

# 6 Sable Court

**1383**

**SFR**

#1383

TOWN OF SEWALL'S POINT FLORIDA

1383  
Date 7-24-81

Permit No. \_\_\_\_\_

APPLICATION FOR A PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

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

Owner PHILIP B. STEWART Present address ~~DRAWER E A SEWALL FL~~

Phone \_\_\_\_\_

General contractor SYLVESTER CONST. INC Address DRAWER E, PT. SALERNO, FL

Phone 283-2200

Where licensed MARTIN Co. License No. 66

Plumbing contractor LINDSEY License No. 9

Electrical contractor KENS BEST ELECT. INC License No. .00006

Air-conditioning contractor A.A. Alii Conditioning License No. .00448

Describe the building, or alteration to existing building  
RESIDENCE

Name the street on which the building, its front building line and its front yard will face  
# 6 SABLE COURT

Subdivision RIDGELAND Lot No. 6 Area \_\_\_\_\_

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet 2284

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 150,000<sup>00</sup>

Cost of permit \$ 750430<sup>00</sup> = 780 Plans approved as submitted \_\_\_\_\_ or, as marked \_\_\_\_\_

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

Contractor [Signature]

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

Owner see attached yellow sheet

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

TOWN RECORD Date submitted \_\_\_\_\_

Approved by Building Inspector (date) 7/30/81 Inspector's initials [Signature]

Approved by Town Commissioner (date) 8/4/81 Commissioner's initials [Signature]

Certificate of Occupancy issued (date) 1/27/82

SP/1-79 #1383

TOWN OF SEWALL'S POINT, FLORIDA

Permit No. \_\_\_\_\_ Date \_\_\_\_\_

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

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

Owner WALTER B. SEWALL Present address \_\_\_\_\_  
Phone \_\_\_\_\_

Contractor WALTER COURT JR. Address Walter B. Sewall's  
Phone 283-2200

Where licensed Alma Co. License number 66

Electrical contractor Walter Court Jr. License number 00006

Plumbing contractor Walter Court Jr. License number 9

Describe the structure or addition or alteration to an existing structure, for which this permit is sought. NEED PERMIT FOR

SARL COVE  
State the street address at which the proposed structure will be built \_\_\_\_\_

Subdivision RIDE LANE Lot No. 6

Contract price 5000 Cost of Permit \$ \_\_\_\_\_

Plans approved as submitted \_\_\_\_\_ Plans approved as marked \_\_\_\_\_

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

Contractor Walter Court Jr.

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

Owner Walter Sewall Date submitted \_\_\_\_\_  
TOWN RECORD

Approved: \_\_\_\_\_ Date \_\_\_\_\_  
Building Inspector

Approved: \_\_\_\_\_ Date \_\_\_\_\_  
Commissioner

Final Approval given \_\_\_\_\_ Date \_\_\_\_\_

Certificate of Occupancy issued \_\_\_\_\_ Date \_\_\_\_\_

**STATE OF FLORIDA  
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES**

**APPLICATION FOR SEPTIC TANK PERMIT  
AND FINAL INSPECTION FORM**

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

Authority  
Chapter 381, 386, 387 FS  
Chapter 10D-6, FAC

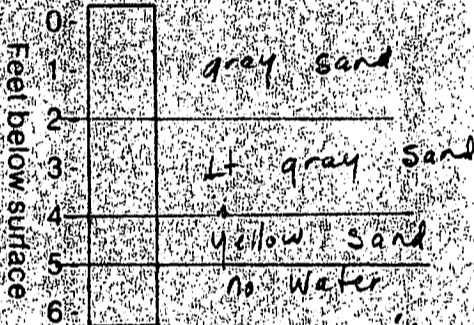
Permit Number HDBI-526

Name of Applicant Philip B. Stewart Telephone 253 2200  
Mailing Address of Applicant Drawer "E" Port Salerno, FL 33492  
To be Installed at (Give Street Address) Phipps Court  
Lot 6 Block — Subdivision Ridgeland  
Plat Book & Page 8-3 Date Recorded 1979  
Residential: No. Living Units 1 Number of Bedrooms 2  
Commercial: Type of Business \_\_\_\_\_ Number of People \_\_\_\_\_ Number of Toilets \_\_\_\_\_  
\*Note: Attach site location map and other supportive documents.  
Signature of Applicant Philip B. Stewart

**SITE INFORMATION**

Is there a private well within 75 ft. of the proposed septic system? NO  
Is there a public well within 100 ft. of the proposed septic system? NO  
Is there a public sewer within 100 ft. of the proposed lot? NO  
Is there a lake, stream, canal or other body of water within 50 ft. of the proposed septic system? NO  
Is there a septic system or other interference within 75 ft. of the proposed private well? NO  
Is the proposed or existing public water line within 10 ft. of the proposed septic system? NO  
There is 600 square feet of unobstructed land for future expansion of the drainfield.

**SOIL PROFILE AND PERCOLATION DATA**



Water table 5'  
Wet season water table 5'  
Compacted fill of \_\_\_\_\_ required.  
Compacted fill check by \_\_\_\_\_  
Date \_\_\_\_\_

Certified by W.L. Williams  
Florida Professional Number 1272  
Date 7-24-81 Job Number \_\_\_\_\_  
Percolation Rate 30 Minutes/Inch  
Soil Identification: SEC  
Class 1 Group SP

**INSTALLATION SPECIFICATIONS**

Septic Tank Capacity 750 Gallons  
Dosing Tank Capacity \_\_\_\_\_ Gallons  
Grease Trap Capacity \_\_\_\_\_ Gallons  
Absorption Bed Size 260 Square Ft.  
Lateral Drainfield Size \_\_\_\_\_ Square Ft.  
Sand Filter Size \_\_\_\_\_ Square Ft.  
Specifications: \_\_\_\_\_  
Date Processed 7-27-81

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

Robert Washam, PS Signature of Sanitarian  
MARTIN County Health Department

**FINAL INSPECTION DATA**

Date and Time of Inspection \_\_\_\_\_ Type of Tank (Concrete, Fiberglass, Etc.) \_\_\_\_\_  
Size Tank Installed \_\_\_\_\_ Drainfield Size \_\_\_\_\_  
Dosing Tank Size \_\_\_\_\_ Grease Trap Size \_\_\_\_\_ Sand Filter Size \_\_\_\_\_  
Who made Installation \_\_\_\_\_  
RECOMMENDATIONS Approval \_\_\_\_\_ Disapproval \_\_\_\_\_  
Signature of Sanitarian \_\_\_\_\_

FLORIDA DEPARTMENT OF POLLUTION CONTROL

S. E. Subregion  
 806 South 6th Street  
 Fort Pierce, Florida 33450  
 Tel. (305) 464-8525

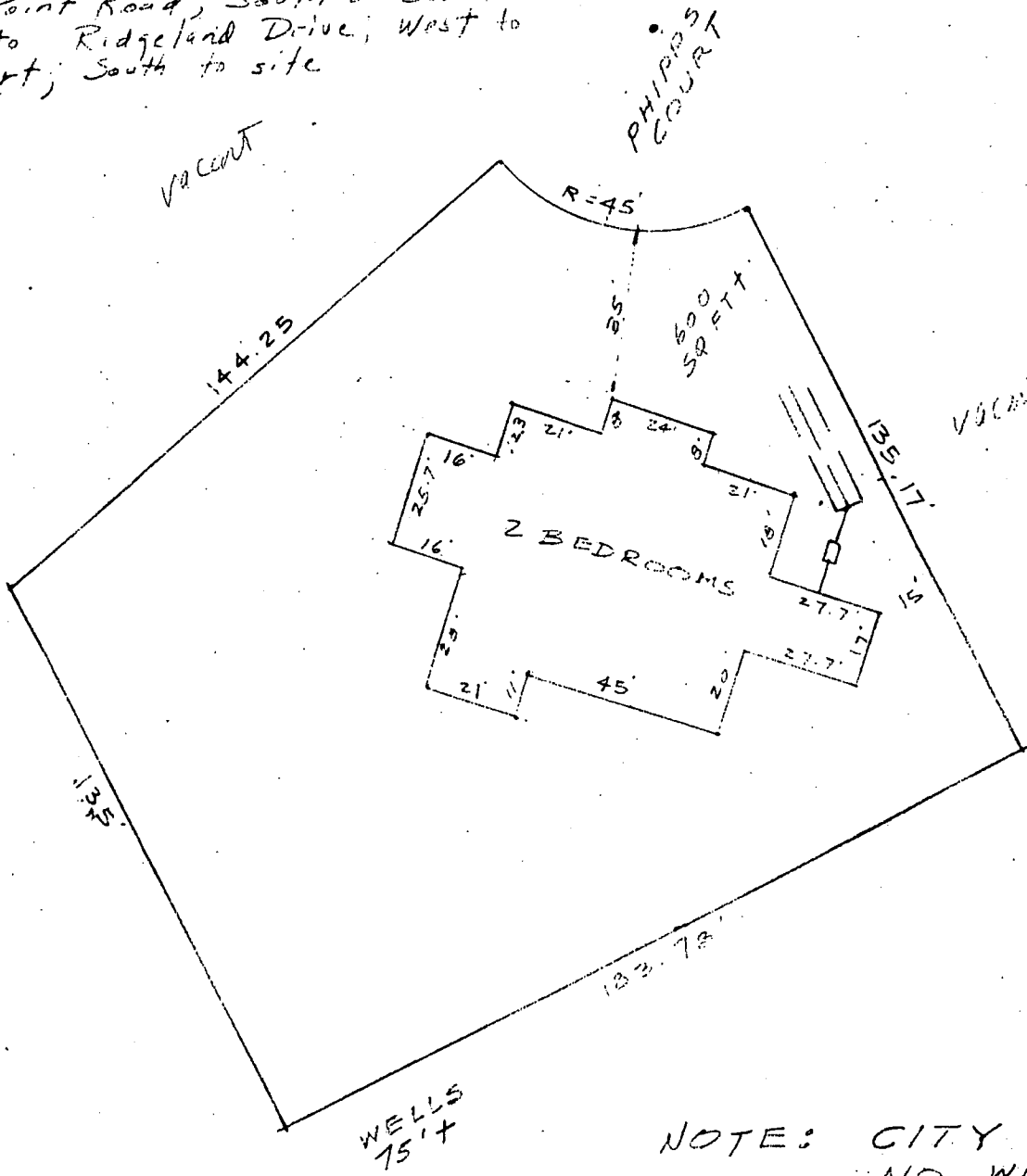
INDIVIDUAL SEWAGE DISPOSAL FACILITIES

DATA SHEET

Location: Lot 6, Ridgeland Applicant: Philip B. Stewart  
 County: Martin

**NOTE:** This septic tank system is not located within 50 feet of the high water line of a lake, stream, canal or other waters, nor within 75 feet of any private well; nor within 100 feet of any public water supply; nor within 10 feet of water supply pipes; nor within 100 feet of any public sewer system.

East on East Ocean Blvd to Sewall's Point Road; South on Sewall's Point Rd to Ridgeland Drive; West to Phipps Court; South to site



NOTE: CITY WATER NO. WELL

PLAN 40'  
 Scale: 1" = 40'

SOIL DATA

SOIL BORING LOG

Soil Identification: CLASS \_\_\_\_\_ GROUP \_\_\_\_\_  
 Soil Characteristics \_\_\_\_\_

Percolation Rate \_\_\_\_\_ min/inch

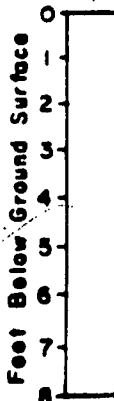
Water Table Depth \_\_\_\_\_

Water Table Depth During Wet Season \_\_\_\_\_

Compacted Fill Of \_\_\_\_\_ Req'd

Compacted Fill Checked By: \_\_\_\_\_

Date \_\_\_\_\_



LEGEND

- Drainage Pattern
- Proposed Septic Tank and Drainfield
- Proposed Water Supply Well
- Existing Water Supply Well
- Soil Boring and Percolation Test Location

CERTIFIED BY: AK Williams

FLORIDA PROFESSIONAL No. 1272

Date 7-24-81 Job No. \_\_\_\_\_

WARRANTY DEED  
INDIVID. TO INDIVID.

RAMCO FORM 01

413172

This Warranty Deed Made the 15th day of June A. D. 19 81 by

WILLIAM L. BITETTI, a single man

hereinafter called the grantor, to

PHILIP B. STEWART and WILHELMINA H. STEWART, his wife

whose postoffice address is 10 South Briar Hollow Lane, #22, Houston, Texas 77027 hereinafter called the grantee:

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

**Witnesseth:** That the grantor, for and in consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, re-mises, releases, conveys and confirms unto the grantee, all that certain land situate in Martin County, Florida, viz:

LOT 6, of RIDGELAND, a subdivision in the Town of Sewall's Point, Florida, according to the Plat thereof on file and of record in the Office of the Clerk of the Circuit Court in and for Martin County, Florida, in Plat Book 8, Page 3.

SUBJECT TO Restrictions, Reservations, Conditions, and Easements of Record; Zoning regulations of the Town of Sewall's Point; a private utility easement of record over the South 7.5 feet thereof.

GRANTEES HEREIN agree to assume and pay that certain mortgage recorded in Official Records Book 488, Page 1130, Public Records of Martin County, Florida.

**Together** with all the tenements, hereditaments and appurtenances thereto belonging or in any-wise appertaining.

**To Have and to Hold,** the same in fee simple forever.

**And** the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 19 80.

This Instrument Prepared By:  
FAYE BRADLEY  
FIRST AMERICAN TITLE COMPANY  
of MARTIN COUNTY, INC.  
119 East Seminole Street  
Stuart, Florida 33494

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

Signed, sealed and delivered in our presence:

Faye Bradley  
Hanna J. Toubee

William L. Bitetti L.S.  
William L. Bitetti L.S.

STATE OF Florida }  
COUNTY OF Martin }

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared

William L. Bitetti, a single man

to me known to be the person described in and who executed the foregoing instrument and he acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and (State last aforesaid) this 15th day of June, A. D. 19 81.  
Faye Bradley  
Notary Public-My Commission Expires:

This instrument prepared by: Notary Public, State of Florida at Large  
My Commission Expires March 8, 1985  
Bonded thru Maynard Bonding Agency

SPACE BELOW FOR RECORDERS USE

OR BOOK 523 PAGE 2285

COPY

FILED FOR RECORD  
MARTIN COUNTY, FLA.

81 JUN 15 A10: 39

LOUISE W. HAACS  
CLERK OF DISTRICT COURT  
BY *[Signature]* D.C.

STATE OF FLORIDA  
DOCUMENTARY STAMP TAX  
DEPT. OF REVENUE  
JUN 15 81  
RB. 11:00  
224.00

107942  
MARTIN COUNTY

# Warranty Deed

To

OR BOOK 523 PAGE 2286

COPY





# FLORIDA MODEL ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

BOB GRAHAM GOVERNOR  
SECTION 9 POINTS METHOD  
GOVERNOR'S ENERGY OFFICE  
LEX HESTER, DIRECTOR  
PREPARED BY: BRABHAM KUHN'S DEBAY - CONSULTING ENGINEERS

PROJECT NAME AND ADDRESS	Stewart Residence	JURISDICTION
	Lot 6-Ridgeland	Sewalls Point
	Sewalls Point	BUILDING PERMIT NO.
BUILDER	Sylvester Construction	1383
OWNER	Philip B. Stewart	TO BE FILLED IN BY BLDG OFFICIAL TO BE FILLED IN BY DESIGNER

STATISTICAL DATA															
ZONE	JURISDICTION CODE	FLOOR AREA	GROSS WALL AREA	GLASS AREA	WALL INSUL. R-VALUE	ROOF INSUL. R-VALUE	EER OR SEER	COP	MAXIMUM ALLOWED EPI	EPI					
8	33457	2242	2784	913	R-11	R-30	10.24 10.2		100	97					
HEATING SYSTEM TYPE				HOT WATER SYSTEM TYPE				WALL CONSTRUCTION	NUMBER OF UNITS						
STRIP	HEAT PUMP	GAS	OIL	SOLAR	ELEC.	HEAT REC.	GAS	OIL	SOLAR	CBS	FRAME	THIS BUILDING	ENTIRE PROJECT		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1	1		
THIS DATA TO BE SENT TO THE GOVERNOR'S ENERGY OFFICE BY THE BUILDING OFFICIAL UPON REQUEST															

BASE BUDGET	COMMON WALLS	COMMON ROOF	MAXIMUM ALLOWED
	X5	X12	
FROM APPENDIX E	FEWER TOTAL POINTS MEANS GREATER SAVINGS		EPI
CERTIFIED BY:	BANDZ INSULATION, INC.	DATE: 7/20/81	EPI: 97



# FLORIDA MODEL ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

**SECTION 9**      GOVERNOR'S ENERGY OFFICE  
**POINTS METHOD**      LEX HESTER, DIRECTOR  
 BOB GRAHAM      GOVERNOR  
 PREPARED BY: BRABHAM KUHN'S DEBAY - CONSULTING ENGINEERS

<b>PROJECT NAME AND ADDRESS</b>	Stewart Residence	<b>JURISDICTION</b>
	Lot 6-Ridgeland	Sewalls Point
	Sewalls Point	<b>BUILDING PERMIT NO.</b>
<b>BUILDER</b>	Sylvester Construction	
<b>OWNER</b>	Philip B. Stewart	

TO BE FILLED IN BY BLDG OFFICIAL  
 TO BE FILLED IN BY DESIGNER

STATISTICAL DATA															
ZONE	JURISDICTION CODE	FLOOR AREA	GROSS WALL AREA	GLASS AREA	WALL INSUL R-VALUE	ROOF INSUL R-VALUE	SEER OR EER	COP	MAXIMUM ALLOWED EPI	EPI					
8	33457	2242	2784	913	R-11	R-30	10.2 / 10.2		100	97					
HEATING SYSTEM TYPE				HOTWATER SYSTEM TYPE				WALL CONSTRUCTION		NUMBER OF UNITS					
STRIP	HEAT PUMP	GAS	OIL	SOLAR	ELEC.	HEAT REC.	GAS	OIL	SOLAR	CBS	FRAME	THIS BUILDING	ENTIRE PROJECT		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1	1		

THIS DATA TO BE SENT TO THE GOVERNOR'S ENERGY OFFICE BY THE BUILDING OFFICIAL UPON REQUEST

BASE BUDGET	COMMON WALLS	COMMON ROOF	MAXIMUM ALLOWED
	X5	X12	
FROM APPENDIX E	FEWER TOTAL POINTS MEANS GREATER SAVINGS		EPI
<b>CERTIFIED BY:</b>	BANDY INSULATION INC.	<b>DATE:</b> 7/20/81	<b>EPI:</b> 97

9D	DESIGN CREDIT POINTS (CP)	
CEILING FANS (IN COND. SPACE)	1 PER FAN	4
MULTI ZONE A/C (SEPARATED BY OPERABLE DOOR)	5	5
OPERABLE WINDOWS (ON 2 OR MORE SIDE OF ROOM)	1 PER ROOM	4
WHOLE HOUSE FAN (1.5 CFM/SF)	5	0
<i>building Code</i>		
<b>TOTAL</b>		<b>13</b>

9E	DESIGN PENALTY POINTS (PP)	
WASHER AND DRYER (IN COND. SPACE)	3	3
MAX. OPENING OF GLASS < 40%	5	0
<b>TOTAL</b>		<b>3</b>

9G	PERSCRPTIVE MEASURES	
	CHECK FOR COMPLIANCE	SECTION      CHECK
	HEATING SYSTEM EFFICIENCY	503.4 <input type="checkbox"/>
	AIR CONDITIONING CONTROLS	503.7 <input type="checkbox"/>
	A/C DUCT CONSTRUCTION	503.9 <input type="checkbox"/>
	PIPING INSULATION (CIRCULATING SYSTEMS)	503.10 <input type="checkbox"/>
	WATER HEATER (ASHRAE 90-75 LABEL)	504.2 <input type="checkbox"/>
	SWIMMING POOLS	504.2 <input type="checkbox"/>
	SHOWER FLOW RESTRICTORS	504.5 <input type="checkbox"/>

<b>SLAB ON GRADE PERIMETER</b>	EDGE INSULATION	PERIMETER	WPM	GWP
	R0 - 2.9	341	28.3	9650
	R3 - 5.9		20.4	
	R6 & UP		12.4	

<b>GLASS DO NOT APPLY INTERIOR SHADING</b>	OR	AREA	SINGLE	DOUBLE	WOF	GWP
	N	99.6	55.4	38.5	1.00	3835
	NE		55.4	38.5		
	E	201.0	55.4	38.5	0.87	6733
	SE		55.4	38.5		
	S	20.8	55.4	38.5	0.87	697
	SW		55.4	38.5		
	W	23.2	55.4	38.5	1.00	893
	NW		55.4	38.5		
	H		22.6	6.8		
	E	20.8		38.5	0.87	697
	E	105.0		38.5	0.96	3881
	E	70.0		38.5	1.00	2695
	S	210.0		38.5	1.00	8085
	S	84.0		38.5	1.00	3234
	S	42.0		38.5	0.83	1342
W	36.6		38.5	1.00	1409	
H: HORIZONTAL GLASS (SKYLIGHTS)						

<b>GLASS DO NOT APPLY INTERIOR SHADING</b>	OR	AREA	SINGLE		DOUBLE		SOF	GSP
			CLR	TIN	CLR	TIN		
	N	99.6	204	176	163	139	1.00	13844
	NE		309	264	258	218		
	E	201.0	425	360	362	304	0.89	54383
	SE		418	354	355	298		
	S	20.8	346	294	287	242	0.86	4329
	SW		418	354	355	298		
	W	23.2	425	360	362	304	0.69	4866
	NW		309	264	258	218		
	H		720	605	627	524		
	E	20.8				304	0.89	5628
	E	105.0				304	0.69	22025
	E	70.0				304	1.00	21280
	S	210.0				242	0.64	32525
	S	84.0				242	0.64	13010
S	42.0				242	1.00	10164	
W	36.6				304	0.89	9903	
FOR TINTED GLASS SL # 0.83 SEE SEC. 902 2d								

TOTAL GROSS WINTER POINTS	56724	TOTAL GROSS SUMMER POINTS	235154
---------------------------	-------	---------------------------	--------

<b>DUCT INSULATION MULTIPLIER</b>	1" FIBERGLASS	56724	1.18	65233	<b>DUCT INSULATION MULTIPLIER</b>	1" FIBERGLASS	235154	1.18	270427
	1.5" FIBERGLASS		1.12			1.5" FIBERGLASS		1.12	
	DUCT IN COND. SP.		1.00			DUCT IN COND. SP.		1.00	

HSM FROM TABLE 9A	65233 X 1.00	65233	CSM FROM TABLE 9B	270427 X 0.65	175778
-------------------	--------------	-------	-------------------	---------------	--------

FLOOR AREA (DIVIDE)	65233 ÷ 2242	29.1	FLOOR AREA (DIVIDE)	175778 ÷ 2242	78.4
---------------------	--------------	------	---------------------	---------------	------

WINTER POINTS (WP)	29	SUMMER POINTS (SP)	78
--------------------	----	--------------------	----

FORM 900 AND 901 - 789					ZONES - 789	
WINTER POINTS	SUMMER POINTS	HOT WATER POINTS	CREDIT POINTS	PENALTY POINTS	97 EPI	
29	+ 78	- 0	- 13	+ 3		
FEWER TOTAL POINTS ARE ENCOURAGED FOR MAXIMUM ENERGY SAVINGS						

9F WINTER OVERHANG FACTORS (WOF)								
FEET	N	NE	E	SE	S	SW	W	NW
0-99	1.00	0.99	0.85	0.75	0.83	0.98	1.00	1.00
1-199	1.00	0.99	0.85	0.76	0.84	0.98	1.00	1.00
2-299	1.00	0.99	0.86	0.77	0.84	0.99	1.00	1.00
3-399	1.00	0.99	0.87	0.80	0.87	0.99	1.00	1.00
4-499	1.00	0.99	0.89	0.83	0.90	0.99	1.00	1.00
5-599	1.00	0.99	0.91	0.86	0.92	1.00	1.00	1.00
6-699	1.00	0.99	0.92	0.90	0.94	1.00	1.00	1.00
7-799	1.00	1.00	0.94	0.92	0.96	1.00	1.00	1.00
8-899	1.00	1.00	0.96	0.95	0.97	1.00	1.00	1.00
9-999	1.00	1.00	0.97	0.97	0.98	1.00	1.00	1.00
10-1099	1.00	1.00	0.98	0.98	0.99	1.00	1.00	1.00
118UP	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00

9F SUMMER OVERHANG FACTORS (SOF)								
FEET	N	NE	E	SE	S	SW	W	NW
0-99	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
1-199	1.00	1.00	0.99	0.99	0.99	0.99	0.99	1.00
2-299	1.00	0.98	0.95	0.93	0.92	0.93	0.99	0.98
3-399	1.00	0.98	0.89	0.87	0.86	0.87	0.89	0.95
4-499	1.00	0.98	0.84	0.81	0.80	0.81	0.84	0.91
5-599	0.99	0.88	0.80	0.76	0.76	0.76	0.80	0.88
6-699	0.99	0.85	0.76	0.72	0.72	0.72	0.76	0.85
7-799	0.99	0.83	0.72	0.68	0.70	0.68	0.72	0.83
8-899	0.98	0.81	0.69	0.66	0.68	0.66	0.69	0.81
9-999	0.98	0.79	0.67	0.64	0.66	0.64	0.67	0.79
10-1099	0.98	0.78	0.65	0.62	0.65	0.62	0.69	0.78
11-1199	0.97	0.76	0.63	0.61	0.65	0.61	0.63	0.76
128UP	0.97	0.76	0.62	0.59	0.64	0.59	0.62	0.76

9A HEATING SYSTEM MULTIPLIER (HSM)									
HEAT PUMP	COP	2.0-2.19	2.2-2.39	2.4-2.59	2.6-2.79	2.8-2.99	3.0-3.19	3.2-3.39	3.4 & UP
	HSM	0.50	0.45	0.42	0.38	0.36	0.33	0.31	0.29
SOLAR HEAT	(1-% CAPACITY) X (BACKUP SYSTEM HSM)								
GAS HEAT	0.50								
OIL HEAT	0.70								
ELECTRIC STRIP HEAT	1.00								

9B COOLING SYSTEM MULTIPLIER (CSM)												
ELECTRIC	EER	6.8-6.99	7.0-7.49	7.5-7.99	8.0-8.49	8.5-8.99	9.0-9.49	9.5-9.99	10.0-10.49	10.5-10.99	11.0-11.99	12.0 & UP
	CSM	1.00	0.93	0.87	0.81	0.76	0.72	0.68	0.65	0.62	0.59	0.54
GAS	COP	0.40-0.44	0.45-0.49	0.50-0.54	0.55-0.59	0.60-0.65	0.65-0.69	0.70 & UP				
	CSM	1.50	1.25	1.20	1.09	1.00	92	89				

Note: EER = cooling mode COP x 3.413 = ARI rated cooling output in Btu/h = total watts consumed

9C HOT WATER CREDIT POINTS (HWP)		
ELECTRIC		0.0
GAS		13.1
SOLAR	MINIMUM CERTIFIED DCR OF 6000 BTU PER BEDROOM AND 15 GALLONS STORAGE PER BEDROOM	19.6
	MINIMUM CERTIFIED DCR OF 9000 BTU PER BEDROOM AND 20 GALLONS STORAGE PER BEDROOM	22.8
	MINIMUM CERTIFIED DCR OF 12,000 BTU PER BEDROOM AND 27 GALLONS STORAGE PER BEDROOM	24.5
A/C HEAT RECOVERY UNIT	MINIMUM CERTIFIED RATING OF 1500 BTUH/TON	16.3
	MINIMUM CERTIFIED RATING OF 2500 BTUH/TON	17.9
Minimum hot water storage tank with HRU - 40 gallons		

Note: Daily collection rate (DCR) is measured at 122°F using FSEC Standard Florida Solar Day

9D SPECIAL DESIGN CREDIT POINTS (CP)	
CEILING FANS IN CONDITIONED SPACE - 5 POINTS MAX.	1 PER FAN
MULTIZONING A/C (Zones must be separated by operable door.) - 5 POINTS MAX PER RESIDENCE	5
WINDOWS ON TWO OR MORE SIDES OF A ROOM (Excluding inoperable or corner windows and bathrooms.) - 5 POINTS MAX.	1 PER ROOM

9E SPECIAL DESIGN PENALTY POINTS (PP)	
WASHER & DRYER IN CONDITIONED SPACE.	3
MAXIMUM OPENING OF GLASS LESS THAN 40% OF TOTAL GLASS AREA	5

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 1/27/82  
P.B. Stewart

This is to request that a Certificate of Approval for Occupancy be issued to  
For property built under Permit No. 1383 Dated 8/6/81 when completed in  
conformance with the Approved Plans.

Signed \_\_\_\_\_

RECORD OF INSPECTIONS

Item	Date	Approved by
Set-backs and footings	8/17/81	
Rough plumbing	8/17/81 & 10/21/81	
Slab	8/20/81	
Perimeter beam		
Close-in, roof and rough electric	10/21/81	
Final Plumbing	1/27/82	
Final Electric	1/27/82	
INSULATION	10/30/81	
Final Inspection for Issuance of Certificate for Occupancy.		

Approved by Building Inspector [Signature] date 1/27/82

Approved by Building Commissioner [Signature] date 2/1/82

Utilities notified 1/27/82 date

Original Copy sent to \_\_\_\_\_

(Keep carbon copy for Town files)

**1391**

**POOL**

RECEIVED AUG 17 1961

TOWN OF SEWALL'S POINT FLORIDA

Permit No. 1391

Date 8/11/61

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

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

Owner PHILIP B. ... Present address ...

Phone ...

Contractor ... Address ...

Phone ...

Where licensed ... License number ...

Electrical contractor License number

Plumbing contractor License number

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

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

Subdivision ... Lot No. ...

Contract price \$ ... Cost of Permit \$ 9.32

Plans approved as submitted  Plans approved as marked

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

Contractor Robert ...

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

Owner Philip B. ...

TOWN RECORD

Date submitted 8/11/61

Approved: J. ...  
Building Inspector

Date 8/11/61

Approved: G.C. ...  
Commissioner

Date 8/11/61

Final Approval given: \_\_\_\_\_ Date \_\_\_\_\_

Certificate of Occupancy issued: \_\_\_\_\_ Date \_\_\_\_\_

SP/1-79

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

1391

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 1/23/82  
Philip Stewart

This is to request that a Certificate of Approval for Occupancy be issued to  
For property built under Permit No. 1391 Dated 8/20/81 when completed in  
conformance with the Approved Plans.

Signed \_\_\_\_\_

RECORD OF INSPECTIONS

Item	Date	Approved by
Set-backs and footings		
Rough plumbing		
Slab		
Perimeter beam		
Close-in, roof and rough electric		
Final Plumbing		
Final Electric		

*Steel & Grounding 9/15/81*

*Patio Steel 1/19/82*

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector J. Magyure date 1/22/82  
Approved by Building Commissioner \_\_\_\_\_ date \_\_\_\_\_

Utilities notified not Reg date \_\_\_\_\_

Original Copy sent to \_\_\_\_\_

(Keep carbon copy for Town files)



**1461**

**FENCE**

TOWN OF SEWALL'S POINT FLORIDA

7461

Permit No. \_\_\_\_\_

Date \_\_\_\_\_

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

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

Owner Philip B. Stewart Present address 6 Sabal Court

Phone: 286-4439 Ridgeland s.d.

Contractor Sears Address \_\_\_\_\_

Phone: \_\_\_\_\_

Where licensed \_\_\_\_\_ License number \_\_\_\_\_

Electrical contractor \_\_\_\_\_ License number \_\_\_\_\_

Plumbing contractor \_\_\_\_\_ License number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: chain link fence, 4' high - 40' LONG

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

6 Sabal Court

Subdivision Ridgeland Lot No. 6

Contract prices 1,100.00 Cost of Permit \$ 10.00

Plans approved as submitted  Plans approved as marked \_\_\_\_\_

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

Contractor: Philip B Stewart

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

Owner: Philip B Stewart

TOWN RECORD

Date submitted \_\_\_\_\_

Approved: J. Amador  
Building Inspector

Date: \_\_\_\_\_

Approved: J.C. Stuber  
Commissioner

Date: 2/25

Final Approval given: Jam 3/23/82  
Date

Certificate of Occupancy issued \_\_\_\_\_  
Date

1461

**2692**

**SCREEN**

**ENCLOSURE**

Permit No. \_\_\_\_\_

Date 1/9/90

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

This application must be accompanied by three (3) sets of complete plans, to scale, including a plot plan showing set-backs; plumbing and electrical layouts, if applicable, and at least two (2) elevations, as applicable.

Owner WILLIAM STEWART Present Address 6 SABAL CT.  
Phone 206-4439

Contractor RONALD H. RINGE Address 5095 MANATEE TERR.  
Phone 208-3592 STUART, FL.

Where licensed STATE License number CGC 023873

Electrical contractor N/A License number \_\_\_\_\_

Plumbing contractor N/A License number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: SLAB AND SCREEN ROOM

6 SABAL CT. SEWALLS POINT  
State the street address at which the proposed structure will be built:

Subdivision RIDGE LANDS Lot number 6 Block number \_\_\_\_\_

Contract price \$ 2000.00 Cost of permit \$ \_\_\_\_\_

Plans approved as submitted \_\_\_\_\_ Plans approved as marked \_\_\_\_\_

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

Contractor [Signature]

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

Owner Wilhelmina H. Stewart

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: \_\_\_\_\_  
Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

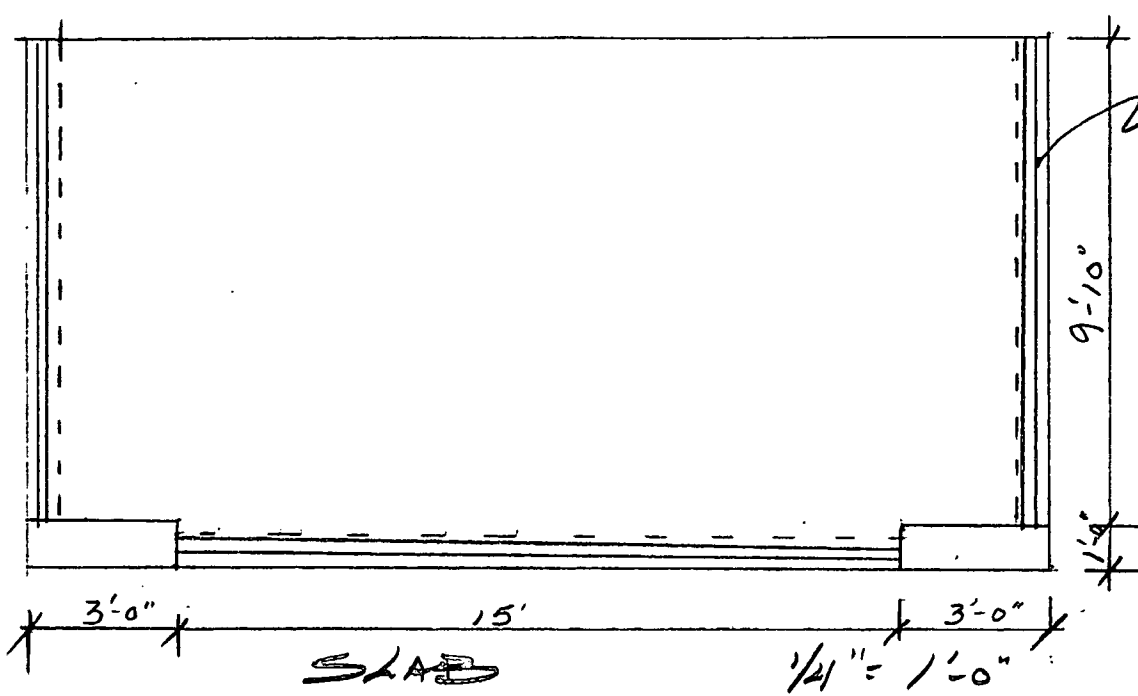
Approved: \_\_\_\_\_ Final Approval given: \_\_\_\_\_  
Commissioner \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_

Certificate of Occupancy issued (if applicable) \_\_\_\_\_  
Date \_\_\_\_\_

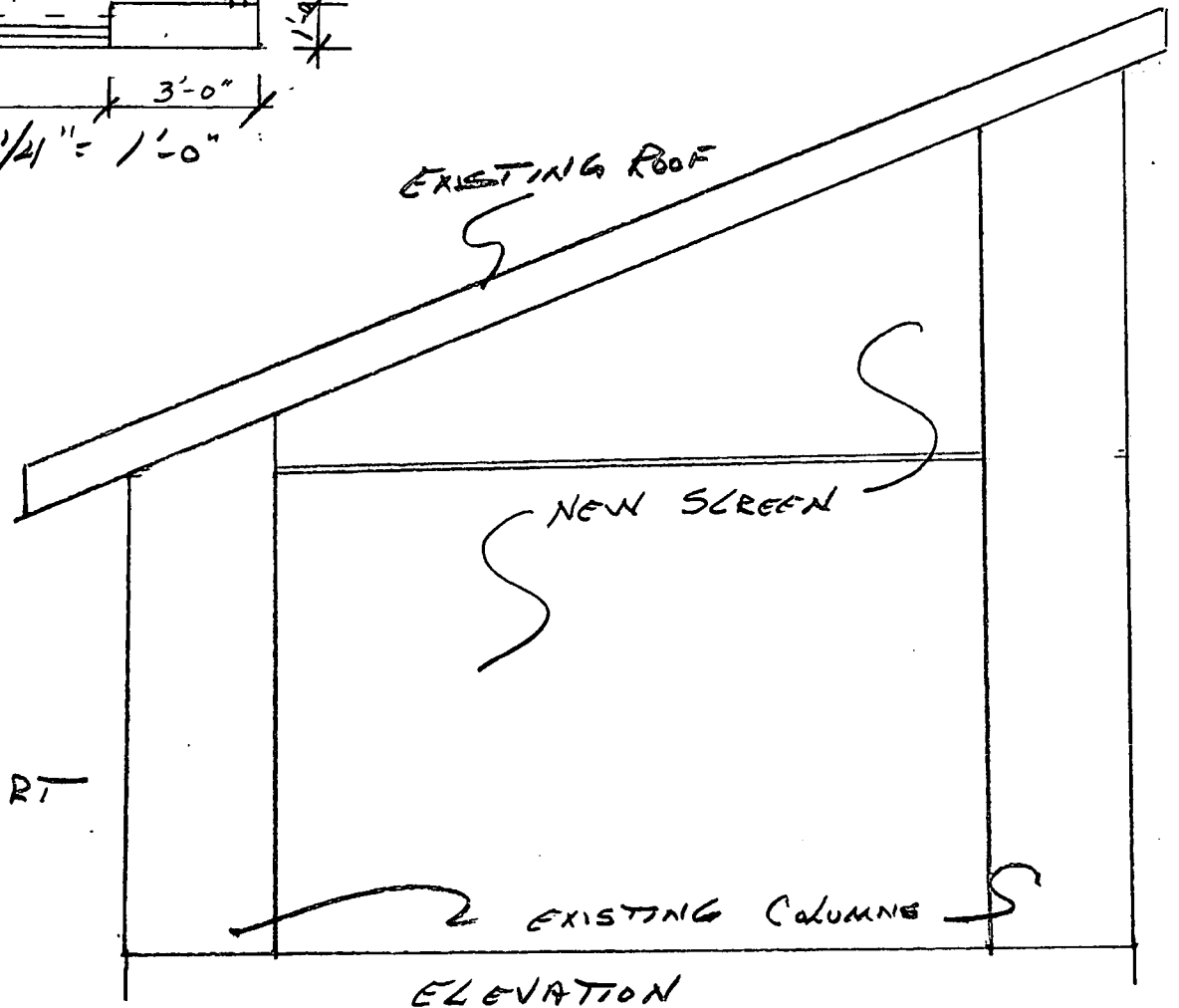
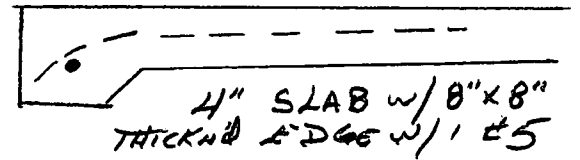
SP1282

Permit No. \_\_\_\_\_

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



8"x8" THICKENED EDGE.



SCREEN PORCH FOR  
MR & MRS. PHILIP STEWART  
6 SABLE CT.

06/21/89

AUDIT CONTROL NO.

0511162

LICENSE NO.

BATCH NO.

FEE AMOUNT

CG C023873

12820

\$196.00

CONSTRUCTION INDUSTRY LICENSING BD  
POST OFFICE BOX 2  
JACKSONVILLE, FL 32201

LICENSEE SIGNATURE

WALLET CARD — FOLD HERE

STATE OF FLORIDA  
DEPARTMENT OF PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY  
LICENSING BOARD

CERTIFIED GENERAL CONTRACTOR

RINGE, RONALD H  
INDIVIDUAL

HAS PAID THE FEE REQUIRED BY CHAPTER 489 F.S.  
FOR THE YEAR EXPIRING: JUNE 30, 1992

  
BOB MARTINEZ  
GOVERNOR  
LARRY GONZALEZ  
SECRETARY, D.P.R.

**4101**

**REROOF**

286  
4439

# Sewalls Point

530  
0317

TAX FOLIO NO. \_\_\_\_\_

DATE 12-5-96

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

**4401**

This application must be accompanied by three (3) sets of complete plans, to scale, including a plot plan showing set-backs, plumbing and electrical layouts, if applicable, and at least two (2) elevations, as applicable.

Owner MRS. Phillip Stewart Present address 6 SABLE COURT

Phone \_\_\_\_\_ Sewalls Point

Contractor PANACHE CONSTRUCTION Address 2970 S.E. DOMINICA TERRACE

Phone \_\_\_\_\_ STUART FL.

Where licensed STATE OF FL. License number C6CA07037

Electrical Contractor \_\_\_\_\_ License number \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_ License number \_\_\_\_\_

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

REROOF

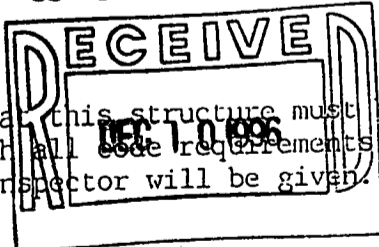
State the street address at which the proposed structure will be built: \_\_\_\_\_

Subdivision Ridgeland Lot Number 12 Block Number \_\_\_\_\_

Contract price \$ 14,380.00 Cost of permit \$ 100.00

Plans approved as submitted \_\_\_\_\_ Plans approved as marked \_\_\_\_\_

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



Contractor TERRY L. AUSTIN

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

Owner [Signature]

TOWN RECORD

Approved: [Signature]  
Building Inspector Date \_\_\_\_\_

Date submitted \_\_\_\_\_

Approved: \_\_\_\_\_  
Commissioner Date \_\_\_\_\_

Final approval given: \_\_\_\_\_  
Date \_\_\_\_\_

CERTIFICATE OF OCCUPANCY issued (if applicable) \_\_\_\_\_  
Date \_\_\_\_\_

PERMIT NO. \_\_\_\_\_



**5460**

**ADDITION**

MASTER PERMIT NO. N/A

**TOWN OF SEWALL'S POINT**

Date 7/26/01

BUILDING PERMIT NO. 5460

Building to be erected for JOHN P. STANTON

Type of Permit BLDG-ADD'N/ALT.

Applied for by O/B (NOTE: 25% BLDG FEE SURCHARGE) (Contractor)

Building Fee \$ 576.00

Subdivision RIDGELAND Lot 6 Block \_\_\_\_\_

Radon Fee 13.12

Address 6 SABAL COURT

Impact Fee N/A

Type of structure S.F.R.

A/C Fee 120.00

Parcel Control Number:

Electrical Fee 120.00

01-38-41-011-000-00060-60000

Plumbing Fee 120.00

Amount Paid \$1,126.72 Check # 104 Cash \_\_\_\_\_

Roofing Fee 120.00

Total Construction Cost \$ 48,000.00

Other Fees ( PLAD RED. ) 57.60

TOTAL Fees \$1,126.72

Signed [Signature]  
Applicant

Signed [Signature]  
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 THROUGH SATURDAY**

New Construction    Remodel    Addition    Demolition

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

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

Extended 1/27/02 - 7/26/03? \$1576.00

MASTER PERMIT NO. N/A

### TOWN OF SEWALL'S POINT

Date 7/26/01

BUILDING PERMIT NO. 5460

Building to be erected for JOHN P. STANTON

Type of Permit BLDG-ADD'N/NT.

Applied for by O/B (NOTE: 25% BLDG FEE SURCHARGE) (Contractor)

Building Fee \$ 576.00

Subdivision RIDGELAND Lot 6 Block \_\_\_\_\_

Radon Fee 13.12

Address 6 SABAL COURT

Impact Fee N/A

Type of structure S.F.R.

A/C Fee 120.00

Parcel Control Number:  
01-38-41-011-000-00060-60000

Electrical Fee 120.00

Plumbing Fee 120.00

Amount Paid \$1,126.72 Check # 104 Cash \_\_\_\_\_

Roofing Fee 120.00

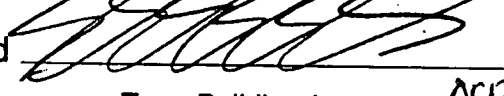
Other Fees ( PLAD RED. ) 57.60

Total Construction Cost \$ 48,000.00

TOTAL Fees \$1,126.72

Signed 

Applicant

Signed 

Town Building Inspector OFFICIAL

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

RECEIVED Bldg. Permit Number **5460**  
JUN 25 2001

Owner or Titleholder's Name JOHN P. STANTON BY: \_\_\_\_\_ Phone No. (361) 286 5900  
Street: 6 SABA COURT City SIYART State: FL Zip 34996  
Legal Description of Property: ALL OF LOT 6 PLAT OF RIDGELAND PLATON 8, PG 3  
Parcel Number: 0138 4101100000060 -

Location of Job Site: SAME - 60000  
TYPE OF WORK TO BE DONE: OLD ROOMS + BATHS ADDITION, PLUS GARAGE (CARPORT?)

CONTRACTOR/Company Name: SELF Phone No. ( ) \_\_\_\_\_  
Street: \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_  
State Registration: \_\_\_\_\_ State License: \_\_\_\_\_

ARCHITECT: SELF Phone No. ( ) \_\_\_\_\_  
Street: \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

ENGINEER: WALTER KARPINIA Phone No. (361) 743-1400  
Street: 11406 172ND PL. North City Jupiter State: FL Zip 33478

AREA SQUARE FOOTAGE - SEWER - ELECTRIC:  
Living Area: 796 Garage Area: \_\_\_\_\_ Carport: 414 Accessory Bldg: \_\_\_\_\_  
Covered Patio: \_\_\_\_\_ Scr. Porch: \_\_\_\_\_ Wood Deck: \_\_\_\_\_  
Type Sewage: \_\_\_\_\_ Septic Tank Permit # from Health Dept. 42-553459  
New Electrical Service Size: \_\_\_\_\_ AMPS

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

COSTS AND VALUES  
Estimated cost of construction or Improvement: \$ 48,000  
Estimated Fair Market Value (FMV) prior to Improvement: \$ 216,000  
If Improvement, is cost greater than 50% of Fair Market Value? YES \_\_\_\_\_ NO X  
Method of determining Fair Market Value: TAX ROLL

SUBCONTRACTOR INFORMATION: (Notification to this office of subcontractor change is mandatory.)  
Electrical: FORWARD ELECTRICAL State: FL License # EC-0001472  
Mechanical: CLASSIC COOLING State: FL License # CAC029403  
Plumbing: SOUTH PARK PLUMBING State: FL License # MP00049  
Roofing: PACIFIC ROOFING State: FL License # CCG056793

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

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

OWNER or AGENT SIGNATURE (Required)  
John P. Stanton

Owner  
State of Florida, County of: St. Lucie On this the 24th day of June, 2000, by JOHN STANTON who is personally known to me or produced \_\_\_\_\_ as identification.

Notary Public  
Polly A. Baird  
My Commission Expires: \_\_\_\_\_  
Polly A. Baird  
Commission # CC 982379  
Expires Jan 5, 2005  
Banded thru  
Atlantic Bonding Co., Inc.

CONTRACTOR SIGNATURE (Required)  
OWNER-BUILDER

Contractor  
State of Florida, County of: \_\_\_\_\_ On this the \_\_\_\_\_ day of \_\_\_\_\_, 2000, by \_\_\_\_\_ who is personally known to me or produced \_\_\_\_\_ as identification.

Notary Public  
My Commission Expires: \_\_\_\_\_  
(Seal)

**TREE REMOVAL (Attach sealed survey)**

Number of trees to be removed: 0 Number of trees to be retained: All Number of trees to be planted: 0 Number of Specimen trees removed: 0  
Fee: \$ \_\_\_\_\_ Authorized/Date: \_\_\_\_\_

DEVELOPMENT ORDER # \_\_\_\_\_



**1. ALL APPLICATIONS REQUIRE**

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

**ADDITIONAL Required Documents are:**

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

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

Approved by Building Official:  Date: 

Approved by Town Engineer \_\_\_\_\_ Date: \_\_\_\_\_  
(If required)

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

RECEIVED  
JUL 30 2001

PERMIT # 5460

TAX FOLIO # \_\_\_\_\_

NOTICE OF COMMENCEMENT BY: \_\_\_\_\_

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): ALL OF LOT 6, PLAT OF REXBURN PLAT BOOK 8, PG 3  
6 SABAL COURT, STUART FL

GENERAL DESCRIPTION OF IMPROVEMENT: BEDROOM ADDITION

OWNER: JOHN P STANTON

ADDRESS: 6 SABAL COURT, STUART FL 34996

PHONE #: 561 286 5900 FAX #: 561 286 6066

CONTRACTOR: JOHN P STANTON

ADDRESS: 6 SABAL COURT, STUART FL 34996

PHONE #: 561 286 5900 FAX #: 561 286 6066

SURETY COMPANY (IF ANY): NA

ADDRESS: NA

PHONE #: NA FAX #: NA

BOND AMOUNT: NA

LENDER: NA

ADDRESS: NA

PHONE #: NA FAX #: NA

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

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

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

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: 2/27/02  
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

John P Stanton  
SIGNATURE OF OWNER

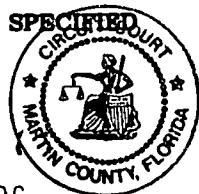
SWORN TO AND SUBSCRIBED BEFORE ME THIS 27 DAY OF July BY John P Stanton  
2001

Jacquelyn Wicks  
NOTARY SIGNATURE



Jacquelyn Wicks  
MY COMMISSION # CC918675 EXPIRES  
March 14, 2004  
BONDED THRU TROY FAIN INSURANCE, INC.

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



BY Marsha Ewing D.C.  
DATE 7-27-01

PERSONALLY KNOWN \_\_\_\_\_  
OR  
PRODUCED ID FL PL  
TYPE OF ID FL PL



EDWIN B. ARNOLD, AIA, CBO  
Building Official

IA

TOWN OF SEWALL'S POINT

P.

Town Hall  
One South Sewall's Point Road  
Sewall's Point, Florida 34986

Phone (581) 287-2455  
Fax (581) 220-4765

Disclosure Statement

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor even though you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is in violation of this exemption. You may not hire an unlicensed person as your contractor. It is your responsibility to make sure that people employed by you have licenses required by State law and by County or Municipal licensing ordinances. Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes and zoning regulations. Florida Statutes 489.103(7).

I have read the above and agree to comply with the provisions as stated.

Name JOHN P STANTON Date 2/26/01

Signed *John P Stanton*

Address 6 SABAL COURT

City & State STUART FL 34996

Permit No. 5460

This form is for all permits except electrical.  
Revised October 25, 1995



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

RECEIVED

JUN 04 2001

MARTIN COUNTY  
 HEALTH DEPARTMENT

PERMIT NO. 43-SS-2009  
 DATE PAID: 6/10/01  
 FEE PAID: 200-  
 RECEIPT #: 32504

01-0469-A

APPLICATION FOR:

New System     Existing System     Holding Tank     Innovative  
 Repair     Abandonment     Temporary   

APPLICANT: MR. JOHN STANTON

AGENT: GLY, INC.

TELEPHONE: 286-8083

MAILING ADDRESS: P.O. BOX 1469, PALM CITY, FL. 34991

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3) (m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 6 BLOCK: - SUBDIVISION: RIDGELAND PLATTED: 12-7-1979

PROPERTY ID #: 01-38-41-011-000-0006.C-60000 ZONING: RES I/M OR EQUIVALENT:  Y  N

PROPERTY SIZE: 0.63 ACRES WATER SUPPLY:  PRIVATE PUBLIC   $\leq 2000$  GPD   $> 2000$  GPD

IS SEWER AVAILABLE AS PER 381.0065, FS?  Y  N DISTANCE TO SEWER: - FT

PROPERTY ADDRESS: 6 SABAL CT., SEWALL'S POINT, FL.

DIRECTIONS TO PROPERTY: S. SEWALL'S PT. RD. SOUTH TO RIDGE-  
 LAND DR., WEST ON RIDGELAND TO SABAL CT.  
 LEFT ONTO SABAL CT.

BUILDING INFORMATION

RESIDENTIAL     COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>RESIDENCE</u>	<u>2</u>	<u>796</u>	
2				
3				
4				

Floor/Equipment Drains     Other (Specify) \_\_\_\_\_

SIGNATURE: [Signature]

DATE: 5/29/01



APPLICANT'S NAME: JOHN STANTON

LEGAL DESCRIPTION: LOT 6, RIDGLELAND SUBDIVISION  
P.B. 8, PG. 3, MARTIN CO., FL.

**PROPOSED SEPTIC SYSTEM SITE INFORMATION**

ANSWER ALL QUESTIONS AND FILL IN ALL BLANKS  
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 the proposed potable well within 25 feet of the building foundation? \_\_\_\_\_ Yes  No  N/A
5. Is the pesticide-treated building foundation within 25 feet of existing potable wells? \_\_\_\_\_ Yes  No  N/A
6. 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
7. 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
8. Is there a gravity sewer line, or a low pressure or vacuum sewage collection line in the public easement or right-of-way that abuts the property line of the lot? \_\_\_\_\_ Yes  No
9. Is there a drinking water line within 10 feet of the proposed septic system? \_\_\_\_\_ Yes  No
10. Is the proposed septic system in an area proposed for paving or vehicular traffic? \_\_\_\_\_ Yes  No
11. Is there a lake, stream, wetland, or surface water within 75 feet of the available area for the proposed septic system? \_\_\_\_\_ Yes  No
12. Is the septic system located on the side of the house farthest from surface water? \_\_\_\_\_ Yes  No  N/A
13. Does site plan show all private wells, septic systems and surface water on adjacent or contiguous land within 75 feet of the applicant's lot? \_\_\_\_\_ Yes  No  N/A
14. Are all public wells within 200 feet of the applicant's lot shown on the site plan? \_\_\_\_\_ Yes  No  N/A
15. Does the site plan include a plat of the lot or total site ownership drawn to scale showing boundaries with dimensions, locations of any existing or proposed buildings or residences, swimming pools, septic systems, wells, sidewalks, paved areas, driveways, the general slope of the property, recorded easements from the recorded plat, filled areas, drainage features, and surface waters such as lakes, ponds, streams, canals, or wetlands? \_\_\_\_\_ Yes  No
16. Are the locations of the benchmark and the natural grade elevation in the septic system area shown on the site plan? \_\_\_\_\_ Yes  No
17. Is the water line location from the water meter or well to the building shown on the site plan? \_\_\_\_\_ Yes  No
18. There is 942 +/- square feet of available, unobstructed, contiguous land to install the septic system. This area excludes interferences. Show this same size available area on the site plan.

**SITE ELEVATIONS**

1. Benchmark elevation 7.71 NGVD. Show location on the site plan. The benchmark must be within 200 feet of the proposed septic system and be visible from the proposed septic system.
2. Natural grade elevation in the area of the proposed septic system 11.1 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? N/A NGVD.

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

CERTIFIED BY: DAVID W. SCHRIVER  
FLORIDA PROFESSIONAL NO.: 4864  
DATE: 5/29/01 JOB NO.: 01-1054-01-C



STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
ONSITE SEWAGE DISPOSAL SYSTEM  
SITE EVALUATION AND SYSTEM SPECIFICATIONS

CENTRAX #: 43-SS-03459  
OSTDSNBR : 01-0469-N

APPLICANT: STANTON, JOHN

AGENT: N/A NOT APPLICABLE, N/A

LOT: 6 BLOCK: \_\_\_\_\_ SUBDIVISION: RIDGELAND ID#: 01-38-41-011-000-000

TO BE COMPLETED BY ENGINEER, HEALTH DEPARTMENT 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: [  ] YES [ ] NO NET USABLE AREA AVAILABLE: .63 ACRES  
TOTAL ESTIMATED SEWAGE FLOW: 2000 GALLONS PER DAY [64E-6, TABLE 1]  
AUTHORIZED SEWAGE FLOW: 575 GALLONS PER DAY [1500GPD/ACRE OR 2500GPD/ACRE]  
UNOBSTRUCTED AREA AVAILABLE: 942 SQFT UNOBSTRUCTED AREA REQUIRED: 500 SQFT

BENCHMARK/REFERENCE POINT LOCATION: CROWN of Road 7.11  
ELEVATION OF PROPOSED SYSTEM SITE IS 41 [ Inches ] [ Above ] 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: N/A FT NORMALLY WET? [ ] YES [  ] NO  
WELLS: PUBLIC: N/A FT LIMITED USE: N/A FT PRIVATE: N/A FT NON-POTABLE: 50 FT  
BUILDING FOUNDATIONS: 5 FT PROPERTY LINES: 7 FT POTABLE WATER LINES: 98 FT

SITE SUBJECT TO FREQUENT FLOODING: [ ] YES [  ] NO 10 YEAR FLOODING? [ ] YES [  ] NO  
10 YEAR FLOOD ELEVATION FOR SITE: \_\_\_\_\_ FT NGVD SITE ELEVATION: 11.1 FT NGVD

SOIL PROFILE INFORMATION SITE 1			
Munsell #/Color	Texture	Depth	
<u>4/1</u>	<u>TOP SOIL</u>	<u>0 to 4</u>	
<u>10YR 6/1</u>	<u>S</u>	<u>4 to 18</u>	
<u>8/1</u>	<u>S</u>	<u>18 to 48</u>	
<u>6/8</u>	<u>S</u>	<u>48 to 72</u>	
		to	
		to	
		to	
		to	
USDA SOIL SERIES: <u>#6 paola</u>			

SOIL PROFILE INFORMATION SITE 2			
Munsell #/Color	Texture	Depth	
	<u>TOP SOIL</u>	<u>0 to 4</u>	
<u>6/1</u>	<u>S</u>	<u>4 to 20</u>	
<u>8/1</u>	<u>S</u>	<u>20 to 54</u>	
<u>6/8</u>	<u>S</u>	<u>54 to 72</u>	
		to	
		to	
		to	
		to	
USDA SOIL SERIES: <u>#6 paola</u>			

OBSERVED WATER TABLE: Not Obs INCHES [ BELOW ] EXISTING GRADE TYPE: [ APPARENT ]  
ESTIMATED WET SEASON WATER TABLE ELEVATION: 272 INCHES [ below ] EXISTING GRADE  
HIGH WATER TABLE VEGETATION: [ ] YES [  ] NO MOTTLING: [ ] YES [  ] NO DEPTH: N/A INCHES

SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: S 1.2/1.8 DEPTH OF EXCAVATION: N/A INCHES  
DRAINFIELD CONFIGURATION: [  ] TRENCH [  ] BED [ ] OTHER (SPECIFY) \_\_\_\_\_

REMARKS/ADDITIONAL CRITERIA: \_\_\_\_\_

SITE EVALUATED BY: [Signature] DATE: 6/4/01



Martin County Health Department

SEPTIC TANK SYSTEM SPECIAL CONDITIONS LIST

APPLICATION NAME: Stanton PERMIT NO.: 43 - SS - 03459
SUBDIVISION: RIDGELAND

Permit General Conditions

Finished floor foundation elevation is recommended to be above the drainfield filled elevation of 0 inches above grade 11.1. If the foundation is proposed to be lower than the drainfield filled elevation, please contact this office to determine the foundation setback away from the drainfield (setback is calculated by adding 4:1 slope, 5-foot shoulder and berm. Recommend roof gutters to divert water away from this berm area).

If gravity flow from the building to the septic tank cannot be maintained, this permit must be revised to show an approved drainfield dosing pump system.

If the roof drip line is within 5 feet of the drainfield, shoulder or slope and the roof drains toward the septic system, gutters are required.

If fill is required, contact Martin County or your city Building Division for requirements.

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

A septic tank outlet filter is required on all septic tanks in unincorporated Martin County.

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

Any alteration of the information or conditions of this permit found to be in non-compliance with 64E-6, Florida Administrative Code or Chapter 381, Florida Statute, will be sufficient cause for revocation of this permit.

NOTE Special Condition(s) marked "X" are in effect.

- 1. Driveway / sidewalk elevation must be 9" higher than the top of the drainfield elevation if they are within 5 feet of each other.
2. Septic system must be \_\_\_ feet from surface water / wetlands mean high water line.
3. Future ponds or surface water created onsite must be greater than 75' from septic system.
4. 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.
5. Excavate one foot beyond drainfield area to a depth of \_\_\_

SEE REVERSE SIDE FOR ADDITIONAL REQUIREMENTS.

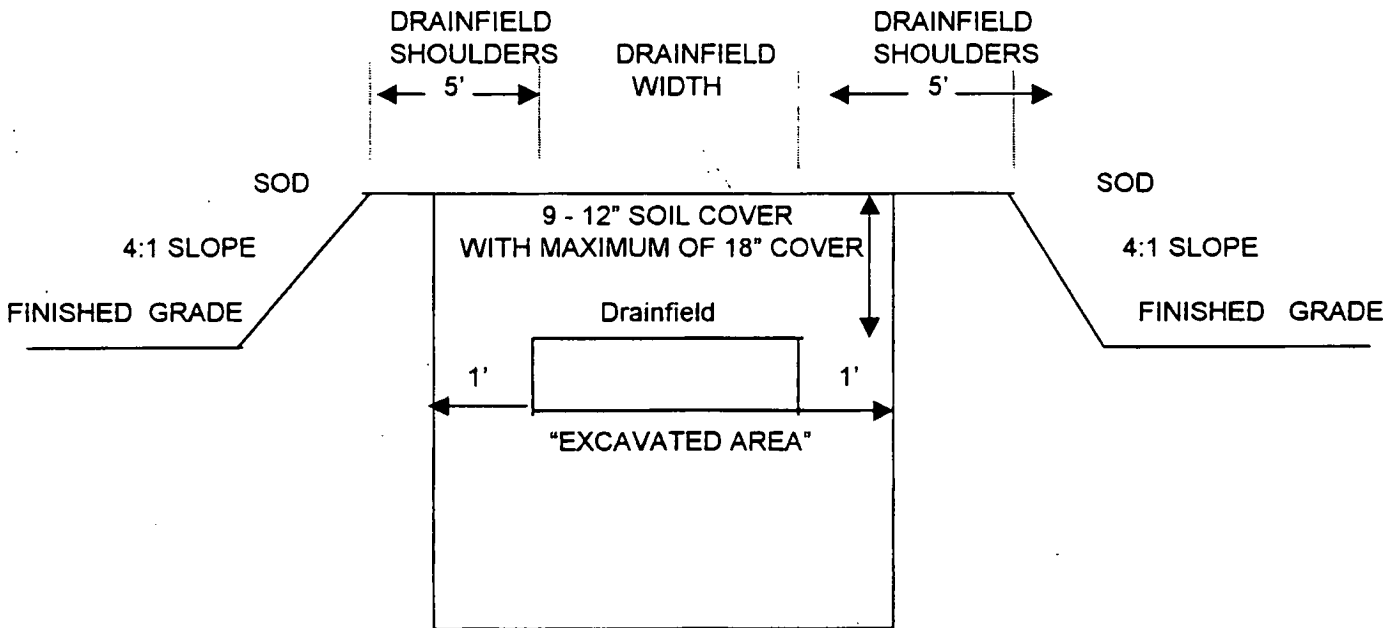
## SPECIAL CONDITION REQUIREMENTS (Page 2 of 3)

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. Applicant is responsible for replacing excavated soils with a good grade of soil suitable for drainfield installation.
8. 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.
9. Septic tank abandonment notices from the Septic Tank Contractor must be received by this office prior to final construction approval.
10. The attached well abandonment form must be completed by a certified well driller and submitted to this office prior to the initial building construction or system inspection.
11. The mound area must be sodded prior to the request for final grade inspection.
12. Drainfield must be protected from vehicular traffic (i.e., traffic barriers).
13. Occupational approval will not be given until all requirements for public water system/ food-service/ institutional/ septic system are met. \_\_\_\_\_
14. Septic tank/ dosing chamber/ grease trap must have (traffic lids with) manhole cover (s) per tank extending to the surface.
15. \_\_\_\_\_ 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.
16. Operational test of dosing pump(s) and high water alarm (audible and visual) required prior to final construction approval.
17. Two pumps are required to alternately dose into two separate fields. Separate drainfields must be a minimum of 10 feet apart.
18. Irrigation lines must be separated from the drainfield by ten feet unless an approved backflow prevention device is properly installed.
19. 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.
20. All new potable wells must be 25' from the building foundation and meet all other setback installation requirements.
21. \$ \_\_\_\_\_ Re-inspection fee is required if the well is not installed at time of initial onsite sewage disposal system inspection.
22. A well construction permit is required prior to well installation.

**SPECIAL CONDITION REQUIREMENTS (Page 3 of 3)**

- \_\_\_ 23. The engineer of record must certify that the installed system complies with the approved engineer design and installation requirements.
- \_\_\_ 24. 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 \_\_\_ Commercial System \_\_\_ Performance Based ).
- \_\_\_ 25. 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). No boulders or trees are allowed within the drainfield or drainfield shoulder area.

**DRAINFIELD MOUND REQUIREMENTS**



**NOTE: THESE REQUIREMENTS MUST BE MET PRIOR TO FINAL APPROVAL. SEE EXCAVATION CERTIFICATION SHEET FOR EXCAVATION DETAILS.**

\_\_\_ 26. 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 ANGELA BUCK at (561) 221-4090



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

CENTRAX #: 43-SS-03459  
 OSTDSNBR: 01-0469-N

CONSTRUCTION PERMIT FOR:

[ X ] New System [ ] Existing System [ ] Holding Tank [ ] Innovative Other  
 [ ] Repair [ ] Abandonment [ ] Temporary [ N/ ] \_\_\_\_\_

APPLICANT: STANTON, JOHN AGENT: N/A, NOT APPLICABLE

PROPERTY STREET ADDRESS: 6 SABAL Ct SEWALL'S POINT FL 33494

LOT: 6 BLOCK: \_\_\_\_\_ SUBDIVISION: RIDGELAND

[Section/Township/Range/Parcel No.]

PROPERTY ID #: 01-38-41-011-000-000

[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF CHAPTER 64E-6, FAC DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC TIME PERIOD. 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. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE OR LOCAL PERMITTING REQUIRED FOR PROPERTY DEVELOPMENT.

SYSTEM DESIGN AND SPECIFICATIONS

T [ 900 ] Gallons SEPTIC TANK MULTI-CHAMBERED/IN SERIES: [ Y ]  
 A [ 0 ] Gallons MULTI-CHAMBERED/IN SERIES: [ ]  
 N [ 0 ] GALLONS GREASE INTERCEPTOR CAPACITY  
 K [ 0 ] GALLONS DOSING TANK CAPACITY [ 0 ] GALLONS @ [ 0 ] DOSES PER 24 HRS # PUMPS [ 0 ]

D [ 167 ] SQUARE FEET PRIMARY DRAINFIELD SYSTEM Trench  
 R [ 250 ] SQUARE FEET BED SYSTEM

A TYPE SYSTEM: [ Y ] STANDARD [ N ] FILLED [ N ] MOUND [ N ] \_\_\_\_\_  
 I CONFIGURATION: [ Y ] TRENCH [ ~~any~~ ] BED [ N ] \_\_\_\_\_

F LOCATION TO BENCHMARK: Crown of Road 7.71

I ELEVATION OF PROPOSED SYSTEM SITE [ 41.0 ] [ INCHES ] [ ABOVE ] BENCHMARK/REFERENCE POINT  
 E BOTTOM OF DRAINFIELD TO BE [ 11.0 ] [ INCHES ] [ ABOVE ] BENCHMARK/REFERENCE POINT

L D FILL REQUIRED: [ 0.0 ] INCHES EXCAVATION REQUIRED: [ 0.0 ] INCHES

OTHER REMARKS:

The drainfield aggregate must be at least 5 feet from the property line(s). Install an approved outlet filter in the septic tank. Do not exceed 18" of cover on the top of the drainfield. See the attached special conditions list. A reinspection fee will be charged for additional inspections. All special conditions and items above must be completed prior to final inspection and approval.

SPECIFICATIONS BY: Black, Angela

TITLE: ESIT

APPROVED BY: Cross, Ray

TITLE: Environmental Supe Martin CHD

DATE ISSUED: 6/15/01

EXPIRATION DATE: 12/15/02

DH 4016, 03/97 (Obsoletes previous editions which may not be used)

(Stock Number: 5744-001-4016-0) [ostds\_cons\_4016-1]



Martin County Health Department  
(561) 221-4090 Fax. (561) 221-4967

TO: BUILDING DEPARTMENT: MARTIN JUPITER ISL. SEWALLS FT. STUART

FROM: Ray Cross

DATE: 9/4/02

SUBJECT: FINAL APPROVAL FOR SEPTIC SYSTEMS

HEALTH DEPT. PERMIT

BUILDING DEPT. PERMIT

LOCATION

~~43-SS-02107 5460 6 SEAWALLS FT. STUART~~

~~43-SS-03457 ? 103 SEAWALLS FT. STUART~~ ATTN

5455

103 Abbie Court

- 43-SS- \_\_\_\_\_
- 43-SS- \_\_\_\_\_
- 43-SS- \_\_\_\_\_
- 43-SS- \_\_\_\_\_
- 43-SS- \_\_\_\_\_
- 43-SS- \_\_\_\_\_

WALTER G. WOODS, ESQUIRE  
WALTER G. WOODS, CHARTERED  
1388 NE SUGARHILL AVENUE  
DENVER BEACH, FL 34957

RECORDED & VERIFIED BY

01261956

RECORDED & VERIFIED BY  
97 OCT 30 PM 3:32

Fiscal ID Number: 1-38-41-011-000290060-000000  
Certificate #1 TDH:  
**RECEIVED**  
JUL 30 2001  
BY:

DOC-DEED # 1505-  
MARGNA STILLEN  
DOC-APR # MARTIN COUNTY  
DOC-ADM # CLERK OF CIRCUIT COURT  
DOC-VAL # BY J.C. D.C.

### Personal Representative's Deed

This Indenture, is made this 29th day of October, 1997, by and between ALICE H. BONI

as Personal Representative of the Estate of WILHELMINA H. STEWART, deceased, Grantor, and JOHN P. STANTON,

whose post office address is: 6 Sabat Court, STUART, Florida 34996

of the County of MARTIN, State of Florida, Grantee.  
**Witnesseth:** Grantor, pursuant to the terms of decedent's Will and in consideration of the sum of One Dollar (\$1.00) paid to Grantor by Grantee, receipt of which is acknowledged, grants, bargains and sells to Grantee, and Grantee's heirs and assigns forever, the real property in MARTIN County, Florida, described as:  
Lot 6, RIDGELAND, according to the map or plat thereof as recorded in Plat Book 8, Page 3, Public Records of Martin County, Florida.

**Together** with all and singular the tenements, hereditaments, and appurtenances belonging or in anywise appertaining to the real property. **To Have And To Hold** the same to Grantee, and Grantee's heirs and assigns, in fee simple forever. **And** Grantor does covenant to and with the Grantee, and Grantee's heirs and assigns, that in all things preliminary to and in and about this conveyance, the terms of decedent's Will and the laws of the State of Florida have been followed and complied with in all respects. **In Witness Whereof**, the undersigned, as personal representative of the estate of said decedent, has executed this instrument under seal on the date aforesaid.

Signed, sealed and delivered in our presence:

*[Signature]*  
Printed Name: JL KWAK  
Witness

*[Signature]* (Seal)  
ALICE H. BONI, Personal Representative  
P.O. Address 263 Clubhouse Drive Unit 107, Palatine, IL 60067

*[Signature]* (Seal)  
Printed Name: William Court Membership  
Witness

STATE OF ILLINOIS  
COUNTY OF Cook

The foregoing instrument was acknowledged before me this 29th day of October, 1997 by ALICE H. BONI

as personal representative of the estate of WILHELMINA H. STEWART, deceased. She is personally known to me or has produced her identification.



*[Signature]*  
Printed Name: JL KWAK  
NOTARY PUBLIC  
My Commission Expires: 09/12/01

213-97





Sub Panel 100A / 24 CIR 120 / 240V

Circuits

Connected Loads

Panel		Panel	
1	5KW	2	A/C
3	AHU	4	Comp 1.5TON
5	Water	6	Spinkler
7	Heater	8	Pump
9	BATH #1	10	bed #2
11	GARAGE LIGHTS	12	DRY #2
13	Attic Lights	14	bed #1
15	Door Opener	16	Garage Receipts
17	Door Opener	18	BATH Receipts
19		20	
21		22	
23		24	
25		26	
27		28	
29		30	
31		32	
33		34	
35		36	
37		38	
39		40	
41		42	
FORWARD ELECTRIC & AC		FORWARD ELECTRIC & AC	
4149 SE SALERNO ROAD		4149 SE SALERNO ROAD	
STUART, FL 34997		STUART, FL 34997	
561-221-1660		561-221-1660	

Optional Calculation For Additional Loads in Existing Dwelling

Phase A 1<sup>st</sup> 8000 @ 100% remainder 1749 @ 40% = 75.64 Amps

Phase B 7829 @ 100% = 68 Amps

S/N 5859

RIGHT-J SHORT FORM  
File name: STANTON.BLD

6-21-01

Job #:  
For: stanton residence

Outside db	Htg	Clg
45	45	91
Inside db		75
70		75
Design TD		16
25		16
Daily Range		L
-		L
Inside Humid.		50
-		50
Grains Water		62
-		62
Method	Simplified	
Const. qlty		Best
Fireplaces		0

By: CLASSIC COOLING  
1259 SW 34th STREET  
PALM CITY  
283-8710

FL 34990

HEATING EQUIPMENT

COOLING EQUIPMENT

Make TRANE  
Model 5kw  
Type  
Efficiency / HSPF 1.0  
Heating Input 0 Btuh  
Heating Output 17000 Btuh  
Heating Temp Rise 26 Deg F  
Actual Heating Fan 600 CFM  
Htg Air Flow Factor 0.059 CFM/Btuh

Make TRANE  
Model ttr018d/tvfo18140  
Type  
COP/EER/SEER 10.0  
Sensible Cooling 13000 Btuh  
Latent Cooling 5000 Btuh  
Total Cooling 18000 Btuh  
Actual Cooling Fan 600 CFM  
Clg Air Flow Factor 0.068 CFM/Btuh

Space Thermostat

Load Sensible Heat Ratio 84

ROOM	NAME	AREA SQ.FT.	HTG BTUH	CLG BTUH	HTG CFM	CLG CFM
bed#2		169	3179	3062	188	207
closet#2		50	242	157	14	11
bath#2		66	908	1043	54	71
hall		54	1794	1601	106	108
bath#3		64	1300	683	77	46
bed#3		169	2715	2323	161	157
Entire House	d	572	10137	8868	600	600
Ventilation Air			0	880		
Equip. @ 1.00 RSM				9748		
Latent Cooling				3753		
TOTALS		572	10137	13501	600	600

S/N 5859

RIGHT-J SHORT FORM  
File name: STANTON.BLD

6-21-01

Job #: stanton residence

Htg	Clg
Outside db	45 91
Inside db	70 75
Design TD	25 16
Daily Range	- L
Inside Humid.	- 50
Grains Water	- 62
Method	Simplified
Const. qlty	Best
Fireplaces	0

By: CLASSIC COOLING  
1259 SW 34th STREET  
PALM CITY  
283-8710

FL 34990

HEATING EQUIPMENT

COOLING EQUIPMENT

Make TRANE  
Model 5kw  
Type  
Efficiency / HSPF 1.0  
Heating Input 0 Btuh  
Heating Output 17000 Btuh  
Heating Temp Rise 26 Deg F  
Actual Heating Fan 600 CFM  
Htg Air Flow Factor 0.059 CFM/Btuh

Make TRANE  
Model ttr018d/tvfv018140  
Type  
COP/EER/SEER 10.0  
Sensible Cooling 13000 Btuh  
Latent Cooling 5000 Btuh  
Total Cooling 18000 Btuh  
Actual Cooling Fan 600 CFM  
Clg Air Flow Factor 0.068 CFM/Btuh

Space Thermostat

Load Sensible Heat Ratio 84

ROOM	NAME	AREA SQ.FT.	HTG BTUH	CLG BTUH	HTG CFM	CLG CFM
bed#2		169	3179	3062	188	207
closet#2		50	242	157	14	11
bath#2		66	908	1043	54	71
hall		54	1794	1601	106	108
bath#3		64	1300	683	77	46
bed#3		169	2715	2323	161	157
Entire House	d	572	10137	8868	600	600
Ventilation Air			0	880		
Equip. @ 1.00 RSM				9748		
Latent Cooling				3753		
TOTALS		572	10137	13501	600	600

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri ~~August 22~~, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
✓ 5507	POTSDAM	STORM SHUTTERS	Passed	
⑥	50 RIO VISTA DR ROLLADEN (VACPIC-DNA: 263-0177)	FINAL		INSPECTOR: J 8/22
✓ 5302	NOHEIL	T/T & MTL	Passed	PTL. INSP. 7/27 ✓
①	6 W. RIDGEVIEW RON RAYMOND			INSPECTOR: J 8/22
✓ 5460	<del>STRIPDOW</del>	<del>PERMIT, VIG.</del>	<del>Passed</del>	<del>14x18D: reverse?</del>
②	6 SABAL CT (Ridgeland) O/B (SOUTH PARK PLUMB: 287-2548)			INSPECTOR: J 8/22
✓ 5228	FOGLIA	SHUTTERS-	Passed	
⑦	102 ABBIE CT. FOGLIA	FINAL		INSPECTOR: J 8/22
✓ 5234	MCCARTNEY	ROUGH PLUMBING	Passed	a) house b) aux. bldg.
⑨	45 W. HIGHPOINT WILSON BLDG.	W-Ground		INSPECTOR: J 8/22
✓ 5455	ATEN	UNDERGROUND	Passed	
⑧	103 ABBIE CT. GRIBBEN	PLUMBING		INSPECTOR: J 8/22
✓ TIR	SHRTMAN	FIELD VERIF.	Passed	
③	71 S. SPR TIMBER TREE	(ADDITIONAL TREE)		INSPECTOR: J 8/22

OTHER: \_\_\_\_\_

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri ~~August 29~~, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
✓ 5185	ROYCE JONES	STL - PAD FTG'S	Passed	
S (7)	14 HERONS NEST O/B (781-4780)			INSPECTOR: J 8/29
✓ <del>5460</del>	<del>John Stanton</del>	<del>Steel</del>	<del>Passed</del>	
(8)	S Sabal Ct (Ridgeland) O/B	(ADD'N/ALT)		INSPECTOR: J 8/29
✓ 5455	ATEN	SLAB	Passed	COMP. TEST RCVD ✓
S (8)	103 ABBIE COURT GRIBBEN		will del.	NO FORMBD. SURV/SUB PERMITS INSPECTOR: J 8/29
✓ 5228	FOGLIA	FINAL -	Passed	
S (9)	102 ABBIE CT. FOGUA	BLDG. CO		INSPECTOR: J 8/29
✓ <del>5167</del>	BRENNEN	SHUTTERS -	Passed	wood layout for CO
S (10)	111 Henry Sewall Way HYERS 260-7714	FINAL		INSPECTOR: J 8/29
✓ <del>4978</del>	RIMEX	POOL DECK	Passed	COMP. TEST? Has!
S (5)	29 S. RIVER RD. OLYMPIC POOLS	286 6070		will submit INSPECTOR: J 8/29
✓ 5192	RAO	FINAL - C.O.	Passed	
N (3)	30 CASTLE HILL WAY MR MARTIN HOMES (JOHN 260-0514)			INSPECTOR: J 8/29

OTHER:

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri SEPTEMBER 26, 2001; Page 1 of    .

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
✓ 5460	<del>STANTON</del>	ROOF PLYWOOD	Passed	
S (2)	<del>6 SABAL CT</del> O/B	SHEATHING		INSPECTOR: <i>[Signature]</i> 9/26
✓ 5318	RIBELLINO	FINAL ELECT	Failed	not ready
S (4)	18 ISLAND RD WILSON	TEMP POWER		INSPECTOR: <i>[Signature]</i> 9/26
✓ 5526	PAPE	STEEL AROUND WINDOWS + DOORS	Passed	
N (9)	61 N. RIVER ROAD OWNER/BUILDER			INSPECTOR: <i>[Signature]</i> 9/26
✓ 5352	CLEMENTS	TIE BEAM		not ready
S (6)	11 W. HIGHPOINT MOLTER	+ COLUMNS	Passed	INSPECTOR: <i>[Signature]</i> 9/26 need permit copy on site
✓ 5509	MILORD	ANCHORS +	Passed	
N	4 FIELDWAY DR. O/B	SHEATHING		INSPECTOR: <i>[Signature]</i> 9/26
✓ 5488	JUSTICE	DECK	Passed	
S (7)	18 MIDDLE RD. TWIN POOLS	CRE-INSPECTION		INSPECTOR: <i>[Signature]</i> 9/26
✓ 5234	M'CAHNEY	M-BED ROOM	M-Ball	ceiling Passed
S (5)	45 W. HIGHPOINT WILSON BUILDERS	INSULATION	Ridge room	ceiling/walls Passed INSPECTOR: <i>[Signature]</i> 9/26

OTHER: \_\_\_\_\_

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri  Sat  Sun, 2001; Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
S427	Foglia	Tie Beam	Passed	
(4)	105 Abbie Ct. Foglia			INSPECTOR: [Signature] 6/5
S352	Clouet	Tie Beam	Passed	Site to be cleared up.
(1)	11 High Pt. W Molter			INSPECTOR: [Signature] 6/5
S443	Wyckoff	Mas. Wall	Passed	
(10)	26 N. River Rd. O/R 223 7176	Final		INSPECTOR: [Signature] 6/5
S489	Straccuzi	Tie Beam	Passed	
(6)	12 Rio Vista A. Ruccolo			INSPECTOR: [Signature] 6/5
<del>S460</del>	<del>STANTON</del>	<del>STRAP</del>	<del>Passed</del>	
(7)	6 SABAL CT. OIB (Ridgeland)	<del>ANCHOR</del> <del>W/ SHIELDING</del>	<del>Passed</del>	INSPECTOR: [Signature] 6/5
S143	GIFFORD	INSULATION		
(12)	85 N. SPR HOLMES			INSPECTOR:
S286	SCHULTZ	FINAL - POOL	Failed	no access to alarm
(5)	64 S. SPR ADVANTAGE POOLS			INSPECTOR: [Signature] 6/5

OTHER: \_\_\_\_\_

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri ~~THU~~, 2001; Page 1 of   .

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5152	MUSSCO. 18 S. RIVER RD. 3 HARRY BLUE	CO. FINAL	Failed	wood para work INSPECTOR: J 11/13
5123	PICBU. 65 S. RIVER RD. 4 SEAGATE BLDRS'	ALL TRADES FRAMING Failed. — Truss, Plumb.	PASSED " "	ELEC. HVAC INSPECTOR: M
5068	WINER 2 19 RIDGELAND DR LEAR DEVELOPMENT.	ROUGH PLUMBING	PASSED	INSPECTOR: G
5565	RUPP 6 19 W. HIGHPOINT EMMICK	TIE BEAM	Passed	INSPECTOR: J 11/13
5573	FLAUGH 1 6 INDIALUCIE PKWY HUFNAGEL	ROUGH PLUMBING	Failed	INSPECTOR: J 10/12
5567	WEBER 5 4 MANDRAY BAYFOLD	FOOTING	Failed	O.K. to pour (dirty but req.) INSPECTOR: J 11/13
<del>5160</del>	<del>o/b.</del>	<del>ALL TRADES</del>	<del>Passed</del>	
7	LE SABLE CT. STANTON.	<del>FRAMING</del> <del>TRUSS WORK</del>		INSPECTOR: J 11/13

OTHER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri ~~NOV 16~~ , 2001; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5573.	FLAUGH.	FOOTING.	Passed	
(1)	6 INDIA LUCIE PKWY. MUFNACEL.	Plumbing	Passed	INSPECTOR: <i>[Signature]</i>
5352	CLEMENTS	STEEL/STAIRS.	Passed	
(7)	11 W. HIGH POINT W.W. MDLTEL			INSPECTOR: <i>[Signature]</i>
5541	MILORD.	PLUMB UNDERLAD	Passed	
(8)	144 N. SEWALLS PT RD. WHITES PLUMBING	BRYAN 287-6925		INSPECTOR: <i>[Signature]</i>
<del>5460</del>	<del>STATION</del>	<del>INSULATION</del>	<del>PASSED</del>	
(9)	6 SABLE. G/B.			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**TOWN OF SEWALL'S POINT**

One South Sewall's Point Road  
Sewall's Point, Florida 34996  
(561) 287-2455

**CORRECTION NOTICE**

ADDRESS: 6 Sabal Ct.

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

Final :

~~Electrical : USE 15A  
Breaker for AC Cond.~~

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

DATE: 1/23/02

[Signature]  
INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log


Date of Inspection:  Mon  Wed  Fri Jul 23, 2007; Page 1 of 3.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5599	WATSON	SHEATHING/TIN	Passed	
(2)	30 N. RIVER RD. PACIFIC	TAC		INSPECTOR: [Signature]
5460	<del>STATION</del>	<del>ME/TUSS. ENG?</del>	<del>Pass</del>	<del>Passed</del>
(7)	6 SABLE CT. O/R	<del>ME/TUSS. ENG?</del>	<del>Pass</del>	INSPECTOR: [Signature]
5636	FRANCIS	STEM WALL FTGS.	PASSED	- MS
	5 S. RIVER DR. WILBRODWAY			INSPECTOR:
5627	SADDLER	Rough Elec.	Failed	No permit
(8)	9 RIVERVIEW DR. ZANGRE Elec/Grants	Pump Rough A/C DUCT Wk.		No access INSPECTOR: [Signature]
5573	FLAUGH	TEMP. Elec	Passed	
(1)	6 INDIALUCIE HYENACRE			INSPECTOR: [Signature]
5551	SMALL	FINAL -	Passed	
(6)	62 S. RIVER RD. WOODLAND	BATH/KITCHEN (ELECT/PLUMB/BLDG)		INSPECTOR: [Signature]
5541	MILORD	TIE BEAM	Passed	
(5)	144 N. SPR O/B			INSPECTOR: [Signature]


OTHER: \_\_\_\_\_

# A. M. ENGINEERING AND TESTING, INC.

3504 INDUSTRIAL 33<sup>RD</sup> STREET  
 FORT PIERCE, FLORIDA 34946  
 (561) 461-7508 OFFICE • (561) 461-8880 FAX

RECEIVED  
 AUG 20 2001  
 BY: 

## BUILDING PAD COMPACTION REPORT

Client: Dozack Construction  
 Contractor: Client  
 Site:   
 Foundation Fill

Date: 8/15/01  
 Test No.: 3720

 Permit No.: 54660

**FILE**

### FIELD TESTING

Density tests and Hand Cone Penetrometer (HCP) readings were made at a minimum of three locations in the building pad. The foundation pad setbacks were based on information furnished by the client at the time of our testing. Density tests were performed in the upper one foot of fill. HCP readings were taken in hand auger boreholes at one foot intervals from slab grade to the bottom of the fill.

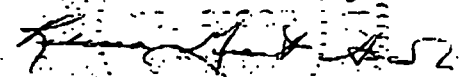
The density tests were performed in general compliance with ASTM D 2922. The HCP test, in conjunction with information about the soil type, is empirically correlated to the relative density of subsurface soils.

Density Test No.	Date Tested	Location	Elevation (feet)	Dry Density (pcf)		Percent Compaction
				Maximum	In Place	
3720	8/15/01	S.W. Corner	0 - 1	104.9	101.6	96.9
		Center	0 - 1		102.1	97.3
		N.E. Corner	0 - 1		101.8	97.0

### CONCLUSIONS

The depth of the fill is approximately two feet. In the locations that were tested the fill has been compacted to a minimum of 95 percent of the modified Proctor maximum dry density (ASTM D 1557).

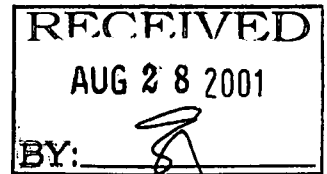
A. M. ENGINEERING AND TESTING, INC.

  
 Rebecca Grant Ascoli, P.E.  
 Florida Registration No. 51863

Copies: Client - 1  
 SP Building Dept. - 1

# A. M. ENGINEERING AND TESTING, INC.

3504 INDUSTRIAL 33<sup>RD</sup> STREET  
FORT PIERCE, FLORIDA 34946  
(561) 461-7508 OFFICE - (561) 461-8880 FAX



## BUILDING PAD COMPACTION REPORT

Client: Dozack Construction  
Contractor: Client  
Site: ~~6 Sabal Court~~  
Foundation Fill

Date: 8/15/01  
Test No.: 3720  
Permit No.: ~~5460~~

**FILE**

### FIELD TESTING

Density tests and Hand Cone Penetrometer (HCP) readings were made at a minimum of three locations in the building pad. The foundation pad setbacks were based on information furnished by the client at the time of our testing. Density tests were performed in the upper one foot of fill. HCP readings were taken in hand auger boreholes at one foot intervals from slab grade to the bottom of the fill.

The density tests were performed in general compliance with ASTM D 2922. The HCP test, in conjunction with information about the soil type, is empirically correlated to the relative density of subsurface soils.

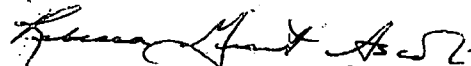
Density Test No.	Date Tested	Location	Elevation (feet)	Dry Density (pcf)		Percent Compaction
				Maximum	In Place	
3720	8/15/01	S.W. Corner	0 - 1	104.9	101.6	96.9
		Center	0 - 1		102.1	97.3
		N.E. Corner	0 - 1		101.8	97.0

### CONCLUSIONS

The depth of the fill is approximately two feet. In the locations that were tested the fill has been compacted to a minimum of 95 percent of the modified Proctor maximum dry density (ASTM D 1557).

A. M. ENGINEERING AND TESTING, INC.

Copies: Client - 1  
SP Building Dept. - 1

  
Rebecca Grant Ascoli, P.E.  
Florida Registration No. 51863

**R & F PEST CONTROL SERVICES, INC.**  
**Quality Termite & Pest Control**  
 1856 Southwest Bayshore Blvd.  
 PORT ST. LUCIE, FLORIDA 34984-3505  
 (772) 340-1335 (772) 879-9163

DATE 2/10/03 TIME IN 1 OUT 2

REG.  1-TIME  RES.  COMM.  INDOOR  OUTDOOR

NAME John Stanton  
 ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

SERVICES PERFORMED	TARGET PEST(S)	APPLICATION METHOD
<input type="checkbox"/> INSPECTION		
<input checked="" type="checkbox"/> TREATMENT		<u>Final Spray</u>
<input type="checkbox"/>		

CHEMICALS USED	AMOUNT	%	EPA NUMBER
<u>Nag TIC</u>	<u>50/10</u>		<u>5499</u>
<u>BS Lin</u>			

DESCRIPTION/REMARKS	AMOUNT
<u>Treated new addition for Final Spray at C Sabal Ct Stuart FL</u>	

SERVICED BY JR LIC. NO. \_\_\_\_\_ TOTAL \_\_\_\_\_  
 CUSTOMER SIGNATURE \_\_\_\_\_

**SERVICE REPORT**

# FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

## Residential Whole Building Performance Method A

Project Name: <b>STANTON</b> Address: City, State: Owner: Climate Zone: <b>South</b>	Builder: Permitting Office: Permit Number: Jurisdiction Number: <b>531000</b>
--	--

<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">1. New construction or existing</td> <td style="width:50%; text-align: right;">New <input type="checkbox"/></td> </tr> <tr> <td>2. Single family or multi-family</td> <td style="text-align: right;">Single family <input type="checkbox"/></td> </tr> <tr> <td>3. Number of units, if multi-family</td> <td style="text-align: right;">1 <input type="checkbox"/></td> </tr> <tr> <td>4. Is this a worst case?</td> <td style="text-align: right;">No <input type="checkbox"/></td> </tr> <tr> <td>5. Conditioned floor area (ft<sup>2</sup>)</td> <td style="text-align: right;">796 ft<sup>2</sup> <input type="checkbox"/></td> </tr> <tr> <td>6. Glass area &amp; type</td> <td></td> </tr> <tr> <td>    a. Clear - single pane</td> <td style="text-align: right;">0.0 ft<sup>2</sup> <input type="checkbox"/></td> </tr> <tr> <td>    b. Clear - double pane</td> <td style="text-align: right;">0.0 ft<sup>2</sup> <input type="checkbox"/></td> </tr> <tr> <td>    c. Tint/other SC - single pane</td> <td style="text-align: right;">144.0 ft<sup>2</sup> <input type="checkbox"/></td> </tr> <tr> <td>    d. Tint/other SC - double pane</td> <td style="text-align: right;">0.0 ft<sup>2</sup> <input type="checkbox"/></td> </tr> <tr> <td>7. Floor types</td> <td></td> </tr> <tr> <td>    a. Slab-On-Grade Edge Insulation</td> <td style="text-align: right;">R=0.0, 105.0(p) ft <input type="checkbox"/></td> </tr> <tr> <td>    b. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>    c. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>8. Wall types</td> <td></td> </tr> <tr> <td>    a. Frame, Wood, Exterior</td> <td style="text-align: right;">R=11.0, 793.0 ft<sup>2</sup> <input type="checkbox"/></td> </tr> <tr> <td>    b. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>    c. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>    d. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>    e. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>9. Ceiling types</td> <td></td> </tr> <tr> <td>    a. Under Attic</td> <td style="text-align: right;">R=19.0, 796.0 ft<sup>2</sup> <input type="checkbox"/></td> </tr> <tr> <td>    b. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>    c. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>10. Ducts</td> <td></td> </tr> <tr> <td>    a. Sup: Uncond. Ret: Uncond.</td> <td style="text-align: right;">Sup. R=6.0, 100.0 ft <input type="checkbox"/></td> </tr> <tr> <td>    b. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> </table>	1. New construction or existing	New <input type="checkbox"/>	2. Single family or multi-family	Single family <input type="checkbox"/>	3. Number of units, if multi-family	1 <input type="checkbox"/>	4. Is this a worst case?	No <input type="checkbox"/>	5. Conditioned floor area (ft <sup>2</sup> )	796 ft <sup>2</sup> <input type="checkbox"/>	6. Glass area & type		a. Clear - single pane	0.0 ft <sup>2</sup> <input type="checkbox"/>	b. Clear - double pane	0.0 ft <sup>2</sup> <input type="checkbox"/>	c. Tint/other SC - single pane	144.0 ft <sup>2</sup> <input type="checkbox"/>	d. Tint/other SC - double pane	0.0 ft <sup>2</sup> <input type="checkbox"/>	7. Floor types		a. Slab-On-Grade Edge Insulation	R=0.0, 105.0(p) ft <input type="checkbox"/>	b. N/A	<input type="checkbox"/>	c. N/A	<input type="checkbox"/>	8. Wall types		a. Frame, Wood, Exterior	R=11.0, 793.0 ft <sup>2</sup> <input type="checkbox"/>	b. N/A	<input type="checkbox"/>	c. N/A	<input type="checkbox"/>	d. N/A	<input type="checkbox"/>	e. N/A	<input type="checkbox"/>	9. Ceiling types		a. Under Attic	R=19.0, 796.0 ft <sup>2</sup> <input type="checkbox"/>	b. N/A	<input type="checkbox"/>	c. N/A	<input type="checkbox"/>	10. Ducts		a. Sup: Uncond. Ret: Uncond.	Sup. R=6.0, 100.0 ft <input type="checkbox"/>	b. N/A	<input type="checkbox"/>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">11. Cooling systems</td> <td style="width:50%;"></td> </tr> <tr> <td>    a. Central Unit</td> <td style="text-align: right;">Cap: 18.0 kBtu/hr <input type="checkbox"/> SEER: 10.00 <input type="checkbox"/></td> </tr> <tr> <td>    b. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>    c. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>12. Heating systems</td> <td></td> </tr> <tr> <td>    a. Electric Strip</td> <td style="text-align: right;">Cap: 18.0 kBtu/hr <input type="checkbox"/> COP: 1.00 <input type="checkbox"/></td> </tr> <tr> <td>    b. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>    c. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>13. Hot water systems</td> <td></td> </tr> <tr> <td>    a. Electric Resistance</td> <td style="text-align: right;">Cap: 50.0 gallons <input type="checkbox"/> EF: 0.94 <input type="checkbox"/></td> </tr> <tr> <td>    b. N/A</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>14. Hot water conservation credits (HR-Heat recovery, solar DHP-Dedicated heat pump)</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> <tr> <td>15. Infiltration practice (1, 2, or 3)</td> <td style="text-align: right;">2 <input type="checkbox"/></td> </tr> <tr> <td>16. HVAC credits (CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, RB-Attic radiant barrier, MZ-C-Multizone cooling, MZ-H-Multizone heating)</td> <td style="text-align: right;"><input type="checkbox"/></td> </tr> </table>	11. Cooling systems		a. Central Unit	Cap: 18.0 kBtu/hr <input type="checkbox"/> SEER: 10.00 <input type="checkbox"/>	b. N/A	<input type="checkbox"/>	c. N/A	<input type="checkbox"/>	12. Heating systems		a. Electric Strip	Cap: 18.0 kBtu/hr <input type="checkbox"/> COP: 1.00 <input type="checkbox"/>	b. N/A	<input type="checkbox"/>	c. N/A	<input type="checkbox"/>	13. Hot water systems		a. Electric Resistance	Cap: 50.0 gallons <input type="checkbox"/> EF: 0.94 <input type="checkbox"/>	b. N/A	<input type="checkbox"/>	14. Hot water conservation credits (HR-Heat recovery, solar DHP-Dedicated heat pump)	<input type="checkbox"/>	15. Infiltration practice (1, 2, or 3)	2 <input type="checkbox"/>	16. HVAC credits (CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, RB-Attic radiant barrier, MZ-C-Multizone cooling, MZ-H-Multizone heating)	<input type="checkbox"/>
1. New construction or existing	New <input type="checkbox"/>																																																																																		
2. Single family or multi-family	Single family <input type="checkbox"/>																																																																																		
3. Number of units, if multi-family	1 <input type="checkbox"/>																																																																																		
4. Is this a worst case?	No <input type="checkbox"/>																																																																																		
5. Conditioned floor area (ft <sup>2</sup> )	796 ft <sup>2</sup> <input type="checkbox"/>																																																																																		
6. Glass area & type																																																																																			
a. Clear - single pane	0.0 ft <sup>2</sup> <input type="checkbox"/>																																																																																		
b. Clear - double pane	0.0 ft <sup>2</sup> <input type="checkbox"/>																																																																																		
c. Tint/other SC - single pane	144.0 ft <sup>2</sup> <input type="checkbox"/>																																																																																		
d. Tint/other SC - double pane	0.0 ft <sup>2</sup> <input type="checkbox"/>																																																																																		
7. Floor types																																																																																			
a. Slab-On-Grade Edge Insulation	R=0.0, 105.0(p) ft <input type="checkbox"/>																																																																																		
b. N/A	<input type="checkbox"/>																																																																																		
c. N/A	<input type="checkbox"/>																																																																																		
8. Wall types																																																																																			
a. Frame, Wood, Exterior	R=11.0, 793.0 ft <sup>2</sup> <input type="checkbox"/>																																																																																		
b. N/A	<input type="checkbox"/>																																																																																		
c. N/A	<input type="checkbox"/>																																																																																		
d. N/A	<input type="checkbox"/>																																																																																		
e. N/A	<input type="checkbox"/>																																																																																		
9. Ceiling types																																																																																			
a. Under Attic	R=19.0, 796.0 ft <sup>2</sup> <input type="checkbox"/>																																																																																		
b. N/A	<input type="checkbox"/>																																																																																		
c. N/A	<input type="checkbox"/>																																																																																		
10. Ducts																																																																																			
a. Sup: Uncond. Ret: Uncond.	Sup. R=6.0, 100.0 ft <input type="checkbox"/>																																																																																		
b. N/A	<input type="checkbox"/>																																																																																		
11. Cooling systems																																																																																			
a. Central Unit	Cap: 18.0 kBtu/hr <input type="checkbox"/> SEER: 10.00 <input type="checkbox"/>																																																																																		
b. N/A	<input type="checkbox"/>																																																																																		
c. N/A	<input type="checkbox"/>																																																																																		
12. Heating systems																																																																																			
a. Electric Strip	Cap: 18.0 kBtu/hr <input type="checkbox"/> COP: 1.00 <input type="checkbox"/>																																																																																		
b. N/A	<input type="checkbox"/>																																																																																		
c. N/A	<input type="checkbox"/>																																																																																		
13. Hot water systems																																																																																			
a. Electric Resistance	Cap: 50.0 gallons <input type="checkbox"/> EF: 0.94 <input type="checkbox"/>																																																																																		
b. N/A	<input type="checkbox"/>																																																																																		
14. Hot water conservation credits (HR-Heat recovery, solar DHP-Dedicated heat pump)	<input type="checkbox"/>																																																																																		
15. Infiltration practice (1, 2, or 3)	2 <input type="checkbox"/>																																																																																		
16. HVAC credits (CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, RB-Attic radiant barrier, MZ-C-Multizone cooling, MZ-H-Multizone heating)	<input type="checkbox"/>																																																																																		

Glass/Floor Area: 0.18	Total as-built points: 16483.00 Total base points: 16882.00	EPI = 97.6
------------------------	--	------------

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

**PREPARED BY:**                                 MM                                

**DATE:**                                 6-24-61                                

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 with Section 553.908 Florida Statutes.

**BUILDING OFFICIAL:**                                 

**DATE:**                                 



# SUMMER CALCULATIONS

## Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
----------------	-----------

BASE	AS-BUILT
<b>GLASS TYPES</b>	
.15 X Conditioned X BSPM = Points Floor Area	Type/SC      Ornt      Overhang Len      Hgt      Area X SPM X SOF = Points
.15      796.0      109.70      13098.2	Single, Tint      S      3.0      4.0      80.0      132.50      0.52      5528.3
	Single, Tint      E      3.0      4.0      12.0      133.90      0.63      1014.8
	Single, Tint      N      3.0      4.0      40.0      65.20      0.73      1897.8
	Single, Tint      E      3.0      4.0      12.0      133.90      0.63      1014.8
	<b>As-Built Total:</b> 144.0      9455.6
<b>WALL TYPES</b> Area X BSPM = Points	Type      R-Value      Area X SPM = Points
Adajcent      0.0      0.0      0.0	Frame, Wood, Exterior      11.0      793.0      2.70      2141.1
Exterior      793.0      1.60      1268.8	
<b>Base Total:</b> 793.0      1268.8	<b>As-Built Total:</b> 793.0      2141.1
<b>DOOR TYPES</b> Area X BSPM = Points	Type      Area X SPM = Points
Adjacent      0.0      0.00      0.0	Exterior Wood      8.0      9.40      75.2
Exterior      8.0      6.40      51.2	
<b>Base Total:</b> 8.0      51.2	<b>As-Built Total:</b> 8.0      75.2
<b>CEILING TYPES</b> Area X BSPM = Points	Type      R-Value      Area X SPM = Points
Under Attic      796.0      0.80      636.8	Under Attic      19.0      796.0      1.50      1194.0
<b>Base Total:</b> 796.0      636.8	<b>As-Built Total:</b> 796.0      1194.0
<b>FLOOR TYPES</b> Area X BSPM = Points	Type      R-Value      Area X SPM = Points
Slab      105.0(p)      -20.0      -2100.0	Slab-On-Grade Edge Insulation      0.0      105.0(p)      -20.00      -2100.0
Raised      0.0      0.00      0.0	
<b>Base Total:</b> -2100.0	<b>As-Built Total:</b> -2100.0
<b>INFILTRATION</b> Area X BSPM = Points	Type      Area X SPM = Points
796.0      14.70      11701.2	Practice #2      796.0      14.70      11701.2
<b>Summer Base Points:      24656.2</b>	<b>Summer As-Built Points:      22467.1</b>
Total Summer X System = Cooling Points      Multiplier      Points	Total X Cap X Duct X System X Credit = Cooling Component      Ratio      Multiplier      Multiplier      Multiplier      Points
<b>24656.2      0.37      9122.8</b>	<b>22467.1      1.00      1.10      0.34      1.00      8427.4</b>



# WINTER CALCULATIONS

## Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
----------------	-----------

BASE	AS-BUILT
<b>GLASS TYPES</b>	
.15 X Conditioned X BWPM = Points Floor Area	Type/SC      Ornt      Overhang Len      Hgt      Area X WPM X WOF = Points
.15      796.0      -0.40      -47.8	Single, Tint      S      3.0      4.0      80.0      -1.80      0.08      -10.9
	Single, Tint      E      3.0      4.0      12.0      0.20      9.93      23.8
	Single, Tint      N      3.0      4.0      40.0      3.70      1.13      166.7
	Single, Tint      E      3.0      4.0      12.0      0.20      9.93      23.8
	<b>As-Built Total:</b> 144.0      203.5
<b>WALL TYPES</b> Area X BWPM = Points	Type      R-Value      Area X WPM = Points
Adjacent      0.0      0.0      0.0	Frame, Wood, Exterior      11.0      793.0      0.60      475.8
Exterior      793.0      0.30      237.9	
<b>Base Total:</b> 793.0      237.9	<b>As-Built Total:</b> 793.0      475.8
<b>DOOR TYPES</b> Area X BWPM = Points	Type      Area X WPM = Points
Adjacent      0.0      0.00      0.0	Exterior Wood      8.0      2.80      22.4
Exterior      8.0      1.80      14.4	
<b>Base Total:</b> 8.0      14.4	<b>As-Built Total:</b> 8.0      22.4
<b>CEILING TYPES</b> Area X BWPM = Points	Type      R-Value      Area X WPM = Points
Under Attic      796.0      0.10      79.6	Under Attic      19.0      796.0      0.30      238.8
<b>Base Total:</b> 796.0      79.6	<b>As-Built Total:</b> 796.0      238.8
<b>FLOOR TYPES</b> Area X BWPM = Points	Type      R-Value      Area X WPM = Points
Slab      105.0(p)      -2.1      -220.5	Slab-On-Grade Edge Insulation      0.0      105.0(p)      -2.10      -220.5
Raised      0.0      0.00      0.0	
<b>Base Total:</b> -220.5	<b>As-Built Total:</b> -220.5
<b>INFILTRATION</b> Area X BWPM = Points	Type      Area X WPM = Points
796.0      1.20      955.2	Practice #2      796.0      1.20      955.2
<b>Winter Base Points:      1018.8</b>	<b>Winter As-Built Points:      1675.2</b>
Total Winter X System = Heating Points      Multiplier      Points	Total X Cap X Duct X System X Credit = Heating Component      Ratio      Multiplier      Multiplier      Multiplier      Points
<b>1018.8      1.10      1120.7</b>	<b>1675.2      1.00      1.10      1.00      1.00      1842.7</b>

# WATER HEATING AND EPI SUMMARY

## Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
----------------	-----------

BASE	AS-BUILT
<b>WATER HEATING</b>	
Number of Bedrooms X Multiplier = Total	Tank Volume EF Number of Bedrooms X Tank X Multiplier X Credit = Total
2 X 3319.00 = 6638.0	50.0 0.94 2 X 1.00 X 3106.21 X 1.00 = 6212.4
	As-Built Total: 6212.4

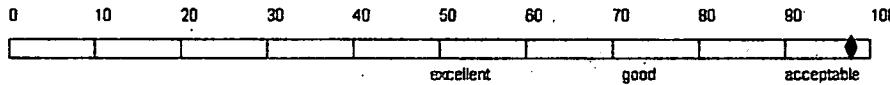
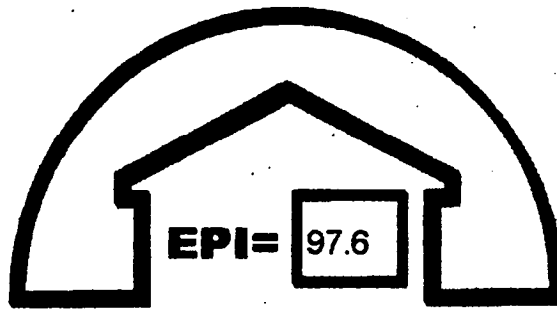
EPI SUMMARY							
BASE				AS-BUILT			
Cooling Points	+	Heating Points	+	Hot Water Points	=	Total Points	
9122.8		1120.7		6638.0		16881.5	
8427.4		1842.7		6212.4		16482.5	

EPI: 97.6



# ENERGY PERFORMANCE LEVEL DISPLAY CARD

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



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

## RESIDENTIAL ENERGY PERFORMANCE INDEX

ITEM	HOME VALUE	Low Efficiency	High Efficiency
		SINGL CLR	DBL TINT
WINDOWS.....	Single Tint		
INSULATION.....			
Ceiling R-Value.....	19.0		
Wall R-Value.....	11.0		
Floor R-Value.....	0.0		
AIR CONDITIONER.....			
SEER.....	10.00		
HEATING SYSTEM.....			
Electric COP.....	1.00		
WATER HEATER.....			
Electric EF.....	0.94		
Gas EF.....	N/A		
Solar EF.....	N/A		
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: \_\_\_\_\_

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 5/19, 2008 3 Page      of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6270	GOSSEIN	SHEATHING	Passed	Late
	5 DELANO	IN PROGRESS		(High Pt. / Madalay)
	CARDINAL ROOFING	ROOF		INSPECTOR:
<del>5460</del>	<del>STANTON</del>	<del>FINAL -</del>	<del>Passed</del>	<del>done</del>
	6 SABLE COURT	ADDITION		(Ridgeland)
	O/B			INSPECTOR:
6171	KURTZ	BLDG FINAL	Passed	done
6062	2 PALMETTO	CHECK ELEC/PLUMB	Passed	done
5832	O/B		Passed	INSPECTOR:
TREE	THURLOW	TREES	Passed	
	18 BANYAN RD			INSPECTOR:
5652	Johnson	Pool Sale	Passed	→ Survey needed
	2 Oakhill way			→ Affidavit needed
	Blue Heron Pools			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
<b>OTHER:</b> 1 Heritage Pool / 45 High Pt. Pool / 49 W High Pt. ??				

# TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

**Design Certification for Windload Compliance By Architect or Engineer of Record  
(To be submitted with application and construction drawing for permit)**

**PROJECT NAME AND ADDRESS**

STANTON RESID  
6 SABLE CT.  
SEWALLS PT, FL

**BUILDING DEPARTMENT USE ONLY**

BLDG. PERMIT # 54060  
OCCUPANCY TYPE \_\_\_\_\_  
CONSTRUCTION TYPE \_\_\_\_\_

**STATEMENT**

I certify that, to the best of my knowledge and belief, these plans and specification have been designed to comply with the applicable structural portion of the Building Codes as amended, adopted, and enforced the Town of Sewall's Point Building Department. I also certify that the structural components, systems, and related elements provide adequate resistance to the wind loads and forces specified by the current Code provisions. I hereby accept responsibility for the structural design.

**BUILDING PARAMETERS AND ANALYSIS**

The attached sealed plans have been designed for and are in compliance with Section 1601 of the Florida Building Code, 2001 Edition.

**CODE EDITIONS**

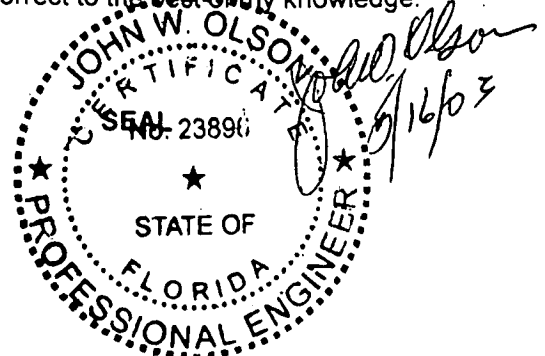
1994 SOUTH FLORIDA BLDG. CODE  
WITH AMENDMENTS

Building Design as: Partially Enclosed \_\_\_\_\_ Enclosed  Open \_\_\_\_\_ Wind Tunnel Test \_\_\_\_\_  
Basic Wind Speed: 140 MPH 3 Second Gusts  Importance/Use Factor \_\_\_\_\_  
Velocity Pressure: 47.2 psf Garage Door Design Pressure \_\_\_\_\_ + (psf) (End Zone) \_\_\_\_\_ + psf \_\_\_\_\_ + psf  
Door Design Pressure (Int. Zone) +35.3 + psf -38.3 - psf (End Zone) +47.2 + psf -51.2 - psf  
Window Design Pressure (Int. Zone) +35.3 + psf -38.3 - psf (End Zone) +35.3 + psf -51.2 - psf  
Minimum Soil Bearing Pressure 3.000 psf Exposure "B" Mean Building Height 18'  
Floor Loads 40 psf Roof Dead Load: 15 psf Shear Wall Considered  Yes \_\_\_\_\_ No \_\_\_\_\_  
Continuous Load Path Provided  Yes \_\_\_\_\_ No \_\_\_\_\_  
Components and Cladding Details Provided  Yes \_\_\_\_\_ No \_\_\_\_\_  
Impact Protection (Exterior Openings): Approved Shutters  Impact Resistance Glass \_\_\_\_\_  
**(Must be indicated on permit documents for all residential/commerical buildings, alterations and renovations)**

**NOTE: ACTUAL DESIGN PRESSURES FOR ALL EXTERIOR WINDOWS, DOORS, GARAGE DOORS, AND SIMILAR ENVELOPE ELEMENTS MUST ALSO BE INDICATED ON CONSTRUCTION PLANS.**

As witnessed by my seal, I hereby certify that the above information is true and correct to the best of my knowledge.

NAME: **JOHN W. OLSON P.E.**  
CERTIFICATION# 23896  
DATE: 5/16/03  
DESIGN FIRM: STRUCTURAL ENGINEER  
**JOHN W. OLSON, P.E.**  
1366 S.W. JASMINE TRACE  
PALM CITY, FL 34990



**8120**

**PAVERS**

MASTER PERMIT NO. \_\_\_\_\_

### TOWN OF SEWALL'S POINT

Date 3-21-06

BUILDING PERMIT NO 8120

Building to be erected for STANTON

Type of Permit PAVERS

Applied for by O/B

(Contractor) Building Fee \$10,200 x 9.60/1000 = 97.92

Subdivision RIDGELAND Lot 6 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 6 SABAL COURT

Impact Fee \_\_\_\_\_

Type of structure SFC

A/C Fee \_\_\_\_\_

Parcel Control Number:

13841011 0000006060000

Electrical Fee \_\_\_\_\_

Plumbing Fee \_\_\_\_\_

Roofing Fee \_\_\_\_\_

Amount Paid 122.40 Check # 511 Cash \_\_\_\_\_

Other Fees (10% PR) 24.48

Total Construction Cost \$ 10,200

TOTAL Fees 122.40

Signed [Signature]

Applicant

Signed [Signature]

Town Building Official

## PERMIT

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

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

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

## INSPECTIONS

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

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

RECEIVED  
3/11/06

Town of Sewall's Point  
BUILDING PERMIT APPLICATION

Permit Number: \_\_\_\_\_

Date: 3/11/06

OWNER/TITLEHOLDER NAME: JOHN P STANTON Phone (Day) 772-286-5900 (Fax) 772 286 6066

Job Site Address: 6 SACAL COURT City: STARBUCK State: FL Zip: 32996

Legal Desc. Property (Subd/Lot/Block) \_\_\_\_\_ Parcel Number: \_\_\_\_\_

Owner Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Description of Work To Be Done: REMOVE EXISTING SURFACES & INST MARBLE PAVES

WILL OWNER BE THE CONTRACTOR?:

YES  NO

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

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 10,200<sup>00</sup>  
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ 400K

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

Method of Determining Fair Market Value: OWNER EST.

CONTRACTOR/Company: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Martin County License Number: \_\_\_\_\_

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

ARCHITECT \_\_\_\_\_ Lic.#: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER \_\_\_\_\_ Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Carpport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

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 this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004  
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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

OWNER OR AGENT SIGNATURE (required)

[Signature]

State of Florida, County of: MARTIN

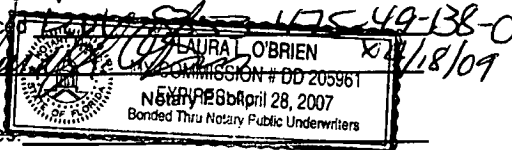
This the 21st day of MARCH, 2006

by JOHN STANTON who is personally

known to me or produced \_\_\_\_\_

as identification \_\_\_\_\_

My Commission Expires: \_\_\_\_\_



CONTRACTOR SIGNATURE (required)

\_\_\_\_\_

On State of Florida, County of: \_\_\_\_\_

This the \_\_\_\_\_ day of \_\_\_\_\_, 200  

by \_\_\_\_\_ who is personally

known to me or produced \_\_\_\_\_

As identification. \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

Notary Public

Seal

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



PERMIT # \_\_\_\_\_

TAX FOLIO # 138410110000006060000

**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):**

RIDGELAND LOT 6

**GENERAL DESCRIPTION OF IMPROVEMENT:** REMOVE PAVING & REPLACE W MARBLE PAVING

**OWNER:** JOHN P STANTON

**ADDRESS:** 6 SAGE COURT STUART FL 34996

**PHONE #:** 772-286-5900 **FAX #:** 772-286-6066

**CONTRACTOR:** OWNER/BUILDER

**ADDRESS:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_

**SURETY COMPANY (IF ANY):** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**BOND AMOUNT:** \_\_\_\_\_

**LENDER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_

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

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_

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

**PHONE #:** \_\_\_\_\_ **FAX #:** \_\_\_\_\_

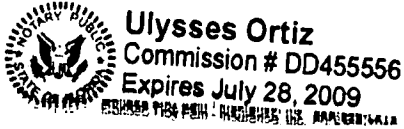
**EXPIRATION DATE OF NOTICE OF COMMENCEMENT:** \_\_\_\_\_  
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

[Signature]  
SIGNATURE OF OWNER

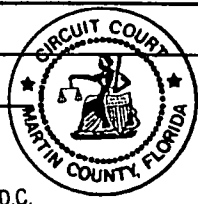
SWORN TO AND SUBSCRIBED BEFORE ME THIS 25<sup>th</sup> DAY OF MARCH 2006 BY JOHN PHILIP STANTON

[Signature]  
NOTARY SIGNATURE

PERSONALLY KNOWN  
PRODUCED ID FLDL S353475-49.135-0  
TYPE OF ID \_\_\_\_\_  
X 4/18/09



INSTR # 1919119 OR BK 02123 PG 2092 RECD 03/21/2006 11:39:38 AM  
Pg 2092 (109)  
MARSHA EWING MARTIN COUNTY DEPUTY CLERK T Copus (asst. 2092)



THIS IS TO CERTIFY THAT THE  
FAX # FOREGOING PAGES IS A TRUE  
AND CORRECT COPY OF THE ORIGINAL.  
MARSHA EWING CLERK  
BY T COPUS D.C.  
DATE: 3-21-06

# TOWN OF SEWALL'S POINT

ONE SOUTH SEWALL'S POINT ROAD  
SEWALL'S POINT, FLORIDA 34996

## TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT

(To be submitted if permit is to be pulled by Owner/Builder)

### DISCLOSURE STATEMENT

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor even through you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. It is your responsibility to make sure that people employed by you have licenses required by State law and by County or Municipal licensing ordinances. Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes and zoning regulations. Florida Statutes 489.103(7).

I have read the above and agree to comply with the provisions as stated.

Name: JOHN P STANTON Date: 3/21/06

Signature: 

Address: 6 SADAL CT.

City & State: STARBUCK FL 34996

Permit No. :

*REPAIR + REPLACE EXISTING  
COVERLAGE WITH MARBLE PAVERS*

FILE COPY  
TOWN OF SEWALL'S POINT  
THESE PLANS HAVE BEEN  
REVIEWED FOR CODE COMPLIANCE  
DATE: 3/21/06  
*[Signature]*  
BUILDING OFFICIAL  
Gene Simmons

LOT 7  
(IMPROVED)

FND. 4"X4" C.M.  
(UNNUMBERED)  
S 54°40'57" W  
0.12'

FND. NAIL &  
BRASS WASHER  
P.G.P. 1272

S 62°48'09" WP  
S 62°49'15" W(M)  
12.00'(P&M)

45.00'  
(RADIAL)

45.00'  
(RADIAL)

CONCRETE  
SPILLWAY

$\Delta=76^{\circ}11'24''(P)$   
 $\Delta=76^{\circ}10'11''(M)$   
 $L=59.84'(P)$  59.82'(M)  
 $R=45.00'$  (P&M)

SET P.K. NAIL  
& WASHER  
"GCY, INC. LB 4108"  
1.0' OFFSET

S 48°59'33" W - 189.25' (P)  
S 49°00'20" W - 189.25' (M)(RADIAL)  
144.25'

S 27°11'05" E - 180.18' (M)  
S 27°11'51" E - 180.17' (P)(RADIAL)  
135.17' (M)  
135.18' (P)

SINGLE-STORY  
WOOD FRAME  
RESIDENCE

CONCRETE PATIO  
& POOL AREA  
UNDER ROOF

SCREENED CONCRETE  
PATIO UNDER ROOF

SCREENED CONCRETE  
PATIO & POOL AREA

CONC. PAD WITH  
FP&L TRANSFORMER

A/C  
PAD  
POOL  
PUMP  
PAD

A/C  
PAD

LOT 6

ELECTRIC  
SERVICE  
MANHOLE

WOOD  
FENCE

ELECTRIC PANEL

15' DRAINAGE &  
UTILITY EASEMENT  
7.5' EASEMENT FOR  
ADJACENT PROPERTY OWNERS

15' DRAINAGE &  
UTILITY EASEMENT

S 27°11'04" E - 135.03' (M)  
S 27°11'51" E - 135.00' (P)

7.5'

7.5'

4' CHAIN LINK FENCE

OVERHEAD POWER LINES

S 62°48'09" W - 183.78'

LOT 11  
(APPROVED)

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 9-15, 2006

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<del>9120</del>	<del>Stanley</del>	<del>Final paving</del>	<del>PASS</del>	<del>Close</del>
7	Le Sabal Ct O/B OFF RIBBELAND			INSPECTOR: <i>[Signature]</i>
0033		Footer slab	—	RESCHEDULE FOR 9/18 INSPECTOR: <i>[Signature]</i>
1st	27 N. River SDH			INSPECTOR: <i>[Signature]</i>
	Kremser	<del>Courtesy wants to replace deck instead of repairing - does he need permit</del>		<del>RESCHEDULE FOR 9/17</del>
8	23 Ridgeland Dr. O/B	287-1596		INSPECTOR: <i>[Signature]</i>
8105	Galinas	bond beam	FAIL	
10	26 S Sewalls Pt Driftwood			INSPECTOR: <i>[Signature]</i>
	Mc Cormick	Dirt in road	per chief	ISSUED CORRECTION NOTICE
5	59 N River Rd Pine Orchard / DeBarno			INSPECTOR: <i>[Signature]</i>
7993	Giachino	Insulation	FAIL	
4	11 Wendy Ln Seagate			INSPECTOR: <i>[Signature]</i>
8123	Luloh	Concrete stain	PASS	
6	20 E High Pt Seagate			INSPECTOR: <i>[Signature]</i>

OTHER: \_\_\_\_\_

**8466**

**PUMP**

MASTER PERMIT NO. \_\_\_\_\_

**TOWN OF SEWALL'S POINT**

Date 12-5-06

BUILDING PERMIT NO. 8466

Building to be erected for McMahon

Type of Permit Well Pumps

Applied for by Jimmy Powell Electric (Contractor)

Building Fee \_\_\_\_\_

Subdivision Ridgeland Lot 6 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 6 Seibal Ct - 40575 Sewalls

Impact Fee \_\_\_\_\_

Type of structure Easement job location

A/C Fee \_\_\_\_\_

Electrical Fee 35-

Parcel Control Number:

Plumbing Fee \_\_\_\_\_

13841-01-000-000-6060000

Roofing Fee \_\_\_\_\_

Amount Paid \$35- Check # 12144 Cash \_\_\_\_\_

Other Fees ( \_\_\_\_\_ )

Total Construction Cost \$ 1600-

TOTAL Fees 35-

Signed Jimmy M. Powell  
Applicant

Signed John Adams  
Town Building Official

**PERMIT**

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

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

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

**INSPECTIONS**

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

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

### TOWN OF SEWALL'S POINT

Date 12-5-06

BUILDING PERMIT NO. 8467

Building to be erected for Knobel

Type of Permit Well pumps

Applied for by Jimmy Powell Electric (Contractor)

Building Fee \_\_\_\_\_

Subdivision Ridge Land Lot 6 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 6 Subal Ct #0 585 Sewalls Pt Rd

Impact Fee \_\_\_\_\_

Type of structure Easement job location

A/C Fee \_\_\_\_\_

Electrical Fee 35

Parcel Control Number:  
13841-01-000-000-6060000

Plumbing Fee \_\_\_\_\_

Roofing Fee \_\_\_\_\_

Amount Paid \$35 Check # 12144 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 1600

TOTAL Fees 35

Signed [Signature]  
Applicant

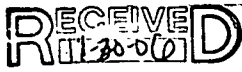
Signed [Signature]  
Town Building Official

## PERMIT

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

## INSPECTIONS

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



JAMES McMAHON  
Town of Sewall's Point  
BUILDING PERMIT APPLICATION

Permit Number: \_\_\_\_\_

Date: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: \_\_\_\_\_ Phone (Day) \_\_\_\_\_ (Fax) \_\_\_\_\_

Job Site Address: 6 SARAL COURT City: SEWALL'S PT State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) \_\_\_\_\_ Parcel Number: \_\_\_\_\_

Owner Address (if different): 57 SIDEWALL'S PT RD City: STUART State: FL Zip: 34994

Description of Work To Be Done: UPDATE & REPLACE ELECT. FOR WELL PUMPS

WILL OWNER BE THE CONTRACTOR?:

YES  NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 1,600

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_

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

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

(If yes, Owner Builder Affidavit must accompany application)

Method of Determining Fair Market Value: \_\_\_\_\_

CONTRACTOR/Company: JIMMY ROWELL ELECTRIC SERVICE Phone: 772-220-2755 Fax: 772-220-2755

Street: P.O. BOX 2262 City: STUART State: FL Zip: 34995

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Martin County License Number: \_\_\_\_\_

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

ARCHITECT \_\_\_\_\_ Lic.#: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER \_\_\_\_\_ Lic.# \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

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 this county and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004  
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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

OWNER OR AGENT SIGNATURE (required)

James M. Mahon

State of Florida, County of: Martin

This the 30th day of November, 2006

by James F. McMahon who is personally

known to me or produced FDL# M255-446-37-364-0

as identification. Valerie Meyer

Notary Public

My Commission Expires: \_\_\_\_\_

CONTRACTOR SIGNATURE (required)

James M. Rowell

On State of Florida, County of: Martin

This the 5th day of December, 2006

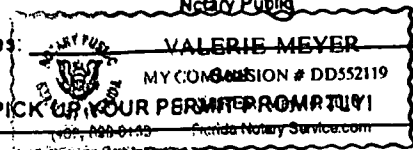
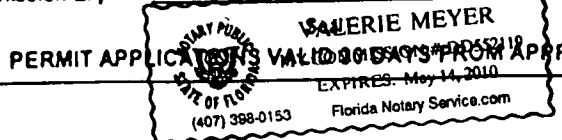
by James M. Rowell who is personally

known to me or produced FDL# R400-453-49-096-0

As identification. Valerie Meyer

Notary Public

My Commission Expires: \_\_\_\_\_



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



Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: \_\_\_\_\_

Date: 12/01/06

OWNER/TITLEHOLDER NAME: FRANCES & JAMES KNOBEL Phone (Day) 860-354-3499 (Fax) \_\_\_\_\_

Job Site Address: 6 SABAL CT City: STUART State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) \_\_\_\_\_ Parcel Number: \_\_\_\_\_

Owner Address (if different): 58 S. SEWALLS PT RD City: STUART State: FL Zip: 34996

Description of Work To Be Done: \_\_\_\_\_

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 1,600.00

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_

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

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

(If yes, Owner Builder Affidavit must accompany application)

Method of Determining Fair Market Value: \_\_\_\_\_

CONTRACTOR/Company: Jimmy Powell Electric Phone: 220-2880

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Martin County License Number: \_\_\_\_\_

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

ARCHITECT Lic.#: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER Lic.#: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Carport: \_\_\_\_\_ Total Under Roof: \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

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 this county and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004 National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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

OWNER OR AGENT SIGNATURE (required)

State of Florida, County of: Taylor

This the 1st day of December 2006

By James M Knobel who is personally

known to me or produced as identification

My Commission Expires: 3/31/08 Notary Public

CONTRACTOR SIGNATURE (required)

State of Florida, County of: Martin

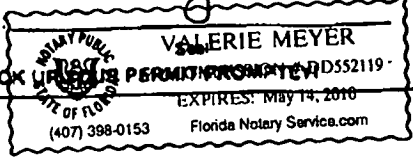
This the 5th day of December 2006

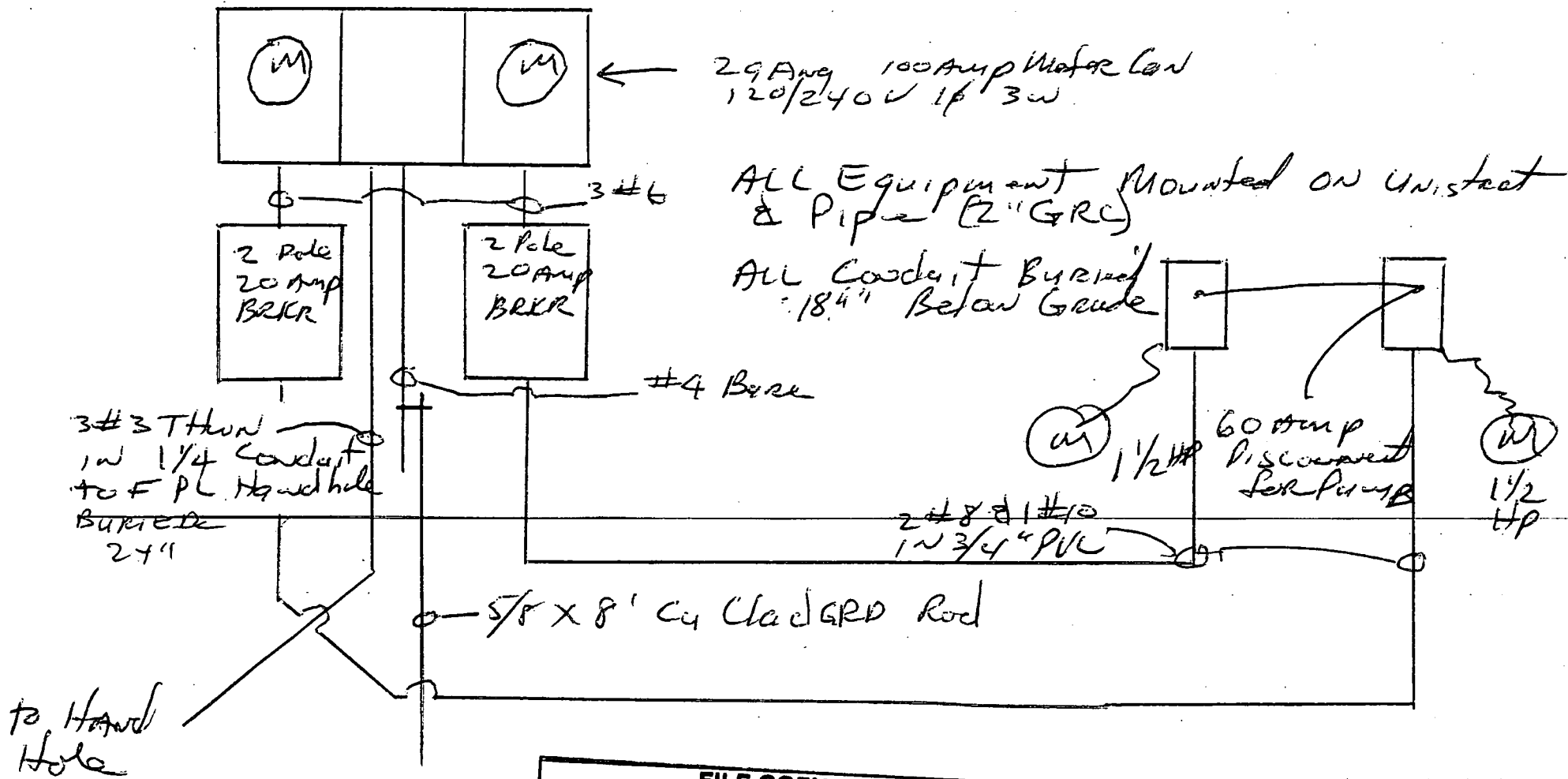
By James M Powell who is personally known to me or produced P.D.# R400-45349-0960

As identification Valerie Meyer Notary Public

My Commission Expires: \_\_\_\_\_

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

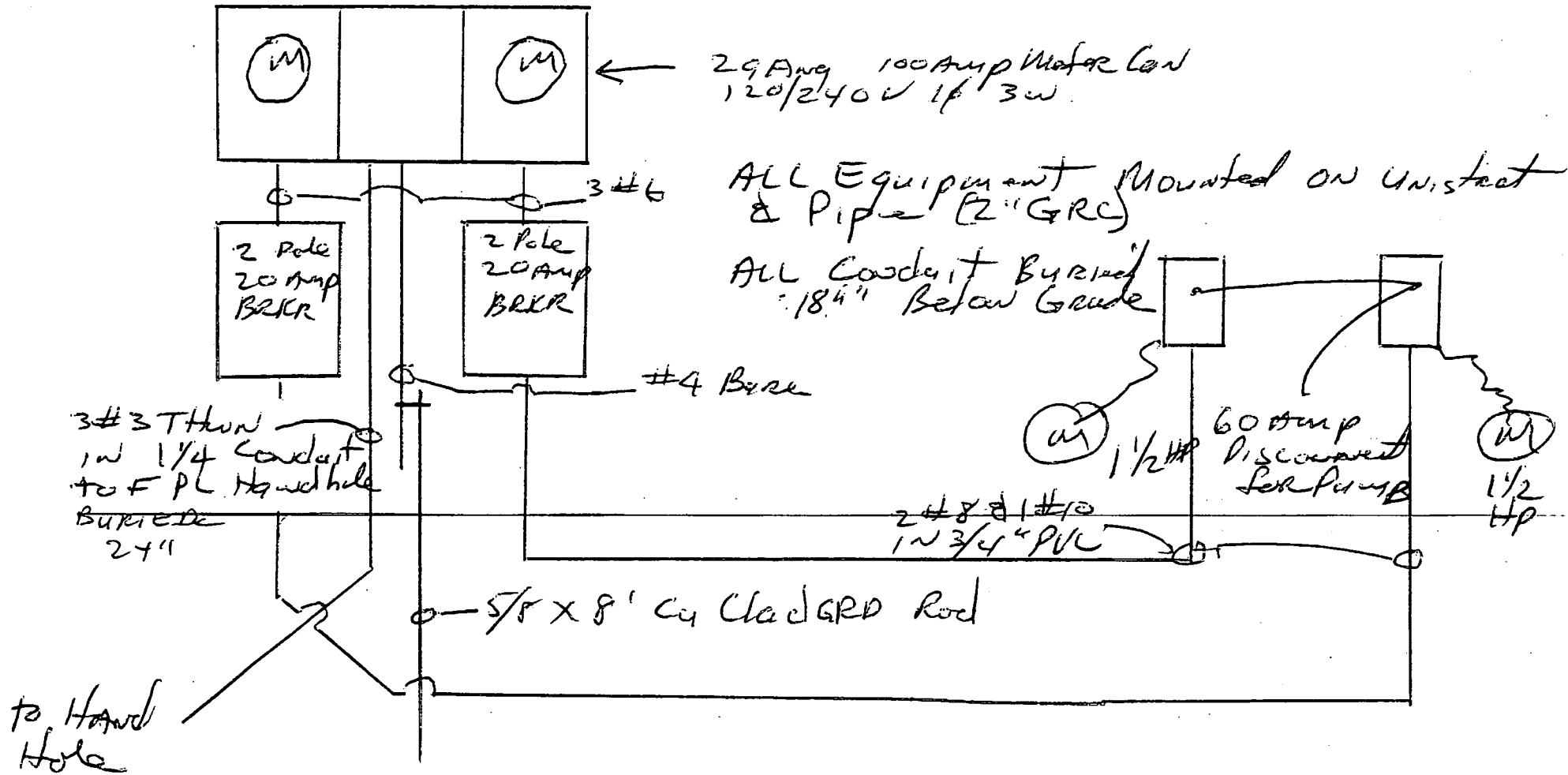




FILE COPY  
**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE 12/5/04  
*[Signature]*  
**BUILDING OFFICIAL**

Jimmy Rowell Electric Serv.  
 2391 SE Dixie Hwy  
 Stuart Florida 34996  
 772-220-9880  
 EC 13002740

McMahon - Pump Service  
 57 S. Sewall's Point Road



Jimmy Rowell Electric  
2391 SE Pkwy Hwy  
Stuart Florida 34996  
772-220-8880  
EC 13002740

FILE COPY

**TOWN OF SEWALL'S POINT**

THESE PLANS HAVE BEEN  
REVIEWED FOR CODE COMPLIANCE

DATE 12/5/06

[Signature]

**BUILDING OFFICIAL**

KNOBLE  
~~1234 Main St~~ - Pump Service  
58 S. Sewall's Point Road

GRANT OF EASEMENT

THIS INDENTURE, Made and entered into this 4<sup>th</sup> day of April, 1974, by and between GORDON P. JENSEN and JULIA E. JENSEN, his wife, Grantors; and FRANK KOTZE and HAZEL J. KOTZE, his wife, of the County of Martin, State of Florida, Grantees;

WHEREAS, the Grantors are seized in fee simple and in possession of lands located in Lot 12, ARBELA, according to the plat thereof filed August 22, 1919 and recorded in Plat Book 3, Page 29, Palm Beach (now Martin County, Florida) Florida Public Records, and that portion of it described below, and

WHEREAS, Grantees are seized in fee simple of a parcel of land near the land of the Grantors, and

WHEREAS, Grantors have agreed in consideration of the sum of TEN (\$10.00) DOLLARS and other good and valuable considerations to grant to Grantees their heirs, assigns, or legal representatives, by virtue of any deeds of conveyances, an easement over the land described below, for the purposes of and in the manner expressed below;

## NOW THIS INDENTURE, WITNESSETH:

That, in pursuance to this Agreement and consideration for the sum of TEN (\$10.00) DOLLARS and other good and valuable considerations, receipt of which is acknowledged, Grantors grant unto Grantees, their heirs and assigns, a utility easement over, across, upon and under the following described property for purposes of maintaining water wells, pumps, and water lines:

Description of utility easement 7.50 feet in width, the centerline of which is described as follows:

Start at the Northwest corner of Lot 6, Lucindia Subdivision, Plat Book 3, Page 130, Public Records of Martin County, Florida; thence run N 62° 41' 25" E along the North line of said Lucindia Subdivision a distance of 38.61 feet; thence run N 27° 18' 35" W a distance of 3.75 feet for the Point of Beginning; thence run N 62° 41' 25" E a distance of 660.00 feet, to the Westerly right of way of Sewall's Point Road.

TO HAVE AND TO HOLD, the utility easement hereby granted unto Grantee, their heirs and assigns as appurtenant to the land of the Grantees.

It is understood that the easement is given upon the express understanding and condition that it may be used by Grantors, their heirs, executors, administrators and assigns in conjunction with the use of the Grantees, their heirs and assigns, and; it is further understood that Grantors, their heirs, assigns and tenants in no way will be bound in the future to improve or maintain the wells, pumps or water lines hereafter or to keep them in repair; nor do Grantors, their heirs and assigns assume any liability or responsibility to Grantees, their heirs and assigns, or any person using the land by imitation, expressed or implied, or by reason of any business conducted with Grantees, their heirs and assigns, or otherwise.

IN WITNESS WHEREOF, the Grantors have set their hands and seals on the day and year first above written.

Witnessed by:

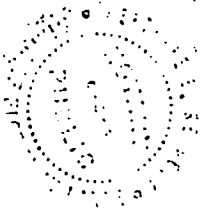
Chris Kottloff  
Leatrice G. Seunsky  
Gordon P. Jensen  
Julia E. Jensen

STATE OF FLORIDA )  
COUNTY OF MARTIN )

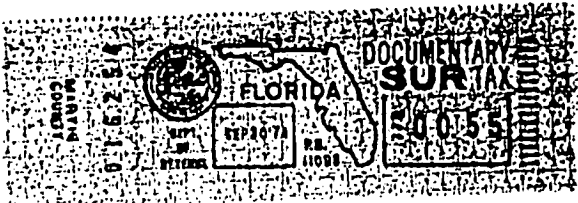
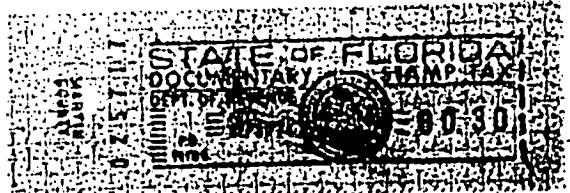
I HEREBY CERTIFY, that on this day, before me, an officer duly authorized in the State aforesaid, in the County aforesaid, to take acknowledgments, personally appeared GORDON P. JENSEN and

JULIA E. JENSEN, his wife, to me known to be the persons described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 11th day of April, 1974.



*Antonia C. Kennedy*  
Notary Public, State of Florida at Large. My commission expires: NOTARY PUBLIC STATE OF FLORIDA AT LARGE MY COMMISSION EXPIRES MAR. 11, 1978 GENERAL INSURANCE UNDERWRITERS, INC.



FILED FOR RECORD  
HARTIN COUNTY, FLA.  
BIA SEP 30 PM 2:47  
CLERK OF CIRCUIT COURT  
HARTIN COUNTY, FLA.

217526

GRANT OF EASEMENT

THIS INDENTURE, Made and entered into this 11th day of April, 1974, by and between GORDON P. JENSEN and JULIA E. JENSEN, his wife, Grantors; and JAMES F. McMAHON and MARIDEL McMAHON, his wife, of the County of Martin, State of Florida, Grantees;

WHEREAS, the Grantors are seized in fee simple and in possession of lands located in Lot 12, ARBELA, according to the Plat thereof filed August 22, 1919 and recorded in Plat Book 3, Page 29, Palm Beach, (now Martin) County, Florida Public Records, and that portion of it described below, and

WHEREAS, Grantees are seized in fee simple of a parcel of land near the land of the Grantors, and

WHEREAS, Grantors have agreed in consideration of the sum of TEN (\$10.00) DOLLARS and other good and valuable considerations to grant to Grantees, their heirs, assigns, or legal representatives, by virtue of any deeds of conveyances, an easement over the land described below, for the purposes of and in the manner expressed below;

NOW THIS INDENTURE, WITNESSETH:

That, in pursuance to this Agreement and consideration for the sum of TEN (\$10.00) DOLLARS and other good and valuable considerations, receipt of which is acknowledged, Grantors grant unto Grantees, their heirs and assigns, a utility easement, over, across, upon and under the following described property for purposes of maintaining water wells, pumps, and water lines:

Description of utility easement 7.5 feet in width, the centerline of which is described as follows:  
Start at the Northwest corner of Lot 6, Lucindia Subdivision, Plat Book 3, Page 130, Public Records of Martin County, Florida, a distance of 38.61 feet; thence run N 27° 18' 35" W a distance of 3.75 feet for the Point of Beginning; thence run N 62° 41' 25" E a distance of 397.00 feet; at this point easement width changes to 6.00 feet and describing the new center line run N 27° 18' 35" W a distance of 199.25 feet.

TO HAVE AND TO HOLD, the utility easement hereby granted unto Grantees, their heirs and assigns as appurtenant to the land of the Grantees.

It is understood that the easement is given upon the express understanding and condition that it may be used by Grantors, their heirs, executors, administrators, and assigns in conjunction with the use of the Grantees, their heirs and assigns and tenants in no way will be bound in the future to improve or maintain the wells, pumps or water lines hereafter or to keep them in repair; nor do Grantors, their heirs and assigns, assume any liability or responsibility to Grantees, their heirs, and assigns, or any person using the land by imitation, expressed or implied, or by reason of any business conducted with Grantees, their heirs and assigns, or otherwise.

IN WITNESS WHEREOF, the Grantors have set their hands and seals on the day and year first above written.

Witnessed By:

Chris Kuchel  
Leotrude C. Kennedy

Gordon P. Jensen  
Gordon P. Jensen  
Julia E. Jensen  
Julia E. Jensen

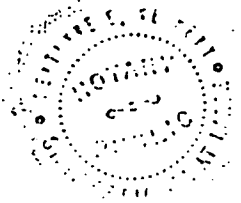
STATE of Florida )  
                          )  
COUNTY OF MARTIN )

I HEREBY CERTIFY, that on this day, before me, an officer duly authorized in the State aforesaid, in the County aforesaid, to take acknowledgments, personally appeared GORDON P. JENSEN and JULIA E. JENSEN, his wife, to me known to be the persons described in and who executed the foregoing instrument and they



acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State  
last aforesaid this 11th day of APRIL, 1974.



*Arthur D. Kennedy*

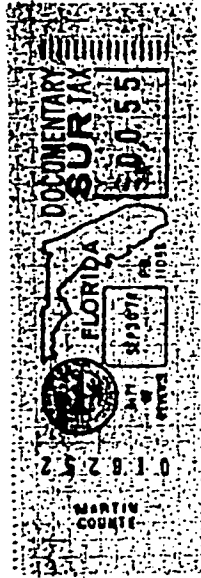
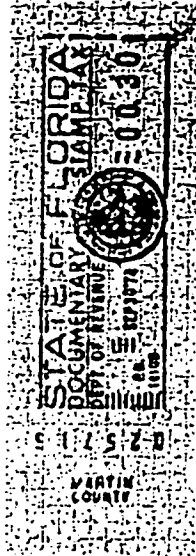
Notary Public, State of Florida

Large. My Commission expires:

NOTARY PUBLIC STATE OF FLORIDA AT LARGE

MY COMMISSION EXPIRES MARCH 11, 1978

GENERAL INSURANCE UNDERWRITERS, INC.



FILED FOR RECORD  
MARTIN COUNTY, FLA.

1974 SEP 30 PM 2:47

LOUISE V. ISAACS  
CLERK OF CIRCUIT COURT  
BY *LL* D.C.

001 378 001642

# Jimmy Rowell Electric Service

P.O. Box 2262      Stuart, Florida 34995  
EC 13002740  
(772) 220-8880      FAX (772) 220-2755

November 22, 2006.

James McMahon  
57 South Sewall's Point Road  
Sewall's Point, Florida 34996

Re: Irrigation Well Services

We propose to furnish labor and material for a two gang meter can and up to a 50 amp service for each pump. Service will be underground from meter pedestal to FPL hand hole. Wiring to each pump will be 3/4" PVC conduit, buried 18" deep, with 2 - #8 thwn and 1 - #10 thwn copper wire. A disconnect will be supplied for each pump. The #8 thwn are being installed to overcome any voltage drop.

Lot Price for the above work \*\*\*\*Three Thousand Two Hundred Dollars (\$3,200.00)\*\*\*\*. That would be \$1,600.00 each of you.

The cost for the furthest pump would be an additional \$2.56 per foot for the distance between the pumps.

## **Terms: Due and Payable on Completion of Work.**

This proposal may be withdrawn by us if not accepted within ten days.

All material is guaranteed to be as specified. All work to be completed in a workman like manner according to standard. Any alteration or deviation from above specifications involving extra cost will be executed only upon written orders, and will become an extra charge over and above the estimate. Owner to carry fire, tornado and other necessary insurance. Our workers are covered by Workers Compensation Insurance.

James M. Rowell

Acceptance of Proposal - The above prices, Specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date of Acceptance \_\_\_\_\_

Signature \_\_\_\_\_

# Jimmy Rowell Electric Service

P.O. Box 2262      Stuart, Florida 34995

EC 13002740

(772) 220-8880      FAX (772) 220-2755

December 7, 2006

Mr. John Stanton  
6 Sabal Court  
Sewalls Point, Florida 34996

Re: Work for McMahon and Knobel well & pump services

Mr. Stanton:

In an effort to keep you informed on the project in your rear yard, the following is the schedule of events –

Permits issued 12/05/06, copy attached

Utility locates ordered 12/07/06 – Locate ticket #341601723

Utilities located by 8:00AM 12/12/06

Jimmy Rowell Electric work to start 12/12/06

Inspection by 12/17/06

Connection by FPL – to be determined

Respectfully



Jimmy Rowell

Copy: John Adams

Jim McMahon

**Valerie Meyer**

---

**From:** "Valerie Meyer" <vmeyer@sewallspoint.martin.fl.us>  
**To:** "FPL" <tc\_inspections@fpl.com>  
**Sent:** Friday, December 15, 2006 9:11 AM  
**Subject:** 6 Sabal Ct

Two new meters need to be installed - they are irrigation pumps located at the rear of 6 Sabal Ct, Sewall's Point - they are on a utility easement and the addresses are on the meter boxes for each location -

If you have any questions please contact me -

Thank you,

Valerie Meyer  
Bldg Dept Clerk  
Town of Sewall's Point  
772-287-2455 Ext 13

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 12-15, 2006

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8465	Yu	Demo-final	PASS	CLOSE
4	131 S. River Rd John O'Connell Inc.			INSPECTOR: <i>[Signature]</i>
0070	Karr	FENCE	PASS	CLOSE
9	1 PALAMA WAY			INSPECTOR: <i>[Signature]</i>
8466	Mc-Malon Easement	Final-meter <sup>pumps</sup>	PASS	CLOSE
1A	6 Sable Ct Jimmy Rowell			INSPECTOR: <i>[Signature]</i>
8467	Knobel - Easement	Final-meter <sup>pumps</sup>	PASS	CLOSE
1A	6 Sable Ct Jimmy Rowell	OFF 57 S.S.P.A.		INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>

OTHER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 12-15, 2006

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8465	Yu	Demo-final	PASS	CLOSE
4	131 S. River Rd John O'Connell Inc.			INSPECTOR: <i>[Signature]</i>
0070	Karr	FENCE	PASS	CLOSE
9	1 PALAMA WAY			INSPECTOR: <i>[Signature]</i>
8466	McMahon Easement	Final - <sup>ump</sup> meter	PASS	CLOSE
1A	6 Sable Ct Jimmy Lowell			INSPECTOR: <i>[Signature]</i>
<del>8467</del>	<del>Knobel Easement</del>	<del>Final - <sup>ump</sup> meter</del>	<del>PASS</del>	<del>CLOSE</del>
1A	6 Sable Ct Jimmy Lowell	OFF 57 S.S.P.A.		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: \_\_\_\_\_

**8491**

**SIDING REPAIR**

MASTER PERMIT NO. \_\_\_\_\_

### TOWN OF SEWALL'S POINT

Date 1-12-07

BUILDING PERMIT NO. 8491

Building to be erected for Stanton

Type of Permit Wood repair

Applied for by O/B

(Contractor) Building Fee 35-

Subdivision Pedgeland Lot 6 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 6 Subal Ct

Impact Fee \_\_\_\_\_

Type of structure SFR

A/C Fee \_\_\_\_\_

Electrical Fee \_\_\_\_\_

Parcel Control Number:  
13841-011-000-000-606-0000

Plumbing Fee \_\_\_\_\_

Amount Paid \$35 Check # 524 Cash \_\_\_\_\_

Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 600-

TOTAL Fees 35-

Signed [Signature]

Signed [Signature]

Applicant

Town Building Official

## PERMIT

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

## INSPECTIONS

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



Town of Sewall's Point  
BUILDING PERMIT APPLICATION

Date: 1/12/07

Permit Number: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: JOHN P STANTON Phone (Day) 772 286 5700 (Fax) \_\_\_\_\_

Job Site Address: 6 SARAL COURT City: STUART State: FL Zip: 34994

Legal Desc. Property (Subd/Lot/Block) RIDGELAND LOT 6 Parcel Number: 138410110000006060000

Owner Address (if different): same City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Description of Work To Be Done: MINOR WOOD REPAIR (by side door of garage)

WILL OWNER BE THE CONTRACTOR?:

YES  NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 600.00

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_

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

Method of Determining Fair Market Value: \_\_\_\_\_

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

CONTRACTOR/Company: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Martin County License Number: \_\_\_\_\_

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

ARCHITECT \_\_\_\_\_ Lic.#: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER \_\_\_\_\_ Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

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 this county and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004  
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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

OWNER OR AGENT SIGNATURE (required)

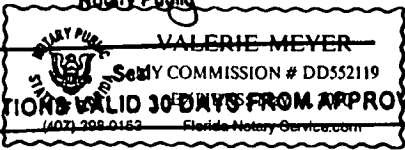
State of Florida, County of: Martin

This the 12th day of January, 2007

by John Stanton who is personally known to me or produced FL# S353-475-49-138-0

as identification. Valerie Meyer  
Notary Public

My Commission Expires: \_\_\_\_\_



CONTRACTOR SIGNATURE (required)

On State of Florida, County of: \_\_\_\_\_

This the \_\_\_\_\_ day of \_\_\_\_\_, 2007

by \_\_\_\_\_ who is personally known to me or produced \_\_\_\_\_

As identification, \_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

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

Abandoned: ~~Removed~~ 6/12/07 - 6/12/08  
fd 8/20/07 cash

MASTER PERMIT NO. \_\_\_\_\_

**TOWN OF SEWALL'S POINT**

Date 1-12-07

BUILDING PERMIT NO. 8491

Building to be erected for Stanton

Type of Permit Wood repair

Applied for by O/B

(Contractor) Building Fee 35-

Subdivision Pedgeland Lot 6 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 6 Subal Ct

Impact Fee \_\_\_\_\_

Type of structure SFR

A/C Fee \_\_\_\_\_

Parcel Control Number:

Electrical Fee \_\_\_\_\_

13841-011-000-000-606-0000

Plumbing Fee \_\_\_\_\_

Amount Paid \$35 Check # 524 Cash \_\_\_\_\_

Roofing Fee \_\_\_\_\_

Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 600-

TOTAL Fees 35-

Signed [Signature]

Signed John Adams @

Applicant

Town Building Official

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 6-4, 2008

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8912	Klose	Final	PASS	Close
2	2 Parker St Blue Water Marine			INSPECTOR: <i>OW</i>
8878	Bausch	Final	FAIL	
5	205 Sewalls Heaton Roof			INSPECTOR: <i>OW</i>
8891	Kilbride	Final	PASS	Close
3	4 Lantana Ln OB	fence		INSPECTOR: <i>OW</i>
8867	Belen	UG Gas	FAIL	
4	10 Palmetto Ken Wendell	tank	PASS	INSPECTOR: <i>OW</i>
<del>8889</del>	<del>Palmetto</del>			
<del>8889</del>	<del>Palmetto</del>			
<del>8889</del>	<del>Palmetto</del>			INSPECTOR:
8887	Marley	Final	FAIL	
1	39 W High Rd Thomas Kern Elec			INSPECTOR: <i>OW</i>
8848	Nohel	dry-in	PASS	
1A	26 W High Rd Vincent Montalto			INSPECTOR: <i>OW</i>
OTHER:				
<del>8811</del>	<del>Shannon</del>	<del>Final</del>	<del>PASS</del>	<del>Close</del>
<del>8811</del>	<del>6 Sabal Ct</del>	<del>WOODEN POOL</del>	<del>PASS</del>	<del>OW</del>

**9438**

**REROOF**



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:	9438	DATE ISSUED:	MAY 18, 2010
SCOPE OF WORK:	REROOF (FLAT ROOF)		
CONDITIONS:			
CONTRACTOR:	DAN BUTCHER ROOFING		
PARCEL CONTROL NUMBER:	013841-011-000-000606	SUBDIVISION	RIDGELAND - LOT 6
CONSTRUCTION ADDRESS:	6 SABAL CT		
OWNER NAME:	STANTON		
QUALIFIER:	DAN BUTCHER	CONTACT PHONE NUMBER:	221-3252

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

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

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

### REQUIRED INSPECTIONS

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

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

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

Permit Number: 9438

Date: 5/14/2010  
 OWNER/TITLEHOLDER NAME: John P Stanton Phone (Day) 286-5900 (Fax) \_\_\_\_\_  
 Job Site Address: 6 Sabal Ct City: Stuart State: FL Zip: 34996  
 Legal Description: Ridgeland Lot 6 Parcel Control Number: 01-38-41-011-000-00060-6  
 Owner Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Scope of work (please be specific): Remove torch down flat roofs... upper + lower... replace

**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: \$ 4900  
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
 Is subject property located in flood hazard area? VE10  AE9  AE8   
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
 Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
 (Fair Market Value of the Primary Structure only, Minus the land value)  
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

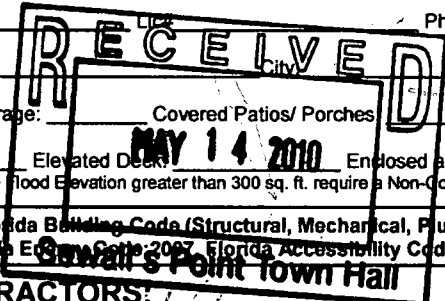
**CONTRACTOR/Company:** Dan Butler Roofing Inc Phone: 221-3252 Fax: 223-1012  
 Street: 1060 Seabeverly Terrace City: Stuart State: FL Zip: 34997  
 State License Number: CCC1326250 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_

**LOCAL CONTACT:** Dan Butler Phone Number: 772-260 4828

**DESIGN PROFESSIONAL:** \_\_\_\_\_ Phone Number: \_\_\_\_\_  
 Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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



**NOTICES TO OWNERS AND CONTRACTORS:**

- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT, MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
- 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.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 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)  
John P Stanton  
 State of Florida, County of: MARTIN  
 This the 6 day of MAY, 2010  
 by JOHN P. STANTON who is personally  
 known to me or produced DRIVERS LICENSE  
 as identification. [Signature]

**CONTRACTOR SIGNATURE: (required)**  
Dan Butler  
 On State of Florida, County of: MARTIN  
 This the 14th day of MAY, 2010  
 by Dan Butler who is personally  
 known to me or produced PERSONALLY KNOWN  
 as identification. Kathy Adams

My Commission Expires: \_\_\_\_\_  
 Notary Public State of Florida  
 Lynne Ellen Butcher  
 My Commission #00010644  
 Expires 10/10/2012

My Commission Expires: \_\_\_\_\_  
 Notary Public State of Florida  
 My Commission Expires Nov 6, 2010

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

LICENSED GENERAL, BUILDING OR RESIDENTIAL CONTRACTORS' REROOF WINDSTORM LOSS MITIGATION COMPLIANCE AFFIDAVIT

A RESIDENTIAL STRUCTURE VALUED AT \$300,000 OR MORE SHALL COMPLY WITH THE FOLLOWING:

- Roof to wall connections must be enhanced up to 15% additional cost of the reroofing cost.
• A certified or registered general, building or residential contractor compliance affidavit must accompany the re-roof permit application and submit details to perform the following:
1. Sufficient amount of eave sheathing shall be removed to view 6 ft. of roof rafters.
2. Wherever a strap is missing or an existing strap has fewer than 4 fasteners on each end of connection with the wall, the connection shall be strengthened by adding:
a. Metal connectors, clips, straps and fasteners to achieve an uplift capacity as specified in Table 201.3 OR
b. Approved strap ties or right angle gusset brackets with a minimum uplift capacity of 500 lbs shall be installed to the top plate or masonry wall below
c. Refer to sections 201.3.1 to 201.3.4 for prescriptive requirements.

A RESIDENTIAL STRUCTURE VALUED AT \$750,000 OR MORE SHALL COMPLY WITH THE FOLLOWING:

When any activity requiring a building permit that is applied for on or after July 1, 2008, and for which the estimated cost is \$50,000 or more for a building that is located in the wind borne debris region as defined in s. 1609.2 of the Florida Building Code, Building:

- a. Opening protections as required within the Florida Building Code, Building or Florida Building Code, Residential for new construction shall be provided.

TO BE COMPLETED IF INSURED VALUE OF SINGLE FAMILY IS OVER \$300,000.00 AND WAS PERMITTED PRIOR TO MARCH 1, 2002.

YEAR PERMITTED \_\_\_\_\_ INSURED OR P.A. IMPROVED VALUE \$ \_\_\_\_\_

DETAILS OF MITIGATION WORK TO BE PERFORMED (Add additional sheets if necessary):

\_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

JOB SITE ADDRESS: \_\_\_\_\_

QUALIFIER NAME: \_\_\_\_\_ LICENSE NO.: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ PHONE NO.: \_\_\_\_\_

[Signature]
Qualifier's Signature

[Signature]
Owner's Signature

Date: \_\_\_\_\_

Date: 5/6/10

Sworn to and subscribed before me this 14th day of MAY 20 10

Sworn to and subscribed before me this 6 day of MAY 20 10

By DAN BUTCHER

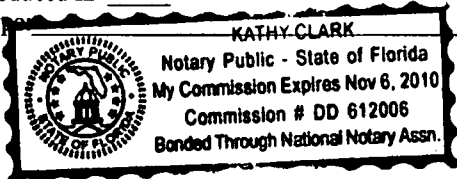
By JOHN P. STANTON

[Signature]
Notary Public, State of Florida
Personally known to me [check]

[Signature]
Notary Public, State of Florida
Personally known to me [check]

Produced ID \_\_\_\_\_
Type: \_\_\_\_\_

Produced ID [check]
Type: D.K.
Notary Public State of Florida
Lynne Ellen Butcher
My Commission DD8108
Expires 10/10/2012 4



5353-475-49-138-0

**RESIDENTIAL REROOF WINDSTORM LOSS  
MITIGATION CERTIFICATION (FLORIDA STATUTE 553.844)**

The following information is to be provided by roofing contractor or owner/builder on all re-roof applications for the purpose of obtaining compliance with recent changes to State Statute and referenced "Hurricane Mitigation Manual". Effective date: October 1, 2007.

Note: These requirements apply to residential structures built prior to implementation of the FBC on March 1, 2002.

- Value: show proof of insured value of residential structure or a copy of the ad-valorem tax value.
- Provide copy of contract

All re-roofs regardless of value shall comply with the following:

Re-nailing: All sheathing and decking shall be re-nailed per section 201.1 and a secondary water barrier installed.

- Existing fasteners that are 8d clipped head, round head or ring shank and spaced 6 in. or less o.c. may be counted. Additional fasteners shall be 8d ring shank nails with round heads spaced at 6 in. o.c. along framing.
- Indicate below which method is to be used to satisfy the secondary water barrier requirements:

\_\_\_\_\_ All joints in roof sheathing shall be covered with a minimum of 4 in. strip of self-adhering polymer modified bitumen tape. Wood deck and self-adhering tape shall be covered by one layer of approved underlayment.

\_\_\_\_\_ Entire roof deck shall be covered with an approved self-adhering polymer modified bitumen cap sheet. No additional underlayment is required.

\_\_\_\_\_ Outside of the HVHZ, an underlayment complying with section 1507.2.3 of the Florida Building Code, Building fastened as described below or a layer of asphalt impregnated approved #30 felt shall be installed. The felt is to be fastened with 1" round plastic cap or metal cap nails, attached to a nailable deck in a grid pattern of 12 inches (305 mm) staggered between the overlaps, with 6-inch (152 mm) spacing at the overlaps. For slopes of 2:12 to 4:12 an additional layer of felt shall be installed in a single-fashion and lapped 19" and fastened as described above. (No additional underlayment shall be required over the top of this sheet.)

✓  
\_\_\_\_\_ Exception: An approved 30# underlayment installed per HVHZ using nails and tin-tags and covered with an approved self-adhering polymer modified bitumen cap sheet or an approved cap sheet hot-mopped shall be deemed to meet the requirements for secondary water barrier.

Residential Structures valued at \$300,000 or more shall comply with the following:

- Roof to wall connections must be enhanced up to 15% additional cost of the re-roofing cost.
- A certified or registered general, building or residential contractor compliance affidavit must accompany the re-roof permit application and submit details to perform the following:
  1. Sufficient amount of eave sheathing shall be removed to view 6 ft. of roof rafters.
  2. Wherever a strap is missing or an existing strap has fewer than 4 fasteners on each end of connection with the wall, the connection shall be strengthened by adding:
    - a. Metal connectors, clips, straps and fasteners to achieve an uplift capacity as specified in Table 201.3 OR
    - b. Approved strap ties or right angle gusset brackets with a minimum uplift capacity of 500 lbs shall be installed to the top plate or masonry wall below
    - c. Refer to sections 201.3.1 to 201.3.4 for prescriptive requirements.



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

PERMIT #: \_\_\_\_\_ TAX FOLIO #: 01-38-41-011-000-00260-6

STATE OF FLORIDA COUNTY OF MARTIN

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

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

RIDGELAND LOT 6, 6 SABAL CT.

GENERAL DESCRIPTION OF IMPROVEMENT: REMOVE EXISTING FLAT DECKS / RE-ROOF FLAT DECKS

OWNER NAME: JOHN P. STANTON  
ADDRESS: 6 SABAL CT., STUART FL 34996  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

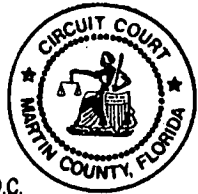
INTEREST IN PROPERTY: OWNER  
NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER): \_\_\_\_\_

CONTRACTOR: DDN BUTCHER ROOFING INC. STATE OF FLORIDA  
ADDRESS: 1620 SW BEVERLY TERRACE, STUART, MARTIN COUNTY, FL 34997  
PHONE NUMBER: 772-221-3252 FAX NUMBER: 772-223-1012

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

LENDER/MORTGAGE COMPANY: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.  
BY: Marsha Ewing MARSHA EWING, CLERK  
DATE: 5-18-10 D.C.



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

NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES \_\_\_\_\_ OF \_\_\_\_\_ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B),

FLORIDA STATUTES: \_\_\_\_\_  
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

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

**WARNING TO OWNER:** ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

[Signature]  
SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

SIGNATORY'S TITLE/OFFICE OWNER

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 6 DAY OF May, 2010

BY: JOHN P. STANTON AS OWNER FOR \_\_\_\_\_  
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN \_\_\_\_\_ OR PRODUCED IDENTIFICATION   
TYPE OF IDENTIFICATION PRODUCED D.L.

[Signature]  
NOTARY SIGNATURE/ SEAL  
Notary Public State of Florida  
Lynne Ellen Butcher  
My Commission DD810644  
Expires 10/10/2012

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

[Signature]  
(Signature of Natural Person Signing Above)

INSTR # 2211013 OR BK 02454 PG 1769 RECD 05/18/2010 10:16:43 AM  
Pg 1769 (1 of 1)  
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S Phoenix

RE-ROOF CERTIFICATION

PERMIT # \_\_\_\_\_

CONTRACTOR'S NAME: Dan Butler PHONE #: 221-3252 FAX: 223 1012

OWNER'S NAME: John P. Stanton

CONSTRUCTION ADDRESS: 6 Sabal Ct CITY Stuart STATE FL

RE-ROOF:  RESIDENTIAL(SINGLE FAMILY) Flat Roof only  
 COMMERCIAL \*\*--REMOVE/REINSTALL ROOF TOP HVAC EQUIP  YES  NO

\*\*...DISCONNECT/RECONNECT HVAC ELECTRIC  YES  NO

\*\* REQUIRES A CONTRACTOR VERIFICATION FORM (HVAC AND/OR ELECTRICAL) W/ PERMIT APPLICATION

RE-ROOF DEEMED TO COMPLY WITH 553.844 F. S.  YES  NO - INSURED VALUE OF RESIDENCE \_\_\_\_\_

ROOF TYPE:  HIP  BOSTON-HIP  GABLE  FLAT  OTHER

ROOF PITCH:        /12 SLOPE

ROOF DECK:\*  SHEATH-OVER - (APPLYING PLYWOOD PANELS OVER EXISTING SPACED

RE-SHEATH - (REMOVAL OF SPACED SHEATHING/PLYWOOD FOR APPLICATION OF NEW PLYWOOD PANELS) - REQUIRES USE OF MINIMUM PLYWOOD AS PER FLORIDA BUILDING CODE "2004".

SPACED SHEATH FILL-IN - SPACES BETWEEN EXISTING SPACED-SHEATHING BOARD MAY BE FILLED-IN WITH BOARDS OF THE SAME SIZE AND THICKNESS TO PROVIDE A CLOSELY FITTED SOLID DECK NAIL NEW BOARDS AS PER FLORIDA BUILDING CODE "2004".

EXISTING DECK TO REMAIN/REPAIRED& RENAILED

EXISTING ROOF COVERING: Modified Bitumen EXISTING COVERING TO BE REMOVED? YES  NO

PROPOSED NEW ROOF COVERING: Modified Bitumen Torch Down

MANUFACTURER GAF PRODUCT NAME Robberaid PRODUCT APPR # 09-0224.01

(APPROVED ROOF COVERING MATERIAL WITH CURRENT FLORIDA PRODUCT APPROVAL)  
MANUFACTURER'S INSTALLATION SPECS MUST BE ON THE JOB SITE AT TIME OF INSPECTION.

\*WHEN CONCRETE/CLAY TILES REPLACE ANY OTHER TYPE OF ROOF COVERING, THE EXISTING TRUSSES SHALL BE INSPECTED BY A FLORIDA REGISTERED ARCHITECT OR ENGINEER TO VERIFY ADEQUACY OF THE TRUSSES TO SUPPORT INCREASED DEAD LOADS. AN ENGINEERING INSPECTION REPORT SHALL BE SUBMITTED WITH THE PERMIT APPLICATION.

PROPOSED FLASHING:  GALV/STEEL  ALUMINUM  COPPER  OTHER \_\_\_\_\_

RIDGEVENT TO BE INSTALLED:  YES  NO

DESCRIPTION OF WORK: Remove existing modified bitumen... replace with 1ply 30# 1ply waterproof base sheet 1ply modified cap sheet

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.

Dan Butler  
SIGNATURE OF CONTRACTOR

DATE: 5/14/2010

FILE COPY  
TOWN OF SEWALL'S POINT  
THESE PLANS HAVE BEEN  
REVIEWED FOR-CODE COMPLIANCE  
DATE 5-17-10  
BUILDING OFFICIAL

## ROOFING MATERIAL LIST

NO	MATERIAL	QUANTITY	UNIT	REMARKS
0	GAF Timberline 30 shingles	25	SQ	EXAMPLE
6	30# Astm felt	6	12	
*	4" Galvanized drip	200 LF		
*	1 box 8dringshank			
*	43# base sheet	6		
*	white granulated modified Torch down	12		
*	30 LF matching 26 Gauge mill finish Acrylume parapet cap			

TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY



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

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

**NOTICE OF ACCEPTANCE (NOA)**

**GAF Material Corporation  
1361 Alps Road  
Wayne, NJ 07470**

**SCOPE:**

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by the BCCO and accepted by the Building Code and Product Review Committee to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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

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

**DESCRIPTION: GAF RUBEROID® Modified Bitumen Roof System for Wood Decks.**

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

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

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

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

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

This NOA revises NOA No. 07-1203.01 and consists of pages 1 through 31.

The submitted documentation was reviewed by *[Signature]* L. Acebo.



*[Handwritten Signature]*

**NOA No.: 09-0224.01  
Expiration Date: 11/06/13  
Approval Date: 04/08/09  
Page 1 of 31**

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri **5-21-10** Page 1 of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
AM	<del>Murphy, Laurie</del>	<del>meeting regarding fences 150k??</del>	<del>Pool fence</del>	<del>Spindal fence</del>
	<del>8 Heron's Nest 485-0505 Cell</del>	<del></del>	<del>add to wood fence across river</del>	<del>3 sides water</del>
			Front-	INSPECTOR <u>    </u> 2' from care
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9379	Balfout	1st tie beam		
	103 Hillcrest		PARTIAL	
	Balfout Const		PASS	INSPECTOR <u>    </u>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
<del>9428</del>	<del>    </del>	<del>    </del>	<del>    </del>	<del>    </del>
PM	Don Butcher			INSPECTOR <u>    </u>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
<del>9389</del>	<del>    </del>	<del>    </del>	<del>    </del>	<del>    </del>
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	47 S SPT RD	work up permit		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9388	SHARFI	P. POUL		
	78 N. SPT RD	STAIRS	PASS	
	STRATICON	& STAIR WALL		INSPECTOR <u>    </u>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
<del>9447</del>	<del>GARRETT ELBORTER</del>	<del>    </del>	<del>    </del>	<del>    </del>
	96 S.S.P. RD	AK FINER	RESET FOR MONDAY	
	48459			INSPECTOR

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri **4-10-13** Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10156	Robertson 173 S River A+G Pools	rough plumbing Pool PIPING	PASS	INSPECTOR <i>[Signature]</i>
10246	Elliott 25 W High Pt Prop Sew/Elite	Final gas tank & lines	PASS	CLOSE INSPECTOR <i>[Signature]</i>
9738	Stanton 6 Sabal Ct Aan Butcher Roof	Final flat roof	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10387	NOVINS 111 S Sewalls Pt Rd PMV-Co	FINAL DRIVEWAY	PASS	CLOSE INSPECTOR <i>[Signature]</i>
<del>10377</del>	<del>TURNER 81 S RIVER RD AAR TER</del>	<del>A/C FINAL</del>		INSPECTOR
Tree	WILKINSON 8 OAKWOOD	TREE	OK	INSPECTOR
Tree	Clifford 20N River	Tree	OK	INSPECTOR

**10408**

**SIDING REPAIR**



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:	10408	DATE ISSUED:	APRIL 5, 2013
SCOPE OF WORK:	SIDING REPAIRS		
CONTRACTOR:	KARAM HADDAD LLC		
PARCEL CONTROL NUMBER:	013841011-000-000606	SUBDIVISION	RIDGELAND - LOT 6
CONSTRUCTION ADDRESS:	6 SABAL CT		
OWNER NAME:	STANTON		
QUALIFIER:	KARAM HADDAD	CONTACT PHONE NUMBER:	370-8312

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE  
 CALL 287-2455 - 8:00AM TO 4:00PM      INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY**

### INSPECTIONS

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

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



# Town of Sewall's Point

## BUILDING PERMIT APPLICATION

Date: 3/15/13 Permit Number: 10408  
 OWNER/LESSEE NAME: JOHN STAKTON Phone (Day) 772 286 5900 (Fax) \_\_\_\_\_  
 Job Site Address: 6 SDAAL CT City: STARBUCK State: FL Zip: 34996  
 Legal Description \_\_\_\_\_ Parcel Control Number: \_\_\_\_\_  
 Fee Simple Holder Name: same Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**\*SCOPE OF WORK (PLEASE BE SPECIFIC):** REPLACE 5/8 1x6 SIDING

**WILL OWNER BE THE CONTRACTOR?**  
 (If yes, Owner Builder questionnaire must accompany application)  
 YES \_\_\_\_\_ NO X  
**Has a Zoning Variance ever been granted on this property?**  
 YES \_\_\_\_\_ (YEAR) \_\_\_\_\_ NO X  
 (Must include a copy of all variance approvals with application)

**COST AND VALUES:** (Required on ALL permit applications)  
 Estimated Value of Improvements: \$ 1200  
 (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: KARAM HADDAD LLC Phone: 202-390-8312 Fax: 202-0875  
 Qualifiers name: KARAN HADDAD Street: 6422 SEC/Airport PI City: NAUSEA State: FL Zip: 33455  
 State License Number: CR029153 OR: \_\_\_\_\_ Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_

LOCAL CONTACT: Scott Holmes Bldg Inc. Phone Number: 220-4780

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:**

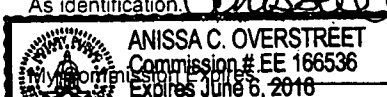
- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST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

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:  
 X [Signature]  
 State of Florida, County of: Martin  
 On This the 3 day of April, 2013  
 by John Stakton who is personally  
 known to me or produced FL DL 5353475491380  
 As identification [Signature]  
 My Commission Expires 6/6/16

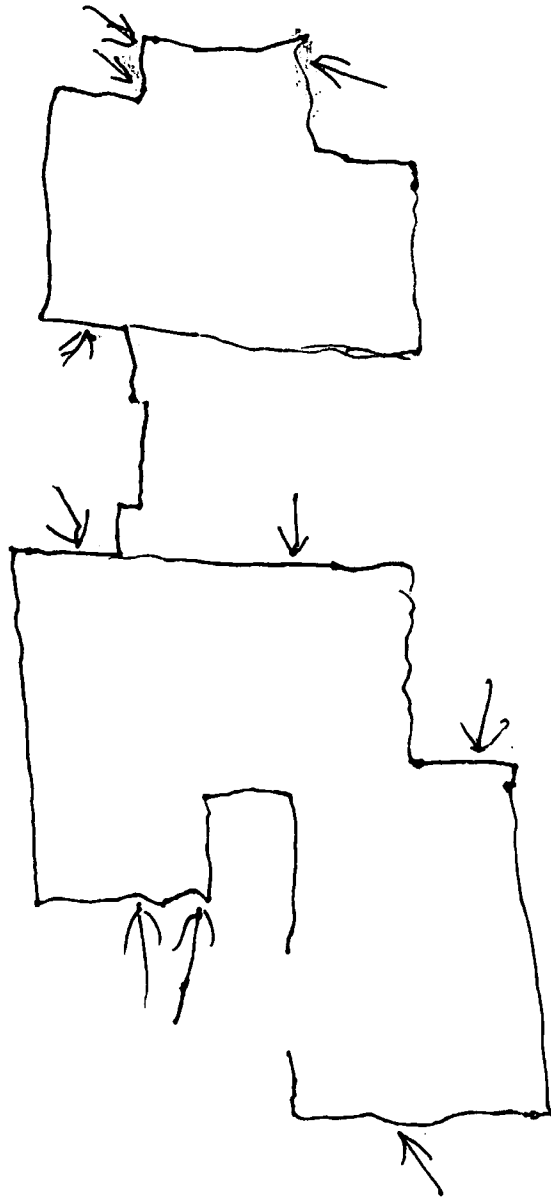
CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:  
 X [Signature]  
 State of Florida, County of: Martin  
 On This the 3 day of April, 2013  
 by Karam Haddad who is personally  
 known to me or produced \_\_\_\_\_  
 As identification [Signature]  
 My Commission Expires 6/6/16



SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 10 MONTHS OF APPROVAL AND INSPECTION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

Replacing existing RBB siding w/ 8 in  
galv. nails. 6" apart.

TOWN OF SEWALL'S POINT  
BUILDING DEPARTMENT  
FILE COPY





Florida Department of  
Business & Professional  
Regulation

[BCIS Home](#) | [Log In](#) | [User Registration](#) | [Hot Topics](#) | [Submit Surcharge](#) | [Stats & Facts](#) | [Publications](#) | [FBC Staff](#) | [BCIS Site Map](#) | [Links](#) | [Search](#)



**Product Approval**  
USER: Public User

License efficiently. Regulate fairly.

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



FL #	FL2524-R4										
Application Type	Revision										
Code Version	2010										
Application Status	Approved										
Comments											
Archived	<input type="checkbox"/>										
Product Manufacturer	Georgia Pacific-Gypsum										
Address/Phone/Email	2861 Miller Road Decatur, GA 30035 (770) 987-5190 Ext 110104 feesguer@gapac.com										
Authorized Signature	Fabio Esguerra feesguer@gapac.com										
Technical Representative	Anne H. Ksionzyk										
Address/Phone/Email	2861 Miller Road Decatur, GA 30033 (770) 987-5190 Ext 110110 ahksionz@gapac.com										
Quality Assurance Representative											
Address/Phone/Email											
Category	Panel Walls										
Subcategory	Exterior Insulation Finish System										
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received										
Florida Engineer or Architect Name who developed the Evaluation Report	William R. Heiden										
Florida License	PE-58523										
Quality Assurance Entity	Progressive Engineering Inc.										
Quality Assurance Contract Expiration Date	06/12/2013										
Validated By	Kevin M. Finn, P.E. <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received										
Certificate of Independence	<a href="#">FL2524 R4 COI CERT OF INDEPENDENCE.pdf</a>										
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th><u>Standard</u></th> <th><u>Year</u></th> </tr> </thead> <tbody> <tr> <td>ASCE 7</td> <td>2010</td> </tr> <tr> <td>ASTM C1177</td> <td>2006</td> </tr> <tr> <td>ASTM C473</td> <td>2006</td> </tr> <tr> <td>ASTM E330</td> <td>2002</td> </tr> </tbody> </table>	<u>Standard</u>	<u>Year</u>	ASCE 7	2010	ASTM C1177	2006	ASTM C473	2006	ASTM E330	2002
<u>Standard</u>	<u>Year</u>										
ASCE 7	2010										
ASTM C1177	2006										
ASTM C473	2006										
ASTM E330	2002										
Equivalence of Product Standards Certified By											
Sections from the Code											
Product Approval Method	Method 1 Option D										

Date Submitted 02/09/2012  
 Date Validated 06/27/2012  
 Date Pending FBC Approval 07/02/2012  
 Date Approved 08/07/2012

**Summary of Products**

FL #	Model, Number or Name	Description
2524.1	DensGlass Gold Sheathing	Exterior wall sheathing
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other:		<b>Installation Instructions</b> <a href="#">FL2524_R4_II_FL2524_R4_II_FL2524_Installation_Instructions_0111.pdf</a> Verified By: ICC Evaluation Service, LLC Created by Independent Third Party:
		<b>Evaluation Reports</b> <a href="#">FL2524_R4_AE_Georgia_Pacific_DensGlass - Florida PER v2.0.pdf</a> Created by Independent Third Party: Yes
2524.2	DensGlass Sheathing	Exterior wall sheathing
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other:		<b>Installation Instructions</b> <a href="#">FL2524_R4_II_FL2524_Installation_Instructions_0111.pdf</a> Verified By: William R. Heiden 58523 Created by Independent Third Party: No
		<b>Evaluation Reports</b> <a href="#">FL2524_R4_AE_Georgia_Pacific_DensGlass - Florida PER v2.0.pdf</a> Created by Independent Third Party: Yes

[Back](#) [Next](#)

Contact Us :: [1940 North Monroe Street, Tallahassee FL 32399](#) Phone: 850-487-1824

The State of Florida is an AA/EEO employer. [Copyright 2007-2010 State of Florida](#). :: [Privacy Statement](#) :: [Accessibility Statement](#) :: [Refund Statement](#)

Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. \*Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:



# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri **5-30-13** Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10027	Goudis 25 Skier Team Parks	temp meter final	PASS	E-MAIL FPV INSPECTOR <i>[Signature]</i>
10454	Weder 21 Palm Rd NISQU	Final AC	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10280	FRISOLI 50 S SPRING Soft Custom Pools	Pool FINAL	PASS	CLOSE INSPECTOR <i>[Signature]</i>
	<i>[Signature]</i>	Final <del>Check</del> REPAIR	PASS	CLOSE Closed 4-10-13 INSPECTOR <i>[Signature]</i>
10398	Luger 9 Riverview Schiller	pre pour pool deck & bond	PASS	INSPECTOR <i>[Signature]</i>
	<del>Blanton</del> 6 3000 G	<del>Final</del> SIDING	<del>PASS</del>	<del>Close</del> INSPECTOR <i>[Signature]</i>
	Karam Haddad			INSPECTOR