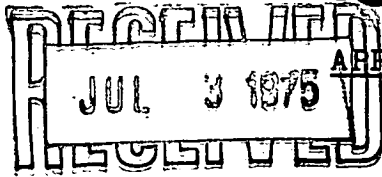


53 North Sewall's Point Road



TOWN OF SEWALL'S POINT, FLORIDA

APPLICATION FOR BUILDING PERMIT

Permit No. 537

Date 7/10/75

(This application must be accompanied by 3 sets of complete plans, to proper scale, including plot plan, foundation plan, floor plans, wall and roof cross sections, plumbing and electrical layouts, and at least, two elevations as applicable)

Owner TENSEN BUILDERS INC. Present Address P.O. Box 35 Jensen Bch. Ph 334-3940

General Contractor PAUL L. KLEINFELD Address P.O. Box 38 Jensen Bch. Ph 334-3940

Where licensed MAORIN Co. City of Seaw License No. 1446

Plumbing Contractor _____ License No. _____
Electrical Contractor _____ License No. _____

Street building will front on Sewalls Av. Rd.

Subdivision Perkiwinkle Lot No. 22 Area _____

Building area, inside walls (excluding garage, carport, porches) Sq ft 2875.

Other Construction (Pools, additions, etc.) _____

Contract Price (excluding land, rugs, appliances, landscaping) \$ 40,000

Total cost of permit \$ 220.00

Plans approved as submitted _____ Plans approved as marked

I understand that this permit is good for 12 months from date of issue and that the building must be completed in accordance with the approved plan and that the site be clean and rough-graded within 12 month period.
Paul L. Kleinfeld
Signed by General Contractor

I understand that this building must be in accordance with the approved plan and comply with all code requirements before a Certificate of Approval for Occupancy will be issued and the property approved for all utility services. I, also, agree that within 90 days after the building has been approved for occupancy, that the property will, also, be landscaped as to be compatible with the neighborhood.
Paul L. Kleinfeld (v.p.)
Signed by Owner

Note: Speculation Builders will be required to sign both statements.

TOWN RECORD

537

Date submitted _____

Date approved Charles Duggan 7/27/75

Certificate of Occupancy issued 11/10/75 Date

Paul L. Kleinfeld
Jensen Buildings Inc.
Lot 22 Perriwinkle

TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date Nov. 10, 1975

This is to request that a Certificate of Approval for Occupancy be issued to Paul L. Kleinfeld, Jensen Bldrs. Inc.

For property built under Permit No. 537 Dated July 10, 1975

when completed in conformance with the Approved Plans.

Signed

RECORD OF INSPECTIONS

<u>Item</u>	<u>Date</u>	<u>Approved by</u>
Footings	7/18/75	C. Duryea
Rough plumbing	7/22/75, 7/23/75 alab	"
Perimeter beam	7/30/75	"
Rough electric	8/25/75	"
Close in	8/25/75	"
Final plumbing	11/10/75	"
Final electric	11/10/75	"

Final Inspection for Issuance of Certificate for Occupancy 11/10/75
Approved by Building Inspector [Signature] date
Approved by Town Commission [Signature] 11/10/75 date

Utilities notified 11/10/75 date

Original Copy sent to Paul L. Kleinfeld, Jensen Bldrs. Inc.

(Keep carbon copy for Town files)

TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date _____

This is to request that a Certificate of Approval for Occupancy be issued to ISLEINFIELD PENNYMARR

For property built under Permit No. 537 Dated _____

when completed in conformance with the Approved Plans.

Signed

RECORD OF INSPECTIONS

Item	Date	Approved by
Footings	7/18/75	U
Rough plumbing	7/22/75	U
Perimeter beam	7/23/75	SLAB
Rough electric	7/30/75	U
Close in	8/25/75	U
Final plumbing	11/10/75	
Final electric		

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector 11/10/75 *Chely Anger*

Approved by Town Commission 11/10/75 *J. R. ...* date

Utilities notified 11/10/75 date

Original Copy sent to _____

(Keep carbon copy for Town files)

2833

ADD BATH

ENCLOSE GARAGE

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

2833

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 Dr. & Mrs. John H. Martin Present Address 161 S River Rd Sewall Pt

Phone 283-0693

Contractor OFFICE # 1-775-3990 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: ADDING BATH, CLOSING GARAGE

53 N Sewalls Pt Rd

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

Subdivision _____ Lot number _____ Block number _____

Contract price \$ 2,900.00 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 John H. Martin

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 John H. Martin

TOWN RECORD

Date submitted _____ Approved: Dale Brown 8/15/90
Building Inspector Date

Approved: _____ Commissioner Date Final Approval given: _____ 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.

3229

RE-ROOF

APPLICATION FOR 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 John H. Martin Present Address 141 S. River RD.

Phone 283-0693

Contractor McNab Inc. Address POB 9183 Port St. Lucie, FL

Phone 335-0178

Where licensed Martin Co. License number SP0 1494

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 flat roof system with 7-ply fiberglass

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

53 N. Sewalls Point Rd

Subdivision Perrinwinkle Lot number 22 Block number _____

Contract price \$ 2,300.00 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 Mark J. McNab by Orlan Thomas

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 John H. Martin o.r.

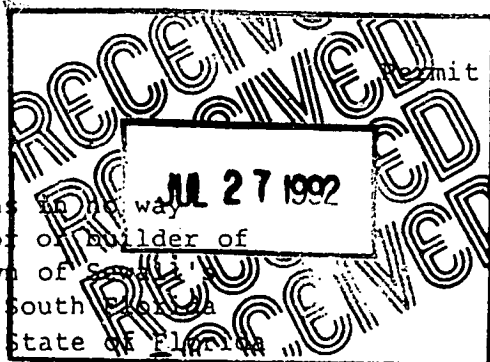
TOWN RECORD

Date submitted 7/27/92 Approved: Dale Brown 7/27/92
Building Inspector Date

Approved: [Signature] 7/30/92 Final Approval given: 7/27/92
Commissioner Date Date

Certificate of Occupancy issued (if applicable) _____
Date

SP1282



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.

3945

STORAGE SHED

TAX FOLIO NO. _____

DATE March 6, 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

39015

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 JOSEPH & VIVIAN MARRORE Present address 53 N SEWALL'S PT. RD.

Phone 271 0004

Contractor THURMAN'S Address 9775 N. U.S. 1 Ft. Pierce Fla. 34946

Phone (407) 464-4077 - or 1800. 464 3531.

Where licensed _____ License number _____

Electrical Contractor X License number X

Plumbing Contractor X License number X

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

storage bldg.

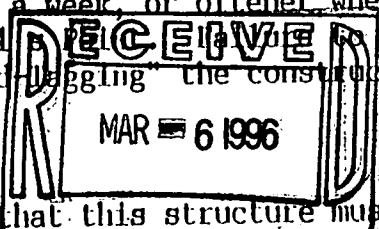
State the street address at which the proposed structure will be built: _____

Subdivision PERIWINKLE SUB Lot Number 22 Block Number _____

Contract price \$ 2000.00 Cost of permit \$ 50.00

Plans approved as submitted _____ Plans approved as marked _____

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



Contractor _____

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 Turan Marrore

TOWN RECORD

Date submitted _____

Approved: Dale Brun Building Inspector Date _____

Approved: [Signature] Commissioner Date _____

Final approval given: _____ Date _____

CERTIFICATE OF OCCUPANCY issued (if applicable) _____ Date _____

PERMIT NO. _____

SMITHBILT INDUSTRIES, INC.

PORTABLE BUILDING ANCHORS

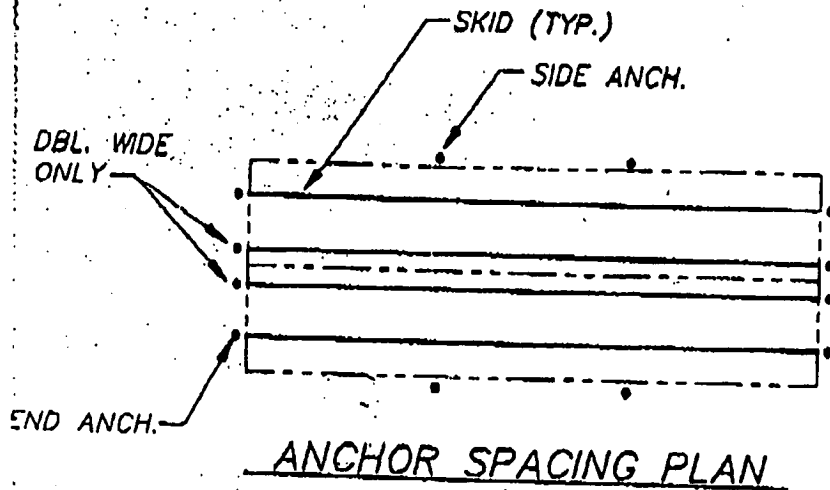
BUILDING SIZE	NO. OF ANCH. @ END OF BLDG.	NO. OF ANCH. @ SIDE OF BLDG.	TOTAL ANCH. PER BLDG.
8', 10' & 12' WIDE TO 24' LONG	4	-	4
48'	4	2	6
50'	4	4	8
20', 22' & 24' WIDE TO 24' LONG	8	-	8
48'	8	2	10
50'	8	4	12

MODEL NUMBER	LENGTH	BAR DIAMETER	EYE DIAMETER	HELIX DIAMETER	UPLIFT CAPACITY IN NORMAL SOIL
36SHE34	36"	5/8"	1 1/2"	4"	2500 lbs.

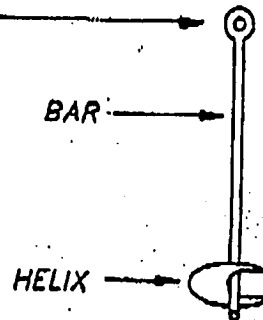
Note
Use Use

40"

6"



BOLT THRU ANCH. & 2x6
SKID OR HEADER BEAM
w/ 3/8" Ø x 4" LAG
BOLT



William F. Cooney
FLA. P.E. No. 24593
7/26/95

ALL NONE	DATE	LOCATION OF JOB
APP BY W.D.M.	2/18/93	
CHECKED BY W.J.M.	2/18/93	
DESIGNED BY		PROJECT NO.
		83037

MM MCARDY, MOODY AND ASSOCIATES, INC.
REGISTERED PROFESSIONAL ENGINEERS
LARGO, FLORIDA

TYPICAL PORTABLE BUILDING ANCHORS
SINGLE AND DOUBLE WIRE BUILDINGS
SMITHBILT INDUSTRIES, INC.
AUBURNDALE, FLORIDA
DWG. NO. A-1
REV. 0

4241

GARAGE

Town of Sewall's Point

DN
4241



P.I.N. _____

Date GARAGE

BUILDING PERMIT APPLICATION

to construct:

RESIDENTIAL NEW CONSTRUCTION ADDITION ALTERATION

COMMERCIAL

SQ. FEET

440

DEMOLITION

SQ. FEET

NET CHANGE

OTHER: _____ CONTRACT PRICE 19,500.00

Owner's Name JOSEPH & VIVIAN MARRONE

Owner's Address 53 N. SEWALL'S POINT Rd. SEWALL'S POINT

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

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

City SEWALL'S POINT State FLORIDA Zip _____

Contractor's Name ROBERT F. RICCARDO

Contractor's Address 1731 SW. CASTINET LANE

City PORT ST. LYCIE State FLORIDA Zip 34953

Job Name MARRONE'S

Job Address 53 N. SEWALL'S POINT ROAD

City SEWALL'S POINT County MARTIN

Legal Description LOT 22 BLOCK PERRIWINKLE

Bonding Company _____

Bonding Company Address _____

City _____ State _____

Architect/Engineer's Name _____

Architect/Engineer's Address _____

Mortgage Lender's Name _____

Mortgage Lender's Address _____

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

4241

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

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

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

Vivian Marrone
Owner or Agent

Date

Robert J. Riccardi
Contractor

8-22-97
Date

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 22nd day of August 1997 by Robert Riccardi, who: [] is/are personally known to me, or [] has/have produced Fl. d. I. as identification, and who did not take an oath.

Joan H. Barrow
Name: _____

(NOTARY SEAL)

Typed, printed or stamped
I am a Notary Public of the State of
Florida having a commission number of _____

and my commission expires _____
NOTARY SEAL
JOAN H. BARROW
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC423705
MY COMMISSION EXP. NOV. 30, 1998

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 22nd day of August 1997 by Vivian Marrone, who: [] is/are personally known to me, or [] has/have produced Fl. d. I. as identification, and who did not take an oath.

Joan H. Barrow
Name: _____

(NOTARY SEAL)

Typed, printed or stamped
I am a Notary Public of the State of
Florida having a commission number of _____

and my commission expires _____
NOTARY SEAL
JOAN H. BARROW
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC423705
MY COMMISSION EXP. NOV. 30, 1998

Certificate of Competency Holder

Contractor's State Certification or Registration No. _____

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY _____

[Signature]
Permit Officer

Permit No. _____

Tax Folio No. _____

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, Fla. Statutes, the following information is provided in this Notice of Commencement.

1. Description of property: 53 N. SEWALL'S POINT Rd. SEWALL'S POINT, FLORIDA.
2. General description of improvement: NEW GARAGE 21'-8" x 21'-8" 8' HIGH WITH FLAT CEMENT TILE 7' x 16' ROLL UP GARAGE DOOR RATED UP TO 140 MPH. WINDS. ONE 36" x 7' SIDE DOOR - ONE 54" x 54" WINDOW ON SIDE OF GARAGE STREET SIDE.
3. Owner information:
 - a. Name and address: JOSEPH & VIVIAN MARRONE 53 N. SEWALL'S POINT Rd. SEWALL'S POINT FLA.
 - b. Interest in property: OWNERS
 - c. Name and address of fee simple titleholder (if other than owner):
4. Contractor:
 - a. Name and address: ROBERT F. RICCARDI
1731 SW. CASTINET LANE PORT ST. LUCIE, FLA. 34958
 - b. Phone number: (561) 879-0747
 - c. Fax number (optional, if service by fax is acceptable): 879-0747 PRESS SEND BUTTON BEFORE OR AFTER MESSAGE TO SEND FAX.
5. Surety:
 - a. Name and address:
 - b. Phone number:
 - c. Fax number (optional, if service by fax is acceptable): N/A
 - d. Amount of bond \$ _____
6. Lender:
 - a. Name and address:
 - b. Phone number:
 - c. Fax number (optional, if service by fax is acceptable): N/A
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Sect. 713.13 (1) (a)7., Florida Statutes.
 - a. Name and address:
 - b. Phone number: N/A
 - c. Fax number (optional, if service by fax is acceptable):
8. 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.
 - a. Phone number:
 - b. Fax number (optional, if service by fax is acceptable):

9. Expiration date of notice of commencement: _____ (The expiration date is 1 year from the date of recording unless a different date is specified).

Vivian Marrone
Signature of Owner

Name: _____
Please Print, Type or Stamp

STATE OF FLORIDA
COUNTY OF MARTIN

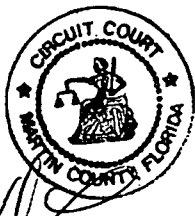
The foregoing instrument was acknowledged before me this 22nd day of August 1997 by Vivian Marrone | personally known to me, or has produced Fl. d. l. as identification, and who | | did | | did not take an oath.

Janet Morrow
Signature of Notary

OFFICIAL NOTARY SEAL
Name: Janet Morrow
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC 423705
MY COMMISSION EXPIRES NOV 30 1999
I am a Notary Public of the State of Florida having a commission number of _____ and my commission expires: _____

STATE OF FLORIDA
MARTIN COUNTY

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



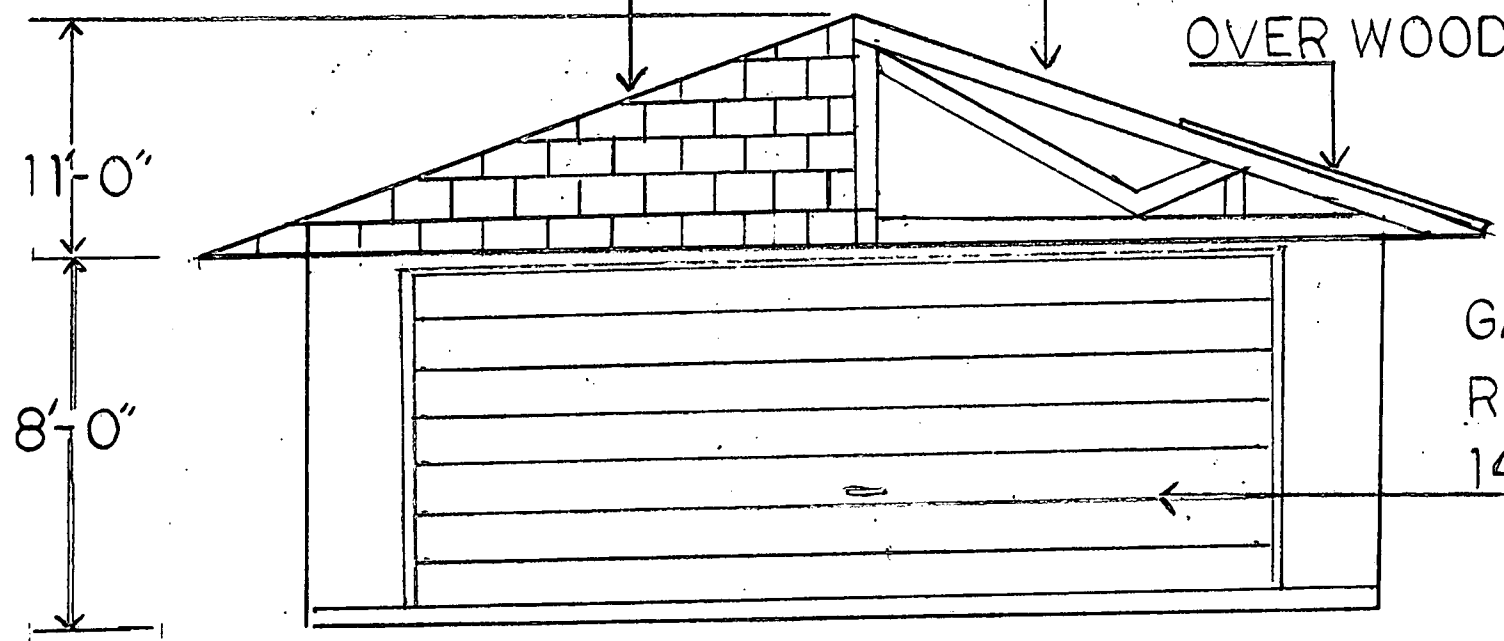
BY [Signature] D.C.
DATE 8/22/97

OTARY SEAL.)

INSTALL 30 POUND DRY IN NAILED TO CODE. INSTALL 2" X 2" 26 GAUGE GALVANIZED DRIP EDGE. HOT MOP TILE UNDERLAYMENT OVER 30 POUND DRY IN. INSTALL 9" FLAT CEMENT TILE USING FOAM ON SYSTEM. ROOF INSTALLED BY PACIFIC ROOFING CORP.

PRE-ENGINEERED WOOD TRUSSES 24" ON CENTER ANCHORED AT EACH END WITH SIMPSON HTA 18" STRAPS.

3/4" EXT. PLYWOOD SHEETING INSTALLED OVER WOOD TRUSS



GARAGE DOOR RATED UP TO 140 MPH WINDS

FRONT ELEVATION SCALE 1/4" = 1'

18" HTA STRAPS EVERY 24" O.C.

8" X 12" TIE BEAM W/ 4 #5 REBAR

5/8" TEXTURE STUCCO FINISH

T.O.B. 8'-0"

#5 DOWN STEEL

36" #5 DOWEL

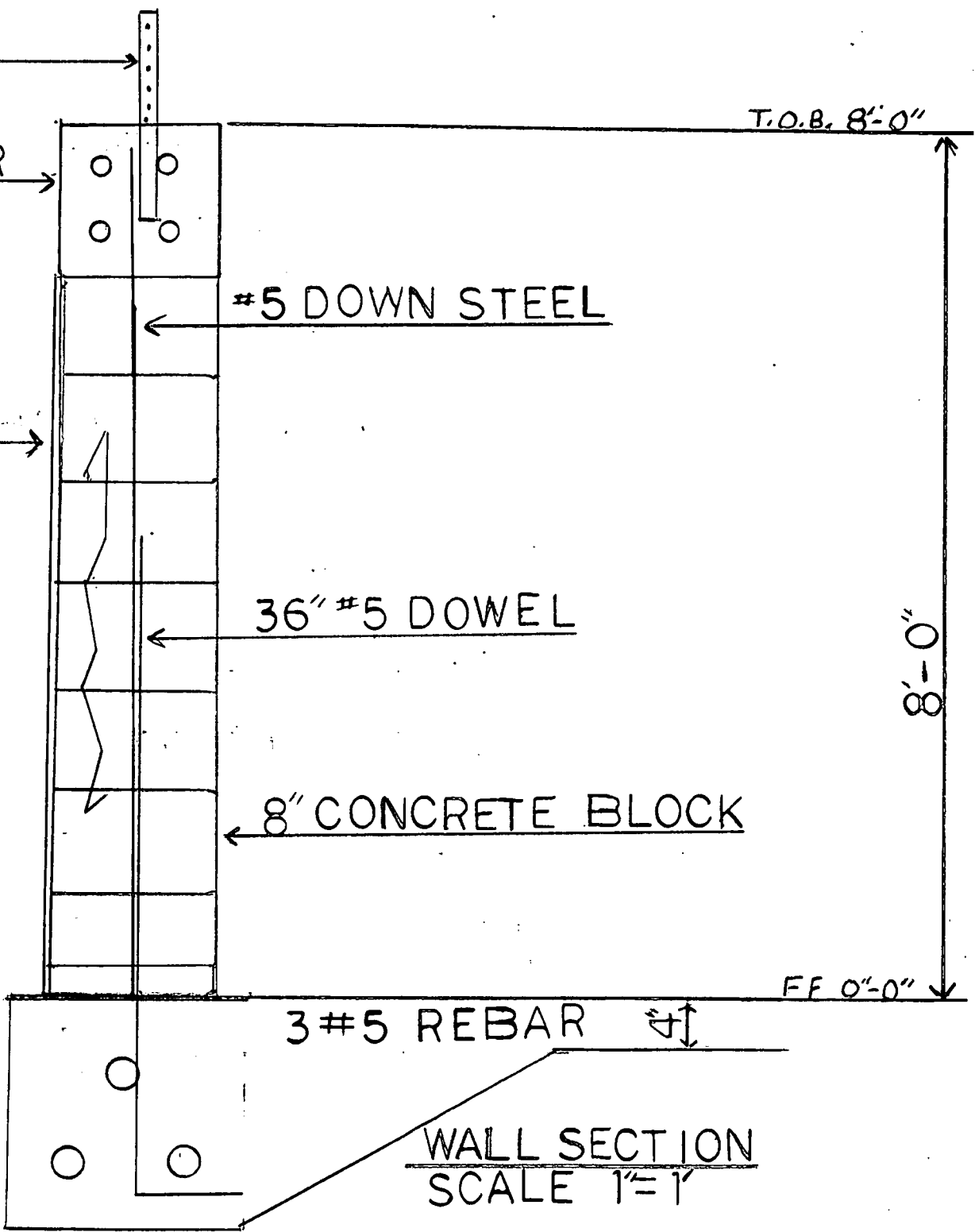
8" CONCRETE BLOCK

3 #5 REBAR

8'-0"

FF 0'-0"

WALL SECTION
SCALE 1"=1'



21'-08"

3/8" DOWELS WITH
9" BEND
8" ON CENTER AND
AT EVERY CORNER
AND SIDES OF DOORS
AND WINDOWS.

6 MIL VISQUEEN OVER
TERMITE TREATED SOIL

CONCRETE
BLOCK
8" X 8" X 16"

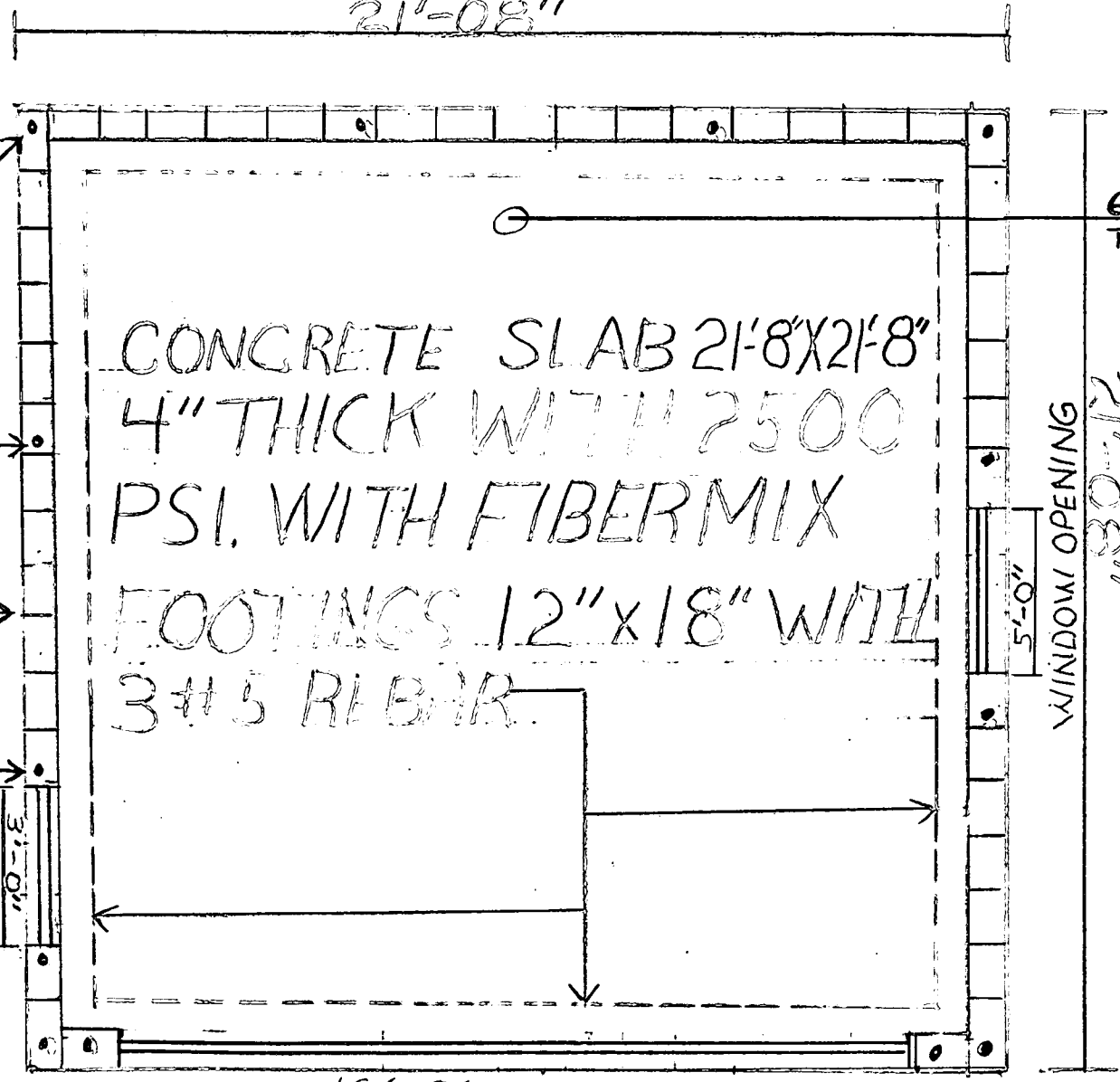
CONCRETE SLAB 21'-8" X 21'-8"
4" THICK WITH 2500
PSI. WITH FIBERMIX
FOOTINGS 12" X 18" WITH
3 #5 REBAR.

5'-0"
WINDOW OPENING
11'-30" / 12"

3 #5 REBAR
DOOR
3'-0"

16'-0"
GARAGE DOOR OPENING

FOUNDATION SLAB SCALE 1/4" = 1'-0"



Date: _____

This is to request a Certificate of Approval for Occupancy to be issued to:

_____ for Permit No: _____

issued to construct _____ upon Property described as

follows: Lot 22, Block _____, Sect. _____, Sub _____.

known as: _____.

when completed in conformance with the approved plans, and approval of the following required inspections.

Owner

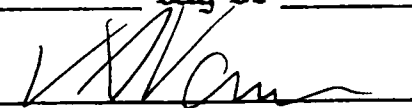
Certificate of Occupancy

Town of Sewall's Point, Florida

Lot Stakes/Setbacks	Approved: _____	Termite Protection	Approved: _____
Footings/ Slab	Approved: _____	Rough Plumbing	Approved: _____
Rough Electric	Approved: _____	Lintel/Tie-beam	Approved: _____
Roofing	Approved: _____	Framing/Furring	Approved: _____
Insulation	Approved: _____	HVAC Rough	Approved: _____
Final Electric	Approved: _____	Final Plumbing	Approved: _____
Final HVAC	Approved: _____	Storm Shutters	Approved: _____
Tie-in Survey	Approved: _____	Landscape	Approved: _____

Issued this _____ day of _____, 199 _____

Building Inspector



Building Commissioner

Town Clerk

Record this document or store in a safe place.

6237

ROOF REPAIR

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/24/03

BUILDING PERMIT NO. 6237

Building to be erected for MARRONE

Type of Permit ROOF REPAIR

Applied for by STAUDOHAR (Contractor)

Building Fee 70.00

Subdivision PERRIWINKLE Lot 22 Block _____

Radon Fee _____

Address 53 N SEWALL'S POINT RD

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

3537410040000022020000

Electrical Fee _____


Plumbing Fee _____

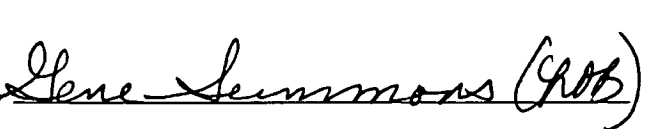
Roofing Fee _____

Amount Paid 70.00 Check # 1320 Cash _____ Other Fees (_____)

Total Construction Cost \$ 400.00

TOTAL Fees 70.00

Signed 
Applicant

Signed 
Town Building Official

PERMIT

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

INSPECTIONS

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

Permit Number: _____

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

OWNER/TITLEHOLDER NAME: Joseph Maurone Phone (Day) 221-0004 (Fax) _____

Job Site Address: 53 N. Sewells' Pt City: STUART State: _____ Zip: _____

Legal Description of Property: Periwinkle Lot 22 Parcel Number: 3537410040000022020000

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

Description of Work To Be Done: ROOF REPAIR

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

CONTRACTOR/Company: George Staudacher Roofing Phone: 289-3339 Fax: _____

Street: 1602 E. 8th City: Stuart State: FL Zip: 34996

State Registration Number: RC00673668 State Certification Number: _____ Martin County License Number: SP02838

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 400.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

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

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

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

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

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

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

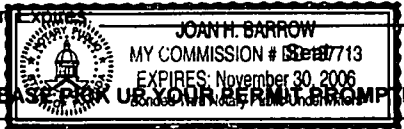
OWNER OR AGENT SIGNATURE (required)

State of Florida, County of: _____
This the _____ day of _____, 200____
by _____ who is personally
known to me or produced _____
as identification. _____

CONTRACTOR SIGNATURE (required)
[Signature]
On State of Florida, County of: Martin
This the 24 day of April, 2003
by G.T. Staudacher who is personally
known to me or produced Fl. d.l.
As identification. Joan H. Barrow

Notary Public
My Commission Expires: _____
Seal

Notary Public
My Commission Expires: _____



Job Description

- Take off existing tile
- Repair cracked underlayment
- Reinstall existing tile with urethane foam adhesive

ACORD - CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/24/2003

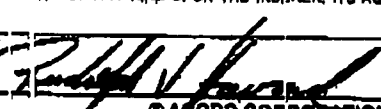
PRODUCER R. V. Howard & Associates 8495 South US 1, Ste. 13 Port St. Lucia FL 34952 772 343-9878		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED George Staudohar Roofing 1602 East 8th Street Stuart, FL 34996 287-3339		INSURERS AFFORDING COVERAGE	NAIC#
		INSURER A: Colony Insurance	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	

COVERAGES

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

DRIVER LIC. NO.	ADDITIONAL DRIVERS	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC.	CP 3076023	5/17/2002	5/17/2013	EACH OCCURRENCE \$ 300,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 1,000 PERSONAL & ADV INJURY \$ 300,000 GENERAL AGGREGATE \$ 600,000 PRODUCTS - COM/PROP AGG \$ 600,000
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/DIRECTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

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

CERTIFICATE HOLDER Town of Sewell's Point Attn: Laura Fax#: 220-4765	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE: 
--	--

MARTIN COUNTY, FLORIDA

Construction Industry Lic Bd

Certificate of Competency

License: SP02838

Expires September 30, 2003

Name: GEORGE T STAUDOHAR

Company:

Address: 1602 East 8th St

City, ST: Stuart FL 34996

License Type: ROOFING CONTRACTOR

MARTIN COUNTY CONTRACTORS
CERTIFICATE OF COMPETENCY

GEORGE T. STAUDOHAR
1602 East 8th St
Stuart FL 34996

EXPIRES SEPTEMBER 30, 20 01	
AUDIT CONTROL NUMBER 37793	CERTIFICATE NUMBER SP02R38

CITY OF STUART OCCUPATIONAL LICENSE
2000 - 2001

OCC. LICENSE NO.	ACCOUNT NO.	CATEGORY NO.
2985	19311	061004

OWNER - BUSINESS LOCATION - TYPE
GEORGE T. STAUDOHAR
1602 E 8TH STREET
CONTRACTOR - ROOFING

TAX YEAR BEGINS OCTOBER 1 AND ENDS SEPTEMBER 30TH
PAYMENT RECEIVED AFTER OCTOBER 1ST CONSTITUTES A
VIOLATION OF THE CITY CODE OF ORDINANCES.

This occupational license does not permit the holder to operate in violation of any City law, ordinance, or regulation. Any changes in location or ownership must be approved by the City License Section, subject to zoning restrictions. This License does not constitute an endorsement, approval, or disapproval of the holder's skill or competence or of the compliance or non-compliance of the holder with other laws, regulations, or standards.

FEE	PENALTY	TRANSFER	MISCELLANEOUS	PAID
\$100.00	\$0.00	\$0.00	\$0.00	\$100.00

NAME AND MAILING ADDRESS
GEORGE T. STAUDOHAR
1602 E 8TH STREET
STUART, FL, 34996



DATE
1-OCT-2000

DIANE O'DONNELL
CITY CLERK

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONTRACTOR LICENSE BOARD
BATCH NUMBER: 0000789
DATE: 10/01/00
INDIVIDUAL MUST MEET ALL LOCAL LICENSING REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA
INDIVIDUAL HAS REGISTERED UNDER THE PROVISIONS OF CHAPTER 489
PRACTICE DATE: AUG 31, 2001
STAUDOHAR, GEORGE
1602 EAST 8TH STREET
STUART, FL 34996
JEB BUSH GOVERNOR
CYNTHIA A. HENDERSON SECRETARY
IN GOD WE TRUST
SEAL OF THE STATE OF FLORIDA

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/7/, 2003 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6104	BYERS	FENCE	→ await survey	
①	32 N. SEWALL'S PT FENCE CRAPERS			INSPECTOR: <i>[Signature]</i>
6107	BYERS	REPAIR DAMAGE	Passed	close
②	32 N. SEWALL'S PT O/B	+ STUDS		INSPECTOR: <i>[Signature]</i>
6145	BYERS	MINOR ELEC	Passed	close
③	32 N. SEWALL'S PT O/B	FINAL		INSPECTOR: <i>[Signature]</i>
6192	BYERS	Ficus Hedge	Passed	close
④	32 N. SEWALL'S PT O/B			INSPECTOR: <i>[Signature]</i>
5825	SHEN BRIDGE	ADDITION FINAL	Failed	wood & doors specs
⑬	126 S. SEWALL'S PT DRIFTWOOD			INSPECTOR: <i>[Signature]</i>
TREE	WINTER	TREE	Partial	
⑧	17 S. RIDGEVIEW			INSPECTOR: <i>[Signature]</i>
6237	MARONE	ROOF REPAIR	Passed	close
⑦	53 N. SEWALL'S PT STAUDHUR	FINAL		INSPECTOR: <i>[Signature]</i>
OTHER: _____				

10822

RE-ROOF



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:	10822	DATE ISSUED:	4/3/2014
SCOPE OF WORK:	RE-ROOF		
CONTRACTOR:	ONSHORE ROOFING SPECIALISTS		
PARCEL CONTROL NUMBER:	353741004000002202	SUBDIVISION	PERRIWNKLE LOT 22
CONSTRUCTION ADDRESS:	53 N SEWALL'S POINT ROAD		
OWNER NAME:	MARRONE		
QUALIFIER:	JOSEPH KOLINOSKI	CONTACT PHONE NUMBER:	772 283-1505

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

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

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

INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	10822
ADDRESS:	53 SEWALL'S POINT ROAD
DATE ISSUED:	4/3/2014
SCOPE OF WORK:	RE-ROOF

SINGLE FAMILY OR ADDITION /REMODEL		Declared Value	\$	
---	--	-----------------------	-----------	--

Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned spa @ \$ 121.75 per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel: @ \$ 59.81 per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: \$ 90.78 per sq. ft. s.f.		\$	-
Total Construction Value:		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Building fee: (1% of construction value < \$200K + \$100 per insp.)		\$	-
Total number of inspections (Value < \$200K) \$ 100.00 per insp. # insp			n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)			n/a
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	\$ -

ACCESSORY PERMIT	Declared Value:	\$	\$ 16,100.00
Total number of inspections: @ \$ 100.00 per insp. # insp		\$ 4.00	\$ 400.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 6.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 6.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	6.44
TOTAL ACCESSORY PERMIT FEE:		\$	418.44

*pd 4/4/14
 CR 8670*

Town of Sewall's Point

Date: 3/10/14 BUILDING PERMIT APPLICATION Permit Number: 10822

OWNER/LESSEE NAME: Joseph Marone Phone (Day) 221-0004 (Fax) _____
 Job Site Address: 53 N Sewalls H. Rd City: Seawall State: FL Zip: _____
 Legal Description: Pellwinkle lot 22 Parcel Control Number: 35374100400000220
 Fee Simple Holder Name: _____ Address: _____
 City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Re-roof tile to metal

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: \$ 16,100
 (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: Onshore Roofing Specialists Phone: 283 1505 Fax: 283 1557
 Qualifiers name: Joseph Kolnaski Street: 4401 SE Commerce Ave City: Seawall State: FL Zip: 34996
 State License Number: CEC1328594 OR: Municipality: _____ License Number: _____
LOCAL CONTACT: Trisha Dugley Phone Number: 485-8993
DESIGN PROFESSIONAL: _____ Fla. License# _____
 Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

AREAS SQUARE FOOTAGE: Living: 2400 Garage: _____ Covered Patios/ Porches: _____ Enclosed Storage: _____
 Carport: _____ Total under Roof: 2400 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:

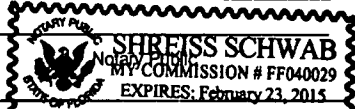
- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCOMBERED 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:
Joseph Marone
 State of Florida, County of: Martin
 On This the 10 day of March, 2014
 by Joseph Marone who is personally known to me or produced _____
 As identification: _____
 My Commission Expires: July 31, 2017

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
Joseph Kolnaski
 State of Florida, County of: Martin
 On This the 9th day of March, 2014
 by Joseph Kolnaski who is personally known to me or produced _____
 As identification: _____
 My Commission Expires: _____



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



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/08/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Bouchard Insurance for WBS P.O.Box 6090 Clearwater, FL 33758-6090	CONTACT NAME: PHONE (A/C, No, Ext): (866) 293-3600 ext. 623 FAX (A/C, No): E-MAIL ADDRESS:	
	INSURER(S) AFFORDING COVERAGE	
INSURED Workforce Business Services, Inc Alt. Emp: On Shore Roofing Specialists Inc 1401 Manatee Ave. West Ste 600 Bradenton, FL 34205-6708	INSURER A: American Zurich Insurance Company NAIC # 40142	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** 13FL079839702 **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WYD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC 90-00-818-03	12/31/2013	12/31/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
	Location Coverage Period:			12/31/2013	12/31/2014	Client# 053968	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Coverage is provided for only those employees leased to but not subcontractors of:
On Shore Roofing Specialists Inc
4401 SE Commerce Ave
Stuart, FL 34997

CERTIFICATE HOLDER **CANCELLATION**

Town of Sewalls Point One South Sewalls Point Road Sewalls Point, FL 34996	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	---



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

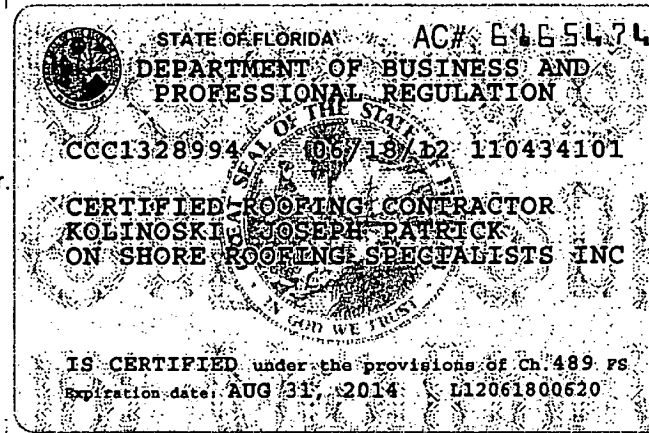
(850) 487-1395

KOLINOSKI, JOSEPH PATRICK
ON SHORE ROOFING SPECIALISTS INC
1066 SE SAINT LUCIE BLVD
STUART FL 34996

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers.



DETACH HERE

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AC# 6165474

STATE OF FLORIDA

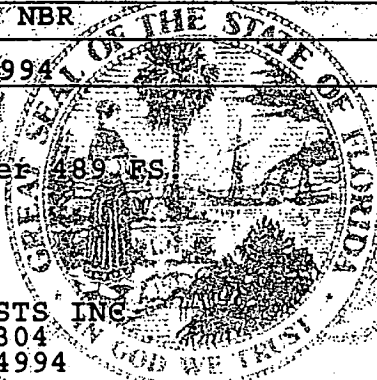
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L12061800620

Table with 3 columns: DATE, BATCH NUMBER, LICENSE NBR. Row 1: 06/18/2012, L10434101, CCC1328994

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489, FS
Expiration date: AUG 31, 2014

KOLINOSKI, JOSEPH PATRICK
ON SHORE ROOFING SPECIALISTS INC
1501 SE DECKER AVE SUITE 304
STUART FL 34994



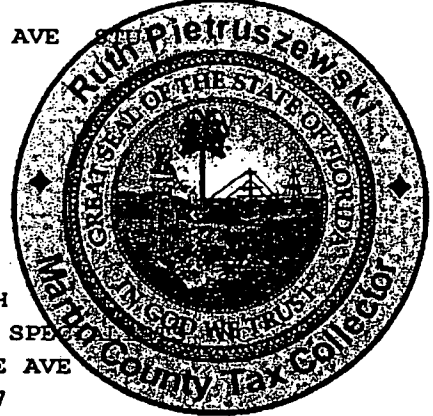
2013-2014 **MARTIN COUNTY ORIGINAL BUSINESS TAX RECEIPT**

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR
3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994
(772) 288-5604

ACCOUNT 2007-520-0462 CERT _____

PHONE (772) 283-1505 SIC NO 235610

LOCATION:
4401 SE COMMERCE AVE



CHARACTER COUNTS IN MARTIN COUNTY

PREV YR.	\$.00	LIC. FEE	\$ 26.25
	\$.00	PENALTY	\$.00
	\$.00	COL. FEE	\$.00
	\$.00	TRANSFER	\$.00
TOTAL		26.25	

KOLINOSKI, JOSEPH
ONSHORE ROOFING SP
4401 SE COMMERCE AVE
STUART, FL 34997

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

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

07 DAY OF AUGUST 2013
AND ENDING SEPTEMBER 30, 2014

11 2012 31403.0001 26.25 PAID

THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE.

ANYONE DOING BUSINESS WITHOUT A VALID BUSINESS TAX RECEIPT IS SUBJECT TO A \$250 FINE. IF NOT PAID BY OCT. 1, A DELINQUENT PENALTY OF 10% FOR THE MONTH OF OCTOBER, PLUS A 5% PENALTY FOR EACH MONTH THEREAFTER UP TO 25%, PLUS COLLECTION COSTS WILL APPLY.

NOTE -A PENALTY IS IMPOSED FOR FAILURE TO KEEP THIS BUSINESS TAX RECEIPT EXHIBITED CONSPICUOUSLY AT YOUR ESTABLISHMENT OR PLACE OF BUSINESS.



INSTR # 2445926 DR BK 2708 PG 471 RECD 03/20/2014 12:57:11 PM
(1 Pgs)
CAROLYN TIMMANN MARTIN COUNTY CLERK
DEED DOC \$0.00, MTG DOC \$0.00, INTANGIBLE \$0.00

PERMIT NUMBER: _____

NOTICE OF COMMENCEMENT

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.

301 353741004000002202

1. DESCRIPTION OF PROPERTY (Legal description of the property & street address, if available) TAX FOLIO NO.:

SUBDIVISION PERRIWINKLE BLOCK _____ TRACT _____ LOT 22 BLDG _____ UNIT _____
53 N SEWALLS POINT RD, PERRIWINKLE S/D LOT 22 OR 350-2100

2. GENERAL DESCRIPTION OF IMPROVEMENT:
REROOF

3. OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:

a. Name and address: JOSEPH AND VIVIAN MARRONE 53 N SEWALLS PT RD, STUART, FL 33496
b. Interest in property: Owner
c. Name and address of fee simple titleholder (if different from Owner listed above): _____

4. a. CONTRACTOR'S NAME: Onshore Roofing Specialists, Inc

Contractor's address: 4401 SE Commerce Avenue Stuart FL 34997 b. Phone number: 772-283-1505

5. SURETY (if applicable, a copy of the payment bond is attached):

a. Name and address _____
b. Phone number: _____ c. Amount of bond: \$ _____

6. a. LENDER'S NAME: _____

Lender's address: _____ b. Phone number: _____

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

a. Name and address: _____

b. Phone numbers of designated persons: _____

8. a. 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.

b. Phone number of person or entity designated by Owner: _____

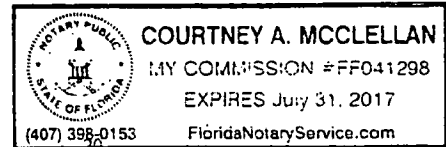
9. Expiration date of notice of commencement (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): _____, 20____

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

Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated therein are true to the best of my knowledge and belief.

Joseph Marrone
(Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager) (Print Name and Provide Signatory's Title/Office)

State of FLORIDA
County of MARTIN



The foregoing instrument was acknowledged before me this 18 day of MAR

by Joseph Marrone as owner
(name of person) (type of authority, ... e.g. officer, trustee, attorney in fact)

for _____
(name of party on behalf of whom instrument was executed)

Personally Known _____ or Produced Identification Type of Identification Produced D.I.

Notary

Courtney A. McClellan
(Signature of Notary Public)
(Print, Type, or Stamp Commissioned Name of Notary Public)

MARTIN COUNTY
THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGE(S) IS A TRUE AND CORRECT COPY OF THE ORIGINAL DOCUMENT AS FILED BY THIS OFFICE.
CAROLYN TIMMANN, CLERK
BY Stacy D.C.
DATE 3/20/14





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
 One S. Sewall's Point Road
 Sewall's Point, Florida 34996
 Tel 772-287-2455 Fax 772-2204765

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

RE-ROOF CERTIFICATION

PERMIT # _____
 CONTRACTOR'S NAME: oishore roofing PHONE #: 283 155 FAX: 283 1557

OWNER'S NAME: Marronne
 CONSTRUCTION ADDRESS: 53 N Sewall's Pt Rd Street

RE-ROOF: RESIDENTIAL(SINGLE FAMILY)
 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: \$ 121,370

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: Tile EXISTING COVERING TO BE REMOVED? YES NO

PROPOSED NEW ROOF COVERING: 5v metal
 MANUFACTURER: Gulf Coast PRODUCT NAME: 5v PRODUCT APPR # AC1165T.13R1

(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: Re-roof

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.

SIGNATURE OF CONTRACTOR: [Signature] DATE: 3/3/14



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-2204765

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

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.

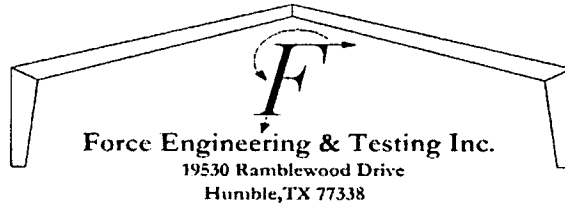
_____ Entire roof deck shall be covered with an approved self-adhering polymer modified bitumen cap sheet. No additional underlayment is required.

✓ _____ 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.



Product Evaluation Report
GULF COAST SUPPLY & MANUFACTURING, LLC.

26 Ga. 5V Crimp Roof Panel over 15/32" Plywood

Florida Product Approval # 11651.13 R1

Florida Building Code 2010

Per Rule 9N-3

Method: 1-D

Category: Roofing

Subcategory: Metal Roofing

Compliance Method: 9N-3.005(1)(d)

NON HVHZ

Product Manufacturer:

GULF COAST SUPPLY & MANUFACTURING, LLC.

4020 S.W. 449th Street

Horseshoe Beach, Florida 32648

Engineer Evaluator:

Terrence E. Wolfe, P.E. # 44923

Florida Evaluation ANE ID: 1920

Validator:

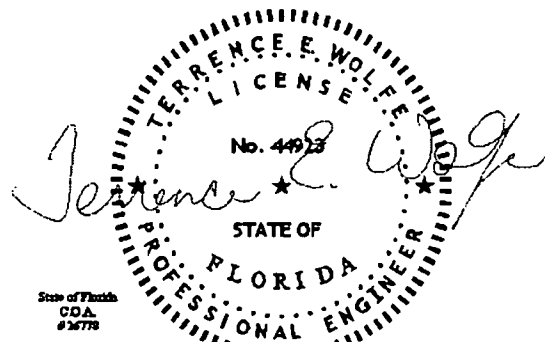
Locke Bowden, P.E., FL #49704

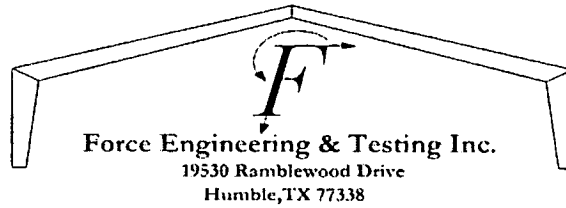
9450 Alysbury Place

Montgomery, AL 36117

Contents:

Evaluation Report Pages 1 – 4





Compliance Statement: The product as described in this report has demonstrated compliance with the Florida Building Code 2010, Sections 1504.3.2.

Product Description: 5V Crimp Roof Panel, 26 Ga. Steel, 24" coverage, through fastened roof panel with fasteners in the panel flat over Min. 15/32" Plywood decking. Non-Structural Application.

Panel Material/Standards: Material: Min. 26 Ga. Steel, ASTM A792 or ASTM A653 G90 conforming to Florida Building Code 2010 Section 1507.4.3. Paint finish optional
Yield Strength: Min. 80.0 ksi
Corrosion Resistance: Panel Material shall comply with Florida Building Code 2010, Section 1507.4.3.

Panel Dimension(s): Thickness: 0.018" min.
Width: 24" Coverage
Rib Height: 3/8" major rib
Panel Rollformer: Metal Rollforming Systems

Panel Fastener: #9-15 x 1-1/2" Woodgrip with sealing washing in the flat of the panel or approved equal, 1/8" minimum penetration through plywood.
Corrosion Resistance: Per Florida Building Code 2010, Section 1506.6, 1507.4.4

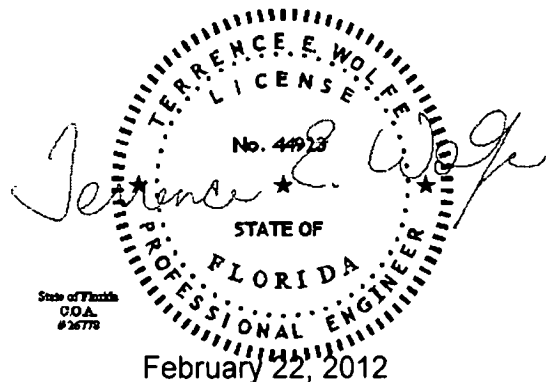
Substrate Description: Min. 15/32" thick, APA Rated plywood over supports at maximum 24" O.C.
Design of plywood and plywood supports are outside the scope of this evaluation. Must be designed in accordance w/ Florida Building Code 2010.

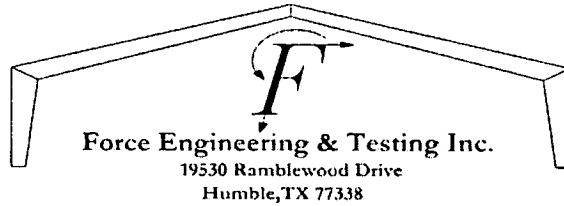
Design Uplift Pressures:

Table "A"

Maximum Total Uplift Design Pressure:	94.25 psf	131.0 psf
Fastener Pattern:	12"-12"	9.5"-2"-9.5"
Fastener Pattern:	16" O.C.	16" O.C.

*Design Pressure includes a Safety Factor = 2.0.





Code Compliance: The product described herein has demonstrated compliance with The Florida Building Code 2010, Section 1504.3.2.

Evaluation Report Scope: The product evaluation is limited to compliance with the structural wind load requirements of the Florida Building Code 2010, as relates to Rule 9N-3.

Performance Standards: The product described herein has demonstrated compliance with:

- UL 580-06 - Test for Uplift Resistance of Roof Assemblies
- UL 1897-04 - Uplift Test for Roof Covering Systems

Reference Data:

1. UL 580-94 / 1897-98 Uplift Test
Force Engineering & Testing, Inc. (FBC Organization # TST-5328)
Report No. 117-0053T-05 & 117-0331T-08
2. Certificate of Independence
By Terrence E. Wolfe, P.E. (No. 44923) @ Force Engineering & Testing, Inc.
(FBC Organization # ANE ID: 1920)

Test Standard Equivalency:

1. The UL 580-94 test standard is equivalent to the UL 580-06 test standard.
2. The UL 1897-98 test standard is equivalent to the UL 1897-04 test standard.

Quality Assurance Entity: The manufacturer has established compliance of roof panel products in accordance with the Florida Building Code and Rule 9N-3.005 (3) for manufacturing under a quality assurance program audited by an approved quality assurance entity.

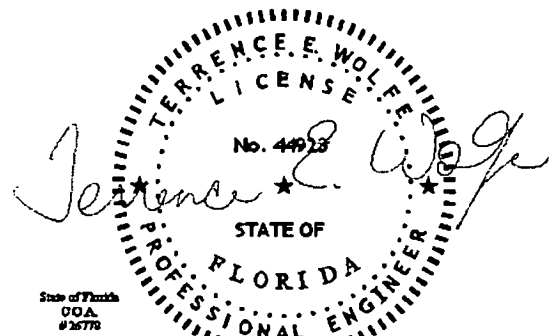
Minimum Slope Range: Minimum Slope shall comply with Florida Building Code 2010, including Section 1507.4.2 and in accordance with Manufacturers recommendations. For slopes less than 3:12, lap sealant must be used in the panel side laps.

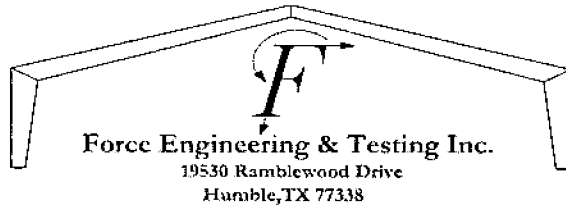
Installation: Install per manufacturer's recommended details.

Underlayment: Per Manufacturer's installation guidelines per Florida Building Code 2010 Section 1507.4.5.

Roof Panel Fire Classification: Fire classification is not part of this acceptance.

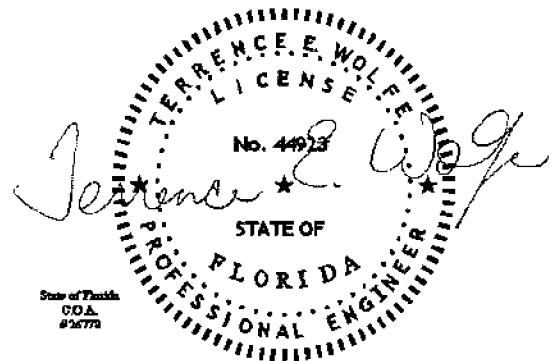
Shear Diaphragm: Shear diaphragm values are outside the scope of this report.





Design Procedure:

Based on the dimensions of the structure, appropriate wind loads are determined using Chapter 16 of the Florida Building Code 2010 for roof cladding wind loads. These component wind loads for roof cladding are compared to the allowable pressure listed above. The design professional shall select the appropriate erection details to reference in his drawings for proper fastener attachment to his structure and analyze the panel fasteners for pullout and pullover. Support framing must be in compliance with Florida Building Code 2010 Chapter 22 for steel, Chapter 23 for wood and Chapter 16 for structural loading.



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **4-11-14** Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10774	Stahley 114 Hillcrest Terr Glenmark Homes	All Trades Elect/Plumb. & A/C		RESET FOR MONDAY
				INSPECTOR
10817	Le Paw 61 S Sewalls Pt. Steve Roofing	Final	PASS	954-605-3217 CLOSE
				INSPECTOR <i>A</i>
10822	Macove	ROOF SHEDDING		
<i>PM</i>	53 N. Sewalls ON STAKE		PASS	
				INSPECTOR <i>J</i>
10814		A/C FINAL	PASS	CLOSE
	4 CORRIGE KRAUSS & CRANE			INSPECTOR <i>J</i>
10797	CARUSO 24 S. Sewalls Pt Rd A GREAT FENCE	FENCE FINAL	PASS	CLOSE
				INSPECTOR <i>J</i>
				INSPECTOR
				INSPECTOR
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 5/7 - 14 Page of _____

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10849	6 Deland Ln Kongew Mary Thaxo	Final Roof	PASS	871-2489 CLOSE INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10822	MARONE 53 N. SEWALLS Pt Rd ON SHORE	Roof FINAL	PASS	CLOSE INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10831	BLOSSOM 158 S. River Rd AMERICAN GARAGE DOOR	GARAGE DOOR FINAL	PASS	CLOSE INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10710	DANAROW 7 OAKHILL WAY JMC CONT.	U.6 PLUMB U.6. ELECT	PASS PASS	INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10837	BABBITT 76 S. Sewalls Pt. Rd INDEPENDANT CONST.	DRY-IN METAL	PASS	#0911 INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10843	CASH 7 MIDDLE Rd R A CONST	DRY DOOR FINAL	PASS	CLOSE INSPECTOR <i>A</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	97. S. SPRING	TREE - NO PERMIT	—	INSPECTOR