

24 South Sewall's Point Road

174

SFR

TOWN OF SEWALL'S POINT - FLORIDA

Application For Building Permit

2200 SUNRISE KEY BLVD
FT LAUDERDALE 33304

Owner REGINER NEXSEN Present Address _____ Phone 524-8330

Architect HOLEN E SMITH Address JOPITER FLA

General Contractor OWNER Address _____ Phone _____

Where Licensed Mickey Plumbing Juno, Fla License No. # 29 # 13991

Plumbing Contractor _____ Where Licensed _____ No. _____

Electrical Contractor _____ Where Licensed _____ No. _____

Property Location SEWALLS PT RD Subdivision MIRAMAR Lot No. 9

Lot Dimensions 122X 251 Lot Area 29,912 Sq. Ft. _____

Purpose of Building RESIDENCE Type of Construction CBS

Building Area: Sq. Ft. (Exclusive of Garage, Carport, Open Porches)

Outside of Walls 2320 Inside of Walls 1878

Street or Road building will front on SEWALLS PT. RD.

Clearances - Front 35' Back _____ Side 20 Side 31 River _____

Well Location NONE Septic Tank Location FRONT YARD

Building elevation (By Ordinance Definition) 6' above M.H.W. +

Contract Price (Include Plumbing, Electrical, Air Conditioning) \$40,000.00 Max

PERMIT FEE	New Home	Additions	Others
General (\$3.00 per \$1000 or Fraction)	<u>20.00</u>	_____	_____
Plumbing (Flat Fee)	<u>\$10.00</u>	<u>\$3.00</u>	_____
Electrical (Flat Fee)	<u>\$10.00</u>	<u>\$3.00</u>	_____
Total (To be paid by General Contractor or Owner)	<u>\$40.00</u>	_____	_____

SIGNED: - General Contractor or Owner _____

Building Inspector Comments: Charles A. Dwyer

FOR TOWN RECORDS: Date Drawings submitted 7/23/69
 Date Permit approved 7/25/69
 Date Permit Fee paid 7/25/69
 Date First Inspection _____
 Date Final Inspection _____
 Date Occupancy approved _____

174

174

547

FLORIDA ROOM

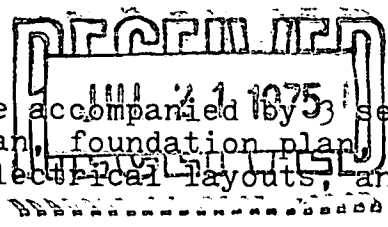
TOWN OF SEWALL'S POINT, FLORIDA

#174

APPLICATION FOR BUILDING PERMIT

Permit No. #547

Date 7-21-75



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

Owner Mrs SAMUEL NELSON Present Address 24 S. SEWALLS PT RD Ph _____

General Contractor Edward W. MacAlister Address 529 N. INDIAN RIV. DR. JEN Ph 334-5681

Where licensed MONTIN CO License No. 76

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

Street building will front on _____

Subdivision MIRAMAN Lot No. 9 Area _____

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

Other Construction (Pools, additions, etc.) FLA. ROOM

Contract Price (excluding land, rugs, appliances, landscaping) \$ 4000

Total cost of permit \$ 2000

Plans approved as submitted _____ Plans approved as marked no plumbing or electrical
YES

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

Edward W. MacAlister
Signed by General Contractor

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

Signed by Owner _____

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

TOWN RECORD

Date submitted _____

Date approved 7/21/75 Chick C. Changer

#547
7/20/75 Joe Rando

Certificate of Occupancy issued 10/7/75 Date _____

TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 8/11/75

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

For property built under Permit No. 547 Dated _____

when completed in conformance with the Approved Plans.

Signed

RECORD OF INSPECTIONS

<u>Item</u>	<u>Date</u>	<u>Approved by</u>
Footings		
Rough plumbing		
Perimeter beam		
Rough electric	- 8/15/75	
Close in	10/7/75	
Final plumbing		
Final electric		

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector _____ date

Approved by Town Commission _____ date

Utilities notified _____ date

Original Copy sent to _____

(Keep carbon copy for Town files)

1797

SCREEN

ENCLOSURE

Permit Number 1797

Date 3-13-85

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

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

Owner MR + MRS ^{Edmond} Villa Present Address 24 S. Sewalls Pt Road

Phone 286-0969-286-0310

Contractor Pioneer Screen Co Address 3122 SE Dominion Ter

Phone 283-9197 STUART, Florida

Where licensed Martin County License number 00409

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

Roofing contractor _____ License number _____

Air conditioning contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Screen walls, with ALUMINUM ROOF. REPLACE

State the street address at which the structure will be built: 24 S. Sewalls Pt Road EXISTING PORCH on

EXISTING SLAB.
ALUMINUM ROOF

Subdivision MIRAMAR Lot number 9 Block number _____

Contract price \$ ~~2760~~ 2760⁰⁰ 74 Cost of permit \$ 15⁰⁰

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Craig Rice

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

X Owner Virginia Villa

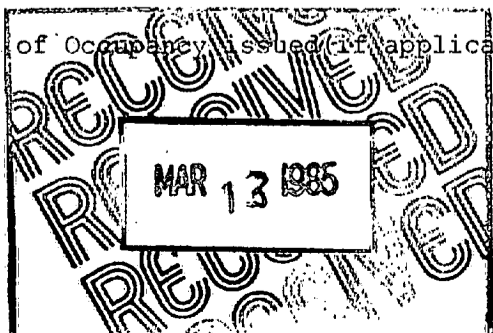
TOWN RECORD

Date submitted 3/13/85 Approved [Signature] 3/14/85
Building Inspector Date

Approved 3/21/85 [Signature] Final Approval given 3/26/85
Commissioner Date Date

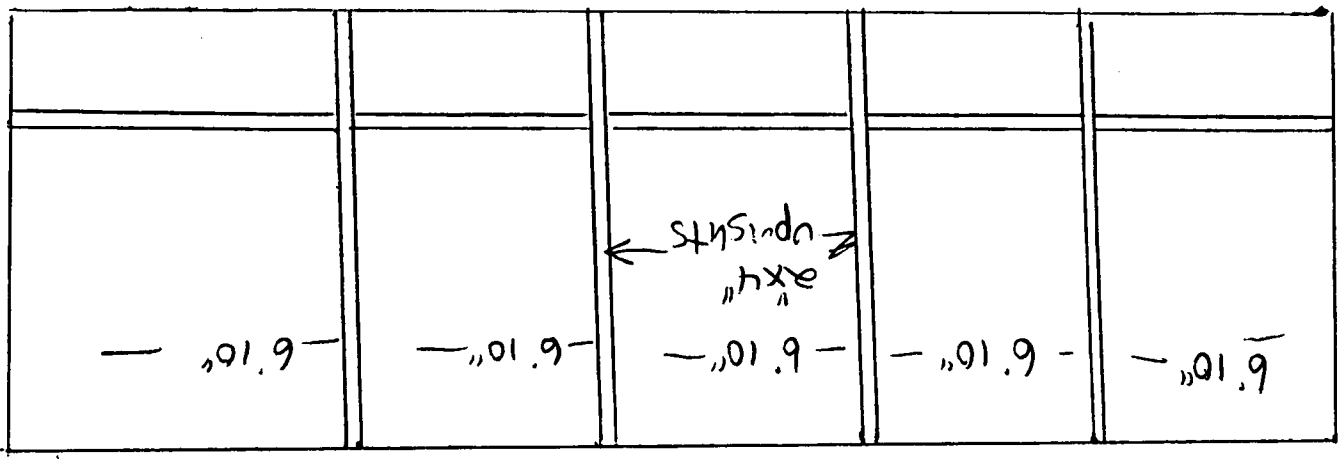
Certificate of Occupancy issued (if applicable) _____
Date _____

SP1184

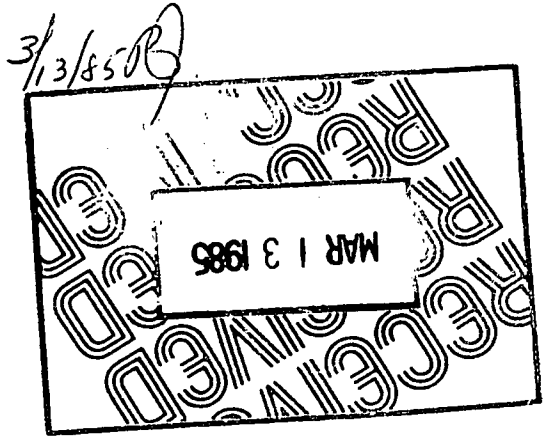
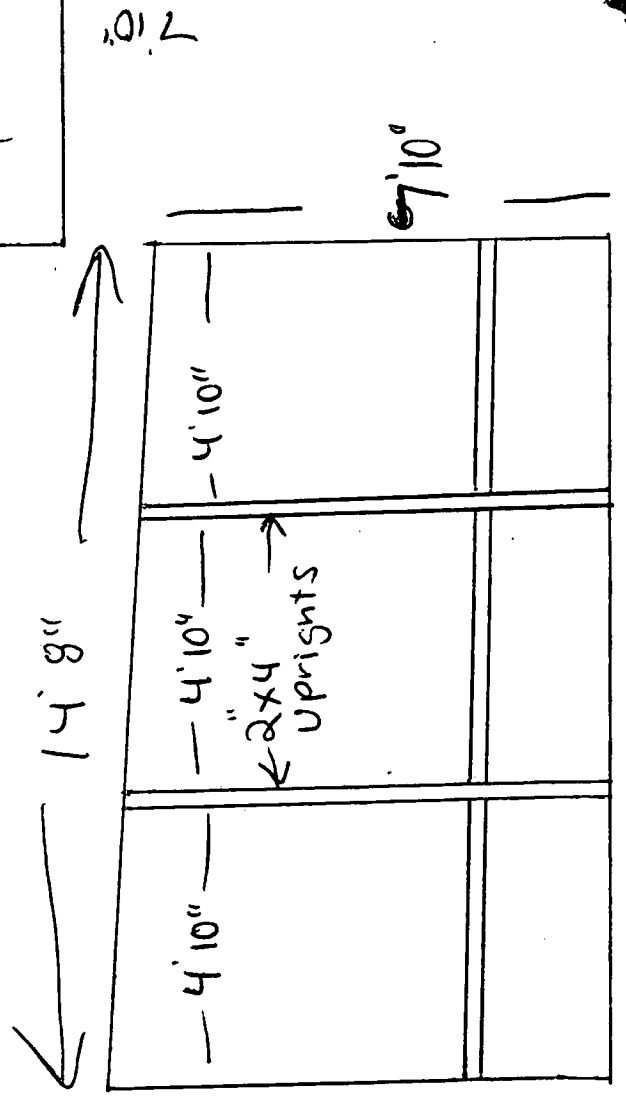


Permit Number 1797

Office Copy



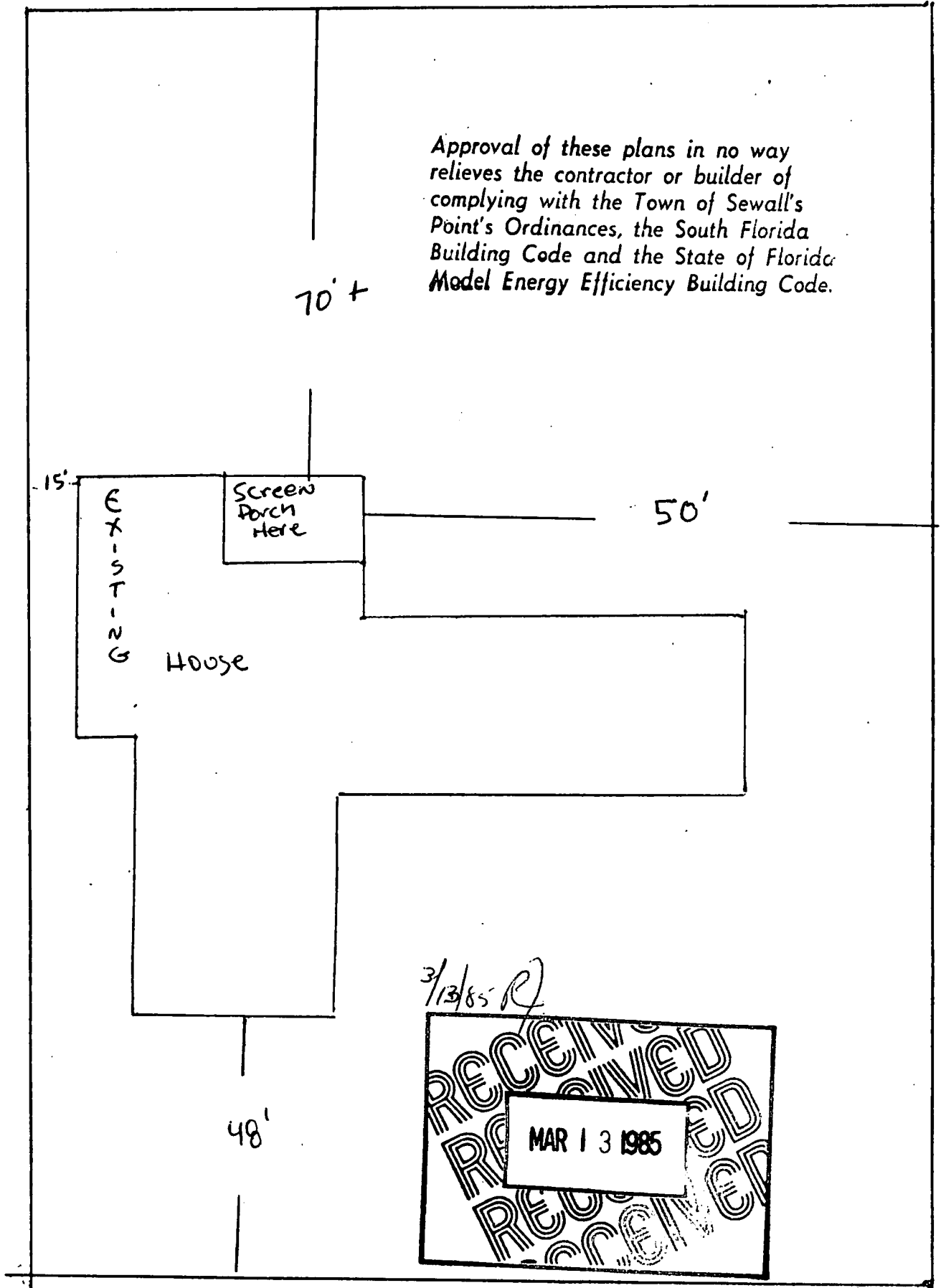
Using 1 3/4" O32 paws
 with 3" I Beam insert
 Every 12" 15' x 35'



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

(2) 8'6"

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



MR + Mrs Ed Villa
24. S. Sewalls Point Road
lot 9. Miramar Subdivision.

Office + Job Copy

CORRESPONDENCE

CORRESPONDENCE

TOWN *of* SEWALL'S POINT

One Sewall's Point Road South, Jensen Beach, Florida 33457 Telephone 287-2455

COMMISSIONERS

EDWARD H. GLUCKLER, Mayor
ROBERT C. RUSSELL, Vice Mayor
EARL R. CRAWFORD
E. CLINTON TOWL
JOHN C. GUENTHER

JOAN H. BECKLEY
Town Clerk
Telephone 287-2455

September 6, 1979

Mr. and Mrs. Edmond Villa
24 South Sewall's Point Road
Sewall's Point
Jensen Beach, Florida 33457

Dear Mr. and Mrs. Villa:

At a special meeting of the Sewall's Point Town Commission on September 5, 1979, the Commissioners unanimously voted "no objection" to a dock being built from your property at 24 South Sewall's Point Road, 200' in length. We understand that you will apply to the Corps of Engineers for approval and then submit plans to the Town for construction of this dock. It will be necessary to follow the same procedure you used for the construction of your original, 100' dock.

Sincerely,

TOWN OF SEWALL'S POINT

Joan H. Beckley
Town Clerk

:jb

JOINT APPLICATION
 DEPARTMENT OF THE ARMY/FLORIDA DEPARTMENT OF ENVIRONMENTAL REGULATION
 FOR
 ACTIVITIES IN WATERS OF THE STATE OF FLORIDA

Refer to Instruction Pamphlet for explanation of numbered items and attachments required.

1. Application number (To be assigned)	2. Date <hr style="border: none; border-top: 1px solid black; margin: 5px 0;"/> Day Mo. Yr.	3. For official use only DF-43-29866 -8E
--	--	--

4. Name, address and zip code of applicant

EDMOND R. VILLA
 24 S. SEWALLS POINT ROAD
 SEWALLS POINT
 JENSEN BEACH, FLORIDA 33457

RECEIVED

MAY 19 1980

Dept. of Environmental Reg.
~~Environ. Reg.~~

Telephone Number 305 286-0969

5. Name, address, zip code and title of applicant's authorized agent for permit application coordination

N/A

Telephone Number _____

6. Describe the proposed activity, its purpose and intended use, including a description of the type of structures, if any, to be erected on fills, or pipe or float-supported platforms, and the type, composition and quantity of materials to be discharged or dumped and means of conveyance.

CONSTRUCT PRIVATE DOCK 200' INTO INDIAN RIVER.
 PILING IS TO BE 6" PVC PIPE SCH. 40. stringers
 WILL BE 2"X8" AND DECKING 2"X6". ALL WOOD TO BE
 PERSURE TREATED. IT WILL BE A TOTAL OF 1100 SQ. FT.

	Dredged/Excavated		Filled/Deposited
Volume of Material:	_____ CY	_____ CY	_____ CY
	Waterward of O.H.W. or M.H.W.	Landward of O.H.W. or M.H.W.	Waterward of O.H.W. or M.H.W.
		Landward of O.H.W. or M.H.W.	CY

7. Proposed use

Private Public Commercial Other (Explain in remarks)

8. Name and address including zip code of adjoining property owners whose property also adjoins the waterway.

MR. & MRS. EDWARD WEEKS 26 S. SEWALLS PT. RD. SEWALLS POINT JENSEN BEACH, FLA. 33457	MR. & MRS. DAVID NEHME 19 S. SEWALLS PT. RD. SEWALLS POINT JENSEN BEACH, FLA. 33457
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9. Location where proposed activity exists or will occur

Street address _____

Longitude 80° 12' Latitude 27° 11' (If known)

Sec. 35 Twp. 38 S Rge. 41 E

FLORIDA MARTIN SEWALLS POINT STUART

State County In City or Town Near City or Town

10. Name of waterway at location of the activity INDIAN RIVER

11. Date activity is proposed to commence 30 DAYS AFTER RECEIPT OF PERMIT
Date activity is expected to be completed 120 DAYS AFTER RECEIPT OF PERMIT

12. Is any portion of the activity for which authorization is sought now complete? Yes [] No []
If answer is "Yes" give reasons in the remarks section. Month and year the activity was completed _____
_____. Indicate the existing work on the drawings.

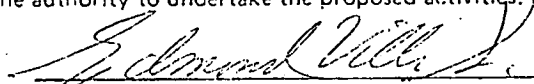
13. List all approvals or certifications required by other Federal interstate, state or local agencies for any structures, construction, discharges, deposits or other activities described in this application, including whether the project is a Development of Regional impact.

Issuing Agency	Type of Approval	Identification No.	Date of Application	Date of Approval
TOWN OF SEWALLS POINT	LETTER OF APPROVAL		9/6/79	9/6/79

14. Has any agency denied approval for the activity described herein or for any activity directly related to the activity described herein? Yes [] No [X] (If "Yes" explain in remarks)

15. Remarks (see Instruction Pamphlet for additional information required for certain activities)

16. Application is hereby made for a permit or permits to authorize the activities described herein. I agree to provide any additional information/data that may be necessary to provide reasonable assurance or evidence to show that the proposed project will comply with the applicable State Water Quality Standards or other environmental protection standards both during construction and after the project is completed. I also agree to provide entry to the project site for inspectors from the environmental protection agencies for the purpose of making preliminary analyses of the site and monitoring permitted works, if permit is granted. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities.


Signature of Applicant

5/19/80
Date

18 U.S.C. Section 1001 provides that: Whoever, in any manner within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals, or covers up by any trick, scheme, or device a material fact or makes any false, fictitious or fraudulent statements or representations or makes or uses any false writing or document knowing same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both.

The application must be signed by the person who desires to undertake the proposed activity; however, the application may be signed by a duly authorized agent if accompanied by a statement by that person designating the agent and agreeing to furnish upon request, supplemental information in support of the application.

FEE: Attach Checks/Money Orders on front
Payable to Department of Environmental Regulation
\$200 Standard form projects
\$20 Short forms and Chapter 403 projects only

2745 S.E. MORNINGSIDE BOULEVARD
PORT ST. LUCIE, FLORIDA 33452



BOB GRAHAM
GOVERNOR
JACOB D. VARN
SECRETARY

STATE OF FLORIDA

DEPARTMENT OF ENVIRONMENTAL REGULATION

June 10, 1980 SOUTH FLORIDA SUBDISTRICT BRANCH OFFICE

Martin County Board of Commissioners
Martin County
P. O. Box 626
Stuart, Florida 33494

NOTICE

RECEIVED

File Number: DF-56-29866-8E

Applicant Name: Edmond R. Villa

JUN 11 1980

MARTIN COUNTY BOARD OF COMMISSIONERS OFFICE
STUART, FLORIDA

The department is currently processing the attached application. If you have any comments on, or objections to this project, please submit them in writing to this office on or before

June 25, 1980

Please refer to the applicant's name and file number in any correspondence to help facilitate processing. Questions concerning this project should be addressed to Al Walker.

Sincerely,

Alfred Mueller, Jr.
Branch Office Manager

AM/AEW:dm

RECEIVED
JUN 13 1980

TOWN of SEWALL'S POINT

One Sewall's Point Road South, Jensen Beach, Florida 33457 Telephone 287-2455

COMMISSIONERS

EDWARD H. GLUCKLER, Mayor
E. CLINTON TOWL, Vice Mayor
WILLIAM E. BARTON, III
DANA deWINDT
GILBERT STRUBELL

JOAN H. BECKLEY
Town Clerk
F.J. MATUSZEWSKI
Chief of Police

June 23, 1980

Department of Environmental Regulation
2745 S. E. Morningside Blvd.
Port St. Lucie, Florida 33452

Attention: Al Walker

RE: File # DF-56-29866-8E - Edmond R. Villa

Dear Mr. Walker:

At a special meeting of the Sewall's Point Town Commission on September 5, 1979, the Town Commission unanimously voted "no objection" to a dock being built from the Villa property at 24 South Sewall's Point Road, 200' in length.

Please contact me if you have any further questions.

Sincerely,

TOWN OF SEWALL'S POINT

Joan H. Beckley
Town Clerk

:jb

CHANNEL

SOUNDINGS IN FEET
BELOW M.L.W. 0.0'

2100'
200'

0.7
0.4
0.3
0.2
0.3
1.5
2.0
6.0
1.5

M.L.W.

70' 72'

M.H.W 3.5'

5'

①

②

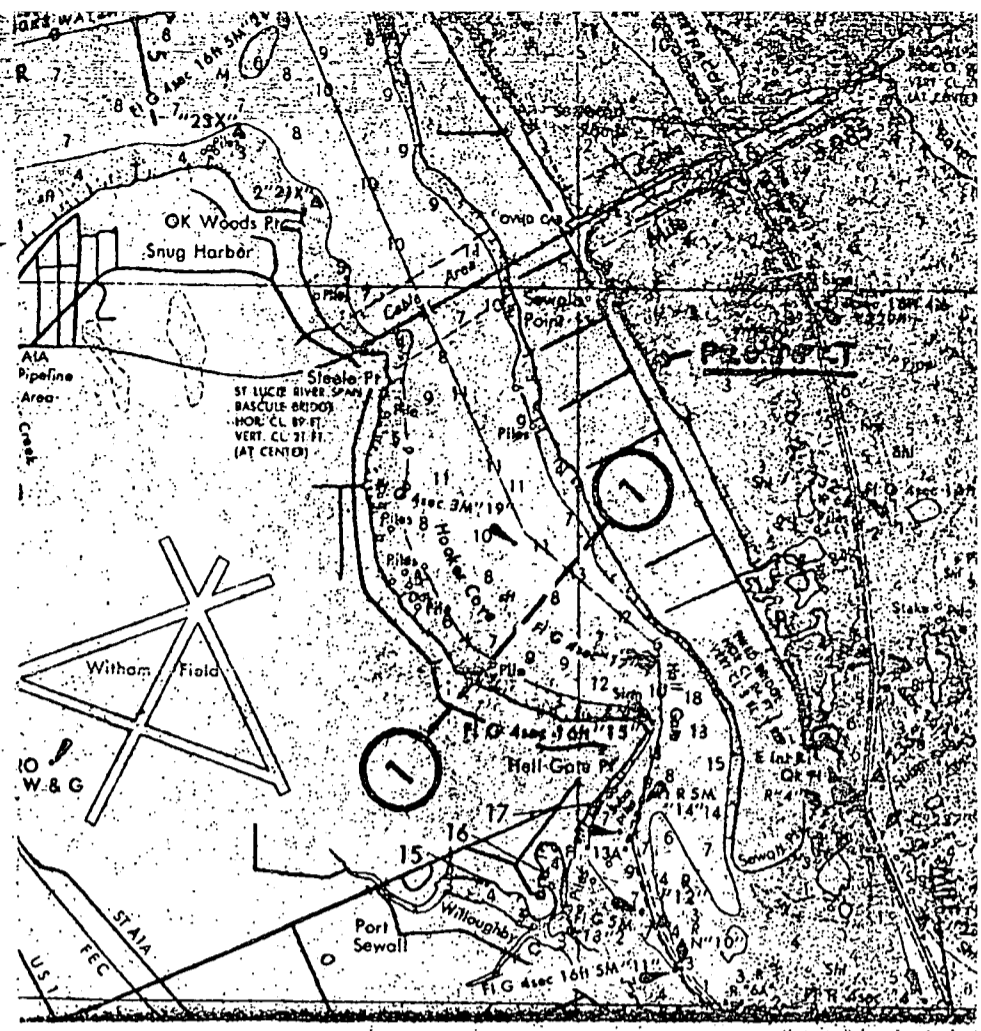
-N-

DWELLING

25 50 100
SCALE IN FT.

ADJACENT PROPERTY OWNERS:

- ① DR. DAVID NIEME
- ② EDWARD WEEKS

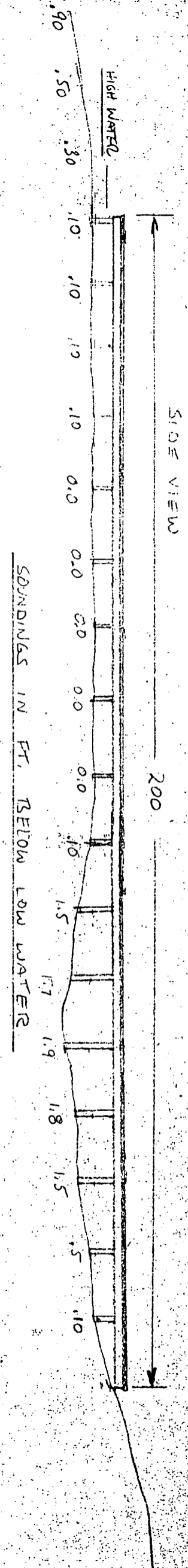


SEC. 35 TWP. 38S. RGE. 41E

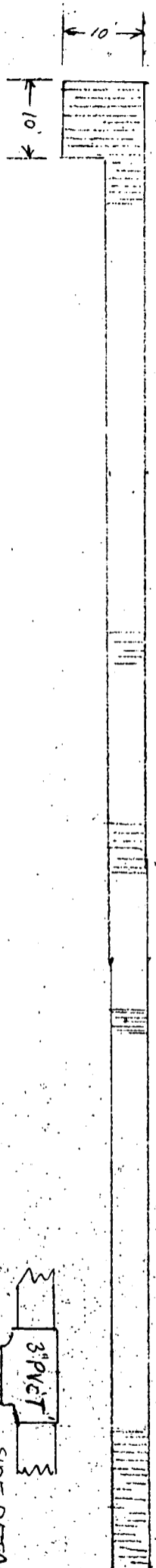
PROPOSED PIER
SEWALLS POINT
MARTIN CO. FLA.

EDMOND VILLA
24 SO. SEWALLS PT. RD.
SEWALLS POINT
JENSEN BEACH FLA
33457

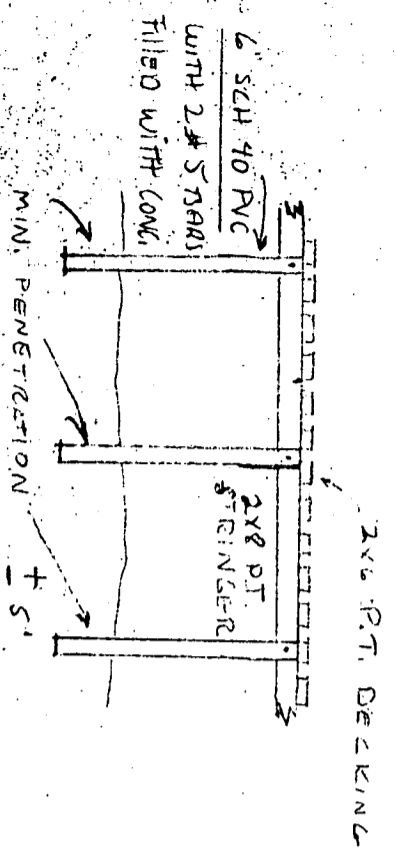
PROPOSED PIER EDMOND VILLA — SEWALLS POINT



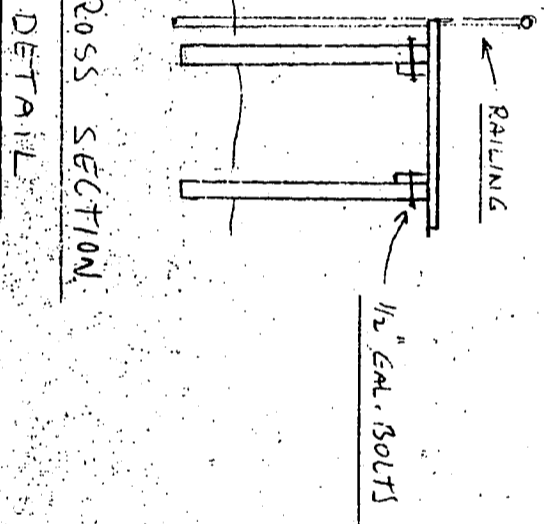
TOP VIEW



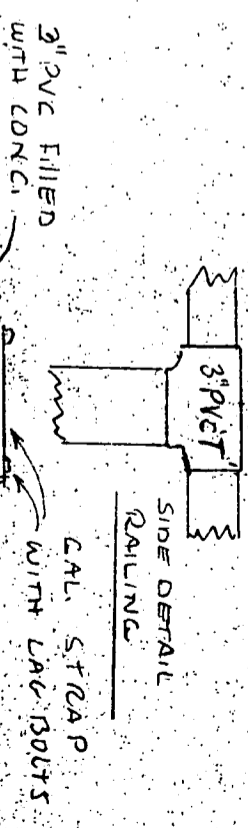
SIDE DETAIL



CROSS SECTION DETAIL

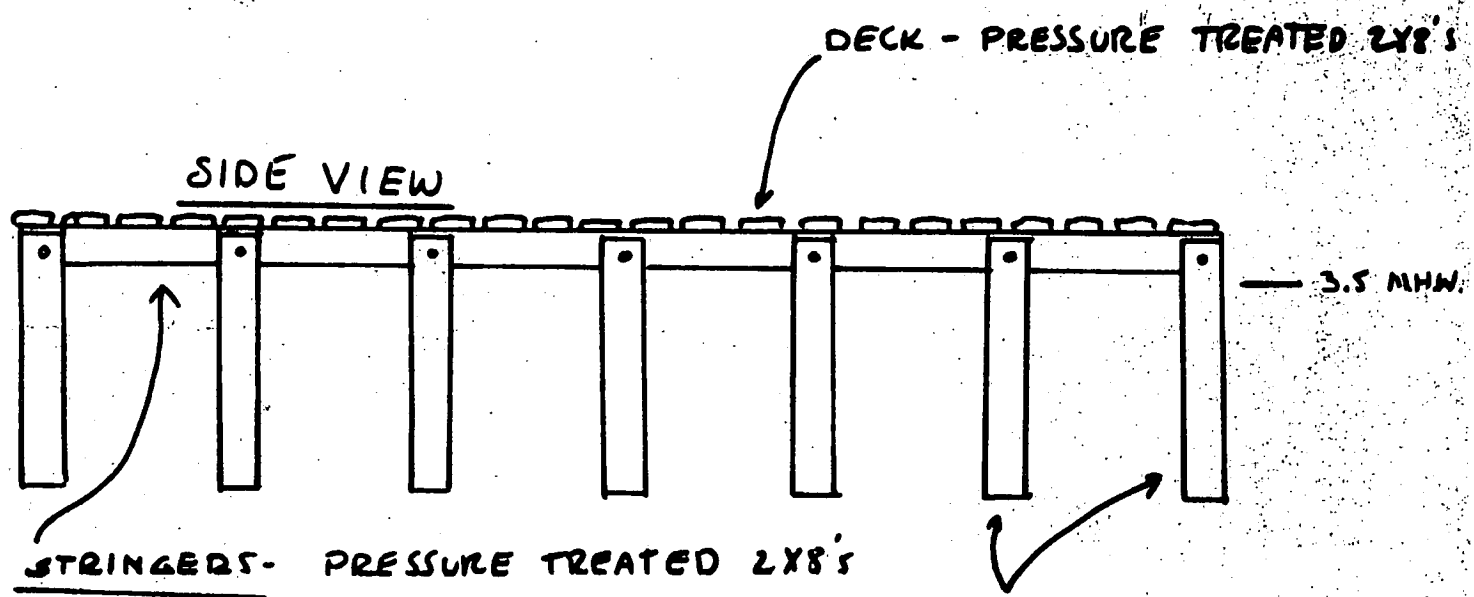


SIDE DETAIL RAILING

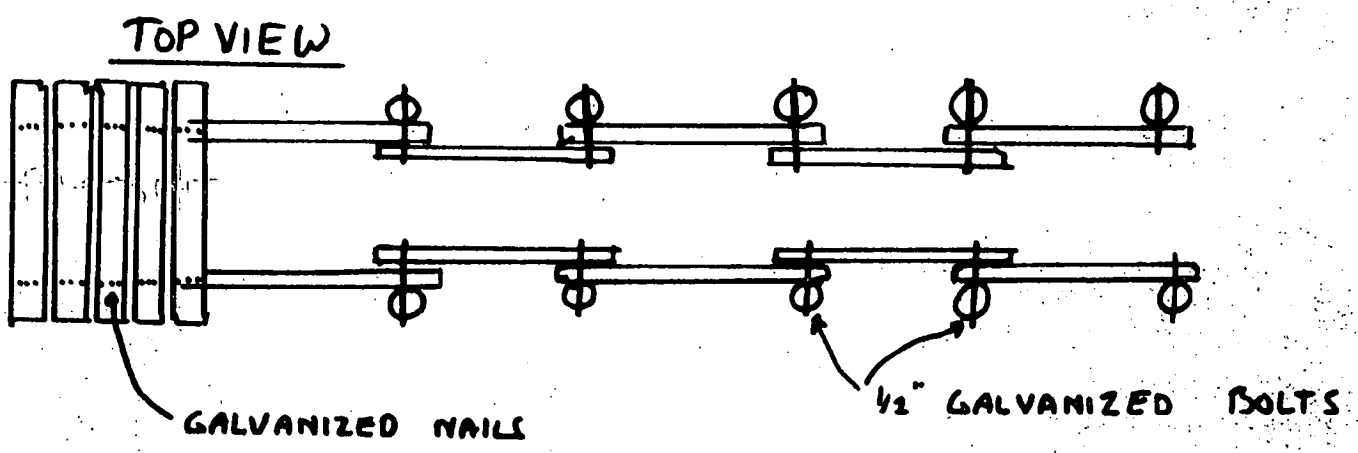


RAILING DETAIL

DOCK OF - VIRGINIA & EDMOND VILLA
24 SO. SEWALLS PT. RD.



PILING - 6" CLASS 160
PVC WATER PIPE.
10' LONG @ 10' OR
LESS O.C. FILLED
WITH CONCRETE



1885

DOCK

&

EXTENSION

TOWN OF SEWALL'S POINT, FLORIDA

Permit Number 1885

Date 11/10/86

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

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

Owner EDMOND VILLA Present Address 24 SO. SEWALLS

Phone 286-0969 PT. RD.

Contractor OWNER Address SAME

Phone SAME

Where licensed _____ License number _____

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

Roofing contractor _____ License number _____

Air conditioning contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: EXTEND EXISTING DOCK 193' X 3.5 WIDE

24 SO. SEWALLS PT. RD.
State the street address at which the structure will be built:

Subdivision MIRAMAR Lot number 9 Block number _____

Contract price \$ 6,000 Cost of permit \$ 30.00

Plans approved as submitted Plans approved as marked _____

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

Contractor Edmond Villa

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

Owner Edmond Villa

TOWN RECORD

Date submitted 11/10/86 Approved [Signature] 11/13/86
Building Inspector Date

Approved 11/10/86 [Signature] Final Approval given 4/18/89
Commissioner Date Date

Certificate of Occupancy issued (if applicable) _____
Date

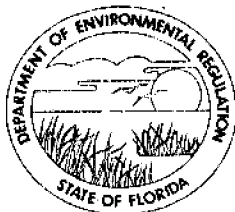
STATE OF FLORIDA

DEPARTMENT OF ENVIRONMENTAL REGULATION

SOUTHEAST FLORIDA DISTRICT
BRANCH OFFICE

2745 SOUTHEAST MORNINGSIDES BOULEVARD
PORT ST. LUCIE, FLORIDA 33452

October 7, 1985



BOB GRAHAM
GOVERNOR

VICTORIA J. TSCHINKEL
SECRETARY

Mr. Edmond Villa
24 South Sewall's Point Road
Stuart, Florida 33494

DF - Martin County
Private Dock
Indian River

Dear Mr. Villa:

Attached is Permit No. 4300899978. Should you object to the issuance of this permit or the specific conditions of the permit, you have a right to petition for a hearing pursuant to the provisions of Section 120.57, Florida Statutes. The petition must be filed within fourteen (14) days from receipt of this letter. The petition must comply with the requirements of Section 17-103.155 and Rule 28-5.201, Florida Administrative Code, (copies attached) and be filed pursuant to Rule 17-103.155(1) in the Office of General Counsel of the Department of Environmental Regulation at 2600 Blair Stone Road, Tallahassee, Florida 32301. Petitions which are not filed in accordance with the above provisions are subject to dismissal by the Department. In the event a formal hearing is conducted pursuant to Section 120.57(1), all parties shall have an opportunity to respond, to present evidence and argument on all issues involved, to conduct cross-examination of witnesses and submit rebuttal evidence, to submit proposed findings of facts and orders, to file exceptions to any order or hearing officer's recommended order, and to be represented by counsel. If an informal hearing is requested, the agency, in accordance with its rules of procedure, will provide affected persons or parties or their counsel an opportunity, at a convenient time and place, to present to the agency or hearing officer, written or oral evidence in opposition to the agency's action or refusal to act, or a written statement challenging the grounds upon which the agency has chosen to justify its action or inaction, pursuant to Section 120.57(2), Florida Statutes.

JAM:bbs/4

Sincerely,

John A. Meyer
Supervisor, Dredge & Fill Permitting

cc: Army Corps of Engineers, Miami
Charles Horne, D.N.R.
Martin County Property Appraiser
Al Malefatto

RULES OF THE ADMINISTRATIVE COMMISSION
MODEL RULES OF PROCEDURE
CHAPTER 28-5
DECISION DETERMINING SUBSTANTIAL INTERESTS

PART II
FORMAL PROCEEDINGS

28-5.201 Initiation of Formal Proceedings.

- (1) Initiation of formal proceedings shall be made by petition to the agency responsible for rendering final agency action. The term petition as used herein includes any application or other document which expresses a request for formal proceedings. Each petition should be printed, typewritten or otherwise duplicated in legible form on white paper of standard legal size. Unless printed, the impression shall be on one side of the paper only and lines shall be double-spaced and indented.
- (2) All petitions filed under these rules should contain:
 - (a) The name and address of each agency affected and each agency's file or identification number, if known;
 - (b) The name and address of the petitioner or petitioners, and an explanation of how his/her substantial interests will be affected by the agency determination;
 - (c) A statement of when and how petitioner received notice of the agency decision or intent to render a 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, as well as the rules and statutes which entitle the petitioner to relief;
 - (f) A demand for relief to which the petitioner deems himself entitled; and
 - (f) Other information which the petitioner contends is material.

A petition may be denied if the petitioner does not state adequately a material factual allegation, such as a substantial interest in the agency determination, or if the petition is untimely. (Section 28-5.201(3)(a), FAC)

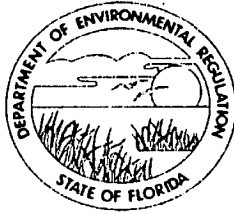
DER Form 17-1.201(7)
Effective November 30, 1982

STATE OF FLORIDA

DEPARTMENT OF ENVIRONMENTAL REGULATION

SOUTHEAST FLORIDA DISTRICT
BRANCH OFFICE

2745 SOUTHEAST MORNINGSIDE BOULEVARD
PORT ST. LUCIE, FLORIDA 33452



BOB GRAHAM
GOVERNOR

VICTORIA J. TSCHINKEL
SECRETARY

PERMITTEE:

Edmond Villa
24 South Sewall's Point Road
Stuart, Florida 33494

I.D. Number: 5143P899978

Permit/Certification Number: 4300899978

Date of Issue: October 7, 1985

Expiration Date: October 7, 1987

County: Martin

Latitude/Longitude: 27°11'56"/80°11'54"

Section/Township/Range: 1/38S/41E

Project: Private Dock

This permit is issued under the provisions of Chapter(s) 403, Florida Statutes, and Florida Administrative Code Rule(s) 17-3, 17-4 and 17-12. The above named permittee is hereby authorized to perform the work or operate the facility 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 and specifically described as follows:

TO CONSTRUCT:

A 193 ft. by 3 1/2 ft. private dock with a 10 ft. by 5 ft. platform to an existing 95 ft. by 5 ft. dock.

IN ACCORDANCE WITH:

The five (5) stamped drawings which are attached and a part hereof and application DER Form 17-1.203(1) dated April 11, 1984 and signed by Edmond Villa. (not attached)

LOCATION:

24 Sewall's Point Road, Indian River, Class III Waters, Section 1, Township 38 South, Range 41 East, Sewall's Point, Martin County.

SUBJECT TO:

GENERAL CONDITIONS one (1) through fifteen (15) and SPECIFIC CONDITIONS one (1) through twelve (12).

PERMITTEE:

I.D. Number:
Permit/Certification Number:
Date of Issue:
Expiration Date:

GENERAL CONDITIONS:

1. The terms, conditions, requirements, limitations, and restrictions set forth herein are "Permit Conditions" and as such are binding upon the permittee and enforceable pursuant to the authority of Sections 403.161, 403.727, or 403.859 through 403.861, Florida Statutes. The permittee is hereby placed on notice that the department will review this permit periodically and may initiate enforcement action for any violation of the "Permit Conditions" by the permittee, its agents, employees, servants or representatives.
2. This permit is valid only for the specific processes and operations applied for and indicated in the approved drawings or exhibits. Any unauthorized deviation from the approved drawings, exhibits, specifications, or conditions of this permit may constitute grounds for revocation and enforcement action by the department.
3. As provided in Subsections 403.087(6) and 403.722(5), Florida Statutes, the issuance of this permit does not convey any vested rights or any exclusive privileges. Nor does it authorize any injury to public or private property or any invasion of personal rights, nor any infringement of federal, state or local laws or regulations. This permit does not constitute a waiver of or approval of any other department permit that may be required for other aspects of the total project which are not addressed in the permit.
4. This permit conveys no title to land or water, does not constitute state recognition or acknowledgement of title, and does not constitute authority for the use of submerged lands unless herein provided and the necessary title or leasehold interests have been obtained from the state. Only the Trustees of the Internal Improvement Trust Fund may express state opinion as to title.
5. This permit does not relieve the permittee from liability for harm or injury to human health or welfare, animal, plant or aquatic life or property and penalties therefor caused by the construction or operation of this permitted source, nor does it allow the permittee to cause pollution in contravention of Florida Statutes and department rules, unless specifically authorized by an order from the department.
6. The permittee shall at all times properly operate and maintain the facility and systems of treatment and control (and related appurtenances) that are installed or used by the permittee to achieve compliance with the conditions of this permit, as required by department rules. This provision includes the operation of backup or auxiliary facilities or similar systems when necessary to achieve compliance with the conditions of the permit and when required by department rules.
7. The permittee, by accepting this permit, specifically agrees to allow authorized department personnel, upon presentation of credentials or other documents as may be required by law, access to the premises, at reasonable times, where the permitted activity is located or conducted for the purpose of:
 - a. Having access to and copying any records that must be kept under the conditions of the permit;
 - b. Inspecting the facility, equipment, practices, or operations regulated or required under this permit; and
 - c. Sampling or monitoring any substances or parameters at any location reasonably necessary to assure compliance with this permit or department rules.

Reasonable time may depend on the nature of the concern being investigated.

8. If, for any reason, the permittee does not comply with or will be unable to comply with any condition or limitation specified in this permit, the permittee shall immediately notify and provide the department with the following information:
 - a. a description of and cause of non-compliance; and

REVISED

ICIE

RIVER

OKEECHOBEE

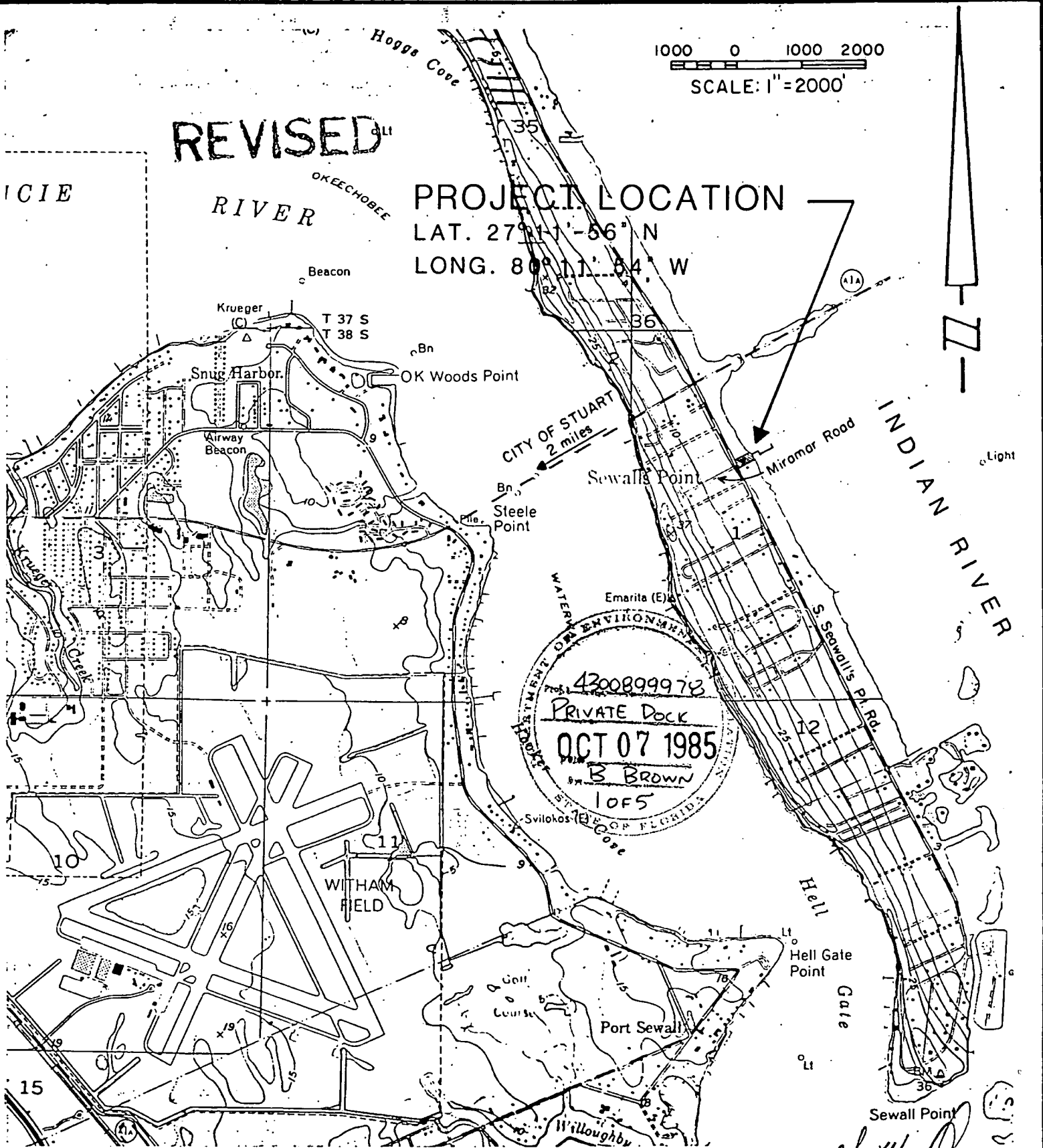
PROJECT LOCATION

LAT. 27° 11' - 56" N

LONG. 80° 11' - 54" W

1000 0 1000 2000

SCALE: 1" = 2000'



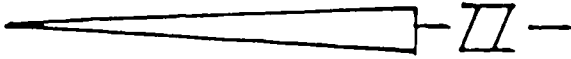
DEPARTMENT OF ENVIRONMENTAL PROTECTION
 4200899978
 PRIVATE DOCK
 OCT 07 1985
 B. BROWN
 10FS
 STATE OF FLORIDA

LOCATION MAP

J. M. [Signature]
 MAY 28 1985

Map Taken From:
 USC&GS ST. Lucie Inlet Quadrangle

SHEET 1 of 5



INDIAN RIVER

EBB →

← FLOOD

PROPOSED DOCK EXTENSION

2500'± TO NAVIG. CHANNEL

158.5' (3.5' WIDE)

40.5'

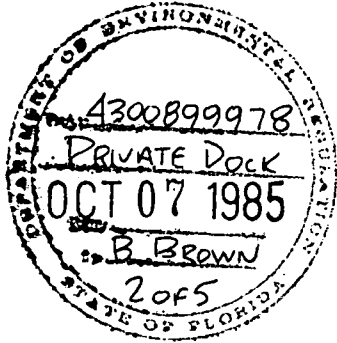
PROPERTY LINE PROJECTED

RAMP UP FROM EXISTING DOCK @ ELEV. 2.84 TO NEW STRUCTURE @ ELEV. 4.84 (3.5' WIDE)

EXIST. DOCK (5' WIDE)

APPROX. MEAN HIGH WATER LINE

- NOTE:
- 1.) LOT DIMENSIONS TAKEN FROM PLAT OF MIRAMAR, SEC. -1, TWP. 38S, RGE. 41E, PLAT BOOK 3, PG. 111 PUBLIC RECORDS OF MARTIN COUNTY, FL.
 - 2.) DOCK EXTENSION IS FOR SINGLE PRIVATE NON-COMMERCIAL USE



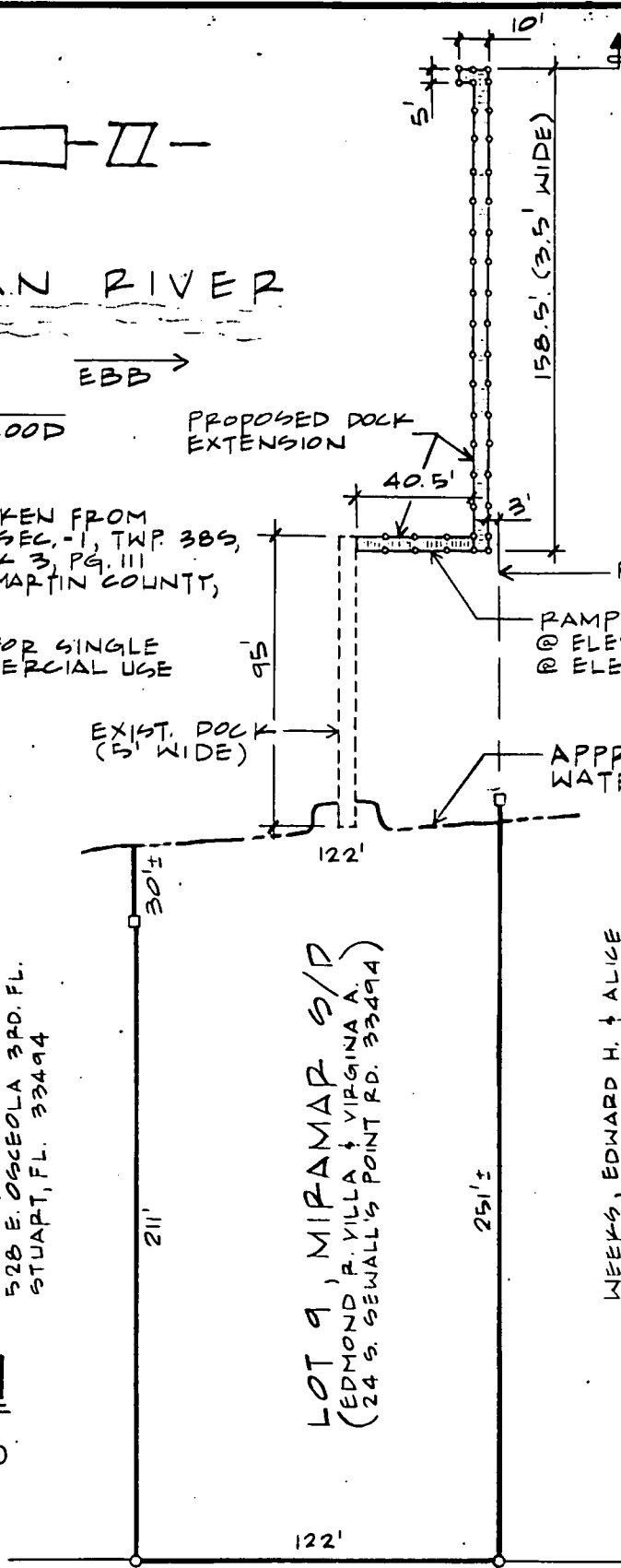
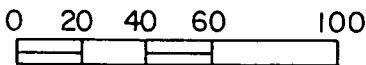
NEHME, DAVID A.
528 E. OSCEOLA RD. FL.
STUART, FL. 33494

LOT 9, MIRAMAR S/D
(EDMOND R. VILLA & VIRGINIA A.)
(24 S. SEWALL'S POINT RD. 33494)

WEEKS, EDWARD H. & ALICE
26 SEWALL'S POINT RD.
STUART, FL. 33494

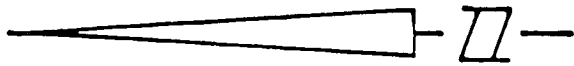
REVISED

SITE PLAN

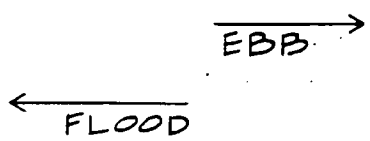


SEWALL'S POINT ROAD

H. M. [Signature]
MAY 28 1985



INDIAN RIVER

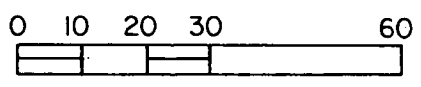


NOTES:
1.0 INDICATES APPROXIMATE WATER DEPTH
BASED ON MLW OF EL. -0.3
FOR COMPLETE SITE PLAN SEE SHT. 2 OF 5

PROPOSED DOCK EXTENSION

EXISTING DOCK

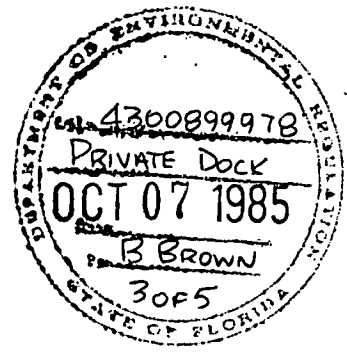
PLAN



APPROX. MEAN HIGH
WATER LINE
(EL. 0.7)

PROPERTY LINE

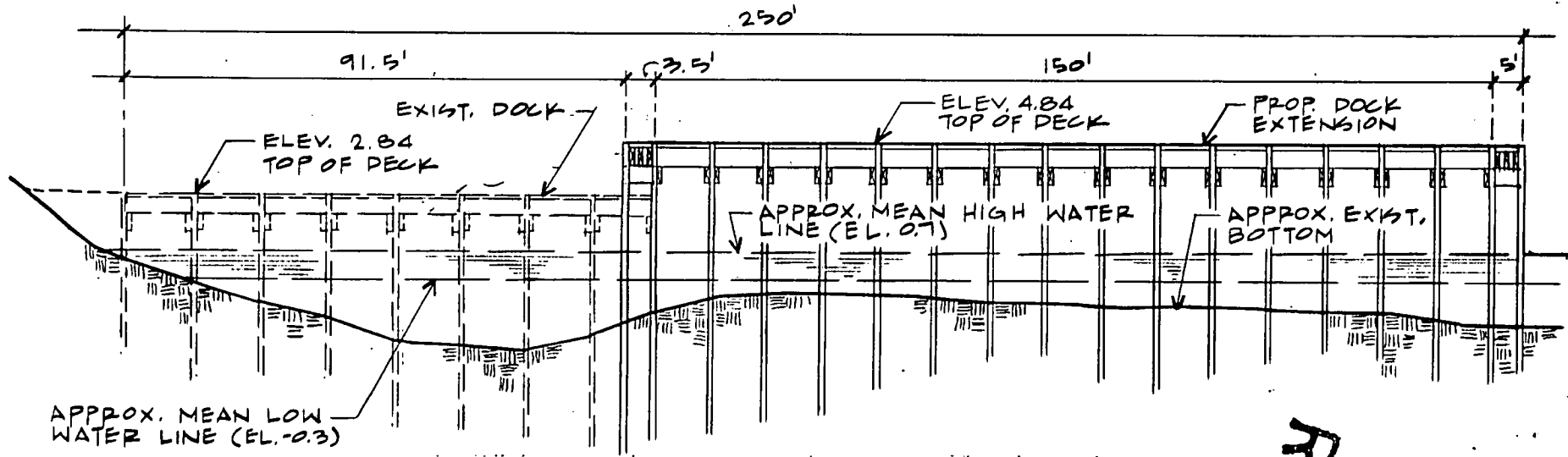
REVISED



[Signature]
MAY 28/1985

TYPICAL DOCK ELEVATIONS

SCALE: VERT. 1" = 6'
HORIZ. 1" = 30'



EAST/WEST ELEVATION

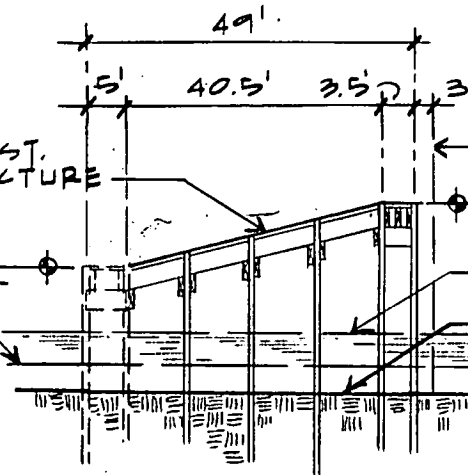
REVISED



RAMP UP FROM EXIST. DOCK TO NEW STRUCTURE

ELEV. 2.84
TOP OF DECK

APPROX. MEAN LOW
WATER LINE (EL. -0.3)



← PROPERTY LINE PROJECTED

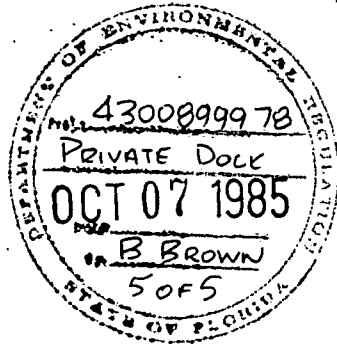
ELEV. 4.84
TOP OF DECK

APPROX. MEAN HIGH WATER LINE (EL. 0.7)

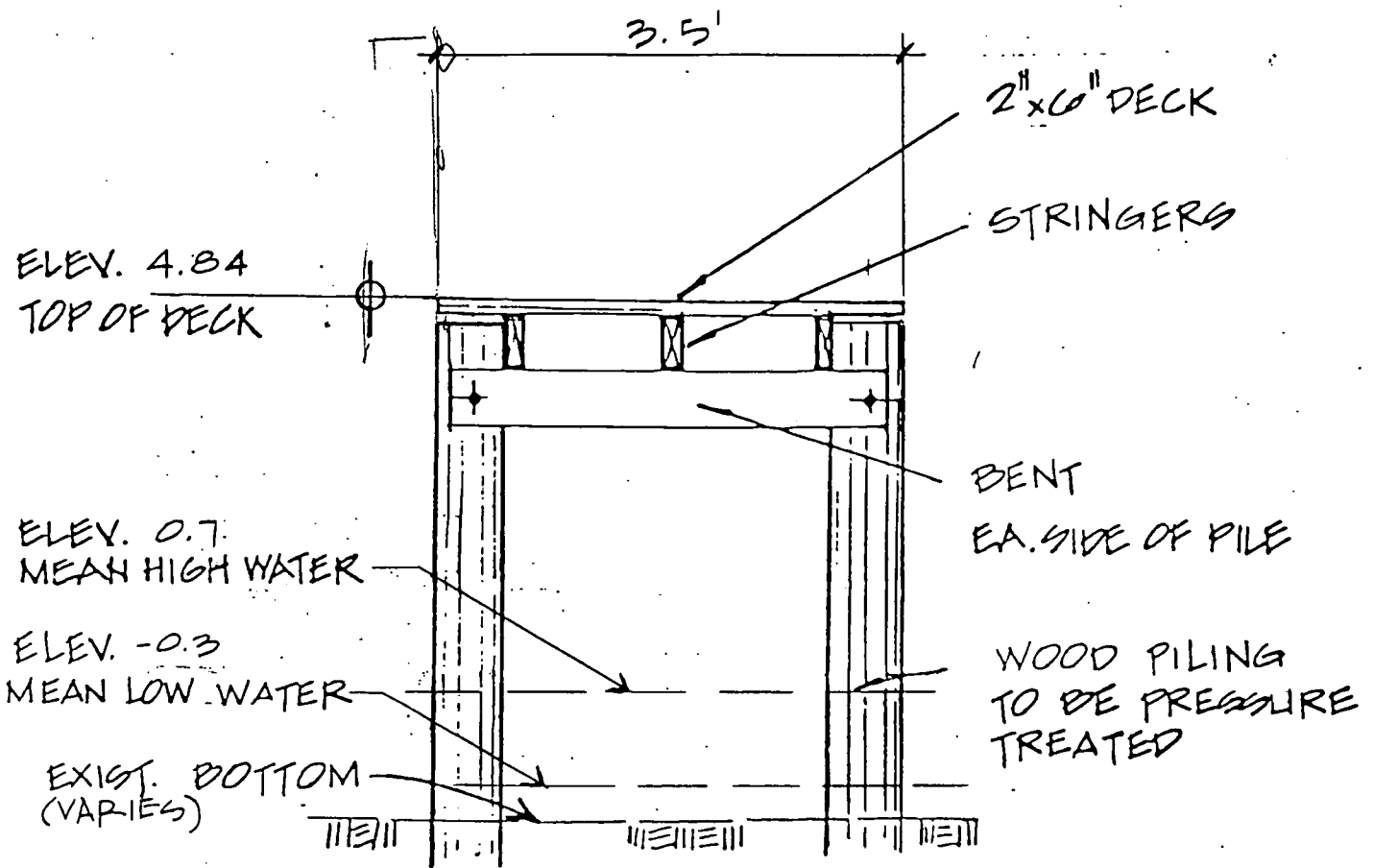
APPROX. EXISTING BOTTOM

RAMP ELEVATION

J. Brown
MAY 28 1985



REVISED



TYPICAL SECTION

N.T.S.

S. M. ...
B. B. ...
MAY 28 1985



BOB GRAHAM
Governor
GEORGE FIRSTONE
Secretary of State
JIM SMITH
Attorney General
GERALD A. LEWIS
Comptroller
BILL GENTER
Treasurer
DOYLE CONNER
Commissioner of Agriculture
RALPH D. TURLINGTON
Commissioner of Education

State of Florida

DEPARTMENT OF NATURAL RESOURCES

DR. ELTON J. GISSENDANNER
Executive Director

3900 COMMONWEALTH BOULEVARD / TALLAHASSEE 32303

July 1, 1980

Mr. Edmond R. Villa
24 South Sewalls Point Road
Sewalls Point
Jensen Beach, Florida 33457

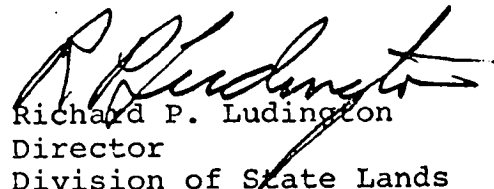
Dear Mr. Villa:

This office has no objections to your project as proposed in D.E.R. Permit Application number DF-43-29866-8E, dated May 19, 1980, showing the location in Section 1, Township 38 South, Range 41 East, Martin County.

Consider this the authority sought under Section 253.77, Florida Statutes, to pursue this project.

This letter in no way waives the authority and/or jurisdiction of any governmental entity nor does this letter disclaim any title interest that the State may have in this project site.

Sincerely,


Richard P. Ludington
Director
Division of State Lands

RPL/gbw

cc: D.E.R.



DIVISIONS /

ADMINISTRATION • LAW ENFORCEMENT • MARINE RESOURCES
RECREATION AND PARKS • RESOURCE MANAGEMENT • STATE LANDS

PERMITTEE:
Edmond Villa

I.D. Number: 5143P899978
Permit/Certification Number: 4300899978
Date of Issue: October 7, 1985
Expiration Date: October 7, 1987

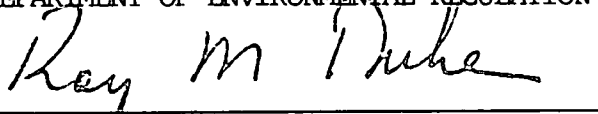
SPECIFIC CONDITIONS:

1. The permittee is hereby advised that Florida law states: "No person shall commence any excavation, construction, or other activity involving the use of sovereign or other lands of the state, title to which is vested in the Board of Trustees of the Internal Improvement Trust Fund or the Department of Natural Resources under Chapter 253, until such person has received from the Board of Trustees of the Internal Improvement Trust Fund the required lease, license, easement, or other form of consent authorizing the proposed use". If such work is done without consent, a fine for each offense in an amount of up to \$10,000 may be imposed.
2. The Department shall be notified in writing on commencement and on completion of the project.
3. Any submerged lands disturbed during construction activities unless specifically authorized by this permit shall be restored to their original configuration.
4. No dredging or filling authorized by this permit other than that necessary for the placement of pilings.
5. Fueling and sewerage facilities shall not be incorporated into the pier.
6. Structures that could be considered to be a livable abode or any part thereof shall not be incorporated into the pier.
7. An effective means of turbidity control shall be employed during all operations that may create turbidity in excess of water quality standards set forth in Chapter 17-3, Florida Administrative Code (FAC).
8. The pier shall be worked with reflective devices so as to alert night boat traffic of its presence.
9. If monitoring reveals violations of State Water Quality Standards, additional monitoring may be required, and/or modifications or additions to project design shall be required to alleviate water quality violations.
10. No live aboards shall be allowed at this facility.
11. Decking boards shall be spaced a minimum of 1/2 inch apart to allow light penetration to the sea grasses below.
12. Railing shall be constructed around the perimeter of the new dock within 60 days of dock completion. This railing shall be at least four feet high and shall possess at least two horizontal cross members.

Issued this 7th day of October, 1985

RMD:bbs/4

STATE OF FLORIDA
DEPARTMENT OF ENVIRONMENTAL REGULATION



Roy M. Duke
District Manager

4 Pages attached.

PERMITTEE:

I.D. Number:
Permit/Certification Number:
Date of Issue:
Expiration Date:

b. the period of noncompliance, including exact dates and times; or, if not corrected, the anticipated time the non-compliance is expected to continue, and steps being taken to reduce, eliminate, and prevent recurrence of the non-compliance.

The permittee shall be responsible for any and all damages which may result and may be subject to enforcement action by the department for penalties or revocation of this permit.

9. In accepting this permit, the permittee understands and agrees that all records, notes, monitoring data and other information relating to the construction or operation of this permitted source, which are submitted to the department, may be used by the department as evidence in any enforcement case arising under the Florida Statutes or department rules, except where such use is proscribed by Sections 403.73 and 403.111, Florida Statutes.
10. The permittee agrees to comply with changes in department rules and Florida Statutes after a reasonable time for compliance, provided however, the permittee does not waive any other rights granted by Florida Statutes or department rules.
11. This permit is transferable only upon department approval in accordance with Florida Administrative Code Rules 17-4.12 and 17-30.30, as applicable. The permittee shall be liable for any non-compliance of the permitted activity until the transfer is approved by the department.
12. This permit is required to be kept at the work site of the permitted activity during the entire period of construction or operation.
13. This permit also constitutes:
 - () Determination of Best Available Control Technology (BACT)
 - () Determination of Prevention of Significant Deterioration (PSD)
 - (X) Certification of Compliance with State Water Quality Standards (Section 401, PL 92-500)
 - () Compliance with New Source Performance Standards
14. The permittee shall comply with the following monitoring and record keeping requirements:
 - a. Upon request, the permittee shall furnish all records and plans required under department rules. The retention period for all records will be extended automatically, unless otherwise stipulated by the department, during the course of any unresolved enforcement action.
 - b. The permittee shall retain at the facility or other location designated by this permit records of all monitoring information (including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation), copies of all reports required by this permit, and records of all data used to complete the application for this permit. The time period of retention shall be at least three years from the date of the sample, measurement, report or application unless otherwise specified by department rule.
 - c. Records of monitoring information shall include:
 - the date, exact place, and time of sampling or measurements;
 - the person responsible for performing the sampling or measurements;
 - the date(s) analyses were performed;
 - the person responsible for performing the analyses;
 - the analytical techniques or methods used; and
 - the results of such analyses.
15. When requested by the department, the permittee shall within a reasonable time furnish any information required by law which is needed to determine compliance with the permit. If the permittee becomes aware that relevant facts were not submitted or were incorrect in the permit application or in any report to the department, such facts or information shall be submitted or corrected promptly.

RECEIVED

MAY 17 1985

May 28, 1985 Dept. of Environmental Reg
Port St. Lucie

To whom it may concern,

I live next to Edmond & Virginia Villa and border the south side of their property. I have no objection whatsoever to their dock being constructed to within three feet of my riparian line.

Sincerely,

Alice Weeks

Mrs. Alice Weeks
26 S. Sewalls Pt. Rd.
Stuart, Fla. 33494

DAVID NEHME, M.D., FACS, FICS.

DIPLOMATE AMERICAN BOARD OF UROLOGY

528 E. OSCEOLA

STUART, FLORIDA 33494

TELEPHONE 283-7786

Department of Environmental Regulation

Ref: File # 4300899978.

Applicant My Neighbor. EDMOND VILLA

No objection whatsoever

David M.D.

P.S. please note SEWALL'S POINT Rd
mailing address is now STUART FL 33494
& no longer Jensen
Beach FL.



DEPARTMENT OF THE ARMY

SOUTH FLORIDA AREA OFC. JACKSONVILLE DISTRICT, CORPS OF ENGINEERS

P. O. BOX 1327

CLEWISTON, FLORIDA 33440-1327

REPLY TO
ATTENTION OF

December 9, 1985

Regulatory Section
Miami
85LP30143

Mr. Edmond Villa
c/o HI-TIDE MARINE CONSTRUCTION, Inc.
3191 SE Waaler Street
Stuart, Florida 33497

Dear Mr. Villa:

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 3 March 1899, (33 U.S.C. § 403), you are authorized to:

extend an existing dock 40 by 3 feet wide, 158 by 3.5 feet wide with a 10 by 5 foot L-end in the Indian River at 24 South Sewall's Point Road, Stuart, in Section 1, Township 38 South, Range 41 East, Martin County, Florida,

in accordance with the enclosed plans and conditions which are incorporated in, and made a part of, the permit. We have no evidence that a state permit has been issued for the work, and no work may begin until their requirements are met.

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:

1. The date of commencement of work (mail enclosed card),
2. The dates of work suspensions and resumptions, if work is suspended over a week, and
3. The date of final completion.

If the work authorized is not completed on or before 9 December 1990, this authorization, if not previously revoked or specifically extended, shall cease and be null and void.

BY AUTHORITY OF THE SECRETARY OF THE ARMY:

COPY

for *Michael Clayton*
Charles T. Myers III
Colonel, Corps of Engineers
District Engineer

Enclosures:
Notice of Authorization
Commencement Card
Plans and Conditions
Area Office Map

1999

DOCK REPAIR

TOWN OF SEWALL'S POINT, FLORIDA

Permit Number 1999

Date 8-7-86

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

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

Owner EDMOND VILLA Present Address 24 South Sewalls Pt. Rd.

Phone 305-286-0969 Sewalls Pt. FL.

Contractor Hi-Tide Marine Const. Inc. Address 3191 S.E. Walden St.

Phone 305-283-9354 Stuart, FL 33497

Where licensed STATE CERTIFIED License number CGCA 11094

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

Roofing contractor _____ License number _____

Air conditioning contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: REPLACE EXISTING SECTION OF DOCK

WITH WOOD PILING AND NOW DOCKING AND FRAMING

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

24 SOUTH SEWALLS PT. RD

Subdivision MIRAMAR Lot number 9 Block number —

Contract price \$ 3000.00 Cost of permit \$ 15XX

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Edmond Villa

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

Owner Edmond Villa

TOWN RECORD

Date submitted _____ Approved Dale Brown 9/3/86
Building Inspector Date

Approved J.C. Strubell Final Approval given 9/3/86
Commissioner Date Date

Certificate of Occupancy issued (if applicable) _____
Date



DEPARTMENT OF THE ARMY

SOUTH FLORIDA AREA OFFICE, JACKSONVILLE DISTRICT, CORPS OF ENGINEERS

P. O. BOX 1327

CLEWISTON, FLORIDA 33440-1327

REPLY TO
ATTENTION OF

December 9, 1985

Regulatory Section
Miami
85LP30143

Mr. Edmond Villa
c/o HI-TIDE MARINE CONSTRUCTION, Inc.
3191 SE Wausler Street
Stuart, Florida 33497

Dear Mr. Villa:

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 3 March 1899, (33 U.S.C. § 403), you are authorized to:

extend an existing dock 40 by 3 feet wide, 158 by 3.5 feet wide with a 10 by 5 foot L-end in the Indian River at 24 South Sewall's Point Road, Stuart, in Section 1, Township 38 South, Range 41 East, Martin County, Florida,

in accordance with the enclosed plans and conditions which are incorporated in, and made a part of, the permit. We have no evidence that a state permit has been issued for the work, and no work may begin until their requirements are met.

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:

1. The date of commencement of work (mail enclosed card),
2. The dates of work suspensions and resumptions, if work is suspended over a week, and
3. The date of final completion.

If the work authorized is not completed on or before 9 December 1990, this authorization, if not previously revoked or specifically extended, shall cease and be null and void.

BY AUTHORITY OF THE SECRETARY OF THE ARMY:

COPY

for Michael Clayton
Charles T. Myers III
Colonel, Corps of Engineers
District Engineer

Enclosures:
Notice of Authorization
Commencement Card
Plans and Conditions
Area Office Map

3780

POOL

Permit No. _____

Date 4/13/95

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

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

Owner ED VILLA Present Address 24 SEWALL'S POINT RD

Phone 221-7629

Contractor LOUTEN BONDED POOLS Address 4306 S. US 1 FORT PIERCE, FL 34982

Phone 286-5760

Where licensed STATE OF FLORIDA License number CPCO 11421

Electrical contractor FRED J. FAIRCHILD ELE License number ME 00151

Plumbing contractor LOUTEN BONDED POOLS License number CPCO 11421

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: BUILD IN GROUND SWIMMING POOL

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

24 SEWALL'S POINT RD

Subdivision MIRAMAR Lot number 9 Block number _____

Contract price \$ 15,000⁰⁰ Cost of permit \$ 200,00

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor [Signature]

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

Owner [Signature]

TOWN RECORD

Date submitted _____ Approved: Dale Brown 4/26/95
Building Inspector Date

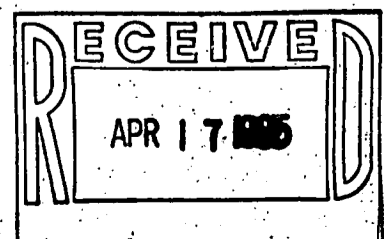
Approved: [Signature] Commissioner Date Final Approval given: _____ Date

Certificate of Occupancy issued (if applicable) _____ Date

SP1282

Permit No. _____

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



**NO CONSTRUCTION MAY BEGIN UNTIL
NOTICE OF COMMENCEMENT
POSTED ON JOB SITE**

Permit No. _____ Tax ID No. _____

NOTICE OF COMMENCEMENT

State Of FLORIDA
County Of MARTIN

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

Legal Description of property and street address, if available

LOT 9 MIRAMAR SEWALL'S POINT
24 SEWALL'S POINT RD

General description improvements BUILD INGROUND POOL
A SCREEN ENCLOSURE

Owner ED VILLA
Address 24 SEWALL'S POINT RD SEWALL'S POINT, FL
Owner's interest in site of improvement TEE SIMPLE

Fee Simple Title holder (if other than owner) NA

Address NA

Contractor LOUPEN BONDET POOLS
Address 4306 S US 1 FORT PIERCE FL 34982

Surety NA
Address NA
Amount of Bond \$ NA

Lender RIVERSIDE NATIONAL BANK
Address 1600 S. FEDERAL HIGHWAY, FORT PIERCE, FL

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 NA
Address NA

In addition to himself, owner designates NA of NA

to receive a copy of the Lienor's Notice as provided in Section 713.12 (1) (b), Florida Statutes.

Expiration date of notice of commencement (the expiration date is one year from the date of recording unless a different date is specified).

THIS SPACE FOR RECORDING ONLY

Edmond Villa
x

OWNERS NAME
STATE OF FLORIDA
COUNTY OF MARTIN

The foregoing instrument was acknowledged before me this 13TH day of APRIL, 1995, by EDMOND VILLA, who is personally known to me or who has produced as identification.

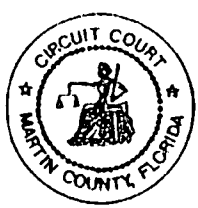
Sharon V. Hudnall
(seal) SIGNATURE OF NOTARY

SHARON V HUDNALL
TYPE OR PRINT NAME OF NOTARY PUBLIC

NOTARY PUBLIC

COMMISSION NO. _____

STATE OF FLORIDA
MARTIN COUNTY
THIS IS TO CERTIFY THAT THE FOREGOING _____ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.
MARSHA STILLER, CLERK
BY [Signature]
DATE 3/11/95



NOTARY PUBLIC SEAL
SHARON V HUDNALL
STATE OF FLORIDA
COMMISSION NO. CC203967
EXPIRES MAY 27, 1996

3798

SCREEN

ENCLOSURE

TAX FOLIO NO. _____

DATE 5/18/95

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

3798

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

Owner M/m Ed Villa Present address 24 S. Sewall Pt Road
Phone 221-7629

Contractor East Coast Specialties Inc Address 1758 S.W. Biltmore
Phone 871-1922 Pt St Lucie 34984

Where licensed St. Lucie Martin Okeechobee Palm Beach Indian River License number SP02074 Martin Co.

Electrical Contractor _____ License number _____

Plumbing Contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Construct Pool Enclosure 35'6" x 35'6" and
Poly Roof 15 x 34. Mansard

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

24 S. Sewall Point Rd.

Subdivision Miramar Lot Number 9 Block Number _____

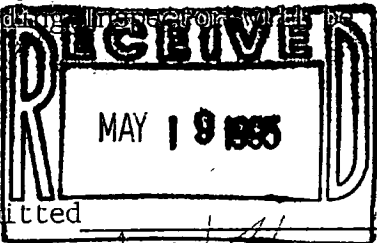
Contract price \$ 5800.00 Cost of permit \$ 100.00

Plans approved as submitted Plans approved as marked _____

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

East Coast Specialties Inc
Contractor Michael A. Hall

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



Owner Ed Villa J.

TOWN RECORD

Date submitted _____

Approved: Ralph Brown 5/19/95
Building Inspector Date

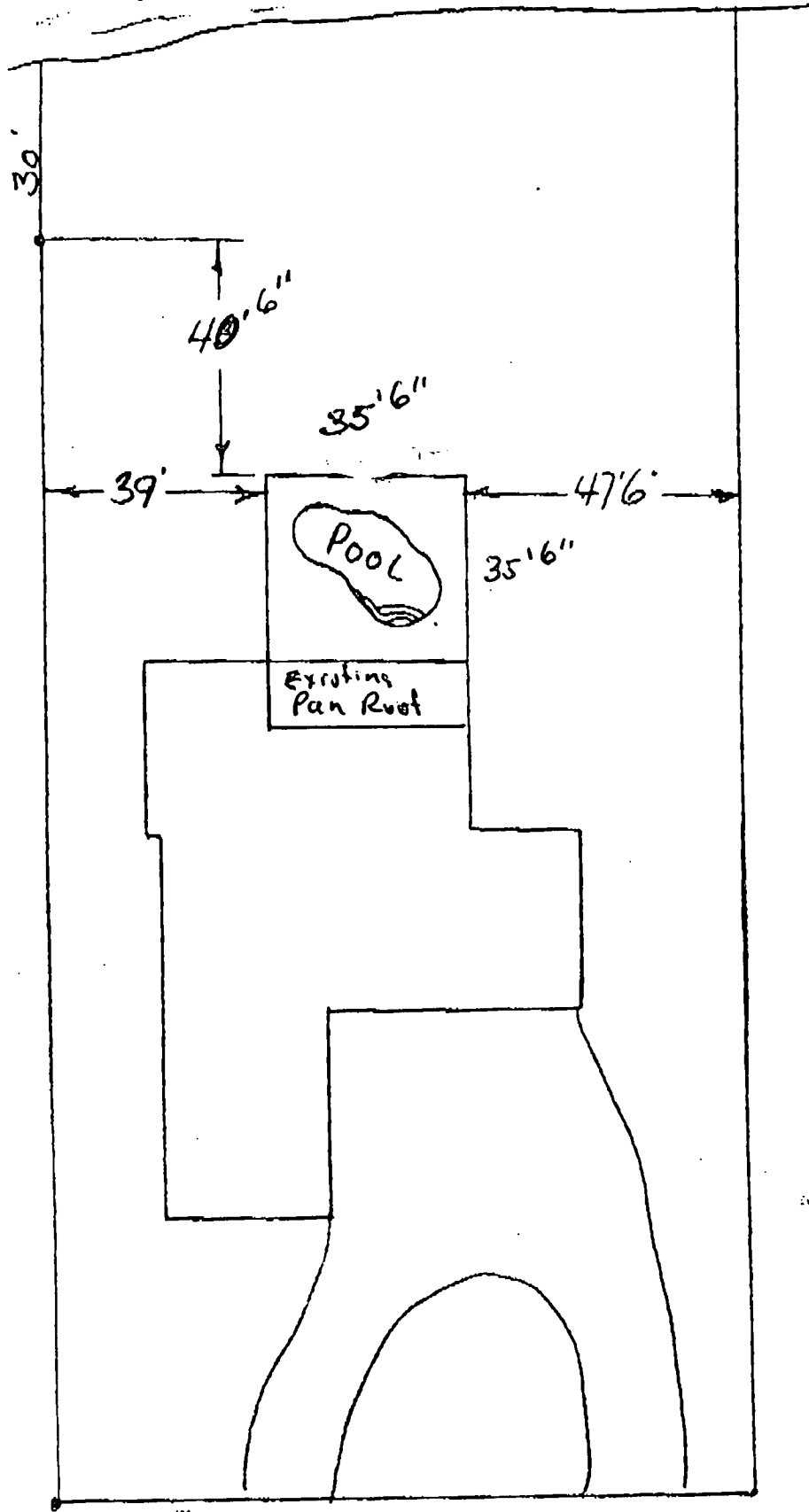
Approved: [Signature] Commissioner Date

Final approval given: _____ Date

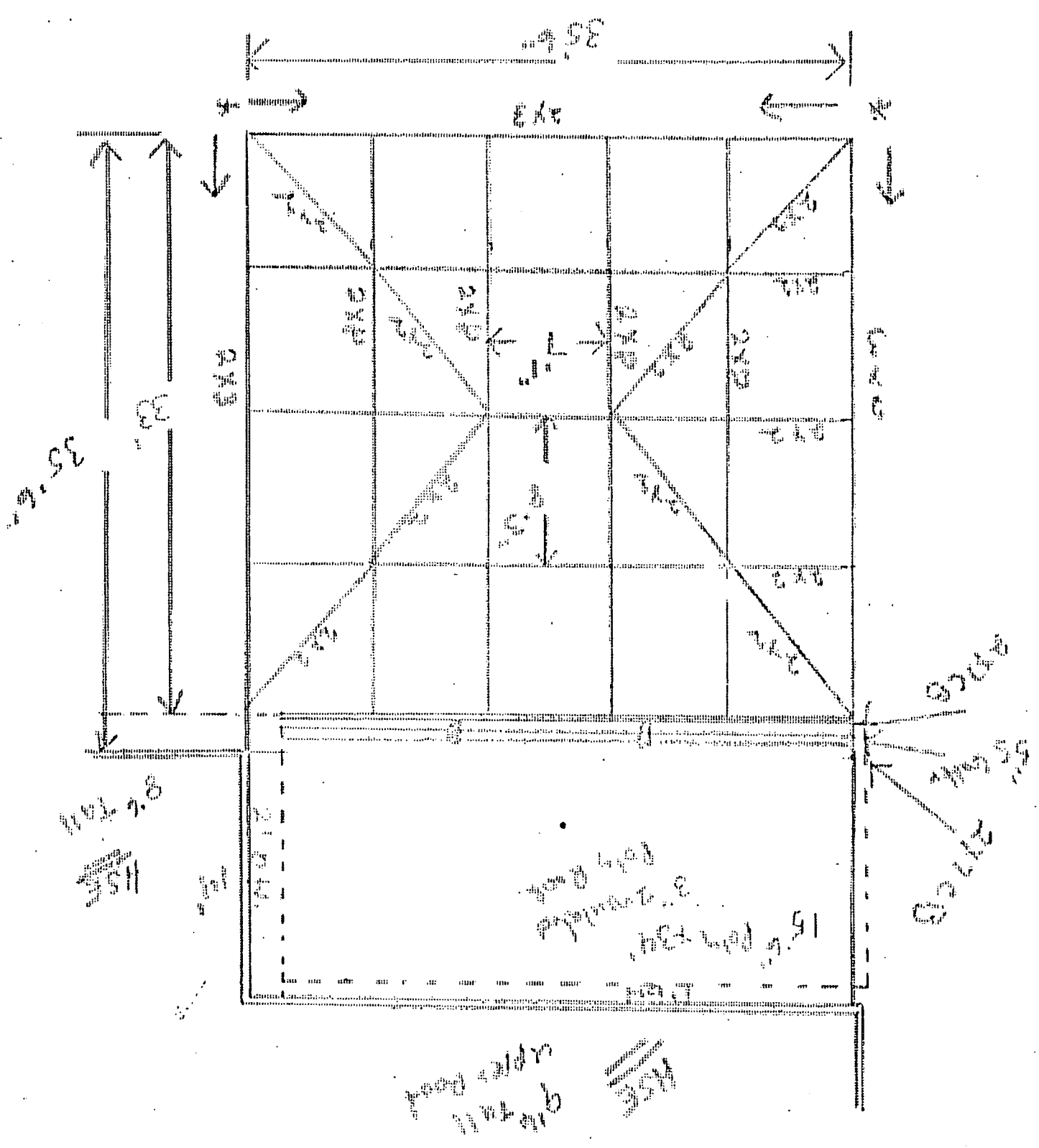
CERTIFICATE OF OCCUPANCY issued (if applicable) _____ Date

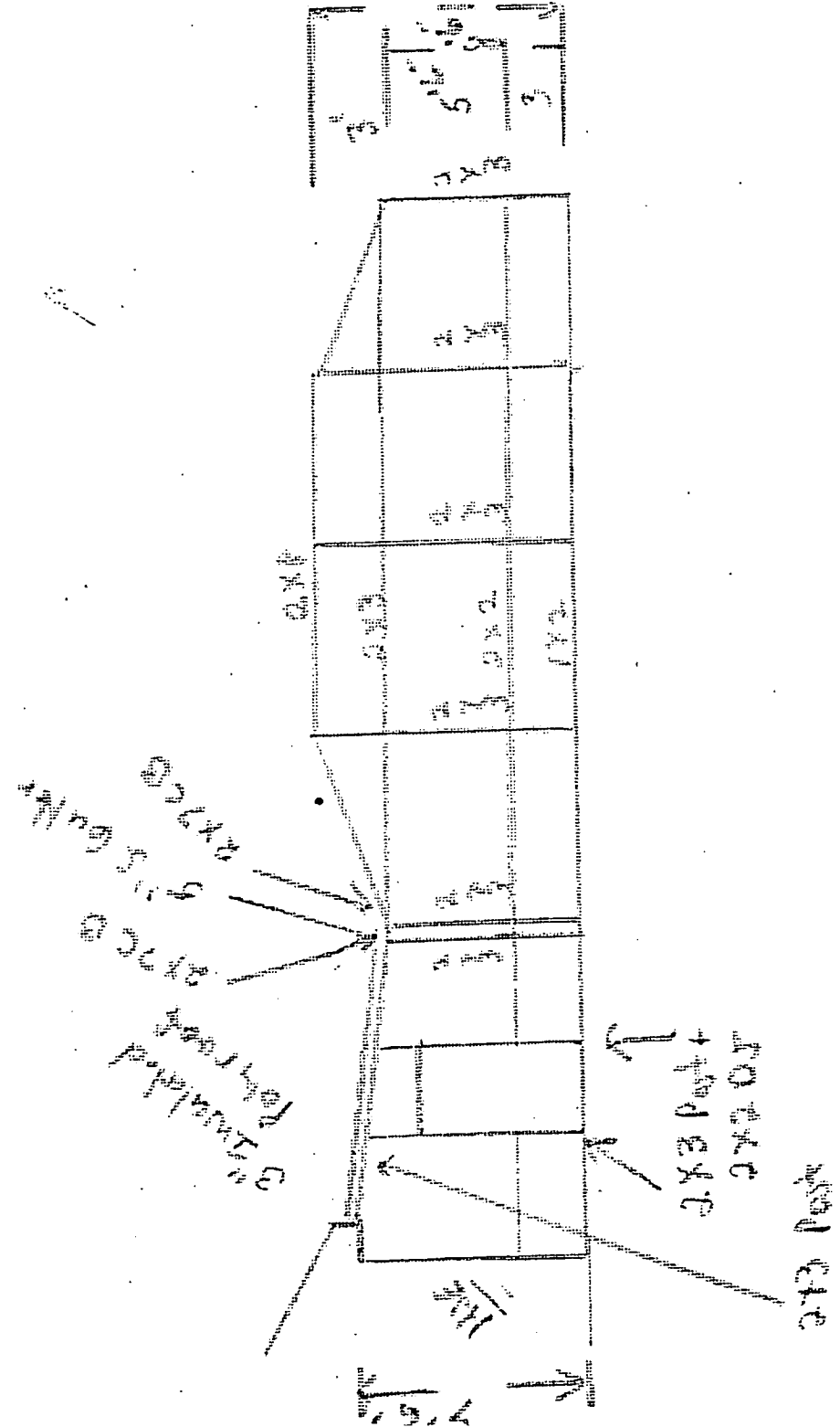
PERMIT NO. _____

INDIAN RIVER



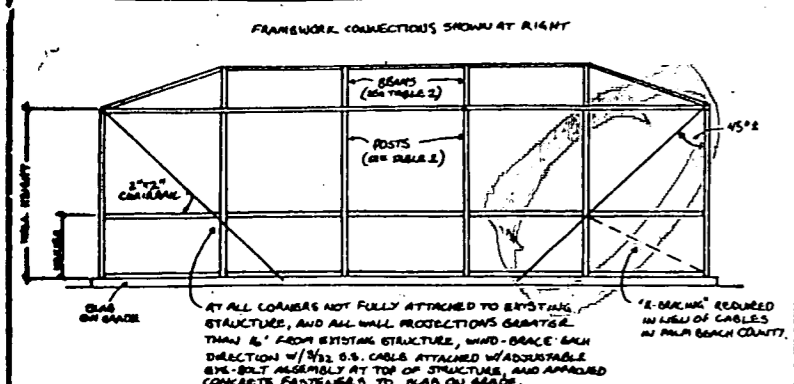
LOT 9 MIRAMAR
SEWALL'S POINT



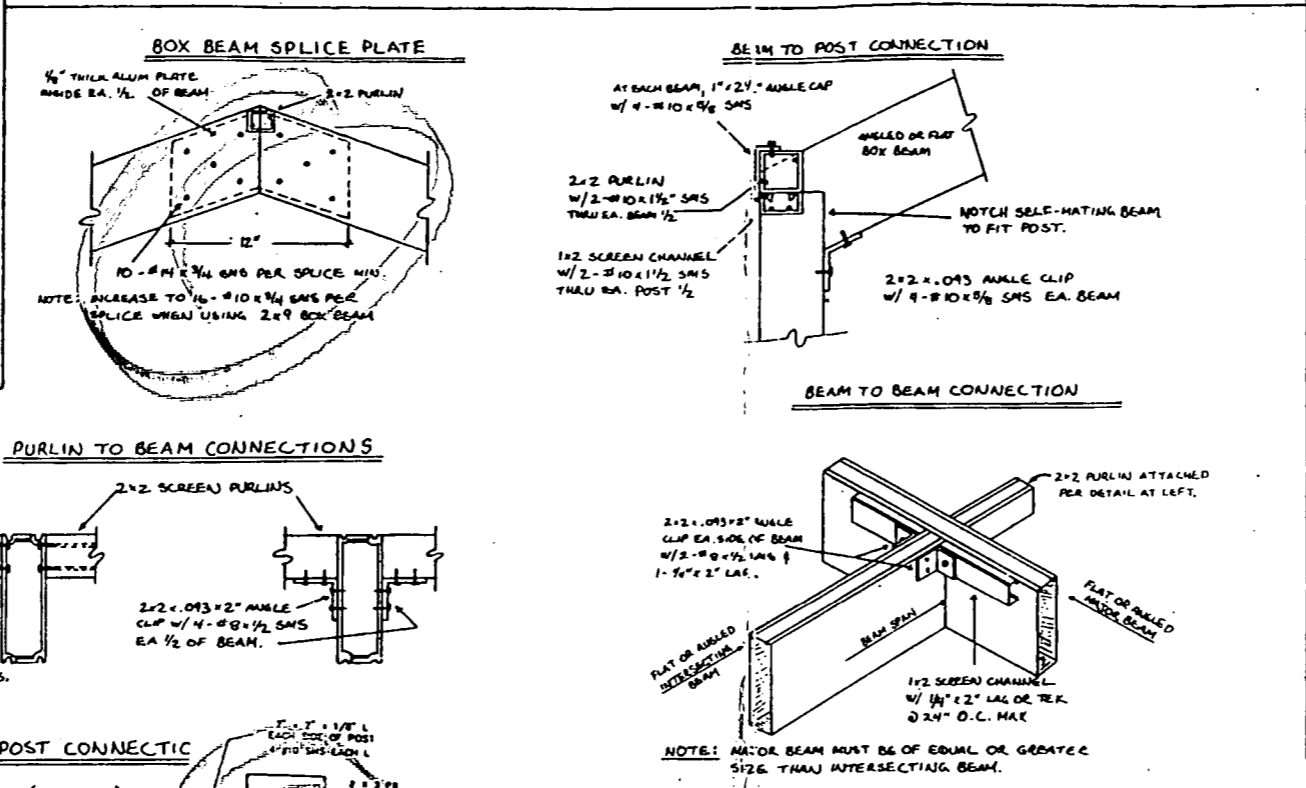


Frame Plan
MJM Mills
24 Seaman St. Rm
East South Street
York City Pa
1929

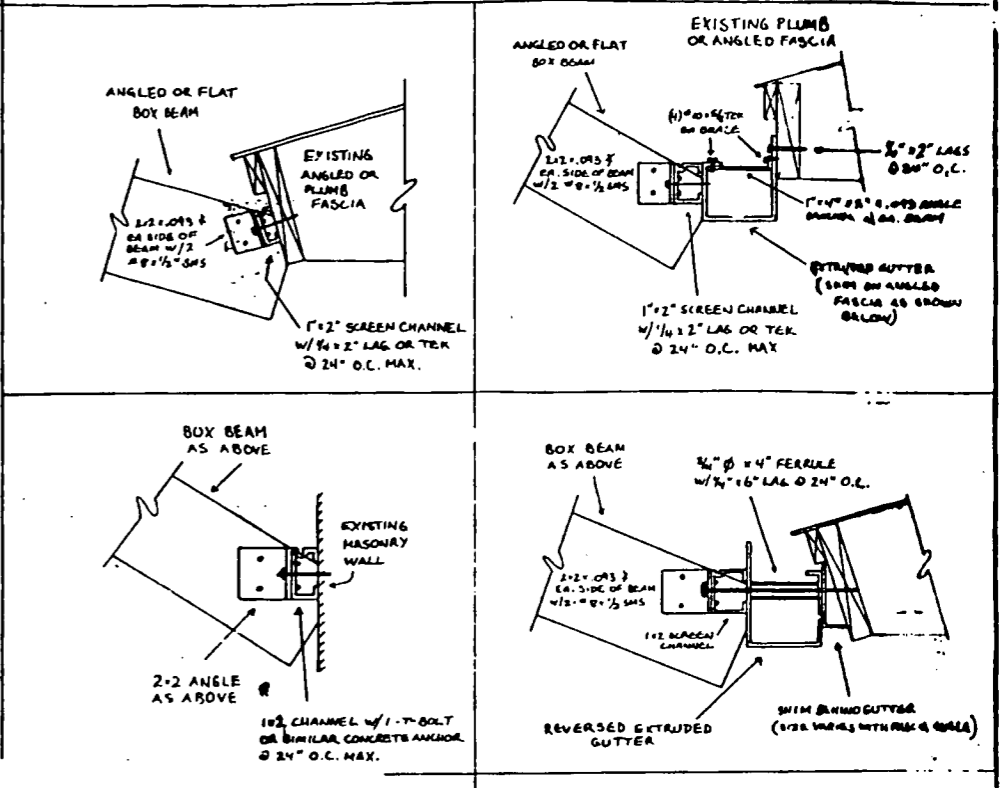
POOL ENCLOSURE - TYPICAL ELEVATION AND DETAILS



STRUCTURAL CONNECTION DETAILS



ATTACHMENT TO EXISTING STRUCTURE - DETAILS & COMPONENTS



EXTRUSIONS - SPECIFICATIONS

NO. OF BEAMS IN BEAM OR POST CHANNEL.

SECTION PROPERTIES

C _x (in)	0.040	0.060
S _x (in ³)	0.124	0.178
A (in ²)	0.215	0.352
K _y	1.175	1.178

ALLOY 6063-T5

2x2 BEAM OR POST

SECTION PROPERTIES

C _x (in)	0.040	0.050	0.060	0.075*
S _x (in ³)	0.320	0.270	0.322	0.430
I _x (in ⁴)	0.320	0.270	0.322	0.430
A (in ²)	0.475	0.620	0.648	0.720
K _y	1.175	1.175	1.175	1.000*

ALLOY 6063-T5

2x2 PERIMETER SWAP BEAM

SECTION PROPERTIES

S _x	0.432 in ³
I _y	0.342 in ⁴
A	0.622 in ²
K _y	1.175

ALLOY 6063-T5

2x3 SELF-MATING SWAP BEAM (2. MECRA)

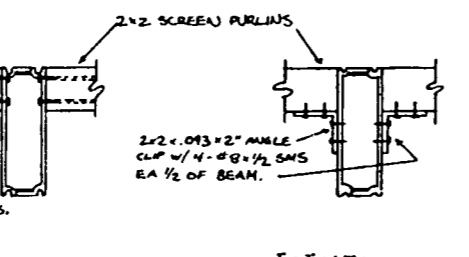
SECTION PROPERTIES

C _x (in)	0.115	0.045	1.08	0.48
C _y (in)	0.109	0.055	1.86	0.75
S _x (in ³)	0.225	0.055	3.69	0.98
S _y (in ³)	0.320	0.072	6.92	1.94

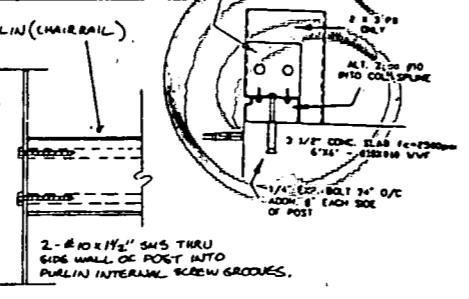
K_y = 1.10

NOTE: FASTENERS MAY BE ELIMINATED WHEN SELF-MATING CONTINUOUS SWAP TYPE BEAMS ARE SUBSTITUTED.

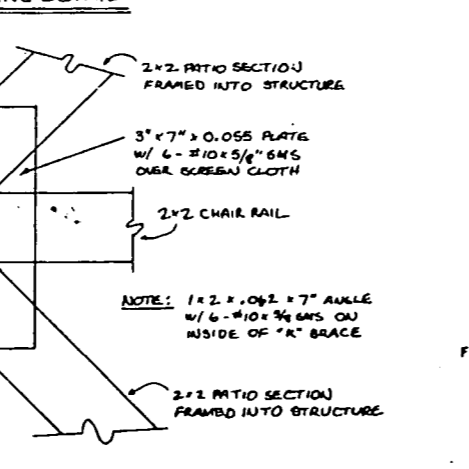
PURLIN TO BEAM CONNECTIONS



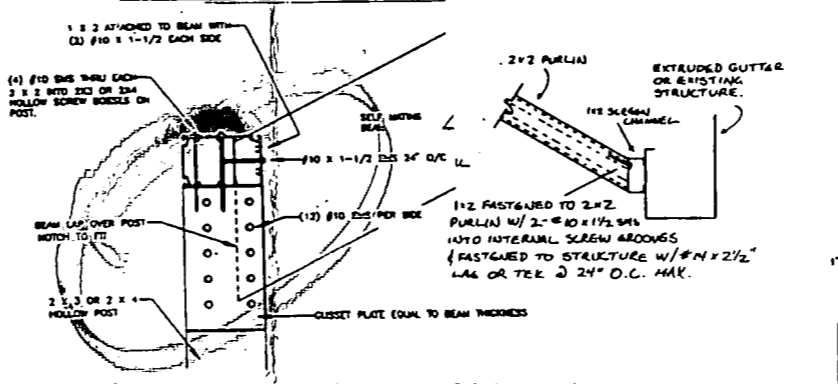
PURLIN TO POST CONNECTION



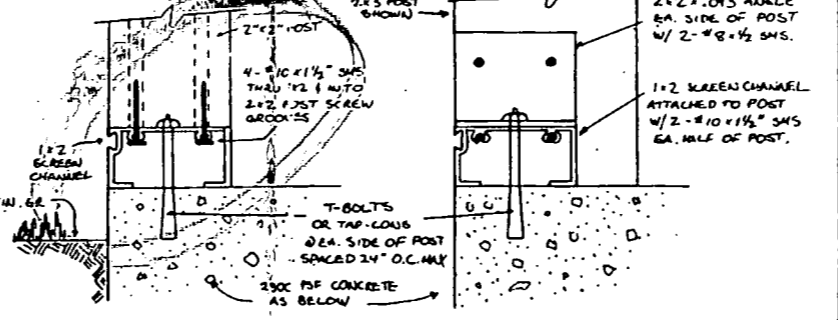
K-BRACING DETAIL



PERIMETER CONNECTIONS



BASE PLATE AND POST CONNECTION DETAILS



CONCRETE - SLABS, FOOTINGS & FASTENER DETAILS

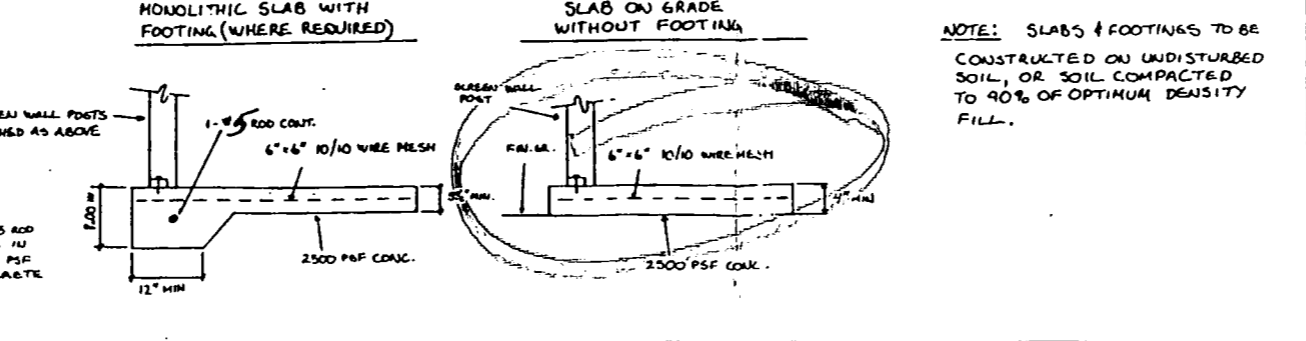


TABLE 1 - POST LENGTHS AND SPACING - SCREENED WALLS

POST SIZE	MAX. WALL HEIGHT	MAX. POST SPACING
2x2 x .050 OR ROUND	7'7"	7'11"
2x3 x .050 OR ROUND	9'2"	9'0"
2x4 x .050 OR ROUND	10'0"	9'6"
2x4 x .050 OR ROUND	10'6"	10'0"
2x4 x .050 OR ROUND	12'0"	9'0"
2x4 x .050 OR ROUND	13'0"	9'6"
2x4 x .050 OR ROUND	15'0"	12'0"
2x4 x .050 OR ROUND	17'0"	11'0"
2x4 x .050 OR ROUND	18'0"	10'0"
2x4 x .050 OR ROUND	19'0"	9'0"
2x4 x .050 OR ROUND	20'0"	9'4"
2x4 x .050 OR ROUND	21'0"	12'0"
2x4 x .050 OR ROUND	22'0"	11'0"
2x4 x .050 OR ROUND	23'0"	10'0"
2x4 x .050 OR ROUND	24'0"	9'0"
2x4 x .050 OR ROUND	25'0"	8'4"

TABLE 2 - SPAN TABLE FOR SCREENED ROOF BOX BEAMS (SELF-MATING BEAMS)

BEAM SIZE	MAXIMUM CLEAR SPANS FOR SCREENED ROOF BEAMS AT VARIOUS SPACINGS							
	4'0" O.C.	5'0" O.C.	5'6" O.C.	6'0" O.C.	6'6" O.C.	7'0" O.C.	7'6" O.C.	8'0" O.C.
2x4 S.M.B.	22'6"	20'0"	19'6"	19'0"	18'6"	18'0"	17'9"	17'6"
2x6 S.M.B.	31'0"	29'0"	28'0"	27'0"	26'3"	25'6"	25'3"	25'0"
2x7 S.M.B.	38'0"	35'0"	34'0"	33'0"	32'8"	32'4"	32'2"	32'0"
2x9 S.M.B.	47'0"	44'0"	42'0"	41'0"	40'3"	39'6"	39'3"	39'0"

STRUCTURES DETAILED IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH STANDARD BUILDING CODES FOR LOAD CONDITIONS AS FOLLOWS:

- DEAD LOADS + 30 PSF LIVE LOAD (Δ = 1/60 MAX.) 120 MPH WIND VELOCITY PRESSURES
- ADHERE TO LOCAL ORDINANCES WHICH IMPOSE FURTHER LIMITATIONS ON PROJECTIONS, SPANS, AND LOAD CONDITIONS.
- ALSO DESIGNED TO CONFORM TO PALM BEACH COUNTYWIDE CODE (30 PSF LL AND 29 PSF WL WITH APPROPRIATE FACTORS APPLIED)
- ALSO CONFORMS TO THE FLA. BUILDING CODE (LATEST EDITION) 1991
- S.M.S. FASTENER HOLDING CAPACITIES ARE CALCULATED PER ALUMINUM ASSOCIATION HANDBOOK.

GENERAL SPECIFICATIONS

- STEEL FASTENERS SHALL BE PLATED OR STAINLESS.
- ALUMINUM FASTENERS SHALL BE ALLOY 2024-T4
- S.M. BEAMS SHALL BE ALLOY 6063-T6
- POSTS, PURLINS, ANGLES, AND CHANNELS - ALLOY 6063-T5
- CONCRETE: F_c' - 2500 PSI

NOTE: ALL EXTRUSIONS MAY ACCEPT FLAT OR ROUND SPLINE, INSTALLED TO HOLD SCREEN CLOTH INTO EXTRUDED SPLINE GROOVES.

MASTER PLANS

ALUMINUM SCREEN ENCLOSURES (120 MPH WIND REGIONS)

THESE PLANS ARE FOR EXCLUSIVE USE BY:

EAST COAST SPECIALTIES

4386

RE-ROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 5/8/98

BUILDING PERMIT NO. 4386

Building to be erected for EDMOND VILLA Type of Permit RE-ROOF

Applied for by STEIN & COMPANY (Contractor) Building Fee _____

Subdivision AMBELLA Lot _____ Block _____ Radon Fee _____

Address 24 S SEWALL'S POINT ROAD Impact Fee _____

Type of structure RE-ROOF SFRS 5V CRIPS A/C Fee _____

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

13841009.00000040000

Roofing Fee 100

Amount Paid 100 Check # 3325 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 12,795

TOTAL Fees 100

Signed V. Claus
Applicant

Signed _____
Town Building Inspector

RE-ROOFING PERMIT

INSPECTIONS

DRY IN
PROGRESS

DATE _____
DATE _____

PROGRESS
FINAL

DATE _____
DATE _____

24 HOURS NOTICE REQUIRED FOR INSPECTIONS.

CALL 287-2455

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

MONDAY THROUGH SATURDAY

New Construction Remodel Addition Demolition

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

**FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT,
NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.**

DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!

4386

Town of Sewall's Point

Date 5-8-98

P.I.N. _____

BUILDING PERMIT APPLICATION

to construct

NEW CONSTRUCTION ADDITION ALTERATION DEMOLITION

RESIDENTIAL COMMERCIAL _____ SF _____ CF

OTHER: _____ CONTRACT PRICE 12795.00

Owner's Name Edmond Villa

Owner's Address 24 S. Sewalls Point Rd., Stuart

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

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

City Stuart State FL Zip _____

Contractor's Name Stein 3 Co., Inc.

Contractor's Address 602 S. Market Ave.

City Fort Pierce State FL Zip 34982

Job Name Reroof

Job Address 24 S. Sewalls Pt. Rd., Stuart

City Stuart State FL Zip _____

Legal Description Section 1 Township-38 Range 41 ID# 13841009000004-003

Bonding Company _____

Bonding Company Address _____

City _____ State _____ Zip _____

Architect/Engineer's Name _____

Architect/Engineer's Address _____

Mortgage Lender's Name _____

Mortgage Lender's Address _____

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

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

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

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

Edmond R. Villa
Owner or Agent

_____ Date

[Signature]
Contractor

5-8-98
Date

COUNTY OF MARTIN
STATE OF FLORIDA

Sworn to and subscribed before me this ___ day of _____, 199_, by _____ who: [] is/are personally known to me, or [] has/have produced _____ as identification, and who did not take an oath.

Virginia L. Lopez
MY COMMISSION # CC554828 EXPIRES
May 14, 2000
BONDED THRU TROY FAIR INSURANCE, INC.



Name: Virginia L. Lopez
Typed, printed or stamped

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

Virginia L. Lopez
MY COMMISSION # CC554828 EXPIRES
May 14, 2000
BONDED THRU TROY FAIR INSURANCE, INC.
STATE OF FLORIDA
COUNTY OF MARTIN



Sworn to and subscribed before me this 8th day of May, 1998 by Robert Stenzel who: [] is/are personally known to me, or [] has/have produced _____ as identification, and who did not take an oath.

Name: _____
Typed, printed or stamped
(NOTARY SEAL)

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

Certificate of Competency Holder

Contractor's State Certification or Registration No. _____

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY _____ Permit Officer

_____ Building Commissioner

4909

RE-ROOF

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 5/2/00
 Building to be erected for EDMOND VILLA
 Applied for by STEVEN & CO. INC. Type of Permit RE-ROOF (ACCESS. STRUCT.)
 Subdivision MIRAMAR Lot 9 Block _____
 Address 24 S. SEWALL'S POINT ROAD
 Type of structure S.F.R.

BUILDING PERMIT NO. 4909
 Building Fee _____
 Radon Fee _____
 Impact Fee _____
 A/C Fee _____
 Electrical Fee _____
 Plumbing Fee _____
 Roofing Fee \$120.00
 Other Fees (_____) _____
 TOTAL Fees \$120.00

Parcel Control Number:
01-38-41-009-000-00090-40000
 Amount Paid \$120.00 Check # 4029 Cash _____
 Total Construction Cost \$ 2,120.00

Signed [Signature] Applicant
 Signed [Signature] Town Building Inspector OFFICIAL

RE-ROOFING PERMIT

INSPECTIONS

DRY IN PROGRESS	DATE _____ DATE _____	PROGRESS FINAL	DATE _____ DATE <u>5/10/00</u>
--------------------	--------------------------	-------------------	-----------------------------------

24 HOURS NOTICE REQUIRED FOR INSPECTIONS. CALL 287-2455
WORK HOURS - 8:00 AM UNTIL 5:00 PM
MONDAY THROUGH SATURDAY

- New Construction Remodel Addition Demolition

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

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
APR 28 00

PRODUCER
SID BANACK INSURANCE AGENCY
2101 S. WAVERLY PLACE, SUITE 200 -C
MELBOURNE FL 32901
PHONE: 321-952-6463
FAX: 321-952-6490

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

COPY FILE
perma
lec/ia

COMPANIES AFFORDING COVERAGE

INSURED
ROBERT E. STEIN, INC.
STEIN & CO., INC., ET AL
602 S. MARKET AVENUE
FORT PIERCE FL 34982

COMPANY A: TRANSPORTATION INS CO
COMPANY B: AUTOOWNERS INS CO
COMPANY C:
COMPANY D:
COMPANY E:

RECEIVED
MAY - 1 2000
BY: *[Signature]*

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR A GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	1079362749	MAY 1 00	MAY 1 01	EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any One Fire) \$ 50,000 MED. EXP (Any One Person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS-COMP/OP AGG. \$ 1,000,000
	B <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	41-011-976-00	MAY 1 00	MAY 1 01	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	<input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	<input type="checkbox"/> EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE-EA EMPLOYEE \$ E.L. DISEASE-POLICY LIMIT \$
	OTHER:				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

TOWN OF SEWALLS POINT
1 SOUTH SEWALL POINT RD.
STUART, FL. 34996

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

AUTHORIZED REPRESENTATIVE

Attention: MR. ARNOLD- FAXED 561-220-4765

[Signature]

WACK INSURANCE AGENCY
 3. WAVERLY PLACE, SUITE 200 -C
 ZBOURNE FL 32901
 PHONE: 407-952-6463
 FAX: 407-952-6490

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

INSURED
CNA UNISOURCE FOR LEASED WORKERS ASSIGNED TO STEIN & COMPANY, INC.
 CNA PLAZA
 CHICAGO, IL 60685

COMPANY A: **AMER CAS CO READING, PA/CNA UNISOURCE**
 COMPANY B:
 COMPANY C:
 COMPANY D:
 COMPANY E:

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.

NSR LTR	TYPE OF 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"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ FIRE DAMAGE (Any One Fire) \$ MED. EXP (Any One Person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS-COMP/OP AGG. \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	WCL172594973	NOV 1 99	NOV 1 00	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input checked="" type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE-EA EMPLOYEE \$ 2,000,000 E.L. DISEASE-POLICY LIMIT \$ 2,000,000
	OTHER:				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

UN OF SEWALLS POINT
 1000 SEWALL POINT ROAD
 STUART, FL 34996

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

AUTHORIZED REPRESENTATIVE

A. H. D. Arnold

Attention: MR. ARNOLD-561-220-4765

AC# 5157890

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

DATE	BATCH NUMBER	LICENSE NBR
06/06/1998	97903911	CC -CA42775

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2000

STEIN, ROBERT ELIAS
STEIN & COMPANY INC
602 S MARKET AVE
FT PIERCE FL 34982

LAWTON CHILES
GOVERNOR

DISPLAY AS REQUIRED BY LAW

RICHARD T. FARRELL
SECRETARY

CompuMedia (904) 724-2424 "Conserve Recycle"

MARTIN COUNTY ORIGINAL
1999 COUNTY OCCUPATIONAL LICENSE 2000

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(881) 288-5804

LICENSE 1989 520 047 CERT CCCA42775

PHONE 561 465 9468 BIC NO 1761

LOCATION:
602 S MARKET AVE

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR. \$	0.00	LIC. FEE \$	25.00
\$	0.00	PENALTY \$	0.00
\$	0.00	COL. FEE \$	0.00
\$		TRANSFER \$	0.00
TOTAL			25.00

STEIN & COMPANY INC
602 SOUTH MARKET AVE
FT PIERCE FL 034982

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF
CERT ROOFING CONTR

AT ABOVE ADDRESS FOR THE PERIOD BEGINNING ON THE

1 DAY OF OCTOBER 99
AND ENDING SEPTEMBER 30. 2000 999090101 1644 PAID



SV Camp

METROPOLITAN DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

BUILDING CODE COMPLIANCE OFFICE
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1803
MIAMI, FLORIDA 33130-1663
(305) 375-2901
FAX (305) 375-2908

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Southeastern Metals Manufacturing Co., Inc.
11801 Industry Drive
Jacksonville, FL 32226

Your application for Product Approval of

~~305-V-Crimp Metal Roofing Panels~~

under Chapter 8 of the Miami-Dade County Code governing the use of Alternate Materials and Types of Construction, and completely described in the plans, specifications and calculations as submitted by: **Construction Research Laboratory, Inc. and Hurricane Test Laboratory, Inc.** has been recommended for acceptance by the Building Code Compliance Office to be used in Dade County, Florida under the specific conditions set forth on pages 2-4 and the standard conditions on page 5.

This approval shall not be valid after the expiration date stated below. The Building Code Compliance Office 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, the Building Code Compliance Office may revoke, modify, or suspend the use of such product or material immediately. The Building Code Compliance Office reserves the right to revoke this approval, if it is determined by the Building Code Compliance Office that this product or material fails to meet the requirements of the South Florida Building Code.

The expense of such testing will be incurred by the manufacturer.

ACCEPTANCE NO.: 98-0429.09 Renews & Revises: 97-0404.05
EXPIRES: 06/23/01

Raul Rodriguez
Raul Rodriguez
Product Control Supervisor

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

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

4/27/00 TOWN OF SEWALL'S POINT
REVIEWED: *[Signature]*
BKG. OFFICIAL

TOWN COPY

APPROVED: 06/23/98 *24 S. SEWALL'S POINT RD.*

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

PN 4909

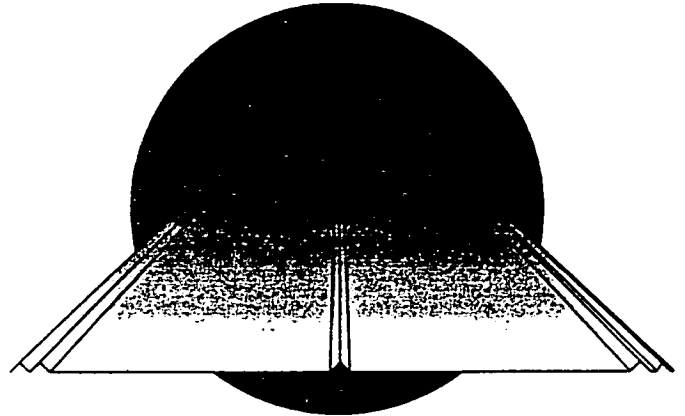


Southeastern Metals

Metal Roofing Components

5V-CRIMP

- RESIDENTIAL
- AGRICULTURAL - POST-FRAME
- ARCHITECTURAL
- LIGHT COMMERCIAL/INDUSTRIAL
- RETROFIT OVER EXISTING SHINGLE ROOFS
- GARAGES, PORCHES, GAZEBOS, ETC...

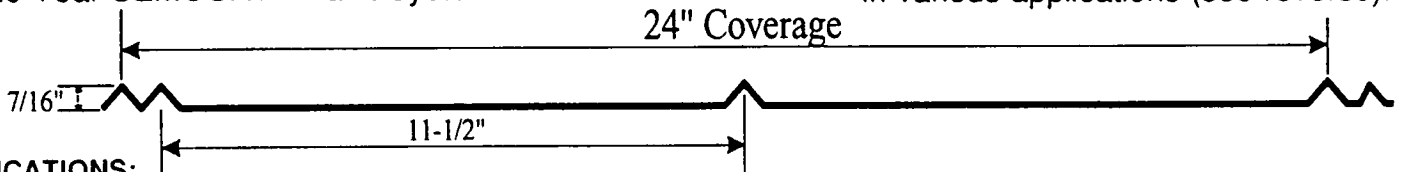


SPECIFICATIONS:

- 26 Gauge, 29 Gauge, 30 Gauge, & Utility Gauges
- G-90 Hot Dipped Galvanized (zinc) Coating or AZ-55 Galvalume® Coating or 20 Year SEMCOAT™ Paint System.

FEATURES:

- Full 24" coverage in custom cut lengths.
- Anti-leak sidelap siphon design.
- Complete trim & accessory package available
- Meets Metro-Dade Compliance in various applications (see reverse).



APPLICATIONS:

Southeastern Metals classic 5V-Crimp preserves the best of the past to last far into the future. By combining a functional simplicity with a vast array of colors, a builder is offered the opportunity for environmental blending or contrasting. Southeastern Metals state of the art SEMCOAT™ paint system applied over a galvanized coating or the bare Galvalume® substrate is available in lengths custom cut to the inch, from 6 to 16 feet (even longer by special order) for your individual job requirements.

ACCESSORIES:

Southeastern Metals manufactures a full line of standard trim and accessory items to finish your metal roofing project. Flat sheets are readily available. Custom-made trim and accessories are available upon request. Please request an Accessory Detail Manual for detail installation instructions.

FINISHES:

The SEMCOAT™ paint system offers optimum exterior protection plus superior resistance to corrosion and ultra violet radiation. Please refer to your Southeastern Metals color chart for color matching. Available colors in 26 gauge are: Bone White, Marine Green, Forest Green, Barn Red, Hawaiian Blue, and Old Town Gray. (Colors available in 29 gauge are: Bone White, Hawaiian Blue, Cocoa Brown, Mocha Tan, Forest Green, Barn Red, Old Town Gray, Light Stone, Charcoal, and Marine Green. 29 gauge colors are available only from Nashville, Tennessee - freight charges and lead-times may apply.)

Galvalume® is a registered trademark of BIEC International, Inc.

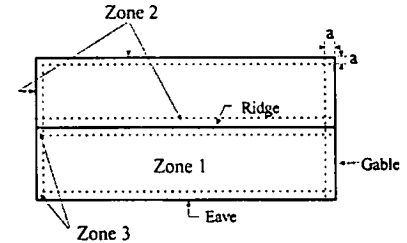
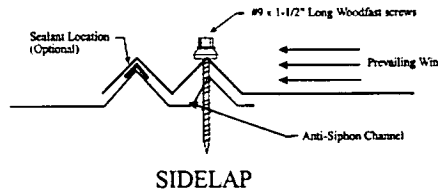
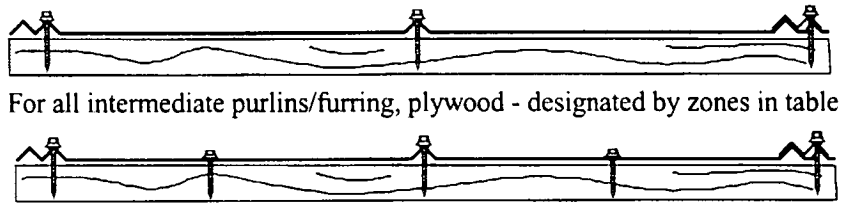
METRO-DADE COUNTY CODE COMPLIANCE and LOCAL CODES:

To comply with Metro-Dade County compliance report #93-1215.04 and the new ASCE 7-88 adopted in South Florida, the installation specifications listed on the back of this flyer are applicable to residential and commercial applications only in those counties enforcing Metro-Dade compliances. Local building codes address metal roofing in various ways. For other building applications, please contact your local building organization. Southeastern Metals Manufacturing Co., Inc. acts only as the seller of roofing materials and has no control of the application of materials, or the conditions under which they are applied.

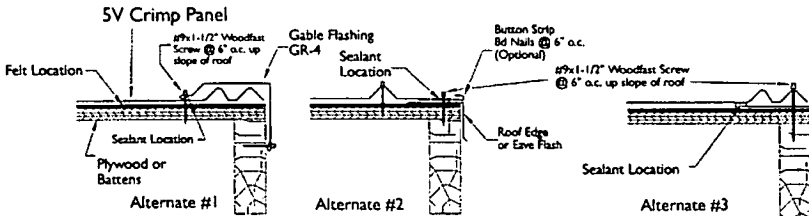
A registered engineer or architect of record, for the particular job, assumes the responsibility of detailing the application and performing the necessary calculations to complete the job. If the engineer or architect needs assistance in these applications, Southeastern Metals provides a technical support telephone number of 1-800- SE SPECS.

5V-CRIMP INSTALLATION SPECIFICATIONS

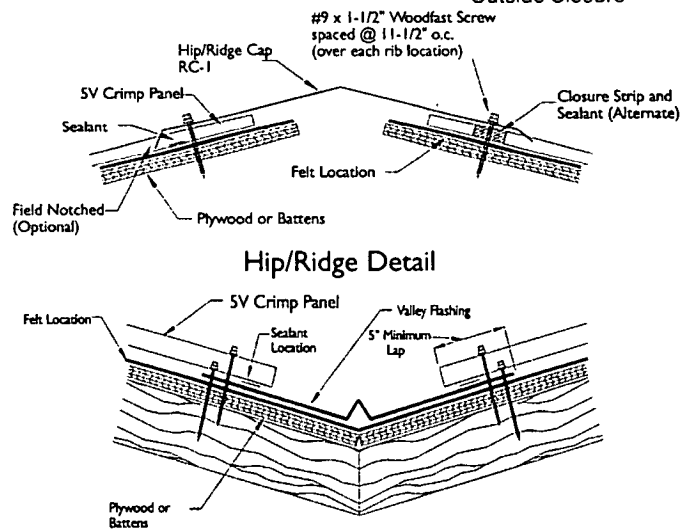
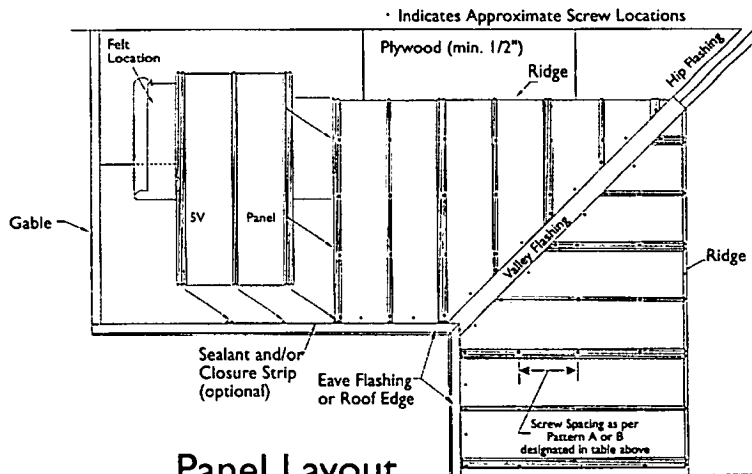
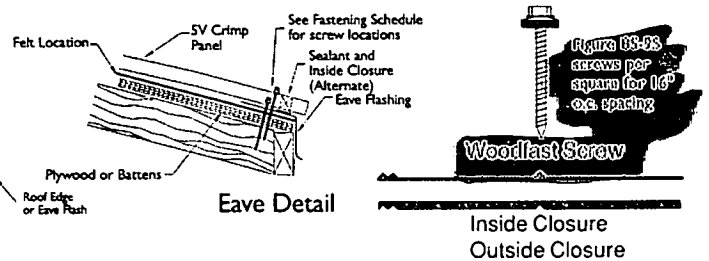
Allowable ASCE Wind Pressures (psf) and Longitudinal All Roof Slopes - Mean Roof Height <= 35 feet #9 Woodfast screw spacing (inches) for Patterns A & B				
	Non-Coastal Exposure C		Coastal Exposure D	
	Interior Zone 1	Corner & Exterior Zones 2 & 3	Interior Zone 1	Corner & Exterior Zones 2 & 3
ASCE (psf)	-50.5	-78.4	-70.3	-109.1
Pattern A Screw Spacing	14"	11"	12"	9"
Pattern B Screw and Batten Spacing	14"	11"	12"	9"
Pattern A:	Metal deck attached directly to minimum 1/2" plywood with three (3) - #9x1-1/2" screws for 24" wide panel			
Pattern B:	Minimum 1x3 battens fastened to minimum 1/2" plywood with two (2) - 0.131" diameter nails @ 8" o.c. or one (1) - 0.131" diameter nails @ 4" o.c. and metal deck attached to battens with three (3) - #9x1-1/2" screws for each 24" wide panel			



- ROOF SLOPE:** Minimum slope per foot shall be 3" vertical to 1 foot horizontal. (3-12 Pitch)
 - END LAP:** Minimum end lap shall be 12" for all roof slopes. Provide minimum 1" overhang at eaves.
 - SIDE LAP:** Must lap both ribs (as pictured).
 - WOOD DECK:** Shall be minimum 1/2" Structural Plywood (5/8" for Metro-Dade new construction) supported on rafters spaced maximum 24 inches on-center.
 - MOISTURE BARRIER:** Provide minimum #30 pound felt as a "moisture barrier" attached to roof deck (plywood) in conformance with applicable local building codes. Provide #15 pound felt on top of the #30 pound felt if "tin tabs" are used to anchor the #30 felt.
- Optional - Furring strip/battens** (Used where design requirements call for a separation of the moisture barrier from the roof panel) (Mandatory in re-roof applications over shingles) - 5V Crimp 26 gauge and heavier only.
- 5-V metal roof can be separated from the "moisture barrier" by a minimum, nominal 1" x 3" yellow pine battens spaced at maximum 16" on-center or according to ASCE calculations where applicable. The battens shall be fastened to the roof deck with minimum #6 screws at 12" on-centers in re-roof applications OR two minimum 8d common or pneumatic nails spaced at 8" o.c. or one every 4" o.c. (or by applicable calculations according to ASCE 7-88 or 1991 NDS standards). **INSTALLING BATTENS:** Battens shall be installed to support the entire width and length of ridge, eave, hip, valley and gable end trims. 5-V Metal Roofing shall be fastened to trims through the battens as per note #7, design loads, and one additional fastener in the flat portion of the panel at eave and valley conditions as pictured in screw fastening patterns drawing.
- METAL GAUGE:** 5-V metal roofing material shall be minimum 26 gauge for residential construction in Metro-Dade County Compliance or a minimum 29 gauge for Standard Building Code requirements.
 - FASTENERS:** 5-V metal sheets shall be fastened to deck or battens at center rib and at each side rib. Fasteners shall be minimum #9 x 1-1/2" coated wood screws with hexheads and bonded neoprene washers and shall be spaced a maximum of 16" on-center up the slope of the roof.
 - CLOSURE FILLER STRIPS:** Provide closure strip and sealant at area left between the sheets and flashing and also where metal trim rests on a high rib. Closure strips shall be closed cell polyethylene foam.
 - FLASHINGS:** Eave, gable, valley, hip, & ridge flashings shall be Southeastern Metals material.
 - CAULKING:** Shall be approved by the manufacturer, butyl sealant supplied in tape or gun-grade form.
 - PIPE BOOTS:** Must NOT be lead-type boots! Must be approved for local codes.



Gable Edge Details



Note: 29 gauge painted 5V Crimp should be used over solid plywood deck and minimum 30# felt, only.

Southeastern Metals Roofing, Inc.

• 200-B S. Falkenberg Road • Tampa, FL 33619 •
 • 800-942-6734 • 813-689-8416 •
 • Fax 813-653-1864 •

Southeastern Metals Manufacturing Co., Inc.

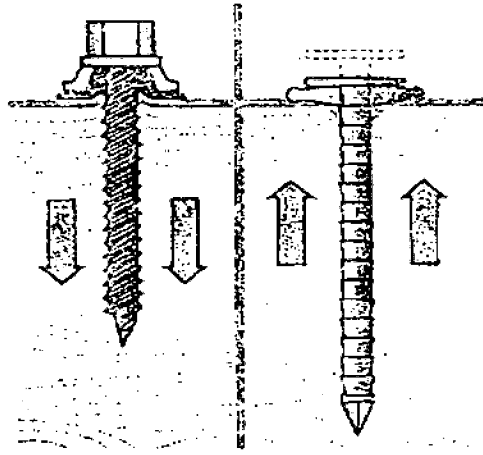
• 11801 Industry Drive • Jacksonville, Florida 32218 •
 • National Wats 800-874-0335 • 904-757-4200 •
 • Fax 904-757-7683 •

Southeastern Metals Manufacturing of Tennessee, Inc.

• 3520 Ambrose Ave. • Nashville, TN 37207 •
 • 800-METAL CO • 615-228-3310 •
 • Fax 615-228-2338 •

WOODGRIP™ Fasteners Are Stronger Than Nails

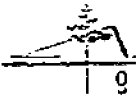
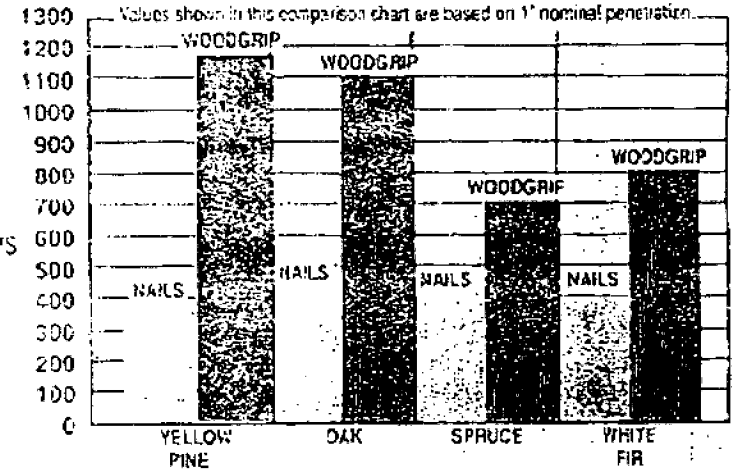
NO BACKOUTS



- Stops leaks
- No hammer damage on panels or substructures
- No call backs

The inherent tendency of wood fibers to return to their original position actually draws WOODGRIP drill screws tighter. It's this same tendency that causes nails to back out, creating leaks.

Comparative Pull-Out Strengths (Pounds Ultimate)



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-3-00, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4511	Sinton	final	Passed	
(3)	33 N. River O/B		BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4877	Loyola/Osborne	footer	Passed	
(2)	20 C. Hill Way BURFORD COST		BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4890	Guerard	final	Passed	
(6)	104 Abbie Court SUPERIOR MFG.	shutters	BG	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4905	Bergaus	Footer	Passed	
(4)	2 Perrinville ROBT. DEAN SCHUER	+ Deck Slab (DECK REPL.)	BG	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4843	Tidikus	insulation	Passed	
(8)	6 Kingston Ct. D.S. GEN'L. CONTR.	(283-3151)	BG 1	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4909	Villa	Shed	Reject	12:00 - if
(10)	24 S. S. St. STEIN & CO. 335-5688	+ felt NO DEPT-INV BEFORE SHEATHING INSP.	w/ Fee BG.	possible Gazebos.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4882	Woods	strapping 1st	Passed	SUB PERMITS REQ. (Advised)
(9)	116 S. River EMMICK	Floor Exterior WALLS only	BG.	ELECT./AC/REFG (Bulldo) - STOP WORK THESE TRADES

OTHER: * 4909 Plywood Rotted, Roofer Replacing ALL plywood
Told Him NOT To install Felt until after
INSPECTION & Still Remain shingled. Almost done.

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/5/01, 2000; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4732	Tetamanti 19 Lofting Hudnagal	all trades	Passed BG	Check GAS pressure- AT insulation inspect Picked up window-Spec
4909	Villa. 24 S. Sewall Point Rd. Stein	DRY-W	Passed BG.	12:50 PM
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-5-2000, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
N ✓ 4904	Miranda 34 Castle Hill O/B	temp. power	Passed BG.	Water - Dumpster Port. Toilets & meter.
S ✓ 4910	SCHAFENBERG 123 S.S. PRD. TREASURE COAST FENCE	fence (FINAL)	Passed BG.	
S ✓ 4909	VILLA 9:15 AM. 245 SEWALL'S PT. RD. STEIN & CO.	SHEATHING (REINSPECTION) dry-in 12:	Passed BG.	\$30.00 RELIEF FEE REQUIRED - PRIOR TO INSP.
S ✓ 4662	Foglia 106 H Sewall Way Foglia	shutters (FINAL)	Passed BG.	
S ✓ 4672	Foglia 110 H Sewall Way Foglia	shutters (FINAL)	Passed BG.	
S ✓ 4882	Woods 116 So. River Rd.	electrical Did NOT call in	Cancelled inspection	
N ✓ * 4771	Van Wagner 3 Pelams Way	framing off trades EXTERIOR STRAPPING	Passed BG.	No windows INSTA EXTERIOR STRAPPING ON

OTHER: * #4771. Said there will be no venting in soffits. Said Bart Stewart in Martin county is doing this. Will check with Ed Arnold. A/C Air Handlers hanging FROM INSPECTOR (Name/Signature): Garage Ceiling?

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/10, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
N 4527 EXP. 4/95	Seely 37 Lofting Way GRIBBEN CONST.	footer pads for columns	Passed	7-Pads
(1)			B.G.	
N 4859	Abbott 108 N.S.P. Rd. E.S. UNLIMITED 775-1887	pool deck (REINSPECT)	CANCEL	NO FORMBOARD SURVEY " COMPACTION QUAC. STEPHEN MACARI
(X)			☞ (CONTR. NOTIFIED)	
S 4658	Foglia 103 H. Sewall FOGLIA CONST.	final c.o. (REINSPECT)	Passed	C.O. TO OWNER'S REP. @ SITE
(6)			B.G.	
S 4909	VILLA 2455 SEWALLS PT. RD.	final roof	Passed	
(7)	Stein		B.G.	
N 4903	Koch 71 N. River Rd ALMAR/JACKSON Pools	Pool Steel + Main Drain 561-746-4910; GERALD WASSER	CANCEL	NO FORMBOARD SURVEY (REQUIRE 24 HRS PRIOR) TO INSPECTION
(X)			☞ (CONTR. NOTIFIED)	
N 4527 (EXP.)	SEELY 37 NE LOFTING WAY GRIBBEN CONST.	POST NOTICE OF PENDING STOP WORK ORDER.	GAVE TO Supt.	G.C. TO SIGN RENEWAL PERMIT PRIOR TO 5:00 PM FRIDAY MAY 12, 2000
(0)				
N 4888	Obersheim 75 N.S. Pt. Rd. DREDGE & MARWE (KREMSEK)	final on dock	Passed	Elec. Disconnected. Electrician on job. He will pull permit for New Elec. Removing old Elec.
(3)			B.G.	

OTHER: T/R APPL. - 10 CRAVES NEST (TORRANCE); ✓ CLYDES LANDSCAPE Running New Water Lines will get perm
 T/R APPL. - INDIA LUCIE COMMON (H.O. ASSN); ✓ " " "
 T/R APPL. - 14 HERONS NEST; (JONES) ✓ BAYSHORE LAND MARKI
 T/R APPL. - 4 ONE HILL WAY; (COWWAC) ✓ COWWAC CONST
 INSPECTOR (Name/Signature): T/R APPL. - E.S. SEWALLS PT. RD. (CHOTOS) ✓ FPC
 CONSENT - G MINDORO (SEA) ✓ POSSIBLE HEDGE HGT UCL. - CONSULTATION

4996

SERVICE CHANGE

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 6/30/00
Building to be erected for VICKI VILLA
Applied for by RMS ELECTRIC, INC. (Contractor)
Subdivision _____ Lot _____ Block _____
Address 24 S. SEWALL'S POINT RD.
Type of structure S.F.R.

BUILDING PERMIT NO. 4996
Type of Permit SERVICE CHANGE
Building Fee _____
Radon Fee _____
Impact Fee _____
A/C Fee _____
Electrical Fee \$30.00
Plumbing Fee _____
Roofing Fee _____
Other Fees (_____) _____
TOTAL Fees \$30.00

Parcel Control Number:
1-38-41-009-000-00090-40000
Amount Paid \$30.00 Check # 9414 Cash _____ Other Fees (_____) _____
Total Construction Cost \$ 1,000.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Inspector OFFICIAL

BUILDING PERMIT

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

FLOOD ZONE _____ LOWEST HABITABLE FLOOR ELEV. _____

24 HOURS NOTICE REQUIRED FOR INSPECTIONS. CALL 287-2455
WORK HOURS - 8:00 AM UNTIL 5:00 PM
MONDAY THROUGH SATURDAY

New Construction Remodel Addition Demolition

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



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

RECEIVED
JUN 29 2000
BY: _____

Permit Number: _____

Owner or Titleholder's Name Vella
 Street: 24 S. Sewalls Pt Rd. City Sewalls Pt State: FL Zip 34996
 Legal Description of Property: 1-38-41-009-000-00090, 40000
 Parcel Number: _____

Location of Job Site: _____
 TYPE OF WORK TO BE DONE: Electric service upgrade / Panel change

CONTRACTOR/Company Name: RMS Electric INC Phone No. (SW) 220 1052
 Street: 1501 Decker Ave #113 City Stuart State: FL Zip 34994
 State Registration: ER-0011469 State License: _____

ARCHITECT: _____ Phone No. () _____
 Street: _____ City _____ State: _____ Zip _____

ENGINEER: _____ Phone No. () _____
 Street: _____ City _____ State: _____ Zip _____

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

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

COSTS AND VALUES
 Estimated cost of construction or Improvement: \$ 1000.00
 Estimated Fair Market Value (FMV) prior to improvement: \$ _____
 If Improvement, is cost greater than 50% of Fair Market Value? YES _____ NO _____
 Method of determining Fair Market Value: _____

 (If required) Approved by Town Engineer
 State: _____ License # _____
 State: _____ License # _____

Rick / RMS Elect.

Form revised: 20 April 2000

Page - 2 -

 Date: _____ Approved by Building Official:

 Date: _____

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

TREE REMOVAL (Attach sealed survey)

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

DEVELOPMENT ORDER # _____

1. ALL APPLICATIONS REQUIRE

- a. Property Appraisers Parcel Number.
- b. Legal Description of your property. (Can be found on your deed survey or Tax Bill.)
- c. Contractors name, address, phone number & license numbers.
- d. Name all sub-contractors (properly licensed).
- e. Current Survey

2. Take completed application to the Permits and Inspections Office for approval. Provide construction details and a plot plan(s) showing setbacks, yard coverage, parking and position of all buildings on the property, stormwater retention plan, etc. Compliance with subdivision regulations can also be determined at this time.

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

4. Return all forms to the Permits and Inspection Office. All planned construction requires: two (2) sets of plans, drawn to scale with engineer's or architects seal and the following items:

- a. Floor Plan
- b. Foundation Details
- c. Elevation Views - Elevation Certificate due after slab inspection,
- d. Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
- e. Truss layout
- f. Vertical Wall Sections (one detail for each wall that is different)
- g. Fireplace drawing: If prefabricated submit manufacturers data

ADDITIONAL Required Documents are:

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

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID: LP
RMSEL-1

DATE (MM/DD/YY)
06/27/00

PRODUCER

R.V. Johnson Agency, Inc.
2041 SE Ocean Blvd
Stuart FL 34996

FILE

Edmund R. Dumond
Phone No. 561-287-3366 Fax No. 561-287-4439

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

COMPANIES AFFORDING COVERAGE

COMPANY A Southern Owners Insurance

COMPANY B Z C Insurance Company

COMPANY C

COMPANY D

RECEIVED
JUN 28 2000
BY: *[Signature]* (fax)

FILE *permit*

COPY

R-M-S Electric Inc
1501 Decker Ave #113
Stuart FL 34994

COVERAGES:

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUP <input type="checkbox"/> OWNERS & CONTRACTORS PROT	20583702	02/08/00	02/08/01	GENERAL AGGREGATE \$ 2,000,000
	PRODUCTS - COMPROP AGG \$ 2,000,000				
	PERSONAL & ADV INJURY \$ 1,000,000				
	EACH OCCURRENCE \$ 1,000,000				
	FIRE DAMAGE (Any one fire) \$ 100,000				
	MED EXP (Any one person) \$ 10000				
	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				BODILY INJURY/ (Per person) \$ BODILY INJURY/ (Per accident) \$ PROPERTY DAMAGE \$	
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EACH ACCIDENT \$ AGGREGATE \$	
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY B THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE <input type="checkbox"/> INCL <input checked="" type="checkbox"/> EXCL	19738504000	03/01/00	03/01/01	WC STATUTORY LIMITS OTH EP EL EACH ACCIDENT \$ 100,000 EL DISEASE - POLICY LIMIT \$ 500,000 EL DISEASE - EA EMPLOYEE \$ 100,000	
OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

30 days notice of cancellation for workers compensation coverage.

CERTIFICATE HOLDER

SEWAL01

TOWN OF SEWALLS POINT
1 SOUTH SEWALLS PT RD
STUART FL 34996

CANCELLATION

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

[Signature]



STATE OF FLORIDA

AC# 5235844

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

ER -0011469 07/29/1998 98900369

REGISTERED ELECTRICAL CONTRACTOR
BRAKENRICH, RICK L
RMS ELECTRIC INC
(INDIVIDUAL MUST MEET ALL LOCAL
COMPETENCY REQUIREMENTS PRIOR TO
CONTRACTING IN ANY AREA)

HAS REGISTERED under the provisions of Ch. 489 FS.

Expiration Date: AUG 31, 2000

MARTIN COUNTY CONTRACTORS
CERTIFICATE OF COMPETENCY
BRAKENRICH, RICK L
RMS ELECTRIC INC
1501 DECKER AVE #118
STUART FL 34994

EXPIRES SEPTEMBER 30, 2000

AUDIT CONTROL NUMBER 35799

CERTIFICATE NUMBER ME00225

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ~~25 Feb~~, 2000;

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4996	Villa	electrical	Partial	as late
S (4)	24 S.S.P. Rd. RMR Electric	change	BG.	as possible
		OK FOR POWER	Will Re-check	Fri 7-7:30
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4965	Danielson	service	OK	
S (3A)	161 S. River Rd. D. Miller	change	BG.	
	SPUR & KILLER REEF.	SUB PN 4967		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4965	Danielson	s/c pad	OK	REVISED DUE TO CONC
S (3B)	161 S. River Rd. D. Miller		BG.	Add wall on
	(Will bring revised plan to ED. Arnold)			Both Ends.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4899	KOHLER	PLUMBING/PIPING	OK	
S (1)	19 S. VIA LUCINDIA CHALLENGER POOLS		BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4984	WILBER	T/T & MTL.	Reject	with Fee.
S (2)	3 MIDDLE RD. PACIFIC RFG.		BG.	Spoke with Re
				No Ladder on
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS

OTHER: T/R 19 CASTLE HILL WAY; DENMARK/RIAN/PALM COAST

~~24 S.S.P. Rd. RMR Electric~~

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ~~7-1-00~~, 2000; Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4997	Schecodnic	final fence	Passed	
✓ ①	1 River Crest United Court		BG	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4975	stenhoj	steel -		NO FORMBOARD SURVEY - REQUIRED
✗	106 Hillcrest	pool	Cancel	Called & advised needs survey
	POOLS BY ADDRESS 692-7946 ← call contractor		9:05 AM	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4894	Braunstein	final	Reject	No one at home
✓ ②	11 N. River TROPIC MARINE	dock (Two Large Dogs)	BG	GATE HAS LOCK ON IT. Can't get in
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4993	Reilly	shutters -	OK	HAS SOME EXISTING
✓ ⑦	78 S. Sewall's Tr. Coast Home Imp.	final	BG	Shutters NOT APPROVED
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4994	Christie	shutters -	OK	
✓ ⑥	103 S. Sewall's Tr. Coast Home Imp.	final	BG	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4996	Villa	final	OK	
✓ ⑨	24 Sewall's RMR Electric	electrical	BG	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4691	Wattles	temp. el.	OK	AC ONLY -
✓ ⑧	20 N. Ridgeview	hook-up	BG	Took keys to office.

OTHER: TR 19 CASTLE HILL DEBARKER PARK PALM COAST OK 1 ✓
 9 RIVERVIEW WINTER SPAIN'S OK 2 ✓
 20 PALM RD PALM BEACH MONTE'S OK 3 ✓
 INSPECTOR (Name/Signature): 35 W HIGHT POWT KING SHANE TREE OK 4 ✓

7053

DOCK REPAIR

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 11/12/04

BUILDING PERMIT NO. 7053

Building to be erected for VILLA

Type of Permit REPAIR DOCK

Applied for by HARBOR BAY MARINE (Contractor)

Building Fee _____

Subdivision MIRAMAR Lot 9 Block _____

Radon Fee _____

Address 24 S. Sewall's Pt Rd

Impact Fee N/C

Type of structure SFR

A/C Fee HURRICANE

Parcel Control Number:
0138410090000009040000

Electrical Fee DAMAGE

Plumbing Fee _____

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

Total Construction Cost \$ 20,000

TOTAL Fees _____

Signed _____
Applicant

Signed Gore Sumner
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	_____

part 1 of 2

Date: 10/19/04 Town of Sewall's Point BUILDING PERMIT APPLICATION Permit Number: _____

OWNER/TITLEHOLDER NAME Edmund Virginia Villa Phone (Day) 931-525-3783 (Fax) _____

Job Site Address: 24 S Sewalls Point Rd City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Minamar Lot 9 Parcel Number: 01-38-41-009-000-00090-4

Owner Address (if different): 1963 Mackinac Rd City: Cookeville State: TN Zip: 38506

Description of Work To Be Done: EXISTING DOCK REBUILD

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$20,000

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

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

(If yes, Owner Builder Affidavit must accompany application)

Method of Determining Fair Market Value: _____

CONTRACTOR/Company: HARBOR BAY MARINE Phone: 772-335-7080 Fax: 772-335-7080

Street: 1525 S.E. Cambridge Dr. City: Putnam State: FL Zip: 34950

State Registration Number: _____ State Certification Number: _____ Martin County License Number: SFO-2285

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER _____ Lic.# _____ Phone Number: _____

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

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

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

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

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

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

OWNER OR AGENT SIGNATURE (required) Edmund Virginia Villa

State of Florida, County of: Putnam

This the 19th day of October, 2004

by Edmund + Virginia Villa, who is personally

known to me or produced by Drivers licenses

as Notary Public

My Commission Expires: 8-21-2007

Seal

CONTRACTOR SIGNATURE (required) _____

On State of Florida, County of: _____

This the _____ day of _____, 2004

by _____ who is personally

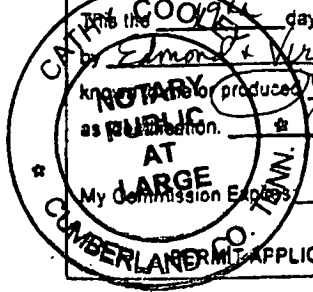
known to me or produced _____

As identification, _____

Notary Public

My Commission Expires: _____

Seal



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

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/26/2004

PRODUCER
A BETTER DEAL INSURANCE
1026 SW BAYSHORE BLVD
FORT ST LUCIE
772-871-1975

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

INSURED HARBOR BAY MARINE INDUSTRIES INC.

1525 SE CAMBRIDGE DR
PORT SAINT LUCIE, FL 34952

INSURERS AFFORDING COVERAGE

INSURER A: CANAL INDEMNITY	NAIC#
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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

FORM	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"/> PROJECT <input type="checkbox"/> LOC	GL 51469	06/23/04	06/23/05	EACH OCCURRENCE \$100,000 DAMAGE TO RENTED PREMISES (Ea occurrence) EXCLUDED MED EXP (Any one person) EXCLUDED PERSONAL & ADV INJURY EXCLUDED GENERAL AGGREGATE \$200,000 PRODUCTS - COMPROP AGG \$100,000	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> MIXED AUTOS <input type="checkbox"/> NON-OWNED AUTOS					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO					AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below					WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER					

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

CERTIFICATE HOLDER

TOWN HALL OF SEWALLS POINT
1 SOUTH SEWALLS POINT RD
SEWALLS POINT FL 34996
FAX 220-4765
ATT BUILDING DEPT.

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 CERTIFICATE OF LIABILITY INSURANCE

PRODUCER (813)637-8877 FAX (813)637-8484
 Insurance Office of America, Inc.
 4915 West Cypress Street
 Suite 100
 Tampa, FL 33607

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

INSURED
 Able Body Labor
 P O Box 4699
 Clearwater, FL 33758

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: American Cas. Co. of Reading PA (CNA)	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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

INSR ADD'L LTR	INSRO	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS												
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Per occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$												
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$												
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$												
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$												
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC247842301	12/01/2003	12/01/2004	<table border="1"> <tr> <td>X</td> <td>WC STATUTORY LIMITS</td> <td>OTHR</td> </tr> <tr> <td></td> <td>E.L. EACH ACCIDENT</td> <td>\$ 1,000,000</td> </tr> <tr> <td></td> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$ 1,000,000</td> </tr> <tr> <td></td> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$ 1,000,000</td> </tr> </table>	X	WC STATUTORY LIMITS	OTHR		E.L. EACH ACCIDENT	\$ 1,000,000		E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000		E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
X	WC STATUTORY LIMITS	OTHR																
	E.L. EACH ACCIDENT	\$ 1,000,000																
	E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000																
	E.L. DISEASE - POLICY LIMIT	\$ 1,000,000																
		OTHER																

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Only those employees rented from Able Body Labor to Harbor Bay Marine Ind., Inc.

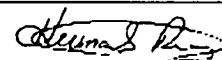
CERTIFICATE HOLDER

CANCELLATION

Town of Sewalls Point
 Attn: Laura
 One S Sewalls Point Rd.
 Sewall's Pt., FL 34996

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.

AUTHORIZED REPRESENTATIVE
 Herman Peery/MARGO





Martin County Building Department

2401 SE Monterey Road

Stuart, FL 34996

(772) 288-5482

Fax (772) 288-5911

SZAFRANSKI, SCOTT A
HARBOR BAY MARINE IND INC
1525 SE CAMBRIDE DR
PORT ST LUCIE, FL 34952

NOTICE TO ALL CONTRACTORS

PLEASE BE ADVISED THAT MARTIN COUNTY, FLORIDA SECTION 43.42 REQUIRES COMPLIANCE WITH THE FOLLOWING EXERPT FROM THE GENERAL ORDINANCES OF THE MARTIN COUNTY CODE:

PROHIBITED ACTIVITIES:

43.42 R Advertising contracting work in any advertisement to the public in a newspaper or telephone directory without including in the advertisement the number of the contractor license issued to the person or business being advertised.

43.42 S Operating any commercial vehicle in the course of conducting the practice of contracting that fails to display the contractor license number of the contractor.

If you have any questions relating to the information in this letter , please contact the Martin County Contractor's Licensing Division of the Martin County Building Department.



MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency

MARINE CONTRACTOR

License Number SP02985 Expires: 30-SEP-05

SZAFRANSKI, SCOTT A
HARBOR BAY MARINE IND INC
1525 SE CAMBRIDE DR
PORT ST LUCIE, FL 34952

PERMIT # _____

TAX FOLIO # 01-32-41-009-000-00090-4

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):

Miramar Lot 9 on 45 Seward's Point Rd.

GENERAL DESCRIPTION OF IMPROVEMENT:

existing dock rebuild; screen

*project
enclosure
Fence*

OWNER: Edmund & Virginia Villa

ADDRESS: 1963 Mackie Rd, Cookeville, TN 38506

PHONE #: 931-525-3783

FAX #: _____

CONTRACTOR: Harbor Bay Marine

ADDRESS: 1525 SE Cambridge Dr. Port St Lucie FL 34952

PHONE #: 772-335-7080

FAX #: 772-335-7080

SURETY COMPANY (IF ANY)

ADDRESS: _____

PHONE #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____



INSTR # 1787273
OR BK 01949 PG 0616
RECORDED 10/22/2004 11:48:55 AM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY T Copus (asst mgr)

*T. Copus
10-22-04*

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: _____

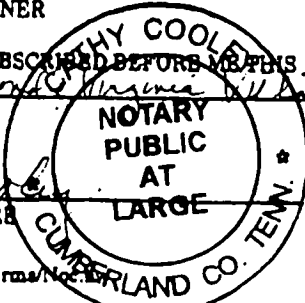
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

Edmund Villa & Virginia Villa
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 19th DAY OF October

19 2004 BY Edmund & Virginia Villa

Carly Coole
NOTARY SIGNATURE



OR

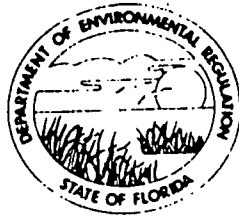
PERSONALLY KNOWN
PRODUCED ID _____
TYPE OF ID Drivers Lic

STATE OF FLORIDA

DEPARTMENT OF ENVIRONMENTAL REGULATION

SOUTHEAST FLORIDA DISTRICT
BRANCH OFFICE

2745 SOUTHEAST MORNINGSIDES BOULEVARD
PORT ST. LUCIE, FLORIDA 33452



BOB GRAHAM
GOVERNOR

VICTORIA J. TSCHINKEL
SECRETARY

PERMITTEE:

Edmond Villa
24 South Sewall's Point Road
Stuart, Florida 33494

I.D. Number: 5143P899978

Permit/Certification Number: 4300899978

Date of Issue: October 7, 1985

Expiration Date: October 7, 1987

County: Martin

Latitude/Longitude: 27°11'56"/80°11'54"

Section/Township/Range: 1/38S/41E

Project: Private Dock

This permit is issued under the provisions of Chapter(s) 403, Florida Statutes, and Florida Administrative Code Rule(s) 17-3, 17-4 and 17-12. The above named permittee is hereby authorized to perform the work or operate the facility 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 and specifically described as follows:

TO CONSTRUCT:

A 193 ft. by 3 1/2 ft. private dock with a 10 ft. by 5 ft. platform to an existing 95 ft. by 5 ft. dock.

IN ACCORDANCE WITH:

The five (5) stamped drawings which are attached and a part hereof and application DER Form 17-1.203(1) dated April 11, 1984 and signed by Edmond Villa. (not attached)

LOCATION:

24 Sewall's Point Road, Indian River, Class III Waters, Section 1, Township 38 South, Range 41 East, Sewall's Point, Martin County.

SUBJECT TO:

GENERAL CONDITIONS one (1) through fifteen (15) and SPECIFIC CONDITIONS one (1) through twelve (12).



DEPARTMENT OF THE ARMY

SOUTH FLORIDA AREA OFC. JACKSONVILLE DISTRICT, CORPS OF ENGINEERS

P. O. BOX 1327

CLEWISTON, FLORIDA 33440-1327

December 9, 1985

REPLY TO
ATTENTION OF

Regulatory Section
Miami
85LP30143

Mr. Edmond Villa
c/o HI-TIDE MARINE CONSTRUCTION, Inc.
3191 SE Waaler Street
Stuart, Florida 33497

Dear Mr. Villa:

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 3 March 1899, (33 U.S.C. § 403), you are authorized to:

extend an existing dock 40 by 3 feet wide, 158 by 3.5 feet wide with a 10 by 5 foot L-end in the Indian River at 24 South Sewall's Point Road, Stuart, in Section 1, Township 38 South, Range 41 East, Martin County, Florida,

in accordance with the enclosed plans and conditions which are incorporated in, and made a part of, the permit. We have no evidence that a state permit has been issued for the work, and no work may begin until their requirements are met.

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:

1. The date of commencement of work (mail enclosed card),
2. The dates of work suspensions and resumptions, if work is suspended over a week, and
3. The date of final completion.

If the work authorized is not completed on or before 9 December 1990, this authorization, if not previously revoked or specifically extended, shall cease and be null and void.

BY AUTHORITY OF THE SECRETARY OF THE ARMY:

COPY

for *Michael Clayton*
Charles T. Myers III
Colonel, Corps of Engineers
District Engineer

Enclosures:
Notice of Authorization
Commencement Card
Plans and Conditions
Area Office Map

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12/9, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7892	TEDESCO	Pre-Demwall	FAIL	
5	18 N. RIVER RD	V.B. PLLC	PASS	
	O/B			INSPECTOR: <i>OM</i>
7150	TEDESCO	FINAL FENCE	PASS	CLOSE
5	18 N. RIVER RD			
	O/B			INSPECTOR: <i>OM</i>
7842	ZIEGLER	IN PROG ROOF	—	CANCEL —
2	71 S. RIVER RD			
	ALL AMERICAN			INSPECTOR: <i>OM</i>
7053	MORROW	FINAL DOOR	PASS	CLOSE
1	24 S. SEWALLS Pt			
	O/B			INSPECTOR: <i>OM</i>
7643	MERRILL	FINAL DEMWALL REPAIR STUCCO & RECEPTACLES	FAIL	
4	24 FIELDWAY			
	O/B			INSPECTOR: <i>OM</i>
7808	MERRILL	FINAL ROOF	PASS	CLOSE
4	24 FIELDWAY			
	O/B			INSPECTOR: <i>OM</i>
7913	MORROW	Pre-Demwall	FAIL	
1	24 S. SEWALLS Pt			
	O/B			INSPECTOR: <i>OM</i>

OTHER: _____

7913

DRYWALL

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 11-28-05

BUILDING PERMIT NO. 7913

Building to be erected for MORROW

Type of Permit REPAIR/REP. DEMOLITION

Applied for by O/B

(Contractor) Building Fee _____

Subdivision MIRAMAR Lot 9 Block _____

Radon Fee _____

Address 24 S. SEWALL'S PT RD

Impact Fee _____

Type of structure SR

A/C Fee N/C

Parcel Control Number:

138410090000009040000

Electrical Fee HURRICANE DAMAGE

Plumbing Fee _____

Amount Paid N/C

Check # _____ Cash _____

Other Fees (_____)

Total Construction Cost \$ 1600

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 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
11/23/05

Town of Sewall's Point
BUILDING PERMIT APPLICATION

631-4081 cell

Permit Number: _____

Date: _____

OWNER/TITLEHOLDER NAME Lori Perry-Morrow Phone (Day) 781-5109 (Fax) _____

Job Site Address: 24 S. Sewell's Point City: _____ State: _____ Zip: _____

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

Owner Address (if different): 695 SE St Lucie City: Stuart State: FL Zip: 34996

Description of Work To Be Done: Repair Drywall - Replace Drywall

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 1,600
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

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

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

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

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

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER _____ Lic.# _____ Phone Number: _____

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

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

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

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

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

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

OWNER OR AGENT SIGNATURE (required)
Lori Perry-Morrow
State of Florida, County of: Martin
This the 23 day of November, 2005
by Lori Perry-Morrow who is personally
known to me or produced
as identification. Natalie L. Chartley

Notary Public
Natalie L. Chartley

My Commission Expires: _____
My Commission DD150082

CONTRACTOR SIGNATURE (required)

On State of Florida, County of: _____

This the _____ day of _____, 2005

by _____ who is personally

known to me or produced _____

As identification. _____
Notary Public

My Commission Expires: _____
Seal

Natalie L. Chartley
My Commission DD150082
Expires September 23, 2006



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

TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT
(To be submitted if permit is to be pulled by Owner/Builder)

DISCLOSURE STATEMENT

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

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

Name: Lori Perry-Morgan Date: 11/23/05

Signature: 

Address: 24 S. Sewell's

City & State: Stuart Florida 34996

Permit No. _____



7913

TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 24. S.S.P.R.

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.

FIXE DRY WALL

INSTALL EXTENSIONS ON ALL JUNCTION BOXES -

SECURE CABLES WITHIN 12" OF JUNCTION BOXES

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

DATE: 12/9

OK
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12/9, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7892	TEDESCO	PRE DEM WALL	FAIL	
5	18 N. RIVER RD	V.I.B. PLB.	PASS	
	O/B			INSPECTOR: <i>OM</i>
7150	TEDESCO	FINAL FENCE	PASS	CLOSE
5	18 N. RIVER RD			
	O/B			INSPECTOR: <i>OM</i>
7842	ZIEGLER	IN PROG ROOF	—	CANCEL —
2	71 S. RIVER RD			
	AN AMERICAN			INSPECTOR: <i>OM</i>
7053	MORROW	FINAL DOOR	PASS	CLOSE
1	24 S. SEWALLS Pt			
	O/B			INSPECTOR: <i>OM</i>
7643	MERRILL	FINAL DEM WALL REPAIR STUCCO & RECEPTACLES	FAIL	
4	24 FIELDWAY			
	O/B			INSPECTOR: <i>OM</i>
7808	MERRILL	FINAL ROOF	PASS	CLOSE
4	24 FIELDWAY			
	O/B			INSPECTOR: <i>OM</i>
7913	MORROW	PRE DEM WALL	FAIL	
1	24 S. SEWALLS Pt			
	O/B			INSPECTOR: <i>OM</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri DEC 21, 2005

Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7957	MORRIS	FOOTER POLE	PASS	
1	120 HILLCREST O/B	* FIRST PLEASE		INSPECTOR:
7949	MARTIN	FINAL FENCE	FAIL	CLOSE
11	25 PERIWINKLE STUART FENCE		PASS	#40 INSPECTOR:
7413	HAYNES	FINAL GAS	FAIL	
3	6 PALM ROAD AMERIGAS			INSPECTOR:
7163	HAYNES	FINAL INT REMODEL	PASS	CLOSE
3	6 PALM ROAD O/B			INSPECTOR:
7913	MORROW	PRE-DRYWALL	PASS	
8	24 S. SEWALLS PT O/B			INSPECTOR:
7380	BONIFACE	TUB	PASS	
7	63 S. RIVER RD WILSON BLDGS			INSPECTOR:
7777	CATHEM	ROOF SHEATHING	PASS	
12	47 S. SEWALLS PT DEERWOOD HOMES			INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/20, 2006

Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7297	MARTIN	FINAL ROOF	FAIL	
2	23 ISLAND RD PACIFIC ROOFING			INSPECTOR: <i>[Signature]</i>
7913	MORROW	REP/REP DECK	PASS	CLOSE
1	24. S. SEWALLS Pt O/B	FINAL		INSPECTOR: <i>[Signature]</i>
7338	McCormick	STRAPPING	FAIL	
7	59 N. RIVER RD PINE ORCHARD	TRUSS ENG		INSPECTOR: <i>[Signature]</i>
8070	ENGLEST	FINAL GARAGE DOOR	PASS	CLOSE
4	23 LANTANA O/B			INSPECTOR: <i>[Signature]</i>
7993	GIACHINO	TIE BEAM	FAIL	
6	11 WENDY LA SEAGATE BROS			INSPECTOR: <i>[Signature]</i>
6972	ELDER	FINAL STR	CANCEL	
4	4 MARGUERITA OB			INSPECTOR: <i>[Signature]</i>
8065	LAPIKAS	FINAL SCR. ENCL	PASS	CLOSE
5	3 INDIA WOOD PKWY SULLIVAN DESIGN			INSPECTOR: <i>[Signature]</i>
OTHER:	DONIFACE	TIE BACK	PASS	
8103	63. S. RIVER RD BLUE WATER MAR.			<i>[Signature]</i>

7961

FENCE

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 12-14-05

BUILDING PERMIT NO. 7961

Building to be erected for MORROW

Type of Permit FENCE

Applied for by SWART FENCE (Contractor)

Building Fee 30.00

Subdivision MIRAMAR Lot 9 Block _____

Radon Fee _____

Address 24 S. SEWALL'S POINT RD

Impact Fee _____

Type of structure FENCE

A/C Fee _____

Parcel Control Number:

0138410090000009040000

Electrical Fee _____

Plumbing Fee _____

Amount Paid 30.00 Check # 5136 Cash _____

Other Fees (_____)

Total Construction Cost \$ 4448.00

Roofing Fee _____

TOTAL Fees 30.00

Signed Janis Fordin
Applicant

Signed Gene Summers
Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

RECEIVED
12/14/05

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 12-13-05

Permit Number: _____

OWNER/TITLEHOLDER NAME: MARROW, WM. J.; LORI A. Phone (Day) 781-5109 (Fax) _____

Job Site Address: 24 SOUTH SEWALL'S PT. City: _____ State: FLA. Zip: 34996

Legal Desc. Property (Subd/Lot/Block) "MIRAMAR" LOT-9 Parcel Number: 01-38-41-009-000-00090-4

Owner Address (if different): 695 SE ST. LUCIE BLVD. City: STUART State: FLA. Zip: 34996

Description of Work To Be Done: INSTALL WHITE 48" ALUM. FENCE + GATES

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 44485
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: STUART FENCE CO Phone: 772-288-1151 Fax: 772-288-3035

Street: P.O. Bx 2636 City: STUART State: FLA. Zip: 34995

State Registration Number: _____ State Certification Number: _____ Martin County License Number: CFE-3584

SUBCONTRACTOR INFORMATION:

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

ARCHITECT _____ Lic.#: _____ Phone Number: _____
Street: _____ City: _____ State: _____ Zip: _____

ENGINEER _____ Lic.# _____ Phone Number: _____
Street: _____ City: _____ State: _____ Zip: _____

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

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)
Lori Marrow

State of Florida, County of: MARTIN

This the 12 day of DEC 2005
by LORI MARROW

known to me or produced as identification. DL

Notary Public Seal
Janis L. Loudin
Commission # DD119654
Expires May 21, 2006
Bonded Thru Atlantic Bonding Co., Inc.

CONTRACTOR SIGNATURE (required)
Chester Richmond

On State of Florida, County of: MARTIN

This the 13 day of NOV 2005
by CHESTER RICHMOND who is personally

known to me or produced as identification. Janis L. Loudin

Notary Public Seal
Janis L. Loudin
Commission # DD119654
Expires May 21, 2006
Bonded Thru Atlantic Bonding Co., Inc.

My Commission Expires: _____
Seal

My Commission Expires: _____
Seal

ACORD. CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)

8/19/2005

PRODUCER
MARIE HOWELL INSURANCE SERVICES
 3215 S US 1 SUITE B-201
 FORT PIERCE FL 34982
 772-461-4733

INSURED
STUART FENCE COMPANY, INC.
 CHESTER J. RICHMOND & JOHN JAMASON
 P O B 2636
 STUART, FL 34995

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	NAIC#
INSURER A: WESTERN WORLD	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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

INSR LTR	INSTR. NO.	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMSMADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO. <input type="checkbox"/> LOC	NPP0835360	8-18-05	8-18-06	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: FA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUS: <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISFABE - POLICY LIMIT \$
		OTHER				

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

FENCE ERECTION

CERTIFICATE HOLDER

TOWN OF SEWELL'S POINT
 1 S. SEWELL'S POINT ROAD
 SEWELL'S POINT, FL 34996

FAX# 772-220-4765
 ATTN: LORA

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ 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
M. Howell

Producer: Lion Insurance Company
2739 U S Highway 19 N.
Holiday, FL 34691
Phone: 727-938-5562 Fax: 727-937-2138

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

NAIC #

Insured: South East Personnel Leasing
2739 U.S. Highway 19 N.
Holiday, FL 34691
Phone : (727)938-5562

Insurer A:	Lion Insurance Company	
Insurer B:		
Insurer C:		
Insurer D:		
Insurer E:		

Coverages

The policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of such policies. Aggregate limits shown may have been reduced by paid claims.

INSR LTR	ADDL INSRD	Type of 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"/> Occur <hr/> General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence	\$
						Damage to rented premises (EA occurrence)	\$
						Med Exp	\$
						Personal Adv Injury	\$
						General Aggregate	\$
						Products - Comp/Op Agg	\$
		AUTOMOBILE LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident)	\$
						Bodily Injury (Per Person)	\$
						Bodily Injury (Per Accident)	\$
						Property Damage (Per Accident)	\$
		GARAGE LIABILITY <input type="checkbox"/> Any Auto				Auto Only - Ea Accident	\$
						Other Than EA Acc.	\$
						Autos Only AGG.	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made <input type="checkbox"/> Deductible <input type="checkbox"/> Retention				Each Occurrence	
						Aggregate	
A		Workers Compensation and Employers' Liability Any proprietor/partner/executive officer/member excluded? If Yes, describe under special provisions below.	WC 71949	01/01/2005	01/01/2006	X WC Statutory Limits	OTH-ER
						E.L. Each Accident	\$1000000
						E.L. Disease - Ea Employee	\$1000000
						E.L. Disease - Policy Limits	\$1000000

Other 3465485
Stuart Fence Company

COVERAGE APPLIES ONLY TO THOSE EMPLOYEES LEASED, NOT TO SUBCONTRACTORS.

ADD ON DATE: 5/10/2004
 Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions:
COVERAGE APPLIES ONLY IN THE STATE OF FLORIDA TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF Stuart Fence Company * FAX: 772-288-3035 & 772-220-4765 / ISSUE: 10-21-04 (PDC)

CERTIFICATE HOLDER

CANCELLATION

TOWN OF SEWALLS POINT
ATTN: LAURA
1 S SEWALLS POINT RD.
SEWALLS POINT

FL 34996

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

John L. ...

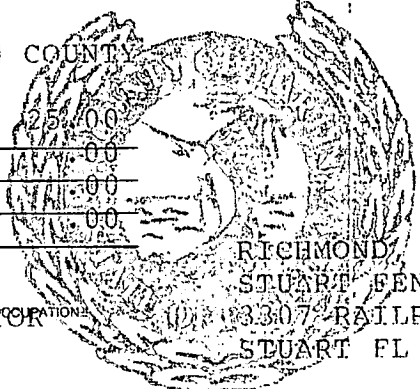
2005-2006 **MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE**

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(772) 288-5604

LICENSE 2004-518-003 CERT CFE3584
PHONE (772) 519-6263 SIC NO 235990
LOCATION: 3307 RAILROAD AVE STU

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	<u>.00</u>	LIC. FEE \$	<u>25.00</u>
\$	<u>.00</u>	PENALTY \$	<u>0.00</u>
\$	<u>.00</u>	COL. FEE \$	<u>0.00</u>
\$	<u>.00</u>	TRANSFER \$	<u>0.00</u>
TOTAL			<u>25.00</u>



RICHMOND, CHESTER - QUALIFIED
STUART FENCE COMPANY INC
3307 RAILROAD AVE
STUART FL 34997 USA

RECEIPT OF PAYMENT
 6810
 LARRY C. O'STEEN
 99 08/23/2005 OCCI NORMAL
 20045180003000
 0220050023006030CK \$25.00

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

FENCE ERECTION CONTRACTOR

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

23 AUGUST 05
DAY OF 2006
AND ENDING SEPTEMBER 30.



**MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency**

FENCE ERECTION

License Number CFE3584 Expires: 30-SEP-06

RICHMOND, CHESTER J III
STUART FENCE & WIRE
3307 RAILROAD AVE
STUART, FL 34997

Permit No. _____

Tax Folio No. 0132 41 009 000
000 90-4

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.

1. Legal description of property (include street address, if available): 24 S. Sewalls Pt Rd
MIRAMAR LOT 9

2. General description of improvement: INSTALL pool fence

3. Owner information - name and address: LOAN MORROW
695 SE ST LUCIE BLVD, STUART, FL 34996

Interest in property: _____

Name and address of fee simple titleholder (if other than Owner): _____

4. Contractor - name and address: STUART FENCE CO
PO BOX 2636 STUART, FL 34995

Phone number 288 1571 STATE OF FLORIDA Fax number 288 3035
MARTIN COUNTY

5. Surety - name and address: _____

Phone number _____ Fax number _____

6. Lender - name and address: _____

BY Marsha Ewing D.C.
DATE 12-7-05

Phone number _____ Fax number _____

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

Phone number _____ Fax number _____

8. In addition to himself, Owner designates _____ of _____

_____ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

Phone number _____ Fax number _____

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

Janis L. Loudin
Signature of Owner

Sworn to and subscribed before me this 12 day of DEC, 2005

Janis L. Loudin
Notary Public

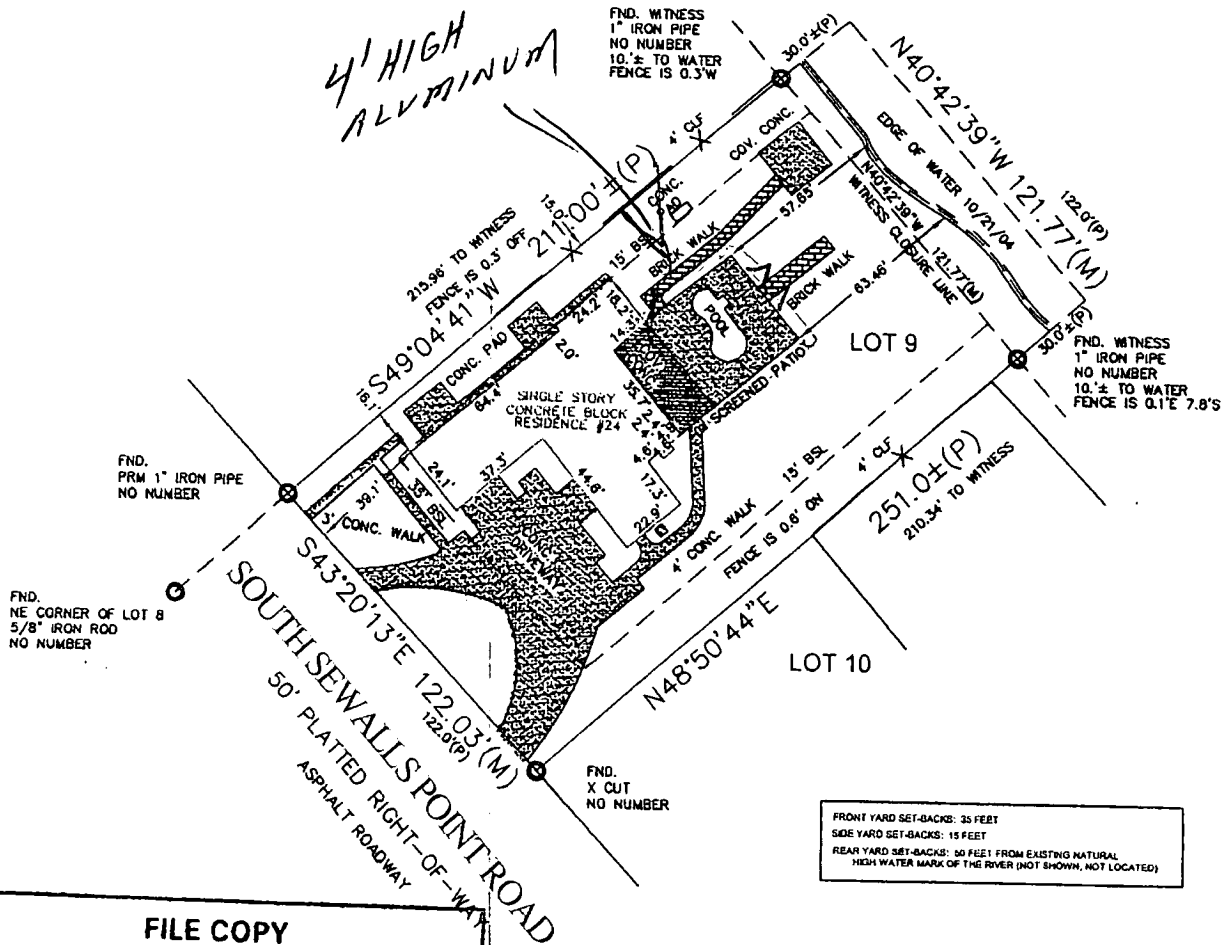
My Commission Expires: _____

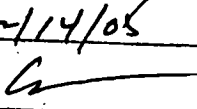


Janis L. Loudin
Commission # DD119654
Expires May 21, 2006
Bonded Thru
Atlantic Bonding Co., Inc.

INSTR # 1895853 OR BK 02092 PG 0835 RECD 12/14/2005 10:00:28 AM
Pg 0835: (1pg)
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S. Phoenix

BOUNDARY SURVEY



FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE: 12/14/05

BUILDING OFFICIAL
 Gene Simmons

ADDRESS
 24 SOUTH SEWALLS POINT ROAD
 STUART, FLORIDA 34996

RLS #:	04-10-0775
CLIENT #:	1071-646826
FIELD DATE:	10/21/04
DRAFTER:	SJL
APPROVED:	GKB
SCALE:	1" = 60 FEET

LEGAL DESCRIPTION: (AS FURNISHED)

LOT 9, MIRAMAR, ACCORDING TO THE PLAT THEROF,
 AS RECORDED IN PLAT BOOK 3, PAGE 111, OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

BASIS OF BEARINGS: BEARINGS SHOWN HEREON ARE BASED ON THE SOUTHERLY LINE OF LOT 9 BEING N 48°50'44" E, ASSUMED.

LIST OF POSSIBLE ENCROACHMENTS:

SURVEYOR INFORMATION:



PHONE: (407) 428-7179 FAX: (407) 428-8188

COORDINATED BY:

RESIDENTIAL
LAND SERVICES, INC.
 621 24TH AVENUE S.W.
 NORMAN, OKLAHOMA 73069
 FAX: (405) 701-1027
 PHONE: (405) 701-1100
 WWW.RLSNOW.COM

PREPARED FOR:



PREPARED FOR:

SURVEYOR FILE NUMBER:

CERTIFIED TO: (AS FURNISHED)

LORI A. & WILLIAM J. PERRY-MORROW
 GULFSTREAM BUSINESS BANK
 FIRST AMERICAN TITLE INSURANCE COMPANY

LEGEND

- A/C: AIR CONDITIONER
- BLDG.: BUILDING
- (C): CALCULATED
- C.B.: CHORD BEARING
- CBW: CONCRETE BLOCK WALL
- C: CENTERLINE
- C.N.A.: CORNER NOT ACCESSIBLE
- CONC.: CONCRETE
- COV: COVERED
- C/S: CONCRETE SLAB
- (D): DESCRIPTION
- OHU: OVERHEAD UTILITY LINE
- (P): PLATTED
- P.C.: POINT OF CURVATURE
- P.C.P.: PERMANENT CONTROL POINT
- P.I.: POINT OF INTERSECTION
- P.O.B.: POINT OF BEGINNING
- P.O.C.: POINT OF COMMENCEMENT
- P.P.: POWER POLE
- P.R.C.: POINT OF REVERSE CURVATURE
- P.R.M.: PERMANENT REFERENCE

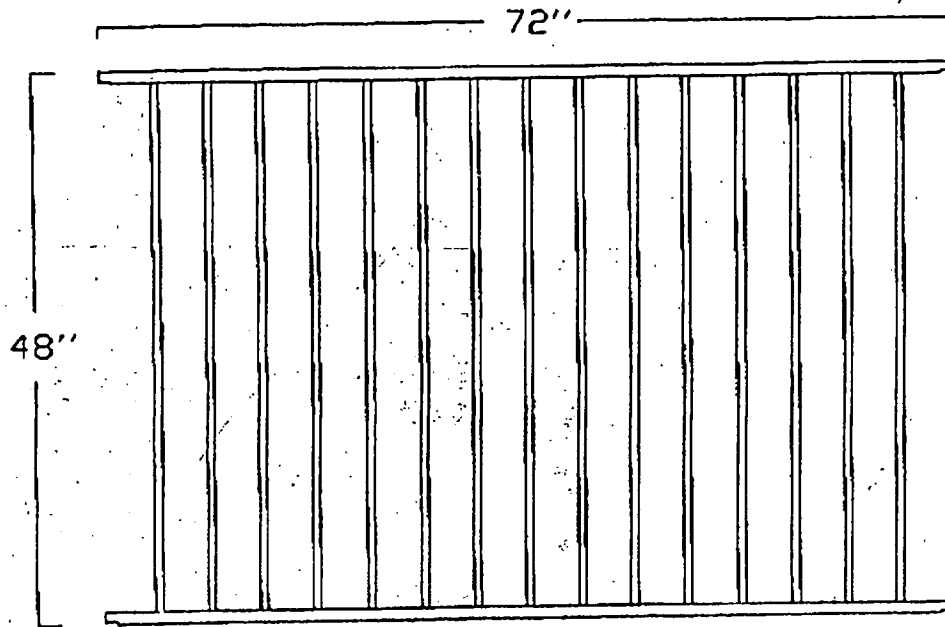
SURVEYOR'S CERTIFICATE

I HEREBY CERTIFY THAT THE SURVEY REPRESENTED HEREON MEETS THE MINIMUM TECHNICAL STANDARDS FOR LAND SURVEYS IN FLORIDA AS SET FORTH IN CHAPTER 619, 17-6, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO CHAPTER 472.027, FLORIDA STATUTES.

No. 4224

PICKETS: 5/8" SQ. X .050

RAILS: TOP WALL 1 1/16" X .062
SIDE 1" X .072



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/6, 2006 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
796	MORROW	FINAL FENCE	PASS	CLOSE
9	24 S. SEWALLS Pt STUART FENCE			INSPECTOR: <i>[Signature]</i>
7873	NOHEJL	DRY-IN	PASS	
3	26 W. HIGH POINT O/B			INSPECTOR: <i>[Signature]</i>
8077	BUEKARD	DRY-IN	PASS	RE-SCHEDULE FOR 3/8
4	176 S. RIVER RD STUART ROOFING			WEDNESDAY - INSPECTOR: <i>[Signature]</i>
7851	MORAN	ROUGH A/C	PASS	
6	2 PALM ROAD ASSOC. A/C			INSPECTOR: <i>[Signature]</i>
7874	SLATER	SUBSIDING	PASS	
2	4 LAGOON ISLAND CONWAY	ROOF SHEATHING	PASS	INSPECTOR: <i>[Signature]</i>
7338	McCOEMICK	FOOTING	PASS	REAR RETAINING WALLS
1	59 N RIVER PINE ORCHARD			INSPECTOR: <i>[Signature]</i>
	CUMMINAS	STEWART		CANCEL
7	83 S. RIVER RD ELIAS MGT			INSPECTOR: <i>[Signature]</i>

OTHER: 3 MELODY HILL STRUCTURE/TEMP. ISSUED S.W.O.
114 N. S.P.R. POCK. NOW WORK DONE.

8075

RETAINING WALL

REPAIR

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 2/27/06

BUILDING PERMIT NO. 8075

Building to be erected for MORROW

Type of Permit REPAIR + REPLACE RETAINING WALL

Applied for by HARBOR BAY MARINE

(Contractor) Building Fee \$7K & 9.60/1000 = 67.20

Subdivision MICAMAR Lot 9 Block _____

Radon Fee _____

Address 24 S. Sewall's Point Rd

Impact Fee _____

Type of structure Wall

A/C Fee _____

Parcel Control Number:

013841009 0000009040000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 73.92 Check # 3578 Cash _____

Other Fees (10% PR) 6.72

Total Construction Cost \$ 7,000

TOTAL Fees 73.92

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

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 1/27/06

Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: Lori Morrow Phone (Day) 781-5109 (Fax) 463-8344
Job Site Address: 24 S. Sewall's Point Rd. City: Stuart State: FL Zip: 34996
Legal Description of Property: Miramar Lot 9 Parcel Number: 01-38-41-009-000-0090-4
Owner Address (if different): 695 SE St. Lucie Blvd. City: Stuart State: FL Zip: 34996
Description of Work To Be Done: repair/replace 70 linear feet of retaining wall

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

CONTRACTOR/Company: Harbor Bay Marine Phone: 335-7080 Fax: 335-7080
Street: 1525 SE Cambridge Dr City: Pt St. Lucie State: FL Zip: 34952
State Registration Number: _____ State Certification Number: _____ Martin County License Number: SPO-2985

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 7,000.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

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

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

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: _____ Garage: _____ Covered Patios: _____ 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
National Electrical Code: 2002 Florida Energy Code: 2001 Florida Accessibility Code: 2001

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

OWNER OR AGENT SIGNATURE (required) [Signature]
State of Florida, County of: Martin
This the 15 day of August, 2005
by Lon Morrow who is personally known to me or produced as identification.

CONTRACTOR SIGNATURE (required) [Signature]
On State of Florida, County of: Martin
This the 27th day of January, 2006
by SCOTTA SZAFKANSKI who is personally known to me or produced as identification.

Notary Public TERRY SEYFFARTH My Commission Expires: _____
Seal

Notary Public LAURA L. O'BRIEN My Commission Expires: _____
Seal

ACORD CERTIFICATE OF LIABILITY INSURANCE DATE(MMM/DD/YYYY)
06/22/2005


PRODUCER A BETTER DEAL INSURANCE 1026 SW BAYSHORE BLVD PORT ST LUCIE 772-871-5455	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.												
INSURED HARBOR BAY MARINE INDUSTRIES INC 1525 SE CAMBRIDGE DR PORT ST LUCIE, FL 34952	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 80%;">INSURERS AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC#</th> </tr> <tr> <td>INSURER A: CANAL INDEMNITY</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC#	INSURER A: CANAL INDEMNITY		INSURER B:		INSURER C:		INSURER D:		INSURER E:	
INSURERS AFFORDING COVERAGE	NAIC#												
INSURER A: CANAL INDEMNITY													
INSURER B:													
INSURER C:													
INSURER D:													
INSURER E:													

COVERAGES

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

ORSA	ADD'L	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	GL 51469	6/23/04	6/23/06	EACH OCCURRENCE \$300,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$EXCLUDED MED EXP (Any one person) \$EXCLUDED PERSONAL & ADV INJURY \$EXCLUDED GENERAL AGGREGATE \$300,000 PRODUCTS - COMP/OP AGG \$300,000
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (E & accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ ADD \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETARY OR DISCREETIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS <input type="checkbox"/> OYH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

DESCRIPTION OF OPERATIONS/ LOCATIONS/ VEHICLES/ EXCLUSIONS ADDED BY ENDORSEMENT/ SPECIAL PROVISIONS
BUILD AND REPAIR DOCKS AND SEA WALLS

CERTIFICATE HOLDER TOWN OF SEAWALLS POINT 1 SEAWALLS POINT RD SEAWALLS POINT FL 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 <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
--	--



Martin County Building Department

2401 SE Monterey Road

Stuart, FL 34996

(772) 288-5482

Fax (772) 288-5911

SZAFRANSKI, SCOTT A
HARBOR BAY MARINE IND INC
1525 SE CAMBRIDGE DR
PORT ST LUCIE, FL 34952

NOTICE TO ALL CONTRACTORS

PLEASE BE ADVISED THAT MARTIN COUNTY, FLORIDA SECTION 43.42 REQUIRES COMPLIANCE WITH THE FOLLOWING EXERPT FROM THE GENERAL ORDINANCES OF THE MARTIN COUNTY CODE:

PROHIBITED ACTIVITIES:

43.42 R Advertising contracting work in any advertisement to the public in a newspaper or telephone directory without including in the advertisement the number of the contractor license issued to the person or business being advertised.

43.42 S Operating any commercial vehicle in the course of conducting the practice of contracting that fails to display the contractor license number of the contractor.

If you have any questions relating to the information in this letter , please contact the Martin County Contractor's Licensing Division of the Martin County Building Department.



**MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency**

MARINE CONTRACTOR

License Number SP02985 Expires: 30-SEP-07

SZAFRANSKI, SCOTT A
HARBOR BAY MARINE IND INC
1525 SE CAMBRIDGE DR
PORT ST LUCIE, FL 34952

I (1001) 001 1101 01 1000 000 1001 001 0001 01 0000 01 0000 01 0000 01

INSTR # 1796004
 OR BK 01959 PG 2833
 RECORDED 12/02/2004 09:11:54 AM
 MARSHA EWING
 CLERK OF MARTIN COUNTY FLORIDA
 DEED DOC TAX 8,050.00
 RECORDED BY L Wood

Prepared by
 Michelle Blaszkowiak, an employee of
 First American Title Insurance Company
 729 South Federal Highway, Suite 103
 Stuart, Florida 34994
 (772) 286-0850

Return to: Grantee

File No.: 1071-646826

WARRANTY DEED

Made this Nov. 23, of 2004 by and between

Edmund R. Villa and Virginia A. Villa, his wife

whose address is: **1963 Mackie Road, Cookville, TN 38506**
 hereinafter called the "grantor", to

William J. Morrow and Lori A. Morrow, husband and wife

whose post office address is: **695 SE St. Lucie Blvd., Stuart, FL 34996**
 hereinafter called the "grantee":

(Which terms "Grantor" and "Grantee" shall include singular or plural, corporation or individual, and either sex, and shall include heirs, legal representatives, successors and assigns of the same)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in **Martin County, Florida**, to-wit:

Lot 9 of MIRAMAR, according to the Plat thereof as recorded in Plat Book 3, Page(s) 111, of the Public Records of Martin County, Florida.

Parcel Identification Number: **01-38-41-009-000-0009.0-4-0000**

Subject to all reservations, covenants, conditions, restrictions and easements of record and to all applicable zoning ordinances and/or restrictions imposed by governmental authorities, if any.

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

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

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31st of 2004.

In Witness Whereof, the grantor has hereunto set their hand(s) and seal(s) the day and year first above written.

Edmund R. Villa Sr.
Edmund R. Villa Sr.

Virginia A. Villa
Virginia A. Villa

Signed, sealed and delivered in the presence of these witnesses:

Angela C. Bedden
Witness Signature

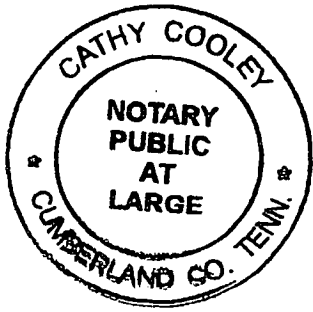
Print Name: Angela C. Bedden

Laura B Bennett
Witness Signature

Print Name: Laura B Bennett

State of Tennessee
County of Putnam

The Foregoing Instrument was Acknowledged before me on Nov 23 2004, by Edmund R. Villa and Virginia A. Villa, his wife who is/are personally known to me or who has/have produced drivers licenses as identification.



Cathy Cooley
NOTARY PUBLIC

Cathy Cooley
Notary Print Name
My Commission Expires: 8-21-2007

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF Florida

COUNTY OF Martin

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

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

Miramar Lot 9, 24 S Sewall's Point Rd, Street

GENERAL DESCRIPTION OF IMPROVEMENT: repair/replace 70 linear feet of retaining wall

OWNER: Lori Marzio

ADDRESS: 695 SE S. Lucie Blvd.

PHONE #: 781-5109

FAX #: 463-8349

CONTRACTOR: Harbor Bay Marine

ADDRESS: 1525 SE Commodore Drive

PHONE #: 335-7080

FAX #: 335-7080

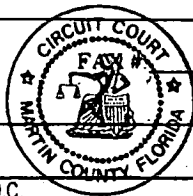
SURETY COMPANY (IF ANY) _____

ADDRESS: STATE OF FLORIDA
MARTIN COUNTY

PHONE # _____

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

BOND AMOUNT: _____



INSTR # 1907213
OR BK 02107 PG 2189
Pg 2189 of 1pg
RECORDED 02/01/2006 10:15:56 AM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY T Conus (asst mgr)

LENDER: _____

BY: MARSHA EWING CLERK
T Conus

D.C.

ADDRESS: _____

DATE: 2/1/06

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.

Lori Marzio

SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 1st DAY OF August

~~192005~~ BY Lori Marzio

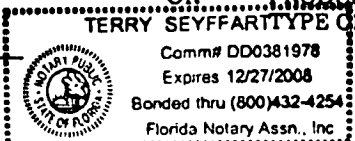
PERSONALLY KNOWN

OR PRODUCED ID _____

TERRY SEYFFAR TYPE OF ID _____

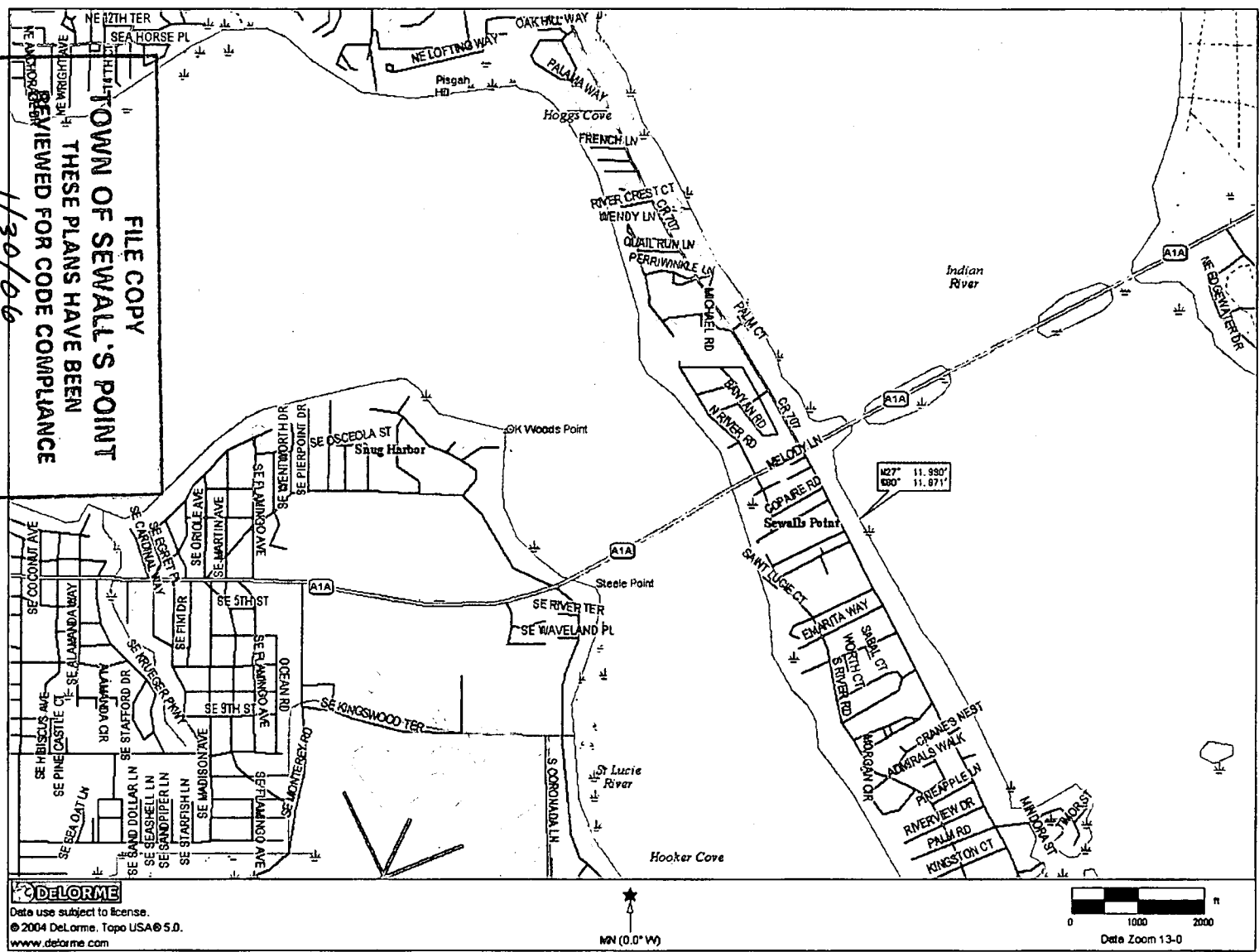
Terry Seyffar

NOTARY SIGNATURE

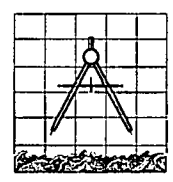


Comm# DD0381978
Expires 12/27/2008
Bonded thru (800)432-4254
Florida Notary Assn., Inc

**REPAIR WORK FOR
HURRICANE DAMAGE**



Lori Morrow
24 S. Sewall's Point Road
Stuart, FL 34996



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

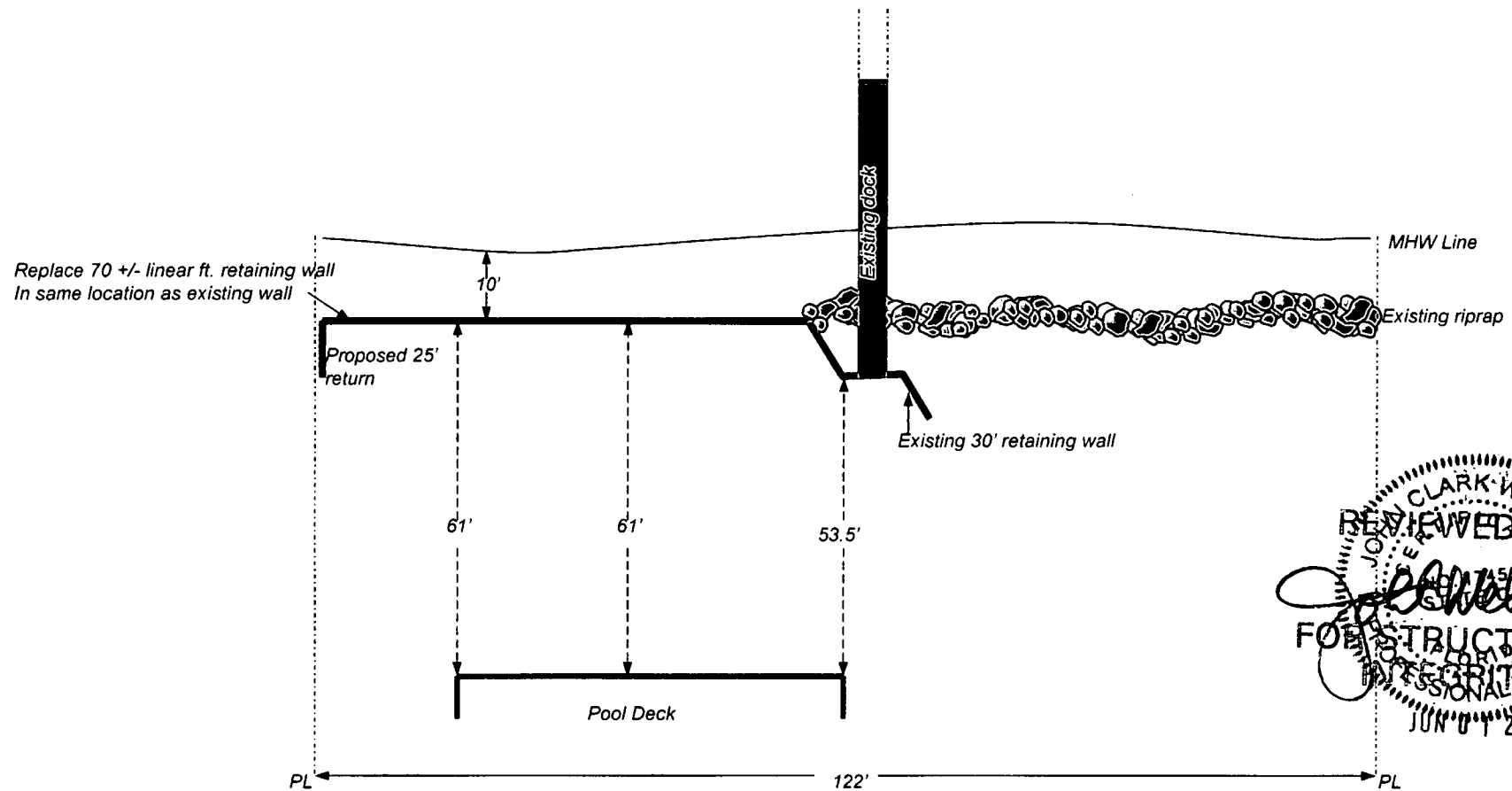
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Sheet 1 of 3



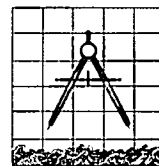
Indian River

Flood/Ebb



REVIEWED BY
JOHN CLARK WEBER
REGISTERED PROFESSIONAL ENGINEER
FOR STRUCTURAL
JUN 01 2005

Lori Morrow
24 S. Sewall's Point Road
Stuart, FL 34996

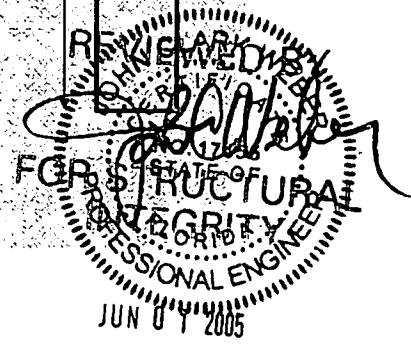
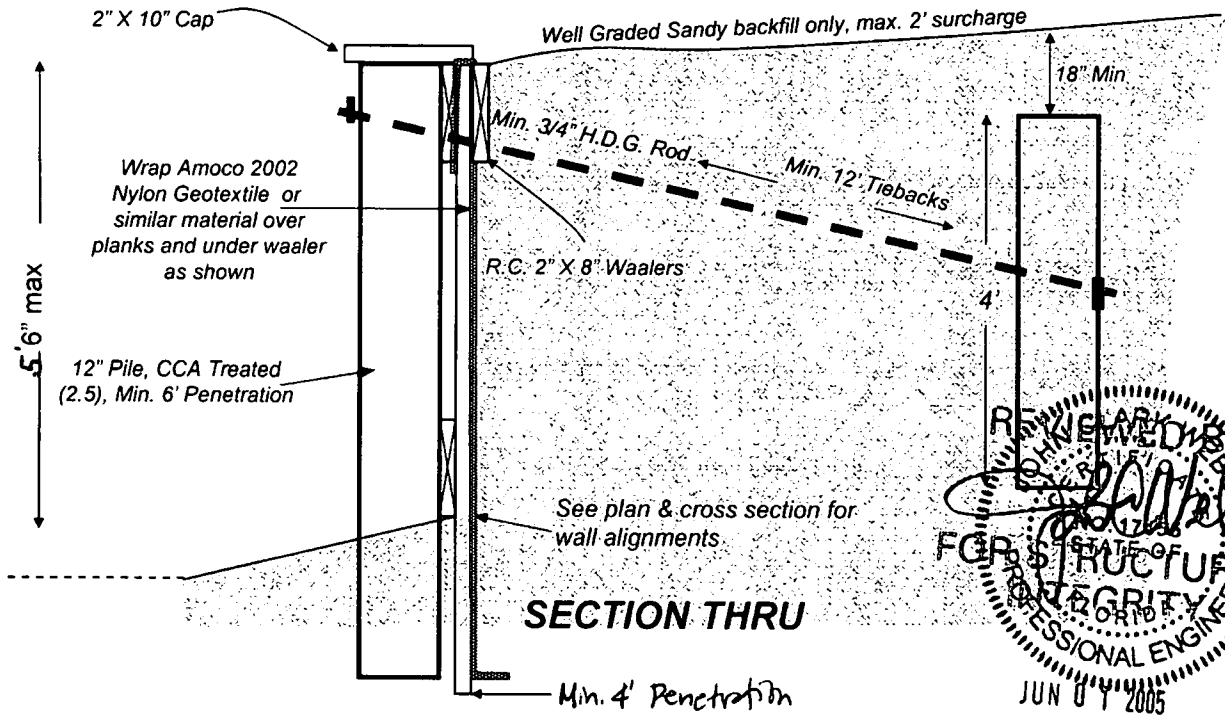
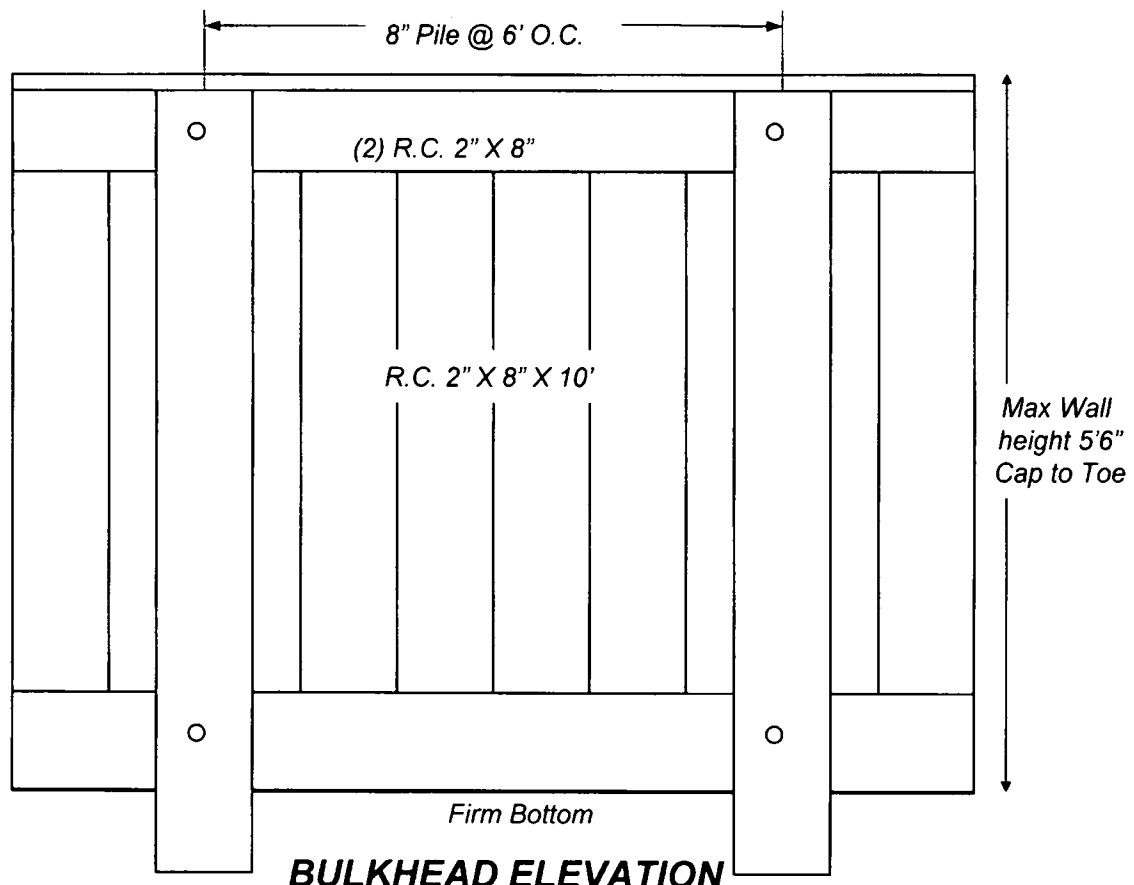


Design & Drawing by: DR
Jemer & Associates, Inc.
Environmental Consulting
110 SW. 5th Street
Stuart, FL 34994
Ph. (772)283-2950/ Fax (772)283-2760

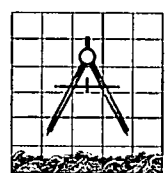
Scale: Dimensioned

Date: 05/05/05

Sheet 2 of 3



Lori Morrow
 24 S. Sewall's Point Road
 Stuart, FL 34996



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

Scale: Shown
 Date: 05/20/05

Sheet 3 of 3

BOUNDARY SURVEY and MEAN HIGH WATER SURVEY

LEGAL DESCRIPTION:

LOT 9, MIRAMAR, ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 3, PAGE 111 OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

SURVEYORS NOTES:

1. NO ATTEMPT WAS MADE BY THIS FIRM TO LOCATE UNDERGROUND UTILITIES ON/OR ADJACENT TO THIS SITE. THE APPROXIMATE LOCATION OF ALL UTILITIES SHOWN HEREON WERE TAKEN FROM AS-BUILT DRAWINGS AND/OR ON-SITE LOCATION AND SHOULD BE VERIFIED BEFORE CONSTRUCTION.
2. NO ATTEMPT WAS MADE BY THIS FIRM TO LOCATE UNDERGROUND FOOTINGS OF BUILDINGS, FENCES OR WALLS ON/OR ADJACENT TO THIS SITE.
3. LANDS SHOWN HEREON WERE SURVEYED WITHOUT BENEFIT OF A TITLE SEARCH.
4. ANGLES AND DISTANCES SHOWN HEREON ARE FLAT AND FIELD MEASUREMENTS.
5. ELEVATIONS INDICATED HEREON ARE IN FEET AND DECIMALS REFERENCE TO NATIONAL GEODETIC VERTICAL DATUM OF 1929.
6. LEGAL DESCRIPTION FURNISHED BY CLIENT.
7. THIS SITE LIES IN FLOOD ZONES 'AE' (BASE 9.0') AND 'VE' (BASE 10.0') AS SCALED AND INTERPOLATED FROM FEMA COMMUNITY PANEL NO. 102164-0154-F, OCTOBER 4, 2002.
8. THE MEAN HIGH WATER SURVEY DEPICTED HEREON COMPLIES WITH CHAPTER 177, PART II, FLORIDA STATUTES AND IS RECORDED IN THE PUBLIC REPOSITORY OF THE FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION, BUREAU OF SURVEYING AND MAPPING AS MEAN HIGH WATER SURVEY FILE NO.
9. SITE AREA: 27663.12 SQUARE FEET OR 0.635 ACRES ± (100%)
TOTAL IMPERVIOUS AREA: 10196.89 SQUARE FEET 0.23 ACRES ± (36.86%)
TOTAL PERVIOUS AREA: 17466.23 SQUARE FEET OR 0.40 ACRES ± (63.14 %)
BUILDING: 4074.80 SQUARE FEET
POOL & PATIO AREA: 1192.85 SQUARE FEET
CONCRETE, PAVER-BRICK & TILE AREA: 4929.24 SQUARE FEET

CERTIFICATIONS:

1. LORI MORROW
2. TOWN OF SEWALL'S POINT

SURVEYORS CERTIFICATION:

I HEREBY CERTIFY THAT THE "SKETCH TO ACCOMPANY LEGAL DESCRIPTION" WAS PREPARED UNDER MY RESPONSIBLE CHARGE AND MEETS THE MINIMUM TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS AND MAPPERS IN CHAPTER 61G17-6, FLORIDA STATUTES, AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER.

Robert Bloomster Jr.

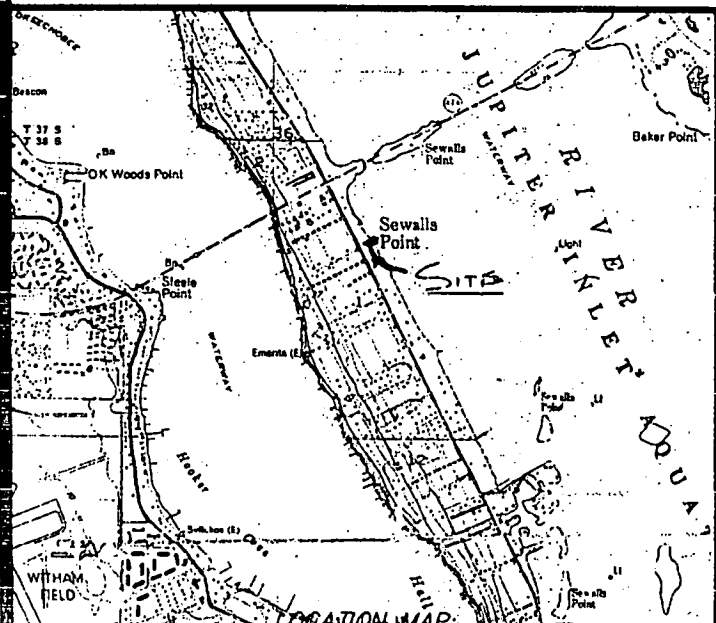
ROBERT BLOOMSTER JR.
PROFESSIONAL LAND SURVEYOR
NO. 4134 STATE OF FLORIDA

NOT VALID WITHOUT SHEET 2 & 3

BLOOMSTER
PROFESSIONAL LAND
SURVEYORS, INC.
FLORIDA L.B. # 6016

791 NORTHEAST DIXIE HIGHWAY
JENSEN BEACH, FLORIDA 34957
PHONE 772-334-0868

SHEET 1 OF 3
SCALE: 1" = 40'
DATE: 8/10/08
F.B. A120/70-72
JOB NO. 8910
REVISIONS



BOUNDARY and MEAN HIGH WATER SURVEY
PREPARED FOR: LORI MORROW
SITE LOCATED: 24 SOUTH SEWALL'S POINT ROAD
TOWN ON SEWALL'S POINT, MARTIN COUNTY, FLORIDA

SOUTH SEWALL'S POINT ROAD

FOUNDED NAIL & DISC (NO ID) CENTERLINE OF PLATTED 50 FOOT RIGHT OF WAY ASPHALT PAVEMENT FOUNDED NAIL & DISC (NO ID)

122.00'(P) 121.94'(M)

122.00'(P) 122.28'(M) 8 MM

R.O.W.

FOUNDED #5 IRON ROD (NO ID)

FOUNDED 4"x4" CONCRETE MONUMENT (NO ID)

FOUNDED 3"x3" CONCRETE MONUMENT (NO ID)

89°57'30"(P)
89°57'25"(M)

89°37'30"(P)
90°07'05"(M)

FLOOD ZONE 'AE'
(BASE 9.0')

FLOOD ZONE 'VE'
(BASE 10.0')

LOT 10

LOT 9

3/29

251'±(P) 223.85'(M)

211.88'(P) 210.92'(M)
238.48'(M)

4" CHAIN LINK FENCE (± ON LINE)

WOOD BULKHEAD

L-1

L-2

L-3

L-4

MEAN HIGH WATER
ELEVATION 0.72' (NGVD 1929)
LOCATED ON 8/10/05

INDIAN RIVER

RIPARIAN LINE

RIPARIAN LINE

LEGEND

- R.O.W. = RIGHT OF WAY
- P = PLAT
- M = MEASURED
- C.B.S. = CONCRETE BLOCK STRUCTURE
- NGVD = NATIONAL GEODETIC VERTICAL DATUM
- WM = WATER METER

LINE TABLE

L-1	S00°59'34"E	33.47'
L-2	S00°28'30"W	38.37'
L-3	S16°50'32"W	40.95'
L-4	N04°10'03"W	11.10'



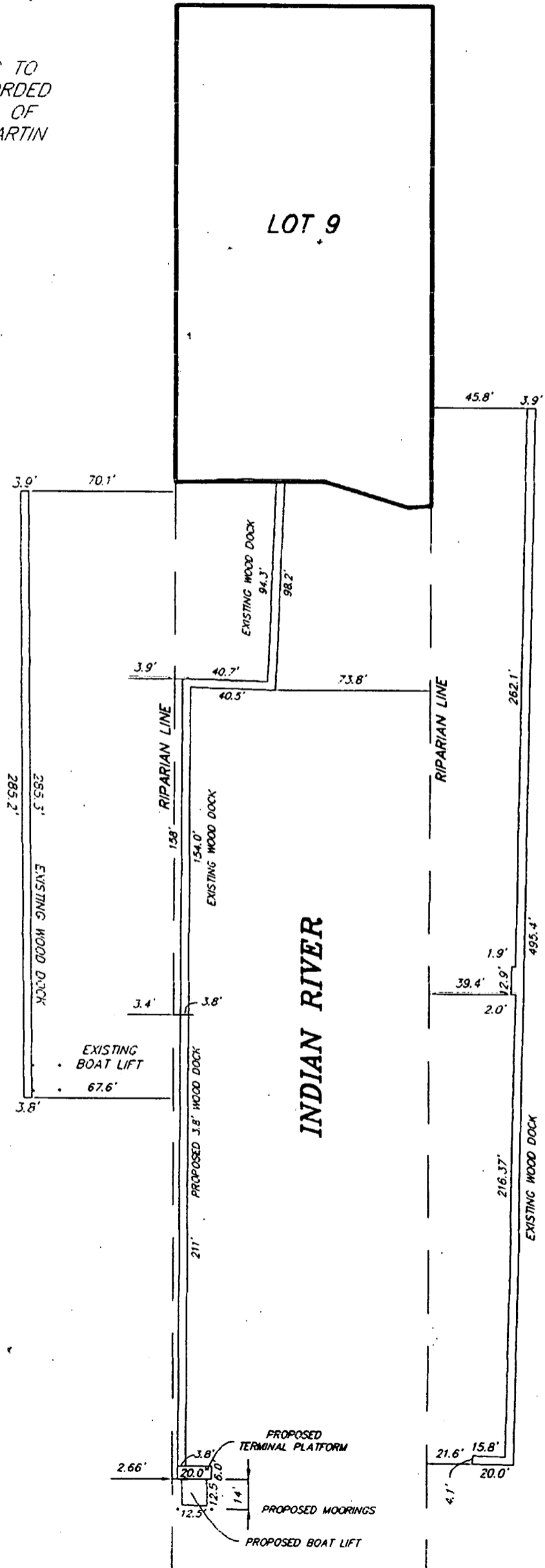
NOT VALID WITHOUT SHEET 1 & 3
SCALE: 1" = 40' SHEET 2 OF 3

BOUNDARY SURVEY and MEAN HIGH WATER SURVEY

PROPOSED DOCK ADDITION AND EXISTING ADJACENT DOCK LOCATIONS

LEGAL DESCRIPTION:

LOT 9, MIRAMAR, ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 3, PAGE 111 OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.



NOT VALID WITHOUT SHEET 1 & 2
SCALE: 1" = 40' SHEET 3 OF 3



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

Colleen M. Castille
Secretary

MAY 20 2005

Lori Morrow
695 SE St. Lucie Boulevard
Stuart, FL 34996

File Number: 43-0179859-002
Martin County

Dear Ms. Morrow:

On May 10, 2005, we received your application for an exemption to perform the following activities: repair and replace 70 linear feet of upland retaining wall in the same location as shown in the attached drawings adjacent to the Jensen Beach to Jupiter Inlet Aquatic Preserve (O.F.W.), Class III Waters of the State, located at 24 S. Sewall's Point Road (Section 1, Township 38 South, Range 41 East), Stuart, Martin County.

Your application has been reviewed to determine whether it qualifies for any of three kinds of authorization that may be necessary for works in wetlands or waters of the United States. The kinds of authorization are (1) regulatory authorization, (2) proprietary authorization (related to state-owned submerged lands), and (3) federal authorization. The authority for review and the outcomes of the reviews are listed below. Please read each section carefully. Your project may not have qualified for all three forms of authorization. If your project did not qualify for one or more of the authorizations, refer to the specific section dealing with that authorization for advice on how to obtain it.

1. Regulatory Review - EXEMPTION VERIFIED

The Department has the authority to review your project under Part IV of Chapter 373, Florida Statutes (F.S.), Title 62, Florida Administrative Code (F.A.C.), and in accordance with operating agreements executed between the Department and the water management districts, as referenced in Chapter 62-113, F.A.C.

Based on the information you submitted, we have determined that your project is 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.

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 (B.O.T.) 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. Pursuant to Chapter 253.77, Florida Statutes, you will not require authorization from the Board of Trustees to use public property to perform the proposed project.

"More Protection, Less Process"

Printed on recycled paper.

Lori Morrow
File Number: 43-0179859-002
Page Two

3. Federal Review (State Programmatic General Permit) - AUTHORIZATION 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 (the 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). Your proposed activity as outlined on the attached drawings is in compliance with the SPGP program. U.S. Army Corps of Engineers (Corps) General conditions apply to your project, as attached. **No further permitting for this activity is required by the Corps.** The authority granted under this SPGP expires December 17, 2005. Your project must be completed prior to this expiration date.

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

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 (or mediation, if available) on the Department's decision that the proposed activity qualifies for this exemption. If an administrative hearing (or mediation, if available) is timely requested by a substantially affected person, the finding that the proposed activity qualifies for this exemption must be reconsidered, and it is possible that the hearing or mediation could result in a determination that the proposed activity does *not* qualify for the exemption. Under rule 28-106.111 of the Florida Administrative Code, a request for such an administrative hearing (or mediation, if available) must be filed with the Department's Clerk in the Office of General Counsel within 21 days of either: (a) publication of notice in a newspaper of general circulation in the county where the activity is to take place; or (b) the substantially affected person's receipt of written notice which includes the information contained in Attachment A.

The Department will not publish notice of this determination. Publication of this notice by you is optional and 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 permits.

Lori Morrow
File Number: 43-0179859-002
Page Three

If you wish to limit the time within which all substantially affected persons may request an administrative hearing (or mediation, if available), you may elect to publish, at your own expense, the enclosed notice (Attachment A) one time only in the legal advertisement section of a newspaper of general circulation in the county where the activity is to take place.

If you wish to limit the time within which any person may request an administrative hearing (or mediation, if available), you may provide such person, 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 a certification or affidavit of publication issued by the newspaper. 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 - Port St. Lucie Branch Office
Submerged Lands & Environmental Resources Program, 1801 SE Hillmoor Drive Suite C-204
Port St. Lucie, FL 34952

Thank you for applying to the Submerged Lands and Environmental Resource Program. If you have questions regarding this matter, please contact **Jimmy Sellers** of this office, at telephone (772)398-2806.

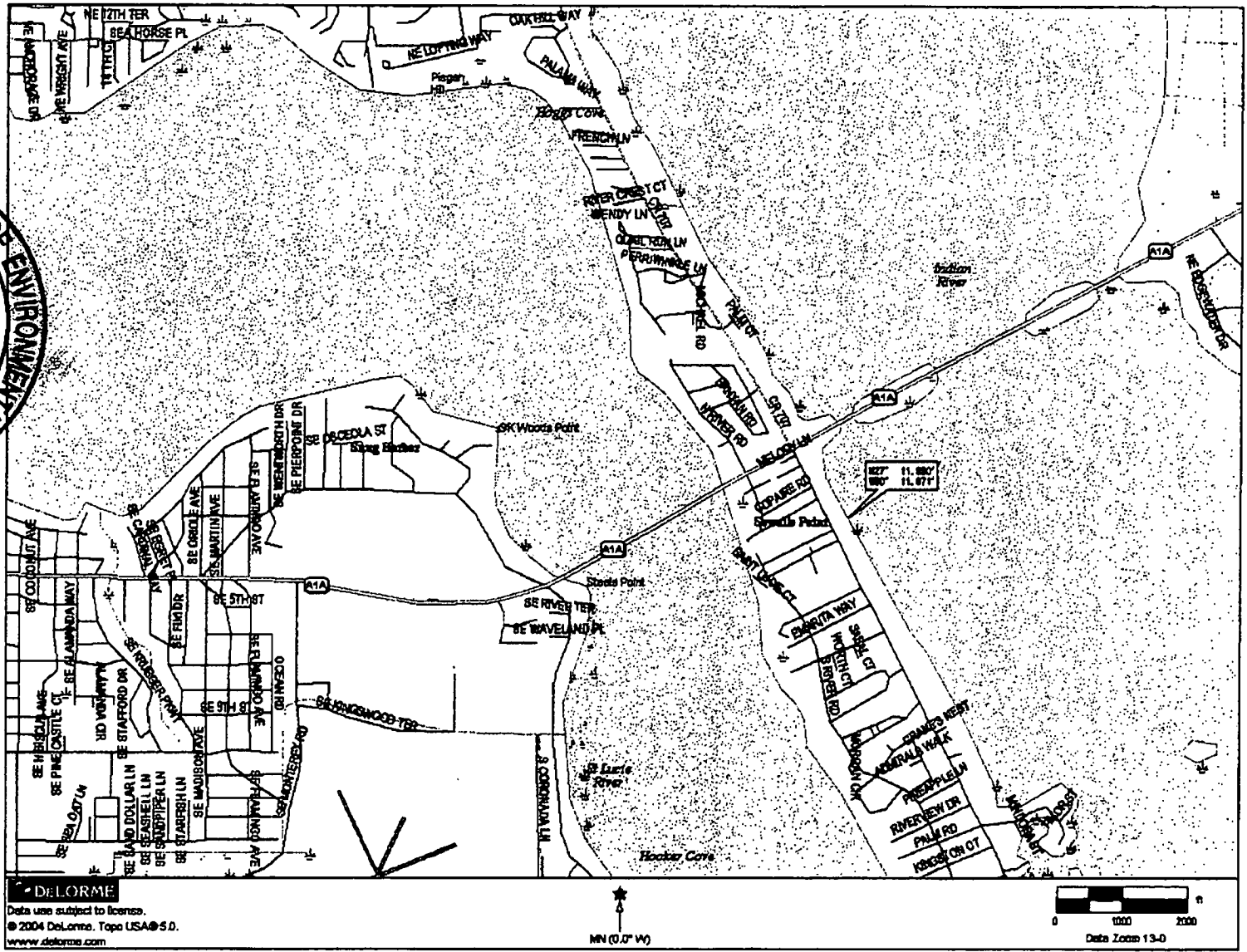
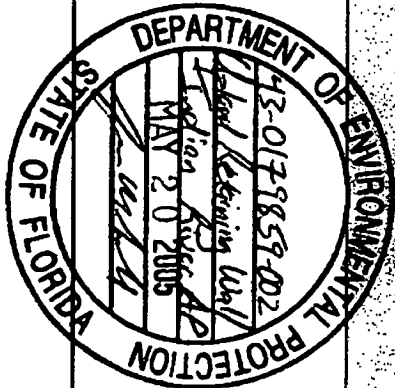
Sincerely,

Mary C. Murphy 5/20/05
for Mary C. Murphy Date
Environmental Administrator
Florida Department of Environmental Protection
Southeast District Branch Office

MCM/JS

Enclosures: Attachment A- Notice of Determination of Qualification for Exemption
Federal Manatee Conditions, Federal General Conditions for SPGP III- R1 and Transfer Request

cc: Dana Rankin, Jerner & Associates, Inc. (Agent) [without enclosures]

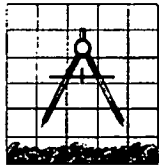


DeLORME
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www.delorme.com



RECEIVED
MAY 10 2005
Dept. of Environ. Protection
Port St. Lucie

Lori Morrow
695 SE St. Lucie Blvd.
Stuart, FL 34996



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

Date: 4/29/05

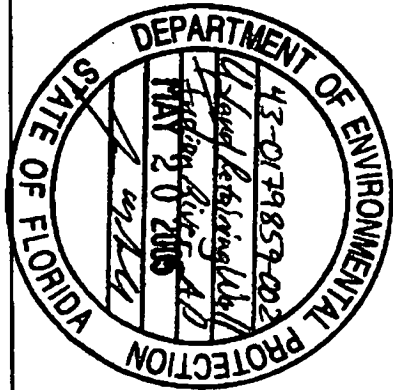
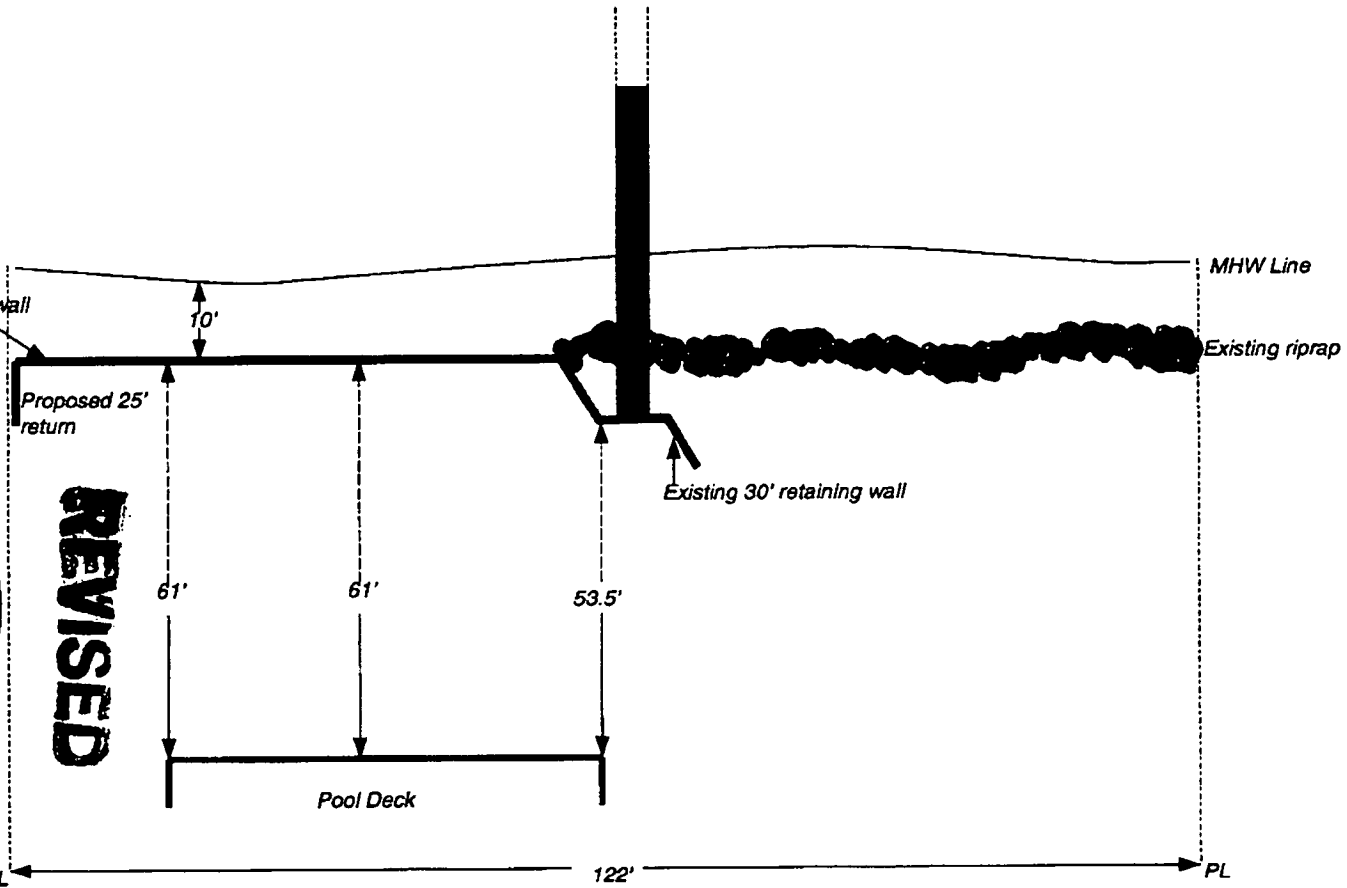
Sheet 1 of 2



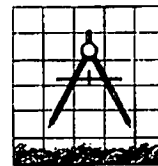
Indian River

Flood/Ebb

Replace 70 +/- linear ft. retaining wall
In same location as existing wall



Lori Morrow
24 S. Sewall's Point Road
Stuart, FL 34996



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

Scale: Dimensioned

Date: 05/05/05

Sheet 2 of 2



8075

TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 24 SSPR

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.

SEAWALL READMEN

NO PERMIT POSTED

\$40 FEE

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

DATE: 3/10

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/10, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	FENDER	TREE	PASS	
7	3 OAKWOOD DR			INSPECTOR: <i>[Signature]</i>
6975	AUMAN	FINAL FENCE	PASS	CLOSE
8	45 RIO VISTA O/B			INSPECTOR: <i>[Signature]</i>
8075	MORROW	DEADMAN	FAIL	NO PERMIT FEE
10	24 S. Sewall's Pt HARBOR BAY MARINE	SEAWALL (ANCHOR) 485-2298		#40 FEE INSPECTOR: <i>[Signature]</i>
7221	CLEMENTS	FINAL RETAINING WALL	PASS	CLOSE
1	11 W. HIGH POINT RD WILCO CONS			INSPECTOR: <i>[Signature]</i>
8088	MADER	ROUGH GAS	PASS	
4	106 ABBIE COURT FERRELL GAS			INSPECTOR: <i>[Signature]</i>
8042	STECK	PLUMBING	PASS	
11	32 FIELDWAY DR O/B	ELECTRICAL ?EARLY	PASS	INSPECTOR: <i>[Signature]</i>
7220	CLEMENTS	FINAL DOCK	FAIL	
1	11 W. High Point WILCO CONST.			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/13, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7764	RUCKS	TRUSS ENG	CANCEL	
4	20 N. SEWALL'S			
	MASTERPIECE BUDS			INSPECTOR: <u> </u>
7557	LUTZ	FINAL SCR. ENCL.	FAIL	
5	6 RIVERVIEW			
	PIONEER SCREEN			INSPECTOR: <u> </u>
8015	ANDREU	TRUSS ENG	PASS	
	24 S. S.P.R.	DEADMAN		
	HARBOR BAY MAR.			INSPECTOR: <u> </u>
 	 	SHEATHING	 	CANCEL
	4 DELAND LN	ROOF		NOT READY.
	ALL AMER.			INSPECTOR: <u> </u>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <u> </u>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <u> </u>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <u> </u>

OTHER:

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/17, 2006 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7819	T. DIKLS	PARTIAL PLUMB		
1	12 CRANES NEST	CAPS		
	ADVANCED CONCRETE			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7764	RUCKS	STRAPPING	PASS	
7	70 N. SEWALLS PT	AFTER 10:00		
	MASTERPIECE BLDGS	TINNS ENGR.	PASS	INSPECTOR: <i>OW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8075	MORROW	FINAL SEWALL	PASS	CLOSE
5	24 S. SEWALLS PT			
	HARBOR BAY MARINE			INSPECTOR: <i>OW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	FETNER	TREE		
2	2 HIGH POINTE RD			
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7993	GIACHINO	PARTIAL TIE BEAM	PASS	CAR/1ST FL. SW
8	11 WENDY LANE			
	SEA GATE BLDGS			INSPECTOR: <i>OW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8066	WARNER (ROD BRACKET)	TINTAGE & METAL		
4	DELANO	IN PROGRESS		
	AU AMER ROOFING	LATE MORN.		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8103	BONIFACE	TIE BACK	FAIL	
6	63 S. RIVER RD			
	BWE WATER MARINE			INSPECTOR: <i>OW</i>

OTHER: _____

10155

POOL TIMER

TRANSFORMER



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:	10155	DATE ISSUED:	JULY 11, 2012
SCOPE OF WORK:	TIME CLOCK & TRANSFORMER FOR POOL EQUIPMENT		
CONTRACTOR:	GARY GIFFORD INC		
PARCEL CONTROL NUMBER:	013841009-000-000904	SUBDIVISION	MIRAMAR - LOT 9
CONSTRUCTION ADDRESS:	24 S SEWALLS PT RD		
OWNER NAME:	MORROW		
QUALIFIER:	GARY GIFFORD	CONTACT PHONE NUMBER:	286-0954

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY**

INSPECTIONS

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

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

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

Permit Number: **10155**

Date: 7/11/12

OWNER/LESSEE NAME: LORI MORROW Phone (Day) _____ (Fax) _____
 Job Site Address: 24 S SEWALLS POINT ROAD City: _____ State: _____ Zip: _____
 Legal Description: 013841009 000 00904 Parcel Control Number: _____
 Fee Simple Holder Name: _____ Address: _____
 City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** POOL TIME CIRCULAR TRANSFORMED POOL EQUIP.

WILL OWNER BE THE CONTRACTOR?
 (If yes, Owner Builder questionnaire must accompany application)
 YES _____ NO _____
Has a Zoning Variance ever been granted on this property?
 YES _____ (YEAR) _____ NO _____
 (Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)
 Estimated Value of Improvements: \$ 1100.00
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
 Estimated Fair Market Value prior to improvement: \$ _____
 (Fair Market Value of the Primary Structure only, Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: GAM J Gifford FIVE Phone: 772 286 0954 Fax: 219 0146
 Qualifiers name: GAM J Gifford Street: _____ City: _____ State: _____ Zip: _____
 State License Number: EC13061574 OR: _____ Municipality: _____ License Number: _____

LOCAL CONTACT: _____ Phone Number: 772 286 0954
DESIGN PROFESSIONAL: _____ License# _____
 Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010
 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS:

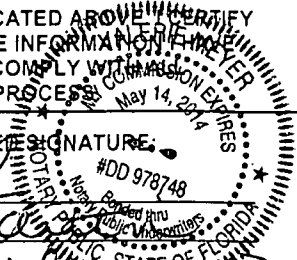
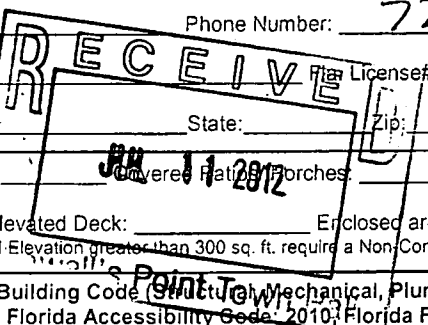
- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:
 X _____
 State of Florida, County of: _____
 On This the _____ day of _____, 20____
 by _____ who is personally
 known to me or produced _____
 As identification. _____
 Notary Public
 My Commission Expires: _____

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
 X Gary Gifford
 State of Florida, County of: _____
 On This the 11 day of July, 20____
 by Gary Gifford who is personally
 known to me or produced _____
 As identification. Valerie Meyer
 Notary Public
 My Commission Expires: _____



SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

Gary J. Gifford, Inc.
Electrical Contractor
EC 13001574
350 SW Linden St.
Stuart, FL 34997

Electrical Proposal

7/10/2012

Lori Morrow
695 SE St. Lucie Blvd.
Stuart, FL 34996

1,100.00

24 S. Sewalls Point Rd
Stuart, FL 34996

We propose to supply labor and material to replace deteriorated pool equipment with new Square D 70 amp disconnect, 220 volt weather proof time clock and 300 watt stainless steel pool transformer for the sum of: ONE THOUSAND ONE HUNDRED DOLLARS

Price includes electrical permit

Price does not include replacement of pool pump

Gary J. Gifford

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 7-12-12 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10078 15C	Leonard 1 Heritage Way OB	rough electric rough plumbing shower pan	PASS	INSPECTOR [Signature]
10101	Sharifi Jc A2 3601 SE Ocean Warred	firewall	PASS	INSPECTOR [Signature]
10083 3PM	White 15 Ridgeland Tuscany Bay	Sheathing	Cancel	INSPECTOR
	20 N VIA LUCINDIA	TRASH		INSPECTOR
1053	2455 SE OCEAN Gary Gifford	Elect Fin	PASS	Close INSPECTOR [Signature]
	HINKLEY 26	SIMARA 50		INSPECTOR
	G. KISER			INSPECTOR

10544

WINDOWS



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:	10544	DATE ISSUED:	07/30/2013
SCOPE OF WORK:	REPLACE WINDOWS		
CONTRACTOR:	MONTEREY GLASS SPECIALTY		
PARCEL CONTROL NUMBER:	01384100900000090-4	SUBDIVISION	MIRIMAR LOT 9
CONSTRUCTION ADDRESS:	24 S. SEWALLS POINT RD		
OWNER NAME:	CARUSO		
QUALIFIER:	JOSEPH DELVECCHIO	CONTACT PHONE NUMBER:	283-1999

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY**

INSPECTIONS

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

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: 10544

Date: 6/24/13

OWNER/LESSEE NAME: Corleso

Phone (Day) 718 924 1100 Fax

Job Site Address: 24 So Sewalls Point Rd

City: Stuart

State: FL

Zip: 34996

Legal Description: LOT 9, MIRAMAR, PLAT BOOK 3, PAGE 111, MAP 1718

Parcel Control Number: 01-38-41-009-000-00090-4

Fee Simple Holder Name:

Address:

City:

State:

Zip:

Telephone:

*SCOPE OF WORK (PLEASE BE SPECIFIC): Replace Windows

WILL OWNER BE THE CONTRACTOR?

(If yes, Owner Builder questionnaire must accompany application)

YES NO X

Has a Zoning Variance ever been granted on this property?

YES (YEAR) NO

(Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)

Estimated Value of Improvements: \$ 13,000.00

(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)

Is subject property located in flood hazard area? VE10 AE9 AE8 X

FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:

Estimated Fair Market Value prior to improvement: \$

(Fair Market Value of the Primary Structure only, Minus the land value)

PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Monterey Glass Special Phone: 772-283-1999 Fax: 772-283-1919

Qualifiers name: Joseph DeJecchio Street: 851 SE Monterey Rd City: Stuart State: FL Zip: 34994

State License Number: SP0-2965 OR: Municipality: License Number:

LOCAL CONTACT: Bob Steigorwalt Phone Number: 772-344-0103

DESIGN PROFESSIONAL: City: State: Zip: Phone Number:

Street: City: State: Zip: Phone Number:

AREAS SQUARE FOOTAGE: Living: 2962 Garage: 460 Covered Patios/Porches: Enclosed Storage:

Carpport: Total under Roof: Elevated Deck: Enclosed area below BRE:

* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Covered Area Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS:

- 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
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*****A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*****

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

OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE: X [Signature]

State of Florida, County of:

On This the 26 day of JUNE, 2013

by [Signature] who is personally

known to me or produced

As identification: Notary Public State of Florida Lisa Greer Bharath My Commission EE 167800 Expires 02/08/2016

My Commission Expires:

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: X [Signature]

State of Florida, County of:

On This the 26 day of JUNE, 2013

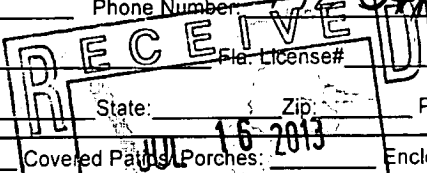
by [Signature] who is personally

known to me or produced

As identification: Notary Public State of Florida Lisa Greer Bharath My Commission EE 167800 Expires 02/08/2016

My Commission Expires:

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.1) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!



200 330 520 21120 804 Copies

WINDOW/DOOR SCHEDULE

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

ID NO	APPOX OPENING SIZE (WXH)	DESIGNATION	* TYPE	IMPACT PROTECTION		REMARKS
				IMPACT GLASS	SHUTTER	
	37" X 63"	25	SH		X	EXAMPLE
1	42 ³ / ₈ x 79	Picture	Fix	X		
2	42 ³ / ₈ x 79	"	Fix	X		
3	42 ³ / ₈ x 79	"	Fix	X		
4	42 ³ / ₈ x 79	"	Fix	X		
5	71 ³ / ₄ x 79 ³ / ₈	40 x 6 1/2	door	X		
6	42 ³ / ₈ x 79	Picture	Fix	X		
7	42 ³ / ₈ x 79	"	Fix	X		
8	42 ³ / ₈ x 79	"	Fix	X		
9	42 ³ / ₈ x 79	"	Fix	X		
10	26 ¹ / ₂ x 63	1/2 35	SH		X	Separate Shutters
11	47 x 63	Picture	Fix		X	
12	26 ¹ / ₂ x 63	1/2 35	SH		X	Mullled
13	26 ¹ / ₂ x 63	1/2 35	SH		X	
14	47 x 63	Picture	Fix		X	Mullled
15	26 ¹ / ₂ x 63	1/2 35	SH		X	
16	26 ¹ / ₂ x 63	1/2 35	SH		X	Mullled
17	47 x 63	Pict	Fix		X	
18	26 ¹ / ₂ x 63	1/2 35	SH		X	
19	53 ¹ / ₈ x 38 ³ / ₈	33	SH		X	
20	53 ¹ / ₈ x 38 ³ / ₈	33	SH		X	
21	53 ¹ / ₈ x 38 ³ / ₈	33	SH		X	
22	37 x 50 ⁵ / ₈	24	SH		X	Mullled
23	37 x 50 ⁵ / ₈	24	SH		X	
24	26 ¹ / ₂ x 50 ⁵ / ₈	H24	SH		X	Mullled
25	37 x 50 ⁵ / ₈	24	SH		X	
26	37 x 50 ⁵ / ₈	24	SH		X	
27	26 ¹ / ₂ x 50 ⁵ / ₈	H24	SH		X	
28	26 ¹ / ₂ x 38 ³ / ₈	H23	SH		X	
29	53 ¹ / ₈ x 38 ³ / ₈	33	SH		X	
30	37 x 63	25	SH		X	Mullled
31	69 x 63	Pict	Fix		X	

TOTAL GLAZED OPENING AREA FOR STRUCTURE: _____ S.F.

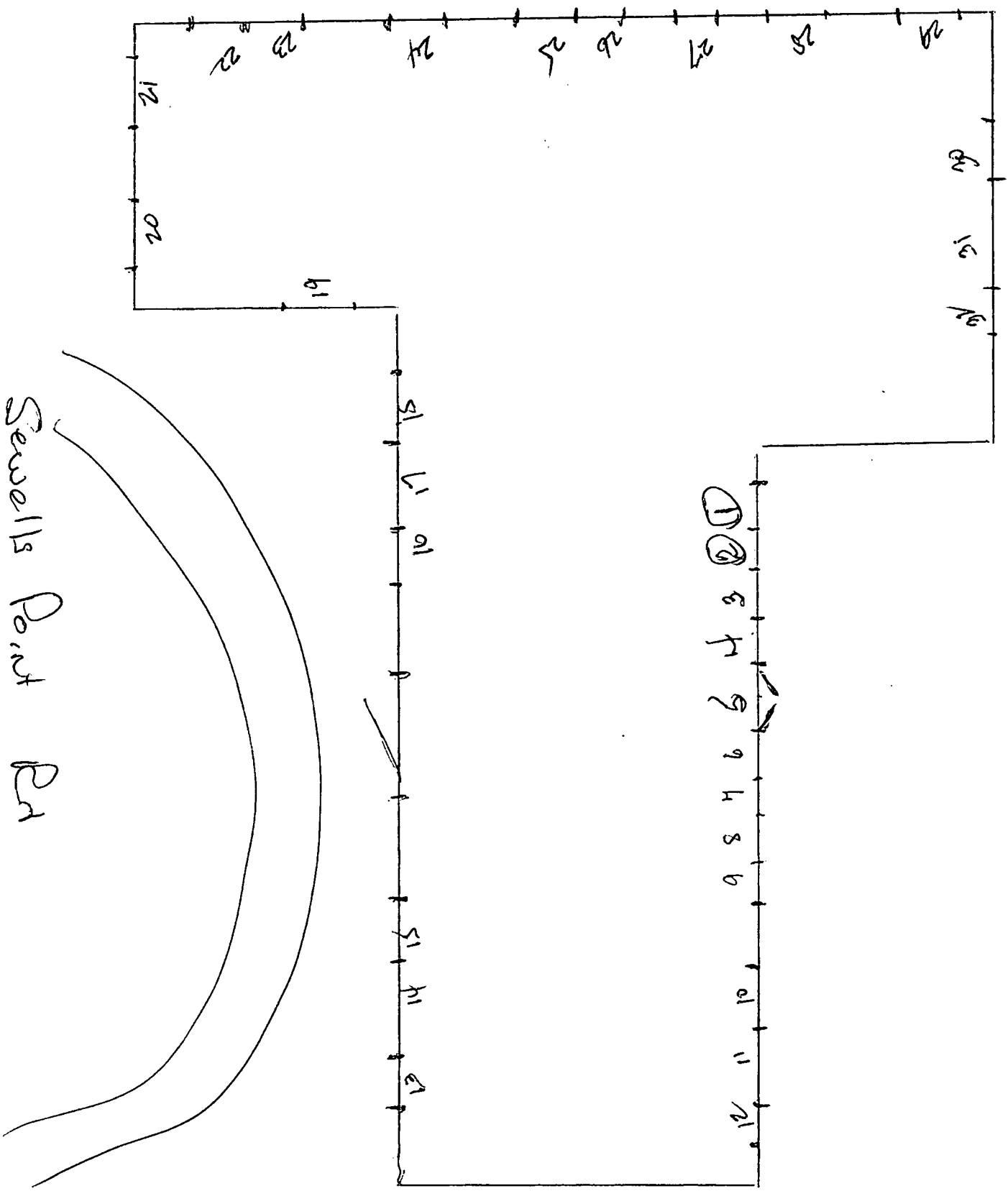
* PERCENTAGE OF NEW GLAZED AREA: _____ %
 (TOTAL INSTALLED GLAZED AREA DIVIDED BY TOTAL GLAZED OPENINGS FOR STRUCTURE)

NOTE: The replacement of more than 25% of the aggregate area of exterior glazing (windows & doors) in one & two family dwellings within a 12 month period will require impact protection on all proposed glazed opening replacement (approved shutters or impact resistant glazing) as per 2004 FBC/ EXISTING BUILDING 507.3.

*** TYPE WINDOWS**

- SH - SINGLE HUNG
- DH - DOUBLE HUNG
- AWN - AWNING
- CAS - CASEMENT
- SL - SLIDING
- FIX - FIXED

River





MIAMI-DADE COUNTY
 DEPARTMENT OF PERMITTING, ENVIRONMENT AND REGULATORY
 AFFAIRS (PERA)
 BOARD AND CODE ADMINISTRATION DIVISION
NOTICE OF ACCEPTANCE (NOA)

MIAMI-DADE COUNTY, FLORIDA
 PRODUCT CONTROL SECTION
 11805 SW 26 Street, Room 208
 Miami, Florida 33175-2474
 T (786) 315-2590 F (786) 315-2599
www.miamidade.gov/development/

PGT Industries
 1070 Technology Drive
 North Venice, 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 and accepted by Miami-Dade County PERA--Product Control Section 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 Section (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. PERA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Section 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 "FD-101" Outswing Aluminum French Door w/ wo Sidelites - L.M.I.

APPROVAL DOCUMENT: Drawing No. 110058-1, titled Series "Alum. French Door & Sidelites, Impact", sheets 1 through 10 of 10, dated 02/22/07 with revision "D" dated 08/14/12, prepared by manufacture, signed and sealed by Lynn Miller, P. E., bearing the Miami-Dade County Product Control Section renewal stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Section.

MISSILE IMPACT RATING: Large and Small Missile Impact Resistant

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state, model/series, and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

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

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

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

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

This NOA revises and renews NOA No. 11-1013.22 and consists of this page 1 and evidence pages E-1, E-2 and E-3, as well as approval document mentioned above.

The submitted documentation was reviewed by Jaime D. Gascon, P. E.



J. Gascon
 8/21/12

NOA No. 12-0516.02
 Expiration Date: October 18, 2017
 Approval Date: August 30, 2012
 Page 1



DEPARTMENT OF PERMITTING, ENVIRONMENT, AND REGULATORY AFFAIRS (PERA) BOARD AND CODE ADMINISTRATION DIVISION **NOTICE OF ACCEPTANCE (NOA)**

MIAMI-DADE COUNTY, FLORIDA
PRODUCT CONTROL SECTION
11805 SW 26 Street, Room 208
Miami, Florida 33175-2474
T (786) 315-2590 F (786) 315-2599
www.miamidade.gov/pera/

PGT 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 and accepted by Miami-Dade County PERA-Product Control Section 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 Section (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. PERA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Section 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 Fixed Window - L.M.I.

APPROVAL DOCUMENT: Drawing No. 4259-4 titled "Aluminum Picture Window, Impact", sheets 1 through 8 of 8, prepared by manufacturer, dated 07/14/03 with revision "D" dated 10/18/11, signed and sealed by Anthony Lynn Miller, 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 Section.

MISSILE IMPACT RATING: Large and Small Missile Impact Resistant.

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state, model/ series and following statement: "Miami-Dade County Product Control Approved" unless otherwise noted herein.

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

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

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

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA revises NOA No. 10-0504.05 and consists of this page 1, evidence pages E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by Jaime D. Gascon, P. E.



J. Gascon
1/25/12

NOA No. 11-1110.15
Expiration Date: February 19, 2014
Approval Date: February 02, 2012
Page 1


**MIAMI-DADE
COUNTY**

DEPARTMENT OF PERMITTING, ENVIRONMENT, AND REGULATORY
AFFAIRS (PERA)
BOARD AND CODE ADMINISTRATION DIVISION
NOTICE OF ACCEPTANCE (NOA)

MIAMI-DADE COUNTY
PRODUCT CONTROL SECTION
11805 SW 26 Street, Room 208
Miami, Florida 33175-2474
T (786) 315-2590 F (786) 315-2599
www.miamidade.gov/pera/

PGT Industries
1070 Technology Drive
North Venice, 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 and accepted by Miami-Dade County PERA - Product Control Section 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 Section (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. PERA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Section 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 "SH-200" Aluminum Single Hung Window - N.I.

APPROVAL DOCUMENT: Drawing No. MD-SHZ00-01, titled "Single Hung Window Installation" sheets 1 through 8 of 8, dated 05/11/11 with revision A dated 10/10/11, prepared by manufacturer, signed and sealed by Anthony Lynn Miller, 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 Section.

MISSILE IMPACT RATING: None

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state, model/series, and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

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

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

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

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA revises NOA # 11-0614.01 and consists of this page 1 and evidence page E-1, as well as approval document mentioned above.

The submitted documentation was reviewed by Manuel Perez, P.E.



MIAMI-DADE COUNTY
APPROVED



NOA No. 11-1013.12
Expiration Date: September 01, 2016
Approval Date: December 08, 2011

Page 1



MIAMI-DADE COUNTY
 DEPARTMENT OF PERMITTING, ENVIRONMENT, AND REGULATORY
 AFFAIRS (PERA)
 BOARD AND CODE ADMINISTRATION DIVISION
NOTICE OF ACCEPTANCE (NOA)

MIAMI-DADE COUNTY, FLORIDA
 PRODUCT CONTROL SECTION
 11805 SW 26th Street, Room 208
 Miami, Florida 33175-2474
 T (786) 315-2590 F (786) 315-2599
www.miamidade.gov/pera/

PGT Industries, Inc.
 1070 Technology Drive
 North Venice, 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 and accepted by Miami-Dade County PERA -Product Control Section 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 Section (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. PERA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Section 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-220 Picture" Aluminum Fixed Window - N.I.

APPROVAL DOCUMENT: Drawing No. MD-PW220-01 titled "Fixed Window Installation Guidelines", sheets 1 through 8 of 8, prepared by manufacturer, dated 04/01/11 with the latest revision "A" dated 10/19/11, prepared by PGT Industries, Inc., signed and sealed by Anthony Lynn Miller, 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 Section.

MISSILE IMPACT RATING: None.

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state, model/ series and following statement: "Miami-Dade County Product Control Approved" unless otherwise noted herein.

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

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

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

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

This NOA revises NOA No. 11-0509.02 and consists of this page 1, evidence pages E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by **Jaime D. Gascon, P. E.**



J. Gascon
 2/8/12

NOA No. 11-1114.14
 Expiration Date: August 18, 2016
 Approval Date: February 16, 2012
 Page 1

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **8-28-13** Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10469	Villa	Final	PASS	
1st	10 Herons Nest	ARC		Close
	Jensen Beach ARC			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10482	Crawford	Final Roof	PASS	
3	116 N Sewalls	(only)		
	OB			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10518	Williams	tie beam	PASS	
2	24 Castle Hill			
	Driftwood			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10458	Perih	rebar	PASS	WAIT FOR LTR FROM ENGR.
4	8 Morgan Cir			OR E-MAIL.
	Scott Holmes			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
5	255 River	cutting		
		files		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10514	Caruso	Final	PASS	
130	24 S Sewalls	windows		Close
	Monterey Glass			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS

10564

STORM SHUTTERS



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:	10564	DATE ISSUED:	AUGUST 14, 2013
SCOPE OF WORK:	INSTALL 13 BAHAMA SHUTTERS		
CONTRACTOR:	FINE HOMES BY RICK		
PARCEL CONTROL NUMBER:	013841009-000-000904	SUBDIVISION	MIRAMAR - LOT 9
CONSTRUCTION ADDRESS:	24 S SEWALL SPT RD		
OWNER NAME:	CARUSO		
QUALIFIER:	RICHARD GLANCY	CONTACT PHONE NUMBER:	201-2220

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY**

INSPECTIONS

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

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

10564

Date: _____ Permit Number: _____

OWNER/LESSEE NAME: SALVATORE CARUSO Phone (Day) 718-924-1100 (Fax) _____

Job Site Address: 24 S. SEWALL PT RD City: SEWALL PT State: FL Zip: 33496

Legal Description _____ Parcel Control Number: _____

Fee Simple Holder Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** INSTALL 13 BATHROOM SHUTTERS

WILL OWNER BE THE CONTRACTOR?
(If yes, Owner Builder questionnaire must accompany application)
YES _____ NO _____

Has a Zoning Variance ever been granted on this property?
YES _____ (YEAR) _____ NO _____
(Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 11,000 + 00
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)

Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: FINE HOMES BY RICK INC Phone: 201-2220 Fax: _____

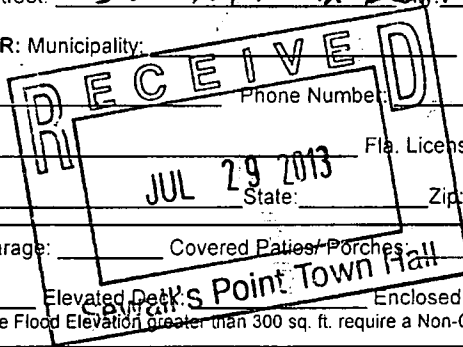
Qualifiers name: RICK GLANCY Street: 1205 SW MICHAELA BLVD PALM CITY State: FL Zip: 34982

State License Number: CGC 053510 OR: Municipality: _____ License Number: CGC 053510

LOCAL CONTACT: _____ Phone Number: _____

DESIGN PROFESSIONAL: _____ Fla. License# _____

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



AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/Porches: _____ Enclosed Storage: _____

Carport: _____ Total under Roof: _____ Elevated Deck: _____ Enclosed area below BFE*: _____

* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010
National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

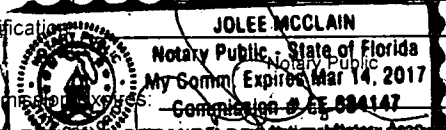
WARNINGS TO OWNERS AND CONTRACTORS:

- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

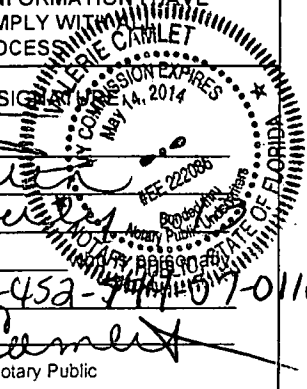
******* A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS *******

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

OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE:
X [Signature]
State of Florida, County of: Martin
On This the 26th day of July, 2013
by Salvatore Caruso & Nina Caruso who is personally known to me or produced By Drivers because
As identification: [Signature]
My Commission Expires: _____



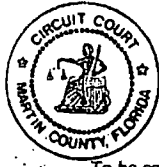
CONTRACTOR LICENSEE NOTARIZED SIGNATURE:
X [Signature]
State of Florida, County of: Martin
On This the 29th day of July
by Richard Glancy known to me or produced Per # 6452-77707-0110
As identification: [Signature]
My Commission Expires: _____



SINGLE FAMILY PERMITS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

STATE OF FLORIDA
MARTIN COUNTY

THIS IS TO CERTIFY THAT THE
FOREGOING 1 PAGE(S) IS A TRUE
AND CORRECT COPY OF THE ORIGINAL
DOCUMENT AS FILED IN THIS OFFICE



INSTR # 2412458
OR BK 2671 PG 2333
(1 Pgs)
RECORDED 08/21/2013 03:05:04 PM
CAROLYN TIMMANN
MARTIN COUNTY CLERK

NOTICE OF COMMENCEMENT

To be completed when construction value exceeds \$2,500.00

BY: [Signature] D.C. 10364 TAX FOLIO # _____
DATE: 8/21/13 PERMIT # _____
STATE OF FLORIDA COUNTY OF MARTIN

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS, IF AVAILABLE): 24 S. SEWELL PT RD
LOT # 9 MARIANNA
GENERAL DESCRIPTION OF IMPROVEMENT: SMALL 13 BATHROOM (HUTTEN)

OWNER INFORMATION OR LESSEE INFORMATION, IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:
Name: SALVATORE CARUSO
Address: 24 S. SEWELL PT RD SEWELL PT FL 34996
Interest in property: RESIDENCE
Name and address of fee simple title holder (if different from Owner listed above): [Signature]

CONTRACTOR'S NAME: BUCK CLANCY Phone No.: 772-201-2220
Address: 1205 SW MAGNOLIA BLVD DR PALM CITY FL

SURETY COMPANY (if applicable, a copy of the payment bond is attached):
Name and address: _____
Phone No.: _____ Bond amount: _____

LENDER'S NAME: [Signature] Phone No.: _____
Address: _____

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: _____ Phone No.: _____
Address: _____

In addition to himself or herself, owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.
Phone number of person or entity designated by Owner: _____

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

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

Under penalty of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief.
[Signature]
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager/Attorney-in-fact

Signatory's Title/Office _____

The foregoing instrument was acknowledged before me this 20th day of July, 2013
By: Salvatore & Nina Caruso as _____ for _____
Name of person Type of authority (e.g. officer, trustee) Party on behalf of whom instrument was executed

[Signature] Notary's Signature
(Print, Type, or Stamp of Notary Public)
JOLEE MCCLAIN
Notary Public - State of Florida
My Comm. Expires Mar 14, 2017
Name Commission # EE 884147
Bonded Through National Notary Assn.
Personally known or produced identification
Type of identification produced Ph. Driver License

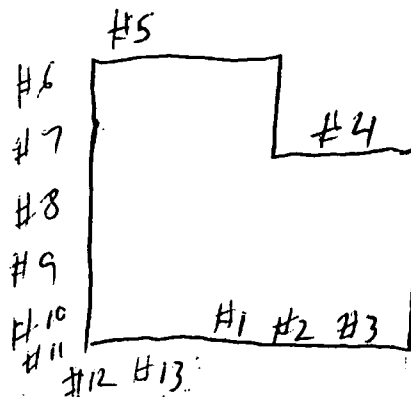


TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
 One S. Sewall's Point Road
 Sewall's Point, Florida 34996
 Tel 772-287-2455 Fax 772-2204765

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

24 SEWALL PT ROAD - S.W.T.A.
SHUTTER SCHEDULE

I.D. NO.	APPOX OPENING SIZE (WXH)	APPOX SHUTTER WIDTH	APPOX HEIGHT	# OF STORM BARS REQ'D	ANCHOR SPACING	# OF WINDOW BARS EACH SIDE	HEADER REINF. REQ'D YES/NO	REMARKS
	37"X63"	45"	71"	N/A	12"	N/A	NO	EXAMPLE
1	57x44	57	44					
2	105x67	105	67					
3	105x67	105	67					
4	105x69	105	69					
5	147x69	147	69					
6	57x44	57	44					
7	30x31	30	31					
8	30x44	30	44					
9	78x56	78	56					
10	30x44	30	44					
11	78x56	78	56					
12	57x44	57	44					
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25								



FRONT OF HOUSE #24



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 [ABOUT DBPR](#) |
 [DBPR DIVISIONS](#) |
 [CONTACT DBPR](#)

Florida Department of
Business & Professional Regulation

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Product Approval
 USER: Public User

License efficiently. Regulate fairly.

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 [Application List](#) >
 Application Detail



FL #	FL14452-R1									
Application Type	Revision									
Code Version	2010									
Application Status	Approved									
Comments										
Archived	<input type="checkbox"/>									
Product Manufacturer	Eastern Metal Supply									
Address/Phone/Email	4268 Westroads Drive West Palm Beach, FL 33407 (800) 432-2204 Irodriguez@easternmetal.com									
Authorized Signature	Bill Feeley Irodriguez@easternmetal.com									
Technical Representative										
Address/Phone/Email										
Quality Assurance Representative										
Address/Phone/Email										
Category	Shutters									
Subcategory	Bahama									
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received									
Florida Engineer or Architect Name who developed the Evaluation Report	Walter A. Tillit, Jr., P.E.									
Florida License	PE-44167									
Quality Assurance Entity	National Accreditation and Management Institute									
Quality Assurance Contract Expiration Date	12/31/2013									
Validated By	John Henry Kampmann Jr. <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received									
Certificate of Independence	FL14452_R1_COI_EASTERN METAL_Certification of independence drwg 11-216.pdf									
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th><u>Standard</u></th> <th><u>Year</u></th> </tr> </thead> <tbody> <tr> <td>ASTM E-1886</td> <td>2005</td> </tr> <tr> <td>ASTM E-1996</td> <td>2005</td> </tr> <tr> <td>ASTM E-330</td> <td>2002</td> </tr> </tbody> </table>	<u>Standard</u>	<u>Year</u>	ASTM E-1886	2005	ASTM E-1996	2005	ASTM E-330	2002	
<u>Standard</u>	<u>Year</u>									
ASTM E-1886	2005									
ASTM E-1996	2005									
ASTM E-330	2002									
Equivalence of Product Standards Certified By	Florida Licensed Professional Engineer or Architect FL14452_R1_Equiv ASTM Letter.pdf									
Sections from the Code										
Product Approval Method	Method 1 Option D									
Date Submitted	12/16/2011									
Date Validated	12/16/2011									

GENERAL NOTES:

1. ALUMINUM BAHAMA SHUTTER SHOWN ON THIS PRODUCT EVALUATION DOCUMENT (P.E.D.) HAS BEEN VERIFIED FOR COMPLIANCE IN ACCORDANCE WITH THE 2010 EDITION OF THE FLORIDA BUILDING CODE. THIS ALUMINUM BAHAMA SHUTTER SHALL **NOT** BE INSTALLED AT HIGH VELOCITY HURRICANE ZONES (MIAMI DADE/ BROWARD COUNTY).

DESIGN WIND LOADS SHALL BE DETERMINED AS PER SECTION 1609 OF THE ABOVE MENTIONED CODE. FOR A WIND SPEED AS REQUIRED BY THE JURISDICTION WHERE THESE SHUTTERS WILL BE INSTALLED AND FOR A DIRECTIONALITY FACTOR $K_d=0.85$, USING ASCE 7-10 FOR INSTALLATIONS UNDER 2010 FBC AND SHALL NOT EXCEED THE MAXIMUM (A.S.D.) DESIGN PRESSURE RATINGS INDICATED ON SHEET 9.

IN ORDER TO VERIFY THE ABOVE CONDITION, ULTIMATE DESIGN WIND LOADS DETERMINED PER ASCE 7-10 SHALL BE FIRST REDUCED TO A.S.D. DESIGN WIND LOADS BY MULTIPLYING THEM BY 0.6 IN ORDER TO TO COMPARE THESE W/ MAX. (A.S.D) DESIGN PRESSURE RATINGS INDICATED ON SHEET 9.

IN ORDER TO VERIFY THAT ANCHORS ON THIS P.E.D., AS TESTED, WERE NOT OVERSTRESSED, A 33% INCREASE IN ALLOWABLE STRESS FOR WIND LOADS WAS NOT USED IN THEIR ANALYSIS. HOWEVER, FOR CONNECTIONS INTO WOOD, A 1.60 WIND LOAD DURATION FACTOR WAS USED TO CALCULATE SCREWS SPACINGS.

ALUMINUM BAHAMA SHUTTER'S ADEQUACY FOR IMPACT AND FATIGUE RESISTANCE HAS BEEN VERIFIED IN ACCORDANCE WITH SECTION 1609.1.2 OF THE ABOVE MENTIONED CODE AS PER AMERICAN TESTING LAB. OF SOUTH FLORIDA REPORT # 1120.02-07 AS PER ASTM E 1886-05, ASTM E 1998-05 AND ASTM E 330-02 STANDARDS, QUALIFIED FOR WIND ZONE 3, MISSILE TYPE D, AND FOR INSTALLATIONS AT NON ESSENTIAL FACILITIES AS DEFINED BY SECTIONS 6.2.1.1, 6.2.1.2 AND 6.3 OF ASTM E 1996-05.

2. SEE MAXIMUM PRESSURE RATINGS & MAXIMUM SHUTTER DIMENSIONS ON SCHEDULE ON SHEET 9.
3. ALL ALUMINUM EXTRUSIONS SHALL BE ALUMINUM ASSOCIATION 8063-T6 ALLOY AND TEMPER, WITH $F_y = 25.0$ ksi MINIMUM (UNLESS OTHERWISE NOTED).
4. ALL SHEET METAL SCREWS TO BE STAINLESS STEEL 304 OR 316 AISI SERIES WITH 50 ksi YIELD STRENGTH AND 90 ksi TENSILE STRENGTH OR CORROSION RESISTANT COATED CARBON STEEL AS PER DIN 90018. ALL MACHINE SCREWS TO BE STAINLESS STEEL 304 OR 316 AISI SERIES WITH 36 ksi YIELD STRENGTH & SHALL COMPLY W/ FLORIDA BUILDING CODE SECTION 2411.3.3.4.
5. BOLTS TO BE AISI 304 SERIES STAINLESS STEEL WITH 35 ksi MINIMUM YIELD STRENGTH.
6. ALL ALUMINUM POP RIVETS TO BE 5052 ALUMINUM ALLOY WITH ALUMINUM MANDREL.
7. ANCHORS TO WALL SHALL BE AS FOLLOWS: (UNLESS OTHERWISE NOTED)

- (A) TO EXISTING WOOD FRAME BUILDING; SOUTHERN PINE No.2, $G=0.55$.
- 1/4"ø MALE PANELMATE ANCHOR AS MANUFACTURED BY ELCO CONSTRUCTION PRODUCTS.
 - 1/4"ø CRETE-FLEX TAPCON AS MANUFACTURED BY ELCO CONSTRUCTION PRODUCTS.

NOTES:

- A.1) MINIMUM THREADED PENETRATION OF MALE PANELMATE ANCHOR INTO WOOD SHALL BE 1 7/8".
- A.2) MINIMUM THREADED PENETRATION OF CRETE-FLEX TAPCONS INTO WOOD SHALL BE 1 1/2".
- A.3) IN CASE THAT PRECAST STONE OR PRECAST CONCRETE PANELS BE FOUND ON THE EXISTING WALL, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1 & A.2).

- (B) TO EXISTING POURED CONCRETE:
- 1/4"ø MALE PANELMATE ANCHOR AS MANUFACTURED BY ELCO CONSTRUCTION PRODUCTS. (MIN. $f'_c=3350$ psi)
 - 1/4"ø CRETE-FLEX TAPCON AS MANUFACTURED BY ELCO CONSTRUCTION PRODUCTS. (MIN. $f'_c=3350$ psi.)

NOTES:

- B.1) MINIMUM EMBEDMENT OF MALE PANELMATE ANCHOR INTO POURED CONCRETE SHALL BE 1 1/4".
- B.2) MINIMUM EMBEDMENT OF CRETE-FLEX TAPCONS INTO POURED CONCRETE SHALL BE 1 3/4".

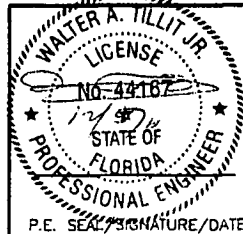
B.3) IN CASE THAT PRECAST STONE OR PRECAST CONCRETE PANELS BE FOUND ON THE EXISTING WALL, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES B.1 & B.2).

- (C) TO EXISTING CONCRETE ASTM C-90 BLOCK WALL:
- 1/4"ø MALE PANELMATE ANCHOR AS MANUFACTURED BY ELCO CONSTRUCTION PRODUCTS. (MIN. $f'_m = 2000$ psi.)
 - 1/4"ø CRETE-FLEX TAPCON AS MANUFACTURED BY ELCO CONSTRUCTION PRODUCTS.

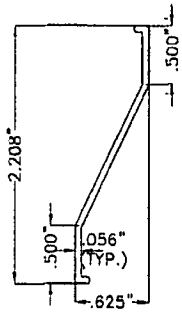
NOTES:

- C.1) MINIMUM EMBEDMENT OF MALE PANELMATE ANCHOR INTO CONCRETE BLOCK UNIT SHALL BE 1 1/4".
- C.2) MINIMUM EMBEDMENT OF CRETE-FLEX TAPCONS INTO CONCRETE BLOCK UNIT SHALL BE 1 1/4".
- C.3) IN CASE THAT PRECAST STONE OR PRECAST CONCRETE PANELS BE FOUND ON THE EXISTING WALL, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES C.1 & C.2).
- (D) ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.

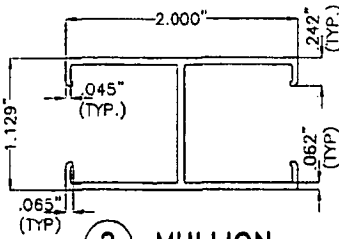
8. EACH SHUTTER SHALL HAVE A LEGIBLE AND READILY VISIBLE MARKING INSTRUCTING OWNER OR TENANT TO SECURE SHUTTER WITH SILL BRACKETS AND ALUMINUM BACK UP SHEET DURING PERIODS OF HURRICANE WARNINGS.
9. IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE SOUNDNESS OF THE STRUCTURE WHERE SHUTTER IS TO BE ATTACHED TO INSURE PROPER ANCHORAGE. CONTRACTOR TO SEAL/CAULK ALL SHUTTER COMPONENT EDGES WHICH REMAIN IN CONTINUOUS CONTACT WITH THE BUILDING TO PREVENT WIND/RAIN INTRUSION.
10. OWNER TO BE RESPONSIBLE FOR PROVIDING A SUITABLE PLATFORM OR BALCONY WHEN SECURING UNIT DURING HURRICANE WARNINGS.
11. ALUMINUM BAHAMA SHUTTER'S INSTALLATION SHALL COMPLY WITH SPECS INDICATED IN THIS DRAWING PLUS ANY BUILDING AND ZONING REGULATIONS PROVIDED BY THE JURISDICTION WHERE PERMIT IS APPLIED TO.
12. (a) THIS PRODUCT EVALUATION DOCUMENT (P.E.D.) PREPARED BY THIS ENGINEER IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR A SITE SPECIFIC PROJECT; I. E. WHERE THE SITE CONDITIONS DEVIATE FROM THE P.E.D.
 - (b) CONTRACTOR TO BE RESPONSIBLE FOR THE SELECTION, PURCHASE AND INSTALLATION INCLUDING LIFE SAFETY OF THIS PRODUCT, BASED ON THIS PRODUCT EVALUATION DOCUMENT, PROVIDED HE/SHE DOES NOT DEVIATE FROM THE CONDITIONS DETAILED ON THIS DOCUMENT. CONSTRUCTION SAFETY AT SITE IS THE CONTRACTOR'S RESPONSIBILITY.
 - (c) THIS PRODUCT EVALUATION DOCUMENT WILL BE CONSIDERED INVALID IF ALTERED BY ANY MEANS.
 - (d) SITE SPECIFIC PROJECTS SHALL BE PREPARED BY A FLORIDA PROFESSIONAL ENGINEER OR ARCHITECT WHICH WILL BECOME THE ENGINEER OF RECORD (E.O.R.) FOR THE PROJECT AND WHO WILL BE RESPONSIBLE FOR THE PROPER USE OF THE P.E.D. ENGINEER OF RECORD, ACTING AS A DELEGATED ENGINEER TO THE P.E.D. ENGINEER, SHALL SUBMIT TO THIS LATTER THE SITE SPECIFIC DRAWINGS FOR REVIEW.
 - (e) THIS P.E.D. SHALL BEAR THE DATE AND ORIGINAL SEAL AND SIGNATURE OF THE PROFESSIONAL ENGINEER OF RECORD THAT PREPARED IT.
13. SHUTTER MANUFACTURER'S LABEL SHALL BE LOCATED ON A READILY VISIBLE LOCATION AT PANEL IN ACCORDANCE WITH SECTION 1715.8.3 OF FLORIDA BUILDING CODE. ONE LABEL SHALL BE PLACED FOR EVERY OPENING LABELING TO COMPLY WITH SECTION 1715.8.2 OF THE FLORIDA BUILDING CODE.



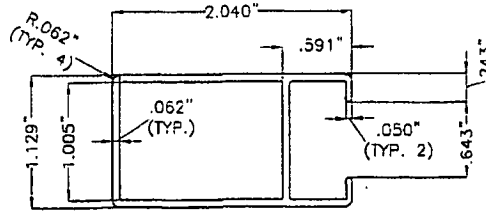
FLORIDA-BUILDING CODE (Non High Velocity Hurricane Zone)					
©2011 TILTECO, INC		ALUMINUM BAHAMA SHUTTER		M.C.V./A.G. DRAWN BY:	
TILTECO INC. TILLIT TESTING & ENGINEERING COMPANY 6330 N.W. 36th Pl., Ste. 303, Miramar, Florida 33181 Phone: (305) 871-1534 Fax: (305) 871-1531 e-mail: tilteco@aol.com EB-0008719 WALTER A. TILLIT JR., P.E. FLORIDA Lic. # 44167		EASTERN METAL SUPPLY, INC		12/05/11 DATE	
		4268 WESTROADS DRIVE WEST PALM BEACH, FL 33407 Phone: (561) 432-2204 Fax: (561) 208-8580		11-218 DRAWING No	
REV. No	DESCRIPTION	DATE	REV. No	DESCRIPTION	DATE
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					SHEET 1 OF 9



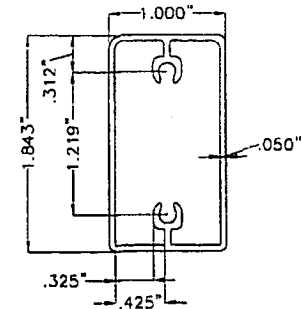
1 LOUVER BLADE
ALUMINUM 6063-T6 ALLOY



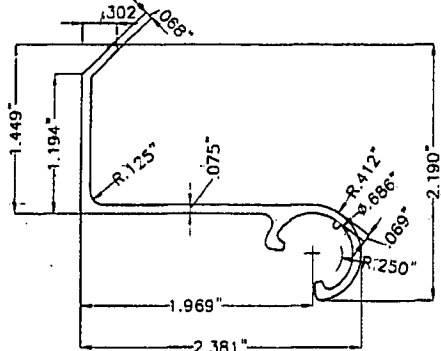
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ALUMINUM 6063-T6 ALLOY



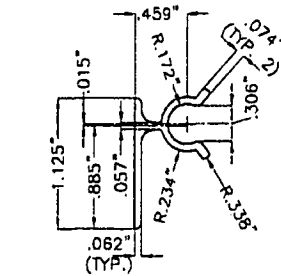
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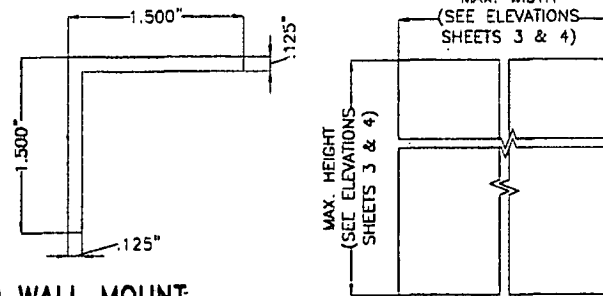
4 HORIZONTAL
ALUMINUM 6063-T6 ALLOY



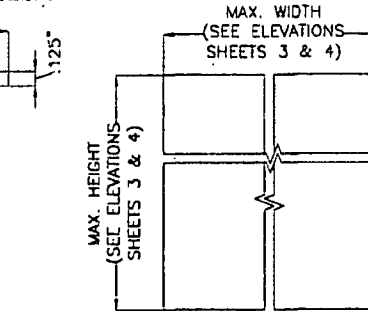
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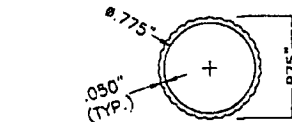
6 HINGE PIN
ALUMINUM 6063-T6 ALLOY



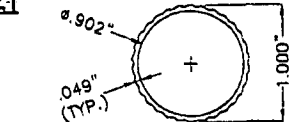
7 WALL MOUNT Alum. BRACKET
ALUMINUM 6063-T6 ALLOY
2\"/>



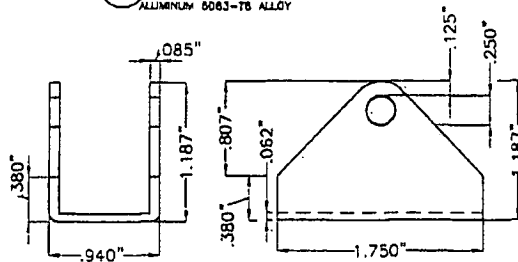
8 ALUMINUM BACK UP SHEET
3004-H34 OR 5052-H32 ALLOY
0.050\"/>



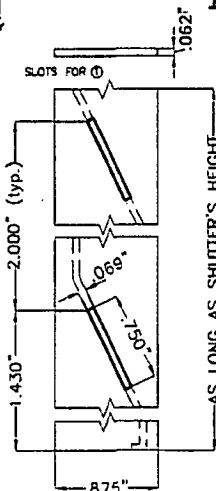
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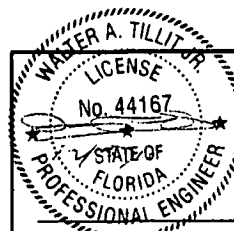
11 CAMEL BACK HINGE
ALUMINUM 6063-T6 ALLOY



12 JAMB STRIP
ALUMINUM 6063-T6 ALLOY

COMPONENTS

SCALE: 1" = 1"



P.E. SEAL/SIGNATURE/DATE

FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)

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TILLIT TESTING & ENGINEERING COMPANY
4288 W. 25th St., Bldg. 303 WEST PALM BEACH, FLORIDA 33409
Phone: (561)371-1830 Fax: (561)371-1531
e-mail: Utiteco@aol.com
ES-0000719
WALTER A. TILLITT, P.E.
FLORIDA Lic. # 44187

ALUMINUM BAHAMA SHUTTER

EASTERN METAL SUPPLY, INC

4288 WESTROADS DRIVE
WEST PALM BEACH, FL 33409
Phone: (800)532-2204 Fax: (561)209-8380

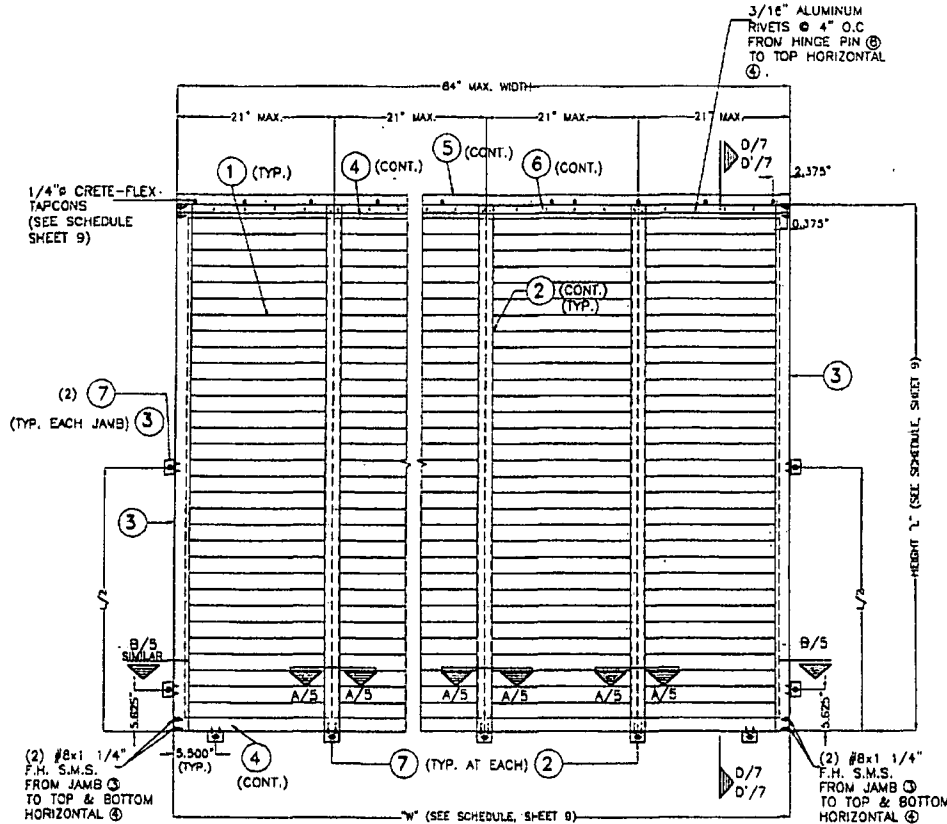
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DRAWN BY:

12/05/11
DATE

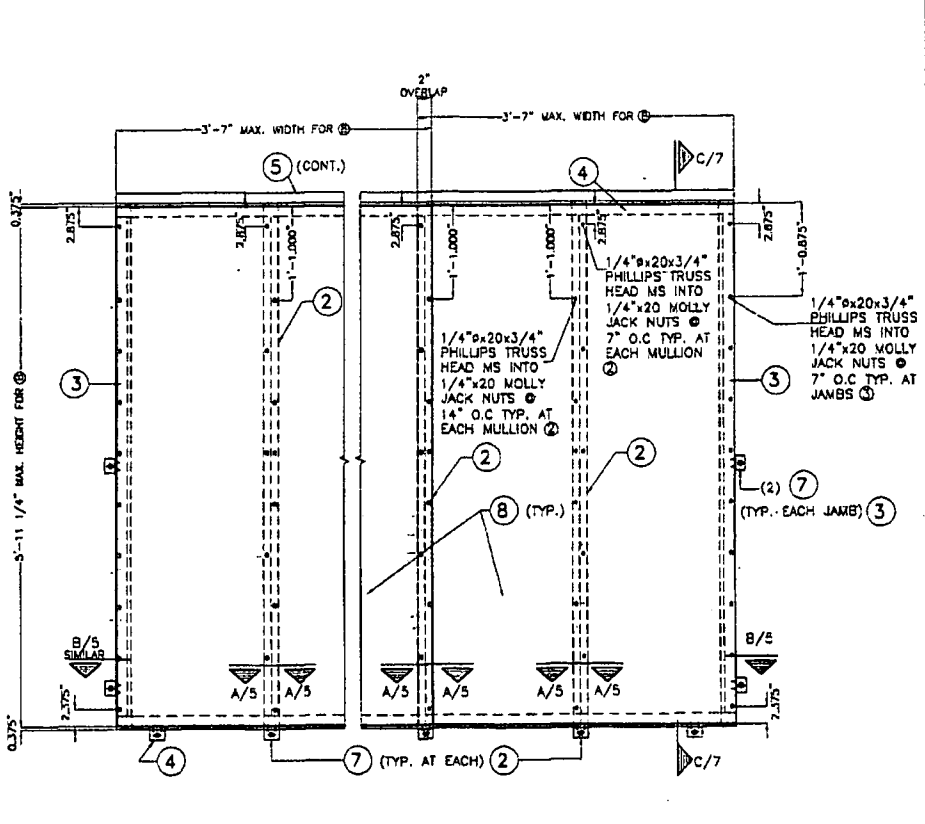
11-216
DRAWING No

REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION	DATE
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2			3		
3			4		

SHEET 2 OF 9



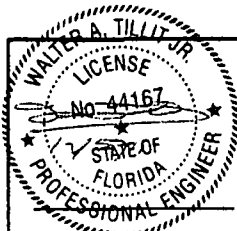
FRONT ELEVATION W/O ALUMINUM BACK UP SHEET (8)
(NON HURRICANE POSITION)



FRONT ELEVATION W/ ALUMINUM BACK UP SHEET (8)
CONNECTION TO SHUTTER FRAME
(HURRICANE POSITION)

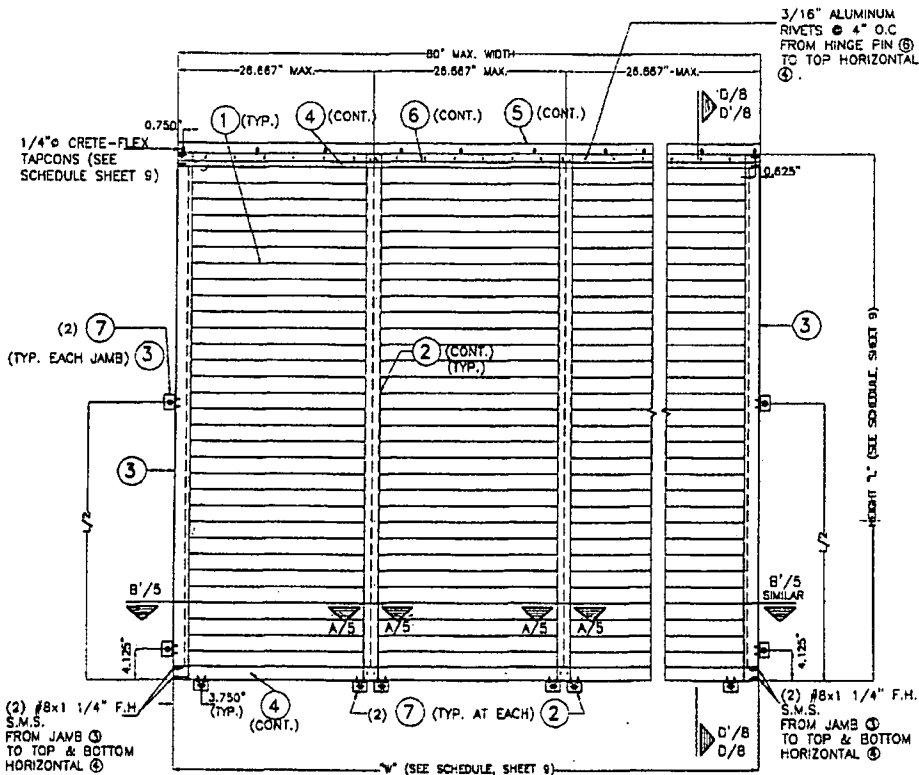
ELEVATIONS FOR INSTALLATIONS INTO WOOD SUBSTRATE

SCALE = 3/4" = 1'-0"

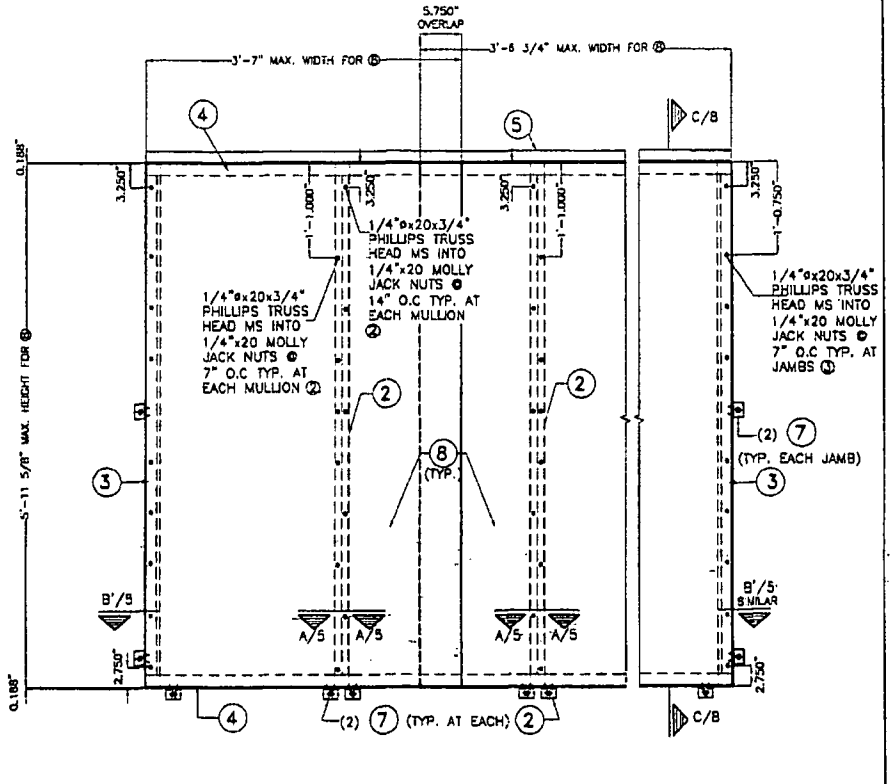


P.E. SEAL/SIGNATURE/DATE

<p>FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)</p> <p>02211 TILECO, INC</p> <p>TILECO INC.</p> <p>TILLIT TESTING & ENGINEERING COMPANY 6305 N.W. 32nd St., Box 329 VERO BEACH, FLORIDA 32988 Phone: (386)711-1830 / Fax: (386)711-1931 e-mail: tileco@aol.com EB-0000719 WALTER A. TILLIT JR., P.E. FLORIDA Lic. # 44167</p>		<p>ALUMINUM BAHAMA SHUTTER</p> <p>EASTERN METAL SUPPLY, INC 4268 WESTROADS DRIVE WEST PALM BEACH, FL 33407 Phone: (888)432-2204 / Fax: (561)209-8380</p>	<p>M.C.V./A.Q. DRAWN BY:</p> <p>12/05/11 DATE</p> <p>11-216 DRAWING No</p> <p>SHEET 3 OF 9</p>		
REV. NO.	DESCRIPTION	DATE	BY	CHECKED	DATE
1	ADD 11-014	12/05/11			



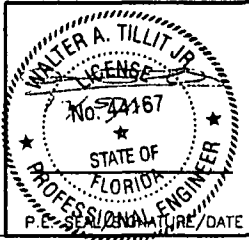
FRONT ELEVATION W/O ALUMINUM BACK UP SHEET (8)
(NON HURRICANE POSITION)



FRONT ELEVATION W/ ALUMINUM BACK UP SHEET (8)
CONNECTION TO SHUTTER FRAME
(HURRICANE POSITION)

**ELEVATIONS FOR INSTALLATIONS INTO
CONCRETE OR CONCRETE BLOCK SUBSTRATES**

SCALE = 3/4" = 1'-0"



FLORIDA BUILDING CODE (Non High Velocity Hurricane Zone)														
02011 TILTECO, INC	TILTECO INC.	W.C.V./A.G. DRAWN BY:												
TILLIT TESTING & ENGINEERING COMPANY 6350 N.W. 26th St., Ste. 102 Miramar, Florida 33166 Phone: (305)871-1180 Fax: (305)871-1131 e-mail: tilteco@aol.com FB-0006719 WALTER A. TILLIT JR., P.E. FLORIDA Lic. # 44167		ALUMINUM BAHAMA SHUTTER												
EASTERN METAL SUPPLY, INC 4268 WESTROADS DRIVE WEST PALM BEACH, FL 33407 Phone: (800)432-2204 Fax: (561)209-8380		12/05/11 DATE												
WALTER A. TILLIT JR., P.E. FLORIDA Lic. # 44167		11-216 DRAWING No												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>REV. No</th> <th>DESCRIPTION</th> <th>DATE</th> <th>REV. No</th> <th>DESCRIPTION</th> <th>DATE</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>04.0 11-011</td> <td>12/02/11</td> <td>1</td> <td></td> <td></td> </tr> </tbody> </table>		REV. No	DESCRIPTION	DATE	REV. No	DESCRIPTION	DATE	1	04.0 11-011	12/02/11	1			SHEET 4 OF 9
REV. No	DESCRIPTION	DATE	REV. No	DESCRIPTION	DATE									
1	04.0 11-011	12/02/11	1											

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

Mon

Tue

Wed

Thur

Fri

8-22-13

Page 2 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
930	72 S River Rd Horizon Pools	(Wade) 801-8510	OK	INSPECTOR
10331	Stejskal 108 S Sewalls Duftwood	Final Fuel	Pass	Close INSPECTOR
10564	Caruso 29 S. St Rd Tire Homes by Rick	FINAL 3 WATER	Pass	Close INSPECTOR
10503	Mc BRIDE 19 N. Via Lucinda OB	R. PLUMB R. ELEC	Pass	INSPECTOR
10550	Seton 5 LANTANA ALL AMERICAN	DRY IN 4 LEGAL	FAIL	NAILS EXPOSED AT DRIP EDGE INSPECTOR
				INSPECTOR
				INSPECTOR

10611

GARAGE DOOR



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:	10611	DATE ISSUED:	SEPTEMBER 30, 2013
SCOPE OF WORK:	REPLACE GARAGE DOOR		
CONTRACTOR:	OVERHEAD DOOR CORP		
PARCEL CONTROL NUMBER:	013841009-000-000904	SUBDIVISION	MIRAMAR - LOT 9
CONSTRUCTION ADDRESS:	24 S SEWALLS PT RD		
OWNER NAME:	CARUSO		
QUALIFIER:	JONI LYNN LOPEZ	CONTACT PHONE NUMBER:	283-4166

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

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

24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

INSPECTIONS

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

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

Town of Sewall's Point

Date: 9-26-13

BUILDING PERMIT APPLICATION

Permit Number: 10611

OWNER/LESSEE NAME: Salvatore Caruso Phone (Day) (718) 924-1100 (Fax)

Job Site Address: 24 S. Sewalls Point Rd. City: Stuart State: FL Zip: 34996

Legal Description: Miramar Lot 9 Parcel Control Number: 01-38-41-009-000-00090-4

Fee Simple Holder Name: Address:

City: State: Zip: Telephone:

*SCOPE OF WORK (PLEASE BE SPECIFIC):

Replacing Garage Door

WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application) YES NO [checked]

COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ 1440.00

Has a Zoning Variance ever been granted on this property? YES (YEAR) NO

Is subject property located in flood hazard area? VE10 AE9 AE8 X FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$

Construction Company: Overhead Door Corp. Phone (772) 283-4166 Fax: (772) 220-1757

Qualifiers name: Joni Lopez Street: 4425 sw Port Way City: Palm City State: FL Zip: 34990

State License Number: N/A OR: Municipality: MCGD 6454 License Number:

LOCAL CONTACT: Joni Lopez Phone Number: (772) 283-4166

DESIGN PROFESSIONAL: N/A Fla. license#

Street: City: State: Zip: Phone Number:

AREAS SQUARE FOOTAGE: Living: Garage: Covered Patios Porches Enclosed Storage:

Carport: Total under Roof Elevated Deck: Enclosed area below BFE*

* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT, THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS:

- 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007-SECT. 105.4.1, 105.4.1.1 - .5.

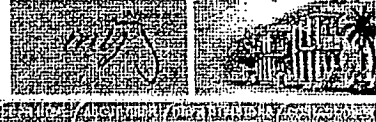
***** A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS *****

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

OWNER / AGENT / LESSEE NOTARIZED SIGNATURE: Nira Pedrosa Caruso State of Florida, County of: Martin On This the 27 day of Sept, 2013 by Nira Pedrosa Caruso who is personally known to me or produced FDL# P362620-67-529-0 As identification: Valerie Camlet Notary Public My Commission Expires:

CONTRACTOR / LICENSEE NOTARIZED SIGNATURE: Joni Lynn Lopez State of Florida, County of: Martin On This the 26 day of Sept, 2013 by Joni Lynn Lopez known to me or produced FDL# L120-430-411-11-10 As identification: Valerie Camlet Notary Public My Commission Expires:

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!



Florida Department of
Business & Professional
Regulation

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Product Approval
USER: Public User

Use it efficiently. Regulate fairly.

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FL #	FL8248-R9
Application Type	Revision
Code Version	2010
Application Status	Approved
Comments	
Archived	<input type="checkbox"/>
Product Manufacturer	Wayne-Dalton, a division of Overhead Door Corporation
Address/Phone/Email	3395 Addison Drive Pensacola, FL 32514 (850) 475-6000 gtaylor@Wayne-Dalton.com
Authorized Signature	Greg Taylor gtaylor@Wayne-Dalton.com
Technical Representative	Greg Taylor
Address/Phone/Email	3395 Addison Drive Pensacola, FL 32514 (850) 474-9890 gtaylor@wayne-dalton.com
Quality Assurance Representative	
Address/Phone/Email	
Category	Exterior Doors
Subcategory	Sectional Exterior Door Assemblies
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer
	<input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Jeffrey P. Arneson
Florida License	PE-58544
Quality Assurance Entity	Intertek Testing Services NA Inc. - ETL/Warnock Hersey
Quality Assurance Contract Expiration Date	03/06/2020
Validated By	Kurt Dietrich PE
	<input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received
Certificate of Independence	FL8248_R9_COI_Cert_Ind.pdf
Referenced Standard and Year (of Standard)	
	Standard
	Year
	ANSI/DASMA-108
	2002
	ANSI/DASMA-115
	2005
	TAS-201
	1994
	TAS-202
	1994
	TAS-203
	1994



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

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT

FILE COPY

FORMULA FOR DESIGN PRESSURES

Example: 25 ft mean roof height, exposure C - 16 X 7 Door 140mph.

Pressure	Exposure C multiplier	Req. Design Pressure
29.7	X 1.35	= +40.095
-33.1	X 1.35	= -44.685

Garage Door must be rated at +40.1/-44.68 minimum. This must be completed for exposure G:

=====

Pressure	Exposure C multiplier	Req. Design Pressure
_____	X _____	= _____ (+)
_____	X _____	= _____ (-)

TABLE 1609.3.1
 EQUIVALENT BASIC WIND SPEEDS^{a,b,c}

V3S	85	90	100	105	110	120	125	130	140	145	150	160	170
Vfm	71	76	85	90	95	104	109	114	123	128	133	142	152

For SI: 1 mile per hour = 0.44 m/s.

- a. Linear interpolation is permitted.
- b. V3S is the 3-second gust wind speed (mph).
- c. Vfm is the fastest mile wind speed (mph).

TABLE 1609.6(2)

MEAN ROOF HEIGHT (feet)	EXPOSURE		
	B	C	D
15	1.00	1.21	1.47
20	1.00	1.29	1.55
25	1.00	1.35	1.61
30	1.00	1.40	1.66
35	1.05	1.45	1.70
40	1.09	1.49	1.74
45	1.12	1.53	1.78
50	1.16	1.56	1.81
55	1.19	1.59	1.84
60	1.22	1.62	1.87

For SI: 1 foot=304.8 mm.

All table values shall be adjusted for other exposures and heights by multiplying by the above coefficients.

TABLE 1609.6(1)

Effective Wind Area		Basic Wind Speed V (mph - 3 second gust)															
Width (ft)	Height (ft)	85	90	100	110	120	130	140	150								
Roof Angle 0 - 10 degrees																	
8	8	10.5	-11.9	11.7	-13.3	14.5	-16.4	17.5	-19.9	20.9	-23.6	24.5	-27.7	28.4	-32.2	32.6	-36.9
10	10	10.1	-11.4	11.4	-12.7	14.0	-15.7	17.0	-19.0	20.2	-22.7	23.7	-26.6	27.5	-30.8	31.6	-35.4
14	14	10.0	-10.7	10.8	-12.0	13.3	-14.8	16.1	-17.9	19.2	-21.4	22.5	-25.1	26.1	-29.1	30.0	-33.4
Roof Angle > 10																	
9	7	11.4	-12.9	12.8	-14.5	15.8	-17.9	19.1	-21.6	22.8	-25.8	26.7	-30.2	31.0	-35.1	35.6	-40.2
16	7	10.9	-12.2	12.3	-13.7	15.2	-16.9	18.3	-20.4	21.8	-24.3	25.6	-28.5	29.7	-33.1	34.1	-38.0

For SI: 1 Square foot = 0.929 m², 1 mph = 0.447 m/s, 1 psf = 47.88 N/m²

1. For effective areas or wind speeds between those given above the load may be interpolated, otherwise use the load associated with the lower effective area.
2. Table values shall be adjusted for height and exposure by multiplying by adjustment coefficients in Table 1609.6 (2).
3. Plus and minus signs signify pressures acting toward and away from the building surfaces.
4. Negative pressures assume door has 2 feet of width in building's end zone

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

6-7-14

Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10726	Gil 34 Kew Vista Dr Stuart Fence	Final Fence	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10611	Caruso 24 S Sewalls Overhead door	Final Garage door	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10639	Caruso 24 S Sewalls Dockscapes	Final retaining wall	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10708	GOLDEN 15 MIDDLE RD WINTING CONST	ROOF FINAL	PASS	Pics INSPECTOR <i>[Signature]</i>
	13 SIMONA	<i>[Signature]</i>		INSPECTOR
				INSPECTOR
				INSPECTOR
				INSPECTOR

10637

RETAINING WALL

EXTENSION



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:	10637	DATE ISSUED:	OCTOBER 17, 2013
SCOPE OF WORK:	RETAINING WALL EXTENSION		
CONTRACTOR:	DOCKSCAPES		
PARCEL CONTROL NUMBER:	013841009-000-000904	SUBDIVISION	MIRAMAR - LOT 9
CONSTRUCTION ADDRESS:	24 S SEWALLS PT RD		
OWNER NAME:	CARUSO		
QUALIFIER:	RONALD SKERIK	CONTACT PHONE NUMBER:	334-0600

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

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

24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

INSPECTIONS

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

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: 10637

Date: _____

OWNER/LESSEE NAME: SALVATORE R. CARUSO / NIVIA PEDROZA - CARUSO Phone (Day) 7189241100 (Fax) _____

Job Site Address: 24 S. SEWALLS PT. RD. City: SEWALLS POINT State: FL Zip: 34996

Legal Description _____ Parcel Control Number: _____

Fee Simple Holder Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Retain wall / Sewall Extension

WILL OWNER BE THE CONTRACTOR?
(If yes, Owner Builder questionnaire must accompany application)
YES _____ NO _____

Has a Zoning Variance ever been granted on this property?
YES _____ (YEAR) _____ NO _____
(Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 3,200.00
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Duckscap's LLC Phone: 772-334-0600 Fax: _____

Qualifiers name: Ron Skerik Street: 1661 N. 2nd ST City: Jensen State: FL Zip: 34517

State License Number: _____ OR: Municipality: _____ License Number: CMAR 5425

LOCAL CONTACT: Ron Skerik Phone Number: 772-334-0600

DESIGN PROFESSIONAL: [Redacted] Fla. License# _____

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

AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/Porches: _____ Enclosed Storage: _____

Carport: _____ Total under Roof: _____ Elevated Deck: _____ Enclosed area below BEE: _____
* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT. THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010
National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS:

1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

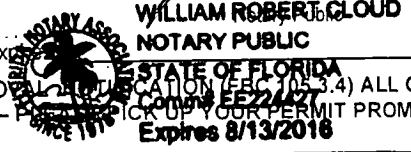
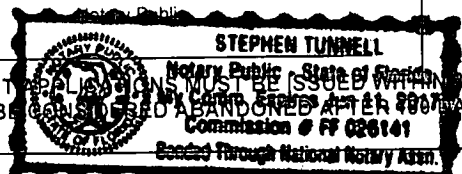
*******A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*******

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

OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE:
X [Signature]
State of Florida, County of: Martin
On This the 19th day of September, 2013
by Nivia Pedroza-Caruso who is personally
known to me or produced FLDL
As identification: [Signature]

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
X [Signature]
State of Florida, County of: Martin
On This the 1 day of October, 2013
by Ronald Skerik who is personally
known to me or produced FL Drivers 8-29-19
As identification: [Signature]

My Commission Expires: _____
SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 90 DAYS OF APPROVAL. ALL OTHER APPLICATIONS WILL BE ABANDONED AFTER 30 DAYS (FBC 105.3.2) - PICK UP YOUR PERMIT PROMPTLY!
Expires 8/13/2016



10637

NOTICE OF COMMENCEMENT

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00 (\$7,500 Mechanical)

PERMIT #: _____ TAX FOLIO #: _____

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE): 24 S. Sewalls point Rd Sewalls point, FL 34996 Lot 9 *Minor*

GENERAL DESCRIPTION OF IMPROVEMENT: Sewall/Retaining Wall Addition

OWNER NAME OR LESSEE INFORMATION, IF LESSEE CONTRACTED FOR THE IMPROVEMENT
NAME: SALVATORE R. CARUSO / NIVIA PEDROZA-CARUSO
ADDRESS: 24 S. SEWALLS PT. RD. SEWALLS POINT FL 34996
PHONE NUMBER: 718 924 1100 FAX NUMBER: _____
INTEREST IN PROPERTY: OWNER

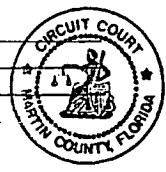
NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER):

CONTRACTOR: Dockscapes LLC
ADDRESS: 1661 Mc 22nd St Jensen Beach, FL 34957
PHONE NUMBER: 771-334-0600 FAX NUMBER: _____

SURETY COMPANY (IF APPLICABLE, A COPY OF THE PAYMENT BOND IS ATTACHED)
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____
BOND AMOUNT: _____ STATE OF FLORIDA
MARTIN COUNTY

LENDER/MORTGAGE COMPANY: _____
ADDRESS: _____
PHONE NUMBER: _____

THIS IS TO CERTIFY THAT THE FOREGOING PAGE(S) IS A TRUE AND CORRECT COPY OF THE ORIGINAL DOCUMENT AS FILED IN THIS OFFICE.
CAROLYN TIMMANN, CLERK



PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON RECORDING OF THIS INSTRUMENT AS PROVIDED BY SECTION 713.13 (1) (b), FLORIDA STATUTES.
NAME: _____ BY: [Signature] D.C.
ADDRESS: _____ DATE: 10/25/13
PHONE NUMBER: _____ FAX NUMBER: _____

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES Tom Shank OF Dockscapes TO RECORD A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES:

PHONE NUMBER: _____ FAX NUMBER: _____ EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
EXPIRATION DATE MAY NOT BE BEFORE THE COMPLETION OF CONSTRUCTION AND FINAL PAYMENT TO CONTRACTOR BUT WILL BE ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED

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

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

[Signature]
SIGNATURE OF OWNER OR LESSEE OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER/ATTORNEY-IN-FACT

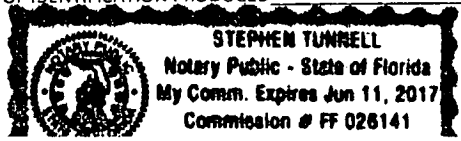
SIGNATORY'S TITLE/OFFICE _____

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 14th DAY OF Sept, 2013

BY: Nivia Pedroza-CarusO AS owner FOR self
NAME OF PERSON TYPE OF AUTHORITY PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN _____ OR PRODUCED IDENTIFICATION TYPE OF IDENTIFICATION PRODUCED FL DL

[Signature]
NOTARY SIGNATURE/SEAL



INSTR 2423240 OR BK 2584 PG 320 RECD 10/25/2013 01:23:59 PM
CAROLYN TIMMANN MARTIN COUNTY CLERK
DEED DOC \$0.00 M16 DOC \$0.00 INTANGIBLE \$0.00

**Martin County, Florida
Laurel Kelly, C.F.A**

generated on 10/2/2013 10:16:14 AM EDT

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-009-000-00090-4	17749	24 S SEWALL'S POINT RD, SEWALL'S POINT	\$669,240	9/28/2013

Owner Information

Owner(Current)	CARUSO SALVATORE R PEDROZE-CARUSO NIVIA
Owner/Mail Address	24 S SEWALLS POINT RD STUART FL 34996
Sale Date	3/18/2013
Document Book/Page	2638 0057
Document No.	2383607
Sale Price	775000

Location/Description

Account #	17749	Map Page No.	SP-03
Tax District	2200	Legal Description	MIRAMAR LOT 9
Parcel Address	24 S SEWALL'S POINT RD, SEWALL'S POINT		
Acres	.6510		

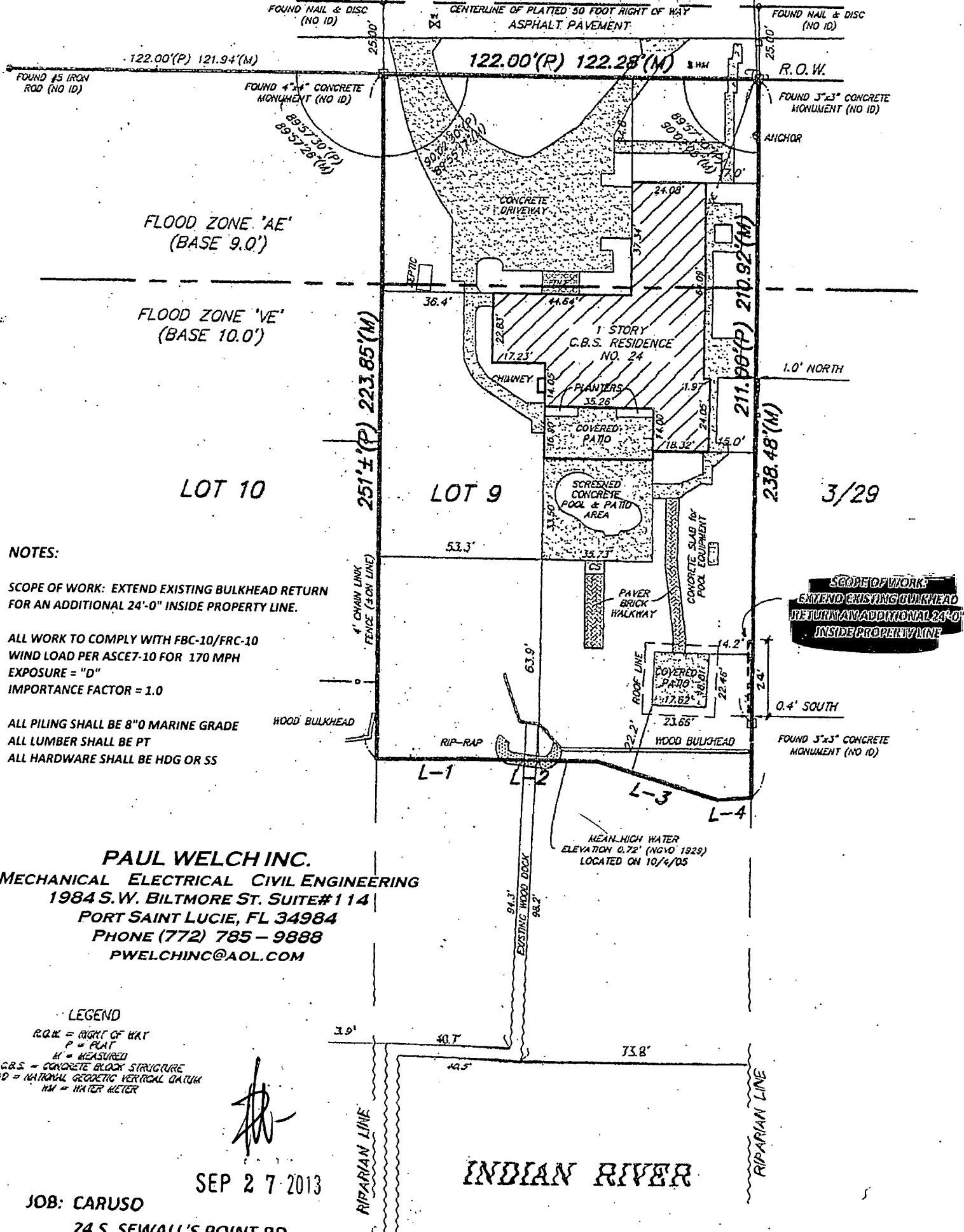
Parcel Type

Use Code	0100 Single Family
Neighborhood	193110 ARCHIPELAGO, HIGH PTCANAL

Assessment Information

Market Land Value	\$504,000
Market Improvement Value	\$165,240
Market Total Value	\$669,240

SOUTH SEWALL'S POINT ROAD



NOTES:

SCOPE OF WORK: EXTEND EXISTING BULKHEAD RETURN FOR AN ADDITIONAL 24'-0" INSIDE PROPERTY LINE.

ALL WORK TO COMPLY WITH FBC-10/FRC-10 WIND LOAD PER ASCE7-10 FOR 170 MPH EXPOSURE = "D" IMPORTANCE FACTOR = 1.0

ALL PILING SHALL BE 8"Ø MARINE GRADE ALL LUMBER SHALL BE PT ALL HARDWARE SHALL BE HDG OR SS

SCOPE OF WORK: EXTEND EXISTING BULKHEAD RETURN AN ADDITIONAL 24'-0" INSIDE PROPERTY LINE

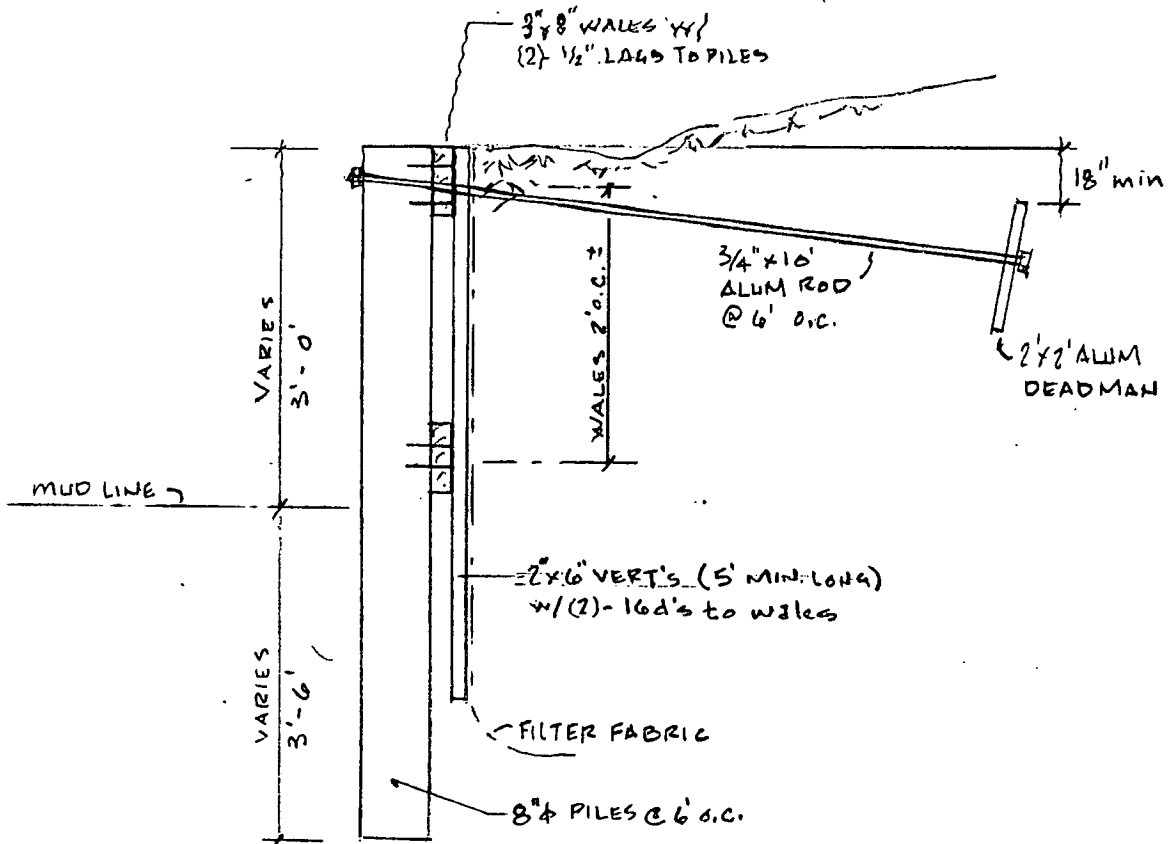
PAUL WELCH INC.
 MECHANICAL ELECTRICAL CIVIL ENGINEERING
 1984 S.W. BILTMORE ST. SUITE#114
 PORT SAINT LUCIE, FL 34984
 PHONE (772) 785-9888
 PWELCHINC@AOL.COM

LEGEND

- R.O.W. = RIGHT OF WAY
- P = PLAT
- M = MEASURED
- C.B.S. = CONCRETE BLOCK STRUCTURE
- NGVD = NATIONAL GEODETIC VERTICAL DATUM
- HM = HALF METER

SEP 27 2013

JOB: CARUSO
 24 S. SEWALL'S POINT RD.
 SEWALL'S POINT, FLORIDA

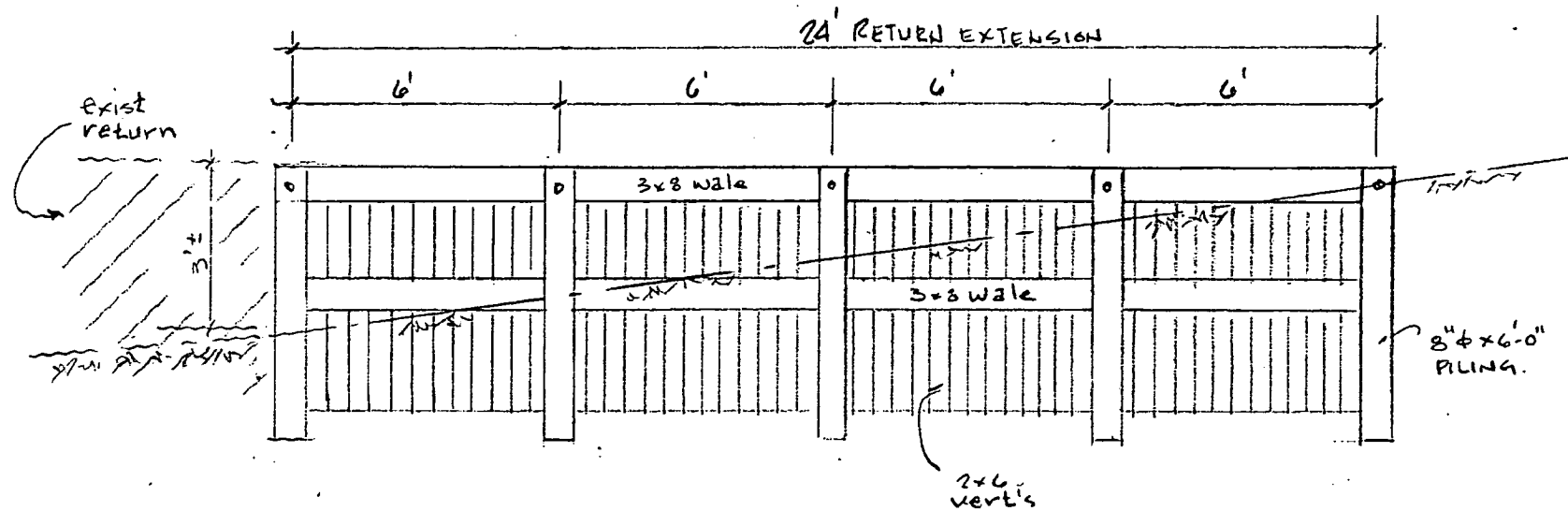


RETURN TYP SECTION NTS

JOB: CARUSO
 24 S. SEWALL'S POINT RD.
 SEWALL'S POINT, FLORIDA

PAUL WELCH INC.
 MECHANICAL ELECTRICAL CIVIL ENGINEERING
 1984 S.W. BILTMORE ST. SUITE#114
 PORT SAINT LUCIE, FL 34984
 PHONE (772) 785 - 9888
 PWELCHINC@AOL.COM

SEP 27 2013



ELEVATION @ RETURN 1/4"

JOB: CARUSO
24 S. SEWALL'S POINT RD.
SEWALL'S POINT, FLORIDA

PAUL WELCH INC.
MECHANICAL ELECTRICAL CIVIL ENGINEERING
1984 S.W. BILTMORE ST. SUITE#114
PORT SAINT LUCIE, FL 34984
PHONE (772) 785 - 9888
PWELCHINC@AOL.COM

SEP 27 2013

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

6-28-13

Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10645	Dd Massandrio	A/C		CLOSE
(10128)	4 Emerita Grossman	Change out	PASS	Council 398-9725 INSPECTOR <i>[Signature]</i>
10641	Hanmock	A/C		CLOSE
(10128)	25 Rio Vista Grossman	Change out	PASS	Council 398-9725 INSPECTOR <i>[Signature]</i>
10580	John Wye/liff	Pool Deck		CLOSE
(1028)	26 N. River Rd Kei Yu Ho/Keen	Final	PASS	Keen 215- Keen 0662 INSPECTOR <i>[Signature]</i>
10488	Martin Lehman	Mech.		CLOSE
(after 11am 10128)	10 Ridgeland Service America	Final	PASS	954-979-1100 Sherry x567 INSPECTOR <i>[Signature]</i>
10631	(Rm) Adesca...	...	PASS	
	2155 Pk	...		
	Caruso			INSPECTOR <i>[Signature]</i>
10598	Ellie's	Final		CLOSE
Am	106 Henry Sewalls Porch Factory	Screen Enc.	PASS	<i>[Signature]</i> INSPECTOR
10638	Novins	Final		
	111 S Sewalls	deck	PASS	CLOSE
	RJ Maddox			INSPECTOR <i>[Signature]</i>

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

6-7-14

Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10726	Gil 34 Kew Vista Dr Stuart Fence	Final Fence	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10611	Caruso 24 S Sewalls Overhead door	Final Garage door	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10637	Caruso 24 S Sewalls Dockscapes	Final retaining wall	PASS	CLOSE INSPECTOR <i>[Signature]</i>
10708	GOLDEN 15 MIDDLE RD WINTING CONST	ROOF FINAL	PASS	Pics INSPECTOR <i>[Signature]</i>
	13 SIMARA	<i>[Signature]</i>		INSPECTOR
				INSPECTOR
				INSPECTOR
				INSPECTOR

10797

FENCE



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:	10797	DATE ISSUED:	03/10/2014
SCOPE OF WORK:	FENCE		
CONTRACTOR:	A GREAT FENCE		
PARCEL CONTROL NUMBER:	01384100900000904	SUBDIVISION	MIRAMAR LOT 9
CONSTRUCTION ADDRESS:	24 S SEWALL'S POINT ROAD		
OWNER NAME:	CARUSO		
QUALIFIER:	DARRICK BAILEY	CONTACT PHONE NUMBER:	772 812-0223

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY**

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	10797	
ADDRESS	24 SOUTH SEWALL'S POINT ROAD	
DATE 03/10/2014	FENCE	

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

ACCESSORY PERMIT	Declared Value:	\$	
Total number of inspections @ \$100.00 each	1		100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min		\$	2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	109.00

*Pa 3/11/14
 CK 5984*

Town of Sewall's Point

Date: FEB. 17, 2014 BUILDING PERMIT APPLICATION Permit Number: 10797

OWNER/LESSEE NAME: SALVATORE CARUSO Phone (Day) 678-1198 (Fax)

Job Site Address: 24 S. SEWALL'S PT RD City: SEWALL'S PT State: FL Zip: 34996

Legal Description MIRAMHU LOT 9 Parcel Control Number: 01-38-41-009-000-00090-4

Fee Simple Holder Name: Address:

City: State: Zip: Telephone:

*SCOPE OF WORK (PLEASE BE SPECIFIC): INSTALL 15 1/2' L.F. OF 6" THICK PUNNY PVC 1-9" DOOR

WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application) YES NO X

Has a Zoning Variance ever been granted on this property? YES (YEAR) NO (Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ 980.00 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out) Is subject property located in flood hazard area? VE10 AE9 AE8 X FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ (Fair Market Value of the Primary Structure only, Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: A GALT FENCE Phone: 812-0223 Fax: 408-0272

Qualifiers name: DANLUCK BAILEY Street: 540 NW MERCANTILE PL City: PSL State: FL Zip: 34986

State License Number: N/A OR: Municipality: MCFE 5176 M.C License Number: MCFE 5176

LOCAL CONTACT: DANLUCK BAILEY Phone Number: 772-812-0223

DESIGN PROFESSIONAL: N/A Fla. License#

Street: City: State: Zip: Phone Number:

AREAS SQUARE FOOTAGE: Living: Garage: Covered Patios/ Porches: Enclosed Storage:

Carport: Total under Roof Elevated Deck: Enclosed area below BFE: * Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. 2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE: X State of Florida, County of: On This the day of 20 by who is personally known to me or produced As identification. Notary Public My Commission Expires:

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: X State of Florida, County of: ST-LUCIE On This the 17 day of FEBRUARY 2014 by DANLUCK BAILEY who is personally known to me or produced As identification. Notary Public My Commission Expires: 10/01/16

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.1) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!



Martin County Building Department

900 SE Ruhnke Street
Stuart, FL 34994
(772) 288-5482
Fax (772) 419-6935

BAILEY, DARRICK R
A GREAT FENCE LLC
2131 SW HAYWORTH AVE
PORT ST LUCIE, FL 34953

NOTICE TO ALL CONTRACTORS

PLEASE BE ADVISED THAT MARTIN COUNTY, FLORIDA SECTION 43.42 REQUIRES COMPLIANCE WITH THE FOLLOWING EXERPT FROM THE GENERAL ORDINANCES OF THE MARTIN COUNTY CODE:

PROHIBITED ACTIVITIES:

43.42 R Advertising contracting work in any advertisement to the public in a newspaper or telephone directory without including in the advertisement the number of the contractor license issued to the person or business being advertised.

43.42 S Operating any commercial vehicle in the course of conducting the practice of contracting that fails to display the contractor license number of the contractor.

If you have any questions relating to the information in this letter, please contact the Martin County Contractor's Licensing Division of the Martin County Building Department.



MARTIN COUNTY, FLORIDA Contractor's Licensing Certificate of Competency

FENCE ERECTION - MC

License #: MCFE5176 Expires: 09/30/2014

BAILEY, DARRICK R
A GREAT FENCE LLC
2131 SW HAYWORTH AVE
PORT ST LUCIE, FL 34953



AGREA-1 OP ID: SW

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/25/2013

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

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

PRODUCER Kearns Agency of Florida Inc. P O Box 1849 Jensen Beach, FL 34958 Lawrence E. Kearns	Phone: 772-334-5822 Fax: 772-334-0940	CONTACT NAME: _____ PHONE (A/C, No., Ext): _____ FAX (A/C, No.): _____ E-MAIL ADDRESS: _____	
		INSURER(S) AFFORDING COVERAGE INSURER A: Auto-Owners Insurance Co. INSURER B: Southern Owners Insurance Co. INSURER C: _____ INSURER D: _____ INSURER E: _____ INSURER F: _____	NAIC # 18988 10190
INSURED A Great Fence LLC 540 NE Mercantile Place Port St. Lucie, FL 34986			

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADD'L SURR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPL: _____ POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC		72031135	08/13/2013	08/13/2014	EACH OCCURRENCE: \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence): \$ 300,000 MED EXP (Any one person): \$ 10,000 PERSONAL & ADV INJURY: \$ 1,000,000 GENERAL AGGREGATE: \$ 2,000,000 PRODUCTS - COMMODITY: \$ 2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		4888640800	07/18/2013	07/18/2014	COMBINED SINGLE LIMIT (Per accident): \$ 1,000,000 BODILY INJURY (Per person): \$ _____ BODILY INJURY (Per accident): \$ _____ PROPERTY DAMAGE (Per accident): \$ _____
	UMBRELLA LIAB EXCESS LIAB DED: _____ RETENTIONS: _____ OCCUR CLAIMS-MADE					EACH OCCURRENCE: \$ _____ AGGREGATE: \$ _____
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETARY OR PART-TIME OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS:	Y/N <input type="checkbox"/> N/A				WC STATUTORY LIMITS: _____ OTHER: _____ FL EACH ACCIDENT: \$ _____ FL DISMEMB - LA EMPLOYEE: \$ _____ FL DISMEMB - POLICY LIMIT: \$ _____

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER SEWALLS Town of Sewalls Point 1 S Sewalls Point Rd. Sewalls Point, FL 34986	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
---	--

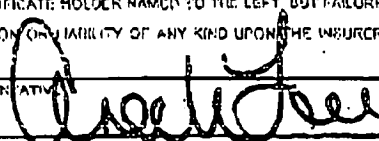
ACORD CERTIFICATE OF LIABILITY INSURANCE		DATE(MM/DD/YYYY) 3/4/2014
PRODUCER KRETSCHMER INS AGENCY INC 3109 Oleander Ave Fort Pierce, FL 34982 (772) 467-6656	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED A Great Fence, LLC Rael Fence Inc 540 Mercantile Place Port Saint Lucie, Fl 34986 (772) 812-0223	INSURERS AFFORDING COVERAGE INSURER A: FirstComp INSURER B: INSURER C: INSURER D: INSURER E:	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. ACCURATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	SUPP. SYSD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR (UNIT AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (EX OCCURRENCE) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALLOWED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Auto/Other) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR OR PARTNER EXECUTIVE OFFICER OR MINOR KEY EMPLOYEE If you are insured, SPECIAL PROVISIONS BELOW OTHER	MWC0012455-02 MWC0012455-03	09/15/12 09/15/13	09/15/13 09/15/14	<input type="checkbox"/> WORKERS COMPENSATION <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYER \$ 1,000,000 E.L. DISEASE POLICY LIMIT \$ 1,000,000

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

CERTIFICATE HOLDER TOWN OF SEWELLS POINT 1 SEWELLS POINT RD TOWN OF SEWELLS POINT FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL _____ 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: 
--	---

2013-2014

MARTIN COUNTY ORIGINAL BUSINESS TAX RECEIPT

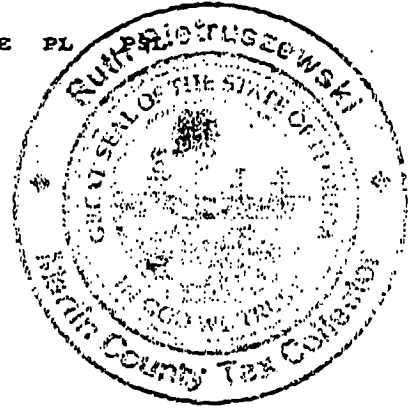
HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR 3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994 (772) 288-5604

ACCOUNT 2007-518-1010 CFRT 179920060002PSL

PHONE (772) 812-0223 SIGNO 238990

LOCATION:

540 NW MERCANTILE PL



CHARACTER COUNTS IN MARTIN COUNTY

PREV YR.	\$.00	LIC. FEE	\$ 26.25
	\$.00	PENALTY	\$.00
	\$.00	COL. FEE	\$.00
	\$.00	TRANSFER	\$ 3.00
TOTAL			29.25

BAILEY, DARRICK
A GREAT FENCE LLC
540 NW MERCANTILE PL
PORT ST LUCIE, FL 34953

IS REMEDY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION OF FENCE ERECTION

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

20 DAY OF AUGUST 2014 AND ENDING SEPTEMBER 13 2014

804 2012 00664.0001 PAID

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

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

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

A Great Fence, LLC

(772) 812-0223

Licensed and Insured
(772) 408-0272 Fax
www.AGreatFence.com

emailed 7/20
left message
2-3-14
LN # 10410
\$ posted - 2/11/14

Proposal / Contract

Customer's Name: <u>Dennis Sevastiani / Seal Services</u>	Date: <u>1-20-14</u>
---	----------------------

Address: <u>24 S Sewalls Point Rd</u>	City: <u>Sewalls Point</u>	St: <u>FL</u>	Zip: _____
---------------------------------------	----------------------------	---------------	------------

Phone: <u>772-678-1198</u>	Cell: _____	Work: <u>772-924-1100</u>	Fax: _____
----------------------------	-------------	---------------------------	------------

<input checked="" type="radio"/> RESIDENTIAL	<input type="radio"/> COMMERCIAL	<input type="radio"/> INDUSTRIAL	To be installed at:
--	----------------------------------	----------------------------------	---------------------

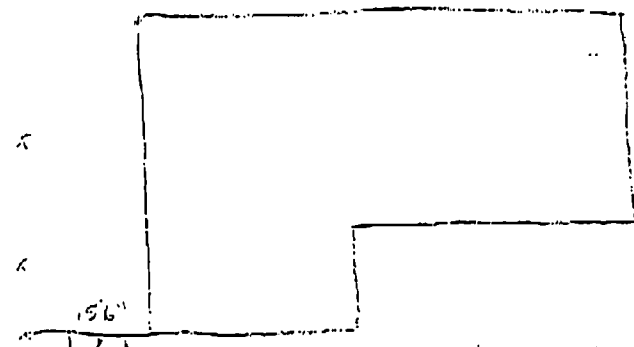
Total Fencing: <u>156'</u>	Height: <u>5'4"</u>
Walk Gate (s): _____	Drive Gate (s): <u>1</u>
Size (s): _____	Size (s): <u>9'</u>
Pool Barrier: <u>No</u>	Removal: <u>No</u>
Additional Instructions	

Landscaping DNS@ gmail.com

WOOD			
Type	Style		
Hand Build	Pre Fab		
Good Side	Gate Frame		
In	Out	Metal	Wood

CHAIN LINK			
Type	Color		
Galv.	Vinyl		
Knuckles	Tension Wire		
Up	Down	Top	Bottom
Rail	Middle Rail		
Top	Bottom	Yes	No

PVC VINYL			
Picket	<u>Semi Private</u>	Privacy	
Style	Color		
<u>customer to choose</u>	<u>white</u>		
ORNAMENTAL			
Style	Type		
	Alum	Iron	
Color	Other		



156' of ~~chain link~~ 5'4" w/ stake accent connected (customer will choose style) with 1 Drivegate = 980

Additional Instructions

PROJECT PRICE _____

DEPOSIT _____

BALANCE DUE _____

PERMIT permit

Approval of Proposal - Contract: The project price, specifications and Terms / Conditions on reverse side are accepted. A Great Fence, LLC is authorized to do the work specified. Upon signing by Purchaser this becomes a binding contract. SEE REVERSE SIDE FOR TERM / CONDITIONS AND WARRANTY INFORMATION

CUSTOMER'S SIGNATURE: _____	DATE: _____
-----------------------------	-------------

SALES REP: <u>Derrick 772-209-2815</u>	CELL #: <u>104</u>
--	--------------------

Martin County, Florida
 Laurel Kelly, C.F.A

Page 1 of 1

Martin County, Florida
Laurel Kelly, C.F.A

generated on 2/12/2014 9:15:42 AM EST

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-009-000-00090-4	17749	24 S SEWALL'S POINT RD, SEWALL'S POINT	\$669,240	2/8/2014

Owner Information

Owner(Current)	CARUSO SALVATORE R PEDROZE-CARUSO NIVIA
Owner/Mail Address	24 S SEWALLS POINT RD STUART FL 34996
Sale Date	3/18/2013
Document Book/Page	2638 0057
Document No.	2383607
Sale Price	775000

Location/Description

Account #	17749	Map Page No.	SP-03
Tax District	2200	Legal Description	MIRAMAR LOT 9
Parcel Address	24 S SEWALL'S POINT RD, SEWALL'S POINT		
Acres	.6510		

Parcel Type

Use Code	0100 Single Family
Neighborhood	193110 Archipelago, High Pt CANAL

Assessment Information

Market Land Value	\$504,000
Market Improvement Value	\$165,240
Market Total Value	\$669,240



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

FENCE and or POOL BARRIER CHECKLIST

A document review will be performed on the following items prior to the submittal of a permit application. Failure to submit these items will result in the application package returned to the applicant until the deficient documents are included. This review sheet must accompany the application submittal.

Please make sure you have ALL required copies before submitting permit application

- ✓ 1 Copy Completed permit application
- ✓ 2 Copies Survey or site plan showing the following:
 - All existing structures on property
 - Location of proposed fence
 - Setbacks from the fence to property lines
 - Height & type of fence
 - Location of all easements
 - Street & house number on site plans

DO NOT SUBMIT PREVIOUSLY STAMPED SITE PLANS

- _____ 2 Copies support post footer sketch indicating size of footers. Fences to Be used as a Pool Barrier (other than chain link fence) must include an Accurate sketch or drawing indicating barrier requirement compliance.
- _____ 2 Copies, if fence crosses any easement, Easement agreement from all utility Companies are required. Agreement form included in permit package.

Typical Fence Footer

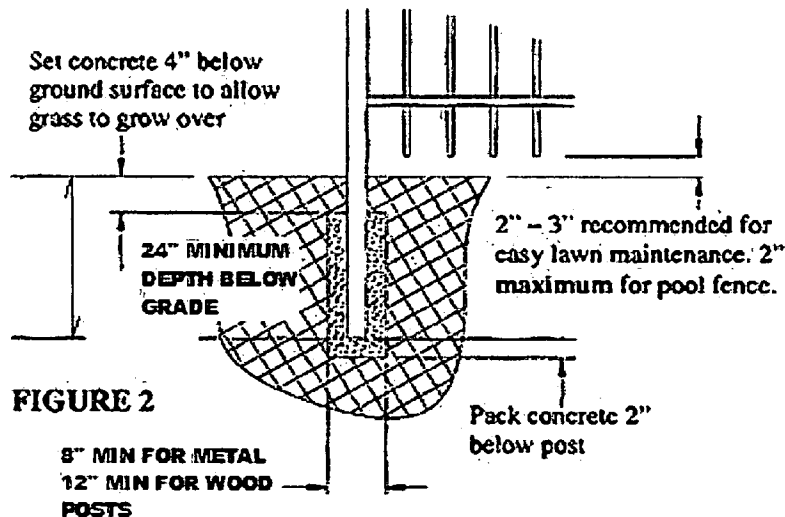
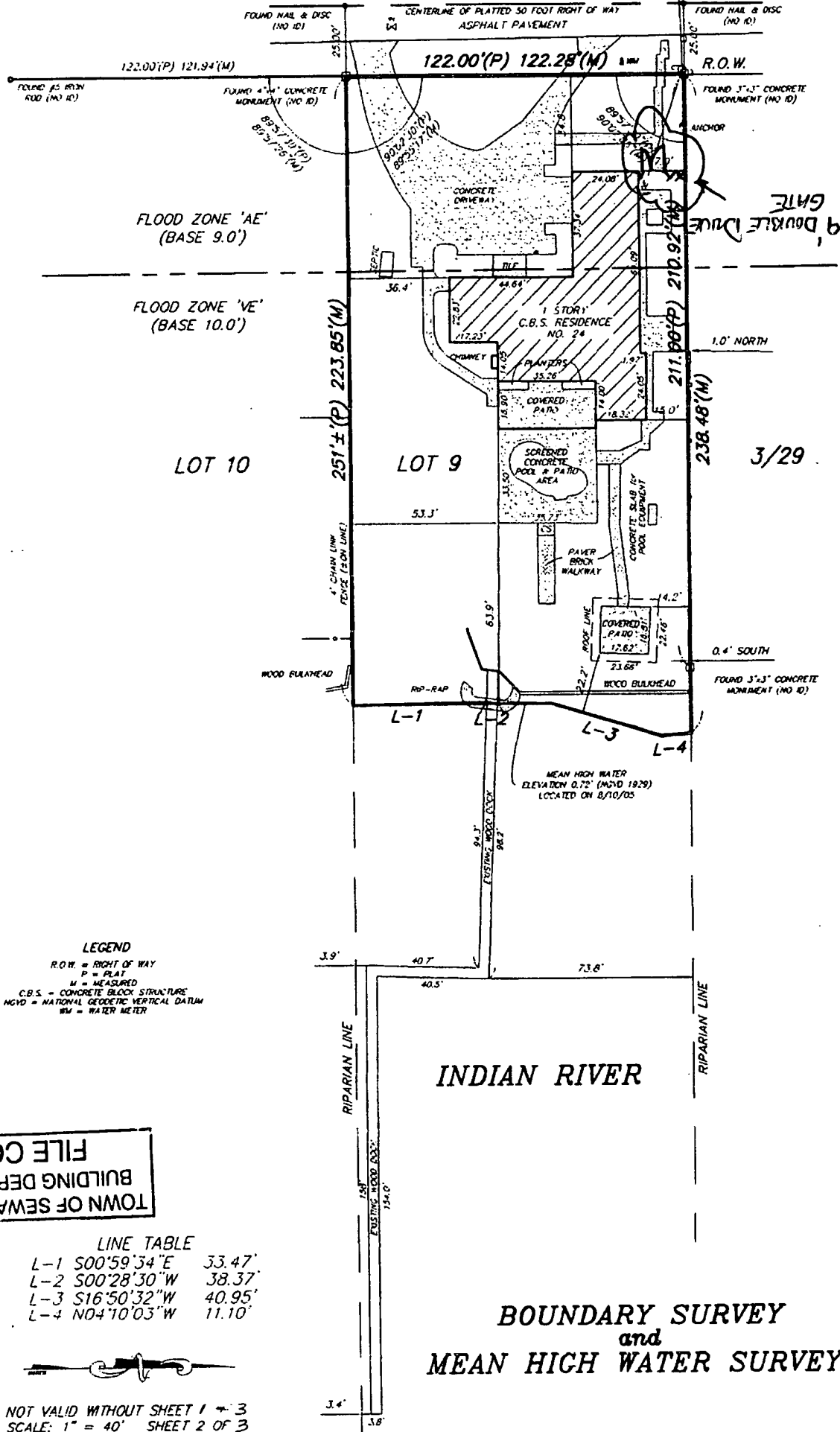


FIGURE 2

SOUTH SEWALL'S POINT ROAD



A GUYTON FENCE - 24 S. SEWALL'S POINT ROAD - 6' TALL RAINYRY PVC/VINYL 1 5/8" L.F. WITH 9' DOUBLE GATE.

FLOOD ZONE 'AE'
(BASE 9.0')

FLOOD ZONE 'VE'
(BASE 10.0')

LOT 10

LOT 9

3/29

LEGEND
 R.O.W. = RIGHT OF WAY
 P = PLAT
 M = MEASURED
 C.B.S. = CONCRETE BLOCK STRUCTURE
 MVD = NATIONAL GEODETIC VERTICAL DATUM
 WM = WATER METER

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

LINE TABLE	
L-1	S00°59'34"E 33.47'
L-2	S00°28'30"W 38.37'
L-3	S16°50'32"W 40.95'
L-4	N04°10'03"W 11.10'

NOT VALID WITHOUT SHEET 1 + 3
 SCALE: 1" = 40' SHEET 2 OF 3

A Great Fence, LLC

(772) 812-0223

Licensed and Insured
 (772) 408-0272 Fax
 www.AGreatFence.com

emailed 1/20
 left message
 2-3-14
 npsc07@gmail.com
 LN # 1041
 \$ posted 2/11/14

Proposal / Contract

Customer's Name: <u>Dennis Serafini/Sal Carruso</u>		Date: <u>1-20-14</u>	
Address: <u>24 S Sewalls Point Road</u>		City: <u>Sewalls Point</u>	ST: <u>FL</u> Zip: _____
Phone: <u>772-678-1198</u>	Cell: _____	Work: <u>772-924-1100</u>	Fax: _____

<input checked="" type="radio"/> RESIDENTIAL	<input type="radio"/> COMMERCIAL	<input type="radio"/> INDUSTRIAL
Total Footage: <u>15'-6"</u>		Height: <u>5+1</u>
Walk Gate (s): _____		Drive Gate (s): <u>1</u>
Size (s): _____		Size (s): <u>9'</u>
Pool Barrier: <u>No</u>		Removal: <u>No</u>
Additional Instructions		

WOOD			
Type		Style	
Hand Build	Pre Fab		
Good Side		Gate Frame	
In	Out	Metal	Wood
CHAIN LINK			
Type		Color	
Galv.	Vinyl		
Knuckles		Tension Wire	
Up	Down	Top	Bottom
Rail		Middle Rail	
Top	Bottom	Yes	No

PVC VINYL		
Type		
Picket	<u>Semi Private</u>	Privacy
Style	Color	
<u>customer to choose 5+1 w/stake accent</u>	<u>white</u>	
ORNAMENTAL		
Style	Type	
	Alum	Iron
Color	Other	

To be installed at:

Landscaping DMS@gmail.com

15'6" of ~~Gate Privacy~~ 5+1 w/stake accent concave (customer will choose style) with 1-Drivegate = 980

A Even grade between terminal posts

B Level grade

C Fence following grade

D Level grade with rolling terrain

PROJECT PRICE	Approval of Proposal - Contract: The project price, specifications and Terms / Conditions on reverse side are accepted. A Great Fence, LLC is authorized to do the work specified. Upon signing by Purchaser this becomes a binding contract. SEE REVERSE SIDE FOR TERM / CONDITIONS AND WARRANTY INFORMATION
DEPOSIT	
BALANCE DUE	CUSTOMER'S SIGNATURE: _____ DATE: _____
PERMIT <u>permit</u>	SALES REP: <u>Darrick 772-209-2845</u> CELL #: _____

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

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

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10774	Stabley 114 Hillcrest Terr Glenmark Homes	All Trades Elect Plumb. & A/C		RESET FOR MONDAY
				INSPECTOR
10817	De Pauw 61 S Sewall's Pt. Steve Roofing	Final	PASS	954-605-3217 CLOSE
				INSPECTOR <i>A</i>
10822	MARONE 53 N. Sewalls ON STAKE	ROOF SHEATHING	PASS	
<i>PM</i>				INSPECTOR <i>A</i>
10814	 4 COPRIPE KRAUSS & CRANE	A/C FINAL	PASS	CLOSE
				INSPECTOR <i>A</i>
10787	 24 S. SEWALLS PT RD A GREAT FENCE	 FENCE FINAL	PASS	CLOSE
				INSPECTOR <i>A</i>
				INSPECTOR
				INSPECTOR
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **4/30 - 14** Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10710	Darrow	Stem Wall		260-8525
	6 Oak Hill Way	REPAIR	PASS	
	JMC			INSPECTOR <i>[Signature]</i>
10832	KLOSE	ROOF FINAL	PICTURES	
	2 BAKU ST		PASS	CLOSE
	HEATON ROOFING			INSPECTOR <i>[Signature]</i>
10797	CANTU SO	FENCE FINAL		
	24 S. SEWALLS RD		PASS	CLOSE
	A GREAT FENCE			INSPECTOR <i>[Signature]</i>
10836	ROOR	ROOF IN		
	22 N. RIDGEVIEW	PROGRESS	PASS	
	DAN BUTCHER ROOF			INSPECTOR <i>[Signature]</i>
10674	MORAN	PRE-PAYMENT REQUEST		
	2 Palm Rd	INSPECTION	OK FOR PAYMENT	
	BROWNE & COMP.			INSPECTOR
10800	Milici	DEMO	PASS	
	14 E. HIGH PT	FUEL TANK		
	S. HOLMES			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

10901

BOATLIFT



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:	10901	DATE ISSUED:	6/20/2014
SCOPE OF WORK:	BOAT LIFT		
CONTRACTOR:	DOCKSCAPES LLC		
PARCEL CONTROL NUMBER:	01384100900000904	SUBDIVISION	MIRAMAR LOT 9
CONSTRUCTION ADDRESS:	24 S SEWALL'S POINT ROAD		
OWNER NAME:	CARUSO		
QUALIFIER:	RON SKERIK	CONTACT PHONE NUMBER:	772 334-0600

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

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

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

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

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	10901		
ADDRESS:	24 S SEWALL'S POINT ROAD		
DATE ISSUED:	6/20/2014	SCOPE OF WORK:	BOAT LIFT

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

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

ACCESSORY PERMIT	Declared Value:	\$	\$ 8,200.00
Total number of inspections: @ \$ 100.00 per insp. # insp.		\$ 2.00	\$ 200.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 3.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 3.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	211.00

Pa 7-11-14
 CK 1155

Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: 10901

Date: 6/2/14

OWNER/LESSEE NAME: Salvatore Caruso Phone (Day) _____ (Fax) _____
 Job Site Address: 845 Sewall's point Road City: Stuart State: FL Zip: 34996
 Legal Description: Lot 9 Parcel Control Number: 61-33-41-009-000
 Fee Simple Holder Name: _____ Address: _____
 City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Install 9,000 Lb Hi-Tide Boat Lift w/ELEC

WILL OWNER BE THE CONTRACTOR?
 (If yes, Owner Builder questionnaire must accompany application)
 YES _____ NO X
Has a Zoning Variance ever been granted on this property?
 YES _____ (YEAR) _____ NO _____
 (Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)
 Estimated Value of Improvements: \$ 8,200.00
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 _____ AE9 _____ AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
 Estimated Fair Market Value prior to improvement: \$ _____
 (Fair Market Value of the Primary Structure only, Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Docksempus LLC Phone: 772-334-0600 Fax: _____
 Qualifiers name: Ron Skerik Street: 11601 NE 22nd St City: Jensen State: FL Zip: 34957
 State License Number: _____ OR: Municipality: _____ License Number: CMR 5425

LOCAL CONTACT: Ron Skerik Phone Number: 772-233-8604
 DESIGN PROFESSIONAL: _____ Fla. License# _____

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

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing Gas): 2010
 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS TO OWNERS AND CONTRACTORS:

- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE:
 X [Signature]
 State of Florida, County of: MARTIN
 On This the 5th day of JUNE, 2014
 by SALVATORE CARUSO who is personally known to me or produced FL/DL C 620,796-78-428-0
 As identification: [Signature]
 My Commission Expires: _____
 CHRISTINE C. BERGERON
 Notary Public Commission # DD 982111
 Expires June 21, 2014
 Bonded thru 11/30/14 FPL Insurance 930-385-7019

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
 X [Signature]
 State of Florida, County of: Martin
 On This the 3rd day of June, 2014
 by Ronald Skerik who is personally known to me or produced FL/DL S 620 726-72-309-0
 As identification: [Signature]
 My Commission Expires: _____
 CHRISTINE C. BERGERON
 Commission # DD 982111
 Expires June 21, 2014

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

Sewall's Point Town Hall



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/17/14

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

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

PRODUCER Great Florida Jupiter 850 Indiantown Rd Suite B Jupiter, FL 33458 Phone (561) 748-0073 Fax (561) 748-9582		CONTACT NAME: CHERIE D. TRAVERS PHONE (A/C No. Ext): (561) 748-0073 E-MAIL ADDRESS: ch_in@ballsouth.net FAX (A/C No.): (561) 748-9582	
INSURED DOCKSCAPES, LLC 1861 NE 22ND ST JENSEN BEACH, FL 34957 (772) 233-8604		INSURER(S) AFFORDING COVERAGE INSURER A: SCOTTSDALE INSURANCE COMPANY INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	


COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR / WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC		JTZAN-T	06/16/2014	06/16/2015	EACH OCCURRENCE	\$ 1,000,000.00
	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 <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						DAMAGE TO RENTED PREMISES (Ea occurrence)
						MED EXP (Any one person)	\$ 5,000.00
						PERSONAL & ADV INJURY	\$ 1,000,000.00
						GENERAL AGGREGATE	\$ 2,000,000.00
						PRODUCTS - COMP/OP AGG	\$ 1,000,000.00
							\$
						COMBINED SINGLE LIMIT (Ea accident)	\$
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
							\$
						EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
						<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	\$
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

JETTY BREAKWATER CONSTRUCTION

CERTIFICATE HOLDER TOWN OF SEWALL'S POINT BUILDING DEPT. 1 SOUTH SEWALL'S POINT RD SEWALL'S POINT, FL. 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
--	--

2013-2014 **MARTIN COUNTY ORIGINAL BUSINESS TAX RECEIPT**
HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR
3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994
(772) 288-5604

ACCOUNT 2008-520-0186 CERT CMAR5425
PHONE (772) 334-0600 SIC NO 237990
LOCATION: 1661 NE 22ND ST JB



CHARACTER COUNTS IN MARTIN COUNTY

****DUPLICATE LICENSE****

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

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF **MARINE CONTRACTOR**
AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

SKERIK, RONALD FRANCIS
DOCKSCAPES LLC
1661 NE 22ND ST
JENSEN BEACH, FL 34957

17 DAY OF JUNE 2014
AND ENDING SEPTEMBER 30, 2014

804 2013 02616.0001 PAID

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CHARACTER COUNTS IN MARTIN COUNTY

****DUPLICATE LICENSE****

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SKERIK, RONALD FRANCIS
DOCKSCAPES LLC
1661 NE 22ND ST
JENSEN BEACH, FL 34957

17 DAY OF JUNE 2014
AND ENDING SEPTEMBER 30, 2014

804 2013 02616.0001 PAID

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

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

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

1 / 1

100%



JEFF ATWATER
CHIEF FINANCIAL OFFICER

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

**** CERTIFICATE OF ELECTION TO BE EXEMPT 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 DATE: 4/17/2014

EXPIRATION DATE: 4/16/2016

PERSON: SKERIK

RONALD

F

FEIN: 522988498

BUSINESS NAME AND ADDRESS:

DOCKSCAPES LLC

DOCKSCAPES

1661 NE 22ND STREET

JENSEN BEACH

FL

34957

SCOPES OF BUSINESS OR TRADE:

CARPENTRY DETACHED

ONE OR TW

Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

DFS-F2-DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 07-12

QUESTIONS? (850)413-1609



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

VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER: _____

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

OWNERS NAME: SALVATORE CARUSO

CONSTRUCTION ADDRESS: 24 S SEWALLS POINT RD

PERMIT TYPE: RESIDENTIAL _____ COMMERCIAL

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

TYPE OF SERVICE: _____ NEW SERVICE EXISTING SERVICE _____ OTHER

SCOPE OF WORK: CONNECT BOATLIFT TO EXISTING DOCK POWER

VALUE OF CONSTRUCTION \$ 850.00

<p>_____ LOW VOLTAGE</p> <p>TYPE OF EQUIPMENT: _____ SECURITY _____ VACUUM _____ SOUND SYSTEM _____ LANDSCAPE _____ OTHER</p> <p>SCOPE OF WORK: _____ VALUE _____</p>

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

[Signature] 5914 SE PINE DR
 SIGNATURE OF LICENSED CONTRACTOR ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: BRIGHT ELECTRIC SERVICES, INC

TELEPHONE NO: 772-529-1194 FAX NO: _____
PLEASE PRINT

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: EC13003302

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

VERIFICATION OF PARCEL CONTROL NUMBER

OWNER'S FULL NAME AS STATED ON DEED: _____

PARCEL CONTROL #: _____

SUBDIVISION: _____ LOT: _____ BLK: _____ PHASE: _____

SITE ADDRESS: _____

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



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

**ELECTRICAL CONTRACTORS LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783**

(850) 487-1395

**CALHOUN, TIGH L
BRIGHT ELECTRIC SERVICES INC
5914 SE PINE DRIVE FL 34997
STUART**

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!

STATE OF FLORIDA AC# E 27878E
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 EC13003302 08/17/12 128043376
 CERTIFIED ELECTRICAL CONTRACTOR
 CALHOUN, TIGH L
 BRIGHT ELECTRIC SERVICES INC
 IS CERTIFIED under the provisions of Ch. 489, FS
 Expiration date: AUG 31, 2014 112091701954

DETACH HERE



08-17-2012

JEFF ATWATER
CHIEF FINANCIAL OFFICER

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

*** * CERTIFICATE OF ELECTION TO BE EXEMPT 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 DATE: 08/17/2012 EXPIRATION DATE: 08/17/2014
PERSON: CALHOUN TIGH L
FEIN: 204709394
BUSINESS NAME AND ADDRESS:
BRIGHT ELECTRIC SERVICES INC
5914 SE PINE DR
STUART FL 34997

SCOPE OF BUSINESS OR TRADE:
1- ELECTRICAL WIRING WITHIN BUILD

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

QUESTIONS? (850) 413-1609

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

<p>STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION CONSTRUCTION INDUSTRY CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW</p> <p>EFFECTIVE: 08/17/2012 EXPIRATION DATE: 08/17/2014</p> <p>PERSON: TIGH L CALHOUN</p> <p>FEIN: 204709394</p> <p>BUSINESS NAME AND ADDRESS: BRIGHT ELECTRIC SERVICES INC 5914 SE PINE DR STUART FL 34997</p> <p>SCOPE OF BUSINESS OR TRADE: 1- ELECTRICAL WIRING WITHIN BUILD</p>	<p>IMPORTANT</p> <p>F Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.</p> <p>L</p> <p>O</p> <p>L</p> <p>D</p> <p>H Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt apply only within the scope of the business or trade listed on the notice of election to be exempt.</p> <p>E Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.</p> <p>QUESTIONS? (850) 413-1609</p>
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CUT HERE

* Carry bottom portion on the job, keep upper portion for your records.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/4/2014

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

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

PRODUCER Comegys Insurance Agency One Beach Drive S. E. Ste. 230 Saint Petersburg FL 33701	CONTACT NAME: Laura Pomeroy
	PHONE (A/C No. Ext): (727) 521-2100 FAX (A/C, No): (727) 528-0626
INSURED Bright Electric Services, Inc. 5914 SE Pine Drive Stuart FL 34997	E-MAIL ADDRESS: laurap@comegys.com
	INSURER(S) AFFORDING COVERAGE
	INSURER A: Ohio Security Insurance Company
	INSURER B:
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: 14/15 GL REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			BKS55095308	4/28/2014	4/28/2015	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 15,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> OCCUR					AGGREGATE \$
		<input type="checkbox"/> CLAIMS-MADE					\$
	DED	RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/N	N/A				E.L. EACH ACCIDENT \$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER 220-4765 Town of Sewall's Point One S. Sewall's Point Rd Sewall's Point, FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE Paul Smet/LAURAP <i>Wayne P. Smet</i>

AC#6278786

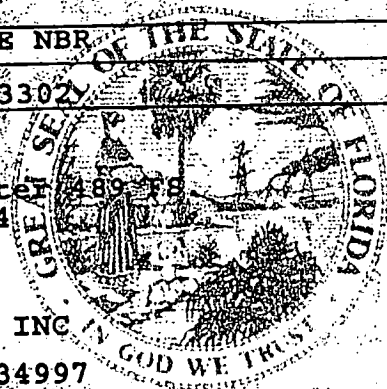
STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# L12081701954

DATE	BATCH NUMBER	LICENSE NBR
08/17/2012	128043376	EC13003302

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



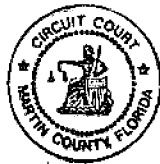
CALHOUN, TIGH L
BRIGHT ELECTRIC SERVICES INC
5914 SE PINE DRIVE
STUART FL 34997

RICK SCOTT
GOVERNOR

KEN LAWSON
SECRETARY

DISPLAY AS REQUIRED BY LAW

THIS IS TO CERTIFY THAT THE
FOREGOING PAGE(S) IS A TRUE
AND CORRECT COPY OF THE ORIGINAL
DOCUMENT AS FILED IN THIS OFFICE



INSTR # 2465577
OR BK 2728 PG 2313
(1 Pgs)
RECORDED 07/11/2014 12:56:09 PM
CAROLYN TIMMANN
MARTIN COUNTY CLERK

BY: [Signature] D.C.
DATE: 7/11/14

NOTICE OF COMMENCEMENT

To be completed when construction value exceeds \$2,500.00

PERMIT #: 10901 TAX FOLD # _____

STATE OF FLORIDA COUNTY OF MARTIN

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS, IF AVAILABLE):
PARCEL # 01884100900000904 MIRAMAR LOT 9, 24 SOUTH SEWALLS POINT RD

GENERAL DESCRIPTION OF IMPROVEMENT: BOAT LIFT 9,000 LB

OWNER INFORMATION OR LESSEE INFORMATION, IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:
Name: SALVATORE CARUSO
Address: 24 SOUTH SEWALLS POINT RD, SEWALLS POINT, FL 34996
Interest in property: OWNER
Name and address of fee simple title holder (If different from Owner listed above): _____

CONTRACTOR'S NAME: BON-SKERIK / DOLESLAPES Phone No.: 772-334-0600
Address: 1661 NC 22ND ST, JENSEN 34957

SURETY COMPANY (If applicable, a copy of the payment bond is attached):
Name and address: _____
Phone No.: _____ Bond amount: _____

LENDER'S NAME: _____ Phone No.: _____
Address: _____

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: _____ Phone No.: _____
Address: _____

In addition to himself or herself, owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.
Phone number of person or entity designated by Owner: _____

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

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

Under penalty of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief.

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager/Attorney-in-fact

Signatory's Title/Office

The foregoing instrument was acknowledged before me this 11th day of July, 2014

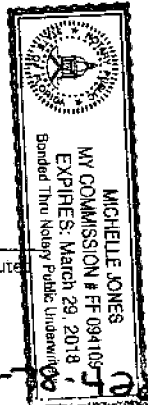
By: Salvatore Caruso as N/A for SELF
Name of person Type of authority (e.g. officer, trustee) Party on behalf of whom instrument was executed

Notary's Signature

Personally known or produced identification
Type of identification produced: FLD 6020-796-720

(Print, Type, or Stamp Commissioned Name of Notary)

EXP. 11/28/14





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

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

Electrical Load Calculations

Electrical Contractor: BRIGHT ELECTRIC SERVICES, INC License No. EC13003302
 Phone #: 772-529-1194 Fax #: _____
 Project: CARUSO Location: 24 S SEWALLS POINT RD
 Existing Service Feeder Size: 2/0 Existing Panel Size: 200 AMP
 Main Breaker Size: 200 AMP Number of Breakers: 32

Existing Loads

2962 Sq. Ft. X 3 watts per sq. ft.....	8886	watts	
2 Appliance cir. @1500 watts each.....	3000	watts	
1 Laundry cir. @ 1500 watts each.....	1500	watts	
Range @ 8 kw.....		watts	
2 Dishwasher and disposal @ 1500 watts each.....	3000	watts	
1 Microwave @ 2000 watts.....	2000	watts	
Water heater @ 4.5 kw.....		watts	
Tank less water heater.....		watts	
1 Dryer @ 5 kw.....	5000	watts	
2 Refrigerator @ 1500 watts.....	3000	watts	
2 Bathroom 1 @ 1500 watts.....	3000	watts	
1 Sprinkler Pump	2000	watts	
Other		watts	
Other		watts	
Other		watts	
		watts	31386 Subtotal Watts

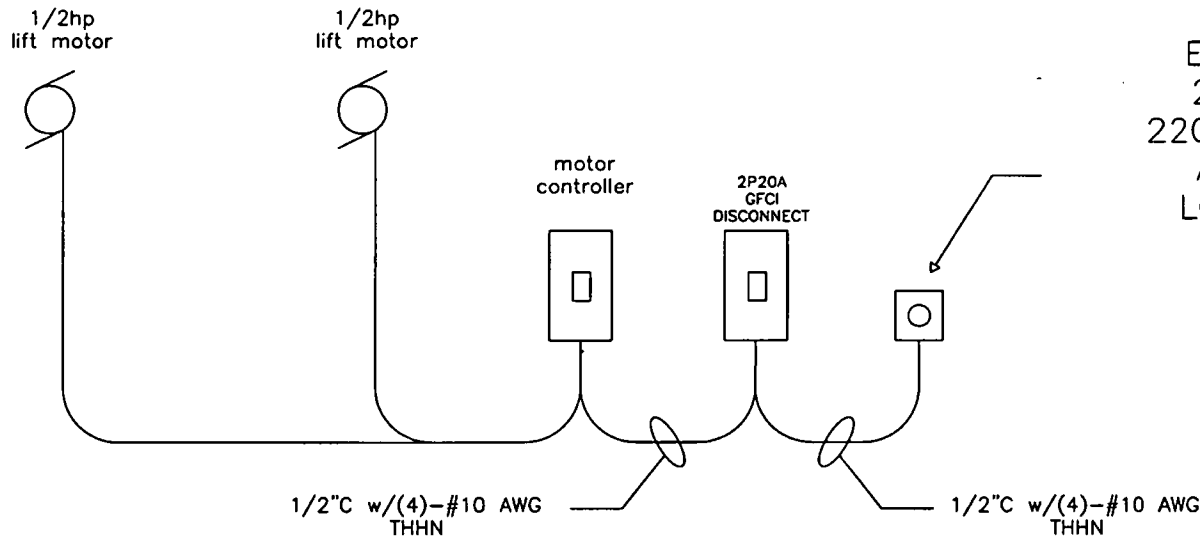
New Loads

1 Pool pump.....	2000	watts	
1 Pool light.....	100	watts	
Heat pump.....		watts	
Chlorine generator.....		watts	
Blower.....		watts	
1 Boatlift.....	2000	watts	
Other		watts	
Other		watts	
Other		watts	
			35486 Total Watts

First 10 kw @ 100%.....	10000	watts
Remainder @ 40%.....	10194.4	watts
A/C heat @ 100%.....	10000	watts

Total watts 30194.4 Divided by 240 volts = 125.81 Amps 200 Amp service provided

Prepared by: TIGH L CALHOUN Date: 6/18/14



EXISTING
20 AMP
220V POWER
AT LIFT
LOCATION

CARUSO
24 S SEWALLS POINT RD

SCALE = N.T.S

BOATGUY
ELECTRIC SERVICES INC.
772-529-1194
EC13003302

CARUSO
BOAT_LIFT
POWER_DIA

LINDEN_MARINE

PROJECT NUMBER:	0000
ISSUED:	MARTIN
DRAWN BY:	TLC
CHECKED BY:	TLC
FILENAME:	KEANE_PSL

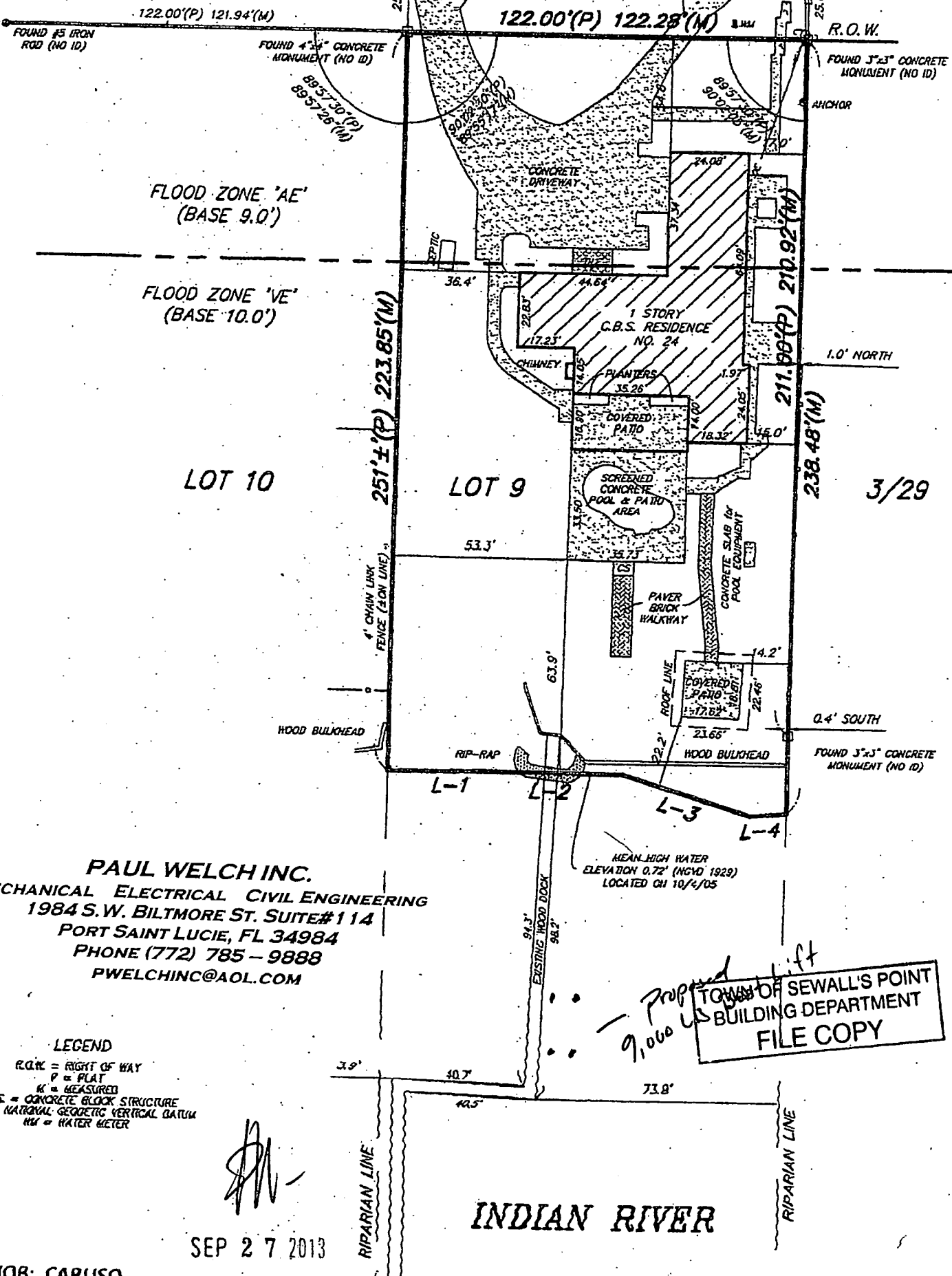
RISER

300 FT SEWALL'S POINT ROAD

FOUND NAIL & DISC (NO ID)

CENTERLINE OF PLATTED 50' FOOT RIGHT OF WAY ASPHALT PAVEMENT

FOUND NAIL & DISC (NO ID)



FLOOD ZONE 'AE'
(BASE 9.0')

FLOOD ZONE 'VE'
(BASE 10.0')

LOT 10

LOT 9

3/29

PAUL WELCH INC.
MECHANICAL ELECTRICAL CIVIL ENGINEERING
1984 S.W. BILTMORE ST. SUITE#114
PORT SAINT LUCIE, FL 34984
PHONE (772) 785-9888
PWELCHINC@AOL.COM

LEGEND
R.O.W. = RIGHT OF WAY
P = PLAT
M = MEASURED
C.B.S. = CONCRETE BLOCK STRUCTURE
NGVD = NATIONAL GEODETIC VERTICAL DATUM
WM = WATER METER

Proposed
9,100 sq ft
TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

SEP 27 2013

JOB: CARUSO
24 S. SEWALL'S POINT RD.
SEWALL'S POINT, FLORIDA

INDIAN RIVER

EXISTING



FLORIDA DEPARTMENT OF
ENVIRONMENTAL PROTECTION

BOB MARTINEZ CENTER
2600 BLAIRSTONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

RICK SCOTT
GOVERNOR

CARLOS LOPEZ-CANTERA
LT. GOVERNOR

HERSCHEL T. VINYARD JR.
SECRETARY

**SELF CERTIFICATION FOR THE ADDITION OF A BOAT LIFT TO
PRIVATE, RESIDENTIAL SINGLE-FAMILY DOCK**

Self Certification File No.: **0326698001EE**
File Name: **24 S Sewalls Point Rd Stuart, FL 34996**
- **Self Certification Boat Lift (Aquatic Preserves)**

Dear **Ron Skerik**: On, **05/27/2014**, you used the Department's electronic Self Certification Process to certify compliance with the terms and conditions necessary for the addition of a Boat Lift to a private, residential single-family dock at a detached, single-family residence located at:

LAT - Degrees: 27 Minutes: 11 Seconds: 59.6251
LONG - Degrees: -80 Minutes: 11 Seconds: 54.1441
SITE ADDRESS: 24 S Sewalls Point Rd Stuart, FL 34996
COUNTY: Martin

For:
Salvatore Caruso
24 s Sewalls point road

Stuart, FL 34996

You have certified that the Boat Lift you propose to construct at the above location meets all the conditions of the Self Certification Process. A Boat Lift that is built in conformance to those conditions (attached for reference) will:

1. Qualify for a regulatory exemption under Chapter 18-20.004(5)(b)8 of the Florida Statutes. As such, it is exempt from the need to obtain a DEP Environmental Resource Permit.

Your Self Certification is based solely on the information you provided under this process, and applies only to the statutes and rules in effect when your certification was completed. The certification is effective only for the specific Boat Lift proposed, and only if the Boat Lift is constructed, operated, and maintained in conformance with all the terms, conditions, and limitations stated in the Self Certification Process. 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.

You have acknowledged that this Self Certification will automatically expire if:

1. Construction of the Boat Lift is not completed within one year from the self certification date;
2. site conditions materially change;
3. the terms, conditions, and limitations of the Self Certification are not followed; or
4. the governing statutes or rules are amended before construction of the project.

Completion of the Self Certification constitutes your authorization for Department personnel to enter the property for purposes of inspecting for compliance.

Receipt of this Self Certification constitutes letter of consent required by rule 18-21.004(7) F.A.C.

ADDITIONAL INFORMATION

This Self Certification Process does not relieve you from the responsibility of obtaining other permits or authorizations from other agencies (federal, state, Water Management District, or local) that may be required for the project. Construction of the Boat Lift may require federal authorization. The Corps has been furnished a copy of your Self Certification letter. They will contact you with further information about their process. If you do not hear from them, please contact them directly. Jacksonville District contact information can be found at: <http://www.saj.usace.army.mil/Missions/Regulatory.aspx>. Failure to obtain all applicable authorizations prior to construction of the Boat Lift may result in enforcement.

If you have any questions, please contact your local Department District Office. Contact information can be found at: http://www.dep.state.fl.us/water/wetlands/docs/sler_contacts.pdf. When referring to your project, please use the Self Certification file number listed above.

Sincerely,
Florida Department of Environmental Protection

Enclosures:

Single Family Dock Criteria
General Conditions for Sovereignty/State-Owned Submerged Lands Authorization
Manatee Conditions

Boat lifts are subject to all of the following conditions:

1. Is to be installed in an existing slip or, at or adjacent to the waterward end of the dock;
2. With other mooring will not result in the mooring of more than two vessels (including jet skis);
3. Will be built without adding new surface area to the dock such as walkways, gangplanks, or catwalks;
4. Will not be located in areas prohibited for mooring by a previously issued permit or other form of authorization issued by a local government;
5. Will not substantially impede the flow of water, cause water pollution, or create a navigational hazard;
6. Is used ONLY for recreational, noncommercial activities associated with the mooring or storage of boats and boat paraphernalia;
7. Cannot be placed in waters that are deeper than -4 ft MLW;
8. Will accommodate the proposed boat use in order to ensure that a minimum of one foot clearance is

provided between the deepest draft of a vessel and the top of any submerged resources at mean or ordinary low water;

9. The dock, together with the boat lift, cannot extend waterward more than 500 feet or more than 20% of the width of waterbody (or 25% in Boca Ciega Bay or Pinellas County Aquatic Preserves), whichever is less; and
10. Mooring areas cannot be enclosed in whole or in part with walls, doors, screens or any other materials.

General Conditions for Sovereignty/State-Owned Submerged Lands Authorization

Any use of sovereignty/state-owned submerged lands is subject to the following general conditions that are binding upon the applicant and are enforceable under Chapters 253 or 258, F.S.:

1. Sovereignty/state-owned submerged lands may be used only for the specified activity or use. Any unauthorized deviation from the specified activity or use and the conditions for undertaking that activity or use will constitute a violation. Violation of the authorization will result in suspension or revocation of the applicant's use of the sovereignty/state-owned submerged lands unless cured to the satisfaction of the Board of Trustees of the Internal Improvement Trust Fund (Board).
2. Authorization under Rule 18-21.005, F.A.C., conveys no title to sovereignty/state-owned submerged lands or water column, nor does it constitute recognition or acknowledgment of any other person's title to such land or water.
3. Authorizations under Rule 18-21.005, F.A.C., may be modified, suspended or revoked in accordance with its terms or the remedies provided in Sections 253.04, F.S. or Chapter 18-14, F.A.C.
4. Structures or activities will be constructed and used to avoid or minimize adverse impacts to resources.
5. Construction, use, or operation of the structure or activity will not adversely affect any species which is endangered, threatened or of special concern, as listed in Rules 68A-27.003, 68A-27.004, and 68A-27.005, F.A.C.
6. Structures or activities will not unreasonably interfere with riparian rights. When a court of competent jurisdiction determines that riparian rights have been unlawfully affected, the structure or activity will be modified in accordance with the court's decision.
7. Structures or activities will not create a navigational hazard.
8. Structures will be maintained in a functional condition and will be repaired or removed if they become dilapidated to such an extent that they are no longer functional.
9. Structures or activities will be constructed, operated, and maintained solely for water dependent purposes.
10. The applicant agrees to indemnify, defend and hold harmless the Board and the State of Florida from all claims, actions, lawsuits and demands in any form arising out of the authorization to use sovereignty/state-owned submerged lands or the applicant's use and construction of structures on sovereignty/state-owned submerged lands. This duty to indemnify and hold harmless will include any and all liabilities that are associated with the structure or activity including special assessments or taxes that are now or in the future assessed against the structure or activity during the period of the

authorization.

11. Failure by the Board to enforce any violation of the authorization or waiver by the Board of any provision of the authorization will not invalidate the provision not enforced or waived, nor will the failure or waiver prevent the Board from enforcing the waived or unenforced provision in the event of a future violation of that provision.
12. Applicant binds itself and its successors and assigns to abide by the provisions and conditions set forth in the authorization. If the applicant or its successors or assigns fails or refuses to comply with the provisions and conditions of the authorization, the authorization may be terminated by the Board after written notice to the applicant or its successors or assigns. Upon receipt of such notice, the applicant or its successors or assigns will have thirty (30) days in which to correct the violations. Failure to correct the violations within this period will result in the automatic revocation of this authorization.
13. All costs incurred by the Board in enforcing the terms and conditions of the authorization will be paid by the applicant. Any notice required by law will be made by certified mail at the address shown on page one of the authorization. The applicant will notify the Board in writing of any change of address at least ten days before the change becomes effective.
14. This authorization does not allow any activity prohibited in a conservation easement or restrictive covenant of record that prohibits the activity.

Manatee Conditions

The following conditions are intended to protect manatees from direct project effects; THESE CONDITIONS APPLY ONLY IN WATERS THAT ARE ACCESSIBLE TO MANATEES:

1. All personnel associated with the project will be instructed about the presence of manatees and manatee speed zones, and the need to avoid collisions with and injury to manatees. The permittee will 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, the Endangered Species Act, and the Florida Manatee Sanctuary Act.
2. All vessels associated with the construction project will operate at "Idle Speed/No Wake" at all times while in the immediate area and while in water where the draft of the vessel provides less than a four-foot clearance from the bottom. All vessels will follow routes of deep water whenever possible.
3. Siltation or turbidity barriers will be made of material in which manatees cannot become entangled, will be properly secured, and will be regularly monitored to avoid manatee entanglement or entrapment. Barriers must not impede manatee movement.
4. All on-site project personnel are responsible for observing water-related activities for the presence of manatee(s). All in-water operations, including vessels, must be shutdown if a manatee(s) comes within 50 feet of the operation. Activities will not resume until the manatee(s) has moved beyond the 50-foot radius of the project operation, or until 30 minutes elapses if the manatee(s) has not reappeared within 50 feet of the operation. Animals must not be herded away or harassed into leaving.
5. Any collision with or injury to a manatee will be reported immediately to the FWC Hotline at 1-888-404-FWCC. Collision and/or injury should also be reported to the U.S. Fish and Wildlife

Service in Jacksonville (1-904-731-3336) for north Florida or Vero Beach (1-772-562-3909) for south Florida.

6. Temporary signs concerning manatees will be posted prior to and during all in-water project activities. All signs are to be removed by the permittee upon completion of the project. Awareness signs that have already been approved for this use by the Florida Fish and Wildlife Conservation Commission (FWC) must be used (see MyFWC.com). One sign which reads Caution: Boaters must be posted. A second sign measuring at least 8 1/2" by 11" explaining the requirements for "Idle Speed/No Wake" and the shut down of in-water operations must be posted in a location prominently visible to all personnel engaged in water-related activities.

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

~~Mon~~
 Tue

 Wed

 Thur

 Fri

7/18-14 Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10922	5 Miramar Rd. Beryne	Elite Gas Interior Rough	PASS	NOT READY INSPECTOR <i>AF</i>
none repair only	121 Hillcrest Dr. Star Roofing + Sheet metal →	Roof roof	PASS	305-896-3938 CLOSE INSPECTOR <i>AF</i>
10897	7 Eumritu Fore	Stuart Fence Roof fence	PASS	CLOSE INSPECTOR <i>AF</i>
10919	11 Middle Rd.	Dwight Saps Roofing Roof roof	PASS PICTURES	772-545-3442 CLOSE INSPECTOR <i>AF</i>
10527	30 S Sewalls Pt. Rd. Weston	Roof elect., plumb., ACHC Weston Constructin	ELEC PASS PLUMB PASS HVAC FAIL	521-676-4100 MAKE-UP AIR INSPECTOR <i>AF</i>
10901	27 S Sewalls Pt. Rd. Caraso	Deck Roof elect. + boat ramp.	PASS	CLOSE INSPECTOR <i>AF</i>
10694	53 N River Rd.	St. George Const. fill slabs part 1 gar. + home?	PASS	263-9000 INSPECTOR

TOWN OF SEWALL'S POINT, FLORIDA

Date 2/1/02 15 **TREE REMOVAL PERMIT** No 0541

APPLIED FOR BY Montes Tr. Sen. (Contractor) or Owner

Owner 24 S. Sewalls Pt. Rd.

Sub-division _____, Lot _____, Block _____

Kind of Trees Cocoa Palm

No. Of Trees: REMOVE 1

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS Dead Tree

FEE \$ _____

Signed, _____ Applicant Signed, [Signature]

~~Town Clerk~~
Bldg. Insp.

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M.—NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

PROJECT DESCRIPTION _____

REMARKS _____

pp 297

SINGLE FAMILY HOME
HABITAT MANAGEMENT AND
LANDSCAPE PERMIT APPLICATION

RECEIVED
FEB 25 2000
BY: EA

FILED INSP. 3/2/00

OWNER NAME: EDMUND VILLA

ADDRESS: 24 S. SEWALLS PT. RD.

CONTRACTOR: MONTES TREE SERVICE

ADDRESS: *Edmund Villa*

LICENSE NUMBER: _____

PHONE: 219-2469 Contractor
Owner

CONTRACT PRICE: \$?

PERMIT FEE: \$ -0- PAID: N/A
Date

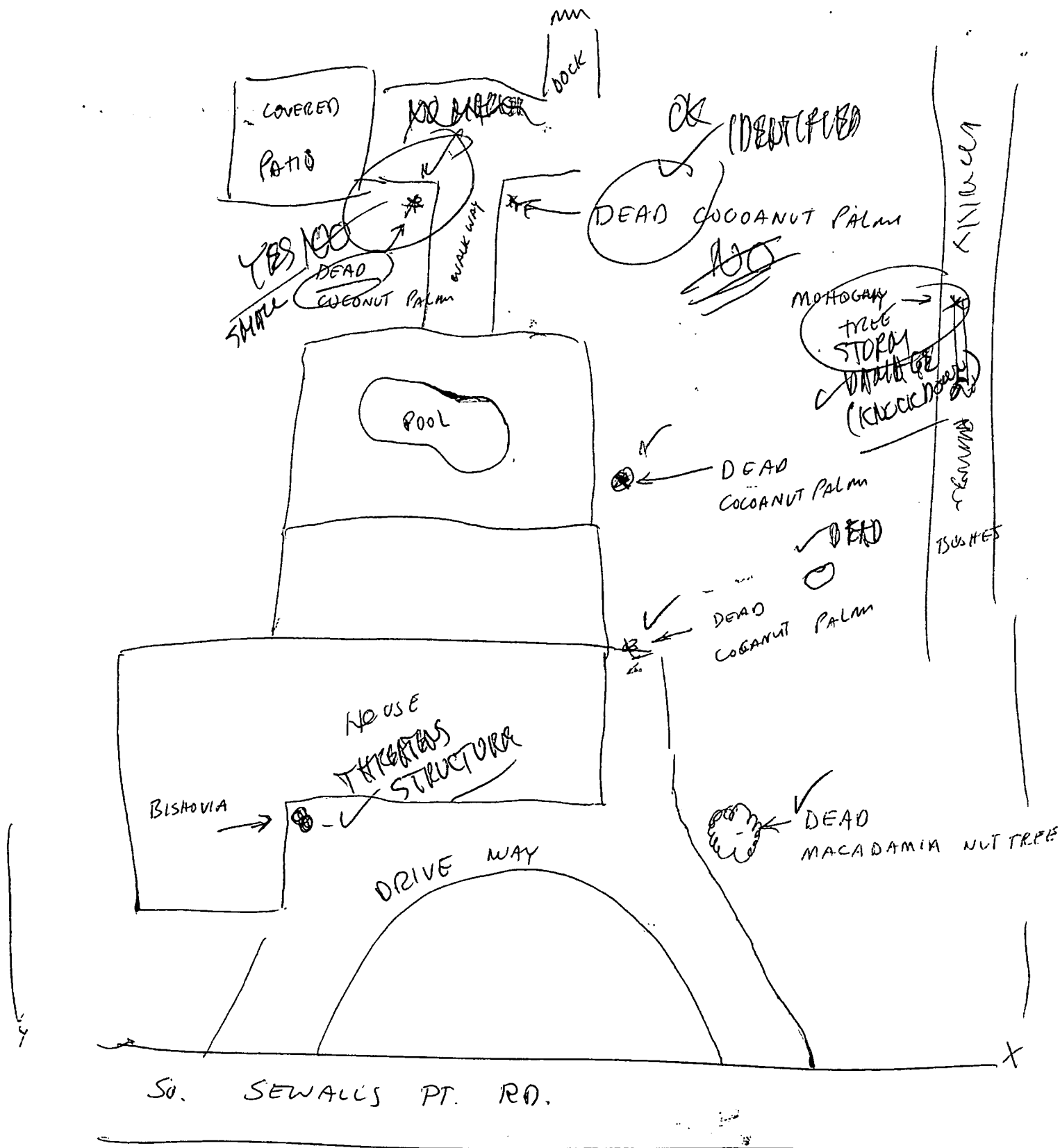
REASON FOR RELOCATION, REMOVAL, OR REPLACEMENT:

REMOVE DEAD TREES

REMOVE UNDESIREBLE TREES

- SKETCH ON REVERSE

- VERIFIED (FILED INSP) 3/2/00 EA



TOWN OF SEWALL'S POINT, FLORIDA

Date 03/06/00 1900 TREE REMOVAL PERMIT No. 297

APPLIED FOR BY EDMOND VILLA (Contractor or Owner)

Owner 24 S. SEWALL'S POINT RD.

Sub-division _____, Lot _____, Block _____

Kind of Trees (4) PALM; (1) MIMOSA; (1) HIBISCUS; (1) MAGNOLIA

No. Of Trees: REMOVE 7 ALL DEAD/DISEASED.

No. Of Trees: RELOCATE -0- WITHIN 30 DAYS (NO FEE) (BLIGHT/STORM DAMAGE)

No. Of Trees: REPLACE -0- WITHIN 30 DAYS

REMARKS FILED INSP. 3/1/00; TREE CONDITION/LOCATION

VERIFIED (SKETCH ON REVERSE OF APPL.) FEE \$ 0-

Signed, Edmond Villa Applicant

Signed, [Signature] TOWN OFFICIAL
Town Clerk

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M.—NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

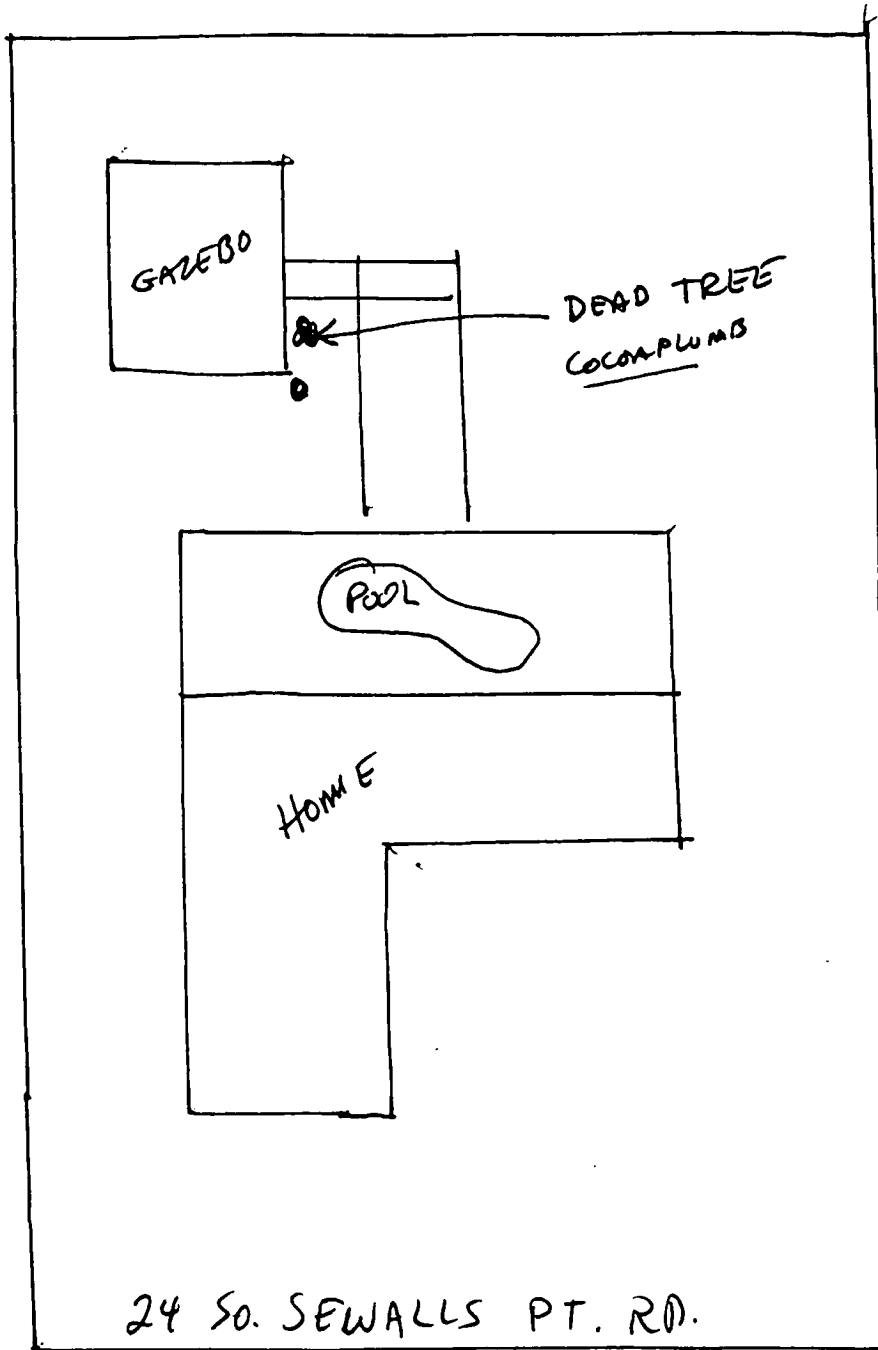
Vertical grid of 10 empty rectangular boxes for drawing or notes.

PROJECT DESCRIPTION _____

Five horizontal lines for project description details.

REMARKS _____

Five horizontal lines for remarks.



24 SO. SEWALLS PT. RD.

TOWN OF SEWALL'S POINT, FLORIDA

Date 10-18-02 19____ TREE REMOVAL PERMIT No 1221

APPLIED FOR BY Ed Villa 931-528-3483 (Contractor or Owner)

Owner 24 S. Sewall's Pt Rd

Sub-division _____, Lot _____, Block _____

Kind of Trees 1 Dead Queen Palm, 1 Dead Eucalyptus

No. Of Trees: REMOVE 2

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant

Signed, Gene Simmons (Kyr) Town Clerk

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M.—NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Large empty rectangular box for drawing or site plan]

PROJECT DESCRIPTION _____

REMARKS _____

DEAD EUCALYPTUS TO BE REMOVED

ORCH
PATIO
COVERED
PATIO

DEAD QUEEN PALM TO BE REMOVED

BRICK WALKWAY

BRICK WALKWAY

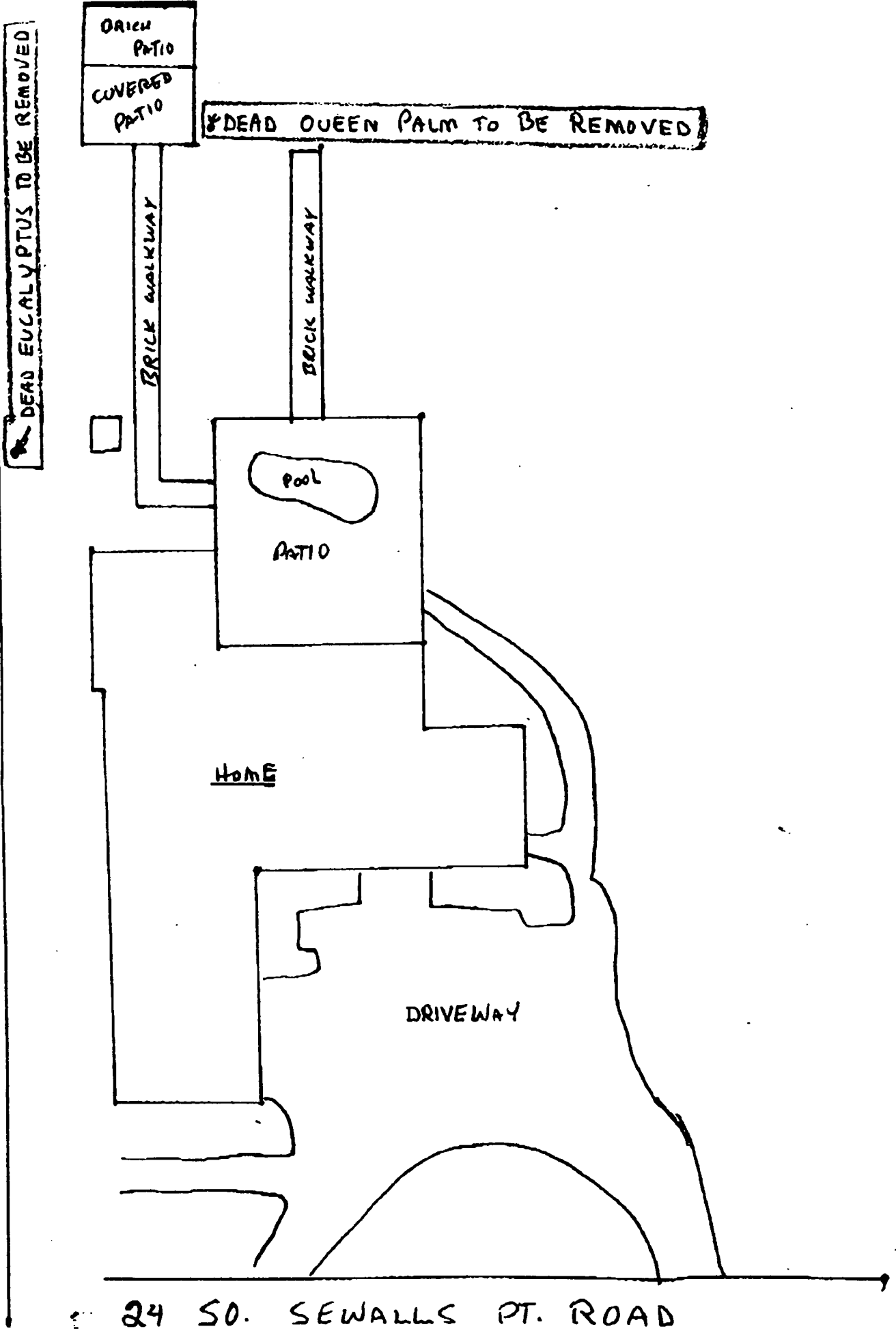
POOL

PATIO

HOME

DRIVEWAY

24 SO. SEWALLS PT. ROAD



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4828	ERWIN GIFFORD 85 N. Sewall P.M. Indialucie	Porch slab	PASSED BG.	Termite spray By Patrick 2-29-00
4527	SEELY 37 N.E. Lopping way Plantation	2 nd floor slab & columns & tie beams	PARTIAL BG.	
4840	LUANE SCHUCKMAN 4 FIELD WAY (Indialucie)	SHEATHING	Passed BG.	
41073	FOGUA CONST. 110 HENRY SEWALL WAY	INSULATION & WIRE LATH	PARTIAL Passed	walls only BG. BG.
4849	Obersheimer 75 N.S.P.Rd.	roof sheathing	Passed BG.	late AM
4842	Hansen 32 N.S.P.Rd.	pool enc. final	Passed BG.	
4809	Hammock 25 Rio Vista (Patrick) 263-0116	tinted + metal	Passed BG.	

OTHER: ~~SEWER PERMIT APPL. - VILCA, 24 S. SEWALL'S POINT RD.~~
2. " " " - MOUSSO; 10 PALMETTO DR.

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT, FLORIDA

Date 4/27/00 TO 19 TREE REMOVAL PERMIT No 0319

APPLIED FOR BY EDMOND VILLA 24 S. SEWALL'S PT. RD. (Contractor or Owner)

Owner (CONTR. - MONTE'S TREE SERVICE)

Sub-division _____, Lot _____, Block _____

Kind of Trees BICHOPIA (PROHIBITED); COCONUT PALM (DEAD); POLYTAIL PALM

No. Of Trees: REMOVE 2 SITE INSP

No. Of Trees: RELOCATE 1 POLYTAIL PALM 4/29/00
WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS SEE APPLICATION FOR LOCATION SKETCH

Signed, *Edmond Villa*
Applicant

Signed, *[Signature]* FEE \$ 5
Town Clerk KING OFF.

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M.—NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ~~APRIL 24~~, 2000;

Page 1 of 1.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4857	Conway	tie-down	Passed	
N ✓ (2)	4 Oak Hill Way Conway	for floor	BG	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4659	Conway	insulation	Passed	Insulate window
N ✓ (1)	17 Lofting Way Conway		BG.	Arches.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4803	Foglia	tin-tag &	Passed	
S ✓ (3)	101 H. Sewall Way Pacific	metal	BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4882	Woods	soil poison	Passed	PLUMB'G SUB (PN 4885) ISSUED
S ✓ (4)	116 S. River Rd. EMMICK CONST. INC.	footers foundation	BQ.	FIELD COPY OF STRUCT. REV.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4877	LOYOLA/OSBORNE	TEMP. ELECT.	Passed	(warp. request Friday a.m. march)
✓ (2A)	20 CASTLE HILL WAY (LOT 23) BUFORD CONST.	(RON TAYLOR, INC.) SUB PN 4879	BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4732	Hufnager	Chimney Strapping	Passed.	
✓ (1B)	19 Lofting Way Tettamanti		BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS

OTHER: A. T/R PERMIT APPLICATION: 24 S. SEWALL'S POINT RD. (VILLA) ✓ RESEARCH (REPL. REG.)

B. " " " ; 3 CASTLE HILL WAY (WILSON) ✓ APPROVED

C. " " " ; 6 MIDDLE ROAD (CLEMENTS) ✓ RESCHEDULE

INSPECTOR (Name/Signature): D. PN 4613; B. PALM COURT (SUBID/ALAN MORRIS) - DELIVER EXECUTED TEMP. ELECT. AGMT. ✓

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

SCHED. INSP. MON. 4/24/00 ✓
APPR (AS NOTED) 4/24
ISSUED 4/27

RECEIVED
RECEIVED
APR 18 2000
APR 19 2000

Permit # _____
BY: _____
Date Issued _____

PN 0319
4/27/00

This application shall include a written statement giving reasons for removal, relocation or replacement and a site plan which shall include the dimensional location of survey scale drawing, or aerial photograph, superimposed with lot lines to scale, of all existing or-proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.

Owner EDMOND VILLA Address 24 So. SEWALL PT. RD. Phone 219-2469

Contractor MONTE'S TREE SERVICE Address _____ Phone 283-8828

Number of trees to be removed(list kinds of trees) BICHOPIA, DEAD COCONUT PALM
ORNAMENTAL, OVERGROWN SHRUBS (POWYATI) PALM

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 \$ _____ (\$25.00 - first tree plus \$10.00 - each additional tree - not to exceed \$100.00.

(No permit fee for trees which are relocated on property or lie within a utility easement & are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property.)

Plans approved as submitted _____ Plans approved, as marked ✓

Permit good for one year. Fee for renewal of expired permit is \$5.00

Signature of applicant Edmond Villa Date submitted 4/19/00

Approved by Building Inspector [Signature] Date 4/27/00

Approved by Building Commissioner _____ Date _____

Completed _____
Date _____ Checked by _____

THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT OBTAINING A PERMIT. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGLER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

THE FOLLOWING TREES MUST BE REMOVED BEFORE CONSTRUCTION BEGINS: BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND MELALEUCA?

S 62'00"08" W

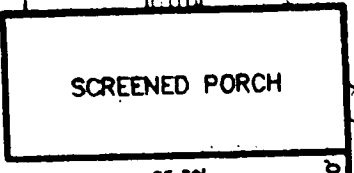
139.98'

S 62'00"08" W

59.79' (M)

25.00'

EXISTING ONE-STORY C.B.S. RESIDENCE
(24 SOUTH SEWALL'S POINT RD.)



DEAD COCONUT PALM
✓ 4/29 @ WATER VERIFIED
(REPL. NOT REQ.)

TO BE RELOCATED

OVERGROWN PONYTAIL -
ROOT SYSTEM PENETRATING JOINT IN SEWER LINE.

CONCRETE DRIVEWAY

BICHOFIA ✓ 4/24 VERIFIED
CRACKING AND LIFTING
CONCRETE DRIVE

N 28'02'22" W 122.00' (P)
122.14' (M)

24 SOUTH SEWALLS POINT ROAD

FOUND 3"X3" C.M. (UNNUMBERED)

ENCROACHMENT (POWER POLE GUY & ANCHOR)

ENCROACHMENT WASHER (NO I.O.)

FOUND 3"X3" C.M. (UNNUMBERED) S 07' 20" 55" W, 0.15'

BASE POINT 0.0

ROTATION: 0

PAGES: 025-028

355

TOWN OF SEWALL'S POINT, FLORIDA

Date JANUARY 21 16 2005 TREE REMOVAL PERMIT No 2397

APPLIED FOR BY MORROW (Contractor or Owner)

Owner 24 S. SEWALL'S POINT

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 8 1 PEPPER, 1 QUEEN, 1 CITRUS, 2 FIGUS

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE) 2 BOTTLEBRUSH, 1 CABBAGE PALM

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant Signed, [Signature] Town Clerk BUILDING OFFICIAL

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection WORK HOURS 8:00 A.M. - 5:00 P.M. - NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Large empty rectangular box for drawing or site plan]

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT, FLORIDA

Date FEBRUARY 1 ~~15~~ 2006 TREE REMOVAL PERMIT No 2631

APPLIED FOR BY MORROW (Contractor or Owner)

Owner 24 S. SEWALL'S POINT ROAD

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 12 Ficus

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant

Signed Gene Simmons (Signature)
Town Clerk
BONDING OFFICIAL

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Large empty rectangular box with horizontal lines, likely for site plan or drawing.

PROJECT DESCRIPTION _____

Horizontal lines for project description details.

REMARKS _____

Horizontal lines for remarks.