

157 South River Road

RECEIVED

JUN 20 1984

TOWN OF SEWALL'S POINT FLORIDA

Permit No. 1720

Date _____

APPLICATION FOR A PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

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

Owner MR + MRS DENNIS HUDSON JR Present address 234 NE EDG WATER DR

Phone 225-1128 APT 201 STUART

General contractor LOWERY INC Address PO Box 101

Phone 287-4076 Palm City, Fla

Where licensed MARTIN CO License No. 102

Plumbing contractor SO PARK PLUMB License No. ON FILE # 49

Electrical contractor HURLEY ELECT License No. " "

Air-conditioning contractor PERSONALIZE AIR License No. " " # 160

Describe the building, or alteration to existing building NEW RESIDENCE

Name the street on which the building, its front building line and its front yard will face 157 SOUTH RIVER ROAD

Subdivision HANSON GRANT Lot No. 7 Area _____

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet 2676

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 107,040

Cost of permit \$ 5367.30 ^{\$566} Plans approved as submitted _____ or, as marked

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

ALL DEBRIS MUST BE CONTAINED IN A DUMPSTER

Contractor Bob Lowmy

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 Dennis A. Hudson

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

TOWN RECORD

Date submitted _____

Approved by Building Inspector (date) 7/5/84 Inspector's initials JAM

Approved by Town Commissioner (date) 7/5/84 Commissioner's initials AS

Certificate of Occupancy issued (date) _____

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

MARTIN COUNTY
CONTRACTORS
CERTIFICATE OF COMPETENCY

Effective October 1, 19 93 through September 30, 19 94

NAME THOMAS B. WINTERCORN
FIRM SOUTH PARK PLUMBING
ADDRESS PO Box 768
Pt. Salerno, FL 33492

CERTIFIED
CONTRACTOR

MASTER PLUMBER

AUDIT
CONTROL

Nº 5685

CERTIFICATE NUMBER

00049



Oxford

STOCK No. 753 1/3

MADE IN U. S. A.

Certificate of Insurance

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



NAME AND ADDRESS OF AGENCY
GROUP, INC.
 P.O. Box 1748
 Clewiston, Florida 33440

COMPANIES AFFORDING COVERAGES	
COMPANY LETTER A	FCCI
COMPANY LETTER B	
COMPANY LETTER C	
COMPANY LETTER D	
COMPANY LETTER E	

NAME AND ADDRESS OF INSURED
HURLEY ELECTRIC
 6491 Clairemont
 Stuart, Florida 33494

This is to certify that policies of insurance listed below have been issued to the insured named above and are in force at this time. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.

COMPANY LETTER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EXPIRATION DATE	Limits of Liability in Thousands (000)		
					EACH OCCURRENCE	AGGREGATE
	GENERAL LIABILITY <input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> PREMISES—OPERATIONS <input type="checkbox"/> EXPLOSION AND COLLAPSE HAZARD <input type="checkbox"/> UNDERGROUND HAZARD <input type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS HAZARD <input type="checkbox"/> CONTRACTUAL INSURANCE <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input type="checkbox"/> INDEPENDENT CONTRACTORS <input type="checkbox"/> PERSONAL INJURY			BODILY INJURY	\$	\$
				PROPERTY DAMAGE	\$	\$
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
				PERSONAL INJURY		\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON-OWNED			BODILY INJURY (EACH PERSON)	\$	
				BODILY INJURY (EACH ACCIDENT)	\$	
				PROPERTY DAMAGE	\$	
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM			BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
A	WORKERS' COMPENSATION and EMPLOYERS' LIABILITY OTHER	7-18-2275	12/31/83	STATUTORY	\$	Unlimited (EACH OCCURRENCE)

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES

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

NAME AND ADDRESS OF CERTIFICATE HOLDER:
LOWERY CONSTRUCTION
 P.O. Box 101
 Palm City, Florida 33490

DATE ISSUED: January 27, 1983

 AUTHORIZED REPRESENTATIVE
John Hughes

Certificate of Insurance



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

NAME AND ADDRESS OF AGENCY James/Hawkins & Associates, Inc. P.O. Box 259001 Boynton Beach, FL 33425-9001	COMPANIES AFFORDING COVERAGES COMPANY LETTER A Central Mutual Insurance Co. COMPANY LETTER B All America Insurance Co.
NAME AND ADDRESS OF INSURED Personalized Air Conditioning of Stuart, Inc. 1259 S.W. 34th Street Palm City, FL 33490	COMPANY LETTER C COMPANY LETTER D COMPANY LETTER E

This is to certify that policies of insurance listed below have been issued to the insured named above and are in force at this time. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies.

COMPANY LETTER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EXPIRATION DATE	Limits of Liability in Thousands (000)		
					EACH OCCURRENCE	AGGREGATE
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMPREHENSIVE FORM <input checked="" type="checkbox"/> PREMISES—OPERATIONS <input type="checkbox"/> EXPLOSION AND COLLAPSE HAZARD <input type="checkbox"/> UNDERGROUND HAZARD <input type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS HAZARD <input type="checkbox"/> CONTRACTUAL INSURANCE <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input checked="" type="checkbox"/> INDEPENDENT CONTRACTORS <input checked="" type="checkbox"/> PERSONAL INJURY	SMP 7677829	1/1/85	BODILY INJURY	\$ 300,	\$ 300,
				PROPERTY DAMAGE	\$ 100,	\$ 100,
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
				PERSONAL INJURY		\$ 300,
	AUTOMOBILE LIABILITY <input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON OWNED			BODILY INJURY (EACH PERSON)	\$	
				BODILY INJURY (EACH ACCIDENT)	\$	
				PROPERTY DAMAGE	\$	
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM			BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
B	WORKERS' COMPENSATION and EMPLOYERS' LIABILITY	WC 7612186	1/1/85	STATUTORY		
					\$ 100,	(EACH ACCIDENT)
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES

Air Conditioning - State of Florida

Cancellation: 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 below named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company.

NAME AND ADDRESS OF CERTIFICATE HOLDER: Lowery Construction P.O. Box 101 Palm City, FL 33490

DATE ISSUED: January 13, 1984

AUTHORIZED REPRESENTATIVE



CERTIFICATE OF INSURANCE

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

6/28/84

PRODUCER

kick Carroll Insurance Agency
P.O. box 877
Jensen beach, Fl. 33457

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	Utica Mutual Ins. Co.
COMPANY LETTER B	
COMPANY LETTER C	
COMPANY LETTER D	
COMPANY LETTER E	

INSURED

Lowery Construction
Harris Lowery III
P.O. box 101
Palm City, Fl. 33490

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	GENERAL LIABILITY	GLA052750	3/31/84	3/31/85	BODILY INJURY	\$ 300,	\$ 300,
	PREMISES/OPERATIONS UNDERGROUND EXPLOSION & COLLAPSE HAZARD PRODUCTS/COMPLETED OPERATIONS CONTRACTUAL INDEPENDENT CONTRACTORS BROAD FORM PROPERTY DAMAGE PERSONAL INJURY				PROPERTY DAMAGE	\$ 50,	\$ 50,
					BI & PD COMBINED	\$	\$
					PERSONAL INJURY	\$	\$
	AUTOMOBILE LIABILITY				BODILY INJURY (PER PERSON)	\$	\$
	ANY AUTO ALL OWNED AUTOS (PRIV. PASS.) ALL OWNED AUTOS (OTHER THAN PRIV. PASS.) HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY				BODILY INJURY (PER ACCIDENT)	\$	\$
					PROPERTY DAMAGE	\$	\$
					BI & PD COMBINED	\$	\$
	EXCESS LIABILITY				BI & PD COMBINED	\$	\$
	UMBRELLA FORM OTHER THAN UMBRELLA FORM						
A	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY	W.252961-83	1/20/84	1/20/85	STATUTORY	\$ 100, (EACH ACCIDENT)	\$ (DISEASE-POLICY LIMIT)
					\$ (DISEASE-EACH EMPLOYEE)		
	OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

Contractor
State of Florida

CERTIFICATE HOLDER

Town of Sewalls Point

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Kenneth L. Carroll

mr



CERTIFICATE OF INSURANCE

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

4/11/84

PRODUCERTEQUESTA AGENCY, INC.
393 TEQUESTA DRIVE
TEQUESTA, FLORIDA 33458-3098

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 COVERAGECOMPANY LETTER **A** AETNA CASUALTY & SURETY COMPANYCOMPANY LETTER **B**COMPANY LETTER **C**COMPANY LETTER **D**COMPANY LETTER **E****INSURED**SOUTH PARK PLUMBING, THOMAS WINTERCORN
D/B/A AND SOUTH PARK PLUMBING, INC.
POST OFFICE BOX 768
PORT SALERNO, FLORIDA 33492**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	GENERAL LIABILITY	23 MP 176209	04-01-84	04-01-85	BODILY INJURY	\$	\$
	<input checked="" type="checkbox"/> COMPREHENSIVE FORM				PROPERTY DAMAGE	\$	\$
	<input type="checkbox"/> PREMISES/OPERATIONS UNDERGROUND EXPLOSION & COLLAPSE HAZARD PRODUCTS/COMPLETED OPERATIONS				BI & PD COMBINED	\$ 300	\$ 300
	<input type="checkbox"/> CONTRACTUAL				PERSONAL INJURY		\$
	<input type="checkbox"/> INDEPENDENT CONTRACTORS						
	<input type="checkbox"/> BROAD FORM PROPERTY DAMAGE						
	<input type="checkbox"/> PERSONAL INJURY						
A	AUTOMOBILE LIABILITY	23 PJ 048390	04-01-84	04-01-85	BODILY INJURY (PER PERSON)	\$	
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (PER ACCIDENT)	\$	
	<input checked="" type="checkbox"/> ALL OWNED AUTOS (PRIV. PASS.)				PROPERTY DAMAGE	\$	
	<input checked="" type="checkbox"/> ALL OWNED AUTOS (OTHER THAN PRIV. PASS.)				BI & PD COMBINED	\$ 500	
	<input checked="" type="checkbox"/> HIRED AUTOS						
	<input checked="" type="checkbox"/> NON-OWNED AUTOS						
	GARAGE LIABILITY						
	EXCESS LIABILITY				BI & PD COMBINED	\$	\$
A	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY	23 CB 50701	04-01-84	04-01-85	STATUTORY		
					\$100	(EACH ACCIDENT)	
					\$100	(DISEASE-POLICY LIMIT)	
	OTHER				\$500	(DISEASE-EACH EMPLOYEE)	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDERLOWERY CONSTRUCTION
POST OFFICE BOX 101
PALM CITY, FLORIDA 33490**CANCELLATION**

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

AUTHORIZED REPRESENTATIVE

MARTIN COUNTY
CONTRACTORS
CERTIFICATE OF COMPETENCY

Effective October 1, 19 83 through September 30, 19 84

NAME JIM HURLEY
FIRM HURLEY ELECTRIC, INC.
ADDRESS 6491 SE Clairmont Place
Hobe Sound, FL 33455

CERTIFIED
CONTRACTOR MASTER ELECTRICIAN

AUDIT
CONTROL

No 6222

CERTIFICATE NUMBER
00071



Oxford
STOCK No. 753 1/3

MADE IN U. S. A.

**MARTIN COUNTY
CONTRACTORS
CERTIFICATE OF COMPETENCY**

Effective October 1, 19 83 through September 30, 19 84

NAME PHIL NISA
FIRM PERSONALIZED A/C
ADDRESS 1259 SW 34th St.
Palm City, FL 33490

CERTIFIED CONTRACTOR RESIDENTIAL A/C CONTR.

**AUDIT
CONTROL**

Nº 5645

CERTIFICATE NUMBER
00341

451617

This Quit-Claim Deed, Executed this 26th day of August, A. D. 1982, by

DENNIS S. HUDSON, JR. and DALE M. HUDSON, as co-personal representatives of the Estate of Beatrice M. Hudson, deceased

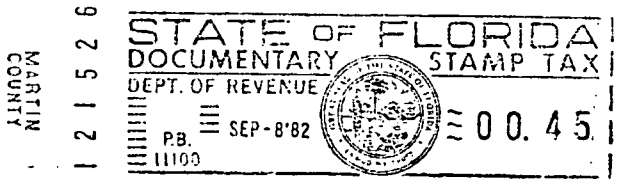
first party, to DENNIS S. HUDSON, JR. and ANNE P. HUDSON, his wife whose postoffice address is 3754 S.E. Old St. Lucie Blvd., Stuart, Florida 33494

second party:

(Wherever used herein the terms "first party" and "second party" shall include singular and plural, heirs, legal representatives, and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth, That the said first party, for and in consideration of the sum of \$10.00-----, in hand paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quit-claim unto the said second party forever, all the right, title, interest, claim and demand which the said first party has in and to the following described lot, piece or parcel of land, situate, lying and being in the County of Martin State of Florida, to-wit:

See SCHEDULE "A", attached hereto and made a part hereof.



To Have and to Hold the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said first party, either in law or equity, to the only proper use, benefit and behoof of the said second party forever.

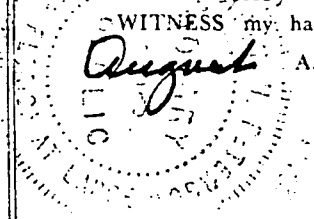
In Witness Whereof, The said first party has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in presence of: Dennis S. Hudson, Jr. (Signature) L.S.

Margaret W. Peterson (Signature) L.S. Dale M. Hudson, as co-personal representatives of the Estate of Beatrice M. Hudson, deceased

STATE OF FLORIDA, COUNTY OF Martin OR BOOK 552 PAGE 1941

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared DENNIS S. HUDSON, JR. and DALE M. HUDSON, as co-personal representatives of the Estate of Beatrice M. Hudson, deceased to me known to be the person described in and who executed the foregoing instrument and who acknowledged before me that they executed the same.



WITNESS my hand and official seal in the County and State last aforesaid this 26th day of August, A. D. 1982.

Margaret W. Peterson (Signature) NOTARY: My Commission Expires:

This Instrument Prepared by: EVANS CRARY, JR.

NOTARY PUBLIC STATE OF FLORIDA AT LARGE MY COMMISSION EXPIRES JULY 26 1983 BONDED THRU GENERAL INS UNDERWRITER.

This Instrument prepared by CRARY, BUCHANAN, BOWDISH & BOVIE, Chartered Attorneys 555 Colorado Avenue STUART, FLORIDA 33494

Address

Quit Claim Deed

To

(C-A)

SCHEDULE "A"

The North one-half (N 1/2) of the following-described real property, situate, lying and being in Martin County, Florida, to-wit:

The North 6.31 acres, more or less, being the North 236.94 feet of Lot 7, in Plat 1 of Sewall's Division of Sewall's Point, as shown in unrecorded plat prepared by William H. Roat, County Surveyor, 24 December, 1926, and on plat of Port Sewall filed 13 November, 1913, recorded in Plat Book 3, Page 8. Also described as follows: Commencing at a point on the West bank of the Indian River twenty-seven chains and five links (27.5) from the North line of the Hanson Grant, in Plat One (1) of Sewall's Division and within the boundaries of said Grant, running thence South sixty-six degrees West, eighteen chains and ten links (18.10) to the St. Lucie River; thence southeasterly along the margin of said river to a point three chains and fifty-seven links (3.57) South of the line last run; thence North sixty-six degrees East, seventeen chains and thirty links (17.30) to the Indian River; thence northwesterly along the margin of said river to the place of beginning; containing six and thirty-one hundredths (6.31) acres, more or less. Excepting therefrom thirty (30) feet through said parcel of land, reserved for the purpose of a County Road. And being the same land conveyed by James C. Harrison to Hugh L. Willoughby on September 16, 1908 and recorded in Deed Book 29, Page 242, Dade County Records.

Lying West of River Road as said River Road is described in that certain Warranty Deed filed for record in Official Record Book 418, Page 1528, Martin County, Florida, Public Records.

TOGETHER WITH all riparian rights appertaining thereto.

*B. Harrison
561 Road
by Lee B. ...*

LOUISIANA
CLERK
BY *[Signature]*
D.C.

32 SEP 8 P 2:43

FILED FOR RECORD
MARTIN COUNTY, FLA.

TOWN *of* SEWALL'S POINT

One South Sewall's Point Road, Sewall's Point, Stuart, Florida 33494

COMMISSIONERS

JOHN C. GUENTHER, Mayor
GILBERT C. STRUBELL, Vice Mayor
MIMI TOWL, Commissioner
CLIFFORD B. DRAKE, Commissioner
ROBERT R. AUNE, Commissioner

TELEPHONE (305) 287-2455

JOAN H. BARROW
Town Clerk
F.J. MATUSZEWSKI
Chief of Police

June 4, 1985

Mr. and Mrs. Dennis Hudson, Jr.
234 N.E. Edgewater Drive, Apt. 201
Stuart, Florida 33494

Dear Mr. and Mrs. Hudson:

Re: Permit # 1720

In respect to Building Department fee schedule. Your difference in cost calls for an added payment in permit fee of \$1,194.00.

Your original estimate was \$107,040.00. New cost figure (rounded) is \$352,000.00 x \$5. per thousand equals \$1,760.00 minus \$566.00 (paid) equals \$1,194.00 balance due.

If there are any questions please contact me at building department.

Sincerely,



Peter Johnsen, Building Inspector
TOWN OF SEWALL'S POINT

Mrs + Mrs Dennis Hudson
157 So. River Road
Stevenc's Point Fla.

Dear Sir -

In respect to Bldg Dept's fee schedule -
Your difference in cost calls for an added

payment in Permit fee of \$1194.00

Your original estimate was - \$107,040.00

New cost figure (rounded) \$352,000.00

\$ x 5 per thousand

1760

566

\$1194 Balance -

paid

If there is any question please contact me at Bldg Dept.
Sincerely -

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

RECEIVED
JUN 20 1984
Ans'd.....

STUBOUT ELEVATION AND FILL CERTIFICATION

APPLICANT: HUDSON
LEGAL DESCRIPTION: L. 7 SEWALLS
SEPTIC TANK PERMIT NUMBER: HD 84-292

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 the 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 an average depth of _____ feet of compacted fill presently exists above natural grade in the area of the proposed septic system. Surface area of fill observed in area of proposed septic system _____ square feet. A minimum of 150 square feet of filled surface area is required per bedroom. Date fill observed: _____.
- ___ 5. I certify that all severe limited soil has been removed from an area of _____ feet by _____ feet to a minimum depth of _____ feet below filled grade or that the results of at least four (4) soil borings at the above boundary corners of the proposed septic system indicate that severe limited soils do not exist. Date observed: _____.

- NOTE: a. Severe limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
- b. Drainfield should be centered in the excavated area. Please set stakes to identify the excavated area boundaries.

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 Sanitarian Date



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

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

APPLICATION FOR SEPTIC TANK PERMIT AND FINAL INSPECTION FORM RECEIVED

JUN 20 1984

Permit Number: HD 84-292

Name of Applicant MR. DENNIS HUDSON Telephone number 247-9000

Mailing Address of Applicant % FIRST NAT BANK

Lot Block Subdivision SEE ATTACHED

Plat Book & Page 3-8 Date Recorded

Residential: No. living units 1 No. Bedrooms 3

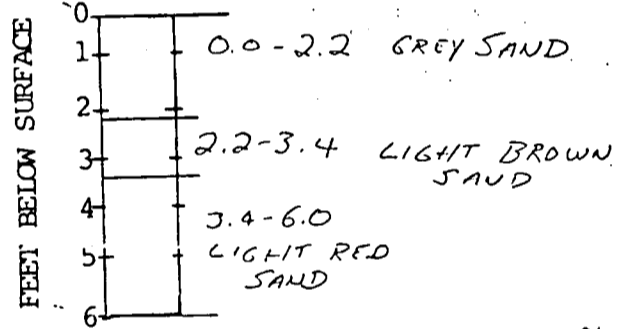
Commercial: Type of Business No. People No. Toilets

*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 630 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: PAOLA SAND 0-8% SL
USDA SYMBOL #: 6

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

Certified by: W. K. L. [Signature]
Fla. Professional No: 2370
Date: 11-21-83 Job No. 2043
Date of soil borings:

INSTALLATION SPECIFICATIONS

Septic Tank Capacity 900 Gallons Absorption Bed Size 300 Square ft.
Dosing Tank Capacity Gallons Lateral Drainfield Size Sq. ft.
Grease Trap Capacity Gallons Sand Filter Size Square ft.

Specifications:

5-30-84
Date Processed

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

FINISHED GRADE

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

Robert B. [Signature]
Signature of Sanitarian

Martin County Health Department

FINAL INSPECTION DATA

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

RECOMMENDATION: Approval Disapproval Signature of Sanitarian

026235

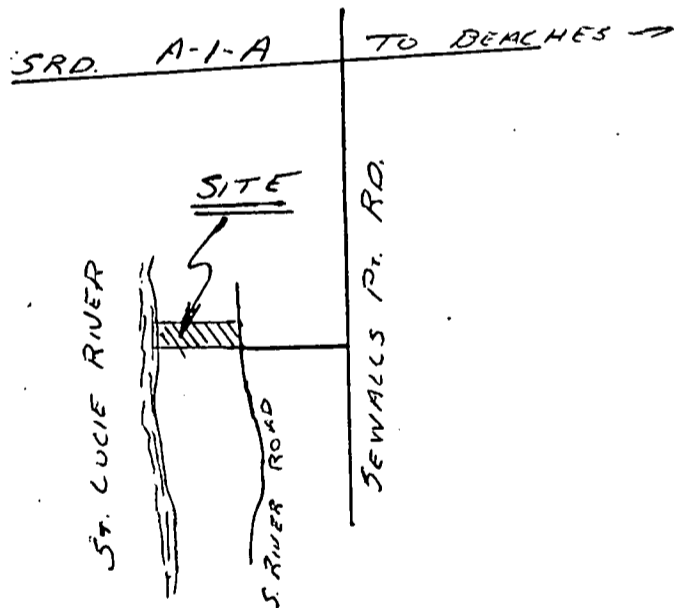
MARTIN COUNTY HEALTH DEPT.
131 E. 7th Street
Stuart, Fl 33497
287-2277

SITE INFORMATION

APPLICANT: MR. & MRS. DENNIS HUDSON, JR.

LEGAL DESCRIPTION: SEE ATTACHED

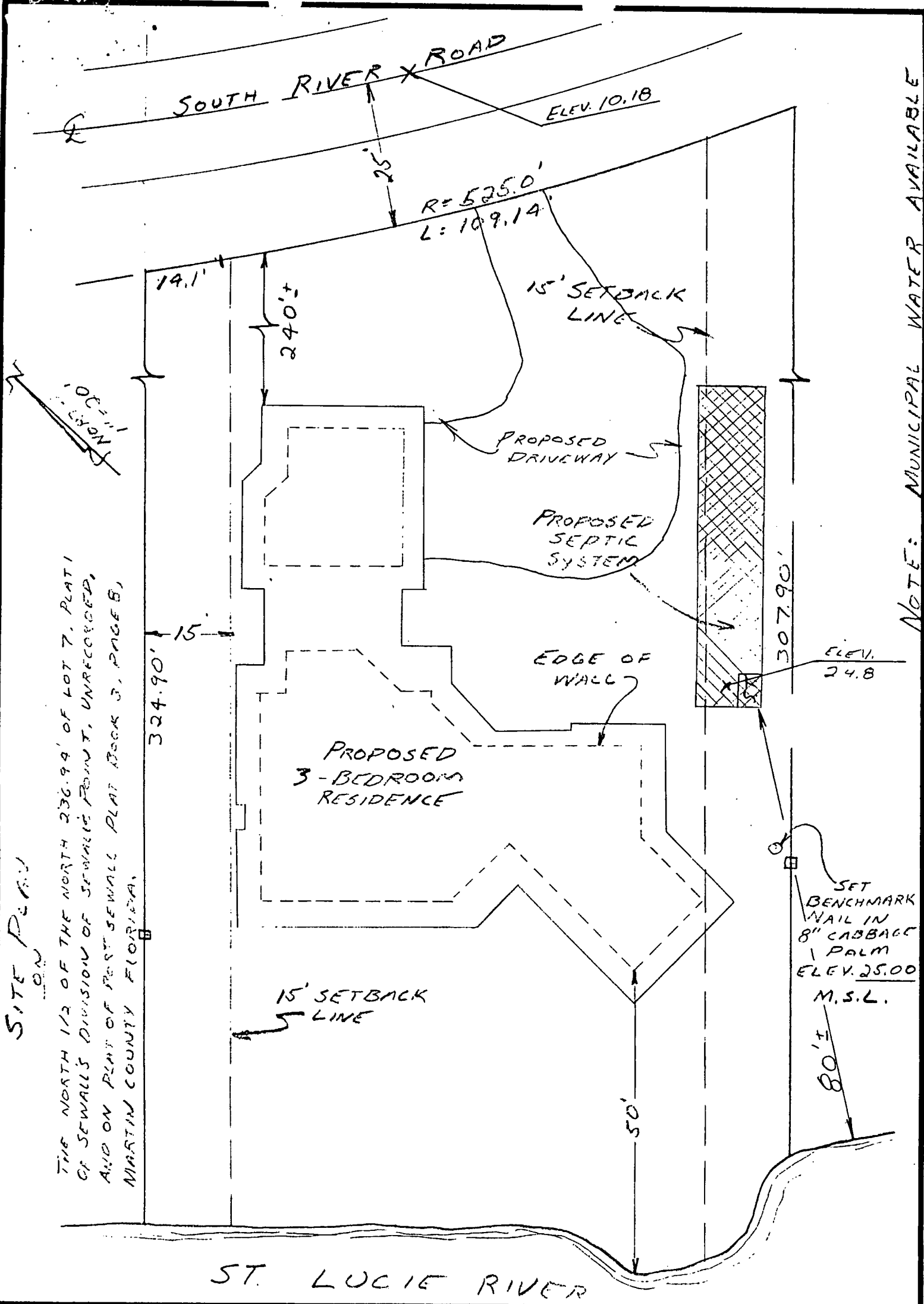
1. Present water depth MORE THAN 6 feet below natural grade, not including fill.
2. Wet season water depth MORE THAN 6 feet below natural grade, not including fill.
3. Elevation of crown of road, midway between front lot boundary 10.18. If road is not paved, another permanent reference point must be noted. Show location on plot plan.
4. Elevation of natural grade at soil boring in area of proposed septic system 24.8.
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: W. M. L. Lundy

Florida Professional Number: 2370

Date: 11-21-83 Job Number: 2043



THE NORTH 1/2 OF THE NORTH 236.94' OF LOT 7, PLAT 1
 OF SEWALL'S DIVISION OF SEWALLS POINT, UNRECORDED,
 AND ON PART OF POST SEWALL PLAT BOOK 3, PAGE 8,
 MARTIN COUNTY FLORIDA.

NOTE: MUNICIPAL WATER AVAILABLE

I HEREBY CERTIFY that the plat shown hereon is a true and correct representation of a survey made under my direction and that said survey is accurate to the best of my knowledge and belief and that, unless otherwise shown, there are no encroachments. NOT VALID unless sealed with an EMBOSSED SEAL.

WILLIAM L. CREECH
 LAND SURVEYOR
 WEST PALM BEACH, FLORIDA

Will L. Creech
 PROFESSIONAL LAND SURVEYOR
 FLORIDA CERTIFICATE NO. 2370

PLAT BOOK: — PG. — FIELD BK. FILE

DATE: 11-21-83
 SCALE: 1" = 20'

DRAWN BY: J.L.H.
 ORDER NO. 2093



FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

FORM 900-A-84

SECTION 9—RESIDENTIAL POINT SYSTEM METHOD
DEPARTMENT OF COMMUNITY AFFAIRS

CLIMATE ZONES
SOUTH 7 8 9

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: DENNIS HUDSON 157 So. RIVER RD - SEWALL'S PT 33494	PERMITTING OFFICE: MARTIN - Sewall's Pt.
BUILDER: LOWERY INC.	CIRCLE CLIMATE ZONE: 7 @ 9
OWNER: HUDSON - 157 So. RIVER RD <small>LOT 7A HANSON GRANT</small>	PERMIT NO.: 1720
	JURISDICTION NO.: 5 3 1 3 0 0

<input checked="" type="checkbox"/> DETACHED	IF MULTIFAMILY, NO. OF UNITS COVERED BY THIS CALCULATION: <input type="text"/> <input type="text"/> <input type="text"/>	GLASS AREA AND TYPE	
<input type="checkbox"/> ATTACHED	SEPARATE CALCULATIONS ARE REQUIRED FOR EACH WORST CASE UNIT TYPE. CHECK IF THIS CALCULATION REPRESENTS A WORST CASE CONDITION. <input type="checkbox"/>	<input checked="" type="checkbox"/> CLEAR	TINT, FILM, SOLAR SCREEN
		<input type="text"/> <input type="text"/> <input type="text"/> SGL	<input type="text"/> <input type="text"/> <input type="text"/> SGL
		<input type="text"/> 8 <input type="text"/> 9 <input type="text"/> 5 DBL	<input type="text"/> <input type="text"/> <input type="text"/> DBL

NET WALL AREA AND INSULATION				CONDITIONED FLOOR AREA	CEILING INSULATION	
CBS	R=	FRAME	R=		UNDER ATTIC	SGL. ASSEMBLY
<input type="text"/>	<input type="text"/>	2 3 1 6	1 9 0	2 6 7 6	R= <input type="text"/>	R= 1 9 0

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 = <input type="text"/> 1 0 <input type="text"/> 5	<input type="checkbox"/> ELECTRIC STRIP <input type="checkbox"/> GAS <input type="checkbox"/> NONE <input type="checkbox"/> OIL <input type="checkbox"/> SOLAR <input checked="" type="checkbox"/> HEAT PUMP: COP = <input type="text"/> 3 <input type="text"/> 3 <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="text"/> <input type="text"/> <input type="text"/> <input type="checkbox"/> OTHER: _____

CALCULATED E.P.I.: <input type="text"/> 1 0 0 <input type="text"/> 0	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: CRAIG BOORMAN

DATE: JUN 2 15 - 1984

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: Jm

DATE: 7/6/84



**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>DEANNS HUDSON</u>	PERMITTING OFFICE: <u>MARTIN - SEWALLS PT.</u>
BUILDER: <u>LOWERY INC.</u>	CIRCLE CLIMATE ZONE: <u>7 @ 9</u>
OWNER: <u>HUDSON</u>	PERMIT NO.: _____
	JURISDICTION NO.: [] [] [] [] [] [] [] []

<input checked="" type="checkbox"/> DETACHED	IF MULTIFAMILY NO. OF UNITS COVERED BY THIS CALCULATION: [] [] []	GLASS AREA AND TYPE			
		<u>CLEAR</u>	TINT, FILM, SOLAR SCREEN		
<input type="checkbox"/> ATTACHED	SEPARATE CALCULATIONS ARE REQUIRED FOR EACH WORST CASE UNIT TYPE. CHECK IF THIS CALCULATION REPRESENTS A WORST CASE CONDITION. <input type="checkbox"/>	[] [] [] SGL	[] [] [] SGL	[] [] [] SGL	[] [] [] SGL
		<u>895</u> DBL	[] [] [] DBL	[] [] [] DBL	[] [] [] DBL

NET WALL AREA AND INSULATION				CONDITIONED FLOOR AREA	CEILING INSULATION	
CBS	R=	FRAME	R=		UNDER ATTIC	SGL. ASSEMBLY
[] [] []	[] [] []	<u>2316</u>	<u>190</u>	<u>2676</u>	R= [] [] []	R= <u>190</u>

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 = <u>105</u>	<input type="checkbox"/> ELECTRIC STRIP <input type="checkbox"/> GAS <input type="checkbox"/> NONE <input type="checkbox"/> OIL <input type="checkbox"/> SOLAR <input checked="" type="checkbox"/> HEAT PUMP: COP = <u>33</u> <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.: <u>1000</u>	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>CRIG SCORMAN</u> DATE: <u>JUN 15 - 1984</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.	N/A
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
			AREA	x WPM		AREA	x SPM	
WALLS	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 ✓	2316	1.5	3474	2316	8.6	19,918
	COMMON	R 26 & UP		1.1			6.5	
				2.7			3.8	

DOORS	WOOD OR METAL ✓		240	86.5	20,760		55.4	13,296
	INSULATED			84.0			22.2	
	STORM DOOR			44.6			44.3	
	COMMON			21.6			6.9	

CEILING	UNDER ATTIC	R 19-21.9		1.9			8.4	
		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 ✓	2876	1.9	5464	2876	8.4	24,158
		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 ✓	2088.5	2.1	4386	2088.5	2.3	4804
		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 PERIMETER	EDGE INSULATION		PERIMETER	WPM
		R 0-2.9		28.3
		R 3-5.9		20.4
		R 6 & UP		12.4

34,084

62,176

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	
WHOLE HOUSE FAN (min. 1.5 cfm/s.f.)	5	5
WOOD STOVE	5	
FIREPLACE WITH OUTSIDE COMBUSTION AIR	2	
9C TOTAL (not to exceed 12 points)		12

9D HEATING SYSTEM CREDIT POINTS	
NATURAL GAS/PROPANE HEATING	8.0
OIL HEATING	9.6.4

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) x (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	CREDIT POINTS	OVERALL SOLAR FRACTION*			0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0
		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														

TERMITE CONTRACT AND GUARANTEE

LLOYD'S PEST CONTROL, INC.

2485 S.E. BONITA ST.
STUART, FLORIDA 33494
(305) 287-4014

#3908

AGREEMENT made this 15th day of August 19 84,
at Stuart, Martin County, Florida, by and between LLOYD'S PEST CONTROL, INC., hereinafter called
the TERMITE CONTRACTOR, and Dennis Hudson

Address: 517 South River Road, Stuart, Florida 33494
hereinafter called the OWNER.

IN CONSIDERATION of the sum of two hundred twenty eight and 00/100 dollars
(\$ 228.00) payable as follows upon completion of job
the TERMITE CONTRACTOR agrees to treat the following described property _____

517 South River Road, Stuart, Florida (Sewall's Point)
for the control of Native Subterranean termites
(Reticulitermes) on the ** day of ** (see below)
and issue a one year guarantee. This treatment is for (a) _____ Control
of existing infestation or (b) XXXX prevention of infestation.

The TERMITE CONTRACTOR agrees to re-inspect and re-treat any reinfestations on the premises
on an annual basis for four additional years at no additional cost to the OWNER other than the regular
service charge of fifty five and 00/100 dollars (\$ 55.00).
The annual service charge is payable annually on or before the anniversary date of the contract.

IT IS FURTHER AGREED AND UNDERSTOOD that in the event a lapse should occur in the
payment of any installment under this contract, the TERMITE CONTRACTOR shall, at his option, from
and after notice, be released from further inspections or re-servicing as herein provided. Failure by the
OWNER to make payment of any of the annual installments shall nullify all guarantees under this
contract.

THIS AGREEMENT applies solely to control service and should not be construed as a guarantee
against damage to buildings or contents by insects and/or pests, or provide for repair or compen-
sation therefor. No fences, separate garages, servant houses, or other out-buildings are included in
this agreement unless specified in writing in this contract.

The OWNER agrees to notify the TERMITE CONTRACTOR prior to making any structural changes
or additions to the building treated under this contract, but any such changes or additions, if objected
to by the TERMITE CONTRACTOR in writing, shall nullify all guarantees.

The TERMITE CONTRACTOR hereby agrees that this contract and any extension of same shall, at
the OWNER'S option, pass with the title to the property covered hereunder, provided that all pay-
ments under this contract shall be made by the new OWNER as herein specified and provided that
prompt written notice of such transfer is given the TERMITE CONTRACTOR.

The TERMITE CONTRACTOR agrees to use care in applying treatment to avoid damage, but will
not be responsible for damage to any part of the structure or contents unless caused by gross
negligence on the part of the TERMITE CONTRACTOR. It is agreed that the TERMITE CONTRACTOR
will not be responsible for roofs, trees, or plants.

THIS GUARANTEE may be further extended if mutually agreed upon in writing before the
expiration of the original period. Only such agreements are as clearly specified in this contract shall be
binding upon the parties hereto.

SPECIAL CONDITIONS Florida Statute 482.226(6) NOTICE is posted at the
following designated location in the above mentioned structure:

** 8/15/84, 10/26/84, 2/6/85, 5/1/85 and 5/29/85 VENT PIPE

LLOYD'S PEST CONTROL, INC.

Owner or Agent

BY Raymond White

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. SEE AFFIDAVIT ATTACHED.

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 \$ _____ . SEE AFFIDAVIT ATTACHED.

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.

DENNIS S. HODSON, JR.

Dennis S. Hodson, Jr.
Affiant

Property street address:

157 SOUTH RIVER ROAD
SEWALL'S POINT
STUART, FLORIDA

Sworn to and subscribed
before me this 3 day of
June, 19 85.

Mollie H. Daly
Notary Public

STATE OF FLORIDA AT LARGE

My Commission Expires: NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXPIRES MAY 31 1987
BONDED THRU GENERAL INSURANCE UND

(NOTARY SEAL)

AFFIDAVIT

June 3, 1985

Paragraph 2.

The following work has not been completed:

1. Finish paint on front door.
2. Some work on benches around decks.
3. Hood over gas grill.
4. Installation of bottle gas for said grill.
5. Telephone jack needed in utility room.
6. Chimmney must be painted.
7. Grouting must be applied under several wash basins and hood over gas grill.
8. Fireplace damper must be adjusted.
9. Scratches on underside of spiral staircase must be removed.
10. Roof chain must be affixed to post.
11. Touch-up painting.
12. Outside porches must be painted with wood preservative.
13. Screens must be installed in screen doors in room above garage.
14. Lighting on riverfront patio.
15. Some lighting fixtures need to be changed as required in specifications.
16. Flood lights must be spray painted gray.
17. Final asphalt paving for driveway.
18. Tile floors must be sealed.
19. Broken glass in one door must be replaced.

Paragraph 3.

Total paid to contractor through bill dated 5-2-85	\$296,891.58
Amount estimated by contractor to finish house	<u>55,000.00</u>
Total cost of house/estimated	\$351,891.58

RECORD OF INSPECTIONS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 6/6/85

This is to request that a Certificate of Approval for Occupancy be issued to MR. D HUDSON JR.
 For property built under Permit No. 1720 Dated 7/5/84 when completed in
 conformance with the Approved Plans.

Item	
1. LOT STAKES/SET BACKS	<u>SURVEY</u> Signed
2. TERMITE PROTECTION	<u>8/15/84 LLOYD</u>
3. FOOTING - SLAB	<u>APPROVED BY PILE BOLTS 9/5/84</u>
4. ROUGH PLUMBING	<u>FIREPLACE 8/15/84 GARAGE 10/29/84</u>
5. ROUGH ELECTRIC	<u>1/9/85 GAR 2/5/85 GARAGE 10/25/84 2/5/85</u>
6. LINTEL	<u>1/9/85 GAR 2/5/85</u>
7. ROOF	<u>CHIMNEY STEEL 10/23/84</u>
8. FRAMING	<u>1/9/85 HURRICANE STRAPS 12/21/84</u>
9. INSULATION	<u>1/30/85 GAR 2/8/85</u>
10. A/C DUCTS	<u>1/9/85</u>
11. FINAL ELECTRIC	<u>6/4/85</u>
12. FINAL PLUMBING	<u>6/4/85</u>
13. FINAL CONSTRUCTION	<u>6/4/85</u>

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector [Signature] 6/5/85 date

Approved by Building Commissioner [Signature] 6 June 1985 date

Utilities notified 6/6/85 date

Original Copy sent to Owner

(Keep carbon copy for Town files)

2036

DOCK

TOWN OF SEWALL'S POINT, FLORIDA

Permit Number 2036

Date 11/21/86

APPLICATION FOR A PERMIT TO BUILD A DOCK, FENCE, POOL, SOLAR HEARING 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 Dennis Hudson, JR. Present Address 157 S. River Rd.
Phone _____ Stuart, FL 33494

Contractor Intracoastal Marine Construction Address 1350 S. Dixie Hwy
Phone 288-3625 Stuart, FL 33494

Where licensed _____ License number _____
Electrical contractor _____ License number _____
Plumbing contractor _____ License number _____
Roofing contractor _____ License number _____
Air conditioning contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Dock 120' X 4'

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

157 South River Road, Sewalls Pt.

Subdivision 000 ~~Sewalls Point~~ Arbela Park Lot number 83 Block number 000

Contract price \$ 6800.00 Cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

I understand that this permit is good for 12 months from the date of its issue and that the structure must be completed in accordance with the approved plan. I further understand that approval of these plans in no way relieves me of complying with the Town of Sewall's Point Ordinances, the State of Florida Model Energy Efficiency Building Code 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 Douglas A. Brown
INTRACOASTAL MARINE CONSTRUCTION, INC.

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 Dennis Hudson, JR.

TOWN RECORD

Date submitted 11/21/86 Approved Dale Brown 12/2/86
Building Inspector Date

Approved J.C. Strubell 12/2 Final Approval given _____
Commissioner Date Date

Certificate of Occupancy issued (if applicable) _____
Date

LETTER OF NO OBJECTION

We, The Kiplinger Washington Editors, Inc. _____
being the owner(s) of certain property adjacent to and
abutting the property of Mr. Dennis Hudson, Jr., who
have applied for a dock permit for construction, have
read and reviewed the drawing of the dock as proposed
and I have no objection to the proposed dock pursuant
to the plan attached herein.

The Kiplinger Washington Editors, Inc.

By: Austin H. Kiplinger
Austin H. Kiplinger, President

~~STATE OF~~ District of Columbia :

~~COUNTY OF~~

SWORN TO AND SUBSCRIBED before me this 30 day of October, 1986.


Kathryn V. Robey
Notary Public

My Commission Expires:

October 31, 1988

LETTER OF NO OBJECTION

We, DALE M HUOSON and MARY T HUOSON
being the owner(s) of certain property adjacent to and
abutting the property of DENNIS S HUOSON JR, who
have applied for a dock permit for construction, have
read and reviewed the ~~drawing~~ drawing of the dock as proposed
and I have no objection to the proposed dock pursuant
to the plan attached herein.

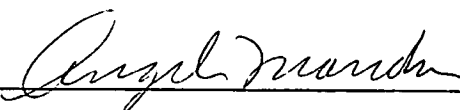


DALE M HUOSON

STATE OF

COUNTY OF

SWORN TO AND SUBSCRIBED before me this 24 day of Oct, 1986



Notary Public

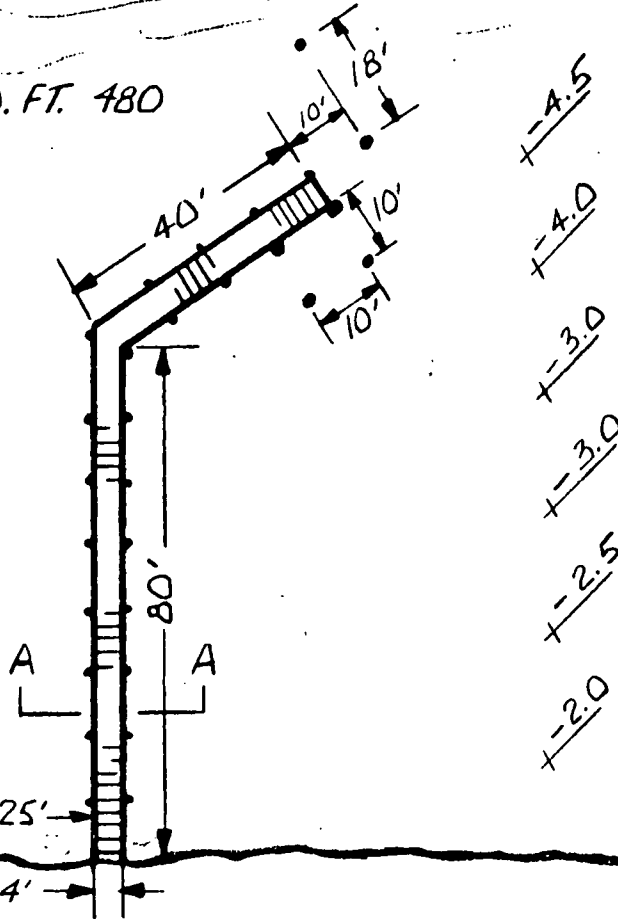
My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. JAN 29, 1989
BONDED THRU GENERAL INS. UND.

ST LUCIE RIVER

DOCK SQ. FT. 480

DISTANCE TO CHANNEL ± 400'



+ - 4.5
+ - 4.0
+ - 3.0
+ - 3.0
+ - 2.5
+ - 2.0

EXTENDED PROPERTY LINE

SOUNDINGS ARE IN FEET BELOW M. L. W.

118.47'

DENNIS HUDSON
HOUSE + LOT

1

2

369.99'

RIVER

ROAD



DATED: _____

ASSOCIATED MARINE CONSULTANTS

1280 SOUTH DIXIE HIGHWAY STUART, FLORIDA 33494

PROFESSIONAL ENGINEER
FLORIDA REGISTRATION NO. _____

SEC 13 TWP. 38 RGE. 41

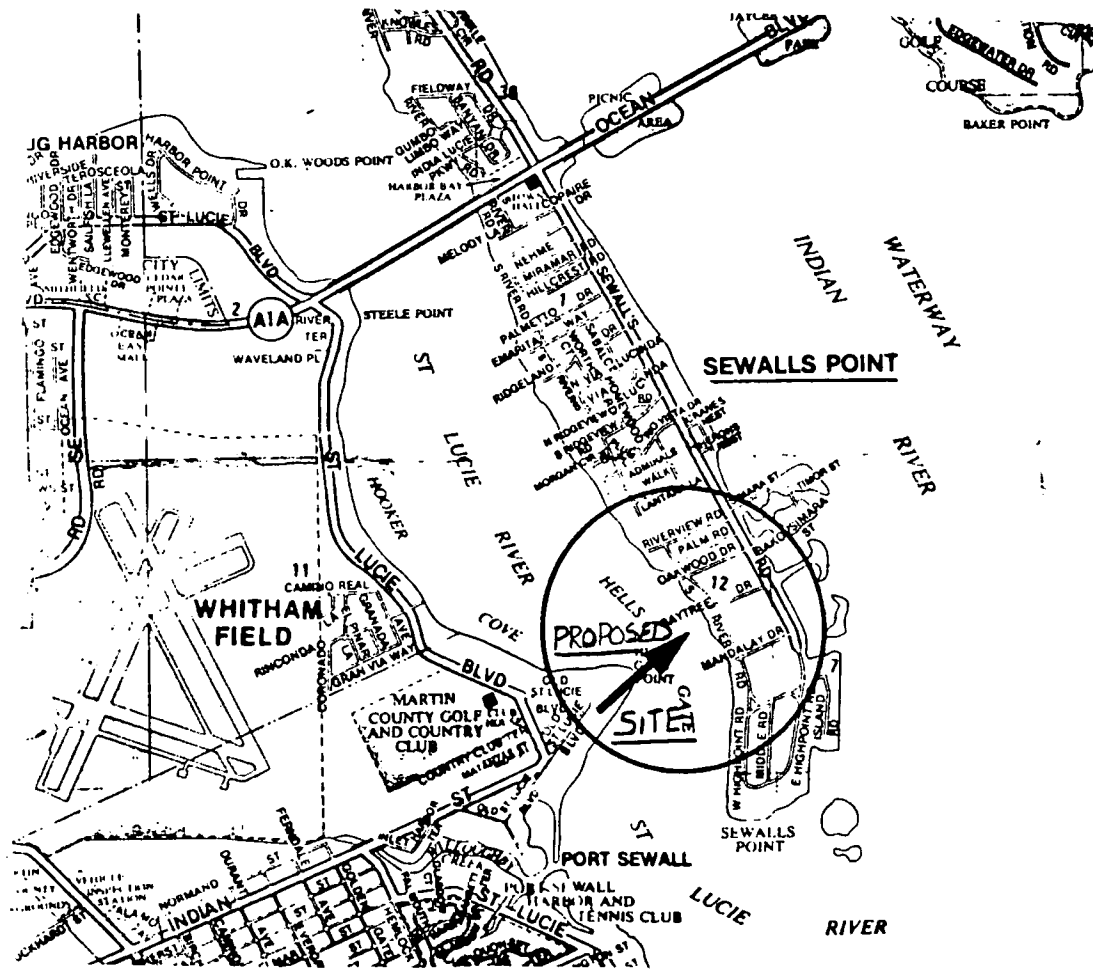
PROPOSED DOCK FOR
MR. DENNIS HUDSON JR,
157 S. RIVER RD.
SEWALLS POINT

DWN. DH. 10/23/86

SCALE: 1" = 30'

SHEET 1 OF 3

P.C.N. # 13-38-41-000-000-00083-5



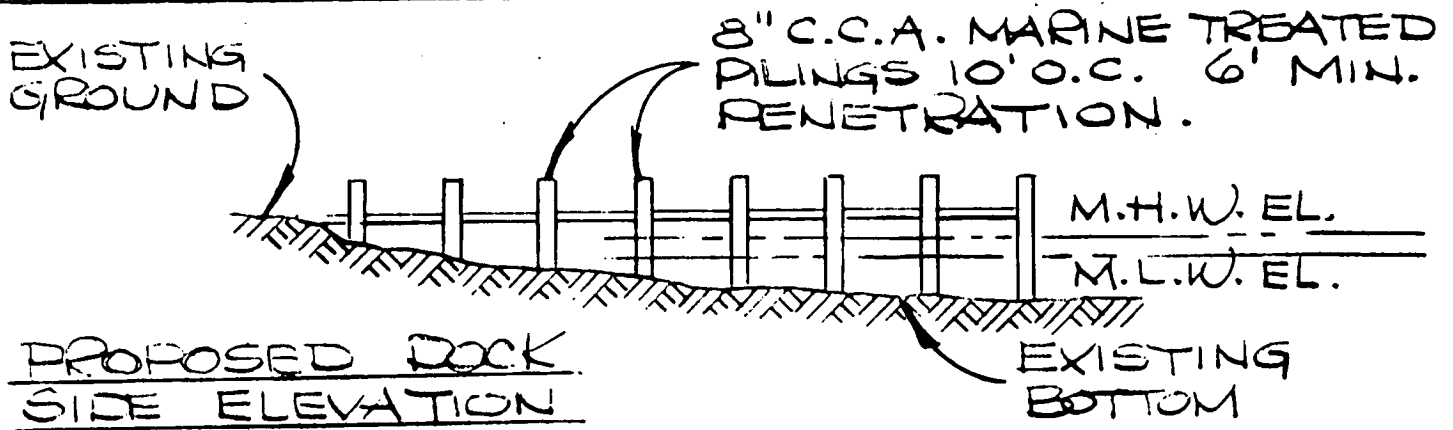
LAT. 27° 11' 10" N
 LON. 80° 11' 30" W

PCN# 13-38-41-000-000-00083-5

LOCATION
 MAP

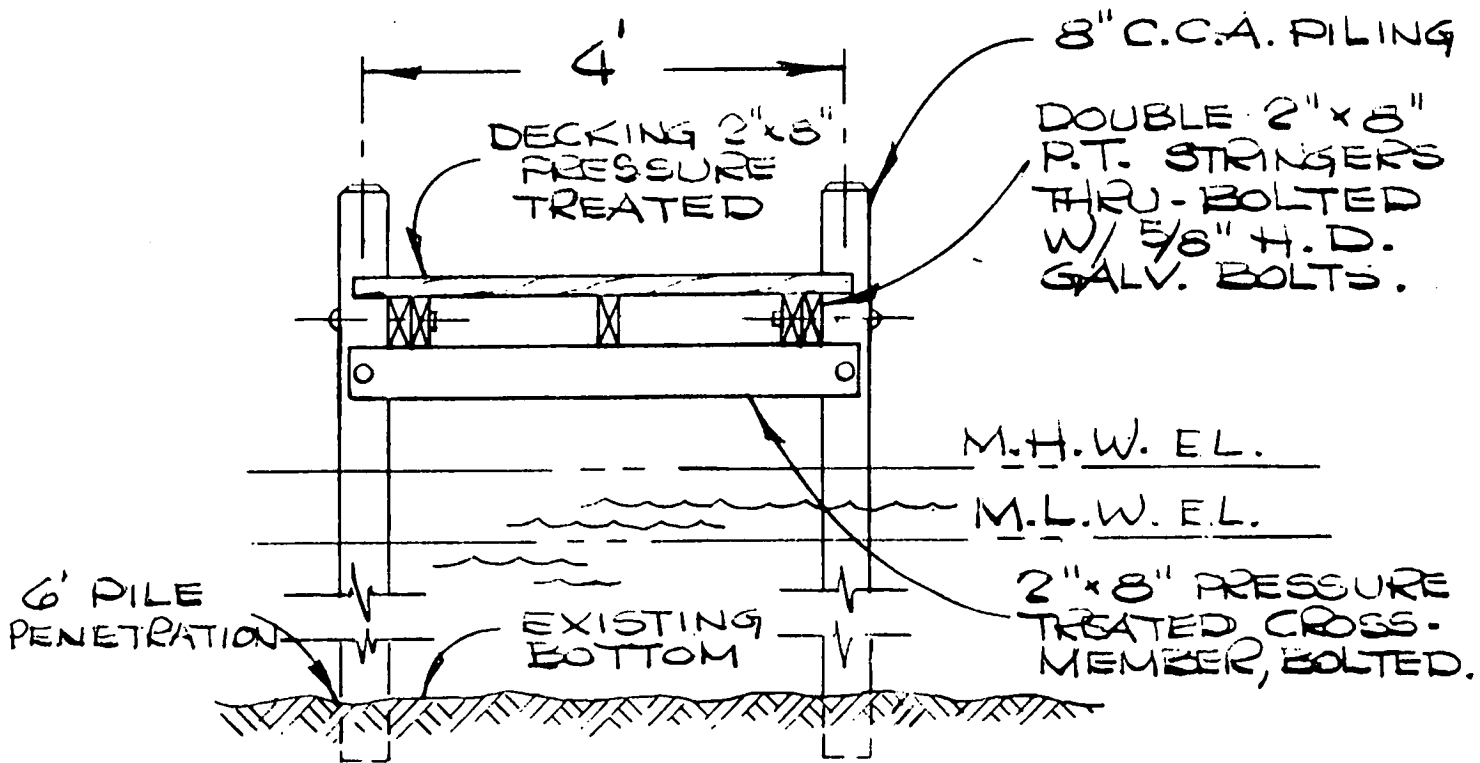
SEC. 13 TWP. 38 RGE 41

PROPOSED DOCK FOR MR. DENNIS HUDSON JR., RIVER RD., SEWALLS POINT		
SCALE:	APPROVED BY:	DRAWN BY <i>DA</i>
DATE: 10/23/86		REVISED
ASSOCIATED MARINE CONSULTANTS		
Stuart Fl	283-8509	DRAWING NUMBER 3 OF 3



PROPOSED DOCK
SIDE ELEVATION

PLAN VIEW



DOCK
SECTION "A-A"

P.C.N. # 13-38-41-000-000-00083-5

PROPOSED DOCK FOR MR. DENNIS HUDSON JR, RIVER RD, SEWALLS POINT	ASSOCIATED MARINE CONSULTANTS
	1350 S. DIXIE HWY. STUART, FLA. 33494 (305) 283-8509
DRN. 10/23/86 DH	GHK'D.
SEC. 13 TWP. 38 RGE. 41	SHEET 2 OF 3

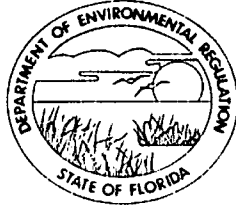
NOT TO SCALE

STATE OF FLORIDA

DEPARTMENT OF ENVIRONMENTAL REGULATION

SOUTHEAST FLORIDA DISTRICT
BRANCH OFFICE

2745 SOUTHEAST MORNINGSIDE BOULEVARD
PORT ST. LUCIE, FLORIDA 33452



BOB GRAHAM
GOVERNOR

VICTORIA J. TSCHINKEL
SECRETARY

November 7, 1986

Dennis Hudson Jr.
c/o Associated Marine Consultants
1350 South Dixie Highway
Stuart, Florida 33494

DF - Martin County
Dock
St. Lucie River

Dear Mr. Hudson:

This is to acknowledge receipt of your application, file number 431265628, for a permit to:

Construct a 480 sq. ft. dock consisting of an 80' by 4' section perpendicular to shore and an angled terminal section measuring 40' by 4'. This project is to be located at 157 S. River Road, Class III Waters, St. Lucie River, Section 13, Township 38 South, Range 41 East, Sewall's Point, Martin County.

At this time no permit is required for your project by this Department. Any modifications in your plans should be submitted for review, as changes may result in permits being required. This letter does not relieve you from the need to obtain any other permits (local, state or federal) which may be required. This project, as proposed, is exempt from permitting pursuant to 403.813(2)(b)(1), Florida Statutes, in accordance with the three (3) attached stamped drawings.

A copy of your application has also been sent to the Department of Natural Resources for review. Consent of use of State owned lands may be required from the Department of Natural Resources prior to construction. For further information, you may contact Mr. David Roach at (305) 686-1036.

If you have any questions, please contact Brad Rieck of this office. When referring to this project, please use the file number indicated.

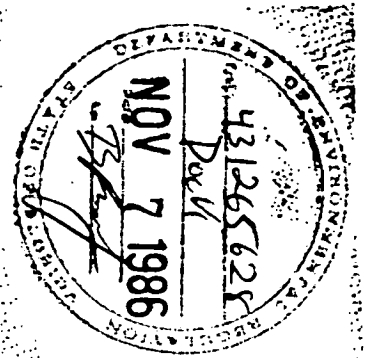
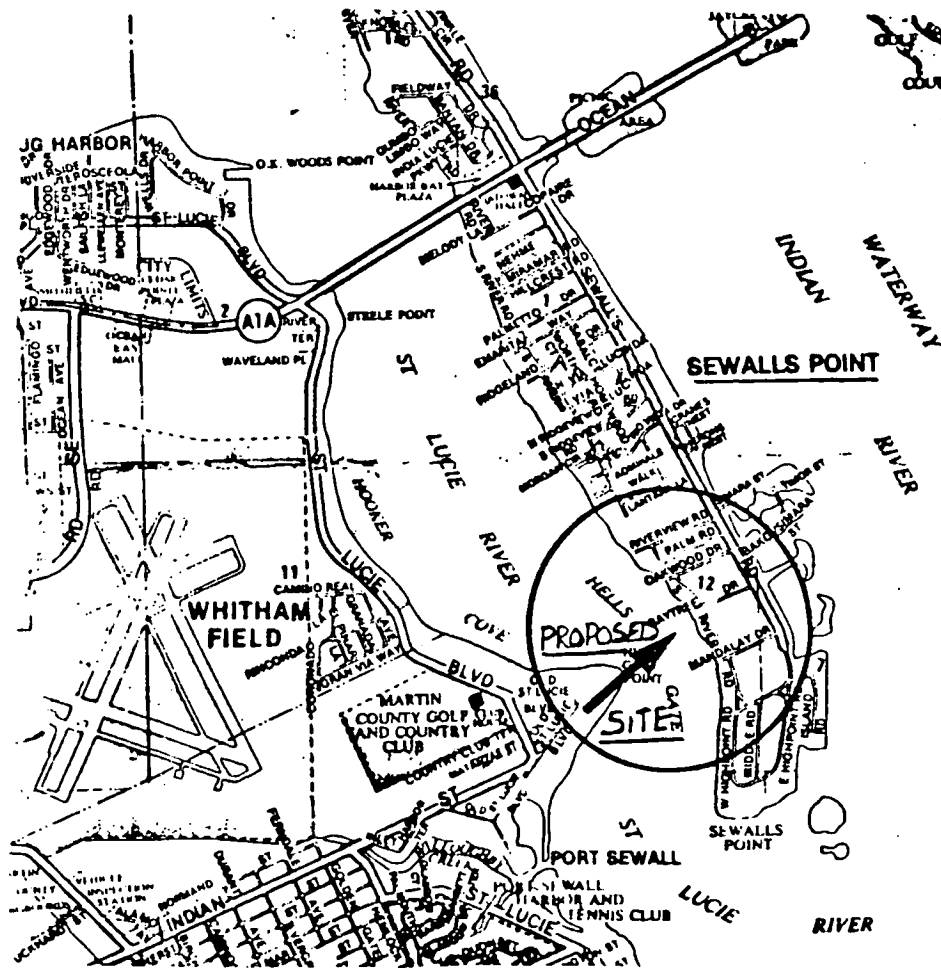
Sincerely,

G. Scott Benyon
District Manager

JSB:brt/7

cc: Army Corp's of Engineers, Miami
David Roach, D.N.R. (with application)

COPY



LAT. 27° 11' 10" N
LONG. 80° 11' 30" W

PCN# 13-38-41-000-000-00083-5

LOCATION
MAP

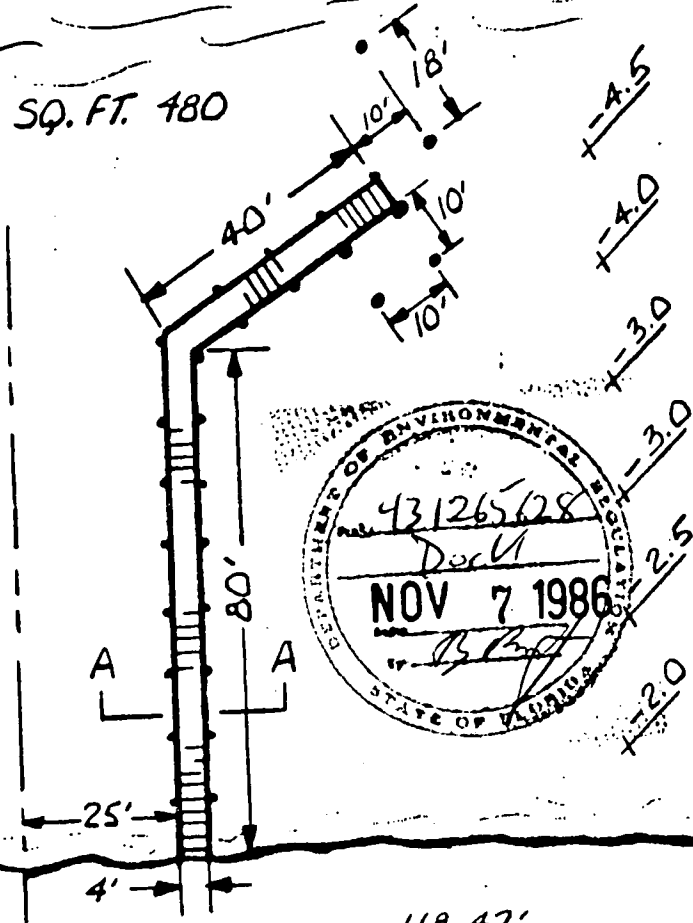
SEC. 13 TWP. 38 RGE 41

PROPOSED DOCK FOR MR. DENNIS HUDSON JR., RIVER RD., SEWALLS POINT		
SCALE:	APPROVED BY:	DRAWN BY <i>DH</i>
DATE: 10/23/86		REVISED
ASSOCIATED MARINE CONSULTANTS		
Stuart Fl	283-8509	DRAWING NUMBER 30F3

ST LUCIE RIVER

DISTANCE TO CHANNEL ± 400'

DOCK SQ. FT. 480



EXTENDED PROPERTY LINE

SOUNDINGS ARE IN FEET BELOW M. L. W.

DENNIS HUDSON
HOUSE + LOT

118.47'

369.99'

RIVER ROAD

SEC 13 TWP. 38 RGE. 41
 PROPOSED DOCK FOR
 MR. DENNIS HUDSON JR,
 157 S. RIVER RD.
 SEWALLS POINT
 DWN. DH. 10/23/86
 SCALE: 1" = 30'
 SHEET 1 of 3

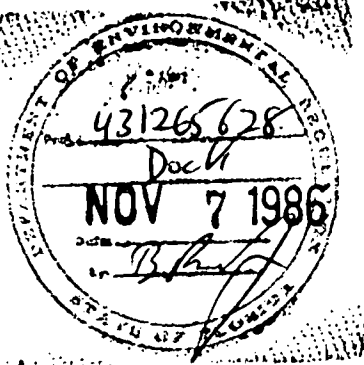
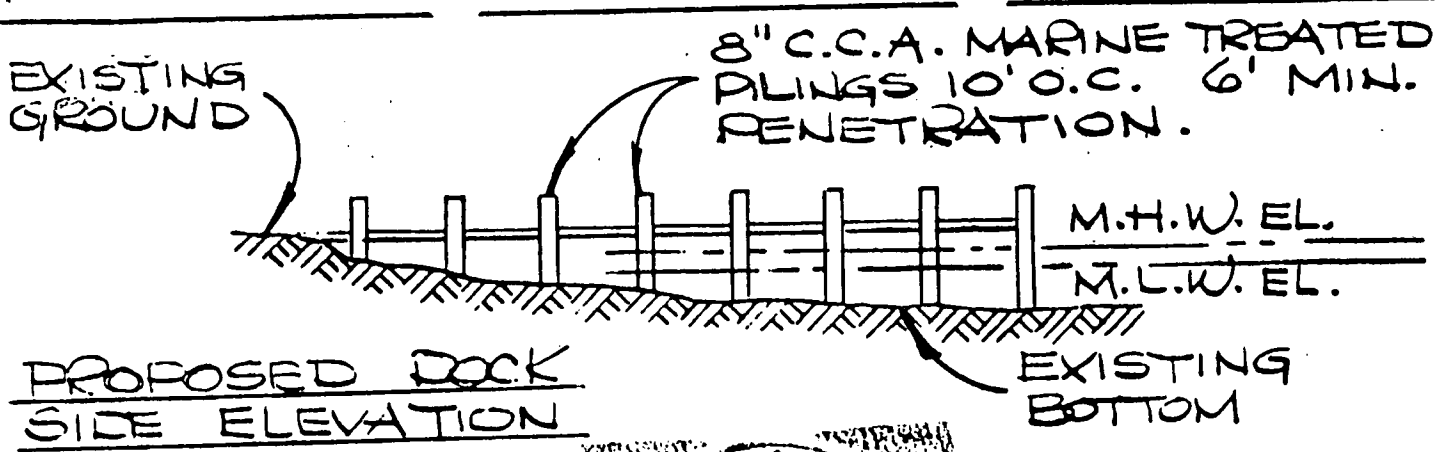
DATE: _____

ASSOCIATED MARINE CONSULTANTS

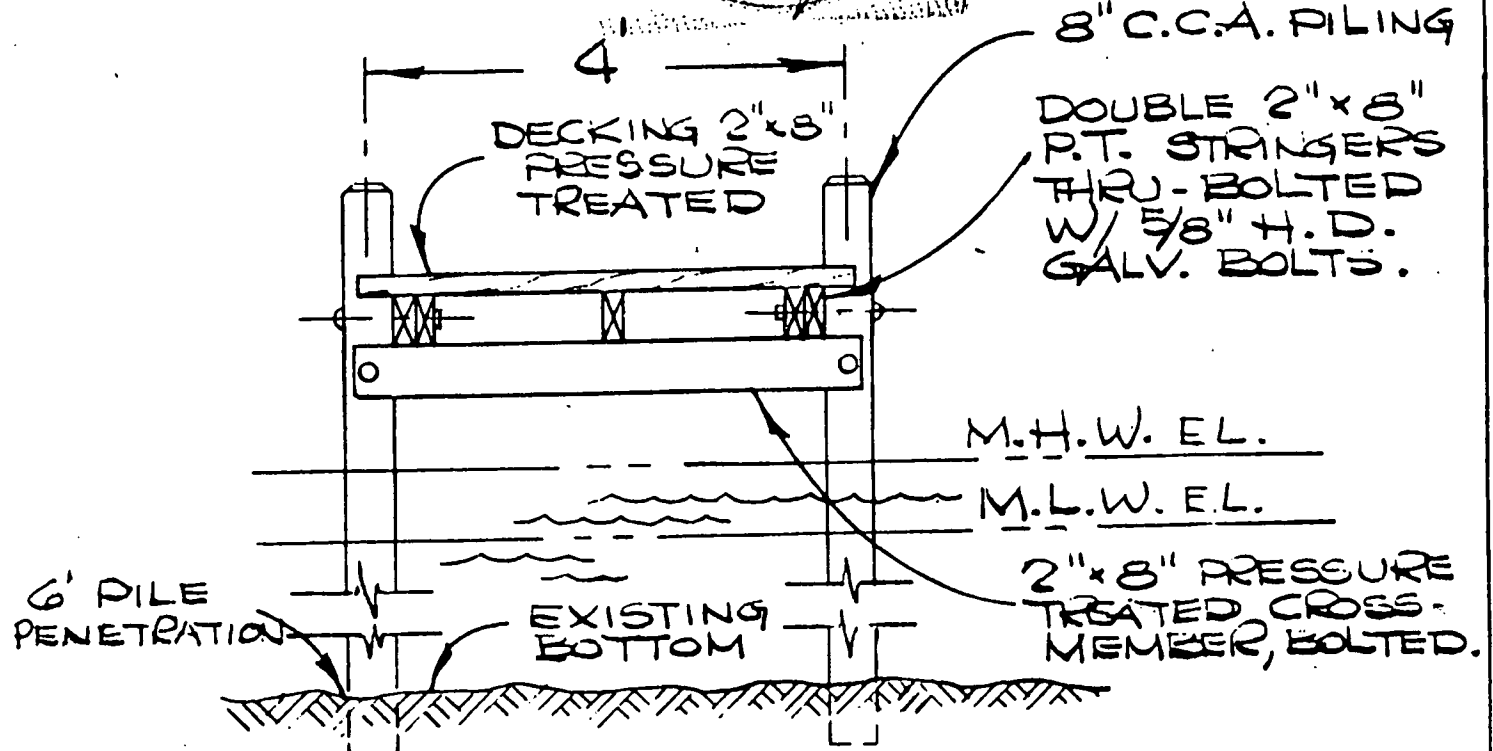
PROFESSIONAL ENGINEER
 FLORIDA REGISTRATION NO. _____

1288 SOUTH DADE HIGHWAY STUART, FLORIDA 34993

P.C.N. # 13-38-41-000-000-00083-5



PLAN VIEW



DOCK SECTION "A-A"

P.C.N.# 13-38-41-000-000-00083-5

PROPOSED DOCK FOR MR. DENNIS HUDSON JR, RIVER RD, SEWALLS POINT	ASSOCIATED MARINE CONSULTANTS
	1350 S. DIXIE HWY. STUART, FLA. 33494 (305) 233-8509
DRN. 10/23/86 DH	GHK'D.
SEC. 13 TWP. 38 RGE. 41	SHEET 2 OF 3

NOT TO SCALE



State of Florida
DEPARTMENT OF NATURAL RESOURCES

DR. ELTON J. GISSENDANNER
Executive Director
Marjory Stoneman Douglas Building
3900 Commonwealth Boulevard, Tallahassee, Florida 32303

BOB GRAHAM
Governor
GEORGE FIRESTONE
Secretary of State
JIM SMITH
Attorney General
GERALD A. LEWIS
Comptroller
BILL GUNTER
Treasurer
DOYLE CONNER
Commissioner of Agriculture
RALPH D. TURLINGTON
Commissioner of Education

November 14, 1986

Associated Marine Consultants
1350 South Dixie Highway
Stuart, Florida 33494

Dear Sir:

File No. 431265628
Applicant: Hudson, Jr., Dennis

Enclosed is the approved application for your proposed project, showing the location in the St Lucie River adjacent to 1575 River Road, City of Sewall's Point, Martin County. This approval is for the installation of a private single family dock consisting of a 4' X 80' access pier and a 40' X 4' terminal platform.

This constitutes the authority sought under Section 253.77, Florida Statutes, to pursue this project.

This letter in no way waives the authority and/or jurisdiction of any governmental entity nor does this letter disclaim any title interest that the State may have in this project site.

Sincerely,

David K. Roach
Division of State Lands
Southeast Florida District Office

DKR/bs
cc: DER/PSL

COPY

RECEIVED

NOV 8 1986

Dept. of Natural Resources
Div. of State Lands Southeast
Florida Field Office

JOINT APPLICATION
DEPARTMENT OF THE ARMY/FLORIDA DEPARTMENT OF ENVIRONMENTAL REGULATION
For Activities in the Waters of the State of Florida

CORPS APPLICATION NUMBER (official use only)

DER APPLICATION NUMBER (official use only)

4312165628

1. APPLICANT'S NAME AND ADDRESS

S.

MIMI DIEININISI IHUIDISIOINI, JIRI
NAME

157 IS RIVIERE RIOADI
STREET

SITWAIRTI
CITY

FL 33494
STATE ZIP

TELEPHONE NUMBER (Day) () (Night) ()

2. Name, address, zip code and title of applicant's authorized agent or person in application coordination

Associated Marine Consultants
1350 S. Dixie Hwy.
Stuart FL 3494
Telephone Number (305) 283-8509

APPROVED
Department of Natural Resources
pursuant to Section 253-77, F.S.
on November 13, 1986
For ORIGINAL DER REVISED
By [Signature]
Division of State Lands

3. NAME OF WATERWAY AT LOCATION OF THE ACTIVITY.

St. Lucie River

4. LOCATION WHERE PROPOSED ACTIVITY EXISTS OR WILL OCCUR.

157 S. River Rd.
Street, road or other descriptive location

Sewall's Point
Incorporated city or town

Martin
County

13 38 41
Section Township Range
27° 11' 10" N 80° 11' 30" W
Latitude Longitude

Tax Assessors Description: (if known)

Map No. Subdiv. No. Lot No.

5. NAME AND ADDRESS INCLUDING ZIP CODE OF ADJOINING PROPERTY OWNERS WHOSE PROPERTY ALSO ADJOINS THE WATERWAY.

- ① DALE HUDSON % FIRST NAT. BANK 815 COLORADO AVE STUART FL
- ② KIPLINGER WASH. LETTER 1729 H. STREET NW WASHINGTON D.C. 20006

6. PROPOSED USE

Private Single Dwelling Private Multi-dwelling [] Public []
Commercial [] Other [] (Explain in remarks)

8. Date activity is proposed to commence _____, to be completed _____.

9. Previous permits for this project have been _____ DER # _____ Corps # _____

A. Denied (date) _____

B. Issued (date) _____

C. Other (please explain) NA

Differentiate between existing work and proposed work on the drawings.

10. Remarks (See Instruction Pamphlet for additional information required for all applications and certain activities. Use additional sheets if necessary.)

11. AFFIDAVIT OF OWNERSHIP OR CONTROL of the property on which the proposed project is to be undertaken

I CERTIFY THAT: (please check appropriate space)

[] I am the record owner, lessee, or record easement holder of the property described below.

[] I am not the record owner, lessee, or record easement holder of the property described below, but I will have before undertaking the proposed work the requisite property interest. (Please explain what the interest will be and how it will be acquired.)

LEGAL DESCRIPTION OF PROPERTY SITUATED IN _____ COUNTY, FLORIDA
(Use additional sheets if necessary)

Sworn and subscribed before me at _____ County,
Florida, this 24 day of Oct, 1986

[Signature]
Signature

[Signature]
NOTARY PUBLIC

My commission expires: _____
BONDED THRU GENERAL INS. UMD.

MOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. JAN 29, 1989

ASSOCIATED MARINE CONSULTANTS

feasibility, development, engineering, design, permitting and management consultants

1350 SOUTH DIXIE HIGHWAY STUART, FLORIDA 33494 (305) 283-8509

To Whom It May Concern:

This letter is to state that I am authorizing
Associated Marine Consultants as agent to act
on my behalf in the permitting of the
on my property.

Signed, *Barbara S. Woodcock*

Dated, 10-24-86

INFORMATION NEEDED ON AFFIDAVIT OF OWNERSHIP OR CONTROL

1. The affidavit of ownership or control should be signed by at least one owner of the property, lessee, or easement holder.
2. If subdivided, the property should be described by lot number, block number (if any), name of subdivision, and plat book number and page where recorded.
3. If unplatted, the property should be described by section, township, and range, and subdivision of section.
4. If the description is based on courses and distances not following the plane coordinates, the point of beginning should be identified.

Please contact this office should clarification or further instructions be necessary.

AFFIDAVIT OF OWNERSHIP OR CONTROL

TO THE DEPARTMENT OF ENVIRONMENTAL REGULATION:

I hereby certify that I am the (check one):

record owner *Kevin A. Hedgcock*
 lessee _____
 record ease-
 ment holder _____
 applicant to record owner for
 easement _____

of the below described property situated in _____ County, Florida; and that said property is all the property that is contiguous to and landward of the area in which the work proposed in the permit application is to be conducted. Furthermore, I certify that as record owner, lessee, or record easement holder I have or will have prior to undertaking the work all necessary approvals or permission from all other persons with a legal interest in said property to conduct the work proposed in the permit application.

LEGAL DESCRIPTION

Sec 13 Twp. 38 Rge 41

Kevin A. Hedgcock

Sworn to and subscribed before me at _____
Martin County, *Florida*, this *24* day
of *04*, 19*86*.

Angela Menden
NOTARY PUBLIC

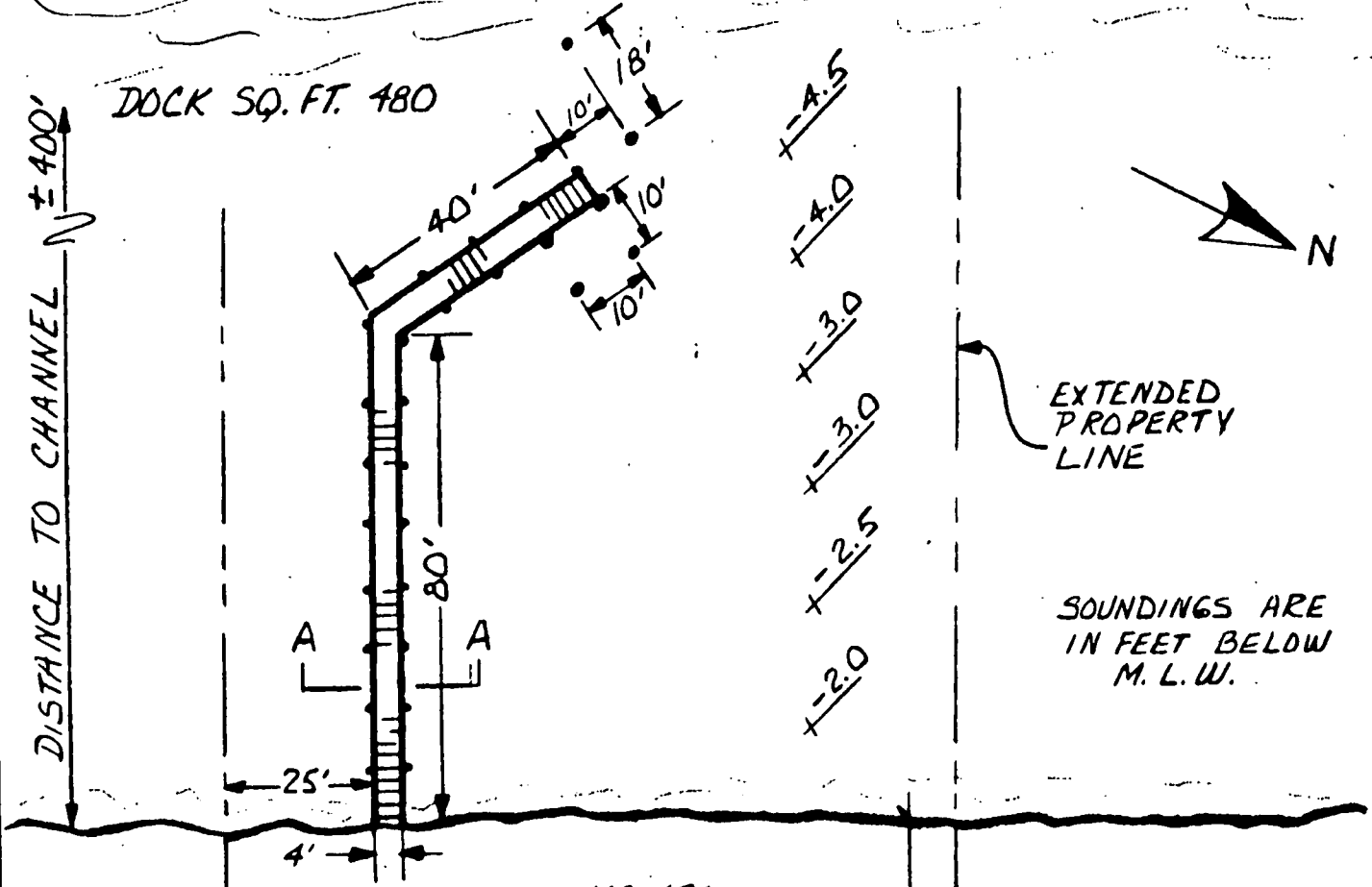
My commission expires:

NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. JAN 29, 1988
BONDED THRU GENERAL INS. UND.

ST LUCIE RIVER

DOCK SQ. FT. 480

DISTANCE TO CHANNEL ±400'



EXTENDED PROPERTY LINE

SOUNDINGS ARE IN FEET BELOW M. L. W.

DENNIS HUDSON HOUSE + LOT

RIVER ROAD

SEC 13 TWP. 38 RGE. 41

PROPOSED DOCK FOR MR. DENNIS HUDSON JR, 157 S. RIVER RD. SEWALLS POINT

DWN. DH. 10/23/86

SCALE: 1" = 30'

SHEET 1 OF 3

DATED: _____

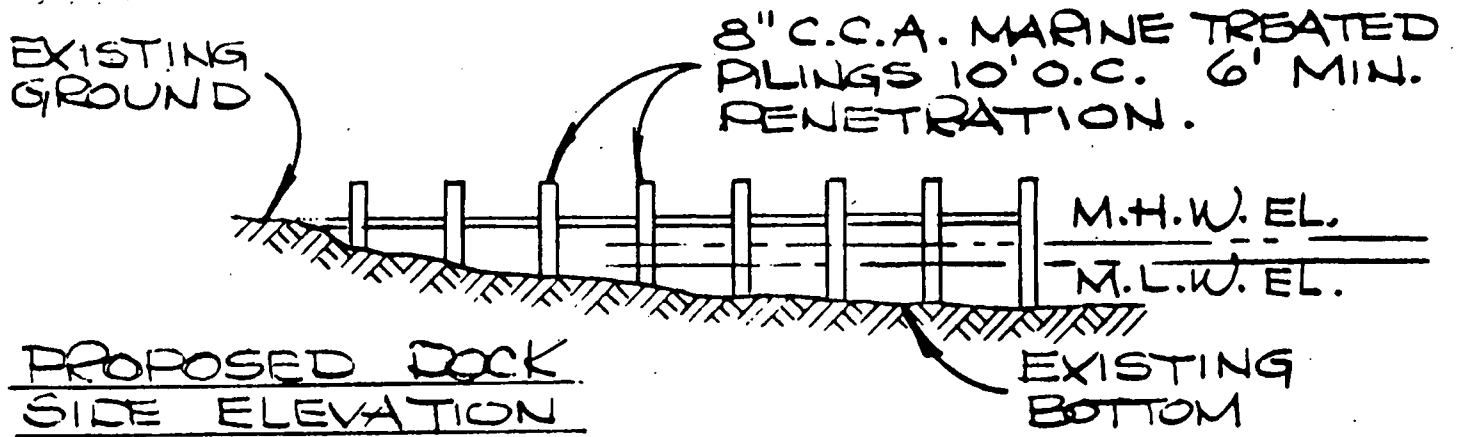
ASSOCIATED MARINE CONSULTANTS

1888 SOUTH OAK HIGHWAY STUART, FLORIDA 33994

PROFESSIONAL ENGINEER FLORIDA REGISTRATION NO.

P.C.N. # 13-38-41-000-000-00083-5

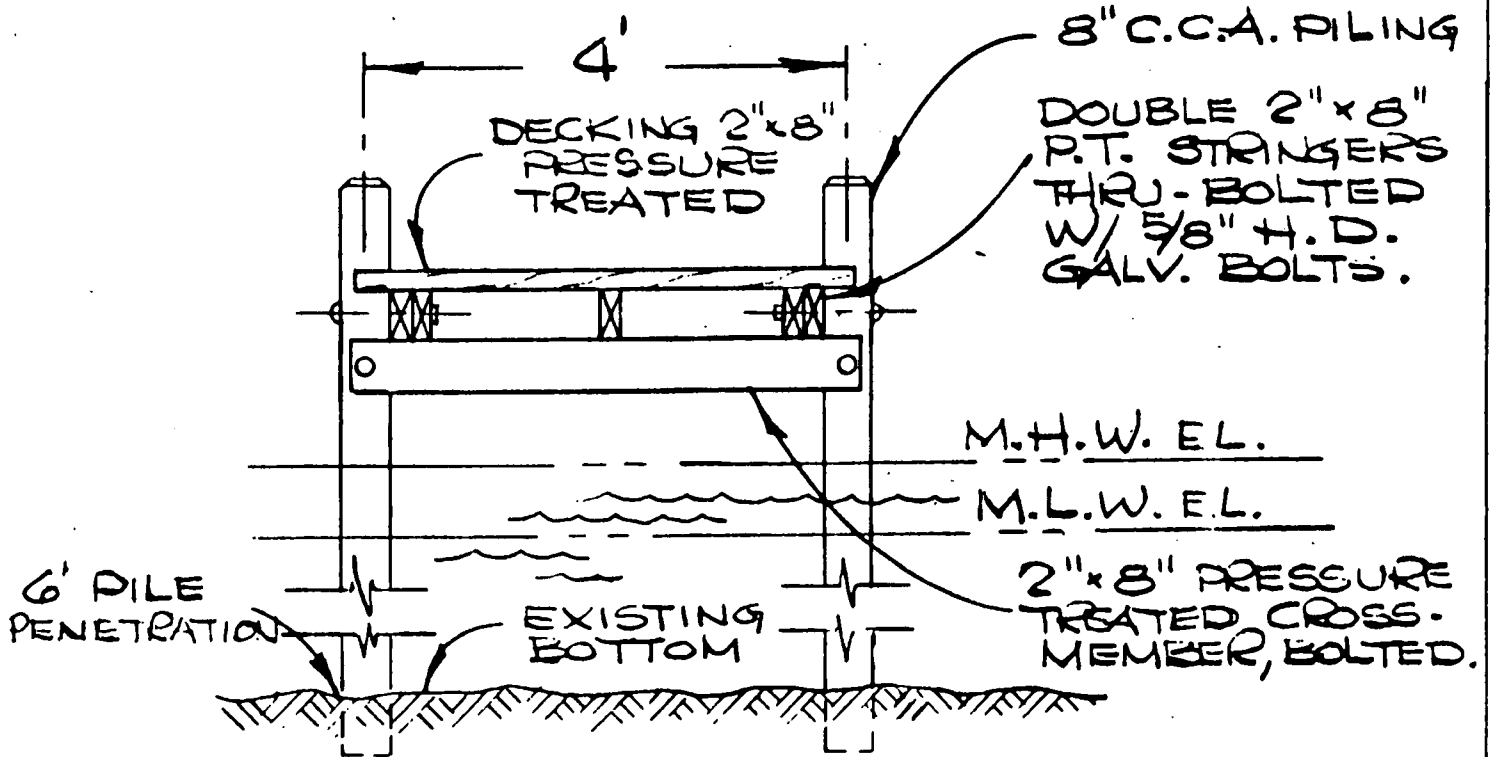




PROPOSED DOCK
SIDE ELEVATION

EXISTING
BOTTOM

PLAN VIEW



DOCK
SECTION "A-A"

P.C.N.# 13-38-41-000-000-00083-5

PROPOSED DOCK
FOR MR. DENNIS
HUDSON JR,
RIVER RD,
SEWALLS POINT

ASSOCIATED
MARINE
CONSULTANTS

1350 S. DIXIE HWY.
STUART, FLA. 33494
(305) 233-8509

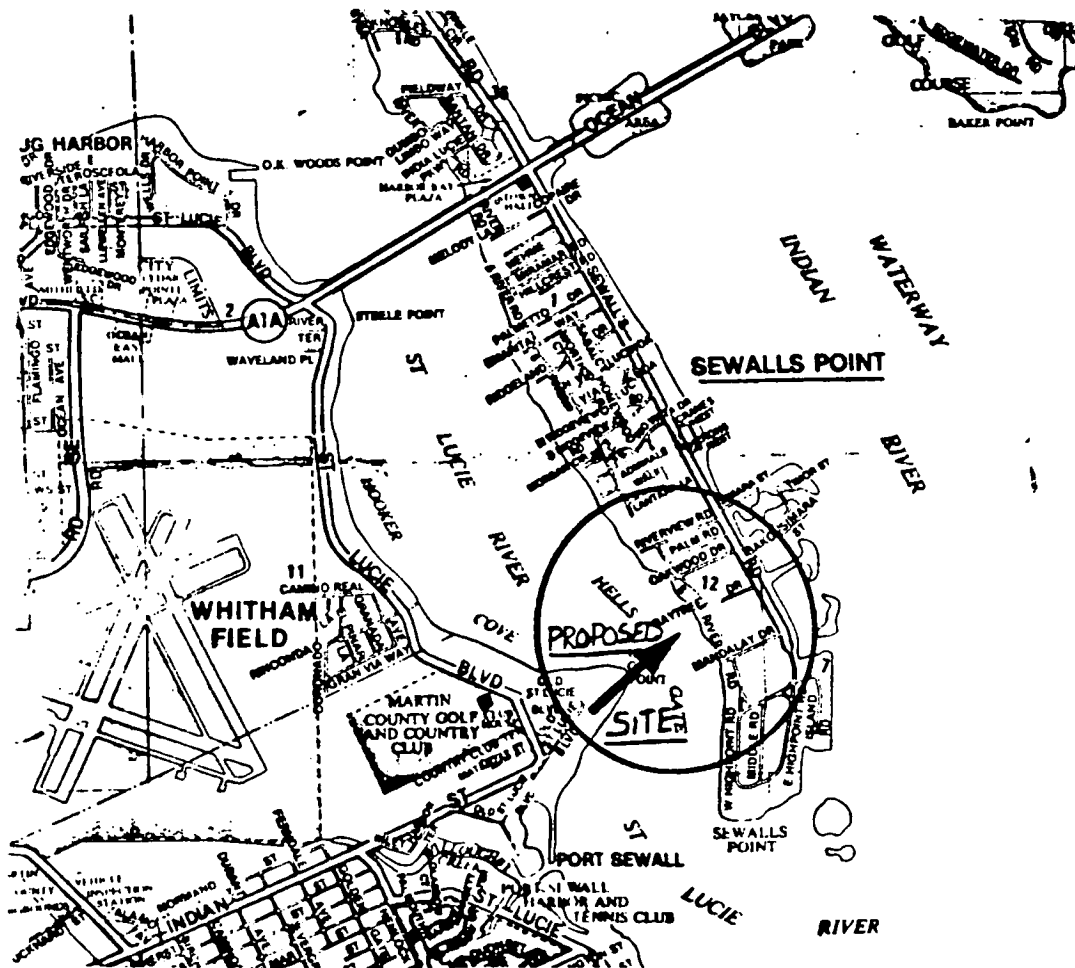
DRN. 10/23/86 DH

GHK'D.

NOT TO SCALE

SEC. 13 TWP. 38 R_{1E}. 41

SHEET 2 OF 3



LAT. 27° 11' 10" N
LO. 80° 11' 30" W

PCN# 13-38-41-000-000-00083-5

LOCATION
MAP

SEC. 13 TWP. 38 RGE 41

PROPOSED DOCK FOR MR. DENNIS HUDSON JR., RIVER RD., SEWALLS POINT		
SCALE:	APPROVED BY:	DRAWN BY <i>DA</i>
DATE: 10/23/86		REVISED
ASSOCIATED MARINE CONSULTANTS		
Stuart Fl	283-8509	DRAWING NUMBER 30F3



DEPARTMENT OF THE ARMY
SOUTH FLORIDA AREA OFC JACKSONVILLE DISTRICT CORPS OF ENGINEERS
P. O. BOX 1327
CLEWISTON, FLORIDA 33440-1327

REPLY TO
ATTENTION OF

November 19, 1986

Regulatory Section
Miami

86GP30501
SAJ-20

Dennis Hudson, Jr.
c/o Associated Marine Consultants
1350 S. Dixie Highway
Stuart, Florida 33494

Dear Mr. Hudson:

Reference is made to your application for a Department of the Army permit concerning:

To construct an angled dock 80' by 4' and 40' by 4' with mooring piles at 157 South River Road in Sewall's Point, Section 13, Township 38 South, Range 41 East, Martin County, Florida.

The project as proposed is authorized by General Permit SAJ- 20 a copy of which is enclosed for your information and use. You are authorized to proceed with the project in accordance with the enclosed drawings subject to all conditions of the permit.

This letter of authorization does not obviate the necessity to obtain any other Federal, state or local permits which may be required.

Thank you for your cooperation with the Corps permit program.

Sincerely,

Charles A. Schnepel
Charles A. Schnepel
Chief, Regulatory Section

Enclosures

COPY



DEPARTMENT OF THE ARMY
JACKSONVILLE DISTRICT, CORPS OF ENGINEERS
P. O. BOX 4970
JACKSONVILLE, FLORIDA 32232

REPLY TO
ATTENTION OF

December 1, 1983

DEPARTMENT OF THE ARMY PERMIT

GENERAL PERMIT SAJ-20

PRIVATE SINGLE-FAMILY PIERS - STATE OF FLORIDA

Upon recommendation of the Chief of Engineers, pursuant to Section 10 of the Rivers and Harbors Act of 3 March 1899 (33 U.S.C. 403), general authority is hereby given to construct private single-family piers in navigable waters of the United States within the State of Florida subject to the following conditions:

SPECIAL CONDITIONS:

1. Structures authorized under this general permit are private single-family piers including normal appurtenances such as boat hoists, boat shelters with open sides, stairways, walkways, mooring piling, dolphins, and maintenance of same.
2. No work shall be performed until the applicant submits satisfactory plans for the proposed structure and receives written authorization from the District Engineer.
3. No structures shall be authorized by this general permit that are in Department of Natural Resources established manatee speed zone areas or the Kings Bay/Crystal River Waterway. Work in these areas will require an individual permit.
4. In the Intracoastal and Okeechobee Waterways, no structure authorized under this general permit will be within 100 feet from the near bottom edge of the channel unless it is a 5-foot marginal pier.
5. The structure should be consistent with other structures in the area.
6. No living, fueling, or storage facilities over navigable waters of the United States are authorized under this general permit.
7. The structure shall not adversely affect or disturb properties listed as eligible for inclusion in the National Register of Historic Places.
8. No structures shall be authorized by this general permit on the following environmentally sensitive areas identified in the Wild and Scenic Rivers Act (16 U.S.C. 1371, et seq.): The Northwest Fork of the Loxahatchee River; and that portion of the Myakka River within the Myakka River State Park. These activities shall require an individual permit.

GENERAL CONDITIONS

a. That all activities identified and authorized herein shall be consistent with the terms and conditions of this permit; and that any activities not specifically identified and authorized herein shall constitute a violation of the terms and conditions of this permit which may result in the modification, suspension or revocation of this permit, in whole or in part, as set forth more specifically in General Condition j hereto, and in the institution of such legal proceedings as the United States Government may consider appropriate, whether or not this permit has been previously modified, suspended, or revoked in whole or in part.

b. That all activities authorized herein shall, if they involve a discharge or deposit into navigable waters or ocean waters, be at all times consistent with applicable water quality standards, effluent limitations and standards of performance, prohibitions, and pretreatment standards established pursuant to Sections 301, 302, 306, and 307 of the Federal Water Pollution Control Act of 1972 (P.L. 92-500; 86 Stat. 816), or pursuant to applicable State and local law.

c. That when the activity authorized herein involves a discharge or deposit of dredged or fill material into navigable waters, the authorized activity shall, if applicable water quality standards are revised or modified during the term of this permit, be modified if necessary, to conform with such revised or modified water quality standards within 6 months of the effective-date of any revision or modification of water quality standards, or as directed by an implementation plan contained in such revised or modified standards, or within such longer period of time as the District Engineer, in consultation with the Regional Administrator of the Environmental Protection Agency, may determine to be reasonable under the circumstances.

d. That the permittee agrees to make every reasonable effort to prosecute the construction or work authorized herein in a manner so as to minimize any adverse impact of the construction or work on fish, wildlife, and natural environmental values.

e. That the permittee(s) agree to prosecute the construction or work authorized herein in a manner so as to minimize any degradation of water quality.

f. That the permittee shall permit the District Engineer or his authorized representative(s) or designee(s) to make periodic inspections at any time deemed necessary in order to assure that the activity being performed under authority of this permit is in accordance with the terms and conditions prescribed herein.

SAJRD
GENERAL PERMIT

g. That the permittee shall maintain the structure or work authorized herein in good condition and in accordance with the plans and drawings that are approved.

h. That this permit does not convey any property rights, either in real estate or material, or any exclusive privileges; and that it does not authorize any injury to property or invasion of rights or any infringement of Federal, State, or local laws or regulations, nor does it obviate the requirement to obtain State or local assent required by law for the activity authorized herein.

i. That this permit does not authorize the interference with any existing or proposed Federal project and that the permittee shall not be entitled to compensation for damage or injury to the structures or work authorized herein which may be caused by or result from existing or future operations undertaken by the United States in the public interest.

j. That this permit may be either modified, suspended, or revoked in whole or in part if the Secretary of the Army or his authorized representative determines that there has been a violation of any of the terms or conditions of this permit or that such action would otherwise be in the public interest.

k. That in issuing approval to perform work under this permit the Government has relied on the information and data which the permittee has provided in connection with his application. If, subsequent to the issuance of approval, such information and data prove to be false, incomplete, or inaccurate, this permit may be modified, suspended, or revoked, in whole or in part and/or the Government may, in addition, institute appropriate legal proceedings.

l. That any modification, suspension, or revocation of this permit shall not be the basis for any claim for damages against the United States.

m. That no attempt shall be made by the permittee to prevent the full and free use by the public of all navigable waters at or adjacent to the activity authorized by this permit.

n. That if the display of lights and signals on any structure or work authorized herein is not otherwise provided for by law, such lights and signals as may be prescribed by the United States Coast Guard shall be installed and maintained by and at the expense of the permittee.

o. That this permit does not authorize or approve the construction of particular structures, the authorization or approval of which may require authorization by the Congress or other agencies of the Federal Government.

9. Authorization under this general permit is contingent upon the issuance of authorization from the Florida Department of Environmental Regulation.

10. A structure authorized under this general permit must not interfere with general navigation.

11. A structure which by its size or location may adversely affect water quality, fish and wildlife habitat, or photosynthetic processes will not be authorized under this general permit.

12. No work shall be performed until after notification of the owner or operator of any marked utilities in the area of the structure.

13. This general permit will be valid until suspended or revoked by issuance of a public notice by the District Engineer. Reviews will be conducted to determine if continuance of the permit is in the public interest.

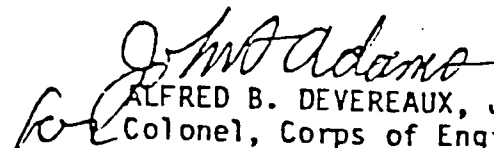
14. Conformance with the description contained herein does not necessarily guarantee authorization under this general permit.

15. If the issuance of authorization under this permit is found or suspected of affecting the continued existence of an endangered species, the activity will not be authorized by this general permit, and an individual permit will be required.

16. The District Engineer reserves the right to require that any request for authorization under this general permit be processed as an individual permit.

16. The General Conditions attached hereto are made a part of this permit (Incl 1).

BY AUTHORITY OF THE SECRETARY OF THE ARMY:


ALFRED B. DEVEREAUX, JR.
Colonel, Corps of Engineers
District Engineer

3331

RE-ROOF

287-2455

TAX FILE NO.

DATE 1-20-93

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.

X Owner Demir A. Whelan Jr Present Address 157 South River Road

Phone _____

Contractor William Const Address 9027 SE Pine Cone Ln Hobe-Sound

Phone 546-6579 FL 33455

Where licensed State License Number PC 0048030

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: old shake roof to be removed and replaced

with a new shake roof.

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

157 South River Road.

Subdivision HARGON GRANT Lot Number _____ Block Number _____

Contract Price \$ 13,750.17 Cost of Permit \$ 104.00

Plans approved as submitted 1 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 of 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.

X Owner [Signature]

TOWN RECORD H 325-177-28-08476

Date submitted _____

Approved: [Signature]
Building Inspector Date

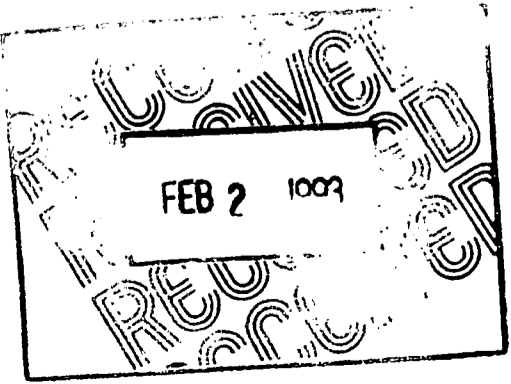
Approved: [Signature] 2/3/93
Commissioner Date

Final Approval given: _____
Date

Certificate of Occupancy issued(if applicable) _____
Date

SP1282

Permit No. _____



WILFRAM CONSTRUCTION

ROOFING CONTRACTOR
9027 SE PINE CONE LANE HOBE SOUND, FLORIDA 33455
(407) 546-6579

- OLD ROOF TO BE REMOVED
 OLD ROOF TO REMAIN AND NEW ROOF TO BE INSTALLED OVER EXISTING ROOF.
 NEW ROOF TO BE 20 30 40 YEAR FIBERGLASS SHINGLES, ON #30 FELT.
 NEW ROOF TO BE CEDAR SHAKES MEDIUM HEAVY P.T., ON #30 FELT.
 NEW ROOF TO BE CONCRETE TILES MUD DOWN NAIL DOWN, ON #90 ON #30 FELT.
 NEW ROOF TO BE MASONITE* WOOD SHINGLES, ON #30 FELT.
 NEW ROOF TO BE 26 GA. GALV. METAL, ON #30 FELT.

RIDGE VENT TO BE INSTALLED AS NEEDED YES NO.

- FLAT ROOF TO REMAIN (NOT INCLUDED IN THIS CONTRACT)
 FLAT ROOF TO BE REMOVE.

- NEW FLAT ROOF TO BE THREE PLYS B.U. ROOF SYSTEM WITH PAINT GRAVEL.
 NEW FLAT ROOF TO BE SINGLE-PLY MODIFIED BITUMEN SYSTEM 170 M. 250 M.
 NEW FLAT ROOF TO BE EPDM RUBBER .045 .060 INSTALLED AS PER MANU.

FLASHING TO BE 26 GA. GALVANIZED METAL 16OZ. COPPER .023 ALUMINUM.

FASTENERS TO BE 1" CROWN STAPLES 6-8D BOX NAILS 1" ROOF NAILS
 7/16" CROWN STAPLES STAINLESS GALVANIZED

NOTICE OF COMMENCEMENT

981015

STATE OF FLORIDA
COUNTY OF MARTIN

The undersigned hereby informs all concerned that improvements will be made to certain real property, and in accordance with Section 713.13, Florida Statutes, the following information is stated in this NOTICE OF COMMENCEMENT. This notice shall be void and of no force and effect if construction is not commenced within 30 days of recordation.

DESCRIPTION OF PROPERTY:

General description of improvements: old shingle roof to be removed and replaced with new shingle roof

Owner: Dennis Hudson Jr.
Address: 157 South River Road

Owner's interest in site of the improvement: 100%

Contractor: Will From Const
Address: 9027 S.E. Pine Cove Ln Hobe Sound, FL 33455

Surety (if any): N/A
Address: _____
Amount of Bond: _____

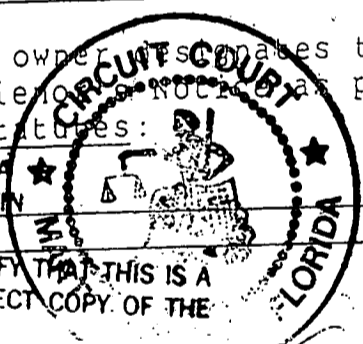
Lender: N/A
Address: _____

Name of person within the State of Florida designated by owner upon whom notices or other documents may be served:

Name: N/A
Address: _____

In addition to himself, owner designates the following person to receive a copy of the Lien and Notice as provided in Section 713.06(2)(b), Florida Statutes:

Name: _____
Address: _____



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

MARSHA STILLER, CLERK
BY D. L. Langford D.C.
DATE 1/25/93

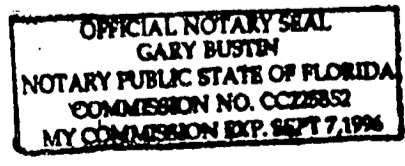
[Signature]
H 325-177-28-054-0

Sworn to and subscribed before me this 20th day of January, 1993.

[Signature]

(NOTARY SEAL)

I am a Notary Public of the STATE OF FLORIDA AT LARGE, and My Commission Expires: _____



7507

WINDOWS

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/26/05

BUILDING PERMIT NO. 7507

Building to be erected for HUDSON

Type of Permit WINDOW REPLACEMENT

Applied for by CURRINGTON DEV.

(Contractor) Building Fee ~~\$50k x 9.60/1000~~ 480.00

Subdivision Notes + Bounds Lot Pt 7 Block _____

Radon Fee _____

Address 157 S. RIVER ROAD

Impact Fee _____

Type of structure SEE

A/C Fee _____

Parcel Control Number:

1338410000000008190000

Electrical Fee _____


Plumbing Fee _____

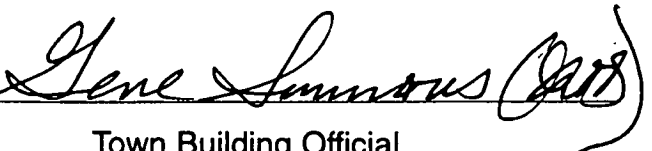
Roofing Fee _____

Amount Paid 480.00 Check # 1245 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 50,000

TOTAL Fees 480.00

Signed 
Applicant

Signed 
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 WINDOWS |

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: _____

BY: _____
Date: 7-18-05

OWNER/TITLEHOLDER NAME: ANNE P HUDSON DEMNIS S HUDSON, JR Phone (Day) 772-283-7217 (Fax) NONE

Job Site Address: 157 South Rivon Road City: STUART State: FLA Zip: 34996

Legal Desc. Property (Subd/Lot/Block) SEE ATTACHED Parcel Number: 13-38-41-000-000-000B1-9

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

Description of Work To Be Done: INSTALL IMPACT WINDOWS

WILL OWNER BE THE CONTRACTOR?:

YES NO

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

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 50,000 =
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to Improvement: \$ 2,225,000 =

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

Method of Determining Fair Market Value: APPRAISAL

CONTRACTOR/Company: CURINGTON MARINE CONTRACT INC Phone: 352 272 7839 Fax: 352 351 5044

Street: 2652 NE 24ST City: OCCAWA State: FL Zip: 34470

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

SUBCONTRACTOR INFORMATION: N/A.

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

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

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 3,001 Garage: 608 Covered Patios: N/A Screened Porch: N/A

Carport: 228 Total Under Roof 3,001 Wood Deck: 1408.99 Accessory Building: 608

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

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

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

OWNER OR AGENT SIGNATURE (required)
Dennis Hudson Jr.

State of Florida, County of: MARTIN

This the 22 day of APRIL, 2005

by DENNIS HUDSON JR. who is personally

known to me or produced _____

as identification. Rollie Brian Roberts
Notary Public

My Commission Expires: _____

CONTRACTOR SIGNATURE (required)
John W. Curington

On State of Florida, County of: MARION

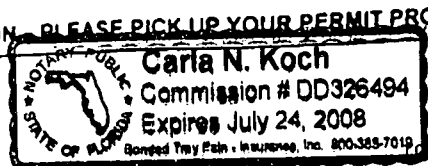
This the 20th day of April, 2005

by John W. Curington who is personally

known to me or produced _____

As identification. _____
Notary Public

My Commission Expires: _____
Seal



NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROMPTLY!



CITY OF OCALA OCCUPATIONAL LICENSE TAX CERTIFICATE

P.O. BOX 1270
OCALA, FLORIDA 34478-1270
(352) 629-8421
2004-2005

LICENSE

BUSINESS NO 37658

Bus. License A33573

PAID DATE

04/20/2005

Type of Business: ADMINISTRATIVE OFFICE

LICENSE FEE DESCRIPTION	AMOUNT
General Business based on SqFt	\$17.50

B
U
S
I
N
E
S
S

CURINGTON DEVELOPMENT, INC
CURINGTON, JOHN & DAN
(352) 732-7839

IS HEREBY LICENSED TO ENGAGE IN BUSINESS LOCATION

2652 NE 24 ST

MAILING ADDRESS
CURINGTON DEVELOPMENT, INC
2652 NE 24 ST
Ocala, FL 34470

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
03/07/2005

PRODUCER
Advanced Insurance Und. (10)
P.O. Box 6
% Scot Brown
Ocala, FL 34478

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
Curington Contracting, Inc.
2652 NE 24th St
Ocala, FL 34470-3938

INSURER A: **Quanta Specialty Lines Ins. Co. (HB)**
INSURER B: **Scottsdale Insurance Company (MCS)**
INSURER C: **Progressive Company**
INSURER D: **Bridgefield Employers Ins. Co. (SCI)**
INSURER E:

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	00014706	12/03/04	10/01/05	EACH OCCURRENCE \$1,000,000
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> OCP GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CLS1048772	12/03/04	10/01/05	FIRE DAMAGE (Any one fire) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
C	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	CA019492272	12/15/04	12/15/05	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 AUTO ONLY: EA ACC \$ AGG \$
A	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$	QAX00028700	12/03/04	10/01/05	EACH OCCURRENCE \$1,000,000 AGGREGATE \$2,000,000 \$ \$ \$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	83028646	03/01/05	03/01/06	WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000
	OTHER				

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

License Holder: Daniel T. Curington, State License # CGC014568

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER: _____

CANCELLATION

Sewall's Point Building Dept.
One South Sewall's Point Rd
Sewall's Point, FL 34996

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

AC#1672685

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L04100800235

DATE	BATCH NUMBER	LICENSE NBR
10/08/2004	040063223	QB35300

The BUSINESS ORGANIZATION
Named below IS QUALIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2005
(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)

CURINGTON DEVELOPMENT INC
2652 N E 24TH STREET
OCALA FL 34470

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

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):

SEE ATTACHED

GENERAL DESCRIPTION OF IMPROVEMENT: INSTALL IMPACT WINDOWS

OWNER: Dennis S. Hudson, Jr & Anne P Hudson

ADDRESS: 157 South River Road, STUART, FLA., 34996

PHONE #: 772-283-7217

FAX #: NONE

CONTRACTOR: CURRYTON DEVELOPMENT INC JOHN W. CURRYTON

ADDRESS: 2652 NW 29 ST DEER FL.

PHONE #: 352 732 7839

FAX #: 352 351 5044

SURETY COMPANY(IF ANY) N/A

ADDRESS: _____

PHONE # _____

FAX #: _____

BOND AMOUNT: _____

LENDER: N/A

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

NAME: Dennis S Hudson, Jr

ADDRESS: 157 S. River Rd., STUART, FLA., 34996

PHONE #: 772-283-7217

FAX #: NONE

IN ADDITION TO HIMSELF, OWNER DESIGNATES NONE 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.

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 22 DAY OF April 2005 BY Dennis Hudson Jr.

OR PERSONALLY KNOWN X
PRODUCED ID _____
TYPE OF ID _____

[Signature]
NOTARY SIGNATURE

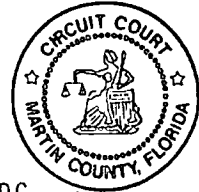
/data/gmd/bzd/bldg_forms/Noc.aw



12/01/99

STATE OF FLORIDA
MARTIN COUNTY

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



BY: [Signature] D.C.
DATE: 4/22/05

INSTR # 1832837
OR BK 02005 PG 2392
RECORDED 04/22/2005 12:16:49 PM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY C Walsh



Manufacturer of Windows,
Doors and Patio Rooms

1070 Technology Drive
Nokomis, FL 34275

Post Office Box 1529
Nokomis, FL 34274
www.pgtindustries.com

Telephone 941.480.1600
Fax 941.480.1900

Toll Free 800.282.6019
Fax 800.477.3655

Fax Transmittal Sheet

To: Faxback System User

From: PGT Industries Engineering Department

Fax Number:

Number of pages including cover: (Unknown)

Phone:

Date:

Re:

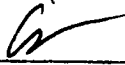
CC:

COMMENTS:

Dear Valued Customer,

Thank you for using the PGT Industries fax-back system. Please take a moment to review the materials you've just received to ensure that these materials meet your Dade County or other certifications needs. Items such as anchor spacing, design pressure, glass type, and maximum window or door sizes are clearly defined in Dade County Notices of Acceptance. It is important to check that your job requirements are within the limits set by the NOA.

Thank you for choosing PGT Industries!

<p align="center">FIELD COPY TOWN OF SEWALL'S POINT THESE PLANS HAVE BEEN REVIEWED FOR CODE COMPLIANCE DATE: <u>4/25/08</u>  _____ BUILDING OFFICIAL Gene Simmons</p>



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

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

NOTICE OF ACCEPTANCE (NOA)

**PGT Industries
1070 Technology Drive
Nokomis, FL 34274**

SCOPE:

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

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

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

DESCRIPTION: Series "HS 710" Aluminum Horizontal Sliding Window

APPROVAL DOCUMENT: Drawing No.4112, titled "Aluminum Horizontal Sliding Window", sheets 1 through 6 of 6, prepared by PGT Industries, dated 2/16/98, with revisions 12/29/03 signed sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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

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

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

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

This NOA revises NOA # 02-0305.02 and, consists of this page 1 and evidence page E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by Theodore Berman, P.E.

3/17/2004 

**NOA No 03-0612.06
Expiration Date: May 20, 2007
Approval Date: April 08, 2004
Page 1**



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

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

NOTICE OF ACCEPTANCE (NOA)

**PGT Industries
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 High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series "740" Aluminum Projected Window

APPROVAL DOCUMENT: Drawing No. 7052-7, titled "Alum. Projected Window, impact", sheets 1 through 11 of 11, prepared by manufacturer, dated 2/24/03, with revision date 8/26/03, signed and sealed by Lucas Turner, P.E., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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

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

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

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

This NOA consists of this page 1 as well as approval document mentioned above.

The submitted documentation was reviewed by Theodore Berman, P.E.

OB
10/6/2003

**NOA No 03-0514.10
Expiration Date: November 06, 2008
Approval Date: November 06, 2003
Page 1**



BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

PGT Industries
1070 Technology Drive
Nokomis, FL 34274

SCOPE:

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

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

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

DESCRIPTION: Series C-740 Aluminum Casement Window - Impact

APPROVAL DOCUMENT: Drawing No. 7045-8, titled "Aluminum Casement Window, Impact", sheets 1 through 12 of 12, dated 12/17/02 with revision C dated 7/10/03, prepared by manufacturer, signed and sealed by Lucas A. Turner, P.E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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

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

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

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

This NOA revises NOA # 02-1224.02 consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by Manuel Perez, P.E.



NOA No 03-0611.02
Expiration Date: May 22, 2008
Approval Date: October 9, 2003
Page 1

INSPECTION LOG FOR ABANDONED/EXPIRED PERMITS

PERMIT #	OWNER'S NAME	ADDRESS	DESCRIPTION	APPROVED BY & DATE
6348	HOFFLER	173 S.S.P.R.	REPLACE WINDOW.	AV 12/29/08
7661	LITCHEY	5 MIDDLE RD.	" A/C	AV 12/29/08
6788	MACRI	6 AOMINAL WALK	WORK NOT DONE	AV 12/29/08
7507	HUDSON	157 S. RIVER	REPLACE WINDOWS	AV 12/29/08
7315	COOL	22 N. RIDGEVIEW	WORK DONE	AV 12/29/08
7359	BRODERICK	44 RIO VISTA	" "	AV 12/29/08
6141	FERRARO	4 KINGSTON CT.	" "	AV 12/29/08
6749	NAUDIN	19 N. RIDGEVIEW	GAR. DONE	AV 12/29/08
6221	RUSSEL	47 S. S. P. R.	WORK DONE	AV 12/29/08
6884	MCMATHON	57 S.S. P. R.	WORK DONE	AV 12/29/08
7470	GARVIN	109 HILLCREST	" "	AV 12/29/08
7475	KNOBEL	58 S.S. P. R.	" "	AV 12/29/08
6199	CONROY	12 PALMETTO	" "	AV 12/29/08
7206	FRIBOURG	9 COPAIRE	" "	AV 12/29/08

9374

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:	9374	DATE ISSUED:	FEBRUARY 23, 2010
SCOPE OF WORK:	AC CHANGEOUT		
CONDITIONS:			
CONTRACTOR:	KRAUSS & CRANE		
PARCEL CONTROL NUMBER:	133841-000-000-000819	SUBDIVISION	HANSON GRANT-LOT 1
CONSTRUCTION ADDRESS:	157 S RIVER RD		
OWNER NAME:	HUDSON		
QUALIFIER:	JOHN CRANE	CONTACT PHONE NUMBER:	287-1227

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

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

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

REQUIRED INSPECTIONS

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

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: _____

Date: 2-16-10

OWNER/TITLEHOLDER NAME: DS HUDSON, JR Phone (Day) 283-7217 (Fax) _____

Job Site Address: 157 S RIVER RD City: SEWALL'S Pt State: FL Zip: 34996

Legal Description _____ Parcel Control Number: _____

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

Scope of work (please be specific): 2 TON CHANGOUT LIKE FOR LIKE

WILL OWNER BE THE CONTRACTOR?

(If yes, Owner Builder questionnaire must accompany application)
YES _____ NO _____

Has a Zoning Variance ever been granted on this property?

YES _____ (YEAR) _____ NO _____
(Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)

Estimated Value of Improvements: \$ 3,800

(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 AEB X

FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:

Estimated Fair Market Value prior to improvement: \$ _____

(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: KRAUSS + COANE INC Phone: 287-1227 Fax: _____

Street: 904 S Dixie Hwy City: STUART State: FL Zip: 34994

State License Number: CAC049286 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: _____ Phone Number: _____

DESIGN PROFESSIONAL: _____ Lic# _____

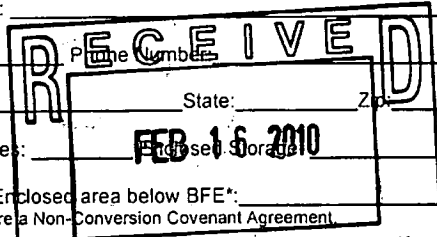
Street: _____ City: _____ State: _____ Zip: _____

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

Carport: _____ Total under Roof _____ Elevated Deck: _____ Enclosed area below BFE*: _____

* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Fire, and Electrical) 2007
National Electrical Code: 2005 Florida Energy Code: 2007 Florida Accessibility Code: 2007 Florida Fire Prevention Code 2007



NOTICES TO OWNERS AND CONTRACTORS:

- 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
- 2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - 5.

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

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

OWNER SIGNATURE: (required)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Dennis S. Hudson, Jr

State of Florida, County of: Martin
This the 15th day of February, 2010

by Dennis S. Hudson, Jr who is personally known to me or produced as identification. [Signature]

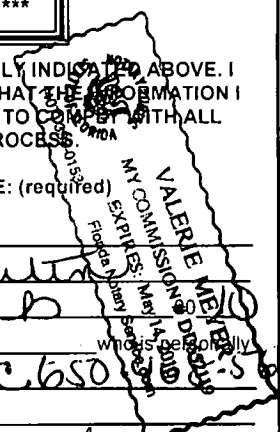
My Commission Expires: _____
Notary Public #DD 724736

CONTRACTOR SIGNATURE: (required)
John Crane

On State of Florida, County of: Martin
This the 16 day of Feb

by John Crane who is personally known to me or produced as identification. [Signature]

My Commission Expires: _____
Notary Public



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



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

Site Provided by...
 governmax.com T1.12

Summary

print Owner 8 of 29

Parcel Info

Summary

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

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
13-38-41-000-000-00081-9	157 S RIVER RD	27640	Owner	0	1

Summary

Property Location 157 S RIVER RD
Tax District 2200 Sewall's Point
Account # 27640
Land Use 101 0100 Single Family
Neighborhood 193170
Acres 1.110

Legal Description

Property Information
 N 118.47' OF LOT 7 LYING W OF RIVER RD - OF S/D OF LOT 1 OF HANSON GRANT

Search By

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

Owner Information
Owner Information
 HUDSON DENNIS S JR

Mail Information
 157 S RIVER RD
 STUART FL 34996-6311

Assessment Info
 Front Ft. 1.00

Market Land Value \$1,585,920
Market Impr Value \$449,020
Market Total Value \$2,034,940

Site Functions

Property Search

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

Recent Sale
Sale Amount \$100

Sale Date 9/1/1982
Book/Page 0552 1941

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

Legal disclaimer / Privacy Statement

Data updated on 2/9/2010



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 4-14 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9374	Hudson 157 S. River Rd	FRAM A/C	PASS	Close
PM	KRAVSS & CRANE			INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9375	Hymemann 4 Michael Rd Gulfstream Alum	Final shutters & windows	PASS	Close
				INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALL'S POINT, FLORIDA

Date DECEMBER 5 1995 TREE REMOVAL PERMIT No 2610

APPLIED FOR BY HUDSON (Contractor or Owner)

Owner 157 S. RIVER ROAD

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 5 3 SCRUB HICKORY, 1 SCRUB OAK, 1 WILD LIME

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

No. Of Trees: REPLACE 3 WITHIN 30 DAYS 2 CABBAGE PALM, 1 LIVE OAK

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant

Signed, [Signature]
Town Clerk
BUILDING OFFICIAL

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Large empty rectangular box for notes or drawings]

PROJECT DESCRIPTION _____

REMARKS _____

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

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

No permit required for:

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

Permit Fee:

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

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

Application procedures:

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

Owner Dennis & Anne Hudson Address 157 S. River Rd. Phone 283-7217

Contractor Shadowood Farm, Inc. Address 6220 S.W. Martin Hwy Phone 283-4375

No. of Trees: REMOVE 5 Type: 3 Scrub Hickory, 1 Scrub Oak, 1 Wild Lime

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

No. of Trees: REPLACE 3 WITHIN 30 DAYS Type: 2 Cabbage Palm, 1 Live Oak

Written statement giving reasons: Wish to enhance front entrance with new trees, 79 new native shrubs & add sod along road. See enclosed NOTE

Signature of Property Owner Anne Hudson Date 12/2/05

Approved by Building Inspector: [Signature] Date 12/5 Fee: 0

Plans approved as submitted [checkmark] Plans approved as revised/marked: _____



Memo From Bob &/or Sarah Fenton

October—May:
6220 S.W. Martin Hwy.
Palm City, FL 34990-5401

Phone: 772-283-4375
Fax: 772-781-5777

Property Owner: Dennis and Ann Hudson
RE: Tree Removal Permit

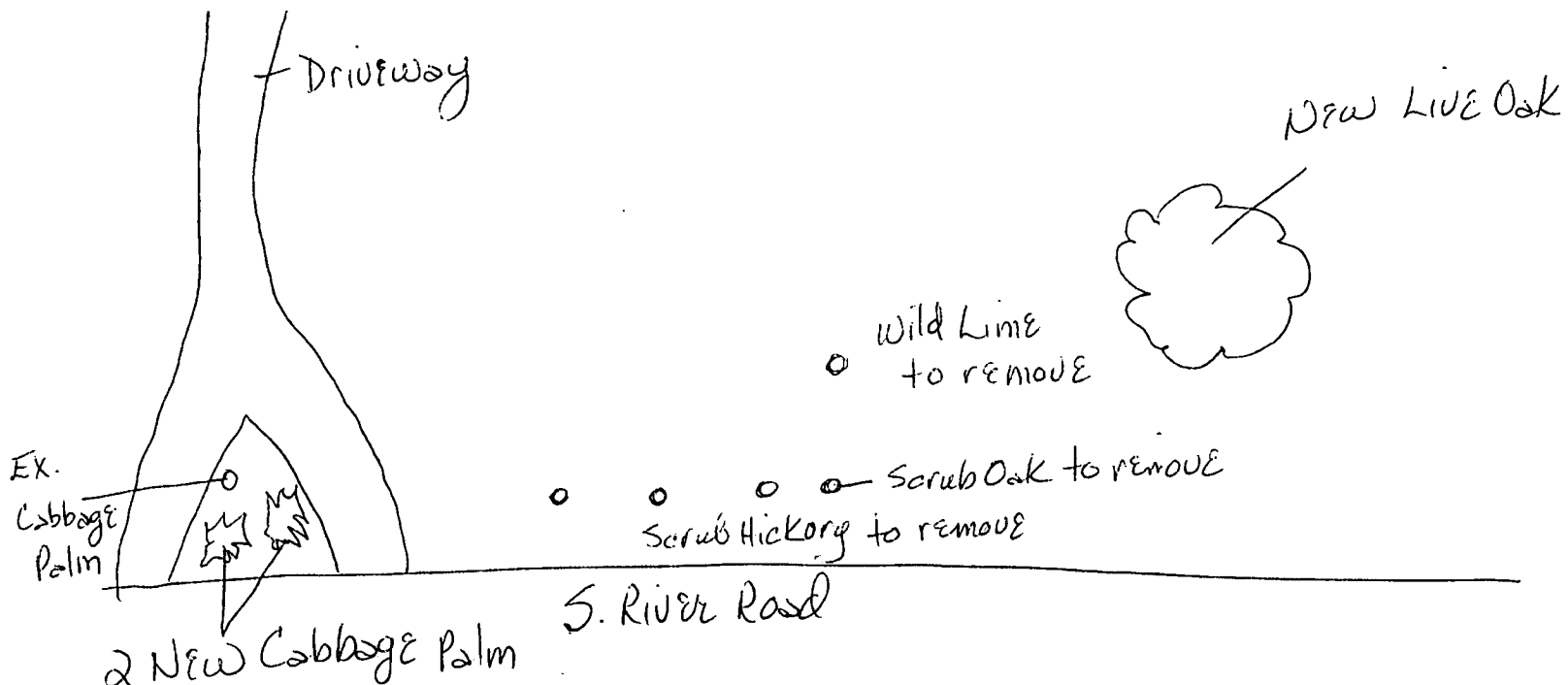
Mr. And Mrs. Hudson propose to remove 3 Scrub Hickory, 1 Scrub Hickory and 1 Wild Lime in an effort to re-landscape their front entry. Trees proposed for Permit and removal are tagged with green tape.

Native Replacement plant materials will be:

- 1, 14-16' Live Oak
- 2, 14-16' Cabbage Palms
- 28, 2-3' Red Tip Cocoplum
- 3, 3' Wild Coffee
- 48, 2' Dwarf Yaupon
- 3, 2-3' Coontie

Installation Date:

Beginning the week of December 5 and ending by December 15, 2005



Visit our Website at: www.shadowwoodfarm.com

10261

UG CABLE

COMCAST # D15

Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: 10261

Date: 10/29/12

OWNER/LESSEE NAME: COMCAST CABLE Phone (Day) 561-227-4127 (Fax) _____
 Job Site Address: 157 S River Rd City: SEWELLS PT State: FL Zip: 34996
 Legal Description _____ Parcel Control Number: _____
 Fee Simple Holder Name: _____ Address: _____
 City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** REPLACE DAMAGED U.G. CATV PARALLEL TO RW. MISSILE BORE DW'S

WILL OWNER BE THE CONTRACTOR?
 (If yes, Owner Builder questionnaire must accompany application)
 YES _____ NO XX
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: \$ 800.00
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
 Estimated Fair Market Value prior to improvement: \$ _____
 (Fair Market Value of the Primary Structure only, Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: REEL TELECOMMUNICATIONS INC Phone: 772-781-0003 Fax: _____
 Qualifiers name: LES SMITH Street: 7854 ELLISPE WAY City: STUART State: FL Zip: 34997
 State License Number: ES0000619 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: LES SMITH Phone Number: 772-486-4470
 DESIGN PROFESSIONAL: _____ Fla. License# _____
 Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

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

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

WARNINGS TO OWNERS AND CONTRACTORS:

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

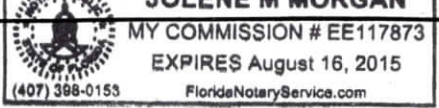
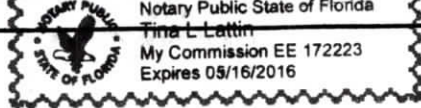
*******A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*******

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:
 X Wade Hagerly/Owner
 State of Florida, County of: Palm Beach
 On This the 29th day of October, 2012
 by Wade Hagerly who is personally
 known to me or produced _____
 As identification: Jim L. Latta
 Notary Public
 My Commission Expires: 05/16/2016

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
 X _____
 State of Florida, County of: Martin
 On This the 30th day of October, 2012
 by Leslie Smith (who is personally
 known to me or produced _____
 As identification: John M Morgan
 Notary Public
 My Commission Expires: 08-16-2015

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



**Martin County, Florida
Laurel Kelly, C.F.A**
generated on 10/31/2012 2:21:05 PM EDT
Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
13-38-41-000-000-00081-9	27640	157 S RIVER RD, SEWALL'S POINT	\$1,918,140	10/27/2012

Owner Information

Owner(Current)	HUDSON DENNIS S JR TR
Owner/Mail Address	157 S RIVER RD STUART FL 34996
Sale Date	10/28/2010
Document Book/Page	2483 1517
Document No.	2240558
Sale Price	100

Location/Description

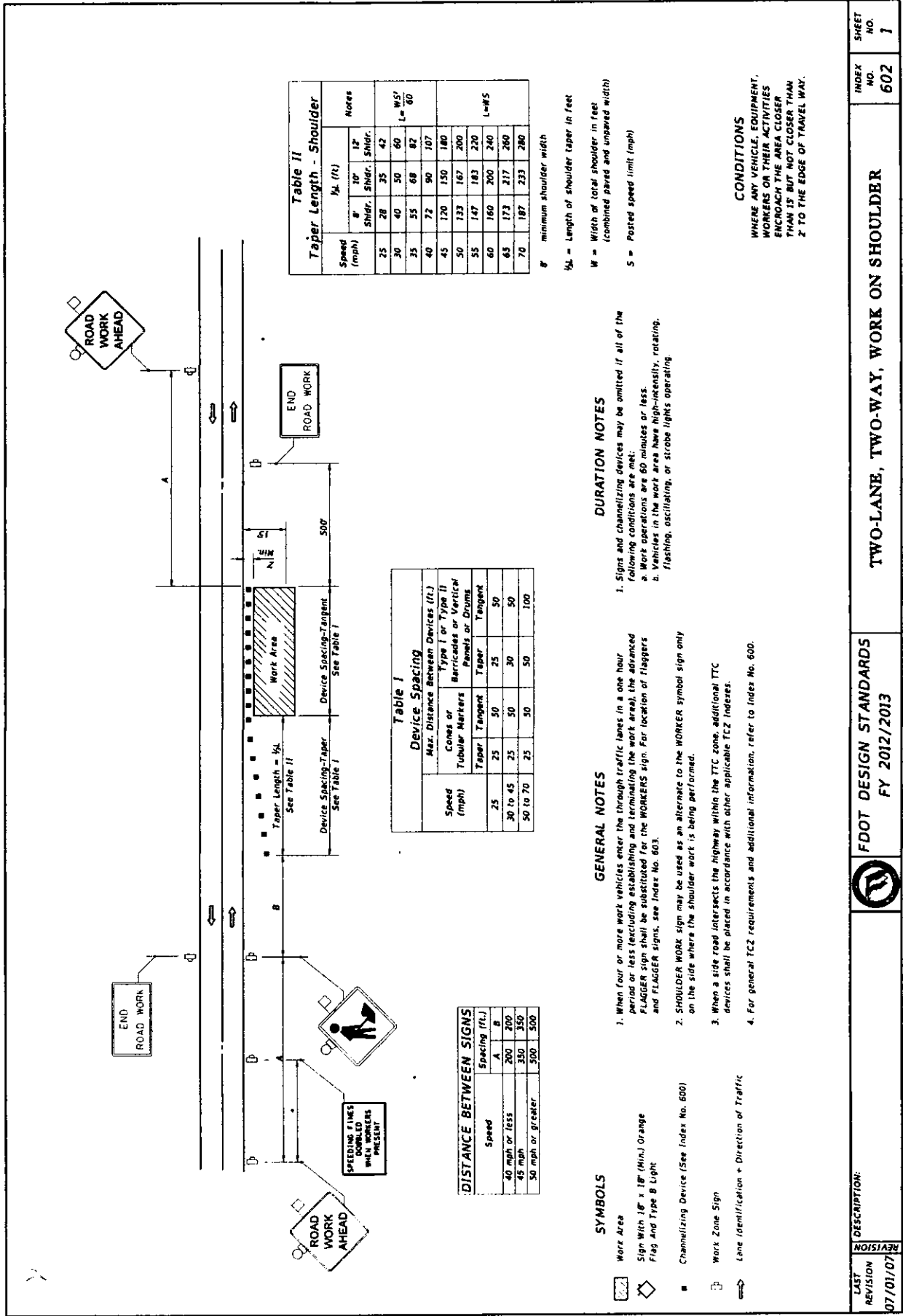
Account #	27640	Map Page No.	SP-05
Tax District	2200	Legal Description	N 118.47' OF LOT 7 LYING W OF RIVER RD - OF S/D OF LOT 1 OF HANSON GRANT
Parcel Address	157 S RIVER RD, SEWALL'S POINT		
Acres	1.1100		

Parcel Type

Use Code	0100 Single Family
Neighborhood	193170 LUCINDIA,RIVERVIEW(ST LUC.RVR)

Assessment Information

Market Land Value	\$1,557,600
Market Improvement Value	\$360,540
Market Total Value	\$1,918,140



**Table II
Taper Length - Shoulder**

Speed (mph)	1/4 L (ft)		Notes
	10' Shldr.	12' Shldr.	
25	28	35	42
30	40	50	60
35	55	68	82
40	72	90	107
45	120	150	180
50	133	167	200
55	147	183	220
60	160	200	240
65	173	217	260
70	187	233	280

g = minimum shoulder width
 1/4 L = Length of shoulder taper in feet
 W = Width of total shoulder in feet (combined paved and unpaved width)
 S = Posted speed limit (mph)

**Table I
Device Spacing**

Speed (mph)	Max. Distance Between Devices (ft.)			
	Cones or Tubular Markers	Barricades or Vertical Panels or Drums	Taper	Tangent
25	25	50	25	50
30 to 45	25	50	30	50
50 to 70	25	50	50	100

DISTANCE BETWEEN SIGNS

Speed	Spacing (ft.)	
	A	B
40 mph or less	200	200
45 mph	350	350
50 mph or greater	500	500

DURATION NOTES

- Signs and channelizing devices may be omitted if all of the following conditions are met:
 - Work operations are 60 minutes or less.
 - Vehicles in the work area have high-intensity, rotating, flashing, oscillating, or strobe lights operating.

GENERAL NOTES

- When four or more work vehicles enter the through traffic lanes in a one hour period or less (excluding establishing and terminating the work area), the advanced FLAGGER sign shall be substituted for the WORKER sign. For location of flaggers and FLAGGER signs, see Index No. 603.
- SHOULDER WORK sign may be used as an alternate to the WORKER symbol sign only on the side where the shoulder work is being performed.
- When a side road intersects the highway within the TTC zone, additional TTC devices shall be placed in accordance with other applicable TTC indexes.
- For general TC2 requirements and additional information, refer to Index No. 600.

SYMBOLS

- Work Area
- Sign With 18" x 18" (Min.) Orange Flag And Type B Light
- Channelizing Device (See Index No. 600)
- Work Zone Sign
- Lane Identification + Direction of Traffic

CONDITIONS
 WHERE ANY VEHICLE, EQUIPMENT, WORKERS OR THEIR ACTIVITIES ENCRoACH THE AREA CloSER THAN 15' BUT NOT CloSER THAN 2' TO THE EDGE OF TRAVEL WAY.

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **2-19-13** Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10258	Comcast	Final	PASS	CLOSE
	114 S Sewalls	UG cables		
	Reel Comm.			
				INSPECTOR <i>A</i>
10261	Comcast	Final	PASS	CLOSE
	157 S River	UG cables		
	Reel Communication			
				INSPECTOR <i>A</i>
10353	Sapp	mail in affidavit	PASS	CANCEL Riser for wires
	Le Miriaman	dry-in pictures		
	Capps Roofing	Final		
				INSPECTOR <i>A</i>
9615	Comcast	Final	PASS	CLOSE
	173 S River	UG cables		
	Allcomm	(from 2010)		
				INSPECTOR <i>A</i>
9969	Fusoli	Meter	PASS	E-Mail FPL
939	50 S Sewalls	FINAL		
	Druftwood			
				INSPECTOR
10349	DAILY	NAILING	PASS	
	20 PARR WINKLE	UNDERLAYMENT		
	MEDRIST BLDG			
				INSPECTOR <i>A</i>
10248	Buhner	entry door	PASS	
	2 N Sewalls	work		
	Renar	attachment		
				INSPECTOR <i>A</i>



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:	10261	DATE ISSUED:	NOVEMBER 1, 2012
SCOPE OF WORK:	REPLACE UG CABLES		
CONTRACTOR:	REEL TELECOMMUNICATIONS		
PARCEL CONTROL NUMBER:		SUBDIVISION	HANSON GRANT LOT 1
CONSTRUCTION ADDRESS:	157 S RIVER RD		
OWNER NAME:	COMCAST		
QUALIFIER:	WADE HAGGERTY	CONTACT PHONE NUMBER:	561-662-8792

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:	10261
ADDRESS	157 S RIVER RD
DATE 11/1/12	SCOPE OF WORK REPLACE UG CABLES

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned space: (@ \$121.75 per sq. ft.)		s.f.	
Total square feet non-conditioned space, or interior remodel: (@ \$59.81 per sq. ft.)		s.f.	
Total square feet remodel with new trusses: @ \$90.78 per sq. ft.		\$	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$75 per insp.)			
Total number of inspections (Value < \$200K) @\$75 ea.		\$	
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)			
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	800
Total number of inspections @ \$75.00 each			00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	00
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	00
TOTAL ACCESSORY PERMIT FEE:		\$	00