

12 South Sewall's Point Road

6643

BOATLIFT

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 3/19/04

BUILDING PERMIT NO. 6643

Building to be erected for SCHECODNIC Type of Permit DOCK + BOATLIFT

Applied for by T.C.B.I. (Contractor) Building Fee 240.00

Subdivision HERITAGE TRAIL Lot 18 Block _____ Radon Fee _____

Address 12 S. SEWALL'S POINT ROAD Impact Fee _____

Type of structure DOCK + BOATLIFT A/C Fee _____

Parcel Control Number:

138410130000018090000

Amount Paid 264.00 Check # 4972 Cash _____ Other Fees 10% Plan REVIEW 24.00

Total Construction Cost \$ 40,000.00 TOTAL Fees 264.00

Signed M. Furino
Applicant

Signed Gene Simmons
Town Building Official

PERMIT

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

INSPECTIONS

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

RECEIVED

JAN 22 2004

Town of Sewall's Point

BUILDING PERMIT APPLICATION 12 S. Sewall's Pt. Rd

Building Permit Number: _____

Owner or Titleholder Name: GARY + REBECCA SCHECOONIC

City: _____ State: FL Zip: _____

Legal Description of Property: Lot 18 Sewall's Pt Rd. Heritage Pl

Parcel Number: 01-38-41-013-000-00180-9

Location of Job Site: Lot 18 Sewall's Pt Rd.

Type of Work To Be Done: To Construct a 4x492' Dock + 0

CONTRACTOR/Company Name: F.C.B.I

Phone Number: 772-260-4186

Street: 1200 C. W. York Rd.

City: Stuart State: FL Zip: 34994

State Registration Number: _____ State Certification Number: _____

Martin County License Number: SP01521

ARCHITECT: JERNER + ASSOCIATES, INC.

Phone Number: (772) 283-2850

Street: 110 SW 5th STREET

City: Stuart State: FL Zip: 34983

ENGINEER: _____

Phone Number: _____

Street: _____

City: _____ State: _____ Zip: _____

AREA SQUARE FOOTAGE - SEWER - ELECTRIC

Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: _____

Carport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

Type Sewage: _____ Septic Tank Permit Number From Health Depart. _____ Well Permit Number: _____

FLOOD HAZARD INFORMATION

Flood Zone: _____ Minimum Base Flood Elevation (BFE): _____ NGVD

Proposed First Floor Habitable Floor Finished Elevation: _____ NGVD (Minimum 1 Foot Above BFE)

COST AND VALUES

Estimated Cost of Construction or Improvements: \$40,000.00

Estimated Fair Market Value (FMV) Prior

To Improvements: _____ If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES _____ NO _____

SUBCONTRACTOR INFORMATION

Electrical: _____ State: _____ License Number: _____
Mechanical: _____ State: _____ License Number: _____
Plumbing: _____ State: _____ License Number: _____
Roofing: _____ State: _____ License Number: _____

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____ South Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____
National Electrical Code _____ Florida Energy Code _____
Florida Accessibility Code _____

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

OWNER OR AGENT SIGNATURE (Required)

[Signature]

CONTRACTOR SIGNATURE (Required)

[Signature]

State of Florida, County of: Martin

On State of Florida, County of: Martin

This the 13th day of January, 2004

This the 15th day of January, 2004

by Gary and Rebecca Scheconic who is personally

by Michael Guidice who is personally

known to me or produced

known to me or produced

as identification.

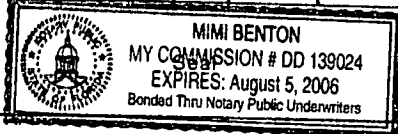
As identification.

Notary Public

Notary Public

My Commission Expires: 8/5/2006

My Commission Expires: 4-9-04



ACORD - CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/15/2003

PRODUCER
Paul Lynch & Associates, Inc.
3388 NE Sugarhill Ave, Suite 201
Jensen Beach, FL 34957
772 232-2552

INSURED
TCBI dba Treasure Coast Barge, Inc.
dba TCBI
5835 SW Mapp Road
Palm City, FL 34990
(772) 220-3625

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.

INSURERS AFFORDING COVERAGE	NAICS#
INSURER A: Lloyds	
INSURER B: Water Quality Insurance Syndicate	
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.

INSURED	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	05-030753000	07/16/03	07/16/04	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ BODILY INJURY (Per occurrence) \$ PERSONAL & ADULTERY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMMODITY ADD \$ 1,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> RENTED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Per occurrence) \$ BODILY INJURY (Per occurrence) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: GACC \$, AGO \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY PROFESSIONAL FEES INCURRED BY OR FOR BENEFITARY OR OTHER PERSONS EXCLUDED? If yes, describe below SPECIAL PROVISIONS below				WORKERS COMPENSATION AND EMPLOYERS LIABILITY E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER B) Pollution	35-35588	05/01/03	05/01/04	

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

Marine construction.

CERTIFICATE HOLDER

Town of Sewall's Point
1 South Sewall's Point Road
Sewall's Point, Florida 34996

Fax: 220-4765

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

05-23-2003

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW

CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE	09/14/2002	EXPIRATION DATE	09/13/2004
PERSON	GUIDICE	MICHAEL	
SSN	089-62-7399		
FEIN	650753315		
BUSINESS	TREASURE COAST BARDGE INC		
	5835 MAPP ROAD		
	PALM CITY	FL	34990

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

2003-2004 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE
Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(772) 288-5604

LICENSE 2003-125-030 CERT SP01521
PHONE (722) 604-5186 SIC NO 234990
LOCATION: 1200 CUTOFF RD STU

CHARACTER COUNTS IN MARTIN COUNTY

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>
\$	<u>0.00</u>	TRANSFER \$	<u>0.00</u>
TOTAL			<u>25.00</u>

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION OF MARINE CONSTRUCTION

MICHAEL GUIDICE QUALIFIER SP01521
TCEB, INC.
MILANO LUCY - PRES
5835 SW MAPP ROAD
PALM CITY FL 34990

11 DAY OF SEPTEMBER 2003
AND ENDING SEPTEMBER 29, 2004 12 03091001 003265



TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 01-38-41-013-000-00180-9

NOTICE OF COMMENCEMENT

STATE OF FLORIDA

COUNTY OF MARTIN

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

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

Lot 18 Sewalls Pt. Rd. Sewalls, Pt Fl.

GENERAL DESCRIPTION OF IMPROVEMENT: CONSTRUCT DOCK & INSTALL BOAT LIFT

OWNER: GARY & REBECCA SCHECODNIC

ADDRESS: 1 RIVERCREST COURT / STUART, FL 34996

PHONE # (772) 781-2515 FAX #: _____

CONTRACTOR: T.C.B.I

ADDRESS: 1200 WOFF RD. STUART, FL 34994

PHONE #: _____ FAX #: _____

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE # _____ FAX #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

PHONE #: _____ FAX #: _____

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

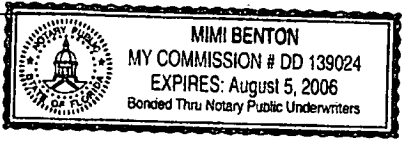
Gary Schechnic Rebecca Schechnic
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 13th DAY OF January, 2004

BY Rebecca and Gary Schechnic

OR PERSONALLY KNOWN
PRODUCED ID _____
TYPE OF ID _____

Mimi Benton
NOTARY SIGNATURE



INSTR # 1725590 OR BK 01862 PG 1215 RECD 01/30/2004 02:42:02 PM
MARSHA EMMING MARTIN COUNTY DEPUTY CLERK L WOOD



DEPARTMENT OF THE ARMY
JACKSONVILLE DISTRICT CORPS OF ENGINEERS
STUART REGULATORY OFFICE
218 ATLANTA AVENUE
STUART, FLORIDA 34994

Regulatory Division
South Permits Branch
200301920 (LP-JES)

JUN 03 2003

Mr. Gary Schecodnic
1 Rivercrest Court
Stuart, Florida 34996

Dear Mr. Schecodnic:

This is in reference to your request for a permit to perform work in or affecting navigable waters of the United States. Upon recommendation of the Chief of Engineers, pursuant to Section 10 of the Rivers and Harbors Act of 1899 (33 U.S.C. 403), you are authorized to construct a 4-foot by 492-foot access pier, a 8-foot by 20-foot terminal platform and install a boat lift as shown on the enclosed drawings. The project is located at lot 18, S. Sewall's point Rd. in the Indian River, Section 1, Township 38 South, Range 41 East, Martin County, Florida in accordance with the enclosed drawings and conditions that are incorporated in, and made a part of, the permit. In addition, the permittee must comply with the following special conditions:

1. The permittee shall comply with the attached Standard Manatee Construction Precautions.
2. The new construction will have a spacing of no less than 0.5 inches between deck boards.
3. Turbidity screens shall be installed to completely surround and isolate the work from adjacent waters until turbidity has settled.
4. Within 60 days of the authorized work, the attached Self-Certification Statement of Compliance must be completed and submitted to the U.S. Army Corps of Engineers. Mail the completed form to the Regulatory Division, Enforcement Branch, Attention: Ms. Ivette McGraw, Post Office Box 4970, Jacksonville, Florida 32232-0019.
5. The permittee understands and agrees that, if future operations by the United States require the removal, relocation, or other alteration of the structures or

work herein authorized, or if, in the opinion of the Secretary of the Army or his authorized representative, said structure or work shall cause unreasonable obstruction to the free navigation of the navigable waters, the permittee will be required, upon due notice from the Corps of Engineers, to remove, relocate, or alter the structural work or obstructions caused thereby, without expense to the United States.

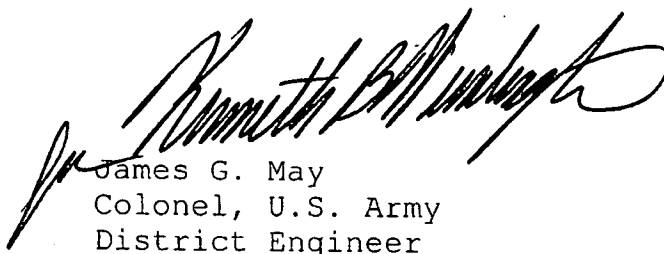
Enclosed is a Notice of Authorization, which should be displayed at the construction site. When you begin work, you must notify the District Engineer's representative, at the appropriate area office as shown on the enclosed map, of:

- a) The date of commencement of work;
- b) The dates of work suspensions and resumptions if work is suspended over a week; and,
- c) The date of final completion.

If the work authorized is not completed on or before **June 3, 2008** this authorization, if not previously revoked or specifically extended, shall cease and be null and void. Please refer to the attached form, *Notification of Administrative Appeal Options and Process*, concerning your options on acceptance of this permit.

If you have any questions regarding this permit authorization, please contact Jon Soderberg at the letterhead address or by telephone at 772-781-8087.

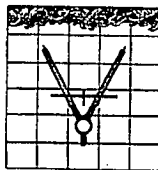
BY AUTHORITY OF THE SECRETARY OF THE ARMY:


James G. May
Colonel, U.S. Army
District Engineer

Enclosures

Copy Furnished
Jerner & Associates

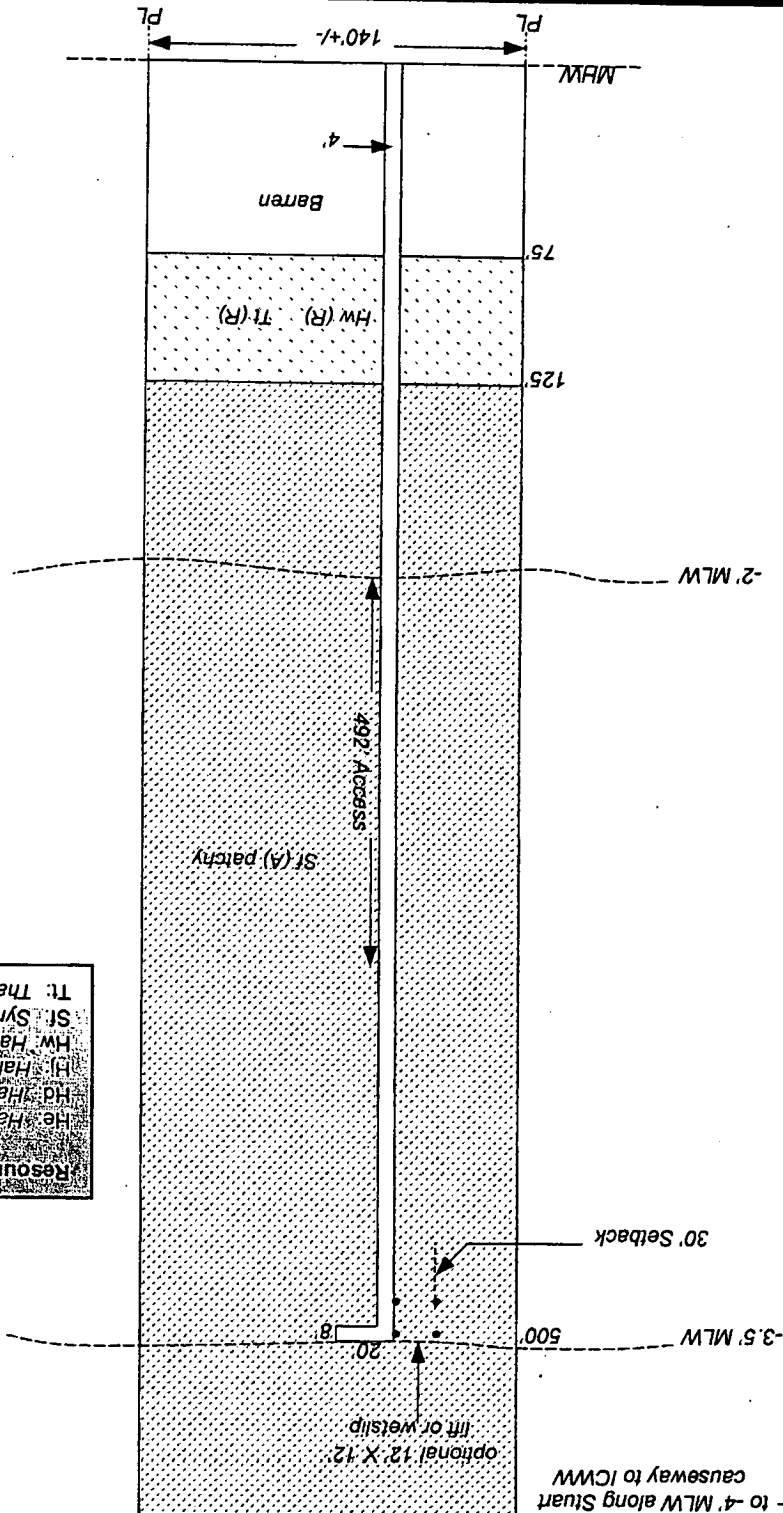
Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996



Design & Drawing by:
Jerner & Associates, Inc.
 Environmental Consulting
 110 SW 5th Street
 Stuart, FL 34994
 Ph. (772)283-2950 / Fax (772)283-2760

Scale: 1" = 75'
 Date: 02/06/03
 Sheet 2 of 4

Revised 07-10-03



REVIEWED BY
 JOHN CLARK
 PROFESSIONAL ENGINEER
 FLORIDA
 INTEGRITY
 OF STRUCTURAL



Seagrass Survey Performed on
 01/31/03 @ 1200 hrs.
 by Lisa Perrone & Duane Fike/
 Jerner & Associates, Inc.

Resource Key

He	Halophila engelmannii	D: Dominant
Hd	Halophila decipiens	A: Abundant
Hf	Halophila johnsonii	F: Frequent
Hw	Halodule wrightii	O: Occasional
St	Syngodium filiforme	R: Rare
Tt	Thalassia testudinum	

Flood/Ebb

Indian River





Jeb Bush
Governor

JUL 25 2003

7003 0500 0000 3154 5014

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Gary Schecodnic
1 Rivercrest Court
Stuart, FL 34996

Dear Mr. Schecodnic:

Enclosed is Standard General Permit Number 43-0210449-001 issued pursuant to Part IV of Chapter 373, Florida Statutes (F.S.), and Title 62, Florida Administrative Code.

Appeal rights for you as the permittee and for any affected third party are described in the text of the permit along with conditions which must be met when permitted activities are undertaken. Please review this document carefully to ensure compliance with both the general and specific conditions contained herein. As the permittee, you are responsible for compliance with these conditions. Please ensure that all construction personnel associated with your activity review and understand the approved drawings and conditions. Failure to comply with this permit may result in liability for damages and restoration, and the imposition of civil penalties up to \$10,000 per violation per day, pursuant to Sections 403.141 and 403.161, F.S.

In addition, please ensure the construction commencement notice and all other reporting conditions are forwarded to the appropriate office as indicated in the specific conditions. A permit review checklist is enclosed to assist you in tracking the monitoring and reporting requirements outlined in the permit.

If you have any questions about this document, please contact me at the phone number listed above.

Sincerely,

Mark Youmans

Environmental Specialist

Submerged Lands and Environmental Resources Program

Enclosure

<p>FILE COPY</p> <p>TOWN OF SEWALL'S POINT</p> <p>THESE PLANS HAVE BEEN</p> <p>REVIEWED FOR CODE COMPLIANCE</p> <p>DATE: 3/17/04</p> <p><i>[Signature]</i></p> <p>BUILDING OFFICIAL</p> <p>Gene Simmons</p>

"More Protection, Less Process"

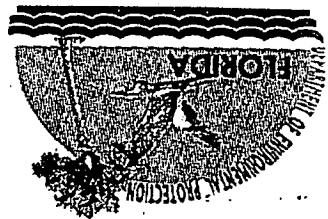
Printed on recycled paper.

Department of
Environmental Protection

Port St. Lucie Branch Office
1801 SE Hillmoor Drive, Suite C-204
Port St. Lucie, FL 34952
(772)398-2806 Fax # (772)398-2815

David B. Struhs
Secretary

Department of Environmental Protection



Jeb Bush
Governor

Port St. Lucie Branch Office
1801 SE Hillmoor Drive
Suite C-204
Port St. Lucie, FL 34952

(772)398-2806 Fax # (772)398-2815

David B. Struhs
Secretary

CONSOLIDATED ENVIRONMENTAL RESOURCE PERMIT AND SOVEREIGN SUBMERGED LANDS AUTHORIZATION

PERMITTED/AUTHORIZED ENTITY:

Permit/Authorization No.: 43-0210449-001
Date of Issue: July 25, 2003
Expiration Date of: July 25, 2008
County: Martin County
Project: Private single family dock

Gary Schecodnic
1 Rivercrest Court
Stuart, FL 34996

This permit is issued under the authority of Part IV of Chapter 373, Florida Statutes (F.S.), and Title 62, Florida Administrative Code (F.A.C.). The activity is not exempt from the requirement to obtain an Environmental Resource Permit Pursuant to Operating Agreements executed between the Department and the water management districts, as referenced in Chapter 62-113, F.A.C., the Department is responsible for reviewing and taking final agency action on this activity.

ACTIVITY DESCRIPTION:

The purpose of the project is to construct a 2,128 square foot dock with an access measuring 4' wide by 492' long with handrails and ending in a platform measuring 8' by 20' one associated mooring area which can accommodate a boatlift. The entire access walkway shall be constructed with handrails and at an elevation of at least 5' above mean high water.

ACTIVITY LOCATION:

The project is located at P.L.N. 1-38-41-013-000-00180-90, Lot 18, S. Indian River Drive, in the Jensen Beach to Jupiter Inlet Aquatic Preserve (O.F.W.), Class III Waters of the State (Section 1, Township 38 South, Range 41 East), Jensen Beach, Martin County, Latitude 27° 12' 4.97"N, Longitude 80° 11' 56.60"W.

This permit also constitutes certification of compliance with water quality standards under Section 401 of the Clean Water Act, 33 U.S.C. 1341.

PROPRIETARY REVIEW: GRANTED

This activity also requires a proprietary authorization, as the activity is located on sovereign submerged lands owned by the Board of Trustees of the Internal Improvement Trust Fund, pursuant to Article X, Section 11 of the Florida Constitution, and Sections 253.002 and 253.77, F.S. The activity is not exempt from the need to obtain a proprietary authorization. The Department has the responsibility to review and take final action on this request for proprietary authorization in accordance with Section 18-21.0051, and the Operating Agreements executed between the Department and the water management districts, as referenced in Chapter 62-113, F.A.C. In addition to the above, this proprietary authorization has been reviewed in accordance with Chapter 253 and 258 F.S., Chapter 18-20, 18-21, and Section 62-343.075, F.A.C.

As staff to the Board of Trustees, the Department has reviewed the activity described above, and has determined that the activity qualifies for a consent to use sovereign, submerged lands, as long as the work performed is located within the boundaries as described herein and is consistent with the terms and conditions herein. Therefore, consent is hereby granted, pursuant to Chapter 253.77, F.S., to perform the activity on the specified sovereign submerged lands.

"More Protection, Less Process"

Printed on recycled paper.

This permit constitutes a determination, pursuant to Section 380.0651(3)(e), F.S., that the facility is located so that it will not adversely impact Outstanding Florida Waters or Class II Waters, and will not contribute to boat traffic in a manner that will adversely impact the manatee.

FEDERAL REVIEW: NOT GRANTED

Federal authorization for the proposed project is reviewed by DFP 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*. As shown in the attached drawings, the proposed project is not consistent with the SFGP program. A copy of your application has been sent to the U.S. Army Corps of Engineers (the Corps) who may require a separate permit. Failure to obtain their authorization prior to construction could subject you to enforcement action. For further information, contact the Corps directly.

You are hereby advised that authorizations also may be required by other federal, state, and local entities. This authorization does not relieve you from the requirements to obtain all other required permits and authorizations.

The above named permittee is hereby authorized to construct the work shown on the application and approved drawing(s), plans, and other documents attached hereto or on file with the Department and made a part hereof. This permit and authorization to use sovereign submerged lands is subject to the limits, conditions, and locations of work shown in the attached drawings, and is also subject to the attached [19] General Conditions, [12] General Consent Conditions, and [12] Specific Conditions, which are a binding part of this permit and authorization. You are advised to read and understand these drawings and conditions prior to commencing the authorized activities, and to ensure the work is conducted in conformance with all the terms, conditions, and drawings. If you are utilizing a contractor, the contractor also should read and understand these drawings and conditions prior to commencing the authorized activities. Failure to comply with all drawings and conditions shall constitute grounds for revocation of the permit and appropriate enforcement action.

Operation of the facility is not authorized except when determined to be in conformance with all applicable rules and with the general and specific conditions of this permit/certification/authorization, as specifically described below.

GENERAL CONDITIONS:

- (1) All activities authorized by this permit shall be implemented as set forth in the plans, specifications and performance criteria as approved by this permit. Any deviation from the permitted activity and the conditions for undertaking that activity shall constitute a violation of this permit and Part IV, Chapter 373, F.S.
- (2) This permit or a copy thereof, complete with all conditions, attachments, exhibits, and modifications shall be kept at the work site of the permitted activity. The complete permit shall be available for review at the work site upon request by the Department staff. The permittee shall require the contractor to review the complete permit prior to commencement of the activity authorized by this permit.
- (3) Activities approved by this permit shall be conducted in a manner which does not cause violations of state water quality standards. The permittee shall implement best management practices for erosion and pollution control to prevent violation of state water quality standards. Temporary erosion control shall be implemented prior to and during construction, and permanent control measures shall be completed within 7 days of any construction suspended. Turbidity barriers shall be installed and maintained at all locations where the possibility of transferring suspended solids into the receiving waterbody exists due to the permitted work. Turbidity barriers shall remain in place at all locations until construction is completed and soils are stabilized and vegetation has been established.

- All practices shall be in accordance with the guidelines and specifications described in Chapter 6 of the Florida Land Development Manual; A Guide to Sound Land and Water Management (Department of Environmental Regulation, 1988), unless a project-specific erosion and sediment control plan is approved as part of the permit. Thereafter the permittee shall be responsible for the removal of the barriers. The permittee shall correct any erosion or shoaling that causes adverse impacts to the water resources.
- (4) The permittee shall notify the Department of the anticipated construction start date within 30 days of the date that this permit is issued. At least 48 hours prior to commencement of activity authorized by this permit, the permittee shall submit to the Department an "Environmental Resource Permit Construction Commencement" notice (Form No. 62-343,900(3), F.A.C.) indicating the actual start date and the expected completion date.
- (5) When the duration of construction will exceed one year, the permittee shall submit construction status reports to the Department on an annual basis utilizing an "Annual Status Report Form" (Form No. 62-343,900(4), F.A.C.). Status Report Forms shall be submitted the following June of each year.
- (6) Within 30 days after completion of construction of the permitted activity, the permittee shall submit a written statement of completion and certification by a registered professional engineer or other appropriate individual as authorized by law, utilizing the supplied "Environmental Resource Permit As-Built Certification by a Registered Professional" (Form No. 62-343,900(5), F.A.C.). The statement of completion and certification shall be based on on-site observation of construction or review of as-built drawings for the purpose of determining if the work was completed in compliance with permitted plans and specifications. This submittal shall serve to notify the Department that the system is ready for inspection. Additionally, if deviation from the approved drawings are discovered during the certification process, the certification must be accompanied by a copy of the approved permit drawings with deviations noted. Both the original and revised specifications must be clearly shown. The plans must be clearly labeled as "as-built" or "record" drawing. All surveyed dimensions and elevations shall be certified by a registered surveyor.
- (7) The operation phase of this permit shall not become effective: until the permittee has complied with the requirements of condition (6) above, has submitted a "Request for Transfer of Environmental Resource Permit Construction Phase to Operation Phase" (Form No. 62-343,900(7), F.A.C.); the Department determines the system to be in compliance with the permitted plans and specifications; and the entity approved by the Department in accordance with Sections 9.0 and 10.0 of the Basis of Review for Environmental Resource Permit Applications Within the South Florida Water Management District - August 1995, accepts responsibility for operation and maintenance of the system. The permit shall not be transferred to such approved operation and maintenance entity until the operation phase of the permit becomes effective. Following inspection and approval of the permitted system by the Department, the permittee shall initiate transfer of the permit to the approved responsible operating entity if different from the permittee. Until the permit is transferred pursuant to Section 62-343.110(1)(d), F.A.C., the permittee shall be liable for compliance with the terms of the permit.
- (8) Each phase or independent portion of the permitted system must be completed in accordance with the permitted plans and permit conditions prior to the initiation of the permitted use of site infrastructure located within the area served by that portion or phase of the system. Each phase or independent portion of the system must be completed in accordance with the permitted plans and permit conditions prior to transfer of responsibility for operation and maintenance of the phase or portion of the system to a local government or other responsible entity. For those systems that will be operated or maintained by an entity that will require an easement or deed restriction in order to enable that entity to operate or maintain the system in conformance with this permit, such easement or deed restriction must be recorded in the public records and submitted to the Department along with any other final Resource Permit Applications Within the South Florida Water Management District - August 1995, prior to lot or unit sales or prior to the completion of the system, whichever occurs first. Other documents concerning the establishment and authority of the operating entity must be filed with the Secretary of State where appropriate. For those systems which are proposed to be maintained by the county or municipal entities, final operation and maintenance documents must be received by the Department when maintenance and operation of the system is accepted by the local government entity. Failure to submit the appropriate final documents will result in the permittee remaining liable for carrying out maintenance and operation of the permitted system and any other permit conditions.
- (9)

- (10) Should any other regulatory agency require changes to the permitted system, the permittee shall notify the Department in writing of the changes prior to implementation so that a determination can be made whether a permit modification is required.
- (11) This permit does not eliminate the necessity to obtain any required federal, state, local and special district authorizations prior to the start of any activity approved by this permit. This permit does not convey to the permittee or create in the permittee any property right, or any interest in real property, nor does it authorize any entrance upon or activities on property which is not owned or controlled by the permittee, or convey any rights or privileges other than those specified in the permit and Chapter 40E-4 or Chapter 40E-40, F.A.C.
- (12) The permittee is hereby advised that Section 253.77, F.S., states that a person may not commence any excavation, construction, or other activity involving the use of sovereign or other lands of the state, the title to which is vested in the Board of Trustees of the Internal Improvement Trust Fund without obtaining the required lease, license, easement, or other form of consent authorizing the proposed use. Therefore, the permittee is responsible for obtaining any necessary authorizations from the Board of Trustees prior to commencing activity on sovereign lands or other state-owned lands.
- (13) The permittee is advised that the rules of the South Florida Water Management District require the permittee to obtain a water use permit from the South Florida Water Management District prior to construction dewatering, unless the work qualifies for a general permit pursuant to subsection 40E-20.302(4), F.A.C., also known as the "No Notice" rule.
- (14) The permittee shall hold and save the Department harmless from any and all damages, claims, or liabilities which may arise by reason of the construction, alteration, operation, maintenance, removal, abandonment or use of any system authorized by the permit.
- (15) Any delineation of the extent of a wetland or other surface water submitted as part of the permit application, including plans or other supporting documentation, shall not be considered binding unless a specific condition of this permit or a formal determination under section 373.421(2), F.S., provides otherwise.
- (16) The permittee shall notify the Department in writing within 30 days of any sale, conveyance, or other transfer of ownership or control of a permitted system or the real property on which the permitted system is located. All transfers of ownership or transfers of a permit are subject to the requirements of section 62-343.130, F.A.C. The permittee transferring the permit shall remain liable for corrective actions that may be required as a result of any violations prior to the sale, conveyance or other transfer of the system.
- (17) Upon reasonable notice to the permittee, Department authorized staff with proper identification shall have permission to enter, inspect, sample and test the system to insure conformity with the plans and specifications approved by the permit.
- (18) If historical or archaeological artifacts are discovered at any time on the project site, the permittee shall immediately notify the appropriate Department office.
- (19) The permittee shall immediately notify the Department in writing of any previously submitted information that is later discovered to be inaccurate.

GENERAL CONSENT CONDITIONS:

- (1) No activities other than those set forth in this permit are authorized. Any additional activities on state-owned sovereignty submerged lands must receive further consent from the Governor and Cabinet, sitting as the Board of Trustees of the Internal Improvement Trust Fund (hereinafter the "Board") or their properly designated agent.
- (2) Grantee agrees that all title and interest to all lands lying below the historical mean high water line or ordinary high water line are vested in the Board, and shall make no claim of title or interest in said lands by reason of the occupancy or use thereof.

SPECIFIC CONDITIONS:

- (3) Grantee agrees to use or occupy the subject premises for those purposes specified herein, and Grantee shall not permit the premises or any part thereof to be used or occupied for any other purpose or knowingly permit or suffer any nuisances or illegal operations of any kind on the premises.
Grantee agrees to maintain the premises in good condition in the interest of the public health, safety and welfare. The premises are subject to inspection by the Board or its designated agent at any reasonable time.
Grantee agrees to indemnify, defend and hold harmless the Board and the State of Florida from all claims, actions, lawsuits and demands arising out of this consent.
- (5) No failure, or successive failures, on the part of the Board to enforce any provision, waiver or successive waivers on the part of the Board of any provision herein, shall operate as a discharge thereof or render the same inoperative or impair the right of the Board to enforce the same in the event of subsequent breach.
(7) Grantee binds itself and its successors and assigns to abide by the provisions and conditions set forth herein. In the event Grantee fails or refuses to comply with the provisions and conditions of this consent, the consent of use may be terminated by the Board after written notice to the Grantee. Upon receipt of such notice, the Grantee shall have thirty (30) days in which to correct the violation. Failure to correct the violations within this period shall result in the automatic revocation of this Letter of Consent.
(8) All costs, including attorneys' fees, incurred by the Board in enforcing the terms and conditions of this consent shall be paid by the Grantee. Grantee agrees to accept service by certified mail of any notice required by Chapter 18-14, Florida Administrative Code, at the address shown on page one of this Agreement and further agrees to notify the Board in writing of any change of address at least ten days before the change becomes effective.
(9) Grantee agrees to assume responsibility for all liabilities that accrue to the sovereignty submerged land or to the improvements thereon, including any and all drainage or special assessments or taxes of every kind and description which are now or may be hereafter lawfully assessed and levied against the property during the effective period of this consent.
(10) Grantee agrees that any dispute arising from matters relating to this consent shall be governed by the laws of Florida and initiated only in Leon County, Florida.
(11) The Letter of Consent associated with these General Consent Conditions as well as these conditions themselves are subject to modification after 5 years in order to reflect any applicable changes in statutes, rule or policies of the Board or its designated agent.
(12) In the event that any part of the structure(s) consented to herein is determined by a final adjudication issued by a court of competent jurisdiction to encroach on or interfere with adjacent riparian rights, Grantee agrees to either obtain written consent for the offending structure from the affected riparian owner or to remove the interference or encroachment within 60 days from the date of the adjudication. Failure to comply shall constitute a material breach of this consent and shall be grounds for its immediate termination.
- (1) The project drawings, sheets 1 through 4; the 1-page Permit Review Checklist; the 4-page Manatee Exhibit; and DEF forms 62.343.900(3), (4), (5), and (7) are attached to and become part of this permit.
(2) Prior to commencement of construction the permittee shall field stake the corners of the terminal platform and mooring areas and contact the Southeast District Branch Office for a pre-construction meeting.
(3) Best management practices for erosion control shall be implemented and maintained at all times during construction to prevent siltation and turbid discharges in excess of state water quality standards pursuant to Rule 62-302, F.A.C. Methods shall include, but are not limited to the use of staked hay bales, staked filter cloth, sodding, seeding, and mulching; staged construction; and the installation of turbidity screens around the immediate project site. The permittee shall be responsible for ensuring that erosion control devices/procedures are inspected and maintained daily during all phases of construction authorized by this permit until all areas that were disturbed during construction are sufficiently stabilized to prevent erosion, siltation, and turbid discharges.

The following measures shall be taken immediately by the permittee whenever turbidity levels within waters of the state surrounding the project site, exceed 0 NTUs above background.

- a. Immediately cease all work contributing to the water quality violation.
- b. Stabilize all exposed soils contributing to the violation. Modify the work procedures that were responsible for the violation and install more turbidity containment devices and repair any non-functioning turbidity containment devices.
- c. Notify the Southeast District Branch Office within 24 hours of the time the violation is first detected. Construction shall cease until a response has been received from the Department regarding the water quality violation.

(4) Only one vessel shall be docked at this structure at any one time and shall moor only within the approved mooring area. The vessel shall maintain a minimum of one foot of clearance between the deepest draft of the vessel(s) and the top of submerged resources. Vessels utilizing this structure shall have a maximum draft of 14" with the motor in the down position.

(5) No liveboards are permitted at this facility.

(6) All storage or stockpiling of tools or materials (e.g., lumber, pilings, etc.) shall be limited to uplands or within the impact areas authorized by this project. Construction debris/scrap shall not be discarded into or adjacent to surface waters.

(7) All work vessels associated with the dock construction shall maintain a minimum of one (1) foot clearance between the deepest draft of the vessel and the top of submerged resources.

(8) If historical or archaeological artifacts, such as, but not limited to, Indian canoes, arrow heads, pottery or physical remains, are discovered at any time within the project site the permittee shall immediately stop all activities which disturb the soil and contact the Bureau of Historic Preservation, Division of Historical Resources, R.A. Gray Building, 500 South Bronough, Tallahassee, FL 32399-0250.

(9) Within 10 days of completion of dock construction the permittee shall install and maintain nighttime reflective devices at four (4) corners of the terminal platform.

(10) There shall be no fish cleaning stations, boat repair facilities and fueling facilities on any structure that is over or discharges to the water. No overboard discharges of trash, human or animal waste, or fuel shall occur at the dock.

(11) Within 10 days of completion of dock construction, handrails shall be installed along both sides of the entire access pier and "No Mooring" signs shall be posted on both sides of the access pier. Handrails shall be constructed so that they eliminate access to the pier by boaters and shall be maintained for the life of the facility. No mooring is authorized along any portion of the access pier other than the area specifically designated by this permit.

(12) No dock shall be constructed or maintained in any manner that would cause harm to wildlife.

RIGHTS OF AFFECTED PARTIES

This permit and consent to use sovereign submerged lands is hereby granted. This action 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 action automatically becomes only proposed agency action on the application, 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. Because an administrative hearing may result in the reversal or substantial modification of this action, the applicant is advised not to commence construction or other activities until the deadlines noted below for filing a petition for an administrative hearing or request for an extension of time have expired.

Mediation is not available.

A person whose substantial interests are affected by the Department's action may petition for an administrative proceeding (hearing) under sections 120.569 and 120.57 of the Florida Statutes. The petition must contain the information set forth below and must be filed (received by the clerk) in the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mall Station 35, Tallahassee, Florida 32399-3000.

Under rule 62-110.106(4) of the Florida Administrative Code, a person whose substantial interests are affected by the Department's action may also request an extension of time to file a petition for an administrative hearing. The Department may, for good cause shown, grant the request for an extension of time. Requests for extension of time must be filed with the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mall Station 35, Tallahassee, Florida 32399-3000, before the applicable deadline. A timely request for extension of time shall toll the running of the time period for filing a petition until the request is acted upon. If a request is filed late, the Department may still grant it upon a motion by the requesting party showing that the failure to file a request for an extension of time before the deadline was the result of excusable neglect.

If a timely and sufficient petition for an administrative hearing is filed, other persons whose substantial interests will be affected by the outcome of the administrative process have the right to petition to intervene in the proceeding. Intervention will be permitted only at the discretion of the presiding officer upon the filing of a motion in compliance with rule 28-106.205 of the Florida Administrative Code.

In accordance with rules 28-106.111(2) and 62-110.106(3)(a)(4), petitions for an administrative hearing by the applicant must be filed within 14 days of receipt of this written notice. Petitions filed by any persons other than the applicant, and other than those entitled to written notice under section 120.60(3) of the Florida Statutes must be filed within 14 days of publication of the notice or within 14 days of receipt of the written notice, whichever occurs first. Under section 120.60(3) of the Florida Statutes, however, any person who has asked the Department for notice of agency action may file a petition within 14 days of receipt of such notice, regardless of the date of publication.

The petitioner shall mail a copy of the petition to the applicant at the address indicated above at the time of filing. The failure of any person to file a petition for an administrative hearing within the appropriate time period shall constitute a waiver of that person's right to request an administrative determination (hearing) under sections 120.569 and 120.57 of the Florida Statutes.

A petition that disputes the material facts on which the Department's action is based must contain the following information:

(a) The name and address of each agency affected and each agency's file or identification number, if known;

- (b) The name, address, and telephone number of the petitioner; the name, address, and telephone number of the petitioner's representative, if any, which shall be the address for service purposes during the course of the proceeding; and an explanation of how the petitioner's substantial interests are or will be affected by the agency determination;
- (c) A statement of when and how the petitioner received notice of the agency decision;
- (d) A statement of all disputed issues of material fact. If there are none, the petition must so indicate;
- (e) A concise statement of the ultimate facts alleged, including the specific facts that the petitioner contends warrant reversal or modification of the agency's proposed action;
- (f) A statement of the specific rules or statutes that the petitioner contends require reversal or modification of the agency's proposed action; and
- (g) A statement of the relief sought by the petitioner, stating precisely the action that the petitioner wishes the agency to take with respect to the agency's proposed action.

A petition that does not dispute the material facts on which the Department's action is based shall state that no such facts are in dispute and otherwise shall contain the same information as set forth above, as required by rule 28-106.301. Under sections 120.569(2)(c) and (d) of the Florida Statutes, a petition for administrative hearing must be dismissed by the agency if the petition does not substantially comply with the above requirements or is untimely filed.

This permit constitutes an order of the Department. Subject to the provisions of paragraph 120.68(7)(a) of the Florida Statutes, which may require a remand for an administrative hearing, the applicant has the right to seek judicial review of the order under section 120.68 of the Florida Statutes, by the filing of a notice of appeal under rule 9.110 of the Florida Rules of Appellate Procedure with the Clerk of the Department in the Office of General Counsel, 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida, 32399-3000, and by filing a copy of the notice of appeal accompanied by the applicable filing fees with the appropriate district court of appeal. The notice of appeal must be filed within 30 days from the date when the order is filed with the Clerk of the Department.

Executed in Port St. Lucie, Florida.

STATE OF FLORIDA DEPARTMENT
OF ENVIRONMENTAL PROTECTION

Timothy Rach
Program Administrator
Submerged Lands & Environmental Resources Program
Date 7/25/03

TR/MY

Copies furnished to: U. S. Army Corps of Engineers, Stuart
~~(Name of Associate Agent)~~

CERTIFICATE OF SERVICE

The undersigned duly designated deputy clerk hereby certifies that this permit and authorization to use sovereign submerged lands, including all copies, were mailed before the close of business on July 2, 2003, to the above listed persons.

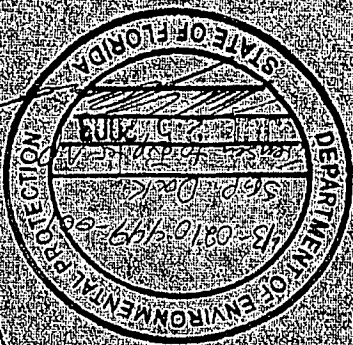
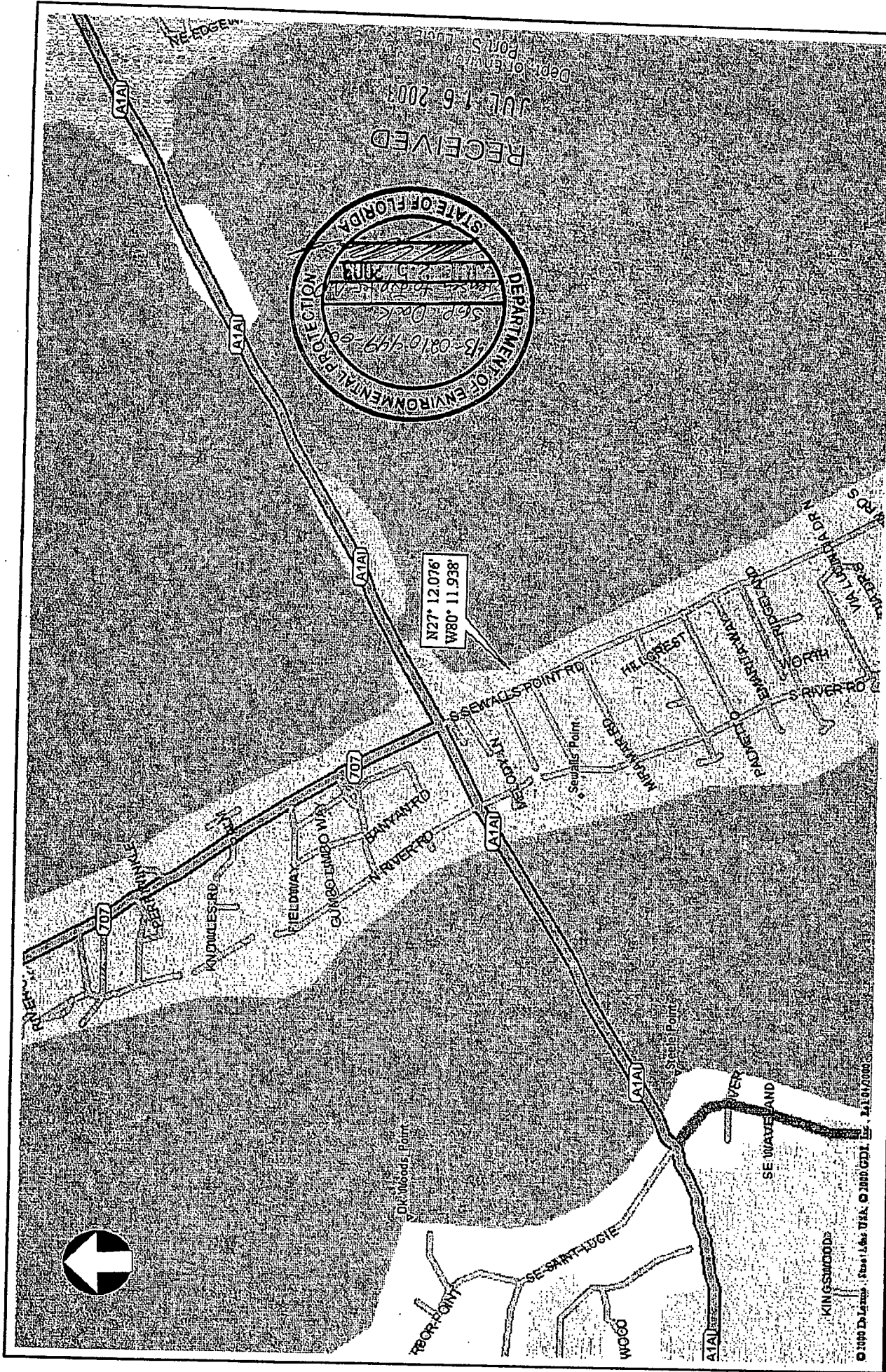
FILING AND ACKNOWLEDGMENT

FILED, on this date, under 120.52(7) of the Florida Statutes, with the designated Department Clerk, receipt of which is hereby acknowledged.

Mark F. Youmans Clerk
7/2/03 Date

Prepared by Mark Youmans

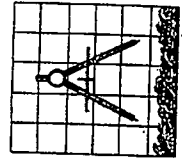
11 pages attached.



Revised 07/10/03

Scale:	Sheet 1 of 4
Date: 02/06/03	

Design & Drawing by:
Jerner & Associates, Inc.
 Environmental Consulting
 110 SW 5th Street
 Stuart, FL 34994
 Ph. (772) 283-2950 / Fax (772) 283-2760

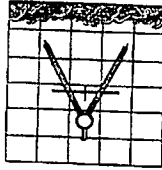


Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996

© 2000 D. J. ...

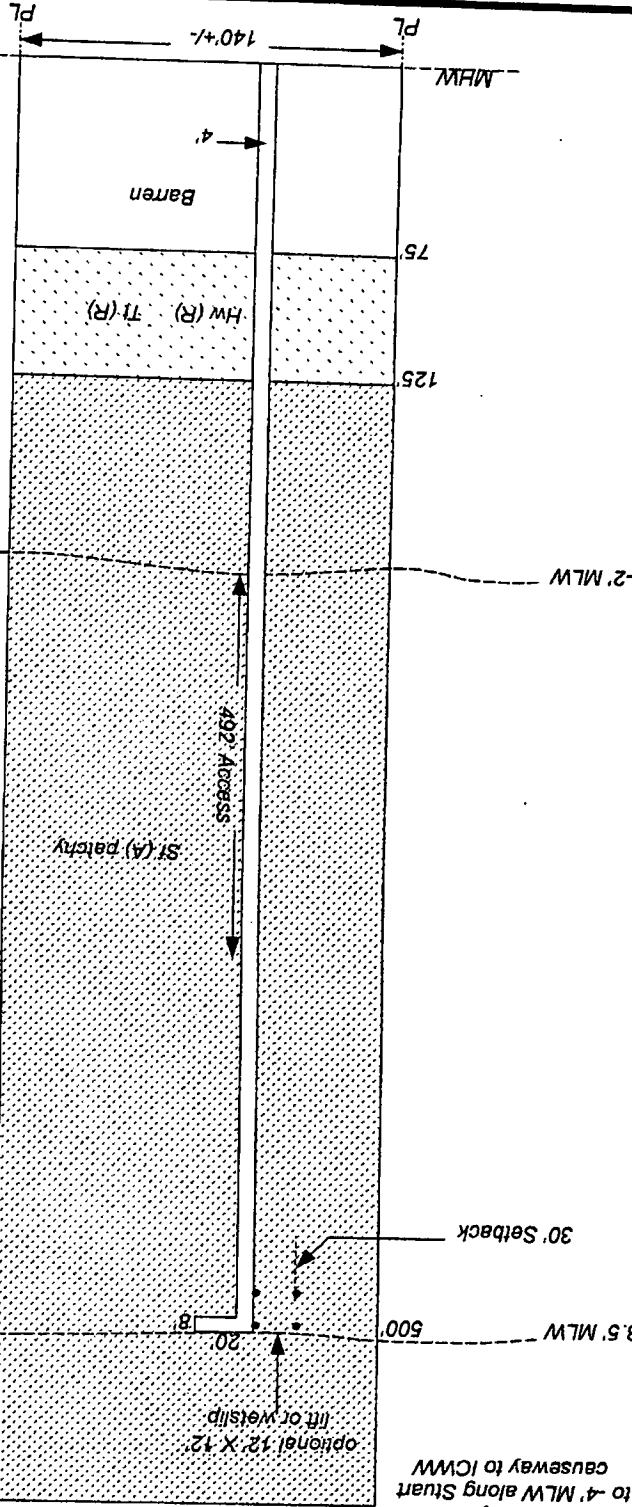
Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996

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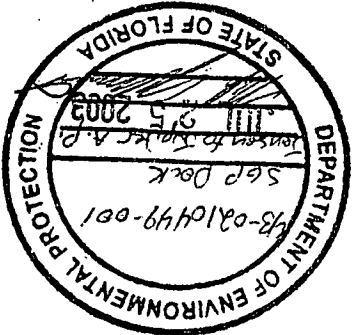


Scale: 1" = 75'
 Date: 02/06/03
 Sheet 2 of 4

Revised 07-10-03



REVIEWED BY
 JOHN CLARK
 PROFESSIONAL ENGINEER
 FLORIDA
 INTEGRITY
 OF STRUCTURAL



Seagrass Survey Performed on
 01/31/03 @ 1200 hrs.
 by Lisa Perrone & Duane Fikel
 Jerner & Associates, Inc.

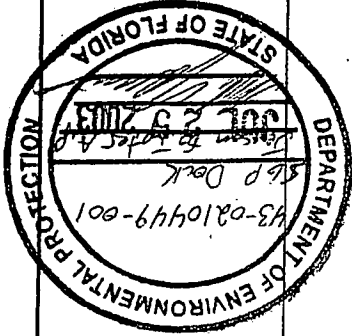
Resource Key

T: Thalassia testudinum
St: Syngodium filiforme
R: Rare
O: Occasional
F: Frequent
A: Abundant
D: Dominant
D: Halophila engelmannii
A: Halophila decipiens
F: Halophila johnsonii
H: Halodule wrightii

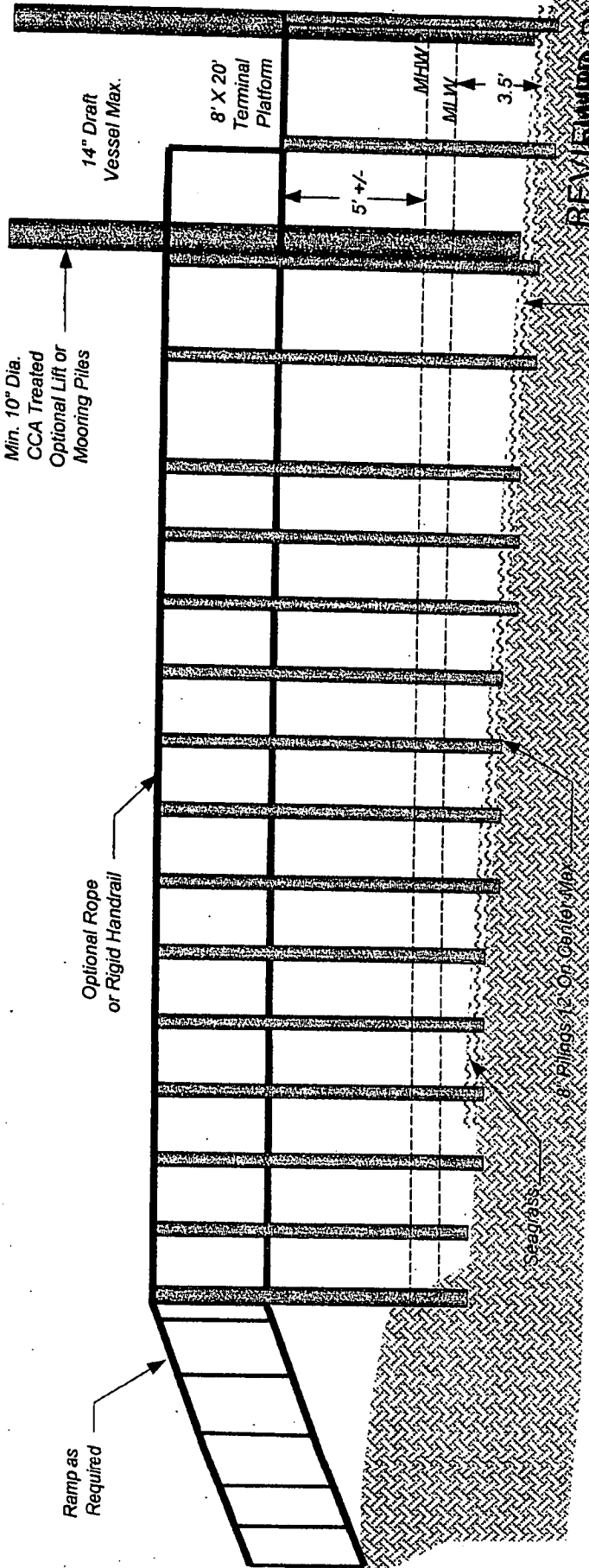


Indian River

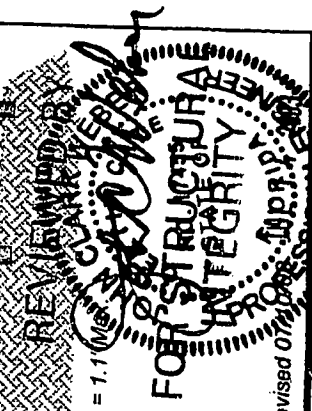
Flood/Ebb



500' Over All Length



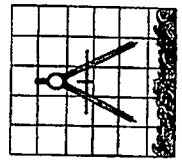
Seagrass Ht. = 1.1' (Max)



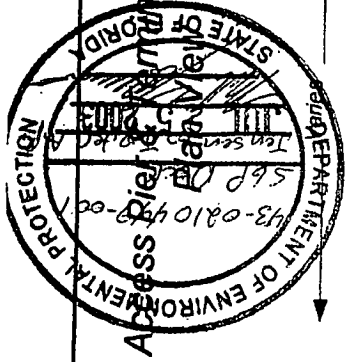
Revised 07/03

Scale: Show in
Date: 02/06/03
Sheet 3 of 4

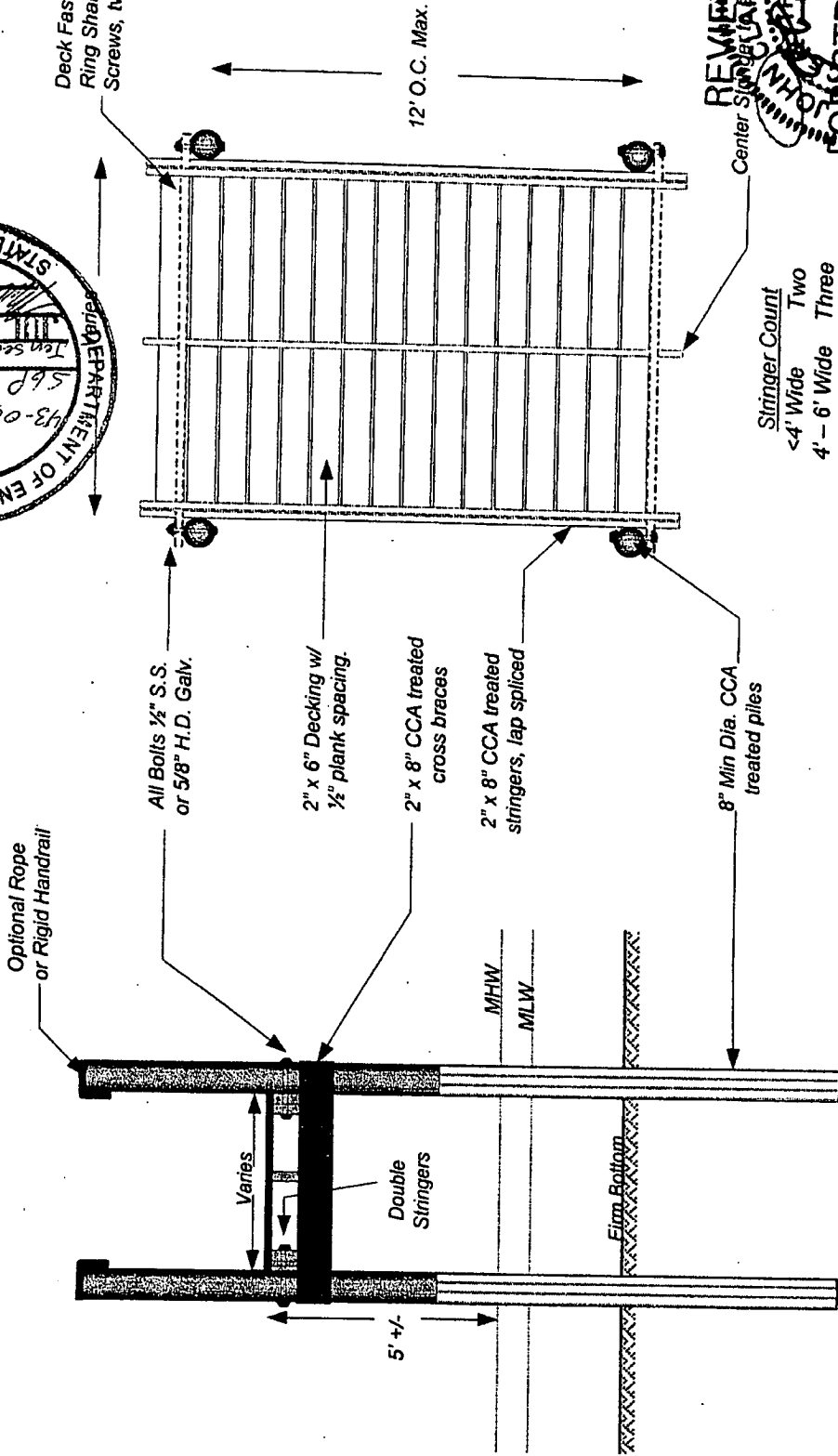
Design & Drawing by:
Jerner & Associates, Inc.
Environmental Consulting
110 SW 5th Street
Stuart, FL 34994
Ph. (772)283-2950/ Fax (772)283-2760



Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996



**Access Pier & Terminal Detail
Section Thru**

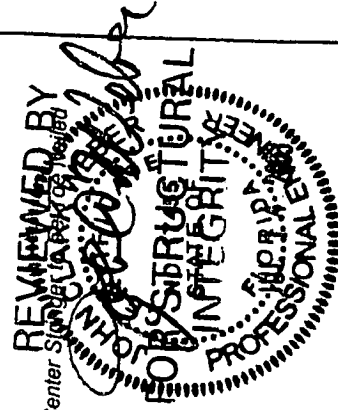


Pilings jettied to a minimum depth of 6' and as necessary to provide adequate bearing and stability

Deck Fasteners #16 SS
Ring Shank Nails or SS
Screws, two per stringer

12' O.C. Max.

Stringer Count
 <4' Wide Two
 4' - 6' Wide Three
 8' Wide Four

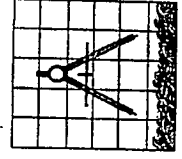


* See plan details for access & terminal dimensions

Revised 07/10/03

Scale: 1" = 4'
 Date: 02/06/03

Sheet 4 of 4

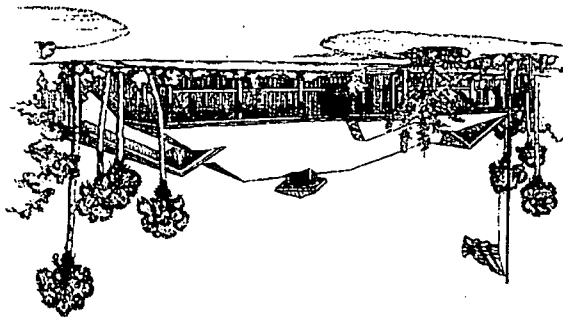


Design & Drawing by:
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 110 SW. 5th Street
 Stuart, FL 34994
 Ph. (772)283-2950/ Fax (772)283-2760

Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996

TOWN OF SEWALL'S POINT

JOSEPH C. DORSKY
Town Manager
JOAN H. BARROW
Town Clerk
LARRY E. McCARTY
Chief of Police
GENE SIMMONS
Building Official
JOSE TORRES, JR.
Maintenance



MARC S. TEPLITZ
Mayor
Vice Mayor
E. DANIEL MORRIS
Commissioner
THOMAS BAUSCH
Commissioner
RICHARD L. BARON
Commissioner

To: Mayor and Commissioners
Fm: Gene Simmons
Building Official

Date: March 8, 2004

Re: Request for Dock and Boatlift Variance for Gary & Rebecca Schecodnic located at 12 South Sewall's Point Road

Attached please find the following documents:

1. Notice of appeal from denial of dock permit
2. Letters of No Objection or proof of service filed at least 15 days prior to the town meeting.
3. Florida Department of Environmental Protection Permit or Exemption Letter
4. Survey

The above permit application for a dock and boatlift located at 12 South Sewall's Point Road has been denied due to the fact the proposed dock does not meet the length requirement of 250 feet as outlined in the Town of Sewall's Point Ordinance 62-171. This request is for an extension of 250 feet from the permitted dock length of 250.0 feet. The Florida Department of Environmental Protection requires the additional 250 feet length. The proposed length as established by the Florida Department of Environmental Protection for this dock is 500 feet. The Schecodnics are requesting an additional 250 feet to accommodate their proposed dock and boatlift.

The application and submitted documents for permit are complete and thereby only lacks Commission approval for the extension of the dock. Your assistance in this matter is highly appreciated. Upon approval I will issue the permit to Mr. and Mrs. Schecodnic.



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

**TOWN OF SEWALL'S POINT
APPLICATION FOR NOTICE OF APPEAL FROM DENIAL OF DOCK PERMIT**

NOTICE IS HEREBY GIVEN, pursuant to Section 62-154 Code of Ordinances of the Town of Sewall's Point, Florida, that the applicant identified below will appeal to the Town Commission of the Town of Sewall's Point, Florida, from the denial of a permit for the construction of a dock on the property located at the street address given below for the reasons indicated below at a meeting of the Sewall's Point Town Commission at the Sewall's Point Town Hall, One South Sewall's Point Road, Sewall's Point, Florida or as soon thereafter as is possible.

NAME OF APPLICANT: GARY SCHECOWIC and REBECCA SCHECOWIC

STREET ADDRESS OF PROPERTY: 12 S. Sewall's Point rd.

REASON FOR DENIAL OF DOCK PERMIT:

- Building Official error.
- Failure to obtain letters of no objection from adjacent upland riparian owners.
- Objection of neighbors unreasonable
- Failure to comply with the standards and criteria for docks in the following respects:
 - (X) Length: 492 feet + 8' platform = 500'
 - Design:
 - Construction:
 - Sitting:
 - Extreme Hardship

DATE AND TIME OF MEETING:

(Signature of Owner)

Rebecca Schechowic

(Signature of Owner)

Gary Schechowic

The completed application for the permit to construct the dock may be inspected at the Town Hall during regular business hours. All interested parties may appear at the meeting and may be heard with respect to the appeal. If any person decides to appeal any decision made by the Town Commission with respect to any matter considered at the meeting or hearing, he will need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

This notice shall be posted on the Town Hall bulletin board and shall be sent by certified mail, return receipt requested, by the applicant and at the applicant's expense, to all record owners of upland riparian property located adjacent to the property involved in the appeal, with the date of mailing being at least fifteen (15) days before the date of the hearing. At or before the public hearing, the applicant shall present proof of the identity and address of the persons entitled to receive notice by mail and of the mailing of the notice to those persons.

Dated: 3/19/04

JOAN H. BARROW, Town Clerk

DOCK PERMIT

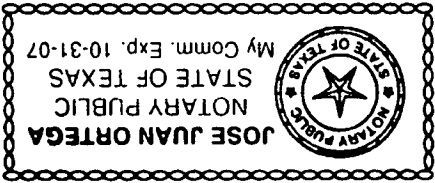
LETTER OF NO OBJECTION

We, Jacquelin F. Tenny and Keith Tenny being the owner (s) of certain property adjacent to and abutting the property of GARY + REBECCA SCHEDWIN who have applied for a dock permit for construction, have read and reviewed the drawing of the dock and We (I) have no objection to the proposed dock pursuant to the plan attached herein.

Jacquelin F. Tenny
Signature

STATE OF Texas
COUNTY OF Harris

SWORN TO AND SUBSCRIBED before me this 31 day of Dec, 20 03



[Signature]
NOTARY PUBLIC

MY COMMISSION EXPIRES: 10-31-07

DOCK PERMIT

LETTER OF NO OBJECTION

We, Gloria H Wehr and _____
being the owner (s) of certain property adjacent to and abutting the
property of GARY & REBECCA SUTHERLAND who have applied for a
dock permit for construction, have read and reviewed the drawing of
the dock and We (I) have no objection to the proposed dock pursuant
to the plan attached herein.

Signature

Gloria H Wehr

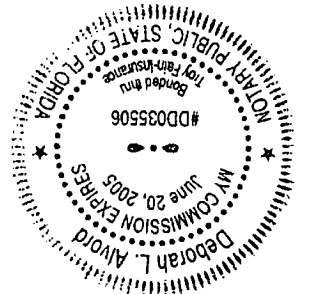
Signature

STATE OF Florida
COUNTY OF Martin

SWORN TO AND SUBSCRIBED before me this 29th day
of Dec, 2003

Deborah Beckwith
NOTARY PUBLIC

MY COMMISSION EXPIRES: 6/20/05



**MEAN HIGH WATER SURVEY
LOT 18, HERITAGE PLACE
PLAT BOOK 10, PAGE 2
MARTIN COUNTY, FLORIDA**

COPAIRE
ROAD

SOUTH SEWALL'S POINT ROAD

CENTERLINE 50' RIGHT OF WAY
23' ASPHALT PAVEMENT

20' DRAINAGE AND UTILITY EASEMENT
(P.B. 10, PAGE 2)

FLOOD ZONE V10, BASE E.L. = 8.0'
FLOOD ZONE V11, BASE E.L. = 10.0'

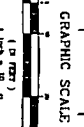
NO AUSTRALIAN PINES OR PEPPER TREES LOCATED.

NOT PLATTED
ONE STORY WOOD FRAME DWELLING
INDICATED ELEVATION = 5.71'

LOT 18
MICHAM LAND

LOT 17

INDIAN RIVER



RIGHT OF WAY

ONE STORY WOOD FRAME DWELLING
INDICATED ELEVATION = 5.71' PER DWELLING
NO WELL ON SITE - AS PER DWELLING

MANHOLES

523°56'40"E 73.62'

135.52'
S20°44'21"E
MEAN HIGH WATER ELEVATION 00.22' NCID 1929
AS LOCATED ON 10/2/03

PLATTED MEAN HIGH WATER LINE (P.B. 10, PAGE 2)

31.24'
S25°33'35"E

BLOOMSTER
PROFESSIONAL LAND
SURVEYORS, INC.
701 NORTHEAST DIKE HIGHWAY
JENSEN BEACH, FLORIDA 34957
PHONE 772-334-0868

GARY & REBECCA SCHECODNIC
SEWALL'S POINT ROAD
SEWALL'S POINT, MARTIN COUNTY, FLORIDA

LOCATION MAP USGS 15K400

CONVEYANCES:
1. ALL INTERESTS AND RIGHTS RESERVED TO THE SURVEYOR.
2. THIS SURVEY IS NOT TO BE USED FOR ANY OTHER PURPOSES WITHOUT THE WRITTEN CONSENT OF THE SURVEYOR.

CONVEYOR'S NOTES:
1. THIS SURVEY IS BASED ON THE MEAN HIGH WATER SURVEY OF LOT 18, HERITAGE PLACE, PLAT BOOK 10, PAGE 2, MARTIN COUNTY, FLORIDA, DATED 10/2/03.
2. THE SURVEYOR HAS CONDUCTED A VISUAL INSPECTION OF THE PROPERTY AND HAS FOUND NO AUSTRALIAN PINES OR PEPPER TREES LOCATED ON THE PROPERTY.
3. THE SURVEYOR HAS CONDUCTED A VISUAL INSPECTION OF THE PROPERTY AND HAS FOUND NO WELL ON SITE AS PER DWELLING.
4. THE SURVEYOR HAS CONDUCTED A VISUAL INSPECTION OF THE PROPERTY AND HAS FOUND NO MANHOLES ON THE PROPERTY.
5. THE SURVEYOR HAS CONDUCTED A VISUAL INSPECTION OF THE PROPERTY AND HAS FOUND NO OTHER FEATURES ON THE PROPERTY.
6. THE SURVEYOR HAS CONDUCTED A VISUAL INSPECTION OF THE PROPERTY AND HAS FOUND NO OTHER FEATURES ON THE PROPERTY.
7. THE SURVEYOR HAS CONDUCTED A VISUAL INSPECTION OF THE PROPERTY AND HAS FOUND NO OTHER FEATURES ON THE PROPERTY.

CONVEYANCES:
1. ALL INTERESTS AND RIGHTS RESERVED TO THE SURVEYOR.
2. THIS SURVEY IS NOT TO BE USED FOR ANY OTHER PURPOSES WITHOUT THE WRITTEN CONSENT OF THE SURVEYOR.

MANHOLES
INDICATED BY SYMBOLS
AS PER DWELLING

MANHOLES
INDICATED BY SYMBOLS
AS PER DWELLING

MANHOLES
INDICATED BY SYMBOLS
AS PER DWELLING

MANHOLES
INDICATED BY SYMBOLS
AS PER DWELLING

ADDRESS	OWNER/ADDRESS/COUNTY	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
6739	SCHACODNE	WALL-TIE	FAIL	WEARS SURVEY	<i>M</i>
6643	12 S. SEWALL'S PT	BOATLIFT			
5	TCBI	DOCK/FINAL	FAIL		<i>M</i>
OTHER:					

DO NOT REMOVE THIS TAG

INSPECTOR

DATE:

5/28

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.

ULTS	NOTES/COMMENTS	INSPECTOR
		<i>M</i>
		<i>M</i>
		<i>M</i>
		<i>M</i>
		<i>M</i>
		<i>M</i>
		<i>M</i>
		<i>M</i>
		<i>M</i>

DOCK & BOATLIFT
 3/4" WATERLOO NUTS TO
 BE SUPPORTED @ 48" INTERVALS
 ALONG ENTIRE LENGTH

RETAINING WALL
 MISABLE FROM SURVEY

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.

ADDRESS: *12 S. SEWALL'S PT. RD.*

CORRECTION NOTICE

TOWN OF SEWALL'S POINT
 One South Sewall's Point Road
 Sewall's Point, Florida 34996
 (772) 287-2455



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun 6/30/07, 2007 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	GREENE	RE-ROOF	PASS	CLOSE
2	26 ISLAND DR WILFRAY			
	6725 SEILER	STEAM SUITERS	PASS	CLOSE
8	S KINGSTON G GUESTBEAM			
	TREE HOGAN	TREE	PASS	
9	100 S. RIVER RD			
6643	SCHACONIC	FINAL DOCK-BUILDING		CLOSE
10	12.5 SEAVUS PR TCB1			
6739	SCHACONIC	FINAL RET WALL	PASS	CLOSE
11	12.5 SEAVUS PR TCB1			
6476	CLIVICO	TRAINING-MSTR BATH CURB-BREAKING	FAIL	
12	31 FIELDWAY OIB			
6809	RADER	POOL STEEL-DECK PASS		
14	5 HEITZGEMAY HAMINGO POOLS	(SEE-POOL) (SEE 11AM-12 PLEASE)		

RETAINING WALL

6739

TOWN OF SEWALL'S POINT

Date 5/10/04

BUILDING PERMIT NO. 6739

Building to be erected for SEACONIC Applied for by T.C.B.I.

Type of Permit REMAINING WALL (Contractor) Building Fee \$2,400 336.00

Subdivision HERITAGE PARCEL 18 Block _____

Address 1 RIVERCREST CT

Type of structure SFR

Parcel Control Number: 13841013000018020000

Amount Paid 2041.00 Check # 3740 Cash _____

Total Construction Cost \$ 9,000.00 TOTAL Fees 336.00

Signed [Signature] Applicant
 Signed [Signature] Town Building Official

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION Masonry Wall

INSPECTIONS

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

MASTER PERMIT NO. _____

RECEIVED
APR 19 2004

Town of Sewall's Point

BY: GARY & REBECCA SCHEIDT
OWNER OR APPLICANT NAME: GARY & REBECCA SCHEIDT
LEGAL DESCRIPTION OF PROPERTY: 12 S. SEWALLS Pt. RD
LOCATION OF JOB SITE: LOT 18 SEWALLS POINT ROAD
BUILDING PERMIT APPLICATION

CONTRACTOR/COMPANY NAME: T.C.B.I.
STREET: 110 SW 5TH STREET
CITY: STUART
STATE: FL
ZIP: 34994
PHONE NUMBER: 860-4186
STATE REGISTRATION NUMBER: 5201521
MARTIN COUNTY LICENSE NUMBER: 5201521

ENGINEER: _____
STREET: _____
CITY: _____
STATE: _____
ZIP: _____
PHONE NUMBER: _____

AREA SQUARE FOOTAGE - SEWER - ELECTRIC: _____
LIVING: _____
GARAGE: _____
COVERED PATIOS: _____
SCREENED PORCH: _____
CARPORT: _____
TOTAL UNDER ROOF: _____
WOOD DECK: _____
ACCESSORY BUILDING: _____
SEPTIC TANK PERMIT NUMBER FROM HEALTH DEPT.: _____
WELL PERMIT NUMBER: _____

FLOOD HAZARD INFORMATION
FLOOD ZONE: _____
MINIMUM BASE FLOOD ELEVATION (BFE): _____
NGVD (Minimum 1 Foot Above BFE): _____
PROPOSED FIRST FLOOR HABITABLE FLOOR FINISHED ELEVATION: _____
ESTIMATED COST OF CONSTRUCTION OR IMPROVEMENTS: \$1,000,000
ESTIMATED FAIR MARKET VALUE (FMV) PRIOR TO IMPROVEMENTS: _____
IF IMPROVEMENT IS COST GREATER THAN 50% OF FAIR MARKET VALUE YES _____ NO _____

SUBCONTRACTOR INFORMATION
ELECTRICAL: _____
MECHANICAL: _____
PLUMBING: _____
ROOFING: _____
I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNANCE, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, DOCKS, SEA WALLS, ACCESSORY BUILDINGS, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL AND RELOCATIONS.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION
Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____
Florida Electrical Code _____
Florida Accessibility Code _____
I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.

OWNER OR AGENT SIGNATURE (Required) _____
STATE OF FLORIDA, COUNTY OF: MARTIN
THIS THE 13th day of APRIL, 2004
BY: GARY SCHEIDT who is personally known to me or produced as identification.
NOTARY PUBLIC: Sally Ford
MY COMMISSION EXPIRES: 4-9-08

My Commission Expires: _____
NOTARY PUBLIC: Sally Ford
My Commission Expires: 4-9-08
My Commission Expires: 4-9-08

ACORD - CERTIFICATE OF LIABILITY INSURANCE
 DATE: 10/15/2003

PRODUCER: **Saul Lynch & Associates, Inc.**
 3388 NE Sugarhill Ave, Suite 201
 Jensen Beach, FL 34957
 772 232-2552

INSURED: **TCCI dba Treasure Coast Barge, Inc.**
 dba TCCI
 5835 SW Hupp Road
 Palm City, FL 34990
 (772) 220-3625

INSURERS AFFORDING COVERAGE: **Lloyds**
 Lloyd's Water Quality Insurance Syndicate

INSURER E: _____
 INSURER D: _____
 INSURER C: _____
 INSURER B: _____
 INSURER A: _____

INSURER E: _____
 INSURER D: _____
 INSURER C: _____
 INSURER B: _____
 INSURER A: _____

THE POLICES 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 POLICES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	UNITS
GENERAL LIABILITY	MS-030753000	07/16/03	07/16/04	1,000,000
COMMERCIAL GENERAL LIABILITY				1,000,000
COLLISION				1,000,000
COMBINED SINGLE LIMIT				1,000,000
BOATY LIABILITY (Per boat)				1,000,000
BOATY LIABILITY (Per person)				1,000,000
PERSONAL & ADVISORY				2,000,000
GENERAL AGGREGATE				1,000,000
PRODUCTS - COM/OP ADD				1,000,000

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	UNITS
GENERAL LIABILITY	35-35588	05/01/03	05/01/04	1,000,000
COMMERCIAL GENERAL LIABILITY				1,000,000
COLLISION				1,000,000
COMBINED SINGLE LIMIT				1,000,000
BOATY LIABILITY (Per boat)				1,000,000
BOATY LIABILITY (Per person)				1,000,000
PERSONAL & ADVISORY				2,000,000
GENERAL AGGREGATE				1,000,000
PRODUCTS - COM/OP ADD				1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ASSES BY ENDORSEMENT / SPECIAL PROVISIONS:
Marine construction.

CERTIFICATE HOLDER

Town of Sewall's Point
 1 South Sewall's Point Road
 Sewall's Point, Florida 34996

Fax: 220-4765

AUTHORIZED REPRESENTATIVE: _____

DATE THEREOF: THE ISSUING INSURER WILL EMPLOYER TO MAIL _____ DATE 30 DAYS WRITTEN

NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER OR AGENTS OR

ACORD 25 (2001/03)

05-23-2003

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW

CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE	09/14/2002	EXPIRATION DATE	09/13/2004
-----------	------------	-----------------	------------

PERSON	GUIDICE	MICHAEL
--------	---------	---------

SSN	089-62-7399
-----	-------------

FEIN	650753315
------	-----------

BUSINESS	TREASURE COAST BARDEGE INC	5835 MAPLE ROAD	PALM CITY	FL 34990
----------	----------------------------	-----------------	-----------	----------

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

2003-2004 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 8013, Stuart, FL 34995
(772) 288-5604

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	-00
LIC. FEE \$	-00
PENALTY \$	-00
COL. FEE \$	-00
TRANSFERS \$	25.00
TOTAL	25.00

IS HERBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION OF
MARINE CONSTRUCTION
MICHAEL GUIDICE QUALIFIER SP01521
TIGRIS, INC.
JULIANO LUCY - PRES
5835 SM MAPLE ROAD
PALM CITY FL 34990

11 SEPTEMBER 2004
DAY OF SEPTEMBER 2004
12 03091001 003465

TOTAL P.02

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 1-38-41-013-000-00180-90

NOTICE OF COMMENCEMENT

STATE OF Florida

COUNTY OF MARTIN

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

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

Lot 18 Sewall's Point Road

GENERAL DESCRIPTION OF IMPROVEMENT: CONSTRUCT A 140' +/- LINEAR FOOT RETAINING

OWNER: GARY + REBECCA SCHEDONIC

ADDRESS: 1 RIVERCAST COURT, STUART, FL 34956

PHONE # (772) 781-2515

CONTRACTOR: T.B.T.

ADDRESS: 1000 25th OFF RD, STUART, FL 34994

PHONE # 888-111-1111

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE # _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE # _____

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

NAME: _____

ADDRESS: _____

PHONE # _____

IN ADDITION TO HIMSELF, OWNER DESIGNATES _____ 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 ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

SIGNATURE OF OWNER

Gary Schedonic

SWORN TO AND SUBSCRIBED BEFORE ME THIS

DAY OF

April

OR

PERSONALLY KNOWN

PRODUCED ID

TYPE OF ID

NOTARY SIGNATURE

Sally Ford



My Commission DD296090 Expires April 09, 2008

/data/gmnd/bzdbldg_forms/Notc.aw

12/01/99

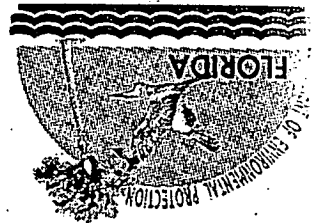
INSTR # 1742885 OR BK 01886 PG 0735 RECD 04/13/2004 02:19:24 PM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK L Wood



THIS IS TO CERTIFY THAT THE FORGOING IS A TRUE AND CORRECT COPY OF THE ORIGINAL. MARSHA EWING, CLERK

DATE 4/13/04 D.C.

Department of Environmental Protection



Jeff Bush
Governor

FEB 26 2004

Southeast District
400 N. Congress Ave, Suite 200
West Palm Beach, Florida 33401

David B. Struhs
Secretary

Gary Schecodnic
1 Rivercrest Court
Stuart, FL 34996

Re: File No.: 43-0210449-002
File Name: Schecodnic, Gary

Dear Mr. Schecodnic:

On January 28, 2004, we received your application for an exemption to perform the following activity: construct a 140-lineal ft. retaining wall, with two 8-ft. return walls at each end, at 5-ft. landward of Mean High Water (MHW) and mangroves. The project is located on the St. Lucie River, Class III Waters, adjacent to 570 Manor Drive, Stuart (Section 8, Township 38 South, Range 41 East) in Martin County (N 27° 11' 5.21" / W 80° 15' 35.32").

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. - [NOT REQUIRED]

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 not within the jurisdiction of the Department, pursuant to Chapter 373, Florida Statutes (F.S.), because all of the construction will take place on uplands. Therefore, no further authorization is required.

Any modifications to your plans should be submitted for review, as changes may result in permits being required. No temporary dredging or filling, slope grading or equipment access is allowed in jurisdictional waters during project construction. The Department's jurisdiction may extend above mean high water where listed wetland species occur as defined in Rule 62-340, Florida Administrative Code.

2. Proprietary Review (related to state-owned lands). - [NOT REQUIRED]

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 your project under Chapters 253 and 258, F.S., Chapters 18-20 and 18-21, F.A.C., and Section 62-343.075, F.A.C.

Your project will not occur on sovereign submerged land. Therefore, pursuant to Chapter 253.77, F.S., authorization from the Board of Trustees is not required.

3. Federal Review (State Programmatic General Permit). - [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.

The determinations in this letter are based solely on the information provided to the Department and on the statutes and rules in effect when the application was submitted. The determinations are effective only for the specific activity proposed. These determinations shall automatically expire if site conditions materially change or if 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.

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 EIR/ERP permitting requirements. 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.

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. 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.

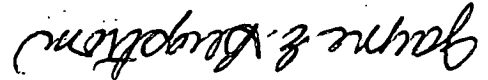
For the purposes of publication, a newspaper of general circulation means a newspaper meeting the requirements of sections 50.011 and 50.031 of the Florida Statutes. In the event you do publish this notice, within seven days of publication, you must provide to the following address proof of publication 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
Submerged Lands & Environmental Resources Program
400 N. Congress Ave., Suite 200
West Palm Beach, FL 33401

If you have any questions, please contact Jennifer Smith at 561/681-6633 or at jennifer.k.smith@dep.state.fl.us. When referring to your project, please use the FDLP file name and number listed above.

Sincerely,



Jayne E. Bergstrom

Environmental Manager

Submerged Lands & Environmental

Resources Program

Enclosures

cc: USACOE - Palm Beach Gardens, Sharon Niemczyk
Bruce Jerner, Jerner & Associates, Inc., 110 SW 5th Street, Stuart, FL 34994

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL PROTECTION
NOTICE OF DETERMINATION OF EXEMPTION

The Department of Environmental Protection gives notice that your project to construct a 140-linear ft. retaining wall, with two 8-ft. return walls at each end, at 5-ft. landward of Mean High Water (MHW) and mangroves. The project is located on the St. Lucie River, Class III Waters, adjacent to 570 Manor Drive, Stuart (Section 8, Township 38 South, Range 41 East) in Martin County (N 27° 11' 5.21" / W 80° 15' 35.32"), has been determined to be exempt from requirements to obtain an environmental resource permit.

A person whose substantial interests are affected by the Department's action may petition for an administrative proceeding (hearing) under sections 120.569 and 120.57 of the Florida Statutes. The petition must contain the information set forth below and must be filed (received by the clerk) in the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000.

Mediation is not available.

If a timely and sufficient petition for an administrative hearing is filed, other persons whose substantial interests will be affected by the outcome of the administrative process have the right to petition to intervene in the proceeding. Intervention will be permitted only at the discretion of the presiding officer upon the filing of a motion in compliance with rule 28-106.205 of the Florida Administrative Code.

In accordance with rules 28-106.111(2) and 62-110.106(3)(a)(4), petitions for an administrative hearing must be filed within 21 days of publication of the notice or receipt of written notice, whichever occurs first. Under rule 62-110.106(4) of the Florida Administrative Code, a person whose substantial interests are affected by the Department's action may also request an extension of time to file a petition for an administrative hearing. The Department may, for good cause shown, grant the request for an extension of time to file a petition for an administrative hearing. Requests for extension of time must be filed with the Office of General Counsel of the Department at 3900 Commonwealth Boulevard, Mail Station 35, Tallahassee, Florida 32399-3000 prior to the applicable deadline. A timely request for extension of time shall toll the running of the time period for filing a petition until the request is acted upon. Upon motion by the requesting party showing that the failure to file a request for an extension of time before the deadline was the result of excusable neglect, the Department may also grant the requested extension of time.

The petitioner shall mail a copy of the petition to the applicant at the address indicated above at the time of filing. The failure of any person to file a petition for an administrative hearing within the appropriate time period shall constitute a waiver of that right.

A petition that disputes the material facts on which the Department's action is based must contain the following information:

- (a) The name and address of each agency affected and each agency's file or identification number, if known;
- (b) The name, address, and telephone number of the petitioner; the name, address, and telephone number of the petitioner's representative, if any, which shall be the address for service purposes during the course of the proceeding; and an explanation of how the petitioner's substantial interests are or will be affected by the agency's determination;
- (c) A statement of when and how the petitioner received notice of the agency decision;
- (d) A statement of all disputed issues of material fact. If there are none, the petition must so indicate;
- (e) A concise statement of the ultimate facts alleged, including the specific facts the petitioner contends warrant reversal or modification of the agency's proposed action;
- (f) A statement of the specific rules or statutes that the petitioner contends require reversal or modification of the agency's proposed action; and
- (g) A statement of the relief sought by the petitioner, stating precisely the action that the petitioner wishes the agency to take with respect to the agency's proposed action.

A petition that does not dispute the material facts on which the Department's action is based shall state that no such facts are in dispute and otherwise shall contain the same information as set forth above, as required by rule 28-106.301.

Under sections 120.569(2)(c) and (d) of the Florida Statutes, a petition for administrative hearing shall be dismissed by the agency if the petition does not substantially comply with the above requirements or is untimely filed.

Complete copies of all documents relating to this determination of exemption are available for public inspection during normal business hours, 8:00 a.m. to 5:00 p.m., Monday through Friday, at the Southeast District office, 400 North Congress Avenue, West Palm Beach, Florida.

4. Reevaluation of Permit Decision: This office may reevaluate its decision on this permit at any time the circumstances warrant. Circumstances that could require a reevaluation include, but are not limited to, the following:

- a. You fail to comply with the terms and conditions of this permit.
- b. The information provided by you in support of your permit application proves to have been false, incomplete, or inaccurate (see 3 above).
- c. Significant new information surfaces which this office did not consider in reaching the original public interest decision.

Such a reevaluation may result in a determination that it is appropriate to use the suspension, modification, and revocation procedures contained in 33 CFR 325.7 or enforcement procedures such as those contained in 33 CFR 326.4 and 326.5. The referenced enforcement procedures provide for the issuance of an administrative order requiring you comply with the terms and conditions of your permit and for the initiation of legal action where appropriate. You will be required to pay for any corrective measures ordered by this office, and if you fail to comply with such directive, this office may in certain situations (such as those specified in 33 CFR 209.170) accomplish the corrective measures by contract or otherwise and bill you for the cost.

When the structures or work authorized by this permit are still in existence at the time the property is transferred, the terms and conditions of this permit will continue to be binding on the new owner(s) of the property. To validate the transfer of this permit and the associated liabilities associated with compliance with its terms and conditions, have the transferee sign and date below.

(TRANSFEEB-SIGNATURE)

(DATE)

(NAME-PRINTED)

(ADDRESS)

Manatee Conditions for Federal Authorization

1. The permittee shall instruct all personnel associated with the project of the potential presence of manatees and the need to avoid collisions with manatees. All construction personnel are responsible for observing water-related activities for the presence of manatee(s).

2. The permittee shall advise all construction personnel that there are civil and criminal penalties for harming, harassing, or killing manatees which are protected under the Marine Mammal Protection Act of 1972, the Endangered Species Act of 1973, and the Florida Manatee Sanctuary Act of 1978. The permittee and/or contractor may be held responsible for any manatee harmed, harassed, or killed as a result of construction activities.

3. Siltation barriers shall be installed and shall be made of material in which manatees cannot become entangled, shall be properly secured, and shall be monitored regularly to avoid manatee entrapment. Barriers shall not block manatee entry to or exit from essential habitat.

4. All vessels associated with the project shall operate at "no wake/idle" speeds at all times while in water where the draft of the vessel provides less than four feet clearance from the bottom and that vessels shall follow routes of deep water whenever possible.

5. If a manatee is sighted within 100 yards of the project area, all appropriate precautions shall be implemented by the permittee/contractor to ensure protection of the manatee. These precautions shall include the operation of all moving equipment no closer than 50 feet of a manatee. Operation of any equipment closer than 50 feet to a manatee shall necessitate immediate shutdown of that equipment. Activities will not resume until the manatee(s) has departed the project area of its own volition.

6. Any collision with and/or injury to a manatee shall be reported immediately to the "Manatee Hotline" at 1-800-404-FWCC (1-800-404-3922). Collision and/or injury should also be reported to the U.S. Fish and Wildlife Service in Vero Beach (1-561-562-3909) in south Florida.

7. Temporary signs concerning manatees shall be posted prior to and during construction/dredging activities. All signs are to be removed by the lessee/grantee upon completion of the project. A sign measuring at least 3 feet by 4 feet which reads *Caution: Manatee Area* will be posted in a location prominently visible to water related construction crews. A second sign should be posted if vessels are associated with the construction, and should be placed visible to the vessel operator. The second sign should be at least 8 1/2 inches by 11 inches which reads:

Caution: Manatee Habitat. Idle speed is required if operating a vessel in the construction area. All equipment must be shutdown if a manatee comes within 50 feet of the operation. A collision with and/or injury to a manatee shall be reported immediately to the Florida Marine Patrol at 1-800-DIAL-FMP (1-800-343-5367) and the U.S. Fish and Wildlife Service at (1-561-562-3909) for south Florida.

GENERAL CONDITIONS FOR FEDERAL AUTHORIZATION FOR SPCP III-RI

General Conditions

1. The time limit for completing the work authorized ends on June 17, 2004.

2. You must maintain the activity authorized by this permit in good condition and in conformance with the terms and conditions of this permit. You are not relieved of this requirement if you abandon the permitted activity, although you may make a good faith transfer to a third party in compliance with General Condition 4 below. Should you wish to cease to maintain the authorized activity or should you desire to abandon it without a good faith transfer, you must obtain a modification of this permit from this office, which may require restoration of the area.

3. If you discover any previously unknown historic or archaeological remains while accomplishing the activity authorized by this permit, you must immediately notify this office of what you have found. We will initiate the Federal and State coordination required to determine if the remains warrant a recovery effort or if the site is eligible for listing in the National Register of Historic Places.

4. If you sell the property associated with this permit, you must obtain the signature and mailing address of the new owner in the space provided below and forward a copy of the permit to this office to validate the transfer of this authorization.

5. You must allow representatives from this office to inspect the authorized activity at any time deemed necessary to ensure that it is being or has been accomplished in accordance with the terms and conditions of your permit.

Further Information:

1. Limits of this authorization.

a. This permit does not obviate the need to obtain other Federal, State, or local authorizations required by law.

b. This permit does not grant any property rights or exclusive privileges.

c. This permit does not authorize any injury to the property or rights of others.

d. This permit does not authorize interference with any existing or proposed Federal projects.

2. Limits of Federal Liability. In issuing this permit, the Federal Government does not assume any liability for the following:

a. Damages to the permitted project or uses thereof as a result of other permitted or unpermitted activities or from natural causes.

b. Damages to the permitted project or uses thereof as a result of current or future activities undertaken by or on behalf of the United States in the public interest.

c. Damages to persons, property, or to other permitted or unpermitted activities or structures caused by the activity authorized by this permit.

d. Design or construction deficiencies associated with the permitted work.

e. Damage claims associated with any future modification, suspension, or revocation of this permit.

3. Reliance on Applicant's Data: The determination of this office that issuance of this permit is not contrary to the public interest was made in reliance on the information you provided.

Gary Schedonic
Lot 18 Sewall's Point Road
Stuart, FL 34996

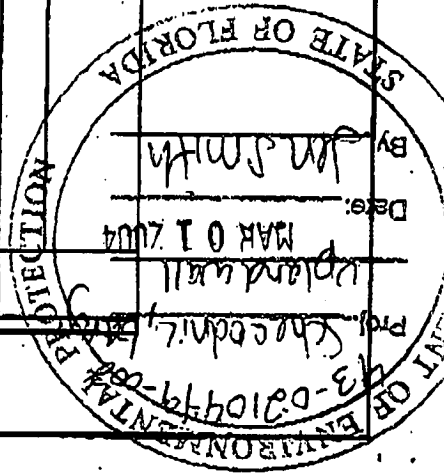
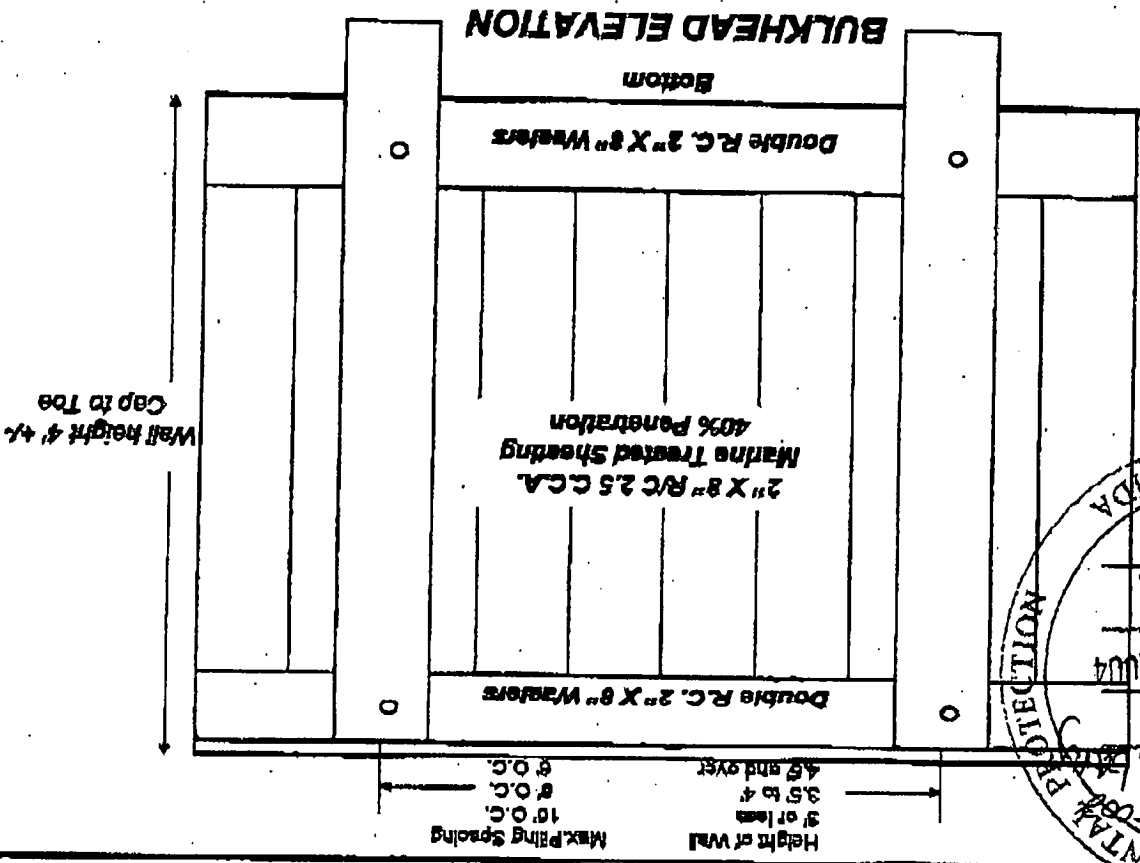
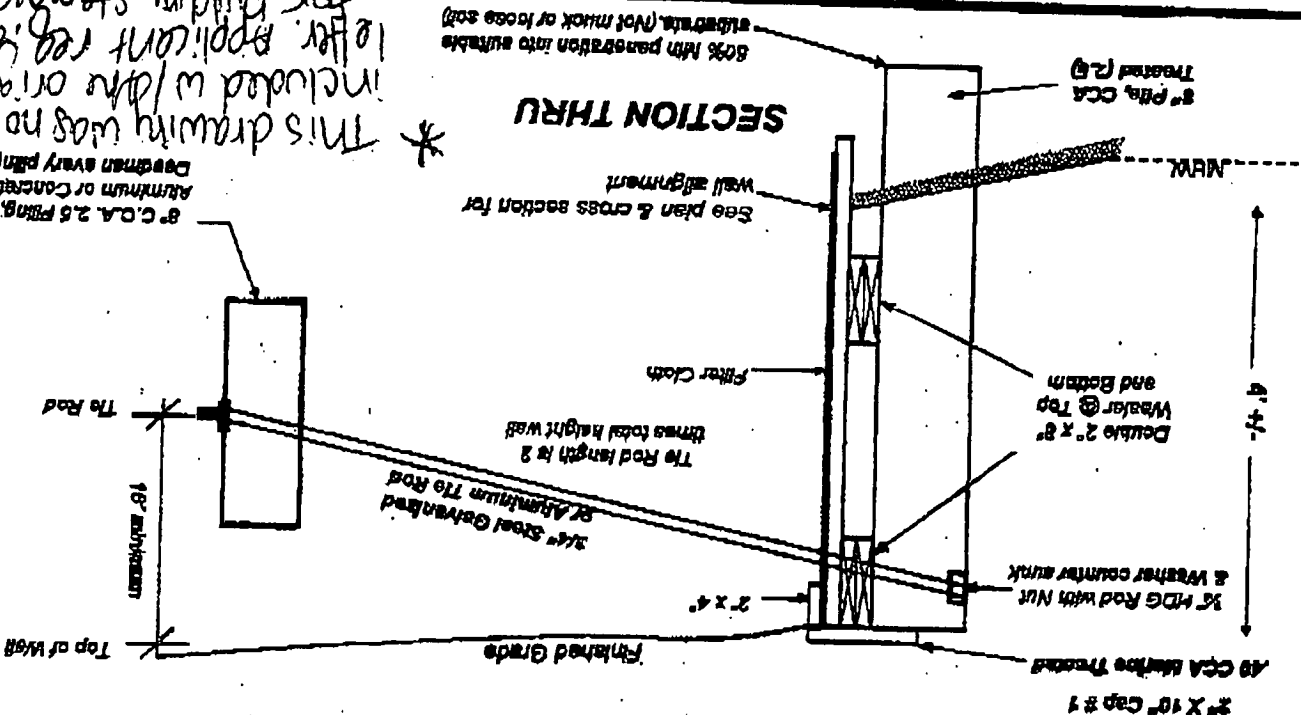
Design & Drawing by: DJF
Jeter & Associates, Inc.
Environmental Consulting
110 SW 2nd Street
Stuart, FL 34984
Ph: (772)283-2850 Fax: (772)283-2780

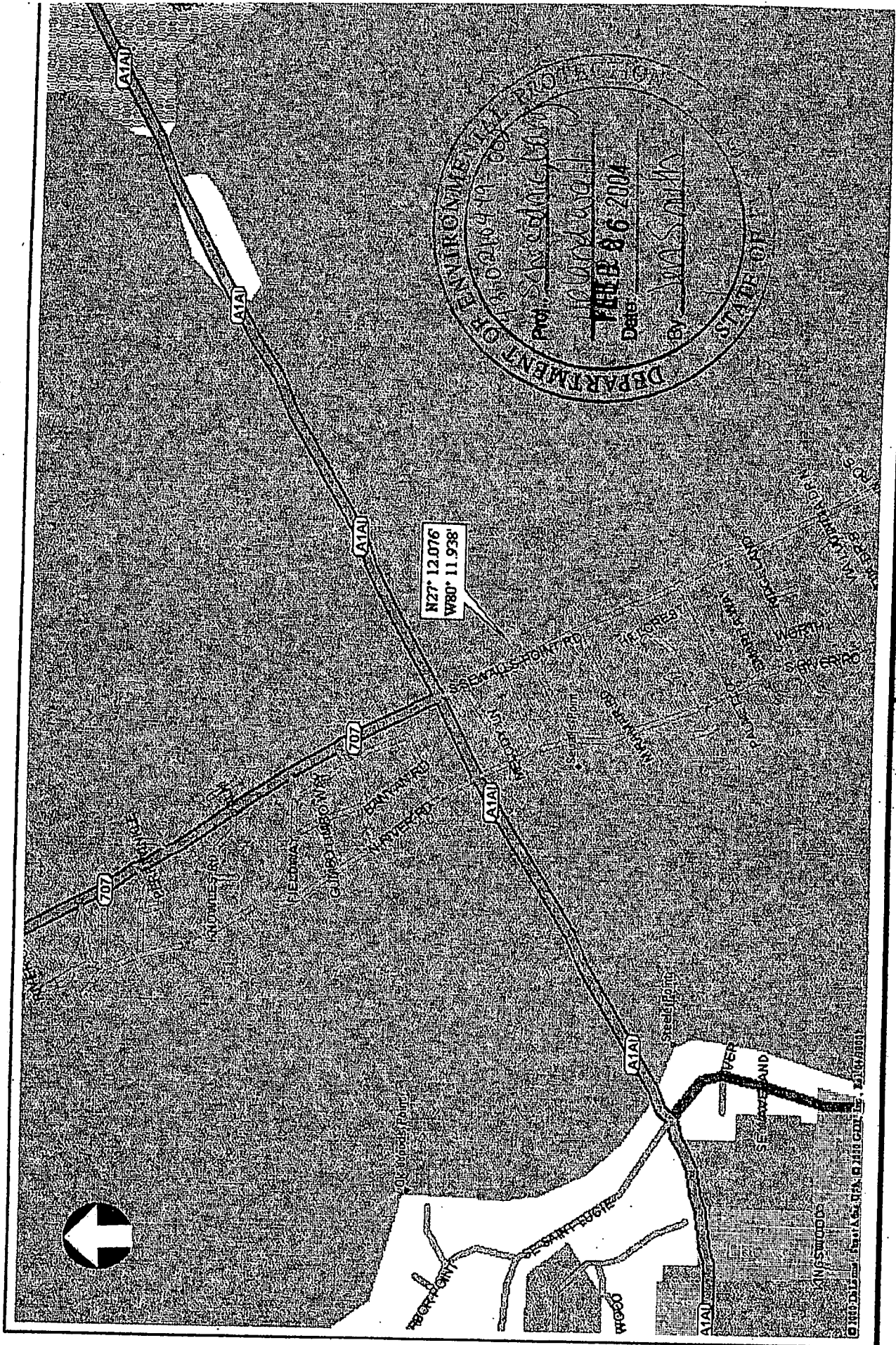
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Date: 01/19/04

Sheet 4 of 4

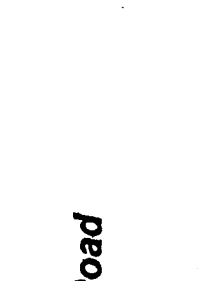
* This drawing was not included w/ the original letter. Applicant req. drawing for building stamped.





Scale: _____
 Date: 01/19/04

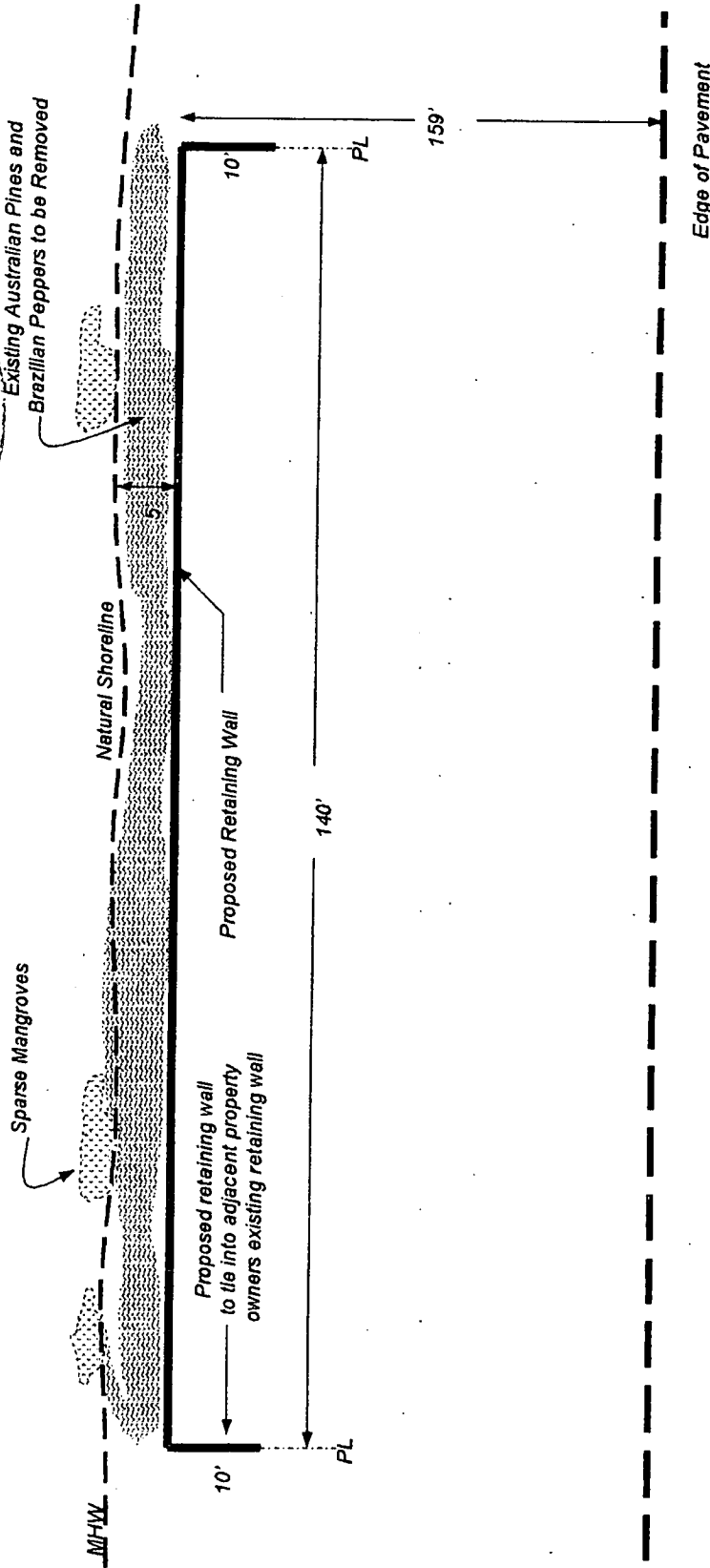
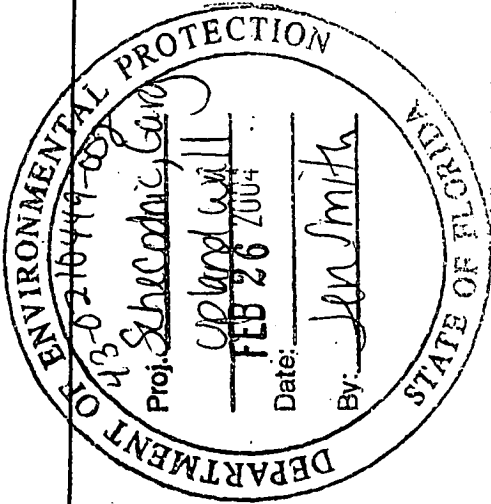
Design & Drawing by:
Jerner & Associates, Inc.
 Environmental Consulting
 110 SW. 5th Street
 Stuart, FL 34994
 Ph. (772) 283-2950 / Fax (772) 283-2760



Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996



Indian River



Revised 02/09/04

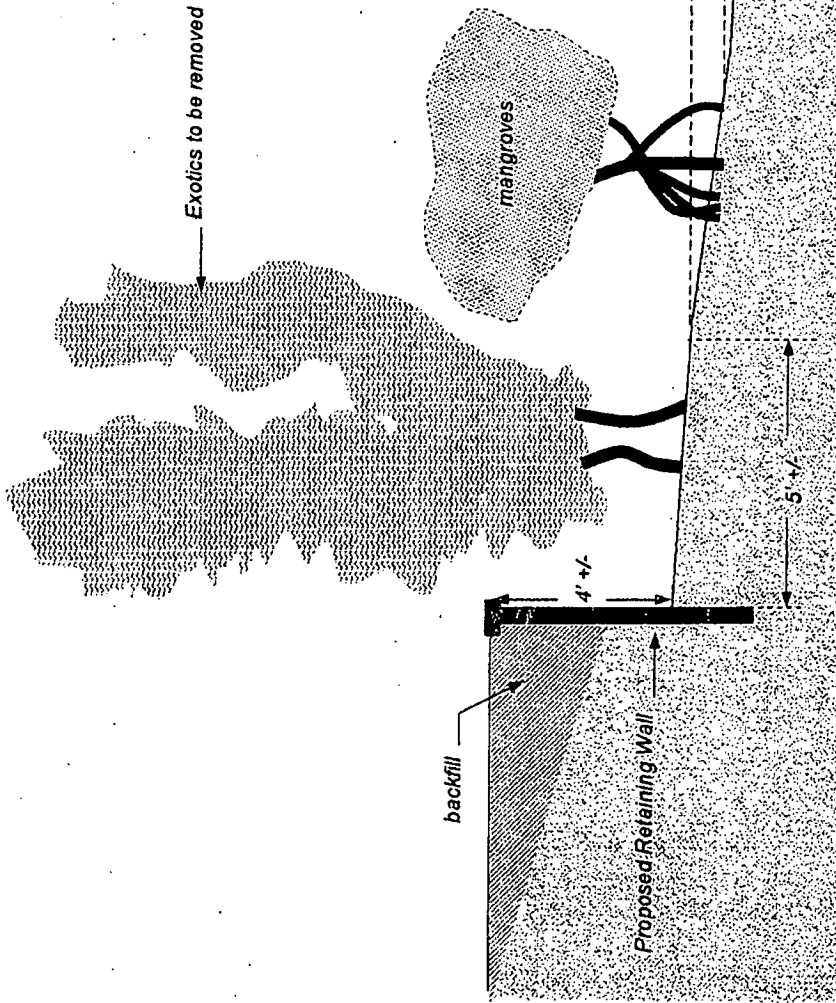
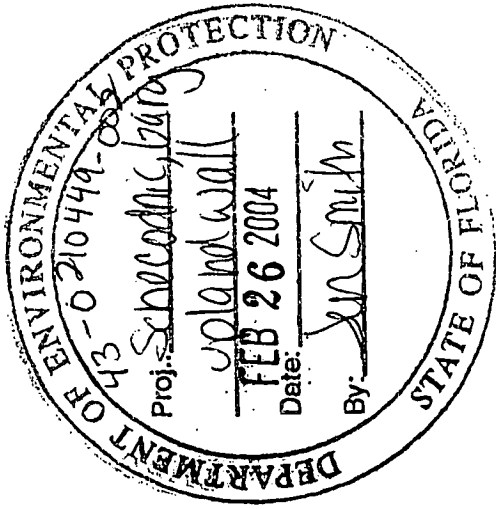
Design & Drawing by:
Jerner & Associates, Inc.
 Environmental Consulting
 110 SW. 5th Street
 Stuart, FL 34994
 Ph. (772) 283-2950/ Fax (772) 283-2760

Scale: 1" = 20'

Date: 01/19/04

Sheet 2 of 4

Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996

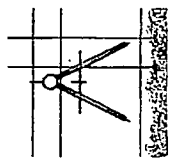


Revised 02/09/04

Scale: 1" = 5'

Date: 01/19/04

Design & Drawing by: DJF
Jerner & Associates, Inc.
 Environmental Consulting
 110 SW. 5th Street
 Stuart, FL 34994
 Ph. (772)283-2950/ Fax (772)283-2760



Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996



Jeb Bush
Governor

MAY 03 2004

southeast district
400 N. Congress Ave., Suite 200
West Palm Beach, Florida 33401

Colleen M. Castille
Secretary

Gary Schecodnic
1 Rivercrest Court
Stuart, FL 34996

Re: File No.: 43-0210449-003
Modification of File No.: 43-0210449-002

Dear Mr. Schecodnic:

This office has completed the review of your request to modify the referenced file number 43-0210449-002. The project description is hereby modified to read as follows. Please note that additions are underlined and deletions are stricken:

On January 28, 2004, we received your application for an exemption to perform the following activity: construct a 140-lineal ft. retaining wall, with two 8' 10"-ft. return walls at each end, at ± 10'-ft. landward of Mean High Water (MHW) and mangroves. The project is located on the St. Lucie River, Class III Waters, adjacent to 570 Manor Drive, Stuart (Section 8, Township 38 South, Range 41 East) in Martin County (N 27° 11' 5.21" / W 80° 15' 35.32").

Your modified project is still exempt from the need for an environmental resource permit pursuant to Chapter 373, Florida Statutes (F.S.), because all of the construction will take place on uplands. The proposed modification is not expected to result in any additional or significant water quality/biological resource degradation.

All conditions and other authorizations included in the original authorization, dated February 26, 2004, still apply to your project. By copy of this letter and the attached drawing(s), we are notifying all necessary parties of the modifications. This letter and accompanying drawing(s) must be attached to the original authorization.

This letter does not relieve you from the responsibility of obtaining any local or federal permits which may be required for the project. If you have any questions, please contact Jennifer Smith at 561/681-6633 or at jennifer.k.smith@dep.state.fl.us. When referring to your project, please use the FDP file name and number listed above.

Sincerely,

Jayne F. Bergstrom
Environmental Manager
Submerged Lands & Environmental
Resources Program

Enclosures

cc: USACOE - Palm Beach Gardens, Sharon Niemczyk
Duane Fike, Jerner & Associates, Inc., dfike@bellsouth.net

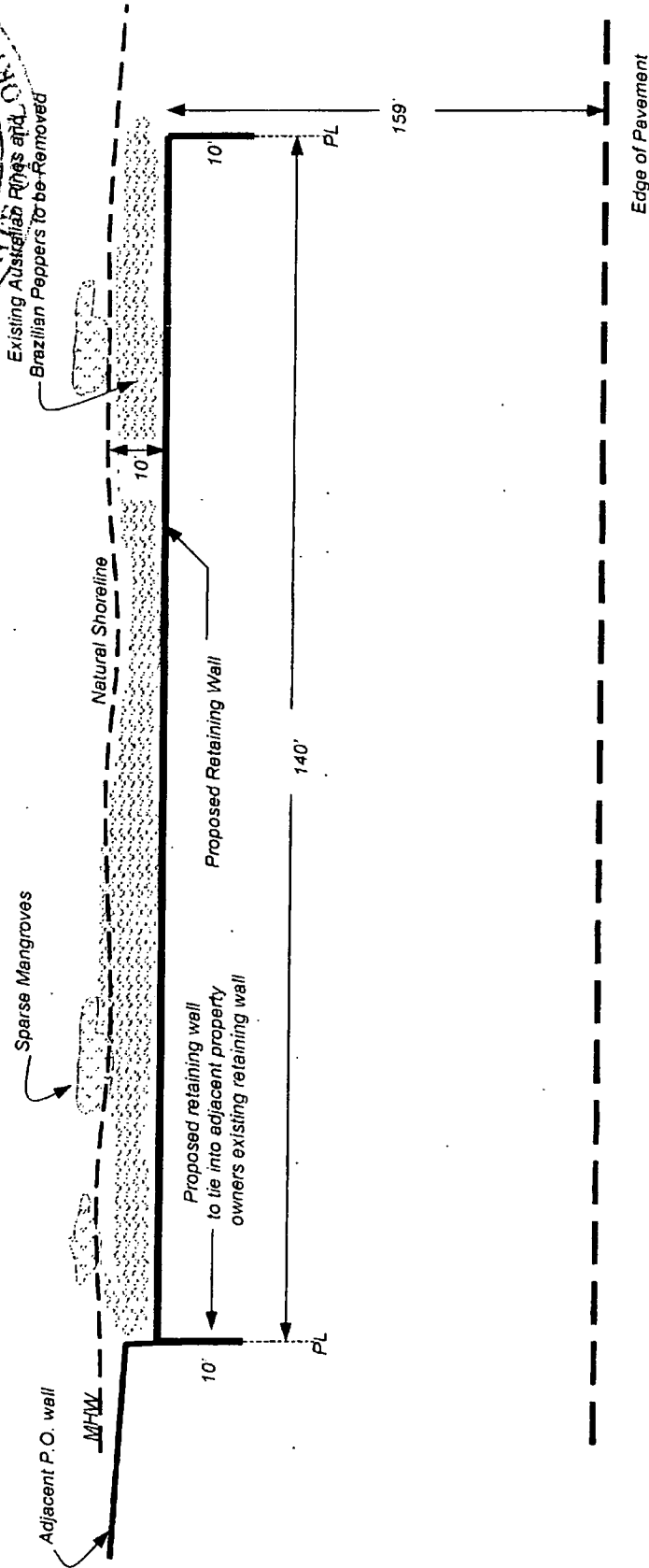
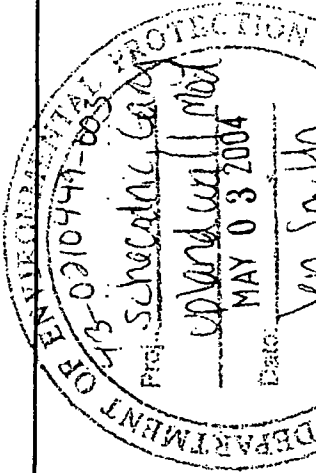
FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 5/9/04
BUILDING OFFICIAL
Gene Simmons

"More Protection, Less Process"

Printed on recycled paper.

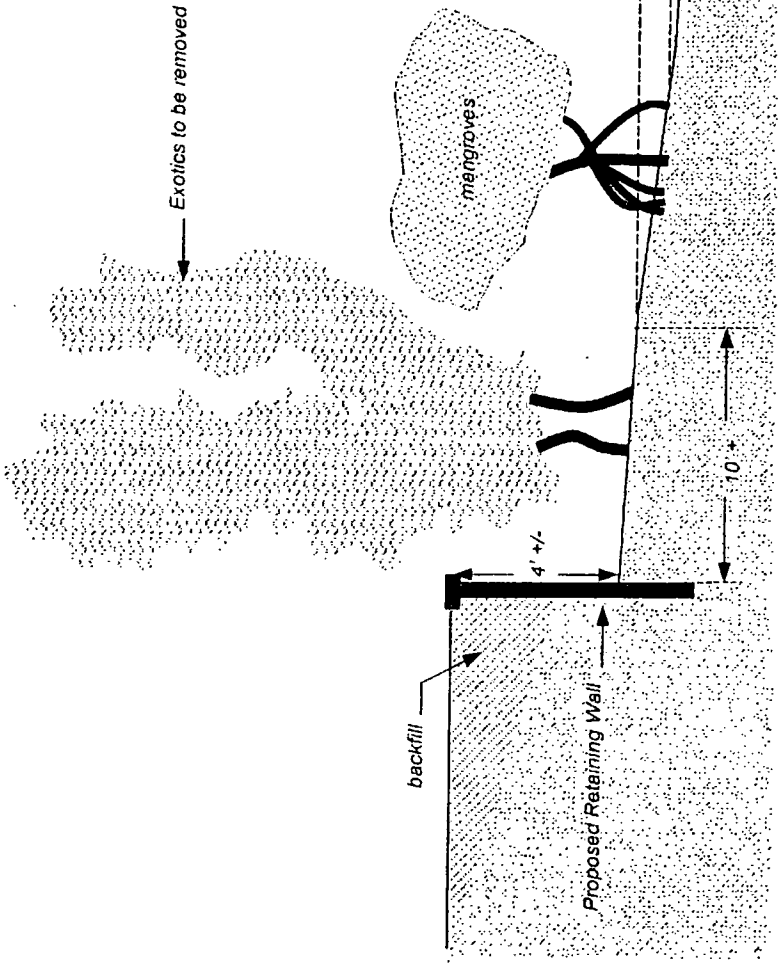
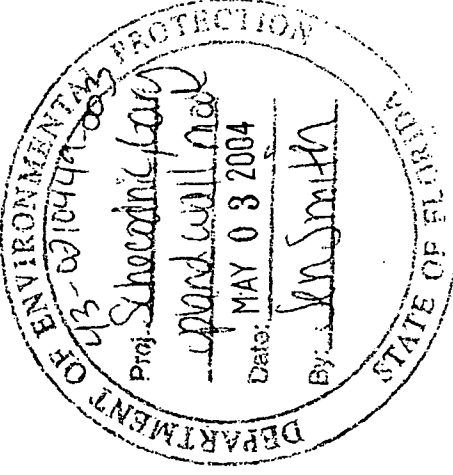


Indian River



Revised 04/14/04

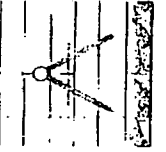
<p>Gary Schecodnic Lot 18 Sewall's Point Road Stuart, FL 34996</p>	<p>Design & Drawing by: Jerner & Associates, Inc. Environmental Consulting 110 SW 5th Street Stuart, FL 34994 Ph. (772) 283-2950 / Fax (772) 283-2760</p>	<p>Scale: 1" = 20'</p>	<p>Sheet 2 of 4</p>
	<p>Date: 01/19/04</p>		



Revised 04/14/04

Scale: 1" = 5'	Sheet 3 of 4
Date: 01/19/04	

Design & Drawing by: DJF
Jerner & Associates, Inc.
 Environmental Consulting
 110 SW 5th Street
 Stuart, FL 34994
 Ph: (772)283-2950; Fax: (772)283-2760



Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996

DO NOT REMOVE THIS TAG

INSPECTOR

DATE: 5/28

[Handwritten signature]

call for an inspection.

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

3/4" WATERBURY UTTERS TO
BE SUPPORTED @ 48" INTERVALS
ALSO BRIDGE WALKWAY
DOCK & BOATLIFT

RETAINING WALL
MISSING FINAL SURVEY

same.

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

ADDRESS: 12 S. SEWALL'S PT. RD.

CORRECTION NOTICE

(772) 287-2455

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

TOWN OF SEWALL'S POINT



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/28, 2004 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6480	WADE	LATH	PASS	PARTIAL - NORTH
1	9 E HIGH PT PINE ORCHARD			ADDITION
6088	REILLY/ 785 SEAWALL'S PT	FINAL WINDOWS	PASS	
4A	TC HOME IMPROV	+ DOORS		
6152	DEWIS 12 PALM ROAD	RENOVATION/FINAL	PASS	CLOSE
4	O/B 12 PALM ROAD			
DEWIS	DEWIS	TREE	PASS	
6607	FOULBE 18 FEDWAY	FINAL KITCHEN	FAIL	
6	O/B			
6739	SCHACODNIC 12 S. SEAWALL'S PT	WALL - EXTER SCHEDULE	FAIL	VEENS SUBMIT
5	TCBI	DOOR FINAL	FAIL	
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun 6/30/07, 2007 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	GREENE	RE-ROOF	PASS	Close
2	26 ISLAND DR WILFRAH			INSPECTOR:
6725	SEILER	SEWER SUTTERS	PASS	Close
8	S KINGSTON G GUESTBEAM			INSPECTOR:
	TREE HOGAN	TREE	PASS	
9	100 S. RIVER RD			INSPECTOR:
6643	SCHACONIC	FINAL DOCK BOWLING	PASS	Close
10	12.5. Searus Pr TCB1			INSPECTOR:
6739	SCHACONIC	FINAL RET WALL	PASS	Close
11	12.5. Searus Pr TCB1			INSPECTOR:
6476	CLIVCO	HEATING - MSTR FALL		
12	31 FIELDWAY OIB	GRAB-BREAKING BATH		INSPECTOR:
6809	RADER	POOL STEEL+DECK PASS		
14	SHERITA GEMAY HAMINGO POOLS	(See Pool) (See 11AM-12 PLEASE)		INSPECTOR:
OTHER:				

DOCK ELECTRICITY

6760

TOWN OF SEWALL'S POINT

MASTER PERMIT NO. _____

BUILDING PERMIT NO. 6760

Date 5/19/04

Building to be erected for SCHECODNIC

Type of Permit Deck Electric

Applied for by Heritage Electric (Contractor)

Building Fee

Subdivision Heritage Place Lot 18 Block

Radon Fee

Address 12 S. Sewall's Point Rd

Impact Fee

Type of structure Deck

A/C Fee

Parcel Control Number: 13841013000001809000

Plumbing Fee

Amount Paid 3500 Check #

Other Fees ()

Total Construction Cost \$ 2280.00

TOTAL Fees 3500

Applicant

Town Building Official

Signed

Signed

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

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

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

INSPECTIONS

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

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

RECEIVED

Date: MAY 13 2004

BY:

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: Schedavis

Phone (Day) _____

(Fax) _____

Job Site Address: 12 S Sewall's Pt Rd

City: Sewall's Pt

State: Fla

Zip: 34996

Legal Desc. Property (Subd/Lot/block): 12 S Sewall's Pt Rd

Parcel Number: 13B 4101 30000 18-090000

Owner Address (if different): _____

Description of Work To Be Done: Wiring of electrical for dock

WILL OWNER BE THE CONTRACTOR? Yes No

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

CONTRACTOR/Company: HERITAGE ELECTRIC

Phone: 334 4675

Fax: na me

Street: 1344 NE Jensen Beach Blvd

City: Jensen Beach

State: Fla

Zip: 34957

State Registration Number: 62001355

State Certification Number: _____

Martin County License Number: ME00094

COST AND VALUES: Estimated Cost of Construction or Improvement: \$ 2280.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: _____

Mechanical: _____

Plumbing: _____

Roofing: _____

State: _____ License Number: _____

State: _____ License Number: _____

State: _____ License Number: _____

State: _____ License Number: _____

ARCHITECT _____

Phone Number: _____

City: _____

State: _____

Zip: _____

ENGINEER _____

Phone Number: _____

City: _____

State: _____

Zip: _____

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

Carport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

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

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

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

OWNER OR AGENT SIGNATURE (required) _____

CONTRACTOR SIGNATURE (required) _____

State of Florida, County of: _____

This the _____ day of _____, 200 _____

by _____ who is personally _____

known to me or produced _____

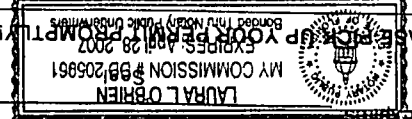
as identification. _____

Notary Public _____

My Commission Expires: _____

Seal

PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL NOTIFICATION - PLEASE PRINT CLEARLY AND IN INK



Notary Public _____

My Commission Expires: _____

As identification. _____

known to me or produced _____

by WALTER GARBER who is personally _____

This the 13th day of May, 200 4

On State of Florida, County of: MARTIN

Handwritten notes: 885-48-0450

© ACORD CORPORATION 1988

ACORD 25-S (7/97)

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE: <i>[Signature]</i> Lawrence E. Kearns	Town of Sewalls Point 1 So. Sewalls Point Road Stuart, FL 34996 Fax to: 772 220-4765
--	---

CERTIFICATE HOLDER: [Blank] ADDITIONAL INSURED: INSURER LETTER: [Blank] CANCELLATION

DESCRIPTION OF OPERATIONS/OCCASIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENTS/SPECIAL PROVISIONS
 Electrical - State of Florida

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	20634782-04	2/01/04	2/01/05	EACH OCCURRENCE \$ 300,000
				FIRE DAMAGE (Any one fire) \$ 100,000
B AUTOMOBILE LIABILITY ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	95-434-704-00	2/01/04	2/01/05	COMBINED SINGLE LIMIT (Per accident) \$ 300,000
				BODILY INJURY (Per person)
C GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$
				OTHER THAN EA ACC \$
EXCESS LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				EACH OCCURRENCE \$
				AGGREGATE \$
WORKERS COMPENSATION AND EMPLOYERS LIABILITY				E.L. EACH ACCIDENT \$
				E.L. DISEASE - EA EMPLOYEE \$
OTHER				E.L. DISEASE - POLICY LIMIT \$

INSURANCE TYPE OF INSURANCE POLICY NUMBER POLICY EFFECTIVE DATE (MM/DD/YY) POLICY EXPIRATION DATE (MM/DD/YY) LIMITS

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.

COVERAGES

PRODUCER Kearns Agency of Florida Inc. P O Box 1849 Jensen Beach, FL 34958	INSURED Heritage Electric Inc. P O Box 1003 Jensen Beach, FL 34958-1003
INSURERS AFFORDING COVERAGE Southern Owners Insurance Co. Auto-Owners Insurance Co.	
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.	
DATE (MM/DD/YY) 3-09-04	

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

PRODUCER (772)334-3181 FAX (772)334-7742

Rick Carroll Insurance Agency
 2160 N.E. Dixie Highway
 P.O. Box 877
 Jensen Beach, FL 34958-0877
 Jensen Beach, FL 34958

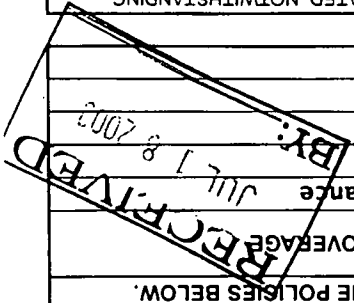
INSURED **Heritage Electric, Inc.**
 PO Box 1003
 Jensen Beach, FL 34958

INSURER A: Harbor Specialty Insurance
 INSURER B:
 INSURER C:
 INSURER D:
 INSURER E:

INSURERS AFFORDING COVERAGE

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.

ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.



INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
----------	-------------------	---------------	----------------------------------	-----------------------------------	--------

<input type="checkbox"/>	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"/>	PROJ				
<input type="checkbox"/>	LOC				
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				
GARAGE LIABILITY					
<input type="checkbox"/>	ANY AUTO				
EXCESS LIABILITY					
<input type="checkbox"/>	OCCUR				
<input type="checkbox"/>	CLAIMS MADE				
<input type="checkbox"/>	DEDUCTIBLE				
<input type="checkbox"/>	RETENTION \$				
WORKERS COMPENSATION AND EMPLOYERS LIABILITY					
		099000004361203	07/10/2003	07/10/2004	
					E.L. EACH ACCIDENT \$ 100,000
					E.L. DISEASE - EA EMPLOYEE \$ 100,000
					E.L. DISEASE - POLICY LIMIT \$ 500,000

	AGGREGATE				
	EACH OCCURRENCE				
	AGG				AUTO ONLY - EA ACCIDENT \$
	EA ACC				OTHER THAN \$
	AGG				AUTO ONLY \$

	AGGREGATE				
	EACH OCCURRENCE				E.L. EACH ACCIDENT \$ 100,000
	AGG				E.L. DISEASE - EA EMPLOYEE \$ 100,000
	EA ACC				E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 THIS CERTIFICATE IS FOR PROOF OF INSURANCE ONLY.

CERTIFICATE HOLDER: [blank] ADDITIONAL INSURED: INSURER LETTER: [blank] 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: **Keith Carroll/LAG** *Keith Carroll*

AC#0453984

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ#L02061101407

DATE	BATCH NUMBER	LICENSE NBR.
06/30/2002	01131171	FR001855

THE ELECTRICAL CONTRACTOR JERRY WAYNE E

Named below has registered under the provisions of Chapter 489 FS

Expiration date: AUG 31, 2004

(INDIVIDUAL MUST MEET ALL LOCAL LICENSING REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)

GARBER, WAYNE E
HERITAGE ELECTRIC INC
P.O. BOX 1003
JENSEN BEACH

FL 34958

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

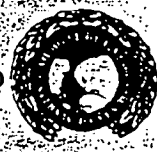
KIM BINKLEY-SEYER
SECRETARY

MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency

MASTER ELECTRICIAN

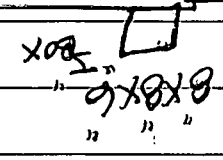
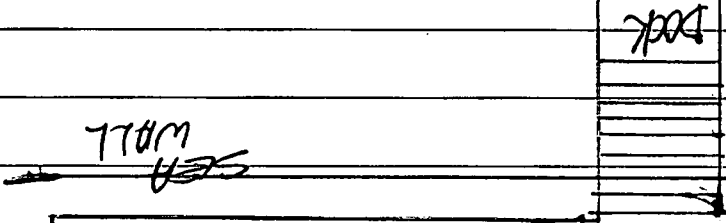
License Number ME0094 Expires 30-SEP-05

GARBER, WAYNE E
HERITAGE ELECTRIC
BOX 1003
JENSEN BEACH, FL 34958



Heritage Electric
P. O. Box 1003
Jensen Beach, FL 34958
334-4675

Gene Simmons
BUILDING OFFICIAL
DATE: 5/17/64
REVIEWED FOR CODE COMPLIANCE
THESE PLANS HAVE BEEN
TOWN OF SEWALL'S POINT
FILE COPY



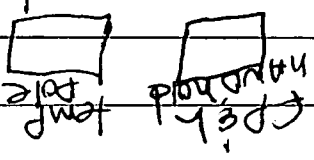
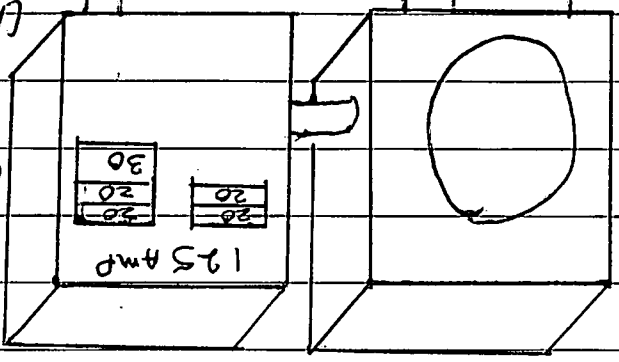
Schedule
Lot 18
S. Seawall Pt Rd

1 1/4" PVC
to "J" Box @
Dock
2 #6 THRU
1 #8 N
1 #10 gr

North Property Line

to EP
2 #1 THRU
1 #2 THRU

MEGA 3R
PANEL
(4) 120V, 20amp
gfs dts for
house construction
(1) 230 240V
to Dock panel



M. Angeline DeWald

Your e-mail reply will be attached with the drawing for reference.

is the retaining wall "designed to withstand lateral earth forces under saturated conditions and to prevent seepage"

Please confirm:

In regard to your drawing: Sheet A-1, Job No. 02.1636

Subject: Schecodnic retaining wall

Sent: Tue, 3 May 2005 14:46:39 -0400

To: dweyant1@aol.com

From: Angeline_DeWald@doh.state.fl.us

-----Original Message-----

05-05-05

DWIGHT R. WEYANT, P.E.

THIS IS TO CONFIRM THAT "THE RETAINING WALL FOR THE SCHECODNIC DRAINFIELD SYSTEM IS DESIGNED TO WITHSTAND LATERAL EARTH FORCES UNDER SATURATED CONDITIONS AND TO PREVENT SEEPAGE"

ANGELINE DEWALD:

Subject: Re: Schecodnic retaining wall

To: DeWald, Angeline M

Sent: Wednesday, May 04, 2005 8:10 AM

From: dweyant1@aol.com

DeWald, Angeline M

MAY 4 2005
HEALTH DEPARTMENT

MAY - 4 2005

RECEIVED

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/21, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
6413	POWERS 70 S. SEWALLS Pt PACIFIC	TIN/AC+METAL	PASS	ROOF WILL HAVE ROOFERS AND WALLS @ 10:00 AM	MW
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
8	12 KNOWLES RD PACIFIC	TREE	PASS		MW
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
1	MENDOZA 144 S. SEWALLS RD	TREE	PASS		MW
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
9	34 N. SEWALLS RD ABEL STEEL WOOD	FENCE	PASS	CLOSE	MW
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
7	39 W. HARTY O/B	FNA S/D	PASS	CLOSE	MW
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
3	12 S. SEWALLS Pt HERITAGE Etc	TEMP POLE	PASS	Called Men stay 8:18 Teresa	MW
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
3	48 RIO VISTA DR BOYSEN	TREE	PASS		MW
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
OTHER:					

6775
FILL

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 6765

Date 5/24/04

Building to be erected for SCATTERDICK

Applied for by DEERWOOD HOMES (Contractor)

Subdivision HERITAGE PLAZA Parcel 18 Block

Address 12 S. SEWALL'S POINT RD

Type of structure FULL

Parcel Control Number: 138410130000018090000

Amount Paid 35.00 Check # 13260 Cash

Total Construction Cost \$ 2000.00

TOTAL Fees 35.00

Town Building Official

Applicant

Signed [Signature]

Signed [Signature]

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

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

MASTER PERMIT NO.

RECEIVED
Date: MAY 27 2004

Town of Sewall's Point
BUILDING PERMIT APPLICATION

OWNER/APPPLICANT NAME: Gray & Rebecca Shtrednic

Job Site Address: 125 Summers Pt Rd
City: Summers Pt State: FL Zip: 32787

Legal Desc. Property (Subd/Lot/Block): Heritage B Lot 18
Parcel Number: 138410150000018090000

Owner Address (if different): 1 Rivercrest Ct
City: STUART State: FL Zip: 34996

DESCRIPTION OF WORK TO BE DONE: FILE PERMIT
WILL OWNER BE THE CONTRACTOR? No Yes
(If no, fill out the Contractor & Subcontractor sections below)

CONTRACTOR/COMPANY: DAITHERED HOUSES
Phone: 334-2177 Fax: 334-5877

Street: 2163 PINE RIDGE ST
City: Jensen Beach State: FL Zip: 34957

State Registration Number: R20052785 State Certification Number: Martin County License Number: 4000085

COST AND VALUES: Estimated Cost of Construction or Improvements: \$2000.00
(Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: State: License Number:
Mechanical: State: License Number:
Plumbing: State: License Number:
Roofing: State: License Number:

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

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

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

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

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

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

OWNER OR AGENT SIGNATURE (required):

State of Florida, County of: Martin
This the 27th day of May, 2004
by Gray & Rebecca Shtrednic who is personally known to me or produced as identification:
Helen R. Morris
My Commission Expires: Expires Sep. 18, 2004
Brambleton # CC 967169
Brambleton Bonding Co., Inc.
Brambleton Bonding Co., Inc.
Brambleton Bonding Co., Inc.
Brambleton Bonding Co., Inc.

CONTRACTOR SIGNATURE (required):

On State of Florida, County of: Martin
This the 27th day of May, 2004
by Helen R. Morris who is personally known to me or produced as identification:
Laura L. O'Brien
My Commission Expires: Expires Sep. 28, 2007
Laura L. O'Brien
Laura L. O'Brien
Laura L. O'Brien
Laura L. O'Brien

PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT FROM THE TOWN OF SEWALL'S POINT

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/11/2003

AGENCY (772)567-1188 FAX (772)778-1416

SCHLITZ INSURANCE SERVICES INC
1717 INDIAN RIVER BLVD

SUITE 300
VERO BEACH, FL 32960

INSURED
DBA: Alan B Morris d/b/a
2163 Pine Ridge St
Jensen Beach, FL 34957

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.

INSURER A:	INSURERS AFFORDING COVERAGE
INSURER B:	NAIC #
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.

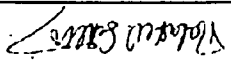
INSUR ADPT LTR INSURD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY	04GL00052394	06/30/2003	06/30/2004	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	COMMERCIAL GENERAL LIABILITY				
	ANY AUTO				
	ALL OWNED AUTOS				
	SCHEDULED AUTOS				
	NONOWNED AUTOS				
	PROPERTY DAMAGE (Per accident)				\$
	BODILY INJURY (Per person)				\$
	BODILY INJURY (Per accident)				\$
	CONFINED SINGLE LIMIT (Ea accident)				\$
	EXCESS/UMBRELLA LIABILITY				
	ANY AUTO				
	EXCESS/UMBRELLA LIABILITY				
	CLAIMS MADE				
	RETENTION				
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY				
	ANY PROFESSIONAL SERVICES/EXECUTIVE OFFICER/MEMBER EXCLUDED?				
	EMPLOYERS LIABILITY				
	OTHER SPECIAL PROVISIONS below				
	OTHER				

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

--	--	--	--	--	--

CERTIFICATE HOLDER

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER 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 INSURER, ITS AGENTS OR REPRESENTATIVES.	AUTHORIZED REPRESENTATIVE  Robert Schiltz Jr./LAR
---	--

Town of Sewell's Point
1 South Sewell's Point Road
Sewell's Point, FL 34996

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

@ACORD CORPORATION 1988

TOWN OF SEWALLS POINT
1 SEWALLS POINT ROAD
STUART, FL 34996

CERTIFICATE HOLDER

ADDITIONAL INSURED: INSURER LETTER: _____

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
Keith Carroll/LAG
Keith Carroll

THIS CERTIFICATE IS FOR PROOF OF INSURANCE ONLY.

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

TYPE OF INSURANCE	POLICY NUMBER	DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> POLICY [] PRO [] LOC	6FR13UB-9546A20-5-04	04/22/2004	04/22/2005	EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
VEHICLE 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 <input type="checkbox"/> AUTO ONLY - EA ACCIDENT \$ <input type="checkbox"/> EA ACC \$ <input type="checkbox"/> OTHER THAN AGG \$				COBURNED SINGLE LIMIT (ea accident) \$ BODY INJURY (per person) \$ BODY INJURY (per accident) \$ PROPERTY DAMAGE (per accident) \$
EMPLOYERS LIABILITY <input type="checkbox"/> EXCESS LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$	6FR13UB-9546A20-5-04	04/22/2004	04/22/2005	EL EACH ACCIDENT \$ EL DISEASE - EA EMPLOYEE \$ EL DISEASE - POLICY LIMIT \$
OTHER				

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.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY) 05/17/2004

PRODUCER (772)334-3181
 RICK CARROLL Insurance Agency
 2160 N.E. Dixie Highway
 P.O. Box 877
 Jensen Beach, FL 34958-0877

INSURED: **Draftwood Homes, LLC**
 DBA: Draftwood Homes & Improvements
 2163 Pine Ridge Street
 Jensen Beach, FL 34957

INSURERS AFFORDING COVERAGE

INSURER A: FRPCUA
 INSURER B:
 INSURER C:
 INSURER D:
 INSURER E:

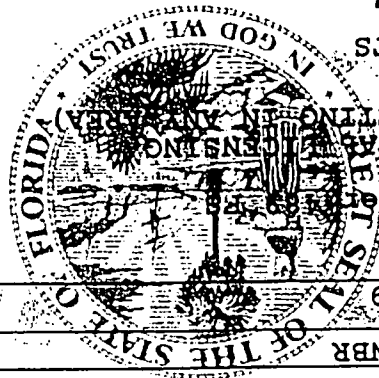
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JEB BUSH
GOVERNOR

DIANE CARR
SECRETARY

DISPLAY AS REQUIRED BY LAW

MORRIS, ALAN B
DRIFTWOOD HOMES & IMPROVEMENTS
2163 NE PINE RIDGE STREET
JENSEN BEACH
FL 34957



The RESIDENTIAL CONTRACTOR
Named below HAS REGISTERED
Under the provisions of Chapter
489, F.S., effective August 31, 2005.
(INDIVIDUAL MUST MEET ALL LOCAL
REQUIREMENTS PRIOR TO CONTRACTING
IN ANY AREA)

DATE	BATCH NUMBER	LICENSE NBR
08/07/2003	030083054	RR0056789

AC# 1001407
STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
SEQ# L03080701826

DETACH HERE

AC# 1001407
STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
RR0056789
08/07/2003 030083054
REGISTERED RESIDENTIAL CONTR
MORRIS, ALAN B
DRIFTWOOD HOMES & IMPROVEMENTS
(INDIVIDUAL MUST MEET ALL LOCAL
LICENSING REQUIREMENTS PRIOR
TO CONTRACTING IN ANY AREA)
HAS REGISTERED under the provisions of Ch. 489
Expiration date: AUG 31, 2005 L03080701826

MORRIS, ALAN B
DRIFTWOOD HOMES & IMPROVEMENTS
2163 NE PINE RIDGE STREET
JENSEN BEACH
FL 34957

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALAHASSEE
FL 32399-0783
(850) 487-1395



7200

DOCK REPAIR

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 7200

Date 1/14/05

Building to be erected for SCHECOBOLIC Type of Permit DOCK REPAIR

Applied for by O/B (Contractor) Building Fee 240.00

Subdivision Heritage Park Lot 18 Block 18 Radon Fee _____

Address 12 S. Sewall's Pt Rd Impact Fee _____

Type of structure Dock A/C Fee _____

Electrical Fee _____

Plumbing Fee _____

Roofing Fee 24.00 Parcel Control Number: 13841013000018090000

Amount Paid _____ Check # _____ Cash _____ Other Fees (10% Plan Review) 24.00 TOTAL Fees 330.00

Total Construction Cost \$ 2400.00

Signed [Signature] Applicant
 Signed [Signature] Town Building Official

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

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

MASTER PERMIT NO. _____

Alton Renewal for 7mo \$50
 date of m/c # 1876

TOWN OF SEWALL'S POINT

MASTER PERMIT NO. _____

BUILDING PERMIT NO. 1200

Date 1/14/05

Building to be erected for SCHECORDNIC Type of Permit Deck Repair

Applied for by O/B (Contractor) Building Fee 240.00

Subdivision Heritage Park Lot 18 Block _____

Address 12 S. Sewalls Pt Rd

Type of structure Deck

Parcel Control Number: 13841313000015090000

Roofing Fee 24.00

Plumbing Fee _____

Electrical Fee _____

Amount Paid _____ Check # _____ Cash _____ Other Fees (10% Plan Review) 24.00 TOTAL Fees 330.00

Signed [Signature] Applicant Signed [Signature] Town Building Official

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

UNDERGROUND PLUMBING	UNDERGROUND GAS
UNDERGROUND MECHANICAL	UNDERGROUND ELECTRICAL
TEMP WALL FOOTING	FOOTING
LAB	TIE BEAM/COLUMNS
ROOF SHEATHING	WALL SHEATHING
RUSS ENGINE WINDOW/DOOR BUCKS	LATH
ROOF TIN TAG/METAL	ROOF-IN-PROGRESS
PLUMBING ROUGH-IN	ELECTRICAL ROUGH-IN
MECHANICAL ROUGH-IN	GAS ROUGH-IN
RAMING	EARLY POWER RELEASE
FINAL PLUMBING	FINAL ELECTRICAL
FINAL MECHANICAL	FINAL GAS
FINAL ROOF	BUILDING FINAL

JAN 14 2005

BY:

Date: 1/14/05

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: 486-2931

OWNER/TITLEHOLDER NAME: Larry Baker Scheduling Phone (Day) 172-781-2515 (Fax) same

Job Site Address: 12 So Sewalls Pt Rd City: Stuart State: FL Zip: 34994

Legal Desc. Property (Subd/Lot/Block): Lot 18, Heritage Plat Book 10 Parcel Number: 138410130000018090000

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

Description of Work To Be Done: retaining wall, block, plat form - lift repair

WILL OWNER BE THE CONTRACTOR?

YES NO

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/COMPANY: Lee Haymes

Phone: 286 9281 Fax: _____

Street: _____ State: _____ City: _____ Zip: _____

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

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT

N/A

Lic #: _____ Phone Number: _____

Street: _____ State: _____ City: _____ Zip: _____

ENGINEER

Lic# _____ Phone Number: _____

Street: _____ State: _____ City: _____ Zip: _____

AREA SQUARE FOOTAGE - SEWER - ELECTRIC

Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: _____

Total Under Roof _____

Wood Deck: _____

Accessory Building: _____

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

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

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.

CONTRACTOR SIGNATURE (required)

OWNER OR AGENT SIGNATURE (required)

On State of Florida, County of: _____ This the _____ day of _____, 2005

by _____ who is personally

known to me or produced

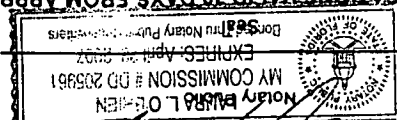
As identification, _____

My Commission Expires: _____

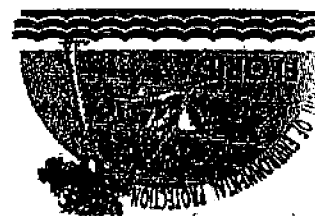
Notary Public

Seal

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



Signature of contractor/owner: Larry Baker
Signature of notary: Barbara L. O'Brien
Date: 1/14/05
State of Florida, County of: Martin
This the 14th day of JANUARY, 2005
by Larry Baker who is personally
known to me or produced
As identification, [Signature]
My Commission Expires: _____



Job Bush
Governor

Department of Environmental Protection

Port St. Lucie Branch Office
1801 SE Hillmoor Drive, Suite C-204
Port St. Lucie, FL 34952
(772)398-2806 Fax # (772)398-2815

David B. Struhs
Secretary

JUL 25 2003

7003 0500 0000 3154 5014

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Gary Schecodnic
1 Rivercrest Court
Stuart, FL 34996

Dear Mr. Schecodnic:

Enclosed is Standard General Permit Number 43-0210449-001 issued pursuant to Part IV of Chapter 373, Florida Statutes (F.S.), and Title 62, Florida Administrative Code.

Appeal rights for you as the permittee and for any affected third party are described in the text of the permit along with conditions which must be met when permitted activities are undertaken. Please review this document carefully to ensure compliance with both the general and specific conditions contained herein. As the permittee, you are responsible for compliance with these conditions. Please ensure that all construction personnel associated with your activity review and understand the approved drawings and conditions. Failure to comply with this permit may result in liability for damages and restoration, and the imposition of civil penalties up to \$10,000 per violation per day, pursuant to Sections 403.141 and 403.161, F.S.

In addition, please ensure the construction commencement notice and all other reporting conditions are forwarded to the appropriate office as indicated in the specific conditions. A permit review checklist is enclosed to assist you in tracking the monitoring and reporting requirements outlined in the permit.

If you have any questions about this document, please contact me at the phone number listed above.

Sincerely,

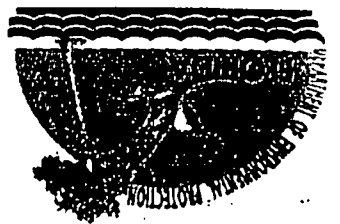
REPAIR WORK FOR HURRICANE DAMAGE

Mark Youmans
Environmental Specialist
Submerged Lands and Environmental Resources Program
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 11/14/05

Enclosure

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 3/17/04

Gene Simmons "More Protection, Less Process"
BUILDING OFFICIAL



JeB Bush
Governor

Department of Environmental Protection

Port St. Lucie Branch Office
1801 SE Hillmoor Drive
Suite C-204
Port St. Lucie, FL 34952

(772)398-2806 Fax # (772)398-2815

David B. Struhs
Secretary

PERMITTEE/AUTHORIZED ENTITY:

Gary Schecodnic
1 Rivercrest Court
Stuart, FL 34996

Permit/Authorization No.: 43-0210449-001
Date of Issue: July 25, 2003
Expiration Date of: July 25, 2008
County: Martin County
Project: Private single family dock

CONSOLIDATED ENVIRONMENTAL RESOURCE PERMIT AND SOVEREIGN SUBMERGED LANDS AUTHORIZATION

This permit is issued under the authority of Part IV of Chapter 373, Florida Statutes (F.S.), and Title 62, Florida Administrative Code (F.A.C.). The activity is not exempt from the requirement to obtain an Environmental Resource Permit Pursuant to Operating Agreements executed between the Department and the water management districts, as referenced in Chapter 62-113, F.A.C., the Department is responsible for reviewing and taking final agency action on this activity.

ACTIVITY DESCRIPTION:

The purpose of the project is to construct a 2,128 square foot dock with an access measuring 4' wide by 492' long with handrails and ending in a platform measuring 8' by 20' one associated mooring area which can accommodate a boatlift. The entire access walkway shall be constructed with handrails and at an elevation of at least 5' above mean high water.

ACTIVITY LOCATION:

The project is located at P.I.N. 1-38-41-013-000-00180-90, Lot 18, S. Indian River Drive, in the Jensen Beach to Jupiter Inlet Aquatic Preserve (O.F.W.), Class III Waters of the State (Section 1, Township 38 South, Range 41 East), Jensen Beach, Martin County, Latitude 27° 12' 4.97"N, Longitude 80° 11' 56.60"W.

This permit also constitutes certification of compliance with water quality standards under Section 401 of the Clean Water Act, 33 U.S.C. 1341.

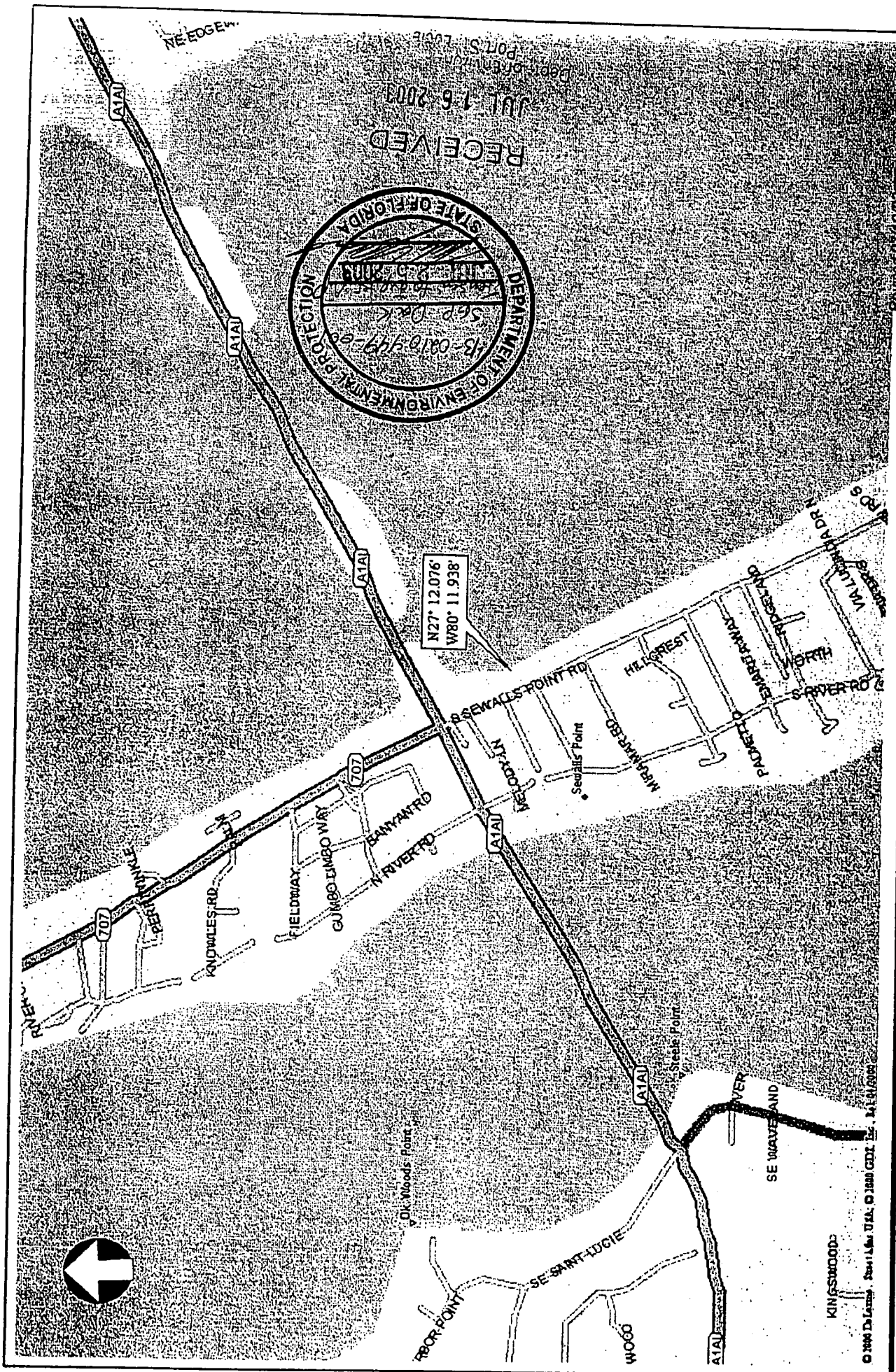
PROPRIETARY REVIEW: GRANTED

This activity also requires a proprietary authorization, as the activity is located on sovereign submerged lands owned by the Board of Trustees of the Internal Improvement Trust Fund, pursuant to Article X, Section 11 of the Florida Constitution, and Sections 253.002 and 253.77, F.S. The activity is not exempt from the need to obtain a proprietary authorization. The Department has the responsibility to review and take final action on this request for proprietary authorization in accordance with Section 18-21.0051, and the Operating Agreements executed between the Department and the water management districts, as referenced in Chapter 62-113, F.A.C. In addition to the above, this proprietary authorization has been reviewed in accordance with Chapter 253 and 258 F.S., Chapter 18-20, 18-21, and Section 62-343.075, F.A.C.

As staff to the Board of Trustees, the Department has reviewed the activity described above, and has determined that the activity qualifies for a consent to use sovereign, submerged lands, as long as the work performed is located within the boundaries as described herein and is consistent with the terms and conditions herein. Therefore, consent is hereby granted, pursuant to Chapter 253.77, F.S., to perform the activity on the specified sovereign submerged lands.

"More Protection, Less Process"

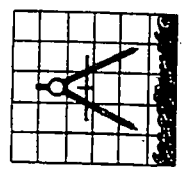
Printed on recycled paper.



Revised 07/10/03

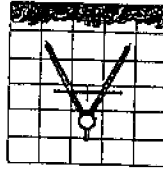
Scale: _____
 Date: 02/06/03

Design & Drawing by:
Jerner & Associates, Inc.
 Environmental Consulting
 110 SW 5th Street
 Stuart, FL 34994
 Ph: (772)283-2950 / Fax (772)283-2760



Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996

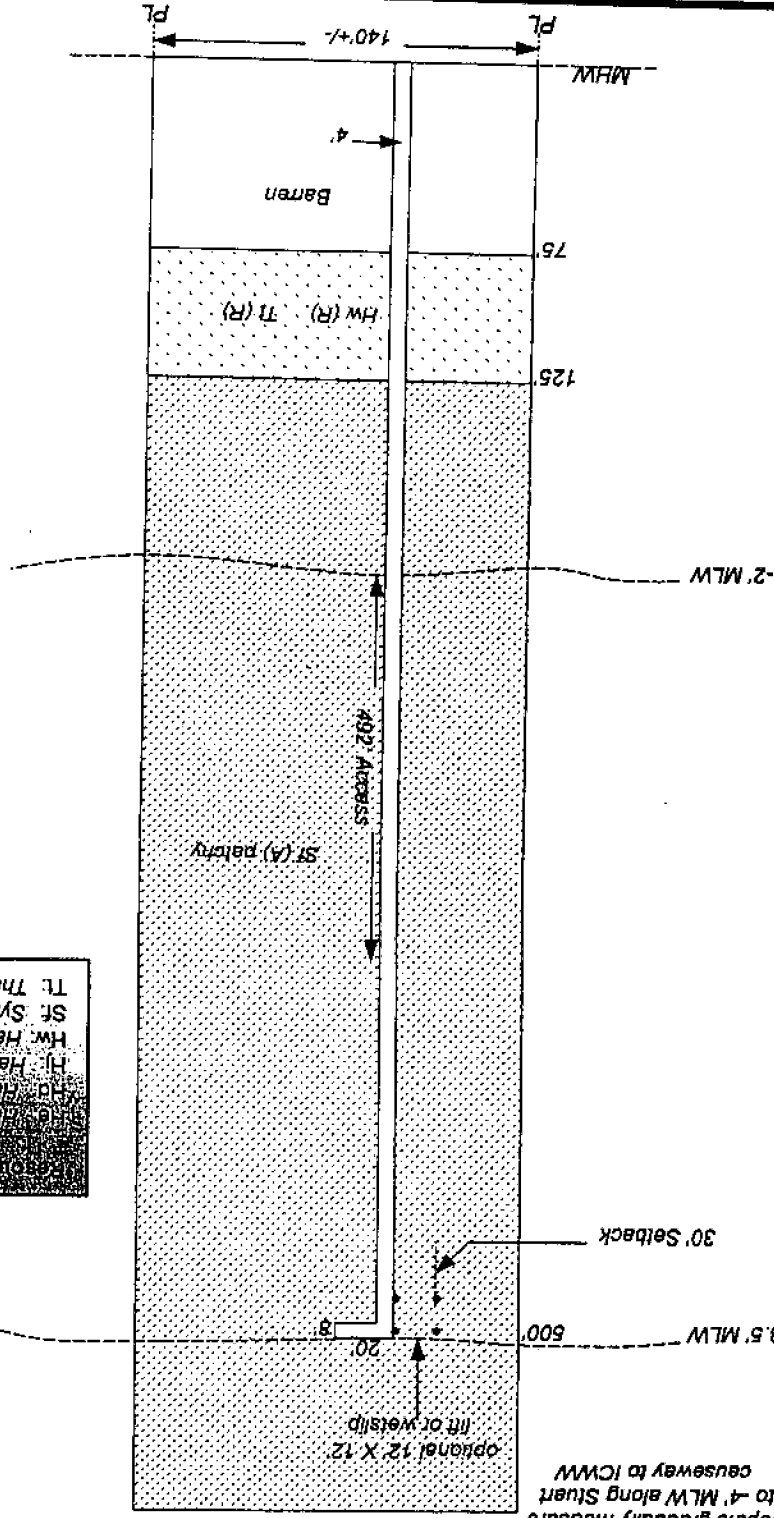
Gary Schecodnic
 Lot 18 Sewall's Point Road
 Stuart, FL 34996



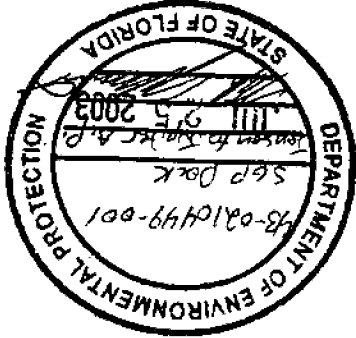
Design & Drawing by:
 Jerner & Associates, Inc.
 Environmental Consulting
 110 SW 5th Street
 Stuart, FL 34994
 Ph. (772)283-2950 / Fax (772)283-2760

Scale: 1" = 75'
 Date: 02/06/03
 Sheet 2 of 4

Revised 07-10-03



REVIEWED BY
 JOHN CLARK
 PROFESSIONAL ENGINEER
 OF FLORIDA
 INTEGRITY
 OF STRUCTURAL



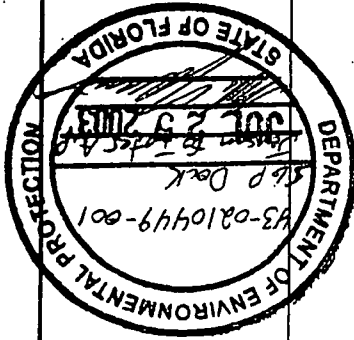
Seagrass Survey Performed on
 01/31/03 @ 1200 hrs.
 by Lisa Perrone & Duane Fikel
 Jerner & Associates, Inc.

TL: <i>Thalassia testudinum</i>
St: <i>Syringodium filiforme</i>
Hw: <i>Halodule wrightii</i>
Hj: <i>Halophila johnsonii</i>
Hd: <i>Halophila decipiens</i>
Hl: <i>Halodule sp.</i>
Hm: <i>Halodule sp.</i>
Hn: <i>Halodule sp.</i>
Other: <i>Halodule sp.</i>
R: Rare
O: Occasional
F: Frequent

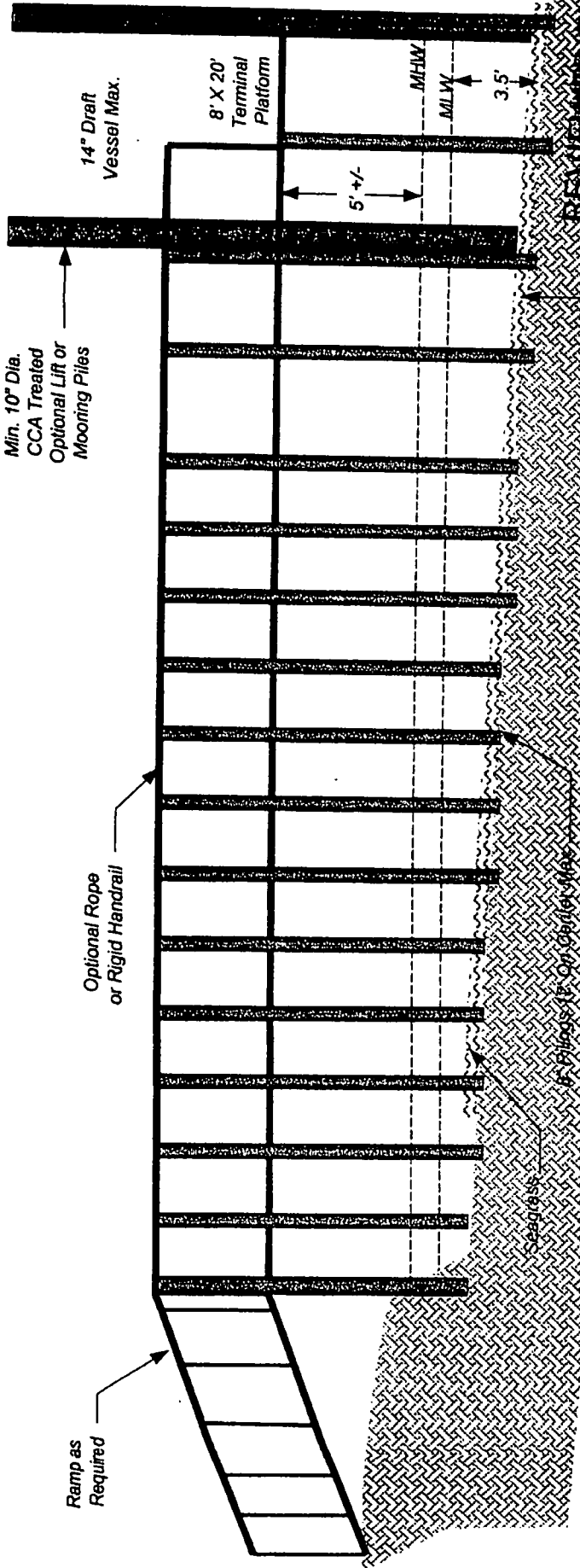


Indian River

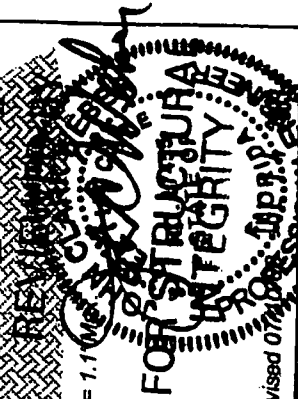
Flood/Ebb



500' Over All Length



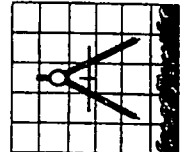
Seagrass Ht. = 1.1 M



Revised 07/11/03

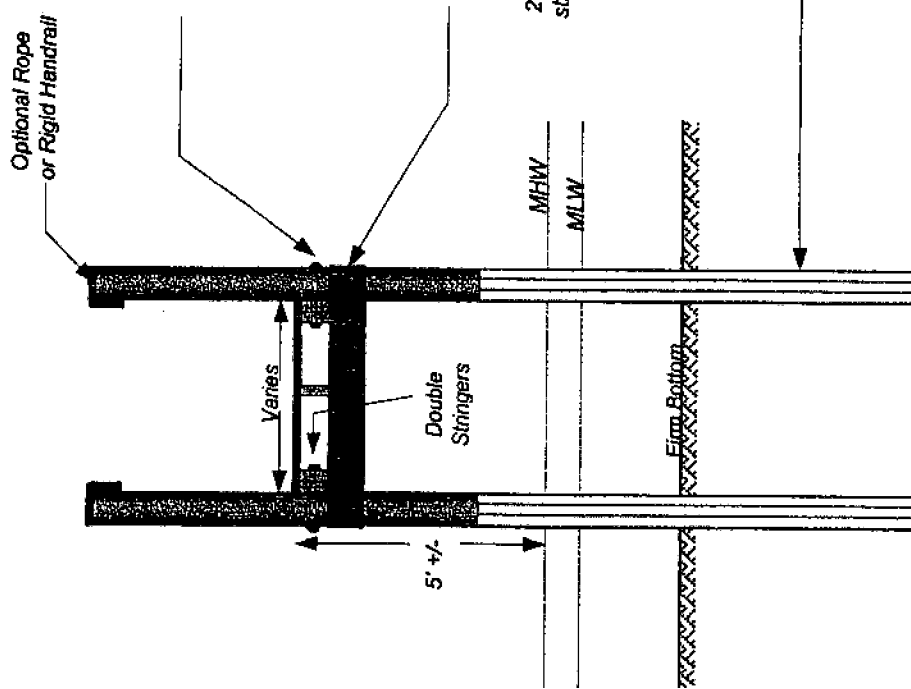
Scale: Show in
Date: 02/06/03
Sheet 3 of 4

Design & Drawing by:
Jerner & Associates, Inc.
Environmental Consulting
110 SW 3rd Street
Stuart, FL 34994
Ph: (772)283-2950/ Fax (772)283-2760

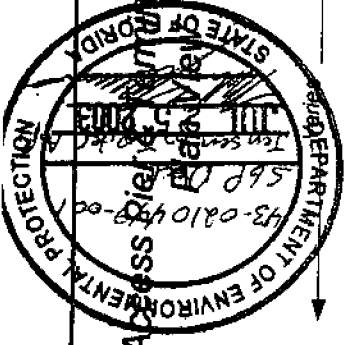


Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996

Access Pier & Terminal Detail Section Thru



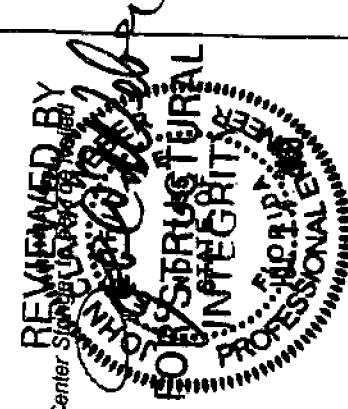
Pilings jettied to a minimum depth of 6' and as necessary to provide adequate bearing and stability



Access Pier & Terminal Detail

Deck Fasteners #16 SS
Ring Shank Nails or SS
Screws, two per stringer

12' O.C. Max.



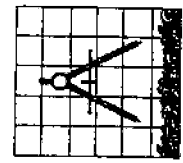
Stringer Count	Stringer Width
Two	<4' Wide
Three	4' - 6' Wide
Four	8' Wide

* See plan details for access & terminal dimensions

Revised 07/10/03

Scale: 1" = 4'
Date: 02/06/03

Sheet 4 of 4



Design & Drawing by:
Jerner & Associates, Inc.
Environmental Consulting
110 SW 3rd Street
Stuart, FL 34994
Ph: (772)283-2950 / Fax: (772)283-2760

Gary Schecodnic
Lot 18 Sewall's Point Road
Stuart, FL 34996

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 2007

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8393	Hammond 23 Rio Vista Dr	Final	PASS		OM
2	Schellen				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8064	Schroeder 125 Sewall Pt	Final	PASS		OM
5	Deming Bros 125 Sewall Pt				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
7400	Sewall Pt	Final	PASS		OM
5	125 Sewall Pt O/B				OM
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8504	Harmony 23 Rio Vista	Final	PASS		OM
2	Stout Lane				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8177	Vitae 13 Kingswood	Final	PASS		OM
7	13 Kingswood Curtis	(Med Care)			OM
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8500	10 Cedar 9 N River Rd	Day-in	FAIL		OM
8	9 N River Rd Hickie				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8477	Hepworth 8 Rio Vista	Insulation	PASS		OM
3	8 Rio Vista Sandcastles				
OTHER:					

SFR

7584

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 7584

Date 6/1/05

Building to be erected for SCARLETTONIC
Applied for by DEERWOOD HOMES
Subdivision Heritage Place Lot 18 Block _____
Address 12 S. Sewall's Point Rd

Type of structure SFR
Radon Fee 4,598.20
Impact Fee 62.37
A/C Fee 120.00
Electrical Fee 120.00
Plumbing Fee 120.00
Roofing Fee 120.00

Parcel Control Number: 0138410130000018090000
Amount Paid 17,057.77 Check # 14505 Cash
Other Fees (10% PR.) 1,123.20
TOTAL Fees 17,015.77

Total Construction Cost \$ 1,120,000.

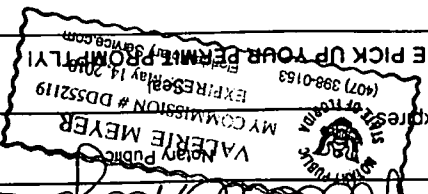
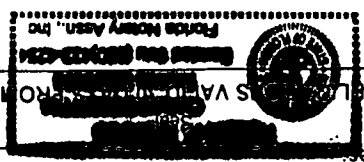
Signed _____ Applicant
Signed _____ Town Building Official

PERMIT

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> BUILDING SFR | <input checked="" type="checkbox"/> ELECTRICAL | <input type="checkbox"/> TREE REMOVAL |
| <input checked="" type="checkbox"/> PLUMBING | <input checked="" type="checkbox"/> ROOFING | <input type="checkbox"/> HURRICANE SHUTTERS |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input type="checkbox"/> DEMOLITION | <input type="checkbox"/> TEMPORARY STRUCTURE |
| <input type="checkbox"/> SCREEN ENCLOSURE | <input type="checkbox"/> HURRICANE SHUTTERS | <input type="checkbox"/> STEMWALL |
| <input type="checkbox"/> FILL | <input type="checkbox"/> ROOFING | <input type="checkbox"/> ROOFING |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ROOFING | <input type="checkbox"/> ROOFING |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input type="checkbox"/> ROOFING | <input type="checkbox"/> ROOFING |
| <input type="checkbox"/> SCREEN ENCLOSURE | <input type="checkbox"/> ROOFING | <input type="checkbox"/> ROOFING |
| <input type="checkbox"/> FILL | <input type="checkbox"/> ROOFING | <input type="checkbox"/> ROOFING |
| <input type="checkbox"/> TREE REMOVAL | <input type="checkbox"/> ROOFING | <input type="checkbox"/> ROOFING |

INSPECTIONS

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



Town of Sewall's Point BUILDING PERMIT APPLICATION

Date: 5/5/05

Permit Number: _____

OWNER/TITLEHOLDER NAME: Gray & Green Scatterplot Phone (Day) 486-2931 (Fax) _____

Job Site Address: 12 S. Sewalls Pt Rd City: Sewalls Pt State: FL Zip: 34986

Legal Desc. Property (Subd/Lot/Block): LOT 18, Haimme Place Parcel Number: 613841013000001805

Owner Address (if different): 1 River Crest Ct City: Stuart State: FL Zip: 34996

Description of Work To Be Done: NEW SINGLE FAMILY RESIDENCE

WILL OWNER BE THE CONTRACTOR? YES NO

Estimated Cost of Construction or Improvements: \$ 1,20,00.00
(Notice of Commencement needed over \$2500)
Estimated Fair Market Value prior to improvement: \$ _____
Is improvement cost 50% or more of Fair Market Value? YES NO

CONTRACTOR COMPANY: DITWOOD HOMES Phone: 334-2577 Fax: 334-5877
City: Jensen Bch State: FL Zip: 34957

State Registration Number: 22005175 State Certification Number: _____
Martin County License Number: H400089

SUBCONTRACTOR INFORMATION:
Electrical: Haimme Electric License Number: _____
Mechanical: Associated Air License Number: _____
Plumbing: South Park Plumbing License Number: _____
Roofing: Pacific Roofing License Number: _____

ARCHITECT: M.A. Corson Lic # MR51665 Phone Number: 223-8227
City: Stuart State: FL Zip: 34957

ENGINEER: FLD Shaffer Lic # 26657 Phone Number: 220-4990
City: Stuart State: FL Zip: 34957

AREA SQUARE FOOTAGE - SEWER - ELECTRIC: _____
Living: 4778 Garage: 947 Covered Patios: 492 Screened Porch: _____

Caport: _____ Total Under Roof: 6237
Wood Deck: _____ Accessory Building: _____

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

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

OWNER OR AGENT SIGNATURE (required): _____
State of Florida, County of: _____ day of _____, 2005

by Gregory Sonez who is personally known to me or produced as identification: _____
This the _____ day of _____, 2005

CONTRACTOR SIGNATURE (required): _____
On State of Florida, County of: _____ day of _____, 2005

My Commission Expires: _____
My Commission # DD52119
Valerie Meyer, Notary Public

PERMIT APPLICATIONS VALENTINE FROM PROMPTLY
Florida Notary Assn., Inc.

7854

ACORD CERTIFICATE OF LIABILITY INSURANCE

PRODUCER (772) 567-1188 FAX (772) 778-1416

SCHLITT INSURANCE SERVICES INC

1717 INDIAN RIVER BLVD

SUITE 300

VERO BEACH, FL 32960

INSURED Driftwood Homes, LLC

DBA: Alan B Morris d/b/a

2163 Pine Ridge St

Jensen Beach, FL 34957

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.

INSURERS AFFORDING COVERAGE

INSURER A: Mid-Continent Casualty Company

INSURER B:

INSURER C:

INSURER D:

INSURER E:

DATE (MM/DD/YYYY)
08/03/2004

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 ADD'LTR NSR

TYPE OF INSURANCE

POLICY NUMBER

POLICY EFFECTIVE DATE (MM/DD/YY)

POLICY EXPIRATION DATE (MM/DD/YY)

LIMITS

GENERAL LIABILITY

COMMERCIAL GENERAL LIABILITY

CLAIMS MADE OCCUR

GEN'L AGGREGATE LIMIT APPLIES PER:

POLICY PRO-JECT LOC

AUTOMOBILE LIABILITY

ANY AUTO

ALL OWNED AUTOS

SCHEDULED AUTOS

HIRE AUTOS

NON-OWNED AUTOS

PROPERTY DAMAGE (Per accident)

BODILY INJURY (Per person)

BODILY INJURY (Per person)

COMBINED SINGLE LIMIT (Per accident)

GARAGE LIABILITY

ANY AUTO

EXCESS/UMBRELLA LIABILITY

OCCUR CLAIMS MADE

DEDUCTIBLE

RETENTION \$

WORKERS COMPENSATION AND EMPLOYERS' LIABILITY

ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?

OTHER

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

CANCELLATION

CERTIFICATE HOLDER

Town of Sewell's Point
1 South Sewell's Point Road
Sewell's Point, FL 34996

AUTHORIZED REPRESENTATIVE

Robert Schmitt Jr./LAR

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

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

©ACORD CORPORATION 1988

Charles J. Clarke
 AUTHORIZED REPRESENTATIVE

TOWN OF SEMALLS POINT
 1 SEMALLS 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 WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO MAIL 10 DAYS LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

CANCELLATION

CERTIFICATE HOLDER

THIS REPLACES ANY PRIOR CERTIFICATE ISSUED TO THE CERTIFICATE HOLDER AFFECTING WORKERS COMP COVERAGE.

MINIMUM PREMIUM POLICY

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	DATE (MM/DD/YY)	DATE (MM/DD/YY)	LIMITS
A	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY	(UB-7261B31-6-05)	04-22-05	04-22-06	EACH ACCIDENT \$ 100,000 DISEASE - POLICY LIMIT \$ 500,000 DISEASE - EACH EMPLOYEE \$ 100,000
	EXCESS LIABILITY				UMBRELLA FORM OTHER THAN UMBRELLA FORM
	GARAGE LIABILITY				ANY AUTO AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	AUTOMOBILE LIABILITY				ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS PROPERTY DAMAGE \$ BODILY INJURY (Per Person) \$ BODILY INJURY (Per Accident) \$ COMBINED SINGLE LIMIT \$
	GENERAL LIABILITY				GENERAL AGGREGATE \$ PRODUCTS-COMP/OP AGG. \$ PERSONAL & ADV. INJURY \$ EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED. EXPENSE (Any one person) \$

COVERAGES

INSURED	COMPANIES AFFORDING COVERAGE
DRIFTWOOD HOMES LLC DBA DRIFTWOOD HOMES & IMPROVEMENTS 2163 PINE RIDGE STREET JENSEN BEACH FL 34957	COMPANY A FLORIDA W.C. JUA COMPANY B COMPANY C COMPANY D

PRODUCER
 RICK CARROLL INS AGCY
 2160 NE DIXIE HWY

DATE (MM/DD/YY)
 05-11-05

ACCORD CERTIFICATE OF INSURANCE

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.



ACORD
CERTIFICATE
OF
INSURANCE
(On Reverse)

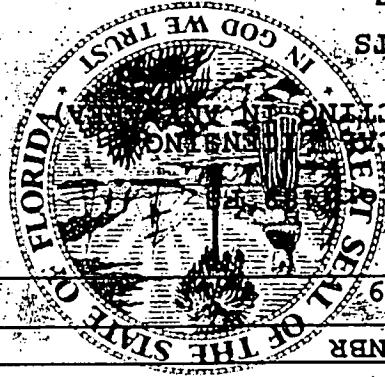
TOWN OF SEWALLS POINT
1 SEWALLS PT. ROAD
STUART FL 34996

FLORIDA WORKERS' COMPENSATION
JOINT UNDERWRITING ASSOCIATION, INC.
FWCA
1000 LEGION PL
ORLANDO FL
32801

DIANE CARR
SECRETARY

JEB BUSH
GOVERNOR

MORRIS, ALAN B
2163 NE PINE RIDGE STREET
JENSEN BEACH
FL 34957
DRIFTWOOD HOMES & IMPROVEMENTS
REQUIREMENTS PRIORITY CONTRACTING
(INDIVIDUAL MUST MEET ALL LOCAL
EXPIRATION DATE: AUG 31, 2005
Under the provisions of Chapter
Named below HAS REGISTERED
The RESIDENTIAL CONTRACTOR



DATE	BATCH NUMBER	LICENSE NBR
08/07/2003	030083054	RR0056789

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD


SEQ# L03080701826

STATE OF FLORIDA

AC# 1001407

DETACH HERE

AC# 1001407
STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION
RR0056789 030083054
REGISTERED RESIDENTIAL CONTR
MORRIS, ALAN B
DRIFTWOOD HOMES & IMPROVEMENTS
(INDIVIDUAL MUST MEET ALL LOCAL
LICENSING REQUIREMENTS PRIORITY
TO CONTRACTING IN ANY AREA)
HAS REGISTERED under the provisions of Ch. 489
Expiration date: AUG 31, 2005
L03080701826



MORRIS, ALAN B
2163 NE PINE RIDGE STREET
JENSEN BEACH
FL 34957
DRIFTWOOD HOMES & IMPROVEMENTS

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE
FL 32399-0783



(850) 487-1395

TOWN OF SEWALL'S POINT

MASTER PERMIT NO. _____

BUILDING PERMIT NO. 7585

Building to be erected for SCHECADNIC Type of Permit SUB-MECH

Applied for by DARTWOOD/Assoc. Air (Contractor) Building Fee _____

Subdivision Heritage Parcel 18 Block _____ Radon Fee _____

Address 1 Bluecrest Ct Impact Fee See

Type of structure SFR AC Fee PN 7584

PRINNY DUAL NAME: Michael A Krenick Electrical Fee _____

Parcel Control Number: Lot #: CAC057622 Plumbing Fee _____

0138410132000018090000 Roofing Fee _____

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

Total Construction Cost \$ _____ TOTAL Fees _____

Signed Michael A Krenick Applicant
 Signed [Signature] Town Building Official

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

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

ACORD CERTIFICATE OF LIABILITY INSURANCE

PRODUCER (772)231-2828 FAX (772)231-4413
 Felten & Associates
 2911 Cardinal Drive (32963)
 P.O. Box 3488
 Vero Beach, FL 32964-3488
 INSURED Associated Air of Port St. Lucie, Inc.
 1538 SE Niemeyer Circle
 Port St. Lucie, FL 34952
 INSURERS AFFORDING COVERAGE
 INSURER A: Maryland Casualty Company
 INSURER B:
 INSURER C:
 INSURER D:
 INSURER E:
 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.
 NAIC #

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 ADD'L TR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY	SCP38417698	07/10/2004	07/10/2005	EACH OCCURRENCE \$ 500,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 500,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
	COMMERCIAL GENERAL LIABILITY				
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				
	ANY AUTO				
	ALL OWNED AUTOS				
	SCHEDULED AUTOS				
	HIRE AUTOS				
	NON-OWNED AUTOS				
	AUTOMOBILE LIABILITY				
	ANY AUTO				
	COMBINED SINGLE LIMIT (EA ACCIDENT)				
	BODILY INJURY (per person)				
	BODILY INJURY (per accident)				
	PROPERTY DAMAGE (per accident)				
	AUTO ONLY - EA ACCIDENT				
	EA ACC				
	AUTO ONLY: AGG				
	EACH OCCURRENCE				
	AGGREGATE				
	EXCESS/UMBRELLA LIABILITY				
	CLAIMS MADE <input type="checkbox"/>				
	OCCUR <input type="checkbox"/>				
	DEDUCTIBLE				
	RETENTION \$				
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				
	IF YES, DESCRIBE UNDER SPECIAL PROVISIONS BELOW				
	OTHER				

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

CERTIFICATE HOLDER
 CITY OF SEMALL'S POINT
 1 SEMALL'S POINT ROAD
 SEMALL'S POINT, FL

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY ON ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE
 Kenneth D. Felten, LUTC/LB

Certificate of Insurance
 This certificate 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, extend, or alter the coverage afforded by the policies listed below.

Named Insured(s):

Gevity HR, Inc and its wholly owned subsidiaries including but not limited to Gevity HR II, LP; Gevity HR III, LP; Gevity HR IV, LP; Gevity HR V, LP; Gevity HR VI, LP; Gevity HR VII, LP; Gevity HR VIII, LP; Gevity HR IX, LP; Gevity HR X, LP; Gevity HR XI, LLC; Gevity HR XII Corp.
 600 301 Boulevard West
 Bradenton, Florida 34205

Coverages:

Insurer Affording Coverage
 American Home Assurance Co.,
 Member of American International Group, Inc. (AIG)

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	Policy Number	Limits
Workers' Compensation	1-1-2006	RMWC330470 RMWC330495	Bodily Injury By Accident Each Accident \$ 2,000,000
			Bodily Injury By Disease Policy Limit \$ 2,000,000
			Bodily Injury By Disease Each Person \$ 2,000,000
			Employers Liability

Other:

Employees Leased To: 15279 Associated Air of Port St. Lucie Inc.

Effective Date: 1/1/05

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.

Certificate Holder:

Notice of Cancellation: Should any of the policies described herein be cancelled before the expiration date thereof, the insurer affording coverage will endeavor to mail 30 days written notice to the certificate holder named herein, but failure to mail such notice shall impose no obligation or liability of any kind upon the insurer affording coverage, its agents or representatives.

Michael C. Weiss

Michael C. Weiss
 Authorized Representative of Marsh USA Inc.
 Date Issued 1/1/2005
 Phone (866) 443-8489

City of Sewalls Point
 1 Sewalls Point Rd
 Stuart, FL 34996

MARSH

AC#1540467

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L04081304065

DATE	BATCH NUMBER	LICENSE NBR
08/13/2004	040135984	CAC057622

The CLASS B AIR CONDITIONING CONTRACTOR

Named below IS CERTIFIED

Under the provisions of Chapter 489 FS.

Expiration date: AUG 31, 2006

KRENCIK, MICHAEL ANTHONY

INDIVIDUAL

3072 SE MORNINGSIDE BLVD

PT ST LUCIE FL 34952

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

2004-2005 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9012, Stuart, FL 34995
(772) 288-8404

LICENSE 1988-520-205 CENT
PHONE (561)335-7089 LIC NO 001211
LOCATION 1538 SE NIMMEYER CIR PSL

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	00
LIC. FEE \$	25.00
PENALTY \$	00
COL. FEE \$	00
TRANSFER \$	00
TOTAL	25.00

JERRY ANTHONY (OWN/QUAL)
1538 NIMMEYER AIR OF PI ST LUCIE INC
1538 NIMMEYER CIRCLE
PI ST LUCIE FL 34952

CERT. AIR COND CONTN/CLASS B

AT LOCATION LISTED FOR THE FEE TO BE QUARANTY ON THE

26 AUGUST 04

DATE OF AND ENGINE REGISTRATION NO. 2005

12 04082501 000438

Phone Number: 772-781-2515

Address: 1 RIVERCREST COURT
STUART, FL 34996

Name: GARY SCHECODNIC and REBECCA SCHECODNIC
3(a) The owner:

2. General description of improvement:
TWO STORY SINGLE FAMILY RESIDENCE WITH ALL OTHER RELATED
IMPROVEMENTS

1. Description of the property: 12 S. SEWALLS POINT ROAD
STUART, FLORIDA 34996
LOT 18 HERITAGE PLACE ACCORDING TO THE PLAT THEREOF AS RECORDED
IN PLAT BOOK 10 PAGE 2 PUBLIC RECORDS OF MARTIN COUNTY FLORIDA

NOTICE OF COMMENCEMENT

The undersigned hereby give Notice that improvements will be made to certain real property, and in accordance with Section 713.13, Florida Statutes, the following is provided in this Notice of Commencement. This Notice shall be void and of no force and effect if construction is not commenced within ninety (90) days after recordation.

STATE OF FLORIDA
COUNTY OF Martin

PERMIT NO. _____
FOLIO NO: 013841013000001809

=====
Space above this line for recording purposes only
=====



4722-05

Wells

RETURN TO:
FIDELITY FEDERAL BANK & TRUST
C/O: MICHELLE MILLER
205 Datura Street
West Palm Beach, FL 33401
Loan Number: 140071241

INSTR # 1827149
OR BK 01998 PG 0522
RECORDED 04/01/2005 02:11:36 PM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY S Phoenix

3(b). Owner's interest in the site of the improvement: FEE SIMPLE

3(c). Fee simple title holder (if other than owner):
Name:

Address:



4. Contractor:

DRIFTWOOD HOMES LLC

2163 PINE RIDGE STREET, JENSEN BEACH, FL 34957

Phone Number: 772-334-2577

5. Surety:

Address:
Phone Number:
Amount of Bond:

A Copy of the payment bond (if any) is attached hereto.

6. Lender (Persons or entities making a loan for construction of improvements):

FIDELITY FEDERAL BANK & TRUST

205 DATURA STREET, WEST PALM BEACH, FL 33401

Phone Number: 561-803-9760 (Construction Department)

Fax Number: 561-803-9745 (Construction Department)

7. Name and address of person within the State of Florida designated by the owner as person upon whom notices or other documents may be served as provided by Florida Statute Section 713.13(1)(a)(7):
Name:

Address:

Phone:

8. The owner has designated the following person, in addition to himself, to receive a copy of the lienor's notice as provided in Section 713.13(1)(b) of the Florida Statute:

FIDELITY FEDERAL BANK & TRUST

205 DATURA STREET

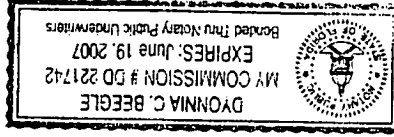
WEST PALM BEACH, FL 33401

Phone Number 561-803-9739 (Construction Department)

Fax Number 561-803-9745 (Construction Department)

9. Expiration date of Notice of Commencement: (the expiration date is one (1) year from the date of recording unless different date is specified): 5/31/2006

The recording of this Notice of commencement does not constitute a lien, cloud or encumbrance on the described real property, but gives constructive notice that claims of lien may be filed under Chapter 713 of the Florida Statutes.



Printed Name of Notary Public

Notary Commission Number

Notary Public State of Florida

[Handwritten Signature]



STATE OF FLORIDA
MARTIN COUNTY
THIS IS TO CERTIFY THAT THE
FOREGOING 3 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.
CARSHA EWING, CLERK
D.C. *[Handwritten Signature]*
DATE 11-17-05

identification.

known to me or who has produced

as who is personally

SWORN TO AND SUBSCRIBED before me this 31 day of March, 2005, by Gary Schecodnic and Rebecca Schecodnic

Print Name:

Owner:

Print Name:

Owner:

Print Name:

Owner:

Print Name:

Owner:

Print Name: Dyonnia C. Beegle

[Handwritten Signature]

Print Name: GARY SCHECODNIC

[Handwritten Signature]

Owner: GARY SCHECODNIC

Owner: REBECCA SCHECODNIC

[Handwritten Signature]

WITNESS:

TOWN OF SEWALL'S POINT

MASTER PERMIT NO. _____

BUILDING PERMIT NO. 7586

Date 6/1/05

Building to be erected for SEWELL'S POINT Type of Permit Sub-Erec

Applied for by DURWOOD/HORTRAC ERECTOR (Contractor)

Subdivision WENTWORTH PLACE LOT 18 Block _____

Address 1 RIVERCREST COURT

Type of structure SFR

Parcel Control Number: LC# : ER0011355

Total Construction Cost \$ 0138410130600018090000

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

TOTAL Fees _____

Signed [Signature] Applicant
Signed [Signature] Town Building Official

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

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

ACORD CORPORATION 1988

ACORD 25-S (7/97)

<p>Lawrence R. Kearns AUTHORIZED REPRESENTATIVE REPRESENTATIVES IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION</p>	<p>Fax to: 772 220-4765 Stuart, FL 34996 Town of Sewalls Point 1 South Sewalls Point Road</p>
--	--

CANCELLATION ADDITIONAL INSURED: INSURER LETTER: CERTIFICATE HOLDER

Electrical - State of Florida

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

INSURANCE TYPE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	20634782-04	02-01-05	02-01-06	EACH OCCURRENCE \$ 300,000
				FIRE DAMAGE (Any one fire) \$ 100,000
				MED EXP (Any one person) \$ 10,000
				PERSONAL & ADV INJURY \$ 300,000
				GENERAL AGGREGATE \$ 300,000
				PRODUCTS - COMP/OP AGG \$ 300,000
				COBINED SINGLE LIMIT (EA ACCIDENT) \$ 300,000
				BODILY INJURY (Per person)
				BODILY INJURY (Per accident)
				PROPERTY DAMAGE (Per accident)
B AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS	95-434-704-00	02-01-05	02-01-06	EACH OCCURRENCE \$
				AGGREGATE \$
				EXCESS LIABILITY
				CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> RETENTION \$
				DEDUCTIBLE \$
				WORKERS COMPENSATION AND EMPLOYERS LIABILITY
				ANY AUTO
				DAMAGE LIABILITY
				AUTO ONLY - EA ACCIDENT \$
				OTHER THAN EA ACC \$
OTHER				EL. DISEASE - EA EMPLOYEE \$
				EL. DISEASE - POLICY LIMIT \$
				EL. EACH ACCIDENT \$
				WC STATU. OTH. TORT LIMITS \$

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.

<p>ACORD CERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YY) 05-31-05</p>	<p>PRODUCER Kearns Agency of Florida Inc. P O Box 1849 Jensen Beach, FL. 34958</p>
<p>INSURERS AFFORDING COVERAGE</p>	<p>INSURED Heritage Electric Inc. P O Box 1003 Jensen Beach, FL. 34958-1003</p>
<p>INSURER A: Southern Owners Insurance Co. INSURER B: Auto-Owners Insurance Co. INSURER C: INSURER D: INSURER E:</p>	<p>COVERAGES</p>

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

ACORD CERTIFICATE

TOLLFREE (800) 334-3181
 Rick Carroll Insurance
 2160 N.E. Dixie Highway
 P.O. Box 877
 Jensen Beach, FL 34958-0877
 Jensen Beach, FL 34958
 P.O. Box 1003
 Jensen Beach, FL 34958

INSURER D:	
INSURER C:	
INSURER B:	
INSURER A:	

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.

INSURANCE TYPE OR INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> POLICY <input type="checkbox"/> PRO <input type="checkbox"/> LOC				GENERAL AGGREGATE 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 (Per accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
DAMAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY EACH OCCURRENCE AGGREGATE
EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEQUITABLE <input type="checkbox"/> RETENTION				EACH OCCURRENCE AGGREGATE AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY EACH OCCURRENCE AGGREGATE
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> OFFICER/EMPLOYEE EXECUTIVE <input type="checkbox"/> OFFICER/EMPLOYEE EXCLUDED <input type="checkbox"/> ALL OTHERS INCLUDED	POLICY NUMBER: 099000004361204 POLICY PERIOD: 07/10/2004 - 07/19/2005			EL DISEASE - EA EMPLOYEE EL DISEASE - POLICY LIMIT EL EACH ACCIDENT WC STATU OTH

THIS CERTIFICATE IS FOR PROOF OF INSURANCE ONLY.

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

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

AC# 1460897

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# 1.04062303151

DATE	BATCH NUMBER	LICENSE NBR
06/23/2004	030740979	ER001355

The ELECTRICAL CONTRACTOR
Named below HAS REGISTERED

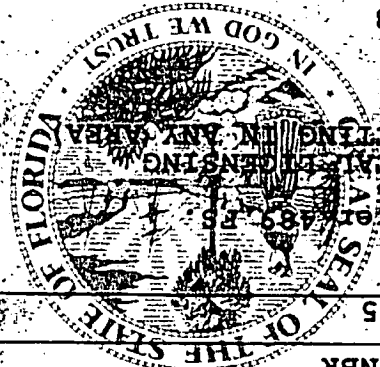
Under the provisions of Chapter 489, FS
Expiration date: AUG 31, 2006

(INDIVIDUAL MUST MEET ALL LICENSING
REQUIREMENTS PRIOR TO CONTRACTING

GARBER, WAYNE E
HERITAGE ELECTRIC INC

P O BOX 1003
JENSEN BEACH

FL 34958



DISPLAY AS REQUIRED BY LAW

JEB BUSH
GOVERNOR

DIANE CARR
SECRETARY

JEB BUSH
GOVERNOR

KIM BINKLEY-SEYER
SECRETARY

DISPLAY AS REQUIRED BY LAW

GARBER, WAYNE E
HERITAGE ELECTRIC INC
P.O. BOX 1003
JENSEN BEACH
FL 34958

THE ELECTRICAL CONTRACTOR (P) HAS REGISTERED
UNDER THE PROVISIONS OF CHAPTER 489, FS.
EXPIRATION DATE: AUG 31, 2005
(INDIVIDUAL MUST MEET ALL LEGAL LICENSING
REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)

DATE	BATCH NUMBER	LICENSE NUMBER
06/21/2002	01131171	ME00094

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD
SEC# L0206110140


STATE OF FLORIDA

07453984

MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency

MASTER ELECTRICIAN
License Number ME00094 Expires 30-SEP-05

GARBER, WAYNE E
HERITAGE ELECTRIC
BOX 1003
JENSEN BEACH, FL 34958



KIM BINKLEY-SEYER
SECRETARY

JEB BUSH
GOVERNOR

HERITAGE ELECTRIC INC
P.O. BOX 1003
JENSEN BEACH, FL 34958

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

INSPECTIONS

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEM WALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

PERMIT

Date: 5/27/05
 Building to be erected for: SCHECOBUC
 Applied for by: DR. FURUCCO/SOUTH BAY PLUMB (Contractor)
 Subdivision: HERITAGE RACIAL 18 Block
 Address: 1 BURNBEE ST COURT
 Type of structure: SFR
 Parcel Control Number: LC# : CFC029690
 Amount Paid: 0138410130000018090000
 Total Construction Cost \$: X
 Check # X Cash _____ Other Fees () _____
 Signed: [Signature] Applicant
 Signed: [Signature] Town Building Official
 BUILDING PERMIT NO. 7587
 Type of Permit: Sub-Bumbara
 Building Fee _____
 Radon Fee _____
 Impact Fee _____
 A/C Fee _____
 Electrical Fee PN 7584
 Plumbing Fee _____
 Roofing Fee _____
 TOTAL Fees _____

TOWN OF SEWALL'S POINT

MASTER PERMIT NO. _____

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
04/28/05

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

A COMPANY FEDERATED MUTUAL INSURANCE COMPANY OR FEDERATED SERVICE INSURANCE COMPANY

B COMPANY

C COMPANY

D COMPANY

FEDERATED MUTUAL INSURANCE COMPANY
Home Office: P. O. Box 328
Owatonna, MN 55060
Phone: 507-455-5200



234-095-8

INSURED
SOUTH PARK PLUMBING OF ST
LUCIE COUNTY INC
6941 HERITAGE DR
PORT ST LUCIE FL 34952

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 COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR OWNERS & CONTRACTORS PROT BUSINESSOWNERS POLICY <input checked="" type="checkbox"/>	9157210	06/01/05	06/01/06	GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 PERSONAL & ADV INJURY \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP (Any one person) \$
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY \$ EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY UMBRELLA FORM OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$ WC STATUS \$ TORY LIMITS \$ OTH \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: INCL <input type="checkbox"/> EXCL <input type="checkbox"/>				EL DISEASE - POLICY LIMIT \$ EL DISEASE - EA EMPLOYEE \$ EL EACH ACCIDENT \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CANCELLATION

TOWN OF SEWALLS POINT
BUILDINGS DEPT
1 S SEWALLS POINT RD
STUART FL 34996

20

2340958

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
[Signature]
PRESIDENT
ACORD CORPORATION 1988

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY) 04/13/04

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

<p>A COMPANY FEDERATED MUTUAL INSURANCE COMPANY OR FEDERATED SERVICE INSURANCE COMPANY</p> <p>B COMPANY</p> <p>C COMPANY</p> <p>D COMPANY</p>	<p>PRODUCER</p> <p>FEDERATED MUTUAL INSURANCE COMPANY Home Office: P. O. Box 328 Owatonna, MN 55060 Phone: 507-455-5200</p> <p>INSURED</p> <p>SOUTH PARK PLUMBING OF ST LUCIE COUNTY INC 6941 HERITAGE DR PORT ST LUCIE FL 34952</p>
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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
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A	GENERAL LIABILITY	9157210	06/01/04	06/01/05	GENERAL AGGREGATE	\$ 2,000,000
	COMMERCIAL GENERAL LIABILITY				CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	
	OWNERS & CONTRACTORS PROTECTORS POLICY				<input checked="" type="checkbox"/>	
	AUTOMOBILE LIABILITY					
	ANY AUTO				<input type="checkbox"/>	
	ALL OWNED AUTOS				<input type="checkbox"/>	
	SCHEDULED AUTOS				<input type="checkbox"/>	
HIRE AUTOS	<input type="checkbox"/>					
NON-OWNED AUTOS	<input type="checkbox"/>					
GARAGE LIABILITY						
ANY AUTO	<input type="checkbox"/>					
EXCESS LIABILITY						
UMBRELLA FORM	<input type="checkbox"/>					
OTHER THAN UMBRELLA FORM	<input type="checkbox"/>					
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	<input type="checkbox"/>					
THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE:	<input type="checkbox"/> INCL <input type="checkbox"/> EXCL					
OTHER	<input type="checkbox"/>					

\$	PROPERTY DAMAGE				\$
\$	BODILY INJURY (per person)				\$
\$	BODILY INJURY (per accident)				\$
\$	COMBINED SINGLE LIMIT				\$
\$	AUTO ONLY - EA ACCIDENT				\$
\$	OTHER THAN AUTO ONLY				\$
\$	EACH ACCIDENT				\$
\$	AGGREGATE				\$
\$	EACH OCCURRENCE				\$
\$	AGGREGATE				\$
\$	EXCESS LIABILITY				\$
\$	UMBRELLA FORM				\$
\$	OTHER THAN UMBRELLA FORM				\$
\$	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				\$
\$	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE:				\$
\$	EL DISEASE - POLICY LIMIT				\$
\$	EL DISEASE - EA EMPLOYEE				\$
\$	OTHER				\$

TOWN OF SEWALLS POINT
 BUILDINGS DEPT
 1 S SEWALLS POINT RD
 STUART FL 34996

2340958

20

CANCELLATION

CERTIFICATE HOLDER

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

PRESIDENT

ACORD 25-5 (1/95)

ACORD CORPORATION 1988

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY) 12/21/2004

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

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.

INSURERS AFFORDING COVERAGE

INSURER A: AIG/AMERICAN HOME ASSURANCE

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURED
 SOUTH PARK PLUMBING OF
 ST LUCIE COUNTY, INC.
 6941 HERITAGE DRIVE
 PORT ST LUCIE, FL 34952

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
	GENERAL LIABILITY				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	COMMERCIAL GENERAL LIABILITY				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	GENERAL LIABILITY				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	COMBINED SINGLE LIMIT (Ea accident)				\$
	BODILY INJURY (Per person)				\$
	BODILY INJURY (Per accident)				\$
	PROPERTY DAMAGE (Per accident)				\$
	AUTO ONLY - EA ACCIDENT				\$
	OTHER THAN EA ACC				\$
	AUTO ONLY - EA ACCIDENT				\$
	ANY AUTO				\$
	ALL OWNED AUTOS				\$
	SCHEDULED AUTOS				\$
	HIRED AUTOS				\$
	NON-OWNED AUTOS				\$
	ANY AUTO				\$
	EXCESS LIABILITY				\$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	WC7761078	01-01-05	01-01-06	E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000
	OTHER				

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

CANCELLATION

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

ADDITIONAL INSURED: INSURER LETTER:

CERTIFICATE HOLDER

TOWN OF SEMALLS PAINT
 BUILDING DEPARTMENT
 1 SOUTH SEMALLS POINT ROAD
 STUART FL 34996

FAK: 772-220-2765

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CFC1426656 04/07/05 040818085

CERTIFIED PLUMBING CONTRACTOR
WINTERCORN, JASON THOMAS
SOUTH PARK PLUMBING INC OF MARTIN

IS CERTIFIED under the provisions of Ch. 489, FS
expiration date: AUG 31, 2006 L05040700237

STATE OF FLORIDA
AC# 1972011

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

QB0014990 04/07/05 030730450

QUALIFIED BUSINESS ORGANIZATION
SOUTH PARK PLUMBING INC OF MARTIN

(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, 2005 L05040703858

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
SEQ# L0504070385

STATE OF FLORIDA

AC# 1972011

DATE	BATCH NUMBER	LICENSE NBR
04/07/2005	030730450	QB0014990

The BUSINESS ORGANIZATION
Named below IS QUALIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2005
(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)
SOUTH PARK PLUMBING INC OF MARTIN COUNTY
4505 SE DIXIE HIGHWAY
STUART
FL 34997

JEB BUSH GOVERNOR
DIANE CARR SECRETARY
DISPLAY AS REQUIRED BY LAW

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
SEQ# L0504070023

STATE OF FLORIDA

AC# 1968390

DATE	BATCH NUMBER	LICENSE NBR
04/07/2005	040818085	CFC1426656

The PLUMBING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2006
WINTERCORN, JASON THOMAS
SOUTH PARK PLUMBING INC OF MARTIN COUNTY
4505 S DIXIE HWY
STUART
FL 34997

JEB BUSH GOVERNOR
DIANE CARR SECRETARY

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 7588

Date 5/31/05

Building to be erected for SCAPECONIC Type of Permit Sub-Permit

Applied for by DANWOOD/PARTIC BORNIA (Contractor) Building Fee

Subdivision HERTZEL PLAT 18 Block Radon Fee

Address 1 RIVERCREST COURT Impact Fee

Type of structure SIR AC Fee PN 7584

Parcel Control Number: 0138410130000018090000 Electrical Fee

Amount Paid X Check # X Cash Other Fees () TOTAL Fees

Signed [Signature] Applicant Signed [Signature] Town Building Official


PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

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

MASTER PERMIT NO.

<p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.</p> <p>AUTHORIZED REPRESENTATIVE  Mark Kasten/DEBBIE</p>	<p>CERTIFICATE HOLDER</p> <p>Sewalls Point Building Dept 1 Sewalls Point Road Sewalls Point, FL 34996</p>
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CANCELLATION

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

INSR ADD'L TR. INSR	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 GENT. AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	GLB11192004	12/12/2004	12/12/2005	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT (ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$ EA ACC \$ OTHER THAN AUTO ONLY: \$ AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				EACH OCCURRENCE \$ AGGREGATE \$ DEDUCTIBLE \$ RETENTION \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

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.

COVERAGES

<p>INSURERS AFFORDING COVERAGE</p> <p>INSURER A: Lexington</p> <p>INSURER B:</p> <p>INSURER C:</p> <p>INSURER D:</p> <p>INSURER E:</p>	<p>INSURED Pacific Roofing Corp., Inc.</p> <p>PO Box 2697 Stuart, FL 34994</p> <p>Debra Hicks-Neumann Tequesta, FL 33469 218 S. US Highway One, Ste 300 Tequesta Agency, Inc. PRODUCER (561) 746-4546 FAX (561) 746-9599</p>
--	--

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.

DATE (MM/DD/YYYY) 12/13/2004

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

ACORD CERTIFICATE OF LIABILITY INSURANCE

CERTIFICATE NO. / DATE: AC01-790003-716126 / 12/8/2004 9:42:53 AM

PRODUCER
 Eisenmann Risk Placements, Inc.
 14160 Dallas Parkway, Suite 500
 Dallas, TX 75254
 (972) 764-0965 Fax: (972) 404-4450

INSURED
 PACIFIC ROOFING CORPORATION
 808 SR DIXIE HWY
 STUART, FL 34994
 (772) 283-7663 Fax: (772) 283-9505

INSURER A: PROVIDENCE PROPERTY & CASUALTY INSURANCE COMPA
INSURER B:
INSURER C:
INSURER D:
INSURER E:

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.

INSURERS AFFORDING COVERAGE

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	DATE EXPIRES	LIMITS
GENERAL LIABILITY				EACH OCCURRENCE \$
COMMERCIAL GENERAL LIABILITY				\$
<input type="checkbox"/> CLAIMS MADE				\$
<input type="checkbox"/> OCCUR				\$
GENERAL AGGREGATE LIMIT APPLIES PER				\$
<input type="checkbox"/> POLICY				\$
<input type="checkbox"/> PER POLICY				\$
<input type="checkbox"/> LOC				\$
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				\$
Garage 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				\$
EXCESS LIABILITY				\$
<input type="checkbox"/> CLAIMS MADE				\$
<input type="checkbox"/> OCCUR				\$
<input type="checkbox"/> EDUCABLE				\$
<input type="checkbox"/> RETENTION				\$
WORKERS COMPENSATION AND EMPLOYERS LIABILITY	WC0100086	12/1/2004	12/1/2005	\$
<input checked="" type="checkbox"/> WC STATUTE				\$
<input checked="" type="checkbox"/> DTP				\$
<input type="checkbox"/> LTD				\$
<input type="checkbox"/> SICK LEAVE				\$
<input type="checkbox"/> SHORT-TERM DISABILITY				\$
<input type="checkbox"/> LONG-TERM DISABILITY				\$
<input type="checkbox"/> LIFE				\$
<input type="checkbox"/> ACCIDENT BENEFIT				\$
<input type="checkbox"/> OTHER				\$
<input type="checkbox"/> E.L. DISEASE - EA EMPLOYEE				\$ 1000000
<input type="checkbox"/> E.L. DISEASE - POLICY LIMIT				\$ 1000000
<input type="checkbox"/> E.L. DISEASE - EA ACCIDENT				\$ 1000000
<input type="checkbox"/> E.L. DISEASE - POLICY LIMIT				\$ 1000000
<input type="checkbox"/> OTHER THAN EA ACC				\$
<input type="checkbox"/> AUTO ONLY				\$
<input type="checkbox"/> AUTO ONLY - EA ACCIDENT				\$
<input type="checkbox"/> COMBINED SINGLE LIMIT				\$
<input type="checkbox"/> BODILY INJURY (Per person)				\$
<input type="checkbox"/> BODILY INJURY (Per accident)				\$
<input type="checkbox"/> PROPERTY DAMAGE (Per person)				\$
<input type="checkbox"/> PROPERTY DAMAGE (Per accident)				\$
<input type="checkbox"/> GENERAL AGGREGATE				\$
<input type="checkbox"/> PRODUCTS - COMPOP ACC				\$
<input type="checkbox"/> PERSONAL & ADV INJURY				\$
<input type="checkbox"/> MED EXP (Per one person)				\$
<input type="checkbox"/> FIRE DAMAGE (Per one fire)				\$
<input type="checkbox"/> EACH OCCURRENCE				\$

DESCRIPTION OF OPERATIONAL LOCATIONS/EXERCISE LOCATIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

1. Insured is afforded Workers Compensation & Employers Liability as a co-employer under the policy for employees leased from AMS Staff Leasing, Inc. 2. This certificate remains in effect, provided the client's account is in good standing with AMS. Coverage is not provided for any employee for which the client is not reporting wages to AMS. Applies to 100% of the employees of AMS leased to PACIFIC ROOFING CORPORATION, effective 12/01/2004.

...PLEASE SEE ATTACHED EMPLOYER ROSTER...

CERTIFICATE HOLDER

Seawalls Point Building Department
 1 South Seawalls Point Road
 Seawalls Point, FL 34996

ADDITIONAL INSURER, INSURER LETTER:

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

[Signature]

ACORD 25-6 (7/97)

ACORD CORPORATION 1983

<p>Certificate Number: AC04-7900015-176476</p>	<p align="center">CERTIFICATE OF LIABILITY INSURANCE EMPLOYEE ROSTER</p>
<p>Attached roster includes employees paid through 11/28/2004. To verify employee's who may have been added since 11/28/2004, please call 1-800-728-6223.</p>	
<p>* Please note employee roster for this client is updated on a WEEKLY basis.</p>	
<p align="right">EMPLOYEE LIST:</p>	

AGUIAR, LUIZ O

ARRANDALE, GERNI T

ARRANDALE, SHAWN G

Austin, Robert

Austin, Terry

BUCHOLZ, JOHN

Castro, Reinaldo

COCKREHAM, BENNIE D

Coddy, Gary

Destine, Margherita

EDGECOMB, DESMOND C

ENS, DEANA P

GOMES, DWAN E

Gomez, Mario

Gomez, Richard John

HERNANDEZ, FREDY

Hernandez, Martin

Hayward, Richard

JACK, KATIE M

JARRIS, CHRISTINE

JOSEPH, JEAN

LOPEZ, CESAR

Lovitt, Bonnie

MANGILAR, ALPONSO

MEDINO, REYNE RIO

MENDOZA, BRUCE E

MEYER, RICHARD P

Nickerson, James

Pinocchio, Carmelino

RAMIREZ, JOHNNIE

RAMOS, JUAN

RUVA3, JUAN POSADA

THREEWITTS, LANCE H

TORRES, JUAN M

Torres, Pedro

VALDEZ, VALENTINE

VELASQUEZ JR, ROBERT

VOSSINIET, BRIAN A

Weaver, Dennis

WEAVER, RYAN

WEAVER, SCOTT

WOONS, GARY S

JEB BUSH
GOVERNOR

DIANE CARR
TOTAL P.01

GOMES, RICHARD JOHN
PACIFIC ROOFING CORP
PO BOX 2697
STUART

FL 34995

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2006

DATE	BATCH NUMBER	LICENSE NUMBER
09/11/2004	040233678	CCC056793

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
SEQ#L04091102194

STATE OF FLORIDA

AC#1601424

DETACH HERE

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
AC#1601424

CERTIFIED ROOFING CONTRACTOR
GOMES, RICHARD JOHN
PACIFIC ROOFING CORP

CCC056793 09/11/04 040233678

IS CERTIFIED under the provisions of Ch. 489 FS.
Expiration date: AUG 31, 2006
L04091102194

GOMES, RICHARD JOHN
PACIFIC ROOFING CORP
PO BOX 2697
STUART

FL 34995

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783
(850) 487-1395



TOTAL P.01

Contractor ID: AP01080463
License Type: CCC
Expires: September 30, 2005

PACIFIC ROOFING CORP
GOMES, RICHARD J
PO BOX 2697
STUART FL, 34995

Development Department
121 SW Flagler Avenue - Stuart, Florida 34994-2139
Phone (772)288-5326 Fax (772)288-5388



Weyant Engineering, Inc.

Civil & Structural Engineers
201 SW Port St. Lucie Blvd., Suite #104
Port St. Lucie, FL 34984

Phone 772-335-0772 WPB 561-832-9094
Fax 772-335-0866

JOB NO. 02 1636

MAY 20, 2005

STORMWATER RETENTION ANALYSIS

GARY SCHECODNIC RESIDENCE

12 SOUTH SEWALL'S POINT ROAD

RETENTION FOR WATER QUALITY

TOTAL LOT AREA: 22,377 SQUARE FEET = 100%

BUILDING AND DRIVEWAY: 7,688 SQUARE FEET = 34%

OPEN PERVIOUS SPACE: 14,689 SQUARE FEET = 66%

I. VOLUME OF RETENTION REQUIRED = V_r

$$V_r = (0.21 \times \text{AREA IMPERVIOUS}) \div 27 = \text{CUBIC YARDS REQUIRED}$$

II. VOLUME OF RETENTION PROVIDED = V_p

$$V_p = (30' \times 1' \times 120') \div 27 = 66.6 \text{ CUBIC YARDS}$$

III. CONCLUSION:

WATER QUALITY RETENTION WILL BE PROVIDED

CERTIFIED THIS 20TH DAY OF MAY 2005.

WEYANT ENGINEERING, INC.

Dwight R. Weyant

DWIGHT R. WEYANT, P.E.





Project Summary MASTER ZONE ASSOCIATED AIR OF PSL Inc.

Job: SCHECODNIC
Date: 5-9-05
By:

1538 NIEMEYER CIR., PORT ST. LUCIE, FL 34952 Phone: 772-335-7089 Fax: 772-335-7508

Project Information

For: DRIFTWOOD CONST.
2163 NE PINE RIDGE ST, JENSEN BEACH, FL
Phone: 334-2577 Fax: 334-5877
Notes: R-30/R-5
LOT 18/HERITAGE PL/SEWALLS PT

Design Information

Weather: West Palm Beach, FL, US

Winter Design Conditions

Outside db 45 °F
Inside db 70 °F
Design TD 25 °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 17977 Btuh
Ducts 899 cfm
Central vent (49 cfm) 1354 Btuh
Humidification 0 Btuh
Piping 0 Btuh
Equipment load 20230 Btuh

Sensible Cooling Equipment Load Sizing

Structure 22262 Btuh
Ducts 2226 Btuh
Central vent (49 cfm) 867 Btuh
Blower 0 Btuh
Use manufacturer's data n
Rate/swing multiplier 0.96
Equipment sensible load 24341 Btuh

Infiltration

Method Construction quality
Fireplaces
Area (ft²) 1126
Volume (ft³) 14853
Air changes/hour 0.28
Equip. AVF (cfm) 70

Latent Cooling Equipment Load Sizing

Structure 1852 Btuh
Ducts 1385 Btuh
Central vent (49 cfm) 1915 Btuh
Equipment latent load 5153 Btuh
Equipment total load 29493 Btuh
Req. total capacity at 0.70 SHR 2.9 ton

Heating Equipment Summary

Make n/a
Trade n/a
Model n/a
Efficiency 100 EFF
Heating input 0 Btuh
Heating output 20230 Btuh
Temperature rise 16 °F
Actual air flow 1160 cfm
Air flow factor 0.061 cfm/Btuh
Static pressure 0.00 in H2O
Space thermostat

Cooling Equipment Summary

Make Trane
Trade XR12
Cond 2TTR2036A1
Coil TWE037E13
Efficiency 13 SEER
Sensible cooling 25340 Btuh
Latent cooling 10860 Btuh
Total cooling 36200 Btuh
Actual air flow 1160 cfm
Air flow factor 0.047 cfm/Btuh
Static pressure 0.00 in H2O
Load sensible heat ratio 0.83

3 ton

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Duct System Summary MASTER ZONE ASSOCIATED AIR OF PSL Inc.

Job: SCHECODNIC
Date: 5-9-05
By:

1538 NIEMEYER CIR., PORT ST. LUCIE, FL 34952 Phone: 772-335-7089 Fax: 772-335-7508

Project Information

For: DRIFTWOOD CONST.
2163 NE PINE RIDGE ST, JENSEN BEACH, FL
Phone: 334-2577 Fax: 334-5877

External static pressure	Pressure losses	Available static pressure	Supply / return available pressure	Lowest friction rate	Actual air flow	Total effective length (TEL)
0.00 in H2O	0.00 in H2O	0.00 in H2O	0.00 / 0.00 in H2O	0.150 in/100ft	1160 cfm	366 ft
0.00 in H2O	0.00 in H2O	0.00 in H2O	0.00 / 0.00 in H2O	0.150 in/100ft	1160 cfm	
0.00 in H2O	0.00 in H2O	0.00 in H2O	0.00 / 0.00 in H2O	0.150 in/100ft	1160 cfm	

Supply Branch Detail Table

Name	Design (Btuh)	Htg (cfm)	Cig (cfm)	Design FR	Diam (in)	Rect Size (in)	Duct Mat	Actual Ln (ft)	Fig. Eqv Ln (ft)	Trunk
MAST BED-A	3807	0	180	0.150	7	0x0	VFX	25.0	275.0	s5A
MAST BED-B	3807	0	180	0.150	7	0x0	VFX	18.8	275.0	s5A
MAST BED	3807	0	180	0.150	7	0x0	VFX	18.4	275.0	s5A
WIC 1	456	0	22	0.150	4	0x0	VFX	22.2	275.0	s5A
WIC 2	146	0	7	0.150	4	0x0	VFX	19.4	275.0	s5A
TOILET	1164	0	55	0.150	4	0x0	VFX	32.5	270.0	st10
M BATH-A	2801	0	133	0.150	6	0x0	VFX	35.6	270.0	st10
M BATH	2801	0	133	0.150	6	0x0	VFX	38.0	270.0	st10
LIB-A	2849	0	135	0.150	6	0x0	VFX	23.0	165.0	st11
LIB	2849	0	135	0.150	6	0x0	VFX	22.1	165.0	st11

Supply Trunk Detail Table

Name	Trunk Type	Htg (cfm)	Cig (cfm)	Design FR	Veloc (fpm)	Diam (in)	Rect Duct Size (in)	Duct Material	Trunk
sts	Peak AVF	0	1160	0.150	831	16	0 x 0	Viniflx	sts
st10	Peak AVF	0	321	0.150	726	10.9	0 x 0	Viniflx	sts
st5A	Peak AVF	0	570	0.150	725	12	0 x 0	Viniflx	sts
st11	Peak AVF	0	270	0.150	773	12	0 x 0	Viniflx	sts

Italic values have been manually overridden



Project Summary MAIN ZONE ASSOCIATED AIR OF PSL inc.

1538 NIEMEYER CIR., PORT ST. LUCIE, FL 34952 Phone: 772-335-7089 Fax: 772-335-7508

Project Information

For: DRIFTWOOD CONST.
2163 NE PINE RIDGE ST, JENSEN BEACH, FL
Phone: 334-2577 Fax: 334-5877
Notes: R-30/R-5
LOT 18/HERITAGE P/SEWALLS PT

Design Information

Weather: West Palm Beach, FL, US

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

Sensible Cooling Equipment Load Sizing

Structure 18537 Btuh
Ducts 1854 Btuh
Central vent (61 cfm) 1080 Btuh
Blower 0 Btuh
Use manufacturer's data n
Rate/swing multiplier 0.96
Equipment sensible load 20612 Btuh

Latent Cooling Equipment Load Sizing

Structure 1360 Btuh
Ducts 1973 Btuh
Central vent (61 cfm) 2386 Btuh
Equipment latent load 5719 Btuh
Equipment total load 26331 Btuh
Req. total capacity at 0.70 SHR 2.5 ton

Cooling Equipment Summary

Make n/a
Trade n/a
Model n/a
Efficiency 13 SEER
Heating input 21000 Btuh
Heating output 9000 Btuh
Temperature rise 30000 Btuh
Actual air flow 940 cfm
Air flow factor 0.046 cfm/Btuh
Static pressure 0.00 in H2O
Load sensible heat ratio 0.79

Winter Design Conditions

Outside db 45 °F
Inside db 70 °F
Design TD 25 °F

Heating Summary

Structure 18899 Btuh
Ducts 945 cfm
Central vent (61 cfm) 1687 Btuh
Humidification 0 Btuh
Piping 0 Btuh
Equipment load 21531 Btuh

Infiltration

Method Construction quality
Fireplaces
Simplified Average 0

Heating Equipment Summary

Area (ft²) 1511
Volume (ft³) 16523
Air changes/hour 0.24
Equip. AVF (cfm) 65
Heating 1511
Cooling 1511

Heating Equipment Summary

Make n/a
Trade n/a
Model n/a
Efficiency 100 EFF
Heating input 0 Btuh
Heating output 21531 Btuh
Temperature rise 21 °F
Actual air flow 940 cfm
Air flow factor 0.047 cfm/Btuh
Static pressure 0.00 in H2O
Space thermostat

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Project Summary
SECOND FL ZONE
ASSOCIATED AIR OF PSL inc.

Job: SCHECODNIC
 Date: 5-9-05
 By:

1538 NIEMEYER CIR., PORT ST. LUCIE, FL 34952 Phone: 772-335-7089 Fax: 772-335-7508

Project Information

For: DRIFTWOOD CONST.
 2163 NE PINE RIDGE ST, JENSEN BEACH, FL
 Phone: 334-2577 Fax: 334-5877
 Notes: R-30/R-5
 LOT 18/HERITAGE PL/SEWALLS PT

Design Information

Weather: West Palm Beach, FL, US

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

Sensible Cooling Equipment Load Sizing

Structure 35534 Btuh
 Ducts 3553 Btuh
 Central vent (92 cfm) 1619 Btuh
 Blower 0 Btuh
 Use manufacturer's data n
 Rate/swing multiplier 0.96
 Equipment sensible load 39078 Btuh

Latent Cooling Equipment Load Sizing

Structure 3897 Btuh
 Ducts 2942 Btuh
 Central vent (92 cfm) 3578 Btuh
 Equipment latent load 10417 Btuh
 Equipment total load at 0.70 SHR 49495 Btuh
 Req. total capacity 4.7 ton

Cooling Equipment Summary

Make Trane
 Trade XR12
 Cond 2TTR2060B1
 Coil TWE049E13
 Efficiency 13 SEER
 Sensible cooling 42350 Btuh
 Latent cooling 18150 Btuh
 Total cooling 60500 Btuh
 Actual air flow 1800 cfm
 Air flow factor 0.046 cfm/Btuh
 Static pressure 0.00 in H2O
 Load sensible heat ratio 0.80

Winter Design Conditions

Outside db 45 °F
 Inside db 70 °F
 Design TD 25 °F

Heating Summary

Structure 27549 Btuh
 Ducts 1377 cfm
 Central vent (92 cfm) 2530 Btuh
 Humidification 0 Btuh
 Piping 0 Btuh
 Equipment load 31456 Btuh

Infiltration

Method Construction quality
 Fireplaces
 Simplified Average 0

Heating Equipment Summary

Make n/a
 Trade n/a
 Model n/a
 Efficiency 100 EFF
 Heating input 0 Btuh
 Heating output 31456 Btuh
 Temperature rise 16 °F
 Actual air flow 1800 cfm
 Air flow factor 0.062 cfm/Btuh
 Static pressure 0.00 in H2O
 Space thermostat

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.
 Bold/italic values have been manually overridden



Duct System Summary SECOND FL ZONE ASSOCIATED AIR OF PSL Inc.

Job: SCHECODNIC
Date: 5-9-05
By:

1538 NIEMEYER CIR., PORT ST. LUCIE, FL 34952 Phone: 772-335-7089 Fax: 772-335-7508

Project Information

For: DRIFTWOOD CONST.
2163 NE PINE RIDGE ST, JENSEN BEACH, FL
Phone: 334-2577 Fax: 334-5877

External static pressure 0.00 in H2O
Pressure losses 0.00 in H2O
Available static pressure 0.00 in H2O
Supply / return available pressure 0.00 / 0.00 in H2O
Lowest friction rate 0.150 in/100ft
Actual air flow 1800 cfm
Total effective length (TEL) 215 ft

Heating 0.00 in H2O
Pressure losses 0.00 in H2O
Available static pressure 0.00 in H2O
Supply / return available pressure 0.00 / 0.00 in H2O
Lowest friction rate 0.150 in/100ft
Actual air flow 1800 cfm
Total effective length (TEL) 215 ft

Supply Branch Detail Table

Name	Design (Btuh)	Htg (cfm)	Cig (cfm)	Design FR	Diam (in)	Rect Size (in)	Duct Matd	Actual Ln (ft)	Fig Eqv Ln (ft)	Trunk
UP STOR	633	0	0	0.150	4	0x0	VlFX	14.4	195.0	st2
BATH 4	570	0	0	0.150	4	0x0	VlFX	11.8	195.0	st3
DRESS	93	0	0	0.150	4	0x0	VlFX	10.7	195.0	st3
G WIC	236	0	0	0.150	4	0x0	VlFX	13.4	195.0	st3
WIC 4	146	0	0	0.150	4	0x0	VlFX	19.1	195.0	st2
GUEST RM	3583	0	0	0.150	7	0x0	VlFX	19.7	195.0	st3
BEDRM 4	868	0	0	0.150	4	0x0	VlFX	9.9	195.0	st3
BATH 3	185	0	0	0.150	4	0x0	VlFX	9.5	195.0	st2
BEDRM 3	1879	0	0	0.150	5	0x0	VlFX	12.8	195.0	st2
FOYER-A	5091	0	0	0.150	8	0x0	VlFX	42.8	165.0	st2
FOYER	5091	0	0	0.150	8	0x0	VlFX	44.6	165.0	st9
LIV-A	5178	0	0	0.150	8	0x0	VlFX	0.0	0.0	st9
LIV-B	5178	0	0	0.150	8	0x0	VlFX	0.0	0.0	st9
LIV-C	5178	0	0	0.150	8	0x0	VlFX	0.0	0.0	st9
LIV	5178	0	0	0.150	8	0x0	VlFX	0.0	0.0	st9

Supply Trunk Detail Table

Name	Trunk Type	Htg (cfm)	Cig (cfm)	Design FR	Veloc (fpm)	Diam (in)	Rect Duct Size (in)	Material	Trunk
st2	Peak AVF	0	171	0.150	870	12 1/8	0 x 0	VinlFix	st4
st3	Peak AVF	0	206	0.150	772	12 1/8	0 x 0	VinlFix	st4
st4	Peak AVF	0	469	0.150	860	12 1/8	0 x 0	VinlFix	st4
st9	Peak AVF	0	469	0.150	860	12 1/8	0 x 0	VinlFix	st4

Italic values have been manually overridden



Duct System Summary MAIN ZONE ASSOCIATED AIR OF PSL Inc.

Job: SCHECODNIC
Date: 5-9-05
By:

1538 NIEMEYER CIR., PORT ST. LUCIE, FL 34952 Phone: 772-335-7089 Fax: 772-335-7508

Project Information

For: DRIFTWOOD CONST.
2163 NE PINE RIDGE ST, JENSEN BEACH, FL
Phone: 334-2577 Fax: 334-5877

External static pressure 0.00 in H2O Heating
Pressure losses 0.00 in H2O
Available static pressure 0.00 in H2O
Supply / return available pressure 0.00 / 0.00 in H2O Cooling
Lowest friction rate 0.150 in/100ft
Actual air flow 940 cfm
Total effective length (TEL) 380 ft

Supply Branch Detail Table

Name	Design (Btuh)	Htg (cfm)	Cig (cfm)	Design FR	Diam (in)	Rect Size (in)	Duct Matl	Actual Ln (ft)	Ftg Eqv Ln (ft)	Trunk
FAM RM	3573	0	165	0.150	7	0x0	VIFX	19.5	200.0	st1
LAUN	687	0	32	0.150	4	0x0	VIFX	4.3	95.0	st1
STOR	247	0	11	0.150	4	0x0	VIFX	4.3	95.0	st1
NOOK	2297	0	106	0.150	5	0x0	VIFX	30.0	295.0	st7
NOOK-A	2297	0	106	0.150	5	0x0	VIFX	26.5	295.0	st7
KIT-A	2284	0	105	0.150	5	0x0	VIFX	36.0	340.0	st7A
KIT	2284	0	105	0.150	5	0x0	VIFX	39.5	340.0	st7A
PANTRY	312	0	14	0.150	4	0x0	VIFX	27.6	134.9	st6
DIN	4334	0	200	0.150	8	0x0	VIFX	31.7	134.9	st6
CAB	2077	0	96	0.150	5	0x0	VIFX	32.6	203.8	st1

Supply Trunk Detail Table

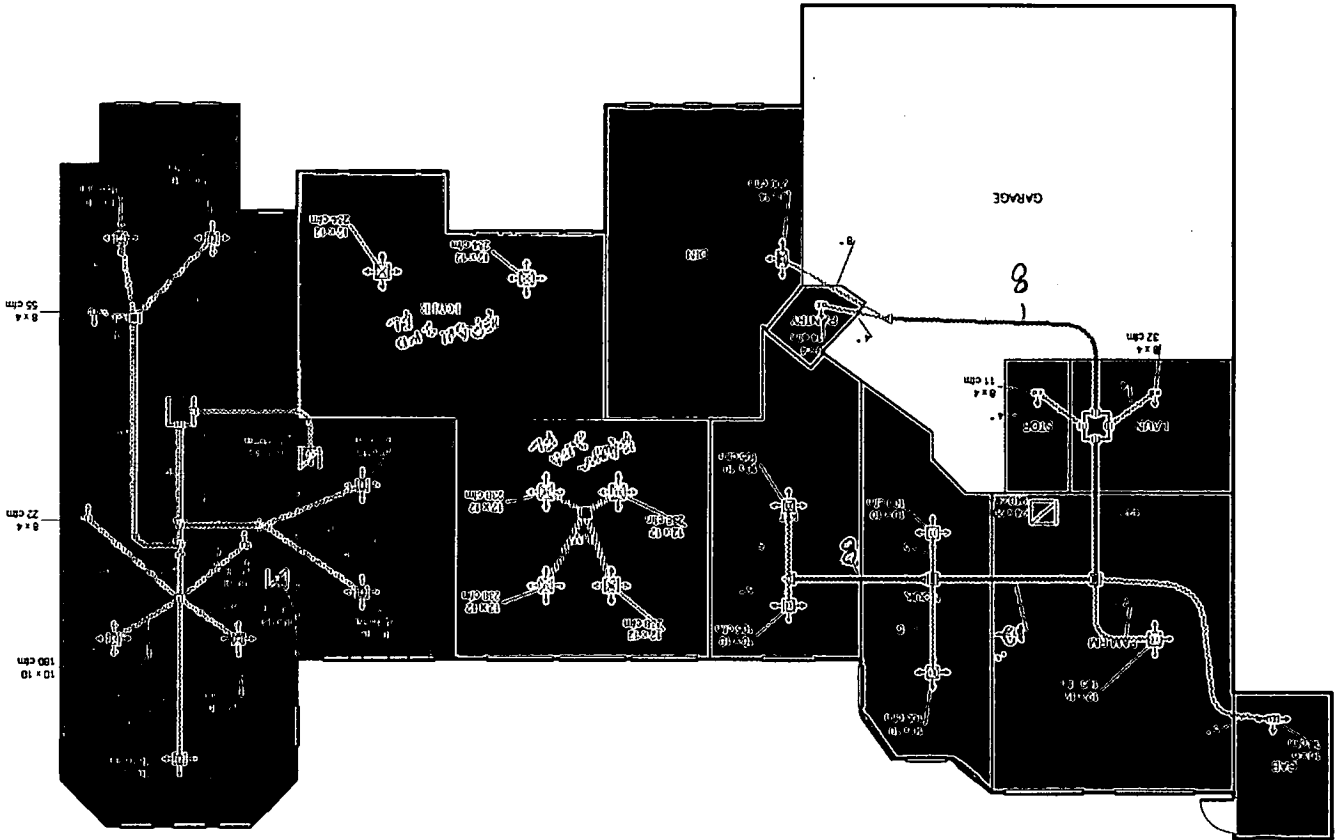
Name	Trunk Type	Htg (cfm)	Cig (cfm)	Design FR	Veloc (fpm)	Diam (in)	Rect Duct Size (in)	Duct Material	Trunk
st1	Peak AVF	0	683	0.150	869	12	0 x 0	VinFix	st1
st7	Peak AVF	0	422	0.150	774	12	0 x 0	VinFix	st1
st7A	Peak AVF	0	211	0.150	788	8	0 x 0	VinFix	st1
st6	Peak AVF	0	214	0.150	801	8	0 x 0	VinFix	st1

Italic values have been manually overridden

Job #: SCHECONDNIC
Performed by _____
for: _____
DRIFTWOOD CONST.
2163 NE PINE RIDGE ST
JENSEN BEACH, FL
Phone: 334-2577 Fax: 334-5877

ASSOCIATED AIR OF PSL inc.
1538 NIEMEYER CIR.
PORT ST. LUCIE, FL 34952
Phone: 772-335-7089 Fax: 772-335-7508

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Page 1
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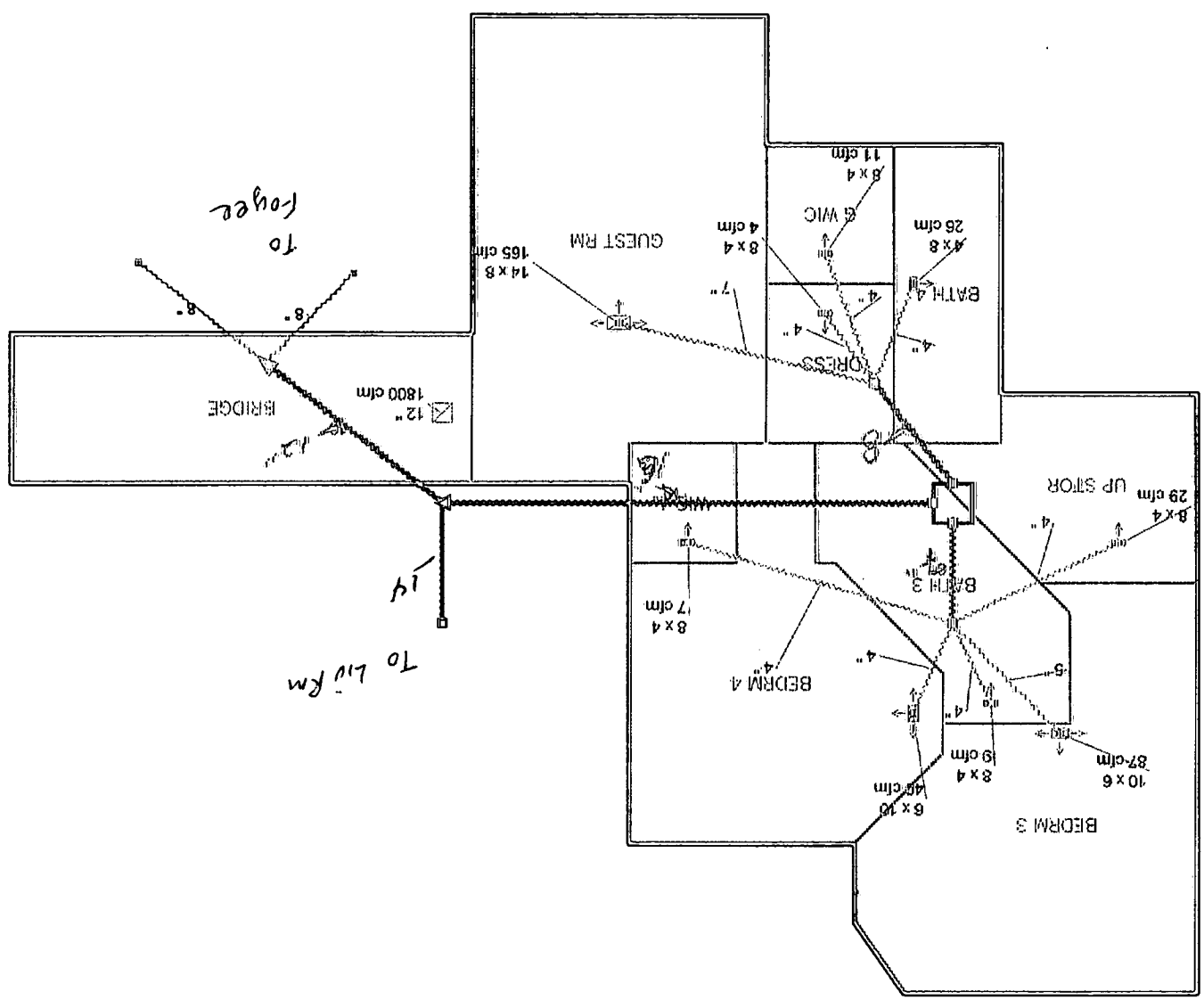


Sheet 1

Job #: SCHECODNIC
 Performed by
 for:

ASSOCIATED AIR OF PSL INC.
 1538 NIEMEYER CIR.
 PORT ST. LUCIE, FL 34952
 Phone: 772-335-7089 Fax: 772-335-7508

Scale: 1 : 105
 Page 1
 Right-Suite Residential
 5.9.56 RSR20246
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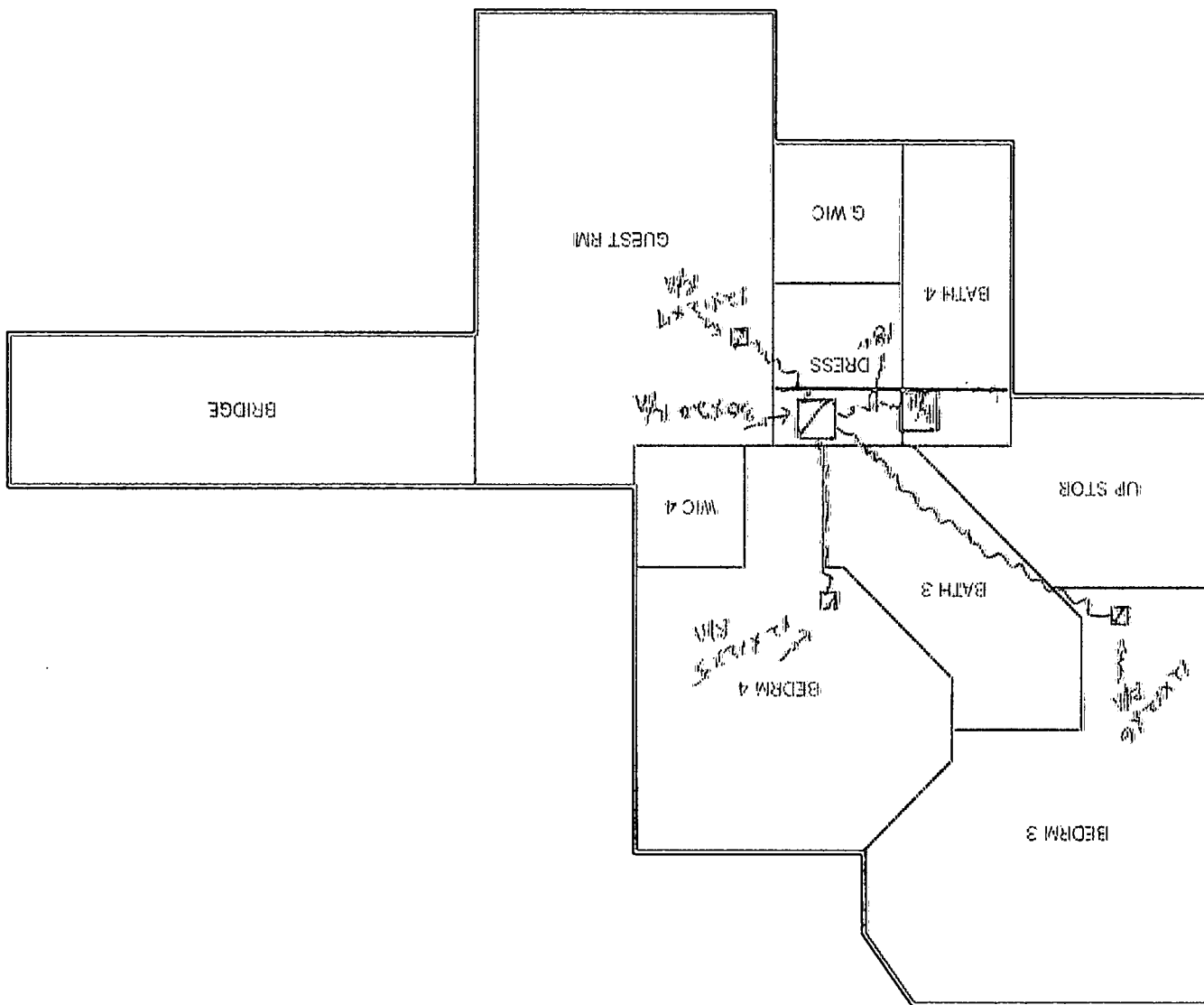


SECOND FL

Job #: SCHECODNIC
Performed by
for:
DRIFTWOOD CONST.
2163 NE PINE RIDGE ST
JENSEN BEACH, FL
Phone: 334-2577 Fax: 334-5877

ASSOCIATED AIR OF PSL INC.
1538 NIEMEYER CIR.
PORT ST. LUCIE, FL 34952
Phone: 772-335-7089 Fax: 772-335-7508

Scale: 1 : 105
Page 1
Right-Suite Residential
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SECOND FL



Right-J Worksheet

SECOND FL ZONE

ASSOCIATED AIR OF PSL inc.

Job: SCHECODNIC
 Date: 5-9-05
 By:

1538 NIEMEYER CIR., PORT ST. LUCIE, FL 34952 Phone: 772-335-7089 Fax: 772-335-7508

1 Room name	2 Exposed wall	3 Ceiling height	4 Room dimensions	5 Room area	Ty	Construction number	U-value (Btu/R ² -F)	Or	HTM		Gross	Area (ft ²) or perimeter (ft)	Heat	Cool	Area (ft ²) or perimeter (ft)	Gross	Heat	Cool	Area (ft ²) or perimeter (ft)	N/P/S	Heat	Cool	Load (Btu/h)	Load (Btu/h)
									U-value (Btu/R ² -F)	Or														
UP STOR	19.5 ft	9.4 ft	105.5 ft x 105.5 ft	11188 sq ft							1160	1160	89	89	106	106	8	8	106	N/P/S	Heat	Cool	185	234
SECOND FL ZONE	267.8 ft	13.6 ft		2158.4 sq ft							560	560	972	972	717	717	1486	1486	1469	N/P/S	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Gross	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Area (ft ²) or perimeter (ft)	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Area (ft ²) or perimeter (ft)	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Area (ft ²) or perimeter (ft)	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Area (ft ²) or perimeter (ft)	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Area (ft ²) or perimeter (ft)	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Area (ft ²) or perimeter (ft)	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Area (ft ²) or perimeter (ft)	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Area (ft ²) or perimeter (ft)	Heat	Cool	185	234
											1160	1160	89	89	106	106	8	8	106	Area (ft ²) or perimeter (ft)	Heat	Cool	185	234

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name:	DRIFTWOODSCHCODNIC
Address:	HERITAGE PLACE
City, State:	SEWALLS PT, FL
Owner:	SCHECODNIC
Climate Zone:	South
Builder:	DRIFTWOOD
Permitting Office:	
Permit Number:	
Jurisdiction Number:	

1. New construction or existing	Single family	1	Number of units, if multi-family	1
2. Single family or multi-family	Single family	4	Number of Bedrooms	4
3. Is this a worst case?	No	4796 ft ²	Conditioned floor area (ft ²)	4796 ft ²
4. Clear glass, default U-factor	Single Pane	695.3 ft ²	Glass area & type	Double Pane
5. Default tint	0.0 ft ²	0.0 ft ²	Labelled U or SHGC	0.0 ft ²
6. Raised Wood, Adjacent	ft ²	0.0 ft ²	Floor types	0.0 ft ²
7. Slab-On-Grade Edge Insulation	R=0.0, 294.5(p) ft ²	178.0 ft ²	Slab-On-Grade Edge Insulation	178.0 ft ²
8. Wall types	R=5.0, 5084.5 ft ²	R=11.0, 874.1 ft ²	Concrete, Int Insul, Exterior	R=11.0, 874.1 ft ²
9. Under Attic	R=30.0, 3570.9 ft ²	Sup. R=6.0, 133.0 ft ²	Frame, Wood, Adjacent	Sup. R=6.0, 133.0 ft ²
10. Ceiling types	a. N/A	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
11. Ducts	b. N/A	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
12. Cooling systems	a. Central Unit	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	b. Central Unit	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	c. Central Unit	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	SEER: 13.00	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	Cap: 30.0 kBtu/hr	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	SEER: 13.00	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	Cap: 36.2 kBtu/hr	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	SEER: 13.00	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	Cap: 34.0 kBtu/hr	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	COP: 1.00	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	Cap: 27.0 kBtu/hr	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	COP: 1.00	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	Cap: 34.0 kBtu/hr	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	COP: 1.00	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	Cap: 34.0 kBtu/hr	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	EF: 0.55	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	Cap: 50.0 gallons	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
13. Heating systems	a. Electric Strip	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	b. Electric Strip	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	c. Electric Strip	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
14. Hot water systems	a. Natural Gas	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	b. N/A	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	c. Conservation credits	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	(HR-Heat recovery, Solar	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	DHP-Dedicated heat pump)	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
15. HVAC credits	(CF-Ceiling fan, CV-Cross ventilation,	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	HF-Whole house fan,	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	PT-Programmable Thermostat,	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	MZ-C-Multizone cooling,	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²
	MZ-H-Multizone heating)	Sup. R=6.0, 133.0 ft ²	Concrete, Int Insul, Exterior	Sup. R=6.0, 133.0 ft ²

Glass/Floor Area: 0.18
Total as-built points: 70714
Total base points: 70835
PASS

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

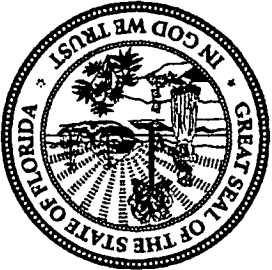
PREPARED BY: JK
DATE: 5-9-05

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

OWNER/AGENT: [Signature]
DATE: 5/9/05

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: _____



Summary Energy Code Results

Residential Whole Building Performance Method A

SCHECODNIC
HERITAGE PLACE
SEWALLS PT, FL

Project Title:
DRIFTWOODSCHECODNIC

Class 3 Rating
Registration No. 0
Climate: South

5/10/2005

Building Loads	
Base	As-Built
Summer: 1.3655E5 points	Summer: 154150 points
Winter: 4950 points	Winter: 9181 points
Hot Water: 8339 points	Hot Water: 8339 points
Total: 149842 points	Total: 171670 points

Energy Use	
Base	As-Built
Cooling: 58254 points	Cooling: 51860 points
Heating: 3106 points	Heating: 13078 points
Hot Water: 9476 points	Hot Water: 5777 points
Total: 70835 points	Total: 70714 points

PASS
e-Ratio: 1.00

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: HERITAGE PLACE, SEWALLS PT, FL, PERMIT #:

BASE		AS-BUILT	
GLASS TYPES .18 X Conditioned X BSPM = Points Floor Area		Overhang Omt Len Hgt Area X SPM X SOF = Points	
GLASS TYPES	Area X BSPM = Points	Type	R-Value Area X SPM = Points
SE 1.5 6.5 10.0 79.81 0.92	730.9	Single, Clear	10.0 79.81 0.92
NW 1.5 9.0 36.0 48.42 0.97	1693.5	Single, Clear	36.0 48.42 0.97
NW 1.5 8.0 8.0 48.42 0.96	372.2	Single, Clear	8.0 48.42 0.96
NW 1.5 9.0 10.0 73.41 0.96	708.1	Single, Clear	10.0 73.41 0.96
SW 1.5 9.0 17.5 73.41 0.96	1239.2	Single, Clear	17.5 73.41 0.96
S 1.5 9.0 17.5 66.93 0.95	1116.3	Single, Clear	17.5 66.93 0.95
SE 1.5 9.0 52.5 79.81 0.97	4048.7	Single, Clear	52.5 79.81 0.97
E 1.5 9.0 17.5 78.71 0.97	1334.6	Single, Clear	17.5 78.71 0.97
NE 1.5 10.0 24.0 55.61 0.98	1308.8	Single, Clear	24.0 55.61 0.98
SE 1.5 6.5 36.0 79.81 0.92	2631.4	Single, Clear	36.0 79.81 0.92
SE 1.5 13.5 9.0 79.81 1.00	717.4	Single, Clear	9.0 79.81 1.00
SE 1.5 18.5 30.0 30.12 1.00	902.7	Single, SC=0.43	30.0 30.12 1.00
SE 1.5 9.5 135.0 79.81 0.97	10480.7	Single, Clear	135.0 79.81 0.97
SE 1.5 19.0 120.0 79.81 1.00	9568.7	Single, Clear	120.0 79.81 1.00
NW 1.5 6.5 27.0 48.42 0.94	1225.3	Single, Clear	27.0 48.42 0.94
NW 1.5 13.5 10.0 48.42 1.00	482.1	Single, Clear	10.0 48.42 1.00
NW 1.5 23.0 48.0 15.60 1.00	747.0	Single, SC=0.43	48.0 15.60 1.00
NW 1.5 2.5 4.5 48.42 0.75	164.2	Single, Clear	4.5 48.42 0.75
NW 1.5 16.0 40.0 15.60 1.00	622.0	Single, SC=0.43	40.0 15.60 1.00
NW 1.5 19.0 36.0 48.42 1.00	1737.7	Single, Clear	36.0 48.42 1.00
SE 1.5 16.5 22.0 79.81 1.00	1754.1	Single, Clear	22.0 79.81 1.00
SW 1.5 10.6 4.8 73.41 0.98	346.7	Single, Clear	4.8 73.41 0.98
SW 1.5 17.0 18.0 73.41 1.00	1318.1	Single, Clear	18.0 73.41 1.00
S 6.0 7.5 24.0 66.93 0.56	894.7	Single, Clear	24.0 66.93 0.56
SE 14.0 2.1 4.8 79.81 0.39	147.9	Single, Clear	4.8 79.81 0.39
SE 14.0 8.0 18.0 79.81 0.42	604.9	Single, Clear	18.0 79.81 0.42
S 12.0 2.1 3.1 66.93 0.43	88.8	Single, Clear	3.1 66.93 0.43
S 12.0 8.3 12.1 66.93 0.47	384.0	Single, Clear	12.1 66.93 0.47
SE 12.0 2.0 18.0 79.81 0.39	554.7	Single, Clear	18.0 79.81 0.39
SE 12.0 9.0 60.0 30.12 0.46	828.6	Single, SC=0.43	60.0 30.12 0.46
As-Built Total:		873.3	
WALL TYPES		Area X BSPM = Points	
Adjacent	874.1	Concrete, Int Insul, Exterior	5.0 5084.5 2.00
Exterior	5084.5	Frame, Wood, Adjacent	11.0 874.1 1.00
Base Total:	5958.6	As-Built Total:	5958.6
	14602.3		11043.1

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: HERITAGE PLACE, SEWALLS PT, FL, PERMIT #:

AS-BUILT		BASE	
DOOR TYPES Area X BSPM = Points		DOOR TYPES Area X BSPM = Points	
Type	Area X SPM = Points	Type	Area X BSPM = Points
Adjacent	0.0	Adjacent	0.0
Exterior	6.40	Exterior	6.40
Base Total: 112.0		Base Total: 112.0	
As-Built Total: 17.5		As-Built Total: 17.5	
CEILING TYPES Area X BSPM = Points		CEILING TYPES Area X BSPM = Points	
Type	R-Value Area X SPM X SCM = Points	Type	R-Value Area X BSPM = Points
Under Attic	30.0 3570.9 2.77 X 1.00	Under Attic	3570.9 2.80
Base Total: 9891.4		Base Total: 9998.5	
As-Built Total: 3570.9		As-Built Total: 3670.9	
FLOOR TYPES Area X BSPM = Points		FLOOR TYPES Area X BSPM = Points	
Type	R-Value Area X SPM = Points	Type	R-Value Area X BSPM = Points
Slab	294.5(p) 0.60	Slab	294.5(p) -20.0
Raised	205.1 123.1	Raised	205.1 -443.0
Base Total: -5890.0		Base Total: -6333.0	
As-Built Total: 499.6		As-Built Total: -5766.9	
INFILTRATION Area X BSPM = Points		INFILTRATION Area X BSPM = Points	
Area X SPM = Points		Area X BSPM = Points	
4796.0 18.79		4796.0 18.79	
Summer Base Points: 136553.2		Summer Base Points: 136553.2	
Total Summer X System = Cooling Points		Total Summer X System = Cooling Points	
Total X Cap X Duct X System X Credit = Cooling Points	Ratio Multiplier	Total X Cap X Duct X System X Credit = Cooling Points	Ratio Multiplier
154150.3 0.471 (1.073 x 1.165 x 1.08) 0.262	0.950	154150.3 0.240 (1.073 x 1.165 x 1.08) 0.262	0.950
154150.3 0.289 (1.073 x 1.165 x 1.08) 0.262	0.950	154150.3 0.240 (1.073 x 1.165 x 1.08) 0.262	0.950
154150.3 1.00	1.350	154150.3 1.00	1.350
0.950 51859.5		0.950 51859.5	

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: HERITAGE PLACE, SEWALLS PT, FL, PERMIT #:

BASE		AS-BUILT	
GLASS TYPES .18 X Conditioned X BWPM = Points Floor Area		GLASS TYPES .18 X Conditioned X BWPM = Points Floor Area	
4796.0	2.38	2037.3	43.8
SE 1.5 6.5 10.0 4.22 1.04	1.00	SE 1.5 6.5 10.0 4.22 1.04	1.00
NW 1.5 9.0 36.0 6.00 1.00	1.00	NW 1.5 9.0 36.0 6.00 1.00	1.00
NW 1.5 8.0 8.0 6.00 1.00	1.00	NW 1.5 8.0 8.0 6.00 1.00	1.00
SW 1.5 9.0 10.0 5.06 1.00	1.00	SW 1.5 9.0 10.0 5.06 1.00	1.00
SW 1.5 9.0 17.5 5.06 1.00	1.00	SW 1.5 9.0 17.5 5.06 1.00	1.00
S 1.5 9.0 17.5 4.49 1.00	1.00	S 1.5 9.0 17.5 4.49 1.00	1.00
SE 1.5 9.0 52.5 4.22 1.03	1.03	SE 1.5 9.0 52.5 4.22 1.03	1.03
SE 1.5 9.0 17.5 4.77 1.01	1.01	SE 1.5 9.0 17.5 4.77 1.01	1.01
E 1.5 9.0 17.5 4.77 1.01	1.01	E 1.5 9.0 17.5 4.77 1.01	1.01
NE 1.5 10.0 24.0 5.84 1.00	1.00	NE 1.5 10.0 24.0 5.84 1.00	1.00
SE 1.5 6.5 36.0 4.22 1.04	1.04	SE 1.5 6.5 36.0 4.22 1.04	1.04
SE 1.5 13.5 9.0 4.22 1.02	1.02	SE 1.5 13.5 9.0 4.22 1.02	1.02
SE 1.5 13.5 9.0 4.22 1.02	1.02	SE 1.5 13.5 9.0 4.22 1.02	1.02
Single, Clear		Single, Clear	
Single, SC=0.43		Single, SC=0.43	
SE 1.5 18.5 30.0 5.54 1.01	1.01	SE 1.5 18.5 30.0 5.54 1.01	1.01
SE 1.5 9.5 135.0 4.22 1.02	1.02	SE 1.5 9.5 135.0 4.22 1.02	1.02
SE 1.5 19.0 120.0 4.22 1.01	1.01	SE 1.5 19.0 120.0 4.22 1.01	1.01
Single, Clear		Single, Clear	
Single, Clear		Single, Clear	
NW 1.5 6.5 27.0 6.00 0.99	0.99	NW 1.5 6.5 27.0 6.00 0.99	0.99
NW 1.5 13.5 10.0 6.00 1.00	1.00	NW 1.5 13.5 10.0 6.00 1.00	1.00
Single, Clear		Single, Clear	
Single, SC=0.43		Single, SC=0.43	
NW 1.5 23.0 48.0 6.30 1.00	1.00	NW 1.5 23.0 48.0 6.30 1.00	1.00
Single, Clear		Single, Clear	
NW 1.5 2.5 4.5 6.00 0.98	0.98	NW 1.5 2.5 4.5 6.00 0.98	0.98
Single, Clear		Single, Clear	
Single, SC=0.43		Single, SC=0.43	
NW 1.5 16.0 40.0 6.30 1.00	1.00	NW 1.5 16.0 40.0 6.30 1.00	1.00
Single, Clear		Single, Clear	
NW 1.5 19.0 36.0 6.00 1.00	1.00	NW 1.5 19.0 36.0 6.00 1.00	1.00
Single, Clear		Single, Clear	
SE 1.5 16.5 22.0 4.22 1.01	1.01	SE 1.5 16.5 22.0 4.22 1.01	1.01
Single, Clear		Single, Clear	
SW 1.5 10.6 4.8 5.06 1.00	1.00	SW 1.5 10.6 4.8 5.06 1.00	1.00
Single, Clear		Single, Clear	
SW 1.5 17.0 18.0 5.06 1.00	1.00	SW 1.5 17.0 18.0 5.06 1.00	1.00
Single, Clear		Single, Clear	
S 6.0 7.5 24.0 4.49 1.27	1.27	S 6.0 7.5 24.0 4.49 1.27	1.27
Single, Clear		Single, Clear	
SE 14.0 2.1 4.8 4.22 1.65	1.65	SE 14.0 2.1 4.8 4.22 1.65	1.65
Single, Clear		Single, Clear	
SE 14.0 8.0 4.22 1.49	1.49	SE 14.0 8.0 4.22 1.49	1.49
Single, Clear		Single, Clear	
S 12.0 2.1 3.1 4.49 1.44	1.44	S 12.0 2.1 3.1 4.49 1.44	1.44
Single, Clear		Single, Clear	
S 12.0 8.3 12.1 4.49 1.40	1.40	S 12.0 8.3 12.1 4.49 1.40	1.40
Single, Clear		Single, Clear	
SE 12.0 2.0 18.0 4.22 1.65	1.65	SE 12.0 2.0 18.0 4.22 1.65	1.65
Single, Clear		Single, Clear	
Single, SC=0.43		Single, SC=0.43	
SE 12.0 9.0 60.0 5.54 1.37	1.37	SE 12.0 9.0 60.0 5.54 1.37	1.37
As-Built Total:	873.3	As-Built Total:	4623.5
WALL TYPES Area X BWPM = Points		WALL TYPES Area X WPM = Points	
Adjacent 874.1 0.50 437.0	6958.6	Adjacent 874.1 0.90 4576.0	6013.1
Exterior 5084.5 0.60 3050.7	3487.8	Exterior 874.1 0.50 437.0	4576.0
Base Total:	6958.6	Base Total:	6013.1
As-Built Total: 3487.8 Concrete, Int Insul, Exterior Frame, Wood, Adjacent		As-Built Total: 6958.6 Concrete, Int Insul, Exterior Frame, Wood, Adjacent	

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: HERITAGE PLACE, SEWALLS PT, FL, PERMIT #:

AS-BUILT					BASE				
DOOR TYPES Area X BWPM = Points					DOOR TYPES Area X BWPM = Points				
Type	Area X WPM	=	Points		Type	Area X WPM	=	Points	
Adjacent	17.5	1.80	31.5		Adjacent	17.5	1.80	31.5	
Exterior Insulated					Exterior Insulated				
As-Built Total: 31.5					As-Built Total: 31.5				
CEILING TYPES Area X BWPM = Points					CEILING TYPES Area X BWPM = Points				
Type	R-Value	Area X WPM X WCM	=	Points	Type	R-Value	Area X WPM	=	Points
Under Attic	30.0	3570.9	0.10 X 1.00	357.1	Under Attic	30.0	3570.9	0.10 X 1.00	357.1
As-Built Total: 357.1					As-Built Total: 357.1				
FLOOR TYPES Area X BWPM = Points					FLOOR TYPES Area X BWPM = Points				
Slab	294.5(p)	-2.1	-618.4		Slab	294.5(p)	-2.1	-618.4	
Raised	205.1	-0.28	-57.4		Raised	205.1	-0.28	-57.4	
Slab-On-Grade Edge Insulation					Slab-On-Grade Edge Insulation				
As-Built Total: -675.9					As-Built Total: -675.9				
INFILTRATION Area X BWPM = Points					INFILTRATION Area X BWPM = Points				
Winter Base Points: 4950.0					Winter Base Points: 4950.0				
Total Winter X System = Heating Points					Total Winter X System = Heating Points				
Total X Cap X Duct X System X Credit = Heating Points	Component Ratio	Multiplier	Multiplier	Multiplier	Total X Cap X Duct X System X Credit = Heating Points	Component Ratio	Multiplier	Multiplier	Multiplier
9180.5	0.358	(1.099 x 1.137 x 1.14)	1.000	1.000	9180.5	0.358	(1.099 x 1.137 x 1.14)	1.000	1.000
9180.5	0.284	(1.099 x 1.137 x 1.14)	1.000	1.000	9180.5	0.284	(1.099 x 1.137 x 1.14)	1.000	1.000
9180.5	0.358	(1.099 x 1.137 x 1.14)	1.000	1.000	9180.5	0.358	(1.099 x 1.137 x 1.14)	1.000	1.000
Winter As-Built Points: 9180.5					Winter As-Built Points: 9180.5				
Total Winter X System = Heating Points					Total Winter X System = Heating Points				
4950.0					4950.0				
4796.0					4796.0				
-287.8					-287.8				
-0.06					-0.06				
-287.8					-287.8				
4950.0					4950.0				
0.6274					0.6274				
3105.7					3105.7				
9180.5					9180.5				
1.00					1.00				
1.425					1.425				
1.000					1.000				
1.000					1.000				
4680.4					4680.4				
3716.8					3716.8				
4680.4					4680.4				
13077.7					13077.7				

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: HERITAGE PLACE, SEWALLS PT, FL, PERMIT #:

BASE	AS-BUILT
WATER HEATING Number of X Multiplier = Total Bedrooms 4 2369.00 9476.0	As-Built Total: 50.0 0.55 4 1.00 1444.15 1.00 5776.6 5776.6 6776.6
Tank EF Number of X Tank X Multiplier X Credit = Total Volume Bedrooms Ratio Multiplier	Tank EF Number of X Tank X Multiplier X Credit = Total Volume Bedrooms Ratio Multiplier

CODE COMPLIANCE STATUS							
BASE				AS-BUILT			
Cooling Points = Total	+ Heating Points	+ Hot Water Points	= Total Points	Cooling Points = Total	+ Heating Points	+ Hot Water Points	= Total Points
58254	3106	9476	70835	51860	13078	5777	70714

PASS





1978-2005 27 Years of Service

CHAMBERS TRUSS INC
 3105 Oleander Avenue, Fort Pierce, Florida 34982-6423
 Fort Pierce 772-465-2012 Stuart 772-286-3302
 Vero Beach 772-569-2012 FAX 772-465-8711
 www.chamberstruss.com / mail@chamberstruss.com
 800-551-5932 in Florida

For 61G15-31.003 section 5 where a Truss Design Engineer seals the Truss Design Drawings.

JOB NUMBER 64876

*FILE # 7584
 12 5.5 P.M.*

PROJECT/ADDRESS
 COUNTY
 TRUSS COMPANY
 BUILDING CODE
 OCCUPANCY
 BUILDING DEPARTMENT
 MARTIN COUNTY

COMPUTER PROGRAM USED 6.2 Apr 28 2005 Mitek
 CHAMBERS TRUSS INC
 FLORIDA BUILDING CODE 2004
 II:NON RESTRICTIVE

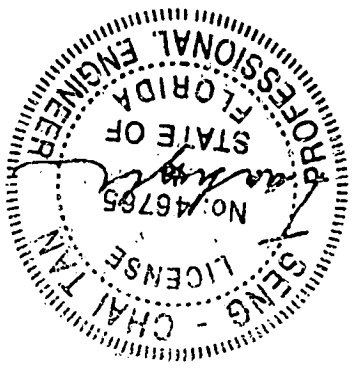
T/C L/L	T/C D/L	B/C L/L	B/C D/L	TOTAL	DURATION
40	20	15	0	45	1.25
10	10	0	5	55	1.00

This package includes this truss index sheet and 31 truss drawings.
 BCS1 1-03 replaces HIB-91 in truss drawing references as of 1/1/04.

As witness my seal, I hereby certify that I am the Truss Design Engineer and this index sheet conforms to 61G15-31.003, of the Florida Board of Professional Engineers, where a Truss Design Engineer seals truss engineering drawings. The seal on these drawings indicate acceptance of professional engineering responsibility solely of the truss components shown. Sealing engineer is the Truss Design Engineer as defined by 61G15-31.003. The suitability and use of this component for any particular building is the responsibility of the building designer, per ANSI/TPI 1-1995 Section 2.

NO TRUSS ID	DATE	NO TRUSS ID	DATE	NO TRUSS ID	DATE	NO TRUSS ID	DATE
29	11/15/05	FLQ	11/15/05	30	11/15/05	FLR	11/15/05
25	11/15/05	FLN	11/15/05	26	11/15/05	FLO	11/15/05
21	11/15/05	FLI	11/15/05	22	11/15/05	FLK	11/15/05
17	11/15/05	FLB	11/15/05	18	11/15/05	FLO	11/15/05
13	11/15/05	FL3	11/15/05	14	11/15/05	FL4	11/15/05
9	11/15/05	FGG	11/15/05	10	11/15/05	FGM	11/15/05
5	11/15/05	FGC	11/15/05	6	11/15/05	FGD	11/15/05
1	11/15/05	FG1	11/15/05	2	11/15/05	FG2	11/15/05
				3	11/15/05	FGA	11/15/05
				7	11/15/05	FGE	11/15/05
				11	11/15/05	FL1	11/15/05
				15	11/15/05	FLA	11/15/05
				19	11/15/05	FLE	11/15/05
				23	11/15/05	FLL	11/15/05
				27	11/15/05	FLO1	11/15/05
				31	11/15/05	FLS	11/15/05

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 West Palm Beach, FL 33405



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IMPORTANT NOTE: Contractor/Truss Installer is to install bracing to prevent collapse of trusses. Refer to TPI/WTCA "Building Component Safety Information" for handling and bracing of trusses. Apply plywood sheathing as trusses are installed to brace the top chords. Do not stand on trusses until trusses are braced per BCS1 & properly nailed to straps & hangers.

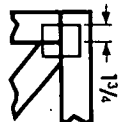
WARNING - Verify design parameters and READ NOTES ON THIS AND REVERSE SIDE BEFORE USE.
 Design valid for use only with Mitek connectors. This design is based only upon parameters shown, and is for an individual building component. Applicability of design parameters and proper incorporation of component is responsibility of building designer - not truss designer. Bracing shown is for lateral support of individual web members only. Additional temporary bracing to insure stability during construction is the responsibility of the erector. Additional permanent bracing of the overall structure is the responsibility of the building designer. For general guidance regarding location, quality control, storage, delivery, erection and bracing, consult ANSI/TPI1 Quality Criteria, DSB-89 and BCS11 Building Component Safety information available from Truss Plate Institute, 583 D Onofrio Drive, Madison, WI 53719.

14515 N. Outer Forty,
 Suite #300
 Chesterfield, MO 63017

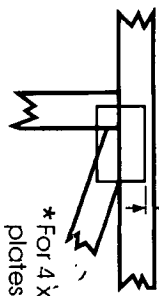


Symbols

PLATE LOCATION AND ORIENTATION



* Center plate on joint unless X, Y offsets are indicated. Dimensions are in ft-in-sixteenths. Apply plates to both sides of truss and securely seat.



* For 4 X 2 orientation, locate plates 0- $\frac{1}{16}$ " from outside edge of truss.

— * This symbol indicates the required direction of slots in connector plates.

* Plate location details available in Mitek 20/20 software or upon request.

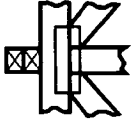
PLATE SIZE

4 X 4 The first dimension is the width perpendicular to slots. Second dimension is the length parallel to slots.

LATERAL BRACING

Indicated by symbol shown and/or by text in the bracing section of the output. Use T, I or Eliminator bracing if indicated.

BEARING

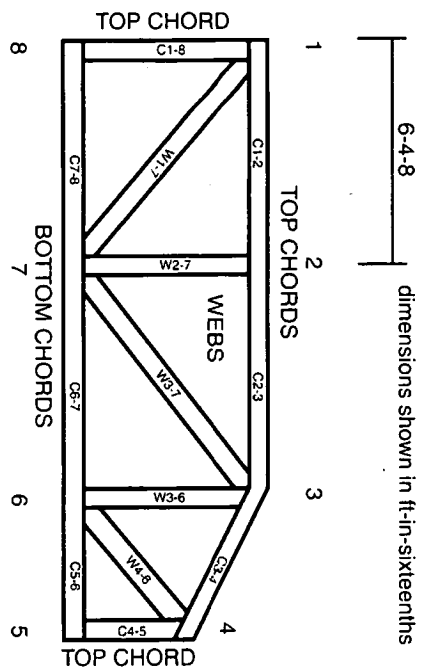


Indicates location where bearings (supports) occur. Icons vary but reaction section indicates joint number where bearings occur.

Industry Standards:

- ANSI/TP11: National Design Specification for Metal Plate Connected Wood Truss Construction.
- DSB-89: Design Standard for Bracing.
- BCS11: Building Component Safety Information, Guide to Good Practice for Handling, Installing & Bracing of Metal Plate Connected Wood Trusses.

Numbering System



JOINTS ARE GENERALLY NUMBERED/LETTERED CLOCKWISE AROUND THE TRUSS STARTING AT THE JOINT FARTHEST TO THE LEFT.

CHORDS AND WEBS ARE IDENTIFIED BY END JOINT NUMBERS/LETTERS.

CONNECTOR PLATE CODE APPROVALS

BOCA	96-31, 95-43, 96-20-1, 96-67, 84-32
ICBO	4922, 5243, 5363, 3907
SBCCI	9667, 9730, 9604B, 9511, 9432A

General Safety Notes

Failure to Follow Could Cause Property Damage or Personal Injury

1. Additional stability bracing for truss system, e.g. diagonal or X-bracing, is always required. See BCS11.
2. Never exceed the design loading shown and never stock materials on inadequately braced trusses.
3. Provide copies of this truss design to the building designer, erection supervisor, property owner and all other interested parties.
4. Cut members to bear tightly against each other.
5. Place plates on each face of truss at each joint and embed fully. Knots and wane at joint locations are regulated by ANSI/TP11.
6. Design assumes trusses will be suitably protected from the environment in accord with ANSI/TP11.
7. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication.
8. Unless expressly noted, this design is not applicable for use with fire retardant or preservative treated lumber.
9. Camber is a non-structural consideration and is the responsibility of truss fabricator. General practice is to camber for dead load deflection.
10. Plate type, size, orientation and location dimensions shown indicate minimum plating requirements.
11. Lumber used shall be of the species and size, and in all respects, equal to or better than that specified.
12. Top chords must be sheathed or purlins provided at spacing shown on design.
13. Bottom chords require lateral bracing at 10 ft. spacing, or less, if no ceiling is installed, unless otherwise noted.
14. Connections not shown are the responsibility of others.
15. Do not cut or alter truss member or plate without prior approval of a professional engineer.
16. Install and load vertically unless indicated otherwise.



HANGER/CONNECTOR SCHEDULE

JOB NUMBER 64876

ALL HANGERS ARE U46 EXCEPT AS NOTED

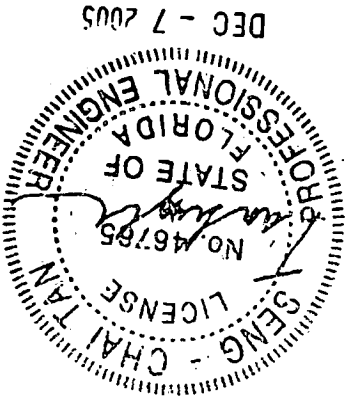
CARRIED	CARRIER	HANGER	CARRIED	CARRIER	CARRIED	CARRIER
TRUSS	TRUSS	U46	8-16D COMMON	U46	8-16D COMMON	U46
FG1	GRA	HU410	10-10d Common	HU410	10-10d Common	HU410
FG2	FG1	HGUS26-2	8-16d Common	HGUS26-2	8-16d Common	HGUS26-2
FGF	FGA	HGUS26-2	8-16d Common	HGUS26-2	8-16d Common	HGUS26-2
FGG	FGA	HGUS26-2	8-16d Common	HGUS26-2	8-16d Common	HGUS26-2
FGM	GRC	HGUS26-2	8-16d Common	HGUS26-2	8-16d Common	HGUS26-2
FLA	GRC	HU46	6-16d Common	HU46	6-16d Common	HU46
FLA1	GRC	HU46	6-16d Common	HU46	6-16d Common	HU46
FLB	GRC	HU46	6-16d Common	HU46	6-16d Common	HU46
FLL	FGG	HU46	6-16d Common	HU46	6-16d Common	HU46

Guide tabs or domes in the hanger angle nails for toe nailing. Do not bend over or flatten guide tabs or domes in hanger.

Fasten End Jacks to Hip Carriers with 3-10d Common Nails Top Chord to Top Chord and Bottom Chord to Bottom Chord (6 nails in all). Fasten 7' Set Back (9' 10-1/2" span) or less King Jack (Corner Jack Carrier) to Hip Carrier at Top Chord with 2 10d Common Nails on each face of the King Jack (4 nails in all). Bottom Chord with 16" strap (MTS16 or equal) with 12 10d Common Nails or Hanger by installer capable of carrying 899lbs.

Fasten Valley Member to Trusses by applying 6" Wedge nailed to Truss or bevel cut valley Member bottom chord. 2 hurricane clips or a MTS18 strap at 48" on center to truss below with a minimum of 10 10dX1-1/2" nails. Valley members connected to the top chord of trusses below replace sheathing as bracing when a minimum of 2 bd nails is used at each connection.

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 West Palm Beach, FL 33405



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WARNING - Verify design parameters and READ NOTES ON THIS AND REVERSE SIDE BEFORE USE.

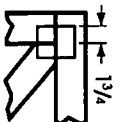
Design valid for use only with Mitek connectors. This design is based only upon parameters shown, and is for an individual building component. Applicability of design parameters and proper incorporation of component is responsibility of building designer - not truss designer. Bracing shown is for lateral support of individual web members only. Additional temporary bracing to insure stability during construction is the responsibility of the erector. Additional permanent bracing of the overall structure is the responsibility of the building designer. For general guidance regarding fabrication, quality control, storage, delivery, erection and bracing, consult ANSI/TPI1 Quality Criteria, DSR-89 and BCS11 Building Component Safety information available from Truss Plate Institute, 583 D Onofrio Drive, Madison, WI 53719.

14515 N. Outer Forty,
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 Chestersfield, MO 63017

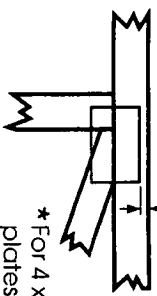


Symbols

PLATE LOCATION AND ORIENTATION



* Center plate on joint unless x,y offsets are indicated. Dimensions are in ft-in-sixteenths. Apply plates to both sides of truss and securely seat.



* For 4 x 2 orientation, locate plates 0 - 1/16" from outside edge of truss.

— * This symbol indicates the required direction of slots in connector plates.

* Plate location details available in Mitek 20/20 software or upon request.

PLATE SIZE

4 X 4

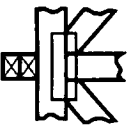
The first dimension is the width perpendicular to slots. Second dimension is the length parallel to slots.

LATERAL BRACING



Indicated by symbol shown and/or by text in the bracing section of the output. Use T, I or Eliminator bracing if indicated.

BEARING

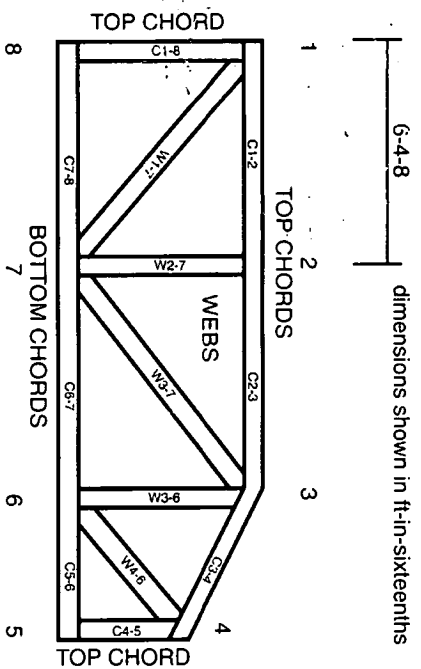


Indicates location where bearings (supports) occur. Icons vary but reaction section indicates joint number where bearings occur.

Industry Standards:

ANSI/TPI1: National Design Specification for Metal Plate Connected Wood Truss Construction.
DSB-89: Design Standard for Bracing.
BCS11: Building Component Safety Information, Guide to Good Practice for Handling, Installing & Bracing of Metal Plate Connected Wood Trusses.

Numbering System



JOINTS ARE GENERALLY NUMBERED/LETTERED CLOCKWISE AROUND THE TRUSS STARTING AT THE JOINT FARTHEST TO THE LEFT.

CHORDS AND WEBS ARE IDENTIFIED BY END JOINT NUMBERS/LETTERS.

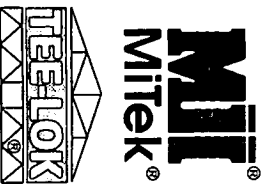
CONNECTOR PLATE CODE APPROVALS

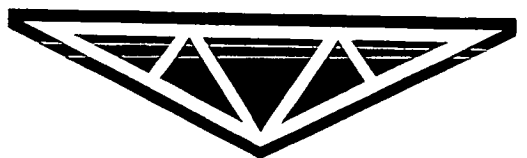
BOCA	96-31, 95-43, 96-20-1, 96-67, 84-32
ICBO	4922, 5243, 5363, 3907
SBCCI	9667, 9730, 9604B, 9511, 9432A

General Safety Notes

Failure to Follow Could Cause Property Damage or Personal Injury

1. Additional stability bracing for truss system, e.g. diagonal or X-bracing, is always required. See BCS11.
2. Never exceed the design loading shown and never stock materials on inadequately braced trusses.
3. Provide copies of this truss design to the building designer, erection supervisor, property owner and all other interested parties.
4. Cut members to bear tightly against each other.
5. Place plates on each face of truss at each joint and embed fully. Knots and ware at joint locations are regulated by ANSI/TPI1.
6. Design assumes trusses will be suitably protected from the environment in accord with ANSI/TPI1.
7. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication.
8. Unless expressly noted, this design is not applicable for use with fire retardant or preservative treated lumber.
9. Camber is a non-structural consideration and is the responsibility of truss fabricator. General practice is to camber for dead load deflection.
10. Plate type, size, orientation and location dimensions shown indicate minimum plating requirements.
11. Lumber used shall be of the species and size, and in all respects, equal to or better than that specified.
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13. Bottom chords require lateral bracing at 10 ft. spacing, or less, if no ceiling is installed, unless otherwise noted.
14. Connections not shown are the responsibility of others.
15. Do not cut or alter truss member or plate without prior approval of a professional engineer.
16. Install and load vertically unless indicated otherwise.





1978-2005 27 Years of Service

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 3105 Olander Avenue, Fort Pierce, Florida 34982-6423
 Fort Pierce 772-465-2012 Stuart 772-286-3302
 Vero Beach 772-569-2012 FAX 772-465-8711
 www.chamberstruss.com / mail@chamberstruss.com
 800-551-5932 in Florida

For 61G15-31.003 section 5 where a Truss Design Engineer seals the Truss Design Drawings.

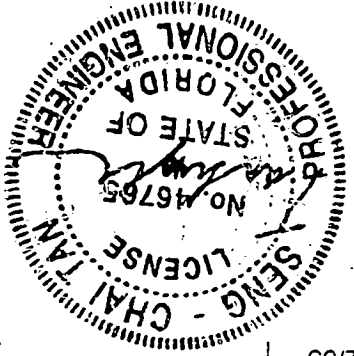
JOB NUMBER 62349

PROJECT/ADDRESS
 COUNTY
 TRUSS COMPANY
 BUILDING CODE
 OCCUPANCY
 BUILDING DEPARTMENT
 MARTIN COUNTY
 CHAMBERS TRUSS INC
 FLORIDA BUILDING CODE 2004
 II: Non Restrictive
 MARTIN COUNTY
 COMPUTER PROGRAM USED
 6.2 Apr 28 2005 Mitek
 T/C L/L
 30
 15
 10
 40
 FLOOR LOAD
 WIND SPEED: 140 WIND DESIGN: ASCE 7-98
 T/C D/L
 0
 0
 5
 55
 1.00
 B/C L/L
 10
 10
 5
 55
 TOTAL
 DURATION
 1.33

This package includes this truss index sheet and 51 truss drawings.
 BCSI 1-03 replaces HB-91 in truss drawing references as of 1/1/04.
 As witness my seal, I hereby certify that I am the Truss Design Engineer and this index sheet conforms to 61G15-31.003, of the Florida Board of Professional Engineers, where a Truss Design Engineer seals truss engineering drawings. The seal on these drawings indicate acceptance of professional engineering responsibility solely of the truss components shown. Sealing engineer is the Truss Design Engineer as defined by 61G15-31.003. The suitability and use of this component for any particular building is the responsibility of the building designer, per ANSI/TPI 1-1995 Section 2.

NO TRUSS ID	DATE	NO TRUSS ID	DATE	NO TRUSS ID	DATE	NO TRUSS ID	DATE
1 A7	12/02/05	2 A8	12/02/05	3 AT5	12/02/05	4 AT6	12/02/05
5 B	12/02/05	6 B1	12/02/05	7 B2	12/02/05	8 B3	12/02/05
9 B4	12/02/05	10 B7	12/02/05	11 B8	12/02/05	12 B9	12/02/05
13 C	12/02/05	14 C1	12/02/05	15 C2	12/02/05	16 C3	12/02/05
17 CC	12/02/05	18 D	12/02/05	19 GRA	12/02/05	20 GRC	12/02/05
21 GRD	12/02/05	22 GRE	12/02/05	23 GRE1	12/02/05	24 GRE2	12/02/05
25 GRF	12/02/05	26 GRF1	12/02/05	27 GRP	12/02/05	28 J2	12/02/05
29 J2A	12/02/05	30 J2B	12/02/05	31 J3B	12/02/05	32 J4	12/02/05
33 J6	12/02/05	34 J6A	12/02/05	35 J6B	12/02/05	36 JA	12/02/05
37 JB	12/02/05	38 JD	12/02/05	39 KJ3A	12/02/05	40 KJ4	12/02/05
41 KJ5A	12/02/05	42 KJ5C	12/02/05	43 KJc	12/02/05	44 KJd	12/02/05
45 P	12/02/05	46 P1	12/02/05	47 P2	12/02/05	48 P3	12/02/05
49 PBA	12/07/05	50 V4	12/02/05	51 V8	12/02/05		

IMPORTANT NOTE: Contractor/Truss installer is to install bracing to prevent collapse of trusses. Refer to TPI/WTCA "Building Component Safety Information" for handling and bracing of trusses. Apply plywood sheathing as trusses are installed to brace the top chords. Do not stand on trusses until trusses are braced per BCSI & properly nailed to straps & hangers.



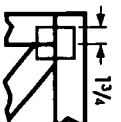
DEC 12 2005

14515 N. Outer Forty,
 Suite #300
 Chesterfield, MO 63017
MITEK
MJI

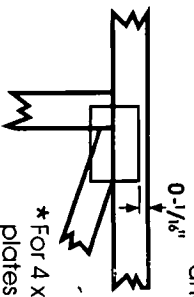
WARNING - Verify design parameters and READ NOTES ON THIS AND REVERSE SIDE BEFORE USE.
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Symbols

PLATE LOCATION AND ORIENTATION



* Center plate on joint unless x, y offsets are indicated. Dimensions are in ft-in-sixteenths. Apply plates to both sides of truss and securely seat.



* For 4 x 2 orientation, locate plates 0 - 1/16" from outside edge of truss.



* This symbol indicates the required direction of slots in connector plates.

* Plate location details available in **Mitek 20/20 software** or upon request.

PLATE SIZE

4 X 4

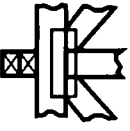
The first dimension is the width perpendicular to slots. Second dimension is the length parallel to slots.

LATERAL BRACING



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BEARING



Indicates location where bearings (supports) occur. Icons vary but reaction section indicates joint number where bearings occur.

Industry Standards:

ANSI/TP11: National Design Specification for Metal Plate Connected Wood Truss Construction.

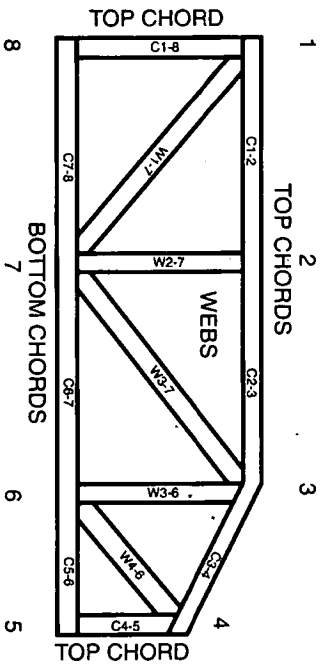
DSB-89: Design Standard for Bracing.

BCS11: Building Component Safety Information, Guide to Good Practice for Handling, Installing & Bracing of Metal Plate

Connected Wood Trusses.

Numbering System

6-4-8 - dimensions shown in ft-in-sixteenths



JOINTS ARE GENERALLY NUMBERED/LETTERED CLOCKWISE AROUND THE TRUSS STARTING AT THE JOINT FARTHEST TO THE LEFT.

CHORDS AND WEBS ARE IDENTIFIED BY END JOINT NUMBERS/LETTERS.

CONNECTOR PLATE CODE APPROVALS

BOCA	96-31, 95-43, 96-20-1, 96-67, 84-32
ICBO	4922, 5243, 5363, 3907
SBCCI	9667, 9730, 9604B, 9511, 9432A

General Safety Notes

Failure to Follow Could Cause Property Damage or Personal Injury

1. Additional stability bracing for truss system, e.g. diagonal or X-bracing, is always required. See BCS11.
2. Never exceed the design loading shown and never stack materials on inadequately braced trusses.
3. Provide copies of this truss design to the building designer, erection supervisor, property owner and all other interested parties.
4. Cut members to bear tightly against each other.
5. Place plates on each face of truss at each joint and embed fully. Knots and wane at joint locations are regulated by ANSI/TP11.
6. Design assumes trusses will be suitably protected from the environment in accord with ANSI/TP11.
7. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication.
8. Unless expressly noted, this design is not applicable for use with fire retardant or preservative treated lumber.
9. Camber is a non-structural consideration and is the responsibility of truss fabricator. General practice is to camber for dead load deflection.
10. Plate type, size, orientation and location dimensions shown indicate minimum plating requirements.
11. Lumber used shall be of the species and size, and in all respects, equal to or better than that specified.
12. Top chords must be sheathed or purlins provided at spacing shown on design.
13. Bottom chords require lateral bracing at 10 ft. spacing, or less, if no ceiling is installed, unless otherwise noted.
14. Connections not shown are the responsibility of others.
15. Do not cut or alter truss member or plate without prior approval of a professional engineer.
16. Install and load vertically unless indicated otherwise.



HANGER/CONNECTOR SCHEDULE

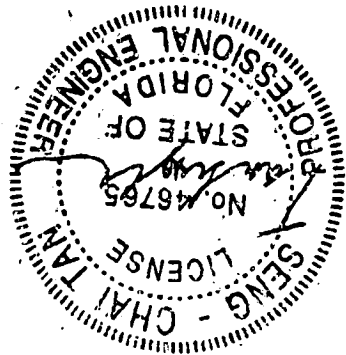
JOB NUMBER 62349

ALL HANGERS ARE HUS26 EXCEPT AS NOTED

CARRIED	CARRIER	HANGER	HUS26	CARRIED	6-16d Common
TRUSS	CARRIER	TRUSS		NAILS/FASTENERS	14-16d Common
				CARRIER	NAILS/FASTENERS

Guide tabs or domes in the hanger angle nails for toe nailing. Do not bend over or flatten guide tabs or domes in hanger.
 Fasten End Jacks to Hip Carriers with 3-10d Common Nails Top Chord to Top Chord and Bottom Chord to Bottom Chord (6 nails in all). Fasten 7' Set Back (9' 10-3/4" span) or less King Jack (Corner Jack Carrier) to Hip Carrier at Top Chord with 2 10d Common Nails on each face of the King Jack (4 nails in all). Bottom Chord with 16" strap (MTS16 or equal) with 12 10d Common Nails or Hanger by installer capable of carrying 899lbs.
 Fasten Valley Member to Trusses by applying 6" Wedge nailed to Truss or bevel cut valley Member bottom chord. 2 hurricane clips or a MTS18 strap at 48" on center to truss below with a minimum of 10 10dX1-1/2" nails. Valley members connected to the top chord of trusses below replace sheathing as bracing when a minimum of 2 8d nails is used at each connection.

SENG-CHAI TAN, P.E.
 License No. 46765
 345 Alhambra PL
 West Palm Beach, FL 33405



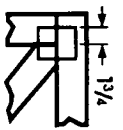
DEC 12 2005

WARNING - Verify design parameters and READ NOTES ON THIS AND REVERSE SIDE BEFORE USE.

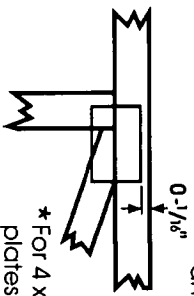
Design valid for use only with Mitek connectors. This design is based only upon parameters shown, and is for an individual building component. Application of design parameters and proper incorporation of component is responsibility of building designer - not truss designer. Bracing shown is for lateral support of individual web members only. Additional temporary bracing to insure stability during construction is the responsibility of the erector. Additional permanent bracing of the overall structure is the responsibility of the building designer. For general guidance regarding fabrication, quality control, storage, delivery, erection and bracing, consult ANSI/TPI1 Quality Criteria, DSB-89 and BCS11 Building Component Safety Information available from Truss Plate Institute, 583 D'Oroffo Drive, Madison, WI 53719.

Symbols

PLATE LOCATION AND ORIENTATION



* Center plate on joint unless x,y offsets are indicated. Dimensions are in ft-in-sixteenths. Apply plates to both sides of truss and securely seat.



* For 4 x 2 orientation, locate plates 0 - 1/16" from outside edge of truss.



* This symbol indicates the required direction of slots in connector plates.

* Plate location details available in Mitek 20/20 software or upon request.

PLATE SIZE

4 X 4

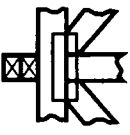
The first dimension is the width perpendicular to slots. Second dimension is the length parallel to slots.

LATERAL BRACING



Indicated by symbol shown and/or by text in the bracing section of the output. Use T, I or Eliminator bracing if indicated.

BEARING



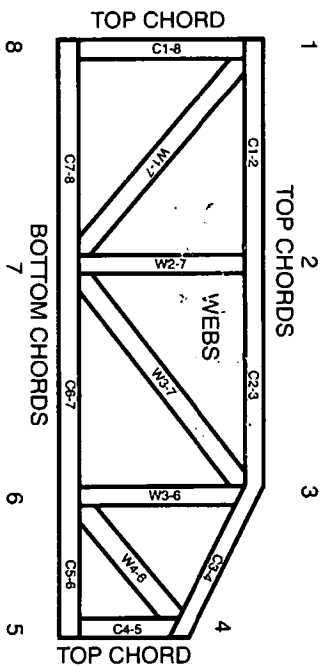
Indicates location where bearings (supports) occur. Icons vary but reaction section indicates joint number where bearings occur.

Industry Standards:

ANSI/TP11: National Design Specification for Metal Plate Connected Wood Truss Construction.
DSB-89: Design Standard for Bracing.
BCS11: Building Component Safety Information, Guide to Good Practice for Handling, Installing & Bracing of Metal Plate Connected Wood Trusses.

Numbering System

6-4-8 dimensions shown in ft-in-sixteenths



JOINTS ARE GENERALLY NUMBERED/LETTERED CLOCKWISE AROUND THE TRUSS STARTING AT THE JOINT FARTHEST TO THE LEFT.

CHORDS AND WEBS ARE IDENTIFIED BY END JOINT NUMBERS/LETTERS.

CONNECTOR PLATE CODE APPROVALS

BOCA	96-31, 95-43, 96-20-1, 96-67, 84-32
ICBO	4922, 5243, 5363, 3907
SBCCI	9667, 9730, 9604B, 9511, 9432A

General Safety Notes

Failure to Follow Could Cause Property Damage or Personal Injury

1. Additional stability bracing for truss system, e.g. diagonal or X-bracing, is always required. See BCS11.
2. Never exceed the design loading shown and never stack materials on inadequately braced trusses.
3. Provide copies of this truss design to the building designer, erection supervisor, property owner and all other interested parties.
4. Cut members to bear tightly against each other.
5. Place plates on each face of truss at each joint and embed fully. Knots and ware at joint locations are regulated by ANSI/TP11.
6. Design assumes trusses will be suitably protected from the environment in accord with ANSI/TP11.
7. Unless otherwise noted, moisture content of lumber shall not exceed 19% at time of fabrication.
8. Unless expressly noted, this design is not applicable for use with fire retardant or preservative treated lumber.
9. Camber is a non-structural consideration and is the responsibility of truss fabricator. General practice is to camber for dead load deflection.
10. Plate type, size, orientation and location dimensions shown indicate minimum plating requirements.
11. Lumber used shall be of the species and size, and in all respects, equal to or better than that specified.
12. Top chords must be sheathed or purlins provided at spacing shown on design.
13. Bottom chords require lateral bracing at 10 ft. spacing, or less, if no ceiling is installed, unless otherwise noted.
14. Connections not shown are the responsibility of others.
15. Do not cut or alter truss member or plate without prior approval of a professional engineer.
16. Install and load vertically unless indicated otherwise.



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

BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION



NOTICE OF ACCEPTANCE (NOA)

F.E.C.P. Corporation - Cast-Crete Division

P.O. Box 24567

Tampa, Florida 33623

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami-Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (in Miami-Dade County) and/or the AHJ (in areas other than Miami-Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: "Cast-Crete" 8 inch High Strength Precast and Prestressed Concrete Lintels

APPROVAL DOCUMENT: Drawing No. FD8, titled "Cast-Crete 8" Lintel Fabrication Details", sheet 1 of 1, prepared by Craig Parrino, P.E., dated June 7, 1996, revision #2 dated January 28, 2003, and Drawing No. LTR, titled "Cast-Crete 8" Lintel Safe Load Tables", sheets 1 & 2 of 2, prepared by Craig Parrino, P.E., dated June 7, 1996, revision #5 dated March 24, 2003, all bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELLING: Each lintel shall bear a permanent label with the manufacturer's name or logo and the Miami-Dade County logo.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA # 01-0209.03 & consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Helmy A. Makar, P.E.

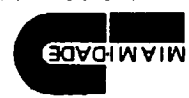
Helmy A. Makar
03/07/03



NOA No 03-0605.05
Expiration Date: 05/21/2006
Approval Date: 08/07/2003
Page 1

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

BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION



NOTICE OF ACCEPTANCE (NOA)

PGT Industries
1070 Technology Drive
Nokomis, FL 34274

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (in Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series C-740 Aluminum Casement Window - Impact

APPROVAL DOCUMENT: Drawing No. 7045-8, titled "Aluminum Casement Window, Impact", sheets 1 through 12 of 12, dated 12/17/02 with revision C dated 7/10/03, prepared by manufacturer, signed and sealed by Lucas A. Turner, P.E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the material, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA # 02-1224.02 consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by Manuel Perez, P.E.



NOA No 03-0611.02
Expiration Date: May 22, 2008
Approval Date: October 9, 2003
Page 1



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

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

CONTRACTOR ENFORCEMENT DIVISION
(305) 375-2966 FAX (305) 375-2908

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Entegra Roof Tile Corporation
1201 N.W. 18 Street
Pompano Beach, FL 33069

Your application for Notice of Acceptance (NOA) of:

Valencia Spanish "S" Concrete

under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Types of Construction, and completely described herein, has been recommended for acceptance by the Miami-Dade County Building Code Compliance Office (BCCO) under the conditions specified herein.

This NOA shall not be valid after the expiration date stated below. BCCO reserves the right to secure this product or material at any time from a jobsite or manufacturer's plant for quality control testing. If this product or material fails to perform in the approved manner, BCCO may revoke, modify, or suspend the use of such product or material immediately. BCCO reserves the right to revoke this approval, if it is determined by BCCO that this product or material fails to meet the requirements of the South Florida Building Code.

The expense of such testing will be incurred by the manufacturer.

ACCEPTANCE NO.: 01-0417.08

EXPIRES: 06/07/2006

Raul Rodriguez
Chief Product Control Division

**THIS IS THE COVERSHEET, SEE ADDITIONAL PAGES FOR SPECIFIC AND GENERAL
CONDITIONS
BUILDING CODE & PRODUCT REVIEW COMMITTEE**

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

Francisco J. Quintana, R.A.

Director
Miami-Dade County
Building Code Compliance Office

APPROVED: 06/07/2001



BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

PJT Industries
1070 Technology Drive
Nokomis, FL 34275

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (in Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the Florida Building Code, including the High Velocity Hurricane Zone.

DESCRIPTION: Series "PW-701" Aluminum Picture Window-LMI

APPROVAL DOCUMENT: Drawing No. 4259-4, titled "Aluminum Picture Window, Impact", sheets 1 through 10 of 10, prepared by manufacturer, dated 7/14/03, with revision "A", dated 12/15/03, signed and sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein. **RENEWAL** of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISING: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by Theodore Berman, P.E.



NOA No 03-1105.01
Expiration Date: February 19, 2009
Approval Date: February 19, 2004
Page 1



NOA No 02-0927.13
 Expiration Date: February 13, 2008
 Approval Date: February 13, 2003
 Page 1

The submitted documentation was reviewed by Ishaq I. Chanda, P.E. mentioned above.

This NOA revises & renews NOA # 02-0702.01 and, consists of this page 1 as well as approval document and shall be available for inspection at the job site at the request of the Building Official. **INSPECTION:** A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors

be done in its entirety. **ADVERTISEMENT:** The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall with any section of this NOA shall be cause for termination and removal of NOA.

product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any **TERMINATION** of this NOA will occur after the expiration date or if there has been a revision or change in the change in the applicable building code negatively affecting the performance of this product.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

LABELLING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and

MISSILE IMPACT RATING: Large and Small Missile Impact

expiration date by the Miami-Dade County Product Control Division. P.E., bearing the Miami-Dade County Product Control Renewal stamp with the Notice of Acceptance number and of 8, prepared by manufacturer, dated 7-12-99 and last revised on 01-17-03, signed and sealed by Robert L. Clark, **APPROVAL DOCUMENT:** Drawing No. 972, titled "Aluminum French Door w/ Sidelites", sheets 1 through 8

DESCRIPTION: Series FD-101 Outswing Aluminum French Door w/ Sidelites - Impact

Zone of the Florida Building Code.

This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane

Zone of the Florida Building Code. This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane material fails to meet the requirements of the applicable building code. to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately have this product or material tested for quality assurance purposes. If this product or material fails to perform Division (in Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control

the Authority Having Jurisdiction (AHJ). The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by This NOA is being issued under the applicable rules and regulations governing the use of construction materials.

SCOPE:

Nokomis, FL 34274

P.O. Box 1529

PGT Industries

NOTICE OF ACCEPTANCE (NOA)

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



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



NOA No 02-0701.09
 Expiration Date: June 28, 2006
 Approval Date: July 12, 2002
 Page 1

The submitted documentation was reviewed by Theodore Berman, P.E.
 This NOA revises NOA # 01-0323.02 and, consists of this page 1 as well as approval document mentioned above.
 and shall be available for inspection at the job site at the request of the Building Official.
INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors
 be done in its entirety.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by
 the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall
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TERMINATION: of this NOA will occur after the expiration date or if there has been a revision or change in the
 materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any
 product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply
 change in the applicable building code negatively affecting the performance of this product.

RENEWAL: of this NOA shall be considered after a renewal application has been filed and there has been no
 following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.
LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and

MISSILE IMPACT RATING: Large and Small Missile Impact
 Dade County Product Control Division.

through 6 of 6, prepared, signed and sealed by Robert L. Clark, P.E., dated 5/24/01, bearing the Miami-Dade
APPROVAL DOCUMENT: Drawing No. 6621, titled "1" x Heavy Wall Mullion Arrangement Detail", sheets 1
 County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-

DESCRIPTION: 1" x Heavy Wall-Aluminum Tube Clipped Mullion
 Zone of the Florida Building Code.

This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane
 material fails to meet the requirements of the applicable building code.

to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or
 revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right
 the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately
 have this product or material tested for quality assurance purposes. If this product or material fails to perform in
 Division (in Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to
 This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control

the Authority Having Jurisdiction (AHJ).
 by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by

This NOA is being issued under the applicable rules and regulations governing the use of construction materials.
 The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted

SCOPE:

PCT Industries
 P.O. Box 1529
 Nokomis, FL 34274

NOTICE OF ACCEPTANCE (NOA)

BUILDING CODE COMPLIANCE OFFICE (BCCO)
 PRODUCT CONTROL DIVISION



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



10/6/2003
[Handwritten signature]

NOA No 03-0514.01
Expiration Date: November 01, 2006
Approval Date: November 06, 2003
Page 1

The submitted documentation was reviewed by Theodore Berman, P.E.
This NOA revises NOA # 02-0702.04 and, consists of this page 1 as well as approval document mentioned above.
and shall be available for inspection at the job site at the request of the Building Official.
INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors
be done in its entirety.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by
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product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply
materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any
TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the
change in the applicable building code negatively affecting the performance of this product.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no
following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.
LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and

MISSILE IMPACT RATING: Large and Small Missile Impact
expiration date by the Miami-Dade County Product Control Division.
bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and
5, prepared by manufacturer, dated 2/9/98 with revision on 6/3/03, signed and sealed by Robert L. Clark, P.E.,
APPROVAL DOCUMENT: Drawing No. 4040, titled "Aluminum Single Hung Window", sheets 1 through 5 of

DESCRIPTION: Series "SH-701" Aluminum Single Hung Window
Zone of the Florida Building Code.
This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control
Division (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to
have this product or material tested for quality assurance purposes. If this product or material fails to perform in
the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately
revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right
to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or
material fails to meet the requirements of the applicable building code.

This NOA is being issued under the applicable rules and regulations governing the use of construction materials.
The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted
by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by
the Authority Having Jurisdiction (AHJ).

SCOPE:

Nokomis, FL 34274
P.O. Box 1529
PJT Industries

NOTICE OF ACCEPTANCE (NOA)

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

BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION



Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: HERITAGE PLACE, SEWALLS PT, 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, weatherstrip 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 (electric) 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.	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 82.8

The higher the score, the more efficient the home.

SCHECODNIC, HERITAGE PLACE, SEWALLS PT, FL,

Item	Description	Value	Weight	Points
1.	New construction or existing	New	1	1
2.	Single family or multi-family	Single family	1	1
3.	Number of units, if multi-family	1	4	4
4.	Number of Bedrooms	No	4	4
5.	Is this a worst case?	No	4	4
6.	Conditioned floor area (ft ²)	4796 ft ²	1	4796
7.	Glass area & type	Single Pane Double Pane	0.0 ft ²	695.3
	a. Clear - single pane	0.0 ft ²	0.0 ft ²	0.0
	b. Clear - double pane	0.0 ft ²	0.0 ft ²	0.0
	c. Tint/other SHGC - single pane	178.0 ft ²	0.0 ft ²	0.0
	d. Tint/other SHGC - double pane	0.0 ft ²	0.0 ft ²	0.0
8.	Floor types	R=19.0, 205.1 ft ²	1	190
	a. Raised Wood, Adjacent			
	b. Slab-On-Grade Edge Insulation	R=0.0, 294.5(p) ft ²	1	0
	c. N/A			
9.	Wall types	R=5.0, 5084.5 ft ²	1	25422.5
	a. Concrete, Int Insul, Exterior			
	b. Frame, Wood, Adjacent	R=11.0, 874.1 ft ²	1	9815.1
	c. N/A			
10.	Ceiling types	R=30.0, 3570.9 ft ²	1	107127
	a. Under Attic			
	b. N/A			
	c. N/A			
11.	Ducts	Sup. R=6.0, 133.0 ft ²	1	798
	a. Sup. Unc. Ret. Unc. AH: Attic			
	b. 2 Others	242.1 ft ²	1	242.1
12.	Cooling systems		1	82.8
	a. Central Unit			
	b. Central Unit			
	c. Central Unit			
13.	Heating systems		1	82.8
	a. Electric Strip			
	b. Electric Strip			
	c. Electric Strip			
14.	Hot water systems		1	82.8
	a. Natural Gas			
	b. N/A			
	c. Conservation credits			
	(HR-Heat recovery, Solar			
	DHP-Dedicated heat pump)			
	HVAC credits			
	(CF-Ceiling fan, CV-Cross ventilation,			
	HF-Whole house fan,			
	PT-Programmable Thermostat,			
	MZ-C-Multizone cooling,			
	MZ-H-Multizone heating)			

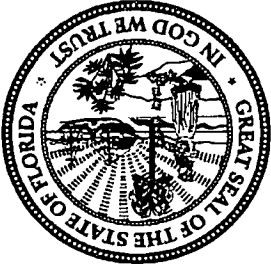
I certify that this home has complied with the Florida Energy Efficiency Code For Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant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

Builder Signature: _____

Address of New Home: 12 S. Sawhus R

City/FL Zip: _____

Date: 5/5/05



*NOTE: The home's estimated energy performance score is only available through the FLA/RFS computer program. This is not a Building Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStarTM 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 321/638-1492 or see the Energy Gauge web site at www.sec.ncf.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.



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

PERMIT NO. 435507297
DATE PAID: 3-10-05
FEE PAID: 330
RECEIPT #: 14198/66321
05-0238-N

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

APPLICANT: GARY & REBECCA SCHEDVIN

AGENT: Gary & Rebecca
 TELEPHONE: 215-0074

MAILING ADDRESS: 2103 PINE RIDGE - JENSEN BOWL # 34957

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

PROPERTY INFORMATION

LOT: 18 BLOCK: - SUBDIVISION: HERITAGE PLACE PLATTED: 9-24-85

PROPERTY ID #: _____ ZONING: _____ I/M OR EQUIVALENT: [] Y / [] N

PROPERTY SIZE: .51 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [] Y [] N

PROPERTY ADDRESS: 12 S. SEWELL ST. DISTANCE TO SEWER: _____ FT

DIRECTIONS TO PROPERTY: MONTEREY RD NORTH TO FIRST OCEAN, EAST TO SEWELL ST RD, SOUTH TO 12 S. SEWELL ST RD

(3rd LOT ON LEFT)

BUILDING INFORMATION

Unit Type of Establishment: _____ No. of Bedrooms: _____ Building Area sqft: _____

Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC

1 RESERVE 4 4998

2

3

4

[] Floor/Equipment Drains [] Other (Specify) _____

SIGNATURE: _____ DATE: 3/10/05



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

Plot # 06953640

34505 3/17/05

CENTRAX #: 43-SS-07297
OSTDSNBR: 05-0238-N

APPLICANT: SCHECODNIC, GARY AND REBECCA

AGENT: 95-00 PROPERTY OWNER, PROPERTY OWNER

LOT: 18 BLOCK: SUBDIVISION: HERITAGE PLACE ID#: ---

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: .51 ACRES
TOTAL ESTIMATED SEWAGE FLOW: (M) 4200 GALLONS PER DAY [64E-6, TABLE 1]
AUTHORIZED SEWAGE FLOW: 1250 GALLONS PER DAY [1500GPD/ACRE OR 2500GPD/ACRE] SOFT
UNOBSTRUCTED AREA AVAILABLE: 1950

BENCHMARK/REFERENCE POINT LOCATION: edge of road 435' N
ELEVATION OF PROPOSED SYSTEM SITE IS 8 Inches [] Below BENCHMARK/REFERENCE POINT

THE MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES:
SURFACE WATER: 75 FT DITCHES/SWALES: N/A FT [] YES [] NO
MELTS: PUBLIC: N/A FT LIMITED USE: N/A FT PRIVATE: N/A FT
BUILDING FOUNDATIONS: 5 FT PROPERTY LINES: 5 FT POTABLE WATER LINES: 63 FT

SITE SUBJECT TO FREQUENT FLOODING: [] YES [] NO
10 YEAR FLOOD ELEVATION FOR SITE: N/A FT NGVD
SITE ELEVATION: 3.7 FT NGVD

SOIL PROFILE INFORMATION SITE 1

Depth	Munsell #/Color	Texture
0 to 6	6/1 G~	FS
6 to 12	7/1 G~	FS
12 to 22	3/2 Dk~	FS
22 to 48		
48 to 72		
72 to 96		
96 to 120		
120 to 144		
144 to 168		
168 to 192		
192 to 216		
216 to 240		
240 to 264		
264 to 288		
288 to 312		
312 to 336		
336 to 360		
360 to 384		
384 to 408		
408 to 432		
432 to 456		
456 to 480		
480 to 504		
504 to 528		
528 to 552		
552 to 576		
576 to 600		
600 to 624		
624 to 648		
648 to 672		
672 to 696		
696 to 720		
720 to 744		
744 to 768		
768 to 792		
792 to 816		
816 to 840		
840 to 864		
864 to 888		
888 to 912		
912 to 936		
936 to 960		
960 to 984		
984 to 1008		
1008 to 1032		
1032 to 1056		
1056 to 1080		
1080 to 1104		
1104 to 1128		
1128 to 1152		
1152 to 1176		
1176 to 1200		
1200 to 1224		
1224 to 1248		
1248 to 1272		
1272 to 1296		
1296 to 1320		
1320 to 1344		
1344 to 1368		
1368 to 1392		
1392 to 1416		
1416 to 1440		
1440 to 1464		
1464 to 1488		
1488 to 1512		
1512 to 1536		
1536 to 1560		
1560 to 1584		
1584 to 1608		
1608 to 1632		
1632 to 1656		
1656 to 1680		
1680 to 1704		
1704 to 1728		
1728 to 1752		
1752 to 1776		
1776 to 1800		
1800 to 1824		
1824 to 1848		
1848 to 1872		
1872 to 1896		
1896 to 1920		
1920 to 1944		
1944 to 1968		
1968 to 1992		
1992 to 2016		
2016 to 2040		
2040 to 2064		
2064 to 2088		
2088 to 2112		
2112 to 2136		
2136 to 2160		
2160 to 2184		
2184 to 2208		
2208 to 2232		
2232 to 2256		
2256 to 2280		
2280 to 2304		
2304 to 2328		
2328 to 2352		
2352 to 2376		
2376 to 2400		
2400 to 2424		
2424 to 2448		
2448 to 2472		
2472 to 2496		
2496 to 2520		
2520 to 2544		
2544 to 2568		
2568 to 2592		
2592 to 2616		
2616 to 2640		
2640 to 2664		
2664 to 2688		
2688 to 2712		
2712 to 2736		
2736 to 2760		
2760 to 2784		
2784 to 2808		
2808 to 2832		
2832 to 2856		
2856 to 2880		
2880 to 2904		
2904 to 2928		
2928 to 2952		
2952 to 2976		
2976 to 3000		

SOIL PROFILE INFORMATION SITE 2

Depth	Munsell #/Color	Texture
0 to 6	6/1 G~	FS
6 to 12	7/1 G~	FS
12 to 22	3/2 Dk~	FS
22 to 48		
48 to 72		
72 to 96		
96 to 120		
120 to 144		
144 to 168		
168 to 192		
192 to 216		
216 to 240		
240 to 264		
264 to 288		
288 to 312		
312 to 336		
336 to 360		
360 to 384		
384 to 408		
408 to 432		
432 to 456		
456 to 480		
480 to 504		
504 to 528		
528 to 552		
552 to 576		
576 to 600		
600 to 624		
624 to 648		
648 to 672		
672 to 696		
696 to 720		
720 to 744		
744 to 768		
768 to 792		
792 to 816		
816 to 840		
840 to 864		
864 to 888		
888 to 912		
912 to 936		
936 to 960		
960 to 984		
984 to 1008		
1008 to 1032		
1032 to 1056		
1056 to 1080		
1080 to 1104		
1104 to 1128		
1128 to 1152		
1152 to 1176		
1176 to 1200		
1200 to 1224		
1224 to 1248		
1248 to 1272		
1272 to 1296		
1296 to 1320		
1320 to 1344		
1344 to 1368		
1368 to 1392		
1392 to 1416		
1416 to 1440		
1440 to 1464		
1464 to 1488		
1488 to 1512		
1512 to 1536		
1536 to 1560		
1560 to 1584		
1584 to 1608		
1608 to 1632		
1632 to 1656		
1656 to 1680		
1680 to 1704		
1704 to 1728		
1728 to 1752		
1752 to 1776		
1776 to 1800		
1800 to 1824		
1824 to 1848		
1848 to 1872		
1872 to 1896		
1896 to 1920		
1920 to 1944		
1944 to 1968		
1968 to 1992		
1992 to 2016		
2016 to 2040		
2040 to 2064		
2064 to 2088		
2088 to 2112		
2112 to 2136		
2136 to 2160		
2160 to 2184		
2184 to 2208		
2208 to 2232		
2232 to 2256		
2256 to 2280		
2280 to 2304		
2304 to 2328		
2328 to 2352		
2352 to 2376		
2376 to 2400		
2400 to 2424		
2424 to 2448		
2448 to 2472		
2472 to 2496		
2496 to 2520		
2520 to 2544		
2544 to 2568		
2568 to 2592		
2592 to 2616		
2616 to 2640		
2640 to 2664		
2664 to 2688		
2688 to 2712		
2712 to 2736		
2736 to 2760		
2760 to 2784		
2784 to 2808		
2808 to 2832		
2832 to 2856		
2856 to 2880		
2880 to 2904		
2904 to 2928		
2928 to 2952		
2952 to 2976		
2976 to 3000		

OBSERVED WATER TABLE: 18 INCHES [] BELOW [] EXISTING GRADE [] APPARENT]
ESTIMATED WET SEASON WATER TABLE ELEVATION: 6 INCHES [] BELOW [] EXISTING GRADE.
HIGH WATER TABLE VEGETATION: [] YES [] NO [] NO [] YES [] YES [] NO [] NO
SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: 0.8/0.65 [] BED [] TRENCH [] OTHER (SPECIFY)
DEPTH OF EXCAVATION: N/A INCHES

REMARKS/ADDITIONAL CRITERIA:

SITE EVALUATED BY: O. Z. M. V. DATE: 3/16/05

DH 4015, 03/97 (Obsoletes previous editions which may not be used) [Stock Number: 5744-003-4015-1] [ostds_eval_4015-3]

43557297



April 11, 2005

Martin County Health Department
341 SE Willoughby Blvd
Stuart, FL 34994
Re: 12 South Sewall's Point Dr.

Dear Mrs. DeWald,

I have drawn to scale the required 875 sq. ft of drain field meeting the set backs. I feel using the EQ-36 quick cut chamber will give us a better flow lay out. If you are in agreement please accept this to issue a permit for construction.

If you have any questions regarding this matter, please do not hesitate to call me.

Sincerely,
David Whiteside

David Whiteside
Accurate Septic Service, Inc.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

of Inspection: Mon Wed Fri Sat, 2005 7/27 Page 2 of 2

MIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
96	POTSDAM	IN GL TANK	PASS	
5	50 RIO VISTA	MARTIN CV PRO/ANE		
7694	STANFORD	FINM GARAGE DOOR	PASS	CLOSE
13	73 N. RIVER	JB MATHEWS		CLOSE
7584	SEACONNICK	CONCRETE	PASS	
1	12 S. SEAWARD ST	DAFTWOOD HOMES		
7449	FERRARO	FINAL KITING	FAIL	
4	4 LINGSTON CT	GUICK + H. GAUGHY		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7338	MC CORPUSCLE	FOOTING	PASS	
12	359 N. LUTERLO	GARAGE		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
12	PINE OAK HAMP			
12	34 CASTLE HILL WY			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7598	HANZMAN	SHEATHING ROOF	CHANCEL	
	12 RIVERVIEW	263-2525		
	COASTAL BOONICA	(As late as possible)		
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 8/31, 2005 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7447	7447 DINTON	PERMIT WINDOW		CHANGEL
	6 BANYAN RD	Buck		
	DAVE SYSTEMS			INSPECTOR:
7431	McDUBAL	Block Det.	Pass	
	23 N. LIVER RD	WALL		
12	Custom Built MAR.			INSPECTOR:
	WOLCOTT	TRUCK	Pass	
	32 Rio Vista			INSPECTOR:
7054	TARRE	STRAPPING	FAIL	
1	22 ISLAND	WINCHIP		INSPECTOR:
	7723 ZAVARLY	IN PROGRESS	Pass	
	6 CORAL REE			
9	PROF. ROOFING			INSPECTOR:
	CRANE	TIN TAG + MEAN	FAIL	
	2 TIMOR			INSPECTOR:
8	Pacific Roofing			
	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	7447 DINTON	PERMIT WINDOW		CHANGEL
13	125. SEWALL'S	GRADE BEAM	Pass	
	DRAFTWOOD	Late as possible		INSPECTOR:
OTHER: 11:30-1200				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9/12, 2005 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7723	ZAVATKAY 6 CORAIRE ROAD	FINAL ROOF	FAIL	
4	PEOP. ROOFING 72 S. BIVER RD			
784	STHEODONIC 12 S. SEWALL'S Pt	Column	PASS	
3	DEATHWOOD PT 72 S. BIVER RD			
7595	Hochstetter 72 S. BIVER RD	FINAL ROOF	PASS	close
1	QUADROS 72 S. BIVER RD			
7662	Hochstetter 72 S. BIVER RD	FINAL GARAGE ROOF	PASS	close
1	QUADROS			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TOE LEATHER		TOE	PASS	
5	15 LOTTING WAY			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7755	BARILE	FINAL ROOF	FAIL	
6	17 FIDOWAN SUPERIOR POINTS			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7490	WILCOX	FINAL ROOF	FAIL	
2	11 RIVERVIEW 30 UPPER COAST			

OTHER:

220 4990

220-4765

DO NOT REMOVE THIS TAG

INSPECTOR

DATE: 10/28

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.

NEED LTR FROM SUBMITTER
APPROXIMATE PHOTIC PAIR OF BEAMS
W/ 1 1/2 CHAINS (3" CHAIN LINKS
USED)
W/ 1 1/2 CHAINS (3" CHAIN LINKS
USED)
W/ 1 1/2 CHAINS (3" CHAIN LINKS
USED)
W/ 1 1/2 CHAINS (3" CHAIN LINKS
USED)
W/ 1 1/2 CHAINS (3" CHAIN LINKS
USED)

1st FL. SLAB & BEAM STEEL

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

ADDRESS: 12, 5, 5, P.R.

CORRECTION NOTICE

(772) 287-2455
Sewall's Point, Florida 34996
One South Sewall's Point Road

TOWN OF SEWALL'S POINT



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 10/28, 2005 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
7584	SEWELL'S POINT	SAP	Pass	
1	12 S. SEWALLS Beam	Beam	Pass	Inspector: OM
	DAFTWOOD	Beam	Pass	Inspector: OM
6883	WALLACE	FINAL ROOF	Pass	Close
2	79 S. RIVER RD 0/B			Inspector: OM
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/31, 2005 Page 1 of 1

PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS: INSPECTOR:

7328 SCUMMER ROUGHEN PASS FAIL PASS

2 102 HENRY SEW FRAINING FAIL FAIL
 6281 SMITH FINISHMENT + camera FAIL FAIL
 INSPECTOR: [Signature]

PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS: INSPECTOR:

3 7 SIMARA ST SUNRISE CONST. [Signature]

~~7504 SCHEPPIC SLAB [Signature]~~

1 12 S. SEWALLS DRIFT WOOD
 6038 SMITH FINA GAS PASS PASS CLOSE
 INSPECTOR: [Signature]

PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS: INSPECTOR:

3 7 SIMARA ST FORMAL GAS
 INSPECTOR: [Signature]

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:

KNOWLES RD. PERMIT
 TABLE W/O OIC
 NO PERMIT
 NEEDED FOR WORK
 PROJECT IS MINOR
 INSPECTOR:

OTHER:

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12/2, 2005 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
7789	GRIFFIN	Final Remodel	Passed		
2	19 Rio Vista	+ RENOVATIONS			
	CASCO CON	(2nd phase)			
7813	PARKS	Footers - ROCCO	Passed		
1	3 MINDORO				
	PARKS & CO	(First Phase)			
7584	SEACONIC	BOND BEAM	Failed	NEED END CAP	
12 S. SEAWALL'S Pt					
	DARTWOOD HOMES	(2nd Phase)			
7842	ZICUTER	SHEATHING	Failed		
71 S. RIVER RD					
	AN AMERICAN				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
6513	DUNN	POWER REPAIRS			
31 N. RIVER ROAD					
	FIRST FLORIDA				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
7921	KAYAHOMAS	DRY-IN	Passed		
80 S. RIVER ROAD					
	MARC PROVENZANO				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
OTHER:					

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

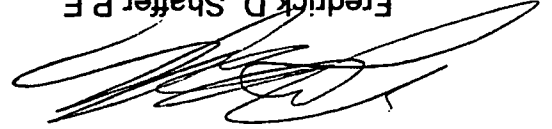
Date of Inspection: Mon Wed Fri 1/20, 2006 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
7809	D'ARSSANDEO	Street (HARDEN)	Pass	CHANGED (and used)	OM
	4 EMERALD WAY	Pre-Pave			
	OR				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
7390	GOLDMAN	INSULATION	Pass		OM
	4 SUMMER LAKE				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
5					OM
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
7584	SEACODNIC	THE BEACH	Pass		
1	12 S. SEAWAY ST				OM
	DARTWOOD HOMES				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
7976	GOLDMAN	ROUGH IN GAS	Pass		OM
	4 SUMMER LA				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
7970	KLEBER	DOCK FINAL	Pass		OM
	14 CRAWFORD'S NEST				
	BLUE WATER MARINE				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
7954	KEMP SIDES - HB ASSOC	FRAMING		WILL RESTRUCTURE	
	3754 SE OCEAN #4 AC	ESTR. PAVEMENT			
9	PINNACLE CONST.	11:00			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
7739	WELAND	FINAL BATH	FAIL		OM
	9 KNOWLES ROAD	RENOV.			
	8	PONCE CONCRETE			
OTHER:					

59 H. RIVER AND WALK INSPECTION LOG XIS

5071 - 200 - 8829

Ohio Reg. No. 41903
Fla. Reg. No. 26694
e-mail: fshaffer@theshaffergroup.com
President
Fredrick D. Shaffer P.E.



THE SHAFFER GROUP, INC.

Very truly yours,

1. Your request to interrupt the pour in the concrete beams to allow for a cold joint at the approximate mid-height of the beam.
2. The placement of the reinforcing steel in the cantilevered concrete deck for the A/C equipment at an elevation of 3" above the bottom of the slab.
3. Providing 3" clearance on the bottom reinforcing steel in the main deck.

Pursuant to your request, we have reviewed our design and calculations and are hereby approving the following modifications that you made during construction to the above referenced project.

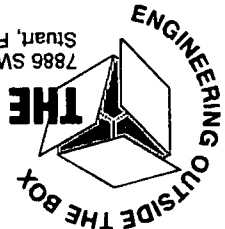
Dear Mr. Morris:

Schecodnic Residence
Sewells Point, FL
Jensen Beach, FL 34957
2163 Pine Ridge St.
Driftwood Homes
Attn: Alan Morris

FILE

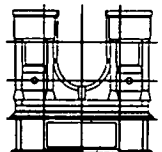
Via Fax: 772-334-5877

December 2, 2005



THE SHAFFER GROUP INC.
7886 SW Ellipse Way
Stuart, FL 34997-7246
Ph. (772)220-4890
Fax (772)220-1795

M.A. CORSON & ASSOCIATES, Inc.
ARCHITECTURE
STRUCTURAL DESIGN



To: Sewall's Point Building Department

Date: 12/6/05

Re: Schedonic Residence
Lot #18 Heritage Place, Sewall's Point
Permit #

FILE

This office approves of the following:

1. The size of the poured concrete intermediate tie beams (B2) at the Breakfast nook openings is 8"x32" with the top at 14'4" a.f.f.
2. The three intermediate tie beams at the Living Room openings shall be poured beams (B2) in lieu of composite beams (B1) as shown on the permitted plans. The size of the beams are 8"x16" with the top at 11'0" a.f.f.

Thank you for your time and consideration. If you have any questions please call.

Sincerely,

Mark A. Corson A.I.A.

cc: file

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun 2/10, 2006 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7993	SIGHT NO	UG RUMBINE	PASS	
	11 WENDY LA	UG METAWALL	PASS	
4	SEA GATE BLDGS			
7969	SCADSTER	PUMP RAH -	PASS	
3	36 CASTLE	POOL		
	A# 6 Pool			
8003	MAXSON	GENERATOR, PAD	PASS	CLOSE
	9 S. RIVER	+ ELECTRICAL		
8	01B	FINAL		
7843	MARTIN	FINAL DEDICATION	PASS	CLOSE
4	4 FIELDWAY DRIVE	ENCL		
	01B	(See Permit box in front of house)		
7809	D'ALESSANDRO	TIE BEAM + COL.	PASS	
	4 EMERALD WAY	ADDITION		
12	01B			
8047	MORAN	DAY IN	FAIL	
	2 Palm Road			
17	2 Palm Road	PALM ROADS		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7584	SEACONIC	ROOT STRIPPING	PASS	PARTIAL 1ST LBR
18	12 S. SEWALLS	SUBSIDING		
	DAFTWOOD/HOMES			
OTHER:				

DO NOT REMOVE THIS TAG

INSPECTOR

DATE: 3/8

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.

FLASHING @ ROOF/JUAL INTERSECTION
AT N.W. CORNER IS INCORRECTLY
LAPPED (POUNDS 2 PLACES)

dry-in
same.

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

ADDRESS: 12 SPR

CORRECTION NOTICE

TOWN OF SEWALL'S POINT
One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 2006 3/8 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
PREV. 7298	PAULER 91 S. RIVER RD	GUESTY ROOF		CALL PAULER	
8	(PACIFIC) OWNER 91 S. RIVER RD			BUCKING PAGES	
7801	CUMMINGS 83 S. RIVER	STAIRWELL	PASS		
9	EMAS MGT 83 S. RIVER				
9901	ACCURAN 45 PRO VISTA	FINAL WINDOWS		REWORKED	
11	018 45 PRO VISTA				
8046	KUGLER 129 S. SEWALLS PT	FINAL DEMO	FAIL		
7	018 129 S. SEWALLS PT	CAB + TRASH			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
7759	PAGE 8 ST LUCE	FINAL RETAINING WALL	PASS	CLOSE	
12	ANCHOR MARINE 8 ST LUCE	WALL			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
8077	BURKHARD 176 S. RIVER	DECK-IN	PASS		
1	176 S. RIVER STREET REPAIR				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
7584	SCHICO-BNLC 12 S. SEWALLS PT	FINAL METAL	FAIL		
13	12 S. SEWALLS PT DARTWOOD HOMES				
OTHER:					

DO NOT REMOVE THIS TAG

INSPECTOR

DATE:

4/10

call for an inspection.

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

NEED AUBURN LETTER ADDRESSING
GAR. STR. CO., PLUMB STAYS
5 1/2 x 5 1/2 - 4 X 4 IS INSTALLED

TRUSS ENGIN.

same.

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

ADDRESS:

12 SSPR.

CORRECTION NOTICE

TOWN OF SEWALL'S POINT
One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 4/10, 2006 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	INSPECTOR	NOTES/COMMENTS:
8154	OWNER	GAS LINES	PASS		
4	29 S. LAVER RD.	E-L DIV.	772 597 1022		
1581	Winnings Rd	SEAL	PASS		
3	83 S Laurel Rd	Alum Mant			
1584	Seawall	STAIRS	FAIL		
1	12 S. S. P. ROAD	TRUSSES			
6705	ADAMSON	FRIDGE RACK			
5	9 FORT	P.R. CRAP	541-827-0605		
2	9 MIDDLE RD.	TRIPOR	W/ WINDOW BACKS FAIL		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	INSPECTOR	NOTES/COMMENTS:
6	117 U.S.P.R.	PERMIT			ISSUED STOP WORK ORDER
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	INSPECTOR	NOTES/COMMENTS:
3	19 BELMONT	TREE	PASS		
OTHER:	14 HERONS	TREE	PASS		

DO NOT REMOVE THIS TAG

INSPECTOR

DATE:

4/12

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.

LOOSE ELECTRICAL CONNECTION
AT DEN FIREPLACE.

A/C ROUGH - PASTED
MISSED AT/C P.C. FIXTURE
ON SOUTH END
ELEC. ROUGH

same.

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

ADDRESS:

12 S.S.P.R.

CORRECTION NOTICE

(772) 287-2455

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

TOWN OF SEWALL'S POINT



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 4/11/2006 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
783	MORAN 2 Palm Road	FINAL HANDOVER	PASS	CLOSE	DM
4	01B 2 Palm Road				DM
7841	THOMAS 10 Palm Road	FINAL FENCE	PASS	CLOSE	DM
5	01B				DM
8002	THOMAS 16 S. VIA LINDAIA	FINAL RAIL	PASS	CLOSE	DM
9	01B				DM
7584	SCARLETT	DOCKHOLE	PASS		
1	12 S. SEWALL ST DARTWOOD	1ST PHASE	FAIL		DM
7837	MR. KAPIT 4 Rio Vista	Mid-Rise	PASS		DM
10	THOMAS, LAMONT PILGRIMAGE				DM
6705	ANDERSON Final Rammed	INSPECTION TYPE	FAIL		DM
11	9 PARMISTO DR Pump Boat Collective				DM
8134	LUCOT	INSPECTION TYPE			DM
17	30E HIGH POINT	INSPECTION TYPE	FAIL		DM
17	SEA GATE BUDS	LATE AM PHASE			DM

OTHER:

DO NOT REMOVE THIS TAG

INSPECTOR

DATE: 4/22

call for an inspection.

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

NEED MAINTENANCE SETS ON
SIDE
RECREATE ATC ACCESS VOTING
ALL OUT IN PROGRESS OF SUTHE,
LAW IN 2nd BEST HANDS
STAIRS (2) CALL OUTLINE AT
FINISH SKINER (PA) - MARSHAL AT
FRAMING -
ATC TIGHT - PASS
PLUMBING TIGHT -

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.

ADDRESS: 12 S.S.P.O.

CORRECTION NOTICE

(772) 287-2455
Sewall's Point, Florida 34996
One South Sewall's Point Road
TOWN OF SEWALL'S POINT



7584

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun Other

4/24, 2006

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8161	RIVER	FOOTING RET WALL	PASS	
1	295 RIVER RD	BEAR DEN	FIRST PILE	
7796	COLETT	FOUND UNSTAYED	PASS	CLOSE
5	8 BRIGGS DR	COFFER DAM		
6833	FOSTER	SEAWALL CAP	FAIL	
3	7 TIMON ST.	CUSTOM BUILT		
7386	MC CORMICK	FOOTING STEEL DR.		
6	59 N KENNEDY	FOUND OUTLAD		
1581	SHREEDINE	FOUND PILING	FAIL	
2	125 SEAWALK	ELEC CODED	PASS	
2	DUNSTON HONOR (2) ST PLOW			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7764	BUCK	FOUND PILING	FAIL	
4	20 N SEAWALK	FOUND PILING	FAIL	
	Masterpiece	ELEC. PILING	PASS	
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

8069

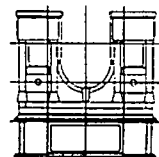
Date of Inspection: Mon Wed Fri Sat Sun

2006

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8042	Stark 32 Fieldway Dr	Stucco	Pass	
1	016 Roof Dryin	Stucco	Pass	
FREE	SCHMIDT TREE	TREE	OLD PATTEN	
	122.5 SR.			
8100	DAY IN PROCESS	IN PROCESS	CANCEL	
3	5 WORTH COURT ALL AMERICAN	LATE		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE POOLE	94 N. SEWALL ST	TREE	PASS	\$15 PER
10				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	SCHMIDT	TREE	PASS	
2	1225 SEWALL ST			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
14	2 E HIGH ST	TREE	PASS	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7	1225 SEWALL ST 1254 SEWALL ST	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
OTHER:	117 U.S.P.N. DOCK WORK.			

M.A. CORSON & ASSOCIATES, Inc.
ARCHITECTURE
STRUCTURAL DESIGN



Date: 4/14/06

To: Sewall's Point Building Department

Re: Schecodnic Residence
Lot #18 Heritage Place, Sewall's Point
Permit #
FILE # 7584
12. S.S.P.R.

This office approves of the following:

1. It is acceptable that the steel column in the garage is 4"x4" in lieu of the 5 1/2"x5 1/2" steel column as shown on the permitted plans.

Thank you for your time and consideration. If you have any questions please call.

Sincerely,

Mark A. Corson, A.I.A.

cc: file

706 South 7th Street
Ft. Pierce, FL 34950
Tel. (772) 708 7785
Fax (863) 467 1292

Engineers Consultants Inc.

B - & - B

October 11, 2006

DRY - IN INSPECTION

(WITH STRUCTURAL CERTIFICATION)

#11E

Project: Schedonid Residence at, 12 S Sewalls Point Road, Stuart, FL 34997
Permit No. (Hanson Antigua Concrete Tile Roof System)

To: Town of Sewalls Point Building Department

Client: Pacific Roofing Corp. 808 S.E. Dixie Hwy. Stuart FL 34994

Background.

On October 9, 2006 B & B Engineering Inc. was requested by Pacific Roofing Inc. a Licensed Roofing Contractor to certify the installation of the roof dry-in for the above project.

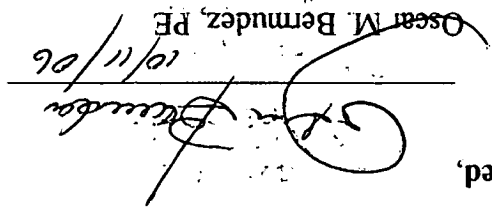
Certification:

B & B Engineering Inc Certify that the above re-roof dry-in has been properly installed, according to the 2004 F.B.C., the Tow of Sewalls Point Building Department Code and the Manufacturers' recommendations. The 30# felt dry-in and 90# ASTM hot mopped tile underlayment were properly installed. Dry-in felt was properly supported with the Tin Tags and Metals, drip edges were nailed 4" staggered and Tin Tags were spaced 6" in lap, 12" in field and secured to the roof structure. To the best of our knowledge and professional ability, it is B & B Engineering Inc. opinion that the work was properly done.

Limitations.

Our professional services have been performed, our finding obtained and our opinions prepared in accordance with general accepted structural engineering principles and practices. This Company is not responsible for the conclusions, opinions or recommendations made by others based on our findings. The scope of the on-site inspection performed on October 9, 2006 was intended to evaluate the installation of the dry-in and to assure its integrity.

Approved,


Oscar M. Bermudez, PE
FL License # 55141
10/11/06

DO NOT REMOVE THIS TAG

INSPECTOR

DATE:

11/3

[Handwritten signature]

call for an inspection.

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

COMP/CAV.

CHANGE BREAKER TO CATCH

EXP. V. BOXES

NEED SEVERAL METERS ON

COLD WATER PIPING (POUNDING

POWER PLEASE

same.

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

ADDRESS:

12 S.S.P.R.

CORRECTION NOTICE

(772) 287-2455

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

TOWN OF SEWALL'S POINT



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun
 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8389	Heidinger	Heidinger on wood	PASS	
5	12 Palm St			
	10:00 A.M.			
8401	Oliver	to back dock	PASS	
	19th Street	de arbor		
7	TCBI			
8431	Lerigan	gas usage	PASS	
	27th Street			
6	Stump Disc.			
7819	Idilio	turnout	PASS	
	12th Street West	windown broke		
3	Advanced			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	7584	Schneider	PASS	
1	125. Seawall	over the top		
	Disturbed			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	Tree Gauge	Tree	PASS	
2	53. High Pt			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	0097	Final Kit.	PASS	
4	145. Via Lucerna			
OTHER: 0000 49 N.S.P.R. dock. Final Pass Close				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun 1-8, 2006 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
1584	Schreder	Major	Pass	Major	Major
1581	La S sources Pt	Disturbed	Pass	Disturbed	Major
844	Demogor	Sp. Plumbing	Pass	27th Ave	Major
10	SDH				Major
	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
0025	3 KNOWLES RD	FINAL GAS	FAIL		Major
9				\$40 fee	Major
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
0038	3601 SE OCEAN BLVD	ROOF FINAL		To mount Gutter Commercial inspection	Major
11					Major
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
0027		THE BEAM	FAIL		Major
0027	3 TRUMAN LAKE				Major
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
0060	STEMLE	FINAL	Pass	Close	Major
49 N.S.P.L.					Major
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:

OTHER:

TOWN OF SEWALL'S POINT
Building Department
One South Sewall's Point Road
Sewall's Point, Florida 34996

POWER RELEASE AGREEMENT: PN: 7584
 (To be submitted at final electrical inspection in order to turn on electric service)

Owner: Gray Rebecca & Herodovic Address: ~~125 Sewall's Pt Rd~~
 Project Address: SALE Legal: Lot: _____ Block: _____ Subdivision: _____

General Contractor: Dr. Woods Hayes, LLC Licent. No.: R00052785

Address: 2163 PINEBLAKE ST. J.B. Tel: 334-2577 Fax: 334-5877

Electrical Contractor: HARTMOE ELEC Licent. No.: ME 00094

Address: 1314 N.E. SEWELL BEACH BLVD Tel: 772 331 4675 Fax: _____
SEWELL BEACH FL 31907

WHEREAS, pursuant to the provisions of, and governed by the National Electrical Code and Ordinances of the Town of Sewall's Point, 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 an electrical hook-up of 125 Sewall's Pt Rd for the purpose of completion 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 John Adams, 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 an electrical hook-up permit.
3. This electrical hook-up will be revoked or a Certificate of Occupancy will be issued to verify completion.
4. The 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 7th day of Nov, 2006.

SIGNATURE OF GENERAL CONTRACTOR
[Signature]

SIGNATURE OF OWNER
[Signature]

SIGNATURE OF ELECTRICAL CONTRACTOR
[Signature]
ME 00094

JOHN ADAMS, BUILDING OFFICIAL

DO NOT REMOVE THIS TAG

INSPECTOR

DATE: 11/29

call for an inspection.

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

• COMPLETE BRICKWORK & PAINTS

WALLS AS REMAINING WALL SOUTH SIDE,

• ENDRZ. LTR. APPROXIMATE FINISHABLE

• INSTALL FRONT DOOR -

• FINISH FIRE PLACE

• EXPOSED JOINTS @ CAB IN KITCHEN

• G.F.I. REPAIR @ BATHS

MISSING SEVERAL OUTER PLATES

• LEAD ALL PAPER WORK

STR. FINAL

same

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

ADDRESS: 12 S.S.P.N.

CORRECTION NOTICE

(772) 287-2455

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

TOWN OF SEWALL'S POINT



11/29/11

DO NOT REMOVE THIS TAG

INSPECTOR

DATE:

11/29

call for an inspection.

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

SECURE A/C COND. DRAINAGE SOUTH SIDE
NEED OARMS ON MAIN UNIT.
DISCONNECT AT EXT. A/C EQUIP IS
NOT GOOD FOR ACCESSIBILITY.
INSUFFICIENT MAKE UP AIR AT UNIT.

STR.
same.

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

ADDRESS: 12 S.S.P.R.

CORRECTION NOTICE

TOWN OF SEWALL'S POINT
One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 2006

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
8434	Moran	Final A/C	Pass	(Close)	OM
8422	tenant	Final-pavers	Pass	(Close)	OM
3	4 Kingston Ct Coutlaw's				OM
1	125 Sewall Pt Dightwood				OM
8457	Lossains	Footing	FAIL		OM
2	1375 Laver Rd Meredith Vaughn	(most contractor)			OM
8427	Depewer	beam 2	Pass		
5	8 Riverview Sand Carole	1-561-902-8321 10:00			OM
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
7	39 N. Laver Rd OB			(283-0832-Val call)	OM
1819	17 Durin	partial setting	Pass		
4	12 Cameron Blvd Admiral - Case	9:30			OM
OTHER:					



Martin County Health Department
(772) 221-4090 Fax (772) 221-4967

TO BUILDING DEPARTMENT INSPECTIONS:

- MARTIN COUNTY (772) 288-5916 FAX: (772) 288-5911
- CITY OF STUART (772) 288-5326 FAX: (772) 288-5388
- JUPITER ISLAND (772) 545-0150 FAX: (772) 545-0188
- SEWALLS POINT (772) 287-2455 FAX: (772) 220-4765

FROM: Ray Cross DATE: 11/28/06

SUBJECT: FINAL CONSTRUCTION APPROVAL FOR SEPTIC SYSTEMS

HEALTH DEPT. SEPTIC PERMIT#	BUILDING DEPT. PERMIT #	LOCATION
43-SS-0	7297	12 S SEWALLS PT ROAD
43-SS-0	7584	
43-SS-0		
43-SS-0		
43-SS-0		
43-SS-0		

43-SS-0 7297
 7584
 12 S SEWALLS PT ROAD
 SCHEDULE

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-13, 2006 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8490	Fare	In-Progress	PASS		[Signature]
12	61 N. Rival Rd JF Taylor				[Signature]
11	Schneider	Final	PASS	[Blacked out]	[Blacked out]
10	125 Swales Pt (Also Roof) D. R. Howard				[Signature]
9	W. R. Howard	Final	PASS	[Blacked out]	[Blacked out]
8	W. R. Howard	Final	PASS	[Blacked out]	[Blacked out]
7	810 Vista Sund Carter	Roof Sheath.	PASS	[Blacked out]	[Blacked out]
6	3 Simons St Carter	Tree	PASS	[Blacked out]	[Blacked out]
5	16 E High Pt Carter	Tree	PASS	[Blacked out]	[Blacked out]
4	39 W High Pt W. R. Howard	Outside Electric Stepping Down	PASS	[Blacked out]	[Blacked out]
3	39 W High Pt W. R. Howard	Outside Electric Stepping Down	PASS	[Blacked out]	[Blacked out]
2	10 N. Rival Rd JF Taylor	In-Progress	PASS	[Blacked out]	[Blacked out]
1	10 N. Rival Rd JF Taylor	In-Progress	PASS	[Blacked out]	[Blacked out]
OTHER: 10 N. Rival Rd JF Taylor - No slab - 10 N. Rival Rd JF Taylor - No slab - Boose stove only [Signature]					

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 82.8

The higher the score, the more efficient the home.

SCHECODNIC, HERITAGE PLACE, SEWALLS PT, FL,

1. New construction or existing	2. Single family or multi-family	3. Number of units, if multi-family	4. Number of Bedrooms	5. Is this a worst case?	6. Conditioned floor area (ft ²)	7. Glass area & type	8. Clear - single pane	9. Clear - double pane	10. Tint/other SHGC - single pane	11. Tint/other SHGC - double pane	12. Floor types	13. Raised Wood, Adjacent	14. Slab-On-Grade Edge Insulation	15. Wall types	16. Concrete, Int Insul, Exterior	17. Frame, Wood, Adjacent	18. Ceiling types	19. Under Attic	20. Sup. R=6.0, 133.0 ft ²	21. Sup. R=6.0, 133.0 ft ²	22. Sup. R=6.0, 133.0 ft ²	23. Sup. R=6.0, 133.0 ft ²	24. Sup. R=6.0, 133.0 ft ²	25. Sup. R=6.0, 133.0 ft ²	26. Sup. R=6.0, 133.0 ft ²	27. Sup. R=6.0, 133.0 ft ²	28. Sup. R=6.0, 133.0 ft ²	29. Sup. R=6.0, 133.0 ft ²	30. Sup. R=6.0, 133.0 ft ²	31. Sup. R=6.0, 133.0 ft ²	32. Sup. R=6.0, 133.0 ft ²	33. Sup. R=6.0, 133.0 ft ²	34. Sup. R=6.0, 133.0 ft ²	35. Sup. R=6.0, 133.0 ft ²	36. Sup. R=6.0, 133.0 ft ²	37. Sup. R=6.0, 133.0 ft ²	38. Sup. R=6.0, 133.0 ft ²	39. Sup. R=6.0, 133.0 ft ²	40. Sup. R=6.0, 133.0 ft ²	41. Sup. R=6.0, 133.0 ft ²	42. Sup. R=6.0, 133.0 ft ²	43. Sup. R=6.0, 133.0 ft ²	44. Sup. R=6.0, 133.0 ft ²	45. Sup. R=6.0, 133.0 ft ²	46. Sup. R=6.0, 133.0 ft ²	47. Sup. R=6.0, 133.0 ft ²	48. Sup. R=6.0, 133.0 ft ²	49. Sup. R=6.0, 133.0 ft ²	50. Sup. R=6.0, 133.0 ft ²	51. Sup. R=6.0, 133.0 ft ²	52. Sup. R=6.0, 133.0 ft ²	53. Sup. R=6.0, 133.0 ft ²	54. Sup. R=6.0, 133.0 ft ²	55. Sup. R=6.0, 133.0 ft ²	56. Sup. R=6.0, 133.0 ft ²	57. Sup. R=6.0, 133.0 ft ²	58. Sup. R=6.0, 133.0 ft ²	59. Sup. R=6.0, 133.0 ft ²	60. Sup. R=6.0, 133.0 ft ²	61. Sup. R=6.0, 133.0 ft ²	62. Sup. R=6.0, 133.0 ft ²	63. Sup. R=6.0, 133.0 ft ²	64. Sup. R=6.0, 133.0 ft ²	65. Sup. R=6.0, 133.0 ft ²	66. Sup. R=6.0, 133.0 ft ²	67. Sup. R=6.0, 133.0 ft ²	68. Sup. R=6.0, 133.0 ft ²	69. Sup. R=6.0, 133.0 ft ²	70. Sup. R=6.0, 133.0 ft ²	71. Sup. R=6.0, 133.0 ft ²	72. Sup. R=6.0, 133.0 ft ²	73. Sup. R=6.0, 133.0 ft ²	74. Sup. R=6.0, 133.0 ft ²	75. Sup. R=6.0, 133.0 ft ²	76. Sup. R=6.0, 133.0 ft ²	77. Sup. R=6.0, 133.0 ft ²	78. Sup. R=6.0, 133.0 ft ²	79. Sup. R=6.0, 133.0 ft ²	80. Sup. R=6.0, 133.0 ft ²	81. Sup. R=6.0, 133.0 ft ²	82. Sup. R=6.0, 133.0 ft ²	83. Sup. R=6.0, 133.0 ft ²	84. Sup. R=6.0, 133.0 ft ²	85. Sup. R=6.0, 133.0 ft ²	86. Sup. R=6.0, 133.0 ft ²	87. Sup. R=6.0, 133.0 ft ²	88. Sup. R=6.0, 133.0 ft ²	89. Sup. R=6.0, 133.0 ft ²	90. Sup. R=6.0, 133.0 ft ²	91. Sup. R=6.0, 133.0 ft ²	92. Sup. R=6.0, 133.0 ft ²	93. Sup. R=6.0, 133.0 ft ²	94. Sup. R=6.0, 133.0 ft ²	95. Sup. R=6.0, 133.0 ft ²	96. Sup. R=6.0, 133.0 ft ²	97. Sup. R=6.0, 133.0 ft ²	98. Sup. R=6.0, 133.0 ft ²	99. Sup. R=6.0, 133.0 ft ²	100. Sup. R=6.0, 133.0 ft ²
1. New construction or existing	2. Single family	3. Number of units, if multi-family: 1	4. Number of Bedrooms: 4	5. Is this a worst case?: No	6. Conditioned floor area (ft ²): 4796 ft ²	7. Glass area & type: Single Pane Double Pane	8. Clear - single pane: 695.3 ft ²	9. Clear - double pane: 0.0 ft ²	10. Tint/other SHGC - single pane: 0.0 ft ²	11. Tint/other SHGC - double pane: 178.0 ft ²	12. Floor types: a. Electric Strip	13. Raised Wood, Adjacent: R=19.0, 205.1 ft ²	14. Slab-On-Grade Edge Insulation: R=0.0, 294.5(p) ft ²	15. Wall types: a. Natural Gas	16. Concrete, Int Insul, Exterior: R=5.0, 5084.5 ft ²	17. Frame, Wood, Adjacent: R=11.0, 874.1 ft ²	18. Ceiling types: a. N/A	19. Under Attic: R=30.0, 3570.9 ft ²	20. Sup. R=6.0, 133.0 ft ²	21. Sup. R=6.0, 133.0 ft ²	22. Sup. R=6.0, 133.0 ft ²	23. Sup. R=6.0, 133.0 ft ²	24. Sup. R=6.0, 133.0 ft ²	25. Sup. R=6.0, 133.0 ft ²	26. Sup. R=6.0, 133.0 ft ²	27. Sup. R=6.0, 133.0 ft ²	28. Sup. R=6.0, 133.0 ft ²	29. Sup. R=6.0, 133.0 ft ²	30. Sup. R=6.0, 133.0 ft ²	31. Sup. R=6.0, 133.0 ft ²	32. Sup. R=6.0, 133.0 ft ²	33. Sup. R=6.0, 133.0 ft ²	34. Sup. R=6.0, 133.0 ft ²	35. Sup. R=6.0, 133.0 ft ²	36. Sup. R=6.0, 133.0 ft ²	37. Sup. R=6.0, 133.0 ft ²	38. Sup. R=6.0, 133.0 ft ²	39. Sup. R=6.0, 133.0 ft ²	40. Sup. R=6.0, 133.0 ft ²	41. Sup. R=6.0, 133.0 ft ²	42. Sup. R=6.0, 133.0 ft ²	43. Sup. R=6.0, 133.0 ft ²	44. Sup. R=6.0, 133.0 ft ²	45. Sup. R=6.0, 133.0 ft ²	46. Sup. R=6.0, 133.0 ft ²	47. Sup. R=6.0, 133.0 ft ²	48. Sup. R=6.0, 133.0 ft ²	49. Sup. R=6.0, 133.0 ft ²	50. Sup. R=6.0, 133.0 ft ²	51. Sup. R=6.0, 133.0 ft ²	52. Sup. R=6.0, 133.0 ft ²	53. Sup. R=6.0, 133.0 ft ²	54. Sup. R=6.0, 133.0 ft ²	55. Sup. R=6.0, 133.0 ft ²	56. Sup. R=6.0, 133.0 ft ²	57. Sup. R=6.0, 133.0 ft ²	58. Sup. R=6.0, 133.0 ft ²	59. Sup. R=6.0, 133.0 ft ²	60. Sup. R=6.0, 133.0 ft ²	61. Sup. R=6.0, 133.0 ft ²	62. Sup. R=6.0, 133.0 ft ²	63. Sup. R=6.0, 133.0 ft ²	64. Sup. R=6.0, 133.0 ft ²	65. Sup. R=6.0, 133.0 ft ²	66. Sup. R=6.0, 133.0 ft ²	67. Sup. R=6.0, 133.0 ft ²	68. Sup. R=6.0, 133.0 ft ²	69. Sup. R=6.0, 133.0 ft ²	70. Sup. R=6.0, 133.0 ft ²	71. Sup. R=6.0, 133.0 ft ²	72. Sup. R=6.0, 133.0 ft ²	73. Sup. R=6.0, 133.0 ft ²	74. Sup. R=6.0, 133.0 ft ²	75. Sup. R=6.0, 133.0 ft ²	76. Sup. R=6.0, 133.0 ft ²	77. Sup. R=6.0, 133.0 ft ²	78. Sup. R=6.0, 133.0 ft ²	79. Sup. R=6.0, 133.0 ft ²	80. Sup. R=6.0, 133.0 ft ²	81. Sup. R=6.0, 133.0 ft ²	82. Sup. R=6.0, 133.0 ft ²	83. Sup. R=6.0, 133.0 ft ²	84. Sup. R=6.0, 133.0 ft ²	85. Sup. R=6.0, 133.0 ft ²	86. Sup. R=6.0, 133.0 ft ²	87. Sup. R=6.0, 133.0 ft ²	88. Sup. R=6.0, 133.0 ft ²	89. Sup. R=6.0, 133.0 ft ²	90. Sup. R=6.0, 133.0 ft ²	91. Sup. R=6.0, 133.0 ft ²	92. Sup. R=6.0, 133.0 ft ²	93. Sup. R=6.0, 133.0 ft ²	94. Sup. R=6.0, 133.0 ft ²	95. Sup. R=6.0, 133.0 ft ²	96. Sup. R=6.0, 133.0 ft ²	97. Sup. R=6.0, 133.0 ft ²	98. Sup. R=6.0, 133.0 ft ²	99. Sup. R=6.0, 133.0 ft ²	100. Sup. R=6.0, 133.0 ft ²



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 minimum features.

Builder Signature: _____
 Date: 3/5/05
 City/FL Zip: _____

*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 EnergyStarSM 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 321/638-1492 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.
 EnergyGauge[®] (Version: FLRCSB v3.30)

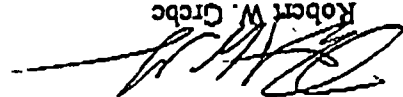
Grebe Sprinklers

Arbogast Enterprises LLC d/b/a

P.O. Box 13630
Fort Pierce, Florida 34979-3630
Phone: (772) 465-1050 • Fax: (772) 429-2322
www.arbogast123@aol.com

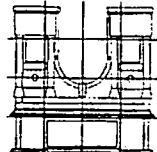
To Whom It May Concern,

In regards to address 12 S Sewalls Point Rd all of the sprinkler heads are low gallon nozzles. If you have any questions regarding this matter or any other sprinkler needs please feel free to give us a call at anytime.



Robert W. Grebe
Grebe Sprinklers
December 7, 2006

M.A. CORSON & ASSOCIATES, Inc.
ARCHITECTURE
STRUCTURAL DESIGN



To: Sewall's Point Building Department

Date: 12/5/06

Re: Schedonic Residence
Lot #18 Heritage Place, Sewall's Point
Permit #

This office approves of the following:

1. It is acceptable that the septic berm is back-filled against the frangible block wall on the south side of the house.
2. Hydrostatic vents have been added into the garage space as per FEMA requirements. The garage has 796 sq. feet of floor space and requires 796 sq. inches of venting. Three vents equaling 806 sq. inches of venting has been installed in the garage.

Thank you for your time and consideration. If you have any questions please call.

Sincerely,

Mark A. Corson
Mark A. Corson A.I.A.

cc: file

ASSOCIATED AIR OF PORT ST LUCIE, INC.

1538 S.E. NIEMEYER CIRCLE

PORT ST. LUCIE, FL. 34952

PHONE (772) 335-7089 FAX (772) 335-7508

STATE LIC# CAC026432



TO WHOM IT MAY CONCERN,

ASSOCIATED AIR HAS INSTALLED TRANE 13 SEER AIR
CONDITIONING EQUIPMENT AT THE SCHEDULED RESIDENCE FOR
DRIFTWOOD HOMES. BECAUSE OF LACK OF SPACE THE CONDENSING
UNITS WERE SET WITH 11" BETWEEN UNITS AND WALLS. TRANE
RECOMMENDS 12". AFTER DISCUSSION WITH A SERVICE REPRESENTATIVE
FROM TRANE, ASSOCIATED AIR HAS DETERMINED THAT BY REMOVING
ONE OF THREE SURROUNDING WALLS, PROPER AIRFLOW TO CONDENSING
UNITS CAN BE ACHIEVED WITH 11" OF CLEARANCE. ASSOCIATED AIR
WARRANTS PROPER UNIT OPERATION WILL BE ACHIEVED AND THE
PROPER UNIT EFFICIENCIES WILL ALSO BE ACHIEVED.

THANKS,

MIKE KRENCIK (VICE-PRES)

Michael Krenzik (V.P.)

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION	
A1. Building Owner's Name GARY & REBECCA SCHECODNIC	For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12 SEWALL'S POINT ROAD	Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 18 HERITAGE PLACE PLAT BOOK 10 PAGE 2	Policy Number
City STUART State FL ZIP Code 34996	

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL	A5. Latitude/Longitude: Lat. N 27 12 04.2" Long. W 080 11 58.7"
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.	A7. Building Diagram Number(s)
A8. For a building with a crawl space or enclosure(s), provide a) Square footage of crawl space or enclosure(s) _____ sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____ sq in c) Total net area of flood openings in A8.b _____ sq in	A9. For a building with an attached garage, provide: a) Square footage of attached garage 796 sq ft b) No. of permanent flood openings in the attached garage 3 c) Total net area of flood openings in A9.b 806.4 sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number TOWN OF SEWALL'S POINT 120164	B2. County Name MARTIN	B3. State FL
B4. Map/Panel Number 12085C-0154	B5. Suffix F	B6. FIRM Index 10/4/02
B7. FIRM Panel Effective/Revised Date 10/4/02	B8. Flood Zone(s) AE/VE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) _____
 NAVD 1929 NAVD 1988 Other (Describe) _____
 B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) _____
 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
 Designation Date _____
 CBRS OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings Building Under Construction Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.
 C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2-a-g below according to the building diagram specified in Item A7.
 Benchmark Utilized _____ Vertical Datum _____
 Conversion/Comments _____

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.
 Check here if comments are provided on back of form.

Certifier's Name ROBERT BLOOMSTER, JR	License Number 4134
Title PRESIDENT/OWNER	Company Name ROBERT BLOOMSTER Prof. Land Surveying, Inc.
Address 791 NE DIXIE HIGHWAY	City JENSEN BEACH State FL ZIP Code 34957
Signature <i>Robert Bloomster</i>	Date 11/21/06 Telephone 772-334-0868



Check here if attachments

Local Official's Name _____ Title _____
 Community Name _____ Telephone _____
 Signature _____ Date _____
 Comments _____

G7. This permit has been issued for: New Construction Substantial Improvement
 G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____
 G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
 G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
 G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

Check here if attachments

Address _____ City _____ State _____ ZIP Code _____
 Signature _____ Date _____ Telephone _____
 Comments _____
 Property Owners or Owner's Authorized Representative's Name _____

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the HAG.
 b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.
 E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
 E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
 E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
 E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

Check here if attachments

Signature _____ Date _____

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.
 Comments GARAGE WALLS ARE BREAKAWAY.

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

For Insurance Company Use:	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
Policy Number	12 SEWALL'S POINT ROAD
Company NAIC Number	City STUART State FL ZIP Code 33496

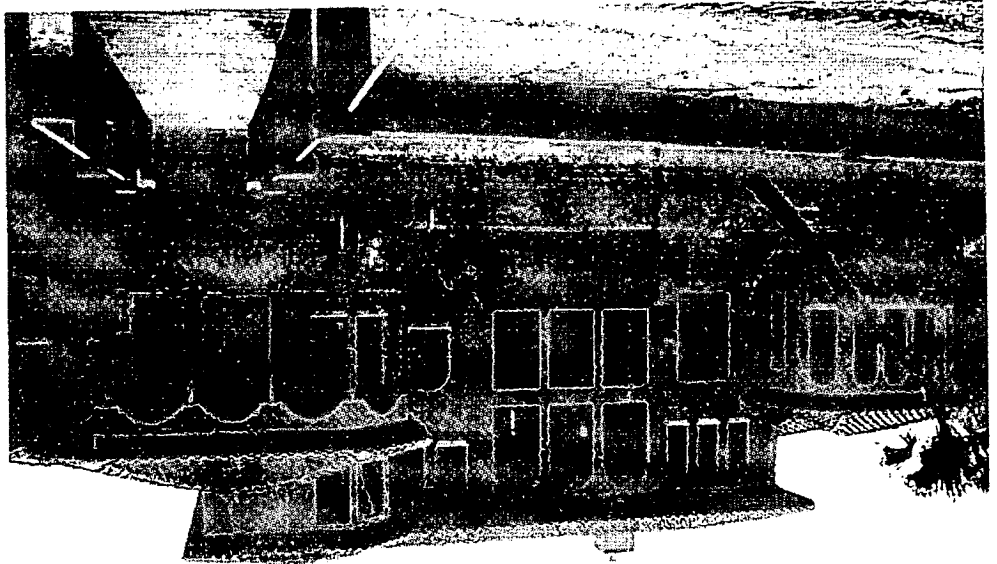
IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Photographs

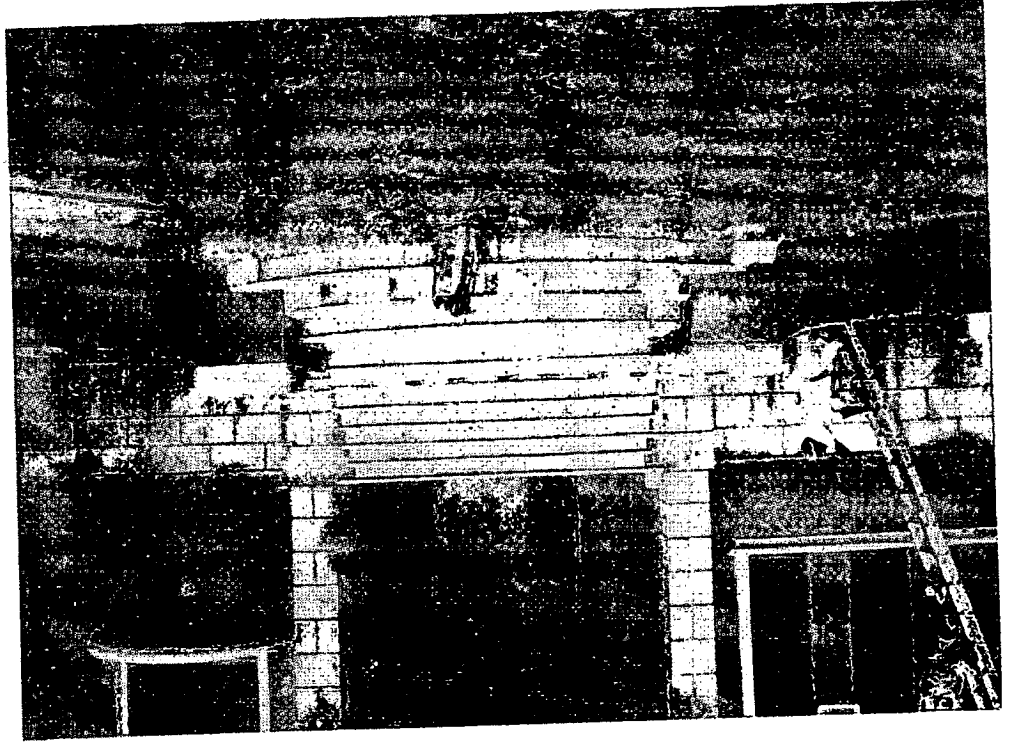
See Instructions for Item A6.

For Insurance Company Use:	Policy Number	Building Street Address (including Apt, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	City	State	ZIP Code	Company NAIC Number
		12 Sewall's Point Road	Stuart	FL	34996	

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken, "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.



Rear View



Front View

SOUTHCOAST PEST CONTROL, INC
SUBTERRANEAN TERMITE CONTROL LIMITED WARRANTY.
(EXCLUDES FORMOSAN TERMITES)

Treatment Address 12 SO. SEWALL'S POINT RD. STUART, FL. 34996 ^{12/6/06} FINAL SPRAY 12.5
Original Treatment Date 8/24/05 Annual Renewal Commences on 8/24/06
Annual Renewal Fee (not to be increased within first 5 years) N/A
Contract # 707857 Area Treated Under This Contract 900 SQ. FT.
GARAGE ONLY

YOUR LIMITED WARRANTY

IN consideration of sums received and to be received by us for treating the above premises for Subterranean Termites, we guarantee to inspect annually the above premises and to apply any necessary treatment to said premises, AT NO EXTRA COST, if Subterranean Termite infestation is found therein during the period that this Limited Warranty remains in force. UNDER NO CIRCUMSTANCES, UNLESS PROVIDED IN WRITING, will damage repair be covered under this limited warranty.

TERMS AND CONDITIONS

Initial payment under this Limited Warranty for termite treatment performed by us is the amount stated above under "Initial Treatment," receipt of which is hereby acknowledged. Initial period of the Limited Warranty shall be ONE year(s), commencing on the date of the initial treatment. In addition to initial period you may, at your option, renew this Limited Warranty annually for a period of N/A additional years by making the above annual renewal payments on or before said renewal date of each subsequent year. If such annual renewal payments are made without lapse during said additional period, this Limited Warranty shall be for N/A year(s) from the date of initial treatment. If annual renewal payment is NOT made on or before said renewal date, this Limited Warranty shall terminate and become null and void as of the renewal date on which said payment is due. Southcoast Pest Control, Inc. reserves the right to adjust the annual renewal rate, if necessary, to offset ever increasing operating costs.

THIS limited Warranty covers the premises as of the date of initial treatment and in the event the premises are structurally modified, altered, or otherwise changed after the date of initial treatment, this Limited Warranty shall terminate, unless a prior written agreement shall have been entered into by the owner for the Company to re-inspect the premises, provide additional treatment if necessary and/or adjust the annual renewal payment/ Southcoast Pest Control, Inc. will not be held responsible for termite damage which enter structures from outside treated areas or that occur as a result of wood in direct contact with the soil.

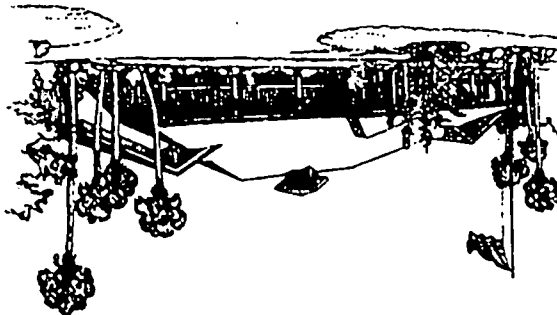
BY OWNER OR AGENT

SOUTHCOAST PEST CONTROL, INC.

(772) 225-0999 • 370-4120

TOWN OF SEWALL'S POINT

ROBERT KELLOGG
Town Manager
JOAN H. BARROW
Town Clerk
Chief of Police
JOHN ADAMS
Building Official



E. DANIEL MORRIS
Mayor
PAMELA M. BUSH
Vice Mayor
THOMAS P. BAUSCH
Commissioner
NEIL SUBIN
Commissioner
DON OSTEN
Commissioner

CERTIFICATE OF OCCUPANCY

Single Family Residence Other

OWNER: Schecodnic PROPERTY ADDRESS: 12 S. Sewalls Pt Rd

LEGAL DESCRIPTION: LOT 18 BLOCK _____ SUBDIVISION Heritage Place

GENERAL CONTRACTOR: Dagwood Homes LIC/CERT NO: RCU056789

ARCHITECT OR ENGINEER: MACGESSON LIC# AE 91665
ENGINEER: FRED SHAFER LIC# 76694

PERMIT NO: 7584 DATE OF ISSUE: 6/1/05 RENEWAL PERMIT NO: 7584 DATE OF ISSUE: 6/1/06
CODE ADDITION: R2 '04 TYPE: SFR USE: RESIDENCE OCCUPANCY: R1

OCCUPANT LOAD: N/A SPRINKLERS REQUIRED: N/A SPRINKLERS USED: N/A

The described portion of the structure has been inspected for compliance with the requirements of this Code for occupancy and division of occupancy and the use for which the proposed occupancy is classified.

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 13th day of December, 2006.

John R. Adams, 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



Important: Read the instructions on pages 1-8.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name GARY & REBECCA SCHECODNIC	
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12 SEWALL'S POINT ROAD South	A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 18 HERITAGE PLACE PLAT BOOK 10 PAGE 2
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL	A5. Latitude/longitude: Lat. N 27 12' 04.2" Long. W 080 11' 58.7"
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.	A7. Building Diagram Number(s)
A8. For a building with a crawl space or enclosure(s), provide	A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) 3618.5 sq ft	a) Square footage of attached garage 796 sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade 3
c) Total net area of flood openings in A8.b	c) Total net area of flood openings in A9.b 806.4 sq in
A1. Building Owners Name GARY & REBECCA SCHECODNIC	A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 12 SEWALL'S POINT ROAD South
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 18 HERITAGE PLACE PLAT BOOK 10 PAGE 2	A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL
A5. Latitude/longitude: Lat. N 27 12' 04.2" Long. W 080 11' 58.7"	A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.
A7. Building Diagram Number(s)	A8. For a building with a crawl space or enclosure(s), provide
A9. For a building with an attached garage, provide:	a) Square footage of crawl space or enclosure(s) 3618.5 sq ft
a) Square footage of attached garage 796 sq ft	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade 3
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	c) Total net area of flood openings in A8.b
c) Total net area of flood openings in A9.b 806.4 sq in	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number TOWN OF SEWALL'S POINT 120164	B2. County Name MARTIN	B3. State FL
B4. Map/Panel Number 12085C-0154	B5. Suffix F	B6. FIRM Index 10/4/02
B7. FIRM Panel Effective/Revised Date 10/4/02	B8. Flood Zone(s) AEVE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 9.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:

FIS Profile FIRM Community Determined Other (Describe) _____

B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other (Describe) _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete items C2-a-g below according to the building diagram specified in Item A7.

Benchmark Utilized Q 236 Vertical Datum NGVD 1929

Conversion/Comments ELEV 4.0

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor). feet meters (Puerto Rico only) 12.13

b) Top of the next higher floor feet meters (Puerto Rico only) 17.13

c) Bottom of the lowest horizontal structural member (V Zones only) feet meters (Puerto Rico only) 10.00

d) Attached garage (top of slab) feet meters (Puerto Rico only) 6.00

e) Lowest elevation of machinery or equipment servicing the building feet meters (Puerto Rico only) 11.67

(Describe type of equipment in Comments)

f) Lowest adjacent (finished) grade (LAG) feet meters (Puerto Rico only) 4.2

g) Highest adjacent (finished) grade (HAG) feet meters (Puerto Rico only) 4.70

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Check here if comments are provided on back of form.

Certifier's Name ROBERT BLOOMSTER, JR

License Number 4134

Title PRESIDENT/OWNER

Company Name ROBERT Bloomster Prof. Land Surveying, Inc.

Address 791 NE DIXIE HIGHWAY

City JENSEN BEACH

State FL

ZIP Code 34957

Date 11/21/06

Telephone 772-334-0868

Signature

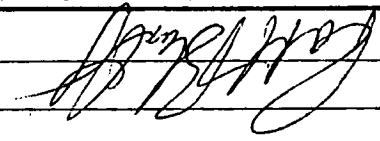
0754134

11/21/06

IMPORTANT: In these spaces, copy the corresponding information from Section A.

For Insurance Company Use:	Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
Policy Number	12 SEWALL'S POINT ROAD
Company NAIC Number	City STUART State FL ZIP Code 33496

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.
 Comments GARAGE WALLS ARE BREAKAWAY WALLS, MAIN RESIDENCE HAS BREAKAWAY WALLS, HOUSE SLAB IS BUILT ON COLUMNS.

Signature  Date 11/21/06

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG):
 a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet _____ meters above or below the HAG.
 b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet _____ meters above or below the LAG.
 E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A items 8 and/or 9 (see page 8 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet _____ meters above or below the HAG.
 E3. Attached garage (top of slab) is _____ feet _____ meters above or below the HAG.
 E4. Top of platform of machinery and/or equipment servicing the building is _____ feet _____ meters above or below the HAG.
 E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.
 Property Owners or Owner's Authorized Representative's Name _____
 Address _____
 City _____ State _____ ZIP Code _____
 Signature _____
 Date _____
 Telephone _____
 Comments _____
 Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in items G8, and G9.
 The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
 A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
 The following information (items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

G7. This permit has been issued for: New Construction Substantial Improvement
 G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet _____ meters (PR) Datum
 G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet _____ meters (PR) Datum

Local Official's Name _____ Title _____ Telephone _____
 Community Name _____ Telephone _____
 Signature _____ Date _____
 Comments _____
 Check here if attachments

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



ELEVATION CERTIFICATE MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This completed form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

The attached elevation certificate requires corrections by the surveyor of section(s) _____ prior to acceptance by the community.

The attached elevation certificate is complete and correct.

Minor corrections have been made in the below marked sections by the authorized Community Official.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name: _____
 A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 12 S. SEWALLS PT RD
 A3. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): _____
 A4. Latitude/Longitude: Lat. _____ Long. _____
 A5. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.
 A6. Building Diagram Number: 6
 A7. Building Diagram Number: _____
 A8. For a building with a crawl space or enclosure(s), provide:
 a) Square footage of crawl space or enclosure(s): N/A sq ft
 b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade: N/A sq in
 c) Total net area of flood openings in A8.b walls within 1.0 foot above adjacent grade: N/A sq in
 A9. For a building with an attached garage, provide:
 a) Square footage of attached garage: _____ sq ft
 b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade: _____ sq in
 c) Total net area of flood openings in A9.b walls within 1.0 foot above adjacent grade: _____ sq in
 A10. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.): _____
 A11. City: _____ State: _____ ZIP Code: _____
 A12. For Insurance Company Use: _____
 For Insurance Company Name: _____
 Policy Number: _____
 Company NAIC Number: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number: _____ B2. County Name: _____ B3. State: _____

B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AD, use base flood depth)
				<u>VE</u>	<u>10</u>

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9:
 FIS Profile FIRM Community Determined Other (Describe): _____
 NAVD 1929 NAVD 1988 Other (Describe): _____
 B11. Indicate elevation datum used for BFE in Item B9: NAVD 1929 NAVD 1988 Other (Describe): _____
 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?
 Designation Date: _____ CBRS OPA
 Yes No

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings Building Under Construction Finished Construction
 A new Elevation Certificate will be required when construction of the building is complete.
 C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete items C2-a-g below according to the building diagram specified in Item A7.
 Benchmark Utilized: _____
 Conversion/Comments: _____
 Vertical Datum: _____
 Check the measurement used.

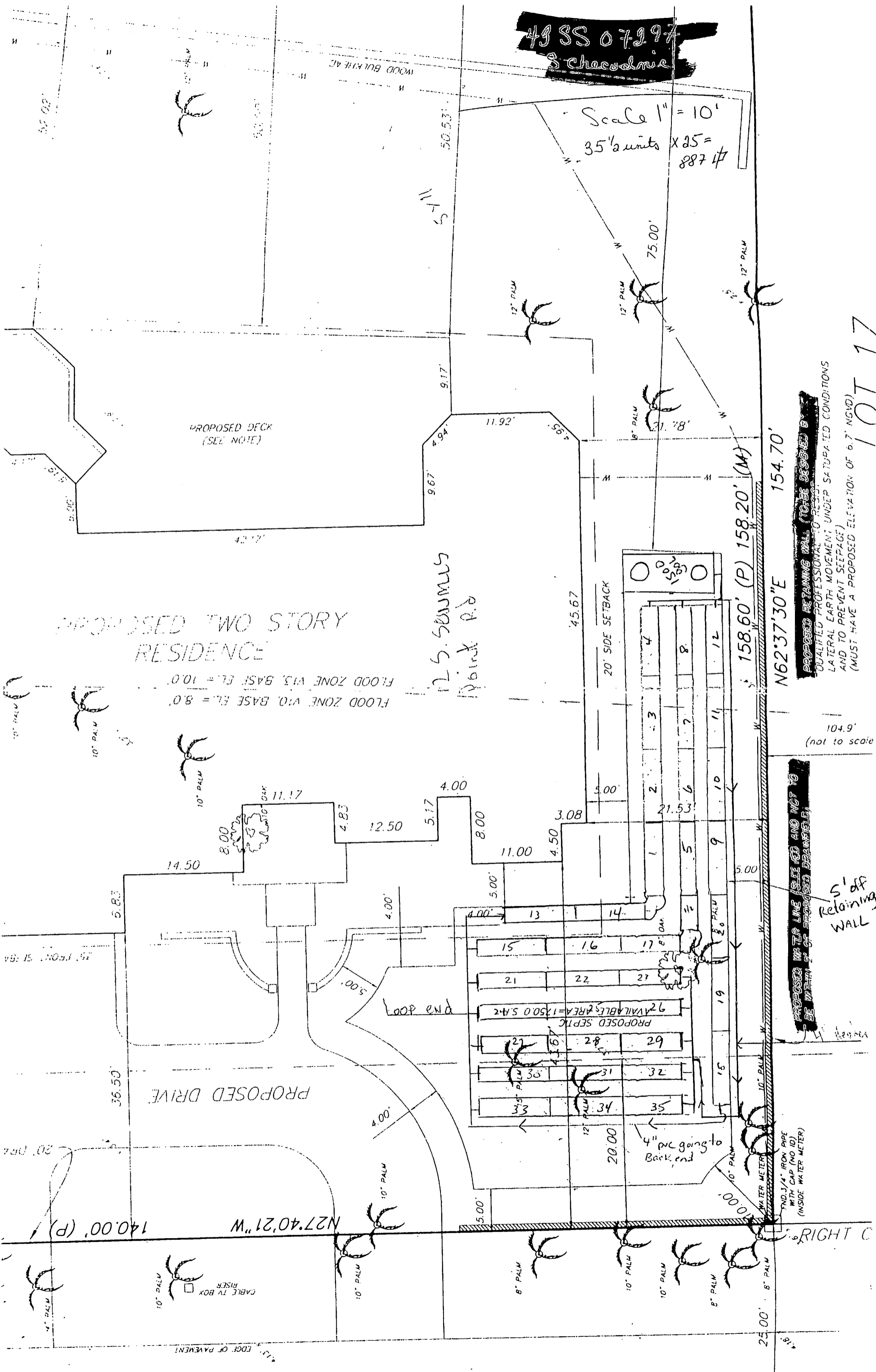
	feet	meters (Fuero Rico only)
a) Top of bottom floor (including basement, crawl space, or enclosure floor)	_____	_____
b) Top of the next higher floor	_____	_____
c) Bottom of the lowest horizontal structural member (V Zones only)	_____	_____
d) Attached garage (top of slab)	_____	_____
e) Lowest elevation of machinery or equipment servicing the building	_____	_____
f) Describe type of equipment in Comments	_____	_____
g) Lowest adjacent (finished) grade (LAG)	_____	_____
h) Highest adjacent (finished) grade (HAG)	_____	_____

COMMENTS:

WALLS OF ENCLOSED SPACES BELOW BFE ARE BREAKAWAY
SEE COMMENTS IN SECTION D.
 Date of Review: 5-18-09
 Building Official: [Signature]

43 SS 07-29-77
S. Chacodmie

Scale 1" = 10'
35 1/2 units x 25 =
887 1/2



PROPOSED TWO STORY RESIDENCE

FLOOD ZONE V.0. BASE EL. = 8.0'
FLOOD ZONE V.3. BASE EL. = 10.0'

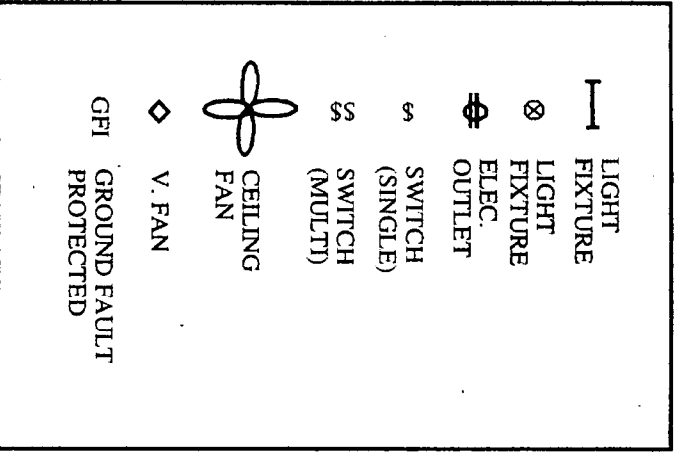
12 S. SUMMUS
Point P.D.

PROPOSED RETAINING WALL (TO BE DESIGNED BY QUALIFIED PROFESSIONAL TO RESIST LATERAL EARTH MOVEMENT UNDER SATURATED CONDITIONS AND TO PREVENT SEEPAGE) (MUST HAVE A PROPOSED ELEVATION OF 6.7' NGVD)

PROPOSED WATER LINE (SLEEVED AND NOT TO BE WITHIN 5' OF PROPOSED DRAINFIELD)

5' off Retaining WALL

10T 17



Electrician Notes:

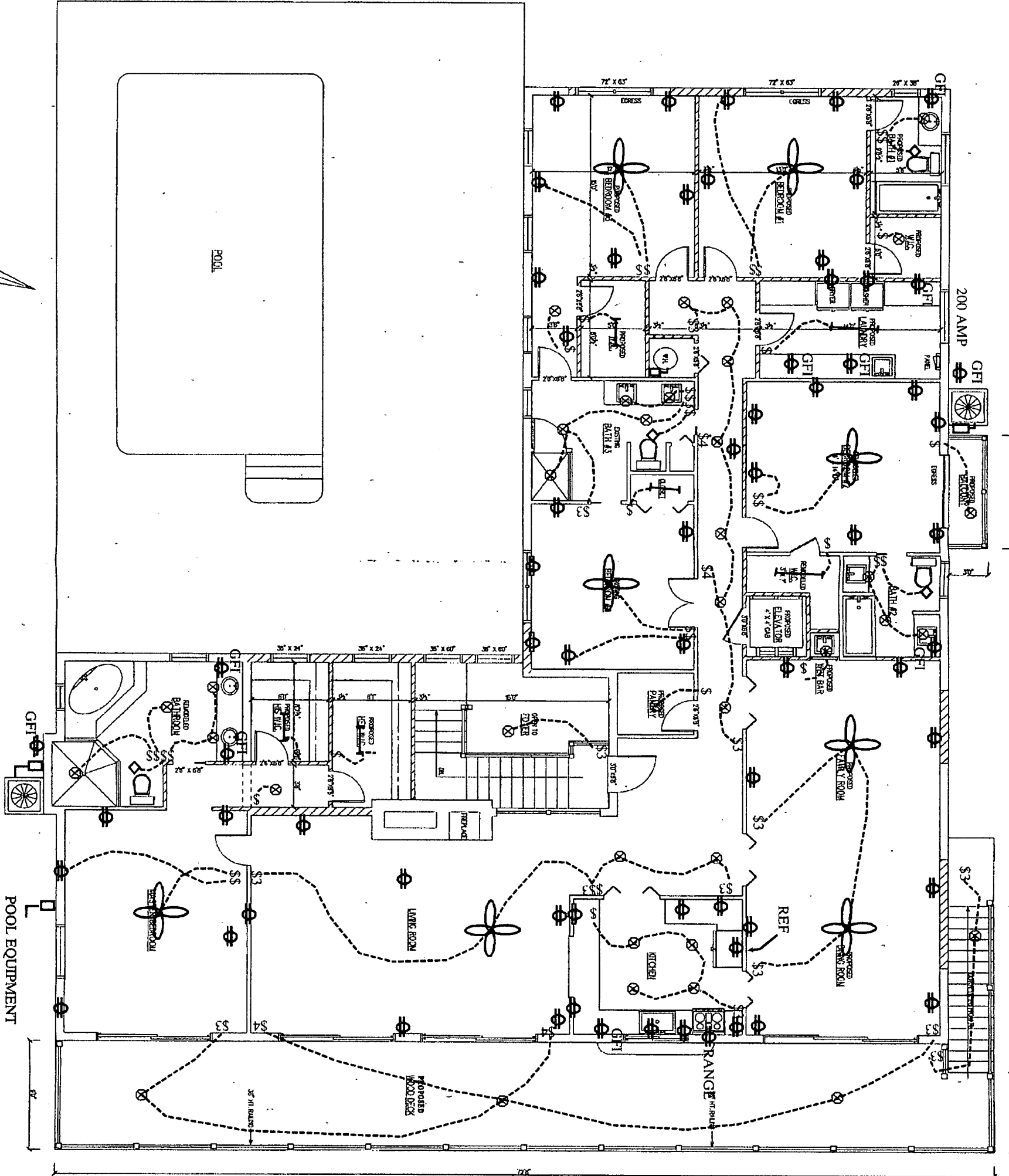
- All bedroom outlets to be AFCI protected.
- All Living room outlets to be AFCI protected
- All kitchen receptacles to be GFI protected
- Smoke/Carbon Monoxide detectors to be AFCI protected.
- All disconnects to be pullout type.

ELECTRICAL PLAN
PREPARED BY:

ADAM CHAPMAN

ACES ELECTRICAL SERVICES

DATE: 07/25/2013



NEW MAIN FLOOR PLAN

1/4" = 1'-0"



POOL

8064

MASTER PERMIT NO.

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 8064

Date 2/21/06

Building to be erected for SCARODNIC

Applied for by OLYMPIC POOLS

Subdivision HEATSEAL lot 18 Block

Address 12 S. SEWALL'S POINT RD

Type of structure SPA

Parcel Control Number: 138410130000010090000

Amount Paid 2104.00 Check # 17914 Cash

Total Construction Cost \$ 13,000

TOTAL Fees 264.00

Other Fees (R.F.R.) 24.00

Roofing Fee

Plumbing Fee

Electrical Fee

A/C Fee

Impact Fee

Radon Fee

Building Fee 240.00

Type of Permit Swimming Pool

Signed _____ Applicant

Signed [Signature] Town Building Official

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

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

RECEIVED
RZ/15/04

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: Gayle Rebecca

Phone (Day) 486-2931

(Fax) 335-8029

Job Site Address: 12 South Semple Rd. Schecodnic

City: Stunt

State: FL Zip: 34929

Legal Description of Property: Lot 18 Heritages Place

Parcel Number: _____

Owner Address (if different): 1

City: Stunt State: FL Zip: 34994

Description of Work To Be Done: Swimming Pool

WILL OWNER BE THE CONTRACTOR? No Yes

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

CONTRACTOR/Company: Olympic Posh

Phone: 288-6070

Fax: 288-6962

Street: Monroe St

City: Stunt

State: FL Zip: 34996

State Registration Number: _____

State Certification Number: AC039888 Martin County License Number: _____

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 13,000 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: #

State: FL

Mechanical: _____

Plumbing: _____

Roofing: _____

ARCHITECT _____

Phone Number: _____

City: _____

State: _____

Zip: _____

ENGINEER Curly Sinclair

1271 Perry Trail

Phone Number: _____

City: Bella B. Gardens State: FL Zip: _____

AREA SQUARE FOOTAGE - SEWER - ELECTRIC _____

Living: _____

Garage: _____

Covered Patios: _____

Screened Porch: _____

Carport: _____ Total Under Roof _____

Wood Deck: _____

Accessory Building: _____

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

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

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

OWNER OR AGENT SIGNATURE (required) Rebecca Schecodnic

CONTRACTOR SIGNATURE (required) [Signature]

State of Florida, County of: Martin

This the 1st day of February, 2009

by Rebecca Schecodnic who is personally

known to me or produced

As identification, _____

My Commission Expires: _____

Seal
Bonded
Florida Notary
Public
Commission # _____
Expires: _____

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

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID JK OLYMP-7
DATE (MM/DD/YYYY) 01/30/06

PRODUCER
Insurance By Ken Brown, Inc.
P. O. Box 540569
1339 Arlington Street
Orlando FL 32805
Phone: 407-849-0490 Fax: 407-648-0197

INSURERS AFFORDING COVERAGE NAIC #

INSURER A: Amerisure Mutual Ins. Co 23396
INSURER B: Amerisure Ins Company 19488
INSURER C:
INSURER D:
INSURER E:

INSURED
Olympic Pools of Stuart Corp
2839 SE Monroe Street
Stuart FL 34997

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 ADD'L LTR INSRD TYPE OF INSURANCE POLICY NUMBER POLICY EFFECTIVE DATE (MM/DD/YY) POLICY EXPIRATION DATE (MM/DD/YY) LIMITS

A	GENERAL LIABILITY	CPPI38541804	02/01/06	02/01/07	EACH OCCURRENCE	\$ 1,000,000	
	COMMERCIAL GENERAL LIABILITY				CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	DAMAGE TO RENTED PREMISES (ea occurrence)	\$ 50,000
	PP BAI				PERSONAL & ADV INJURY	\$ 1,000,000	
	PP BAI				GENERAL AGGREGATE	\$ 2,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP OP AGG	\$ 2,000,000	
	AUTO				ANY AUTO		
	SCHEDULED AUTOS						
	HIRE AUTOS						
	NON-OWNED AUTOS						
	PROPERTY DAMAGE				(Per accident)	\$	

B	AUTOMOBILE LIABILITY	CU201289903	02/01/06	02/01/07	ANY AUTO				
	EXCESS/UMBRELLA LIABILITY				CLAIMS MADE <input type="checkbox"/> OCCUR	EACH OCCURRENCE	\$ 3,000,000		
	GARAGE LIABILITY				ANY AUTO				
	AGGREGATE					\$			
	DEDUCTIBLE					\$			
	RETENTION				\$ 10,000				
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC201793702	02/01/06	02/01/07	E.L. DISEASE - EA EMPLOYEE	\$ 100,000
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?								
	IF YES, describe under SPECIAL PROVISIONS below								
	OTHER								
AGGREGATE		\$							
E.L. DISEASE - EACH ACCIDENT	\$ 100,000								
E.L. DISEASE - POLICY LIMIT	\$ 1,000,000								
WC STATUS									
OTHER LIMITS									
OTHER THAN EA ACC									

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

CERTIFICATE HOLDER
SEWATLS

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

AUTHORIZED REPRESENTATIVE
City of Sewalls Point
1 South Sewalls Point Rd.
Sewalls Point FL 34996

JRB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE GARR
SECRETARY

SMITH, KIM S
OLYMPIC POOLS OF STUART CORP
3331-B SW 42ND AVENUE
PALM CITY FL 34990

The COMMERCIAL POOL/SPA CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2006

DATE	BATCH NUMBER	LICENSE NBR
06/11/2004	030706675	CP039888

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
SEQ#L04061102066

STATE OF FLORIDA


AC# 1446890

DETACH HERE

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
AC# 1446890

CP039888 06/11/04 030706675
CERT COMMERCIAL POOL/SPA CONTR
SMITH, KIM S
OLYMPIC POOLS OF STUART CORP

IS CERTIFIED under the provisions of Ch. 489 FS.
Expiration date: AUG 31, 2006
L04061102066



SMITH, KIM S
OLYMPIC POOLS OF STUART CORP
3331-B SW 42ND AVENUE
PALM CITY FL 34990

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

(850) 487-1395



2005-2006 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

LARRY C. O'BRIEN, TAX COLLECTOR, P.O. BOX 5012, STUART, FL 34996

(772) 288-5804

3331 SW 42ND AVE AV-B PC

CHARACTER COUNTS IN MARTIN



PREV. YR.	\$	00
LOC. FEE	\$	00
PENALTY	\$	00
CYL. FEE	\$	00
TRANSFER	\$	00
TOTAL	\$	25.00

IS HEREBY LICENSED TO ENGAGE IN THIS BUSINESS, PROFESSION OR OCCUPATION AS A **CERTIFIED POOL SPA CONTRACTOR** AT LOCATION LISTED FOR THE PERIOD INDICATED ON THIS

3331 SW 42ND AVENUE B
STUART CITY FL 34990

16 DAY OF **AUGUST** 05

AND EXPIRES SEPTEMBER 30, 2006

12 00002004 0023229

TOWN OF SEWALL'S POINT

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 12 Sora Sewall Pt Rd, and hereby affirm that one of the following methods has been used to meet the requirements of Chapter 515, Florida Statutes.

The pool is isolated from access to the home by an enclosure that meets the pool barrier requirements of Florida Statute 515.29

The pool is equipped with an approved safety pool cover that complies with ASTM F1346-91 (Stand Performance Specification for Safety Covers for Swimming Pool, Spas, and Hot Tubs)

All doors and windows providing direct access from the home to the pool are 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 are equipped with self-closing, 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.

CONTRACTOR'S SIGNATURE & DATE

NOTARY PUBLIC, STATE OF FLORIDA

AS TO CONTRACTOR PERSONALLY KNOWN OR PRODUCED ID (1800-432-4254) Florida Notary Public Commission # PAMELA SMITH

Kim Smith

OWNER'S SIGNATURE & DATE

NOTARY PUBLIC, STATE OF FLORIDA

AS TO CONTRACTOR PERSONALLY KNOWN OR PRODUCED ID Florida Notary Public Commission # HELEN R. MORRIS

Blanca S. Serecama 4/31/06

THIS FORM MUST BE SUBMITTED TO THE BUILDING DEPARTMENT PRIOR TO FINAL INSPECTION

Florida Energy Code – Section 612.1.ABC.2.3

On-off switch required
Cover designed to minimize heat loss
Time clocks – run during off-peak electric demand periods
Provide Pool Barrier
Ladders and Steps
Water depth more than 24 inches must have ladder or steps (ma. step rise 12 inches)
More than 5 foot depth must have ladders, stairs or underwater benches/swimouts in deep end
If diving equipment is used swimouts must be recessed or located in the corner

Show ladder detail. Detail electric bonding and compliance to NEC

Skimmers must contain the following:

Surface skimmers are required

One (1) per 100 square feet of surface area

Minimum Flow rate of 25 GPM per skimmer

Main outlet must be installed at the deepest point

Inlet Fitting must contain the following:

One per 15000 gallons

Where more than one (1) is required must be a minimum of 10 feet separation

Show side detail with electric bonding and compliance to manufacturer specifications

Show handhold locations when required

Provide Electric diagram

Provide GFI outlet located per NEC

Equipment Foundation and Enclosures

Must be on one (1) concrete base or slab

All heating and electrical equipment must be protected from the weather

Pool Deck

Foundation or thickened edge section showing thickness of deck and what material is to

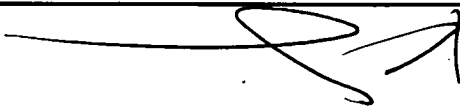
be used

Step details showing tread and riser dimensions as well as handrails with height and

spacing of balusters

**ALL INFORMATION AND DOCUMENTS MENTIONED ABOVE
ARE INCLUDED IN THE MY PERMIT APPLICATION PACKAGE**

(SIGNATURE OF APPLICANT)



DATE SUBMITTED:

2/15/06

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____ TAX FOLIO # 01-35-41-013-000-00180-9

NOTICE OF COMMENCEMENT

STATE OF Fla. COUNTY OF Martin

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

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

Lot 18 Heritage Place 12 South Sea, 16 APR

GENERAL DESCRIPTION OF IMPROVEMENT:

Swimming Pool

OWNER:

Gary + Rebecca Schoednic

ADDRESS:

486-2931

PHONE #:

335-8509

CONTRACTOR:

Oliver's Pools

ADDRESS:

Monroe St
Shaw Ft 2429x

PHONE #:

288-6982

SURETY COMPANY (IF ANY)

ADDRESS:



PHONE #:

INSTR # 1911063 OR BK 02112 PG 2423 RECD 02/15/2006 10:53:44 AM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK 1 Copus (asst mgr)
MARTIN COUNTY

BOND AMOUNT:

THIS IS TO CERTIFY THAT THE

LENDER:

FORGIVING PAGES IS A TRUE

ADDRESS:

AND CORRECT COPY OF THE ORIGINAL

PHONE #:

MARSHA EWING, CLERK

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:

Drishwood Home

NAME:

ADDRESS:

215-0074

PHONE #:

334-5817

IN ADDITION TO HIMSELF, OWNER DESIGNATES

Alan Horn

OF Drishwood Home TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.

PHONE #:

FAX #:

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

SIGNATURE OF OWNER

Rebecca Schoednic

SWORN TO AND SUBSCRIBED BEFORE ME THIS

DAY OF

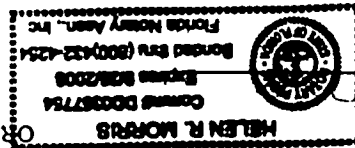
February

BY

PERSONALLY KNOWN

PRODUCED ID

TYPE OF ID



NOTARY SIGNATURE

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/22, 2006 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
7822	MEREDON	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
	7 QUAIL RUN LA				
	LOWES				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
8021	YAMPOLSKY	IN REAR DOOF	PASS		
8	117 HILLCREST				
	ALL AREA ROOFING				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
7777	CATHERY	FINAL ROOF	PASS		
6	47 S. SEWALL'S PT				
	PACIFIC ROOFING				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
8047	HORAN	FINAL ROOF	PASS	CLOSE	
4	2 PAIN ROAD	(MAIN HOUSE)			
	PACIFIC ROOFING				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
7851	HORAN	FINAL ROOF	PASS		
4	2 PAIN ROAD	(ADDITION)			
	PACIFIC ROOFING				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
7984	LEWIS	CONCRETE FENCE	PASS	CLOSE	
5	43 RIO VISTA DR	FINAL			
	COMMERCIAL CONTR.				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
8064	SCHEIDT	POOL STEEL + BAND	PASS		
9	12 S. SEWALL'S PT				
	OLYMPIC POOL				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 3/22, 2006 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8008	BRISCOE DEER BUCK		PASS		
8	\$ Gumbo Limbo O/B				
8064	SEACEDONIC Roe Pumping		PASS		
9	125. Olympic Pools				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
TREE	FETTER	tree	PASS		
4	2 HIGH POINT NATURAL BRL.				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
7777	CATHERY, 47 S. SPN.	LATH	PASS		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
7833	BRISCOE 5 Gumbo Limbo	POWER PLINE	FAIL		
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 12-15, 2006 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8433	lope 1415 S. Seawall Rd	water retaining	pass	close
2	Blue Water Marine			
8450	Permyer 10 Belmont Dr	handrail	FAIL	
3	Ameyards			
8427	Hepworth 137 S. River Rd	window + door	FAIL	
5	8 Bull Vista Sand Castle	STAIRS		
8457	Kossauer 137 S. River Rd	footing	FAIL	
155	Nichols Ave			
8472	Kremer 23 Ridgeland Dr	patio - (unit)	pass	
7	848 Planting			
8421	Summing 835 River Rd	foundation steel	pass	
6	Compartments			
800	Schodman	Final - roof	cancel	
8	1255 Seawall Seawall			
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 2007

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8393	Harmony 23 Rio Vista Dr	Final	Pass	FAIL	OM
2	Schellen				
8064	Schrodner 125 Sewall Pt	Final	Pass	APPROX	
5	125 Sewall Pt Debris/Structures				
7200	Schrodner 125 Sewall Pt	Final-deck	Pass	Close	OM
5	125 Sewall Pt O/B				OM
8509	Harmony 23 Rio Vista	Final	Pass	APPROX	
2	Street Lane 23 Rio Vista				
8177	Vitae 13 Knolls Rd	Final	Pass	Close	OM
7	13 Knolls Rd Cypress	(mud catch)			OM
8500	10 Cedar 9 N River Rd	dry-in	Fail	FAIL	OM
8	9 N River Rd Traffic				
OTHER:					
3	8 Rio Vista Sand/Caseta				OM
8427	Heppner Innovation			Pass	

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 2007

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8506	Power	Planning	FAIL		
after 8:30	34 W High Rd	Mechanical	FAIL		
	OB	Mechanical	PASS		
7801	Cummings	Foundation	PASS		
	83 Skiver	Column	PASS		
	Carport	Roof in Progress	PASS		
8483	Walker	Tires	PASS	Close	
2	Leaves Nest	Stair Landing			
8490	Culham	Floor	PASS	Close	
6	2 Gumbo Limbo	OB			
8064	Schradmie	Floor	PASS	Close	
3	125 Sycamore Rd	Demolition Work			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
1201	Power	Fixed			
	3 Emerald Way	OB		Close	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8482	Quateman	Auto Mechanical	PASS	11:20 AM	
5	63 N Euclid	Plumbing		Final	
	Masterpiece				
OTHER:	Tree	Tree	PASS		

GAS TANK & LINES

8155

MASTER PERMIT NO.

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 8155

Building to be erected for SEWALL'S POINT Type of Permit RENOVATION

Applied for by THOMAS GAS (Contractor) Building Fee 35.00

Subdivision SEWALL'S POINT Block 18 Radon Fee _____

Address 125 SEWALL'S POINT RD Impact Fee _____

Type of structure SRV A/C Fee _____

Parcel Control Number: _____ Electrical Fee _____

Roofing Fee _____ Plumbing Fee _____

Amount Paid 35.00 Check # _____ Cash _____ Other Fees () _____

Total Construction Cost \$ 1795.00 TOTAL Fees 35.00

Signed [Signature] Applicant Signed [Signature] Town Building Official

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOLSPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

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



Date: 3-27-06
Town of Sewall's Point BUILDING PERMIT APPLICATION Permit Number:

OWNER/TITLEHOLDER NAME: SCHECODINC Phone (Day) 772-781-2515 (Fax) 772-781-2515

Job Site Address: 125 SEWELL'S POINT RD City: SEWELL'S PT State: FL Zip:

Legal Desc. Property (Subd./lot/block) LOT 18 HERITAGE PLACE Parcel Number: 01388410130000018090000

Owner Address (if different): 2 PINECREST City: SEWELL'S PT State: FL Zip:

Description of Work To Be Done: LP GAS TANK + LINES

WILL OWNER BE THE CONTRACTOR? YES NO

Estimated Cost of Construction or Improvements: \$ 1295.00 (Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ Its improvement cost 50% or more of Fair Market Value? YES NO Method of Determining Fair Market Value: TOWN COST

CONTRACTOR/COMPANY: FERRELL GAS Phone: 561-746-4534 Fax: 561-575-1664

Street: 400 N. OLD DIXIE HWY City: JUPITER State: FL Zip: 33458

State Registration Number: 01189 State Certification Number: 16073 Martin County License Number:

SUBCONTRACTOR INFORMATION:

Electrical: License Number: State: Mechanical: License Number: State: Plumbing: License Number: State: Roofing: License Number: State:

ARCHITECT: Lic.#: Phone Number: City: State: Zip: ENGINEER: Lic.#: Phone Number: City: State: Zip:

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

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

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

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

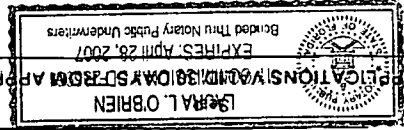
OWNER OR AGENT SIGNATURE (required) CONTRACTOR SIGNATURE (required)

State of Florida, County of: MARTIN Day of: MARCH 2006 This the 28th day of March 2006

by: [Signature] who is personally known to me or produced as identification

My Commission Expires: [Signature] Notary Public

PERMIT APPLICATIONS, WORKS, AND APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROMPTLY Seal



My Commission Expires: [Signature] My Commission Expires [Signature] Atlantic Bonding Co., Inc.

As identification: [Signature] Commission # DD414717 Expires: APR 04, 2009

known to me or produced as identification: [Signature] Notary Public State of Florida

ACORD. CERTIFICATE OF LIABILITY INSURANCE

PRODUCER
 Lockton Companies
 444 W. 47th Street, Suite 900
 Kansas City Mo 64112-1906
 (816) 960-9000

INSURED
 FERRELLGAS, LP
 ONE LIBERTY PLAZA
 LIBERTY, MO 64068

INSURERS AFFORDING COVERAGE
 INSURER A: ACE AMERICAN INSURANCE COMPANY
 INSURER B:
 INSURER C:
 INSURER D:
 INSURER E:

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.

DATE (MM/DD/YYYY) 07/12/2005

COVERAGES FERCO03 YA

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	LTB	TYPE OF INSURANCE	POLICY NUMBER	DATE (MM/DD/YY)	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	A	GENERAL LIABILITY	XSL G21731742	08/01/2005	08/01/2005	08/01/2006	EACH OCCURRENCE \$ 3,000,000
		COMMERCIAL GENERAL LIABILITY					CLAIMS MADE <input checked="" type="checkbox"/> OCCUR
		GENL AGGREGATE LIMIT APPLIES PER:					(500,000 SIR) <input checked="" type="checkbox"/>
		POLICY					PROJ <input type="checkbox"/> LOC <input type="checkbox"/>
		ANY AUTO					ALL OWNED AUTOS
		ANY AUTO					SCHEDULED AUTOS
		ANY AUTO					HIRED AUTOS
		ANY AUTO					NON-OWNED AUTOS
		ANY AUTO					PROPERTY DAMAGE (Per accident) \$ XXXXXXXX
		ANY AUTO					BODILY INJURY (Per person) \$ XXXXXXXX
A	A	ANY AUTO	ISA H07944937	08/01/2005	08/01/2006	08/01/2006	COMBINED SINGLE LIMIT (Ea accident) \$ 3,000,000
		BODILY INJURY (Per person)					\$ XXXXXXXX
		BODILY INJURY (Per accident)					\$ XXXXXXXX
		PROPERTY DAMAGE (Per accident)					\$ XXXXXXXX
		AUTO ONLY - EA ACCIDENT					\$ XXXXXXXX
		OTHER THAN EA ACC					\$ XXXXXXXX
		AUTO ONLY - EA ACCIDENT					\$ XXXXXXXX
		EACH OCCURRENCE					\$ XXXXXXXX
		AGGREGATE					\$ XXXXXXXX
		EXCESS LIABILITY					CLAIMS MADE <input type="checkbox"/> OCCUR
A	A	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	WLR C4433351A (AOS) SCF C44333521(W1)	08/01/2005	08/01/2006	08/01/2006	E.L. EACH ACCIDENT \$ 1,000,000
		E.L. DISEASE - EA EMPLOYEE					\$ 1,000,000
		E.L. DISEASE - POLICY LIMIT					\$ 1,000,000
		OTHER CARGO					ISA H07944937
		OTHER CARGO					08/01/2005
		OTHER CARGO					08/01/2006
		OTHER CARGO					\$100,000
		EXCESS LIABILITY					CLAIMS MADE <input type="checkbox"/> OCCUR
		EXCESS LIABILITY					DEDUCTIBLE <input type="checkbox"/> UMBRELLA
		EXCESS LIABILITY					RETENTION \$

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

CERTIFICATE HOLDER
 1681228
 TOWN OF SEWALLS POINT
 1 SOUTH SEWALLS POINT RD
 STUART, FL 34996

ADDITIONAL INSURED: INSURER LETTER:

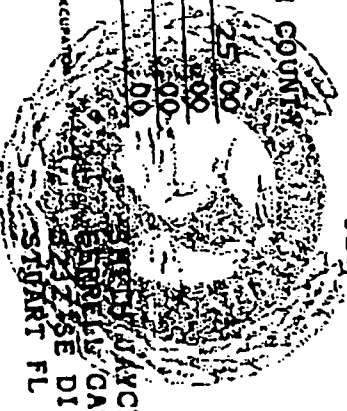
CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER,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

AUTHORIZED REPRESENTATIVE

© ACORD CORPORATION 1988

**2005-2006 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE**

USINS# 1967-249-008 cent SP0 0125
 PHONE: (772) 287-4330 ext. no 221210
 LOCATION: 3232 SE DIXIE HWY MAR



REBECCA JAYCE GENERAL MANAGER
 COUNTY CLERK
 3232 SE DIXIE HWY
 STUART FL 34997

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	00	UC. FEE \$	25.00
\$	00	PENALTY \$	00
\$	00	COL. FEE 1	00
\$	00	TRANSFER 3	00
TOTAL			25.00

IS MONEY LICENSE TO BE PAID IN THE MONTH OF AUGUST OR SEPTEMBER OF
 COUNTY ONLY

LOCATION LISTED FOR THE PERIOD BEGINNING ON THE
 18 DAY OF AUGUST TO 05
 AND ENDING SEPTEMBER 2006 12 05081801 003626

POST LICENSE
CONSPICUOUSLY



Liquefied Petroleum Gas License

CATEGORY I LP GAS DEALER

GOOD FOR ONE LOCATION

This license is issued under authority of Section 527.02, Florida Statutes, to:

FERRELLGAS #5539
3232 SE DIXIE HWY
STUART, FL 34997-5239

John H. Brannon
CHARLES H. BRANNON
COMMISSIONER OF AGRICULTURE

State of Florida
Department of Agriculture and Consumer Services

Division of Standards
Bureau of Liquefied Petroleum Gas
Tallahassee, Florida
(850) 921-8001

License Number: 01237
Expiration Date: April 31, 2006
Date of Issue: September 1, 2005
License Fee: \$425.00
Type and Class: 0E01

Florida Department of Agriculture and Consumer Services
Bureau of Liquefied Petroleum Gas
P.O. Box 6720
Tallahassee, Florida 32399-6720

The liquefied petroleum gas license at the bottom of this form is valid ONLY for the company located at the address on the license. Each business location of a company must be licensed. All LP Gas licenses must be renewed annually. Any license allowed to expire shall become inoperative because of failure to renew. The fee for restoration of a license is equal to the original license fee and must be paid before the licensee may resume operations.

Pursuant to Chapter 527, Florida Statutes, LP Gas licensees must present proof of licensure to any consumer, owner, or end user upon request when engaged in the business of servicing, testing, repairing, or installing LP Gas systems and/or equipment.

For future correspondence, please make any needed corrections or changes to your business mailing address and/or your licensed location address and return the UPPER PORTION with corrections to:

Business Mailing Address

License Number: 01237

Florida Department of Agriculture and Consumer Services
Bureau of Liquefied Petroleum Gas
P.O. Box 6720
Tallahassee, Florida 32399-6720

Licensed Location Address:

FERRELLGAS #5539
3232 SE DIXIE HWY
STUART, FL 34997-5239

FERRELLGAS #5539
3232 SE DIXIE HWY
STUART, FL 34997-5239

MARTIN COUNTY GAS CHECKLIST
 COMPLIANT TO 2004 FBC/FUEL GAS CODE & NFPA 54 & 58

OWNER: SCHCOBINC DATE: 3-28-06

JOB ADDRESS: 12 S. SEWELLS POINT RD

CITY/STATE: SEWELLS PT FL

ZIP CODE: _____

CONTRACTOR: FERRILLAS

USE: RESIDENTIAL COMMERCIAL

HOOK UP: TANK METERED UTILITY GAS OTHER

TANK SPECS:

SIZE: 500 GALS

ABOVE GROUND: UNDERGROUND

TANK TYPE: D.O.T. _____

ASME:

OTHER: _____

TANK DISTANCE: (MINIMUM)

SOURCE OF IGNITION: _____ FT. BUILDING OPENINGS: _____ FT.

BUILDING: 10 FT. ADJOINING BUILDABLE LOT LINE: 10 FT.

GAS SPECS: (SEE FBC/FUEL GAS TABLES 402)

NATURAL LP OTHER _____

GAS PRESSURE OF 10 PSI AND PRESSURE DROP OF 0.5

BASED ON A 1/52 SPECIFIC GRAVITY GAS

PIPE/TUBING SPECS. (CHECK ALL THAT APPLY)

IRON _____

SCH. 40 _____

SEMI-RIGID _____

CSST

COPPER _____ POLYETHYLENE PLASTIC _____ S.S. _____ OTHER: _____

COMBUSTION AIR:

REQUIRED: YES NO _____

METHOD FOR SUPPLYING COMBUSTION AIR: _____

WHO PROVIDED THE COMBUSTION AIR CALCS: _____

ARCHITECT/ENGINEER OF RECORD: _____

GAS COMPANY: _____

OTHER: _____

GAS APPLIANCE SPECS: (LIST APPLIANCE TYPE AND BTU)

APPLIANCE #	APPLIANCE TYPE	BTU	*DIA. PIPE	*DIA. PIPE	FT.-LENGTH
1	GENERATOR	292,800	3/4	25	25
2	POOL HEATER	400,000	3/4	45	45
3	6" 11"	25,000	3/4	26	26
4	BOOKTOP	35,000	3/4	42	42
5	WATER HEATER	75,000	3/4	45	45
6	FIREPLACE	45,000	3/4	34	34

(LENGTH BASED ON THE TOTAL PIPE LENGTH FROM THE GAS SOURCE TO THE APPLIANCE)

*THE ABOVE PIPE SIZES WERE TAKEN FROM 2004 FBC/FUEL GAS TABLE NO. NO 402 (32)

NO 402 (26)

L1	25	FT.	3/4	INCH DIA.
L2	45	FT.	3/4	INCH DIA.
L3	26	FT.	3/4	INCH DIA.
L4	42	FT.	3/4	INCH DIA.
L5	45	FT.	3/4	INCH DIA.
L6	34	FT.	3/4	INCH DIA.
L7		FT.		INCH DIA.
L8		FT.		INCH DIA.
L9		FT.		INCH DIA.
L10		FT.		INCH DIA.
L11		FT.		INCH DIA.
L12		FT.		INCH DIA.

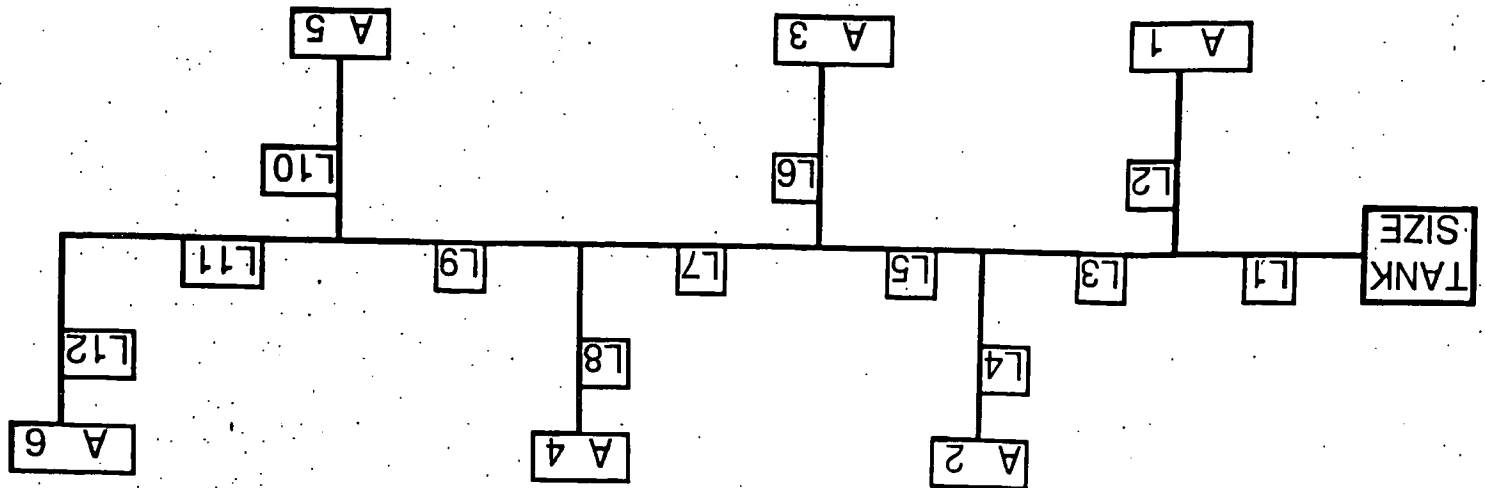
PIPING LENGTH & SIZE

PIPE SIZE WAS TAKEN FROM THE 2004 FBC/FUEL GAS CODE - TABLE 402 (32)

A1	GENERATOR	BTU	292,800
A2	POUR HEATER	BTU	400,000
A3	GRILL	BTU	25,000
A4	COOK TOP	BTU	35,000
A5	WATER HEATER	BTU	75,000
A6	FIREPLACE	BTU	45,000

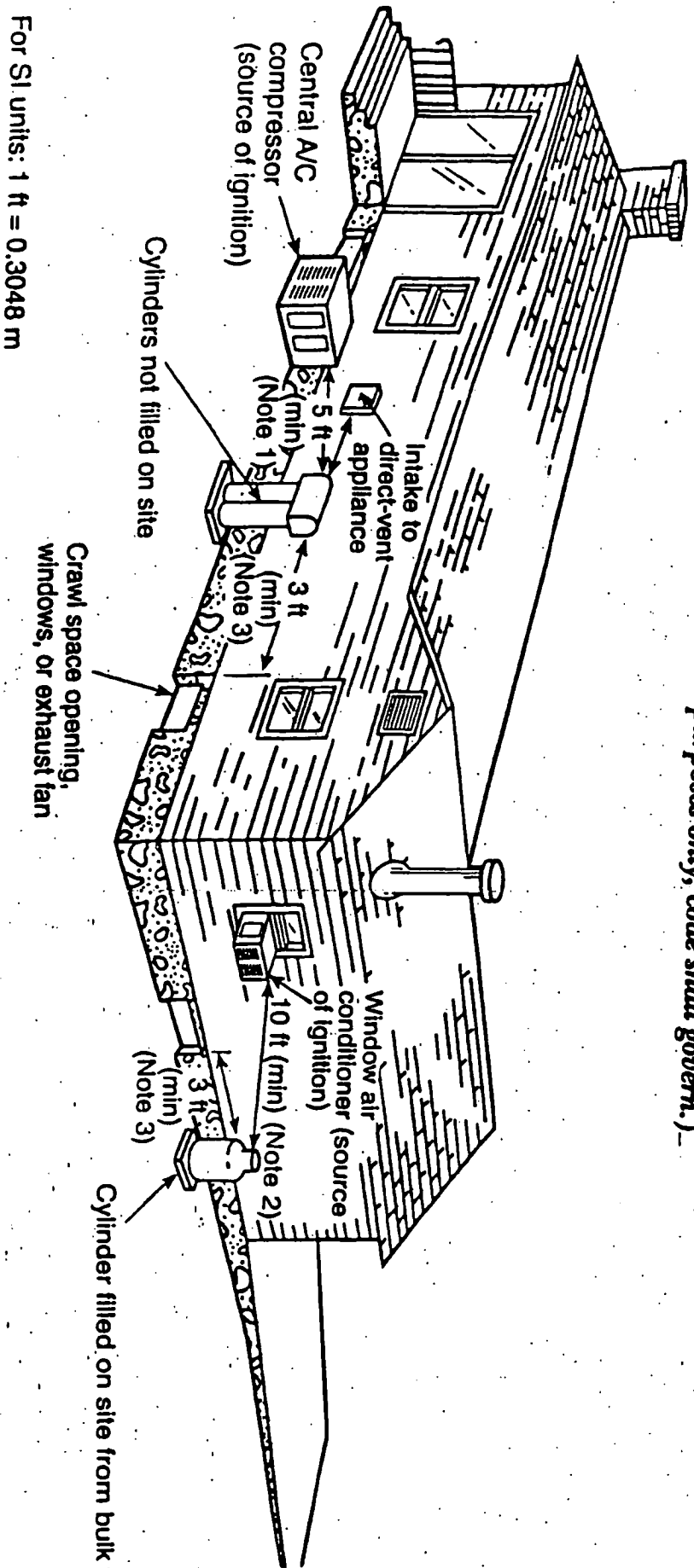
APPLIANCE-TYPE/SIZE

TANK SIZE 500 GALS



GAS PIPING SCHEMATIC

FIGURE I.1(a) Cylinders. (This figure for illustrative purposes only; code shall govern.)



For SI units: 1 ft = 0.3048 m

Note 1: 5-ft minimum from relief valve in any direction away from any exterior source of ignition, openings into direct-vent appliances, or mechanical ventilation air intakes. Refer to 3.2.2.2(b).

Note 2: If the cylinder is filled on site from a bulk truck, the filling connection and vent valve must be at least 10 ft from any exterior source of ignition, openings into direct-vent appliances, or mechanical ventilation air intakes. Refer to 3.2.2.2(d).

Note 3: Refer to 3.2.2.2(b).

DO NOT REMOVE THIS TAG

INSPECTOR

DATE:

4/19

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.

[Handwritten signature]

ADDITIONAL STRAPPING IS
NEEDED ON GAS PIPING
IN CRAWL SPACE ON WEST
SIDE OF HOUSE

NO GAS

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

ADDRESS:

12 S. S. PL.

CORRECTION NOTICE

(772) 287-2455

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

TOWN OF SEWALL'S POINT



*Duplicate
one last*

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun 4/19, 2006 Page 1 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
7764	RUCKS	FORMING	FAIL	
4	20 N. SEWALLS PT	A/C ROUGH	FAIL	
4	MASTAPICE	Exc ROUGH	FAIL	
7764	"	PUMBINA KALI	PASS	
4	"	"	"	
4	"	"	"	
8099	RUCKS	GAS POUCE	FAIL	
4	20 N. SEWALLS PT	PROPANE DISCOUNTS		
8115	SMITH	FINAL GEN TEE	FAIL	
3	7 LOTING WAY	AIR ED PRESSAN		PASS REINSPECTED
8155	SEWALLS	SEWALLS	FAIL	
11	12 S. SEWALLS PT	WATER GAS		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
7938	63 S. BURN RD.	FINAL	PASS	CLOSE
10	63 S. BURN RD.	FOUNTAIN		
10	ADVANTAGE POOL	LATE MORN		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
7110	Remigian	Tuned Pool	PASS	CLOSE
10	ADVANTAGE	LATE MORN		
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat
 4-28, 2006 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
10833	Foster	Steel drop #11C			
5	7 Timor St Custom Built Marine				
7801	Cunningham	Weld carbon steel #11C			
6	83 S. Livers Rd Europa Mgmt				
8153	12 S. Sewall Rd	No report gas nook			
9	12 S. Sewall Rd Tennell Gas				
8116	Kendallgar 12 Riverview Dr	Timed	#115	Close	
7	Fluorine Terrace				
8112	Mockery	Inspection		CHANCE	
3	2 Oakwood Dr Superior Roofing	Bring Skylog Review			
8118	Schramm 109 S. Sewall Rd	Re-inspect for cond #11C hammering noise			
4	Fluorine Terrace				
8161	Rumer 29 S. Livers Rd	Steel inspect no back			
8	29 S. Livers Rd Dean Dental	104m-			

OTHER:

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10-20, 2006 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
20	Silva	10 Santa Hilary	making final	POSTPONE TO MON	
8400	Clear	Clear (2000)	PASS	Close	
9/10	33 Redbury Dr	Clear	No C. 283-5407		
8145	Quinnigan	Structural	FAIL		
155	8400 Hill	830 PM			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8155	Schmitt	gas range	PASS		
10	125 Seaside Pt	Gas			
8414	Langmuir	gas range	PASS		
9	31 S. River Rd	Gas			
8409	VanFossen	plug-in	FAIL		
6	158 S River Rd	fan/light			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	INSPECTOR:
8381	Mc Kibbey	Final-drum	PASS	Close	
5	212 High Pt	1st floor			
OTHER:					

DO NOT REMOVE THIS TAG

INSPECTOR

DATE:

1/29

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.

[Handwritten signature]

*Press. tags @ house entry
is missing pit 156.*

Gas Final

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.

ADDRESS:

12 S. Pk.

CORRECTION NOTICE

TOWN OF SEWALL'S POINT
One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Sat Sun, 2007

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR:
0085	foote	2nd Fl beams	FAIL		
8	94 N. Seawall Pt	footing decks			
	water walls				
8455	Topping	Final-Joiner	PASS		
1	7 Middle Rd				
	Street fence	See Me (5015)			
8497	Block	take in line	PASS		
6	2 Middle St				
	Imp. Disc				
6697	Wino	Final	PASS		
4	113 Henry Seawall				
	Jennelgas				
7619	Sprinkler	Final	PASS		
2	30 W High Pt				
	Jennelgas				
8155	Seawall	Final	FAIL		
7	125 Seawall Pt				
	Jennelgas				
7621	Tadder	Final	PASS		
3	16 E High Pt				
	Jennelgas				
OTHER:					

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2-2, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
855	Sherwood	Final-gas	PASS	Close
5	12 Seward St Fossil Gas			INSPECTOR: <i>[Signature]</i>
8451	Werner	Final-patio door	PASS	Close
4	19 Ridgeland Dr OIB			INSPECTOR: <i>[Signature]</i>
	Tree tower	Tree	PASS	
1	22 1/2 High Ft OB			INSPECTOR: <i>[Signature]</i>
8427	1400 West Engineering	2nd flr Engineering	PASS	
3	840 Vista Sand Castle	Flaming Hike 10:00	PASS	INSPECTOR: <i>[Signature]</i>
2	Vitalo 13 Knowles Guich	Final	Cancel no permit	
8483	Worren	dry in metal	PASS	INSPECTOR: <i>[Signature]</i>
2	6 Grand West Shurt Roofing			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7801	1701 CUMMINGS	Roof 11 process		
6	83.5 RIVER		FAIL	INSPECTOR: <i>[Signature]</i>
OTHER:	3 40816 Hill BEAN tree			<i>[Signature]</i>

CABLE

UNDERGROUND

REPLACE

9133

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:	9133	DATE ISSUED:	APRIL 2, 2009
SCOPE OF WORK:	REPLACE UC CATV		
CONDITIONS:			
CONTRACTOR:	REEL TELECOMMUNICATIONS		
PARCEL CONTROL NUMBER:		SUBDIVISION	
CONSTRUCTION ADDRESS:	12 S SEWALLS PT RD		
OWNER NAME:	COMCAST		
QUALIFIER:	WADE HAGERTY	CONTACT PHONE NUMBER:	561-662-8792

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.

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:	9133
ADDRESS	12 S SEWALLS PT RD
DATE:	4/2/09
SCOPE:	REPLACE UG CATV

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: (@ \$110.25 per sq. ft.)		s.f.
Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)		s.f.
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.		\$
Radon Fee (\$.005 per sq. ft. under roof):		\$
DBPR Licensing Fee: (\$.005 per sq. ft. under roof)		\$
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$
Martin County Impact Fee:		\$
TOTAL BUILDING PERMIT FEE:		\$

ACCESSORY PERMIT	Declared Value:	\$	n/a
Total number of inspections @ \$75.00 each	1	\$	n/a
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	n/a
TOTAL ACCESSORY PERMIT FEE:		\$	n/a

005

RECEIVED
DATE 3/31/09
TOWN OF SEWELL'S POINT

Date: 3/31/09
Town of Sewell's Point
BUILDING PERMIT APPLICATION Permit Number:

OWNER/TITLEHOLDER NAME: COMCAST CABLE
Job Site Address: #12 SEWELLS PT RD South
Legal Desc: Property (Subd/Lot/Block)
Owner Address (if different): 1100 NORTHPOINT PKWY,
Scope of work: REPLACE EXISTING G.U. CATV PARALLEL TO AND CROSSING RW.

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
No Yes (Must include a copy of all variance approvals with application)

CONSTRUCTION VALUES: (Required on all permit applications)
Estimated Value of Improvements: \$
Notice of Commencement required when over \$2500 - prior to first inspection
Is subject property located in flood hazard area? V A9 A8 X
FOR ADDITIONS AND REMODELS IN FLOOD HAZARD AREAS 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: REEL TELECOMMUNICATIONS SERVICE
Street: 3232B SOUTH DIXIE HWY
City: STUART State: FL Zip: 34997
State Registration Number: E70000619
Municipal License Number: 772-781-0003
PROJECT SUPERINTENDANT: LES SMITH
CONTACT NUMBER: 772-781-0003
ARCHITECT: Lic.#: Phone Number:
Street: City: State: Zip:
ENGINEER: Lic.#: Phone Number:
Street: City: State: Zip:

AREA SQ. FOOTAGE: Living: Garage: Covered Patios: Screened Porch:
Carport: Total Under Roof: Wood Decks/walkways: Accessory Building:
CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004 (W/2006 Rev.)
National Electrical Code: 2005 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

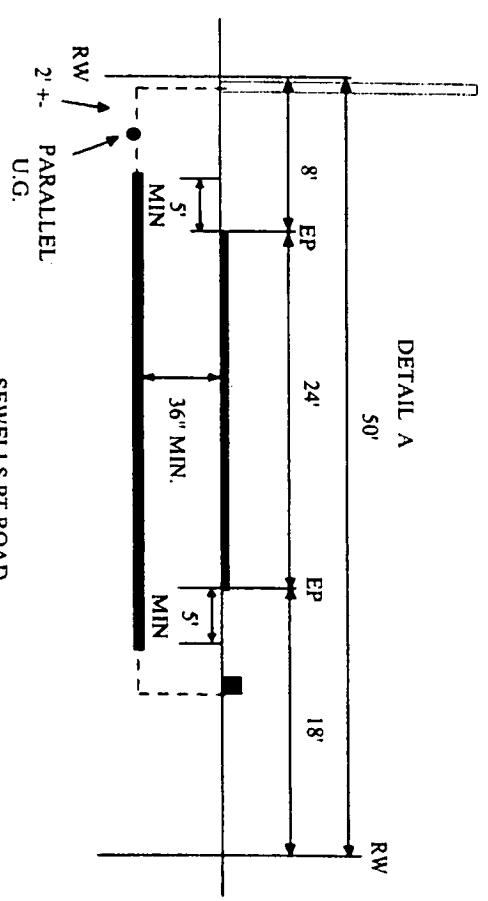
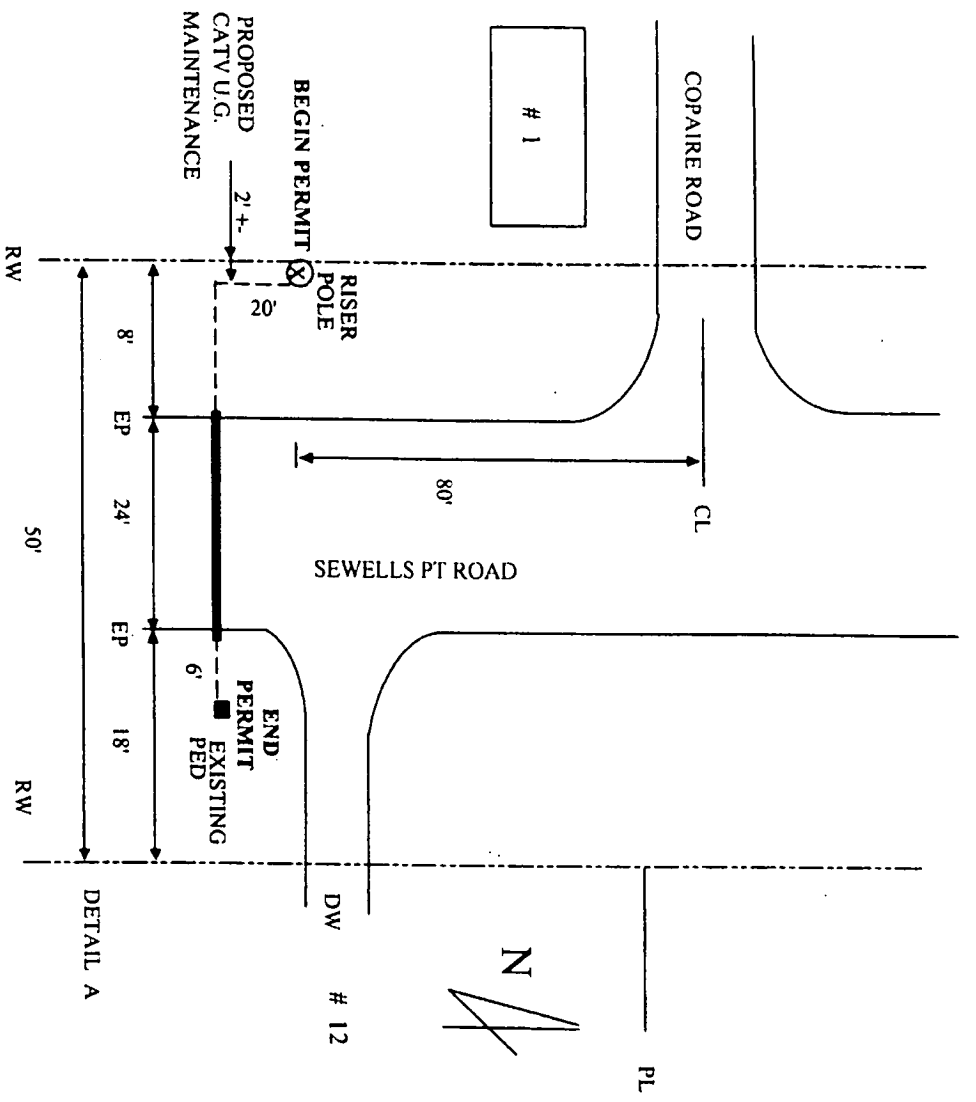
NOTICES TO OWNERS AND CONTRACTORS:

1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. 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 TO YOUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWELL'S POINT, AND 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 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 ALL NULL AND VOID PERMITS. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.
*****A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*****

I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.
OWNER OR AUTHORIZED AGENT SIGNATURE (required) WADE HARTY
State of Florida, County of: Palm Beach
This the 31st day of March 2009
by Wade Harty who is personally known to me or produced
As identification:
My Commission Expires: Notary Public

CONTRACTOR SIGNATURE (required)
On State of Florida, County of:
This the _____ day of _____ 2009
by _____ who is personally known to me or produced
As identification:
My Commission Expires: Notary Public

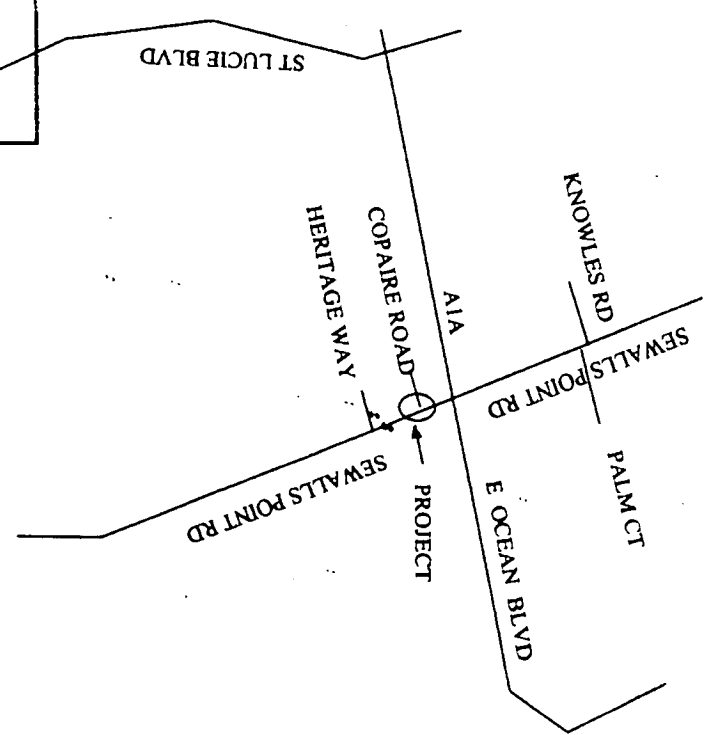
My Commission Expires: 05/16/2012
My Commission DD/89183
SINGLE FAMILY PERMITS APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTICE PER FBC 105.3.4 ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS PER FBC 105.3.2 - PLEASE PICK UP YOUR PERMIT PROMPTLY!
My Commission Expires: Notary Public



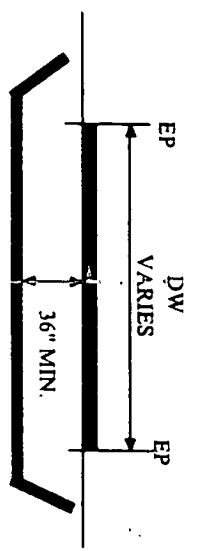
ELEVATION DETAIL LOOKING NORTH
 PROPOSED 2" DIRECTIONAL BORE CROSSING TOWN R/W.
 PROPOSED U.G. CATV CROSSING AND PARALLEL TO TOWN R/W

SEWELLS PT ROAD
 PROPOSED 2" DIRECTIONAL BORE CROSSING TOWN R/W
 PROPOSED U.G. CATV CROSSING AND PARALLEL TO TOWN R/W
 TOTAL LENGTH OF FACILITIES PERMITTED 58' +-

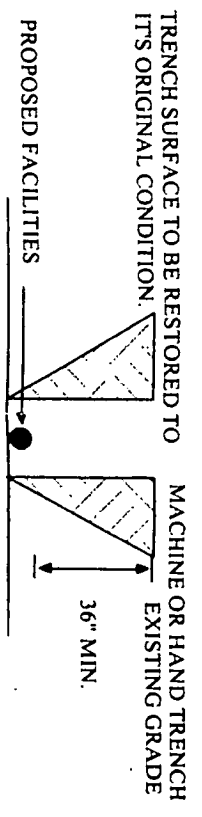
FILE COPY
TOWN OF SEWELL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 2/22/09
BUILDING OFFICIAL



LOCATION MAP
 R-4J T-37 S-1



2" DIRECTIONAL BORE DRIVEWAYS
 TYPICAL

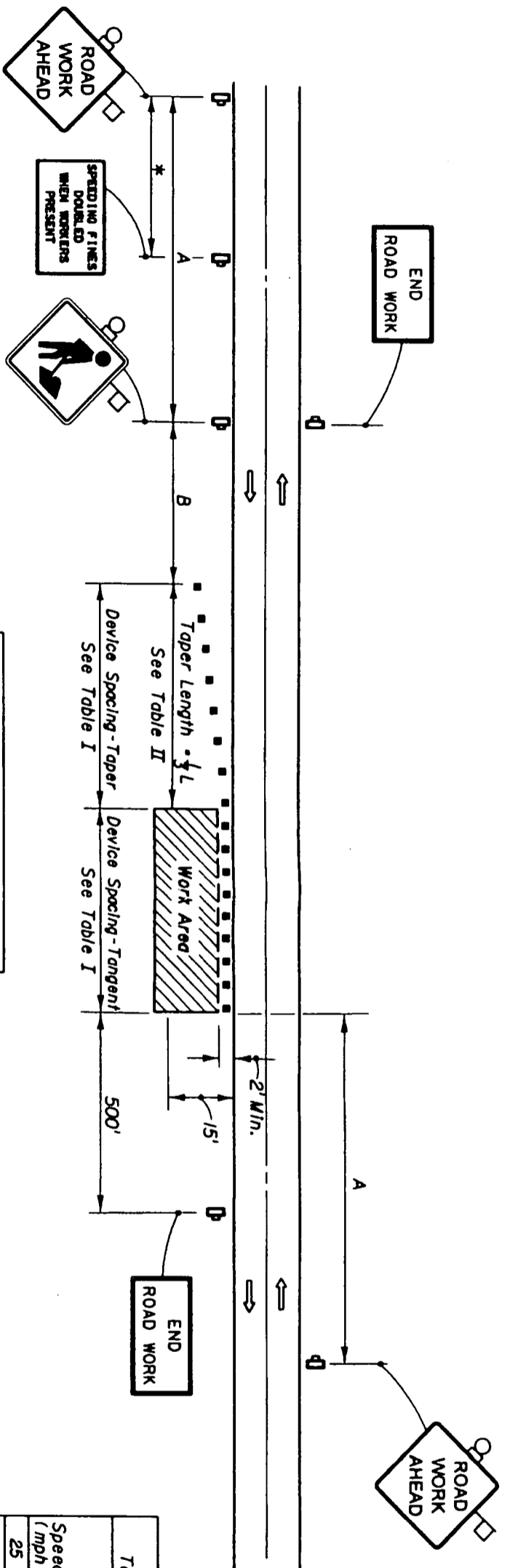


TRENCH SURFACE TO BE RESTORED TO
 ITS ORIGINAL CONDITION.
 PROPOSED FACILITIES
 MACHINE OR HAND TRENCH
 EXISTING GRADE
 36" MIN.

- NOTES:
1. ALL CONSTRUCTION TO BE IN ACCORDANCE WITH TOWN OF SEWELLS POINT ENGINEERING DEPT.
 2. ACTUAL LOCATION OF EXISTING UTILITIES TO BE DETERMINED IN THE FIELD AT THE TIME OF CONSTRUCTION. THE CONTRACTOR SHALL CONTACT ALL UTILITY COMPANIES PRIOR TO CONSTRUCTION.
 3. THE CONTRACTOR SHALL PROTECT ALL UTILITIES AND SHALL BE RESPONSIBLE FOR ANY DAMAGE INCURRED DURING CONSTRUCTION.
 4. CALL 1-800-432-4770 FOR UTILITY LOCATIONS.
 5. CONTRACTOR SHALL BE RESPONSIBLE TO RESTORE THE AREA TO THE SAME OR BETTER CONDITION.
- IT IS THE RESPONSIBILITY OF THE CONSTRUCTION CONTRACTOR TO MAINTAIN TRAFFIC CONTROL IN ACCORDANCE WITH FDOT 2008 DESIGN AND ROADWAY STANDARDS INDEX

K&K COMMUNICATIONS, INC.
 9812 S.E. HIGHBORNE WAY
 HOBE SOUND, FL 33455
 PH: 772-546-2298

PROJECT NAME:		SEWELLS PT RD @ COPAIRE RD	
		U.G. MAINTENANCE	
DATE:	3-2-09	PERMIT TYPE:	SEWELLS POINT
ENGINEER:	GAK	DRAFT:	GAK
		CUSTOMER:	COMCAST
SCALE:	NTS	NODE:	S 21981
SEWELLS PT ROAD		DWG:	1
		DWG:	1



DISTANCE BETWEEN SIGNS

Speed	Spacing (ft.)	
	A	B
40 mph or less	200	200
45 mph	350	350
50 mph or greater	500	500

* 500' beyond the ROAD WORK AHEAD sign or midway between signs whichever is less.

**Table I
Device Spacing**

Speed (mph)	Max. Distance Between Devices (ft.)	
	Cones or Tubular Markers	Type I or Type II Barricades or Vertical Panels or Drums
25	Taper	Tangent
	25	25
30 to 45	Taper	Tangent
	25	30
50 to 70	Taper	Tangent
	50	100

GENERAL NOTES

- When four or more work vehicles enter the through traffic lanes in a one hour period or less (excluding establishing and terminating the work area), the advanced FLAGGER sign shall be substituted for the WORKERS sign. For location of flaggers and FLAGGER signs, see Index No. 603.
- WORKERS sign to be removed or fully covered when no work is being performed.
- SHOULDER WORK sign may be used as an alternate to the WORKER symbol sign only on the side where the shoulder work is being performed.
- When a side road intersects the highway within the TTC zone, additional TTC devices shall be placed in accordance with other applicable TTC indexes.
- For general TCZ requirements and additional information, refer to Index No. 600.

DURATION NOTES

- Signs and channelizing devices may be omitted if all of the following conditions are met:
 - Work operations are 60 minutes or less.
 - Vehicles in the work area have high-intensity, rotating, flashing, oscillating, or strobe lights operating.

**Table II
Taper Length - Shoulder**

Speed (mph)	$\frac{1}{2}$ L (ft)			Notes
	8' Shldr.	10' Shldr.	12' Shldr.	
25	28	35	42	W-S*
30	40	50	60	
35	55	68	82	L-W ^S
40	72	90	107	
45	120	150	180	L-W ^S
50	133	167	200	
55	147	183	220	L-W ^S
60	160	200	240	
65	173	217	260	L-W ^S
70	187	233	280	

$\frac{1}{2}$ L = Length of shoulder taper in feet
 W = Width of total shoulder in feet (combined paved and unpaved width)
 S = Posted speed limit (mph)

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

CONDITIONS

WHERE ANY VEHICLE, EQUIPMENT, WORKERS OR THEIR ACTIVITIES ENCRoACH THE AREA CLoSER THAN 15' BUT NOT CloSER THAN 2' TO THE EDGE OF TRAVEL WAY.

- SYMBOLS**
- Work Area
 - Sign With 18" x 18" (Min.) Orange Flag And Type B Light
 - Channelizing Device (See Index No. 600)
 - Work Zone Sign
 - Lane Identification + Direction of Traffic



2008 FDOT Design Standards

TWO-LANE TWO-WAY, WORK ON SHOULDER

Last Revision: 07/01/07
 Sheet No. 1 of 1

INDEX No. 602

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri

2009 02 28

Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS	INSPECTOR
9223	Open	Final alarm	Pass		
9018	Conquest 38 W High Rd. Munks	Final alarm CATV facility	Pass		
9133	Conquest 125 Seavoods	Final alarm	Pass	Close	
9219	Brownstein 11 N Tower Rd All Shutters	Shutters Final	Pass	Close	
9227	DeLeon 3725 SE Ocean 2 Family Group	Final alarm Final wood	Pass	Close	
9079	Masterpiece 1 MARQUETTE DR	Meta Final	Pass	Ready for FP	

TREE REMOVAL PERMIT

TOWN OF SEWALL'S POINT

RE: ORDINANCE 103

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.

PROJECT DESCRIPTION

REMARKS

REMARKS

Date 6/20/01 TREE REMOVAL PERMIT No 0456

APPLIED FOR BY Brothers Tree Serv.

Owner S. BOOR, 12 S. P + RD VAKIN

Sub-division HARRIS PL. / 12 S. SEWALL'S POINT RD

Block 18

Kind of Trees Small - cypresses

No. of Trees: REMOVE 6

No. of Trees: RELOCATE WITHIN 30 DAYS (NO FEE) 0

No. of Trees: REPLACE WITHIN 30 DAYS 0

REMARKS clear brush remove prohibited papers

FEE \$ 0.00

Signed, Applicant Sign on file

Signed, Town Clerk [Signature]

18 18 18

FILE

TOWN OF SEWALL'S POINT, FLORIDA

TOWN OF SEWELL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

RECEIVED

JUN 19 2001

6/20/01 SCRD. WSP

BY: [Signature]

Date Issued 6/20/01

Permit # 0496

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. SITE: 12 S. SEWELL'S POINT RD (VACANT) (SEE PLAN FOR LEGH) Address P.O. Box 557 (SEE PLAN FOR LEGH) Phone

Owner SUE BARR

Address P.O. Box 557

Contractor Mervin's Inc. Dr. Address P.O. Box 523 Phone 283-8828

Number of trees to be removed (list kinds of trees) Apples about 6

Number of trees to be relocated within 30 days (no fee) (list kinds of trees)

Number of trees to be replaced (list kinds of trees)

Permit fee \$ ~~500.00~~ 150.00 first tree plus \$10.00 - each additional tree - not to exceed 500.00

(No permit fee for trees which are relocated on property or lie within a utility easement & are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property.) Plans approved as submitted Plans approved as marked

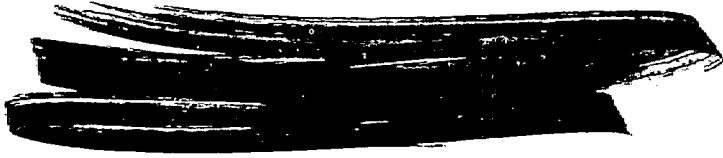
Permit good for one year. Fee for renewal of expired permit is \$5.00

Signature of applicant [Signature] Date submitted 6/19/01 Approved by Building Inspector [Signature] Date 6/20/01 Approved by Building Commissioner [Signature] Date

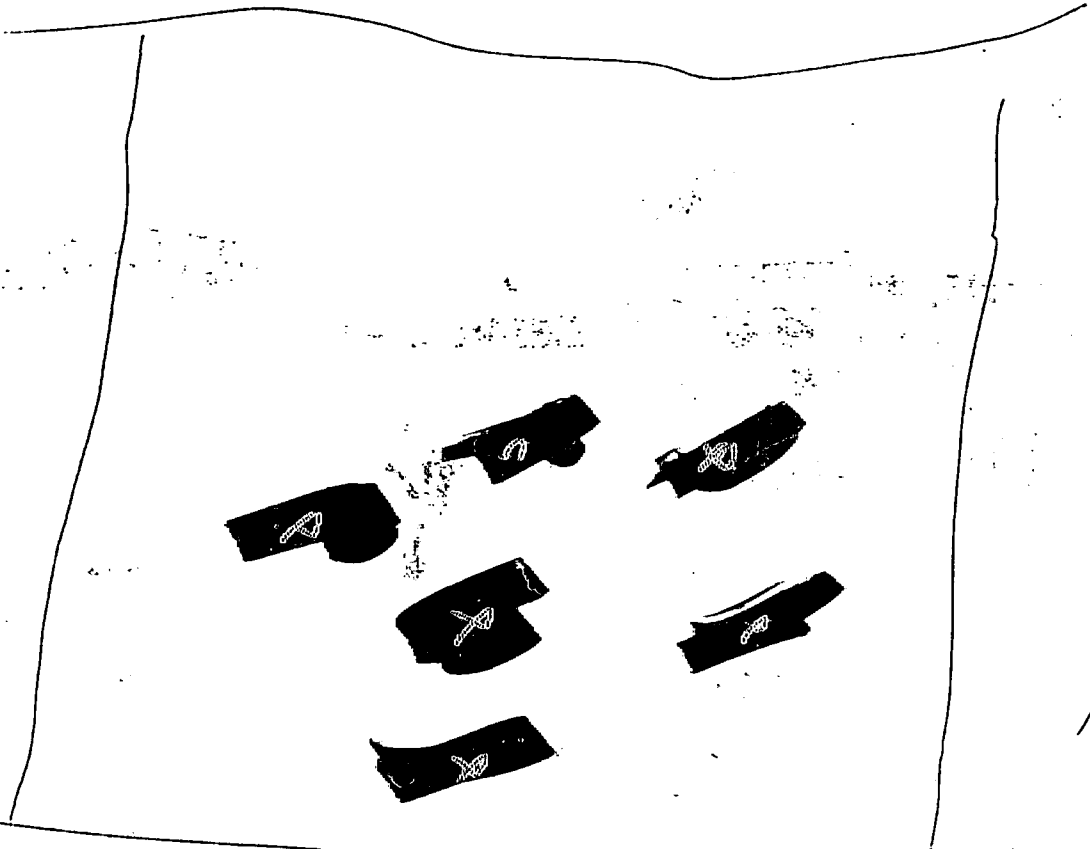
Completed Date Checked by

THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT PERMIT. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGLER FIG. FOR THE PURPOSE OF THIS 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 METALUCA?



marker



House #10

House #14

(MICHIGAN) BY MISS (SUSAN) & S. J. BART.

HERITAGE PLACE LOT 18

SUE BAER
P.O. BOX 557
WOODBERRY, CONN. 06798
#13840130000018090000

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	INSPECTOR
5013	DENNIS	PARTIAL -	Passed	Green board only	
(13)	16 RIDGELAND DR. FL. FINEST	DRYWALL + SCEWOFF			
5352	CLEMENTS	PLUMBING	Passed		
(8)	11 W. HIGHPOINT MOLTER	GRD. ROUGH			
5358	INGRAM	PLUMBING - ROUGH	Passed		
(1)	101 N. SPR BUIFORD				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
TRK	BAKER	FIELD VERIFY:	Passed	CONTR. BTR. & W/FORM	
(14)	12 S. SPR (W/FORM)			PRINT OKS	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
5408	CHURCH	T/I & MTL.	Passed		
(9)	8 ISLAND ROAD PACIFIC RES (FOR 283-0116)				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
S377	ECKOVA	DECK	Passed	VERIFY CHAIR. TRIP SCUR.?	
(6)	107 HEAVY SEWAGE WAY POLS BY GREG (PH. 337-9713)			test in 10/20	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS	INSPECTOR
S161	BIENVENIDA	DRIVEWAY	Passed		
(16)	111 HEAVY SEWAGE WAY GRAN HUTCHINS				

OTHER:

**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. Prohibited species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Scheffera, 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, Marberry, 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: Gray & Beck & Sutherland Address 1 Thebes Street Phone 405-8493

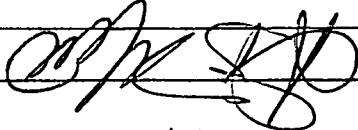
Contractor: Alan Morris Address 2103 Hue Ridge St Phone 334-2577

No. of Trees: REMOVE ALL EXOTICS Type: BRAZILIAN PEPPER, AUSTRALIAN PINE

No. of Trees: RELOCATE _____ Type: _____ WITHIN 30 DAYS

No. of Trees: REPLACE _____ Type: _____ WITHIN 30 DAYS

Written statement giving reasons: ALL EXOTICS ONLY

Signature of Applicant: 

Date: 2/9/04

Approved by Building Inspector: 

Plans approved as submitted in **Plans approved as revised/modified:** _____

Date: 2/9/04 **Fee:** 0

TOWN OF SEWALL'S POINT, FLORIDA

Date February 9 2004 TREE REMOVAL PERMIT No 2200

APPLIED FOR BY SCALCONDIC (Contractor or Owner)

Owner 12 S. Sewall's Point Road

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE AN EXONCS

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

FEE \$ 0

Signed, _____ Applicant
John Thomas (885) Signed, _____
Building Official Town Clerk

TREE REMOVAL PERMIT

TOWN OF SEWALL'S POINT

RE: ORDINANCE 103

PROJECT DESCRIPTION _____

REMARKS _____

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

TOWN OF SEWALL'S POINT, FLORIDA

Date JUNE 1 2005 TREE REMOVAL PERMIT No 2503

APPLIED FOR BY SCARCOB LLC (Contractor or Owner)

Owner 125 SEWALLS PT ROAD

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 1 Oak

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

FEE \$ 15.00

Signed, _____ Applicant [Signature] Town Clerk

Building Official

TREE REMOVAL PERMIT

RE: ORDINANCE 103

PROJECT DESCRIPTION _____

REMARKS _____

Blank lined area for project description and remarks.

Blank lined area for project description and remarks.

Postor

