

85 North Sewall's Point Road

1159

DOCK REPAIRS

#1159

TOWN OF SEWALL'S POINT FLORIDA

Permit No. _____

Date 5-20-80

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 PARKER LAWRENCE Present address 85 N. SEWALL'S POINT RD.

Phone 256-0550

Contractor ROSS MARINE Address P.O. BOX 138 SEWALL'S POINT

Phone 257-5663

Where licensed MARINE CO License number 00050

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. REPAIRS - ON EXISTING DOCK

State the street address at which the proposed structure will be built
85 N. SEWALL'S PT. RD.

Subdivision 5,000 Lot No _____

Contract price \$ 5,000 Cost of Permit \$ 925⁰⁰

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 Jack Don

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 Parker Lawrence

TOWN RECORD

Date submitted _____

Approved: [Signature] Building Inspector Date 5/22/80

Approved _____ Commissioner Date _____

Final Approval given: 6/30/80 Date _____

Certificate of Occupancy issued _____ Date _____

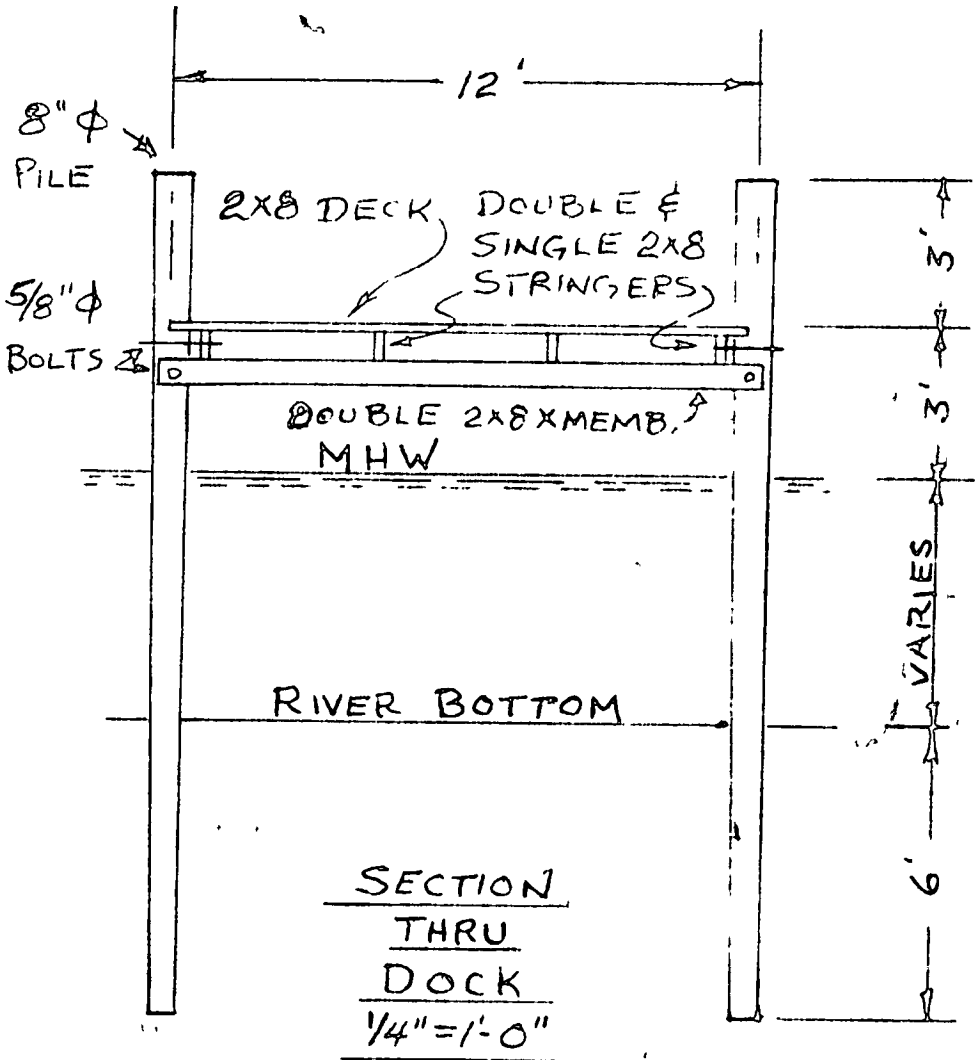
SP/1-79

#1159

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

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

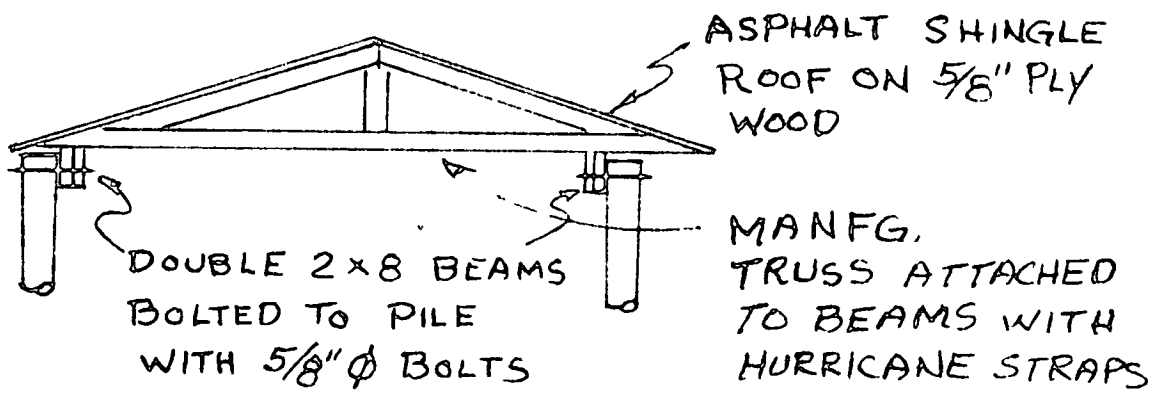
NEW CODE OF REFS.



RECEIVED MAY 20 1980

JLM 5/22/80

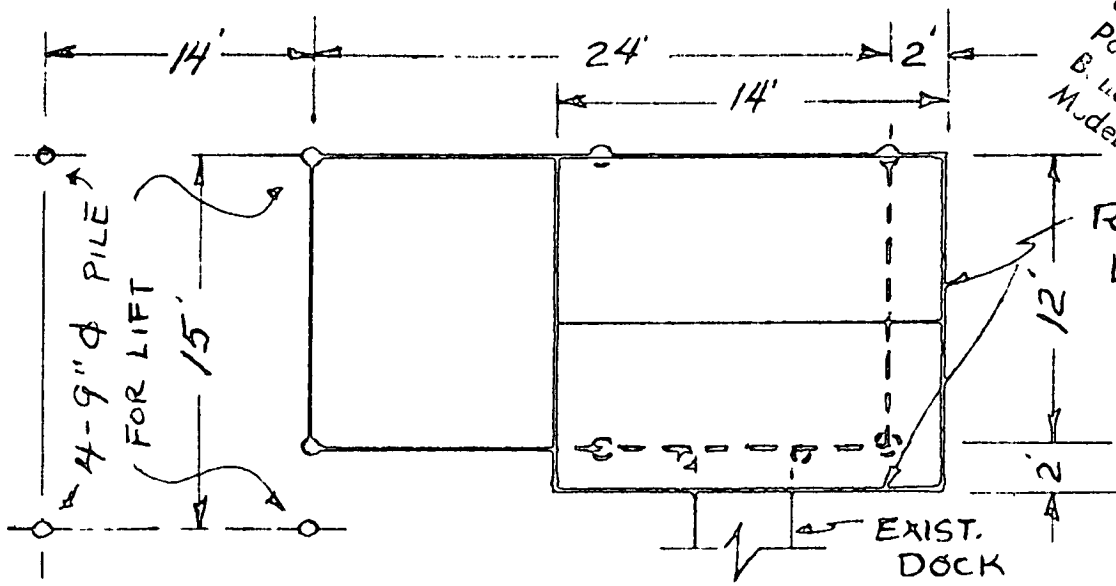
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point's Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code



ROOF DETAIL
1/4" = 1'-0"

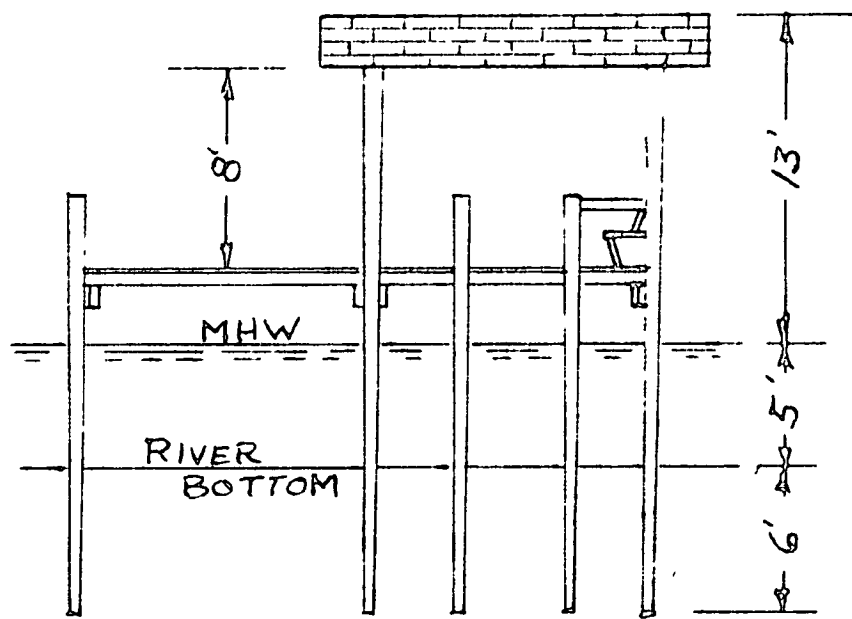
PROPOSED DOCK REPAIR FOR PARKER LAWRENCE

Jew 5/27/80
 Approval of these plans in no way
 relieves the contractor or builder of
 complying with the Town of Sewall's
 Point's Ordinances, the South Florida
 Building Code and the State of Florida
 Model Energy Efficiency Building Code

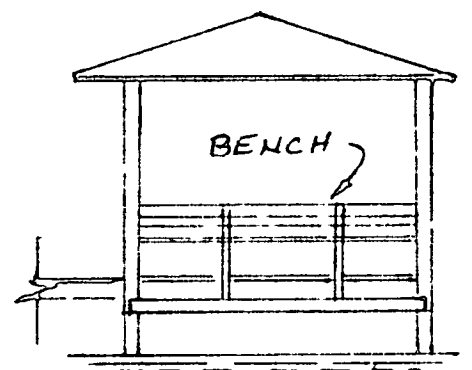


PLAN 1/4" = 1'-0"

RECEIVED MAY 20 1980



WEST ELEVATION
1/8" = 1'-0"

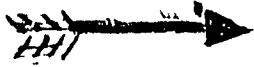


NORTH ELEV.
1/8" = 1'-0"

PROPOSED DOCK
 REPAIR FOR
 PARKE LAWRENCE

1529

RETAINING WALL



NOT FOR RESIDENCES

1529

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 set-backs; plumbing and electrical layouts, if applicable, and at least two elevations, as applicable.

Owner PARK LAWRENCE Present address 85 N SEWALL'S PT

Phone 286 0590

Contractor POTENTIALS INC Address 3452 NE INDIAN DR

Phone 334-0078

Where licensed STATE License number CCG008718

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

A/C CONTRACTOR License number _____

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

85 N. SEWALL'S PT
State the street address at which the proposed structure will be built

Subdivision _____ Lot No. _____

Contract price \$ 2,700 Cost of Permit \$ 135.00

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 a Town Commissioner "Red-tagging" the construction project.

Contractor Magnus J. Foster

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 Park Lawrence

Approved J. Mazzuca TOWN RECORD Date submitted 11/17/82
Building Inspector Date

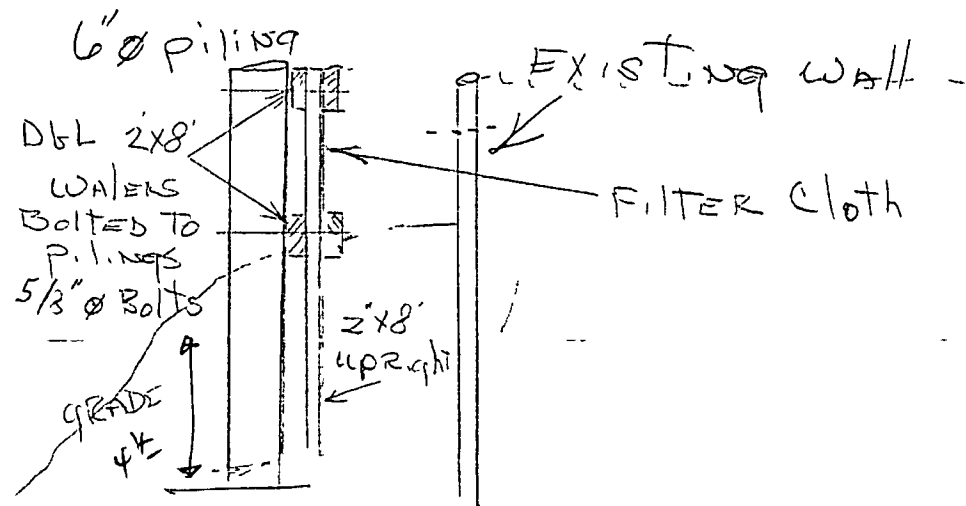
Approved G.C. Strubell Commissioner Date 11/19/82

Final Approval given 12/17/82 Date JAC

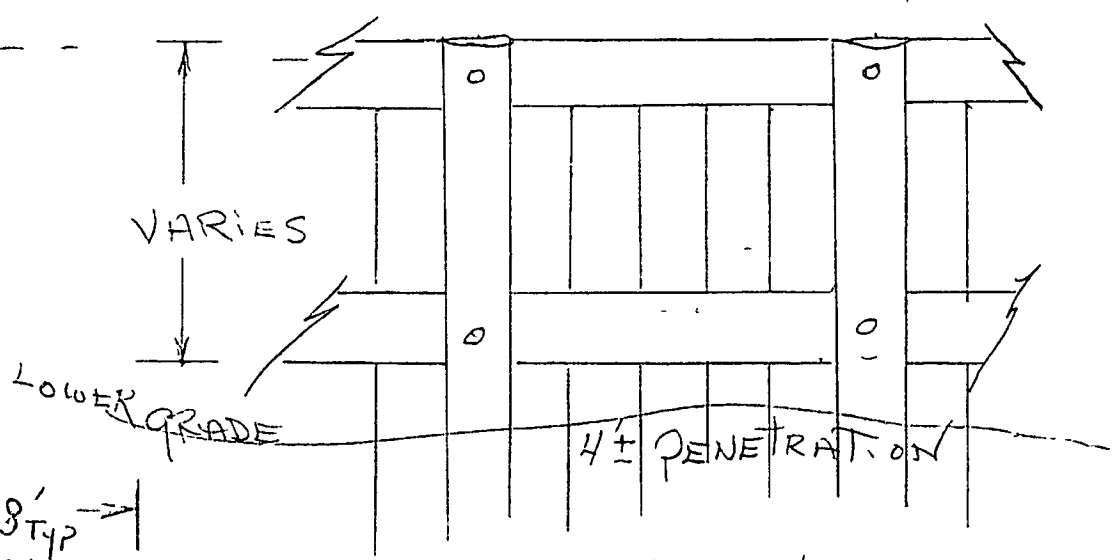
Certificate of Occupancy issued Not Req Date

SP/1-79

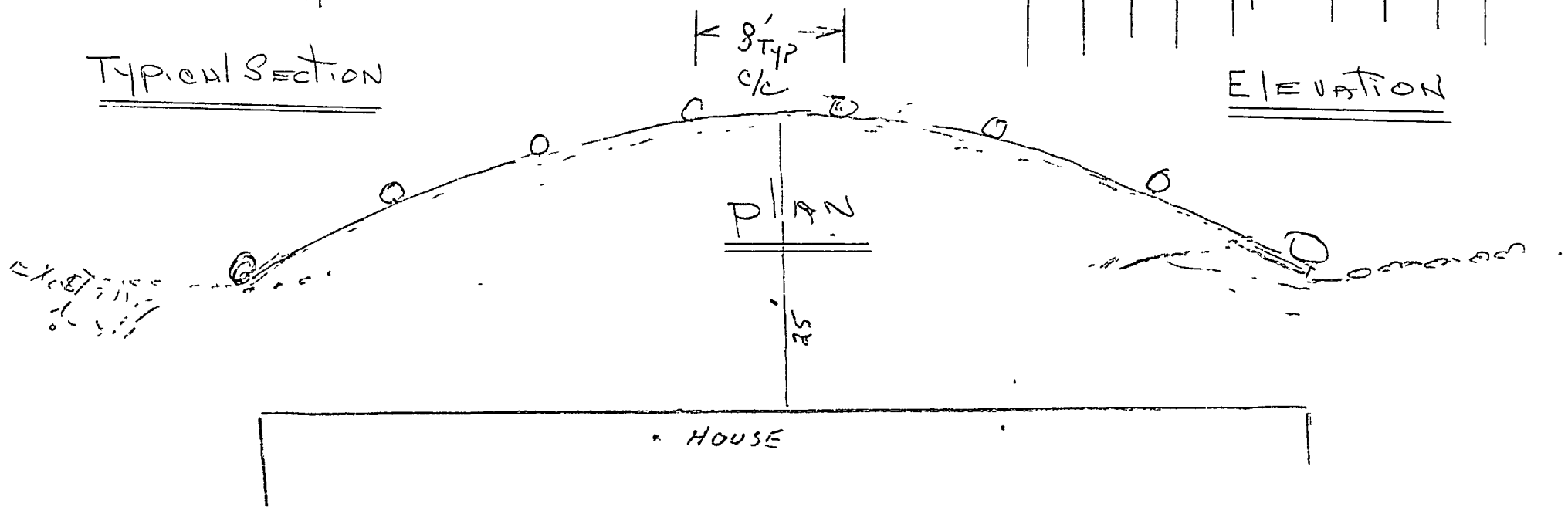
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point's Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.



Typical Section

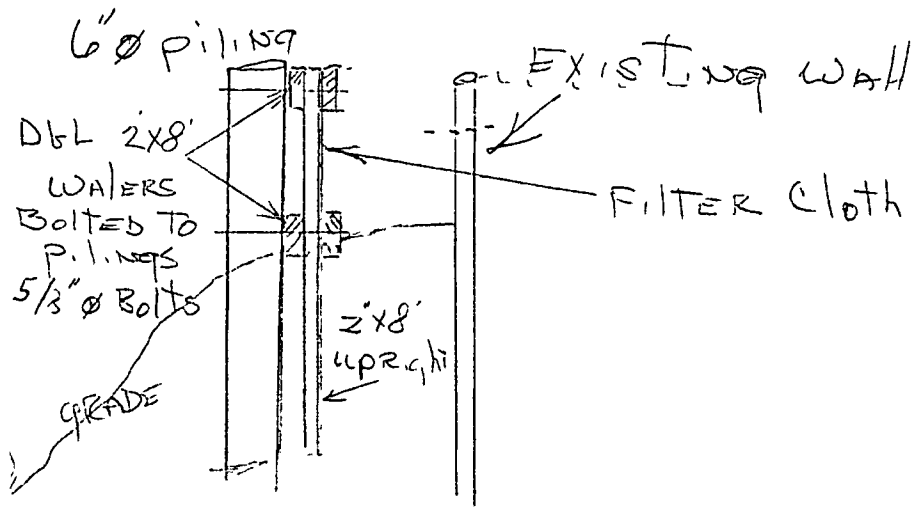


ELEVATION

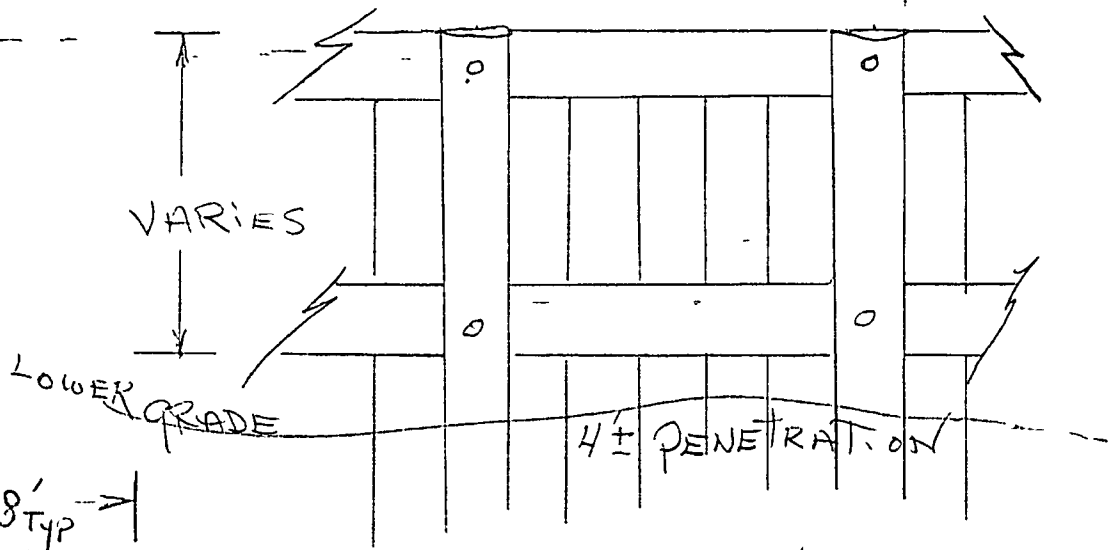


CLIFF'S MARINE
 3452 N E INDIAN DRIVE
 JENSEN BEACH, FL 33457
 Ph. 334-0078 or 286-5524

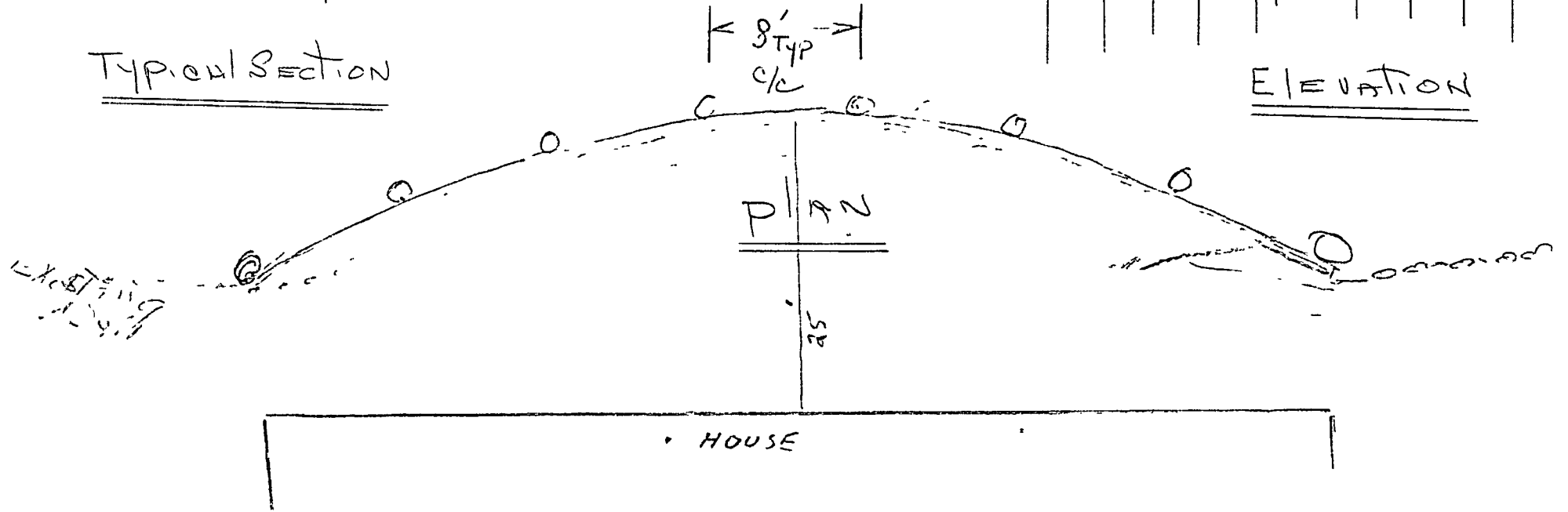
Proposed Wood
 Retaining Wall
 for
 Mr P LAWRENCE
 300 S. ...



TYPICAL SECTION

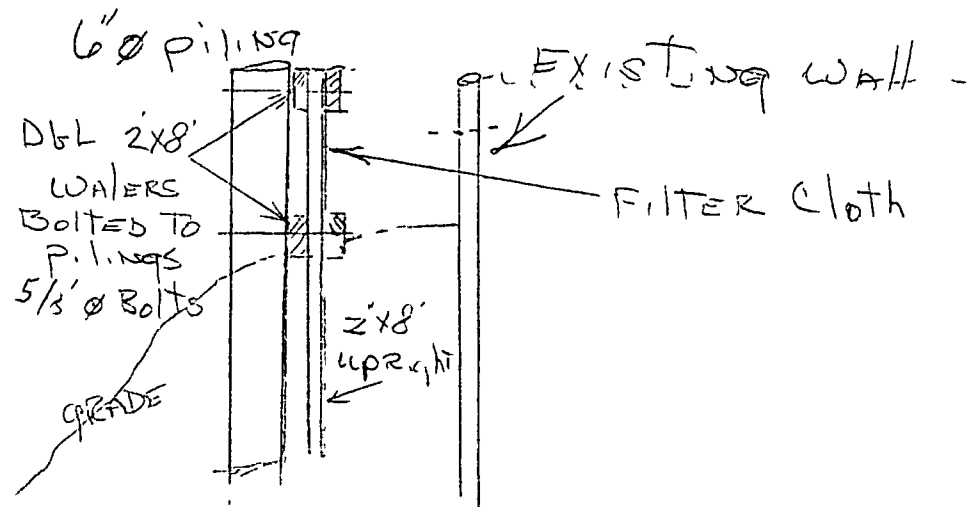


ELEVATION

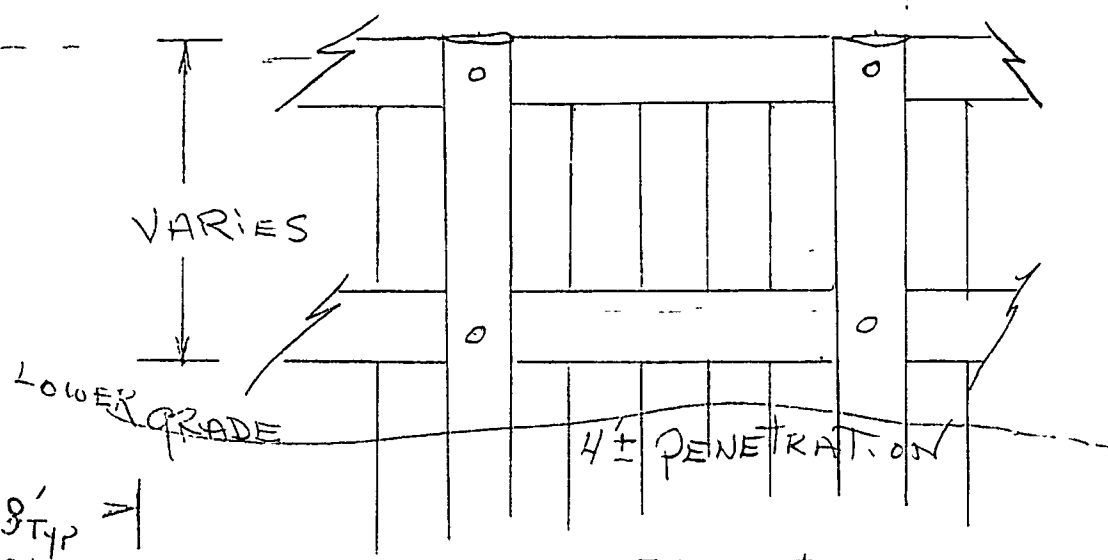


CLIFF'S MARINE
 3452 N E. INDIAN DRIVE
 JENSEN BEACH, FL 33457
 Ph. 334-0078 or 286-5524

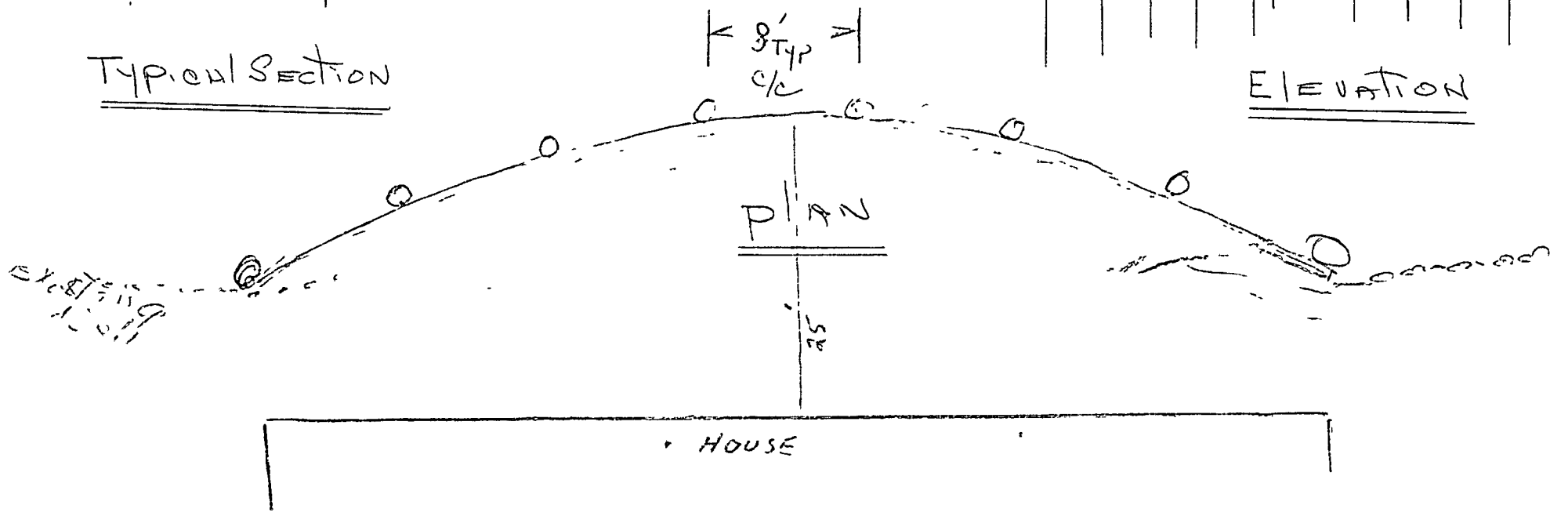
PROPOSED WOOD
 RETAINING WALL
 FOR
 MR PLAWRENCE
 3452 INDIAN DR



TYPICAL SECTION



ELEVATION



CLIFF'S MARINE
 3452 N E INDIAN DRIVE
 JENSEN BEACH, FL 33457
 Ph. 334-0078 or 286-5524

PROPOSED WOOD
 RETAINING WALL
 FOR
 MR PLAWRENCE
 2010 11 17

TOWN OF SEWALL'S POINT, FLORIDA

Permit Number 1893

Date 2/21/86

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

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

Owner Paul Lawrence Present Address 85

Phone _____ No Sewall Pt Rd

Contractor W. A. Larkin Address 25 Oracle La Ft Pierce

Phone 461-3417

Where licensed M. Co. Stuart License number 9429

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

Roofing contractor _____ License number _____

Air conditioning contractor _____ License number _____

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

5' chain Link Fence No Property Line

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

PLAN IN BACK.

Subdivision S. 7/8 of S 18.2 Acres of Gov. 2 Lot number _____ Block number _____

Contract price \$ 2000.00 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 plan. I further understand that approval of these plans in no way relieves me of complying with the Town of Sewall's Point Ordinances, the State of Florida Model Energy Efficiency Building Code and the South Florida Building Code. Moreover, I understand that I am responsible for maintaining the construction site in a neat and orderly fashion, policing the area for trash, scrap building materials and other debris, such debris being gathered in one area and at least once a week, or oftener when necessary, removing same from the area and from the Town of Sewall's Point. Failure to comply may result in a Building Inspector or Town Commissioner "red-tagging" the construction project.

Contractor W. A. Larkin

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 _____

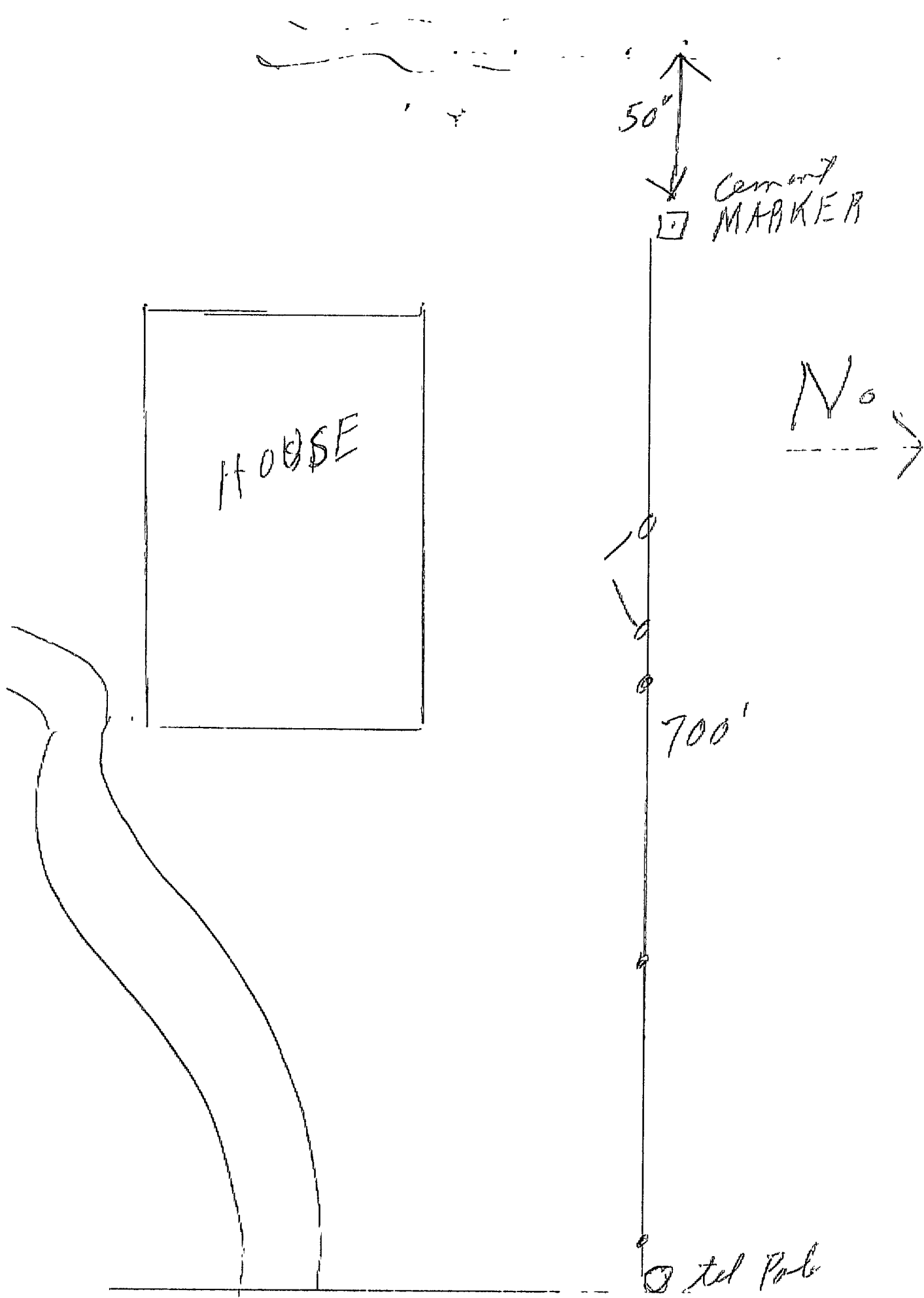
TOWN RECORD

Date submitted 2/21/86 Approved [Signature] 2/21/85
Building Inspector Date

Approved [Signature] 3 March 1986 Final Approval given _____
Commissioner Date Date

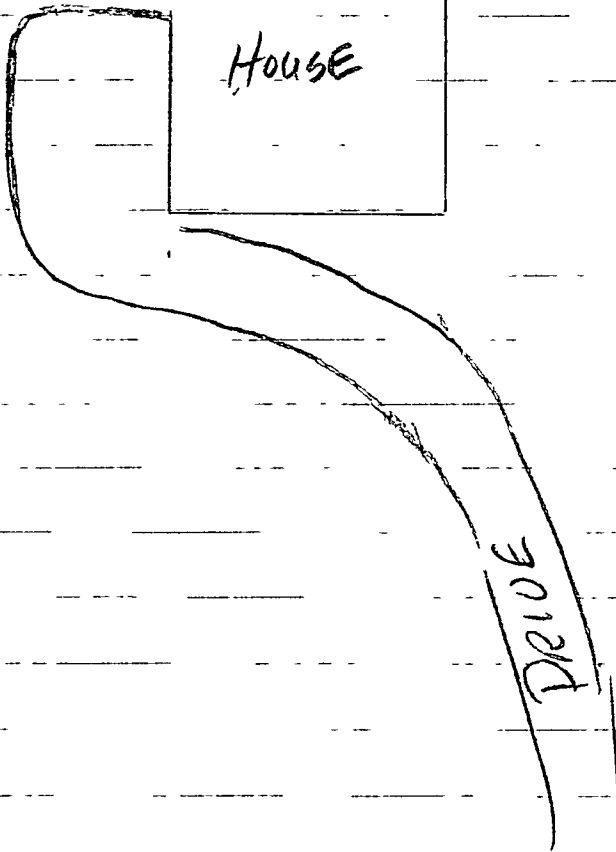
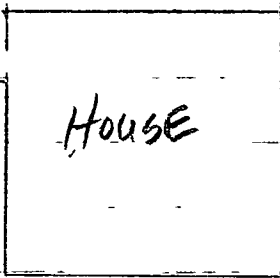
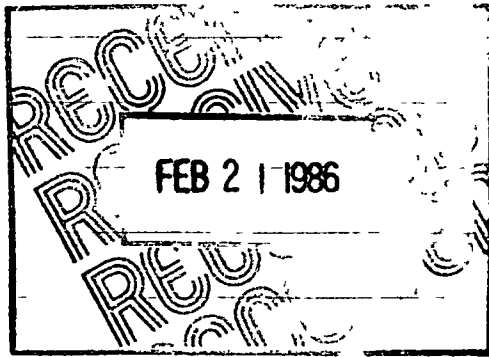
Certificate of Occupancy issued (if applicable) _____
Date

NOTE INSPECTED SAME + WEST END 2 feet inside prop monument. + [Signature]



85 No. Sewell Pt Rd

INDIAN RIVER



N

X = FENCING
5' - CHAIN LINK

SEWELL'S PT RD

3953

REPLACE DECKING

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

DO NOT REMOVE UNTIL JOB IS COMPLETED

OWNER Mr Edwin Gifford

CONTRACTOR Dredge + Marine

LOT 2 BLOCK _____ SUB Gov

NO 85 NSPR

NO 3953 DATE ISSUED 3/22/96

Call 287-2455 From 8 00 A M - 12 00 Noon and
1 00 P M - 4 00 P M For Inspections of Items 1 thru 13

TOWN OF SEWALL'S POINT BUILDING PERMIT

- REQUESTS FOR INSPECTIONS REQUIRE AT LEAST 24 HOURS NOTICE
- ALL WORK MUST BE IN COMPLIANCE WITH THE TOWN OF SEWALL'S POINT ORDINANCES, THE SOUTH FLORIDA BUILDING CODE, THE STATE OF FLORIDA ENERGY EFFICIENCY BUILDING CODE AND ELEVATIONS BASED ON THE LATEST FLOOD INSURANCE RATE MAP
- PORTABLE TOILET FACILITIES MUST BE ON JOB SITE BEFORE INITIAL INSPECTION
- WORKING HOURS ARE FROM 8:00 TO 5:00 P.M. MONDAY THRU SATURDAY.

REQUIRED INSPECTIONS	INSPECTOR'S FINDING	INSPECTOR'S SIGNATURE
1 LOT STAKES/SET BACKS		
2 TERMITE PROTECTION		
3 FOOTING - SLAB		
4 ROUGH PLUMBING		
5 ROUGH ELECTRIC		
6 LINTEL		
7 ROOF		
8 FRAMING		
9 INSULATION		
10 A/C DUCTS		
11 FINAL ELECTRIC		
12 FINAL PLUMBING		
13 FINAL CONSTRUCTION		


TO CONSTRUCT Replace decking, dock
REMARKS.

2093

DREDGE & MARINE CONSTRUCTION
P O BOX 399
PORT SALERNO, FL 34992

DATE 4/25/97 63-5153
670

PAY TO THE ORDER OF TOWN OF SEWALL'S PT \$ 200.00

TWO HUNDRED & 00/100 DOLLARS 

First National
BANK AND TRUST COMPANY
THE SUPERCOMMUNITY BANK
STUART FLORIDA 34996

FOR GIFFORD Miss An MP

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 4175

Date 3/25 19 97

Building to be erected for Edwin Gifford

Applied for by MIKE KREMSER / DREDGE & MARINE CONST (Contractor)

Subdivision GOV-LOT Lot 2 Block _____

Address 85 N. SEWALL'S PT Rd.

Type of structure DOCK REPAIR — RENEWAL PERMIT 3953

Building Fee 200, A/C Fee \$100.00, Electrical Fee \$100.00, Plumbing Fee \$100.00, Roofing Fee \$100.00,

Radon Fee _____ Impact Fee (If applicable) _____

TOTAL Fees 200 PAID - Check # 2093, Cash _____

Total Construction Cost \$ 6000

Signed [Signature]
Applicant

Signed [Signature]
Town Building Inspector

4175

DATE 3/20/96

TAX FOLIO NO. _____

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 ERWIN GIFFORD Present address 85 N SEWALL'S Pt Rd

Phone 223-6348

Contractor DREDGE & MARINE CONSTRUCTION Address P.O. Box 399

Phone 223-0105 PORT SALERNO, FL 34992

Where licensed STATE OF FLORIDA License number CGC 015805

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: RECONSTRUCTION AND REPAIRS TO DOCK

NOT TO CHANGE EXISTING SIZE OF DOCK

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

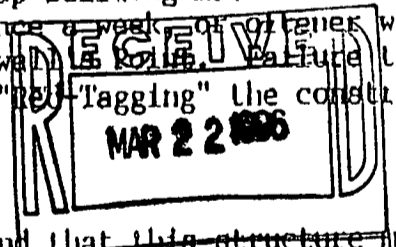
85 N. SEWALLS Pt Rd.

Subdivision _____ Lot Number 2 Block Number _____

Contract price \$ 5500.00 Cost of permit \$ 200.00

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 Daniel McKin

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 Erwin Gifford

TOWN RECORD

Date submitted _____

Approved: Dale Brown 3/22/96
Building Inspector Date

Approved: _____ Final approval given: _____
Commissioner Date Date

CERTIFICATE OF OCCUPANCY issued (if applicable) _____
Date _____

PERMIT NO. _____

3959

REDECK DOCK

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 1-28-99

BUILDING PERMIT NO. 4538

Building to be erected for Confined N/M Type of Permit Demolition

Applied for by Scott Adams (Contractor) Per Building Fee 170.12

Subdivision _____ Lot 85 Block _____ Radon Fee _____

Address 85 N. Sewall's Point Rd Impact Fee _____

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

Parcel Control Number _____ Electrical Fee _____

35324100000 00240-2000

Plumbing Fee _____

Roofing Fee _____

Amount Paid 170.12 Check # 5805 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 18,600 TOTAL Fees 170.12

Signed [Signature] Signed Robert A. B. H.

Applicant

Town Building Inspector

DEMOLITION

INSPECTIONS

UTILITIES FLAGGED _____ DATE _____
ASBESTOS CERT. _____ DATE _____
DEBRIS REMOVAL _____ DATE _____

WATER DISC. _____
ELECTRIC DISC. _____
SITE RESTORATION _____
FINAL _____

DATE _____
DATE _____
DATE _____
DATE _____

24 HOURS NOTICE REQUIRED FOR INSPECTIONS.

CALL 287-2455

WORK HOURS - 8:00 AM UNTIL 5:00 PM

MONDAY THROUGH SATURDAY

TOTAL

PARTIAL

EXPLORATORY

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

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

Town of Sewall's Point

PLN. _____

Date 1-19-99

BUILDING PERMIT APPLICATION

4538

to construct:

NEW CONSTRUCTION ADDITION ALTERATION DEMOLITION

RESIDENTIAL COMMERCIAL _____ SF _____ CF

OTHER: _____ CONTRACT PRICE 18,600

Owner's Name GIFFORD ERWIN L & SABRINA R

Owner's Address 85 N Sewall's Point RD

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

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

City N/A State _____ Zip _____

Contractor's Name SCOTT J Holmes Building Inc.

Contractor's Address P.O. BOX 2804

City Jensen Beach State FL. Zip 34958

Job Name LOT 85 N. Sewall's Point ROAD

Job Address Same

City Sewall's Point State FL Zip 34926

Legal Description 35-37-41-000-000-00240-20000

Bonding Company N/A

Bonding Company Address N/A

City N/A State N/A Zip N/A

Architect/Engineer's Name N/A

Architect/Engineer's Address N/A

Mortgage Lender's Name N/A

Mortgage Lender's Address N/A

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

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

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

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

Erwin Gifford
Owner or Agent

1-19-99
Date

[Signature]
Contractor

1-19-99
Date

COUNTY OF MARTIN
STATE OF FLORIDA

Sworn to and subscribed before me this 19 day of Jan, 1999, by

ERWIN GIFFORD who: [] is/are personally known to me, or [] has/have produced DRIVER'S LICENSE as identification, and who did not take an oath.



Sharon A. Burke
MY COMMISSION # CC654483 EXPIRES
August 8, 2001
BONDED THRU TROY FAIN INSURANCE INC

Name: Sharon A. Burke
SHARON A. BURKE

Typed, printed or stamped
(NOTARY SEAL)

I am a Notary Public of the State of Florida having a
commission number of _____



Sharon A. Burke and my
MY COMMISSION # CC654483 EXPIRES
August 8, 2001
BONDED THRU TROY FAIN INSURANCE INC

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 19 day of Jan, 1999, by

SCOTT J. HOLMES who: [] is/are personally known to me, or [] has/have produced _____ as identification, and who did not take an oath.

(NOTARY SEAL)



Sharon A. Burke
MY COMMISSION # CC654483 EXPIRES
August 8, 2001
BONDED THRU TROY FAIN INSURANCE INC

Name: Sharon A. Burke
SHARON A. BURKE

Typed, printed or stamped

I am a Notary Public of the State of Florida having a
commission number of _____

and my
commission expires: _____

Certificate of Competency Holder

Contractor's State Certification or Registration No. CLC-055859

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY [Signature] Permit Officer

Building Commissioner



Town of Sewall's Point
Phone: (561) 287-2455 **Fax: (561) 220-4763**
One South Sewall's Point Road, Sewall's Point, Florida 34996

GENERAL CONDITIONS OF BUILDING PERMITS

All construction must conform to the Code of Ordinances of the Town of Sewall's Point, The South Florida Building Code (Dade County 1994 Edition updated to Supplement No. 4, January 1998, and Florida Statutes.

A Notice of Commencement is required for work, \$2,500 or more in value.

The Building Official does not have the authority to approve drawings or construction which would be in violation of the above mentioned Codes. Errors or omissions by the building department will not relieve the Owner or the Contractor from the above requirements, nor does this permit grant any waivers from the Code.

The permit is valid for one year, and may be renewed upon the payment of another permit fee equal to the original permit fee.

Wind load requirements for all new construction is based upon 140 MPH, exposure D as listed in ANSI/ASCE 7-88 approved November 27, 1990.
-Storm protection devices (shutters) are required on ALL windows and doors.

Permanent water and temporary or permanent electric service must be provided on site. Borrowing services from a neighbor is not allowed.

-Toilet facilities for workers must be provided. Construction sites must be kept free of debris at all times. Trash containers are required on all construction sites. They should not be overflowing.

Inspections and permits may be suspended or revoked and the Town may take other actions for failure to correct defects, concealing work without an approval by inspection, or by any willful violations of the above conditions or special conditions noted on the construction documents including the permit.

Working Hours - 8:00 am until 5:00 pm, Mon. – Sat.

Building Permit Application Checklist

Survey of the property certified to The Town of Sewall's Point showing the following:

- Complete legal description of the property.
- Existing finish grade elevations, expressed in NGVD.
- Calculations of lot size in square feet.
- All boundaries, easements, rights of way, encroachments, setback lines, existing improvements, and FIRM flood zone.
- Indication of trees on site by caliper and species, and those to be relocated or removed.

Site Plan showing all of the above except the trees to be removed, plus the following:

- Total area of existing and proposed improvements, by category, expressed in square footage, and total percentage of lot coverage.
- Drainage diagram and calculations for the retention of rainwater from a 3-day, 100-year storm event.
- Elevation of lowest habitable floor.

Building documents signed and sealed by an Architect or Engineer showing in detail the following:

- Elevations of each floor level and highest ridge of the roof with a tie-in with NGVD.
- Wind Load Certification of the structure for 140 mph, Exposure D, according to ASCE/ASCE 7-88
- Specifications for gravity and uplift connections.
- Foundation Plan with typical and special Section Drawings.
- Floor Framing Plan(s). Floor plan(s) with ceiling heights given for each non-typical room.
- Emergency egress panels or windows must be indicated.
- Roof framing plan. (Sealed)
- Electrical, Plumbing, and Mechanical drawings. (Sealed)
- Cross Section(s), Sections and Details, Elevations:
- Energy Code Calculations.

Other:

- Florida Department of Health septic tank permit or connection agreement to Martin County sewer.
- Recorded Notice of Commencement for work exceeding \$2,500 must be presented prior to construction.
- Water Meter connection and Electric Service must be provided to site prior to first inspection.
- Properly executed Building Permit Application with receipt from School Board for Impact Fees.

4538

DEMO

FILE

MASTER PERMIT NO. 4820

TOWN OF SEWALL'S POINT

Date 03/07/80

BUILDING PERMIT NO. 4829

Building to be erected for ERWIN GIFFORD

Type of Permit (NO FEE) ELECT. SUB

Applied for by COOK ELECTRIC INC

(Contractor) Building Fee _____

Subdivision _____ Lot _____ Block _____

Radon Fee _____

Address 85 N SEWALL'S POINT ROAD

Impact Fee _____

Type of structure SFR

A/C Fee _____

*CORRECTED: ROBERT C. COOK
ER0008060*

Electrical Fee SEE PN 4820

Parcel Control Number _____

Plumbing Fee _____

Roofing Fee _____

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

Total Construction Cost \$ _____ TOTAL Fees _____

Signed [Signature]
Applicant

Signed [Signature]
Town Building Inspector OFFICE

ELECT. SUB

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 <u>7/31/00</u>

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!**

Bldg. Pmt# _____

Town of Sewall's Point

Date JAN. 19TH, 2000

BUILDING PERMIT APPLICATION

RECEIVED
2000 JAN 20 2000
BY: ZIP: 34996

Owner's Name: Mr & Mrs ERWIN GIFFORD Phone No. _____
Owner's Present Address: 85 NORTH SEWALL'S POINT ROAD
Fee Simple Titleholder's Name & Address if other than owner: NONE

Location of Job Site: 85 N. SEWALL'S POINT ROAD
TYPE OF WORK TO BE DONE: PORCH/LANAI ADDITION & AESTHETIC IMPROVEMENTS
CONTRACTOR INFORMATION
Contractor/Company Name: DON CAMPORA CONSTRUCTION CO. INC. Phone No. 283-6440
COMPLETE MAILING ADDRESS: 6435 SE WILD OLIVE LANE STUART, FL 34997
State Registration _____ State License CLC-022955
Legal Description of Property: SEE ATTACHMENT
Parcel Number: 35-37-41-000-000-00242-00000

ARCHITECT/ENGINEER INFORMATION

Architect: MARK CORSON & ASSOCIATES Phone No. 223-8227
Address: STUART FL.
Engineer: N/A Phone No. _____
Address: _____

Area Square Footage: Living Area 0 Garage Area 0 Carport 0
Accessory Bldg. 0 Covered Patio 343 Scr. Porch 0 Wood Deck 0
Type Sewage: _____ Septic Tank Permit # from Health Dept. N/A
NEW electrical SERVICE SIZE N/A AMPS

FLOOD HAZARD INFORMATION

flood zone _____ minimum Base Flood Elevation (BFE) _____ NGVD
proposed finish floor elevation _____ NGVD (minimum 1 foot above BFE)
Cost of construction or Improvement ± \$15,000.00
Fair Market Value (FMV) prior to improvement \$90,000.00 +
Substantial Improvement 50% of FMV yes _____ No X
Method of determining FMV \$60.00/SQ FT VALUE OF EXISTING STRUCTURE

SUBCONTRACTOR INFORMATION: (Notify this office if subcontractor's change.)

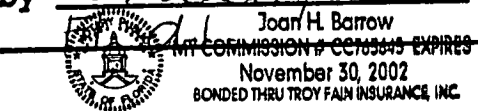
Electrical: COOK ELECTRIC State License ER-0008060
Mechanical: N/A State License# _____
Plumbing: N/A State License# _____
Roofing: N/A State License# _____

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

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

OWNER/ CONTRACTOR MUST SIGN APPLICATION

OWNER or AGENT SIGNATURE: DOUGLAS L CAMPORA
Sworn to and subscribed before me this 19TH day of JANUARY, 1998 by 2000
_____ who is personally known to me or has produced or has produced _____ and who did (did not) take an oath.
CONTRACTOR SIGNATURE: Douglas L Campora
Sworn to and subscribed before me this 19TH day of JAN., 1998
by D.L. Campora who is personally known to me or has produced 2000
_____ and who did (did not) take an oath.



TREE REMOVAL (Attach sealed survey)

No. of trees to be removed _____ No. to be retained _____ No. to be planted _____
Specimen tree removed _____ Fee _____ Authorized/Date _____
DEVELOPMENT ORDER # _____

1. ALL APPLICATIONS REQUIRE :

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

ADDITIONAL Required Documents are:

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

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

Approved by Building Official _____

Approved by Town Engineer _____

PRCOR 1058

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 02/15/00

BUILDING PERMIT NO. 4828

Building to be erected for ERWIN GIFFORD

Type of Permit BLDG-PORCH/LAND ADDN.

Applied for by DDO CAMPORE CONST., INC.

(Contractor) Building Fee \$144.00

Subdivision _____ Lot _____ Block _____

Radon Fee N/A

Address 85 N SEWALLS POINT ROAD

Impact Fee N/A

Type of structure SFR

A/C Fee N/A

Parcel Control Number.

Electrical Fee \$120.00

35-37-41-000 000 00242-00000

Plumbing Fee N/A

Amount Paid \$264.00 Check # 8294 Cash _____

Roofing Fee N/A

Total Construction Cost \$ 15,000.00

Other Fees (PLAN REV.) \$14.40

TOTAL Fees \$278.40

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 <u>7/31/00</u>

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

PERMIT NO. 43-SS-02232
 DATE PAID: _____
 FEE PAID: _____
 RECEIPT # _____

APPLICATION FOR:
 New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary _____

APPLICANT: ERWIN L. GIFFORD

AGENT: ASLAN, INC - ERIC HOLLY, P.S.M. TELEPHONE: 861-288-4880

MAILING ADDRESS: P.O. Box 1500, STUART, FL 34995-1500

=====

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
LEGAL DESCRIPTION ATTACHED
 LOT: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 3537-41-000-000-0242-0000 ZONING: RES. I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 4.65 ACRES WATER SUPPLY: [] PRIVATE PUBLIC <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 85 N. SEWALL'S POINT ROAD, STUART, FL 34996

DIRECTIONS TO PROPERTY: EAST ON EAST OCEAN BLVD TO INTERSECTION OF A1A AND SEWALL'S POINT ROAD. NORTH ON N. SEWALL'S PT. ROAD, PROPERTY 1 MILE ON LEFT HAND SIDE

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>SF RESIDENCE</u>	<u>5</u>	<u>7293</u>	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____
4	_____	_____	_____	_____

[] Floor/Equipment Drains [] Other (Specify) _____
 SIGNATURE: _____ DATE: 4-18-2000

APPLICANT'S NAME: ERWIN L GIFFORD

LEGAL DESCRIPTION: ATTACHED

PROPOSED SEPTIC SYSTEM SITE INFORMATION

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

- 1 Is there a septic system within 75 feet of the proposed private well? ----- Yes No N/A
- 2 Is there a potable private well within 75 feet of the available area for the proposed septic system? ----- Yes No
- 3 Is there a non-potable well within 50 feet of the available area for the proposed septic system? ----- Yes No
- 4 Is there a proposed well within 25 feet of the building foundation? ----- Yes No
- 5 Is there a public well that serves less than 25 people or less than 15 homes or businesses within 100 feet of the proposed septic system? ----- Yes No
- 6 Is there a public well that serves more than 25 people or more than 15 homes or businesses within 200 feet of the proposed septic system? ----- Yes No
- 7 Is there a gravity sewer line or lift station within 50 feet of the proposed lot? ----- Yes No
- 8 Is there a lake, stream, wetland, or surface water within 75 feet of the available area for the proposed septic system? ----- Yes No
- 9 Is there a proposed or existing public drinking water line within 10 feet of the proposed septic system? ----- Yes No
- 10 Is there a storm water retention area or drainage easement within 15 feet of the proposed septic system? ----- Yes No
- 11 Is the proposed septic system in an area proposed for paving or vehicular traffic? ----- Yes No
- 12 Are all private wells, septic systems and surface water on adjacent or contiguous land within 75 feet of the applicant's lot shown on the site plan? ----- Yes No N/A
- 13 Are all public wells within 200 feet of the applicant's lot shown on the site plan? ----- Yes No N/A
- 14 Does the site plan include a plat of the lot or total site ownership drawn to scale, boundaries with dimensions, locations of building or residences, swimming pools, recorded easements, proposed or existing septic systems, any proposed or existing wells, public water lines, paved areas or driveways, and surface waters such as lakes, ponds, streams, canals, or wetlands? ----- Yes No
- 15 Does the site plan show the general slope of the property, recorded easements from the recorded plat, filled areas and drainage features and surface waters such as lakes, ponds, streams, canals, or wetlands? ----- Yes No
- 16 Are the natural grade elevation in the area of the septic system and the benchmark shown on the site plan? ----- Yes No
- 17 Is the public water line location from the water meter to the house shown on the site plan? ----- Yes No N/A
- 18 There is 6,483 square feet of available, unobstructed, contiguous land to install the septic system. This area excludes interferences. Shade this available area on the site plan

SITE ELEVATIONS

- 1 Crown of road elevation 4.0' +/- NGVD Show location on the site plan If the road is not paved, benchmark elevation _____ NGVD Show location on site plan
- 2 Natural grade elevation in the area of the proposed septic system 9.3' NGVD Show location on site plan
- 3 Is the building location in a flood hazard area "A" or "V" as identified on FEMA maps? Yes or No If yes, what is the minimum required flood hazard floor elevation of the building? _____ NGVD

NOTE Please locate the reference point or benchmark within 200 feet of the proposed septic system
**BOX CUT ON N.E. CORNER OF CONCRETE PORCH OF GUEST HOUSE,
ELEVATION 12.82'**

NOTE MUST BE CERTIFIED BY A FLORIDA REGISTERED SURVEYOR OR ENGINEER

CERTIFIED BY [Signature]
FLORIDA PROFESSIONAL NO PSM 3336
DATE 4-18-2000 JOB NO 142

PERMIT # PN-4828

TAX FOLIO # 35-37-41-000-000-00242-00000

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

RECEIVED
FEB 28 2000
BY: [Signature]

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

85 NORTH SEWALL'S POINT ROAD Stuart, FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Porch/LANAI ADDITION & INT. REMODEL

OWNER: MR. ERWIN GIFFORD & SABRINA GIFFORD.

ADDRESS 85 N SEWALL'S POINT ROAD.

PHONE # 223-5561

FAX # N/A.

CONTRACTOR: DON CAMPORA CONSTRUCTION CO., INC.

ADDRESS 6435 SE WILD OLIVE LANE Stuart, FL 34997

PHONE # 283-4761

FAX # 283-6440

SURETY COMPANY (IF ANY) NONE

ADDRESS _____

PHONE # _____

FAX # _____

BOND AMOUNT _____

LENDER NONE

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 NONE

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 _____

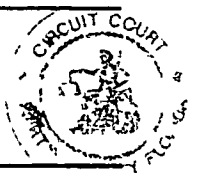
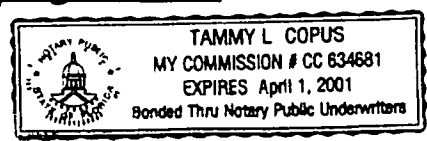
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 28 DAY OF February 2000 BY ERWIN L. GIFFORD

[Signature]
NOTARY SIGNATURE

PERSONALLY KNOWN _____
OR PRODUCED ID FLDL
TYPE OF ID 6163 212 38 3450



PRODUCER
Plastridge Agency, Inc
 811 S E. Ocean Blvd
 Stuart FL 34994-2427

Jean Reed Parks
 Phone No 561-287-5532 Fax No 561-287-5572

INSURED
Cook Electric
 PO Box 1104
 Pt. Salerno FL 34992

FILE
W...

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

COMPANIES AFFORDING COVERAGE	
COMPANY A	Old Dominion Ins.
COMPANY B	Comp Options/BC-BS
COMPANY C	
COMPANY D	

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	MPG26908	12/01/99	12/01/00	GENERAL AGGREGATE \$ 1000000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS COMP/OP AGG \$ 1000000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 500000
	OWNER S & CONTRACTOR S PROT				EACH OCCURRENCE \$ 500000
					FIRE DAMAGE (Any one fire) \$ 500000
					MED EXP (Any one person) \$ 10000
A	AUTOMOBILE LIABILITY	B1G26908	12/01/99	12/01/00	COMBINED SINGLE LIMIT \$ 500000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY \$
					EACH ACCIDENT \$
					AGGREGATE \$
A	EXCESS LIABILITY	CUG24347R	12/01/99	12/01/00	EACH OCCURRENCE \$ 1000000
	<input checked="" type="checkbox"/> UMBRELLA FORM				AGGREGATE \$ 1000000
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				\$
B	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	S21UB152D382399R	12/01/99	12/01/00	WC STATUTORY LIMITS
	<input type="checkbox"/> INCL				EL EACH ACCIDENT \$ 500000
	<input type="checkbox"/> EXCL				EL DISEASE - POLICY LIMIT \$ 500000
					EL DISEASE - EA EMPLOYEE \$ 500000
A	OTHER	MPG26908	12/01/99	12/01/00	
	Property Section				
A	Acct Rec/Val Paper	MPG26908	12/01/99	12/01/00	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
Electrical contractors

CERTIFICATE HOLDER
TOWNSE1
 Town of Sewall's Point
 Dale Brown
 Building Inspector
 1 S Sewall's Point Road
 Stuart FL 34996

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

AUTHORIZED REPRESENTATIVE
Jean Reed Parks
 Jean Reed Parks

ELECTRICAL CONTRACTORS LICENSING BOARD

BATCH NUMBER	LICENSE NBR
3/1998	97903993 ER -0008060

ELECTRICAL CONTRACTOR
 named below HAS REGISTERED
 Under the provisions of Chapter 489 F.S.
 Expiration date: AUG 31, 2000
 (INDIVIDUAL MUST MEET ALL LOCAL COMPETENCY REQUIREMENTS
 PRIOR TO CONTRACTING IN ANY AREA)

COOK, ROBERT
 COOK ELECTRIC INC
 PO BOX 1104
 PORT SALERNO FL 34992-1104

LAWTON CHILES
 GOVERNOR

DISPLAY AS REQUIRED BY LAW

RICHARD T. FARREL
 SECRETARY

MARTIN COUNTY ORIGINAL
 COUNTY OCCUPATIONAL LICENSE

Larry C O Steen Tax Collector P O Box 9013 Stuart, FL 34995
 (561) 288-3604

LICENSE 1982 508 133 CERT ME00152
 PHONE 561 287 0938 SIC NO 0000

LOCATION
4250 SE COMMERCE AVE

PREV YR \$	<u>0.00</u>	LIC FEE \$	<u>25.00</u>
\$	<u>0.00</u>	PENALTY \$	<u>0.00</u>
\$	<u>0.00</u>	COL FEE \$	<u>0.00</u>
\$		TRANSFER \$	<u>0.00</u>
TOTAL			<u>25.00</u>

COOK ELECTRIC INC
PO BOX 1104
PORT SALERNO FL 34992

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS PROFESSION OR OCCUPATION
 OF **MASTER ELEC.**

AT ABOVE ADDRESS FOR THE PERIOD BEGINNING ON THE

1 DAY OF OCTOBER 1998 SEC
 AND ENDING SEPTEMBER 30, 1999 998081101 870

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
01/14/2000

PRODUCER (561)287-2030 FAX (561)288-2481

Deakins-Carroll Insurance Agency
P O Box 1597
Pt Salerno, FL 34992

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

Attn Barbara Walenius

Ext

INSURED Don Campora Construction Company, Inc
6435 SE Wild Olive Lane
Stuart, FL 34997

FILE
PEROUT

COMPANIES AFFORDING COVERAGE
Assurance Company of America
COMPANY A
ZC Insurance Company
COMPANY B
COMPANY C
COMPANY D

COVERAGES

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CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	RGM21107884	12/21/1999	12/21/2000	GENERAL AGGREGATE \$ 600,000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS COMP/OP AGG \$ 600,000
	CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY \$ 300,000
	OWNERS & CONTRACTORS PROT				EACH OCCURRENCE \$ 300,000
					FIRE DAMAGE (Any one fire) \$ 50,000
					MED EXP (Any one person) \$ 10,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	ANY AUTO				
	ALL OWNED AUTOS				BODILY INJURY (Per person) \$
	SCHEDULED AUTOS				
	HIRED AUTOS				BODILY INJURY (Per accident) \$
	NON OWNED AUTOS				PROPERTY DAMAGE \$
	GARAGE LIABILITY				AUTO ONLY EA ACCIDENT \$
	ANY AUTO				OTHER THAN AUTO ONLY
					EACH ACCIDENT \$
	EXCESS LIABILITY				AGGREGATE \$
	UMBRELLA FORM				EACH OCCURRENCE \$
	OTHER THAN UMBRELLA FORM				AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	197000013636100	01/01/2000	01/01/2001	WC STATUTORY LIMITS OTH ER
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE				EL EACH ACCIDENT \$ 100,000
	INCL				EL DISEASE POLICY LIMIT \$ 500,000
	X EXCL				EL DISEASE EA EMPLOYEE \$ 100,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

Sewall's Point, Town of
1 South Sewall's Point Road
Stuart, FL 23996


CANCELLATION

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

AUTHORIZED REPRESENTATIVE

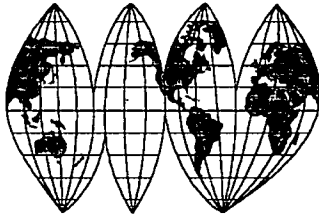
David Deakins/BW



 STATE OF FLORIDA AC# 5193184
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION
CG -C022955 06/30/1998 97904248
CERTIFIED GENERAL CONTRACTOR
CAMPORA, DOUGLAS L.
DON CAMPORA CONST CO INC
IS CERTIFIED under the provisions of Ch 489 FS
Expiration Date AUG 31, 2000


SIGNATURE

Mail To Post Office Box 1500, Stuart, FL 34995-1500
 2440 S E Federal Highway - Ste 700, Stuart, FL 34994
 Telephone [561] 288-4880 TeleFax [561] 288-0128



REPORT OF BOUNDARY AND TOPOGRAPHIC SURVEY
 for Erwin L Gifford and Sabrina R Gifford
 September 7, 1999

Map of Boundary and Topographic Survey

See Map of Boundary and Topographic Tree Survey, lands described in O R Book 1096, Page 1072, dated November 2, 1994 This survey map and report is not valid without the signature and original raised seal of the Florida licensed Surveyor and Mapper The signature and seal can be found at the end of this report The map and report are not full and complete without the other

Legal Description

All that part of the North 300 33 feet of the South 424 33 feet of Government Lot 2, Section 35, Township 37 South, Range 41 East, which lies west of the Westerly right of way line of Sewall's Point Road, less and except a parcel or tract of land more particularly described as follows

Beginning at a point on the South line of the North 300 33 feet of the South 424 33 feet of said Government Lot 2, said point being in the centerline of Sewall's Point Road, (1) thence proceed South 89°31'00" West along the South line of the North 300 33 feet of the South 424 33 feet of Government Lot 2, for a distance of 175 feet to a concrete monument, (2) thence proceed North 15°26'00" West for a distance of 139 72 feet to a concrete monument, (3) thence proceed North 89°31'00" East along a line parallel to and 135 feet North of the line described in call No 1 for a distance of 131 25 feet to a point in the centerline of Sewall's Point Road for a distance of 156 80 feet to the **Point or Place of Beginning**

Accuracy

The expected use of the land, as classified in the Minimum Technical Standards (61G17-6FAC), is "Suburban" The minimum relative distance accuracy for this type of survey is 1 foot in 7,500 feet The accuracy obtained by measurement with an electronic total station and calculation of a closed geometric figure was found to exceed this requirement

Data Sources

Recorded adjoiner plats were obtained from County repositories

Measurement Methods

All equipment was tested and calibrated Two sets of traverse angles were turned and averaged The traverse indirectly connected the most east and west property corners and features were found from this traverse by side ties using a redundancy of measurements



General

- Bearings shown hereon are relative to the South line of Government Lot 2, bearing being S89°31'00"W
- Elevations shown hereon are in feet and decimal parts thereof and are relative to the National Geodetic Vertical Datum of 1929 and are based on Benchmark Sewall's Point-2 being a 2 inch brass disk located about 0 8 miles North of the intersection of State highway A-1-A (East Ocean Blvd) and Sewall's Point Road, about 90 feet east of the centerline of Sewall's Point Road and about the Southwest corner of a concrete seawall, set near the southwest corner of a 16 inch concrete seawall that parallels a small inlet leading to the Indian River, elevation 4 511 feet

Legend

Δ	CENTRAL ANGLE	BL	BASELINE	CATV	CABLE ANTENNA TV
A	ARC LENGTH	BLOC	BUILDING	CB	CATCH BASIN
AC	ACRES	B O C	BACK OF CURBS	CBS	CONCRETE BLOCK & STUCCO
AC	AS CONDITIONAL	B O W	BACK OF WALK	C C C L	COASTAL CONSTRUCTION CONTROL LINE
A E	ACCESS EASEMENT	BRG	BEARING	CF	CONCRETE FLLINE
A K A	ALSO KNOWN AS	BM	BENCHMARK	CH	CHORD
ASPH	ASPHALT	C	CALCULATED MEASUREMENT	CL	CENTERLINE

Report of Boundary and Topographic Survey
Erwin L Gifford and Sabrina R Gifford
Page 2

CM	CONCRETE MONUMENT	MMML	MEAN HIGH WATER LINE	PUD	PLANNED UNIT DEVELOPMENT
CONC	CONCRETE	MH	MANHOLE	PVMT	PAVEMENT
CP	CONCRETE POWER POLE	MPL	METAL PEDIESTRIAN LIGHT	R	RADIUS
CTL	CONCRETE TRAFFIC LIGHT	MTCO	MISCELLANEOUS TRAFFIC CONTROL DEVICES	RES	RESIDENCE
D/E	DRAINAGE EASEMENT	NGVD	NATIONAL GEODETIC VERTICAL DATUM	RGE	RANGE
D	DEED DATUM	NTIC	NOT INCLUDED	RME	REGISTRATION MAINTENANCE EASEMENT
DBH	DIAMETER BREAST HEIGHT	NTS	NOT TO SCALE	R/W	RIG-IT-OF-WAY
DH	DRILL HOLE	OA	OVERALL	SECT	SECTION
E/H	ELECTRIC HAND HOLE	OD	OUTSIDE DIAMETER	SS	SANITARY SEWER
EL	ELEVATION	OH	OVERHANG	SBI	SOUTHERN BELL TELEPHONE BOX
EP	EDGE OF PAVEMENT	OHPL	OVERHEAD POWER LINE	SD	SUBDIVISION
EW	EDGE OF WATER	ORB	OFFICIAL RECORD BOOK	SF	SQUARE FEET
FPE	FINISH FLOOR ELEVATION	P	PLAT DATUM	SUL	SAFE UPLAND LINE
FD	FOUND	PB	PLAT BOOK	T	TANGENT
FH	FIRE HYDRANT	PBC	PALM BEACH COUNTY	TOB	TOP OF BANK
FPL	FLORIDA POWER & LIGHT	PC	POINT OF CURVATURE	TWP	TOWNSHIP
FT	FEET	PCP	PERMANENT CONTROL POINT	TYP	TYPICAL
GOV/T	GOVERNMENT	PG	PAGE	TSP	TRAFFIC SIGNAL LIGHT
HSE	HOUSE	PI	POINT OF INTERSECTION	UC	UNDER CONSTRUCTION
IE	INGRESS & EGRESS EASEMENT	PK	PARKER/KALONNAIL	UE	UTILITY EASEMENT
INV	INVERT	PK&D	PARKER KALONNAIL & DISC	U/H	UTILITY HAND HOLE
R	IRON ROD	PL	PROPERTY LINE	UR	UNRECOVERED
R&C	IRON ROD CAP	PLS	PROFESSIONAL LAND SURVEYOR	WC	WITNESS CORNER
L	ARC LENGTH	POB	POINT OF BEGINNING	WCV	WATER GATE VALVE
LAE	LIMITED ACCESS EASEMENT	P/C	POINT OF COMMENCEMENT	WME	WATER MANAGEMENT EASEMENT
LE	LANDSCAPE EASEMENT	PP	POWER POLE	WMNE	WATER MGMT MAINTENANCE ESMT
LFE	LOWEST FLOOR ELEVATION	PRM	PERMANENT REFERENCE MONUMENT	WMT	WATER MANAGEMENT TRACT
UP	LIGHT POLE	PROP	PROPOSED	WPP	WOODEN POWER POLE
M	FIELD MEASURE DATUM	PSM	PROFESSIONAL SURVEYOR & MAPPER	WM	WATER METER
MCO	MARTIN COUNTY	PT	POINT OF TANGENCY	WV	WATER VALVE

Limitations

- This Survey was last surveyed in the field on September 7, 1999 and shall not be relied upon for field accuracy or sufficiency subsequent to that date
- No Title Policy or Commitment effecting title of the boundary shown hereon was provided Lands shown hereon were not abstracted in public records for rights-of-way, easements of records, ownership, Murphy Act deeds or adjoiners deeds Deeds or easements, recorded or unrecorded, may exist, which could affect this survey and the boundary shown hereon
- No visible aboveground evidences of physical use were noted by this survey, unless depicted or stated herein
- No underground improvements, utilities, foundations, footings, or septic tanks were located by this survey
- The shoreline and/or approximate mean high water line, as shown hereon, was determined on the date shown, by visual, biological and/or physical methods and does not purport to establish the Mean High Water Line as set forth in Chapter 177, Part II of the Florida Statutes, or Chapter 16-9 of the Florida Administrative Code Furthermore, this shoreline is subject to changes due to natural causes and may or may not represent the actual location of the limit of title This Mean High Water Line is as shown on that Map of Survey by Kerth & Schnars, Inc dated November 14, 1995, as revised
- The parcel as shown hereon has not been surveyed for determination of jurisdictional wetlands as defined by any governmental entity Any acreage shown hereon is calculated without regard to any such jurisdiction
- This map may have been photographically or digitally reduced or enlarged with or without the knowledge of the issuing agent It is incumbent upon the end user to determine the scale indicated hereon as reliable for the intended uses Certification is made only to the original scale so indicated
- This Survey shall not be copied, transferred or assigned without the specific written permission of Aslan, Inc

Boundary Inconsistencies

Some non-uniform monument displacement is shown relative to the South line of Government Lot 2

Apparent Physical Use:

A single-family residence was previously demolished

Easements

The site is presently served by power, telephone and CATV from the North, East and South No easements were provided for mapping other than shown

Report of Boundary and Topographic Survey
Erwin L Gifford and Sabrina R Gifford
Page 3

Prepared for

Erwin L Gifford and Sabrina R Gifford
85 North Sewall's Point Road
Sewall's Point, FL 34996

Certified to

This survey is prepared for the sole and exclusive benefit of Erwin L Gifford, Sabrina R Gifford and The Town of Sewall's Point and shall not be relied upon by any other entity or individual whomsoever

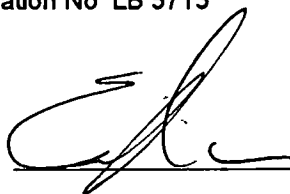
Surveyor and Mapper in Responsible Charge

Eric B Holly, P S M
Registration No LS 3336

ASLAN, inc.

P O Box 1500, Stuart, FL 34995-1500
2440 S E Federal Highway, Suite 700, Stuart, Florida 34994
(561) 288-4880
Registration No LB 5715

Signed



Issuance Date February 2, 2000

THIS SURVEY IS COVERED BY FINANCIAL RESPONSIBILITY LAWS AS THEY PERTAIN TO PROFESSIONAL SURVEYORS AND MAPPERS. THE SURVEY DEPICTED HEREON IS NOT COVERED BY PROFESSIONAL LIABILITY INSURANCE.

Exhibit "A"

Erwin L. Gifford Legal Description

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rw

Gifford



Martin County Health Department

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT Bruce L Gifford SEPTIC TANK PERMIT NO 43-SS- 2232

LEGAL DESCRIPTION 85 N. SOWAS POINT ROAD, SOWAS POINT

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

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

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

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

 4 I certify that the top of the drainfield pipe elevation is _____ inches (circle one) above / below _____ BM / CR.

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

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

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

CERTIFIED BY: _____

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

Date _____ Job Number _____

(Signature)

_____ FOR MARTIN COUNTY HEALTH DEPARTMENT USE ONLY _____

Martin County Health Department Approval Signature

(Date)

Stubcert doc forms disk I Revised 12/17/98

DIAGRAM "A"

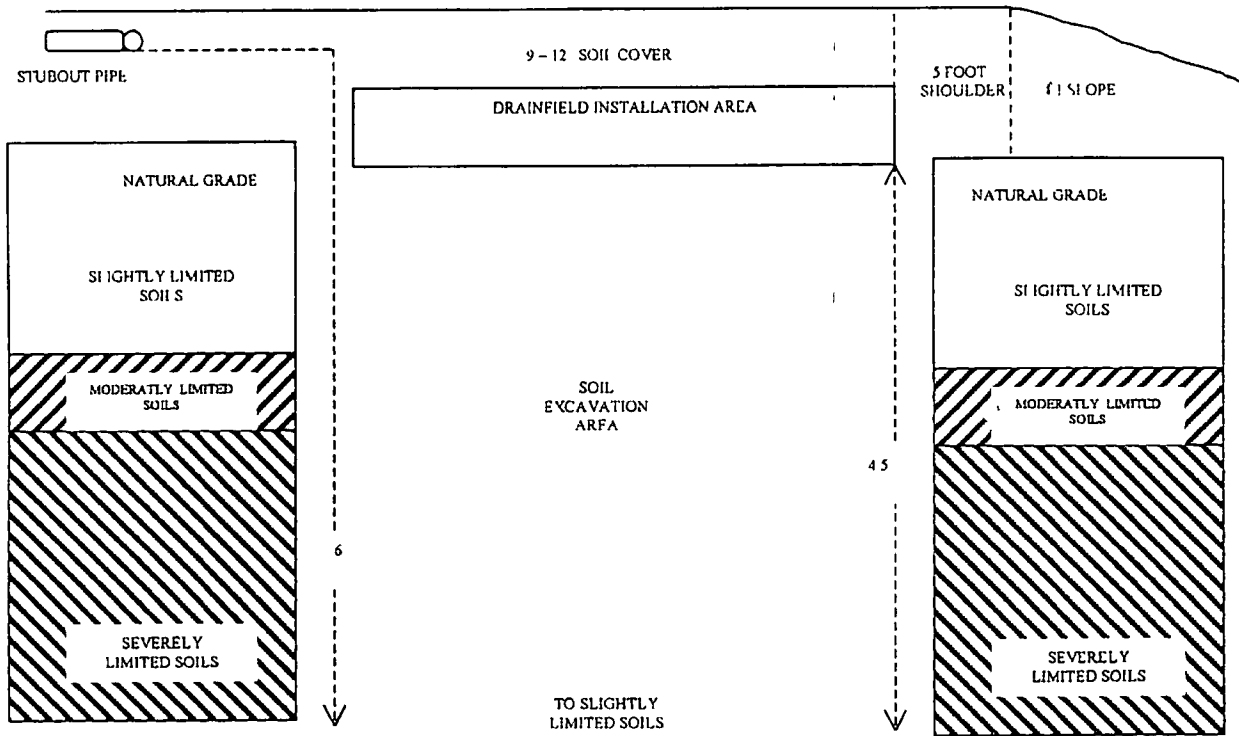
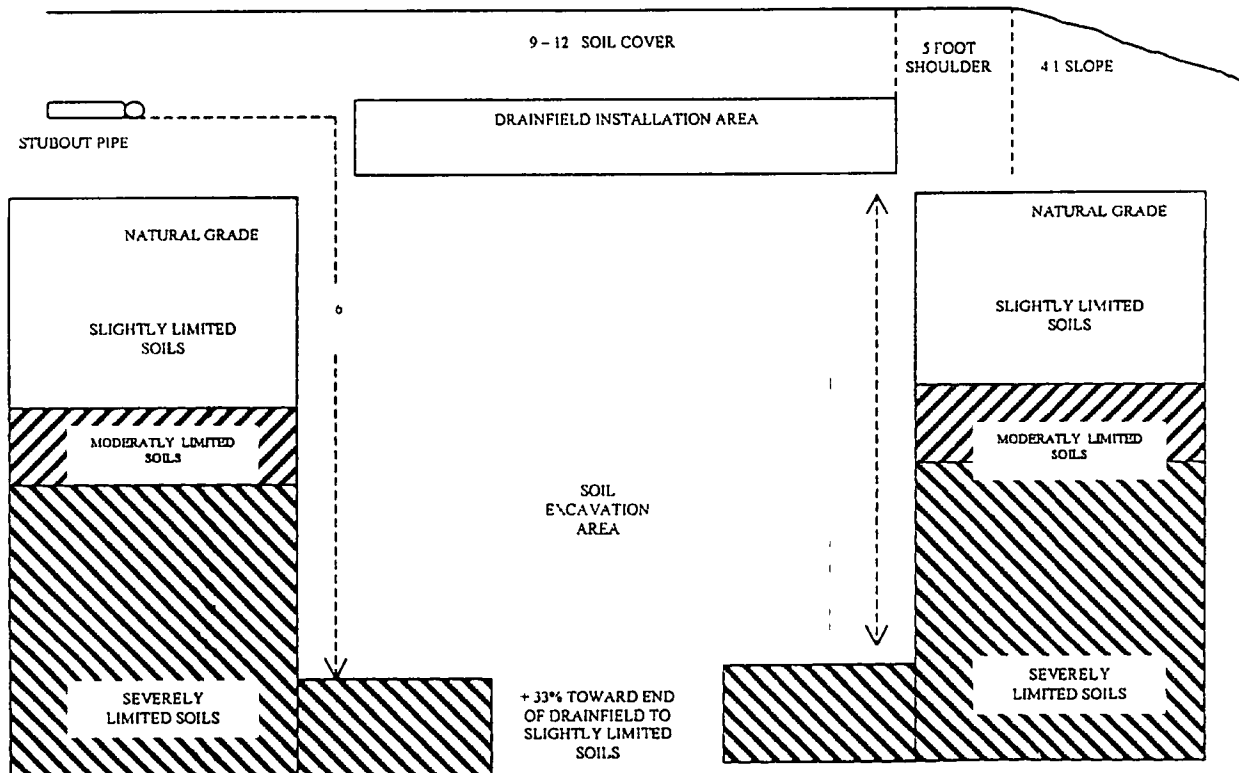


DIAGRAM "B"





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

CENTRAX # 43-SS-02232
OSTDSNBR 00-0244-N



CONSTRUCTION PERMIT FOR

[] New System [] Existing System [] Holding Tank [] Innovative Other
[] Repair [] Abandonment [] Temporary [] _____

APPLICANT GIFFORD, ERWIN L AGENT 95-0, PROPERTY OWNER

PROPERTY STREET ADDRESS 85 NW SEWALLS POINT Rd STUART FL 34994

LOT _____ BLOCK _____ SUBDIVISION SEWALL'S POINT
SEE LEGAL DESCRIPT [Section/Township/Range/Parcel No]
PROPERTY ID # 35374100000000242000 [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 [1900] Gallons SEPTIC TANK MULTI-CHAMBERED/IN SERIES []
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 [833] SQUARE FEET PRIMARY DRAINFIELD SYSTEM 4 (3'2 (9'4") TRENCHES ONLY
R [0] SQUARE FEET SYSTEM
A TYPE SYSTEM [] STANDARD [] FILLED [] MOUND [] _____
I CONFIGURATION [] TRENCH [] BED [] _____
N
F LOCATION TO BENCHMARK Boxcut On NE Corner of GH Porch
I ELEVATION OF PROPOSED SYSTEM SITE [43 0] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [73 0] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED [0 0] INCHES EXCAVATION REQUIRED [0 0] INCHES
OTHER REMARKS

The top of the stubout pipe to be a minimum elv of 41" below BM 12 82 The top of the drainfield pipe to be a minimum elv of 62" below BM 12 82 The top of the septic tank to be a minimum elv of 48" below BM 12 82 The drainfield aggregate must be at least 5 feet from the property line Install an approved outlet filter in the septic tank Do not exceed 18" of cover on top of the drainfield See the attached special conditions list

SPECIFICATIONS BY Doug McCoy TITLE ES II

APPROVED BY Cross, Ray TITLE Env Supervisor II Martin CHD

DATE ISSUED 5/1/00 EXPIRATION DATE 11/1/01

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

SEPTIC TANK SYSTEM SPECIAL CONDITIONS LIST

APPLICATION NAME: ERWIN GERARD PERMIT NO.: 4355-2232

SUBDIVISION: 85 N SOWALLS PT ROAD, SOWALL POINT

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

- 1. Drainfield must be maintained under grass; and protected from vehicular traffic (i.e., traffic barriers).
2. Operational test of dosing pump(s) and high water alarm (audible and visual) required prior to final construction approval.
3. Driveway / sidewalk elevation must be 9" higher than drainfield pipe elevation if they are within 5 feet of each-other.
4. Septic system must be 75' from surface water / wetlands / mean high water line.
5. Excavate one foot beyond drainfield area to a depth of
6. In addition to item #5, 33% of unsuitable soils at depths greater than must be removed to a depth of slightly limited soils.
7. If excavation is not required below the drainfield, the organic vegetation layer at the existing grade must be removed and slightly limited fill placed between the existing grade and the bottom of the drainfield.
8. Septic tank abandonment notices from the Septic Tank Contractor must be received by this office prior to final construction approval.
9. The attached well abandonment form must be completed by a certified well driller and submitted to this office prior to the initial building construction or system inspection.
10. The mound area must be sodded prior to the request for final grade inspection.
11. Any future ponds or surface water created onsite must be greater than 75' from septic system(s).
12. The available area for septic installation must to be evenly filled and leveled.
13. \$ re-inspection fee is required if the well is not installed at time of initial onsite sewage disposal system inspection.

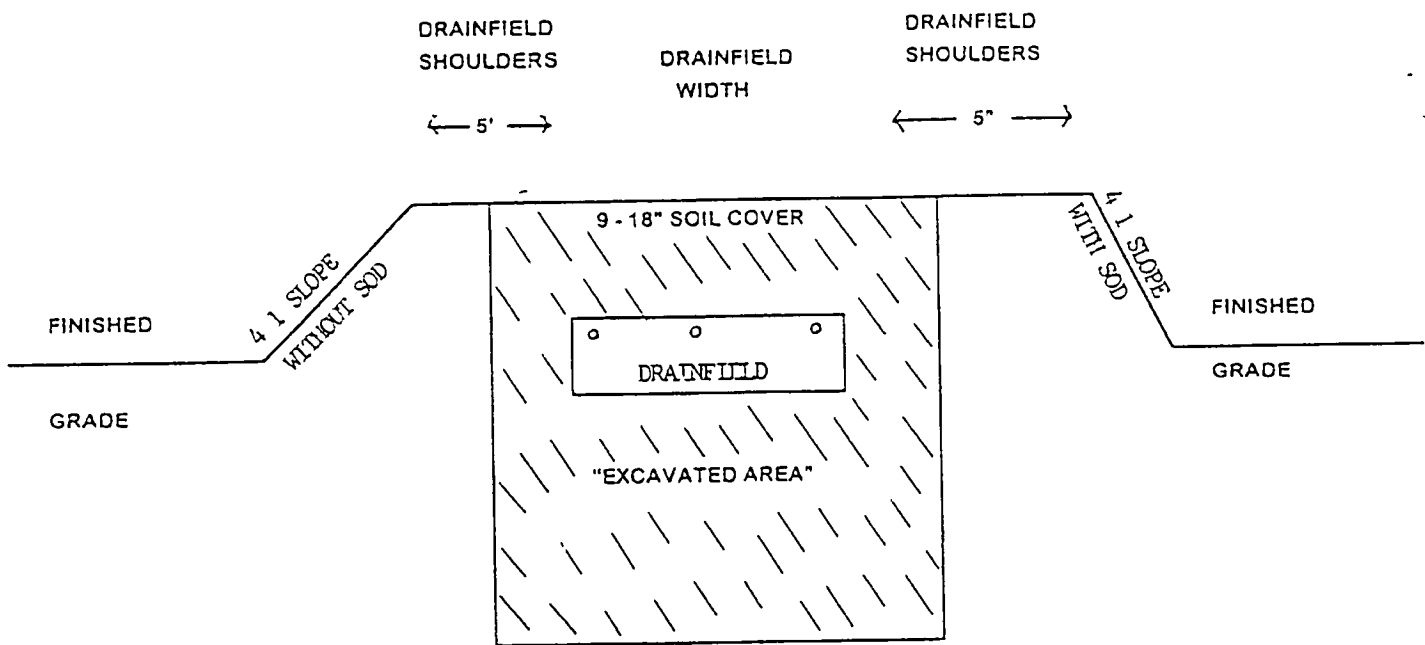
SEE REVERSE SIDE FOR ADDITIONAL REQUIREMENTS. Page 1 of 3

SPECIAL CONDITION REQUIREMENTS (Page 2 of 3) Revised 11/18/98

14. Septic system must be a minimum of 10 feet from drainage culverts or storm water drains and a 15 feet minimum from dry retention, dry detention or dry drainage ditches.
15. Occupational approval will not be given until all requirements for public water system/ food-service/ institutional/ septic system are met. _____
16. Septic tank/ dosing chamber/ grease trap must have (traffic lids with) manhole cover (s) per tank extending to the surface.
17. _____ to be dosed two / six times in a twenty-four hour period is required. A high water alarm that gives audible and visual signals is required. If two drainfields are used, each field must be connected to an individual pump and alternately dose.
18. Two pumps are required to alternately dose into two separate fields. Separate drainfields must be a minimum of 10 feet apart.
19. 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.
20. Irrigation lines must be separated from the drainfield by ten feet unless an approved backflow prevention device is properly installed.
21. Potable water lines, whether connected to an on-site well or to a utility meter, must be a minimum of ten feet from drainfields or sealed with a water proof sealant within a sleeve of similar pipe to a distance of ten feet from the nearest portion of the drainfield. In no case can the sleeved line be located within 24 inches of the drainfield or at an elevation lower than the bottom of the drainfield.
22. All new wells must be 25' from the building foundation and meet all other setback installation requirements.
23. Applicant is responsible for replacing excavated soils with a good grade of soil suitable for drainfield installation.
24. If the building stubout is placed more than 20ft. from septic tank or drainfield, the stubout elevation must be higher than the permitted elevation to achieve gravity flow. This must have prior approval from the health unit.
25. If fill is required, contact Martin County Building Division for requirements.
26. Inspection results will be posted on the building permit. A copy of the construction approval is available upon request.
27. A septic tank outlet filter is required on all septic tanks.
28. If any information on this permit changes, an amended application is required to be filed immediately.

- 29 Any alteration of the information or conditions of this permit found to be in non compliance with 64E-6, Florida Administrative Code, will be sufficient cause for revocation of this permit.
- 30 The engineer of record must certify that the installed system complies with the approved design and installation requirements
- 31 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)
- 32 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).

DRAINFIELD MOUND REQUIREMENTS



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

- 33. A well construction permit is required prior to well installation.
- 34 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 Doug Mcloy at (561) 221-4090
 cl special confr 11/18/98



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

CENTRAX # 43-SS-02232
 OSTDSNBR 00-0244-N

APPLICANT GIFFORD, ERWIN L
 AGENT 95-0 PROPERTY OWNER,
 LOT SEE LEGAL DESCRIPT BLOCK SEE LEGAL DESCRIPT SUBDIVISION SEWALL'S POINT ID# 35374100000000242000

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 4.65 ACRES
 TOTAL ESTIMATED SEWAGE FLOW 1,000 GALLONS PER DAY [64E-6, TABLE 1]
 AUTHORIZED SEWAGE FLOW 11,625 GALLONS PER DAY [1500GPD/ACRE OR 2500GPD/ACRE]
 UNOBSTRUCTED AREA AVAILABLE 6487 SQFT UNOBSTRUCTED AREA REQUIRED 1666 SQFT

BENCHMARK/REFERENCE POINT LOCATION Roll cut on Gulf Breeze Road 1282 NGVD
 ELEVATION OF PROPOSED SYSTEM SITE IS 47 [Inches] [Below] BENCHMARK/REFERENCE POINT

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES
 SURFACE WATER 220 FT DITCHES/SWALES None FT NORMALLY WET? YES NO
 WELLS PUBLIC None FT LIMITED USE None FT PRIVATE 1/2 FT NON-POTABLE 50 FT
 BUILDING FOUNDATIONS 50 FT PROPERTY LINES 43 FT POTABLE WATER LINES 25 FT

SITE SUBJECT TO FREQUENT FLOODING YES NO 10 YEAR FLOODING? YES NO
 10 YEAR FLOOD ELEVATION FOR SITE NA FT NGVD SITE ELEVATION 9.3 FT NGVD

SOIL PROFILE INFORMATION SITE 1		
Munsell #/Color	Texture	Depth
10YR 5/1 GRAY	SAND	0 to 12
10YR 7/1 LIGHT GRAY	SAND	13 to 35
10YR 5/8 YEL BROWN	SAND	36 to 72
		to
		to
		to
		to
		to
		to
NO WATER		to
USDA SOIL SERIES <u>PAOLA SAND</u>		

SOIL PROFILE INFORMATION SITE 2		
Munsell #/Color	Texture	Depth
10YR 5/1 DK GRAY	SAND	0 to 10
10YR 7/1 LT GRAY	SAND	11 to 36
10YR 5/8 YEL BROWN	SAND	37 to 72
		to
		to
		to
		to
		to
		to
NO WATER		to
USDA SOIL SERIES <u>PAOLA SAND</u>		

OBSERVED WATER TABLE NOT FOUND INCHES [BELOW] EXISTING GRADE TYPE [APPARENT]
 ESTIMATED WET SEASON WATER TABLE ELEVATION 54 INCHES [Below] EXISTING GRADE
 HIGH WATER TABLE VEGETATION YES NO MOTTLING YES NO DEPTH NA INCHES
 SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING 12/ed sand DEPTH OF EXCAVATION NA INCHES
 DRAINFIELD CONFIGURATION TRENCH BED [] OTHER (SPECIFY)
 REMARKS/ADDITIONAL CRITERIA

SITE EVALUATED BY Robert Wood DATE 3/21/00

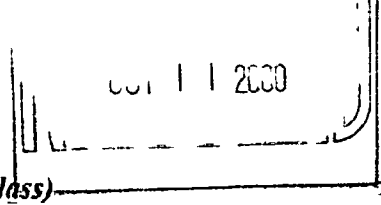


METROPOLITAN DADE COUNTY FLORIDA
METRO DADE FLAGLER BUILDING

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Vinyl Tech/Progressive Glass Technology
1070 Technology Drive
Nokomis FL 34275



Your application for Product Approval of *Series 4000 Aluminum Single Hung Window (DSB annealed glass)* under Chapter 8 of the Metropolitan Miami-Dade County Code governing the use of Alternate Materials and Types of Construction, and completely described in the plans, specifications and calculations as submitted by *Applicant, along with drawings prepared by Mr. Robert L. Clark, P.E., and test reports prepared by Fenestration Testing Laboratory, Inc.*

has been recommended for acceptance by the Building Code Compliance office to be used in Miami-Dade County, Florida under the conditions set forth herein This approval contains 3 pages

This approval shall not be valid after the expiration date stated below The Office of Building Code Compliance reserves the right to secure this product or material at anytime from a jobsite or manufacturer's plant for quality control testing If this product or material fails to perform in the approved manner, the Building Code Compliance Office may revoke, modify, or suspend the use of such product or material immediately The applicant shall re-evaluate this product or material should any ammendments to the South Florida Building Code be enacted affecting this product or material The Building Code Compliance Office reserves the the right to revoke this approval, if it is determined by the Building Code Compliance Office that this product or material fails to meet the requirements of the South Florida Building Code The expense of such testing will be incurred by the manufacturer.

Acceptance No.: 98-0218.01

Expires: 08/20/2001

Raul Rodriguez
Product Control Supervisor

THIS IS THE COVERSHEET, SEE ADDITIONAL PAGES FOR SPECIFIC AND GENERAL CONDITIONS

BUILDING CODE COMMITTEE

This application for Product Approval has been reviewed by the Metropolitan Dade County Building Code Compliance Department and approved by the Building Code Committee to be used in Dade County, Florida under the conditions set forth above.

Charles Danger, P.E.
Director
Building Code Compliance Dept
Metropolitan Dade County

Approved: 08/20/1998



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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

DAB Door Company, Inc
12195 NW 98th Avenue
Hialeah Gardens FL 33016

CONTRACTOR LICENSING SECTION
(305) 375-2527 FAX (305) 375 2558

CONTRACTOR ENFORCEMENT SECTION
(305) 375 2966 FAX (305) 375 2908

PRODUCT CONTROL DIVISION
(305) 375-2902 FAX (305) 372 6339

Your application for Product Approval of
Sectional Residential Garage Door

under Chapter 8 of the Metropolitan Dade County Code governing the use of Alternate Materials and Types of Construction, and completely described in the plans, specifications and calculations as submitted by applicant, along with Dab Door Co. Inc. drawing No 98-05, sheet 1 to 3 of 3, dated 02/23/98, revised on 08/24/98, signed and sealed by H. Farooq PE

has been recommended for acceptance by the Building Code Compliance office to be used in Dade County, Florida under the specific conditions set forth on pages 2 et seq. and the Standard Conditions on page 3.

This approval shall not be valid after the expiration date stated below. The Office of Code Compliance reserves the right to secure this product or material at anytime from a jobsite or manufacturer's plant for quality control testing. If this product or material fails to perform in the approved manner, the Code Compliance Office may revoke, modify, or suspend the use of such product or material immediately. The applicant shall re-evaluate this product or material should any ammendments to the South Florida Building Code be enacted affecting this product or material. The Building Code Compliance Office reserves the right to revoke this approval, if it is determined by the Building Code Compliance Office that this product or material fails to meet the requirements of the South Florida Building Code. The expense of such testing will be incurred by the manufacturer.

Acceptance No.: 98-0901.09 (Revises No.: 98-0409.04)

Expires: 08/14/01

Raul Rodriguez
Product Control Supervisor

THIS IS THE COVERSHEET. SEE ADDITIONAL PAGES FOR SPECIFIC AND GENERAL CONDITIONS

BUILDING CODE COMMITTEE

This application for Product Approval has been reviewed by the Metropolitan Dade County Building Code Compliance Department and approved by the Building Code Committee to be used in Dade County, Florida under the conditions set forth above.

Charles Danger
Director
Building Code Compliance Dept
Metropolitan Dade County

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3-1-, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
4823	ERWIN GIFFORD 85 N. Sewall Pk Rd (Indialuce)	Porch slab	PASSED BG	Termite spray By Patrick 2-29-00
4527	SEELY 37 N.E. Lofting way Plantation	2 nd floor slab * Columns & tie beams	Partial BG	
4840	LUANE SCHUCKMAN 4 FIELD WAY DR (Indialuce)	SHEATHING	Passed BG	
41073	FOGUA CONST 110 HENRY SEWALL way	INSULATION * WIRE LATH	Partial Passed	walls only BG BG
4849	Obersheimer 75 N S P Rd.	roof sheathing	Passed BG	late AM
4842	Hansen 32 N S P Rd.	pool enc final	Passed BG	
4800	Hammock 25 Rio Vista (Patrick) 263-0116	tinted + metal	Passed BG	

OTHER 1. T/R PERMIT APPL - VILLA, 24 S. SEWALL'S POINT RD.
2 " " " - MOUSSOU; 10 PALMETTO DR.

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3-29, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4702	Perry	final roof	Passed	
✓ ①	18 N. Ridgeview owner/contractor		BG.	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4862	O'Brien	metal	Passed	
✓ ⑤	36 E. High Point Wilson	tin-tag	BG.	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
N 4650	Swiss Am	electrical	X	RESCHEDULE AFTER
✓ ⑦	4 Banyan Swiss Am	final DELIVER FORM TO CONTR	*	SUBMITAL OF TEMP HOOK-UP AGMT. (cc. HTRAKUSI)
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4648	Brush (OFF SIMARA)	final	Passed	
✓ ⑥	2 Mindoro Rolladen	shutters	BG	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
4723	Koch @ WILCO RUV	roof shutters	Passed	
✓ ⑧	71 N River Rd W. H. BROWN	" "	BG	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
			Passed	
✓ ⑨	85 W. S. Pt. Rd.	to ceiling Rough	BG	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
4587	Guercid	C.O.	Reject	① Hookup Ht. SWK + LAUS. ② Clean out FOR TUB.
✓ ④	104 Abbie Court Strathmore		BG	③ I.D. FOR DOORS ④ Specs. FOR BBQ Fan. ⑤ No shutters Open to roof.

OTHER EBA 1. TRAPIC. 143 S. RIVER RD., KIPUNGER WASHINGTON EDITORS, INC. ✓ OK (PH)

" 2. " " 20 CASTLE HILL WAY, LORCA/OSKOYNE (KUYOUCOAST) ✓ OK (PH)

*⑦ Add smoke detector outside master Bed Room left form with permit.

INSPECTOR (Name/Signature) EBA S. IN PROGRESS FILE WSP "BAY TREE" 146 S. SEWALL'S DRIV OK S

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4-5-, 2000; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
4786	Subin	pool	Passed	
①	8 Palm Court (Knowles) ←	plumbing OLYMPIC POOLS	BG.	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
4878	GIPFORD	INSULATION	Passed	
④	85 D. SEWALL'S PT RD CAMPORA CONST.		BG.	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS

OTHER _____

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7-31-00, 2000; Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4828	GIFFORD	ADDN/ALI - FINAL	Spot	VERIFY I/P-PROGRESS (ASP)
⑧	85 N SEWALL'S POINT RD. DON CAMPORA CONST.		Check By	WINDOW PROD. APPE REQ. Will BRING window specs to Ed at office
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS

OTHER _____

INSPECTOR (Name/Signature) _____

ROBERT M WIENKE
Mayor

MARC S TEPLITZ
Vice Mayor

DAWSON C. GLOVER, III
Commissioner

THOMAS P. BAUSCH
Commissioner

E DANIEL MORRIS
Commissioner

TOWN OF SEWALL'S POINT



JOSEPH C. DORSKY
Town Manager

JOAN H. BARROW
Town Clerk

LARRY E. McCarthy
Chief of Police

EDWIN B. ARNOLD
Building Official

JOSE TORRES, JR.
Maintenance

COPY

CERTIFICATE OF OCCUPANCY

ALTERATIONS/LAWYER ADD'N.
 Single Family Residence Other _____

OWNER ERWIN GIFFORD ; PROPERTY ADDRESS: 85 N SEWALL'S POINT RD

LEGAL DESCRIPTION: LOT _____ BLOCK _____ SUBDIVISION 35-37-41-000-000-00242-0000

GENERAL CONTRACTOR: DON CAMPORA CONST. CO. ; LIC/CERT No. CG-C022955

ADDRESS 6435 S.E. WILD OLIVE LANE, STUART, FL ; TEL 783-4761 ; FAX _____

ARCHITECT OR ENGINEER: MARK CORSON ; LIC/REG No. 0012904

ADDRESS _____ STUART, FL ; TEL 223-8227 ; FAX _____

PERMIT NO 4828 ; DATE OF ISSUE 2/15/00 , RENEWAL PERMIT NO N/A ; DATE OF ISSUE _____

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

Entered at Sewall's Point, Florida, this 15th day of DECEMBER, 2000
CC: CHIEF OF POLICE
TOWN CLERK

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

BLDG-FILE

PREDICTABILITY + ACCOUNTABILITY = COMPLIANCE



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

4828

LANAI

850 Sewall's Pt Rd
POV 5380

ROBERT M. WIENKE
Mayor

MARC S. TEPLITZ
Vice Mayor

DAWSON C. GLOVER, III
Commissioner

THOMAS P. BAUSCH
Commissioner

E. DANIEL MORRIS
Commissioner

TOWN OF SEWALL'S POINT

COPY



JOSEPH C. DORSKY
Town Manager

JOAN H. BARROW
Town Clerk

LARRY McCARTY
Chief of Police

EDWIN B. ARNOLD
Building Official

JOSE TORRES, JR.
Maintenance

NOTICE OF RESIDENTIAL POOL SAFETY REQUIREMENTS

To All Pool/Spa Contractors
From Edwin B. Arnold, Building Official *EA*
Subj Preston de Ibern/McKenzie Merriam
Residential Swimming Pool Safety Act
Date Sept 1, 2000

Section 515 27 of the subject law provides in part as follows

(1) In order to pass final inspection and receive a certificate of completion, a residential swimming pool must meet at least one of the following requirements relating to pool safety features:

- (a) The pool must be isolated from access to a home by an enclosure that meets the pool barrier requirements of s. 515.29;**
- (b) The pool must be equipped with an approved safety pool cover;**
- (c) All doors and windows providing direct access from the home to the pool must be equipped with an exit alarm that has a minimum sound pressure rating of 85 dB A at 10 feet; or**
- (d) All doors and windows providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism placed no lower than 54 inches from the floor.**

The effective date of this statute is October 1, 2000 All pools completed on or after that date will be required to fully comply with the provisions of the statute The statute also mandates specific information which must be furnished to buyers on entering into an agreement to build a residential swimming pool Evidence of compliance with these requirements will be required as part of the building permit application submittal Please contact me if you have any questions

***SUBMIT DETAILS OF PROPOSED METHOD OF COMPLIANCE FOR REVIEW PRIOR TO INSTALLATION.**



One South Sewall's Point Road, Sewall's Point, Florida 34996
Town Hall (561) 287-2455 • Fax (561) 220-4765 • E-Mail clerk@sewallspoint.org
Police Department (561) 781-3378 • Fax (561) 288-7669 • E-Mail police@sewallspoint.org

COPY

PERMIT #

Residential Swimming Pools, Spa and Hot Tub Safety Act

Notice of Requirements

I (We) acknowledge that a new swimming pools, spa or hot tub will be constructed or installed at

85 N. Seepell's Point Rd.

(Please Print Street Address)

and hereby affirm that one of the following methods will be used to meet the requirements of Chapter 515, Florida Statutes.

(Please initial the method(s) to be used for your pool)

A

The pool will be isolated from access to the home by an enclosure that meets the pool barrier requirements of Florida Statute 515 29;

The pool will be equipped with an approved safety pool cover that complies with ASTM F1346-91 (Standard Performance Specifications for Safety Covers for Swimming Pools, Spas, and Hot Tubs);

All doors and windows providing direct access from the home to the pool will be equipped with an exit alarm that has a minimum sound pressure rating of 85 decibels at 10 feet,

All doors providing direct access from the home to the pool will be equipped with self-latching devices with release mechanisms placed no lower than 54" above the floor or deck;

I understand that not having one of the above installed at the time of final inspection, or when the pool is completed for contract purposes, will constitute a violation of Chapter 515, F.S. and will be considered as committing a misdemeanor of the second degree, punishable by fines up to \$500 and/or up to 60 days in jail as established in Chapter 775, F.S

Art Allen

CONTRACTOR'S SIGNATURE & DATE

ART ALLEN

CONTRACTOR'S NAME (PLEASE PRINT)

CPC 057200

Erwin J. Gifford 4/25/01

OWNER'S SIGNATURE & DATE

ERWIN GIFFORD

OWNER'S NAME (PLEASE PRINT)

MAY 21, 2001

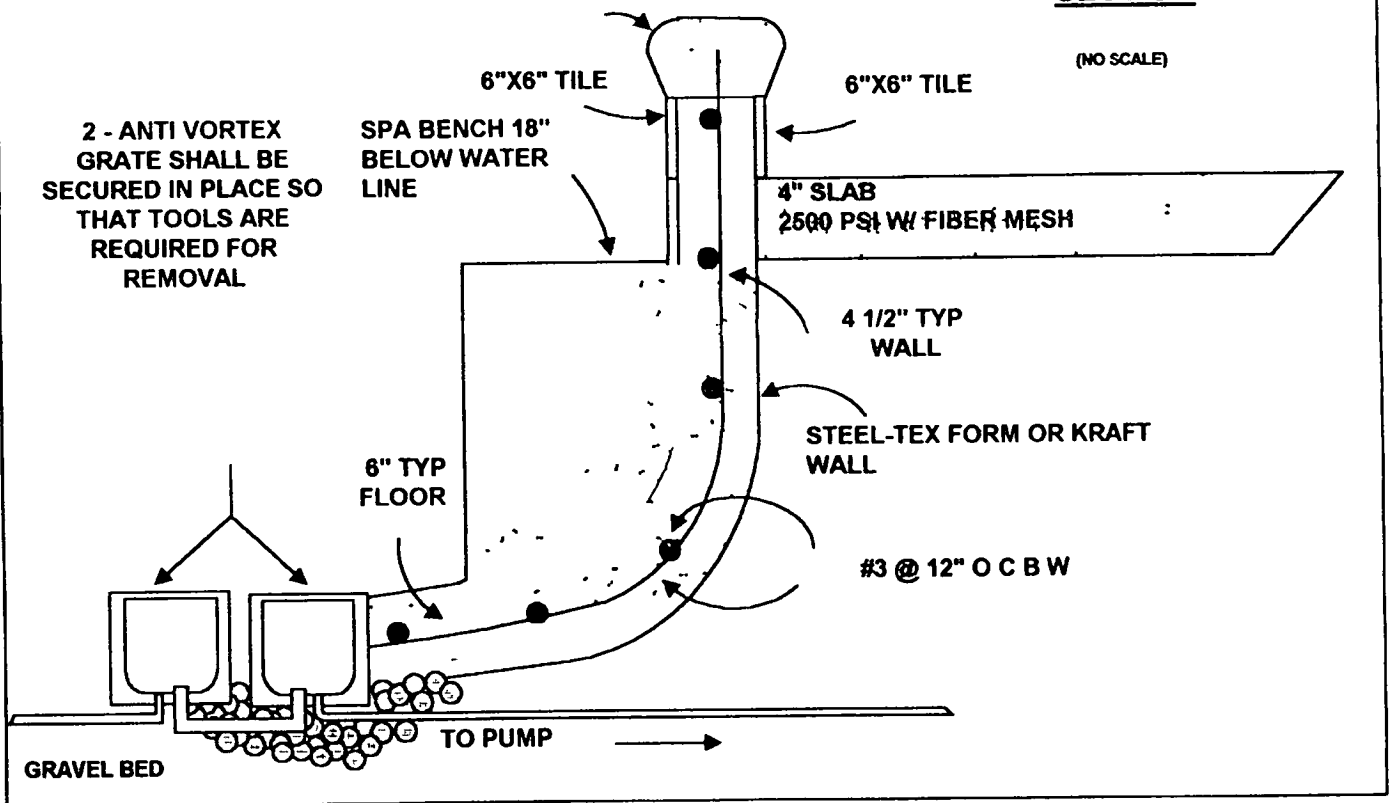


SPA DETAIL

OVERPOUR
(OR CAP TILE, WHERE
APPLICABLE)

**SPA WALL
SECTION**

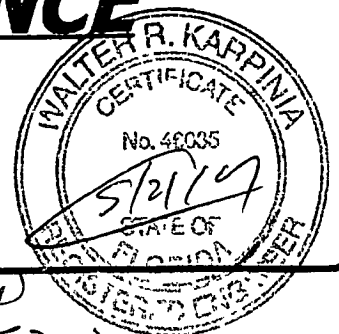
(NO SCALE)



SPA CROSS SECTION

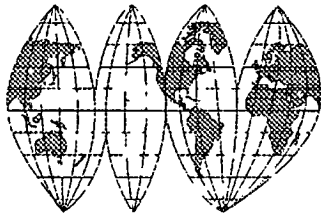
THE GIFFORD RESIDENCE

ALL SHEETS STRUCTURE ONLY
WALTER KARPINIA PE46635
11406 N 172 PL, JUP, FL 33478
(561) 743-1400



85 N Seubell's Pl RD
PO 5380

Mail To Post Office Box 1500, Stuart, FL 34995-1500
 2440 S E Federal Highway - Ste 700, Stuart, FL 34994
 Telephone [561] 288-4880 TeleFax [561] 288-0128



REPORT OF TOPOGRAPHIC SURVEY
 for Erwin L Gifford and Sabrina R Gifford
 January 12, 2001

Map of Topographic Survey

See Map of Topographic Survey, lands described in O R Book 1096, Page 1072, dated November 2, 1994 This survey map and report is not valid without the signature and original raised seal of the Florida licensed Surveyor and Mapper The signature and seal can be found at the end of this report The map and report are not full and complete without the other

Legal Description

All that part of the North 300 33 feet of the South 424 33 feet of Government Lot 2, Section 35, Township 37 South, Range 41 East, which lies west of the Westerly right of way line of Sewall's Point Road, less and except a parcel or tract of land more particularly described as follows

Beginning at a point on the South line of the North 300 33 feet of the South 424 33 feet of said Government Lot 2, said point being in the centerline of Sewall's Point Road, (1) thence proceed South 89°31'00" West along the South line of the North 300 33 feet of the South 424 33 feet of Government Lot 2, for a distance of 175 feet to a concrete monument, (2) thence proceed North 15°26'00" West for a distance of 139 72 feet to a concrete monument, (3) thence proceed North 89°31'00" East along a line parallel to and 135 feet North of the line described in call No 1 for a distance of 131 25 feet to a point in the centerline of Sewall's Point Road for a distance of 156 80 feet to the **Point or Place of Beginning**

Accuracy

The expected use of the land, as classified in the Minimum Technical Standards (61G17-6FAC), is "Suburban" The minimum relative distance accuracy for this type of survey is 1 foot in 7,500 feet The accuracy obtained by measurement with an electronic total station and calculation of a closed geometric figure was found to exceed this requirement

Data Sources

Recorded adjoiner plats were obtained from County repositories Prior Surveys were prepared by Aslan, Inc

Measurement Methods

All equipment was tested and calibrated Two sets of traverse angles were turned and averaged The traverse indirectly connected the most east and west property corners and features were found from this traverse by side ties using a redundancy of measurements



General

- Bearings shown hereon are relative to the South line of Government Lot 2, bearing being S89°31'00"W
- Elevations shown hereon are in feet and decimal parts thereof and are relative to the National Geodetic Vertical Datum of 1929 and are based on Benchmark Sewall's Point-2 being a 2 inch brass disk located about 0 8 miles North of the intersection of State Highway A-1-A (East Ocean Blvd) and Sewall's Point Road, about 90 feet east of the centerline of Sewall's Point Road and about the Southwest corner of a concrete seawall, set near the southwest corner of a 16 inch concrete seawall that parallels a small inlet leading to the Indian River, elevation 4 511 feet

Legend

•	A	CENTRAL ANGLE	FH	FIRE HYDRANT	Pk	PARKER KALONIAL
	A	ARC LENGTH	F.P.L	FLORIDA POWER & LIGHT	PkAD	PARKER KALONIAL & DISC
	AC	ACRES	FT	FEET	PL	PROPERTY LINE
	AC	AIR CONDITIONING	GO/PT	GOVERNMENT	PL S	PROFESSIONAL LAND SURVEYOR
	A.E	ACCESS EASEMENT	HSE	HOUSE	P.O.B	POINT OF BEGINNING
	A.K.A	ALSO KNOWN AS	ISE	INGRESS & EGRESS EASEMENT	P.O.C	POINT OF COMMENCEMENT
	ASPH	ASPHALT	INV	RIVER	PP	POWER POLE
	BL	BASELINE	R	RAILROAD	PERM	PERMANENT REFERENCE MONUMENT
	BLOG	BUILDING	R&C	RAILROAD C&P	PROP	PROPOSED
	B.O.C	BACK OF CURBS	L	APL LENGTH	P.S.M	PROFESSIONAL SURVEYOR & MAPPER
	B.O.W	BACK OF WALK	L.A.E	LIMITED ACCESS EASEMENT	PT	POINT OF TANGENCY
	BR	BEARING	L.E	LANDSCAPE EASEMENT	P.L.U.D	PLANNED UNIT DEVELOPMENT
	BM	BENCHMARK	LFE	LOWEST FLOOR ELEVATION	P.V.M.T	PAVEMENT
	C	CALCULATED MEASUREMENT	LP	LIGHT POLE	R	RADIUS
	CATV	CABLE ANTENNA TV	M	FIELD MEASURE DATUM	RES	RESIDENCE
	CB	CATCH BASIN	M.C.O	MARTIN COUNTY	RGE	RANGE
	CB	CONCRETE BLOCK & STUCCO	M.H.M.L	MEAN HIGH WATER LINE	R.M.E	RECIPROCAL MAINTENANCE EASEMENT
	C.C.C.L	COASTAL CONSTRUCTION CONTROL LINE	MH	MARSH	R.W.	RIGHT OF WAY
	CF	CONCRETE CURB	MPL	METAL PEDESTRIAN LIGHT	SECT	SECTION
	CH	CHORD	M.T.C.D	MISCELLANEOUS TRAFFIC CONTROL DEVICE	SS	SANITARY SEWER
	CL	CENTERLINE	INVD	NATIONAL GEODETIC VERTICAL DATUM	S.B.T	SOUTHERN BELL TELEPHONE BOX
	CM	CONCRETE MONUMENT	N.V.C	NOT TO SCALE	S.D	SUBDIVISION
	CONC	CONCRETE	N.T.S	NOT TO SCALE	S.F	SQUARE FEET
	CPP	CONCRETE POWER POLE	O.A	OVERALL	S.U.L	SAFE UP/LANDLINE
	CTL	CONCRETE TRAFFIC LIGHT	O.D	OUTSIDE DIAMETER	T	TANGENT
	D.E	DRIVEWAY EASEMENT	OH	OVERHEAD	TOB	TOP OF BANK
	D	DEED DATUM	OPPL	OVERHEAD POWER LINE	TWP	TOWNSHIP
	DBH	DIAMETER BREST HEIGHT	ORB	OFFICIAL RECORD BOOK	TYP	TYPICAL
	DH	DRILL HOLE	P.A.T.D	PLAT DATUM	TSP	TRAFFIC SIGNAL LIGHT
	E.H.H	ELECTRIC HAND HOLE	PB	PLAT BOOK	UC	UNDER CONSTRUCTION
	EL	ELEVATION	P.B.C	PALM BEACH COUNTY	UE	UTILITY EASEMENT
	EP	EDGE OF PAVEMENT	PC	POINT OF CURVATURE	U.H.M	UTILITY HAND HOLE
	EW	EDGE OF WATER	P.C.P	PERMANENT CONTROL POINT	U.R	UNRECOVERED
	FFE	FINISH FLOOR ELEVATION	PG	PAGE	W.C	WITNESS CORNER
	FO	FOUND	PI	POINT OF INTERSECTION	W.C.V	WATER CATE VALVE

Report of Topographic Survey
Erwin L. Gifford and Sabrina R. Gifford
Page 2

WME
W.M.E

WATER MANAGEMENT EASEMENT
WATER MGMT MAINTENANCE ESMT

WMT
WPP

WATER MANAGEMENT TRAPT
WOODEN POWER POLE

WN
WV

WATER METER
WATER VALVE

Limitations

- This Survey was last surveyed in the field on January 12, 2001 and shall not be relied upon for field accuracy or sufficiency subsequent to that date
- No visible aboveground evidences of physical use were noted by this survey, unless depicted or stated herein
- No underground improvements, utilities, foundations, footings, or septic tanks were located by this survey
- The Mean High Water Survey depicted hereon complies with Chapter 177, Part II, Florida Statutes and is recorded in the public repository of the Florida Department of Environmental Protection, Bureau of Surveying and Mapping as Mean High Water Survey File Number 2439
- The MHWL Elevation of 0 88' NGVD 1929 was obtained from Doug Thomson, P S M , DEP Bureau of Survey and Mapping, by fax, on August 24, 2000
- The parcel as shown hereon has not been surveyed for determination of jurisdictional wetlands as defined by any governmental entity Any acreage shown hereon is calculated without regard to any such jurisdiction
- This map may have been photographically or digitally reduced or enlarged with or without the knowledge of the issuing agent It is incumbent upon the end user to determine the scale indicated hereon as reliable for the intended uses Certification is made only to the original scale so indicated
- This Survey shall not be copied, transferred or assigned without the specific written permission of Aslan, Inc

Apparent Physical Use

A single-family residence

Easements

The site is presently served by power, telephone and CATV from the North, East and South No easements were provided for mapping other than shown

Prepared for

Erwin L. Gifford and Sabrina R. Gifford
85 North Sewall's Point Road
Sewall's Point, FL 34996

Certified to

This survey is prepared for the sole and exclusive benefit of Erwin L. Gifford, Sabrina R. Gifford and The Town of Sewall's Point and shall not be relied upon by any other entity or individual whomsoever

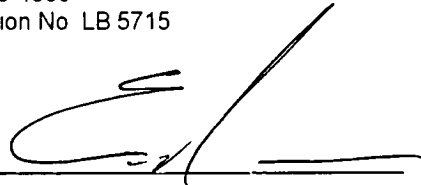
Surveyor and Mapper in Responsible Charge

Eric B. Holly, P S M
Registration No. LS 3336

ASLAN, INC.

P O Box 1500, Stuart, FL 34995-1500
2440 S E Federal Highway, Suite 700, Stuart, Florida 34994
(561) 288-4880
Registration No. LB 5715

Signed



Issuance Date May 1, 2001

5143

SFR

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 10/31/00

BUILDING PERMIT NO. 5143

Building to be erected for ERWIN & SABRINA GIFFORD

Type of Permit BLDG. - S.F.R.

Applied for by ~~DON CAMMORA CONSTRUCTION CO., INC.~~

(Contractor)

Building Fee \$11,520.00

Subdivision SCOTT J. HOLMES BLDG.

Lot _____ Block _____

Radon Fee 68.11

Address 85 N. SEWALL'S POINT ROAD

Impact Fee N/A

Type of structure S.F.R.

A/C Fee 120.00

Parcel Control Number

35-37-41-000-000-00242-00000

Electrical Fee 120.00

Plumbing Fee 120.00

Amount Paid \$12,068.11 Check # 486 Cash _____

Roofing Fee 120.00

Total Construction Cost \$ 1,200,000.00

Other Fees (PLAN REV.) 1,152.00

TOTAL Fees \$13,220.11

Signed [Signature]

Applicant

Signed [Signature]

Town Building Inspector [Signature]

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

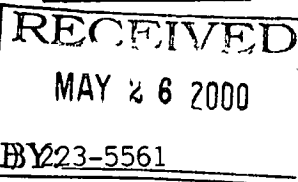
This permit must be visible from the street, accessible to the inspector.
FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT,
NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.
DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!

Bldg. Pmt# _____

Town of Sewall's Point

Date May 26, 2000

BUILDING PERMIT APPLICATION



Owner's Name: Mr. Erwin & Mrs. Sabrina Gifford Phone No. (561) 223-5561
Owner's Present Address: 85 North Sewall's Point Road Sewall's Pnt, Fl 34996
Fee Simple Titleholder's Name & Address if other than owner: _____

Location of Job Site: 85 North Sewall's Point Road
TYPE OF WORK TO BE DONE: 2-Story Single Family Residence

CONTRACTOR INFORMATION

Contractor/Company Name: Don Campora Construction Co., Inc Phone No. 283-4761
COMPLETE MAILING ADDRESS: 6435 SE Wild Olive Lane Stuart, Fl 34997
State Registration AC #5576856 State License CGC-022955
Legal Description of Property see attachment from "Aslan, Inc." Land information
Parcel Number 35-37-41-000-000-00242-00000

ARCHITECT/ENGINEER INFORMATION

Architect FOSTER/FREIJO MEL ARCHITECTURE INC Phone No. 2860100
Address 51 S.W. Flagler Ave, Stuart Fla 34996
Engineer John Olson P.E. Phone No. 2878757
Address 1336 S.W. Jasmine Trace, Palm City Fla
Area Square Footage: Living Area 7393 Garage Area 919 Carport _____
Accessory Bldg. _____ Covered ^{porch} 1030 Scr. Porch 133 Wood Deck _____
Type Sewage: _____ Septic Tank Permit # from Health Dept. 43-SS-02232
NEW electrical SERVICE SIZE 400 AMPS

FLOOD HAZARD INFORMATION

flood zone "C" minimum Base Flood Elevation (BFE) N/A NGVD
proposed finish floor elevation 16.0' NGVD (minimum 1 foot above BFE)
Cost of construction or Improvement \$ 1,200,00.00
Fair Market Value (FMV) prior to improvement _____
Substantial Improvement 50% of FMV yes _____ No _____
Method of determining FMV _____

SUBCONTRACTOR INFORMATION: (Notify this office if subcontractor's change.)

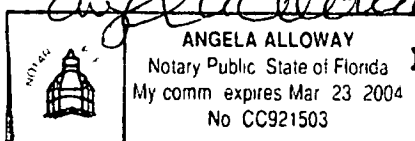
Electrical Cook Electric State License ER-0008060
Mechanical Nisa Air-Conditioning State License# CACO-41199
Plumbing Tropic Plumbing State License# CFC-032565
Roofing Stuart Roofing State License# CCC-024411

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

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

OWNER/ CONTRACTOR MUST SIGN APPLICATION

OWNER or AGENT SIGNATURE Mr. Erwin L. Gifford *Erwin Gifford*
Sworn to and subscribed before me this 25 day of May, 1998 by Erwin Gifford who is personally known to me or has produced or has produced _____ and who did (did not) take an oath.
CONTRACTOR SIGNATURE Douglas L. Campora *Douglas L. Campora*
Sworn to and subscribed before me this 25 day of May, 1998 by Douglas L. Campora who is personally known to me or has produced _____ and who did (did not) take an oath.



Angela Alloway

* PLEASE SEE ATTACHED SEALED LANDSCAPE PLAN DONE BY: MR. DAN SUGG

TREE REMOVAL (Attach sealed survey)

No. of trees to be removed _____ No. to be retained _____ No. to be planted _____

Specimen tree removed _____ Fee _____ Authorized/Date _____

DEVELOPMENT ORDER # _____

1. ALL APPLICATIONS REQUIRE:

- ✓ A. Property Appraiser's Parcel Number.
- ✓ B. A Legal Description of your property. (Can be found on your deed survey or Tax Bill.)
- ✓ C. Contractor's name, address, phone number & license numbers.
- D. Name all sub-contractors (properly licensed).
- ✓ E. Current Survey
- ✓ F. Take completed application to the Permits and Inspections Office for approval. Provide construction details and a plot plan(s) showing setbacks, yard coverage, parking and position of all buildings on the property, stormwater retention plan, etc. Compliance with subdivision regulations can also be determined at this time.
- ✓ 3. Take the application showing Zoning approval (complete with plans & plot plan) to the Health Department for septic tank. Attach the pink copy to the building application.
- ✓ 4. Return all forms to the Permits and Inspection Office. All planned construction requires: two (2) sets of plans, drawn to scale with engineer's or architect's seal and the following items:

- 1. ✓ Floor Plan
- 2. ✓ Foundation Details
- 3. ✓ Elevation Views - Elevation Certificate due after slab inspection.
- 4. ✓ A Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
- 5. Truss layout DUE FROM EAST COAST TRUSS FIRST WEEK OF JUNE, 2000
- 6. ✓ Vertical Wall Sections (one detail for each wall that is different)
- 7. ✓ Fireplace drawing: If prefabricated submit manufacturers data.

ADDITIONAL Required Documents are:

- 1. Use Permit (for driveway connection to public Right of Way). Return form with plot plan showing driveway location (Atlantic Ave. only).
- 2. Well Permit or information on existing well & pump.
- 3. Flood Hazard Elevation (if applicable).
- 4. ✓ Energy Code Compliance Certification plus any Approved Forms and/or Energy Code Compliance Sheets.
- 5. ✓ Statement of Fact (for Homeowner Builder), and proof of ownership - (Deed or Tax receipt).
- 6. Irrigation Sprinkler System layout showing location of heads, valves, etc.
- 7. A certified copy of the Notice of Commencement must be filed in this office and posted at the job site prior to the first inspection.
- 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 _____
Approved by Town Engineer _____

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

10/31/00

BUILDING PERMIT NO. 5143

Building to be erected for ERWIN & SABRINA GIFFORD

Type of Permit BLDG - S.F.R.

Applied for by ~~DAN CANADIA CONSTRUCTION INC.~~
SCOTT J. HOLMES BLDG.

(Contractor) Building Fee \$11,520.00

Subdivision _____ Lot _____ Block _____

Radon Fee 68.11

Address 85 N SEWALL'S POINT ROAD

Impact Fee N/A

Type of structure S.F.R.

A/C Fee 120.00

Renewal 7/9/02 - \$11,520.00
Ch# 8715

Electrical Fee 120.00

Parcel Control Number.
35-37-41-000-000-00742-00000

Plumbing Fee 120.00

Amount Paid \$12,068.11 Check # 819 Cash _____ Other Fees (REV) 1,152.00

Roofing Fee 120.00

Total Construction Cost \$ 1,200,000.00

TOTAL Fees \$13,220.11

Signed [Signature]
Applicant

Signed [Signature]
Town Building Inspector OFFICER

SCOTT J HOLMES BUILDING INC.
PO BOX 2804
JENSEN BEACH FLORIDA 34958

REMITTANCE ADVICE	
<u>GIFFORD PERMIT</u>	
<u>RENEWAL</u>	
<u>5143</u>	

63-515/670
8715

PAY ELEVEN THOUSAND FIVE HUNDRED TWENTY DOLLARS + 00/100 DOLLARS

HRS	DATE	TO THE ORDER OF	GROSS	DESCRIPTION	DISC	CHECK AMOUNT
	<u>7/9/02</u>	<u>TOWN OF SEWALL'S POINT</u>				<u>11,520.00</u>
				FICA FED WITH		

FIRST NATIONAL BANK AND TRUST COMPANY

[Signature]

SECURITY FEATURES MICRO PRINT BORDERS COLORED BRCK PATTERN WATER MARK CARBON STRIP ON REVERSE SIDE SECURITY FEATURE LOCATES A COPY

Renewal Bldg Fee 8/01/02 Clk# 8783

1-15-060380 MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 10/31/00 BUILDING PERMIT NO. 5143
 Building to be erected for ERWIN & SABRINA GIFFORD Type of Permit BLDG - S.F.R.
 Applied for by ~~DAVE CARROLL CONSTRUCTION CO. INC.~~ (Contractor) Building Fee \$11,520.00
SCOTT J. HOLMES BLDG.
 Subdivision _____ Lot _____ Block _____ Radon Fee 68.11
 Address 85 N SEWALL'S POINT ROAD Impact Fee N/A
 Type of structure S.F.R. A/C Fee 120.00
 Parcel Control Number 35-37-41-000-000-00242-00000 Electrical Fee 120.00
Renewal 7/9/02 - \$11,520.00 Clk# 8715 FINAL BLDG COST. 1,623,023 PERMIT COST 1200.000 Plumbing Fee 120.00
\$12,068.11 #819 423,023 x 960/1000 = 4060.80 Roofing Fee 120.00
 Amount Paid 1,152.00 Check # 486 Cash _____ Other Fees (REV.) 1,152.00
 Total Construction Cost \$ 1,200,000.00 TOTAL Fees \$13,220.11

Signed [Signature]
Applicant

Signed [Signature]
Town Building Inspector OFF: CLAC

SCOTT J HOLMES BUILDING INC
P O BOX 2804
JENSEN BEACH, FLORIDA 34958

REMITTANCE ADVICE
Permit NO. 5143
85 N SEWALLS PT

63-515/670
8783

PAY FOUR THOUSAND SIXTY DOLLARS AND 80/100 DOLLARS

HRS	DATE	TO THE ORDER OF	GROSS	DESCRIPTION	DISC	CHECK AMOUNT
	7/29/02	SEWALL'S POINT BUILDING DEPT.		F.I.C.A. FED WITH		4,060.80

FIRST NATIONAL BANK AND TRUST COMPANY

[Signature]

TOWN OF SEWALL'S POINT

Date 12-13-00 BUILDING PERMIT NO. 5146

Building to be erected for ERWIN & SABRINA GIFFORD Type of Permit PLMBG - SUB

Applied for by Dave's Plumbing (Contractor) Building Fee _____

Subdivision _____ Lot _____ Block _____ Radon Fee _____

Address 85 N. SEWALL'S POINT ROAD Impact Fee _____

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

QUALIFIER: D. Hushander
LIC/CERT: 0030 M.Co.

Parcel Control Number _____ Electrical Fee _____
Plumbing Fee SEE PN 5143

Amount Paid _____ Check # _____ Cash _____ Other Fees (_____) _____
Roofing Fee _____

Total Construction Cost \$ _____ TOTAL Fees _____

Signed D. Hushander Applicant Signed D. Hushander Town Building Inspector

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!**

01153758

95 JAN 11 AM 11 28

This Document Prepared By

M Timothy Hanlon, Esq
ALLEY, MAASS, ROGERS & LINDSAY, P A
321 Royal Poinciana Plaza
Palm Beach, Florida 33480

Parcel ID Number 35-37-41-000-000-00242-00000

Grantee #1 TIN 092-30-9652

Grantee #2 TIN 253-04-3917

10,500.00
BY CHA STILLER
MARTIN COUNTY
CLERK OF CIRCUIT COURT
BY [Signature]

WARRANTY DEED

This Indenture, Made this 5th day of January, 1996 A D , Between

RUTH A LAWRENCE, a single woman , grantor, and

ERWIN L GIFFORD and SABRINA R GIFFORD, his wife, grantees
whose address is 81 and 85 N Sewall's Point Road, Stuart, Florida 34996

Witnesseth that the GRANTOR, for and in consideration of the sum of -----
-----TEN & NO/100 (\$10 00) -----DOLLARS,
and other good and valuable consideration to GRANTOR in hand paid by GRANTEES, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said GRANTEES and GRANTEES' heirs and assigns forever, the following described land, situate, lying and being in the County of Martin, State of Florida to wit

All that part of the North 300 33 feet of the South 424 33 feet of Government Lot 2, Section 35, Township 37 South, Range 41 East, which lies West of the Westerly right of way line of Sewall's Point Road,

Less and except that portion deeded to the Town of Sewall's Point, pursuant to that certain Quit-Claim Deed from Ruth Lawrence to the Town of Sewall's Point dated July 27, 1994, and recorded in Official Records Book 1096, Page 1072, Public Records of Martin County, Florida

Subject to restrictions, reservations, limitations and easements of record, applicable zoning laws, ordinances and regulations, if any, and real estate taxes subsequent to the year 1996

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

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

Signed, sealed and delivered
in our presence

[Signature of M. Timothy Hanlon]
(Signature of Witness)
M. Timothy Hanlon
(Print Name of Witness)

[Signature of Ruth A. Lawrence]
RUTH A LAWRENCE

[Signature of Connie Carlton]
(Signature of Witness)
CONNIE CARLTON
(Print Name of Witness)

**SEWALL'S POINT
BUILDING DEPARTMENT
PLAN REVIEW FEE**

RECEIVED
MAY 31 2000
BY: _____

DATE: 6/1/00

NAME: ERWIN & SABRINA GIFFORD
PROJECT ADDRESS: 85 N. SEWALL'S POINT RD

*6/1/00 FORM COMPLETED
RCVD. OF PERMIT
ACKNOWLEDGED*

PHONE NUMBER: 223-5561

DAN CAMDRA CONST., 283-4761
ESTIMATED COST OF PROJECT BEING REVIEWED \$1,200,000.00

PROJECT COST \$1,200,000.00
X \$9.60/m = \$ 11,520.00 ESTIMATED
X 10% = \$ 1,152.00 BLDG PERMIT FEE
PLAN REVIEW FEE
RCVD 5/31/00 ck # 486

The information provided is to the best of my knowledge truthful and accurate.

Signature _____
Date _____

ERWIN L. GIFFORD 486

MAY 26 2000

PAY TO THE ORDER OF TOWN OF SEWALL'S PT \$ 1,152.00

One Thousand One Hundred Fifty-Two DOLLARS

Barnett 055-002
3727 Southeast Ocean Blvd.
Stuart, Florida 34996

plan review
FOR BLDG PERMIT Erwin L. Gifford

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
11/07/2000

PRODUCER (561)334-3181 FAX (561)334-7742
Rick Carroll Insurance Agency
2160 N E Dixie Highway
P O Box 877
Jensen Beach, FL 34958-0877

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

FILE
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INSURERS AFFORDING COVERAGE

INSURED Scott J Holmes Building Inc
P O Box 2804
Jensen Beach, FL 34958-5611

INSURER A	American States Insurance
INSURER B	RECEIVED NOV 7 2000
INSURER C	
INSURER D	
INSURER E	
INSURER F	

COPY
let us

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	01CE9125271	07/01/2000	07/01/2001	EACH OCCURRENCE \$ 300,000
					FIRE DAMAGE (Any one fire) \$ 200,000
					MED EXP (Any one person) \$ 10,000
					PERSONAL & ADV INJURY \$ 300,000
	GEN L AGGREGATE LIMIT APPLIES PER. <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				GENERAL AGGREGATE \$ 600,000
					PRODUCTS COMP/OP 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 LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				EACH OCCURRENCE \$
					AGGREGATE \$
					\$
					\$
					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STAT TORY LIMITS OTHER
					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

THIS CERTIFICATE IS FOR PROOF OF INSURANCE ONLY

CERTIFICATE HOLDER	ADDITIONAL INSURED INSURER LETTER	CANCELLATION
Town of Sewalls Point 1 Sewalls Pt Road Stuart, FL 34996		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF THE ISSUING COMPANY WILL ENDEAVOR TO MAIL <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES
		AUTHORIZED REPRESENTATIVE <i>Keith Carroll</i> Keith Carroll/KHB

RECEIVED
 NOV - 9 2000
 DATE (MM/DD/YY)
 11/08/2000

ACORD CERTIFICATE OF LIABILITY INSURANCE

PRODUCER
 WORKERS' COMPENSATION GROUP, INC.
 PO BOX 410
 BOCA RATON FL 33429-0410
 561-392-3300

INSURED
 CHECKMATE OF SOUTH FLORIDA
 PO BOX 1097
 PALM CITY FL 34991

permut

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.

COPY FILE

INSURERS AFFORDING COVERAGE

INSURER A	AIIC
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.

TYPE OF INSURANCE	POLICY NUMBER	POLICY PERIOD START DATE (MM/DD/YY)	POLICY PERIOD END DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIM MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIED FOR <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADM LIABILITY \$ GENERAL AGGREGATE \$ DEDUCTIBLE - COMPROP ADD \$
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 (EO excluded) \$ SOELY LIABILITY (Per person) \$ SOELY LIABILITY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EA ADD \$ AGG \$
EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIM MADE <input type="checkbox"/> DEDUCTIBLE \$ <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
WORKERS' COMPENSATION INSURANCE (EMPLOYER'S LIABILITY)	2000-283724	05-01-00	05-03-01	<input checked="" type="checkbox"/> POLY STATE <input type="checkbox"/> POLY STATE <input type="checkbox"/> POLY STATE EL. PAID ACCIDENT \$100,000 EL. DISEASE - EA EMPLOYEES \$100,000 EL. DISEASE - POLICY LIMIT \$500,000
OTHER				

DESCRIPTION OF OPERATIONS, LOCATIONS, VEHICLES, OCCASIONS ADDED BY ENDORSEMENTS, SPECIAL PROVISIONS
 COVERING: **SCOTT J HOLMES INC**

CERTIFICATE HOLDER
 SEWELL'S POINT TOWN CENTER
 20 SEWELL'S POINT ROAD
 SEWELL'S POINT FL 34996

CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF THE ISSUING INSURER WILL INDICATE TO EARLY 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL NOT BE A DEFEAT OF THE COVERAGE OR LIABILITY OF ANY POLICY UNDER THE ISSUING POLICY OR REINSURANCE.
 AUTHORIZED REPRESENTATIVE: *[Signature]*

RECEIVED
NOV - 8 2000
BY: *[Signature]*

FILE
[Handwritten signature]

AC# 5899548

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST. INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
07/03/2000	99902397	CG -0057003

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS
Expiration date: AUG 31, 2002

HOLMES, SCOTT JAMES
SCOTT J HOLMES BLDG INC
1980 NE OCEAN DR
PO BOX 2804
JENSEN BEACH FL 34958

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON
SECRETARY

AC# 5898565

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST. INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
07/03/2000	99902397	CG -0055859

The GENERAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS
Expiration date: AUG 31, 2002

HOLMES, SCOTT JAMES
SCOTT J HOLMES BUILDING INC
1980 NE OCEAN DR
PO BOX 2804
JENSEN BEACH FL 34958

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON
SECRETARY

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
12/11/00

PRODUCER
RELICKE MARK R - 6201

FEDERATED MUTUAL INSURANCE COMPANY
302 Perimeter Center North
Atlanta, GA 30348
Phone 770-390-3900
Home Office Owatonna, MN 55060

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

COMPANIES AFFORDING COVERAGE

COMPANY A	FEDERATED MUTUAL INSURANCE COMPANY OR FEDERATED SERVICE INSURANCE COMPANY
COMPANY B	RECEIVED
COMPANY C	DEC 11 2000
COMPANY D	

INSURED
141 263 4

DAVES PLUMBING INC
499 SE SEVILLE STREET
STUART FL 34994

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT	9040854	04/01/00	04/01/01	GENERAL AGGREGATE \$ 2,000,000 PRODUCTS COMP/DP AGG \$ 2,000,000 PERSONAL & ADV INJURY \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one lve) \$ 100,000 MED EXP (Any one person) \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON OWNED AUTOS	9040854	04/01/00	04/01/01	COMBINED SINGLE LIMIT \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY EA ACCIDENT \$ OTHER THAN AUTO ONLY EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
A	WORKERS COMPENSATION AND EMPLOYERS LIABILITY <input type="checkbox"/> THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE INCL <input type="checkbox"/> EXCL OTHER	9041337	04/01/00	04/01/01	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER EL EACH ACCIDENT \$ 100,000 EL DISEASE POLICY LIMIT \$ 500,000 EL DISEASE EA EMPLOYEE \$ 100,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

Renew? (Y/N): Y

CERTIFICATE HOLDER

Town of Sewall's Point
One South Sewall's Point
Stuart, FL 34994

CANCELLATION

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

AUTHORIZED REPRESENTATIVE *[Signature]*
PRESIDENT

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONST. INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
07/06/2000	00900028	CF -0051625

The PLUMBING CONTRACTOR
 Named below IS CERTIFIED
 Under the provisions of Chapter 489
 Expiration date: AUG 31, 2002

HUSNANDER, DAVID
 DAVE'S PLUMBING INC
 499 SE SEVILLE ST
 STUART FL 34994-4449

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Hefvi

RECEIVED
 DEC 08 2000
 BY: *[Signature]*

JEB BUSH
 GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON
 SECRETARY

AC# 5564119

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONST. INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
06/04/1999	98-02702	CF -0038400

The PLUMBING CONTRACTOR
 Named below HAS REGISTERED
 Under the provisions of Chapter 489
 Expiration date: AUG 31, 2001
 INDIVIDUAL MUST MEET ALL LICENSING REQUIREMENTS
 PRIOR TO CONSTRUCTING IN ANY AREA

HUSNANDER, DAVID
 DAVE'S PLUMBING INC
 499 SE SEVILLE ST
 STUART

JEB BUSH
 GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON
 SECRETARY

MARTIN COUNTY ORIGINAL
 2000 COUNTY OCCUPATIONAL LICENSE 2001
 Larry C. O'Steen, Tax Collector, P. O. Box 9013, Stuart, FL 34995
 (561) 288-5804

LICENSE 1900 524 007 CERT
 PHONE 561 287 8128 SIC NO 0000
 LOCATION
 499 SE SEVILLE ST

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR \$	<u>0.00</u>	LC. FEE \$	<u>25.00</u>
\$	<u>0.00</u>	PENALTY \$	<u>0.00</u>
\$	<u>0.00</u>	COL FEE \$	<u>0.00</u>
\$		TRANSFER \$	<u>0.00</u>
TOTAL			<u>25.00</u>

DAVES PLUMBING INC
 499 SE SEVILLE ST
 STUART FL 34997

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
 OF **PLUMBING**
 AT ABOVE ADDRESS FOR THE PERIOD BEGINNING ON THE

1 DAY OF OCTOBER 2000
 AND ENDING SEPTEMBER 30, 2001 12 90701 3355 PAID



MARTIN COUNTY, FLORIDA
Construction Industry Lic Bd
Certificate of Competency

License # MP00030581 000 7277
Expires September 30, 2001

HUSNANDER, DAVE
DAVE'S PLMBG INC
499 SE SEVILLE ST
STUART, FL 34994
MASTER PLUMBER

12-7-00
FILE
we/ks

RECEIVED
DEC 08 2000
BY: *[Signature]*

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
01/14/2000

PRODUCER (561)287-2030 FAX (561)288-2481
 Deakins-Carroll Insurance Agency
 P O Box 1597
 Pt Salerno, FL 34992
 Attn Barbara Walenius
 INSURED Don Campora Construction Company, Inc
 6435 SE Wild Olive Lane
 Stuart, FL 34997

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

COPY

COMPANIES AFFORDING COVERAGE
 Assurance Company of America
 ZC Insurance Company
 COMPANY A
 COMPANY B
 COMPANY C
 COMPANY D

FILE
permit

FILE
11/1/00

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	RGM21107884	12/21/1999	12/21/2000	GENERAL AGGREGATE \$ 600,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS COMP/OP AGG \$ 600,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 300,000
	OWNERS & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 300,000
					FIRE DAMAGE (Any one fire) \$ 50,000
					MED EXP (Any one person) \$ 10,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	ANY AUTO				
	ALL OWNED AUTOS				BODILY INJURY (Per person) \$
	SCHEDULED AUTOS				
	HIRED AUTOS				BODILY INJURY (Per accident) \$
	NON-OWNED AUTOS				PROPERTY DAMAGE \$
	GARAGE LIABILITY				AUTO ONLY EA ACCIDENT \$
	ANY AUTO				OTHER THAN AUTO ONLY
					EACH ACCIDENT \$
					AGGREGATE \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	UMBRELLA FORM				AGGREGATE \$
	OTHER THAN UMBRELLA FORM				\$
B	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	197000013636100	01/01/2000	01/01/2001	WC STATUTORY LIMITS OTH ER
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE <input checked="" type="checkbox"/> INCL <input checked="" type="checkbox"/> EXCL				EL EACH ACCIDENT \$ 100,000
					EL DISEASE POLICY LIMIT \$ 500,000
	OTHER				EL DISEASE EA EMPLOYEE \$ 100,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

Sewall's Point, Town of
 1 South Sewall's Point Road
 Stuart, FL 23996

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

David Deakins/BW

David Deakins

STATE OF FLORIDA AC# 5193184
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CG -C022955 06/30/1998 97904248
CERTIFIED GENERAL CONTRACTOR
CAMPORA, DOUGLAS L
DON CAMPORA CONST CO INC
IS CERTIFIED under the provisions of Ch 489 FS
Expiration Date AUG 31, 2000

Douglas L Campora

SIGNATURE



STATE OF FLORIDA

AC# 5576856

DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

QB -0005925 06/26/1999 98902902

QUALIFIED BUSINESS ORGANIZATION
DON CAMPORA CONSTRUCTION CO INC

(NOT A LICENSE TO PERFORM WORK
ALLOWS COMPANY TO DO BUSINESS IF
IT HAS A LICENSED QUALIFIER)

IS QUALIFIED under the provisions of Ch 489 FS

Expiration Date AUG 31, 2001

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
01/14/2000

PRODUCER (561)287-2030 - FAX (561)288-2481
Deakins-Carroll Insurance Agency
P O Box 1597
Pt Salerno, FL 34992

Attn Barbara Walenius Ext
INSURED Don Campora Construction Company, Inc
6435 SE Wild Olive Lane
Stuart, FL 34997

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COMPANIES AFFORDING COVERAGE

- COMPANY A Assurance Company of America
- COMPANY B ZC Insurance Company
- COMPANY C
- COMPANY D

FILE
permut

COPY

FILE
1/14/00

COVERAGES

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

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	HIRED AUTOS				BODILY INJURY (Per accident) \$
	NON OWNED AUTOS				PROPERTY DAMAGE \$
	GARAGE LIABILITY				AUTO ONLY EA ACCIDENT \$
	ANY AUTO				OTHER THAN AUTO ONLY \$
					EACH ACCIDENT \$
					AGGREGATE \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	UMBRELLA FORM				AGGREGATE \$
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B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	197000013636100	01/01/2000	01/01/2001	WC STATUTORY LIMITS OTH ER \$ 100,000
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE <input checked="" type="checkbox"/> INCL <input checked="" type="checkbox"/> EXCL				EL EACH ACCIDENT \$ 100,000
					EL DISEASE POLICY LIMIT \$ 500,000
	OTHER				EL DISEASE EA EMPLOYEE \$ 100,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

Sewall's Point, Town of
1 South Sewall's Point Road
Stuart, FL 23996

CANCELLATION

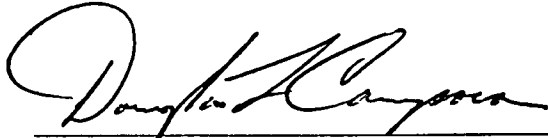
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY,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

AUTHORIZED REPRESENTATIVE

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STATE OF FLORIDA AC# 5193184
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CG -C022955 06/30/1998 97904248
CERTIFIED GENERAL CONTRACTOR
CAMPORA, DOUGLAS L
DON CAMPORA CONST CO INC
IS CERTIFIED under the provisions of Ch 489 FS
Expiration Date AUG 31, 2000



SIGNATURE



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

TO BUILDING DEPARTMENT MARTIN JUPITER ISL SEWALLS PT STUART

FROM Ray Cross

DATE 04/30/02

SUBJECT FINAL APPROVAL FOR SEPTIC SYSTEMS

<u>HEALTH DEPT PERMIT</u>	<u>BUILDING DEPT PERMIT</u>	<u>LOCATION</u>
---------------------------	-----------------------------	-----------------

• 43-SS- <u>03428</u>	5477	LOT 22 RIDGE LANE REGM CONSTR.
-----------------------	------	--------------------------------

• 43-SS- <u>02272</u>	85 N. SEWALLS POINT RD	E.L. GIFFORD
-----------------------	------------------------	--------------

• 43-SS- _____

• 43-SS- _____

• 43-SS- _____

• 43-SS- _____

• 43-SS- _____

• 43-SS- _____

BUG MAN PEST MANAGEMENT, INC.
1401 SW BILTMORE STREET
PORT ST LUCIE, FLORIDA 34983
561-879-2740 FAX# 340-4316

Certification of Pre-Construction Soil Treatment

Permit# 20000 5143 Lot/Block/Section 1 1

Builder Scott J Holmes Job Address 85 N. Swall's Point Road

We the undersigned hereby certify that we have pretreated the above described construction for subterranean termites in accordance with the standards of the National Pest Control Association

THE AREA TREATED WAS

FOOTING: XXX

SLAB XXX

OTHER _____

Approximate area treated was 6359 square feet

The chemical used was Prevail FT

Percent of solution 0.5%

Total gallons used 318

Date of Treatment: 1/2/01

BY Michael Burke
Pest Control Contractor

SOIL DENSITY TEST REPORT

Project Name: 85 N. Sallows Point Road

Client Name: Scott Holmes, Inc
 P O Box 2804
 Jensen Beach, FL 34958

Attn: Mr. Scott Holmes

Report Date: 12-14-00

Project No: 00-10-816

Date Tested: 11-30-00

Technician Initials: [Signature]

CSN

Progress Report No: 2 (Sheet 1 of 2)

FILE

RECEIVED
 JAN 24 2001
 BY: [Signature]

Test No	Probe Depth (in)	Laboratory Proctor		Field Tests					
		Maximum Dry Density (pcf)	Optimum Moisture (%)	Dry Density (pcf)	Cone Resistance ¹ (tsf)	Moisture (%)	Minimum Required Compaction (%)	Percent Maximum Density	Test Result
1	12	109.9	12.3	113.4	---	8.4	95	100+	Pass
2	12	109.9	12.3	111.8	---	9.1	95	100+	Pass
3	12	109.9	12.3	114.6	---	8.6	95	100+	Pass
4	12	109.9	12.3	113.6	---	7.7	95	100+	Pass
5	12	109.9	12.3	112.9	---	8.7	95	100+	Pass
6	12	109.9	12.3	113.5	---	8.9	95	100+	Pass
7	12	109.9	12.3	114.0	---	9.9	95	100+	Pass

Type of Field Density Test: (X) ASTM D 2922 () ASTM D 2937

Minimum Required Compaction Based on: (X) AASHTO T-180 (ASIM D 1557) () AASHTO T-99 (ASTM D 698)

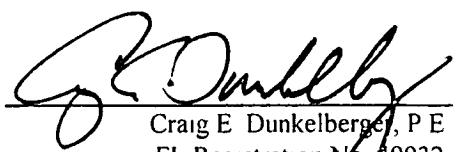
¹Compaction percent estimated from cone penetrometer reading obtained with a Brainard-Kilman Model S-214 hand-held cone penetrometer

Test No	Soil Type	Elevation	Test Location
1	1	0-12	Garage, north center
2	1	0-12	Garage, south center
3	1	0-12	House, northeast
4	1	0-12	House, southeast
5	1	0-12	House, center
6	1	0-12	House, southwest
7	1	0-12	House, northwest

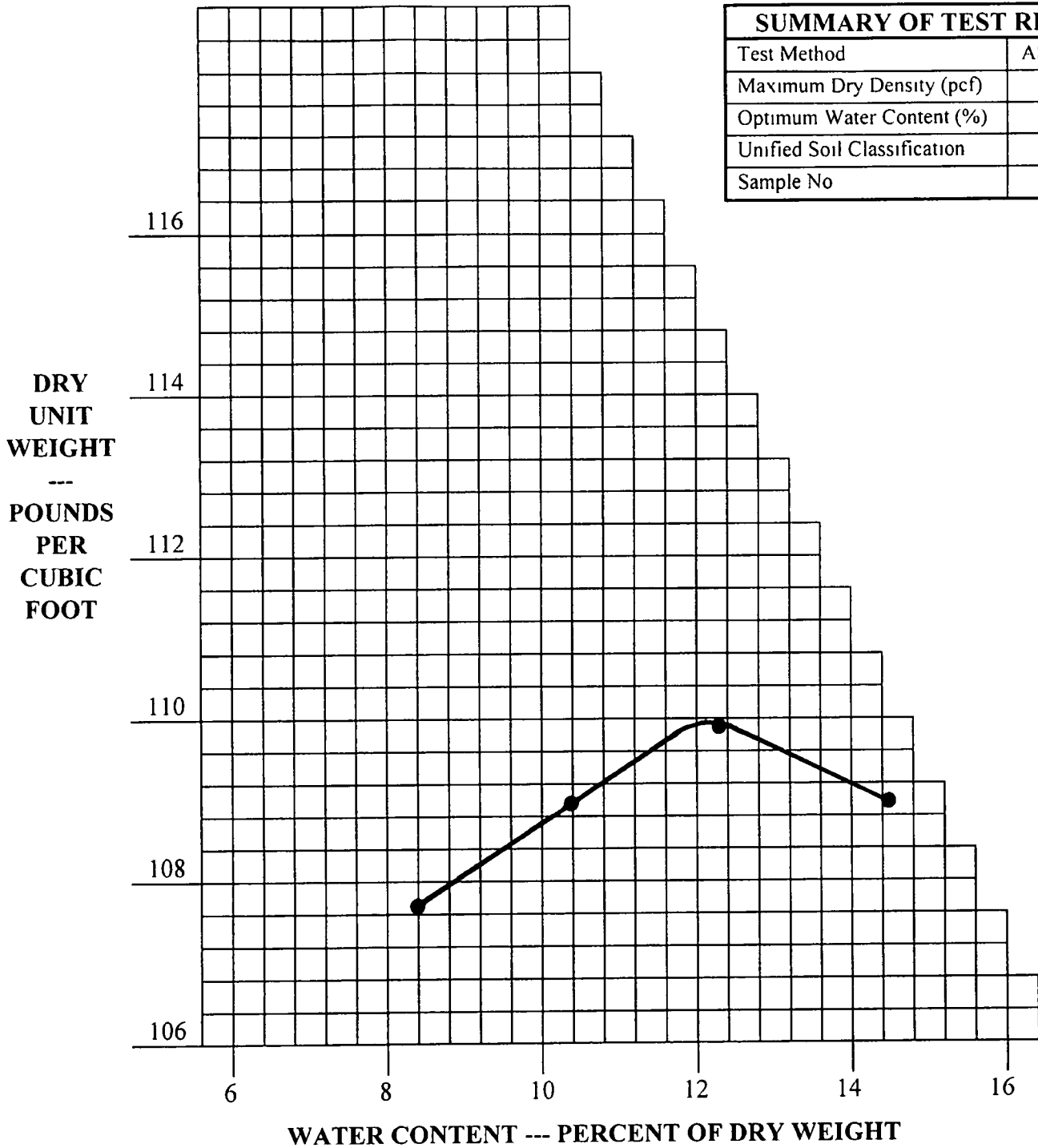
Elevation Referenced to: () NGVD () MSL (X) Other Inches below finish pad grade

Soil Type	
1	Structural Fill
2	Final Grading Fill
3	Mass Grading Fill
4	Utility Backfill - Sanitary
5	Utility Backfill - Water
6	Utility Backfill - Storm
7	Roadway Subgrade
8	Stabilized Subgrade
9	Base Course
10	Other

cc Client (2)


 Craig E Dunkelberger, P.E.
 FL Registration No. 49932
DEC 18 2000

SUMMARY OF TEST RESULTS	
Test Method	ASTM D 1557
Maximum Dry Density (pcf)	109.9
Optimum Water Content (%)	12.3
Unified Soil Classification	SP-SM
Sample No	3285



Sample Location. In-place house pad

Sample Description Brown fine to medium SAND, slightly silty, trace clay

MOISTURE - DENSITY RELATIONSHIP			
Scott Holmes, Inc Continuing Services Jensen Beach, Florida			
DET DUNKELBERGER ENGINEERING & TESTING, INC Geotechnical • Materials Testing/Inspection • Environmental			
Tested By	SM	Date	12-06-00
Checked By	CD	Date	12-07-00
Project	00-10-816	Sheet	2 of 2

TOWN OF SEWALL'S POINT

Building Department
One South Sewall's Point Road
Sewall's Point, Florida 34996

TEMPORARY ELECTRIC HOOK-UP AGREEMENT: PN: 5143
(To be submitted at final electrical inspection in order to turn on electric service)

Owner: Winn GIFFORD Address: 85 N Sewall's Point Rd

Project Address: 85 N Sewall's Point Legal: Lot 2 Blk _____ Subdivision _____

General Contractor Scott J Holmes Lic/Cert No: CGC-055859

Address: 3601 Ocean Biv. #202 Tel: 220-4780 Fax: 225-4744

Electrical Contractor: R.M.S. Electric, Inc Lic/Cert No: EC-0002707

Address: 1501 Decker Ave #113 Stuart FL Tel: 220-1052 Fax: 270-3628

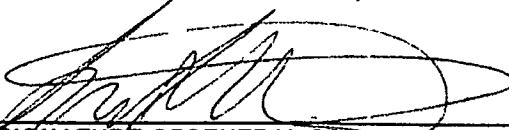
WHEREAS, pursuant to the provisions of, and governed by, Sections 0307 6 and 4504 6 of the South Florida Building Code as adopted in Section 4-16 of the Codes and Ordinances of the Town of Sewall's Point, temporary electric hook-up for use during building operations and for testing purposes under a valid building permit is authorized under prescribed terms and conditions, and,

WHEREAS, the above named responsible persons, firms or corporations have requested a temporary electrical hook-up of _____ for the purpose of _____
At the above designated construction now in progress under a valid building permit, and equipment and completion of building operations as herein above described

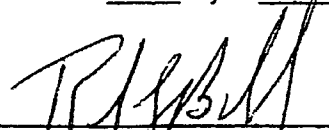
NOW THEREFORE IT IS AGREED BY AND BETWEEN THE PARTIES THAT;

- 1 The parties to this agreement are Gene Simmons, Building Official, Town of Sewall's Point, and the above named responsible persons, firms, corporations
- 2 In order to allow electrical service to be provided to certain equipment being placed at the referenced construction address the Building Official hereby agrees to grant a temporary hook-up permit
- 3 This temporary hook-up permit shall be effective for 30 calendar days from the date of this agreement, after which time the temporary hook-up will be revoked or a Certificate of Occupancy will be issued to verify completion
- 4 The temporary electric hook-up is solely for the purposes stated. No furniture or occupants will be moved into the building until a Certificate of Occupancy is issued

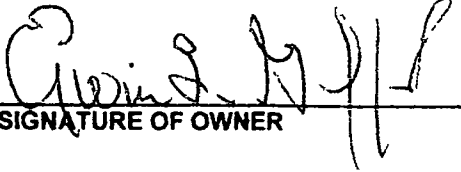
IN WITNESS WHEREOF the parties have caused this agreement to be executed this _____ day of _____, 200_____



SIGNATURE OF GENERAL CONTRACTOR



SIGNATURE OF ELECTRICAL CONTRACTOR



SIGNATURE OF OWNER



GENE SIMMONS, BUILDING OFFICIAL

DOWN PAYMENT	
\$	
AMOUNT	SEQUENCE NUMBER

RECEIVED AT COMPLETION	
\$	
AMOUNT	DEPOSIT NUMBER

ACCOUNT NUMBER	
----------------	--

BUG MAN PEST MANAGEMENT, INC.

1401 S.W. BILTMORE STREET
PORT ST LUCIE, FLORIDA 34983

RECEIVED
(561) 879-2740
JAN 24 2001
BY: <u>g</u>

FIL

SOIL TREATMENT PLAN

PURCHASER _____ TELEPHONE _____

MAIL ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

DESCRIPTION OF PROPERTY RESIDENTIAL DWELLING

LOT _____ BLOCK _____ SECTION _____

PROPERTY ADDRESS 85 N SEWALL'S POINT ROAD

CITY SEWALL'S POINT STATE FLORIDA ZIP CODE 34986

CHEMICAL USED PREVAIL FT CONCENTRATION 5 PERCENT

SQ. FEET 6359 AMOUNT (gals) APPLIED 318

Effective 01/02/01 through 01/02/02, for the sum of \$ _____

Bug Man hereby states that the soil has been treated at the above described property for the control of subterranean termites (Reticulitermes sp., Herterotermes sp.)

Bug Man agrees, that if subterranean termite infestation(s) should occur at the described property, within a period one year from the date of treatment, upon written notice from Purchaser, Bug Man will inspect and, if necessary, will provide retreatment at no additional cost to the Purchaser.

In the event of additions or alterations to the described property which affect the structure and create conditions conducive to new subterranean termite infestation, or interfere with the chemical soil treatment this limited guarantee is null and void

This soil treatment plan will be effective only upon payment of the charges as provided herein.

Any additional provisions attached hereto including the general conditions on the reverse side are part of this plan.

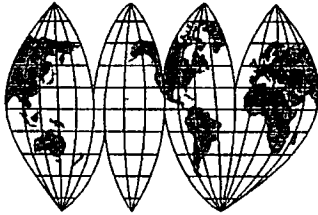
NOTICE: YOU, THE PURCHASER, MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION. SEE ATTACHED NOTICE OF CANCELLATION FOR AN EXPLANATION OF THIS RIGHT

PURCHASER _____ DATE _____

BUG MAN REPRESENTATIVE MICHAEL BURKE DATE 01/02/01

BUG MAN ADDRESS 1401 SW BILTMORE STREET TELEPHONE (561) 879-2740

CITY PORT ST LUCIE STATE FLORIDA ZIP CODE 34983

**REPORT OF FINAL AS-BUILT SURVEY**
for Erwin L. Gifford and Sabrina R. Gifford
June 3, 2002**Map of Final As-Built Survey:**

See Map of As-built Survey, lands described shown hereon is in accord with the description provided by the Client or Client's representative. This survey map and report is not valid without the signature and original raised seal of the Florida licensed Surveyor and Mapper. The signature and seal can be found at the end of this report. The map and report are not full and complete without the other

Legal Description:

See attached Exhibit "A"

Accuracy:

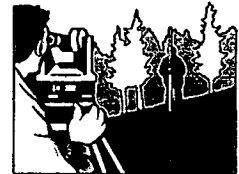
The expected use of the land, as classified in the Minimum Technical Standards (61G17-6FAC), is "Suburban". The minimum relative distance accuracy for this type of survey is 1 foot in 7,500 feet. The accuracy obtained by measurement with an electronic total station and calculation of a closed geometric figure was found to exceed this requirement.

Data Sources:

Recorded adjoining plats were obtained from County repositories.

Measurement Methods:

All equipment was tested and calibrated. Two sets of traverse angles were turned and averaged. The traverse indirectly connected the most northerly and southerly property corners and features were found from this traverse by side ties using a redundancy of measurements.

**General:**

- Bearings shown hereon are relative to the South line of Government Lot 2, bearing being S89°31'00"W
- Elevations shown hereon are in feet and decimal parts thereof and are relative to the National Geodetic Vertical Datum of 1929 and are based on Benchmark Sewall's Point-2 being a 2 inch brass disk located about 0.8 miles North of the intersection of State Highway A-1-A (East Ocean Blvd) and Sewall's Point Road, about 90 feet east of the centerline of Sewall's Point Road and about the Southwest corner of a concrete seawall, set near the southwest corner of a 16 inch concrete seawall that parallels a small inlet leading to the Indian River, elevation 4.511 feet
- This As-built Survey was prepared for the purpose of locating new construction

Limitations:

- This Survey was last surveyed in the field on June 3, 2002 and shall not be relied upon for field accuracy or sufficiency subsequent to that date
- No Title Policy or Commitment effecting title of the boundary shown hereon was provided. Lands shown hereon were not abstracted in public records for rights-of-way, easements of records, ownership, Murphy Act deeds or adjoining deeds. Deeds or easements, recorded or unrecorded, may exist, which could affect this survey and the boundary shown hereon
- The Mean High Water Survey depicted hereon complies with Chapter 177, Part II, Florida Statutes and is recorded in the public repository of the Florida Department of Environmental Protection, Bureau of Surveying and Mapping as Mean High Water Survey File Number 2439
- No visible aboveground evidence of physical use were noted by this survey, unless depicted or stated herein
- No underground improvements, utilities, foundations, footings, or septic tanks were located by

Report of Final As-Built Survey
Erwin L. Gifford and Sabrina R. Gifford
Page 2 of 3

- this survey
- The parcel as shown hereon has not been surveyed for determination of jurisdictional wetlands as defined by any governmental entity Any acreage shown hereon is calculated without regard to any such jurisdiction
 - The National flood Insurance Program Designation as indicated on the F E M A Map Panel No 120161 0001 E, dated 10/16/1996, locates the parcel in Zone A10, base flood elevation 8', Zone B, Zone C, and Zone A8, base elevation 9', subject to any scaling and interpolation factors associated with mapping of this accuracy
 - This map may have been photographically or digitally reduced or enlarged with or without the knowledge of the issuing agent It is incumbent upon the end user to determine the scale indicated hereon as reliable for the intended uses Certification is made only to the original scale so indicated
 - This Survey shall not be copied, transferred or assigned without the specific written permission of Aslan, Inc
 - Address 85 North Sewall's Point Road
 - Drawing File Gifford-final6 dwg

Boundary Inconsistencies:

N/A

Apparent Physical Use:

Single-family residence

Easements:

N/A

Prepared for:

Erwin L Gifford and Sabrina R Gifford
85 North Sewall's Point Road
Sewall's Point, FL 34996

Certified to:

This survey is prepared for the sole and exclusive benefit of Erwin L Gifford, Sabrina R Gifford and the Town of Sewall's Point and shall not be relied upon by any other entity or individual whomsoever

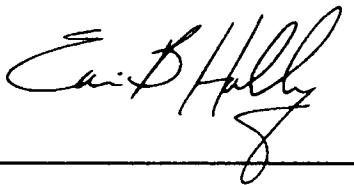
Surveyor and Mapper in Responsible Charge:

Eric B Holly, P S M
Registration No LS 3336

ASLAN, inc.

P O Box 1500, Stuart, FL 34995-1500
2440 S E Federal Highway, Suite 700, Stuart, Florida 34994
(561) 288-4880
Registration No LB 5715

Signed _____



Date July 3, 2002

Exhibit "A"

Erwin L. Gifford Legal Description

All that part of the North 300.33 feet of the South 424.33 feet of Government Lot 2, Section 35, Township 37 South, Range 41 East, which lies west of the Westerly right of way line of Sewall's Point Road; less and except a parcel or tract of land more particularly described as follows:

Beginning at a point on the South line of the North 300.33 feet of the South 424.33 feet of said Government Lot 2, said point being in the centerline of Sewall's Point Road, (1) thence proceed South $89^{\circ}31'00''$ West along the South line of the North 300.33 feet of the South 424.33 feet of Government Lot 2, for a distance of 175 feet to a concrete monument; (2) thence proceed North $15^{\circ}26'00''$ West for a distance of 139.72 feet to a concrete monument; (3) thence proceed North $89^{\circ}31'00''$ East along a line parallel to and 135 feet North of the line described in call No. 1 for a distance of 131.25 feet to a point in the centerline of Sewall's Point Road for a distance of 156.80 feet to the **Point or Place of Beginning**.

85 N. Sewalls Pt. Rd # 5143 / Gifford

OWNER'S AFFIDAVIT OF BUILDING COSTS

(To be submitted at time of final inspection for Certificate of Occupancy)

STATE OF FLORIDA
MARTIN COUNTY

BEFORE ME, the undersigned authority, personally appeared the undersigned Affidavit, who, being first duly sworn, under penalty of perjury, deposes and says

- 1 That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature
- 2 That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes
- 3 That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 1,623,023.00
- 4 That this Affidavit is made for the purpose of inducing the Building Official of the Town to issue a Certificate of Occupancy for the improvements, with the intention that it be relied upon for that purpose

Affidavit's Signature

E. Gifford

Property Address

85 NORTH SEWALL'S POINT RD
STUART FL 34996

SWORN TO and subscribed before me this 11th day of July, 2002, by E. Gifford, who is personally known to me or produced Fl d.l. as identification

Josiah Barrow

Notary Public

My commission expires

(Notary Seal)



Juan H Barrow
MY COMMISSION # CC763645 EXPIRES
November 30, 2002
BONDED THRU TROY FAIN INSURANCE, INC.



Well permit 43-51-3507

Cont...

STATE OF FLORIDA
DEPARTMENT OF HEALTH
MARTIN COUNTY HEALTH DEPARTMENT
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION INSPECTION AND FINAL APPROVAL

CENTRAX # : 43-88-02232
OSTDSNBR : 00-0244-B

APPLICANT: GILFORD, KEVIN L AGENT: _____

PROPERTY STREET ADDRESS: 85 N Sewalls Point Rd STUART FL 34996

LOT: _____ BLOCK: _____ SUBDIVISION: SEWALL'S POINT
[Section/Township/Range/Parcel No.]

PROPERTY ID #: 35374100900000242000 [OR TAX ID NUMBER] Building Permit: _____

CHECKED [X] ITEMS ARE NOT IN COMPLIANCE WITH CHAPTER 64E-6, FLORIDA ADMINISTRATIVE CODE.

- | | |
|---|--|
| <input type="checkbox"/> [01] TANK SIZE [1] _____ [2] _____ | <input type="checkbox"/> [27] SURFACE WATER |
| <input type="checkbox"/> [02] TANK MATERIAL _____ | <input type="checkbox"/> [28] DITCHES |
| <input type="checkbox"/> [03] OUTLET DEVICE _____ | <input type="checkbox"/> [29] PRIVATE WELLS |
| <input type="checkbox"/> [04] MULTI-CHAMBERS _____ | <input type="checkbox"/> [30] PUBLIC WELLS |
| <input type="checkbox"/> [05] LEGEND _____ | <input type="checkbox"/> [31] IRRIGATION WELLS 75' |
| <input type="checkbox"/> [06] WATERTIGHT _____ | <input type="checkbox"/> [32] POTABLE WATER LINES |
| <input type="checkbox"/> [07] LEVEL _____ | <input type="checkbox"/> [33] BUILDING FOUNDATION |
| <input type="checkbox"/> [08] DEPTH OF LID _____ | <input type="checkbox"/> [34] PROPERTY LINES |
| | <input type="checkbox"/> [35] OTHER _____ |
-
- | | |
|---|---|
| <input type="checkbox"/> [09] AREA [1] _____ [2] _____ SQFT | <input type="checkbox"/> [36] DRAINFIELD COVER 16" |
| <input type="checkbox"/> [10] DISTRIBUTION BOX/HEADER _____ | <input type="checkbox"/> [37] SHOULDERS ✓ |
| <input type="checkbox"/> [11] NUMBER OF DRAINLINES _____ | <input type="checkbox"/> [38] SLOPES ✓ |
| <input type="checkbox"/> [12] DRAINLINE SEPARATION _____ | <input type="checkbox"/> [39] STABILIZATION MATERIAL <u>SOD 4/29/02</u> |
| <input type="checkbox"/> [13] DRAINLINE SLOPE _____ | |
-
- | | |
|--|--|
| <input type="checkbox"/> [14] DEPTH OF COVER _____ | |
| <input type="checkbox"/> [15] SYSTEM ELEVATION _____ | |
| <input type="checkbox"/> [16] SYSTEM LOCATION _____ | |
| <input type="checkbox"/> [17] DOSING PUMPS _____ | |
| <input type="checkbox"/> [18] AGGREGATE SIZE _____ | |
| <input type="checkbox"/> [19] AGGREGATE SOURCE _____ | |
| <input type="checkbox"/> [20] AGGREGATE WASHED _____ | |
| <input type="checkbox"/> [21] AGGREGATE DEPTH _____ | |
-
- | | |
|--|---|
| <input type="checkbox"/> [22] FILL AMOUNT _____ | <input type="checkbox"/> [40] UNOBSTRUCTED AREA |
| <input type="checkbox"/> [23] FILL TEXTURE _____ | <input type="checkbox"/> [41] STORMWATER RUNOFF |
| <input type="checkbox"/> [24] EXCAVATION DEPTH _____ | <input type="checkbox"/> [42] ALARMS |
| <input type="checkbox"/> [25] EXCAVATION AREA _____ | <input type="checkbox"/> [43] MAINTENANCE AGREEMENT |
| <input type="checkbox"/> [26] REPLACEMENT MATERIAL _____ | <input type="checkbox"/> [44] BUILDING AREA |
| | <input type="checkbox"/> [45] PLUMBING FIXTURES |
| | <input type="checkbox"/> [46] FINAL SITE GRADING |
| | <input type="checkbox"/> [47] CONTRACTOR _____ |
| | <input type="checkbox"/> [48] OTHER _____ |
-
- | |
|---|
| <input type="checkbox"/> [49] TANK PUMPED _____ |
| <input type="checkbox"/> [50] TANK CRUSHED AND FILLED _____ |

EXPLANATION OF VIOLATIONS:
 Baffle removed 11/15/02
 OK to cover, hold for final grade, driveway
 1/12/03 - Well approved. PROPERTY STILL UNDER CONST HOLDING D-WAY, FINAL GRAD. OK.
 OWES \$2500

CONSTRUCTION [APPROVE/DISAPPROVE] OK Martin CHD Date: 11/15/02
 FINAL SYSTEM [APPROVE/DISAPPROVE] OK Martin CHD Date: 4/24/02
 DH 4016, 03/97 (Replaces previous editions which may not be used)
 (Stock Number: 5744-002-4016-4) (Grade class 4016-2)
 01-24M
 Page 2

\$	
AMOUNT	SEQUENCE NUMBER
RECEIVED AT COMPLETION	
\$	
AMOUNT	DEPOSIT NUMBER
ACCOUNT NUMBER	

BUG MAN PEST MANAGEMENT, INC.

1401 S.W BILTMORE STREET
PORT ST LUCIE, FLORIDA 34983

(561) 879-2740

SOIL TREATMENT PLAN

PURCHASER _____ TELEPHONE _____

MAIL ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

DESCRIPTION OF PROPERTY RESIDENTIAL DWELLING

 LOT _____ BLOCK _____ SECTION _____

PROPERTY ADDRESS 85 N SEWALL'S POINT ROAD

CITY SEWALL'S POINT STATE FLORIDA ZIP CODE 4986

CHEMICAL USED PREVAIL F1 CONCENTRATION 5 PERCENT

SQ. FEET 6359 AMOUNT (gals) APPLIED 318

Effective 01/02/01 through 01/02/02, for the sum of _____

Bug Man hereby states that the soil has been treated at the above described property for the control of subterranean termites (Reticulitermes sp., Herterotermes sp.)

Bug Man agrees, that if subterranean termite infestation(s) should occur at the described property, within a period of one year from the date of treatment, upon written notice from Purchaser, Bug Man will inspect and, if necessary, will provide re-treatment at no additional cost to the Purchaser.

In the event of additions or alterations to the described property which affect the structure and create conditions conducive to new subterranean termite infestation, or interfere with the chemical soil treatment this limited guarantee is null and void.

This soil treatment plan will be effective only upon payment of the charges as provided herein.

Any additional provisions attached hereto including the general conditions on the reverse side are part of this plan.

NOTICE: YOU, THE PURCHASER, MAY CANCEL THIS TRANSACTION AT ANY TIME PRIOR TO MIDNIGHT OF THE THIRD BUSINESS DAY AFTER THE DATE OF THIS TRANSACTION - SEE ATTACHED NOTICE OF CANCELLATION FOR AN EXPLANATION OF THIS RIGHT

PURCHASER _____ DATE _____

BUG MAN REPRESENTATIVE MICHAEL BURIE DATE 1/02/01

BUG MAN ADDRESS 1401 SW BILTMORE STREET TELEPHONE (561) 79-2740

CITY PORT ST LUCIE STATE FLORIDA ZIP CODE 4983

STATEMENT OF INSPECTION

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

OWNER: Wynn Olfend ; ADDRESS: #85 North Sewalls Point Rd.

PROJECT ADDRESS: same ; LEGAL DESCRIPTION: Part of Lot 2, S35, T37, R41E
LOT BLK SUB

GENERAL CONTRACTOR: Scott Holmes , LIC/CERT NO. CG-0055859

ADDRESS: 3601 E. Ocean Blvd, Sewalls Point Fla. , TEL. 2204780 FAX 2254744

ARCHITECT OR ENGINEER: John Olson P.E. , LIC/REG NO. PE0023896

ADDRESS: 1366 S.W. Jasmine Trace, Palm City , TEL. 888757 ; FAX

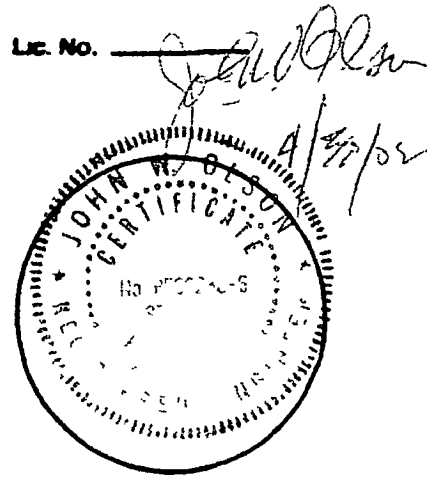
PERMIT NO: 5143 , DATE OF ISSUE: OCT 31-00 ; DATE OF THIS STATEMENT: 4-30-02

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

- I am the Architect or Engineer who sealed and signed the plans for the subject structure, or
 I am the substitute Architect or Engineer, having been accepted by the Building Official, for the Architect or Engineer who sealed and signed the plans for the subject structure or
 I am the threshold or special inspector used in accordance with this Code.
- To the best of my knowledge, belief and professional judgment, the structural and envelope components of the structure are in compliance with the approved plans and other approved permit documents
- To the best of my knowledge, belief and professional judgment, the approved permit plans represent the as-built condition of the structural and envelope components of the structure

Executed at Stuart Fla , this 30 day of Apr , 02

NAME: JOHN W. OLSON P.E. , SIGNATURE: [Signature] ; LIC. No. [Signature]





PO BOX 3062 STUART, FL 34995
OFFICE 772-286-2924 MOBILE 772-201-8163 FAX 772-286-1417
floridaexotic@prodigy.net

April 29, 2002

Scott J Holmes Building, Inc
PO Box 2804
Jensen Beach, FL 34956
772-225-4744-fax

To Whom it may concern

All irrigation heads have low volume nozzles installed and there is a rain sensor device on the system. If you have any questions or comments please do not hesitate to contact us. Thanks you for your attention to this matter.

Sincerely,
Robert Grebe
Irrigation Division Manager

11943

BUG MAN PEST MANAGEMENT, INC
1401 SW BILTMORE STREET
PORT ST LUCIE, FLORIDA 34983
561-879-2740 FAX# 340-4316

Certification of Pre-Construction Soil Treatment

Permit# 200005143 Lot/Block/Section 1/1
Builder Scott J. Homes Job Address 85 N Sewall's Point Rd.
Stuart (Sewall's Point)

We the undersigned hereby certify that we have pretreated the above described construction for subterranean termites in accordance with the standards of the National Pest Control Association

THE AREA TREATED WAS

FOOTING /
SLAB /
OTHER perimeter final spray

Approximate area treated was 268 APK ^{linear} square feet

The chemical used was thwait 5

Percent of solution 0.25%

Total gallons used 107 APK

Date of Treatment 7/22/02

BY [Signature]
Pest Control Contractor

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 86.0

The higher the score, the more efficient the home.

MR & MRS GIFFORD, Lot , Sub , Plat , SEWALL'S POINT, FL,

1 New construction or existing	New	___	12 Cooling systems	
2 Single family or multi-family	Single family	___	a Central Unit	Cap 60.0 kBtu/hr ___ SEER 12.00 ___
3 Number of units if multi-family	1	___	b Central Unit	Cap 60.0 kBtu/hr ___ SEER 12.00 ___
4 Number of Bedrooms	5	___	c 3 Others	Cap 60.0 kBtu/hr ___
5 Is this a worst case?	No	___	13 Heating systems	
6 Conditioned floor area (ft ²)	7263 ft ²	___	a Electric Strip	Cap 60.0 kBtu/hr ___ COP 1.00 ___
7 Glass area & type		___	b Electric Strip	Cap 60.0 kBtu/hr ___ COP 1.00 ___
a Clear - single pane	0.0 ft ²	___	c 3 Others	Cap 60.0 kBtu/hr ___
b Clear - double pane	0.0 ft ²	___	14 Hot water systems	
c Tint/other SC/SHGC - single pane	1901.2 ft ²	___	a Electric Resistance	Cap 80.0 kBtu/hr ___ EF 0.97 ___
d Tint/other SC/SHGC - double pane	0.0 ft ²	___	b N/A	
8 Floor types		___	c 7 Others	Cap 117.5 kBtu/hr ___ (HR-Heat recovery, Solar DHP-Dedicated heat pump)
a Slab-On-Grade Edge Insulation	R=0.0, 409.0(p) ft	___	15 HVAC credits	MZ-C CF, MZ-H ___ (CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, PT-Programmable Thermostat, RB-Attic radiant barrier, MZ-C-Multizone cooling, MZ-H-Multizone heating)
b Raised Wood, Stern Wall	R=19.0, 2825.0 ft ²	___		
c N/A		___		
9 Wall types		___		
a Frame, Wood, Exterior	R=19.0, 2066.0 ft ²	___		
b Frame, Wood, Adjacent	R=11.0, 185.0 ft ²	___		
c Concrete, Int Insul, Exterior	R=5.0, 4095.0 ft ²	___		
d N/A		___		
e N/A		___		
10 Ceiling types		___		
a Under Attic	R=19.0, 6353.0 ft ²	___		
b N/A		___		
c N/A		___		
11 Ducts		___		
a Sup Unc Ret Con. AH Interior	Sup R=6.5, 250.0 ft ²	___		
b 4 Others	450.0 ft	___		

I certify that this home has complied with the Florida Energy Efficiency Code For Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features.

Builder Signature [Signature] Date 7-9-02

Address of New Home 85 NORTH Sewall's Point RD City/FL Zip STUART FL 34996



**NOTE The home's estimated energy performance score is only available through the FLA/RES computer program. This is not a Building Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStar™ designation), your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at 407/638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Efficiency Code For Building Construction contact the Department of Community Affairs at 850/487-1824.*

**FLORIDA ENERGY EFFICIENCY CODE
FOR BUILDING CONSTRUCTION**

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name	THE GIFFORD RESIDENCE	Builder	CAMPORA CONSTR
Address	Lot , Sub , Plat	Permitting Office	
City, State	SEWALL'S POINT, FL	Permit Number	
Owner	MR & MRS GIFFORD	Jurisdiction Number	
Climate Zone	South		

1 New construction or existing	New	___	12 Cooling systems	
2 Single family or multi-family	Single family	___	a Central Unit	Cap 60 0 kBtu/hr ___ SEER 12 00 ___
3 Number of units, if multi-family	1	___	b Central Unit	Cap 60 0 kBtu/hr ___ SEER 12 00 ___
4 Number of Bedrooms	5	___	c 3 Others	Cap 60 0 kBtu/hr ___
5 Is this a worst case?	No	___	13 Heating systems	
6 Conditioned floor area (ft²)	7263 ft²	___	a Electric Strip	Cap 60 0 kBtu/hr ___ COP 1 00 ___
7 Glass area & type		___	b Electric Strip	Cap 60 0 kBtu/hr ___ COP 1 00 ___
a Clear - single pane	0 0 ft²	___	c 3 Others	Cap 60 0 kBtu/hr ___
b Clear - double pane	0 0 ft²	___	14 Hot water systems	
c Tint/other SC/SHGC - single pane	1901 2 ft²	___	a Electric Resistance	Cap 80 0 kBtu/hr ___ EF 0 97 ___
d Tint/other SC/SHGC - double pane	0 0 ft²	___	b N/A	___
8 Floor types		___	c 7 Others	Cap 117 5 kBtu/hr ___ (HR-Heat recovery, Solar DHP-Dedicated heat pump)
a Slab-On-Grade Edge Insulation	R=0 0, 409 0(p) ft	___	15 HVAC credits	MZ-C, CF, MZ-H ___
b Raised Wood, Stem Wall	R=19 0, 2825 0ft²	___	(CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, PT-Programmable Thermostat, RB-Attic radiant barrier, MZ-C-Multizone cooling, MZ-H-Multizone heating)	
c N/A		___		
9 Wall types		___		
a Frame, Wood, Exterior	R=19 0, 2066 0 ft²	___		
b Frame, Wood, Adjacent	R=11 0 185 0 ft²	___		
c Concrete, Int Insul, Exterior	R=5 0 4095 0 ft²	___		
d N/A		___		
e N/A		___		
10 Ceiling types		___		
a Under Attic	R=19 0, 6353 0 ft²	___		
b N/A		___		
c N/A		___		
11 Ducts		___		
a Sup Unc Ret Con. AH Interior	Sup R=6 5, 250 0 ft²	___		
b 4 Others	450 0 ft	___		

Glass/Floor Area 0 26	Total as-built points 77914 00	PASS
	Total base points 93515 00	

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

PREPARED BY: JOSE

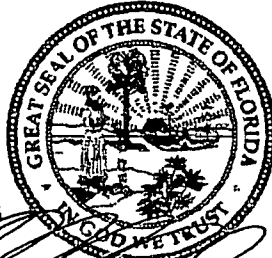
DATE: 4-11-2000

I hereby certify that this building, as designed, 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: 6/30/00

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS Lot , Sub , Plat , SEWALL'S POINT, FL, PERMIT #

BASE				AS-BUILT							
GLASS TYPES				Type/SC	Ornt	Overhang		Area X	SPM X	SOF =	Points
18	X	Conditioned	X			Len	Hgt				
Floor Area											
18	7263 0	53 20	69554 0	Single, Tint	N	8 0	1 0	36 0	27 68	0 61	603 8
				Single, Tint	N	8 0	1 0	81 6	27 68	0 61	1368 7
				Single, Tint	N	1 0	11 0	19 5	27 68	0 99	536 7
				Single, Tint	N	1 0	11 0	26 0	27 68	0 99	715 6
				Single, Tint	N	5 0	1 0	18 0	27 68	0 61	301 9
				Single, Tint	N	1 0	1 5	4 0	27 68	0 79	87 0
				Single, Tint	N	8 0	1 0	30 0	27 68	0 61	503 2
				Single, Tint	N	1 0	1 0	16 0	27 68	0 72	319 1
				Single, Tint	N	1 0	1 0	16 0	27 68	0 72	319 1
				Single, Tint	N	1 0	1 0	18 0	27 68	0 72	359 0
				Single, Tint	N	1 0	1 0	12 0	27 68	0 72	239 3
				Single, Tint	E	8 0	0 5	20 4	61 31	0 36	452 4
				Single, Tint	E	1 0	1 5	24 0	61 31	0 65	952 2
				Single, Tint	E	1 0	1 5	24 0	61 31	0 65	952 2
				Single, Tint	E	1 0	1 5	18 0	61 31	0 65	714 2
				Single, Tint	E	9 0	1 5	56 0	61 31	0 36	1242 0
				Single, Tint	E	7 0	0 5	42 0	61 31	0 36	931 5
				Single, Tint	E	7 0	0 5	48 0	61 31	0 36	1064 6
				Single, Tint	E	1 0	1 0	18 0	61 31	0 53	588 1
				Single, Tint	E	1 0	1 0	24 0	61 31	0 53	784 1
				Single, Tint	E	17 0	0 5	20 4	61 31	0 36	452 4
				Single, Tint	E	17 0	0 5	15 0	61 31	0 36	332 7
				Single, Tint	E	1 0	1 0	24 0	61 31	0 53	784 1
				Single, Tint	E	1 0	1 0	25 0	61 31	0 53	816 8
				Single, Tint	E	1 0	1 0	20 0	61 31	0 53	653 4
				Single, Tint	E	0 5	1 5	15 0	61 31	0 86	788 1
				Single, Tint	E	1 0	2 0	8 0	61 31	0 74	383 0
				Single, Tint	E	1 0	1 5	77 0	61 31	0 65	3055 0
				Single, Tint	E	1 0	1 5	19 3	61 31	0 65	763 7
				Single, Tint	E	2 0	1 0	4 0	61 31	0 40	98 2
				Single, Tint	E	1 0	1 0	16 0	61 31	0 53	522 7
				Single, Tint	E	1 0	1 0	15 0	61 31	0 53	490 1
				Single, Tint	E	1 0	1 0	15 0	61 31	0 53	490 1
				Single, Tint	W	8 0	0 5	108 8	54 85	0 40	2413 5
				Single, Tint	W	8 0	0 5	40 8	54 85	0 40	905 1
				Single, Tint	W	1 0	10 0	90 0	54 85	1 00	4912 8
				Single, Tint	W	1 0	10 0	108 0	54 85	1 00	5895 4
				Single, Tint	W	8 0	0 5	81 6	54 85	0 40	1810 1
				Single, Tint	W	17 0	0 5	108 8	54 85	0 40	2413 5
				Single, Tint	W	17 0	0 5	20 4	54 85	0 40	452 5
				Single, Tint	W	17 0	0 5	15 0	54 85	0 40	332 7
				Single, Tint	W	8 0	1 0	16 0	54 85	0 40	354 9
				Single, Tint	W	8 0	1 0	15 0	54 85	0 40	332 7
				Single, Tint	W	8 0	1 0	20 4	54 85	0 40	452 5
				Single, Tint	W	8 0	1 0	81 6	54 85	0 40	1810 1

FORM 600A-97

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS Lot , Sub , Plat , SEWALL'S POINT, FL, PERMIT #

BASE				AS-BUILT			
WALL TYPES	Area	X BSPM	= Points	Type	R-Value	Area	X SPM = Points
Adajcent	185 0	1 0	185 0	Frame, Wood, Exteror	19 0	2066 0	1 60 3305 6
Exterior	6161 0	2 70	16634 7	Frame, Wood, Adjacent	11 0	185 0	1 00 185 0
				Concrete, Int Insul, Exteror	5 0	4095 0	2 00 8190 0
Base Total	6346 0		16819 7	As-Built Total		6346 0	11680 6
DOOR TYPES	Area	X BSPM	= Points	Type		Area	X SPM = Points
Adjacent	0 0	0 00	0 0	Exterior Wood		40 8	9 40 383 5
Exterior	40 8	6 40	261 1				
Base Total	40 8		261 1	As-Built Total		40 8	383 5
CEILING TYPES	Area	X BSPM	= Points	Type	R-Value	Area	X SPM = Points
Under Attic	6353 0	0 80	5082 4	Under Attic	19 0	6353 0	1 50 9529 5
Base Total	6353 0		5082 4	As-Built Total		6353 0	9529 5
FLOOR TYPES	Area	X BSPM	= Points	Type	R-Value	Area	X SPM = Points
Slab	409 0(p)	-20 0	-8180 0	Slab-On-Grade Edge Insulation	0 0	409 0(p)	-20 00 -8180 0
Raised	2825 0	-2 16	-6102 0	Raised Wood, Stem Wall	19 0	2825 0	-0 40 -1130 0
Base Total			-14282 0	As-Built Total			-9310 0
INFILTRATION	Area	X BSPM	= Points			Area	X SPM = Points
	7263 0	18 79	136471 8			7263 0	18 79 136471 8
Summer Base Points: 213906.9				Summer As-Built Points: 203872 6			
Total Summer Points	X System Multiplier	=	Cooling Points	Total Component	X Cap Ratio	X Duct Multiplier	X System Multiplier X Credit Multiplier = Cooling Points
				203872 6	0 100	1 019	0 284 0 902 5329 5
				203872 6	0 333	1 019	0 284 0 902 17765 1
				203872 6	0 133	1 019	0 284 0 902 7106 0
				203872 6	0 100	1 019	0 284 0 902 5329 5
				203872 6	0 333	1 019	0 284 0 902 17765 1
213906.9	0 3560		76150.9	203872.6	1.00	1 019	0.284 0.902 53295.2

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS Lot , Sub , Plat , SEWALL'S POINT, FL,	PERMIT #
--	----------

BASE				AS-BUILT						
GLASS TYPES										
18 X Conditioned X BWPM = Points Floor Area				Type/SC	Ornt	Overhang Len Hgt	Area X	WPM X	WOF =	Points
18	7263 0	2 02	2646 6	Single, Tint	N	8 0 1 0	36 0	4 98	0 95	170 0
				Single, Tint	N	8 0 1 0	81 6	4 98	0 95	385 4
				Single, Tint	N	1 0 11 0	19 5	4 98	1 00	97 0
				Single, Tint	N	1 0 11 0	26 0	4 98	1 00	129 3
				Single, Tint	N	5 0 1 0	18 0	4 98	0 95	85 0
				Single, Tint	N	1 0 1 5	4 0	4 98	0 97	19 4
				Single, Tint	N	8 0 1 0	30 0	4 98	0 95	141 7
				Single, Tint	N	1 0 1 0	16 0	4 98	0 97	77 0
				Single, Tint	N	1 0 1 0	16 0	4 98	0 97	77 0
				Single, Tint	N	1 0 1 0	18 0	4 98	0 97	86 6
				Single, Tint	N	1 0 1 0	12 0	4 98	0 97	57 7
				Single, Tint	E	8 0 0 5	20 4	3 99	1 29	105 2
				Single, Tint	E	1 0 1 5	24 0	3 99	1 07	102 3
				Single, Tint	E	1 0 1 5	24 0	3 99	1 07	102 3
				Single, Tint	E	1 0 1 5	18 0	3 99	1 07	76 7
				Single, Tint	E	9 0 1 5	56 0	3 99	1 29	288 7
				Single, Tint	E	7 0 0 5	42 0	3 99	1 29	216 5
				Single, Tint	E	7 0 0 5	48 0	3 99	1 29	247 4
				Single, Tint	E	1 0 1 0	18 0	3 99	1 11	79 8
				Single, Tint	E	1 0 1 0	24 0	3 99	1 11	106 5
				Single, Tint	E	17 0 0 5	20 4	3 99	1 29	105 2
				Single, Tint	E	17 0 0 5	15 0	3 99	1 29	77 3
				Single, Tint	E	1 0 1 0	24 0	3 99	1 11	106 5
				Single, Tint	E	1 0 1 0	25 0	3 99	1 11	110 9
				Single, Tint	E	1 0 1 0	20 0	3 99	1 11	88 7
				Single, Tint	E	0 5 1 5	15 0	3 99	1 03	61 7
				Single, Tint	E	1 0 2 0	8 0	3 99	1 05	33 5
				Single, Tint	E	1 0 1 5	77 0	3 99	1 07	328 3
				Single, Tint	E	1 0 1 5	19 3	3 99	1 07	82 1
				Single, Tint	E	2 0 1 0	4 0	3 99	1 23	19 6
				Single, Tint	E	1 0 1 0	16 0	3 99	1 11	71 0
				Single, Tint	E	1 0 1 0	15 0	3 99	1 11	66 5
				Single, Tint	E	1 0 1 0	15 0	3 99	1 11	66 5
				Single, Tint	W	8 0 0 5	108 8	4 60	1 03	516 1
				Single, Tint	W	8 0 0 5	40 8	4 60	1 03	193 5
				Single, Tint	W	1 0 10 0	90 0	4 60	1 00	413 2
				Single, Tint	W	1 0 10 0	108 0	4 60	1 00	495 9
				Single, Tint	W	8 0 0 5	81 6	4 60	1 03	387 1
				Single, Tint	W	17 0 0 5	108 8	4 60	1 03	516 1
				Single, Tint	W	17 0 0 5	20 4	4 60	1 03	96 8
				Single, Tint	W	17 0 0 5	15 0	4 60	1 03	71 2
				Single, Tint	W	8 0 1 0	16 0	4 60	1 03	75 9
				Single, Tint	W	8 0 1 0	15 0	4 60	1 03	71 2
				Single, Tint	W	8 0 1 0	20 4	4 60	1 03	96 8
				Single, Tint	W	8 0 1 0	20 4	4 60	1 03	96 8

FORM 600A-97

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS Lot , Sub , Plat , SEWALL'S POINT, FL, PERMIT #

BASE				AS-BUILT			
WALL TYPES	Area X BWPM = Points			Type	R-Value	Area X WPM = Points	
Adajcent	185 0	0 5	92 5	Frame, Wood, Extenor	19 0	2066 0	0 30 619 8
Extenor	6161 0	0 60	3696 6	Frame, Wood, Adjacent	11 0	185 0	0 50 92 5
				Concrete, Int Insul, Extenor	5 0	4095 0	0 90 3685 5
Base Total	6346 0		3789 1	As-Built Total		6346 0	4397 8
DOOR TYPES	Area X BWPM = Points			Type		Area X WPM = Points	
Adjacent	0 0	0 00	0 0	Extenor Wood		40 8	2 80 114 2
Extenor	40 8	1 80	73 4				
Base Total	40 8		73 4	As-Built Total		40 8	114 2
CEILING TYPES	Area X BWPM = Points			Type	R-Value	Area X WPM = Points	
Under Attic	6353 0	0 10	635 3	Under Attic	19 0	6353 0	0 30 1905 9
Base Total	6353 0		635 3	As-Built Total		6353 0	1905 9
FLOOR TYPES	Area X BWPM = Points			Type	R-Value	Area X WPM = Points	
Slab	409 0(p)	-2 1	-858 9	Slab-On-Grade Edge Insulation	0 0	409 0(p)	-2 10 -858 9
Raised	2825 0	-0 28	-791 0	Raised Wood, Stem Wall	19 0	2825 0	-0 10 -282 5
Base Total			-1649 9	As-Built Total			-1141 4
INFILTRATION	Area X BWPM = Points					Area X WPM = Points	
	7263 0	-0 06	-435 8			7263 0	-0 06 -435 8
Winter Base Points:	5058.8			Winter As-Built Points:	13792.3		
Total Winter X System = Heating Points	X Multiplier	=	Heating Points	Total Component	X Cap Ratio	X Duct Multiplier	X System Multiplier X Credit Multiplier = Heating Points
				13792 3	0 100	1 059	1 000 0 950 1387 2
				13792 3	0 333	1 059	1 000 0 950 4624 1
				13792 3	0 133	1 059	1 000 0 950 1849 6
				13792 3	0 100	1 059	1 000 0 950 1387 2
				13792 3	0 333	1 059	1 000 0 950 4624 1
5058.8	1.0900		5514.1	13792 3	1.00	1 059	1.000 0.950 13872.3

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS Lot , Sub , Plat , SEWALL'S POINT, FL, PERMIT #

BASE				AS-BUILT							
WATER HEATING				Tank	EF	Number of	X	Tank X	Multiplier X	Credit = Total	
Number of	X	Multiplier	= Total	Volume		Bedrooms		Ratio	Multiplier	Multiplier	
Bedrooms											
5		2370 00	11850 0	7 5	0 97	5		0 04	2149 20	1 00	408 1
				7 5	0 97	5		0 04	2149 20	1 00	408 1
				7 5	0 97	5		0 04	2149 20	1 00	408 1
				50 0	0 97	5		0 25	2149 20	1 00	2720 5
				7 5	0 97	5		0 04	2149 20	1 00	408 1
				30 0	0 97	5		0 15	2149 20	1 00	1632 3
				80 0	0 97	5		0 41	2149 20	1 00	4352 8
				7 5	0 97	5		0 04	2149 20	1 00	408 1
As-Built Total										10746 0	

CODE COMPLIANCE STATUS													
BASE					AS-BUILT								
Cooling	+	Heating	+	Hot Water	=	Total	Cooling	+	Heating	+	Hot Water	=	Total
Points		Points		Points		Points	Points		Points		Points		Points
76150.9		5514.1		11850.0		93515.0	53295.2		13872 3		10746.0		77913.5

PASS



Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS Lot , Sub , Plat , SEWALL'S POINT, FL,	PERMIT #
--	----------

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	606 1 ABC 1 1	Maximum 3 cfm/sq ft window area, 5 cfm/sq ft door area	
Exterior & Adjacent Walls	606 1 ABC 1 2 1	Caulk, gasket, weatherstripping or seal between windows/doors & frames, surrounding wall, foundation & wall sole or sill plate, joints between exterior wall panels at corners, utility penetrations, between wall panels & top/bottom plates, between walls and floor EXCEPTION Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate	
Floors	606 1 ABC 1 2 2	Penetrations/openings >1/8" sealed unless backed by truss or joint members EXCEPTION Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams	
Ceilings	606 1 ABC 1 2 3	Between walls & ceilings, penetrations of ceiling plane of top floor, around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier, gaps in gyp board & top plate, attic access EXCEPTION Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams	
Recessed Lighting Fixtures	606 1 ABC 1 2 4	Type IC rated with no penetrations, sealed, or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation, or Type IC rated with < 2.0 cfm from conditioned space, tested	
Multi-story Houses	606 1 ABC 1 2 5	Air barrier on perimeter of floor cavity between floors	
Additional Infiltration reqts	606 1 ABC 1 3	Exhaust fans vented to outdoors dampers, combustion space heaters comply with NFPA, have combustion air	

6A-22 OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	612 1	Comply with efficiency requirements in Table 6-12 Switch or clearly marked circuit breaker (electrical) or cutoff (gas) must be provided External or built-in heat trap required	
Swimming Pools & Spas	612 1	Spas & heated pools must have covers (except solar heated) Non-commercial pools must have a pump timer Gas spa & pool heaters must have a minimum thermal efficiency of 78%	
Shower heads	612 1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG	
Air Distribution Systems	610 1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached sealed, insulated, and installed in accordance with the criteria of Section 610 Ducts in unconditioned attics R-6 min insulation	
HVAC Controls	607 1	Separate readily accessible manual or automatic thermostat for each system	
Insulation	604 1, 602 1	Ceilings-Min R-19 Common walls-Frame R-11 or CBS R-3 both sides Common ceiling & floors R-11	

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ~~Mon~~ ~~Wed~~ ~~Fri~~ 11/13, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4760	Galfond	final-RE ROOF	PASSED	- QUALIFIED AFFID. ROW 11/8
⑦	8 S. SEWALL'S POINT RD. WILFRAM CONST.	ROW WILSON 546-0300	✓	(TOWN FILE TO INSP.)
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 13790	Gifford	tree-trim	PASSED	CONST. TRAILER (8'x26')
N ④	85 N. S.P. Rd. Holmes	AFFILIATES OF TPL ACTIVITY.	✓	INSTRUCTED ON SITE w/ PATROL
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4943	Botwinick	frame all	NOT	- RESCHEDULE 11/15 AM
⑥	27 Emerita 1st Fl	(RESCHEDULED FROM 11/10)	READY	(100 FEE)
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4813	FOLLWEILER	METER FINAL for POOL & A/C	PASSED	COPY OF LTR. AGMT TO G.C.
①	11 N.E. Logging Ariel Homes	(PER LTR. AGMT.)	✓	(SHERI 11/13 9:40) FPL-225-4208
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4904	MIRANDA	WIRE LATH	PASSED	
②	34 CASTLE HILL O/B	(PL) PORCHES/ PIL-225-4208	✓	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 5137	Kearney	frame no	PASSED	
N ⑤	12 N. Fiver Rd	(TRELLIS)	✓	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4877	Loyola/Osborne	partial ✓	PASSED	
N ③	20 Castle Hill Buford	latch REAR BM/ PORCHES/2ND FL-PAT	✓	

OTHER _____

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection ~~Mon~~ Wed Fri 11-27, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ N 4813 4A	Follweiler 11 Lofting Way ARK HOMES	final c.o.	PASSED ⊗ PTL. AS NEW	- RESP. STORM SHUTTERS, - SELF CLOSING DR. @ GARAGE - FIRE SEPARATION GAR. CLG. (FM)
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ N 4974 4B	Follweiler 11 LOFTING WAY FLAMINGO POOLS	pool final	PASSED ⊗ ⊗	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ N 5760 4C	Follweiler 11 LOFTING WAY COASTAL ALUM.	pool enc. final	PASSED ⊗ ⊗	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ = 5136 2	Geller 10 Palmetto Mahaffey POOLS	pool steel & bond	PASSED ⊗ (AS NOTED)	- FORMBOARD SURVEY ↓ NOT RCVD! REB PROX TO POOL,
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ N 5092 3	Aune 6 Michael P.d Masterpiece	final shed	PASSED ⊗ ⊗	- FINAL SURVEY RCVD 11/22 - FIELD COPY TO SITE ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ = 7112 1	Duvall 6 P. V. 122 Pacific	roof final	PASSED ⊗ ⊗	9:30 ✓ OWNER DISPUTE W/CONTR RESOLVED (NO STRUCT. ISSUES)
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
5143 X	Gifford at N.S.P.Rd	site observation	X	Not a Westvir line CANCELLED (NEED 11/22) WILL HOLD ESTAB. GRAVE.

OTHER _____

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-11, 2000; Page 1 of 1.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
5161	Brennan	stem wall	PASSED	
①	111 H Sewall Way Hutchins		☞	
5097	Kilbride	pool final	CANCELLED	NO RECORD OF DECK INSP.
X	4 Lartana Lane		ELIA	- NO FINAL SURVEY
	Twin Pools (ISSUED 9/25)	692-4207 (HOLLY CLINT)		- NO VOA SAFETY NET SUBMITTALS
4255	Lagana	concrete	PASSED	NON-STRUCT.
③	23 S S.P. Rd. owner	dust cover	☞	- SOIL TREATMENT 12/8
5138	Fibellino	rough pl.	PASSED	PLUMBING. PLUMB RECD 12/10
②	18 Island Rd Wilson		☞	- FIELD COPY TO SITE @ INSP.
5143	Gjerd	stem wall	PASSED	- UNKINDED TREE ROOT
⑥	US ASP Rd Holmes		☞	STRUCTURE FOR REV. PLBL (CONTR. LTR: INCK. TO 15.5)
T/R	BROWN	FIELD VERIF.	HOLD	(ROLL OVER FROM 12/8 -
④	7 FIELDWAY DR. O/B	PENDING POOL DECK REV. SUBM.	☞	REG. REVIEW W/POOL SUB.) (VERIFY STRUCT. TREAT)
T/R	FLOPPAN	FIELD VERIF.	HOLD	
⑤	19 FIELDWAY DR. MONTE'S TREE SERV.		☞	(VERIFY STRUCT. TREAT/PACKAGE)
OTHER	7 KINGSTON CT - SITE (USP) re: POOL ENCL. APPL.			

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed **12/15**, 2000; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ N (9)	5117 BECKHAM 3 OAK HILL POOLS BY GREGG	PATIO/DECK FORM.	Passed 12/15	COMP. TEST. ROAD 12/14/00
✓ N (10)	4904 MIRANDA 34 CASTLE HILL WAY O/B	D/W	Passed 12/15	
✓ N (11)	5142 Gifford US N.S.P. Rd. Holmes	stem wall Garage only	Passed 12/15	
✓ N (12)	4717 ZERRO 124 N.S.P. Rd. Luford	C.O. INST. (INCL. STORM SHUTTER PN 5186)	PASSED 12/15	- OK TO RELEASE C.O. 12/18/00 UPON PUNCH LIST VERIFICATION (10-9)
✓ (3)	3168 Schuck 8 Palm Pk. A & W	roof FINISH (3 PD RESCHED)	Passed 12/15	
(7A)	0388 RAO 30 CASTLE HILL WAY (LOT 32) AR MARTIN	VERIFY MARKING FOR T/12. (BLDG PN 5192)	Passed 12/15	
(13)	5075 VASQUEZ 82 S. SEWALL'S POINT RD. GROZA BLDGS.	1. T/A & MTL. 2. PTL. ELECT. RGH (MEDIA ROOM)	Passed 12/15	

OTHER _____

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-22, 2000; Page 1 of .

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ S 5161	Brennan 111 H. Sewall Way Gloy Hutchins	rough pl. & slab	Passad	12/22 need compact/pave - for walk.
④				
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
S 5075	Vasquez 82 S.S.P. Rd. Groza	bldr. wants to discuss something with you		201-7233-1000 call John Groza meeting only 12/22
④				
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ S 4978	RIMER 29 S. RIVER RD O/B - 485-3082	GROUND ROUGH PL+AC + ELVT.	Passad	12/22
②				
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ M 5143	Gifford 8 N.S.P. Rd. cote Holmes	rough pl.	Passad	12/22 No El. work found No AC chase
③				
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS

OTHER _____

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Jan 3rd, 2000; Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
4826	RIMER	DEMOLITION *	PASSED	* Verification to close permit at
5	(2) 29 S. RIVER RD. LUDLUM	(FINAL)	✓	MC-H.P. final (septic) to be done
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
5136	Giller	re-inspect	PASSED	LATE INSPECTION REQUESTED
5	(5) 10 Palmetto Mahaffey	pool deck (SOIL STERILIZATION) ✓	✓	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
5143	Gifford	job for		9:00 NOT ON JOB - REINSPECT
(1)	65 N. S.P. Rd. Holmes	garage telewater shaft	Final	1/3
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
5075	VASQUEZ	PLUMBING RGH.	PASSED	TRUSS FRAMING - PERM
5	(4) 82 S. SEWALL'S POINT RD. GROZA	(REINSPECT - NO FEE) PTL. FRAMING - MEDIA	✓ FAILED	ALL OK EXCEPT KITCHEN REV. DEP. OR MOD. PERM.
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
T/R	PARMELEE	FIELD VERIFICATION	PASSED	PROHIBITED SPECIES -
5	(3) 21 S. RIDGEVIEW RD MONTES TREE SERVICE		✓	NO FEE FOR REMOVAL.
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
4877	LOYOLA/OSBORNE	DRYWALL SCREW		CALLED W 1/3 10:45.
(6)	20 CASTLE HILL WAY BUFORD	(PPC - 1 st PL.) + 2 nd PL	Passed	1/3
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
5075	VASQUEZ	RF. SHEATHING	PASSED	
(4A)	82 S. SEWALLS POINT RD. GROZA	(EAST BR WING)	✓	

OTHER _____

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1-15-01

Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ S 5220	Parmelee 21 S. Ridgeview	sheathing in-progress	Passed	Ji 1/15
ⓐ	Capps & Huff	q=		
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ S 5013	Dennis 16 Ridgeland	2nd story beam	2 nd fl partial	Ji 1/15
ⓑ	FL. FINEST			
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ N 4895	SEELY 37 NE LOFTING WAY	D/W INSP (PTC) (PHASE II)		LATE P.M.
ⓐ	GRIBBEN			
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ S 5214	Rohlhoff 20 Riverview	sheathing	Partial	re inspect (1/12 CANCEL - RAIN)
ⓐ	Roof Tile Spec.	12 th floor off w/ not yet		staked.
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ S 5219	Ameler 3 Simara St	sheathing	Passed	Ji 1/15
ⓐ	Pacific	10 th fl. 12 th fl in progress		
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ S 5152	Boning 5 St Lucie Crt	sewall steel	Passed	No Drg 4x4's + Strifups 24" OC
ⓐ				
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ N 5143	Gifford 25 N.S.P. Rd.	footing	Passed	Ji 1/15 relo 11:00
ⓐ				

OTHER _____

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~Thu~~ ~~Mon~~ ~~Wed~~ 2, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5013		roof + floor truss	Passed	Drgs ??
①	16 Ridgeland FL Finest	engineering		INSPECTOR <i>Ji 3/2</i>
5192	Rao	Tie beam	Passed	
①	35 Carle Hill w AR Hart-			INSPECTOR <i>Ji 3/2</i>
5147	Giffard	Roof Tie beam	Passed	(Partial)
②	85 N. Sewall Pt. Scott Homes	+ Columns		INSPECTOR <i>Ji 3/2</i>
5254	Ingram	Temp. El.	Passed	Call PPL
③	101 N. Sewall Pt. Al Phase El.			INSPECTOR <i>Ji 3/2</i>
T/R	Nouqil	Tree rem.		
?	6 Ridgeview			INSPECTOR
5185	JONES	form insp.	Passed	
⑥	14 HERONS NEST O/B	(concrete)		INSPECTOR <i>Ji 3/2</i>
5152	BONING g /	SEAWALL -	Passed	
⑦	5 ST LUCIE CT. TROPIC MARINE	FINAL		Hilcraft INSPECTOR <i>Ji 3/2</i>

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~THU~~ ~~MARCH~~ 16, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5284	ST. LUKE BLDG. CONDO	SHEATHING	Passed	partial west side
(14)	3601 E. OCEAN BLVD. A+W RFG. (283-8100)			INSPECTOR 3/16
✓ 5143	GIFFORD	SHEATHING	Passed	
N (10)	85 N. S. BOWEN BLVD. PIONEER SCOTT HOLMES	Garage (Partial)		INSPECTOR 3/16
✓ 5234	MCCARTNEY	WALL STL.	Passed	
S (3)	45 W. HIGH POINT WILSON BLDGS. (288-2000)			INSPECTOR 3/16
✓ 5203	McKeige	REBAR + CAP	Passed	*BEFORE 10:30 as*
S (1)	31 W. HIGH POINT BK MARINE			they will be pouring INSPECTOR Concrete
✓ 5204	COOPER	"	Passed	partial cap
S (2)	33 W HIGH POINT B.K MARINE			INSPECTOR 3/16
✓ 5282	ALLMAN	DRY IN	Passed	
S (8)	45 RIO VISTA A+W	METAL		INSPECTOR 3/16
✓ 4877	LOYOLA/OSBORNE	METER FINAL		SERVICE AGMT. LTR. ON SITE
N (9)	20 CASTLE HILL WAY BVFORD CONST (ANDY-201-9153)	(EQUIP. TEST) AC		223 4208 FPL 10 ⁴⁵ INSPECTOR 3/16

OTHER } PN 4871 - HANSEN/32 N SPR/JARSKI FENCE - VERIFY FENCING
 { SITE VERIF. - HANSEN/32 N. SPR/BLUEWATER MARINE/ DOCK W/BOATLIFT } AWAITING PERM ISSUANCE

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Monday Tuesday Wednesday Thursday Friday Saturday Sunday, 2001; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5143	GIFFORD	TYPE BM.	Passed	
✓ (9)	85 N. SPR HOLMES			INSPECTOR <i>[Signature]</i> 3/21
✓ 5284	SPURLOCK BLDG. CONDO 360 E. OCEAN K&W REG.	SHEATHING (IN PROGRESS)	/	DUPLICATE REQUEST SEE PAGE 1. INSPECTOR
✓ 4895	SEELY	ENTRY GATE	Passed	
✓ (8)	37 W.E. LOFTING WAY GRUBBEN CONST.	TIE BM/COL.		INSPECTOR <i>[Signature]</i> 3/21
✓ 5292	PYNE	SHEATHING	Passed	PLS. CALL ROB
✓ (3)	26 SIMARA PACIFIC REG (ROB 263-016)		(Partial East slope)	INSPECTOR <i>[Signature]</i> 3/21
✓ 5139	Rubelino	T-Tag + Prolog	Passed	
✓ (2)	18 Island Rd. Pacific Roof			INSPECTOR <i>[Signature]</i> 3/21
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

Building Department - Inspection Log

Date of Inspection: ~~Monday~~ Wed ~~April 23~~, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5299	O'BRIEN 36 E. HIGH POINT A&W RFG. 283-8100	SHEATHING b ^{oo} not ready 11 ² O.K.	Passed	(3/30 INSP. - CANCELLED) INSPECTOR J & 1/2
✓ 5161	BRENNAN 111 HENRY SEWALL WAY GLEN HUTCHINS	RGT A/C PLMBG ELECT.	Passed need foaming (with see wedy)	INSPECTOR J & 1/2
✓ 5018	LOYOLA/OSBORNE 20 CASTLE HILL WAY HARBOR BAY POOLS	POOL EQUIP.	Passed	INSPECTOR J & 1/2
✓ 5311	LOYOLA/OSBORNE 20 CASTLE HILL WAY FRITZ IRRIGATION	IRRIG. - FINAL not ready → 12 zones (3x4) City code	Wednesd	(MPN 4877 - BUFORD CONST) INSPECTOR J & 1/2
✓ 5286	SCHULTZ 64 S. SEWALL PT. RD. ADVANTAGE POOLS	GROUND & STL.	Passed	SURVEY RCVD 3/30 INSPECTOR J & 1/2
✓ 5143	GIFFORD 85 D. SEWALL'S POINT RD SCOTT J. HOLMES	TIE BACK	Passed	INSPECTOR INSPECTOR J & 1/2
✓ 5270	O'KEEFE 29 FIELDWAY DR. PACIFIC RFG (263-0116; R06)	REROOF - FINAL	Passed	INSPECTOR J & 1/2

OTHER PID 5278 FREDRICK; 325 SEWALL'S POINT RD., HARBOR BAY MARINE
- SPOT INSPECTION (TIE BACK/DRAIN MAN INSP.; NOT STARTING)

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ~~April 10, 2001~~, 2001; Page 1 of 3.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5013	DENNIS	ROOF SHEATHING	Passed	
S ①	16 RIDGELAND DR. FLORIDA'S FINEST	OVER PORCH AREAS ON 2ND FLOOR		INSPECTOR <i>[Signature]</i> 4/4 ✓
✓ 5310	Vasquez	Walk through	Passed	? SEE PAGE 2 =
S ⑨	82 S. S.Pt. Groza	interior only Shutters		REQ. FOR PHASE. INSPECTOR <i>[Signature]</i> 4/4 ✓
✓ 5172	Eckna	3 traps/draft sh./clg. penetrat/notch for wires		
S ⑤	107 H Small way Select Abunds	Insulation →	Passed	reinspect INSPECTOR <i>[Signature]</i> 4/4 ✓
✓ 4887	PAGE	POOL STC	Passed	Hittcrack
S ③	8 ST. LUCIE COURT LOUDEN POOLS		(improve)	Coverage to form) INSPECTOR <i>[Signature]</i> 4/4 ✓
✓ 5288	SHINTAFFER	(2) PATIO ROOFS	PASSED	
N ⑩	7 N. RIVER RD. EAST COAST SPEC., INC.	- FINAL		NOT OVER INSPECTOR <i>[Signature]</i>
✓ 5053	ROBINSON	ROOF	Passed	
S ⑥	173 S. RIVER RD DRIFTWOODS	SHEATHING		INSPECTOR <i>[Signature]</i> 4/4 ✓
✓ 5143	GIFFORD	SHEATHING	Passed	
N ⑪	85 N SPR. HOLMES			INSPECTOR <i>[Signature]</i> 4/4 ✓

OTHER (OWNER REQ) BRUNO GABRYNOWICZ; SQUAL KUN LAKE 288-3742
 insp. damaged porch columns (wood) - exposed during screening dept.
 ✓ REPAIR/REPL. REQUIRED - STRUCTURAL; SP W/ENGR'G. *[Signature]*

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5325	BROTHERS	FENCE - FINAL	Passed	RiverQuest
N ①	2 VIA DE CRISTO QUALITY FENCE	"STAR": 879-9126		INSPECTOR <i>[Signature]</i> 4/16 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5320	WILLIAMS	FENCE - FINAL	Passed	
S ⑦	110 HENRY SEWALL WAY CREWS CONST. CO.	692-3371		INSPECTOR <i>[Signature]</i> 4/16 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5143	GIFFORD	SHEATHING	Passed	
N ②	85 N SPR HOLMES	Roof		INSPECTOR <i>[Signature]</i> 4/16 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5007	PAGE	FINAL WALK	Code	PERMIT RENEWAL REQUIRED (2/2/01)
S ⑤	8 ST LUCIE CT WHITE LAKE	THRU	only	INSPECTOR <i>[Signature]</i> 4/16 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5317	NEARING	FINAL -	Passed	
S ⑪	5 LANTANA LN COOPER	FLAT RE-ROOF		INSPECTOR <i>[Signature]</i> 4/16 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5233	INGRAM	SEAWALL - FINAL	Passed	
N ③	101 W. SEWALL'S POINT RD BLUE WATER MARINE	(561-286-5181)		INSPECTOR <i>[Signature]</i> 4/16 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
S 5269	DANIELSON	REEROOF - FINAL	Passed	
✓ ⑥	161 S. RIVER RD. PACIFIC RFG. (808 263-0116)	(87576-RES.)		INSPECTOR <i>[Signature]</i> 4/16 ✓

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 2001; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5143	GIFFORD	ME-BM	Pass	
<div style="border: 1px solid black; border-radius: 50%; width: 40px; height: 40px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> 2 </div>	85 N. SEWALL'S POINT RD.	2nd fl		
	SCOTT HOLMES			INSPECTOR <i>[Signature]</i> 4/13/01
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
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

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~THU~~ ~~APR 27~~, 2001; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5330	JANSON	SHUTTER - FINAL	Passed	
S (6)	132 S. RIVER RD. BUDGET SHUTTER			gress? garage? ✓ INSPECTOR 4/27 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5143	GIFFORD	TIE BM.	Passed	
N (1)	65 N. SEWALL'S POINT RD SCOTT HOLMES			INSPECTOR 4/27 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5321	PANTON	A/C COMP. RELOC. -	Passed	
S (5)	17 ISLAND ROAD KRAUSS	FINAL		INSPECTOR 4/27 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5192	RAO	FRAMING (KCH)	Passed	
N (2)	30 CASTLE HILL WAY AR MARTIN	ALL TRADES		< 3000 SF? ✓ INSPECTOR 4/27 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 4723	KOCH	POST C.O. VERIFICATION	Passed	CONTR. REQUEST
N X	71 N. RIVER RD W.B. BROWN, INC.	- BALCONY RAILING MOD. COMPLIANCE	ROLL-OVER 4/30	INSPECTOR 4/27 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
T/R (9)	TULLER 39 N. RIVER RD O/B	FIELD VERIF.	ROLL-OVER 4/30	INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
(3A)				INSPECTOR

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection ~~Mon~~ Wed Fri ~~May 27~~, 2001; Page 1 of 1.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5143	GIFFORD	SUSPENDING	X	Cancelled will reschedule
	1020 SEWALL'S POINT RD SCOTT HOLMES			INSPECTOR.
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5228	FOGLIA CONST 102 HBBIE CT. FOGLIA CONST.	FRAMING (ALL TRADES)	Passed	INSPECTOR <i>[Signature]</i> 5/3
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5187	JORDAN 110 N. SEWALL'S POINT RD. W.D.C. CONST.	SLAB	Passed	INSPECTOR <i>[Signature]</i> 5/3
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5248	Miraglia 66 N Spt. Rd Custom Built Home	Slab	Passed	2SS 4259 INSPECTOR <i>[Signature]</i> 5/3
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

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5340	HULL	R/R EXST'G. D/W-	Passed	
5 (C)	2 HERITAGE WAY CHITWOOD & CO.	FINAL		INSPECTOR <i>[Signature]</i> 5/9 ✓
✓ 5312	ENRIQUEZ	SLAB	Passed	LATE AS POSSIBLE
5 (4)	1 KINGSTON CT. DRIFTWOOD HOMES (ALAN MOKKIS: 529-2577)			INSPECTOR <i>[Signature]</i> 5/9 ✓
5143	Gifford	Shedding	Passed	CALLER 5/9 2:30
9	55 N S Pt. Rd. Scott Holmes			INSPECTOR <i>[Signature]</i> 5/9 ✓
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
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
				INSPECTOR

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, **5/23/2001**; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5318	Koentke	Deck	Passed	
S (6)	66 S. Sewall's Pt Rd. Advantage Pools			INSPECTOR [Signature] 5/23 ✓
✓ 5343	REDACTED	TIE RM / Col	Passed	
N (7)	REDACTED SCOTT HOLMES (JERRY 201-9689)	(Mainway)		INSPECTOR [Signature] 5/23 ✓
✓ 5344	HEURY	SHEATHING	Passed	EARLY AS POSSIBLE 9:00
S (1)	B E. HIGH POINT HEATON REFRIG. CO.	(North slope "DAN" 287-0116)		INSPECTOR [Signature] 5/23 ✓
✓ T/R	FOGLIA	FIELD VERIF.	Passed	SUPPL. TO PN 0399
S (2)	102 ABBIE COURT FOGLIA CONST.			Oak tree dead INSPECTOR [Signature] 5/23 ✓
✓ 5378	COMBS	ROOFING -	Passed	
S (4)	MANDALAY ISLAND CARPS & HUFF	FINAL		INSPECTOR [Signature] 5/23 ✓
✓ 5374	PRAWNBROKER	A/C UNIT - ^{ROOF}	Postponed due to rain	
N (8)	3754 SE OCEAN SUPERIOR REFRIG.	FINAL 201-1340-GREG	Will call	+reschedule INSPECTOR [Signature] 5/23 ✓
✓ T/R	REILLY	FIELD VERIF.	Passed	dead tree PN0448
S (5)	785 SEWALL'S POINT RD. FERRY LAWN SERVICE			INSPECTOR [Signature] 5/23 ✓

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection ~~Mon @ Wed~~ Fri ~~June 15, 2001~~ 2001; Page 2 of 3.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5381	HARBOR BAY	IN PROGRESS	Passed	+ PRE-COURT. IMP 5/31/01
N (14)	3740 SE OCEAN ROOFMAN			INSPECTOR JG/4/01
5172	ECKNA	DRIVEWAY	Passed	
S (6)	107 HENRY SEWALL WAY JMC			INSPECTOR JG/4/01
5371	VOLPE	DRY IN	Passed	
S (9)	15 MIRIMAK O/B	(T&MIL-KEKOD)		INSPECTOR JG/4/01
5380	GIFFORD	POOL STEEL	Passed	FORWARDED SURVEY RECEIVED
N (11)	85 N. SAR A+G	+ GROUND		INSPECTOR JG/4/01
5372	SHEETS	DRIVEWAY -	Passed	
S (8)	101 S. RIVER SPECIALTY CONCRETE	PRE POUR		ANDREW - 288-4793 INSPECTOR JG/4/01
* 5013	DENNIS 16 RIDGELAND FL. & NEST	CLOSE IN (?)	CANCEL	G.C. request all trade Wed 6/6. INSPECTOR
5363	JOHNSON	TEMP POLE	Passed	called PPL 10:00
N (10)	2 OAKHILL WAY DRIFTWOOD			INSPECTOR JG/4/01

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~THURSDAY~~ FRIDAY 6/8, 2001; Page 2 of .

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5123	PICEU	RF SHEATHING	Passed	
5 (2)	65 S. RIVER RD. SEAGATE BLDGS.	PTC - WALL SHEATHING	✓	INSPECTOR [Signature] 6/8 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5000	RIMER	RT'G. WALL - FINAL		SPEC INSP. RPT. RCVD. ✓
5 (1)	29 S. RIVER RD. LEAR LEVEL.	not completed,	in progr.	- COPY TO SITE ✓ INSPECTOR [Signature] 6/8 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 4958	BUSHA	DOCK - FINAL	Passed	FINAL INSP. 6/4/01 = COMPLETE
N (6)	10 PALM CT. MACBUSH	(REINSPECT FOR PUNCH LIST ITEMS)		(PERMIT EXP. 6/4/01) INSPECTOR [Signature] 6/8 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5145	GILFORD	DOCK	Passed	
N (7)	125 N. SEAWALL RD. SCOTT J. HOLMES			INSPECTOR [Signature] 6/8 ✓
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5034	SEELY	SOLAR POOL HTR. -	Passed	
N (8)	37 N.E. LOFTING WAY CLIMATIC - SOLAR	FINAL		INSPECTOR [Signature] 6/8 ✓
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

Building Department - Inspection Log

Date of Inspection: Monday Tuesday Wednesday Thursday Friday Saturday Sunday, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ T/R	Edna	Iron removal	Passed	18" Pipe
S (7)	67 Henry Sewall Way JMC	REPLACEMENT ON LANDSCAPE PIPES		replace ✓ INSPECTOR J 6/20
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5358	UDGRAM	V/G PLUMBING	Passed	
N (2)	101 N. SEWALL'S POINT RD. BIDFORD CONST.	(WATER PLUMBING PNSSO)		INSPECTOR J 6/20
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5302	NOHEJL	R.F. SHEATHING.	Passed	
S (12)	6 N. RIDGEVIEW RON RAYMOND CONST	+ wall upst		INSPECTOR J 6/20
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5345	BARON	ELECT. RGH. (PTLV)	Passed	IF SCHED. TOO FULL - ROLL OVER
N (3)	25 FIELDWAY DR. O/B (RICARDO BARON 220-1388)	-GARAGE ELEC. EI.V Straps + anchors	Discarn. Excl. !	(CALL OWNER & ADVISE) INSPECTOR J 6/20
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5409	HELLER	TIE BM.	Passed	
S (11)	23 N. VIA LUCINDIA TREASURE CONST CARPENTRY	(PORCH FRAMING REP.)		INSPECTOR J 6/20
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5300	BERCAW	POOL - DECK	Passed	VERIFY COMP. TEST RCVD.?
N (4)	11 RIVERCREST CT HARBOR BAY POOLS.	Failed (MPN SPOOL - REPAIR)		but C. test not on site or office INSPECTOR J 6/20
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5143	BIDFORD	FRAMING	Passed	
N (1)	125 N. SEWALL'S POINT RD SCOTT J. HOLMES			INSPECTOR J 6/20
OTHER	MUSSO	Pool steel	Passed	
(MANS 202)	18 S. River Rd.			J 6/20
5416	SF Pools 286 7033			J 6/20

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri JULY 30, 2001; Page 1 of 1.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5230	DENNISON 49 W. HIGH POINT O/B	INT. ALI. FINAL CANCEL BY OWNER 6:40 AM 7/27		DR DENNISON } REPAIR: 594-8093 OFFICE: 225-5955 INSPECTOR
✓ 5363	JOHNSON 2 OAK HILL WAY DRIFTWOOD HOMES	TIE BM		LATE: Resched. W/d wood. Cancelled by Contr. INSPECTOR [Signature] 7/30
✓ 5465	TEDESCO 18 N. RIVER RD PACIFIC RIFG.	RE ROOF - SHEATHING	Passed	Late INSPECTOR [Signature] 7/30
✓ 5452	VITALI 15 KNOWLES ROAD DECOR BATH & KITCHEN	DEMOLITION - ELECTRICAL/UTL. WORK (MIKE SIMPSON 370-1015)	Passed	wood temp. meter INSPECTOR [Signature] 7/30
✓ 5358	INGRAM 101 N. SEWALL'S POINT RD. BUTFORD CONST.	- TIE BM - GAR. RF. SHEATHING	Passed Passed	partial ✓ INSPECTOR [Signature] 7/30
✓ 5143	GILFORD 8510 SEWALL'S POINT RD SCOTT J. HOLMES, BLDG., INC.	(P) BUILT. PLUMB. PALE. CLG. FIXTURES (220-4780)	Passed	all porch coils only INSPECTOR [Signature] 7/30
T/R	Baron 25 Fieldway Dr. Baron	Field verific.	Passed	INSPECTOR [Signature] 7/30

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ S 5447	BARLAND 1 VIA LUCINDIA HARBOR BAY POOLS 878 8806	STL./MAIN DRAIN	Failed Washout	FORM BOARD(S) SINKY W/ W/ED Called contractor INSPECTOR J 8/6
✓ S 5302	NOHE JL 6 N. RIDGEVIEW RON RAYMOND CONST.	FRAMING - ALL TRADES	Passed (1 Strap +	(Ac. enclosure!) Roaming - preins.) INSPECTOR J 8/6
✓ S 5426	DEMOREST 925. RIVER ROAD COMMERCIAL CONST.	ENTRY ENCL. - SLAB	Passed	INSPECTOR J 8/6
✓ N 5143	GIFFORD 85 N. SEWALL'S POINT RD SCOTT J. HOLMES, BLDG. INC	LATH	Passed	INSPECTOR J 8/6
✓ N 5280	ROTHBERG 103 N. SEWALL'S POINT RD CUSTOM BUILT MARLINE	RET. WALL/RIP RAP Final → (288-4254)	Passed Passed	INSPECTOR J 8/6
✓ N 5443	WYKOFF 26 N. RIVER ROAD O/B	WALL RTG.	Passed	See owner INSPECTOR J 8/6
5466	Matyszewski 3 Miramar A+P Bldg.	Shedding roof	Passed	INSPECTOR J 8/6

OTHER VERIFY FLOOD DEBRIS CLEAN-UP: ~~1735 RIVER~~ 295. RIVER RD (PN 4978)
(REINSPECTION) RIVER-LEAK DEVELOPMENT.
Cleanup in progress J 8/6

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~THURSDAY~~ ~~2001~~, 2001; Page 2 of 3.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5294	LEHMAN	DRYWALL SCREW	Passed	
S (5)	6 RIDGELAND DR. GRIBBEN CONST.			INSPECTOR <i>J</i> 8/31
✓ 5192	RAO	VERIFY CATCH	Passed	
N (14)	30 CASTLE HILL WAY A R MARTIN	BASIN CLEANOUT FOR CO		INSPECTOR <i>J</i> 8/31
✓ 00105	TOWN	ELECTRICAL -	Passed	
S (9)	UTILITY 10 LANTANA LANE KRAUSS + CRANE	POWER POLE - FIDAL		INSPECTOR <i>J</i> 8/31
✓ 5455	ATEN	GROUND	Passed	
S (11)	103 ABBIE CT GRIBBEN	PLUMBING		INSPECTOR <i>J</i> 8/31
✓ 5499	MOTLEY	ROOF -	Passed	
N (18)	34 N. SPR PACIFIC	FINAL		INSPECTOR <i>J</i> 8/31
✓ 5427	FOGLIA	SLAB	Passed	Late as possible
S (6)	105 ABBIE CT. FOGLIA			INSPECTOR <i>J</i> 8/31
✓ 5193	GARFORD	PRIVACY WALLS	Passed	
N (17)	85 N. SPR HOLMES	POOL DECK (SEPARATE PERMIT)		INSPECTOR <i>J</i> 8/31

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri SEP 28, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
V 4978	RIMER	4 th FL INSULATION	Passad	partial
S (6)	29 S RIVER RD. LEAR DEV.	2 nd FL DRYWALL-SCREEN	Passad	partial INSPECTOR <u>9/28</u>
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
V 5448	VOPRASO	ROOF + WALL SHEATHING	Passad	
N (3)	21 PERIWINKLE CRET. RLM CONSTRUCTION			INSPECTOR <u>9/28</u>
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
V 5143	GEORGE	ROUGH-ELECT.	Passad	Draft slopers + finished
N (5)	85 N. SPR HOLMES	PLUMBING AC	u u	ins/cops & duct INSPECTOR <u>9/28</u>
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
V 5234	MCCARTNEY	EPICORE / SLAB	Passad	
S (8)	45 W HIGHPOINT WILSON BLDRS	El. Rough girl floor	Passad	INSPECTOR <u>9/28</u>
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
V 4564	UNIVERSAL GROUP 23 S SEWELLS PT RD. NES GROUP	DRYWALL / SCREW	Passad	Late INSPECTOR <u>9/28</u>
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
V 5536	DUNKER	SHUTTER / FINAL	Passad	
N (2)	19 PERIWINKLE, CRESC. GULFSTREAM ALUMI			INSPECTOR <u>9/28</u>
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
V 4509	MYLOD	ROOF DRY-IN.	Passad	
N (1)	4 FIELDWAY DR MYLOD DEVEL. CO.			INSPECTOR <u>9/28</u>

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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] 10/5
S352	Clouet's	Tie Beam	Passed	Site to be cleaned up.
(1)	11 High Pt. W Molter			INSPECTOR [Signature] 10/5
S443	Wyckoff	Mas. Wall	Passed	
(10)	26 N. River Rd. O/B - 223 7176	Final		INSPECTOR [Signature] 10/15
S489	Stracuzzi	Tie Beam	Passed	
(6)	12 Rio Vista A. Ruccolo			INSPECTOR [Signature] 10/5
S460	STANTON	STRAP +	Passed	
(7)	6 SABAL CT. O/B (Redevelop)	ANCHOR Wall sheathing	Passed	INSPECTOR [Signature] 10/5
S143	GIPPOLO	INSULATION	Passed	
(12)	85 N SPR HOLMES			INSPECTOR [Signature] 10/5
S286	SCHULTZ	FINAL - POOL	Failed	no access to alarm
(5)	64 S. SPR ADVANTAGE POOLS			INSPECTOR [Signature] 10/5

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5143	61 FORD	POOL DECK	PASSED	ln
4	85 N. SEWALLS PT RD. Scott Holmes			INSPECTOR
5391	PITTINGOS.	TEMP ELER.		CANCELLED
2	117 HENRY SEWALL WAY JMC CONTRACTING	CHECK POLE		ln INSPECTOR
5302	NOHEJL	DECK		Reinspection Cancelled by cont INSPECTOR
5501	ALLMAN	SLAB	FAILED	ln
3	3 SUMMER CT. O/B			INSPECTOR
5358	INGRAM	ALL TRADES +	FAILED	ln
5	101 N. SEWALLS PT RD. BUFFORD	FRAMING		INSPECTOR
5501	PITTINGOS	POOL STEEL.	PASSED	ln
2	117 HENRY SEWALLS WAY POOLS BY GREG	(CRUSTAL) 337-9713		INSPECTOR
5566	NUNNELEE	SHEATHING/TINTAB	PASSED	ln
1	32 W. NEWH POINT PARIFK.	9:00.		INSPECTOR

OTHER _____



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS 85 N Sewall's Pt. Rd

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

Early E.I. Power

Not ready, need all electric's
connected, covered.

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 4/24/2

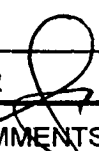
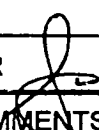

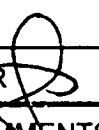

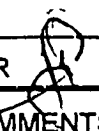
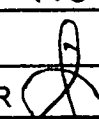

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri APRIL 26, 2002; Page of .

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5143	GIFFORD	TEMP	Failed	
(5)	85 N SPR HOLMES	ELECTRIC		INSPECTOR 
5734	ABESADA - TERK	TEMP. POLE	Passed	FPL!
(3)	8 MORGAN CIR (Ridgeview/RioV) CONWAY			INSPECTOR 
5358	INGRAM	CO - FINAL	Failed	
(6)	101 N. SPR BUFORD			INSPECTOR 
5573	Flaugh	Pads, Prep work	Passed	
(4)	6 Ludalucie Puy Hufnagel			INSPECTOR 
5356	Clowouts	Roof Tile in prog	Passed	
(1)	11 W High Pt. RTS 222 0005 (1265 Robin)			INSPECTOR 
5388	Walker	Pool Deck	Passed	
(2)	6 Cranes Nest Olympic Pools			INSPECTOR 
5541	Milord	Framing	Passed	Frid. as Mand.
	144 N Sewall's Pt. O/R			INSPECTOR 

OTHER _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(561) 287-2455

CORRECTION NOTICE

ADDRESS 85 N SEWALLS PT RD.

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

EARLY POWER RELEASE - ALL HARDWIRED APPLIANCES
TO BE INSTALLED OR BOXES INSTALLED.

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 5/15/02

GENE

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri MAY 15TH, 2001, Page of .

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5143	GIFFORD.	EARLY POWER RELEASE	FAILED.	RE-SCHEDULE -
	85 N. SEWALLS PT RD. NOLMPS.			INSPECTOR <i>h</i>
5068	WINDER	EARLY POWER RELEASE		CANCELED.
	19 RIDGELAND DR			INSPECTOR
	LEAK			
5631	HART	SHEATHING	PASSED	
	61 S. RIVER RD. WINCHIP			INSPECTOR <i>h</i>
5541	M. lord	Tin Tag	PASSED	
	144 N Sewells Pt Rd faciFire M. lord			INSPECTOR <i>h</i>
5734	Abesada	Footer	FAILED	
	8 Morgan Circle Steve Conway	Steel Insper.		INSPECTOR <i>h</i>
5123	PIECHE	EARLY POWER	PASSED	
	635 S RIVER SEA GATE	RELEASE.		INSPECTOR <i>h</i>
5200	D'ALESSANDRO.	SUB.	PASSED	
	107 ABBIE CT. FRAZIER			INSPECTOR <i>h</i>

OTHER _____

572548
60

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri MAY 22, 2001; ² Page of .

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5761	I A NERO. 7 W HIGH POINT. WILLIAN	ROOFING. ADDIT.	PASSED	INSPECTOR <u>h</u>
5787	COWELL 1 BAYMAN RD. SEASIDE	FINAL ROOF	PASSED	INSPECTOR <u>h</u>
5778	VITALE 13 KNAPPES RD PECOR	FINAL FENCE	PASSED	INSPECTOR <u>h</u>
5682	Wander 26 Simara United fence	Fence →	FAILED	FEE \$30 ← INSPECTOR <u>h</u>
5732	Massad 17 E. High Point Rd United fence	Fence	FAILED	FEE \$30 NO PERMIT POSTED. INSPECTOR <u>h</u>
5733	Kupczyk 9 E. High Point Rd United fence	FENCE	PASSED	INSPECTOR <u>h</u>
5143	G. PROND 85 N Sewall's Pt Rd Scott Holmes	Electrical EARLY POWER POLARIS	PASSED	INSPECTOR <u>h</u>

OTHER _____



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS 85 N. Sewalls Pt.

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 CO. -> Failed

- Pool safety system

- Height of Bldg.

- Survey : reas set back + Bldg. height

Paper Survey / Elevat. cert / Height Bldg.

Every calc / owner affidavit

Garage Platform - : 2x 7' ~~only 1/2~~

~~not cut survey~~

~~ac. platform height 8'~~

~~stair rail 4'~~

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 _____

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri July 1, 2007; Page of .

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5743	GIFFORD	Final CO	Failed	Part 4
6	85 N Sewall Pt Rd Campora Const			INSPECTOR
5868	HORWITS	Final CO		CANCEL
	H. Perumale			INSPECTOR
5714	Romano 21 Simara St Romano	TIE BM.	Passed	INSPECTOR
5825	Shewbridge 126 S Sewalls Pt. DRIFTWOOD	Electrical & Holddown	Passed	INSPECTOR
5846	STRACUZZI 12 Rio Vista Ellis Myers	Final Hurricane Shutters	Failed	INSPECTOR
5489	STRACUZZI	C.O. - ALL	Failed	
5769	12 Rio Vista STRACUZZI	TRADES - FENCE		INSPECTOR
5769	STRACUZZI 12 Rio Vista STRACUZZI	Pool Final	Passed	→ deck failed!
4				INSPECTOR

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri July 12, 2007; Page 1 of 2.








PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5839	Bempsey	Final FENCE	Passed	
(2)	38 S. Sewall's Pt Rd ADRON FENCE			INSPECTOR <i>[Signature]</i>
6531	Hart	Framing	Passed	Failed (stairs/rails/dg)
(5)	61 S. River Winchip	All Trades	Passed	except poolhouse INSPECTOR <i>[Signature]</i>
5785	JONES	Roof Nailing	Passed	partial
(3)	14 Heron's Nest O/B	* Re BAR	Passed	INSPECTOR <i>[Signature]</i>
5821	Granfield	deck footer	Passed	
(6)	15 W High Pt Miller			INSPECTOR <i>[Signature]</i>
5143	GILFORD	Final CO	Failed	
(12)	85 N Sewall's Pt Rd. Holmes			INSPECTOR <i>[Signature]</i>
5068	Wine	Front door		Monday
(4)	19 Ridgolana Loar			INSPECTOR <i>[Signature]</i>
5828	Walker	Tie Beams	Passed	
(7)	21 W. High Point Rd HOLMES			INSPECTOR <i>[Signature]</i>

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7/24, 2007. Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5854	Burkey	SHutter	Passed.	
(5)	15 Banyan Rd Custom Hurricane			INSPECTOR 
5761	LOWELL	ROOF SHEATHING	Passed	
(10)	7 WEST HUGH POINT IANIERO.	Heart Strapping.	Passed	INSPECTOR 
5743	GI. FERRO	FINAL POOL	Passed	
(12)	85 N Sewall's Pt Rd Holmes	C.O.		INSPECTOR 
5636	Frances	Roof Nailing	Passed	
(1)	5 S. River Road Wilberding			INSPECTOR 
TREE	Corde Chontos	T/R	Passed	
(13)	83 S. Sewall's Pt. Rd			INSPECTOR 
5500	Busha	Final Pool	Passed	
(3)	10 Palm Court Schiller			INSPECTOR 
5794	Busha	Final FENCE	Passed	
(4)	10 Palm Court O/B			INSPECTOR 

OTHER _____

TOWN OF SEWALL'S POINT

THOMAS P BAUSCH
Mayor

MARC S TEPLITZ
Vice Mayor

E DANIEL MORRIS
Commissioner

JAMES D BERCAW
Commissioner

RICHARD L BARON
Commissioner



JOSEPH C DORSKY
Town Manager

JOAN H BARROW
Town Clerk

LARRY E McCARTY
Chief of Police

GENE SIMMONS
Building Official

JOSE TORRES, JR
Maintenance

CERTIFICATE OF OCCUPANCY

Single Family Residence Other _____

OWNER WIND GIFFORD _____, PROPERTY ADDRESS 85 N SEWALL PT RD. _____

LEGAL DESCRIPTION LOT 2 _____ BLOCK _____ SUBDIVISION _____

GENERAL CONTRACTOR SCOTT HOLMES. _____, LIC/CERT NO CGC 0055859 _____

ADDRESS 3601 E OCEAN BLVD. STUART _____, TEL 220-0480 _____, FAX 225 4744 _____

ARCHITECT OR ENGINEER JOHN OLSEN _____, LIC/CERT NO PE 0023896 _____

ADDRESS 1366 S.W. HESMINE TERR PALM CTY _____, TEL 287 8757 _____, FAX _____

PERMIT NO 5143 _____, DATE OF ISSUE 10/31/00 _____, RENEWAL PERMIT NO SAME _____, DATE OF ISSUE 10/31/01 _____

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

Entered at Sewall's Point, Florida, this 24 day of JULY, 2002.

Gene Simmons, CBO
Building Official, Town of Sewall's Point



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

5380

POOL/SPA

MASTER PERMIT NO. 5143

TOWN OF SEWALL'S POINT

Date 5/21/01

BUILDING PERMIT NO. 5380

Building to be erected for ERWIN & SABRINA GIFFORD

Type of Permit POOL/SPA/DECK

Applied for by A&G CONCRETE POOLS

(Contractor) Building Fee \$240.00

Subdivision GOV. LOT Lot 2 (PT) Block _____

Radon Fee _____

Address 85 N. SEWALL'S POINT RD.

Impact Fee _____

Type of structure S.P.R. (UNDER CONST.)

A/C Fee _____

Parcel Control Number

Electrical Fee _____

35-37-41-000-000-00242-00000

Plumbing Fee _____

Amount Paid \$240.00

Check # 31148

Cash _____

Other Fees (_____)

Roofing Fee _____

Total Construction Cost \$ 30,000.00

TOTAL Fees \$240.00

Signed Frank Del Ross

Signed [Signature]

Applicant

Town Building Inspector OFFICIAL

POOL / SPA PERMIT

INSPECTIONS

SETBACKS DATE _____
 COMPACTION TESTS DATE _____
 GROUND ROUGH DATE _____
 STEEL & BOND DATE _____
 LIGHT NITCHE DATE _____

DECK DATE _____
 ENCLOSURE & LATCH DATE _____
 DOOR ALARM(S) DATE _____
 FINAL DATE _____

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!

517



Town of Sewall's Point BUILDING PERMIT APPLICATION

RECEIVED Bldg Permit Number 5380 MAY - 7 2001

Owner or Titleholder's Name ERWIN & SABRINA GIFFORD Phone No (561) 223-5561
Street: 85 N. SEWALL'S POINT RD. City: STUART State: FL Zip: 34996
Legal Description of Property GOVERNMENT LOT 2 SECT 35 TOWNSHIP 37 RANGE 41 EAST Parcel Number 3537410000000024020000

Location of Job Site 85 N. SEWALL'S POINT RD.
TYPE OF WORK TO BE DONE SWIMMING POOL & SPA

CONTRACTOR/Company Name A+G CONCRETE POOLS Phone No () 878-7752
Street: 410 SAEGER AVE City: FT. PIERCE State: FL Zip: 34982
State Registration CPL 057200 State License

ARCHITECT N/A Phone No ()
Street: City State Zip

ENGINEER WALTER KARPINIA Phone No () N/A
Street: 11406 N. 172 PL. City: JUPITER State: FL Zip: 33478

AREA SQUARE FOOTAGE - SEWER - ELECTRIC
Living Area Garage Area Carport Accer.ory Bldg
Covered Patio Scr Porch Wood Deck
Type Sewage Septic Tank Permit # from Health Dept
New Electrical Service Size AMPS

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

COSTS AND VALUES
Estimated cost of construction or Improvement \$ 30,000.-
Estimated Fair Market Value (FMV) prior to improvement \$
If Improvement, is cost greater than 50% of Fair Market Value? YES NO
Method of determining Fair Market Value

SUBCONTRACTOR INFORMATION (Notification to this office of subcontractor change is mandatory)
Electrical State License #
Mechanical N/A State License #
Plumbing A+G CONCRETE POOLS State License # CPL 057200
Roofing N/A State License #

Application is hereby made to obtain a permit to do the work and installations as indicated I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standard of all laws regulating construction in this jurisdiction I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, 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)
X Erwin Gifford
Owner

State of Florida, County of St. Lucie On this the 7 day of May, 2001, by Erwin Gifford who is personally known to me or produced

as identification:
Notary Public

My Commission Expires ALAN J. MANFREDO MY COMMISSION # CC 929180 EXPIRES June 17, 2004 Bonded Thru Notary Public Underwriters

CONTRACTOR SIGNATURE (Required)
Ashwin Allen
Contractor CPL 057200

State of Florida, County of St. Lucie On this the 7 day of May, 2001, by Ashwin Allen who is personally known to me or produced

as identification:
Notary Public

My Commission Expires ALAN J. MANFREDO MY COMMISSION # CC 929180 EXPIRES June 17, 2004 Bonded Thru Notary Public Underwriters

TREE REMOVAL (Attach sealed survey)

Number of trees to be removed _____ Number of trees to be retained _____ Number of trees to be planted _____ Number of Specimen trees removed _____
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

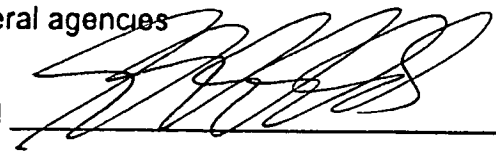
- 3 Take the application showing Zoning approval (complete with plans & plot plan) to the Health Department for septic tank. Attach the pink copy to the building application

- 4 Return all forms to the Permits and Inspection Office. All planned construction requires: two (2) sets of plans, drawn 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

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 5/15/01

Approved by Town Engineer _____ Date _____
(If required)

IRD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
04/06/2000

PRODUCER (561)287-2030 FAX (561)288-2481
Deakins-Carroll Insurance Agency
P O Box 1597
Pt Salerno, FL 34992

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

Handwritten: FILE

COPY

COMPANIES AFFORDING COVERAGE
Valley Forge Ins Co

Attn Barbara Walenius
INSURED
A & G Concrete Pools, Inc
410 Saeger Avenue
Fort Pierce, FL 34982

FILE
Handwritten: UC/118

COMPANY B
COMPANY C
COMPANY D

RECEIVED
APR - 8 2000
BY: *[Signature]*

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	1073661070	04/08/2000	04/08/2003	GENERAL AGGREGATE \$ 600,000
	X COMMERCIAL GENERAL LIABILITY				PRODUCTS COMP/OP AGG \$ 600,000
	CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY \$ 300,000
	OWNER S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 300,000
					FIRE DAMAGE (Any one fire) \$ 100,000
					MED EXP (Any one person) \$ 10,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	ANY AUTO				
	ALL OWNED AUTOS				BODILY INJURY (Per person) \$
	SCHEDULED AUTOS				
	HIRED AUTOS				BODILY INJURY (Per accident) \$
	NON OWNED AUTOS				PROPERTY DAMAGE \$
	GARAGE LIABILITY				AUTO ONLY EA ACCIDENT \$
	ANY AUTO				OTHER THAN AUTO ONLY \$
					EACH ACCIDENT \$
					AGGREGATE \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	UMBRELLA FORM				AGGREGATE \$
	OTHER THAN UMBRELLA FORM				\$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY				WC STATUTORY LIMITS OTH ER
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE	INCL EXCL			EL EACH ACCIDENT \$
					EL DISEASE POLICY LIMIT \$
					EL DISEASE EA EMPLOYEE \$
	OTHER				
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS					

CERTIFICATE HOLDER

CANCELLATION

Town of Sewalls Point
Att Ed Arnold
Fax 220-4765
1 S Sewalls Point Road
Sewalls Point, FL 34992

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

AUTHORIZED REPRESENTATIVE

David Deakins/BW

[Signature]

Certificate of Insurance

ate is issued as a matter of information only and confers no rights upon you the certificate holder This certificate is not an insurance policy and does not amend or alter the coverage afforded by the policies listed below

FILE

Named Insured(s):

Staff Leasing, LP, By Staff Acquisition, Inc , The General Partner, And The Affiliated Limited Partnerships Of Which Staff Acquisition, Inc Is The General Partner And Staff Leasing, Inc Is The Limited Partner including Staff Leasing of Texas, LP, Staff Leasing of Texas II, LP, Staff Leasing IV, LP
600 301 Boulevard West, Suite 202
Bradenton, Florida 34205



Insurer Affording Coverage

Continental Casualty Company

Coverages:

The policy(ies) of insurance listed below have been issued to the insured named above for the policy period indicated The insurance afforded by the policy(ies) described herein is subject to all the terms exclusions and conditions of such policy(ies)

Type of Insurance	Certificate Exp Date <input type="checkbox"/> Continuous <input type="checkbox"/> Extended <input checked="" type="checkbox"/> Policy Term	Policy Number	Limits	
			Employer's Liability	
Workers' Compensation	1-1-2002	WC 189165165 WC 189165182 WC 247848874 WC 247848888	Bodily Injury By Accident	Each Accident
			\$1,000,000	
			Bodily Injury By Disease	Policy Limit
			\$1,000,000	Each Person

Other

Employees Leased To
18785 A and G Concrete Pools Inc

Effective Date: 1/1/01

The above referenced workers compensation policy(ies) provide(s) statutory benefits only to the employees of the Named Insured(s) on such policy(ies) not to the employees of any other employer

*If the certificate expiration date is continuous or extended term, you will be notified if coverage is terminated or reduced before the certificate expiration date However, you will not be notified annually of the continuation of coverage

Notice of Cancellation: (Not applicable unless a number of days are entered below)

Before the stated expiration date the company will not cancel or reduce the insurance afforded under the above policy(ies) until at least 30 days notice of such cancellation has been mailed to

Certificate Holder

Town of Sewells Point
1 S Sewalls Point Rd
Stuart, FL 34996-6736



Martin Oosterbaan

Martin Oosterbaan
Authorized Representative

Office St Louis, MO 12/15/00
Phone (877) 427-5567 Date Issued

RECEIVED
MAR 29 2001
BY. *[Signature]*

[Handwritten signature]

AC# 5955019

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
08/28/2000	00005570	CP-C057200

The **COMMERCIAL POOL/SPA CONTRACTOR**
Named below **IS CERTIFIED**
Under the provisions of Chapter **489** FS.
Expiration date: **AUG 31, 2002**


ALLEN, ARTHUR H
A & G CONCRETE POOLS INC
410 SAEGER AVEUE
FORT PIERCE FL 34982


JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSO
SECRETARY

REC
MAR 29 2001
BY. _____

STATE OF FLORIDA AC# 5965019
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CP -057200 08/28/2000 00005570
CERT COMMERCIAL POOL/SPA CONTR
ALLEN, ARTHUR H
A & G CONCRETE POOLS, INC
IS CERTIFIED under the provisions of Ch 489 FS
Expiration Date AUG 31, 2002

STATE OF FLORIDA AC# 5965041
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
QB -0015560 08/28/2000 00005638
QUALIFIED BUSINESS ORGANIZATION
A & G CONCRETE POOLS, INC
(NOT A LICENSE TO PERFORM WORK.
ALLOWS COMPANY TO DO BUSINESS IF
IT HAS A LICENSED QUALIFIER.)
IS QUALIFIED under the provisions of Ch 489 FS
Expiration Date AUG 31, 2001

MARTIN COUNTY
BOARD OF COUNTY COMMISSIONERS
2401 SE MONTEREY ROAD, STUART, FL 34996

5380

PERMIT #

Residential Swimming Pools,
Spa and Hot Tub Safety Act

AFFIDAVIT OF REQUIREMENT COMPLIANCE

I (We) acknowledge that a new swimming pool, spa or hot tub has been constructed or installed at (Print street address) 85 North Sewalls Pt Road, and hereby affirm that one of the following methods has been used to meet the requirements of Chapter 515, Florida Statutes and 2001 Florida Building Code (FBC) effective January 1, 2002. Please check your choice of compliance.

Residential swimming pool safety feature options;

In order to pass final inspection and receive a certificate of completion, a residential swimming pool must meet the following requirements relating to pool safety features:

- (a) The pool must be equipped with an approve safety pool cover; 424.2.17 exception. No other barrier feature required.
- (b) The pool must be isolated from access to a home by an enclosure that meets the pool barrier requirements of section 424.2.17.1-424.2.17.3;
- (c) Where a wall of a dwelling serves as part of the barrier one (1) of the following shall apply: 424.2.17.1.9
 1. All doors and windows providing direct access from the home to the pool shall be equipped with an exit alarm complying with UL 2017 that has a minimum sound pressure rating of 85dB A at 10 feet and is either hard wired or of the plug-in type. The exit alarm shall produce a continuous audible warning when the door and its screen are opened. The alarm shall sound immediately after the door is opened and be capable of being heard throughout the house during normal household activities. The alarm shall be equipped with a manual means to temporarily deactivate the alarm for a single opening. Such deactivation shall last no more than 15 seconds. The deactivation switch shall be located at least 54 inches above the threshold of the door.

RESIDENTIAL SWIMMING POOLS SAFETY ACT FORM

Page 2 of 2

Exceptions:

- a. Screened or protected windows having a bottom sill height of 48 inches or more measured from the interior finished floor at the pool access level.
 - b. Windows facing the pool on floor above the first story.
 - c. Screened or protected pass-through kitchen windows 42 inches or higher with a counter beneath. 424.2.17.1.9 (1)
2. All doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with positive mechanical latching/locking installed a minimum of 54 inches above the threshold, which is approved by the authority having jurisdiction. 424.2.17.9 (2)

I understand that not having one of the above installed at the time of final inspection, or when the pool is completed for contract purposes, will constitute a violation of Chapter 515, F.S. and will be considered as committing a misdemeanor of the second degree, punishable as established in the Florida Statute.

**Many types/models of alarms are not acceptable.
Please check with the Building Department.**

[Signature] 3-7-03
CONTRACTOR'S SIGNATURE & DATE

[Signature] 3/11/03
OWNER'S SIGNATURE & DATE

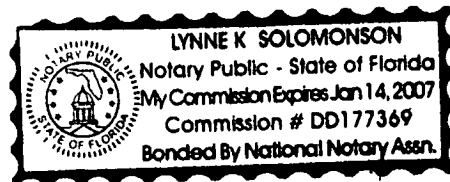
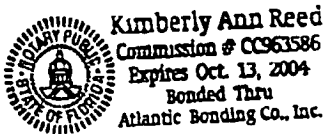
[Signature]
NOTARY PUBLIC, STATE OF FL.

[Signature]
NOTARY PUBLIC, STATE OF FL.

AS TO CONTRACTOR
PERSONALLY KNOWN
PRODUCED ID _____
TYPE: _____

AS TO OWNER
PERSONALLY KNOWN
PRODUCED ID _____
TYPE: _____

THIS FORM MUST BE SUBMITTED TO THE BUILDING DEPT. PRIOR TO FINAL INSPECTION.

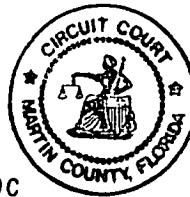


STATE OF FLORIDA
MARTIN COUNTY

THIS IS TO CERTIFY THAT THE
FOREGOING 1 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL

MARSHA EWING, CLERK

BY 1 COMPS DC
DATE 5-7-01



Return to (enclose self-addressed stamped envelope)

Name A&G CONCRETE POOLS, INC.

Address 410 SAEGER AVENUE

FORT PIERCE, FL 34982

This Instrument Prepared by:

Address SAME

Property Appraisers Parcel Identification (Folio) Number(s)

NOTICE OF COMMENCEMENT
FS 713.13

RAMCO FORM 409

FILE

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

Permit No. _____

NOTICE OF COMMENCEMENT

State of Florida
County of _____

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT

Legal description of property (Include Street Address, if available) GOVERNMENT LOT 2
SECTION 35, TOWNSHIP 37, SOUTH, RANGE 41 PUBLIC
RECORDS MARTIN COUNTY FLORIDA

General description of Improvements SWIMMING POOL/SPA/DECKING/ENCLOSURE

Owner ERWIN E SABRINA GIFFORD

Address 81 N. SEWALL'S POINT RD. STUART, FL. 34996

Owner's Interest in site of the Improvement FEE SIMPLE

Fee Simple Title holder (if other than owner) NA

Name NA

Address NA

Contractor A&G CONCRETE POOLS, INC.

Address 410 SAEGER AVENUE, FORT PIERCE, FLORIDA 34982

Surety NA

Address NA Amount of bond \$ NA

Any person making a loan for the construction of the Improvements:

Name N/A

Address _____

Person 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 N/A

Address _____

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.

Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified).

X Erwin E. Gifford
Signature of Owner

Printed Signature of Owner

I have relied upon the following identification of the Affiant Erwin E. Gifford

Sworn to and subscribed before me this 7 day of May

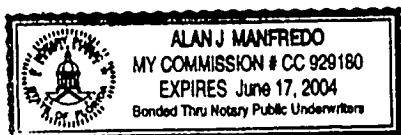
2001

Alan J. Manfredi

Notary Signature

Printed Notary Signature Alan J. Manfredi

NOTARY RUBBER STAMP SEAL



DE&T

DUNKELBERGER ENGINEERING & TESTING, INC.

SOIL DENSITY TEST REPORT

Project Name:	Gifford Residence 85 North Sewells Point Road	Report Date:	10-31-01
Client Name:	Scott J Holmes, Inc P O Box 2804 Jensen Beach, FL 1341958	Project No.:	01-10-1111
		Date Tested:	10-24-01
		Technician Initials:	SM
Attn.:	Mr Scott J Holmes, Inc	Progress Report No	1 (Sheet 1 of 2)

Test No	Probe Depth (in)	Laboratory Proctor		Field Tests					
		Maximum Dry Density (pcf)	Optimum Moisture (%)	Dry Density (pcf)	Cone Resistance ¹ (tsf)	Moisture (%)	Minimum Required Compaction (%)	Percent Maximum Density	Test Result
1	12	111.5	12.0	110.8	---	10.7	95	99.4	Pass
2	12	111.5	12.0	110.5	---	9.2	95	99.1	Pass
3	12	111.5	12.0	112.3	---	10.4	95	100+	Pass

Type of Field Density Test () ASTM D 1556 (X) ASTM D 2922 () ASTM D 2937
 Minimum Required Compaction Based on (X) AASHTO 1-180 (ASTM D 1557) () AASHTO 1-99 (ASTM D 698)


¹Compaction percent estimated from cone penetrometer reading obtained with a Brainard-Kilman Model S-214 hand-held cone penetrometer

Test No.	Soil Type	Elevation	Test Location
1	2	0-12	East end of pad
2	2	0-12	Center section of pad
3	2	0-12	West end of pad

Elevation Referenced to () NGVD () MSL (X) Other Inches below top of final fill

- | Soil Type |
|-------------------------------|
| 1 Structural Fill |
| 2 Final Grading Fill |
| 3 Mass Grading Fill |
| 4 Utility Backfill - Sanitary |
| 5 Utility Backfill - Water |
| 6 Utility Backfill - Storm |
| 7 Roadway Subgrade |
| 8 Stabilized Subgrade |
| 9 Base Course |
| 10 Other |

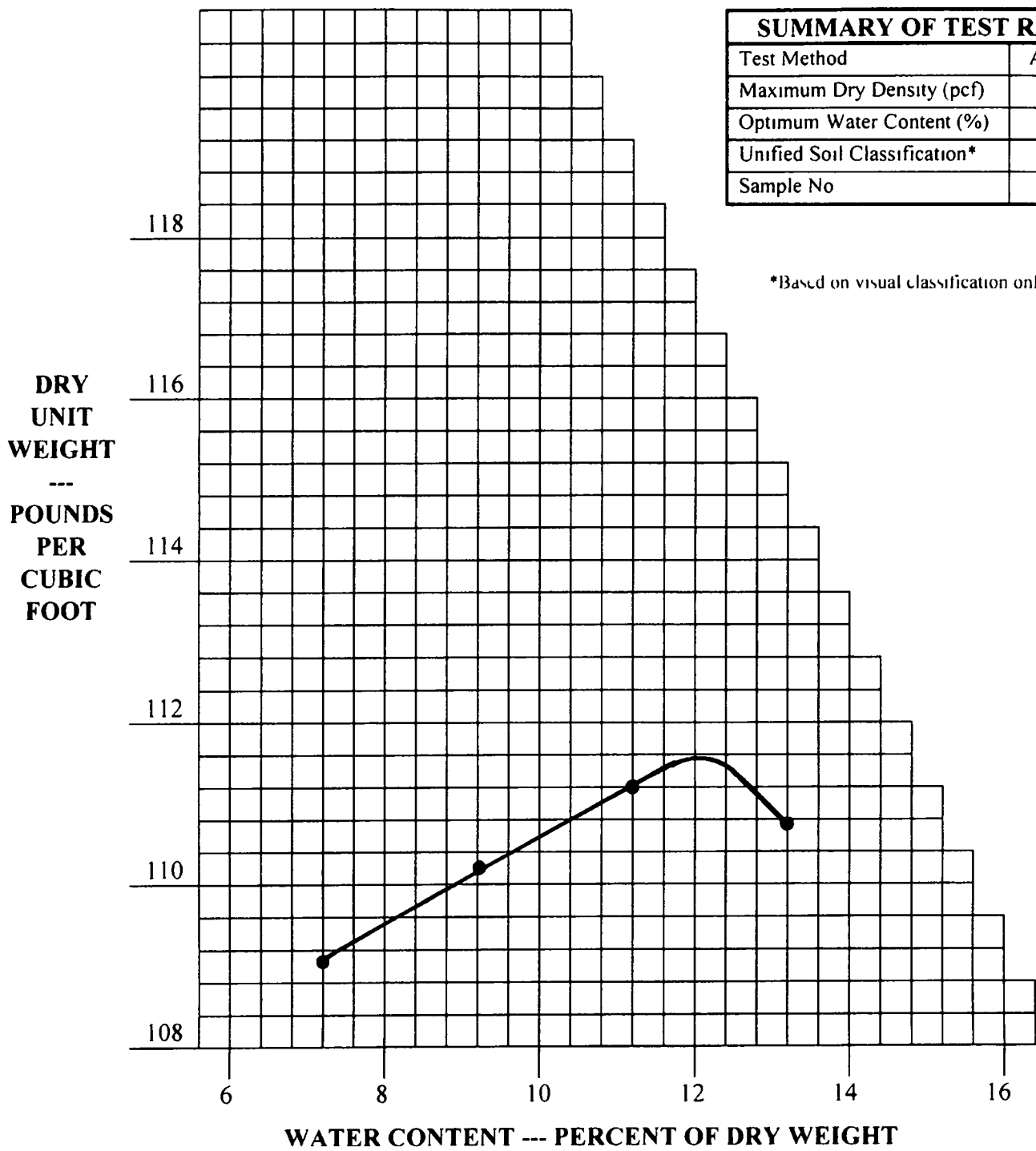
cc Client (2)



 Craig E. Dunkelberger, P.E.
 FL Registration No. 49932
 OCT 31 2001

SUMMARY OF TEST RESULTS	
Test Method	ASTM D1557
Maximum Dry Density (pcf)	111.5
Optimum Water Content (%)	12.0
Unified Soil Classification*	SP-SM
Sample No	3527

*Based on visual classification only



Sample Location	In-place subgrade, pool deck
Sample Description	Gray/brown medium to fine SAND slightly silty, trace clay (-200 5 8%)

MOISTURE - DENSITY RELATIONSHIP			
Gifford Residence 85 North Sewells Point Road Stuart, Florida			
DET		DUNKELBERGER ENGINEERING & TESTING, INC Geotechnical • Materials Testing/Inspection • Environmental	
Tested By	KM/RM	Date	10-25-01
Checked By	CD	Date	10-31-01
Project	01-10-1111	Sheet	2 of 2

COASTAL TESTING LABORATORY
P.O. BOX 2023
PALM CITY, FLORIDA 34991-2023
(561) 336-7161

RECEIVED
JUN 14 2001
BY: *[Signature]*

COMPACTION TEST REPORT
ASTM D 2937-00

DATE June 12, 2001

JOB NUMBER : 01-0612

PERMIT NUMBER : *5300* *[Signature]*

CLIENT : *A & G Pools*

CONTRACTOR : A & G Pools

JOB LEGAL : N/A

JOB ADDRESS : *85 North Sewalls Point Road*
Sewalls Point, FL

FILE

GILSON - SCOTT TRACY
(AMP 5143)

SOIL CLASSIFICATION & REMARKS A3 Firm brown sandy soil

TEST SAMPLE LOCATION 10' IS LR Corner - Center of Pad - 10' IS RF Corner

	<u>IN PLACE DRY DENSITY</u>	<u>MAXIMUM DRY DENSITY</u>	<u>% COMPACTION</u>
1)	108.8	110.4	98.6
2)	109.2	110.4	98.9
3)	108.0	110.4	97.8

RESPECTFULLY SUBMITTED:

Ernesto Velasco
ERNESTO VELASCO, P.E.

COASTAL TESTING LABORATORY
P.O. BOX 2023
PALM CITY, FLORIDA 34991-2023
(561) 336-7161

MOISTURE DENSITY RELATIONSHIP

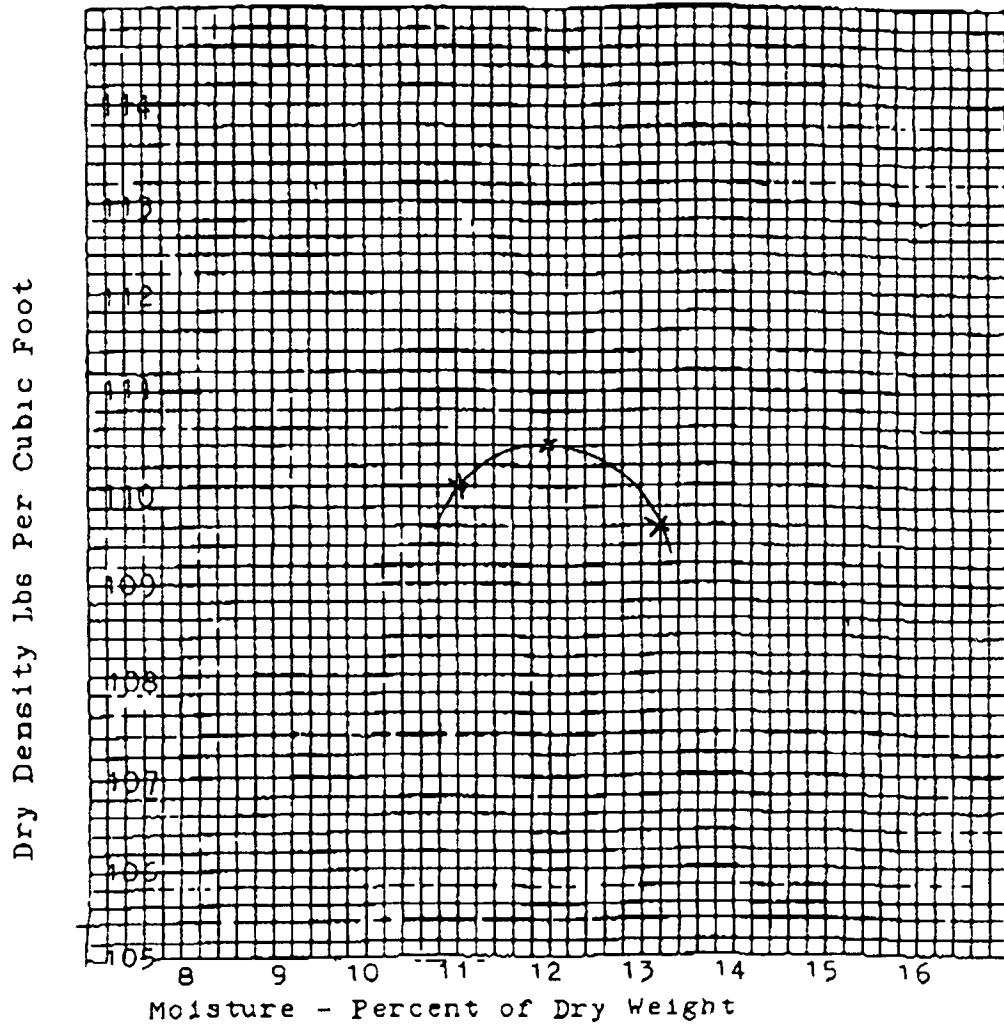
ASTM 1557-00

DATE June 12, 2001

CONTRACTOR A & G Pools

JOB NUMBER 01-0612

PERMIT NUMBER 5380



Air conditioning pad: A concrete slab or other device employed to support any air conditioning equipment, placed on the finished grade of a lot or otherwise projecting from an exterior wall of any structure. (Ord. No. 111, Part I, § 1, 9-18-78)

Alterations: As applied to a building or structure, means a change or rearrangement in the structural parts or in the exit facilities or an enlargement thereof, whether by extending on a side or by increasing in height, or the moving from one location or position to another.

Area, lot: The term "lot area" shall mean the total area within the property lines, excluding external streets.

Building: A structure with or without a roof, intended for shelter, housing or enclosure other than a boundary wall or fence.

Building, accessory: An accessory building shall mean a subordinate building, the use of which is customarily incidental to that of the main or principal building on a lot, whether or not incorporated in or connected to the main building by a common roof, or by a covered, enclosed or air conditioned walkway, or otherwise.

Building line: The line established by law, beyond which a building shall not extend, except as specifically provided herein. Also referred to herein as "set back line."

Building, front line of: The line of that face of the building nearest the front line of the lot. The front line of a waterfront or riverfront lot shall be the line abutting the street serving the lot, and the lot line bounded by water shall be considered the rear line.

Court: An unoccupied open space, other than a yard, which is bounded on three (3) or more sides by walls in excess of three (3) feet in height, at least one (1) but not more than three (3) of which are the walls of a building.

Coverage: The percentage of the plot or lot area covered by the building area.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~THU~~ ~~FRI~~ ~~SAT~~ ~~SUN~~ ~~2001~~; Page 3 of 3.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5380	GILFORD	POOL DECK	Passed	loc. Fest.
N (16)	35 S. SEWALL'S POINT RD. A & G CONCRETE POOLS			Waterfall area only INSPECTOR <i>[Signature]</i> 8/31
✓ S (7)	5489 STRACUZZI (283-2815) (260-1493 con) 12 RIO VISTA DR. RUCCOLO	V/G PLMBG.	Passed	INSPECTOR <i>[Signature]</i> 8/31
✓ N (13)	5324 HECKENBERG SLAGOON ISLAND CT. U/B (JAMIE 718-2777)	MAS. WALL - FINAL ENTRY COL - FINAL	Passed Passed	PN 5405 - ENTRY COL. (STAT?) INSPECTOR <i>[Signature]</i> 8/31
✓ S (9)	T/R TENNY 10 S. SEWALL'S POINT RD GORDON'S TREE SERVICE	FIELD VERIF.	Passed PN 0494 8/31/01	(AMENDED PLAN) (W/O COMB. BLDG) INSPECTOR <i>[Signature]</i> 8/31
✓ S (8)	T/R AYLES 15 S. RIVER RD. MONTE'S TREE SERVICE	FIELD VERIF.	Passed PN 0493 8/31/01	INSPECTOR <i>[Signature]</i> 8/31
✓ N (15)	5482 RAO 30 CASTLE HILL WAY FRITZ IRRIGATION	IRRIGATION - FINAL	Passed	MPN 5192 INSPECTOR <i>[Signature]</i> 8/31
✓ S (12)	5521 FOGUA 102 ABKIE COURT FOGUA CONTRACTING	IRRIGATION - FINAL	Passed	MPN 5228 INSPECTOR <i>[Signature]</i> 8/31

OTHER _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ~~MARCH 1~~, 2008 Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5068	WIMER	WATER	Failed	? clarify headlap!
(7)	19 RUDOLAND. LEAM	ROOF - IN PROGRESS		might be o.k? INSPECTOR
5022	SMITH	'		(add 2 thr. rods)
(5)	133.5 RIVER RD MACARI	TRUSS ENG. + SHEATHING	Passal Passal	(1st floor ceiling change) INSPECTOR
5693	BREWER	SHEATHING / IN	Failed	
(8)	12 COPAIRE STUART	TAG (LATE)		INSPECTOR
5185	JONES	STEEL	Passal	
	14 HERON'S NEST JONES			INSPECTOR
5612	De Galma	El. rough	Passal	(El. to protection w.)
(4)	24 W. High Pt.			INSPECTOR
5691	DE GALMA	ROUGH GAS	Passal	(El. to ground)
(3)	24 W HIGH PT. L			INSPECTOR
5380	GIFFORD	CHECK POOL	Passal	()
(2)	85 N SPR A + G POOLS	IN PROGRESS		INSPECTOR

OTHER _____



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS B5 N. SEWALLS PT.

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

POOL LIGHT NICHE - NO PLANS / PERMIT ON
SITE

~~FEE \$ 30~~

~~Steve~~

~~5/28/02~~

~~Told of fine~~

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 5/24/02

GENE
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri May 24, 2007 Page of .

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5022	SMYTH 133 S River Rd McCary	ALL Rough-ins	 	CANCEL.
				INSPECTOR
✓ 5671	JACK + CAROL ATEN 103 ABBIE CT HARBOR BAY POOLS	SCREEN	FAILED	\$ 30
				INSPECTOR <u> </u>
✓ 5739	SOUTH GASICREK 67 N River Rd CONWAY	Plumbing + MECHANICALS	FAILED	
				INSPECTOR <u> </u>
5800	LOFFONP	POOL-NICHE	FAILED	\$ 30?
①	85 N. SEWALLS A+G CONCRETE POOLS			NO PLANS + PERMIT INSPECTOR <u> </u>
5804	JUSTICE 18 MIDDLE RD. RL	FURNING/SIDING	PASSED	
⑥				INSPECTOR <u> </u>
✓ 5022	SMYTHS 133 S. River Rd Paradigm	Partial on Sewer line	 	CANCEL.
				INSPECTOR
5788	HART 61 S RIVER RD JACKSON	POOL STEEL MAIN DRAIN	PASSED	
②				INSPECTOR <u> </u>

OTHER _____



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS 85 N Sewall's Pt Rd.

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

Pool final

Permit \$ 30.-

/ no permit/ Dogs on site
/ needs safety system
installed

(debate with A+G !?)

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 6/19/09






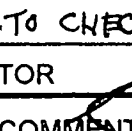
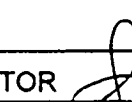

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ~~Mon~~ ~~Wed~~ ~~Fri~~ ~~Sept 11~~ , 2007 Page ___ of ___

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5788	HART.	POOL PLUMBING.	Passed	
(4)	61 S RIVER LD. JACKSON POOL	(PAM) 561-746-4910		INSPECTOR 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	128 N. Sewall Pt Rd 1 BRAZ Pepper			INSPECTOR 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	JONES	Tree rem.	Passed	
(3)	17419 Palmetto Dr. Harris Land Dev.			INSPECTOR 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5713	HOOVER	Final Additions		
(2)	175 S Sewall Pt Rd O/B	Electrical rough	Passed	INSPECTOR 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5822	DAVIS.	SHEATHING.	Passed	
(1)	5 PALM RD. OR ALUMA TILE			INSPECTOR 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5380	GIBSON	Pool Frame	Failed	Wood safety syst.
(4)	85 N SEWALL PT RD A+G CONCRETE POOLS	TRACY 878 7752		NEEDS TO CHECK RESULTS INSPECTOR 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TR	ThurLOW	Tree rem.	Passed	
(5)	18 Banyan Rd. O/B			INSPECTOR 

OTHER _____

9118

TRELLIS



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	9118	DATE ISSUED	MARCH 18, 2009
SCOPE OF WORK	REPLACE TRELLIS & INSTALL SKYLIGHT		
CONDITIONS			
CONTRACTOR:	SCOTT HOLMES BLDG		
PARCEL CONTROL NUMBER	353741-000-000-002402	SUBDIVISION	GOVT LOT 2
CONSTRUCTION ADDRESS	85 N SEWALLS PT RD		
OWNER NAME	LASKY		
QUALIFIER.	SCOTT HOLMES	CONTACT PHONE NUMBER	220-4780

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 8 30AM TO 12 00PM - MONDAY, WEDNESDAY & FRIDAY**

REQUIRED INSPECTIONS

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

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



Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number _____

Date DATE 3-16-09
OWNER/TITLEHOLDER NAME William & Karen Lasky Phone (Day) _____ (Fax) _____Job Site Address 85 N Sewell's Point Rd City Stuart State FL Zip 34996Legal Description 5 1/3 of S 18 2 acs of Gov Lot 2 Parcel Control Number 35 37-41-000-000-00240.2

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

Scope of work (please be specific) Replace felled trees & INSTALL NEW SKYLIGHT**WILL OWNER BE THE CONTRACTOR?**
(If yes, Owner Builder questionnaire must accompany application)
YES _____ NO XHas 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 \$ 2000. - 2500. -
(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 APPLICATIONCONTRACTOR/Company Scott J. Holmes Building Phone 220 4780 Fax 225-4744Street P.O. Box 2804 City Jensen Bch State FL Zip 34958State License Number 8GC055859 OR Municipality _____ License Number _____LOCAL CONTACT Scott Phone Number 220-4780

DESIGN PROFESSIONAL _____ Lic# _____ 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 AgreementCODÉ EDITIONS IN EFFECT THIS APPLICATION Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas) 2004 W/ 2006 REV
National Electrical Code 2005 Florida Energy Code 2004/6 Florida Accessibility Code 2004/6 Florida Fire Prevention Code 2004/6

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 OWNER'S LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
William LaskyState of Florida, County of Martin

This the _____ day of _____ 20 _____

by William Lasky who is personally

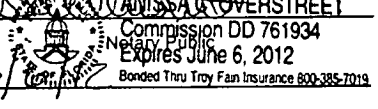
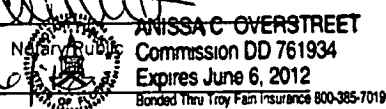
known to me or produced _____

as identification Anissa Overstreet
My Commission Expires 6/6/12CONTRACTOR SIGNATURE (required)
Scott J. HolmesOn State of Florida, County of Martin

This the _____ day of _____ 20 _____

by Scott J. Holmes who is personally

known to me or produced _____

as identification Anissa Overstreet
My Commission Expires 6/6/12

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105 3 4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105 3 2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

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

PERMIT # _____ TAX FOLIO # _____

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)
SZ 13 OF S 18 2 ACS OF GOV LOT 2
30-37 41 000-000-00240.2 85 N Sewalls Point Rd

GENERAL DESCRIPTION OF IMPROVEMENT Terrace, e sky light

OWNER NAME William Lasky
ADDRESS 85 N Sewalls Point Stuart FL 34996
PHONE NUMBER 772-220-4780 FAX NUMBER 772-225-4744

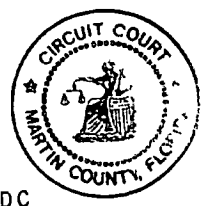
INTEREST IN PROPERTY _____
NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER) _____

CONTRACTOR Scott J. Holmes
ADDRESS PO Box 2804 Jensen Bch 34958 STATE OF FLORIDA
PHONE NUMBER 772-220-4780 FAX NUMBER MARTIN COUNTY 772-4744

SURETY COMPANY (IF ANY) _____
ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____
BOND AMOUNT _____

THIS IS TO CERTIFY THAT THE FOREGOING _____ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL

MARSHA EWING, CLERK
BY [Signature] DC
DATE 3/18/09



LENDER/MORTGAGE COMPANY _____
ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____ DATE _____

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 Scott J. Holmes
ADDRESS P.O. Box 2804 Jensen Bch, FL 34958
PHONE NUMBER 772-220-4780 FAX NUMBER 772-220-4744

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 _____
(THE 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 OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER
William Lasky

SIGNATORY'S TITLE/OFFICE owner
THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 18 DAY OF Mar, 2009

BY William Lasky 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 _____
Anissa Overstreet
NOTARY SIGNATURE

ANISSA C OVERSTREET
Commission DD 761934
Expires June 6, 2012
Bonded Thru Troy Fan Insurance 800-385-7019

NOTARY SEAL

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)

William Lasky
(Signature of Natural Person Signing Above)

INSTR # 2136166 OR BK 02379 PG 2430 RECD 03/18/2009 02:43:15 PM
Pg 2430 (1pg)
MARSHA EWING MARTIN COUNTY DEPUTY CLERK C Hunter



GRANFIELD • GRANFIELD

ARCHITECTS PA • AIA

3601 SE OCEAN BLVD #002
STUART FLORIDA 34996
TELEPHONE 772 283 6032
FACSIMILE 772 283 8150

FLORIDA AAC 000549



March 30, 2009

Sewalls Point Building Department

PN 9118
85NSPR

Dear Building Official,

The Trellis structure and tube skylight unit were installed at the Lasky Residence on North Sewalls Point Road per the permit drawings. If you have any questions please do not hesitate to call.

Sincerely,

Stewart Granfield

Granfield-Granfield Architects PA

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 6-17 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9118	Robby	Final	PASS	CLOSE
3	85 N Sewalls Scott Helmes			INSPECTOR <i>JW</i>
CE	113 NSPR	overgrown grass		FOVECON 6/17
CE	2 Island Rd	overgrown		FOVECON "
				INSPECTOR
9136	Spiegel	Final - retaining wall	PASS	CLOSE
1	14 Herons Nest Harbor Bay Maine			INSPECTOR <i>JW</i>
9169	Muller	Final	PASS	CLOSE
2	4 Copare Rd Folding Shutter			INSPECTOR <i>JW</i>
CE		OVERGROWN		
	N. RIVER (INDIALUCIE)			INSPECTOR
				INSPECTOR
				INSPECTOR

287, 0123

9212

GENERATOR & PAD



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	9212	DATE ISSUED	JULY 23, 2009
SCOPE OF WORK:	GENERATOR & PAD		
CONDITIONS :			
CONTRACTOR	SCOTT HOLMES BLDG		
PARCEL CONTROL NUMBER	353741-000-000-002402	SUBDIVISION	GOV LOT 2
CONSTRUCTION ADDRESS:	85 N SEWALLS POINT RD		
OWNER NAME.	LASKY		
QUALIFIER	SCOTT HOLMES	CONTACT PHONE NUMBER.	220-4780

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 8 30AM TO 12 00PM - MONDAY, WEDNESDAY & FRIDAY**

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

RECEIVED
DATE: 7-22-09
TOWN OF SEWALL'S POINT

Town of Sewall's Point
Date 7/20/09 BUILDING PERMIT APPLICATION Permit Number _____
OWNER/TITLEHOLDER NAME William Lasky Phone (Day) _____ (Fax) _____
Job Site Address 85 N Sewells Pl Rd City Stuart State FL Zip 34996
Legal Description S2/3 of 518.2 Acs of Goult Z Parcel Control Number 35-37-41-000-000-00240-2
Owner Address (if different) _____ City _____ State _____ Zip _____

Scope of work (please be specific) Generator & Pad install
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 \$10,000
(Notice of Commencement required when over \$2500 prior to first inspection or \$7 500 on HVAC change out)
Is subject property located in flood hazard area? VE10 _____ AE9 _____ AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY
Estimated Fair Market Value prior to improvement \$ _____
(Fair Market Value of the Primary Structure only Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company Scott J Holmes Building Phone 772-220-4780 Fax 772-225-4724
Street PO Box 2804 City J Bch State FL Zip 34958
State License Number CGC 055859 OR Municipality _____ License Number _____
LOCAL CONTACT Scott Phone Number 772-220-4780
DESIGN PROFESSIONAL _____ Lic# _____ 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 Energy Code 2007, Florida Accessibility Code 2007, Florida Fire Prevention Code 2007

NOTICES TO OWNERS AND CONTRACTORS.
1 YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT
2 THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES
3 BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50 95
4 THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID REF FBC 2004 W/ 2006 REVISIONS SECT 105 4 1, 105 4 1 1 - 5

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

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

OWNER SIGNATURE (required)
OR OWNER'S LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
[Signature]
State of Florida, County of Martin
This the 20 day of July 2009
by W Lasky who is personally

CONTRACTOR SIGNATURE (required)
[Signature]
On State of Florida, County of Martin
This the 20 day of July 2009
by Scott Holmes who is personally

known to me or produced as identification
[Signature]
My Commission Expires 6/6/12
ANISSA C. OVERSTREET
Commission DD 781934
Expires June 6, 2012
Bonded My Commission Expires

known to me or produced as identification
[Signature]
My Commission Expires 6/6/12
ANISSA C. OVERSTREET
Commission DD 781934
Expires June 6, 2012
Bonded My Commission Expires

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105 3 4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105 3 2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

NOTICE OF COMMENCEMENT
TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500 00

PERMIT # _____ TAX FOLIO # _____

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)
52/3 OF S 18 2 ACS OF GOV LOT 2 (less S 124' & N 300.33' of S 424.33' E of Rd & less TR taking in OR 137/366 less ELY 2' R/W PER OR 1096/1072)

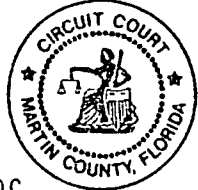
GENERAL DESCRIPTION OF IMPROVEMENT Generator
OWNER NAME William & Karen Lasky
ADDRESS 85 N Sewell Pt Rd Stuart FL 34996
PHONE NUMBER 772-220-4780 FAX NUMBER 772-225-4744

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

CONTRACTOR Scott J. Holmes Building
ADDRESS PO Box 2804 Jensen Bch FL 34958
PHONE NUMBER 772-220-4780 FAX NUMBER 772-225-4744

SURETY COMPANY (IF ANY) _____ THIS IS TO CERTIFY THAT THE
ADDRESS _____ FOREGOING 1 PAGE(S) IS A TRUE
PHONE NUMBER _____ FAX NUMBER _____ AND CORRECT COPY OF THE ORIGINAL
BOND AMOUNT _____

LENDER/MORTGAGE COMPANY _____ BY Marsha Ewing, Clerk
ADDRESS _____ DATE 7/22/09
PHONE NUMBER _____ FAX NUMBER _____



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 Scott Holmes Building
ADDRESS PO Box 2804 Jensen Bch FL 34958
PHONE NUMBER 772-220-4780 FAX NUMBER 772-225-4744

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES Scott J Holmes OF
Scott Holmes Building TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B),
FLORIDA STATUTES
PHONE NUMBER 772-220-4780 FAX NUMBER 772-225-4744

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 ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.



ANISSA GLOVERSTREET
Commission DD 761934
Expires June 6, 2012
Bonded thru Troy Fain Insurance 800-385-7019

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

SIGNATORY'S TITLE/OFFICE owner

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 20 DAY OF July, 2009

BY W Lasky AS owner FOR W Lasky
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALT OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN X OR PRODUCED IDENTIFICATION _____

TYPE OF IDENTIFICATION PRODUCED _____

[Signature]
NOTARY SIGNATURE/ SEAL

UNDER PENALTIES OF PERJURY, I DO 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 # 2158396 OR BK 02402 PG 1621 RECD 07/22/2009 10:08:35 AM
Pg 1621 (1pg)
MARSHA EWING MARTIN COUNTY CLERK

OK



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

VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER _____

***IF NOT PERFORMED IN CONJUNCTION WITH A MAIN BUILDING PERMIT NUMBER, THEN THE VERIFICATION OF PARCEL CONTROL NUMBER BELOW MUST BE COMPLETED

OWNERS NAME: William Laskey

CONSTRUCTION ADDRESS 85 N Sewalls Pt Rd

PERMIT TYPE RESIDENTIAL _____ COMMERCIAL _____

- ELECTRIC
- _____ PLUMBING
- _____ HVAC
- _____ IRRIGATION
- _____ FUEL GAS

TYPE OF SERVICE NEW SERVICE _____ EXISTING SERVICE _____ OTHER _____

SCOPE OF WORK. connect electrical to Generator

VALUE OF CONSTRUCTION \$ 2000~

_____ LOW VOLTAGE
TYPE OF EQUIPMENT <input type="checkbox"/> SECURITY _____ VACUUM _____ SOUND SYSTEM _____ LANDSCAPE _____ <input checked="" type="checkbox"/> OTHER
SCOPE OF WORK _____ VALUE _____

IN CONSIDERATION TO THE GRANTING OF THE ABOVE REQUESTED PERMIT, I DO HEREBY AGREE THAT I WILL, IN ALL RESPECTS, PERFORM THE WORK IN ACCORDANCE WITH THE APPROVED PLANS AND ALL APPLICABLE CODES

Danley M...
SIGNATURE OF LICENSED CONTRACTOR
2740 SW Martin Downs Palm City, Fl. 34990
ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME Power Com Electrical

TELEPHONE NO 772-223-9888 PLEASE PRINT FAX NO 772-223-9889

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER FL0002034

** WORK CAN NOT BEGIN UNTIL THIS VERIFICATION IS COMPLETED AND SUBMITTED TO THE BUILDING DEPARTMENT A PENALTY FEE WILL BE ASSESSED IF WORK IS STARTED PRIOR TO OBTAINING THIS PERMIT

VERIFICATION OF PARCEL CONTROL NUMBER

OWNER'S FULL NAME AS STATED ON DEED _____

PARCEL CONTROL # _____

SUBDIVISION _____ LOT _____ BLK _____ PHASE _____

SITE ADDRESS _____

SEND OR FAX TO TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

GENERATOR SPECIFICATIONS

MANUFACTURER Generac MODEL QTO48

NEW USED IF USED YEAR MANUFACTURED _____

MAXIMUM ELECTRICAL OUTPUT 48 KW

PROPOSED ELECTRICAL DEMAND SERVED 206 AMPS

FUEL SOURCE GASOLINE DIESEL LP OTHER _____

TANK SIZE 500 GALLONS

TANK TYPE UNDERGROUND ABOVE GROUND EXISTING TANK

IF EXISTING YEAR INSTALLED 2003 SUB BASE (ATTACHED TO GENERATOR) _____

MAXIMUM Db FULL LOAD 65 Db, EXERCISE/TEST 60 Db

GENERATOR LOCATION.

PROPOSED CLEARANCES TO STRUCTURE 30' FT (3' min non-combustibles – 5' combustible)

NFPA 37 (4 1 4) Engines Located Outdoors Engines, and their weatherproof housings if provided, that are installed outdoors shall be located at least 1.5 m (5 ft) from openings in walls and at least 1.5 m (5 ft) from structures having combustible walls. A minimum separation shall not be required where the following conditions exist:

- (a) The adjacent wall of the structure has a fire resistance rating of at least 1 hour
- (b) The weatherproof enclosure is constructed of noncombustible materials, and it has been demonstrated that a fire within the enclosure will not ignite combustible materials outside the enclosure

PROPOSED SETBACKS FROM PROPERTY LINES FRONT _____ ft SIDE _____ ft REAR _____ ft
5' MINIMUM SIDE SETBACK ALLOWED ONLY FOR EXISTING HOMES PRIOR TO 02/27/2007
Generators installed on newly developed or substantially improved lots after 02/27/2007 must meet current required setbacks. Ref Ordinance no 330

OUTSIDE MOUNTING REQUIRES A MINIMUM OF 4" POURED IN PLACE CONCRETE SLAB, OR OTHER ENGINEERED BASE TO MEET MINIMUM WIND LOADING

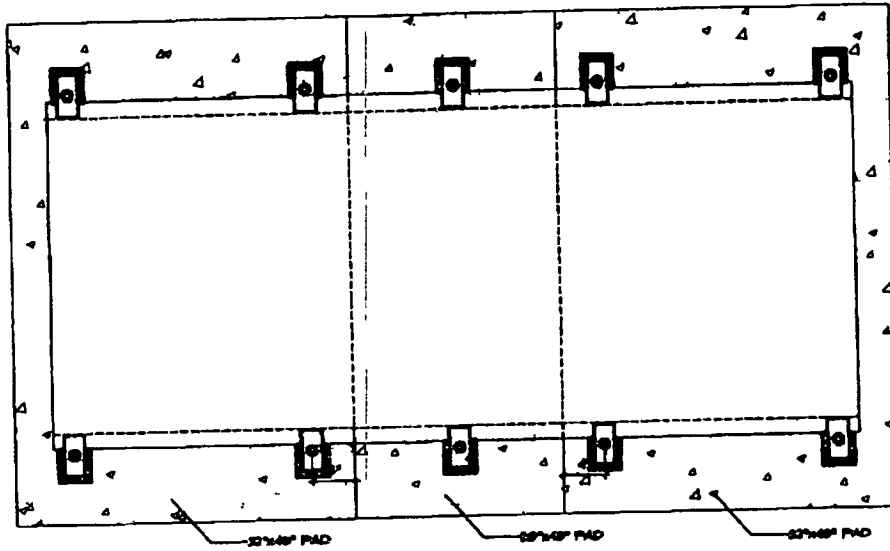
CONCRETE SLAB NEW EXISTING OTHER BASE _____

SLAB SIZE LENGTH 83" WIDTH 40" THICKNESS 10"

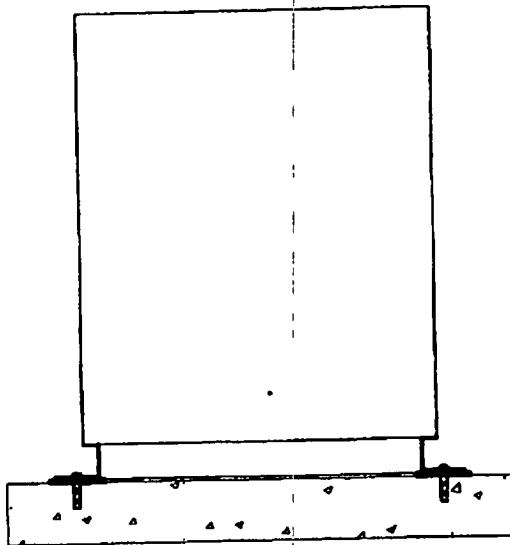
GENERATOR ANCHORING SPECIFICATIONS (SIZE, TYPE AND SPACING)
PROVIDE DETAIL BELOW

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN REVIEWED FOR CODE COMPLIANCE
DATE <u>7-23-09</u>
<u>g</u> BUILDING OFFICIAL

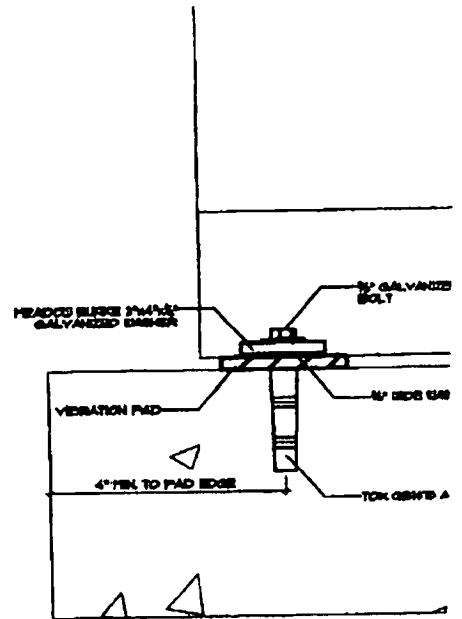
FRCC GENERATOR



1 PAD & BOLT LAYOUT SCALE: 1/4" = 1'-0"



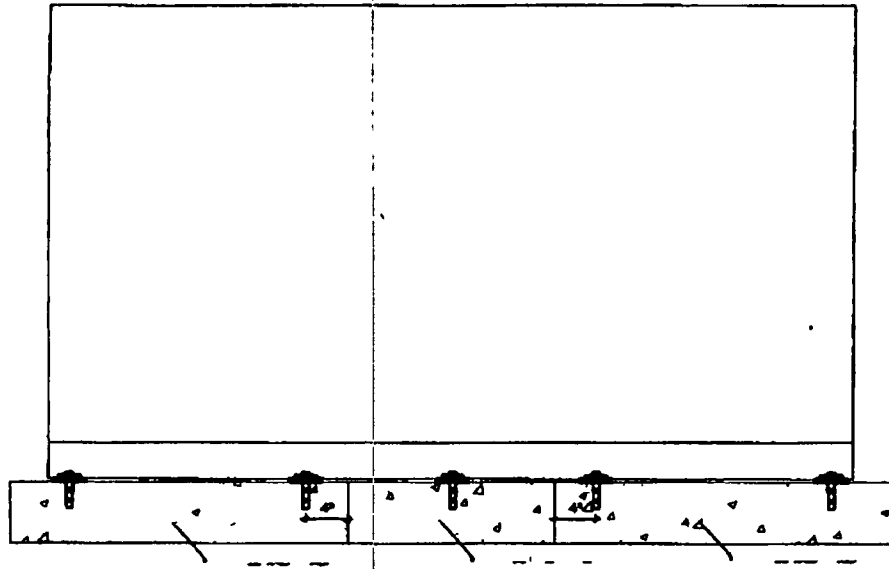
3 PAD & BOLT SECTION VIEW SCALE: 1/4" = 1'-0"



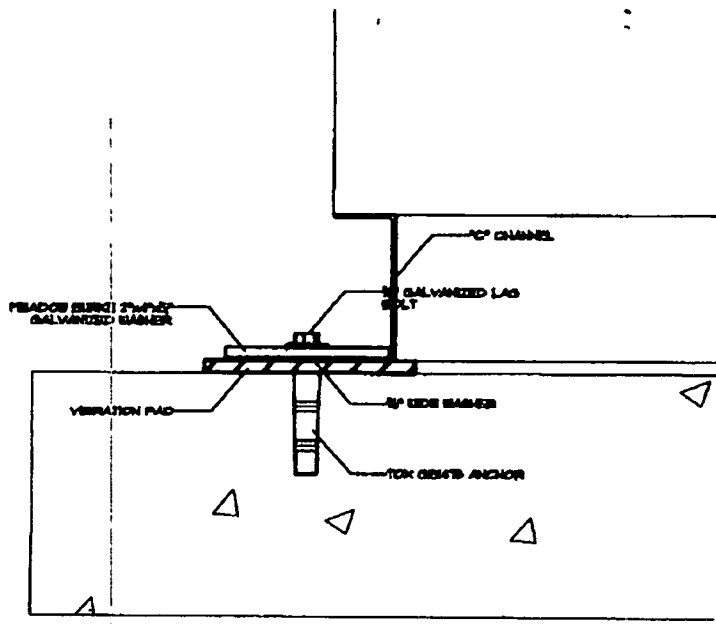
4 CONNECTION DETAIL

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

R. PAD #3



4 PAD & BOLT SECTION VIEW
SCALE: 1/2" = 1'-0"



5 CONNECTION DETAIL
SCALE: 3/4" = 1'-0"



HILLMAN ENGINEERING INC.
 250 SE 14th COURT - POMPAHO BEACH, FL 33062
 (407) 822-1414 FAX (407) 784-0825 E-Mail: hillman@hillman-engineering.com
 Division: Civil, Mechanical, Electrical & Instrumentation, Inspection, Site & Building Design

03/22/07
 Approved for
 AutoCAD Plot Area

FEATHERLITE GENERATOR PADS
 1010 SEMINOLE DRIVE SUITE #410
 FORT LAUDERDALE, FLORIDA 33304

DRAWN R. BENSON
 CHECKED H. HILLMAN
 DATE NOV-10-05
 SCALE AS SHOWN
 JOB NO. 2881-05

SHEET TYPE

A-1

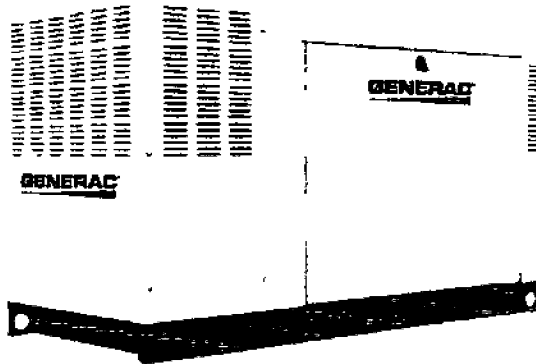
SHEET 1 OF 3

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

QT048

Liquid Cooled Gas Engine Generator Sets

Standby Power Rating
48 kW 60 Hz



GENERAC 4.2L ENGINE

Naturally Aspirated
Gaseous Fueled
Meets 2009 EPA Emission Regulations

STANDARD EQUIPMENT

- All input connections in one single area
- High coolant temperature shutdown
- Low oil pressure shutdown
- Low coolant level automatic shutdown
- Overspeed automatic shutdown
- Crank timer
- Exercise timer
- Oil drain extension
- Cool flow radiator
- Closed coolant recovery system
- UV/Ozone resistant hoses
- Watertight state of the art electrical connectors
- Mainline circuit breaker
- Radiator drain extension
- Battery charge alternator
- 2 Amp static battery charger
- Battery cables
- Battery rack
- Fan and belt guards
- Isochronous governor
- Flex fuel line
- Hour meter

FEATURES

- Innovative design and fully prototype tested
- UL2200 Listed
- Solid state frequency compensated voltage regulator
- Dynamic and static battery charger
- Sound attenuated acoustically designed enclosure
- Quiet test for low noise level exercise
- Acoustically designed engine cooling system
- High flow low noise factory engineered exhaust system
- State of the art digital control system with R100 digital control panel
- Watertight electrical connectors
- Rodent proof construction
- High efficiency, low distortion Generac designed alternator
- Vibration isolated from mounting base
- Matching Generac transfer switches engineered and tested to work as a system
- All components easily accessible for maintenance
- Electrostatically applied powder paint

GENERAC®

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
- FILE COPY

APPLICATION & ENGINEERING DATA

QT048

GENERATOR SPECIFICATIONS

TYPE Synchronous
 ROTOR INSULATION Class H
 STATOR INSULATION Class H
 TOTAL HARMONIC DISTORTION <5%
 TELEPHONE INTERFERENCE FACTOR (TIF) <50
 ALTERNATOR OUTPUT LEADS 3 PHASE 4 wire
 BEARINGS Sealed Ball
 COUPLING Flexible Disc
 LOAD CAPACITY (STANDBY RATING) 48 kW
 EXCITATION SYSTEM Direct

NOTE Generator rating and performance in accordance with ISO8528-5, BS5514, SAE J1348, ISO3046, and DIN6271 standards.

VOLTAGE REGULATOR

TYPE Electronic
 SENSING Single Phase
 REGULATION ± 1%
 FEATURES V/F Adjustable
 Adjustable Voltage and Gain
 LED Indicators

GENERATOR FEATURES

- Revolving field heavy duty generator
- Directly connected to the engine
- Operating temperature rise 120 °C above a 40 °C ambient
- Insulation is Class H rated at 150 °C rise
- All models are fully prototyped tested

CONTROL PANEL FEATURES

- SEVEN LED INDICATOR LIGHTS
 - System ready
 - Low fuel pressure
 - Low battery
 - Low oil pressure
 - High coolant temp/low coolant temp
 - Overspeed
 - Overcrank
- ADDITIONAL FUNCTIONS
 - Utility sensing
 - Delay on utility failure for engine start
 - Engine warm-up before transfer
 - Delay to retransfer to utility
 - Engine cooldown timer
 - Exerciser not set
 - Hour meter
- INTERNAL FUNCTIONS
 - 3 position switch (auto, off and manual)
 - 2 wire start for any transfer switch
 - Communicates with the Generac RTS transfer switch
 - Built-in 7 day exerciser
 - Selectable engine speed at exercise
 - Governor controller is built into the master control board
 - Temperature range -40 °C to 70 °C

Rating definitions - Standby Applicable for supplying emergency power for the duration of the utility power outage. No overload capability is available for this rating. (All ratings in accordance with BS5514, ISO3046 and DIN6271) (All ratings in accordance with BS5514, ISO3046, ISO8528 and DIN6271)

ENGINE SPECIFICATIONS

MAKE Generac
 MODEL V8
 CYLINDERS 6
 DISPLACEMENT 4.2 Liter
 BORE (inches) 3.81
 STROKE (inches) 3.74
 COMPRESSION RATIO 9.3:1
 INTAKE AIR SYSTEM Naturally Aspirated
 VALVE SEATS (Int & Exh.) Precision ground and hardened
 LIFTER TYPE Roller, Hydraulic

GOVERNOR SPECIFICATIONS

TYPE Electronic
 FREQUENCY REGULATION Isochronous
 STEADY STATE REGULATION ± 0.25%

ENGINE LUBRICATION SYSTEM

OIL PUMP Gear
 OIL FILTER Full flow spin-on cartridge
 CRANKCASE CAPACITY 6 Quarts

ENGINE COOLING SYSTEM

TYPE Pressurized Closed
 WATER PUMP FLOW 10.8 gal/min
 FAN SPEED 1050
 FAN DIAMETER 22 inches
 FAN MODE Puller

FUEL SYSTEM

FUEL TYPE Natural gas, propane vapor
 CARBURETOR Down Draft
 SECONDARY FUEL REGULATOR Standard
 FUEL SHUT OFF SOLENOID Standard
 OPERATING FUEL PRESSURE 5" 14" H₂O

ELECTRICAL SYSTEM

BATTERY CHARGE ALTERNATOR 12V 30 Amp
 STATIC BATTERY CHARGER 2 Amp
 RECOMMENDED BATTERY Group 24F, 525CCA
 SYSTEM VOLTAGE 12 Volts

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 FILE COPY

QT048

OPERATING DATA

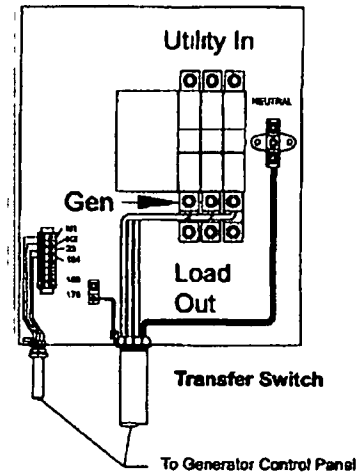
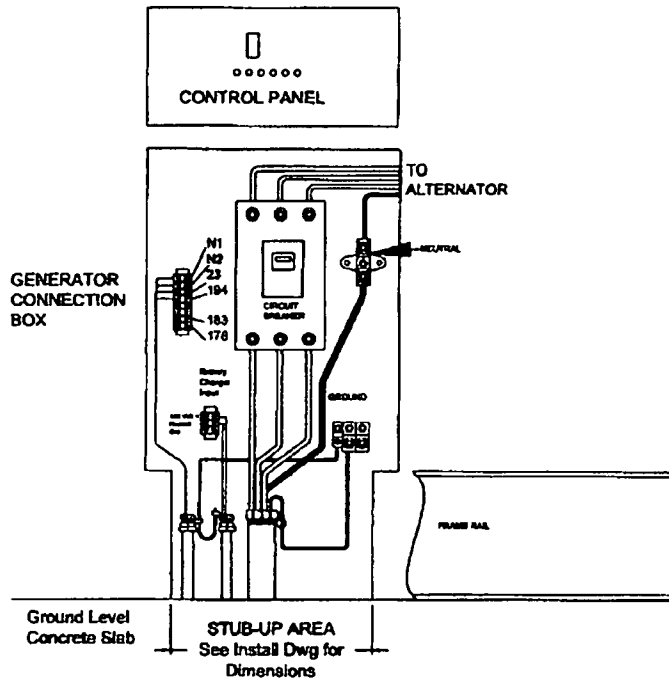
		QT048				
KW RATING		48				
ENGINE SIZE		4.2 Liter				
GENERATOR OUTPUT VOLTAGE/KW - 60Hz		kW - LP	Amps	kW - NG	Amps	CB Size
120/240V, 1-phase, 1.0 pf		48	200	46	192	200
120/208V, 3-phase, 0.8 pf		48	166	46	160	175
120/240V, 3-phase, 0.8 pf		48	144	46	138	150
277/480V, 3-phase, 0.8 pf		48	72	46	69	80
GENERATOR LOCKED ROTOR KVA AVAILABLE @ VOLTAGE DIP OF 35%						
Single phase or 208 3-phase		100				
480V 3-phase		110				
ENGINE FUEL CONSUMPTION (Natural Gas) (Propane)		Natural Gas		Propane		
		(ft³/hr)	(gal/hr)	cu ft/hr		
Exercise cycle		88	0.94	34.4		
25% of rated load		205	2.23	81		
50% of rated load		370	4.03	147		
75% of rated load		516	5.62	204		
100% of rated load		661	7.20	261		
ENGINE COOLING						
Air flow (inlet air including alternator and combustion air)	ft ³ /min	2,460				
System coolant capacity	US gal.	3.0				
Heat rejection to coolant	BTU/hr	165,000				
Max. operating air temp. on radiator	°C (°F)	60 (150)				
Max. ambient temperature	°C (°F)	50 (140)				
COMBUSTION AIR REQUIREMENTS						
Flow at rated power 60 Hz	cfm	235				
SOUND EMISSIONS IN DBA						
Exercising at 7 meters		60				
Normal operation at 7 meters		65				
EXHAUST						
Exhaust flow at rated output 60 Hz	cfm	395				
Exhaust temp. at muffler outlet	°F	1100				
ENGINE PARAMETERS						
Rated synchronous RPM	60 Hz	1800				
HP at rated KW	60 Hz	75				
POWER ADJUSTMENT FOR AMBIENT CONDITIONS						
Temperature Deration						
3% for every 10 °C above - °C		25				
1.85% for every 10 °F above - °F		77				
Altitude Deration						
1% for every 100 m above - m		183				
3% for every 1000 ft. above - ft.		600				

RATING All three phase units are rated at 0.8 power factor. All single phase units are rated at 1.0 power factor. **STANDBY RATING.** Standby ratings apply to installations served by a reliable utility source. The standby rating is applicable to varying loads for the duration of a power outage. There is no overload capability for this rating. Ratings are in accordance with ISO-3046-1, BS5514, and DIN8271. Maximum wattage and current are subject to and limited by such factors as fuel Btu content, ambient temperature, altitude, engine power and condition. Design and specifications are subject to change without notice.

KW rating is based on LPG Fuel and may derate with natural gas.

INTERCONNECTIONS

QT048

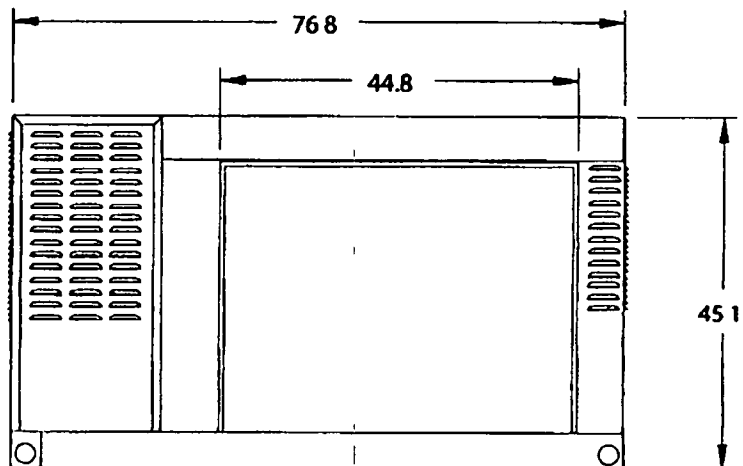
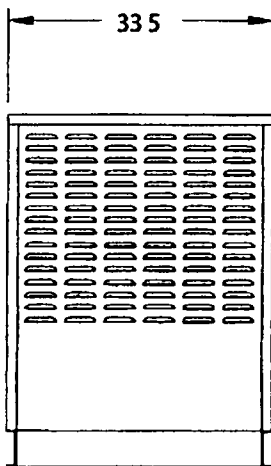


CIRCUIT BREAKER SIZE

KW	VOLTS /	AMPS	LUG SIZE
48/46	240 1ø	200	#6 to 300 mcm
48/46	208 3ø	175	#6 to 300 mcm
48/46	240 3ø	150	#6 to 300 mcm
48/48	480 3ø	80	#6 to 300 mcm

Installation Drawing Ref. No. 0G5868

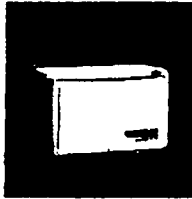
INSTALLATION LAYOUT



WEIGHT 1740 lbs.

GENERAC

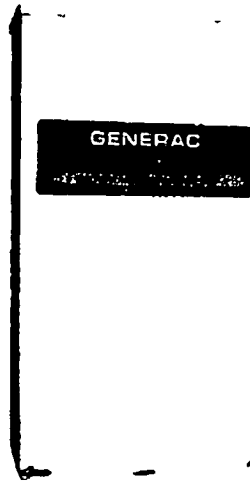
Generac Power Systems, Inc • S45 W28290 HWY. 59, Waukesha, WI 53189 • generac.com
 ©2008 Generac Power Systems, Inc. All rights reserved. All specifications are subject to change without notice. Bulletin 0177710589/Printed in U.S.A. 06,04, rev 03.09



STANDBY GENERATOR ACCESSORIES

RTS Automatic Transfer Switch

100 - 400 Amps 600 VAC



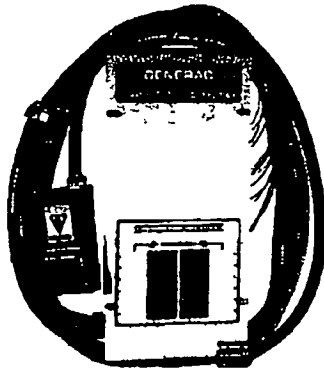
100 - 400 Amp RTS NEMA 3R

DESCRIPTION

Generac RTS automatic transfer switches are designed to operate with the digital control used on air-cooled generators and the Generac R100 control used on liquid-cooled QT series gaseous generators from 8 kW through 60 kW. The RTS transfer switch will operate only with the Generac R100 controller. The 100, 200 and 400 amp open transition switches are available in single and 3 phase configurations for 120/240, 120/208 and 120/240 3 phase at 100, 200 and 400 amp ratings and 277/480 at the 100 and 200 amp rating. It is available as a stand-alone switch or for single phase with a built in 8, 10, 12, 14 or 16-circuit load center to supply only those circuits that are essential during an emergency. All standard and load center transfer switches are UL and CUL Listed and suitable for use as optional standby systems (NEC702)

STANDARD FEATURES

All RTS transfer switches are housed in a steel NEMA 1 or aluminum NEMA 3R enclosure, with electrostatically applied and baked powder paint. The Heavy Duty Generac Contactor is a UL recognized device, designed for years of service. The control connection between the RTS and the Generator Control panel is through #14 wires. The control at the generator handles all the timing, sensing and exercising functions.



100 AMP TRANSFER SWITCH

This 100 amp Transfer switch has an integrated load center for picking up the emergency circuits. It is especially useful where the main service is large and only a portion of the building load will be served by the generator. Internal point to point wiring for the generator connection and the 8, 10, 12, 14 or 16 circuits and circuit breakers from the main distribution point are included.

SERVICE ENTRANCE RATED SWITCH

The Generac Service Entrance Rated Transfer Switches are available in 100, 200 and 400 amp ratings in single phase applications. The switches are UL 1008 listed with 100, 200 or 400 amp UL rated Circuit Breakers on the Utility side of the transfer contactor for full downstream protection. The enclosure is rated for NEMA 3R installation and is fully protected from the elements.

GENERAC®

FUNCTIONS

All Timing and sensing functions originate in the R-100 controller

Utility voltage drop-out	-- -- -- -- --	<60%
Timer to generator start	-- -- -- -- --	15 seconds
Engine warm up delay	-- -- -- -- --	10 seconds
Standby voltage sensor	-- -- -- -- --	90%
Utility voltage pickup	-- -- -- -- --	>80%
Re-transfer time delay	-- -- -- -- --	15 seconds
Engine cool-down timer	-- -- -- -- --	60 seconds
Exerciser	-- -- -- -- --	15 minutes every 7 days

The transfer switch can be operated manually without power applied.

SPECIFICATIONS

Amps	100	100	100	200	200	400	400
Voltage	120/240, 1Ø	120/240, 1Ø 120/208, 3Ø 277/480, 3Ø	120/240, 1Ø	120/240, 1Ø 120/208, 3Ø 277/480, 3Ø	120/240, 1Ø	120/240, 1Ø 120/208, 3Ø	120/240, 1Ø
Load Transition Type (Automatic)	Open Transition w/ 8, 10, 12, 14 or 16 Cir Load Center	Open Transition	Open Transition Ser Ent. Rated	Open Transition	Open Transition Ser Ent. Rated	Open Transition	Open Transition Ser Ent. Rated
Enclosure Type	NEMA 1	NEMA 3R	NEMA 3R	NEMA 3R	NEMA 3R	NEMA 3R	NEMA 3R
Express Install Kit Included	Yes	No	No	No	No	No	No
Withstand Rating (Amps)	10,000	10,000	10,000	10,000	10,000	18,000	18,000
Lug Range	2/0 - #14			400 MCM - #4		600 MCM - #4 or 2-250 MCM	
External Dimensions (H" x W" x D")	27 x 13 x 7	20 x 15.2 x 7.3 24.1 x 20.5 x 7.3 24.1 x 20.5 x 7.3 38.1 x 24.4 x 10.2	20 x 15.2 x 7.3	20 x 15.2 x 7.3 24.1 x 20.5 x 7.3 24.1 x 20.5 x 7.3 48.1 x 30.6 x 13.3	30 x 16.5 x 7.3	36.1 x 24.38 x 10.2 36.1 x 24.38 x 10.2 36.1 x 24.38 x 10.2	40 x 30.8 x 10.5
Unit Weight (lbs)	30	26	42	48	50	95	105



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

8-3

2009

Page

1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9214	Stutt	Final door	Pass	Close
9AM	46 Rio Vista Dr OB			INSPECTOR <i>[Signature]</i>
9190	Braid 84 N Sewalls Pt Hammerhead	Final deck	Pass	Close
				INSPECTOR <i>[Signature]</i>
	102 N SPT RD DAVE STABBT	335-1658		INSPECTOR
9212	Kealy	Adrian - gann	Pass	
1PM	85 N Sewalls Scott Holmes			INSPECTOR <i>[Signature]</i>
				INSPECTOR
				INSPECTOR
				INSPECTOR
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **8-31** 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9239	Helfman 8 Ridgeland Dr Skyhigh Siding	tin tag DRY IN & METAL	PASS	INSPECTOR <i>JH</i>
9193	Allen 171 S River Rd On Shore Roofing	Roof final	PASS	CLOSE INSPECTOR <i>JH</i>
9202	Locky 85 N Sewalls Pt Scott Holmes	Final (gen-pa)	PASS	CLOSE INSPECTOR <i>JH</i>
9204	Morales 10 N Ridgeway Seaside Roofing	Final-Roof	PASS	CLOSE INSPECTOR <i>JH</i>
				INSPECTOR
				INSPECTOR
				INSPECTOR

9841

BOATLIFT

&

ELECTRIC



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	9841	DATE ISSUED:	JULY 27, 2011
SCOPE OF WORK.	BOATLIFT W/ELECTRIC		
CONDITIONS.			
CONTRACTOR	SCOTT HOLMES BUILDING		
PARCEL CONTROL NUMBER.	353741000-000-002402	SUBDIVISION	PT GOV LOT 2
CONSTRUCTION ADDRESS	85 N SEWALLS PT RD		
OWNER NAME	CAHAN		
QUALIFIER.	SCOTT HOLMES	CONTACT PHONE NUMBER.	220-4780

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

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

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

REQUIRED INSPECTIONS

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

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

Date 7-21-11 **Town of Sewall's Point** BUILDING PERMIT APPLICATION Permit Number 9841

OWNER/TITLEHOLDER NAME KAREN Cahan Phone (Day) 7722204780 (Fax) 7722203722

Job Site Address 85 N Sewalls Pt. Rd City Stuart State FL Zip 34996

Legal Description 52 1/2 of S 18.2 ACS of GOV LOTZ (LESS S 124' TR TO KING IN 02 131) 200 & LESS 219 21' E/W PER Parcel Control Number 35-37-41-000-000-00240-2000

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

Scope of work (please be specific). Lift (Boat)

WILL OWNER BE THE CONTRACTOR?
(If yes, Owner Builder questionnaire must accompany application)
YES _____ NO X
Has a Zoning Variance ever been granted on this property?
YES _____ (YEAR) _____ NO _____
(Must include a copy of all variance approvals with application)

COST AND VALUES (Required on ALL permit applications)
Estimated Value of Improvements \$ 9000
(Notice of Commencement required when over \$2500 prior to first inspection \$7 500 on HVAC change out)
Is subject property located in flood hazard area? VE10 _____ AE9 _____ AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY
Estimated Fair Market Value prior to improvement \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company Scott J Holmes Building Phone 7722204780 Fax 7722203722

Street P.O. Box 2804 City Glenese Bch State FL Zip 34998

State License Number GC055809 OR Municipality _____ License Number _____

LOCAL CONTACT Scott Phone Number 7722204780

DESIGN PROFESSIONAL _____ Phone Number _____

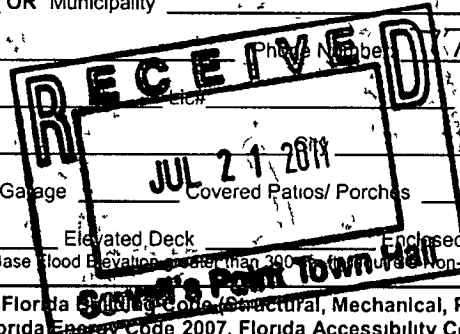
Street _____ State _____ Zip _____

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 390 feet from the shore. 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 Energy Code 2007, Florida Accessibility Code 2007, Florida Fire Prevention Code 2007



NOTICES TO OWNERS AND CONTRACTORS:
1 YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT
2 THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES
3 BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95
4 THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID REF FBC 2004 W/ 2006 REVISIONS SECT 105 4 1, 105 4 1 1 - 5

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

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

OWNER SIGNATURE (required)
OR OWNER'S LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Karen Cahan

CONTRACTOR SIGNATURE (required)
Scott J Holmes

State of Florida - County of Martin

State of Florida, County of _____

This the 15 day of July, 2011

This the 15 day of July, 2011

by Karen Cahan who is personally

by Scott J Holmes who is personally

known to me or produced

known to me or produced

as identification ANISSA OVERTSTREET

as identification ANISSA OVERTSTREET

Notary Public

Notary Public

My Commission Expires 6/6/12

My Commission Expires 6/6/12

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105 3 4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105 3 2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

NOTICE OF COMMENCEMENT
TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500 00

PERMIT # _____ TAX FOLIO # _____

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)

523 OF S 18 2 ACS OF COV LOT 2 (less 5124' x N 300 33 of 5424.3 E of Rd E less TR to King IN OR 137/366 FLESS ELY 2' R/W per OR 1096/11072)

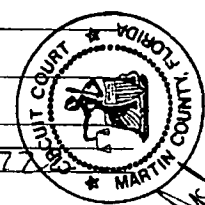
85 N Sewalls Pt Rd

GENERAL DESCRIPTION OF IMPROVEMENT Boat Lift

OWNER NAME Karen Cahan
ADDRESS 85 N Sewalls Pt Rd Stuart FL 34996
PHONE NUMBER 7722204780 FAX NUMBER 7722203722

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

CONTRACTOR Scott J Holmes Building
ADDRESS P.O. Box 2804 Jensen Bch 34958
PHONE NUMBER 7722204780 FAX NUMBER 7722203722



SURETY COMPANY (IF ANY) N/A
ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____
BOND AMOUNT _____

LENDER/MORTGAGE COMPANY N/A
ADDRESS _____
PHONE NUMBER _____ FAX NUMBER _____

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 Scott J Holmes Building
ADDRESS P.O. Box 2804 Jensen Bch 34958
PHONE NUMBER 7722204780 FAX NUMBER 7722203722

STATE OF FLORIDA
MARTIN COUNTY

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

MARSHA EWING CLERK
[Signature]
DATE 7-12-2011

INST R 2284710
OR BK 02528 FG 0526
Pg 0526 (1 of 1)
RECORDED 07/21/2011 10:45:23 AM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY L.Pethinesch1

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES Scott Holmes OF SH Building TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713 13(1)(B), FLORIDA STATUTES
PHONE NUMBER 7722204780 FAX NUMBER 7722203722

EXPIRATION DATE OF NOTICE OF COMMENCEMENT July 12 2012
(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 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

Karen Cahan
SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

SIGNATORY'S TITLE/OFFICE owner

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 15 DAY OF July, 2011

BY Karen Cahan AS owner FOR self
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN X OR PRODUCED IDENTIFICATION _____

TYPE OF IDENTIFICATION PRODUCED _____

[Signature]
NOTARY SIGNATURE/ SEAL

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)

Karen Cahan
(Signature of Natural Person Signing Above)



ANISSA C OVERSTREET
Commission DD 761934
Expires June 6 2012
800 The Troy Fan Insurance 800-685-7019

gh



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

VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER _____

***IF NOT PERFORMED IN CONJUNCTION WITH A MAIN BUILDING PERMIT NUMBER, THEN THE VERIFICATION OF PARCEL CONTROL NUMBER BELOW MUST BE COMPLETED

OWNERS NAME Karen Ochan

CONSTRUCTION ADDRESS 85 N Sewalls Pt Rd

PERMIT TYPE _____ RESIDENTIAL _____ COMMERCIAL

- ELECTRIC
- PLUMBING
- HVAC
- IRRIGATION
- FUEL GAS
- ROOFING

TYPE OF SERVICE _____ NEW SERVICE _____ EXISTING SERVICE OTHER

SCOPE OF WORK wire boat lift

VALUE OF CONSTRUCTION \$ 300 -

<p>_____ LOW VOLTAGE</p> <p>TYPE OF EQUIPMENT _____ SECURITY _____ VACUUM _____ SOUND SYSTEM _____ LANDSCAPE _____ OTHER</p> <p>SCOPE OF WORK _____ VALUE _____</p>

IN CONSIDERATION TO THE GRANTING OF THE ABOVE REQUESTED PERMIT, I DO HEREBY AGREE THAT I WILL, IN ALL RESPECTS, PERFORM THE WORK IN ACCORDANCE WITH THE APPROVED PLANS AND ALL APPLICABLE CODES

[Signature] 4249 S.W. High Meadows Palm City
SIGNATURE OF LICENSED CONTRACTOR ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME POWERCOM

TELEPHONE NO 772-220-4780 FAX NO 772-220-5722

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER EC030

** WORK CAN NOT BEGIN UNTIL THIS VERIFICATION IS COMPLETED AND SUBMITTED TO THE BUILDING DEPARTMENT A PENALTY FEE WILL BE ASSESSED IF WORK IS STARTED PRIOR TO OBTAINING THIS PERMIT

VERIFICATION OF PARCEL CONTROL NUMBER

OWNER'S FULL NAME AS STATED ON DEED _____

PARCEL CONTROL # _____

SUBDIVISION _____ LOT _____ BLK _____ PHASE _____

SITE ADDRESS _____

SEND OR FAX TO TOWN OF SEWALL'S POINT BUILDING DEPARTMENT



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

Electrical Load Calculations

Electrical Contractor Powercom License No FCC0002034
Phone # 7722204780 Fax # 7722203722
Project Boat Lift Location 85 Sewalls Pt Rd
Existing Service Feeder Size 3 C Existing Panel Size 200 Amp
Main Breaker Size 200 Amp Number of Breakers 4

Existing Loads

Sq Ft X 3 watts per sq ft
Appliance cir @1500 watts each
Laundry cir @ 1500 watts each
Range @ 8 kw
Dishwasher and disposal @ 1500 watts each
Microwave @ 2000 watts
Water heater @ 4.5 kw
Tank less water heater
Dryer @ 5 kw
Refrigerator @ 1500 watts
Bathroom 1 @ 1500 watts
Sprinkler Pump
Other Dock Pedestal 1,100
Other Lights 100
Other
Subtotal Watts 10,320

New Loads

Pool pump
Pool light
Heat pump
Chlorine generator
Blower
Boatlift
Other Boat Lift 5,320
Other
Other
5,320 Total Watts
First 10 kw @ 100% 5,320 watts
Remainder @ 40%
A/C heat @ 100%

Total watts 6,420 divided by 240 volts = 26.75 Amps 200A Amp service provided

Prepared by [Signature] Date



Florida Department of Environmental Protection

Southeast District
Port St Lucie Branch Office
1801 SE Hillmoor Drive Suite C-204
Port St Lucie, FL 34952
(772) 380-1260

Rick Scott
Governor

Jennifer Carroll
Lt Governor

Herschel T Vinyard Jr
Secretary

JUL 12 2011

Karen Cahan
85 North Sewall's Point Road
Stuart, FL 34996

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Re File No. 43-0132890-002
File Name Cahan, Karen

Dear Ms Cahan.

On June 20, 2011, we received your application for an exemption to perform the following activity install a boatlift within an existing slip, as shown on the attached drawings The project is located in the St Lucie River, Class III Waters of the State, adjacent to 85 North Sewall's Point Road, Stuart (Section 35, Township 37 South, Range 41 East), in Martin County (27° 12' 42 91" North Latitude, 80° 12' 31 93" West Longitude)

Your application has been reviewed to determine whether it qualifies for any of three kinds of authorization that may be necessary for work in wetlands or waters of the United States The kinds of authorization are (1) regulatory authorization, (2) proprietary authorization (related to state-owned submerged lands), and (3) federal authorization The authority for review and the outcomes of the reviews are listed below. Please read each section carefully Your project may not have qualified for all three forms of authorization If your project did not qualify for one or more of the authorizations, refer to the specific section dealing with that authorization for advice on how to obtain it.

1 Regulatory Review. -EXEMPTION VERIFIED

The Department has the authority to review your project under Part IV of Chapter 373, Florida Statutes (F S), Title 62, Florida Administrative Code (F.A.C.), and in accordance with operating agreements executed between the Department and the water management districts, as referenced in Chapter 62-113, F.A.C

Based on the information you submitted, we have determined that your project is exempt from the need to obtain a DEP Environmental Resource Permit under Rule 40E-4 051(3)(b), F A C

2 Proprietary Review. -GRANTED

The Department acts as staff to the Board of Trustees of the Internal Improvement Trust Fund (Board of Trustees) and issues certain authorizations for the use of sovereignty submerged lands. The Department has the authority to review your project under Chapters 253 and 258, F.S., and 18-21, F.A.C., and Section 62-343.075, F.A.C.

Your project will occur on sovereignty submerged land and will require authorization from the Board of Trustees to use public property. As staff to the Board of Trustees, we have reviewed the proposed project and have determined that, as long as it is located within the described boundaries and is consistent with the attached general consent conditions, the project qualifies for a consent by rule to use sovereignty submerged lands. Therefore, pursuant to Chapter 253.77, Florida Statutes, you may consider this letter as authorization from the Board of Trustees to perform the project.

3 Federal Review (SPGP). -GRANTED

Federal authorization for the proposed project is reviewed by DEP pursuant to an agreement between the Department and the U.S. Army Corps of Engineers (Corps). The agreement is outlined in a document titled *Coordination Agreement Between the U.S. Army Corps of Engineers and the Florida Department of Environmental Protection State Programmatic General Permit, Section 10 of the Rivers and Harbor Act of 1899 and Section 404 of the Clean Water Act.*

Your project has been reviewed for compliance with a State Programmatic General Permit (SPGP). As shown on the attached drawings, the proposed project is consistent with the SPGP program. The attached Corps general conditions apply to your project. No further permitting for this activity is required by the Corps.

This exemption verification is based on the information you provided the Department and the statutes and rules in effect when the information was submitted. This verification will expire after one year, and will not be valid at any other time if site conditions materially change, the project design is modified, or the statutes or rules governing the exempt activity are amended. However, the activity may still be conducted without further notification to or verification from the Department after the one-year expiration of this verification, provided 1) the project design does not change, 2) site conditions do not materially change; and 3) there are no changes to the statutes or rules governing the exempt activity. In the event you need to re-verify the exempt status for the activity after the one-year expiration of this verification, a new application and verification fee will be required. Any substantial modifications to the project design should be submitted to the Department for review, as changes may result in a permit being required. Conditions of compliance with the regulatory exemption are contained in Attachment A.

This letter does not relieve you from the responsibility of obtaining other permits (federal, state, or local) that may be required for the project

NOTICE OF RIGHTS OF SUBSTANTIALLY AFFECTED PERSONS

This letter acknowledges that the proposed activity is exempt from ERP permitting requirements under Rule 40E-4 051(3)(b), F A C This determination is final and effective on the date filed with the Clerk of the Department unless a sufficient petition for an administrative hearing is timely filed under sections 120.569 and 120.57 of the Florida Statutes as provided below. If a sufficient petition for an administrative hearing is timely filed, this determination automatically becomes only proposed agency action subject to the result of the administrative review process Therefore, on the filing of a timely and sufficient petition, this action will not be final and effective until further order of the Department. The procedures for petitioning for a hearing are set forth in the attached notice.

This determination is based on the information you provided the Department and the statutes and rules in effect when the application was submitted and is effective only for the specific activity proposed. This determination shall automatically expire if site conditions materially change or the governing statutes or rules are amended. In addition, any substantial modifications in your plans should be submitted to the Department for review, as changes may result in a permit being required In any event, this determination shall expire after one year.

Be advised that your neighbors and other parties who may be substantially affected by the proposed activity allowed under this determination of exemption have a right to request an administrative hearing on the Department's decision that the proposed activity qualifies for this exemption. Because the administrative hearing process is designed to redetermine final agency action on the application, the filing of a petition for an administrative hearing may result in a final determination that the proposed activity is not authorized under the exemption established under Rule 40E-4 051(3)(b), F A.C

The Department will not publish notice of this determination Publication of this notice by you is optional and is not required for you to proceed However, in the event that an administrative hearing is held and the Department's determination is reversed, proceeding with the proposed activity before the time period for requesting an administrative hearing has expired would mean that the activity was conducted without the required permit.

File Name Cahan, Karen
FDEP File No 43-0132890-002
Page 4 of 5

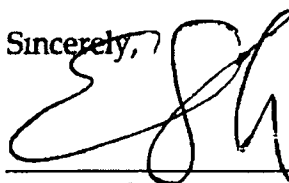
If you wish to limit the time within which all substantially affected persons may request an administrative hearing, you may elect to publish, at your own expense, the enclosed notice (Attachment A) in the legal advertisement section of a newspaper of general circulation in the county where the activity is to take place. A single publication will suffice.

If you wish to limit the time within which any specific person(s) may request an administrative hearing, you may provide such person(s), by certified mail, a copy of this determination, including Attachment A.

For the purposes of publication, a newspaper of general circulation means a newspaper meeting the requirements of sections 50.011 and 50.031 of the Florida Statutes. In the event you do publish this notice, within seven days of publication, you must provide to the following address proof of publication issued by the newspaper as provided in section 50.051 of the Florida Statutes. If you provide direct written notice to any person as noted above, you must provide to the following address a copy of the direct written notice.

Florida Department of Environmental Protection
Southeast District Branch Office
1801 SE Hillmoor Drive, Suite C-204
Port St Lucie, Florida 34952

If you have any questions, please contact John Renfranz at 863/462-5891 or by email at john.renfranz@dep.state.fl.us. When referring to your project, please use the FDEP file name and number listed above.

Sincerely,
 2/11/11

Eric M Shea Date
Environmental Manager
Submerged Lands and Environmental Resources Program


Enclosures

cc Danna Small, DLS Environmental Services, Inc ,
 danna@dlsenvironmentalservices.com (agent)

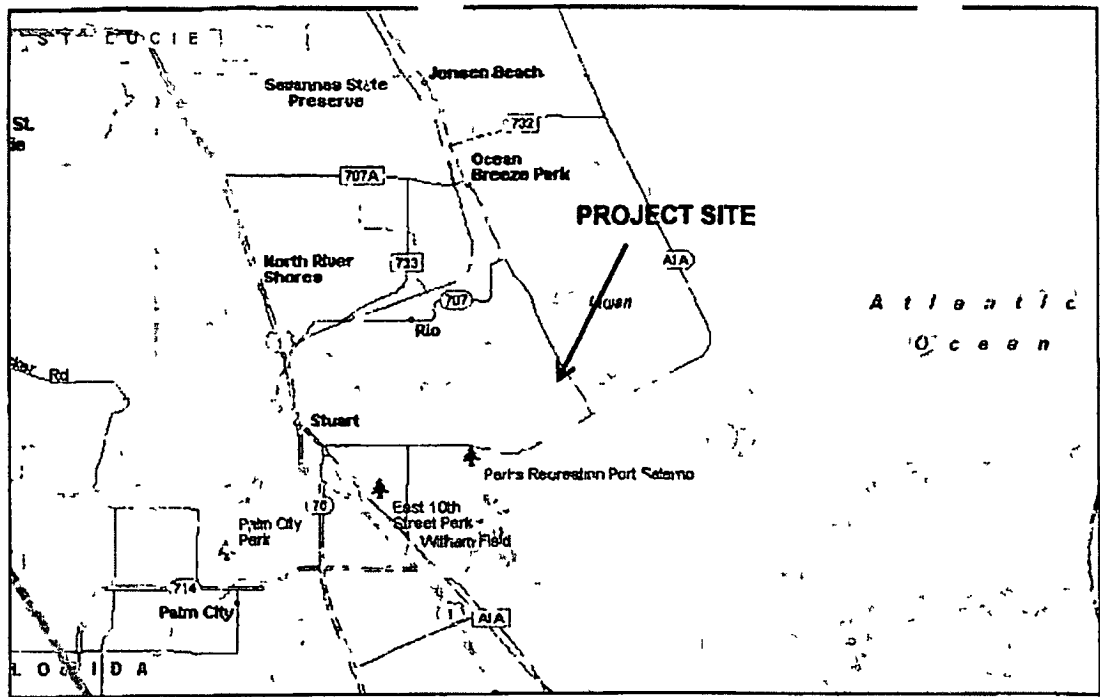
File Name Cahan, Karen
FDEP File No.. 43-0132890-002
Page 5 of 5

FILING AND ACKNOWLEDGMENT

FILED, on this date, pursuant to 120 52(9),
Florida Statutes, with the designated Department
Clerk, receipt of which is hereby acknowledged


Clerk

7/12/10
Date



MARTIN COUNTY

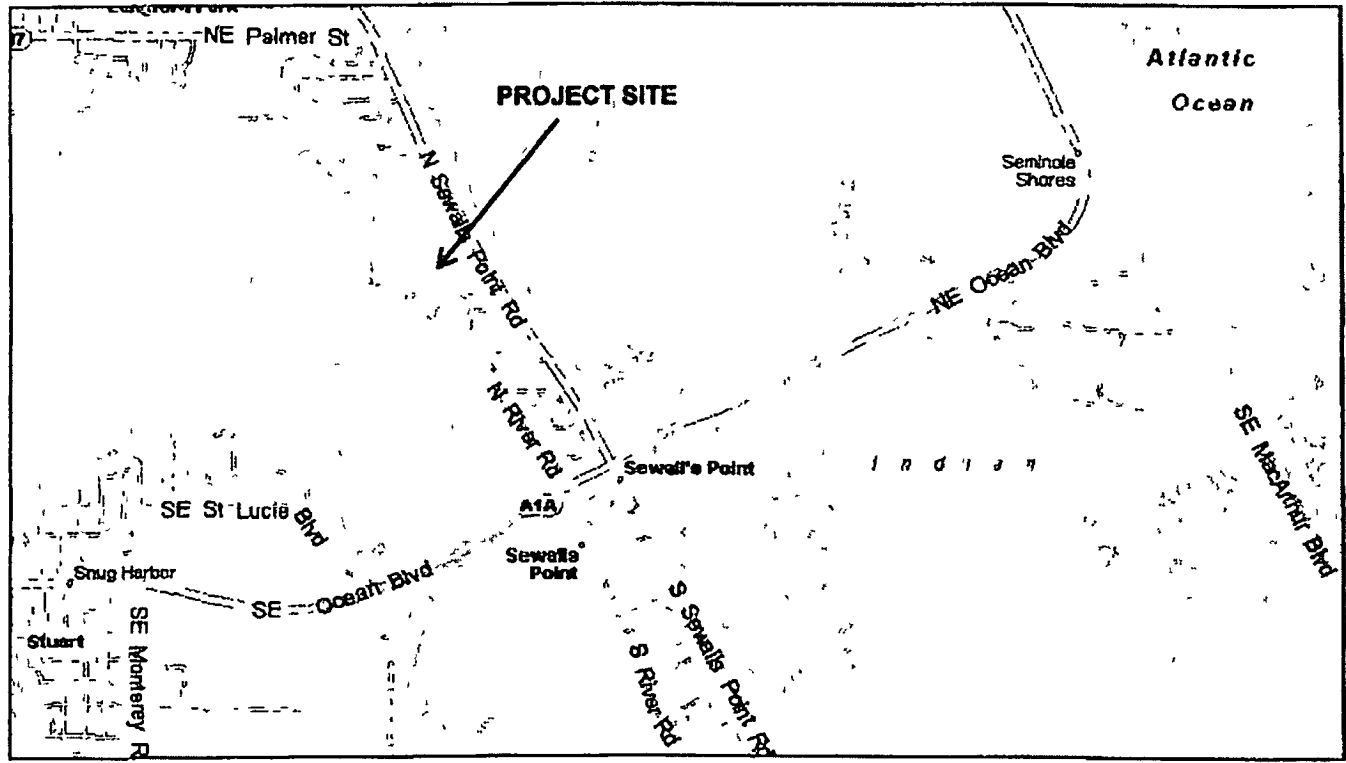
↑
N

RECEIVED

JUN 20 2011

FL DEP PORT ST LUCIE

DEPARTMENT OF ENVIRONMENTAL PROTECTION
STATE OF FLORIDA



SECTION 35, TOWNSHIP 37 SOUTH, RANGE 41 EAST

DS Environmental Services, Inc.
1901 SW Yellowtail Avenue
Port Saint Lucie, FL 34953

Phone 772-216-3997 Fax 772-879-4520
www.dsenvironmentalservices.com

Location Map

Karen Cahan
85 N. Sewall's Point Road
Stuart, Florida
PCN# 35-37-41-000-000-00240-2

SCALE	N T S.		MARCH 2011	SHEET 1 of 4
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ST LUCIE RIVER



RECFIVED

JUN 20 2011

FL DEP PORT ST LUCIE

APPROXIMATE RIPARIAN LINE

APPROXIMATE RIPARIAN LINE

15' x 32' MOORING AREA
(INCLUDES BOW OF BOAT
WHICH EXTENDS 6'
BEYOND 15' X 26' ROOF AREA)

30' x 45'
MOORING
AREA

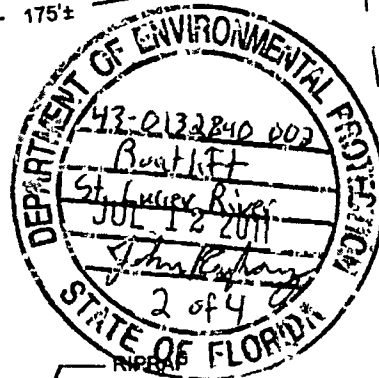
25'

26'

84'±

175'±

144' ACCESS
WATERWARD
OF MHW



APPROXIMATE
MEAN HIGH WATER LINE

5'

SHORELINE LENGTH
318± L F



NOTES

- 1 EXISTING DOCK STRUCTURE TOTALS 1,370 SQ FT - DOCK STRUCTURE PLUS PRE-EMPTED AREA TOTALS 2,810 SQ FT
- 2 ELEVATION DATUM IS NAVD 88
MHW = -0.57 NAVD MLW = -1.50 NAVD
- 3 NO RESOURCES PRESENT WITHIN MOORING AREAS

DIS Environmental Services, Inc.
1901 SW Yellowtail Avenue
Port Saint Lucie, FL 34953

Phone 772-215-3997 Fax 772-879-4520
www.disenvironmentalservices.com

Existing Plan View

Karen Cahan
85 N. Sewall's Point Road
Stuart, Florida
PCN# 35-37-41-000-000-00240-2

SCALE

1" = 50'

JUNE 2011

SHEET 2 of 4

ST LUCIE RIVER



RECEIVED

JUN 20 2011

FL DEP PORT ST LUCIE

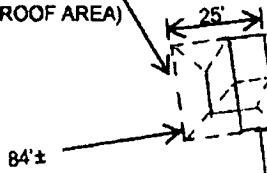
APPROXIMATE RIPARIAN LINE

APPROXIMATE RIPARIAN LINE

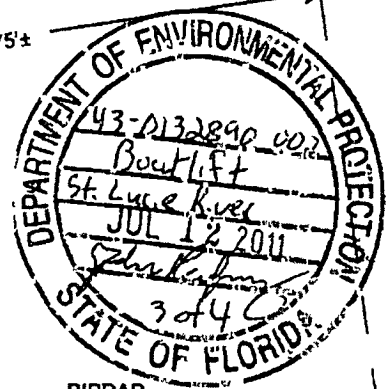
15' x 16' BOATLIFT WITHIN EXISTING MOORING AREA

30' x 45' MOORING AREA

15' x 32' MOORING AREA (INCLUDES BOW OF BOAT WHICH EXTENDS 6' BEYOND 15' X 28' ROOF AREA)



144' ACCESS WATERWARD OF M H W



RIPRAP

APPROXIMATE MEAN HIGH WATER LINE

5'

SHORELINE LENGTH 318± L F



NOTES

- 1 EXISTING DOCK STRUCTURE TOTALS 1,370 SQ FT -- DOCK STRUCTURE PLUS PRE-EMPTED AREA TOTALS 2,810 SQ FT
- 2 ELEVATION DATUM IS NAVD 88
MHW = -0.57 NAVD MLW = -1.60 NAVD
- 3 NO RESOURCES PRESENT WITHIN MOORING AREAS

Dis Environmental Services, Inc.
 1901 SW Yellowtail Avenue
 Port Saint Lucie, FL 34953

Phone 772-216-3997 Fax 772-879-4520
 www.disenvironmentalservices.com

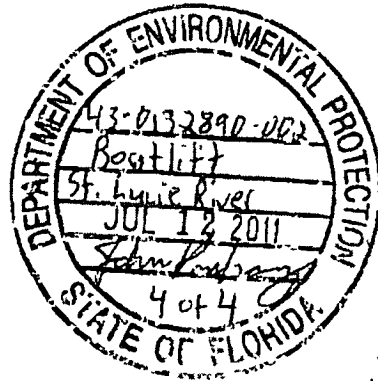
Proposed Plan View

Karen Cahan
 85 N. Sewall's Point Road
 Stuart, Florida
 PCN# 35-37-41-000-000-00240-2

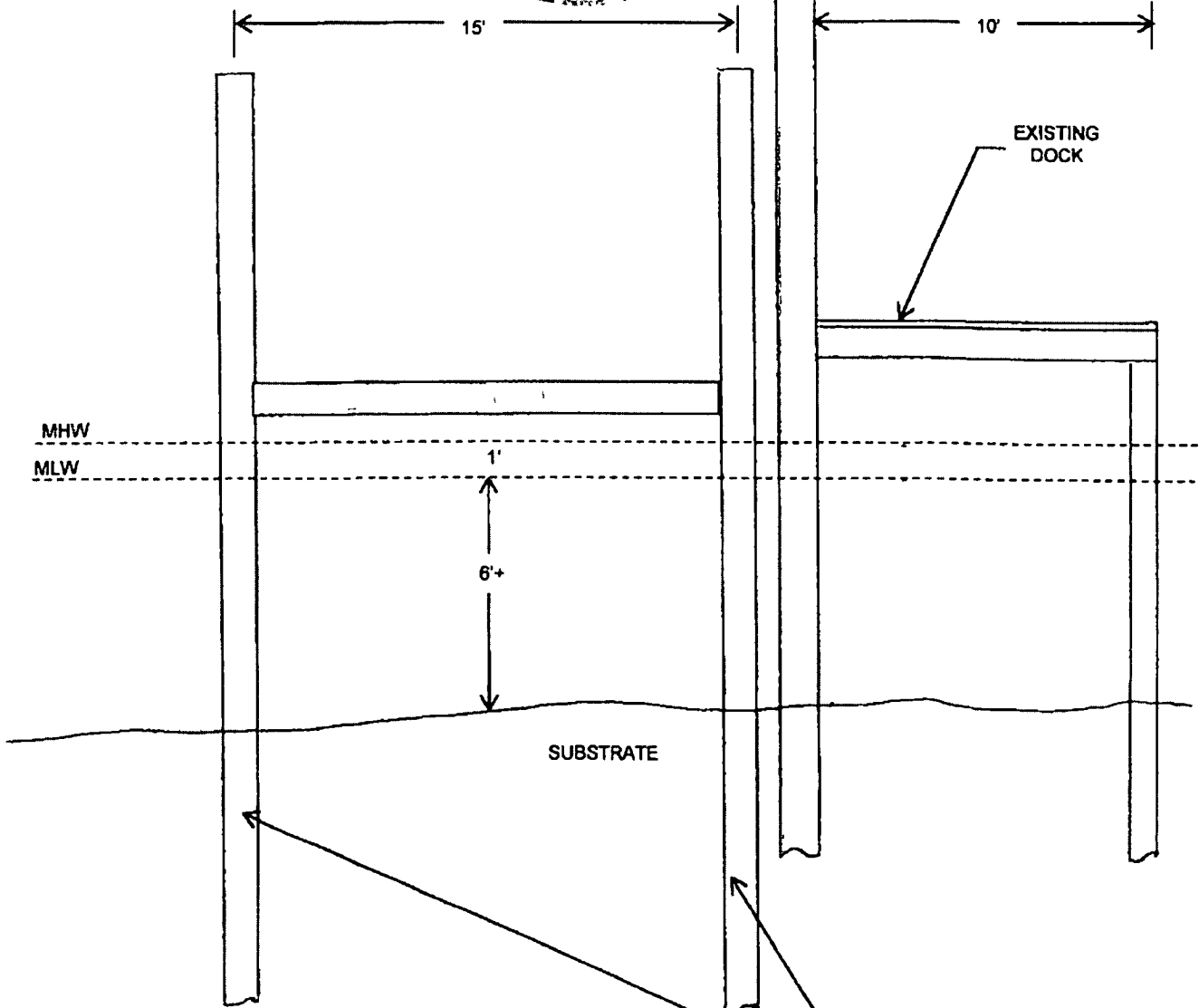
SCALE 1" = 50'

JUNE 2011

SHEET 3 of 4



RECEIVED
 JUN 20 2011
 FL DEP PORT ST LUCIE



NOTES

- 1 ELEVATION DATUM IS NAVD 88
 MHW = -0.57 NAVD MLW = -1.50 NAVD
- 2 NO RESOURCES PRESENT WITHIN MOORING AREAS

PROPOSED 10" Ø BOAT
 LIFT PILES (4)

DS Environmental Services, Inc.

1801 SW Yellowtail Avenue
 Port Saint Lucie, FL 34953

Phone 772-215-3987 Fax 772-879-4520
 www.dsenvironmentalservices.com

Typical Cross Section View

Karen Cahan
 85 N. Sewall's Point Road
 Stuart, Florida

PCN# 35-37-41-000-000-00240-2

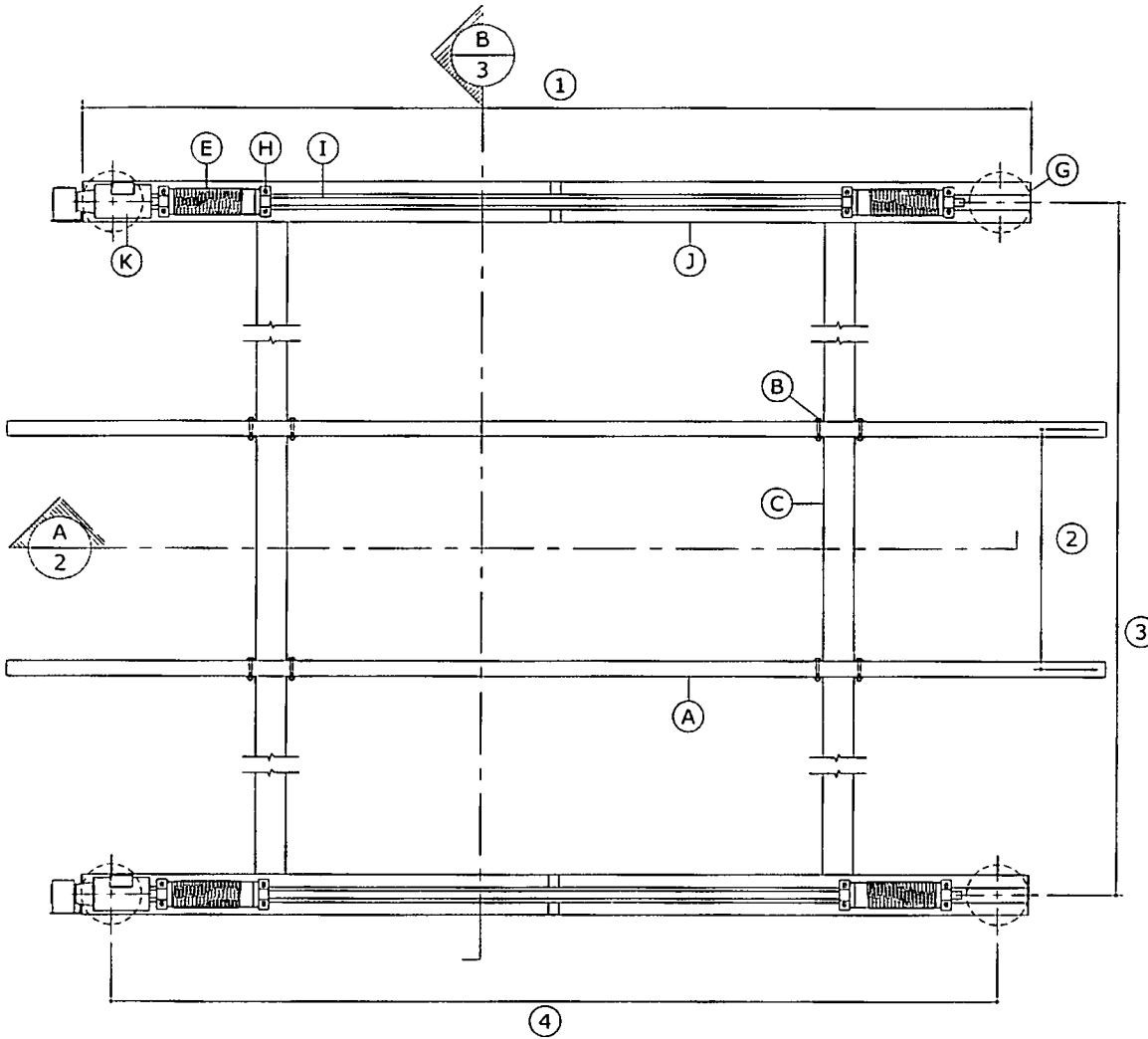
SCALE: 1" = 5'

JUNE 2011

SHEET 4 of 4

ALUMINUM 4-POST STANDARD BOAT LIFTS

BY NEPTUNE BOAT LIFT



PLAN VIEW
SCALE 1/2" = 1' 0"

STRUCTURAL NOTES

THE WORK SPECIFIED HEREIN HAS BEEN DESIGNED & ALL WORK SHALL BE IN ACCORDANCE WITH THE 2007 FLORIDA BUILDING CODE WITH 2009 SUPPLEMENTS ALL CODES REFERENCED HEREIN ARE PER THE LATEST ADOPTED EDITION

NOTE

THIS LIFTING STRUCTURE HAS BEEN DESIGNED TO WITHSTAND WIND LOADS ASSOCIATED WITH SPEEDS OF 150 MPH (3 SEC GUST) EXPOSURE 'C' WITHOUT A BOAT ON THE LIFT PER ASCE 7-05 USING ABOVE GROUND SIGN METHOD THE LIFTING STRUCTURE INCLUDING BOAT HAS BEEN DESIGNED TO WITHSTAND WIND SPEEDS OF 90 MPH (3 SEC GUST) OWNER RESPONSIBLE TO REMOVE BOAT FROM LIFT DURING WINDSTORM EVENT IN EXCESS OF 90 MPH (3 SECOND GUST)

CERTIFICATION OF BOAT LIFT TO EXISTING STRUCTURE AND ALL ELECTRICAL OR MECHANICAL CERTIFICATIONS ARE BY OTHERS ENGINEER SEAL CERTIFIES ASSEMBLY OF LIFT ONLY

THIS DETAIL IS PREPARED AS A GENERAL NON-SITE SPECIFIC MASTER PLAN SHEET DETAIL. TYPICAL FIELD CONDITIONS ARE ASSUMED IN THE DESIGN WOOD PILES SHALL BE SEASONED WOOD WITH G=0.55 OR BETTER SHOULD ANY SPECIFIC LOCATION DIFFER FROM THAT SPECIFIED HEREIN OR STANDARD FIELD CONDITIONS ADDITIONAL SPECIFIC ENGINEERING MAY BE REQUIRED AS DETERMINED BY THE BUILDING INSPECTOR AND PERMITTING CONTRACTOR CARE SHALL BE TAKEN BY CONTRACTOR IN ALL APPLICATIONS OF THIS DETAIL. AS THIS IS NOT A SITE SPECIFIC DRAWING IT IS THE RESPONSIBILITY OF OTHERS TO ENSURE THE INTEGRITY OF INSTALLATION TO THE HOST STRUCTURE

ALUMINUM

MATERIAL 6061 T6 ALUMINUM
ALL WELDS ARE MIN 1/4" FULL FILLET WELD USING 5556 FILLER ALLOY ALL WELDING MUST CONFORM TO AISC STEEL CONSTRUCTION MANUAL 13TH ED AS INSPECTED AND VERIFIED BY OTHERS THE CONTRACTOR IS RESPONSIBLE TO INSULATE ALUMINUM MEMBERS FROM DISSIMILAR METALS TO PREVENT ELECTROLYSIS

FASTENERS

ALL ANCHORS TO BE HILTI BRAND OR MFR EQUIVALENT ALL BOLTS SHALL BE HOT DIPPED GALVANIZED OR STAINLESS STEEL & MEET THE REQUIREMENTS OF ASTM A304 WITH HARDENED WASHERS AND HEX NUTS WASHERS SHALL BE USED BETWEEN WOOD & BOLT HEAD & BETWEEN WOOD & NUT WHERE GENERIC FASTENERS ARE LABELED IN DETAILS CAPACITIES SHALL BE EQUAL TO OR GREATER THAN HILTI KWIK BOLT II OR RED HEAD THRU BOLTS EMBEDMENT DEPTHS SPECIFIED HEREIN ARE DEPTHS INTO SOLID SUBSTRATE AND DO NOT INCLUDE THICKNESS OF STUCCO OR OTHER FINISHES

ALUMINUM MEMBERS IN CONTACT WITH CONCRETE AND WOOD SHALL BE PROTECTED BY "KOPPERS BITUMINOUS PAINT" OR POLYETHYLENE TAPE UHMW (ULTRA HIGH MOLECULAR WEIGHT) 11.7 mils (0.30 mm) MIN TOTAL THICKNESS IN ACCORDANCE WITH CURRENT FLORIDA BUILDING CODE ALL WELDS TO BE COVERED WITH ALUMINUM PAINT

ENGINEERING EXPRESS HAS NOT VISITED THIS JOBSITE INFORMATION CONTAINED HEREIN IS BASED ON CONTRACTOR SUPPLIED DATA AND MEASUREMENTS ENGINEERING EXPRESS SHALL NOT BE HELD RESPONSIBLE OR LIABLE IN ANY WAY FOR ERRONEOUS OR INACCURATE DATA OR MEASUREMENTS WORK SHALL BE FIELD VERIFIED PRIOR TO CONSTRUCTION ENGINEERING EXPRESS SHALL BE NOTIFIED AND GIVEN AN OPPORTUNITY TO REEVALUATE OUR WORK UPON DISCOVERY OF ANY INACCURATE INFORMATION PRIOR TO MODIFICATION OF EXISTING FIELD CONDITIONS AND FABRICATION AND INSTALLATION OF MATERIALS

ENGINEER SEAL AFFIXED HERETO VALIDATES STRUCTURAL DESIGN AS SHOWN ONLY USE OF THIS SPECIFICATION BY CONTRACTOR, et al INDEMNIFIES & SAVES HARMLESS THIS ENGINEER FOR ALL COSTS & DAMAGES INCLUDING LEGAL FEES & APPELLATE FEES RESULTING FROM MATERIAL FABRICATION SYSTEM ERECTION & CONSTRUCTION PRACTICES BEYOND THAT WHICH IS CALLED FOR BY LOCAL, STATE & FEDERAL CODES & FROM DEVIATIONS OF THIS PLAN EXCEPT AS EXPRESSLY PROVIDED IN HEREIN NO CERTIFICATIONS OR AFFIRMATIONS ARE INTENDED

FRANK L. BERNARDO P.E.
#PE0046549

05/14/2009

VALID FOR (1) JOB ONLY
VALID ONLY WITH BASED ENGINEER SEAL

LICENSED AFFILIATE OF
ENGINEERING EXPRESS
160 SW 12TH AVENUE #106
DEERFIELD BEACH FL 33442
PH (954) 354-0860 FAX (954) 354-0443
WWW.ENGINEXP.COM
CHIEF OF AUTH PRMS

NEPTUNE BOAT LIFTS
100 SW 6th STREET
FORT LAUDERDALE FL 33301
PHONE (954) 524-3616 FAX (954) 524-3604
ALUMINUM 4-POST STANDARD BOAT LIFT

REV	DATE	DESCRIPTION
1	05/14/09	ISSUED FOR PERMIT

COPYRIGHT ENGINEERING EXPRESS
00-NBL-0002
SCALE 1/2" = 1' 0"
PAGE DESCRIPTION

1

3

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **8-5-11** Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9825	Cotler 60 S River Rd Lawrence Fence	Final Fence	Pass	Close INSPECTOR <i>[Signature]</i>
Tree	Castle Hill HOA	Tree	OK	 INSPECTOR <i>[Signature]</i>
9811	85 NSPR Scott Holmes	Stone	Pass	Close INSPECTOR <i>[Signature]</i>
				INSPECTOR
	16 E. WIGH PT 14 " "	LEDGE AT WATER EDGE COMPLAINANT	<i>[Signature]</i>	INSPECTOR
				INSPECTOR
				INSPECTOR

9927

EVENT TENT



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:	9927	DATE ISSUED:	11-09-2011
SCOPE OF WORK	TENT FOR MARTIN MEMORIAL EVENT		
CONTRACTOR.	EVENT MAKERS		
PARCEL CONTROL NUMBER:	35-37-41-000-000-00240-2	SUBDIVISION:	SEWALL'S POINT ROAD
CONSTRUCTION ADDRESS:	85 NO SEWALL'S POINT ROAD		
OWNER NAME.	KAREN CAHAN		
QUALIFIER:	GEORGE COATES	CONTACT PHONE NUMBER	286-1841

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	9927
ADDRESS	85 NO SEWALL'S POINT ROAD
DATE	11/09/11
SCOPE OF WORK	TENT, ETC FOR EVENT

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350 00 SFR, \$175 00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned space (@ \$121 75 per sq ft)		s f	
Total square feet non-conditioned space, or interior remodel (@ \$59 81 per sq ft)		s f	
Total square feet remodel with new trusses @ \$90 78 per sq ft		\$	
Total Construction Value		\$	
Building fee (2% of construction value SFR or >\$200K)		\$	
Building fee (1% of construction value < \$200K + \$75 per insp)			
Total number of inspections (Value < \$200K) @\$75 ea		\$	
Dept of Comm Affairs Fee (1 5% of permit fee - \$2 00 min)		\$	
DBPR Licensing Fee (1 5% of permit fee - \$2 00 min)		\$	
Road impact assessment (04% of construction value - \$5 00 min)			
Martin County Impact Fee		\$	
TOTAL BUILDING PERMIT FEE		\$	

ACCESSORY PERMIT	Declared Value	\$	0 00
Total number of inspections @ \$75 00 each	1		0 00
Dept of Comm Affairs Fee (1 5% of permit fee - \$2 00 min)		\$	0 00
DBPR Licensing Fee (1 5% of permit fee - \$2 00 min)		\$	0 00
Road impact assessment (04% of construction value - \$5 00 min)		\$	0 00
		IMPACT FEES	\$100 00
TOTAL ACCESSORY PERMIT FEE:		\$	N/C

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: 9927

Date _____

OWNER/TITLEHOLDER NAME Cahan Phone (Day) _____ (Fax) _____

Job Site Address 85 N Sewells Pt Road City Stuart State FL Zip 34996

Legal Description _____ Parcel Control Number _____

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

Scope of work (please be specific) TEMPORARY STRUCTURE - 66' x 146' TENT

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

CONTRACTOR/Company E-VENTMAKERS Phone _____ Fax _____

Street _____ City _____ State _____ Zip _____

State License Number _____ OR Municipality _____ License Number _____

LOCAL CONTACT GEORGE COATES Phone Number 286-1841

DESIGN PROFESSIONAL _____ Lic# _____ 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 Energy Code 2007, Florida Accessibility Code 2007, Florida Fire Prevention Code 2007

NOTICES TO OWNERS AND CONTRACTORS:
1 YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY WHEN FINANCING. CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT
2 THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES
3 BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95
4 THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID REF FBC 2004 W/ 2006 REVISIONS SECT 105 4 1, 105 4 1 1 - 5

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

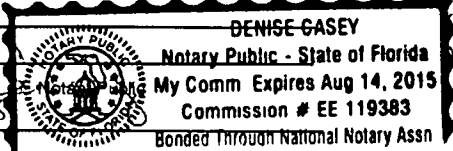
APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATIONS AS SPECIFICALLY INDICATED ABOVE I CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE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

OWNER SIGNATURE (required)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Becky Klein
State of Florida County of Martin
This the 8th day of November 2011
by Becky Klein who is personally

CONTRACTOR SIGNATURE (required)

On State of Florida, County of _____
This the _____ day of _____ 20____
by _____ who is personally

known to me or produced _____
as identification _____
My Commission Expires 8-14-13



known to me or produced _____
as identification _____
Notary Public
My Commission Expires _____

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105 3 4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105 3 2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

2011-2012 MARTIN COUNTY ORIGINAL BUSINESS TAX RECEIPT

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

ACCOUNT 1988 277 0965 CERT
PHONE (772) 286-1841 SIC NO 532299

LOCATION 2928 SE MONROE ST
STUART, FL 34997

CHARACTER COUNTS IN MARTIN COUNTY

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

EVENTMAKERS INTERNATIONAL
EVENTMAKERS INTERNATIONAL
2928 SE MONROE ST
STUART, FL 34997



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

RENTALS SPECIAL EVENTS

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

23 DAY OF SEPTEMBER

AND ENDING SEPTEMBER 30, 2012

11 2010 45188 0001 26.25 PAID

AC# 5348041

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
DIVISION OF HOTELS AND RESTAURANTS

SEQ#D1101119004

DATE	BATCH NUMBER	LICENSE NBR
11/19/2010	100235391	CAT5301021



The CATERER (2013)
Named below IS LICENSED
Under the provisions of Chapter 509
Expiration date: DEC 31 2013

NON
TRANSFERABLE

EVENTMAKERS INTERNATIONAL, LLC
EVENTMAKERS INTNL COMMISSARY
2928 SEYMONROE ST
STUART, FL 349975943

CHARLIE CRIST
GOVERNOR

CHARLIE LEM
SECRETARY

DISPLAY AS REQUIRED BY LAW



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/8/2011

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 Allied Insurance Brokers, Inc Four Allegheny Center Fourth Floor Pittsburgh PA 15212	CONTACT NAME PHONE (A/C, No, Ext) 412-231-8374 FAX (A/C, No) 866-209-4408 E-MAIL ADDRESS cert@alliedinsbrokers.com PRODUCER CUSTOMER ID # 5731	
	INSURER(S) AFFORDING COVERAGE	
INSURED Eventmakers International LLC 2928 S E Monroe Street Stuart FL 34997-5943	INSURER A Harleysville Mutual Ins Co NAIC # 14168	
	INSURER B	
	INSURER C	
	INSURER D	
	INSURER E	
	INSURER F	

COVERAGES **CERTIFICATE NUMBER** 244231936 **REVISION NUMBER**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Y		GL00000035941G	6/1/2011	6/1/2012	EACH OCCURRENCE \$1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100000 MED EXP (Any one person) \$10000 PERSONAL & ADV INJURY \$1000000 GENERAL AGGREGATE \$2000000 PRODUCTS COMP/OP AGG \$2000000 \$
A	AUTOMOBILE LIABILITY <input checked="" 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			BA00000038587G	6/1/2011	6/1/2012	COMBINED SINGLE LIMIT (Ea accident) \$1000000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$10,000			CMB00000035942G	6/1/2011	6/1/2012	EACH OCCURRENCE \$2000000 AGGREGATE \$2000000 \$ \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH ER E L EACH ACCIDENT \$ E L DISEASE EA EMPLOYEE \$ E L DISEASE POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
The below is named as an additional insured but only with respect to general liability and to the covered operations of the named insured where liability for the additional insureds is assumed by the named insured under a written contract provided that the contract is executed prior to loss. PROFESSIONAL See Attached

CERTIFICATE HOLDER Town of Sewall's Point 1 S Sewall's Point Road Stuart FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS AUTHORIZED REPRESENTATIVE <i>Matt E O'Brien</i>
---	--



ADDITIONAL REMARKS SCHEDULE

AGENCY Allied Insurance Brokers, Inc		NAMED INSURED Eventmakers International LLC 2928 S E Monroe Street Stuart FL 34997-5943	
POLICY NUMBER		EFFECTIVE DATE	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
 FORM NUMBER 25 FORM TITLE CERTIFICATE OF LIABILITY INSURANCE

LIABILITY EXCLUDED



CERTIFICATE OF LIABILITY INSURANCE

OP ID JB

DATE (MM/DD/YYYY)

11/08/11

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 Brown & Brown Insurance - Vero Vero Division 2911 Cardinal Drive Vero Beach FL 32963 Phone 772-231-2828 Fax 772-231-4413		CONTACT NAME PHONE (A/C, No, Ext) 772-231-2828 FAX (A/C, No) 772-231-4413 E-MAIL ADDRESS PRODUCER CUSTOMER ID# EVENT-2	
INSURED Eventmakers International, LLC 2928 SE Monroe Street Stuart FL 34997-5943		INSURER(S) AFFORDING COVERAGE INSURER A Bridgefield Employers Ins Co NAIC # 10701 INSURER B INSURER C INSURER D INSURER E INSURER F	

COVERAGES CERTIFICATE NUMBER REVISION NUMBER

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY <input 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"/> 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) \$	
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DEDUCTIBLE \$ RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$	
A	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH) If yes describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	83032223	05/16/11	05/16/12	<input checked="" type="checkbox"/> W/C STATUTORY LIMITS <input type="checkbox"/> OTH-ER	E L EACH ACCIDENT \$ 500000 E L DISEASE - EA EMPLOYEE \$ 500000 E L DISEASE - POLICY LIMIT \$ 500000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule If more space is required)

CERTIFICATE HOLDER


TOWNSEW

Town of Sewall's Point
 1 S Sewall's Point Road
 Stuart FL 34996

CANCELLATION

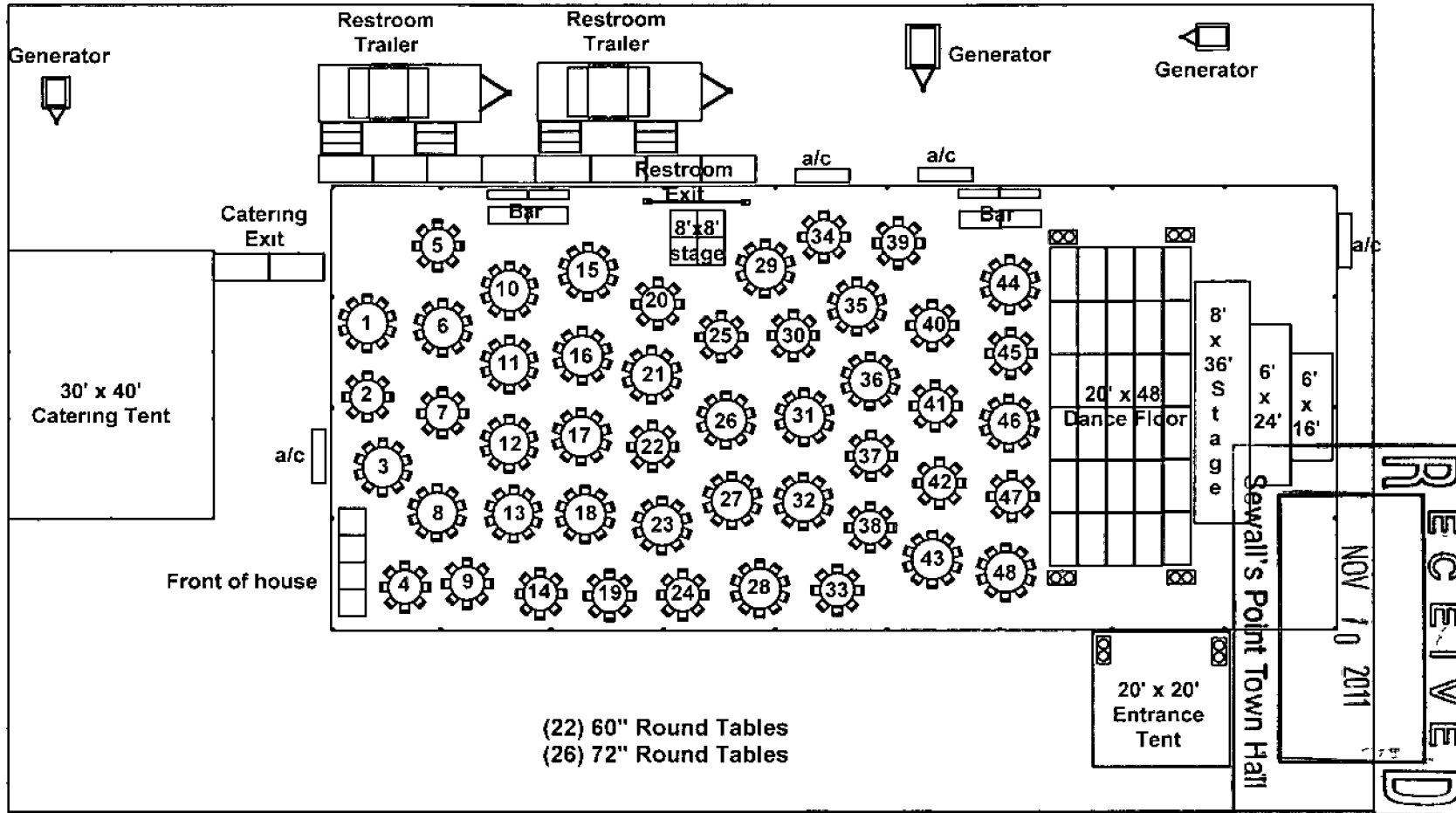
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS

AUTHORIZED REPRESENTATIVE



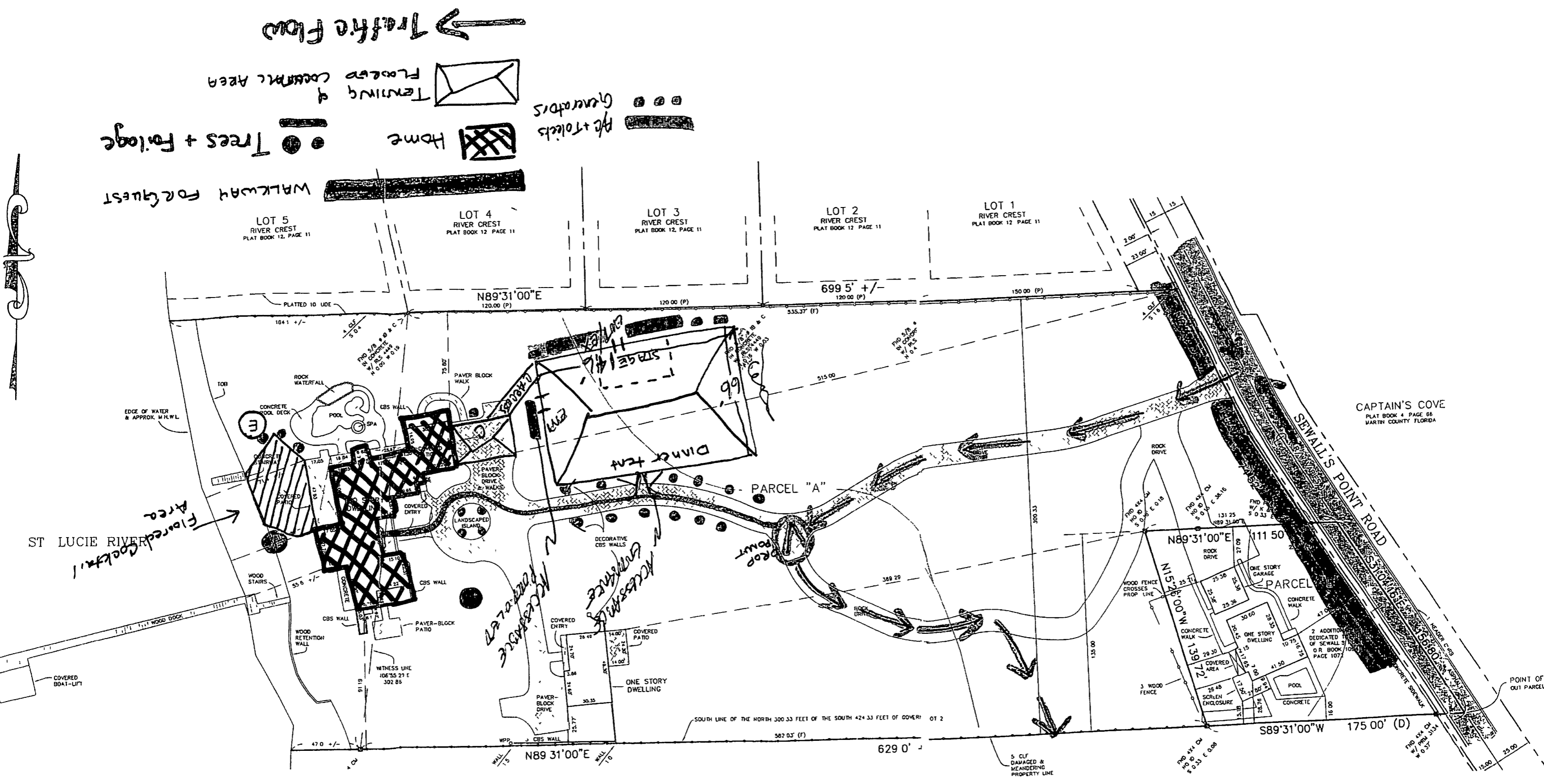
© 1988-2009 ACORD CORPORATION All rights reserved

66' x 146'
Clear Span Tent
Seating for 426



EVENTMAKERS

Date	Nov 12, 2011
Event	Mum Ball 2011
Customer	Martin Memorial Foundation
Design by	



ST LUCIE RIVER
Flooded Cocktail Area

FILE COPY
BUILDING DEPARTMENT
TOWN OF SEWALL'S POINT

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 11-8-11 Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9908	R Fleetwood	Fole Inspec		
	34 No River Rd		PASS	
	Zona Carter Elec SENGATE BUILDERS			INSPECTOR <i>JA</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9909	Twohey	Fole Inspec		
	112 Henry Sewall		PASS	
	Zona Carter Elec SENGATE BUILDERS			INSPECTOR <i>JA</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9901	Demarkavian	Roof Metal		
	19 Castle Hill	\$ DRY - IN	PASS	
	Steve Conway			INSPECTOR <i>JA</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
1000	85 N. S. Pt. Rd	TRAMP STRUCTURES		
		WRECK TRUCKS		INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9908	Fleetwood	STEM WALL		
	34 No River Rd		PASS	
	SENGATE BUILDERS			INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	15 Palm Rd	SKYLITE KIT	NO PERMIT	
	- DRIVE ROOFING -			INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 10-10-11 Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9927	315 N Sewalls	Remodel/General		
99C	Frank Casano	Fire/Electrical		Close
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9845	Seay ne	Re Inspection		
10 ³⁰	33 W Highpoint	R. ERICA	PASS	
	CDR Builders	R. A/c - R. PLUMB		INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
		E OCEAN ROAD MARKING		
10:00	CLAUDIO GIULIO BLANCO		OK	
	FDOT			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
		LOT 11		
	19 E Highpoint	'1		Pony LAZARNA
		Pub 6314900		INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9920	Rockus			
	144 N SPR	A/c FORM	PASS	
	Astro Air			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

10188

A/C CHANGEOUT



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

BUILDING PERMIT CARD

THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	10188	DATE ISSUED:	AUGUST 20, 2012
SCOPE OF WORK	AC CHANGEOUT		
CONTRACTOR:	KRAUSS & CRANE		
PARCEL CONTROL NUMBER	353741000-000-002402	SUBDIVISION	PT GOV LOT 2
CONSTRUCTION ADDRESS:	85 N SEWALLS PT RD		
OWNER NAME:	CAHAN		
QUALIFIER:	JOHN CRANE	CONTACT PHONE NUMBER:	287-1227

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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	_____

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Town of Sewall's Point
BUILDING PERMIT APPLICATION

CAHAN

Date: 8/15/12

Permit Number: 10188

OWNER/LESSEE NAME KAREN CAHAN

Phone (Day) 475-5845 (Fax)

Job Site Address 95N SEWALLS PT. Rd

City STUART

State FL Zip 34996

Legal Description 5213 OF S10 2 ACS OF GOV LOT 2

Parcel Control Number 35-37 41-000-000-00240-2

Fee Simple Holder Name

Address

City

State

Zip

Telephone

*SCOPE OF WORK (PLEASE BE SPECIFIC): Replace A/C equipment like for like change

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. \$ 5800

(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. KRAUSS CRANE INC

Phone 8871887

Fax: 8834055

Qualifiers name JOHN H. CRANE, III

Street 904 S DIXIE HWY

City STUART

State FL Zip 34994

State License Number: CA1149286

OR Municipality

License Number

LOCAL CONTACT JOHN H. CRANE, III

Phone Number: 8871887

DESIGN PROFESSIONAL

Street City State Zip Phone Number

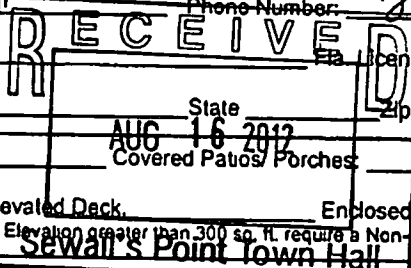
AREAS SQUARE FOOTAGE Living Garage: Covered Patios/Porches Enclosed Storage

Carport Total under Roof 7,177

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:

- 1 YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION
- 2 IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES
- 3 BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- 4 THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID REF FBC 2007 SECT 105 4 1, 105 4.1.1 - 5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE

x see attached proposal

State of Florida County of

On This the day of ,20

by who is personally

known to me or produced

As identification

Notary Public

My Commission Expires

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE

John Crane

State of Florida, County of Martin

On This the 15 day of August ,2012

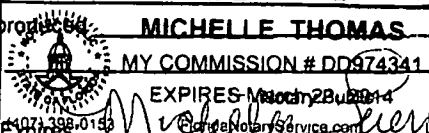
by John Crane who is personally

known to me or produced

AS identification MICHELLE THOMAS

MY COMMISSION # DD974341

My Commission Expires



SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105 3 2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!



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

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Air Conditioning Change out Affidavit

Residential Commercial _____
Package Unit ___ Yes No (Use Condenser side of form below for equipment listing)
Duct Replacement ___ Yes No - Refrigerant line replacement ___ Yes No
Flushing Existing Refrigerant lines Yes ___ No - Adding Refrigerant Drier Yes ___ No
Rooftop A/C Stand Installation ___ Yes No - Curb Installation ___ Yes No
Smoke Detector in Supply (over 2000 CFM) ___ Yes No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: RHEEM Model# RBHP-24
Volts ²⁰⁸240 CFM's 1600 Heat Strip 10 Kw
Min Circuit Amps 51 Wire gauge #6
Max. Breaker size 60 Min. Breaker size 51
Ref. line size: Liquid 3/8 Suction 1/8
Refrigerant type R410A
Location: Existing New _____
Attic/Garage/Closet (specify) Closet
Access N/A
(Contractor must provide ladder if required)

Condenser: Mfg RHEEM Model# 14AJM48
Volts ²⁰⁸240 SEER/EER 14 BTU's 47000
Min. Circuit Amps 40 Wire gauge #10
Max. Breaker size 50 Min. Breaker size 40
Ref. line size Liquid 3/8 Suction 1/8
Refrigerant type R410A
Location. Existing New _____
Left/Right/Rear/Front/Roof North side
Condensate Location Closet

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: RUUD Model# UBHC21
Volts ²⁰⁸240 CFM's 1600 Heat Strip 10 Kw
Min Circuit Amps 51 Wire gauge #6
Max Breaker size 60 Min. Breaker size 51
Ref line size Liquid 3/8 Suction 1/8
Refrigerant type R22
Location Ext. New _____
Attic/Garage/Closet (specify) Closet
Access: N/A

Condenser: Mfg RUUD Model# UAMB48
Volts ²⁰⁸240 SEER/EER 11 BTU's 48000
Min Circuit Amps 40 Wire gauge #10
Max. Breaker size 50 Min. Breaker size 40
Ref. line size. Liquid 3/8 Suction 1/8
Refrigerant type R22
Location. Ext New _____
Left/Right/Rear/Front/Roof North side
Condensate Location Closet

Certification:

I herby certify that the information entered on this form accurately represents the equipment installed and further affirm that this equipment is considered matched as required by FBC - R (N)1107 & 1108

[Signature]
Signature

8/15/12
Date

CHHAN



Certificate of Product Ratings

AHRI Certified Reference Number: 3412461

Date: 8/15/2012

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

Outdoor Unit Model Number: 14AJM48

Indoor Unit Model Number: RBHP-24+RCHL-48A1

Manufacturer: RHEEM MANUFACTURING COMPANY

Trade/Brand name: RHEEM 14AJM SERIES

Manufacturer responsible for the rating of this system combination is RHEEM MANUFACTURING COMPANY

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

Cooling Capacity (Btuh)	47000
EER Rating (Cooling)	12 00
SEER Rating (Cooling)	14 00

* Ratings followed by an asterisk (*) indicate a voluntary rerate of previously published data unless accompanied with a WAS which indicates an involuntary rerate

DISCLAIMER

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

TERMS AND CONDITIONS

This Certificate and its contents are proprietary products of AHRI. This Certificate shall only be used for individual, personal and confidential reference purposes. The contents of this Certificate may not, in whole or in part, be reproduced, copied, disseminated, entered into a computer database, or otherwise utilized, in any form or manner or by any means, except for the user's individual, personal and confidential reference.

CERTIFICATE VERIFICATION

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



Air-Conditioning, Heating, and Refrigeration Institute

Project Information

For Karen Cahan
 85 N Sewalls Point Rd, Stuart, FL 34996
 Phone 772-475-5845

Notes

Design Information

Weather: West Palm Beach Intl AP, FL, US

Winter Design Conditions

Outside db 47 °F
 Inside db 70 °F
 Design TD 23 °F

Summer Design Conditions

Outside db 91 °F
 Inside db 75 °F
 Design TD 16 °F
 Daily range L
 Relative humidity 50 %
 Moisture difference 57 gr/lb

Heating Summary

Structure 23023 Btuh
 Ducts 3555 Btuh
 Central vent (0 cfm) 0 Btuh
 Humidification 0 Btuh
 Piping 0 Btuh
 Equipment load 26578 Btuh

Sensible Cooling Equipment Load Sizing

Structure 28439 Btuh
 Ducts 4887 Btuh
 Central vent (0 cfm) 0 Btuh
 Blower 0 Btuh
 Use manufacturer's data n
 Rate/swing multiplier 0.96
 Equipment sensible load 32126 Btuh

Infiltration

Method Simplified
 Construction quality Average
 Fireplaces 0

	Heating	Cooling
Area (ft ²)	2184	2184
Volume (ft ³)	21840	21840
Air changes/hour	0.32	0.16
Equiv AVF (cfm)	116	58

Latent Cooling Equipment Load Sizing

Structure 8237 Btuh
 Ducts 1871 Btuh
 Central vent (0 cfm) 0 Btuh
 Equipment latent load 10109 Btuh
 Equipment total load 42235 Btuh
 Req total capacity at 0.70 SHR 3.8 ton

Heating Equipment Summary

Make
 Trade
 Model
 AHRI ref no/n/a

Efficiency 100 EFF
 Heating input 0 Btuh
 Heating output 26341 Btuh
 Temperature rise 17 °F
 Actual air flow 1428 cfm
 Air flow factor 0.054 cfm/Btuh
 Static pressure 0 in H2O
 Space thermostat

Cooling Equipment Summary

Make
 Trade
 Cond
 Coil
 AHRI ref no
 Efficiency 0 SEER
 Sensible cooling 0 Btuh
 Latent cooling 0 Btuh
 Total cooling 0 Btuh
 Actual air flow 1428 cfm
 Air flow factor 0.043 cfm/Btuh
 Static pressure 0 in H2O
 Load sensible heat ratio 0.77

Italic values have been manually overridden

Calculations approved by ACCA to meet all requirements of Manual J 8th Ed

CAHAN



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

FLORIDA ENERGY CONSERVATION CODE
Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101 4.7 1 1 & FS 553 912)

Owner KAREN CAHAN Contractor name: JOHN H. CRAIG / KRAUSS: CRAIG
Street address 85N SEWALLS PT RD Jurisdiction ALLA SEWALLS POINT
City STUART FL Permit No. _____
Zip 34996 Final inspection date: _____

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101 4 7 1 1 as indicated below

- Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent.
- Ducts are located within conditioned space (Section 101 4.7.1.1 exception 1)
- The joints or seams are already sealed with fabric and mastic (Section 101 4.7.1 1 exception 2)
- System was tested (see below) and repairs were made as necessary – (Section 101.4.7.1.1 exception 3)

Signature: [Signature] Date: 8/15/12
Printed Name: John Craig
Contractor License # CAC049286

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in. w.c.).

Signature: _____ Date: _____
Printed Name _____

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 8-24-12 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10188	Cooper	Final		
after 9AM	8510 Sewalls Pt Krauss & Crane	Final	No Ins	
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10087	Parks	Final		
	3 Window Team Parks	Sewall	Pass	Close
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10199	Hantom	Final		rec'd letter from architect
	102 N Sewalls	Porches Rm & bath	Close	Close
	OB			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 8-29-12 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10187	Schwartz 109 S Sewalls Krauss & Crane	Final AC	Pass	CLOSE INSPECTOR <i>[Signature]</i>
10188	109 S Sewalls Krauss & Crane	Final AC	Pass	CLOSE INSPECTOR <i>[Signature]</i>
10090	SUBIN 8 Palm Ct CHITWOOD	FINAL Pavers	Pass	CLOSE INSPECTOR <i>[Signature]</i>
10061	ELDER 110 S SPT RD OB	FRAMING	Pass	INSPECTOR <i>[Signature]</i>
10179	CLEMENTS 11 W. HIGH PT WILCO	TRUSS TIE DOWN	Pass	* Code INSPECTOR <i>[Signature]</i>
10144	MURPHY / BAKHS 8 AERONS NEST	SUP/VIEW PILING INST	2:00 - 2:30	INSPECTOR
				INSPECTOR

10500

A/C CHANGEOUT



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

BUILDING PERMIT CARD

THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER	10500	DATE ISSUED	JUNE 24, 2013
SCOPE OF WORK	AC CHANGEOUT CONTRACTOR TO SUPPLY LADDER IF NEEDED		
CONTRACTOR:	KRAUSS & CRANE		
PARCEL CONTROL NUMBER	353741000-000-002402	SUBDIVISION	PT GOVT LOT 2
CONSTRUCTION ADDRESS	85 N SEWALLS PT RD		
OWNER NAME	CAHAN		
QUALIFIER	JOHN CRANE	CONTACT PHONE NUMBER	287-1237

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 PERMIT APPLICATION

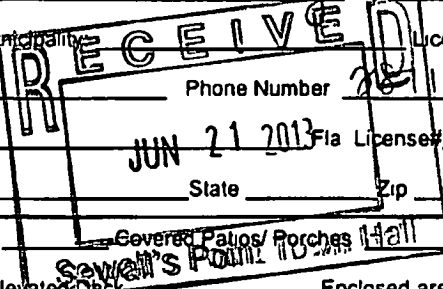
Date: 6/20/13 Permit Number: 10500
 OWNER/LESSEE NAME Karen Cahan Phone (Day) 4755845 (Fax) _____
 Job Site Address 95 N Sewall's Pt Rd City Stuart State FL Zip 34996
 Legal Description S813 OF S 10 8 ACS OF GOV LOT 8 Parcel Control Number 35-37-41-000-000-00840-8
 Fee Simple Holder Name N/A Address N/A
 City MA State N/A Zip N/A Telephone N/A

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Replace a/c equipment like for like

WILL OWNER BE THE CONTRACTOR?
 (If yes, Owner Builder questionnaire must accompany application)
 YES _____ NO
Has a Zoning Variance ever been granted on this property?
 YES _____ (YEAR) _____ NO _____
 (Must include a copy of all variance approvals with application)

COST AND VALUES (Required on ALL permit applications)
 Estimated Value of Improvements: \$5217.09
 (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 Krauss Crane Inc Phone 8871887 Fax 8834055
 Qualifiers name John H Crane Street 9045 Dixie Hwy City Stuart State FL Zip 34994
 State License Number CA049286 OR Municipal License Number _____
 LOCAL CONTACT: John H crane Phone Number 8871887
 DESIGN PROFESSIONAL: _____
 Street _____ City _____ State _____ Zip _____ Phone Number _____



AREAS SQUARE FOOTAGE: Living _____ Garage _____ Covered Patios/Porches/Hall _____ Enclosed Storage _____
 Carport _____ Total under Roof 7177 sq ft 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

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*******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 See signed proposal
 State of Florida, County of _____
 On This the _____ day of _____ 20____
 by _____ who is personally
 known to me or produced _____
 As identification _____
 Notary Public
 My Commission Expires _____

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
[Signature]
 State of Florida, County of Martin
 On This the 20 day of June 2013
 by John Crane who is personally
 known to me or produced _____
 As identification Michelle Thomas
 My Commission Expires _____
MICHELLE THOMAS
 MY COMMISSION # DD974341

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 205.204) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105 3 2) PLEASE PICK UP YOUR PERMIT PROMPTLY!

6-27-13



Krauss & Crane, Inc.
AIR CONDITIONING SALES AND SERVICE

904 South Dixie Highway • PO Box 1259 • Stuart, Florida 34994-1259
772-287-1227 • Fax 772-283-4055 • Email: kandc@kciac.com

License
CACM49286

FLORIDA'S OLDEST TRANE DEALER - THE LEADER IN RELIABILITY SINCE 1957

Name: Karen Cahan
Site Address: 85 N. Sewall's Pt Rd.
City: Stuart
State: FL
Phone: 475-5845 Zip: 34998

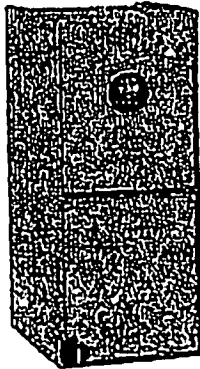
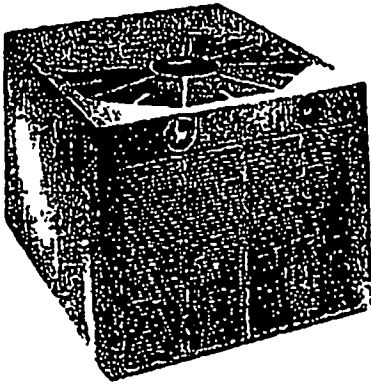
Date: 6/17/2013
Proposal #: R108172013144449-1

Consultant: Mike Foster
Billing Address:
City:
State:
Phone: Postal Code:

RHEEM 13 SEER

High Efficiency

System Investment



Base System	\$5,617.09
Optional Items Total	\$0.00
	<\$0.00>
	<\$0.00>
Sales Tax:	\$0.00
System Total	\$5,617.09
Initial Investment	\$0.00
Balance	\$5,617.09
Term:	Rate: % Est. Payment: \$0.00
Investment Type:	Check
Net Investment After Credit & Rebates	\$5,617.09

-1177ft³

57500
48150 1800cfm
15350

By signing this agreement I acknowledge that I have read and understand each page, including the terms and conditions

[Signature]
Customer

Date

[Signature]
Representative
Approved by

Date: 6/17/13
Date: 6/17/13
Page 1



1957

Krauss & Crane, Inc.

AIR CONDITIONING SALES AND SERVICE

904 South Dixie Highway • P.O. Box 1259 • Stuart, Florida 34994-1259
772-287-1227 • Fax 772-283-4055 • Email: kandc@kciac.com

License
CAC049286

FLORIDA'S OLDEST TRANE DEALER - THE LEADER IN RELIABILITY SINCE 1957

Name Karen Cahan Proposal Number R108172013144449-1 Date 8/17/2013

Components in Base System Investment

Tax Credits and Rebates

Qty.	Model#	Description
1	RBHP67J11SH4	Rheem 35 Inch Air-Handler With High Efficiency Fan Motor
1	13AJN60A01	Standard Rheem 5 Ton Cooling Unit 13 SEER
1	LNFLSH3-5	Clean existing ref. piping for reuse with <u>R-410A</u> 3 to 5 tons
1	ESA-1	One Year Energy Savings Agreement.
2	ELECTRECON	Reconnect Electrical to Equipment
1	DRIPPAN-FS	Drip Pan For Air Handler With Float Switch
1	SUP PLENUM	New Supply Plenum
1	HORZ-RETURN- PLENUM	New Horizontal Return Plenum
1	PER-SP	Permit Fee for Sewalls Point
1	EVAC-RECLAIM	Evacuate / Reclaim Existing Refrigerant
1	HORZ-AH3	Indoor Unit In Attic Area
1	AC-COND3	Outdoor Unit With Air Handler

Inclusions

All work to be performed in a neat manner.
 Charge system to manufactures specifications
 Clean up work area before leaving workite
 Complete system start up.
 Ensure proper condensate drainage
 Evacuate refrigerant system to remove all moisture.
 Installation to meet or exceed all codes.
 Our own professional journeyman class technicians
 Quality Assurance Review
 Properly dispose of old equipment off premises.
 Outside unit secured to hurricane code.
 Warranty is 10 years parts and 1 year labor

Exclusions

Homeowners are required to register equipment warranties within 60 days of installation

Installation Instructions

By signing this agreement I acknowledge that I have read and understand each page, including the terms and conditions.

Customer
 Date

Representative
 Approved by

Date 6/17/13

 Date 6/17/13

Canan



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

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Air Conditioning Change out Affidavit

Residential Commercial

Package Unit Yes No (Use Condenser side of form below for equipment listing)

Duct Replacement Yes No - Refrigerant line replacement Yes No

Flushing Existing Refrigerant lines Yes No - Adding Refrigerant Drier Yes No

Rooftop A/C Stand Installation Yes No - Curb Installation Yes No

Smoke Detector in Supply (over 2000 CFM) Yes No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg Rheem Model# RBHP-25

Volts ²⁰⁸/240 CFM's 1800 Heat Strip 10 Kw

Min Circuit Amps 53 Wire gauge #6

Max Breaker size 60 Min Breaker size 53

Ref line size Liquid 3/8 Suction 1/8

Refrigerant type R410A

Location Existing New

Attic/Garage/Closet (specify) Attic

Access Scuttle hole / laundry room

(Contractor must provide ladder if required)

Condenser: Mfg Rheem Model# 13AJN60

Volts ²⁰⁸/240 SEER/EER 13 BTU's 57000

Min Circuit Amps 45 Wire gauge #6

Max Breaker size 60 Min Breaker size 45

Ref line size Liquid 3/8 Suction 1/8

Refrigerant type R410A

Location Existing New

Left/Right/Rear/Front/Roof Right side

Condensate Location @ cond

EXISTING SYSTEM COMPONENTS

Air handler: Mfg Ruud Model# UBHA24

Volts ²⁰⁸/240 CFM's 1800 Heat Strip 10 Kw

Min Circuit Amps 53 Wire gauge #6

Max Breaker size 60 Min Breaker size 53

Ref line size Liquid 3/8 Suction 1/8

Refrigerant type R22

Location Ext New

Attic/Garage/Closet (specify) attic

Access Scuttle hole / laundry room

Condenser: Mfg Ruud Model# UAMB000

Volts ²⁰⁸/240 SEER/EER 10 BTU's 60000

Min Circuit Amps 45 Wire gauge #6

Max Breaker size 60 Min Breaker size 45

Ref line size Liquid 3/8 Suction 1/8

Refrigerant type R22

Location Ext New

Left/Right/Rear/Front/Roof Rt side

Condensate Location @ cond

Certification:

I hereby certify that the information entered on this form accurately represents the equipment installed and further affirm that this equipment is considered matched as required by FBC - R (N) 1107 & 1108

John Lee

Signature

01/30/13

Date

Cahan



Certificate of Product Ratings

AHRI Certified Reference Number 4615287

Date 6/19/2013

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

Outdoor Unit Model Number 13AJN60

Indoor Unit Model Number RBHP-25+RCHL-60A1

Manufacturer RHEEM MANUFACTURING COMPANY

Trade/Brand name RHEEM 13AJN SERIES

Manufacturer responsible for the rating of this system combination is RHEEM MANUFACTURING COMPANY

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

Cooling Capacity (Btuh)	57000*
EER Rating (Cooling)	11 00
SEER Rating (Cooling)	13 00

* Ratings followed by an asterisk (*) indicate a voluntary rerate of previously published data, unless accompanied with a WAS which indicates an involuntary rerate

DISCLAIMER

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

TERMS AND CONDITIONS

This Certificate and its contents are proprietary products of AHRI. This Certificate shall only be used for individual, personal and confidential reference purposes. The contents of this Certificate may not, in whole or in part, be reproduced, copied, disseminated, entered into a computer database, or otherwise utilized, in any form or manner or by any means, except for the user's individual, personal and confidential reference.

CERTIFICATE VERIFICATION

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



Air-Conditioning, Heating, and Refrigeration Institute

Cahan



Project Summary
Entire House
Krauss & Crane, Inc

Job
Date
By

904 S Dixie Hwy Stuart FL 34994 Phone 772 287-1227 Fax. 772-283-4055 Email kandc@kcaac.com Web www.kcaac.com

Project Information

For Karen Cahan
85 N Sewalls Point Rd, Stuart, FL 34996
Phone 772-475-5845

Notes

Design Information

Weather West Palm Beach Intl AP, FL, US

Winter Design Conditions

Outside db 47 °F
Inside db 70 °F
Design TD 23 °F

Summer Design Conditions

Outside db 91 °F
Inside db 75 °F
Design TD 16 °F
Daily range L
Relative humidity 50 %
Moisture difference 57 gr/lb

Heating Summary

Structure 29293 Btuh
Ducts 5119 Btuh
Central vent (0 cfm) 0 Btuh
Humidification 0 Btuh
Piping 0 Btuh
Equipment load 34413 Btuh

Sensible Cooling Equipment Load Sizing

Structure 36007 Btuh
Ducts 7001 Btuh
Central vent (0 cfm) 0 Btuh
Blower 0 Btuh
Use manufacturer's data n
Rate/swing multiplier 0.96
Equipment sensible load 41460 Btuh

Infiltration

Method Simplified
Construction quality Average
Fireplaces 0

	Heating	Cooling
Area (ft²)	2772	2772
Volume (ft³)	27720	27720
Air changes/hour	0.32	0.16
Equiv AVF (cfm)	148	74

Latent Cooling Equipment Load Sizing

Structure 9240 Btuh
Ducts 2668 Btuh
Central vent (0 cfm) 0 Btuh
Equipment latent load 11907 Btuh
Equipment total load 53367 Btuh
Req total capacity at 0.70 SHR 4.9 ton

Heating Equipment Summary

Make
Trade
Model
AHRI ref no.n/a
Efficiency 100 EFF
Heating input 0 Btuh
Heating output 34413 Btuh
Temperature rise 17 °F
Actual air flow 1833 cfm
Air flow factor 0.053 cfm/Btuh
Static pressure 0 in H2O
Space thermostat

Cooling Equipment Summary

Make
Trade
Cond
Coil
AHRI ref no
Efficiency 0 SEER
Sensible cooling 0 Btuh
Latent cooling 0 Btuh
Total cooling 0 Btuh
Actual air flow 1833 cfm
Air flow factor 0.043 cfm/Btuh
Static pressure 0 in H2O
Load sensible heat ratio 0.78

Bold/italic values have been manually overridden

Calculations approved by ACCA to meet all requirements of Manual J 8th Ed



Right-Suite® Universal 2012 12 0 04 RSU13682

X Load Calcs\Cahan 6-20-13 rup Calc = MJ8 Front Door faces N

2013-Jun-20 17 04 04

Page 1



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

FLORIDA ENERGY CONSERVATION CODE

Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101 4 7 1 1 & FS 553 912)

Owner Karan Cahan Contractor name: Krauss Crane
 Street address: 85 N Sewalls Pt Rd Jurisdiction: Sewalls Pt
 City: Stuart Permit No _____
 Zip: 34996 Final inspection date _____

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101 4 7 1 1 as indicated below

- _____ Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent
- _____ Ducts are located within conditioned space (Section 101 4 7 1 1 exception 1)
- _____ The joints or seams are already sealed with fabric and mastic (Section 101.4 7 1 1 exception 2)
- _____ System was tested (see below) and repairs were made as necessary – (Section 101.4 7.1 1 exception 3)

Signature: [Signature] Date 10/20/13
 Printed Name: John Crane
 Contractor License # CA049286

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in w c)

Signature: _____ Date _____
 Printed Name: _____



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

Oh FWP
 10500

FLORIDA ENERGY CONSERVATION CODE

Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101.4 7 1 1 & FS 553.912)

Owner: Karen Cahlan Contractor name: Krauss Crane Inc
 Street address: 85 N Sewalls Pt Rd Jurisdiction: Sewalls Pt
 City: STUART Permit No: 10500
 Zip: 34996 Final inspection date: _____

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101.4.7.1.1 as indicated below:

- _____ Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent.
- _____ Ducts are located within conditioned space. (Section 101.4 7.1.1 exception 1)
- _____ The joints or seams are already sealed with fabric and mastic (Section 101.4.7.1 1 exception 2)
- _____ System was tested (see below) and repairs were made as necessary -- (Section 101 4 7.1 1 exception 3)

Signature: John Crane Date: 6/19/13
 Printed Name: John H. Crane III
 Contractor License #: CAC049280

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in w.c.).

Signature: Eric A Snook Date: 6-24-13
 Printed Name: Eric A. Snook

10760

DOCK ADDITION

BOATLIFT

RENEWAL



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.	10760	DATE ISSUED	02/05/2014
SCOPE OF WORK.	DOCK ADDITION AND BOAT LIFT RENEWAL		
CONTRACTOR.	SCOTT J HOLMES BUILDING		
PARCEL CONTROL NUMBER:	353741000000002402	SUBDIVISION	
CONSTRUCTION ADDRESS:	85 N SEWALL'S POINT ROAD		
OWNER NAME.	KAREN CAHAN TRUST		
QUALIFIER.	SCOTT HOLMES	CONTACT PHONE NUMBER	772 220-4780

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8.00AM TO 4 00PM INSPECTIONS 9 00AM TO 3 00PM - MONDAY THROUGH FRIDAY**

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER	10760	
ADDRESS	85 N SEWALL'S POINT ROAD	
DATE 02/05/2014	SCOPE OF WORK	DOCK ADDITION AND BOAT LIFT RENEWAL

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350 00 SFR, \$175 00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned space (@ \$121 75 per sq ft)		s f	
Total square feet non-conditioned space or interior remodel (@ \$59 81 per sq ft)		s f	
Total square feet remodel with new trusses @ \$90 78 per sq ft		\$	
Total Construction Value		\$	
Building fee (2% of construction value SFR or >\$200K)		\$	
Building fee (1% of construction value < \$200K + \$100 per insp)			
Total number of inspections (Value < \$200K)@\$100ea		\$	
Dept of Comm Affairs Fee (1 5% of permit fee - \$2 00 min)		\$	
DBPR Licensing Fee (1 5% of permit fee - \$2 00 min)		\$	
Road impact assessment (04% of construction value - \$5 min)			
Martin County Impact Fee		\$	
TOTAL BUILDING PERMIT FEE		\$	

ACCESSORY PERMIT	Declared Value	\$	
Total number of inspections @ \$100 00 each	1		100 00
Dept of Comm Affairs Fee (1 5% of permit fee - \$2 00 min)		\$	2 00
DBPR Licensing Fee (1 5% of permit fee - \$2 00 min)		\$	2 00
Road impact assessment (04% of construction value - \$5 min)		\$	5 00
TOTAL ACCESSORY PERMIT FEE:		\$	109 00

Pa
 3-7-14
 CE19117

hohmesbuild@yahoo.com

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number. 10760

Date 1/30/14

OWNER/LESSEE NAME KAREN Cahan Phone (Day) 7722204780 (Fax) 7722203722

Job Site Address 25 N Sewalls Point Rd City St. Ards State FL Zip 34996

Legal Description attached Parcel Control Number 35-37-41-000-000-00240-2

Fee Simple Holder Name N/A Address _____

City _____ State _____ Zip _____ Telephone _____

*SCOPE OF WORK (PLEASE BE SPECIFIC) Dock/Lift

WILL OWNER BE THE CONTRACTOR?

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

Has a Zoning Variance ever been granted on this property?

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

COST AND VALUES (Required on ALL permit applications)

Estimated Value of Improvements \$ 10,000 -
(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 Scott J Holmes Building Phone 7722204780 Fax 7722203722

Qualifiers name Scott Holmes Street P.O. Box 2804 City J. Boh State FL Zip 34958

State License Number CG055859 OR Municipality _____ License Number _____

LOCAL CONTACT Scott Phone Number 772-220-4780

DESIGN PROFESSIONAL N/A 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.

- 1 YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY WHEN FINANCING. CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION
- 2 IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES
- 3 BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95
- 4 THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID REF FBC 2007 SECT 105 4 1, 105 4 1 1 - 5

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

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

OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE

Karen Cahan

State of Florida, County of MARTIN

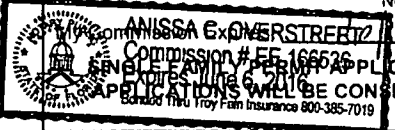
On This the 30 day of JANUARY, 20 14

by KAREN Cahan who is personally

known to me or produced

As identification Christa Weisted

Notary Public



CONTRACTOR/LICENSSEE NOTARIZED SIGNATURE

Scott Holmes

State of Florida, County of Martin

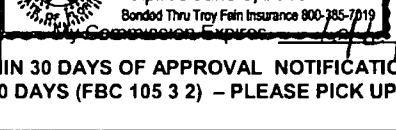
On This the 30 day of JANUARY, 20 14

by Scott Holmes who is personally

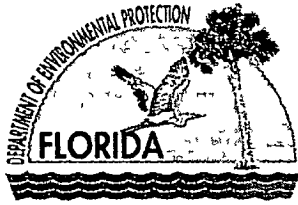
known to me or produced

As identification Christa Weisted

Notary Public



APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105 3 4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105 3 2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!



FLORIDA DEPARTMENT OF
ENVIRONMENTAL PROTECTION
SOUTHEAST DISTRICT BRANCH OFFICE
337 N US HIGHWAY 1, SUITE 307
FORT PIERCE, FL 34950-4255
(772) 467-5500

RICK SCOTT
GOVERNOR

CARLOS LOPEZ CANTERA
LT GOVERNOR

HIRSCHEL I VINYARD JR
SECRETARY

January 29, 2014

Karen Cahan
85 N Sewall's Point Road
Stuart, FL 34996
Sent via e-mail karencahan13@gmail.com

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Re File No 43-0132890-003
File Name Cahan, Karen

Dear Ms Cahan

This is to acknowledge receipt of your notice on December 30, 2013, of intent to use a General Permit (GP), pursuant to Rule 62-330 427, Florida Administrative Code (F A C) to remove an existing boatlift and construct a 15' x 26' (390 ft²) dock addition to the terminal platform in the same location as the boatlift under an existing roof The project is located in the St Lucie River, Class III Waters, adjacent to 85 N Sewall's Point Road, Jensen Beach, (Section 35, Township 37 South, Range 41 East), in Martin County (Latitude N 27° 12' 46 07" Longitude W 80° 12' 34 66")

In addition to regulatory authorization under Rule 62-330 427, F A C , this type of activity may also require both proprietary and federal authorizations Proprietary authorization is required pursuant to Chapters 253 and 258, Florida Statute (F S), to use state-owned submerged lands for private purposes Federal authorization is needed for works in waters of the United States through the State Programmatic General Permit (SPGP) program

Your intent to use a general permit has been reviewed by Department staff for all three types of authorizations (1) regulatory authorization, (2) proprietary authorization (related to state-owned submerged lands), and (3) federal authorization The authority for review and the outcomes of the reviews are listed below Please read each section carefully Your project may not have qualified for all three forms of authorization If your project did not qualify for one or more of the authorizations, the specific section dealing with that authorization will advise you on how to obtain it **You may NOT commence your project without all three authorizations.** If you change the project from what you submitted, the authorization(s) granted may no longer be valid at the time of commencement of the project Please contact us prior to beginning your project if you wish to make any changes

1 Regulatory Review – GRANTED

Based on the forms, drawings, and documents submitted with your notice, it appears that the project meets the requirements for the General Permit under Rule 62-330 427, F A C Any activities performed under a general permit are subject to general conditions required in Rule 62-330 405, F A C (attached), and the specific conditions of Rule 62-330 427, F A C (attached) Any deviations from these conditions may subject the permittee to enforcement action and possible penalties

Please be advised that the construction phase of the GP must be completed within five years from the date the notice to use the GP was received by the Department If you wish to continue this GP beyond the expiration date, you must notify the Department at least 30 days before its expiration

Authority for review- Part IV of Chapter 373, F S , Title 62, F A C and in accordance with the operating agreements executed between the Department and the water management districts, as referenced in Chapter 62-113, F A C

2 Proprietary Review (related to state-owned lands). – GRANTED

The Department acts as staff to the Board of Trustees of the Internal Improvement Trust Fund (Board of Trustees) and issues certain authorizations for the use of sovereign submerged lands The Department has the authority to review activities on sovereign submerged lands under Chapter 253 F S , Chapter 18-21, F A C , and Section 62-330 075, F A C as required

Please be advised that any use of sovereign submerged lands without specific prior authorization from the Board of Trustees will be considered a violation of Chapter 253, Florida Statutes and may subject the affected upland riparian property owners to legal action as well as potential fines for the prior unauthorized use of sovereign land

Your project will occur on sovereignty submerged land and will require authorization from the Board of Trustees to use public property As staff to the Board of Trustees, we have reviewed the proposed project and have determined that, as long as it is located within the described boundaries and is consistent with the attached general consent conditions, the project qualifies for a letter of consent to use sovereignty submerged lands Therefore, pursuant to Chapter 253 77, Florida Statutes, you may consider this letter as authorization from the Board of Trustees to perform the proposed project

3 SPGP REVIEW – APPROVED

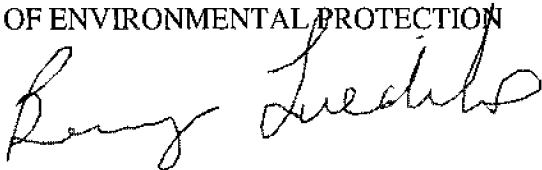
Your proposed activity as outlined on your notice and attached drawings qualifies for Federal authorization pursuant to the State Programmatic General Permit IV-R1, and a **SEPARATE permit** or authorization **will not be required** from the Corps Please note that the Federal authorization expires on July 25, 2016 You, as permittee, are required to adhere to all General Conditions and Special conditions that may apply to your project A copy of the SPGP IV-R1 with all terms and conditions and the General Conditions may be found at <http://www.saj.usace.army.mil/Divisions/Regulatory/sourcebook.htm>

Authority for review - an agreement with the USACOE entitled "Coordination Agreement Between the U S Army Corps of Engineers (Jacksonville District) and the Florida Department of Environmental Protection, or Duly Authorized Designee, State Programmatic General Permit," Section 10 of the Rivers and Harbor Act of 1899, and Section 404 of the Clean Water Act

If you revise your project after submitting the initial joint application, please contact us as soon as possible. Also, if you have any questions, please contact Mary Zavash at (772) 467-5566 or via e-mail at Mary.Zavash@dcp.state.fl.us. When referring to this project, please use the FDEP file number listed above.

Executed in Palm Beach County, Florida

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION



Benny Luedike
Environmental Manager
Submerged Lands and Environmental
Resource Program

Enclosures:

General Conditions for All General Permits, Ch 62-330 405, F A C
Specific Conditions for Ch 62-330 427, F A C
Notice of Rights of Substantially Affected Persons
General Consent Conditions for the use of Sovereignty Submerged Lands
Attachment A- Newspaper Publication Notice
Special Conditions for the use of SPGP IV-RI
Project Drawings

Copies furnished to:

USACOE- Palm Beach Gardens, FDEP-SP@usace.army.mil
Danna Small, danna@DLSEnvironmentalservices.com
pwalker@sewallspoint.org

FILING AND ACKNOWLEDGMENT

FILED, on this date, pursuant to 120 52(9),
Florida Statutes, with the designated Department
Clerk, receipt of which is hereby acknowledged

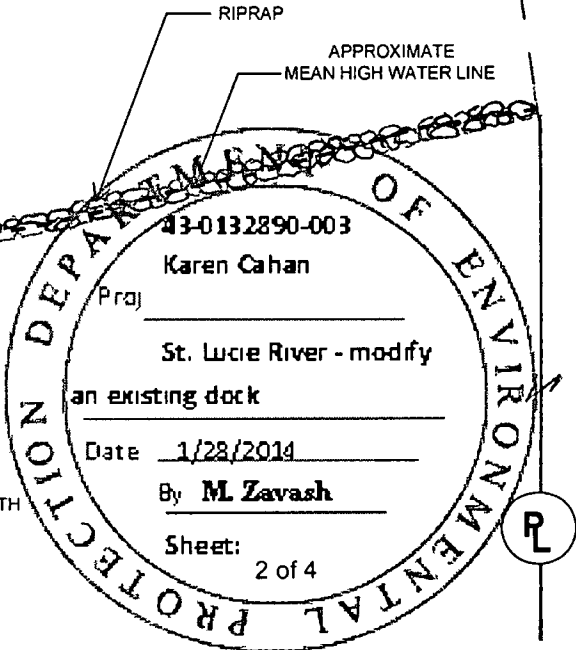
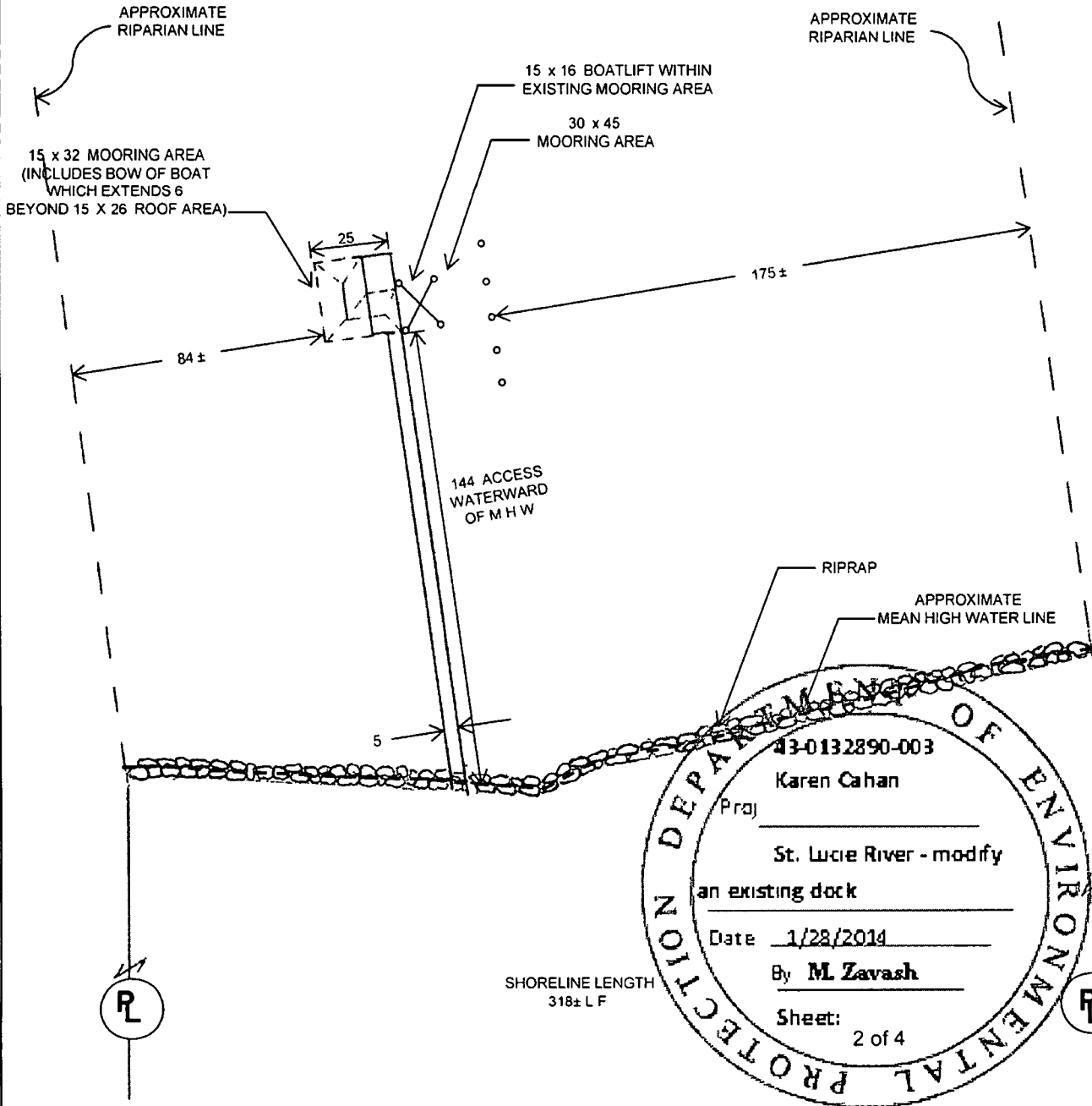


1-29-14

Clerk

Date

ST LUCIE RIVER



NOTES

- 1 EXISTING DOCK STRUCTURE TOTALS 1 370 SQ. FT. - DOCK STRUCTURE PLUS PRE-EMPTED AREA TOTALS 2 810 SQ. FT.
- 2 ELEVATION DATUM IS NAVD 88
MHW = 0.57 NAVD MLW = 1.50 NAVD
- 3 NO RESOURCES PRESENT WITHIN MOORING AREAS

DS Environmental Services, Inc.
 1901 SW Yellowtail Avenue
 Port Saint Lucie, FL 34953

Phone 772-215-3997 Fax 772-879-4520
 www.dsenvironmentalservices.com

Existing Plan View

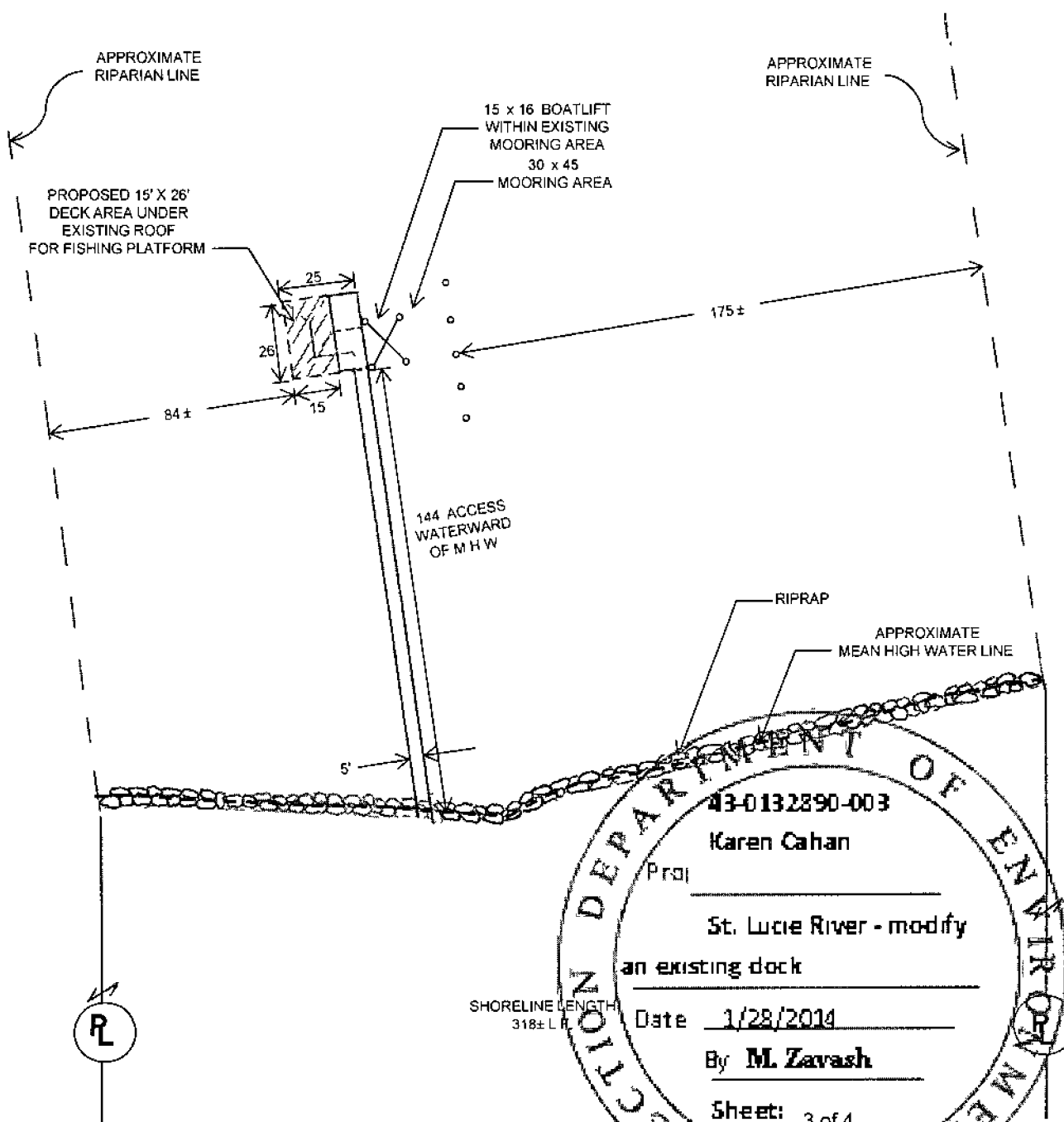
Karen Cahan
 85 N Sewall's Point Road
 Stuart, Florida
 PCN# 35-37-41-000-000-00240-2

SCALE
 1" = 50'

DEC 2013

SHEET 2 of 4

ST LUCIE RIVER



43-0132890-003
 Karen Cahan
 Proj _____
 St. Lucie River - modify
 an existing dock
 Date 1/28/2014
 By ML Zarash
 Sheet: 3 of 4

SHORELINE LENGTH
 318± L.F.



NOTES

- 1 EXISTING DOCK STRUCTURE REMAINS 1 370 SQ. FT. - DOCK STRUCTURE PLUS PRE-EMPTED AREA TOTALS 2 720 SQ. FT.
- 2 ELEVATION DATUM IS NAVD 88
 MHW = -0.57 NAVD MLW = -1.50 NAVD
- 3 NO RESOURCES PRESENT WITHIN MOORING AREAS

DS Environmental Services, Inc.
 1901 SW Yellowtail Avenue
 Port Saint Lucie, FL 34953

Phone 772-215-3997 Fax 772-879-4520
 www.dsenvironmentalservices.com

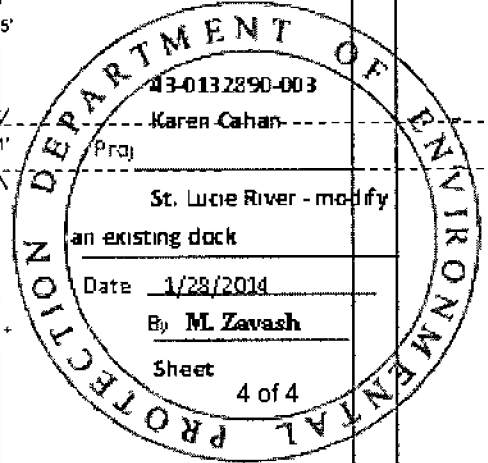
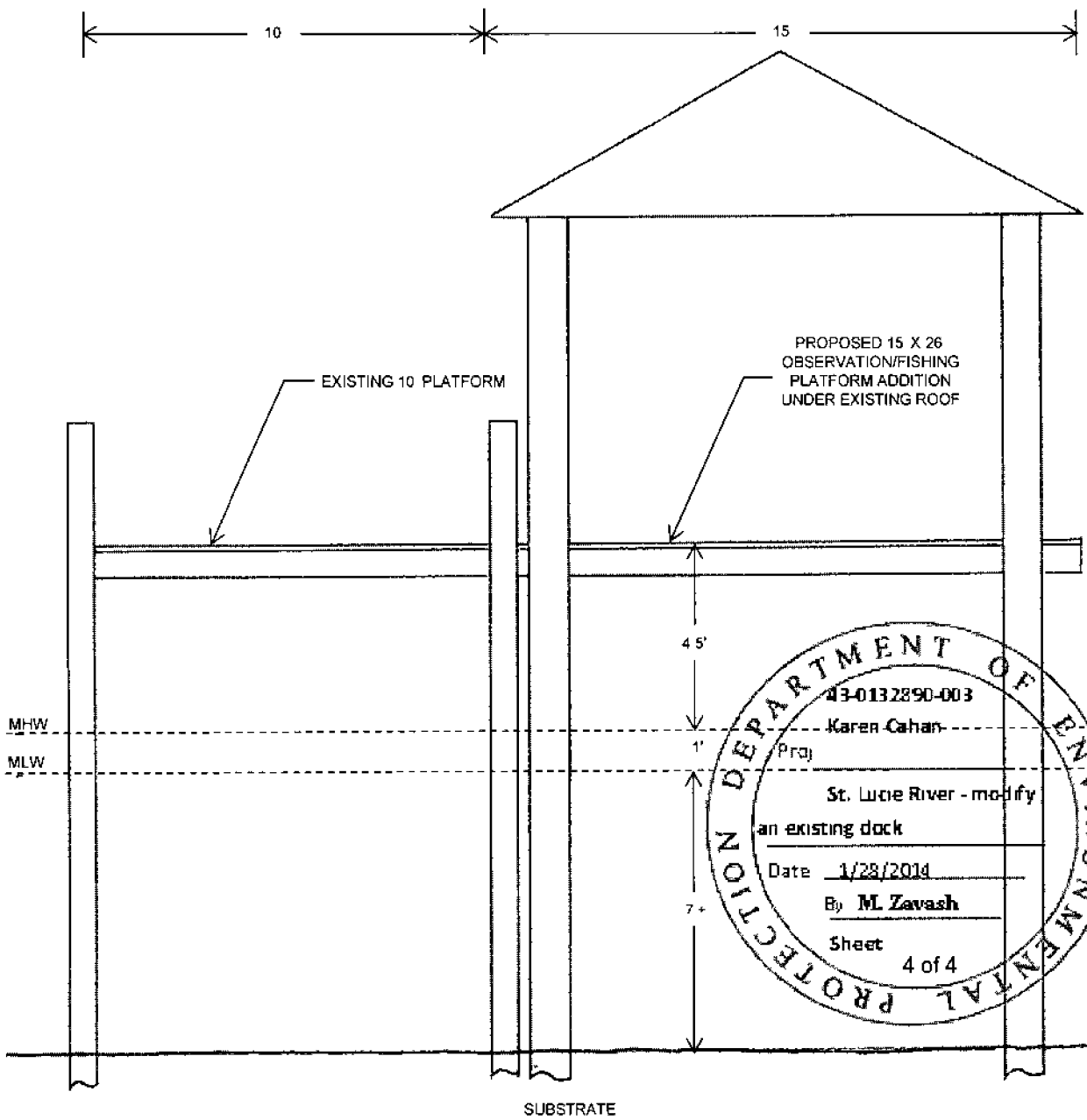
Proposed Plan View

Karen Cahan
 85 N Sewall's Point Road
 Stuart, Florida
 PCN# 35-37-41-000-000-00240-2

SCALE 1" = 50'

DEC 2013

SHEET 3 of 4

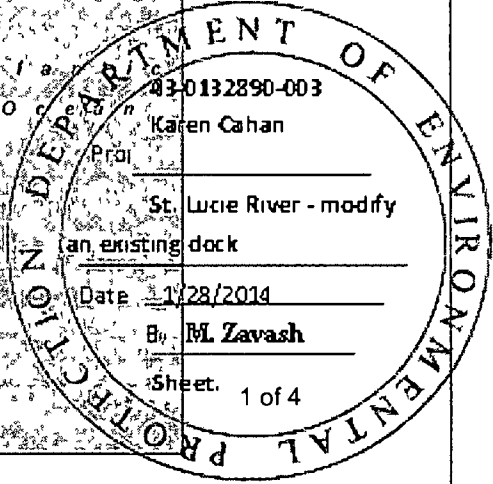
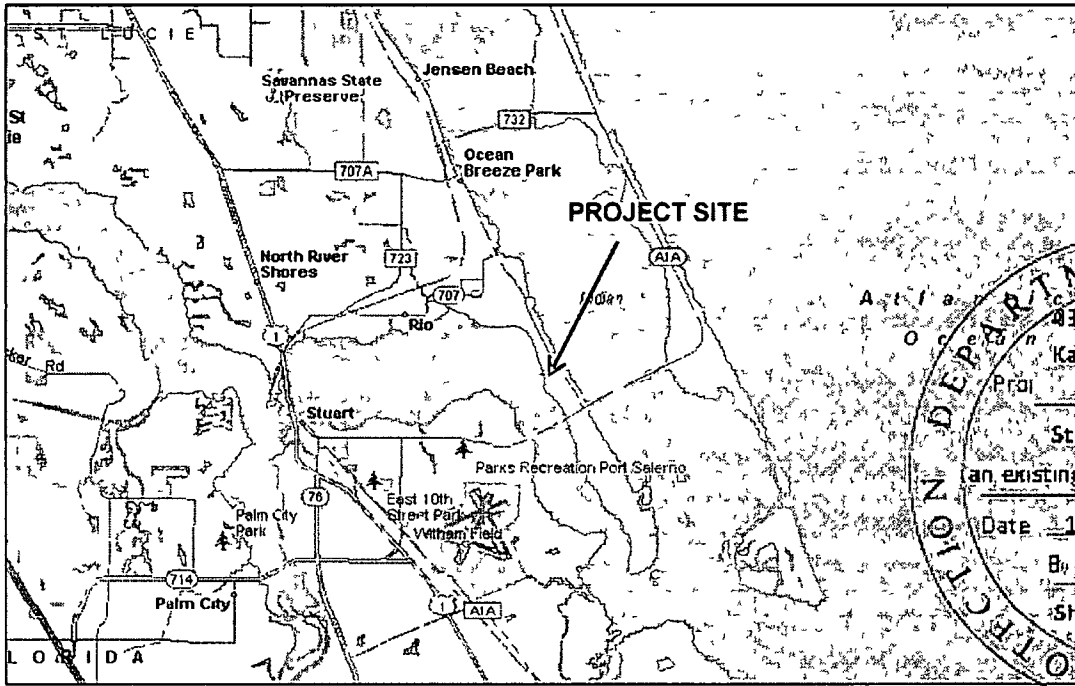


- NOTES**
- ELEVATION DATUM IS NAVD 88
MHW = -0.57 NAVD MLW = 1.50 NAVD
 - NO RESOURCES PRESENT WITHIN MOORING AREAS

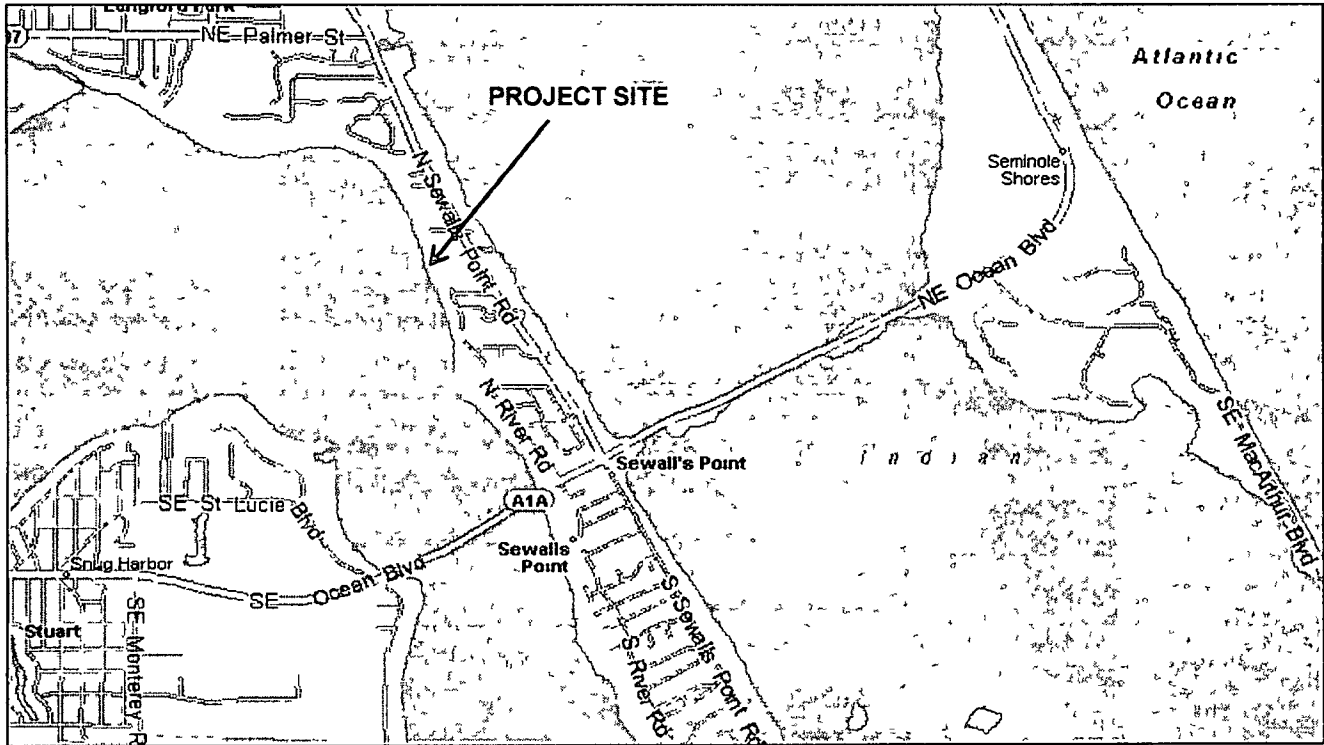
DS Environmental Services, Inc.
 1901 SW Yellowtail Avenue
 Port Saint Lucie, FL 34953

Phone 772-215-3997 Fax 772-879-4520
 www.dsenvironmentalservices.com

Cross Section View		
Karen Cahan 85 N. Sewall's Point Road Stuart, Florida PCN# 35-37-41-000-000-00240-2		
SCALE 1" = 4'	DEC 2013	SHEET 4 of 4



MARTIN COUNTY



SECTION 35, TOWNSHIP 37 SOUTH, RANGE 41 EAST

DS Environmental Services, Inc.
 1901 SW Yellowtail Avenue
 Port Saint Lucie, FL 34953

Phone 772-215-3997 Fax 772-879-4520
 www.dsenvironmentalservices.com

Location Map

Karen Cahan
 85 N Sewall's Point Road
 Stuart, Florida
 PCN# 35-37-41-000-000-00240-2

SCALE **NTS**

DEC 2013

SHEET 1 of 4

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 6/6 - 14 Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10849	GOULD	STEAM UNIT		
	48 S SP7 RD	SLAB	PASS	
	HAODAD CONST			INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10887	WILLIAMS	FENCE FINAL		
	170 PENNY SEWALL		PASS	CLOSE
	A GARAGE FENCE			INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10760	 	 	 	
	85 N. SP7 RD	BOAT LIFT	PASS	
	SCOTT HOLMES			INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10061	ELDER	FRAMING		
	170 S SP7 RD	TIE DOWN	RESET	
	O/B			INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10877	JUSTAK	FENCE FINAL		
	171 S SP7 RD		PASS	CLOSE
	STUART FENCE			INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

11017

A/C CHANGEOUT



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

BUILDING PERMIT CARD

THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	11017	DATE ISSUED:	September 22, 2014
SCOPE OF WORK:	A/C Change Out		
CONTRACTOR:	Krauss & Crane, Inc		
PARCEL CONTROL NUMBER:	35-37-41-000-00240-2	SUBDIVISION:	
CONSTRUCTION ADDRESS:	85 N Sewall's Point Road		
OWNER NAME:	Cahan		
QUALIFIER:	John Crane	CONTACT PHONE NUMBER:	287-1227

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

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

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

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 PERMIT APPLICATION

Date 9/19/14 Permit Number 11017
 OWNER/LESSEE NAME Karen Cahan Phone (Day) _____ (Fax) _____
 Job Site Address 85 N. Sewalls Pt. Rd City Stuart State FL Zip 34996
 Legal Description _____ Parcel Control Number 35-37-41-000-000-00240-2
 Fee Simple Holder Name _____ Address _____
 City _____ State _____ Zip _____ Telephone _____

***SCOPE OF WORK (PLEASE BE SPECIFIC).** A/C Change Out

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 \$ 5700.00
 (Notice of Commencement required when over \$2500 prior to first inspection \$7 500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY
 Estimated Fair Market Value prior to improvement \$ _____
 (Fair Market Value of the Primary Structure only Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

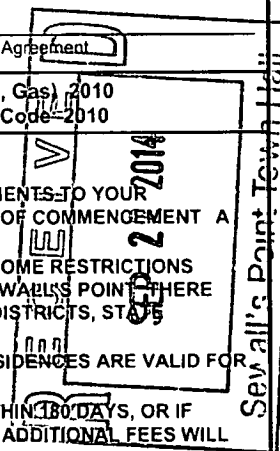
Construction Company Krauss & Crane Inc Phone 772-287-1227 Fax 772-283-4055
 Qualifiers name John H Crane III Street 904 S. Dixie Hwy City Stuart State FL Zip 34994
 State License Number CAC0492806 OR Municipality _____ License Number _____
LOCAL CONTACT John Crane III Phone Number 772-287-1227
DESIGN 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 _____
 State of Florida, County of _____
 On This the Signed day of _____ 2014
 by _____ who is personally
 known to me or produced _____
 As identification Estimate
 My Commission Expires _____
 Notary Public _____

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE
 X John Crane
 State of Florida, County of Martin
 On This the 19 day of September 2014
 by _____ who is personally
 known to me or produced _____
 As identification MICHELLE THOMAS
 MY COMMISSION #FF100795
 EXPIRES March 23, 2018
 My Commission Expires _____
 Notary Public _____
 Florida Notary Service Cam

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105 3 4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105 3 2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!



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:	11017		
ADDRESS:	85 N Sewall's Point Road		
DATE ISSUED:	9/22/2014	SCOPE OF WORK:	A/C Change Out

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	\$	\$ 5,700.00
Total number of inspections @ \$ 100 00 per insp # insp		\$ 1.00	\$ 100 00
Dept of Comm Affairs Fee (1 5% of permit fee - \$2 00 min)		\$	\$ 2 00
DBPR Licensing Fee (1 5% of permit fee - \$2 00 min)		\$	\$ 2 00
Road impact assessment (04% of construction value - \$5 min)		\$	\$ 5 00
TOTAL ACCESSORY PERMIT FEE:		\$	\$ 109.00

**CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

05/21/14

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

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

PRODUCER Stuart Insurance, Inc 3070 S W Mapp Palm City, FL 34990 Joseph E Coons, CPCU CIC	Phone 772-286-4334 Fax 772-286-9389	CONTACT NAME PHONE (A/C, No, Ext) E MAIL ADDRESS	FAX (A/C, No)
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Krauss & Crane, Inc John Crane P O Box 1259 Stuart, FL 34995	INSURER A Southern Owners	10190	
	INSURER B Auto Owners Insurance Co	18988	
	INSURER C Zenith Insurance Company		
	INSURER D		
	INSURER E		
	INSURER F		

COVERAGES CERTIFICATE NUMBER REVISION NUMBER

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			72057542	06/01/14	06/01/15	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PRO JECT <input type="checkbox"/> LOC						
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			9543505401	06/01/14	06/01/15	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 500,000 BODILY INJURY (Per accident) \$ 500,000 PROPERTY DAMAGE (Per accident) \$ 500,000
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						
C	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes describe under DESCRIPTION OF OPERATIONS below		N/A	Z068006409	01/01/14	01/01/15	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH ER E L EACH ACCIDENT \$ 100,000 E L DISEASE EA EMPLOYEE \$ 100,000 E L DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101 Additional Remarks Schedule If more space is required)

Heating & A/C Systems

CERTIFICATE HOLDER TOWSP-1 Town of Sewalls Point 1 South Sewalls Point Road Sewalls Point, FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS AUTHORIZED REPRESENTATIVE <i>Joseph E. Coons</i>
--	---

STATE OF FLORIDA
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONSTRUCTION INDUSTRY LICENSING BOARD



LICENSE NUMBER
 CAC049286

The CLASS B AIR CONDITIONING CONTRACTOR
 Named below IS CERTIFIED
 Under the provisions of Chapter 489 FS
 Expiration date AUG 31, 2016



CRANE, JOHN HENRY III
 KRAUSS AND CRANE, INC
 904 S DIXIE HWY
 PO BOX 1259
 STUART, FL 34995-1259

ISSUED 06/15/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L140615000936

2014-2015 **MARTIN COUNTY ORIGINAL
 BUSINESS TAX RECEIPT**

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

ACCOUNT 1973-518-0285 CERT CAC049286
 PHONE (772) 287-1227 SIC NO 023511
 LOCATION 904 S DIXIE HWY MAR

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR	\$	00	LIC FEE	\$	26 25
	\$	00	PENALTY	\$	00
	\$	00	COL FEE	\$	00
	\$	00	TRANSFER	\$	00
		TOTAL	26 25		



HAS SATISFIED REQUIREMENTS TO ENGAGE IN THE BUSINESS PROFESSION OR OCCUPATION
 OF **A/C CONTRACTOR**
 AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

CRANE, JOHN HENRY III (QUALIFIER)
 KRAUSS & CRANE, INC
 P O BOX 1259
 STUART, FL 34995-1259

29 DAY OF AUGUST 2014
 AND ENDING SEPTEMBER 30 2015

11 2013 43984 0001 26 25 PAID



Krauss & Crane, Inc.
AIR CONDITIONING SALES AND SERVICE

904 South Dixie Highway • PO Box 1259 • Stuart, Florida 34994-1259
772-287-1227 • Fax 772-283-4055 • Email: kandc@kcrac.com

License
CAC049286

FLORIDA'S OLDEST TRANE DEALER - THE LEADER IN RELIABILITY SINCE 1957

Name: Karen Cahan

Proposal Number: R108152014131136-1

Date: 8/15/2014

Components in Base System Investment

Tax Credits and Rebates

Qty.	Model#	Description
1	RBHP24J11SH4	Rheem 35 Inch Air-Handler With High Efficiency Fan Motor
1	14AJM42A01	Rheem 3 5 Ton 14 to 16 SEER Cooling Unit
1	LNFLSH1-3	Clean existing ref piping for reuse with R-410A up to 3 tons
1	ESA-1	One Year Energy Savings Agreement
1	DRIPPAN-FS	Drip Pan For Air Handler With Float Switch
2	ELECTRECON	Reconnect Electrical to Equipment
1	HORZ-RETURN- PLENUM	New Horizontal Return Plenum
1	SUP PLENUM	New Supply Plenum
1	PER-SP	Permit Fee for Sewalls Point
1	EVAC-RECLAIM	Evacuate / Reclaim Existing Refrigerant
1	HORZ-AH2	Indoor Unit Easily Accessible With At Least 4' Attic Height
1	AC-COND2	Outdoor Unit With Air Handler

Inclusions

- All work to be performed in a neat manner
- Charge system to manufactures specifications.
- Clean up work area before leaving worksite
- Complete system start up
- Ensure proper condensate drainage
- Evacuate refrigerant system to remove all moisture.
- Installation to meet or exceed all codes
- Our own professional journeyman class technicians
- Quality Assurance Review
- Properly dispose of old equipment off premises
- Outside unit secured to hurricane code
- Warranty is 10 years parts and 1 year labor

Exclusions

Homeowners are required to register equipment warranties within 60 days of installation

Installation Instructions

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

By signing this agreement I acknowledge that I have read and understand each page, including the terms and conditions

Customer

Karen Cahan
Date: 9.19.14

Representative

Mike Jost

Date: 8-15-

Approved by

MJ

Date: 8-15



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

**TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY**

Air Conditioning Change out Affidavit

Residential Commercial _____
 Package Unit Yes No (Use Condenser side of form below for equipment listing)
 Duct Replacement Yes No - Refrigerant line replacement Yes No
 Flushing Existing Refrigerant lines Yes No - Adding Refrigerant Drier Yes No
 Rooftop A/C Stand Installation Yes No - Curb Installation Yes No
 Smoke Detector in Supply (over 2000 CFM) Yes No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg <u>Rheem</u> Model# <u>RBHP24J11SH4</u>	Condenser: Mfg <u>Rheem</u> Model# <u>14AJM42A01</u>
Volts ²⁰⁸ / <u>230</u> CFM's <u>1400</u> Heat Strip <u>10</u> Kw	Volts ²⁰⁸ / <u>230</u> SEER/EER <u>15.5/13.0</u> BTU's <u>40000</u>
Min Circuit Amps <u>51/58</u> Wire gauge # <u>6</u>	Min Circuit Amps <u>26</u> Wire gauge # <u>10</u>
Max Breaker size <u>60</u> Min Breaker size _____	Max Breaker size <u>40</u> Min Breaker size <u>30</u>
Ref line size Liquid <u>3/8</u> Suction <u>7/8</u>	Ref line size Liquid <u>3/8</u> Suction <u>7/8</u>
Refrigerant type <u>410A</u>	Refrigerant type <u>410A</u>
Location Existing <input checked="" type="checkbox"/> New _____	Location Existing <input checked="" type="checkbox"/> New _____
<u>Attic</u> /Garage/Closet (specify) _____	<u>Left</u> /Right/Rear/Front/Roof _____
Access <u>Attic - yes Upstairs laundry</u>	Condensate Location <u>Condenser</u>

NOTE: CONTRACTOR MUST SUPPLY A PROPER LADDER IF REQUIRED FOR INSPECTION

EXISTING SYSTEM COMPONENTS

Air handler: Mfg <u>Ruud</u> Model# <u>UBHA21511</u>	Condenser: Mfg <u>Ruud</u> Model# <u>UAMB042JAZ</u>
Volts ²⁰⁸ / <u>230</u> CFM's _____ Heat Strip <u>10</u> Kw	Volts ²⁰⁸ / <u>230</u> SEER/EER _____ BTU's <u>42000</u>
Min Circuit Amps _____ Wire gauge <u>6</u>	Min Circuit Amps _____ Wire gauge <u>10</u>
Max Breaker size <u>60</u> Min Breaker size _____	Max Breaker size <u>40</u> Min Breaker size _____
Ref line size Liquid <u>3/8</u> Suction <u>7/8</u>	Ref line size Liquid <u>3/8</u> Suction <u>7/8</u>
Refrigerant type <u>R22</u>	Refrigerant type <u>R22</u>
Location Ext <input checked="" type="checkbox"/> New _____	Location Ext <input checked="" type="checkbox"/> New _____
<u>Attic</u> /Garage/Closet (specify) _____	<u>Left</u> /Right/Rear/Front/Roof _____
Access <u>Yes - Upstairs laundry</u>	Condensate Location <u>Condenser</u>

Certification:

I hereby certify that the information entered on this form accurately represents the equipment installed and further that this equipment is considered matched as required by FBC - R (N)1107 & 1108

Signature John Lane Date 9-18-14



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

FLORIDA ENERGY CONSERVATION CODE

Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101 4 7 1 1 & FS 553 912)

Owner Karen Cahon Contractor name Krauss & Crane Inc
 Street address 85 N. Sewalls Pt Rd Jurisdiction _____
 City Stuart Permit No _____
 Zip 34996 Final inspection date _____

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101 4 7 1 1 as indicated below

- Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent
- Ducts are located within conditioned space (Section 101 4 7 1 1 exception 1)
- The joints or seams are already sealed with fabric and mastic (Section 101 4 7 1 1 exception 2)
- System was tested (see below) and repairs were made as necessary – (Section 101 4 7 1 1

exception 3)

Signature John Crane Date 09/19/14
 Printed Name John Crane
 Contractor License # CAC 049286

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in w c)

Signature _____ Date _____
 Printed Name _____



Certificate of Product Ratings

AHRI Certified Reference Number 3412437

Date 9/18/2014

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

Outdoor Unit Model Number 14AJM42

Indoor Unit Model Number RBHP-24+RCHL-48A1

Manufacturer RHEEM SALES COMPANY, INC.

Trade/Brand name RHEEM; RUUD, WEATHERKING

Series name RHEEM 14AJM SERIES

Manufacturer responsible for the rating of this system combination is RHEEM SALES COMPANY, INC

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

Cooling Capacity (Btuh)	40000
EER Rating (Cooling)	13.00
SEER Rating (Cooling)	15.50
IEER Rating (Cooling)	

* Ratings followed by an asterisk (*) indicate a voluntary rerate of previously published data unless accompanied with a WAS which indicates an involuntary rerate

DISCLAIMER

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

TERMS AND CONDITIONS

This Certificate and its contents are proprietary products of AHRI. This Certificate shall only be used for individual, personal and confidential reference purposes. The contents of this Certificate may not, in whole or in part, be reproduced, copied, disseminated, entered into a computer database or otherwise utilized, in any form or manner or by any means, except for the user's individual, personal and confidential reference.

CERTIFICATE VERIFICATION

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



we make hvc better™

©2014 Air-Conditioning, Heating, and Refrigeration Institute

CERTIFICATE NO.:

130555448040630595



Model Number Identification

14

14.5 SEER

A

A = AIR CONDITIONER

J

VOLTAGE
J = 208-230
SINGLE PHASE

M

DESIGN
SERIES
M = 1ST DESIGN
R-410A

18NOMINAL COOLING CAPACITY

19 = 18,000 BTU/HR [5.28 kW]
25 = 24,000 BTU/HR [7.03 kW]
30 = 30,000 BTU/HR [8.79 kW]
36 = 36,000 BTU/HR [10.55 kW]
~~42 = 42,000 BTU/HR [12.31 kW]~~
48 = 48,000 BTU/HR [14.07 kW]
49 = 47,000 BTU/HR [13.77 kW]
56 = 54,000 BTU/HR [15.83 kW]
60 = 60,000 BTU/HR [17.58 kW]

A

CABINET
A = FULL METAL JACKET

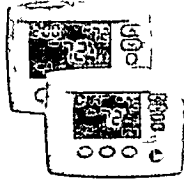
01

RHEEM
VALUE
SERIES

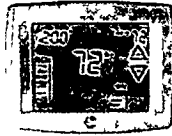
Accessories

- Low Pressure Control (RXAC-A07)
- High Pressure Control (RXAB-A07)
- Low Ambient Control (RXAD-A08)
- Compressor Time Delay Control
- Crankcase Heater
- Sound Enclosure

Thermostats



200-Series *
Programmable



300-Series *
Deluxe
Programmable



400-Series *
Special Applications/
Programmable

500-Series *
Communicating/
Programmable

Brand	Descriptor (3 Characters)	Series (3 Characters)	System (2 Characters)	Type (2 Characters)
RHC	TST	213	UN	MS
RHC=Rheem	TST=Thermostat	200=Programmable 300=Deluxe Programmable 400=Special Applications/ Programmable 500=Communicating/ Programmable	GE=Gas/Electric UN=Universal (AC/HP/GE) MD=Modulating Furnace DF=Dual Fuel CM=Communicating	SS=Single Stage MS=Multi-Stage

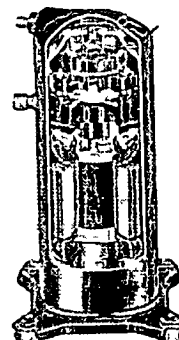
* Photos are representative. Actual models may vary.

For detailed thermostat match-up information,
see specification sheet form number T11-001

Scroll® Compressor

The reliable scroll compressor is the key to efficiency for this Rheem model. It's the latest in high-efficiency compressor technology. The advanced scroll compressor offers low noise and vibration characteristics and features tolerance to liquid refrigerant and system contamination. The scroll compressor also has low start torque, reducing start problems in the field. And its unique design enables air conditioners to perform efficiently and quietly.

[] Designates Metric Conversions





A FRANK L. BENNARD, P.E., INC. INNO

June 16, 2009

Work Prepared For

Miami Tech, Inc
3611 NW 74th Street
Miami, FL 33147

Certification valid for
one (1) project site
only

Regarding A/C Unit Tiedown to Concrete

Attention Building Official

This office has reviewed the design requirements for the installation of air conditioning units onto concrete slabs using Miami Tech Condensing Unit Tiedowns (CUTD-1). The tiedown or clip used for the installation shall be fabricated using galvanized steel (ASTM A653, Grade 33 minimum), measuring 4"-18" tall x 1" wide x 14ga (0.070" minimum), with layout as described below, and a maximum height of 60" per unit. The lower leg of each clip shall be anchored to the concrete host structure with (1) 1/4" diameter ITW Buildex (or equivalent) carbon steel Tapcon embedded 1-3/4" minimum into 3,000 psi concrete with 2-1/2" minimum edge distance. The upper leg of each clip shall utilize a minimum of (2) #10 sheet metal screws anchored through the clip into the minimum 22-gauge (0.028" minimum) steel housing (ASTM A653, Grade 33 minimum). Maximum wind pressures for use with this installation are as noted below; additional anchors may be utilized to achieve higher pressures, as shown.

Table 1: (1) clip required at each corner of unit or (2) each opposite face for a total of (4) per unit

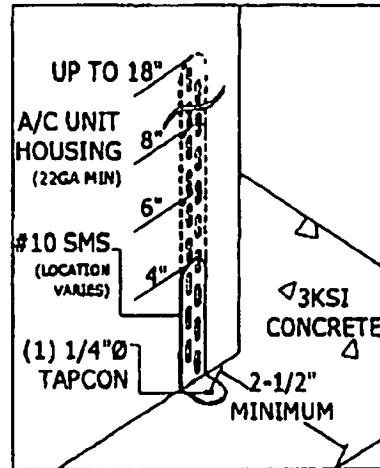
Maximum Unit Face, Area (ft ²)	(2) SMS	(3) SMS	(4) SMS
4	+/- 114 PSF	+/- 150 PSF	+/- 150 PSF
7	+/- 65 PSF	+/- 98 PSF	+/- 127 PSF
9	+/- 50 PSF	+/- 76 PSF	+/- 98 PSF
12	+/- 38 PSF	+/- 57 PSF	+/- 74 PSF
15	+/- 30 PSF	+/- 45 PSF	+/- 59 PSF

Note (1) Tapcon acceptable for both one- and two-anchor hole versions of the CUTD

Table 2: (2) clips required at each corner of unit or (4) each opposite face for a total of (8) per unit

Maximum Unit Face, Area (ft ²)	(2) SMS	(3) SMS	(4) SMS
20	+/- 45 PSF	+/- 68 PSF	+/- 91 PSF
25	+/- 36 PSF	+/- 54 PSF	+/- 73 PSF
30	+/- 33 PSF	+/- 50 PSF	+/- 66 PSF
35	+/- 30 PSF	+/- 46 PSF	+/- 61 PSF

Note (1) Tapcon acceptable for both one- and two-anchor hole versions of the CUTD



All other installation work shall follow the minimum requirements of the 2007 Florida Building Code with 2009 supplements. Thank you for your attention to this matter.

Respectfully,

JUN 17 2009

Frank L. Bennardo, P.E.
ENGINEERING EXPRESS®
#PE0046549 | Cert. Auth 9885
09-MTI-0001

AHN Timothy



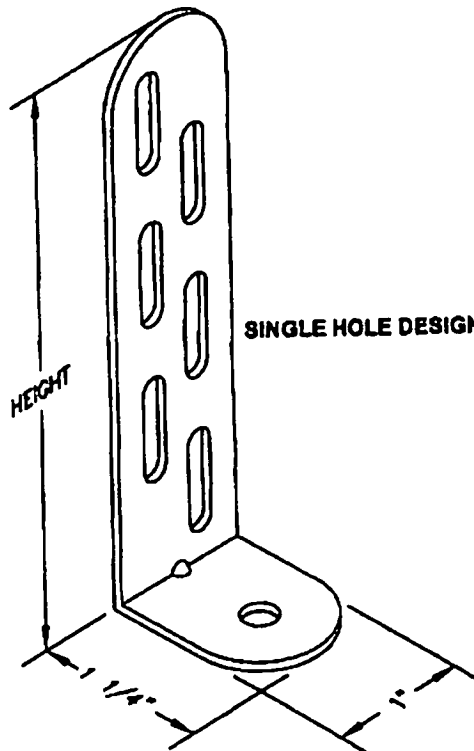
PRODUCT SPECIFICATIONS

STANDARD CONSTRUCTION

MATERIAL
14 GAUGE/G-90 ASTM A-653 COLD-ROLLED GALVANIZED STEEL

STANDARD SIZES

TYPE	BASE DEPTH	WIDTH	HEIGHT	PACK QTY
CUTD1	1.25"	1"	4"	4 PKG
CUTD1B	1.25"	1"	4"	BULK
CUTD1-6	1.25"	1"	6"	4 PKG
CUTD1B-6	1.25"	1"	6"	BULK
CUTD1B-8	1.25"	1"	8"	BULK
CUTD1B-11	1.25"	1"	11"	BULK
CUTD1B-14	1.25"	1"	14"	BULK
CUTD1B-18	1.25"	1"	18"	BULK
CUTD1B-21	1.25"	1"	21"	BULK



SINGLE HOLE DESIGN

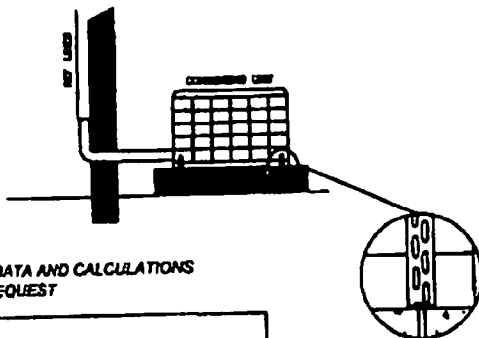
FEATURES

GALVANIZED STEEL PROVIDES EXCELLENT CORROSION RESISTANCE AND LONGEVITY

SLATTED DESIGN PROVIDES A UNIVERSAL MOUNT

SOLD IN PEG BOARD DISPLAY PACKAGES (4 PER PACKAGE)

OPTION: BULK PACKAGING AVAILABLE AVAILABLE SIZES 6", 8", 11", 14", 18" AND 21"



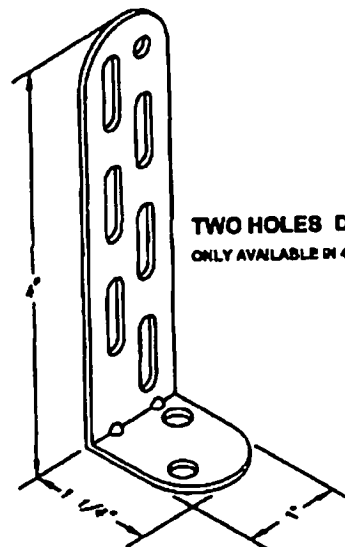
NOTE: ENGINEERING DATA AND CALCULATIONS AVAILABLE UPON REQUEST

JOB NAME: _____
 LOCATION: _____
 ARCHITECT: _____
 ENGINEER: _____
 CONTRACTOR: _____

CONTACT MIAMI TECH INC. FOR ADDITIONAL INFORMATION OR WITH SPECIAL REQUIREMENTS.

3611 NW 74TH ST
 MIAMI, FL 33147
 PHONE: 305-693-7054 FAX: 305-693-8152

WEB: WWW.MIAMITECH.COM
 EMAIL: SALES@MIAMITECH.COM



TWO HOLES DESIGN ONLY AVAILABLE IN 4" HEIGHT

CUTD1

CONDENSING UNIT TIE DOWN PRODUCT SPECIFICATIONS

NOTE: ALL DRAWINGS SUBJECT TO CHANGE WITHOUT PRIOR NOTICE.



REVISED BY AF	DATE 05.01.2009	SCALE NOT TO SCALE	CUTD1
DESIGNED BY IV	DATE 05.01.2009	DESIGNED BY IG	

TOWN OF SEWALL'S POINT

Building Department – Inspection Log

Date of Inspection Mon Tue Wed Thur Fri 12/17/14 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11087	Cahan	Mechanical		
	85 N Sewalls Pt Rd	Final		
	Krauss + Crane			
11017	Cahan	Mechanical		
	85 N Sewalls Pt Rd	Final		
	Krauss + Crane			
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11105	MADRI'S	Pool Steel,		
	34 E. BIGH Pt	Board / MD	PASS	
	Spiller Pools			
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALL'S POINT

Building Department – Inspection Log

Date of Inspection Mon Tue Wed Thur Fri 11/21/15 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11144	Krett 3 Mirama Rd Campeny Roof Maint	Roof Sheathing Dry-in Metal		cancel NOT NEAR
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11017	Kahan 85 N SPR Krauss + Crane	Final Mechanical call John 260-0915 for ladder		OFF CONSTRUCTION INSPECTOR TO LOW
				INSPECTOR OFF
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11087	Kahan 85 N SPR Krauss + Crane	Final Mechanical		
				INSPECTOR OFF
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11135	Kahan 81 N SPR Krauss + Crane	Final mechanical	Pass	Close
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11110	Gaydos 15 W High Point Rd TC Floors, Inc	Electrical Lath Plumbing Top out	Pass	
				INSPECTOR OFF
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

11087

A/C CHANGEOUT



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

BUILDING PERMIT CARD

THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	11087	DATE ISSUED:	November 13, 2014
SCOPE OF WORK:	A/C Change Out		
CONTRACTOR:	Krauss & Crane		
PARCEL CONTROL NUMBER:	35-37-41-000-000-00240-2	SUBDIVISION:	Lot 2
CONSTRUCTION ADDRESS:	85 N Sewall's Point Road		
OWNER NAME:	Cahan		
QUALIFIER:	John H Crane III	CONTACT PHONE NUMBER:	287-1227

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4.00PM**

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:	11087		
ADDRESS:	85 N Sewall's Point Road		
DATE ISSUED:	11/13/2014	SCOPE OF WORK:	A/C Change Out

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	\$	\$ 4,312.00
Total number of inspections @ \$ 100 00 per insp # insp		\$	100 00
Dept of Comm Affairs Fee (1 5% of permit fee - \$2 00 min)		\$	\$ 2 00
DBPR Licensing Fee (1 5% of permit fee - \$2 00 min)		\$	\$ 2 00
Road impact assessment (04% of construction value - \$5 min)		\$	5 00
TOTAL ACCESSORY PERMIT FEE:		\$	109.00

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

Date 11/5/14 Permit Number 11087

OWNER/LESSEE NAME KAREN CRANE Phone (Day) 475-5845 (Fax) _____
 Job Site Address 85 N. SEWALLS POINT RD City STUART State FL Zip 34996
 Legal Description LOT 7 Parcel Control Number 35-37-41-000-000-00840-8
 Fee Simple Holder Name N/A Address N/A
 City N/A State NA Zip N/A Telephone NA

***SCOPE OF WORK (PLEASE BE SPECIFIC)** Replace a/c equipment like for like

WILL OWNER BE THE CONTRACTOR?
 (If yes, Owner Builder questionnaire must accompany application)
 YES NO
Has a Zoning Variance ever been granted on this property?
 YES (YEAR) _____ NO
 (Must include a copy of all variance approvals with application)

COST AND VALUES (Required on ALL permit applications)
 Estimated Value of Improvements \$ 43180
 (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 KRAUSS & CRANE Phone 887-1887 Fax 883-4055
 Qualifiers name JOHN H. CRANE III Street 904 SE DIXIE HWY City STUART State FL Zip 34994
 State License Number CR049826 OR Municipality _____ License Number _____
 LOCAL CONTACT JOHN H. CRANE III Phone Number 887-1887
 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

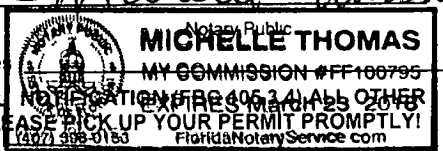
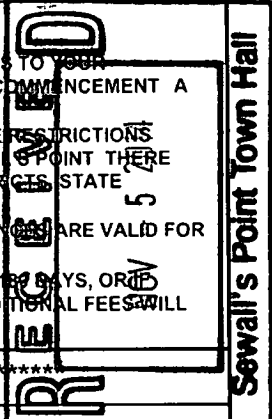
******* A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS *******

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 see signed proposal *
 State of Florida, County of _____
 On This the _____ day of _____, 20____
 by _____ who is personally
 known to me or produced _____
 As identification _____
 Notary Public
 My Commission Expires _____

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE
x John Crane III
 State of Florida, County of Martin
 On This the 5 day of November 2014
 by John Crane III who is personally
 known to me or produced _____
 As identification Michelle Thomas
 Notary Public
 My Commission Expires _____

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION FEE \$60.00 ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105 3 2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!
 (772) 398-9153 FloridaNotaryService.com





Krauss & Crane, Inc.

AIR CONDITIONING SALES AND SERVICE

904 South Dixie Highway • P.O. Box 1259 • Stuart, Florida 34994-1259
 772-287-1227 • Fax 772-283-4055 • Email kandc@kciac.com

License
CAC049286

PROPOSAL

Submitted To FAREN CAHAN Job Location SEVILLA DOG
 Street 85 N SEVILLA DOG DR Date 10/31/14
 City, St. Zip STUART FL 34986 Invoice # 171777
 Phone 888-57445 E-Mail _____

We Hereby Submit Specifications For The Following

DUCTWORK

New Supply Outlets _____ New Return Inlets _____
 Supply Plenum _____ Return Plenum _____
 Air Handler Stand _____ Filters _____
 Grilles _____ Duct Seal _____
 Other _____

PIPING

Primary Drain _____ Secondary Drain _____
 Drain Pan _____ Clean Out _____
 Cond Pump _____ Armaflex _____
 Liquid Line _____ Suction Line _____
 Other _____

ELECTRICAL

New Disconnect _____
 Existing Service _____
 New Breakers _____
 Add New Circuit _____
 Other _____

MISCELLANEOUS

Rust Resistant Brass Refrigerant Connectors All Required Permits Disposal Of Old Equipment _____
 Weather Resistant Vibration Isolation Pads Outside Unit Pad Secured To Hurricane Code _____
 All Work Complies With Existing Codes Crane Service _____ Refrigerant Recovery
 All Work To Be Performed In A Neat Manner By Our Own Journeyman Class Technicians

OTHER _____

GOOD				BETTER				BEST			
Brand				Brand <u>Phoen</u>				Brand			
Outside Unit				Outside Unit <u>14A M2A07</u>				Outside Unit			
Inside Unit				Inside Unit <u>LR-417T-654</u>				Inside Unit			
Heat Kw		Thermostat		Heat Kw <u>5</u>		Thermostat		Heat Kw		Thermostat	
SEER		Capacity		SEER <u>R</u>		Capacity <u>23,200</u>		SEER		Capacity	
WARRANTY				WARRANTY				WARRANTY			
Labor	Years	Comp	Years	Labor	Years	Comp	10 Years	Labor	Years	Comp	Years
Coil	Years	Parts	Years	Coil	10 Years	Parts	10 Years	Coil	Years	Parts	Years
Maintenance				Maintenance				Maintenance			
Years-Two Visits/Year				Years-Two Visits/Year				Years-Two Visits/Year			
System Cost		\$		System Cost		\$ <u>4,577</u>		System Cost		\$	
FP&L Rebate		\$		FP&L Rebate		\$ <u>26</u>		FP&L Rebate		\$	
Deposit		\$		Deposit		\$		Deposit		\$	
Balance		\$		Balance		\$ <u>4,312</u>		Balance		\$	
ACCEPTED				ACCEPTED				ACCEPTED			

PAYMENT DUE IN FULL UPON COMPLETION

ACCEPTED [Signature] DATE 10-31-14
Krauss & Crane Inc. CAC0-9286

THE ABOVE PRICES, SPECIFICATIONS AND CONDITIONS ARE SATISFACTORY AND ARE ACCEPTED YOU ARE AUTHORIZED TO DO THE WORK AS OUTLINED ABOVE. ALL MATERIALS AND EQUIPMENT REMAIN THE PROPERTY OF KRAUSS & CRANE, INC. UNTIL PAYMENT IN FULL. KRAUSS & CRANE, INC. RESERVES THE RIGHT TO TAKE POSSESSION OF ANY EQUIPMENT AND/OR MATERIALS DUE TO NON-PAYMENT.

ACCEPTED [Signature] DATE 10-31-14
 Method Of Payment Check _____ Credit Card _____ Financing With Approved Credit _____

THIS PROPOSAL MAY BE WITHDRAWN IF NOT ACCEPTED WITHIN 10 DAYS



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

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Air Conditioning Change out Affidavit

Residential [checked] Commercial []

Package Unit [] Yes [checked] No (Use Condenser side of form below for equipment listing)

Duct Replacement [] Yes [checked] No - Refrigerant line replacement [] Yes [checked] No

Flushing Existing Refrigerant lines [checked] Yes [] No - Adding Refrigerant Drier [checked] Yes [] No

Rooftop A/C Stand Installation [] Yes [checked] No - Curb Installation [] Yes [checked] No

Smoke Detector in Supply (over 2000 CFM) [] Yes [checked] No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: Rheem Model# RBH117
Volts 200/240 CFM's 800 Heat Strip 5 Kw
Min. Circuit Amps 25 Wire gauge #6
Max Breaker size 30 Min Breaker size 25
Ref line size Liquid 318 Suction 314
Refrigerant type R410A
Location Existing [checked] New []
Attic/Garage/Closet (specify) Guest Bedroom
Access Guest Bedroom

Condenser: Mfg Rheem Model# 14AJM35
Volts 200/240 SEER/EER 15 BTU's 23800
Min Circuit Amps 25 Wire gauge #10
Max Breaker size 30 Min. Breaker size 25
Ref line size Liquid 318 Suction 314
Refrigerant type R410A
Location Existing [checked] New []
Left/Right/Rear/Front/Roof SW corner
Condensate Location @ cond

NOTE: CONTRACTOR MUST SUPPLY A PROPER LADDER IF REQUIRED FOR INSPECTION

EXISTING SYSTEM COMPONENTS

Air handler: Mfg. RUUD Model# UBHC 14
Volts 200/240 CFM's 800 Heat Strip 5 Kw
Min Circuit Amps 25 Wire gauge #6
Max Breaker size 30 Min Breaker size 25
Ref. line size Liquid 318 Suction 314
Refrigerant type R22
Location Ext [checked] New []
Attic/Garage/Closet (specify) Guest Bedroom
Access Guest Bedroom

Condenser: Mfg RUUD Model# UAMB 24
Volts 200/240 SEER/EER 10 BTU's 24000
Min Circuit Amps 25 Wire gauge #10
Max Breaker size 30 Min Breaker size 25
Ref. line size. Liquid 318 Suction 314
Refrigerant type R22
Location Ext [checked] New []
Left/Right/Rear/Front/Roof SW corner
Condensate Location @ cond.

Certification:

I hereby certify that the information entered on this form accurately represents the equipment installed and further that this equipment is considered matched as required by FBC - R (N)1107 & 1108

Signature John Cahan

Date 11/5/14



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

FLORIDA ENERGY CONSERVATION CODE

Mandatory Duct Inspection Certification for HVAC change-out

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

Owner Kawri Canan Contractor name: Krauss & Crane
 Street address 85 N. Sewallis Pt Rd Jurisdiction Sewallis Point
 City: Stuart Permit No _____
 Zip 34996 Final inspection date. _____

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101.4.7.1.1 as indicated below

- Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent
- Ducts are located within conditioned space (Section 101.4.7.1.1 exception 1)
- The joints or seams are already sealed with fabric and mastic (Section 101.4.7.1.1 exception 2)
- System was tested (see below) and repairs were made as necessary – (Section 101.4.7.1.1 exception 3)

Signature John Crane Date 11/5/14

Printed Name: JOHN H. CRANE III

Contractor License #: CA049826

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in w c)

Signature _____ Date _____

Printed Name: _____

CAHAR



Certificate of Product Ratings

AHRI Certified Reference Number: 5625170 Date: 11/5/2014

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

Outdoor Unit Model Number: 14AJM25

Indoor Unit Model Number: RBHP-17+RCHL-24A2

Manufacturer: RHEEM SALES COMPANY, INC.

Trade/Brand name: RHEEM; RUUD, WEATHERKING

Series name: RHEEM 14AJM SERIES

Manufacturer responsible for the rating of this system combination is RHEEM SALES COMPANY, INC.

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

Cooling Capacity (Btuh)	23200
EER Rating (Cooling)	12.50
SEER Rating (Cooling)	15.00
IEER Rating (Cooling)	

* Ratings followed by an asterisk (*) indicate a voluntary rerate of previously published data unless accompanied with a WAS which indicates an involuntary rerate

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



©2014 Air-Conditioning, Heating, and Refrigeration Institute

CERTIFICATE NO.. 130596777384855764

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection Mon Tue Wed Thur Fri 12/17/14 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
110821	Cahan	Mechanical		
	8510 Sewalls Pt Rd	Final		
	Krauss + Crane			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11077	Cahan	Mechanical		
	8510 Sewalls Pt Rd	Final		
	Krauss + Crane			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11105	MADRI'S	Pool Steel,		
	34 E. BIGH OP	Pool / MD	PASS	
	Shilken Pools			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS

TOWN OF SEWALL'S POINT

Building Department – Inspection Log

Date of Inspection Mon Tue Wed Thur Fri 11/21/15 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11144	Krett 3 Mirama Rd Company Roof Maint	Roof Sheathing Dry-in Metal		CANNOT NOT REPAIR
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11017	Kahan 85 N SPR Krauss + Crane	Final Mechanical call John 260-0915 for ladder		PIPE CONDENSATE TO LOVE
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11087	Kahan 85 N SPR Krauss + Crane	Final Mechanical		
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11135	Kahan 81 N SPR Krauss + Crane	Final mechanical		CLOSE
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11110	Gaydos 15 W High Point Rd TC Floors, Inc	Electrical layh Plumbing Top out		
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR



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

Nick (son) 772-475-5845 OK

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8.00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5.00 PM - NO SUNDAYS

Owner Karen Cohen Address 25 N Small Phone 475.5845
 Contractor Tropica / Palms Address Palm City Phone 781.2979
 No. of Trees' REMOVE 4 Species - gumbo limbo, cabbage palm
 No of Trees' RELOCATE _____ Species _____
 No of Trees' REPLACE _____ Species _____

*** ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION ***

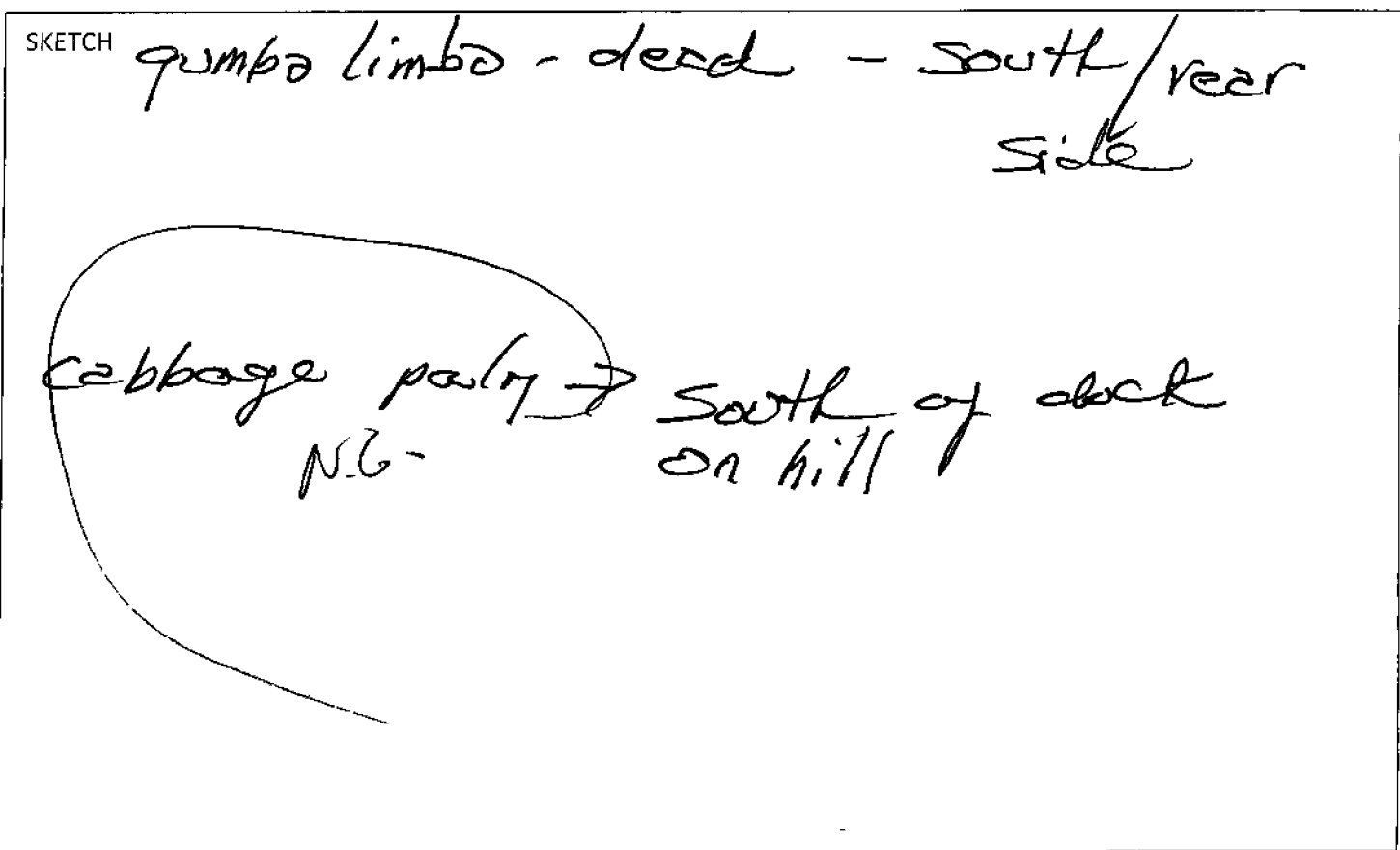
ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY

Reason for tree removal / relocation (See notice above) one dead / others block view

Signature of Property Owner Karen Cohen Date 6-25-13

Approved by Building Inspector [Signature] Date 7-2-13 Fee. 1500

NOTES Gumbo limbo OK - CABBAGE IS PROTECTED *EX# 4890*



6500

114323

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # _____

Date Issued _____

This application shall include a written statement giving reasons for removal, relocation or replacement and a site plan which shall include the dimensional location on a survey, scale drawing, or aerial photograph, superimposed with lot lines to scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.

Owner E. R. GIFFORD Address _____ Phone _____

Contractor SCOTT J. HARRIS BUILDING Address P.O. BOX 2804 Phone 561-220-4780

Number of trees to be removed (list kinds of trees) 10 TREE TO BE REMOVED

Number of trees to be relocated within 30 days (no fee) (list kinds of trees) 4 TREE TO TRANSPLANT

Number of trees to be replaced (list kinds of trees) Remove 6 trees for footprint of new dwelling

Permit Fee \$ 75.00 (\$25.00 - first tree plus \$10.00 - each additional tree - not to exceed \$100.00)

No permit fee for trees which are relocated on property or lie within a utility easement and are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property.

Plans approved as submitted BBS Plans approved as marked _____

Permit good for one year Fee for renewal of expired permit is \$5.00

Signature of applicant [Signature] Date submitted _____

Approved by Building Inspector Bos Bott Date 1-28-99

Approved by Building Commissioner _____ Date _____

Completed 1-28-99 Date BBS Checked by

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

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

TOWN OF SEWALL'S POINT, FLORIDA

Date 11/9/00 19 TREE REMOVAL PERMIT No 0379

APPLIED FOR BY SCOTT J. HOLMES (Contractor or Owner)

Owner WIND GIFFORD - 85 N. SEWALL'S POINT RD.

Sub-division , Lot , Block

Kind of Trees * TREE INVENTORY ATTACHED

No Of Trees REMOVE *

No Of Trees RELOCATE * WITHIN 30 DAYS (NO FEE)

No Of Trees REPLACE * WITHIN 30 DAYS

REMARKS CONTRACTOR TO TAPE OFF LIMITS OF CLEARING SP. ACTIVITY PRIOR TO COMMENCEMENT OF WORK. FEE \$ 15.00 } COST 11/9/00

Signed, [Signature] Applicant

Signed, [Signature] Town Clerk REG. OFFICIAL

FIELD VERIFICATION
11/9/00
BPN 5143

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE ORDINANCE 103

[Empty grid area for drawing or site plan]

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

0379
11/9/00

Permit # _____

Date Issued _____

This application shall include a written statement giving reasons for removal, relocation or replacement and a site plan which shall include the dimensional location on a survey, scale drawing, or aerial photograph, superimposed with lot lines to scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.

Owner Winn BIFORD Address 85N. Sewall's Point RD Phone 285-4493

Contractor SCOTT J Holmes Address P.O. Box 2804 Phone 220-4780

Number of trees to be removed (list kinds of trees) see Attached

Number of trees to be relocated within 30 days (no fee) (list kinds of trees) see Attached

Number of trees to be replaced (list kinds of trees) see Attached

Permit Fee \$ ~~(\$25.00 first tree plus \$10.00 - each additional tree - not to exceed \$100.00)~~ \$15.00

(No permit fee for trees which are relocated on property or lie within a utility easement & are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property.)

Plans approved as submitted _____ Plans approved, as marked FIELD REVIEW W/GC / OWNER / DERG, 11/9/00 (SEE ATTACH)

Permit good for one year. Fee for renewal of expired permit is \$5.00

Signature of applicant [Signature] Date submitted 11/9/00

Approved by Building Inspector [Signature] Date 11/9/00

Approved by Building Commissioner _____ Date _____

Completed _____ Date _____ Checked by _____

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

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

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon ~~1-8-00~~ Fri ~~1-8-00~~, 2000; Page 1 of 3.

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4978	Rimer	stem wall	PASSED	
⑥	29 S River Rd. Leor	BURST RET. WALL (SHT 4-REV. 5)	✗	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 5068	Winer	slab for	PASSED	TECHITE SPARK 11/6
①	19 Ridgeland Leor	wine cellar	✗	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
5096	Chinos	Final		
✗	83 S Sewall's Pt. Rd AW Roofing			CANCEL
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 5116	Olney	Post steel		CANCEL (EBA)
✗	91 S. S.P. RD. 465-2700 Lowden Pools			NO FORMBOARD SURVEY CONTR. ADVISED (DEC) 11/8 8:00
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 5100	McKenzie	Pool steel		
✗	11 River View Rd Lowden Pools			CANCEL (EBA) NO FORMBOARD SURVEY
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 5137	Carney	Footing & reinforcement (TRELLIS)	PASSED	FRAMING INSP. REQ.
⑦	12 N. River RL Shuler		✗	
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	REMARKS
✓ 4895	Seely	Insulation	PASSED	
⑨	37 N.E. Lofting Way GRIFFIN Const.	COMPUTER RM. RACQUETBALL CT.	✗	

OTHER ⑫ TR APPL - GIBBERD, 85 N. SEWALL'S POINT RD. (SCOTT J. HOLMES, CONST.)
 CANCELLED AS REQUESTED (MTG ON SITE W/ G.C./OWNER/ARCH.)

INSPECTOR (Name/Signature) _____

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # _____

Date Issued _____

This application shall include a written statement giving reasons for removal, relocation, or replacement and a site plan which shall include the dimensional location on a survey, scale drawing, or aerial photograph, superimposed with lot lines to scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc

Owner _____ Address 85 N Sewalls Phone 223-6348

Contractor Scott J Holmes Address P.O. Box 2804 Phone 220-4780

Number of trees to be removed (list kinds of trees) 2 Norfolk Island Pine

0
Number of trees to be relocated within 30 days (no fee) (list kinds of trees)

0
Number of trees to be replaced (list kinds of trees)

0
Permit Fee \$ _____

\$15 00

(No permit fee for trees which are relocated on property or lie within a utility easement and are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property)

Plans approved as submitted _____ Plans approved as marked _____

Permit good for one year Fee for renewal of expired permit is \$5 00

Signature of applicant [Signature] Plans approved as marked _____

Approved by Building Inspector [Signature] Date submitted 3/4/02

Completed _____
Date Checked by

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

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

See attached Tree Species List

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

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

No permit required for-

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

Permit Fee-

- 1 Tree permits are \$15 00, payable in advance
- 2 No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S F R)

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

Application procedures:

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

Owner ERWIN GIFFORD Address 85 N. SEWALLS PT. RD Phone 223-5516

Contractor SCOTT J HOLMES BLDG Address PO BOX 2804 Phone 220-4780
JENSEN BCH, FL

No of Trees: REMOVE 2 Type DEAD GUMBO LIMBOS

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

No of Trees: REPLACE _____ WITHIN 30 DAYS Type _____

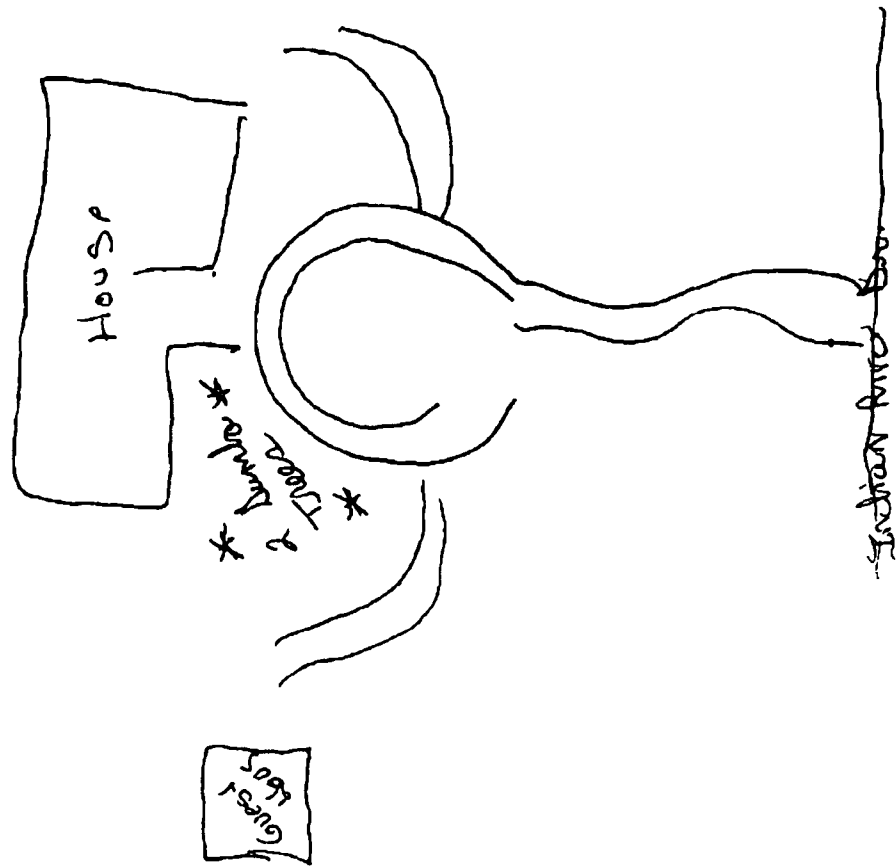
Written statement giving reasons: TREES ARE DEAD 4/2

Signature of Applicant [Signature] Date 4/28/03

Approved by Building Inspector [Signature] Date 4/30/03

Plans approved as submitted _____ Plans approved as revised/marked _____



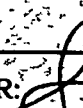
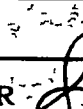

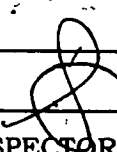

\$ 0



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/30 2002 3 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6212	WATSON	SUBFACIA	Passed	
(1)	30 N. RIVER ROAD			
	TREASURE CO			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	GIFFORD	TREE	Passed	
(2)	85 N. SEWALLS PT			
				INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	ARCH	TREE	Passed	
(3)	18 PALM ROAD			
				INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	ARCH/PALM ROW INC	TREE	Passed	
(11)	120 S. SEWALLS PT			
				INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	ROBERTS	TREE	Passed	
(10)	12 N. RIDGEVIEW RD			
				INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6163	HICKS	SPA PLUMBING	Failed	
(6)	7 EMARITA			
	ADVANTAGE POOLS			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6220	SIBSON	FINAL	Nobody	Home, no access
(12)	134 S. RIVER ROAD			
	STEVE FRONTERA			INSPECTOR: 
OTHER:				

TOWN OF SEWALL'S POINT, FLORIDA

Date 6/18 ~~2003~~ TREE REMOVAL PERMIT No 1290

APPLIED FOR BY GLEFFORD (Contractor or Owner)

Owner 85 N. Sewall's Pt Rd

Sub-division _____, Lot _____, Block _____

Kind of Trees GUMBO LIMBO

No Of Trees REMOVE 1

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

No Of Trees REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant Signed, Gene Simmons (TOS) Town Clerk

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE ORDINANCE 103

[Empty grid area for drawing or site plan]

PROJECT DESCRIPTION _____

REMARKS _____

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

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

No permit required for:

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

Permit Fee:

- 1 Tree permits are \$15 00, payable in advance
- 2 No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S F R.)

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

Application procedures:

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

Owner ERWIN GIFFORD Address 85N Sewall Pt. Rd Phone 223 5561

Contractor John Shaker Address 4441 SAWYER RD. Phone 215 2912

No. of Trees: REMOVE 1 Type GUMBO LIMBO

No. of Trees: RELOCATE WITHIN 30 DAYS Type "

No. of Trees: REPLACE WITHIN 30 DAYS Type

Written statement giving reasons: TREE is Declining + Represents A HAZARD. CLOSE TO A STRUCTURE

Signature of Applicant [Signature] Date 6-18-03

Approved by Building Inspector [Signature] Date 6/18/03 Fee: 0

Plans approved as submitted Plans approved as revised/marked

South Property Line

MAIN HOUSE

GUEST HOUSE I
COVERED PORCH

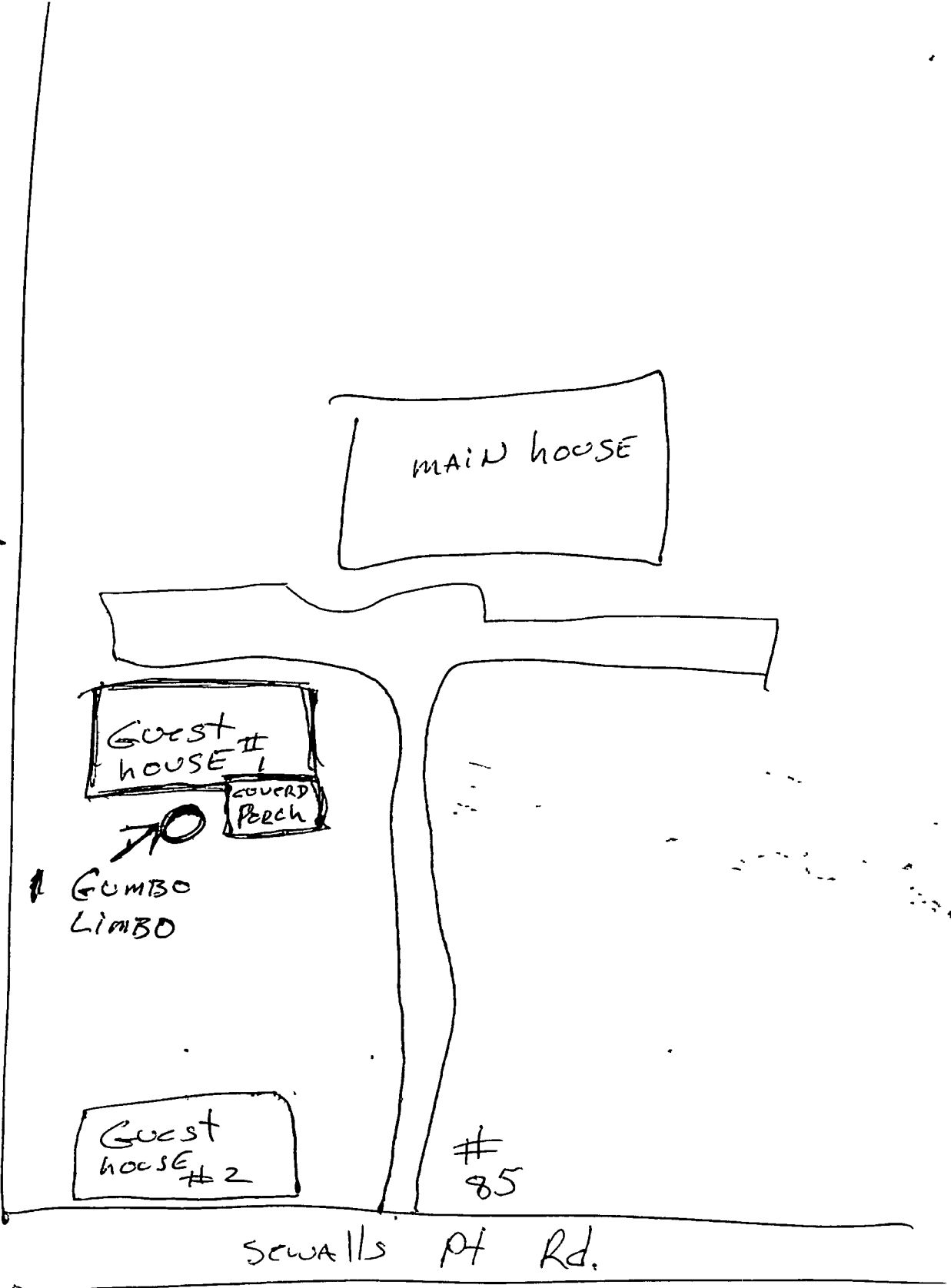
GUMBO LIMBO

GUEST HOUSE #2

85

SEWALLS PT RD.

North



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/18, 2002/3 Page of

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6146	CONROY	FINAL -	Failed	
(4)	12 PALMETTO O/B -	Temp. Power	Passed	→ need agreement. INSPECTOR <i>[Signature]</i>
6254	McKENNEY	WINDOWS	Failed	Wrong spec INSPECTOR <i>[Signature]</i>
(3)	21 E. HATH POINT GLANCY			INSPECTOR <i>[Signature]</i>
6297	APPLIED SYSTEMS	BEAM-FRONT	Passed	9:30 INSPECTOR <i>[Signature]</i>
(2)	114 N. SEWALLS Pt LIBEA DEV	WALL		INSPECTOR <i>[Signature]</i>
6146	GIFFORD	TEES	Passed	
(1)	85 N. SEWALLS Pt John Shabara			INSPECTOR <i>[Signature]</i>
6153	BUSSEY	FINAL DEMO	Passed	
	1 PALMETTO DR. O/B			INSPECTOR <i>[Signature]</i>
5834	HANSEN	DOCK ELEC	Passed	
	32 N. SEWALLS Pt GREENHOUSE ELEC	FINAL		INSPECTOR <i>[Signature]</i>
				INSPECTOR

OTHER: _____

TOWN OF SEWALL'S POINT, FLORIDA

Date Nov 21 4/2003 TREE REMOVAL PERMIT No 2153

APPLIED FOR BY GIFFORD (Contractor or Owner)

Owner 85 N. SEWALL'S POINT RD

Sub-division _____, Lot _____, Block _____

Kind of Trees HICKORY

No Of Trees REMOVE 1

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

No Of Trees REPLACE _____ WITHIN 30 DAYS

REMARKS _____ FEE \$ 0

Signed, _____ Applicant Signed, Gene Summers (RDB) Town Clerk Building Official

TO

WORK HOURS 8:00 A.M. - 5:00 P.M. - NO SUNDAY WORK

TREE REMOVAL PERMIT

RE ORDINANCE 103

Large empty rectangular box for notes or drawings.

PROJECT DESCRIPTION _____

REMARKS _____

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

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Owner GIEFFORD Address 85 N. SP. ROAD Phone 223-5561

Contractor SHAKRA LANDSCAPE Address SEWSEN BEACH Phone 215-2912

No. of Trees: REMOVE 1 Type HICKORY

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

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

Written statement giving reasons: DECLINED Rapidly, POSSIBLE Lightning

Signature of Applicant [Signature] Date 11-20-03

Approved by Building Inspector: [Signature] Date 11/21/03 Fee: 7

Plans approved as submitted _____ Plans approved as revised/marked _____

WEST

north
PROPERTY
LINE →

S

Guest
HOUSE

MAIN
HOUSE

Pool

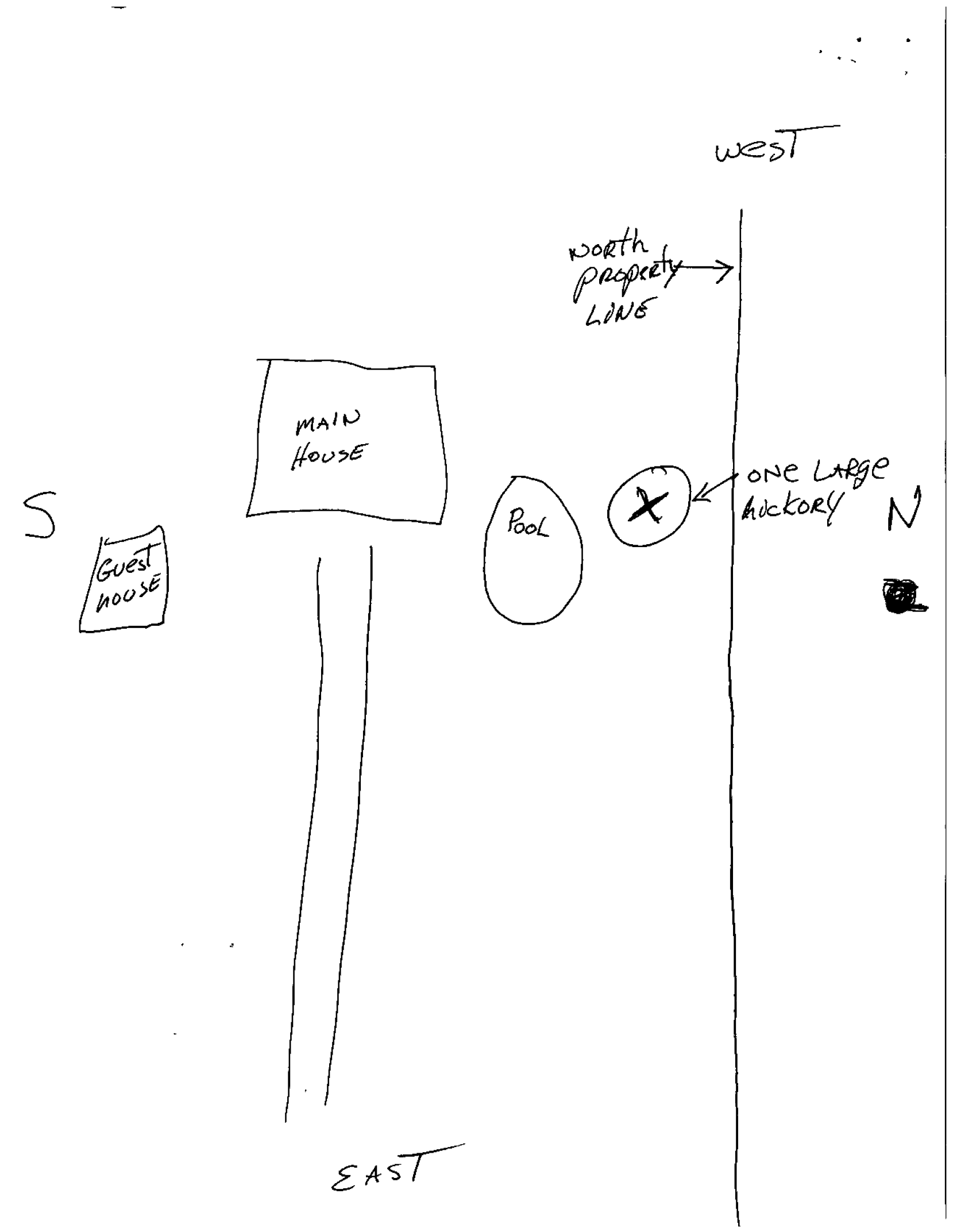


ONE LARGE
BATTERY

N







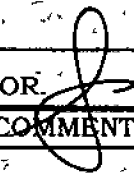

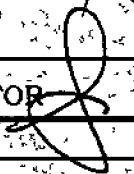
EAST



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/21, 2003 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
Tree	GURFORD	TREE	Passed	
(6)	85 N. SEWALLS RD			INSPECTOR: 
Tree	REICH	TREE	Failed	
(11)	22 MIDDLE RD			INSPECTOR: 
Tree	REILLY	TREE	Passed	
(14)	78 S. SEWALLS Pt			INSPECTOR: 
6370	ROMAN	FINAL INT.	Passed	
(3)	14 COFAIRE RD WOODWARD	ALT. WIN/DRYD 260-0239		INSPECTOR: 
6419	MENDOZA	SHEATHING	Partial	11.00
(13)	144 S. SEWALLS Pt MASTER PLAN/PACIFIC			INSPECTOR: 
6497	LIZARS	FINAL ROOF	Partial	
(12)	4 ISLAND ROAD ARTELA			INSPECTOR: 
Tree		Tree	Passed	17" Oak replace
	J Kingston Ct.			INSPECTOR: 
OTHER:	7 Sheets Knowles Rd	Tail	Passed	



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

Nick (son) 772-475-5845 or

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8 00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8 00 AM TO 5 00 PM - NO SUNDAYS

Owner Karen Colon Address 851 S Sewall Phone 475.5845
 Contractor Tropical Palms Address Palm City Phone 781.2979
 No of Trees: REMOVE 4 Species - gumba limbo, cabbage palm
 No of Trees RELOCATE _____ Species _____
 No. of Trees: REPLACE _____ Species _____

ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

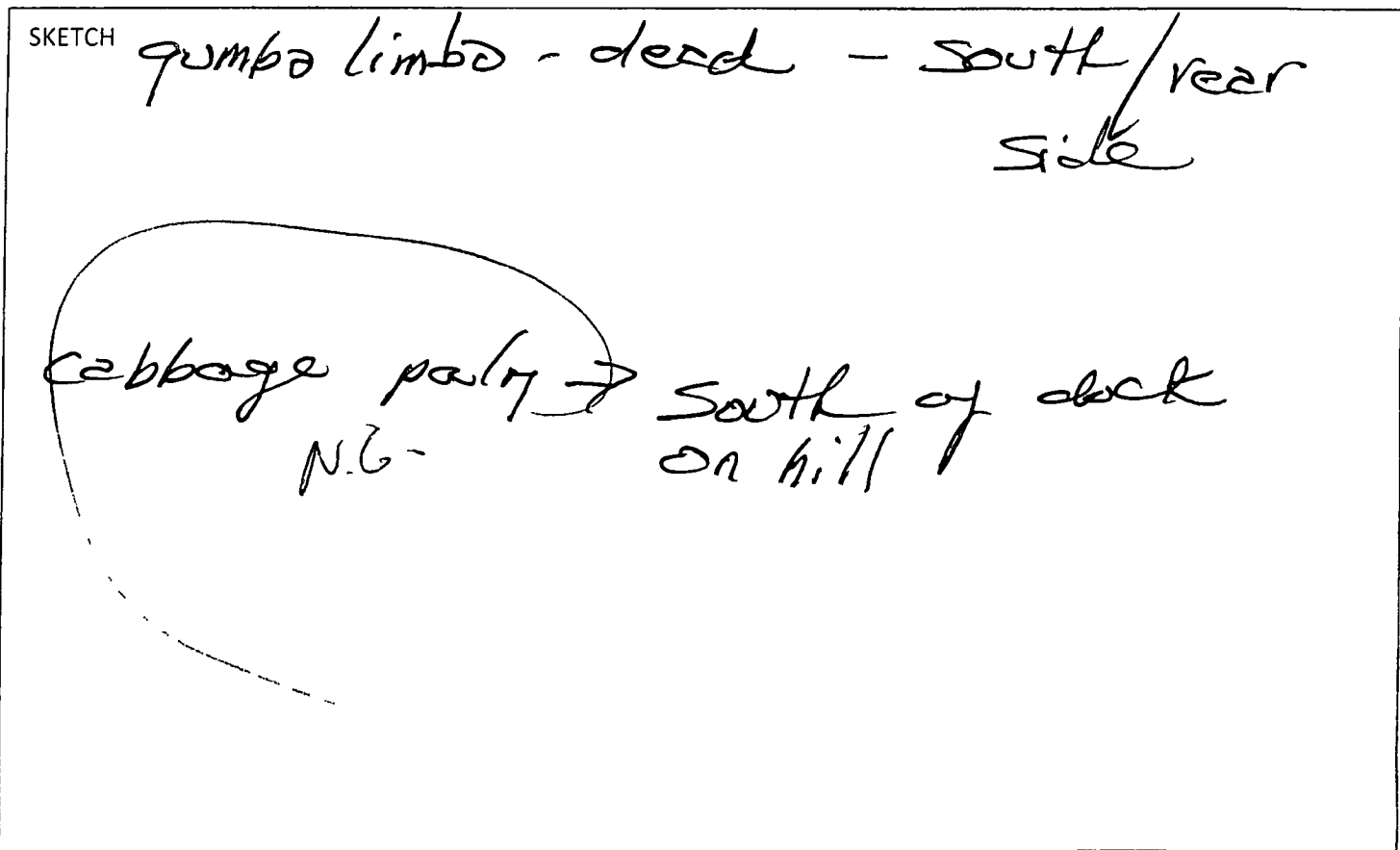
ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY

Reason for tree removal /relocation (See notice above) one dead / others block view

Signature of Property Owner Karen Colon Date 6.25.13

Approved by Building Inspector [Signature] Date 7-2-13 Fee 15⁰⁰

NOTES: Gumba limbo on - Cabbage is protected





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

ok

~~TREE REMOVAL~~ RELOCATION, REPLACEMENT PERMIT

CALL 8 00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8 00 AM TO 5 00 PM - NO SUNDAYS

Owner ~~XXXXXX~~ Address ~~XXXXXX~~ Phone 834.4799

Contractor CB landscape Address J.B. Phone _____

No of Trees REMOVE 2 Species Queen Palm already permitted

No of Trees RELOCATE 1 Species Royal Palmetto

No of Trees REPLACE _____ Species _____

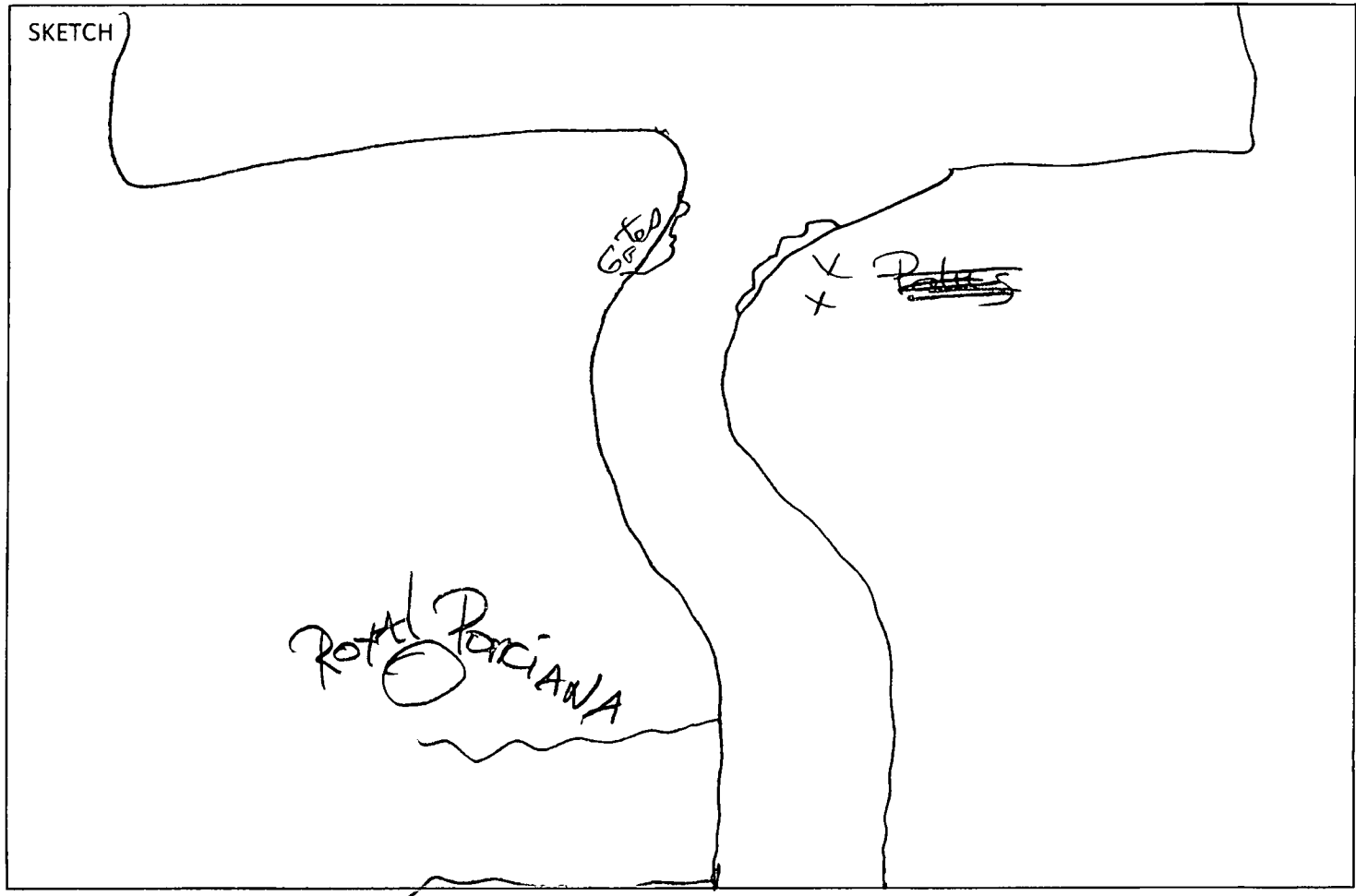
ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

Reason for tree removal /relocation (See notice above) Palms dying canch fungus, R.P. dead

Signature of Property Owner [Signature] Date 4.21.12

~~Approved by Building Inspector [Signature] Date [Date] Fee [Amount]~~

NOTES _____



1 cc
copy



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

~~TREE REMOVAL~~, RELOCATION, REPLACEMENT PERMIT

CALL 8 00 AM - 12 00 NOON FOR INSPECTION - WORK HOURS 8 00 AM TO 5 00 PM - NO SUNDAYS

Owner KAREN CATHY Address [REDACTED] Phone 834.4799

Contractor CB landscape Address J.B. Phone _____

No of Trees REMOVE 2 Species Queen Palm already permitted

No of Trees RELOCATE 1 Species Royal Poinciana

No of Trees REPLACE _____ Species _____

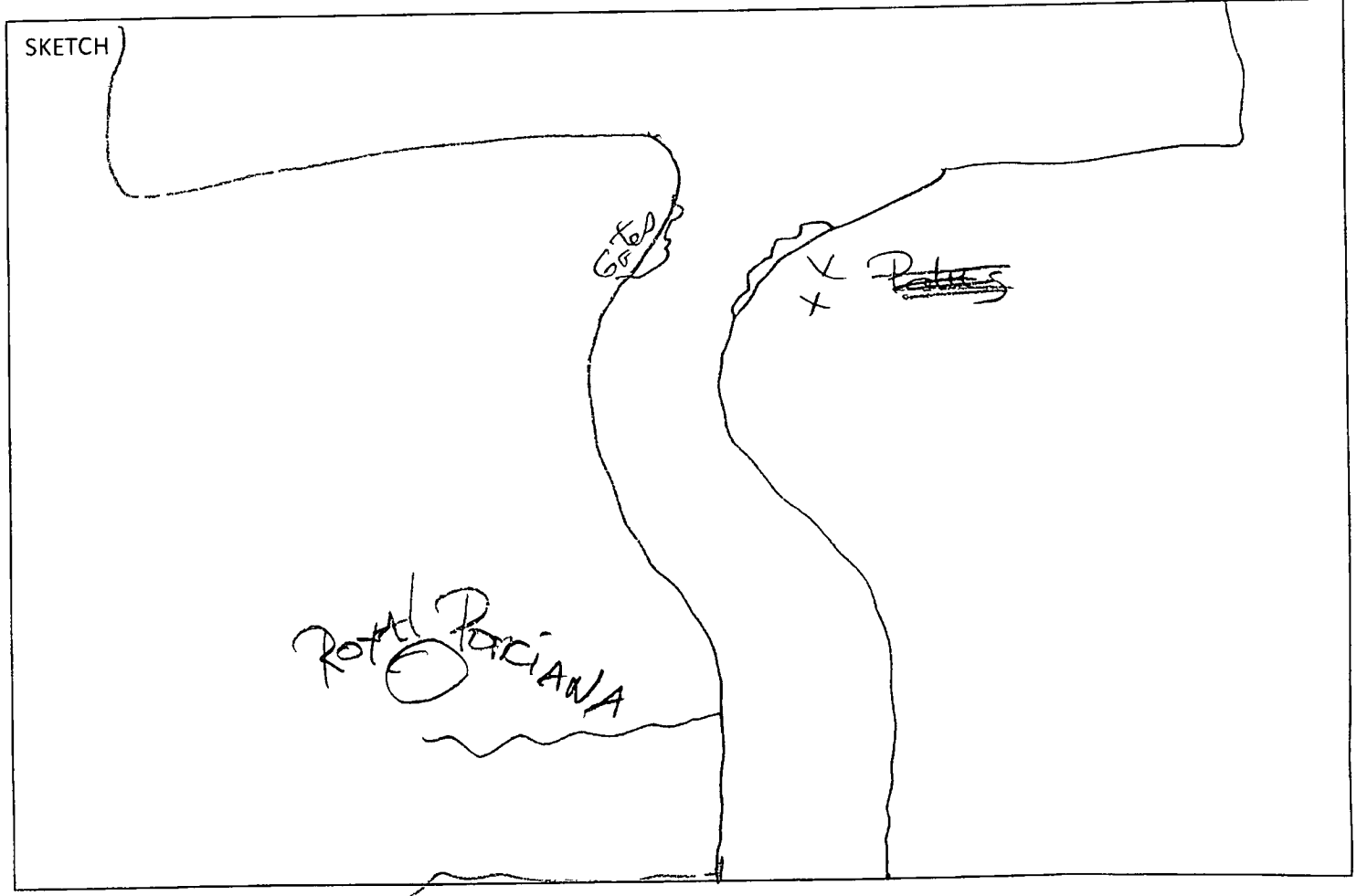
ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

Reason for tree removal /relocation (See notice above) Palms dying canch fungus, R.P. dead

Signature of Property Owner Karen Cathy Date 4.2.12

Approved by Building Inspector [Signature] Date 4-5-12 Fee N/C

NOTES _____





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

~~TREE REMOVAL~~ RELOCATION, REPLACEMENT PERMIT

CALL 8 00 AM - 12 00 NOON FOR INSPECTION - WORK HOURS 8 00 AM TO 5 00 PM - NO SUNDAYS

Owner Karen Cahon Address 3501 N. Sewall's Pt. Rd Phone 475 5845

Contractor Trop Kolls Address _____ Phone _____

No of Trees REMOVE 2 Species palm tree

No of Trees RELOCATE _____ Species _____

No of Trees REPLACE _____ Species _____

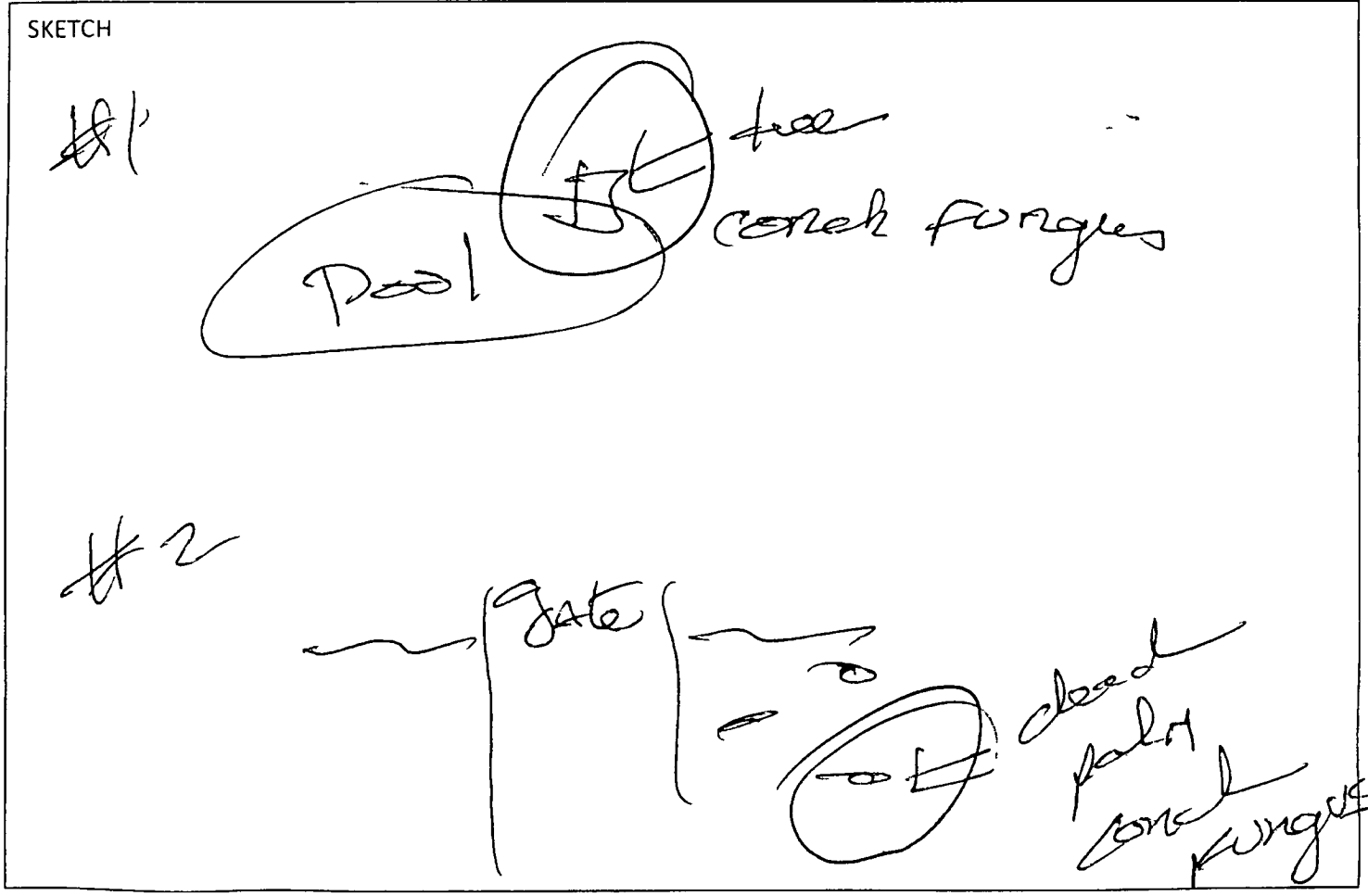
ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

Reason for tree removal /relocation (See notice above) dead

Signature of Property Owner K. Cahon Date 1-30-2012

Approved by Building Inspector [Signature] Date 1-30-12 Fee N/A

NOTES _____





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

Nick (son) 772-475-5845 ok

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8 00 AM - 12 00 NOON FOR INSPECTION - WORK HOURS 8 00 AM TO 5 00 PM - NO SUNDAYS

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 No of Trees RELOCATE _____ Species _____
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ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY

Reason for tree removal /relocation (See notice above) one dead / others block view

Signature of Property Owner Karen Cahan Date 6-25-13

Approved by Building Inspector [Signature] Date 7-2-13 Fee 15.00

NOTES Gumbo limbo ok - CABBAGE IS PROTECTED

SKETCH gumbo limbo - dead - south/rear side

Cabb

4890
63 4/630 FL
23840

DATE 7.2.13 \$ 15.00
DOLLARS

REN CAHAN
4 SEWALLS POINT RD
JART FL 34996 6506

AY
O THE
ORDER OF

Town of Sewall's Point
Fifteen and 85/100

[Signature]

Bank of America
ACH R/T 063100277