

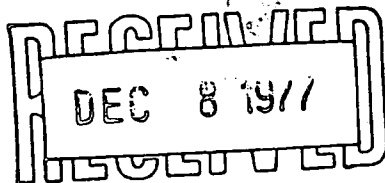
78 South Sewall's Point Road

787

SFR

&

POOL



TO OF SEWALL'S POINT, FLORIDA

APPLICATION FOR BUILDING PERMIT

Permit No. 787

Date 2/7/78

(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 LENICK (Marlene J.) Present Address 13703 Alliston Dr
Baldwin Md. 21013 Ph

General Contractor MOSLEY Address P.O. Box 1736 Stuart Ph 287-6962

Where licensed COUNTY License No. 31

Plumbing Contractor DAVE'S License No.
Electrical Contractor ALPINE License No.

Street building will front on S. SEWALL'S PT-RO. (78)

Subdivision HOMERWOOD Lot No. 3, B1k A Area 33000

Building area, inside walls (excluding garage, carport, porches) Sq ft 4690

Other Construction (Pools, additions, etc.) Pool

Contract Price (excluding land, rugs, appliances, landscaping) \$ 88,000

Total cost of permit \$ 490.00

Plans approved as submitted ✓ Plans approved as marked

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

Signed by General Contractor

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

Marlene J. Lenick Michael J. Lenick
Signed by Owner

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

TOWN RECORD

Date submitted 2/2/78

Date approved 2/7/78

Certificate of Occupancy issued

Date 2/15/78 # 787

RECEIVED
DEC 8 1977

WARRANTY DEED
TO HAVE

202572

This Warranty Deed Made the 9th day of November A. D. 1973 by

JOHN F. BEGLEY, JR., and NANCY B. BEGLEY, his wife

hereinafter called the grantor, to

MARLENE J. LENICK, a married woman

whose postoffice address is 13703 Alliston Drive Baldwin, Maryland 21013
hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth: That the grantor, for and in consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, allots, releases, conveys and confirms unto the grantee, all that certain land situate in MARTIN County, Florida, viz:

Lot 3, Block "A", according to the Amended Plat of HOMEWOOD SUBDIVISION as recorded in Plat Book 3, page 35, in the public records of Martin County, Florida.

SUBJECT TO Restrictions, reservations and encumbrances of record; Zoning Ordinances if any.

SUBJECT TO that Purchase Money Mortgage from Marlene J. Lenick, a married woman, joined by her husband, Michael J. Lenick, to John F. Begley, Jr., and Nancy B. Begley, his wife, covering the above described property.

This instrument was prepared by

John F. Jackson

CHELSEA TITLE & GUARANTY CO.

P. O. Box 115, Stuart, Florida

as a necessary incident to the fulfillment of conditions contained in a fire insurance

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

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

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 1972.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

[Signature]
Eleanor J. Tucker

[Signature]
John F. Begley, Jr.
[Signature]
Nancy B. Begley

STATE OF Florida
COUNTY OF Broward

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared

John F. Begley, Jr., and
Nancy B. Begley, his wife

to me known to be the person described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 9 day of November, A. D. 1973

[Signature]
Eleanor J. Tucker

This instrument prepared by:

Notary

Official Seal
Eleanor J. Tucker

Notary Public

State of Florida at Large

Notary Public:

My Commission Expires:

NOTARY PUBLIC, STATE OF FLORIDA
MY COMMISSION EXPIRES FEB. 1, 1977

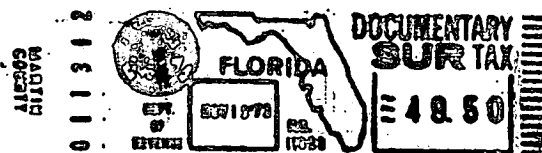
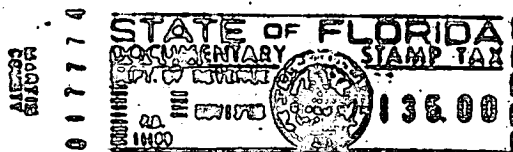
365 PAGE 1646

#787

FILED FOR RECORD
MARTIN COUNTY, FLA.

1973 NOV 13 PM 2:06

LOUISE V. ISAACS
CLERK OF DISTRICT COURT
P.C.



787

DISTRICT MANAGER

*pan in shower
driveway
fireplace
panel family room*

Mosley & Son
CONSTRUCTION, INC.

1746 PALM BEACH ROAD • STUART, FLORIDA 34924

Mr. & Mrs. Michael Lenick
13703 Alliston Drive
Baldwin, Maryland

June 23, 1977

Re: Lot 3, Block A, Homewood Subdivision

Contract for construction of the above referenced residence as per plans and specifications and the articles listed below:

1. Clearing - not included in contract price. This will be done for machine time and materials by E.W.K. *including driveway*
2. Footing - 10"x18", 2500 psi concrete, reinforced with 2 #5 steel bars, continuous at house perimeter.
3. Fill Dirt - for house only is included. 2' allowed to bring finish floor elevation to 18" above road crown. Fill is compacted to 90% density and termite treated.
4. Floor Construction - 4", 2500 psi waterproof concrete, reinforced with 6x6::10/10 wire mesh.
5. Exterior Wall Construction - 8"x8"x16" concrete blocks reinforced at all corners and openings with 1 #5 steel bar dowelled to footing and tie beam. Exterior to be stucco marblecrete, interior to be drywall.
styrofoam insulation bet. floors
6. Beam Construction - 8"x13", 3000 psi concrete, reinforced with 4 #5 steel rods. Beam dropped to 17" over openings.
7. Trusses - pre-engineered wood trusses @ 2' on center. 6" layed in insulation between.
8. Roofing - hand split cedar shakes over 30# felt on 1x3 strips on trusses.
9. Interior Wall Construction - 2"x4" wood studs at 16" centers with pressure treated bottom plate. 1/2" drywall on both sides. 4" full thick insulation at all sound partitions. Dining room paneling with chair rail trim is included.

Mosley & Son

CONSTRUCTION, INC.

1746 PALM BEACH ROAD STUART, FLORIDA 34994

10. Plumbing - water hookup to Southern Gulf Utilities, fees are included.
Septic tank and drainfield also included. ~~pan~~ is included
~~1 - shower~~

- Fixtures - Kohler colored fixtures with Moen trim.
1 - K746 enameled cast iron tub.
1 - K802 whirlpool Carribean tub
3 - K3512 water closets
1 - 6082.267 triple concept sink
1 - shower, ~~no pan~~ pan is included
1 - 15"x15" stainless steel bar sink
1 - dishwasher and disposal hook-up
1 - ice maker hook-up
4 - hose bibs
1 - washing machine rough-in
1 - fiberglass laundry tray

Note: If standard Carribean tub is used, deduct \$1,090.00
If double stainless steel sink is used, deduct \$250.00

11. Electrical - Fixture allowance of \$1,000.00 is included, plus the following:
126 general purpose 110 v. outlets, 6 special purpose 110 v. outlets, split A/C system hook-up, 5 TV outlets, 4 weatherproof outlets, 2 pump outlets, and leach range outlet, oven outlet, water heater outlet, dryer outlet, whirlpool tub outlet, island receptacle, door chime wiring, and swimming pool equipment hook-up.

12. Air Conditioning - one five ton split system (Luxaire equipment) with 14.6 K.W. Complete fiberglass duct system including 14 supply outlets and one return air grille.

Reverse Cycle

Mosley & Son

CONSTRUCTION, INC.

1746 PALM BEACH ROAD - STUART, FLORIDA 33494

13. Doors - exterior doors to be solid core fir (design by owner). Interior to be hollow core beech, size and type as shown on plans.
14. Windows - to be Har-Car e.s.p. bronze awnings with tinted glass. Sliding glass to be same. Screen porch to have bronze e.s.p. metal with charcoal screen.
15. Ceramic Tile - tile wainscot and floors in both baths. 12"x12" ceramic tile at foyer. Quarry sills at all doors. White Carrera marble at all window sills.
16. Floor Covering - allowance of \$12.00 per sq. yd. for all areas not covered by tile or garage.
17. Garage Door - 7'x16' raised panel stainable overhead door with electric operator and 2 remote controllers.
18. Driveway - 4" concrete reinforced with 6x6; 10/10 mesh. — *10 ft driveway*
DRIVEWAY IS INCLUDED IN PRICE
19. Porch - covered porch figured as per plans with Keystone topping.
20. Painting - exterior - 2 coats paint or stain on fascia, soffitt and trim.
interior - 2 coats paint or stain on all walls, doors, and trim.
21. Cabinets - all formica cabinets included as shown on plans. Colors and styles to be selected by owner.

Mosley & Son CONSTRUCTION, INC.

1740 PALM BEACH ROAD - STUART, FLORIDA 33424

22. Miscellaneous

- A. 3' to 6' shallow pool is included complete.
- B. False beams in family room are included.
- C. \$2,600.00 allowance for appliances is included.
- D. Central vacuum system is included.
- E. Intercom/music system is included.
- F. Fire and security systems are included.

G. FIRE PLACE

~~H. PANELLING ON FIREPLACE INCLUDED W/ 12.00 PER~~

H. PANELLING ON ONE WALL OF FAM

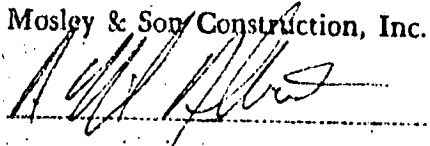
Room w/ 12.00 PER SHEET ALLOWANCE ✓

SHEET
ALLOWANCE\$93,200⁰⁰

Total Amount of Contract \$94,061.00

Ninety Four Thousand Sixty One and 00/100

Mosley & Son Construction, Inc.



TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 7/10/78

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

For property built under Permit No. 787 Dated 7/10/78

when completed in conformance with the Approved Plans.

Signed

RECORD OF INSPECTIONS

<u>Item</u>	<u>Date</u>	<u>Approved by</u>
Footings	<u>2/24/78</u>	
Rough plumbing	<u>2/17/78</u>	<u>P0023/3/78</u>
Perimeter beam	<u>3/1/78</u>	
Rough electric	<u>4/15/78</u>	
Close in	<u>4/15/78</u>	
Final plumbing		
Final electric	<u>6/30/78</u>	

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Chad Dwyer ⁶⁵7/10/78 date

Approved by Town Commission _____ date

Utilities notified 7/10/78 ⁶⁵ date

Original Copy sent to _____

(Keep carbon copy for Town files)

850

SCREEN

ENCLOSURE

TOWN OF
SEWALL'S POINT
FLORIDA

Permit No. 850

Date 7/11/78

APPLICATION FOR BUILDING PERMIT

This application must be accompanied by three sets of complete plans, to scale ($\frac{1}{4}$ " scale for building drawings), including plot plan, foundation plan, floor plans, wall and roof cross-sections, plumbing and electrical layouts, and at least two elevations, as applicable. A copy of the property deed is required for new house construction.

- Owner MRS L. LENICK Present address _____
Phone _____
-General contractor SCREENCO NORTH address INDUSTRIAL WAY RIVIERA BEACH
Phone 546-7333
Where licensed STATE License No. _____
-Plumbing contractor _____ License No. _____
-Electrical contractor _____ License No. _____
-Street the building will front on SEWALLS PT RD
Subdivision HOMewood Lot No. 3 Area A
-Building area, inside walls
(excluding garage, carport, porches, etc.)..square feet 1900^{sq}
-Other construction (pools, additions, etc.) _____
-Contract price
(excluding land, carpeting, appliances, landscaping, etc) \$ 2000
-Total cost of permit \$ _____
-Plans approved as submitted _____ Plans approved as marked _____

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

Roy D. Lawrence
General Contractor

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

Owner

Note: speculation builders will be required to sign both of the above statements.

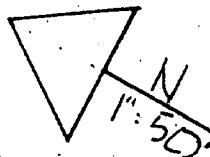
#850
Approved: Chal. Dwyer TOWN RECORD Date submitted 7/11/78
Building Inspector Date

Approved: _____ Commissioner Date

Certificate of Occupancy issued Final Inspection #850
OK - J. Mayhew Date 10/15/78

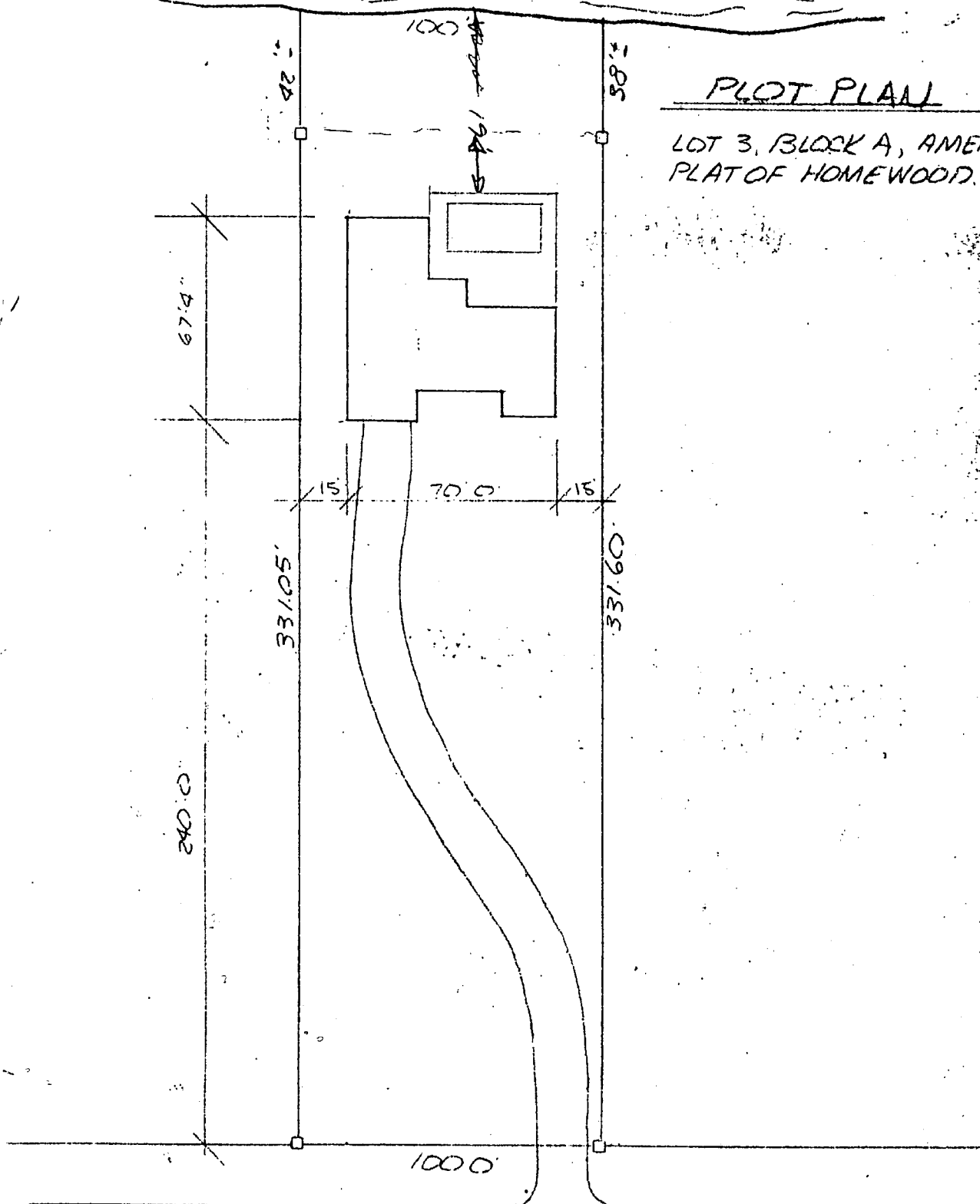
098#

INDIAN RIVER



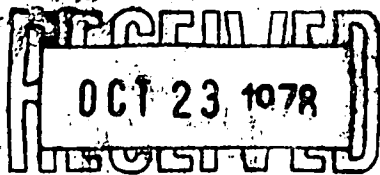
PLOT PLAN

LOT 3, BLOCK A, AMENDED
PLAT OF HOMEWOOD.



SEWALL'S POINT RD

RIDGEVIEW



TOWN OF
SEWALL'S POINT
FLORIDA

Permit No. 8710

Date 10/23/78

890

APPLICATION FOR BUILDING PERMIT

This application must be accompanied by three sets of complete plans, to scale ($\frac{1}{4}$ " scale for building drawings), including plot plan, foundation plan, floor plans, wall and roof cross-sections, plumbing and electrical layouts, and at least two elevations, as applicable. A copy of the property deed is required for new house construction.

-Owner Mr + Mrs. M.J. Lenick Present Address 78 - S. SEWALLS PT. R.

Phone 283 - 8331

-General Contractor MOSELEY + SON Address _____

Phone _____

Where Licensed _____

License No. _____

-Plumbing Contractor _____

License No. _____

-Electrical Contractor _____

License No. _____

Describe building or other structure, or alteration to existing structure. fence

Name the street on which the building, its front building line and its front yard will face. _____

Subdivision _____ Lot No. _____ Area _____

-Building Area, inside walls
(excluding garage, carport, porches, etc.)...square feet \$ 1850.00

-Contract Price
(excluding land, carpeting, appliances, landscaping, etc.)\$ 17,500.00

-Total Cost of Permit \$ 10.00

-Plans approved as submitted _____ Plans approved as marked 2.00

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

General Contractor _____

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

Owner Marlene J. Lenick

Note: Speculation builders will be required to sign both of the above statements.

TOWN RECORD

Date submitted _____

Approved: _____

Building Inspector

Date 10/31

Approved: _____

Commissioner

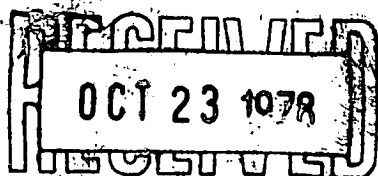
Date 31 Oct '78

Certificate of Occupancy issued _____

Final Inspection by Jamoyuca O.R.

Date 11/15/78

890



TOWN OF
SEWALL'S POINT
FLORIDA

890
Permit No. 890
Date 10/23/78

APPLICATION FOR BUILDING PERMIT

This application must be accompanied by three sets of complete plans, to scale ($\frac{1}{4}$ " scale for building drawings), including plot plan, foundation plan, floor plans, wall and roof cross-sections, plumbing and electrical layouts, and at least two elevations, as applicable. A copy of the property deed is required for new house construction.

-Owner Mr + Mrs. M.J. Lenick Present Address 78 - S. SEWALLS Pt. Rd
Phone 283 - 8331

-General Contractor MOSELEY + SON Address _____
Phone _____

Where Licensed _____ License No. _____

-Plumbing Contractor _____ License No. _____

-Electrical Contractor _____ License No. _____

Describe building or other structure, or alteration to existing structure. fence

Name the street on which the building, its front building line and its front yard will face. _____

Subdivision _____ Lot No. _____ Area _____

-Building Area, inside walls
(excluding garage, carport, porches, etc.)...square feet \$ 1850.00

-Contract Price
(excluding land, carpeting, appliances, landscaping, etc.)\$ ~~1765.00~~ 2

-Total Cost of Permit \$ 510.00

-Plans approved as submitted _____ Plans approved as marked 2000

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

General Contractor _____

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

Owner Marlene J. Lenick

Note: Speculation builders will be required to sign both of the above statements.

TOWN RECORD

Date submitted _____

Approved: J. Mazzurco Building Inspector Date 10/31

Approved: John C. Queney Commissioner Date 31 Oct '78

Certificate of Occupancy issued Final Inspection by Date 11/15/78
J. Mazzurco O.R.

890



HERCULES FENCE

P.O. Box 3486 - Cocoa, Florida 32922

Cocoa 636-7972
Titusville 267-6430

Fort Pierce 465-3833
Melbourne 727-2210
Vero Beach 562-1485

PROPOSAL TO Mrs. Lennick DATE 10-26-78
ADDRESS 78 So. ... Zone ... SOURCE OF LEAD ...
LOCATION Stuart, Fla. TELEPHONE NUMBER 283-9331

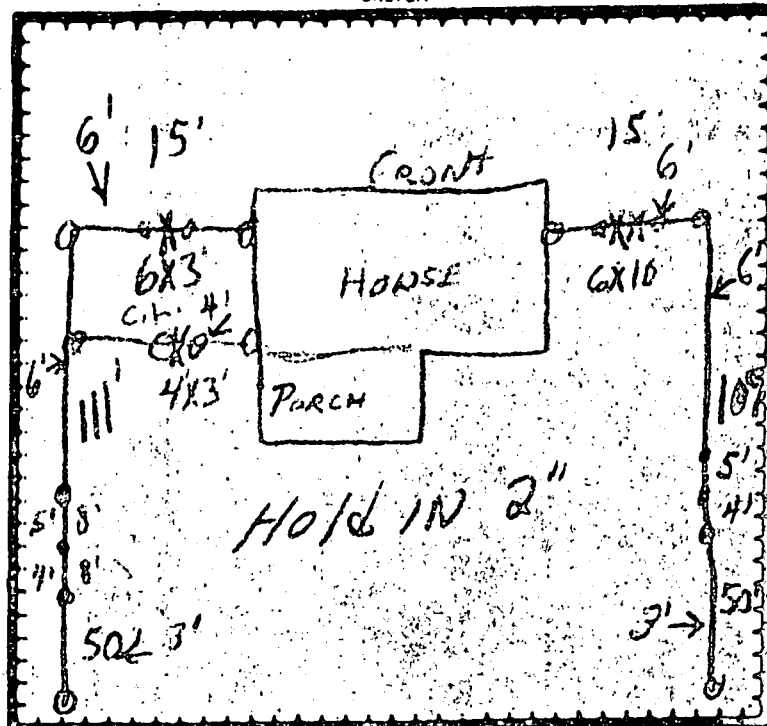
SPECIFICATIONS: All work will be performed in a workmanlike manner and in accordance with standard practice. All posts set in concrete.

Total Height <u>3' 4" 5' 6'</u>	Check Caption Preferred	Additional Specifications
Post Spaced <u>8'</u>	Top Rail <input checked="" type="checkbox"/> 1 1/8" O.D.	Top Rail <u>...</u> O.D.
Style Fence <u>CYPRESS</u>	Line Post <input checked="" type="checkbox"/> 1 1/8" O.D.	Line Post <u>...</u> O.D.
Gauge <input type="checkbox"/> 9 <input type="checkbox"/> 11 1/2	End Post <input checked="" type="checkbox"/> 2 1/2" O.D.	End Post <u>...</u> O.D.
Knuckled <input type="checkbox"/>	Corner Post <input checked="" type="checkbox"/> 2 1/2" O.D.	Corner Post <u>...</u> O.D.
Safeguard <input type="checkbox"/>	Walk Gate Post <input checked="" type="checkbox"/> 2 1/2" O.D.	Walk Gate Post <u>...</u> O.D.
TERMS	Drive Gate Posts <input type="checkbox"/> 2 1/2" O.D.	Drive Gate Posts <u>...</u> O.D.
Cash Upon Completion <input type="checkbox"/>	Gate Frames <input checked="" type="checkbox"/> 1 3/4" O.D.	Gate Frames <u>...</u> O.D.
Budget <input type="checkbox"/>		

Quantity

Cypress SHADOW BOX					
100' 3' SHADOW BOX					
16' 4' " " "					
16' 5' " " "					
218' 6' SHADOW BOX					
1' WOOD DRIVE GATE					
1' WOOD WALK GATE					
15' 4' CHAIN LINK					
1 4x3 1/2" WALK GATE					

SKETCH



TOTAL 1,850.00

MORE OR LESS MATERIAL OTHER THAN AMOUNT CONTRACTED FOR WILL BE DEBITED OR CREDITED AT CURRENT RATES.

The Fence Erector, hereinafter called Erector, proposes to sell material and/or labor to the person or persons hereinafter called Customer. More or less material other than amount contracted for will be debited or credited at current rates.

ACCEPTANCE: The entire proposal, when accepted by the Credit and Engineering Department of Hercules Fence becomes a contract between two parties and is not subject to cancellation. In event of cancellation, customer will pay sales and office expense, such as credit reports, telephone calls, and salesman's commissions.

NOTICE: If contract is changed after the erection crew delivers the material or if undue delay is caused the Erector, there will be a \$7.50 per hour, per man, charge for all lost time.

The CUSTOMER is SOLELY RESPONSIBLE FOR ALL BUILDING PERMITS

You, as the PROPERTY OWNER ARE SOLELY RESPONSIBLE FOR LOCATING PROPERTY LINE.

NO CONDITIONS, AGREEMENTS or STIPULATIONS, VERBAL or OTHERWISE, save those mentioned above shall be recognized.

SALESMAN [Signature]

SALES MANAGER [Signature]

ACCEPTED FOR CREDIT DEPARTMENT [Signature]

ACCEPTED [Signature]



HERCULES FENCE

P.O. Box 3486 — Cocoa, Florida 32922

Cocoa 636-7972
Titusville 267-6430

Fort Pierce 465-3833
Melbourne 727-2210
Vero Beach 562-1485

PROPOSAL TO MR. LAMICH

DATE 10-26-77

ADDRESS 78 So. Seminole Dr. Pt. Zone

SOURCE
OF LEAD

LOCATION STUART FLA

TELEPHONE
NUMBER 283-8337

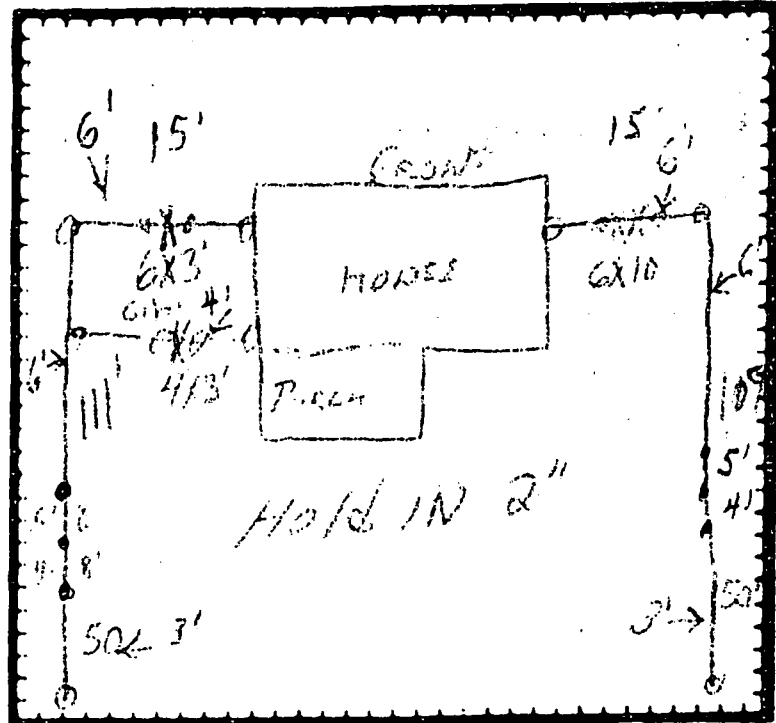
SPECIFICATIONS: All work will be performed in a workmanlike manner and in accordance with standard practice. All posts set in concrete.

Total Height <u>7' 4" 5' 6'</u>		Check Caption Preferred		Additional Specifications	
Post Spaced <u>8'</u>	Top Rail <input type="checkbox"/> 1 1/8" O.D.	KEY		Top Rail <u> </u> O.D.	
Style Fence <u>CYPRESS</u>	Line Post <input checked="" type="checkbox"/> 1 1/8" O.D.	Fence to be erected		Line Post <u> </u> O.D.	
Gauge <input type="checkbox"/> 9 <input type="checkbox"/> 11 1/2	End Post <input checked="" type="checkbox"/> 2 1/4" O.D.	Tie-on (Get permission) X		End Post <u> </u> O.D.	
Knuckled <input type="checkbox"/>	Corner Post <input checked="" type="checkbox"/> 2 1/4" O.D.	Terminal post <input type="checkbox"/>		Corner Post <u> </u> O.D.	
Safeguard <input type="checkbox"/>	Walk Gate Post <input checked="" type="checkbox"/> 2 1/4" O.D.	Existing fence X X X X X		Walk Gate Post <u> </u> O.D.	
TERMS	Drive Gate Posts <input type="checkbox"/> 2 1/4" O.D.	Walk gate <input type="checkbox"/>		Drive Gate Posts <u> </u> O.D.	
Cash Upon Completion <input type="checkbox"/>	Gate Frames <input checked="" type="checkbox"/> 1 3/4" O.D.	Double gate <input type="checkbox"/>		Gate Frames <u> </u> O.D.	
Budget <input type="checkbox"/>		Clothes post location must be shown on plan			
		Indicate if sides are shared			

Quantity

Cypress Shadow Box					
100' 3' Shadow Box					
16' 4' " "					
16' 5' " "					
218' 6' Shadow Box					
1' wood drive gate					
1' wood walk gate					
15' 4' chain link					
1 4x3 1/2" walk gate					

SKETCH



MORE OR LESS MATERIAL OTHER THAN AMOUNT CONTRACTED FOR WILL BE DEBITED OR CREDITED AT CURRENT RATES

The Fence Erector, hereinafter called Erector, proposes to sell material and/or labor to the person or persons hereinafter called Customer. More or less material other than amount contracted for will be debited or credited at current rates.

ACCEPTANCE: The entire proposal, when accepted by the Credit and Engineering Department of Hercules Fence becomes a contract between two parties and is not subject to cancellation. In event of cancellation, customer will pay sales and office expense, such as credit reports, telephone calls, and salesman's commissions.

SALESMAN [Signature]

SALES MANAGER [Signature]

ACCEPTED FOR
CREDIT DEPARTMENT [Signature]

NOTICE: If contract is changed after the erection crew delivers the material or if undue delay is caused the Erector, there will be a \$7.50 per hour, per man, charge for all lost time.

The CUSTOMER is SOLELY RESPONSIBLE FOR ALL BUILDING PERMITS.

You, as the PROPERTY OWNER ARE SOLELY RESPONSIBLE FOR LOCATING PROPERTY LINE.

NO CONDITIONS, AGREEMENTS or STIPULATIONS, VERBAL or OTHERWISE, save those mentioned above shall be recognized.

ACCEPTED [Signature]

2423

REROOF

Permit No.

Date

2723
APPLICATION FOR PERMIT TO BUILD A DOCK, FENCE, POOL, SOLAR HEATING DEVICE, SCREENED ENCLOSURE, GARAGE OR ANY OTHER STRUCTURE NOT A HOUSE OR A COMMERCIAL BUILDING

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

Owner MR & MRS. Mike Levick Present Address 78 S. Sewalls Point Rd.

Phone _____

Contractor Regency Roofing Co. Inc. Address 286 E. Twinburg Rd. Northfield, OH.

Phone (407) 439-6668 1-800-742-5348 44067

Where licensed FL. State & Martin Co. License number CCC 025465

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: Re-roof; Remove existing roof & replace with new #1 Grade Hvy. 24" x 3/4" Cedar shakes

State the street address at which the proposed structure will be built: 78 S. Sewalls Point Rd. Stuart, FL.

Subdivision _____ Lot number _____ Block number _____

Contract price \$ 14,000⁰⁰ Cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Regency Roofing Co. 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 Mike Levick

TOWN RECORD

Date submitted _____ Approved: _____

Building Inspector _____ Date _____

Approved: _____

Commissioner _____ Date _____ Final Approval given: _____

Date _____

Certificate of Occupancy issued (if applicable) _____
Date _____

SP1282

Permit No. _____

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

Permit No. _____

Date _____

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

This application must be accompanied by three (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 MICHAEL LEMICKI Present Address 78 S. SEWALL'S PT. RD

Phone 283-8331

Contractor ALL AMERICAN FENCE Address 554 N.W. MARION AVE

Phone 335-0928

Where licensed MARTIN, ST. LUCIE, IND. R. License number SP00872

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: A HIGH CHAIN LINK FENCE - GREEN VINYL FABRIC

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

78 SO SEWALL'S PT. RD

Subdivision HOMELWOOD Lot number 3 Block number A

Contract price \$ 600 Cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Mike Dempsey

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 Michael Lemicki

TOWN RECORD

Date submitted _____ Approved: Dale Brown Building Inspector _____ Date _____

Approved: _____ Commissioner _____ Date _____ Final Approval given: _____ Date _____

Certificate of Occupancy issued (if applicable) _____ Date _____

SP1282

Permit No. _____

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



All American Fence Contractors Inc.

554 N.W. Marion Ave • Port St. Lucie, FL 34983
(407) 335-0928 / 878-1650

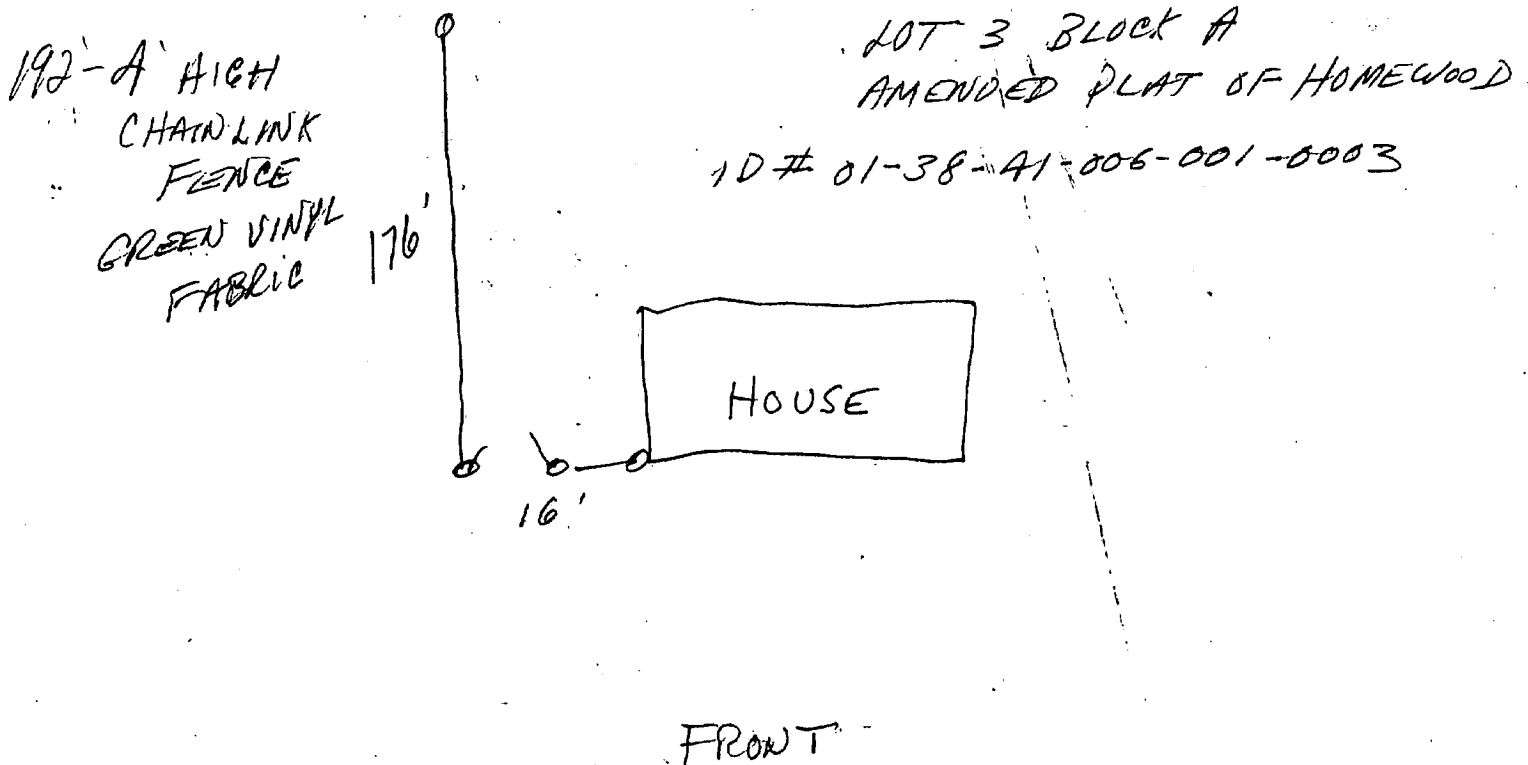
LICENSES
St. Lucie County #2151
Indian River County #1060
Martin County #00872
State of Florida #RX0054663

Page No. 1 of 1 Pages

PROPOSAL SUBMITTED TO: MICHAEL LEMMICK		PHONE	DATE
STREET 78 S. SEWALLS PT RD.		JOB NAME Same	
CITY, STATE AND ZIP CODE STUART, FL		JOB LOCATION Same	
ARCHITECT	DATE OF PLANS	JOB PHONE	

We hereby propose to furnish materials and labor necessary for the completion of:

Thank you for the opportunity to present you with this proposal.



WE PROPOSE hereby to furnish material and labor — complete in accordance with above specifications, for the sum of:

dollars (\$

\$600

Payment to be made as follows:

All material is guaranteed to be as specified. All work to be completed in a substantial workmanlike manner according to specifications submitted, per standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance.

Authorized
Signature

Note: This proposal may be
withdrawn by us if not accepted within _____ days.

ACCEPTANCE OF PROPOSAL The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outline above.

Signature

Date of Acceptance:

Signature



All American Fence Contractors Inc.

554 N.W. Marion Ave • Port St. Lucie, FL 34983
(407) 335-0928 / 878-1650

LICENSES

St. Lucie County #2151
Indian River County #1060
Martin County #00872
State of Florida #RX0054663

Page No. 1 of 1 Pages

PROPOSAL SUBMITTED TO: <i>MICHAEL LEMMICK</i>		PHONE: <i>335-0928</i>	DATE: <i>10/1/81</i>
STREET: <i>78 S. SEWALLS PT RD.</i>		JOB NAME: <i>SEMI</i>	
CITY, STATE AND ZIP CODE: <i>STUART FL</i>		JOB LOCATION: <i>SEMI</i>	
ARCHITECT: <i>1</i>	DATE OF PLANS: <i>10/1/81</i>	JOB PHONE: <i>335-0928</i>	

We hereby propose to furnish materials and labor necessary for the completion of

Thank you for the opportunity to present you with this proposal.

LOT 2 BLOCK A

AMENDED PLAT OF HOME

LOT 01-38-A1-006-001-000



WE PROPOSE hereby to furnish material and labor – complete in accordance with above specifications, for the sum of:

Payment to be made as follows: _____ dollars (\$ _____).

All material is guaranteed to be as specified. All work to be completed in a substantial workmanlike manner according to specifications submitted, per standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance.

Authorized
Signature _____

Note: This proposal may be
withdrawn by us if not accepted within _____ days.

ACCEPTANCE OF PROPOSAL The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outline above.

Signature _____

Date of Acceptance: _____

Signature _____

4423

REROOF

4423

Town of Sewall's Point

P.I.N. 13384100600000040300

Date 6-30-98

ACCESSORY STRUCTURE PERMIT APPLICATION

to construct:

- ☐ DOCK requires prerequisite approval from State and Army Corps of Engineers.
- ☐ BULKHEAD requires prerequisite approval from State and Army Corps of Engineers.
- ☐ DETACHED GARAGE ☐ SWIMMING POOL ☐ WALL
- ☐ SOLAR WATER HEATER ☐ SCREENED ENCLOSURE
- ☐ FENCE may not require sealed drawings.
- ☐ OTHER: _____ REROOF: _____

Owner's Name Edward Reilly

Owner's Address 78 S.Sewall's Point Rd.

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

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

City _____ State _____ Zip _____

Contractor's Name Heaton Enterprises Inc.

Contractor's Address P.O.Box 1143

City Palm City, State Fl. Zip 34990

Job Name Edward Reilly

Job Address # 5 Delano Ln.

City Sewall's Point County Martin

Legal Description Lot 4 / White Fence Acres

Bonding Company _____

Bonding Company Address _____

City _____ State _____

Architect/Engineer's Name _____

Architect/Engineer's Address _____

Mortgage Lender's Name _____

Mortgage Lender's Address _____

Cost of Job \$2,180.00



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

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

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

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

Ed Reilly
Owner or Agent

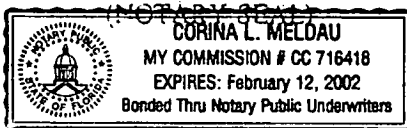
6-30-98
Date

James H. Hester, Sr.
Contractor

6-30-98
Date

STATE OF FLORIDA
COUNTY OF MARTIN

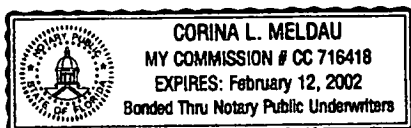
Sworn to and subscribed before me this 30 day of June 1998 by Ed Reilly who: ☒ is/are personally known to me, or ☐ has/have produced _____ as identification, and who did not take an oath.



Corina L. Meldau
Name: Corina L. Meldau
Typed, printed or stamped
I am a Notary Public of the State of
Florida having a commission number of _____
and my commission expires: 2/12/02

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 30 day of June 1998 by Daniel Heaton who: ☒ is/are personally known to me, or ☐ has/have produced _____ as identification, and who did not take an oath.



(NOTARY SEAL)

Corina L. Meldau
Name: Corina L. Meldau
Typed, printed or stamped
I am a Notary Public of the State of
Florida having a commission number of _____
and my commission expires: 2/12/02

Certificate of Competency Holder

Contractor's State Certification or Registration No. CCC036970

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY _____

Permit Officer

4993

STORM SHUTTERS

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 6/30/00

BUILDING PERMIT NO. 4993

Building to be erected for EDWARD KELLY

Type of Permit STORM SHUTTER

Applied for by TREASURE COAST HOME IMPROVEMENT

(Contractor)

Building Fee \$ 60.00

Subdivision _____

Lot _____

Block _____

Radon Fee _____

Address 78 S. SEWALL'S POINT RD

Impact Fee _____

Type of structure S.F.R.

A/C Fee _____

"AFTER FACT" PERMIT

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

1-38-41-00600-1000308/000

Roofing Fee _____

Amount Paid \$ 66.00

Check # 1168

Cash _____

Other Fees (PLAN)

6.00

Total Construction Cost \$ 2,065.00

TOTAL Fees \$ 66.00

Signed Chester Wells

Applicant

Signed [Signature]

Town Building Inspector [Signature]

BUILDING PERMIT

FORM BOARD SURVEY	DATE _____
COMPACTION TESTS	DATE _____
GROUND ROUGH	DATE _____
SOIL POISONING	DATE _____
FOOTINGS / PIERS	DATE _____
SLAB ON GRADE	DATE _____
TIE-BEAMS & COLUMNS	DATE _____
STRAPS AND ANCHORS	DATE _____
DRIVEWAY	DATE _____
AS-BUILT SURVEY	DATE _____

SHEATHING	DATE _____
FRAMING	DATE _____
INSULATION	DATE _____
ROOF DRY-IN	DATE _____
ROOF FINAL	DATE _____
METER FINAL	DATE _____
AS BUILT SURVEY	DATE _____
STORM PANELS	DATE _____
LANDCAPE & GRADE	DATE _____
FINAL INSPECTION	DATE _____

FLOOD ZONE _____

LOWEST HABITABLE FLOOR ELEV. _____

24 HOURS NOTICE REQUIRED FOR INSPECTIONS.

CALL 287-2455

WORK HOURS – 8:00 AM UNTIL 5:00 PM

MONDAY THROUGH SATURDAY

☐ New Construction ☐ Remodel ☐ Addition ☐ Demolition

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

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



Town of Sewall's Point
BUILDING PERMIT APPLICATION

AFTER FACT

RECEIVED
Bldg. Permit Number:
JUN 28 2000

Owner or Titleholder's Name M/M Edward Reilly BY: Phone No. (561) 287-5367
Street: 78 S. Sewalls Point Rd City: Sewalls Point State: Fl. Zip: 34996
Legal Description of Property: 13 84 1 006 00/000 308/000

Parcel Number: _____

Location of Job Site: 78 S. Sewalls Point Rd. Sewalls Point Rd
TYPE OF WORK TO BE DONE: 24 ga DADE Approved Storm panels in some openings

CONTRACTOR/Company Name: Treasure Coast Home Improvements, Inc. Phone No. (561) 335-8989
Street: 1015 SE Talbrook Ct City: AS.L. State: FL Zip: 34952
State Registration: _____ State License: CR-COS7901

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

ENGINEER: RAMMS Engineering, Inc. Phone No. (305) 822-3141
Street: 2100 W 76 St. Ste 311 City: Hialeah State: FL Zip: 33016

AREA SQUARE FOOTAGE - SEWER - ELECTRIC:

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

FLOOD HAZARD INFORMATION

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

COSTS AND VALUES

Estimated cost of construction or Improvement: \$ 2065.00
Estimated Fair Market Value (FMV) prior to improvement: \$ _____
If Improvement, is cost greater than 50% of Fair Market Value? YES _____ NO X
Method of determining Fair Market Value: _____

SUBCONTRACTOR INFORMATION: (Notification to this office of subcontractor change is mandatory.)

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, AIR CONDITIONERS, DOCKS, SEA WALLS, ACCESSORY BUILDINGS, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL.

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

OWNER or AGENT SIGNATURE (Required)

Owner
State of Florida, County of: _____ On
this the _____ day of _____, 2000,
by _____ who is personally
known to me or produced _____
as identification.

Notary Public

My Commission Expires: _____

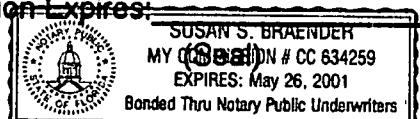
(Seal)

CONTRACTOR SIGNATURE (Required)

Clifford Wells
Contractor
State of Florida, County of: Martin On
this the 27 day of June, 2000,
by CLIFFORD WELLS who is personally
known to me or produced F. DeGiac
as identification.

Notary Public

My Commission Expires: _____



ACORD. CERTIFICATE OF LIABILITY INSURANCE

PRODUCER

HAYNES & HAYNES INSURANCE
2222 Colonial Road, Suite 100
Fort Pierce FL 34950-5309

K John Shockley

Phone No. 561-461-6040 Fax No.

INSURED

Treasure Coast Home
Improvement, Inc.
1015 SE Holbrook Court
Pt St Lucie FL 34952

COPY**FILE**
he/m
FILE

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

COMPANIES AFFORDING COVERAGE

COMPANY A Old Dominion Insurance Company

COMPANY B AmComp Preferred Insurance Co

COMPANY C

COMPANY D

RECEIVED

JUN 28 2000

BY: *SA (fax)***COVERAGES**

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	MPG22886	06/01/00	06/01/01	GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMPROP AGG \$ 2,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 500,000
					MED EXP (Any one person) \$ 10,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	<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 \$
	<input type="checkbox"/> HIRED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:
					EACH ACCIDENT \$
					AGGREGATE \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WCB7011797	09/10/99	09/10/00	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	<input type="checkbox"/> THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE:				EL EACH ACCIDENT \$ 100,000
	<input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL DISEASE - POLICY LIMIT \$ 500,000
	OTHER				EL DISEASE - EA EMPLOYEE \$ 100,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

*10 days applies to nonpayment on general liability. Florida Employees Only
for Workmen's Compensation.

CERTIFICATE HOLDER

SEWAL-1

Town of Sewalls Point
Fax: 561-220-4765
1 South Sewalls Point Road
Stuart FL 34996

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

K John Shockley

ACORD CORPORATION 1988

ACORD 25-S (1/85)



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

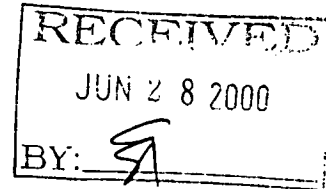
CONST INDUSTRY LICENSING BOARD
7960 ARLINGTON EXPRESSWAY
STE 300
JACKSONVILLE FL 32211-7467

(904) 727-6530

FILE

he/wi

WELLS, CLIFFORD L
TREASURE COAST HOME IMPROVEMENTS INC
1015 SE HOLBROOK COURT
PORT ST LUCIE FL 34953



STATE OF FLORIDA AC# 58717
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CR -C057901 0573172000 990318
CERTIFIED RESIDENTIAL CONTRACT
WELLS, CLIFFORD L
TREASURE COAST HOME IMPROVEMENTS
IS CERTIFIED under the provisions of Ch. 489
Expiration Date: AUG 31, 2002

DETACH HERE

AC# 58717200

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
05/31/2000	99031816	CR -C057901

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

WELLS, CLIFFORD L
TREASURE COAST HOME IMPROVEMENTS INC
1015 SE HOLBROOK COURT
PORT ST LUCIE FL 34953

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON
SECRETARY



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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

MetalTech, Inc.
7635 West 2nd Court
Hialeah FL 33014

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

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

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

Your application for Product Approval of:

24 ga. Storm Panel Maximum Impact

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

Applicant, along with drawings prepared by Robert S. Monsour, P.E., and test reports prepared by Construction Testing Corporation and Certified Testing Laboratories.

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

This approval shall not be valid after the expiration date stated below. The Office of Code Compliance reserves the right to secure this product or material at anytime from a jobsite or manufacturer's plant for quality control testing. If this product or material fails to perform in the approved manner, the Code Compliance Office may revoke, modify, or suspend the use of such product or material immediately. The applicant shall re-evaluate this product or material should any ammendments to the South Florida Building Code be enacted affecting this product or material. The Building Code Compliance Office reserves the 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.: 98-0304.03

Expires: 10/01/01

6/30/00 TOWN OF SEWELL'S POINT
REVIEWED:
BLDG OFFICIAL

Raul Rodriguez
Product Control Supervisor

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

BUILDING CODE COMMITTEE

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

FILE

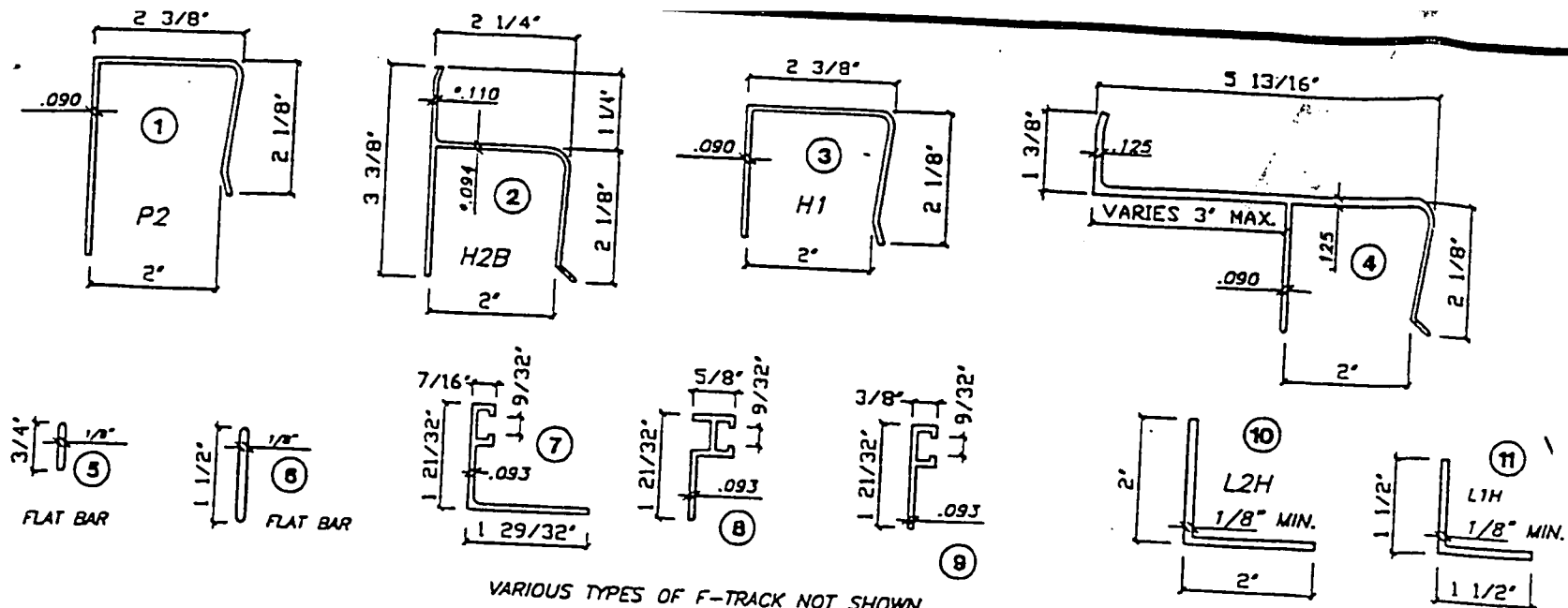
TOWN COPY
78 S. SEWELL'S POINT RD

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

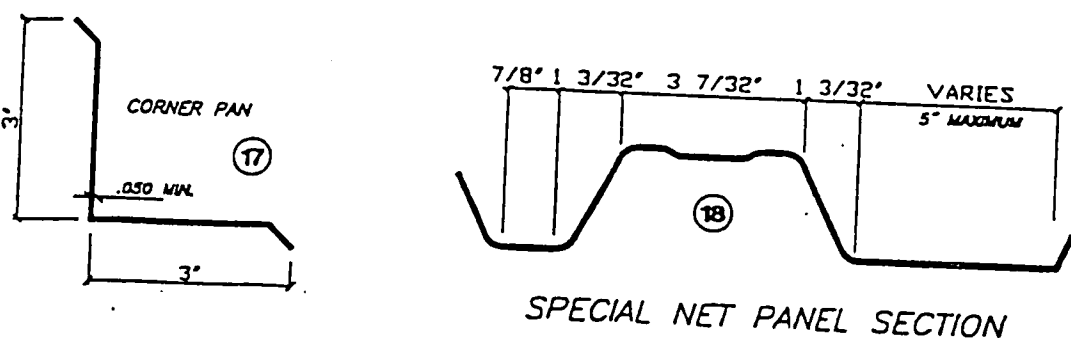
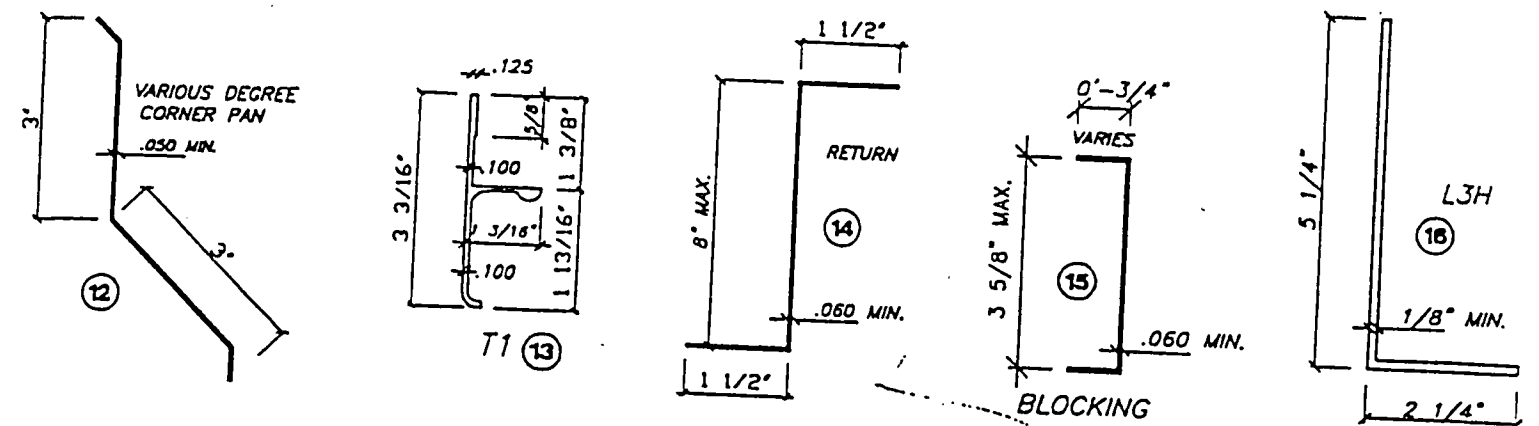
Approved: 10/01/98

PN 4993

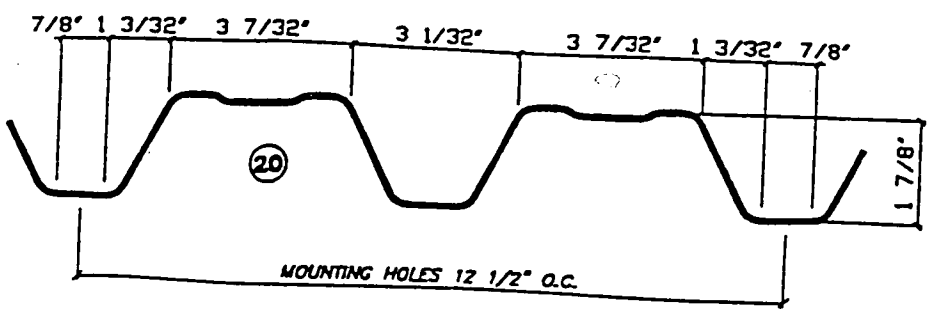




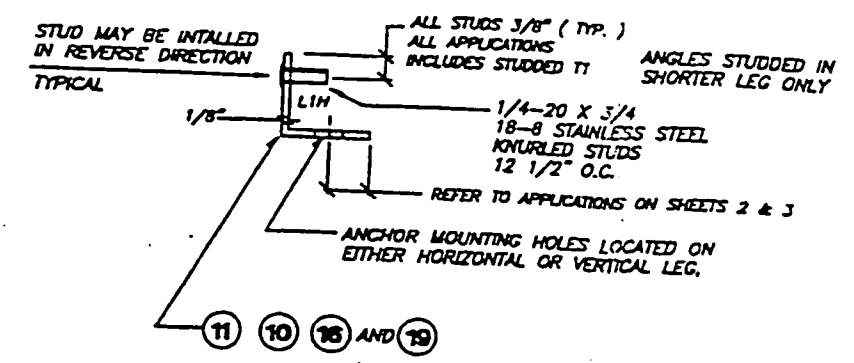
VARIOUS TYPES OF F-TRACK NOT SHOWN



SPECIAL NET PANEL SECTION



CROSS SECTIONS



STUDDED ANGLE DETAIL

1/8" x 1 1/2" FLAT STUDDED STRAP MAY BE USED IN PLACE OF ANGLE

COMPLIES WITH:
S.F.B.C. 1994 EDITION FOR DADE COUNTY, SOUTH FLORIDA BUILDING CODE
2314.5 FATIGUE LOAD TESTING AND 2315 IMPACT TESTS

DESIGN CRITERIA:
WIND LOADS PER CHAPTER 23 OF S.F.B.C. PRESSURE REQUIREMENT CALCULATIONS MUST BE PERFORMED PER ASCE 7-88 "MINIMUM DESIGN LOADS FOR BUILDING AND OTHER STRUCTURES"

GENERAL NOTES:
ALL ALUMINUM EXTRUSIONS TO BE ALLOY 6063-T6 OR EQUAL
STORM PANELS SHALL BE:
24 GAUGE STEEL, ASTM A653 SO GRADE E MIN. $F_y = 80$ K.S.I. MINIMUM VALUE HOT DIP COATED, WITH A NOMINAL WIDTH OF 12 1/2"

24 ga.

MAXIMUM IMPACT STORM PANEL

THE STORM PANEL SHUTTER MAY BE INSTALLED VERTICALLY OR HORIZONTALLY, IN ACCORDANCE TO THE DETAILED SPECIFICATIONS HEREIN.
PANELS MAY BE NOTCHED OR MITERED TO ACCOMMODATE AN OBSTRUCTION
ANCHORAGE OF THE SHUTTER SYSTEM TO CONCRETE OR MASONRY SHALL CONSIST OF THE FOLLOWING OR EQUAL WITH MINIMUM ULTIMATE LOAD VALUES SHOWN
1/4" DIA. RAWL LOK/BOLT ANCHOR (SLEEVED DRIVE ANCHOR)
MIN. TENSILE 1190 - MIN. SHEAR 1520 - 1 1/8" MIN. EMBED. IN CONCRETE
MIN. TENSILE 1200 - MIN. SHEAR 1270 - 1 1/8" MIN. EMBED. IN MASONRY
1/4-20 RAWL CALK-IN ANCHOR (MACHINE SCREW ANCHOR) WITH 1/4-20 BOLTS
MIN. TENSILE 1870 - MIN. SHEAR 1730 - 7/8" MIN. EMBED. IN CONCRETE
MIN. TENSILE 880 - MIN. SHEAR 1340 - 7/8" MIN. EMBED. IN MASONRY
1/4" PERMA-SEAL TAPPER BY RAWL (MASONRY SCREWS VARIOUS HEAD TYPES)
MIN. TENSILE 1520 - MIN. SHEAR 1980 - 1 1/2" MIN. EMBED. IN CONCRETE
MIN. TENSILE 880 - MIN. SHEAR 1270 - 1 1/4" MIN. EMBED. IN MASONRY
1/4" ZAMAC NAILIN BY RAWL (ZAMAC HAMMER DRIVES)
MIN. TENSILE 980 - MIN. SHEAR 1400 - 1 3/8" MIN. EMBED. IN CONCRETE
MIN. TENSILE 730 - MIN. SHEAR 1320 - 1 1/4" MIN. EMBED. IN MASONRY

ANCHORAGE TO WOOD CONSTRUCTION SHALL BE 1/4" STEEL LAGS OR LARGER WITH 1" MIN. THREAD PENETRATION, 1/4-20 BRASS WOOD BUSHINGS OR 1/4" ELCO PANEL MATES WITH 1 7/8" MIN. THREAD PENETRATION.
REFER TO SHEETS 5, 6 & 7 OF 7 FOR ANCHOR SPACING AND MINIMUM EMBEDMENTS
IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE SOUNDNESS OF THE STRUCTURE TO WITHSTAND THE ADDITIONAL LOADS AND INSURE PROPER ANCHORAGE.
EACH PANEL SHALL BEAR A PERMANENT LABEL OR STAMP SHOWING
"METALTECH, INC. HIALEAH, FL" "DADE COUNTY PRODUCT CONTROL APPROVED"
WARNING TO OWNER OR TENANT LOCATED IN EACH HEADER OR ONE PANEL OF EACH OPENING, STATING "STORM PANELS WILL NOT OFFER HURRICANE PROTECTION UNLESS ALL REINFORCING STRAPS OR BOLTS ARE PROPERLY INSTALLED, WHEN REQUIRED"
PERMANENT FASTENER COMPONENTS, EMBEDDED ANCHOR BOLTS, THREADED CONES OR METAL SHIELDS, NOT IN USE, MUST BE PROTECTED AGAINST CORROSION, CONTAMINATION AND DAMAGE AT ALL TIME.

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE
DATE October 01 1998
BY Robert S. Monsour
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 98-0304-03

ROBERT S. MONSOUR, PE
EB-0006024
RAMS ENGINEERING, INC.

REVISIONS	BY
03/20/98	SP
06/12/98	SP
08/14/98	SP

RAMS ENGINEERING, INC.
Structural Design
3100 W. 75th STREET, SUITE 311
MIAMI, FLORIDA 33181
EB 0006024

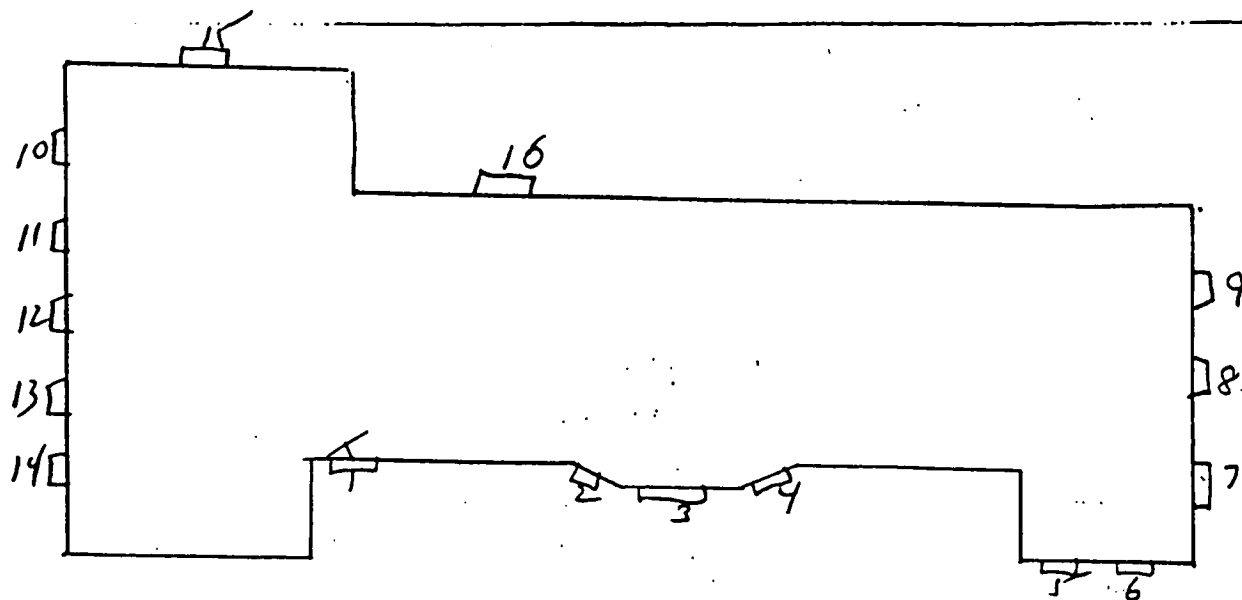
METALTECH, INC.
EST. 1957 7638 W. SECOND CT. HIALEAH, FL 33014
GLOBE WORLD-WIDE

BUILDING CODE COMPLIANCE

SEP/JRB
01/10/98
SHOWN
98001
1

Reilly

OPENING #	MEASUREMENT	ZONE	NEG. OR POS. LOAD	DESIGN LOAD	ANCHOR SPACING
1	63x81	INT	NEG	60.33	16"
2	26x61	INT	NEG	62.78	16"
3	51x61	INT	NEG	62.78	16"
4	26x61	INT	NEG	62.78	16"
5	26x78	EXT	NEG	72.59	16"
6	26x78	EXT	NEG	72.59	16"
7	63x19	EXT	NEG	77.49	16"
8	63x40	INT	NEG	62.78	16"
9	63x40	INT	NEG	62.78	16"
10	100x82	INT	NEG	60.33	16"
11	39x40	INT	NEG	62.78	16"
12	39x40	INT	NEG	62.78	16"
13	39x40	INT	NEG	62.78	16"
14	39x40	INT	NEG	62.78	16"
15	26x18	INT	NEG	77.49	16"
16	63x40	INT	NEG	62.78	16"



DESIGN WIND LOADS IN P.S.F. CLASS ONE BUILDING
 140 M.P.H BASIC WIND SPEED
 COMPLIES WITH ANSI/ASCE 7-95

Att Slane
 #

FOR ALL HURRICANE PROTECTION PRODUCTS

(4) INTERIOR ZONE MAXIMUM CONDITIONS

MEAN ABOVE GRADE		TRIBUTARY AREA IN SQUARE FEET						
		0-10	20	50	100	200	500	1000
		-1.1	-1.05	-0.98	-0.94	-0.9	-0.8	-0.8
15'	0.35	62.78	60.33	56.89	54.93	52.97	48.07	48.07
20'	0.5	66.47	63.88	60.24	58.16	56.09	50.89	50.89
25'	0.64	69.43	66.72	62.92	60.75	58.58	53.16	53.16
30'	0.98	72.38	69.55	65.60	63.33	61.07	55.42	55.42
40'	1.04	76.81	73.81	69.61	67.21	64.81	58.81	58.81
50'	1.09	80.51	77.36	72.96	70.44	67.93	61.64	61.64
60'	1.13	83.46	80.20	75.64	73.03	70.42	63.90	63.90

(5) END ZONE MAXIMUM CONDITIONS

MEAN ABOVE GRADE		TRIBUTARY AREA IN SQUARE FEET						
		0-10	20	50	100	200	500	1000
		1.4	1.3	1.16	1.05	0.96	0.8	0.8
15'	0.35	77.49	72.59	65.72	60.33	55.91	48.07	48.07
20'	0.5	82.05	76.86	69.59	63.88	59.20	50.89	50.89
25'	0.64	85.70	80.28	72.68	66.72	61.83	53.16	53.16
30'	0.98	89.35	83.69	75.77	69.55	64.47	55.42	55.42
40'	1.04	94.82	88.82	80.41	73.81	68.41	58.81	58.81
50'	1.09	99.38	93.09	84.28	77.36	71.70	61.64	61.64
60'	1.13	103.02	96.50	87.37	80.20	74.33	63.90	63.90

Notation: a = 10% of minimum width or 0.4h, whichever is smaller, but not less than either 4% of minimum width or 3 feet;
 n = mean roof height, in feet, except that eave height may be used when $0 < \theta \leq 10$ degrees;
 and θ = floor slope from horizontal, in degrees.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☐ Wed ☒ Fri 7-7-00, 2000;

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4997	Schecodnic	final fence	Passed	
✓ ①	1 River Crest United Court		BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4975	Sternhoj	steel -		NO FORMBOARD SURVEY-REQUIRED
✓ X	106 Hillcrest	pool	CANCEL	CALLED &
	POOLS BY ANDREWS 692-7946	CALL CONTRACTOR	9:05 AM	Advised need survey
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4894	Braunstein	final	Reject	NO ONE AT HOME.
✓ ②	11 N. River	dock	BG.	GATE HAS LOCK ON IT. Can't Get in
	TROPIC MARINE	(Two Large Dogs)		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4993	Reilly	shutters	OK	HAS SOME EXISTING
✓ ⑦	2005 Sewall's	final	BG.	Shutters NOT
	Tr. Coast Home Imp.			Approved.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4994	Christie	shutters -	OK	
✓ ⑥	103 S. Sewall's	final	BG.	
	Tr. Coast Home Imp.			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4996	Villa	final	OK	
✓ ⑨	24 S. Sewall's	electrical	BG.	
	RMR Electric			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4691	Wattles	temp. el.	OK	AP ONLY-
✓ ⑧	20 N. Ridgeview	hook-up	BG.	Took Keys to office.

OTHER: T/R 19 CASTLE HILL DERMARKARUM PALM COAST OK 1. ✓
 9 RIVERVIEW WINTER SHANE'S OK 2. ✓
 20 PALM RD PAUCETT MONTAG OK 3. ✓
 INSPECTOR (Name/Signature): 35 W. HIGHT POINT KING SHANE TREE OK 4. ✓

6616

REROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 3/1/04

BUILDING PERMIT NO. 6616

Building to be erected for REILLY Type of Permit REEROOF

Applied for by PACIFIC ROOFING (Contractor) Building Fee 120.00

Subdivision HOMENOOD Lot 3 Block H Radon Fee _____

Address 78 S. SEWALL'S POINT ROAD Impact Fee _____

Type of structure SR A/C Fee _____

Parcel Control Number: _____ Electrical Fee _____

138410060010003086000 Plumbing Fee _____

Amount Paid 240.00 Check # 120-4986 Cash _____ Other Fees DBL PERMIT 120.00

Total Construction Cost \$ 20,000.00 TOTAL Fees 240.00

Signed Jean F. Joseph Signed Lisa Simmons (204)
Applicant 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

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

Date: **RECEIVED**

FEB 26 2004

Permit Number: _____

Town of Sewall's Point
BUILDING PERMIT APPLICATIONOWNER/TITLEHOLDER NAME: EDWARD REILLY Phone (Day) _____ (Fax) _____Job Site Address: 78 S. SEWALLS PT. RD. City: STUART State: FL Zip: 34997Legal Description of Property: HOMEWOOD, LOT 3 BLK A Parcel Number: 01-38-41-006-001-00030-8

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

Description of Work To Be Done: RE-ROOF SHED TO METAL

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

CONTRACTOR/Company: PACIFIC ROOFING Phone: 283-7663 Fax: 283-9505Street: P.O. BOX 2697 City: STUART State: FL Zip: 34995State Registration Number: _____ State Certification Number: CCC056793 Martin County License Number: _____COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 20,000 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: PACIFIC ROOFING State: FL License Number: CCC056793

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)

Edward F. ReillyState of Florida, County of: MartinThis the 23 day of FEB, 2004by Edward Reilly who is personally

known to me or produced

as identification. James Nickerson

Notary Public

My Commission Expires: _____ James Nickerson

Seal My Commission DD2714.

Expires December 13, 2007

CONTRACTOR SIGNATURE (required)

Richard J. GomezOn State of Florida, County of: MartinThis the 23 day of FEB, 2004by Richard J. Gomez who is personally

known to me or produced

as identification. James Nickerson

Notary Public

My Commission Expires: _____ James Nickerson

Seal My Commission DD271437

Expires December 13, 2007

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

PERMIT # _____

TAX FOLIO # 21-33-41-006-001-00030-9

NOTICE OF COMMENCEMENT

STATE OF FLORIDA

COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE):
16 MEADOW LOT 3 PLKA

GENERAL DESCRIPTION OF IMPROVEMENT: RE-ROOF

OWNER: EDWARD REILLY

ADDRESS: 78 S. SEWALLS POINT ROAD STUART, FL. 34997

PHONE #: NA FAX #: NA

INTEREST IN PROPERTY: _____

NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER): _____

CONTRACTOR: PACIFIC ROOFING

ADDRESS: P.O. BOX 2697 Stuart, FL. 34997

PHONE #: 283-7663 FAX #: 283-9505

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE #: _____

BOND AMOUNT: _____

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

LENDER/MORTGAGE COMPANY _____

ADDRESS: _____

PHONE #: _____

BY: Marsha Ewing D.C.

DATE: 2-26-04

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED
DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION

NAME: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

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 #: _____ 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.

* Edward F. Reilly
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 23 DAY OF FEB 2004

BY Edward REILLY

PERSONALLY KNOWN ✓
OR PRODUCED ID _____
TYPE OF ID _____

NOTARY SIGNATURE



James Nickerson
My Commission DD271437
Expires December 13, 2007

BUILDING CODE COMPLIANCE OFFICE
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1600
MIAMI, FLORIDA 33130-1563
(305) 375-2901 FAX (305) 375-2923

CONTRACTOR LICENSING SECTION
(305) 375-2527 FAX (305) 375-2523

CONTRACTOR ENFORCEMENT DIVISION
(305) 375-2966 FAX (305) 375-2923

PRODUCT CONTROL DIVISION
(305) 375-2902 FAX (305) 375-2923

PRODUCT CONTROL NOTICE OF ACCEPTANCE

J.M. Metals
1505 Cox Road
Cocoa, FL 32926

Your application for Notice of Acceptance (NOA) of:
JM "SV" Crimp Architectural Metal Roof System
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.: 01-0622-02
EXPIRES: 08/16/2006

PACIFIC ROOFING CORPORATION

808 SE DIXIE HIGHWAY

STUART, FLORIDA 34994-3803

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.

WARNING

THIS DOCUMENT CONTAINS PROPRIETARY INFORMATION OWNED BY J.M. METALS. IT IS INTENDED FOR SPECIFIC USE BY J.M. METALS, AND ITS AUTHORIZED DEALERS ONLY WHEN PROVIDED WITH J.M. METALS PRODUCTS, CALCULATIONS, AND AN APPROVED BUILDING CODE COMPLIANCE OFFICE. IT IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM. THIS DOCUMENT AND WARRANTIES AVAILABLE THRU J.M. METALS.

APPROVED: 08/16/2006

ONLY TRUE CERTIFIED COPIES OF THIS DOCUMENT BEAR THE RAISED SEAL OF J. MILA ENTERPRISES, INC. (THE PARENT COMPANY OF J.M. METALS)

Francisco J. Quintana, R.A.

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

FILE COPY

TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE

DATE: 3/1/04

Rob for GSI
BUILDING OFFICIAL
Gene Simmons

\\s045000\\lpc2000\\templates\\notice acceptance cover page.doc

Internet mail address: postmaster@buildingcodeonline.com

Homepage:

http://www.builtcodeonline.com

ROOFING SYSTEM APPROVAL:

Category: Roofing
 Sub-Category: Metal, Panels
 (Non-Structural)
 Material: Steel
 Deck Type: Wood
 Maximum Design Pressure -85 psf.

Approval Date: August 16, 2001

Expiration Date: August 16, 2006

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

Product	Dimensions	Test Specifications	Product Description
SV Steel Roofing Panel	l = varies w = 26" h = 1/2" Min. Thickness 0.019"	PA 110	Metal Roof panel coated with Fluoropon®.

TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS:

Product	Dimensions	Product Description	Manufacturer
Fasteners (Panel)	#9-15 HH	Corrosion resistant, sharp point hex-brass screws with 1/4" EPDM Bonded Steel sealing washer.	generic

EVIDENCE SUBMITTED


Test Agency	Test Identifier	Test Name/Report	Date
The Valspar Corporation	Lab Test Certification	ASTM B-117 ASTM G-23	
PRJ Asphalt Technologies, Inc.	JMM-001-01-01	PA 100	05/10/01
Underwriters Laboratories, Inc.	01NK5594	UL 580	01/15/01

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Page 2

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Frank Zuloaga, RRC
 Roofing Product Control Examiner

APPROVED SYSTEMS:

SYSTEM: SV Steel Roofing Panel

Deck Type: Wood, Non-insulated

Deck Description: New Construction or Re-roof
 $1\frac{9}{32}$ " or greater plywood or wood plank.

Slope Range: 2":12" or greater

Maximum Uplift Pressure: The maximum allowable design pressure -85 psf

Deck Attachment: In accordance with applicable building code, but in no case shall it be less than 8d ring shank nails spaced 6" o.c. In reroofing, where the deck is less than $1\frac{9}{32}$ " thick (Minimum $1\frac{5}{32}$ ") The above attachment method must be in addition to existing attachment.

Underlayment: Minimum underlayment shall be an ASTM D 226 Type II installed with a minimum 4" side-lap and 6" end-laps. Underlayment shall be fastened with corrosion resistant tin-caps and 12 gauge 1 $\frac{1}{4}$ " annular ring-shank nails, spaced 6" o.c. at all laps and two staggered rows 12" o.c. in the field of the roll.

Valleys: Valley construction shall be in compliance with Roofing Application Standard RAS 133 and with JM Metals' SV Steel Roofing Panel' current published installation instructions.

Fire Barrier Board: For class A or B fire rating, install minimum $\frac{1}{4}$ " thick Georgia Pacific "Dens Deck" (with current NOA) or minimum 4mm thick of Tritex, RockRoof (with current NOA) or $\frac{5}{16}$ " water resistant type X gypsum sheathing with treated core and facer.

Metal Panels and Accessories:

Install the "SV Steel Roofing Panel" and accessories in compliance with JM Metals' current published installation instructions and details. Flashing, penetrations, valley construction and other details shall be constructed in compliance with the minimum requirements provided in Roofing Application Standards RAS 133.

SV Roofing Panels shall be fastened with a minimum of #9-15 HH corrosion resistant fasteners with sealing washer. Fasteners shall of sufficient length to penetrate through the sheathing a minimum of $\frac{3}{16}$ ". Fasteners shall be place in accordance with fastener detail herein as follows:

Fasteners shall be installed at a maximum of 12" o.c. at side laps perpendicular to roof slope and at a maximum of 12" o.c. in the center of the panel at the field perpendicular to roof slope. Fastener shall be placed at high points of panel ribs.

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ONLY TRUE CERTIFIED COPIES OF THIS DOCUMENT BEAR THE RAISED SEAL OF J. MILA ENTERPRISES, INC. (THE PARENT COMPANY OF J.M. METALS)

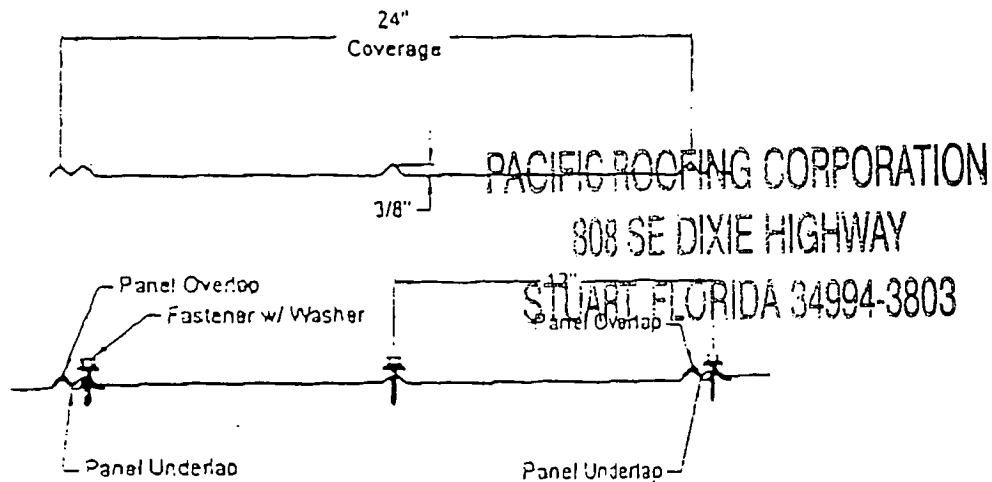
Page 3



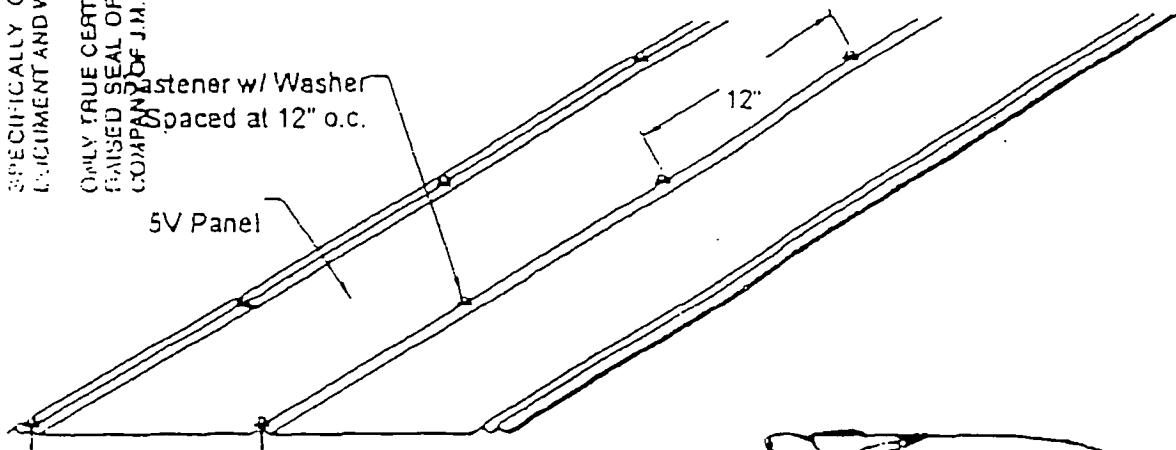
Frank Zuloaga, RRC
Roofing Product Control Examiner

SYSTEM LIMITATIONS:

1. Increased design pressures at perimeter and corner areas, in compliance with applicable building code may be met through rational analysis by increasing the number of attachment points in these areas. The maximum fastener spacing noted in the "Systems Description" section of this approval shall not be exceeded. All rational analysis computation shall be prepared, signed and sealed by a Florida registered Professional Engineer, Registered Architect, or Registered Roof Consultant.
2. Panels shall be roll formed in continuous lengths from eave to ridge. Maximum lengths shall be as described in Miami-Dade County Roofing Application Protocol RAS 133.
3. All panels shall be permanently labeled with the manufacturer's name or logo, and the following statement: "Miami-Dade County Product Control Approved."



5V STEEL ROOFING PANEL





Frank Zuloaga, RRC
Roofing Product Control Examiner

THIS DOCUMENT CONTAINS PROPRIETARY INFORMATION AND IS INTENDED FOR BULK USE BY J.M. METALS. IT IS NOT TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, INCLUDING PHOTOCOPYING, RECORDING, OR BY ANY INFORMATION STORAGE AND RETRIEVAL SYSTEM. J.M. METALS PRODUCTS, CALCULATIONS, AND ADVICE CONTAINED HEREIN ARE ONLY VALID WHEN USED IN CONNECTION WITH CERTIFIED J.M. METALS MATERIAL. OTHER PRODUCTS MAY NOT PERFORM THE SAME, AND ARE SPECIFICALLY OMITTED FROM COVERAGE FROM THIS DOCUMENT AND WARRANTIES AVAILABLE THRU J.M. METALS.

ONLY TRUE CERTIFIED COPIES OF THIS DOCUMENT BEAR THE RAISED SEAL OF J. MILA ENTERPRISES, INC. (THE PARENT COMPANY OF J.M. METALS)

NOTICE OF ACCEPTANCE STANDARD CONDITIONS

- 1 Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documentation, including test supporting data, engineering documents, are no older than eight (8) years.
- 2 Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Miami-Dade County Product Control Approved", or as specifically stated in the specific conditions of this Acceptance.
- 3 Renewals of Acceptance will not be considered if:
 - a) There has been a change in the South Florida Building Code affecting the evaluation of this product and the product is not in compliance with the code changes;
 - b) The product is no longer the same product (identical) as the one originally approved;
 - c) If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product;
 - d) The engineer who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.
- 4 Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.
- 5 Any of the following shall also be grounds for removal of this Acceptance:
 - a) Unsatisfactory performance of this product or process;
 - b) Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.
- 6 The Notice of Acceptance 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 Notice of Acceptance is displayed, then it shall be done in its entirety.
- 7 A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all times. The copies need not be resealed by the engineer.
- 8 Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
- 9 This Acceptance contains pages 1 through 5.

END OF THIS ACCEPTANCE

PACIFIC ROOFING CORPORATION
808 SE DIXIE HIGHWAY
STUART, FLORIDA 34994-3803

WARNING

THIS DOCUMENT CONTAINS PROPRIETARY INFORMATION OWNED BY J.M. METALS. IT IS INTENDED FOR SPECIFIC USE BY J.M. METALS AND ITS AUTHORIZED DEALERS ONLY WHEN PROVIDING J.M. METALS PRODUCTS, CALCULATIONS, AND ADVICE CONTAINED HEREIN, AND IS ONLY VALID WHEN USED IN CONJUNCTION WITH CERTIFIED J.M. METALS MATERIAL. OTHER PRODUCTS MAY NOT PERFORM THE SAME, AND ARE SPECIFICALLY OMITTED FROM COVERAGE FROM THIS DOCUMENT AND WARRANTIES AVAILABLE THRU J.M. METALS.

ONLY TRUE CERTIFIED COPIES OF THIS DOCUMENT BEAR THE RAISED SEAL OF J. M. METALS ENTERPRISES, INC. (THE PARENT COMPANY OF J.M. METALS)

Page 5



Frank Zuloaga, RRC
Roofing Product Control Examiner

E & E

ENGINEERING CONSULTANTS INC.

2431 SE Dixie Hwy. Stuart FL 34996

PH. 772- 287 0525 FAX. -220 8686

CELL. 772-708 7785

February 9, 2004

VISUAL INSPECTION

WITH STRUCTURAL VERIFICATION REPORT

PROJECT: Safe strapping and anchoring of the roof structure to the house structural frame at **Mr. Edward Reilly** 78 South Sewall's Point Rd. Sailfish Point Stuart FL.

CLIENT: **Pacific Roofing Corp.** 800 SE Dixie Hwy, Stuart FL 34994

PREPARED FOR: **Mr. Edward Reilly owner.**

Background.

On February 6, 2004 B & B Engineering Inc. was requested by Pacific Roofing Corp. a Roofing Contractor to certify the proper and safe anchorage of the structural roof frame of the above residence to the house main roof structural frame, prior to roof replacement.

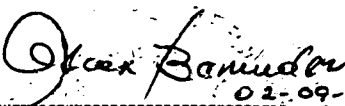
Certification.

B & B Engineering Inc. Certify that the roof structure composed of remanufactured wood trusses at 24" on center with cedar shakes and laths for the roof covering is structural sound and well anchored to the house structure, according to the F.B.C. and Martin County Code. It is B & B Engineering Inc. professional opinion that the structure is secure and safe to resist up to 140 miles 3 seconds gusty winds.

Limitations.

Our professional services has been performed, our finding obtained and our opinions prepared in accordance with general accepted structural engineering principles and practices. This Company is not responsible for the conclusions, opinions or recommendations made by others based on our findings. The scope of the inspection was intended to evaluate the roof structure and its proper anchoring. The opinions submitted in the report are based upon field inspection on February 7, 2004.

Approved by:


02-09-04
Oscar M. Bermúdez, PE
Fl license # 55141



6616

TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 78 SEWALLS RD. (SOUTH)

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.

ROOF IN PROGRESS

NO LADDER ON JOB

NEED PERSONNEL ON JOB TO

OUT SECTIONS OF FELT TO

INSPECT ~~THE~~ NAILING OF

SHEATHING.

\$40 FEE

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

DATE: 3/17/04

PHIL

INSPECTOR

DO NOT REMOVE THIS TAG

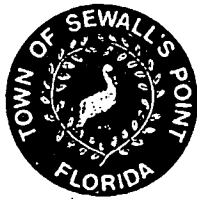
TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☒ Wed ☐ Fri MARCH 17, 2004 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6609	MINNET	ROUGH GAS	PASS	
7	8 PEREWINKLE LA			
	PROPANE DISCOUNTS			INSPECTOR: <i>[Signature]</i>
6616	REILLY	INTERIOR	FAIL	
4	78 S. SEWALL'S PT			#40 TREE
	PACIFIC			INSPECTOR: <i>[Signature]</i>
6610	KING	ROOF IN PROGRESS	FAIL	
1	35W HIGH POINT			
	CARDINAL ROOFING			INSPECTOR: <i>[Signature]</i>
6513	DUNN	PLUMBING REPAIR	FAIL	
5	31 N. RIVER RD			
	WHITE PLUM			INSPECTOR: <i>[Signature]</i>
5734	ABESADA-TEK	PERM FINAL	FAIL	CHECK ON SAND IN
2	8 MORGAN CIRCLE	(TUB)		INNER CHASE
	CONWAY			INSPECTOR: <i>[Signature]</i>
6608	FOWLER	DOOR BUCK	PASS	CLOSE
6	18 FIELDWAY			
	O/B			INSPECTOR: <i>[Signature]</i>
6636	LIENHARDT	SATELLITE DSH	PASS	CLOSE
3	17 RIVERVIEW DR			
	O/B			INSPECTOR: <i>[Signature]</i>
OTHER: <i>Please check scope</i>				
7 COPAIRS ← PUT ON STOP WORK ORDER				
BRACKEN				

TREE 4 DELAND LA TREE PASS INSPECTION LOG.xls *[Signature]*



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 78 S SEWALL'S RD.

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

TIN TAG / SHEATHING

SHEATHING IS INCORRECTLY
NAILED AT EDGES & IN FIELD

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

DATE: 3/19/04 PHC







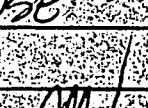
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☐ Wed ☒ Fri 3/19, 2004 Page 6 of

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6616	REILLY	FIN TAG METAL	FAIL	
5	78 S. Sewall St Pacific Roofing			INSPECTOR: 
6355	PARADISE	FINAL ROOF	PASS	
9	11 RIDGELAND LUX HOMES			INSPECTOR: 
6605	TWOHEY	DECK PATIO SLAB	FAIL	
8	119 HILLCREST FLAMINGO POOLS			INSPECTOR: 
6611	LUCAS	FINAL GAS	PASS	CLOSE
4	1 MANDALAY AMERICA GAS			INSPECTOR: 
6610	KING	ROOF IN PROGR.	FAIL	
3	35 W HIGH POINT CARDINAL			INSPECTOR: 
6513	DUNN	IN GR. ROUGH	PASS	
10	31 N. RIVER WHITE PLUMBING			INSPECTOR: 
6612	GABRYNOWICZ	FINAL ROOF	PASS	CLOSE
11	5 QUAIL RUN PACIFIC ROOFING			INSPECTOR: 
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☒ Mon ☐ Wed ☐ Fri 3/22, 20014 Page 1 of

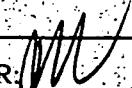
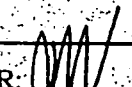
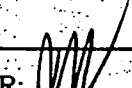

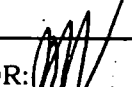
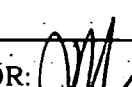
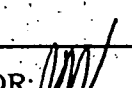
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5185	JONES	MECH-ROUGH	—	CANCEL ^{WILL RESCHEDULE}
3	14 HERONS NEST	ELEC-ROUGH	—	CANCEL " " "
	O/B			INSPECTOR <i>[Signature]</i>
6347	JONES	BOATLIFT	PASS	CLOSE
3	14 HERON'S NEST			
	O/B			INSPECTOR <i>[Signature]</i>
6616	REILLY	SHEATHING	—	WILL RESCHEDULE
1	78 S. Sewall's Pt			SET FOR 3/24
	PACIFIC ROOFING			INSPECTOR <i>[Signature]</i>
6520	HINES	ROOF SHEATHING	PASS	
2	113 HENRY SEWALL			
	WINCHIP			INSPECTOR <i>[Signature]</i>
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:

OTHER:

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☒ Wed ☐ Fri 3/24, 2008 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6564	LANCASTER	ROOF FINAL	PASS	CLOSE
7	5 S. VIA LUCINDIA			
	SNARY ROOFING			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6616	REILLY	SHEATHING	PASS	
4	78 S. SEWALL'S PT	THUS/TA/6/METAL	PASS	
	PACIFIC ROOFING			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6615	DEMPSY	FINAL SIDING	PASS	CLOSE
5	38 S. SEWALL'S PT			
	OAK HAMMOCK			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6605	TWOHEY	DECK PATIO SLAB		
	119 HILLCREST			
	FLAMINGO POOLS			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6566	MAC DOUGALL	REPL. DOOR FINAL	PASS	CLOSE
8	23 N. RIVER			
	QUALITY AFFORDABLE			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6232	MOORE	MECH ROUGH	FAIL	
11	5 OAK HILL WAY	PLUMBING ROUGH	FAIL	
	QUALITY CLIMATE	ELEC ROUGH	FAIL	INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	SIEGEL/RIBELLINO	TREE	PASS	
2	BOW 16+18 ISLAND			
				INSPECTOR: 

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☐ Wed ☒ Fri 3/26, 2004 Page of

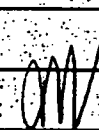


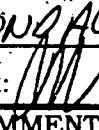


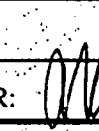
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6513	DUNN	SLAB	PASS	
1	31 N. RIVER	STEM WALL		
	FIRST FLORIDA			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6638	SMITH	UG ROUGH	FAIL	
5	7 SIMARA ST			
	FERRER GAS			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5914	ABESADA	FINAL POOL + SPA + DECK	FAIL	
4	8 MORGAN CR			
	HARBOR BAY POOLS			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6242	ABESADA	FINAL GAS	PASS	6000
4	8 MORGAN CR			
	FERRER GAS			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7	NAEGLE	TREES	FAIL	
	23 S. RIDGEVIEW			
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6543	DUNN	SLAB	==	RESCHEDULE FOR
1	31 N. RIVER			MONDAY
	FIRST FLORIDA	(FIRST PLEASE)		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6616	RELLY	TINTAG + MEM	PASS	
6	78 S. SEWALL'S Pt			
	PACIFIC ROOFING			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☐ Wed ☒ Fri 4/2, 2004 Page 2 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6544	LANCASTER	SLAB	PASS	
1A	8 PINEAPPLE WAY			
	MASTERPIECE BLDG (FIRST THING PLEASE)			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6616	REILLY	FINAL ROOF	PASS	CLOSE
5	785 SEWALLS PT	SEE OWNER		
	PACIFIC ROOFING			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6640	SEILER	FENCE	PASS	CLOSE
6	5 KINGSTON G			
	STUART FENCE			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6849	LUBINA	FINAL SCREEN	—	WILL SCHEDULE
7	10N VIA LUCINDIA			FOR MONGAUL
	PIONEER SCREEN			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6520	HINES	STRAPPING	FAIL	
9	113 HENRY SEWALLS			
	WINCHIP			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6413	POWERS	PRE POUR	PASS	
4	70 S. SEWALLS	STAIRS FOOTERS		
	FLORIDA'S FINEST	(Early please)		INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6391	WHITWELL	TINTAG+MEAL	PASS	
14	1 MARGUERITA	ROUGH ELEC	—	
	HENNINGAWAY HALL	ROUGH PLUMB	FAIL	INSPECTOR: 
OTHER:		ROUGH ALC	FAIL	

6688

WINDOWS

&

DOORS

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/13/04

BUILDING PERMIT NO. 6688
REPLACE WINDOWS
Type of Permit + DOORS

Building to be erected for REILLY

Applied for by TREASURE COAST HOME IMP (Contractor) #21KX \$9,601,000 = 201.60

Subdivision HOMWOOD Lot 3 Block A

Address 78 S. Sewall's Pt Rd

Type of structure SFR

Radon Fee _____

Impact Fee _____

A/C Fee _____

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Parcel Control Number:

138410060010003080000

Amount Paid 201.60 Check # 3803 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 21,000.

TOTAL Fees 201.60

Signed Clyde W. Webb
Applicant

Signed Gene Summers
Town Building Official

PERMIT

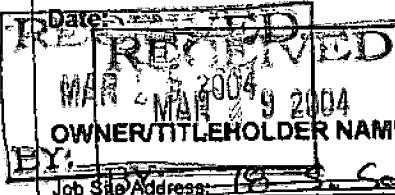
- | | | |
|---|--|--|
| <input type="checkbox"/> BUILDING | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ROOFING | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input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

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: _____

OWNER/TITLEHOLDER NAME: Edward ReillyPhone (Day) 287-5367 (Fax) _____Job Site Address: 18 S. Sewall's Point RdCity: Stuart State: FL Zip: 3Legal Desc. Property (Subd/Lot/Block) Lot 3 BKA of Homewood Parcel Number: 10101 3841 006001 000308

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

Description of Work To Be Done: Replacement windows, Impact resistant PGT brandWILL OWNER BE THE CONTRACTOR?: Yes ☐ No ☒ (If no, fill out the Contractor & Subcontractor sections below)CONTRACTOR/Company: Treasure Coast Home Phone: 335-8989 Fax: 335-3336Street: 1015 SE Halbrook Ct. City: PSL State: FL Zip: 34952State Registration Number: _____ State Certification Number: CR0057901 Martin County License Number: _____COST AND VALUES: Estimated Cost of Construction or Improvements: \$21,000.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

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

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

ENGINEER: Robert E Clark PE Phone Number: 800-282-6019
 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)

State of Florida, County of: _____
 This the _____ day of _____, 2004
 by _____ who is personally
 known to me or produced
 as identification.

Notary Public

My Commission Expires: _____

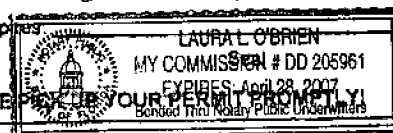
Seal

CONTRACTOR SIGNATURE (required)

Clifford Wells
 On State of Florida, County of: MARTIN
 This the 29TH day of MARCH, 2004
 by CLIFFORD WELLS who is personally
 known to me or produced FL 1120-112-50-183-0
 As identification.

Notary Public

My Commission Expires: _____



PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL NOTIFICATION - PLEASE

EXPIRE YOUR PERMIT PROMPTLY!

ACORD CERTIFICATE OF LIABILITY INSURANCECSR WG
TREA819DATE (MM/DD/YYYY)
08/05/03**PRODUCER**

HARBOR INSURANCE AGENCY
2222 Colonial Road, Suite 100
Fort Pierce FL 34950-5309
Phone: 772-461-6040 Fax: 772-460-2315

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

Treasure Coast Home
Improvement, Inc.
1015 SE Holbrook Court
Pt St Lucie FL 34952

INSURER A: Old Dominion Insurance Company
INSURER B: AmComp Preferred 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 ADDL LTR INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	MPG22886	06/01/03	06/01/04	EACH OCCURRENCE \$1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$500,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$10,000
					PERSONAL & ADV INJURY \$1,000,000
	GENERAL AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE \$2,000,000
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG \$2,000,000
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				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 \$
	<input type="checkbox"/> DEDUCTIBLE				\$
	RETENTION \$				\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WCB7011797	09/10/03	09/10/04	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$100,000
	If yes, describe under SPECIAL PROVISIONS below				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

SEWAL-1

Town of Sewalls Point
Fax: 772-220-4765
1 South 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 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

James G. Flynn

ACORD 25 (2001/08)

ACORD CORPORATION 1988



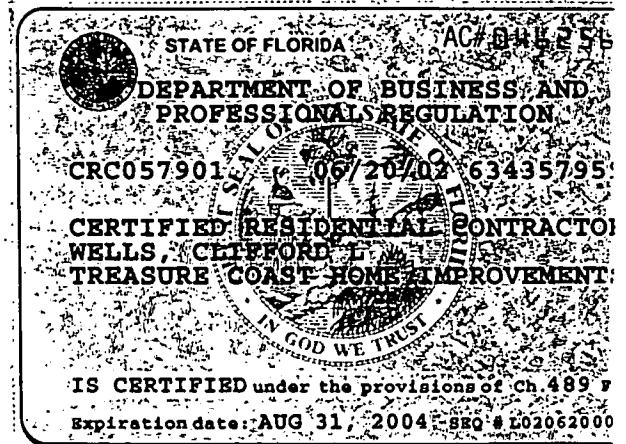
STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

WELLS, CLIFFORD L
TREASURE COAST HOME IMPROVEMENTS INC
1015 SE HOLBROOK COURT
PORT ST LUCIE FL 34953



DETACH HERE

AC# 0462561

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L02062000

DATE	BATCH NUMBER	LICENSE NBR
06/20/2002	634357959	CRC057901

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

WELLS, CLIFFORD L
TREASURE COAST HOME IMPROVEMENTS INC
1015 SE HOLBROOK COURT
PORT ST LUCIE FL 34953



JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER
SECRETARY

☒ 2003-2004

ST. LUCIE COUNTY OCCUPATIONAL LICENSE
STATE OF FLORIDA

ACCOUNT 1500-19990024

EXPIRES SEP 30, 2004

FACILITIES
R
MACHINES ROOMS SEATS EMPLOYEES 1-10

TYPE OF BUSINESS 1500 BUILDING CONTRACTOR

BUSINESS LOCATION 1015 SE Holbrook Ct
P - CITY OF PT ST LUCIE

NAME Clifford Wells DBA 04897
MAILING ADDRESS Treasure Coast Home Improvemen
Wells, Clifford
1015 Se Holbrook Ct
Pt St Lucie, Fl 34952

X RENEWAL
NEW LICENSE
TRANSFER-
ORIGINAL TAX 11.25

AMOUNT
PENALTY
COLLECTION COST
TOTAL 11.25

THIS LICENSE BECOMES NULL AND VOID IF BUSINESS NAME,
CLASSIFICATION, OWNERSHIP OR ADDRESS IS CHANGED, UNLESS
LICENSEE APPLIES TO TAX COLLECTOR FOR CORRECTION.

SUBJECT TO SUSPENSION OR REVOCATION IN
ACCORDANCE WITH ORDINANCES OF ST. LUCIE COUNTY
BOB DAVIS, CPA, CGFO, CFC, ST. LUCIE COUNTY TAX COLLECTOR
P.O. BOX 308 FORT PIERCE, FL 34952-0308

G94257000077

PAID
MACH:005 8/23/03 2:07PM 00004409
2003 1500-19990024

0600 \$11.25
CK \$11.25
CHANGE \$0.00

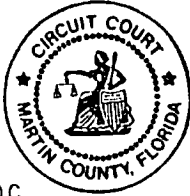
INSTR # 1738759
OR BK 01879 PG 2894
RECORDED 03/29/2004 10:03:42 AM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY S Phoenix

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 S Phoenix D.C.
DATE 3-29-04



PERMIT # _____

TAX FOLIO # 101 01 38 41 006 001 000308

STATE OF Florida

NOTICE OF COMMENCEMENT
COUNTY OF Martin

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

LEGAL DESCRIPTION OF PROPERTY (INCLUDING STREET ADDRESS IF AVAILABLE)

Lot 3 Block A Amended Plat of Home Seers

GENERAL DESCRIPTION OF IMPROVEMENT: Replacement windows & doors

OWNER: Edward F. Reilly

ADDRESS: 78 S. Snowall's Point Rd., Stuart, FL 34996

PHONE #: 287-5867

FAX#: _____

CONTRACTOR: TRESAURE COAST HOME IMPROVEMENTS INC

ADDRESS: 1015 SE HOLBROOK CT. PORT ST. LUCIE, FL. 34952

PHONE #: 772-335-8989

FAX#: 772-335-3336

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 SERVE AS PROVIDED BY SECTION 713.13 (1 X 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.

SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 13 DAY OF March

19 2004 BY Edward F. Reilly PERSONALLY KNOW

OR PRODUCED ID

TYPE OF ID FL DL

NOTARY SIGNATURE



Linda Schram
My Commission DD083124
Expires January 11, 2008

FILE COPY
TOWN OF SEWELL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 3/30/04

BUILDING OFFICIAL
Gene Simmons

DESIGN CRITERIA: VELOCITY ZONE: 140 MPH EXPOSURE C
BUILDING CATEGORY: ENCLOSED / INTERNAL PRESSURE COEFFICIENT = .18
MEAN ROOF HEIGHT < 15 FT

Fiberglass Prathing
2068

Shutters
Required

(EXISTING
COVERED
PORCH)

ASCE 7-02 Design Pressures Exposure C 140 mph Roof Height 15' or less

Opening #	Width (in)	Height (in)	Area (sqft)	End Zone	Component and Cladding Pressures
					Negative Positive
1	26.5	63	12	No	-45.8 34.8
2	57.5	62.5	25	No	-43.8 33.2
3	26.5	63	12	No	-45.8 34.8
4	26.5	76	14	Yes	-55.3 34.5
5	53.125	38.375	14	Yes	-55.3 34.5
6	53	16.5	6	Yes	-57.2 35.3
7	53.125	38.375	14	No	-45.4 34.5
8	53.125	38.375	14	Yes	-55.3 34.5
9	96	80	53	Yes	-47.9 31.4
10	96	80	53	No	-41.7 31.4
11	72	80	40	Yes	-49.5 32.1
12	96	80	53	Yes	-47.9 31.4
13	72	80	40	Yes	-48.5 32.1
14	37	38.375	10	Yes	-57.2 35.3
15	72	80	40	No	-42.5 32.1
16	37	38.375	10	No	-46.3 35.3
17	37	38.375	10	No	-46.3 35.3
18	37	38.375	10	No	-46.3 35.3
19	53.125	38.375	14	No	-43.8 33.2

Entry

26 1/2 X 63
57 1/2 X 62 1/2
26 1/2 X 63

53X16 1/2 PW 53-1/8X38-3/8SH 53-1/8X38-3/8SH

26 1/2 X 76 SH 26 1/2 X 76 SH

Single Family Dwelling Footprint and Opening Layout

Copyright Notice: Copyright© 2004 - All Rights Reserved by Specialty Structure Design and/ or David W. Miller

Treasure Coast Home Improvements, Inc.
1015 S.E. Holbrook Court
Port St. Lucie, Florida 34952

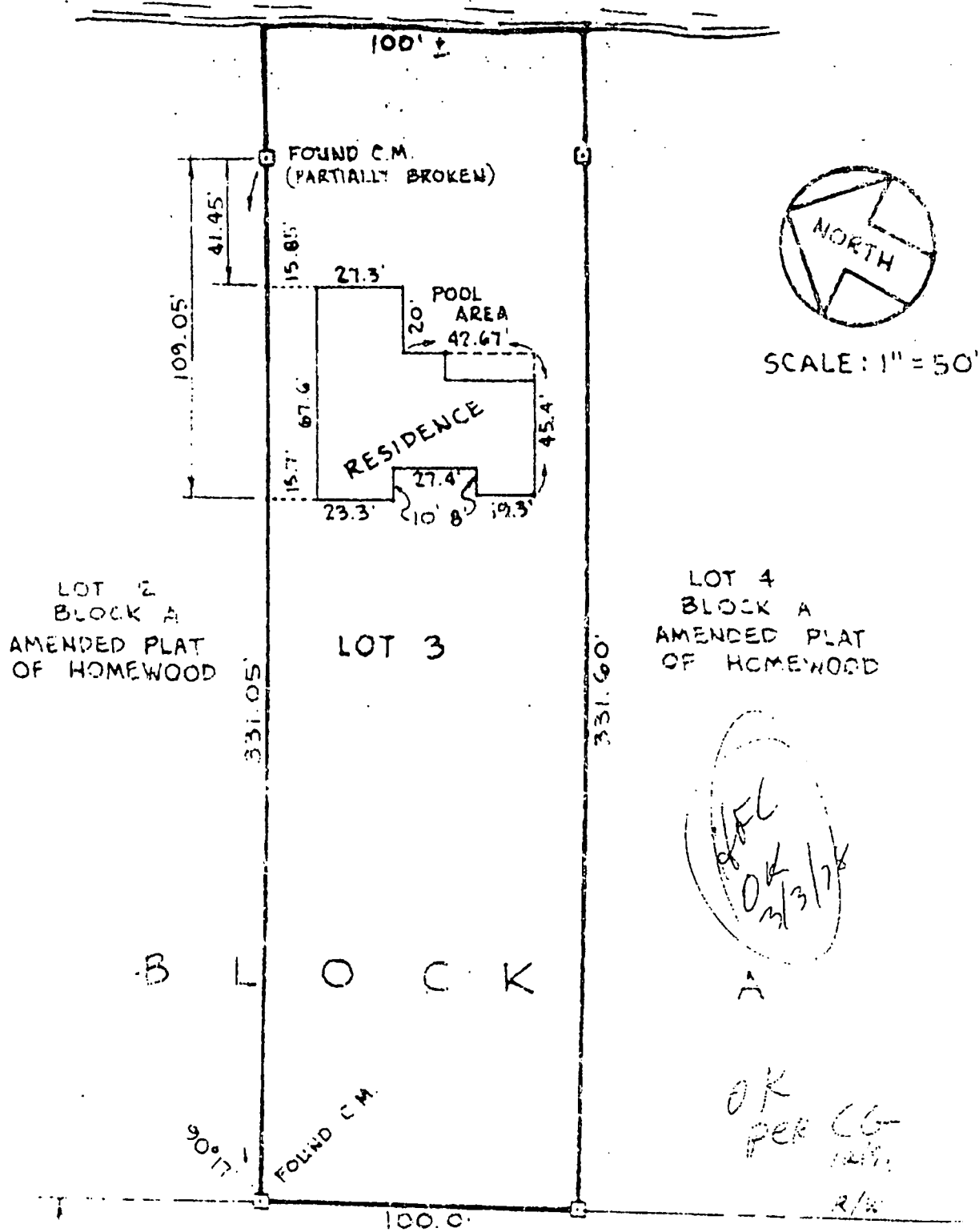
Drafting by:
Specialty Structure Design, Inc.
8455 Beverly Lane
St. Augustine, Florida 32092

Mr. & Mrs. Reilly
78 S. Sewell's Point Road
Stuart, Florida 34996

SHEET #

OF 1

INDIAN RIVER





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 High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series "SH-701" Aluminum Single Hung Window

APPROVAL DOCUMENT: Drawing No.4040, titled "Aluminum Single Hung Window", sheets 1 through 5 of 5, prepared by manufacturer, dated 2/9/98 with revision on 6/3/03, 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 expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the 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 # 02-0702.04 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Theodore Berman, P.E.

10/6/2003



NOA No 03-0514.01
Expiration Date: November 01, 2006
Approval Date: November 06, 2003
Page 1

Limit 4' x 8' = 32 sf



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) 375-2908

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).

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

DESCRIPTION: Series "PW-701" Aluminum Fixed Window-Impact

APPROVAL DOCUMENT: Drawing No. 4214, titled "Aluminum Fixed Impact Window", sheets 1 through 4 of 4, prepared by manufacturer dated 02-16-98 and last revised on 09-09-02, 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 expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large Missile Impact Resistant

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 and renews NOA # 99-0218.01 and, consists of this page 1 as well as approval document mentioned above.

The submitted documentation was reviewed by Ishaq I. Chanda, P.E.



NOA No 02-0716.03
Expiration Date: October 03, 2007
Approval Date: October 03, 2002
Page 1



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
1070 Technology Drive
Nokomis, FL 34274

SCOPE:

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

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

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

DESCRIPTION: Series C-740 Aluminum Casement Window - Impact

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

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the 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.

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

This NOA revises NOA # 02-1224.02 consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

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



NOA No 03-0611.02
Expiration Date: May 22, 2008
Approval Date: October 9, 2003
Page 1



BUILDING CODE COMPLIANCE OFFICE (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 High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series "SGD-70" Aluminum Sliding Glass Door

APPROVAL DOCUMENT: Drawing No. 4340, titled "Impact - Alum. Sliding Glass Door", sheets 1 through 6 of 6, prepared by manufacturer, dated 2/16/98 with revision on 6/2/03, signed and sealed by Robert Clark, P.E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the 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.

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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 # 02-0306.01 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Theodore Berman, P.E.

10/16/2003

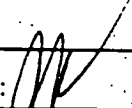
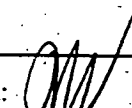
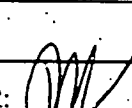
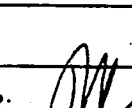
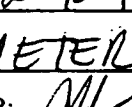
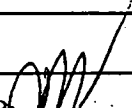
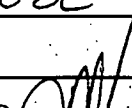


NOA No 03-0512.04
Expiration Date: May 06, 2007
Approval Date: November 06, 2003
Page 1

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☒ Wed ☐ Fri 5/12, 2004 Page 4 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6520	HINES	INSULATION	PASS	
2	113 HENRY SEWALL WINCHIP			INSPECTOR: 
6671	GOVEL	TRUSSING.	FAIL	
3	5 RIVERVIEW O/B	TIN TAG		INSPECTOR: 
6688	REILLY	IN POC WINDOWS	PASS	
4	78 S. SEWALL'S PT TCHOME IMPROV			INSPECTOR: 
6335	TWOHEY	FINAL SFR	FAIL	
7	119 HILLCREST SEAGATE BUILDERS			INSPECTOR: 
6720	DONAHUE	TEMP ELECTRIC	PASS	CALL IN TO FPL
1	163 S. SEWALL'S PT			FOR METER 
6671	WALKER	PRE POOL DRIVEWAY	PASS	
5	9 LANTANA O/B			INSPECTOR: 
6605	TWOHEY	POOL + DECK	PASS	CLOSE
7	119 HILLCREST FLAMINGO POOLS			INSPECTOR: 
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	KIPLINGER	TREE	PASS	
2	143 S. RIVER RD			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6480	WADE	LATH	PASS	PARTIAL - NORTH
1	9 E HIGH PT. PINE ORCHARD			ADDITION INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6688	REILLY	FINAL WINDOWS	PASS	CLOSE
4A	78 S. SEWALL'S PT TC HOME IMPROV	+ DOORS		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6152	DENIS	RENOVATION FINAL	PASS	CLOSE
4	12 PALM ROAD O/B			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	DENIS	TREE	PASS	
4	12 PALM ROAD			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6607	FOWLER	FINAL KITCHEN	FAIL	
5	18 FIELDWAY O/B			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6739	SCHECODNIK	WALL - TIE BACK	FAIL	NEEDS SURVEY
6643	12 S. SEWALL'S PT	BOAT LIFT FINAL		
5	TCBI	DOCK FINAL	FAIL	INSPECTOR: <i>[Signature]</i>
OTHER:				

6773

PAVERS

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 6/1/04

BUILDING PERMIT NO. 6773

Building to be erected for REILLY Type of Permit DRIVE/PAVERS

Applied for by NATIONAL BRICK PAVERS (Contractor) Building Fee \$17K x 9.60/1000 = 163.20

Subdivision HOMWOOD Lot 3 Block A Radon Fee _____

Address 78 S. SEWALL'S POINT RD Impact Fee _____

Type of structure DRIVEWAY A/C Fee _____

Parcel Control Number:

138410060010003080000 Electrical Fee _____

Amount Paid 163.20 Check # 1076 Cash _____ Other Fees (_____) Plumbing Fee _____

Total Construction Cost \$ 17,000.00 Roofing Fee _____

Signed [Signature] Applicant Signed Gene Simmons (CRD) Town Building Official

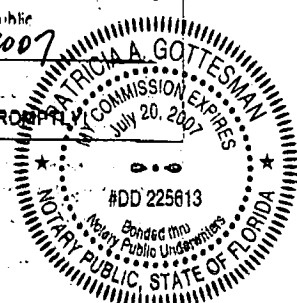
PERMIT

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

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: <u>05/13/2004</u> MAY 13 2004		Permit Number: _____	
Town of Sewall's Point BUILDING PERMIT APPLICATION			
OWNER/TITLEHOLDER NAME: <u>ED REILLY</u>		Phone (Day) <u>287-5367</u> (Fax) _____	
Job Site Address: <u>78 S. SEWELL'S POINT RD</u>		City: <u>SEWELL'S POINT</u> State: <u>FL</u> Zip: <u>34996</u>	
Legal Desc. Property (Subd/Lot/Block) <u>LOT 3 BLOCK A</u>		Parcel Number: _____	
Owner Address (if different): <u>SAME</u>		City: _____ State: _____ Zip: _____	
Description of Work To Be Done: <u>REPLACE EXISTING DRIVEWAY WITH BRICK PAVERS</u>			
WILL OWNER BE THE CONTRACTOR? Yes <input type="radio"/> No <input checked="" type="radio"/> (If no, fill out the Contractor & Subcontractor sections below)			
CONTRACTOR/Company: <u>NATIONAL BRICK PAVERS</u>		Phone: <u>772-288-3232</u> Fax: <u>288-2832</u>	
Street: <u>3450 NORTH FEDERAL HWY</u>		City: <u>LIGHT HOUSE POINT</u> State: <u>FL</u> Zip: <u>33064</u>	
State Registration Number: <u>QB 22679</u>		State Certification Number: _____ Martin County License Number: _____	
COST AND VALUES: Estimated Cost of Construction or Improvements: \$ <u>17,000</u> (Notice of Commencement needed over \$2500)			
SUBCONTRACTOR INFORMATION:			
Electrical:	State:	License Number:	
Mechanical:	State:	License Number:	
Plumbing:	State:	License Number:	
Roofing:	State:	License Number:	
ARCHITECT			
Street:		Phone Number:	
City:		State:	
Zip:			
ENGINEER			
Street:		Phone Number:	
City:		State:	
Zip:			
AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: _____ Carport: _____ Total Under Roof: _____ Wood Deck: _____ Accessory Building: _____			
I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, MECHANICAL, SIGNS, POOLS, WELLS, FURNACE, BOILERS, HEATERS, TANKS DOCKS, SEA WALLS, ACCESSORY BUILDING, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL AND RELOCATIONS.			
CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: 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) <u>Edward Francis Reilly</u>		CONTRACTOR SIGNATURE (required) <u>David Truett</u>	
State of Florida, County of: <u>MARTIN</u>		On State of Florida, County of: <u>BROWARD</u>	
This the <u>13TH</u> day of <u>MAY</u> , 200 <u>4</u>		This the <u>7TH</u> day of <u>MAY</u> , 200 <u>4</u>	
by <u>EDWARD FRANCIS REILLY</u> who is personally known to me or produced as identification.		by <u>DAVID TRUETT</u> who is personally known to me or produced as identification.	
My Commission Expires: <u>July 20th 2007</u>		My Commission Expires: <u>July 20th 2007</u>	
Notary Public LAURA L. O'BRIEN MY COMMISSION # DD 205981 EXPIRES: April 28, 2007		Notary Public PATRICIA A. GOTTESMAN MY COMMISSION # DD 225813 EXPIRES: July 20, 2007	
PERMIT APPLICATIONS MUST BE SUBMITTED WITH APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROPERLY			



ACORD TM **CERTIFICATE OF LIABILITY INSURANCE**DATE (MM/DD/YYYY)
05/12/2004**PRODUCER**COVER ALL INSURANCE
5800 W. ATLANTIC BLVD.
MARGATE, FL. 33063

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.

INSUREDNATIONAL BRICK PAVERS
3450 N. FEDERAL HIGHWAY
LIGHTHOUSE POINT, FL. 33064**INSURERS AFFORDING COVERAGE**

NAIC #

INSURER A: NAUTILUS INSURANCE COMPANY

INSURER B: HARTFORD 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.

INSURANCE TYPE	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 CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	NC324735	04/26/2004	04/26/2005	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: POLICY: <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>				
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS H. RED AUTOS NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC AGG \$
	EXCESS/UMBRELLA LIABILITY OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				38WBG DZ9445
OTHER					

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

PAVING / SWIMMING POOL INSTALL / TILE WORK / SUBS

CERTIFICATE HOLDERSEWALL'S POINT BUILDING DEPARTMENT
1 SOUTH SEWALL'S POINT ROAD
SEWALL'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 DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

INS. FAX# 954-946-7384/ FAX# 772-220-4765



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

NATIONAL BRICK PAVERS CORP
3450 N. FEDERAL HIGHWAY
LIGHTHOUSE POINT FL 33064



STATE OF FLORIDA

AC# 0934791

DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

QB22679

06/09/03 200463675

QUALIFIED BUSINESS ORGANIZATION
NATIONAL BRICK PAVERS CORP

(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 L03060901068

DETACH HERE

AC# 0934791

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L03060901068

DATE	BATCH NUMBER	LICENSE NBR
06/09/2003	200463675	QB22679

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.)

NATIONAL BRICK PAVERS CORP

3450 N. FEDERAL HIGHWAY

LIGHTHOUSE POINT FL 33064

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

May. 12 2004 09:45AM P1/1

FAX NO. : 9549467384

FROM: National Brick Pavers

2003-2004 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

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

LICENSE 2004-650-359 CERT 20-0770984

PHONE (772) 288-3232 SIC NO 421320

LOCATION:

4340 SE FEDERAL HWY ST

6018

\$12.50

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR.	.00	LIC. FEE \$	12.50
	.00	PENALTY \$.00
	.00	COL. FEE \$.00
	.00	TRANSFER \$.00
TOTAL	12.50		

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

OF RETAIL SALES /PAVERS OUTDOOR PRODUC

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

05 DAY OF APRIL 2004

AND ENDING SEPTEMBER 30 2004

CHADINHA, CHAD

NATIONAL BRICK PAVERS STUART, INC

4340 SE FEDERAL HWY

STUART FL 34997

RECEIPT OF PAYMENT

LARRY C. O'STEEN

99 04/05/2004 OCC1 NORMAL

20046500359000

0220040405003636CX

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF FLORIDA

COUNTY OF MARTIN

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

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

LOT 3, BLOCK A OF HOMENWOOD.

GENERAL DESCRIPTION OF IMPROVEMENT: REPLACE CONCRETE DRIVEWAY WITH BRICK PAVES

OWNER: EDWARD REILLY

ADDRESS: 78 S SEWELL'S POINT RD, SEWALL'S POINT FL 34996

PHONE #: 772-287-5367

FAX #: _____

CONTRACTOR: NATIONAL BRICK PAVER

ADDRESS: 3450 NORTH FEDERAL HWY, LIGHT HOUSE POINT FL 33064

PHONE #: (954) 545-3040

FAX #: 772-288-2832

SURETY COMPANY (IF ANY) _____

ADDRESS: STATE OF FLORIDA
MARTIN COUNTY

PHONE #: _____

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

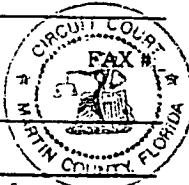
LENDER: MARSHA EWING, CLERK
T COPUS

ADDRESS: BY
DATE 6-1-04

PHONE #: _____

FAX # _____

INSTR # 1755298
OR BK 01904 PG 2285
RECORDED 06/01/2004 11:46:07 AM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY T Copus (asst mgr)



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.

Edward S. Reilly
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 28 DAY OF May
2004 BY Edward Reilly

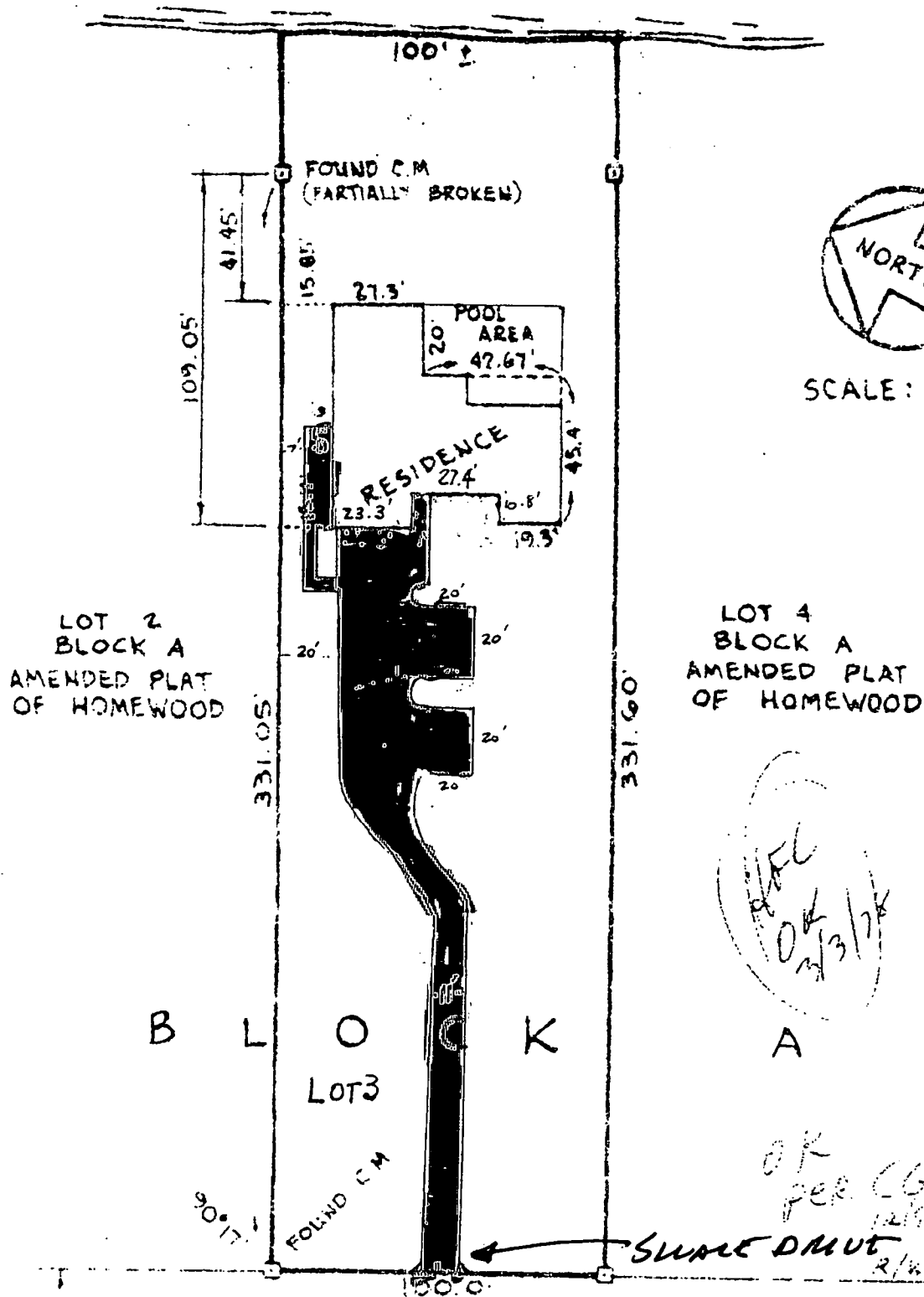
OR
PERSONALLY KNOWN
PRODUCED ID
TYPE OF ID DLR 400-226-35-223-0

Michele Sanders
NOTARY SIGNATURE



Michele Sanders
MY COMMISSION # DD253747 EXPIRES
September 28, 2007
BONDED THRU TROY FAIR INSURANCE INC

INDIAN RIVER



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE

DATE: 5/17/08

BUILDING OFFICE
Gene Simmons

SURVEY OF IMPROVEMENTS ON
LOT 3, BLOCK A, AMENDED PLAT
OF HOMEWOOD AS RECORDED IN
PLAT BOOK 2, PAGE 15, Martin
County, Fla. public records
March 3, 1978

Arthur Speedy
Arthur Speedy, Registered Land Surveyor
Florida Certificate No. 3143

I hereby certify that the plat shown hereon
is a true and correct representation of a
survey made under my direction and that the
survey is accurate to the best of my know-
ledge and belief and that, unless otherwise
shown, there are no encumbrances.



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 78 S. SEWALLS PT

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

PAVER FINAL

END OF DRIVEWAY AT ROAD
MUST HAVE SWALE TO
PREVENT IMPEDENCE OF
STORM WATER MOVEMENT.

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

DATE: 6/11

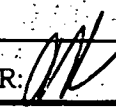
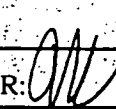
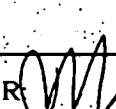
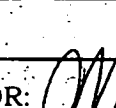
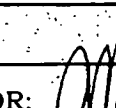
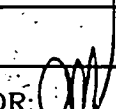
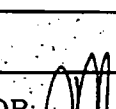
[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

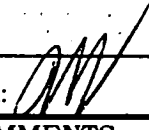

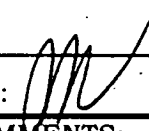
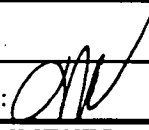
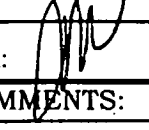
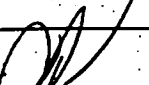
Date of Inspection: ☐ Mon ☐ Wed ☒ Fri 6/11, 2008 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6773	REILLY	PAVER FINAL	FAIL	
3	78 S. SEWALL ST. NATIONAL BRICK			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	LENIHAN	TREE	PASS	
2	25 LANTANA LA.			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6690	PISTOLE	FINAL GAS		
7	21 PERR. WINKLER MC PROPANE	U.G. GAS	PASS	INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6704	LAW	FINAL PAVER		CLOSE
6	4 COPAIRE ROAD CHITWOOD & CO.	POOL DECK	PASS	INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6663	GANDHI	SLAB/FOOTING	PASS	
4	23 N. VIALCINDA WHITE ALUMINUM			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6748	REICH	POOL DECK	FAIL	
1	22 MIDDLE RD LANIERO			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6740	JONES	FINAL ROOF	FAIL	
5	19 PALMETTO PACIFIC ROOFING			INSPECTOR: 
OTHER:				
225-7308 3 EMERITA				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☐ Wed ☒ Fri 6/18, 2004 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6798	PARKS	FOUNDATION	PASS	
2	3 MINDORO			
	PARKS + CO.	FIRST THING		INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6789	BAUMGARTNER	DRY IN METAL	PASS	
8	20 BANYAN	ROOF IN PROGRESS	PASS	
	ALL AMERICAN			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	O'CONNOR	TREE	PASS	
7	116 FIELDWAY DR			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	STENHOS	TREE	PASS	
6	106 HILLCREST			
		B.G. - FIRST PLEASE - LAURA?		INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	NEWLEY	TREE	PASS	
5	7 N VIA LUCINDIA			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6773	REILLY	FINAL DETAIL	PASS	CLOSE
4	78 S. SEWALL'S PT	PAVER		
	NATIONAL BRICK PAVER			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6396	MUFSON	FINAL ROOF	FAIL	
1	17 S. RIVER RD	TRUSS	FAIL	
	BUFORD			INSPECTOR: 

OTHER:

9171

A/C CHANGEOUT



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

BUILDING PERMIT CARD

**THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK
A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	9171	DATE ISSUED:	MAY 28, 2009
SCOPE OF WORK:	AC CHANGEOUT		
CONDITIONS:			
CONTRACTOR:	AIRFLOW AC & HEATING		
PARCEL CONTROL NUMBER:	013841-006-001-000208	SUBDIVISION	HOMWOOD, LOT 3, BL A
CONSTRUCTION ADDRESS:	78 S SEWALLS PT RD		
OWNER NAME:	REILLY		
QUALIFIER:	JOHN HEMBERGER	CONTACT PHONE NUMBER:	781-2665

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS 8:30AM TO 12:00PM - MONDAY, WEDNESDAY & FRIDAY**

REQUIRED INSPECTIONS

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

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

RECEIVED

DATE: 5-28-09

TOWN OF SEWALL'S POINT

Town of Sewall's Point

Date: May 28, 09 BUILDING PERMIT APPLICATION Permit Number: _____
 OWNER/TITLEHOLDER NAME: Edward Reilly Phone (Day) 281-5367 (Fax) _____
 Job Site Address: 78 S. Sewalls Point Rd City: Stuart State: FL Zip: 34996
 Legal Description Home wood, Lot 3 B1KA Parcel Control Number: 01-38-411-006-001-00030-8
 Owner Address (if different): n/a City: _____ State: _____ Zip: _____

Scope of work (please be specific): Replace / Swap-out air conditioning unit

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: \$ 6,408.00
 (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: Airflow Air Conditioning & Heating Phone: 781-2665 Fax: 413-2665
 Street: 50 NE Dixie Hwy D1 City: Stuart State: FL Zip: 34994
 State License Number: QB64073 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Gretchen Frazier Phone Number: 781-2665

DESIGN PROFESSIONAL: Jack Hemberger Lic# CAC057450 Phone Number: 781-2665
 Street: 50 NE Dixie Hwy D1 City: Stuart State: FL Zip: 34994

AREAS SQUARE FOOTAGE: Living: 3000-3500 Garage: _____ Covered Patios/ Porches: _____ Enclosed Storage: _____

Carport: _____ Total under Roof _____ Elevated Deck: _____ Enclosed area below BFE*: _____
 * Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2007 Edition
 National Electrical Code: 2005 Florida Energy Code: 2007 Florida Accessibility Code: 2007 Florida Fire Prevention Code 2007

NOTICES TO OWNERS AND CONTRACTORS:

1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER SIGNATURE: (required)
 OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)

Edward F. Reilly
 State of Florida, County of: Martin
 This the 29th day of MAY, 2009
 by Edward Reilly who is personally
 known to me or produced by Christine A. Jordan
 as identification. Christine A. Jordan

My Commission Expires: 7/23/2011
 Notary Public
 CHRISTINE A. JORDAN
 MY COMMISSION # DD694039
 EXPIRES: July 23, 2011
 FL Notary Discount Assoc. Co.

CONTRACTOR SIGNATURE: (required)

John Hemberger
 On State of Florida, County of: MARTIN
 This the 29th day of MAY, 2009
 by John Hemberger who is personally
 known to me or produced by Christine A. Jordan
 as identification. Christine A. Jordan

My Commission Expires: 7/23/2011
 Notary Public
 CHRISTINE A. JORDAN
 MY COMMISSION # DD694039
 EXPIRES: July 23, 2011
 FL Notary Discount Assoc. Co.

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

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection ☐ Mon ☒ Tue ☐ Wed ☐ Thur ☐ Fri 6-2 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9114	Olney	mail off		
	108 Henry Sewall		PASS	
	Parks Co			INSPECTOR <i>JA</i>
9113	Olney	mail off		
	108 Henry Sewall		PASS	
	Parks Co.			INSPECTOR <i>JA</i>
9111	Ridley	Final AC	PASS	Close
	785 Sewalls		FAIL	CONDENSATE
	Airflow AC			INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALL'S POINT, FLORIDA

Date 11/18/04 19 TREE REMOVAL PERMIT No 2357

APPLIED FOR BY VIRGINIA REILLY (Contractor or Owner)

Owner 78 S. SEWALLS PT. RD.

Sub-division , Lot , Block

Kind of Trees

No. Of Trees: REMOVE ~~10~~ 12 QUEEN PALMS

No. Of Trees: RELOCATE WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE WITHIN 30 DAYS

REMARKS

 FEE \$ 0

Signed, Applicant Signed, Mene Simon / nle
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 JANUARY 12 ~~12~~ 2005 TREE REMOVAL PERMIT No 2387

APPLIED FOR BY VIRGINIA DELLY (Contractor or Owner)

Owner 78 S. Sewall's Pt Rd

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 2 Dalms

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE 2 WITHIN 30 DAYS

REMARKS _____

Signed, _____
Applicant

Signed, _____

FEE \$ 0

Town Clerk

BUILDING OFFICIALS

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
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, Marlberr, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new S.F.R., a site plan which shall include the dimensional location on a survey, scale drawing or aerial photograph, superimposed with lot lines of scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.
 - d. for an existing residence, a drawing of house with location of trees to be removed, relocated can be submitted in lieu of site plan.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner Ed Reilly Address 78 S. Sewall Pt Rd Phone 287-5367

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE _____ Type: _____

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

No. of Trees: REPLACE 2 WITHIN 30 DAYS Type: Immediately - Small Palms

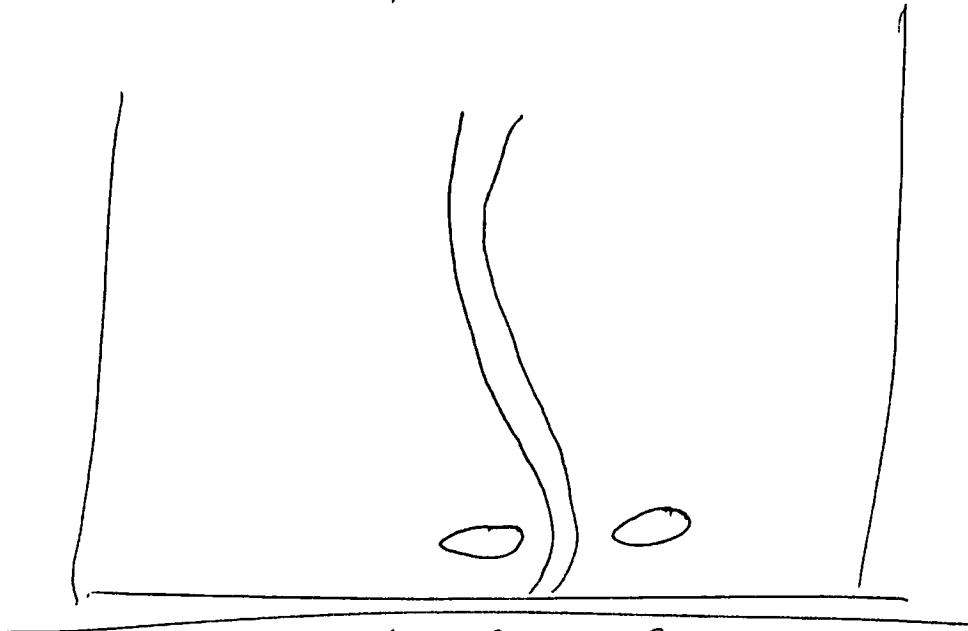
Written statement giving reasons: New plantings being replaced by contractor - did not live

Signature of Property Owner [Signature] Date 1-12-05

Approved by Building Inspector: _____ Date _____ Fee: _____

Plans approved as submitted _____ Plans approved as revised/marked: _____

House



S. Sewalls Pt. Rd.

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 ET REIT Address 18 S. S. LANE Phone 287-5367
Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE _____ Type: _____

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: TRIM MANGROVES ON THE MANGROVES ON THE WATER

Signature of Property Owner Edward F. Reilly Date 12/5/8

Approved by Building Inspector: [Signature] Date 12/6 Fee: 0

Plans approved as submitted _____ Plans approved as revised/marked: _____

MANAGROVES ARE STRICTLY PROTECTED - ST. OF FL.
DEP. CAN APPROVE IS PETITIONED. NO APPROVAL
AT THIS TIME.



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

OK

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8:00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner Edward Reilly Address 78 S. Sewall's Pt. Rd. Phone 287-5367

Contractor Blue Water Landscaping Address _____ Phone _____

No. of Trees: REMOVE 1 Type: CYPRESS

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

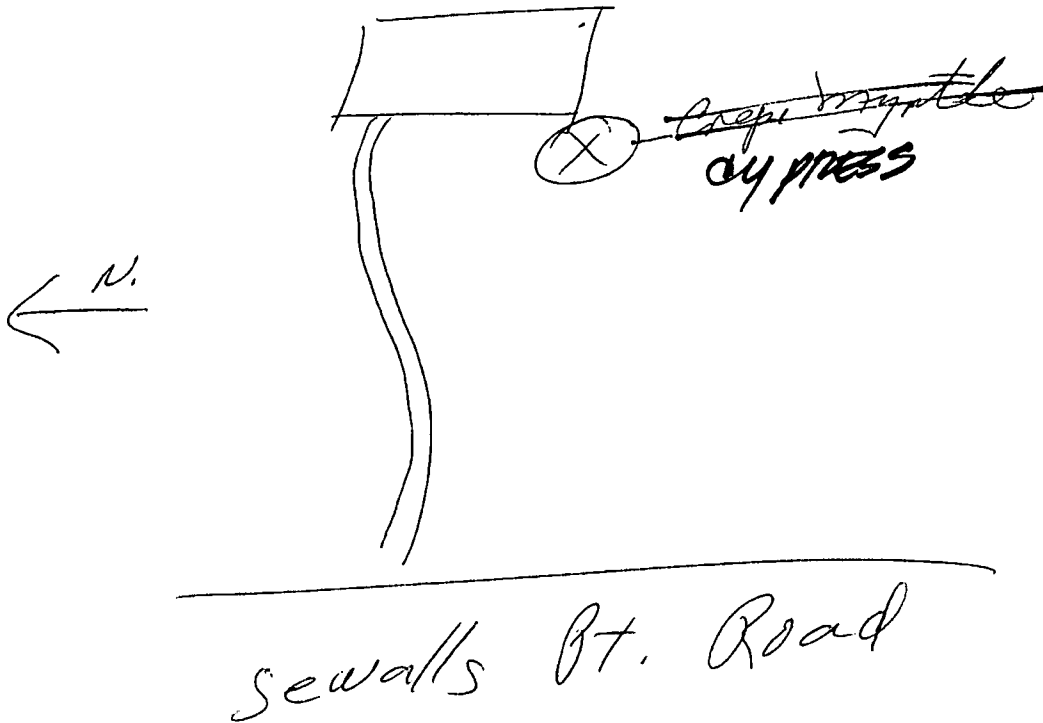
Reason for tree removal/relocation Root system has gone into our
septic system.

Signature of Property Owner [Signature] Date 12-12-07

Approved by Building Inspector: [Signature] Date 12/13 Fee: 0

NOTES: _____

SKETCH:



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, Marlberrry, 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 Virginia Reilly Address 78 S. Sewalls Phone 287-5367

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE 10 + 1 ? Type: Queen Palms ?

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: Dead, diseased, hazardous

(Plan to replace when well is working)

Signature of Property Owner Virginia Reilly Date _____

Approved by Building Inspector: [Signature] Date 11/17 Fee: 0

Plans approved as submitted _____ Plans approved as revised/marked: _____

Palm
Tree

○ - big dead tree


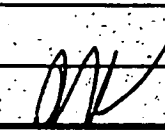
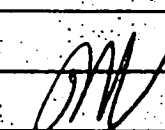
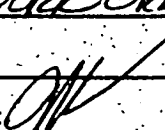
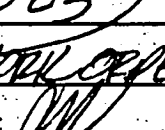
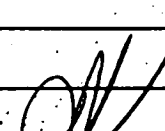
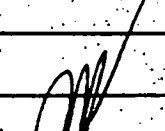
Small
Dead Tree

Sewalls Pt. Rd.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☒ Wed ☐ Fri 11/17, 2004 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6917	SEMMORE	PRE DRYWALL	PASS	
6A	73 S. SEWALL'S Pt O/B			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6776	WOLCOTT	FINAL	FAIL	
2	7 ISLAND RD WILSON BLDGS			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7051	SCHERLENG	POOL STREET DR.	PASS	
3	110 ABBIE COURT ADVANTAGE POOL			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7070	WINSLOW	FRAMING		STOP WORK ORDER
5	10 S. SEWALL'S Pt O/B	ELECT. RGH PLUMB. RGH		INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6948	WINSLOW	ELECT. ROUGH		1823
5A	DS. SEWALL'S Pt KRAUSS CRANE	PRE DRYWALL - HURRICANE		STOP WORK ORDER INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6771	ALLMAN	FRAMING	—	
4	106 S. RIVER O/B	ELEC ROUGH A/C ROUGH	FAIL FAIL	INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7000	REILLY	TREE	PASS	
6	78 S. SEWALL'S Pt			INSPECTOR: 

OTHER:

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

5/23/01 WSP
Sched.

RECEIVED

MAY 22 2001

Permit # 0448

Date Issued 5/27/01

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 Ed Reilly Address 78 S. Sewall's Pt Rd Phone 287-5367

Contractor Ferry Lawn Service Address PO Box 977 Palm City 34991 Phone 288-3265

Number of trees to be removed (list kinds of trees) 1 Dead Grapefruit Tree

Number of trees to be relocated within 30 days (no fee) (list kinds of trees):

Number of trees to be replaced (list kinds of trees):

NO PER

Permit Fee \$ 0 - ~~(\$25.00 first tree plus \$10.00 - each additional tree - not to exceed \$100.00)~~ \$15.00

(No permit fee for trees which are relocated on property or lie within a utility easement & are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property.)

(SEE REVERSE)

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 Ed Reilly Date submitted 5/22/01

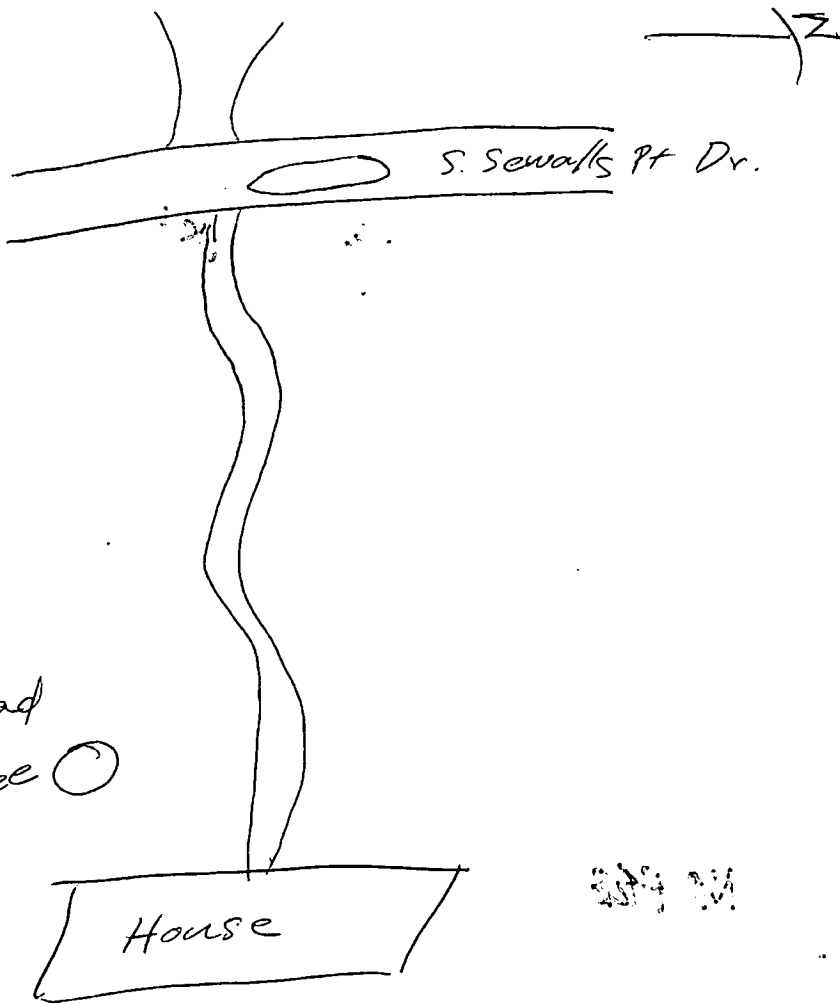
Approved by Building Inspector [Signature] Date 5/27/01

Approved by Building Commissioner _____ Date _____

Completed _____ Date _____ Checked by _____

THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT ~~OBTAINING A PERMIT~~ PERMIT. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGLER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

THE FOLLOWING TREES MUST BE REMOVED BEFORE CONSTRUCTION BEGINS: BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND MELALEUCA?



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☒ Wed ☐ Fri MAY 23, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5318	Koenke	Deck	Passed	
S (6)	66 S. Sewall's Pt. Rd. Advantage Pools			INSPECTOR: J 5/23
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5143	GILFORD	TIE BM/COL	Passed	
N (7)	85 N. SEWALL'S POINT RD SCOTT HOLMES (JERRY)	(slab way) 201-9689		INSPECTOR: J 5/23
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5344	HENRY	SHEATHING	Passed	EARLY AS POSSIBLE 900
S (1)	B E. HIGH POINT HEATON REFRIG. CO.	(North slope 'DAN' 287-0116)		INSPECTOR: J 5/23
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ T/R	FOGLIA	FIELD VERIF.	Passed	SUPPL. TO PN 0399
S (2)	102 ABBIE COURT FOGLIA CONST.			Oak tree dead INSPECTOR: J 5/23
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5378	COMBS	ROOFING -	Passed	
S (4)	MANDALAY ISLAND CARPS & HUFF	FINAL		INSPECTOR: J 5/23
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ 5374	PRAWNBROKER	A/C UNIT - ^{ROOF}	Postponed	due to rain
N (8)	3754 SE OCEAN SUPERIOR REFRIG.	FINAL 201-1340 - GREG	Will call	+ reschedule INSPECTOR: J 5/23
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
✓ T/R	REILLY	FIELD VERIF.	Passed	dead tree
S (5)	705 S. SEWALL'S POINT RD. FERRY LAWN SERVICE			INSPECTOR: J 5/23

OTHER: _____

TOWN OF SEWALL'S POINT, FLORIDA

Date 12-3-02 19____ TREE REMOVAL PERMIT No 1238

APPLIED FOR BY Ed Reilly 287-5367 (Contractor or Owner)

Owner 78 S. Sewalls PT Rd

Sub-division _____, Lot _____, Block _____

Kind of Trees 1 dead Fruit TREE

No. Of Trees: REMOVE 1

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant Signed, Gene Simmons (signature) 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

PROJECT DESCRIPTION _____

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 Ed Reilly Address 78 S Sewalls Pt Phone 287-5367
Contractor Bryan Sellman Address _____ Phone 521-1202

Number of trees to be removed (list kinds of trees) 1 fruit tree (Dead)

Number of trees to be relocated within 30 days (no fee) (list kinds of trees): _____

Number of trees to be replaced: _____ (list kinds of trees): _____

Permit Fee \$ 0
\$15.00

Ok to remove 12/1/12

(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 _____ Plans approved as marked _____

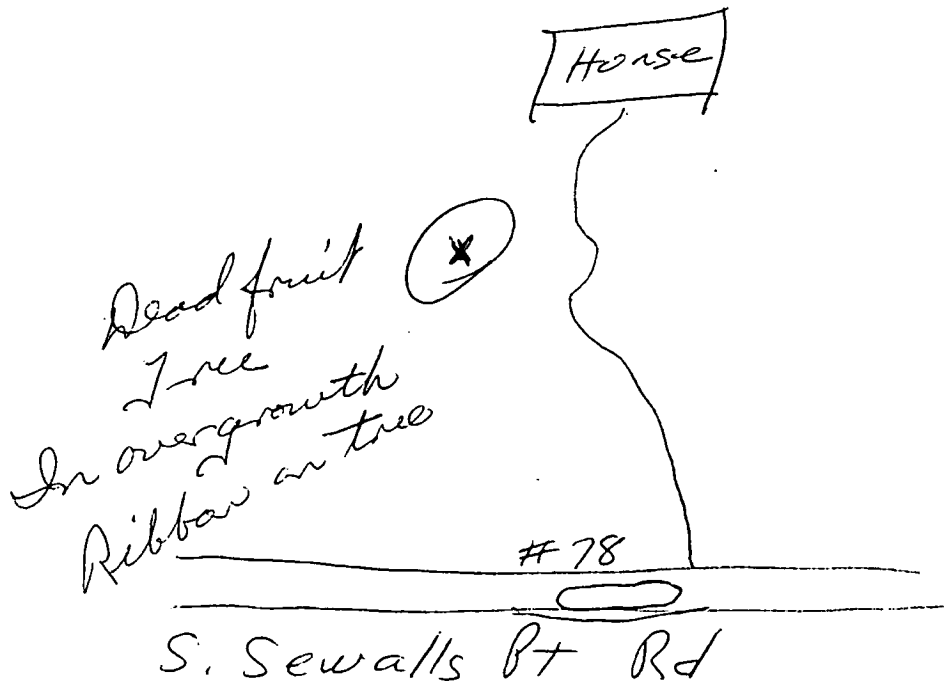
Approved by Building Inspector _____ Date submitted: _____

Completed _____
Date _____ Checked by _____

THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT A FEE. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGLER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

THE FOLLOWING TREES MUST BE REMOVED BEFORE CONSTRUCTION BEGINS:
BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND MELALEUCA

See attached Tree Species List



TOWN OF SEWALL'S POINT, FLORIDA

Date 5-31-2002 TREE REMOVAL PERMIT No 1152
APPLIED FOR BY SAMPSON TREE SVC (Contractor or Owner)
Owner Ed Reilly - 78 Sewall's Pt. Rd
Sub-division _____, Lot _____, Block _____
Kind of Trees Dead Palm TREE
No. Of Trees: REMOVE 1
No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)
No. Of Trees: REPLACE _____ WITHIN 30 DAYS
REMARKS _____
FEE \$ 0
Signed, _____ Applicant Signed, Gene Simmons (rsh) 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

PROJECT DESCRIPTION _____

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 Ed Reilly Address 78 S. Sewall Pt Rd Phone 287-5367

Contractor Sampson Tree Service Address BSL Phone 336-3456

Number of trees to be removed (list kinds of trees) 1 dead palm tree

Number of trees to be relocated within 30 days (no fee) (list kinds of trees): _____

Number of trees to be replaced: _____ (list kinds of trees): _____

Permit Fee \$ 0

\$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 E. F. Reilly Plans approved as marked _____

Approved by Building Inspector [Signature] Date submitted: 5/21/2

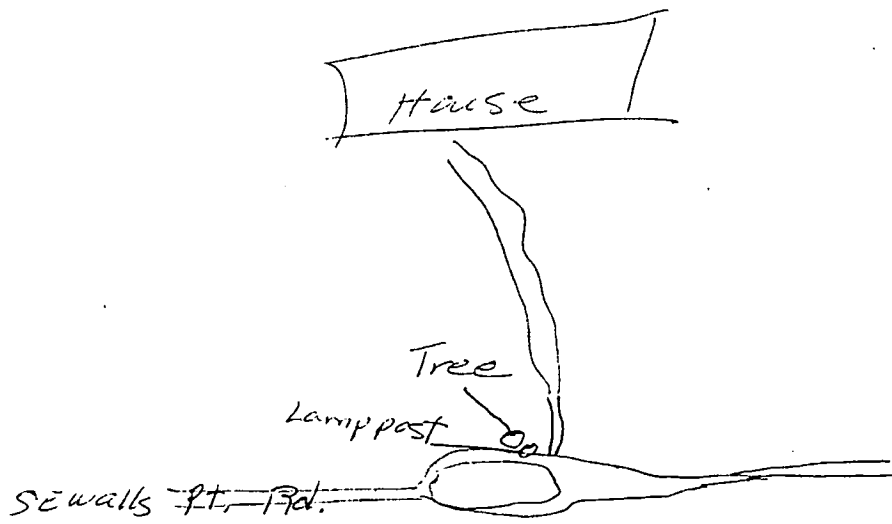
Completed _____
Date _____ Checked by _____

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

(OVER)



The contractor will take the tree down in sections to avoid damage to light post and other vegetation.



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



Since 1990,
Sewall's Point has
proudly been
designated a
"Tree City USA"

APPLICATION FOR TREE REMOVAL, RELOCATION OR REPLACEMENT PERMIT ON RESIDENTIAL PROPERTY

(This permit is required for ALL tree removal in a residential area, including new construction and/or renovation)

A Permit is **REQUIRED** to remove or relocate ANY tree(s) with two (2) exceptions: (1) Citrus tree(s) or (2) Tree(s) less than two inches (2") in diameter measured four feet (4') from the top of soil.

NOTE: Trimming or pruning a tree to the extent that its natural function is severely altered is **EFFECTIVE REMOVAL** and requires a permit for tree removal.

*****PENALTIES FOR UNPERMITTED TREE REMOVAL ARE UP TO \$5,000 PER TREE*****

In reviewing the application for Tree Removal/Relocation, the Town shall first consider adverse impacts to soils, water, ecological systems, noise, wildlife habitat, property values, and other criteria identified in Town ordinances, including without limitation any impacts to a "Specimen Tree" having high aesthetic or ecological value because of its type, size, age or other professional criteria identified by a qualified arborist. In the event the Town determines it appropriate to retain the services of a licensed arborist in association with this application, the cost of such will be borne by the applicant/property owner.

If the initial review identified above is passed, a permit will be issued only if one of the following conditions are met: (1) the tree is in an area where structures or utilities are permitted under Town codes AND preserving the tree would unreasonably restrict the economic enjoyment of the property AND the tree cannot reasonably be relocated on the property; or (2) the tree is diseased or injured OR located too close to structures OR interferes with existing utilities OR creates an unsafe visual obstruction; or (3) the tree is to be replaced by another tree on the owner's property.

Application procedures:

1. Complete application information including sketch below.
2. Place identification tape or ribbon on each tree proposed for removal/relocation.
3. Inspector will visit site and confirm (a) whether property meets residential tree requirements (b) identify prohibited species for removal from property.
4. Applicant can obtain permit, if issued, from Town Hall. Permit must be posted 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.

Permit Fee is \$15.00. (No fees are assessed for removal of prohibited species or for a tree which is dead, diseased, injured, hazardous to life or property.)

AS A CONDITION OF ISSUANCE OF ALL PERMITS HEREUNDER, ALL PROHIBITED SPECIES MUST BE REMOVED FROM THE ENTIRE PROPERTY AND COMPLIANCE WITH MINIMUM NUMBER AND SIZE OF TREES REQUIRED BY TOWN CODE BASED ON LOT SIZE MUST BE MET.

IF THE PERMIT IS DENIED, THE TOWN WILL NOTIFY THE APPLICANT IN WRITING OF THE BASIS FOR DENIAL .

APPEAL MAY BE MADE TO THE CODE ENFORCEMENT BOARD AS PROVIDED IN THE TOWN ORDINANCE.

THE FOLLOWING IS A LIST SPECIES ARE CONSIDERED NATIVE, PROTECTED SPECIES (the list may be modified from time to time by regulatory agencies; applicant is responsible for independent confirmation): BLACK IRONWOOD, BLACK MANGROVE, BLOLLY, BUTTONWOOD, CABBAGE (SABLE) 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.



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



Since 1990,
Sewall's Point
has proudly been
designated a
"Tree City USA"

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

WORK PERMITTED FROM 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner Ed Reilly Address 78 S. Sewall's Pt. Phone 380-7057
Contractor Yard man Address _____ Phone _____
No. of Trees REMOVE 2 Species: Meyers Lemon Caliper @ 4' above soil ____ (inches) Height 6 (ft.)
No. of Trees RELOCATE ____ Species: _____ Caliper @ 4' above soil ____ (inches) Height ____ (ft.)
No. of Trees REPLACE ____ Species: _____ Caliper @ 4' above soil ____ (inches) Height ____ (ft.)

REPLACED OR RELOCATED TREES MUST BE INSPECTED WITHIN 30 DAYS OF PERMIT ISSUANCE

ALL PROHIBITED SPECIES AND VEGETATIVE WASTE MUST BE REMOVED FROM PROPERTY

Reason for tree removal /relocation Almost dead - we have tried everything but They are at least 30 years old.

Signature of Property Owner Virginia R. Reilly Date 4-6-15

This space for Official Use only:

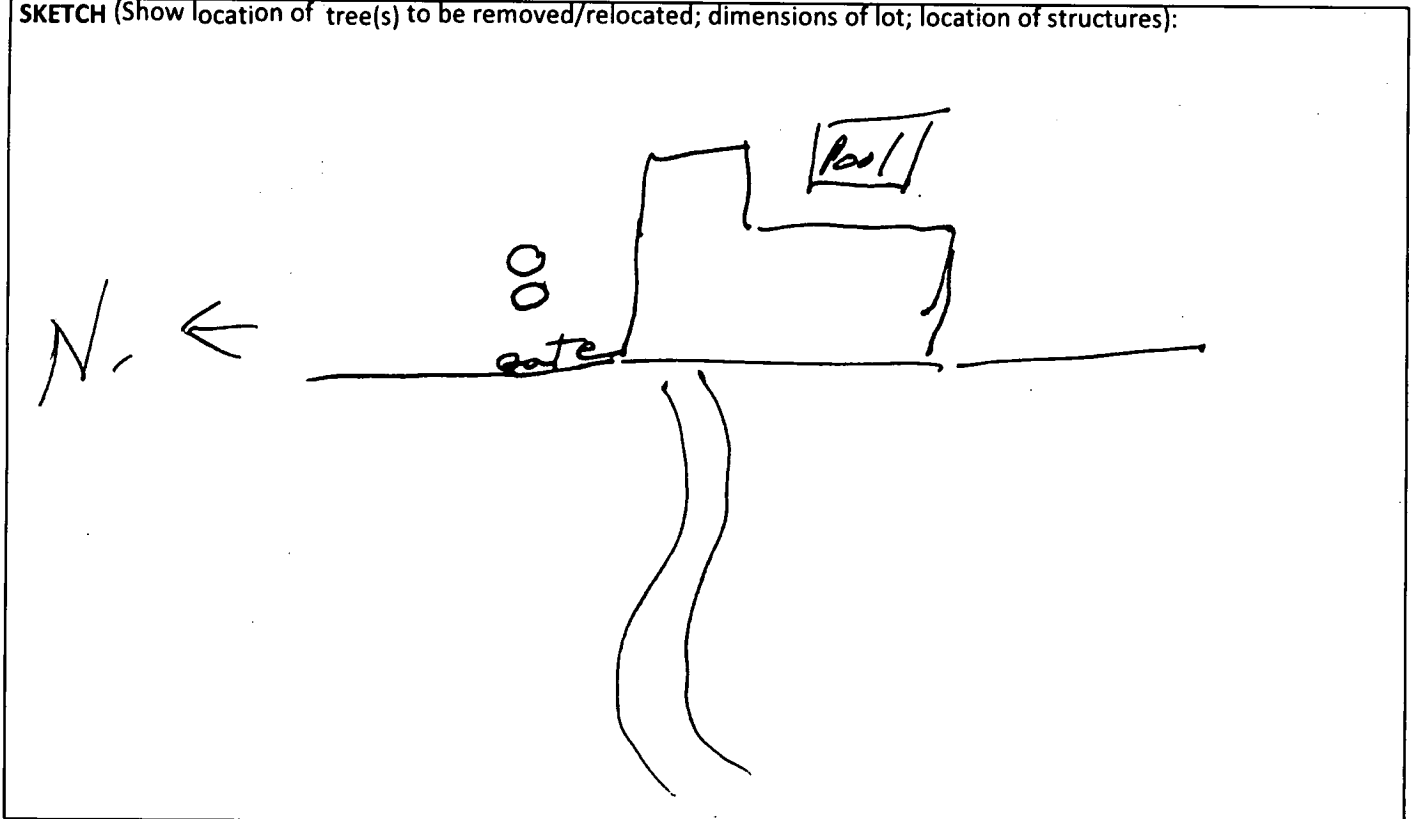
Approved by Building Official: [Signature] Date 3-6-15 Fee: N/C

BUILDING INSPECTOR NOTES: PERMIT NOT REQUIRED

☐ Minimum Tree Requirements Met On Property

☐ Prohibited Species Identified for Removal

SKETCH (Show location of tree(s) to be removed/relocated; dimensions of lot; location of structures):



TOWN OF SEWALL'S POINT, FLORIDA

Date 1/23/01 ✓ TREE REMOVAL PERMIT No 0448

APPLIED FOR BY Perry Lown Serv. 78 S. Sewall's Pt Rd (Contractor or Owner)

Owner _____

Sub-division _____, Lot _____, Block _____

Kind of Trees Grapefruit

No. Of Trees: REMOVE 1

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS Tree deceased

Signed, Sign. on file
Applicant

Signed, [Signature]
Town Clerk
Blg. Insp.
FEE \$ 0.00

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 3/8/02 19____ TREE REMOVAL PERMIT No 2012
APPLIED FOR BY Joe Perry, 785. Sewall's Pt. Rd (Contractor or Owner)
Owner _____

Sub-division _____, Lot _____, Block _____

Kind of Trees Louyer

No. Of Trees: REMOVE 1

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS Dead Tree

Signed, Sign required Applicant Signed, [Signature] FEE \$ 0
Town Clerk
Bldg. Insp.

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M.—NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # 2012

Date Issued: 3/8/02

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 Edward Reilly Address 78 S. Sewall Pt Rd Phone 287-5367

Contractor Joe Ferry Address PO Box 942 Red Salmon FL 34992 Phone 281-5995

Number of trees to be removed (list kinds of trees) 1 Meyers lemon tree (Dead)

Number of trees to be relocated within 30 days (no fee) (list kinds of trees):

Number of trees to be replaced: (list kinds of trees):

Permit Fee \$ 0
\$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 _____ Plans approved as marked _____

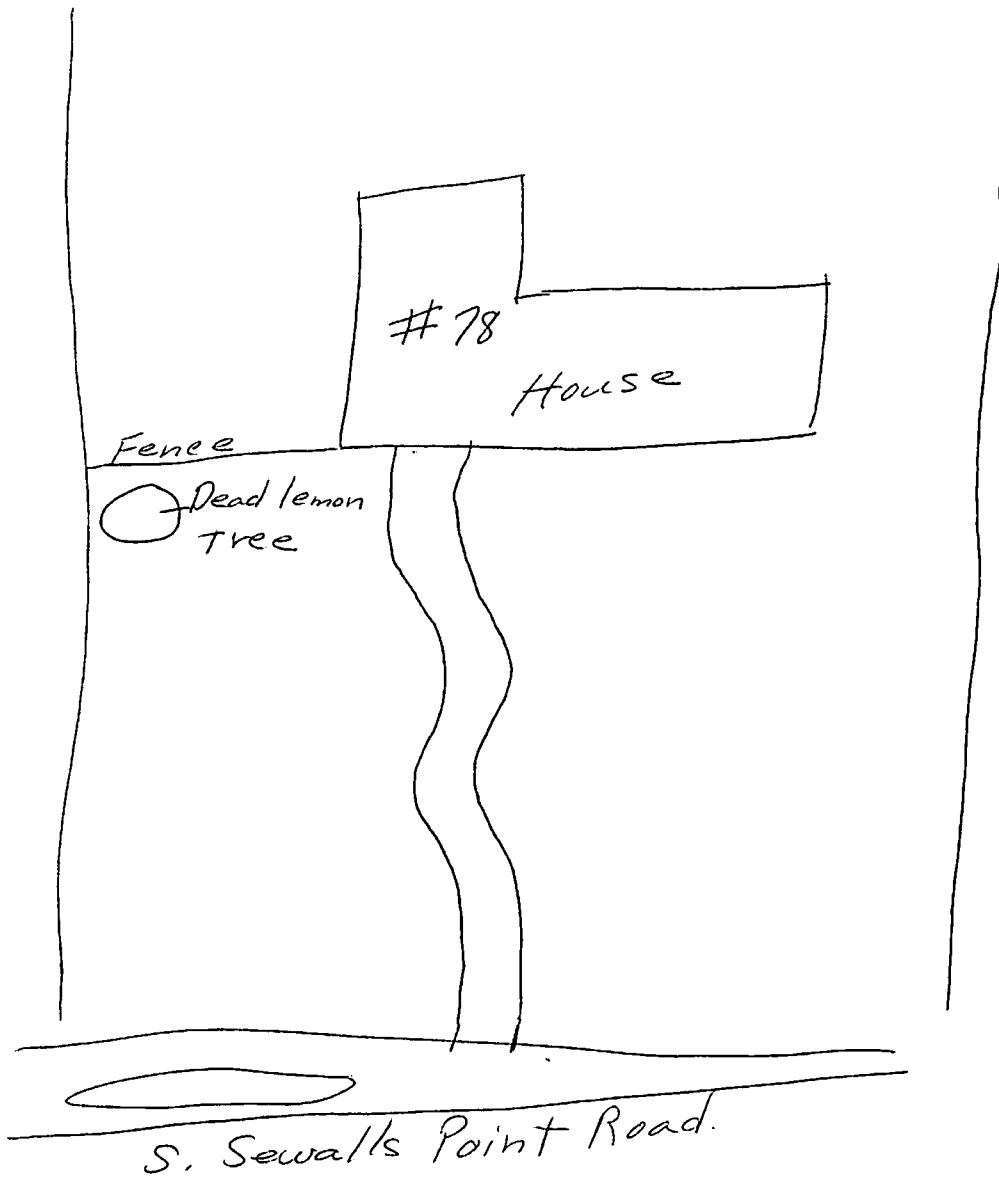
Approved by Building Inspector [Signature] Date submitted: 3/8/02

Completed _____
Date _____ Checked by _____

THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT A FEE. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGLER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

THE FOLLOWING TREES MUST BE REMOVED BEFORE CONSTRUCTION BEGINS:
BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND MELALEUCA

See attached Tree Species List



Date Nov 21 19 ~~2003~~ TREE REMOVAL PERMIT No 2151

Owner 78 S. SEAWARD'S POINT RD

Sub-division _____, Lot _____, Block _____

Kind of Trees LEAD-DECORATIVE

No. Of Trees: REMOVE 1

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE ~~1~~ WITHIN 30 DAYS

REMARKS _____

FEE \$ 1

Signed, _____ Applicant

Signed, *Gene Simmons* *(Signature)*
James Earl

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 _____

TREE REMOVAL, RELOCATE OR REPLACE

PERMIT APPLICATION PACKAGE

DOCUMENTS CONTAINED IN PACKAGE

1. Tree Removal/Relocation Application
2. Tree Removal/Relocation Submittal Requirements

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 Ed Reilly Address 78 S. Sewalls Pkwy Phone 287-5367

Contractor Bryan Sellman Address _____ Phone 521-1207

No. of Trees: REMOVE 1 Type: Decorative

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

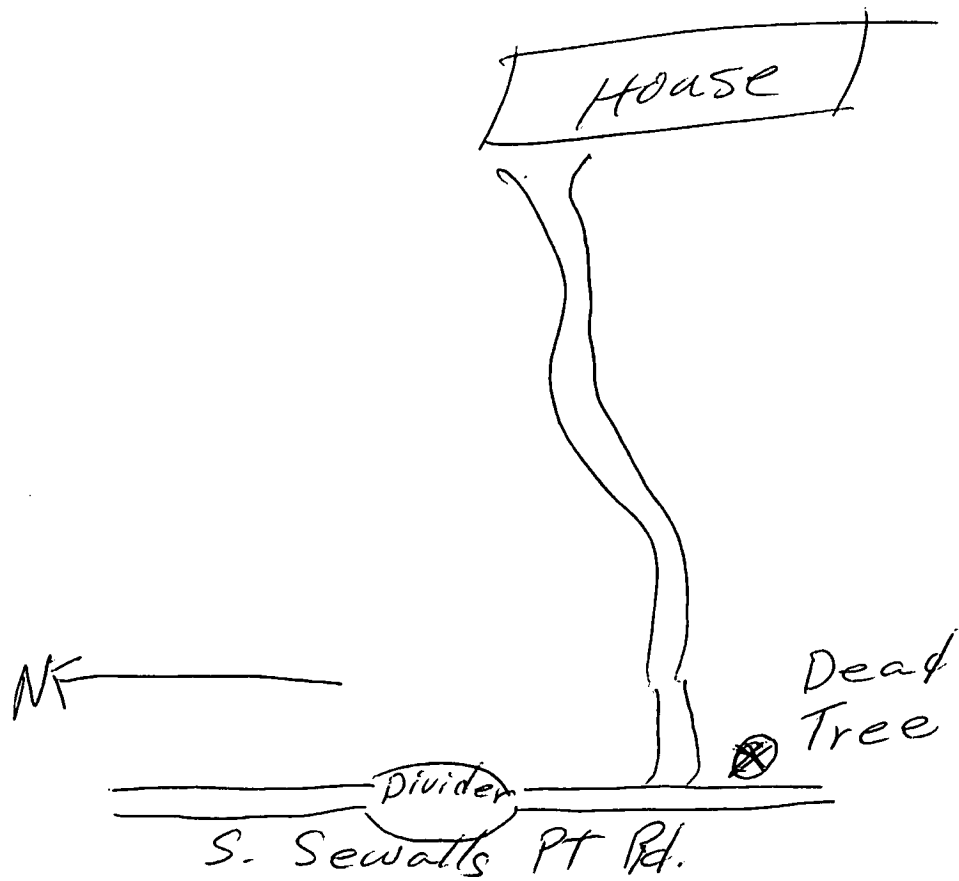
No. of Trees: REPLACE X WITHIN 30 DAYS Type: _____

Written statement giving reasons: Dead tree OK

Signature of Applicant Ed Reilly Date 11-19-03

Approved by Building Inspector: [Signature] Date 11/24/03 Fee: f

Plans approved as submitted _____ Plans approved as revised/marked: _____



Handwritten notes and scribbles at the bottom of the page, including the words "Sewalls Pt Rd." and "Dead Tree" repeated in a faint, mirrored fashion.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ☐ Mon ☐ Wed ☒ Fri 11/21, 2003 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	GIFFORD	TREE	Passed	
(6)	85 N. SEWALL'S PT.			INSPECTOR: [Signature]
TREE	REICH	TREE	Failed	
(11)	22 MIDDLE RD.			INSPECTOR: [Signature]
TREE	REILLY	TREE	Passed	
(14)	78 S. SEWALL'S PT.			INSPECTOR: [Signature]
6370	ROMAN	FINAL INT.	Passed	
(3)	14 COFAIRE RD WOODWARD	ALT. WIN/DOOR		INSPECTOR: [Signature]
6419	MENDOZA	SHEATHING	Passed	11.00
(13)	144 S. SEWALL'S PT. MASTER PLAN/PACIFIC			INSPECTOR: [Signature]
6497	LIZARS	FINAL ROOF	Passed	
(12)	4 ISLAND ROAD ARTEKA			INSPECTOR: [Signature]
Tree		Tree	Passed	17" Oak replace
	Kingston Ct.			INSPECTOR: [Signature]
OTHER:	Sheds			
	Knowles Rd	Wall	Passed	