2 Sable Court

4503

SFR

C

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 11-17-98 BUILDING PERMIT NO. 4503

Building to be erected for Thomas Lucido Type of Permit RESIDENCE

Applied for by owner (Contractor) Building Fee 1888.00

Subdivision Flagler Lot 4 Block _____ Radon Fee 4

Address 7 Sabal Court Impact Fee 150.00

Type of structure residence A/C Fee 100.00

Electrical Fee 100.00

Parcel Control Number: Plumbing Fee 100.00

13-38-41-00-00000-0040-00 Roofing Fee 100.00

Amount Paid 3554 Check # 1855 Cash _____ Other Fees (_____) _____

Total Construction Cost $ 236,040. TOTAL Fees 3554

Signed Lucido Signed _____

Applicant Town Building Inspector

Approved good for one year

ADD'L BLDG FEE (TOTAL CONST. COST PER OWNER AFFID)

FINAL COST $343,000.
PERMIT " 236,040.
ADD'L COST $106,960.
ADD'L FEE (@8.00/1,000.) = $855.68

RENEWAL PERMIT FEE:

BLDG. :	$1,888.00
A/C	100.00
ELECT.	100.00
PLMBG.	100.00
TOTAL	$2,188.00

RECEIVED NOV 22

[redacted]

ORIGINAL
~~MASTER~~ PERMIT NO. 4503
(EXPIRED) 11/16/99

TOWN OF SEWALL'S POINT

Date 11/24/99 (EFFECTIVE 11/17/99 - 12/16/99) **BUILDING PERMIT NO.** 4750

Building to be erected for THOMAS LUCIDO Type of Permit S.F.R.

Applied for by O/B (Contractor) Building Fee *1,073.68

Subdivision _____ Lot _____ Block _____ Radon Fee _____

Address 2 SABAL COURT Impact Fee _____

Type of structure S.F.R. (UNDER CONSTRUCTION) A/C Fee _____

* BLDG. FEE CALCULATION
RENEWAL (1 MONTH) $ 218.00
Parcel Control Number: ADD'L. CONST. COST 855.68 Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid $1,073.68 Check # 126 Cash _____ Other Fees (_____) _____

Total Construction Cost $ 343,000.00 (PER OWNER AFFID.) TOTAL Fees $1,073.68

Signed Lucido Signed _____

Applicant Town Building ~~Inspector~~ OFFICIAL

BUILDING PERMIT

FORM BOARD SURVEY	DATE_____	SHEATHING	DATE_____
COMPACTION TESTS	DATE_____	FRAMING	DATE_____
GROUND ROUGH	DATE_____	INSULATION	DATE_____
SOIL POISONING	DATE_____	ROOF DRY-IN	DATE_____
FOOTINGS / PIERS	DATE_____	ROOF FINAL	DATE_____
SLAB ON GRADE	DATE_____	METER FINAL	DATE_____
TIE-BEAMS & COLUMNS	DATE_____	AS BUILT SURVEY	DATE_____
STRAPS AND ANCHORS	DATE_____	STORM PANELS	DATE_____
DRIVEWAY	DATE_____	LANDCAPE & GRADE	DATE_____
AS-BUILT SURVEY	DATE_____	FINAL INSPECTION	DATE_____

FLOOD ZONE _____ **LOWEST HABITABLE FLOOR ELEV.** _____

24 HOURS NOTICE REQUIRED FOR INSPECTIONS. **CALL 287-2455**

WORK HOURS – 8:00 AM UNTIL 5:00 PM

MONDAY TROUGH SATURDAY

☐ **New Construction** ☐ **Remodel** ☐ **Addition** ☐ **Demolition**

This permit must be visible from the street, accessible to the inspector.
FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT, NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.
DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!

2 Sabal Ct

#4503

Town of Sewall's Point

P.I.N. _____ Date 7/8/98 issued 11-17-98

BUILDING PERMIT APPLICATION

to construct:

☑ NEW CONSTRUCTION ☐ ADDITION ☐ ALTERATION ☐ DEMOLITION

☑ RESIDENTIAL ☐ COMMERCIAL 3934 +/- SF _____ CF

OTHER: _____ CONTRACT PRICE 236,040.

Owner's Name Thomas Lucido

Owner's Address 7 Quail Run Ln., Stuart, Ft. 34996

Fee Simple Titleholder's Name (If other than owner) _____

Fee Simple Titleholder's Address (If other than owner) _____

City Stuart (Sewall's Pt) State Ft Zip 34996.

Contractor's Name ~~Owner Builder~~ Commercial

Contractor's Address Construction

City _____ State _____ Zip _____

Job Name Lucido Residence.

Job Address LOT 4 Ridgeland

City Sewall's Point State Ft Zip 34996.

Legal Description See Survey

Bonding Company None

Bonding Company Address _____

City _____ State _____ Zip _____

Architect/Engineer's Name Joseph P. McCarty

Architect/Engineer's Address 900 E. Osceola, Stuart, Ft. 34994

Mortgage Lender's Name First National Bank

Mortgage Lender's Address ~~[illegible]~~ 815 Colorado Ave., Stuart, Ft. 34994

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

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

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

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

Tom Lucido — 7/8/98

Owner or Agent — Date

Contractor — Date

COUNTY OF MARTIN
STATE OF FLORIDA

Sworn to and subscribed before me this 8th day of July, 1998 by Tom Lucido who: [X] is/are personally known to me, or [ ] has/have produced ___ as identification, and who did not take an oath.

Shirley Lyders

Name: SHIRLEY LYDERS
Typed, printed or stamped

(NOTARY SEAL)

OFFICIAL NOTARY SEAL
SHIRLEY LYDERS
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC539724
MY COMMISSION EXP. MAR. 31,2000

I am a Notary Public of the State of Florida having a commission number of _____ and my commission expires: _____

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 [ ] has/have produced ___ as identification, and who did not take an oath.

Name: _____
Typed, printed or stamped

(NOTARY SEAL)

I am a Notary Public of the State of 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. _____

APPLICATION APPROVED BY _____ Permit Officer

_____ Building Commissioner

Lawton Chiles
Governor

FLORIDA DEPARTMENT OF
HEALTH

James T. Howell, M.D.,M.P.H
Secretary

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: Thomas Lucido SEPTIC TANK PERMIT NO.: HD 43-55-307

LEGAL DESCRIPTION: Lot 4 Ridgeland

The items which are checked off below must be certified by a surveyor or engineer and returned to the Martin County Health Department prior to the first plumbing inspection by the Building Department. Approval of this stubout elevation certification constitutes commencement of building construction for septic system permits.

X 1. Building Permit Number: _____ (Certification not required for this item).

___2. I certify that the elevation of the top of the lowest plumbing stubout is _____ inches (circle one) above / below benchmark elevation as indicated on septic tank permit.

X 3. I certify that the top of the lowest building plumbing stubout is _____ inches (circle one) above/ below crown of road elevation shown on septic tank permit.

___4. I certify that the top of the drainfield pipe elevation is _____.

___5. I certify that all moderate or severely limited soils have been removed from an area of _____ feet by _____ feet a minimum depth of _____. Surveyor must submit 2 plot plans to scale of excavated area. (See diagram ___A/ ___B on reverse side) Date Observed: __/__/__

___6. I certify that all moderately and severely limited soils have been removed in an area _____ feet wide or 33% of the area of the drainfield. This area is centered in the drainfield and extends to a depth of _____ feet where slightly limited soils exist. Surveyor must submit 2 plot plans to scale of excavated area. (See diagram B on reverse side) Date Observed: __/__/__

___7. I certify that all severely limited soils have been removed from an area one foot beyond the perimeter of the drainfield rock and the excavation meets all detail requirements as shown in _____ "Diagram A", or _____ "Diagram B" on reverse side. Surveyor must submit 2 plot plans to scale of excavated area. Date Observed: __/__/__

NOTE: a. Severely limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
b. Drainfield must be centered in the excavated area. Drainfield will not be approved if severe limited soils are not removed.
c. Condition numbers 5, 6 and 7 may be satisfied with excavation certification from the certified septic installer responsible for drainfield installation.

CERTIFIED BY: _____

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

Date: _____ Job Number: _____

_____ (Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

_____ Martin County Health Unit Approval Signature

_____ (Date)

Revised 01/17/97

Martin County Health Department
620 South Dixie Highway • Stuart, Fl 34994
(561) 221-4090 SunCom 269-4090 Fax (561) 221-4967

STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION PERMIT

PERMIT # : **43-SS-00307**
DATE PAID: _____
FEE PAID : _____
RECEIPT : _____
OSTDSNBR : **98-0273-N**

CONSTRUCTION PERMIT FOR:
[**X**] New System [ ] Existing System [ ] Holding Tank [ ] Innovative Other
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: **LUCIDO, THOMAS** AGENT: **96-1256, BROWN STEPHEN**

PROPERTY STREET ADDRESS: **SABOL COURT SEWALLS POINT FL 34996**

LOT: **4** BLOCK: _____ SUBDIVISION: **RIDGELAND**
[Section/Township/Range/Parcel No.]

PROPERTY ID #: **---** [OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF CHAPTER 10D-6, FAC REPAIR PERMITS AND HOLDING TANK PERMITS EXPIRE 90 DAYS FROM THE DATE OF ISSUE. ALL OTHER PERMITS EXPIRE ONE YEAR FROM THE DATE OF ISSUE. DOH APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID.

SYSTEM DESIGN AND SPECIFICATIONS

T [**1200**] Gallons **SEPTIC TANK** MULTI-CHAMBERED/IN SERIES: [**Y**]
A [**0**] Gallons MULTI-CHAMBERED/IN SERIES: [**Y**]
N [**0**] GALLONS GREASE INTERCEPTOR CAPACITY
K [**0**] GALLONS DOSING TANK CAPACITY [**0**] GALLONS @ [**0**] DOSES PER 24 HRS # PUMPS [**0**]

D [**417**] SQUARE FEET PRIMARY DRAINFIELD SYSTEM
R [**0**] SQUARE FEET _____ SYSTEM
A TYPE SYSTEM: [**Y**] STANDARD [**N**] FILLED [**N**] MOUND [4 Trenches X 34.7'L]
I CONFIGURATION: [**Y**] TRENCH [**N**] BED [ ] _____
N
F LOCATION TO BENCHMARK: **Crown of Road 7.62'**
I
E ELEVATION OF PROPOSED SYSTEM SITE [**0.2**] [**INCHES**] [**BELOW**] BENCHMARK/REFERENCE POINT
L BOTTOM OF DRAINFIELD TO BE [**30.2**] [**INCHES**] [**BELOW**] BENCHMARK/REFERENCE POINT
D FILL REQUIRED: [**0.0**] INCHES EXCAVATION REQUIRED: [**0.0**] INCHES

OTHER REMARKS:

The top of the stubout pipe to be a minimum elv. of 10" BELOW CR 7.62'. The top of the drainfield pipe to be a minimum elv. of 20" BELOW CR 7.62'. The top of the septic tank to be a minimum elv.of 6" BELOW CR 7.62'. The drainfield aggregate must be a least 10 feet from the property line(s). Install an approved outlet filter device in the septic tank. Do not exceed 18" of cover on the top of the drainfield. "See the attached special conditions list."

SPECIFICATIONS BY: **EDGARDO MORALES, RS** TITLE: **Env. Specialist**

APPROVED BY: **Cross, Ray** TITLE: **Env. Supervisor** **Martin** CHD

DATE ISSUED: **6/24/98** EXPIRATION DATE: **12/24/99**

Lawton Chiles
Governor

FLORIDA DEPARTMENT OF HEALTH

James T. Howell, M.D., M.P.H.
Secretary

Martin County Health Department

SEPTIC TANK SYSTEM SPECIAL CONDITIONS LIST

APPLICATION NAME: Thomas Lucido **PERMIT NO. :** 43-SS-307

SUBDIVISION: _____

N O T E Special Condition(s) marked "X" are in effect.

X 1. Drainfield must be maintained under grass; ___and protected from vehicular traffic (i.e., traffic barriers).

___2. Operational test of dosing pump(s) and high water alarm (audible and visual) required prior to final construction approval.

X 3. Driveway / sidewalk elevation must be 9" higher than drainfield pipe elevation if they are within 5 feet of each-other.

X 4. Septic system must be 75' from surface water / wetlands /mean high water line.

___5. Excavate one foot beyond drainfield area to a depth of _____.

___6. In addition to item #5, 33% of unsuitable soils at depths greater than _____ _____ must be removed to a depth of slightly limited soils.

___7. If excavation is not required below the drainfield, the organic vegetation layer at the existing grade must be removed and slightly limited fill placed between the existing grade and the bottom of the drainfield.

___8. Septic tank abandonment notices from the Septic Tank Contractor must be received by this office prior to final construction approval.

___9. The attached well abandonment form must be completed by a certified well driller and and submitted to this office prior to the initial building construction or system inspection

___10. The mound area must be sodded prior to the request for final grade inspection.

X 11. Any future ponds or surface water created onsite must be greater than 75' from septic system(s).

X 12. The available area for septic installation must to be evenly filled and leveled.

___13. $____ re-inspection fee is required if the well is not installed at time of initial onsite sewage disposal system inspection.

X SEE REVERSE SIDE FOR ADDITIONAL REQUIREMENTS. Page 1 of 3

X 14. Septic system must be a minimum of 10 feet from drainage culverts or storm water drains and a 15 feet minimum from dry retention, dry detention or dry drainage ditches.

___15. Occupational approval will not be given until all requirements for public water system/ food-service/ institutional/ septic system are met. _____

___16. Septic tank/ dosing chamber/ grease trap must have (traffic lids with) ___ manhole cover (s) per tank extending to the surface.

___17. _____ to be dosed two / six times in a twenty-four hour period is required. A high water alarm that gives audible and visual signals is required. If two drainfields are used, each field must be connected to an individual pump and alternately dose.

___18. Two pumps are required to alternately dose into two separate fields. Separate drainfields must be a minimum of 10 feet apart.

X 19. If rainwater from the building roof drains onto the drainfield available area, gutters are required in the area of drainfield. Down-spouts must be diverted from the drainfield area.

X 20. Irrigation lines must be separated from the drainfield by ten feet unless an approved backflow prevention device is properly installed.

X 21. Potable water lines, whether connected to an on-site well or to a utility meter, must be a minimum of ten feet from drainfields or sealed with a water proof sealant within a sleeve of similar pipe to a distance of ten feet from the nearest portion of the drainfield. In no case can the sleeved line be located within 24 inches of the drainfield or at an elevation lower than the bottom of the drainfield.

X 22. All wells installed onsite must be 25' from the building foundation and meet all other setback installation requirements.

X 23. Applicant is responsible for replacing excavated soils with a good grade of soil suitable for drainfield installation.

X 24. If the building stubout is placed more than 20ft. from septic tank or drainfield, the stubout elevation must be higher than the permitted elevation to achieve gravity flow. This must have prior approval from the health unit.

X 25. If fill is required, contact Martin County Building Division for requirements.

X 26. Inspection results will be posted on the building permit. A copy of the construction approval is available upon request.

X 27. A septic tank outlet filter is required on all septic tanks.

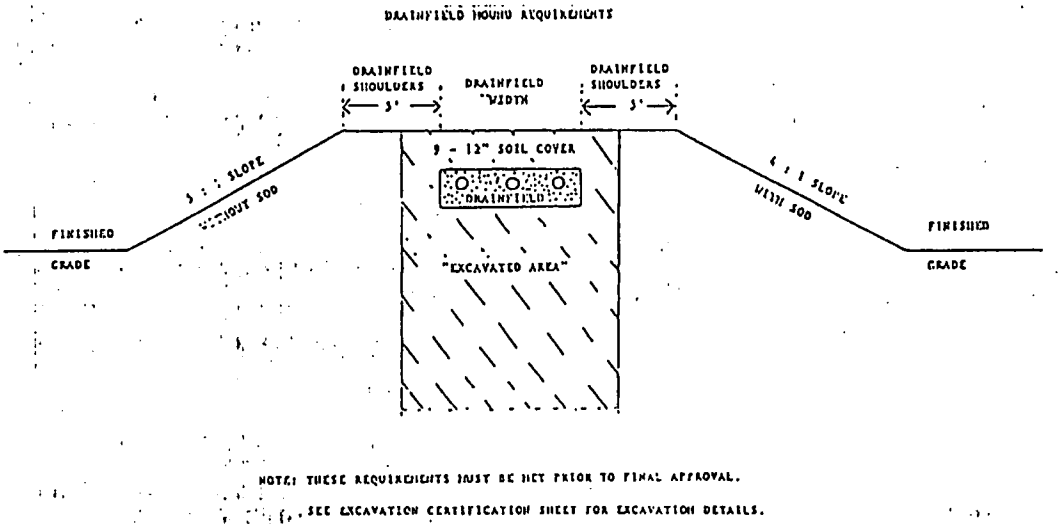
X 28. If any information on this permit changes, an amended application is required to be filed immediately.

X 28. Any alteration of the information or conditions of this permit found to be in non compliance with 64E-6, Florida Administrative Code, will be sufficient cause for revocation of this permit.

___29. The engineer of record must certify that the installed system complies with the approved design and installation requirements.

___30. Prior to final construction approval, the property owner must apply for an annual operating permit and pay the $_____ annual permit fee (For ___Indust./Manuf. ___Aerobic system(s).

___31. If a mound drainfield is proposed, see following sketch of additional requirements (No retaining walls are allowed within the drainfield shoulder or slope areas of a mound system).



NOTE: THESE REQUIREMENTS MUST BE MET PRIOR TO FINAL APPROVAL.

SEE EXCAVATION CERTIFICATION SHEET FOR EXCAVATION DETAILS.

___32. Other:_____

_____

_____

_____

NOTE - $25.00 RE-INSPECTION FEE WILL BE CHARGED IF REQUIREMENTS ARE NOT MET DURING INSPECTION.

Questions concerning special conditions can be answered by calling Edgar Mendez at (561) 221-4090

STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE DISPOSAL SYSTEM
SITE EVALUATION AND SYSTEM SPECS.
AUTHORITY, CHAPTER 381, F.S. & CHAPTER 100-6, F.A.C.

(A)

PERMIT # _____

APPLICANT: Thomas Lucido AGENT: SJB

LOT: 4 BLOCK: _____ SUBDIVISION: Ridgeland

PROPERTY ID #: Sabal Court/Sandalwood Drive [Section/Township/Range/Parcel No. or Tax ID Number]

==========

TO BE COMPLETED BY ENGINEER, HEALTH UNIT EMPLOYEE, OR OTHER QUALIFIED PERSON. ENGINEER'S MUST PROVIDE REGISTRATION NUMBER AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

==========

PROPERTY SIZE CONFORMS TO SITE PLAN: [X] YES [ ] NO NET USABLE AREA AVAILABLE: 0.42 ACRES
TOTAL ESTIMATED SEWAGE FLOW: 500 GALLONS PER DAY [RESIDENCES-TABLE 1 / OTHER-TABLE 2]
AUTHORIZED SEWAGE FLOW: 1050 GALLONS PER DAY [~~1500 GPD/ACRE OR~~ 2500 GPD/ACRE]
UNOBSTRUCTED AREA AVAILABLE: 1200 SQFT UNOBSTRUCTED AREA REQUIRED: Trench 833 SQFT

BENCHMARK/REFERENCE POINT LOCATION: crown of Road 7.62'
ELEVATION OF PROPOSED SYSTEM SITE IS 0.24 [INCHES/~~FT~~] [~~ABOVE~~/BELOW] BENCHMARK/REFERENCE POINT

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES:
SURFACE WATER: N/A FT ~~DITCHES~~/SWALES: 12 FT NORMALLY WET? [ ] YES [X] NO
WELLS: PUBLIC: N/A FT LIMITED USE: N/A FT PRIVATE: ____ FT NON-POTABLE: N/A FT
BUILDING FOUNDATIONS: 5 FT PROPERTY LINES: 10 FT POTABLE WATER LINES: 28 FT

SITE SUBJECT TO FREQUENT FLOODING: [ ] YES [X] NO 10 YEAR FLOODING? [ ] YES [X] NO
10 YEAR FLOOD ELEVATION FOR SITE: _____ FT MSL/NGVD SITE ELEVATION: 7.6 FT MSL/NGVD

SOIL PROFILE INFORMATION SITE 1

Munsell #/Color	Texture	Depth
10yR 7/1 light Gray	Sand	0 to 48
10yR 7/8 yellow	Sand	48 to 72
		to
		to
		to
		to
		to
		to
		to

USDA SOIL SERIES: Pasta Sand #6

SOIL PROFILE INFORMATION SITE 2

Munsell #/Color	Texture	Depth
10yR 7/2 light Gray	Sand	0 to 48
10yR 7/8 yellow	Sand	48 to 72
		to
		to
		to
		to
		to
		to
		to

USDA SOIL SERIES: Pasta Sand #6

OBSERVED WATER TABLE: Not OBSERVED INCHES [ABOVE / BELOW] EXISTING GRADE. TYPE: [PERCHED / APPARENT]
ESTIMATED WET SEASON WATER TABLE ELEVATION: 54 INCHES [~~ABOVE~~ / BELOW] EXISTING GRADE.
HIGH WATER TABLE VEGETATION: [ ] YES [X] NO MOTTLING: [ ] YES [X] NO DEPTH: _____ INCHES

SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: Sand 1.20 DEPTH OF EXCAVATION: 0 INCHES
DRAINFIELD CONFIGURATION: [X] TRENCH [ ] BED [ ] OTHER (SPECIFY) _____
REMARKS/ADDITIONAL CRITERIA: _____

SITE EVALUATED BY: _____ DATE: 6-19-98

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS & Chapter 10D-6, FAC

RECEIVED (A)
JUN 10 1998
Martin County Public Health Unit

PERMIT # 6.16.98
DATE PAID 6.16.98
FEE PAID $ 95
RECEIPT # 22976
No Well Plan

PREPARED BY: STEPHEN J. BROWN, INC.
290 FLORIDA STREET
STUART, FL. 34994 407-288-7176

APPLICATION FOR:
[ ] New System [ ] Existing System [ ] Holding Tank [ ] Temporary/Experimental
[ ] Repair [ ] Abandonment [ ] Other(Specify)

APPLICANT: Thomas Lucido TELEPHONE: 288-7176

AGENT: S.J.B. INC.

MAILING ADDRESS: 290 Fla. St., Stuart

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 10D-6, FLORIDA ADMINISTRATIVE CODE.

PROPERTY INFORMATION [IF LOT IS NOT IN A RECORDED SUBDIVISION, ATTACH LEGAL DESCRIPTION OR DEED]

LOT: 4 BLOCK: N/A SUBDIVISION: Ridgeland DATE OF SUBDIVISION: 10/16/79

PROPERTY ID #: [Section/Township/Range/Parcel No.] ZONING:

PROPERTY SIZE: .42 ACRES [Sqft/43560] PROPERTY WATER SUPPLY: [ ] PRIVATE [X] PUBLIC

PROPERTY STREET ADDRESS: Sabal Court, Sewell Point

DIRECTIONS TO PROPERTY: See attached map

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	# Persons Served	Business Activity For Commercial Only
1	Single family	3	4000		
2					
3					
4					

[Y] Garbage Grinders/Disposals
[N] Ultra-low Volume Flush Toilets
[Y] Spas/Hot Tubs
[N] Other (Specify)
[N] Floor/Equipment Drains

APPLICANT'S SIGNATURE: Stephen J Brown DATE: 06/08/98

HRS-H Form 4015, Mar 92 (Obsoletes previous editions which may not be used)
Stock Number: 5744-001-4015-1)

APPLICANT'S NAME: Thomas Lucido

LEGAL DESCRIPTION: lot 4, Ridgeland

PROPOSED SEPTIC SYSTEM SITE INFORMATION

CIRCLE ONE ANSWER FOR EACH QUESTION (FOR ITEMS 1 -17 BELOW).
N/A MEANS THAT THE QUESTION IS NOT APPLICABLE

1. Is there a septic system within 75 feet of the proposed private well? — Yes No (N/A)
2. Is there a potable private well within 75 feet of the available area for the proposed septic system? — Yes (No)
3. Is there a non-potable well within 50 feet of the available area for the proposed septic system? — Yes (No)
4. Is there a proposed well within 25 feet of the building foundation? — Yes (No)
5. Is there a public well that serves less than 25 people or less than 15 homes or businesses within 100 feet of the proposed septic system? — Yes (No)
6. Is there a public well that serves more than 25 people or more than 15 homes or businesses within 200 feet of the proposed septic system? — Yes (No)
7. Is there a gravity sewer line or lift station within 50 feet of the proposed lot? — Yes (No)
8. Is there a lake, stream, wetland, or surface water within 75 feet of the available area for the proposed septic system? — Yes (No)
9. Is there a proposed or existing public drinking water line within 10 feet of the proposed septic system? — Yes (No)
10. Is there a storm water retention area or drainage easement within 15 feet of the proposed septic system? — Yes (No)
11. Is the proposed septic system in an area proposed for paving or vehicular traffic? — Yes (No)
12. Are all private wells, septic systems and surface water on adjacent or contiguous land within 75 feet of the applicant's lot shown on the site plan? — (Yes) No N/A
13. Are all public wells within 200 feet of the applicant's lot shown on the site plan? — Yes No (N/A)
14. Does the site plan include a plat of the lot or total site ownership drawn to scale, boundaries with dimensions, locations of building or residences, swimming pools, recorded easements, proposed or existing septic systems, any proposed or existing wells, public water lines, paved areas or driveways, and surface waters such as lakes, ponds, streams, canals, or wetlands? — (Yes) No
15. Does the site plan show the general slope of the property, recorded easements from the recorded plat, filled areas and drainage features and surface waters such as lakes, ponds, streams, canals, or wetlands? — (Yes) No
16. Are the natural grade elevation in the area of the septic system and the benchmark shown on the site plan? — (Yes) No
17. Is the public water line location from the water meter to the house shown on the site plan? — (Yes) No N/A
18. There is 1200 square feet of available, unobstructed, contiguous land to install the septic system. This area excludes interferences. Shade this available area on the site plan.

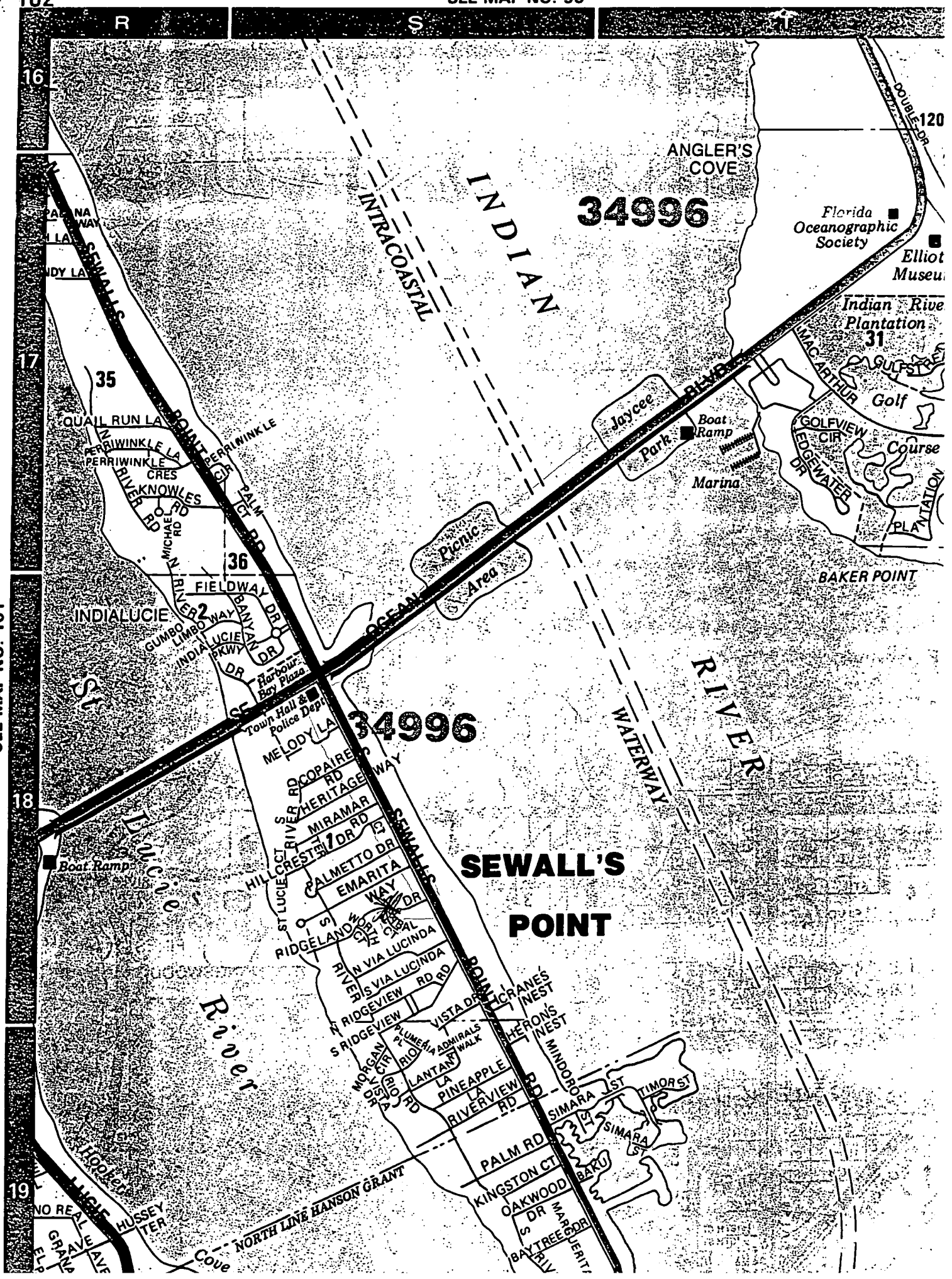
SITE ELEVATIONS

1. Crown of road elevation 7.02 NGVD. Show location on the site plan. If the road is not paved, benchmark elevation 7.02 NGVD. Show location on site plan.
2. Natural grade elevation in the area of the proposed septic system 7.0 NGVD. Show location on site plan.
3. Is the building location in a flood hazard area "A" or "V" as identified on F.E.M.A. maps? (Yes) or No If yes, what is the minimum required flood hazard floor elevation of the building? 8.0 NGVD.

NOTE: Please locate the reference point or benchmark within 200 feet of the proposed septic system.

NOTE: MUST BE CERTIFIED BY A FLORIDA REGISTERED SURVEYOR OR ENGINEER.

CERTIFIED BY: Stephen J. Brown
FLORIDA PROFESSIONAL NO.: 4049
DATE: 01/08/98 JOB NO.: 805-32-01


102
SEE MAP NO. 95
R
S
T
16
17
18
19
SEE MAP NO. 101
ANGLER'S COVE
34996
INTRACOASTAL
INDIAN
RIVER
WATERWAY
OCEAN
Florida Oceanographic Society
Elliot Museu
Indian Rive Plantation
31
MAC ARTHUR
Golf
Course
GOLFVIEW CIR
EDGEWATER DR
PLANTATION
Jaycee Park
Boat Ramp
Marina
Picnic Area
BAKER POINT
35
QUAIL RUN LA
PERRIWINKLE LA
PERRIWINKLE CRES
PERRIWINKLE CIR
POINT
PALM CT
RD
KNOWLES RD
RIVER RD
MICHAEL RD
36
FIELDWAY
INDIALUCIE
GUMBO LIMBO WAY
INDIALUCIE PKWY
BANYAN DR
DR
Harbour Bay Plaza
Town Hall & Police Dept
SEWALL'S POINT
MELODY LA
COPAIRE RD
HERITAGE WAY
MIRAMAR
DR
PALMETTO DR
EMARITA WAY
CT
RIDGELAND DR
HILLCREST DR
ST LUCIE CT
N VIA LUCINDA
S VIA LUCINDA
RD
N RIDGEVIEW
S RIDGEVIEW
VISTA DR
CRANES INEST
HERONS INEST
MINDORO ST
TIMOR ST
SIMARA ST
PLUMERIA
ADMIRALS WALK
MORGAN CIR
RIO
LANTANA
PINEAPPLE
LA RIVERVIEW RD
PALM RD
KINGSTON CT
OAKWOOD DR
MARGUERITE
BAYTREE DR
BARU
St. Lucie River
Boat Ramp
HUSSEY TER
NO REAL AVE
NORTH LINE HANSON GRANT
Cove
DOUBLE DR
120

WARNER, FOX, WACKEEN, DUNGEY SEELEY, SWEET & WRIGHT, L.L.P.

DEBORAH B. BEARD
RICHARD J. DUNGEY*
M. LANNING FOX*
GARY L. SWEET
W. THOMAS WACKEEN**
THOMAS E. WARNER**
TIM B. WRIGHT

AARON A. POOSANER
ROBERT L. SEELEY
OF COUNSEL

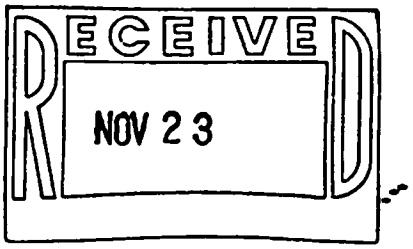
1100 S. FEDERAL HIGHWAY
P.O. DRAWER 6
STUART, FLORIDA 34995-0006
(561) 287-4444
TELEFAX (561) 220-1489

ANTHONY L. CONTICELLO
LOUIS E. LOZEAU, JR.
MICHAEL J. McCLUSKEY
WILLIAM R. PONSOLDT, JR.
***BETH TEARDO PRINZ
SUSANN B. WARD

JUPITER (561) 744-6499

* BOARD CERTIFIED REAL ESTATE LAWYER
** BOARD CERTIFIED CIVIL TRIAL LAWYER
***BOARD CERTIFIED WILLS, TRUSTS & ESTATES LAWYER

November 23, 1999



Mr. Edwin B. Arnold, Building Official
Town of Sewall's Point
1 South Sewall's Point Road
Sewall's Point, Florida 34996

Via Facsimile No. 220-4765

Re: Town of Sewall's Point; New Ordinances

Dear Ed:

This letter is a follow-up to our telephone conversation this week regarding the ordinances the Town Commission directed me to draft at the November, 1999 meeting. The Town Commission has instructed me to draft an ordinance permitting walls, fences and other enclosures up to seven feet (7') high in the set backs behind the front line of the building and up to five feet (5') in front of the front line of the building. The Town Commission also instructed me to draft an ordinance permitting building permits to be extended for up to six (6) months for a payment of ten percent (10%) of the original building permit fee, per month.

It is my opinion you may begin issuing Certificates of Occupancy and extending building permits in accordance with these new proposed ordinances, provided that the Certificate of Occupancy and building permit extension are conditioned on passage of the new ordinances.

Please call me if you need anything further.

Sincerely yours,

Tim B. Wright

TBW/mcf
cc: Commissioner Cyrus Kissling
Mrs. Joan H. Barrow
Mr. Joseph C. Dorsky

RE: LUCIDO - 2 SABAL COURT
PN 4503 (ORIGINAL); PN 4750 (RENEWAL)

1 YEAR RENEWAL (CALC. ATT.)	$ 2,188.00
1 MONTH (11/17/99 - 12/16/99)	218.00
ADD'L. PERMIT FEE (ACT. CONST. COST)	855.68
TOTAL PERMIT FEES DUE	$ 1,073.68

READ, UNDERSTOOD & AGREED: 11/24/99

Lucido

OWNER'S AFFIDAVIT OF BUILDING COSTS

STATE OF FLORIDA
COUNTY OF MARTIN

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

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

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

3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is $ ~~362,000~~ # 343,000 (less separate permits. (pool & wall.)
11/24/99.

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

Affiant

Property street address:
2 Sabal Ct.
SEWALLS Point, FL.

Sworn to and subscribed
before me this 18th day of
November, 1999.

Shirley Lyders
Notary Public SHIRLEY LYDERS
STATE OF FLORIDA AT LARGE
My Commission Expires:

(NOTARY SEAL)

OFFICIAL NOTARY SEAL
SHIRLEY LYDERS
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC539724
MY COMMISSION EXP. MAR. 31,2000

1/24/99 CVCI DO

TOTAL COST (AFFID.) 362,000.
- POOL (PN 4655) 16,000.
346,000.
- WALL (PN 4503) 3,000.
$ 343,000.

TOWN OF SEWALL'S POINT

MEMORANDUM

To: Cyrus Kissling, Building Commissioner
Timothy Wright, Town Attorney

FROM: Edwin B. Arnold, Building Official

Cc: Thomas Lucido, Owner/Builder

Date: November 26, 1999

RE: [redacted]
Permit Number 4750

The original building permit for the referenced single family residence (BP 4503) expired on November 16, 1999. Construction is substantially complete and a request for a final inspection has been received. I understand that in lieu of mandatory annual renewals, monthly permit renewals (up to six months) will be allowed under proposed ordinance revisions pending before the Town Commission.

In accordance Mr. Wright's opinion letter of November 24, 1999, I have renewed the Building Permit for a period of one (1) month from the date of expiration, upon payment by the owner/builder of a renewal fee of ten (10) per cent of the original construction (Building, A/C, Electrical, and Plumbing) permit fees, conditioned upon passage of the new ordinance within ninety (90) days.

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

TOWN OF SEWALL'S POINT

MEMORANDUM

To: Cyrus Kissling, Building Commissioner
Timothy Wright, Town Attorney

From: Edwin B. Arnold, Building Official

Cc: Thomas Lucido, Owner/Builder

Date: November 26, 1999

Re: [redacted]
Permit Number 4750

The final survey submitted on the referenced project indicates an apparent (undimensioned) encroachment of the pool deck into the side and rear set back areas of the property. Having only received the survey the prior afternoon, I pointed this out to Mr. Lucido at our meeting last Wednesday when the permit was renewed, and he indicated that he had obtained an opinion (this would certainly have been prior to my appointment) that this was permissible - apparently under a theory that brick pavers bedded in sand were not "permanent". I deferred further comment pending the site inspection scheduled for that date and review of the file and applicable ordinances. The results of my inspection, review, research and analysis are as follows:

1. The original permit was issued for the building only; the courtyard, pool and deck were neither reviewed or permitted at that time.
2. Upon application, a separate fee permit was issued by me for construction of a courtyard area with surrounding walls. A final inspection of this construction was performed at the time of the C.O. inspection on Wednesday, and it is in compliance with permit documents and set back requirements.
3. Upon application, a separate fee permit was issued by me for construction of a pool located in the southeast portion of the site. The pool was located within the set backs as required; the pool contractor specifically excluded the deck from his application and I noted that a separate permit would be required. It should be noted that the pool was sited sufficiently within the setbacks to allow a perimeter deck.

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

4. The pool permit is still open; a final inspection has not been requested by the pool contractor.
5. Although the pool deck has been completed, with the encroachments previously noted, no application for the required pool deck permit has been submitted.

Our Zoning Ordinance (Appendix B, Section XI, E.1) specifically provides that:

"swimming pools, poolside aprons, and terraces ... shall be subject to building set back line regulations."

This is consistent with, and reinforced by, the definition of a structure as:

"(a)nything constructed or erected, the use of which requires permanent location on the land ... (A)ny open patio ... or an apron adjacent to a swimming pool shall be considered a structure for the purpose of this Ordinance and for the purpose of determining setback lines."

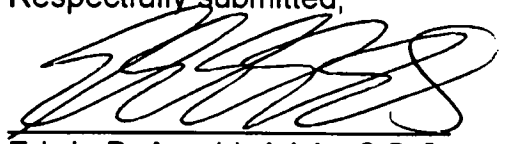
It is permanence rather than materials of construction which determines when structures must comply with set back requirements. Here, the pool deck is clearly intended to be permanent, a determination reflected in my requirement that a permit be issued for construction. Supporting this position, we find temporary structures defined as:

"(a)nything constructed or erected, the design of which or intended use of which, is other than long term, indefinite life design or use."

Addressing Mr. Lucido's assertion of prior verbal authorization, I can only note that the Ordinance is clear on its face and my position on this issue has been consistent. Further, at no time did any submittal indicate an intent to act upon any interpretation of the set back requirements other than in full compliance, and the work was completed without obtaining the required permit.

Field inspection of the pool deck as installed shows it to be of substantial construction, clearly intended to be "permanent" within the sense of both the Ordinances and ordinary usage. As such, it is my position as Building Official that it must be permitted (as previously requested) and included within the total scope of construction work; all set back requirements must be complied with prior to final inspection. This is a zoning issue; should a contrary position be taken, I shall of course defer to the Commission and legal opinion of counsel.

Respectfully submitted,



Edwin B. Arnold, A.I.A., C.B.O.

INSPECTION REPORT
AND
NOTICE OF NONCOMPLIANCE

INSPECTION DATE 12/1/99 | **PAGE** 1 **OF** 1

Owner's Name TOM LUCIDO | Address | City | State | Zip

Contractor's Name COMMERCIAL CONST. | Address 440 E OSCEOLA | City STUART | State FL | Zip

Job Location 25 ABAL COURT | City/County

BUILDING PERMIT NO'S. 4750 (BLK)

INSPECTION TYPE
☐ FOOTING ☐ ROUGH ☒ FINAL
☐ FOUNDATION ☐ BLDG. CONST. ☐ ENERGY ☐ HVAC ☐ ELEC. ☐ PLUMB.

AN INSPECTION OF THE ABOVE HAS DISCLOSED THE FOLLOWING VIOLATION(S)

ORDER NO.	CODE SELECTION	FINDINGS AND REQUIREMENTS
1	ORD. APP B, XIII, 5, (m)	FINAL AS BUILT SURVEY MUST BE CERTIFIED TO TOWN
2	ORD CHAP 6 - FLOOD	REV & RESUBMIT ELEV. CERT. W/CURRENT FIRM INDEX DATE (B.4)
3	SFBC 1506.1	PROVIDED REQUIRED GARAGE VENTILATION
4	NFPA 101, 21-5.2.2.4	BALCONY GUARDRAIL REQ. 42" HIGH
	SFBC 307.5	PARTIAL (30 DAY) CERTIFICATE OF OCCUPANCY – NO STORAGE OF MOTOR VEHICLES IN GARAGE – NO USE OF BALCONIES EXPIRATION 12/31/99 IF ITEMS 1-4 NOT COMPLETE.
		NOTE! • FENCE NOT PERMITTED AS REQUIRED. APPLICATION TO BE MADE FOR "AFTER FACT" PERMIT. • POOL DECK NOT PERMITTED AS REQUIRED. APPLICATION TO BE MADE FOR "AFTER FACT" PERMIT. SETBACK COMPLIANCE REQUIRED (SURVEY INDICATES ENCROACHMENT INTO SIDE & REAR SETBACKS)

CONTRACTORS: PLEASE LEAVE THIS LIST ON JOB SITE

NOTICE OF NONCOMPLIANCE.

All cited violations shall be ordered within 30 days after written notification, unless an extension of time is granted. Each day that the violation continues after notice shall constitute offense and is subject to remedies and penalties by the authority having jurisdiction.

READ, UNDERSTOOD & AGREED:

Violations Explained to Lucido Lee Chabot | Compliance Date 12/31/99

Certified Inspector BLDG. OFFICIAL | Telephone 287-2455

Insp/notice4/97

ELEVATION CERTIFICATE

O.M.B. No 3067-0077
Expires May 31, 1993

Job# 805-32-01

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

ATTENTION: Use of this certificate does not provide a waiver of the flood insurance purchase requirement. This form is used only to provide elevation information necessary to ensure compliance with applicable community floodplain management ordinances, to determine the proper insurance premium rate, and/or to support a request for a Letter of Map Amendment or Revision (LOMA or LOMR).
Instructions for completing this form can be found on the following pages.

SECTION A PROPERTY INFORMATION

	FOR INSURANCE COMPANY USE
BUILDING OWNER'S NAME: TOM LUCIDO	POLICY NUMBER
STREET ADDRESS (Including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NUMBER: 2 SABLE COURT	COMPANY NAIC NUMBER
OTHER DESCRIPTION (Lot and Block Numbers, etc.): LOT 4, RIDGELAND	
CITY: SEWALL'S POINT — STATE: FLA. — ZIP CODE:	

SECTION B FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

Provide the following from the proper FIRM (See Instructions):

1. COMMUNITY NUMBER	2. PANEL NUMBER	3. SUFFIX	4. DATE OF FIRM INDEX	5. FIRM ZONE	6. BASE FLOOD ELEVATION (in AO Zones, use depth)
120164	0002	D	6/16/92	A-10	8.00

7. Indicate the elevation datum system used on the FIRM for Base Flood Elevations (BFE): ☒ NGVD '29 ☐ Other (describe on back)
8. For Zones A or V, where no BFE is provided on the FIRM, and the community has established a BFE for this building site, indicate the community's BFE: ☐☐☐☐☐.☐ feet NGVD (or other FIRM datum–see Section B, Item 7).

SECTION C BUILDING ELEVATION INFORMATION

1. Using the Elevation Certificate Instructions, indicate the diagram number from the diagrams found on Pages 5 and 6 that best describes the subject building's reference level 1.
2(a). FIRM Zones A1-A30, AE, AH, and A (with BFE). The top of the reference level floor from the selected diagram is at an elevation of ☐☐☐9.5 feet NGVD (or other FIRM datum–see Section B, Item 7).
(b). FIRM Zones V1-V30, VE, and V (with BFE). The bottom of the lowest horizontal structural member of the reference level from the selected diagram, is at an elevation of ☐☐☐☐☐.☐ feet NGVD (or other FIRM datum–see Section B, Item 7).
(c). FIRM Zone A (without BFE). The floor used as the reference level from the selected diagram is ☐☐.☐ feet above ☐ or below ☐ (check one) the highest grade adjacent to the building.
(d). FIRM Zone AO. The floor used as the reference level from the selected diagram is ☐☐.☐ feet above ☐ or below ☐ (check one) the highest grade adjacent to the building. If no flood depth number is available, is the building's lowest floor (reference level) elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown
3. Indicate the elevation datum system used in determining the above reference level elevations: ☐ NGVD '29 ☐ Other (describe under Comments on Page 2). *(NOTE: If the elevation datum used in measuring the elevations is different than that used on the FIRM [see Section B, Item 7], then convert the elevations to the datum system used on the FIRM and show the conversion equation under Comments on Page 2.)*
4. Elevation reference mark used appears on FIRM: ☐ Yes ☐ No (See Instructions on Page 4)
5. The reference level elevation is based on: ☒ actual construction ☐ construction drawings
(NOTE: Use of construction drawings is only valid if the building does not yet have the reference level floor in place, in which case this certificate will only be valid for the building during the course of construction. A post-construction Elevation Certificate will be required once construction is complete.)
6. The elevation of the lowest grade immediately adjacent to the building is: ☐☐☐9.0 feet NGVD (or other FIRM datum-see Section B, Item 7).

SECTION D COMMUNITY INFORMATION

1. If the community official responsible for verifying building elevations specifies that the reference level indicated in Section C, Item 1 is not the "lowest floor" as defined in the community's floodplain management ordinance, the elevation of the building's "lowest floor" as defined by the ordinance is: ☐☐☐☐☐.☐ feet NGVD (or other FIRM datum–see Section B, Item 7).
2. Date of the start of construction or substantial improvement _____

SECTION E CERTIFICATION

This certification is to be signed by a land surveyor, engineer, or architect who is authorized by state or local law to certify elevation information when the elevation information for Zones A1–A30, AE, AH, A (with BFE), V1–V30, VE, and V (with BFE) is required. Community officials who are authorized by local law or ordinance to provide floodplain management information, may also sign the certification. In the case of Zones AO and A (without a FEMA or community issued BFE), a building official, a property owner, or an owner's representative may also sign the certification.

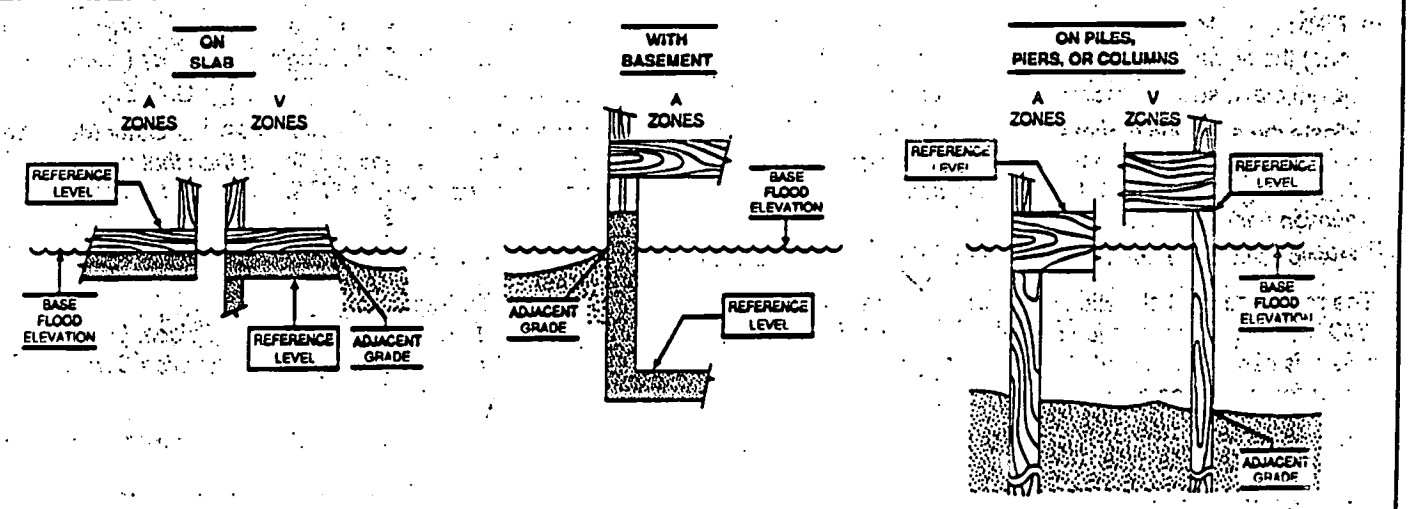
Reference level diagrams 6, 7 and 8 - Distinguishing Features–If the certifier is unable to certify to breakaway/non-breakaway wall, enclosure size, location of servicing equipment, area use, wall openings, or unfinished area Feature(s), then list the Feature(s) not included in the certification under Comments below. The diagram number, Section C, Item 1, must still be entered.

I certify that the information in Sections B and C on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Stephen J. Brown		4049	
CERTIFIER'S NAME		LICENSE NUMBER (or Affix Seal)	
Land Surveyor		Stephen J. Brown, Inc.	
TITLE		COMPANY NAME	
619 East 5th Street	Stuart	Florida	34994
ADDRESS	CITY	STATE	ZIP
SIGNATURE	7/1/99 DATE	(561) 288-7176 PHONE	

Copies should be made of this Certificate for: 1) community official, 2) insurance agent/company, and 3) building owner.

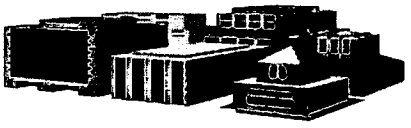
COMMENTS:



The diagrams above illustrate the points at which the elevations should be measured in A Zones and V Zones.

Elevations for all A Zones should be measured at the top of the reference level floor.

Elevations for all V Zones should be measured at the bottom of the lowest horizontal structural member.



Herrick / Wingler & Associates
2431 S. E. Dixie Highway
Stuart, Florida 34997
Phone: 561 / 220-5967 Fax: 220-5968

March 6, 1999

Engineering Change Order Number 1

TO: Town of Sewall's Point Building Department

REF: Lucido Residence, Lot 4, Ridgeland Sub-Division

SUBJECT: Building size reduced to cure survey error.

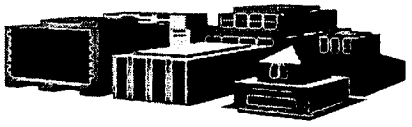
CHANGE ORDER:

The attached drawings show that the structure has been reduced in size specifically at the front porch and second floor bedroom No. 2 by 16" to place the building within the proper building set-back area. This change requires the removal of the existing 12" CMU stem-wall along the front of the front porch and the construction of a 12" wide by 32" high reinforced grade beam. (See structural details) The non-bearing interior walls relative to bedrooms 2 and 3 have been modified along with the associated closets to distribute the reduction in size between the two bedrooms. This change order does not change any vertical dimensions. This change reduces the second floor air-conditioned square footage by 24 square feet, and the first floor front porch exterior square footage by 24 square feet. The first floor air-conditioned square footage has not changed.

NOTE: The new grade beam and concrete slab should not be poured until the surveyor certifies the forming of the grade beam and all other parts of the slab are within the building set-back area.

Respectfully submitted by Paul A. Wingler, P.E.

Paul A. Wingler



Herrick / Wingler & Associates
2431 S. E. Dixie Highway
Stuart, Florida 34997
Phone: 561 / 220-5967 Fax: 220-5968

March 6, 1999

Engineering Change Order Number 2

TO: Town of Sewall's Point Building Department

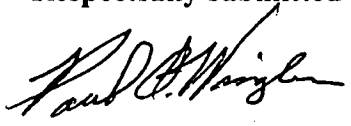
REF: Lucido Residence, Lot 4, Ridgeland Sub-Division

SUBJECT: PVC sanitary drain pipes for bedroom #3 bath embedded in 8" CMU wall.

CHANGE ORDER:

Replace 9 lineal feet of CMU Bond beam with 8"x16" cast-in-place concrete tie beam with 4 #5 steel reinforcing bars to accommodate 2 PVC sanitary drain pipes, (a 3" Dia. and a 2" Dia. Pipe) passing through the tie beam. See drawing sheet No. 4 for specific location. Please note that Header Number H-15 will not be a Cast-Crete header and is replaced be this cast-in-place tie beam.

Respectfully submitted by Paul A. Wingler, P.E.



Department of Community Affairs SN: 5050

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

FORM 600A-93 Residential Whole Building Performance Method A SOUTH

PROJECT NAME: | BUILDER: FLORIDA COUNTRY HOMES

AND ADDRESS: | PERMITTING OFFICE: | CLIMATE ZONE: 7|_| 8|_| 9|_|

OWNER: LUCIDO | PERMIT NO. | JURISDICTION NO.

		CK
1. New construction or addition	1. New Construction	____
2. Single family detached or Multifamily attached	2. Single-Family	____
3. If Multifamily-No. of units	3. 0	____
4. If Multifamily, is this a worst case (yes/no)	4.	____
5. Conditioned floor area (sq.ft.)	5. 3934.00	____
6. Predominant eave overhang (ft.)	6. 3.00	____
7. Porch overhang length (ft.)	7. 11.00	____
8. Glass area and type:	Single Pane / Double Pane	
a. Clear Glass	8a. 0.0sqft / 0.00sqft	____
b. Tint, film or solar screen	8b. 737.9sqft / 0.00sqft	____
9. Floor type and insulation:		
a. Slab on grade (R-value, perimeter)	9a. R= 0.00 , 219.00 ft	____
b. Wood, raised (R-value, area)	9b. R=30.00 , 698.00 sqft	____
10. Net Wall type area and insulation:		
a. Exterior: 1. Concrete (Insulation R-value)	10a-1 R= 4.20, 1362.00sqft	____
a. Exterior: 2. Wood frame (Insulation R-value)	10a-2 R=19.00, 1482.00sqft	____
b. Adjacent: 2. Wood frame (Insulation R-value)	10b-2 R=11.00, 357.00sqft	____
11. Ceiling type area and insulation:		
a. Under attic (Insulation R-value)	11a. R=30.00 , 2539.00sqft	____
12. Air distribution systems		
a. Ducts (Insulation + Location)	12a. R= 6.00 , uncond	____
13. Cooling system	13. Type: Central A/C	____
	SEER: 10.00	____
13. Cooling system	13. Type: Central A/C	____
	SEER: 10.00	____
14. Heating System:	14. Type: Strip Heat	____
	COP: 1.00	____
15. Hot water system:	15. Type: Electric	____
	EF: 0.94	____
16. Hot Water Credits: (HR-Heat Recovery, DHP-Dedicated Heat Pump)	16.	____
17. Infiltration practice: 1, 2 or 3	17. 2	____
18. HVAC Credits (CF-Ceiling Fan, CV-Cross vent, HF-Whole house fan, RB-Attic radiant barrier, MZ-Multizone)	18. MZ	____
19. EPI (must not exceed 100 points)	19. 99.55	____
a. Total As-Built points	19a. 64392.58	____
b. Total Base points	19b. 64683.01	____

I Hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY: Tammy Williams

DATE: 6-30-98

I hereby certify that this building is in compliance with the Florida Energy Code.

OWNER/AGENT: _____

DATE: _____

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance in accordance with Section 553.908 F.S.

BU0000840

BUILDING OFFICIAL: Bob Bott

DATE: 7-8-98

Department of Community Affairs SN: 5050

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

FORM 600A-93 Residential Whole Building Performance Method A SOUTH

PROJECT NAME: | BUILDER: FLORIDA COUNTRY HOMES

AND ADDRESS: | PERMITTING OFFICE: | CLIMATE ZONE: 7|_| 8|_| 9|_|

OWNER: LUCIDO | PERMIT NO. | JURISDICTION NO.

		CK
1. New construction or addition	1. New Construction	____
2. Single family detached or Multifamily attached	2. Single-Family	____
3. If Multifamily-No. of units	3. 0	____
4. If Multifamily, is this a worst case (yes/no)	4.	____
5. Conditioned floor area (sq.ft.)	5. 3934.00	____
6. Predominant eave overhang (ft.)	6. 3.00	____
7. Porch overhang length (ft.)	7. 11.00	____
8. Glass area and type:	Single Pane / Double Pane	
a. Clear Glass	8a. 0.0sqft / 0.00sqft	____
b. Tint, film or solar screen	8b. 737.9sqft / 0.00sqft	____
9. Floor type and insulation:		
a. Slab on grade (R-value, perimeter)	9a. R= 0.00 , 219.00 ft	____
b. Wood, raised (R-value, area)	9b. R=30.00 , 698.00 sqft	____
10. Net Wall type area and insulation:		
a. Exterior: 1. Concrete (Insulation R-value)	10a-1 R= 4.20, 1362.00sqft	____
a. Exterior: 2. Wood frame (Insulation R-value)	10a-2 R=19.00, 1482.00sqft	____
b. Adjacent: 2. Wood frame (Insulation R-value)	10b-2 R=11.00, 357.00sqft	____
11. Ceiling type area and insulation:		
a. Under attic (Insulation R-value)	11a. R=30.00 , 2539.00sqft	____
12. Air distribution systems		
a. Ducts (Insulation + Location)	12a. R= 6.00 , uncond	____
13. Cooling system	13. Type: Central A/C	____
	SEER: 10.00	____
13. Cooling system	13. Type: Central A/C	____
	SEER: 10.00	____
14. Heating System:	14. Type: Strip Heat	____
	COP: 1.00	____
15. Hot water system:	15. Type: Electric	____
	EF: 0.94	____
16. Hot Water Credits: (HR-Heat Recovery, DHP-Dedicated Heat Pump)	16.	____
17. Infiltration practice: 1, 2 or 3	17. 2	____
18. HVAC Credits (CF-Ceiling Fan, CV-Cross vent, HF-Whole house fan, RB-Attic radiant barrier, MZ-Multizone)	18. MZ	____
19. EPI (must not exceed 100 points)	19. 99.55	____
a. Total As-Built points	19a. 64392.58	____
b. Total Base points	19b. 64683.01	____

I Hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY:_____

DATE:_____

I hereby certify that this building is in compliance with the Florida Energy Code.

OWNER/AGENT:_____

DATE:_____

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance in accordance with Section 553.908 F.S.

BUILDING OFFICIAL:_____

DATE:

SUMMER CALCULATIONS

=== BASE ===					=== AS-BUILT ===					
GLASS										
ORIEN	AREA	× BSPM	= POINTS		TYPE	SC	ORIEN	AREA	× SPM × SOF	= POINTS
NE	123.80	109.7	13580.9		SGL TINT		NE	16.0	94.5 .56	845.0
					SGL TINT		NE	12.8	94.5 .71	863.5
					SGL TINT		NE	12.8	94.5 .49	592.6
					SGL TINT		NE	19.5	94.5 .71	1315.4
					SGL TINT		NE	10.0	94.5 .67	631.0
					SGL TINT		NE	25.7	94.5 .75	1819.3
					SGL TINT		NE	13.5	94.5 .64	816.5
					SGL TINT		NE	13.5	94.5 .64	816.5
SE	140.40	109.7	15401.9		SGL TINT		SE	13.5	143.0 .77	1484.7
					SGL TINT		SE	8.0	143.0 .28	320.3
					SGL TINT		SE	10.0	143.0 .29	410.2
					SGL TINT		SE	13.5	143.0 .77	1484.7
					SGL TINT		SE	8.0	143.0 .37	427.9
					SGL TINT		SE	13.5	143.0 .77	1484.7
					SGL TINT		SE	8.0	143.0 .37	427.9
					SGL TINT		SE	20.0	143.0 .77	2199.6
					SGL TINT		SE	13.5	143.0 .77	1484.7
					SGL TINT		SE	32.4	143.0 .68	3167.4
SW	174.40	109.7	19131.7		SGL TINT		SW	20.0	143.0 .39	1122.8
					SGL TINT		SW	20.0	143.0 .39	1122.8
					SGL TINT		SW	8.0	143.0 .37	427.9
					SGL TINT		SW	60.0	143.0 .91	7843.6
					SGL TINT		SW	36.0	143.0 .63	3247.2
					SGL TINT		SW	3.4	143.0 .56	273.0
					SGL TINT		SW	13.5	143.0 .52	1003.9
					SGL TINT		SW	13.5	143.0 .52	1003.9
NW	299.30	109.7	32833.2		SGL TINT		NW	72.0	94.5 .92	6225.7
					SGL TINT		NW	25.7	94.5 .92	2238.6
					SGL TINT		NW	19.5	94.5 .92	1698.6
					SGL TINT		NW	57.0	94.5 .92	4965.1
					SGL TINT		NW	20.0	94.5 .75	1415.8
					SGL TINT		NW	40.0	94.5 .75	2831.6
					SGL TINT		NW	15.0	94.5 .75	1061.8
					SGL TINT		NW	9.8	94.5 .75	693.7
					SGL TINT		NW	36.8	94.5 .75	2605.0
					SGL TINT		NW	3.5	94.5 .87	288.9

.15 × COND. FLOOR AREA	/ TOTAL GLASS AREA	= ADJ. FACTOR	× GLASS POINTS	= ADJ GLASS POINTS	GLASS POINTS
.15 3,934.00	737.90	.800	80,947.63	64,733.96	60,661.90

NON GLASS								
	AREA	× BSPM	= POINTS	TYPE	R-VALUE	AREA	× SPM	= POINTS
WALLS								
Ext	2844.0	1.6	4550.4	Ext NormWtBlock In	4.2	1362.0	2.28	3105.4
				Ext Wood Frame	19.0	1482.0	1.60	2371.2
Adj	357.0	1.0	357.0	Adj Wood Frame	11.0	357.0	1.00	357.0
DOORS								
Adj	18.0	2.6	46.8	Adj Insulated		18.0	2.60	46.8
CEILINGS								
UA	2539.0	.8	2031.2	Under Attic	30.0	2539.0	.80	2031.2

FLOORS----------								
Slb	219.0	-20.0	-4380.0	Slab-on-Grade	.0	219.0	-20.00	-4380.0
Rsd	698.0	-2.2	-1507.7	Rsd Wood Adjacent	30.0	698.0	.60	418.8
INFILTRATION---------								
	3934.0	14.7	57829.8	Practice #2		3934.0	14.70	57829.8
TOTAL SUMMER POINTS			123,661.48					122,442.06

TOTAL SUM PTS	× SYSTEM MULT	= COOLING POINTS	TOTAL COMPON	× CAP RATIO	× DUCT MULT	× SYSTEM MULT	× CREDIT MULT	= COOLING POINTS
123,661.48	.37	45,754.75	122,442.06	1.00	1.100	.340	.950	43,503.66

WINTER CALCULATIONS

=== BASE ===					=== AS-BUILT ===					
GLASS										
ORIEN	AREA	× BWPM	= POINTS		TYPE	SC	ORIEN	AREA	× WPM × WOF	= POINTS
NE	123.80	-.4	-49.5		SGL TINT		NE	16.0	2.9 1.37	63.6
					SGL TINT		NE	12.8	2.9 1.24	46.2
					SGL TINT		NE	12.8	2.9 1.46	54.2
					SGL TINT		NE	19.5	2.9 1.24	70.4
					SGL TINT		NE	10.0	2.9 1.28	37.1
					SGL TINT		NE	25.7	2.9 1.22	90.8
					SGL TINT		NE	13.5	2.9 1.30	50.9
					SGL TINT		NE	13.5	2.9 1.30	50.9
SE	140.40	-.4	-56.2		SGL TINT		SE	13.5	-2.0 .62	-16.7
					SGL TINT		SE	8.0	-2.0 -1.46	23.4
					SGL TINT		SE	10.0	-2.0 -1.40	27.9
					SGL TINT		SE	13.5	-2.0 .62	-16.7
					SGL TINT		SE	8.0	-2.0 -.71	11.3
					SGL TINT		SE	13.5	-2.0 .62	-16.7
					SGL TINT		SE	8.0	-2.0 -.71	11.3
					SGL TINT		SE	20.0	-2.0 .62	-24.7
					SGL TINT		SE	13.5	-2.0 .62	-16.7
					SGL TINT		SE	32.4	-2.0 .44	-28.3
SW	174.40	-.4	-69.8		SGL TINT		SW	20.0	-2.0 -.59	23.8
					SGL TINT		SW	20.0	-2.0 -.59	23.8
					SGL TINT		SW	8.0	-2.0 -.71	11.3
					SGL TINT		SW	60.0	-2.0 .86	-103.3
					SGL TINT		SW	36.0	-2.0 .29	-21.2
					SGL TINT		SW	3.4	-2.0 .09	-.6
					SGL TINT		SW	13.5	-2.0 -.03	.8
					SGL TINT		SW	13.5	-2.0 -.03	.8
NW	299.30	-.4	-119.7		SGL TINT		NW	72.0	2.9 1.08	226.4
					SGL TINT		NW	25.7	2.9 1.08	80.4
					SGL TINT		NW	19.5	2.9 1.08	61.0
					SGL TINT		NW	57.0	2.9 1.08	178.2
					SGL TINT		NW	20.0	2.9 1.22	70.7
					SGL TINT		NW	40.0	2.9 1.22	141.3
					SGL TINT		NW	15.0	2.9 1.22	53.0
					SGL TINT		NW	9.8	2.9 1.22	34.6
					SGL TINT		NW	36.8	2.9 1.22	130.0
					SGL TINT		NW	3.5	2.9 1.12	11.4

.15 × COND. FLOOR AREA	/ TOTAL GLASS AREA	= ADJ. FACTOR	× GLASS POINTS	= ADJ GLASS POINTS	GLASS POINTS
.15 3,934.00	737.90	.800	-295.16	-236.04	1,340.46

NON GLASS									
	AREA	× BWPM	= POINTS		TYPE	R-VALUE	AREA	× WPM	= POINTS
WALLS									
Ext	2844.0	.3	853.2		Ext NormWtBlock In	4.2	1362.0	1.02	1389.2
					Ext Wood Frame	19.0	1482.0	.30	444.6
Adj	357.0	.5	178.5		Adj Wood Frame	11.0	357.0	.50	178.5
DOORS									
Adj	18.0	1.3	23.4		Adj Insulated		18.0	1.30	23.4
CEILINGS									
UA	2539.0	.1	253.9		Under Attic	30.0	2539.0	.10	253.9

FLOORS									
Slb	219.0	-2.1	-459.9	Slab-on-Grade	.0	219.0	-2.10	-459.9
Rsd	698.0	-.3	-195.4	Rsd Wood Adjacent	30.0	698.0	.30	209.4
INFILTRATION									
	3934.0	1.2	4720.8	Practice #2		3934.0	1.20	4720.8
TOTAL WINTER POINTS			5,138.42					8,100.40

TOTAL WIN PTS	× SYSTEM MULT	= HEATING POINTS	TOTAL COMPON	× CAP RATIO	× DUCT MULT	× SYSTEM MULT	× CREDIT MULT	= HEATING POINTS
5,138.42	1.10	5,652.26	8,100.40	1.00	1.100	1.000	.950	8,464.92

WATER HEATING

=== BASE ===				=== AS-BUILT ===					
NUM OF BEDRMS	× MULT	= TOTAL		TANK VOLUME	EF	TANK RATIO	× MULT	× CREDIT MULT	= TOTAL
4	3319.0	13,276.00		40	.94	1.000	3106.0	1.00	12,424.00

SUMMARY

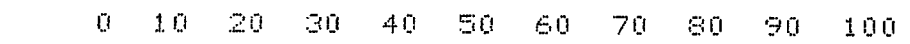
=== BASE ===					=== AS-BUILT ===				
COOLING POINTS	+ HEATING POINTS	+ HOT WATER POINTS	= TOTAL POINTS		COOLING POINTS	+ HEATING POINTS	+ HOT WATER POINTS	= TOTAL POINTS	
45754.8	5652.3	13276.0	64,683.01		43503.7	8464.9	12424.0	64,392.58	

****
* EPI = 99.55 *
****

ENERGY GUIDE

For detailed information
of the EPI rating number
or for any ITEM listed,
ask your Builder for
DCA Form 600A-93
or Form 600B-93

EPI= 99.6



The maximum allowable EPI is 100. The lower the EPI the more efficient the home

RESIDENTIAL ENERGY PERFORMANCE RATING SHEET

ITEM	HOME VALUE	Low Efficiency	High Efficiency
WINDOWS.....	Single Tint	SINGL CLR	DBL TINT
INSULATION.....			
Ceiling R-Value.....	30.0	R-10	R-30
Wall R-Value.....	19.0	R-0	R-7
Floor R-Value.....	30.0	R-0	R-19
AIR CONDITIONER.....			
SEER.....	10.0	10.0 SEER	17.0
HEATING SYSTEM.....			
Electric COP.....	1.0	2.50 COP	4.19
WATER HEATER.....			
Electric EF.....	0.94	0.88	0.96
Gas EF.....	0.00	0.54	0.90
Solar EF.....		0.40	0.80
OTHER FEATURES.....			
.....			

I certify that these energy saving features required for the Florida
Energy Code have been installed in this house.

Address:_____ Builder Signature:_____ Date:_____

City/Zip_____

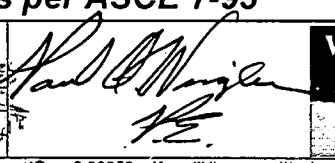
Florida Energy Code for Building Construction - 1993
Florida Department of Community Affairs FL-EPL CARD93

Wind Load Structural Calculations per ASCE 7-93

START HERE

TEP No. 1

Establish wind load velocity pressure for exposure C or exposure D for shoreline areas



WINDLOAD ANALYSIS

A Poly Tek computer program for the engineer

The velocity pressure value shown in the chart below is based on the fastest mile wind speed design requirement and the mean roof height for each rectangle of the structure. *See Below

Design wind speed & exposure ENTER HERE

(Note: All wind velocity pressures are shown in pounds per square foot) VELOCITY PRESSURE VALUES ((Qz = 0.00256 x Kz x (IV)squared)) Importance factor, I=1.05

Wind speed & exposure →		80 Exp. C	90 Exp. C	100 Exp. C	110 Exp. C	120 Exp. D	130 Exp. D	140 Exp. D	115 Exp. D	125 Exp. D	135 Exp. D
Mean Roof height	0' to 15'	14.5	18.3	22.6	27.3	32.5	38.2	44.3	27.4	33.9	41.0
Mean Roof height	15' to 20'	15.7	19.9	24.6	29.7	33.4	41.5	48.1	29.0	35.8	43.4
Mean Roof height	20' to 25'	16.8	21.3	26.2	31.8	37.8	44.4	51.4	30.2	37.3	45.1
Mean Roof height	25' to 30'	17.7	22.4	27.7	33.5	39.8	46.7	54.2	31.3	38.7	46.8
Mean Roof height	30' to 35'	18.4	23.3	28.8	34.8	41.5	48.7	56.4	32.3	39.9	48.3
Mean Roof height	35' to 40'	19.1	24.2	29.9	36.2	43.1	50.6	58.6	33.4	41.2	49.9
Mean Roof height	40' to 45'	19.8	25.0	30.9	37.4	44.5	52.2	60.6	34.1	42.1	50.9
Mean Roof height	45' to 50'	20.4	25.8	31.9	38.6	45.9	53.9	62.5	34.7	42.9	51.9
Mean Roof height	50' to 55'	21.0	26.5	32.7	39.6	47.1	55.3	64.2	35.4	43.7	52.9
Mean Roof height	55' to 60'	21.5	27.2	33.6	40.6	48.4	56.8	65.8	36.1	44.6	54.0

Rectangle Information: Select velocity pressure and list informatiom for each rectangle

For Rectangle	A	B	C	D	E	F	G	H	I	J	K
Velocity pressure	44.3	51.4									
Mean roof height	14.00	24.00									
Roof Pitch #:12	3.50	3.50									
Roof frame ctr. dist. (In.)"	24	24									

To determine the mean roof height; first, ADD vertical distance from grade to top of exterior wall at eave PLU 50% of the vertical distance from top of exterior wall at eave to highest roof ridge line of each rectangle.

ENTER Roof system Dead Load 25 LBS.

ROOF General Information

Pitch # :12	1	2	3	4	5	6	7	8	9	10	11	12
Pitch Factor	1.00	1.01	1.03	1.05	1.08	1.12	1.16	1.20	1.25	1.30	1.36	1.41
Force factor	0.94	0.89	0.84	0.79	0.74	0.70	0.67	0.62	0.59	0.56	0.52	0.50
Pitch Angle	5 Degrees	10 Degrees	14 Degrees	19 Degrees	23 Degrees	27 Degrees	30 Degrees	34 Degrees	37 Degrees	40 Degrees	43 Degrees	45 Degrees

Roof Coefficients for wind load calculations on buildings with a mean roof height of less than 60 feet.

For Roof framing members at 16" on center

16" O.C.	With roof pitch angle Zero to 10 degrees Coefficients for				With roof pitch angle 10 to 30 degrees Coefficients for				With roof pitch angle 30 to 45 degrees Coefficients for			
Roof frame member span lgth. brg. to brg. (Feet)	Location #1 Roof frame members with only 1 edge/ridge Zone #2	Location #2 Roof frame members with more than 1 Zone #2	Location #3 Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members	Location #1 Roof frame members with only 1 edge/ridge Zone #2	Location #2 Roof frame members with more than 1 Zone #2	Location #3 Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members	Location #1 Roof frame members with only 1 edge/ridge Zone #2	Location #2 Roof frame members with more than 1 Zone #2	Location #3 Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members
0 to 6	2.00	2.55	2.55	3.03	2.15	3.00	3.00	3.33	1.50	1.63	1.63	2.32
6 to 9	1.75	2.07	2.40	2.66	1.85	2.42	2.80	2.89	1.46	1.54	1.63	2.25
9 to 12	1.67	1.91	2.40	2.54	1.66	2.04	2.80	2.60	1.44	1.50	1.63	2.22
12 to 16	1.52	1.66	2.10	2.34	1.43	1.68	2.50	2.30	1.33	1.38	1.52	2.10
16 to 20	1.50	1.60	2.10	2.30	1.38	1.58	2.50	2.23	1.32	1.36	1.52	2.09
20 to 28	1.47	1.54	2.10	2.25	1.32	1.46	2.50	2.14	1.31	1.34	1.52	2.08
28 to 36	1.46	1.53	2.10	2.25	1.24	1.34	2.20	2.04	1.24	1.26	1.43	2.00
36 to 46	1.30	1.35	1.70	2.08	1.24	1.34	2.20	2.04	1.24	1.26	1.43	2.00
46 to 60	1.30	1.35	1.70	2.08	1.24	1.34	2.20	2.04	1.22	1.24	1.40	1.98
60 to 80	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98
80 Plus	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98

For Roof framing members at 24" on center

24" O.C.	With roof pitch angle Zero to 10 degrees Coefficients for				With roof pitch angle 10 to 30 degrees Coefficients for				With roof pitch angle 30 to 45 degrees Coefficients for			
Roof frame member span lgth. brg. to brg. (Feet)	Location #1 Roof frame members with only 1 edge/ridge Zone #2	Location #2 Roof frame members with more than 1 Zone #2	Location #3 Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members	Location #1 Roof frame members with only 1 edge/ridge Zone #2	Location #2 Roof frame members with more than 1 Zone #2	Location #3 Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members	Location #1 Roof frame members with only 1 edge/ridge Zone #2	Location #2 Roof frame members with more than 1 Zone #2	Location #3 Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members
0 to 6	1.91	2.40	2.40	2.91	2.04	2.80	2.80	3.17	1.50	1.63	1.63	2.32
6 to 9	1.75	2.07	2.40	2.66	1.62	2.06	2.50	2.59	1.37	1.44	1.52	2.16
9 to 12	1.57	1.75	2.10	2.41	1.51	1.84	2.50	2.43	1.35	1.41	1.52	2.13
12 to 16	1.52	1.66	2.10	2.34	1.43	1.68	2.50	2.30	1.33	1.38	1.52	2.10
16 to 20	1.50	1.60	2.10	2.30	1.38	1.58	2.50	2.23	1.25	1.28	1.43	2.02
20 to 28	1.31	1.35	1.70	2.08	1.24	1.36	2.20	2.05	1.24	1.27	1.43	2.00
28 to 36	1.30	1.35	1.70	2.08	1.24	1.34	2.20	2.04	1.24	1.26	1.43	2.00
36 to 46	1.30	1.35	1.70	2.08	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98
46 to 60	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98
60 to 80	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98
80 Plus	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98

Note 1. Edge/Ridge Zone and End Zone calculation is thus; 10% of the endwall width or 40% of the mean roof height, whichever is smaller, but not less than either 3 feet or 4% of the longest wall.

The methods of determining the wind force generated reaction loads in this document utilizes the provisions of the ANSI / ASCE Standard 7-93, Minimum Design Loads for Buildings and Other Structures, Section 6, Wind Loads, 6.4.2 Analytical Procedure in accordance with 6.4.2.2 *Limitations of Analytical Procedure*. This method applies all appropriate factors and pressure coefficients applicable for the main wind force resisting system, end zones, overhangs, edge strips, walls, roofs, components and cladding as shown in Section 6, figures 1, 2, 3, & 4 and tables 4, 5, 6, 7, 8, 9, 10, 11 & 12. The velocity pressures shown in Step No. 1 have been calculated in accordance with Section 6.5.1 and modified for velocity pressure exposure coefficients and gust response factors relative to exposures C and D in compliance with Table 6 and Table 8 respectively.

The use of this document is restricted to buildings less than 60 feet high, subject to the same limitations as shown in Section 6.4.2.2 of the ASCE Standard 7-93 and must be completed under the direction and supervision of a registered professional engineer.

STEP No. 2 **Identify and Number:**

Note: Nomenclature assigned by truss companies may also be used except for girders & beams.

SAMPLE: A-T1 **(A= the roof Rectangle in which the truss T1 is located)**

On your roof framing plan, identify, by prefixes and number, all structural framing members.

Use the same prefix and number for all members which are identical in span and general design.

Prefixes are shown in the chart below.

Note: Mark all girder trusses and beams at their bearing points with "A" at one bearing point and "B" at the other bearing point. (Example: G1-A and G1-B for each end of a girder truss)

Item Description	Roof Truss	Roof Rafter	Hip Jack	Beam or Girder	Hip King Jack	O.S.Roof Corner	Opening Header	Gable Frame	Shear Wall (Int.)	End Wall	Side Wall
Rectangle Prefix +	T#	R#	J#	G#	K#	CR#	H#	GF#	X#	EW#	SW#

STEP No. 3 **Calculate wind uplift loads for structural roof framing members at both bearing points.**

List hip roof king-jacks after Step 4D is completed.Include hand framed Gables .

Note 2: The selection of the coefficient "C" must be from the chart shown on page 1 and is based first on the roof framing center distance, 16" or 24" on center; next the chart for the appropriate roof pitch angle must be used in conjuction with the roof frame member span length from bearing point to bearing point.

Follow calculation instructions at the bottom of the columns.

Important: Select the correct coeficient for each roof framing member based on the number of Edge or Ridge strip areas acting on that specific roof frame member. Typically, most hip jacks and some rafters have only one edge or ridge strip.

The load result of this calculation is the net uplift reaction vertical to the bearing point less the dead load reaction.

Col. A	Col. B	Col. C	Col. D	Col. E	Col. F	Col. G	Col. H	Col. I	Col. J*	Col. K	Col. L*	Col. M
Location 1, 2 or 3 Rectangle Letter-	oof fram member I.D. No. on plans	Coefficien "C" Note Roof and overhang	Velocity pressure	Calculated Value	Dead Load (PSF)	Calculate Value	oof fram center distance (Inches)	Calculate Value	Top line = 1/2 Span lower line= overhang	Calculate Values	Uplift load eave end including overhang	Uplift load opposite eave end w/o OH
1		1.38		61.13		36.1		36.13	10.50	221		
A	G1	2.23	44.3	98.79	25	73.8	12.00	73.79	3.00	379	601	379
1		1.24		54.93		29.9		19.95	18.50	131		
A	G2	2.04	44.3	90.37	25	65.4	8.00	43.58	3.00	369	500	369
1		1.24		54.93		29.9		29.93	18.75	196		
A	G3	2.04	44.3	90.37	25	65.4	12.00	65.37	3.00	561	757	561
1		1.43		63.35		38.3		47.94	9.00	288		
A	G4	2.30	44.3	101.89	25	76.9	15.00	96.11	3.00	431	720	431
1		1.43		63.35		38.3		38.35	9.00	231		
A	G5	2.30	44.3	101.89	25	76.9	12.00	76.89	3.00	345	576	345
1		1.51		66.89		41.9		83.79	7.00	496		
A	G6	2.43	44.3	107.65	25	82.6	24.00	165.30	3.00	587	1082	587
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G7	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G8	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G9	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G10	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G11	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G12	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G13	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G14	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G15	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G16	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G17	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
	G18	#N/A	#N/A	#N/A	25	#N/A		#N/A		#N/A	#N/A	#N/A
1		1.38		61.13		36.1		72.27	10.50	443		

STEP No. 3 **Calculate wind uplift loads for structural roof framing members at both bearing points.**

List hip roof king-jacks after Step 4D is completed.Include hand framed Gables .

Note 2: The selection of the coefficient "C" must be from the chart shown on page 1 and is based first on the roof framing center distance, 16" or 24" on center; next the chart for the appropriate roof pitch angle must be used in conjuction with the roof frame member span length from bearing point to bearing point. **Important:** Select the correct coeficient for each roof framing member based on the **Follow calculation instructions** number of Edge or Ridge strip areas acting on that specific roof frame member. **at the bottom of the columns.** Typically, most hip jacks and some rafters have only one edge or ridge strip.

The load result of this calculation is the net uplift reaction vertical to the bearing point less the dead load reaction.

Col. A	Col. B	Col. C	Col. D	Col. E	Col. F	Col. G	Col. H	Col. I	Col. J*	Col. K	Col. L*	Col. M
Location 1, 2 or 3 Rectangle Letter-	oof fram member I.D. No. on plans	Coefficien "C" Note Roof and overhang	Velocity pressure	Calculated Value	Dead Load (PSF)	Calculate Value	oof fram center distance (Inches)	Calculate Value	Top line = 1/2 Span lower line= overhang	Calculate Values	Uplift load eave end including overhang	Uplift load opposite eave end w/o OH
A	T1	2.23	44.3	98.79	25	73.8	24	147.58	3.00	759	1202	759
1		1.38		61.13		36.1		72.27	10.50	443		
A	T2	2.23	44.3	98.79	25	73.8	24	147.58	3.00	759	1202	759
1		1.24		54.93		29.9		59.86	18.75	392		
A	T3	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T4	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T5	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T6	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T7	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T8	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T9	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T10	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T11	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T12	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T13	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T14	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.24		54.93		29.9		59.86	18.75	392		
A	T15	2.04	44.3	90.37	25	65.4	24	130.74	3.00	1122	1515	1122
1		1.43		63.35		38.3		76.70	9.00	461		
A	T16	2.30	44.3	101.89	25	76.9	24	153.78	3.00	690	1152	690
1		1.43		63.35		38.3		76.70	9.00	461		
A	T17	2.30	44.3	101.89	25	76.9	24	153.78	3.00	690	1152	690
1		1.62		71.77		46.8		93.53	5.00	754		
A	K1	2.59	44.3	114.74	25	89.7	24	179.47	4.20	468	1221	468
1		2.04		90.37		65.4		130.74	3.50	693		
A	J1	3.17	44.3	140.43	25	115.4	24	230.86	3.00	458	1150	458
1		2.04		90.37		65.4		130.74	3.00	693		
A	J2	3.17	44.3	140.43	25	115.4	24	230.86	3.00	392	1085	392
1		2.04		90.37		65.4		130.74	3.00	693		
A	J3	3.17	44.3	140.43	25	115.4	24	230.86	3.00	392	1085	392
1		2.04		90.37		65.4		130.74	3.00	693		
A	J4	3.17	44.3	140.43	25	115.4	24	230.86	3.00	392	1085	392
1		2.04		90.37		65.4		130.74	3.67	0		
A	J6	3.17	44.3	140.43	25	115.4	24	230.86	0.00	480	480	480
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A

STEP No. 3 **Calculate wind uplift loads for structural roof framing members at both bearing points.**

List hip roof king-jacks after Step 4D is completed.Include hand framed Gables .

Note 2: The selection of the coefficient "C" must be from the chart shown on page 1 and is based first on the roof framing center distance, 16" or 24" on center; next the chart for the appropriate roof pitch angle must be used in conjuction with the roof frame member span length from bearing point to bearing point.

Important: Select the correct coeficient for each roof framing member based on the number of Edge or Ridge strip areas acting on that specific roof frame member. Typically, most hip jacks and some rafters have only one edge or ridge strip.

Follow calculation instructions at the bottom of the columns.

The load result of this calculation is the net uplift reaction vertical to the bearing point less the dead load reaction.

Col. A	Col. B	Col. C	Col. D	Col. E	Col. F	Col. G	Col. H	Col. I	Col. J*	Col. K	Col. L*	Col. M
Location 1, 2 or 3 Rectangle Letter-	oof fram member I.D. No. on plans	Coefficien "C" Note Roof and overhang	Velocity pressure	Calculated Value	Dead Load (PSF)	Calculate Value	oof fram center distance (Inches)	Calculate Value	Top line = 1/2 Span lower line= overhang	Calculate Values	Uplift load eave end including overhang	Uplift load opposite eave end w/o OH
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
		#N/A		#N/A		#N/A		#N/A		#N/A		
		#N/A	#N/A	#N/A	25	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A
STOP												
Columns & Calculation Instructions		**C**	**D**	**E**	**F**	**G**	**H**	**I**	**J***	**K**	**L**	**M**
		C x D = E			**E - F = G**		**G x H = I**		**I x J = K**		**Ka+Kb=L***	

J*NOTE 3: If half the span is less than 3 feet ; then enter 3 in column "J"

J*NOTE 3: If the eave does NOT have an overhang of 1'-6" or more; then enter 1.5 in column "J"

STEP No. 4A (Only if Rake overhang exceeds 1 foot)

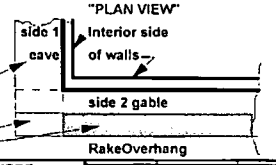
Contributory Uplift Load Values for outside wall corner overhang areas:

Use for ALL GABLE Corners ONLY

Identical corners should have the same I.D. number

AA represents uplift load for this corner overhang area

BB represents excess rake overhang uplift load



STEP No. 4C

Hypotenuse lengths for roof frame Hip King-Jacks

Select the LENGTH values CC and DD from this chart based upon the hip girder truss set-back distance from the exterior bearing wall and the eave overhang length.

Corner I.D. as show on plans	Enter Sq. Ft. of Shaded corner Area	MATH	Fixed Value		Math Function Value (results)	MATH	specific rectangle Velocity pressure sheet 1 (List Rectangle HERE)		Value AA ▼		Set-Back Distance in feet	CC Bearing Length	Set-Back Distance in feet	CC Bearing Length	Set-Back Distance in feet	CC Bearing Length	Eave Over-Hang Distance in feet	DD overhang Length
CR-1		x	4	=	0	x	#N/A	=	#N/A		1	1.4	9	12.7	17	24.0	1.00	1.4
CR-2		x	4	=	0	x	#N/A	=	#N/A		2	2.8	10	14.1	18	25.5	1.33	1.9
CR-3		x	4	=	0	x	#N/A	=	#N/A		3	4.2	11	15.6	19	26.9	1.50	2.1
CR-4		x	4	=	0	x	#N/A	=	#N/A		4	5.7	12	17.0	20	28.3	2.00	2.8
CR-5		x	4	=	0	x	#N/A	=	#N/A		5	7.1	13	18.4	21	29.7	2.50	3.5
CR-6		x	4	=	0	x	#N/A	=	#N/A		6	8.5	14	19.8	22	31.1	3.00	4.2
CR-7		x	4	=	0	x	#N/A	=	#N/A		7	9.9	15	21.2	23	32.5	3.50	4.9
CR-8		x	4	=	0	x	#N/A	=	#N/A		8	11.3	16	22.6	24	33.9	4.00	5.7

STEP No. 4B **Calculate Wind Uplift Load Values at bearing points of gable truss or rafter and uplift per lineal foot for gable diaphragm design and connector sizing on hand framed gables**

GF# or Member I.D. No. as show on plans	Col. A Enter half Sq. Ft. of hatched rake area brg to brg	MATH	Col. B Fixed Value		Col. C Math Function Value (results)	MATH	Col. D specific rectangle Velocity pressure (sheet 1)		Col. E Value (results) BB ▼		Col. F Plus Value AA ▼	Col. G List over-hang end loads from Step 3	Col. H Uplift at each bearing point a. & b.	Col. I Total uplift for both bearing points	Col. J List horizont'l bearing distance (Feet)	Col. K Uplift shear on gable sheathing (PLF)	Col. L Sheathing Mat'l. & thickness Nail size & V. Ctrs.	LINE Letter Ridge end = a. Eave end = b.
			2.4							+	#N/A	#N/A	#N/A					a.
		X		=	0	X	#N/A	=	#N/A	+	#N/A	#N/A	#N/A	#N/A		#N/A		b.
			2.4							+	#N/A	#N/A	#N/A					a.
		X		=	0	X	#N/A	=	#N/A	+	#N/A	#N/A	#N/A	#N/A		#N/A		b.
			2.4							+	#N/A	#N/A	#N/A					a.
		X		=	0	X	#N/A	=	#N/A	+	#N/A	#N/A	#N/A	#N/A		#N/A		b.
			2.4							+	#N/A	#N/A	#N/A					a.
		X		=	0	X	#N/A	=	#N/A	+	#N/A	#N/A	#N/A	#N/A		#N/A		b.
			2.4							+	#N/A	#N/A	#N/A					a.
		X		=	0	X	#N/A	=	#N/A	+	#N/A	#N/A	#N/A	#N/A		#N/A		b.
			2.4							+	#N/A	#N/A	#N/A					a.
		X		=	0	X	#N/A	=	#N/A	+	#N/A	#N/A	#N/A	#N/A		#N/A		b.
			2.4							+	#N/A	#N/A	#N/A					a.
		X		=	0	X	#N/A	=	#N/A	+	#N/A	#N/A	#N/A	#N/A		#N/A		b.
			2.4							+	#N/A	#N/A	#N/A					a.
		X		=	0	X	#N/A	=	#N/A	+	#N/A	#N/A	#N/A	#N/A		#N/A		b.
	A x B = C						C x D = E				E+F+G = H			Ha+Hb = I		I / J = K		

STEP No. 4D List the values requested and perform the calculations on Lines 3, 4, and 6 for each dissimilar king-jack shown on plans. Then, insert the calculated values from Line 4 and Line 6 into Step 3, Column J, lines a. & b. respectively.

Line Number	King-Jack I.D. No. as shown on plans ▶	K1	K2	K3	K4	K5	K6	K7	K8	K9	K10
	Set-back distance (Ref.)	7									
	Length of overhang (decimal feet)	3.00									
	Roof Pitch Ratio (rise to 12) (Ref.)	3.50									
1	Pitch Factor = Page 1, General info.	1.0308	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
2	List the CC length value	9.9	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
3	Multiply Line 1 times Line 2 =	10.2	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
4	Divide Line 3 value by 2 =	5	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
5	List DD the overhang length value	4.2	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
6	Multiply Line 1 times Line 5 =	4.3	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A

STEP No. 5 Determine the ADDITIONAL wind uplift load for those roof frame members that extend or exist over partially enclosed and/or open areas.

Member I.D. No. as show on plans	Col. A Load Ka. & Lb. from Step No. 3 (Lbs.)	Col. B Velocity pressure from Step No. 3 Col. "D"	Col. C Additional uplift load per sq. ft. (Lbs.)	Col. D Member length over the open area only (Feet)	Col. E Member distance on center (Inches)	Col. F Effective sq. ft. area per member	Col. G Sum of additional uplift load / member (Lbs.)	Col. H Member span dist brg. to bearing (Feet)	Col. I additional uplift load per lineal foot (PLF)	Col. J Load Ctr dist. to: brg pt b. brg pt a. (Feet)	Col. K additional uplift load at brg. pts. a. and b. (Lbs.)	Col. L Revised uplift load at brg. pts. End A (Lbs.)	Revised uplift load at brg. pts. End B (Lbs.)
	1122									31.63	658		
T3	1515	44.3	33.2	11.75	24.0	23.50	780.8	37.50	21	5.88	122	2173	1637
	1122									31.63	658		
T4	1515	44.3	33.2	11.75	24.0	23.50	780.8	37.50	21	5.88	122	2173	1637
	1122									31.63	658		
T5	1515	44.3	33.2	11.75	24.0	23.50	780.8	37.50	21	5.88	122	2173	1637
	#N/A									#N/A	#N/A		
	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
	#N/A									#N/A	#N/A		
	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
	#N/A									#N/A	#N/A		
	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
	#N/A									#N/A	#N/A		
	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
	#N/A									#N/A	#N/A		
	#N/A	#N/A	#N/A		#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A
Calculation Instructions		B x 0.75 = C			D x E = F		C x F = G	G / H = I		I x J = K		A + K = L	

STEP No. 6A

Calculate Wind Load Values for all roof framing girder trusses and beams at their bearing points

(Do NOT list headers over ext. & int. bearing wall openings in this calculation step. See Step No. 7)

Note:Delete #N/A in "Loads from" column for rows not used.

Note:Place a 0 (w/o overhang) or a 1 (w/overhang) in line 13a & 13b.

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. Number **G1**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	K1	468	x	1	=	468
2	J1	458	x	5	=	2288
3		#N/A	x		=	0
4		#N/A	x		=	0
5		#N/A	x		=	0
6		#N/A	x		=	0
7		#N/A	x		=	0
8		#N/A	x		=	0
9		#N/A	x		=	0
10		#N/A	x		=	0
11	**Sub-Total**					2756
12	**Divide Line 11 by 2 =**					1378
13a	This member's uplift load from Steps 3 or 5 (End a.)				1	601
13b	This member's uplift load from Steps 3 or 5 (End b.)				1	601
14a	**Add Line 12 and Line 13a = (End a.)**					1979
14b	**Add Line 12 and Line 13b = (End b.)**					1979

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. Number **G2**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	K1	468	x	1	=	468
2	J1	458	x	10	=	4576
3	J6	480	x	6	=	2879
4		#N/A	x		=	0
5		#N/A	x		=	0
6		#N/A	x		=	0
7		#N/A	x		=	0
8		#N/A	x		=	0
9		#N/A	x		=	0
10		#N/A	x		=	0
11	**Sub-Total**					7923
12	**Divide Line 11 by 2 =**					3961
13a	This member's uplift load from Steps 3 or 5 (End a.)				0	369
13b	This member's uplift load from Steps 3 or 5 (End b.)				1	500
14a	**Add Line 12 and Line 13a = (End a.)**					4331
14b	**Add Line 12 and Line 13b = (End b.)**					4461

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. Number **G3**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	K1	468	x	2	=	935
2	J1	458	x	13	=	5949
3		#N/A	x		=	0
4		#N/A	x		=	0
5		#N/A	x		=	0
6		#N/A	x		=	0
7		#N/A	x		=	0
8		#N/A	x		=	0
9		#N/A	x		=	0
10		#N/A	x		=	0
11	**Sub-Total**					6884
12	**Divide Line 11 by 2 =**					3442
13a	This member's uplift load from Steps 3 or 5 (End a.)				1	757
13b	This member's uplift load from Steps 3 or 5 (End b.)				1	757
14a	**Add Line 12 and Line 13a = (End a.)**					4199
14b	**Add Line 12 and Line 13b = (End b.)**					4199

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. Number **G4**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	T11	1122	x	1	=	1122
2	T12	1122	x	1	=	1122
3	T13	1122	x	1	=	1122
4	T14	1122	x	1	=	1122
5	T15	1122	x	1	=	1122
6		#N/A	x		=	0
7		#N/A	x		=	0
8		#N/A	x		=	0
9		#N/A	x		=	0
10		#N/A	x		=	0
11	**Sub-Total**					5612
12	**Divide Line 11 by 2 =**					2806
13a	This member's uplift load from Steps 3 or 5 (End a.)				0	431
13b	This member's uplift load from Steps 3 or 5 (End b.)				1	720
14a	**Add Line 12 and Line 13a = (End a.)**					3238
14b	**Add Line 12 and Line 13b = (End b.)**					3526

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. Number **G5**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	K1	468	x	2	=	935
2	J1	458	x	3	=	1373
3		#N/A	x		=	0
4		#N/A	x		=	0
5		#N/A	x		=	0
6		#N/A	x		=	0
7		#N/A	x		=	0
8		#N/A	x		=	0
9		#N/A	x		=	0
10		#N/A	x		=	0
11	**Sub-Total**					2308
12	**Divide Line 11 by 2 =**					1154
13a	This member's uplift load from Steps 3 or 5 (End a.)				1	576
13b	This member's uplift load from Steps 3 or 5 (End b.)				1	576
14a	**Add Line 12 and Line 13a = (End a.)**					1730
14b	**Add Line 12 and Line 13b = (End b.)**					1730

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. Number **G6**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	J6	480	x	6	=	2879
2		#N/A	x		=	0
3		#N/A	x		=	0
4		#N/A	x		=	0
5		#N/A	x		=	0
6		#N/A	x		=	0
7		#N/A	x		=	0
8		#N/A	x		=	0
9		#N/A	x		=	0
10		#N/A	x		=	0
11	**Sub-Total**					2879
12	**Divide Line 11 by 2 =**					1439
13a	This member's uplift load from Steps 3 or 5 (End a.)				0	587
13b	This member's uplift load from Steps 3 or 5 (End b.)				0	587
14a	**Add Line 12 and Line 13a = (End a.)**					2026
14b	**Add Line 12 and Line 13b = (End b.)**					2026

NOTE

Any girder truss or beam bearing point that has a continuous vertical load path to the foundation is a primary bearing point load. Any girder truss or beam bearing point that bears its load upon another girder truss or beam is a contributory bearing point load.
All girder trusses and beams which do NOT have other girder trusses or beams bearing their load upon them can now be listed with their Step 6A, Line 14a. or b. load values in the Connector Specification Chart.

STEP No. 6B — **Establish contributory load values imposed upon girder trusses or beams based on the bearing point location along the span.**

List Girder truss or Beam bearing on another Girder Truss or Beam: I.D. No.	End A or B	Uplift Load at Bearing point	List Girder truss or Beam which is receiving the load: I.D. No.		SPAN brg. to brg.	Divide the LOAD by the SPAN. Equals lbs per Lin.Ft.
G2	A	4331	G4		18.00	240.58
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		#VALUE!			#N/A	#VALUE!
		From Step 6A				EE ▲

This is a Polly Tek computer file programed to run with Microsoft Excel, Version 5.0 or higher.
ANSI / ASCE Standard 7 is the compulsory standard to be used by the registered professional engineer.
The computed load results of this program exceeds the requirements of the SBCCI, Standard Building Code and meets the requirements of the South Florida Building Code for Dade and Broward Counties.

STEP No. 6D — **List ALL Girder Trusses and Beams to establish the primary uplift loads at ENDS A & B for Connector sizing**

List Girder Truss or Beam: I. D. Number	Dash End "A" or "B"	Load from Step 6A Line 14a. or b.	Total Contibutory Loads from STEP 6C	TOTAL UPLIFT at primary bearing point
G1	A	1979	0	1979
G1	B	1979	0	1979
G2	A	4331	0	4331
G2	B	4461	0	4461
G3	A	4199	0	4199
G3	B	4199	0	4199
G4	A	3238	1925	5162
G4	B	3526	2406	5932
G5	A	1730	0	1730
G5	B	1730	0	1730
G6	A	2026	0	2026
G6	B	2026	0	2026
G7	A	#N/A	0	#N/A
G7	B	#N/A	0	#N/A
G8	A	#N/A	0	#N/A
G8	B	#N/A	0	#N/A
G9	A	#N/A	0	#N/A
G9	B	#N/A	0	#N/A
G10	A	#N/A	0	#N/A
G10	B	#N/A	0	#N/A
G11	A	#N/A	0	#N/A
G11	B	#N/A	0	#N/A
G12	A	#N/A	0	#N/A
G12	B	#N/A	0	#N/A
G13	A	#N/A	0	#N/A
G13	B	#N/A	0	#N/A
G14	A	#N/A	0	#N/A
G14	B	#N/A	0	#N/A
G15	A	#N/A	0	#N/A
G15	B	#N/A	0	#N/A
G16	A	#N/A	0	#N/A
G16	B	#N/A	0	#N/A
G17	A	#N/A	0	#N/A
G17	B	#N/A	0	#N/A
G18	A	#N/A	0	#N/A
G18	B	#N/A	0	#N/A

American Society of Civil Engineers Standard 7-93
The World's Best Wind Load Code

STEP No. 6C — **Calculate all contributory loads imposed upon other Girder Trusses or Beams at all PRIMARY bearing points.**

List Girder truss or Beam which is receiving the load: A I.D. No. for End "A"	Load point from End "B" Feet	List Girder truss or Beam which is bearing its Load on this Girder Truss or Beam: I.D. No.	End A or B	Load PLF "EE"	Multiply "B" Feet times Load "EE" equals load at End "A"	List Girder truss or Beam which is receiving the load: B I.D. No. for End "B"	Load point from End "A" Feet	List Girder truss or Beam which is bearing its Load on this Girder Truss or Beam: I.D. No.	End A or B	Load PLF "EE"	Multiply "A" Feet times Load "EE" equals load at End "B"
G4	8.00	G2	A	240.58	1925	G4	10	G2	A	240.58	2406
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A
0		0	0	#N/A	#N/A	0	#N/A	0	0	#N/A	#N/A

If "FF" is a primary bearing point load go to step 6D otherwise enter "FF" in step 6B and continue. FF ▲

If "FF" is a primary bearing point load go to step 6D otherwise enter "FF" in step 6B and continue. FF ▲

STEP No. 7

Calculate Wind Load Values for all opening headers at their bearing points.

(List headers over exterior & interior bearing wall openings in this calculation step.)

Note: Non-symetrical header loading with extreme loads require special calculations in a different format. Use Step 6A thru 6D.

List all roof frame members that bear their loads on the specific opening header I.D. No. listed below;

Line #	NO UPLIFT	Opening Header I.D. No.	H-1				
	Structural member I.D. number on plans	Uplift Loads acting on this HEADER	MATH	Quantity of members with same I.D. No. bearing on this open'g header		(Totals) Add lines 1 thru 4 and enter sum on line 5
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

List all roof frame members that bear their loads on the specific opening header I.D. No. listed below;

Line #	NO UPLIFT	Opening Header I.D. No.	H-2				
	Structural member I.D. number on plans	Uplift Loads acting on this HEADER	MATH	Quantity of members with same I.D. No. bearing on this open'g header		(Totals) Add lines 1 thru 4 and enter sum on line 5
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

List all roof frame members that bear their loads on the specific opening header I.D. No. listed below;

Line #	NO UPLIFT	Opening Header I.D. No.	H-3				
	Structural member I.D. number on plans	Uplift Loads acting on this HEADER	MATH	Quantity of members with same I.D. No. bearing on this open'g header		(Totals) Add lines 1 thru 4 and enter sum on line 5
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-4			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-5			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-6			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-7			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-8			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

		Opening Header I.D. No.	H-9			
1	T2-A	1202	X	2	=	2403
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					2403
6	480 PLF	Divide Line 5 by 2 =				1202

		Opening Header I.D. No.	H-10			
1	G1-A	1979	X	1	=	1979
2	J2-A	392	X	1	=	392
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					2371
6	474 PLF	Divide Line 5 by 2 =				1185

		Opening Header I.D. No.	H-11			
1	J2-A	392	X	1	=	392
2	J3-A	392	X	1	=	392
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					784
6	196 PLF	Divide Line 5 by 2 =				392

		Opening Header I.D. No.	H-12			
1	J2-A	392	X	1	=	392
2	J3-A	392	X	1	=	392
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					784
6	196 PLF	Divide Line 5 by 2 =				392

		Opening Header I.D. No.	H-13			
1	J2-A	392	X	1	=	392
2	G1-B	1979	X	1	=	1979
3	T1-A	1202	X	1	=	1202
4	T2-A	1202	X	1	=	1202
5	Sub-Total					4774
6	596 PLF	Divide Line 5 by 2 =				2387

	NO UPLIFT	Opening Header I.D. No.	H-14			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-15			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-16			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-17			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-18			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-19			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-20			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-21			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-22			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-23			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	NO UPLIFT	Opening Header I.D. No.	H-24			
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

		Opening Header I.D. No.	H-25			
1	J2-A	392	X	1	=	392
2	J3-A	392	X	1	=	392
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					784
6	Divide Line 5 by 2 =					392

		Opening Header I.D. No.	H-26			
1	T12-A	1122	X	1	=	1122
2	T13-A	1122	X	1	=	1122
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					2245
6	Divide Line 5 by 2 =					1122

		Opening Header I.D. No.	H-27			
1	T8-A	1515	X	2	=	3029
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					3029
6	Divide Line 5 by 2 =					1515

List I.D. numbers of all Opening Headers along with their respective Line #6 load values on the Connector Specification Chart.

STEP No. 7 (Continued)

Calculate Wind Load Values for all opening headers at their bearing points.

(List headers over exterior & interior bearing wall openings in this calculation step.)

List all roof frame members that bear their loads on the specific opening header I.D. No. listed below;

Line #	Structural member I.D. number on plans	Uplift Loads acting on this HEADER	MATH	Quantity of members with same I.D. No. bearing on this open'g header		(Totals) Add lines 1 thru 4 and enter sum on line 5
	Opening Header I.D. No.					**H-28**
1	T8-A	1515	X	2	=	3029
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					3029
6	Divide Line 5 by 2 =					1515

List all roof frame members that bear their loads on the specific opening header I.D. No. listed below;

Line #	Structural member I.D. number on plans	Uplift Loads acting on this HEADER	MATH	Quantity of members with same I.D. No. bearing on this open'g header		(Totals) Add lines 1 thru 4 and enter sum on line 5
	Opening Header I.D. No.					**H-29**
1	T7-A	1515	X	1	=	1515
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					1515
6	Divide Line 5 by 2 =					757

List all roof frame members that bear their loads on the specific opening header I.D. No. listed below;

Line #	Structural member I.D. number on plans	Uplift Loads acting on this HEADER	MATH	Quantity of members with same I.D. No. bearing on this open'g header		(Totals) Add lines 1 thru 4 and enter sum on line 5
	Opening Header I.D. No.					**H-30**
1	T3-A	1637	X	1	=	1637
2	T4-A	1637	X	1	=	1637
3	T5-A	1637	X	1	=	1637
4		0	X		=	0
5	Sub-Total					4911
6	Divide Line 5 by 2 =					2456

	Opening Header I.D. No.					**H-31**
1	G3-B	4199	X	1	=	4199
2	J2-A	392	X	1	=	392
3	J3-A	392	X	1	=	392
4	J4-A	392	X	1	=	392
5	Sub-Total					5376
6	Divide Line 5 by 2 =					2688

	Opening Header I.D. No.					**H-32**
1	J2-A	392	X	1	=	392
2	J3-A	392	X	1	=	392
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					784
6	Divide Line 5 by 2 =					392

	Non-Bear'g	Opening Header I.D. No.				**H-33**
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	Opening Header I.D. No.					**H-34**
1	J1-A	458	X	2	=	915
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					915
6	Divide Line 5 by 2 =					458

	Opening Header I.D. No.					**H-35**
1	J1-A	458	X	2	=	915
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					915
6	Divide Line 5 by 2 =					458

	Opening Header I.D. No.					**H-36**
1	G3-A	4199	X	1	=	4199
2	J2-A	392	X	1	=	392
3	J3-A	392	X	1	=	392
4	J4-A	392	X	1	=	392
5	Sub-Total					5376
6	Divide Line 5 by 2 =					2688

	Opening Header I.D. No.					**H-37**
1	T3-A	1637	X	1	=	1637
2	T4-A	1637	X	1	=	1637
3	T5-A	1637	X	1	=	1637
4		0	X		=	0
5	Sub-Total					4911
6	Divide Line 5 by 2 =					2456

	Opening Header I.D. No.					**H-38**
1	J2-A	392	X	1	=	392
2	J3-A	392	X	1	=	392
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					784
6	Divide Line 5 by 2 =					392

	Non-Bear'g	Opening Header I.D. No.				**H-39**
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

	Opening Header I.D. No.					**H-40**
1	T8-A	1515	X	1	=	1515
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					1515
6	Divide Line 5 by 2 =					757

	Opening Header I.D. No.					**H-41**
1	T8-A	1515	X	1	=	1515
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					1515
6	Divide Line 5 by 2 =					757

	Opening Header I.D. No.					**H-42**
1	T8-A	1515	X	2	=	3029
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					3029
6	Divide Line 5 by 2 =					1515

	Opening Header I.D. No.					**H-43**
1	T8-A	1515	X	1	=	1515
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					1515
6	Divide Line 5 by 2 =					757

	Opening Header I.D. No.					**H-44**
1	T17-A	690	X	3	=	2071
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					2071
6	Divide Line 5 by 2 =					1035

	Opening Header I.D. No.					**H-45**
1	J2-A	392	X	1	=	392
2	J3-A	392	X	1	=	392
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					784
6	Divide Line 5 by 2 =					392

	Opening Header I.D. No.					**H-46**
1	J1-A	458	X	1	=	458
2	J2-A	392	X	1	=	392
3	J3-A	392	X	1	=	392
4		0	X		=	0
5	Sub-Total					1242
6	Divide Line 5 by 2 =					621

	Opening Header I.D. No.					**H-47**
1	J1-A	458	X	1	=	458
2	J2-A	392	X	1	=	392
3	J3-A	392	X	1	=	392
4		0	X		=	0
5	Sub-Total					1242
6	Divide Line 5 by 2 =					621

	Opening Header I.D. No.					**H-48**
1	T17-A	690	X	1	=	690
2	T16-A	690	X	1	=	690
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					1381
6	Divide Line 5 by 2 =					690

EQUAL TO	Opening Header I.D. No.					**H-49**
1	J3-A	392	X	2	=	784
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					784
6	Divide Line 5 by 2 =					392

EQUAL TO	Opening Header I.D. No.					**H-50**
1	J3-A	392	X	3	=	1177
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					1177
6	Divide Line 5 by 2 =					588

EQUAL TO	Opening Header I.D. No.					**H-51**
1	J3-A	392	X	2	=	784
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					784
6	Divide Line 5 by 2 =					392

	Opening Header I.D. No.					**H-52**
1	J1-A	458	X	3	=	1373
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					1373
6	Divide Line 5 by 2 =					686

	Opening Header I.D. No.					**H-53**
1	J1-A	458	X	3	=	1373
2	J2-A	392	X	1	=	392
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					1765
6	Divide Line 5 by 2 =					883

	Opening Header I.D. No.					**H-54**
1		0	X		=	0
2		0	X		=	0
3		0	X		=	0
4		0	X		=	0
5	Sub-Total					0
6	Divide Line 5 by 2 =					0

List I.D. numbers of all Opening Headers along with their respective Line #6 load values on the Connector Specification Chart.

STEP No. 8 Note: After ID Number *(except Girders)* indicate "0" is *without* overhang or "1" is *with* overhang

EXCEPTION: Indicate "0" for roof frame member END that extends over open area and "1" for opposite end.

Calculate lateral loads perpendicular and horizontal to bearing surface for all roof frame members.

General Information

Roof Pitch	1:12	2:12	3:12	4:12	5:12	6:12	7:12	8:12	9:12	10:12	11:12	12:12
Pitch Factor	1.00	1.01	1.03	1.05	1.08	1.12	1.16	1.20	1.25	1.30	1.36	1.41
Force factor	0.94	0.89	0.84	0.79	0.74	0.70	0.67	0.62	0.59	0.56	0.52	0.50
Pitch Angle	5 Deg.	10 Deg.	14 Deg.	19 Deg.	23 Deg.	27 Deg.	30 Deg.	34 Deg.	37 Deg.	40 Deg.	43 Deg.	45 Deg.

Roof Pitch	1	2	3	4	5	6	7	8	9	10	11	12
Ratio	1:12	2:12	3:12	4:12	5:12	6:12	7:12	8:12	9:12	10:12	11:12	12:12
Perpendicular Force factor	0.03	0.06	0.09	0.13	0.17	0.21	0.25	0.30	0.35	0.40	0.46	0.50
Horizontal Force factor	0.02	0.05	0.07	0.11	0.14	0.17	0.20	0.24	0.28	0.32	0.37	0.40

Roof frame member I.D. No. on plans	▼	Col. A Uplift load from Steps 3, 5 or 6	Col. B Enter Roof Pitch (rise / foot) inches	Col. C Enter Perpendicular Force factor from above	Col. D Enter Horizontal Force factor from above	Col. E Lateral Load Perpendicular to bearing surface Lbs.	Col. F Lateral Load Horizontal to bearing surface Lbs.	Roof frame member I.D. No. on plans	▼	Col. A Uplift load from Steps 3, 5 or 6	Col. B Enter Roof Pitch (rise / foot) inches	Col. C Enter Perpendicular Force factor from above	Col. D Enter Horizontal Force factor from above	Col. E Lateral Load Perpendicular to bearing surface Lbs.	Col. F Lateral Load Horizontal to bearing surface Lbs.
G1-A	1	1979	4	0.09	0.07	182	146	T10-A	0	1122	4	0.09	0.07	103	83
G1-B	1	1979	4	0.09	0.07	182	146	T10-B	1	1515	4	0.09	0.07	140	112
G2-A	0	4331	4	0.09	0.07	399	319	T11-A	0	1122	4	0.09	0.07	103	83
G2-B	1	4461	4	0.09	0.07	411	329	T11-B	1	1515	4	0.09	0.07	140	112
G3-A	1	4199	4	0.09	0.07	387	309	T12-A	0	1122	4	0.09	0.07	103	83
G3-B	1	4199	4	0.09	0.07	387	309	T12-B	1	1515	4	0.09	0.07	140	112
G4-A	0	5162	4	0.09	0.07	475	380	T13-A	0	1122	4	0.09	0.07	103	83
G4-B	1	5932	4	0.09	0.07	546	437	T13-B	1	1515	4	0.09	0.07	140	112
G5-A	1	1730	4	0.09	0.07	159	127	T14-A	0	1122	4	0.09	0.07	103	83
G5-B	1	1730	4	0.09	0.07	159	127	T14-B	1	1515	4	0.09	0.07	140	112
G6-A	0	2026	4	0.09	0.07	187	149	T15-A	0	1122	4	0.09	0.07	103	83
G6-B	0	2026	4	0.09	0.07	187	149	T15-B	1	1515	4	0.09	0.07	140	112
G7-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	T16-A	0	690	4	0.09	0.07	64	51
G7-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	T16-B	1	1152	4	0.09	0.07	106	85
G8-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	T17-A	0	690	4	0.09	0.07	64	51
G8-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	T17-B	1	1152	4	0.09	0.07	106	85
G9-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	K1-A	0	468	4	0.09	0.07	43	34
G9-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	K1-B	1	1221	4	0.09	0.07	113	90
G10-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J1-A	0	458	4	0.09	0.07	42	34
G10-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J1-B	1	1150	4	0.09	0.07	106	85
G11-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J2-A	0	392	4	0.09	0.07	36	29
G11-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J2-B	1	1085	4	0.09	0.07	100	80
G12-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J3-A	0	392	4	0.09	0.07	36	29
G12-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J3-B	1	1085	4	0.09	0.07	100	80
G13-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J4-A	0	392	4	0.09	0.07	36	29
G13-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J4-B	1	1085	4	0.09	0.07	100	80
G14-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J6-A	0	480	4	0.09	0.07	44	35
G14-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	J6-B	1	480	4	0.09	0.07	44	35
G15-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
G15-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
G16-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
G16-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
G17-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
G17-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
G18-A	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
G18-B	0	#N/A	#N/A	#N/A	#N/A	#N/A	#N/A	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
T1-A	1	1202	4	0.09	0.07	111	89	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
T1-B	1	1202	4	0.09	0.07	111	89	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
T2-A	1	1202	4	0.09	0.07	111	89	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
T2-B	1	1202	4	0.09	0.07	111	89	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
T3-A	1	1637	4	0.09	0.07	151	121	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
T3-B	1	1637	4	0.09	0.07	151	121	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
T4-A	1	1637	4	0.09	0.07	151	121	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
T4-B	1	1637	4	0.09	0.07	151	121	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
T5-A	1	1637	4	0.09	0.07	151	121	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
T5-B	1	1637	4	0.09	0.07	151	121	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
T6-A	1	1515	4	0.09	0.07	140	112	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
T6-B	1	1515	4	0.09	0.07	140	112	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
T7-A	1	1515	4	0.09	0.07	140	112	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
T7-B	1	1515	4	0.09	0.07	140	112	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
T8-A	1	1515	4	0.09	0.07	140	112	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
T8-B	1	1515	4	0.09	0.07	140	112	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
T9-A	0	1122	4	0.09	0.07	103	83	-A	0	#N/A		#N/A	#N/A	#N/A	#N/A
T9-B	1	1515	4	0.09	0.07	140	112	-B	0	#N/A		#N/A	#N/A	#N/A	#N/A
BEGIN NEXT COLUMN								STOP							
Columns & Calculation Instructions		A	B	C	D	E	F	Column & Calculation Instructions		A	B	C	D	E	F
					A x C = E		A x D = F						A x C = E		A x D = F

STEP No. 9A PERPENDICULAR SHEAR LOADS ON WOOD FRAMED GABLES AT TOP OF WALL OR AT ROOF LINE FOR CONTINUOUS FRAMED GABLE END WALLS

Gable I.D. number on plans	Ridge hgth. above top of wall Feet	Gable width at top of wall--feet	Roof pitch (rise/foot) Inches	End Zone width Feet	Distance from top of wall to floor Feet (1)**	Effective End Zone area Sq. Ft.	Effective Interior Zone area Sq. Ft.	Zone Coefficients		Perpendicular Shear Loads		
								End Zone (2)**	Interior Zone (2)**	Components and Cladding in the		MWFRS PLF at Roof or at Ceiling line
										End zone PLF	Int. zone PLF	
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0
	0.00			0.00		0	0	1.50	1.30	0	0	0

(1) If masonry wall enter zero "0"** **(2)** Select coefficients from chart shown after STEP 9D**

NOTE: All ceiling diaphragms abutting any exterior or interior load bearing walls including end walls shall be backed adjacent to these walls with 2x blocking and approved fasteners for the ceiling diaphragm along the perimeter of these walls shall be on the following centers: Wind Velocity to 110 mph; fasteners at 7" O.C. & Wind Velocity from 110 mph to 140 mph; fasteners at 5" O.C.

STEP No. 9B LATERAL SHEAR LOADS FOR ENDWALLS, SIDEWALLS AND INTERIOR SHEARWALLS

Subject shearwall I.D. number on plans	Roof top hgth. from finish floor Feet	Lgth. of loading wall acting on subject wall (Feet)	Subject wall lgth.	1st Floor Distance between floors (feet)	2nd Floor Floor to top of wall Distance (feet)	Effective Roof area Sq. Ft.	Effective Wall area Sq. Ft.	Coefficients for		Velocity Pressure Pounds per sq. ft.	Lateral shear load on subject wall (PLF)	Overturn'g reaction at base end of shearwall
								Roof Zone Area	Wall Zone Area			
S1	15.33	16.00	21.00	11.33	0.00	32	45	0.84	1.72	44.3	221	2506
E1	15.33	21.00	16.00	11.33	0.00	42	59	0.84	1.72	44.3	381	4316
E2	15.33	21.00	16.00	11.33	0.00	42	59	0.84	1.72	44.3	381	4316
S2	14.50	32.50	37.67	0.00	9.00	89	146	0.84	1.72	51.4	446	4011
S3	14.50	35.67	37.67	0.00	9.00	98	161	0.84	1.72	51.4	489	4402
S4	14.50	21.00	18.00	0.00	9.00	58	95	0.84	1.72	51.4	603	5424
E3	14.50	37.67	50.33	0.00	9.00	104	170	0.84	1.72	51.4	387	3480
E4	14.50	37.67	32.67	0.00	9.00	104	170	0.84	1.72	51.4	596	5361
E5	14.50	18.00	21.00	0.00	9.00	50	81	0.84	1.72	51.4	443	3985
E6	14.50	18.00	24.00	0.00	9.00	50	81	0.84	1.72	51.4	387	3487
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0
						0	0	0.84	1.72		0	0

Note 1. This calculation compensates for bi-lateral shear forces generating torsion on the diaphragm.

Note 2. See Engineer's Select-A-Spec for wall stud size, stud center distance and stud material with species.

Note 3. See Engineer's Select-A-Spec for wall sheathing diaphragm thickness, sheathing material, nail size and nailing center distance.

STEP No. 9C Calculate Uplift Shear Loads for all Wood Frame Walls (plf)

This step will determine if uplift loads exceed the shear capacity of the specified wall diaphragm and nailing.

***** Omit any roof structural member having a direct vertical connector tie to the foundation, such as girders, beams & headers.***

Wall I.D. Number EW# SW# XW#	Add total uplift loads for all roof members bearing on top of wall ** Enter value here	MATH	Length of Wall Less all opening widths		Equals Uplift Shear Load (PLF)	MATH	Enter Wall Uplift Shear Capacity		If Neg. STOP! If POS. Cont. ▶	Connectors for Stud to plates			MATH	Enter Value JJ ▼		Maximum center distance between connectors (Feet)
										Top Plate part No. (list now)	Sill Plate part No. (list now)	Min. Rated uplift load for the connector				
S2	3664	/	19	=	193	-	316	=	-123				/	-123	=	0.00
S3	1962	/	11	=	178	-	316	=	-138				/	-138	=	0.00
S4	1258	/	8	=	157	-	316	=	-159				/	-159	=	0.00
E3	8050	/	30	=	268	-	316	=	-48				/	-48	=	0.00
E4	3366	/	15	=	224	-	316	=	-92				/	-92	=	0.00
E5	2760	/	14	=	197	-	316	=	-119				/	-119	=	0.00
E6	4524	/	20	=	226	-	316	=	-90				/	-90	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00
		/		=	0	-		=	0				/	0	=	0.00

Note: If uplift shear loads exceed shearwall uplift capacities additional connectors will be required to tie studs to sill plate and to double top plates.

▲ JJ

Specify connector manufacturer HERE ▶ ____________________

Coefficients for lateral and perpendicular shear calculations on walls of ENCLOSED buildings with a mean roof height of less than 60 feet.

From ASCE Standard 7-93, Figure 3. ("GCp" includes gust response factors from Table 8)

WALL COEFFICIENTS

Zone Square Footage (Effective Wind Area) With roof pitch angle LESS than 10 degrees	0 to 10 Sq. Ft.	10 t0 20 Sq. Ft.	20 to 50 Sq. Ft.	50 to 100 Sq. Ft.	100 to 200 Sq. Ft.	200 to 500 Sq. Ft.	500 to 1,000 Sq. Ft.
End Zone Coefficient (Negative Value) #5	1.80	1.71	1.53	1.40	1.24	1.11	0.99
Interior Zone Coefficient (Negative Value) #4	1.35	1.31	1.24	1.17	1.10	1.04	0.99
End Zone Coefficient (Positive Value) #5	1.17	1.15	1.09	1.04	0.98	0.95	0.90
Interior Zone Coefficient (Positive Value) #4	1.17	1.15	1.09	1.04	0.98	0.95	0.90

WALL COEFFICIENTS **With roof pitch angle MORE than 10 degrees**	0 to 10 Sq. Ft.	10 t0 20 Sq. Ft.	20 to 50 Sq. Ft.	50 to 100 Sq. Ft.	100 to 200 Sq. Ft.	200 to 500 Sq. Ft.	500 to 1,000 Sq. Ft.
End Zone Coefficient (Negative Value) #5	2.00	1.90	1.70	1.55	1.38	1.23	1.10
Interior Zone Coefficient (Negative Value) #4	1.50	1.45	1.38	1.30	1.22	1.15	1.10
End Zone Coefficient (Positive Value) #5	1.30	1.28	1.21	1.16	1.09	1.05	1.00
Interior Zone Coefficient (Positive Value) #4	1.30	1.28	1.21	1.16	1.09	1.05	1.00

GABLE END WALL NOTES:

Gable Wall requirements with VAULTED ceilings:
Framed walls must be continuous floor to roof, masonry walls to be continuous or have wood gables secured to a level bond beam.

SPECIAL BRACING:
All ceiling support members within 8 feet of the exterior gable wall must have 2x4 blocking between them at 48" on center, plus crossed diagonal 2x4 bracing from ceiling line to roof diaphragm at 8 feet on center.
If the ridge height of a gable truss exceeds 8 ft. above the flat ceiling line, a wood gable shall be hand framed with 2 x GG at 16 " O.C..

Masonry endwalls may have wood truss or hand framed gable with 2x8 P.T. Pine sill bolted to bond beam with 1/2" dia anchor bolts at the following centers per wind velocity (mph)

Velocity	up to 101	101 to 120	121 to 140
Bolt Ctrs.	4 feet	3 feet	2 feet

Extreme fiber in bending, fb = 1000 if < 101 mph
Extreme fiber bending = 1200 if >101 & < 121 mph
Extreme fiber bending = 1400 if >121 & < 141 mph

Gable end wall requirements with FLAT Ceilings:
All gable end walls must be continuous framed or continuous masonry from the floor to the flat ceiling line.

GG **Gable Stud Size**	Wind (mph) Velocity	**Maximum Gable Ridge Height Above Ceiling**					
		8 Feet	10 feet	12 feet	14 feet	16 feet	18 feet
	up to 100	2x4	2x4	2x6	2x6	2x6	2x8
	101 to 120	2x4	2x6	2x8	2x8	2x8	2x10
	121 to 140	2x6	2x8	2x8	2x8	2x10	2x10

Engineer Approved Connector Specification Chart

Changes to this chart must be accompanied by an Engineering Change Order from a Registered Engineer.

Connector location symbol key

"A"	"B"	"C"	"D"	"E"	"F"	"G"	"H"	"I"
Roof frame	Wall stud(s)	Opening Headers	Foundation or	Gable to	Rim Joist to	Column bases	Two story, lower	Special
member to top	to sill, plate	to studs, jacks	stemwall to	top of wall	stud including	and	wall to 2nd floor	Location
of wall	or foundation	or cripples	rim joist or sill		and/or sill plate	Column caps	to upper wall	"Describe"

Connector Manufacturer symbol key

HUGHES Manufacturing, Inc.	Simpson Strong-Tie Company, Inc.	Southeastern Metals Mfg. Co.,Inc.	Other manufacturers, Specify Name	
Use the Letter "H"	Use the Letter "ST"	Use the Letter "SM"	Use "X"	

CONNECTOR CHART

Fasteners to be as per manufacturer's recommendation unless otherwise noted

Structural member I.D. No. as shown on Plans	Enter load values, use 2 lines if load differs at ends of same member			Connector Symbols		Manufacturer's connector Part Number	Quantity req'd. at each LOCATION	Size of nails and number of nails required at each connector	Building Inspector's Check-Off Column
	Uplift Load at bearing point	Perpendicular load to bearing	Horizontal load to bearing	For location	For Mfg.				
G1-A	1979	182	146	"A"	"H"	SA 18	1	12-16d	
G1-B	1979	182	146	"A"	"H"	SA 18	1	12-16d	
G2-A	4331	399	319	"A"	"H"	WWUC	1	4-3/4"MB	
G2-B	4461	411	329	"A"	"H"	WWUC	1	4-3/4"MB	
G3-A	4199	387	309	"A"	"H"	WWUC	1	4-3/4"MB	
G3-B	4199	387	309	"A"	"H"	WWUC	1	4-3/4"MB	
G4-A	5162	475	380	"A"	"H"	WWUC	1	4-3/4"MB	
G4-B	5932	546	437	"A"	"H"	WWUC	1	4-3/4"MB	
G5-A	1730	159	127	"A"	"H"	HC 20	2	9-8d	
G5-B	1730	159	127	"A"	"H"	HC 20	2	9-8d	
G6-A	2026	187	149	"A"	"H"	HC 20	2	9-8d	
G6-B	2026	187	149	"A"	"H"	HC 20	2	9-8d	
G7-A	#N/A	#N/A	#N/A						
G7-B	#N/A	#N/A	#N/A						
G8-A	#N/A	#N/A	#N/A						
G8-B	#N/A	#N/A	#N/A						
G9-A	#N/A	#N/A	#N/A						
G9-B	#N/A	#N/A	#N/A						
G10-A	#N/A	#N/A	#N/A						
G10-B	#N/A	#N/A	#N/A						
G11-A	#N/A	#N/A	#N/A						
G11-B	#N/A	#N/A	#N/A						
G12-A	#N/A	#N/A	#N/A						
G12-B	#N/A	#N/A	#N/A						
G13-A	#N/A	#N/A	#N/A						
G13-B	#N/A	#N/A	#N/A						
G14-A	#N/A	#N/A	#N/A						
G14-B	#N/A	#N/A	#N/A						
G15-A	#N/A	#N/A	#N/A						
G15-B	#N/A	#N/A	#N/A						
G16-A	#N/A	#N/A	#N/A						
G16-B	#N/A	#N/A	#N/A						
G17-A	#N/A	#N/A	#N/A						
G17-B	#N/A	#N/A	#N/A						
G18-A	#N/A	#N/A	#N/A						
G18-B	#N/A	#N/A	#N/A						
T1-A	1202	111	89	"A"	"H"	HTA 16	1	8-10d x 1-1/2"	
T1-B	1202	111	89	"A"	"H"	HTA 16	1	8-10d x 1-1/2"	
T2-A	1202	111	89	"A"	"H"	HTA 16	1	8-10d x 1-1/2"	
T2-B	1202	111	89	"A"	"H"	HTA 16	1	8-10d x 1-1/2"	
T3-A	1637	151	121	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T3-B	1637	151	121	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T4-A	1637	151	121	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T4-B	1637	151	121	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T5-A	1637	151	121	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T5-B	1637	151	121	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
STOP									

CONNECTOR CHART (Cont.)

Fasteners to be as per manufacturer's recommendation unless otherwise noted

Structural member I.D. No. as shown on Plans	Enter load values, use 2 lines if load differs at ends of same member			Connector Symbols		Manufacturer's connector Part Number	Quantity req'd. at each LOCATION	Size of nails and number of nails required at each connector	Building Inspector's Check-Off Column
	Uplift Load at bearing point	Perpendicular load to bearing	Horizontal load to bearing	For location	For Mfg.				
T6-A	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T6-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T7-A	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T7-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T8-A	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T8-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T9-A	1122	103	83	"A"	"H"	HC 10	1	9-10d x 1-1/2"	
T9-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T10-A	1122	103	83	"A"	"H"	By others			
T10-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T11-A	1122	103	83	"A"	"H"	By others			
T11-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T12-A	1122	103	83	"A"	"H"	By others			
T12-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T13-A	1122	103	83	"A"	"H"	By others			
T13-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T14-A	1122	103	83	"A"	"H"	By others			
T14-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T15-A	1122	103	83	"A"	"H"	By others			
T15-B	1515	140	112	"A"	"H"	HC 10	2	9-10d x 1-1/2"	
T16-A	690	64	51	"A"	"H"	HC 10	1	9-10d x 1-1/2"	
T16-B	1152	106	85	"A"	"H"	HC 10	1	9-10d x 1-1/2"	
T17-A	690	64	51	"A"	"H"	HC 10	1	9-10d x 1-1/2"	
T17-B	1152	106	85	"A"	"H"	HC 10	1	9-10d x 1-1/2"	
K1-A	468	43	34	"A"	"H"	UH 24 L/R	1	6-16d	
K1-B	1221	113	90	"A"	"H"	HHCP 2	1	20-10d x 1-1/2"	
J1-A	458	42	34	"A"	"H"	U 2-4	1	11-16d	
J1-B	1150	106	85	"A"	"H"	HC 10	1	9-10d x 1-1/2"	
J2-A	392	36	29	"A"	"H"	U 2-4	1	11-16d	
J2-B	1085	100	80	"A"	"H"	HC 10	1	9-10d x 1-1/2"	
J3-A	392	36	29	"A"	"H"	U 2-4	1	11-16d	
J3-B	1085	100	80	"A"	"H"	HC 10	1	9-10d x 1-1/2"	
J4-A	392	36	29	"A"	"H"	U 2-4	1	11-16d	
J4-B	1085	100	80	"A"	"H"	HC 10	1	9-10d x 1-1/2"	
J6-A	480	44	35	"A"	"H"	U 2-4	1	11-16d	
J6-B	480	44	35	"A"	"H"	U 2-4	1	11-16d	
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						
-A	#N/A	#N/A	#N/A						
-B	#N/A	#N/A	#N/A						

Header CONNECTOR CHART

(Fasteners to be as per manufacturer's recommendation unless otherwise noted)

Structural member I.D. No. as shown on Plans	HEADER Uplift Load	At Top of Header to Jack Studs			Size of nails and number of nails required at each connector	At Bottom of Header to Jack Studs			Size of nails and number of nails required at each connector
		Symbol For Mfg.	Manufacturer's connector Part Number	Quantity req'd. at each LOCATION		Symbol For Mfg.	Manufacturer's connector Part Number	Quantity req'd. at each LOCATION	
H-1	0								
H-2	0								
H-3	0								
H-4	0								
H-5	0								
H-6	0								
H-7	0								
H-8	0								
H-9	1202								
H-10	1185								
H-11	392								
H-12	392								
H-13	2387								
H-14	0								
H-15	0								
H-16	0								
H-17	0								
H-18	0								
H-19	0								
H-20	0								
H-21	0								
H-22	0								
H-23	0								
H-24	0								
H-25	392	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-26	1122	"H"	HS 12	1	10-16d	"H"	TP 6X	1	10-16d
H-27	1515	"H"	HS 12	1	16-16d	"H"	TP 6X	1	16-16d
H-28	1515	"H"	HS 12	1	16-16d	"H"	TP 6X	1	16-16d
H-29	757	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-30	2456	"H"	HCC 66 series	1	5/8" MB all holes	"H"	HCC 66 series	1	5/8" MB all holes
H-31	2688	"H"	HCC 66 series	1	5/8" MB all holes	"H"	HCC 66 series	1	5/8" MB all holes
H-32	392	"H"	HCC 66 series	1	5/8" MB all holes	"H"	HCC 66 series	1	5/8" MB all holes
H-33	0								
H-34	458	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-35	458	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-36	2688	"H"	HCC 66 series	1	5/8" MB all holes	"H"	HCC 66 series	1	5/8" MB all holes
H-37	2456	"H"	HCC 66 series	1	5/8" MB all holes	"H"	HCC 66 series	1	5/8" MB all holes
H-38	392	"H"	HCC 66 series	1	5/8" MB all holes	"H"	HCC 66 series	1	5/8" MB all holes
H-39	0		Non-Bearing						
H-40	757	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-41	757	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-42	1515	"H"	HS 12	1	16-16d	"H"	TP 6X	1	16-16d
H-43	757	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-44	1035	"H"	HS 12	1	10-16d	"H"	TP 6X	1	10-16d
H-45	392	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-46	621	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-47	621	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-48	690	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-49	392	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-50	588	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-51	392	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-52	686	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-53	883	"H"	HS 12	1	8-16d	"H"	TP 6X	1	8-16d
H-54	0								
STOP									

Remarks: ALL STUD TO TOP PLATE CONNECTIONS SHALL BE AT 4'-0" MAX. CENTER DISTANCE & USE A HUGHES PART NUMBER TP 6X WITH 8 #10d NAILS 1-1/2" LG.

WHERE TP 6X CONNECTOR IS USED AT BOTTOM OF HEADER JACK STUDS ANOTHER TP 6X CONNECTOR WITH SAME NAIL SPECIFICATION MUST BE INSTALLED ABOVE AT DOUBLE TOP PLATE TO HEADER

Designer's Specifications for Wood and Masonry Construction including Roof Sheathing:

Notes: All fastenings must be in strict compliance with the 1994 S.B.C.C.I. Code "2306" and, or meet local requirements.
All Wood Construction must conform to the provisions of Chapter 23 in the 1994 S.B.C.C.I. Standard Building Code and, or meet the local requirements of any other applicable code or code amendments adopted by the community in which this specific structure is being constructed, unless otherwise specified by the engineer.
All Masonry Construction must conform to the provisions of Chapter 21 in the 1994 S.B.C.C.I. Standard Building Code and, or meet the local requirements of any other applicable code or code amendments adopted by the community in which this specific structure is being constructed, unless otherwise specified by the engineer.

Any specification shown hereon shall supersede any conflicting specification shown on the submitted drawings.

Masonry and Wood Const. Roof sheathing to be:		Wood Construction: Single story or two story 2nd floor wall sheathing & studs		Wood Construction: Two story first floor wall sheathing & studs		Masonry Construction of Hollow Load Bearing Units: Single story or two story 2nd floor wall const.		Masonry Construction of Hollow Load Bearing Units: First floor wall construction for a two story structure	
Thick	19/32"	Thick	19/32"	Thick		Wall reinforcing per spacing		Wall reinforcing per spacing	
Mat'l.	CDX PlyWd.	Mat'l.	CDX PlyWd.	Mat'l.		Bar size		Bar size	No. 5
nail size	10d	nail size	10d	nail size		Bars req'd		Bars req'd	sgl./cell
nailing	4" O.C.	**Shearwall lateral load**		**Shearwall lateral load**		Dowel size		Dowel size	No. 5
Ply-clip	Yes	nailing*	3"O.C.	nailing*	"O.C.	Max. Ctrs.		Max. Ctrs.	7'-0"
Part #	PW 58G	**Shearwall uplift load**		**Shearwall uplift load**		Wall thick		Wall thick	8 inches
1 Story Footings		nailing*	3"O.C.	nailing*	"O.C.	Bond beam		Bond beam	cmu
size	16"x20"	**Studs**	2x6	**Studs**	X	beam size		beam size	8" X 16"
stl. req'd	3 #5 bars	Centers	16" inches	Centers	inches	steel req'd		steel req'd	2 #5 bars
concrete	2500	Species	Fir	Species		Grout		Grout	3500 PSI
2 Story Footings		& Grade	#2 +	& Grade		Min shear		Min shear	15' end wall
size	16"x20"	**Sill plate anchor**		**Sill plate anchor**		wall lgth.		wall lgth.	11' side wall
stl. req'd	3 #5 bars	Part #	HC 20	Part #		**8" Masonry Gable**			
concrete	2500	Max ctr.	32"	Max ctr.		Wall reinforcing per spacing		Rake beam requirements	
Remarks: All connector part nos. are Hughes Mfg.		Remarks: *Nailing center distance specified above is for perimeter edge of sheathing, interior nailing of sheathing is 12"O.C.				Bar size		Bar size	
						Bars req'd		Bars req'd	
						Max. Ctrs.		Min. Depth	

This Engineer certifies that I have directed, supervised and reviewed these Wind Load Calculations and declare that the wind load values, connector specifications and material specifications shown hereon have been properly determined by the provisions of ASCE Standard 7-93, Section 6, for this specific structure. An impact resistance code has not been specified by this engineer for the exterior window and door openings of this structure. Storm panels are recommended.

Note: This ENGINEER has delegated other engineers to design and certify the structural credibility of any pre-engineered and manufactured structural building components or roof / floor truss systems including required connectors (factory or field installed) which are intrinsically associated parts of the components or truss systems.

ENGINEER'S SPECIAL INSTRUCTIONS & REMARKS:

This Engineer performed these wind load calculations only, and should not to be considered the Engineer of Record with total responsibility for all specifications relative to this entire structure and specific site location including energy code, electrical, plumbing, HVAC, soil conditions, survey & drainage unless otherwise indicated.

Contractor	Tom Lucido (owner/builder) Address 7 Quale Run
City/State/Zip	Town of Sewall's Point, FL. Phone: 220-2100 or 287-6131
Job Address	Sabal Court City Town of Sewall's Point
Building Dept.	Town of Sewall's Point, Florida
Legal Description:	Lot No. 4, Ridgeland SD
Residence for:	Mr. and Mrs. Thomas Lucido
Engineer's Name	Herrick / Wingler & Associates (Paul A. Wingler, PE)
State Registration Number	12350 in the State of Florida
Address	(New York Firm) Local Agent: Bob Herrick, 2962 S.E. Fairway West
City	Stuart State FL Zip 34997
Phone (Area code)	561 Number 220-5967 Fax 220-5968

ENGINEER'S SEAL

ENGINEER'S SIGNATURE: Paul A. Wingler

Date: 6-29-98

Polly Tek APPROVED computer generated wind load calculation program in accord with A.S.C.E. Standard 7-93

RIGHT-J LOAD AND EQUIPMENT SUMMARY

File name: Herrich, Luc 6/25/98

For: Mr. Bob Herrick
2962 SE Fairway West
Stuart Fl
(561) 220-5967

By: Economy Air Conditioning Inc
P.O. Box 1426
Palm City Fl 34990
(561) 221-1147

Lucido Residence
Sewall's Point
First Floor

Job # Herrick, Lucido Res.
Wthr West_Palm_Beach_AP FL
Zone Entire House

WINTER DESIGN CONDITIONS

Outside db:	45	Deg F
Inside db:	70	Deg F
Design TD:	25	Deg F

SUMMER DESIGN CONDITIONS

Outside db:	95	Deg F
Inside db:	75	Deg F
Design TD:	20	Deg F
Daily Range	M	
Rel. Hum. :	50	%
Grains Water	60	gr

HEATING SUMMARY

Bldg. Heat Loss	28111	Btuh
Ventilation Air	0	CFM
Vent Air Loss	0	Btuh
Design Heat Load	28111	Btuh

SENSIBLE COOLING EQUIP LOAD SIZING

Structure	38163	Btuh
Ventilation	0	Btuh
Design Temp. Swing	3.0	Deg F
Use Mfg. Data	n	
Rate/Swing Mult.	1.00	
Total Sens Equip Load	38163	Btuh

INFILTRATION

Method	Simplified
Construction Quality	Average
Fireplaces	0

	HEATING	COOLING
Area (sq.ft.)	1687	1687
Volume (cu.ft.)	16870	16870
Air Changes/Hour	0.8	0.4
Equivalent CFM	225	113

LATENT COOLING EQUIP LOAD SIZING

Internal Gains	5290	Btuh
Ventilation	0	Btuh
Infiltration	4598	Btuh
Tot Latent Equip Load	9888	Btuh
Total Equip Load	48051	Btuh

HEATING EQUIPMENT SUMMARY

Make Janitrol
Model AE48-10
Type Air Handler (Variable)

Efficiency / HSPF	100.00	
Heating Input	34100	Btuh
Heating Output	34100	Btuh
Heating Temp Rise	17	Deg F
Actual Heating Fan	1800	CFM
Htg Air Flow Factor	0.064	CFM/Btuh
Space Thermostat	H, C, Auto	

COOLING EQUIPMENT SUMMARY

Make Janitrol
Model CHJ48-1
Type Condenser

COP/EER/SEER	13.00	
Sensible Cooling	34300	Btuh
Latent Cooling	12700	Btuh
Total Cooling	47000	Btuh
Actual Cooling Fan	1800	CFM
Clg Air Flow Factor	0.047	CFM/Btuh
Load Sens Heat Ratio	79	

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Bob Both
Bill 000008-18

RIGHT-J CALCULATION PROCEDURES A, B, C, D

Job #: Herrick, Lucido Res. File name: Herrich, Luc 6/25/98
Zone: Entire House

Procedure A - Winter Infiltration HTM Calculation*

1.	Winter Infiltration CFM				
	0.8 AC/HR x	16870 Cu.Ft. x 0.0167 =		225	CFM
2.	Winter Infiltration Btuh				
	1.1 x	225 CFM x	25 Winter TD =	6198	Btuh
3.	Winter Infiltration HTM				
	6198 Btuh /	407 Total Window and Door Area =		15.2	HTM

Procedure B - Summer Infiltration HTM Calculation*

1.	Summer Infiltration CFM				
	0.4 AC/HR x	16870 Cu.Ft. x 0.0167 =		113	CFM
2.	Summer Infiltration Btuh				
	1.1 x	113 CFM x	20 Summer TD =	2479	Btuh
3.	Summer Infiltration HTM				
	2479 Btuh /	407 Total Window and Door Area =		6.1	HTM

Procedure C - Latent Infiltration Gain

0.68 x	60 gr.diff. x	113 CFM =	4598	Btuh

Procedure D - Equipment Sizing Loads

1.	Sensible Sizing Load				
	Sensible Ventilation Load				
	1.1 x 0 Vent.CFM x	20 Summer TD	=	0	Btuh
	Sensible Load for Structure (Line 19)		+	38163	Btuh
	Sum of Ventilation and Structure Loads		=	38163	Btuh
	Rating and Temperature Swing Multiplier		x	1.00	RSM
	Equipment Sizing Load - Sensible		+	38163	Btuh
2.	Latent Sizing Load				
	Latent Ventilation Load				
	0.68 x 0 Vent.CFM x	60 gr.diff.	=	0	Btuh
	Internal Loads = 230 x	23 No. People	+	5290	Btuh
	Infiltration Load From Procedure C		+	4598	Btuh
	Equipment Sizing Load - Latent		=	9888	Btuh

*Construction Quality is: a No. of Fireplaces is: 0

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Herrich, Luc Job# Herrick, Lucido Res. Zone: Entire House 6/25/98

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1	Name of Room					Entire House			Gathering Room			Kitchen			Breakfast		
2	Running Ft. Exposed Wall					193.0 Ft.			53.0 Ft.			28.0 Ft.			10.0 Ft.		
3	Room Dimensions, Ft.					0.0 t.			21.0 x 16.0 Ft.			21.0 x 20.0 Ft.			12.0 x 12.0 Ft.		
4	Ceilngs, Ft	Condit. Option				10.0		d	10.0	heat/cool		10.0	heat/cool		10.0	heat/cool	
	TYPE OF EXPOSURE		CST NO.	HTM Htg	HTM Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg
5	Gross	a	14B	3.6	2.3	1930	****	****	530	****	****	280	****	****	100	****	****
	Exposed	b	13C	1.8	1.4	370	****	****	0	****	****	0	****	****	0	****	****
	Walls and	c		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
	Partitions	d		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		e		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		f		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
6	Windows and	a	1F	26.8	**	221	5917	****	92	2463	****	26	696	****	0	0	****
	Glass Doors	b	9D	19.4	**	119	2303	****	0	0	****	0	0	****	0	0	****
	Heating	c		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		d		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		e		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		f		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
7	Windows and	North			23.0	113	****	2599	16	****	368	0	****	0	0	****	0
	Glass Doors	NE/NW			0.0	0	****	0	0	****	0	0	****	0	0	****	0
	Cooling	E/W			72.0	223	****	16056	76	****	5472	26	****	1872	0	****	0
		SE/SW			0.0	0	****	0	0	****	0	0	****	0	0	****	0
		South			38.0	4	****	152	0	****	0	0	****	0	0	****	0
		Horz			0.0	0	****	0	0	****	0	0	****	0	0	****	0
8	Other doors	a	10D	11.5	10.9	67	771	727	0	0	0	0	0	0	21	242	228
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
9	Net	a	14B	3.6	2.3	1541	5548	3617	438	1577	1028	254	914	596	79	284	185
	Exposed	b	13C	1.8	1.4	352	634	475	0	0	0	0	0	0	0	0	0
	Walls and	c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
	Partitions	d		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		e		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		f		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
10	Ceilings	a		0.0	0.0	1687	0	0	336	0	0	420	0	0	144	0	0
		b	16G	0.8	1.5	336	277	488	336	277	488	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
11	Floors	a	22A	20.3	0.0	193	3908	0	53	1073	0	28	567	0	10	203	0
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
12	Infiltration	a		15.2	6.1	407	6198	2479	92	1401	560	26	396	158	21	320	128
13	Subtot Btuh Loss=6+8..+11+12					****	25555	****	****	6792	****	****	2573	****	****	1048	****
14	Duct Btuh Loss					10%	2556	****	10%	679	****	10%	257	****	10%	105	****
15	Total Btuh Loss = 13+14					****	28111	****	****	7471	****	****	2831	****	****	1153	****
16	Int. Gains:	People @			300	23	****	6900	2	****	600	0	****	0	0	****	0
		Appl. @			1200	1	****	1200	0	****	0	1	****	1200	0	****	0
17	Subtot RSH Gain=7+8..+12+16					****	****	34694	****	****	8516	****	****	3827	****	****	541
18	Duct Btuh Gain					10%	****	3469	10%	****	852	10%	****	383	10%	****	54
19	Total RSH Gain=(17+18)*PLF					1.00	****	38163	1.00	****	9368	1.00	****	4209	1.00	****	595
20	CFM Air Required					****	1800	1800	****	478	442	****	181	199	****	74	28

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Herrich, Luc Job# Herrick, Lucido Res. Zone: Entire House 6/25/98

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						Bath			Utility Room			Dining Room			Entry		
1	Name of Room					Bath			Utility Room			Dining Room			Entry		
2	Running Ft. Exposed Wall					5.0 Ft.			19.0 Ft.			19.0 Ft.			10.0 Ft.		
3	Room Dimensions, Ft.					5.0 x 8.0 Ft.			11.5 x 6.0 Ft.			12.0 x 32.0 Ft.			10.0 x 7.0 Ft.		
4	Ceilngs, Ft	Condit. Option				10.0 heat/cool			10.0 heat/cool			10.0 heat/cool			10.0 heat/cool		
	TYPE OF EXPOSURE		CST NO.	HTM Htg	HTM Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg
5	Gross	a	14B	3.6	2.3	50	****	****	190	****	****	190	****	****	100	****	****
	Exposed	b	13C	1.8	1.4	0	****	****	180	****	****	130	****	****	60	****	****
	Walls and	c		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
	Partitions	d		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		e		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		f		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
6	Windows and	a	1F	26.8	**	0	0	****	13	348	****	72	1928	****	0	0	****
	Glass Doors	b	9D	19.4	**	0	0	****	0	0	****	0	0	****	0	0	****
	Heating	c		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		d		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		e		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		f		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
7	Windows and		North		23.0	0	****	0	13	****	299	0	****	0	0	****	0
	Glass Doors		NE/NW		0.0	0	****	0	0	****	0	0	****	0	0	****	0
	Cooling		E/W		72.0	0	****	0	0	****	0	72	****	5184	0	****	0
			SE/SW		0.0	0	****	0	0	****	0	0	****	0	0	****	0
			South		38.0	0	****	0	0	****	0	0	****	0	0	****	0
			Horz		0.0	0	****	0	0	****	0	0	****	0	0	****	0
8	Other doors	a	10D	11.5	10.9	0	0	0	18	207	195	0	0	0	28	322	304
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
9	Net	a	14B	3.6	2.3	50	180	117	177	637	415	118	425	277	72	259	169
	Exposed	b	13C	1.8	1.4	0	0	0	162	292	219	130	234	176	60	108	81
	Walls and	c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
	Partitions	d		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		e		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		f		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
10	Ceilings	a		0.0	0.0	40	0	0	69	0	0	384	0	0	70	0	0
		b	16G	0.8	1.5	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
11	Floors	a	22A	20.3	0.0	5	101	0	19	385	0	19	385	0	10	203	0
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
12	Infiltration	a		15.2	6.1	0	0	0	31	472	189	72	1096	439	28	426	171
13	Subtot Btuh Loss=6+8..+11+12					****	281	****	****	2341	****	****	4068	****	****	1318	****
14	Duct Btuh Loss					10%	28	****	10%	234	****	10%	407	****	10%	132	****
15	Total Btuh Loss = 13+14					****	309	****	****	2575	****	****	4475	****	****	1450	****
16	Int. Gains: People @				300	0	****	0	0	****	0	19	****	5700	0	****	0
	Appl. @				1200	0	****	0	0	****	0	0	****	0	0	****	0
17	Subtot RSH Gain=7+8..+12+16					****	****	117	****	****	1317	****	****	11775	****	****	725
18	Duct Btuh Gain					10%	****	12	10%	****	132	10%	****	1178	10%	****	72
19	Total RSH Gain=(17+18)*PLF					1.00	****	129	1.00	****	1449	1.00	****	12953	1.00	****	797
20	CFM Air Required					****	20	6	****	165	68	****	287	611	****	93	38

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Herrich, Luc Job# Herrick, Lucido Res. Zone: Entire House 6/25/98

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1	Name of Room					Living Room													
2	Running Ft. Exposed Wall					49.0 Ft.				Ft.			Ft.			Ft.			
3	Room Dimensions, Ft.					16.0 x 14.0 Ft.				x	Ft.		x	Ft.		x	Ft.		
4	Ceilngs, Ft	Condit. Option				10.0	heat/cool												
	TYPE OF EXPOSURE		CST NO.	HTM Htg	HTM Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg		
5	Gross	a	14B	3.6	2.3	490	****	****		****	****		****	****		****	****		
	Exposed	b	13C	1.8	1.4	0	****	****		****	****		****	****		****	****		
	Walls and	c		0.0	0.0	0	****	****		****	****		****	****		****	****		
	Partitions	d		0.0	0.0	0	****	****		****	****		****	****		****	****		
		e		0.0	0.0	0	****	****		****	****		****	****		****	****		
		f		0.0	0.0	0	****	****		****	****		****	****		****	****		
6	Windows and	a	1F	26.8	**	18	482	****			****			****			****		
	Glass Doors	b	9D	19.4	**	119	2303	****			****			****			****		
	Heating	c		0.0	**	0	0	****			****			****			****		
		d		0.0	**	0	0	****			****			****			****		
		e		0.0	**	0	0	****			****			****			****		
		f		0.0	**	0	0	****			****			****			****		
7	Windows and	North			23.0	84	****	1932		****			****			****			
	Glass Doors	NE/NW			0.0	0	****	0		****			****			****			
	Cooling	E/W			72.0	49	****	3528		****			****			****			
		SE/SW			0.0	0	****	0		****			****			****			
		South			38.0	4	****	152		****			****			****			
		Horz			0.0	0	****	0		****			****			****			
8	Other doors	a	10D	11.5	10.9	0	0	0											
		b		0.0	0.0	0	0	0											
9	Net	a	14B	3.6	2.3	353	1271	829											
	Exposed	b	13C	1.8	1.4	0	0	0											
	Walls and	c		0.0	0.0	0	0	0											
	Partitions	d		0.0	0.0	0	0	0											
		e		0.0	0.0	0	0	0											
		f		0.0	0.0	0	0	0											
10	Ceilings	a		0.0	0.0	224	0	0											
		b	16G	0.8	1.5	0	0	0											
		c		0.0	0.0	0	0	0											
11	Floors	a	22A	20.3	0.0	49	992	0											
		b		0.0	0.0	0	0	0											
		c		0.0	0.0	0	0	0											
12	Infiltration	a		15.2	6.1	137	2086	835											
13	Subtot Btuh Loss=6+8..+11+12					****	7134	****	****		****	****		****	****		****		
14	Duct Btuh Loss					10%	713	****	%		****	%		****	%		****		
15	Total Btuh Loss = 13+14					****	7847	****	****		****	****		****	****		****		
16	Int. Gains:	People @			300	2	****	600		****			****			****			
		Appl. @			1200	0	****	0		****			****			****			
17	Subtot RSH Gain=7+8..+12+16					****	****	7875	****	****		****	****		****	****		****		
18	Duct Btuh Gain					10%	****	788	%	****		%	****		%	****		****		
19	Total RSH Gain=(17+18)*PLF					1.00	****	8663		****			****			****			
20	CFM Air Required					****	502	409	****			****			****				

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MANUAL J: 7th Ed. RIGHT-J: V 3.0.14 S/N 12437

RIGHT-J WINDOW DATA

Job #: Herrick, Lucido Res. File name: Herrich, Luc 6/25/98

WND W	SKY	DIR	WALL	GLAZ	LOWE	STRM	SHAD	OVHG	NGLZ	ANGL	SHCO	OVRX	OVRY	WHGT	CHTM	WNAR	SHAR
Gathering Room																	
a	n	n	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	23.0	16.0	0.0
a	n	w	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	76.0	0.0
Kitchen																	
a	n	w	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	26.0	0.0
Breakfast																	
Bath																	
Utility Room																	
a	n	n	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	23.0	13.0	0.0
Dining Room																	
a	n	w	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	72.0	0.0
Entry																	
Living Room																	
a	n	w	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	4.0	0.0
a	n	s	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	38.0	4.0	0.0
a	n	e	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	10.0	0.0
b	n	s	a	c	y	n	n	y	1	90	1.0	8.0	3.0	7.0	38.0	84.0	84.0
b	n	e	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	35.0	0.0

RIGHT-J LOAD AND EQUIPMENT SUMMARY

File name: Herick, Luci 2/26/98

For: Mr Bob Herrick
2962 SE Fairway West
Stuart Fl
(561) 220-5967

By: Economy Air Conditioning Inc
P.O. Box 1426
Palm City Fl 34990
(561) 221-1147

Lucido Residence
Sewall,s Point
Second Floor

Job # Herick,Lucido Res. 2nd FL
Wthr West_Palm_Beach_AP FL
Zone Entire House

WINTER DESIGN CONDITIONS

Outside db:	45	Deg F
Inside db:	70	Deg F
Design TD:	25	Deg F

SUMMER DESIGN CONDITIONS

Outside db:	95	Deg F
Inside db:	75	Deg F
Design TD:	20	Deg F
Daily Range	M	
Rel. Hum. :	50	%
Grains Water	60	gr

HEATING SUMMARY

Bldg. Heat Loss	24185	Btuh
Ventilation Air	0	CFM
Vent Air Loss	0	Btuh
Design Heat Load	24185	Btuh

SENSIBLE COOLING EQUIP LOAD SIZING

Structure	35750	Btuh
Ventilation	0	Btuh
Design Temp. Swing	3.0	Deg F
Use Mfg. Data	y	
Rate/Swing Mult.	1.00	
Total Sens Equip Load	35750	Btuh

INFILTRATION

Method	Simplified
Construction Quality	Average
Fireplaces	0

	HEATING	COOLING
Area (sq.ft.)	1916	1916
Volume (cu.ft.)	17244	17244
Air Changes/Hour	0.8	0.4
Equivalent CFM	230	115

LATENT COOLING EQUIP LOAD SIZING

Internal Gains	1150	Btuh
Ventilation	0	Btuh
Infiltration	4700	Btuh
Tot Latent Equip Load	5850	Btuh
Total Equip Load	41599	Btuh

HEATING EQUIPMENT SUMMARY

Make Janitrol
Model AE48-10
Type Air Handler (Variable)

Efficiency / HSPF	100.00	
Heating Input	34100	Btuh
Heating Output	34100	Btuh
Heating Temp Rise	17	Deg F
Actual Heating Fan	1800	CFM
Htg Air Flow Factor	0.074	CFM/Btuh
Space Thermostat	H,C, Auto	

COOLING EQUIPMENT SUMMARY

Make Janitrol
Model CKJ48-1
Type Condenser

COP/EER/SEER	13.00	
Sensible Cooling	34300	Btuh
Latent Cooling	12700	Btuh
Total Cooling	47000	Btuh
Actual Cooling Fan	1800	CFM
Clg Air Flow Factor	0.050	CFM/Btuh
Load Sens Heat Ratio	86	

MANUAL J: 7th Ed. RIGHT-J: V1 3.0.14 S/N 12437

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Bob Bolt
B1100008 48

Herick, Luci Job# Herick,Lucido Res. 2nd FL Zone: Entire House 2/26/98

MANUAL J: 7th Ed. — RIGHT-J: 3.0.14 — S/N 12437

1	Name of Room					Entire House			Bedroom No.4			Bath No.1			Bedroom No.3		
2	Running Ft. Exposed Wall					221.0 Ft.			33.0 Ft.			5.0 Ft.			21.0 Ft.		
3	Room Dimensions, Ft.					0.0 t.			18.0 x 14.0 Ft.			5.0 x 8.0 Ft.			16.0 x 15.0 Ft.		
4	Ceilngs, Ft	Condit. Option				9.0	d		9.0	heat/cool		9.0	heat/cool		9.0	heat/cool	
	TYPE OF EXPOSURE		CST NO.	HTM Htg	HTM Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg
5	Gross	a	12H	1.5	1.4	1989	****	****	297	****	****	45	****	****	189	****	****
	Exposed	b		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
	Walls and	c		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
	Partitions	d		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		e		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		f		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
6	Windows and	a	1F	26.8	**	320	8568	****	57	1526	****	10	268	****	55	1473	****
	Glass Doors	b	9D	19.4	**	168	3251	****	0	0	****	0	0	****	0	0	****
	Heating	c		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		d		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		e		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		f		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
7	Windows and	North			23.0	127	****	2921	20	****	460	0	****	0	0	****	0
	Glass Doors	NE/NW			0.0	0	****	0	0	****	0	0	****	0	0	****	0
	Cooling	E/W			72.0	204	****	14652	37	****	2664	10	****	720	55	****	3960
		SE/SW			0.0	0	****	0	0	****	0	0	****	0	0	****	0
		South			38.0	158	****	5985	0	****	0	0	****	0	0	****	0
		Horz			0.0	0	****	0	0	****	0	0	****	0	0	****	0
8	Other doors	a	10D	11.5	10.9	0	0	0	0	0	0	0	0	0	0	0	0
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
9	Net	a	12H	1.5	1.4	1501	2252	2125	240	360	340	35	53	50	134	201	190
	Exposed	b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
	Walls and	c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
	Partitions	d		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		e		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		f		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
10	Ceilings	a	16G	0.8	1.5	1916	1581	2782	252	208	366	40	33	58	240	198	348
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
11	Floors	a		0.0	0.0	1916	0	0	252	0	0	40	0	0	240	0	0
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
12	Infiltration	a		13.0	5.2	488	6335	2534	57	740	296	10	130	52	55	714	286
13	Subtot Btuh Loss=6+8..+11+12					****	21986	****	****	2834	****	****	483	****	****	2586	****
14	Duct Btuh Loss					10%	2199	****	10%	283	****	10%	48	****	10%	259	****
15	Total Btuh Loss = 13+14					****	24185	****	****	3117	****	****	531	****	****	2844	****
16	Int. Gains:	People @	300			5	****	1500	1	****	300	0	****	0	1	****	300
		Appl. @	1200			0	****	0	0	****	0	0	****	0	0	****	0
17	Subtot RSH Gain=7+8..+12+16					****	****	32500	****	****	4426	****	****	880	****	****	5084
18	Duct Btuh Gain					10%	****	3250	10%	****	443	10%	****	88	10%	****	508
19	Total RSH Gain=(17+18)*PLF					1.00	****	35750	1.00	****	4868	1.00	****	968	1.00	****	5592
20	CFM Air Required					****	1800	1800	****	232	245	****	40	49	****	212	282

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Herick, Luci Job# Herick,Lucido Res. 2nd FL Zone: Entire House 2/26/98

MANUAL J: 7th Ed. — RIGHT-J: 3.0.14 — S/N 12437

						Bath No.2			W.I. Closet No.1			W.I. Closet No.2			Bedroom No.2		
1	Name of Room																
2	Running Ft. Exposed Wall					9.0 Ft.			0.0 Ft.			0.0 Ft.			50.0 Ft.		
3	Room Dimensions, Ft.					9.0 x 5.0 Ft.			5.0 x 8.0 Ft.			5.0 x 8.0 Ft.			17.0 x 13.0 Ft.		
4	Ceilngs, Ft	Condit. Option				9.0	heat/cool		9.0	heat/cool		9.0	heat/cool		9.0	heat/cool	
	TYPE OF EXPOSURE		CST NO.	HTM Htg	HTM Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg
5	Gross	a	12H	1.5	1.4	81	****	****	0	****	****	0	****	****	450	****	****
	Exposed	b		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
	Walls and	c		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
	Partitions	d		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		e		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		f		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
6	Windows and	a	1F	26.8	**	20	536	****	0	0	****	0	0	****	80	2142	****
	Glass Doors	b	9D	19.4	**	0	0	****	0	0	****	0	0	****	28	542	****
	Heating	c		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		d		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		e		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		f		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
7	Windows and		North		23.0	0	****	0	0	****	0	0	****	0	0	****	0
	Glass Doors		NE/NW		0.0	0	****	0	0	****	0	0	****	0	0	****	0
	Cooling		E/W		72.0	20	****	1440	0	****	0	0	****	0	48	****	3456
			SE/SW		0.0	0	****	0	0	****	0	0	****	0	0	****	0
			South		38.0	0	****	0	0	****	0	0	****	0	60	****	2280
			Horz		0.0	0	****	0	0	****	0	0	****	0	0	****	0
8	Other doors	a	10D	11.5	10.9	0	0	0	0	0	0	0	0	0	0	0	0
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
9	Net	a	12H	1.5	1.4	61	92	86	0	0	0	0	0	0	342	513	484
	Exposed	b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
	Walls and	c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
	Partitions	d		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		e		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		f		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
10	Ceilings	a	16G	0.8	1.5	45	37	65	40	33	58	40	33	58	221	182	321
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
11	Floors	a		0.0	0.0	45	0	0	40	0	0	40	0	0	221	0	0
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
12	Infiltration	a		13.0	5.2	20	260	104	0	0	0	0	0	0	108	1402	561
13	Subtot Btuh Loss=6+8..+11+12					****	924	****	****	33	****	****	33	****	****	4781	****
14	Duct Btuh Loss					10%	92	****	10%	3	****	10%	3	****	10%	478	****
15	Total Btuh Loss = 13+14					****	1016	****	****	36	****	****	36	****	****	5259	****
16	Int. Gains:	People @		300		0	****	0	0	****	0	0	****	0	1	****	300
		Appl. @		1200		0	****	0	0	****	0	0	****	0	0	****	0
17	Subtot RSH Gain=7+8..+12+16					****	****	1696	****	****	58	****	****	58	****	****	7402
18	Duct Btuh Gain					10%	****	170	10%	****	6	10%	****	6	10%	****	740
19	Total RSH Gain=(17+18)*PLF					1.00	****	1865	1.00	****	64	1.00	****	64	1.00	****	8142
20	CFM Air Required					****	76	94	****	3	3	****	3	3	****	391	410

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Herick, Luci Job# Herick,Lucido Res. 2nd FL Zone: Entire House 2/26/98

MANUAL J: 7th Ed. — RIGHT-J: 3.0.14 — S/N 12437

1	Name of Room					Master Bath			Loft			W.I.C. No.3			W.I.C. No.4				
2	Running Ft. Exposed Wall					27.0 Ft.			13.0 Ft.			0.0 Ft.			8.0 Ft.				
3	Room Dimensions, Ft.					17.0 x 14.0 Ft.			14.0 x 22.0 Ft.			6.0 x 10.0 Ft.			8.0 x 6.0 Ft.				
4	Ceilngs, Ft	Condit. Option				9.0 heat/cool			9.0 heat/cool			9.0 heat/cool			9.0 heat/cool				
	TYPE OF EXPOSURE		CST NO.	HTM Htg	HTM Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg		
5	Gross	a	12H	1.5	1.4	243	****	****	117	****	****	0	****	****	72	****	****		
	Exposed	b		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****		
	Walls and	c		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****		
	Partitions	d		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****		
		e		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****		
		f		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****		
6	Windows and	a	1F	26.8	**	37	991	****	24	643	****	0	0	****	4	94	****		
	Glass Doors	b	9D	19.4	**	0	0	****	0	0	****	0	0	****	0	0	****		
	Heating	c		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****		
		d		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****		
		e		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****		
		f		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****		
7	Windows and	North			23.0	37	****	851	0	****	0	0	****	0	0	****	0		
	Glass Doors	NE/NW			0.0	0	****	0	0	****	0	0	****	0	0	****	0		
	Cooling	E/W			72.0	0	****	0	0	****	0	0	****	0	0	****	0		
		SE/SW			0.0	0	****	0	0	****	0	0	****	0	0	****	0		
		South			38.0	0	****	0	24	****	912	0	****	0	4	****	133		
		Horz			0.0	0	****	0	0	****	0	0	****	0	0	****	0		
8	Other doors	a	10D	11.5	10.9	0	0	0	0	0	0	0	0	0	0	0	0		
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
9	Net	a	12H	1.5	1.4	206	309	292	93	140	132	0	0	0	69	103	97		
	Exposed	b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
	Walls and	c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
	Partitions	d		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
		e		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
		f		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
10	Ceilings	a	16G	0.8	1.5	238	196	346	308	254	447	60	50	87	48	40	70		
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
11	Floors	a		0.0	0.0	238	0	0	308	0	0	60	0	0	48	0	0		
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0		
12	Infiltration	a		13.0	5.2	37	480	192	24	312	125	0	0	0	4	45	18		
13	Subtot Btuh Loss=6+8..+11+12					****	1976	****	****	1348	****	****	50	****	****	282	****		
14	Duct Btuh Loss					10%	198	****	10%	135	****	10%	5	****	10%	28	****		
15	Total Btuh Loss = 13+14					****	2174	****	****	1483	****	****	54	****	****	310	****		
16	Int. Gains: People @			300		0	****	0	0	****	0	0	****	0	0	****	0		
	Appl. @			1200		0	****	0	0	****	0	0	****	0	0	****	0		
17	Subtot RSH Gain=7+8..+12+16					****	****	1680	****	****	1616	****	****	87	****	****	318		
18	Duct Btuh Gain					10%	****	168	10%	****	162	10%	****	9	10%	****	32		
19	Total RSH Gain=(17+18)*PLF					1.00	****	1848	1.00	****	1777	1.00	****	96	1.00	****	350		
20	CFM Air Required					****	162	93	****	110	89	****	4	5	****	23	18		

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Herick, Luci Job# Herick,Lucido Res. 2nd FL Zone: Entire House 2/26/98

MANUAL J: 7th Ed. — RIGHT-J: 3.0.14 — S/N 12437

1	Name of Room					Master Bedroom													
2	Running Ft. Exposed Wall					55.0 Ft.				Ft.			Ft.			Ft.			
3	Room Dimensions, Ft.					24.0 x 16.0 Ft.				x Ft.			x Ft.			x Ft.			
4	Ceilngs, Ft	Condit. Option				9.0 heat/cool													
	TYPE OF EXPOSURE		CST NO.	HTM Htg	HTM Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg		
5	Gross	a	12H	1.5	1.4	495	****	****		****	****		****	****		****	****		
	Exposed	b		0.0	0.0	0	****	****		****	****		****	****		****	****		
	Walls and	c		0.0	0.0	0	****	****		****	****		****	****		****	****		
	Partitions	d		0.0	0.0	0	****	****		****	****		****	****		****	****		
		e		0.0	0.0	0	****	****		****	****		****	****		****	****		
		f		0.0	0.0	0	****	****		****	****		****	****		****	****		
6	Windows and	a	1F	26.8	**	34	897	****			****			****			****		
	Glass Doors	b	9D	19.4	**	140	2709	****			****			****			****		
	Heating	c		0.0	**	0	0	****			****			****			****		
		d		0.0	**	0	0	****			****			****			****		
		e		0.0	**	0	0	****			****			****			****		
		f		0.0	**	0	0	****			****			****			****		
7	Windows and	North			23.0	70	****	1610		****			****			****			
	Glass Doors	NE/NW			0.0	0	****	0		****			****			****			
	Cooling	E/W			72.0	34	****	2412		****			****			****			
		SE/SW			0.0	0	****	0		****			****			****			
		South			38.0	70	****	2660		****			****			****			
		Horz			0.0	0	****	0		****			****			****			
8	Other doors	a	10D	11.5	10.9	0	0	0											
		b		0.0	0.0	0	0	0											
9	Net	a	12H	1.5	1.4	322	482	455											
	Exposed	b		0.0	0.0	0	0	0											
	Walls and	c		0.0	0.0	0	0	0											
	Partitions	d		0.0	0.0	0	0	0											
		e		0.0	0.0	0	0	0											
		f		0.0	0.0	0	0	0											
10	Ceilings	a	16G	0.8	1.5	384	317	558											
		b		0.0	0.0	0	0	0											
		c		0.0	0.0	0	0	0											
11	Floors	a		0.0	0.0	384	0	0											
		b		0.0	0.0	0	0	0											
		c		0.0	0.0	0	0	0											
12	Infiltration	a		13.0	5.2	174	2252	901											
13	Subtot Btuh Loss=6+8..+11+12					****	6657	****	****		****	****		****	****		****		
14	Duct Btuh Loss					10%	666	****	%		****	%		****	%		****		
15	Total Btuh Loss = 13+14					****	7323	****	****		****	****		****	****		****		
16	Int. Gains:	People @		300		2	****	600		****			****			****			
		Appl. @		1200		0	****	0		****			****			****			
17	Subtot RSH Gain=7+8..+12+16					****	****	9196	****	****		****	****		****	****			
18	Duct Btuh Gain					10%	****	920	%	****		%	****		%	****			
19	Total RSH Gain=(17+18)*PLF					1.00	****	10115		****			****			****			
20	CFM Air Required					****	545	509	****			****			****				

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RIGHT-J CALCULATION PROCEDURES A, B, C, D

Job #: Herick,Lucido Res. 2nd FL File name: Herick, Luci 2/26/98
Zone: Entire House

Procedure A - Winter Infiltration HTM Calculation*

1.	Winter Infiltration CFM					
	0.8 AC/HR x	17244	Cu.Ft. x 0.0167 =		230	CFM
2.	Winter Infiltration Btuh					
	1.1 x	230 CFM x	25	Winter TD =	6335	Btuh
3.	Winter Infiltration HTM					
	6335 Btuh /	488	Total Window and Door Area =		13.0	HTM

Procedure B - Summer Infiltration HTM Calculation*

1.	Summer Infiltration CFM					
	0.4 AC/HR x	17244	Cu.Ft. x 0.0167 =		115	CFM
2.	Summer Infiltration Btuh					
	1.1 x	115 CFM x	20	Summer TD =	2534	Btuh
3.	Summer Infiltration HTM					
	2534 Btuh /	488	Total Window and Door Area =		5.2	HTM

Procedure C - Latent Infiltration Gain

0.68 x	60	gr.diff. x	115	CFM =	4700 Btuh

Procedure D - Equipment Sizing Loads

1.	Sensible Sizing Load					
	Sensible Ventilation Load					
	1.1 x 0 Vent.CFM x	20	Summer TD	=	0	Btuh
	Sensible Load for Structure (Line 19)			+	35750	Btuh
	Sum of Ventilation and Structure Loads			=	35750	Btuh
	Rating and Temperature Swing Multiplier			x	1.00	RSM
	Equipment Sizing Load - Sensible			+	35750	Btuh
2.	Latent Sizing Load					
	Latent Ventilation Load					
	0.68 x 0 Vent.CFM x	60	gr.diff.	=	0	Btuh
	Internal Loads = 230 x	5	No. People	+	1150	Btuh
	Infiltration Load From Procedure C			+	4700	Btuh
	Equipment Sizing Load - Latent			=	5850	Btuh

*Construction Quality is: a No. of Fireplaces is: 0

MANUAL J: 7th Ed. RIGHT-J: V 3.0.14 S/N 12437

Printout certified by ACCA to meet all requirements of Manual Form J

MANUAL J: 7th Ed. RIGHT-J: V 3.0.14 S/N 12437

RIGHT-J WINDOW DATA

Job #: Herick,Lucido Res. 2nd FL File name: Herick, Luci 2/26/98

WNDW	SKY	DIR	WALL	GLAZ	LOWE	STRM	SHAD	OVHG	NGLZ	ANGL	SHCO	OVRX	OVRY	WHGT	CHTM	WNAR	SHAR
									Bedroom No.4								
a	n	n	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	23.0	20.0	0.0
a	n	w	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	37.0	0.0
									Bath No.1								
a	n	w	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	10.0	0.0
									Bedroom No.3								
a	n	w	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	55.0	0.0
									Bath No.2								
a	n	w	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	20.0	0.0
									W.I. Closet No.1								
									W.I. Closet No.2								
									Bedroom No.2								
a	n	s	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	38.0	60.0	0.0
a	n	e	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	20.0	0.0
b	n	e	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	28.0	0.0
									Master Bath								
a	n	n	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	23.0	37.0	0.0
									Loft								
a	n	s	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	38.0	24.0	0.0
									W.I.C. No.3								
									W.I.C. No.4								
a	n	s	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	38.0	3.5	0.0
									Master Bedroom								
a	n	e	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	72.0	33.5	0.0
b	n	s	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	38.0	70.0	0.0
b	n	n	a	c	y	n	n	n	1	90	1.0	0.0	0.0	1.0	23.0	70.0	0.0

Department of Community Affairs SN: 5050

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

FORM 600A-93 Residential Whole Building Performance Method A SOUTH

PROJECT NAME: | BUILDER: FLORIDA COUNTRY HOMES

AND ADDRESS: | PERMITTING OFFICE: | CLIMATE ZONE: 7|_| 8|_| 9|_|

OWNER: LUCIDO | PERMIT NO. | JURISDICTION NO.

		CK
1. New construction or addition	1. New Construction	____
2. Single family detached or Multifamily attached	2. Single-Family	____
3. If Multifamily-No. of units	3. 0	____
4. If Multifamily, is this a worst case (yes/no)	4.	____
5. Conditioned floor area (sq.ft.)	5. 3934.00	____
6. Predominant eave overhang (ft.)	6. 3.00	____
7. Porch overhang length (ft.)	7. 11.00	____
8. Glass area and type:	Single Pane Double Pane	
a. Clear Glass	8a. 0.0sqft 0.00sqft	____
b. Tint, film or solar screen	8b.737.9sqft 0.00sqft	____
9. Floor type and insulation:		
a. Slab on grade (R-value, perimeter)	9a.R= 0.00 , 219.00 ft	____
b. Wood, raised (R-value, area)	9b.R=30.00 , 698.00 sqft	____
10.Net Wall type area and insulation:		
a. Exterior: 1. Concrete (Insulation R-value)	10a-1 R= 4.20, 1362.00sqft	____
a. Exterior: 2. Wood frame (Insulation R-value)	10a-2 R=19.00, 1482.00sqft	____
b. Adjacent: 2. Wood frame (Insulation R-value)	10b-2 R=11.00, 357.00sqft	____
11.Ceiling type area and insulation:		
a. Under attic (Insulation R-value)	11a.R=30.00 , 2539.00sqft	____
12.Air distribution systems		
a. Ducts (Insulation + Location)	12a. R= 6.00 , uncond	____
13.Cooling system	13. Type: Central A/C	____
	SEER: 10.00	____
13.Cooling system	13. Type: Central A/C	____
	SEER: 10.00	____
14.Heating System:	14. Type: Strip Heat	____
	COP: 1.00	____
15.Hot water system:	15. Type: Electric	____
	EF: 0.94	____
16.Hot Water Credits: (HR-Heat Recovery, DHP-Dedicated Heat Pump)	16.	____
17.Infiltration practice: 1, 2 or 3	17. 2	____
18.HVAC Credits (CF-Ceiling Fan, CV-Cross vent, HF-Whole house fan, RB-Attic radiant barrier, MZ-Multizone)	18. MZ	____
19.EPI (must not exceed 100 points)	19. 99.55	____
a. Total As-Built points	19a. 64392.58	____
b. Total Base points	19b. 64683.01	____

I Hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY: [signature]

DATE: 6-30-98

I hereby certify that this building is in compliance with the Florida Energy Code.

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance in accordance with Section 553.908 F.S.

BU000080

SN: 5050

Department of Community Affairs

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Residential Whole Building Performance Method A

SOUTH

RM 600A-93

OJECT NAME:

ID ADDRESS:

JNER: LUCIDO

|BUILDER: FLORIDA COUNTRY HOMES
|PERMITTING OFFICE:
|PERMIT NO.
|CLIMATE ZONE: 7|_| 8|_| 9|_|
|JURISDICTION NO.

		CK
New construction or addition	1. New Construction	____
Single family detached or Multifamily attached	2. Single-Family	____
If Multifamily-No. of units	3. 0	____
If Multifamily, is this a worst case (yes/no)	4.	____
Conditioned floor area (sq.ft.)	5. 3934.00	____
Predominant eave overhang (ft.)	6. 3.00	____
Porch overhang length (ft.)	7. 11.00	____
Glass area and type:	Single Pane / Double Pane	
a. Clear Glass	8a. 0.0sqft / 0.00sqft	____
b. Tint, film or solar screen	8b.737.9sqft / 0.00sqft	____
Floor type and insulation:		
a. Slab on grade (R-value, perimeter)	9a.R= 0.00 , 219.00 ft	____
b. Wood, raised (R-value, area)	9b.R=30.00 , 698.00 sqft	____
.Net Wall type area and insulation:		
a. Exterior: 1. Concrete (Insulation R-value)	10a-1 R= 4.20, 1362.00sqft	____
a. Exterior: 2. Wood frame (Insulation R-value)	10a-2 R=19.00, 1482.00sqft	____
b. Adjacent: 2. Wood frame (Insulation R-value)	10b-2 R=11.00, 357.00sqft	____
.Ceiling type area and insulation: a. Under attic (Insulation R-value)	11a.R=30.00 , 2539.00sqft	____
2.Air distribution systems a. Ducts (Insulation + Location)	12a. R= 6.00 , uncond	____
3.Cooling system	13. Type: Central A/C SEER: 10.00	____
3.Cooling system	13. Type: Central A/C SEER: 10.00	____
4.Heating System:	14. Type: Strip Heat COP: 1.00	____
5.Hot water system:	15. Type: Electric EF: 0.94	____
	16.	____
6.Hot Water Credits: (HR-Heat Recovery, DHP-Dedicated Heat Pump)	17. 2	____
.7.Infiltration practice: 1, 2 or 3	18. MZ	____
8.HVAC Credits (CF-Ceiling Fan, CV-Cross vent, HF-Whole house fan, RB-Attic radiant barrier, MZ-Multizone)		
9.EPI (must not exceed 100 points)	19. 99.55	____
a. Total As-Built points	19a. 64392.58	____
b. Total Base points	19b. 64683.01	____

I Hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY:_____

DATE:_____

I hereby certify that this building is in compliance with the Florida Energy Code.

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance in accordance with Section 553.908 F.S.

BUILDING OFFICIAL:_____

SUMMER CALCULATIONS

=== BASE ===				=== AS-BUILT ===					
GLASS- ORIEN	AREA	× BSPM	= POINTS	TYPE	SC	ORIEN	AREA	× SPM × SOF	= POINTS
NE	123.80	109.7	13580.9	SGL TINT		NE	16.0	94.5 .56	845.0
				SGL TINT		NE	12.8	94.5 .71	863.5
				SGL TINT		NE	12.8	94.5 .49	592.6
				SGL TINT		NE	19.5	94.5 .71	1315.4
				SGL TINT		NE	10.0	94.5 .67	631.0
				SGL TINT		NE	25.7	94.5 .75	1819.3
				SGL TINT		NE	13.5	94.5 .64	816.5
				SGL TINT		NE	13.5	94.5 .64	816.5
SE	140.40	109.7	15401.9	SGL TINT		SE	13.5	143.0 .77	1484.7
				SGL TINT		SE	8.0	143.0 .28	320.3
				SGL TINT		SE	10.0	143.0 .29	410.2
				SGL TINT		SE	13.5	143.0 .77	1484.7
				SGL TINT		SE	8.0	143.0 .37	427.9
				SGL TINT		SE	13.5	143.0 .77	1484.7
				SGL TINT		SE	8.0	143.0 .37	427.9
				SGL TINT		SE	20.0	143.0 .77	2199.6
				SGL TINT		SE	13.5	143.0 .77	1484.7
				SGL TINT		SE	32.4	143.0 .68	3167.4
SW	174.40	109.7	19131.7	SGL TINT		SW	20.0	143.0 .39	1122.8
				SGL TINT		SW	20.0	143.0 .39	1122.8
				SGL TINT		SW	8.0	143.0 .37	427.9
				SGL TINT		SW	60.0	143.0 .91	7843.6
				SGL TINT		SW	36.0	143.0 .63	3247.2
				SGL TINT		SW	3.4	143.0 .56	273.0
				SGL TINT		SW	13.5	143.0 .52	1003.9
				SGL TINT		SW	13.5	143.0 .52	1003.9
NW	299.30	109.7	32833.2	SGL TINT		NW	72.0	94.5 .92	6225.7
				SGL TINT		NW	25.7	94.5 .92	2238.6
				SGL TINT		NW	19.5	94.5 .92	1698.6
				SGL TINT		NW	57.0	94.5 .92	4965.1
				SGL TINT		NW	20.0	94.5 .75	1415.8
				SGL TINT		NW	40.0	94.5 .75	2831.6
				SGL TINT		NW	15.0	94.5 .75	1061.8
				SGL TINT		NW	9.8	94.5 .75	693.7
				SGL TINT		NW	36.8	94.5 .75	2605.0
				SGL TINT		NW	3.5	94.5 .87	288.9

.15 × COND. FLOOR AREA	/ TOTAL GLASS AREA	= ADJ. FACTOR	× GLASS POINTS	= ADJ GLASS POINTS	GLASS POINTS
.15 3,934.00	737.90	.800	80,947.63	64,733.96	60,661.90

NON GLASS-	AREA	× BSPM	= POINTS	TYPE	R-VALUE	AREA	× SPM	= POINTS
WALLS-								
Ext	2844.0	1.6	4550.4	Ext NormWtBlock In	4.2	1362.0	2.28	3105.4
				Ext Wood Frame	19.0	1482.0	1.60	2371.2
Adj	357.0	1.0	357.0	Adj Wood Frame	11.0	357.0	1.00	357.0
DOORS-								
Adj	18.0	2.6	46.8	Adj Insulated		18.0	2.60	46.8

IRS----------			Slab-on-Grade	.0	219.0	-20.00	-4380.0
219.0	-20.0	-4380.0	Red Wood Adjacent	30.0	698.0	.60	418.8
698.0	-2.2	-1507.7					
ILTRATION---------			Practice #2		3934.0	14.70	57829.8
3934.0	14.7	57829.8					
AL SUMMER POINTS		123,661.48					122,442.06

AL × SYSTEM = COOLING	TOTAL × CAP × DUCT × SYSTEM × CREDIT = COOLING					
PTS MULT POINTS	COMPON	RATIO	MULT	MULT	MULT	POINTS
,661.48 .37 45,754.75	122,442.06	1.00	1.100	.340	.950	43,503.66

WINTER CALCULATIONS

=== BASE ===					=== AS-BUILT ===					
GLASS										
ORIEN	AREA	× BWPM	= POINTS		TYPE	SC	ORIEN	AREA	× WPM × WOF	= POINTS
NE	123.80	-.4	-49.5		SGL TINT		NE	16.0	2.9 1.37	63.6
					SGL TINT		NE	12.8	2.9 1.24	46.2
					SGL TINT		NE	12.8	2.9 1.46	54.2
					SGL TINT		NE	19.5	2.9 1.24	70.4
					SGL TINT		NE	10.0	2.9 1.28	37.1
					SGL TINT		NE	25.7	2.9 1.22	90.8
					SGL TINT		NE	13.5	2.9 1.30	50.9
					SGL TINT		NE	13.5	2.9 1.30	50.9
SE	140.40	-.4	-56.2		SGL TINT		SE	13.5	-2.0 .62	-16.7
					SGL TINT		SE	8.0	-2.0 -1.46	23.4
					SGL TINT		SE	10.0	-2.0 -1.40	27.9
					SGL TINT		SE	13.5	-2.0 .62	-16.7
					SGL TINT		SE	8.0	-2.0 -.71	11.3
					SGL TINT		SE	13.5	-2.0 .62	-16.7
					SGL TINT		SE	8.0	-2.0 -.71	11.3
					SGL TINT		SE	20.0	-2.0 .62	-24.7
					SGL TINT		SE	13.5	-2.0 .62	-16.7
					SGL TINT		SE	32.4	-2.0 .44	-28.3
SW	174.40	-.4	-69.8		SGL TINT		SW	20.0	-2.0 -.59	23.8
					SGL TINT		SW	20.0	-2.0 -.59	23.8
					SGL TINT		SW	8.0	-2.0 -.71	11.3
					SGL TINT		SW	60.0	-2.0 .86	-103.3
					SGL TINT		SW	36.0	-2.0 .29	-21.2
					SGL TINT		SW	3.4	-2.0 .09	-.6
					SGL TINT		SW	13.5	-2.0 -.03	.8
					SGL TINT		SW	13.5	-2.0 -.03	.8
NW	299.30	-.4	-119.7		SGL TINT		NW	72.0	2.9 1.08	226.4
					SGL TINT		NW	25.7	2.9 1.08	80.4
					SGL TINT		NW	19.5	2.9 1.08	61.0
					SGL TINT		NW	57.0	2.9 1.08	178.2
					SGL TINT		NW	20.0	2.9 1.22	70.7
					SGL TINT		NW	40.0	2.9 1.22	141.3
					SGL TINT		NW	15.0	2.9 1.22	53.0
					SGL TINT		NW	9.8	2.9 1.22	34.6
					SGL TINT		NW	36.8	2.9 1.22	130.0
					SGL TINT		NW	3.5	2.9 1.12	11.4

.15 × COND. FLOOR AREA	/ TOTAL GLASS AREA	= ADJ. FACTOR	× GLASS POINTS	= ADJ GLASS POINTS	GLASS POINTS
.15 3,934.00	737.90	.800	-295.16	-236.04	1,340.46

NON GLASS									
	AREA	× BWPM	= POINTS		TYPE	R-VALUE	AREA	× WPM	= POINTS
WALLS									
Ext	2844.0	.3	853.2		Ext NormWtBlock In	4.2	1362.0	1.02	1389.2
					Ext Wood Frame	19.0	1482.0	.30	444.6
Adj	357.0	.5	178.5		Adj Wood Frame	11.0	357.0	.50	178.5
DOORS									
Adj	18.0	1.3	23.4		Adj Insulated		18.0	1.30	23.4

ORS----------						
219.0	-2.1	-459.9	Slab-on-Grade	.0	219.0	-2.10	-459.9
698.0	-.3	-195.4	Rsd Wood Adjacent	30.0	698.0	.30	209.4
ILTRATION---------							
3934.0	1.2	4720.8	Practice #2		3934.0	1.20	4720.8
AL WINTER POINTS		5,138.42					8,100.40

'AL	×	SYSTEM MULT	=	HEATING POINTS	TOTAL COMPON	×	CAP RATIO	×	DUCT MULT	×	SYSTEM MULT	×	CREDIT MULT	=	HEATING POINTS
PTS															
5,138.42		1.10		5,652.26	8,100.40		1.00		1.100		1.000		.950		8,464.92

WATER HEATING

=== BASE ===				=== AS-BUILT ===					
NUM OF BEDRMS	× MULT	= TOTAL		TANK VOLUME	EF	TANK RATIO	× MULT	× CREDIT MULT	= TOTAL
4	3319.0	13,276.00		40	.94	1.000	3106.0	1.00	12,424.00

SUMMARY

=== BASE ===					=== AS-BUILT ===				
COOLING POINTS	+ HEATING POINTS	+ HOT WATER POINTS	= TOTAL POINTS		COOLING POINTS	+ HEATING POINTS	+ HOT WATER POINTS	= TOTAL POINTS	
45754.8	5652.3	13276.0	64,683.01		43503.7	8464.9	12424.0	64,392.58	

****
* EPI = 99.55 *
****

ENERGY GUIDE

For detailed information
of the EPI rating number
or for any ITEM listed,
ask your Builder for
DCA Form 600A-93
or Form 600B-93

EPI= 99.6

The maximum allowable EPI is 100. The lower the EPI the more efficient the home

RESIDENTIAL ENERGY PERFORMANCE RATING SHEET

ITEM	HOME VALUE	Low Efficiency	High Efficiency
WINDOWS.....	Single Tint	SINGL CLR	DBL TINT
INSULATION.....			
Ceiling R-Value.....	30.0	R-10	R-30
Wall R-Value.....	19.0	R-0	R-7
Floor R-Value.....	30.0	R-0	R-19
AIR CONDITIONER.....			
SEER.....	10.0	10.0 SEER	17.0
HEATING SYSTEM.....			
Electric COP.....	1.0	2.50 COP	4.19
WATER HEATER.....			
Electric EF.....	0.94	0.88	0.96
Gas EF.....	0.00	0.54	0.90
Solar EF.....		0.40	0.80
OTHER FEATURES.....			
.....			

I certify that these energy saving features required for the Florida
Energy Code have been installed in this house.

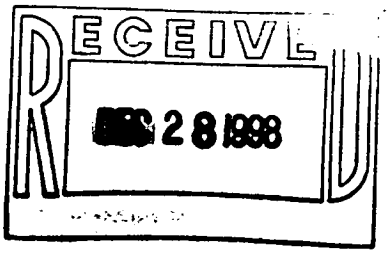
Builder
Address:_____Signature:_____Date:_____

City/Zip_____

Florida Energy Code for Building Construction - 1993
Florida Department of Community Affairs FL-EPL CARD93

AJF ENGINEERING & TESTING INC.

FRANK W. FARLEY, INC.
P.O. BOX 12059
LAKE PARK, FL 33403



SOIL DENSITY REPORT MODIFIED PROCTOR TEST ASTM D 2922

Date: DECEMBER 24, 1998
Job #: P98-1488
Permit #: 98- 4503
Client: BLOCK DESIGN/ COMMERCIAL CONSTRUCTION

Contractor: BLOCK DESIGN/ COMMERCIAL CONSTRUCTION

Job Location: RIDGELAND S/D
2 SABEL COURT
SEWALLS POINT, FLORIDA

Test No.	Test Sample Location	Depth	Pen. In Place Res. Dry Density	Moisture Density Relationship Test No.	Maximum Dry Density	% Compacted
	Density - Stripped Surface Below Stripped Surface					
1	NW Corner	0-1'	104.9	1	106.8	98.2%
2	Center	0-1'	103.9	1	"	97.3%
3	SE Corner	0-1'	105.2	1	"	98.5%

Frank [illegible]
AJF ENGINEERING & TESTING INC..
12-24-98

PHONE: (561) 845-7445 WEST PALM BEACH (561) 337-7755 MARTIN-ST. LUCIE (561) 564-0940 INDIAN RIVER (561) 845-8876 FAX

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
One South Sewall's Point Road
Sewall's Point, Florida 34996
Tel: (561) 287-2455
Fax: (561) 220-4766

RECEIVED
OCT 19 1999

TEMPORARY ELECTRIC HOOK-UP AGREEMENT: PN 4503

OWNER: TOM & DEDE LUCIDO ; ADDRESS: 7 QUAIL RUN, SEWALLS POINT, FL.

PROJECT ADDRESS: 2 SABEL COURT ; LEGAL : LOT ___ BLK ___ SUB ___

GENERAL CONTRACTOR: COMMERCIAL CONSTRUCTION DIV. ; LIC/CERT No. CBC052954

ADDRESS: 440 E. OSCEOLA ST. STUART, FL. ; TEL 220-3488 ; FAX 283-2855

ELECTRICAL CONTRACTOR: COOK ELECTRIC ; LIC/CERT No. ER0008060

ADDRESS: 4250 S.E. COMMERCE AVE. PORT SALAERNO FL. 287-0938 287-9084 ; TEL ___ ; FAX ___

WHEREAS, pursuant to the provisions of, and governed by, Sections 0307.6 and 4504.6 of the South Florida Building Code as adopted in Section 4-16 of the Codes and Ordinances of the Town of Sewall's Point, temporary electrical service for use during building operations and for testing purposes under a valid building permit is authorized under prescribed terms and conditions; and,

WHEREAS, the above named responsible persons, firms or corporations have requested a temporary electrical hook-up of ~~LIGHTS, POOL EQUIPTMENT~~ & A/C for the purpose of TESTING ~~AND COMPLETION OF HOUSE~~ at the above designated construction now in progress under a valid building permit; and

WHEREAS, it is necessary to have a temporary electric hook-up for testing of equipment and completion of building operations as herein above described.

NOW THEREFORE IT IS AGREED BY AND BETWEEN THE PARTIES THAT;

1. The parties to this agreement are Edwin B. Arnold, Building Official, Town of Sewall's Point, and the above named responsible persons, firms or corporations.

2. In order to allow electrical service to be provided to certain equipment being placed at the referenced construction address the Building Official hereby agrees to grant a temporary hook-up permit.

3. This temporary hook-up permit shall be effective for 30 calendar days from the date of this agreement, after which time the temporary hook-up will be revoked or a Certificate of Occupancy will be issued to verify completion.

4. This temporary electric hook-up is solely for the purposes stated. No furniture or occupants will be moved into the building until a Certificate of Occupancy is issued.

11/1/99 IN WITNESS WHEREOF the parties have caused this agreement to be executed this 15th day of October, 99

GLORIA L. LENTZ
Notary Public - State of Florida
My Commission Expires May 16, 2000
Commission # CC555255

SIGNATURE OF GENERAL CONTRACTOR

SIGNATURE OF ELECTRICAL CONTRACTOR

SIGNATURE OF OWNER

EDWIN B. ARNOLD, BUILDING OFFICIAL

PREDICTABILITY + ACCOUNTABILITY = COMPLIANCE

TOWN OF SEWALL'S POINT

MEMORANDUM

TO: Cyrus Kissling, Building Commissioner
Timothy Wright, Town Attorney

FROM: Edwin B. Arnold, Building Official

CC: Thomas Lucido, Owner/Builder

Date: November 26, 1999

RE: 2 Sabal Court
Permit Number ~~B98~~ 4503

The final survey submitted on the referenced project indicates an apparent (undimensioned) encroachment of the pool deck into the side and rear set back areas of the property. Having only received the survey the prior afternoon, I pointed this out to Mr. Lucido at our meeting last Wednesday when the permit was renewed, and he indicated that he had obtained an opinion (this would certainly have been prior to my appointment) that this was permissible - apparently under a theory that brick pavers bedded in sand were not "permanent". I deferred further comment pending the site inspection scheduled for that date and review of the file and applicable ordinances. The results of my inspection, review, research and analysis are as follows:

1. The original permit was issued for the building only; the courtyard, pool and deck were neither reviewed or permitted at that time.
2. Upon application, a separate fee permit was issued by me for construction of a courtyard area with surrounding walls. A final inspection of this construction was performed at the time of the C.O. inspection on Wednesday, and it is in compliance with permit documents and set back requirements.
3. Upon application, a separate fee permit was issued by me for construction of a pool located in the southeast portion of the site. The pool was located within the set backs as required; the pool contractor specifically excluded the deck from his application and I noted that a separate permit would be required. It should be noted that the pool was sited sufficiently within the setbacks to allow a perimeter deck.

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

4. The pool permit is still open; a final inspection has not been requested by the pool contractor.
5. Although the pool deck has been completed, with the encroachments previously noted, no application for the required pool deck permit has been submitted.

Our Zoning Ordinance (Appendix B, Section XI, E.1) specifically provides that:

"swimming pools, poolside aprons, and terraces ... shall be subject to building set back line regulations."

This is consistent with, and reinforced by, the definition of a structure as:

"(a)nything constructed or erected, the use of which requires pèrmanent location on the land ... (A)ny open patio ... or an apron adjacent to a swimming pool shall be considered a structure for the purpose of this Ordinance and for the purpose of determining setback lines."

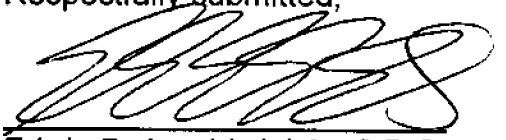
It is permanence rather than materials of construction which determines when structures must comply with set back requirements. Here, the pool deck is clearly intended to be permanent, a determination reflected in my requirement that a permit be issued for construction. Supporting this position, we find temporary structures defined as:

"(a)nything constructed or erected, the design of which or intended use of which, is other than long term, indefinite life design or use."

Addressing Mr. Lucido's assertion of prior verbal authorization, I can only note that the Ordinance is clear on its face and my position on this issue has been consistent. Further, at no time did any submittal indicate an intent to act upon any interpretation of the set back requirements other than in full compliance, and the work was completed without obtaining the required permit.

Field inspection of the pool deck as installed shows it to be of substantial construction, clearly intended to be "permanent" within the sense of both the Ordinances and ordinary usage. As such, it is my position as Building Official that it must be permitted (as previously requested) and included within the total scope of construction work; all set back requirements must be complied with prior to final inspection. This is a zoning issue; should a contrary position be taken, I shall of course defer to the Commission and legal opinion of counsel.

Respectfully submitted,



Edwin B. Arnold, A.I.A., C.B.O.

INSPECTION REPORT
AND
NOTICE OF NONCOMPLIANCE

INSPECTION DATE 12/1/99 | **PAGE** 1 **OF** 1

Owner's Name TOM LUCIDO | Address | City | State | Zip

Contractor's Name COMMERCIAL CONST. | Address 440 E. OSCEOLA | City STUART | State FL | Zip

Job Location 2 SABAL COURT | City/County

BUILDING PERMIT NO'S. 4750 (BLK)

INSPECTION TYPE
☐ FOOTING ☐ ROUGH ☒ FINAL
☐ FOUNDATION ☐ BLDG. CONST. ☐ ENERGY ☐ HVAC ☐ ELEC. ☐ PLUMB.

AN INSPECTION OF THE ABOVE HAS DISCLOSED THE FOLLOWING VIOLATION(S)

ORDER NO.	CODE SELECTION	FINDINGS AND REQUIREMENTS
1	ORD. APP B, XIII, 5, (m)	FINAL AS BUILT SURVEY MUST BE CERTIFIED TO TOWN
2	ORD CHAP 6 - FLOOD	REV & RESUBMIT ELEV. CERT. W/CURRENT FIRM INDEX DATE (B.4)
3	SFBC 1506.1	PROVIDED REQUIRED GARAGE VENTILATION
4	NFPA 101, 21-5.2.2.4	BALCONY GUARDRAIL REQ. 42" HIGH
	SFBC 307.5	PARTIAL (30 DAY) CERTIFICATE OF OCCUPANCY
		- NO STORAGE OF MOTOR VEHICLES IN GARAGE
		- NO USE OF BALCONIES
		EXPIRATION 12/31/99 IF ITEMS 1-4 NOT COMPLETE.
		NOTE:
		• FENCE NOT PERMITTED AS REQUIRED. APPLICATION TO BE MADE FOR "AFTER FACT" PERMIT.
		• POOL DECK NOT PERMITTED AS REQUIRED. APPLICATION TO BE MADE FOR "AFTER FACT" PERMIT. SETBACK COMPLIANCE REQUIRED (SURVEY INDICATES ENCROACHMENT INTO SIDE & REAR SETBACKS)

CONTRACTORS: PLEASE LEAVE THIS LIST ON JOB SITE

NOTICE OF NONCOMPLIANCE.

All cited violations shall be ordered within 30 days after written notification, unless an extension of time is granted.
Each day that the violation continues after notice shall constitute offense and is subject to remedies and penalties by the authority having jurisdiction.

READ, UNDERSTOOD & AGREED:

Violations Explained to Lucido

Compliance Date 12/31/99

Certified Inspector BLDG. OFFICIAL

Telephone 287-2455

Insp/notice4/97

TOWN OF SEWALL'S POINT

CERTIFICATE OF OCCUPANCY

■ Single Family Residence □ Other _____

OWNER: THOMAS LUCIDO ; PROPERTY ADDRESS: 2 SABAL COURT

LEGAL DESCRIPTION: LOT 4 BLOCK _____ SUBDIVISION RIDGELAND

GENERAL CONTRACTOR: COMMERCIAL CONSTRUCTION ; LIC/CERT NO. CBC052954

ADDRESS: 440 EAST OSCEOLA STREET, STUART, FL ; TEL 220-3488 ; FAX 283-2855

ARCHITECT OR ENGINEER: PAUL A. WINGLER, P.E. ; LIC/REG. NO. 12350

ADDRESS: 2962 S.E. FAIRWAY W., STUART, FL. ; TEL 284-4571 ; FAX 220-5968

PERMIT NO: 4503 ; DATE OF ISSUE: 11/17/98 ; RENEWAL PERMIT NO: 4750 ; DATE OF ISSUE: 11/17/99 (EFFECTIVE)

In accordance with the requirements of the South Florida Building Code and the Codes and Ordinances of the Town of Sewall's Point, Florida, this Certificate of Occupancy is hereby issued for the foregoing described property.

Entered at Sewall's Point, Florida, this 1ST day of DECEMBER, 1999.

Edwin B. Arnold, AIA, CBO
Building Official, Town of Sewall's Point

cc: TOWN CLERK
POLICE CHIEF
PROPERTY FILE
CONTR. COPY

STATEMENT OF INSPECTION

TO: Building Official, Town of Sewall's Point
FROM: Architect or Engineer of Record
RE: Subject structure described as follows:

OWNER: Lucido ; ADDRESS: 2 Sabal CT

PROJECT ADDRESS: SAME ; LEGAL DESCRIPTION: LOT ____ BLK ____ SUB ____

GENERAL CONTRACTOR: Commercial Const. ; LIC/CERT NO. CBC052954

ADDRESS: 440 East Ocean Blvd. St. Stuart ; TEL 220-3488 ; FAX 283-2855

ARCHITECT OR ENGINEER: Paul A. Wingler, P.E. ; LIC/REG NO. 12350

ADDRESS: 2962 S.E. Fairway W, Stuart, Fl. 34997 284-4371 220-5968 ; TEL ____ ; FAX ____

PERMIT NO: 4503 ; DATE OF ISSUE: 11/17/98 ; DATE OF THIS STATEMENT: 11-19-99

In accordance with the requirements of Section 0307.2 of the South Florida Building Code, I hereby attest as follows:

1. ✓ I am the Architect or Engineer who sealed and signed the plans for the subject structure, **or**
   ___ I am the substitute Architect or Engineer, having been accepted by the Building Official, for the Architect or Engineer who sealed and signed the plans for the subject structure, **or**
   ___ I am the threshold or special inspector used in accordance with this Code.

2. To the best of my knowledge, belief and professional judgment, the structural and envelope components of the structure are in compliance with the approved plans and other approved permit documents.

3. To the best of my knowledge, belief and professional judgment, the approved permit plans represent the as-built condition of the structural and envelope components of the structure.

Executed at _____, this 19th day of Nov., 1999.

NAME: PAUL A. WINGLER ; SIGNATURE: Paul A. Wingler ; LIC. NO: 12350

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 19 day of Nov., 1999, by Paul A. Wingler, who is personaly known to me or who has produced _____ as identification and who did not take an oath.

(NOTARY SEAL)

Sally A Herrick
Name SALLY A. HERRICK

I am a Notary Public of the State of Florida and my commission expires: Aug 4, 2001

NOTARY PUBLIC STATE OF FLORIDA
OFFICIAL NOTARY SEAL
SALLY A HERRICK
COMMISSION NUMBER
CC669218
MY COMMISSION EXPIRES
AUG. 4,2001

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4399	14 CASTLE HILL WAY	TIN TAG		
			OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4454	CASTLE HILL	SHEATHING		
	WOODS		OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]	[redacted]	[redacted]	[redacted]	NEED DUMPSTER
			NO	+ TEMP POWER
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4531	6 ISLAND RD	STEEL		
4516	" "	POOL STEEL	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4483	23 E. HI POINT	POOL FINAL	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
2526	22 LANTANA	ROOF		
		FINAL	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4501	36 CASTLE HILL		NO-	NEED DUMPSTER -
	WAY			WATER + POWER

OTHER: MILEAGE : START

END

INSPECTOR: _____ **DATE:** [redacted]

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4382	6 MINDORO	FINAL		
			O/C	AFTER FINAL AS BUILT
				SURVEY
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]	[redacted]	[redacted]		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4501	36 CASTLE HILL CT	TEMP POLE		
			O/C	CALL F.P.L.
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4524	1 H.B. LAGOON ISL.	STEEL		
		+ FORMS	O/C	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: MILEAGE : START

END

INSPECTOR: _____ **DATE:** [redacted]

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4490	32 N. River Rd	Final		
		Re-Model.	O/L	
		Doors -		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4532	8 Riverview	Roof Final		
			OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]				
			O/L	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: MILEAGE : START

END

INSPECTOR: _____ **DATE:** [redacted]

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4467	BECKER	INSULATION	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4529	1 N.R LAGOON PL	STEEL	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]	[redacted]	[redacted]	OK	[redacted] 1970 288 0559
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4516	6 ISLAND RD	G.R. ROUGH.	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: CHECK TREES MILEAGE : START
LOT 36 CASTLE HILL 288 1703 END
HUGGINS -

INSPECTOR: _____ **DATE:** [redacted] 99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4433	49 S. Sewells	Bott	Pass	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4542	9 Simera	Metal	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4478	8 Admirals W/C	S/AB	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]	[redacted]	[redacted]	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4516	Leno Scott Holmes	Slab Insp		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: MILEAGE : START
END
100 Hillcrest A.C. Pad Wall 286341

INSPECTOR: _____ **DATE:** [redacted] 2 - 10 - 99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
	665 S. Point. Rd	GARAGE		
			NO	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4524	1 N.E. Lagoon Isl.			
			OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4514	126 N. S. Point Rd	STAIR		
		FOOTING	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4478	Admirals wk	TIE BEAM +		NOT TO PLAN
		PLUMBING	NO	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]	[redacted]	[redacted]		
			OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4547	10 Middle Rd	ROOF		
		FINAL	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: MILEAGE : START

28 Rio Vista - Driveway? END

INSPECTOR: _____ **DATE:** [redacted]

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4379				
	JURIET.	INSULATION		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4488	1 MELODY LN	~~LANE~~		
		POOL	O/K	
		FINAL		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
	6 PINEAPPLE	FOOTING		
	LANE		O/K	FRI
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]	[redacted]	[redacted]	[redacted]	
	LUCIDO		O/K	LEE - 284 1470
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4552	WENDY LN	POOL		
		STEEL	O/K	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
	PALM RD	FOOTINGS		
	FRICK	WALL +	O/K	
		GATE		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4553	16 S.S. POINT	FOOTINGS		
	RD		O/K	

OTHER: MILEAGE : START

END

6 MIDDLE ROAD -

INSPECTOR: _____ **DATE:** [redacted]

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4411	21 Palm	Pool - Patio		
		Planter wall	OK	Pool Deck
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
	Becker	Slab		
	8. Hi Point			Not Ready
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
[redacted]		T.R. Beam		
		[redacted]	OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4453	Castle Hill	Insulation		
	Schlumpf		OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4478	8 Admirals	Dry in		
	Wk		OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4516	Island Rd	T.R.		
	Lino	Beam	OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4253	Plantation	Beam		
			OK	

OTHER: #4553 - 16 SSPR

INSPECTOR: _____ **DATE:** [redacted]

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4559	Hillcrest	Footer	NO	Water & Temp Power – Re-Inspect Req
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4529	Plantation	Insulation	O/K	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4255	Heckenberg-Plantation	Column	Ok	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]	[redacted]	Roof Nail [redacted]	[redacted] Ok	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4360	23 W. High Pt	2nd Floor All Trades	Ok	
	Footing	Ret-Wall	OL	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
	Cook Castle Hill	Roof		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4551	16 Hi Point	Roof	NO	Not Ready

OTHER: _____

INSPECTOR: _____ **DATE:** [redacted]

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4578	18 Palm Rd	Rough Plmg.	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4553	16 S.S. Pt. Rd	SLAB		NOT READY
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4383	29 Samara	Pool-SPA		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4534	1 Castle Hill	SLAB		
	Ln.			
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]	[redacted]	[redacted]	[redacted]	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: _____

_____

_____

_____

_____

INSPECTOR: _____ **DATE:** [redacted]99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
	23 CASTLE HILL WY	TIE BEAM	OK	
4588	43 CASTLE HILL WY	TEMP POWER	OK	CALL F.P.L.
4486	12 OAK HILL WY	INSULATION		NOT READY
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
[redacted]	[redacted]	ALL TRADES	OK	
4608	23 N. RIDGEWIEW	FINAL FENCE	OWNER NOT AWARE	-NO PERMIT ?
4601	14 ISLAND RD	FINAL FENCE	OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4607	9 LANTANA LN.	ROOF FINAL	OK	
	23 W. HIGH PT	RAT WALL & FOOT		NOT READY
4458	CASTLE HILL WY	FINAL	–	AS BUILT SURVEY
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS** DIS CONNECT
	21 PALM RD	POOL + LANDSCAPE FINAL	OK	
		FINAL		
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4573	19 ABBY CT	TIE BEAM	OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**

OTHER: _____

INSPECTOR: _____ **DATE:** [redacted]

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4503	2 SABLE CT	ALL TRADES	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4579	76. S.S. PT. RD	ALL TRADES	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4471	32 CASTLE HILL CT	POOL FINAL	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4479	30 E. HIGH PT	FINAL C.O	NO	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4587	ABBY CT	STEM WALL		NEED ENG. ON FOOTINGS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4573	19 ABBY CT	ROOF SHEATHING STRAPS + ANCHOR	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: _____

INSPECTOR: _____ **DATE:** 5-28-99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4503	2 SABLE	INSULATION		
			OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
	23 CASTLE HILL	TIE BEAM		
			OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4566	6 RIDGELAND	INSULATION	NO	NOT READY
				9:30 - RE-INSPECT
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4590	2 E HIGH PT	SLAB		
			OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4610	21 W HIGH PT	FINAL		NO PLANS
4609	21 W HIGH PT	DEAD MAN	NO	ON SITE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4530	10 ISLAND RD	STRAPS +		
		TIE DOWN	OK	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**

OTHER: _____

INSPECTOR: _____ **DATE:** 6-7-99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4516	6 ISLAND RD	SHEATHING	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4642	106 N. S. POINT RD	FINAL ROOF	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4503	2 SABLE CT	WALL FOOTINGS	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4632	117 HILLCREST	FRAMING STRAPS ANCHORS	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4597	RIDGELAND	DECK POOL	OK	871-0526
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4565	3 OAKHILL WY	ROOF SHEATHING	OK	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4510	66. S.S. PT. RD	PLUMBING	OK	

OTHER: P.V. 4383 McKINLEY; 24 SIMARA; C.O. reinspect; verified shutter storage and layout plan. STILL REQUIRED product approval compliance verification for Bahama shutters.

RECEIVED JUL 14

INSPECTOR: _____ **DATE:** _____

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Week of - 9/6

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
46405	Amos	final	FAILED	NO ACCESS (GATE LOCKED)
	114 SPARD			
4671N	Vence - 12 Wendy Lane	footer	PASSED	NO PERMIT ON SITE REQ. DWG RCVD; FIELD COPY TO SITE
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
X4503	LUCIDO	TIE BEAM	FAILED	NO FTG. INSP.; VERT STL. ~~CVRD~~
COMPLETE	2 SABAL CT.	+ Block cell(?)		COVERED (INSP. KO'S)
4666N	Nicholas - 21 Castle Hill Way	grade ground	rebar FAILED	CONST. SERVICES NOT INSP. PAPER.
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
45905	Gabbert	metal	FAILED	LATE INSP. REQUESTED
	2 E HIGHPOINT RD.			& NOT READY
				REQ. SPECS. RCVD: FIELD COPY TO SITE
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
46205	LARAWAY	RR roof/nailing SHEATHING (ALL)	PASSED	
	15. MIDDLE RD.			
				REV. & DUPL. PERMIT/PLANS TO SITE
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
S4655	LUCIDO	steele (POOL)	FAILED	NO PERMIT DOCUMENTS
	2 SABAL CT			11 FORMBOARD SURVEY
				STEEL SETTLED (WHERE IT REQ'D)
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
46125	~~Meeley~~ Miele	FINAL	FAILED	INSUFFICIENT DOCUMENTATION
	6 E. HIGHPOINT			
				OFFICE FILE TO SITE FOR INSP.
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4681N	Demarkales	ground	FAILED	NO CONST. SERVICES IN PLACE
	19 C. Hill Way	plumbing		(called Contractor)
4676N	Zotta - 23 Castle Hill Way	steel & bond GROUNDING ABOVE LIGHT NICHE	PASSED	FRMBD SURVEY REQ. PRIOR TO POUR

OTHER: 1. POSTED NOTICE OF BLDG DEPT NEWS & SPECIAL NOTICE OF BLDG DEPT CLSG (9/16-9/20) @ ALL SITES ✓
2. DELIVERED FIELD COPY OF REV. WALL (BRUTVAN) 23 W. HIGH POINT; STOP WORK RELEASED ✓
3. " " " " " FRMBD. SURVEY (KOECKER) 12 ISLAND WAY ✓

INSPECTOR: _____ **DATE:** 9/8/99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Fri., 10-29-99

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4595	Bruner	driveway	PASSED	~~CONST. NOT STARTED.~~
	105 Hillcrest Crt.			~~TREE REMOVED FROM SITE~~

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4589	Steve Conaway Const.	tie tog & metal	PASSED	
	130 N. S Pt Rd.			

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4710	Sadatnis	mail + tie down insp't.	PASSED	
	19 Island Rd.			

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4534	Benton	final for c.o.	PASSED W/COND AS NOTED (DOC's REQ.)	11:00 - 12:00 PER CONTR REQ. 10:AM says plans were stolen from job site
	1 Castlehill			

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4713	McSwiney	sh. coat mrg	PASSED	INSPECT SOFFIT REPAIRS @ FINAL.
	6 Miramar			
		T/T & MR (PM)	PASSED	

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4503	Luciano	temp. el.	← ?	G.C./ELECT. NOT ON SITE;
	2 Sabal Crt			NO TEMP. POWER REQUEST ON
			FAIL	FILE.

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: 4595 - BRUNER: 105 HILLCREST: rel. review of site grading w/ Cath. will increase retention area @ south & improve west drainage from drive to south into retention area.

INSPECTOR: _____ **DATE:** 10/29/99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Tues, 11-2-99

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4589	Conway	steel	PASSED	9:AM pour
	130 N.S.P. Rd.	GROUND SLAB		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4657	Foglia	tie beam	/ / /	CANCEL
	105 N. Sewall	column		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4662	Foglia	slab	PASSED	
	105 N. Sewall	" bonding		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4696	Clements	final roof	PASSED	TRAILER (IN PROGRESS)
	6 Middle Rd			INSPECTIONS UNDER
				PRIOR PERMIT
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4503	LUCIDO	TEMP. ELECT.	PASSED	
	2 SABAL CT			
	(off RIDGEWOOD)			
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

21 N. RIVER

OTHER: MARK AND OAKLEY: 995 S. SEWALL'S PT. RD. 781-2469 } PRE-SITE INSP.
DOUG BENT 975 " " " 286-5005 }

COMPLAINT - CONSTR W/O PERMIT (FENCE) 21 N. RIVER RD. - ADVISED STOP WORK; PERMIT REQ. & AS TO LOCATION OF "BOUNDARY" PORTION (25' FROM R.L.)

INSPECTOR: _____ **DATE:** 11/2/99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Mon. 11-22-99

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4679	Schultz	dock final	PASSED	RESOLVE LTR. AGMT SHOLTZ/ALLMAN
	64 S.S. P. Rd		DOCK ONLY	AS TO DOCK LOCATION PER VARIANCE
	TROPIC MARINE - TRINA	692-4154	NO LIFT	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4503	Lucido	walk-thru	CANCEL	call 708-3739 Lee
	2 Sabal Court	for final	EXPIRED PERMIT	leave message re: time
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4723	Koch	temp. el.	PASSED	FPL POWER RELEASE 11/24/99 11:35 "CAROL"
	71 N. River Rd.			
				NOTE: DUMPSTER REQUIRED
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4691	Subin	framing	FAILED	AM REINSPECTION
	8 Palm. Crt	& plumbing	PASSED	FEE ($30.00) REQ'D
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4527	Seeley	footers	FAIL	REINSPECT LATE P.M.
	37 Lofting	P.M. REINSPECT	FTG. SECTION	(REINSP. FEE $30.00)
		PASSED	INCOMPLETE	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER:

INSPECTOR: [signature] **DATE:** 11/22/99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

[redacted] Wed. 11-24-99

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4503	Lucido	final for c.o.# 2		Lee PTC. SEE "OTHER"
	[redacted] 2 Isabel Court			708-3739 to set up
4618		FINAL-COMPLETED WORK	PASSED	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
	Zotte	shutters		
	34 E. Hill Way	SEE PAGE 1		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4662	Foglia	tie beam &	PASSED	
	106 H. Sewall Way	columns		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: #1 WALK THRU (2 SABAL CT.) ~~ELEC~~/AC/ELECT./COMPLETE; PLMBG.-INCOMPLETE BLDG: GARAGE VENTILATION REQUIRED; STORM SHUTTER FINAL REQ; BALCONY GUARD RAILS; ELEC. CERTIFICATE CORRECTED (PANEL REQ'D LATER)

INSPECTOR: [signature]

DATE: 11/24/99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Wed. 12-1-99

	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4514	Cicoria	driveway	PASSED	PERMIT EXP. 12/2/99 - CONTR.
		126 N.S.P. Rd.			TO RESPEEN (1 MONTH) ON 12/2
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4650	Swiss Arm	truss /	FAILED	GABLE END FRAMING NOT PER ENG
		41 Banyan	tie down	(GABLE FRAMING	— REINSP (FEE) REQUIRED
		334-7717	TRUSS BRACING	→ PASS	
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4613	Subin	insulation	PASSED	(REINSPECT ATTIC A/C DUCTWORK)
		8 Palm Court			
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
S	[redacted]	Lucido	final for	PTL - OK FOR	11:AM
		[redacted]	C.O.	PTL. C.O.	S FOR ISSUANCE 12/2/99
	4751		STORM SHUTTERS	PASS — FINAL	
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
S	4660	Laraway	el. meter	PASSED	PM REQUESTED
		15 Middle Rd.			- called PTL (Sheri) w/
					water release 12/1 2:50 PM
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4732	Hurnagel	fl (rough	PASSED	
		19 Latona Way			
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4707	Nicklas	pool steel	PASSED	
		21 C. Hill Way	& gr. (PRE INSP.)		

OTHER: @ MIDDLE ROAD; PRE-PERMIT INSP (ALTERNATIVES)

INSPECTOR: _____ **DATE:** _____

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Wed, 12-29-99

PAGE 2 OF 2

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
5 4750	Lucido 2 Sabal Crt.	final (CK. LIST)	IN PROGRESS	PM✓ garage [illegible] cut - reinspect after [illegible]; extend deadline for handrail & [illegible]

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
5 4740	Griffis 140 S. S. P. Rd.	plywood SHEATHING	PASSED	Pacific PM ✓

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER:

INSPECTOR:

DATE:

OFFICIAL RECEIPT
(FOR MONEY RECEIVED)

No. 536368

DATE 11.17, 1998

Legal Svc. SCHOOL

RECEIVED FROM Thomas Lucido $ 1,006.03
(NAME OR ORGANIZATION)

FOR

FOR DEPOSIT IN Lot 2, Ridgland FUND(S)

D. Falls
PRINCIPAL OR RESPONSIBLE OFFICER

TOWN OF SEWALL'S POINT

CERTIFICATE OF OCCUPANCY

■ Single Family Residence □ Other _____

OWNER: THOMAS LUCIDO ; PROPERTY ADDRESS: 2 SABAL COURT

LEGAL DESCRIPTION: LOT 4 BLOCK _____ SUBDIVISION RIDGELAND

GENERAL CONTRACTOR: COMMERCIAL CONSTRUCTION ; LIC/CERT NO. CBC052954

ADDRESS: 440 EAST OSCEOLA STREET, STUART, FL ; TEL 220-3408 ; FAX 283-2855

ARCHITECT OR ENGINEER: PAUL A. WINGLER, P.E. ; LIC/REG. NO. 12350

ADDRESS: 2962 S.E. FAIRWAY W., STUART, FL. ; TEL 284-4571 ; FAX 220-5968

PERMIT NO: 4503 ; DATE OF ISSUE: 11/17/98 ; RENEWAL PERMIT NO: 4750 ; DATE OF ISSUE: 11/17/99 (EFFECTIVE)

In accordance with the requirements of the South Florida Building Code and the Codes and Ordinances of the Town of Sewall's Point, Florida, this Certificate of Occupancy is hereby issued for the foregoing described property.

Entered at Sewall's Point, Florida, this 1ST day of DECEMBER, 1999.

cc: TOWN CLERK
POLICE CHIEF
PROPERTY FILE

Edwin B. Arnold, AIA, CBO
Building Official, Town of Sewall's Point

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

4655

POOL

MASTER PERMIT NO. ~~NK~~4503

TOWN OF SEWALL'S POINT

Date 8/3/99

BUILDING PERMIT NO. 4655

Building to be erected for THOMAS & DIERDRE LUCIDO Type of Permit POOL

Applied for by POOLS BY ANDREWS (Contractor) Building Fee 240.00

Subdivision RIDGELAND Lot 4 Block _____ Radon Fee _____

Address 2 SABAL CT. Impact Fee _____

Type of structure S.F.R. A/C Fee _____

Parcel Control Number: Electrical Fee _____

1-38-41-011-000-00040.10000 Plumbing Fee _____

Amount Paid $240.00 Check # 402 Cash _____ Roofing Fee _____

Total Construction Cost $ 16,000.00 Other Fees (_____) _____

TOTAL Fees 240.00

Signed _____ Signed _____

Applicant

Town Building ~~Inspector~~ OFFICIAL

POOL / SPA PERMIT

INSPECTIONS

SETBACKS	DATE_____	DECK	DATE_____
COMPACTION TESTS	DATE_____	ENCLOSURE & LATCH	DATE_____
GROUND ROUGH	DATE_____	DOOR ALARM(S)	DATE_____
STEEL & BOND	DATE_____	FINAL	DATE 12/10/99
LIGHT NITCHE	DATE_____		

24 HOURS NOTICE REQUIRED FOR INSPECTIONS. **CALL 287-2455**

WORK HOURS – 8:00 AM UNTIL 5:00 PM

MONDAY TROUGH SATURDAY

☐ **New Construction** ☐ **Remodel** ☐ **Addition** ☐ **Demolition**

This permit must be visible from the street, accessible to the inspector.
FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT, NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.
DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!

Town of Sewall's Point

P.I.N. _____ Date 6/21/99

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: Pool Construction Cost 16,000.00

Owner's Name Thomas P. & Dierdre Lucido

Owner's Address ~~2 Sabal~~ 440 E. Osceola St. Stuart FL 34994

Fee Simple Titleholder's Name (If other than owner) _____

Fee Simple Titleholder's Address (If other than owner) _____

City Stuart State FL Zip 34994

Contractor's Name Pools by Andrews

Contractor's Address 1490 N.W. Federal Hwy

City Stuart State FL Zip 34994

Job Name Lucido

Job Address 2 Sabal Ct Martin County, Stuart, FL 34966

Legal Description Lot 4; Ridgeland Plat Book 8 Page 3

Bonding Company _____

Bonding Company Address _____

City _____ State _____ Zip _____

Architect/Engineer's Name Walter Karpinia

Architect/Engineer's Address 11406 172nd Pl. North, Jupiter FL 33478

Mortgage Lender's Name _____

Mortgage Lender's Address _____

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

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

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

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

Owner or Agent _____ Date _____

Contractor _____ Date _____

COUNTY OF MARTIN
STATE OF FLORIDA

Sworn to and subscribed before me this 21st day of July, 1992 by Edward Andrews, who: [X] is/are personally known to me, or [ ] has/have produced _____ as identification, and who did not take an oath.

Name: Marsha P Ragozzino
Typed, printed or stamped

(NOTARY SEAL)

I am a Notary Public of the State of Florida having a commission number of _____ and my commission expires: MARSHA P RAGOZZINO My Comm Exp 12/25/99 Bonded By Service Ins No CC520812

[X] Personally Known [ ] Other I.D.

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 [ ] has/have produced _____ as identification, and who did not take an oath.

Name: _____
Typed, printed or stamped

(NOTARY SEAL)

I am a Notary Public of the State of 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. _____

APPLICATION APPROVED BY _____ Permit Officer

_____ Building Commissioner

H:\Alexa\wp\permitapp

ACORD. CERTIFICATE OF INSURANCE

DATE (MM/DD/YY)

PRODUCER
J&H MARSH & MCLENNAN OF OHIO, INC.
1301 EAST NINTH STREET
SUITE 1900
CLEVELAND, OH 44114

39977-00005-ANSYL-

INSURED
ANTHONY & SYLVAN POOLS CORP.,
POOLS BY ANDREWS & TANGO POOLS,
SUBSIDIARIES OF ESSEF CORPORATION
ROUTE 611
3739 EASTON ROAD
DOYLESTOWN, PA 18901

RECEIVED
JUL 23
LIAB & WC

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

COMPANIES AFFORDING COVERAGE

COMPANY A: ROYAL INSURANCE COMPANY OF AMERICA

COMPANY B: AMERICAN MFRS. MUTUAL INSURANCE COMPANY

COMPANY C: AMERICAN PROTECTION INSURANCE COMPANY

COMPANY D: N/A

COVERAGES This certificate supersedes and replaces any previously issued certificate for the above named insured.

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	PHA012256	06/01/99	09/01/99	GENERAL AGGREGATE	$ 2,000,000
	[X] COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	$ 2,000,000
	[ ] CLAIMS MADE [X] OCCUR				PERSONAL & ADV INJURY	$ 750,000
	OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE	$ 750,000
	[X] SIR $250,000				FIRE DAMAGE (Any one fire)	$
					MED EXP (Any one person)	$
B	AUTOMOBILE LIABILITY	F3F086261-02 (AOS)	06/01/99	09/01/99	COMBINED SINGLE LIMIT	$ 1,000,000
	[X] ANY AUTO	F3F086262-02 (VA)			BODILY INJURY (Per person)	$
	[ ] ALL OWNED AUTOS	F3F086271-02 (TX)			BODILY INJURY (Per accident)	$
	[ ] SCHEDULED AUTOS	X3P083231-02 (MA)			PROPERTY DAMAGE	$
	[ ] HIRED AUTOS					
	[ ] NON-OWNED AUTOS					
	$1,000 DED. - COMP.					
	$1,000 DED. - COLLISION					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	$
	[ ] ANY AUTO				OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	$
					AGGREGATE	$
	EXCESS LIABILITY				EACH OCCURRENCE	$
	[ ] UMBRELLA FORM				AGGREGATE	$
	[ ] OTHER THAN UMBRELLA FORM					$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	3BR013506-02	06/01/99	09/01/99	[X] STATUTORY LIMITS	
	THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: [X] INCL [ ] EXCL				EACH ACCIDENT	$ 1,000,000
					DISEASE - POLICY LIMIT	$ 1,000,000
					DISEASE - EACH EMPLOYEE	$ 1,000,000
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS (LIMITS MAY HAVE BEEN REDUCED BY PAID CLAIMS AND MAY HAVE DEDUCTIBLES OR RETENTIONS.)

CERTIFICATE HOLDER

Town of Sewells Point
1 S Sewells Point Rd.
Sewells Point, FL

Attn : Building Dept

CANCELLATION

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

AUTHORIZED REPRESENTATIVE
Michael R. Jackisch

Michael Jackisch

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(904) 727-6530

ANDREWS, EDWARD W
POOLS BY ANDREWS INC
4500 PGA BLVD #303-A
PALM BEACH GARDENS FL 33418

STATE OF FLORIDA AC# 51881
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CP -C029646 06/27/1998 9790419

CERT RESIDENTIAL POOL/SPA CONTR
ANDREWS, EDWARD W
POOLS BY ANDREWS INC

IS CERTIFIED under the provisions of Ch. 489

Expiration Date: AUG 31, 2000

DETACH HERE

AC# 5188174

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
06/27/1998	97904194	CP -C029646

The RESIDENTIAL POOL/SPA CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 **FS.**
Expiration date: AUG 31, 2000

ANDREWS, EDWARD W
POOLS BY ANDREWS INC
4500 PGA BLVD #303-A
PALM BEACH GARDENS FL 33418

LAWTON CHILES
GOVERNOR

DISPLAY AS REQUIRED BY LAW

RICHARD T. FARRELL
SECRETARY

04/26/95 15:21

MARSHA STILLER
CLERK OF CIRCUIT COURT
MARTIN CO., FL

01115231

RECORDED & VERIFIED
BY D.C.

95 MAY -1 PM 3:26

1058.00

DEED $ ______ MARSHA STILLER
MTG $ ______ MARTIN COUNTY
SM $ ______ CLERK OF CIRCUIT COURT
INT. TAX $ ______ BY ______ D.C.

Parcel ID Number: 1-38-41-011-000-00040.10000
Grantee #1 TIN:
Grantee #2 TIN:

[Space Above This Line For Recording Data]

Warranty Deed

This Indenture, Made this 28th day of April, 1995 A.D., **Between** Jan C. Rose, a married woman,

of the County of Queens, State of New York, **grantor,** and Thomas P. Lucido and Dierdre Lucido, his wife,

whose address is: Quail Run Lane, Stuart, Florida 34994

of the County of Martin, State of Florida, **grantees.**

Witnesseth that the GRANTOR, for and in consideration of the sum of - - - - - - - - - - - TEN & NO/100($10.00) - - - - - - - - - - - - DOLLARS, and other good and valuable consideration to GRANTOR in hand paid by GRANTEES, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said GRANTEES and GRANTEES' heirs and assigns forever, the following described land, situate, lying and being in the county of MARTIN State of Florida to wit:

Lot 4, RIDGELAND, according to the Plat thereof as recorded in Plat Book 8, Page 3, of the Public Records of Martin County, Florida.

Subject to restrictions, reservations and easements of record, if any, which are not reimposed hereby, and taxes subsequent to December 31st, 1994.

The property herein conveyed DOES NOT consitute the HOMESTEAD property of the Grantor, nor is Grantor's HOMESTEAD or the HOMESTEAD of any of Grantor's family contiguous thereto. The Grantor resides at ______

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

In Witness Whereof, the grantor has hereunto set her hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

[signature]
Printed Name: Adri Reis
Witness
Geoffrey T. Hoderath
Printed Name: Geoffrey T. Hoderath

Jan C Rose (Seal)
Jan C. Rose
P.O. Address 320-55 46th Avenue, Bayside, NY 11361

STATE OF New York
COUNTY OF Bronx

The foregoing instrument was acknowledged before me this 27th day of April, 1995 by Jan C. Rose, a married woman,

who is personally known to me or who has produced her New York driver's license as identification and who did take an oath.

Geoffrey T. Hoderath
Printed Name:
NOTARY PUBLIC
My Commission Expires:

GEOFFREY T. HODERATH
Notary Public, State of New York
Qualified in Albany County
Commission Expires April 30, 1996

This Document Prepared By:
Robert S. Kramer, Esq.
COPELAND KRAMER SEWELL & SOPKO, P.A.
2307 S.E. Monterey Road
Stuart, FL 34996

OR BK 1120 PG 0718

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS $2500.00

POOLS BY ANDREWS, 1490 N.W. FEDERAL HIGHWAY, STUART, FL 34994

PERMIT #_____ TAX FOLIO #_____

NOTICE OF COMMENCEMENT

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY(INCLUDE STREET ADDRESS IF AVAILABLE):
LOT 4 RIDGELAND AS RECORDED IN PLAT BOOK 8, PAGE 3 MARTIN COUNTY, FLORIDA

GENERAL DESCRIPTION OF IMPROVEMENT: SWIMMING POOL

OWNER: THOMAS P. & DIERDRE LUCIDO

ADDRESS: 7 NE QUAIL RUN STUART FL 34996

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

CONTRACTOR: POOLS BY ANDREWS

ADDRESS: 1490 N.W. FEDERAL HIGHWAY - STUART, FL 34994

PHONE #: (561) 692-7946 **FAX #:** (561) 692-1705

SURETY COMPANY(IF ANY) NA NA

ADDRESS:_____

PHONE #_____ **FAX #:**_____

BOND AMOUNT: NA

LENDER: Northern Trust Bank of Florida, N.A.

ADDRESS: 2201 SE Kingswood Terrace, Stuart, FL 34996

PHONE #: (561) 287-7575 **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:

MARTIN COUNTY
THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.
MARSHA STILLER, CLERK
BY _____ D.C.
DATE 8.3.99
CIRCUIT COURT MARTIN COUNTY FLORIDA

NAME: NA

ADDRESS: NA

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

IN ADDITION TO HIMSELF, OWNER DESIGNATES NA OF NA 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.

DON SMITH
MY COMMISSION # CC 734256
EXPIRES: April 15, 2002
Bonded Thru Notary Public Underwriters

X Lucido
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 19TH DAY OF July 1999 BY THOMAS LUCIDO

PERSONALLY KNOWN ✓
OR PRODUCED ID _____
TYPE OF ID _____

Don Smith
NOTARY SIGNATURE

/data/bzd/bldg_forms/Noc.aw

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
One South Sewall's Point Road
Sewall's Point, Florida 34996
Tel: (561) 287-2455
Fax: (561) 220-4765

PLAN REVIEW NOTES

☐ SINGLE FAMILY RESIDENCE; ☐ ADDITION; ☐ DOCK; ☒ POOL; ☐ FENCE; ☐ _____

OWNER: THOMAS & DIEDRE LUCIDO; ADDRESS: 440 E. OSCEOLA ST. STUART

PROJECT ADDRESS: 2 SABAL CT. ; LEGAL: LOT 4 BLK ___ SUB RIDGELAND

GENERAL CONTRACTOR: POOLS BY ANDREWS ; LIC/CERT NO. CP C029646

ADDRESS: 1490 N.W. FEDERAL HWY., STUART 34994; TEL _____ ; FAX _____

ARCHITECT OR ENGINEER: WALTER KARPINIA, P.E. ; LIC/REG. NO. 46635

ADDRESS: 11406 172ND PL. NORTH, JUPITER, FL 33478; TEL _____ ; FAX _____

Review of the application, supporting documents, plans and specifications submitted on the above project indicate the following items are required for submittal and/or revision :

SUBMIT: 1. RECORDED WARRANTY DEED ✓ RCVD 8/3/99

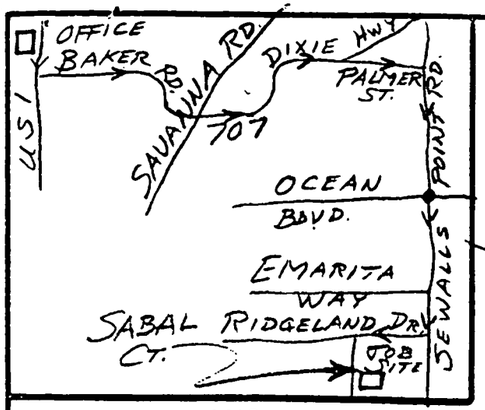
2. " NOTICE OF COMMENCEMENT ✓

NOTE; POOL DECK P/C - SEPARATE PERMIT REQUIRED

8/2 P/C W/CONTRACTOR: ADVISED OF PLAN REVIEW STATUS WILL BRING ID REQ. DOC'S. & PICK UP PERMIT 8/3/99

Prepared By: _____ Title: BLDG OFFICIAL Date: 8/2/99

PREDICTABILITY + ACCOUNTABILITY = COMPLIANCE



MAP
(N.T.S.)

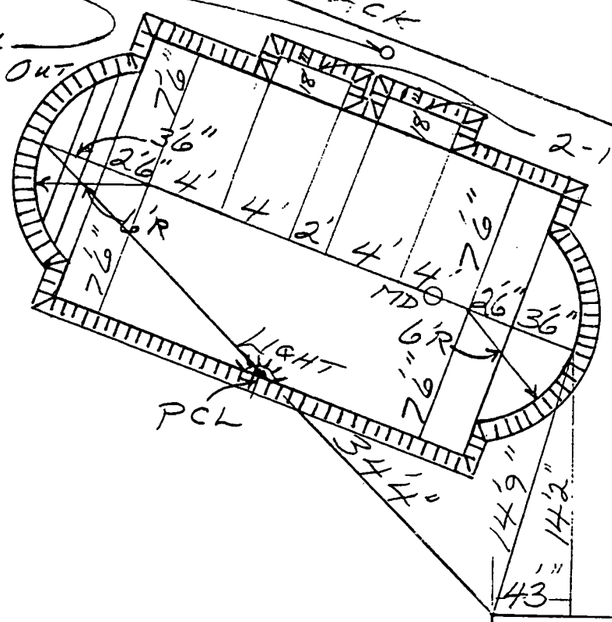
PROPERTY LINE

SETBACK LINE

WATERFALL LINE STUB OUT

2-18"x4' SWIMOUTS

FORM BOARD SURVEY
W/SET BACK LINES NOTED
& DIMENSIONED (SIDE & REAR)
REQUIRED @ STR. INSPECTION.



ACCESS

TOWN OF SEWALL'S POINT
2 SABAL CT.
RENEWED 8/2/99
TOWN COPY
B.P. NO. 4655

RESIDENCE

POOL EQUIPMENT

SCALE 1/8"=1'0"

POOLS by
ANDREWS
an Anthony & Sylvan Company

GENERAL SPECIFICATIONS

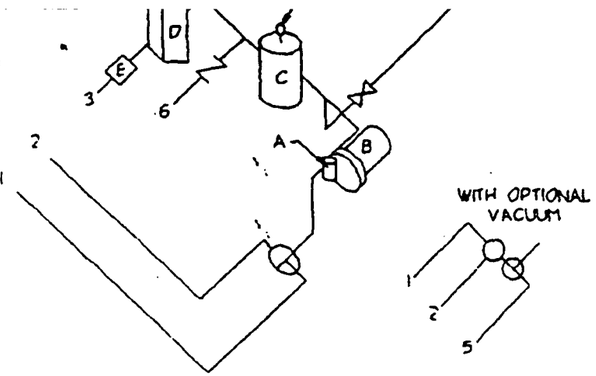
JOB NO. 328-104 SHAPE BERMUDA
SIZE 15' x 30' DEPTH 3' TO 6'
SF 406 PER. 80' TEMP NO.
POOL CAPACITY 13000 GALS
FILTER DE SQ. FT. 36 PUMP H.P. 1
TILE 6"x6" TO BE CHOSEN BRICK BULLNOSE
DECKING BY OTHERS SQ. FT.
FOOTERS NA D.O.D. NA
LIGHT 12V-300 WATTS
SWIMOUT 2-18"x4'
LADDER NO HANDRAIL NO
SKIMMER INC. MAIN DRAIN 2"
RETURN LINES: QTY. 3 TYPE: 1½"
ELECTRICAL HOOKUP INC.
UNDERWATER VACUUM W/HOSE INC.
MUNICIPALITY SEWALLS POINT
SET BACKS: SIDE
REAR
HOUSE
NOTES: 1) IN LINE CHLORINATOR
2) STUB PLUMBING FOR POOL CLEANER
3) WATERFALL LINE WITH VALVE LOCATED AT PUMP & FILTER
4) WHITE PEARL PEBBLE TEC

DESIGNER Dan Smith DATE

SWIMMING POOL

Name COMMERCIAL CONST. / THOMAS LUCIDO
Address: 2 SABAL CT.
City SEWALLS POINT Phone
LEGAL DESCRIPTION
LOT 4 BLK SUB RIDGELAND
BOOK PAGE LOCATION

LICENSED
CHRISTOPHER R. KARPINSKI
CERTIFICATE
No. 16036
7/23/99
STATE OF
FLORIDA

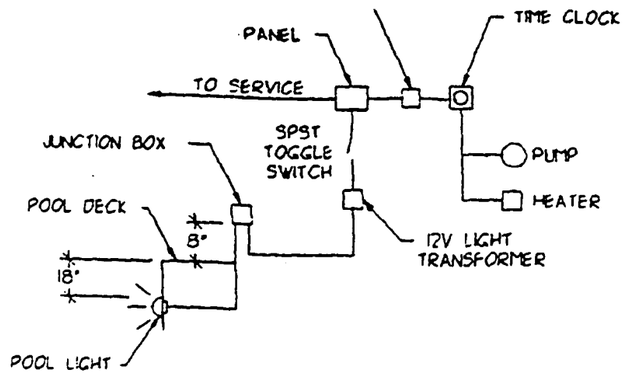


1 - POOL MAIN DRAIN
2 - SKIMMER DRAIN LINE
3 - POOL RETURN LINE
4 - WASTE LINE
5 - VACUUM LINE (OPTIONAL)
6 - THERAPY JETS (OPTIONAL)

A - HAIR & LINT STRAINER
B - RECIRCULATING PUMP
C - FILTER
D - HEATER (OPTIONAL)
E - CHLORINATOR (OPTIONAL)

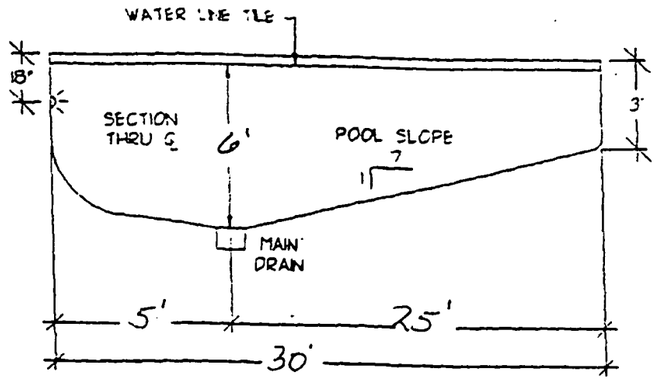
⊠ - GATE VALVE OR BALL VALVE
⊘ - BY PASS (AUTO)
○ - 3 WAY JANDY
⊠ - CHECK VALVE

POOL PIPING DIAGRAM

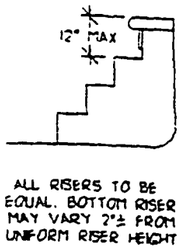


NOTE: USE 1" APP CONDUIT IN POOL AREA ROUND ALL BOXES, LIGHTS AND MOTOR W/ #8 WIRE (SOLID) POOL PUMP MOTOR TO BE LOCATED ABOVE GROUND.

POOL ELECTRICAL DIAGRAM



TYPICAL SECTION POOL
(DIVING EQUIPMENT PROHIBITED)



ALL RISERS TO BE EQUAL. BOTTOM RISER MAY VARY 2"± FROM UNIFORM RISER HEIGHT

TYPICAL SECTION THRU STEPS

POOL DECK NOT INCLUDED IN THIS PERMIT. SEPARATE PERMIT APPLICATION REQUIRED - W/ AS BUILT SURVEY @ FINAL

TYPICAL WALL SECTION AND WELL POINT

N.T.S.

GENERAL NOTES:

1. POOL FLOOR AND WALLS SHALL BE MADE OF PNEUMATICALLY PLACED CONCRETE WITH A COMPRESSIVE STRENGTH OF 3000 PSI IN 28 DAYS.
2. ALL REINFORCING STEEL SHALL BE INTERMEDIATE OF HARD GRADE DE-FORMED BARS OF NEW BILLET-STEEL CONFORMING TO A.S.T.M.A.-15 AND SHALL BE BENT, LAPPED AND PLACED IN ACCORDANCE WITH ACI STANDARDS AND SPECIFICATIONS.
3. FOR POOL PLAN, SIZE OF SLABS AND SPECIAL DETAILS REFER TO SHEET #1.
4. ALL POOL PIPING SHALL BEAR THE NSF SEAL.
5. MAIN SUMP SHALL HAVE FREE AREA FOUR TIMES THE AREA OF SUCTION LINE.
6. BACKWASH OR CLEANING SHALL BE IN ACCORDANCE WITH EACH MUNICIPALITIES CODE REQUIREMENTS.
7. WATER SUPPLY AND DISPOSAL SHALL BE ARRANGED SO THAT THERE IS NO CROSS CONNECTION WITH A DOMESTIC WATER SUPPLY OR DISPOSAL SYSTEM.
8. GRADING SHALL CONFINE PONDING OF POOL WATER WITHIN LOT LINE.

PLUMBING NOTES:

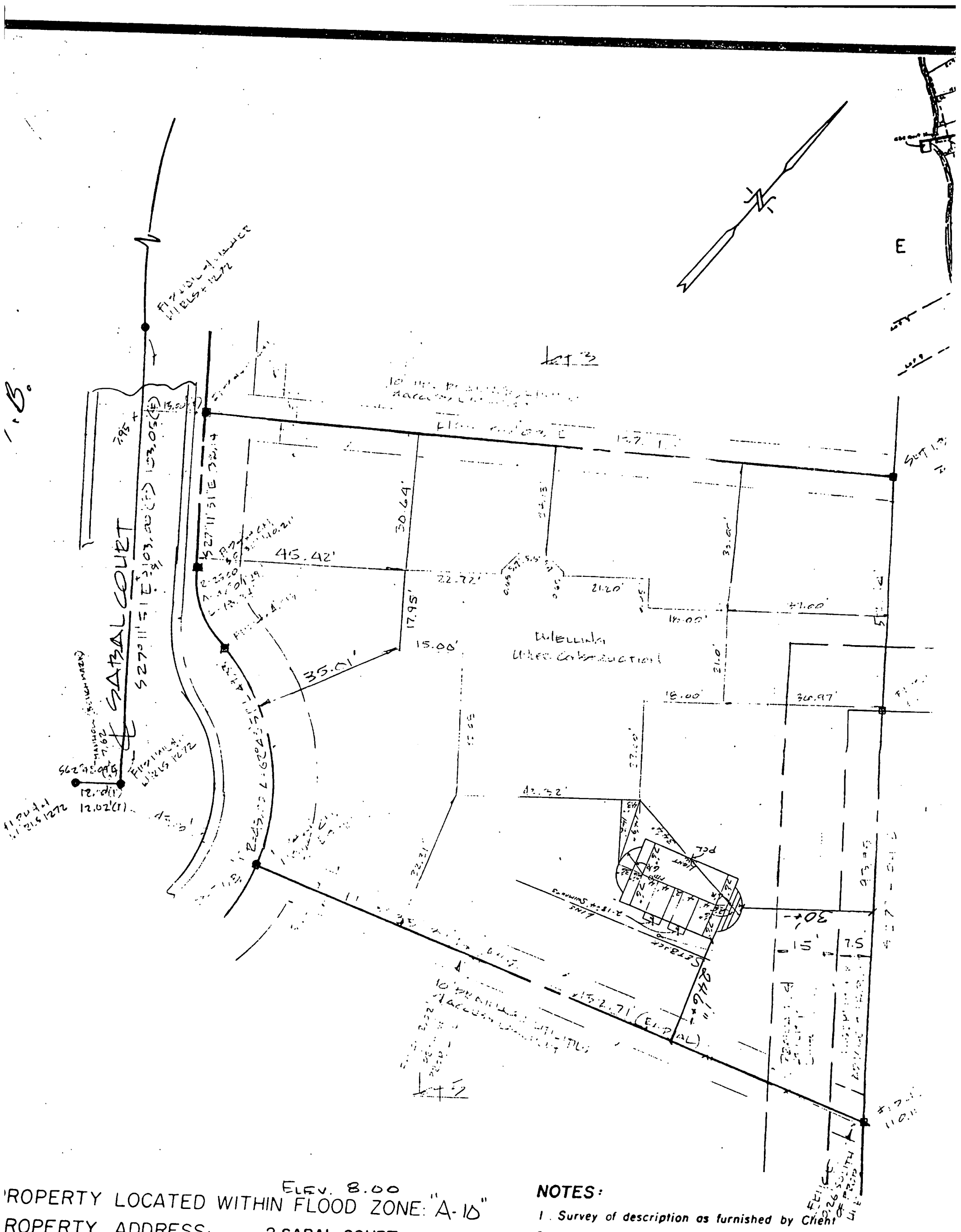
1. NO 90 DEGREE SUCTION LINES.
2. ALL PIPING SCHEDULE 40.

POOLS BY ANDREWS
1490 N.W. FEDERAL HIGHWAY
STUART, FL 34994
(561) 692-7946

LUCIDO RESIDENCE

DATE: 7-9-99

WALTER R. KARPINE CERTIFICATE No 46885 STATE OF FLORIDA 2/23/99



PROPERTY LOCATED WITHIN FLOOD ZONE: "A-10" Elev. 8.00

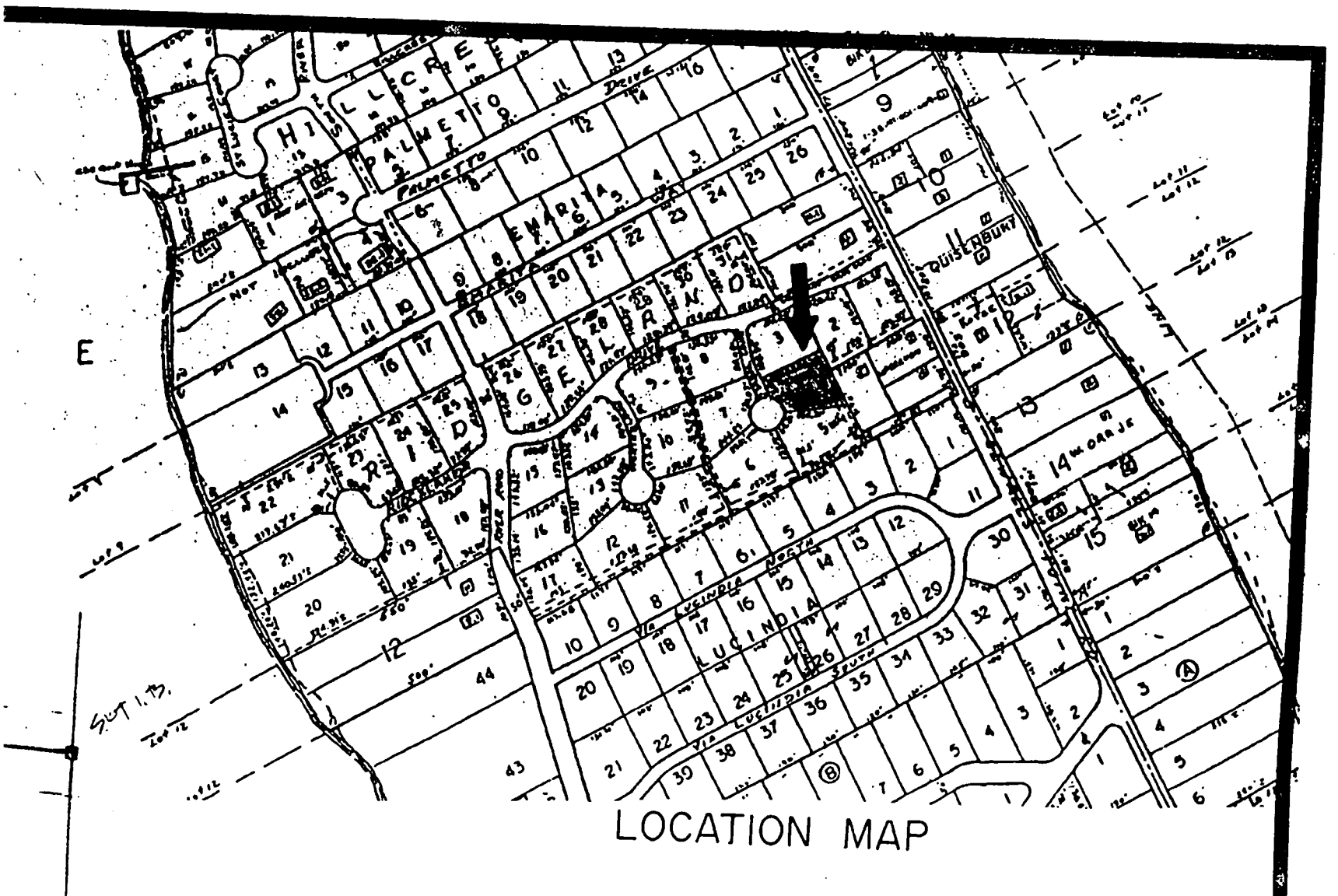
PROPERTY ADDRESS: 2 SABAL COURT

CERTIFIED TO: THOMAS P. & DIEDRE LUCIDO LINDA R. MCCANN, ATTORNEY AT LAW ATTORNEYS TITLE INSURANCE FUND, INC. FIRST NATIONAL BANK & TRUST COMPANY OF THE TREASURE COAST, ITS SUCCESSORS &/OR ASSIGNS, ATIMA

NOTES:

1. Survey of description as furnished by Client
2. Lands shown hereon were not abstracted for easement and/or rights-of-way of record.
(P) Denotes distance or bearing by description as furnishe
(F) Denotes measured distance or bearing.
(C) Denotes calculated distance or bearing.
3. All bearings are referenced to the instrument of record as shown hereon, unless otherwise noted.
4. Elevations shown hereon are relative to National Geodet Vertical Datum of 1929, and are based on bench mark.
5. There are no above ground encroachments, unless otherwise show

SET I.B. - SET 5/8 IRON BAR & CAP #4049
FND. - FOUND OBJECT
I.P. - IRON PIPE
C.M. - CONCRETE MONUMENT
I.B. - IRON BAR
OHW - OVERHEAD WIRE
- DRAINAGE FLOW
M.H. - MANHOLE



LOCATION MAP

LEGAL DESCRIPTION

KNOWN AS LOT 4, RIDGELAND, AS RECORDED IN PLAT BOOK 8, PAGE 3, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

SURVEYOR'S CERTIFICATE

WE HEREBY CERTIFY THAT THE BOUNDARY SURVEY AS SHOWN HEREON IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF AS SURVEYED UNDER OUR DIRECTION. WE FURTHER CERTIFY THAT IT MEETS THE MINIMUM TECHNICAL STANDARDS UNDER RULE 61G17-6 FLA. ADMINISTRATIVE CODE, PURSUANT TO CHAPTER 472.027 FLA. STATUTES. **NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.**

STEPHEN J. BROWN INC.

Stephen J. Brown PROFESSIONAL LAND SURVEYOR

REVISIONS
TRUE SURVEY 4/6/95
SITE PLAN 12/20/98
FORM BOARD AS-BUILT SURVEY 2/19/99
2ND TIE-IN 3/8/99

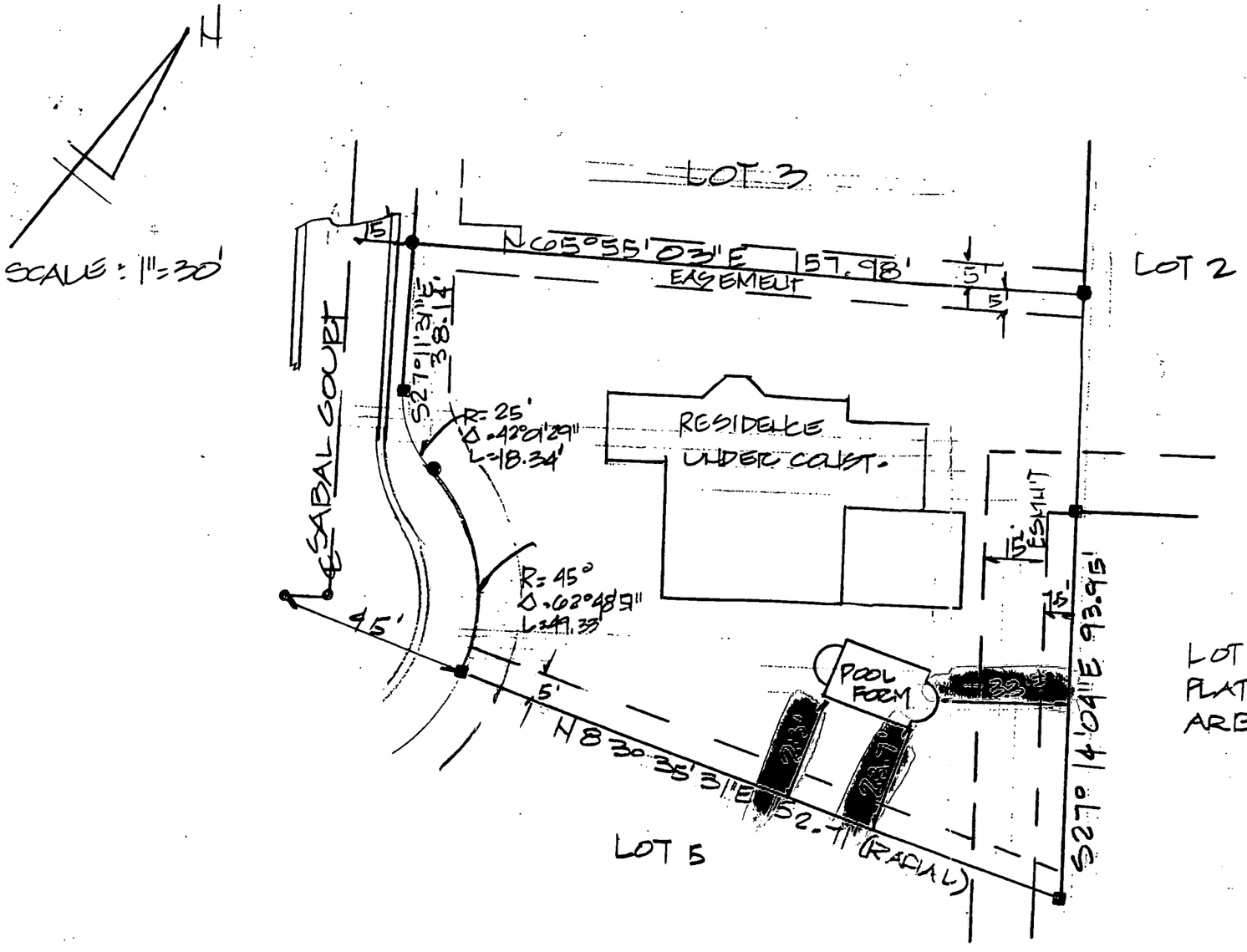
BOUNDARY SURVEY

PREPARED FOR: LUCIDO

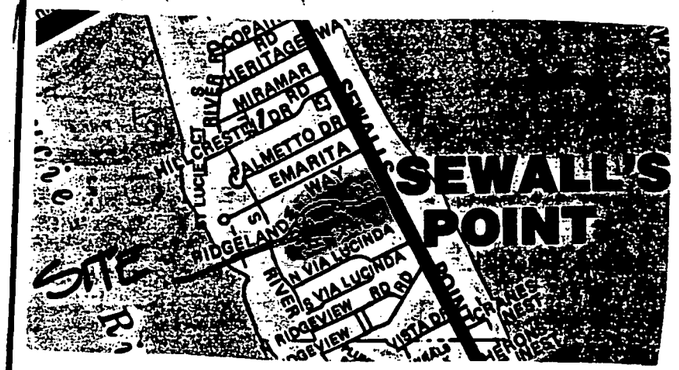
STEPHEN J. BROWN INC.

SURVEYORS • DESIGNERS • LANDPLANNERS • CONSULTANTS

DRAWN	S. J. B.
CHECKED	S. J. B.
DATE	03/24/95
SCALE	1" = 20'
JOB NO.	805-32-01
SHEET	ONE



LOCATION MAP



LEGAL DESCRIPTION

LOT 4 RIDGELAND ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 8 PAGE 3 PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.
STREET ADDRESS: 2 SABAL COURT

SURVEY NOTES:

1. NOT VALID UNLESS SEALED WITH AND EMBOSSED SURVEYOR'S SEAL.
2. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR RIGHTS-OF-WAY, EASEMENTS OR OWNERSHIP.
3. LAND DESCRIPTION HEREON WAS PROVIDED BY THE CLIENT.
4. BEARINGS SHOWN HEREON ARE BASED ON THE ASSUMED DATUM
5. THIS SURVEY NOT TO BE USED FOR FENCE INSTALLATION SPRINKLER SYSTEMS. SHRUBS OR ANY OTHER UTILITIES WITHOUT REVERIFICATION OF PROPERTY CORNERS.

CERTIFIED TO:

FOR OWNERS
2 SABAL CT

PERRY [redacted]

RECEIVED
SEP 16

THIS IS NOT A BOUNDARY SURVEY

SURVEYOR'S CERIFICATE

I HEREBY CERTIFY THAT THIS SKETCH IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AS SURVEYED IN THE FIELD. I FURTHER CERTIFY THAT THIS SURVEY COMPLIES WITH THE MINIMUM TECHNICAL STANDARDS SET FORTH IN CHAPTER 61G-17-6 BY THE FLORIDA BOARD OF LAND SURVEYORS PURSUANT TO SECTION 472.027 FLORIDA STATUTES, AND THAT THERE ARE NO ABOVE GROUND ENCROACHMENTS OTHER THAN SHOWN.

BY: _____ DATE: 9/13/99

PROFESSIONAL SURVEYOR AND MAPPER
FLORIDA REGISTRATION # 4572
FRED W. REPASS P.S.M.

LEGEND:
- ■ - FOUND CONCRETE MONUMENT
- ● - FOUND IRON ROD
- o - SET IRON ROD AND CAP NUMBER 4572

FIELD WORK COMPLETED 9/10/99

FRED W. REPASS
LAND SURVEYING & MAPPING
706 BUCK-HENDRY WAY
P.O. BOX 3424
STUART, FL 34995
PH. (561) 692-3827 FAX (561) 692-9529

SPECIAL PURPOSE SURVEY
POOL FORM TIE-IN

PREPARED ON THE ORDER OF:
POOLS BY ANDREWS

SCALE: 1"=30' DWG BY: ARA FILE NO: 99-629

FRASER ENGINEERING AND TESTING, INC.

VERO BEACH (561) 567-6167 FORT PIERCE (561) 461-7598 STUART (561) 283-7711 FT. PIERCE 1-800-233-9011

RECEIVED
OCT - 1 [illegible]

Report of DENSITY OF SOIL IN PLACE ASTM D2922

CLIENT: Pools by Andrews

DATE: ~~9/29/99~~ FAX Rcvd 9/30/99

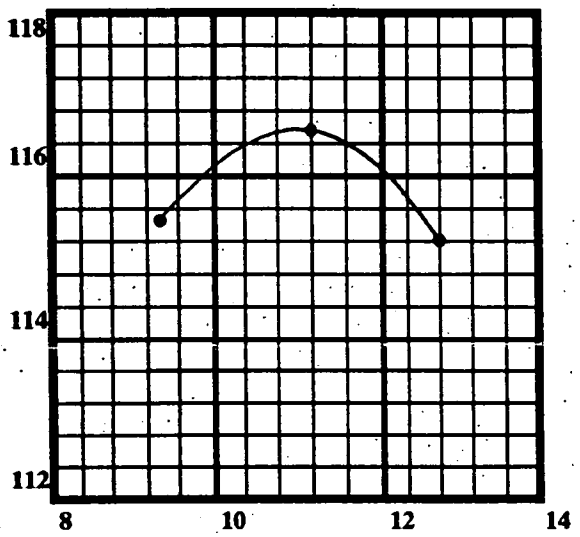
CONTRACTOR: Client

TEST #: 1648

[redacted] Pool Deck Backfill

PERMIT #: 4655

DENSITY TEST NO.	DATE TESTED	LOCATION	ELEVATION BELOW SLAB GRADE	MOISTURE-DENSITY RELATIONSHIP TEST NO.	MAX DRY WT	IN PLACE DRY DENSITY	PERCENT COMPACTION
1648	9/29/99	N. Side Ctr. Side of Pool	0 - 1'	1648	110.5	107.2	97.1
		N.W. Corner of Pool	0 - 1'			108.8	98.5
		S.E. Corner of Pool	0 - 1'			107.0	96.8
		S.W. Corner of Pool	0 - 1'			109.0	98.6
		N.W. Corner Btwn. House & Pool	0 - 1'			107.2	97.0
		N.W. Corner Btwn. House & Pool	1 - 2'			105.5	95.5
		N.W. Corner Btwn. House & Pool	2 - 3'			100.5	91.0
		N.W. Corner Btwn. House & Pool	3 - 4'			100.2	90.7
		N.W. Corner Btwn. House & Pool	4 - 5'			101.6	91.9
		N.W. Corner Btwn. House & Pool	5 - 6'			102.1	92.4



Test Method : ASTM D 1557
Sample Location: Composite
Maximum Density: 110.5
Optimum Moisture: 12.2

Sample Description:

Brown & Gray, slightly silty, fine sand

Respectfully submitted,
FRASER ENGINEERING AND TESTING, INC.

Alexander H. Fraser, P.E., Florida Reg. No. 16178

Copies: Client - 1
MC Bldg. Dept. - 1

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Fri., 12-10-99

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4569	Gerard	deck	PASSED	
	104 Abbie Court			
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4554	Page'	roof sheathing	PASSED	
	8 St. Lucie Crt.			
	Hillcrest			
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4655	Jucuto	Final	PASSED	
	2 Sabal Crt.	Pool		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4717	Zarro	pre. site	PASSED	
	124 N.S.P. Rd	insp		
		(HAD. PERMT. VERM.)		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4702	Perry	straps /	PASSED	
	18 N. Ridgeview	anchors		
		(FLOOR)		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4658	Foglia	truss	(ROLLOVER)	AM if possible
	103 H. Sewall	engineering		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4589	DeGiora	framing		AM if possible
	N. P. Rd.	STRUCT.	PTL. PASSED	285-2673 Steve
				will meet you at site

OTHER: 2:00 SITE INSP. 24 SIMARA McKINNEY (W/COMM. KISLING) X CANCEL BY COMM. KISLING

INSPECTOR: _____ **DATE:** 12/10/99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

9-17-99, Fri.

	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
S	4631	Brutvan	temp. el.	FAIL	NOT READY; WILL RESCHED 9/22
		23 W. Ft. Pt. Rd	footer	PASSED	FRONT P/L RET/WALL
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4677	Millard	framing	PASSED	PRE-CONST. INSP. OF EXSTG. +
		5 Indialucie Pkwy.	FASCIA/SOFFIT REPL.		RTL. INST @ E WALL; NO FOR TAPER
		SO. SHORE CONST 286-4753			IN PROGRESS REQ.; CONTR. TO CALL FINAL
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4565	Kennedy	mechanical	FAILED	REINSPECT M/P W/STRUCT.
		3 Oak Hill Way	PLUMBING	FAILED	FRAMING
			ELECTRICAL	PASSED	
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
S	4655	Lucido	steel/SETBACK	PASSED	FORMBOARD SURVEY RCVD 9/16/99
		2 Sabal Court	GRD REF/LIGHT		
			NICHI		
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: 1.10 RIVERVIEW DR. T/R PER. APPR. INSP.

INSPECTOR: _____ **DATE:** 9/17/99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Week of 9-7

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
46405	Amos	final	FAILED	NO ACCESS (GATE LOCKED)
	114 SSPtRd			
4671N	Vance - 12 Wendy Lane	footer	PASSED	NO PERMIT ON SITE REV. DWGS RCVD; FIELD COPY TO SITE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
X4503	LUCIDO	TIE BEAM	FAILED	NO FTG. INSP.; VERT STL. ~~CURED~~
COURT WORK 4678	2 SABAL CT.	+ Block cell (?)		COVERED (INSP. K's)
4665N	Nicholas - 21 Castle Hill Way	underground pl.	FAILED	CONST. SERVICES NOT INSP. & APPR.
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
45905	Gabbert	metal	FAILED	LATE INSP. REQUESTED
	2 E. HIGHPOINT RD.			& NOT READY
				REG. SPECS. RCVD: FIELD COPY TO SITE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
46205	LARAWAY	RRoof/nailin	PASSED	
	15. MIDDLERD.	STRAPPING (ALL)		
				REV. & DUPL. PERMIT/PLANS TO SITE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
54655	LUCIDO	steele	FAILED	NO PERMIT DOCUMENTS
	2 SABAL CT	(POOL)		& FORMBOARD SURVEY
				STEEL SETTING (WORK AT REAR)
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
46125	~~Meeley~~ Miele	FINAL	FAILED	INSUFFICIENT DOCUMENTATION
	6 E. HIGHPOINT			
				OFFICE FILE TO SITE FOR INSP.
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
46[illegible]	Demarkaias	ground	FAILED	NO CONST. SERVICES IN PLACE
	19 C. Hill Way	plumbing		(called Contractor)
4676	Zotta - 22 Castle Hill Way	steel & bond ground/above light niche	PASSED	FRMBD SURVEY REQ. PRIOR TO POUR

OTHER: 1. POSTED NOTICE OF BLDG DEPT HOURS & SPECIAL NOTICE OF BLDG DEPT CLSG (9/6-9/12) @ ALL SITES ✓
2 - DELIVERED FIELD COPY OF REV. WALL (RETAINING) 23 W. HIGH POINT; STOP WORK RELEASED ✓
3 " " " " " FMBD. SURVEY (BECKER) 12 ISLAND WAY ✓

INSPECTOR: _____ **DATE:** 9/8/99

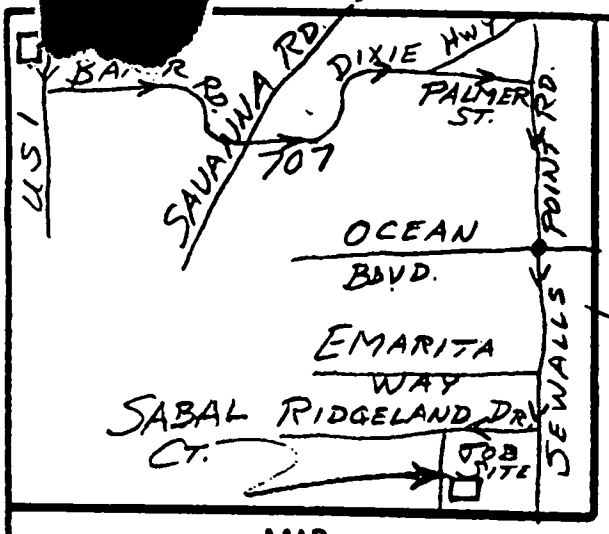
1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Week - 9-7

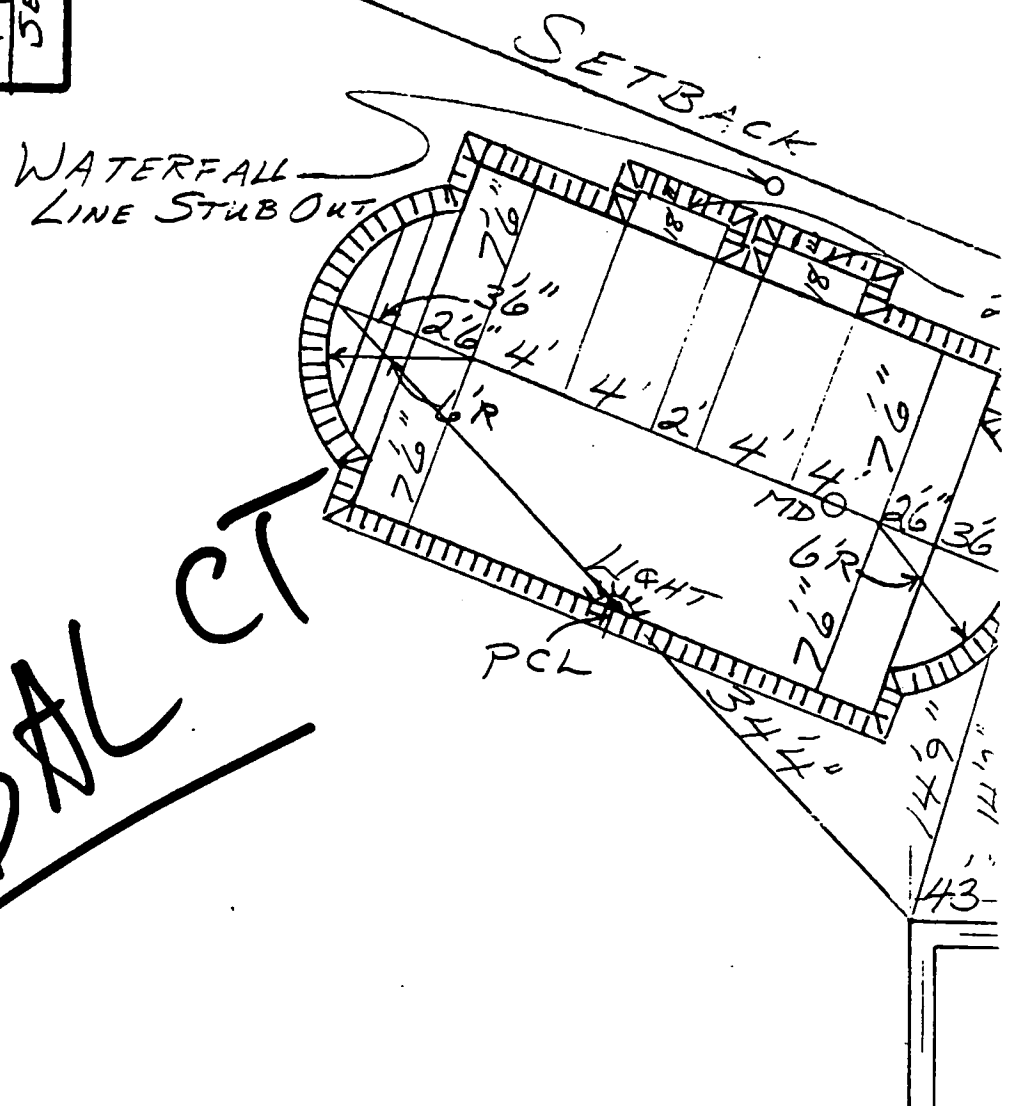
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
46405	Amos	final	FAILED	NO ACCESS (GATE LOCKED)
	114 SSPt Rd			
46071N	Vance 12 Wendy Lane	footer	PASSED	NO PERMIT ON SITE REV. DWGS RCVD; FIELD COPY TO SITE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
X4503	LUCIDO	TIE BEAM	FAILED	NO FTG. INSP.; VERT STL. ~~CVRD~~
COURTESY 4678	2 SABAL CT.	+ BLOCK CELL(?)		COVERED (INSP. KO'S)
46081N	Nicholas - 21 Castle Hill Way	under ground pl.	FAILED	CONST. SERVICES NOT INSP. & APPR.
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
45905	Gabbert	metal	FAILED	LATE INSP. REQUESTED
	2 E HIGHPOINT RD.			& NOT READY
				REV. SPECS. RCVD: FIELD COPY TO SITE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
46205	LARAWAY	RR Roof/nailin	PASSED	
	15. MIDDLE RD.	SHEATHING (ALL)		
				REV. & DUPL. PERMIT/PLANS TO SITE
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
[redacted]	LUCIDO	steele	FAILED	NO PERMIT DOCUMENTS
	[redacted]	(POOL)		& FORMBOARD SURVEY
				STEEL SETTING (WILL BE REQ'D)
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
46125	~~Meeter~~ Miele	FINAL	FAILED	INSUFFICIENT DOCUMENTATION
	6 E. HIGHPOINT			
				OFFICE FILE TO SITE FOR INSP.
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
46[illegible]N	Dermatis	ground	FAILED	NO CONST. SERVICES IN PLACE
	19 C. Hill Way	plumbing		(called Contractor)
4676N	Zotta - 23 Castle Hill Way	steel & pond GROUND ROUGH LIGHT NICHE	PASSED	FRMBD SURVEY REQ. PRIOR TO POUR

OTHER: 1. POSTED NOTICE OF BLDG DEPT HOURS & SPECIAL NOTICE OF BLDG DEPT CLSG (9/16-9/27) @ ALL SITES ✓
2 - DELIVERED FIELD COPY OF REV. WALL (BEUTLICH) 23 W. HIGH POINT; STOP WORK RELEASED. ✓
3 " " " " " FMBD. SURVEY (KREEKER) 12 ISLAND WAY. ✓

INSPECTOR: [signature] **DATE:** 9/8/99



MAP
(N.T.S.)



25 SABAL CT

POOL
EQUIPMENT

SCALE 1/8"=1'0"

POOLS by
ANDREWS
an Anthony & Sylvan Company

PROPERTY LINE

FORM BOARD SURVEY
W/SET BACK LINES NOTED
& DIMENSIONED (SIDE & REAR)
REQUIRED @ STC. INSPECTION.

LINE
4' SWIMOUTS

ACCESS

TOWN OF SEWALL'S POINT
2 SABAL CT.
REVISED 8/2/99
TOWN COPY
BP. NO. 4655

RESIDENCE

7/23/99

GENERAL SPECIFICATIONS

JOB NO. 328-104 SHAPE BERMUDA
SIZE 15' x 30' DEPTH 3' TO 6'
SF 406 PER. 80' TEMP NO.
POOL CAPACITY 13000 GALS
FILTER DE SQ. FT. 36 PUMP H.P. 1
TILE 6"x6" TO BE CHOSEN BRICK BULLNOSE
DECKING BY OTHERS SQ. FT.
FOOTERS NA D.O.D. NA
LIGHT 12V-300 WATTS
SWIMOUT 2-18"x4'
LADDER NO HANDRAIL NO
SKIMMER INC. MAIN DRAIN 2"
RETURN LINES: QTY. 3 TYPE: 1½"
ELECTRICAL HOOKUP INC.
UNDERWATER VACUUM W/HOSE INC.
MUNICIPALITY SEWALLS POINT
SET BACKS: SIDE
REAR
HOUSE
NOTES: 1) IN LINE CHLORINATOR
2) STUB PLUMBING FOR POOL CLEANER
3) WATERFALL LINE WITH VALVE LOCATED AT PUMP & FILTER
4) WHITE PEARL PEBBLE TEC

DESIGNER Don Smith DATE

SWIMMING POOL

Name COMMERCIAL CONST. / THOMAS LUCIDO
Address 2 SABAL CT.
City SEWALLS POINT Phone

LEGAL DESCRIPTION
LOT 4 BLK SUB RIDGELAND

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Mon - 8/30

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4565	Kennedy	DRY IN		10:00 NOT READY; REINSPECT 3:30 (No Fee
	3 OAKHILL WAY		PASSED	4:00 PM reinspect
M	CASTLE HILL			complete
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4655	~~Lucido~~	~~roof steel~~	~~Cancelled~~	
	~~2 Isabel Ct.~~	~~inspect.~~		8/30/99 AM
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4658	Inglis Court	stem wall	Passed	
	103 Henry	footing inspect		
S	Sewall Way			
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4657	Inglis Court	stem wall	Failed	not ready - call for reinsp
	105 Henry	footing inspect		(no fee - reinspection billing)
S	Sewall Way			
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4650	Gunderman Court	trench inspection	Passed	GROUND ROUGH
	4 SE Bayview Rd	ground inspection		NOTE: TEMP PWR/ WATER/ DUMPSTER R
N.	(HERMIT 334-7730			8/31 CONTRACTOR ADVISED
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4613	SUBIN	TIE BM	Passed	FNGR. CTR. REQ.: 2 ADD #5 BET
	8 PITCH COURT			@ EA LINTEL OVG - NO STIRRUPS
D	(DRIFTWOOD)			
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4672	6 MIDDLE ROAD	FINAL	Passed	Temporary closure
	CLEMENTS			complete - close permit
	JIM CAMPBELL CONST			

OTHER: (1) POSTED STOP WORK ORDER @ 160 S. SEWALL'S POINT ROAD
(2) DELIVERED FIELD COPY OF APPROVED PLAN REVISIONS (GARAGE FIRE REQ)
105 HILLCREST CT.

INSPECTOR: _____ **DATE:** 8/30/99

4678

MASONRY WALL

MASTER PERMIT NO. 4503

TOWN OF SEWALL'S POINT

Date AUGUST 31, 1999

BUILDING PERMIT NO. 4678

Building to be erected for TOM/DEEDEE LUCIDO Type of Permit COURTYARD WALL/PAVERS

Applied for by O/B (Contractor) Building Fee 37.50

Subdivision RIDGELAND Lot 4 Block Radon Fee

Address 2 SABAL CT. Impact Fee

Type of structure S.F.R. (ACTIVE PERMIT) A/C Fee

Electrical Fee

Parcel Control Number: Plumbing Fee

Roofing Fee

Amount Paid $37.50 Check # 5005 Cash Other Fees ( )

Total Construction Cost $ 3,000.00 TOTAL Fees $37.50

Signed Sandee Lucido Signed BUILDING OFFICIAL

Applicant Town Building Inspector

MASONRY WALL PERMIT

INSPECTIONS			
SETBACKS	DATE 11/24/99	HEIGHT	DATE 11/24/99
FOOTINGS	DATE 9/22/99	FINAL	DATE 11/29/99

24 HOURS NOTICE REQUIRED FOR INSPECTIONS. **CALL 287-2455**

WORK HOURS – 8:00 AM UNTIL 5:00 PM

MONDAY TROUGH SATURDAY

☐ New Construction ☐ Remodel ☐ Addition ☐ Demolition

This permit must be visible from the street, accessible to the inspector.
FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT, NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.
DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!

Bldg. Pmt# 4678
8/31/99

Town of Sewall's Point

BUILDING PERMIT APPLICATION

RECEIVED
Date AUG 12 1999
Log 8/13/99

Owner's Name: Tom & Dee Dee Lucido Phone No. 287-6131
Owner's Present Address: 7 Quail Run Ft. Stuart Pt. FL
Fee Simple Titleholder's Name & Address if other than owner NA

Location of Job Site: 2 Sabal CT. Sewalls PT.
TYPE OF WORK TO BE DONE: New Construction - courtyd walls & pavers
CONTRACTOR INFORMATION
Contractor/Company Name: ~~Commercial Const.~~ Owner Builder Phone No.
COMPLETE MAILING ADDRESS
State Registration State License
Legal Description of Property
Parcel Number

ARCHITECT/ENGINEER INFORMATION
~~Architect~~ LANDSCAPE Arch - Tom Lucido / Lucido & Assoc. Phone No. 220-2100
Address 322 Escoraja Ave.
Engineer Phone No. 220-2100
Address

Area Square Footage: Living Area Garage Area Carport
Accessory Bldg. Covered Patio Scr. Porch Wood Deck
Type Sewage: Septic Tank Permit # from Health Dept.
NEW electrical SERVICE SIZE AMPS

FLOOD HAZARD INFORMATION
flood zone minimum Base Flood Elevation (BFE) NGVD
proposed finish floor elevation NGVD (minimum 1 foot above BFE)
Cost of construction or Improvement
Fair Market Value(FMV)prior to improvement
Substantial Improvement 50% of FMV yes --No
Method of determining FMV

SUBCONTRACTOR INFORMATION: (Notify this office if subcontractor's change.)
Electrical State License
Mechanical State License#
Plumbing State License#
Roofing State License#

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

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

OWNER/ CONTRACTOR MUST SIGN APPLICATION

OWNER or AGENT SIGNATURE Tom Lucido
Sworn to and subscribed before me this day of , 1998 by
who is personally known to me or has produced or has
produced and who did(did not) take an oath.
CONTRACTOR SIGNATURE
Sworn to and subscribed before me this day of , 1998
by who is personally known to me or has produced
and who did (did not) take an oath.

TREE REMOVAL (Attach sealed survey)
No.of trees to be removed_____No.to be retained_____No. to be planted___
Specimen tree removed_____Fee_____Authorized/Date_____
DEVELOPMENT ORDER #_____

1. ALL APPLICATIONS REQUIRE:

A. Property Appraiser's Parcel Number.
B. A Legal Description of your property. (Can be found on your deed survey or Tax Bill.)
C. Contractor's name, address, phone number & license numbers.
D. Name all sub-contractors (properly licensed).
E. Current Survey
F. Take completed application to the Permits and Inspections Office for approval. Provide construction details and a plot plan(s) showing setbacks, yard coverage, parking and position of all buildings on the property, stormwater retention plan, etc. Compliance with subdivision regulations can also be determined at this time.
3. Take the application showing Zoning approval (complete with plans & plot plan) to the Health Department for septic tank. Attach the pink copy to the building application.
4. Return all forms to the Permits and Inspection Office. All planned construction requires: two (2) sets of plans, drawn to scale with engineer's or architect's seal and the following items:

1. Floor Plan
2. Foundation Details
3. Elevation Views - Elevation Certificate due after slab inspection.
4. A Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
5. Truss layout
6. Vertical Wall Sections (one detail for each wall that is different)
7. Fireplace drawing: If prefabricated submit manufacturers data.

ADDITIONAL Required Documents are:

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

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

Approved by Building Official_____
Approved by Town Engineer _____

8/25 FAX TO APPLICANT 223-0220 @ 7:40 AM

PRIMARY PERMIT 4503

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
One South Sewall's Point Road
Sewall's Point, Florida 34996
Tel: (561) 287-2455
Fax: (561) 220-4765

PLAN REVIEW NOTES

☐ SINGLE FAMILY RESIDENCE; ☐ ADDITION; ☐ DOCK; ☐ POOL; ■ FENCE; ☐ COURTYARD

OWNER: TOM/DEE DEE LUCIDO ; ADDRESS: 7 QUAIL RUN LANE

PROJECT ADDRESS: 2 SABAL COURT ; LEGAL : LOT 4 BLK ___ SUB RIDGELAND

GENERAL CONTRACTOR: O/B ; LIC/CERT NO. ___

ADDRESS: ___ ; TEL 220-2100 ; FAX ___

ARCHITECT OR ENGINEER: N/A ; LIC/REG. NO. ___

ADDRESS: ___ ; TEL ___ ; FAX ___

Review of the application, supporting documents, plans and specifications submitted on the above project indicate the following items are required for submittal and/or revision :

1. MAXIMUM HGT. OF COURTYARD WALL = 7'-0"
(S.P.ORD. APP. B, SECT. VI C 1.)
REVISE ARCH ELEVATION & SECTION FOR RESUBMITTAL.

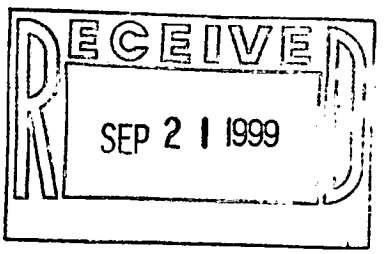
OK 8/31/99

Prepared By: [signature] Title: BLDG OFFICIAL Date: 8/24/99

PREDICTABILITY + ACCOUNTABILITY = COMPLIANCE

COMMERCIAL CONSTRUCTION DIVISION, INC.

9/20/99



MR. EDWIN ARNOLD,BUILDING OFFICIAL
SEWALLS POINT, FL.

DEAR SIR:

IN REFERANCE THE GARDEN WALL FOOTINGS AT2 SABEL CT. LUCIDO RESIDENCE, THE REINFORCING STEEL IS AS PER PLANS AND WAS INSPECTED BY RICHARD MACEY.

SINCERELY YOURS

Lee Chabot

LEE CHABOT

440 East Osceola Street • Suite 2 • Stuart, Florida 34994 • (561) 220-3488 • FAX (561) 283-2855
License #CB C052954

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Week of 9-7

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
46405	Amos	final	FAILED	NO ACCESS (GATE LOCKED)
	114 SSPt Rd			
4671N	Vence - 12 Wendy Lane	footer	PASSED	NO PERMIT ON SITE REV. DWG RCVD; FIELD COPY TO SITE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
X4503	LUCIDO	TIE BEAM	FAILED	NO FTG. INSP.; VERT STL. ~~CURED~~
COURT WALL 4678	2 SABAL CT.	+ BLOCK CELL (?)		COVERED (INSP. KO'S)
4661N	Nicholas - 21 Castle Hill Way	under ground pl. FAILED		CONST. SERVICES NOT INSP. & APPR.
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
45905	Gabbert	metal	FAILED	LATE INSP. REQUESTED
	2 E. HIGHPOINT Rd.			O NOT READY
				REV. SPECS. RCVD: FIELD COPY TO SITE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
46205	LARAWAY	PR Roof/nail in	PASSED	
	15. MIDDLE RD.	STRAPPING (ALL)		
				REV. & DUPL. PERMIT/PLANS TO SITE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
54655	LUCIDO	steele	FAILED	NO PERMIT DOCUMENTS
	2 SABAL CT	(POOL)		11 FOR BOUNDARY SURVEY
				STEEL SETTLED (WALK AT REAR)
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
46125	~~Meeley~~ Miele	FINAL	FAILED	INSUFFICIENT DOCUMENTATION
	6 E. HIGHPOINT			
				OFFICE FILE TO SITE FOR INSP.
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
46-1N	Dermarkaios	ground	FAILED	NO CONST. SERVICES IN PLACE
	19 C. Hill Way	plumbing		(called Contractor)
4676N	Zotta - 23 Castle Hill Way	steel & pond GROUND RODS LIGHT NICHE	PASSED	FMBD SURVEY REQ. PRIOR TO POUR

OTHER: 1. POSTED NOTICE OF BLDG DEPT HOURS & SPECIAL NOTICE OF BLDG DEPT CLSG (9/6-9/7) @ ALL SITES ✓
2. DELIVERED FIELD COPY OF RET. WALL (REVISION) 23 W. HIGH POINT; STOP WORK RELEASED ✓
3. " " " " FMBD. SURVEY (BREKER) 12 ISLAND WAY ✓

INSPECTOR: _____ **DATE:** 9/8/99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Wed. 9-22-99

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4617	Bruner	pool deck	PASSED	NOTE ON PERMIT TO MAINTAIN
	105 Hillcrest			3' GRD. CLR. TO STR. @
	Court			THICKENED EDGE
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4692	# Bay	rough el. &	PASSED	AM if possible
	3768 E. Ocean	FRAMING		NOTE: ELEC. REQ'D INSP.
		(ALL)		@ FINAL.
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4681	Brutvan *	temp. el.	PASSED	REISSUE 30 DAY RELEASE
	23 E. Hi Pt. Rd.			00/TODAY (9/22) AS START.
		P/L RELEASE 9/23/99	8:55 AM-SHERRI	3 COPIES TO CONSTR. FOR DISTR.
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4565	Kennedy	(REINSPECT)	(ALL-COMPLIED)	REQUEST 1ST PM INSP.
	3 Oak Hill	framing	PASSED	
		ROOF FINAL	PASSED	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4678	Lucido	tie beam	PASSED	FTG. COMPLIANCE LTR. ON FILE
	7 Sabal Crt	& cells		
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4673	Foglia	Sum. Well	PASSED	NOTE: PROVIDE @ M-DC PLMBG
	1107 Sewall's	Loop		TO WAVE @ TROPIC
	Way			(PP @ .15/SQ FT = $
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
~~4711~~	~~Derrekarian~~	Plumbing	cancel	
	~~19 Castle Hill~~			
	~~Way~~			

OTHER: *ADVISED CONTRACTOR REP. ON SITE RE: SETBACK VIOLATION OF BRUTVAN / FTG FORMBOARD LOCATION ON NORTH "ATRIUM WALL". PM 4681 / FULL TELEPHONE REPORT TO ARCHITECT (GARY KELLY) @ 12:50 PM. OFFICE 23 E. H.P. / MTG. @ OWNER'S & G.C @ 3:00 PM. - APPROVED FTG POUR @ CONTRACTOR RISE.

INSPECTOR: _____ **DATE:** 9/22/99

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Wed, 11-24-99

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS call
4503	Lucido	final for c.o.* &		Lee PTC. SEE "OTHER"
	2 Sabal Court			708-3739 to set up
4678	[redacted]	FINAL COUNTERTOP W/C	PASSED	
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
	Zotte	shutters		
	34 E. Hill Way	SEE PAGE 1		
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
4662	Foglia	tie beam &	PASSED	
	106 H. Sewall Way	columns		
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**
PERMIT	**OWNER/ ADDRESS**	**INSPECTION TYPE**	**RESULTS**	**REMARKS**

OTHER: *WALK THRU (2 SABAL CT). ~~ELEC~~/AC/ELECT./COMPLETE; PLMG.-INCOMPLETE RLNG; GARAGE VENTILATION REQUIRED; STORM SHUTTER FINAL REQ; BALCONY GUARD RAILS; ELEC. CERTIFICATE COMPLETED (PANEL REV DATE)

INSPECTOR: _____ **DATE:** 11/24/99

4751

SHUTTER

MASTER PERMIT NO. 4750

TOWN OF SEWALL'S POINT

Date 11/29/99

BUILDING PERMIT NO. 4751

Building to be erected for THOMAS LUCIDO

Type of Permit STORM SHUTTERS

Applied for by FOLDING SHUTTER (Contractor)

Building Fee -0-

Subdivision RIDGELAND Lot 4 Block

Radon Fee

Address 2 SABAL COURT

Impact Fee

Type of structure S.F.R.

A/C Fee

PERMIT FEE INCLUDED IN ADJUSTED TOTAL COAST. COST PER OWNER AFFIDAVIT.

Electrical Fee

Parcel Control Number:

Plumbing Fee

Roofing Fee

Amount Paid -0- Check # Cash Other Fees ( )

Total Construction Cost $ 5,160.00

TOTAL Fees -0-

Signed Michelle E Hess Signed JR

Applicant

Town Building Inspector

ACCESSORY BUILDING

NON-HABITABLE STRUCTURE

PERMIT

INSPECTIONS			
SETBACKS	DATE	FOUNDATION	DATE
		FINAL	DATE 12/1/99

24 HOURS NOTICE REQUIRED FOR INSPECTIONS. **CALL 287-2455**

WORK HOURS – 8:00 AM UNTIL 5:00 PM

MONDAY TROUGH SATURDAY

☐ **New Construction** ☐ **Remodel** ☐ **Addition** ☐ **Demolition**

This permit must be visible from the street, accessible to the inspector.
FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT, NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.
DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!

06-24-99-043

Bldg. Pmt#_____

Town of Sewall's Point

Date RECEIVED NOV 23 1999

(MASTER PN 4750)

BUILDING PERMIT APPLICATION

Owner's Name: Lucido Residence Phone No. 561-288-0550

Owner's Present Address: 7 NE Quail Run Lane, STUART FL 34996

Fee Simple Titleholder's Name & Address if other than owner N/A

Location of Job Site: 2 SABAL CT

TYPE OF WORK TO BE DONE: Install 48 Storm Panels

CONTRACTOR INFORMATION

Contractor/Company Name: Folding Shutter Corp. Phone No. 561-683-4811

COMPLETE MAILING ADDRESS 7089 Hemstreet Pl. West Palm Bch. FL. 33495

State Registration_____ State License SP00839

Legal Description of Property Lot 4, Ridgeland

Parcel Number 13-84-10-11-000-0004.0-1-0000

ARCHITECT/ENGINEER INFORMATION

Architect Al Farooq Phone No. 305-264-8100

Address 1235 SW 87th Ave. Miami FL. 33174

Engineer Same Phone No.

Address_____

Area Square Footage: Living Area_____ Garage Area_____ Carport_____

Accessory Bldg._____ Covered Patio_____ Scr. Porch_____ Wood Deck_____

Type Sewage:_____ Septic Tank Permit # from Health Dept._____

NEW electrical SERVICE SIZE _____ AMPS

FLOOD HAZARD INFORMATION

flood zone_____ minimum Base Flood Elevation (BFE)_____ NGVD

proposed finish floor elevation_____ NGVD (minimum 1 foot above BFE)

Cost of construction or Improvement $5,160.00

Fair Market Value(FMV)prior to improvement_____

Substantial Improvement 50% of FMV yes_____ No_____

Method of determining FMV _____

SUBCONTRACTOR INFORMATION: (Notify this office if subcontractor's change.)

Electrical_____ State License_____

Mechanical_____ State License#_____

Plumbing_____ State License#_____

Roofing_____ State License#_____

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

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

STATE OF FLORIDA NOTARY PUBLIC ETHEL M. MILLER My Comm Exp. 2/28/2003 No. CC 812883 Personally Known [ ] Other I.D.

OWNER/ CONTRACTOR MUST SIGN APPLICATION

OWNER or AGENT SIGNATURE _____

Sworn to and subscribed before me this 15th day of November, 1999 by Kevin R. Hemstreet who is personally known to me or has produced or has produced _____ and who did (did not) take an oath.

CONTRACTOR SIGNATURE _____

Sworn to and subscribed before me this 15th day of November, 1999 by Kevin R. Hemstreet who is personally known to me or has produced _____ and who did (did not) take an oath.

STATE OF FLORIDA NOTARY PUBLIC ETHEL M. MILLER My Comm Exp. 2/28/2003 No. CC 812883 Personally Known [ ] Other I.D.

TREE REMOVAL (Attach sealed survey)
No.of trees to be removed_____No.to be retained_____No. to be planted___
Specimen tree removed_____Fee_____Authorized/Date_____
DEVELOPMENT ORDER #_____

1. ALL APPLICATIONS REQUIRE:

A. Property Appraiser's Parcel Number.
B. A Legal Description of your property. (Can be found on your deed survey or Tax Bill.)
C. Contractor's name, address, phone number & license numbers.
D. Name all sub-contractors (properly licensed).
E. Current Survey
F. Take completed application to the Permits and Inspections Office for approval. Provide construction details and a plot plan(s) showing setbacks, yard coverage, parking and position of all buildings on the property, stormwater retention plan, etc. Compliance with subdivision regulations can also be determined at this time.

3. Take the application showing Zoning approval (complete with plans & plot plan) to the Health Department for septic tank. Attach the pink copy to the building application.
4. Return all forms to the Permits and Inspection Office. All planned construction requires: two (2) sets of plans, drawn to scale with engineer's or architect's seal and the following items:

1. Floor Plan
2. Foundation Details
3. Elevation Views - Elevation Certificate due after slab inspection.
4. A Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
5. Truss layout
6. Vertical Wall Sections (one detail for each wall that is different)
7. Fireplace drawing: If prefabricated submit manufacturers data.

ADDITIONAL Required Documents are:

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

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

Approved by Building Official_____
Approved by Town Engineer_____

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID JT FOLDING

DATE (MM/DD/YY) 10/26/99

PRODUCER

SLATON INSURANCE
P.O. Box 3857
st Palm Beach FL 33402

Helen Martinson
Phone No. 561-683-8383 Fax No. 561-684-5995

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

INSURED

Folding Shutter Corporation
7089 Hemstreet Place
West Palm Beach FL 33413

COMPANIES AFFORDING COVERAGE

COMPANY A: Auto-Owners Insurance Company

COMPANY B: F C C I

COMPANY C:

COMPANY D:

11/29/99

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS MADE [X] OCCUR OWNER'S & CONTRACTOR'S PROT [X] Employee Benefit	20518196	05/22/99	05/22/00	GENERAL AGGREGATE	$ 1,000,000
					PRODUCTS - COMP/OP AGG	$ 1,000,000
					PERSONAL & ADV INJURY	$ 1,000,000
					EACH OCCURRENCE	$ 1,000,000
					FIRE DAMAGE (Any one fire)	$ 50,000
					MED EXP (Any one person)	$ 5,000
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT	$
					BODILY INJURY (Per person)	$
					BODILY INJURY (Per accident)	$
					PROPERTY DAMAGE	$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT	$
					OTHER THAN AUTO ONLY:	
					EACH ACCIDENT	$
					AGGREGATE	$
A	EXCESS LIABILITY [X] UMBRELLA FORM OTHER THAN UMBRELLA FORM	71584721 952112	05/22/99	05/22/00	EACH OCCURRENCE	$ 5,000,000
					AGGREGATE	$ 5,000,000
						$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: [ ] INCL [ ] EXCL	WC99A42604	04/01/99	04/01/00	WC STATU-TORY LIMITS [ ] OTH-ER	
					EL EACH ACCIDENT	$ 500,000
					EL DISEASE - POLICY LIMIT	$ 500,000
					EL DISEASE - EA EMPLOYEE	$ 500,000
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

*STATE OF FLORIDA REQUIRES 30 DAYS NOTICE OF CANCELLATION FOR WORKERS COMPENSATION FLORIDA EMPLOYEES ONLY.

FAX: 561-334-5432

CERTIFICATE HOLDER

TOWNSEW

TOWN OF SEWALLS POINT
1 SOUTH S.P. ROAD
SEWALL POINT FL 34996

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

MARTIN COUNTY CONTRACTORS
CERTIFICATE OF COMPETENCY

HEMSTREET, KEVIN R
FOLDING SHUTTER CORP
7089 HEMSTREET PL
WPB , FL 33413

EXPIRES SEPTEMBER 30, 20	00

AUDIT CONTROL NUMBER	36369	CERTIFICATE NUMBER	SP00839

CERTIFIED CONTRACTOR

ALUMINUM/CONCRETE CONTRACTOR

SIGNATURE _____

ATTEST: VALERIE A. MESSIER
LICENSING ADMINISTRATOR

7847

CLERK OF CIRCUIT COURT
MARTIN CO., FL

D.C.

01334187 98 NOV 24 PM 3:19

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF MARTIN

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

DESCRIPTION OF PROPERTY

Lot 4, RIDGELAND, according to the Plat thereof as recorded in Plat Book 8, page 3, of the public records of Martin County, Florida

GENERAL DESCRIPTION OF IMPROVEMENTS: Construction of single family residence, install hurricane protection

OWNER: THOMAS P. LUCIDO and DIERDRE LUCIDO
ADDRESS OF OWNER: 7 NE Quail Run Lane, Stuart, FL 34996

OWNER'S INTEREST IN SITE OF THE IMPROVEMENT: Fee Simple

FEE SIMPLE TITLE HOLDER (if other than owner):

Name:
Address:

CONTRACTOR: COMMERCIAL CONSTRUCTION DEVELOPMENT, INC.
ADDRESS: 840 SE OSCEOLA STREET, STUART, FL 34996

SURETY:
ADDRESS:

LENDER NORTHERN TRUST BANK OF FLORIDA N.A.
ADDRESS: 2201 SE MONTEREY ROAD, STUART, FL 34996

NAME OF PERSON WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED:

NAME:
ADDRESS:

In addition to themselves, Owner designates the following person to receive a copy of the Lienor's Notice provided in Section 713.06(b), Florida Statutes:

NAME:
ADDRESS:

Lucido
THOMAS P. LUCIDO

Dierdre Lucido
DIERDRE LUCIDO

STATE OF FLORIDA
COUNTY OF MARTIN

The foregoing instrument was acknowledged before me this 19th day of November, 1998, by THOMAS P. LUCIDO and DIERDRE LUCIDO, who are personally known to me or who have produced (type of identification) _____, and who did did not take an oath.

(SEAL/STAMP)

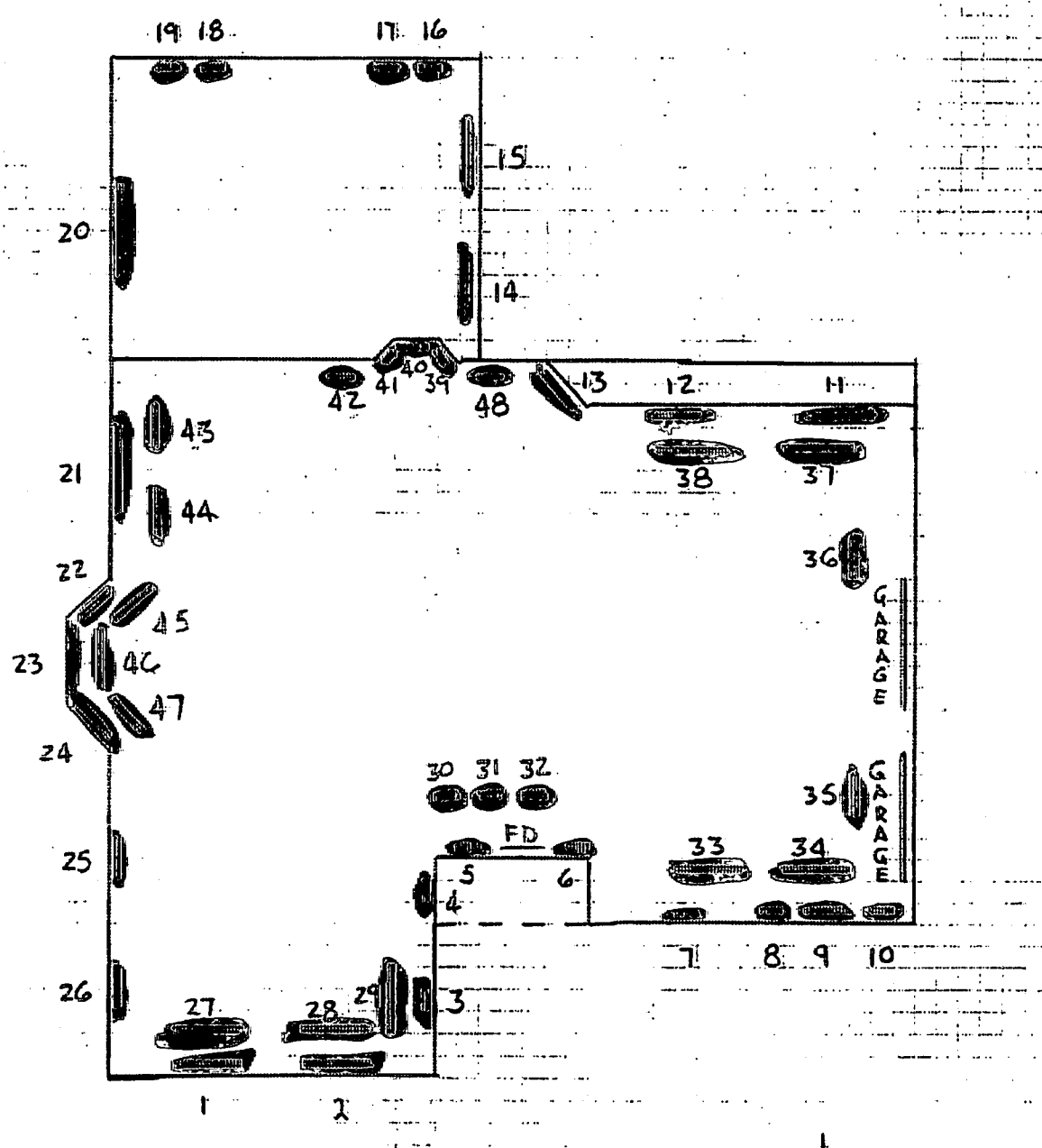
KACY R. DEL BENE
COMMISSION # CC 699941
EXPIRES DEC 2, 2001
BONDED THRU
ATLANTIC BONDING CO., INC.

NOTARY PUBLIC
Print name of Notary Public:
Commission Expiration Date:
Commission Number:

LAST PAGE

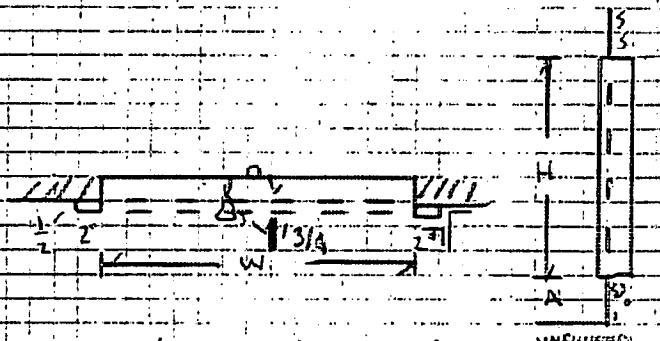
FOLDING SHUTTER CORP. ENGINEERING LAYOUT SHEET

CUSTOMER NAME	WORK ORDER NO:	SHEET OF
COMMERCIAL CONST.	062499043 No701	LAYOUT
	BY: J.A.D. DATE: 8-17-99	

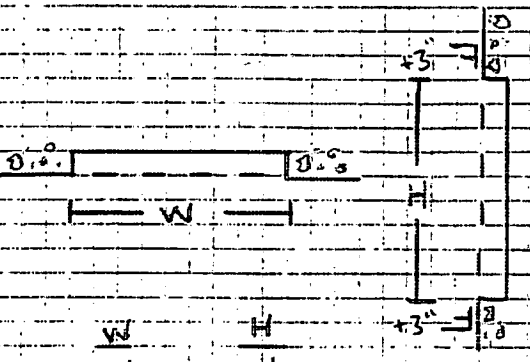


FOLDING SHUTTER CORP. ENGINEERING LAYOUT SHEET

CUSTOMER NAME	WORK ORDER NO:	SHEET	OF
COMMERCIAL CONST	062499043 W0301	1	2
	BY: J.A.D. DATE: 8-17-99		



	W	H	A	
1	49 1/2	104	5 1/2	HOR
2	49 1/2	104	5 3/4	HOR
12	36 3/4	82 3/4	6	CON 2 1/2 RS
29	49 1/2	83	4 1/2	HOR WOOD
33	49 1/4	82 1/4	6 1/4	HOR
34	49 1/2	82 1/4	6	HOR
37	50	82 1/2	8 1/2	HOR
38	49 1/2	82 1/2	8 1/2	HOR

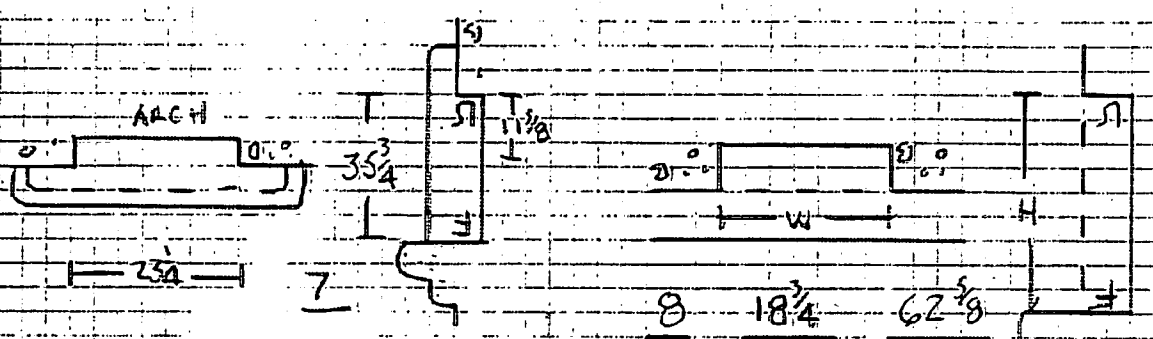


	W	H	
3	19 1/2	89 1/2	
4	19 1/4	89 1/2	
5	18	55	WOOD
6	18	55	WOOD
11	48	48 1/4	
13	48	66 3/4	
20 21	85 1/2	52	
22	35 1/2	90 1/2	
23	36 1/4	90 1/2	
24	36	90 1/2	
25	19 1/4	89 1/2	
26	19	90 1/2	
30	24	48	
31	24	48	
32	24	48	
39	19	50 1/4	BAY WINDOW
40	35 1/4	50 1/2	BAY WINDOW
41	19	50 1/4	BAY WINDOW
42	24	24 1/2	
48	24	24 1/2	

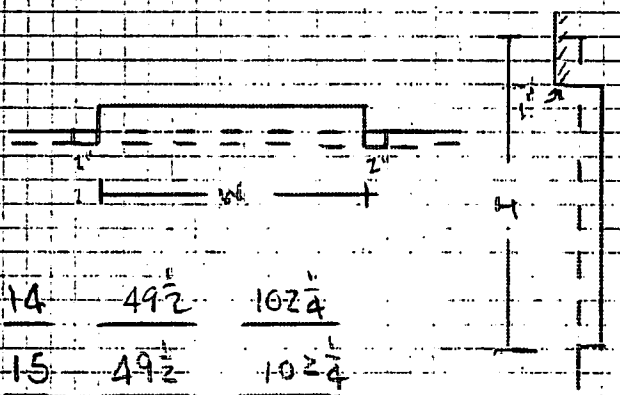
	W	H
43	72 1/2	48
44	48 1/2	36
45	36	48
46	36	48
47	36	48

FOLDING SHUTTER CORP. ENGINEERING LAYOUT SHEET

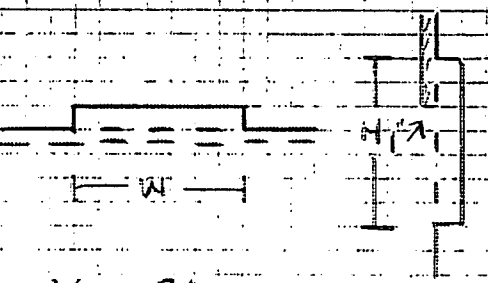
CUSTOMER NAME	WORK ORDER NO:	SHEET	OF
COMMERCIAL CONST	062499043 No 701	2	2
	BY: J.A.D. DATE: 8.17.99		



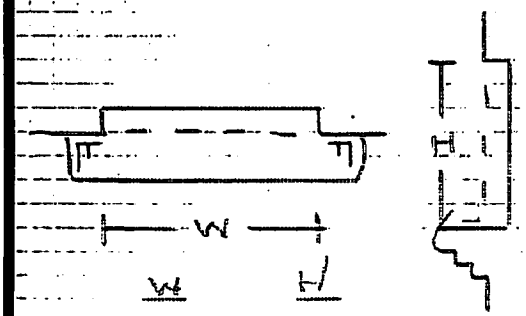
8	18 3/4	62 5/8
9	26	62 5/8
10	18 3/4	62 5/8



14	49 1/2	102 1/4
15	49 1/2	102 1/4



16	21	20
17	20	19 3/4
18	21	19 1/2
19	21	19 1/2



	W	H
27	48	72
28	48	72
35	36 1/2	72
36	36 1/2	72

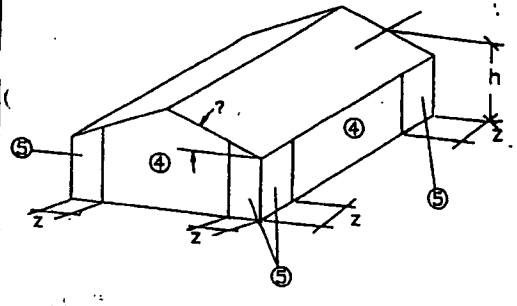
COMMERCIAL CONST 062499043 N070,

BUILDINGS EQUAL OR LESS THAN 60 FEET HIGH

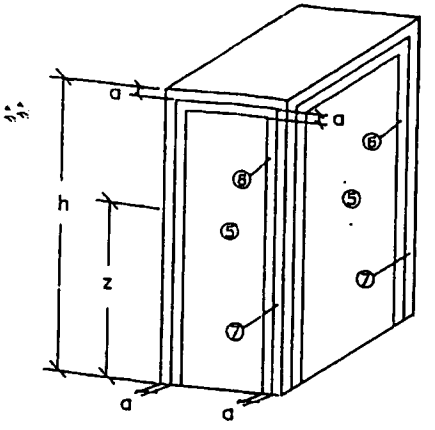
DESIGN LOADS–PSF EXPOSURE C

MEAN ROOF ELEV. FEET	ROOF SLOPE > 10 DEG. ZONE 4 & 5 +	ROOF SLOPE > 10 DEG. ZONE 4 −	ROOF SLOPE > 10 DEG. ZONE 5 −	ROOF SLOPE = <10 DEG. ZONE 4 & 5 +	ROOF SLOPE = <10 DEG. ZONE 4 −	ROOF SLOPE = <10 DEG. ZONE 5 −
15	30.8	31.3	35.3	27.8	28.1	31.8
20	33.5	34.0	38.4	30.1	30.6	34.5
25	35.7	[illegible]	[illegible]	32.1	32.6	36.8
30	37.6	38.1	43.1	33.8	34.3	38.8
35	39.3	39.8	45.0	35.3	35.9	40.5
40	40.8	41.4	46.8	36.7	37.3	42.1
45	42.2	42.8	48.4	38.0	38.5	43.5
50	43.5	44.1	49.8	39.1	39.7	44.9
55	44.7	45.3	51.2	40.2	40.8	46.1
60	45.8	46.5	52.5	41.2	41.8	47.3

USE FACTOR: 1
LOAD TABLE BASED ON SECTION 1606.2



NOTES:
BLDGS. 60 FT. HIGH OR LESS
z = 10% OF MINIMUM WIDTH OR .4h, WHICHEVER IS SMALLER BUT NOT LESS THAN EITHER 4% OF MINIMUM WIDTH OR 3 FT.
LOADS, POSITIVE AND NEGATIVE ARE TAKEN AT MEAN ROOF HEIGHT AND APPLY TO ALL FLOORS.
LOADS BETWEEN ELEVATIONS SHOWN IN TABLE CAN BE INTERPOLATED.



NOTES:
BLDGS. GREATER THAN 60 FT. IN HEIGHT.
USE EXPOSURE C FOR NON-COASTAL AREAS.
USE EXPOSURE D FOR COASTAL AREAS.
a = 5% OF MINIMUM WIDTH OR 0.5h, WHICHEVER IS SMALLER.
POSITIVE LOADS CAN BE GRADUATED FLOOR BY FLOOR USING ELEVATION ABOVE GRADE AT PARTICULAR FLOOR.
NEGATIVE LOADS MUST BE TAKEN AT MEAN ROOF HEIGHT AND APPLY TO ALL FLOORS.
LOADS BETWEEN ELEVATIONS SHOWN IN TABLE CAN BE INTERPOLATED.
SEE ABOVE ILLUSTRATION FOR DETERMINATION OF ZONES.

BUILDINGS GREATER THAN 60 FEET HIGH

MEAN ROOF ELEV. FEET	DESIGN LOADS–PSF EXPOSURE C ZONE 5,6,7 +	ZONE 5 −	ZONE 6 −	ZONE 7 −	DESIGN LOADS–PSF EXPOSURE D ZONE 5,6,7 +	ZONE 5 −	ZONE 6 −	ZONE 7 −
10	28.6	EVALUATE NEGATIVE LOADS AT ROOF ELEVATION			42.8	EVALUATE NEGATIVE LOADS AT ROOF ELEVATION		
20	31.1				43.3			
30	34.9				49.1			
40	37.9				52.0			
50	40.4				54.4			
60	42.5				56.4			
80	46.2	48.5	79.4	110.3	59.8	62.8	102.8	142.7
100	49.2	51.7	84.7	117.6	62.5	65.7	107.5	149.3
120	51.9	54.5	89.2	123.9	64.8	68.1	111.5	154.8
140	54.2	57.0	93.2	129.4	68.9	70.2	114.9	159.7
160	56.3	59.2	96.8	134.5	68.7	72.1	118.1	164.0
180	58.2	61.2	100.1	139.1	70.3	73.9	120.9	167.9
200	60.0	63.1	103.2	143.3	71.8	75.4	123.4	171.5
220	61.7	64.8	106.0	147.3	73.2	76.9	125.8	174.8
240	63.2	66.4	108.7	151.0	74.5	78.2	128.0	177.8
260	64.7	68.0	111.2	154.5	75.7	79.5	130.1	180.7
280	66.1	69.4	113.6	157.8	76.8	80.7	132.0	183.4
300	67.4	70.8	115.9	160.9	77.9	81.8	133.9	185.9
320	68.6	72.1	118.0	163.9	78.9	82.9	135.6	188.4
340	69.8	73.4	120.1	166.8	79.8	83.9	137.3	190.7
360	71.0	74.6	122.1	169.5	80.8	84.9	138.8	192.8
380	72.1	75.8	124.0	172.2	81.6	85.8	140.4	194.9
400	73.2	76.9	125.8	174.7	82.5	86.7	141.8	196.9

IMPORTANCE FACTOR: 1.05
GCPI FACTORS NOT INCLUDED
LOAD TABLE ALSO COMPLIES WITH REQUIREMENTS OF ASCE 7–88.

NOTES :
THESE TABLES ARE FOR USE WITH SHUTTERS WHEN INSTALLED IN FRONT OF GLASS.

WIND LOAD TABLES FOR
COMPONENTS & CLADDING
AS PER SPECIFICATION
1994 STD. BLDG. CODE SECTION 1606

BASIC WIND SPEED: 110 MPH
TRIBUTARY AREA: 20 SQ. FT.

JUL 0 8 1996

AL-FAROOQ CORPORATION
ENGINEERS, PLANNERS & PRODUCT TESTING
1235 SW 87 AVE
MIAMI, FLORIDA 33174
(305) 264-8100

AFC
SC-20

MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

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

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

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

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Madden Manufacturing
1889 NW 22nd Street
Pompano Beach FL 33069

Your application for Product Approval of:
20 Ga. Galvanized Steel Storm Panel Shutter
under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Types of Construction, and completely described herein, has been recommended for acceptance by the Miami-Dade County Building Code Compliance Office (BCCO) under the conditions specified herein.

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

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

Acceptance No.: 98-1110.05

Expires: 05/01/2003

Raul Rodriguez
Chief Product Control Division

THIS IS THE COVERSHEET, SEE ADDITIONAL PAGES FOR SPECIFIC AND GENERAL CONDITIONS

BUILDING CODE & PRODUCT REVIEW COMMITTEE

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

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

Approved: 06/16/1999

Madden Manufacturing Co.

ACCEPTANCE No. : 98-1110.05

APPROVED : JUN 16 1999

EXPIRES : 05/01/2003

NOTICE OF ACCEPTANCE: SPECIFIC CONDITIONS

1. SCOPE

This revises and renews the Notice of Acceptance No. 96-0520.04, which was issued on May 1, 1997. It approves a 20 gauge galvanized steel storm panels shutter, as described in Section 2 of this Notice of Acceptance, designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County, for the locations where the pressure requirements, as determined by SFBC Chapter 23, do not exceed the Design Pressure Rating values indicated in the approved drawings.

2. PRODUCT DESCRIPTION

This 20 gauge galvanized steel storm panels shutter and its components shall be constructed in strict compliance with the following documents: Drawing No. 96-87, titled "20 Ga. Galvanized Steel Storm Panel", prepared by Knezevich & Associates, Inc., dated April 22, 1996, last revision #4 dated March 4, 1999, sheets 1 through 6 of 6, signed and sealed by V. J. Knezevich, P.E., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division. These documents shall hereinafter be referred to as the approved drawings.

3. LIMITATIONS

All permanent set components, included but not limited to embedded anchor bolts, threaded cones, metal shields, headers and sills, must be protected against corrosion, contamination and damage at all times.

4. INSTALLATION

This 20 gauge galvanized steel storm panels shutter and its components shall be installed in strict compliance with the approved drawings.

5. LABELING

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

6. BUILDING PERMIT REQUIREMENTS

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

- 6.1.1 This Notice of Acceptance.
- 6.1.2 Duplicate copies of the approved drawings, as identified in Section 2 of this Notice of Acceptance, clearly marked to show the components selected for the proposed installation.
- 6.1.3 Any other documents required by the Building Official or the South Florida Building Code (SFBC) in order to properly evaluate the installation of this system.

Helmy A. Makar, P. E. - Product Control Examiner
Product Control Division

Madden Manufacturing Co.

ACCEPTANCE No. : 98-1110.05

APPROVED : JUN 16 1999

EXPIRES : 05/01/2003

NOTICE OF ACCEPTANCE: STANDARD CONDITIONS

1. Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documents, including test-supporting data, engineering documents, are no older than eight (8) years.

2. Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Miami-Dade County Product Control Approved", or as specifically stated in the specific conditions of this Acceptance.

3. Renewals of Acceptance will not be considered if:
   a. There has been a change in the South Florida Building Code affecting the evaluation of this product and the product is not in compliance with the code changes.
   b. The product is no longer the same product (identical) as the one originally approved.
   c. If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product.
   d. The engineer, who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.

4. Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.

5. Any of the following shall also be grounds for removal of this Acceptance:
   a. Unsatisfactory performance of this product or process.
   b. Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.

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

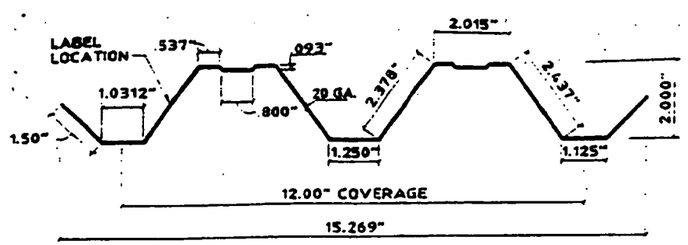
7. A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all time. The engineer needs not reseal the copies.

8. Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.

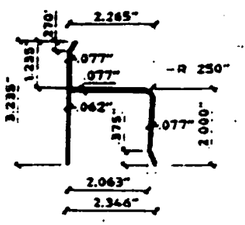
9. This Notice of Acceptance consists of pages 1, 2 and this last page 3.

END OF THIS ACCEPTANCE

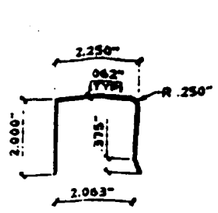
Helmy A. Makar, P.E. -Product Control Examiner
Product Control Division



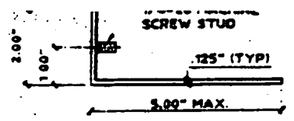
1 STORM PANEL
SCALE : 1/4" = 0'-1"



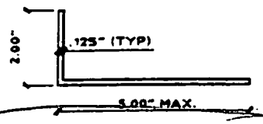
2 "h" HEADER
SCALE : 1/4" = 0'-1"



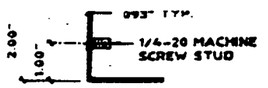
3 "U" HEADER
SCALE : 1/4" = 0'-1"



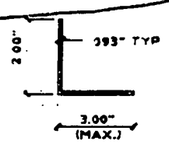
4a STUDDED ANGLE
SCALE 1/4" = 0'-1"



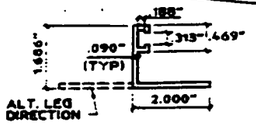
4 ANGLE
6063-T6 TYPICAL
6061-T6 FOR DETAIL "T"
SCALE : 1/4" = 0'-1"



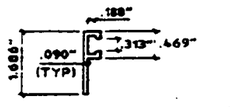
6 STUDDED ANGLE
SCALE 1/4" = 0'-1"



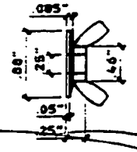
5 ANGLE
SCALE : 1/4" = 0'-1"



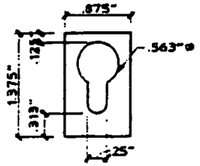
7 "E" TRACK
SCALE : 1/4" = 0'-1"



7a "F" TRACK
SCALE : 1/4" = 0'-1"

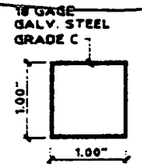


8 WINGNUT
SCALE : HALF SIZE

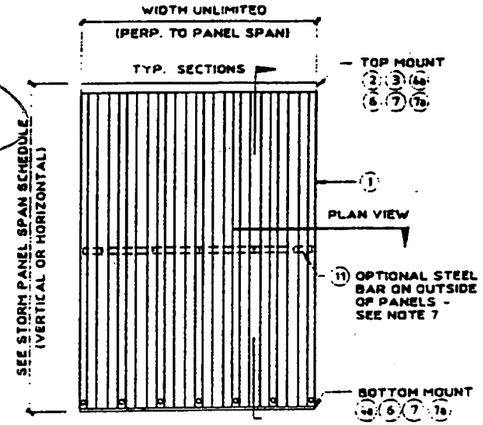


(20 GA. GALV. STEEL OR 0.050" ALUM)

10 KEYHOLE WASHER
SCALE : HALF SIZE

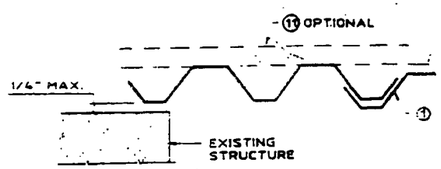


11 STEEL BAR
SCALE : HALF SIZE

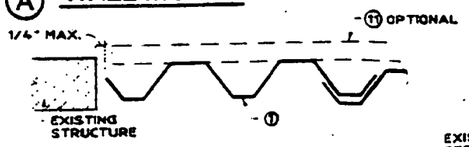


TYPICAL VERTICAL MOUNT ELEVATION

FOR ALL INSTALLATIONS SEE TABLE 2, PAGE 4 OF 6, FOR REQUIRED MIN. PANEL SEPARATION FROM GLASS.



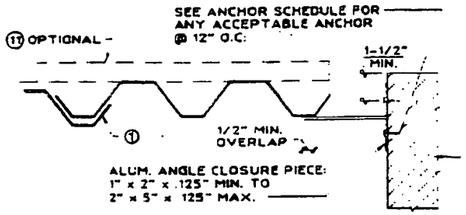
A WALL MOUNT



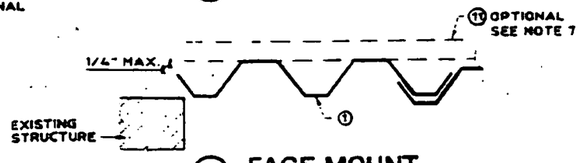
C TRAP MOUNT

DIRECT MOUNT ELEVATION

FOR ALL INSTALLATIONS SEE TABLE 2, PAGE 4 OF 6, FOR REQUIRED MIN. PANEL SEPARATION FROM GLASS.

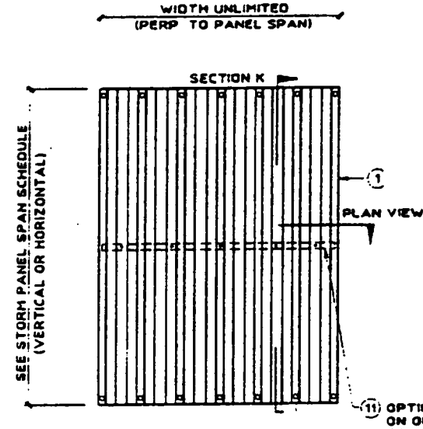


B TRAP MOUNT



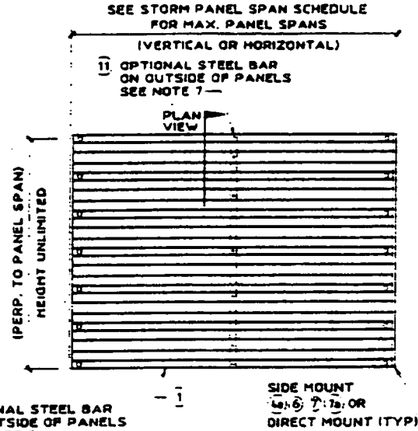
D FACE MOUNT

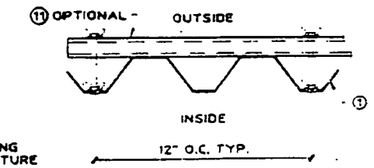
TYPICAL CLOSURE DETAILS (PLAN)
SCALE: 1-1/2" = 1'-0"



HORIZONTAL MOUNT ELEVATION

FOR ALL INSTALLATIONS SEE TABLE 2, PAGE 4 OF 6, FOR REQUIRED MIN. PANEL SEPARATION FROM GLASS.





TYPICAL BAR ATTACHMENT
(USE ONLY WHEN IMPROVED DEFLECTION REQUIRED)

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE
DATE June 16 1999
BY Helena A. Martin
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 98-1110.05

MAR 1 0 1999

GENERAL NOTES:

1. THIS STORM PANEL SHUTTER SYSTEM IS DESIGNED AND TESTED IN ACCORDANCE WITH THE SOUTH FLORIDA BUILDING CODE 1994 EDITION.
2. POSITIVE AND NEGATIVE DESIGN PRESSURE CALCULATIONS SHALL BE PERFORMED FOR SPECIFIC JOBS IN ACCORDANCE WITH ASCE 7-88 "MINIMUM DESIGN LOADS FOR BUILDINGS AND OTHER STRUCTURES." TABLES SHALL BE REFERENCED AT APPROPRIATE DESIGN LOADS.
3. PRODUCT MARKINGS SHALL BE WITHIN 12" OF ONE END OF THE PANEL WITH A MIN. OF ONE-MARKING PER PANEL AND SHALL BE LABELED AS FOLLOWS:
   MADDEN MFG CO.
   POMPANO BEACH, FL
   DADE COUNTY PRODUCT CONTROL APPROVED
4. PANELS HAVE BEEN TESTED IN ACCORDANCE WITH THE DADE COUNTY PROTOCOLS PA 201, PA 202, & PA203. DESIGN IS BASED ON CONSTRUCTION TESTING CORPORATION (CTC) TEST REPORT No. 96-012.
5. STORM PANELS SHALL BE 20 GAUGE STEEL (t=0.035") CONFORMING TO ASTM A446, STRUCTURAL QUALITY, GRADE C, WITH A MIN Fy = 40 KSI GALVANIZED IN ACCORDANCE WITH ASTM G-60. ALL ALUMINUM EXTRUSIONS SHALL BE 6063-T6 U.O.N.
6. ALL SCREWS AND BOLTS TO BE 2024-T4 ALUMINUM ALLOY, STAINLESS STEEL, OR GALVANIZED STEEL WITH A 33 KSI MINIMUM YIELD STRENGTH.
7. FOR INSTALLATIONS 30 FT. OR LESS ABOVE GRADE, AN OPTIONAL 1" x 1" x 18 GAGE STEEL BAR MAY BE USED TO CONTROL DEFLECTION OF STORM PANEL SYSTEM. STEEL BAR MAY BE FASTENED AT PANEL OVERLAPS, AT MIDSPAN, W/ 1/4-20 x 4" BOLTS AND DIE CAST ALUM. WASHERED WINGNUTS. SEE MIN. SEPARATION FROM GLASS SCHEDULE, PAGE 4 OF 6, FOR REDUCED SEPARATIONS.
8. TOP AND BOTTOM DETAILS MAY BE INTERCHANGED AS FIELD CONDITIONS REQUIRE. PANELS MAY ALSO BE MOUNTED WITH "E" OR "F" TRACK, STUDDED ANGLE OR DIRECT MOUNT HORIZONTALLY.
9. THE PERMIT HOLDER SHALL VERIFY THE ADEQUACY OF THE EXISTING STRUCTURE TO SUSTAIN THE NEW SUPERIMPOSED LOADS AND TO VERIFY ALL DIMENSIONS AT THE JOB SITE BEFORE COMMENCING WITH THE WORK.
10. ANCHORS SHALL BE INSTALLED IN ACCORDANCE WITH MANUFACTURER'S RECOMMENDATIONS. EMBEDMENT LENGTHS SHALL BE AS NOTED AND DO NOT INCLUDE STUCCO OR OTHER FINISHES.
11. AT LEAST ONE WARNING NOTE PER OPENING SHALL BE PLACED IN A CONSPICUOUS LOCATION ON ANY OF THE COMPONENTS OF STORM PANELS SYSTEM ADVISING THE HOME OWNER OR TENANT THAT "STORM PANELS WILL NOT OFFER HURRICANE PROTECTION UNLESS STEEL TUBE & BOLTS ARE PROPERLY INSTALLED WHEN NEEDED".

KNEZEVICH & ASSOCIATES, INC.
CONSULTING ENGINEERS • PRODUCT TESTING
6141 HOKENA DRIVE · MIAMI SPRINGS, FLORIDA 33166
MIAMI (305) 883-9571 FT. LAUDERDALE (954) 677-9500
FAX: (305) 883-9572

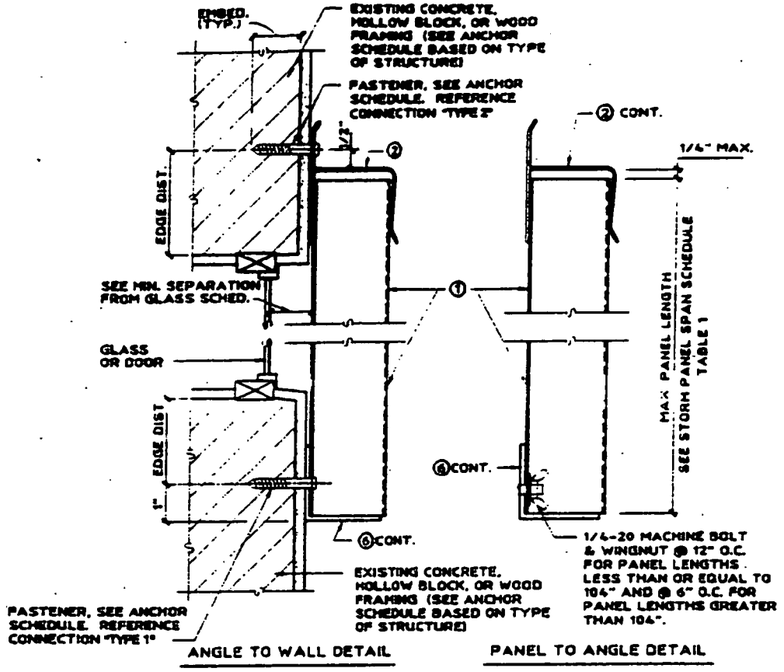
20 GA. GALVANIZED STEEL STORM PANEL

MADDEN MANUFACTURING CO.
1869 N.W. 22 ST.
POMPANO BEACH, FL 33069
(800) 272-2071

revisions			
no	date	by	description
1	04/21/99	VJK	GENERAL REVISION
2	05/01/99	VJK	GENERAL REVISION
3	05/17/99	VJK	REV. ANCHOR SCHEDULE
4	05/01/99	VJK	COUNTY COMMENTS

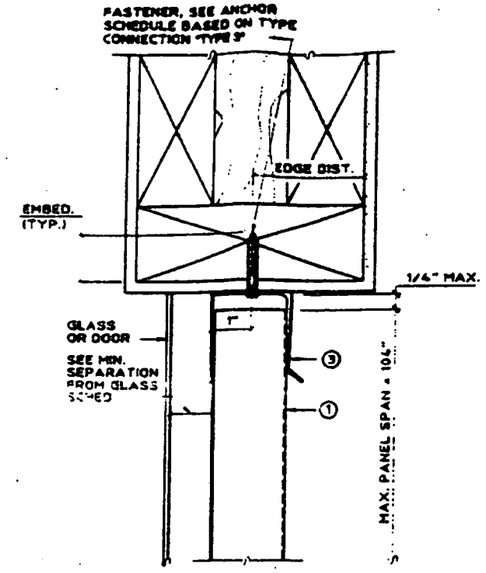
V.J. KNEZEVICH
PROFESSIONAL ENGINEER
FL License No.
PE 0010983

date	04/22/98
scale	drawn by
AS NOTED	M
design by	checked by
VJK	VJK
drawing no.	96-87
sheet 1 of 3	



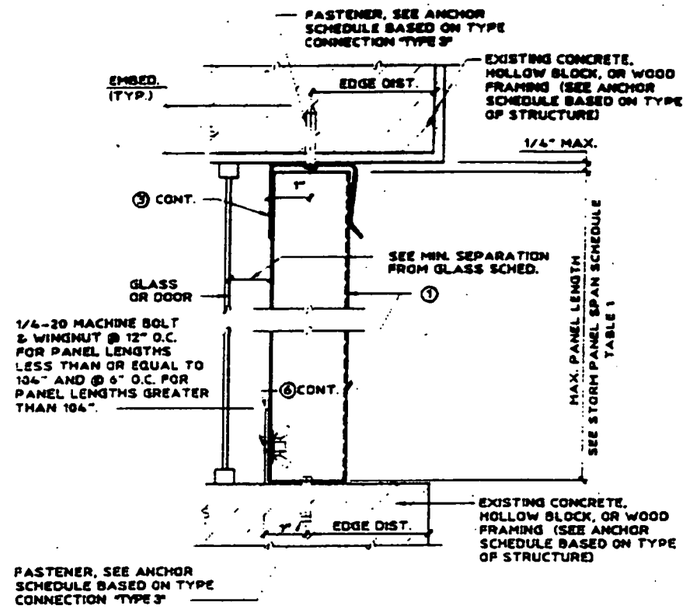
Ⓔ WALL MOUNT SECTION

SCALE : 3" = 1'-0"



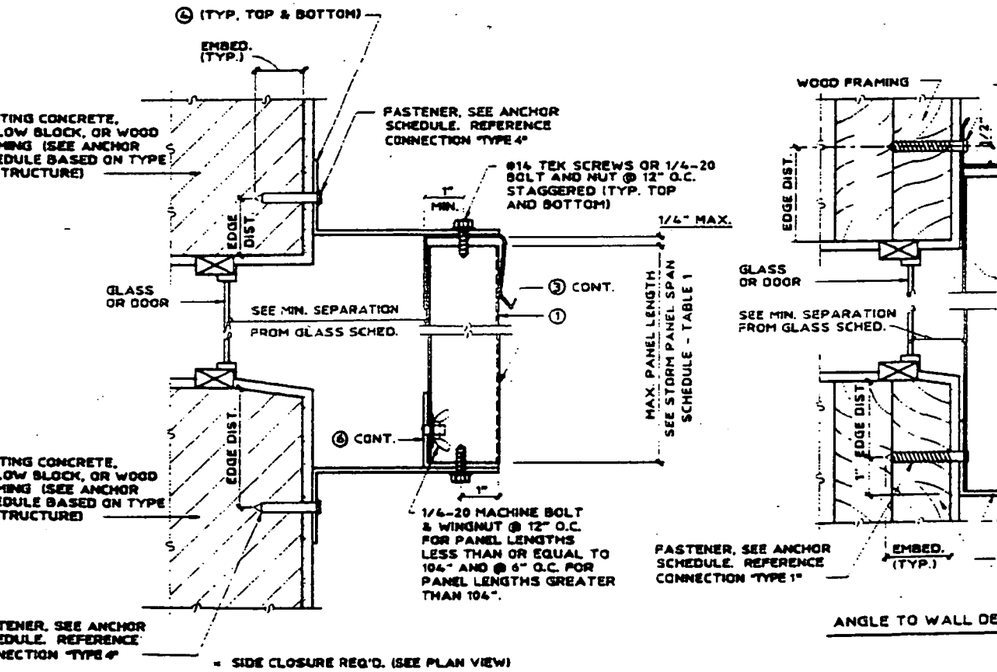
Ⓕ WOOD CEILING/ INSIDE MOUNT SECTION

SCALE : 3" = 1'-0"



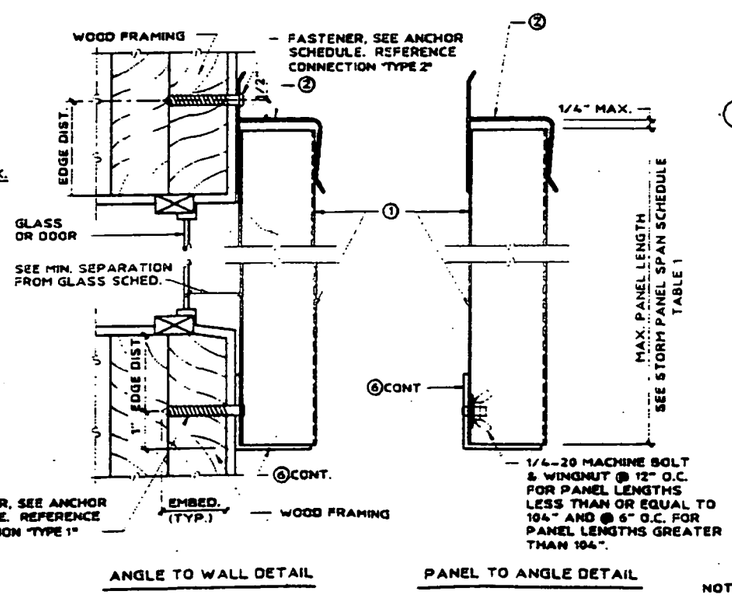
Ⓖ CEILING/INSIDE MOUNT SECTION

SCALE : 3" = 1'-0"



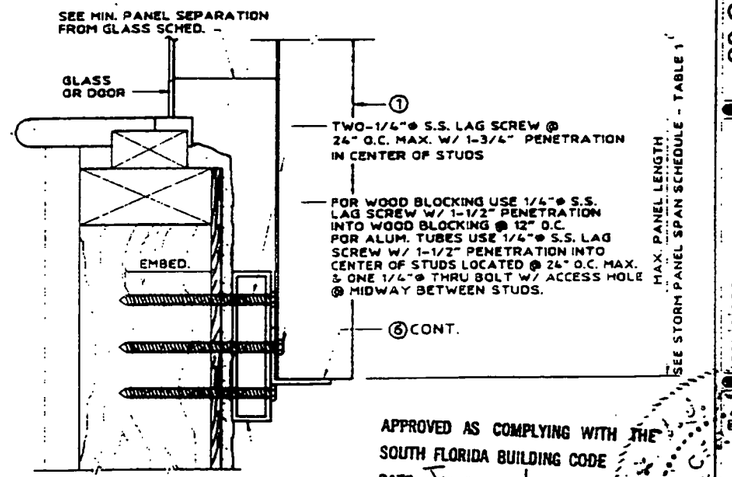
Ⓗ BUILD-OUT MOUNT SECTION

SCALE : 3" = 1'-0"



Ⓘ WALL MOUNT SECTION

SCALE : 3" = 1'-0"



Ⓙ WALL MOUNT SECTION (BOTTOM)

SCALE : 3" = 1'-0"

KNEZEVICH & ASSOCIATES, INC.
CONSULTING ENGINEERS • PRODUCT TESTING
6641 MOKENA DRIVE-MIAMI SPRINGS, FLORIDA 33166
MIAMI (305) 883-9571 FT. LAUDERDALE (954) 677-9500
FAX: (305) 883-9572

20 GA. GALVANIZED STEEL STORM PANEL

MADDEN MANUFACTURING CO.
1889 N.W. 22 ST.
POMPANO BEACH, FL 33069
(800) 272-2071

revisions			
no	date	by	description
1	06/24/98	VJK	GENERAL REVISION
2	03/04/99	VJK	GENERAL REVISION
3	03/17/99	VJK	REV ANCHOR SCHEDULE
4	03/04/99	VJK	COUNTY COMMENTS

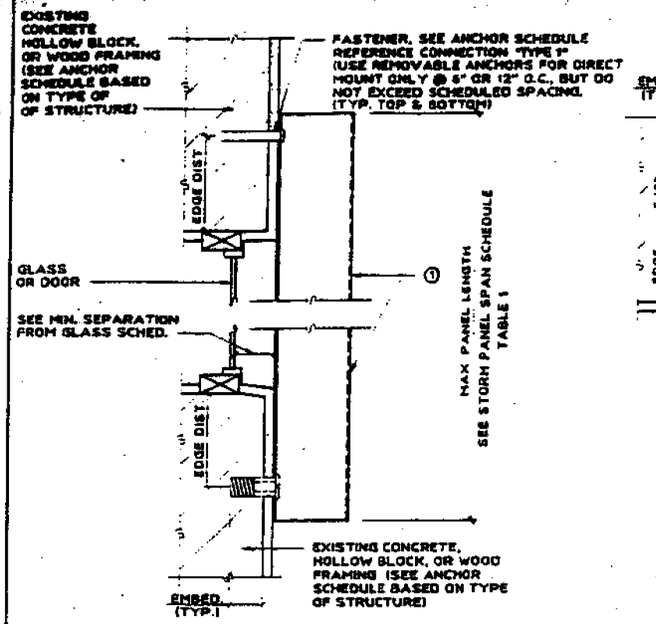
V.J. KNEZEVICH
PROFESSIONAL ENGINEER
FL License No.
PE 0019831

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE
DATE June 6 1999
BY
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 98-1110.05

MAR 0 1999

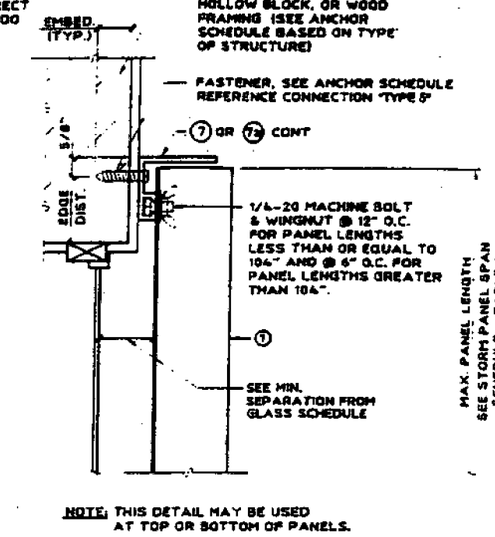
date	06/22/98
scale	drawn by
AS NOTED	M
design by	checked by
V.JK	V.JK
drawing no.	
96-87	
sheet 2 of 6	

03/09/99 13:50



(K) WALL MOUNT SECTION (DIRECT MOUNT)

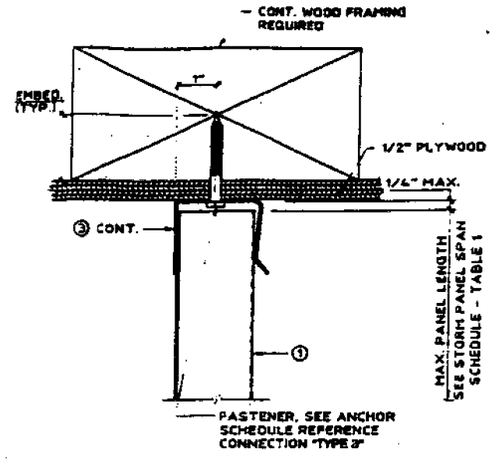
SCALE : 3" = 1'-0"



NOTE: THIS DETAIL MAY BE USED AT TOP OR BOTTOM OF PANELS.

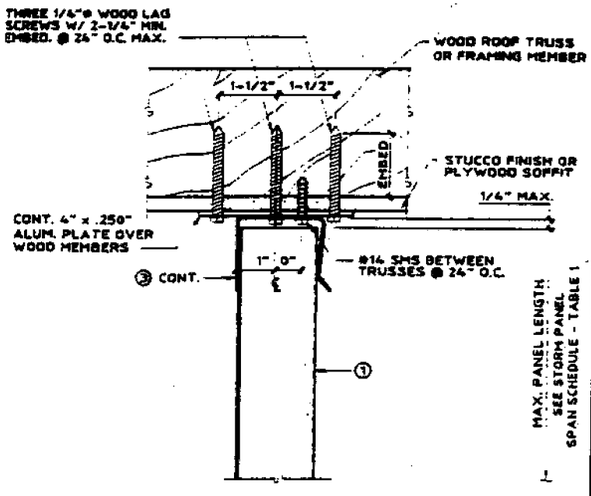
(L) WALL MOUNT DETAIL

SCALE : 3" = 1'-0"



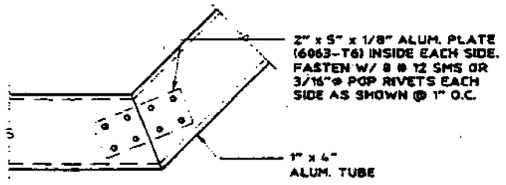
(M) SOFFIT CONNECTION DETAIL

SCALE : 3" = 1'-0"



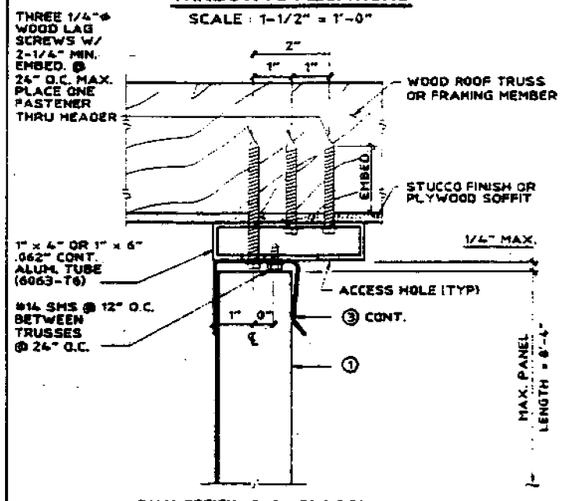
(N) SOFFIT CONNECTION DETAIL

SCALE : 3" = 1'-0"



SPLICE DETAIL FOR BAY WINDOW APPLICATIONS

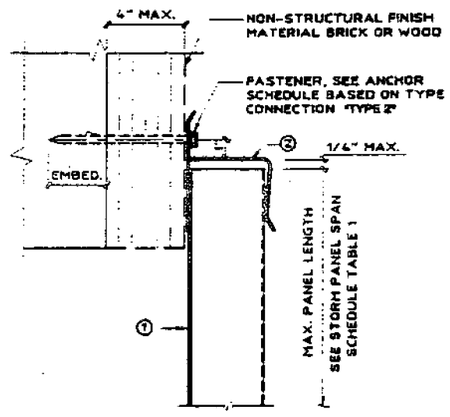
SCALE : 1-1/2" = 1'-0"



(MAX. DESIGN LOAD = 56 P.S.F.)

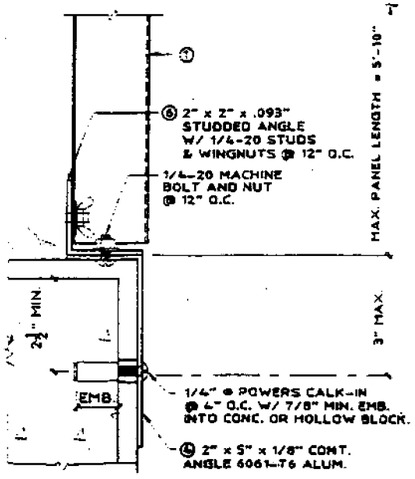
(O) ALT. SOFFIT CONNECTION DETAIL

SCALE : 3" = 1'-0"



(R) WALL MOUNT

SCALE : 3" = 1'-0"

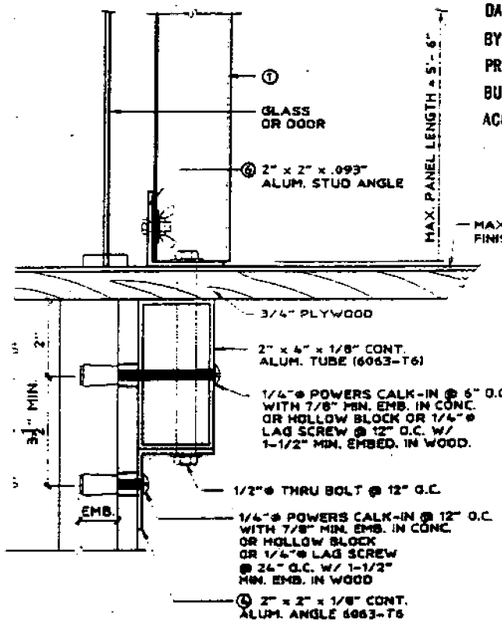


NOTES: THIS DETAIL MAY BE USED AT TOP OR BOTTOM OF PANEL.

(MAX. DESIGN LOAD = 72 PSF)

(T) EDGE MOUNT DETAIL

SCALE : 3" = 1'-0"



(MAX. DESIGN LOAD = 72 PSF)

(U) "PASS THRU" DETAIL

SCALE : 3" = 1'-0"

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE
DATE JUNE 16 1998
BY Henry A. Heller
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 96-1110.05

KNEZEVICH & ASSOCIATES, INC.
CONSULTING ENGINEERS • PRODUCT TESTING
6141 HOKENA DRIVE MIAMI SPRINGS, FLORIDA 33166
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revisions

no	date	by	description
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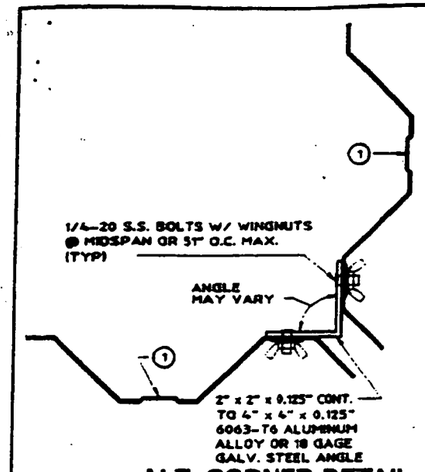
2	07/06/98	VJK	GENERAL REVISION
3	08/17/98	VJK	REV. ANCHOR SCHEDULE
4	03/01/99	VJK	COUNTY COMMENTS

M.A. KNEZEVICH
PROFESSIONAL ENGINEER
LICENSE No. PE 0010983
STATE OF FLORIDA
MAR 1 0 1999

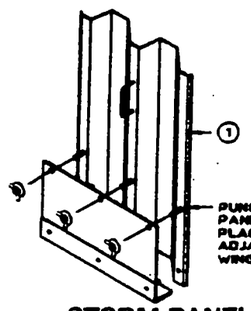
date 04/22/98
scale AS NOTED
drawn by MI
design by VJK
checked by VJK
drawing no. 96-87
sheet 3 of 6

03/09/99 13:50



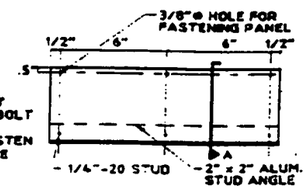
Ⓥ ALT. CORNER DETAIL

SCALE : 3" = 1'-0"



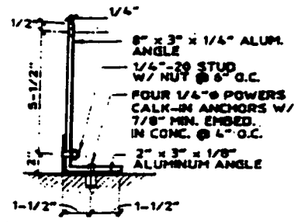
Ⓦ STORM PANEL INTERIOR FASTENING (ISOMETRIC)

SCALE: 3" = 1'-0"



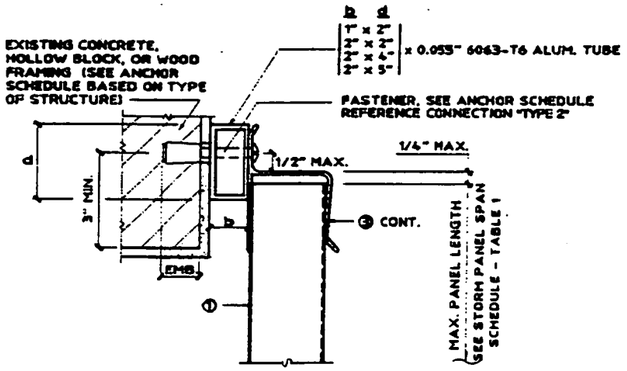
INTERIOR FASTENING ANGLE ASSEMBLY

SCALE: 1-1/2" = 1'-0"



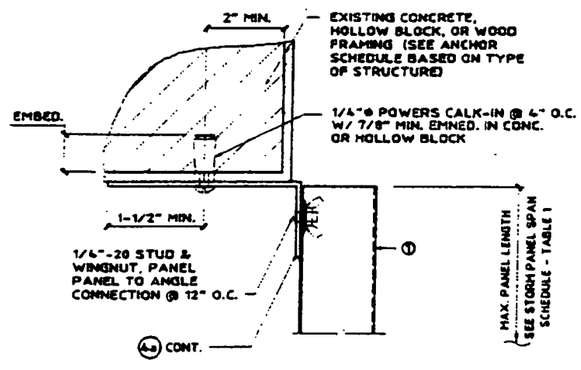
INTERIOR FASTENING ANGLE ASSEMBLY

SCALE: N.T.S.



Ⓨ HEADER MOUNT DETAIL

SCALE : 3" = 1'-0"



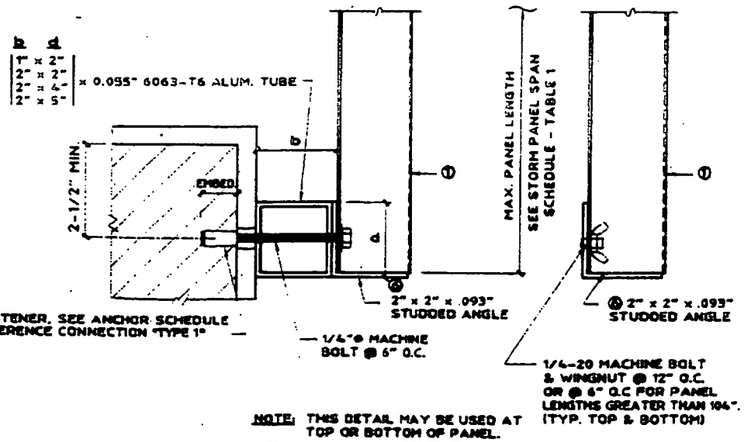
Ⓩ ALT. TRAP MOUNT DETAIL

SCALE : 3" = 1'-0"

TABLE 2	MIN. STORM PANEL SEPARATION FROM GLASS SCHEDULE			
POSITIVE DESIGN LOAD(W) (PSF)	ACTUAL SHUTTER SPAN (FT - IN)	MINIMUM SEPARATION FOR INSTALLATIONS 30' OR LESS ABOVE GRADE (INCHES)		MINIMUM SEPARATION FOR INSTALLATIONS GREATER THAN 30' ABOVE GRADE (INCHES)
		BAR	NO BAR	NO BAR
30.0	3 - 0	2-1/4	2-3/4	1-1/8
	4 - 0	2-1/4	2-3/4	1-1/8
	5 - 0	2-1/4	2-3/4	1-1/2
	7 - 0	2-1/4	2-3/4	1-1/4
	8 - 8	2-1/4	2-3/4	1-5/8
	12 - 0	3-1/4	3-1/4	2-3/8
40.0	3 - 0	2-1/4	2-3/4	1-1/8
	4 - 0	2-1/4	2-3/4	1-1/8
	5 - 0	2-1/4	2-3/4	1-1/8
	7 - 0	2-1/4	2-3/4	1-1/4
	8 - 8	2-1/4	2-3/4	1-1/2
	10 - 8	3-1/4	3-1/4	1-1/4
50.0	3 - 0	2-1/4	2-3/4	1-1/8
	4 - 0	2-1/4	2-3/4	1-1/8
	5 - 0	2-1/4	2-3/4	1-1/4
	7 - 0	2-1/4	2-3/4	1-3/8
	8 - 8	2-1/4	2-3/4	1-3/4
	9 - 7	3-1/4	3-1/4	2
60.0	3 - 0	2-1/4	2-3/4	1-1/8
	4 - 0	2-1/4	2-3/4	1-1/8
	5 - 0	2-1/4	2-3/4	1-1/8
	7 - 0	2-1/4	2-3/4	1-3/8
	8 - 8	2-1/4	2-3/4	1-7/8
	8 - 9	3-1/4	3-1/4	1-7/8
70.0	3 - 0	2-1/4	2-3/4	1-1/8
	4 - 0	2-1/4	2-3/4	1-1/8
	5 - 0	2-1/4	2-3/4	1-1/4
	6 - 0	2-1/4	2-3/4	1-1/4
	7 - 0	2-1/4	2-3/4	1-3/8
	7 - 10	2-1/4	2-3/4	1-3/4

NOTES:

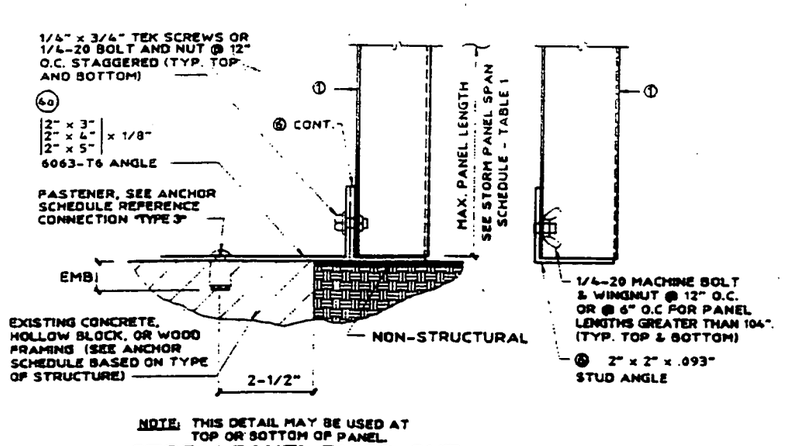
1. ENTER TABLE 2 WITH POSITIVE DESIGN LOAD TO DETERMINE MIN. SEPARATION FROM GLASS.



NOTE: THIS DETAIL MAY BE USED AT TOP OR BOTTOM OF PANEL.

AB 2" x 2" ALUM. TUBE BUILD-OUT

SCALE : 3" = 1'-0"



NOTE: THIS DETAIL MAY BE USED AT TOP OR BOTTOM OF PANEL.

AC STORM PANEL BUILD-OUT

SCALE : 3" = 1'-0"

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE
DATE June 16 1999
BY Helena A. Mok
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 96-1110.05

KNEZEVICH & ASSOCIATES, INC.
CONSULTING ENGINEERS • PRODUCT TESTING
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revisions			
no.	date	by	description
1	06/24/98	VJK	GENERAL REVISION
2	03/01/99	VJK	GENERAL REVISION
3	06/11/99	VJK	REV. ANCHOR SCHEDULE
4	03/04/99	VJK	COUNTY COMMENTS

V.J. KNEZEVICH
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FL License No.
PE 0040983

MAR 10 1999

date	04/22/98
scale	drawn by
AS NOTED	MJ
design by	checked by
VJK	VJK
drawing no.	
96-87	
sheet 4 of 6	

03/09/99 13:51

ANCHOR SCHEDULE

FASTENER MAXIMUM SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

EXISTING STRUCTURE	ANCHOR TYPE	LOAD (W) PSF MAX. (SEE NOTE 1)	MIN. 2" EDGE DISTANCE															MIN. 3" EDGE DISTANCE													
			SPANS UP TO 5' - 6" (SEE NOTE 1)					SPANS UP TO 7' - 6" (SEE NOTE 1)					SPANS UP TO 12' - 0" (SEE NOTE 1)					SPANS UP TO 5' - 6" (SEE NOTE 1)					SPANS UP TO 7' - 6" (SEE NOTE 1)					SPANS UP TO 12' - 0" (SEE NOTE 1)				
			CONNECTION TYPE					CONNECTION TYPE					CONNECTION TYPE					CONNECTION TYPE					CONNECTION TYPE					CONNECTION TYPE				
			1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
CONCRETE	1/4"⌀ ITW TAPCON W/ 1-3/4" MIN. EMBEDMENT (MIN. 3,000 P.S.I. CONCRETE)	48.0	12	12	12	12	12	12	12	12	12	11	12	8	9	12	7	12	12	12	12	12	12	12	12	12	12	12	9	12	12	8
		62.0	12	12	12	12	12	12	11	11	12	9	12	8	9	12	7	12	12	12	12	12	12	12	12	12	10	12	9	12	12	8
		72.0	12	12	12	12	10	12	8	9	12	7	12	8	9	12	7	12	12	12	12	12	12	9	12	12	8	12	9	12	12	8
		92.0	12	9	10	12	8	12	8	9	12	7	12	8	9	12	7	12	10	12	12	9	12	9	12	12	8	12	9	12	12	8
		200.0	12	8	9	12	7	12	8	9	12	7	12	8	9	12	7	12	9	12	12	8	12	9	12	12	8	12	9	12	12	8
	★ 1/4"⌀ ELCO MALE/ FEMALE "PANELMATE" W/ 1-1/4 MIN. EMBEDMENT & 1/4-20 SIDEWALK BOLT (MIN. 3,000 P.S.I. CONCRETE)	48.0	12	12	12	12	7	12	12	8	12	5	11	4	5	11	3	12	12	12	12	8	12	12	10	12	6	12	4	6	12	3
		62.0	12	12	9	12	6	12	5	6	12	4	11	4	5	11	3	12	12	10	12	6	12	5	8	12	4	12	4	6	12	3
		72.0	12	8	8	12	5	11	4	5	11	3	11	4	5	11	3	12	9	9	12	5	12	4	6	12	4	12	4	6	12	3
		92.0	12	4	6	12	4	11	4	5	11	3	11	4	5	11	3	12	4	7	12	4	12	4	6	12	3	12	4	6	12	3
		200.0	11	4	5	11	3	11	4	5	11	3	11	4	5	11	3	12	4	6	12	3	12	4	6	12	3	12	4	6	12	3
	★ 1/4"⌀ POWERS CALK-IN W/ 7/8" EMBEDMENT & 1/4-20 STAINLESS STEEL MACHINE SCREW (MIN. 3,000 P.S.I. CONCRETE)	48.0	12	12	12	12	12	12	12	12	12	12	12	8	8	12	7	12	12	12	12	12	12	12	12	12	12	12	10	12	12	9
		62.0	12	12	12	12	12	12	11	9	12	9	12	8	8	12	7	12	12	12	12	12	12	12	12	12	11	12	10	12	12	9
		72.0	12	12	11	12	11	12	8	8	12	8	12	8	8	12	7	12	12	12	12	12	12	10	12	12	10	12	10	12	12	9
		92.0	12	9	9	12	8	12	8	8	12	7	12	8	8	12	7	12	12	12	12	10	12	10	12	12	9	12	10	12	12	9
		200.0	12	8	8	12	7	12	8	8	12	7	12	8	8	12	7	12	10	12	12	9	12	10	12	12	9	12	10	12	12	9
	1/4"⌀ POWERS ZAMAC NAIL-IN W/ 1-1/8" MIN. EMBEDMENT (MIN. 3,000 P.S.I. CONCRETE)	48.0	12	12	12	12	8	12	12	10	12	5	11	4	6	11	3	12	12	12	12	9	12	12	12	12	6	12	4	8	12	4
		62.0	12	12	10	12	6	12	5	7	12	4	11	4	6	11	3	12	12	12	12	7	12	6	9	12	5	12	4	8	12	4
		72.0	12	8	9	12	5	12	4	6	12	3	11	4	6	11	3	12	10	11	12	6	12	4	8	12	4	12	4	8	12	4
		92.0	12	4	7	12	4	11	4	6	11	3	11	4	6	11	3	12	5	8	12	4	12	4	8	12	4	12	4	8	12	4
		200.0	11	4	6	11	3	11	4	6	11	3	11	4	6	11	3	12	4	8	12	4	12	4	8	12	4	12	4	8	12	4
	★ 1/4"⌀ ITW RED HEAD DYNABOLT SLEEVE ANCHOR W/1-1/8" MIN. EMBED. (MIN. 3,000 P.S.I. CONCRETE)	48.0	12	12	12	12	11	12	12	10	12	8	12	5	7	12	5	12	12	12	12	12	12	12	12	12	10	12	7	11	12	6
		62.0	12	12	11	12	8	12	8	8	12	6	12	5	7	12	5	12	12	12	12	11	12	10	12	12	8	12	7	11	12	6
		72.0	12	12	9	12	7	12	6	7	12	5	12	5	7	12	5	12	12	12	12	9	12	7	11	12	7	12	7	11	12	6
		92.0	12	6	7	12	6	12	5	7	12	5	12	5	7	12	5	12	8	12	12	7	12	7	11	12	6	12	7	11	12	6
		200.0	12	5	7	12	5	12	5	7	12	5	12	5	7	12	5	12	7	11	12	6	12	7	11	12	6	12	7	11	12	6
	1/4"⌀ ASHLEY QUICK-SET SCREW WITH 1-1/4" MIN. EMBEDMENT (MIN. 3,000 P.S.I. CONCRETE)	48.0	12	12	12	12	7	12	10	9	12	5	10	3	6	10	3	12	12	12	12	7	12	10	9	12	5	10	3	6	10	3
		62.0	12	12	10	12	5	12	5	7	12	4	10	3	6	10	3	12	12	10	12	5	12	5	7	12	4	10	3	6	10	3
		72.0	12	7	8	12	4	10	3	6	10	3	10	3	6	10	3	12	7	8	12	4	10	3	6	10	3	10	3	6	10	3
		92.0	11	4	6	11	3	10	3	6	10	3	10	3	6	10	3	11	4	6	11	3	10	3	6	10	3	10	3	6	10	3
		200.0	10	3	6	10	3	10	3	6	10	3	10	3	6	10	3	10	3	6	10	3	10	3	6	10	3	10	3	6	10	3
	★ 1/4"⌀ POWERS DROP-IN & 1/4-20 SIDEWALK BOLT (3/4"⌀ HEAD) W/ 1-1/4" MIN. EMBEDMENT (MIN. 3,000 P.S.I. CONCRETE)	48.0	12	12	12	12	12	12	12	12	12	12	12	10	9	12	10	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
		62.0	12	12	12	12	12	12	12	10	12	11	12	10	9	12	10	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
		72.0	12	12	12	12	12	12	11	9	12	10	12	10	9	12	10	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
		92.0	12	12	9	12	10	12	10	9	12	10	12	10	9	12	10	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
		200.0	12	10	9	12	10	12	10	9	12	10	12	10	9	12	10	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12

ANCHOR SCHEDULE

FASTENER MAXIMUM SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

EXISTING STRUCTURE	ANCHOR TYPE	LOAD (W) PSF MAX. (SEE NOTE 1)	MIN. 3/4" EDGE DISTANCE														
			SPANS UP TO 5' - 6" (SEE NOTE 1)					SPANS UP TO 7' - 6" (SEE NOTE 1)					SPANS UP TO 12' - 0" (SEE NOTE 1)				
			CONNECTION TYPE					CONNECTION TYPE					CONNECTION TYPE				
			1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
WOOD	1/4"⌀ WOOD LAG W/ 1-3/4" MIN. THREAD PENETRATION SHEAR PARALLEL OR PERPENDICULAR TO WOOD GRAIN	48.0	12	12	11	12	12	12	12	8	12	11	12	8	5	12	7
		62.0	12	12	9	12	12	12	11	6	12	9	12	8	5	12	7
		72.0	12	12	7	12	10	12	8	5	12	7	12	8	5	12	7
		92.0	12	9	6	12	8	12	8	5	12	7	12	8	5	12	7
		200.0	12	8	5	12	7	12	8	5	12	7	12	8	5	12	7
	★ 7/16" O.D. BRASS BUSHING W/ 7/8" MIN. PENETRATION & 1/4-20 MACHINE SCREW	48.0	12	12	/	12	8	12	12	/	12	5	11	4	/	11	3
		62.0	12	12	/	12	6	12	5	/	12	4	11	4	/	11	3
		72.0	12	8	/	12	5	12	4	/	12	3	11	4	/	11	3
		92.0	12	4	/	12	4	11	4	/	11	3	11	4	/	11	3
		200.0	11	4	/	11	3	11	4	/	11	3	11	4	/	11	3
	★ 1/4"⌀ ELCO MALE/ FEMALE "PANELMATE" W/ 1-7/8" MIN. PENETRATION & 1/4-20 SIDEWALK BOLT	48.0	12	12	12	12	12	12	12	12	12	12	12	9	9	12	8
		62.0	12	12	12	12	12	12	12	11	12	10	12	9	9	12	8
		72.0	12	12	12	12	12	12	9	10	12	8	12	9	9	12	8
		92.0	12	10	10	12	9	12	9	9	12	8	12	9	9	12	8
		200.0	12	9	9	12	8	12	9	9	12	8	12	9	9	12	8

ANCHOR NOTES:

1. SPANS AND LOADS SHOWN HERE ARE FOR DETERMINING ANCHOR SPACING ONLY. ALLOWABLE STORM PANEL SPANS FOR SPECIFIC LOADS MUST BE LIMITED TO THOSE SHOWN IN TABLE 1, SHEET 6.
2. ENTER ANCHOR SCHEDULE BASED ON THE EXISTING STRUCTURE MATERIAL, ANCHOR TYPE AND EDGE DISTANCE. SELECT DESIGN LOAD GREATER THAN OR EQUAL TO NEGATIVE DESIGN LOAD ON SHUTTER AND SELECT SPAN GREATER THAN OR EQUAL TO SHUTTER SPAN.
3. EXISTING STRUCTURE MAY BE CONCRETE, HOLLOW BLOCK OR WOOD FRAMING. REFERENCE ANCHOR SCHEDULE FOR PROPER ANCHOR TYPE BASED ON TYPE OF EXISTING STRUCTURE AND APPROPRIATE CONNECTION TYPE. SEE MOUNTING SECTION DETAILS FOR IDENTIFICATION OF CONNECTION TYPE.
4. ANCHORS SHALL BE INSTALLED IN ACCORDANCE WITH MANUFACTURERS' RECOMMENDATIONS.
5. MINIMUM EMBEDMENT AND EDGE DISTANCE EXCLUDES WALL FINISH OR STUCCO.
6. WHERE EXISTING STRUCTURE IS WOOD FRAMING, WOOD FRAMING CONDITIONS VARY. FIELD VERIFY THAT FASTENERS ARE INTO ADEQUATE WOOD FRAMING MEMBERS, NOT PLYWOOD.
7. WHERE LAG SCREWS FASTEN TO NARROW FACE OF STUD FRAMING, FASTENER SHALL BE LOCATED IN CENTER OF NOMINAL 2" x 4" (MIN.) WOOD STUD. 3/4" EDGE DISTANCE IS ACCEPTABLE FOR WOOD FRAMING. WOOD STUD SHALL BE "SOUTHERN PINE" G=0.55 OR GREATER DENSITY. LAG SCREWS SHALL HAVE PHILLIPS PAN HEAD OR HEX HEAD.
8. MACHINE SCREWS SHALL HAVE MINIMUM OF 1/2" ENGAGEMENT OF THREADS IN BASE ANCHOR AND MAY HAVE EITHER A PAN HEAD, TRUSS HEAD, OR WAFER HEAD (SIDEWALK BOLT), U.O.N.

9 [ ] DESIGNATES ANCHOR CONDITIONS WHICH ARE NOT ACCEPTABLE USES.

★10. DESIGNATES ANCHORS WHICH ARE REMOVABLE BY REMOVING MACHINE SCREW, NUT OR WASHERED WINGNUT. REMOVABLE ANCHORS ARE REQUIRED FOR DIRECT MOUNT @ 6" O.C. OR 12" O.C. MAX. SPACING ONLY. SPACINGS SHALL NOT EXCEED VALUE SPECIFIED IN ANCHOR SCHEDULE. LOCATE FASTENER IN NARROW PORTION OF KEYHOLE SLOT OR KEYHOLE WASHER.

11. 1/4-20 TRUSS HEAD BOLTS MAY BE USED IN LIEU OF 1/4-20 SIDEWALK BOLT IF ⑩ KEYHOLE WASHERS ARE USED.

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE
DATE June 16 1999
BY Helen A. Martin
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 96-1110.05

03/09/99 15:17

KNEZEVICH & ASSOCIATES, INC.
CONSULTING ENGINEERS • PRODUCT TESTING
641 HOKENA DRIVE-MIAMI SPRINGS, FLORIDA 33166
MIAMI (305) 883-9571 FT. LAUDERDALE (954) 677-9500
FAX: (305) 883-9572

0.063" ALUMINUM STORM PANEL

MADDEN MANUFACTURING CO.
1889 N.W. 22 ST.
POMPANO BEACH, FL 33069
(800) 272-2071

revisions

no	date	by	description
1	12/06/98	VJK	GENERAL REVISION
2	04/12/99	VJK	REV. ANCHOR SCHEDULE
3	12/06/98	VJK	COUNTY COMMENTS.

V. J. KNEZEVICH
PROFESSIONAL ENGINEER
FL. LIC. No. 41983

MAR 1 0 1999

date	04/22/96
scale	drawn by
AS NOTED	MC
design by VJK	checked by VJK
drawing no.	96-88
sheet 5 of 6	

ANCHOR SCHEDULE

FASTENER MAXIMUM SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

EXISTING STRUCTURE	ANCHOR TYPE	LOAD (W) PSF MAX. (SEE NOTE 1)	MIN. 2" EDGE DISTANCE															MIN. 3" EDGE DISTANCE													
			SPANS UP TO 5' - 6" (SEE NOTE 1)					SPANS UP TO 7' - 6" (SEE NOTE 1)					SPANS UP TO 12' - 0" (SEE NOTE 1)					SPANS UP TO 5' - 6" (SEE NOTE 1)					SPANS UP TO 7' - 6" (SEE NOTE 1)					SPANS UP TO 12' - 0" (SEE NOTE 1)				
			CONNECTION TYPE					CONNECTION TYPE					CONNECTION TYPE					CONNECTION TYPE					CONNECTION TYPE					CONNECTION TYPE				
			1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5	1	2	3	4	5
HOLLOW CONCRETE BLOCK	1/4"ø ITW TAPCON W/ 1-1/4" MIN. EMBEDMENT	48.0	12	12	9	12	5	12	8	7	12	3	7	//	4	7	//	12	12	11	12	6	12	9	8	12	4	8	3	5	8	//
		62.0	12	10	7	12	4	9	3	5	9	3	7	//	4	7	//	12	11	9	12	4	10	4	6	10	3	8	3	5	8	//
		72.0	11	5	6	11	3	8	//	4	8	//	7	//	4	7	//	12	6	7	12	4	9	3	5	9	//	8	3	5	8	//
		92.0	8	3	5	8	//	7	//	4	7	//	7	//	4	7	//	9	3	6	9	3	8	3	5	8	//	8	3	5	8	//
		200.0	7	//	4	7	//	7	//	4	7	//	7	//	4	7	//	8	3	5	8	//	8	3	5	8	//	8	3	5	8	//
	* * 1/4"ø ELCO MALE/ FEMALE "PANELMATE" W/ 1-1/4 MIN. EMBEDMENT & 1/4-20 SIDEWALK BOLT	48.0	12	12	12	12	7	12	12	8	12	5	11	4	5	11	3	12	12	12	12	8	12	12	10	12	6	12	4	6	12	3
		62.0	12	12	9	12	6	12	5	6	12	4	11	4	5	11	3	12	12	10	12	6	12	5	8	12	4	12	4	6	12	3
		72.0	12	8	8	12	5	11	4	5	11	3	11	4	5	11	3	12	9	9	12	5	12	4	6	12	4	12	4	6	12	3
		92.0	12	4	6	12	4	11	4	5	11	3	11	4	5	11	3	12	4	7	12	4	12	4	6	12	3	12	4	6	12	3
		200.0	11	4	5	11	3	11	4	5	11	3	11	4	5	11	3	12	4	6	12	3	12	4	6	12	3	12	4	6	12	3
	* 1/4"ø POWERS CALK-IN W/ 7/8" EMBEDMENT & 1/4-20 STAINLESS STEEL MACHINE SCREW	48.0	12	12	10	12	6	12	10	7	12	5	10	3	4	10	3	12	12	12	12	8	12	12	11	12	6	12	4	7	12	4
		62.0	12	12	8	12	5	12	5	5	12	3	10	3	4	10	3	12	12	12	12	6	12	6	9	12	4	12	4	7	12	4
		72.0	12	7	6	12	4	10	3	5	10	3	10	3	4	10	3	12	9	10	12	5	12	4	7	12	4	12	4	7	12	4
		92.0	11	4	5	11	3	10	3	4	10	3	10	3	4	10	3	12	5	8	12	4	12	4	7	12	4	12	4	7	12	4
		200.0	10	3	4	10	3	10	3	4	10	3	10	3	4	10	3	12	4	7	12	4	12	4	7	12	4	12	4	7	12	4
	1/4"ø POWERS ZAMAC NAIL-IN W/ 1-1/8" MIN. EMBEDMENT	48.0	12	12	10	12	5	11	7	7	11	3	7	//	4	7	//	12	12	12	12	5	12	8	9	12	4	8	//	5	8	//
		62.0	12	9	7	12	4	9	3	5	9	//	7	//	4	7	//	12	11	9	12	4	10	4	7	10	3	8	//	5	8	//
		72.0	10	5	6	10	3	7	//	4	7	//	7	//	4	7	//	11	6	8	11	3	8	3	6	8	//	8	//	5	8	//
		92.0	8	3	5	8	//	7	//	4	7	//	7	//	4	7	//	9	3	6	9	3	8	//	5	8	//	8	//	5	8	//
		200.0	7	//	4	7	//	7	//	4	7	//	7	//	4	7	//	8	//	5	8	//	8	//	5	8	//	8	//	5	8	//
	* 1/4"ø ITW RED HEAD DYNABOLT SLEEVE ANCHOR W/1-1/8" MIN. EMBED.	48.0	12	12	8	12	4	9	6	6	9	3	6	//	3	6	//	12	12	12	12	5	12	8	8	12	4	8	//	5	8	//
		62.0	10	8	6	10	3	7	3	4	7	//	6	//	3	6	//	12	10	9	12	4	9	3	6	9	3	8	//	5	8	//
		72.0	9	4	5	9	//	6	//	4	6	//	6	//	3	6	//	11	6	8	11	3	8	//	5	8	//	8	//	5	8	//
		92.0	7	//	4	7	//	6	//	3	6	//	6	//	3	6	//	8	3	6	8	//	8	//	5	8	//	8	//	5	8	//
		200.0	6	//	3	6	//	6	//	3	6	//	6	//	3	6	//	8	//	5	8	//	8	//	5	8	//	8	//	5	8	//
	1/4"ø ASHLEY QUICK-SET SCREW WITH 1-1/4" MIN. EMBEDMENT	48.0	12	12	12	12	7	12	10	9	12	5	10	3	6	10	3	12	12	12	12	7	12	10	9	12	5	10	3	6	10	3
		62.0	12	12	10	12	5	12	5	7	12	4	10	3	6	10	3	12	12	10	12	5	12	5	7	12	4	10	3	6	10	3
		72.0	12	7	8	12	4	10	3	6	10	3	10	3	6	10	3	12	7	8	12	4	10	3	6	10	3	10	3	6	10	3
		92.0	11	4	6	11	3	10	3	6	10	3	10	3	6	10	3	11	4	6	11	3	10	3	6	10	3	10	3	6	10	3
		200.0	10	3	6	10	3	10	3	6	10	3	10	3	6	10	3	10	3	6	10	3	10	3	6	10	3	10	3	6	10	3

ANCHOR NOTES:

1. SEE SHEET 5 OF 6 FOR COMPLETE ANCHOR NOTES.

TABLE 1

STORM PANEL SPAN
STORM PANEL SCHEDULE

NEGATIVE DESIGN LOAD W (PSF)	FOR ALL MOUNTING CONDITIONS L MAX. (FT-IN)
-30.0	12 - 0
35.0	11 - 5
40.0	10 - 9
45.0	10 - 1
48.0	9 - 9
50.0	9 - 7
55.0	9 - 2
60.0	8 - 9
62.0	8 - 7
65.0	8 - 5
70.0	7 - 10
72.0	7 - 7
75.0	7 - 3
80.0	6 - 10
90.0	6 - 1
100.0	5 - 6
110.0	5 - 0
120.0	4 - 7
130.0	4 - 2
140.0	3 - 11
150.0	3 - 8
160.0	3 - 5
170.0	3 - 2
180.0	3 - 0
190.0	2 - 10
200.0	2 - 9

NOTES:

1. ENTER TABLE 1 WITH NEGATIVE DESIGN LOAD TO DETERMINE MAX. PANEL SPAN. POSITIVE LOADS LESS THAN OR EQUAL TO THE NEGATIVE LOAD ARE ACCEPTABLE.
2. FOR DESIGN LOADS BETWEEN TABULATED VALUES, USE NEXT HIGHER LOAD OR LINEAR INTERPOLATION MAY BE USED TO DETERMINE ALLOWABLE SPANS.

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE
DATE June 16 1999
BY Helen A. Miller
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 98-1110.05

KNEZEVICH & ASSOCIATES, INC.
CONSULTING ENGINEERS • PRODUCT TESTING
641 MOKENA DRIVE-MIAMI SPRINGS, FLORIDA 33166
MIAMI (305) 883-9571 FT. LAUDERDALE (954) 677-9500
FAX: (305) 883-9572

20 GA. GALVANIZED STEEL STORM PANEL

MADDEN MANUFACTURING CO.
1889 N.W. 22 ST.
POMPANO BEACH, FL 33069
(800) 272-2071

revisions

no	date	by	description
1	04/22/96	VJK	GENERAL REVISION
2	03/04/97	VJK	GENERAL REVISION
3	04/23/98	VJK	REV ANCHOR SCHEDULE
4	03/01/99	VJK	COUNTY COMMENTS

V.J. KNEZEVICH
PROFESSIONAL ENGINEER
FL License No. PE 0010983

MAR 10 1999

date 04/22/96
scale AS NOTED
drawn by H
design by VJK
checked by VJK
drawing no. 96-87
sheet 6 of 6

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Wed 12-1-99

	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4514	Cicoria	driveway	PASSED	PERMIT EXP. 12/2/99 - CONTR.
		126 N.S.P. Rd.			TO RESPECU (1 MONTH) ON 12/2
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4650	Swiss Arm	truss ?	FAILED	GABLE END FRAMING NOT PER ENG
		/ Banyan	tie down	(GABLE FRAMING	— REINSP (FEE) REQUIRED
		334-7717	TRUSS BRACING	→ PASS	
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4613	Subin	insulation	PASSED	(REINSPECT ATTIC ACCESS DOOR)
		8 Palm Court			
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
S	4750	Lucido	final for	PTL - OK FOR	11:AM
		[redacted]	C.O.	PTL. C.O.	S FOR ISSUANCE 12/2/99
	[redacted]		STORM SHUTTERS	PASS — FINAL	
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
S	4620	Laraway	el. meter	PASSED	PM REQUESTED
		15 Middle Rd.			- called FPL (Sheri) w/
					meter release 12/1 2:50 PM
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4732	Hurtagel	pl (rough	PASSED	
		19 LaVerne Way			
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4707	Nicklas	pool steel	PASSED	
		21 C. Hill Way	3 gr. (PRE INSP.)		

OTHER: 0 MIDDLE ROAD; PRE-PERMIT INSP (ALTERNATIVES)

INSPECTOR: _____ **DATE:** _____

1998 - 1999
Town of Sewall's Point
Building Department – Inspection Log

Wed. 12/1/99

	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4514	Cicoria	driveway	PASSED	PERMIT EXP. 12/2/99 - CONTR.
		126 N.S.P. Rd.			TO RESPOND (1 MONTH) ON 12/2
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4650	Swiss Am	truss ✓	FAILED	GABLE END FRAMING NOT PER ENGR
		4 Banyan	tie down	(GABLE FRAMING	— REINSP (FEE) REQUIRED
		334-7717	TRUSS BRACING → PASS		
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4613	Subin	insulation	PASSED	(REINSPECT ATTIC ACCESS DOOR)
		8 Palm Court			
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
S	4750	Lucido	final for	PTL - OK FOR	11:AM
		2 Sabal Court	c.o.	PTL. C.O.	S FOR ISSUANCE 12/2/99
	4751		STORM SHUTTERS	PASS — FINAL	
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
S	4620	Laraway	el. meter	PASSED	PM REQUESTED
		15 Middle Rd.			— called PTL (Sheri) w/
					meter release 12/1 2:50 PM
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4732	Heermagel	fl. (rough	PASSED	
		19 LaTana Way			
	PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N	4707	Nicklas	pool steel	PASSED	
		21 C. Hill Way	& gr. (REINSP.)		

OTHER: @ MIDDLE ROAD; PRE-PERMIT INSP (ALTERNATE) ✓

INSPECTOR: _____ **DATE:** 12/1/99

9435

AC

CHANGEOUT

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

BUILDING PERMIT CARD

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

PERMIT NUMBER:	9435	DATE ISSUED:	MAY 12, 2010
SCOPE OF WORK:	AC CHANGEOUT		
CONDITIONS :			
CONTRACTOR:	FORWARD ELECTRIC		
PARCEL CONTROL NUMBER:	013841-011-000-000401	SUBDIVISION	RIDGELAND – LOT 4
CONSTRUCTION ADDRESS:	2 SABAL CT		
OWNER NAME:	LUCIDO		
QUALIFIER:	MICHAEL ADLER	CONTACT PHONE NUMBER:	221-1660

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

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

24 HOUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE

CALL 287-2455 - 8:00AM TO 4:00PM

REQUIRED INSPECTIONS

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

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

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 5-12-10 Permit Number: 9435

OWNER/TITLEHOLDER NAME: THOMAS LUCIDO Phone (Day) 260-9545 (Fax) _____

Job Site Address: 2 SABLE CT. City: STUART State: FL. Zip: 34996

Legal Description _____ Parcel Control Number: _____

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

Scope of work (please be specific): REPLACE AIR HANDLER & COND. UNIT

WILL OWNER BE THE CONTRACTOR?
(If yes, Owner Builder questionnaire must accompany application)
YES_____ NO_X_

Has a Zoning Variance ever been granted on this property?
YES_____ (YEAR)_____ NO_____
(Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: $ 6995.00 Inc
(Notice of Commencement required when over $2500 prior to first inspection, $7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10___ AE9___ AE8___ X___
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: $_____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: FORWARD ELECTRIC & A/C Phone: 221-1660 Fax: 221-3180

Street: 4437 SW PORT WAY City: PALM CITY State: FL Zip: 34990

State License Number: RA13067160 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: WILL CARSON Phone Number: 221-1660 OR 260.9561

DESIGN PROFESSIONAL: N/A Lic# _____ Phone Number: _____

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

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

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

RECEIVED
MAY 12 2010
Sewall's Point Town Hall

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

NOTICES TO OWNERS AND CONTRACTORS:

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

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

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

OWNER SIGNATURE: (required)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)

State of Florida, County of: Martin
This the 12 day of May, 2010
by Tom Lucido who is personally known to me or produced _____ as identification.

Notary Public
My Commission Expires: May 18, 2012

SHANNON D. BARRETT
MY COMMISSION # DD 911196
EXPIRES May 18, 2012
Bonded Thru Advantage Notary
NOTARY PUBLIC STATE OF FLORIDA

CONTRACTOR SIGNATURE: (required)

On State of Florida, County of: Martin
This the 12th day of May 2010
by Michael Adler who is personally known to me or produced _____ as identification.

Notary Public
My Commission Expires: _____

GINA M. GOLINO
Notary Public - State of Florida
My Comm. Expires Mar 25, 2014
Commission # DD 985208
Bonded Through National Notary Assn.

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL. NON-CONVERSION AGREEMENTS AND ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.4.1.1). PLEASE PICK UP PERMIT PROMPTLY!

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

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

Summary

print Address 1 of 7

Parcel ID	Unit Address	SerialIndex ID	Order	Commercial	Residential
01-38-41-011-000-00040-1	2 SABAL COURT	17784	Address	0	1

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

Search By
Parcel ID
Owner
Address
Account #
Use Code
Legal Description
Neighborhood
Sales
Map →

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

Summary
Property Location 2 SABAL COURT
Tax District 2200 Sewall's Point
Account # 17784
Land Use 101 0100 Single Family
Neighborhood 120200
Acres 0.422

Legal Description
Property Information
RIDGELAND LOT 4

Owner Information
Owner Information
LUCIDO, THOMAS P
LUCIDO, DIERDRE

Mail Information
2 SABAL CT
STUART FL 34996

Assessment Info
Front Ft. 0.00

Market Land Value $165,300
Market Impr Value $432,010
Market Total Value $597,310

Recent Sale
Sale Amount $94,000

Sale Date 4/28/1995
Book/Page 1120 0718

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

Data updated on 4/29/2010

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection ☒ Mon ☐ Tue ☐ Wed ☐ Thur ☐ Fri 6-7-10 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9435	[redacted]	[redacted]	[redacted]	[redacted]
VPM	2 Sabal Ct			
	Forward Elec			INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9449	Sharfi	Fence		
	731 Sewalls	Final	PASS	Close
	TC Fence			INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9409	Kurtin	electric		
	5 Mandalay	framing	PASS	
	Driftwood		PASS	INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				NOAA DEP
	138 S SPDRD	INVESTIGATE		PERMIT
		SEA WALL		INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

11260

AC

CHANGEOUT

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

BUILDING PERMIT CARD

THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	11260	DATE ISSUED:	April 29, 2015
SCOPE OF WORK:	A/C Change Out		
CONTRACTOR:	Forward Electric & A/C		
PARCEL CONTROL NUMBER:	01-38-41-011-000-00040-1	SUBDIVISION:	Ridgeland Lot 4
CONSTRUCTION ADDRESS:	2 Sabal Court		
OWNER NAME:	Lucido		
QUALIFIER:	William M Carson	CONTACT PHONE NUMBER:	772-221-1660

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

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

24 HOUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY

INSPECTIONS

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

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

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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	**11260**		
ADDRESS:	**2 Sabal Court**		
DATE ISSUED:	**4/29/2015**	**SCOPE OF WORK:**	**A/C Change Out**

SINGLE FAMILY OR ADDITION /REMODEL		Declared Value	$	

Plan Submittal Fee ($350.00 SFR, Remodel >$200K)		$	
Plan Submittal Fee (175.00 Remodel <$200K, Tennant Improvement		$	
Plan Submittal Fee (100.00 Remodel <$100k)		$	
Total square feet air-conditioned spa @ per sq. ft. s.f.			$ -
Total square feet non-conditioned space, or interior remodel:			
@ per sq. ft. s.f.			$ -
Total square feet remodel with new trusses: @ per sq. ft. s.f.			$ -
Total Construction Value:		$	$ -
Building fee: (2% of construction value SFR or >$200K)		$	n/a
Total number of inspections (Value < $200K) $ 150.00 per insp. # insp			$ -
Dept. of Comm. Affairs Fee: (1.5% of permit fee - $2.00 min)		$	n/a
DBPR Licensing Fee: (1.5% of permit fee - $2.00 min.)		$	n/a
Technology Fee: (0.04% of Construction Value - $5 min)			n/a
Road impact assessment: (0.4% of construction value - $20 min.)			n/a
Martin County Impact Fee:		$	
TOTAL BUILDING PERMIT FEE:		$	$ -

ACCESSORY PERMIT Declared Value:		$	$ 6,500.00
Total number of inspections: @ $ 150.00 per insp. # insp		1	$ 150.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - $2.00 min)		$	$ 2.25
DBPR Licensing Fee: (1.5% of permit fee - $2.00 min.)		$	$ 2.25
Technology Fee (0.04% of Construction Value - $5 min.)			$ 5.00
Road impact assessment: (0.4% of construction value - $20 min.)			$ 26.00

TOTAL ACCESSORY PERMIT FEE:	**$ 185.50**

Town of Sewall's Point

Date: 4/29/15 **BUILDING PERMIT APPLICATION** **Permit Number:** 11260

OWNER/LESSEE NAME: LUCIDO THOMAS & DIERDRE Phone (Day) _____ (Fax) _____

Job Site Address: 2 SABAL CT City: STUART State: FL Zip: 34996

Legal Description RIDGELAND LOT 4 Parcel Control Number: 01-38-41-011-000-00040-1

Fee Simple Holder Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Change out like for like 4 ton split AC

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: $ 6500.00
(Notice of Commencement required when over $2500 prior to first inspection, $7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 ___ AE9 ___ AE8 ___ X ___
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: $ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Forward Electric & AC Phone: 772-221-1660 Fax: 772-221-3180

Qualifiers name: William M Carson Street: 4437 SW Port Way City: Palm City State: FL Zip: 34990

State License Number: CAC1816767 **OR:** Municipality: _____ License Number: _____

LOCAL CONTACT: Bill Carson Phone Number: 772-221-1660 or 772-215-1784

DESIGN PROFESSIONAL: _____ Fla. License# _____

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

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

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

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

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

WARNINGS TO OWNERS AND CONTRACTORS:

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2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME *NULL AND VOID* IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF: FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:

X _____

State of Florida, County of: Martin

On This the 29th day of April 2015

by _____ who is personally known to me or produced _____

As identification _____

Notary Public

My Commission Expires: _____

CHRISTINA R. ZELENKE
MY COMMISSION # EE 827899
EXPIRES: August 16, 2016
Bonded Thru Budget Notary Services

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:

X _____

State of Florida, County of: Martin

On This the 29th day of April 2015

by William M Carson who is personally known to me or produced _____

As identification _____

Notary Public

My Commission Expires: _____

CHRISTINA R. ZELENKE
MY COMMISSION # EE 827899
EXPIRES: August 16, 2016
Bonded Thru Budget Notary Services

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

FORWE-1 OP ID: SN

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/30/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Stuart Insurance, Inc. 3070 S W Mapp Palm City, FL 34990 Cabot W. Lord, CIC. Phone: 772-286-4334 Fax: 772-286-9389	CONTACT NAME: PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS:
INSURED FORWARD ELECTRICAL CONTRACTORS OF FLA., INC. D/B/A FORWARD ELECTRIC & AIR CONDITIONING 4437 SW Port Way Palm City, FL 34990	INSURER(S) AFFORDING COVERAGE — NAIC # INSURER A : Southern Owners — 10190 INSURER B : Owners Insurance Company — 32700 INSURER C : INSURER D : INSURER E : INSURER F :

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [ ] POLICY [X] PRO-JECT [ ] LOC			72062336	08/01/2014	08/01/2015	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG Emp Ben.	$ 1,000,000 $ 300,000 $ 10,000 $ 1,000,000 $ 2,000,000 $ 2,000,000 $ 1,000,000
B	AUTOMOBILE LIABILITY [X] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [ ] HIRED AUTOS [ ] NON-OWNED AUTOS			4810131401	08/01/2014	08/01/2015	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000 $ $ $
	[ ] UMBRELLA LIAB [ ] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE AGGREGATE	$ $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? Y / N [ ] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A					[ ] WC STATU-TORY LIMITS [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ $ $

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER SEWAP-1

Sewalls Point Building Dept.
1 S Sewalls Point Road
Stuart, FL 34996

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 01/09/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	CONTACT NAME:	
Bouchard Insurance for WBS P.O.Box 6090 Clearwater, FL 33758-6090	PHONE (A/C, No, Ext): (866) 293-3600 ext. 623	FAX (A/C, No):
	E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A : American Zurich Insurance Company	40142
INSURED Workforce Business Services, Inc. Alt. Emp: Forward Electrical Contractors of Florida Inc dba: Forward Electric & A/C 1401 Manatee Ave. West Ste 600 Bradenton, FL 34205-6708	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER: 14FL079811514** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE	$
	☐ CLAIMS-MADE ☐ OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
							MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	$
	☐ POLICY ☐ PRO-JECT ☐ LOC						PRODUCTS - COMP/OP AGG	$
	OTHER:							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	☐ ANY AUTO						BODILY INJURY (Per person)	$
	☐ ALL OWNED AUTOS ☐ SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	☐ HIRED AUTOS ☐ NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
	☐ UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE	$
	☐ EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE	$
	☐ DED ☐ RETENTION $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N ☐ If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WC 90-00-818-04	12/31/2014	12/31/2015	X PER STATUTE ☐ OTH-ER	
							E.L. EACH ACCIDENT	$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE	$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	$ 1,000,000
				Location Coverage Period:	12/31/2014	12/31/2015	Client# 000827	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Coverage is provided for only those co-employees of, but not subcontractors to:
Forward Electrical Contractors of Florida Inc dba:
Forward Electric & A/C
4437 SW Portway
Palm City, FL 34990

William M Carson is a covered employee under this WC Policy.

CERTIFICATE HOLDER

Town of Sewalls Point Building Dept
One South Sewalls Point
Sewalls Point, FL 34996

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

2014-2015 **MARTIN COUNTY** ORIGINAL

BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR
3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994
(772) 288-5604

ACCOUNT 2012-520-0465 CERT CAC1816767
PHONE (772) 221-1660 SIC NO 238220
LOCATION:
4437 SW PORT WAY PC

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR.	$ .00	LIC. FEE	$ 26.25
	$ .00	PENALTY	$ .00
	$ .00	COL. FEE	$ .00
	$ .00	TRANSFER	$ .00
	TOTAL 26.25		

HAS SATISFIED REQUIREMENTS TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
AIR CONDITIONING CONTRACTOR
OF

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

25 DAY OF SEPTEMBER 20 14
AND ENDING SEPTEMBER 30. 2015

CARSON, WILLIAM (QUAL)
FORWARD ELECTRICAL CONTRATORS
OF FLORIDA, INC
4437 SW PORT WAY
PALM CITY, FL 34990

804 2013 03816.0001 PAID

2014-2015 **MARTIN COUNTY** ORIGINAL

BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR
3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994
(772) 288-5604

ACCOUNT 1974-508-0045 CERT EC13004334
PHONE (772) 221-1660 SIC NO 235310
LOCATION:
4437 SW PORT WAY MAR

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR.	$ .00	LIC. FEE	$ 26.25
	$ .00	PENALTY	$ .00
	$ .00	COL. FEE	$ .00
	$ .00	TRANSFER	$ .00
	TOTAL 26.25		

HAS SATISFIED REQUIREMENTS TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
CERTIFIED ELECTRICAL CONTRACTOR
OF

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

25 DAY OF SEPTEMBER 20 14
AND ENDING SEPTEMBER 30. 2015

OF FLORIDA INC
FORWARD ELECTRICAL CONTRACTORS
JEREMY ALLEN SAUNDERS (QUALIFIER)
4437 SW PORT WAY
PALM CITY, FL 34990

804 2013 03816.0002 PAID

THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE.

ANYONE DOING BUSINESS WITHOUT A VALID BUSINESS TAX RECEIPT IS SUBJECT TO A $250 FINE. IF NOT PAID BY SEPT. 30TH, A DELINQUENT PENALTY OF 10% FOR THE MONTH OF OCTOBER, PLUS A 5% PENALTY FOR EACH MONTH THEREAFTER UP TO 25%, PLUS COLLECTION COSTS WILL APPLY.

NOTE –A PENALTY IS IMPOSED FOR FAILURE TO KEEP THIS BUSINESS TAX RECEIPT EXHIBITED CONSPICUOUSLY AT YOUR ESTABLISHMENT OR PLACE OF BUSINESS.

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

(850) 487-1395

CARSON, WILLIAM M MR
FORWARD ELECTRIC & AIR CONDITIONING
4437 SW PORT WAY
PALM CITY FL 34990

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto **www.myfloridalicense.com**. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CAC1816767 ISSUED: 08/20/2014

CERTIFIED AIR COND CONTR
CARSON, WILLIAM M MR
FORWARD ELECTRIC & AIR CONDITIONIN

IS CERTIFIED under the provisions of Ch 489 FS
Expiration date: AUG 31, 2016 L1408200001168

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER	
CAC1816767	

The CLASS B AIR CONDITIONING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS
Expiration date: AUG 31, 2016

CARSON, WILLIAM M MR
FORWARD ELECTRIC & AIR CONDITIONING
4437 SW PORT WAY
PALM CITY FL 34990

ISSUED: 08/20/2014 DISPLAY AS REQUIRED BY LAW SEQ # L1408200001168

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

generated on 4/29/2015 11:11:50 AM EDT

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-011-000-00040-1	17784	2 SABAL CT, SEWALL'S POINT	$655,590	4/25/2015

Owner Information

Owner(Current)	LUCIDO THOMAS P LUCIDO DIERDRE
Owner/Mail Address	2 SABAL CT STUART FL 34996
Sale Date	4/28/1995
Document Book/Page	1120 0718
Document No.	
Sale Price	94000

Location/Description

Account #	17784	**Map Page No.**	SP-04
Tax District	2200	**Legal Description**	RIDGELAND LOT 4
Parcel Address	2 SABAL CT, SEWALL'S POINT		
Acres	.4220		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120100 Hillcrest, Noni Est, West End

Assessment Information

Market Land Value	$230,000
Market Improvement Value	$425,590
Market Total Value	$655,590

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

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Air Conditioning Change out Affidavit

Residential X Commercial _____

Package Unit ☐ Yes ☑ No (Use Condenser side of form below for equipment listing)

Duct Replacement ☐ Yes ☑ No - Refrigerant line replacement ☐ Yes ☑ No

Flushing Existing Refrigerant lines ☑ Yes ☐ No - Adding Refrigerant Drier ☐ Yes ☑ No

Rooftop A/C Stand Installation ☐ Yes ☑ No - Curb Installation ☐ Yes ☑ No

Smoke Detector in Supply (over 2000 CFM) ☐ Yes ☑ No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: Lennox Model# CBX25UHV048
Volts 230 CFM's _____ Heat Strip 10 Kw
Min. Circuit Amps 8.6 Wire gauge #6
Max. Breaker size 60 Min. Breaker size _____
Ref. line size: Liquid 3/8" Suction 7/8"
Refrigerant type R410A
Location: Existing X New _____
Attic/Garage/Closet (specify) Closet
Access: _____

Condenser: Mfg Lennox Model# XC16S048230
Volts 230 SEER/EER 16/12 BTU's 47,000
Min. Circuit Amps 29.2 Wire gauge #8
Max. Breaker size 50 Min. Breaker size _____
Ref. line size: Liquid 3/8" Suction 7/8"
Refrigerant type R410A
Location: Existing X New _____
Left/Right/Rear/Front/Roof _____
Condensate Location _____

NOTE: CONTRACTOR MUST SUPPLY A PROPER LADDER IF REQUIRED FOR INSPECTION

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: Rheem Model# unknown
Volts 230 CFM's unknown Heat Strip 10 Kw
Min. Circuit Amps unknown Wire gauge #6
Max. Breaker size 60 Min. Breaker size _____
Ref. line size: Liquid 3/8" Suction 7/8"
Refrigerant type R22
Location: Ext. X New _____
Attic/Garage/Closet (specify) Closet
Access: _____

Condenser: Mfg Rheem Model# unknown
Volts 230 SEER/EER unknown BTU's unknown
Min. Circuit Amps unknown Wire gauge #8
Max. Breaker size 50 Min. Breaker size _____
Ref. line size: Liquid 3/8" Suction 7/8"
Refrigerant type R22
Location: Ext. X New _____
Left/Right/Rear/Front/Roof _____
Condensate Location _____

Certification:

I herby certify that the information entered on this form accurately represents the equipment installed and further that this equipment is considered matched as required by FBC – R (N)1107 & 1108

_____ 4/29/15

Signature Date

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: LUCIDO THOMAS & DIERDRE Contractor name: Forward Electric & AC

Street address: 2 SABAL CT Jurisdiction: Sewalls Point

City: STUART Permit No.: _____

Zip: 34996 Final inspection date: _____

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101.4.7.1.1 as indicated below:

- [x] Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent.
- [ ] Ducts are located within conditioned space. (Section 101.4.7.1.1 exception 1)
- [ ] The joints or seams are already sealed with fabric and mastic (Section 101.4.7.1.1 exception 2)
- [ ] System was tested (see below) and repairs were made as necessary – (Section 101.4.7.1.1 exception 3)

Signature: _____ Date: 4/29/15

Printed Name: William M Carson

Contractor License #: CAC1816767

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in. w.c.).

Signature: _____ Date: _____

Printed Name: _____

DesignStar Load Calculation

Results are intended for use with Ruud heating and cooling systems

Customer Information

Street Address	2 sable court, Stuart, FL 34996
Latitude, Longitude	26.6726°, -80.0706°
House Square Footage:	4000 sq. ft.
Name:	Lucido
Phone:	
Email:	

House Information

SHR	75
Number of residents	2
Ceiling height	12
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

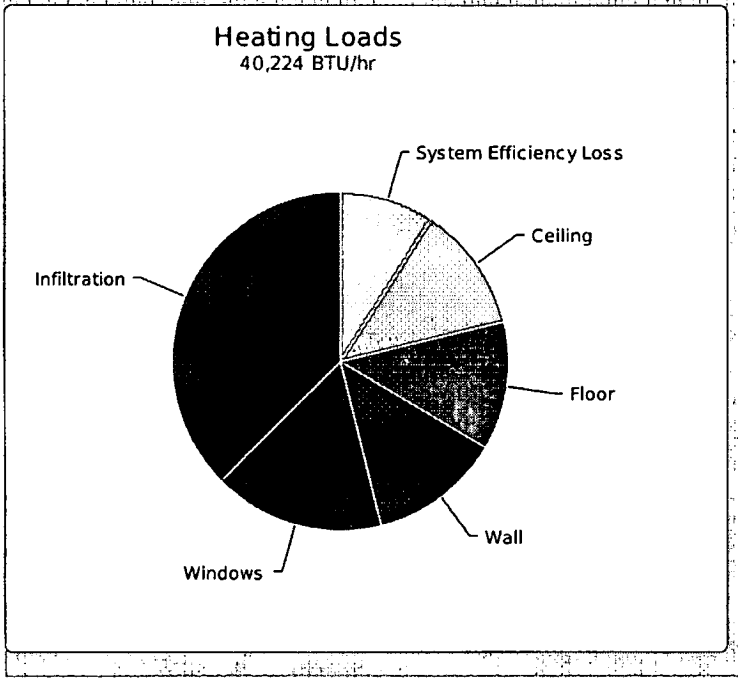
Design Conditions

Outdoor	Heating	Cooling
Dry bulb (°F)	47	95
Daily range		M
Relative humidity		50%
Moisture difference		64

Indoor	Heating	Cooling
Indoor temperature (°F)	70	70
Design temperature difference(°F)	23	25

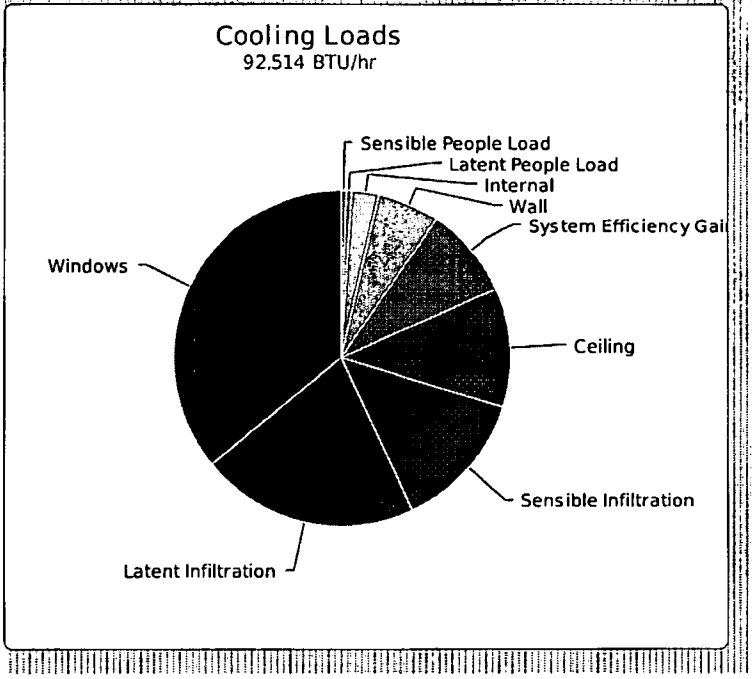
Heating Loads

Area	Btuh	% of load
Wall	5094	12.7
Floor	4927	12.2
Ceiling	4876	12.1
Windows	6613	16.4
Infiltration	15059	37.4
System Efficiency Loss	3657	9.1
Total:	40224	

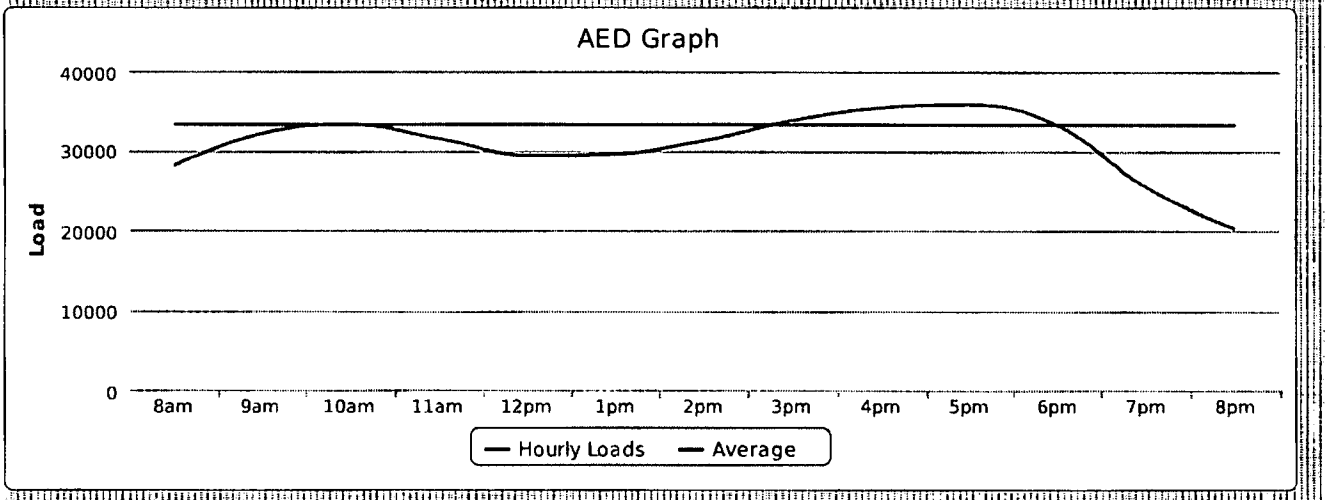


Cooling Loads

Area	Btuh	% of load
Wall	5537	6
Ceiling	10600	11.5
Windows	33245	35.9
Sensible Infiltration	12276	13.3
Latent Infiltration	19427	21
System Efficiency Gain	8109	8.8
Internal	2400	2.6
Sensible People Load	460	0.5
Latent People Load	460	0.5
Total:	92514	
Sensible load	72626	
Latent load	19887	
SHR	0.79	
Capacity at .75 SHR	8.07 Tons	



Adequate Exposure Diversity



Equipment selection

System equipment selection will be made using the following derived values:

Glass (E)	290 sq. ft.
Glass (S)	41 sq. ft.
Glass (N)	41 sq. ft.
Glass (W)	203 sq. ft.
Summer Outdoor	95°F
Summer Wet Bulb	78°F
Summer Indoor	70°F
Summer Design Grains	50%
Winter Outdoor	47°F
Winter Indoor	70°F
Sensible Cooling	72,626 Btuh
Latent Cooling	19,887 Btuh
Required Cooling Airflow	3,301 CFM
Sensible Heating	40,224 Btuh
Required Heating Airflow	522 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

AHRI CERTIFIED®
www.ahridirectory.org

Certificate of Product Ratings

AHRI Certified Reference Number: 7622707 Date: 4/29/2015

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

Outdoor Unit Model Number: XC16S048-230-04

Indoor Unit Model Number: CBX25UHV-048-230-*

Manufacturer: LENNOX INDUSTRIES, INC.

Trade/Brand name: ELITE

Series name: XC16 SERIES

Manufacturer responsible for the rating of this system combination is LENNOX INDUSTRIES, INC.

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

Cooling Capacity (Btuh):	47000
EER Rating (Cooling):	12.00
SEER Rating (Cooling):	16.00
IEER Rating (Cooling):	

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

CERTIFICATE NO.: 130747823529405716

STANDARD CONSTRUCTION

MATERIAL:
14 GAUGE/G-90 ASTM A-653 COLD-ROLLED GALVANIZED STEEL

STANDARD SIZES:

TYPE	BASE DEPTH	WIDTH	HEIGHT	PACK QTY.
CUTD4	1.25"	1"	4"	4 PKG.
CUTD4-B	1.25"	1"	4"	BULK
CUTD6	1.25"	1"	6"	4 PKG.
CUTD6-B	1.25"	1"	6"	BULK
CUTD8-B	1.25"	1"	8"	BULK
CUTD11-B	1.25"	1"	11"	BULK
CUTD14-B	1.25"	1"	14"	BULK
CUTD18-B	1.25"	1"	18"	BULK

FEATURES

GALVANIZED STEEL PROVIDES EXCELLENT CORROSION RESISTANCE AND LONGEVITY.

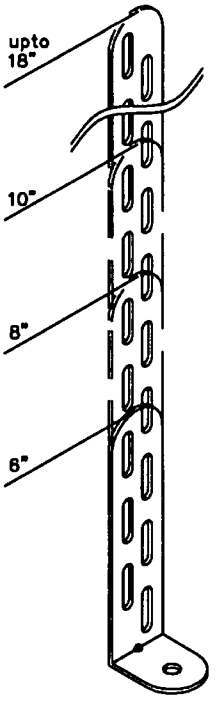
SLATTED DESIGN PROVIDES A UNIVERSAL MOUNT.

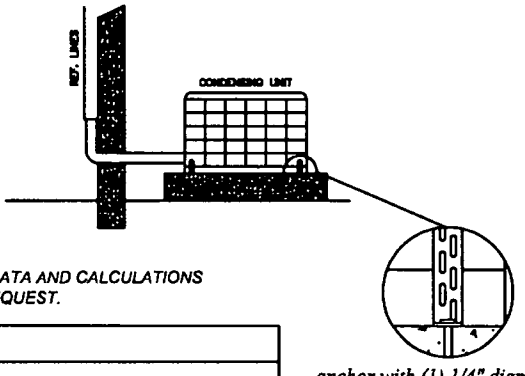
AVAILABLE IN PEG BOARD DISPLAY PACKAGES (4 PER PACKAGE) UPTO 6".

BULK PACKAGING AVAILABLE FOR ALL SIZES.

AVAILABLE IN ALUMINUM FOR EVEN GREATER CORROSION RESISTANCE (MODEL CUTDAX)

SINGLE HOLE DESIGN





NOTE: *ENGINEERING DATA AND CALCULATIONS AVAILABLE UPON REQUEST.*

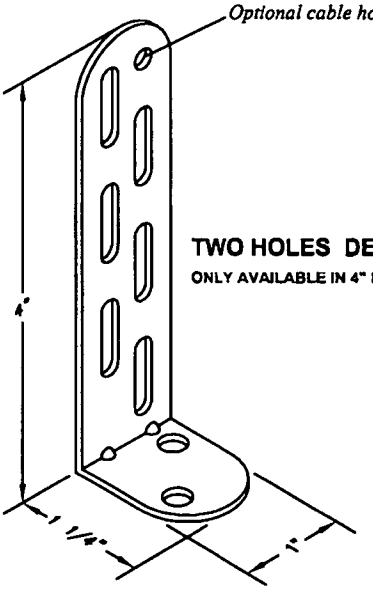
JOB NAME:
LOCATION:
ARCHITECT:
ENGINEER:
CONTRACTOR:

CONTACT MIAMI TECH INC. FOR ADDITIONAL INFORMATION OR WITH SPECIAL REQUIREMENTS.

3611 NW 74TH ST
MIAMI, FL 33147
PHONE: 305-693-7054 FAX: 305-693-6152

WEB: WWW.MIAMITECH.COM
EMAIL: SALES@MIAMITECH.COM

anchor with (1) 1/4" diameter ITW Buildex (or equivalent) carbon steel Tapcon embedded 1-3/4" minimum into 3,000 psi concrete with 2-1/2" minimum edge distance.



TWO HOLES DESIGN
ONLY AVAILABLE IN 4" HEIGHT

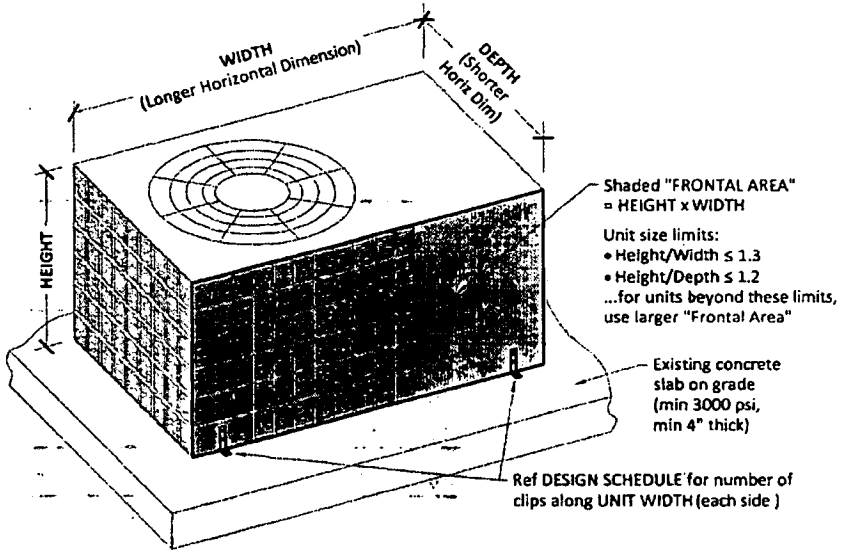
CUTD

CONDENSING UNIT TIE DOWN
PRODUCT SPECIFICATIONS

NOTE: ALL DRAWINGS SUBJECT TO CHANGE WITHOUT PRIOR NOTICE.

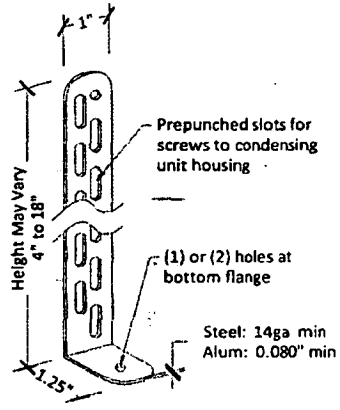
miami tech inc.

DRAWN BY: AF	DATE: 06-01-2009	SCALE: NOT TO SCALE	DRAWING NO. CUTD
CHECKED BY: IV	DATE: 06-30-2010	REVISION: IG	



1 / 1 Central A/C System Condensing Unit Tie-Down Clip Diagram

Scale: 3/8" = 1'-0" Isometric



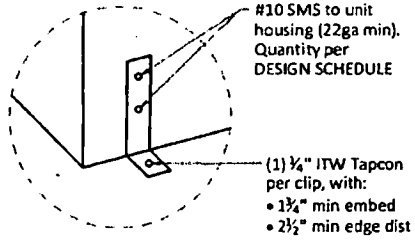
2 / 1 Tie-Down Clip

Scale: 3" = 1'-0" Isometric

DESIGN SCHEDULE:

Schedule gives minimum number of tie-down clips required along each side of condensing unit - see diagram.

	CENTRAL A/C SYSTEM CONDENSING UNITS															
	120 mph Exp 'C' + 'D' 24.7 psf		130 mph Exp 'C' + 'D' 29.0 psf		140 mph Exp 'C' + 'D' 33.6 psf		150 mph Exp 'C' + 'D' 38.6 psf		156 mph Exp 'C' + 'D' 41.7 psf		160 mph Exp 'C' + 'D' 43.9 psf		165 mph Exp 'C' + 'D' 46.7 psf		170 mph Exp 'C' + 'D' 49.6 psf	
Frontal Area Up To:	#10 SMS per Clip: (1)	(2)	#10 SMS per Clip: (1)	(2)	#10 SMS per Clip: (1)	(2)	#10 SMS per Clip: (1)	(2)	#10 SMS per Clip: (1)	(2)	#10 SMS per Clip: (1)	(2)	#10 SMS per Clip: (1)	(2)	#10 SMS per Clip: (1)	(2)
8 ft²	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
10 ft²	2	2	2	2	2	2	2	2	2	2	2	2	2	2	3	2
12 ft²	2	2	2	2	2	2	2	2	3	2	3	2	3	2	3	2
16 ft²	2	2	2	2	3	2	3	2	3	2	3	2	4	2	4	3
20 ft²	3	2	3	2	3	2	4	3	4	3	4	3	4	3	5	3
25 ft²	3	2	4	2	4	3	5	3	5	3	5	3	5	4	6	4
30 ft²	4	2	4	3	5	3	5	4	6	4	6	4	6	4	7	4
35 ft²	4	3	5	3	5	4	6	4	7	4	7	5	7	5	8	5
40 ft²	5	3	5	4	6	4	7	5	8	5	8	5	8	5	9	6



3 / 1 Clip Fastener Detail

Scale: 1½" = 1'-0" Isometric

DESIGN NOTES:

Wind loads per ASCE 7-10 for solid freestanding structures at grade:
ASD Loads coeff = 0.6
Wind Speed & Exposure as noted in design schedules.
Condensing unit height: 15 ft max above grade
Kzt=1.0, Kd=0.85, G=0.85
Cf=1.55 (H/W ratio ≤ 1.3)

GENERAL NOTES:

1. Design is in accordance with the requirements of the 2010 Florida Building Code for use within & outside the High Velocity Hurricane Zone (HVHZ).
2. This engineering certifies only the structural integrity of those systems, components, and/or other construction explicitly specified herein.
3. The existing host structure must be capable of supporting the loaded system as verified by building department or architect / engineer of record. No warranty, either expressed or implied, is contained herein.
4. Systems shall be as noted herein. All references to components, extrusions, & other installation criteria shall conform to that of applicable product approval &/or mfr's specs.
5. Where site conditions deviate from those shown in this plan, revisions may be required or a separate site-specific engineering evaluation performed.
6. Engineer seal affixed hereto validates structural design as shown only. Use of this specification by contractor, et. al. indemnifies & saves harmless this engineer for all costs & damages including legal fees & appellate fees resulting from deviations from this plan.
7. Any modifications or additions to this document will invalidate engineer's certification.
8. Except as expressly provided herein, no additional certifications or affirmations are intended.

Easy Seals
easyseals.com

Certification valid for one (1) year as evidenced by my signature and seal below.
Date: [illegible] 20[illegible]
CHRISTIAN LANGLEY, PE
FL PE #67382 CA#29531

TIE-DOWN CLIPS FOR CENTRAL A/C SYSTEM CONDENSING UNITS ON GRADE

- 14ga Steel - 0.080" Aluminum

Drawing No.
E10TD1

AIR CONDITIONERS

XC16

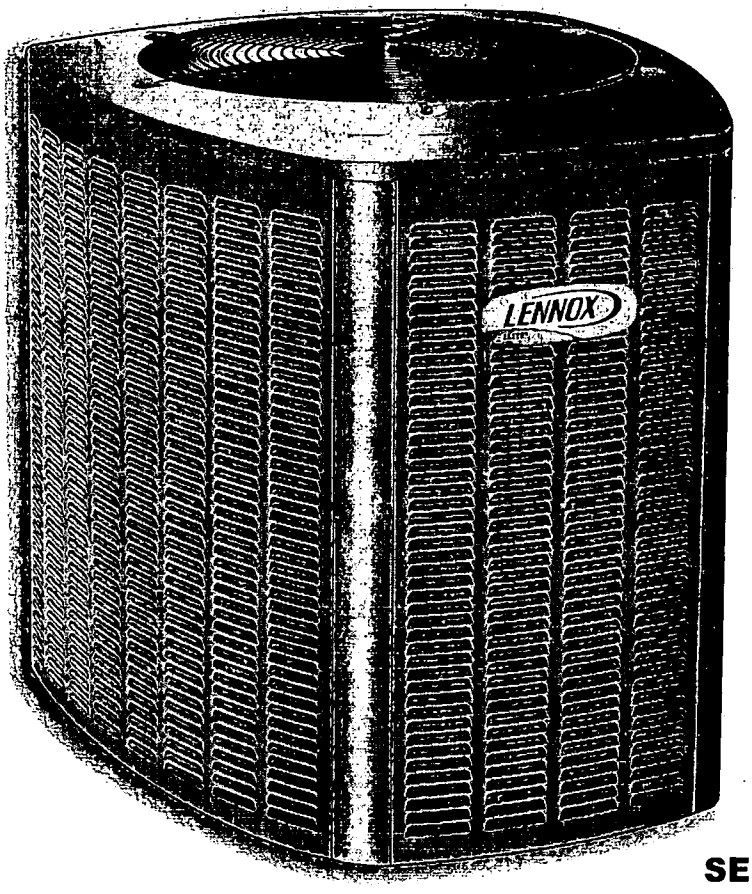
ELITE® Series

R-410A - Two-Stage Compressor

PRODUCT SPECIFICATIONS

Bulletin No. 210743
April 2015
Supersedes January 2015

ELITE® SERIES



SEER up to 17.00
2 to 5 Tons
Cooling Capacity - 23,400 to 57,500 Btuh

MODEL NUMBER INDENTIFICATION

X C 16 – 036 - 230 - 5

- **Refrigerant Type**
  X = R-410A
- **Unit Type**
  C = Air Conditioner
- **Series**
- **Regional Standards**
  – (dash) = All Regions
  S = North and South Regions
- **Nominal Cooling Capacity**
  024 = 2 tons
  036 = 3 tons
  048 = 4 tons
  060 = 5 tons
- **Voltage**
  230 = 208/230V-1phase-60hz
- **Minor Revision Number**

SPECIFICATIONS

General Data	Model No. All Regions	XC16-024	XC16-036	XC16-048	XC16-060
	North / South Regions	XC16S024	XC16S036	XC16S048	XC16S060
	Nominal Tonnage	2	3	4	5
Connections (sweat)	Liquid line (o.d.) - in.	3/8	3/8	3/8	3/8
	Suction line (o.d.) - in.	3/4	7/8	7/8	1-1/8
Refrigerant	[1] R-410A charge furnished	7 lbs. 5 oz.	8 lbs. 6 oz.	10 lbs. 7 oz.	12 lbs. 1 oz.
Outdoor Coil	Net face area - sq. ft. Outer coil	24.50	16.33	21.00	29.09
	Inner coil	---	15.76	20.27	28.24
	Tube diameter - in.	5/16	5/16	5/16	5/16
	No. of rows	1	2	2	2
	Fins per inch	26	22	22	22
Outdoor Fan	Diameter - in.	22	22	22	26
	No. of blades	4	4	4	3
	Motor hp	1/6	1/4	1/3	1/3
	Cfm - 1st stage	3260	3500	3190	4325
	2nd stage	---	---	3700	---
	Rpm - 1st stage	840	825	705	865
	2nd stage	---	---	820	---
	Watts - 1st stage	220	300	165	240
	2nd stage	---	---	260	---
Shipping Data - lbs. 1 pkg.		249	243	268	332

ELECTRICAL DATA

Line voltage data - 60hz		[4] 230V-1ph	[4] 230V-1ph	[4] 230V-1ph	[4] 230V-1ph
[2] Maximum overcurrent protection (amps)		25	35	50	60
[3] Minimum circuit ampacity		15.7	20.8	29.2	35.6
Compressor	Rated load amps	11.66	15.25	21.15	27.1
	Locked rotor amps	58.3	83	104	152.9
	Power factor	0.98	0.99	0.99	0.99
Outdoor Fan Motor	Full load amps	1.0	1.7	2.8	1.8
	Locked Rotor amps	1.9	3.1	N/A	2.9

OPTIONAL ACCESSORIES - ORDER SEPARATELY

Blower Relay Kit (for EL195E and ML180E gas furnaces)	85W66	•	•	•	•
ComfortSense® 7000 Thermostat	Y2081	•	•	•	•
Outdoor Temperature Sensor - for ComfortSense 7000 Thermostat	X2658	•	•	•	•
Compressor Crankcase Heater	93M04	•	•		
	Factory			•	•
Compressor Hard Start Kit - Required in applications with less than 230V	63W22	•			
	10J42		•	•	
	63W24				•
Compressor Low Ambient Cut-Off Switch	45F08	•	•	•	•
Compressor Time-Off Control	47J27	•	•	•	•
Freezestat 3/8 in. tubing	93G35	•	•	•	•
5/8 in. tubing	50A93	•	•	•	•
Indoor Blower Off Delay Relay	58M81	•	•	•	•
Indoor Blower Speed Relay	40K58	•	•	•	•
[5] Low Ambient Kit (Fan Cycling)	34M72	•	•		•
	68M04			•	
Refrigerant Line Sets L15-41-20	L15-41-40	•			
L15-41-30	L15-41-50				
L15-65-30	L15-65-40		•	•	
	L15-65-50				
	Field Fabricate				•

NOTE - Extremes of operating range are plus 10% and minus 5% of line voltage.

[1] Refrigerant charge sufficient for 15 ft. length of refrigerant lines. For longer line set requirements see the Installation Instructions for information about line set length and additional refrigerant charge required.

[2] HACR type breaker or fuse.

[3] Refer to National or Canadian Electrical Code manual to determine wire, fuse and disconnect size requirements.

[4] Hard Start Kit is required in applications where the supply voltage is less than 230V.

[5] Crankcase Heater (if not furnished) and Freezestat are recommended with Low Ambient Kit.

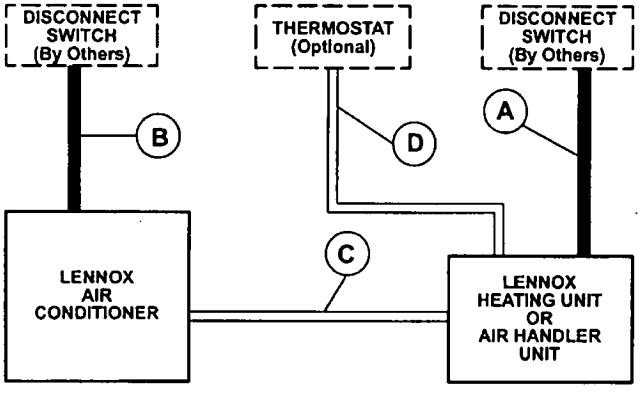
OUTDOOR SOUND DATA

[1] Unit Model	Octave Band Linear Sound Power Levels dB, re 10^{-12} Watts Center Frequency - HZ								[1]Sound Rating Number (dB)
	63	125	250	500	1000	2000	4000	8000	
024	77.5	66.6	65.5	66.4	62.7	57.9	55.1	55.5	73
036	77.8	70.6	67.9	66.7	63.1	57.5	54.7	55.4	74
048	74.6	64.7	64.1	65.8	65.2	60.3	56.1	53.7	74
060	72.6	68.9	67	66.4	67.4	58.9	57.3	52.5	74

NOTE - the octave sound power data does not include tonal correction.

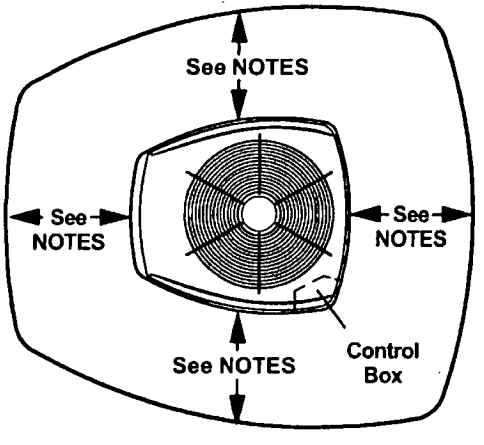
[1] Tested according to AHRI Standard 270-2008 test conditions.

FIELD WIRING



A - Two Wire Power (not furnished)
B - Two Power (not furnished). See Electrical Data
C - Four Wire Low Voltage (not furnished). 18 ga. minimum
D - Six Wire Low Voltage (not furnished). 18 ga. minimum
All wiring must conform to NEC or CEC and local electrical codes.

INSTALLATION CLEARANCES - INCHES (MM)



NOTES:

Service clearance of 30 in. (762 mm) must be maintained on one of the sides adjacent to the control box.

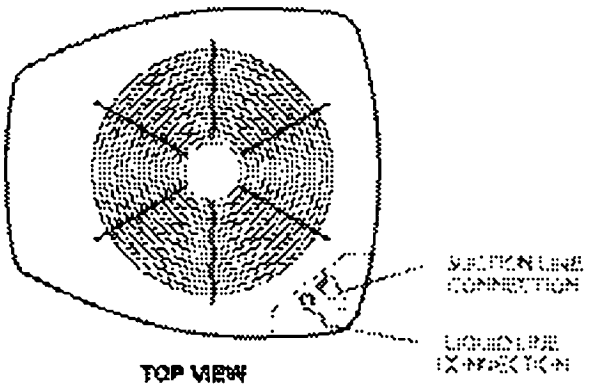
Clearance to one of the other three sides must be 36 in. (914 mm)

Clearance to one of the remaining two sides may be 12 in. (305 mm) and the final side may be 6 in. (152 mm).

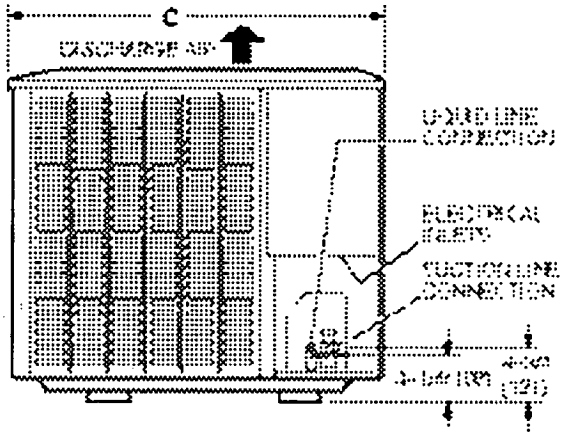
A clearance of 24 in. (610 mm) must be maintained between two units.

48 in. (1219 mm) clearance required on top of unit.

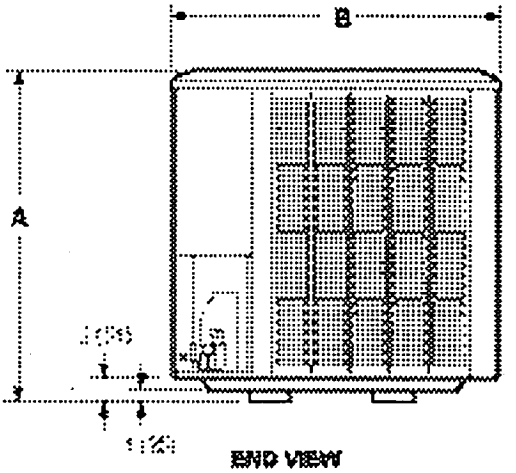
DIMENSIONS - INCHES (MM)



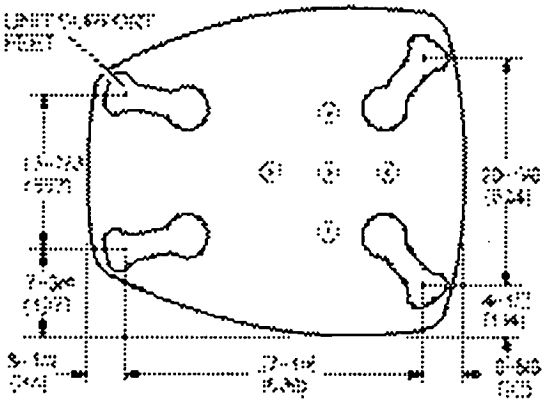
TOP VIEW



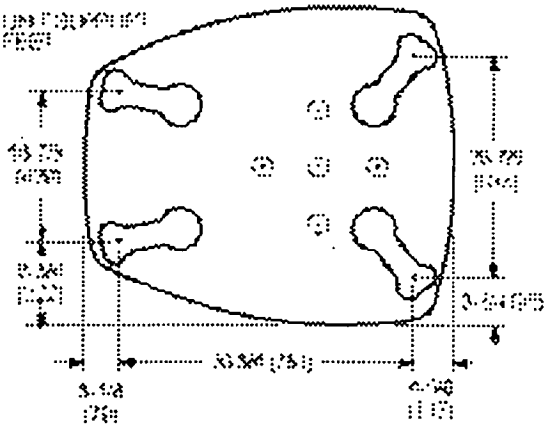
SIDE VIEW



END VIEW



024 TO 048 BASE SECTION
(Medium)



060 BASE SECTION
(Large)

Model	A		B		C	
	in.	mm	in.	mm	in.	mm
024	45	1143	30-1/2	775	35	889
036	31	787	30-1/2	775	35	889
048	39	991	30-1/2	775	35	889
060	45	1143	35-1/2	902	39-1/2	1003

AHRI SYSTEM MATCHES - NORTH / SOUTH REGIONS

NOTE - For the latest up-to-date system matches please visit the AHRI web site at http://www.ahridirectory.org

Model No.	Expansion Device	Capacity	SEER	EER	Coil or Air Handler	Furnace	AHRI Reference
XC16S048-230	TXV	47,000	16.00	12.00	C33-62D	SLP98UH135XV60D	7622243
XC16S048-230	TXV	47,000	16.00	12.00	CBX25UHV-048		7622707
XC16S048-230	TXV	47,000	14.00	12.00	CBX32M-060		7621927
XC16S048-230	TXV	47,000	16.00	12.00	CBX32MV-060		7621930
XC16S048-230	TXV	47,000	16.00	12.00	CBX32MV-068		7621932
XC16S048-230	TXV	47,000	15.50	12.00	CH35-42B	SL280UH090V48B	7624294
XC16S048-230	TXV	47,000	15.50	12.00	CH35-42B	SL280UH090XV48B	7624296
XC16S048-230	TXV	47,000	15.50	11.70	CH35-51C	EL195UH110XE60C	7624353
XC16S048-230	TXV	47,000	16.00	12.00	CH35-60D	EL296UH135XV60D	7624358
XC16S048-230	TXV	47,000	16.00	12.00	CX34-49	SL280UH090V60C	7622143
XC16S048-230	TXV	47,000	14.50	11.70	CX34-62C		7621892
XC16S048-230	TXV	47,000	16.00	12.50	CX34-62C	EL180UH090E60C	7622312
XC16S048-230	TXV	47,000	16.00	12.50	CX34-62C	EL180UH110E60C	7622317
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	EL195UH090XE48C	7622202
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	EL195UH110XE60C	7622206
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	EL296UH090XE48C	7622318
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	EL296UH090XV48C	7622209
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	EL296UH090XV60C	7622212
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	EL296UH110XE60C	7622323
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	EL296UH110XV48C	7622215
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	SL280UH090XV60C	7622325
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	SL280UH110V60C	7622222
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	SL280UH110XV60C	7622329
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	SLO185B124/141V60	7622837
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	SLO185UF124/141V60	7622842
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	SLP98UH090XV48C	7622225
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62C	SLP98UH090XV60C	7622228
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62D	EL296UH135XV60D	7622235
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62D	SL280UH135V60D	7622238
XC16S048-230	TXV	47,000	16.00	12.00	CX34-62D	SLP98UH135XV60D	7622241
XC16S048-230	TXV	47,500	16.00	12.00	C33-62C	EL296UH110XV60C	7622220
XC16S048-230	TXV	47,500	16.00	12.00	C33-62C	SL280UH090V60C	7621918
XC16S048-230	TXV	47,500	16.00	12.00	C33-62C	SLP98UH110XV60C	7622233
XC16S048-230	TXV	47,500	16.00	12.00	CX34-62C	EL296UH110XV60C	7622218
XC16S048-230	TXV	47,500	16.50	12.20	CX34-62C	SL280UH090V60C	7621915
XC16S048-230	TXV	47,500	16.00	12.00	CX34-62C	SLP98UH110XV60C	7622231
XC16S060-230	TXV	54,000	14.50	11.00	C33-50/60C	CBWMV-60C-120	7621735
XC16S060-230	TXV	54,000	14.50	11.00	CH23-65	EL180UH090E60C	7621787
XC16S060-230	TXV	54,000	14.50	11.00	CH23-65	EL180UH110E60C	7621788
XC16S060-230	TXV	54,000	14.50	11.00	CH23-65	EL195UH110XE60C	7621587
XC16S060-230	TXV	54,000	14.50	11.00	CH23-65	EL296UH090XV60C	7621589
XC16S060-230	TXV	54,000	14.50	11.00	CH23-65	EL296UH110XE60C	7621790
XC16S060-230	TXV	54,000	14.50	11.00	CH23-65	EL296UH110XV60C	7621591
XC16S060-230	TXV	54,000	14.50	11.00	CH23-65	SL280UH110XV60C	7621596
XC16S060-230	TXV	54,000	14.50	11.00	CH23-65	SLP98UH090XV60C	7621599
XC16S060-230	TXV	54,000	14.50	11.00	CH23-65	SLP98UH110XV60C	7621601
XC16S060-230	TXV	54,000	14.50	11.00	CR33-50/60	SLP98DF090XV60C	7621809

Ratings AHRI Certified to AHRI Standard 210/240 (with 25 ft. of connecting refrigerant lines); 95°F outdoor air temperature, 80°F db / 67°F wb entering evaporator air.

All ratings include the use of a blower time delay relay (TDR). All Lennox variable-speed furnaces and Air Handlers have time delay capabilities. Other Furnaces and Air Handlers may require an optional time delay relay (**58M81**) for field installation. See furnace or air handler specifications to determine if relay is needed.

Also see Expansion Valve Kit Usage Table.

AIR HANDLERS

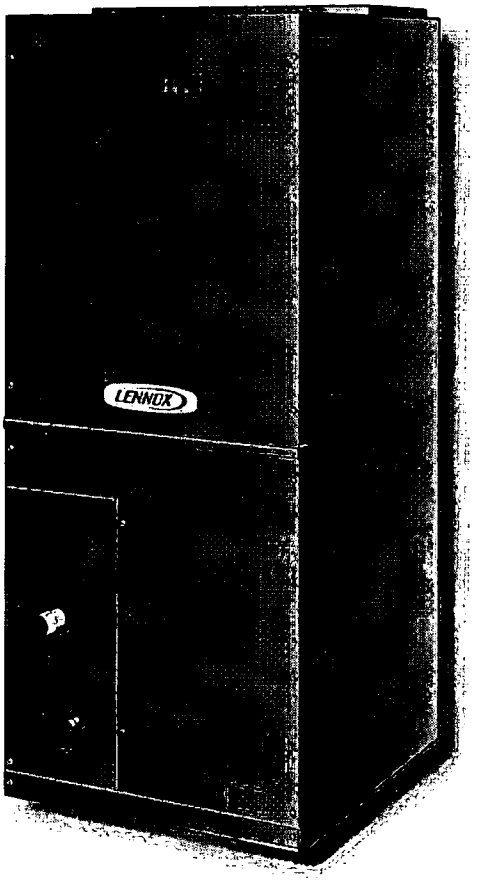
CBX25UHV

MERIT® Series

R-410A - Upflow / Horizontal - Variable Speed

PRODUCT SPECIFICATIONS

Bulletin No. 210611
March 2015
Supersedes November 2014



Nominal Capacity - 1.5 to 5 Tons
Optional Electric Heat - 2.5 to 20 kW

MODEL NUMBER IDENTIFICATION

CB X 25 UH V - 030 - 230 - 01

- **Unit Type**: CB = Air Handler
- **Refrigerant Type**: X = R-410A
- **Series**: 25
- **Configuration**: UH = Upflow/Horizontal
- **Blower Motor**: V = Variable Speed
- **Nominal Cooling Capacity**: 030
  - 018 = 1.5 tons
  - 024 = 2 tons
  - 030 = 2.5 tons
  - 036 = 3 tons
  - 042 = 3.5 tons
  - 048 = 4 tons
  - 060 = 5 tons
- **Voltage**: 230 = 208/230V-1 phase-60hz
- **Minor Revision Number**: 01

BLOWER DATA

CBX25UHV-048 BLOWER PERFORMANCE

0 through 0.80 in. w.g. External Static Pressure Range

"ADJUST" Jumper Setting	Jumper Speed Positions											
	"HEAT" Speed				First Stage "COOL" Speed				Second Stage "COOL" Speed			
	1	2	3	4	1	2	3	4	1	2	3	4
	cfm	cfm	cfm	cfm	cfm	cfm	cfm	cfm	cfm	cfm	cfm	cfm
+	1450	1670	1880	2340	1050	1200	1340	1650	1440	1670	1950	2340
NORM	1340	1520	1730	2100	950	1100	1230	1520	1325	1530	1740	2150
–	1210	1390	1570	1915	850	1000	1110	1375	1200	1380	1600	1950

NOTES - The effect of static pressure, filter and electric heater resistance is included in the air volumes listed.
First stage cooling air volume is 70% of COOL speed setting. Continuous blower speed is approximately 50% of COOL speed setting.
Lennox Harmony III™ Zoning System applications - minimum blower speed is 450 cfm.

CBX25UHV-048 BLOWER MOTOR WATTS

AT "+" (Plus) SETTING ("Adjust" Jumper at "+" Setting)

Jumper Speed Positions		Motor Watts @ Various External Static Pressures - in. wg.							
		0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8
"HEAT" Speed	Tap 1	196	222	269	295	334	363	386	429
	Tap 2	282	317	373	403	440	486	512	545
	Tap 3	409	442	484	528	582	619	661	714
	Tap 4	824	851	891	936	1,024	980	1,000	993
First Stage "COOL" Speed	Tap 1	91	116	146	166	189	213	243	267
	Tap 2	110	148	173	205	232	261	280	309
	Tap 3	160	201	227	253	286	316	348	374
	Tap 4	270	314	358	397	440	476	516	536
Second Stage "COOL" Speed	Tap 1	200	231	265	298	337	354	383	425
	Tap 2	293	333	380	421	448	487	519	560
	Tap 3	403	441	489	546	589	639	678	717
	Tap 4	778	806	896	943	1,000	999	981	986

AT "NORM" SETTING ("Adjust" Jumper at NORM Setting)

Jumper Speed Positions		Motor Watts @ Various External Static Pressures - in. wg.							
		0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8
"HEAT" Speed	Tap 1	151	185	215	251	283	316	347	369
	Tap 2	219	258	300	328	371	407	439	473
	Tap 3	315	360	414	450	489	523	562	607
	Tap 4	572	604	690	732	774	826	856	913
First Stage "COOL" Speed	Tap 1	76	99	121	139	165	199	221	243
	Tap 2	106	124	150	172	199	226	255	279
	Tap 3	125	162	195	222	255	281	306	330
	Tap 4	223	247	299	317	353	390	430	458
Second Stage "COOL" Speed	Tap 1	147	188	222	250	281	309	340	367
	Tap 2	224	274	306	347	374	415	441	482
	Tap 3	301	347	399	443	470	525	550	597
	Tap 4	581	629	678	742	795	843	900	959

AT "–" (Minus) SETTING ("Adjust" Jumper at "–" Setting)

Jumper Speed Positions		Motor Watts @ Various External Static Pressures - in. wg.							
		0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8
"HEAT" Speed	Tap 1	115	154	183	209	230	264	283	318
	Tap 2	170	210	238	269	307	340	363	397
	Tap 3	238	282	321	352	394	416	455	496
	Tap 4	416	469	522	569	609	648	695	741
First Stage "COOL" Speed	Tap 1	58	82	101	126	144	168	196	231
	Tap 2	80	110	139	151	178	201	225	258
	Tap 3	99	129	154	180	205	227	258	290
	Tap 4	179	218	248	284	308	349	377	394
Second Stage "COOL" Speed	Tap 1	115	153	178	204	234	258	285	306
	Tap 2	175	214	244	271	310	340	370	398
	Tap 3	244	285	338	372	408	429	467	501
	Tap 4	421	461	520	563	619	665	700	748

ELECTRIC HEAT DATA

SINGLE PHASE — CBX25UHV-048 CBX25UHV-060

Description	Input			Blower Motor Full Load Amps	[2] Minimum Circuit Ampacity		[3] Maximum Overcurrent Protection		Single Point Power Source	
	Volt	kW	[1] Btuh		Ckt 1	Ckt 2	Ckt 1	Ckt 2	[2] Minimum Circuit Ampacity	[3] Maximum Overcurrent Protection
5 kW ECB25-5 (**12R45**) Terminal Block ECB25-5CB (**12R60**) 30A Circuit Breaker	208	3.8	12,800	6.9	31	---	[4] **35**	---	---	---
	220	4.2	14,300	6.9	32	---	[4] **35**	---	---	---
	230	4.6	15,700	6.9	34	---	[4] **35**	---	---	---
	240	5.0	17,100	6.9	35	---	[4] **35**	---	---	---
7.5 kW ECB25-7.5 (**12R61**) Terminal Block ECB25-7.5CB (**12S08**) 45A Circuit Breaker	208	5.6	19,200	6.9	42	---	45	---	---	---
	220	6.3	21,500	6.9	44	---	45	---	---	---
	230	6.9	23,500	6.9	46	---	[4] **50**	---	---	---
	240	7.5	25,600	6.9	48	---	[4] **50**	---	---	---
10 kW ECB25-10 (**10Z43**) Terminal Block ECB25-10CB (**10T37**) 60A Circuit Breaker	208	6.8	23,000	6.9	49	---	[4] **50**	---	---	---
	220	7.6	25,800	6.9	52	---	60	---	---	---
	230	8.3	28,200	6.9	54	---	60	---	---	---
	240	9.0	30,700	6.9	56	---	60	---	---	---
12.5 kW ECB25-12.5CB (**12S77**) (1) 50A and (1) 25A Circuit Breaker	208	9.4	32,000	6.9	46	23	50	25	69	70
	220	10.5	35,800	6.9	48	24	50	25	72	80
	230	11.5	39,200	6.9	50	25	50	25	75	80
	240	12.5	42,600	6.9	52	26	[4] **60**	[4] **30**	78	80
15 kW ECB25-15CB (**12S87**) (1) 60A and (1) 30A Circuit Breaker	208	11.3	38,400	6.9	31	45	[4] **35**	[4] **50**	76	80
	220	12.6	43,000	6.9	32	48	[4] **35**	[4] **50**	80	80
	230	13.5	47,000	6.9	34	50	[4] **35**	[4] **50**	84	90
	240	15.0	51,200	6.9	35	52	[4] **35**	60	87	90
20 kW ECB25-20CB (**10T35**) (1) 60A and (1) 60A Circuit Breaker	208	15.0	51,200	6.9	50	49	[4] **50**	[4] **50**	99	100
	220	16.8	57,300	6.9	53	52	60	60	104	110
	230	18.4	62,700	6.9	55	54	60	60	109	110
	240	20.0	68,200	6.9	57	56	60	60	113	125

NOTE - Circuit 1 Minimum Circuit Ampacity includes the Blower Motor Full Load Amps.

[1] Electric heater capacity only - does not include additional blower motor heat capacity.

[2] Refer to National or Canadian Electrical Code manual to determine wire, fuse and disconnect size requirements. Use wires suitable for at least 167°F.

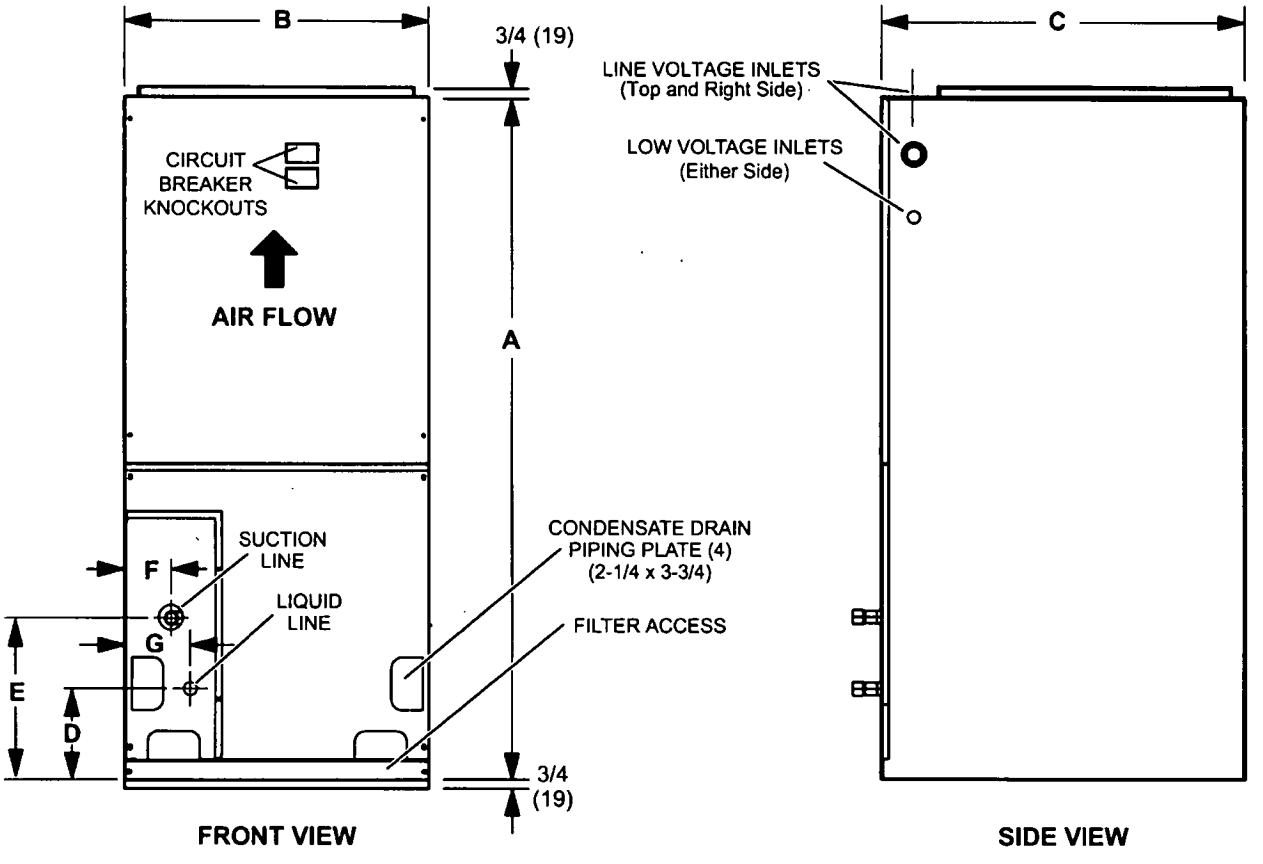
[3] HACR type breaker or fuse.

[4] **Bold indicates that the circuit breaker on "CB" circuit breaker models must be replaced with size shown. See table on page 17.**

REPLACEMENT CIRCUIT BREAKERS

Voltage	Description	Catalog No.
208/240V - 1 Phase	25 amp, 2 pole	**41K13**
	30 amp, 2 pole	**17K70**
	35 amp, 2 pole	**72K07**
	40 amp, 2 pole	**49K14**
	45 amp, 2 pole	**17K71**
	50 amp, 2 pole	**41K12**
	60 amp, 2 pole	**17K72**

DIMENSIONS - UNIT - UPFLOW - INCHES (MM)



NOTE - Not available for downflow applications.

Dimension		018		024		030		036		042		048 060	
		in.	mm	in.	mm	in.	mm	in.	mm	in.	mm	in.	mm
A		38	965	40-1/2	1029	43	1092	48	1219	48	1219	52 1/2	1334
B		15	381	18-1/2	470	18-1/2	470	21-7/8	556	21-7/8	556	21 7/8	556
C		22	559	22	559	22	559	22	559	26	660	26	660
D		6	152	6	152	6	152	12-1/4	311	6-1/4	159	6 3/8	162
E		11	279	14	357	16	406	18-7/8	479	17-7/8	454	15 1/4	387
F		3-5/8	92	5-1/2	140	5-1/2	140	5-3/4	146	3-1/4	83	3 1/4	83
G		3-5/8	92	5-1/2	140	5-1/2	140	5-3/4	146	4-5/8	117	6 3/8	162
Supply Air Opening	Depth	17	432	17	432	17	432	17	432	21	533	21	533
	Width	13	330	16-1/2	419	16-1/2	419	19-7/8	505	19-7/8	505	19 7/8	505
Return Air Opening	Depth	20-3/4	527	20-3/4	527	20-3/4	527	20-3/4	527	24-3/4	629	24 3/4	629
	Width	12-1/2	318	16	406	16	406	19-3/8	492	19-3/8	492	19 3/8	492

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit #_____

* See below Date Issued_____

This application shall include a written statement giving reasons for removal, relocation or replacement and a site plan which shall include the dimensional location on a survey, scale drawing, or aerial photograph, superimposed with lot lines to scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.

Owner Thomas & Deirdre Lucido Address 7 Quail Run Ln Phone 561-220-2100

Contractor_____ Address_____ Phone_____

Number of trees to be removed(list kinds of trees): Approx. 10 oak, 3 Cabbage Palm, 1 mango, 3 Hickory, and accompanying underbrush

Number of trees to be relocated within 30 days(no fee)(list kinds of trees):

Number of trees to be replaced (list kinds of trees):

Permit Fee $ 100 ($25.00 - first tree plus $10.00 - each additional tree - not to exceed $100.00.

(No permit fee for trees which are relocated on property or lie within a utility easement & are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property.)

Plans approved as submitted_____ Plans approved as marked_____

Permit good for one year. Fee for renewal of expired permit is $5.00

Signature of applicant Lucido Date submitted 7/27/98

Approved by Building Inspector Bob Bott Date 7-29-98

Approved by Building Commissioner_____ Date_____

Completed_____ Checked by
Date

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

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

* The reason for the tree removal permit is to create an area large enough to build a new home at 2 Sabal Ct.