection (unit only)		15	15	15
Minimum circuit ampacity (unit only)		3	3	5
Blower Motor Full Load Amps		2.4	2.4	3.9

¹ Disposable frame type filter.
³ HACR type circuit breaker or fuse.



FEATURES

Refrigerant System

Scroll Compressor
Compressor sound-dampening system
Non-chlorine, ozone friendly, R-410A refrigerant.
Copper tube construction with enhanced ripple-edged aluminum fins.
Units applicable to expansion valve systems or RFC systems when matched with specific indoor coils.
Fully serviceable brass service valves.
Factory installed, hi-capacity liquid line drier
Totally enclosed, direct drive outdoor fan motor with sleeve bearings.
PVC coated, steel fan guard.

Controls

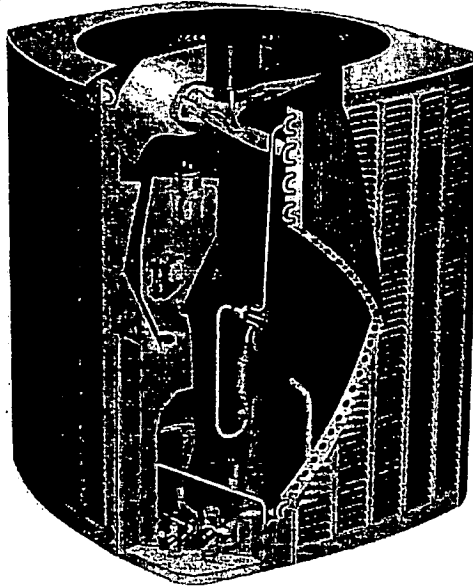
High Pressure Switch.

Cabinet

Heavy-gauge galvanized steel cabinet with powder paint finish.
SmartHinge™ Louvered Coil Protection
Corner patch plate allows access to compressor.

Limited Warranty

Compressor - ten years
All covered components - five years
Refer to Lennox Equipment Limited Warranty certificate included with equipment for details



ARI RATINGS

See Page 50 - Page 75

OPTIONAL ACCESSORIES

See Page 19

Compressor

- Compressor Crankcase Heater
- Compressor Hard Start Kit
- Compressor Low Ambient Cut-Off
- Compressor Time-Off Control

Controls

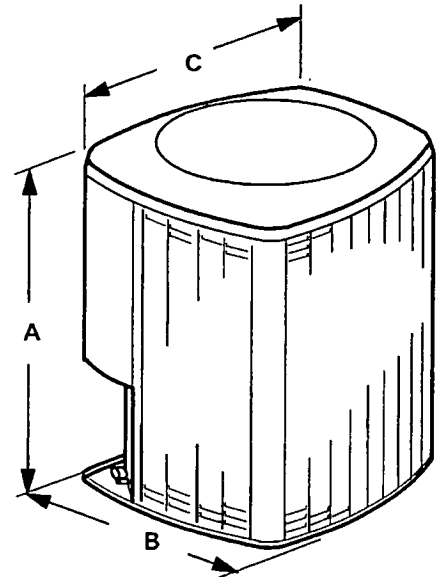
- Freezestat
- Indoor Blower Off Delay Relay
- Loss of Charge Switch Kit
- Low Ambient Kit
- Thermostat

Refrigerant System

- Expansion Valve Kits
- Refrigerant Line Kits

DIMENSIONS - in. (mm)

Model No.	A	B	C
XC14-018	31 (787)	27 (729)	28 (711)
XC14-024	31 (787)	27 (729)	28 (711)
XC14-030	31 (787)	30-1/2 (775)	35 (889)
XC14-036	31 (787)	30-1/2 (775)	35 (889)
XC14-042	31 (787)	30-1/2 (775)	35 (889)
XC14-048	39 (991)	30-1/2 (775)	35 (889)
XC14-060	35 (889)	35-1/2 (902)	39-3/8 (1000)



ARI Standard
210/240 UAC



NOTE - Due to Lennox' ongoing commitment to quality, Specifications, Ratings and Dimensions subject to change without notice and without incurring liability. Improper installation, adjustment, alteration, service or maintenance can cause property damage or personal injury. Installation and service must be performed by a qualified installer and servicing agency.

SPECIFICATIONS

General Data	Model No. Nominal Tonnage	XC14-018	XC14-024	XC14-030	XC14-036	XC14-042	XC14-048	XC14-060
1 Sound Rating Number (dB)		71	71	71	70	73	73	73
Connections (sweat)	Liquid line o.d. - in.	3/8	3/8	3/8	3/8	3/8	3/8	3/8
	Suction line o.d. - in.	3/4	3/4	3/4	7/8	7/8	7/8	1-1/8
2 Refrigerant (R-410A) furnished		6 lbs. 12 oz.	7 lbs. 10 oz.	8 lbs. 0 oz.	8 lbs. 9 oz.	8 lbs. 10 oz.	10 lbs. 0 oz.	12 lbs. 0 oz.
Outdoor Fan	Diameter - in.	18	18	22	22	22	22	26
	Number of blades	4	4	4	4	4	4	4
	Motor hp.	1/5	1/5	1/6	1/6	1/4	1/4	1/3
Shipping Data - lbs. 1 package		181	183	213	215	243	272	290

ELECTRICAL DATA

Line voltage data - 60 hz - 1ph	208/230V	208/230V	208/230V	208/230V	208/230V	208/230V	208/230V
3 Maximum overcurrent protection (amps)	20	30	30	30	40	50	60
4 Minimum circuit ampacity	12.3	17.9	17.2	18.7	24.1	29.0	34.8
Compressor Rated load amps	9.0	13.4	12.9	14.1	17.9	21.8	26.4
Outdoor Fan Motor Full load amps	1.0	1.0	1.1	1.1	1.7	1.7	1.8

NOTE - Extremes of operating range are plus 10% and minus 5% of line voltage.

- 1 Sound Rating Number rated in accordance with test conditions included in ARI Standard 270.
- 2 Refrigerant charge sufficient for 15 ft. length of refrigerant lines.
- 3 HACR type breaker or fuse.
- 4 Refer to National or Canadian Electrical Code manual to determine wire, fuse and disconnect size requirements.

THE METAL SHOP

Custom Metal Manufacturer

ANCHOR CLIPS Installer's Guide

Consulting Engineer:

Douglas W. Lowe, P.E.
FLA# 13355
1206 Millennium Parkway
Brandon, FL 33511

WARNING: HAZARDOUS VOLTAGE - DISCONNECT POWER BEFORE SERVICING

PART NUMBER

#771 (4 pk)

#772 (100 box)

#773 (4 pk including hardware)

CONSTRUCTION

16 gauge galvanized steel, G-90 rated for corrosion coastal applications.

PACKAGING DETAILS

All anchor clips are supplied as per package quantities described above.

INSTALLATION

Minimum of 4 clips required per condenser unit.
Minimum of 2 #14 x 3/4" screws with neoprene washer required to fasten clip to condenser unit.

1/4" x 1 3/4" Tapcon screw required to fasten clip to condenser pad.

Locate the anchor clips to fit comfortably between condenser unit and pad.

Adjust clip accordingly to fit on condenser unit and screw together, at the same time ensuring that the base of the clip is still in contact with the pad.

All hardware must be fastened prior to connecting refrigerant lines and electrical power to the unit.
Suitable for ground mounted units.

Anchor clip design meets requirements of The Florida Building Code 2007 (Building)

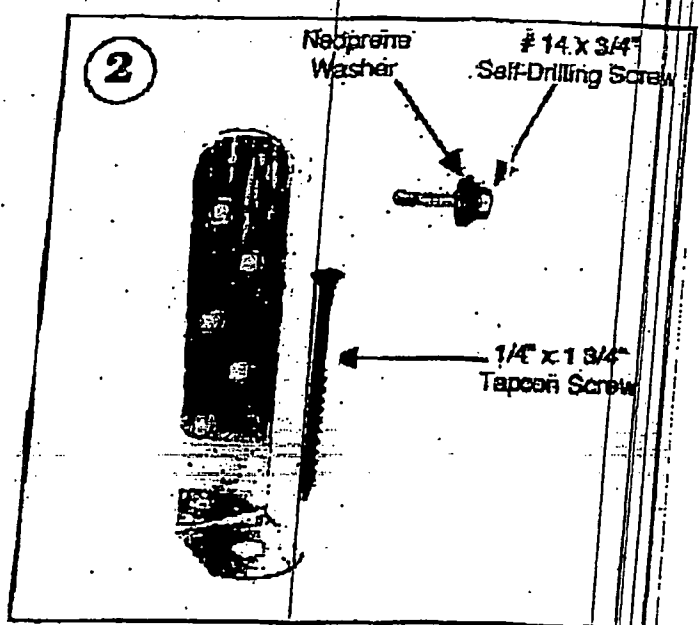
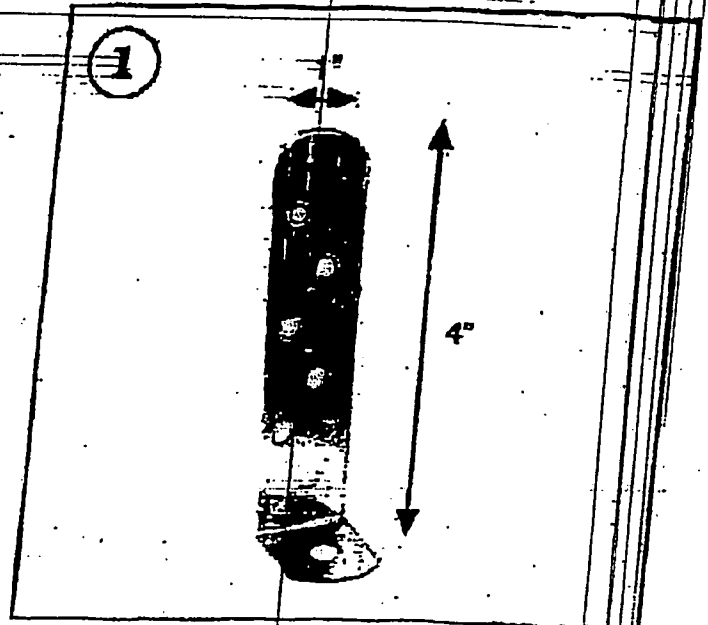
Chapter 901.12 for wind resistance up to 140 MPH.

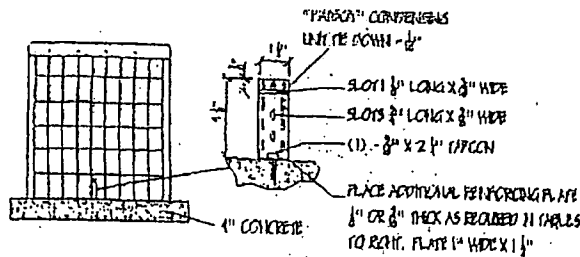
FEATURES

The use of "sized to fit" screw holes compared to slots means that security is never compromised. A tight secure fit between pad and condenser ensures security for the condenser and offers great assurance during extreme weather conditions.

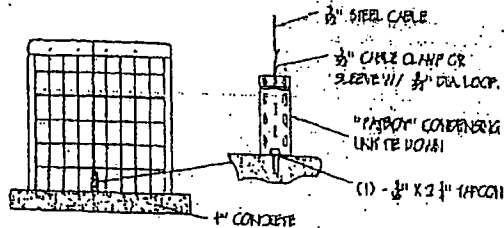
NOTE

Above installation instruction suitable for up to 5 ton units.

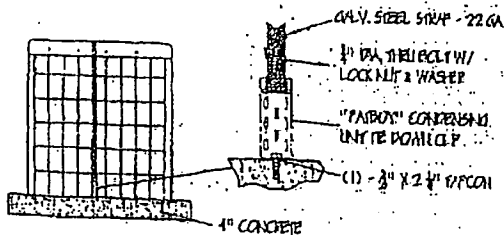




"FATBOY" INSTALLATION GUIDE



"FATBOY" CABLE INSTALLATION GUIDE



"FATBOY" STRAP INSTALLATION GUIDE

NOTE: SEE TABLES FOR WIND VELOCITY AND HEIGHT OF INSTALLATION ABOVE GROUND. ALSO SEE TABLES FOR CONNECTION TYPE WHEN ATTACHING TO ALUMINUM OR STEEL.

FLOOR LEVEL HEIGHT	10 MPH WIND VELOCITY WINDS OF STEEL TO 1/4\"/>		
	CONNECTION TO CONCRETE	CONNECTION TO ALUMINUM	CONNECTION TO STEEL
0-15'	2	2	2
20'	2	2	2
30'	2	2	2
40'	2	2	2
50'	2	2	2
60'	2	2	2
ADDITIONAL PLATE			
0-15'	1	2	1
20'	1	2	1
30'	1	2	1
40'	1	2	1
50'	1	2	1
60'	1	2	1

ADDITIONAL PLATE	10 MPH WIND VELOCITY WINDS OF STEEL TO 1/4\"/>		
	CONNECTION TO CONCRETE	CONNECTION TO ALUMINUM	CONNECTION TO STEEL
0-15'	1	2	1
20'	1	2	1
30'	1	2	1
40'	1	2	1
50'	1	2	1
60'	1	2	1
ADDITIONAL PLATE			
0-15'	1	2	1
20'	1	2	1
30'	1	2	1
40'	1	2	1
50'	1	2	1
60'	1	2	1

GENERAL NOTES:

1- ATTACHMENT TO CONCRETE SHALL BE BY MEANS OF (CON) 1/2\"/>

2- CONCRETE TO WHICH ATTACHMENT OF CLIP IS MADE SHALL HAVE A COMPRESSIVE STRENGTH OF 4000 PSI.

3- STEEL STRAPS OVER 2\"/>

4- THE STEEL STRAP SHALL BE 1\"/>

5- ANGLE CLIP USED IN ATTACHING THE STRAP TO THE SUPPORTING STRUCTURE SHALL BE AS MANUFACTURED BY THE ORIGINAL FAN COMPANY, 3525 N.W. 77 STREET, MIAMI, FLORIDA, 33146 AND AS DETAILLED IN THIS DRAWING.

6- ATTACHMENT OF CLIP TO ALUMINUM SHALL BE BY USING A RODRING BOLT AS SEPARATOR BETWEEN CLIP AND SUPPORTING ALUMINUM STRUCTURE AND USE OF A 1/2\"/>

7- ATTACHMENT OF CLIP TO SUPPORTING STEEL STRUCTURE SHALL BE BY A 1/2\"/>

8- ADDITIONAL PLATE USED AS REINFORCING SHALL BE EQUAL SPECIFICATION AS CLIP AND BE DRILLED WITH ONLY ONE HOLE. MAXIMUM 1/2\"/>

9- USE OF CABLE INSTEAD OF STEEL STRAP SHALL CONFORM TO FEDERAL SPECIFICATION RE-W-44A INCLUDING ADDITIONAL STRENGTH REQUIREMENTS OF MIL-W-44000 AS SPECIFIED BY ELITE SAILS INC. WITH A BREAKING STRENGTH OF 150 LBS. AND HAVE A MINIMUM DIAMETER OF 1/2\"/>

10- ATTACHING CLAMP SHALL BE 1/2\"/>

11- ANCHORS THAT CONFORM TO THE SPECIFIED ATTACHMENT SHALL BE NO LARGER THAN 3/4\"/>

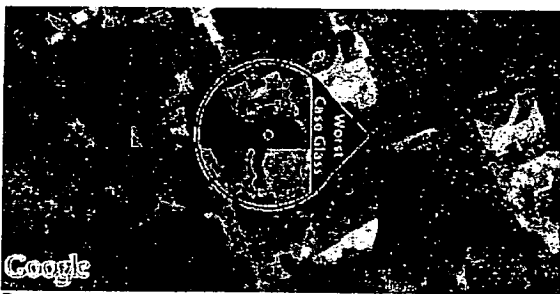
REVISIONS	BY



A/C UNIT ANCHORING DETAILS
 FATBOY CLIPS AS
 MANUFACTURED BY: THE
 ORIGINAL FAN CO. FOR USE
 UNDER FLORIDA BUILDING CODE

DRAWN:	AAA
CHECKED:	AA
DATE:	0-04-07
SCALE:	AS NOTED
JOB NO.:	
SHEET:	S-1

System #1



Rotate to find worst case glass:

< Rotate Rotate >

Adjust square footage of window area on this home.

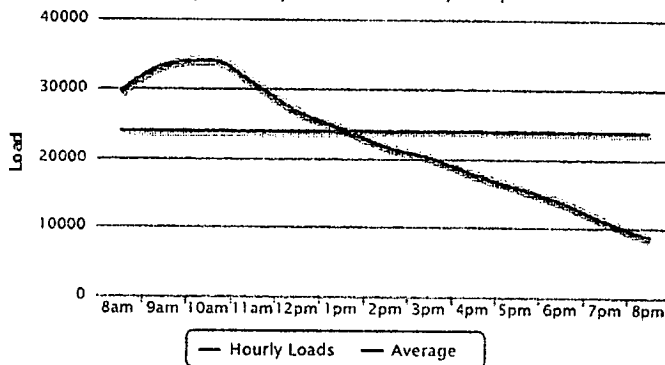
E 17 N 17 S 86 W
Shading %

House Information	
What is the conditioned square footage of your house?: Square feet: 1700	<input type="text"/>
When was your house built?	<input type="radio"/> Before 1990 <input type="radio"/> Between 1990 - 2000 <input type="radio"/> After 2000
How do you want insulation values displayed?	<input type="radio"/> R <input type="radio"/> U
Winter Electricity Rate	0.1
Summer Electricity Rate	0.1
Natural Gas Rate	1.2
Propane Rate	2.5
Oil Rate	2.3
Summer indoor design temperature	75 <input type="button" value="+"/> <input type="button" value="-"/>
Summer outdoor design temperature	90 <input type="button" value="+"/> <input type="button" value="-"/>
Winter indoor design temperature	70 <input type="button" value="+"/> <input type="button" value="-"/>
Winter outdoor design temperature	47 <input type="button" value="+"/> <input type="button" value="-"/>
SHR	.75
Number of Residents	2 <input type="button" value="+"/> <input type="button" value="-"/>
Average Ceiling Height	9 <input type="button" value="+"/> <input type="button" value="-"/>
Wall R-Value	11.11 <input type="button" value="+"/> <input type="button" value="-"/>
Floor R-Value	5.00 <input type="button" value="+"/> <input type="button" value="-"/>
Ceiling R-Value	18.87 <input type="button" value="+"/> <input type="button" value="-"/>
Window U-Value	1 <input type="button" value="+"/> <input type="button" value="-"/>

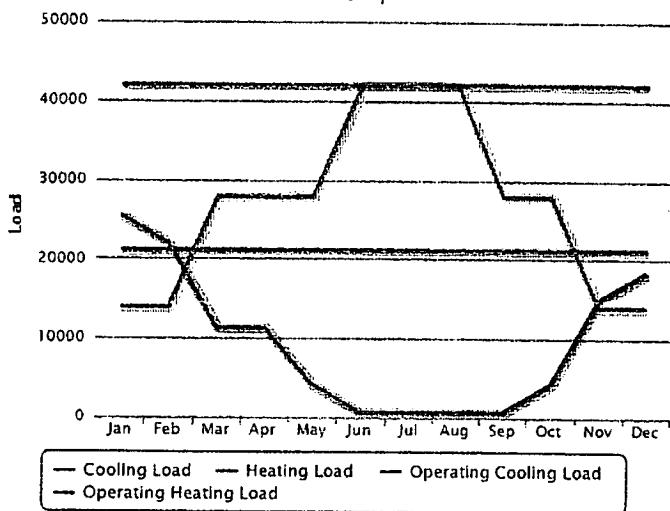
House Loads

Cooling Load: 42,026
Heating Load: 21,224

Adequate Exposure Diversity Graph

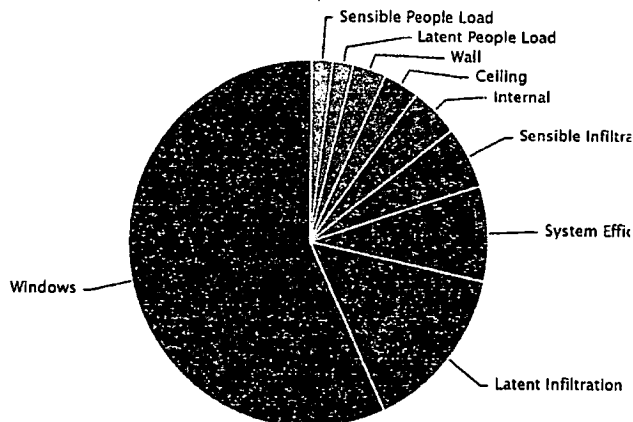


Loads Graph

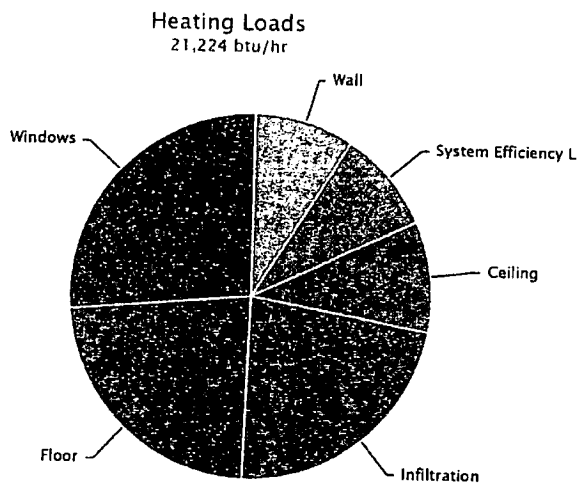


Cooling Loads

42,026 btu/hr



Single Pane = .1 Double Pane = .5 Triple Pane = .3		
Window SHGF Clear = 1-.85 Low-E = .6-.4	.92	<input type="checkbox"/> + <input type="checkbox"/> -
Grains of moisture difference	64	<input type="checkbox"/> + <input type="checkbox"/> -
Duct Loss %	10	<input type="checkbox"/> + <input type="checkbox"/> -
Duct Gain %	10	<input type="checkbox"/> + <input type="checkbox"/> -
Cooling Infiltration Rate (ACH)	0.6	<input type="checkbox"/> + <input type="checkbox"/> -
Heating Infiltration Rate (ACH)	0.8	<input type="checkbox"/> + <input type="checkbox"/> -
Winter Ventilation	0	<input type="checkbox"/> + <input type="checkbox"/> -
Summer Ventilation	0	<input type="checkbox"/> + <input type="checkbox"/> -
Floors		



Customer Information:

Fill in the customer information

Name:

Stephen Gibson

Email:

example@mail.com

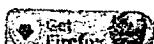
Phone:

772-286-5258

Get Proposal

Thanks to Zillow.com we were able to preset these values for you. If they are not correct please change them.

For best performance, make sure you are using the latest version of your browser:



[Download Compliance Report.](#)

[Download Florida code compliance report.](#)

The Rheem DesignStar Load Calculation Program results are intended for use with Rheem Heating and Cooling systems only.

All calculations are based upon approved hvac industry standards and procedures, and comply with all local, state and federal code requirements. All computed results are Estimates. Product provided by Energy Design Systems and Idea Tree.



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2011.

Certificate of Product Ratings

AHRI Certified Reference Number: 3869134

Date: 5/1/2012

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

Outdoor Unit Model Number: XC14-041-230*

Indoor Unit Model Number: CBX27UH-048-230*+TDR

Manufacturer: LENNOX INDUSTRIES, INC.

Trade/Brand name: XC14 SERIES

Manufacturer responsible for the rating of this system combination is LENNOX INDUSTRIES, INC.

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

Cooling Capacity (Btuh):	39000
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.00

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

DISCLAIMER

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

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CERTIFICATE VERIFICATION

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



Air-Conditioning, Heating, and Refrigeration Institute

OK JFWP
10084

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

Owner:	<u>Stephen P. Gibson</u>	Contractor name:	<u>NisAir Air Conditioning</u>
Street address:	<u>134 S. River Road</u>	Jurisdiction:	_____
City:	<u>Stuart FL</u>	Permit No.:	_____
Zip:	<u>34996</u>	Final inspection date:	_____

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

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

Signature:  Date: 5-8-12

Printed Name: JAMES HARMON

Contractor License #: CACO41199

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

Signature: _____ Date: _____

Printed Name: _____

on JFW

FLORIDA ENERGY CONSERVATION CODE

Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912)

Owner:	<u>Stephen P. Gibson</u>	Contractor name:	<u>NisAir Air Conditioning</u>
Street address:	<u>134 S. River Road</u>	Jurisdiction:	_____
City:	<u>Stuart FL 34996</u>	Permit No.:	_____
Zip:	<u>34996</u>	Final inspection date:	_____

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

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

Signature: *James Larkin* Date: 8-8-12

Printed Name: JAMES LARKIN

Contractor License #: CACO41199

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

Signature: _____ Date: _____

Printed Name: _____

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 3-24-12 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9884	Creeden	Final rough electrical		
PM	176 S Sewalls MTK Const	Final plumbing	Pass	
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10088	Giacchino	Slab		
830	11 Rio Vista Dr Glenmark		Pass	
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10084	Gibson	Final		
PM	134 S Green Rd Nislin	etc	Pass	
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10101	Starfi	Door rough		
	3601 SE Ocean A Worell		Fail	WRONG SCREW HEADS
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
3:30	OTT			
				INSPECTOR



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 Julie Gibson Address [REDACTED] Phone 286.5258

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE 1 Type: ?

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

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

Reason for tree removal/relocation dead or dying

Signature of Property Owner Julie Lang Gibson Date 16 September, 2008

Approved by Building Inspector: [Signature] Date 9/16/08 Fee: n/c

NOTES: DEAD OAK TREE

