

47 South Sewall's Point Road

636

SFR

BUILDING PERMIT REQUIREMENTS

Permit No. 636

Date Issued _____

REQUEST FOR PERMIT TO BUILD: RESIDENCE ONLY

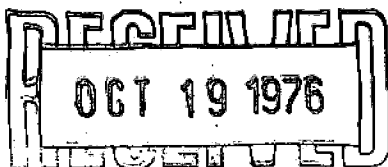
COPY OF DEED: O.R. Book 408 Page 577

THREE COPIES PLANS Received Oct 19/76

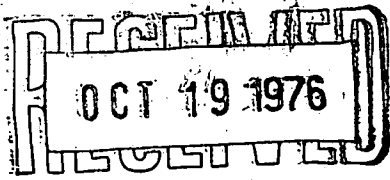
CERTIFIED BY N/A Date _____
(If necessary re deed restrictions)

COUNTY SEWAGE DISPOSAL PERMIT # HD 76-569

REQUEST FOR CERTIFICATE OF OCCUPANCY 10/19/76



#636
LEOPOLD



TOWN OF SEWALL'S POINT, FLORIDA

APPLICATION FOR BUILDING PERMIT

Permit No. #636
Date 10/21/76

47 S. Sewalls Point Rd

(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) Copy of property Deed required for new home construction.

Owner DAVID Leopold Present Address Jensen Beach Ph _____

General Contractor Dev-Build LTD Address PO BOX 2622 Ph 283-9390
STUART Fla

Where licensed State Florida License No. CB C002819

Plumbing Contractor LINDSEY License No. 9 county
Electrical Contractor Praveer Electric License No. 40 county

Street building will front on sewalls Point Road

Subdivision EMIRITA Lot No. 26 Area _____

Building area, inside walls (excluding garage, carport, porches) Sq ft 2000

Other Construction (Pools, additions, etc.) Garage 512 sq ft

Contract Price (excluding land, rugs, appliances, landscaping) RESIDENCE ONLY \$36,000

Total cost of permit \$ 200.00
5
180
20
200.

Plans approved as submitted _____ Plans approved as marked _____

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

Albert C. Chubley #150 - MARTIN Co.
Signed by General Contractor
DJ Leopold

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.

DJ Leopold
Signed by Owner Albert C. Chubley C.O. called FR. 3/31/77 12:30 PM

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

TOWN RECORD

Date submitted 10-20-76 J.P.R. C-5346

Date approved 10-21-76 Joe Rank

Certificate of Occupancy issued _____ Date

#636

OCT 19 1976

THIS PERMIT EXPIRES ONE (1) YEAR FROM DATE OF ISSUANCE
Application and Permit of Individual Sewage Disposal Facilities

Application/Permit No. HD76-569 Martin County Health Department

Section I - Instructions:

1. Percolation test data, soil profile and water table elevation information must be attached. (Note: Test must be made at proposed location of system).
2. Existing building and proposed buildings on lot must be shown and drawn to scale at their location or proposed location. (Use block on this sheet or attach plot plan).
3. Proposed location of septic tank must be shown on plan.
4. Any pond or stream areas must be indicated on the plan.
5. Indicate name and date of plat of subdivision. If not platted, attach metes and bounds description.
6. Complete the following information section.

Notes:

1. Not valid if sewer is available.
2. Individual well must be 75 feet from any part of system.
3. Call _____ and give this office a 24-hour notice when ready for inspection.

Section II - Information:

1. Property Address (Street & House No.) Corner Emari a Way and Sewalls Point Rd.
 Lot 26 Block _____ Subdivision Emarita
 Date Platted 1956 Directions to Job Out East Ocean Blvd to Sewalls Point Road, South to Property at Emarita Way
2. Owner or Builder Robt. Ferris
 P.O. Address Box 2622 City Stuart, Fla.
 Septic tank system to be installed by: _____

Scale 1" = 50'

(Rear)

3. Specifications:

900 gallon tank with 300 square feet of drainfield with at least 4" inside diameter pipe.

4. House to be constructed:
 Check one: FHA
 VA Conventional

This is to certify that the project described in this application, and as detailed by the plans and specifications and attachments will be constructed in accordance with state requirements.

Applicant: Robt. Ferris
Please Print

Signature: Per Robert Ferris

Date: Oct. 13, 1976

→ 24" TRENCHES ONLY

See Sheet 2 of 2 for sheet of 3
Bedroom Residence

(Name of Street or State Road) (Side)

(Name of Street or State Road) (Side)

***** DO NOT WRITE BELOW THIS LINE *****

Section III - Application Approval & Construction Authorization

Installation subject to following special conditions: _____

The above signed application has been found to be in compliance with Chapter 10D-6, Florida Administrative Code, and construction is hereby approved, subject to the above specifications and conditions.
By: Robert Ditzhon County Health Dept. Martin Date 10-18-76

*****J*****

Section IV - Final Construction Approval

Construction of installation approved: Yes No
Date: _____ By: _____

FHA No. _____ VA No. _____

#636

19896

26

Subdivisions

PROPOSED CHANGEX 5'-0" HIGH
30'-0"

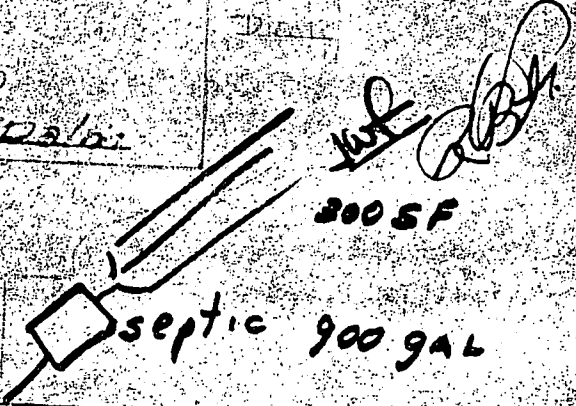
39'-0"

PROPOSED WOOD FENCE - 7'-0" HIGH

Palms

Palms

Remove
S.E. of gate



GATE

DRIVE

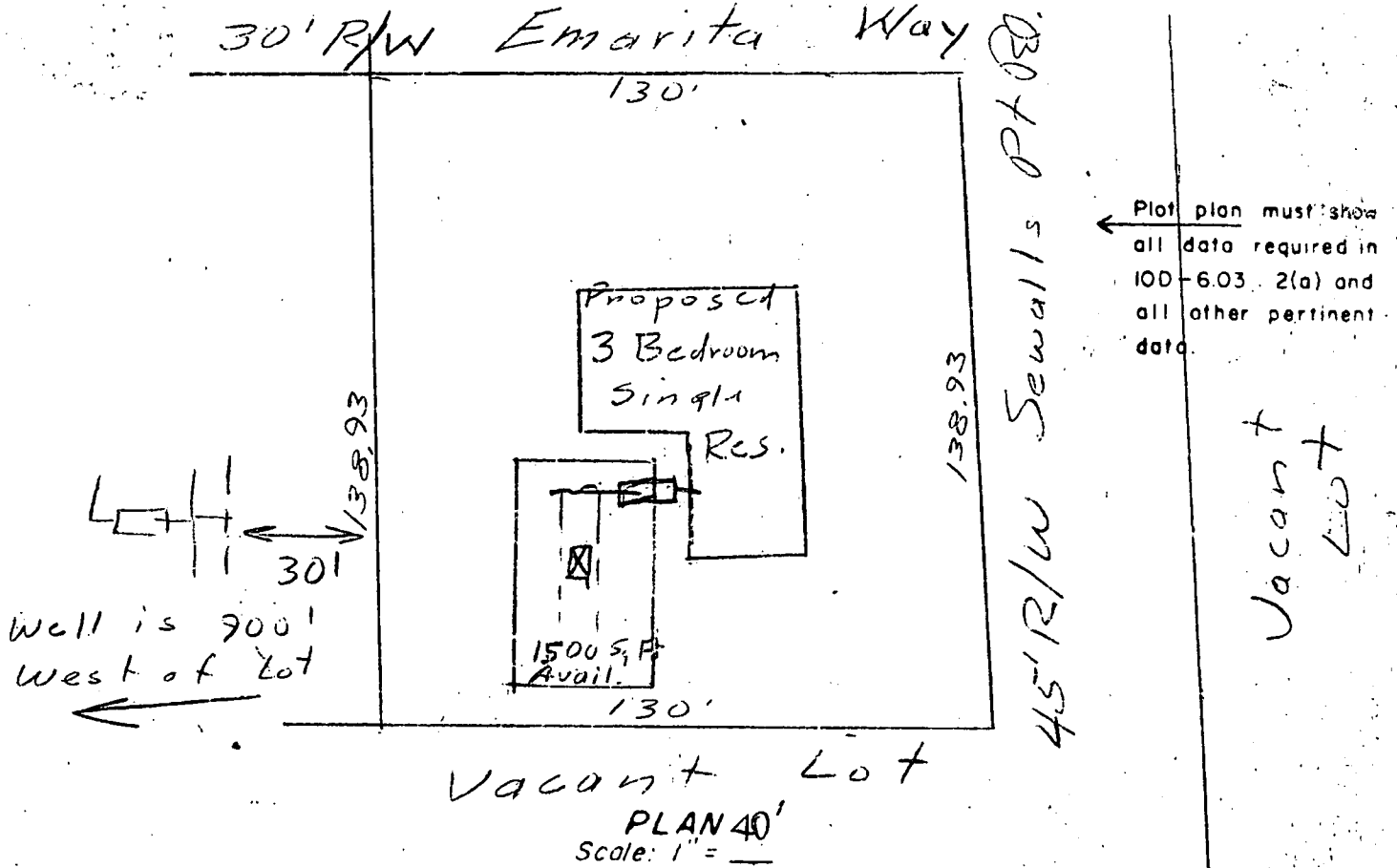
Handwritten initials or signature in the bottom right corner.

**INDIVIDUAL SEWAGE DISPOSAL FACILITIES
DATA SHEET**

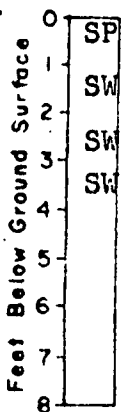
Location: Corner Emarita Way & Sewalls Pt. Rd. Applicant: Robt. Ferris
County: Martin

Vacant Lot

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



SOIL DATA



Note: Wells in adjacent lots are west on higher area. Applicant plans to use central water system from across road.

LEGEND

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

SOIL BORING LOG

Soil Identification: CLASS I GROUP SP & SW
Soil Characteristics Grey to white sand to 4 feet

Percolation Rate 1/4 min/inch
Water Table Depth 32 inches
Water Table Depth During Wet Season 2 feet
Compacted Fill Of 1 ft. Reg'd
Compacted Fill Checked By: [Signature]
Date Oct. 15, 1976

CERTIFIED BY: [Signature]
FLORIDA PROFESSIONAL No. PE 6274
Date Oct. 13, 1976 Job No. _____

KENNETH A. HARRIS, P.E.

Agricultural Engineer

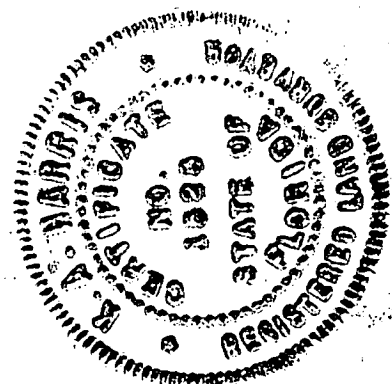
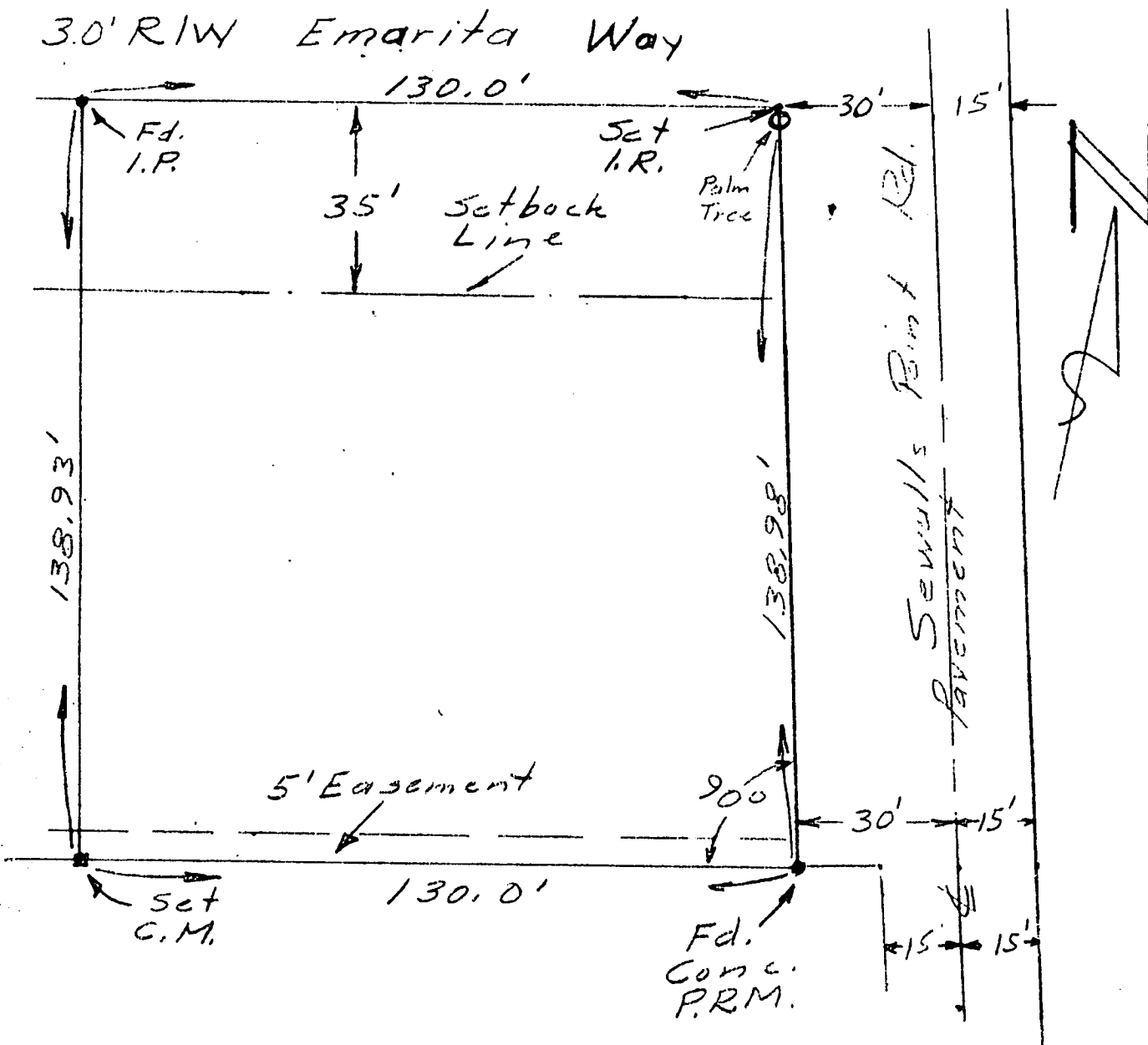
515 SO. CAROLINA DRIVE

STUART, FLORIDA 33494

TEL. (305) 287-2758

PROFESSIONAL ENGINEER
FLORIDA REGISTRATION NO. 6274

REGISTERED LAND SURVEYOR
FLORIDA CERTIFICATE NO. 1523



CERTIFICATION OF SURVEY

I hereby certify that the Plat shown hereon is a true and correct representation of a survey made under my direction and said survey is accurate to the best of my knowledge and belief.

Kenneth A. Harris

KENNETH A. HARRIS
Reg. Land Surveyor
Fla. Cert. #1523

KENNETH A. HARRIS, P. E.
Agricultural Engineer
515 SO. CAROLINA DRIVE
STUART, FLORIDA 33494

Survey of Lot 26, Emarita S/D Sewell's Point as in P.B. 3, Pg 86, Martin County, Florida
Public Records

DESIGNED	DRAWN	APPROVED	SHEET
	<i>K.A.H.</i>	<i>Kenneth A. Harris</i>	Lot 1
DATE	SCALE	DATE	REG. ENGR. NO.
	1"=30'	10/76	6274
			PLATE
			I

Footnote (2) Spans shall be limited to values shown based on possible effect of concentrated loads.

Footnote (3) Allowable uniform load based on deflection of 1/360 of span is 100 psf. Plywood edges shall have approved tongue and groove joints or shall be supported with blocking, unless 1/4 inch minimum thickness underlayment is installed or unless finish floor is one inch nominal wood strip.

Footnote (4) If wood strips are perpendicular to the joists or supports, thickness shown for 16 inch and 20 inch spans may be used for 24 inch span.

(b) **ROOF SHEATHING:** (1) Wood roof sheathing shall be tongue-and-grooved or shall be plywood except as may be otherwise approved by the Building Official.

(2) Tongue-and-grooved roof sheathing shall have thickness of not less than three-fourths inch without tolerance and sheathing of such thickness shall span not more than twenty-eight inches between rafters or joists, shall have staggered joints and shall be nailed with 8d common nails not less than two in each six-inch board nor three in each eight-inch board at each support.

(3) Plywood roof sheathing shall be 1/2 inch minimum thickness and shall be continuous over two or more spans with face grain perpendicular to supports. The allowable spans shall not exceed the following:

ALLOWABLE SPANS FOR PLYWOOD ROOF SHEATHING (1)

PANEL IDENTIFICATION INDEX (2)	MAXIMUM SPAN IF BLOCK OR OTHER EDGE SUPPORTS	MAXIMUM SPAN WITHOUT EDGE SUPPORT
24/0 (1/2" only)	24"	20"
30/12	30"	26"
32/16	30"	28"
36/16	32"	30"
42/20	36"	32"
48/24	42"	36"

Footnote (1) Values apply to Structural I and II, Standard and CC-Exterior grades.

Footnote (2) Identification Index appears on all panels listed in footnote (1).

(aa) Plywood panels shall be nailed to supports with 6d common nails, for thicknesses of 1/2 inch and with 8d common nails for 3/8 inch, 3/4 inch and 7/8 inch thicknesses.

(bb) Nail spacing shall be six inches on center at panel edges and 12 inches on center at intermediate supports.

(4) Roof sheathing for mill-type construction shall comply with Sub-section 2905.6.

(c) **STORM SHEATHING:** Exterior stud walls shall be sheathed to resist the racking load of wind as set forth in Section 2306 and shall be either,

(1) Tightly fitted, diagonally-placed, tongue-and-groove sheathing, not less than 3/4 inch thickness, nailed with three 8d common nails to each support; or

(2) Plywood panels of maximum practicable size, applied vertically or horizontally, and not less than 5/16 inch for 16 inch stud spacing, fastened with 6d common nails for panel thicknesses up to and including 3/8 inch, and 8d common nails for 3/4 inch or more thicknesses, spaced 6 inches on center at panel edges and 12 inches on center at intermediate supports.

(3) An effective water barrier shall be provided under all wood exterior cladding between the cladding and the supporting studs except under plywood siding.

(4) All openings shall be flashed.

(d) **EXTERIOR WALL SHEATHING:** Plywood may serve for both storm sheathing and exterior cladding provided,

(1) The panel thickness shall for 303 specialty siding panels and

(2) The supporting studs shall be inches apart,

(3) All joints shall be backed studs not less than two inches in width vertically or otherwise made watertight

(4) Where face plys are vertical farther apart than three feet eight inches for support of plywood less than 7/8 inch floor exterior walls and horizontal panels spaced not farther apart vertically for first story installation and not more than 12 inches for second story installations

(5) Nailing shall be as set forth that nails shall be non-corrosive galvanized casing nails.

2905.10 **FURRING:** Where it is furred, such furring shall be treated and shall be securely fastened with one cut nail in alternate courses

2905.11 **CONNECTORS:** (a) Types of connectors shall be as set forth in Sub-section 2902.3 and in Table

**TABLE
NUMBER OF NAILS FOR CONNECTION**

Connection	
Joist to Sill or Girder, Toe Nail	.....
Bridging to Joist, Toe Nail	.....
1" x 6" Sub-floor to Joist, Face Nail	.....
Two-inch Sub-floor Joist or Girder Plate to Joist or Blocking	.....
Stud to Plate, End Nail	.....
Stud to Plate, Toe Nail	.....
Top Plates: Spike Together	.....
	Laps and Intersections
Ceiling Joists: To Plate, Toe Nail	.....
	Laps over Partition
	To Parallel Rafters
Rafter to Plate	.....
Continuous One-Inch Brace to Stud	.....
1" x 6" Sheathing to Bearing	.....
1" x 8" Sheathing to Bearing	.....
Corner Studs and Angles	.....
Plywood	.....
Anchor	to Rafters or Roof Joists

(b) Nails, bolts and other mechanical fasteners at locations exposed to the weather shall be corrosion resistant.

(c) In general, nails shall penetrate equal to the thickness of the material. There shall be not less than two nails per fastener.

(d) Except for plywood and other materials manufactured under technical control:

29-14

We are to let him know if he has to have 5/8 - will have to call factory 10/20/76 10:45am

RECEIVED
OCT 19 1976
TOWN OF SEWALL'S POINT

TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 10/19/76

This is to request that a Certificate of Approval for Occupancy be issued to DEV - BUILD LTD.

For property built under Permit No. 636 Dated _____

when completed in conformance with the Approved Plans.

Robert B. Ferris Dev-Build Ltd
Signed **ROBT. B. FERRIS**

RECORD OF INSPECTIONS

<u>Item</u>	<u>Date</u>	<u>Approved by</u>
Footings	10-22-76	ES
Rough plumbing	10-29-76	ES
Perimeter beam	11/16/76	SHAB
Rough electric	12/10/76	ES
Close in		
Final plumbing		
Final electric	3/31/77	ES

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Charles Meyer 3/31/77 date

Approved by Town Commission _____ date

Utilities notified _____ date

Original Copy sent to _____

(Keep carbon copy for Town files)

1234

FENCE

TOWN OF SEWALL'S POINT FLORIDA

Permit No. 1234

Date _____

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

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

Owner Paul D. Reed Present address 477 So. Sewall's Pt. Rd.

Phone 286-4577

Contractor Self Address _____

Phone _____

Where licensed _____ License number _____

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

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

477 So. Sewall's Point Rd.

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

Crack 7'-0" WOODEN FENCE AS PER PLANS.

Subdivision EMERALD Lot No. 26

Contract price \$ 700 Cost of Permit \$ 5.00

Plans approved as submitted Plans approved as marked _____

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

Contractor Paul D. Reed

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 Paul D. Reed

TOWN RECORD

Date submitted 0828, 1980

Approved: Jamayne Building Inspector Date 10/29/80

Approved: J.C. Strubbe Commissioner Date 10/30/80

Final Approval given: 11/26/80 Jam Date

Certificate of Occupancy issued _____ Date

#1234

1238

POOL & DECK

1238

TOWN OF SEWALL'S POINT FLORIDA

Permit No. _____

Date 11-12-80

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

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

Owner Paul Reed Present address 47 S. Sewalls Pt Rd

Phone 286-4577

Contractor Bush Pools Address 3309 OLEANDER AVE Ft Pierce

Phone 461-9246

Where licensed Martin License number RP 0017570

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: SWIMMING POOL & DECK

47 S. SEWALLS PT RD

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

Subdivision EMARITIA Lot No. 26

Contract price \$ 3,000.00 Cost of Permit \$ 40.00 + 10.00 = 50.00

Plans approved as submitted Plans approved as marked *double fee \$100.*

started work without permit

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

Contractor Erin B. Bush

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 Paul D. Reed

TOWN RECORD

Date submitted _____

Approved: J. Mazzurana Building Inspector Date 10/21/80

Approved: J.C. Stuebel Commissioner Date 11/5/80

Final Approval given: Jan 24, 1981 Date (Signature)

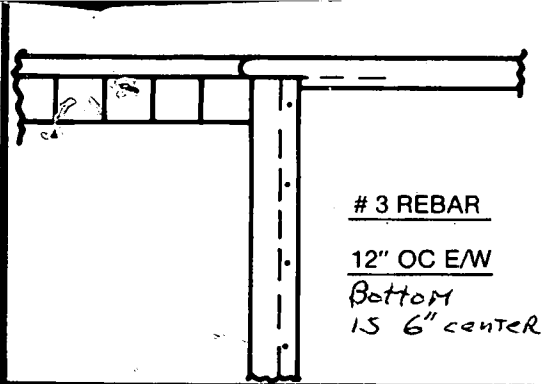
Pool Steel & Graveling 11/13/80
Patio Steel 12/29/80

Certificate of Occupancy issued _____ Date _____

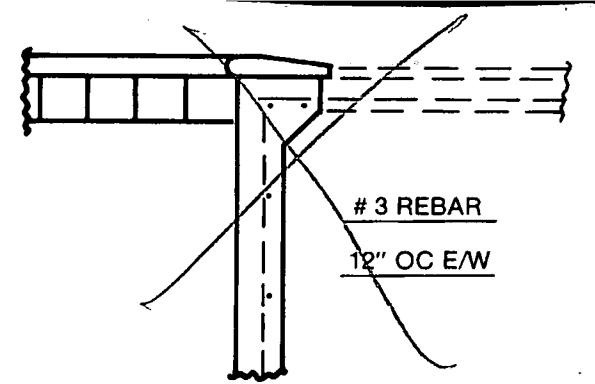
SP/1-79

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

1238

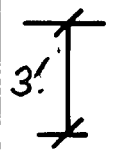


3 REBAR
 12" OC E/W
 Bottom
 15 6" center



3 REBAR
 12" OC E/W

TILE: CAP: _____ FLAT: LO CAMP
 STEPS: NONE OVERPOUR: NONE
-2" "TOP OF WALL; 0" "TOP OF TILE
-2" "TOP OF SKIMMER; 0" "TOP OF PATIO



Jaw
 10/31/80

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

PLANS AS APPROVED
 ANY CHANGES AT OWNER'S EXPENSE

RECEIVED OCT 30 1980

APPROXIMATE VOLUME IN GALLONS: 15,000 APPROXIMATE TURNOVER RATE 4 HOURS 23 MIN.

APPROVED BY: _____

ENGINEERED PLANS ON FILE W/CITY/COUNTY-STATE "CERTIFIED POOL CONTRACTOR NO. 011421

Reed 47 S. Sewalls Pt Rd

2182

ADDITION

Permit No. 2182

Date

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

This application must be accompanied by three (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 JAMES + PATRICIA D DOWNING, INC. Present Address 47 S. SEWALL'S PT RD.

Phone 286-3697 SEWALL'S PT, SUMMIT, FL

Contractor H.C. PROPERTIES Address 3200 N.E. HOLLY CREEK DR

Phone 334-2000 JENSEN BEACH, FL 33457

Where licensed FLORIDA License number CGC 019595

Electrical contractor FORWARD ELECTRIC License number 00092

Plumbing contractor PRIMEK PLUMBING License number MP00098/RFC 036274

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: FRAME ADDITION TO EXISTING RESIDENCE

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

47 SOUTH SEWALL'S PT. RD.

Subdivision EMERALDA Lot number 26 Block number

Contract price \$ 25,500⁰⁰ Cost of permit \$ 127⁵⁰

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 H.C. PROPERTIES, INC.

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 James Downing
Patricia Downing

TOWN RECORD

Date submitted Approved: Del Brown 2/25/87
Building Inspector Date

Approved: AC Stuebel 3/3/87 Final Approval given: _____
Commissioner Date Date

Certificate of Occupancy issued (if applicable) _____
Date

SP1282

Permit No. _____

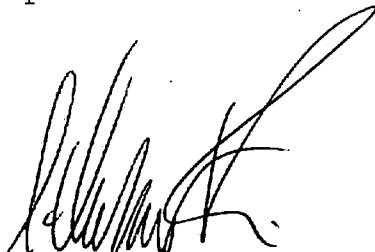
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.

September 24, 1987

To Whom It May Concern:

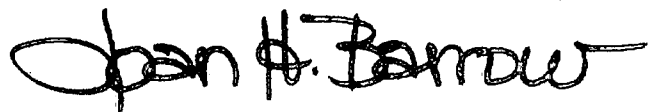
Re: Permit # 2182 - addition to James Downing residence, 47 South
Sewall's Point Road

Effective today I am no longer the qualifying licensee for HC Properties,
Inc. and, therefore, must withdraw my license from Mr. Downing's building
permit.



S. Robert Rimer

Appeared before me S. Robert Rimer who swears the above is true and correct.
S. Robert Rimer is well-known to me.



NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXP. NOV 16, 1990
BONDED THRU GENERAL INS. UNCL.

**FLORIDA ENERGY EFFICIENCY CODE
FOR BUILDING CONSTRUCTION**

FORM 900-A-86

**SECTION 9 — RESIDENTIAL POINT SYSTEM METHOD
DEPARTMENT OF COMMUNITY AFFAIRS**

**CLIMATE ZONES
SOUTH 7 8 9**

This form may be used to demonstrate compliance with the Energy Code for new single-family detached or multifamily attached dwellings under Section 9. An alternative to this method for single-family detached dwellings, and multifamily attached dwellings of three stories or less, is provided in Section 10. Multifamily attached dwellings greater than three stories must comply under Section 9 or 5. Additions to existing residential buildings must comply under Section 9 or 10. Additional information may be obtained from your local building department or the Department of Community Affairs, Energy Code Program, 2571 Executive Center Circle East, Tallahassee, Florida 32301-8244.

PROJECT NAME AND ADDRESS:	Miraglia Residence Sewall's Point	PERMITTING OFFICE:	Sewall's Point
BUILDER:		CIRCLE CLIMATE ZONE:	7 (8) 9
OWNER:	Mr. & Mrs. Maraglia	PERMIT NO.:	
		JURISDICTION NO.:	5 31 3 00

DETACHED <input checked="" type="checkbox"/> NEW <input type="checkbox"/> ADD. ATTACHED <input type="checkbox"/> NEW <input type="checkbox"/> ADD.	CHECK IF WORST CASE CALCULATION: <input type="checkbox"/> IF MULTIFAMILY, NUMBER OF UNITS: <input type="text"/>	GLASS AREA AND TYPE	
	CONDITIONED FLOOR AREA: <input type="text"/> 3 <input type="text"/> 5 <input type="text"/> 8 <input type="text"/> 5 CEILING INSULATION UNDER ATTIC: R = <input type="text"/> 3 <input type="text"/> 0 <input type="text"/> 0 SGL ASSEMBLY: R = <input type="text"/> <input type="text"/> <input type="text"/>	CLEAR: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> SGL DBL: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DBL	TINT, FILM, SOLAR SCREEN: <input type="text"/> 5 <input type="text"/> 8 <input type="text"/> 0 SGL DBL: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DBL

NET WALL AREA AND INSULATION							
CBS	R=	FRAME	R=	STEEL STUD	R=	LOG	R=
<input type="text"/>	<input type="text"/>	<input type="text"/> 3 <input type="text"/> 1 <input type="text"/> 6 <input type="text"/> 6	<input type="text"/> 1 <input type="text"/> 9	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

DUCTS	COOLING SYSTEM	HEATING SYSTEM		HOT WATER SYSTEM	
IN UNCOND. SPACE R = <input type="text"/> 4 <input type="text"/> 2 IN COND. SPACE R = <input type="text"/> <input type="text"/> <input type="text"/>	<input checked="" type="checkbox"/> CENTRAL <input type="checkbox"/> NONE <input type="checkbox"/> ROOM <input type="checkbox"/> PTAC SEER/EER = <input type="text"/> 9 <input type="text"/> 5	<input checked="" type="checkbox"/> ELECTRIC STRIP <input type="checkbox"/> HEAT PUMP <input type="checkbox"/> NATURAL GAS <input type="checkbox"/> ROOM/PTHP <input type="checkbox"/> OTHER FUELS <input type="checkbox"/> NONE COP/AFUE = <input type="text"/> <input type="text"/>	<input checked="" type="checkbox"/> ELECTRIC <input type="checkbox"/> SOLAR <input type="checkbox"/> NATURAL GAS <input type="checkbox"/> HEAT RECOVERY <input type="checkbox"/> OTHER FUELS <input type="checkbox"/> DED. HEAT PUMP EF = <input type="text"/> 8 <input type="text"/> 8 SF/EF = <input type="text"/> <input type="text"/>	NUMBER OF BEDROOMS = <input type="text"/> <input type="text"/>	

INFILTRATION PRACTICE USED	<input type="checkbox"/> #1 <input checked="" type="checkbox"/> #2 <input type="checkbox"/> #3	TOTAL AS-BUILT POINTS: <input type="text"/> 6 <input type="text"/> 2 <input type="text"/> 1 <input type="text"/> 7 <input type="text"/> 5	TOTAL BASE POINTS: <input type="text"/> 7 <input type="text"/> 1 <input type="text"/> 8 <input type="text"/> 6 <input type="text"/> 5	x 100 = <input type="text"/> 8 <input type="text"/> 6 <input type="text"/> 5	CALCULATED E.P.I.
CALCULATED ENERGY PERFORMANCE INDEX MUST NOT EXCEED 100 POINTS.					

In accordance with Section 553.907 F.S., I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code. OWNER/AGENT: <u><i>D. Maraglia</i></u> DATE: <u>9/22/86</u>	Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed, this building will be inspected for compliance in accordance with Section 553.908 F.S. BUILDING OFFICIAL: _____ DATE: _____
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9A PRESCRIPTIVE MEASURES (Must be met or exceeded by all residences.)			
COMPONENTS	SECTION	REQUIREMENTS	CHECK
WINDOWS	904.1	MAXIMUM OF 0.5 CFM PER LINEAR FOOT OF OPERABLE SASH CRACK.	X
EXTERIOR & ADJACENT DOORS	904.1	MAXIMUM OF 0.5 CFM PER SQ. FT. OF DOOR AREA. INCLUDES SLIDING GLASS DOORS, SOLID CORE, WOOD PANEL, INSULATED, OR GLASS DOORS ONLY.	X
EXT. JOINTS & CRACKS	904.1	TO BE CAULKED, GASKETED, WEATHERSTRIPPED OR OTHERWISE SEALED.	X
WATER HEATERS	904.2	MUST BEAR LABEL INDICATING COMPLIANCE WITH ASHRAE STANDARD 90 OR COMPLY WITH EFFICIENCY AND STANDBY LOSS REQUIREMENTS. SWITCH OR CLEARLY MARKED CIRCUIT BREAKER (ELECTRIC), OR CUT-OFF (GAS) MUST BE PROVIDED. AN EXTERNAL OR BUILT-IN HEAT TRAP MUST BE PROVIDED.	NA
SWIMMING POOLS & SPAS	904.3	SPAS & HEATED POOLS MUST HAVE COVERS (EXCEPT SOLAR HEATED). NON-COMMERCIAL POOLS MUST HAVE A PUMP TIMER. GAS SPA & POOL HEATERS MUST HAVE MINIMUM THERMAL EFFICIENCY OF 75%.	NA
HOT WATER PIPES	904.4	INSULATION IS REQUIRED ONLY FOR RECIRCULATING SYSTEMS. IN SUCH CASES, PIPING HEAT LOSS SHALL BE LIMITED TO 17.5 BTU/H/LINEAR FOOT OF PIPE.	X
SHOWER HEADS	904.5	WATER FLOW MUST BE RESTRICTED TO NO MORE THAN 3 GALLONS PER MINUTE AT 20 TO 80 PSIG.	X
HVAC DUCT CONSTRUCTION	903.2 904.6	CONSTRUCTED IN ACCORDANCE WITH INDUSTRY STANDARDS & LOCAL MECHANICAL CODES. DUCTS IN UNCONDITIONED SPACE MUST BE INSULATED TO MINIMUM R- 4.2 & JOINTS MUST BE SEALED.	X
HVAC CONTROLS	904.7	SEPARATE READILY ACCESSIBLE MANUAL OR AUTOMATIC THERMOSTAT FOR EACH SYSTEM.	X
CEILING INSUL.	904.9	MINIMUM R-19.	X

SUMMER CALCULATIONS

CLIMATE ZONES 7 8 9

OR	GLASS AREA	x	BASE SPM	=	BASE SUMMER POINTS
N	78		60.2		4,695
NE			88.0		
E	241		127.0		30,607
SE			135.0		
S	70		124.2		8,694
SW			135.0		
W	191		127.0		24,257
NW			88.0		
H*			124.2		

OR	GLASS AREA	x	SINGLE SPM		OR	DOUBLE SPM		x	SOF (9B)	=	AS-BUILT GLASS SUM. PTS.
			CLEAR	TINT**		CLEAR	TINT**				
N	36		64.5	(65.2)		60.2	54.9		.87		2,042
NE			94.8	94.5		88.0	78.2				
E	125		136.3	(133.9)		127.0	109.5		.46		7,699
SE			146.2	143.0		135.0	116.1				
S	36		135.6	(132.5)		124.2	107.7		.91		4,340
SW			146.2	143.0		135.0	116.1				
W	40		136.3	(133.9)		127.0	109.5		.81		4,338
NW			94.8	94.5		88.0	78.2				
H*			428.7	354.7		380.6	278.9				
N	32			65.2					1.0		2,086
N	10			65.2					.70		456
S	34			132.5					.75		3,378
W	79			133.9					.59		6,241
W	24			133.9					.70		2,249
W	48			133.9					.87		5,591
E	46			133.9					.93		5,728
E	70			133.9					.81		7,592

.15	x	COND. FLOOR AREA	+	TOTAL GLASS AREA	=	BASE ADJ. FACTOR	x	BASE GLASS SUBTOTAL	=	ADJUSTED GLASS BASE SP
.15		3,585		580		.9272		68,253		63,281

AS-BUILT GLASS SUBTOTAL	51,740
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COMPONENT DESCRIPTION		AREA	x	BASE SUM. PT. MULT.	=	BASE SUMMER POINTS
WALL	EXTERIOR	3,166		1.6		5,065
	ADJACENT			1.0		

COMPONENT DESCRIPTION		AREA	x	SUM. PT. MULT. (9C THRU 9G)	=	AS-BUILT SUMMER POINTS
	Frame R-19	3,166		1.6		5,065

DOORS		AREA	x	BASE SUM. PT. MULT.	=	BASE SUMMER POINTS
	EXTERIOR	20		12.9		258
	ADJACENT			4.9		

DOORS		AREA	x	SUM. PT. MULT.	=	AS-BUILT SUMMER POINTS
	Wood	20		11.8		236

CEIL		AREA	x	BASE SUM. PT. MULT.	=	BASE SUMMER POINTS
	UNDER ATTIC OR SINGLE ASSEMBLY	2,435		.8		1,948
				.8		
				.8		

CEIL		AREA	x	SUM. PT. MULT.	=	AS-BUILT SUMMER POINTS
	Under Attic R-30	2,435		.8		1,948

FLOOR		AREA	x	BASE SUM. PT. MULT.	=	BASE SUMMER POINTS
	SLAB RAISED	2,826		-20.0		-6,104
				-2.16		

FLOOR		AREA	x	SUM. PT. MULT.	=	AS-BUILT SUMMER POINTS
	Raised Slab	2,826		.8		2,260

FOR SLAB-ON-GRADE USE PERIMETER LENGTH ALONG CONDITIONED FLOOR IN PLACE OF AREA.

INFILTRATION	3,585	14.7	52,699
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Practice#2	3,585	14.7	52,699
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USE FLOOR AREA OF CONDITIONED SPACE.

TOTAL COMPONENT BASE SUMMER POINTS	117,147
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TOTAL COMPONENT AS-BUILT SUMMER POINTS	113,948
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COOLING SYSTEM	BASE CSM	x	TOTAL BASE SUM. PTS.	=	BASE COOLING POINTS
	.43		117,147		50,373

TOTAL AS-BUILT SUM. PTS.	AS-BUILT DM (9H)	x	AS-BUILT CSM (9K)	x	AS-BUILT CCM (9L)	=	AS-BUILT COOLING POINTS
113,948	1.14		.36		.77		36,008

HOT WATER SYSTEM	NUMBER OF BEDROOMS	x	BASE HWM	=	BASE HOT WATER POINTS
	5		3319		16,595

AS-BUILT HOT WATER SYSTEM DESC.	NUMBER OF BEDROOMS	x	AS-BUILT HWM (9M)	x	AS-BUILT HWCM (9N)	=	AS-BUILT HOT WATER POINTS
	5		3,318		--		16,590

* H = Horizontal Glass (Skylights)
 ** For Shading Coefficient less than 0.83, see sec. 903.2(a). Tint Multipliers may be used for glass with solar screens, film, or tint.

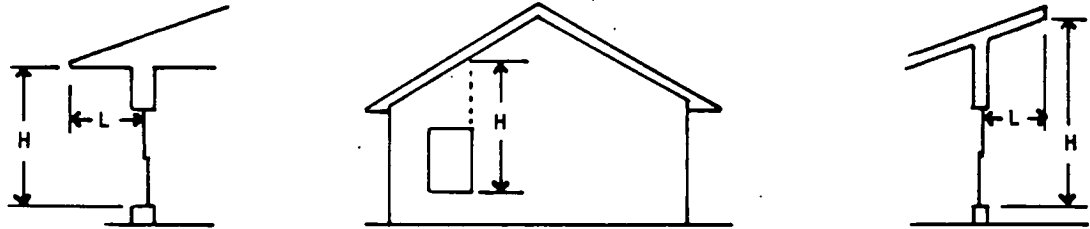
SUMMER POINT MULTIPLIERS

9B SUMMER OVERHANG FACTORS (SOF) For single and double pane glass.

CLIMATE ZONES 7 8 9

ORIENTATION	OVERHANG RATIO											
	0.0 - 0.17	0.18 - 0.26	0.27 - 0.35	0.36 - 0.46	0.47 - 0.57	0.58 - 0.70	0.71 - 0.83	0.84 - 1.18	1.19 - 1.72	1.73 - 2.73	2.74 - 5.66	5.67 - Up
N	(1.0)	.91	(.87)	.84	.80	.77	.74	(.70)	.64	.58	.53	.48
NE/NW	1.0	.92	.86	.81	.76	.72	.68	.64	.56	.50	.44	.40
E/W	1.0	(.93)	(.87)	(.81)	.75	.70	.65	(.59)	(.46)	.41	.34	.28
SE/SW	1.0	.92	.85	.78	.70	.64	.58	.52	.42	.34	.28	.23
S	1.0	(.91)	.83	(.75)	.67	.60	.54	.48	.39	.33	.30	.27

OVERHANG RATIO = L/H



9C WALL SUMMER POINT MULTIPLIERS (SPM)

FRAME			CONCRETE BLOCK				FACE BRICK		LOG		
WOOD			INTERIOR INSUL.		EXT. INSUL.		R-VALUE	WOOD FR	6 INCH		
R-VALUE	EXT	ADJ	R-VALUE	EXT	NORM	LT WT	0 - 6.9	4.6	R-VALUE	EXT	
0 - 6.9	8.5	3.4	0 - 2.9	4.2	1.9	3.3	7 - 10.9	1.3	0 - 2.9	2.8	
7 - 10.9	3.2	1.3	3 - 4.9	2.7	1.3	2.2	11 - 18.9	1.1	3 - 6.9	1.9	
11 - 12.9	2.7	1.0	5 - 6.9	2.0	1.1	1.6	19 - 25.9	.6	7 & Up	1.5	
13 - 18.9	2.4	.9	7 - 10.9	1.6	.8	1.3	26 & Up	.3	8 INCH		
(19 - 25.9)	(1.6)	.6	11 - 18.9	1.0	.6	.9	R-VALUE	BLOCK	R-VALUE	EXT	
26 & Up	1.0	.3	19 - 25.9	.5	.3	.5	0 - 2.9	2.3	0 - 2.9	1.9	
STEEL			26 & Up	.3	.2	.3	3 - 6.9	1.6	3 - 6.9	1.4	
R-VALUE	EXT	ADJ						7 - 9.9	.9	7 & Up	1.2
0 - 6.9	11.6	4.4						10 & Up	.7		
7 - 10.9	5.5	2.1									
11 - 12.9	4.2	1.6									
13 - 18.9	3.9	1.5									
19 - 25.9	3.4	1.3									
26 & Up	1.9	0.7									

9E CEILING SUMMER POINT MULTIPLIERS (SPM)

UNDER ATTIC		SINGLE ASSEMBLY		CONCRETE DECK ROOF		
R-VALUE	SPM	R-VALUE	SPM	CEILING TYPE		
R-VALUE	SPM	R-VALUE	SPM	R-VALUE	DROPPED	EXPOSED
19 - 21.9	1.5	5 - 6.9	7.9	10 - 13.9	4.1	4.6
22 - 25.9	1.3	7 - 8.9	5.4	14 - 20.9	2.9	3.1
26 - 29.9	1.0	9 - 10.9	4.3	21 & Up	1.9	2.0
(30 - 37.9)	(.8)	11 - 12.9	3.6			
38 & Up	.6	13 - 18.9	3.3			
		19 - 25.9	2.5			
		26 & Up	1.6			

CREDIT MULTIPLIER FOR ATTIC RADIANT BARRIER = .55

9D DOOR SUMMER POINT MULTIPLIERS (SPM)

DOOR TYPE	EXT	ADJ
WOOD	(11.8)	4.5
INSULATED	12.9	4.9

9F FLOOR SUMMER POINT MULTIPLIERS (SPM)

SLAB-ON-GRADE EDGE INSULATION		RAISED CONCRETE		RAISED WOOD (See 903.2(e))	
R-VALUE	SPM	R-VALUE	SPM	R-VALUE	SPM
0 - 2.9	-20.0	(0 - 2.9)	(.8)	0 - 6.9	1.1
3 - 4.9	-17.4	3 - 4.9	-.3	7 - 10.9	.1
5 - 6.9	-16.6	5 - 6.9	-.4	11 - 18.9	.0
7 & Up	-16.0	7 & Up	-.5	19 & Up	.0

9G INFILTRATION SUMMER POINT MULTIPLIERS

INFILTRATION PRACTICE (See Table 9P)	SPM
PRACTICE # 1	18.6
PRACTICE # 2	(14.7)
PRACTICE # 3	10.1

9H DUCT MULTIPLIERS (DM)

R-VALUE	With Return Air Duct	W/O Return Air Duct
4.2 - 4.9	1.14	1.10
5.0 - 6.6	1.12	1.08
6.7 & Up	1.09	1.06
DUCTS IN CONDITIONED SPACE		1.00

WINTER CALCULATIONS

OR	GLASS AREA	x	BASE WPM	=	BASE WINTER POINTS
N	78		2.2	=	171
NE			1.4		
E	241		- 1.1	=	-265
SE			- 3.3		
S	70		- 3.1	=	-217
SW			- 3.3		
W	191		- 1.1	=	-210
NW			1.4		
H*			- 3.1		

OR	GLASS AREA	x	SINGLE WPM		OR	DOUBLE WPM		x	WOF (9B)	=	AS-BUILT GLASS WIN. PTS.
			CLEAR	TINT**		CLEAR	TINT**				
N	36		3.7	(3.7)		2.2	2.4		1.06	=	141
NE			2.9	2.9		1.4	1.8				
E	125		.1	(.2)		- 1.1	- .6		14.42	=	360
SE			- 2.1	- 2.0		- 3.3	- 2.5				
S	36		- 2.0	(- 1.8)		- 3.1	- 2.4		.91	=	-59
SW			- 2.1	- 2.0		- 3.3	- 2.5				
W	40		.1	(.2)		- 1.1	- .6		5.04	=	40
NW			2.9	2.9		1.4	1.8				
H*			- 8.9	- 7.8		- 7.3	- 5.7				
N	32		3.7						1.0	=	118
N	10		3.7						1.14	=	42
S	34			-1.8					.65	=	-40
W	79		.2						11.04	=	174
W	24		.2						7.92	=	38
W	48		.2						3.78	=	36
E	46		.2						2.58	=	24
E	70		.2						5.04	=	70

.15	x	COND. FLOOR AREA	+	TOTAL GLASS AREA	=	BASE ADJ. FACTOR	x	BASE GLASS SUBTOTAL	=	ADJUSTED GLASS BASE WP
.15		3,585		580		.9272		-521		-483

AS-BUILT GLASS SUBTOTAL	944
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COMPONENT DESCRIPTION	AREA	x	BASE WIN. PT. MULT.	=	BASE WINTER POINTS
	ADJACENT		.5		

COMPONENT DESCRIPTION	AREA	x	WIN. PT. MULT. (9C THRU 9G)	=	AS-BUILT WINTER POINTS

DOORS	EXTERIOR	AREA	x	BASE WIN. PT. MULT.	=	BASE WINTER POINTS

	Wood	20	3.5	=	70

CEIL	UNDER ATTIC OR SINGLE ASSEMBLY	AREA	x	BASE WIN. PT. MULT.	=	BASE WINTER POINTS

	Under attic R-30	2,435	.1	=	243

FLOOR	SLAB RAISED	AREA	x	BASE WIN. PT. MULT.	=	BASE WINTER POINTS

	Raised Slab R-0	2,826	1.0	=	2,826

FOR SLAB ON GRADE USE PERIMETER LENGTH ALONG CONDITIONED FLOOR IN PLACE OF AREA.

INFILTRATION	3,585	1.2	=	4,302
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practice#2	3,585	1.2	=	4,302
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USE FLOOR AREA OF CONDITIONED SPACE.

TOTAL COMPONENT BASE WINTER POINTS	
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TOTAL COMPONENT AS-BUILT WINTER POINTS	
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HEATING SYSTEM	BASE HSM	x	TOTAL BASE WIN. PTS.	=	BASE HEATING POINTS

TOTAL AS-BUILT WIN. PTS.	AS-BUILT DM (9H)	x	AS-BUILT HSM (9I)	x	AS-BUILT HCM (9J)	=	AS-BUILT HEATING POINTS
9,335	1.14		1.0		.90	=	9,577

TOTAL	BASE COOLING POINTS	+	BASE HEATING POINTS	+	BASE HOT WATER POINTS	=	TOTAL BASE POINTS
	(From P.2)		(From P.2)		(From P.2)		(Enter on P.1)
	50,373		4,897		16,595	=	71,865

AS-BUILT COOLING POINTS	+	AS-BUILT HEATING POINTS	+	AS-BUILT HOT WATER POINTS	=	TOTAL AS-BUILT POINTS
(From P.2)		(From P.2)		(From P.2)		(Enter on P.1)
36,008		9m577		16,590	=	62,175

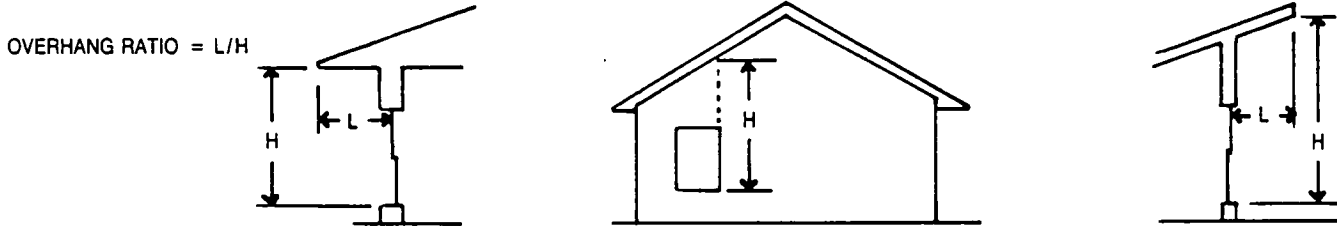
* H = Horizontal Glass (Skylights)
 ** For Shading Coefficient less than 0.83., see sec. 903.2(a). Tint Multipliers may be used for glass with solar screens, film, or tint.

WINTER POINT MULTIPLIERS

9B WINTER OVERHANG FACTORS (WOF)

CLIMATE ZONES 7 8 9

ORIENTATION	OVERHANG RATIO											
	0.0 - 0.17	0.18 - 0.26	0.27 - 0.35	0.36 - 0.46	0.47 - 0.57	0.58 - 0.70	0.71 - 0.83	0.84 - 1.18	1.19 - 1.72	1.73 - 2.73	2.74 - 5.66	5.67 - Up
	SINGLE PANE GLASS											
N	(1.0)	1.04	(1.06)	1.07	1.09	1.11	1.12	(1.14)	1.18	1.22	1.26	1.30
NE/NW	1.0	1.08	1.13	1.17	1.21	1.24	1.27	1.30	1.37	1.45	1.51	1.56
E/W	1.0	(2.58)	(3.78)	(5.04)	6.54	(7.92)	9.43	(11.04)	(14.42)	18.12	22.04	24.38
SE/SW	1.0	.87	.76	.64	.48	.32	.15	-.03	-.43	-.91	-1.46	-1.79
S	1.0	(.91)	.79	(.65)	.47	.28	.26	-.34	-1.11	-1.68	-1.92	-2.03
	DOUBLE PANE GLASS											
N	1.0	1.05	1.08	1.10	1.12	1.14	1.17	1.18	1.24	1.29	1.34	1.39
NE/NW	1.0	1.12	1.20	1.26	1.32	1.37	1.41	1.47	1.57	1.69	1.78	1.87
E/W	1.0	.74	.55	.34	.10	-.12	-.36	-.63	-1.17	-1.77	-2.41	-2.79
SE/SW	1.0	.92	.85	.77	.67	.57	.45	.34	.08	-.23	-.58	-.80
S	1.0	.94	.87	.78	.66	.54	.38	.15	-.34	-.70	-.86	-.92



9C WALL WINTER POINT MULTIPLIERS (WPM)

FRAME			CONCRETE BLOCK						FACE BRICK		LOG	
WOOD			INTERIOR INSUL.			EXT. INSUL.			R-VALUE	WOOD FR	6 INCH	
R-VALUE	EXT	ADJ	R-VALUE	EXT	ADJ	EXT	NORM	LT WT	0 - 6.9	2.4	R-VALUE	EXT
0 - 6.9	2.5	1.7	0 - 2.9	1.9	.7	1.5	1.9	1.5	7 - 10.9	.6	0 - 2.9	.6
7 - 10.9	.8	.6	3 - 4.9	1.2	.5	.9	.6	.5	11 - 18.9	.5	3 - 6.9	.3
11 - 12.9	.6	.5	5 - 6.9	.9	.4	.7	.3	.3	19 - 25.9	.2	7 & Up	.2
13 - 18.9	.6	.5	7 - 10.9	.7	.4	.5	.2	.2	26 & Up	.1	8 INCH	
19 - 25.9	(.3)	.3	11 - 18.9	.4	.2	.3	.0	.0	0 - 2.9	.9	R-VALUE	EXT
26 & Up	.2	.2	19 - 25.9	.2	.1	.2			3 - 6.9	.6	0 - 2.9	.2
STEEL			26 & Up	.1	.0	.1			7 - 9.9	.4	3 - 6.9	.1
R-VALUE	EXT	ADJ							10 & Up	.2	7 & Up	.1
0 - 6.9	3.4	2.2										
7 - 10.9	1.5	1.0										
11 - 12.9	1.1	0.8										
13 - 18.9	1.0	0.7										
19 - 25.9	0.9	0.6										
26 & Up	0.4	0.3										

9E CEILING WINTER POINT MULTIPLIERS (WPM)

UNDER ATTIC		SINGLE ASSEMBLY		CONCRETE DECK ROOF		
R-VALUE	WPM	R-VALUE	WPM	CEILING TYPE		
R-VALUE	WPM	R-VALUE	WPM	R-VALUE	DROPPED	EXPOSED
19 - 21.9	.3	5 - 6.9	1.5	10 - 13.9	.0	.1
22 - 25.9	.2	7 - 8.9	.9	14 - 20.9	.0	.0
26 - 29.9	.2	9 - 10.9	.6	21 & Up	.0	.0
(30 - 37.9)	(.1)	11 - 12.9	.5			
38 & Up	.1	13 - 18.9	.5			
		19 - 25.9	.3			
		26 & Up	.1			

CREDIT MULTIPLIER FOR ATTIC RADIANT BARRIER = .57

9D DOOR WINTER POINT MULTIPLIERS (WPM)

DOOR TYPE	EXT	ADJ
WOOD	(3.5)	2.3
INSULATED	3.8	2.5

9F FLOOR WINTER POINT MULTIPLIERS (WPM)

SLAB-ON-GRADE EDGE INSULATION		RAISED CONCRETE		RAISED WOOD (See 903.2(e))	
R-VALUE	WPM	R-VALUE	WPM	R-VALUE	WPM
0 - 2.9	- 2.1	0 - 2.9	(1.0)	0 - 6.9	.8
3 - 4.9	- 2.6	3 - 4.9	.3	7 - 10.9	.2
5 - 6.9	- 2.7	5 - 6.9	.1	11 - 18.9	.1
7 & Up	- 2.7	7 & Up	.0	19 & Up	.1

9G INFILTRATION WINTER POINT MULTIPLIERS

INFILTRATION PRACTICE (See Table 9P)	WPM
PRACTICE # 1	1.9
PRACTICE # 2	(1.2)
PRACTICE # 3	.6

9H DUCT MULTIPLIERS (DM)

R-VALUE	With Return Air Duct	W/O Return Air Duct
4.2 - 4.9	(1.14)	1.10
5.0 - 6.6	1.12	1.08
6.7 & Up	1.09	1.06
DUCTS IN CONDITIONED SPACE		1.00

SYSTEM TYPE		HEATING SYSTEM MULTIPLIERS						
Heat Pump	COP	2.5 - 2.69	2.7 - 2.89	2.9 - 3.09	3.1 - 3.29	3.3 - 3.49	3.5 - 3.69	3.7 - Up
	HSM	.53	.49	.46	.43	.40	.38	.36
Electric Strip	HSM	(1.0)						
Gas & Other Fuels	HSM	1.0 (See Table 9J for Credit Multipliers)						
PTHP & Room Units	HSM	HSM for COP 2.2 - 2.49 = .63. See above for COP >> 2.49.						
Minimums: Central Units 2.5 COP. PTHP & Room Units 2.2 COP. COP means Coefficient of Performance.								

9J HEATING CREDIT MULTIPLIERS (HCM)

SYSTEM TYPE		HEATING SYSTEM MULTIPLIERS						
Multizone	HCM	.90						
Natural Gas	AFUE	.60 - .64	.65 - .69	.70 - .74	.75 - .79	.80 - .84	.85 - .89	.90 - Up
	HCM	.41	.38	.35	.33	.31	.29	.27
Other Fuels	HCM	.63	.58	.54	.51	.48	.45	.42
Where more than one credit is claimed, multiply HCM's together. Enter product on page 4. AFUE means Annual Fuel Utilization Efficiency.								

9K COOLING SYSTEM MULTIPLIERS (CSM)

SYSTEM TYPE		COOLING SYSTEM MULTIPLIERS									
Central Units	SEER	7.8 - 7.9	8.0 - 8.4	8.5 - 8.9	9.0 - 9.4	9.5 - 9.9	10.0 - 10.4	10.5 - 10.9	11.0 - 11.4	11.5 - 11.9	12.0 - & Up
	CSM	.44	.43	.40	.38	(.36)	.34	.32	.31	.30	.28
PTAC & Room Unit	CSM	CSM for EER 7.5 - 7.7 = .46. For EER's >> 7.7 use multipliers above.									
Minimums: Central Units 7.8 SEER. Room Units 7.5 EER. PTAC under 13,000 BTU/H 7.5 EER, and over 13,000 BTU/H 7.0 EER. SEER means Seasonal Energy Efficiency Ratio. EER means Energy Efficiency Ratio.											

9L COOLING CREDIT MULTIPLIERS (CCM)

SYSTEM TYPE		COOLING CREDIT MULTIPLIERS	
Ceiling Fans	CCM	(.86)	
Multizone	CCM	(.90)	
Cross Ventilation or Whole House Fan (Credit for only one)	CCM	.95	
Where more than one credit is claimed, multiply CCM's together. Enter product on page 2.			

9M HOT WATER MULTIPLIERS (HWM)

SYSTEM TYPE		HOT WATER MULTIPLIERS							
Electric Resistance	EF	.80 - .81	.82 - .83	.84 - .85	.86 - .87	.88 - .90	.91 - .93	.94 - .96	.97 & Up
	HWM	3650	3561	3476	3395	(3318)	3208	3106	3010
Natural Gas	EF	.48 - .49	.50 - .51	.52 - .53	.54 - .55	.56 - .57	.58 - .59	.60 - .61	.62 & Up
	HWM	1495	1435	1380	1329	1282	1237	1196	1158
Other Fuels	HWM	2312	2220	2135	2056	1982	1914	1850	1790
Water heaters must comply with prescriptive measures of Table 9A. EF means Energy Factor.									

9N HOT WATER CREDIT MULTIPLIERS (HWCM)

SYSTEM TYPE		HOT WATER CREDIT MULTIPLIERS									
Solar Water Heater	SF	.1	.2	.3	.4	.5	.6	.7	.8	.9	1.0
	HWCM	.9	.8	.7	.6	.5	.4	.3	.2	.1	.0
Heat Recovery Unit	With	Air-conditioner					Heat Pump				
	HWCM	.62					.58				
Dedicated Heat Pump	EF	2.0 - 2.49			2.5 - 2.99			3.0 - 3.49		3.5 & Up	
	HWCM	.44			.35			.29		.25	
A HWM must be used in conjunction with all HWCM. See Table 9M. SF means Solar Fraction. EF means Energy Factor.											

9P INFILTRATION REDUCTION PRACTICE COMPLIANCE CHECKLIST (See Section 903.2(f))

COMPONENTS	REQUIREMENTS FOR EACH PRACTICE	CHECK
PRACTICE #1	COMPLY WITH ALL INFILTRATION PRESCRIPTIVES ON TABLE 9A.	X
PRACTICE #2	COMPLY WITH PRACTICE #1 AND THE FOLLOWING:	X
Exterior Walls and Floors	Top plate penetrations sealed. Infiltration barrier installed. Sole plate/floor joint caulked or sealed.	X
Exterior Walls & Ceilings	Penetrations, joints and cracks on interior surface caulked, sealed and gasketed.	X
Ductwork	Ductwork in unconditioned space must be sealed.	X
Fireplaces	Equipped with outside combustion air, doors, and flue dampers.	X
Exhaust Fans	Equipped with dampers. Combustion devices see 903.2(f).	X
PRACTICE #3	COMPLY WITH PRACTICES #1 AND #2 AND THE FOLLOWING:	
Ceilings	Infiltration barrier installed.	
Interior Walls	Top plate penetrations sealed or joints & cracks on interior walls caulked, sealed or gasketed.	
Recessed Lights	Sealed from conditioned space & insulated from ventilated attic spaces.	
Ductwork	All ductwork located in conditioned space.	
Combustion Appliances	Be in unconditioned space (except direct vent), draw air from unconditioned space, exhaust by-products to outside. Stoves see 903.2(f).	

4123

FENCE

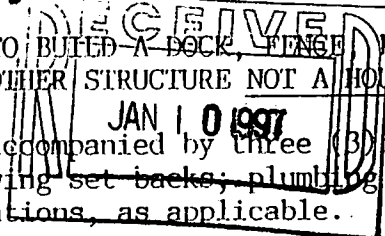
TAX FOLIO NO.

4/23

DATE

10/10/97

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



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

Owner JAMES B. DOWNING Present Address 47 S. SEWALLS PT RD

Phone 561-334-2000 DAY STUART FL 34996

Contractor NONE Address SAME

Phone _____

Where licensed _____ License Number _____

Electrical Contractor _____ License Number _____

Plumbing Contractor _____ License Number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: FENCE - 4' HIGH.

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

EMERITA - 47 S. SEWALLS PT RD.

Subdivision EMERITA Lot Number 26 Block Number _____

Contract Price \$ NONE Cost of Permit \$ 25.00

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 of Town Commissioner "Red-Tagging" the construction project.

Contractor _____

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

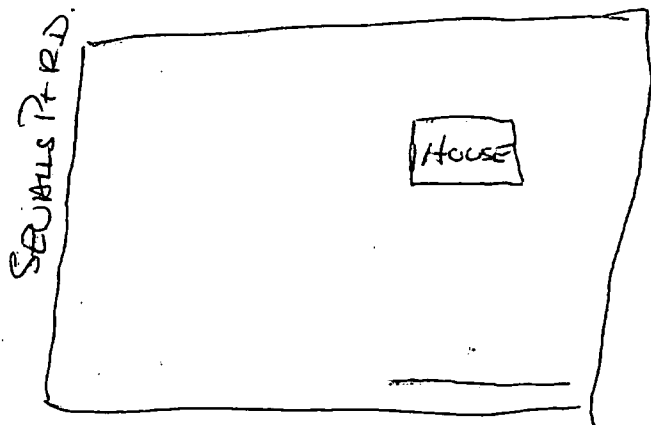
Owner [Signature]
TOWN RECORD

Date submitted _____ Approved: [Signature] 1/10/96
Building Inspector Date

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

Certificate of Occupancy issued(if applicable) _____ Date

SP1282



Permit No. _____

2 ENTRANCE POSTS
4' FENCE - 48' LONG

4795

REROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 1/21/00

BUILDING PERMIT NO. 4795

Building to be erected for JIM DOWNING

Type of Permit RE ROOF

Applied for by GARY MARZO, INC.

(Contractor)

Building Fee _____

Subdivision _____ Lot _____ Block _____

Radon Fee _____

Address 47 S. SEWALL'S POINT RD.

Impact Fee _____

Type of structure S.F.R.

A/C Fee _____

Electrical Fee _____

Parcel Control Number: _____

Plumbing Fee _____

Roofing Fee \$120.00

Amount Paid \$120.00 Check # 7864 Cash _____

Other Fees (_____) _____

Total Construction Cost \$ 7,750.00

TOTAL Fees \$120.00

Signed Gary Marzo
Applicant

Signed [Signature]
Town Building Inspector OPACIAC

RE-ROOFING PERMIT

SHEATHING DRY IN PROGRESS	DATE _____	INSPECTIONS	
	DATE _____	PROGRESS	DATE _____
	DATE _____	FINAL	DATE <u>2/4/00</u>
24 HOURS NOTICE REQUIRED FOR INSPECTIONS.		CALL 287-2455	
WORK HOURS – 8:00 AM UNTIL 5:00 PM			
MONDAY THROUGH SATURDAY			

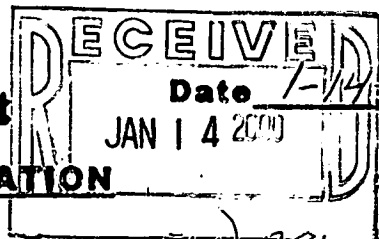
New Construction Remodel Addition Demolition

**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!**

Bldg. Pmt# 4795
1/21/00

Town of Sewall's Point

BUILDING PERMIT APPLICATION



Owner's Name: Mr. Jim Downing Phone No. 561) 286-2052
Owner's Present Address: 47 S. Sewalls Pt. Rd, Sewalls Pt.,
Fee Simple Titleholder's Name & Address if other than owner _____

Location of Job Site: _____
TYPE OF WORK TO BE DONE: _____
CONTRACTOR INFORMATION
Contractor/Company Name: Gary Marzo Inc. Phone No. 877-2489
COMPLETE MAILING ADDRESS P.O. Box 8955, Port St Lucie FL 34985
State Registration Roofing Contractor State License RC0058206
Legal Description of Property _____
Parcel Number _____

ARCHITECT/ENGINEER INFORMATION

Architect _____ Phone No. _____
Address _____
Engineer _____ Phone No. _____
Address _____
Area Square Footage: 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 finish floor elevation _____ NGVD (minimum 1 foot above BFE)
Cost of construction or Improvement _____
Fair Market Value (FMV) prior to improvement _____
Substantial Improvement 50% of FMV yes _____ No _____
Method of determining FMV _____

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

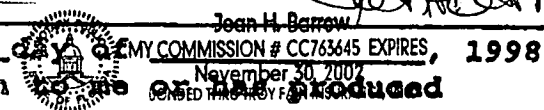
Electrical _____ State License _____
Mechanical _____ State License# _____
Plumbing _____ State License# _____
Roofing _____ State License# _____

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

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

OWNER/ CONTRACTOR MUST SIGN APPLICATION

OWNER or AGENT SIGNATURE Gary Marzo
Sworn to and subscribed before me this 14 day of January, ~~1998~~ 2000 by G. Marzo who is personally known to me or has produced or has produced F.d.l. and who did (did not) take an oath. [Signature]
CONTRACTOR SIGNATURE _____
Sworn to and subscribed before me this _____ day of _____, 1998 by _____ who is personally known to me or has produced _____ and who did (did not) take an oath.



Quality Roofing
State Lic. # RC 0058206

1290 B Southwest Biltmore Street
P. O. Box 8955
Port St. Lucie, FL 34985



[Jan 17, 18, 19]
Id#-13841005000026
Tel: (561) 465-2489
Tel: (561) 871-2489
Fax: (561) 465-8829

Lot - 26 Emarita
Blk -
Sec -

REROOFING PROPOSAL SUBMITTED TO:

Name Mr. Jim Downing Date 10-29-99
Address 47 S. Sewalls Point Rd.
City Sewalls Point State FL Zip 34996
Phone # 286-2052 Fax # 286-8552 Work Phone # _____ Work Fax # _____
Job Address Same
Lot _____ Blk _____ Sec _____ Parcel ID # _____
Existing roof design and composition: Gable roof with architectural shingles. Roof Pitch: 6/12 + 5/12
3/12

We respectfully submit the following proposal and estimate for the property listed above, consisting of the following, as needed:

- Remove existing roof, clean out gutters, clean up grounds and haul all debris to County Landfill.
- Replace all rotten plywood and fascia board on roof. Install rafter helpers where needed.
Type and size of fascia: Cedar 1x6 and cedar 1x10 fascia.
- a. Remail all plywood sheathing on roof using 8d nails spaced 6 inches on center as per local bldg. codes.
- Install one ply(s) of #30 felt underlayment using plastic top felt nails.
- Install white (color) aluminum 2 x 2 eaves drip on all perimeters of roof.
- Install 14 inch aluminum flashing in valleys, using the laced, closed cut shingle method. 16 ft. valleys
- Install new lead flashings on vent pipes. All vent pipes.
- Install new roof vents. one 10 inch roof vent.
Install 105 ft. of Venture (color) aluminum ridge vent for adequate attic ventilation.
- Install proper 4x5 metal flashing at roof plane intersections, as needed.
- Professionally install self sealing fungus resistant fiberglass shingles using six 1 1/4 inch coil roofing nails per shingle.
Shingles to be installed according to manufacturer's specifications and local building code requirements.
Manufacturer 25 year Owens-Corning Oakridge color 30 yr. oakridge onyx black
- Seal all eaves drip to shingles using Perma Seal flashing cement.
- Additional work included in bid: Remove and re-install skylight on roof. Apply one coat of white latex primer & paint to new fascia installed on roof. Remove attic roof vents and cover openings with plywood. Ridge vent installed for attic ventilation.
- Flat roof N/A
 - New 26 gauge N/A (color) galvanized 3 x 3 eaves drip on all perimeters of flat roof.
 - Install one 43 lb. base sheet underlayment.
 - Torch apply one 10 inch starter strip of smooth black Dibiten modified bitumen on all perimeters for eaves drip and as needed for flashing details.
 - Install 26 gauge galvanized N/A flashings on roof plane intersections as needed.
 - Torch apply one ply of white or tan granular 10 year Dibiten modified bitumen to base sheet underlayment as per manf. specs.
 - Extra charge for 2 plys of Dibiten modified bitumen for a 20 year manufacturer warranty N/A
- Workmanship guaranteed for five years as per manufacturer warranty.
- Workers Compensation, General Liability and other such insurance as required by law will be carried by Gary Marzo, Inc. for the above roofing work.
- Roofing work performed will be left in a waterproof condition at the end of each days wrk.
- Notes: Owens-Corning System Advantage Preferred Contractor extended warranty included in total price below.
\$ 7,500.00 \$ 7,750.00

The following prices include permit fee, taxes and all material and labor. Price for 25 yr. Oakridge

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
09/16/1999

PRODUCER (561)461-8870 FAX (561)461-8876
David G. Willbur Insurance Agency, Inc.
2716 S. U.S. Hwy. #1
Fort Pierce, FL 34982-5919

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

Attn: Ext:
INSURED
GARY MARZO, INC.
P.O. BOX 8955
PORT ST. LUCIE, FL 34985

COMPANIES AFFORDING COVERAGE
COMPANY A Transportation Ins. Co.
COMPANY B FCCI Mutual Ins. Co.
COMPANY C
COMPANY D

permy file
RECEIVED
JAN 10 2000
BY:

COVERAGE

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 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)	COVERAGES
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNERS & CONTRACTOR'S PROT	B1 23758305	05/01/1999	05/01/2000	GENERAL AGGREGATE \$ 100,000 PRODUCTS - COMP/PROP AGG \$ 100,000 PERSONAL & ADV INJURY \$ 300,000 EACH OCCURRENCE \$ 300,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP (Any one person) \$ 5,000
	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 \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL <input type="checkbox"/> OTHER	001-WC98A-31701	09/01/1999	09/01/2000	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER EL EACH ACCIDENT \$ 100,000 EL DISEASE - POLICY LIMIT \$ 500,000 EL DISEASE - EA EMPLOYEE \$ 100,000

RECEIVED
JAN 20 2000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CANCELLATION

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


AUTHORIZED REPRESENTATIVE
David Willbur Jr.

Town of Sewells Point
#1 South Sewells Point Road
Stuart, FL 34996

ACORD FORM NO. 1010 (1/99)

STATE OF FLORIDA AC# 5633707
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 RC -0038206 08/27/1999 99900440
 REGISTERED ROOFING CONTRACTOR
 MARZO, GARY PHILIP
 GARY MARZO INC
 (INDIVIDUAL MUST MEET ALL LOCAL LICENSING REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)
 HAS REGISTERED under the provisions of Ch. 489 FS.
 Expiration Date: AUG 31, 2001

MARTIN COUNTY CONTRACTORS
 CERTIFICATE OF COMPETENCY
 MARZO, GARY P
 GARY MARZO INC
 BOX 8955
 PSL , FL 34989

EXPIRES SEPTEMBER 30, 2000	
	CERTIFICATE NUMBER 36729 SP01121

PERMIT # _____

TAX FOLIO # 13841005 0000 2602 0000

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):

47 S. Sewalls Point Rd Lot 26 - EMARITA

GENERAL DESCRIPTION OF IMPROVEMENT: Roof

OWNER: Mr. James Downing

ADDRESS: 47 S. Sewalls Point Rd

PHONE #: 286-2052 **FAX #:** _____

CONTRACTOR: Gary Marzo Inc

ADDRESS: P.O. Box 8955 Port St Lucie FL 34985

PHONE #: 871-2489 / 465-2489 **FAX #:** 465-8829

SURETY COMPANY (IF ANY): N/A

ADDRESS: _____

PHONE #: _____ **FAX #:** _____

BOND AMOUNT: _____

LENDER: N/A

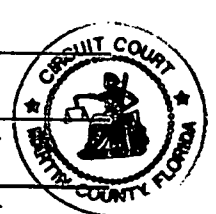
ADDRESS: _____

PHONE #: _____ **FAX #:** _____

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 COPIES D.C.
DATE 1-21-00



PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.08, FLORIDA STATUTES.

JAN-19 00 10:20 FROM:

JAN 19 '00 11:53 FR CUSTOMER RESPONSE CTR

TO:561 465 8829

PAGE: 11

TO 915614664542

P.11/20



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

BUILDING CODE COMPLIANCE OFFICE
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1605
MIAMI, FLORIDA 33120-1363
(305) 375-3901 FAX (305) 375-3908

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

CONTRACTOR ENFORCEMENT SECTION
(305) 375-2966 FAX (305) 375-3908

PRODUCT CONTROL DIVISION
(305) 375-3902 FAX (305) 375-6339

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Owens Corning
One Owens Corning Parkway
Toledo, OH 43659

Your application for Product Approval of:

Okridge 30 AR

under Chapter 8 of the Metropolitan Dade County Code governing the use of Alternate Materials and Types of Construction, and completely described in the plans, specifications and calculations as submitted by:

Underwriters Laboratories, Inc. and Octotex Corporation Testing Services

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 2-9 and the standard conditions on page 10.

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.: ~~98-0030-02~~

EXPIRES: 10.01.01

Raul Rodriguez
Product Control Supervisor

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

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

12/100 TOWN OF SEWELL'S POINT REVIEWED
BASIC OFFICIAL

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

APPROVED: 10.01.98

TOWN COPY
AT S. SEWELL'S POINT RAMP

PN 4795

JAN-19 '00 11:04 FROM:
JAN 19 '00 11:57 FR CUSTOMER RESPONSE CTR

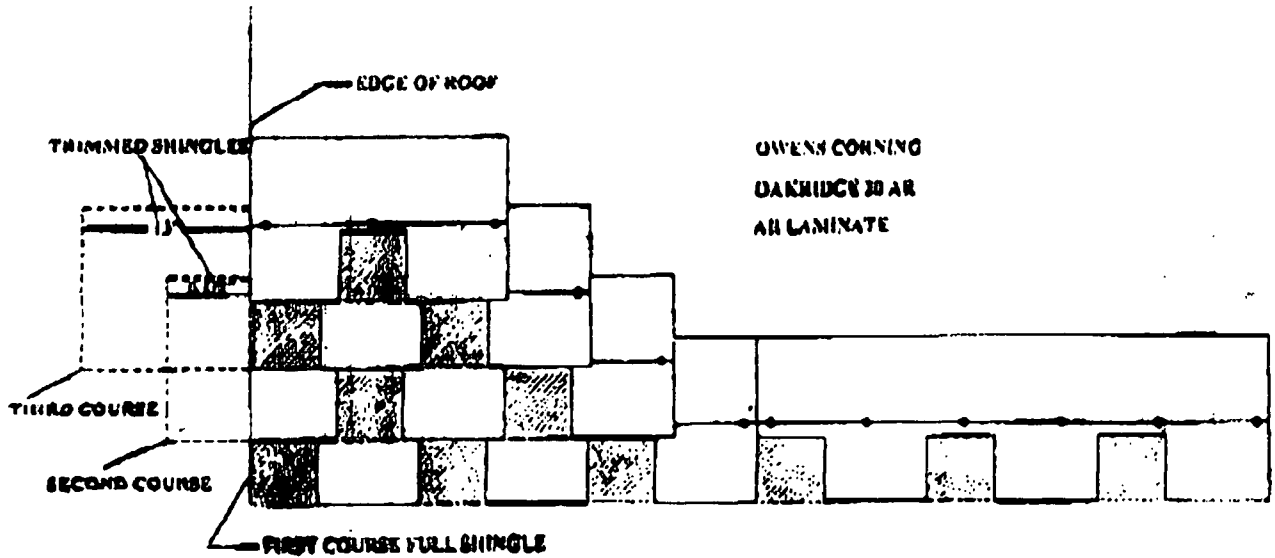
TO: 561 465 8829
TO 915614664542

PAGE: 07
P. 19/20

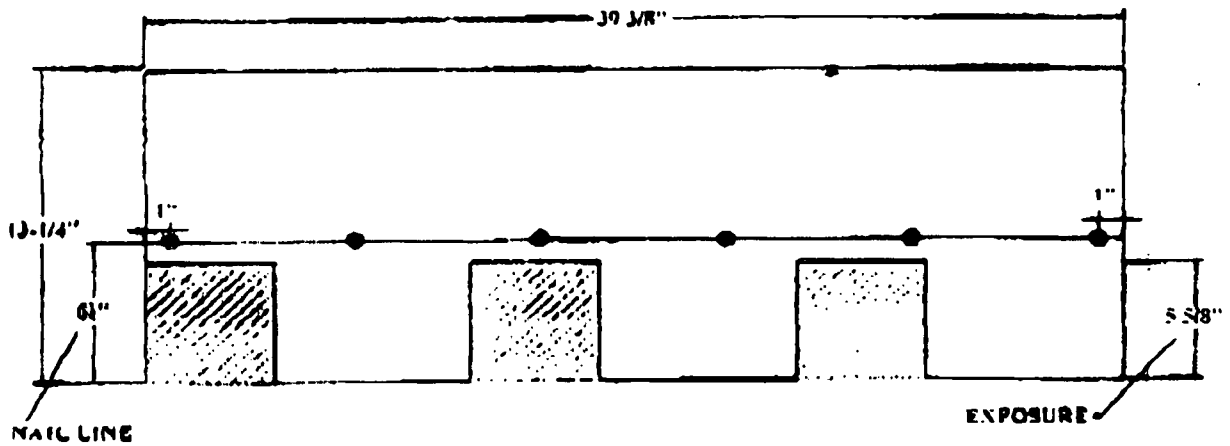
OWENS CORNING CORPORATION

Product Control No.: 98-0830.02


DETAIL A



DETAIL B



OWENS CORNING
FASTENING PATTERN & PHYSICAL DIMENSIONS
OAKRIDGE 30 AR LAMINATE



Frank Zuloaga, RRC
Roofing Product Control Examiner

2000 ~~1998-1999~~

Town of Sewall's Point
Building Department - Inspection Log

Fri, 1-28-00

PAGE 1 OF 1

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4772	Downing	sheathing	Partial	late AM
	77 S. S.P. Rd.	Partial	B.G.	2nd Story South side
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4801	Schultz	final	Passed	
	64 S. S.P. Rd.	dock et.	B.G.	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4567	Grast	final	Passed	REAR ONLY.
	10 Ementz	fence	B.G.	Changed From 7'
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4752	Sinton	pool	PASSED	re-inspect
	33 N. River Rd.	deck		9:45 NOT Ready.
	Indialucie			
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4514	Ciconia	final for*	FAILED	contractor will
	126 N.S.P. Rd.	c.o.	B.G. + ED	call to set up
	Frank Russo	10:30 AM		time.
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4652	Vance	final pool	Failed	286-1172
	12 Wendy Lane		B.G.	220-0452 Home
	off N.S.P. Rd. - between Quail Run & Castle Hill			NO PLANS OR PERMIT ON JOB - NEED POOL HEATER
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4658	FOGUA	Walls only	Passed	REMARKS Bowd wire.
	103 HENRY SEWELL	INSULATION	WG	WALLS ONLY
	"	Red DECK	cancel	
	"	DRIVEWAY	cancel	

OTHER: * Final on House Complete. Now Permitted walls
+ Entry Gate AT Road. Withhold issuance of C.O. Pending
Resolution.

T/R PERMIT APPL - 2 VIA LUCINDA BOTTRELL - SITE #6 RECEIVED

INSPECTOR: *[Signature]*

DATE: 1/28/00

2000 ~~1998~~ ~~1999~~

Town of Sewall's Point Building Department - Inspection Log

Mon. 1-31-00

PAGE 1 of 1

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4657	105 HENRY SEWALL FOGUA	POOL DECK DRIVEWAY PORCH	Passed BG	
4658	FOGUA	POOL DECK	Passed	
4761 (POOL)	103 HENRY SEWALL	DRIVEWAY PORCH	BG	
4758	Stier 13 Knowles	tie beam WALL	Passed BG	Several pieces of Steel short. Add Pieces Before Pouring
4295	Downing	Underpinning	Passed	late AM
	42 S.S.P.	Shoring	BG	Metal 2nd story.
4659	Conway 17 Lottina	2nd floor subsidng	Passed BG	Sheathing Pool Area. 2nd Fl. Sheathing Delivered Letter For
4771	3 PACANA WAY (RALPH DIAZ)	VERIFY PRE-CONST SERVICES EJECT/WTR/DAMP/TOILET	Passed BG	RELEASE STOP WORK

4
5
N
3
S
6
N
1
N
2

OTHER: Steve Conway - Delivered Letter #4589 130N. S.P. & DeGidia. FOR 5/8 plywood on under side of main Floor + NO HURRICANE Shutters on 1st Fl. Knock out walls. FROM ENG. S.J. AMICO PE Dated 1-24-00
Steve Conway Agreed with Letter (1-31-00 BG)

INSPECTOR: *[Signature]* BUILDING OFFICIAL **DATE:** 1/31/00

~~2000~~ 2000
Town of Sewall's Point
Building Department - Inspection Log

Wed, 2-2-00

PAGE 1 OF 2

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4725	Dio...	metal	Passed	Rain...
5	17 S.S.P. Rd.	underlayment	B.G.	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4553	Fadden 16 S.S.P. Rd.	shutters (one shutter) 3rd REINSPECT (EPA)	PASSED	MANDATORY STORAGE SHUTTER INSTALLATION COMPLETE
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4651	Demarkarian 19 Castle Hill way	exterior tie down	Passed B.G.	Front Posts
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4723	Koch 71 N. River Rd. (Gual Run)	tie beam	Partial N. Side + GARAGE	AM call 287-0685
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4673	Foglia 112 H. Sewall way	tin tag & metal	Passed B.G.	Will to set up time Raining
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4771	Van Wagner 3 Palama (Castle Hill)	footer slab/ground	Passed B.G.	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4573	Campo 5 Palama T/R PN 287	trees (AMEND. T/R PERM.) PN 287 (EPA)		2:45

OTHER: 1. T/R PERM. APPL. #6 RIDGEVIEW (URGENT) - OWNER: NORTON 2 VIA LUCINDIA
✓ July 2:00 PM confirmed markings of Florida Holly for removal

INSPECTOR: 

DATE: 2/2/00

2000 ~~1998-1999~~

Town of Sewall's Point Building Department - Inspection Log

2

Fri. 2-4-00

PAGE 2 OF 2

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4785 (2)	Hansen 32 N. S.P. Rd.	final driveway	Passed BG	
4658 (11)	FOGUA 103 HENRY SEWALL	DRY WALL SCREW	Passed BG	Add Few screws to several AREAS
4803 (10)	FOGUA 101 HENRY SEWALL	STEM WALL FOOTING BONDING	Passed BC	
4795	Downing	final roof	Passed	
4691 (9)	Wattles 20 N. Ridgeview	sub-staining	NOT READY 2:30 PM	CONTR. TO OFFICE MONDAY RE: RESCHEDULE & SUBMIT REV. DWGS
4813 X	R. Folweiler 11 Lofting Way (Castle Hill)	tree	PASSED (CONFORM) APPL.	PM - EA OK TO ISSUE PERMIT
4723 (12)	Koch 71 N. River Rd.	TIE BEAM	Passed By.	Main BEAM. Added inspection

OTHER:

INSPECTOR: 

DATE: 2/7/00

6137

REMOVE SIDING

TOWN OF SEWALL'S POINT

Date 2/11/03

BUILDING PERMIT NO. 6137

Building to be erected for RUSSELL, CHARLES Type of Permit DEMO SIDING

Applied for by ~~47 S. SEWALL'S PT RD~~ O/B (Contractor) Building Fee 35.00

Subdivision EMARITA Lot 26 Block _____ Radon Fee _____

Address 47 S. SEWALL'S PT RD Impact Fee _____

Type of structure SFC A/C Fee _____

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Other Fees (25%OB) 8.25

TOTAL Fees 43.75

Parcel Control Number:

138410050000026020000

Amount Paid 43.75 Check # 2156 Cash _____

Total Construction Cost \$ ~~2000~~ 100.00

Signed Charles David Russell
Applicant

Signed Gene Simmons (Rob)
Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Building Permit Number: _____

Owner or Titleholder Name: Charles David Russell City: SEWALL'S POINT State: FL. Zip: 34496

Legal Description of Property: EMARITA Lot 26 Parcel Number: _____

Location of Job Site: 47 S.E. Sewall's Point Road Type of Work To Be Done: Remove Cedar TRIM,

Remove Rotten Siding, REPLACE with ~~NEW Plywood~~ Prep For ~~Metal Cedar Siding~~

CONTRACTOR/Company Name: OWNER/IMPROVER Phone Number: _____

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

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

ARCHITECT: _____ Phone Number: _____

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

ENGINEER: Stiles Peet Phone Number: _____

Street: _____ City: STUART State: FL. Zip: _____

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

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

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

FLOOD HAZARD INFORMATION Flood Zone: _____ Minimum Base Flood Elevation (BFE): _____ NGVD

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

COST AND VALUES Estimated Cost of Construction or Improvements: \$2,000 Estimated Fair Market Value (FMV) Prior

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

SUBCONTRACTOR INFORMATION

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____ South Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____

National Electrical Code _____ Florida Energy Code _____

Florida Accessibility Code _____

THEREBY 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) Charles David Russell CONTRACTOR SIGNATURE (Required) _____

State of Florida, County of: Martin

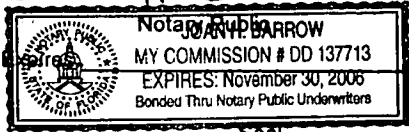
This the 11th day of February, 2003

by C.D. Russell who is personally

known to me or produced F.d.I.

as identification Joan H. Barrow

My Commission Expires: _____



Seal

On State of Florida, County of: _____

This the _____ day of _____, 2003

by _____ who is personally

known to me or produced _____

As identification _____

Notary Public

My Commission Expires: _____

Seal

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 though you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is 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: Charles David Russell Date: 2-11-2003

Signature: Charles David Russell

Address: 47 S.E. Sewall's Point Road

City & State: Sewall's Point, FL. 34996

Permit No. 6137

This form is for all permits except electrical.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri, 2/12, 2004 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
10137	ROSS	DEMO FINAL	Passed	(in progress)
(6)	47 S. Sewall's Pt Rd O/B		need for	place studs
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
1047	Storck	FINAL	Passed	→ close, CO
(3)	27 N. River Road Gulick + McCauley	Remodel/Repair		INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5047	BOWER	BLDG FINAL AC FINAL PLUMBING FINAL ELEC. FINAL ROOF FINAL	+shutters Passed	: all except pool → CO
(1)	10 COPAINE SEAGATE			INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
				INSPECTOR:

OTHER: 34 S. Sewall's Pt. Demolition ✓
 130 S. " " " Permit? ✓
 36 E High Pt. Fence - Permit?

6219

SHUTTERS

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/14/03

BUILDING PERMIT NO. 6219

Building to be erected for RUSSELL

Type of Permit SHUTTERS

Applied for by GULFSTREAM ALUMINUM (Contractor)

Building Fee 35.00

Subdivision EMARITA Lot 26 Block _____

Radon Fee _____

Address 47 S. SEWALL'S POINT RD

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

138410050000026020000

Electrical Fee _____

Plumbing Fee _____

Amount Paid 35.00 Check # 102 Cash _____

Other Fees (_____)

Roofing Fee _____

Total Construction Cost \$ 1,136.25

TOTAL Fees 35.00

Signed George Puscarewicz
Applicant

Signed Gene Simmons (YAB)
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 checked="" 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	_____

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Owner or Titleholder Name: Charles David Russell Building Permit Number: Sewall's Point State: FL Zip: 34996

Legal Description of Property: Lot 26 EMARITA Parcel Number: 47 SEWALL'S POINT RD. S. 4TH Side of Home. Type of Work To Be Done: Shutter's on South Side of Home. (C# 260-1363 East side

CONTRACTOR/Company Name: Gullstream Aluminum + Shuttler Phone Number: 287 6476 Street: 3001 SE GRAN PARK WAY City: Stuart State: FL Zip: 34997 State Registration Number: State Certification Number: Martin County 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: Type Sewage: Septic Tank Permit Number From Health Dept. Well Permit Number:

FLOOD HAZARD INFORMATION Flood Zone: Minimum Base Flood Elevation (BFE): NGVD Proposed First Floor Habitable Floor Finished Elevation: NGVD (Minimum 1 Foot Above BFE)

COST AND VALUES Estimated Cost of Construction or Improvements: 1,136.25 Estimated Fair Market Value (FMV) Prior To Improvements: If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES NO

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

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

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

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

OWNER OR AGENT SIGNATURE (Required) State of Florida, County of: Manho This the 9 day of APRIL, 200 by Charles David Russell who is personally known to me or produced DL# R240-144-66-143-0 as identification.

CONTRACTOR SIGNATURE (Required) On State of Florida, County of: MARTIN This the 9 day of APRIL, 2003 by [Signature] who is personally known to me or produced as identification.

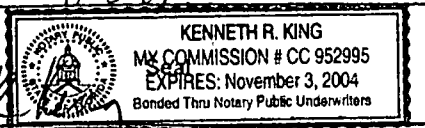
Notary Public My Commission Expires: 11-3-04

Notary Public My Commission Expires: 11-3-04

Kenneth R. King Seal



Kenneth R. King



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 though you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is 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: Charles David Russell Date: 4-8-2003

Signature: Charles David Russell

Address: 47 S.E. Sewall's Point Road

City & State: Sewall's Point Road, FL 34996

Permit No. _____

This form is for all permits except electrical.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
12/27/2002

PRODUCER (772)287-2030 FAX (772)288-2481
Deakins-Carroll Insurance Agency
www.deakinscarroll.com
P.O. Box 1597
Pt. Salerno, FL 34992

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

INSURERS AFFORDING COVERAGE

INSURED Gulfstream Aluminum & Shutter Corp.
3001 Gran Parkway
Stuart, FL 34997

INSURER A: Am Cas Co of Reading, Pa.
INSURER B: Transcontinental Ins. Co.
INSURER C: Transportation Ins. Co.
INSURER D: Bridgefield Casualty Ins. Co.
INSURER E:

RECEIVED
JAN 06 2003
BY: [Signature]

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	B2050184897	07/08/2002	07/08/2003	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$ 50,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				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
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				
B	AUTOMOBILE LIABILITY	B1055831462	07/08/2002	07/08/2003	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
C	EXCESS LIABILITY	B2064026589	07/08/2002	07/08/2003	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
	<input type="checkbox"/> DEDUCTIBLE				\$ 1,000,000
	<input type="checkbox"/> RETENTION \$				\$
					\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	19601003	01/01/2003	01/01/2004	WC STATUTORY LIMITS OTH-ER
					E.L. EACH ACCIDENT \$ 100,000
					E.L. DISEASE - EA EMPLOYEE \$ 100,000
					E.L. DISEASE - POLICY LIMIT \$ 500,000
	OTHER				

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

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

Sewall's Point, Town of
1 South Sewall's Point Road
Stuart, FL 34996

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

AUTHORIZED REPRESENTATIVE

David Deakins/BW

David Deakins

2001-2002 MARTIN COUNTY ORIGINAL
 COUNTY OCCUPATIONAL LICENSE

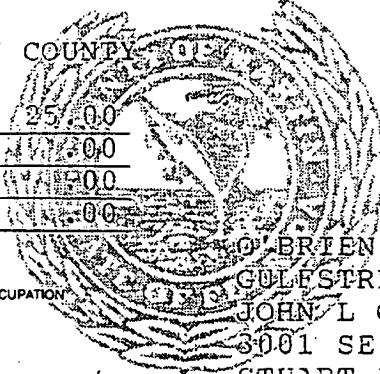
Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
 (561) 288-5604

LICENSE 1900-518-362 CERT RX0054870
 PHONE (561) 287-6476 SIC NO 01541

LOCATION:
 3001 SE GRAN PARK WAY MAR

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR. \$	.00	LIC. FEE \$	25.00
\$	.00	PENALTY \$	0.00
\$	.00	COL. FEE \$	0.00
\$	.00	TRANSFER \$	0.00
TOTAL			25.00



O'BRIEN, JOHN L
 GULFSTREAM ALUMINUM & SHUTTER CORP
 JOHN L O'BRIEN
 3001 SE GRAN PARK WAY
 STUART FL 34997

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

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

21 DAY OF AUGUST 20 01
 AND ENDING SEPTEMBER 30, 2002

RECEIPT OF PAYMENT
 6010 1
 LARRY C. O'STEEN
 99 08/21/2001 OCC: NORMAL
 190051800362000
 0220010821004781CK

\$25.00

AC# 0516721

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L0208060084

DATE	BATCH NUMBER	LICENSE NBR
08/06/2002	967439068	CRC058017

The RESIDENTIAL CONTRACTOR
 Named below IS CERTIFIED
 Under the provisions of Chapter 489 FS.
 Expiration date: AUG 31, 2004

O'BRIEN, JOHN L
 GULFSTREAM ALUMINUM & SHUTTER CORP
 3001 SE GRAN PARK WAY
 STUART FL 34997

JEB BUSH
 GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER
 SECRETARY



MARTIN COUNTY, FLORIDA
 Construction Industry Lic Bd
 Certificate of Competency

License: SP00107
 Expires September 30, 2003

O'BRIEN, JOHN L 1
 GULFSTREAM ALUMINUM PROD INC
 3001 SE GRAN PARKWY
 STUART, FL 34997
 ALUMINUM/CONCRETE CONTRACTOR



MARTIN COUNTY, FLORIDA
 Construction Industry Lic Bd
 Certificate of Competency

License: MC00231
 Expires September 30, 2003

O'BRIEN, JOHN L 1
 GULFSTREAM ALUMINUM PROD INC
 3001 SE GRAN PARKWY
 STUART, FL 34997
 RESIDENTIAL CONTRACTOR MC



DESIGN PRESSURE CALCULATION

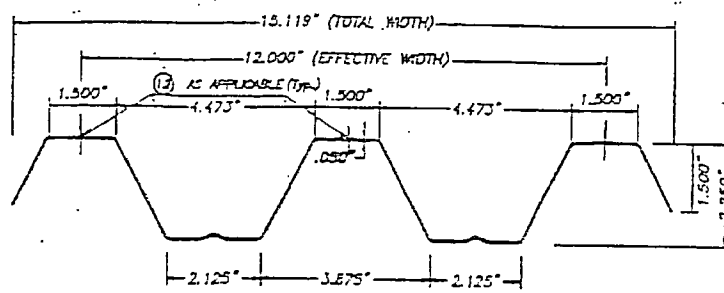
for Exposure B, Wind speed 140 mph and Mean roof height 20 ft

Contractor:
RUSSELL

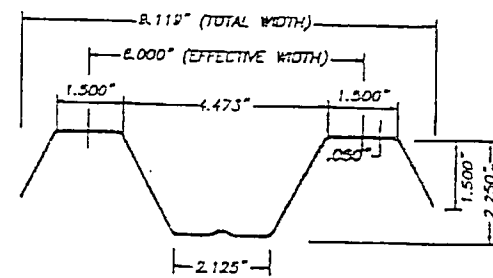
Preparer:
LISA

Project Address:
47 SE SEWALLS POINT ROAD
SEWALLS POINT
FL
34996

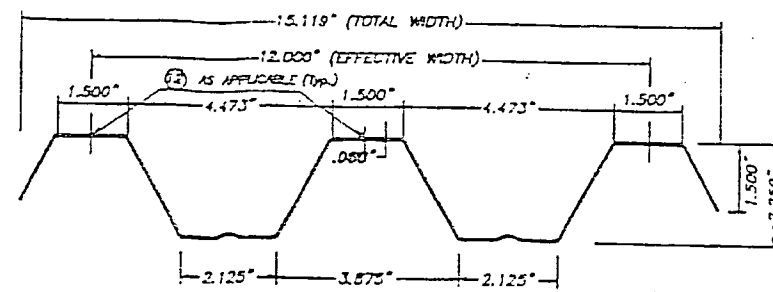
#	Width	Height	Location	+	-
1	51	83	Interior	33.35	-36.35
2	75	43	Interior	33.61	-36.61
3	53	51	Interior	33.98	-36.88
4	53	51	End	33.90	-44.39
5	53	51	End	33.90	-44.39
6	53	51	End	33.90	-44.39
7	53	51	End	33.90	-44.39
8	53	51	End	33.90	-44.39



① ALUMINUM PANEL
SCALE: 1/4" = 1'



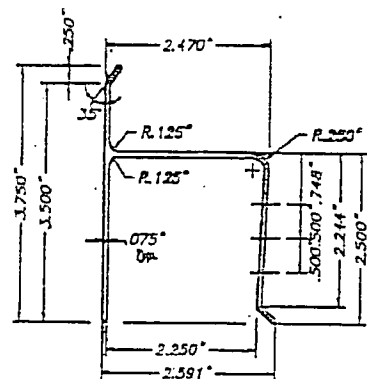
①A ALUMINUM HALF PANEL
SCALE: 1/4" = 1'



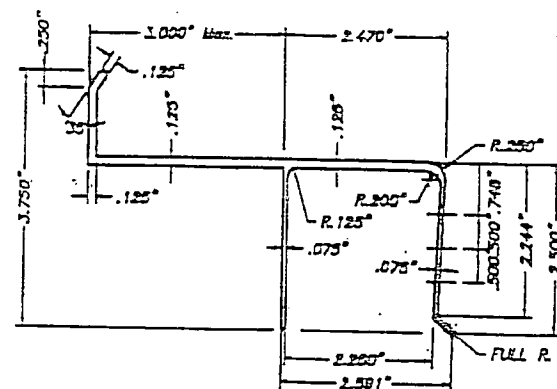
② CLEAR PANEL
SCALE: 1/4" = 1'

GENERAL NOTES:

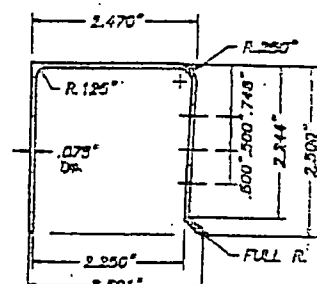
- STORM PANELS HAVE BEEN DESIGNED IN ACCORDANCE WITH THE STANDARD BUILDING CODE, 1999 EDITION.
 - STORM PANELS ADEQUACY FOR IMPACT LOADS HAS BEEN VERIFIED IN ACCORDANCE WITH SSTO 12-PR STANDARD, AS PER ATL REPORTS / 0210.01-88 (ALUM./ALUM.) AND / 0306.01-08R (ALUM./CLEAR) AND / 0312.01-00 (ALUM./ALUM./CLEAR).
 - (ALUM./ALUM.) STORM PANELS ADEQUACY FOR WIND LOADS HAVE BEEN VERIFIED IN ACCORDANCE WITH CHAPTER 20 OF THE STANDARD BUILDING CODE.
 - (ALUM./CLEAR) STORM PANELS ADEQUACY FOR WIND LOADS HAVE BEEN VERIFIED IN ACCORDANCE WITH ASTM E-1330 STANDARD, AS PER ATL REPORT / 0212.01-00.
 - DESIGN WIND LOADS SHALL BE BASED ON SECTION 1806 OF THE STANDARD BUILDING CODE.
 - ALL ALUMINUM SHEET METAL PANELS SHALL HAVE 5052-H32 OR 3004-H04 ALLOY.
 - CLEAR PANEL SHALL BE HYDRO EXTRUDED POLYCARBONATE SHEETS AS MANUFACTURED BY DSM SHEFFIELD PLASTICS, INC., MA 01257, WITH S. B. C. C. I. EVALUATION REPORT / 0564A.
 - ALL ALUMINUM EXTRUSIONS SHALL BE 6063-T5 ALLOY.
 - ALL SCREWS TO BE STAINLESS STEEL 304 OR 316 SERIES.
 - BOLTS TO BE 2024-T4 ALUMINUM ALLOY, GALVANIZED OR STAINLESS STEEL WITH 36 lb MIN. YIELD POINT.
 - ANCHORS TO WALL SHALL BE AS FOLLOWS:
 - (A) TO EXISTING POURED CONCRETE:
 - 1/4" # TAPCON ANCHORS AS MANUFACTURED BY L.T.K. BUILDEX
 - 1/4" # OF TAP-GRIP ANCHORS (BERTHA STUD-COIL), AS MANUFACTURED BY TRU-FAST CORPORATION.
 - 1/4" # ZAMAK NAILIN ANCHORS AS MANUFACTURED BY POWERS FASTENING, INC.
 - 1/4" # x 7/8" CALK-IN ANCHORS OR ELCO male & female "PANELMATE" AS MANUFACTURED BY POWERS FASTENING, INC AND ELCO TEXTRON, RESPECTIVELY.
 - 1/4" # RED HEAD DYNAMOLT ANCHORS AS MANUFACTURED BY L.T.K. BUILDEX.
 - (B) TO EXISTING CONCRETE BLOCK WALL:
 - 1/4" # TAPCON ANCHORS AS MANUFACTURED BY L.T.K. BUILDEX.
 - 1/4" # OF TAP-GRIP ANCHORS (BERTHA STUD-COIL), AS MANUFACTURED BY TRU-FAST CORPORATION.
 - 1/4" # ZAMAK NAILIN ANCHORS AS MANUFACTURED BY POWERS FASTENING, INC.
 - 1/4" # x 7/8" CALK-IN ANCHORS OR ELCO male & female "PANELMATE" AS MANUFACTURED BY POWERS FASTENING, INC AND ELCO TEXTRON, RESPECTIVELY.
 - 1/4" # RED HEAD DYNAMOLT ANCHORS AS MANUFACTURED BY L.T.K. BUILDEX.
- NOTES:
- MINIMUM EMBEDMENT INTO POURED CONCRETE OF TAPCON ANCHORS IS 1 3/4"; FOR ZAMAK NAILIN IS 1 3/8"; & FOR ELCO PANELMATES IS 1 3/4"; FOR RED HEAD DYNAMOLT IS 1 1/8" AND FOR OF TAP-GRIP ANCHORS IS 1 1/4".
 - 7/8" CALK-IN ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, OR PAVERS BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1) & A.2) ABOVE.
- MINIMUM EMBEDMENT OF TAPCON ANCHORS, ELCO PANELMATES AND OF TAP-GRIP INTO THE CONCRETE BLOCK UNIT SHALL BE 1 1/4" AND 1 3/8" FOR ZAMAK NAILIN AND 1 1/8" FOR RED HEAD DYNAMOLT.
 - 7/8" CALK-IN ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE CONCRETE BLOCK UNIT. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #-20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - 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 IN B.1) & B.2) ABOVE.
- ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.
- PANELS MAY ALSO BE INSTALLED HORIZONTALLY FOLLOWING INSTALLATION DETAILS SHOWN ON SECTIONS 1 THRU 6 (SHEET 2 & 3 OF 9) EXCEPT THAT HEADERS 1, 4 & 5 SHALL NOT BE USED.
 - EACH PANEL SHALL HAVE A LEGIBLE AND READILY VISIBLE MARKING INSTRUCTING OWNER OR TENANT TO SECURE PANELS WITH APPLICABLE REINFORCEMENT DURING PERIODS OF HURRICANE WARNINGS.
 - 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.



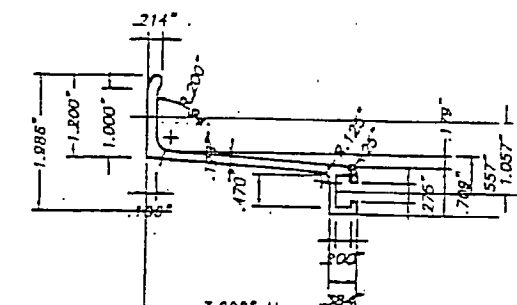
③ "h" HEADER
SCALE: 3/8" = 1"



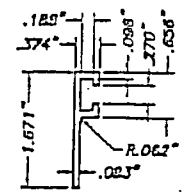
④ 3" Max. "U" BUILD OUT
SCALE: 3/8" = 1"



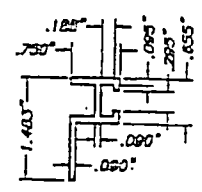
⑤ "U" HEADER
SCALE: 3/8" = 1"



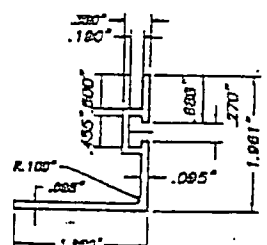
⑥ 3" ANGLE BUILD OUT BRACKET
SCALE: 3/8" = 1"



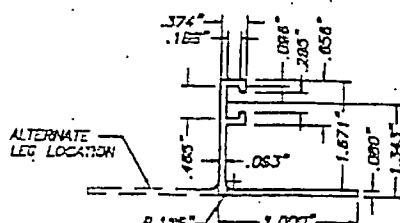
⑦ 3/8" B. O. "F" TRACK
SCALE: 3/8" = 1"



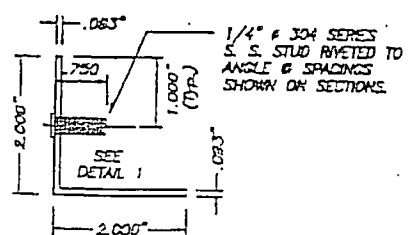
⑦A 3/4" B. O. "F" TRACK
SCALE: 3/8" = 1"



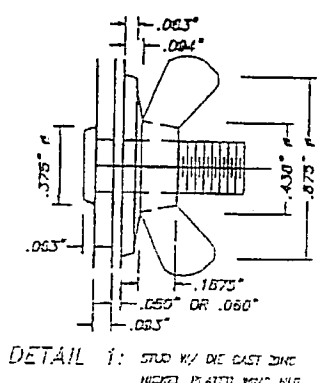
⑧ REVERSED "F" ANGLE TRACK
SCALE: 3/8" = 1"



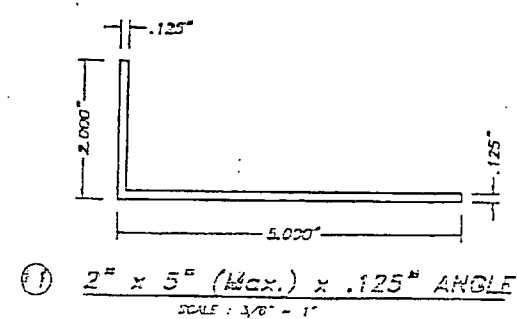
⑨ "F" TRACK ANGLE
SCALE: 3/8" = 1"



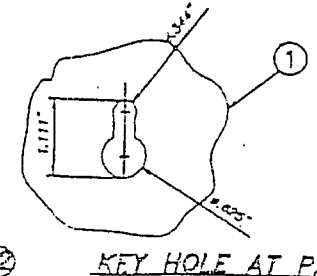
⑩ STUDDED ANGLE
6063-T5 ALUM. ALLOY
SCALE: 3/8" = 1"



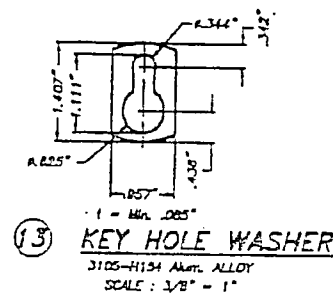
DETAIL 1: STUD W/ DIE CAST ZINC NICKEL PLATED ZINC NUT



⑪ 2" x 5" (Max.) x .125" ANGLE
SCALE: 3/8" = 1"



⑫ KEY HOLE AT PANEL



⑬ KEY HOLE WASHER
3105-H134 ALUM. ALLOY
SCALE: 3/8" = 1"

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 9/18/03
BUILDING OFFICIAL
Gene Simmons

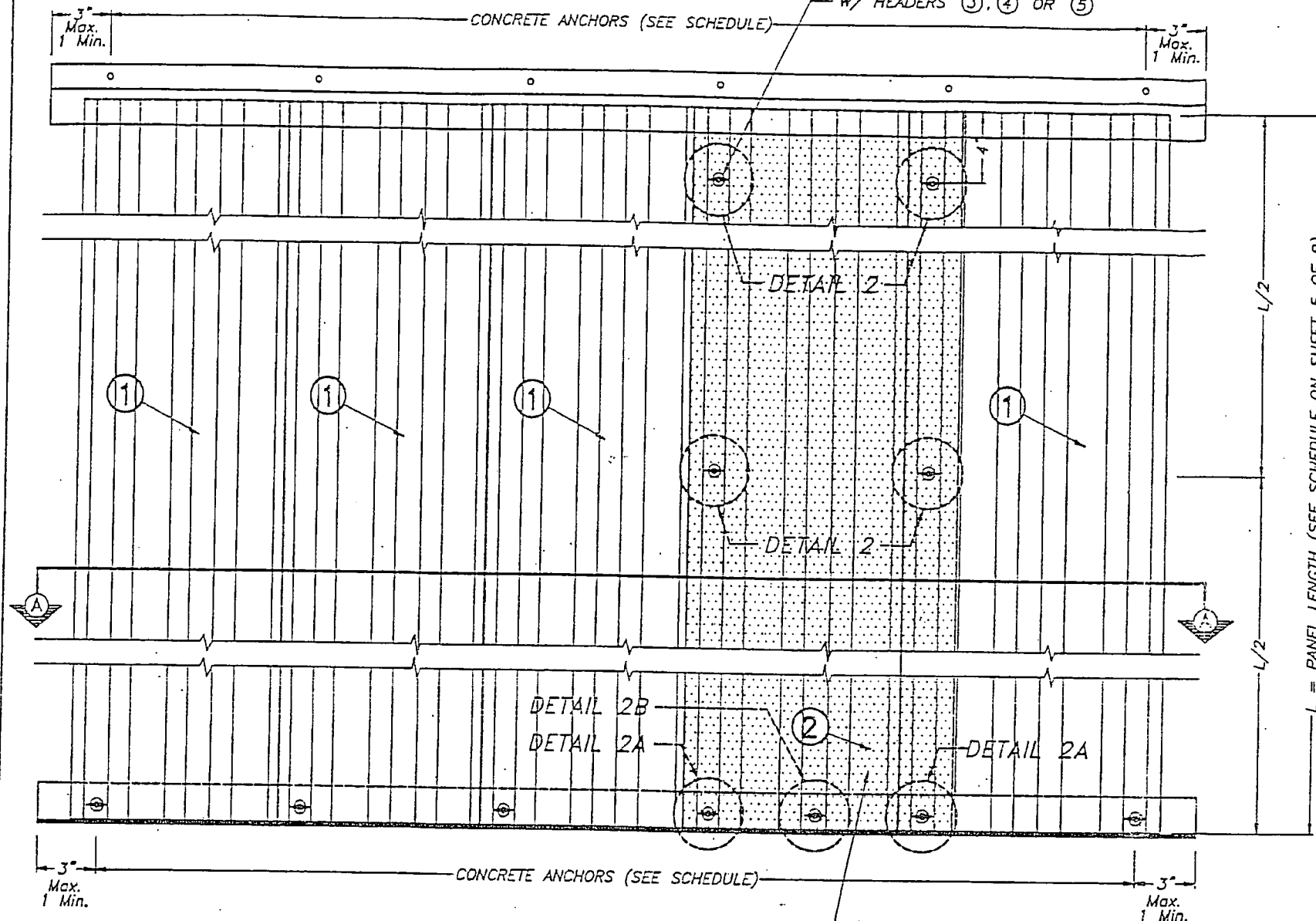
TILECO INC.
TILT TESTING & ENGINEERING COMPANY
1580 N.W. 35th St., Ste. 217, WIRING CORDS, FL 33160
Phone: (305)271-1230 Fax: (305)271-1231

WALTER A. TILLY JR., P. E.
FLORIDA Lic. # 44167

0.050" BERTHA ALUMINUM STORM PANEL W/ OR W/O CLEAR PANEL		AS SHOWN SCALE
EASTERN METAL SUPPLY, INC.		1/05/98 DATE
3600 23rd. Av. SOUTH LAKE WORTH, FL 33401-3247		98 - 04 DRAWING No
REV. NO.	DESCRIPTION	DATE
1	GENERAL	12/13/98
2	GENERAL	11/28/99

FEB 27 2004

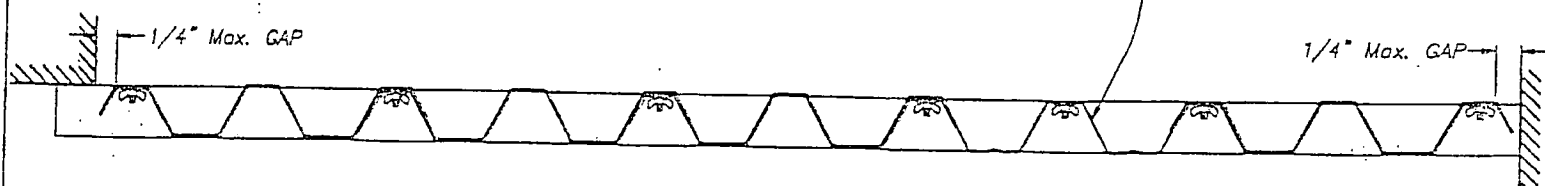
OVERLAP BOLT REQUIRED BETWEEN PANELS ② AND PANELS ①, ONLY APPLICABLE TO INSTALLATIONS W/ HEADERS ③, ④ OR ⑤



STORM PANEL TYPICAL ELEVATION

SCALE : 1/8" = 1"

OPTIONAL : MAXIMUM ONE CLEAR PANEL ② EACH SET OF 3 PANELS MADE OF ONE ALUMINUM PANEL ①, CLEAR PANEL ②, AND ONE ALUMINUM PANEL ①. CLEAR PANEL ② SHALL BE BOLTED TO ADJACENT ALUMINUM PANELS ① FOLLOWING SPECIFICATIONS AS PER DETAIL 2 ON THIS SHEET.



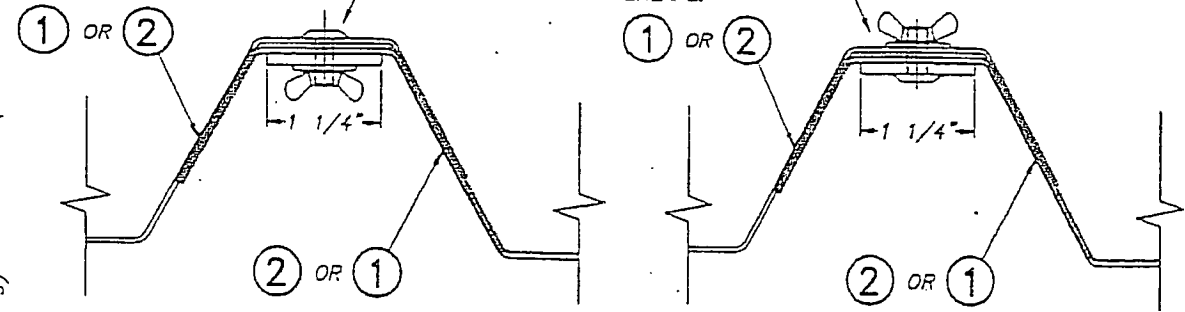
SECTION A-A

SCALE : 1/8" = 1"

PANEL SYSTEM I =
COMBINATION OF ALUMINUM PANEL ① W/
CLEAR PANEL ②

PANEL SYSTEM II =
COMBINATION OF ONLY ALUMINUM PANELS ①

1/4" #20 x 1/2" (Min.) S. S. TRUSS HEAD BOLT W/ 1/8" x 1 1/4" x 1 7/8" (6063-T5) EXTRUDED ALUMINUM WASHER ORIENTED AS SHOWN, AND W/ 7/8" x 3/32" WING NUTS @ OVERLAPS.



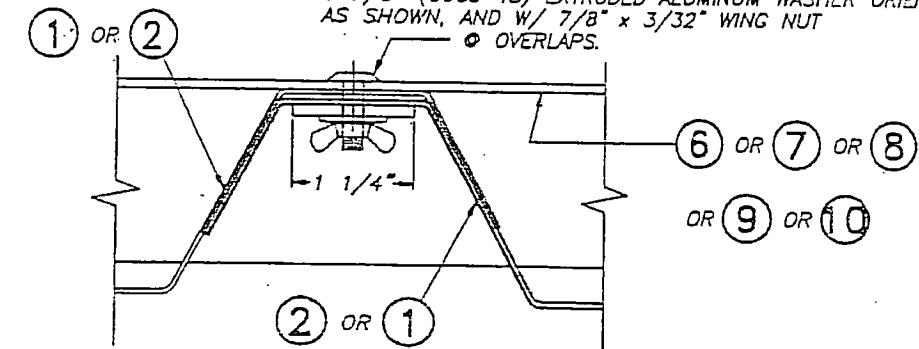
ALTERNATIVE 1

ALTERNATIVE 2

DETAIL 2

SCALE : 1/2" = 1"

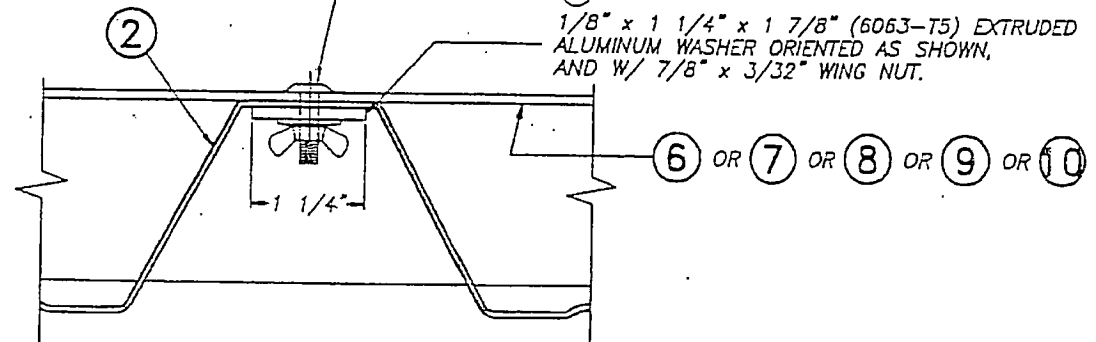
1/4" #20 x 3/4" (Min.) S. S. TRUSS HEAD BOLT/STUD (AS APPLICABLE) W/ 1/8" x 1 1/4" x 1 7/8" (6063-T5) EXTRUDED ALUMINUM WASHER ORIENTED AS SHOWN, AND W/ 7/8" x 3/32" WING NUT @ OVERLAPS.



DETAIL 2A

SCALE : 1/2" = 1"

1/4" #20 x 3/4" S. S. TRUSS HEAD BOLT/STUD (AS APPLICABLE) W/ 7/8" x 3/32" WING NUTS @ MIDWIDTH OF ②



DETAIL 2B

SCALE : 1/2" = 1"

S. B. C. C. I.

TILECO INC.

TILT TESTING & ENGINEERING COMPANY
2582 N.W. 36th St., Ste. 217, Miramar, CA 92023, FL 33186
Phone: (305) 671-1230, Fax: (305) 671-1231

WALTER A. TILIT JR., P. E.
FLORIDA Lic. # 44167

0.050" BERTHA ALUMINUM STORM PANEL
W/ OR W/O CLEAR PANEL

EASTERN METAL SUPPLY, INC

3600 23rd Ave. SOUTH
LAKE WORTH, FL 33461-3247

AS SHOWN SCALE

1/05/98 DATE

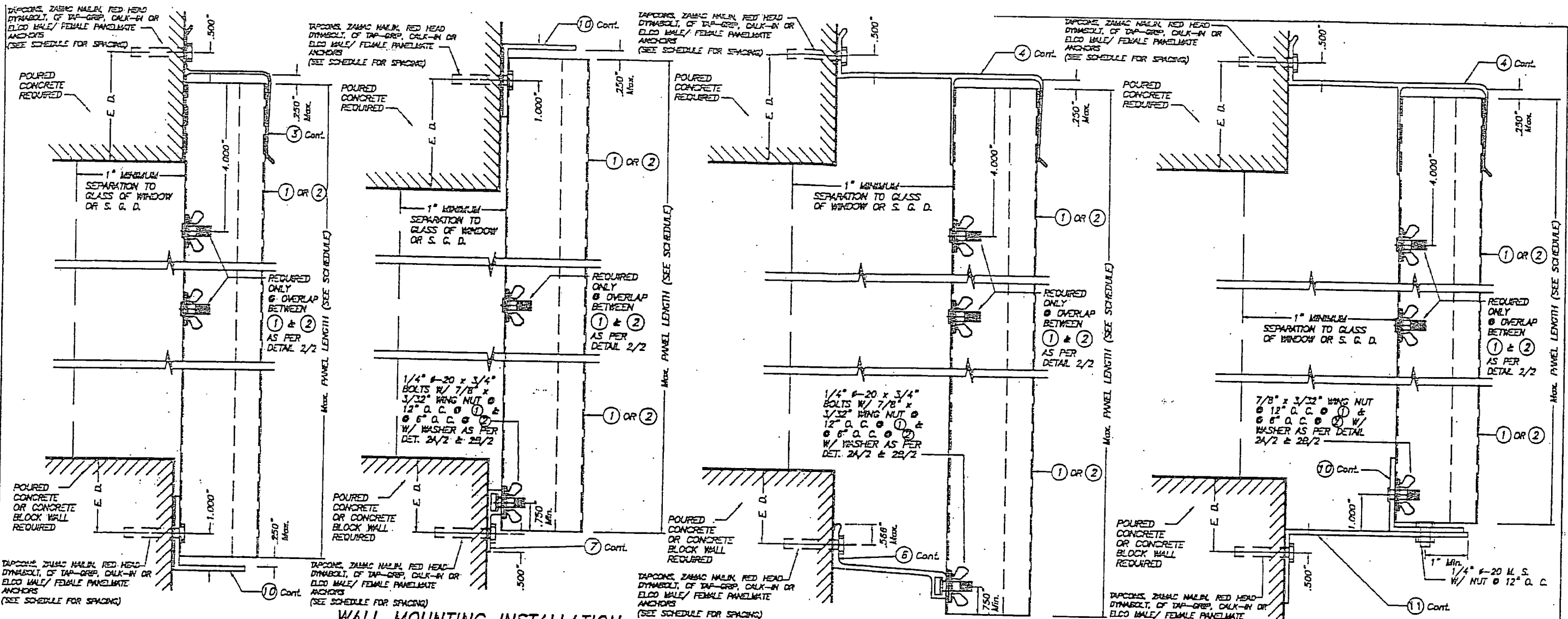
98 - 04

DRAWING No.

REV. No.	DESCRIPTION	DATE	REV. No.	DESCRIPTION	DATE
1	GENERAL	8/13/98	1	GENERAL	12/16/98
2	GENERAL	4/25/99	2	GENERAL	10/21/99

SHEET 2 OF 9

FEB 27 2000



SECTION 1 ANCHOR

WALL MOUNTING INSTALLATION

SECTION 2

SCALE: 3/8" = 1"

BUILD OUT INSTALLATION

SECTION 3

SCALE: 3/8" = 1"

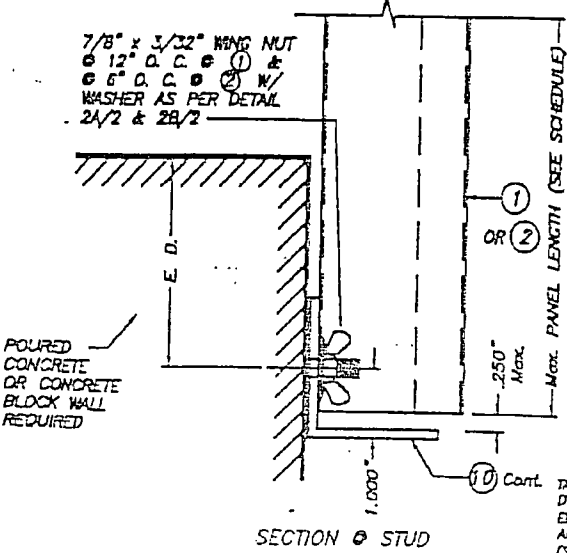
BUILD OUT INSTALLATION

SECTION 4

SCALE: 3/8" = 1"

E. D. = EDGE DISTANCE
(SEE SCHEDULE ON SHEETS 6 & 7 OF 9)

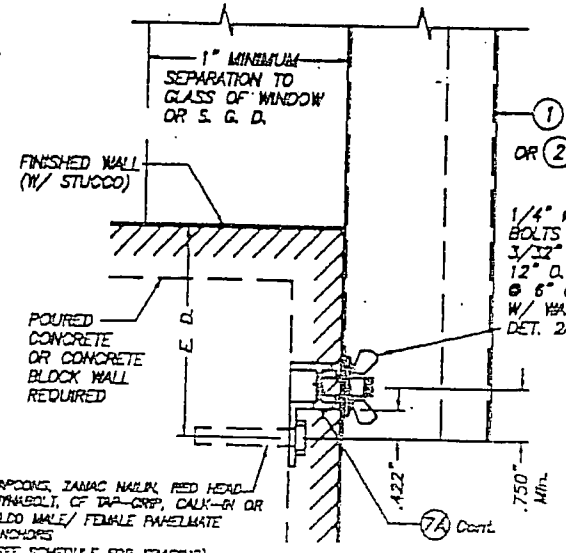
NOTE FOR COMBINATION OF SECTIONS:
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



SECTION 1 WALL MOUNTING INSTALLATION

SECTION 1

SCALE: 3/8" = 1"



SECTION 2A WALL MOUNTING INSTALLATION

SECTION 2A

SCALE: 3/8" = 1"

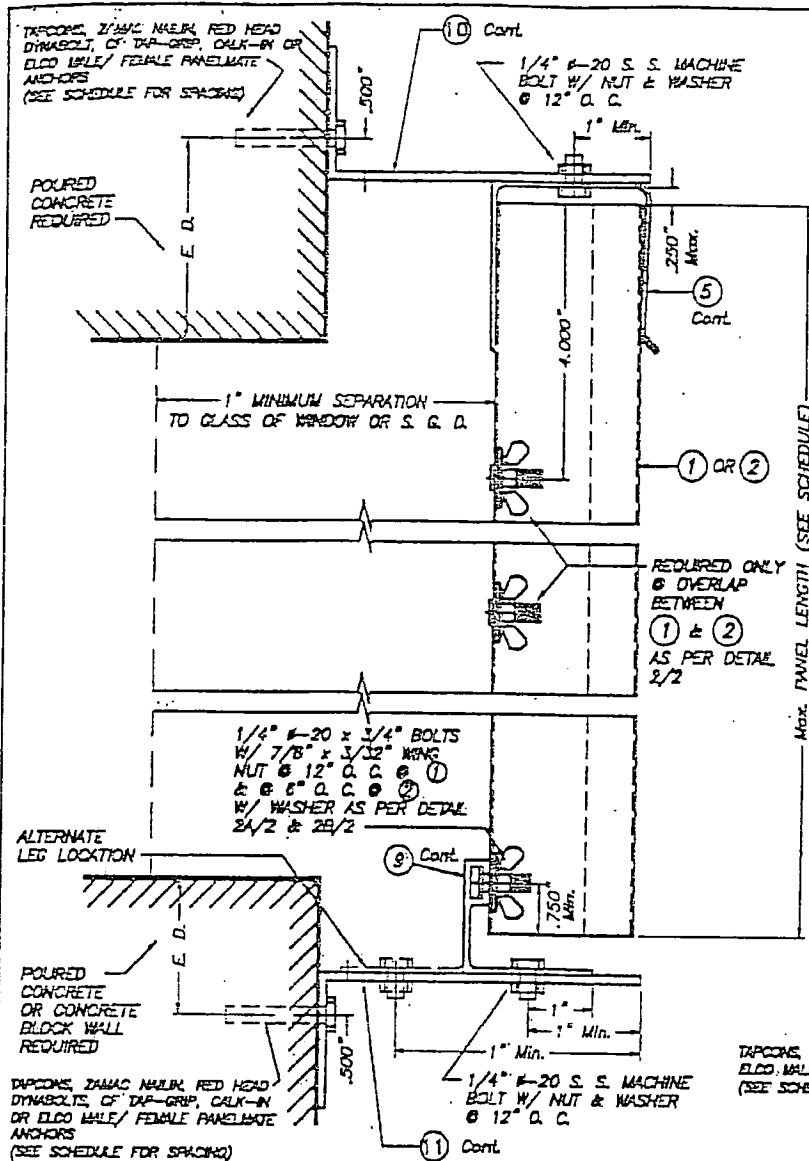
NOTE: DETAIL OF SECTION 1 STUD VALID ALSO FOR WALL MOUNTING INSTALLATION - SECTION 2 (TOP)

FEB 27 2002

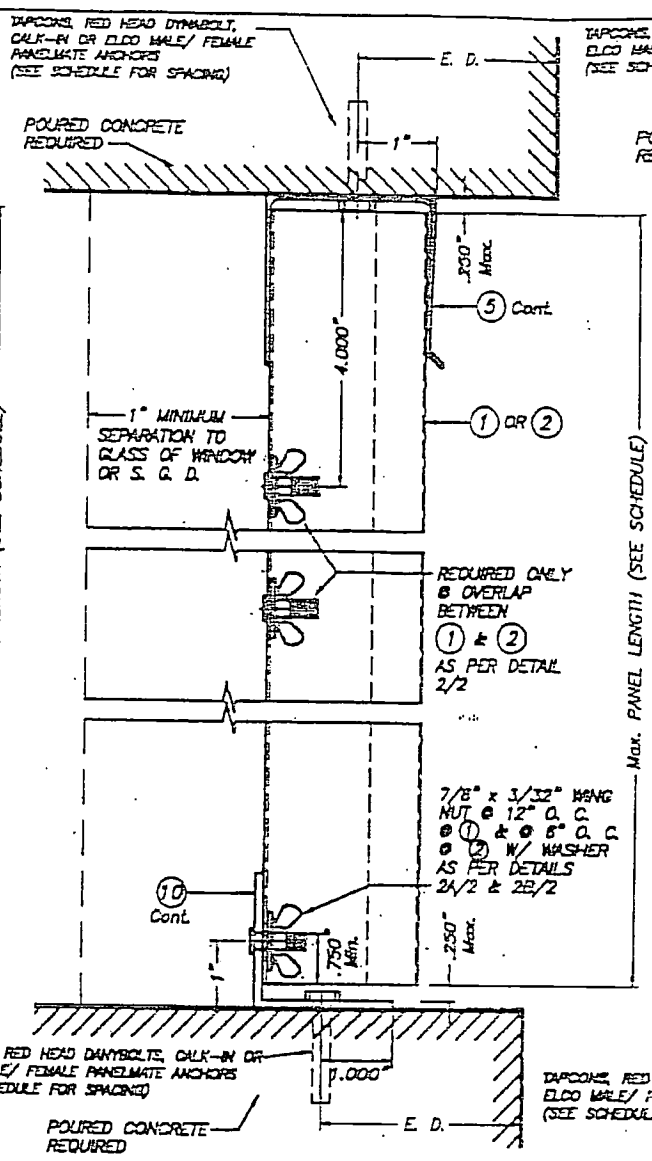
TILECO INC.
TILT TESTING & ENGINEERING COMPANY
2595 N.W. 36th St., Ste. 217, WILMINGTON, FL 33416
Phone: (305)771-1230 Fax: (305)771-1231
WALTER A. TILIT Jr. P. E.
FLORIDA Lic. # 44167

0.050" BERTHA ALUMINUM STORM PANEL W/ OR W/O CLEAR PANEL		AS SHOWN SCALE
EASTERN METAL SUPPLY, INC 3500 23rd Ave. SOUTH LAKE WORTH, FL 33401-2247		1/05/00 DATE
		98 - 04 DRAWING No
REV. NO	DESCRIPTION	DATE
1	CONCL	6/16/00
2	CONCL	8/2/00
		10/16/00
		SHEET 3 OF 9

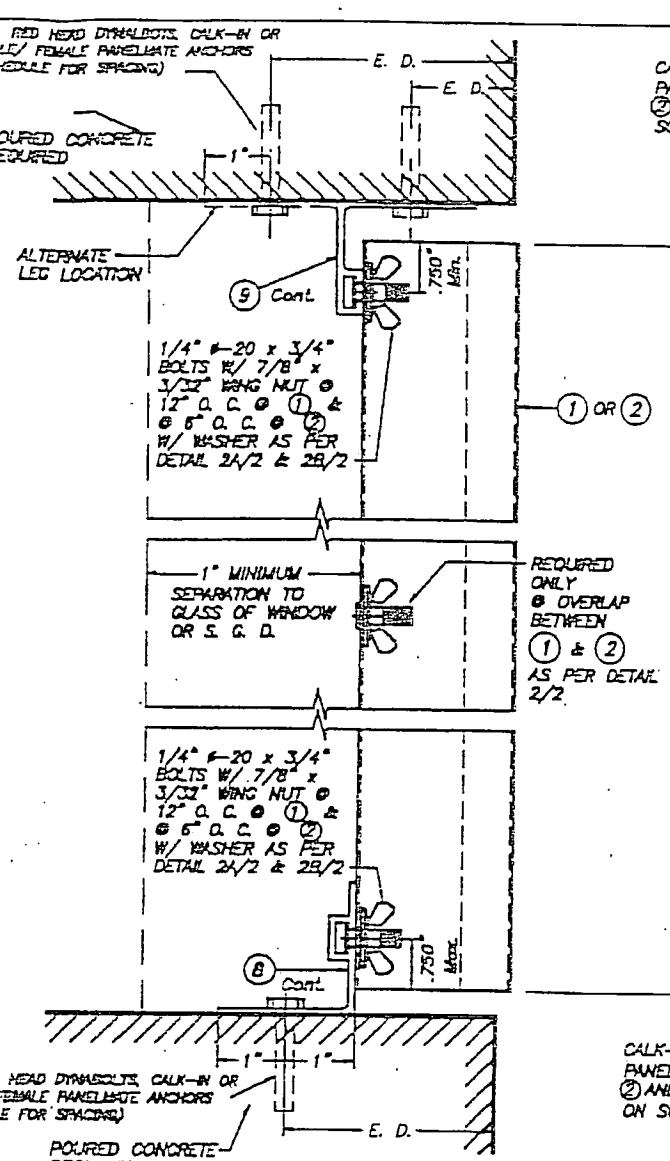
S. B. C. C. I.



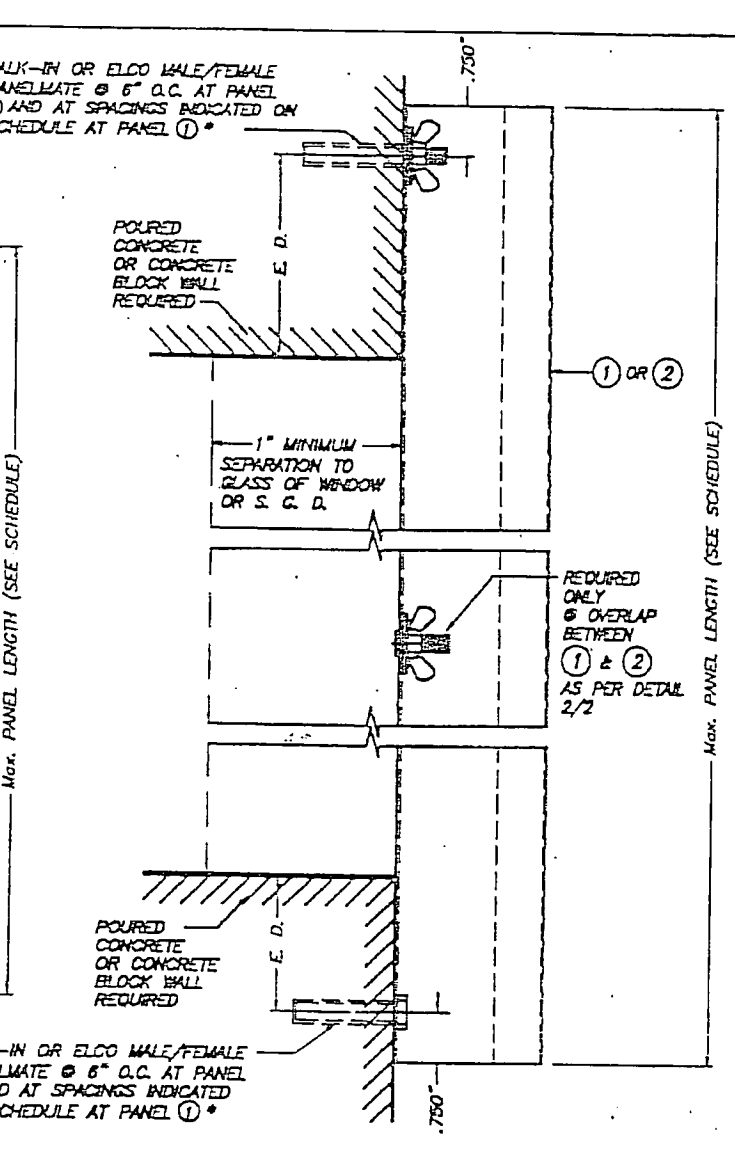
BUILD OUT INSTALLATION
- SECTION 5 SCALE: 3/8" = 1"



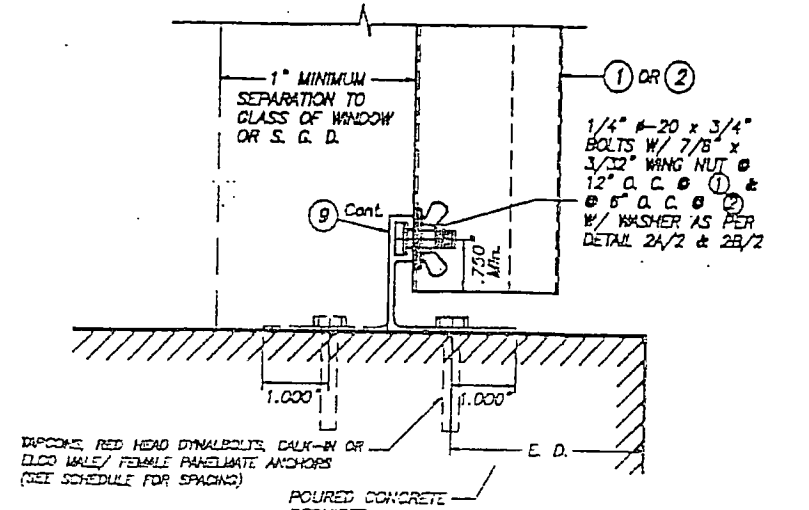
CEILING & FLOOR MOUNTING
INSTALLATION - SECTION 6



CEILING & FLOOR MOUNTING
INSTALLATION - SECTION 7



WALL MOUNTING INSTALLATION (D. M.)
- SECTION 8 SCALE: 3/8" = 1"



FLOOR MOUNTING INSTALLATION
- SECTION 5A SCALE: 3/8" = 1"

E. D. = EDGE DISTANCE (SEE SCHEDULE ON SHEET 6 & 7 OF 9)

NOTE FOR COMBINATION OF SECTIONS:
 WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

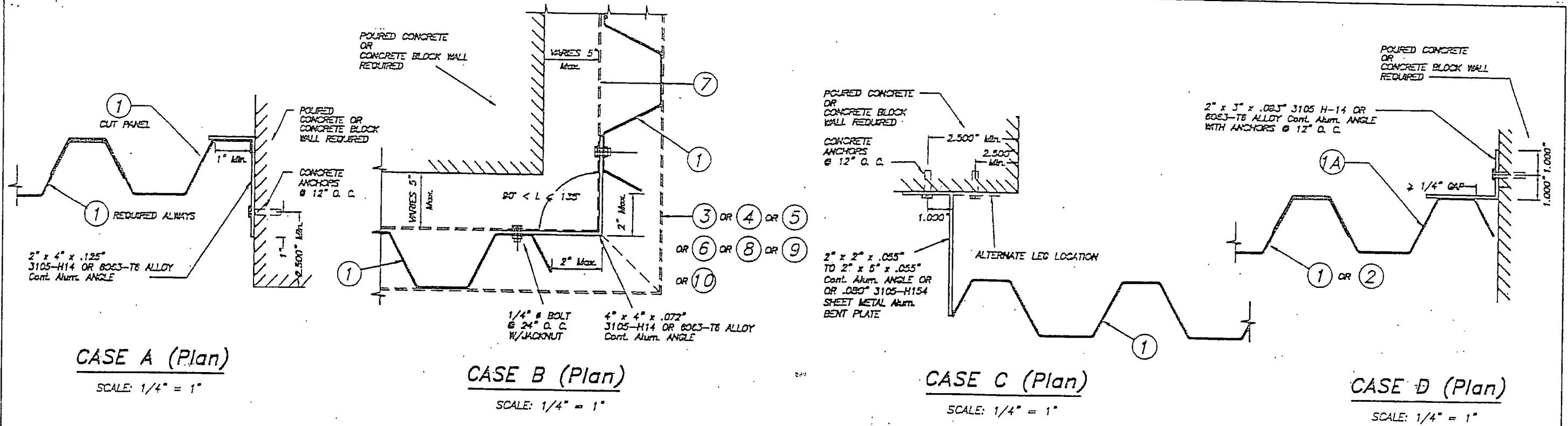
* SCREWS USED AT ANCHORS FOR PANEL ① MAY BE 1/4" #20 SIDE WALK BOLT W/ ③ OR 1/4" #20 TRUSS HEAD BOLT W/ ③ & ④.
 * SCREWS USED AT ANCHORS FOR PANEL ② MAY BE THE SAME AS FOR PANEL ① EXCEPT THAT ③ AND WASHER INDICATED ON DETAILS 2A/2 & 2B/2 SHALL BE USED JOINTLY AT SCREW.
 * SIDE WALK BOLTS ARE 3/4" #3/32 THICK HEAD MACHINE SCREW W/ LENGTH AS PER NOTES A.2 & B.2 (SHEET 1).
 * TRUSS HEAD BOLTS ARE 1/2" #1/8 THICK HEAD MACHINE SCREW W/ LENGTH AS PER NOTES A.2 & B.2 (SHEET 1).

S. B. C. C. I.

		0.050" BERTHA ALUMINUM STORM PANEL W/ OR W/O CLEAR PANEL		AS SHOWN SCALE	
TITLIT TESTING & ENGINEERING COMPANY 2395 N.W. 35th St., Ste. 217, WINDY GARDEN, FL 33166 Phone: (305) 571-1230, Fax: (305) 571-1231		EASTERN METAL SUPPLY, INC 3600 23rd Ave. SOUTH LAKE WORTH, FL 33461-3247		1/05/98 DATE	
WALTER A. TITLIT, JR., P. E. FLORIDA Lic. # 44187		98 - 04 DRAWING No			
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	GENERAL	5/16/00	1	GENERAL	5/16/00
2	GENERAL	1/2/00	2		

SHEET 4 OF 9

FFR 27 2002



CASE A (Plan)
SCALE: 1/4" = 1"

CASE B (Plan)
SCALE: 1/4" = 1"

CASE C (Plan)
SCALE: 1/4" = 1"

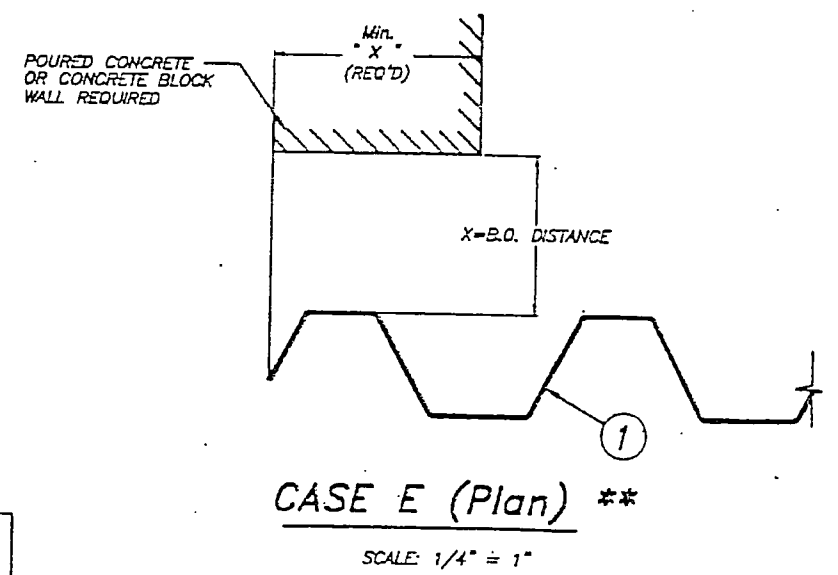
CASE D (Plan)
SCALE: 1/4" = 1"

END CLOSURES DETAILS

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM PANEL LENGTH "L" SCHEDULE FOR A GIVEN PANEL SYSTEM

MAXIMUM DESIGN PRESSURE RATING W (p.s.f.)	Max. PANEL LENGTH L (ft.) FOR PANEL SYSTEM I *		Max. PANEL LENGTH L (ft.) FOR PANEL SYSTEM II *	
	MOUNTING W/O 7" HEADER ③	MOUNTING W/ 7" HEADER ③	MOUNTING W/O 7" HEADER ③	MOUNTING W/ 7" HEADER ③
+30.0, -30.0	9'-9"	8'-11"	13'-0"	13'-0"
+30.0, -35.0	9'-0"	8'-7"	13'-0"	13'-0"
+35.0, -40.0	8'-5"	8'-3"	13'-0"	13'-0"
+40.0, -45.0	8'-0"	7'-11"	12'-11"	12'-11"
+45.0, -50.0	7'-6"	7'-6"	12'-2"	12'-2"
+50.0, -55.0	7'-0"	7'-0"	11'-7"	11'-4"
+55.0, -60.0	6'-10"	6'-10"	11'-0"	10'-4"
+60.0, -65.0	6'-7"	6'-7"	10'-7"	9'-7"
+65.0, -70.0	6'-4"	6'-4"	10'-2"	8'-11"
+70.0, -75.0	6'-2"	6'-2"	9'-9"	8'-3"
+75.0, -80.0	6'-0"	6'-0"	9'-5"	7'-9"

*
PANEL SYSTEM I =
 COMBINATION OF ALUMINUM PANEL ①, ①A
 W/ CLEAR PANEL ②
PANEL SYSTEM II =
 COMBINATION OF ONLY ALUMINUM PANEL ①,
 ①A



CASE E (Plan) **
SCALE: 1/4" = 1"

** ALL INSTALLATIONS PERFORMED WITH THIS CLOSURE DETAIL SHALL REDUCE PANEL LENGTH BY 20% AT EVERY APPLICATION FROM VALUES SHOWN ON SCHEDULE ON THIS SHEET.

FEB 27 2002

TILECO INC.
 TILT TESTING & ENGINEERING COMPANY
 2505 N.W. 30th St., Ste. 217, Miramar, FL 33186
 Phone: (305)871-1230 Fax: (305)871-1231
 WALTER A. TILIT JR., P. E.
 FLORIDA Lic. # 44167

S. B. C. C. I.
0.050" BERTHA ALUMINUM STORM PANEL
 W/ OR W/O CLEAR PANEL
EASTERN METAL SUPPLY, INC
 3600 23rd Ave. SOUTH
 LAKE WORTH, FL 33401-3247
 AS SHOWN SCALE
 1/05/98 DATE
 98 - 04 DRAWING No
 SHEET 5 OF 9

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO CONCRETE AND C.B.S. STRUCTURES *

E. D. = EDGE DISTANCE

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)
	TAPCONS		ZAMAC NAILIN/ RED HD. DYNABOLT		CALK-IN		PANELMATES		CF TAP-CRIP			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
+35.0, -40.0 OR LESS	12"	-	12"	-	12"	-	12"	-	12"	-	1 (TOP)	8'-0" OR LESS
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	1 (BOTTOM)	
	12"	-	12"	-	12"	12"	12"	-	12"	-	2 (TOP)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	2 (BOTTOM)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	2A (BOTTOM)	
	12"	-	12"	-	12"	-	12"	-	12"	-	3 & 4 (TOP)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	3 (BOTTOM)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	4 (BOTTOM)	
	12"	-	12"	-	12"	-	12"	-	12"	-	5 (TOP)	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	5 (BOTTOM)	
	12"	-	12" ⁺⁺	-	12"	-	12"	-	-	-	6 (TOP)	
	12"	-	12" ⁺⁺	-	12"	-	12"	-	-	-	6 (BOTTOM)	
	11"	-	12" ⁺⁺	-	11"	-	12"	-	-	-	5A (BOTTOM) 7 (TOP)	
	11"	-	12" ⁺⁺	-	12"	-	12"	-	-	-	7 (BOTTOM)	
	-	-	-	-	12"	6"	12"	12"	-	-	8 (TOP/BOTT) [†]	
+35.0, -40.0 OR LESS	12"	-	12"	-	12"	-	12"	-	12"	-	1 (TOP)	> 8'-0" TO 10'-0"
	12"	8"	12"	12"	12"	6"	12"	12"	12"	8 1/2"	1 (BOTTOM)	
	12"	-	12"	12"	12"	12"	12"	-	12"	-	2 (TOP)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	8 1/2"	2 (BOTTOM)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	8 1/2"	2A (BOTTOM)	
	12"	-	12"	-	12"	-	12"	-	12"	-	3 & 4 (TOP)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	8 1/2"	3 (BOTTOM)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	8 1/2"	4 (BOTTOM)	
	12"	-	12"	-	12"	-	12"	-	12"	-	5 (TOP)	
	12"	8"	12"	12"	12"	6"	12"	12"	12"	8 1/2"	5 (BOTTOM)	
	12"	-	12" ⁺⁺	-	12"	-	12"	-	-	-	6 (TOP)	
	10"	-	12" ⁺⁺	-	10"	-	12"	-	-	-	6 (BOTTOM)	
	9"	-	10" ⁺⁺	-	9"	-	12"	-	-	-	5A (BOTTOM) 7 (TOP)	
	9"	-	11" ⁺⁺	-	9"	-	12"	-	-	-	7 (BOTTOM)	
	-	-	-	-	12"	6"	12"	12"	-	-	8 (TOP/BOTT) [†]	

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)		
	TAPCONS		ZAMAC NAILIN/ RED HD. DYNABOLT		CALK-IN		PANELMATES		CF TAP-CRIP					
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY				
+35.0, -40.0 OR LESS	12"	-	12"	-	12"	-	12"	-	12"	-	10"	-	1 (TOP)	> 10'-0" TO 13'-0"
	12"	6"	12"	12"	12"	5"	12"	12"	11 1/2"	6 1/2"	1 (BOTTOM)			
	12"	6"	11"	-	12"	12"	12"	-	11 1/2"	-	2 (TOP)			
	12"	6"	12"	12"	12"	5"	12"	12"	11 1/2"	6 1/2"	2 (BOTTOM)			
	12"	6"	12"	12"	12"	5"	12"	12"	11 1/2"	6 1/2"	2A (BOTTOM)			
	12"	-	12"	-	12"	-	12"	-	11 1/2"	-	3 & 4 (TOP)			
	12"	6"	12"	12"	12"	5"	12"	12"	11 1/2"	6 1/2"	3 (BOTTOM)			
	12"	6"	12"	12"	12"	5"	12"	12"	11 1/2"	6 1/2"	4 (BOTTOM)			
	12"	-	12"	-	12"	-	12"	-	11 1/2"	-	5 (TOP)			
	12"	6"	12"	12"	12"	5"	12"	12"	11 1/2"	6 1/2"	5 (BOTTOM)			
	10"	-	12" ⁺⁺	-	10"	-	12"	-	-	-	6 (TOP)			
	8"	-	9" ⁺⁺	-	8"	-	11"	-	-	-	6 (BOTTOM)			
	7"	-	8" ⁺⁺	-	7"	-	9 1/2"	-	-	-	5A (BOTTOM) 7 (TOP)			
	7"	-	9" ⁺⁺	-	7"	-	10"	-	-	-	7 (BOTTOM)			
	-	-	-	-	12"	-	12"	12"	-	-	8 (TOP/BOTT) [†]			

* SEE SHEET 8 & 9 OF 9 FOR ANCHORS TYPE & SPACING FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS.
 ** MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACINGS SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (Min. E. D. FOR CALK-IN ANCHORS & ELCO PANELMATE IS 2 1/2").

ACTUAL E. D.	FACTOR		
	TAPCON/ZAMAC NAILIN/ RED HD. DYNABOLT/ PANELMATES	CALK-IN	CF TAP-CRIP
3"	.86	.75	1.00
2 1/2"	.71	.50	.80
2"	.50	-	-

+ SEE SECTION B/4 FOR ANCHORS SPACING AT CLEAR PANEL.
 ++ ANCHORS SPACING ONLY VALID FOR RED HEAD DYNABOLT ANCHORS.

FEB 27 2002

 TILECO INC. <small>TILLIT TESTING & ENGINEERING COMPANY 6395 N.W. 28th St., Ste. 217, Miramar, CA 92051 Phone: (305)871-1200, Fax: (305)871-1231</small>	0.050" BERTHA STORM PANEL W/ OR W/O CLEAR PANEL		S. B. C. C. I. - SCALE
	EASTERN METAL SUPPLY, INC <small>3500 23rd Ave. SOUTH LAKE WORTH, FL 33461-3247</small>		1/05/98 DATE 98 - 04 DRAWING No
<small>REV. NO. DESCRIPTION DATE BY NO. DESCRIPTION DATE</small> 1 GENERAL 6/12/98 J EDWARDS 6/16/98 2 GENERAL 1/20/99 J EDWARDS 1/21/99	SHEET 6 OF 9		

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO CONCRETE AND C.B.S. STRUCTURES *

E. D. = EDGE DISTANCE

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS 1 & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)
	TAPCONS		ZAMAC NAILIN/ RED HD. DYNABOLT		CALK-IN		PANELMATES		CF TAP-GRIP			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
>+35.0, -40.0 TO +55.0, -60.0	12"	-	12"	-	12"	-	12"	-	12"	-	1 (TOP)	8'-0" OR LESS
	12"	6"	12"	12"	12"	5"	12"	12"	12"	7"	1 (BOTTOM)	
	12"	-	12"	-	12"	-	12"	-	12"	-	2 (TOP)	
	12"	6"	12"	12"	12"	5"	12"	12"	12"	7"	2 (BOTTOM)	
	12"	6"	12"	12"	12"	5"	12"	12"	12"	7"	2A (BOTTOM)	
	12"	-	12"	-	12"	-	12"	-	12"	-	3 & 4 (TOP)	
	12"	6"	12"	12"	12"	5"	12"	12"	12"	7"	3 (BOTTOM)	
	12"	6"	12"	12"	12"	5"	12"	12"	12"	7"	4 (BOTTOM)	
	12"	-	12"	-	12"	-	12"	-	12"	-	5 (TOP)	
	12"	6"	12"	12"	12"	5"	12"	12"	12"	7"	5 (BOTTOM)	
>+35.0, -40.0 TO +55.0, -60.0	10"	-	12" ⁺⁺	-	10"	-	12"	-	-	-	6 (TOP)	> 8'-0" TO 13'-0"
	8"	-	10" ⁺⁺	-	8"	-	12"	-	-	-	6 (BOTTOM)	
	7"	-	9" ⁺⁺	-	7"	-	10 1/2"	-	-	-	5A (BOTTOM) 7 (TOP)	
	8"	-	9" ⁺⁺	-	8"	-	11"	-	-	-	7 (BOTTOM)	
	-	-	-	-	12"	-	12"	12"	-	-	8 (TOP/BOTT) ⁺	
	6"	-	5"	-	6"	-	9 1/2"	-	4"	-	1 (TOP)	
	11"	4"	9"	8"	11"	3"	12"	8"	7 1/2"	4"	1 (BOTTOM)	
	12"	-	9"	-	11"	-	12"	-	7 1/2"	-	2 (TOP)	
	11"	4"	9"	8"	11"	3"	12"	8"	7 1/2"	4"	2 (BOTTOM)	
	11"	-	9"	-	11"	-	12"	-	7 1/2"	-	3 & 4 (TOP)	

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHORS SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS 1 & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)
	TAPCONS		ZAMAC NAILIN/ RED HD. DYNABOLT		CALK-IN		PANELMATES		CF TAP-GRIP			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
>+55.0, -60.0 TO +75.0, -80.0	8"	-	7"	-	9"	-	12"	-	6"	-	1 (TOP)	8'-0" OR LESS
	12"	5"	11"	10"	12"	4"	12"	9 1/2"	9"	5"	1 (BOTTOM)	
	12"	-	9"	-	12"	-	12"	-	9"	-	2 (TOP)	
	12"	5"	11"	10"	12"	4"	12"	9 1/2"	9"	5"	2 (BOTTOM)	
	12"	5"	11"	10"	12"	4"	12"	9 1/2"	9"	5"	2A (BOTTOM)	
	12"	-	11"	-	12"	-	12"	-	9"	-	3 & 4 (TOP)	
	12"	5"	11"	10"	12"	4"	12"	9 1/2"	9"	5"	3 (BOTTOM)	
	12"	5"	11"	10"	12"	4"	12"	9 1/2"	9"	5"	4 (BOTTOM)	
	12"	-	11"	-	12"	-	12"	-	9"	-	5 (TOP)	
	12"	5"	11"	10"	12"	4"	12"	9 1/2"	9"	5"	5 (BOTTOM)	
>+55.0, -60.0 TO +75.0, -80.0	8"	-	10" ⁺⁺	-	8"	-	10 1/2"	-	-	-	6 (TOP)	> 8'-0" TO 11'-0"
	6"	-	8" ⁺⁺	-	6"	-	9"	-	-	-	6 (BOTTOM)	
	5"	-	6" ⁺⁺	-	5"	-	7 1/2"	-	-	-	5A (BOTTOM) 7 (TOP)	
	6"	-	7" ⁺⁺	-	6"	-	8"	-	-	-	7 (BOTTOM)	
	-	-	-	-	12"	-	12"	6"	-	-	8 (TOP/BOTT) ⁺	
	5"	-	4"	-	5"	-	8"	-	3"	3 1/2"	1 (TOP)	
	10"	3"	8"	7"	10"	3"	12"	7"	6 1/2"	-	1 (BOTTOM)	
	10"	-	7"	-	12"	-	12"	-	6 1/2"	-	2 (TOP)	
	10"	3"	8"	7"	10"	3"	12"	7"	6 1/2"	3 1/2"	2 (BOTTOM)	
	10"	4"	8"	7"	10"	3"	12"	7"	6 1/2"	3 1/2"	2A (BOTTOM)	

+ SEE SECTION B/4 FOR ANCHORS SPACING AT CLEAR PANEL
 ++ ANCHORS SPACING ONLY VALID FOR RED HEAD DYNABOLT ANCHORS.
 * SEE SHEET 8 & 9 OF 9 FOR ANCHORS TYPE & SPACING FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS.
 ** MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACINGS SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (Min. E. D. FOR CALK-IN ANCHORS & ELCO PANELMATE IS 2 1/2").

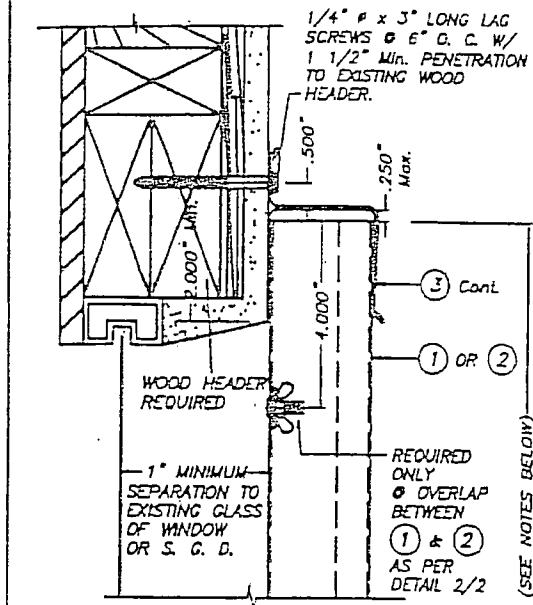
ACTUAL E. D.	FACTOR		
	TAPCON/ZAMAC NAILIN/ RED HD. DYNABOLT/ PANELMATES	CALK-IN	CF TAP-GRIP
3"	.86	.75	1.00
2 1/2"	.71	.50	.80
2"	.50	-	-

TELECO INC.
 TILT TESTING & ENGINEERING COMPANY
 1595 N.W. 36th St., Ste. 212, WIRMI, CAROLINA 28169
 Phone: (302) 871-1530 Fax: (302) 871-1531
 WALTER A. TILT, JR., P. E.
 FLORIDA Lic. # 44167

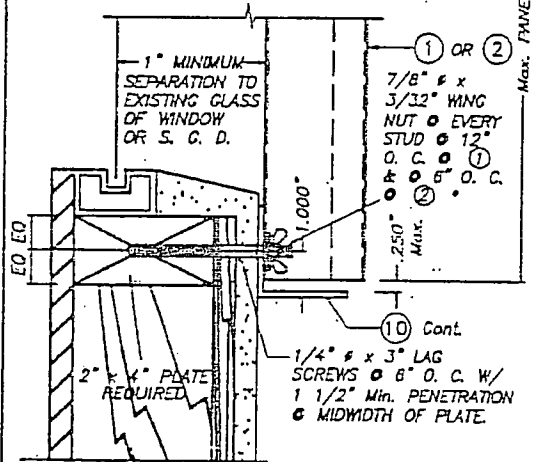
0.050" BERTHA STORM PANEL W/
 OR W/O CLEAR PANEL

EASTERN METAL SUPPLY, INC
 3600 23rd Ave. SOUTH
 LAKE WORTH, FL 33461-3247

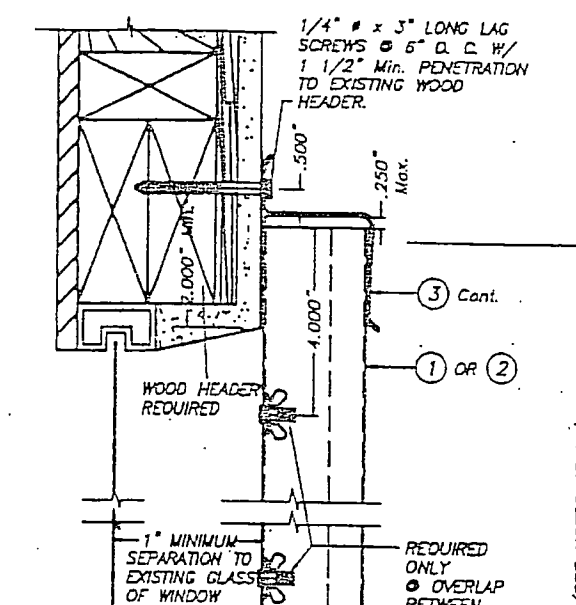
S. B. C. C. I.
 - SCALE
 1/05/95 DATE
 98 - 04
 DRAWING No
 SHEET 7 OF 9



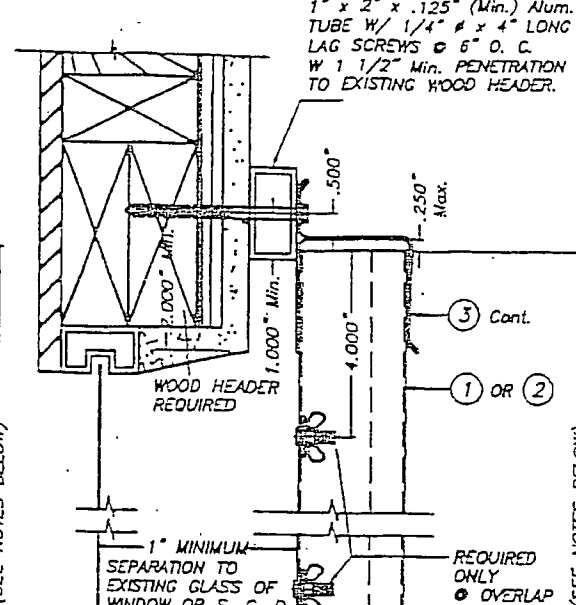
ALTERNATIVE 1



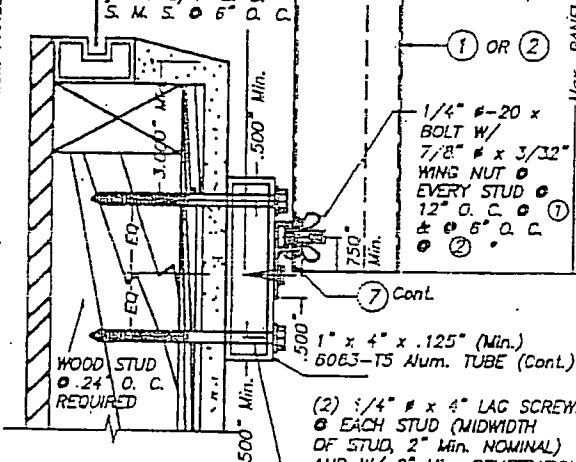
ALTERNATIVE 2



ALTERNATIVE 4

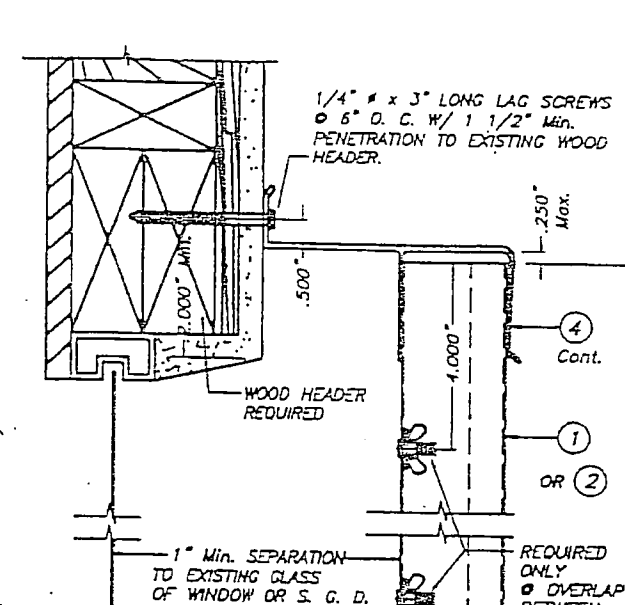


ALTERNATIVE 5

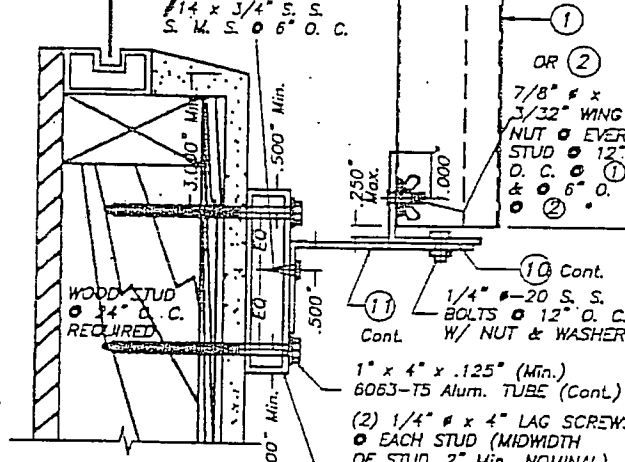


WALL MOUNTING INSTALLATIONS

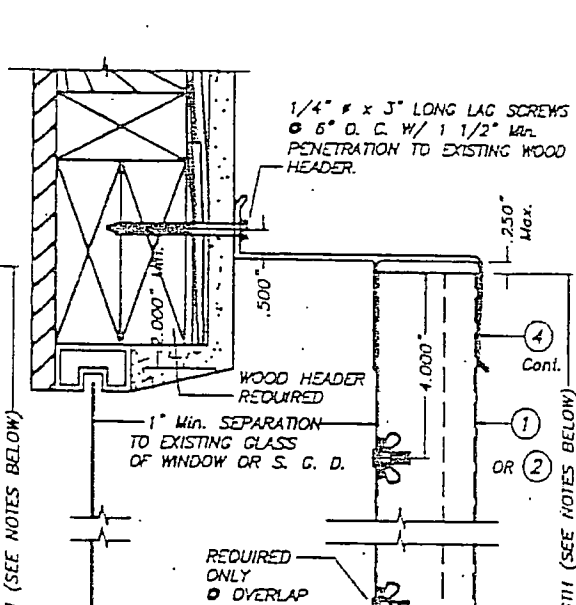
SECTIONS A SCALE: 1/4\"/>



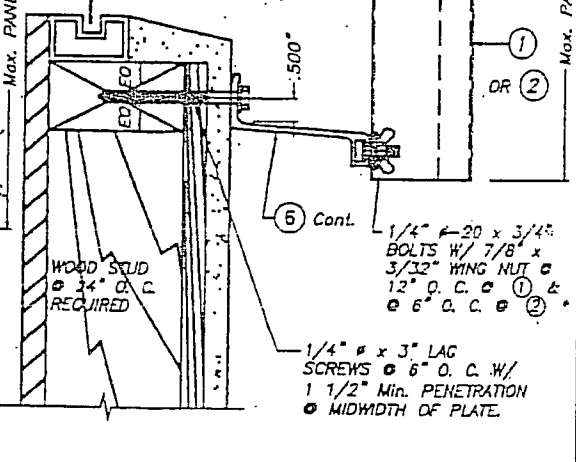
ALTERNATIVE 6



INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS



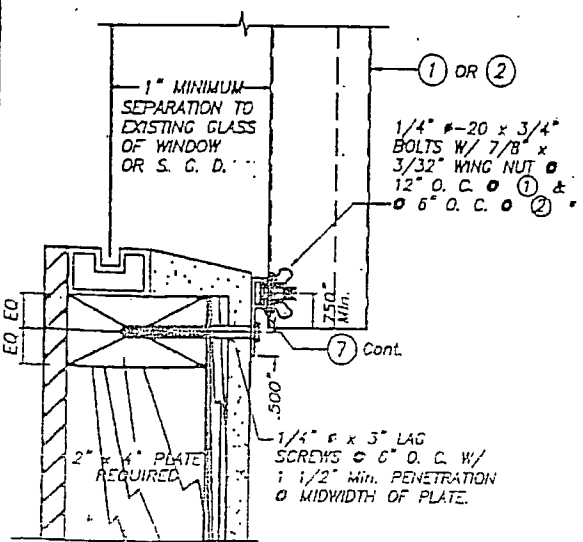
ALTERNATIVE 7



NOTES:
 1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS UP TO +65.0, -72.0 psf AND PANEL'S LENGTHS UP TO 9'-0".
 2. FOR WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

* W/ 1/8" x 1 1/4" x 1 7/8" EXTRUDED ALUMINUM WASHER AS PER DETAILS 2A/2 & 2B/2.

NOTE FOR COMBINATION OF SECTIONS:
 WALL MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



ALTERNATIVE 3

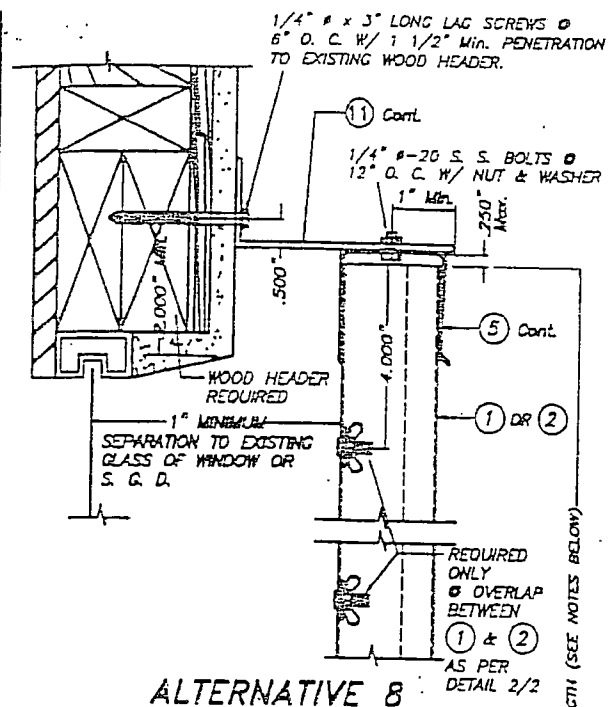
S. B. C. C. I.

TILECO Inc.
 TILT TESTING & ENGINEERING COMPANY
 6325 N.W. 38th St., Ste. 217, WINDY GARDEN, FL 33488
 Phone: (305)271-1530 Fax: (305)271-1531

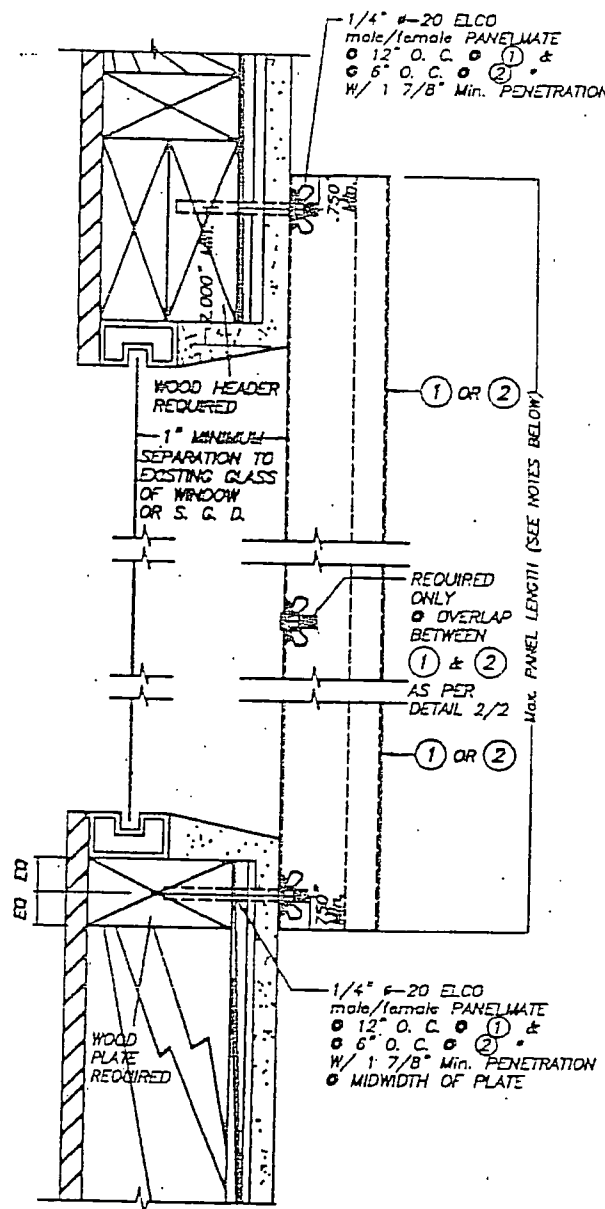
0.050" BERTHA ALUMINUM STORM PANEL W/ OR W/O CLEAR PANEL		AS SHOWN SCALE
EASTERN METAL SUPPLY, INC 3000 23rd Ave. SOUTH LAKE WORTH, FL 33461-2247		1/05/98 DATE
REV. NO. 1 DESCRIPTION GENERAL DATE 4/12/98		98 - 04 DRAWING NO.

FEB 27 2002

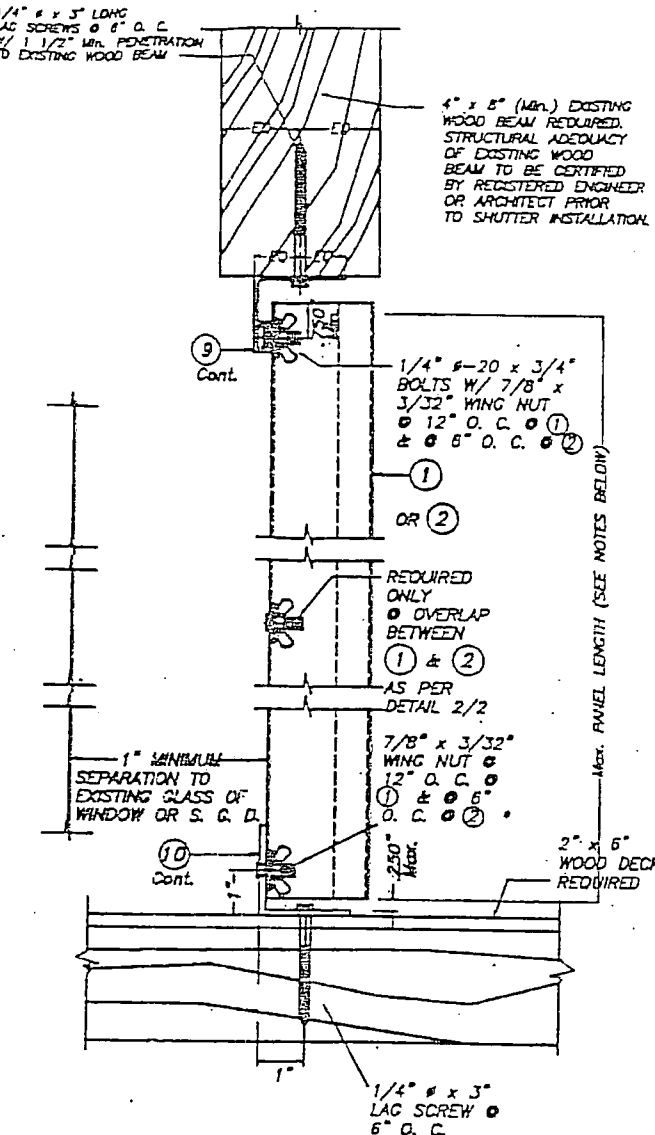
WALTER A. TILIT, JR., P. E.



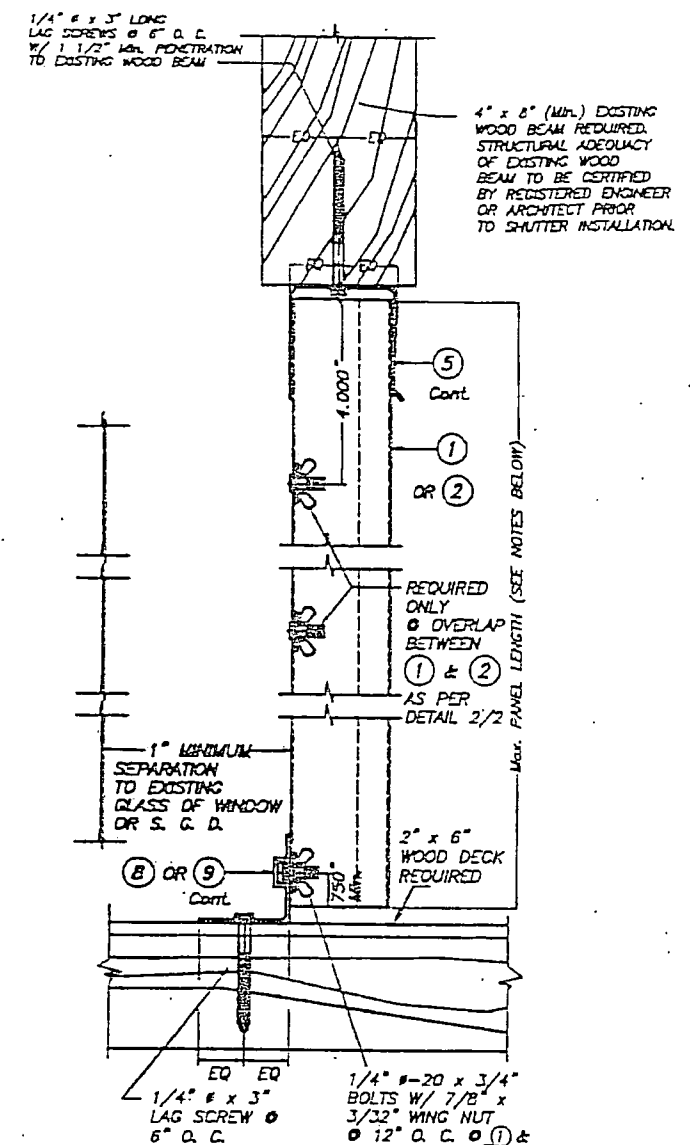
ALTERNATIVE 8



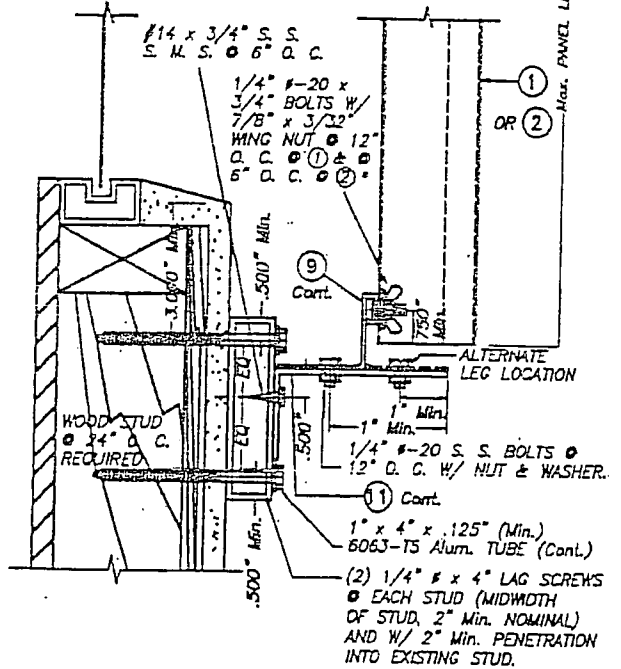
ALTERNATIVE 10



ALTERNATIVE 1



ALTERNATIVE 2



ALTERNATIVE 9

**WALL MOUNTING INSTALLATIONS
SECTIONS A**

SCALE: 1/4" = 1"

INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS

**CEILING & FLOOR MOUNTING INSTALLATIONS
SECTIONS B**

SCALE: 1/4" = 1"

NOTE FOR COMBINATION OF SECTIONS:
FLOOR/WALL/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

* W/ 1/8" x 1 1/4" x 1 7/8" EXTRUDED ALUMINUM WASHER AS PER DETAILS 24/2 & 25/2.

- NOTES:**
- INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS UP TO +65.0, -72.0 psf AND PANEL'S LENGTHS UP TO 9'-0".
 - FOR WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

TILECO Inc.
TILT TESTING & ENGINEERING COMPANY
2505 N.W. 36th St., Ste. 217, WILMINGTON, FL 33166
Phone: (305)671-1230, Fax: (305)671-1231

WALTER A. TILLIT JR., P. E.
FLORIDA Lic. # 44167

0.050" BERTHA ALUMINUM STORM PANEL W/ OR W/O CLEAR PANEL		AS SHOWN SCALE
EASTERN METAL SUPPLY, INC 3600 23rd Ave. SOUTH LAKE WORTH, FL 33431-2247		1/05/98 DATE
		98-04 DRAWING No
REV. No	DESCRIPTION	DATE
1	GENERAL	6/12/98
2	GENERAL	4/20/99
3	GENERAL	6/11/00

S. B. C. C. I.

98-04

SHEET 9 OF 9

FEB 27 2002

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-14, 2003 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6646	CONROY	INSULATION	Pass	
	12 PALMETTO O/B			INSPECTOR: <i>[Signature]</i>
TRF	BROTHERS	TREE	Pass	
	2 VIA DE CRISTO			INSPECTOR: <i>[Signature]</i>
6219	POSSER	HURRICANE	Pass	Close
	47 S. SEWALL Pt GULF STREAM ALUM	SHUTTERS		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i>[Signature]</i>

OTHER: _____

6221

RENOVATIONS

TOWN OF SEWALL'S POINT

Date 4/14/03

BUILDING PERMIT NO. 6221
WINDOWS DOORS
+ SIDING

Building to be erected for RUSSELL

Type of Permit 15,000*

Applied for by O/B

(Contractor) Building Fee 144.00

Subdivision EMERALDA Lot 26 Block _____

Radon Fee _____

Address 47 S. SEWALL'S POINT ROAD

Impact Fee _____

Type of structure SPR

A/C Fee _____

Parcel Control Number:

138410050000026020000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 158.40 Check # 102 Cash _____

Other Fees (PLAN REV) 14.40

Total Construction Cost \$ 15,000.00

TOTAL Fees 158.40

Signed Charles David Russell
Applicant

Signed Gene Simmons (Rob)
Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Building Permit Number: _____

Owner or Titleholder Name: Charles David Russell City: Sewall's Point State: FL Zip: 34996

Legal Description of Property: Lot 26 EMARITTA Parcel Number: _____

Location of Job Site: 47 SE Sewall's Point Road Type of Work To Be Done: INSTALL WINDOWS, 1 DOOR, METAL LATH OVER WOOD SIDING/STUCCO PAINT INTERIOR/EXTERIOR, CARPET, APPLIANCES

CONTRACTOR/Company Name: OWNER TO DO ALL WORK Charles David Russell Phone Number: 260-1363

Street: 47 SE Sewall's Point Road City: Sewall's Point State: FL Zip: 34996

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

ARCHITECT: _____ Phone Number: _____

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

ENGINEER: Stiles Peet Phone Number: 223-9883

Street: Federal HWY. City: Stuart State: FL Zip: _____

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

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

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

FLOOD HAZARD INFORMATION Flood Zone: _____ Minimum Base Flood Elevation (BFE): _____ NGVD

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

COST AND VALUES Estimated Cost of Construction or Improvements: 15,000.00 Estimated Fair Market Value (FMV) Prior

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

SUBCONTRACTOR INFORMATION NOT APPLICABLE. OWNER DOING ALL WORK HIMSELF

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____ South Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____

National Electrical Code _____ Florida Energy Code _____

Florida Accessibility Code _____

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

OWNER OR AGENT SIGNATURE (Required) Charles David Russell CONTRACTOR SIGNATURE (Required) _____

State of Florida, County of: St. Lucie

On State of Florida, County of: _____

This the 3rd day of April, 2003

This the _____ day of _____, 2003

by Charles D. Russell who is personally

by _____ who is personally

known to me or produced DL

known to me or produced _____

as identification [Signature]

As identification, _____

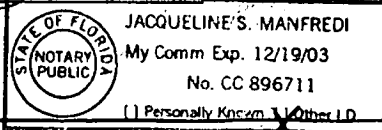
Notary Public

Notary Public

My Commission Expires: 12/19/03

My Commission Expires: _____

Seal



Seal

() Personally Known (X) Other I.D.

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF _____

COUNTY OF _____

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

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

Lot 26 EMARITTA

GENERAL DESCRIPTION OF IMPROVEMENT: Painting, Stucco over Siding, New Windows, CARPET, APPLIANCES

OWNER: Charles David Russell

ADDRESS: 47^{SE} SEWALLS Point Road

PHONE #: (772) 260-1363

FAX #: _____

CONTRACTOR: OWNER/IMPROVER

ADDRESS: 47 SE, SEWALLS Point Road

PHONE #: 260-1363

FAX #: _____

SURETY COMPANY(IF ANY) _____

ADDRESS: _____

PHONE # _____

FAX #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

PHONE #: _____

FAX #: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____

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

Charles David Russell
SIGNATURE OF OWNER

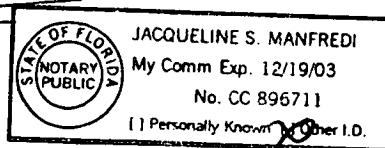
SWORN TO AND SUBSCRIBED BEFORE ME THIS 3rd DAY OF April

19
2003

BY Charles D. Russell

OR PERSONALLY KNOWN _____
PRODUCED ID X
TYPE OF ID DC

[Signature]
NOTARY SIGNATURE



FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the Instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION		For Insurance Company Use:	
BUILDING OWNER'S NAME <u>DAVID RUSSELL</u>		Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>475 SOUTH SEWALL'S POINT ROAD</u>		Company NAIC Number	
CITY <u>STUART</u>	STATE <u>FL.</u>	ZIP CODE <u>34996</u>	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 26, EMARITA SID</u>			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) <u>RESIDENTIAL</u>			
LATITUDE/LONGITUDE (OPTIONAL) (##-##-##.## or ##.####)		HORIZONTAL DATUM: SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other	
		<input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>TOWN OF SEWALL'S PT. / 120161</u>		B2. COUNTY NAME <u>MARTIN</u>		B3. STATE <u>FL.</u>	
B4. MAP AND PANEL NUMBER <u>120161 0154</u>	B5. SUFFIX <u>F</u>	B6. FIRM INDEX DATE <u>10/4/02</u>	B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>10/4/02</u>	B8. FLOOD ZONE(S) <u>AE</u>	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>8.0 & 9.0</u>

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No
Designation Date: _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
 Complete Items C3.a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
 Datum _____ Conversion/Comments _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	_____	<u>7.8</u> ft.(m)
<input type="checkbox"/> b) Top of next higher floor	_____	<u>14.9</u> ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____	<u>N/A</u> ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____	<u>6.7</u> ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.)	_____	<u>6.6</u> ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	_____	<u>6.2</u> ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	_____	<u>6.8</u> ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>N/A</u>		
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h <u>N/A</u> sq. in. (sq. cm)		

License Number, Embossed Seal, Signature, and Date

#004459 02/13/03

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.
 I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.
 I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME <u>EARLE R. STARKEY</u>	LICENSE NUMBER <u>#004459</u>
TITLE <u>PROFESSIONAL LAND SURVEYOR</u>	COMPANY NAME <u>ACCURIGHT LAND SURVEYING, INC.</u>
ADDRESS <u>1501 DECKER AVE. 419D</u>	CITY <u>STUART</u>
	STATE <u>FL</u>
SIGNATURE	ZIP CODE <u>34994</u>
DATE <u>02/13/03</u>	TELEPHONE <u>(772) 286-7694</u>

IMPORTANT: In these spaces, copy the corresponding information from Section A.		For Insurance Company Use:	
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.		Policy Number	
475 SOUTH SEWALL'S POINT ROAD		Company NAIC Number	
CITY	STATE	ZIP CODE	
STUART	FL.	34996	

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS C3(e) A/c PAD.

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1. through E5. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number ____ (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is ____ ft. (m) ____ in. (cm) ____ above or ____ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is ____ ft. (m) ____ in. (cm) above the highest adjacent grade. Complete Items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is ____ ft. (m) ____ in. (cm) ____ above or ____ below (check one) the highest adjacent grade. (Use natural grade, if available.)
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME		CITY	STATE	ZIP CODE
ADDRESS		DATE	TELEPHONE	
SIGNATURE				
COMMENTS				

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
-------------------	------------------------	---

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft. (m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft. (m) Datum: _____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

Check here if attachments

OWNER'S AFFIDAVIT OF BUILDING COSTS

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

**STATE OF FLORIDA
MARTIN COUNTY**

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

1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 15,000.00.
4. That this Affidavit is made for the purpose of inducing the Building Official of the Town to issue a Certificate of Occupancy for the improvements, with the intention that it be relied upon for that purpose.

Affidavit's Signature:

Charles David Russell

Property Address:

47 S.E. Sewall's Point Road

SWORN TO and subscribed before me this ____ day of _____, 200__, by _____, who is personally known to me or produced _____ as identification.

Notary Public

My commission expires: _____

(Notary Seal)

**TOWN OF SEWALL' S POINT
BUILDING DEPARTMENT**

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

PROJECT NAME AND ADDRESS

BUILDING DEPARTMENT USE ONLY

Russell Residence
47 S.E. Sewall's Point Road

BLDG. PERMIT # _____
OCCUPANCY TYPE _____
CONSTRUCTION TYPE _____

STATEMENT

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

BUILDING PARAMETERS AND ANALYSIS

**CODE EDITIONS: 2001 FLORIDA BUILDING CODE
CHAPTER 6 OF ASCE 7- 98**

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

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

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

NAME: _____
CERTIFICATION# _____
DATE: _____
DESIGN FIRM: _____

SEAL

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: Charles David Russell **Date:** 3-28-2003

Signature: Charles David Russell

Address: 47 S.E. Sewall's Point Road

City & State: Sewall's Point, FLA.

Permit No. _____

This form is for all permits except electrical.



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

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

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

CONTRACTOR ENFORCEMENT DIVISION
(305) 375-2966 FAX (305) 375-2908

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Premdor Entry Systems
911 E. Jefferson, P.O. Box 76
Pittsburgh, KS 66762

Your application for Notice of Acceptance (NOA) of:

Entergy 6-8 S-W/E Inswing Opaque Single w/sidelites Residential Insulated Steel Door
under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Types of
Construction, and completely described herein, has been recommended for acceptance by the Miami-Dade
County Building Code Compliance Office (BCCO) under the conditions specified herein.

This NOA shall not be valid after the expiration date stated below. BCCO reserves the right to secure this
product or material at any time from a jobsite or manufacturer's plant for quality control testing. If this
product or material fails to perform in the approved manner, BCCO may revoke, modify, or suspend the
use of such product or material immediately. BCCO reserves the right to revoke this approval, if it is
determined by BCCO that this product or material fails to meet the requirements of the South Florida
Building Code.

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

ACCEPTANCE NO.: 01-0314.18
EXPIRES: 04/02/2006

Raul Rodriguez
Chief Product Control Division

**THIS IS THE COVERSHEET, SEE ADDITIONAL PAGES FOR SPECIFIC AND GENERAL
CONDITIONS
BUILDING CODE & PRODUCT REVIEW COMMITTEE**

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

Francisco J. Quintana, R.A.
Director
Miami-Dade County
Building Code Compliance Office

APPROVED: 06/05/2001



260 - 1363
DAVIS

**AAMA/NWWDA 101/I.S.2-97
TEST REPORT SUMMARY**

Rendered to:

MI HOME PRODUCTS, INC.

SERIES/MODEL: 740/744

TYPE: Aluminum Single Hung Window with Flange

Title of Test	Results
Rating	H-R45 53 x 73
Overall Design Pressure	45 psf
Operating Force	23 lbs max.
Air Infiltration	0.10 cfm/ft ²
Water Resistance	6.75 psf
Structural Test Pressure	+67.5 psf -70.8 psf
Deglazing	Passed
Forced Entry Resistance	Grade 10

Reference should be made to Report No. 01-40351.04 for complete test specimen description and data.

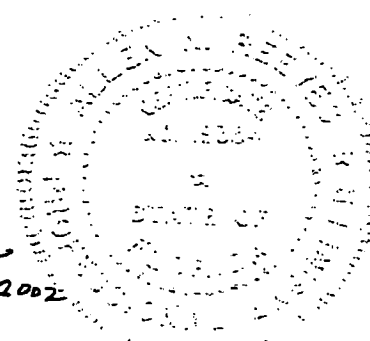
For ARCHITECTURAL TESTING, INC.

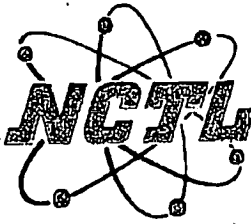
Mark A. Hess

Mark A. Hess, Technician

MAH:baw

Allen M. Reeves
15 FEBRUARY 2002





NATIONAL CERTIFIED TESTING LABORATORIES

1464 GEMINI BOULEVARD • ORLANDO, FLORIDA 32837
PHONE (407) 240-1356 • FAX (407) 240-8882

IN-PLANT WITNESS STRUCTURAL PERFORMANCE TEST REPORT

Report No: NCTL-310-0005-5.1
Test Date: 07/15/98
Report Date: 08/03/98
Expiration Date: 07/30/02
Revision Date: 09/29/98

Client: Metal Industries Home Products
650 West Market Street
Gratz, PA 17030

Test Specimen: Betterbilt, Inc.'s Series "BB165/740/744" Fixed Lite Aluminum Prime Window (F-C50 72 x 72). This unit was flange mounted and is "valid for tempered glass only."

Test Specification: AAMA/NWWDA 101/I.S.2-97, "Voluntary Specifications for Aluminum, Vinyl (PVC), and Wood Windows and Glass Doors."

Test Site: Betterbilt, Smyrna, TN, all calibrations were performed before testing.

TEST SPECIMEN DESCRIPTION

General: The test specimen was an aluminum prime window measuring 72-1/4" wide by 72-1/4" high overall. The fixed lite was glazed to the frame members, providing a viewing area of 69-1/8" wide by 69-1/8" high. The frame was of double screw (#8x5/8) butt-type corner construction. From the interior view the left corners were sealed with small joint sealant and the right corners employed gasket tape.

Glazing: The lite was interior glazed using 3/16" clear tempered glass with a butyl tape back-bedding, a vinyl bulb gasket, and an extruded aluminum glazing bead. The glazing bead was fastened with #8x7/8 screws every 8".

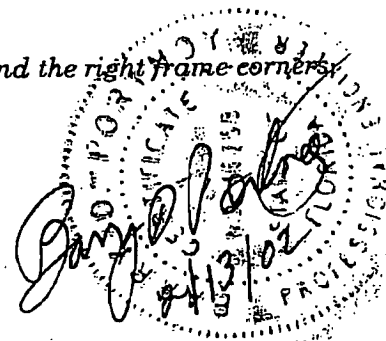
Weatherseals: No weatherseals employed.

Weeps: No apparent weeps employed.

Interior & Exterior Surface Finish: Mill finished aluminum.

Sealant: The left frame corners were sealed with a small-joint sealant and the right frame corners employed gasket tape.

PROFESSIONALS IN THE SCIENCE OF TESTING



TEST RESULTS

<u>Par. No.</u>	<u>Title of Test & Method</u>	<u>Measured</u>	<u>Allowed</u>
2.1.2	Air Infiltration - ASTM E283 1.57 psf (25 mph)	Pass	Pass / Fail
2.1.3	Water Resistance - ASTM E547 5.0 GPH/FT ² WTP= 3.00 psf	No Leakage	No Leakage
2.1.4.2 *	Uniform Load Structural - ASTM E330 30.0 psf Exterior 30.0 psf Interior	0.000" 0.000"	0.285" 0.285"
2.1.8	Forced Entry Resistance (see Appendix A for results)	Meets as Stated	

OPTIONAL PERFORMANCE

4.3	Water Resistance - ASTM E547 5.0 GPH/FT ² WTP= 7.50 psf	No leakage	No Leakage
4.4.2 *	Uniform Load Structural - ASTM E330 75.0 psf Exterior 75.0 psf Interior	0.000" 0.000"	0.285" 0.285"

* No glass breakage or permanent damage causing the unit to be inoperable

TEST COMPLETED 07/15/98

The tested specimen meets (or exceeds) the performance levels specified in Table 2.1 of AAMA/NWWDA 101/I.S.2-97 for air infiltration. The listed results were secured by using the designated test methods and indicate compliance with the performance requirements of the referenced specification paragraphs for the F-C50 72x72 product designation.



Detailed drawings were available for laboratory records and compared to the test specimen at the time of this report. A copy of this report along with representative sections of the test specimen will be retained by NCTL for a period of four (4) years. The results obtained apply only to the specimen tested. No conclusions of any kind regarding the adequacy or inadequacy of the glass in the test specimen may be drawn from this test. This report does not constitute certification of the product which may only be granted by a certification program validator.

NATIONAL CERTIFIED TESTING LABORATORIES

*Wayne Breighner
Manager, Great Lakes*

*Barry Portnoy, P.E.
5767 Major Boulevard
Orlando, FL 32819*

*WB/amb
Ref: NCTL-310-0005-5.1*



A circular stamp from National Certified Testing Laboratories is visible in the bottom right corner. The stamp contains the text "NATIONAL CERTIFIED TESTING LABORATORIES" around the perimeter. Overlaid on the stamp is a handwritten signature, "Barry Portnoy", and the date "2/13/02".

APPENDIX A
Forced Entry Resistance Test Results

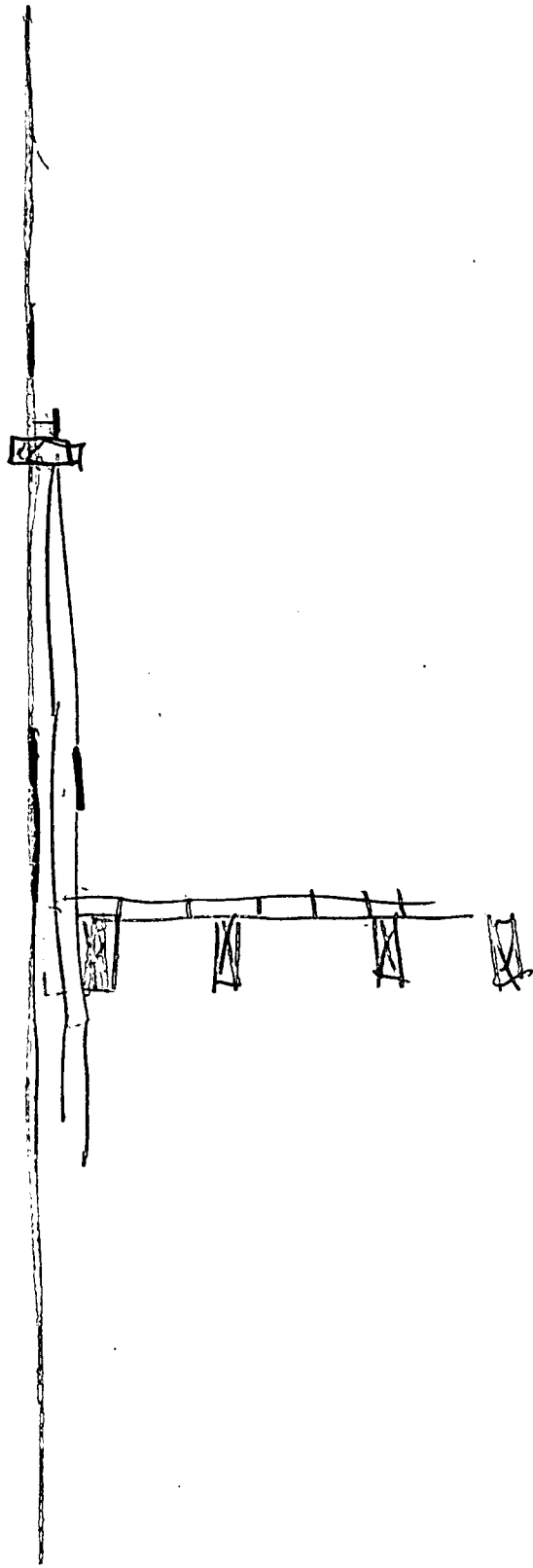
Test Method: ASTM F588-97, "Standard Test Methods For Measuring the Forced Entry Resistance of Window Assemblies, Excluding Glazing Impact."

<u>Paragraph No.</u>	<u>Loads</u>	<u>Test Results</u>		
		<u>Duration</u>	<u>Measured</u>	<u>Allowed</u>
10.2.4.2	N/A	5 Minutes	No Entry	No Entry

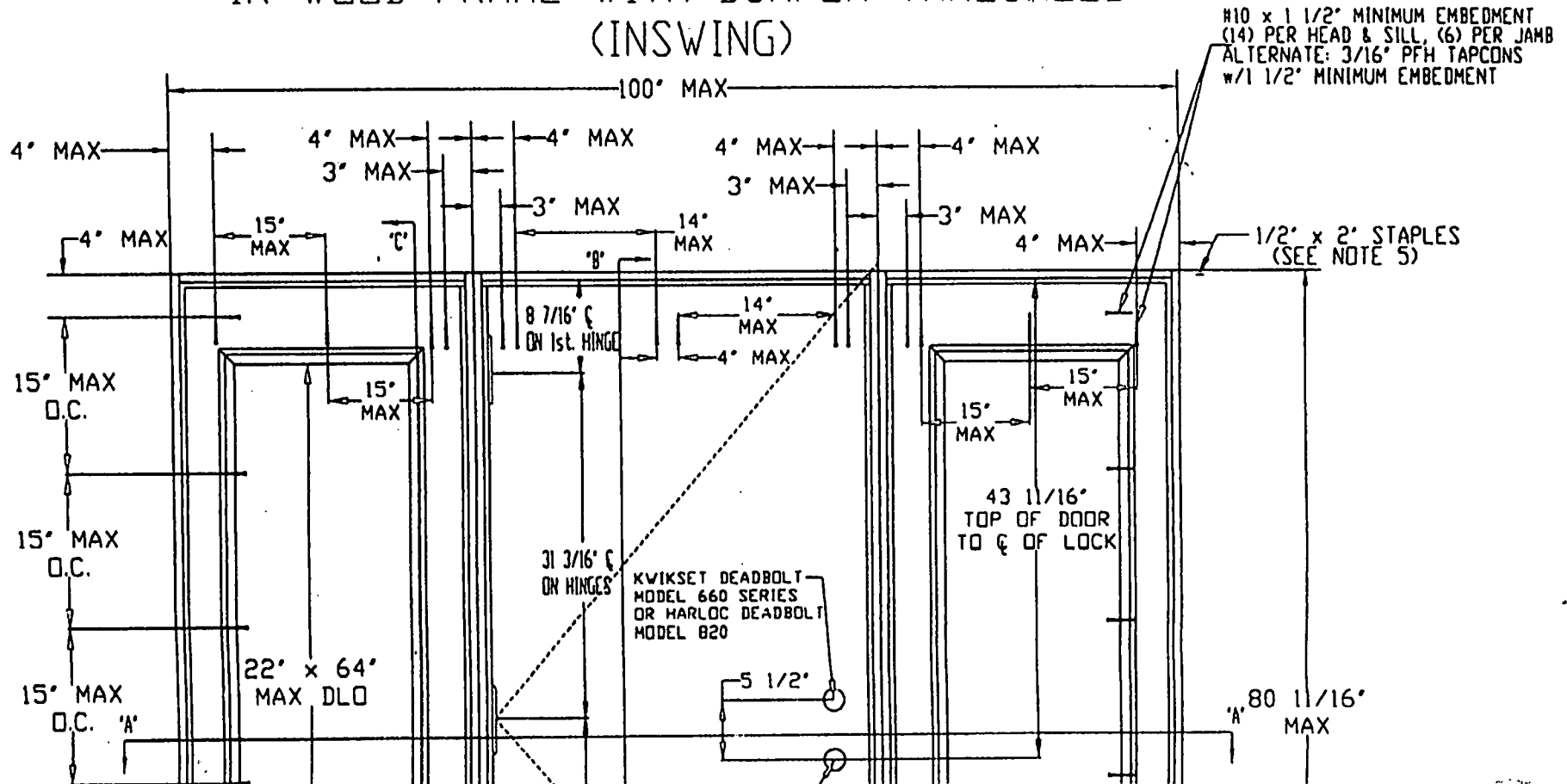
A circular stamp is located in the bottom right corner of the page. The stamp contains the text "V. FORTA" in a circular arrangement. Overlaid on the stamp is a handwritten signature that appears to be "D. Forta" and the date "2/13/02".

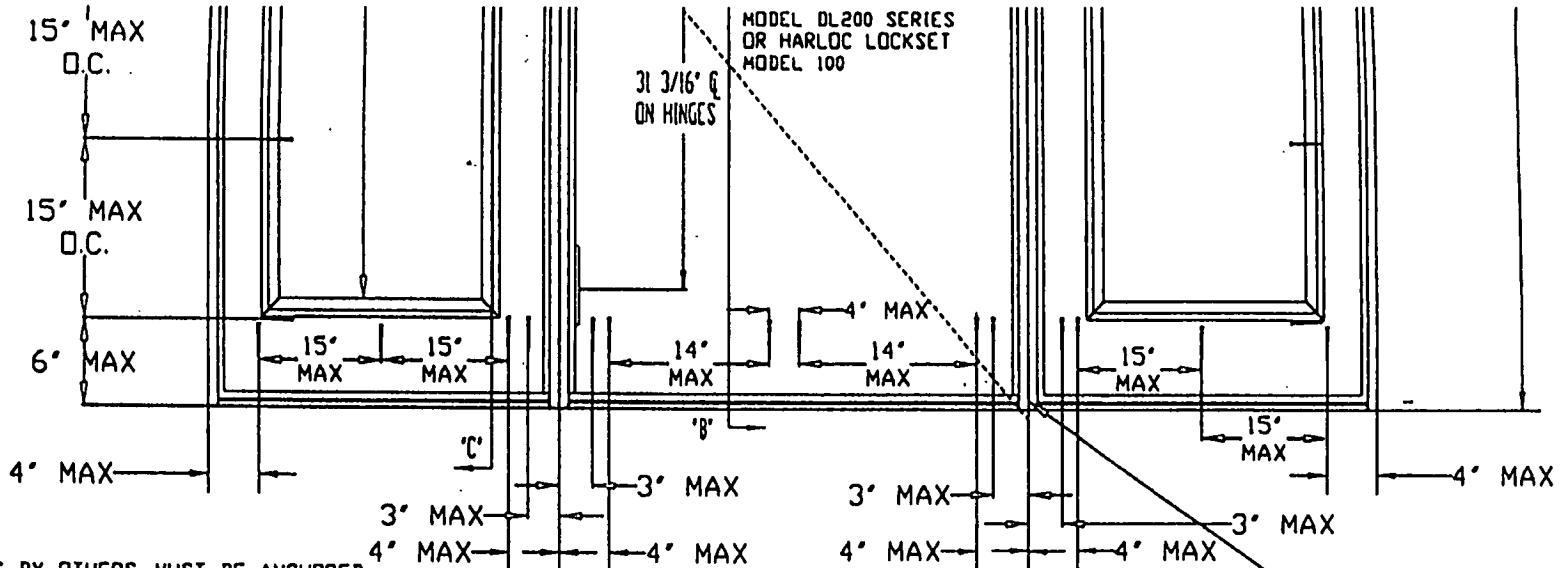
**Metal Industries Home Products
In-Plant Witness
Structural Performance Test Report
NCTL 810-0005-2.1
Series "740/744" Fixed Lite
Aluminum Prime Window
Test Date: 07/14/98**





PREMDOR (ENERGY BRAND)
 WOOD EDGE SINGLE DOOR WITH SIDELITES
 IN WOOD FRAME WITH BUMPER THRESHOLD
 (INSWING)





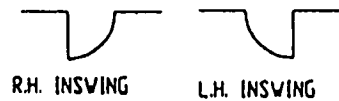
NOTES:

- 1.) WOOD BUCKS BY OTHERS, MUST BE ANCHORED PROPERLY TO TRANSFER LOADS TO THE STRUCTURE.
- 2.) THE PRECEDING DRAWINGS ARE INTENDED TO QUALIFY THE FOLLOWING INSTALLATIONS.

- A. WOOD FRAME CONSTRUCTION WHERE DOOR SYSTEM IS ANCHORED TO A MINIMUM TWO BY WOOD OPENING.
- B. MASONRY OR CONCRETE CONSTRUCTION WHERE DOOR SYSTEM IS ANCHORED TO A MINIMUM TWO BY STRUCTURAL WOOD BUCK.
- C. MASONRY OR CONCRETE CONSTRUCTION WHERE DOOR SYSTEM IS ANCHORED DIRECTLY TO CONCRETE OR MASONRY WITH OR WITHOUT A NON-STRUCTURAL ONE BY WOOD BUCK.

3. ALL ANCHORING SCREWS TO BE #10 WITH MINIMUM 1 1/2" EMBEDMENT INTO WOOD SUBSTRATE OR 3/16" PFH TAPCONS WITH 1 1/2" MINIMUM EMBEDMENT INTO MASONRY.
4. UNIT MUST BE INSTALLED WITH 'MIAMI-DADE COUNTY APPROVED' SHUTTERS
5. THREE STAPLES PER SIDE JAMB INTO HEADER ON SIDELITES AND DOOR, THREE STAPLES PER JAMB INTO BASE ON SIDELITES.
6. LATEX SEALANT TO BE APPLIED AT SIDE BY SIDE JAMBS AND SIDELITES.
7. DOOR/SIDELITE HEADER, DOOR/SIDELITE JAMBS, AND SIDELITE BASE CORNERS ARE COPED AND BUTT JOINED.
8. DOORS SHALL BE PRE-PAINTED WITH A WATER-BASED EPOXY RUST INHIBITIVE PRIMER PAINT WITH A DRY FILM THICKNESS OF 0.8 TO 1.2 MIL.
9. FRAME SHALL BE PRE-PAINTED WITH AN ACRYLIC LATEX WATER-BASED/ WATER-CURABLE WHITE PRIMER WITH A DRY FILM THICKNESS OF 0.8 TO 1.2 MIL.

#8 x 1 3/4" F.H.W.S
(3) PER SIDE FROM
JAMB INTO THRESHOLD



DESIGN PRESSURE RATINGS		
	WHERE WATER INFILTRATION REQUIREMENT IS NEEDED *	WHERE WATER INFILTRATION REQUIREMENT IS NOT NEEDED
Positive	NOT APPROVED *	+67.0 psf
Negative	NOT APPROVED *	-67.0 psf

* UNITS SHALL BE INSTALLED ONLY AT LOCATIONS PROTECTED BY A CANOPY OR OVERHANG SUCH THAT THE ANGLE BETWEEN THE EDGE OF CANOPY OR OVERHANG TO SILL IS LESS THAN 45 DEGREES. UNLESS UNIT IS INSTALLED IN NON-HABITABLE AREAS WHERE THE UNIT AND THE AREA ARE DESIGNED TO ACCEPT WATER INFILTRATION.

APPROVED AS COMPLYING WITH THE
SOUTH FLORIDA BUILDING CODE
DATE **JUN 05 2008**
BY *Manuel Torres*
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. **01-0314.18**

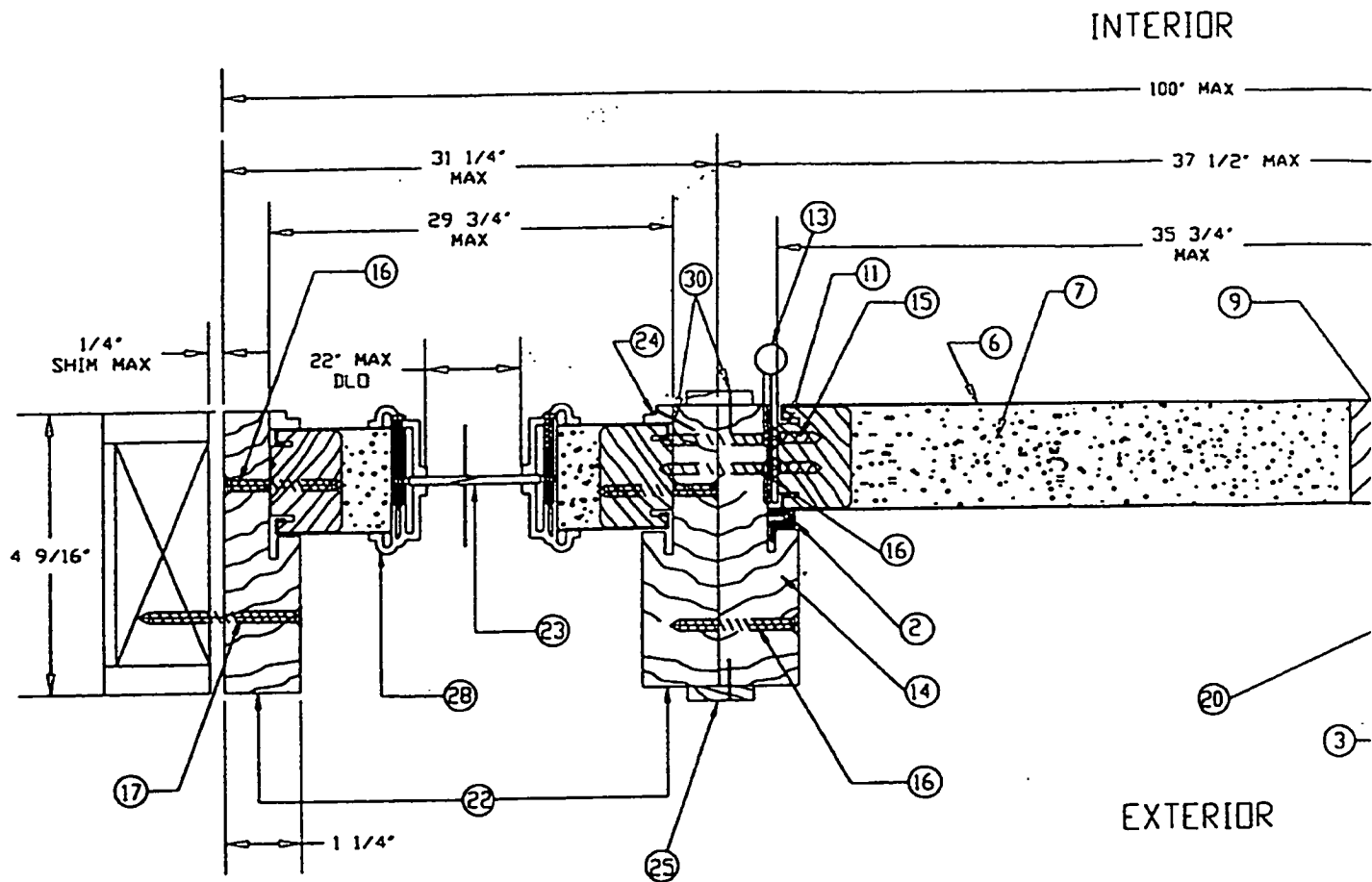
C	DADE COUNTY MODIFICATIONS	DATE	BY
B	ADD RATINGS & REDRAWN	0-25-00	RS
A	ADD SCREWS FROM JAMB TO THRESHOLD	11-11-07	RS
A	ADD NOTE # FOR STAPLES	11-11-07	RS
ETR	REVISIONS	DATE	BY
PAR	NAME: ENTERGY WOOD CORR. OFF. SIDELITE		
MAF:	SCALE:		

DR BY: RS DATE: 4-9-97

PREMDOR ENTRY SYSTEMS
911 E. JEFFERSON
PITTSBURGH, PA 15212

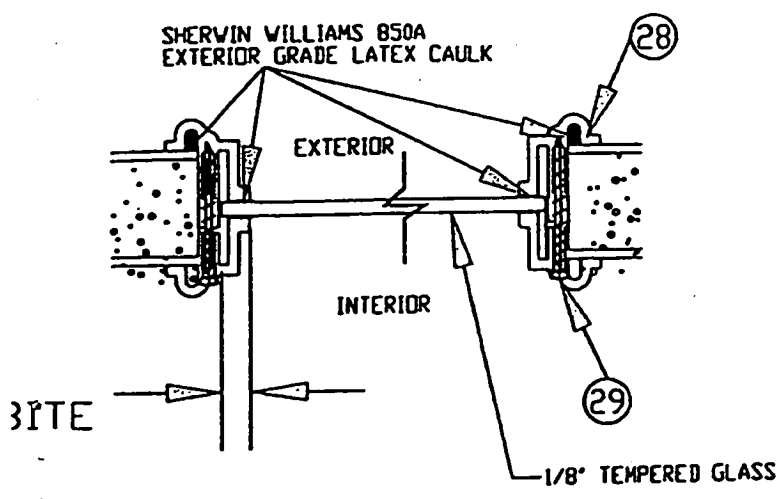
31-1020-EW-1
SHEET 1 OF 6

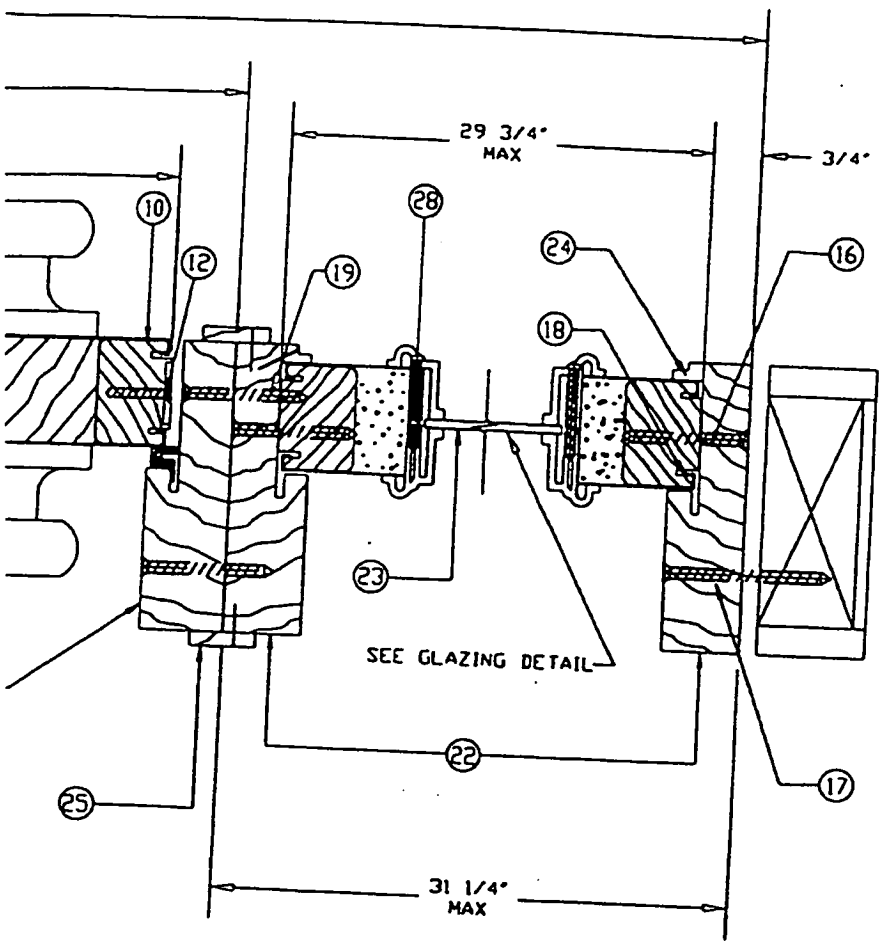
T LETTER C



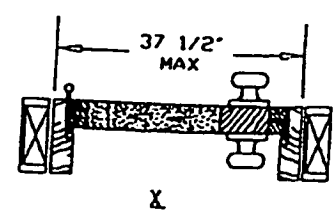
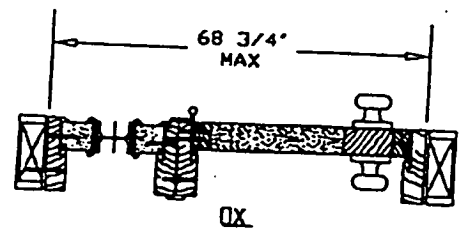
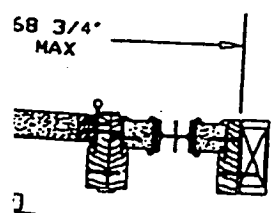
SECTION A-A
IN SWING

GLAZING DETAIL





OTHER CONFIGURATIONS



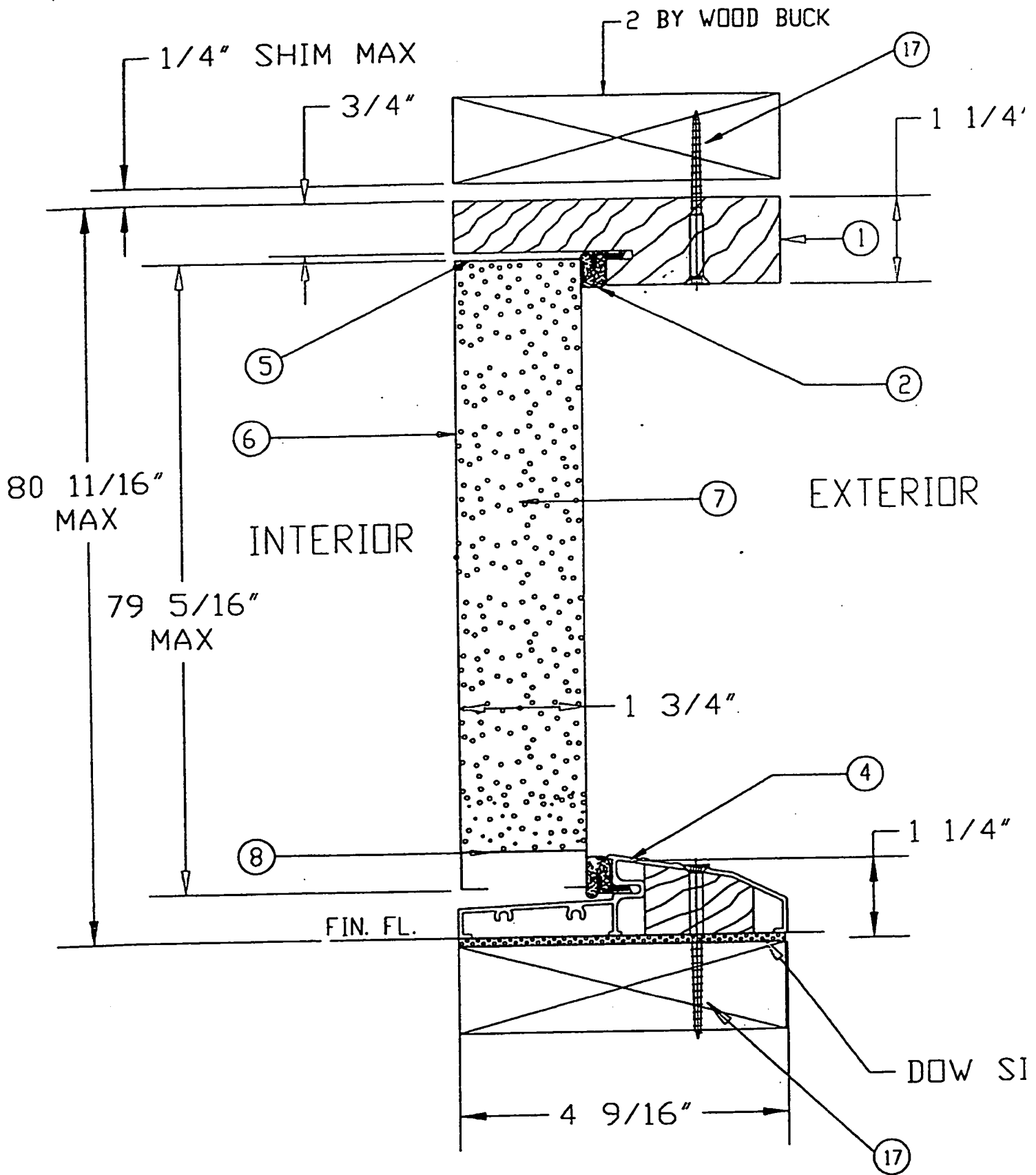
APPROVED AS COMPLYING WITH THE
 SOUTH FLORIDA BUILDING CODE
 DATE **JUN 05 2001**
 BY *Manuel Cruz*
 PRODUCT CONTROL DIVISION
 BUILDING CODE COMPLIANCE OFFICE
 ACCEPTANCE NO.

LIMITS: UNLESS NOTED, FRAC : REC : ANG :
 EXTRUSIONS: UNLESS NOTED, STB. COMPL. TO 'S'
 ENGINEER:
 DR. IT. R.S. DATE 7-29-97
PREMDOR ENTRY SYSTEMS
 90 E. JEFFERSON
 PITTSBURG, KS 66762

C	DADE COUNTY MODIFICATIONS	2/11/01	JD
B	ADDED PAGE 5 (DOOR OPTIONS)	08-1-98	BS
A	ADD SCREWS TO LITE FRAMES & ADD OTHER DOOR CONFIGURATIONS	2-18-97	
LIR	REVISIONS	DATE	BY
PART NAME: ENERGY DOOR W/SHIELD LITE (A-A)		SCALE: N.T.S.	

31-1020-EW-
 SHEET 2 OF 6

REVISION LETTER C



SECTION B-B

APPROVED AS COM:
 SOUTH FLORIDA GL
 DATE JUN 0
 BY Maui
 PRODUCT CONTROL
 BUILDING CODE CC
 ACCEPTANCE NO. 1

MATERIALS LIST

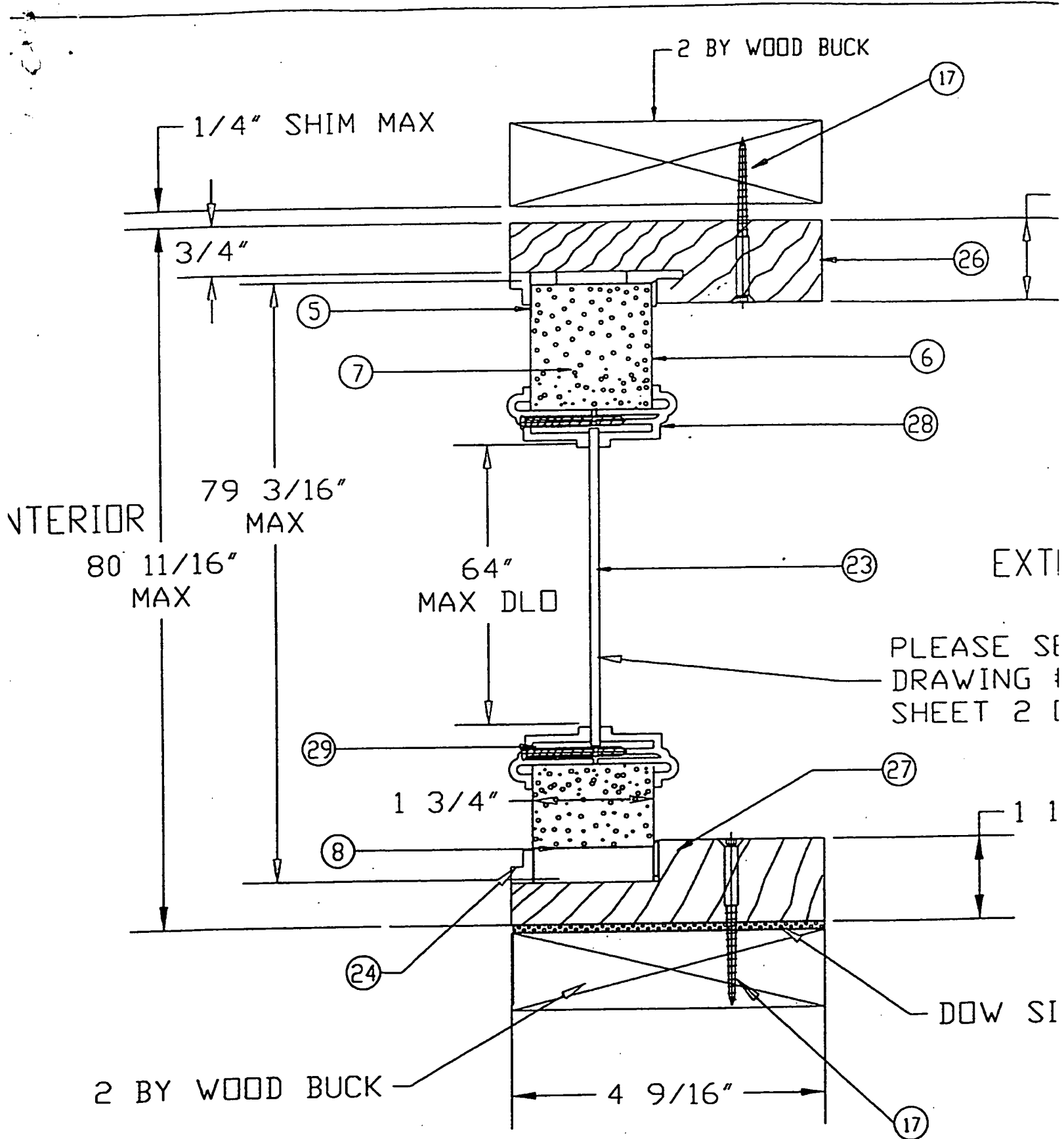
ITEM NO.	DESCRIPTION	PART NUMBER	COMMENTS
①	WOOD HEAD JAMB	EW-12	1 1/4' X 4 9/16' MTL. TO BE PINE OR EQUIVALENT
②	COMPRESSION WEATHERSTRIP	EW-14	LOCKSCREEN BRAND LOXSEAL 9650 (BRONZE)
③	WOOD STRIKE JAMB	EW-10	1 1/4' X 4 9/16' MTL. TO BE PINE OR EQUIVALENT
④	ALUMINUM-BUMPER THRESHOLD	EW-13	PREMDOR BRAND OR EQUIVALENT - 1 1/4' x 4 9/16'
⑤	TOP CHANNEL	EW-05	PREMDOR BRAND - 1 11/16' - 20 GA STEEL
⑥	STEEL SKIN	26 ga. (017 +.004 -.000)	<small>MIN. YIELD STRENGTH 31,000 PSI MIN. THICKNESS PER TENSILE TEST REPORT IS .021"</small>
⑦	POLYURETHANE FOAM CORE	BASF FOAM - DENSITY 2.0 TO 2.5 lbs./ft ³	
⑧	BOTTOM CHANNEL	EW-04	PREMDOR BRAND - 1 11/16' - 20 GA STEEL
⑨	WOOD LOCK BLOCK	EW-08	4' X 9 1/2' MTL. TO BE PINE OR EQUIVALENT
⑩	STRIKE STILE	EW-07	15/16' X 1 11/16' MTL. TO BE PINE OR EQUIVALENT
⑪	HINGE STILE	EW-06	15/16' X 1 11/16' MTL. TO BE PINE OR EQUIVALENT
⑫	LOCK PREP FILLER PLATE	EW-09	PREMDOR BRAND - .050" THICK- MTL. TO BE POLYETHYLEN
⑬	4'x4' HINGE	EW-15	HAGER BRAND HINGE OR EQUIVALENT - .097 THICK (STEEL
⑭	WOOD HINGE JAMB	EW-11	1 1/4' X 4 9/16' MTL. TO BE PINE OR EQUIVALENT
⑮	#10 x 3/4' F.H.W.S.		(4) SCREWS PER HINGE INTO DOOR
⑯	#10 X 2' F.H.W.S.		(5) SCREWS THROUGH HINGE JAMB INTO SIDELITE JAMB, 8" DOWN FROM TO MAX 18" O.C. THEREAFTER (10) SCREWS THROUGH STRIKE JAMB INTO SIDELITE JAMB, 4" DOWN FROM TO MAX 8" O.C. THEREAFTER (4) SCREWS THROUGH EACH HINGE INTO DOOR JAMB (6) SCREWS THROUGH EACH SIDELITE JAMB INTO SIDELITE, 4" DOWN FROM TOP, MAX 15" O.C. THEREAFTER
⑰	#10 F.H.W.S. V/MINIMUM 1 1/2 EMBEDMENT OR 3/16" PFH TAPCONS V/MINIMUM 1 1/2" EMBEDMENT		REFER TO ELEVATION VIEW, FOR # OF SCREWS USED AND LOCATIO
⑱	SIDELITE WOOD STILE	EW-07	15/16' X 1 11/16' MTL. TO BE PINE OR EQUIVALENT
⑲	#8 x 2' F.H.W.S.		(2) SCREWS AT EACH STRIKE PLATE
⑳	LOCKSET		KWIKSET BRAND 200 LOCK OR HARLOC BRAND 100 LOCK
㉑	NOT USED ON THIS MODEL		
㉒	WOOD SIDELITE JAMB	EW-18	1 1/4' X 4 9/16' MTL. TO BE PINE OR EQUIVALENT
㉓	22' X 64' SINGLE PANEL GLASS	EW-19	TEMPERED GLASS IN POLYPROPYLENE FRAME- DC-1643 - (ODL- 1/8" CLEAR TEMPERED GLASS
㉔	SIDELITE TRIM (WOOD)	EW-20	5/16 x 1/2' MTL. TO BE PINE OR EQUIVALENT
㉕	WOOD CASING	EW-21	1/8" x 1" MTL. TO BE PINE OR EQUIVALENT - ITEMS ARE MOLDINGS USE FOR "SIDE BY SIDE JAMBS" AS MULLIONS
㉖	WOOD SIDELITE HEAD JAMB	EW-22	1 1/4' X 4 9/16' MTL. TO BE PINE OR EQUIVALENT
㉗	WOOD SIDELITE BASE	EW-23	1 1/4' X 4 9/16' MTL. TO BE PINE OR EQUIVALENT
㉘	POLYPROPYLENE LITE FRAME	DC-1643, ODL-2	HP Polypropylene by ODL
㉙	#6 X 1 1/2' PAN HEAD SCREWS		18 PER FRAME SCREW SPACING TO BE 3" IN FROM EACH CORNER AND NOT TO EXCEED 14" O.C. THEREAFTER.
㉚	PIN NAIL		3/4" LONG NAIL, 4" IN FROM END, MAX 8" O.C. THEREAFTER, USED ON MULLIONS AND TRI

CDONE #995

LIMITS: UNLESS NOTED, FRAC. : DEC. : ANG. :		B	DADE COUNTY MODIFICATIONS	1/11/01	JD
EXTRUSIONS: UNLESS NOTED, STD. COM'L. TOL'S.		A	ADDED PAGE 5 (DOOR OPTIONS)	10-1-98	RS
ENGINEER:		LTR.	REVISIONS	DATE	BY
DR. BY R.S.		PART NAME: ENERGY WOOD EDGE DOOR (B-B)			
DATE 7-29-97		MATERIAL:		SCALE:	
PREMDOR ENTRY SYSTEMS			31-1020-EW-1		
911 E. JEFFERSON			SHEET 3 OF 6		
PITTSBURG, KS. 66762			REVISION LETTER B		

WITH THE
COPE
ON
OFFICE
314.18





INTERIOR

EXTI

PLEASE SEE
DRAWING #
SHEET 2 (

SECTION C-C

APPROVED AS COMPLIANT WITH
FLORIDA BUILDING CODE
DATE **JUN 0 5**
BY *Mauss*
PRODUCT CONTROL
BUILDING CODE COMMISSION
ACCEPTANCE NO. 6

1/4"

DIOR

"GLAZING DETAIL"

1-1020-EW-I

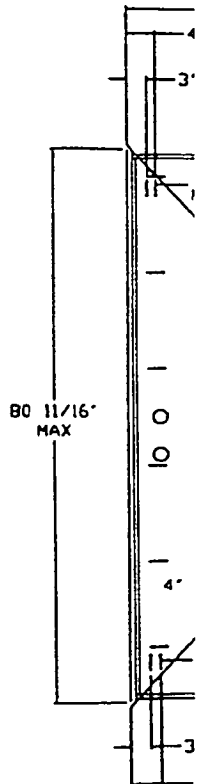
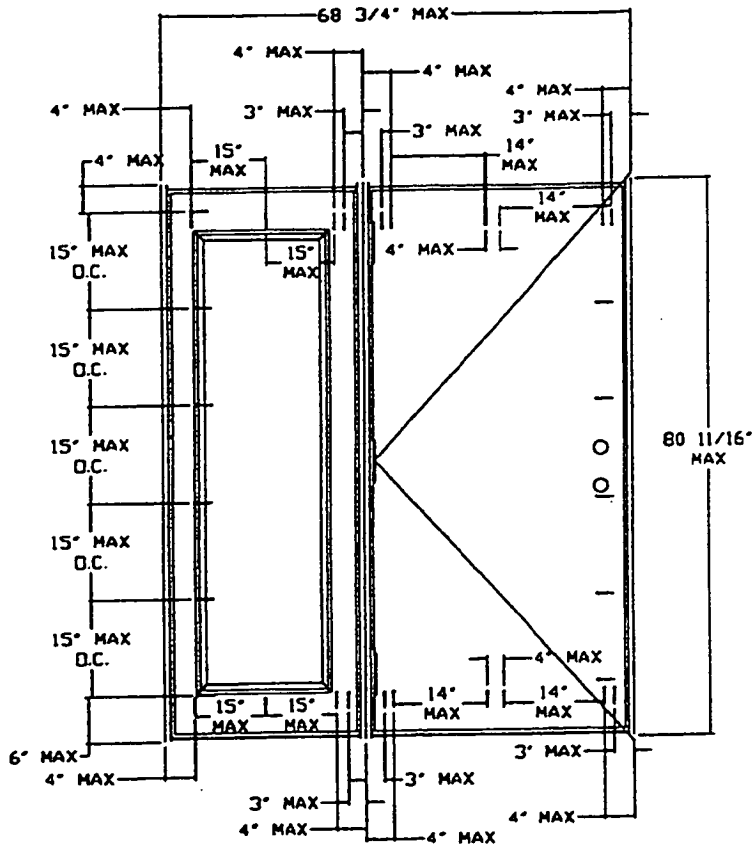
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CDNE #995

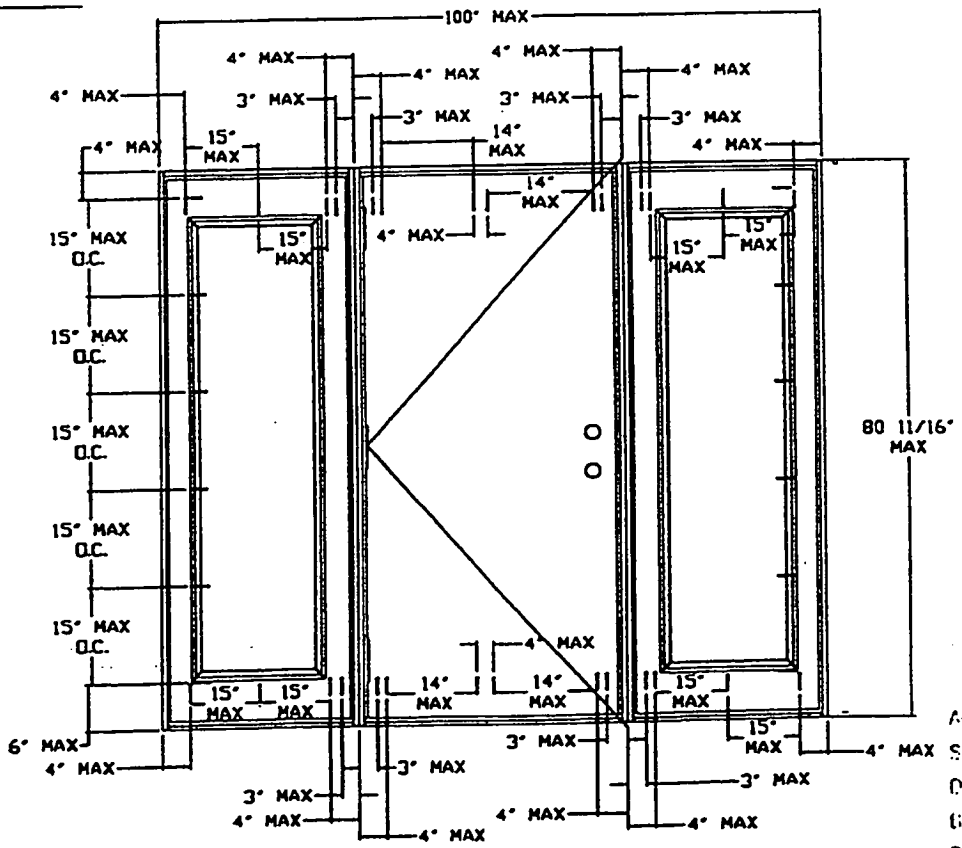
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EXTRUSIONS: UNLESS NOTED, STD. COM'L. TOL'S.		C	MATERIAL WAS POLYSTYRENE	6-2-99	RS
ENGINEER:		B	ADDED PAGE 5 (DIOR OPTIONS)	10-1-98	RS
DR. BY R.S.		A	ADD SCREWS TO LITE FRAME & MATERIAL LIST	12-18-97	R.S.
DATE 7-29-97		LTR.	REVISIONS	DATE	BY
PREMDOR ENTRY SYSTEMS		PART NAME: ENTERGY WOOD EDGE SIDELITE (C-C)			
911 E. JEFFERSON		MAT'L:		SCALE:	
PITTSBURG, KS. 66762		31-1020-EW-I			
		SHEET 4 OF 6			
					REVISION LETTER D

WITH THE
 CODE
 101
 ON.
 ICE OFFICE
 3/4.18

OTHER DOOR



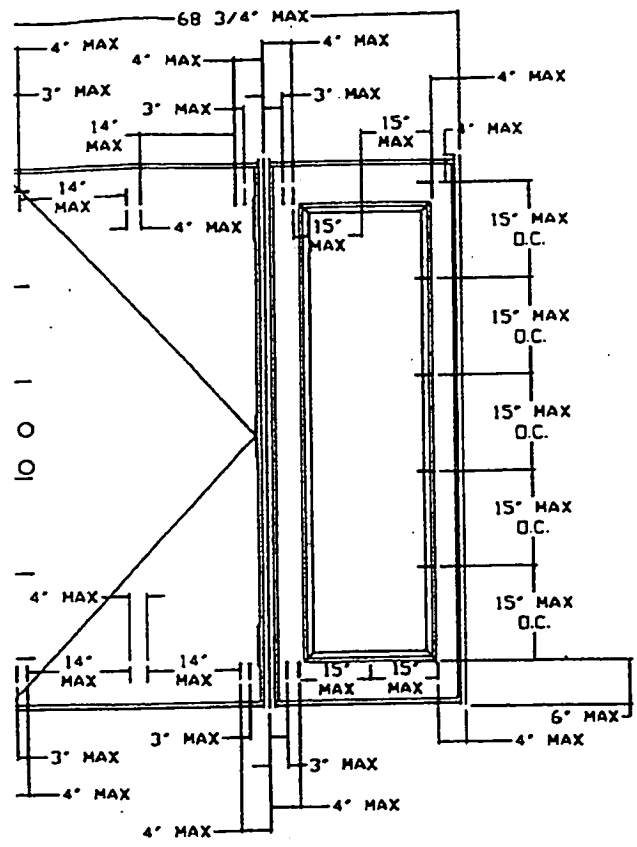
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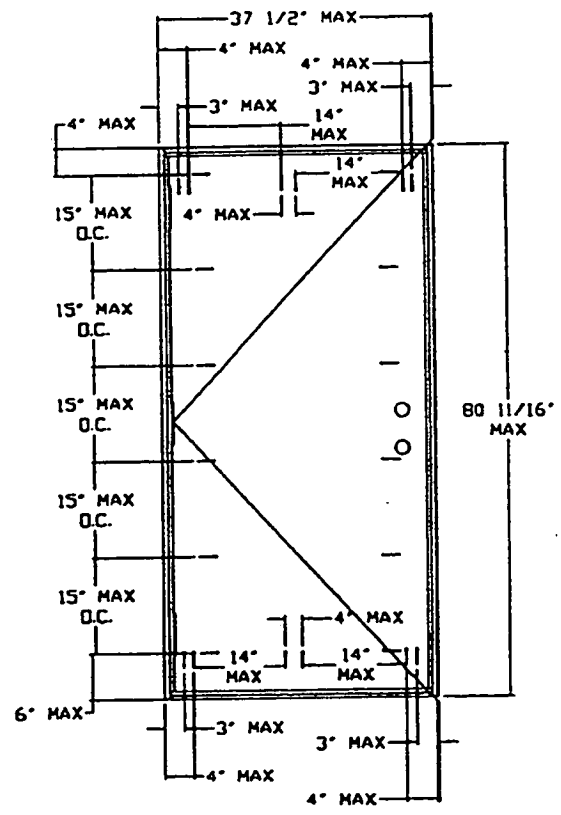
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APPROVED AS
SCHEMATIC
DATE JUN
BY *me*
PRODUCT CODE
BUILDING CODE
ACCEPTANCE

100R CONFIGURATIONS



XO

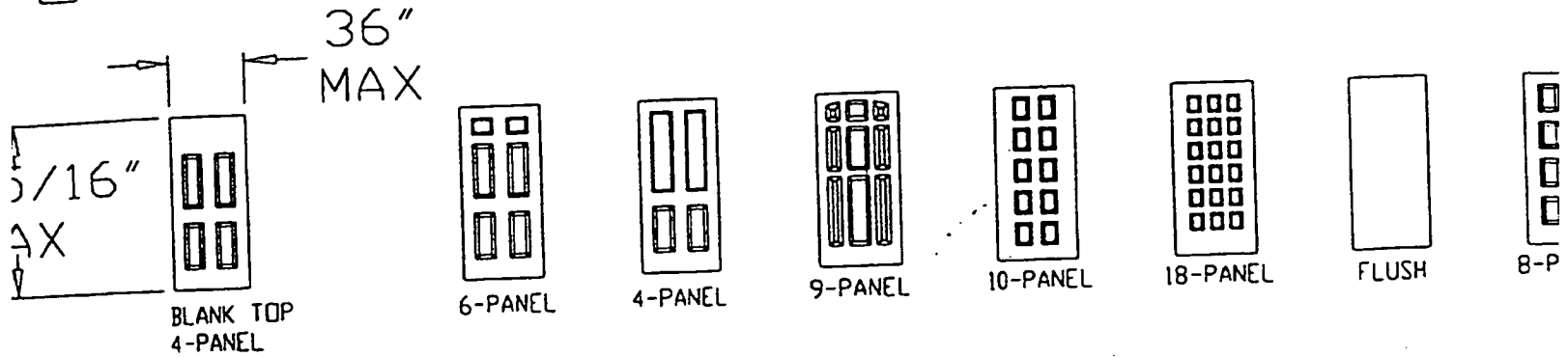


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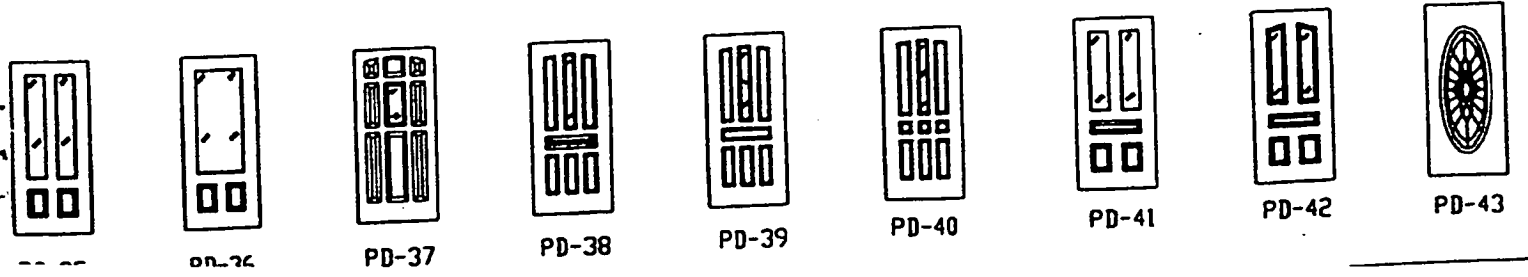
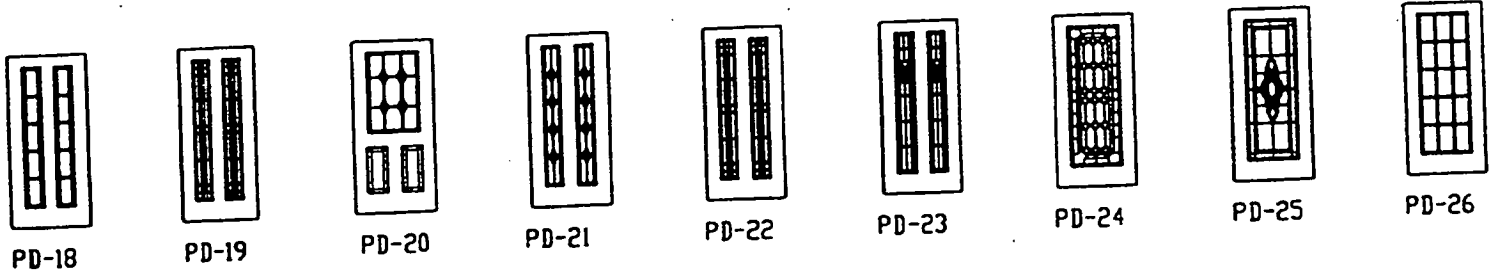
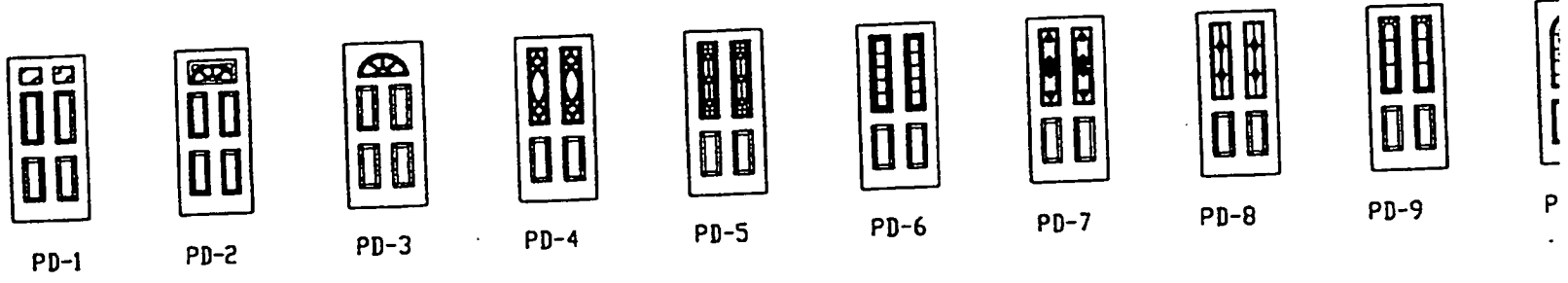
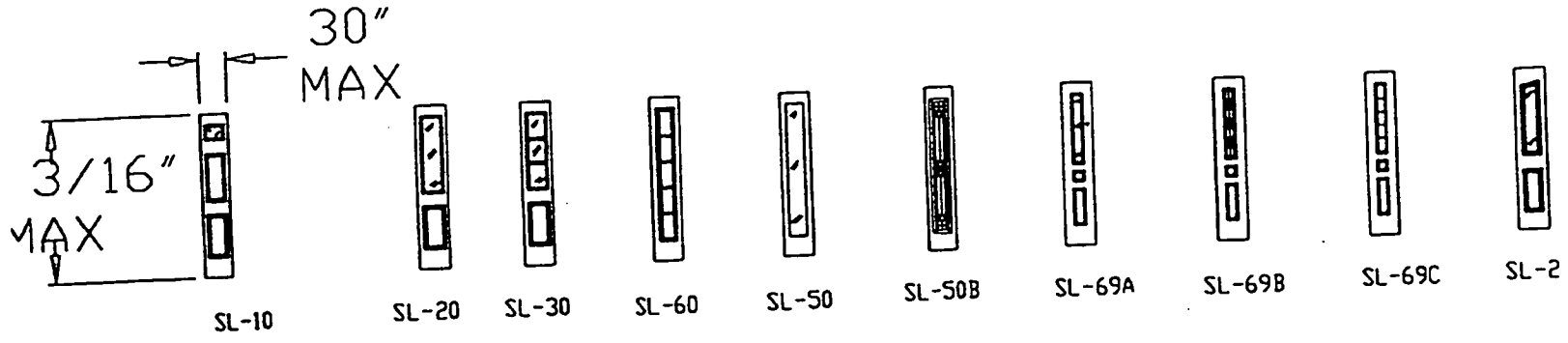
IN ACCORDANCE WITH THE
 2003 IBC BUILDING CODE
ON 05 2011
Tamela
 CONTROL DIVISION
 CODE COMPLIANCE OFFICE
 NCE NO 01-0314.18

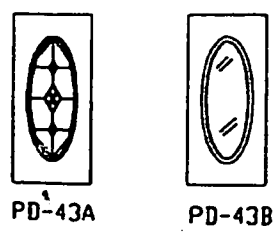
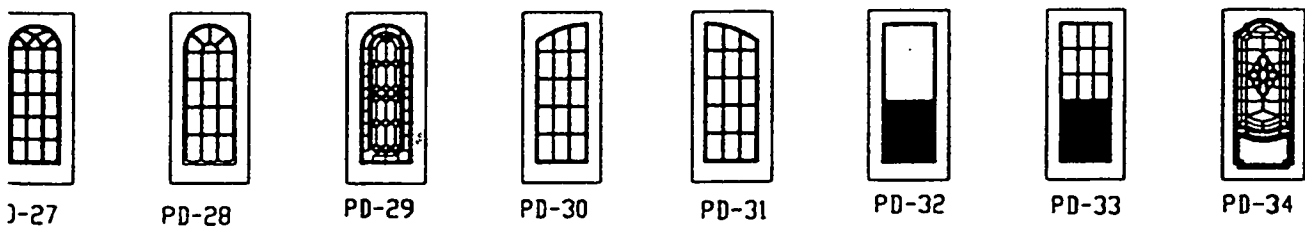
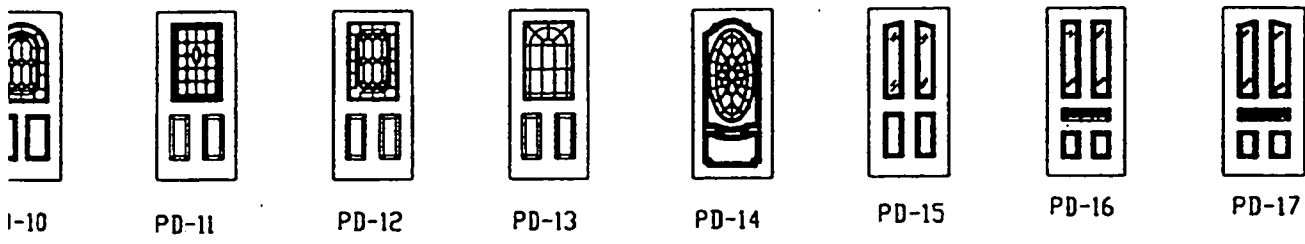
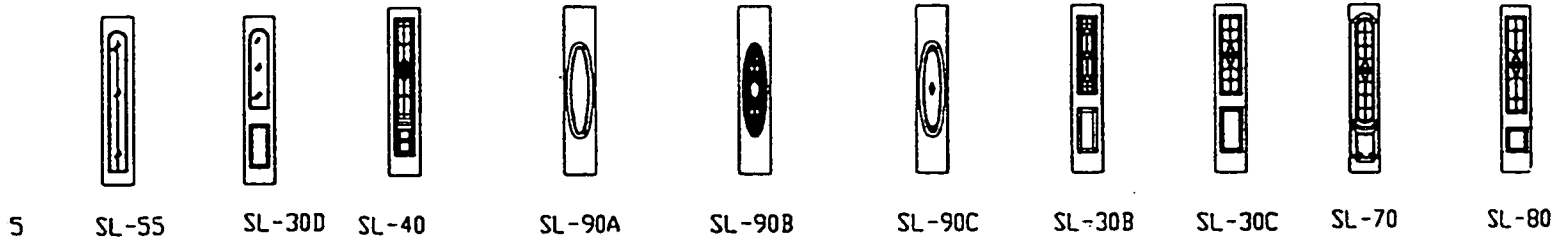
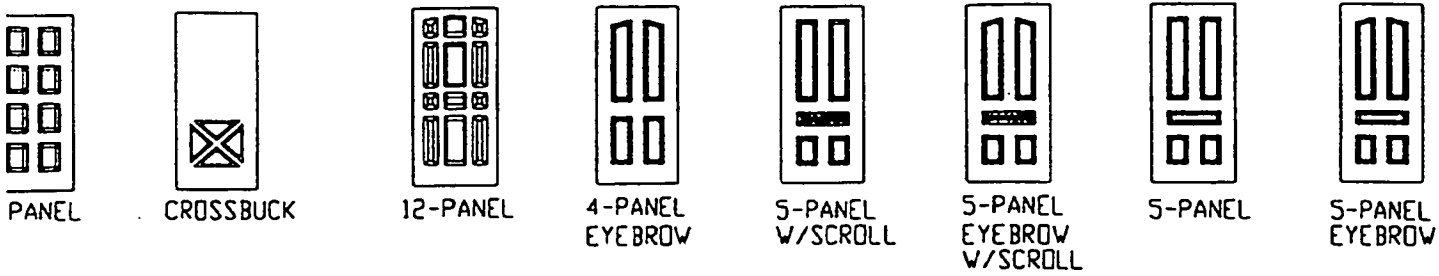
LIMITS: UNLESS NOTED, FRAC. : DEC. : ANG. :				
EXTRUSIONS: UNLESS NOTED, STD. COMPL. TOL'S.				
ENGINEER:	LTR.	REVISIONS	DATE	BY
DR. BY J.D.	DATE 1-11-01	PART NAME:	SCALE:	
PREMDOR ENTRY SYSTEMS		31-1020-EW-T		
911 E. JEFFERSON		SHEET 5 OF 6		
PITTSBURG, KS. 66762		REVISION LETTER		

OTHER DOOR PANEL STYLES



OTHER SIDELITE STYLES





APPROVED AS COMPLYING WITH THE
 SOUTH FLORIDA BUILDING CODE
 DATE JUN 05 2001
 BY *Manuel Lopez*
 PRODUCT CONTROL DIVISION
 BUILDING CODE COMPLIANCE OFFICE
 ACCEPTANCE NO. 01-0314-18

LIMITS: UNLESS NOTED, FRAC. : DEC. : ANG. :			
EXTRUSIONS: UNLESS NOTED, STD. COMPL. TOL'S			
ENGINEER:		LIR	REVISIONS
DR BY J.D.		PART NAME: PREMDOR DOOR OPTIONS	
DATE 1/15/01		MAT'L:	SCALE:
PREMDOR ENTRY SYSTEMS		31-1020-EW-1	
911 E. JEFFERSON		SHEET 6 OF 6	
PITTSBURG, KS. 66762		REVISION LETTER	

STATEMENT OF INSPECTION

(To be submitted at final inspection for Certification of Occupancy)

COMPLIANCE WITH SECTION 0307.2 OF THE SOUTH FLORIDA BUILDING CODE

To: Building Official, Town of Sewall's Point
From: Architect or Engineer of Record
Re: Subject Structure Described As Follows:

In accordance with the requirements of Town of Sewall's Point and the Florida Building Code, a "Statement of Inspection", executed by the Architect or Engineer who sealed and signed the plans, shall be issued and dated following completion of the work, and delivered as a condition precedent to the issuance by the Building Official of any temporary or final Certificates of Occupancy or Certificates of Completion.

Owner: Charles David Russell Address: SEWALL'S POINT ROAD

Project Address: 47 Sewall's Point Rd Legal Description: Lot 26 Blk _____ Subdivision EMARITA

General Contractor: OWNER Lic/Cert No. _____

Address: _____ Tel: _____ Fax: _____

Architect or Engineer: Stiles Peet Lic/Reg No. _____

Address: _____ Tel: 223-9883 Fax: _____

Permit No: _____ Date of Issue: _____ Date of This Statement: _____

1. I am the Architect or Engineer who sealed and signed the plans for the subject structure.
2. To the best of my knowledge, belief and professional judgment, the structural and envelope components of the structure are in compliance with the approved plans and other approved permit documents.
3. To the best of my knowledge, belief and professional judgment, the approved permit plans represent the as-built condition of the structural and envelope components of the structure.

Executed at _____, _____ this _____ day of _____, _____

Name: _____; Signature: _____; Lic. No: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to and subscribed before me this _____ day of _____, _____ by _____, who is

Personally known to me or who has produced _____ as identification and who did not take an oath.

(NOTARY SEAL)

Name: _____

I am an Notary Public of the State of Florida and my commission expires: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4-21-2008 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6052	ROPP	Pillings, Fingerbier	Passed	close
(3)	19 W. High Pt. J+B Rialti			INSPECTOR: [Signature]
5289	Clowren	Fence	?	7/3 Columns 8'1 Gate Posts
(2)	11 W. High Point FENCE CRAFTERS			INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	SKINNER	TREE	Partial	native species
(4)	15 PALMETTO			tree OK in my opinion INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6111	GREENE	ROOF SHEATHING	Failed	
(1)	26 ISLAND ROAD	NAIL OFF		
		Wall Sheathing	Failed	INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6213	DEGRAFF	FINAL	Passed	close
(8)	9 CASRE HILL	POOL ENCL		INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6194	DUNLAP	TIN TAG	Passed	
(5)	115 HILLCREST PACIFIC	METAL		INSPECTOR: [Signature]
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6221	RUSSELL	FRAMING	Passed	
(6)	475 SEWALLS PT O/B	Wall Sheathing	Passed	INSPECTOR: [Signature]
OTHER:	6 Middle Rd - Fence ?			

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/30, 2008 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6221	RUSSELL	LATHE	Passal	
	47 S. SEWALL'S RD			
	O/B			INSPECTOR [Signature]
6202	DICKINSON	ROUGH PLUMBING	Passal	
(4)	19 EMERITA WAY			
	PALMER CONST.			INSPECTOR [Signature]
6147	ALEXANDER	Footings + Slab	Passal	
(8)	86 S. Sewall Pt Rd			
	Johanson			INSPECTOR [Signature]
6146	Convoy	Partial Lathe	Passal	
(10)	12 Palmetto			
	O/B			INSPECTOR [Signature]
TREE	STONE	TREE	Passal	
(5)	22 EMERITA WAY			
				INSPECTOR [Signature]
6241	MCPHEE	HURRICANE SHUTTERS	Passal	
(7)	8 ADMIRAL'S WALK			546 5453
	Rio Vista			INSPECTOR [Signature]
6104	Byer	Reuce Survey	required for final	
(3)	32 N. Sewall Pt.			(dispute w. neighbor)
	Reuce Crafts			INSPECTOR [Signature]
OTHER:				
	26 Island Rd.	Tree permit	- pay + pick up	[Signature]
	18 Riverview	Tree permit	- find tree	[Signature]

INSPECTION LOG FOR ABANDONED/EXPIRED PERMITS

PERMIT #	OWNER'S NAME	ADDRESS	DESCRIPTION	APPROVED BY & DATE
6348	HOFFLER	173 S.S.P.R.	REPLACE WINDOW.	AW 12/29/08
7661	LITCHEY	5 MIDDLE RD.	" A/C	AW 12/29/08
6788	MACRI	6 ADMIRAL WALK	WORK NOT DONE	AW 12/29/08
7507	HUDSON	157 S. RIVER	REPLACE WINDOWS	AW 12/29/08
7315	COOL	22 N. RIDGEVIEW	WORK DONE	AW 12/29/08
7359	BRODERICK	44 RIO VISTA	" "	AW 12/29/08
6141	FERRARO	4 KINGSTON CT.	" "	AW 12/29/08
6749	NAUDIN	19 N. RIDGEVIEW	GAR. DONE	AW 12/29/08
6221	WISSEL	47 S.S.P.R.	WORK DONE	AW 12/29/08
6884	MCMATHON	57 S.S.P.R.	WORK DONE	AW 12/29/08
7470	GARVIN	109 HILLCREST	" "	AW 12/29/08
7475	KNOBEL	58 S.S.P.R.	" "	AW 12/29/08
6199	CONROY	12 PALMETTO	" "	AW 12/29/08
7206	FRIBOURG	9 COPAIRE	" "	AW 12/29/08

6315

DRIVEWAY

TOWN OF SEWALL'S POINT

Date 7/7/03

BUILDING PERMIT NO. 6315

Building to be erected for DAVID RUSSELL Type of Permit CONCRETE DRIVE

Applied for by BUWALDA'S CONCRETE INC (Contractor) Building Fee 35.00

Subdivision EMARITA Lot 26 Block _____ Radon Fee _____

Address 47 S. SEWALL'S POINT ROAD Impact Fee _____

Type of structure DRIVEWAY A/C Fee _____

Parcel Control Number: _____ Electrical Fee _____

13841005 00000 26020000

Amount Paid 35.00 Check # 4767 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 2100.00 TOTAL Fees 35.00

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

PERMITS

- | | | |
|---|--|--|
| <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>DRIVEWAY</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 _____ |

Permit Number: _____

DAVID RUSSELL

Town of Sewall's Point
BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: DAVID RUSSELL Phone (Day) 260 1363 (Fax) _____

Job Site Address: 471 SOUTH SEWALLS PT. RD. City: STUART State: FLA. Zip: 34996

Legal Description of Property: Lot 26 EMARITA Parcel Number: _____

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

Description of Work To Be Done: CONCRETE DRIVE

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

CONTRACTOR/Company: BUWALDA'S CONCRETE INC Phone: 225-0055 Fax: _____

Street: 775 NE BAMBERRY LN. City: JENSEN BEACH State: FLA Zip: 34957

State Registration Number: SP-01760 State Certification Number: _____ Martin County License Number: SP-01760

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 2100.00 (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)
Charles David Russell
State of Florida, County of: St. Lucie
This the 22 day of JUNE, 2003
by Charles D. Russell who is personally
known to me or produced
as identification. FL. DR. Lic

Notary Public
My Commission Expires: 12/19/03

JACQUELINE S. MANFREDI
Notary Public
My Commission Expires: 12/19/03
No. CC 896711
Possibly Known (I Other I.D.)

CONTRACTOR SIGNATURE (required)
Bruce Buwalda
On State of Florida, County of: MARTIN
This the 20 day of JUNE, 2003
by BRUCE BUWALDA who is personally
known to me or produced
As identification. FLORIDA DRIVERS Lic

Notary Public
My Commission Expires: Ruth B Woodwell

PERMIT APPLICATIONS VALID 90 DAYS FROM APPROVAL NOTIFICATION PLEASE PICK UP YOUR PERMIT PROMPTLY!

ST. LUCIE COUNTY
MAY 19 2003
Seal

RUTH B. WOODWELL
MY COMMISSION EXPIRES: JUNE 27, 2006
Bonded Thru Notary Public Underwriters

SURVEY 2 COPIES

SHOWING DRIVE

IMPROVED / PREVIOUS

CERTIFIED TO TOWN OF

SMALL POINT

ACORD CERTIFICATE OF LIABILITY INSURANCE		DATE 06/23/2003
PRODUCER Campo Insurance & Investment Services (772) 286-0330 Office Suite 325 Stuart FL 34994-		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. INSURERS AFFORDING COVERAGE INSURER A: Safeco Business Insurance INSURER B: INSURER C: INSURER D: INSURER E:
INSURED Buwalda Concrete, Inc 775 NE Bayberry Lane Jensen Beach FL 34957-		

RECEIVED
 JUN 23 2003
 BY:

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	01 CR 908390-4	05/20/2003	05/20/2004	EACH OCCURRENCE \$ 500,000
	<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				FIRE DAMAGE (Any one fire) \$ 200,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 500,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/PROP AGG \$ 1,000,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS LIABILITY				EACH OCCURRENCE \$ AGGREGATE \$ DEDUCTIBLE \$ RETENTION \$
	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/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 Concrete Contractor

CERTIFICATE HOLDER Town of Sewall's Point FAX Number: 220-4765 Stuart FL	ADDITIONAL INSURED; INSURER LETTER:	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE <i>James McCamp</i>
---	-------------------------------------	---

STATE OF FLORIDA
DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY
DIVISION OF WORKERS' COMPENSATION

CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION
FROM FLORIDA WORKERS' COMPENSATION LAW

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

EFFECTIVE DATE 02/01/2002
EXPIRATION DATE 02/01/2004
EXEMPTED INDIVIDUAL NAME BUWALDA BRUCE
S.S. 140-56-1866
BUSINESS NAME BUWALDA CONCRETE INC
FEIN 650260007
BUSINESS ADDRESS 775 NE BAYBERRY LANE
JENSEN BCH FL 34957



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

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

STATE OF FLORIDA
DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY
DIVISION OF WORKERS' COMPENSATION



CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION
FROM FLORIDA WORKERS' COMPENSATION LAW

EFFECTIVE DATE 02/01/2002

EXPIRATION DATE 02/01/2004

EXEMPTED PERSON LAST NAME BUWALDA

FIRST NAME BRUCE

SOCIAL SECURITY NUMBER 140-56-1866

BUSINESS NAME BUWALDA CONCRETE INC

FEDERAL IDENTIFICATION NUMBER 650260007

BUSINESS ADDRESS 775 NE BAYBERRY LANE

JENSEN BCH FL 34957

F
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E

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

CUT HERE

* Carry bottom portion on the job, keep upper portion for your records.

RECEIVED
JUN 23 2003
BY: _____



MARTIN COUNTY, FLORIDA
Construction Industry Lic Bd
Certificate of Competency

License: SP01760
Expires September 30, 2003

BUWALDA, BRUCE
BUWALDA'S CONCRETE INC
775 NE BAYBERRY LANE
JENSEN BCH, FL 34957
CONCRETE FORMING & FINISHING

ACCURIGHT LAND SURVEYING, INC

1501 DECKER AVENUE, SUITE 419,
STUART, FL. 34994
PHONE # (772) 286-7694 FAX # (772) 220-7993

Mr. Gene Simmons
Town Of Sewall's Point
Building Department

Re: Lot 26, "Emarita Subdivision"

Sir,

As per your request regarding clarification on impervious area calculations, existing driveway area was included because our field crew indicated that broken asphalt lies under the existing gravel. The property owner stated that he was proposing a concrete drive in place of the existing one. Therefore our previous calculations based on field locations are accurate for the new construction.

Truly,



Earle R. Starkey,
P.L.S. #004459

cc: David Russell

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7/9, 2003 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6315	RUSSELL	PRE-POUR	Passed	
	47 S. Sewall's Polo Drive	DRIVEWAY		
	BOWALDAS CON.			INSPECTOR: <i>[Signature]</i>
6131	PFEIFFER	TIE BEAM +		9 ⁰⁰
	104 HENRY SEWALL	COLUMNS	Partial	11 ³⁰
	BURFORD			INSPECTOR: <i>[Signature]</i>
6319	I YO WEST	GENERAL?	Passed	10 ⁵⁰
	7 PALMETTO DR	FRAME INSP.		
	J. CONROY			INSPECTOR: <i>[Signature]</i>
6287	MCCAFFREY	STUCCO	Confusion - recall	
	4 MICHAEL ROAD	FINAL?	- roof ??	
	GB CONSTRUCTION	(knowles)		INSPECTOR: <i>[Signature]</i>
6092	PLITT	PLUMBING &	Passed	
	12 HERON'S NEST	ELEC ROUGH IN	Failed	
		KITCHEN		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7/16, 20013 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5951	KAPLAN 10 E. HIGH POINT PACIFIC ROOFING	ROOF FINAL	Failed	(9am) under sp... w... INSPECTOR: [Signature]
5875	MAXSON 9 S. RIVER KNEPPER	SITE COMPLIANCE	Passed	INSPECTOR: [Signature]
6301	SMITH 7 SIMARA ST WILCO CONST.	SEWALL CAP	Passed	(Partial) INSPECTOR: [Signature]
TREE	SLATER 4 NE LAGOON ISLT	TREE	Passed	INSPECTOR: [Signature]
6307	BEHRINGER 18 INDIALUCIE AMERICAN FENCE	FENCE FINAL	Passed	close INSPECTOR: [Signature]
6315	RUSSELL 47 S. SEWALL'S PKWY BUWALDA	DRIVEWAY FINAL	Passed	close INSPECTOR: [Signature]
				INSPECTOR: [Signature]

OTHER:

6978

FENCE REPAIR

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 10/26/04

BUILDING PERMIT NO. 6978

Building to be erected for CARNEY

Type of Permit FENCE REPAIR

Applied for by O/B (Contractor)

Subdivision EMARITA Lot 26 Block _____

Address 47 S. SEWALL'S POINT RD

Type of structure _____

Building Fee _____

Radon Fee _____

Impact Fee _____

A/C Fee _____

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Parcel Control Number:
138410050000026020000

Amount Paid 30.00 Check # _____ Cash _____ Other Fees (_____) 30.00

Total Construction Cost \$ 5000.00 TOTAL Fees 30.00

Signed Paul W. Carney
Applicant

Signed Gene Simmons
Town Building Official

PERMIT

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

INSPECTIONS

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

RECEIVED

Date: OCT 20 2004
10-20-04

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: CARL W. CATHEY Phone (Day) 220-8743 (Fax) _____

Job Site Address: #47 S. SEWALLS PT. RD City: STUART State: FL Zip: 34996

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

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

Description of Work To Be Done: P.V.C. FENCE REPLACING OLD WOOD FENCE

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES: WITH MINOR CHANGES

Estimated Cost of Construction or Improvements: \$ 5,000
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ SAME

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)
Carl W. Cathey

State of Florida, County of: MARTIN

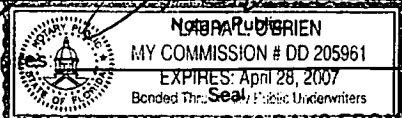
This the 20th day of October, 2004

by CARL CATHEY who is personally

known to me or produced FLD 3921-092-0

as identification. [Signature] *3/17/09

My Commission Expires: _____



CONTRACTOR SIGNATURE (required)

On State of Florida, County of: _____

This the _____ day of _____, 200

by _____ who is personally

known to me or produced _____

As identification. _____

My Commission Expires: _____

Notary Public

Seal

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

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF _____

COUNTY OF _____

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

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

LOT 26 "EMERALD" 2105 BOOK 3, PAGE 86 PUBLIC RECORDS OF MARTIN COUNTY, FL.

GENERAL DESCRIPTION OF IMPROVEMENT: REPLACE OLD FENCE (STORM DAMAGE)

OWNER: CARL W. CATHEY

ADDRESS: 47 S. SEWALL PILOT ROAD

PHONE #: 210-8743

FAX #: 220-8743

CONTRACTOR: SELF

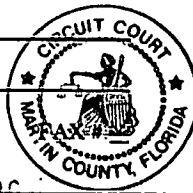
ADDRESS: _____

PHONE #: _____
STATE OF FLORIDA
MARTIN COUNTY

FAX #: _____

SURETY COMPANY (IF ANY)

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



INSTR # 1787839
OR BK 01950 PG 0062
RECORDED 10/25/2004 04:05:51 PM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY T Copus (asst mgr)

PHONE # _____
MARSHA EWING, CLERK

BOND AMOUNT: _____ BY T Copus

LENDER: _____ DATE 10-25-04

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

PHONE #: _____

FAX #: _____

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

Carl W. Cathey
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 21 DAY OF October

2004 BY Carl W. Cathey

PERSONALLY KNOWN _____
OR PRODUCED ID X
TYPE OF ID _____

Talisa Sandow
NOTARY SIGNATURE



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 though you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is 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: Carl W. Cathy Date: 10-25-04

Signature: Carl W. Cathy

Address: # 47 S. Sewall's Pt. Rd

City & State: Stuart, Fl.

Permit No. _____

FILE COPY
 TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE: 10/21/08
 BUILDING OFFICIAL
 Gene Simmons

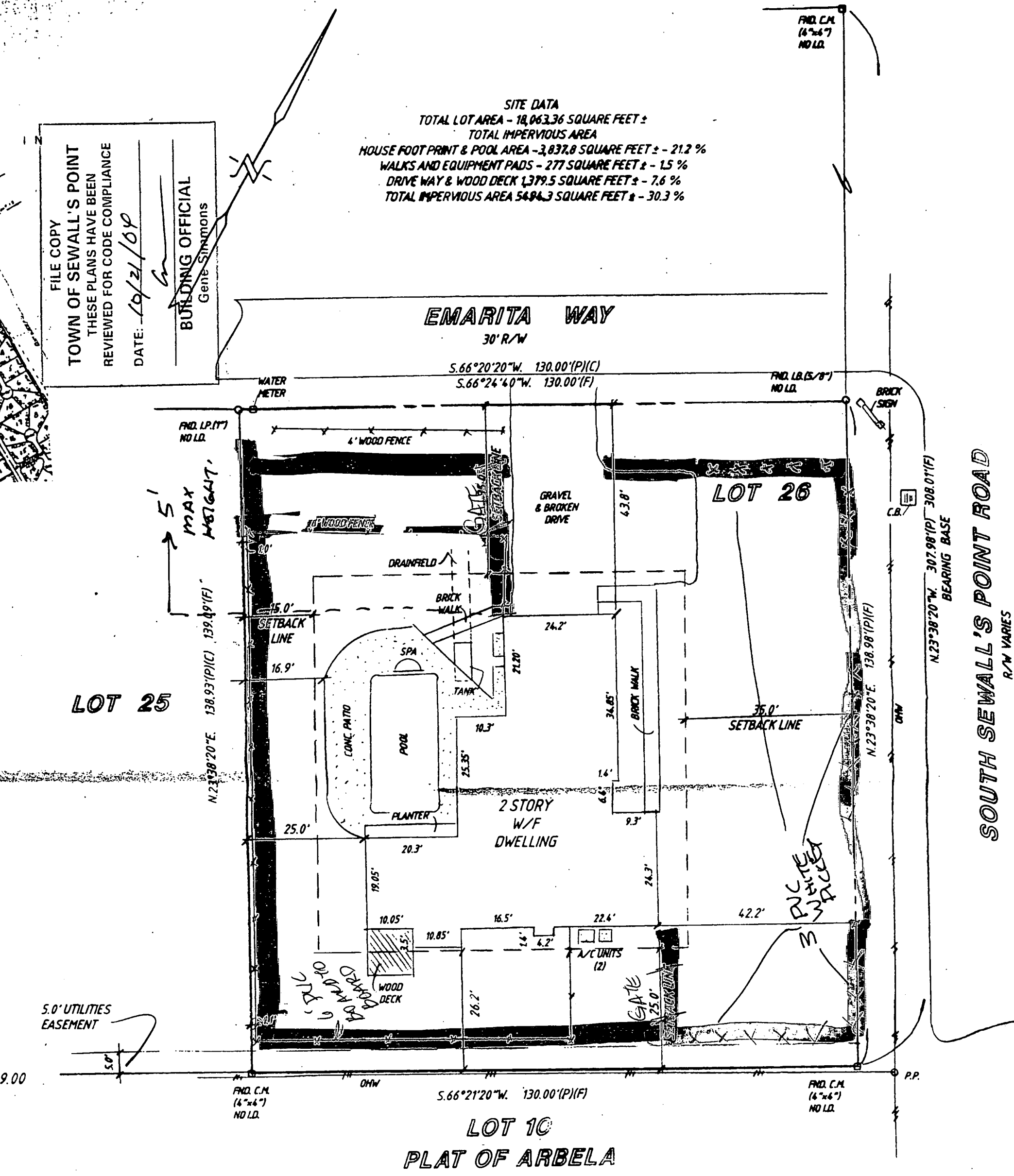
SITE DATA
 TOTAL LOT AREA - 18,063.36 SQUARE FEET ±
 TOTAL IMPERVIOUS AREA
 HOUSE FOOT PRINT & POOL AREA - 3,837.8 SQUARE FEET ± - 21.2 %
 WALKS AND EQUIPMENT PADS - 277 SQUARE FEET ± - 1.5 %
 DRIVE WAY & WOOD DECK 1,379.5 SQUARE FEET ± - 7.6 %
 TOTAL IMPERVIOUS AREA 5,494.3 SQUARE FEET ± - 30.3 %

EMARITA WAY
 30' R/W

LOT 25
 N.23°38'20"E. 138.93'(P)(C) 139.09'(F)
 5' MAX HEIGHT

LOT 26

SOUTH SEWALL'S POINT ROAD
 R/W VARIES



LOT 10
PLAT OF ARBELA

SURVEYOR'S NOTES

1. SURVEY OF DESCRIPTION AS FURNISHED BY CLIENT, UNLESS OTHERWISE NOTED.
2. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS, BUILDING SETBACKS AND/OR RIGHTS-OF-WAY OF RECORD BY ACCURIGHT LAND SURVEYING INC.
3. ALL BEARINGS ARE REFERENCED TO THE INSTRUMENT OF RECORD AS SHOWN HEREON, UNLESS OTHERWISE NOTED.
4. ELEVATIONS SHOWN HEREON ARE RELATIVE TO NATIONAL GEODETIC VERTICAL DATUM OF 1929, SEE SURVEY FOR REFERENCE BENCH MARK, UNLESS OTHERWISE NOTED.
5. THERE ARE NO ABOVE GROUND ENCROACHMENTS, UNLESS OTHERWISE NOTED.

NOT VALID WITHOUT THE SIGNATURE
 ORIGINAL RAISED SEAL OF A FLORIDA LICENSE

- POINT OF COMMENCEMENT
- POINT OF BEGINNING
- ENCROACHMENT
- NO IDENTIFICATION NUMBER
- N & W - NAIL & WASHER
- N & TT - NAIL & TIN TAB
- M.H. - MANHOLE
- C.B. - CATCH BASIN

SYMBOLS

ACCURIGHT LAND SURVEYING
 LICENSED BUSINESS NO. 660

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1-15, 2007

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7015	Cathay	Fill Final	PASS	CLOSE
3	475 Sewalls Pt O/B			INSPECTOR: <i>QW</i>
10978	Cathay	Fence repair final	PASS	CLOSE
3	475 Sewalls Pt O/B			INSPECTOR: <i>QW</i>
Tree	Ronan 14 Copaire Rd O/B	Tree	PASS	INSPECTOR: <i>QW</i>
8441	Dressler 12 Island Rd Harbor Course	Stem wall & columns	PASS	INSPECTOR: <i>QW</i>
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:

OTHER: _____

7015

FILL

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 11/3/04

BUILDING PERMIT NO. 7.015

Building to be erected for CATHEY Type of Permit FILL

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

Subdivision EMARITA Lot 26 Block _____ Radon Fee _____

Address 47 S. SEWALL'S POINT ROAD Impact Fee N/C

Type of structure SFR A/C Fee HURRICANE

Parcel Control Number: _____ Plumbing Fee _____

138410050000026020000 Roofing Fee _____

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

Total Construction Cost \$ 100.00 TOTAL Fees _____

Signed Carl to Cathey
Applicant

Signed Gene Simmons (907)
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 checked="" 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 _____ |

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

Date: 11-2-04

OWNER/TITLEHOLDER NAME: CARL W CATHEY Phone (Day) 820-8743 (Fax) _____

Job Site Address: HT S. SEWALL'S PT-RD City: STUART State: FL Zip: 34996

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

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

Description of Work To Be Done: FILL FOR HOURLY DAMAGE REMOVAL

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 100

(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: 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)
Carl W. Cathey

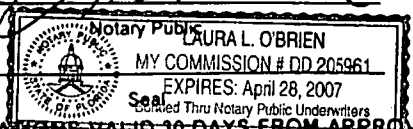
State of Florida, County of: Martin

This the 2ND day of NOVEMBER, 2004

by CARL CATHEY who is personally

known to me or produced as identification. Jura L. O'Brien

My Commission Expires: _____



CONTRACTOR SIGNATURE (required)

On State of Florida, County of: _____

This the _____ day of _____, 200__

by _____ who is personally

known to me or produced as identification. _____

My Commission Expires: _____

Notary Public

Seal

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 though you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is 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: CARL W CATHEY, Date: 11-3-04

Signature: Carl W Cathey

Address: 47 Sewall's Pt Rd

City & State: Stuart

Permit No. _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1-15, 2007

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7015	Cattay	Final	PASS	CLOSE
3	475 Sewalls Pt OB			INSPECTOR: <i>[Signature]</i>
6918	Cattay	Fence repair	Final PASS	CLOSE
3	475 Sewalls Pt OB			INSPECTOR: <i>[Signature]</i>
Tree	Ronan	Tree	PASS	
	14 Copaire Rd OB			INSPECTOR: <i>[Signature]</i>
8441	Dressler	Stem wall & columns	PASS	
	12 Island Rd Harbor Course			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

7777

REMODEL

TOWN OF SEWALL'S POINT

Date 9-23-05

BUILDING PERMIT NO. 7777

Building to be erected for CATHEY

Type of Permit LOGGIA, FRONT PORCH ATTACHED STORAGE SHER.

Applied for by DRIFTWOOD HOMES

(Contractor) Building Fee \$12K x 9.60/1000 = 1075.20

Subdivision EMARITA Lot 26 Block _____

Radon Fee _____

Address 47 S. SEWALL'S POINT RD

Impact Fee _____

Type of structure SFR

A/C Fee 35.00

Parcel Control Number:

0138410050000026020000

Electrical Fee 35.00

Plumbing Fee 35.00

Roofing Fee 35.00

Amount Paid 1336.72 Check # 14907 Cash _____

Other Fees (10% P.R.) 121.52

Total Construction Cost \$ 117,000.

TOTAL Fees 1336.72

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9/16/05

BUILDING PERMIT NO. 7778

Building to be erected for CATHEY

Type of Permit SUB-ELECTRICAL

Applied for by HERITAGE ELECTRIC (Contractor)

Building Fee _____

Subdivision EMARITA Lot 26 Block _____

Radon Fee _____

Address 47 S. SEWALL'S PT RD

Impact Fee _____

Type of structure SFR

A/C Fee _____

PRINT QUAL. NAME: WAYNE E GARBER

Electrical Fee _____

Parcel Control Number: St. Lic #: ER # 0011355

Plumbing Fee _____

0138410050000026020000

Roofing Fee _____

Amount Paid Check # Cash _____ Other Fees (_____)

Total Construction Cost \$ _____ TOTAL Fees _____

Signed Wayne E Garber
Applicant

Signed Gene Simmons
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 _____

MASTER PERMIT NO. 7777

TOWN OF SEWALL'S POINT

Date 9-15-05

BUILDING PERMIT NO. 7779

Building to be erected for CATHEY

Type of Permit SUB-AIC

Applied for by ASSOCIATED AIR (Contractor)

Building Fee _____

Subdivision EMARITA Lot 26 Block _____

Radon Fee _____

Address 47 S. Sewall's Pt Rd

Impact Fee _____

Type of structure SFR

AC Fee Job

PRINT Owner NAME: MICHAEL A KREWIK

Electrical Fee PN 7777

Parcel Control Number: SLIC#: CAC057622

Plumbing Fee _____

0138410050000026020000

Roofing Fee _____

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

Total Construction Cost \$ _____ TOTAL Fees _____

Signed Michael Krewik

Applicant

Signed Gene Simon

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 _____

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9-15-05

BUILDING PERMIT NO. 7780

Building to be erected for CATHEY

Type of Permit SUB-PLUMBING

Applied for by SOUTA PARK PLUMBING (Contractor)

Building Fee _____

Subdivision EMALITA Lot 26 Block _____

Radon Fee _____

Address 47 S. SEWALL'S POINT RD

Impact Fee _____

Type of structure SFR

A/C Fee See

PRINT QUAL. NAME: DELBERT W KETTER, JR

Electrical Fee PN 7777

Parcel Control Number: Split # CFC029690

Plumbing Fee _____

0138410050000026020000

Roofing Fee _____

Amount Paid Check # Cash _____ Other Fees (_____)

Total Construction Cost \$ _____

TOTAL Fees _____

Signed Delbert W Ketter, Jr
Applicant

Signed Gene Simmons
Town Building Official

PERMIT

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

INSPECTIONS

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

TOWN OF SEWALL'S POINT

Date 9-19-05

BUILDING PERMIT NO. 7781

Building to be erected for CATHERY

Type of Permit SUB-ROOFING

Applied for by PACIFIC ROOFING (Contractor)

Building Fee _____

Subdivision EMARITA Lot 26 Block _____

Radon Fee _____

Address 47 S. Sewall's Point Road

Impact Fee _____

Type of structure SFR

A/C Fee 250

PRINT QUAL. NAME: Richard J. Gons

Electrical Fee PN 777

Parcel Control Number: St. Lic #: CC-0056293

Plumbing Fee _____

0138410050000026020000

Roofing Fee _____

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

Total Construction Cost \$ _____ TOTAL Fees _____

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

INSPECTIONS

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

Renewal: 9/23/06 to 12/23/06 \$1.2150/mo x 3 = \$364.50

C

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9-23-05

BUILDING PERMIT NO. 7777

Building to be erected for CATHEY

Type of Permit LOGGIA, FRONT PORCH ATTACHED STORAGE SHE

Applied for by DRIFTWOOD HOMES

(Contractor) Building Fee \$112K x 9.60/1000 = 1075.20

Subdivision EMARITA Lot 26 Block _____

Radon Fee _____

Address 47 S. SEWALL'S POINT RD

Impact Fee _____

Type of structure SFR

AC Fee 35.00

Parcel Control Number:

0138410050000026020000

Electrical Fee 35.00

Plumbing Fee 35.00

Roofing Fee 35.00

Amount Paid 1336.72 Check # 14907 Cash _____

Other Fees (10% P.R.) 121.52

Total Construction Cost \$ 117,000.

TOTAL Fees 1336.72

Signed

Applicant

Signed

Town Building Official



DRIFTWOOD HOMES
ALAN B. MORRIS
(772) 334-2577
2163 N.E. PINE RIDGE ST.
JENSEN BEACH, FL 34957

16395

12/12/2006

PAY TO THE ORDER OF

Town Of Sewalls Point

\$ **364.50

Three Hundred Sixty-Four and 50/100***** DOLLARS

Town Of Sewalls Point

MEMO

Renewal: 9/23/06 to 12/23/06 \$12150/mo x 3 = \$36450
Renewal 12/23/06 to 4/23/07 \$12150

C

MASTER PERMIT NO. _____

16481

TOWN OF SEWALL'S POINT

Date 9-23-05

BUILDING PERMIT NO. 7777

Building to be erected for CATHEY

Type of Permit LOGGIA, FRONT PORCH, ATTACHED STORAGE

Applied for by DRIFTWOOD HOMES

(Contractor) Building Fee \$112K x 9.60/1000 = 1075.20

Subdivision EMARITA Lot 26 Block _____

Radon Fee _____

Address 47 S. SEWALL'S POINT RD

Impact Fee _____

Type of structure SF12

A/C Fee 35.00

Parcel Control Number:

0138410050000026020000

Electrical Fee 35.00

Plumbing Fee 35.00

Roofing Fee 35.00

Amount Paid 1336.72 Check # 14907 Cash _____

Other Fees (10% P.R.) 121.52

Total Construction Cost \$ 117,000

TOTAL Fees 1336.72

Signed [Signature]

Applicant

Signed [Signature]

Town Building Official



DRIFTWOOD HOMES
ALAN B. MORRIS
(772) 334-2577
2163 N.E. PINE RIDGE ST.
JENSEN BEACH, FL 34957



16481

1/12/2007

PAY TO THE ORDER OF Town Of Sewalls Point

**\$121.50

One Hundred Twenty-One and 50/100 ***** DOLLARS

Town Of Sewalls Point

MEMO



[Signature]

NOTICE OF AD VALOREM TAXES & NON-AD VALOREM ASSESSMENTS

57518

ORIGINAL FOR MARTIN COUNTY REAL ESTATE

I.D. NUMBER: 1-38-41-005-000-00260.20000 2004 TAX DISTRICT: 2200
 ASSESSED VALUE: 349,080 EXEMPTIONS: 00 TAXABLE VALUE: 349,080

TAXING AUTHORITY	MILLAGE RATE	TAX AMOUNT
JNTY COUNTY-GENERAL FUND-OP	5.2300	1,825.69
CNTY-GOVT BONDS 1986	.2130	74.35
CNTY-BONDS LANDS FOR YOU	.1150	40.14
CNTY-F.I.T. BOND	.0440	15.36
SCHOOL SCHOOL-GENERAL FUND	7.5920	2,650.22
CHLD SVC CHILDRENS SERVICES ORDNCS	.3337	116.49
F.I.N.D. FL-INLAND NAVIGATION DIST	.0385	13.44
CITY SEWALLS POINT	1.8890	659.41
S.F.W.M. SOUTH FLA WATER MANAGEMNT	.6970	243.31

TOTAL MILLAGE 16.15220 AD VALOREM TAXES 5,638.41

NON-AD VALOREM ASSESSMENTS

COMBINED TAXES & ASSESSMENTS TOTAL: 5,638.41

EXEMPTION: NONE

01 38 41
EMARITA, LOT 26

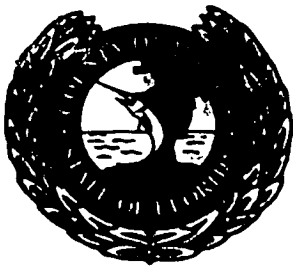
PROPERTY
DR: 47 SE SEWALLS PT RD



1-38-41-005-000-00260.20000 2004
 CATHEY, CARL W & GLORIA A
 6131 ISLAND HARBOR RD
 SEBASTIAN FL 32958-4710

*1-26-05
479*

NOV 1-NOV 30 5,412.87 DEC 1-DEC 31 5,469.26 JAN 1-JAN 31 5,525.64 FEB 1-FEB 28 5,582.03 MAR 1-MAR 31 5,638.41 DELINQUENT ON APRIL 1, 2005
 *SEE REVERSE SIDE FOR INSTRUCTIONS. PLEASE DETACH AND RETURN BOTTOM PORTION WITH YOUR CHECK.



Martin County Building Department

2401 SE Monterey Road

Stuart, FL 34996

(772) 288-5916

MORRIS, ALAN B
DRIFTWOOD HOMES
2163 NE PINE RIDGE ST
JENSEN BEACH, FL 34957

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**

RESIDENTIAL CONTRACTOR MARTIN COUNTY

License Number MC00089 Expires: 30-SEP-05

MORRIS, ALAN B
DRIFTWOOD HOMES
2163 NE PINE RIDGE ST
JENSEN BEACH, FL 34957



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

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

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

DETACH HERE

AC# 1001407

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L03080701826

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

The RESIDENTIAL CONTRACTOR
Named below HAS REGISTERED
Under the provisions of Chapter 489
Expiration date: AUG 31, 2005
(INDIVIDUAL MUST MEET ALL LOCAL
REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)

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



JEB BUSH
GOVERNOR

DIANE CARR
SECRETARY

DISPLAY AS REQUIRED BY LAW

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05-31-05

PRODUCER Kearns Agency of Florida Inc. P O Box 1849 Jensen Beach, Fl. 34958	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
INSURED Heritage Electric Inc. P O Box 1003 Jensen Beach, Fl. 34958-1003	INSURER A: Southern Owners Insurance Co.
	INSURER B: Auto-Owners Insurance Co.
	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	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"/> CLASS'S MADE <input checked="" type="checkbox"/> OCCUR GENTL AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	20634782-04	02-01-05	02-01-06	EACH OCCURRENCE \$ 300,000
	FIRE DAMAGE (Any one fire) \$ 100,000				
	MED EXP (Any one person) \$ 10,000				
	PERSONAL & ADV INJURY \$ 300,000				
	GENERAL AGGREGATE \$ 300,000				
	PRODUCTS - COMP/OP AGG \$ 300,000				
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	95-434-704-00	02-01-05	02-01-06	COMBINED SINGLE LIMIT (Ea accident) \$ 300,000
	BODILY INJURY (Per person) \$				
	BODILY INJURY (Per accident) \$				
	PROPERTY DAMAGE (Per accident) \$				
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				<input type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

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

Electrical - State of Florida

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

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/19/2005

PRODUCER (772)334-3181 FAX (772)334-7742
 Rick Carroll Insurance Agency
 2160 N.E. Dixie Highway
 P.O. Box 877
 Jensen Beach, FL 34958-0877

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

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: Bridgefield Casualty Ins Co

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	ADD'L INSR	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	\$
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
						MED EXP (Any one person)	\$
						PERSONAL & ADV INJURY	\$
						GENERAL AGGREGATE	\$
						PRODUCTS - COMP/OP AGG	\$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS _____				COMBINED SINGLE LIMIT (Ea accident)	\$
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
		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 OTHER	BINDER/WORK COMP	07/19/2005	07/19/2006	WC STATUTORY LIMITS	OT-HER
						E.L. EACH ACCIDENT	\$ 100,000
						E.L. DISEASE - EA EMPLOYEE	\$ 100,000
						E.L. DISEASE - POLICY LIMIT	\$ 500,000

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

THIS CERTIFICATE IS FOR PROOF OF INSURANCE ONLY.

CERTIFICATE HOLDER

Town of Sewalls Point
 1 Sewalls Pt Road
 Stuart, FL 34996

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Keith Carroll/LAG



1460897

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# L04062303151

DATE	BATCH NUMBER	LICENSE NBR
6/23/2004	030740979	ER0011355



The ELECTRICAL CONTRACTOR
Named below HAS REGISTERED
Under the provisions of Chapter 488, F.S.
Expiration date: AUG 31, 2006
(INDIVIDUAL MUST MEET ALL LOCAL LICENSING
REQUIREMENTS PRIOR TO CONTRACTING)

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

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

BOX 1003
JENSEN BEACH

KIM BINKLEY-SEYER
SECRETARY

DISPLAY AS REQUIRED BY LAW

0453984

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# L02061101407

DATE	BATCH NUMBER	LICENSE NUMBER
06/30/2002	011131171	ER0010356 ME00094


THE ELECTRICAL CONTRACTOR, **GARBER WAYNE E**
 Named below HAS REGISTERED
 Under the provisions of Chapter 489 FS
 Expiration date: AUG 31, 2005
 (INDIVIDUAL MUST MEET ALL LOCAL LICENSING
 REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)

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

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER
SECRETARY



MARTIN COUNTY, FLORIDA
 Construction Industry Licensing Board
 Certificate of Competency

MASTER ELECTRICIAN

License Number ME00094 Expires 30-SEP-05

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

ACORD. CERTIFICATE OF INSURANCE

DATE (MM/DD/YY)

05-11-05

PRODUCER

RICK CARROLL INS AGCY
2160 NE DIXIE HWY

JENSEN BEACH

FL 349570877

2948J

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 FLORIDA W.C. JUA

COMPANY

B

COMPANY

C

COMPANY

D

INSURED

DRIFTWOOD HOMES LLC DBA
DRIFTWOOD HOMES & IMPROVEMENTS
2163 PINE RIDGE STREET
JENSEN BEACH FL 34957

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
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR. <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT.				GENERAL AGGREGATE \$ PRODUCTS-COMP/OP AGG. \$ PERSONAL & ADV. INJURY \$ EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED. EXPENSE (Any one person) \$
	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 \$ BODILY INJURY (Per Person) \$ BODILY INJURY (Per Accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
A	WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input checked="" type="checkbox"/> INCL <input type="checkbox"/> EXCL	(UB-7261831-6-05)	04-22-05	04-22-06	STATUTORY LIMITS EACH ACCIDENT \$ 100,000 DISEASE - POLICY LIMIT \$ 500,000 DISEASE - EACH EMPLOYEE \$ 100,000
	OTHER				

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

MINIMUM PREMIUM POLICY

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

CERTIFICATE HOLDER

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

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Charles J. Clarke

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 06/10/2005

PRODUCER (772)567-1188 FAX (772)778-1416
 SCHLITT INSURANCE SERVICES INC
 1717 INDIAN RIVER BLVD
 SUITE 300
 VERO BEACH, FL 32960

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: Mid-Continent Casualty Company	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

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

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	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY	04GL000592819	06/13/2005	06/13/2006	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
	<input type="checkbox"/>	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ Excluded
						PERSONAL & ADV INJURY	\$ 1,000,000
						GENERAL AGGREGATE	\$ 2,000,000
						GEN'L AGGREGATE LIMIT APPLIES PER:	PRODUCTS - COMP/OP AGG	$ 2,000,000
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		<input type="checkbox"/> HIRED AUTOS					
		<input type="checkbox"/> NON-OWNED AUTOS					
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
		<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	\$
						AGG	\$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
							\$
		<input type="checkbox"/> DEDUCTIBLE					\$
		<input type="checkbox"/> RETENTION \$					\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
		OTHER				E.L. DISEASE - POLICY LIMIT	\$

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

CERTIFICATE HOLDER

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

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL 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
 Robert Schlitt Jr./LAR

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/07/2005

PRODUCER (772)231-2828 FAX (772)231-4413
Felten & Associates
2911 Cardinal Drive (32963)
P.O. Box 3488
Vero Beach, FL 32964-3488

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 Associated Air of Port St. Lucie, Inc.
1538 SE Niemeyer Circle
Port St. Lucie, FL 34952

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: American States Insurance Co.	09084
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 INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	01CG84841310	07/10/2005	07/10/2006	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ Included
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$
					PERSONAL & ADV INJURY	\$
					GENERAL AGGREGATE	\$ 2,000,000
					PRODUCTS - COMP/OP AGG	\$ 2,000,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC	
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS					
	<input type="checkbox"/> NON-OWNED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$
					AUTO ONLY: AGG	\$
	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
						\$
						\$
						\$
						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
	OTHER					

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

CERTIFICATE HOLDER

CITY OF SEWALL'S POINT
1 SEAWALL'S POINT ROAD
SEWALL'S POINT, FL

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Kenneth D. Felten, LUTCF/SG 

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID SE
SOUTP-1

DATE (MM/DD/YYYY)
08/16/05

PRODUCER Stuart Insurance, Inc. 3070 S W Mapp Palm City FL 34990 Phone: 772-286-4334 Fax: 772-286-9389	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 Park Plumbing, Inc. of Martin County P. O. Box 768 Port Salerno FL 34992	INSURER A: Assurance Company of America	19305
	INSURER B: Old Dominion Insurance Company	40231
	INSURER C: Bridgefield Employers Ins. Co.	
	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 INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A B	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	SCP32908593	03/20/05	07/06/05	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000
	<input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	MPG71944	07/06/05	07/06/06	PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 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 EA ACC \$ AUTO ONLY: AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	830-22064	08/17/05	08/17/06	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Plumbing / State of Florida

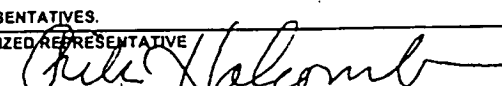
CERTIFICATE HOLDER

SEWAP-1

Sewalls Point Building Dept.
 1 S Sewalls Point Road
 Stuart FL 34996

CANCELLATION

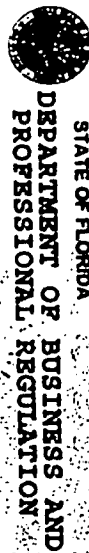
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS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

AUTHORIZED REPRESENTATIVE


DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CFC1426656 04/07/05 040818085
 CERTIFIED PLUMBING CONTRACTOR
 WINTERCORN, JASON THOMAS
 SOUTH PARK PLUMBING INC OF MARTIN

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



AC# 1972011

QB0014990 04/07/05 030730450

QUALIFIED BUSINESS ORGANIZATION
 SOUTH PARK PLUMBING INC OF MARTIN

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

IS QUALIFIED under the provisions of Ch. 489 FS.
 Expiration date: AUG 31, 2005 L05040703858

AC# 1972011

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L0504070385

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

The BUSINESS ORGANIZATION
 Named below IS QUALIFIED
 Under the provisions of Chapter 489 FS.
 Expiration date: AUG 31, 2005
 (THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
 COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)

SOUTH PARK PLUMBING INC OF MARTIN COUNTY
 4505 SE DIXIE HIGHWAY
 STUART FL 34997

JEB BUSH
 GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
 SECRETARY

AC# 1968390

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L0504070023

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

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

WINTERCORN, JASON THOMAS
 SOUTH PARK PLUMBING INC OF MARTIN COUNTY
 4505 S DIXIE HWY
 STUART FL 34997

JEB BUSH

DIANE CARR

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 1973-524-045 CERT CFC051458
PHONE (561)287-2548 SEC NO 235110

LOCATION:
4505 SE DIXIE HWY MAR

CHARACTER COUNTS IN MARTIN COUNTY

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

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

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

19 DAY OF AUGUST 05
AND ENDING SEPTEMBER 30, 2006

12 05081901 004609

WINTERCORN, THOMAS R
SOUTH PARK PLUMBING
PO BOX 768
PT SALERNO FL 34992

AACORD CERTIFICATE OF LIABILITY INSURANCE

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

PHONE (561)746-4546 FAX (561)746-9599

Tequesta Agency, Inc.
218 S. US Highway One, Ste 300
Tequesta, FL 33469
Debra Hicks-Neumann

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 Pacific Roofing Corp., Inc.
PO Box 2697
Stuart, FL 34994

INSURER A: Lexington

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 INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	GLB11192004	12/12/2004	12/12/2005	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ Excluded
					PERSONAL & ADV INJURY \$ 1,000,000
					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMP/OP AGG \$ 2,000,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				
	<input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
					\$
					\$
					\$
					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$
					E.L. DISEASE - POLICY LIMIT \$
	OTHER				

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

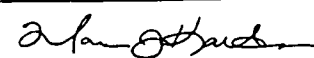
CERTIFICATE HOLDER

Sewalls Point Building Dept
1 Sewalls Point Road
Sewalls Pont, FL 34996

CANCELLATION

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

AUTHORIZED REPRESENTATIVE
Mark Kasten/DEBBIE



ACORD CERTIFICATE OF LIABILITY INSURANCE		CERTIFICATE NO. / DATE AC09-7900013-176426 12/8/2004 9:42:55 AM
PRODUCER Eisenmann Risk Placements, Inc. 14160 Dallas Parkway, Suite 500 Dallas, TX 75254 (972) 764-0965 Fax: (972) 404-4450	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		
INSURED PACIFIC ROOFING CORPORATION 808 SE DIXIE HWY STUART, FL 34994 (772) 283-7663 Fax: (772) 283-9505	INSURER A: PROVIDENCE PROPERTY & CASUALTY INSURANCE COMPA INSURER B: INSURER C: INSURER D: INSURER E:	

COVERAGES

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

TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any One Fire) \$
	<input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				MED EXP (Any one person) \$
					PERSONAL & ADV INJURY \$
					GENERAL AGGREGATE \$
	GEN'L AGGREGATE LIMIT APPLIES PER				PRODUCTS - COMP/PROP ACC \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PER- SON <input type="checkbox"/> LOC				
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HERED AUTOS				
	<input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY AGG \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
					\$
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC0100086	12/1/2004	12/1/2005	X WC STATU- TORY LIMITS
					OTHER
					E.L. EACH ACCIDENT \$ 1000000
					E.L. DISEASE - EA EMPLOYEE \$ 1000000
					E.L. DISEASE - POLICY LIMIT \$ 1000000
	OTHER				LIMITS \$
					LIMITS \$
					LIMITS \$

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

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

PLEASE SEE ATTACHED EMPLOYEE ROSTER.

CERTIFICATE HOLDER	ADDITIONAL INSURED, INSURER LETTER:	CANCELLATION
Sewalls Point Building Department 1 South Sewalls Point Road 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. AUTHORIZED REPRESENTATIVE

CERTIFICATE OF LIABILITY INSURANCE EMPLOYEE ROSTER

Certificate Number: AC04-7900013-176426

Attached roster includes employees paid through 11/28/2004. To verify employee's who may have been added since 11/28/2004, please call 1-800-728-4623.

* Please note employee roster for this client is updated on a WEEKLY basis.

EMPLOYEE LIST:

AGUILAR, LUIZ O
 ARRANDALE, GLENN T
 ARRANDALE, SHAWN G
 Austin, Robert
 Austin, Terry
 BUCHOLZ, JOHN
 Castro, Reinaldo
 COCKERHAM, BENNIE D
 Cowboy, Gary
 Destine, Maglot
 EDGECOMS, DESMOND C
 ENS, DEANA P
 GOMES, DWAN E
 Gomez, Mario
 Gomez, Richard John
 HERNANDEZ, PREDY
 Hernandez, Martin
 Heysquierdo, Richard
 JACK, KATIE M
 JAFFRES, CHRISTINE
 JOSEPH, JEAN
 LOPEZ, CESAR
 Lovitt, Bonnie
 MANGILAR, ALFONSO
 MEDINO, REYNE RIO
 MENDOZA, ERICK E
 MEYER, RICHARD P
 Nickerson, James
 Pincetti, Camerino
 RAMIREZ, JOHNNIE
 RAMOS, JUAN
 RIVAS, JUAN POSADA
 THREEWITTS, LANCE H
 TORRES, JUAN M
 Torres, Pedro
 VALDEZ, VALENTINE
 VELASQUEZ JR., ROBERT
 VOISINET, BRIAN A
 Weaver, Dennis
 WEAVER, RYAN
 WEAVER, SCOTT
 WOODS, GARY S



DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

GOMES, RICHARD JOHN
PACIFIC ROOFING CORP
PO BOX 2697
STUART

FL 34995

STATE OF FLORIDA AC#1601424
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CCC056793 09/11/04 040233678
 CERTIFIED ROOFING CONTRACTOR
 GOMES, RICHARD JOHN
 PACIFIC ROOFING CORP
 IS CERTIFIED under the provisions of Ch. 489 FS.
 Expiration date: AUG 31, 2006 L04091102194

DETACH HERE

AC#1601424

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L04091102194

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

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

GOMES, RICHARD JOHN
PACIFIC ROOFING CORP
PO BOX 2697
STUART

FL 34995

JEB BUSH
GOVERNOR

DIANE CARR



Development Department

121 SW Flagler Avenue - Stuart, Florida 34994-2139

Phone (772)288-5326 Fax (772)288-5388

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

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

Certificate of Insurance

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

Named Insured(s):

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

MARSH

Insurer Affording Coverage

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

Coverages:

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

Type of Insurance	Certificate Exp. Date <input type="checkbox"/> Continuous <input type="checkbox"/> Extended <input checked="" type="checkbox"/> Policy Term	Policy Number	Limits	
			Employers Liability	
Workers' Compensation	1-1-2006	RMWC330470 RMWC330495	Bodily Injury By Accident	Each Accident
			\$ 2,000,000	
			Bodily Injury By Disease	Policy Limit
			\$ 2,000,000	
			Bodily Injury By Disease	Each Person
			\$ 2,000,000	

Other:

Employees Leased To:

Effective Date: 1/1/05

15279 Associated Air of Port St. Lucie Inc.

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

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

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

Certificate Holder:



Michael C. Weiss
Authorized Representative of Marsh USA Inc.

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

(866) 443-8489
Phone

1/1/2005
Date Issued

AC#1540467

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L04081304065

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

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

KRENCIK, MICHAEL ANTHONY
INDIVIDUAL
3072 SE MORNINGSIDE BLVD
PT ST LUCIE FL 34952

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

2004-2005 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(772) 288-6604

LICENSE 1988-520-205 CERT _____
PHONE (561)335-7089 LIC NO 001711

LOCATION
1538 SE NIEMEYER CIR PSL

CHARACTER COUNTS IN MARTIN COUNTY

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

JERRY ANTHONY (OWN/QUAL)
 ASSOCIATED AIR OF PT ST LUCIE INC
 1538 NIEMEYER CIRCLE
 PT ST LUCIE FL 34952

CERT AIR COND CONTR/CLASS B

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

26 DAY OF AUGUST 04
AND ENDING SEPTEMBER 30, 2005

12 04082501 000438

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

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

PROJECT NAME AND ADDRESS

BUILDING DEPARTMENT USE ONLY

CATHEY REMODEL
47 SEWALLS PT. RD
SEWALLS PT, FL

BLDG. PERMIT # _____
OCCUPANCY TYPE _____
CONSTRUCTION TYPE _____

STATEMENT

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

BUILDING PARAMETERS AND ANALYSIS


**CODE EDITIONS: 2001 FLORIDA BUILDING CODE
CHAPTER 6 OF ASCE 7- 98**

Building Design as: Partially Enclosed Enclosed _____ Open _____ Wind Tunnel Test _____
 Basic Wind Speed: 140 MPH 3 Second Gusts Importance/Use Factor 1.0
 Velocity Pressure: 47 psf Garage Door Design Pressure: 47+(psf) (End Zone) _____+psf _____+psf
 Door Design Pressure (Int. Zone) NA +psf _____-psf (End Zone 49.18 +psf 92.08 -psf
 Window Design Pressure (Int. Zone) 49.18 +psf 49.18 -psf (End Zone _____+psf _____-psf
 Minimum Soil Bearing Pressure 2500 psf Exposure _____ Mean Building Height _____
 Floor Loads _____ Roof Dead Load _____ Shear Wall Considered Yes _____ No _____
 Continuous Load Path Provided Yes _____ No _____
 Components and Cladding Details Provided Yes _____ No _____
 Impact Protection (Exterior Openings): Approved Shutters _____ Impact Resistance Glass _____
(Must be indicated on permit documents for all residential/commerical buildings, alterations and renovations)

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

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

RICHARD TURNER
 REGISTRATION# AR 0011447
8/20/05
 FIRM: JW JOHNSON DESIGN


SEAL

8/23/05

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

APPLICANT/OWNER NAME: CAROL GLORIA CATHY Phone (Day) 220-8743 (Fax) _____

Address: 47 S. SEWALL PT RD. City: _____ State: _____ Zip: _____

Desc. Property (Subd/Lot/Block) LOT 26 EMARITA Parcel Number: 01-38-41-005-000-00260-2

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

Description of Work To Be Done: POOL COVER, FRONT PORCH, SITE

WILL OWNER BE THE CONTRACTOR?:

YES

NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 112,000.00
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: DRIFWOOD HOMES Phone: 334-2577 Fax: 334-5877

Street: 2163 PINE RIDGE ST City: JENSEN BCH State: FL Zip: 34957

State Registration Number: RR005678 State Certification Number: _____ Martin County License Number: MC00089

SUBCONTRACTOR INFORMATION:

Electrical: HERITAGE ELECTRIC State: ER0011355 License Number: ME00094

Mechanical: ASSOCIATED AIR State: CAE026432 License Number: _____

Plumbing: SOUTH PINE PLUMBING State: CFC029690 License Number: _____

Roofing: PACIFIC ROOFING State: CC056793 License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER R. QUINN TURNER Lic# 11447 Phone Number: 285-2372

Street: 7190 SE FEDERAL HIGHWAY SUITE 12 City: SUMNER State: FL Zip: 34997

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 91 Garage: _____ Covered Patios: 448 Screened Porch: 810

Carport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: 171

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

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

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

OWNER OR AGENT SIGNATURE (required)

Carol W. Cathy
State of Florida, County of: Martin

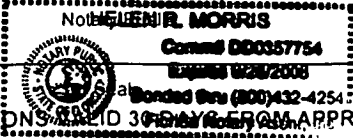
This the 22 day of August, 2005

by Carol W. Cathy who is personally

known to me or produced _____

as identification. Robert Morris

My Commission Expires: _____



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. _____

My Commission Expires: _____

Notary Public

Seal

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 01-38-41-005-000-00260-2

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):

47 S. SEWANUS PT RD, SEWANUS PT, FL LOT 26, EXH A PART A

GENERAL DESCRIPTION OF IMPROVEMENT: NEW PORCH, POOL AREA, S/HED

OWNER: CARL & GIORIA CATHEY

ADDRESS: 47 S. SEWANUS PT RD SEWANUS PT, FL 34994

PHONE #: 270-8743 FAX #: _____

CONTRACTOR: DRIFTWOOD HOMES

ADDRESS: 2163 PINE RIDGE ST JENSON BCH, FL 34957

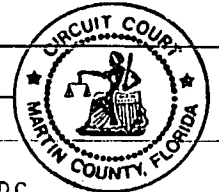
PHONE #: 334-2577 FAX #: 334-5877

SURETY COMPANY(IF ANY) N/A STATE OF FLORIDA

ADDRESS: _____ MARTIN COUNTY

PHONE # _____

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



MANCHA SEWING, CLERK
BY [Signature] DATE 11/16/07

D.C.

BOND AMOUNT: _____

LENDER: N/A

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

NAME: N/A

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

PHONE #: _____ FAX #: _____

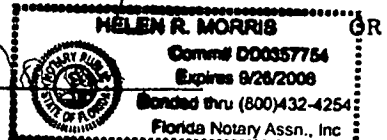
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____ THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 22 DAY OF August 2007 BY CARL W. CATHEY

PERSONALLY KNOWN [Signature]
PRODUCED ID _____
TYPE OF ID _____

[Signature]
NOTARY SIGNATURE



INSTR # 1985920 DR BK 02214 PG 0803 RECD 01/16/2007 10:50:36 AM
Pg 0803 (1 of 1)
MARSHA EMMING MARTIN COUNTY DEPUTY CLERK L WOOD

**R. Quinn Turner Architects
Design Consultants**

7190 S.E. FEDERAL HWY. (US #1) SUITE # 12
STUART, FLORIDA 34997
(772) 285-2372

4 February 2006

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

RE: Cathey Remodeling
49 Sewall's Point Road
Sewall's Point, Florida

Inspector,
General contractor to install the following connections:


- Typical 4 x 4 post base to be Simpson ABU 44 w/ 1/2" dia. thru-bolts.
Fill all holes w/ 8d nails.
- Typical 4 x 4 post cap to be Simpson BC4 w/ 1/2" dia. thru-bolts at post and header.
Fill all holes w/ 8d nails.
- Typical 4 x4 post connection to deck w/ 2-1/2" dia. carriage bolts.
- Typical 2 x 8 ledger to exist. wall connect w/ 2- 1/2" dia. x 7" wedge anchor bolts @ 24" o/c.
- Typical deck joists to ledger connect w/ Simpson LUS28 joist hanger.
- Typical knee wall to be 2 x 4 @ 24" o/c w/ double top plate and single base plate w/ SP4 straps top and bottom.
- Typical 2 x 6 rafters @ 24" o/c strap to knee wall and header w/ Simpson MST 12 fill all hole w/ 8d nails.
- Wall post at deck corner install 3-5/8" x 7" lag bolts.
- Cantilever balcony to 2 x 10 x 10' @ 16" o/c recess into exist. floor joists.
- Beam to wall bucket Simpson HUS121-2. Typical 4 x 4 post connection.
- Storage shed at rear of residence to be 2 x 4 studs @ 16" o/c w/ 2 x 4 PT plate w/ 1/2" dia. x 7" wedge anchor bolts @ 24" o/c. Install SP4 straps top & bottom plates. Install 2 x 8 ledger to wall w/ 1/2" dia x 6" lag bolts @ 32" o/c. Roof rafters to plate Simpson MST12. Fill all holes w/ 8d nails. Roof rafters to ledger w/ HUS28, fill all holes.
- Gable walls: SP2 bottom of studs and MST12 top to rafters or 18" flat strap.
- Existing trusses to new upturned double 2 x 12 beam @ front door Simpson HUS28 each truss beam to exterior wall, 2- MST12 each end.
- Existing residence: new window opening added refer to buck detail. Existing opening enclosed with 2x studs @ 16" o/c w/ Simpson SP2 @ top & SP1 @ bottom. Install 18" flat strap @ headers each end each side. MST12 @ floor joists to existing wall.

If you have any further questions please call.

Thank you,

R. Quinn Turner
Architect AR# 0011447

REVISION

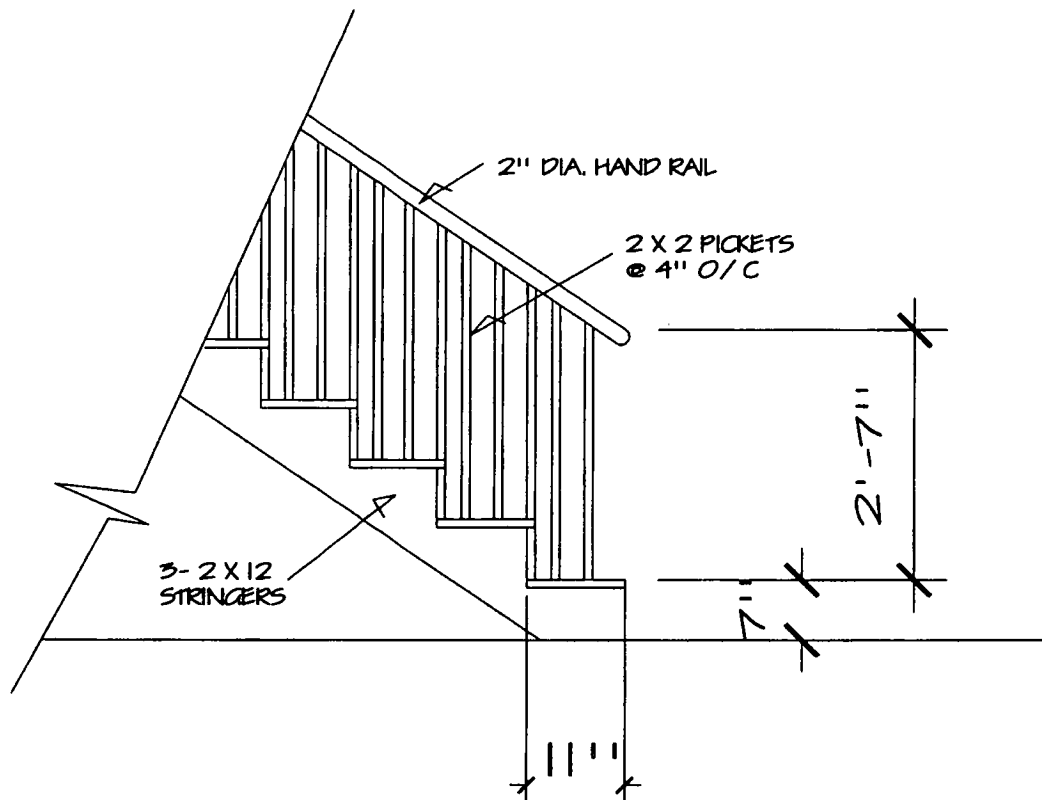
<p>FILE COPY TOWN OF SEWALL'S POINT THESE PLANS HAVE BEEN REVIEWED FOR CODE COMPLIANCE DATE: <u>2/24/06</u>  BUILDING OFFICIAL Gene Simmons</p>
--

DRAWING TO FOLLOW

J.W. JOHNSON
DESIGN CONSULTANTS

R. QUINN TURNER ARCHITECTS
7190 S.E. FEDERAL HWY. (US #1) SUITE #12
STUART, FLORIDA 34997 (772) 285-2372

CATHEY REMODELING
47 SEWALL'S POINT RD
SEWALLS POINT, FLORIDA



STAIR SECTION

SCALE:
1/2" = 1'-0"


ANG 30 2005



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

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

NOTICE OF ACCEPTANCE (NOA)

**PGT Industries
0170 Technology Drive
Nokomis, FL 34275**

SCOPE:

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

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

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

DESCRIPTION: Series "FD-101" Outswing Aluminum French Door

APPROVAL DOCUMENT: Drawing No. 944, titled "Aluminum French Door", sheets 1 through 5, prepared by manufacturer, dated 9/5/97 with revision "G" dated 04/23/04, signed and sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: None

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

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

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

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

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

This NOA revises NOA # 02-0625.01 and, consists of this page 1 and evidence page E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by **Herminio F. Gonzalez, P.E., Director, BCCO**



**NOA No 04-0203.01
Expiration Date: July 22, 2007
Approval Date: December 23, 2004
Page 1**

FEB 22 2002 10:35 FR OWENS CORNING

419 248 7357 TO 94193259444

P.01/03



MIAMI-DADE
 BUILDING CODE COMPLIANCE OFFICE (BCCO)
 PRODUCT CONTROL DIVISION

MIAMI-DADE COUNTY, FLORIDA
 METRO-DADE FLAGLER BUILDING
 140 WEST FLAGLER STREET, SUITE 1603
 MIAMI, FLORIDA 33130-1563
 (305) 375-2901 FAX (305) 375-2904

NOTICE OF ACCEPTANCE (NOA)

Owens Corning
 One Owens Corning Parkway
 Toledo, OH 43659

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by the BCCO and accepted by the Building Code and Product Review Committee to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The BCCO (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. BCCO reserves the right to revoke this acceptance, if it is determined by BCCO 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 South Florida Building Code, 1994 Edition for Miami-Dade County or Florida Building Code.

DESCRIPTION: Oakridge PRO 40 AR

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 consists of pages 1 through 3.

The submitted documentation was reviewed by Frank Zuloaga, RRC



NOA No.: 01-1127,08
 Expiration Date: 07/19/06
 Approval Date: 01/31/02
 Page 1 of 3



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

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

NOTICE OF ACCEPTANCE (NOA)

**PGT Industries
P.O. Box 1529
Nokomis, FL 34274**

SCOPE:

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

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

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

DESCRIPTION: Series "SH-4000" Aluminum Single Hung Window

APPROVAL DOCUMENT: Drawing No. 2736, titled "Alum. Single Hung Window W/ STD. MTG. Rail", sheets 1 through 9 of 9, prepared, signed and sealed by Robert L. Clark, P.E., dated 04/18/01 with revision "3" 07/01/04, bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: None

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

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

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

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

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

This NOA revises NOA # 04-0203.02 and, consists of this page 1 and evidence page E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by **Herminio F. Gonzalez, P.E., Director, BCCO**



Handwritten signature and date: Herminio F. Gonzalez, 8/11/04

**NOA No 04-0714.06
Expiration Date: September 30, 2006
Approval Date: September 02, 2004
Page 1**



SBCCI PUBLIC SAFETY TESTING AND EVALUATION SERVICES INC.

900 Montclair Road, Suite A; Birmingham, Alabama 35213-1206

www.sbccies.org

a Participating Member of the NES, Inc.

Evaluation Reports are the opinion of the Committee on Evaluation, based on the findings, and do not constitute or imply an approval or acceptance by any local community. The Committee, in review of the data submitted, finds that in their opinion the product, material, system, or method of construction specifically identified in this report conforms with or is a suitable alternate to that specified in the Standard and International Codes,

SUBJECT TO THE LIMITATIONS IN THIS REPORT.

The Committee on Evaluation has reviewed the data submitted for compliance with the *Standard Building Code*, the *SBCCI Standard for Hurricane Resistant Residential Construction* SSTD 10, and the International One and Two Family Dwelling Code and submits to the Building Official or other authority having jurisdiction the following report. The Committee on Evaluation, SBCCI PST & ESI and its staff are not responsible for any errors or omissions to any documents, calculations, drawings, specifications, tests or summaries prepared and submitted by the design professional or preparer of record that are listed in the Substantiating Data Section of this report. Copyrighted © 2000 SBCCI PST & ESI

REPORT NO.: 2045

EXPIRES: See current SBCCI PST & ESI EVALUATION REPORT LISTING

CATEGORY: DOORS AND WINDOWS **FINAL REPORT**

SUBMITTED BY:

AMERICAN SHUTTER SYSTEMS ASSOCIATION, INC.
3800 23rd AVENUE SOUTH
LAKE WORTH, FLORIDA 33461

1. PRODUCT TRADE NAME

- 1.1 Econo Bertha Accordion Shutter
- 1.2 Residential Bertha Accordion Shutter

2. SCOPE OF EVALUATION

- 2.1 Impact Resistance under SSTD 12
- 2.2 Structural - Transverse Wind Loads

3. USES

Bertha Accordion Shutters are used to protect glazed openings from windborne debris.

4. DESCRIPTION

4.1 Bertha Accordion Shutters

4.1.1 Econo Bertha Accordion Shutters are made up of 4 inch (102 mm) wide and 0.056 inch (1.4 mm) thick aluminum extrusion sections made from 6063-T6 alloy with a minimum $F_y = 28.5$ ksi (197 MPa). The sections are connected together to form the shutter. They are mounted to the structure by the use of mounting extrusions. Extrusions for mounting blades are 6063-T6 aluminum alloy. The maximum blade length when the system is attached to wood is 12' - 0" (3.7 m) with either centermate combination. The maximum blade length when the system is attached to concrete or masonry is 14' - 0" (4.3 m) when using centermate combination H and I shown on Sheets 1 and 4 of Drawing 98-59. The maximum blade length is 12' - 6" (3.8 m) when using centermate combination L and M shown on sheets 1 and 5 of drawing 98-59. See Tables 1 and 2 of this report for allowable loads.

4.1.2 Residential Bertha Accordion Shutters are made up of 4 inch (102 mm) wide and 0.052 inch (1.3 mm) thick aluminum extrusion sections made from 6063-T6 alloy with a minimum $F_y = 28.5$ ksi (197 MPa). The sections are connected together to form the shutter. They are mounted to the structure by the use of mounting extrusions. Extrusions for mounting blades are 6063-T6 aluminum alloy. The maximum blade length is 13' - 0" (4.0 m) with either centermate combination. The maximum blade length when the system is attached to wood is 9' - 0" (2.7 m) with either centermate combination. The maximum allowable load on the Residential Bertha Accordion Shutter system is 75 psf when attaching to wood construction. See Table 3 of this report for allowable loads when attaching to concrete or concrete masonry units.

4.2 Large Missile Impact Resistance under SSTD 12

The Bertha Accordion Shutters were tested for large missile impact resistance under SSTD 12. The panels tested passed

REPORT NO. 2045

PAGE 1 OF 4

the large missile impact test. The panels listed in this report may be used to protect glazed openings from windborne debris.

5. INSTALLATION

5.1 General

The manufacturer's published installation instructions and this report shall be strictly adhered to and a copy of these instructions shall be available at all times on the job site during installation. The instructions within this report govern if there are any conflicts between the manufacturer's instructions and this report.

5.2 Allowable Transverse Wind Loads

The design wind loads on the shutters shall be determined in accordance with 1808 of the *Standard Building Code* and shall not exceed the allowable transverse wind loads shown in Tables 1, 2, and 3 of this report.

The installation of fasteners into concrete or concrete masonry units (CMU) are based on special inspections. See the SBCCI PST & ESI or NES evaluation report on the specific fastener for special inspection requirements.

When Special Inspection is required as noted in this report, the owner or the registered design professional in responsible charge acting as the owner's agent shall employ one or more special inspectors to provide inspection of the construction involved. The special inspector shall be a registered design professional, a SBCCI certified building inspector, an employee of a SBCCI PST & ESI or N.E.S. listed quality assurance or inspection agency, or other third party qualified person who demonstrates competence to the satisfaction of the building official.

Notes to all tables.

1. SI Units Conversion: 1 in = 25.4 mm, 1 ft = 0.3 m, 1 psf = 48 Pa
2. Opening width is not limited.

FINAL REPORT

**TABLE 1
ECONOMY BERTHA ALUMINUM ACCORDION SHUTTER
ALLOWABLE TRANSVERSE WIND LOAD
ATTACHED TO WOOD**

Maximum Allowable Load (PSF)	Maximum Blade Span
50	12' - 0"
75	9' - 0"

Refer to engineering drawing 98-59 for the Anchor Schedules and installation details.

**TABLE 2
ECONOMY BERTHA ALUMINUM ACCORDION SHUTTER
ALLOWABLE TRANSVERSE WIND LOAD
ATTACHED TO CONCRETE OR MASONRY**

Maximum Allowable Load (PSF)	Maximum Blade Span
-45	14' - 0"
-50	13' - 8"
-55	13' - 3"
-60	12' - 8"
-65	12' - 2"
-70	11' - 9"
-75	11' - 4"
-80	11' - 0"
-85	10' - 8"
-90	10' - 4"
-95	10' - 1"
-100	9' - 10"
-105	9' - 7"
-110	9' - 4"
-115	9' - 2"
-120	8' - 10"
-125	8' - 5"
-130	8' - 2"
-136	7' - 10"
-140	7' - 7"
-145	7' - 3"
-150	7' - 1"
-155	6' - 10"
-160	6' - 7"
-165	6' - 5"
-170	6' - 3"
-175	6' - 0"
-180	5' - 10"
-185	5' - 8"
-190	5' - 7"

Table 2 Continued on next page.

TABLE 2 - CONTINUED

Maximum Allowable Load (PSF)	Maximum Blade Span
-195	5'- 6"
-200	5'- 3"
-205	5'- 2"
-210	5'- 0"
-215	4'- 11"
-220	4'- 10"
-225	4'- 8"

Table 2 Notes:

1. Refer to engineering drawing 98-59 for the Anchor Schedules and installation details.
2. The maximum blade length is 12'- 6" when using centermate combination L and M as shown on Sheets 1 and 5 of Drawing 98-59.

TABLE 3

RESIDENTIAL BERTHA ALUMINUM ACCORDION SHUTTER ALLOWABLE TRANSVERSE WIND LOAD ATTACHED TO CONCRETE OR MASONRY

Maximum Allowable Load (PSF)	Maximum Blade Span
-30	13'- 0"
-35	12'- 8"
-40	12'- 1"
-45	11'- 8"
-50	11'- 3"
-55	10'- 11"
-60	10'- 7"
-65	10'- 4"
-70	10'- 1"
-75	9'- 8"
-80	9'- 5"
-85	9'- 0"
-90	8'- 9"
-95	8'- 6"
-100	8'- 4"

Table 3 continued in next column.

TABLE 3 - CONTINUED

Maximum Allowable Load (PSF)	Maximum Blade Span
-105	8'- 1"
-110	7'- 11"
-115	7'- 9"
-120	7'- 7"
-125	7'- 5"
-130	7'- 3"
-135	6'- 0"
-140	5'- 9"
-145	5'- 7"
-150	5'- 5"
-155	5'- 3"
-160	5'- 1"
-165	4'- 11"
-170	4'- 9"
-175	4'- 8"
-180	4'- 6"

Refer to engineering drawing 98-156 for the Anchor Schedules and installation details.

6. SUBSTANTIATING DATA

6.1 Manufacturer's specifications and installation drawings:

- ASSA / Economy Accordion Shutter, Drawing 98-59, 8 sheets, dated March 26, 1998, Revision No. 3, dated June 12, 2000, prepared by Tiltco, Inc., signed and sealed by Walter A. Tillit, JR., P.E.
- ASSA / Residential Bertha Accordion Shutter, Drawing 98-156, 8 sheets, dated June 16, 1998, Revision No. 2, dated June 12, 2000, prepared by Tiltco, Inc., signed and sealed by Walter A. Tillit, JR., P.E.

6.2 Test report on large missile impact loadings on Economy Aluminum Accordion Shutters under SSTD 12, prepared by American Test Lab of South Florida, ATL Report No. 0325.01-98R, dated April 28, 1999, signed by Keith Harker.

6.3 Addendum to ATL Report No. 0325.01-98R, prepared by American Test Lab of South Florida, ATL Report No. 0525.02-00, dated May 26, 2000, signed by Keith Harker, signed and sealed by William R. Mehner, P.E. and Henry Hattem, P.E.

FINAL REPORT

- 6.4 Engineering calculations on Economy Aluminum Accordion Shutters, prepared by Tilteco Inc., signed and sealed by Walter A. Tillit, Jr., P.E.:
Dated:
March 18, 1998 48 pages
December 1, 1998 1 page
June 12, 2000 22 pages
- 6.5 Test report on large missile impact loadings on Residential Bertha Aluminum Accordion Shutters in accordance with SSTD 12, prepared by American Test Lab of South Florida, ATL Report No. 0520.01-98R, dated April 28, 1999, signed by Keith Harker.
- 6.6 Engineering calculations on Residential Bertha Aluminum Accordion Shutters, prepared by Tilteco Inc., signed and sealed by Walter A. Tillit, Jr., P.E.:
Dated:
June 24, 1998 57 pages
June 12, 2000 28 pages
- 6.7 Comparative analysis between ASSA/Economy Accordion Shutter System and ASSA/Residential Accordion Shutter System, prepared by Tilteco Inc., 5 pages, dated September 8, 2000, signed and sealed by Walter A. Tillit, Jr., P.E.

7. CODE REFERENCES

Standard Building Code® - 1999 Edition

Section 103.7	Alternate Materials and Methods
Section 1606	Wind Loads
Chapter 17	Structural Tests and Inspections
Section 1707.4	Exterior Window and Door Assemblies
Chapter 20	Light Metal Alloys
Section 2002	Structural Aluminum

Standard for Hurricane Resistant Residential Construction® SSTD 10-99

Section 101.3	Integrity of Building Envelope
Section 101.4	Alternate Materials and Methods
Section 101.6	Design Concepts
Section 104	Design Criteria
Section 104.1	Wind Loads
Appendix B	Design Load Assumptions

International One and Two Family Dwelling Code - 1998 Edition

Section 108	Alternate Materials and Systems
Section 301	Design Criteria
Section 308.5	Glazing - Wind Loads
Section 603	Metal

8. COMMITTEE FINDINGS

The Committee on Evaluation in review of the data submitted finds that, in their opinion, the Bertha Accordion Shutters as described in this report conform with or are suitable alternates to that specified in the Standard Building Code®.

the SBCCI Standard for Hurricane Resistant Residential Construction® SSTD 10, and the International One and Two Family Dwelling Code or Supplements thereto.

9. LIMITATIONS

- 9.1 Wood framing to which the systems are attached shall be a minimum of No. 2 Southern Pine.
- 9.2 The structural elements supporting the shutters shall be designed for the wind loads shown on the drawings. The calculations shall be submitted to the building official when applying for a permit. The calculations shall be signed, sealed, and dated by a registered professional engineer when required by the Code.
- 9.3 ITW Tapcon fasteners shall be installed in concrete with a minimum compressive strength of 3000 psi and hollow CMU with a minimum f' of 1200 psi. (SBCCI PST & ESI #9769)

Powers Calk-In fasteners shall be installed in concrete with a minimum compressive strength of 3870 psi and hollow CMU with a minimum f' of 3235 psi. (SBCCI PST & ESI #9944)

Powers Zamac Nail-In fasteners shall be installed in concrete with a minimum compressive strength of 4000 psi and hollow CMU with a minimum f' of 3235 psi. (SBCCI PST & ESI #9944)

Elco Tapcon fasteners shall be installed in concrete with a minimum compressive strength of 3350 psi and hollow CMU with a minimum f' of 2000 psi.

10. IDENTIFICATION

Each Bertha Accordion Shutter covered by this report shall be labeled with the manufacturer's name (American Shutter Systems Association, Inc.) and/or trademark, the SBCCI Public Safety Testing and Evaluation Services Inc. seal or initials (SBCCI PST & ESI), and the number of this report for field identification.

The shutter shall also be labeled in accordance with Section 102 of SSTD 12.

11. PERIOD OF ISSUANCE

SEE CURRENT SBCCI PST & ESI EVALUATION REPORT LISTING FOR STATUS OF THIS EVALUATION REPORT.

For information on this report contact:
Woods McRoy, P.E.
205/599-9800


FINAL REPORT

GENERAL NOTES:

1. BERTHA HIGH VELOCITY ACCORDION SHUTTER SYSTEM SHOWN ON THIS PRODUCT EVALUATION DOCUMENT (P. E. D.) HAS BEEN VERIFIED FOR COMPLIANCE IN ACCORDANCE WITH THE 2001 EDITION OF THE FLORIDA BUILDING CODE. THIS ACCORDION SHUTTER SYSTEM SHALL BE INSTALLED ONLY AT NON HIGH VELOCITY HURRICANE ZONES. DESIGN WIND LOADS SHALL BE DETERMINED AS PER SECTION 1905 OF THE ABOVE MENTIONED CODE, FOR A BASIC WIND SPEED AS REQUIRED BY THE JURISDICTION WHERE SHUTTER WILL BE INSTALLED, AND FOR A DIRECTIONALITY FACTOR $K_d=0.85$, IN ACCORDANCE W/ ASCE 7-98 STANDARD. BERTHA HIGH VELOCITY ACCORDION SHUTTER SYSTEM'S ADEQUACY FOR IMPACT AND FATIGUE RESISTANCE HAS BEEN VERIFIED IN ACCORDANCE WITH SECTION 1606.1.4 OF THE ABOVE MENTIONED CODE AS PER ATL REPORT #D214.01-03, AS PER PA-201, PA-202 AND PA-203 AND ASTM E-1956.
2. HIGH VELOCITY (H.V.) ACCORDION PINS, USED AT BLADE'S KNUCKLE AND FOR DIRECT MOUNT CONNECTION TO TRACKS SHALL BE # 14 x 2.75" AND #14 x 1.75" RESPECTIVELY, 410-HT MINIMUM SERIES STAINLESS STEEL SCREWS WITH 135.0 ksi YIELD POINT AND 180 ksi TENSILE STRENGTH. PINS SHALL BE COATED WITH BERTHA H.V. DACROSHIELD® COATING SYSTEM AS MANUFACTURED BY GEORGIA METAL COATINGS COMPANY. PINS MUST BEAR THE H.V. MARKING ON THEIR HEAD.
3. ALL ALUMINUM EXTRUSIONS SHALL BE ALUMINUM ASSOCIATION 6063-T6 ALLOY AND TEMPER, WITH $F_y = 25.0$ ksi MAXIMUM (UNLESS OTHERWISE NOTED). THE THICKNESS OF ALL EXTRUSIONS SHALL BE AS SHOWN ON THIS DRAWING WITH STANDARD TOLERANCES IN ACCORDANCE WITH THE "ALUMINUM STANDARDS AND DATA 1996 EDITION", ALUMINUM ASSOCIATION INCORPORATED, WASHINGTON D.C.
4. ALL SCREWS TO BE STAINLESS STEEL 304 OR 316 AISI SERIES OR CORROSION RESISTANT COATED CARBON STEEL AS PER DIN 50018 WITH 50 ksi YIELD POINT AND 90 ksi TENSILE STRENGTH.
5. BOLTS TO BE ALUMINUM ASSOCIATION 2024-T4 ALLOY AND TEMPER, ASTM A-307 GALVANIZED STEEL OR AISI 304 SERIES STAINLESS STEEL WITH 35 ksi MINIMUM YIELD STRENGTH.
6. SEE SHEETS 9 AND 10 FOR ANCHORS SPECIFICATIONS.

7. THIS BERTHA HIGH VELOCITY ACCORDION SHUTTER SYSTEM IS PATENT PENDING. COMPONENTS OF THIS APPROVAL ARE COVERED, IN WHOLE OR IN PART BY US PATENT ISSUED TO EASTERN METAL SUPPLY, INC.
8. 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. CAULK AND SEAL SHUTTER TRACKS ALL AROUND FULL LENGTH.
9. EACH UNIT MUST BEAR A PERMANENT LABEL IN A VISIBLE PLACE WITH WARNING NOTE INSTRUCTING THE TENANT OR HOME OWNER THAT THE H.V. LOCK (M) MUST BE PROPERLY LOCKED DURING PERIODS OF HURRICANE WARNING. FOR EGRESS CONDITIONS, AN INSIDE LOCK SHALL BE USED, KEY MUST REMAIN IN THE LOCK.
10. (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 REGISTERED 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.

F.B.C.(N.H.V.H.Z.)



TILTECO INC.
 TILT TESTING & ENGINEERING COMPANY
 8879 P.M. 309A, RD. No. 117, WHEELEN GARDENS, FLORIDA 32118
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 ED-0003715
 WALTER A. FLIT Jr. P. E.
 FLORIDA Lic # 44167

A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

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**BERTHA™ HIGH VELOCITY
 ACCORDION SHUTTER SYSTEM**

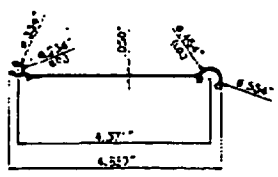
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6			1 OF 12

P. 5/16

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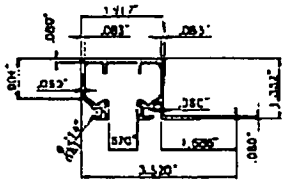
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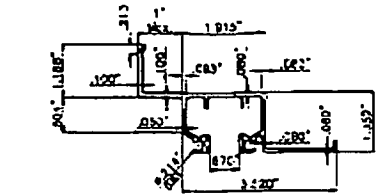


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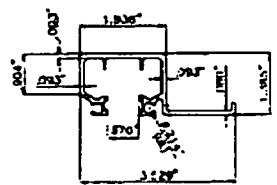
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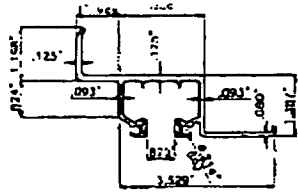
(B) HV CEILING HEADER # 1



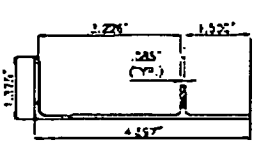
(C) HV 1" (Max.) B/O HEADER/SILL # 1



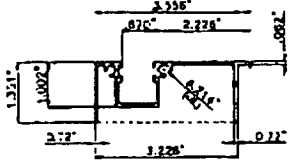
(E) HD CEILING HEADER/SILL # 2



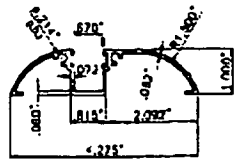
(F) HD 1" (Max.) B/O HEADER/SILL # 2



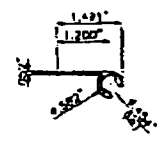
(H) HV-ADJ.-ADAPTER-W/JP



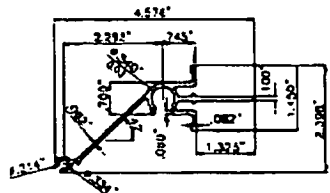
(I) HV-ADJ.-TRACK



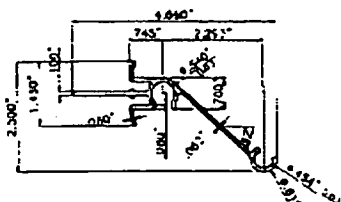
(J) HV WALK-OVER TRACK



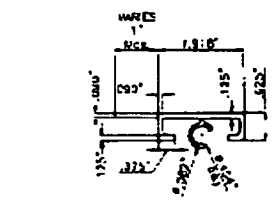
(K) HV 90°/180° STARTER



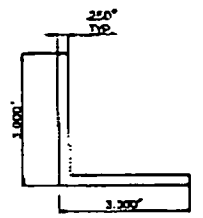
**(L) HV-CENTERMATE # 1
(SELF MAT'NG)**



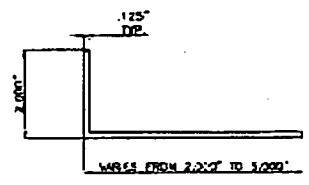
(M) HV FLOATING CENTERMATE # 2



(N) H.V. 1" (Max.) DIRECT MOUNT



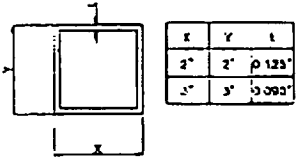
(O) 3" FLOOR ANGLE



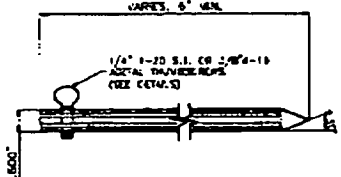
(P) B.O. WALL ANGLE

X	Y	L
1"	1"	0.092"
1"	2"	0.092"
2"	2"	0.092"
2"	3"	0.092"
2"	4"	0.092"
2"	5"	0.092"

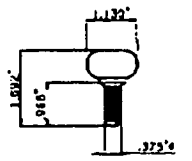
(R) SIDE ANGLE



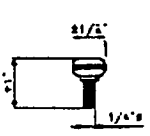
(S) CORNER POST



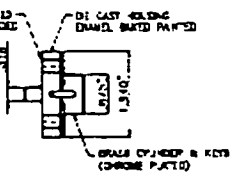
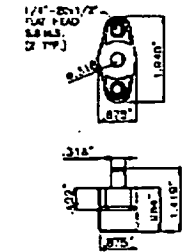
**(U) LOCKING ROD
(OPTIONAL, SEE NOTES ON SHEET 3)**



**3/8"φ-16 ACETAL
THUMBSCREWS**



**1/4" φ-20 S.S.
THUMBSCREWS**



(W) H.V. LOCK

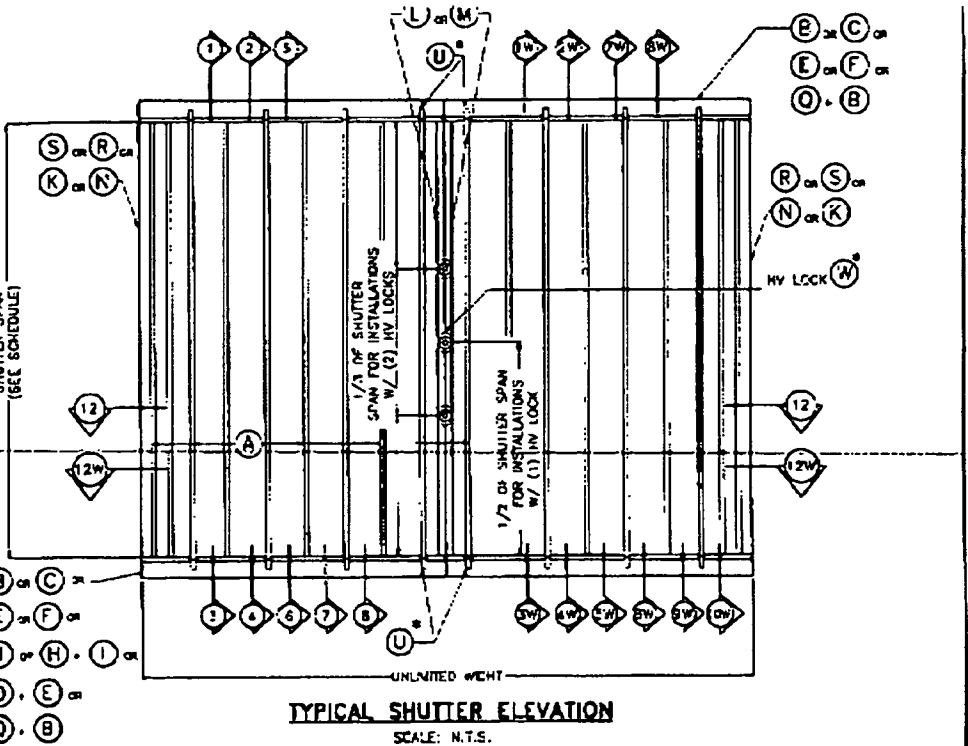
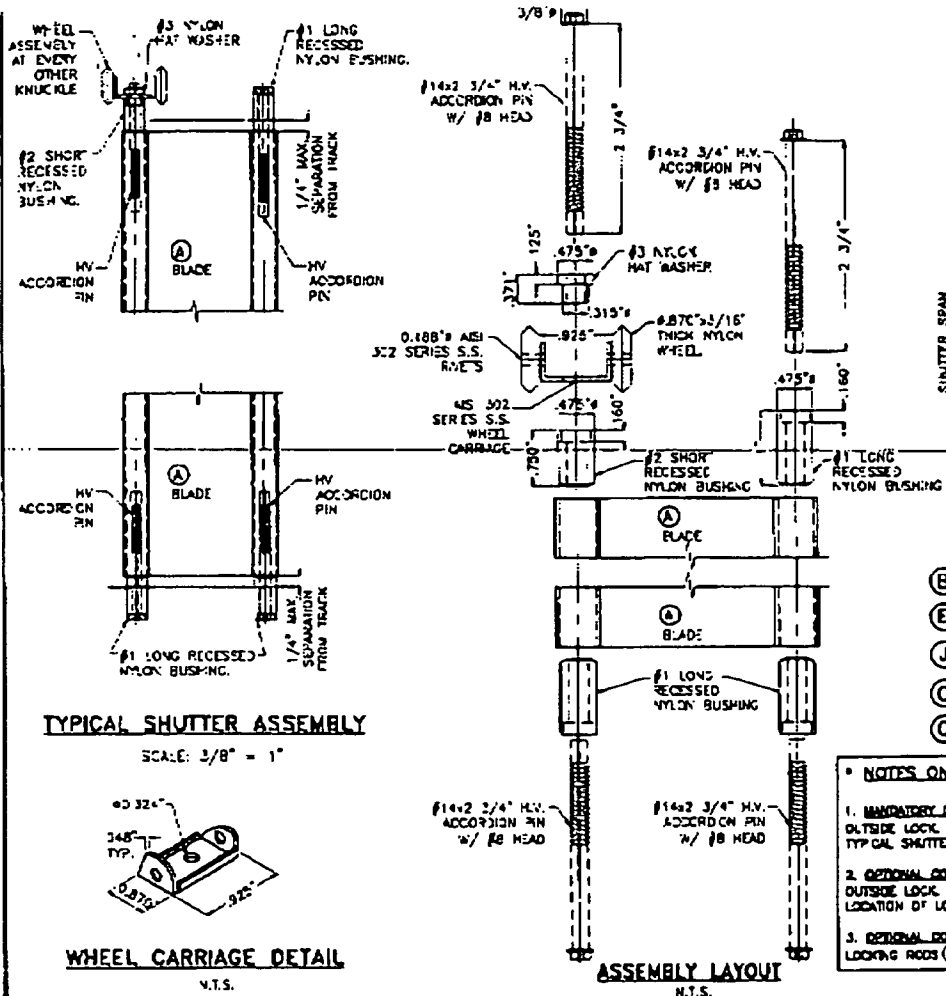
F.E.C.(N.H.V.M.Z.)



TILITY TESTING & ENGINEERING COMPANY
 1400 N.W. 31ST. ST. SU. 117, MIAMI GARDENS, FLORIDA 33167
 Phone: (305) 871-1533 Fax: (305) 871-1533
 e-mail: tileco@tel.com
 EB-0026719
 WALTER A. TILLY, JR., P. E.
 FLORIDA Lic. # 44187

A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

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BERTHATM HIGH VELOCITY			
ACCORCION SHUTTER SYSTEM			
REV.	NO.	DESCRIPTION	DATE
1			SCALE: 3/8"=1"
2			DATE: 5/20/02
3			DRAWING No
4			03-034
5			SHEET
6			2 OF 12



NOTES ON LOCKING RODS (U) & HV LOCKS (W) :

- MANDATORY CONDITION #1:** ONE HV LOCK (W) SHALL BE USED FOR ANY SPAN AND INSTALLATIONS AT ANY ELEVATION. HV LOCK (W) MAY BE USED AS AN INSIDE OR OUTSIDE LOCK ATTACHED TO (L) OR (M) CENTERPAGES W/(8) 1/4" x .20 x 1/2" LONG FLAT HEAD S.S. S.S. LOCATION OF LOCK SHALL BE AS INDICATED ON TYPICAL SHUTTER ELEVATION.
- OPTIONAL CONDITION #1:** IF DESIRED, FOR BETTER PERFORMANCE OR FOR SECURITY PURPOSES, UP TO TWO HV LOCKS (W) MAY BE USED AS AN INSIDE OR OUTSIDE LOCK. CONNECTION OF LOCKS TO CENTERPAGES (L) OR (M) SHALL BE AS INDICATED OR NOTE (1) ABOVE. LOCATION OF LOCKS SHALL BE AS INDICATED ON TYPICAL SHUTTER ELEVATION.
- OPTIONAL CONDITION #2:** LOCKING RODS (U) ARE NOT REQUIRED AT HURRICANE POSITION, BUT MAY BE USED IF DECIDED TO ENHANCE SHUTTER PERFORMANCE. LOCKING RODS (U) OR AN ALTERNATIVE DEVICE MAY ALSO BE USED AT STACKING POSITION (NON HURRICANE POSITION).

F.B.C.(N.H.V.H.Z.)

WHEEL CARRIAGE DETAIL
N.T.S.

ASSEMBLY LAYOUT
N.T.S.

TYPICAL SHUTTER ELEVATION
SCALE: N.T.S.



TILECO INC.
TILT TESTING & ENGINEERING COMPANY
6133 N.W. 3400, SUITE 217, MIAMI GARDENS, FLORIDA 33168
Phone: (305)871-1530 Fax: (305)871-1531
e-mail: tiltco@aol.com
CB-0008718
WALTER A. TILT, P. E.
FLORIDA Lic. # 6187

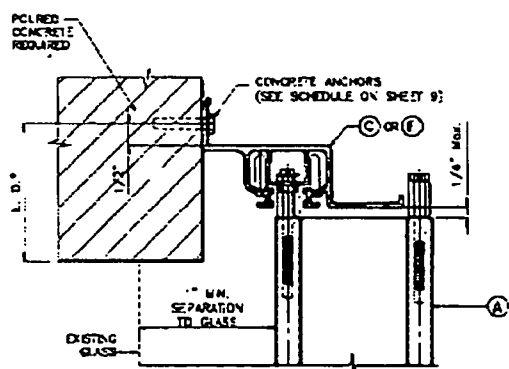


A.S.S.A.
American Shutter Systems
Association, Inc.
4268 Westroads Drive
West Palm Beach, FL 33407

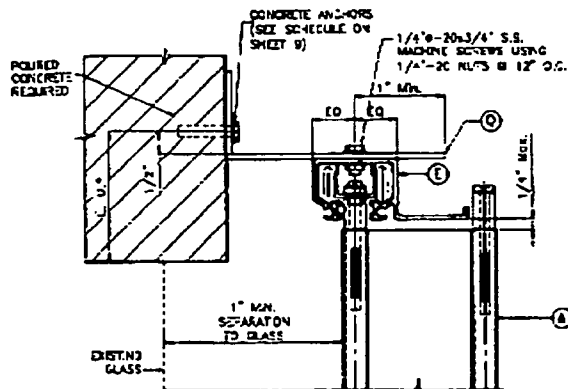
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**BERTHA™ HIGH VELOCITY
ACCORDION SHUTTER SYSTEM**

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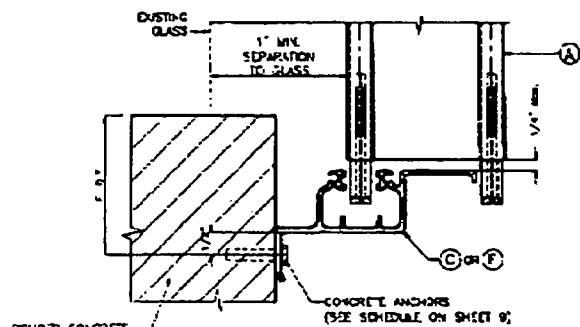


① WALL MOUNTING INSTALLATION

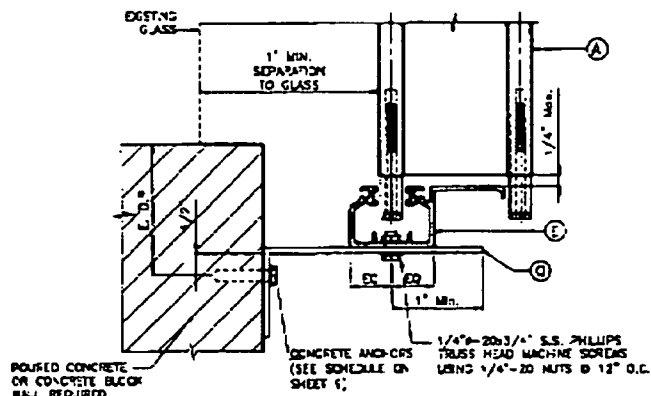


② WALL MOUNTING INSTALLATION

NOTE THE COMBINATIONS OF SECTIONS:
 1- SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
 2- MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.
 * E. D. = EDGE DISTANCE (SEE SCHEDULE ON SHEET 9)



③ WALL MOUNTING INSTALLATION



④ WALL MOUNTING INSTALLATION

INSTALLATION DETAILS

F.B.C.(N.H.V.H.Z.)



TILTECO INC.
 TILT TESTING & ENGINEERING COMPANY
 6415 N.W. 37th, Rd. Ste. 117, WESTLAND GARDENS, FLORIDA 33148
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 e-mail: tilteco@aol.com
 EB-0026713
 WALTER A. TILLET, P. E.
 FLORIDA Lic. # 44167

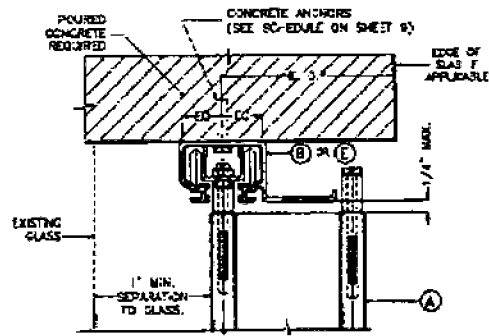


A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4258 Westroads Drive
 West Palm Beach, FL 33407

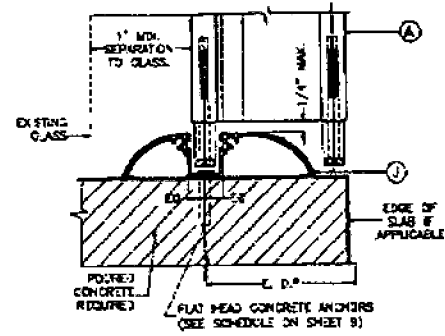
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BERTHA™ HIGH VELOCITY ACCORDION SHUTTER SYSTEM

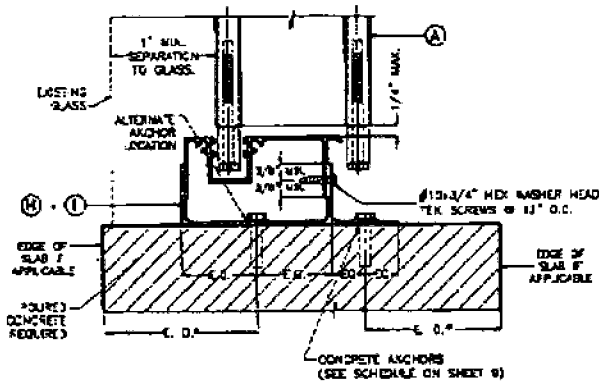
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1			DATE: 5/20/03
2			DRAWING No
3			03-034
4			SHEET
5			4 OF 12
6			



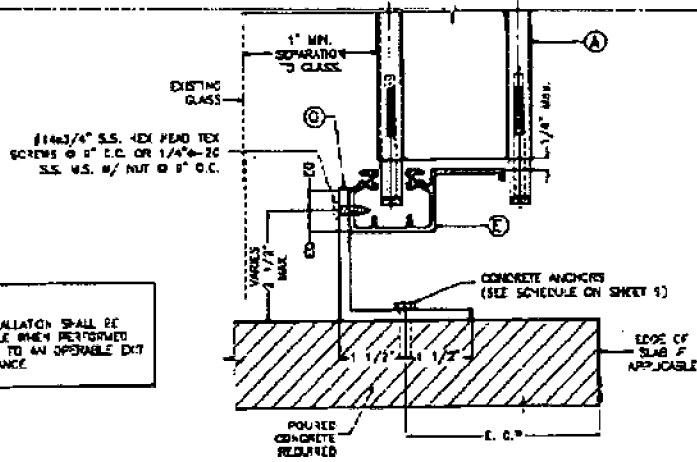
5 CEILING MOUNTING INSTALLATION



6 WALK-OVER MOUNTING INSTALLATION



7 FLOOR MOUNTING INSTALLATION



8 FLOOR MOUNTING INSTALLATION

NOTE:
THIS INSTALLATION SHALL BE REMOVABLE WHEN PERFORMED ADJACENT TO AN OPERABLE DOOR OR ENTRANCE.

NOTE FOR COMBINATION OF SECTIONS:
1- SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
2- MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

* E. D. = EDGE DISTANCE (SEE SCHEDULE ON SHEET 9)

INSTALLATION DETAILS

F.B.C.(N.H.V.P.Z.)



TILT TESTING & ENGINEERING COMPANY
4245 N.W. 11TH ST., PM. 217, WINDY HARBOR, FLORIDA 33418
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e-mail: tiltco@earthlink.net
EE-006713
WATER & TILT, INC. P. E.
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American Shutter Systems Association, Inc.
4268 Westroads Drive
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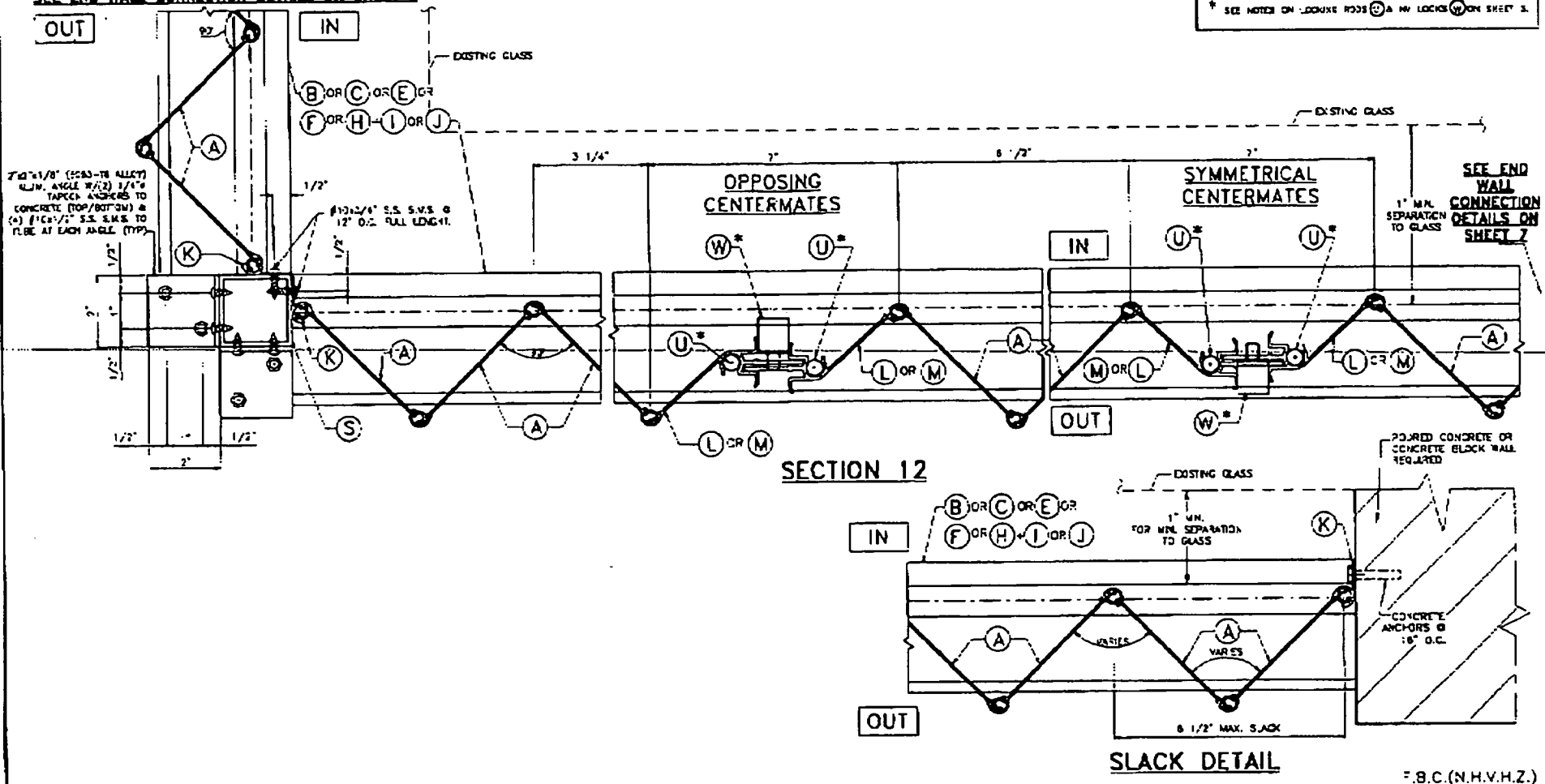
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BERTHA™ HIGH VELOCITY ACCORDION SHUTTER SYSTEM

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2			DRAWING No
3			03-034
4			SHEET
5			5 OF 12

SEE END WALL CONNECTION DETAILS ON SHEET 7

SEE NOTES ON LOCKING PDS @ A IN LOCKS WORK SHEET 5.



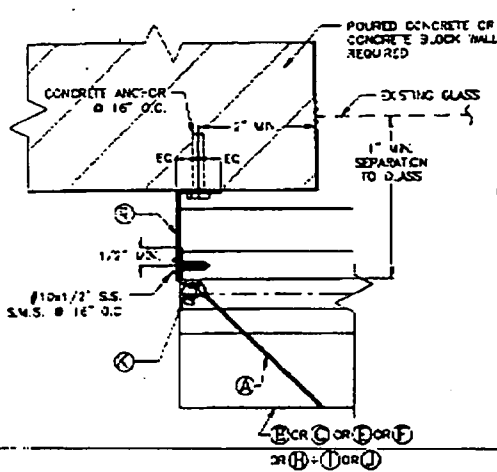
TILTECO INC.
 TILIT TESTING & ENGINEERING COMPANY
 4605 V.F. HWY. B., SA. 117, WETPAN OFFICE, FLORIDA 33108
 Phone: (305) 871-1530, Fax: (305) 871-1531
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 4256 Westroads Drive
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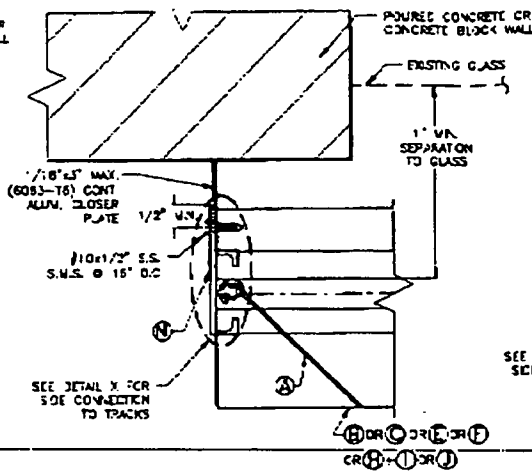
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BERTHA™ HIGH VELOCITY
ACCORDION SHUTTER SYSTEM

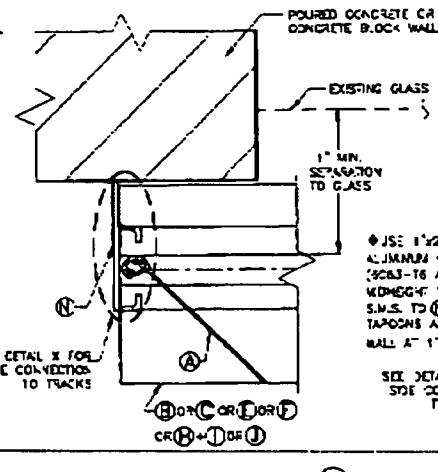
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4			SHEET
5			8 OF 12



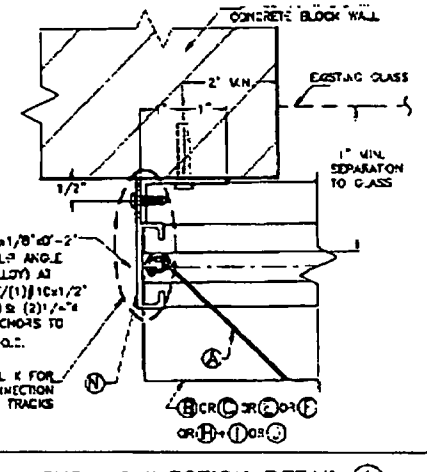
END CONNECTION DETAIL ①



END CONNECTION DETAIL ②

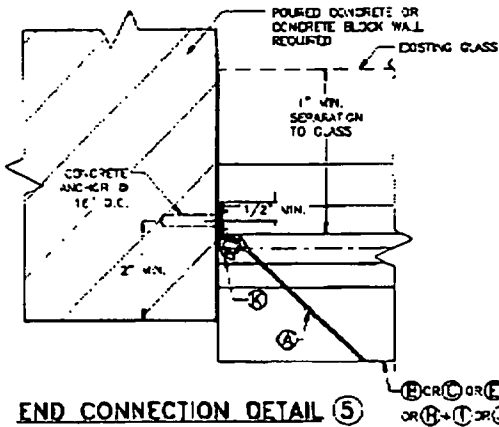


END CONNECTION DETAIL ③

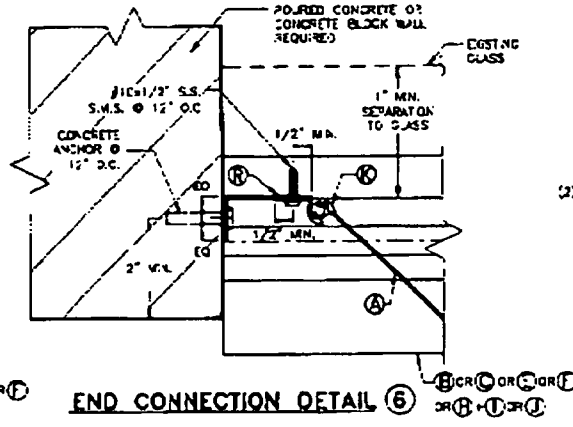


END CONNECTION DETAIL ④

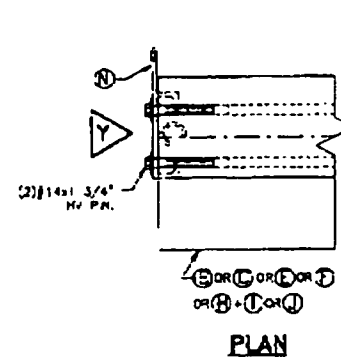
Ø REQUIRED ONLY FOR SPANS GREATER THAN 12'-0"



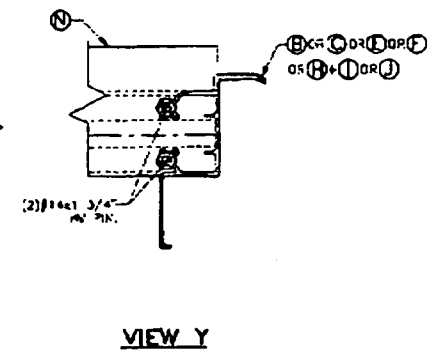
END CONNECTION DETAIL ⑤



END CONNECTION DETAIL ⑥



PLAN



VIEW Y

DETAIL X

F.E.C.(N.H.V.H.2.)



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 American Shutter Systems
 Association, Inc.

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 West Palm Beach, FL 33407

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BERTHA™ HIGH VELOCITY
ACCORDION SHUTTER SYSTEM

REV. NO.	DESCRIPTION	DATE	SCALE
1			3/4" = 1"
1			DATE: 3/29/03
1			DRAWING No
1			03-034
1			SHEET
1			7 OF 12

MAXIMUM SHUTTER SPAN "L+" OR "L-" (ft.)
INSTALLATIONS W/ SYMMETRICAL CENTERBATES,
ONE HV LOCK & NO LOCKING RODS *

MAXIMUM DESIGN LOAD (PSF) (4" OR 5")	CONCRETE INSTALLATIONS				WOOD INSTALLATIONS			
	MOUNTINGS 1, 2, 3 & 4 (WALL MOUNTING)		MOUNTINGS 5, 6, 7 & 8 (FLOOR/CEILING MOUNTING)		MOUNTINGS 1 & 2, 3, 4, 5 & 6 (WALL MOUNTING)		MOUNTINGS 7, 8 & 9 (FLOOR/CEILING MOUNTING)	
	L+ (ft.)	L- (ft.)	L+ (ft.)	L- (ft.)	L+ (ft.)	L- (ft.)	L+ (ft.)	L- (ft.)
30 OR LESS	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
35	14'-10"	14'-10"	15'-2"	15'-2"	14'-10"	14'-10"	15'-2"	15'-2"
40	13'-10"	13'-10"	14'-2"	13'-8"	13'-10"	13'-10"	14'-2"	13'-2"
45	13'-1"	13'-1"	13'-5"	13'-3"	13'-1"	13'-1"	13'-4"	12'-3"
50	12'-8"	12'-8"	12'-6"	13'-7"	12'-5"	12'-6"	12'-8"	13'-7"
55	11'-10"	11'-10"	12'-1"	12'-11"	11'-10"	11'-10"	12'-1"	12'-11"
60	11'-4"	11'-4"	11'-2"	12'-4"	11'-4"	11'-4"	11'-4"	12'-4"
65	10'-10"	10'-10"	11'-1"	11'-11"	10'-10"	10'-10"	11'-1"	11'-11"
70	10'-8"	10'-8"	10'-9"	11'-5"	10'-8"	10'-8"	10'-8"	11'-5"
75	10'-3"	10'-3"	10'-4"	11'-1"	10'-3"	10'-3"	10'-4"	11'-1"
80	9'-10"	9'-10"	10'-0"	10'-9"	9'-10"	9'-10"	10'-0"	10'-9"
85	9'-6"	9'-6"	9'-6"	10'-5"	9'-6"	9'-6"	9'-6"	10'-5"
90	9'-3"	9'-3"	9'-3"	10'-1"	9'-3"	9'-3"	9'-3"	10'-1"
95	8'-9"	8'-9"	8'-2"	9'-10"	8'-9"	8'-9"	8'-2"	9'-10"
100	8'-9"	8'-9"	8'-4"	9'-7"	8'-9"	8'-9"	8'-7"	9'-7"
105	8'-7"	7'-11"	8'-8"	9'-4"	8'-7"	7'-11"	8'-8"	9'-4"
110	8'-4"	7'-7"	8'-3"	9'-2"	-	-	-	-
115	8'-2"	7'-3"	8'-0"	8'-11"	-	-	-	-
120	8'-0"	7'-11"	8'-2"	8'-9"	-	-	-	-
125	7'-10"	8'-6"	8'-0"	8'-5"	-	-	-	-
130	7'-8"	8'-5"	7'-10"	8'-1"	-	-	-	-
135	7'-7"	8'-2"	7'-9"	7'-9"	-	-	-	-
140	7'-5"	8'-11"	7'-7"	7'-8"	-	-	-	-
145	7'-3"	8'-9"	7'-5"	7'-3"	-	-	-	-
150	7'-2"	8'-7"	7'-4"	7'-3"	-	-	-	-
155	7'-0"	8'-8"	7'-3"	8'-0"	-	-	-	-
160	6'-11"	8'-2"	7'-1"	8'-7"	-	-	-	-
165	6'-10"	8'-1"	7'-0"	8'-4"	-	-	-	-
170	6'-9"	8'-11"	8'-11"	8'-2"	-	-	-	-
175	6'-7"	8'-6"	8'-8"	8'-0"	-	-	-	-
180	6'-6"	8'-6"	8'-6"	8'-10"	-	-	-	-
185	6'-3"	8'-8"	8'-7"	8'-8"	-	-	-	-
190	6'-4"	8'-5"	8'-8"	8'-6"	-	-	-	-
195	6'-3"	8'-3"	8'-5"	8'-3"	-	-	-	-
200	6'-2"	8'-2"	8'-4"	8'-3"	-	-	-	-
205	6'-1"	8'-1"	8'-3"	8'-1"	-	-	-	-

-- NOT APPLICABLE

MAXIMUM SHUTTER SPAN "L+" OR "L-" (ft.)
INSTALLATIONS W/ OPPOSING CENTERBATES,
ONE HV LOCK & NO LOCKING RODS *

MAXIMUM DESIGN LOAD (PSF) (4" OR 5")	CONCRETE INSTALLATIONS				WOOD INSTALLATIONS			
	MOUNTINGS 1, 2, 3 & 4 (WALL MOUNTING)		MOUNTINGS 5, 6, 7 & 8 (FLOOR/CEILING MOUNTING)		MOUNTINGS 1 & 2, 3, 4, 5 & 6 (WALL MOUNTING)		MOUNTINGS 7, 8 & 9 (FLOOR/CEILING MOUNTING)	
	L+ (ft.)	L- (ft.)	L+ (ft.)	L- (ft.)	L+ (ft.)	L- (ft.)	L+ (ft.)	L- (ft.)
30	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
35	14'-10"	14'-10"	14'-10"	14'-10"	14'-10"	14'-10"	14'-10"	14'-10"
40	13'-10"	13'-10"	13'-10"	13'-10"	13'-10"	13'-10"	13'-10"	13'-10"
45	13'-1"	13'-1"	13'-1"	13'-1"	13'-1"	13'-1"	13'-1"	13'-1"
50	12'-8"	12'-8"	12'-8"	12'-8"	12'-8"	12'-8"	12'-8"	12'-8"
55	11'-10"	11'-10"	11'-10"	11'-10"	11'-10"	11'-10"	11'-10"	11'-10"
60	11'-4"	11'-4"	11'-4"	11'-4"	11'-4"	11'-4"	11'-4"	11'-4"
65	10'-10"	10'-10"	10'-10"	10'-10"	10'-10"	10'-10"	10'-10"	10'-10"
70	10'-8"	10'-8"	10'-8"	10'-8"	10'-8"	10'-8"	10'-8"	10'-8"
75	10'-3"	10'-3"	10'-3"	10'-3"	10'-3"	10'-3"	10'-3"	10'-3"
80	9'-10"	9'-10"	9'-10"	9'-10"	9'-10"	9'-10"	9'-10"	9'-10"
85	9'-6"	9'-6"	9'-6"	9'-6"	9'-6"	9'-6"	9'-6"	9'-6"
90	9'-3"	9'-3"	9'-3"	9'-3"	9'-3"	9'-3"	9'-3"	9'-3"
95	9'-0"	8'-8"	8'-8"	8'-8"	9'-0"	8'-8"	8'-8"	8'-8"
100	8'-9"	8'-4"	8'-4"	8'-4"	8'-9"	8'-4"	8'-4"	8'-4"
105	8'-7"	7'-11"	8'-7"	7'-11"	8'-7"	7'-11"	8'-7"	7'-11"
110	8'-4"	7'-7"	7'-7"	7'-7"	8'-4"	7'-7"	7'-7"	7'-7"
115	8'-2"	7'-3"	7'-3"	7'-3"	8'-2"	7'-3"	7'-3"	7'-3"
120	8'-0"	7'-11"	7'-11"	7'-11"	8'-0"	7'-11"	7'-11"	7'-11"
125	7'-10"	8'-6"	8'-6"	8'-6"	7'-10"	8'-6"	8'-6"	8'-6"
130	7'-8"	8'-5"	8'-5"	8'-5"	7'-8"	8'-5"	8'-5"	8'-5"
135	7'-7"	8'-2"	8'-2"	8'-2"	7'-7"	8'-2"	8'-2"	8'-2"
140	7'-5"	8'-11"	8'-11"	8'-11"	7'-5"	8'-11"	8'-11"	8'-11"
145	7'-3"	8'-9"	8'-9"	8'-9"	7'-3"	8'-9"	8'-9"	8'-9"
150	7'-2"	8'-7"	8'-7"	8'-7"	7'-2"	8'-7"	8'-7"	8'-7"
155	7'-0"	8'-8"	8'-8"	8'-8"	7'-0"	8'-8"	8'-8"	8'-8"
160	6'-11"	8'-2"	8'-2"	8'-2"	6'-11"	8'-2"	8'-2"	8'-2"
165	6'-10"	8'-1"	8'-1"	8'-1"	6'-10"	8'-1"	8'-1"	8'-1"
170	6'-9"	8'-11"	8'-11"	8'-11"	6'-9"	8'-11"	8'-11"	8'-11"
175	6'-7"	8'-6"	8'-6"	8'-6"	6'-7"	8'-6"	8'-6"	8'-6"
180	6'-6"	8'-6"	8'-6"	8'-6"	6'-6"	8'-6"	8'-6"	8'-6"
185	6'-3"	8'-8"	8'-8"	8'-8"	6'-3"	8'-8"	8'-8"	8'-8"
190	6'-4"	8'-5"	8'-5"	8'-5"	6'-4"	8'-5"	8'-5"	8'-5"
195	6'-3"	8'-3"	8'-3"	8'-3"	6'-3"	8'-3"	8'-3"	8'-3"
200	6'-2"	8'-2"	8'-2"	8'-2"	6'-2"	8'-2"	8'-2"	8'-2"
205	6'-1"	8'-1"	8'-1"	8'-1"	6'-1"	8'-1"	8'-1"	8'-1"

-- NOT APPLICABLE

* NOTES:

(1) L+ = MAXIMUM ALLOWABLE SPAN FOR A GIVEN POSITIVE DESIGN LOAD.
L- = MAX. ALLOWABLE SPAN FOR A GIVEN NEGATIVE DESIGN LOAD.

(2) PROCEDURE TO DETERMINE MAXIMUM SPAN FOR WALL MOUNTINGS (TOP/BOTTOM) OR FLOOR/CEILING:
GIVEN A POSITIVE DESIGN LOAD, DETERMINE MAXIMUM SPAN "L+" FROM SCHEDULE.
GIVEN A NEGATIVE DESIGN LOAD, DETERMINE MAXIMUM SPAN "L-" FROM SCHEDULE.

FINAL MAXIMUM ALLOWABLE SPAN IS EQUAL TO THE MINIMUM DETERMINED SPAN BETWEEN "L+" AND "L-".

(3) PROCEDURE TO DETERMINE MAXIMUM SPAN FOR COMBINATIONS IN BETWEEN WALL MOUNTINGS W/ FLOOR/CEILING MOUNTINGS:
FOR A GIVEN POSITIVE DESIGN LOAD, DETERMINE:
L1+ = MAX. SPAN FOR WALL MOUNTING INSTALLATIONS.
L1- = MAX. SPAN FOR FLOOR/CEILING MOUNTING INSTALLATIONS.

FOR A GIVEN NEGATIVE DESIGN LOAD, DETERMINE:
L2+ = MAX. SPAN FOR WALL MOUNTING INSTALLATIONS.
L2- = MAX. SPAN FOR FLOOR/CEILING MOUNTING INSTALLATIONS.

FINAL MAXIMUM ALLOWABLE SPAN IS EQUAL TO THE MINIMUM BETWEEN "L1+", "L1-", "L2+" AND "L2-".

(4) GO TO ANCHOR SCHEDULE WITH FINAL MAXIMUM ALLOWABLE SPAN AND NEGATIVE DESIGN LOAD TO DETERMINE MAXIMUM ANCHOR SPACING.

F.B.C.(N.H.V.-I.Z.)

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West Palm Beach, FL 33407

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**BERTHA HIGH VELOCITY
ACCORDION SHUTTER SYSTEM**

REV. NO.	DESCRIPTION	DATE	SCALE
1			DATE: 5/20/03
2			DRAWING No
3			03-034
4			SHEET
5			8 Of 12

MAXIMUM DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING (in.) SCHEDULE FOR A GIVEN MAX. SHUTTER SPAN, DESIGN NEGATIVE LOAD AND A CORRESPONDING MOUNTING TYPE* FOR CONCRETE OR CONCRETE BLOCK INSTALLATIONS

(SEE MOUNTINGS 1, 2, 3, 4, 5, 6, 7, & 8 ON SHEETS 4 & 5).

ANCHOR SPACING LEGEND
TAPCON
ALL POINTS SOLID-SET

MAXIMUM SHUTTER SPAN (ft)	POURED CONCRETE														CONCRETE BLOCK																									
	WALL MOUNTING 1							WALL MOUNTING 2							CEILING MOUNT 5 FLOOR MOUNTINGS 6, 7 & 8							WALL MOUNTING 3							WALL MOUNTING 4											
	NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)											
	36	60	80	75	80	120	160	205	36	45	60	75	80	120	160	205	36	40	60	75	80	120	160	205	36	45	60	75	80	120	160	205								
3'-0" OR LESS	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	8	8	8	5.5	14	12	10	9	8	8	8	8	14	12	10	9	8	8	8	8	
4'-0"	14	12	10	9	8	8	3.5	14	12	10	9	8	8	8	8	14	12	10	9	8	7	5	4	14	12	10	9	8	7.5	3	-	14	12	10	9	8	7.5	5.5	3.5	
5'-0"	14	12	10	9	8	8	4.5	14	12	10	9	8	8	8	8	14	12	10	9	7.5	5.5	4	3	14	12	10	9	8	3	-	-	14	12	10	9	8	5	4	3	
6'-0"	14	12	10	9	8	8	5.5	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4.5	3.5	3	14	12	10	9	8	4	-	-	14	12	10	9	8	7	5	3
7'-0"	14	12	10	9	8	8	7	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6.5	5	4	14	12	10	9	8	4	-	-	14	12	10	9	8	9	6	4.5	
8'-0"	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4.5	3.5	14	12	10	9	8	4	-	-	14	12	10	9	8	8	5	3.5	
9'-0"	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4	3	14	12	10	9	8	4	-	-	14	12	10	9	8	8.5	4	-	
10'-0"	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4	3	14	12	10	9	8	4	-	-	14	12	10	9	8	5.5	-	-	
11'-0"	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4	3	14	12	10	9	8	4	-	-	14	12	10	9	8	7.5	-	-	
12'-0"	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4	3	14	12	10	9	8	4	-	-	14	12	10	9	8	5	-	-	
13'-0"	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4	3	14	12	10	9	8	4	-	-	14	12	10	9	8	5	-	-	
14'-0"	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4	3	14	12	10	9	8	4	-	-	14	12	10	9	8	5	-	-	
15'-0"	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4	3	14	12	10	9	8	4	-	-	14	12	10	9	8	5	-	-	
16'-0"	14	12	10	9	8	8	8	14	12	10	9	8	8	8	8	14	12	10	9	7.5	6	4	3	14	12	10	9	8	4	-	-	14	12	10	9	8	5	-	-	

NOTES:

1. ANCHORS TO WALL SHALL BE AS FOLLOWS
 (A) TO EXISTING POURED CONCRETE (Min. f'c = 3 ksi)
 - 1/4" x CAPCON ANCHORS, AS MANUFACTURED BY I.T.M. GUARDED
 - 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS AS MANUFACTURED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.

NOTES:
 A.1) MINIMUM EMBEDMENT INTO POURED CONCRETE OF TAPCON ANCHORS IS 1 3/4".
 A.2) MINIMUM EMBEDMENT OF 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS SHALL BE 1/8" INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUDDED SHALL BE PERMITTED. 1/4" x 3/4" S.S. TRUSS HEAD SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUDDED EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUDDED.
 A.3) IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, PANELS OR ANY OTHER BE TOLDED ON THE EXISTING WALL OR FLOOR ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SAID WALL FINISHES. ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1) & A.2) ABOVE. FOR INSTALLATIONS ON VINYL SIDING OR EPS CONSULT THIS ENGINEER.

(B) TO EXISTING CONCRETE BLOCK WALL:
 - 1/4" x CAPCON ANCHORS AS MANUFACTURED BY I.T.M. GUARDED
 - 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS AS MANUFACTURED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.

NOTES:
 B.1) MINIMUM EMBEDMENT INTO CONCRETE BLOCK OF TAPCON ANCHORS IS 1 3/4".
 B.2) MINIMUM EMBEDMENT OF 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE CONCRETE BLOCK. NO EMBEDMENT INTO STUDDED SHALL BE PERMITTED. 1/4" x 3/4" S.S. TRUSS HEAD SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUDDED EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUDDED.
 B.3) IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, PANELS OR ANY OTHER BE TOLDED ON THE EXISTING WALL OR FLOOR ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SAID WALL FINISHES. ANCHORAGE SHALL BE AS INDICATED ON NOTES B.1) & B.2) ABOVE. FOR INSTALLATIONS ON VINYL SIDING OR EPS CONSULT THIS ENGINEER.

(C) ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHORS MANUFACTURER.

* MAXIMUM ANCHOR SPACING ARE VALID FOR 3 1/2" EDGE DISTANCE FOR E. 3, LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLY SPACING SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. NOTE: MIN. E. 3 FOR ALL POINT SOLID SET ANCHORS IS 3". REDUCED SPACING DETAILED USING FACTOR SHALL NOT BE LESS THAN MINIMUM SPACING INDICATED FOR EACH ANCHOR TYPE.

ACTUAL E. D.	FACTOR	
	TAPCONS MIN. SPACING - 3"	SOLID SET MIN. SPACING - 3.5"
3"	0.88	0.78
2 1/2"	0.75	0.78
2"	0.50	0.80

F.B.C.(N.H.V.H.Z.)

P.13/16

To: 7723345877

7728710990

SEP-08-2005 08:37 From: EXPERT SHUTTER



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BERTHA™ HIGH VELOCITY ACCORDION SHUTTER SYSTEM

REV. NO.	DESCRIPTION	DATE	SCALE
1			DATE: 5/26/03
2			DRAWING No
3			03-034
4			
5			SHEET
6			9 OF 12

MAXIMUM DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING (in.) SCHEDULE FOR A GIVEN MAX. SHUTTER SPAN, NEGATIVE DESIGN LOAD AND A CORRESPONDING MOUNTING TYPE.†

(SEE MOUNTINGS 1W, 2W, 3W, 4W, 5W, 6W & 8W ON SHEETS 11 & 12).

MAXIMUM SPAN (ft)	SUBSTRATE																																			
	SOUTHERN PINE No. 2 W/ MIN. G=0.55, DOUGLAS FIR W/ MIN. G=0.50						SPRUCE PINE FIR NORTH W/ MIN. G=0.43						SPRUCE PINE FIR SOUTH W/ MIN. G=0.36						1/2" MIN. CDX PLYWOOD																	
	WALL MOUNTINGS 1W, 2W, 3W & 6W			CEILING MOUNT 8W FLOOR MOUNTINGS 9W & 10W			WALL MOUNTINGS 1W, 2W, 3W & 6W			CEILING MOUNT 8W FLOOR MOUNTINGS 9W & 10W			WALL MOUNTINGS 1W, 2W, 3W & 6W			CEILING MOUNT 8W FLOOR MOUNTINGS 9W & 10W			WALL MOUNTINGS 4W & 5W																	
	NEGATIVE DESIGN LOAD (psf)						NEGATIVE DESIGN LOAD (psf)						NEGATIVE DESIGN LOAD (psf)						NEGATIVE DESIGN LOAD (psf)																	
	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105						
3'-0" OR LESS	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6
4'-0"	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6
5'-0"	12	10	10	9	8	8	6	6	6	6	5.5	12	10	10	9	8	8	6	6	6	6	6	5	12	10	10	9	8	7	6	6	6	6	5	4	
6'-0"	12	10	10	9	8	6.5	6	6	6	5.5	4.5	12	10	10	9	8	5	6	6	6	5.5	4.5	12	10	10	9	8	3.5	6	6	6	5	4.5	3.5		
7'-0"	12	10	10	9	8	6.5	6	6	6	5.5	4.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	
8'-0"	12	10	10	9	8	6.5	6	6	6	5.5	4.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	
9'-0"	12	10	10	9	8	6.5	6	6	6	5.5	4.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	
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15'-0"	12	10	10	9	8	6.5	6	6	6	5.5	4.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	
16'-0"	12	10	10	9	8	6.5	6	6	6	5.5	4.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	12	10	10	9	8	3.5	6	6	6	5	4	3.5	

† NOTES:

- ANCHORS TO WALL, FLOOR OR SOLID WOOD DECK SHALL BE AS FOLLOWS:
- 1/4" TYPICAL ANCHORS, AS MANUFACTURED BY S.T.W. BUILDING W/ MINIMUM EMBEDMENT AS INDICATED AT EACH SECTION ON SHEETS 11 & 12.
EXCEPTION: SEE NOTE 2 BELOW.
- ANCHORS TO HOLLOW CEILING SHALL BE AS PER MOUNTING TYPE 7W, SHEET 12 AND SHALL CONSIST OF LAG BOLTS AS PER AIA 1987 SPECIFICATIONS.
- SUBSTRATE SHALL CONSIST OF THE FOLLOWING:
- SOUTHERN PINE No. 2 W/ G=0.55 (A.D.S.)
- DOUGLAS FIR W/ G=0.50 (A.D.S.)
- SPRUCE PINE FIR NORTH W/ G=0.43 (A.D.S.)
- SPRUCE PINE FIR SOUTH W/ G=0.36 (A.D.S.)
- MIN. 1/2" CDX PLYWOOD (1188 APA)
- ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.

F.B.C.(N.H.V.H.Z.)

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TILITY TESTING & ENGINEERING COMPANY
4245 N.W. 21st St., Ste. 217, Virginia Gardens, Ft. Lauderdale, FL 33309
Phone: (304) 377-1530 Fax: (304) 377-1531
e-mail: tileco@aol.com
©-3066710
WALTER A. TILLY, Jr., P. E.
FLORIDA Lic # 44187



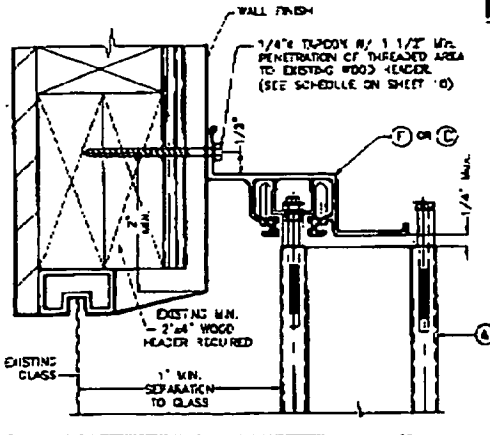
American Shutter Systems
Association, Inc.
4269 Westroads Drive
West Palm Beach, FL 33407

BERTHA™ HIGH VELOCITY
ACCORDION SHUTTER SYSTEM

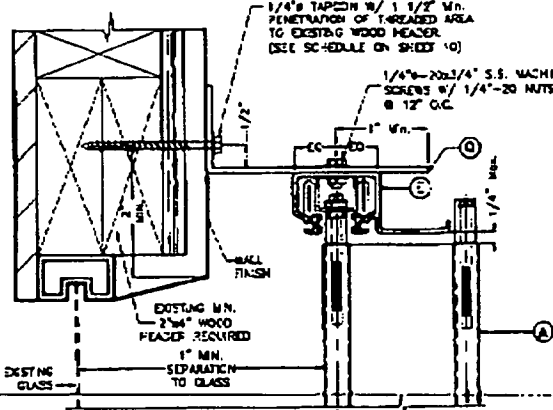
REV. NO.	DESCRIPTION	DATE	SCALE:
1			DATE: 3/20/03
2			DRAWING No
3			03-034
4			SHEET
5			10 OF 12

INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS

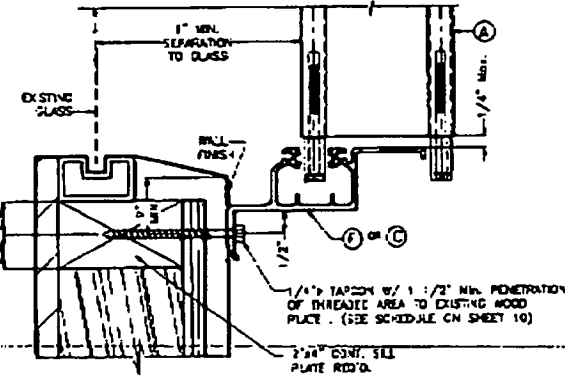
NOTE:
1-SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
2-MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



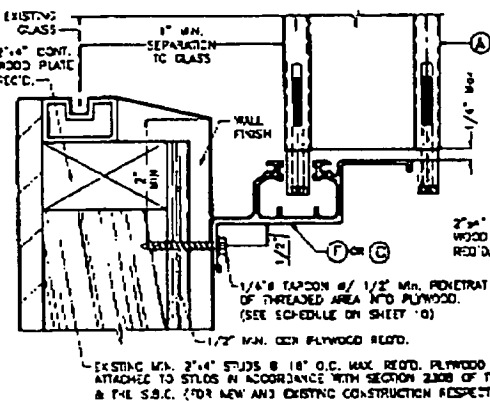
1W WALL CONNECTION AT TOP



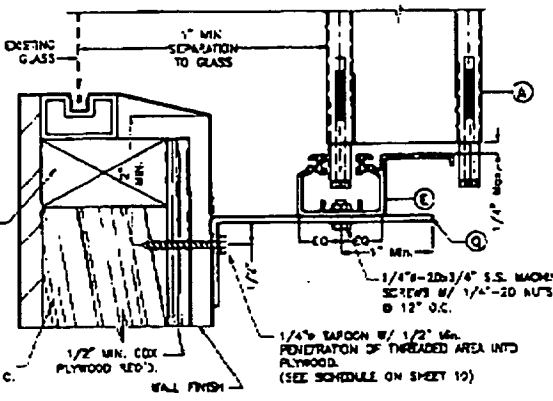
2W WALL CONNECTION AT TOP



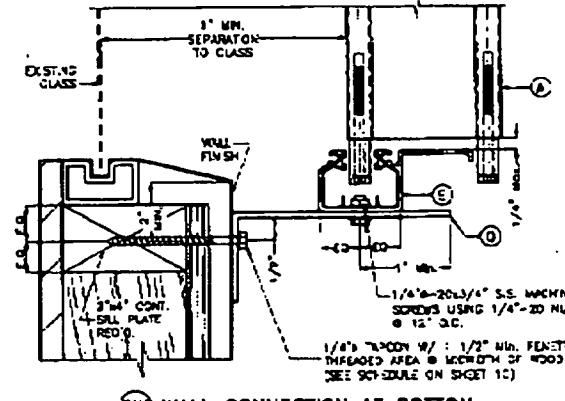
3W WALL CONNECTION AT BOTTOM



4W WALL CONNECTION AT BOTTOM



5W WALL CONNECTION AT BOTTOM



6W WALL CONNECTION AT BOTTOM

F.B.C.(N.H.V.H.Z.)



TILLY TESTING & ENGINEERING COMPANY
420 N.W. 16th St., Box 277, Virginia Gardens, Florida 33408
Phone: (407)871-1530 Fax: (407)871-1531
e-mail: tileco@aol.com
ES-0005719
WALTER A. TILLY, J. P. E.
FLORIDA Lic. # 44187

A.S.S.A.

American Shutter Systems Association, Inc.
4268 Westroads Drive
West Palm Beach, FL 33407

© 2003 EASTERN METAL SUPPLY, INC.

BERTHATM HIGH VELOCITY
ACCORDION SHUTTER SYSTEM

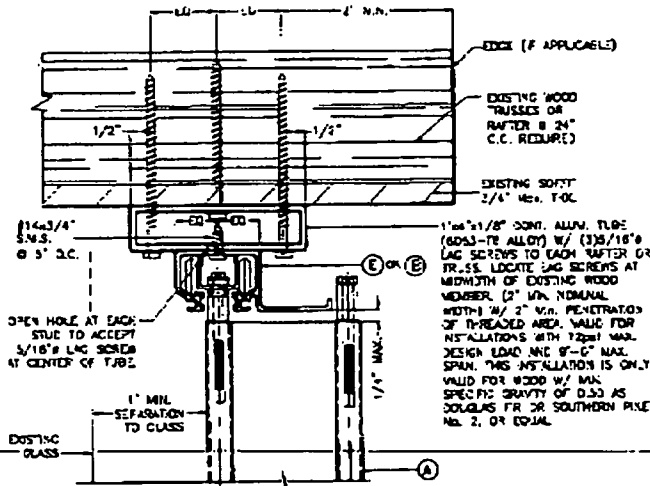
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2			DRAWING NO: 03-034
3			SHEET 11 OF 12
4			
5			
6			

P. 15/16

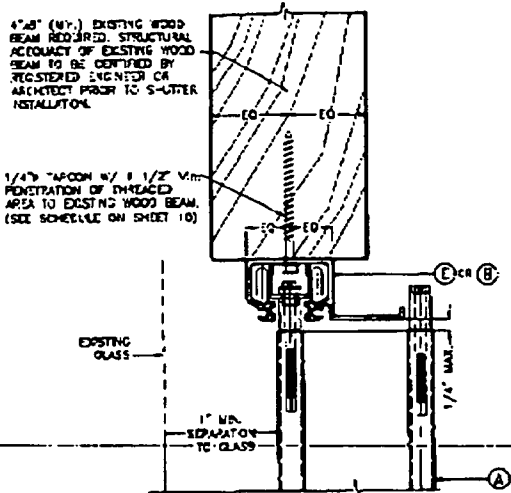
To: 7723345877

7728710990

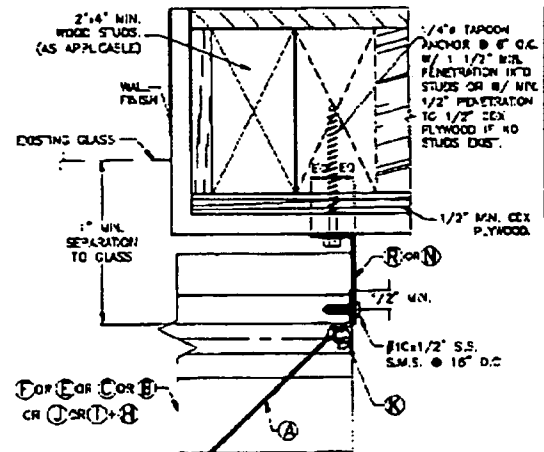
SEP-08-2005 08:37 From: EXPERT SHUTTER



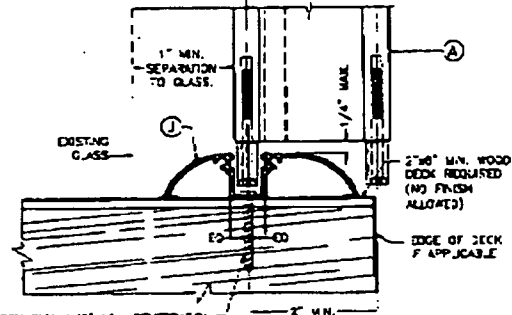
7W HOLLOW CEILING MOUNTING INSTALLATION



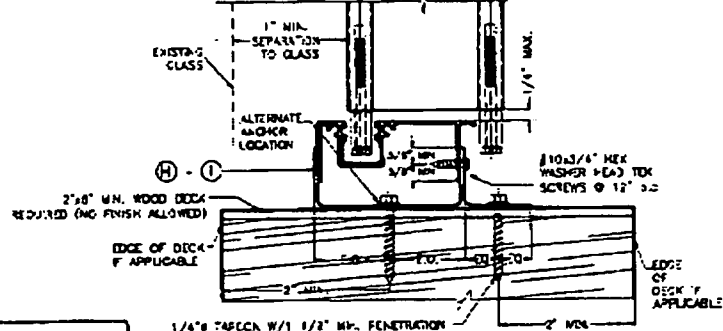
8W SOFFIT MOUNTING INSTALLATION



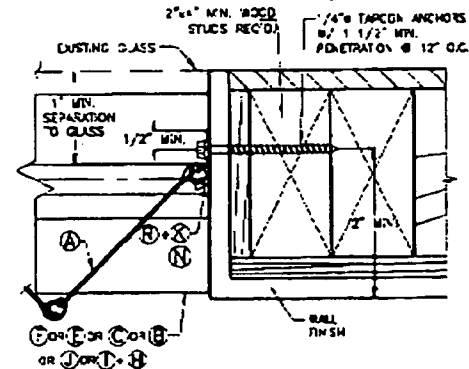
END CONNECTION DETAIL 1W & 4W



9W FLOOR CONNECTION



10W FLOOR CONNECTION



END CONNECTION DETAIL 5W

NOTES:
 1-SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
 2-MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



TILTECO TESTING & ENGINEERING COMPANY
 580 S.W. 28th St., P.O. Box 117, Victoria Park, Florida 32184
 Phone: (321)871-1530 Fax: (321)871-1531
 e-mail: tilteco@co.com
 EB-0006713
 WALTER A. TILLY, Jr., P. E.
 FLORIDA Lic. # 44187



American Shutter Systems
 Association, Inc.
 4263 Westroads Drive
 West Palm Beach, FL 33407

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BERTHA™ HIGH VELOCITY ACCORDION SHUTTER SYSTEM

REV. NO.	DESCRIPTION	DATE	SCALE: 1/4" = 1"
1			DATE: 5/20/03
2			DRAWING No
3			03-034
4			SHEET
5			12 OF 12
6			



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

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

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

CONTRACTOR ENFORCEMENT DIVISION
(305) 375-2966 FAX (305) 375-2908

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Therma-Tru Corporation
1687 Woodlands Drive
Maumee ,OH 43537

Your application for Notice of Acceptance (NOA) of:
"Fiber Classic & Smooth Star" Outswing Residential Ins. Fiberglass Door
under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Types of Construction, and completely described herein, has been recommended for acceptance by the Miami-Dade County Building Code Compliance Office (BCCO) under the conditions specified herein.

This NOA shall not be valid after the expiration date stated below. BCCO reserves the right to secure this product or material at any time from a jobsite or manufacturer's plant for quality control testing. If this product or material fails to perform in the approved manner, BCCO may revoke, modify, or suspend the use of such product or material immediately. BCCO reserves the right to revoke this approval, if it is determined by BCCO that this product or material fails to meet the requirements of the South Florida Building Code.

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

ACCEPTANCE NO.: 01-0912.06
EXPIRES: 09/29/2006

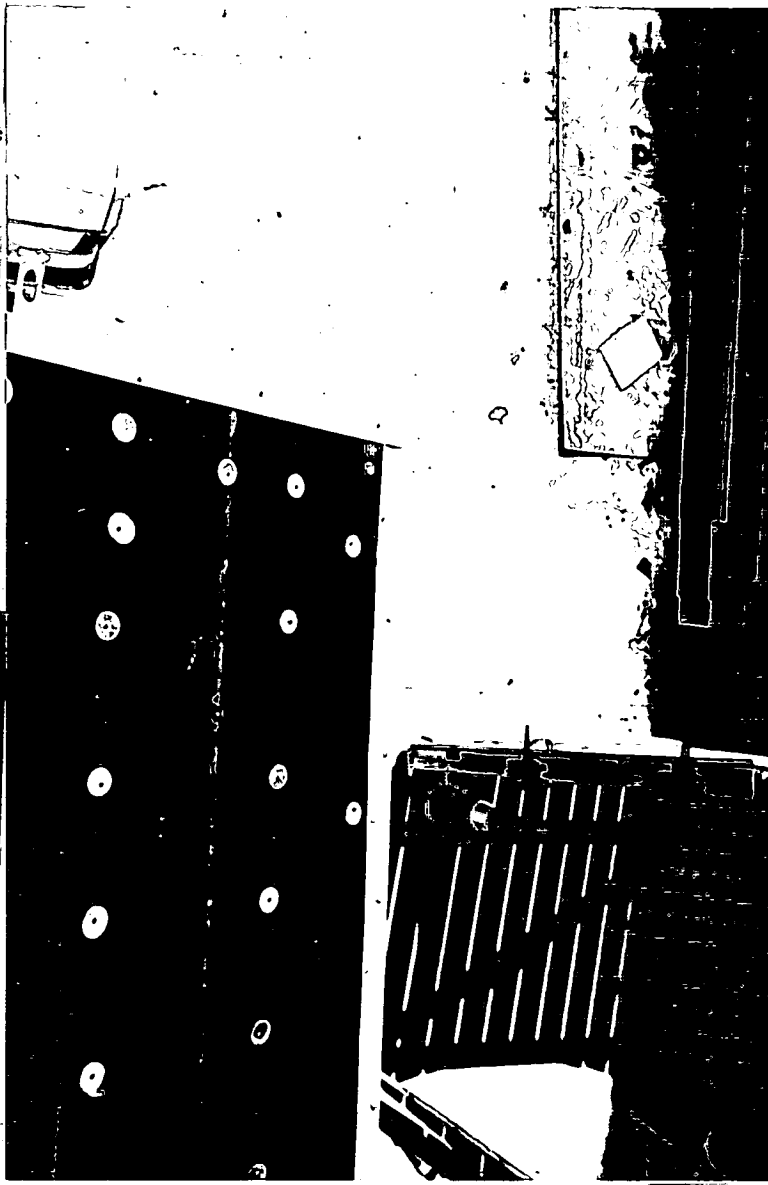
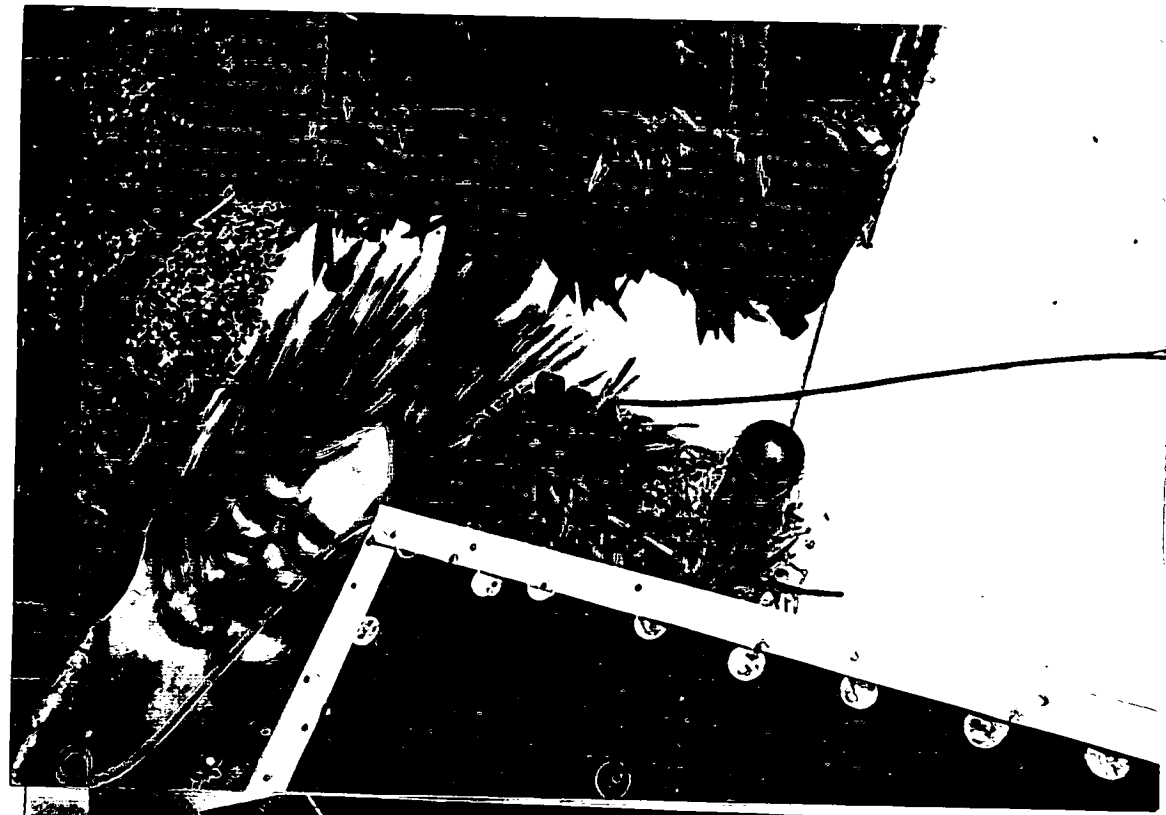
Raul Rodriguez
Chief Product Control Division

**THIS IS THE COVERSHEET, SEE ADDITIONAL PAGES FOR SPECIFIC AND GENERAL
CONDITIONS
BUILDING CODE & PRODUCT REVIEW COMMITTEE**

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

Francisco J. Quintana, R.A.
Director
Miami-Dade County
Building Code Compliance Office

APPROVED: 11/29/2001





TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 47 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.

FOOTING/ SLAB

NEED FORM BOARD SURVEY

MISSING BONDING WIRE
FOR TS COLUMNS WITHIN
6' OF POOL ~~DECK~~
EDGE

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: 11/21


INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/21, 2005 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7776	ELDER	INTERIOR	PASS	
2	4 MARGARITA	GAS ROUGH		INSPECTOR:
	PROPANE DISC.			
6812	MADER	TRUSS ENGR.	PASS	
1	106 ABBIE CT	(REINSPECT)		INSPECTOR:
	BUFORD			
7576	SILAS	ROOF SHEATH.	PASS	
5	10 CASTLE HILL			INSPECTOR:
7776	ELDER	GASTANIL+LINE	PASS	
3	4 MARGUERITA WAY			INSPECTOR:
	PROPANE DISCOUNTERS			
7869	VON STADEN	FINAL ROOF	FAIL	
4	20 N. VIA LUCINDIA			INSPECTOR:
	SEASIDE ROOFING			
7777	CATHEY	FOOTING	FAIL?	
	47 S. Sewall's Pt	11:30		INSPECTOR:
	DRIFWOOD HOMES			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <u> </u>

OTHER: _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 47 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.


SLAB

NO FORM BOARD SURVEY

~~\$40 PENALTY 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: 11/30



INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/30, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	FIELD	TREE	PASS	
11	14 RIDGELAND			INSPECTOR:
6965	FENSTERER	DOOR FRAMING	CANCEL	
8	71 S. SEWALLS RD OIB			INSPECTOR:
7893	GAINAT	FINAL FENCE	FAIL	1
2	53 N. RIVER RD OIB		PASS	- CLOSE INSPECTOR:
7777	CATHER	DECKBOARD	FAIL	\$40 FEE
10	47 S. SEWALLS DRIFTWOOD	(POOL AREA) PADA FR. PORCH	PASS	BOUGHT IN LATER IN PAY INSPECTOR:
7851	MORAN	RGH PLUMBING	PASS	
6	2 PALM ROAD DRIFTWOOD	(UNDERGROUND)		INSPECTOR:
7727	SLATER	ROOF METAL	PASS	
4	4 LAGOON ISLAND CONWAY			INSPECTOR:
	BONIFACE	ADD BUCK	CANCEL	
	63 S. RIVER			INSPECTOR:

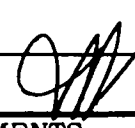
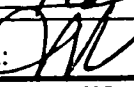



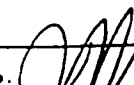
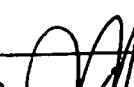
OTHER: _____

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 POOL DECK	PASS	
1	120 HILLCREST O.B.	* FIRST PLEASE		INSPECTOR: 
7949	MARTIN	FINAL FENCE	FAIL	CLOSE
11	25 PERIWINKLE STUART FENCE		PASS	#40 PER 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	CATHEY	ROOF SHEATHING	PASS	
12	47 S. SEWALLS PT DEERWOOD HOMES			INSPECTOR: 

OTHER: _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 47 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.

DPW IN
MISSING DRIP EDGE REAR PORCH ROOF
MISSING SIDEWALL FLASHING IN
FRONT
SIDE WALL FLASHING NOT FASTENED
AT 2ND FL. BALCONY.
RAKE/EAVE NOT LAPPED CORRECTLY
@ CORNER DRIP EDGE
RAKE DRIP EDGE INCORRECTLY
LAPPED @ REAR STORAGE SHED,
NEED ROOFING CEMENT ON VALLEY
& EAVE FLASHING.

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: 2/10

[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7883	DENNISON	TINTAG+METAL	PASS	
15	49 W. HIGH POINT STUART ROOFING	(See att)		INSPECTOR: <i>[Signature]</i>
7908	MARTIN	FINAL POOL + POOL DECK WORK	FAIL	
7	4 FIELDWAY DRIVE AQUATIC SURFACES			INSPECTOR: <i>[Signature]</i>
8021	YAMPOLSKY	ROOF IN PROG.	—	CANCEL —
17	117 HILLCREST DR AN AREA ROOFING			INSPECTOR:
7973	WILCOX	FINAL SCREEN ENCLOSURE	PASS	CLOSE
13	95 S. RIVER RD OCEAN BREEZE AUM			INSPECTOR: <i>[Signature]</i>
7777	Carter	ROOF REPAIR	FAIL	
14	475. Sewall's Pt DRIFTWOOD HOMES	(ADDITION) TINTAG+METAL		INSPECTOR: <i>[Signature]</i>
				INSPECTOR:
				INSPECTOR:

OTHER: _____



7777

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 47 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.

DTM - 1W

LOW SLOPE ROOF ON WEST CANNOT
UTILIZE SHINGLE ROOF SYSTEM
SUBMIT PRODUCT APPROVAL FOR
ALTERNATE MATERIAL.

ROOF CEMENT ALL EAVE FLASHING
ADD NAILING AT PORCH WALL FLASH.
ADD FLASHING WHERE NEW RIDGE
INTERSECTS EXIST. ROOF.

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: 2/15

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/15, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7785	PREUSSMAN	FINAL ROOF	PASS	CLOSE
8	28 RIO VISTA DE PACIFIC ROOF			INSPECTOR: <i>OM</i>
7777	CARNEY	ADDITION DRY-IN	FAIL	
5	47 S. SEWALLS PKWY PACIFIC ROOFING			INSPECTOR: <i>OM</i>
7993	GIACHINO	SLAB	PASS	
9	11 WENDY LANE SEA GATE BUILDERS	11:00 EARLY PLEASE 263-4448		INSPECTOR: <i>OM</i>
7580	SILAS	IN Prog REG	PASS	
10	10 CASTLE HILL WAY GEN'L SVCS OF FL			INSPECTOR: <i>OM</i>
8021	VAMPOLSKY	IN Prog REG	FAIL	
6A	117 HILLCREST DR			INSPECTOR: <i>OM</i>
8045	TOPPING	FRAMING	FAIL	
4	7 MIDDLE RD SPECIAL FORCES	DRY-IN (CORNER GARAGE)		\$40 FEE! INSPECTOR: <i>OM</i>
7809	D'ALESSANDRO	ELEC-ADDITION	PASS	- PARTIAL IN PROG.
6B	4 EMARITA WAY O/B	ROOF DECLINE	PASS	INSPECTOR: <i>OM</i>

OTHER: (20 CRANES NEST WORK BEFORE 8:00AM)

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/17, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8047	MORAN	FINAL ROOF (W/HOUSE)	PASS	
4	2 PALM ROAD PACIFIC ROOFING	DRY-IN		INSPECTOR: <i>AM</i>
7851	MORAN	FINAL ROOF (ADDED)	PASS	
4	2 PALM RD PACIFIC ROOFING	DRY-IN		INSPECTOR: <i>AM</i>
7977	CATHEM	FINAL ROOF (ADDED)	PASS	
9	47 S. SEWALLS PT PACIFIC	DRY-IN		INSPECTOR: <i>AM</i>
8056	GESSER	WINDOW BUCK	FAIL	
8	53 S. SEWALLS PT NATURAL FLOW			INSPECTOR: <i>AM</i>
8012	TEANTOR	ROOF SHEATHING	CANCEL	
12	9 MIDDLE ROAD PARKS	*LAST PLEASE*		INSPECTOR:
7842	ZIEGLER	FINAL ROOF	PASS	CLOSE
7	71 S. RIVER RD AN AMERICAN			INSPECTOR: <i>AM</i>
8028	BABUE	FENCE FINAL	PASS	CLOSE
6	101 S. SEWALLS PT OLB			INSPECTOR: <i>AM</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/22, 2006 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7822 7822	MCKEON MCKEON	FW FW		
	7 QUAIL RUN LA			
	LOWE'S			INSPECTOR:
8021	YAMPOLSKY	IN PROG ROOF	PASS	
8	117 HILLCREST			
	ALL AREA ROOFING			INSPECTOR: <i>OM</i>
7777	CATHEM	FINAL ROOF	PASS	
6	47 S. SEWALL'S PT			
	PACIFIC ROOFING			INSPECTOR: <i>OM</i>
8047	MORAN	FINAL ROOF	PASS	CLOSE
4	2 PALM ROAD	(MAIN HOUSE)		
	PACIFIC ROOFING			INSPECTOR: <i>OM</i>
7851	MORAN	FINAL ROOF	PASS	
4	2 PALM ROAD	(ADDITION)		
	PACIFIC ROOFING			INSPECTOR: <i>OM</i>
7984	LEWIS	CONCRETE FENCE	PASS	CLOSE
5	43 RIO VISTA DR	FINAL		
	COMMERCIAL CONX.			INSPECTOR: <i>OM</i>
8064	SHECODNIC	POOL STEEL + BAND	PASS	
9	12 S. SEWALL'S PT			
	OLYMPIC POOL			INSPECTOR: <i>OM</i>
OTHER: _____				



7777

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 47 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.

FRAMING -

NEED ENGR. APPROVAL FOR
METHOD OF ROOF EXTENSION
OVER REAR PORCH.

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: 2/24

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/24, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7934	PARUS	POOL DUMBING	FAIL	
7	3 MINDORO ST OLYMPIC POOLS			\$40 FEE INSPECTOR: <i>OM</i>
777	CATHER	FRAMING	FAIL	
10	47 S. SEWALL'S PKWY DRIFTWOOD HOMES	STRAPPING	PASS	INSPECTOR: <i>OM</i>
718	SCHOPPE	CHIMNEY TIE BEAM	PASS	
6	9 PALM ROAD A&P CONST.			INSPECTOR: <i>OM</i>
7958	LEIGHTON	FR. DOOR BURR		WILL RESCHEDULE
4	43 W. HIGH POINT O/B			INSPECTOR: <i>OM</i>
8063	STEEL	IN GR. TANK + LINES	FAIL	
1	32 FIELDWAY DR MARTIN COUNTY PROMISE	CAS TROUGH	FAIL	INSPECTOR: <i>OM</i>
8067	TOWN PARK-	FINAL FENCE REPAIR	PASS	
14	HERITAGE WAY STUART FENCE			INSPECTOR: <i>OM</i>
7809	D'AUSSANDRO	FINAL ROOF		WILL RESCHEDULE
13	4 EMARITA WAY O/B	WINDOWS	PASS	INSPECTOR: <i>OM</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/27, 2006 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8012	TRANTEE	STRAPPING	PASS	
3	9 MIDDLE RD	ROOF SHEATHING	WILL RESCHEDULE	INSPECTOR: <i>[Signature]</i>
	PARKS			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7503	LADD	FINAL RENOVATION	FAIL PASS	CLOSE
5	21 SIMARA ST			INSPECTOR: <i>[Signature]</i>
	HARTEN CULFIELD			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7874	SLATER	TIE DOWN	FAIL	
2	4 LAGOON ISLET	SUBSIDING		INSPECTOR: <i>[Signature]</i>
	CONWAY			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7632	GEISINGER	FINAL RENOV.	PASS	CLOSE
1	8 CASTLE HILL WAY	GUEST HOUSE		INSPECTOR: <i>[Signature]</i>
	O/B	? EARLY PLEASE		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7117	CARREN	ELECTRICAL	PASS	
6	47 S. SEWALL ST	ROUGH IN.		INSPECTOR: <i>[Signature]</i>
	HERITAGE ELEC			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6772	ELDER	POWER RELEASE	FAIL	
4	4 MARGUERITA WAY	SWALE	PASS	INSPECTOR: <i>[Signature]</i>
	O/B			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	MORALES	TREE	PASS	
8	10 N. RIDEVIEW			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7809	D'ALESSANDRO	ELEC ROUGH	PASS	
9	4 EMARITA WAY			
	OLB			INSPECTOR: <i>[Signature]</i>
8083	KUAPIL	A/C CHANGEOUT	PASS	
6	4 RIO VISTA	(not ok condenser)	FAIL	
	NISAR	EFF 260-2067		INSPECTOR: <i>[Signature]</i>
7925	DAINS	FINAL ROOF	PASS	
7	62 S. SEWALLS PT			
	OLB			INSPECTOR: <i>[Signature]</i>
7873	NOHETL	TRUSS ENCL	PASS	
1	26 W. HIGH POINT	FRAMING	FAIL	
	OLB	ELEC ROUGH	PASS	INSPECTOR: <i>[Signature]</i>
11	11	PUMB ROUGH	FAIL	
1	11			
	11			INSPECTOR: <i>[Signature]</i>
6812	MADEK	A/C ROUGH	PASS	
3	106 ABBIE COURT	PUMBING (6815)	FAIL	
	BUFORD	WINDOWS	FAIL	INSPECTOR: <i>[Signature]</i>
7117	CATTON	INSULATION	PASS	
8	475 SEWALLS PT			
	DRIFTWOOD HOMES			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/22, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8008	BRISCOE	DOOR BUCL	PASS	
8	5 GUMBO LIMBO O/B			INSPECTOR:
8064	SEAFORDNIC	Pool Plumbing	PASS	
9	12 S. OLYMPIC POOLS			INSPECTOR:
TREE	FETNER	TREE	PASS	
4	2 HIGH POINT NATURAL BAL.			INSPECTOR:
7777	WATKINS	LANE	PASS	
	47 S. SPN. ALAN MORRIS			INSPECTOR:
7833	BRISCOE	POWER RELEASE	FAIL	
	5 GUMBO LIMBO O.B			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____



7777

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 47 S.SPR

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.

DRIVEWAY POND

PROVIDE SWALE THROUGH
END OF DRIVE TO ALLOW
FREE RAINWATER FLOW.

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

DATE: 5/12

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/12, 2006

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7777	CATHERY	Driveway	FAIL	
7	475 SPR Driftwood			INSPECTOR: <i>[Signature]</i>
7837	KUAPIL	PLB. ROUGH	PASS	
8	4 RIO VISTA ADVANCED			INSPECTOR: <i>[Signature]</i>
8012	TRANTER 9 MIDDLE ROAD PARKS CO	ETC ROUGH	PASS	AT PORCH (FRONT)
				INSPECTOR: <i>[Signature]</i>
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-17, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1801	Cummings	Tie beam	FAIL	
4	83 S. River Rd Elias Mgmt			INSPECTOR: <i>OM</i>
7164	Rucks	Lath insp	PASS	PARTIAL FRONT
8	20 N. SPR Masterpiece	Partial front line <small>Call John if questions 215-9614</small>		ENTRANCE INSPECTOR: <i>OM</i>
8226	Tschanner	Pin tab	PASS	
6	15 Emancipita Way Denmark	Nail sheating		INSPECTOR: <i>OM</i>
7118	Raab	Final dock	DUPLICATE	
	22 Simons St			INSPECTOR:
7380	Bonface	Final	PASS	WAITING FOR
4A	635 River Rd Wilson 288-2000-			FINAL \$ CLOSE INSPECTOR: <i>OM</i>
Tree	Dominica	Tree	PASS	
9A	6 Feldway Dr Carlos			INSPECTOR: <i>OM</i>
7177	Couchey	Partial front line	PASS	
4B	47 S. SPR Driftwood			INSPECTOR: <i>OM</i>

OTHER:

16 RIDGEVIEW



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 47 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.

FINAL

NEED FINAL SURVEY

COVER J-BOX @ SOFFIT

CAULK HOSE BIB

INSTALL SOFFIT VENTS AT STORAGE.

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: 12/13

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-13, 2006 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8453	Bills	Final	PASS	CLOSE
8	3 N. Via Luindia Reamer			INSPECTOR: <i>[Signature]</i>
8463	Cocorullo	Final-fence	PASS	CLOSE
4	20 Island Rd Berley Gates			INSPECTOR: <i>[Signature]</i>
mm	Cook	FINAL	FAIL	
9	41 S Sewall St Duffwood	215-0074 <u>ALAN</u>		INSPECTOR: <i>[Signature]</i>
8172	Mariano	Footings + slab	PASS	ASSUMING RECEIPT OF BURR. FOOTING DESIGN CHANGES.
13	23 Middle Rd Ken Wendell			INSPECTOR: <i>[Signature]</i>
	Smith	Flags on lot		
5	1335 River Rd owner	(see me)		INSPECTOR: <i>[Signature]</i>
MC 0027		TIE BEAM	FAIL	
11	3 TUSCAN MASTER PIECE		PASS	REINSPECTED LATE MORNING INSPECTOR: <i>[Signature]</i>
MC 0088	POOLE	SLAB	FAIL	
13	94 S.S.P.R.			INSPECTOR: <i>[Signature]</i>
OTHER:	POWERS	FINAL		
10413	70 SOUTH S.P.R.D. F.P.C.		PASS	CLOSE <i>[Signature]</i>



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 47 SSPP

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

FINAL

NO FINAL SURVEY

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

DATE: 1/13

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon ^{THURS} Wed Fri 1-18, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8474	Wallenquist	Final-screen	PASS	CLOSE
5	3 Espaine Rd Eden Screen			INSPECTOR: <i>[Signature]</i>
0044	Kremsler	Final roof	PASS	CLOSE
3	23 Ridgeland Dr Regency Roofing			INSPECTOR: <i>[Signature]</i>
8398	Helfman	Final	PASS	CLOSE
2	8 Ridgeland Dr Hardwire Elec.			INSPECTOR: <i>[Signature]</i>
1111	Cothran	final	FAIL	
4	475 Sewalls Pt Driftwood			INSPECTOR: <i>[Signature]</i>
		w/o permit??	—	ISSUED
6	63 N. River Rd			STOP WORK ORDER INSPECTOR: <i>[Signature]</i>
8441	Dressler	garage slab	FAIL	
1	12 Island Rd Harbor Course			INSPECTOR: <i>[Signature]</i>
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1-19, 2007

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8489	TULLIEK	DRY-IN	FAIL	
8	39 N. RIVER	287-2829		
	CODE RED	NAILING	PASS	INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8441	DRESSLER	GAR. SLAB	PASS	
2	12 IS. ROAD.			
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8464	Valko	Tiki Final	PASS	CLOSE
	107 Hillcrest			
	O/B			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8477	Cathay	Final	PASS	CLOSE
	47 S. Sewalls Pt			
	Driftwood			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

9475
REMODEL
(INTERIOR)



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:	9475	DATE ISSUED:	JUNE 17, 2010
SCOPE OF WORK:	INTERIOR REMODEL		
CONDITIONS :			
CONTRACTOR:	EMIL LAVIOLA CUSTOM HOMES		
PARCEL CONTROL NUMBER:	013841005-000-002602	SUBDIVISION	EMARITA - LOT 26
CONSTRUCTION ADDRESS:	47 S SEWALLS PT RD		
OWNER NAME:	DIAZ		
QUALIFIER:	EMIL LAVIOLA	CONTACT PHONE NUMBER:	465-2433

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

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

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

REQUIRED INSPECTIONS

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

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

Town of Sewall's Point

9475

Date: 5/27/10 BUILDING PERMIT APPLICATION Permit Number:

OWNER/TITLEHOLDER NAME: Veronica A. Diaz Phone (Day) 786.457.1717 (Fax)

Job Site Address: 47 S Sewalls Point Rd City: Stuart State: FL Zip: 34996

Legal Description: Emerald Lot 26 Parcel Control Number: 01-38-41-005-200-00260-2

Owner Address (if different): Interior Remodel City: State: Zip:

Scope of Work (Please be Specific): Termites Repair Replace Bath Fix Tile Flooring Trim Paint Electrical

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: \$ 25,000.00 (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

CONTRACTOR/Company: Emil Lavola Phone: 772-45-7433 Fax: 772-282-4915 Street: 900 ANITA STREET City: Ft Pierce State: FL Zip: 34982

State License Number: CB038935 OR: Municipality: License Number:

LOCAL CONTACT: Emil Lavola Phone Number: 772-284-2598

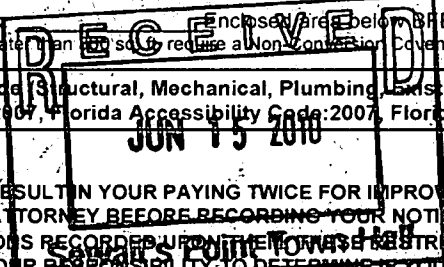
DESIGN PROFESSIONAL: Gary Kelly Lic#: Phone Number: 772-293-3492

Street: 119 WEST 6th ST City: Stuart State: Zip:

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

Carport: Total under Roof Elevated Deck Enclosed Area below BFE: * Enclosed non-habitable areas below the Base Flood Elevation greater than 100 sq ft require a Non-Construction Covenant Agreement.

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



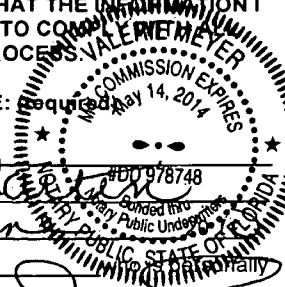
NOTICES TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. 2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 60-96. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .6.

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

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

OWNER SIGNATURE: (required) OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED) State of Florida, County of: ALLEGHENY This the 27th day of MAY, 2010 by VERONICA DIAZ who is personally known to me or produced. FLORIDA DRIVERS LICENSE as identification.

CONTRACTOR SIGNATURE: (required) On State of Florida, County of: ALLEGHENY This the 15th day of June, 2010 by Emil Lavola known to me or produced. ALLEGHENY as identification.



My Commission Expires: 8/15/2011 Notary Seal Patricia R. Seals, Notary Public City of Pittsburgh, Allegheny County My Commission Expires:

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 90 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED AS NEW APPLICATIONS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

Prepared by and return to:
Robert S. Kramer, Esq.
Kramer, Sopko & Levenstein, P.A.
2300 SE Monterey Road Suite 100
Stuart, FL 34996
772-288-0048
File Number: 7136.04
Will Call No.:

Parcel Identification No. 01-38-41-005-000-00260-20000

[Space Above This Line For Recording Data]

Warranty Deed

(STATUTORY FORM - SECTION 689.02, F.S.)

This Indenture made this 9th day of April, 2010 between Carl W. Cathey and Gloria A. Cathey, husband and wife whose post office address is 3411 SW Canoe Creek Terrace, Palm City, FL 34990 of the County of Martin, State of Florida, grantor*, and Veronica A. Diaz, a single woman whose post office address is 47 S. Sewall's Point Road, Stuart, FL 34996 of the County of Martin, State of Florida, grantee*,

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Martin County, Florida, to-wit:

Lot 26, EMARITA, according to the Plat thereof, as recorded in Plat Book 3, Page 86, of the Public Records of Martin County, Florida.

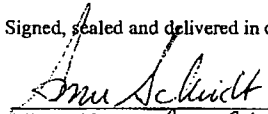
Subject to taxes for 2010 and subsequent years; covenants, conditions, restrictions, easements, reservations and limitations of record, if any.

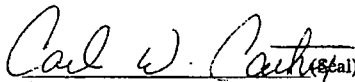
and said grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

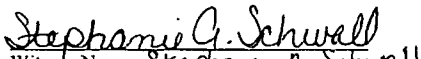
* "Grantor" and "Grantee" are used for singular or plural, as context requires.


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

Signed, sealed and delivered in our presence:


Witness Name: Anne Schmidt


Carl W. Cathey

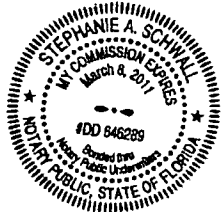

Witness Name: Stephanie A. Schwall

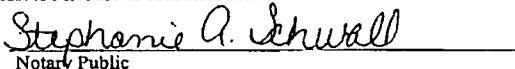

Gloria A. Cathey

State of Florida
County of Martin

The foregoing instrument was acknowledged before me this 9th day of April, 2010 by Carl W. Cathey and Gloria A. Cathey, who are personally known or have produced a driver's license as identification.

[Notary Seal]




Notary Public

Printed Name: Stephanie A. Schwall

My Commission Expires: 3/8/2011



Martin County, Florida
Laurel Kelly, C.F.A

Site Provided by...
 governmax.com T1.11

Summary

print | 1 of 1 | Address 1 of 1

Parcel Info

Summary

- Land
- Residential
- Improvement
- Commercial
- Image
- Sales & Transfers
- Assessments →
- Taxes →
- Exemptions →
- Parcel Map →
- Full Legal →

Parcel ID	Unit Address	SerialIndex ID	Order	Commercial	Residential
01-38-41-005-000-00260-2	47 S SEWALLS PT RD	17641	Address	0	1

Summary

Property Location 47 S SEWALLS PT RD
Tax District 2200 Sewall's Point
Account # 17641
Land Use 101 0100 Single Family
Neighborhood 120200
Acres 0.415

Legal Description
Property Information
 EMARITA, LOT 26

Search By

- Parcel ID
- Owner
- Address**
- Account #
- Use Code
- Legal Description
- Neighborhood
- Sales
- Map →

Owner Information
Owner Information
 CATHEY, CARL W & GLORIA A

Mail Information
 47 SE SEWALL'S PT
 STUART FL 34997

Assessment Info
Front Ft. 0.00

Market Land Value \$157,700
Market Impr Value \$216,410
Market Total Value \$374,110

Site Functions

- Property Search**
- Contact Us
- On-Line Help
- County Home
- Site Home
- County Login

Recent Sale
Sale Amount \$465,000

Sale Date 4/9/2004
Book/Page 1882 2316

Print | << First < Previous Next > Last >>

Legal disclaimer / Privacy Statement

Data updated on 4/29/2010





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

SUBCONTRACTORS LIST
 RESIDENTIAL, ADDITIONS, COMMERCIAL

APPLICANT'S NAME Emil Laviok BLDG. PERMIT # _____

MAILING ADDRESS 900 Anita Street Ft Pierce

PLEASE PROVIDE A PRELIMINARY SUBCONTRACTORS LIST FOR VERIFICATION. THIS LIST WILL BE RETURNED TO YOU WHEN THE BUILDING PERMIT IS ISSUED TO ENABLE YOU TO COMPLETE AND RETURN TO THE BUILDING DEPARTMENT. WE REQUIRE, PRIOR TO STARTING WORK, UPDATES, CHANGES AND ADDITIONS THROUGHOUT CONSTRUCTION. USING UNLICENSED CONTRACTORS OR SUBCONTRACTORS MAY PREVENT YOU FROM BEING ELIGIBLE FOR INSPECTIONS AND OR A CERTIFICATE OF OCCUPANCY. FOR INFORMATION CONTACT THE CONTRACTOR'S LICENSING OFFICE AT (772) 288-5482 OR (772) 288-5917. PLEASE INCLUDE ALL MUNICIPAL COMPETENCY CARD NUMBERS OR STATE CERTIFICATION NUMBERS. (NOT OCCUPATIONAL LICENSE NUMBERS)

	TYPE	COMPANY NAME	LICENSE NUMBER
CFO	CONCRETE - FORM		
CFI	- FINISH	N/A	
BM	BLOCK MASON	N/A	
CB	COLUMNS & BEAMS	N/A	
CA	CARPENTRY ROUGH	Emil Laviok	
GD	GARAGE DOOR	T.C. GARAGE DOOR	
DH	DRYWALL - HANG		
DF	- FINISH	ADDISON Drywall	
IN	INSULATION	Emil Laviok	
LA	LATHING	N/A	
FI	FIREPLACE	N/A	
PAV	PAVERS	NA	
AL	ALUMINUM	NA	
LP	LP GAS	NA	
PAV	PAINTING	Kents Painting	
PL	PLASTER & STUCCO	N/A	
ST	STAIRS & RAILS	N/A	
RO	ROOFING	N/A	
TM	TILE & MARBLE	Emil Laviok	
WD	WINDOWS & DOORS	N/A	
PLU	* PLUMBING	White	
AC	* HARV	N/A	
EL	* ELECTRICAL	Blessen electric	

ok
ok
ok



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

AL	* LOW VOLTAGE BURGLAR ALARM	N/A	
VS	VACUUM SOUND	N/A	
IR	* IRRIGATION	N/A	
SH	SHUTTERS	N/A	

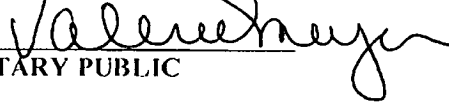
* REQUIRES SEPARATE VERIFICATION FORMS.

I CERTIFY THAT THE INFORMATION STATED ON THE SUBCONTRACTORS' LIST IS ACCURATE AND THAT ALL WORK WILL BE PERFORMED BY MUNICIPAL OR STATE LICENSED CONTRACTORS. I UNDERSTAND THAT A COMPLETE NOTARIZED SUBCONTRACTORS LIST IS REQUIRED PRIOR TO ISSUANCE OF A CERTIFICATE OF OCCUPANCY.

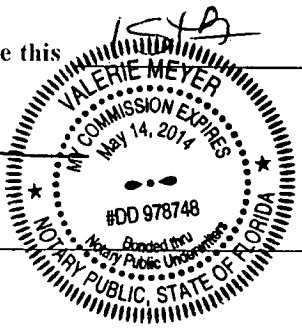

 Emil LaViola
 SIGNATURE OF CONTRACTOR
 (OR OWNER BUILDER IF APPLICABLE)

STATE OF Florida
 COUNTY OF Martin

SWORN TO AND SUBSCRIBED before me this 15th day
 of June, 2010


 NOTARY PUBLIC

MY COMMISSION EXPIRES: _____





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: 9475

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

OWNERS NAME: NERONICA DIAZ

CONSTRUCTION ADDRESS: 47 S Sewall's Pt RD.

PERMIT TYPE: RESIDENTIAL COMMERCIAL
 ELECTRIC
 PLUMBING
 HVAC
 IRRIGATION
 FUEL GAS
 ROOFING

TYPE OF SERVICE: NEW SERVICE EXISTING SERVICE OTHER

SCOPE OF WORK: HANG FIXTURES - REPLACE RECEPTLES - NEW INSTA 410T

VALUE OF CONSTRUCTION \$ \$ 1500⁰⁰

LOW VOLTAGE
TYPE OF EQUIPMENT: SECURITY VACUUM SOUND SYSTEM LANDSCAPE OTHER
SCOPE OF WORK: _____ VALUE: _____

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

SIGNATURE OF LICENSED CONTRACTOR

Blosser Electric Inc.
P.O. Box 7305
Port St. Lucie FL 34985
ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: KENT Blosser

TELEPHONE NO: 772-337-0055 FAX NO: 772-337-2699

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: EC 1300 1570

** 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: Neronica Diaz

PARCEL CONTROL #: 013841005-000-002602

SUBDIVISION: Emirata LOT: 26 BLK: _____ PHASE: _____

SITE ADDRESS: 47 S Sewall's Pt. RD.

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

VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER: 9475

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

OWNERS NAME: Veronica Diaz

CONSTRUCTION ADDRESS: 47 S Sewalls Pt. Rd

PERMIT TYPE: RESIDENTIAL COMMERCIAL

- ELECTRIC
- PLUMBING
- HVAC
- IRRIGATION
- FUEL GAS
- ROOFING

TYPE OF SERVICE: NEW SERVICE EXISTING SERVICE OTHER

SCOPE OF WORK: REPLACE Fixtures Hook UP INSTA HOT

VALUE OF CONSTRUCTION \$ 1800

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

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

SIGNATURE OF LICENSED CONTRACTOR

P.O. Box 2682 - Stuart, FL 34995 ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: White Plumbing Ent. / Bryant McPheeters

TELEPHONE NO: 772-287-6925 FAX NO: 772-287-6945

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: _____

** 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: Veronica Diaz

PARCEL CONTROL #: 013841005 - 01 - 002602

SUBDIVISION: EMILATA LOT: 26 B.L.K.: _____ PHASE: _____

SITE ADDRESS: 47 S Sewalls Pt Rd.

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

220-4765



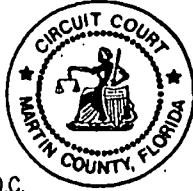
INSTR # 2217925
 OR BK 02461 PG 0816
 Pg 0816 (1pg)
 RECORDED 06/24/2010 10:25:51 AM
 MARSHA EWING
 CLERK OF MARTIN COUNTY FLORIDA
 RECORDED BY S Phoenix

STATE OF FLORIDA
 MARTIN COUNTY

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

MARSHA EWING, CLERK

BY: [Signature] D.C.
 DATE: 6-24-10



NOTICE OF COMMENCEMENT

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$7,500.00 OR HVAC EXCEEDS \$7,500.00

PERMIT #: 9475 TAX FOLIO #: 01-38-41-005-000-20260-2

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):
EMERALD LOT 26

GENERAL DESCRIPTION OF IMPROVEMENT: Repairs + Alterations

OWNER NAME: Veronica Diaz
 ADDRESS: 45840 ST #3 Pittsburgh, PA 15224
 PHONE NUMBER: 724-457-1717 FAX NUMBER: _____

After 7/31/10:
 47 S Sewalls Point Rd
 Stuart, FL 34996

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

CONTRACTOR: Emil Laviole
 ADDRESS: 9th Ave S, Street PT 2, 34982
 PHONE NUMBER: 772-284-7558 FAX NUMBER: 772-882-4915

SURETY COMPANY (IF ANY): N/A
 ADDRESS: _____
 PHONE NUMBER: _____ FAX NUMBER: _____
 BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY: N/A
 ADDRESS: _____
 PHONE NUMBER: _____ FAX NUMBER: _____

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

NAME: _____
 ADDRESS: _____
 PHONE NUMBER: _____ FAX NUMBER: _____

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

FLORIDA STATUTES:
 PHONE NUMBER: _____ FAX NUMBER: _____

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

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

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

SIGNATORY'S TITLE/OFFICE: _____

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 21ST DAY OF JUNE, 2010

BY: PATRICIA SEALS AS Notary Public FOR VERONICA DIAZ
 NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

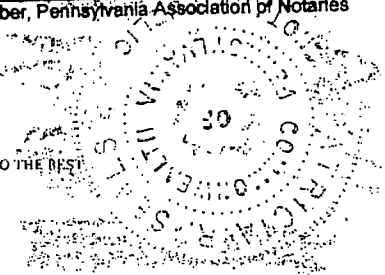
PERSONALLY KNOWN _____ OR PRODUCED IDENTIFICATION X
 TYPE OF IDENTIFICATION PRODUCED FL. DENVERSLIC

[Signature]
 NOTARY SIGNATURE SEAL

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

X [Signature]
 (Signature of Natural Person Signing Above)

COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 Patricia R. Seals, Notary Public
 City of Pittsburgh, Allegheny County
 My Commission Expires Aug. 15, 2014.
 Member, Pennsylvania Association of Notaries



PN 9475

Faxed to Emil
7/20/10 X/MS

~~MARTIN COUNTY BUILDING DEPARTMENT~~
~~900 SEBASTIAN STREET~~
~~SEBASTIAN~~
~~FLORIDA 32909~~

TOWN OF SEWALL'S POINT

Electrical Load Calculations

Electrical Contractor: Blosser Electric, Inc.
Phone #: 772 337-0055 Fax #: 772 337-2199
Project: Diaz Residence Location: 47 S. Sewall's Pt. Rd.
Existing Service Feeder Size: _____ Existing Panel Size: _____
Main Breaker Size: _____ Number of Breakers: _____

Existing Loads

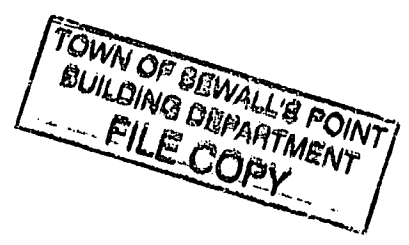
<u>3000</u> Sq. Ft. X 3 watts per sq. ft.....	<u>9000</u>	watts
<u>2</u> Appliance cir. @1500 watts each.....	<u>3000</u>	watts
<u>1</u> Laundry cir. @ 1500 watts each.....	<u>3000</u>	watts
<u>1</u> Range @ 8 kw.....	<u>8000</u>	watts
<u>1ea</u> Dishwasher and disposal @ 1500 watts each.....	<u>3000</u>	watts
<u>1</u> Microwave @ 2000 watts.....	<u>2000</u>	watts
Water heater @ 4.5 kw.....		watts
Tankless water heater.....	<u>8000</u>	watts
Dryer @ 5 kw.....	<u>5000</u>	watts
Refrigerator @ 1500 watts.....	<u>1500</u>	watts
Bathroom 1 @ 1500 watts.....	<u>1500</u>	watts
Sprinkler Pump.....		watts
Other.....		watts
Other.....		watts
Other.....		watts



Sub total 44000 Watts

New Loads

Pool pump.....		watts
Pool light.....		watts
Heat pump.....		watts
Chlorine generator.....		watts
Air blower.....		watts
Boatlif.....		watts
Other.....		watts
Other.....		watts
Other.....		watts



Total 44000 Watts

First 10 kw @ 100%.....	<u>10000</u>	watts
Remainder @ 40%.....	<u>13600</u>	watts
A/C heat @ 100%.....	<u>10000</u>	watts

Total watts 33600 Divided by 240 volts = 140 A Amps - 150-A

Prepared by: _____ Date: _____



K E L L Y & K E L L Y A R C H I T E C T S



June 21, 2010

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

RE: Diaz Residence
47 South Sewall's Point Road
Permit #9475

Dear Sir or Madam,

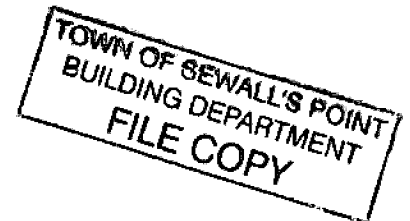
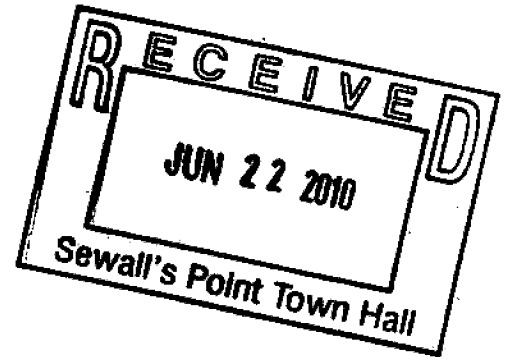
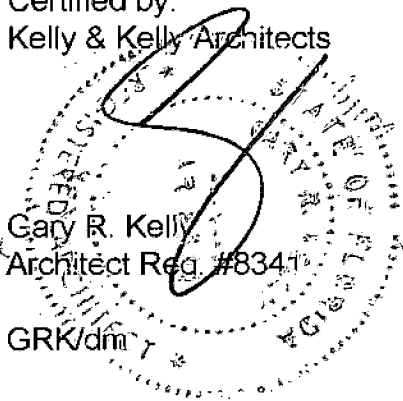
The existing stucco shall be secured to the new wood framing with counter sunk 2" long galvanized deck nails at 6" o/c. and all holes shall be patched to match the existing finish.

All materials and methods are acceptable to the architect.

Certified by:
Kelly & Kelly Architects

Gary R. Kelly
Architect Reg. #8341

GRK/dm



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 6-25 2010 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9463 Bot 11+12	Vincenzo 4 Riverview Dr Nislin	Final AC	Pass	Close INSPECTOR <i>[Signature]</i>
9475	Diary 475 Sewalls Pt Emil LaViola	Hammer Electric	OK	INSPECTOR <i>[Signature]</i>
9719	BELITZ 10 S. VIA LUCINDA	Dry-in & METAL	Pass	INSPECTOR <i>[Signature]</i>
1028	LANSON 132 S. RIVER RD		OK	INSPECTOR
9472	BURKARTH 5 EMARITA ALL AMERICAN	Dry-IN METAL	Pass	INSPECTOR <i>[Signature]</i>
9327	WOODS 32 E. 17th Pt CAPITAL AUTO	WALL STEEL	Pass	INSPECTOR <i>[Signature]</i>
1028	FREUDENBERG 115 N. SPRING		OK	INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 7-16 2010 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9287	23 N. SPT RD			
	SMARTY	ROOF TILE	PASS	
	SPADACON	IN PROGRESS		INSPECTOR <i>AF</i>
9513	KURTIN			
	5 MANDALAY	U.G. GAS	PASS	
	ELITE GAS			INSPECTOR <i>AF</i>
9475	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9457	EUSACE			
	114 N SP RD	FINAL	PASS	Close
	CERTIFIED MARINE	DOCK		INSPECTOR <i>AF</i>
9480	DIAZ			
	47 S SPT RD	GARAGE DOOR	PASS	Close
		FINAL		INSPECTOR <i>AF</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS

PN 9475


Faxed to Emil
7/22/10 X
NEB

~~MARTIN COUNTY BUILDING DEPARTMENT~~
~~900 S. ... STREET~~
~~...~~
~~...~~
~~...~~

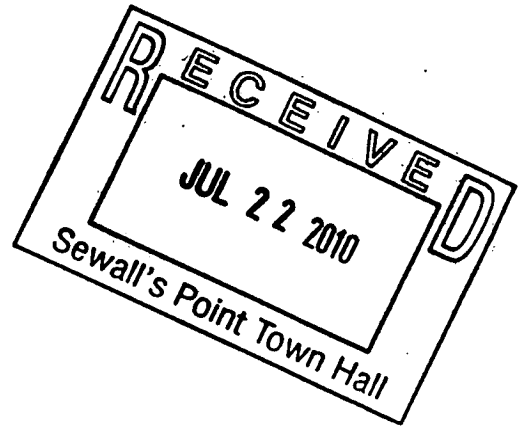
TOWN OF SEWALL'S POINT

~~...~~ Electrical Load Calculations

Electrical Contractor: Blosser Electric, Inc.
Phone #: 772 337-0055 Fax #: 772 337-2699
Project: Diaz Residence Location: 47 S. Sewall's Pt. Rd.
Existing Service Feeder Size: _____ Existing Panel Size: _____
Main Breaker Size: _____ Number of Breakers: _____

Existing Loads

<u>3000</u> sq. Ft. X 3 watts per sq. ft.....	<u>9000</u>	watts
<u>2</u> Appliance cir. @1500 watts each.....	<u>3000</u>	watts
<u>1</u> Laundry cir. @ 1500 watts each.....	<u>3000</u>	watts
<u>1</u> Range @ 8 kw.....	<u>8000</u>	watts
<u>1ea</u> Dishwasher and disposal @ 1500 watts each.....	<u>3000</u>	watts
<u>1</u> Microwave @ 2000 watts.....	<u>2000</u>	watts
Water heater @ 4.5 kw.....		watts
Tankless water heater.....	<u>8000</u>	watts
Dryer @ 5 kw.....	<u>5000</u>	watts
Refrigerator @ 1500 watts.....	<u>1500</u>	watts
Bathroom 1 @ 1500 watts.....	<u>1500</u>	watts
Sprinkler Pump.....		watts
Other.....		watts
Other.....		watts
Other.....		watts



Sub total 44000 Watts

New Loads

Pool pump.....		watts
Pool light.....		watts
Heat pump.....		watts
Chlorine generator.....		watts
Air blower.....		watts
Boatlift.....		watts
Other.....		watts
Other.....		watts
Other.....		watts

Total 44000 Watts

First 10 kw @ 100%.....	<u>12000</u>	watts
Remainder @ 40%.....	<u>13600</u>	watts
A/C heat @ 100%.....	<u>10000</u>	watts

Total watts 33600 Divided by 240 volts = 140 A Amps - 150-A

Prepared by: _____ Date: _____



TOWN OF SEWALLE'S POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 8/24 2010 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9524	Cannolly 9 N. Via Lucindia all Amer. Roof.	Wry in + metal	PASS	INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9051	BENEJANA 3602 SE Ocean Commercial Court	PAROIL U.G. ELECT. PREFABRICATED	PASS PASS	INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9327	Woods 32 E High Pt Capital Auto	Column Beams + DECK FOR wall	PASS	INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9344	Woods 32 E High Pt Capital	Footer	PASS	INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9475	Diaz 475 Sewalls Emil Lathula	Final remodel	PASS Cell 284-2598	Close INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

9480

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:	9480	DATE ISSUED:	JUNE 22, 2010
SCOPE OF WORK:	GARAGE DOOR		
CONDITIONS:			
CONTRACTOR:	TREASURE COAST GARAGE DOOR		
PARCEL CONTROL NUMBER:	013841-005-000-002602	SUBDIVISION	EMARITA - LOT 26
CONSTRUCTION ADDRESS:	47 S SEWALLS PT RD		
OWNER NAME:	DIAZ		
QUALIFIER:	MARK WAGNER	CONTACT PHONE NUMBER:	879-0487

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

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

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

REQUIRED INSPECTIONS

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

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

Town of Sewall's Point

9480

Date: 6/8/10 DIAZ BUILDING PERMIT APPLICATION Permit Number:

OWNER/TITLEHOLDER NAME: ~~Cathy, Carlos + Gloria~~ Phone (Day) 305-510-0696 (Fax)

Job Site Address: 47 S. Sewalls Point Rd City: Street State: FL Zip: 34994

Legal Description: EMARITA, Lot 26 Parcel Control Number: 01-38-41-005-000-00260-0

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

Scope of work (please be specific): Reinforcement 16' X 7' Overhead door.

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: \$ 2100.00 (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

CONTRACTOR/Company: Treasure Coast Garage Doors Phone: 879-0487 Fax: 879-0261 Street: 966 SW Billmore St City: Ft St. Lucie State: FL Zip: 34983

State License Number: OR: Municipality: SPO2444 License Number:

LOCAL CONTACT: Mark Wagner Phone Number: 879-0487

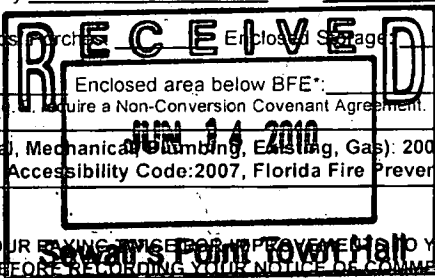
DESIGN PROFESSIONAL: W/A Lic# Phone Number:

Street: City: State: Zip:

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

Carport: Total under Roof Elevated Deck: Enclosed area below BFE: Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

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



NOTICES TO OWNERS AND CONTRACTORS:

- 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR FINANCING BEING VOIDED AS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. 2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER SIGNATURE: (required) OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED) State of Florida, County of: St. Lucie, FL This the 8 day of June 2010 by Mark Wagner who is personally known to me or produced as identification. My Commission Expires: May 18, 2011

CONTRACTOR SIGNATURE: (required) State of Florida, County of: St. Lucie This the 8 day of June 2010 by Mark Wagner who is personally known to me or produced as identification. My Commission Expires: May 18, 2011

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

Prepared by and return to:
Robert S. Kramer, Esq.
Kramer, Sopko & Levenstein, P.A.
2300 SE Monterey Road Suite 100
Stuart, FL 34996
772-288-0048
File Number: 7136.04
Will Call No.:

Parcel Identification No. 01-38-41-005-000-00260-20000

[Space Above This Line For Recording Data]

Warranty Deed

(STATUTORY FORM - SECTION 689.02, F.S.)

This Indenture made this 9th day of April, 2010 between Carl W. Cathey and Gloria A. Cathey, husband and wife whose post office address is 3411 SW Canoe Creek Terrace, Palm City, FL 34990 of the County of Martin, State of Florida, grantor*, and Veronica A. Diaz, a single woman whose post office address is 47 S. Sewall's Point Road, Stuart, FL 34996 of the County of Martin, State of Florida, grantee*,

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Martin County, Florida, to-wit:

Lot 26, EMARITA, according to the Plat thereof, as recorded in Plat Book 3, Page 86, of the Public Records of Martin County, Florida.

Subject to taxes for 2010 and subsequent years; covenants, conditions, restrictions, easements, reservations and limitations of record, if any.

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

* "Grantor" and "Grantee" are used for singular or plural, as context requires.

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

Signed, sealed and delivered in our presence:

Anne Schmidt
Witness Name: Anne Schmidt

Carl W. Cathey (Seal)
Carl W. Cathey

Stephanie A. Schwall
Witness Name: Stephanie A. Schwall

Gloria A. Cathey (Seal)
Gloria A. Cathey

State of Florida
County of Martin

The foregoing instrument was acknowledged before me this 9th day of April, 2010 by Carl W. Cathey and Gloria A. Cathey, who are personally known or have produced a driver's license as identification.

[Notary Seal]



Stephanie A. Schwall
Notary Public

Printed Name: Stephanie A. Schwall

My Commission Expires: 3/8/2011



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

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 6-17-10
BUILDING OFFICIAL

TABLE 1609.6(2)

ADJUSTMENT FACTOR FOR BUILDING HEIGHT AND EXPOSURE, (C)

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 = 304.8mm.

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 formula must be completed for exposure C:		
29.7	X 1.21	= 35.94 (+)
33.1	X 1.21	= 40.06 (-)

TABLE 1609.6(1)

GARAGE DOOR WIND LOADS FOR A BUILDING WITH A MEAN ROOF HEIGHT OF 30 FEET LOCATED IN EXPOSURE B (psf)

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		
10	7	10.9 -12.2	12.3 -13.7	15.2 -16.9	18.3 -20.4	21.8 -24.3	25.6 -29.5	29.7 -34.1	34.1 -38.0		

For SI: 1 Square foot = 0.929 Sqm, 1 mph = 0.447 m/s, 1 psf = 47.88 N/sqm

- 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.
- Table values shall be adjusted for height and exposure by multiplying by adjustment coefficients in Table 1609.2D.
- Plus and minus signs signify pressures acting toward and away from the building surfaces.
- Negative pressures assume door has 2 feet of width in building's end zone.

1609.6 Garage doors. Pressures from Table 1609.6(1) for wind loading actions on garage doors for Buildings designed as enclosed shall be permitted.

Field Survey

Date: 6/8/10	
Customer: Diaz, Marcal	Phone: 305-510-0696
Owner: Emil La Viola LLC	Phone: 772-284-2598
Address: 5711 Birch Dr.	Fax:
Street F1	Cell:

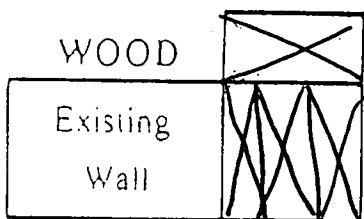
W x H	MFG	Model	Zone	Exp.	Design P.S.F	Test P.S.F
16' x 7'	CHI	4216	140	C	+44.3/-51.5	+66.5/-77.3
x						
Wall Construction	Vertical Jambs		Header		Spring Pad	
CMU / <u>Wood</u> / Other	1x6		1x6		N/A	
Required Anchors	# 3 Below					

Wood Jamb Attachment To Structure

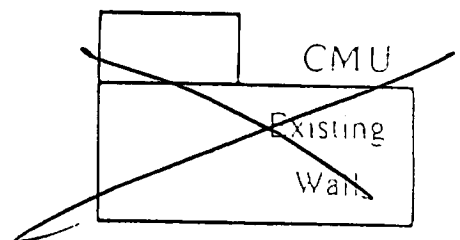
(# 1) For attachment of jambs to cast in place concrete, Use 3/8" x 5". Install bolts a maximum of 6" from each end and at 24" on center. Anchors must have a minimum of 2-1/2" embedment into concrete

(# 2) For attachment to hollow block, use 1/4" diameter tapcon anchors. Install a pair of anchors a maximum of 6" from each end and a pair at 12" on center. The pair of anchors should be approximately 3" center to center. Anchors must have a minimum of 1-1/4" embedment into hollow block.

(# 3) Attach tracks to wood frame with 5/16" x 4" lags & additional track brackets (as required) to secure thru existing 1" x 6" jamb with minimum of 1 1/2" embedment into existing stud wall



FLOOR PLAN
INTERIOR





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Product Approval
USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > [Application Detail](#)

- ▶ COMMUNITY PLANNING
- ▶ HOUSING & COMMUNITY DEVELOPMENT
- ▶ EMERGENCY MANAGEMENT
- ▶ OFFICE OF THE SECRETARY

FL # **FL11362**
 Application Type **New**
 Code Version **2007**
 Application Status **Approved**
 Comments
 Archived

Product Manufacturer **C.H.I. Overhead Doors**
 Address/Phone/Email **1485 Sunrise Drive
 Arthur, IL 61911
 (217) 543-2135 Ext 4273
 jcampbell@chlohd.com**

Authorized Signature **Jim Campbell
 jcampbell@chlohd.com**

Technical Representative
 Address/Phone/Email

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**
 Evaluation Report - Hardcopy Received

Florida Engineer or Architect Name who developed the Evaluation Report **John E. Scates**
 Florida License **PE-51737**
 Quality Assurance Entity **Architectural Testing, Inc.**
 Quality Assurance Contract Expiration Date **12/31/2012**
 Validated By **Gordon Thomas, P.E.**
 Validation Checklist - Hardcopy Received

Certificate of Independence **[FL11362_R0_COI_Cert_of_Independence_Scates_2008.pdf](#)**

Referenced Standard and Year (of Standard)	Standard	Year
	ASTM E 330	2002
	DASMA 108	2005
	DASMA 108	2002

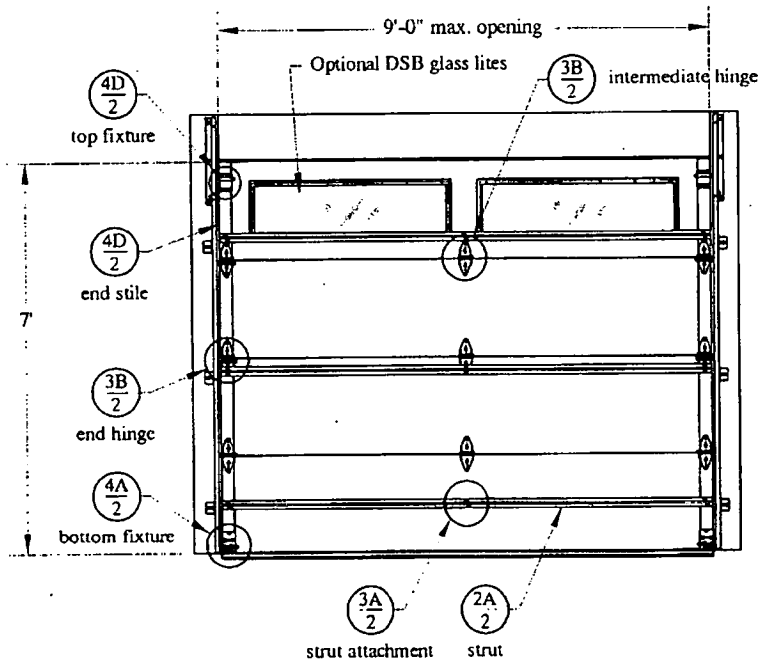
Equivalence of Product Standards
 Certified By

Sections from the Code

No Windows

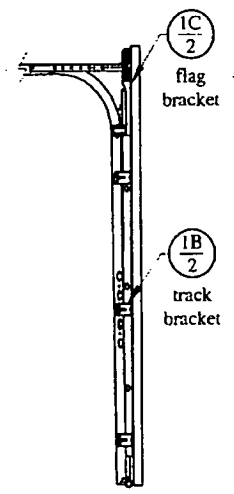
Door Model	Gauge int/ext	Decimal int/ext
42116	231/26	0.165/0.170

Window Restriction: Standard window options are available.



door height	section quantity	strut quantity	trk brkt per side
6'-0" to 7'-0"	4	3	3
7'-6" to 8'-0"	5	4	4
8'-3" to 8'-9"	5	4	4
9'-0" to 10'-6"	6	5	5
10'-9" to 12'-3"	7	6	6
12'-6" to 14'-0"	8	7	7

Refer to Supplemental Instructions for strut placement on doors over 7'-0" high



Evaluation based on ANSI/DASMA 108-2002 & 108-2005 testing.

Design Pressure (DP): 41.3 psf / 31.5 neg
 Test Pressure (TP): 66.5 psf / 17.3 neg

Per ASCE 7-02 & ASCE 7-05, DP typically meets or exceeds basic wind speed of:
 V = 166 MPH for Exposure B and mean roof height of 30' or less
 V = 140 MPH for Exposure C and mean roof height of 30' or less

Maximum door size: 9'-0" wide by 14'-0" tall

Glazing and door have not been tested for windborne debris.

Wood buck and supporting structural elements shall be designed by a registered professional engineer for wind loads shown on this drawing.

If door is not electrically operated, a lock must be installed.

Professional Engineer's seal provided only for verification of windload construction details

John E. Scates
 10/15/08

John E. Scates, P.E.
 3121 Fairgate Drive
 Carrollton, Texas 75007
 Florida P.E. # 51737

Details for door heights up to 14'-0" are contained in the Supplemental Instructions, which are required in addition to this drawing for installation. Do not install door using only this drawing.

C.H.I. SCALE nts
 DATE 09-22-2008
 Model 42116 (9'-0" wide)
 C.H.I. Drawing: 29-090-11103

FL 11362

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 7-16 2010 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9287	23 N. SP RD SMARTY SPRATICON	Roof TILE IN PROGRESS	PASS	INSPECTOR <i>AF</i>
9513	KURTIN 5 MANDALAY ELITE GAS	U.G. GAS	PASS	INSPECTOR <i>AF</i>
9475	Diaz 47 SSPR Emil Laviola	Rough plumbing	PASS	INSPECTOR <i>AF</i>
9457	EUSPACE 114 N SP RD CERTIFIED MARINE	FINAL DOCK	PASS	Close INSPECTOR <i>AF</i>
9486	DIAZ 47 S SP RD	GARAGE DOOR FINISH	PASS	Close INSPECTOR <i>AF</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TREE

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

201

Permit # _____

Date Issued _____

This application shall include a written statement giving reasons for removal, relocation or replacement and a site plan which shall include the dimensional location on a survey, scale drawing, or aerial photograph, superimposed with lot lines to scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, LOT 4 HONEYWOOD

Owner DENNIS & PAM RYAN Address RIDGEVIEW RD Phone _____

Contractor COMMERCIAL CONST Address 833 E. 5TH ST Phone 220-5488

Number of trees to be removed (list kinds of trees) 7 4: CABBAGE

0

1: PALM
2: LIG EON PALM

Number of trees to be relocated within 30 days (no fee) (list kinds of trees):

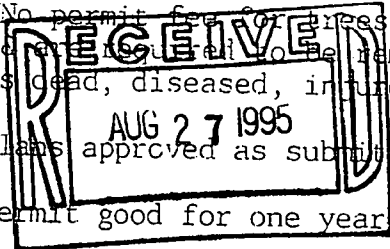
0

Number of trees to be replaced: _____ (list kinds of trees):

NO/NE

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 or are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property.)



Plans approved as submitted _____ Plans approved as marked _____

Permit good for one year. Fee for renewal of expired permit is \$5.00

Signature of applicant [Signature] Date submitted _____

Approved by Building Inspector [Signature] Date 9/27/95

Approved by Building Commissioner [Signature] Date 10/6/95

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?

TOWN OF SEWALL'S POINT, FLORIDA

Date 2/7 ~~10~~ 2003 TREE REMOVAL PERMIT No 468

APPLIED FOR BY RUSSELL (Contractor or Owner)

Owner 47 SE SEWALLS POINT

Sub-division _____, Lot _____, Block _____

Kind of Trees 5 TREES SPECIES UNKNOWN EXCEPT BOUGANVILLEA

No. Of Trees: REMOVE 5 TREES 34 HEDGES FRUIT TREE

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 15.00

Signed, _____ Applicant Signed Jane Simmons (AOT) Town Clerk

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M.—NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Empty grid area for project details]

PROJECT DESCRIPTION _____

[Empty lines for project description and remarks]

REMARKS _____

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # _____

Date Issued: _____

This application shall include a written statement giving reasons for removal, relocation, or replacement and a site plan which shall include the dimensional location on a survey, scale drawing, or aerial photograph, superimposed with lot lines to scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.

Owner Charles David Russell Address 47 SE. Sewall's Point Phone 260-1363

Contractor SAME Address SAME Phone SAME

Number of trees to be removed (list kinds of trees) 5 trees Species unknown except Bougainvillea Fruit Tree

~~None~~ APPROXIMATELY 34 OLD Hedge/Bushes

Number of trees to be relocated within 30 days (no fee) (list kinds of trees): None

Number of trees to be replaced: OK. See attached (list kinds of trees): JDS

Permit Fee \$ 15.00

\$15.00

(No permit fee for trees which are relocated on property or lie within a utility easement and are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property.)

Plans approved as submitted _____ Plans approved as marked _____

Permit good for one year. Fee for renewal of expired permit is \$5.00.

Signature of applicant C. David Russell Plans approved as marked _____

Approved by Building Inspector [Signature] Date submitted: 2/7/13

Completed _____
Date _____ Checked by _____

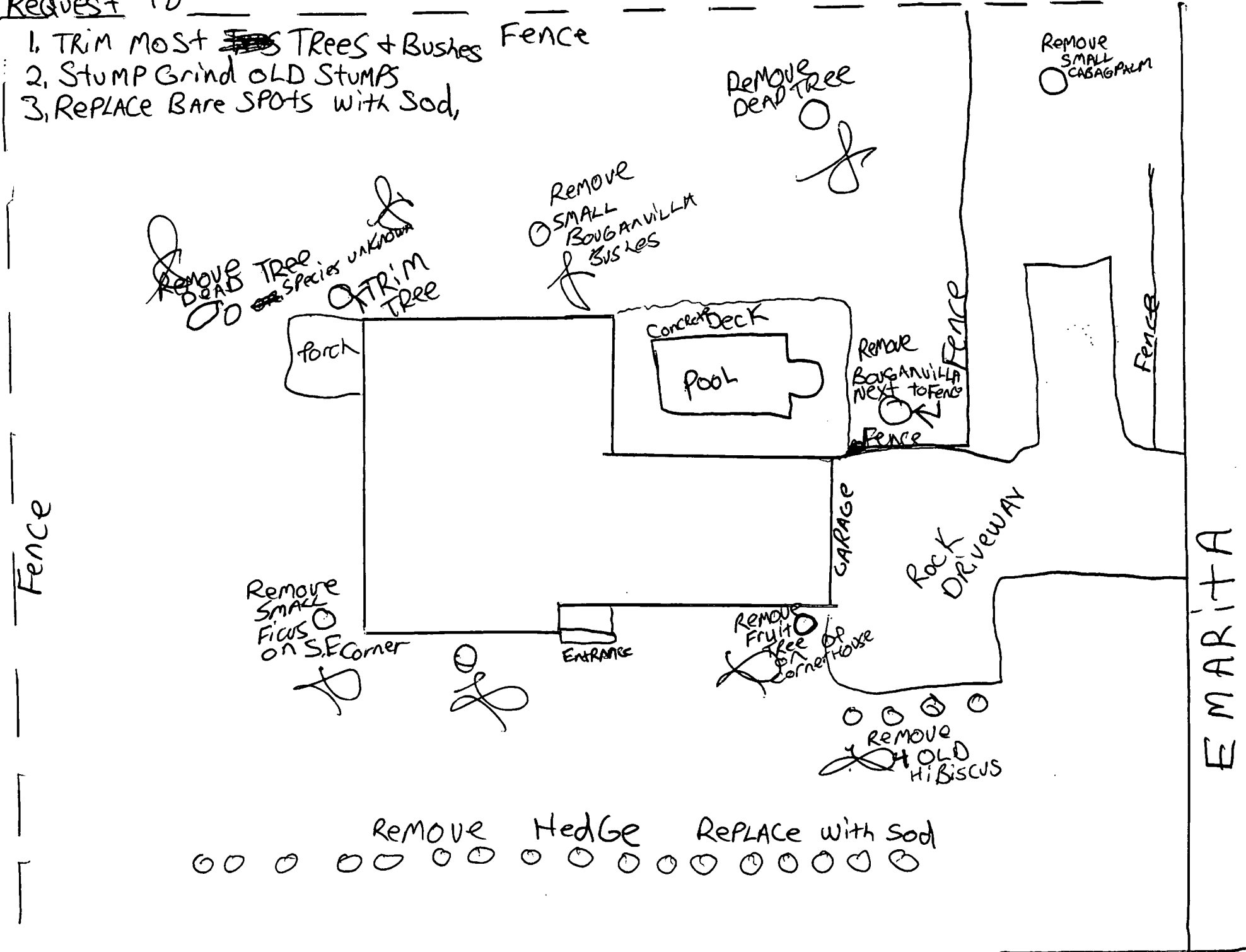
THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT A FEE. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGLER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

THE FOLLOWING TREES MUST BE REMOVED BEFORE CONSTRUCTION BEGINS: BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND MELALEUCA

See attached Tree Species List

Request TO

1. TRIM MOST ~~THE~~ TREES + Bushes Fence
2. STUMP Grind OLD STUMPS
3. REPLACE Bare SPOTS with Sod,



47 S.E. Sewall's Point Road Contact # 260-1363

TREE SPECIES

The Following list will assist you in determining which trees are required to be removed and which trees are required to stay or be relocated. A permit is required for all tree removal, replacement, or relocation. The cost of the permit is \$15.00. No permit fees for trees which are relocated on property or lie within a utility easement and are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured, or hazardous to life or property.

PROHIBITED SPECIES:

The first three-(3) species below *must* be removed before construction begins.

- | | |
|----------------------|-------------------------|
| 1. Brazilian Peppers | 9. Schefflera |
| 2. Australian Pines | 10. Non-Native Ficus |
| 3. Melaleuca | 11. Chinaberry |
| 4. Strangler Fig | 12. Woman's Tongue |
| 5. Java Plum | 13. Norfolk Island Pine |
| 6. Bischofia | 14. Eucalyptus |
| 7. Silk Oak | 15. Chinese Tallow Tree |
| 8. Earleaf Acacia | 16. Ear Tree |

NATIVE SPECIES:

- | | |
|-------------------------|---------------------------------------|
| 1. Black Ironwood | 25. Pigeon Plum |
| 2. Black Mangrove | 26. Pond Apple |
| 3. Blolly | 27. Prickly Pear |
| 4. Buttonwood | 28. Red Mangrove |
| 5. Cabbage Palm | 29. Red Maple |
| 6. Cocoplum (red tip) | 30. Redbay |
| 7. Cocoplum (green tip) | 31. Saffron Plum |
| 8. Coral Bean | 32. Sand Pine |
| 9. Deer Moss | 33. Scrub Pine |
| 10. Gray Twig | 34. Satinleaf |
| 11. Gopher Apple | 35. Saw Palmetto |
| 12. Gumbo Limbo | 36. Scrub Hickory |
| 13. Inkwood | 37. Sea Grape |
| 14. Jamaica Dogwood | 38. Sea Oxeye |
| 15. Lancewood | 39. Slash Pine |
| 16. Laurel Oak | 40. Stoppers |
| 17. Leather Fern | 41. Wild Lime |
| 18. Live Oak | 42. Sumac (southern) |
| 19. Mahogany | 43. Sugar Berry (Hackberry) |
| 20. Marlberry | 44. Torchwood |
| 21. Mastic | 45. Wild Coffee |
| 22. Mulberry | 46. Varnish Leaf |
| 23. Myrtle Oak | 47. Water Oak |
| 24. Paradies Tree | 48. Wax Myrtle |
| | 49. West Indian Cherry White Mangrove |

**TOWN OF SEWALL'S POINT
APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT**

Tree Defined: Any self-supporting, woody plant which normally grows to an overall height of at least fifteen (15) feet in the vicinity of the town. Replant and landscape trees shall be considered a tree.

No permit required for:

1. Trimming of trees unless it effectively removes it, meaning trimming or pruning to the extent that a plant's natural function is severely altered.
2. Trees with a diameter of less than one inch.

Permit Fee:

1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S.F.R.).

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, Marlberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new S.F.R., a site plan which shall include the dimensional location on a survey, scale drawing or aerial photograph, superimposed with lot lines of scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.
 - d. for an existing residence, a drawing of house with location of trees to be removed, relocated can be submitted in lieu of site plan.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner Carl W. Carter Address 47 S. Sewall Pt Rd Phone 463-6437
 Contractor _____ Address _____ Phone _____

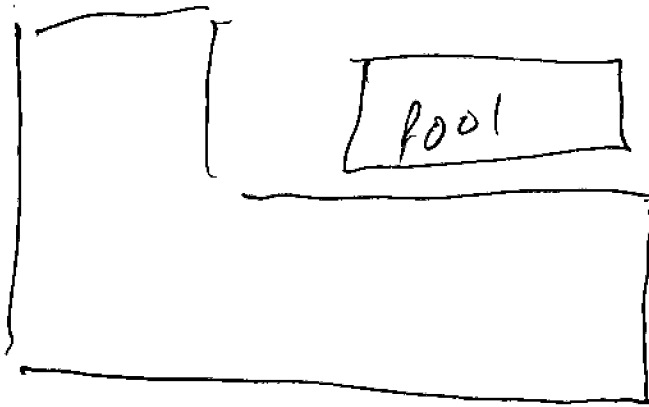
No. of Trees: REMOVE 1 Type: GRADE FROIT
 No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____
 No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: DISEASED & ROTTEN

Signature of Applicant Carl W. Carter Date 4-5-04

Approved by Building Inspector: [Signature] Date 4/5 Fee: -0-

Plans approved as submitted _____ Plans approved as revised/marked: _____



TAKE OUT
DESEASED

1. 2.

3. 4.

5. 6.

TOWN OF SEWALL'S POINT, FLORIDA

Date APRIL 5 ~~19~~ 2004 TREE REMOVAL PERMIT No 2232

APPLIED FOR BY CATHEY (Contractor or Owner)

Owner 47 S. SEWALL'S PT RD

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 1 GRAPEFRUIT

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant Signed, Gene Simmons

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

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT, FLORIDA

Date OCTOBER 3 2005 TREE REMOVAL PERMIT No 2581

APPLIED FOR BY CATHEY (Contractor or Owner)

Owner 47 S. SEWALL'S POINT RD

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 2 1 Oak, 1 flowering

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

Signed, _____ Applicant

Signed Jane Simmons (RS)
Town Clerk
BUILDING OFFICIAL

FEE \$ 0

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspect
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
APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Tree Defined: Any self-supporting, woody plant which normally grows to an overall height of at least fifteen (15) feet in the vicinity of the town. Replant and landscape trees shall be considered a tree.

No permit required for:

1. Trimming of trees unless it effectively removes it, meaning trimming or pruning to the extent that a plant's natural function is severely altered.
2. Trees with a diameter of less than two inches.

Permit Fee:

1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S.F.R.).

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, Marberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new S.F.R., a site plan which shall include the dimensional location on a survey, scale drawing or aerial photograph, superimposed with lot lines of scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.
 - d. for an existing residence, a drawing of house with location of trees to be removed, relocated can be submitted in lieu of site plan.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner CARL CATHY Address 47 S. SEWALLS PT RD Phone 220-8743
 Contractor ARAN MOORE Address 21623 PINE RIDGE SC Phone 334-2577
 No. of Trees: REMOVE 2 Type: 1 OAK, 1 FLOWERING TREE
 No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: ~~FLOWERING TREE~~
 No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: 1 IN FRONT PORCH, 1 TOO CLOSE TO HOUSE

Signature of Property Owner [Signature] Date 10/3/05

Approved by Building Inspector [Signature] Date 10/3 Fee: 0

Plans approved as submitted _____ Plans approved as revised/marked: _____

TOWN OF SEWALL'S POINT, FLORIDA

Date 5-22-07 TREE REMOVAL PERMIT N° 0609

APPLIED FOR BY Cathy (Contractor or Owner)

Owner [Redacted]

Sub-division _____, Lot _____, Block _____

Kind of Trees Benciana

No. Of Trees: REMOVE 1

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

FEE \$ 15

Signed, _____ Applicant

Signed, Phil Winterdown
Bldg Inspector ~~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 _____

[Horizontal lines for project description]

REMARKS _____

[Horizontal lines for remarks]

Permit Fee:

1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S.F.R.).

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, Marlberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new single family resident see above.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner Carl W. Cathey Address H7 So Sewall Pt. Phone 220-874 3
 Contractor Monty Address _____ Phone _____

No. of Trees: REMOVE 1 Type: POINSETTA

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: LEAVES & BLOOMS FALL IN POOL & TREE LEANING TOWARDS HOUSE

Signature of Property Owner Carl W. Cathey Date 5-18-07

Approved by Building Inspector: [Signature] Date 5/21 Fee: \$15.00

Plans approved as submitted _____ Plans approved as revised/marked: _____



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-220-4765

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8:00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner Dr. Veronica Diaz Address 47 S Sewalls Pt Dr Phone (786) 457 1717

Contractor Santos Tree Removal Address 5380 SE Ebbete Phone (772) 324 0631

No. of Trees: REMOVE 7 Species: Saber 34997 Ave Schefflera

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

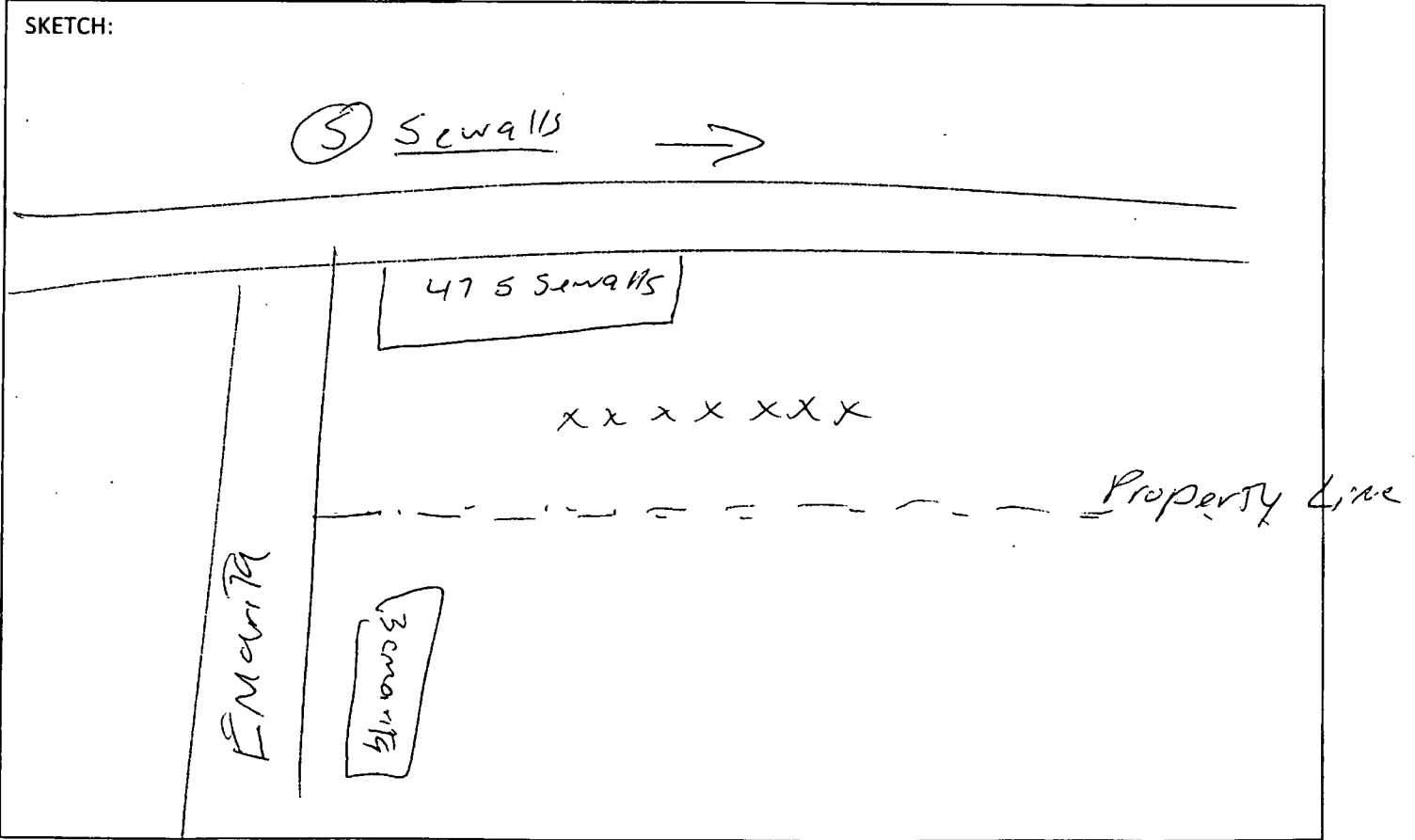
Reason for tree removal /relocation (see notice above) INVASIVE SPECIES

Signature of Property Owner [Signature] Date 2/1/2011

Approved by Building Inspector: [Signature] Date 7/5/11 Fee: N/C

NOTES:

SKETCH:



X = ~~Schefflera~~ Schefflera



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

TREE REMOVAL - RELOCATION, REPLACEMENT PERMIT

CALL 8:00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner VERONICA DIAZ Address 47 S. SEWALLS PT. RD. Phone 786-457-1717

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE 4 or 7 Species: UNCLAD + 3 SMALL PALMS? (CAN RELOCATE IF NECESSARY)

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

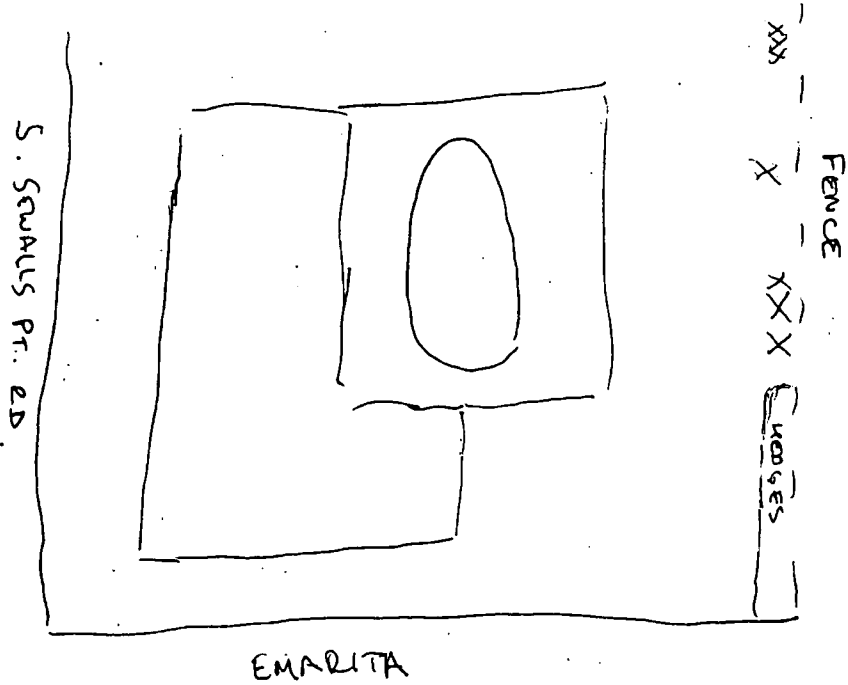
Reason for tree removal /relocation (See notice above) PUT IN HEDGES ALONG FENCE

Signature of Property Owner [Signature] Date 7/8/11

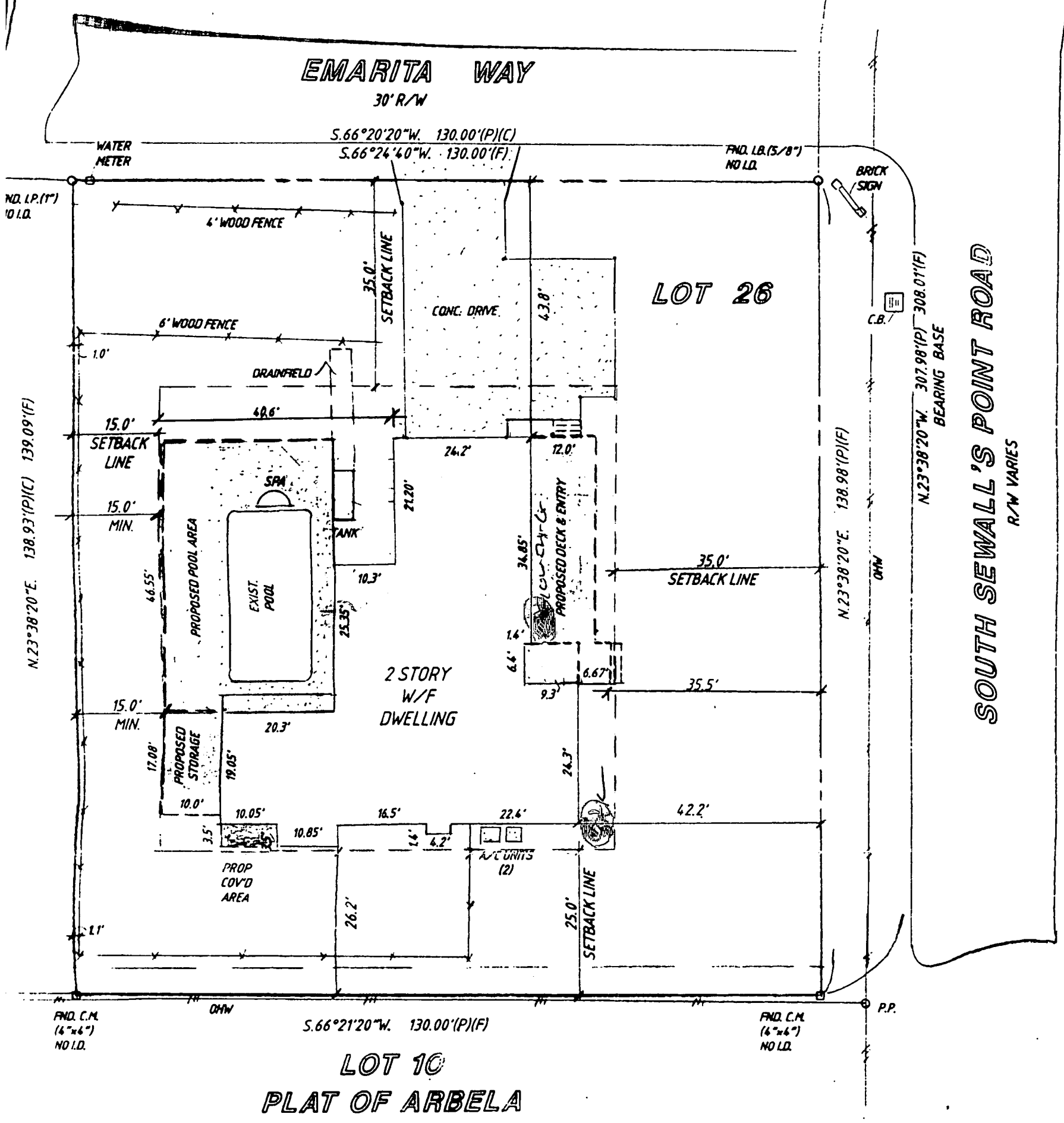
Approved by Building Inspector: [Signature] Date 7-11-11 Fee: N/A

NOTES: _____

SKETCH:



PROPOSED POOL AREA - 1,286 SQUARE FEET ± - 7.1%
 PROPOSED FRONT DECK & STORAGE AREA - 1,628.8 SQUARE FEET ± - 9.0%
 TOTAL IMPERVIOUS AREA 6,320.9 SQUARE FEET ± - 35.0%



SURVEYOR'S NOTES

- SURVEY OF DESCRIPTION AS FURNISHED BY CLIENT, UNLESS OTHERWISE NOTED.
- LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS, BUILDING SETBACKS AND/OR RIGHTS-OF-WAY OF RECORD BY ACCURIGHT LAND SURVEYING INC.
- ALL BEARINGS ARE REFERENCED TO THE INSTRUMENT OF RECORD AS SHOWN HEREON, UNLESS OTHERWISE NOTED.
- ELEVATIONS SHOWN HEREON ARE RELATIVE TO NATIONAL GEODETIC VERTICAL DATUM OF 1929, SEE SURVEY FOR REFERENCE BENCH MARK, UNLESS OTHERWISE NOTED.
- THERE ARE NO ABOVE GROUND ENCROACHMENTS, UNLESS OTHERWISE NOTED.

NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER

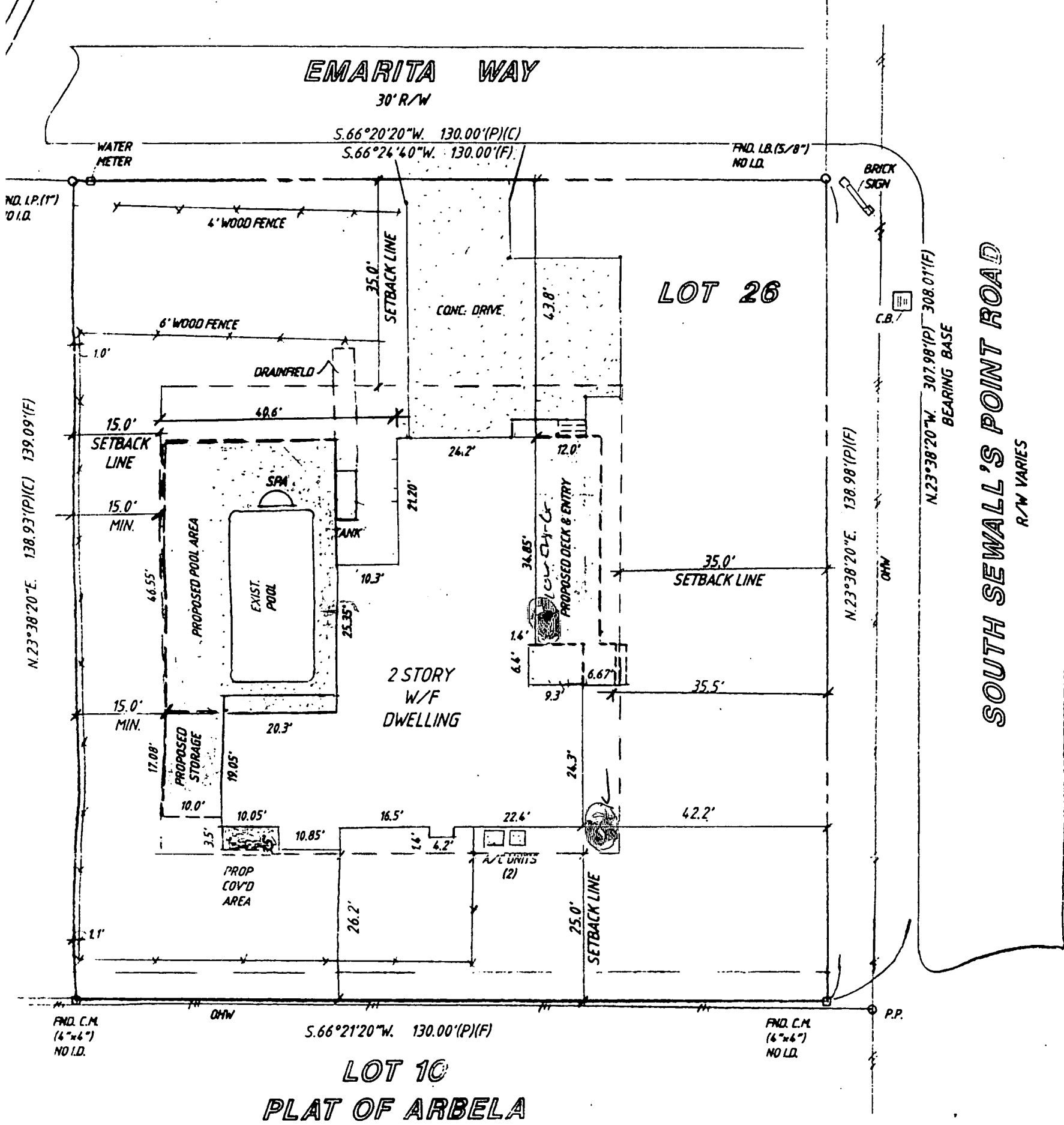
- SYMBOLS**
- Δ - DELTA / CENTRAL ANGLE
 - ⊕ - CENTERLINE
 - - DRAINAGE FLOW
 - X - EXISTING ELEVATION
 - ⊔ - PROPERTY LINE

ACCURIGHT LAND SURVEYING, INC.
 LICENSED BUSINESS NO. 6607

(Handwritten Signature)

EARLE R. STARKEY - PROFESSIONAL LAND SURVEYOR
 REGISTRATION No. 4459 - STATE OF FLORIDA

DRIVE WAY - 1,286 SQUARE FEET ± - 7.1%
 PROPOSED POOL AREA - 1,628.8 SQUARE FEET ± - 9.0%
 PROPOSED FRONT DECK & STORAGE AREA - 716.4 SQUARE FEET ± - 4%
 TOTAL IMPERVIOUS AREA 6,320.9 SQUARE FEET ± - 35.0%



SURVEYOR'S NOTES

SURVEY OF DESCRIPTION AS FURNISHED BY CLIENT, UNLESS OTHERWISE NOTED.

LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS, BUILDING SETBACKS AND/OR RIGHTS-OF-WAY OF RECORD BY ACCURIGHT LAND SURVEYING INC.

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THERE ARE NO ABOVE GROUND ENCROACHMENTS, UNLESS OTHERWISE NOTED.

NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER

ACCURIGHT LAND SURVEYING, INC.

LICENSED BUSINESS NO. 6607

(Handwritten signature)

EARLE R. STARKEY - PROFESSIONAL LAND SURVEYOR
 REGISTRATION No. 4459 - STATE OF FLORIDA

SYMBOLS

- Δ - DELTA / CENTRAL ANGLE
- ⊕ - CENTERLINE
- - DRAINAGE FLOW
- X - EXISTING ELEVATION
- ⊕ - PROPERTY LINE

MONUMENT
 NT
 NE