179 South River Road

Application For Building Permit

Walling 1.E. 5 GLVESIER Present Address STURKT Phone 283-2200
Architect Ben BRITT AIA Address 1500 E. OCEANBlud - STURE
General Contractor SYLVESTER CONSTADDRESS P.O. Box 96 3 STURET Phone 283-2200
Where Licensed MARTIN COUNTY License No. 55
Plumbing Contractor LINGSEY Where Licensed No.
Electrical Contractor ARLINGTON Where Licensed No.
Property Location Subdivision Lot No. 3-A
Lot Dimensions /A. 9. 4/ × 150 Lot Area /6004+ Sq. Ft.
Purpose of Building RESIDENCE Type of Construction CAS & FRAME
Building Area: Sq. Ft. (Exclusive of Garage, Carport, Open Porches)
Outside of Walls 1916 Inside of Walls 1846
Street or Road building will front on PiDER Ro.
Clearances - Front 68 Back 45 Side 15 Side 28+ River
Well Location Septic Tank Location
Building elevation (By Ordinance Definition)
Contract Price (Include Plumbing, Electrical, Air Conditioning 40,000
PERMIT FEE New Home Additions Others
General (\$3.00 per \$1000 or Fraction) 00
Plumbing (Flat Fee)
Electrical (Flat Fce)
Total (To be paid by General Contractor or Owner)
Contractor or owner)
SIGNED: - General Contractor or Owner J Sylveste
Building Inspector Comments:
barraring impleated comments.
*** Company of the second seco
FOR TOWN RECORDS: Date Drawings submitted 1/2//72
Date Permit approved 1/94/77
Datc Permit Fee paid / 24/7
Date First Inspection
Date Final Inspection
Date Occupancy approved

1916 1916 1846 1846 3/204 3/204 3/204 3/204 3/204 3/204 3/204 3/204

WHITE FENCE ACRES ADDITION

PILOEC 15 4# 10: 37 ----

BEING THAT PART SHOWN BUT NOT INCLUDED OF WHITE FENCE ACRES REVISED LYING WEST OF LOTS 3 8 4, PLAT BOOK 4, PAGE 97, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA AND THE WEST 50' OF LOT 7, HIGH POINT SUBDIVISION, PLAT BOOK 3, PAGE 108, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

TOWN OF SEWALLS POINT

MARTIN COUNTY FLORIDA

OCTOBER 30 1972

SCALE 1"- 50"

NOT PLATTED 4 64 62 29.5 DELANO LANE 5.∆ PEN SUL ... TE FENCE ZERES PLAT BAR FURSI DEDICATION STATE OF FLORIDA COUNTY OF MARTIN RNOW ALL MEN BY THESE PRESENTS THAT LOUIS L DELAND IN AN POINT SO PLAT BY 3, PO YOR, MAPTIN CO. OWNER OF THE LAND SHOWN HEREON MAVE CAUSED SAID LAND TO BE SURVEYED AND SUBDIVIDED AS SHOWN MEREON AND DO MEREBY DEDICATE TO THE PERPETUAL USE OF THE PUBLIC THE ROADS SHOWN HEREUN CERTIFICATE STATE OF FLORIDA AND SEAL THIS A DAY OF CO. MAND AND COUNTY OF MARTIN HEREBY CERTIFY THAT THE ATTE ACCURATE TO THE BEST OF MY COLOR ----------PERMANENT REFERANCE MONUMERTS

FORM WITH PAGE 2 THE GIVICE

SUBSCRIBED AND SWORM TO BEFT

1390 REMODEL

390 Perme No.

TOWN OF SEWALL'S POINT FIORIDA AUG 1 0 1981

Date	aug	4,1951
	1	

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

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

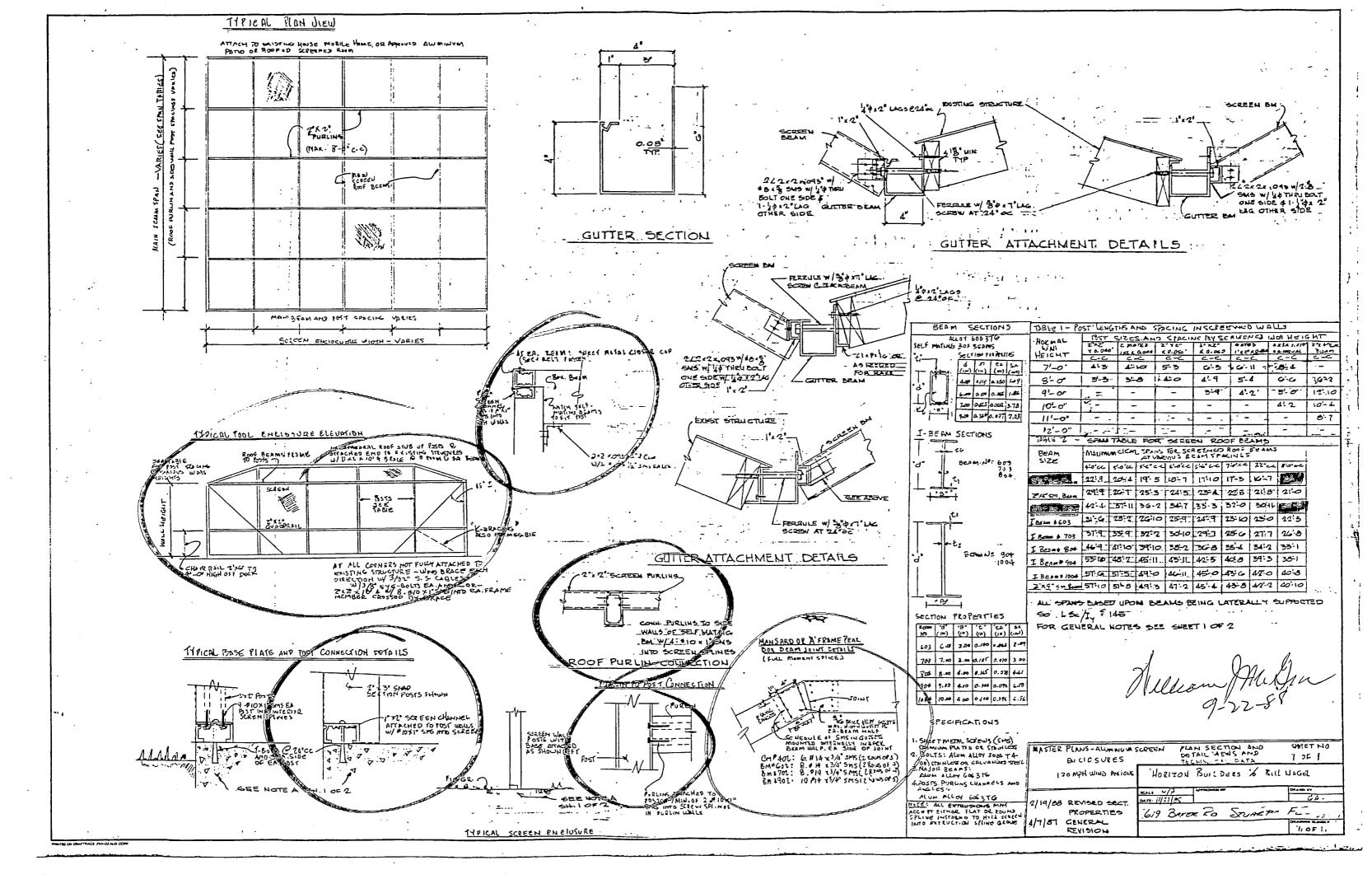
and at least two elevations, as applicable.	1795 RIVER RD.
Owner MIKE KIPPEN BERGER	Present address Lot 3H WHITE FEMC
Phone	
Contractor Alkn Czaplicki	Address 1/9 SW DEGOUVER TERR
Phone 878 - 9405	
Where licensed MARTYN COUNTY	License number C & COO7 461
Electrical contractor	License number
Plumbing contractor	License number
Describe the structure, or addition or alterathis permit is sought: <u>FNABRGING</u> &	
State the street address at which the propose	od otniction will be built
	ed structure will be built: Struck RD.
177	2 NIVER DD
Subdivision WHITE FENCE MCRES Contract prices 460 Cost of Re	Lot No. 3A
Contract price\$ 4600 Cost of Be	ermit \$ 23 =
Plans approved as submitted	Plans approved as marked
that the structure must be completed in according understand that approval of these plans in not a summary of Sewall's Point Ordinances and the Sounderstand that I am responsible for maintain orderly fashion, policing the area for trash, such debris being gathered in one area and at sary, removing same from the area and from the ply may result in a Building Inspector or a Ttion project.	o way relieves me of complying with the uth Florida Building Code. Moreover, I ning the construction site in a neat and , scrap building materials and other debris, t least once a week, or oftener when neceshe Town of Sewall's Point. Failure to com-
Contrac	ctor aden Cyplick
I understand that this structure must be and that it must comply with all code require final approval by a Building Inspector will be of the complex of the	e in accordance with the approved plans ements of the Town of Sewall's Point before
TOWN RECORD	D Date submitted
JAM REDALINA	10 8/17/8/
Approved: Building Inspector	Pate
Approved: Stubell	0/2/8/
Commissioner	0/20/0
	Date
Final Approval given: 9/15/81	### Date

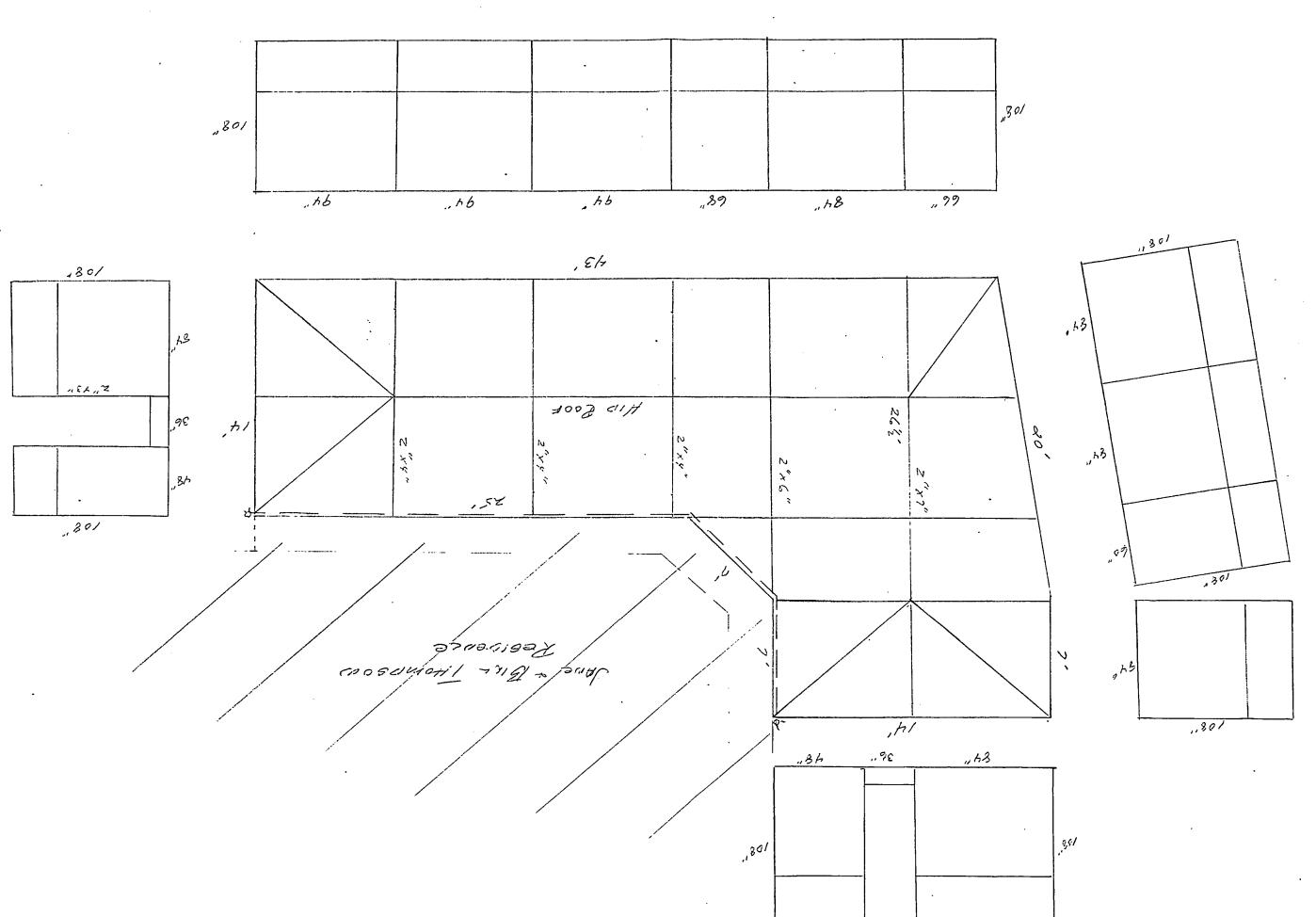
SP/1-79

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

2461 SCREEN ENCLOSURE

	····
TOWN C	E SEWALL'S POINT, FLORIDA
Permit Number	Date
	OCK, FENCE, POOL, SOLAR HEARING DEVICE, SCREENED URE NOT A HOUSE OR A COMMERCIAL BUILDING.
	by three (3) sets of complete plans, to scale, in ; plumbing and electrical layouts, if applicable, pplicable.
Owner Jane & Bill Thon	paon Present Address 1795. Rue Rd
Phone 283-1823	Survey Pount
Contractor Harison Blds	Address 619 Bules Ry
Phone 692. 2248	Gluar Ital
Where licensed Marlen (Op	unty License number 5 P00342
Electrical contractor	License number
Plumbing contractor	License number
Roofing contractor	License number
Air conditioning contractor	License number
Describe the structure, or addition of permit is sought:	r alteration to an existing strucutre, for which this release - Tear-down referred
State the street address at which the	
O . A . /	1 10 lb Dt
Subdivision While Jence Here Contract prices 3 250	
7	
Plans approved as submitted	Plans approved as marked
that the structure must be completed understand that approval of these platown of Sewall's Point Ordinances, the Code and the South Florida Building of for maintaining the construction site for trash, scrap building materials a area and at least once a week, or often	in accordance with the approved plan. I further ins in no way relieves me of complying with the see State of Florida Model Energy Efficiency Building code. Moreover, I understand that I am responsible in a neat and orderly fashion, policing the area and other debris, such debris being gathered in one sener when necessary, removing same from the area Failure to comply may result in a Building Inspector see construction project.
	Contractor SICS and
	e must be in accordance with the approved plans and puirements of the Town of Sewall's Point before final be given. Owner
	TOWN RECORD
Date submitted	Approved Building Inspector Date
Approved	Final Approval given
	Date
Certificate of Occupancy issued(if ag	pplicable)Date
SP1184	Permit Number





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3788 REROOF

TAX FOLIONO.

DATE 4-25-1995

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 including a plot plan showing set-backs, plum and at least two (2) elevations, as applicable	abing and electrical layouts, if applicable,
Owner Bill Thompson	Present address 179 S River Rd
Phone 283.1823	
Contractor Mm's Roof Phone 692-1870	Address 1004 NW 16 th fl
Where licensed State licensed	16000 CCP 041295
Electrical Contractor	
Plumbing Contractor	
Describe the structure or addition or alterapermit is sought:	ntion to an existing structure, for which this
	P
State the street address at which the proposed Subdivision White Fence acres	
Contract price \$ 6600	Section of marries \$ 110
Plans approved as submitted	
approval of these plans in no way relieves me Ordinances and the South Florida Building Cooffor maintaining the construction site in a netrash, scrap building materials and other deligible.	months from the date of its issue and that the th the approved plan. I further understand that of complying with the Town of Sewall's Point de. Moreover, I understand that I am responsible at and orderly fashion, policing the area for bris, such debris being gathered in one area and ary, removing same from the area and from the ay result in a Building Inspector or Town Comject.
·.	Contractor Ames Howh
I understand must comply will all code requirements of the by a Building inspector will be given.	accordance with the approved plans and that it e Town of Sewall's Point before final approval Owner
TOWN	RECORD
Date submitted	Approved: Wall Sour 5/8/95 Building Inspector Date
Approved: Commissioner Date	_Final approval given:Date
CERTIFICATE OF OCCUPANCY issued (if applicab	le)
!	PERMIT NO

NOTICE OF COMMENCEMENT

COUNTY OF	<i>,</i> •
The undersigned hereby informs alwill be made to certain real proposection 713.13, Florida Statutes, stated in this NOTICE OF COMMENCES void and of no force and effect is within 30 days of recordation.	erty, and in accordance with the following information is went this notice shall be
DESCRIPTION OF PROPERTY:	
General description of improvemen	ts: 1000 Koop.
Address: 179 & River As	GW THOMPSON
Owner's interest in site of the i	mprovement:
Contractor: Juny No 16th	Al Stuart II
Surety (if any): Address:	
Amount of Bond:	
Lender :	
Name of person within the State o upon whom notices or other docume	f Florida designated by owner nts may be served:
Name: Address:	
In addition to himself, owner des receive a copy of the Lienor's No 713.06(2)(b), <u>Florida Statutes</u> :	ignates the following person to tice as provided in Section
Name:	
Addition.	
	TW Thimpson
Sworn to and subscribed before of fill 1995.	Jerus M. Murphy
(NOTARY SEAL)	I am a Notary Public of the STATE OF Flower AT LARGE, and My Commission Expires: 12-28-96
STATE OF FLORIDA MARTIN COUNTY THIS IS TO GERTIFY THAT THE FOREGOING PAGES IS A TRUE AND CORRECT OPPY OF THE ORIGINAL. MASHASTICLER, CLERK COUNTY COUNTY COUNTY COUNTY	VERNA M. MURPHY MY COMMISSION & CC 248654 EXPIRES: December 26, 1996 Bonded Thru Notary Public Underwriters

4230 DRIVEWAY

CHECK AMOUNT TO THE ORDER OF DESCRIPTION CHECK NO.		MASTER PERMIT NO
Building to be erected for MR & MR (S.W. TLOMPSON) of Permit DRIVEWAY Applied for by (THOMPSON S) (Contractor) Building Fee Subdivision Lash, FEEXE Ac. Applied 3 - A Block Radon Fee Address 179 S. RIVER Red. Impact Fee Type of structure DRIVEWAY (PAVERS) A/C Fee Electrical Fee Parcel Control Number: Plumbing Fee 1338410070000003130000 Roofing Fee Amount Paid SV Check # 12547 Cash Other Fees () 50 Total Construction Cost \$ 9,000 TOTAL Fees 50 Signed Signed Town Building Inspector G.W. THOMPSON 179 S. RIVER ROAD STURRT, FE. 18998 561/283-1823 DOLLARS CHECK AMOUNT DOLLARS CHECK AMOUNT	TOWN OF SEW	/ALL'S POINT
Building to be erected for MR & MR (GL). TUOMPSTRIPE of Permit DRUELURY Applied for by THOMPSONS (Contractor) Building Fee Subdivision LOH. FELTE AC ADDUCT 3-A Block Radon Fee Address 179 S. RIVER Red. Impact Fee Type of structure DRIVEWRY (PAVERS) A/C Fee Electrical Fee Parcel Control Number: Plumbing Fee 133841007000003130000 Roofing Fee Amount Paid SO Check # 12547 Cash Other Fees () 50 Total Construction Cost \$ 9,000 TOTAL Fees 50 Signed Signed Signed Town Building Inspector Applicant Town Building Inspector APPLICAN AND STRUCK RADOL CHECK NO.	Date 8/1/97	BUILDING PERMIT NO. 4230
Applied for by THOMPSONS (Contractor) Building Fee Subdivision LOH, FELTE AS, ADDITION 3-A Block Radon Fee Address 179 S. RIVER RAJ. Impact Fee Type of structure DRIVEWAY (PAVERS) A/C Fee Electrical Fee Parcel Control Number: Plumbing Fee 1338410070000003130000 Roofing Fee Amount Paid 50 Check # 12547 Cash Other Fees () 50 Total Construction Cost \$ 9,000 TOTAL Fees 50 Signed Signed Signed Town Building Inspector G.W. THOMPSON JANE THOMPSON 1795. RIVER ROAD STUART, FL. 349996 SOUTH SASSING SOUTH SASSING STRUCK AND CHECK NO. CHECK NO. DOLLARS	•	Ai .
Subdivision Lat. FEXTE Ac. ADDITOT 3-A Block Radon Fee Address 179 S. RIVER Rad. Impact Fee Type of structure DRIVEWAY (PAVERS) A/C Fee Electrical Fee Parcel Control Number: Plumbing Fee 133841007000003130000 Roofing Fee Amount Paid SO Check # 12547 Cash Other Fees () 50 Total Construction Cost \$ 9,000 TOTAL Fees Signed Signed Signed Applicant Town Building Inspector G.W. THOMPSON 179 S. RIVER ROAD STUART FLOMPSON 179 S. RIVER ROAD STUART FLOMPSON 179 S. RIVER ROAD STUART FLOMPSON 179 S. RIVER ROAD STUART SAMPSON 12947 CHECK AMOUNT TO THE ORDER OF DESCRIPTION CHECK NO.		•
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Type of structure DRIVEWRY (PAVERS) Electrical Fee Parcel Control Number: Plumbing Fee Plumbing Fee Roofing Fee Roofing Fee Amount Paid SU Check # 12947 Cash Other Fees () 50 Total Construction Cost \$ 9,000 TOTAL Fees 50 TOTAL FEED FOR TOTAL FEED FEED FEED FEED FEED FEED FEED FEE		
Electrical Fee Parcel Control Number: 133841007000003130000 Roofing Fee Amount Paid 50 Check # 12547 Cash Other Fees () 50 Total Construction Cost \$ 9,000 TOTAL Fees 50 Signed Signed Applicant Town Building Inspector G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD STUART, FL. 34996 561/283-1823 12947 CHECK AMOUNT TO THE ORDER OF DESCRIPTION CHECK NO.	•	•
Parcel Control Number: 133841007000003130000 Roofing Fee Amount Paid SU Check # 12547 Cash Other Fees () 50 Total Construction Cost \$ 9,000 Signed Signed Applicant Signed Town Building Inspector G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD STUART, FL. 34996 S561/283-1823 12947 CHECK AMOUNT TO THE ORDER OF DESCRIPTION CHECK NO.	// / / / / / / / / / / / / / / / / / /	,
Amount Paid SU Check # 12547 Cash Other Fees () 50 Total Construction Cost \$ 9,000 TOTAL Fees 50 Signed Signed Fee Town Building Inspector G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD STUART FL 34996 S61/283-1823 TOTHE ORDER OF DESCRIPTION CHECK NO.	Parcel Control Number:	
Amount Paid SO Check # 12547 Cash Other Fees () 50 Total Construction Cost \$ 9,000 TOTAL Fees 50 Signed Applicant Town Building Inspector G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD 5TUART FL 34996 561/283-1823 TO THE ORDER OF DESCRIPTION CHECK NO.		አ ላል
Signed		Ğ
Signed	•	
G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD STUART, FL 34996 561/283-1823 12947 CHECK AMOUNT TO THE ORDER OF DOLLARS TO THE ORDER OF DESCRIPTION TO THE ORDER OF THE ORDER O	Iotal Construction Cost \$	TOTAL Fees
G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD STUART, FL 34996 561/283-1823 12947 CHECK AMOUNT TO THE ORDER OF DOLLARS TO THE ORDER OF DESCRIPTION TO THE ORDER OF THE ORDER O	Signed	Signed
G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD STUART, FL 34996 561/283-1823 12947 CHECK AMOUNT CHECK NO.	•	·
G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD STUART, FL 34996 561/283-1823 12947 CHECK AMOUNT TO THE ORDER OF DESCRIPTION CHECK NO.		
G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD STUART, FL 34996 561/283-1823 12947 CHECK AMOUNT TO THE ORDER OF DESCRIPTION CHECK NO.		
G.W. THOMPSON JANE THOMPSON 179 S. RIVER ROAD STUART, FL 34996 561/283-1823 12947 CHECK AMOUNT TO THE ORDER OF DESCRIPTION CHECK NO.		
JANE THOMPSON 179 S. RIVER ROAD STUART, FL 34996 561/283-1823 12947 CHECK AMOUNT TO THE ORDER OF DESCRIPTION CHECK NO.	C W THOMPSON	REMITTANCE ADVICE
STUART, FL 34996 561/283-1823 12947 CHECK AMOUNT TO THE ORDER OF DESCRIPTION CHECK NO.	JANE THOMPSON	
DOLLARS TO THE ORDER OF DESCRIPTION CHECK NO.	STUART, FL 34996	12947
TO THE ORDER OF DESCRIPTION CHECK NO.		
		DOLLARS
(/0/12/ 0/= 5/=/0/19/15/1/	TOURS OF SEW ALLS PT	12947 \$ 582.

#012947# #067006775#

FIRST BANK OF INDIANTOWN INDIANTOWN, FLORIDA

00874993#01

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Town of Sewall's Point finalel
P.I.N. Date 9/3/97
ACCESSORY STRUCTURE PERMIT APPLICATION to construct:
□ DOCK requires prerequisite approval from State and Army Corps of Engineers. □ BULKHEAD requires prerequisite approval from State and Army Corps of Engineers. □ DETACHED GARAGE □ SWIMMING POOL □ WALL □ SOLAR WATER HEATER □ SCREENED ENCLOSURE □ FENCE may not require sealed drawings. □ OTHER: REPLACE ASPHALT DRIJEWAY W BRICK PAURIS
Owner's Name MR + MRS G.W. THOMPSON
Owner's Address 179 So. RIVER Rd
Fee Simple Titleholder's Name (If other than owner)
Fee Simple Titleholder's Address (If other than owner)
City State Zip
Contractor's Name SARY NELSON
Supplied determ 2042 S.E.W DUNBROOKE CI
Sim At Leune State Tl. Zip 37732
Job Name Sand Set Chicago Brick Paver
Job Address 179 S. River Pl.
City Sewalls ff County Master Legai Description White Fence Closes addn Lot 3-A
Bonding Company
Bonding Company Address
CityState
Architect/Enginee's Name
Architect/Engineer's Address
Mortgage Lender's Name 1st Bank of Indiantour
Mortgage Lender's Address 15588 S.W. Warfield
1. Diagram tel 34756

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



4230

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

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

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF СФИМЕНСЕМЕНТ. Owner or A STATE OF FLORIDA COUNTY OF MARTIN Sworn to and subscribed before me this 1 day of Aug. 1997 by V. Jane & G.W. Thompoonio: [| is/are personally known to me, or as identification, and who did [] has/have produced _ not take an oath. Typed, printed or stamped I am a Notary Public of the State of (MOTARY SEAL) Florida having a commission number of and my commission expises sow NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC423705 MY COMMISSION EXP. NOV. 30,1998 STATE OF FLORIDA COUNTY OF MARTIN Sworn to and subscribed before me this ___ day of ______ 199_, by , who: [] is/are personally known to me, or _____ as identification, and who did | | has/have produced not take an oath. Name: Typed, printed or stamped I am a Notary Public of the State of (NOTARY SEAL) Florida having a commission number of and my commission expires: Certificate of Competency Holder Contractor's State Certification or Registration No. Contractor's Certificate of Competency No. Permit Officer APPLICATION APPROVED BY

STATE OF FLORIDA DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY DIVISION OF WORKERS' COMPENSATION 103056/57-014741

CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW

4, 1995 MARCH

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

03/26/95 EFFECTIVE DATE OF EXEMPTION _ 311-74-7357 NELSON GARY EXEMPTED INDIVIDUAL NAME 311747357 NELSON GARY L BUSINESS NAME 2042 SE 2 DUNBROOKE CIRCLE BUSINESS ADDRESS PT ST LUCIE, FL 34952

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

AUTHORIZED SIGNATURE

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

STATE OF FLORIDA DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY DIVISION OF WORKERS' COMPENSATION

CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW

03/26/95 EFFECTIVE DATE OF EXEMPTION_ EXEMPTED INDIVIDUAL NAME NELSON GARY 311-74<u>-7357</u> SOCIAL SECURITY NUMBER_ BUSINESS NAME NELSON GARY L FEDERAL IDENTIFICATION NUMBER 311747357 BUSINESS ADDRESS 2042 SE 2 DUNBROOKE CIRCLE PT ST LUCIE, FL 34952

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

AUTHORIZED SIGNATURE

HERE CUT

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

AUG- 1-97 FRI 8:57 AM	JOHN KNAPP INSURANO	DE FAX	NO. 561 46	5 5567 .	P. 2
CERTIFICATE OF INSURAL	ICE: NELSGAR			CSR NN 08/	01/97
John Knapp Insurance John M. Knapp 1404 S 28th Street		COMPURA NO RIGHT	TE UPON THE CER	A MATTER OF INFORMATION OF THE COVERAGE AFFORDS	CERTIFICATE
Ft. Pierce IL 34347			COMPANIES AF	FORDING COVERAGE	
561-461-4381		A Banker	s Insuran	ce Company	
INSURED		COMPANY B	·		
Gary Nelson 2042 SE W. Dunbrooke	o: ~	COMPANY C			
Port St Lucie FL 3495	2	COMPANY			
THIS IS TO CERTIFY THAT THE POP PERIOD INDICATED. NOTWITHSTAM	> COVERAGES <				
CO TYPE OF INSURANCE	POLICY NUMBER	POLICY RPP		LINITS	
GENERAL LIABILITY A (X) COMMERCIAL GEN LIABILITY [) CLAIMS MADE (X) OCC. [) OWNERS: 8 & COMTRACTOR: 8 PROTECTIVE [] []	GLA 09-4810569	01/17/97	01/17/98	GENERAL AGGREGATE PROD-COMP/OP AGG. PERS. & ADV. INJURY EACH OCCURRENCE PIRE DAMAGE (AMY ONE FIRE) MED. EXPENSE (ANY ONE PERSON)	100,000 100,000 100,000 100,000 50,000
AUTOMOBILE LIABILITY (] ANY AUTO [] ALL OWNED AUTOS (] SCHEDULED AUTOS (] SIRED AUTOS [] NON-OWNED AUTOS (]				COMB. SINGLE LIMIT BODILY INJURY (PER PERSON) BODILY INJURY (PER ACCIDENT) PROPERTY DAMAGE	
GARAGE LIABILITY [] ANY AUTO []]				AUTO ONLY (EA ACC) OTHER / AUTO ONLY: EACH ACCIDENT AGGREGATE	
EXCESS LIABILITY [] UMBRELLA FORM [] OTHER THAN UMBRELLA FORM				PACH OCCURRENCE ACCREGATE	
WORKERS COMP. AND EMP. LIAB. THE PROPRIETOR/PARTWERS/ EMECUTIVE OFFICERS ARE: [] INCL. () EXCL.				JETAT LIM ()OTE EL EA ACCIDENT EL DISEASE-POL. LIM EL DISEASE-PA EMP.	
OTHER					
-DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS					
> CERTIFICATE HOLDER <============	GWTHOMP	EXPIRATION DATE TO	MEREOF, THE ISSU	D POLICIES BE CANCELLE DING COMPANY WILL ENDI BE CERTIFICATE BOLDER DTICE SHALL IMPOSE NO	LIAM OT NOVAE BHT OT CEMAN
G W Thompson		LEFT, BUT PAILURE LIABILITY OF AMY	KIND UPON THE CO	DIPANY, ITS AGENTS OR I	representatives.
Sewells Point, FL	·	AUTHORIZED REPRES		hm m &	`
acopp 35-8 (1/95)	'	John Knapp		m - 1 - 7	U Ø

DEDXUG #	4230
PERMIT #	7630

X

TAX FOLIO # 133841 007 000 000 3/3 0000

NOTICE OF COMMENCEMENT

STATE OF	FLORIDA	COUNTY OF_	MARTIN
REAL PROP	RSIGNED HEREBY GIVES NOTICE THE ERTY, AND IN ACCORDANCE WITH CI MATION IS PROVIDED IN THIS NOTICE	HAPTER 713,	FLORIDA STATUTES, THE FOLLOW-
LEGAL DES	SCRIPTION OF PROPERTY(INCLUDE	E STREET AI	DDRESS IF AVAILABLE):
WHITE FE	NCE AUDN LOT 3A / 179 S	SOUTH RIVE	R DRIVE, SUART 34966
GENERAL I	DESCRIPTION OF IMPROVEMENT:_	REPLACE	ASPHALT DRIVE W/ BRICK
	G.W. & V. JANE TH		•
ADDRESS:	179 SOUTH RIVER DRIL	SE, SEWA	ALL'S POINT, FL 34966
	(561) 283-1823		
CONTRACT	OR: SELF	191,	
ADDRESS:			
PHONE #:		FAX #:	
SURETY CO	MPANY(IF ANY) N/A		
	, , , , , , , , , , , , , , , , , , ,		
PHONE #		FAX #:	
BOND AMOU	JNT:		
•)	
	FIRST BANK DE INDIANTO		
ADDRESS:	INDIANTOWN FL		·
PHONE #:		FAX #:	
	TITHIN THE STATE OF FLORIDA DESI CUMENTS MAY BE SERVED AS PROVI		
NAME:			
ADDRESS:_		<u> </u>	
PHONE #:		FAX #:	
IN ADDITIO	N TO HIMSELF, OWNER DESIGNATES TO RECEP	NOX	SE THE LIENOR'S NOTICE AS PRO-
VIDED IN SI	ECTION 713.13(1)(B), FLORIDA STATUT	TES.	
			- A 10
DATE IS SPI	N DATE OF NOTICE OF COMMENCEM ATION DATE IS ONE (1) YEAR FROM T ECIFIED ABOVE.	ENT: YA	RECORDING UNLESS A DIFFERENT M. Joy Davis MY COMMISSION # CC641939 EXPIRES May 27, 2001 BONDED THRU TROY FAIN INSURANCE, INC.
411/	Mommen FOF OWNER		
SWORN TO	AND SUBSCRIBED BEFORE ME THIS	/DAY	of August
19 <u>-//</u> BY	J.W. Irypen).	PERSO OR PRODU	ONALLY KNOWN UCED PARTIES X OF ID PARTIES X
NOTARVSIO	CHATTERN TO CHATTE		512-319-30-453-0

6170 DEMO POOL

MASTER PERMIT	NO
----------------------	----

TOWN OF SEWALL'S POINT

Date 2/27/03	BUILDING PERMIT NO. 6170			
Building to be erected for THOMPSON	Type of Permit DEMO POOL			
Applied for by John O'CONNEU	(Contractor) Building Fee			
Subdivision WHITE FENCE ACRES LOT 3A BIO	<i>k</i>			
Address 179 S. RIVER ROAD	Impact Fee			
Type of structure SFR.	A/C Fee			
	Electrical Fee			
Parcel Control Number:	Plumbing Fee			
13384100700000631	Roofing Fee			
Amount Paid 62.40 Check #Cash	Other Fees ()			
Total Construction Cost \$	TOTAL Fees 62,40			
Signed Com Signed	ed Leve Summons (Rot)			
Applicant	Town Building Official			
PERM	NT .			
BUILDING PLUMBING DOCK/BOAT LIFT SCREEN ENCLOSURE FILL TREE REMOVAL ELECTRICAL ROOFING DEMOLITION TEMPORARY ST HURRICANE SHI STEMWALL	_ _			
INSPECT	IONS			
UNDERGROUND PLUMBING UNDERGROUND MECHANICAL	UNDERGROUND GAS 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	FINAL GAS BUILDING FINAL			

Town of Sewall's Point

BUILDING PERMIT APPLICATION	, ,		Building Permit Number:	
Owner or Titleholder Name: Will/	an + Jane /ho.	<u>шрбоп</u> Сity:	Dewall's Poi ut State: +C	Zip: <u>3499</u> @
egal Description of Property: 12 kit	e fence Acres	<u> </u>	rcel Number: <u>133841007</u>	00000631
ocation of Job Site: 179 5	Kiver Rd			
		//	772 - Phone Number:_2	332-3393
ONTRACTOR/Company Name: \(\lambda\) treet: \(\lambda\) O 5 \(\mathcal{W}\). \(\mathcal{M}\)	The Oconne	//	Phone Number:	83-9111
treet: 11005 W. M.	away Kd	City:	Tort VIER State C	Zip: <u>34943</u>
itate Registration Number: WA	State Certificatio	n Number: <u>N A</u>	Martin County License Number	r <u>. Spo 1783</u>
RCHITECT:		***************************************	Phone Number:	
treet:		City:	State:	Zip:
NGINEER:			Phone Number:	
Street:			State:	
REA SQUARE FOOTAGE - SEWER	- ELECTRIC Living:	Garage:	Covered Patios: Screene	dPorch:
Carport:Total Under Roof				
ype Sewage:				
yes samage	Seput rank Permit N	ин <i>в</i> ег глот пеапп вера	artvveii Permit Num	
LOOD HAZARD INFORMATION	Flood Zone:	Minimum Base	Flood Elevation (BFE):	NGVD
Proposed First Floor Habitable Floor Fin	ished Elevation:		NGVD (Minimun	n 1 Foot Above BFE)
COST AND VALUES Estimated Cost	of Construction or Improvem	ents: (0500.6	© Estimated Fair Market	Value (FMV) Prior
o Improvements:			<u> </u>	
NURCONTRACTOR INFORMATION				
SUBCONTRACTOR INFORMATION		Ohaha	Manage Manage	
lectrical:				
Mechanical:			License Number:	
Plumbing:			License Number:	
Roofing:		State:	License Number:	· . · · · · · · · · · · · · · · · · · ·
understand that a separate permit from	n the Town may be required t	for ELECTRICAL, PLUMI	BING, SIGNS, WELLS, POOLS, FURN	NANCE, BOILERS,
HEATERS, TANKS, AIR CONDITIONE				
REMOVAL AND RELOCATIONS.	10, 50010, 051111120, 7	.002000111	o, oxino orrica robinion orrica	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
CODE EDITIONS IN EFFECT AT TIME	OF APPLICATION	· ·		
Florida Building Code (Structural, Mech	anical, Plumbing, Gas) 200	South Florida Buildie	ng Code (Structural, Mechanical, Plum	bing, Gas)
National Electrical Code 2002 Flo	rida Energy Code 2001			
Florida Accessibility Code 2001	· · · · · · · · · · · · · · · · · · ·			
HEREBY CERTIFY THAT THE INFO	RMATION I HAVE FURNISH	ED ON THIS APPLICAT	ION IS TRUE AND CORRECT TO TH	E BEST OF MY
NOWLEDGE AND I AGREE TO COM			/ \	~/
OWNER OR AGENT SIGNATURE (Re			TOR SIGNATURE (Required)	Money
State of Florida, County of:	• •		Florida, County of: Mactin	000
his theday of		This the	1 ath	ry 200 3
or institleday or	,	by J	-J. O'Connell	who is personally
		, 	ne or produced $F/.a.$	
known to me or produced			_ 1 1 1)	7.5
as identification.		As identific	ation. Donk. Below.	
Notary P		ما ن يا يا	Notary P	UDIK
My Commission Expires:	Seal	My Contract	Expires: JOAN H. BARROW MY COMMISSION # DD 137713 EXPIRES: November 30, 2006 Bonded Thru Notary Public Under Spal	

CERTIFICATE HOLD	ER
-------------------------	----

SEWAL-1

Town of Sewalls Point 1 South Sewalls Point Road Stuart FL 34996 Should any of the above described policies be cancelled before the expiration date thereop. The issuing insurer will endeavor to mail $\begin{array}{cc} 10 & \text{days} \end{array}$ written notice to the certificate holder named to the lept, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or

REPRESENTATIVES.

CANCELLATION

James G. Flynn & Flynn C

ACORD 25 (2001/08)

© AGORD CORPORATION 1988

STATE OF FLORIDA DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY DIVISION OF WORKERS' COMPENSATION

CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW

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

EFFECTIVE DATE

01/11/2002

EXPIRATION DATE

01/11/2004

EXEMPTED INDIVIDUAL NAME

OCONNELL

JOHN

S.S.

362-82-8179

BUSINESS NAME

OCONNELL JOHN

FEIN

362828179

BUSINESS ADDRESS

11005 W MIDWAY RD

FT PIERCE

FL 34945

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

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR SUTURE OFFICE OFFI

CTAYE OF PLOBIAL	THE CARD BELUE	AND RETAIN FO	R FUTURE REFERENCE
STATE OF FLORIDA DEPARTMENT OF LABOR AND EMPLOYMENT SEC DIVISION OF WORKERS' COMPENSATION CONSTRUCTION INDUSTRY CERTIFICATE OF EXEM FROM FLORIDA WORKERS' COMPENSATION LAW EFFECTIVE DATE 01/11/2 EXPIRATION DATE 01/11/2 EXEMPTED PERSON LAST NAME OCONNELL FIRST NAME JOHN SOCIAL SECURITY NUMBER 362-82-817 BUSINESS NAME OCONNELL JOHN FEDERAL IDENTIFICATION NUMBER 362828 BUSINESS ADDRESS 11005 W MIDWAY FI PIERCE	PTION 2002 2004 79	F NOTE: Pu proprietor, O elects exen	rsuant to chapter 440.10(1),(g),2, F.S., a sole partner, or officer of a corporation who ption from the Florida Workers' Compensation under the recover benefits or compensation under

CUT HERE

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

2002-2003

ST. LUCIE COUNTY OCCUPATIONAL LICENSE STATE OF FLORIDA

ACCOUNT 1795-00900001 EXPIRES SEP 30, 2003

FACILITIES OR

TYPE OF

MACHINES

ROOMS

SEATS

EMPLOYEES 1-10

BUSINESS

1795 DEMOLITION/WRECKING CONTRACTOR

BUSINESS LOCATION

11005 W MIDWAY RD C .- ST LUCIE COUNTY

NAME. MAILING **ADDRESS**

O'CONNELL JOHN J' 11005 W MIDWAY RDW FT PIERCE FL

34945

4237

AMOUNT **PENALTY COLLECTION COST**

RENEWAL **NEW LICENSE**

TRANSFER-

ORIGINAL TAX

TOTAL

4.5

11.25

11.25

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

SUBJECT TO SUSPENSION OR REVOCATION IN ACCORDANCE WITH ORDINANCES OF ST. LUCAL BOUNT TO THE DAVIS, TAX COLLECTOR 00002793 BOB DAVIS, CPA, CGFO, CFC, ST. LUCIE COUNTY TAXCELLOR 13/2002 8:58AM P.O. BOX 308 FORT PIERCE, FL 34954-032902 1795-00900001 \$11.25

0600 CK CHANGE \$11.25

\$0.00



MARTIN COUNTY, FLORIDA Construction Industry Lic Bd Certificate of Competency

License: SP01783

Expires September 30, 2003

O'CONNELL JOHN J

11005 W MIDWAY RD FT PIERCE, FL 34945 DEMOLITION

TOWN OF SEWALL'S POINT Building Department - Inspection Log

Date of In	spection: Mon Wed	mm 3/3/	_, 200k ()	3 Page of
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6196	SHARFI	SHEATHING +	Possal-	
	73N. SEWALLS PTRO	METALTINIAN	CSTAL	
	ALL AMERICAN			INSPECTOR V
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/ECMMENTS:
6197	PARPOTT	ELEC FINAL		
(2)	IN SLAND PD			
	JIMMY ROWELL			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6038	Hess	SHEATHING/	Voscol	
(2)	74NSEWALLSHOP	DRYIN	Possed	A
	TAYLOR ROOFING			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6102	DUNN	REPL BEAM FINA	188al	Close
(8)	21 PALMETTO RD			
	PVD CONST.			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6183	KVAPIL	PAVER DRIVE	tailoil	(Rusio depole)
(7)	A RIOVISTA DR	FINAL		
PERMIT	GRAND ENTRY	INSPECTION TYPE		INSPECTOR:
(A CONTRACTOR OF THE CONTRACTOR	A REPORT	NOTES/COMMENTS:
6170	LTO C D	Demoloca Lind	The Stock	
(\mathcal{C})	179 S. River Ro			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	INSPECTOR:
TREE	t a service of the se	TREE	Pessal	TO LEST COMMENTS.
	74 N. SEWALLS POL		33243	
$ 3\rangle$	17 IN. JEWALLS IT			The second secon
OTHER:	CLANKE	TE BEAM	Pessel	INSPECTOR
5879	33 FIELDWAY	To beam	1636	
(A)	PAR ONE		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Note of the second				INSPECTION LOG XIS

6279 DECK EXTENSION

MASTER	PERMIT	NO	
MYSIFU		110	

TOWN OF SEWALL'S POINT

, ,	M OI OLIMALLO		
Date <u>5/29/03</u>		BUILDING PERMIT NO.	
Building to be erected for	HOMPSON	Type of Permit Expense	ON TO DECK
Applied for by KEN			<i>-</i> 3 <i>i</i>
Subdivision WHITE FENCE AC			
Address 179 S			1
	• •		\
Type of structure			\
		Electrical Fee	
Parcel Control Number:		Plumbing Fee	·——
133841007000	10003130000	Roofing Fee	e
Amount Paid 96.00 Chec			
Total Construction Cost \$		TOTAL Fee	s 96.00
	<i></i>		
		a l	Cox
	Signed	Jene Sunn	in the
Applicant		Town Building Offic	ıaı
	PERMIT		
BUILDING	☐ ELECTRICAL	MECHANIC	
PLUMBING	☐ ROOFING	E-POCHOPA	DECK
DOCK/BOAT LIFT SCREEN ENCLOSURE	☐ DEMOLITION ☐ TEMPORARY STRUCT	☐ FENCE URE ☐ GAS	
FILL	☐ HURRICANE SHUTTER		ON
TREE REMOVAL	□ STEMWALL	ADDITION	
	INSPECTION	IS	-
UNDERGROUND PLUMBING	UND	ERGROUND GAS	
UNDERGROUND MECHANICAL	UND	ERGROUND ELECTRICAL	
STEMWALL FOOTING	F00	TING	
SLAB	TIE E	BEAM/COLUMNS	
ROOF SHEATHING -	WAL	L SHEATHING	
TRUSS ENG/WINDOW/DOOR BUCKS	LAT	н	
ROOF TIN TAG/METAL	ROC	F-IN-PROGRESS	
PLUMBING ROUGH-IN	ELE	CTRICAL ROUGH-IN	
MECHANICAL ROUGH-IN	GAS	ROUGH-IN	
FRAMING	EAF	RLY POWER RELEASE	
FINAL PLUMBING	FINA	AL ELECTRICAL	
FINAL MECHANICAL	FIN	AL GAS	
FINAL ROOF	BUI	LDING FINAL	

	Permit Number:
Town of Sew BUILDING PERMIT	TAPPLICATION
OWNER/TITLEHOLDER NAME: Jane Thompson	Phone (Day) <u> </u>
Job Site Address: 179 S. River Rd.	City: State Zin
Legal Description of Property:	
	city: Sewall's PT. State: FL. zip: 34976
Description of Work To Be Done: Extension to existing outside	
WILL OWNER BE THE CONTRACTOR?: Yes No	(If no, fill out the Contractor & Subcontractor sections below)
CONTRACTORIO	772 398.200
CONTRACTOR/Company: Ken Petropoules Carpen	
Street: 2350 S.E. Manifon Ter.	city: \(\frac{\frac{1}{5}L}{\text{State:}} \text{State:} \(\frac{\frac{1}{5}L}{\text{zip:}} \frac{34950}{34950} \)
State Registration Number:State Certification Number	er:Martin County License Number: SP 03324
COST AND VALUES: Estimated Cost of Construction or Improvements:	\$(Notice of Commencement needed over \$2500)
SUBCONTRACTOR INFORMATION:	
Electrical:	_State:License Number:
Mechanical:	State:License Number:
Plumbing:	
	State:License Number:
ST C. C. C. L.	
	Phone Number: 173-863 6032
Street:	City:State:Zip:
	Phone Number:
Street:	City:State:Zip:
AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living:	Garage:Covered Patios:ScreenedPorch: 400
Carport: Total Under Roof Wood Deck	
I understand that a separate permit from the Town may be required for E FURNACE, BOILERS, HEATERS, TANKS DOCKS, SEA WALLS, ACCESS REMOVAL AND R	ORY BUILDING, SAND OR FILL ADDITION OR REMOVAL, AND TREE
CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Flori National Electrical Code: 2002 Florida Energy (da Building Code (Structural, Mechanical, Plumbing, Gas): 2001 Code: 2001 Florida Accessibility Code: 2001
I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THE KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODE	IIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY S, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.
OWNER OR AGENT SIGNATURE (required)	CONTRACTOR/SIGNATURE (required)
State of Plorida, County of: MARTIN	On State of Florida, County of: MACTIN
This the <u>ISTH</u> day of <u>MAY</u> ,2003	This the 15TA day of MAy 2003
by VIRAINIA JANE THOM BON who is personally	by KEN DEAN PETRO POULOS who is personally
known to me or produced FL DL TS1 870357540	known to me or produced FL DL P36150465321-D
as identification. Notary Public	As identification Pour Notary Public
My Commission Expuesin.	My Commission Eaphes
PERMIT APPLICATIONS INVADIGN PLANE UNDERSTORS FROM APPROVAL NO	LAURA L. O'BRIEN

EXPIRES: April 28, 2007

Bonded Thru Notary Public Underwi

/data/bld/bldg_forms/Current.forms/noc

MOTARY SIGNATURE

02/06/03

CRITIQUE

Owner: Jane Thompson

Contractor:

Contractor's Phone Number:

Date: May 7, 2003 Contact Person:

Plan Reviewer: Gene Simmons

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITALS FOR EXTENSION OF DECK TO 179 SOUTH RIVER ROAD

Submittals (2 copies)

- 1. Current survey (within one year) containing the following information:
 - a. Dimensions from property line to proposed deck from side and rear
 - b. Dimension to concrete pad on south side of house.

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

- 1. Foundation Plan containing the following information:
 - a. The current foundation plan has all the connector callouts labeled with the same symbol. I cannot tell which belong to post to column at footing, floor joist to post and post to roof rafters. Label with different symbols.
- 2. Framing Plan
 - a. Stair treads need to be marked for revealed width and dimension of overhang. Framing plan calls for 11 ¼" treads with 7" risers which exceed the rule of 25.
- 3. Elevations
 - a. Stairs should show handrail with balusters and newel post at bottom and how secured.
- 4. Sections
 - a. Is there any roofing material on top of rafters or is it to be screened?

CRITIQUE

Owner: Jane Thompson
Contractor: KEN PETROPOULOS

Date: May 7, 2003 **Contact Person:**

Contractor's Phone Number:

Plan Reviewer: Gene Simmons

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITALS FOR EXTENSION OF DECK TO 179 SOUTH RIVER ROAD

Submittals (2 copies)

- 1. Current survey (within one year) containing the following information:
 - Dimensions from property line to proposed deck from side and rear
 - Dimension to concrete pad on south side of house.

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

- 1. Foundation Plan containing the following information:
 - The current foundation plan has all the connector callouts labeled with the same symbol. I cannot tell which belong to post to column at footing, floor joist to post and post to roof rafters. Label with different symbols.
- 2. Framing Plan
 - Stair treads need to be marked for revealed width and dimension of overhang. Framing plan calls for 11 1/4" treads with 7" risers which exceed the rule of 25.
- 3. Elevations
 - Stairs should show handrail with balusters and newel post at bottom and how secured.
- 4. Sections
 - Is there any roofing material on top of rafters or is it to be screened?
- COLUMN to FOOTER-SEE SECTION W/A-1 FLOOR JOIST TO POST - SEE FLR FRAMING PLAN 2/A-1
 POST TO ROOF RAFTERS- SEE ROOF PLAN 4/A-1 2. SEE SECTION 1/A·1
 3. SEE REVISED ELEVATION 5/A·1
 4. IT IS SCREENED SEE SECTION WAI



A. M. ENGINEERING AND TESTING, INC.

860 JUPITER PARK DRIVE, UNIT #1 JUPITER, FLORIDA 33458

LOCAL OFFICE: (561) 745-1060 FAX: (561) 745-0981

6279

REPORT OF FOOTING COMPACTION

Client: Ken Petropoulos Carpentry

Site:

2350 Southeast Maniton Terrace

Port St. Lucie, Florida 34952

Thompson Residence, 179 South River Road,

Sewall's Point, Martin County, Florida Deck Footing for Attached Addition Report Date: June 5, 2003

Project No: 03-1405 Report No: ----

Permit No: 6279

Density tests and Hand Cone Penetrometer (HCP) readings were made below footing grade to a depth of one foot at a minimum of three locations. At the time of our testing no information was available regarding the foundation setbacks. The density tests were performed in general compliance with ASTM D 2922. The HCP test, in conjunction with information about the soil type, is empirically correlated to the relative density of subsurface soils.

Density	Date	Elevation Dry Density (pcf) Per			Percent	
Test No.	Tested	Location	(feet)	In Place	Proctor	Compaction
1	6/5/03	Southeast Area	0-1	104.9	107.0	98.0
2		East, Center Area	0-1	104.5	107.0	97.7
3		North End	0-1	105.3	107.0	98.4
		West, Center Area	0-1	105.0	107.0	98.1

^{*} All elevations are below footing grade.

In the locations and depths that were tested, the soil beneath the footings has been compacted to a minimum of 95 percent of the modified Proctor maximum dry density (ASTM D 1557).

Additional compaction tests are required for the stem wall backfill beneath the slab.

Distribution:

Client (3)

Sewall's Point Building Department (1)

RGA/mo

Submitted by:

A. M. Engineering and Testing, Inc.

Rebecca Grant Ascoli, P.E.

Florida Registration No. 51863

TOWN OF SEWALL'S POINT Building Department - Inspection Log

6279 THOMPSON FOOTERS PRESO 179 S. RIVER RD PRE POUR INSPECTOR 4	Date of I	nspection: Mon Wed	□Fr1 69	_, 200#	Pageof
FOOTES PERD 179 S. RIVER DO PRE POUR PETROPOULOS PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS. 5 S. RIVER DO CIACLED WILBERDUNG PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS. TEMP POWER 5 S. RIVER DO CIACLED WILBERDUNG PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS. INSPECTOR.	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
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TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Wed Wed Ord Order

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6345 RE-ROOF

	MASTER PERMIT NO
TOWN OF SEWA	ALL'S POINT
Date 7/22/03	BUILDING PERMIT NO. 6345
/ 1	Type of Permit Poor Recover
Applied for by	(Contractor) Building Fee 120.00
Subdivision WHITE FENCE ACRES LOT 3A	Block Badon Fee
Address 179 S. RIVEROAC) Impost Fee
Type of structure SFR.	
Type of directure	
Parcel Central Number	Electrical Fee
Parcel Control Number:	Plumbing Fee
12284100 10010031	Roofing Fee
Amount Paid /20.00 Check #Ca	
Total Construction Cost \$ 5000.00	TOTAL Fees <u>120.00</u>
	/ ₁ / ₂ / ₃ / ₄
Signed VYXX ()	Signed Lene Summons (305)
Applicant	Town Building Official
DED	SAIT
PER	IVII I
☐ BUILDING ☐ ELECTRICAL ☐ PLUMBING ☐ ROOFING	☐ MECHANICAL ☐ POOL/SPA/DECK
☐ PLUMBING ————————————————————————————————————	☐ FENCE
☐ SCREEN ENCLOSURE ☐ TEMPORARY ☐ HURRICANE S	
☐ TREE REMOVAL ☐ STEMWALL	□ ADDITION
INSPEC	TIONS
UNDERGROUND PLUMBING	UNDERGROUND GAS
UNDERGROUND MECHANICAL	UNDERGROUND ELECTRICAL
STEMWALL FOOTING	FOOTING
SLAB	TIE BEAM/COLUMNS
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

EARLY POWER RELEASE

FINAL ELECTRICAL

BUILDING FINAL

FINAL GAS

FRAMING

FINAL ROOF

FINAL PLUMBING

FINAL MECHANICAL

		TAKE TO THE	_
. Tow	n öf¹Sewall's Point		VEDI
		JUL 1 6 Building Permit Number	Phha
Owner or Titleholder Name: MR. MRS.	Januare ou	Building Permit Number	
Legal Description of Property:	Possel	NOTES - POORT STATE: 410	Zip:
Legal Description of Property: Location of Job Site: 179 S Ruser DC	Type of Work To Be D	Number: Class	Desk
Apply, modified Bitumen mor Exerc	Par Shit oul	one. 1-007 0004 -4-1001	STOCK.
CONTRACTOR/Company Name: William J. Cha	ilifores	Phone Number: 77.	-879-2017 m
Street: 1003 F. Midwig Rol.	City: Pt.	Pierra State Ac	7in: 34982
State Registration Number: <u>RC 0066 239</u> State Ce		Martin County License Numbe	SP 02195
ARCHITECT:			
Street:			
	-		
ENGINEER:			
Street:	City:	State:	Zip:
	Living: Garage: C		
Carport:Total Under Roof			
Type Sewage:Septic Tank F	emit Number From Health Depart	Well Permit Nun	nber:
FLOOD HAZARD INFORMATION Flood Zone:	Minimum Base Flo	od Elevation (BEE)	NGVD
Proposed First Floor Habitable Floor Finished Elevation:			
			.,
COST AND VALUES Estimated Cost of Construction or Im	provements:	Estimated Fair Market	Value (FMV) Prior
To Improvements:tf Improvement, Is 0			
SUBCONTRACTOR INFORMATION			
Electrical:	State:	License Number:	
Mechanical:	State:	License Number:	
Plumbing:	State:		
Roofing: William J. Chalcfor	State: + C.	License Number: RC	0066239
			
I understand that a separate permit from the Town may be re			
HEATERS, TANKS, AIR CONDITIONERS, DOCKS, SEA W	ALLS, ACCESSORY BUILDINGS, SA	AND OR FILL ADDITION OR REI	MOVAL, AND TREE
REMOVAL AND RELOCATIONS.			
CODE EDITIONS IN EFFECT AT TIME OF APPLICATION			
Florida Building Code (Structural, Mechanical, Plumbing, Ga	south Florida Building C	ada (Structural Machanical Plum	shing Gae)
National Electrical CodeFlorida Energy Code	· 	ode (Structural, Mechanical, Fran	loing, Gas/
Florida Accessibility Code			
THEREBY CERTIFY THAT THE INFORMATION I HAVE F	URNISHED ON THIS APPLICATION	IS TRUE AND CORRECT TO TH	IE BEST OF MY
KNOWLEDGE AND I AGREE TO COMPLY WITH ALL AP	PLICABLE CODES. LAWS AND OR	DINANCES DURING THE BUILD	HNG PROCESS.
LOWNER OR AGENT SIGNATURE (Required)	A-ra	SIGNATURE (Required) 4	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
State of Florida, County of: Master	י עוייעו ו	ida, County of: Man	
This the 15 day of Truly	200.3 This the /3	5 day of Tyle	200 3
bywho is per	sonally by		_who is personally
Known to me or produced Luc	khown to me or	produced	
as identification.	As identification	Che	
Notary Public		Notary F	Public
My Commission Expires:	My Commission	Charles W	. Braun
Charles W. B MY COMMISSION # DD0 Seal November 19, BONDED THRU TROY FAIN IN	62799 EXPIRES	November BONDED THRU TROY FAI Seal	

OBE COMPLETE	D WHEN CONSTRUCTION VALUE EXCEEDS \$2500,00
PERMIT #	TAX FOLIO # 13 38 41 007 000 000 313
_	NOTICE OF COMMENCEMENT
state of <u>f</u>	country of MARTIN
	ED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOICEMENT.
LEGAL DESCRIP	TION OF PROPERTY(INCLUDE STREET ADDRESS IF AVAILABLE):
White fee	ine ACRES, addition Lot 3A.
GENERAL DESCH	RIPTION OF IMPROVEMENT: Roof use or Exsisting Moslifical Celerones +
OWNER: ME	+mes Thempson
ADDRESS: 179	5. River DR. Sounds point
PHONE #:	£3-1823 FAX#:
ADDRESS: 100 3	William J. Chaliforn. 3 F. Misway Ed. H. Pierce fla. 34982.
PHONE #: 772-	-879-3447 FAX #:
SURETY COMPA	NY(IF ANY)
ADDRESS:	
PHONE #	FAX #:
BOND AMOUNT:	\$ 5000,00 Sive Thousand Tollier
LENDER:	
ADDRESS:	•
PHONE #:	FAX #:
	N THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS AS PROVIDED BY SECTION 713.13(1)(A)7., FLORIDA STATUTES:
NAME:	STATE OF FLORIDA MARTIN COUNTY WY CO
ADDRESS:	THIS IS TO CERTIFY THAT THE FOREGOING PAGES IS A TRUE
PHONE #:	FAX #: AND CORRECT COPY OF THE ORIGINAL.
	HIMSELF, OWNER DESIGNATES MARSHA EWING CLERK
713.13(1)(B), FLOR	
PHONE #:	
THE EXPIRATION DATA	TE OF NOTICE OF COMMENCEMENT:
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SIGNATURE OF C	_
SWORN TO AND S	SUBSCRIBED BEFORE ME THIS 15 DAY OF July
	OR PRODUCED ID
	TYPE OF ID ft Land -
NOTARY SIGNAT	*URE MY COMMISSION # DD062799 EXPIRES November 19, 2005
(1/36_3614.	BONDED THRU TROT FAIN INSURANCE INC. 12/01/99

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

12/01/99

ACORD25(2001/08)

A	C	ORD. CERTIFICA	ATE C LIABILI	TY INSUF	RANCE		DATE (MAJDD/YYY)
PROD	UCER			THIS CERT	CIFICATE IS ISSU	JED AS A MATTER OF I	6/26/2003
AT 51	₩OC 54	DD INSURANCE AGENCY OKEECHOBEE BLVD. #	, INC. 105	HOLDER.	D CONFERS NO THIS CERTIFICA	D RIGHTS UPON THE	CERTIFICATE
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		William Chalifour		INSURER B:	_	JUNG	7 200
		1003 Bast Midway		INSURER C:			2003 - 1
		Ft. Pierce, FL 34	1982	INSURER D:		BY:	1
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	_	GES					
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DIVISION OF WORKERS' COMPEN	· .	
CONSTRUCTION INDUSTRY CERTIF	ICATE "F EXEMPTION	
ROM FLORIDA WORKERS COMP	11/22/2001	
EFFECTIVE DATEEXPIRATION DATE	1/22/2003	
EXPIRATION DATE	CHA TEOUX	·
	WILLIAM	
SOCIAL SECURITY NUMBER	026-14-5221	
BUSINESS NAME CHALIFO	UX WILLIAM J	
FEDERAL IDENTIFICATION NUMBER	R 192753878	
BUSINESS ADDRESS 1003	CACT MIDWAY P	ROAD

STATE OF PLORIDA ... AC# DU TETO

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

RC -0066239 07/25/2001 01900117

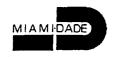
REGISTERED ROOFING CONTRACTOR CHALLFOUX, WILLIAM JOSEPH INDIVIDUAL (INDIVIDUAL MUST MEET ALL LOCAL LICENSING REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)

HAS REGISTERED under the provisions of Ch 489 rs. Experiencial date: AUG 31, 2003 SEC # 01072000415



Expires September 30, 2003

Name: WILLIAM J CHALIFOUX Company: CHALIFOUX ROOFING Address: 1003 East Midway Rd City, ST: Ft Pierce, FL 34982 License Type: ROOFING CONTRACTOR



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)

GAF Material Corporation 1361 Alps Road Wayne, NJ 07470

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 the BCCO and accepted by the Building Code and Product Review Committee 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: GAF Conventional Built-Up Roof System for Wood Deck.

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 requestor the Building Official.

This NOA consists of pages 1 through 21

TOWN OF SEWALL'S POINT THESE PLANS HAVE BEEN The submitted documentation was reviewed he free BBE compliance

NOA No: 02-0408.09 Expiration Date: 11/04/03 Approval Date: 05/23/02

Page 1 of 21

ROOFING SYSTEM APPROVAL

Category:RoofingSub-Category:BURDeck Type:WoodMaximum Design Pressure-75 psf

Fire Classification: See General Limitation #1

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT: TABLE 1

Product	<u>Dimensions</u>	Test Specification	Product <u>Description</u>
GAF Asphalt Concrete Primer (Matrix [™] 307 Primer)	5, 55 gallons	ASTM D 41	Asphalt concrete primer used to promote adhesion of asphalt in built-up roofing.
GAF Mineral Shield® Granules	60 lb. bags	ASTM D 1863	Granules for surfacing of exposed asphalt, cold process cement or emulsion. GAF Mineral Shield® Granules shall be used for flashing applications only.
GAF WeatherCoat® Emulsion (Matrix TM Fibered 305 Emulsion)	5 gallons	ASTM 1227	Surface coating for smooth surfaced roofs.
GAF Premium Fibered Aluminum Roof Coating (Matrix TM System Pro Aluminum Roof Coating Fibered 301)	1, 5 gallons	ASTM D 2824	Fibered aluminum coating.
GAF Jetblack All Weather Plastic Cement (Matrix [™] Standard Wet/Dry Roof Cement 204)	1, 5 gallons	ASTM D 3019 ASTM D 3409	Refined asphalt blended with a mineral stabilizer and fibers. Permits adhesion to wet and dry surfaces.
RUBEROID® Modified Bitumen Flashing Cement	5 gallons	ASTM D 4586	Fiber reinforced, polymer modified Flashing cement
Jetblack Premium Flashing Cement	5 gallons	ASTM D 4586	Asphalt flashing Cement
GAFGLAS® #75	39.37" (1 meter) wide	ASTM D 4601	Asphalt impregnated and coated glass mat base sheet.
GAFGLAS #80 Ultima - Base Sheet	39.37" (1 meter) wide	ASTM D4601	Asphalt impregnated and coated, fiberglass base sheet
GAFGLAS Flex Ply [™] 6	39.37" (1 meter) wide	ASTM D 2178	Type VI asphalt impregnated glass felt with asphalt coating.



NOA No: 02-0408.09 Expiration Date: 11/04/03 Approval Date: 05/23/02 Page 2 of 21

<u>Product</u>	<u>Dimensions</u>	Test Specification	Product <u>Description</u>
GAFGLAS Ply 4®	39.37" (1 meter) wide	- ASTM D 217	8 Type IV asphalt impregnated glass felt with asphalt coating.
GAFGLAS® Mineral Surfaced Cap Sheet		ASTM D 3909	Asphalt coated, glass fiber mat cap sheet surfaced with mineral granules.
GAFGLAS® STRATAVENT® Eliminator Perforated	39.37" (1 meter) wide	ASTM D 4897 D 3672	Fiberglass base sheet impregnated and coated on both sides with asphalt. Surfaced on the bottom side with mineral granules embedded in asphaltic coating with factory perforations.
GAFGLAS® Flashing	Various		Asphalt coated glass fiber mat flashing sheet available in three sizes.
GAFGLAS® STRATAVENT Eliminator Perforated Nailable	wide	D 3672	Fiberglass base sheet impregnated and coated on both sides with asphalt. Surfaced on the bottom side with mineral granules
RUBEROID® SBS Heat- Weld™ Smooth	1 meter (39.37") wide	ASTM D-6164	Non-Woven Polyester mat coated with polymer-modified asphalt and smooth surfaced.
RUBEROID® SBS Heat- Weld™ Granule	1 meter (39.37") wide	ASTM D-6164	Non-Woven Polyester mat coated with polymer modified asphalt and surfaced with mineral granules.
RUBEROID® SBS Heat- Weld™ 170 FR	1 meter (39.37") wide	ASTM D-6164	Non-Woven Polyester mat coated with fire retardant polymer modified asphalt and surfaced with mineral granules.
RUBEROID® SBS Heat- Weld™ PLUS	1 meter (39.37") wide	ASTM D-6164	Non-Woven Polyester mat coated with polymer modified asphalt and surfaced with mineral granules.
RUBEROID® SBS Heat- Weld PLUS FR	1 meter (39.37") wide	ASTM D-6164	Non-Woven Polyester mat coated with fire retardant polymer modified asphalt and surfaced with mineral granules.
RUBEROID® SBS Heat- Weld™ 25	1 meter (39.37") wide	ASTM D-6164	Non-Woven Polyester mat coated with polymer-modified asphalt and smooth surfaced.
RUBEROID Modified Base Sheet	39.37" (1 meter) wide		Premium glass fiber reinforced SBS- modified base sheet
Ruberoid® 20	39.37" (1 meter) wide	ASTM D 5147	SBS modified asphalt base sheet and interply sheet reinforce with a glass fiber mat.
Ruberoid® Mop Granule		ASTM D 6222 ASTM D 5147	Non-woven polyester mat coated with polymer modified asphalt and surfaced with mineral granules.



NOA No: 02-0408.09 Expiration Date: 11/04/03 Approval Date: 05/23/02 Page 3 of 21

Product	<u>Dimensions</u>	Test Specification	Product <u>Description</u>
Ruberoid® Mop Plus (Granule)	39.37" (1 meter) wide		Non-woven polyester mat coated with polymer modified asphalt and surfaced with mineral granules.
RUBEROID MOP Smooth	39.37" (1 meter) wide		Non-woven polyester mat coated with polymer-modified asphalt and smooth surfaced.
RUBEROID® MOP 170FR	39.37" (1 meter) wide		Non-Woven polyester mat coated with fire retardant polymer modified asphalt and surfaced with mineral granules.
RUBEROID® MOP FR	39.37" (1 meter) wide		Non-Woven polyester mat coated with fire retardant polymer modified asphalt and surfaced with mineral granules.
RUBEROID® TORCH Smooth	39.37" (1 meter) wide	ASTM D 5147	Heavy duty, polyester reinforced, asphalt modified bitumen membrane, smooth surface.
RUBEROID® TORCH Granule	39.37" (1 meter) wide	ASTM D 5147	Asphalt impregnated, coated felt, surfaced with mineral granule.
RUBEROID® TORCH PLUS (Granule)	39.37" (1 meter) wide		Heavy duty, polyester reinforced, asphalt modified bitumen membrane, granule surface
RUBEROID® TORCH FR	39.37" (1 meter) wide		Heavy duty, polyester reinforced, coated with fire retardant asphalt modified bitumen membrane, granule surface.
RUBEROID 170FR TORCH	39.37" (1 meter) Wide		Heavy duty, polyester reinforced, coated with fire retardant asphalt modified bitumen membrane, granule surface.
RUBEROID® 30	39.37" (1 meter) wide		Non-woven fiberglass mat coated with polymer modified asphalt and surfaced with mineral granules.
RUBEROID® 30 FR	39.37" (1 meter) wide		Non-woven fiberglass mat coated with fire retardant polymer modified asphalt and surfaced with mineral granules.
RUBEROID ULTRACLAD® SBS	39.37" (1 meter) wide		Woven fiberglass mat coated with Polymer modified asphalt and surfaced with aluminum, copper or stainless steel foil.
RUBEROID® Dual FR .	39.37" (1 meter) Wide		Non-woven polyester and fiberglass mat coated with file retardant, polymer modified asphalt and surfaced with mineral granules.



NOA No: 02-0408.09 Expiration Date: 11/04/03 Approval Date: 05/23/02 Page 4 of 21

Product	<u>Dimensions</u>	Test Specification	Product <u>Description</u>
Vent Stacks (metal and plastic)	· .	PA 100(A) ASTM D 1929 ASTM D 635	Stacks are available in metal or plastic.
GAF Aluminum Emulsion	5 gallons	None	Mineral colloidal bituminous emulsion with reflective aluminum flakes
GAF Aluminum Roof Paint (Matrix® System Pro Aluminum Roof Coating Fibered 302)	5 gallons	ASTM D2824, Type I	Non-fibered aluminum pigmented, asphalt roof coating
GAF Built-Up Roofing Asphalt	100 lb. cartons, bulk	ASTM D312, Types I, II, III and IV	Interply mopping and surfacing asphalt
RUBEROID MOD Asphalt, Asphalt L & Asphalt P	60 lb. kegs		SEBS modified asphalt
Tile-Mate Base Sheet	39.37" (1 meter) wide	ASTM D4601	Asphalt impregnated and coated, fiberglass base sheet
Tile-Mate Cap Sheet	39.37" (1 meter) wide	ASTM D 3909	Asphalt coated, glass fiber mat cap sheet surfaced with mineral granules.
Shingle-Mate TM Underlayment	4 sq. roll 30 lbs.		Fiberglass reinforced shingle underlayment
TopCoat® Surface Seal SB (Matrix 602 SB Coating)	5 gallons		Surface coating for smooth surfaced and mineral surfaced roofs.
GAF WeatherCote® MB+(Matrix 715 MB Coating)	5 gallons		Surface coating for smooth surfaced and mineral surfaced roofs.
TopCoat MB+(Matrix 715 MB Coating)	5 gallons		Surface coating for smooth surfaced and mineral surfaced roofs.
WeatherCote TM (Matrix 531 WeatherCote® Elastomeric Flashing Grade)	5 gallons		Surface coating for smooth surfaced and mineral surfaced roofs.
Matrix Low VOC	5 gallons		Surface coating for smooth surfaced and mineral surfaced roofs.
Matrix 101 System Pro SBS Adhesive	5 gallons	ASTM D3019	Cold Applied Modified SEBS Asphalt Adhesive
(Ruberoid®MB) Matrix 201 System Pro SBS Flashing	5 gallons	ASTM D3019	Cold Applied Modified SEBS Asphalt Adhesive – Flashing Grade.
(Ruberoid®MB) Matrix 102 Select SBS Adhesive	5 gallons	ASTM D3019	Cold Applied Modified SEBS Asphalt Adhesive.



NOA No: 02-0408.09 Expiration Date: 11/04/03 Approval Date: 05/23/02 Page 5 of 21

Don don 4	Dime	Test	Product
Product	<u>Dimensions</u>	Specification	<u>Description</u>
(Ruberoid®MB) Matrix 202 Select SBS Flashing	5 gallons	ASTM D4586	Cold Applied Modified SEBS Asphalt Adhesive – Flashing Grade.
Matrix 203 Standard Plastic Cement	5 gallons	ASTM D4586	Standard Plastic Asphalt Roofing Cement
Matrix 213 Gun Grade Plastic Cement	5 gallons	ASTM D4586	Standard Plastic Asphalt Roofing Cement Caulk Grade.
Matrix 103 Cold Adhesive	5 gallons	ASTM D3019	Cold Applied Asphalt Adhesive.
Matrix 303 Select Fibered Aluminum	5 gallons	ASTM D 2824	Fibered aluminum coating.
Matrix 304 Select Non- Fibered	5 gallons	ASTM D2824, Type I	Non-fibered aluminum pigmented, asphalt roof coating.
RUBEROID® Modified Bitumen Adhesive	5 gallons	ASTM D 3019 Type III	Fiber reinforced, rubberized Adhesive

APPROVED INSULATIONS:

TABLE 2

Product Name	Product Description	Manufacturer (With Current NOA)
GAFTEMP Isotherm R, RA, RN & Composite, EnergyGuard RA	Polyisocyanurate foam insulation	GAF Materials Corp.
GAFTEMP® Composite A & N	Polyisocyanurate foam insulation with high density fiberboard or Permalite perlite insulation.	GAF Materials Corp.
(BMCA)GAFTEMP® Fiberboard	Fiberboard insulation.	GAF Materials Corp.
GAFTEMP® Permalite	Perlite insulation board.	GAF Materials Corp.
GAFTEMP GAFCANT™	Cut perlite board	GAF Materials Corp.
GAFTEMP Permalite Recover Board	Perlite recover board	GAF Materials Corp.
GAFTEMP GAFEDGE™ Tapered Edge Strip	Tapered perlite board	GAF Materials Corp.
(BMCA) GAFTEMP® High Density Fiberboard	High density wood fiberboard insulation.	GAF Materials Corp.
BMCA EnergyGuard, RA	Polyisocynurate foam insulation	BMCA
BMCA Composite EnergyGuard, RA	Polyisocynurate/wood fiberboard composite	BMCA
PYROX	Polyisocyanurate foam insulation	Apache Products Co.
White Line	Polyisocyanurate foam insulation	Apache Products Co.



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APPROVED INSULATIONS:

TABLE 2

Product Name	Product Description	Manufacturer
ACFoam I, II & Composite	Polyisocyanurate foam insulation	(With Current NOA) Atlas Energy Products
ISO 95+	Polyisocyanurate foam insulation	Firestone Building Products, Inc.
ISO 95+ Composite	Polyisocyanurate/perlite ridged insulation	Firestone Building Products, Inc.
Wood Fiber	Wood fiber insulation board	generic
High Density Wood Fiberboard	Wood fiber insulation board	generic
Perlite Insulation	Perlite insulation board	generic
Dens Deck	Water resistant gypsum board	G-P Gypsum Corp.
E'NRG'Y-2 & E'NRG'Y-2 PLUS, UltraGard Gold	Polyisocyanurate foam insulation	Johns Manville
FiberGlass Roof Insulation	Glass fiber/Mineral fiber insulation	Johns Manville
Structodek	Wood fiber insulation board	Masonite.
Multi-Max & FA Paroc Base Board Paroc Cap Board	Polyisocyanurate roof insulation Rockwool insulation	RMax, Inc. Partek, Inc.

APPROVED FASTENERS:

TABLE 3

Fastener Number	Product Name	Product Description	Dimensions	Manufacturer (With Current NOA)
1.	GAFTITE® (Drill-Tec®) #12 Standard & #14 Heavy Duty Roofing Fastener	Insulation fastener for steel, wood & concrete decks.		GAF Materials Corp.
2.	GAFTITE® (Drill-Tec®) ASAP	Pre-assembled GAFTITE Fasteners and metal and plastic plates.		GAF Materials Corp.
3.	GAFTITE® (Drill-Tec®) Base Sheet Fastener and Plate	Base sheet fastening assembly.		GAF Materials Corp.
4.	Galvalume Plates (Drill-Tec® Metal)	Round galvalume stress plates.	3" and 3 ½"	GAF Materials Corp.
5.	Polypropylene Plates (Drill-Tec® Plastic)	Round polypropylene stress plates.	3" and 3 1/2"	GAF Materials Corp.
6.	Dekfast Fasteners #12, #14 & #15	Insulation fastener for wood, steel and concrete decks		Construction Fasteners Inc.



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APPROVED FASTENERS:

TABLE 3

Fastener Number	Product Name	Product Description	Dimensions	Manufacturer (With Current NOA)
7.	Dekfast Hex Plate	Galvalume hex stress plate.	2 7/8" x 3 ¼"	Construction Fasteners Inc.
8.	Dekfast Lock Plate	Polypropylene locking plate.	3" x 3 ¼"	Construction Fasteners Inc.
9.	#12 Roofgrip Fasteners	Insulation fastener for wood and steel.		ITW Buildex Corp.
10.	Metal Plate	Galvalume stress plate.	3" round 3" square	ITW Buildex Corp.
11.	Gearlok Plastic Plate Glasfast Fastener	Polypropylene round plate Insulation fastener assembly with recessed plastic plate	3.2"	ITW Buildex Corp. Johns Manville
13.	Olympic Fastener #12 & #14	Insulation fastener		Olympic Manufacturing Group, Inc.
14.	Olympic Fastener ASAP	Pre-assembled Insulation fastener and plate		Olympic Manufacturing Group, Inc.
15.	Olympic Polypropylene	Polypropylene plastic plate	3.25" round	Olympic Manufacturing Group, Inc.
16.	Olympic G-2	3.5" round galvalume AZ55 steel plate	3.5" round	Olympic Manufacturing Group, Inc.
17.	Olympic Standard	3" round galvalume AZ50 steel plate	3" round	Olympic Manufacturing Group, Inc.
18.	Insul-Fixx Fastener	Insulation fastener for steel and wood decks		SFS/Stadler
19.	Insul-Fixx S Plate	3" round galvalume AZ50 steel plate	3" round	SFS/Stadler
20.	Insul-Fixx P Plate	3" round polyethylene stress plate	3" round	SFS/Stadler
21.	Tru-Fast	Insulation fastener for steel and wood decks	·	The Tru-Fast Corp.
22.	Tru-Fast Plates	3" round galvalume AZ55 steel plate	3" round	The Tru-Fast Corp.
23.	Tru-Fast Plates	Polyethylene plastic plate	3" round	The Tru-Fast Corp.



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APPROVED ASSEMBLIES

Deck Type 11:

Wood, Insulated, New Construction or Reroof

Deck Description:

"," or greater plywood or wood plank

System Type A (1):

Anchor sheet mechanically fastened, all layers of insulation adhered with

approved asphalt.

All General and System Limitations shall apply.

One or more layers of any of the following insulations.

Insulation Layer (Table 2) (When applicable: Steel plate only =S, platic plate only =P)

Insulation Fasteners

Fastener

(Table 3)

Density/ft²

ACFoam-I, E'NRG'Y 2, GAFTEMP® Isotherm R, E'NRG'Y 2 Plus, GAFTEMP Isotherm RA, GAFTEMP Isotherm RN, GAFTEMP Composite, GAFTEMP Composite A, GAFTEMP Composite N, BMCA EnergyGuard, BMCA EnergyGuard Composite, EverGuard ISO, ISORoc, EnergyGuard RA, EnergyGuard RA Composite

Minimum 1" thick

N/A

N/A

BMCA High Density Wood Fiber, GAFTEMP® High Density Wood Fiber, GAFTEMP RecoverBoard, Wood Fiber, GAFTEMP® Fiberboard

Minimum ½" thick

N/A

N/A

Perlite, GAFTEMP® Permalite®, Permalite Tapered, Paroc

Minimum ¾" thick

N/A

N/A

Fiberglas (Min. 15/16" thick)

N/A

N/A

Note: All insulation shall be adhered to the anchor sheet in full mopping of approved hot asphalt within the EVT range and at a rate of 20-40 lbs/100 ft². Please refer to Roofing Application Standard RAS 117 for insulation attachment. Insulation listed as base layer only shall be used only as base layers with a second layer of approved top layer insulation installed as the final membrane substrate. Composite insulation panels may be used as a top layer placed with the polyisocyanurate side facing down. GAF requires either a ply of GAFGLAS STRATAVENT® Eliminator Perforated laid dry or a layer of GAFTEMP® PERMALITE or wood fiber overlay board on all isocyanurate applications.

Anchor sheet:

GAFGLAS #80 Ultima™ Base Sheet, STRATAVENT® Eliminator Perforated Nailable, RUBEROID Modified Base Sheet, RUBEROID® 20, RUBEROID SBS

Heat-Weld™ Smooth or RUBEROID SBS Heat-Weld 25 base sheet

mechanically fastened as described below;

Fastening Options:

GAFGLAS® Ply 4®, GAFGLAS Flex Ply™ 6, GAFGLAS #75 Base Sheet or any of above Anchor sheets attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the lap staggered and in two

rows 12" o.c. in the field.

(Maximum Design Pressure -45 psf, See General Limitation #7)



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GAFGLAS® Ply 4®, GAFGLAS Flex Ply™ 6, GAFGLAS #75 Base Sheet or any of above Anchor sheets attached to deck with Drill-Tec (GAFTITE) #12 or #14 Screws and 3" Plates, 12" o.c. in 3 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 12" o.c. in the field of the sheet. (Maximum Design Pressure -45 psf, See General Limitation #7) GAFGLAS Flex PlyTM 6, GAFGLAS #75 Base Sheet or any of above Anchor sheets attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the 4" lap staggered and in two rows 9" o.c. in the field. (Maximum Design Pressure -52.5 psf, See General Limitation #7) GAFGLAS #75 Base Sheet or any of above Anchor sheets attached to deck with Drill-Tec (GAFTITE) #12 or #14 Screws and 3" Plates, 12" o.c. in 4 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet.

(Maximum Design Pressure -60 psf, See General Limitation #7) Any of above Anchor sheets attached to deck approved annular ring shank nails and 3" inverted Drill-Tec (GAFTITE) insulation plates at a fastener spacing of 9" o.c. at the 4" lap staggered in two rows 9" in the field.

(Maximum Design Pressure -60 psf, See General Limitation #7) GAFGLAS #75 Base Sheet or any of above Anchor sheets attached to deck with Drill-Tec (GAFTITE) #12 or #14 Screws and 3" Plates, 8" o.c. in 4 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet.

(Maximum Design Pressure -75 psf, See General Limitation #7) (Optional) Install one ply of GAFGLAS® #75, GAFGLAS #80 Ultima™ Ultra Base Sheet, GAFGLAS STRATAVENT® Eliminator Perforated, RUBEROID Modified Base Sheet, RUBEROID Mop Smooth, RUBEROID® 20 RUBEROID SBS Heat-Weld Smooth or RUBEROID SBS Heat-Weld directly over the top layer of insulation. Adhere with any approved mopping asphalt applied within the EVT range and at a rate of 20-40 lbs./sq; (see General Limitation #4). One or more plies GAFGLAS PLY 4®, GAFGLAS Flex Ply 6 sheet, #80 Ultima, RUBEROID Mop Smooth or RUBEROID 20 adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. (Optional) One ply of GAFGLAS® Mineral Surfaced Cap Sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

(Required if no cap sheet is used) Install one of the following:

- 1. GAF Special Roofing Bitumen with an application rate of 20 lbs./sq with an application rate of 1.5 gal./sq.; or GAF WEATHER COAT® Emulsion (Matrix 305 Fibered Emulsion) with an application rate of 3 gal./sq.; or GAF Premium Fibered Aluminum Roof Coating (Matrix System Pro Aluminum Roof Coating Fibered 301) with an application rate of 1.5 gal./sq.
- 2. Asphalt flood coat at an application rate of 60 lbs./sq. ± 20%; plus gravel or slag with an application rate of 400 lbs./sq. & 300 lbs./sq., respectively.
- 3. Top Coat Surface Seal SB (Matrix 602 SB Coating), Top Coat MB Plus (Matrix 715 MB Coating), GAF WeatherCote or WeatherCote LOW-VOC applied at rate of 1-1.5 gal/sq.

Maximum Design Pressure:

See Fastening above.

Base Sheet:

Ply Sheet:

Cap Sheet:

Surfacing:

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Deck Type 1I:

Wood, Insulated, New Construction, or Reroof

Deck Description:

19/32" or greater plywood or wood plank

System Type B:

Optional base sheet laid dry; base layer of insulation mechanically fastened,

optional top layer adhered with approved asphalt.

All General and System Limitations shall apply.

One or more layers of any of the following insulations.

Insulation for Base Layer (Table 2) (When applicable: Steel plate only =S, platic plate only =P)	Insulation Fasteners (Table 3)	Fastener Density/ft ²
ACFoam-I, GAFTEMP® Isotherm R, BMCA EnergyGuard Minimum 1.3" thick	l, EnergyGuard RA 1, 2, 6, 9, 13, 14 & 21S	1:3 ft²
E'NRG'Y 2, GAFTEMP Isotherm RN Minimum 1.4" thick	1, 2, 6S, 9, 13, 14 & 21S	1:3 ft²
E'NRG'Y 2 Plus, GAFTEMP Composite N, BMCA Energy Composite	Guard Composite, Energy(Guard RA
Minimum 1.5 thick	6S, 9, 18 & 21S	1:3 ft²
Perlite, GAFTEMP® PERMALITE® Minimum ¾" thick	1\$(3.5"), 6\$, 9, 13, 14 & 21\$	1:2 ft²
Fiberglas Minimum ¹⁵ / ₁₆ " thick	1, 2, 6, 9, 12, 13, 14 & 21S	1:2.67 ft²
Wood Fiber, GAFTEMP® Fiberboard, GAFTEMP High De Minimum 1" thick	nsity Fiberboard 1, 2, 6, 13, 14 & 21S	1:4 ft²

Note: Base layer shall be mechanically attached with fasteners and density described. Insulation panels listed are minimum sizes and dimensions; if larger panels are used the number of fasteners per board shall be increased maintaining the same fastener density (See Roofing Application Standard RAS 117 for fastening details). GAF requires either a ply of GAFGLAS STRATAVENT® Eliminator perforated laid dry or a layer of GAFTEMP® PERMALITE or wood fiber overlay board on all isocyanurate applications.

Insulation for Top Layer (Table 2) (When applicable: Steel plate only =S, platic plate only =P) Any of the insulations listed for Base Layer, above.	Insulation Fasteners (Table 3) N/A	Fastener Density/ft² N/A
High Density Wood Fiber, GAFTEMP® High Density Wood Board Minimum ½" thick	Fiberboard, PERMALIT	ΓE® Recover
Paroc Minimum ¾" thick	N/A	N/A

Note: Optional top layer of insulation shall be adhered with approved asphalt within the EVT range and at a rate of 20-40 lbs/100 ft². Please refer to Roofing Application Standard RAS 117 for insulation attachment. Composite insulation boards used as a top layer shall be installed with the polyisocyanurate face down.



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Base Sheet:

(Optional) Install one ply of GAFGLAS® #75, GAFGLAS #80 ULTIMA™ Base Sheet, GAFGLAS® PLY 4®, GAFGLAS® PLY 6®, GAFGLAS Flex Ply 6, GAFGLAS® STRATAVENT® Eliminator Perforated(laid dry), RUBEROID Modified Base Sheet, RUBEROID Mop Smooth or RUBEROID® 20 directly over the top layer of insulation. Adhere with any approved mopping asphalt applied within the EVT range and at a rate of 20-40 lbs./sq; (see General Limitation #4).

Ply Sheet:

Two or more plies of GAFGLAS® PLY 4®, GAFGLAS FlexPlyTM 6 ply sheet, #80 Ultima, RUBEROID Mop Smooth or RUBEROID 20 adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. (See specification number for appropriate number of plies).

Cap Sheet:

(Optional) One ply of GAFGLAS® Mineral Surfaced Cap Sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. (See GAF application instructions for approved method of installation). (Required if no cap sheet is used) Install one of the following:)

Surfacing:

- 1. GAF Special Roofing Bitumen with an application rate of 20 lbs./sq with an application rate of 1.5 gal./sq.; or GAF WEATHER COAT® Emulsion (Matrix 305 Fibered Emulsion) with an application rate of 3 gal./sq.; or GAF Premium Fibered Aluminum Roof Coating (Matrix System Pro Aluminum Roof Coating
- Fibered 301) with an application rate of 1.5 gal./sq.

 2. Asphalt flood coat at an application rate of 60 lbs./sq. ± 20%; plus gravel or slag

with an application rate of 400 lbs./sq. & 300 lbs./sq., respectively.

3. Top Coat Surface Seal SB (Matrix 602 SB Coating), Top Coat MB Plus (Matrix 715 MB Coating), GAF WeatherCote or WeatherCote LOW-VOC applied at rate of 1-1.5 gal/sq.

Maximum

Design Pressure: -45 psf; (See General Limitation #7)



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Deck Type 11:

Wood, Insulated, New Construction or Reroof

Deck Description:

 $^{19}/_{32}$ " or greater plywood or wood plank

System Type C:

One or more layers of insulation simultaneously attached; Base layer optional.

All General and System Limitations shall apply.

One or more layers of any of the following insulations.

Insulation for Base Layer (Table 2)	Insulation Fasteners	Fastener
(When applicable: Steel plate only =S, platic plate only =P)		Density/ft ²
ACFoam-I, GAFTEMP® Isotherm R, GAFTEMP Isotherm	RA, GAFTEMP Isothern	RN, BMCA
EnergyGuard, EnergyGuard RA		,
Minimum 1.3" thick	N/A	N/A
E'NRG'Y 2		
Min. 1.4" thick	N/A	N/A
ISORoc, E'NRG'Y 2 Plus, GAFTEMP Composite A, GAFTE EnergyGuard Composite, EnergyGuard RA Composite	MP Composite N, BMCA	A
Minimum 1.5" thick	N/A	N/A
Perlite, GAFTEMP® PERMALITE		
Minimum ¾" thick	N/A	N/A
Fiberglas		
Minimum 15/16" thick	N/A	N/A
Wood Fiber, GAFTEMP® Fiberboard, GAFTEMP High Den	sity Fiberboard	
Minimum 1" thick	N/A	N/A

Note: All layers shall be simultaneously fastened; see top layer below for fasteners and density. Insulation panels listed are minimum sizes and dimensions; if larger panels are used, the number of fasteners shall be increased maintaining the same fastener density. Please refer to Roofing Application Standard RAS 117 for insulation attachment. GAF requires either a ply of GAFGLAS STRATAVENT® perforated laid dry or a layer of GAFTEMP® PERMALITE or wood fiber overlay board on all isocyanurate applications.

Insulation for Top Layer (Table 2) (When applicable: Steel plate only =S, platic plate only =P) ACFoam-I, GAFTEMP® Isotherm R, BMCA EnergyGuard	Insulation Fasteners (Table 3)	Fastener Density/ft ²
Minimum 1.3" thick	1, 2, 6, 9, 13, 14 & 21S	1:3 ft²
E'NRG'Y 2, GAFTEMP Isotherm RN Minimum 1.4" thick	1, 2, 6S, 9, 13, 14 & 21S	1:3 ft²
E'NRG'Y 2 Plus, GAFTEMP Composite N, BMCA Energy Composite Minimum 1.5 thick	Guard Composite, Energy(
Perlite, GAFTEMP® PERMALITE®	03, 9, 16 & 213	1:3 ft²
Minimum ¾" thick	1S(3.5"), 6S, 9, 13, 14 & 21S	1:2 ft²



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1, 2, 6, 9, 12, 13, 14 &

1:2.67 ft²

215

Wood Fiber, GAFTEMP® Fiberboard, GAFTEMP High Density Fiberboard
Minimum 1" thick

1, 2, 6, 13, 14 & 21S

1:4 ft²

Note: Insulation panels listed are minimum sizes and dimensions; if larger panels are used, the number of fasteners shall be increased maintaining the same fastener density. Please refer to Roofing Application Standard RAS 117 for insulation attachment. GAF requires either a ply of GAFGLAS STRATAVENT® Eliminator Perforated laid dry or a layer of GAFTEMP® PERMALITE or wood fiber overlay board on all isocyanurate applications.

Base Sheet:

(Optional) Install one ply of GAFGLAS® #75, GAFGLAS #80 Ultima™ Base Sheet, GAFGLAS® PLY 4®, GAFGLAS FlexPly™ 6, GAFGLAS® STRATAVENT® Eliminator Perforated (laid dry), RUBEROID Modified Base Sheet, RUBEROID Mop Smooth or RUBEROID® 20 directly over the top layer of insulation. Adhere with any approved mopping asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.. If base sheet is applied directly to

polyisocyanurate insulation only a spot or strip mopped application as detailed in this approval the use of an overlay board is approved; see General Limitation #4.

Ply Sheet:

Two or more plies of GAFGLAS® PLY 4®, GAFGLAS® PLY 6®, GAFGLAS FlexPly 6 ply sheet, #80 Ultima, , RUBEROID Mop Smooth or RUBEROID 20 adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Cap Sheet:

(Optional) One ply of GAFGLAS® Mineral Surfaced Cap Sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Surfacing:

(Required if no cap sheet is used) Install one of the following:)

- 1. GAF Special Roofing Bitumen with an application rate of 20 lbs./sq with an application rate of 1.5 gal./sq.; or GAF WEATHER COAT® Emulsion (Matrix 305 Fibered Emulsion) with an application rate of 3 gal./sq.; or GAF Premium Fibered Aluminum Roof Coating (Matrix System Pro Aluminum Roof Coating Fibered 301) with an application rate of 1.5 gal./sq.
- 2. Asphalt flood coat at an application rate of 60 lbs./sq. ± 20%; plus gravel or slag with an application rate of 400 lbs./sq. & 300 lbs./sq., respectively.
- Top Coat Surface Seal SB (Matrix 602 SB Coating), Top Coat MB Plus (Matrix 715 MB Coating), GAF WeatherCote or WeatherCote LOW-VOC applied at rate of 1-1.5 gal/sq.

Maximum Design

Pressure:

-45 psf; (See General Limitation #7)



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Deck Type 11:

Wood, Insulated, New Construction or Reroof

Deck Description:

19/3," or greater plywood or wood plank

System Type D (1):

Insulation and Base sheet simultaneously

All General and System Limitations shall apply.

One or more layers of any of the following insulations.

Insulation Layer

Insulation Fasteners

Fastener

(Table 3)

Density/ft² ACFoam-I, E'NRG'Y 2, GAFTEMP® Isotherm R, E'NRG'Y 2 Plus, GAFTEMP Isotherm RA,

BMCA EnergyGuard, BMCA EnergyGuard RA, GAFTEMP Isotherm RN, GAFTEMP Composite, GAFTEMP Composite A, GAFTEMP Composite N loosely laid with firmly butted joints. Minimum thickness, 1.3". GAFTEMP High Density Fiberboard, GAFTEMP Fiberboard, minimum thickness 1".

Base Sheet:

Install one ply of GAFGLAS® #75, GAFGLAS #80 Ultima™ Base Sheet. GAFGLAS® STRATAVENT® Eliminator Perforated or RUBEROID® 20 base sheet applied over the loose laid insulation with 2" side laps mechanically

fastened as described below:

Fastening Options:

GAFTITE #12 or #14 Screws and 3" Plates are installed through the base sheet and insulation in 3 rows 12" o.c. One row is in the 2" side lap. The other rows

are equally spaced approximately 12" o.c. in the field of the sheet. (Maximum Design Pressure -45 psf, See General Limitation #7)

GAFTITE #12 or #14 Screws and 3" Plates are installed through the base sheet and insulation in 4 rows 8" o.c. One row is in the 2" side lap. The other 3 rows

are equally spaced approximately 9" o.c. in the field of the sheet. (Maximum Design Pressure -75 psf, See General Limitation #7)

GAFTITE #12 or #14 Screws and 3" Plates in 4 rows 12" o.c. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet. (Maximum Design Pressure -60 psf, See General Limitation #7)

Ply Sheet:

One or more plies GAFGLAS PLY 4®, GAFGLAS® PLY 6® Ply, GAFGLAS FlexPly 6 sheet, #80 Ultima or RUBEROID 20adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Cap Sheet:

(Optional) One ply of GAFGLAS® Mineral Surfaced Cap Sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Surfacing:

(Required if no cap sheet is used) Install one of the following: GAF Special Roofing Bitumen with an application rate of 20 lbs./sq with an

application rate of 1.5 gal./sq.; or GAF WEATHER COAT® Emulsion (Matrix 305 Fibered Emulsion) with an application rate of 3 gal./sq.; or GAF Premium Fibered Aluminum Roof Coating (Matrix System Pro Aluminum Roof Coating

Fibered 301) with an application rate of 1.5 gal./sq.



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Asphalt flood coat at an application rate of 60-lbs./sq. \pm 20%; plus gravel or slag with an application rate of 400 lbs./sq. & 300 lbs./sq., respectively.

Top Coat Surface Seal SB (Matrix 602 SB Coating), Top Coat MB Plus (Matrix 715 MB Coating), GAF WeatherCote or WeatherCote LOW-VOC applied at rate of 1-1.5 gal/sq.

Maximum Design Pressure:

See Fastening Above



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Deck Type 1:

Wood, Non-insulated New Construction or Reroof

Deck Description:

19/1,," or greater plywood or wood plank decks

System Type E (1):

Base sheet mechanically fastened.

All General and System Limitations shall apply.

Base sheet:

GAFGLAS #80 Ultima™ Base Sheet, STRATAVENT® Eliminator Perforated Nailable, RUBEROID Modified Base Sheet, RUBEROID® 20, RUBEROID SBS Heat-Weld™ Smooth or RUBEROID SBS Heat-Weld 25 base sheet mechanically fastened to deck as described below;

Fastening Options:

GAFGLAS® Ply 4®, GAFGLAS Flex Ply™ 6, GAFGLAS #75 Base Sheet or any of above Base sheets attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the lap staggered and in two rows 12" o.c. in the field.

(Maximum Design Pressure -45 psf, See General Limitation #7) GAFGLAS® Ply 4®, GAFGLAS Flex Ply™ 6, GAFGLAS #75 Base Sheet or any of above Base sheets attached to deck with Drill-Tec (GAFTITE) #12 or #14 Screws and 3" Plates, 12" o.c. in 3 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 12" o.c. in the field of the sheet. (Maximum Design Pressure -45 psf, See General Limitation #7) GAFGLAS Flex Ply™ 6, GAFGLAS #75 Base Sheet or any of above Base

sheets attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the 4" lap staggered and in two rows 9" o.c. in the field. (Maximum Design Pressure -52.5 psf, See General Limitation #7) GAFGLAS #75 Base Sheet or any of above Base sheets attached to deck with Drill-Tec (GAFTITE) #12 or #14 Screws and 3" Plates, 12" o.c. in 4 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet.

(Maximum Design Pressure -60 psf, See General Limitation #7) Any of above Base sheets attached to deck approved annular ring shank nails and 3" inverted Drill-Tec (GAFTITE) insulation plates at a fastener spacing of 9" o.c. at the 4" lap staggered in two rows 9" in the field.

(Maximum Design Pressure -60 psf, See General Limitation #7)

GAFGLAS #75 Base Sheet or any of above Base sheets attached to deck with Drill-Tec (GAFTITE) #12 or #14 Screws and 3" Plates, 8" o.c. in 4 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet.

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

Ply Sheet:

One or more plies of GAFGLAS® PLY 4®, GAFGLAS® PLY 6® ply sheet, #80 Ultima, RUBEROID MOP Smooth or RUBEROID 20 adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-

40 lbs./sq.

(Optional) One ply of GAFGLAS® Mineral Surfaced Cap Sheet adhered in a Cap Sheet:

full mopping of approved asphalt applied within the EVT range and at a rate of

20-40 lbs./sq.



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Surfacing:

(Required if no cap sheet is used) Install one of the following:

- 1. GAF Special Roofing Bitumen with an application rate of 20 lbs./sq with an application rate of 1.5 gal./sq.; or GAF WEATHER COAT® Emulsion (Matrix 305 Fibered Emulsion) with an application rate of 3 gal./sq.; or GAF Premium Fibered Aluminum Roof Coating (Matrix System Pro Aluminum Roof Coating Fibered 301) with an application rate of 1.5 gal./sq.
- 2. Asphalt flood coat at an application rate of 60 lbs./sq. ± 20%; plus gravel or slag with an application rate of 400 lbs./sq. & 300 lbs./sq., respectively.
- 3. Top Coat Surface Seal SB (Matrix 602 SB Coating), Top Coat MB Plus (Matrix 715 MB Coating), GAF WeatherCote or WeatherCote LOW-VOC applied at rate of 1-1.5 gal/sq.

Maximum Design Pressure:

See Fastening Above



NOA No: 02-0408.09 Expiration Date: 11/04/03 Approval Date: 05/23/02

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Membrane Type:

BUR

Deck Type 1:

Wood, Non-insulated

Deck Description:

19/,," or greater plywood or wood plank

System Type E (2):

Tile Underlayment, Base Sheet mechanically attached.

Anchor sheet:

GAFGLAS® #80 Ultima™ Base Sheet, RUBEROID® 20 or Tile-Mate Base Sheet applied with a minimum 2" side lap and a minimum 6"end lap. Base sheet may be applied at a right angle (90°) to the slope of the deck with approved annular ring shank nails and tin caps at a fastener spacing of 6" o.c. at the 2" side

lap, and two 12" o.c. staggered rows along the center of the sheet.

Ply Sheet:

(Optional) One, or more plies GAFGLAS PLY 4® Ply, GAFGLAS FlexPlyTM 6 sheet, GAFGLAS #80 Ultima™, RUBEROID MOP Smooth or RUBEROID® 20 adhered in a full mopping of approved asphalt applied within the EVT range

and at a rate of 20-40 lbs./sq.

Cap Sheet:

One ply RUBEROID® MOP, RUBEROID® MOP PLUS or Tile-Mate Cap membrane may be applied at a right angle (90°) to the slope of the deck* adhered in a full mopping of Type IV asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. Membrane shall be backnailed to deck with approved annular ring shank nails and tin caps in accordance to applicable Building Code. No

nails or tin caps shall be exposed

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

strapped.

Maximum Design Pressure:

Refer to tile manufacturer's NOA.

Maximum Slope:

Must Comply with Roofing Application Standard RAS 118, RAS 119, RAS 120

and applicable Building Code.



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WOOD DECK SYSTEM LIMITATIONS:

- 1 A slip sheet is required with Ply 4 and Flex Ply 6 when used as a mechanically fastened base or anchor sheet.
- 2. Minimum ¼" Dens Deck or ½ Type X gypsum board is acceptable to be installed directly over the wood deck.

GENERAL LIMITATIONS:

- 1. Fire classification is not part of this acceptance, refer to a current Approved Roofing Materials Directory for fire ratings of this product.
- 2. Insulation may be installed in multiple layers. The first layer shall be attached in compliance with Product Control Approval guidelines. All other layers shall be adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq., or mechanically attached using the fastening pattern of the top layer
- 3. All standard panel sizes are acceptable for mechanical attachment. When applied in approved asphalt, panel size shall be 4' x 4' maximum.
- 4. An overlay and/or recovery board insulation panel is required on all applications over closed cell foam insulations when the base sheet is fully mopped. If no recovery board is used the base sheet shall be applied using spot mopping with approved asphalt, 12" diameter circles, 24" o.c.; or strip mopped 8" ribbons in three rows, one at each sidelap and one down the center of the sheet allowing a continuous area of ventilation. Encircling of the strips is not acceptable. A 6" break shall be placed every 12' in each ribbon to allow cross ventilation. Asphalt application of either system shall be at a minimum rate of 12 lbs./sq. Note: Spot attached systems shall be limited to a maximum design pressure of -45 psf.
- 5. Fastener spacing for insulation attachment is based on a Minimum Characteristic Force (F') value of 275 lbf., as tested in compliance with Testing Application Standard TAS 105. If the fastener value, as field-tested, are below 275 lbf. insulation attachment shall not be acceptable.
- 6. Fastener spacing for mechanical attachment of anchor/base sheet or membrane attachment is based on a minimum fastener resistance value in conjunction with the maximum design value listed within a specific system. Should the fastener resistance be less than that required, as determined by the Building Official, a revised fastener spacing, prepared, signed and sealed by a Florida Registered Engineer, Architect, or Registered Roof Consultant may be submitted. Said revised fastener spacing shall utilize the withdrawal resistance value taken from Testing Application Standards TAS 105 and calculations in compliance with Roofing Application Standard RAS 117.
- 7. Perimeter and corner areas shall comply with the enhanced uplift pressure requirements of these areas. Fastener densities shall be increased for both insulation and base sheet as calculated in compliance with Roofing Application Standard RAS 117. (When this limitation is specifically referred within this NOA, General Limitation #9 will not be applicable.)
- 8. All attachment and sizing of perimeter nailers, metal profile, and/or flashing termination designs shall conform with Roofing Application Standard RAS 111 and applicable wind load requirements.
- 9. The maximum designed pressure limitation listed shall be applicable to all roof pressure zones (i.e. field, perimeters, and corners). Neither rational analysis, nor extrapolation shall be permitted for enhanced fastening at enhanced pressure zones (i.e. perimeters, extended corners and corners). (When this limitation is specifically referred within this NOA, General Limitation #7 will not be applicable.)

END OF THIS ACCEPTANCE



NOA No: 02-0408.09 Expiration Date: 11/04/03 Approval Date: 05/23/02

Page 21 of 21

TOWN OF SEWALL'S POINT Building Department Inspection Log

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TOWN OF SEWALL'S POINT Building Department - Inspection Log

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TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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7195 EXTERIOR REPAIRS

		MASTER PERMIT NO
то	WN OF SEWALL'S	POINT
Date	-	BUILDING PERMIT NO. 7195 Type of Permit PEPAR.
·	_	Type of Permit
		Radon Fee
		Impact Fee
Type of structure SER		~ ~
		Electrical Fee 35.00
Parcel Control Number:		Plumbing Fee
13384100° Amount Paid 196.90 Chec	70000031300 ck# <u>/3293</u> Cash	Roofing Fee 10% PLAN Other Fees (REVIEW)
Total Construction Cost \$ 15.6	200 .	TOTAL Fees 4 90
Signed Signed Applicant	Signed	Town Building Official
	PERMIT	
BUILDING PLUMBING DOCK/BOAT LIFT SCREEN ENCLOSURE FILL TREE REMOVAL	☐ ELECTRICAL ☐ ROOFING ☐ DEMOLITION ☐ TEMPORARY STRUCT ☐ HURRICANE SHUTTE ☐ STEMWALL	
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UNDERGROUND PLUMBING		DERGROUND GAS
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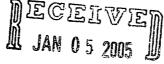
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TIWNER/TITLEHOLDER:N	AME: JANE THOMPSOI	<u>N</u>	Phone (Day) _(772)283-1823 (Fa	x)
lob Site Address: 179 SOUT	TH RIVER ROAD		City: STUART	State:FL	Zip:34996
egal Description of Property: W					13
Owner Address (if different):			City:	State:	Zip:
Description of Work To Be Done:	DEMO AND REBUILD A	REAS DAMAGED BY	TERMITE ACTIV	/ITV	
WILL OWNER BE THE CO		Yes No			ontractor sections below)
CONTRACTOR/Company					
Street: 3163 SE LIONAL TEF	RRACE		_City:_STUART	State:_	FL Zip: 34996
State Registration Number:	State Ce	ertification Number: CE	BC047650	Martin County License I	Number:
COST AND VALUES: Estim	nated Cost of Construction c	or Improvements: \$1	15,000	(Notice of Commenc	ement needed over \$2500)
SUBCONTRACTOR INFO		=======================================			
Electrical: -ELITE ELECTRIC		fric Stat	e: !F-L	License Number:_	ER0011841
Mechanical: N/A		Sta			
			te:		
Roofing: N/A		Stat		License Number:_	
ARCHITECTGRANFIELD &	GRANFIELD ARCHITECTS	<u> </u>		Phone Number:(772) 283-6032
Street: 3601 SE OCEAN 6	BLVD., SUITE 2		City:STUAF	RTState:	:FLZıp: <u>_34996_</u>
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ENGINEER			P	State:	Zip:
Street:					=======================================
AREA SQUARE FOOTAGE - S	EWER - ELECTRIC	Living:Gara	ge:Cov	ered Patios:S	creened Porch:
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Permit Number:___

ANN M. WALTZINGER MY COMMISSION # DD 077696 EXPIRES: December 25, 2005 Bonded Thru Notzry Public Underwriters

	MASTER PERMIT NO			
TOWN OF SEV	WALL'S POINT			
Date	BUILDING PERMIT NO. 7.181			
Building to be erected for THOMPSON	J Type of Permit SUB FIEC			
Applied for by FLORIDA'S FINEST/Ha				
Subdivision WILTE FENCE ACRES LOT LOT	· · · · · · · · · · · · · · · · · · ·			
170 C 1'				
Address 179 S. RIVER R	Impact Fee			
Type of structure STR	A/C Fee			
PRINT QUAL NAME: IHOMA	AS by thansance Electrical Fee 17180			
Parcel Control Number: Lcd: Ec	000 (34 Plumbing Fee/			
1338410076000	603/3000 Roofing Fee			
Amount PaidCheck #\	Cash Other Fees ()			
Total Construction Cost \$	TOTAL Fees			
Signed C	Signed Jene Sumous (M)			
Applicant	Town Building Official			
PI	ERMIT			
BUILDING ELECTRIC				
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☐ TREE REMOVAL ☐ STEMWA	LL ADDITION			
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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 PLUMBING ROUGH-IN	ROOF-IN-PROGRESS			
MECHANICAL ROUGH-IN	ELECTRICAL ROUGH-IN			
FRAMING	EARLY POWER RELEASE			
FINAL PLUMBING	FINAL ELECTRICAL			
FINAL MECHANICAL	FINAL GAS			
FINAL ROOF	BUILDING FINAL			

ACORD CERTIFICATE OF LIABI					1/5/05
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Jensen Beach, FL 3495	58	\		AFFORDING COVER	
BUREO		INSURER A:	`		
Baldane Electric, Inc. 2133 SE Bryson Ave. Port St. Lucie, FL 34952		INSURER C: AUCO-OWNETS INSUFERICE INSURER C:			
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				PERSONAL & ADV INJURY	1,000,00
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RD 25-B (7/97)			Avience s.	ACORD COR	\sim



ВУ

Continents of Insurance

This confidents is traused as a matter of information only and conters no rights upon you the confidents historials to maken the traumation of information or after the coverage afforded by the policies lated below.

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"if the certificate expiration date: Is continuous or extended term, you will be notified if coverage is briminated or reduced before the certificate expiration date. However, you will not be notified ennually of the continuation of coverage.

Notice of Cercellation: Should any of the potcies described havein be cancelled before the expiration date thereof, the insurer efforting coverage will endestor to mail 50 days written notice to the certificate holder named herein, but failure to mail such notice the impressing coverage, its agents or representatives.

Michael C. Weles Spread USA Inc.	
had Chlin	Mi

beusel elaCl

9001-380-90

BUDUH

6999-644(998)

RECEIVED

4005.6.2004

Certificate Hotes Homes Inc S03 SE Central Plany
Stuart, FL 34884

FROM : HALDANE ELECTRIC

FAX NO. : 561-336-3754

Jan. 06 2005 11:03AM P1

01-05-2005 13:31 SHAROLYN HALDANE 7723353060 PAGE1 1/31-00008298 ACCOUNT ST. LUCIE COUNTY OCCUPATIONAL LICENSE SEP 30, 2005 EXPIRES 2004-2005 BOB DAVIS, CPA, OGFO, OFC, ST. LUCIE COUNTY TAX COLLECTOR EMPLOYEES . 21+ ACILITIES SEATS ROOMS MACHINES RENEWAL NEW LICENSE 1731 ELECTRICAL CONTRACTOR TYPE OF TRANSFER 3USINESS ORIGINAL TAX 25.0 2130 SW Hayworth Avenue City of Ft St Lucie BUSINESS LOCATION CO 2806 Thomas W Haldane
Haldane Electric Inc
Haldane Thomas W
2130 SW Hayworth Avenue
2130 SW Lucie FL 34953 AMOUNT PENALTY COLLECTION COST NAME MAILING 25.0 TOTAL ADDRESS

Please see back for additional information 808 DAVIS, TAX COLLECTOR PAID
HACH1021 8/9/04 1:10PM 00001723
2004 1731-00008298
0600 \$25.00

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-	40	CORD CERTI	FICATE OF LIAB	ILITY II	NSURAN	ICE		08/2004
		R (772)287-2030	FAX (772)288-2481	THIS CERT	IFICATE IS ISSUE	D AS A MATTER OF INI	FORM	ATION
Dea	aki	ns-Carroll Insurance	Agency	HOLDER, T	ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR			
ww	w . c	leakinscarroll.com		ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
		Box 1597 alerno, FL 34992			INSURERS	AFFORDING COVERAG	E	
		Florida's Finest Con	nstruction. Inc.	INSURER A:	Mid-Continen	t Casualty Co.		
		2900 SE Waaler Stree		INSURER B:				
		Stuart, FL 34997		INSURER C:				
		•		INSURER D:				•
		1		INSURER E:				
COV	/ER	AGES						
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AC	ORD 25-S (7/97) FAX: 220-4765 ©ACORD CORPORATION 1988							

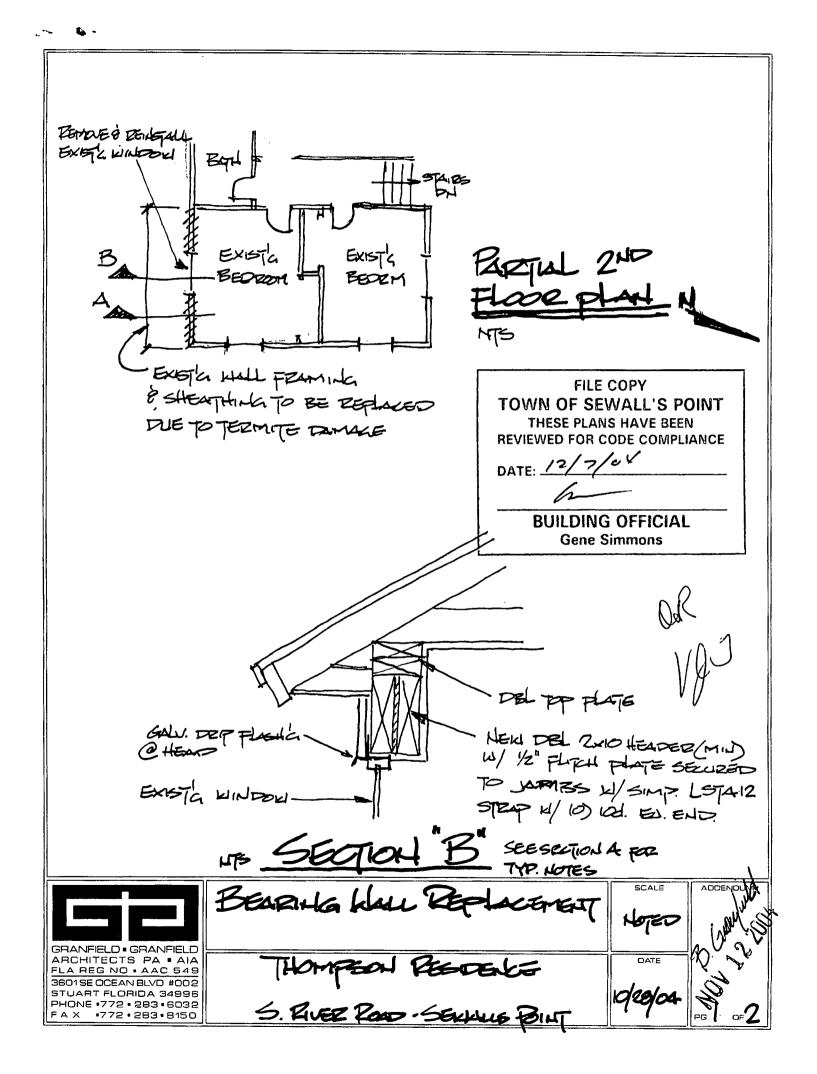
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13 (i P.O.	O Utica Street Box 855	y of the Americas		CONFERS NO RI	GHTS UPON THE CEF	IATTER OF INFORMATION ITIFICATE HOLDER. THIS C E COVERAGE AFFORDED B	ERTIFICATE (
Orisl Tel:	kany, New Yoi (315) 768 – 2	rk 13424 726 Fax: (315) 73	36 - 8731	INSURERS AFE	ORDING COVERAGE	~	NAK
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Emp	oloyee Leasin	g Solutions, Inc.		INSURER A: IIIs	arance Company or	tile Alkalicate	PITT
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		inest Constructio		INSURER D:		<u> </u>	***
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l . l	ANY PROPRIETOR/PA	ITY ARTNER/EXECUTIVE				E.L. EACH ACCIDENT	\$ 1,000,C
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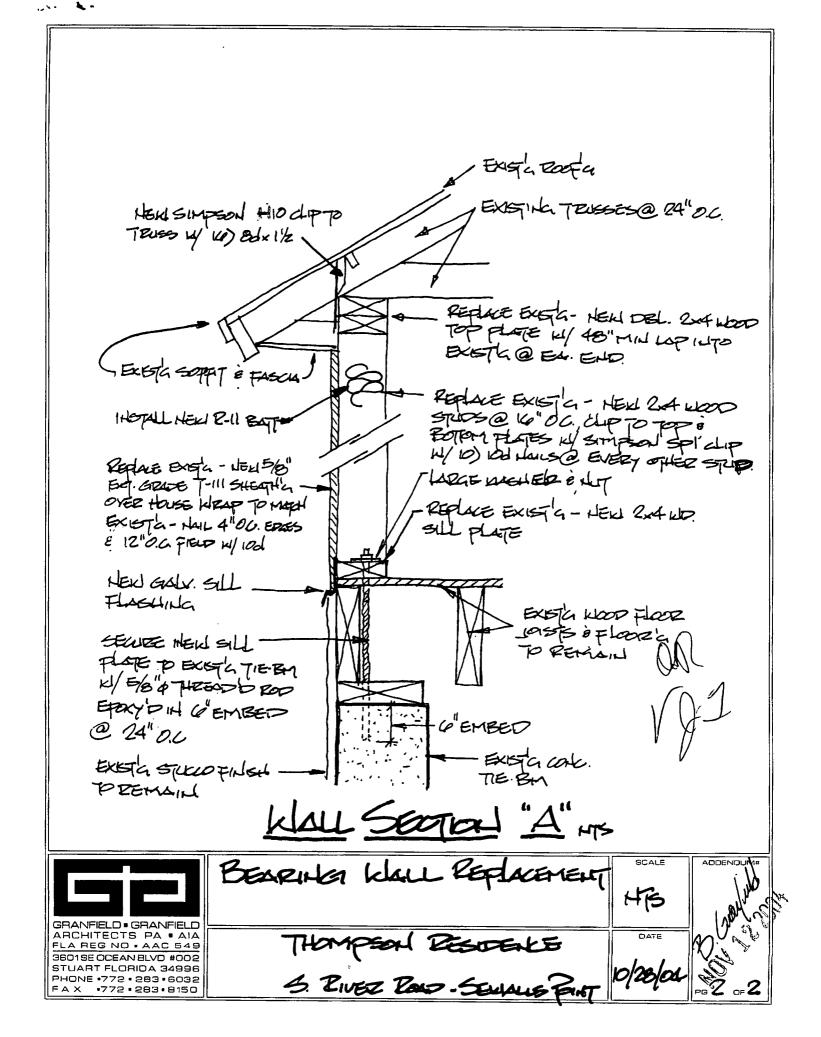
PERMIT#

TAX FOLIO # _133841007000000313

NOTICE OF COMMENCEMENT

STATE OF	FLORIDA	COUNTY OF	MARTIN
AND IN ACC	SIGNED HEREBY GIVES NOTICE THAT CORDANCE WITH CHAPTER 713, FLORI E OF COMMENCEMENT.	T IMPROVEMENT WILL BE MA DA STATUTES, THE FOLLOWI	DE TO CERTAIN REAL PROPERTY, NG INFORMATION IS PROVIDED IN
LEGAL DES	SCRIPTION OF PROPERTY (INCLUDE	STREET ADDRESS, IF AVAILA	ABLE):
179 SOUTH	RIVER ROAD, STUART, FL 34996	WHITE FENCE ACRES ADD	LOT 3-A
GENERAL I	DESCRIPTION OF IMPROVEMENT:	REPAIR TERMITE DAMAG	GE
OWNER:	JANE THOMPSON		
ADDRESS:	179 SOUTH RIVER ROAD, STUART,	FL 34996	
PHONE #:	(772) 283-1823	FAX #:	
	OR:Florida's Finest Construction		
ADDRESS:	3163 SE Lionel Terrace Stua	art, FL 34997	
PHONE #:	(772) 288-1715	FAX #:(77:	2) 288-2126
ADDRESS:			
PHONE #:		FAX#: OR B	R # 1793825 K 01957 PG 0792
BOND AMO	UNT:	TECORD	ED 11/19/2004 01:13:42 PM EWING
LENDER:			OF MARTIN COUNTY FLORIDA ED BY J Greisen
ADDRESS:			
PHONE #:			
PERSONS V DOCUMENT NAME:	WITHIN THE STATE OF FLORIDA DESCRIPTION OF STATE OF SERVED AS PROVIDED BY SERVED BY	DESIGNATED BY OWNER UP SECTION 713.13(1)(A)707 FLORIC MARTIN COUNTY	OA STATUTES:
ADDRESS:		THIS IS TO CERTIF FOREGOING	PAGES IS A TRUE
PHONE #:		FAX #: MARSHA EWII	121 844 121
IN ADDITIO	N TO HIMSELF, OWNER DESIGNATES	BY	119 04 D.C. COUNTY
OF PROVIDED I PHINE #:	IN SECTION 713.13(1)(B), FLORIDA STA	TO RECEIVE A COPY TUTES. FAX #:	OF THE LIENOR'S NOTICE AS
EXPIRATION THE EXPIR SPECIFIED	N DATE OF NOTICE OF COMMENCEME ATION DATE IS ON (I) YEAR FROM ABOVE.	NT: 1 THE DATE OF RECORDING	UNLESS A DIFFERENT DATE IS
Y	June Thompson		
SIGNATURE	OF OWNER	11	. /
SWORN TO	AND SUBSCRIBED BEFORE ME THIS	DAY OF	Moraber
20 <u>~</u> 4 BY	1. Tamithompson	WHO IS PERSO	NALLY KNOWN TO ME OR
PRODUCED		DENTIFICATION.	
NOTARY PU	mM aff	ANN M. WALTZIN MY COMMISSION # D EXPIRES: December Bonded Thru Notary Public I	D 077698





January 16, 2005

To: Corey Knoeck Branch Manager Orkin Pest Control 3231 S. Federal Hwy. Fort Pierce, Fl. 34982

Dear Mr. Knoeck,

Regarding your letter of January 3, 2005

Due to the two hurricanes, we have been unable to start work on our termite damage. Florida Finest it supposed to start the work toward the end of January, or first of February. They gave us a "ballpark" figure of the cost being \$11,000 - \$14,000, but this depends on not finding any more damage. They plan to remove the outside sheeting to determine if the termites damaged extend further than we have uncovered so far. Under normal circumstances your letter would have been timely, however as you know it has been frustratingly slow to be able to find a contractor available.

The building department of the town of Sewalls Point requires a licensed contractor. I am sending them a copy of this letter, and also a copy to my attorney, Richard H. Levenstein.

I found the appraisal that you sent from Trinity Claim Service astonishingly low!

Sincerely,

V. Jane Thompson

Your Client

179 S. River Rd.

Sewalls Point, Fl. 34996

Jane Thompson

Building Department - Inspection Log

Date of I	aspection: Mon Wed	Fri 4/20, 2002 5 Pa		Page of
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
17195	THOMESON	ESE NOUS	MASS	
	1795. RVER	AMMINITO		WI /
	FLORIDA'S FINEST			INSPECTOR:
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TOWN OF SEWALL'S POINT Building Department - Inspection Log

•	Date of Ir	spection: Mon Wed	VFH 4RA	_, 2009 0	Page of
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
Į	736	EWOOD	FILLFINAL	PASS	OLOSE 1
ľ	Ó	15 MIDDLE RD			
	6	ALPHA ZETA			INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	7485	ENGLE	Dey-IN	FAIL	
	1	14 Paim ROAD			#421
	4	PHOENIX OMETA			INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	7262	-HBASSOC-SABOURIN	EEC WALL Part	WHIS	
	01	3760 SE OCEAN	FRAMING	PHSS	
	4	KIRCHMAN	MECHANICAL	PASS	INSPECTOR
	PERMIT.	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	PEE		TREE	PASS	1
	Q	126 S. Savaris			
	\bigcirc				INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1	7195	MILEMA CECAULANA	FRANKING	MES	
`		1795, RIVER			
	6	FLORIDASTINEST			INSPECTOR
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	7352	MESSARD	FENCE FINAL	145	CLOSE
	7	11 OAKHILLWAY			
	20	STUARTFENCE			INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS: /
	7446	MACCALLEM	FINAL GARAGE	VASS	CLOSE
	10	3 QUALL RUNLA	1 Col		
	17	BLOGEN GARAGE	通过多的 的		INSPECTOR:
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Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4, 2002. Page of						
PERMIT	OWNER/ADDRESS/CONTR.	1		NOTES/COMMENTS:		
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	FORWAS FINES?			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
7335	VAN'T BOSCH	INSULATION	PASS			
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0	FLORIDES FINEST			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
6749	NAVOIN	FORMBOARD	VASS			
•	19 A. RIDGEVIEW			$\cap M/$		
: / _. .	OB			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
7126	Hemmers	DRY-IN	FAIL			
α	4 Palmetto De			N		
	OB			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
7453	SAUL	FINALFENCE	PASS	CLOSE		
1	107 S. RIVERRO					
4	OB			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
7348	McCARAY	FINAL ROOF	VA55	Ologe,		
Z	3 KINGSTONG					
\mathcal{O}	STUDET POOFING			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
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	34w High Point			other moschiers		
. 1	Masterprece BIJCS			INSPECTOR:		
OTHER:	- Dulled melat	ELIME.	₹2	a MILLED Istan		
	5 KIVERUVIEN	FEMLE	10	(OK)		
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TOWN OF SEWALL'S POINT Building Department - Inspection Log

Date of I	spection: Mon Wed	Fri _) // (0)	, 2000	Page of		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
6753	RADER	Pumbina	2000年度 日本10年度			
	5 HERITAGE WAY					
	A+P CONSTRUCT.	AC		INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
11		FRAMINA				
*						
				INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS.	NOTES/COMMENTS: ///		
7256	Schedobe	POOLFINAL	VAL	CLOSE		
11	4 Emperta					
	OLYMPIC POOLS			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
Tess	PADER	Tess	PASS			
12	5 HERITDAEWY			M		
				INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
6965	FENSIGNER	Ported Est	FAIL			
0	715. Sams 1	a Rumbert				
	QB			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS: /		
7195	THOMPSON -	FINAL GO	PADS	Curse		
	1795. RUEE RO	WALLPERAL		ΛΛ/		
2	FLORIDAS TINEST			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
7387	Ber	DRYIN	VHS			
10	345. SENAUS /	TIH METAL				
10	STUART ROOFING			INSPECTOR		
OTHER: SMITH NEED SWALE						
9	7 SIMARA -	9 DEIDETO	FHIL			
1	SUNRISE	Delutuay				
		(GENE)				

Building Department - Inspection Log

Date of Ir	spection: Mon Wed	Krd 7/9	_, 200/3	Pageof
PERMIT.	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6279	THOMPSON	FINAL-DECK	troop	0100
	179 S. RIVERRO			8
	PERPOPOLOUS			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6283	MCCAFFREY	ROOF-FINAL	Parsod	010
(3)	4 MICHAEL ROAD			\bigcap
	JTAYLOR ROOFING			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6287	MCCAFFREY	REPAIR+STUCCO	Pariod	Closo
(6)	4 MICHAGE ROAD	FINAL		
				INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6127	CLARK	HURRICANE	Lesson	C(016
(2)	33 FIEDWAY	Shutter, (add	ition ou	(A)
	PARQUE			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	notes/eomments:
6127	CLARK	FINAL	Possad	
(3)	33 FIEDWAY			
	PARONE			INSPECTOR:
PERMIT.	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6306	PHINNEY	FINAL	Parlow	
(4)	30 FIELDWAY	DRIVEWAY		
	CHITWOOD			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6232	Moder	FOOTING-	tailed	Seo 1020 Rockx
(7)	50ARHILLWAY	STEM WALL		" Laring en
	AR MARTIN HOMO	> Retaining W	all	INSPECTOR:
OTHER:			News Inc.	
(8)	9 S. River : Zit	e compliant	رام ر ه	been been
(g)	26 Island Rd.			
				

8410 HURRICANE SHUTTERS

MASTER	PERMIT	NO	
		110	

Date	BUILDING PERMIT NO. 8 4-1 ()
Building to be erected for thompson	Type of Permit Hurricane Panel
Applied for by 21st Century Screen	2 (Contractor) Building Fee (2()-
Subdivision White Tences 3A	Block Radon Fee
Address 1795 Ruei Rd	Impact Fee
Type of structureSFR	A/C Fee
	Electrical Fee
Parcel Control Number:	
133841-007-000-00	Plumbing Fee
Amount Paid \$120 Check # 13705 Cash	OSISOOD Rooting Fee work who beautile Other Fees plant) 120
Total Construction Cost \$ 1212	IOITION TOTAL Fees
	TOTAL Fees
Signed // =	
Signed Signed Signed	
Applicant	Town Building Official
DEDI	ALT
PERN	/II L
BUILDING BLECTRICAL	☐ MECHANICAL
☐ BUILDING ☐ ELECTRICAL ☐ PLUMBING ☐ ROOFING ☐ DOCK/BOAT LIFT ☐ DEMOLITION ☐ SCREEN ENCLOSURE ☐ TEMPORARY ST	☐ MECHANICAL ☐ POOL/SPA/DECK ☐ FENCE ☐ GAS
BUILDING BLECTRICAL ROOFING DOCK/BOAT LIFT DEMOLITION	☐ MECHANICAL ☐ POOL/SPA/DECK ☐ FENCE ☐ GAS
☐ BUILDING ☐ ELECTRICAL ☐ PLUMBING ☐ ROOFING ☐ DOCK/BOAT LIFT ☐ DEMOLITION ☐ SCREEN ENCLOSURE ☐ TEMPORARY ST ☐ FILL ☐ HURRICANE SH	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION
☐ BUILDING ☐ ELECTRICAL ☐ PLUMBING ☐ ROOFING ☐ DOCK/BOAT LIFT ☐ DEMOLITION ☐ SCREEN ENCLOSURE ☐ TEMPORARY ST ☐ FILL ☐ HURRICANE SH ☐ TREE REMOVAL ☐ STEMWALL	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION
BUILDING ELECTRICAL ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY ST HURRICANE SH STEMWALL INSPECT	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION
BUILDING ELECTRICAL ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY ST HURRICANE SH STEMWALL INSPECT	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION TONS UNDERGROUND GAS UNDERGROUND GAS
BUILDING BUILDING ROOFING ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY STORY FILL STEMWALL UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB	MECHANICAL POOL/SPA/DECK FENCE GAS UTTERS RENOVATION ADDITION UNDERGROUND GAS UNDERGROUND ELECTRICAL
BUILDING ELECTRICAL ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY ST HURRICANE SH STEMWALL STEMW	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION TONS UNDERGROUND GAS UNDERGROUND ELECTRICAL FOOTING TIE BEAM/COLUMNS WALL SHEATHING WALL SHEATHING
BUILDING ELECTRICAL ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY ST HURRICANE SH STEMWALL STEMW	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION TONS UNDERGROUND GAS UNDERGROUND ELECTRICAL FOOTING TIE BEAM/COLUMNS WALL SHEATHING LATH
BUILDING ELECTRICAL ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY ST HURRICANE SH STEMWALL STEMW	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION UNDERGROUND GAS UNDERGROUND ELECTRICAL FOOTING TIE BEAM/COLUMNS WALL SHEATHING LATH ROOF-IN-PROGRESS POOL/SPA/DECK POOL/
BUILDING ELECTRICAL ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY ST HURRICANE SH STEMWALL STEMW	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION TONS UNDERGROUND GAS UNDERGROUND ELECTRICAL FOOTING TIE BEAM/COLUMNS WALL SHEATHING LATH ROOF-IN-PROGRESS ELECTRICAL ROUGH-IN ENCOUNT ELECTRICAL ROUGH-IN ELECTRICAL ELECTRICAL ROUGH-IN ELECTRICAL ELECTRICAL ROUGH-IN ELECTRICAL ROUG
BUILDING ELECTRICAL ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY ST HURRICANE SH STEMWALL STEMW	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION IONS UNDERGROUND GAS UNDERGROUND ELECTRICAL FOOTING TIE BEAM/COLUMNS WALL SHEATHING LATH ROOF-IN-PROGRESS ELECTRICAL ROUGH-IN GAS ROUGH-IN G
BUILDING ELECTRICAL ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY ST HURRICANE SH STEMWALL STEMW	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION TONS UNDERGROUND GAS UNDERGROUND ELECTRICAL FOOTING TIE BEAM/COLUMNS WALL SHEATHING LATH ROOF-IN-PROGRESS ELECTRICAL ROUGH-IN ENCOUNT ELECTRICAL ROUGH-IN ELECTRICAL ELECTRICAL ROUGH-IN ELECTRICAL ELECTRICAL ROUGH-IN ELECTRICAL ROUG
BUILDING ROOFING ROOFING DEMOLITION DEMOLITION TEMPORARY STEMWALL	MECHANICAL POOL/SPA/DECK FENCE GAS UTTERS RENOVATION ADDITION TONS UNDERGROUND GAS UNDERGROUND ELECTRICAL FOOTING TIE BEAM/COLUMNS WALL SHEATHING LATH ROOF-IN-PROGRESS ELECTRICAL ROUGH-IN GAS ROUGH-IN GAS ROUGH-IN EARLY POWER RELEASE ELECTRICAL EARLY POWER RELEASE
BUILDING BUILDING ROOFING ROOFING DOCK/BOAT LIFT DEMOLITION TEMPORARY STEMPORARY STEMWALL UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB ROOF SHEATHING TRUSS ENG/WINDOW/DOOR BUCKS ROOF TIN TAG/METAL PLUMBING ROUGH-IN MECHANICAL ROUGH-IN FRAMING FINAL PLUMBING	MECHANICAL POOL/SPA/DECK FENCE GAS RENOVATION ADDITION

of Countilly Date 4
of Sewall's Point Permit Number:
2600 Phone (Day) 7772-283-1827Fax)
ad civSewall3Pt state Fl 70034996
CTC5: Parcel Number: 13-38-41-007-000-00031-3
04
City: State: Zip:
COST AND VALUES:
Estimated Cost of Construction or Improvements: \$ 7,212. CO (Notice of Commencement needed over \$2500) Estimated Fair Market Value prior to improvement: \$
Is improvement cost 50% or more of Fair Market Value? YES NO
Method of Determining Fair Market Value:
105, Inc. Phone: 561721-1800 Fax 561-296-7171
-7 city. W.P.B state: FL zip.33411
on Number: CGC \5088\5 Martin County License Number.
the same of the sa
State:License Number
State: License Number:
State: License Number:
. State: License Number.
Lic.#:Phone Number:
#Phone Number:Zip:Zip:
Garage:Covered Patios:Screened Porch: d Deck:Accessory Building:
restrictions applicable to this properly that may be found in the public records of this county. I entities such as water management districts, state agencies, or federal agencies.
Florith Building Gods (Structural, Massicular), Florida Accossibility Gods 2003 Plorida Accossibility Gods 2003 Plorida Accossibility Gods 2003
ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY CODES, LAWS AND ORDINANCES, DURING THE BUILDING PROCESS.
CONTRACTOR SIGNATURE (required)
On State of Florida, County of: Polon Reach
On State of Florida, County of: / Falm Keach. This the 29th day of Sept. 2003
LVVO III
by Wes Freger who is personal of
known to me or produced
known to me or produced
known to me or produced As identification
known to me or produced Notary Public

Ì	CERTIFICATE OF LIABILITY INSURANCE						
		ILITINOURANCE	10/2/2006				
PRODUCE	R TGI Insurance Agencies, Inc. 1544-E Matthews Mint Hill Rd Matthews, NC 28105 Tel (704) 846-1400 Fax (704) 846-0200	THIS CERTIFICATE IS ISSUED FOR INFORMATION NO RIGHTS UPON THE CERTIFICATE HOLDER. T NOT AMEND, EXTEND OR ALTER THE COVERAGE POLICIES BELOW.	HIS CERTIFICATE DOES				
Insured	TWENTY FIRST CENTURY SCREENS 2731 VISTA PARKWAY SUITE 7-D WEST PALM BEACH FLORIDA 33441	INSURERS AFFORDING COVE INSURER A: SCOTTSDALE INSURANCE INSURER B: INSURER C. INSURER U: INSURER U: INSURER U:	RAGE				

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.

NSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	CENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCUR	CLS1240615	03/11/2006	03/11/2007	EACH OCCURRENCE FIRE DAMAGE (Any one Fire MED EXP (Any one person) PERSONAL ADV INJURY	\$ 1,000,000.00 \$ 50,000.00 \$ 5,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER				GENERAL AGGREGATE PRODUCTS - COMPJOP AGG	\$ 2,000,000,00 \$ 1,000,000.00
	AUTOMOBILE LABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS				COMBINED SINGLE LIMIT (Ea auxident) BODILY INJURY (Por person)	s s
	MIRED AUTOS NON OWNED AUTOS				BODILY INJURY (Per accident) PROPERT DAMAGE (Per accident)	\$
	GARAGE LIABILITY ANY AUTO				<u> </u>	
	EXCESS LIABILITY OCCUR CLAIMS MADE OFFICE RETENTION				EACH OCCURRENCE AGGREGATE	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$
	WORK-RS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- OTH- TORY LIMITS : ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLY E.L. DISEASE - POLICY LIMI	\$ \$
	OTHER				ALL STORMS - FOLIA ERR	

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

METAL ERECTION NON STRUCTURAL

SEWALLS POINT TOWN HALL IS LISTED AS ADDITIONAL INSURED

CERTIFICATE HOLDER	CANCELLATION
SEWALL'S POINT TOWN HALL SEWALL'S POINT TOWN HALL SOUTH SEWALL'S POINT ROAD SEWALL'S POINT, FL 34996 772-220-4765	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMEO TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE LOCALIA (11/10020

ACORD CERTIFICATE OF LIABIL	ITY INSU	RANCE	OPID YD 21STCEN	DATE (MM/DD/YYYY) 09/29/06		
PRODUCER Newman Insurance Agency, Inc.	ONLY AND (CONFERS NO RI HIS CERTIFICATE	D AS A MATTER OF IN GHTS UPON THE CER' E DOES NOT AMEND, E FORDED BY THE POLIC	FORMATION TIFICATE EXTEND OR		
5700 Stirling Road Hollywood FL 33021-	ALTERTHE	COVERAGE AFF	ORDED BY THE POLIC	JES BELOW.		
Phone: 954-963-9626 INSURED		FORDING COVE		NAIC #		
	INSURER B:					
21st Century Screens Inc SUITE #D-7	INSURER C:					
2731 VISTA PARKWAY	INSURER D:					
WEST PALM BEACH FL 33411	INSURER E:					
COVERAGES	<u> </u>					
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAM ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WE MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SU	/ITH RESPECT TO WHICH BJECT TO ALL THE TERM:	THIS CERTIFICATE M S. EXCLUSIONS AND (IAY BE ISSUED OR CONDITIONS OF SUCH			
INSR ADD'U LTR INSRD TYPE OF INSURANCE POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	DATE (MM/DD/YY)	LIM	ITS		
GENERAL LIABILITY			EACH OCCURRENCE	S		
COMMERCIAL GENERAL LIABILITY			PREMISES (Ea occurence)	\$		
CLAIMS MADE OCCUR			MED EXP (Any one person)	s		
			PERSONAL & ADV INJURY	\$		
			GENERAL AGGREGATE	\$		
GEN'L AGGREGATE LIMIT APPLIES PER POLICY PROT LOC			PRODUCTS - COMP/OP AGO	S S		
AUTOMOBILE LIABILITY ANY AUTO			COMBINED SINGLE LIMIT (Ea accident)	\$		
ALL OWNED AUTOS SCHEDULED AUTOS			BODILY INJURY (Per person)	\$		
HIRED AUTOS NON-OWNED AUTOS			BODILY INJURY (Per accident)	\$		
			PROPERTY DAMAGE (Per accident)	\$		
GARAGE LIABILITY			AUTO ONLY - EA ACCIDENT	\$		
ANY AUTO			OTHER THAN EA ACC	; s s s		
EXCESS/UMBRELLA LIABILITY			EACH OCCURRENCE	\$		
OCCUR CLAIMS MADE			AGGREGATE	s		
				\$		
DEDUCTIBLE				\$		
RETENTION \$				\$		
WORKERS COMPENSATION AND			X WC STATU- OTH			
A ANY DECORPT TORRATTIES (EVECUTIVE WC0855769	01/17/06	01/17/07	E.L. EACH ACCIDENT	\$ 100000		
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?		-	E.L. DISEASE - EA EMPLOYE	E \$ 100000		
If yes, describe under SPECIAL PROVISIONS below			E.L. DISEASE - POLICY LIMIT	r \$ 500000		
OTHER						
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDOR	SEMENT / SPECIAL PROV	/isions				
CERTIFICATE HOLDER	CANCELLATION	ON				
Sewall's Point Town Hall One South Sewall's Point Road Sewall's Point FL 34996	SHOULD ANY OF DATE THEREOF, NOTICE TO THE	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR				
DEWALL S TOLKE LE SASSO	AUTHORIZED REF	PRESENTATIVE News		CORPORATION 1000		

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION CONSTRUCTION INDUSTRY LICENSING BOARD SEQ#L06071201046

LICENSE NBR **BATCH NUMBER** DATE

07/12/2006 050846095 The GENERAL CONTRACTOR

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

CGC1508815

FRASER, HERBERT WESLEY
21ST CENTURY SCREENS INC
2731 VISTA PARKWAY D7 WEST PALM BEACH FL 33411

JEB BUSH GOVERNOR

DISPLAY AS REQUIRED BY LAW

SIMONE MARSTILLER SECRETARY

2006-26492

STATE OF FLORIDA

PALM BEACH COUNTY

OCCUPATIONAL LICENSE EXPIRES: SEPTEMBER - 30 - 2007

21ST CENTURY SCREENS INC FRASER WES

** LOCATED AT

CNTY

\$99.00

CLASSIFICATION

0C-032

2731 VISTA PARKWAY #D7 WEST PALM BEACH FL 33437

TOTAL

\$99.00

is hereby licensed at above address for the period beginning on the first day of October and ending on the thirtieth day of September to engage in the business, profession or occupation of:

GENERAL CONTRACTOR

THIS IS NOT A BILL - DO NOT PAY

PAID. PBC TAX COLLECTOR \$99.00 OCC 049 003389 08-03-2006

Peter H. Carney TAX COLLECTOR, PALM BEACH COUNTY THIS LICENSE VALID ONLY WHEN RECEIPTED BY TAX COLLECTOR

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00							
PERMIT #							
NOTICE OF COMMENCEMENT							
STATE OF Florida COUNTY OF Martin							
THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT.							
LEGAL DESCRIPTION OF PROPERTY(INCLUDE STREET ADDRESS IF AVAILABLE): STUART FL 34996							
GENERAL DESCRIPTION OF IMPROVEMENT: Install Fabric Hurricane Protection 17pg							
owner: Ms. Jane Thompson ADDRESS: 179 South Kiver Band PHONE #: 772-203-1823 FAX #:							
INTEREST IN PROPERTY: OWNER							
NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER(IF OTHER THAN OWNER):							
CONTRACTOR: Wes Fraser of 21st Century Screens Inc. CGC 1508815 ADDRESS: 2731 Visto Parkway Slute Ditter 1 33+11 PHONE #: 561-721-1800 SURETY COMPANY(IF ANY) ADDRESS: PHONE # BOND AMOUNT: LENDER/MORTGAGE COMPANY ADDRESS: PHONE #: PHONE #: FOREGOING PAGES IS A TRUE ANEXEMBECT COPY OF THE ORIGINAL BY D.C. D.C. DATE 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:							
NAME: ADDRESS: PHONE #: FAX #:							
IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES 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 OF OWNER							
SWORN TO AND SUBSCRIBED BEFORE ME THIS 2nd DAY OF October 2006 PERSONALLY KNOWN COR PRODUCED ID							

NOTARY SIGNATURE data/bid/bidg_forms/Current.forms/nbc.aw NOTARY PUBLIC-STATE OF FLORIDA

Ray Arnett

Commission # DD432587

Expires: MAY 22, 2009

Bonded Thru Atlanda Bonding Co., Inc.

02/06/03

SHUTTER SCHEDULE

	A DDOX	4.DD0);	4.5502	" o ==		T		,	
<u></u>	APPOX	APPOX	APPOX	#OF	4410116=	#OF	HEADER		
1.D.			SHUTTER	STORM	ANCHOR			REMARKS	
NO	SIZE(WXH) 37"X63"	WIDTH 45"	HEIGHT 71"	BARS REQ'D	SPACING 12"	EACH SIDE	YES/NO	EVALOUE.	
┝				N/A		N/A	NO	EXAMPLE	
	49 x 69	55	75	1	12"		NO		
2		55	75		عمد ا		NO	2 T 2 2 C	١٥
3	MX 100	85	145		12"		NO	3 Tracksia	
4			75				7	O== -14-9	1-
5		82 28	144					3Tracks	æ
10	22×62		68						
7	59×64	33	JQ						
8		22	10						1144
9		93	83					Door which	eligns
	54×46	(2)	52			\			
11		56	48						`
12		109	87					3Tracks)	de
13		45	(0)						
14	39×55	45	(0)						
15	21×45	al_	51						
16	21 × 45	7000	5]		W_	\	<u> </u>		
17	44×51	50	57	NA	12	NA	NO		
18						1			
19									
20									
21			,						
22									
23									
24				-					
25									
26								_	
27									
28									
29									
30									1

WINDOW SCHEDULE

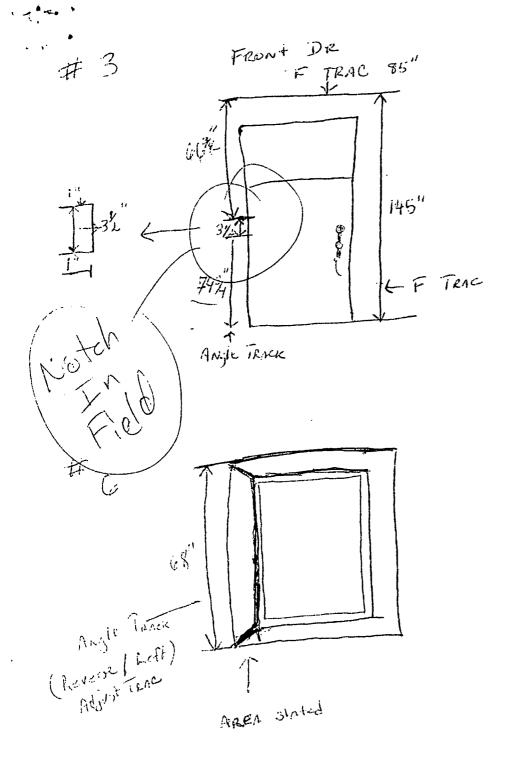
I.D.	APPOX		*	IMPACT	PROTECTION	:
NO	OPENING	DESIGNATION,	TYPE	IMPACT	SHUTTER	REMARKS
	SIZE (WXH)	ų.		GLASS		
	37"X63"	25	811		X	EXAMPLE
1	40 × 60	# I Dane			1	Upotains window
2	49x 69	215				Unstairs window
3	79×138	3/				Door w/window above
4	103× 69	# /				Double window 1941!
5	76×138	5				Slider Door 1st.
6	22× 62	(0)				WINDOW 1Stfloor
7	59×64					Double-window 1st FL
8	27×164	8				WINDOW IST FI
9	87× 77	9				Door Wiside lights
$\overline{}$	54×46	10 1				WINDOW 19 Floor
11	50 × 42					window abover SLD
12	103×81	12/				Slider Door
13	39×55	13				Window 1st Floor
14	39×55	14				window 1st Floor
15	21×45	15				window and Floor
16	21×45	161				window and Floor
17	44×51	17 V			X	window and Floor
18		•			•	
19						
20						
21						
22						
23						
24						
25						
26						
27						
28					7	
29						
30	* TVDE WIND		<u> </u>		<u>.</u>	

* TYPE WINDOWS:
SH -SINGLE HUNG
TH -DOUBLE HUNG
AWN -AWNING:
CAS -CASIMENT
SI, -SLIDING
ITK -FRED



Ms' Jane Thompson	DIY? Y						Page 之 of	_	
CUSTOMER 1	OWO OF EACT	CNICOO	15.00	PLAN		DATE	N TUE 01050 05 ~		
ATTACH TO PAGE 1 DRAWING. SPAN IS THE DISTANCE BETWEEN THE RI IF TRACKS ARE TOP AND BOTTOM ADD ONE GROMMET ON UNPROTECTE	ED NON-SPAN	SIDES E	BETW	EEN 36	E: PLAC 5" AND 7	2" LONG AND	TWO GROMMETS	HE OPENING. OVER 72" LON	IG.
CONCRETE & BLOCK:ADD 5" TO EACH SIDE IF POSSIBLE; WOOD FRAME A	NDD 1" TO EAC		SIDE		O NON-S	SPAN SIDES I TOP	F POSSIBLE.		
STRUCTURE? Concrete Frame			SIDE?	GRO	MMETS	GROMMETS	SPAN	NON-SPAN	- \
CIRCLE STORM CATCHER COLOR: BLK WHT BRN			y or	Left #	Right #	#	Max 228" Max 108"	No Max Max 144"	(sc)
MARK BRAND OPENING DESCRIPTIONS			. N	_			whole inches	whole inches	
OF EMING DESCRIPTIONS			.	2	2		75	even #'s	
1 FS @ Upatairs Window			N	3	3		1-12-1		
2 FS (SC) Upstairs window	- T		IN	3	3		15	55	
3 FS (SC) Don't with window above.	_3Trac	K5_	ijΥ	ļ Ļ	ЕĄG	RAM	85	145	
4 FS (SC) Double WINDOW			N	13	12		1/5	109	
5 FS GS SLD=Slider Door 3T			ļΣ				144	82	
6 FS SC WINDOW			<u>Y</u>	<u>a</u>	2		28	68	
7 FS (SC) Double Window			M	<u> </u>		2	67	<u> 70 </u>	
8 FS (SC) WINDOW			N	<u>i </u>			33_	70	
9 FS @ Door with side lights (canels)		N.	l		3	93	83	
10 FS SO WINDOW			17	 		2	60	52	
11 FS SC WINDOW			У				56	48	
12 FS SO SLD 3Tracks			У	!			109	87	
13 FS GC WINDOW			N	2	コ		61	45	
14 FS GC WINDOW			N	Q	ð	-	61	45	
15 FS (SC) WINDOW			M	ã	ă		5	27	
16 FS (SC) WINDOW			1/1	17	j	- ·	31	व्रैन	
	_		N	号	5		57	50	
			<u> / N</u>	-	-		71	30	
18 FS SC			┼	 					
19 FS SC			-	 	<u> </u>		 	· · · · ·	
20 FS SC			⊢	 			<u> </u>		
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34 FS SC									
35 FS SC				1			i i	···	
NOTES:	••		•	1	CIRCI	F Track C	olor: WHITE	BROWN	
10120.				_		ngle F-tra		<i>/ D</i>	•
						Reverse F-	_		
O#		 		\dashv			_		
Office Use:	 					ates Requir		n ea.	
· · · · · · · · · · · · · · · · · · ·	ft E) Total			٠.			•		
B) Angle F-track (if needed)	ft F) Total	# Maso	n Bits	s (B+C	+D / 75	+1) =			
C) Reverse Angle F-track (if needed)	ft G) Total	# Bolt/	Wing	nut Co	ombo (B	I+C+D)x1.05) =		
D) Total F-track (A x 2.30) minus (B+C) =	ft H) Total	# Pane	el Ma	tes (if	needed)	M ea.F	ea.	
1 each (all orders) = wingnut driver / 1/4" drill bit / silicone spray	/ panel layout	map P	LUS	1 elec	tric scre	wdriver on o	ders over 150 S.F	6/9/2008	

, INST	ALLER-PL	ANNER	'S HURF	RICANE S	SHUTTE	R PLAN	I & MEASU	RE FORM 0	<u>1/18/06</u>
Ms.	lane Tr	OMPS ISTOMER	<u>on</u>	 	DIY?	<u>Y (N)</u>	King	5/12/06 DATE	Page 1 of Q_{-}
	11 (ilider 1000 Window	(w)	9 Door Wiside panels	8 w		Double (W)	5 Slider Door	
	13 W	15 W		IPQIJ	FAIDS				
		14 M	^ ₩	ζίνχ	rairs cod Fran	ne Stru	octure)		
	14M	IM	2W_	pown	STAIRS				
	START			FRI	ont Ont Dwindow		4 Double Windor	í	
IF POSSIBLE IF TRACKS A AND TWO GF IF POSSIBLE	: PLACE TRAC RE TOP AND I ROMMETS OV ON CONCRE	CKS ON TH BOTTOM A ER 72" LOI TE & BLOC	IE SIDES C ADD ONE C NG. CK ADD 3" '	OF THE OPE GROMMET C TO EACH SI RUCTURE? NO	:NING. ON UNPRO IDE & WOO	TECTED N	NON-SPAN SIDE	AN SIDES & 6" 1	NERS. 6" AND 72" LONG FO NON-SPAN SIE
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<u> 31= :</u>	3 sides	track	ζ				. \\		
* Addi-	tion wa	s add	led on	other	home	1005	bult, Co	oncrete s	structure.
on da	metairs	s an	d wo	ill ha	ume c	<u>لا ۱۲۲</u>	portali S	. All tra	ichs
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DECEMBER OF PROPERTY OF THE

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• FLORIDA COMMUNITIES

WEINTONEVER

TRUST

. SUILDING CODES

FRONT PORCH FLORIDA DELITERY

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· NEWS

BCIS Home | Log In | Hot Topics | Submit Surcharge | Stats & Facts | Publications | FBC Staff | B



FILE COPY TOWN OF SEWALES CROSSITION Product Approval Menu THESE PLANS HAVE BEEN

Application List > Application Detail

Application Type FOR CODE COMPLIANCEL6288

Code Version

2004

Application Status

Approved

Archived

Product Manufacturer

Storm Catcher

Address/Phone/Email

6213 Idlewild Street ft. myers, FL 33912 (888) 962-7283

Brian@Stormcatcher.net

. FREQUENTLY ASKED QUESTIONS . ABOUT OUR SECRETARY

Authorized Signature

Brian Rist

Brian@Stormcatcher.net

. E-MAIL THE SECRETARY

• WEB ASSISTANCE

. CONTACT US

• OUR LOGO

· DCA EMPLOYEE SERVICES

. INSPECTOR GENERAL

Technical Representative

Brian Rist

Address/Phone/Email

11850 Plantation Rd Ft. Myers, FL 33912

brian@stormsmart.com

Quality Assurance Representative

Address/Phone/Email

Brian Rist

6182 Idlewild Street Fort Myers, FL 33912 (239) 278-9092 ext 300

Brian@stormsmart.com

Category

Shutters

Subcategory

Products Introduced as a Result of Nev

Compliance Method

Evaluation Report from a Florida Regis Licensed Florida Professional Engineer

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😾 Evaluation Report - Hardcopy Rece

Florida Engineer or Architect Name who developed the Evaluation Report

Richard W. Arnold

Florida License

PE-19334

Quality Assurance Entity

National Accreditation and Managemei

Validated By

John Henry Kampmann Jr.

Certificate of Independence

FL6288_R0_COI_CERTIFICATE.pdf

Referenced Standard and Year (of

Standard)

Standard

ASTM 1886 ASTM 1996 ASTM E330

Equivalence of Product Standards

Certified By

Sections from the Code

 Date Submitted
 03/24/2006

 Date Validated
 03/27/2006

 Date Pending FBC Approval
 03/13/2006

 Date Approved
 03/28/2006

Summary of Products						
FL#	Model, Number or Name	Description				
6288.1	Storm Catcher	Wind Abatement Shutter				
Approved for Impact Res	or use in HVHZ: No or use outside HVHZ: Yes	Installation Instruction FL6288 R0 II Drawings Verified By: Fenestration Evaluation Reports FL6288 R0 AE 4633 Ac Information.pdf FL6288 R0 AE 4749 Ac Information.pdf FL6288 R0 AE 4750 Ac Information.pdf FL6288 R0 AE Final Events				

STOP WORK ORDER

DATE: 9/27/
ADDRESS: 179 S. RIVED
OWNER/CONTRACTOR is hereby notified to STOP WORK immediately upon reading this notice.
The work described below requires a permit:
Continued work from the date of this notice will
constitute additional fines and prosecution through the Sewall's Point Code Enforcement Board and/or the State Licensing Board.
BUILDING OFFICIAL OR INSPECTOR

DO NOT REMOVE THIS NOTICE UNTIL PERMIT IS OBTAINED!

Building Department - Inspection Log Date of Inspection: Mon Wed Fri 9-20 , 2006 Page INSPECTION TYPE RESULTS NOTES/COMMENTS: OWNER/ADDRESS/CONTR. PERMIT hee means Kantana INSPECTOR: OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS: PERMIT INSPECTOR: eugett NOTES/COMMENTS: OWNER/ADDRESS/CONTR. RESULTS INSPECTION TYPE PERMIT timps on danton unsafe? sebal (INSPECTOR: 286-5900 INSPECTION TYPE RESULTS NOTES/COMMENTS: OWNER/ADDRESS/CONTR. PERMIT INSPECTOR: OWNER/ADDRESS/CONTR. NOTES/COMMENTS INSPECTION TYPE RESULTS tie beamy raneo Nest concrete stain INSPECTOR: RESULTS NOTES/COMMENTS: INSPECTION TYPE OWNER/ADDRESS/CONTR. PERMIT INSPECTOR: NOTES/COMMENTS OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS PERMIT 179 3. MUEN AD INSPECTOR: OTHER:

Building Department - Inspection Log

Date of In	spection: Mon Wed	XFH Id-	_, 2006	Page of
PERMIT	•	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1794	Wilkinson	tin-tag	1455	
7	8 Oakwood DR	<u> </u>		
5	Home Depot		l	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	 	NOTES/COMMENTS:
	Demorast	FINAL CANO	EL	DUPLICATION
	925 RUER			
4	Schiller		1	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
846	Masterpière	Temptower	PASS	NOTTEN FRE.
0	5 Mandalay			FOR METALLYSTALS
2	Doward Elec			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8410	Trempson	Final-shutte	PHGG	(1050)
-7	179 Skiver			
. /	2185 Centery			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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	615 averlo			
6	Jerrellgas			INSPECTOR:
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	3 DELAND	PERMIT		
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PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE		TREE	PASS	
	19 RIVERVIEW			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
				INSPECTOR:
OTHER:				
			····	

FENCE

MASTER PERMIT	NO
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Date 10-20-00	BUILDING PERMIT NO. 8418
Building to be erected for Kompal	Type of Permit Fence wygate
Applied for by Stuart Tence	(Contractor) Building Fee
Subdivision White Tences Lot 3	Block Radon Fee
Address 1795 Review Rd	Impact Fee
\bigcirc =0	A/C Fee
	Electrical Fee
Parcel Control Number:	Plumbing Fee
13-38-41-007-000-0	0031-3000 Roofing Fee
- 12 10 Chook # 72 10	CashOther Fees (Lence) 30
Amount Paid Colleck # /At	TOTAL Fees 30
Total Construction Cost \$ 1570	TOTALTEES
in India	a \nD. Odamor
Signed Signed Applicant	Signed Sorrow Soulding Official
Applicant	Town Building Official
	:
	PERMIT
☐ PLUMBING ☐ ROO! ☐ DOCK/BOAT L FT ☐ DEM! ☐ SCREEN ENCLOSURE ☐ TEM! ☐ FILL ☐ HUR	TRICAL FING OLITION PORARY STRUCTURE RICANE SHUTTERS MECHANICAL POOLISPA/DECK FENCE/GATE GAS RENOVATION ADDITION
11	NSPECTIONS
UNDERGROUND PLL MBING	UNDERGROUND GAS
UNDERGROUND MELHANICAL	UNDERGROUND ELECTRICAL
STEMWALL FOOTING	TIE BEAM/COLUMNS
SLAB	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 BUILDING FINAL
FINAL ROOF	ם וועווען ווויים

5/0

	f Sewall's Point PERMIT APPLICATION Permit Number:
OWNER/TITIEHOLDER NAME V. JANE Thor	Phone (Day)(Fax)
179 C P. 118 DR	
JOD Site Address: 179 S. BIVER D. R.	
Legal Desc. Property (Subd/LovBlock) While I ENLE 111	CRES ADDN Parcel Number: 13-38-41-007-00-00031
Owner Address (if different):	Cinu
Description of Work To Be Done:	16H ALUMINUM FEACE & gates
WILL OWNER BE THE CONTRACTOR?:	COST AND VALUE
YES NO	COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 1570, (Notice of Commencement needed over \$2500)
(If no, fill out the Contractor & Subcontractor sections below)	Estimated Fair Market Value prior to improvement: \$
(If yes, Owner Builder Affidavit must accompany application)	Is improvement cost 50% or more of Fair Market Value? YES NO Method of Determining Fair Market Value:
CONTRACTOR/Company: STUART FENCE	
Street: 80 Box 2636	City: STURRT State: FL Zip: 34995
State Registration Number: State Certification	Number:Martin County License Number:
SUBCONTRACTOR INFORMATION:	Martin County License Number: 272 3789
Electrical: Mechanical:	· · · · · · · · · · · · · · · · · · ·
Mechanical: Plumbing:	State: License Number:
Roofing:	State:License Number:
######################################	State: Liennes Number
ARCHITECTStreet:	_LIC.#:Phone Number:
	Cikin
	City:State:Zip:
ENGINEER Lic#	
ENGINEERLic#	Phone Number:
Street:	Phone Number:
Street: AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living:	Phone Number: City: State: Sarage: Covered Paties: Sarage:
Street: AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: Carport: Total Under Roof Wood	Phone Number: City:State:Zip:
Street: AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: Carport: Total Under Roof Wood i understand that a separate permit from the Town may be required BOILERS, HEATERS, TANKS DOCKS SEA WALLS ACCESSORY BUILDING	Phone Number: City: State: Zip: Garage: Covered Patios: Screened Porch: Accessory Building: d for ELECTRICAL, PLUMBING, MECHANICAL, SIGNS, POOLS, WELLS, FURNACE.
Street: AREA SQUARE FOOTAGE – SEWER – ELECTRIC Living: Carport: I understand that a separate permit from the Town may be required BOILERS, HEATERS, TANKS DOCKS, SEA WALLS, ACCESSORY BUILDING CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: National Electrical Code: 2002	Phone Number: City: State: Zip: Garage: Covered Patios: Screened Porch: Accessory Building: d for ELECTRICAL, PLUMBING, MECHANICAL, SIGNS, POOLS, WELLS, FURNACE, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL AND RELOCATIONS. Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2001
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	AC	Aug. 12. 2006E 3:51AMIC	CATE OF LIABII	LITY INS	URANC	E No. 0298]/]roomm) 98/09/2006
PRODUCER (772)334-3181 FAX (772)334-7742			THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION					
Rick Carroll Insurance Agency			ONLYAND	CONFERS NO	RIGHTS UPON THE CE TE DOES NOT AMEND	RTI	FICATE	
		N.E. Dixie Highway		ALTER TH	E COVERAGE A	FFORDED BY THE PO	LICI	ES BELOW.
P.O. Box 877 Jensen Beach, FL 34958-0877				INSURERS AFFORDING COVERAGE			NAIC#	
IM3		Stuart Fence Company In PO Box 2636	С.		INSURER A: Hanover Insurance Co.			
		Stuart, FL 34995		INSURER B:				
		Jeau, C, FL 34333		INSURER C:				
				INSURER D:		 	4	
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NSI LTA	ADD'L NSRC	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE	POLICY EXPIRATION DATE (MINIDDAYY)	LIMIT	13	
	1	GENERAL LIABILITY	LHJ8398159-00	08/08/2006	08/08/2007	EACH OCCURRENCE	3	1,000,000
	1	X COMMERCIAL GENERAL LIABILITY			·	PREMISES (FA 000/080CB)	8	100,000
	1	CLAIMS MADE X OCCUR				MED EXP (Any one person)	3	5,000
A						PERSONAL & ADV INJURY	8	1,000,000
		<u> </u>				GENERAL AGGREGATE	3	2,000,000
	1	GEN'L AGGREGATE LIMIT APPLIES PER;				PRODUCTS - COMP/OP AGG	3	2,000,000
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		MIRED AUTOS NON-OWNED AUTOS				BODILY INJURY (Per accident)	s	1
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		MI Ar Agenaviani I Agamana Indirat	10 / EVAL (4)0NA ABBOD EV SWEAT		PIANE			
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		THI:	S CERTIFICATE IS FOR P	ROOF OF INSU	JRANCE ONLY			
								Ī
`E)TIE	CATE MOLDED		CANCELLAT	ION .			
CERTIFICATE HOLDER			SHOULD ANY		RIBED POLICIES SE CANCELLE	DAP	ORE THE	
			i	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES SE CANCELLED SEFORE THE				
				l	EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT.			
Town of Sewalls Point			1 —	BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY				
			l l					
		l S. Sewalls Point Road Sewalls Point, FL 34996			OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE			
· 1			Kaith Campall /010					

ACORD 25 (2001/08) FAX: (772)220-4765

A	COR	D ™ CERTIFICAT	E OF LIAB	ILITY INS	SURANCE		2/24/2006
Producer: Lion Insurance Company 2739 U.S. Highway 19 N. Holiday, FL 34691 Phone: 727-938-5562 Fax: 727-837-2138			upon the Cer	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.			
		Phone: /2/-938-5562 Fax: /2/-93/-2/38	•		Insurers Affording Cove	rage	NAIC #
Insured: South East Personnel Leasing, Inc.			Insurer A:	Lion Insurance Company		11075	
		739 U.S. Highway 19 N.		Insurer B:			
	H	łoliday, FL 34691		Insurer C:	Insurer C:		
	F	Phone : (727)938-5562		Insurer D:			
<u> </u>				Insurer E:			
The pol	ificate may	S ance listed below have been issued to the insured name be issued or may pertain, the insurance afforded by the p					
INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits	
		GENERAL LIABILITY		,		Each Occurrence	\$
		Commercial General Liability Claims Made Occur				Damage to rented premises (EA occurrence)	\$
			l I			Med Exp	ş
		<u> </u>	!			Personal Adv Injury	\$
ĺ		General aggregate limit applies per:] [1	General Aggregate	s
		Policy Project LOC	! [Products - Comp/Op Agg	\$
┪		AUTOMOBILE LIABILITY	1			Combined Single Limit	
			l I			(EA Accident)	s
		Any Auto All Owned Autos	l I		l .	Bodily Injury	
Į		Scheduled Autos	1			(Per Person)	\$
		Hired Autos]			Bodily Injury	
		Non-Owned Autos]			(Per Accident)	\$
						Property Damage (Per Accident)	\$
		GARAGE LIABILITY				Auto Only - Ea Accident	\$
		Any Auro	! !			Other Than EA Acc.	5
			1 1			Autos Only: AGG.	\$
		EXCESS/UMBRELLA LIABILITY				Each Occurrence	
		Occur Claims Made	1			Aggregate	
		Deductible				Aggregate	
		Retention					
Α		s Compensation and	WC 71949	01/01/2006	01/01/2007	X WC Statu- tory Limits ER	
		rietor/partner/executive officer/member			İ	E.L. Each Accident	\$1000000
	excluded					E.L. Disease - Ea Employee	\$1000000
	11 183,0	escribe under special provisions below.				E.L. Disease - Policy Limits	\$1000000
	Othe	3465485					
	;	Stuart Fence Company, Inc.	COVERAGE AP	PLIES ONLY TO TH	HOSE EMPLOYEES LEA	ASED, NOT TO SUBCONTR	ACTORS.
С	OVERAG	Operations/Locations/Vehicles/Exclusions added to E APPLIES ONLY IN THE STATE OF FLORII 1772-220-4765 / ISSUE: 10-21-04 (PDC) / RE	DA TO THOSE EMPLO ISSUE 8-23-05 (JLH)	DYEES LEASED TO B /REISSUE 1-18-06 (JI	BUT NOT SUBCONTRACTO LH) REISSUE 2-24-08 (SH)		nc. * FAX: 772-
CE	TIFICATE	Lion Insurance Compa	iny is A.M. Be:	CANCELLATION	ren 4- (Excelleu)	LJ. AMD # 12010	
VE		TOWN OF SEWALLS POINT		Should any of the above endeavor to mail 30 da		pefore the expiration date thereof, the iss older named to the left, but (ailure to do so s or representatives.	
		1 S. SEWALLS POINT RD.					
	:	SEWALLS POINT F	L 34996	1	John A	· Some	

Lion Insurance Company

ACORD 25 (1001/08)

ACORD CORPORATION 1988



MARTIN COUNTY, FLORIDA
Construction industry Licensing Board
Certificate of Competency

PENCE EREC'TION

License Number CFE3584 Expires: 30-SEP-08
RICHMOND, CHESTER J III
STUART FENCE & WIRE
3307 RAILROAD AVE
STUART, FL 34997

2006-2007 MARTIN COUNTY ORIGINAL COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P J. Box 9013, Sluart, FL 34995 (772) 288 :604

CHARACTER COUNTS IS MARTIN CORNEL

PREV. YR. \$. 00	D FOE \$	27.00
\$.00	P VALTY 3	The region
\$.00	C L. FEE \$	
8	.00	D ANGFER \$	- Contract
	TOTAL	15.00	
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S PERCEY LICENSED TO ENGINES IN THE PARTY TO PROPERTY OF THE P

AT LOCATION LISTED FOR THE PERSON REGINER - ON THE

1.6 OAY OF AUGUST 06

UCENS 004-518-0(U3 CERT CFE 3584
PHONE (772) 283-1151 BIC NO 235990

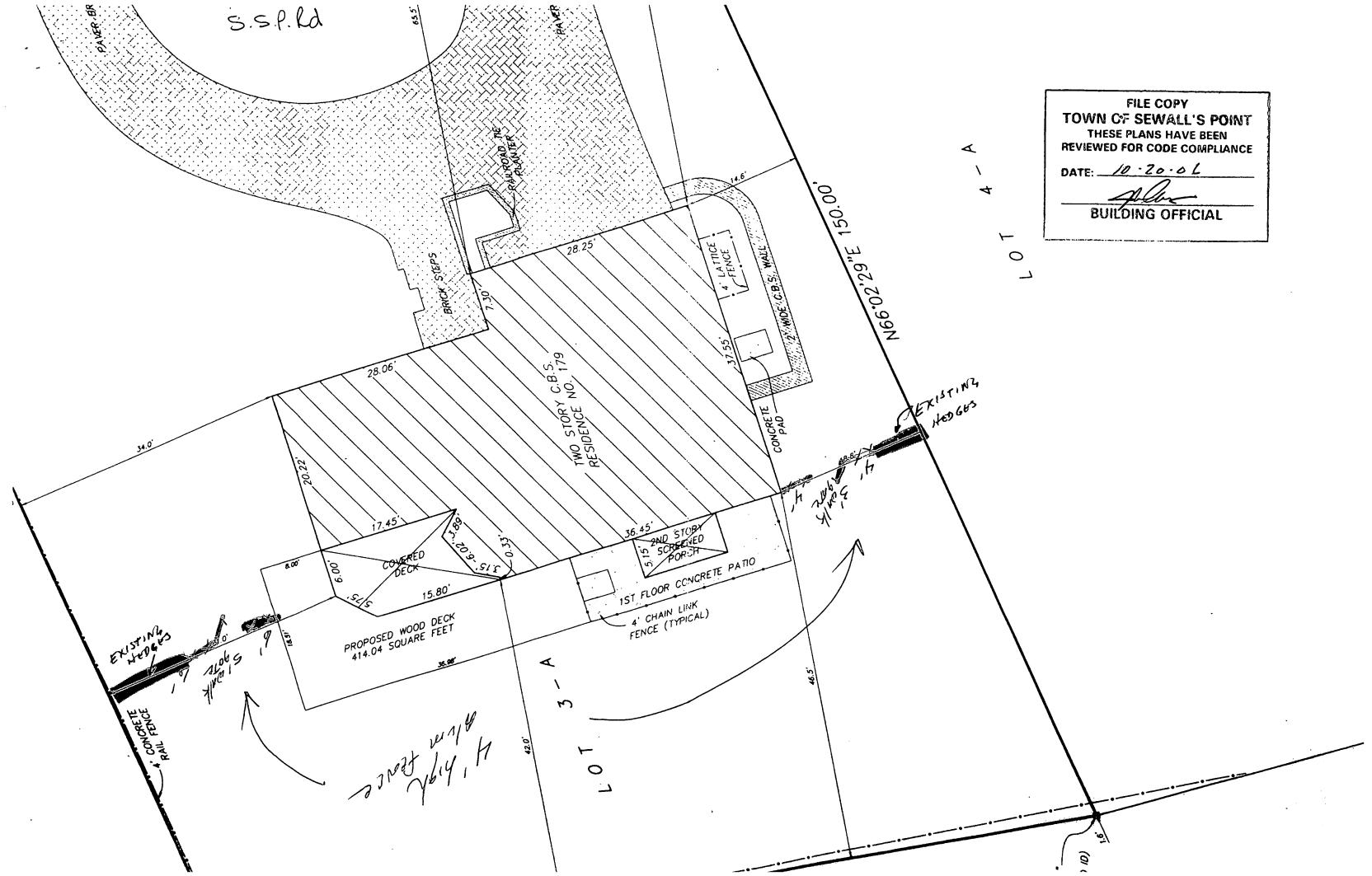
OCATION:

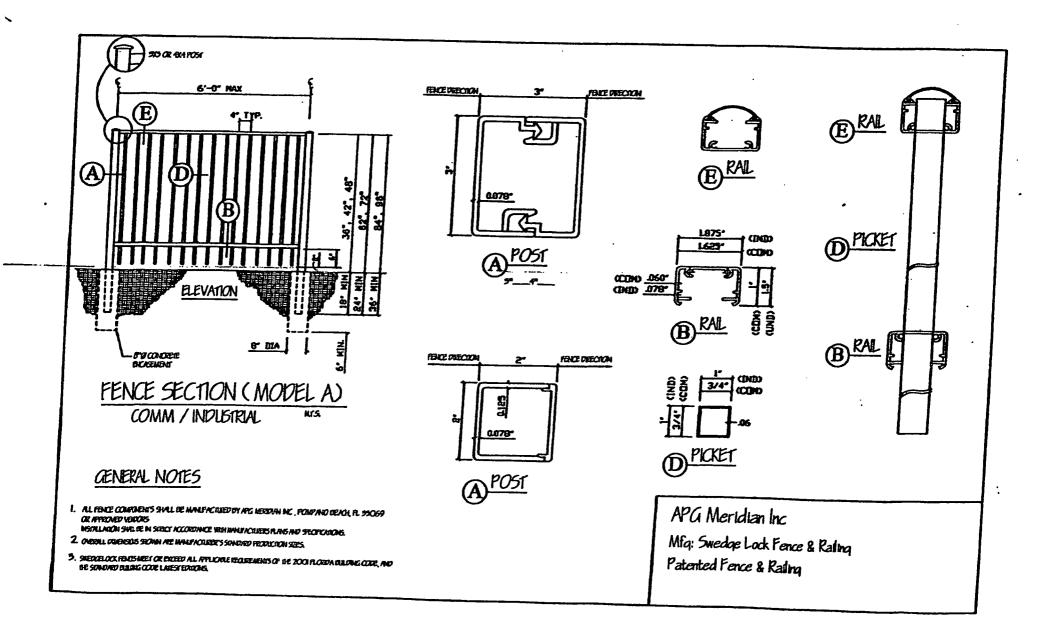
3307 SE RAILROAD AVE STU

RECEIPT of PAYMENT LARRY C. O'STEEN 99 08/16/2006 NORMA 20040005180000 002 2006 0011582 STUART FENCE COMPAN

CHESTER - QUALIFIER

SEGART PL 34995





TOWN OF SEWALL'S POINT

Building Department - Inspection Log

ate of In	spection: Mon Wed	X 11-9	_, 2006	Page	of
		INSPECTION TYPE	RESULTS	NOTES/COM	MENTS:
5389	Heilriegel	Final	DASS	C-6	.08E
/	12 folm Ct				
/	Worell			INSPECTOR	: OM/
ERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/CO	MMENTS:
012/		FINAL	PAGE	Co	OSE
2	20 N. RIVER			INSPECTOR	. M/
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/CO	
0/02		ROOF FINAL	FAIL		
1	25 N. RWER				
4			7 H. L.	IÑSPECTOI	XXIII
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/CO	MMENTS:
8415		NINDON/SHURDES	FAIL		
3	20 N. PWEN	POIR.			
			-	INSPECTO	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS		MMENTS:
0418		FENCE FINAL	1415		LOSE/
	179,5 RIVER				
				INSPECTO	1 1 //
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/CO	OMMENTS:
					
				INSPECTO	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/C	OMMENTS:
<u> </u>					
				INSPECTO	DR:
OTHER					

8974 GARAGE DOOR



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

BUILDING PERMIT CARD

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

			101 20110111		ON ALL I LIMIT	
PERMIT NUMBE	R: 8	8974		DATE ISSUED:	AUGUST 7, 2008	
SCOPE OF WORK: GARAGE DO			OOR	<u> </u>		
CONDITIONS:					.	
CONTRACTOR:	ſ	TREASURE (COAST GARAGE	DOOR		
PARCEL CONTR	OL N	UMBER:	1338410070000	000313	SUBDIVISION	WHITE FENCE ACRES-3
CONSTRUCTION	ADD	RESS:	179 S RIVER RD			
OWNER NAME:	ТНО	MPSON	<u> </u>			9.00
QUALIFIER:	MAR	K WAGNER		CONTACT PHO	NE NUMBER:	879-0487
DEPARTMENT PRI NOTICE: IN ADDITIONAL PERM ADDITIONAL PERM DISTRICTS, STATE A	OR TO ON TO IS PRO ITS RE GENO EQUIR	O THE FIRS O THE REQU OPERTY THA EQUIRED FR CIES, OR FED RED FOR INS	ST REQUESTED JIREMENTS OF THE AT MAY BE FOUNT COM OTHER GOVE DERAL AGENCIES SPECTIONS - ALL	INSPECTION. HIS PERMIT, THERE D IN PUBLIC RECOR ERNMENTAL ENTIT CONSTRUCTION D	MAY BE ADDITION DS OF THIS COUNT TIES SUCH AS WATE	Y, AND THERE MAY BE
				RED INSPECTIONS	•	
UNDERGROUND PLUME UNDERGROUND MECHA STEM-WALL FOOTING SLAB ROOF SHEATHING TIE DOWN /TRUSS ENG WINDOW/DOOR BUCKS ROOF DRY-IN/METAL PLUMBING ROUGH-IN MECHANICAL ROUGH-II FRAMING FINAL PLUMBING FINAL MECHANICAL	ANICAL			UNDERGRO UNDERGRO FOOTING TIE BEAM/O WALL SHEA INSULATIO LATH ROOF TILE	OUND GAS DUND ELECTRICAL COLUMNS ATHING IN IN-PROGRESS L ROUGH-IN H-IN	
FINAL ROOF				BUILDING F	FINAL	
ALL DE INCDECTION	LECEC	AND ADDI	TIONAL INCOCCT	NON DECLIECTE MIL	L DE CHARGED TO	THE DEDMIT HOLDED

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.

ſ	MICCIELLY IGID	
. 	1-29-08 Town of Sev	wall's Point //IT APPLICATION Permit Number:
	Date:BUILDING PERM	MIT APPLICATION Permit Number:
	OMNEKTITEHOLDER NAME OF AND I NOW	DON Phone (Day) 283-1863 (Fax)
		City: Sewell S.P.E. State: Fl Zip: 34977
	Legal Desc. Property (Subd/Lot/Block) White Fence Property	Addu Parcel Number: 13-38-41-007-000
	Owner Address (if different):	City: State: Zip:
	Scope of work: Replacement of over l	read Garage Door. 18x?
	YES NO (Notice	AND VALUES: (Required on ALL permit applications) atted Value of Improvements: \$ 2720.00 of Commencement required when over \$2500 prior to first inspection)
ſ	I has a Zoning variance ever been granted on this property? FOR A	ect property located in flood hazard area? VA9A8X DDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
	(Must include a copy of all variance approvals with application) Fair Ma	red Fair Market Value prior to improvement: \$
l	Street: 966 SSB: HMCROST	SP Phone: 879-0487 Fax: 879-0861
	Street: 966 SSB: HMCRO St	City: Port St Wee State: F/ Zip 3498=
	State Registration Number:State Certification Number	
L	PROJECT SUPERINTENDANT:	CONTACT NUMBER:
l	ARCHITECTLic.#	
	Street:	City:State:Zip:
	ENGINEERLic#	Phone Number:
_	Street:	City:State:Zip:
	AREA SQ. FOOTAGE (W /SEWER & ELECTRIC): Living:Gard	age:Covered Patios:Screened Porch:
L	Carport: Total Under RoofWood Deck	Accessory Building:
	CODE EDITIONS IN EFFECT FOR THIS APPLICATION: Florida Building National Electrical Code: 2005 Florida Energy Code: 2004 Florida	Code - Res., Build, Mech., Plmb., Fuel Gas): 2004 (W/2006 Rev.) a Accessibility Code: 2004 Florida Fire Prevention Code 2004
	NOTICES TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFOR THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT IT IS TO YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTION RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, AND THE GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STARD BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAPERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MO	ORE RECORDING YOUR NOTICE OF COMMENCEMENT. RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR DUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF YOUR S APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC HERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER TATE AGENCIES, OR FEDERAL AGENCIES. L IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A INTHS PER TOWN ORDINANCE 50-95.
1	THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZI WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS A WILL BE ASSESSED ON ALL NULL AND VOID PERMITS. REF. FBC 2004 I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON TI KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODE	T ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.15. HIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY
	******A FINAL INSPECTION IS REQUIRE OWNER SIGNATURE (required) HAMI MON N. 1911	DON ALL BUILDING PERMITS***** CONTRACTOR SIGNATURE (required)
-	State of Florida, County of: Martin	On State of Florida, County of: ST Luc:
,	This the day of July ,2008	This the day of
t	known to me or produced FUDULT 512-980 35-754	by MARKINDANER who is personally
		As identification.
	Notary Public 18 38201 E. MINICO MANICE ME	SHAN POOR DERIENZO
N	My Commission Expires: SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN A APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 480 TO A	As identification. SHAN Plot DERIENZO MY COMMISSION # DD553272 MY COMMISSION # DD553272 EXPIRES. May 17, 2010 DAWS OF APPROVAL NOTIFICAL IDENTIFICATION (49BC 10549 M) AREN (49F)
	SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 3 APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 4800	DAMS OF APPROVAL NOTIFICATION (SBC 105/3 M) ARECTTEE
		YS (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 42 of 137

0

Parcel Info Summary

Land

Lallu

Residential Improvement Commercial

Image

Sales & Transfers Assessments →

Taxes →

Exemptions →

Parcel Map →

Full Legal →

Parcel ID Unit Address

13-38-41-007-000-00031-3 179 S RIVER RD SerialIndex ID Order

Commercial Residential

27829Owner

1

Summary

Property Location 179 S RIVER RD Tax District 2200 Sewall's Point

Account # 27829

Land Use 101 0100 Single Family

Neighborhood 120200 Acres 0.362

Legal Description
Property Information

WHITE FENCE ACRES ADDN LOT 3-A

Search By

Parcel ID

Owner

Address
Account #
Use Code

Legal Description

Neighborhood

Sales Map → Owner Information
Owner Information

THOMPSON, GW&VJANE

THOMPSON, G W & V JAME

Assessment Info Front Ft. 0.00

179 S RIVER DR STUART FL 34996-7014

Market Land Value \$308,000 Market Impr Value \$178,960 Market Total Value \$486,960

Mail Information

Site Functions Property Search

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

Recent Sale

Sale Amount \$193,000

Sale Date 6/1/1983 **Book/Page** 0573 2292

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

Legal disclaimer / Privacy Statement

Data updated on 07/23/2008





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road Sewall's Point, Florida 34996 Tel 772-287-2455 Fax 772-2204765

FILE COPY TOWN OF SEWALL'S POINT THESE PLANS HAVE BEEN REVIEWED FOR CODE, COMPLIANCE DATE

TABLE 1609.6D

BUILDING OFFICIAL

ADJUSTMENT FACTOR FOR BUILDING HEIGHT AND ENPOSURE, (a)

MEAN ROOF HEIGHT	EXPOSURE					
(feet)	В	₹C ¶	D			
15	1.00	1.21	1.47			
· <u>20</u>	1.00	1.29	1.55			
25_	1.00	W1185	1.61			
30	1.00	1.40	1.66			
35	1.05	1.45	1.70			
40	1.09	1.49	1.74			
45	1.12	1.53	1.78			
50	1.16	1.56	1.81			
55	1.19	1.59	1.84			
60	1.22	1.62	1.87			

For SI: 1 foot = 304.8nun.

FORMULA FOR DESIGN PRESSURES
Example: 25 ft mean roof height, exposure C
16 X 7 Door 140mph.
Pressure Exposure C multiplier Reg. Design Pressure
29.7 X 1.35 = +40.095
-33.1 X 1.35 = -44.685
Garage Door must be rated at +40.1/-44.68
minimum. This formula must be completed
for exposure C:
Pressure Exposure C multiplier Reg. Design Pressure
X = (+)
X = (-)
(/

TABLE 1609.6E

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

	VE WIND		Basic Wind Speed V (mph - 3 second gust)						
Width (ft)	Height (ft)	85	90	100	110	120	130	100 7	150
Roof Angl	le 0-10 deg	rees		•		l			
8	. 8	10.5 -11.9	11.7 -13.3	14.5 -16.4	17.5 -19.9	20.9 -23.6	24.5 -27.7	28.4 -32.2	32.6 -36.9
10	10	10.1 -11.4	11.4 -12.7	14.0 -15.7	17.0 -19.0	20.2 -22.7	23.7 -26.6	27.5 -30.8	31.6 -35.4
14 -	14	10.0 -10.7	10.8 -12.0	13.3 -14.8	16.1 -17.9	19.2 -21.4	22.5 -25.1	26.1 -29.1	30.0 -33.4
Roof Ang!	e > 10								
ŷ	7	11.4 -12.9	12.8 -14.5	15.8 -17.9	19.1 -21.6	22.8 -25.8	26.7 -30.2	31.0 -35.1	35.6 -40.2
16	7	10.9 -12.2	12.3 -13.7	15.2 -16.9	18.3 -20.4	21.8 -24.3	25.6 -28.5	297233.1	34.1 -38.0

For SI: 1 Square foot = 0.929 Sqm, 1mpg = 0.447 mls, 1psf = 47.88 N/sqm.

- 2. Table values shall be adjusted for height and exposure by multiplying by adjustment coefficients in Table 1606.2D.
- 3. Plus and minus signs signify pressures acting toward and away from the building surfaces.

4. Negative pressures assume door has 2 feet of width in building's end zone.

1609.6.5.1 Garage doors, Pressures from Table 1609.6E. for wind loading actions on garage doors for Buildings designed as enclosed shall be permitted.

(May 35)

^{1.} For effective areas or wind speeds between those given above the load may be interpolated, otherwise use the load associated with the lower

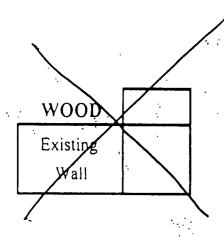
Field Survey	Date: 7-7-08
Customer:	Phone: 772-283-1823
Owner: V5 Thompson	Phone:
Address: 1793, Rover Rol	Fax:
Sewells Paint FT 34996	Cell:

WxH	MFG	Model	Zone	Exp.	Desig	gn P.S.F	Test	P.S.F
185×7	GAGO Hormann	DF P	C	140	182.5	1-59.5	+63.7	5/89.2
X							**.	/
Wall Const	ruction	Vei	rtical Jam	bs		Header		Spring Pad
CMU Wood	/Other	? .	x (o	Marian Series Marian Series		> X ()		NA
Required A	nchors	# 100 2	Z Belo	ow.				

Wood Jamb Attachment To Structure

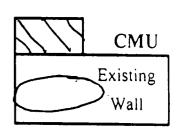
(#1) For attachment of jambs to cast in place concrete, Use 3/8" x 5". Install bolts a maximum of 6" from each end and at 24" on center. Anchors must have a minimum of 2-1/2" embedment into concrete. (#2) For attachment to hollow block, use 1/4" diameter tapcon anchors. Install a pair of anchors a maximum of 6" from each end and a pair at 12" on center. The pair of anchors should be approximately 3" center to center. Anchors must have a minimum of 1-1/4" embedment into hollow block.

(#3) Attach tracks to wood frame with _____ "x____" lags & additional track brackets (as required) to secure thru existing ____ "x ____ " jamb with minimum of 1 1/2" embedment into existing stud wall.



FLOOR PLAN

INTERIOR









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Product Approval

USER: Public User

<u>Product Approval Menu > Product or Application Search > Application List</u>

المراجعة المراجعة		
• CON	MUNITY	PLANNING

▶ HOUSING & COMMUNITY DEVELOPMENT.

PEMERGENCY MANAGEMENT

OFFICE OF THE SECRETARY

Search Criteria			Refine Searc
Code Version	2004	FL#	6556 2 1
Application Type	ALL	Product Manufacturer	Hoermann Inc.
Category	ALL	Subcategory	ALL
Application Status	ALL	Compliance Method	ALL
Product Model, Number or Na	me ALL	Product Description	ALL
Approved for use in HVHZ	ALL	Approved for use outside HVHZ	ALL
Impact Resistant	ALL	Design Pressure	ALL
Other	ALL		

Search Results - Applications								
FL#	Type	Manufacturer	Validated By	Status				
<u>FL6556</u>		Hoermann Inc. Model 20049451 Description: Product is intended for residential use and in the prescribed wind zones. Product is not intendend for high velocity hurricane zones (Dade and Broward counties.) Category: Exterior Doors Subcategory: Sectional Exterior Door Assemblies	William P. Adams (850) 385- 1179	Approved				

DCA Administration

Department of Community Affairs Florida Building Code Online Codes and Standards 2555 Shumard Oak Boulevard Tallahassee, Florida 32399-2100 (850) 487-1824, Suncom 277-1824, Fax (850) 414-8436 © 2000-2005 The State of Florida. All rights reserved. Copyright and Disclaimer **Product Approval Accepts:**













TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of I	spection: Mon Wed	DFH D-24	_, 2008	Page of
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8974	H-function of the	GWAZZAOR	Mis	(alogas)
	179 S Rever	Final	,	01/
	TC Garage			INSPECTOR:
PERMIT	OWNER ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8968	Nelson	wigh plumbin	PASS	
	3 Marquereta	0 1		
222142	Caronkline			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8394	footer	Tinal	FAIR	/
	7 Timor St		-	
	schillentool			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8911	Willis	Final	FAIL	
	3 Worth Ct	·		
DEDIUM	Tricitalnoon			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5989	Hart	Final	PHY	Close
	14 kw Vista			
DDDIG	Stuart Fence			INSPECTOR.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8812	Bean	Tinal	PASS	Close
	1125 Sewalls		· .	
	we convot			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
			· ·	INSPECTOR:
OTHER:				
				
		MAN,		

8985 FRONT DOOR &

GLASS



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	t: 8985		DATE ISSUED:	AUGUST 22, 2008	,
SCOPE OF WORK	: REPLACE F	RONT DOOR & FI	XED GLASS		
CONDITIONS:					
CONTRACTOR:	TRACTOR: DAVE BROWNE'S HOME I		ROVEMENTS		
PARCEL CONTRO	ARCEL CONTROL NUMBER: 1338410		33841007000000313		WHITE FENCE ACRES ADDN – LOT 3A
CONSTRUCTION	ADDRESS:	179 S RIVER RD	,.		
OWNER NAME:	THOMPSON	<u> </u>			
QUALIFIER:	DAVID BROWNE		CONTACT PHO	NE NUMBER:	343-0616
WITH YOUR LENDE CERTIFIED COPY O DEPARTMENT PRIC NOTICE: IN ADDITIO APPLICABLE TO THIS ADDITIONAL PERMIT DISTRICTS, STATE AC	NING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN ING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING IT YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. IT IS THE RECORDED NOTICE OF COMMENCEMENT MUST BE SUBMITTED TO THE IS ARTMENT PRIOR TO THE FIRST REQUESTED INSPECTION. ICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTION ICABLE TO THIS PROPERTY THAT MAY BE FOUND IN PUBLIC RECORDS OF THIS COUNTY, AND THERE TIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT RICTS, STATE AGENCIES, OR FEDERAL AGENCIES. OUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE		MENCEMENT. A ITED TO THE BUILDING VAL RESTRICTIONS Y, AND THERE MAY BE R MANAGEMENT		
		REQUI	RED INSPECTIONS		
UNDERGROUND PLUMBI	ING	KEQUI	UNDERGRO		
UNDERGROUND MECHAI STEM-WALL FOOTING SLAB ROOF SHEATHING TIE DOWN./TRUSS ENG			FOOTING TIE BEAM/O WALL SHEA	THING	
WINDOW/DOOR BUCKS ROOF DRY-IN/METAL PLUMBING ROUGH-IN			LATH ROOF TILE ELECTRICAI	ROOF TILE IN-PROGRESS ELECTRICAL ROUGH-IN	
MECHANICAL ROUGH-IN FRAMING FINAL PLUMBING FINAL MECHANICAL			GAS ROUG METER FIN FINAL ELEC FINAL GAS	AL . TRICAL	
FINAL ROOF ALL RE-INSPECTION		TIONAL INCORCE	BUILDING F		THE DEPART HOLDED

THE CONTRACTOR OR OWNER /BUILDER MUST SCHEDULE A FINAL INSPECTION. FAILURE TO RECEIVE A SUCCESSFUL

Date: $9-1-0$ BUILDING P	of Sewall's Point ERMIT APPLICATION Permit Number:
11 TRAIL TE	
	0M PSON Phone (Day) 283 783 ax)
ob Site Address: 1998, 1CIVE	R R.D City. SEWALLS PIstate: FL zip: 34976
egal Desc. Property (Subd/Lot/Block)	Parcel Number: 133841-007-000-00031
Owner Address (if different):	City:State:Zip:
scope of work: Replace Front Extry	
WILL OWNER BE THE CONTRACTOR? Tyes, Owner Builder questionnaire must accompany application YESNO	CONSTRUCTION VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$
las a Zoning Variance ever been granted on this property?	Is subject property located in flood hazard area? VA9A8X FOR ADDITIONS AND REMODELS IN FLOOD HAZARD AREAS ONLY:
Yes(Year)No Must include a copy of all variance approvals with application)	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***
CONTRACTORICOMPANY Do to Brown How	DE IMPEN Phone: AVI 347-06 Keax: 59 me
Street >34 St. Amas At	City: PSL State: FL Zip: 349.83
	ion Number:Municipal License Number:
PROJECT SUPERINTENDANT:	
	Lic.#:Phone Number:
	City:State:Zip:
	Lic# Phone Number: 561-7468660
Street: 25200 17th Road V	City: Jupiter State: FL Zip:33478
AREA SQ. FOOTAGE: Living: Garage:	Covered Patios: Screened Porch:
Carport: Total Under Roof\	Wood Decks/walkways: Accessory Building:
CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Flori	da Building Code (Structural, Mechanical, Plumbing, Gas): 2004 (W/2006 Rev.)
National Electrical Code: 2005 Florida Energy Code: 2004	Florida Accessibility Code: 2004 Florida Fire Code 2004
NOTICES TO OWNERS AND CONTRACTO	ORS:
PROPERTY. CONSULT WITH YOUR LENDER OR AN ATTORNI 2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED REPROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PEYOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER BY BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL ALL THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 1 WILL BE ASSESSED ON ALL NULL AND VOID PERMITS. REF	MENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OF THE REMIT. IT IS TO YOUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF IS SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN OF SEWALL'S POINT, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95. RK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES
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1



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

13-38-41-007- 179 S RIVER RD

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

Commercial Residential

Summary

Parcel ID

print | | | | | | |

0

Order

27829Address

Parcel Info **Summary**

Land

Residential

Improvement

Commercial

Image

Sales & Transfers Assessments →

Taxes →

Exemptions → Parcel Map →

Full Legal →

Summary

Property Location 179 S RIVER RD

Unit Address

Tax District

2200 Sewall's Point 27829

Account # Land Use

101 0100 Single Family

Neighborhood

120200 0.362

Acres

Legal Description **Property Information**

WHITE FENCE ACRES ADDN LOT 3-A

Search By

Parcel ID

Owner

Address

Account #

Use Code

Legal Description Neighborhood

Sales

Map →

Owner Information **Owner Information**

THOMPSON, G W & V JANE

Mail Information 179 S RIVER DR

STUART FL 34996-7014

Assessment Info

Front Ft. 0.00

Market Land Value \$308,000 Market Impr Value \$178,960

Market Total Value \$486,960

Site Functions **Property Search**

Contact Us On-Line Help County Home Site Home

County Login

Recent Sale

Sale Amount \$193,000

Sale Date 6/1/1983 Book/Page 0573 2292

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

Legal disclaimer / Privacy Statement

Data updated on 07/23/2008



NOTICE OF COMMENCEMENT

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00 000-00031-3 PERMIT #: TAX FOLIO#: STATE OF FLORIDA ... COMPLY OF MARTIN THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT. LEGAL/DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE): White Fence Hobas GENERAL DESCRIPTION OF IMPROVEMENT: PS 011 OWNER NAME: ADDRESS: PHONE NUMBER: FAX NUMBER: 2101297 INSTR INTEREST IN PROPERTY: 02346 PG 0224 **BK** NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER): Ps 0224; (1ps) RECORDED 08/15/2008 02:35:57 PM DAVID BROWNI MARSHA EWING CONTRACTOR: AYEN'S CLERK OF MARTIN COUNTY FLORIDA ADDRESS: PHONE NUMBER: 13 - CO D J BAX NUMBER: MARCORDED BY Y Gorney SURETY COMPANY (IF ANY): ADDRESS: STATE OF PLURIDA PHONE NUMBER: FAX NUMBER: BOND AMOUNT: MARTIN COUNTY THIS IS TO CERTIFY THAT THE LENDER/MORTGAGE COMPANY: ADDRESS: PAGES IS + TRUE PHONE NUMBER: FAX NUMBER: CORRECT CORY OF THE ORIGINAL .EWNG, CLERK PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13 (1) (a) 7., FLORIDA STATUT D.C. NAME: DATE ADDRESS: PHONE NUMBER: FAX NUMBER: IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUES: PHONE NUMBER: FAX NUMBER: EXPIRATION DATE OF NOTICE OF COMMENCEMENT: (EXPIRATION DATE IS ONE (I) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED). WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY, BEFORE COMMENCING FLORE OR RECORDING YOUR NOTICE OF COMMENCEMENT. SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER $\omega \omega \wedge \varepsilon$ SIGNATORY'S TITLE/OFFICE THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF NAME OF PERSON WNOM INSTRUMENT WAS EXECUTED PERSONALLY KNOWN OR PRODUCED IDENTIFICATION TYPE OF IDENTIFICATION PRODUCED NOTARY SIGNATURE/ SEAL UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE ACTS IN IT ARE TRUE TO THE BEST OF MY KNOWZEDGE AND BELIEF (SECTION 92.525, FLORIDA STATUTES). VALERIE MEYER CENTRAL # NOISEMMON # DDSSEILS (Signature of Natural Person Signing Above) EXPIRES: May 14, 2010 (407) 800 O 159 Florida Mnlary Servica oom

NEIL SUBIN Mayor

DON OSTEEN Vice Mayor

MARK KLINGENSMITH Commissioner

PAUL SCHOPPE Commissioner

JACQUI THURLOW-LIPPISCH Commissioner

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT



ROBERT KELLOGG Town Manager

JOHN R. ADAMS Building Official

ERIC CERNIGLIA **Chief of Police**

ANN-MARIE SULLIVAN BASLER Town Clerk

JOSE TORRES, JR. Maintenance

343-0616

CONDITIONS FOR PERMIT APPROVAL

DATE: 08/18/2008 DATE OF PERMIT APPLICATION: 08/15/2008

APPLICATION DESCRIPTION: FRONT ENTRY DOOR AND FIXED GLASS PANELS

APPLICATION ADDRESS: 179 S. SEWALL'S POINT RD. SEWALL' POINT, FL

THE FOLLOWING ITEMS ARE NOTED FOR CORRECTION AND ARE CONDITIONS FOR APPROVAL FOR THE ABOVE REFERENCED PERMIT APPLICATION:

PRODUCT APPROVAL SUBMITTED DOES NOT MATCH SKETCH PROVIDE FLORIDA PRODUCT APPROVAL FOR FIXED GLASS PANELS OR SHE SPECIFIC PROVAL WITH-ALL-REQUIREDINEORMATION TIO INDICATE COMPLIANCE WITH LEBC R

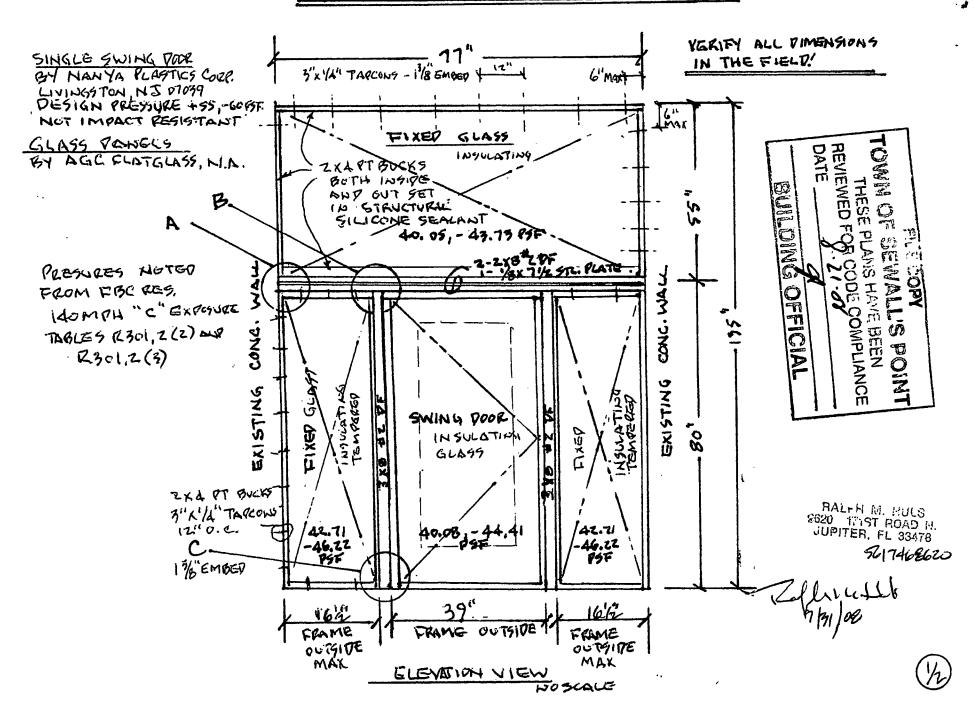
IF YOU NEED FURTHER INFORMATION OR CLARIFICATION IN REGARD TO THESE CONDITIONS, DO STILL MED TON NOT HESITATE TO CONTACT ME.

WITH REGARDS,

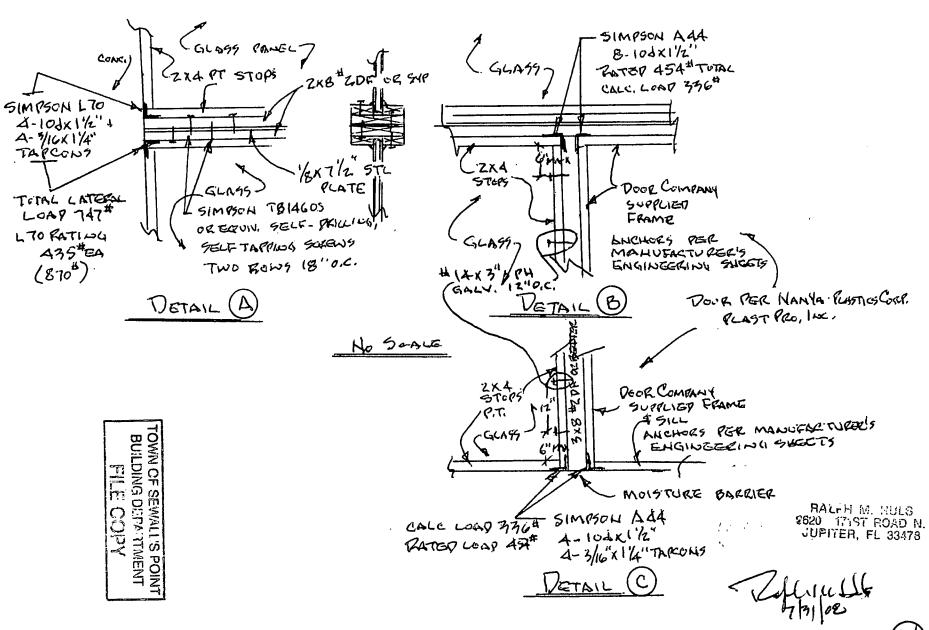
JOHN R. ADAMS **BUILDING OFFICIAL**



NEW GLASS DOOR & FIKED GLASS INSTALLATION FOR THOMPSON RESIDENCE 179 8 RIVER RP, SEWALL'S POINTE, FL.



NEW GLASS DOOR & FIXED GLASS INSTALLATION FOR THOMPSON RESIDENCE 1795. RIVER RD. SEWALL'S POINTE, FL



NOTICE OF PRODUCT CERTIFICATION



CERTIFICATION NO:

N1007035-R1

DATE:

03/26/2007

CERTIFICATION PROGRAM:

Structural

COMPANY:

NgnYa/Plastoro

CODE:

P-409-1

The "Notice of Product Cartification" is valid only when Administrator's Seal is applied to the upper left hand portion of this form and a certification label is applied to the product. This certification seal represents product conformity to the applicable specification and that all certification criteria has been satisfied.

The product described below is approved for listing in the Directory of Certified Products at www.NAMICertification.com. Please review, and advise NAMI immediately if data, as shown, requires corrections.

COMPANY NAME AND ADDRESS	PRODUCT I	DESCRIPTION	
NanYa Plastics Corporation U.S.A	Series "Glazed" Fiberglass Single		
9 Peachtree Hill Road	In-Swing and Out-Swing Door		
Livingston, NJ 07039	w/Lip Lite Screw Frame		
	Config	uration: X	
	Frame: W-3'3"	Panel: W-3'0"	
	H-610"	H-6'9"	

SPECIFICATION	PRODUCT RATING
ASTM E330-02 Glass Complies to ASTM E1300-02	Design Pressure: +55/-60 psf

Product Tested By:

Certified Testing Laboratories

Report No:

CTLA-1594W (Structural)

Expiration Date:

March 31, 2011

Administrator's Signature:

NATIONAL ACCREDITATION AND MANAGEMENT INSTITUTE, INC.

11870 Merchants Walk Suite 202 Newport News, VA 23606

> TEL: (757) 594-8658 FAX: (757) 594-8659

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of I	nspection: Mon Wed	□ Fri 10-27	_, 2008	Page of
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8906	Jones	Final		
	20 Ridgeland	·	M855.	Cross
	Heyno HC			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<u> </u>	The moon of the	Rawaisin lane		
	1795 Kiver ld	Juna centra more		
222112	Dave Brown	U E		INSPECTOR:
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000	Celler	Udgas		and to
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TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Ir	aspection: Mon Wed	11-13	_, 2008	Page of	
		INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	l
RAPE	Menore	ELMA!	VIII S		
7	1795 Ruerld	(door)	Classes		
\supset	Dane browner			INSPECTOR:	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	
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2	3 Worth Ct				
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PERMIT .	Per Kit			INSPECTOR:	
9054	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	
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	7 RIDECAND				
	08			INSPECTOR!	
OTHER:					
		·			

9117 SCREEN ENCLOSURE



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	R:	9117	· · · · · · · · · · · · · · · · · · ·	DATE ISSUED:	MARCH 16, 2009	
SCOPE OF WORK	(:	SCREEN ENCLOSURE ON PORCH				
CONDITIONS:						
CONTRACTOR:		T. MASON CONSTRUCTION				
PARCEL CONTRO	RCEL CONTROL NUMBER:		133841007000-	133841007000-000313 SUBDIVI		WHITE FENCE ACRES ADDN – LOT 3A
CONSTRUCTION	AD	DRESS:	179 S RIVER RD			
OWNER NAME:	тн	OMPSON		,		
QUALIFIER:	TIN	МОТНҮ MASC	N	CONTACT PHO	NE NUMBER:	772-288-6704
WITH YOUR LENDS CERTIFIED COPY C DEPARTMENT PRICES IN ADDITIONAL PERMITS DISTRICTS, STATE AS	ER C OF T OR T ON T IS PR ITS I GEN EQU	OR AN ATTOR THE RECORD TO THE FIRST TO THE REQUIRED FR REQUIRED FR ICIES, OR FEI UIRED FOR INS	RNEY BEFORE I DED NOTICE OF ST REQUESTED STREMENTS OF T ST MAY BE FOUND SOM OTHER GOV DERAL AGENCIES SPECTIONS – ALI	RECORDING YOUR COMMENCEMENT INSPECTION. HIS PERMIT, THERE DIN PUBLIC RECORENMENTAL ENTILS.	MOTICE OF COMINUST BE SUBMITED TO SUBMITED THE SUBMITED THE SUCH AS WATED COLUMENTS MUST	TED TO THE BUILDING VALUE RESTRICTIONS Y, AND THERE MAY BE R MANAGEMENT BE AVAILABLE ON SITE
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		MECE	IVED Tou	n of Sewall	o Doint		
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	OWNER/TITLEHO	DER NAME V	IRCINAL. TR	case and	283-1	823 PT. State: (Fax)	
	Job Site Address:	79 S. R.	VER RO		_ چېهندرح	PT. State: PC	710 3499b
	Legal Desc. Property	(Subd/Lot/Block)	PENCE BCA	ES 3.4	Parcel Number:_	PT. State: FC.	-007
	Owner Address (if diff	(erent):			City:	State:	Zip:
4	Scopo of Works	FRAME	OUT SCREET	EN ENC	1026 FX	a woon for	ome patio
	If yes, Owner Builder		NTRACTOR? t accompany application	Estimated V Notice of Cor	alue of Improvement mencement require	Required on ALL permits 8 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	to first inspection
		ce ever been grai (Year)N	nted on this property?	FOR ADDITION	NS AND REMODE	d hazard area? VA9_ LS IN FLOOD HAZARD A r to improvement:	REAS ONLY:
	(Must include a copy	of all variance appr	rovals with application)	(Fair Market \	/alue of the Primary	Structure only, Minus the I SUBMITTED WITH PERMIT	and value)
	CONTRACTOR/Co	mpany: T. M	ason Cons	truction	Phone: (772)2	88-6704Fax: (772)286-8428
۱,(State: FL	
					•	funicipal License Number:	1 1
	PROJECT SUPERIN	TENDANT: KI	IRK GEIS	mAss.	CONTACT NUMBER	2772260	7449 X
	ARCHITECT			LIC.#.	Pho	ne Number:	
	Street:					State:	
	ENGINEER JOS	EDM P	o म ऽ	Lic#	Phone	e Number:	
1	Street:				City:	State:	Zip:
	AREA SQ. FOOTAGE	E: Living:	Garage:	Covered f	Patios:	Screened Porch:	
	Carport:	Total Under Roo	of	_Wood Decks/w	alkways:	Accessory Build	ling:
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Martin County, Florida Laurel Kelly, C.F.A

Site Provided by... governmax.com T1 11

Summary

Address print in the interval

Parcel Info

Summary

Land

Residential **Improvement**

Commercial

Image

Sales & Transfers Assessments →

Taxes →

Exemptions -> Parcel Map →

Full Legal →

Parcel ID Unit Address

13-38-41-007-79 S RIVER RD 000-00031-3

SerialIndex Order

Commercial Residential

27829Address

0

1

Summary

Property Location 179 S RIVER RD Tax District 2200 Sewall's Point

Account # 27829

101 0100 Single Family Land Use

Neighborhood 120200 Acres 0.362

Legal Description Property Information

WHITE FENCE ACRES ADDN LOT 3-A

Search By

Parcel ID

Owner

Address Account #

Use Code

Legal Description

Neighborhood

Sales Map → **Owner Information** Owner Information

THOMPSON, G W & V JANE

Mail Information 179 S RIVER DR STUART FL 34996-7014

Assessment Info

Front Ft. 0.00

Market Land Value \$218,500 Market Impr Value \$171,480 Market Total Value \$389,980

Site Functions **Property Search**

Contact Us On-Line Help

County Home Site Home

County Login

Recent Sale

Sale Amount \$193,000

Sale Date 6/1/1983 Book/Page 0573 2292

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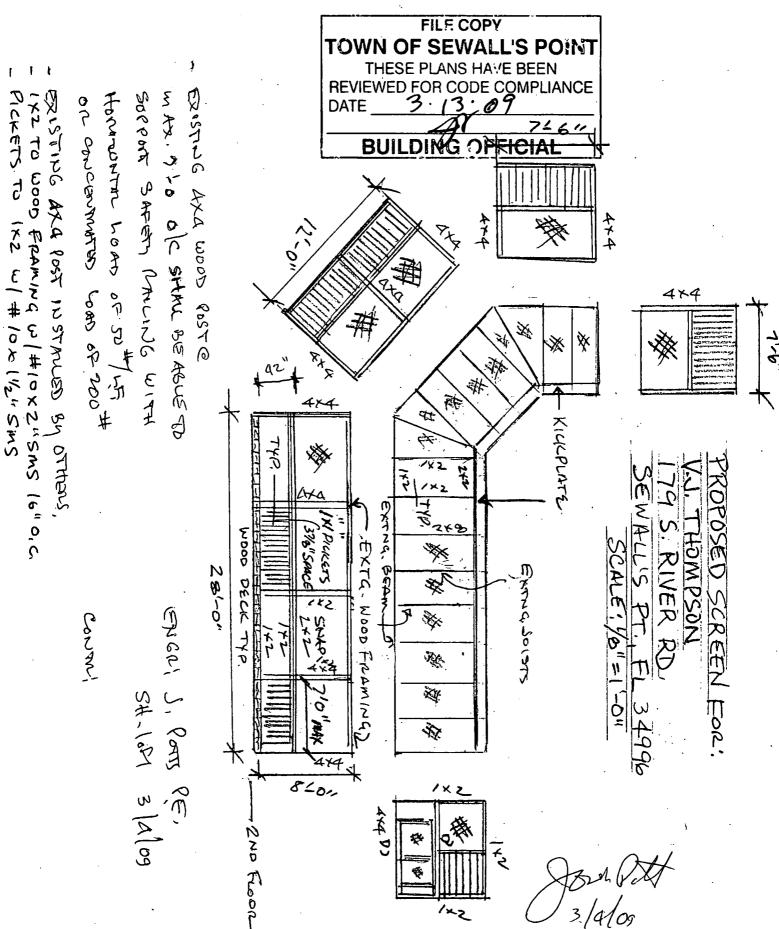
Data updated on 2/25/2009



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

PERMIT #:	TAX FOLIO #: _	13-38-	4-007	7-000-00	5031-3
STATE OF FLORIDA	.(COUNTY OF MARTIN	1		
THE UNDERSIGNED HEREBY GIVES ACCORDANCE WITH CHAPTER 713, COMMENCEMENT.	NOTICE THAT IMPROVEM FLORIDA STATUTES, THE I	ENT WILL BE MADE FOLLOWING INFORM	TO CERTAIN RE MATION IS PROV	EAL PROPERTY, A VIDED IN THIS NO	ND IN TICE OF
LEGAL DESCRIPTION OF PROPER	TY (AND STREET ADDRES	S IF AVAILABLE):			
GENERAL DESCRIPTION OF IMPR	OVEMENT: ENCL	085 PA	170 Cu	SCREET	S
PHONE NUMBER: 772		S FAX NUMBER:			
INTEREST IN PROPERTY:	E TITLE HOLDER (IF OTHE	R THAN OWNER):			
CONTRACTOR: T. MASON ADDRESS: 2700	J CONSTRUC	NON	A-08 8		
PHONE NUMBER: 772	2607449	FAX NUMBER:	STATE OF FLORING COUNTY	# 8 4 W	
SURETY COMPANY (IF ANY):				RTIFY THAT THE	CIRCUIT
ADDRESS: PHONE NUMBER: BOND AMOUNT:	, , , , , , , , , , , , , , , , , , , ,	FAX NUMBER:	AND CORRECT CO	PAGES IS A TRUI	1 1 4 4 4 4 4
LENDER/MORTGAGE COMPANY:			1777	EWING, CLERK	COUNT
ADDRESS:PHONE NUMBER:		FAX NUMBER:	BY:	7 7 7 (0)7	≥ D.C.
		·			7
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Date of In		DEPARTMENT - INSPE		2000
<u></u>				_2009 Page of
PERMIT.#	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS 11	COMMENTS
9123	Felican Group	in-owgress	PASS	
7	142 SSewalls	561-746-40	26	
3	Supeter Road	032/		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9053	Slater	Tinal	PAGG	Comacoawill
	4 Lagron Isl			C1682/
, _	Elilling Pauliek			INSPECTOR
PERMIT#	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS:	COMMENTS
9021	Clifford	Tinal.	PASS	Close
6點/	20 N Rever B	HC.		
• - /	forward			INSPECTOR
BEKIMILE#	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	Honoson			a consultation
1030	1795 Rue Rd			
1030	1795 Rue Rd T.Mason Const			INSPECTOR
- Land No. 4 - 4 - 12 - 12 - 12 - 12 - 12 - 12 - 1	1795 Rue Rd T. Mason Const OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE		INSPECT OR COMMENTS
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8800 4	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE Tunal (runspect) INSPECTION TYPE	RESULTS	COMMENTS
8800 4	OWNER/ADDRESS/CONTRACTOR TOOM ON HIGH PL LOUGHNA CHORESS/CONTRACTION	Tinal (reinoped) INSPECTION TYPE	RESULTS RESULTS	COMMENTS LOSE INSPECTOR
8800 4 PERMITA 9121	OWNER/ADDRESS/CONTRACTOR	Tinal (reinoped) INSPECTION TYPE	RESULTS	COMMENTS LOSE INSPECTOR
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9800 PERMIT#	OWNER/ADDRESS/CONTRACTOR TOOM ON High Pt Louden OWNER/ADDRESS/CONTRACTION 14B/KSOC/Potchington 3720 Sc. Ocean Gay flufnagel	Tinal (reinoped) INSPECTION TYPE a) Tinal	RESULTS RESULTS RESULTS	COMMENTS INSPECTOR COMMENTS
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10461 AC CHANGEOUT



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 CARD

THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER	10461		DATE ISSUED:	MAY 24, 2013	
SCOPE OF WORK:	AC CHANGE	EOUT	<u> </u>		,
CONTRACTOR:	FLYNN'S AC				
PARCEL CONTRO	L NUMBER:	133841-007-000	0-000313	SUBDIVISION	WHITE FENCE ACRES-3A
CONSTRUCTION A	DDRESS:	179 S RIVER RD		I	1
OWNER NAME:	THOMPSON	'		· · · · · · · · · · · · · · · · · · ·	
QUALIFIER:	OE FLYNN		CONTACT PHO	NE NUMBER:	283-4114
					AY RESULT IN YOUR
					IN FINANCING, CONSULT
WITH YOUR LENDER					
DEPARTMENT PRIOR				MO21 BF 20RWI	TTED TO THE BUILDING
NOTICE: IN ADDITION				MAV BE ADDITION	IAL DESTRICTIONS
APPLICABLE TO THIS	PROPERTYTHA	T MAY BE FOUND	OIN PUBLIC RECOR	DS OF THIS COUNT	Y, AND THERE MAY BE
ADDITIONAL PERMIT					
DISTRICTS, STATE AGI					
24 HOUR NOTICE REC	QUIRED FOR IN:	SPECTIONS - ALL	CONSTRUCTION D	OCUMENTS MUST	BE AVAILABLE ON SITE
CALL 287-2455 - 8:	00AM TO 4:00	OPM INSPECT	IONS: 9:00AM TO 3:0	DOPM - MONDAY TH	ROUGH FRIDAY
		11	NSPECTIONS		
UNDERGROUND PLUMBIN	c	. <u>11</u>	UNDERGRO	NIND CAS	
UNDERGROUND MECHAN				OUND GAS	
STEM-WALL FOOTING		 ·	FOOTING	JOIND ELECTRICAL	
SLAB			TIE BEAM/	COLLIMNS	
ROOF SHEATHING			WALL SHEA		
TIE DOWN /TRUSS ENG		·	INSULATIO		
WINDOW/DOOR BUCKS			LATH	••	
ROOF DRY-IN/METAL				IN-PROGRESS	
PLUMBING ROUGH-IN				L ROUGH-IN	
MECHANICAL ROUGH-IN			GAS ROUG		
FRAMING			METER FIN	AL	
FINAL PLUMBING			FINAL ELEC	TRICAL	
FINAL MECHANICAL			FINAL GAS		
FINAL ROOF			BUILDING F	INAL	
					-
					THE PERMIT HOLDER.
THE CONTRACTOR OF	ROWNER /BUII	LDER MUST SCHE	DULE A FINAL INSP	PECTION. FAILURE	TO RECEIVE A SUCCESSFUL
					TURE BUILDING PERMITS

Town of	Sewall's Point
Date: 5-15-13 J. D. BUILDING PE	SEWANT S FORM ERMIT APPLICATION Permit Number: 1046 SOMPhone (Day) 283-1823 (Fax) City: STUHET State: FC Zip: 34996
OWNER/LESSEE NAME HOGARILI THOMP	SON Phone (Day) 283-1823 (Eax)
Job Site Address: 179 5. RIVER RD	City: STILLET State: El. 7in: 3U991
Legal DescriptionP	arcel Control Number:
1	Address:
City: State: Zip: Tele	
*SCOPE OF WORK (PLEASE BE SPECIFIC):	Ac Changeout
WILL OWNER BE THE CONTRACTOR?	COST AND VALUES. Required on ALL permit applications)
	stimated Value of Improvements: \$
	subject property located in flood hazard area? VE10AE9AE8X
F0	R ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: stimated Fair Market Value prior to improvement; \$
(Must include a copy of all variance approvals with application)	(Fair Market Value of the Primary Structure only, Minus the land value)
Construction Company: F141214 Mc	PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION Phone: 283-4114 Fax: 7\$1-1307
ا مامند	THECMA City: PALM State: FL Zip: 34990
State License Number: CACOSSUSZ OR: Municipality:	License Number:
LOCAL CONTACT: JOS FLYNN	Phone Number: 283-4/14
DESIGN PROFESSIONAL ()	Ala. Deente#
Street: City:	State: Priore Number
AREAS SQUARE FOOTAGE: Living: Garage:	Covered Patios/ Porches: Enclosed Storage:
Carport:Total under RoofElevated De	eck: Enclosed area below BFE*: reater than 300 sq. ft. require a Noft-Conversion Covenant Agreement.
CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building C National Electrical Code: 2008, Florida Energy Code: 2010, Florida A	ode (Structural, Mechanica) Plumbing, Existing, Gas): 2010
WARNINGS TO OWNERS AND CONTRACTOR	
YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY	
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 2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY!	S ENCUMBERED BY ANY DEED-RESTRICTIONS: SOME RESTRICTIONS
APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC REC	CORDS OF MARTUNCOUNTY OR THE TOWN OF SEWALL'S POINT. THERE
AGENCIES, OR FEDERAL AGENCIES.	
 BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBST A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 	TANTIAL IMPROVEMENTS, TO SINGLE FAMILY RESIDENCES ARE VALID FOR
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHO	RIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF
BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF	AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL . FBC 2007 SECT. 105.4.1, 185.4.1.15.
***** FINAL INSPECTION IS REQU	IRED ON ALL BUILDING PERMITS*****
THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO T	TO DO THE WORK AS SPECIFICALLY INDICATED ABOVE. I CERTIFY HE ISSUANCE OF A PERMIT AND THAT THE INFORMATION I HAVE
FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO TH APPLICABLE CODES, LAWS, AND ORDINANCES OF THE TOWN OF	
	1
OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE:	CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
x	× man flym and
State of Florida, County of:	State of Florida County of:
On This the	On This the day of May 20/3
by who is personally	by VISEPH B. FIGHT who is personally
known to he or produced	known to me of produced FN DN FN50433613210
As iden/ification.	As identification. As identification.
Notary Public My Commission Expires:	My Commission Expires Ct 14, 2015
SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITH	Commission # EE 117431
APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180	DAYS (FBC 105.3.2) - PLEASE DICK INVOICE BEAM PROMISE

Lic. CAC055482

Flynn's Air Conditioning Service Inc.

PROPOSAL

contractor. For information about the recovery fund and filing a claim, contact the Florida

Construction Industry Licensing Board at the following telephone number and address:

1940 North Monroe St., Tallahassee, FL 32399-2202. Telephone: (850) 487-1395

1323 SW Thelma Street • Palm City, FL 34990 (772) 283-4114 • Fax: (772) 781-1307

an extra charge over and above the estimate. All agreements contingent upon strikes,

insurance. Our workers are fully covered by Workers Compensation Insurance.

Authorized Signature

accidents or delays beyond our control. Owner to carry fire, tornado and other necessary

authorized to do the work as specified. Payment will be made as outlined above.

			· · · · · · · · · · · · · · · · · · ·	
To: HOGALIH		Phone 253-1565	Date 5-15-1-	
To: flogarin		Job Name		
		Job Phone	Source	
We hereby submit specific	ations and estimates for:			
1. Install 1/2 ton high efficiency air conditioning system.				
2. Install /// ton matching air handler with skiv electric heater.				
3. Install new emergency drain pan with float switch. (Attics only)				
4. Install new digital thermostat.				
5. Install liquid line filter drier.				
6. Undercoat condenser base pan.				
7. Install time delay relay on compressor.				
8. Secure Condenser to slab.				
9. Supply (6)x R-85 filters.				
10. One year labor warranty.				
	BEST	BETTER	STANDARD	
Brand	Cavitai	BRYANT		
Condenser	24 ABBB18	113AN18		
Air Handler	FFITNES	FF170719		
Efficiency (SEER)		14.0		
Parts Warranty		10		
Compressor Warranty		10		
PRICE	<u>4093</u> _	35/0		
FPL REBATE	<u>- 300</u> -	12.5		
YOUR COST		3995		
	n with seller until paid in full. This proposal does			
We Propose hereby to furni	ish material and laborcomplete in accordance	with the above specifications, for the s	um of:	
Kaid 1895	o/15/rs	Dollars 31/90	2 <u> </u>	
Payment to be made of Payments upon default by customer.	as follows: 50% at contract acceptant Prices include 6% Florida sales tax. Customer agrees to	ice/ 50% at completion. To pay all court costs, attorney fees or other	r expenses incurred in the collection of the above.	
All material is guaranteed to be as specified. All work to be completed in a professional manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become contract, where the loss results from specified violations of Florida law by a state-licensed contract, where the loss results from specified violations of Florida law by a state-licensed contract.				

White-Customer Yellow-Office

Acceptance of Proposal The above prices, specifications and conditions are satisfactory and are hereby accepted. You are

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

generated on 5/23/2013 3:03:31 PM EDT

Summary

Parcel ID

Account #

27829

Unit Address

Market Total Website Updated Value

13-38-41-007-000-

00031-3

179 S RIVER RD, SEWALL'S POINT

\$271,960

5/18/2013

Owner Information

Owner(Current)

THOMPSON G W

Owner/Mail Address

179 S RIVER DR

STUART FL 34996-7014

Sale Date

6/1/1983

Document Book/Page

0573 2292

Document No.

Sale Price

193000

Location/Description

Account #

27829

Map Page No.

SP-06

Tax District

2200

Legal Description WHITE FENCE ACRES

ADDN LOT 3-A

Parcel Address 179 S RIVER RD, SEWALL'S POINT

Acres

.3620

Parcel Type

Use Code

0100 Single Family

Neighborhood 120200 Heritage P, Palmtto Pk, Rdglnd,

Assessment Information

Market Land Value

\$165,000

Market Improvement Value

\$106,960

Market Total Value

\$271,960



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road Sewall's Point, Florida 34996 Tel 772-287-2455 Fax 772-2204765

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

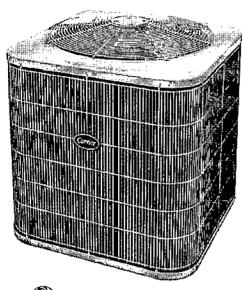
Air Conditioning Change out Affidavit-

In Conditioning C	mange out minausit		
Residential Commercial			
Package Unit YesX_ No (Use Condenser side of form below for equipment listing)			
Duct Replacement Yes \nearrow No - Refrigerant line replacement Yes \nearrow No			
Flushing Existing Refrigerant lines Yes No - Adding Refrigerant Drier Yes No			
Rooftop A/C Stand Installation Yes X No - Curb Installation Yes No			
Smoke Detector in Supply (over 2000 CFM) Yes _	No		
One form required for each A/C system installed			
REPLACEMENT SYSTEM COMPONENTS			
Air handler: Mfg: ARKIEK Model# FHIENTES	Condenser: Mfg (AMMIR Model# 24HBC618		
Volts CFM's Heat Strip 5 Kw	Volts 220 SEER/EER 16 BTU's 18,0		
Min. Circuit Amps Wire gauge _8	Min. Circuit Amps Wire gauge _8		
Max. Breaker size <u>30</u> Min. Breaker size	Max. Breaker size <u>20</u> Min. Breaker size		
Ref. line size: Liquid 3/8 Suction 5/8	Ref. line size: Liquid Kuction Suction		
Refrigerant type 410	Refrigerant type 410		
Location: Existing New	Location: Existing New		
Attic/Garage/Closet (specify) GANAGE	Left/Right/Rear/Front/Roof LELT ROAR		
Access: No ladder needed	Condensate Location		
EXISTING SYSTEM COMPONENTS			
Air handler: Mfg: Model#			
Volts 220CFM's Heat Strip Kw			
Min. Circuit Amps Wire gauge	Min. Circuit Amps Wire gauge		
	Max. Breaker size Min. Breaker size		
Ref. line size: Liquid 3/4 Suction 5/4	Ref. line size: Liquid Suction 3/4		
Refrigerant type	Refrigerant type		
Location: Ext. New	Location: Ext. New		
Attic/Garage/Closet (specify) GANAGE	Left/Right/Rear/Front/Roof Lyst Rook		
Access:	Condensate Location		
Certification:			
I herby certify that the information entered on this form a further that this equipment is considered matched as requ	accurately represents the equipment installed and aired by FBC – R (N)1107 & 1108		

24ABC6
Comfort ™ 16 Air Conditioner
with Puron® Refrigerant
1–1/2 to 5 Nominal Tons



Product Data







Carrier's Air Conditioners with Puron® refrigerant provide a collection of features unmatched by any other family of equipment. The 24ABC has been designed utilizing Carrier's Puron refrigerant. The environmentally sound refrigerant allows you to make a responsible decision in the protection of the earth's ozone layer.

This product has been designed and manufactured to meet Energy Star® criteria for energy efficiency when matched with appropriate coil components. Refer to the combination ratings in the Product Data for system combinations that meet Energy Star® guidelines.

NOTE: Ratings contained in this document are subject to change at any time. Always refer to the AHRI directory (www.ahridirectory.org) for the most up-to-date ratings information.

INDUSTRY LEADING FEATURES / BENEFITS

Efficiency

- 14 16.5 SEER/11.0- 13.5 EER
- Microtube Technology

 refrigeration system
- Indoor air quality accessories available

Sound

- Sound level as low as 76 dBA
- Sound level as low as 74 dBA with accessory sound blanket

Comfort

 System supports Edge[®] Thermidistat[™] or standard thermostat controls

Reliability

- Puron® refrigerant environmentally sound, won't deplete the ozone layer and low lifetime servce cost.
- Scroll compressor
- Internal pressure relief valve
- Internal thermal overload
- Filter drier
- Balanced refrigeration system for maximum reliability

Durability

WeatherArmor™ protection package:

- Solid, durable sheet metal construction
- Dense wire coil guard standard
- Baked-on, complete outer coverage, powder paint

Applications

- Long-line up to 250 feet (76.20 m) total equivalent length, up to 200 feet (60.96 m) condenser above evaporator, or up to 80 ft. (24.38 m) evaporator above condenser (See Longline Guide for more information.)
- Low ambient (down to -20° F/-28.9° C)) with accessory kit

MODEL NUMBER NOMENCLATURE

1	2	3	4	5	6	7	8	9	10	11	12	13
N	N	Α	Α	A/N	N	N	N	A/N	A/N	A/N	N	N
2	4	A	В	С	6	3	6	A	0	0	3	0
	duct ries	Product Family	Tier	Major Series	SEER	Coo Capa	•	Grille Variations	Open	Open	Voltage	Series
24:	=AC	A=RES AC	B=Comfort	C=Puron	6=16 SEER			A = Dense W = Standard	0=Not Defined	0=Not Defined	3=208/230-1	0 = Original Series





Use of the AHRI Certifled TM Mark indicates a manufacturer's participation in the program For verification of certification for individual products, go to www.ahrldirectory.org.







meet Energy Starte citeria for energy efficiency when meet Energy Starte citeria for energy efficiency when matched with appropriate coil components. However, propor refrigorant charge and proper air flow are critica to achieve rated capacity and efficiency. Installation of this product should follow all manufacturing refrigerant charging and air flow instructions. Fallure to confirm proper charge and air flow may reduce energy efficiency and shorten equipment life.

STANDARD FEATURES

18	24	30	36	42	48 / 49	60 / 61
Х	Х	Х	Х	Х	Х	X
16.0	16.0	16.5	16.5	16.0	16.0	16.0
Х	Х	Х	Х	Х	X	X
X	Х	Х	X	Х	Х	X
Х	Х	X	Х	X	Х	х
X	Х	Х	Х	Х	Х	Х
X	Х	X	Х	Х	X	X
Х	Х	Х	Х	X	Х	Х
X	Х	Х	X	Х	Х	X
Х	X	Х	X	X	X	X
	X 16.0 X X X X X X	X X X X X X X X X X X X X X X X X X X	X X X X X X X X X X X X X X X X X X X	X	X	X

^{*} With approved combinations

PHYSICAL DATA

UNIT SIZE - VOLTAGE, SERIES	18-31	24-30	30-30	36-30	42-30	48-31	49-30	60-30	61-30
Operating Weight Ib (kg)	125	147	153	165	213	264	231	272	272
Operating Weight to (kg)	(56.7)	(66.5)	(69.3)	(74.8)	(96.4)	(119.7)	(104.8)	(123.4)	(123.4)
Shipping Weight Ib (kg)	154	183	188	204	254	317	269	310	310
Shipping Weight to (kg)	(69.9)	(82.8)	(85.2)	(92.5)	(115.2)	(143.8)	(222.0)	(140.6)	(140.6)
Compressor Type					Scroll	3	-		•
REFRIGERANT				Puro	109 (R-410A)				
Control				TXV (Purc	n@ Hard Shu	itoff)			
Charge lb (kg)	4.60	6.00	6.81	7.00	8.62	13.0	9.00	14.50	14.50
Charge ib (kg)	(2.09)	(2.72)	(3.09)	(3.18)	(3.91)	(5.90)	(4.08)	(6.58)	(6.58)
COND FAN Propeller Type, Direct Drive									
Air Discharge	Vertical Vertical								
Air Oty (CFM)	1881	2614	2614	3223	3810	4046	4046	4046	4046
Motor HP	1/12	1/10	1/10	1/12	1/5	1/4	1/4	1/4	1/4
Motor RPM	1100	1100	1100	800	800	800	800	800	800
COND COIL			· · · · · · · · · · · · · · · · · · ·	•		•			
Face Area (Sq ft)	11.50	15.10	17.20	17.60	25.15	25.15	25.15	30.15	30.15
Fins per In.	25	25	25	25	25	20	20	20	20
Rows	1	1	1	1	1	2	1	2	2
Circuits	3	4	4	4	6	7	7	8	8
VALVE CONNECT. (In. ID)		•			d				
Vapor	3/4	3/4	3/4	7/8	7/8	7/8	7/8	7/8	7/8
Liquid	3/8	3/8	3/8	3/8	3/8	3/8	3/8	3/8	3/8
REFRIGERANT TUBES (In. OD)		<u> </u>				·	.1.,		
Rated Vapor*		3/4	•	T	 	7/8		1-	1/8
Max Liquid Line †				•	3/8	 		*	

^{*} Units are rated with 25 ft (7.6 m) of lineset length. See Vapor Line Sizing and Cooling Capacity Loss table when using other sizes and lengths of lineset.

Note: See unit Installation Instruction for proper installation.

X = Standard

[†] See Liquid Line Sizing For Cooling Only Systems with Puron Refrigerant tables.

ELECTRICAL DATA

UNIT SIZE	V/PH	OPER VOLTS*		COMPR		FAN		MIN WIRE	MIN WIRE	MAX LENGTH	MAX LENGTH	MAX FUSE**	
ONIT SIZE	V/PH	MAX	MIN	LRA	RLA	FLA	MCA	SIZE† 60° C	SIZE† 75° C	ft. (m)‡ 60° C	LENGTH ft. (m)‡ 75° C 64 (19.5) 43 (131) 41 (12.5) 54 (16.5) 81 (24.7) 67 (20.4)	or CKT BRK AMPS	
18-31			253 197	48.0	9.0	0.50	11.8	14	14	67 (20.4)	64 (19.5)	20	
24-30]			58.3	13.5	0.75	17.7	14	14	46 (14.0)	43 (131)	25	
30-30				64.0	12.8	0.75	16.8	14	14	44 (13.4)	41 (12.5)	25	
36-30		[77.0	14.1	0.50	18.1	12	12	57 (17.4)	54 (16.5)	30	
42-30	208/230/1-60	253		112.0	17.9	1.20	23.6	10	10	85 (25.9)	81 (24.7)	40	
48-31				109.0	19.9	1.20	26.1	10	10	70 (21.3)	67 (20.4)	40	
49-30				117.0	21.8	1.20	26.1	10	10	70 (21.3)	67 (20.4)	40	
60-30				135.0	21.4	1.20	28.0	8	10	91 (27.7)	56 (17,1)	40	
61 – 30				134.0	25.0	1.20	32.5	8	10	94 (28.7)	58 (17.7)	50	

Permissible limits of the voltage range at which the unit will operate satisfactorily

Length shown is as measured one way along wire path between unit and service panel for voltage drop not to exceed 2%.

Length Short...

** Time – Delay fuse.

FLA - Full Load Amps

LRA - Locked Rotor Amps

MCA – Minimum Circuit Amps RLA – Rated Load Amps

NOTE: Control circuit is 24-V on all units and requires external power source. Copper wire must be used from service disconnect to unit. All motors/compressors contain internal overload protection.

Complies with 2007 requirements of ASHRAE Standards 90.1

A-WEIGHTED SOUND POWER LEVEL (dBA)

Unit Size -	Standard	TYPICAL OCTAVE BAND SPECTRUM (dBA without tone adjustment)								
Voltage, Series	Rating (dBA)	125	250	500	1000	2000	4000	8000		
018-31	76	52.5	59.0	65.5	70.5	64.5	59.0	54.5		
024-30	76	57.5	64.0	69.0	71.0	69.0	64.5	60.0		
030-30	76	55.0	63.5	68.0	69.5	67.0	63.5	58.5		
036-30	76	50.5	59.5	64.5	70.5	62.0	59.5	54.5		
042-30	78	52.5	62.0	66.0	73.5	68.0	62.0	55.5		
048-31	78	57.5	61.5	66.0	70.5	65.5	59.5	53.5		
049-30	78	51.5	62.0	67.5	73.5	69.0	64.5	62.0		
060 - 30	78	55.0	62.5	67.5	70.5	65.0	61.0	53.5		
061-30	78	56.5	63.0	65.5	69.0	67.0	61.5	56.0		

NOTE: Tested in accordance with AHRI Standard 270-08 (not listed in AHRI).

A-WEIGHTED SOUND POWER LEVEL (dBA) WITH SOUND SHIELD

Unit Size -	Standard Rating (dBA)	TYPICAL OCTAVE BAND SPECTRUM (dBA without tone adjustment)									
Voltage, Series		125	250	500	1000	2000	4000	8000			
018-31	74	55.5	59.0	65.0	68.5	63.5	58.0	52.0			
024-30	75	58.0	64.0	69.0	70.5	68.5	64.5	59.5			
030-30	75	55.5	63.0	68.0	69.0	67.0	63.0	58.5			
036-30	74	51.5	58.5	62.0	65.0	61.0	58.0	52.0			
042-30	76	53.0	62.0	65.5	72.0	65.0	61.0	54.0			
048-31	76	58.5	61.5	66.0	69.0	64.0	58.5	51.0			
049-30	76	53.0	61.5	67.5	72.0	68.0	61.5	59.0			
060-30	75	56.5	62.5	66.5	68.0	63.0	59.5	51.5			
061-30	75	57.0	63.0	65.5	67.0	65.5	59.0	52.5			

NOTE: Tested in accordance with AHRI Standard 270-08 (not listed in AHRI).

CHARGING SUBCOOLING (TXV-TYPE EXPANSION DEVICE)

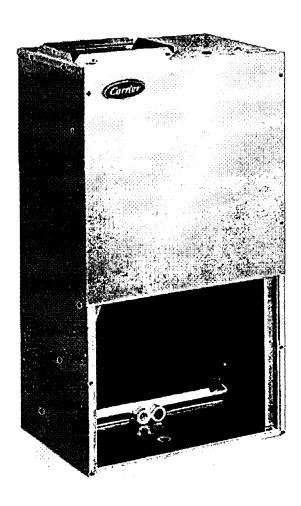
UNIT SIZE – VOLTAGE, SERIES	REQUIRED SUBCOOLING °F (°C)
18-31	10 (5.6)
24-30	10 (5.6)
30-30	10 (5.6)
36-30	10 (5.6)
42-30	9 (5.0)
48-31	10 (5.6)
49-30	8 (4.4)
60-30	9 (5.0)
61-30	9 (5.0)

If the sample of the voltage range at which the unit will operate satisfactority.

If whe is applied at ambient greater than 30°C, consult table 310–16 of the NEC (NFPA 70). The ampacity of non-metallic-sheathed cable (NM), trade name ROMEX, shall be that of 60°C conditions, per the NEC (NFPA 70) Article 334–80. If other than uncoated (no-plated), 60 or 75°C insulation, copper wire (solid wire for 10 AWG or smaller, stranded wire for larger than 10 AWG) is used, consult applicable tables of the NEC (NFPA 70).



Product Data



FEATURES

The FF1E Series Fan Coil unit is primarily designed for apartment applications as upflow indoor air handlers for split-system heat pumps and air conditioners for use with Puron® refrigerant. These units are available with factory-installed electric heaters, which include the disconnect. A field-installed cooling control with disconnect is also available for unit sizes 18, 24, 30 and 36 only. A Time Delay Relay (TDR) is included with either the electric heat or the cooling control packages.

This fan coil may be installed free-standing, wall hung or flush mounted in the wall. The 22-in (559 mm) wide cabinet size in all models allows units to fit between standard stud spacings. No return-air ductwork is required if the application provides for return air in the front of the cabinet through either a louvered closet door or an optional accessory decorative grille panel.

The cabinet exterior is made of pre-painted, galvanized sheet metal. The cabinet is fully insulated to meet applications in conditioned space. Additional insulation is required if the unit is installed in an unconditioned space. The unit is supplied with a replaceable filter.

Multi-speed, direct-drive, PSC blower motors have been selected to provide the proper air handling for both heating and cooling. Electronic commutating motors (ECM) use X13 high-efficiency motors to increase system performance. Motors are suspended at three points on rubber grommets for quieter operation.

All refrigerant lines, electrical power, and thermostat wiring enter from the top of the cabinet. Sweat-type refrigerant connections on both liquid and suction lines make for swift, low-cost installation. All service access to the unit is conveniently located in the front.

All units come with a factory-supplied, hard-shutoff thermostatic expansion valve (TXV) metering device for performance improvement.

The drain pan is constructed of high-impact, sound-deadening, corrosion-proof polyester resin. Primary and secondary drain connections exit from the bottom or either side of the cabinet.

DesignStar Load Calculation Results are intended for use with Rheem heating and cooling systems

The New Degree of Comton's

Customer Informat	ion		
Street Address	179 river rd, Stuart	; FL 34996	
Latitude, Longitude	26.6726°, -80.0706	0	
House Square Footage:	850 sq. ft.	enter al material de la companya de la companya de la companya de la companya de la companya de la companya de	or an executive constant appropries.
Name:	HOGARTH		
Phone:			
Email:		A CANADA CANADA CANADA CANADA CANADA CANADA CANADA CANADA CANADA CANADA CANADA CANADA CANADA CANADA CANADA CAN	

House Information	
SHR	.75
Number of residents	2
Ceiling height	9
Wall U-value R-value	0.09 11
Floor U-value R-value	0.2 5
Ceiling U-value R-value	0.053 19
Window U-value	0.5
Window SHGF	0.85
Moisture grains	64
Duct loss %	10
Duct gain %	10
Cooling infiltraction (ACH)	0.6
Heating infiltration (ACH)	0.8
Winter ventilation	0
Summer ventilation	0

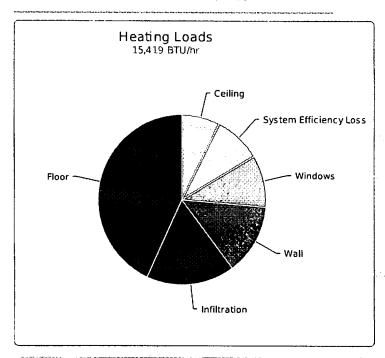
Design Conditions			
Outdoor	Heating	Cooling	
Dry bulb (°F)	45	91	
Daily range	Material Control of Material Institutes and Angular Angular	М	
Relative humidity	Ha 24 mail na dha ann an h-ann an h-ann an dha ann an dha ann an ann ann ann ann ann ann ann an	509	%
Moisture difference		64	<u> </u>
Indoor	•	leating	Cooling
Indoor temperature (°F)	7	0	75
Design temperature difference(°F)	2	5	16

.

Heating Loads

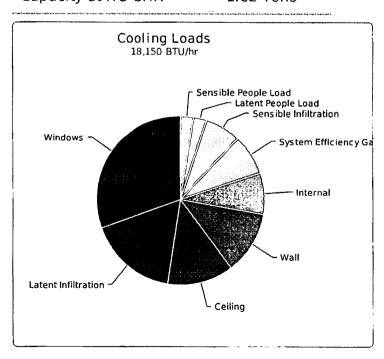
Area	Btuh	% of load
Wall	2085	13.5
Floor	6660	43.2
Ceiling ···	1126	7.3
Windows	1 538	10
Infiltration	2609	16.9
System Efficiency Loss	1402	9.1
Total:	15/10	***************************************

Total: 15419

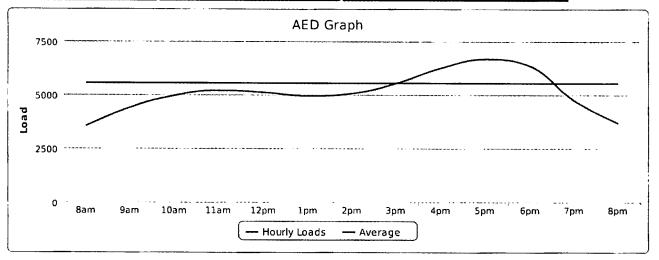


	\sim	M	_		\sim
				a	as
v	v		 _	40.6	

Area	Btuh	% of load
Wall	2168	11.9
Ceiling	2298	12.7
Windows	5536	30.5
Sensible Infiltration	1252	6.9
Latent Infiltration	3096	17.1
System Efficiency Gain	1435	7.9
Internal	1445	8
Sensible People Load	460	2.5
Latent People Load	460	2.5
Total:	18150	
Sensible load	145	594
Latent load	355	56
SHR	0.8	
Capacity at .75 SHR	1.6	2 Tons



Adequate Exposure Diversity



Equipment selection

System equipment selection will be made using th	ne following derived values.
Glass (NW)	62 sq. ft.
Glass (NE)	9 sq. ft.
Glass (SW)	9 sq. ft.
Glass (SE)	43 sq. ft.
Summer Outdoor	91°F
Summer Wet Bulb	78 °F
Summer Indoor	75°F
Summer Design Grains	50%
Winter Outdoor	45°F
Winter Indoor	70°F
Sensible Cooling	14,594 Btuh
Latent Cooling	3,556 Btuh
Required Cooling Airflow	663 CFM
Sensible Heating	15,419 Btuh
Required Heating Airflow	200 CFM

All calculations are based upon approved hvac industry standards and procedures, and comply with all local, state and federal code requirements. All computed results are Estimates. Product provided by Energy Design Systems and Idea Tree



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road Sewall's Point, Florida 34996 Tel: 772-287-2455Fax772-220-4765

FLORIDA ENERGY CONSERVATION CODE

Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912)

Owner: HOGARIH	Contractor name: Flyns A/E
Street address: 179 5. Rive Po	Jurisdiction:
City: <u>5144117</u>	Permit No.:
Zip: <u>34996</u>	Final inspection date:
Where needed, the existing ducts have lequivalent. Ducts are located within conditioned spanning. The joints or seams are already sealed within conditioned spanning.	sociated with the HVAC unit referenced by the permit quirements of Section 101.4.7.1.1 as indicated below: been sealed using reinforced mastic or code-approved ace. (Section 101.4.7.1.1 exception 1) with fabric and mastic (Section 101.4.7.1.1 exception 2) airs were made as necessary – (Section 101.4.7.1.1
exception 3) Signature: Signature: Sosiph Feyro	Date: <u>5-/5-/3</u>
Contractor License #: <u>CACO55482</u>	
certified I have tested the replaced air distribute pressure differential of 25 Pascals (0.10 in. w.	ution system(s) referenced by the permit listed above at c.).
Signature:	Date:
Printed Name:	



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2013.

Certificate of Product Ratings

AHRI Certified Reference Number: 3631754

Date: 5/15/2013

Product: Split System: Air-Cooled Condensing Unit, Coil with Blower

Outdoor Unit Model Number: 24ABC618A**31

Indoor Unit Model Number: FF1ENP025

Manufacturer: CARRIER AIR CONDITIONING Trade/Brand name: COMFORT 16 PURON AC

Manufacturer responsible for the rating of this system combination is CARRIER AIR CONDITIONING

Rated as follows in accordance with AHRI Standard 210/240-2008 for Unitary Air-Conditioning and Air-Source Heat Pump Equipment and subject to verification of rating accuracy by AHRI-sponsored, independent, third party testing:

Cooling Capacity (Btuh):

18000

EER Rating (Cooling):

13.00

SEER Rating (Cooling):

16.00

DISCLAIMER

AHRI does not endorse the product(s) listed on this Certificate and makes no representations, warranties or guarantees as to, and assumes no responsibility for, the product(s) listed on this Certificate. AHRI expressly disclaims all liability for damages of any kind arising out of the use or performance of the product(s), or the unauthorized alteration of data listed on this Certificate. Certified ratings are valid only for models and configurations listed in the directory at www.ahridirectory.org.

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CERTIFICATE VERIFICATION

The information for the model cited on this certificate can be verified at www.ahridirectory.org, click on "Verify Certificate" link and enter the AHRI Certified Reference Number and the date on which the certificate was issued, which is listed above, and the Certificate No., which is listed below.

Air-Conditioning, Heating, and Refrigeration Institute

©2013 Air-Conditioning, Heating, and Refrigeration Institute

CERTIFICATE NO.:

130131035966463864

^{*} Ratings followed by an asterisk (*) indicate a voluntary rerate of previously published data, unless accompanied with a WAS, which Indicates an involuntary rerate.

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Date of In		DEPARTMENT - INSPE		-/3 Page / of
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	107 Helerest	Memodel	FAIL	thin over TUB
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16354	An en Dillo Dans	Timal	RESULTS	COMMENTS
10001	10711in - in +	AC	NAMES	CLOSE
	Hayden Air			
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,	Chrierview	Poath	Press	CLOPE
	Freedom.	1	V	INSPECTOR
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DIA	795 River Ro	AC		7
11/	Tlynns Ac			INSPECTOR
	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS:	COMMENTS
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	60 S Sewalls	Final-roof -	J NZS	ewst
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1-1:30	9 Lantana Ln		(YKS)	
	Treedom Home			INSPECTOR
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nam	37mou	trees	04	
Min.	Severale			INSPECTOR

		Wallspoin	그 한국	
Date of Inspection Mon	BUILDING DEPARTM	ENT - INSPECTION Thur Fri	Log <u>6-10-/3</u>	Page / of
PERMIT # OWNER/ADDRESS/COM				
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DEDNUT # OWNED! ADD DESC! 6-0-1			INSPECTOR	
PERMIT # OWNER/ADDRESS/CONT	RACTOR INSPECTION	TYPE RESULTS	S COMMEN	TS
			INSPECTOR	

TOWN OF SEWALL'S POINT, FLORIDA



Date03/20/00TREE REMOVAL P	ermit Nº 0304
APPLIED FOR BY G. W. THOMPSON Owner 179 S. RIVER ROPP	(Contracto or Owner)
Sub-division	FIELD INSP/VERIF 3/20/059
'NWN OF CEWAII'C DOINT Call 287-2455	-8:00 A.M12:00 Noon for Inspection 8:00 A.M 5:00 P.M.—NO SUNDAY WORK.
RE: ORDINANCE 103 PROJECT DESCRIPTION	
REMARKS	

PHOLO L

SINGLE FAMILY HOME

HABITAT MANAGEMENT AND

LANDSCAPE PERMIT APPLICATION

REC	E	I	VEI	5
MAR	2	0	2000	

BY:_

OWNER HAME:	GW THOMPSON
	1MC SA QUICO 377
NUMBER & TYPE TREES TO BE REM	OVEN: 1 DÉAD GFT TRÉE (GRAPEFIONT)
CONTRACTOR:	
ADDRESS:	SIGNATURE (III) Mongoson
LICENSE NUMB	ER:
PHONE:	283/823 Owner —() William
CONTRACT PRI	
PERMIT FEE:	\$ 15.00 PAID: 3-20-00 Date
REASON FOR	RELOCATION, REMOVAL, OR REPLACEMENT:
APPLICAUT	T SIGNATURE: 100 Mangre DATE: 3-20-00
APPROVED:	Building OFFICIAL Date: 3/20/10
DENIED:	Building OFFICIAL Date:
COMMENTS:	
REASON FOR	DENIAL, IF APPLICABLE:

50

EFF TRÉE Э ALCK DO 17.00 PILLICAN MAILBOX Enancia

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon DWed Fri 3-20-, 2000; Page <u>/</u>

ĺ	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS		
V	4628	Hellneagt	ground &		CANCELLET		
		11 caste #11	_steel		CHIOCEUS!		
	(h)	PURE PN 4856-ADVANTACE					
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS		
/	4854	Kennedy	dry-in \$	Passed	late AM 6-		
	(9)	III N.S.P.Rd.	in progress	BG			
	(V	AST P BLDG CORP	Sheathaig				
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS		
٧)	4764		fence	Passed			
/	(2)	165.S.P.Rd.	final	BC,			
	9	0/13					
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS		
1	4727	Conway	p00/	PASSED	VERILY POOL P. D. 473		
·		129 N.S.P.ROL.	'stee/				
•	U						
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS		
	4810	Durante	roof final	PASSICO			
<i>'</i>	(1)	48 S. S. P. Rd.		BG			
	9	J.A.TAYLOR REG.		, ,			
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS		
1	4628	Hellnege/	lattre treis	to PASSON	BG Wine LATTE Call		
;[10R	1/ CESTE ///	TRAMING	Reject -	No pine on Permit		
1	00/	STEATHMORE,	•	 	Shower STICLIHY NI		
_	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS Ried Fee		
	4691	Wattles	framing	Reject	NOT Ready.		
	$\left \mathcal{A} \right\rangle$	20 N RIDgeview	re-inspect	739	Waiting For		
•		DRUPTWOOD- ACHO MORGES	WW.00 24 11 201W	10.80	Revised Plani.		
	OTHER:		IFFORD: 20 N. PIVE		<u></u>		
		Table II II hart	TORVOV; HIS I	1 1 6			
	INCRECTOR (News (City and an)						
	INSPECT	OR (Name/Signature):					

TOWN OF SEWALL'S POINT, FLORIDA

FILE

						والمستعدد المستعدد ال
DateAPPLIED FOR BY	3/01		TREE REM	OVAL PERMIT	. No 04	-90
APPLIED FOR BY	Dill Thor	~029~	179 5.00	roc Ad	11.	
Owner				0.14.	(Contractor or(Owner
Sub-division			Lot			
Sub-division	Groce	Rui	!	, Block		 .
N- 0/ -						
No. Of Trees: RELOC No. Of Trees: REPL	CATE	WITHIN 3	O DAYS (NO 1	tiela,	Northed	
No. Of Trees: REPL	_ACE	WITHIN 3	0 DAVS		7/17	
REMARKS	le decea	ead	o DATS	7		
) Ossa	\$ 0.00	
Signed,		C		O TO O	\$	
	Applicant	J	gnea,	-Town	Herk	
				124019.	lusp.	
OWN OF S			woi	87-2455 – 8:00 RK HOURS 8:00 A.A	L - 5:00 P.M.—NO	
TRF	E RE	MOI		PFR	MIT	-
			IANCE 103			
				RIPTION		· · · · · · · · · · · · · · · · · · ·
				-		
			REMARKS			

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

CANELL S	10 thy RECT	Permit 0	9490
8/13.	- Alli:	2001 by Date Issued	8/12/
•	,		, ,
this application shall in the replacement and a single	sclude a written statemen	giving reasons for remove e the dimensional location	al, relocation
scale drawing, or aerial	photograph, superimposed	with lot lines to scale,	of all
existing or proposed stra identified with an estima	uctures, improvements and ated size and number, etc	site uses, location of af	fected trees
			1823
Juner (5/07 0-) 1/10/1/138	Address / 19 54.)	(VER RUA) CBS- <u>RIVIER RD</u> Phone <u>183</u>	1823
Contractor	Address	Phone	·
Number of trees to be re	moved(list kinds of trees	1 GFT TRISE	
•		CLTRUS- DEAD/NUED	see NO FEE
Number of trees to be re	located within 30 days(ho	fee)(list kinds of trees)	100 1 12
Number of trees to be re	placed (lis	st kinds of trees):	
to-exceed-\$100.06.415,6	(3%5.00 - first tree pl i ð	us \$10.00 - each addition	il tree - not
		property or lie within a u	tility easement
ε are required to be re	emoved in order to provid	e utility service, nor for	a tree which
is dead, diseased, inju	red or hazardous to life	or property.)	
Plans approved as submi	rted V B Plans ap	proved as marked	
Permit good for one yea	r. Fee for renewal of ex	pired permit is \$5.00	
Signature of emplicant	5	Date submitted	
	005		(5/0)
Approved by Building In	spector John 1001	Date	14/01
Approved by Building Co	mmissioner	Date	
Completed		•	
Date	Checked by	PSE .	
THE POLICULAR TOPES MAN	A BE BENOTED OF PECANOACE	LITTUOLET DOMESTICATION DESIGNATION	E RDAZTITAN

THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT SPENIFICATION. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGLER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

THE FOLLOWING TREES MUST BE REMOVED BEFORE CONSTRUCTION BEGINS: BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND MELALEUCA?

MUER RO CHAPLEBRUT

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: XMon • Wed • Fri AUGUST 13 , 2001;

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5384	DERMARKARUAN	PENCE-FINAL	Persod	Charlet rea + sides
0	19 CASTLE HILL WAY			
	UNITED FENCE & STL.			INSPECTOR: \$/17
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5438	ZYGMON	BOAT UFT-	(g cod	
(2)	18 SIMARA ST.	FINAL		
	OCTOPUS MARLUE			INSPECTOR (&/17
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5475	18 E. HIGH POINT &	STORM SHUTTER.	10022DV	7
	ZUCKER &	FLUHL		
(4)	HOBE SOUND ALMOM.			INSPECTOR &/12
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
4978	RIMER	COPC. STATES:	(desoci	
(2)	295. RIVELZ KD.	- GUEST HOUSE V		
	LEAR DEVISIONALLI COM.	- REAR /MAN " V		INSPECTOR: XX F/3
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TR	THOMPSON	FILL WEST.	K Bee	(George FI)
(3)	LIGS. RINGR ROLL			
	0/B	·		INSPECTOR: V
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	,			
1:				
			:	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
OTHER.	SO RIO VISTA DRIVE	PUTTORAL): STORMS	II SLATTUHI	UST. COMMBIACED 7

TOWN OF SEWALL'S POINT, FLORIDA

Date	9/19	₩ 2003 tree	REMOVAL PERMIT	Nº 2098
APPLIED FOR BY	THOU	MRSON	((Contractor or Owner)
Owner	179 5	, RIVER RO	040	
Sub-division		SILK OAK	, Block .	
Kind of Trees		SILK OAK		
No. Of Trees: RI	EMOVE			
No. Of Trees: REL	OCATE	WITHIN 30 DAYS	(NO FEE)	
No. Of Trees: RE	EPLACE	WITHIN 30 DAYS	5	<u> </u>
REMARKS				
			FEE	\$
Signed,		Signed,	Gere Sun	mons (Kob)
	Applicant		Building	Official
				,
				XX A.M12:00 Noon for Insp
WN OF	SEWALL	'S POINT	WORK HOURS 8:00	A.M 5:00 P.M.—NO SUNDAY W
WH OF	SEWALL	'S POINT	WORK HOURS 8:00	A.M 5:00 P.M.—NO SUNDAY W
WH OF	SEWALL	'S POINT EMOV	WORK HOURS 8:00	A.M 5:00 P.M.—NO SUNDAY W
WN OF	SEWALL	S POINT EMOV RE: ORDINANCE	WORK HOURS 8:00	A.M 5:00 P.M.—NO SUNDAY W
WN OF	SEWALL	S POINT EMOV RE: ORDINANCE	WORK HOURS 8:00 AL PE	A.M 5:00 P.M.—NO SUNDAY W
WH OF	SEWALL	S POINT EMOV RE: ORDINANCE	WORK HOURS 8:00 AL PE	A.M 5:00 P.M.—NO SUNDAY W
WN OF	SEWALL	S POINT EMOV RE: ORDINANCE	WORK HOURS 8:00 AL PE	A.M 5:00 P.M.—NO SUNDAY W
WN OF	SEWALL	S POINT EMOV RE: ORDINANCE	WORK HOURS 8:00 AL PE	A.M 5:00 P.M.—NO SUNDAY W
WN OF	SEWALL	S POINT EMOV RE: ORDINANCE	WORK HOURS 8:00 AL PE	A.M 5:00 P.M.—NO SUNDAY W
WN OF	SEWALL	S POINT EMOV RE: ORDINANCE	WORK HOURS 8:00 AL PE 103 COJECT DESCRIPTION	A.M 5:00 P.M.—NO SUNDAY W

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

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

No permit required for:

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

Permit Fee:

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

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

Application procedures:

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

Owner GW THOMPSON	Address/7	9 5, RIVER Pd Phone 283-1823
Contractor	Address	Phone
No. of Trees: REMOVE	•	Type: large - lon'+ kne
No. of Trees: RELOCATE	WITHIN 30 DAYS	Type:
No. of Trees: REPLACE	•	Туре:
Written statement giving reasons:	dead	
Signature of Applicant	Thompson	Date 9-17-03
Approved by Building Inspector:	1/6	Date 9/20/03 Fee: NO FEE
Plans approved as submitted	Plans app	proved as revised/marked:
LE OAK - JREER	SFAN -	PRODURE HATEMES

TOWN OF SEWALL'S POINT Building Department - Inspection Log

Date of Ir	spection: Mon Wed	X Fri 9/19	_, 200 / 3	Page of
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6418	Burr	TANK INST &	PAG	3
	21 RIVERVIEW	PRESURE CHECK		
DDD144	FERRELL GAS	C/B		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE		NOTES/COMMENTS:
0242	ABESADA - TURK	TANK+LINES	CANCE	
	8 Morgan Circle	NEW SURVEY TO	3/600 Loc	Tow of Truk
	FEREIL GAS	Selfascer Trunc		MAPECTOR ALG
PERMIT	OWNER/ADDRESS/CONTR.			NOTES/COMMENTS:
H PES	JAOMERON:	1255	MA	NO FER
	179 S. RIVER RD			PROPERS HAZZAL
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6156	REUDENBERG	COELEC \$	MASS	Close
	15 N. SEWALLS PT	Pumbing		FILE
	LANIERO			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6409	HORBOR BAY ASS	Busa Saucco	FAIL	NEED FAINT TOR
	3700 SECCEAN BUD	FINAL		TWAL
	KF BUILDERS			INSPECTOR: A
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	ROSENBERG	TREE	MSS	NO TAX
] .	365 SENALLS PT			SISEMED RES
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6131	PFEIFFER			
	104 Hover Souper			
	BUFOLD			INSPECTOR:
OTHER:		的复数 医多种性毒素		
		to programme the state of the s		
			<u> </u>	

TOWN OF SEWALL'S POINT, FLORIDA

Date	NE 25	<u>ж 2004</u> ті	REE REMOVAL PERMIT	Nº 2288	
APPLIED FOR BY	THOM	PSON		Contract	
Owner	1795	, RIVER	ROAD	Contractor or Owner)	$\int \int \int$
			, Block		
Kind of Trees		, Lot .	, Block		b
		_ CITEU.	<u> </u>		
No. Of Trees: REL	OCATE	WITHIN 30 DA	YS (NO FEE)		
		WITHIN 30 DA			
REMARKS		30 DA	11.2		
				1	
Signed,	Applicant	Signed	Line Sin	moras (Sax)	;
	уфрисан		Town C	lerk	
	SEWALL'			3:00 A.M12:00 Hoon f 00 A.M 5:00 P.M.—HO SUN	
		RE: ORDINA		•	
			PROJECT DESCRIPTION :		
			 	•	
			REMARKS		

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

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Owner , Sane	ThompsoAddress 170	9 & From Pd Phone 283-1823
Contractor	Address	Phone
No. of Trees: REMOVE)	Type:eitrus
No. of Trees: RELOCATI	E WITHIN 30 DAYS	Type:
No. of Trees: REPLACE	WITHIN 30 DAYS	Type:
Written statement giving r	easons: tree is	dy diging
Signature of Applicant	Jane Tho	Nipson Date 6-23-04
Approved by Building Ins	pector:	Date 6/25 Fee: 0
Plans approved as submitt	red Plans app	proved as revised/marked:

Tree is behind house

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Ir	aspection: Mon Wed	Fri (1/25)	_, 200# 4	Page of
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
(do53	HB ASSOCIATES	FINAL	FAIL	/
1	3760SE OCEAN		• · · · · · · · · · · · · · · · · · · ·	A14./
4	ROY JANDREAU			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6512	BUONO	FINAL PIP RAPH SANO FILL	9165	CLOSE /
-	10014. Javay 31. CV	DANOFILL		m/
5	CETATIVE LANDSC.	· ,		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
Tess	KINAED	Tees	PASS	/
0	5 TIMORST			\\
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6799	Gover	STEEL FOOTING	PASS	
3	5 RIVERVIEW			_\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	0/B			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	LIOMPSON	TEES	YAS	
1	179 S. RWERED			M
	<i>E</i>			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE		NOTES/COMMENTS:
less	HALL	TEEE	PASS	PEDIED REMOVAL
/_	6 KNOWLES			OF OAK MI
9				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6551	Langer	SLAB	NAS	/
M	3 LOFFING WAY FLOEIDA'S FINEST			M/
/	FLOEIDA'S FINEST			INSPECTOR:
OTHER:				
				
				<u> </u>
				

TOWN OF SEWALL'S POINT, FLORIDA

Date JANUARY 10	£ 14 2005 TREE	REMOVAL PERM	т Nº 2389	
APPLIED FOR BY	Hompson	<i>A</i>	(Contractor or Owner)	
Owner179 S.	RIVER R	040		
Sub-division	, Lot	, Bloc	:k	
Kind of Trees				
No. Of Trees: REMOVE	_ BiED OF	PARADISE	Ē	
No. Of Trees: RELOCATE	WITHIN 30 DAYS	(NO FEE)		:
No. Of Trees: REPLACE	WITHIN 30 DAY!	S		
REMARKS				
Signed,Applicant	Sign ed	Sene Sent Form BULLDIA	Clerk Va. OFFICIAL	
TREE RI	'S POINT EMOV RE: ORDINANC	AL P	- 8:00 A.M12:00 Noon 8:00 A.M 5:00 P.M.—H0 St	
		PROJECT DESCRIPTION	 	
		 -	· · · · · · · · · · · · · · · · · · ·	
			·	
		REMARKS		•
		Nemocking		
		· .		

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- 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.

5. Felling expire it work does not be	•			=======================================
Owner V SANE THOMPS	10W_Address_ <i>[79</i>	S. RIVER RD	_ Phone_ <i>2_\23-1</i>	<u>823</u>
Contractor RICAIAR D	Address		_ Phone	
No. of Trees: REMOVE 3		Type: White b	urd of par	adise
No. of Trees: RELOCATE	WITHIN 30 DAYS	Туре:		
No. of Trees: REPLACE	WITHIN 30 DAYS	Type:		
No. of Trees: REPLACE U.esg Written statement giving reasons: With hong Co	Maly !	Tree	replace	<u></u>
Signature of Property Owner		Da	ite <u> 1-13-0</u>	<u>5</u>
======================================		Date//_/		
Plans approved as submitted	Plans app	proved as revised/mark	sed:	