

140 South Sewall's Point Road

238

SFR

TOWN OF SEWALL'S POINT - FLORIDA

Application For Building Permit

Owner HERBERT A. PETERS Present Address STAR ROAD FRENCH Phone 287 1091

Architect PETER JEFFERSON Address 35 E OCEAN SQUARE

General Contractor H.A. PETERS Address _____ Phone _____

Where Licensed _____ License No. _____

Plumbing Contractor BILL MATHEWS Where Licensed MARTIN COUNTY No. _____

Electrical Contractor KRAUSE + BROWN Where Licensed STUART No. _____

Property Location LOT 1 Subdivision ARCHIPELAG Lot No. _____

Lot Dimensions 100.35 X 160 Lot Area 16000 Sq. Ft. _____

Purpose of Building RESIDENCE Type of Construction CBS

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

Outside of Walls _____ Inside of Walls 2000 SQ FT

Street or Road building will front on SEWALLS POINT ROAD

Clearances - Front 63' 10" Back 35' Side 18' Side 50' River _____

Well Location NONE Septic Tank Location FRONT NORTH

Building elevation (By Ordinance Definition) 7' 6"

Contract Price (Include Plumbing, Electrical, Air Conditioning) \$26,000.00

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

SIGNED: - General Contractor or Owner Herbert A. Peters

Building Inspector Comments: Charles A. [Signature]

FOR TOWN RECORDS: Date Drawings submitted SEP 15 1970
 Date Permit approved SEPT 30
 Date Permit Fee paid OCT 12 1970
 Date First Inspection _____
 Date Final Inspection _____
 Date Occupancy approved _____

~~#~~
238

3221-A-1

FOUNDATION INVESTIGATION

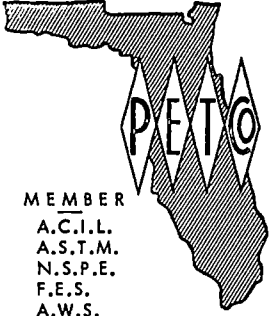
FOR

RESIDENCE
STUART, FLORIDA

Submitted to: Sylvester Construction Company
271 Osceola
Stuart, Florida 33494

Submitted by: Peninsula Engineering Testing Co.

Date: September 30, 1970



MEMBER
A.C.I.L.
A.S.T.M.
N.S.P.E.
F.E.S.
A.W.S.

PENINSULA ENGINEERING TESTING COMPANY

1204 HARBOR CITY BLVD.

P. O. BOX 664

EAU GALLIE, FLORIDA

September 30, 1970
3221-A-1

EAU GALLIE
254-2216

COCOA
636-0062

TITUSVILLE
267-6205

GAINESVILLE
372-4285

Sylvester Construction Company
271 Osceola
Stuart, Florida 33494

Re: Residence
Stuart, Florida

Gentlemen:

At your request, an investigation was made at the above referenced site. The information obtained from this investigation has been studied, combined with our previous knowledge of the area, and carefully evaluated. This evaluation has formed the basis of our recommendations found in this report.

If you have further need for clarification or any questions pertaining to this report, we urge you to contact us.

Sincerely,

PENINSULA ENGINEERING TESTING COMPANY

Donald M. Tucker, P. E.
Florida Registration No. 4025

DMT:jm

cc: (2) Client
(1) Mr. Cal Montgomery

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Residence
Stuart, Florida

September 30, 1970
3221-A-1

PURPOSE

The purpose of this investigation was; (1) to make soil borings in the area for determining the safe allowable bearing capacity of the soil; (2) to obtain samples of the materials found beneath the proposed structure for acquiring the necessary information needed for their classification according to the Unified Soils Classification System (U.S.C.S.); and (3) make recommendations based on the results of this investigation, consistent with good engineering practices.

PROCEDURE

The test holes were located at strategic points throughout the site. The holes were drilled with a combined jetting and chopping action, using Indus-gel drilling mud to prevent the walls of the holes from caving. At regular intervals and/or strata changes, the drilling tools were removed and the material sampled by a 1.5 inch I.D., 2 inch O.D. standard split barrel sampler, driven with a 140 pound hammer falling 30 inches. The standard penetration resistance of the soil (ASTM D 1586-64T) was determined by the number of hammer blows required to drive the sampler one (1) foot. The records of the materials encountered and the penetration resistances are shown graphically on the attached logs.

FIELD INVESTIGATION

There was a total of three (3) test holes located in the proposed building area. Refer to the soil boring location map. The ground water table (GWT) was allowed to stabilize and the depth of the ground water elevation recorded (see soil boring logs).

Also while at the site, samples of the existing material were obtained and analyzed to aid in their classification according to the U.S.C.S.

GENERAL SOIL PROFILE

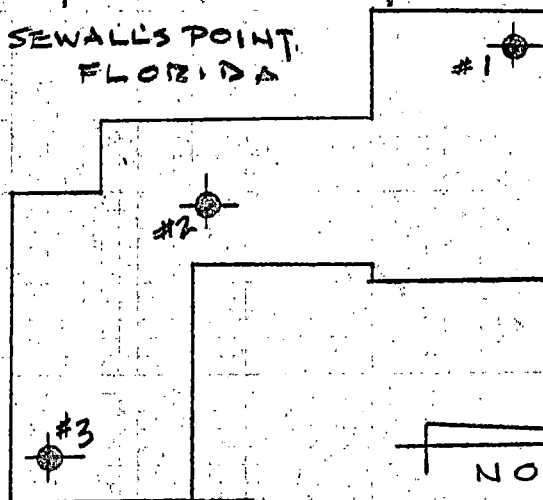
In general, the soil profile is relatively consistent throughout the area tested. Please refer to the soil boring logs for more specific information relative to the soil descriptions.


BY LHB DATE 9/29/70
CHKD. BY _____ DATE _____

SUBJECT A PRIVATE RESIDENCE
STUART, FLA.

SHEET NO. 1 OF 1
JOB NO. 3221-A-1

LOT 82 HIGH POINT
SEWALLS POINT
FLORIDA



 DENOTES APPRO. SOIL BORING LOCATIONS

SOIL BORING LOG

TEST HOLE 1

JOB ORDER NO. 3221-A-1

ELEV.	SOIL DESCRIPTION		PENETRATION - BLOWS/FT.																
			0	5	10	20	30	40	60	80	100								
0	Loose, Medium, Gray Shell-Sand Mixture	P				15													
2.5	Firm, Medium, Gray GWT 9-28-70	P				15													
5.0	Shell-Sand Mixture	P				15													
7.5	Soft, Gray Silty Shell-Sand Mixture	GP				15													
10.0	Firm, Medium, Gray Shell-Sand Mixture	P				15													
12.5		P				15													
15.0		P				15													
	Boring Terminated @ 16.0'																		

Remarks:

Penetration number of blows required of 140 lb. hammer falling 30 in. to drive 2 in. O. D. split spoon sampler one foot.

SOIL BORING LOG

TEST HOLE 2

JOB ORDER NO. 3221-A-1

ELEV.	SOIL DESCRIPTION		PENETRATION - BLOWS/FT.																				
			0	5	10	20	30	40	60	80	100												
0	Loose, Medium, Gray Shell-Sand Mixture	P																					
2.5	Firm, Medium, Gray Shell-Sand Mixture <u>GWT 9-28-70</u>	P																					
5.0																							
7.5	Loose, Medium, Gray Silty Shell-Sand Mixture	GP																					
10.0	Firm, Medium, Gray Shell-Sand Mixture	P																					
12.5																							
15.0	Boring Terminated @ 16.0'	P																					

Remarks:

Penetration number of blows required of 140 lb. hammer falling 30 in. to drive 2 in. O. D. split spoon sampler one foot.

SOIL BORING LOG

TEST HOLE 3

JOB ORDER NO. 3221-A-1

ELEV.	SOIL DESCRIPTION		PENETRATION - BLOWS/FT.																	
			0	5	10	20	30	40	60	80	100									
0	Loose, Medium, Gray Shell-Sand Mixture	P																		
2.5		P																		
5.0	<u>GWT 9-28-70</u> Firm, Medium, Gray Shell-Sand Mixture	P																		
7.5	Loose, Medium, Gray Silty Shell-Sand Mixture	GP																		
10.0	Firm, Medium, Gray Shell-Sand Mixture	P																		
12.5		P																		
15.0		P																		
	Boring Terminated @ 16.0'																			

Remarks:

Penetration number of blows required of 140 lb. hammer falling 30 in. to drive 2 in. O. D. split spoon sampler one foot.

Residence
Stuart, Florida

September 30, 1970
3221-A-1

RECOMMENDATIONS

Based on the information obtained from this investigation and our previous knowledge of the area, we are pleased to make the following recommendations:

1. Due to the soft stratum of material between seven (7) and ten (10) feet, it is recommended that the site be vibro-rolled to obtain a minimum of fifteen (15) blows per foot to a depth of fifteen (15) feet. This degree of compaction may be accomplished by the use of a heavy vibratory roller such as an Essicks VR-72.
2. If it is undesirable from an economic standpoint to vibro roll and retest the site, then it is recommended that the foundation type be continuous and/or spread footers with a minimum width of three (3) feet and a minimum depth of one (1) foot, using three (3) number five (5) reinforcing bars equally spaced. The bottom of these footings should be placed no more than one (1) foot from the final finished grade. If this recommendation is followed, it is anticipated that you will experience minor settlement cracks if masonry construction is to be employed on the load bearing walls and partitions.

Residence
Stuart, Florida

September 30, 1970
3221-A-1

CONCLUSION

These recommendations are submitted to you and are expected to be used within the limits of the criteria found in this report.

If fill is to be placed on this site, then we would strongly recommend a rigid testing program, and all fill placed on the site should be of suitable character and compacted to obtain 100% of maximum density in accordance with AASHO T-180-57, Method A.

If a slab-on-grade is contemplated for these proposed structures, it is strongly recommended that the soil immediately below it be compacted to obtain 100% of maximum density in accordance with AASHO T-180-57, Method A.

No problems are anticipated in the foundation for this proposed structure, therefore, based on these recommendations, the site is suitable for its intended purpose.

Residence
Stuart, Florida

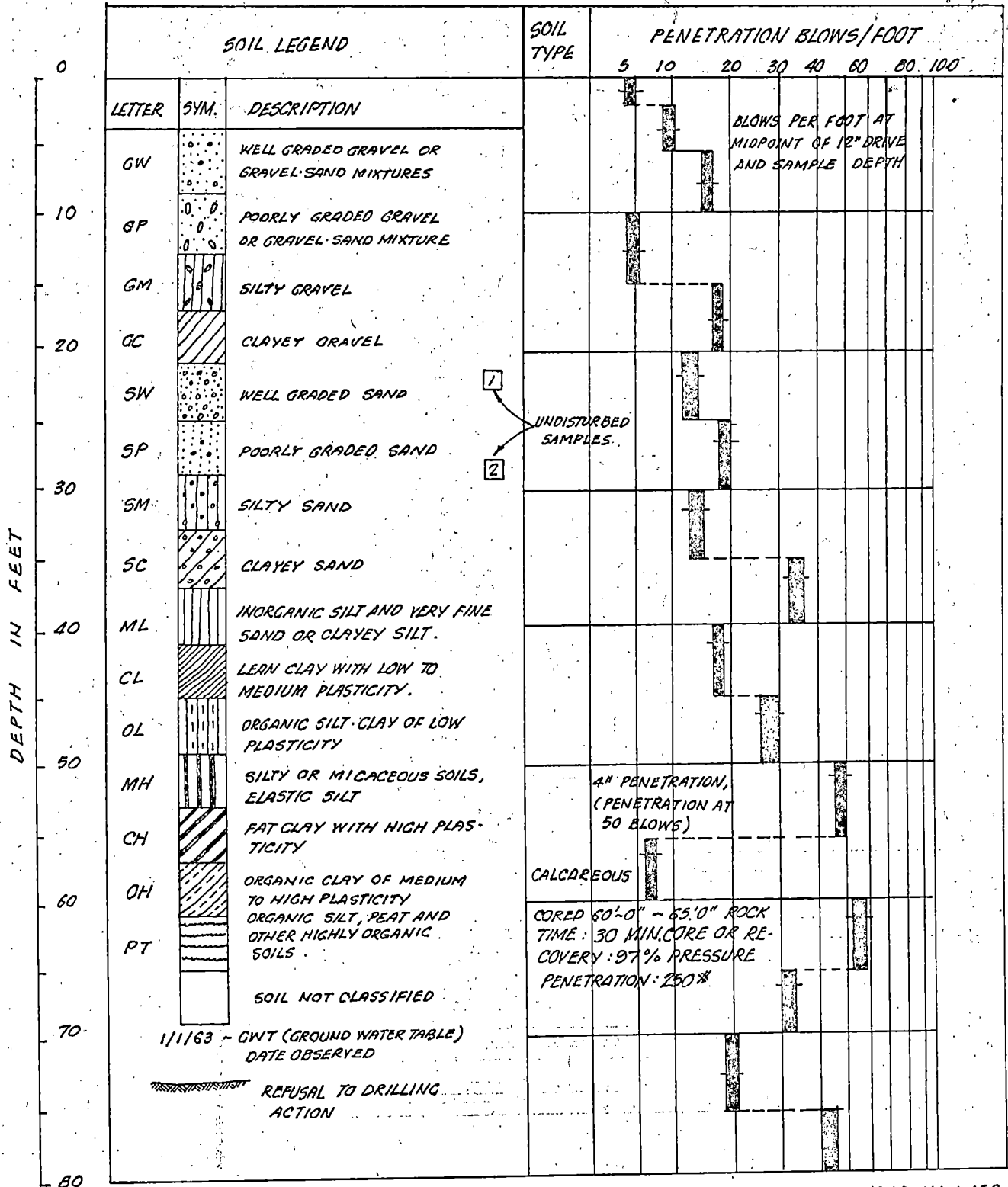
September 30, 1970
3221-A-1

A P P E N D I X

SOIL BORING LEGEND

TEST HOLE N^o

JOB ORDER N^o



REMARKS: SOILS CLASSIFIED ACCORDING TO UNIFIED SOILS CLASSIFICATION SYSTEM.

(PENETRATION = N^o BLOWS REQUIRED OF 140 LB. HAMMER FALLING 30 IN. TO DRIVE 2 IN. O.D. SPLIT-SPOON SAMPLER 1 FT.)
PENINSULA ENGINEERING TESTING COMPANY
EAU GALLIE, FLORIDA

PENINSULA ENGINEERING TESTING COMPANY

SERVICES AVAILABLE

GENERAL TESTING

MATERIALS INVESTIGATIONS

CONCRETE DESIGN, TESTING AND INSPECTION

ASPHALT DESIGN, TESTING AND INSPECTION

SOIL CEMENT DESIGN, TESTING AND INSPECTION

PILE LOAD TESTING

STEEL INSPECTION

SOILS AND FOUNDATION

FOUNDATION INVESTIGATION

SOIL INVESTIGATION

FAILURE INVESTIGATIONS

FILL SUPERVISION & CONTROL

"ALL SERVICES PERFORMED ARE SUPERVISED BY REGISTERED
PROFESSIONAL ENGINEERS."

1911

REROOF

TOWN OF SEWALL'S POINT, FLORIDA

Permit Number 1911

ReRof

Date 4-18-86

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

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

Owner LENDEL L. CONLEY Present Address 140 SEWALL'S POINT RD.

Phone (MERRITT ISLAND OFFICE 452-2366)

Contractor SELF Address _____

Phone N/A

Where licensed N/A License number N/A

Electrical contractor N/A License number N/A

Plumbing contractor N/A License number N/A

Roofing contractor SELF License number N/A

Air conditioning contractor N/A License number N/A

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: REMOVE OLD ROOF; PLACE NEW SHINGLE ROOF AND

30 LB. FELT, DRIP RAILS

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

140 SEWALL'S POINT RD.

Subdivision _____ Lot number _____ Block number _____

Contract-price \$ MATERIAL COST \$460.00 Cost of permit \$ 5.00

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor _____

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

Owner [Signature]

TOWN RECORD

Date submitted 4/18/86 Approved [Signature] Building Inspector 4/18/86 Date

Approved [Signature] Commissioner 4/21/86 Date Final Approval given _____ Date

Certificate of Occupancy issued(if applicable) _____ Date

2230

ROOF REPAIR

Permit No. 2230

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 Bill McGeorgal Present Address 140A Sewall Point Rd

Phone 286-4392

Contractor Owner

Address _____

Phone _____

Where licensed _____

License number _____

Electrical contractor _____

License number _____

Plumbing contractor _____

License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Repair Roof with new shingles

Same Address

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

Subdivision _____

Lot number _____

Block number _____

Contract price \$ 7,500.00

Cost of permit \$ 50.00

Plans approved as submitted _____

Plans approved as marked _____

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

Contractor Bill McGeorgal
Sam Fasano

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

Owner _____

TOWN RECORD

Date submitted 1/8/88

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.

3241

RETAINING WALL

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

3241

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 Tom Mumford Present Address 140 S. Sewall's Pt. Rd.

Phone 286-0393

Contractor COASTAL MARINE TECH Address 3002 NE. IVY LANE JENSEN BEACH

Phone 334-6602

Where licensed STATE License number CG-CA-34021

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: REPLACE 16' OF EXISTING RETAINING WALL.

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

140 S. Sewall's Pt. Rd.

Subdivision ARCADELAGO Lot number 2 Block number

Contract price \$ 1530 Cost of permit \$ 24,00

Plans approved as submitted Plans approved as marked

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

Contractor [Signature]

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

Owner [Signature]

TOWN RECORD

Date submitted [Signature] Approved: Dale B... 8/18/92 Building Inspector Date

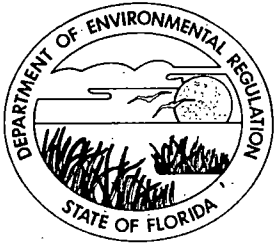
Approved: [Signature] 8/19/92 Commissioner Date Final Approval given: Date

Certificate of Occupancy issued (if applicable) Date

P1282

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.



Florida Department of Environmental Regulation

Southeast District Branch Office • 1801 S.E. Hillmoor, Suite C202 • Port St. Lucie, FL 34952

Lawton Chiles, Governor

Carol M. Browner, Secretary

AUG 3 1992

Tom Mumford
c/o Coastal Marine Tech.
3002 N.E. Ivy Lane
Jensen Beach, Florida 34957

WRM - Martin County

Gentlemen:

This is to acknowledge receipt of your application, File # 432166748 to:

Replace 16 linear feet of an existing concrete vertical wall with a new wood vertical wall. The new wall will be placed within one foot waterward of the old wall. This project is located at 140 South Sewall's Point Road, Sabuco Bay, Archipelago, Class III waters, Section 12, Township 38 South, Range 41 East, Sewall's Point, Martin County.

At this time, no Department permit is required for your project as it meets the exemption criteria outlined in F.A.C.R. 17-312.050(1)(j), in accordance with the three (3) attached stamped drawings. Any modifications in your plans should be submitted for review as changes may result in permits being required. This letter does not relieve you from the need to obtain any other permits (local, state or federal) which may be required.

A copy of your application has also been sent to the Department of Natural Resources for review. Consent of use of State-owned land may be required from the Department of Natural Resources prior to construction. For further information, you may contact Mr. Don Keirn at (407) 547-5825.

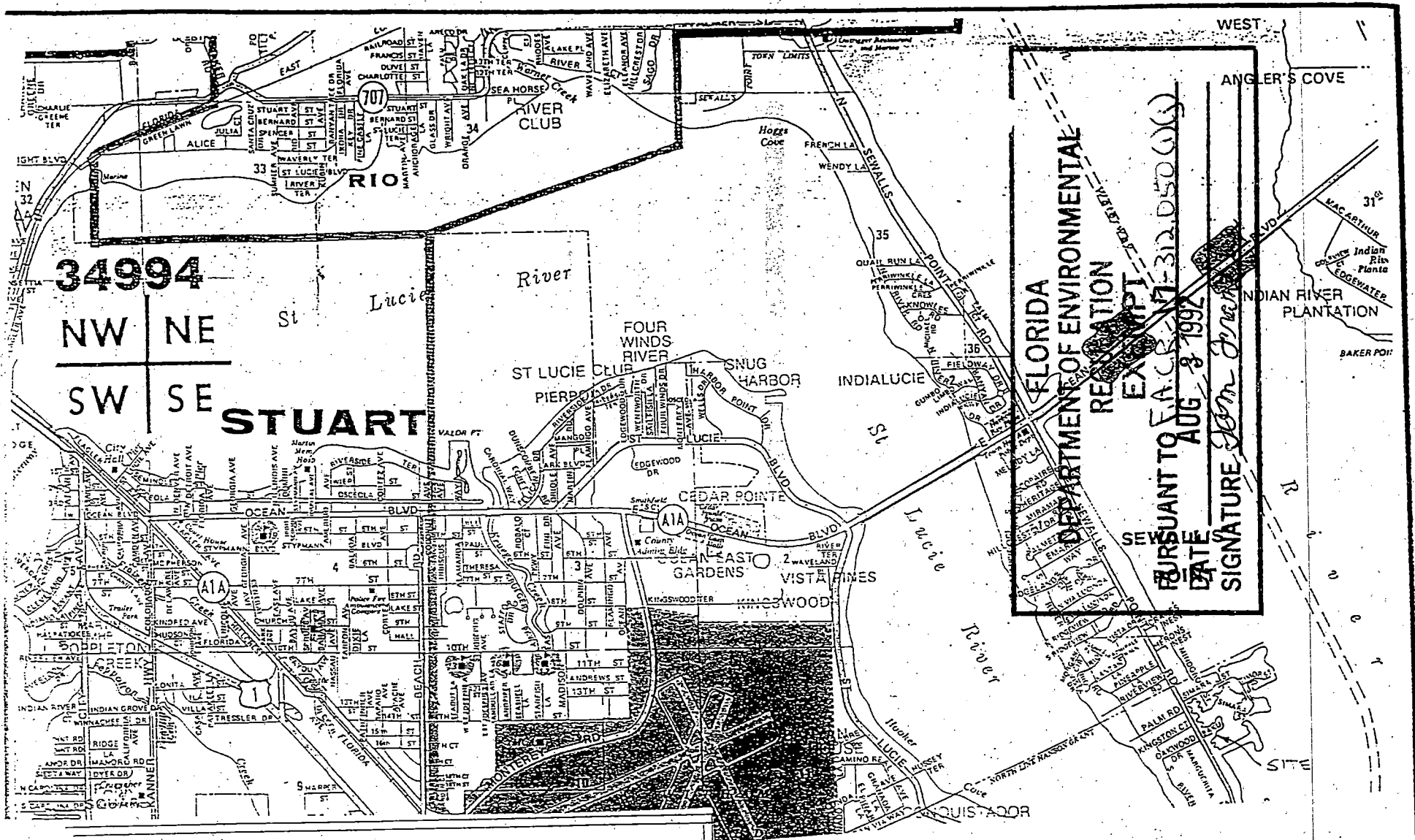
If you have any questions, please contact Mary Figueira of this office at (407) 335-4310. When referring to this project, please use the file number indicated.

Sincerely,

Tom Franklin

Tom Franklin
Environmental Supervisor
Wetlands Resource Management

TF:mfw



FLORIDA
DEPARTMENT OF ENVIRONMENTAL
RENOVATION
EXEMPT
 PURSUANT TO F.A.C. 17-312.050(1)(c)
 DATE AUG 8 1992
 SIGNATURE *Tom Drea*

Coastal Marine Construction

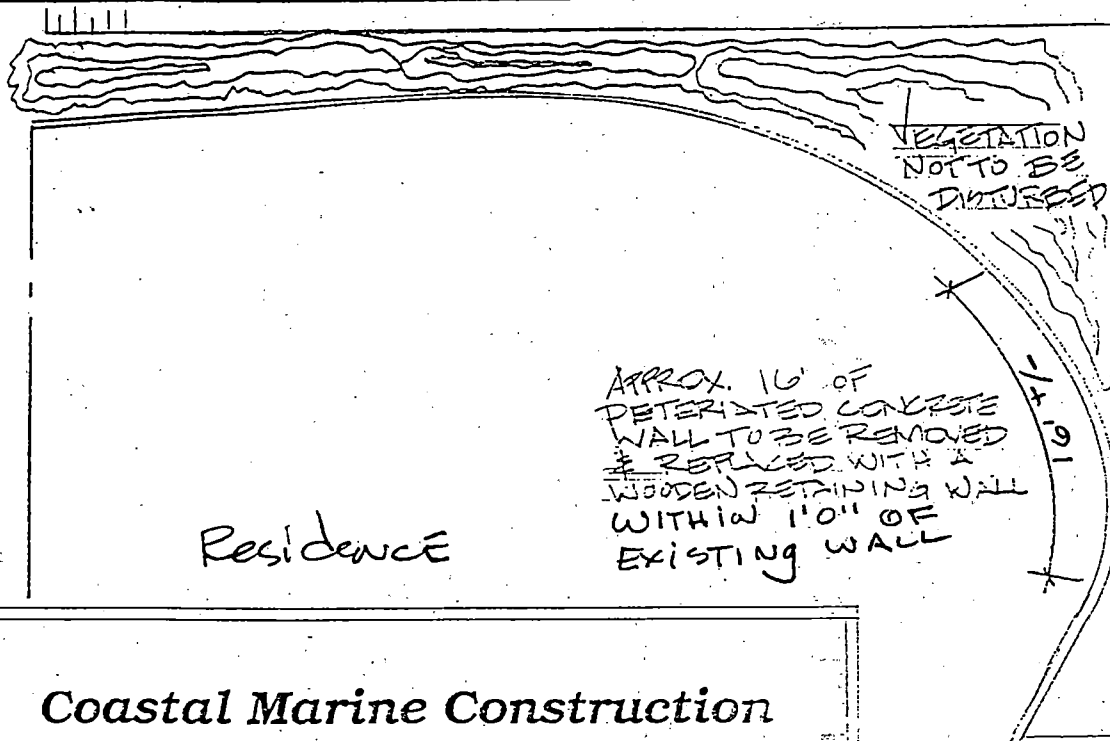
3002 NE IVY LANE, JENSEN BEACH, FLA. 34957
 407-334-6602

Scale: NTS

Date: JUNE 1992

Sheet 1 of 3

MUMFORD RESIDENCE 140 S. SEAWALL PT. ROAD.		
DATE	JUNE 92	DRAWN BY
SCALE	NTS	REVISED
LOCATION MAP		APPROVED BY
		DRAWING NUMBER
		1003



Coastal Marine Construction

3002 NE IVY LANE, JENSEN BEACH, FLA. 34957
407-334-6602

Scale: NTS

Date: JUNE 92

Sheet 2 of 3

FLORIDA
DEPARTMENT OF ENVIRONMENTAL
REGULATION
EXEMPT

PURSUANT TO F.A.C.R. 17-312.050 (1)(c)

DATE AUG 3 1992

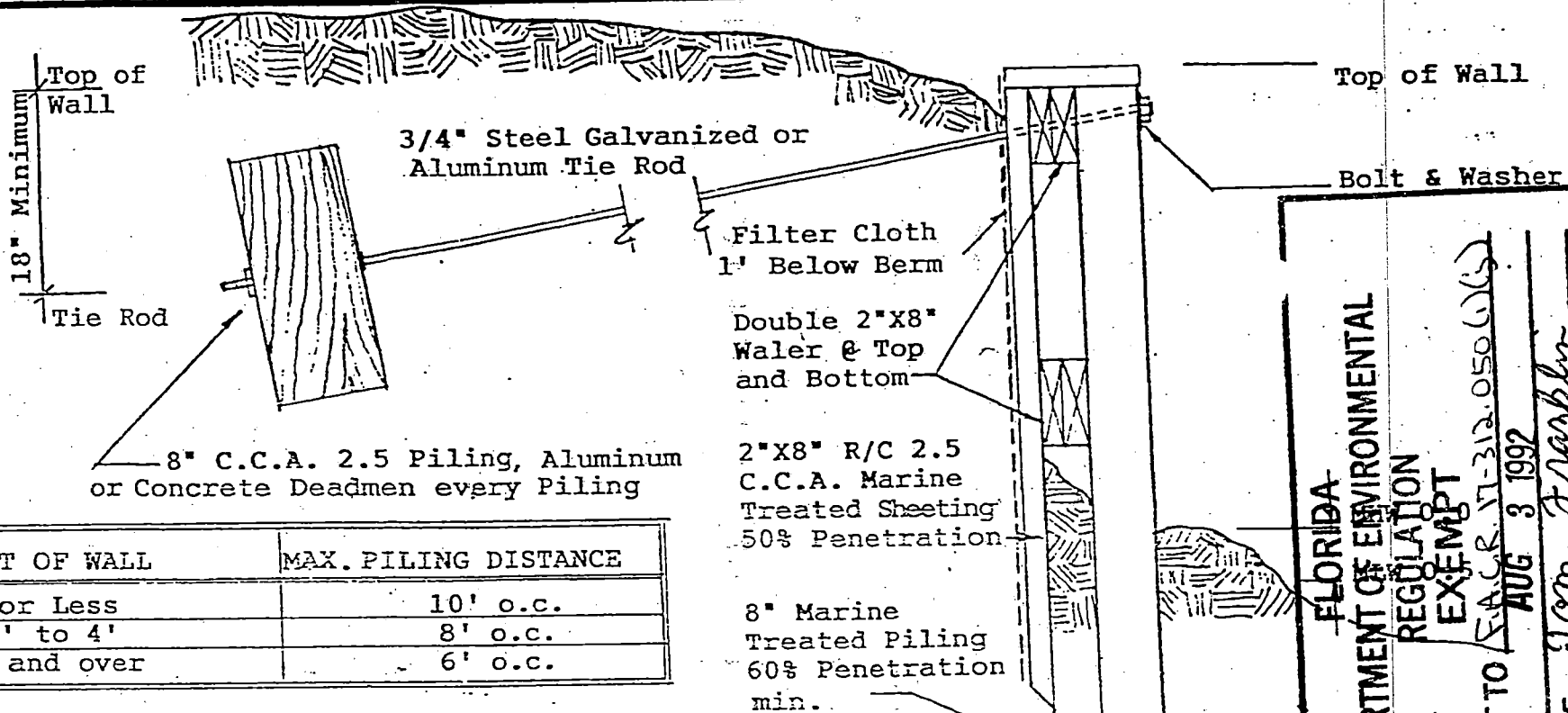
SIGNATURE *Tom Franklin*

MUMFORD RESIDENCE
140 S. SEWALLS FT ROAD

SCALE: NTS	APPROVED BY:	DRAWN BY:
DATE: JUNE 92		REVISED:

PLAN VIEW: WALL LOCATION

DRAWING NUMBER
2 OF 3



HEIGHT OF WALL	MAX. PILING DISTANCE
3' or Less	10' o.c.
3.5' to 4'	8' o.c.
4.5 and over	6' o.c.

*Tie Rod length is 3 times total height of wall.

TYPICAL 2.5 MARINE TREATED BULKHEAD

NEW WALL WILL BE CONSTRUCT 1'0" ~~BACK~~ WATERWARD OF EXISTING WALL

FLORIDA DEPARTMENT OF ENVIRONMENTAL REGULATION
 EXEMPT
 PURSUANT TO S.A.C.R. 17-312.050(6)(5)
 DATE AUG 3 1992
 SIGNATURE *Tom Franklin*

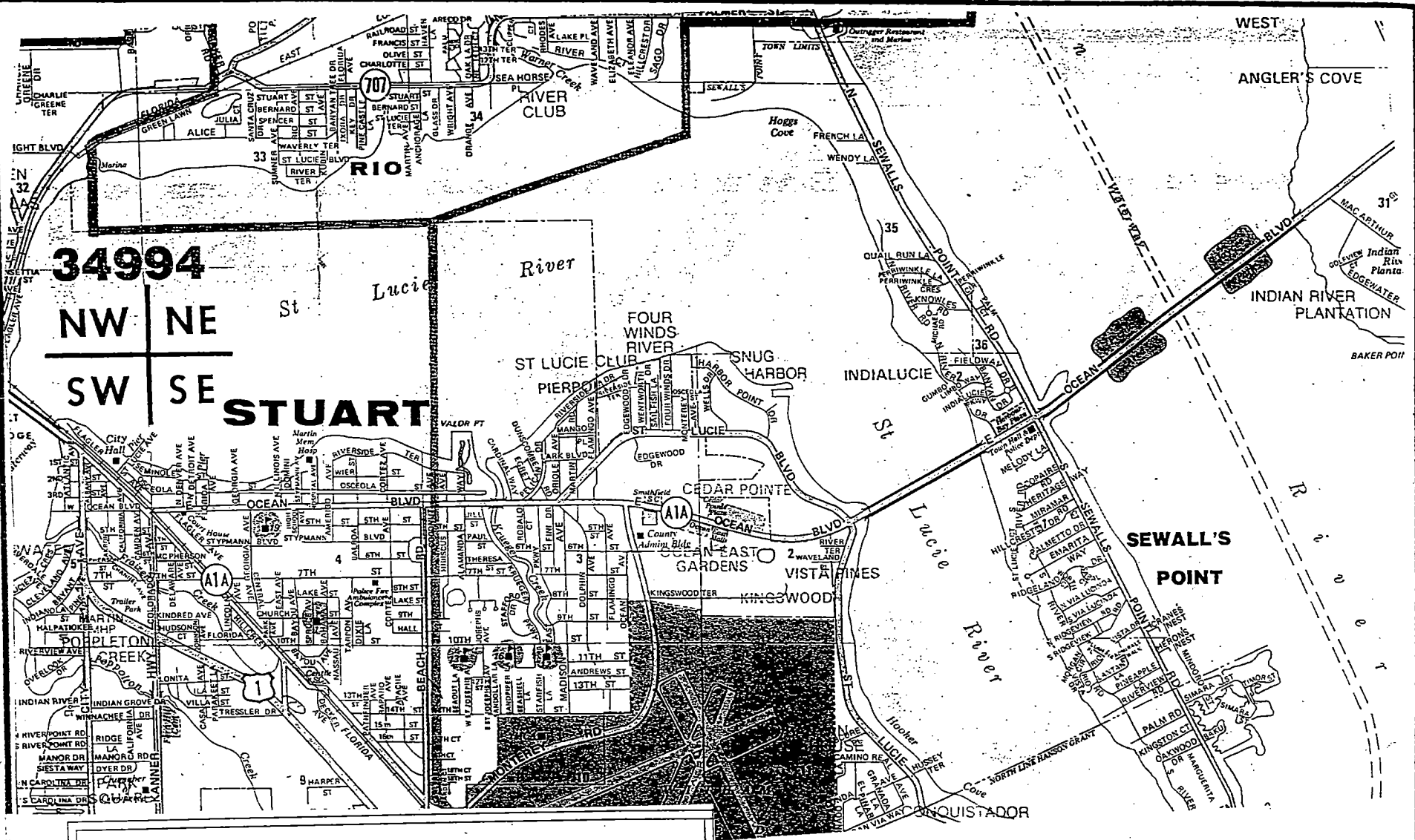
Coastal Marine Construction
 3002 NE IVY LANE, JENSEN BEACH, FLA. 34957
 407-334-6602

Scale: NTS

Date: JUNE 92

Sheet 3 of 3

MUMFORD RESIDENCE		
SCALE: NTS	APPROVED BY:	DRAWN BY
DATE: JUNE 92		REVISED
DETAIL SHEET		
		DRAWING NUMBER 3 OF 3



Coastal Marine Construction

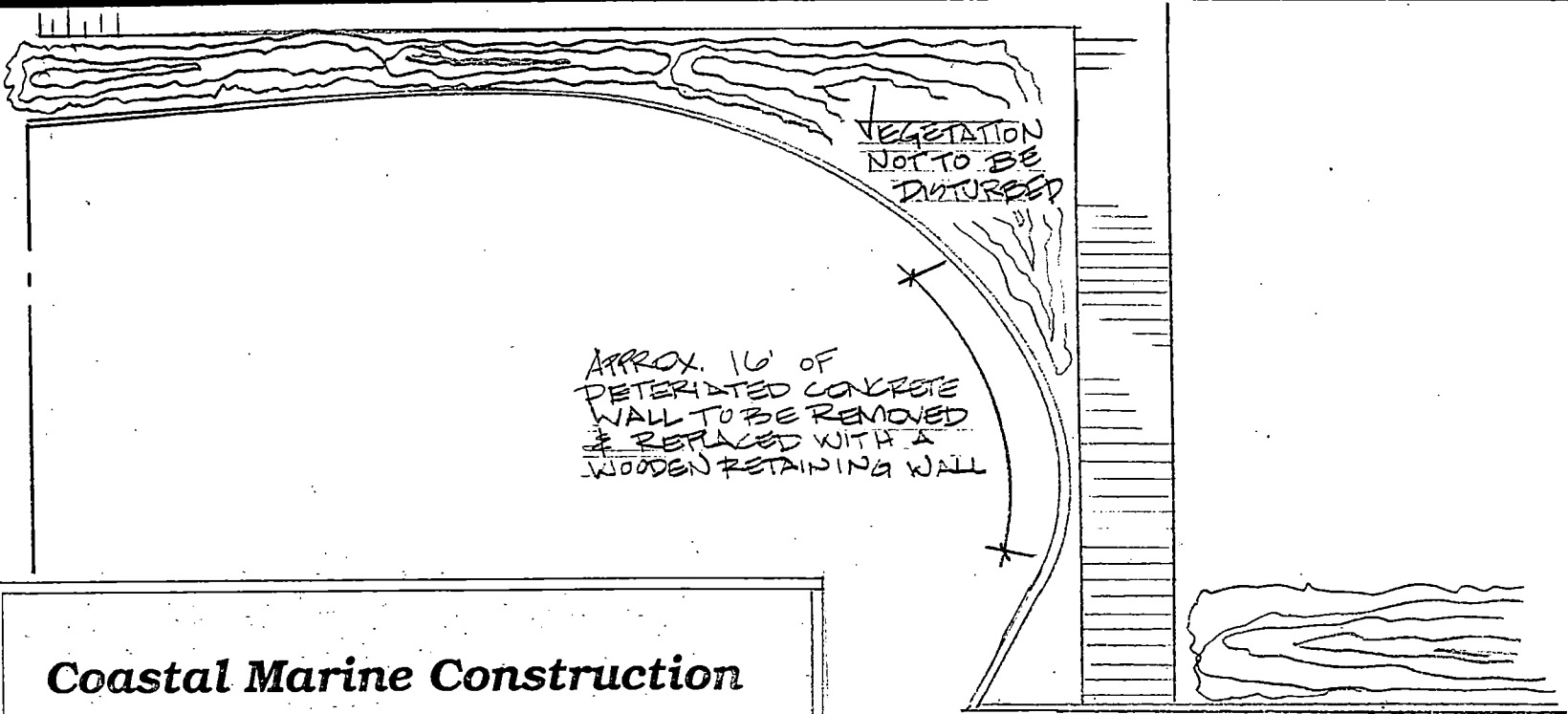
3002 NE IVY LANE, JENSEN BEACH, FLA. 34957
407-334-6602

Scale:

Date:

Sheet of

DATE	DRAWN BY	APPROVED BY
SCALE	REVISED	
		DRAWING NUMBER



Coastal Marine Construction

3002 NE IVY LANE, JENSEN BEACH, FLA. 34957

407-334-6602

Scale:

Date:

Sheet of

MUMFORD RESIDENCE
140 S. SEWALLS FT ROAD

SCALE: NTS	APPROVED BY:	DRAWN BY
DATE: JUNE 92		REVISED

PLAN VIEW: WALL LOCATION

DRAWING NUMBER
2 OF 3

Top of Wall
18" Minimum
Tie Rod

3/4" Steel Galvanized or Aluminum Tie Rod

Filter Cloth
1' Below Berm

Double 2"X8" Waler @ Top and Bottom

8" C.C.A. 2.5 Piling, Aluminum or Concrete Deadmen every Piling

2"X8" R/C 2.5 C.C.A. Marine Treated Sheeting
50% Penetration

8" Marine Treated Piling
60% Penetration min.

Top of Wall

Bolt & Washer

MHW 0.0

MLW 0.5

HEIGHT OF WALL	MAX. PILING DISTANCE
3' or Less	10' o.c.
3.5' to 4'	8' o.c.
4.5 and over	6' o.c.

*Tie Rod length is 3 times total height of wall.

TYPICAL 2.5 MARINE TREATED BULKHEAD

Coastal Marine Construction

3002 NE IVY LANE, JENSEN BEACH, FLA. 34957

407-334-6602

Scale:

Date:

Sheet of

SCALE:	APPROVED BY:	DRAWN BY
DATE:		REVISED
		DRAWING NUMBER

4495

REBUILD EXISTING

DOCK

Town of Sewall's Point

Bob Bott WED.

9895

PLN _____

Date 10-20-98

BUILDING PERMIT APPLICATION

to construct:

NEW CONSTRUCTION ADDITION ALTERATION DEMOLITION

Rebuild

RESIDENTIAL COMMERCIAL 445 SF CF

#4495

OTHER: Rebuild Dock CONTRACT PRICE 8,900.00

Owner's Name MR. GARY GRIFFIS 288-5890

Owner's Address 140 S. SEWALLS PT. ROAD Sewalls Pt. 34996

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

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

City SEWALLS POINT State FL Zip 34996

Contractor's Name CUSTOM BUILT MARINE CONSTRUCTION, INC.

Contractor's Address 3170 S.E. WANLER STREET

City STUART State FL Zip 34997

Job Name MR. GARY GRIFFIS

Job Address Same

City Same State _____ Zip _____

Legal Description 13-38-41-001-000--00011-30000

Bonding Company _____

Bonding Company Address _____

City _____ State _____ Zip _____

Architect/Engineer's Name Ralph Huls

Architect/Engineer's Address _____

Mortgage Lender's Name _____

Mortgage Lender's Address _____

Replacement of Existing Dock
Foot print not to increase
BB

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.

[Signature] _____ Date 10/20/98
Owner or Agent
[Signature] _____ Date 10/20/98
Contractor

COUNTY OF MARTIN
STATE OF FLORIDA

Sworn to and subscribed before me this 20 day of OCT, 1998 by
DAVID CORLEAN who: [] is/are personally known to me, or [] has/have produced _____
as identification, and who did not take an oath.

Name: James F. Cullen
Typed, printed or stamped
(NOTARY SEAL) I am a Notary Public of the State of Florida having a
commission number of _____ and my
commission expires: 6/18/00
JAMES CULLEN
My Comm Exp. 6/18/00
Bonded By Service Ins
No. CC592567
 Personally Known Other I.D.

STATE OF FLORIDA
COUNTY OF MARTIN

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

Name: _____
Typed, printed or stamped
(NOTARY SEAL) I am a Notary Public of the State of Florida having a
commission number of _____ and my
commission expires: _____

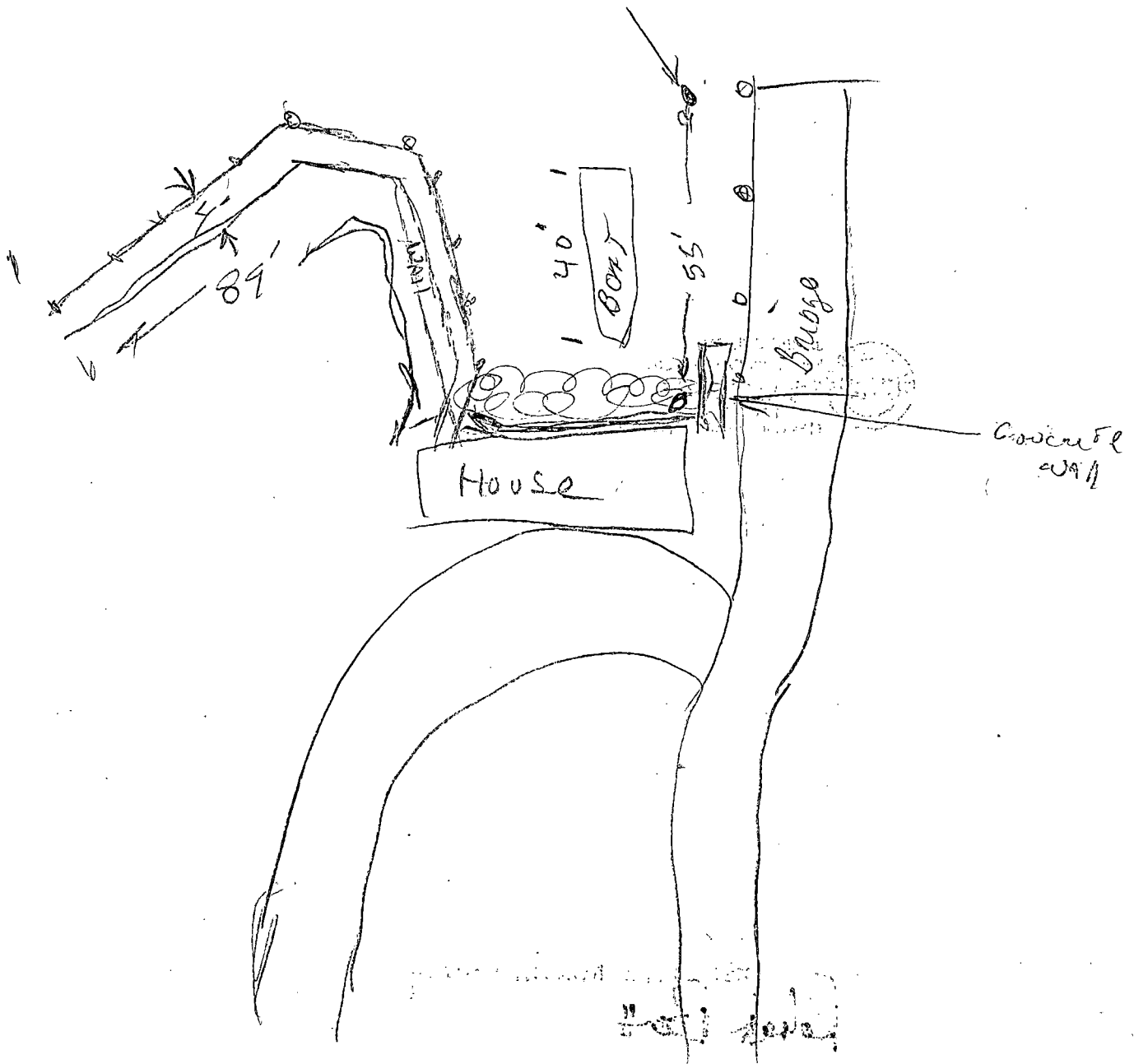
Certificate of Competency Holder

Contractor's State Certification or Registration No. _____

Contractor's Certificate of Competency No. SP 1118 MARTIN COUNTY

APPLICATION APPROVED BY Ronald Boff Permit Officer

Building Commissioner



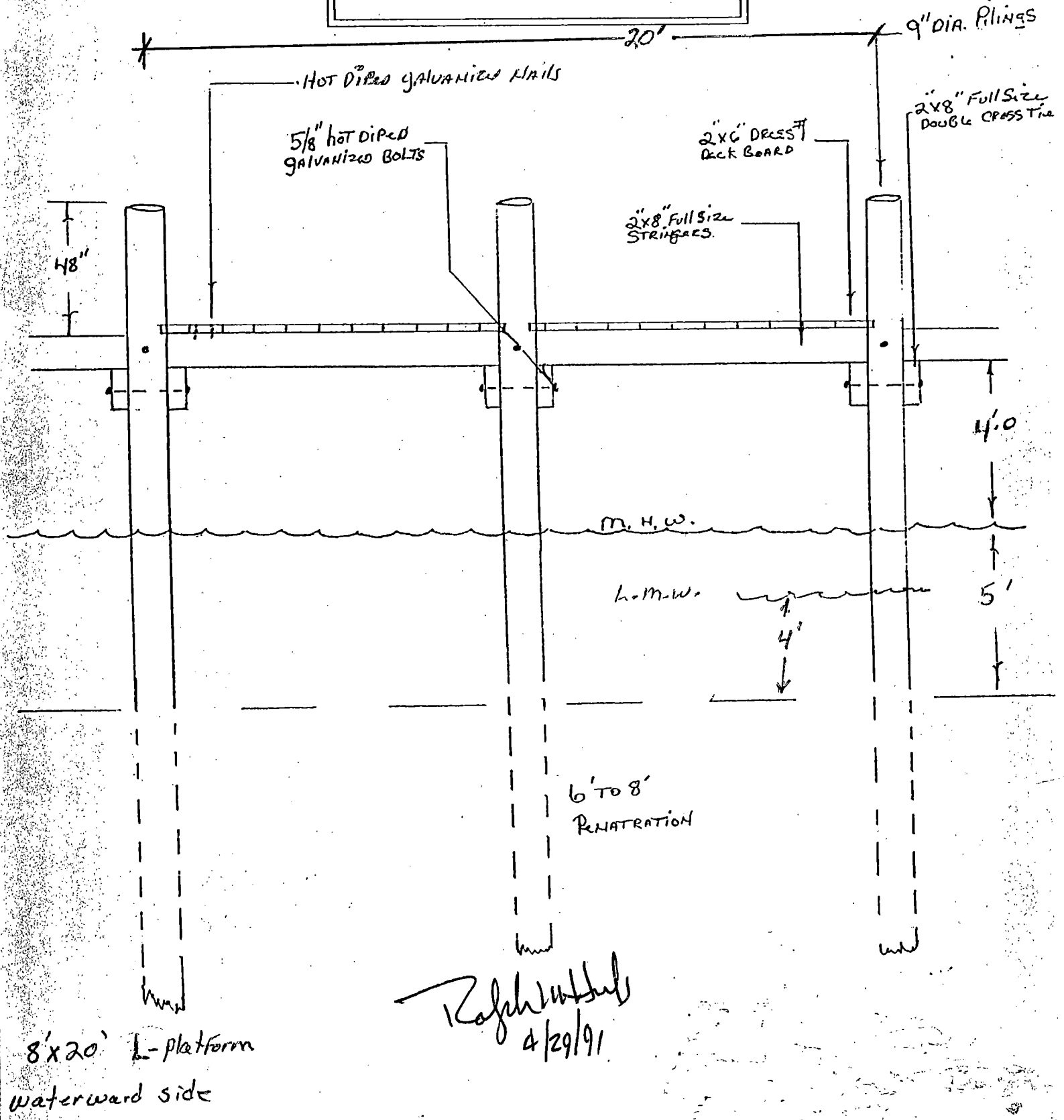
BOAT DOCKS
BOAT LIFTS
DECKS • BENCHES
FISH TABLES

Custom Built Marine Construction, Inc.

P.O. Box 3016
Stuart, Florida 34995
(407) 288-4254

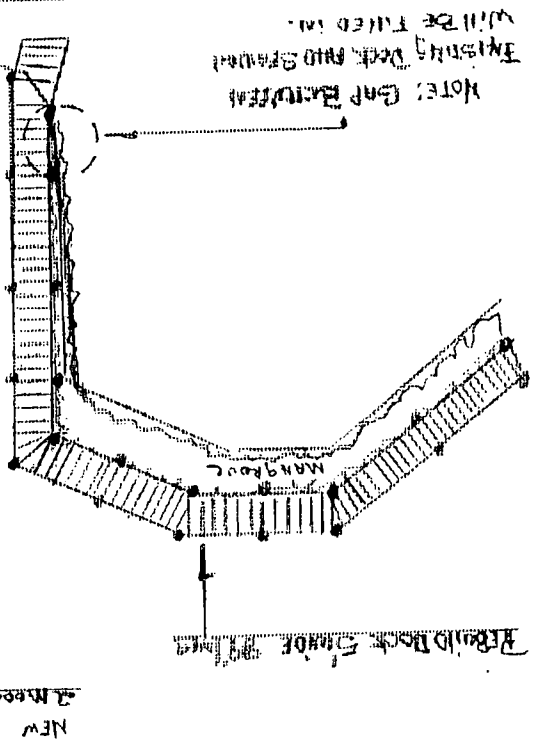
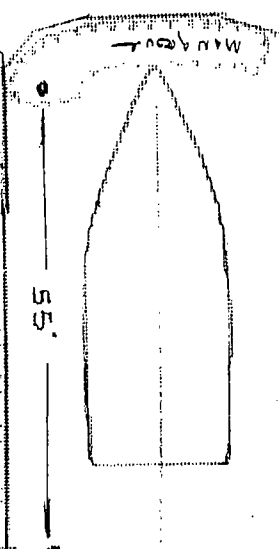
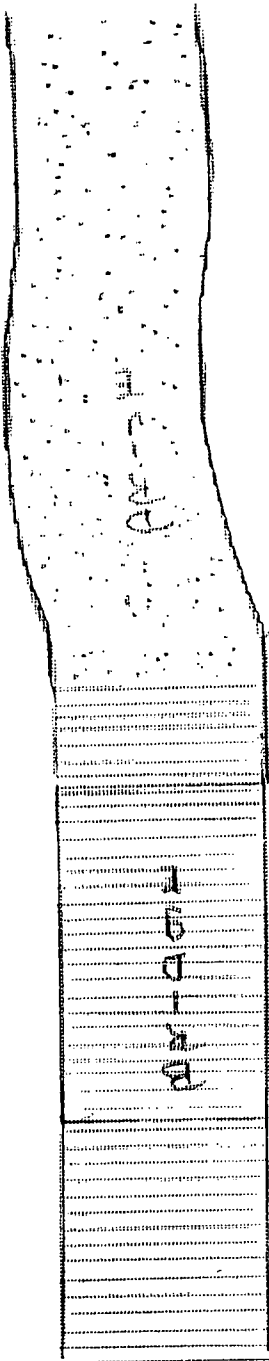
Dedicated to Excellence

EROSION CONTROL
RETAINING WALLS
SEAWALLS
RIP-RAP STONE



MR. GARY GRIFFIN, LANDSCAPE
 140 S. GOWAN ST. ROAD
 GUMPT, FL. 34996
 Phone 238-5870 / Fax 238-5840
 Sketch: NOT TO SCALE

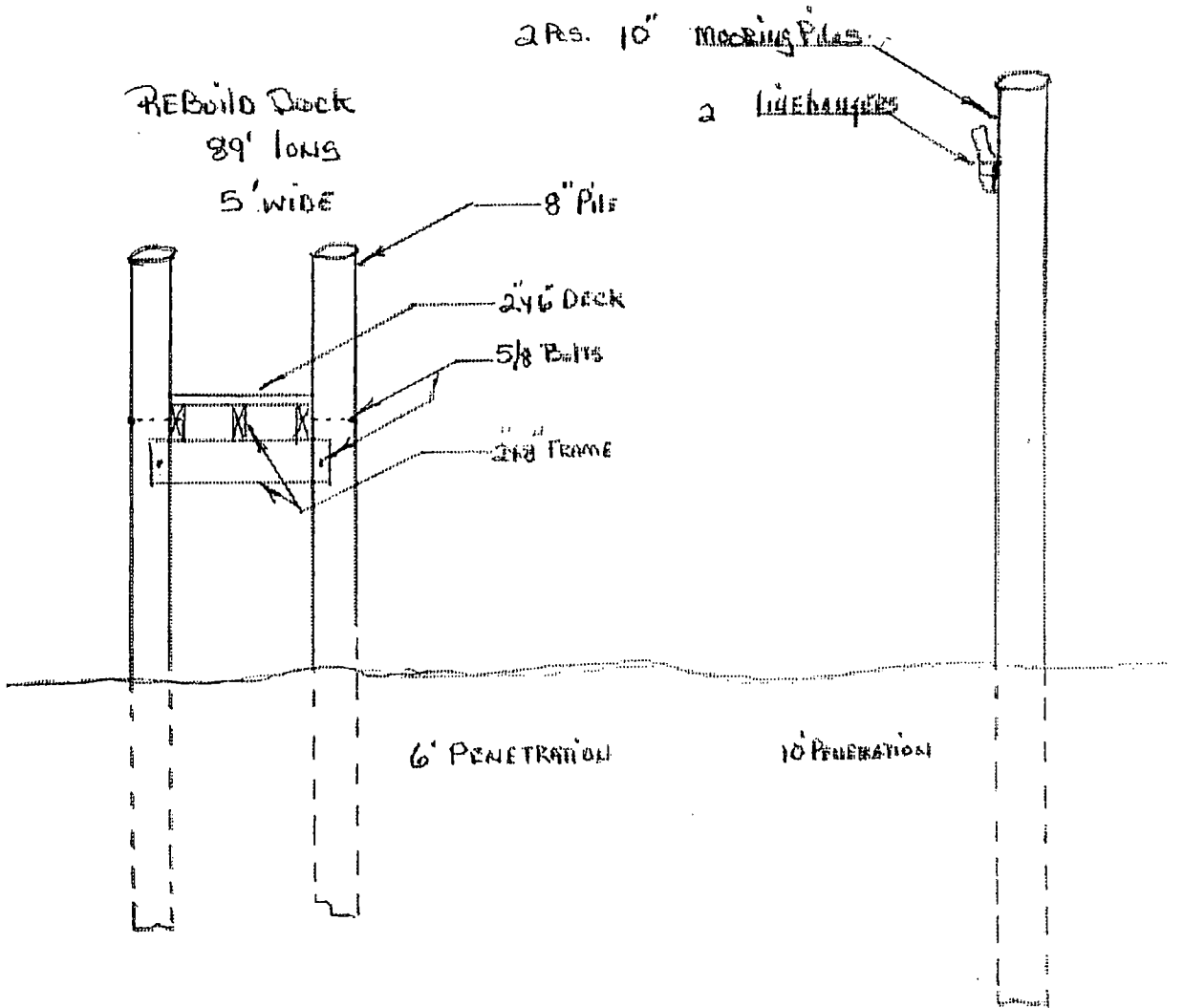
HOUSE



NOTE: GMP BATTERY EXISTING DECK AND GRAVEL WILL BE FILL IN.

REBUILD BACK SIDE OF DRIVE

NEW



MR GARY GRITTS RESIDENCE
140 S. SEWALLS Pt RD.
STONEY, FL. 34496
PHONE 288-5240 / FAX 288-5240
Sketch: NOT TO SCALE

This Document Prepared By:
Terence P. McCarthy, Esq.
McCarthy, Summers, Robko McKey, Wood & Sawyer, PA
2001 S.E. Ocean Blvd. Second Floor
Stuart, FL 34996

Parcel ID Number: 13-38-41-001-000-00011-30000
Grantor #1 TIN:

Warranty Deed

This Indenture, Made this 4th day of September, 1998 A.D.,
T.G. MUMFORD and MARGARET A. MUMFORD, his wife, Between

GARY K. GRIFFIS, , grantors, and

whose address is: 140 S. SEWALL'S POINT RD, STUART, Florida 34996

, grantee.

Witnesseth that the GRANTORS, for and in consideration of the sum of -----
----- TEN & NO/100 (\$10.00) ----- DOLLARS,
and other good and valuable consideration to GRANTORS in hand paid by GRANTEE, the receipt whereof is hereby acknowledged, have granted, bargained and sold to the said GRANTEE and GRANTEE'S heirs and assigns forever, the following described land, situate, lying and being in the County of MARTIN State of Florida to wit:

Lot 1, THE ARCHIPELAGO, according to the Plat thereof on file in the Office of the Clerk of the Circuit Court in and for Martin County, Florida recorded in Plat Book 4, page 48, said lands situate, lying and being in Martin County, Florida.

Subject to restrictions, reservations and easements of record, if any, which are not reimposed hereby, and taxes subsequent to December 31, 1997.

and the grantors do hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whatsoever.
In Witness Whereof, the grantors have hereunto set their hands and seals the day and year first above written.
Signed, sealed and delivered in our presence:

Debra G. Duvall
Printed Name: Debra G. Duvall
Witness as to Both
Terence P. McCarthy
Printed Name: TERENCE P. MCCARTHY
Witness as to Both

T.G. Mumford (Seal)
T.G. MUMFORD
P.O. Address 140 S. SEWALL'S POINT RD, STUART, FL 34997
Margaret A. Mumford (Seal)
MARGARET A. MUMFORD
P.O. Address 140 S. SEWALL'S POINT RD, STUART, FL 34997
(Seal)
(Seal)

STATE OF Florida
COUNTY OF MARTIN

The foregoing instrument was acknowledged before me this 4th day of September, 1998 by
T.G. MUMFORD and MARGARET A. MUMFORD, his wife,

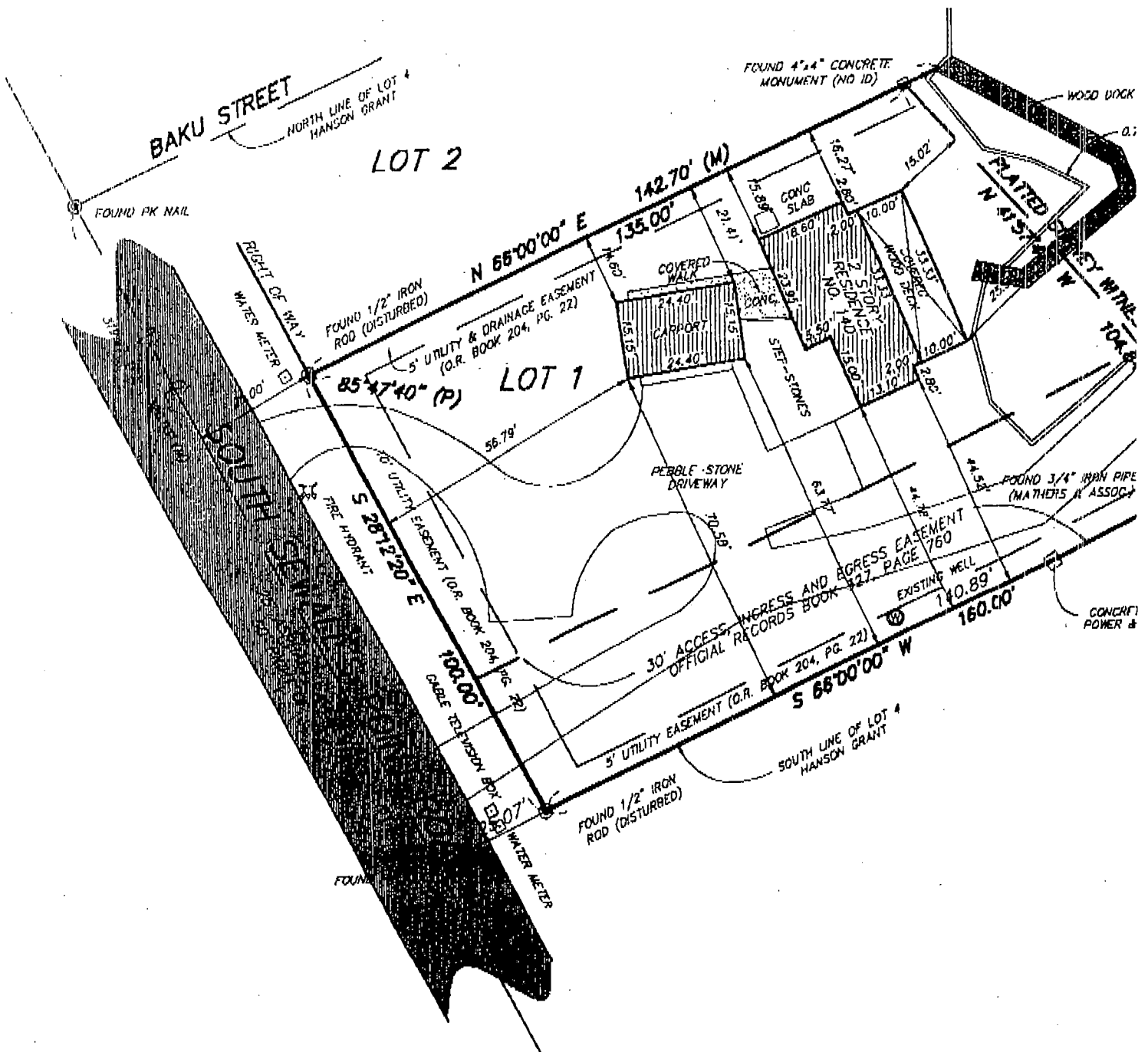
who are personally known to me or who have produced their identification.

Terence P McCarthy
My Commission CC718539
Expires February 23, 2002

Terence P. McCarthy
Printed Name: Terence P. McCarthy
NOTARY PUBLIC

For Custom Built Home
288-2802

BOUNDARY SURVEY



BAKU STREET

LOT 2

LOT 1

FOUND 4"x4" CONCRETE MONUMENT (NO ID)

FOUND PK NAIL

NORTH LINE OF LOT 4 HANSON GRANT

N 65°00'00" E 142.70' (M)

FOUND 1/2" IRON ROD (DISTURBED)

RIGHT OF WAY WATER METER

5' UTILITY & DRAINAGE EASEMENT (O.R. BOOK 204, PG. 22)

10' UTILITY EASEMENT (O.R. BOOK 204, PG. 22)

5' UTILITY EASEMENT (O.R. BOOK 204, PG. 22)

30' ACCESS, INGRESS AND EGRESS EASEMENT OFFICIAL RECORDS BOOK 227, PAGE 760

5' UTILITY EASEMENT (O.R. BOOK 204, PG. 22)

FOUND 1/2" IRON ROD (DISTURBED)

SOUTH LINE OF LOT 4 HANSON GRANT

135.00'

21.41'

15.15'

24.40'

70.58'

70.58'

100.00'

140.89'

160.00'

19.27'

18.60'

10.00'

13.10'

13.10'

10.00'

10.00'

15.02'

15.02'

15.02'

15.02'

15.02'

15.02'

15.02'

CONC SLAB

COVERED WALK

PERBLE STONE DRIVEWAY

FIRE HYDRANT

EXISTING WELL

WOOD DOCK

PLATED

FOUND 3/4" IRON PIPE (MATHIAS & ASSOC.)

CONCRETE POWER &

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

LEGAL DESCRIPTION:

LOT 1, THE ARCHIPELAGO, ACCORDING TO THE PLAT THEREOF ON FILE IN THE OFFICE OF THE CLERK OF THE CIRCUIT COURT IN AND FOR MARTIN COUNTY, FLORIDA RECORDED IN PLAT BOOK 4, PAGE 48; SAID LANDS SITUATE, LYING AND BEING IN MARTIN COUNTY, FLORIDA.

SURVEYORS NOTES:

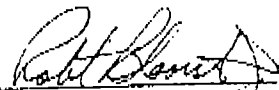
1. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS AND/OR RIGHTS OF WAY OF RECORD EXCEPT AS SHOWN ON THE RECORD PLAT IF ANY.
2. NO ATTEMPT WAS MADE BY THIS FIRM TO LOCATE UNDERGROUND FOOTINGS OF BUILDINGS OR FENCES ON OR ADJACENT TO THIS SITE.
3. BEARINGS SHOWN HEREON REFER TO AN ASSUMED MERIDIAN OF S 28°12'20" E ALONG THE NORTHEASTERLY RIGHT OF WAY LINE OF SOUTH SEWALL'S POINT ROAD.
4. THIS SITE LIES IN FLOOD ZONE A8 (BASE ELEVATION 9) AS SHOWN ON FEMA MAP NO. 120164-0002--D, DATED: JUNE 16, 1992.
5. SITE AREA: 18,054.00 SQUARE FEET OR 0.4145 ACRES.
6. LEGAL DESCRIPTION FURNISHED BY CLIENT

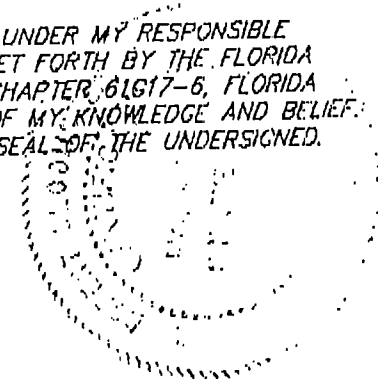
CERTIFICATION:

1. GARY K. GRIFFIS
2. HARBOR FEDERAL SAVINGS BANK, ITS SUCCESSOR'S AND/OR ASSIGNS
3. McCARTY, SUMMERS, BOBKO, McKEY, WOOD & SAWYER, P.A.
4. COMMONWEALTH LAND TITLE INSURANCE COMPANY

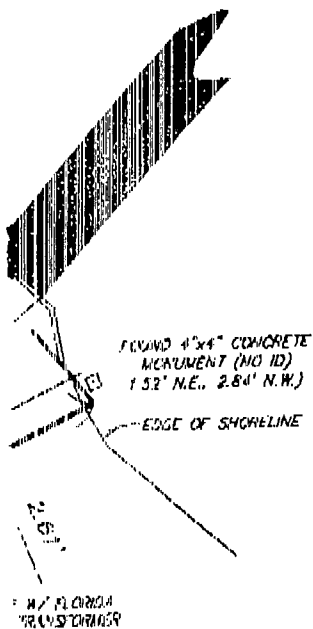
SURVEYORS' CERTIFICATION:

I HEREBY CERTIFY THAT THIS PLAT OF SURVEY WAS PREPARED UNDER MY RESPONSIBLE CHARGE AND MEETS THE MINIMUM TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS AND MAPPERS IN CHAPTER 61G17-6, FLORIDA STATUTES, AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. COPIES OF THIS SURVEY ARE INVALID WITHOUT THE EMBOSSED SEAL OF THE UNDERSIGNED.


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



2. SEAWALL



BLOOMSTER
 PROFESSIONAL LAND SURVEYORS, INC.
 541 N.E. SPENCER STREET
 JENSEN BEACH, FLORIDA 34957
 PHONE 561-334-0868

SHEET 1 OF 1	
SCALE:	1" = 30'
DATE:	06-17-88
F.B.	BTCH
JOB NO.	2100
REVISIONS	

PREPARED FOR: GARY K. GRIFFIS
 140 SOUTH SEWALL'S POINT ROAD
 SEWALL'S POINT, MARTIN COUNTY, FLORIDA

4740

ROOF

REPLACEMENT

&

REMODEL

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 11/17/99
 Building to be erected for GARY GRIFIS
 Applied for by MASTER PLAN BLDG. & REMOD. (Contractor)
 Subdivision ARCHIVE AEGO Lot 1 Block _____
 Address 140 S. SEWALL'S POINT ROAD
 Type of structure S.F.R.

BUILDING PERMIT NO. 4740
 Type of Permit RE ROOF W/ALT.
 Building Fee 211.20
 Radon Fee N/A
 Impact Fee N/A
 A/C Fee N/A
 Electrical Fee N/A
 Plumbing Fee N/A
 Roofing Fee 120.00
 Other Fees (PLAN REVIEW) 21.12
 TOTAL Fees \$352.32

Parcel Control Number:
13-38-41-001-000-00011.30000
 Amount Paid \$352.32 Check # 247 Cash _____ Other Fees _____
 Total Construction Cost \$ 22,000.00

Signed [Signature]
 Applicant

Signed [Signature]
 Town Building Inspector OFFICIAL

BUILDING PERMIT

FORM BOARD SURVEY DATE _____	SHEATHING DATE _____
COMPACTION TESTS DATE _____	FRAMING DATE _____
GROUND ROUGH DATE _____	INSULATION DATE _____
SOIL POISONING DATE _____	ROOF DRY-IN DATE _____
FOOTINGS / PIERS DATE _____	ROOF FINAL DATE _____
SLAB ON GRADE DATE _____	METER FINAL DATE _____
TIE-BEAMS & COLUMNS DATE _____	AS BUILT SURVEY DATE _____
STRAPS AND ANCHORS DATE _____	STORM PANELS DATE _____
DRIVEWAY DATE _____	LANDSCAPE & GRADE DATE _____
AS BUILT SURVEY DATE _____	FINAL INSPECTION DATE <u>5/1/00</u>

FLOOD ZONE N/A LOWEST HABITABLE FLOOR ELEV. N/A

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 ALL COMMENTS IN THE PERMIT FILE.
 DO NOT FOSTEN THIS OR ANY OTHER SIGN TO THE PERMIT

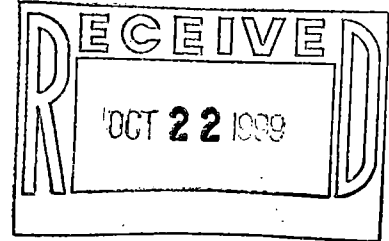


KELLY & KELLY ARCHITECTS



October 19, 1999

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



RE: Dr. Gary Griffis
140 South Sewall's Point Road
Sewall's Point, Florida

Dear Mr. Arnold,

I have been working with Dr. Gary Griffis on the above referenced project in Sewall's Point. Our plans propose the re-building of his existing rear deck, a stair addition, overframing at a flat roof area and re-roofing the entire structure.

The recent high winds and rain have damaged his roof and caused several leaks. To preclude any further damage to his home, I would like to request your prompt review of his building plans. Please call me with any questions or if I may expedite this process in any way.

Thank you in advance for your attention to this matter.

Sincerely,

Gary R. Kelly
Architect Reg. #8341

GRK/dm

CERTIFICATE OF INSURANCE



This certificate that insures the following policyholder for the coverages indicated below:

STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois
 STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois

Name of policyholder MASTER PLAN BUILDING & RENOVATION INC

Address of policyholder 6630 SW GATOR TRAIL

PALM CITY, FL 34990-5507

Location of operations TOWN OF SEWALLS POINT

Description of operations

The policies listed below have been issued to the policyholder for the policy periods shown. The insurance described in these policies is subject to all the terms, exclusions, and conditions of those policies. The limits of liability shown may have been reduced by any paid claims.

*MAINT
 FILE
 11/16/99*

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY (at beginning of policy period)
		Effective Date	Expiration Date	
98 EP 8799 1	Comprehensive Business Liability	01/13/99	01/13/00	BODILY INJURY AND PROPERTY DAMAGE
This insurance includes:				
<input type="checkbox"/> Products - Completed Operations <input type="checkbox"/> Contractual Liability <input type="checkbox"/> Underground Hazard Coverage <input type="checkbox"/> Personal Injury <input type="checkbox"/> Advertising Injury <input type="checkbox"/> Explosion Hazard Coverage <input type="checkbox"/> Collapse Hazard Coverage <input type="checkbox"/> General Aggregate Limit applies to each project <input type="checkbox"/> <input type="checkbox"/>				Each Occurrence \$ 300,000 General Aggregate \$ 600,000 Products - Completed Operations Aggregate \$ _____
	EXCESS LIABILITY	POLICY PERIOD		BODILY INJURY AND PROPERTY DAMAGE
	<input type="checkbox"/> Umbrella <input type="checkbox"/> Other _____	Effective Date Expiration Date		(Combined Single Limit)
				Each Occurrence \$ _____ Aggregate \$ _____
	Workers' Compensation and Employers Liability			Part 1 STATUTORY Part 2 BODILY INJURY Each Accident \$ _____ Disease Each Employee \$ _____ Disease - Policy Limit \$ _____
POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD		LIMITS OF LIABILITY
		Effective Date	Expiration Date	(at beginning of policy period)

If any of the described policies are canceled before its expiration date, State Farm will try to mail a written notice to the certificate holder 30 days before cancellation. If however, we fail to mail such notice, no obligation or liability will be imposed on State Farm or its agents or representatives.

Name and Address of Certificate Holder
TOWN OF SEWALLS POINT
ATTN: ED ARNOLD

Frank Warren
 Signature of Authorized Representative

Agent
 Title

11/16/99
 Date



FRANK WARREN, Agent
 910 SW Martin Downs Boulevard
 P.O. Box 1016
 Stuart, FL 34995-1016
 Bus. (561) 286-7400

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



CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION
FROM FLORIDA WORKERS' COMPENSATION LAW

EFFECTIVE DATE 06/26/1999

EXPIRATION DATE 06/25/2001

EXEMPTED PERSON LAST NAME SHAVELIN

FIRST NAME JOHN

P

SOCIAL SECURITY NUMBER 263-49-3456

BUSINESS NAME MASTER PLAN BUILDING & RENOVAT

FEDERAL IDENTIFICATION NUMBER 650305048

BUSINESS ADDRESS 6630 SW GATOR TRAIL

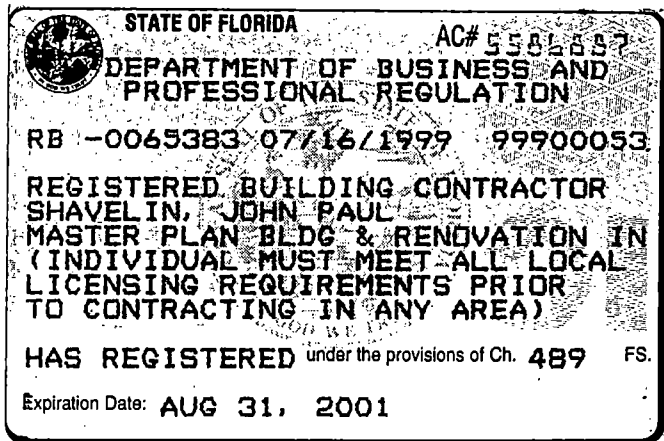
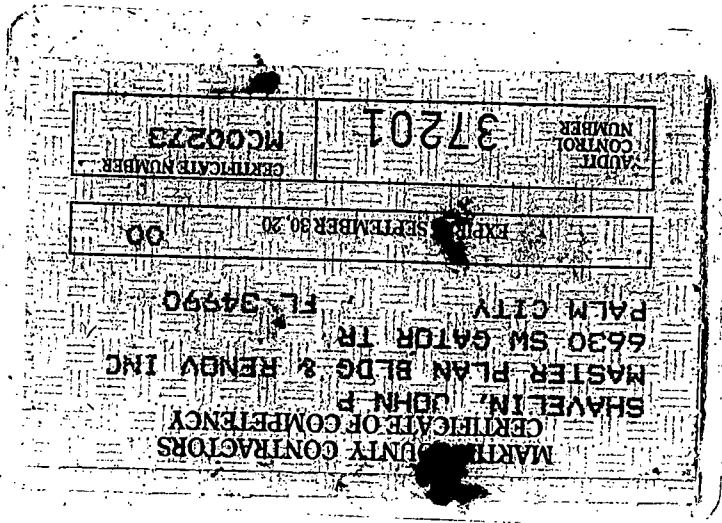
PALM CITY

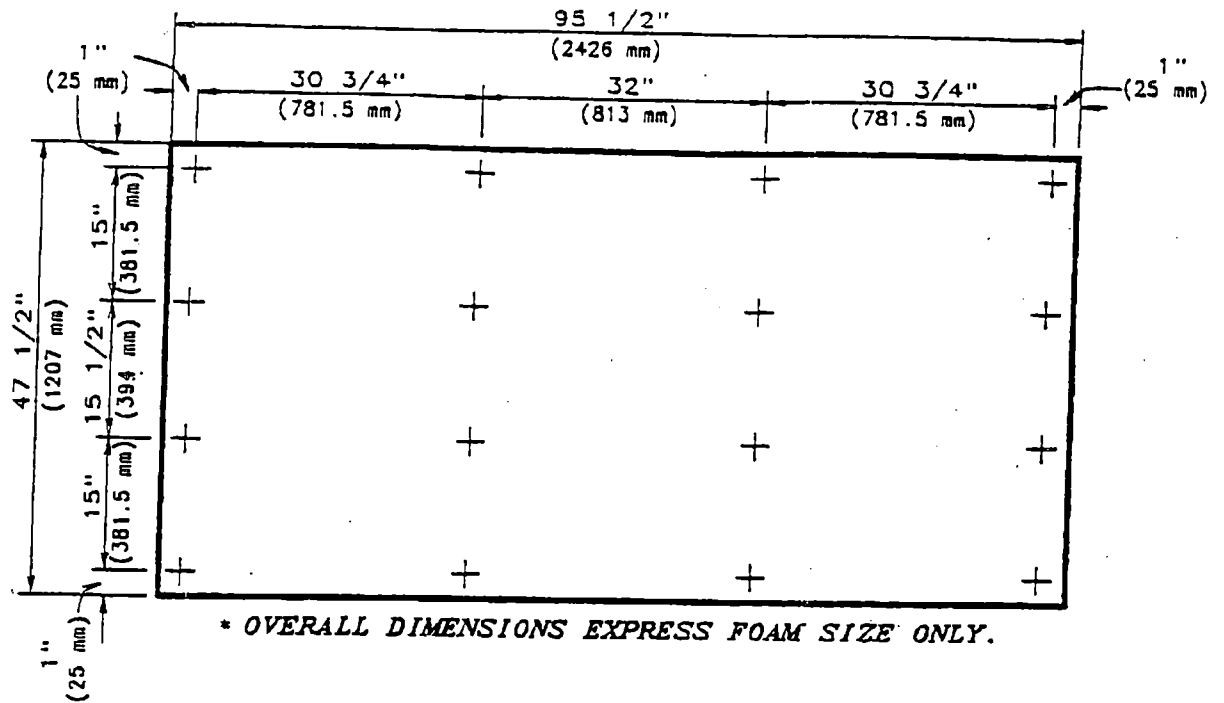
FL 34990

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





IMPORTANT NOTES

- A. THIS FASTENING PATTERN MEETS FM 1-60 & 1-90 REQUIREMENTS.
- B. NAILBOARD MUST BE INSTALLED ON A STRUCTURAL DECK, DO NOT INSTALL DIRECTLY TO FRAMING.
- C. FASTENERS MUST BE FM APPROVED, #12 OR #14 DIAMETER, STANDARD TRUSS HEAD ROOFING FASTENERS WITHOUT PLATES, EXCEPT UL-90.
- D. CONTACT FASTENER MANUFACTURER FOR CONCRETE FASTENER REQUIREMENTS.
- E. FOR SLATE & TILE ROOFING, NAILBOARD WITH 5/8" (16 mm) OSB IS RECOMMENDED.
- F. FOR WOOD DECKS THICKER THAN 1" (25 mm) FASTENERS MUST PENETRATE THE WOOD DECK BY AT LEAST 1" (25 mm).
- G. FOR WOOD DECKS THINNER THAN 1" (25 mm) THE FASTENERS MUST BE INSTALLED THROUGH THE WOOD DECK AND INTO THE ROOF RAFTERS AT LEAST 1" (25 mm).
- H. FOR UL-90 APPROVALS UNDER SELECT METAL ROOF SYSTEMS, FM APPROVED TRUSS HEAD FASTENERS AND 2" (51 mm) DIAMETER PLATES ARE REQUIRED.

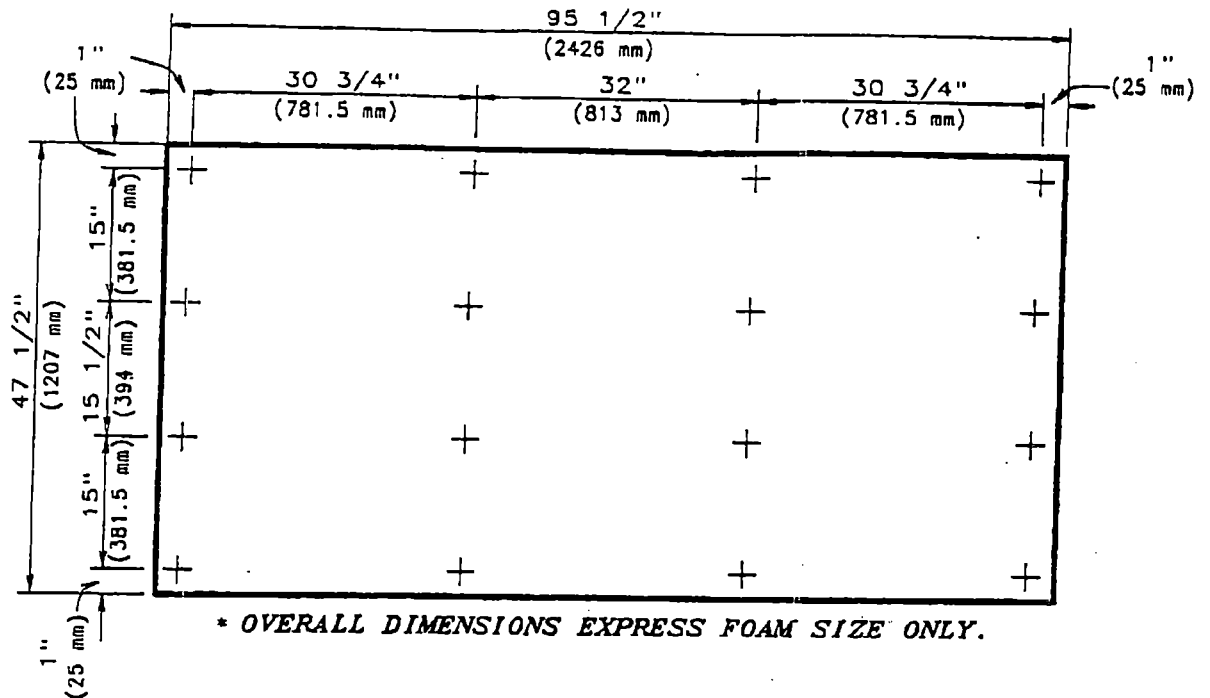
ROOF INSULATION SYSTEM

NAILBOARD FASTENING PATTERN N-2



DECK TYPES: -WOOD W/16" (406 mm) OR 32"
 -(813 mm) O.C. FRAME
 -CONCRETE

ROOF TYPES: -SHINGLES, SLATE, TILE
 -STANDING SEAM METAL



IMPORTANT NOTES

- A. THIS FASTENING PATTERN MEETS FM 1-60 & 1-90 REQUIREMENTS.
- B. NAILBOARD MUST BE INSTALLED ON A STRUCTURAL DECK, DO NOT INSTALL DIRECTLY TO FRAMING.
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ROOF INSULATION SYSTEM

NAILBOARD FASTENING PATTERN N-2



DECK TYPES: -WOOD W/16" (406 mm) OR 32"
 -(813 mm) O.C. FRAME
 -CONCRETE

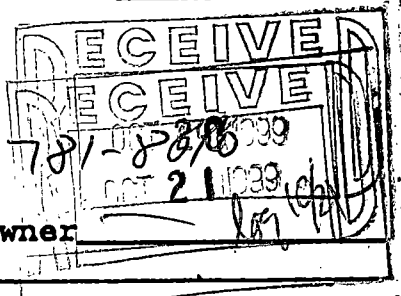
ROOF TYPES: -SHINGLES, SLATE, TILE
 -STANDING SEAM METAL

Bldg. Pmt# 4740
11/17/99

Town of Sewall's Point

Date 10-18-99

BUILDING PERMIT APPLICATION



Owner's Name: GARY GRIFFIS Phone No. 781-8876
Owner's Present Address: 140 S. SEWALLS PT. RD.
Fee Simple Titleholder's Name & Address if other than owner _____

Location of Job Site: 140 S. SEWALLS PT. RD.
TYPE OF WORK TO BE DONE: REMOVE FLAT ROOF, REPLACE W/ PITCH ROOF - REPLACE WOOD DECK, ADD TO TOP OF SEAWALL, RE-ROOF 2nd - 15th FLOOR
Contractor/Company Name: MASTER PLAN BLDG. INC. Phone No. 781-7719
COMPLETE MAILING ADDRESS: 6630 SW GATOR TRL. PALM CITY FL. 34980
State Registration RB0065383 State License _____
Legal Description of Property LOT # ONE THE ARCHIPELAGO S/D
Parcel Number 13-38-41-001-000-00011.30000

ARCHITECT/ENGINEER INFORMATION

Architect KELLY & KELLY ARCHITECTS Phone No. 783-3492
Address 119 W. 6th ST. STUART FL.

Engineer _____ Phone No. _____
Address _____

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

FLOOD HAZARD INFORMATION

flood zone _____ minimum Base Flood Elevation (BFE) _____ NGVD
proposed finish floor elevation _____ NGVD (minimum 1 foot above BFE)
Cost of construction or Improvement 22,000
Fair Market Value (FMV) prior to improvement 147,400
Substantial Improvement 50% of FMV yes _____ No
Method of determining FMV V SAA FLOOD INS. POLICY

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

Electrical SIROIS ELEC. SERV. State License ER 12325
Mechanical _____ State License# _____
Plumbing _____ State License# _____
Roofing PACIFIC ROOFING State License# CCC 056793

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

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

OWNER/ CONTRACTOR MUST SIGN APPLICATION

OWNER or AGENT SIGNATURE [Signature]
Sworn to and subscribed before me this 22nd day of October, 1999 by J. Shavelin who is personally known to me or has produced or has produced Fl. & I. and who did (did not) take an oath.

CONTRACTOR SIGNATURE _____
Sworn to and subscribed before me this _____ day of _____, 1998 by _____ who is personally known to me or has produced _____ and who did (did not) take an oath.



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

[Signature]

TREE REMOVAL (Attach sealed survey)

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

1. ALL APPLICATIONS REQUIRE :

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

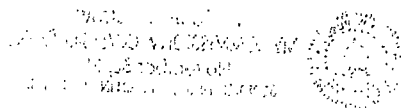
ADDITIONAL Required Documents are:

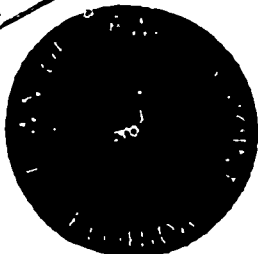
1. Use Permit (for driveway connection to public Right of Way). Return form with plot plan showing driveway location (Atlantic Ave. only).
2. Well Permit or information on existing well & pump.
3. Flood Hazard Elevation (if applicable).
4. Energy Code Compliance Certification plus any Approved Forms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

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

Approved by Building Official _____

Approved by Town Engineer _____





1998 - 1999
Town of Sewall's Point
Building Department - Inspection Log

Page 1

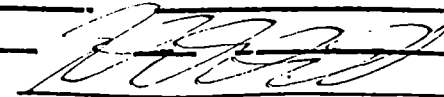
Wed.

12/8/99

PAGE 1 OF 2

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4735	Coverdale 51 N. River Rd	tin-tag metal	FAILED	SEE 12/3/INSP. REPORT. CONTRACTOR NOT ON SL.
4566	Schroeder 4 Ridgeland	final c.o. GARAGE VENT. DETECTOR/EXT. PAN	PASSED	OK FOR C.O. (RELEASE) PARTIAL C.O. RESTRICTED
4732	Tettamatti 19 Lofting Way (Hufnagel)	porch footing	PASSED	
4740	Gaffis 140 S.S.P. Rd.	clipping & strapping	PASSED	
4621	Coverdale S.L. N. River Rd.	(final) SEE T/F & MTL. INSP.	CANCEL	STOP WORK ORDER POSTED PENDING SHEATHING & DRY-IN INSP. (T/F & MTL)
4657	Foglia 102 H. Sewall Way	roof framing - FAIL roof sheathing - PASS		
4658	Foglia 103 H. Sewall Way	roof framing - RESCHED roof sheathing - PASS		

OTHER: 1. COMPLAINT RE: EXST'G DOCK @ 160 S. SEWALL'S POINT RD
 ✓ FIELD INSP.; DOCK SERVES 165 S. " " " (S OF HANOVERITA RD.)

INSPECTOR:  **DATE:** 12/8/99

**1998 - 1999
Town of Sewall's Point
Building Department - Inspection Log**

Wed, 12-29-99

PAGE 2 OF 2

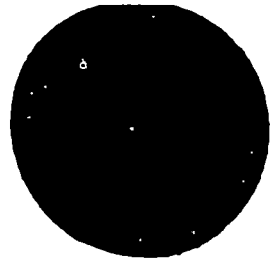
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4750	Lucido 2 Sabal Crt.	final (ck. LIST)	IN PROGRESS	PM. garage skylight cut - reinspect after house extend deadline for handrail
4740	Griffis 140 S. S.P. Rd.	plywood STRENGTH	PASSED	Pacific PM. ..
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER: _____

INSPECTOR: _____

[Signature]

DATE: 12/29/99



~~1999-2000~~ 2000

Town of Sewall's Point Building Department - Inspection Log

Fri, 1-7-00

PAGE 2 OF 2

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4740	Griffis 140 S.S.P. Rd.	tint tag, mets	CANCEL (BY CONTR.) VIA FAX	PM
X	X Ciconia 126 N. S.P. Rd.	shutter insp.	CANCEL (9)	- NO PERMIT - SUBMITTALS INCOMPLETE
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS

OTHER:

INSPECTOR: _____

DATE: 01/07/00

~~2000~~ 2000

Town of Sewall's Point
Building Department - Inspection Log

Mon, 1-10-00

PAGE 1 OF 2

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4589	DeGloia 130 N.S.P.Rd.	steel stairs	PASSED	Call on town in Jan
		DRYWALL SCREW	PASSED	(IN PROGRESS)
4690	Nohejl 2 Via Lucindia	final porch enclosure	FAILED	EXT. STAIR HANDRAIL REQUIRED. PER APPROVED PERMIT BUGS.
4657	Foglia 105 H. Sewell	framing trades	PASSED	
4756	Cicoria 126 N.S.P.Rd.	temp. meter	CANCEL (BY CONTR.)	- message 4/7 2:25 locks not ready to be
4752	Sinton 33 N. River	pool deck	FAILED	BLOWER ELECT: 337-00 NO SURVEY, COMPACTO. TESTS, SOIL TREATM
4657	105 H Sewell Way	tin tag metal	PASSED	
4740	140 S Sewall's Pt. Rd.	tin tag metal	PASSED	10:30 ✓

OTHER:

INSPECTOR:

[Signature]

DATE: 1/10/00

TO ' ' OF CE 'ALL' C POI.'T

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3-22, 2000; Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4832	COCORULLO	insulation	Passed	
(10)	20 Island Rd. WILSON BLDG.		BG	
4657	Demar Korian 19 Castle Hill	insulation		DUPLICATE - SEE PAGE 1
4740	Griffis 140 S.S.P. Rd. MASTER PLAN BLDG/REMOD	deck to ?		
4869	Digby 7 Oakwood PACIFIC REG.	sheathing	Passed BG.	
4868	Pitslukis 28 W. Hi. Pt. PACIFIC REG.	sheathing	Passed BG	
4691	Wattles 20 N. Ridgeview DRIPTWOOD - ACHW MORRIS	rough framing MUST HAVE REV. DRGS.	Passed BG.	2 ND REINSPECT; IF NOT READY/INCOMPLETE REINSPE FEE (\$30.00) NEXT CISP.

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEATTLE POLICE

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3-27-, 2000; Page 1 of 1.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
S ✓ 5 ✓ 5	4832 Cocorullo 20 Island Wilson	porch fr. drywall nailing	Passed BG.	
N ✓ 3 ✓	4867 Yorrasc 21 Periwinkle Pacific	mop inspection	Passed BG.	
S ✓ 4 ✓	4861 CARLSON 7 Kingston GLEW HUTCHINS	column steel porch	PARTIAL BG.	2 - Column Privacy Wall Cap.
N ✓ 2 ✓	4771 ENGINEERED HOMES, INC. 3 PALAMA WAY (OWNER - VAN WARDER)	ROOF NAILING	Passed BG.	Sheathing
S ✓ 6 ✓	4740 GRIFFIS 140 S. S. P. RD. 140 S. S. P. Rd. Master Plan	PORCH FTG.	Passed BG.	8 - Pads
N ✓ 1 ✓	4717 Zarro 124 N. S. P. Rd. Butford	tie-beam	PARTIAL BG.	2nd Fl.
S 4749 ✓ 7 ✓	4749 Allman 66 S. S. P. Rd. A & W Roofing	sheathing Check permit 4749	Passed BG.	as late as possible

OTHER: W.G. FOGGIA; LOS HENRY SEWALL WAY; DELIVER ELECT. HOOK-UP AGMT.
(CONTRACTORS EXECUTED COPY) ✓

INSPECTOR (Name/Signature): _____

5226

SHUTTERS

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 1/16/01

BUILDING PERMIT NO. 5226

Building to be erected for DR. GARY K. GRIFFLS

Type of Permit STORM SHUTTERS

Applied for by FOLDING SHUTTER CORP

(Contractor) Building Fee \$105.20

Subdivision ARCHIPICHAO Lot 1 Block _____

Radon Fee _____

Address 1405. SEWALL'S POINT RD

Impact Fee _____

Type of structure SPR.

A/C Fee _____

Parcel Control Number:

13-38-41-001-000-0001.1-30000

Electrical Fee _____

Plumbing Fee _____

Amount Paid \$115.72 Check # 1836 Cash _____

Other Fees (PERM) 10.52

Total Construction Cost \$ 12,000.00

TOTAL Fees \$115.72

Signed [Signature]
Applicant

Signed [Signature]
Town Building Inspector OFFICER

BUILDING PERMIT

FORM BOARD SURVEY	DATE _____	SHEATHING	DATE _____
COMPACTION TESTS	DATE _____	FRAMING	DATE _____
GROUND ROUGH	DATE _____	INSULATION	DATE _____
SOIL POISONING	DATE _____	ROOF DRY-IN	DATE _____
FOOTINGS / PIERS	DATE _____	ROOF FINAL	DATE _____
SLAB ON GRADE	DATE _____	METER FINAL	DATE _____
TIE-BEAMS & COLUMNS	DATE _____	AS BUILT SURVEY	DATE _____
STRAPS AND ANCHORS	DATE _____	STORM PANELS	DATE _____
DRIVEWAY	DATE _____	LANDCAPE & GRADE	DATE _____
AS-BUILT SURVEY	DATE _____	FINAL INSPECTION	DATE <u>2/2/01</u>

FLOOD ZONE _____

LOWEST HABITABLE FLOOR ELEV. _____

24 HOURS NOTICE REQUIRED FOR INSPECTIONS.

CALL 287-2455

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

MONDAY THROUGH SATURDAY

New Construction Remodel Addition Demolition

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

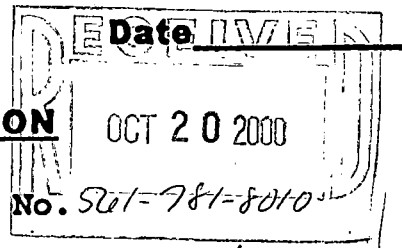
FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT,

NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.

DO NOT FAULT IN THIS OR ANY OTHER SIGN TO THE EFFECT

Bldg. Pmt# _____

Town of Sewall's Point



BUILDING PERMIT APPLICATION

Owner's Name: Dr Gary K. Griffis Phone No. 561-781-8010
Owner's Present Address: 140 S. Sewalls Point Rd
Fee Simple Titleholder's Name & Address if other than owner N/A

Location of Job Site: 140 S Sewalls Point Rd
TYPE OF WORK TO BE DONE: Install 8 Folding Shutters

CONTRACTOR INFORMATION

Contractor/Company Name: Folding Shutter Corp Phone No. 561-683-4811
COMPLETE MAILING ADDRESS 7089 Hem Street Place W.P.B. FL 33413
State Registration U-10525 State License U-10525
Legal Description of Property Archipe Ca 90 Lot 1
Parcel Number 13-38-41-001-000-0001.1-3000

ARCHITECT/ENGINEER INFORMATION

Architect Al Farooq Phone No. 305-264-8100
Address 1235 SW 87th Ave Miami, FL 33174
Engineer same Phone No. _____
Address _____

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

FLOOD HAZARD INFORMATION

flood zone _____ minimum Base Flood Elevation (BFE) _____ NGVD
proposed finish floor elevation _____ NGVD (minimum 1 foot above BFE)
Cost of construction or Improvement _____
Fair Market Value (FMV) prior to improvement _____
Substantial Improvement 50% of FMV yes _____ No _____
Method of determining FMV _____

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

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

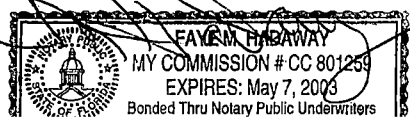
Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standard of all laws regulating construction in this jurisdiction. I understand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

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

OWNER/ CONTRACTOR MUST SIGN APPLICATION

OWNER or AGENT SIGNATURE _____
Sworn to and subscribed before me this 6 day of Oct, 2000 by
Kevin R. Hemstreet, V.P. who is personally known to me or has produced or has
produced _____ and who did (did not) take an oath.

CONTRACTOR SIGNATURE _____
Sworn to and subscribed before me this 6 day of Oct, 2000
by Kevin R. Hemstreet, V.P. who is personally known to me or has produced
and who did (did not) take an oath.



TREE REMOVAL (Attach sealed survey)
No. of trees to be removed _____ No. to be retained _____ No. to be planted _____
Specimen tree removed _____ Fee _____ Authorized/Date _____
DEVELOPMENT ORDER # _____

1. ALL APPLICATIONS REQUIRE:

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

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

ADDITIONAL Required Documents are:

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

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

Approved by Building Official _____

Approved by Town Engineer _____

PRODUCER

SLATON INSURANCE
P.O. Box 3857
West Palm Beach FL 33402

Helen Martinson
Phone No. 561-683-8383 Fax No. 561-684-5995

INSURED

Folding Shutter Corporation
7089 Hemstreet Place
West Palm Beach FL 33413

permitted
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 Auto-Owners Insurance Company

COMPANY B F C C I

COMPANY

COMPANY D *uc/105*

RECEIVED
MAR 30 2000
BY: *[Signature]*

COPY FILE

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIODS 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	20518196	05/22/00	01/01/01	GENERAL AGGREGATE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COM/POP AGG \$ 1,000,000
	<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
<input checked="" type="checkbox"/> Employee Benefit					FIRE DAMAGE (Any one fire) \$ 50,000
					MED EXP (Any one person) \$ 5,000
	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				
	<input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY:
					EACH ACCIDENT \$
					AGGREGATE \$
A	EXCESS LIABILITY	71584721 952112	05/22/00	01/01/01	EACH OCCURRENCE \$ 5,000,000
	<input checked="" type="checkbox"/> UMBRELLA FORM				AGGREGATE \$ 5,000,000
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WC99A42604	04/01/00	01/01/01	WC STATUTORY LIMITS
	<input checked="" type="checkbox"/> INCL				OTHER
	<input type="checkbox"/> EXCL				
	OTHER				EL EACH ACCIDENT \$ 500,000
					EL DISEASE - POLICY LIMIT \$ 500,000
					EL DISEASE - EA EMPLOYEE \$ 500,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
*STATE OF FLORIDA REQUIRES 30 DAYS NOTICE OF CANCELLATION FOR WORKERS COMPENSATION FLORIDA EMPLOYEES ONLY.

FAX: 561-334-5232

CERTIFICATE HOLDER

TOWNSEW

TOWN OF SEWALLS POINT
1 SOUTH S.P. ROAD
SEWALL POINT 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

[Signature]

ACORD CORPORATION 1988

MARTIN COUNTY CONTRACTORS
CERTIFICATE OF COMPETENCY
HEMSTREET, KEVIN R
FOLDING SHUTTER CORP
7069 HEMSTREET PL
WPB FL 33413

EXPIRES SEPTEMBER 30, 20

00

AUDIT
CONTROL
NUMBER

36369

CERTIFICATE NUMBER

SP00839

CERTIFIED
CONTRACTOR

ALUMINUM/CONCRETE CONTRACTOR

SIGNATURE _____

VALERIE A. MESSIER

ATTEST: _____

LICENSING ADMINISTRATOR

7847

COPY

FILE

Permit

FILE

RECEIVED
JAN. 15 2001
BY: *[Signature]*

MARTIN COUNTY ORIGINAL
2000 COUNTY OCCUPATIONAL LICENSE 2001
Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34986
(888) 288-5604

LICENSE 1975 550 239 CERT _____
PHONE 820 300 3000 SIC NO 3300
LOCATION: 7029 HEM ST

CHARACTER COUNTS IN MARTIN COUNTY

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



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

SHUTTER CORP
HEMSTREET
HEMSTREET CORP
WEST PALM BCH FL 33413

12 DAY OF SEPTEMBER, 20 00
AND ENDING SEPTEMBER 20, 2001



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

Madden Manufacturing
1889 NW 22nd Street
Pampano Beach, FL. 33069

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:

0.063" Aluminum Storm Panel Shutter

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 approval shall not be valid after the expiration date stated below. BCCO 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, 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 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.: 98-1110.04

Expires: 05/08/2003

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 Dade County, Florida under the conditions set forth above.

1/12/01 TOWN OF SEWELL'S POINT

REVIEWED:
BLDG OFFICIAL

Francisco J. Quintana, R.A.
Director

FILE TOWN COPY
1405 SEWELL'S POINT RD

Miami-Dade County
Building Code Compliance Office

Approved: 05/20/1999

PN 5226



Madden Manufacturing Co.

ACCEPTANCE No. : 98-1110.04

APPROVED : MAY 20 1999

EXPIRES : May 8, 2003

NOTICE OF ACCEPTANCE: SPECIFIC CONDITIONS

1. SCOPE

This revises and renews the Notice of Acceptance No. 96-0520.03, which was issued on May 8, 1997. It approves an Aluminum Storm Panel Shutter, as described in Section 2 of this Notice of Acceptance, designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County, for the locations where the pressure requirements, as determined by SFBC Chapter 23, do not exceed the Design Pressure Rating values indicated in the approved drawings.

2. PRODUCT DESCRIPTION

This Aluminum Storm Panel Shutter and its components shall be constructed in strict compliance with the following documents: Drawing No. 96-88, titled "0.063" Aluminum Storm Panel", prepared by Knezevich & Associates, Inc., dated April 22, 1996, last revision #3 dated March 4, 1999, sheets 1 through 8 of 8; bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division. These documents shall hereinafter be referred to as the approved drawings.

3. LIMITATIONS

All permanent set components, included but not limited to embedded anchor bolts, threaded cones, metal shields, headers and sills, must be protected against corrosion, contamination and damage at all times.

4. INSTALLATION

This Aluminum Storm Panel Shutter and its components shall be installed in strict compliance with the approved drawings.

5. LABELING

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

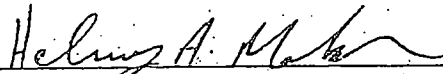
6. BUILDING PERMIT REQUIREMENTS

6.1 Application for building permit shall be accompanied by copies of the following:

6.1.1 This Notice of Acceptance.

6.1.2 Duplicate copies of the approved drawings, as identified in Section 2 of this Notice of Acceptance, clearly marked to show the components selected for the proposed installation.

6.1.3 Any other documents required by the Building Official or the South Florida Building Code (SFBC) in order to properly evaluate the installation of this system.


Helmy A. Makar, P.E. - Product Control Examiner
Product Control Division

Madden Manufacturing Co.

ACCEPTANCE No. : 98-1110.04

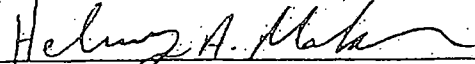
APPROVED : MAY 20 1999

EXPIRES : May 8, 2003

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 documents, 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 time. The engineer needs not reseal the copies.
8. Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
9. This Notice of Acceptance consists of pages 1, 2 and this last page 3.

END OF THIS ACCEPTANCE

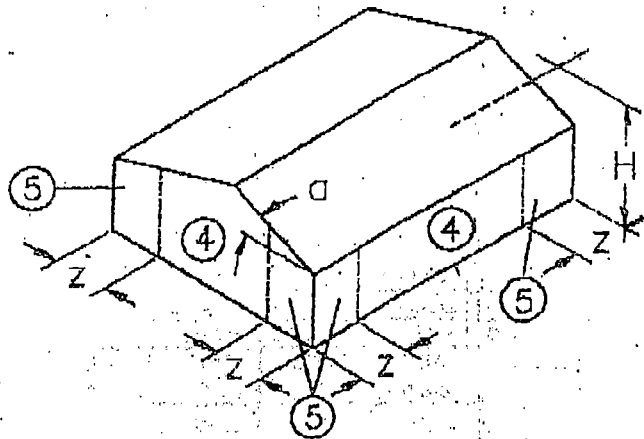


Helmy A. Makar, P.E. - Product Control Examiner
Product Control Division

TABLE 6.02 (WALLS)
WIND LOAD TABLES FOR COMPONENTS & CLADDING
PER ASCE 7-95 9-98
WIND SPEED (MPH) 140
TRIBUTARY AREA (SF) 20
(GCp) FACTOR NOT INCLUDED)
MEAN ROOF HEIGHT LESS THAN 90 FT.
DESIGN LOADS (PSF) EXPOSURE C

MEAN ROOF HEIGHT (H)	ROOF SLOPE > 10 DEG.			ROOF SLOPE ≤ 10 DEG.		
	ZONE 4 & 5	ZONE 4	ZONE 5	ZONE 4 & 5	ZONE 4	ZONE 5
	(+)	(-)	(-)	(+)	(-)	(-)
15	40.4	44.8	55.2	38.3	40.2	49.7
20	42.8	47.3	58.4	39.5	42.5	52.6
25	44.7	61.8	61.0	40.2	46.9	54.9
30	46.6	61.5	63.6	41.9	46.3	57.3
36	48.0	53.1	65.6	43.2	47.7	60.0
40	49.4	54.5	67.5	44.5	49.2	60.8
45	50.8	58.2	69.5	45.8	50.6	62.5
50	51.8	57.3	70.8	46.5	51.5	63.7
55	52.7	58.3	72.1	47.5	52.5	64.8
60	53.7	59.4	73.3	48.3	53.4	66.0
65	54.6	60.4	74.6	49.2	54.4	67.2
70	55.6	61.5	75.9	50.0	55.3	68.4
75	56.5	62.5	77.2	50.9	56.3	69.5
80	57.5	63.6	78.5	51.7	57.2	70.7
85	58.4	64.6	79.8	52.6	58.1	71.9
89	58.8	65.0	80.4	52.9	58.5	72.3

IMPORTANCE FACTOR: 1.00
LOAD TABLE BASED ON ASCE 7-95



NOTES:

1. PLUS & MINUS SIGNS SIGNIFY PRESSURES ACTING TOWARD AND AWAY FROM SURFACES RESPECTFULLY.
2. Z = 10% OF MINIMUM WIDTH OR 0.4H, WHICHEVER IS SMALLER, BUT NOT LESS THAN 4% OF MINIMUM WIDTH OR 3R.
3. LOADS, POSITIVE AND NEGATIVE, ARE TAKEN AT MEAN ROOF HEIGHT (H) AND APPLY TO ALL FLOORS.
4. LOADS BETWEEN ELEVATIONS SHOWN IN TABLE MAY BE INTERPOLATED.
5. AT MEAN ROOF HEIGHT (H), 60 ft ≤ H < 90 ft, PRESSURES HAVE BEEN DETERMINED USING THE SAME METHOD AS FOR 60 ft & LESS PER ASCE 7-95, TABLE 6.1. THESE PRESSURES ARE ONLY APPLICABLE IF THE HEIGHT TO WIDTH RATIO IS 1 OR LESS, THE BUILDING IS NOT LOCATED WITHIN THE COASTAL ZONE AREA & EXPOSURE "C" IS APPLICABLE FOR ALL TERRAIN.
6. TABLE VALUES DO NOT CONSIDER EFFECTS FROM TOPOGRAPHIC CONDITIONS.
7. FACTOR Kz FOR TOPOGRAPHIC CONDITIONS IS TAKEN AS 1.0 (FLAT GRADE) FOR THESE TABLES. IF TOPOGRAPHIC CONDITIONS ARE NOT FLAT, THE VALUES IN THIS TABLE MUST BE MULTIPLIED BY THE PROPER Kz FACTOR. IN ACCORDANCE WITH ASCE 7-95, SECTION 6.5.3.

DEC 20 2000

W. W. SCHAEFER ENGINEERING & CONSULTING, P.A.
800 SANDTREE DRIVE, SUITE 203-B
PALM BEACH GARDENS, FL 33403
(561) 775-4902

WARREN W. SCHAEFER, P.E.
STRUCTURAL ENGINEER
FLORIDA REG. #PE0027135

DR. G. KIFIAS 1040 S. SEWALLS RT. N.U.

PANELS 96-88 (PRINT #)

UNIT NO.	WALL PRESSURE INTER/ END ZONE	OPENING SIZE W X H	SHUTTER WIDTH	SHUTTER HEIGHT	SHUTTER SPAN	STORM BARS REQ'D	ANCHOR SPACING		HEADER REIN REQ'D Y/N	SEC/ PAGE
							TOP	BOTTOM		
1	58.4	129 3/4 24	135	29	28 1/4	N/A	12 12	N	H PG 2	
2	58.4	209 /48	213	53	52 1/4	N/A	12 12	N	H PG 2	
3	58.4	96 /48	101 1/4	53	52 1/4	N/A	12 12	N	H PG 2	
4	58.4	126 /48	135	53	52 1/4	N/A	12 12	N	H PG 2	
5	58.4	373 /83	381	88	87 1/4	N/A	12 12	N	H PG 2	

FOLDING SHUTTER CORP. ENGINEERING LAYOUT SHEET

CUSTOMER NAME

GRIFFIS

WORK ORDER NO.

041300034

SHEET

OF

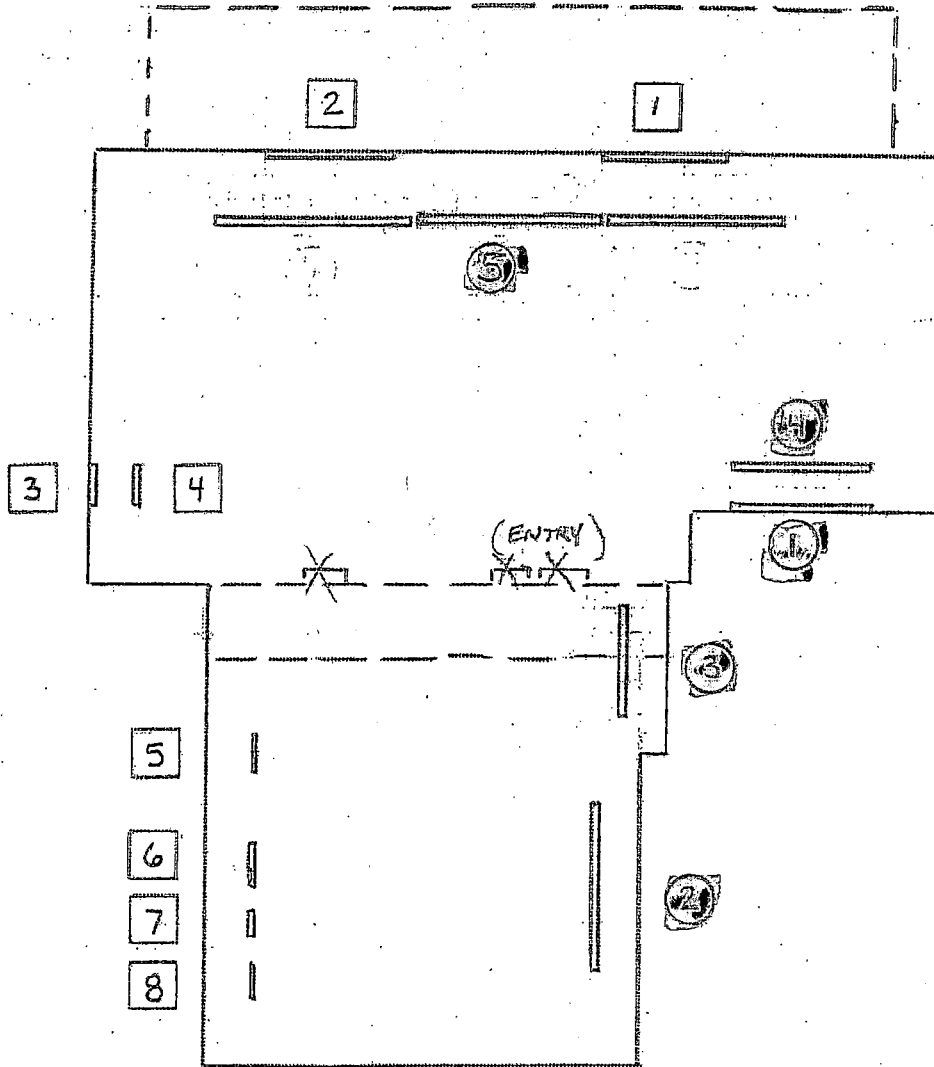
BY:

TB

DATE:

8 16 00

LAYOUT



20' > 10°

8 FOLDING

5 PANELS



BUILDING CODE COMPLIANCE OFFICE
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 100
MIAMI, FLORIDA 33130-15
(305) 375-2900
FAX (305) 375-2900

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Folding Shutter Corporation
7089 Hemstreet Place
West Palm Bch FL 33413

PRODUCT CONTROL DIVISION
(305) 375-2900
FAX (305) 372-6300

Your application for Product Approval of:
"Titan II" Aluminum Accordion Shutter

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 the Applicant, along with *Folding Shutter Corp. Drawing No. 94-63 sheets 1 through 5 of 5, dated 08/25/94, revision E dated 03/19/98, signed and sealed on 03/21/98 by Humayoun Farooq, P.E.*

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 amendments to the South Florida Building Code be enacted affecting this product or material. The Building Code Compliance Office reserves the right to revoke this approval, if it is determined by the Building Code Compliance Office that this product or material fails to meet the requirements of the South Florida Building Code. The expense of such testing will be incurred by the manufacturer.

Acceptance No.: 96-1112.02

Expires: 04/09/01

Raul Rodriguez
Product Control Supervisor

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

BUILDING CODE COMMITTEE

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

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

Approved: 04/09/98



FOLDING SHUTTERS PRINT #94-63

UNIT NO.	WALL PRESSURE -INTERT END ZONE	OPENING SIZE W X H	SHUTTER WIDTH	SHUTTER HEIGHT	SHUTTER SPAN	STORM BARS REQ'D	ANCHOR SPACING		HEADER REIN REQ'D Y/N	SEC / PAGE
							TOP	BOTTOM		
1	58.4	78 1/2 / 79 1/2	87	85	81 3/4	N/A	18 6	N	c/c/2	
2	58.4	78 1/2 / 79 1/2	87	85	81 3/4	N/A	18 6	N	c/c/2	
3	58.4	36 1/2 / 36 1/2	52 1/2	44 1/2	44 1/4	N/A	12 12	N	c/c/2	
4	58.4	36 1/2 / 27	52 1/2	35	31 3/4	N/A	12 12	N	c/c/2	
5	58.4	48 / 36	64	41	37 3/4	N/A	12 12	N	c/c/2	
6	58.4	48 / 36	64	41	37 3/4	N/A	12 12	N	c/c/2	
7	58.4	17 / 36	29 1/2	41	37 3/4	N/A	12 12	N	c/c/2	
8	58.4	17 / 36	29 1/2	41	37 3/4	N/A	12 12	N	c/c/2	

FOLDING SHUTTER CORP. ENGINEERING LAYOUT SHEET

CUSTOMER NAME

GRIFFIS

WORK ORDER NO.

041300034

SHEET

OF

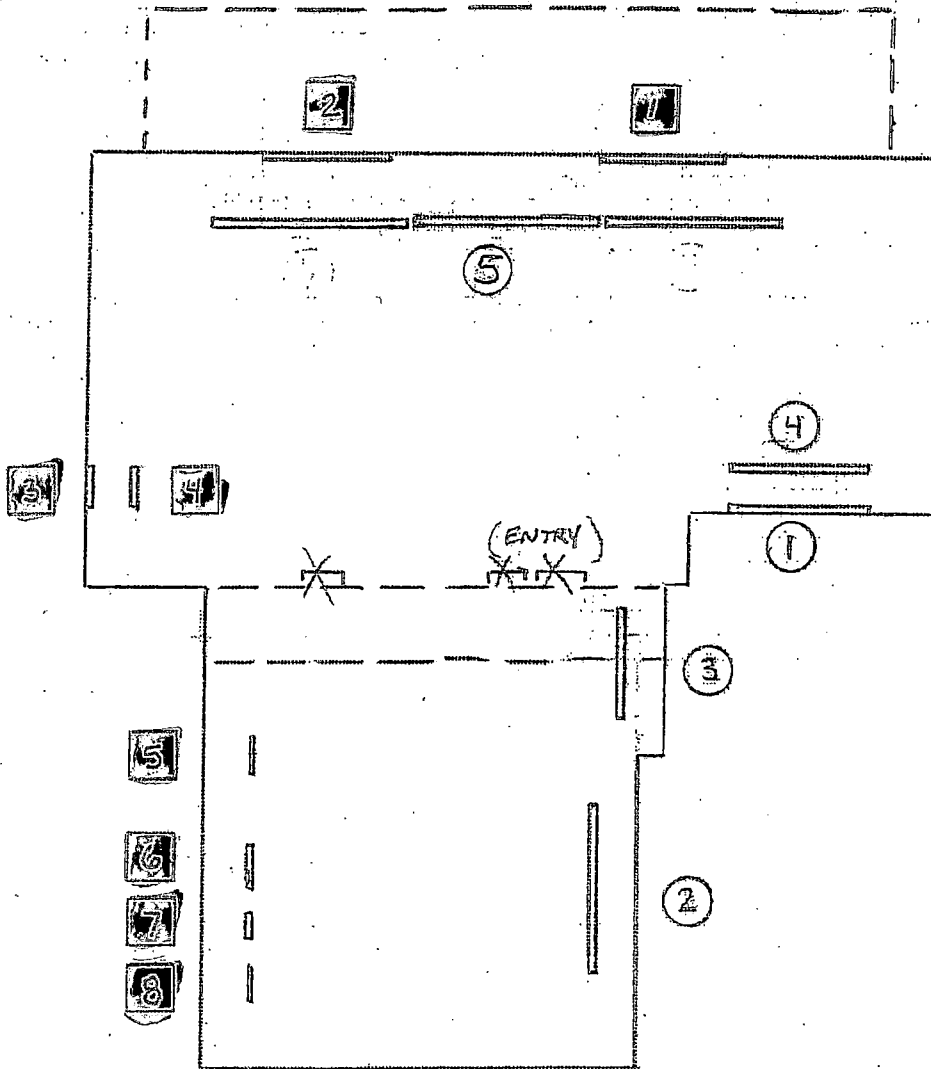
BY:

TB

DATE:

8 16 00

LAYOUT



20' > 10°

8 FOLDING

5 PANELS

PRODUCTS MANUFACTURED
Titan Folding Shutters
Roll-A-Flex Rolling Shutters
Nassau Bahama Shutters
Cape Cod Colonial Shutters
Titan Removable Storm Panels



FL Lauderdale to
Delray Beach
(954) 427-8009
Stuart
(561) 286-2633
Fax
(561) 640-6204

"THE INDUSTRY LEADER SINCE 1969"

HOME OFFICE 7089 HEMSTREET PLACE WEST PALM BEACH, FL 33413 TEL: (561) 683-4811

FACSIMILE MESSAGE

DATE OF TRANSMITTAL: 1/15/2001

RECEIVED
JAN 15 2001
BY: _____

SENDER'S NAME: DAN CARLSON

PLEASE DELIVER THE ACCOMPANYING MATERIAL TO:

NAME: ED ARNOLD

COMPANY: Sewalls Point

CITY: _____ STATE: _____

PHONE: _____ FAX: _____

TOTAL NUMBER OF PAGES, INCLUDING THIS TRANSMITTAL LETTER: 2

COMMENTS: PLS FIND A COPY OF OUR MARTIN
COUNTY LICENSE. THE TOTAL PRICE
OF MR. GRIFFIS Job is \$12,024 (140 Sewalls
Point ROAD SOUTH) Thanks
Dan

Please call immediately if any pages were not received or if sent to you in error. (561)683-4811.

PRODUCTS MANUFACTURED
Titan Folding Shutters
Roll-A-Flex Rolling Shutters
Nassau Bahama Shutters
Cape Cod Colonial Shutters
Titan Removable Storm Panels

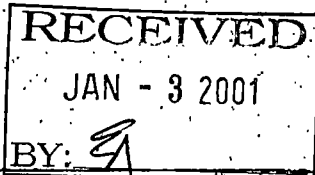


Ft. Lauderdale to
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"THE INDUSTRY LEADER SINCE 1969"

HOME OFFICE 7089 HEMSTREET PLACE WEST PALM BEACH, FL 33413 TEL. (561) 683-4811

FACSIMILE MESSAGE



DATE OF TRANSMITTAL: JAN 2, 2001

SENDER'S NAME: DAN CARLSON

FILE
*pending
appl.*

PLEASE DELIVER THE ACCOMPANYING MATERIAL TO:

NAME: ED ARNOLD

COMPANY: TOWN of Sewall's POINT

CITY: _____ STATE: _____

PHONE: 561-287-2455 FAX: 561-220-4765

TOTAL NUMBER OF PAGES, INCLUDING THIS TRANSMITTAL LETTER: 4

COMMENTS: THIS IS THE INFO THAT IS NEEDED
TO COMPLETE MR. GRIFFIS PERMIT APPLICATIONS.

THANKS FOR YOUR HELP

Dan Carlson

Please call immediately if any pages were not received or if sent to you in error. (561)683-4811.

PERMIT # _____

TAX FOLIO # 13-38-41-001-000-000.1-3-
0000

NOTICE OF COMMENCEMENT

STATE OF FLORIDA

COUNTY OF MARTIN

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

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

Archipelago Lot 1

GENERAL DESCRIPTION OF IMPROVEMENT: HURRICANE SHUTTERS

OWNER: DR. GARY K. GRIFFIS

ADDRESS: 140 S. SEWALLS PT ROAD STUART, FL 34996-6300

PHONE #: (861) 781-8010

FAX #: (861) 288-5840

CONTRACTOR: Folding Shutters Corp

ADDRESS: 7089 Hemstreet PLACE, WPB, FL 33413

PHONE #: 689-4811

FAX #: 640-8204

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE # _____

FAX #: _____

BOND AMOUNT: _____

STATE OF FLORIDA
MARTIN COUNTY

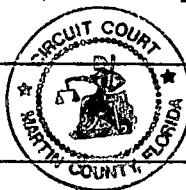
THIS IS TO CERTIFY THAT THE
FOREGOING _____ PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.

LENDER: _____

MARSHA STILLER, CLERK

ADDRESS: _____

BY [Signature] D.C.
DATE 7-7-00



PHONE #: _____

FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

IN ADDITION TO HIMSELF, OWNER DESIGNATES _____

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

PHONE #: _____

FAX #: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____

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

SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 27 DAY OF June
192000 BY Gary Griffis

NOTARY SIGNATURE



ANTHONY TERCEIRA
My Comm Exp. 2/05/2001
Bonded By Service Inc
No. C0619275
1 Person

PERSONALLY KNOWN _____
OR PRODUCED ID _____
TYPE OF ID _____

TOWN OF E. FALLS POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/9/01, 2000 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
V S ⑨	5013 DENNIS 16 RINGELAND FL. FINEST (RON)	PTL. ROOF (DRY-IN)	Passed	J 2/9
	Dennison 49 W. Hi. Pe. Rd.	pl. & et. CANCEL		w/call re: time
V S ⑫	5079 KOHLER 19 S. VIA LUCINDIA OIB	FINAL - WINDOW REPL. GSD (2)	Passed	J 2/9
V S ④	4978 RIMER 29 S. RIVER RD.	1ST FLOOR COLUMNS ENTRY SLAB STEPS - STEPS TO GARAGE	Passed 12" + 7"	J 2/9
V N ③	5122 KEARNY 12 N. RIVER RD. PARKER	ROUGH PLUMBING (POOL)	Passed	J 2/9
V S ⑩	5226 GRIFFIS 140 S. SEWALLS PARK FOLDING SHUTTER	FINAL - SHUTTER INSP.	No body home no panels installed Reinspect no fee	J 2/9
V S ⑤	5251 INNES 113 HILLCREST PACIFIC	SHEATHING Td. + w/olal		J 2/9

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri FEB. 19, , 2001; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5075	Vasquez	Lath	Failed	need to be nailed
⑧	82 S. Sewalls Pt. GROZA			not stepped 2/19 INSPECTOR: [Signature]
5246	Griffith	Shutters	roll over	to 2/19
⑨	145 S. Sewalls Pt. Folding Shutters		(roll out of line)	INSPECTOR:
T/R	Muro	Tree	Passed.	reinspection
⑩	13 S. River Rd. Harry Blue			w. Commissioner INSPECTOR: [Signature] 2/19
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

TOWN OF CECIL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ~~FEB. 21~~, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
S ✓ 5269	DANIELSON 161 S. RIVER RD. PACIFIC RFG.	SHEATHING (RESCHEDULE 2/19)	Passed	RE ROOF EXST'G. SFR. 2670116 Rob INSPECTOR: [Signature]
S ✓ 5226	GRIFFITH 140 S. SEAWALLS DR.	STORM SHUTTERS FOLDING SHUTTER	Passed	(ROLLOVER FROM 2/19) INSPECTOR: [Signature] 2/21
S ✓ T/R 4	NICHOLS 17 PALMETTO DR. MONTE'S TREE SERVICE	FINAL INSPECTION FIBER VERIFICATION	Passed	tree effects scr. encl. INSPECTOR: [Signature] 2/21
S ✓ 5273	LIBITSKY PN5260 3 RIO VISTA DR. A+W	IN PROGRESS (SIDING REPLACEMENT)	TT+Metal Passed IN PROGR. Passed	INSPECTOR: [Signature] 2/21
S X 5230	DENNISON 49 W HIGHPOINT 018 223-5945 X1155	INSULATION CANCEL BY OWNER 2/21 7:20 AM.	X	INSPECTOR:
S ✓ 5063	ROBINSON 173 S. RIVER RD. DRIFTWOOD	TIE BEAM 2nd Floor	Passed	INSPECTOR: [Signature] 2/21
S X 5209	TRANOR 9 MIDDLE RD. PACIFIC	FINAL-ROOF CANCEL CONTR. TO OFFICE	X	- NO RFG. PROP. SUBMITTAL - ATTEMPTING INSPECTOR: [Signature] 2/21

OTHER: _____

metal passed
flat = in prog → Friday

5683

BOATLIFT

TOWN OF SEWALL'S POINT

Date 2/19/02

BUILDING PERMIT NO. 5683

Building to be erected for ROBERT BEDELL

Type of Permit BOAT LIFT.

Applied for by J & B. BOAT LIFT.

(Contractor) Building Fee BOAT LIFT 67.20 X (2) 134.40.

Subdivision ARCHIPELAGO. Lot 1 Block DOUBLE FEE FOR WORK WITHOUT PERMIT.

Radon Fee _____

Address 140 S. SEWALLS PT. RD.

Impact Fee _____

Type of structure SFL

A/C Fee _____

Parcel Control Number:

133841001000000113000

Amount Paid ~~7000.00~~ ^{14790.00} Check # 2968 Cash _____

Other Fees (PLAN REV) 13.50

Total Construction Cost \$ 7000.00

TOTAL Fees 147.90

Signed [Signature]
Applicant

Signed [Signature]
Town Building Inspector
OFFICIAL

PERMIT

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

INSPECTIONS

- | | | | |
|-----------------------------|-------|------------------------|----------------|
| UNDERGROUND PLUMBING | _____ | UNDERGROUND GAS | _____ |
| UNDERGROUND MECHANICAL | _____ | UNDERGROUND ELECTRICAL | _____ |
| STEMWALL FOOTING | _____ | FOOTING | _____ |
| SLAB | _____ | TIE BEAM/COLUMNS | _____ |
| ROOF SHEATHING | _____ | WALL SHEATHING | _____ |
| TRUSS ENG/WINDOW/DOOR BUCKS | _____ | LATH | _____ |
| ROOF TIN TAG/METAL | _____ | ROOF-IN-PROGRESS | _____ |
| PLUMBING ROUGH-IN | _____ | ELECTRICAL ROUGH-IN | _____ |
| MECHANICAL ROUGH-IN | _____ | GAS ROUGH-IN | _____ |
| FRAMING | _____ | EARLY POWER RELEASE | _____ |
| FINAL PLUMBING | _____ | FINAL ELECTRICAL | _____ |
| FINAL MECHANICAL | _____ | FINAL GAS | _____ |
| FINAL ROOF | _____ | BUILDING FINAL | <u>3/19/02</u> |

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Owner or Titleholder Name: Robert L. Bedell Building Permit Number:
City: Stuart State: FL Zip: 34996
Legal Description of Property: LOT 1, The Archipelago, Martin County Parcel Number: 1338410010000001130000
Location of Job Site: 140 S. Sewalls Point Road Type of Work To Be Done: Installation of Four Pilings and Boat Lift.

CONTRACTOR/Company Name: Clarene R. Curtiss (J+B Boat Lift) Phone Number: 219-0315
Street: 2614 S.W. Boat Ramp Ave City: Palm City State: FL Zip: 34990
State Registration Number: State Certification Number: Martin County License Number: SPO3098

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

ENGINEER: Baber Engineering Phone Number: 692-4910
Street: 1014 N.W. Pine Lake Drive City: Stuart State: FL Zip: 34994

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: Garage: Covered Patios: ScreenedPorch:
Carport: Total Under Roof Wood Deck: Accessory Building:
Type Sewage: Septic Tank Permit Number From Health Depart. Well Permit Number:

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

COST AND VALUES Estimated Cost of Construction or Improvements: \$7,000.00 Estimated Fair Market Value (FMV) Prior
To Improvements: If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES NO

SUBCONTRACTOR INFORMATION

Electrical: GreatHouse Electric (Rodney GreatHouse) State: License Number: ER00120000
Mechanical: State: License Number:
Plumbing: State: License Number:
Roofing: State: License Number:

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) South Florida Building Code (Structural, Mechanical, Plumbing, Gas) 1999
National Electrical Code 1999 Florida Energy Code 1997
Florida Accessibility Code 1997

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

OWNER OR AGENT SIGNATURE (Required)
State of Florida, County of: MARTIN
This the 21st day of JANUARY, 2002
by Robert L. Bedell who is personally
known to me or produced
as identification. Deborah Ann Gillen

CONTRACTOR SIGNATURE (Required) Clarene R. Curtiss
On State of Florida, County of: MARTIN
This the 21st day of JANUARY, 2002
by CLARENE R. CURTISS who is personally
known to me or produced
As identification. Deborah Ann Gillen

Notary Public
My Commission Expires:
DEBORAH ANN GILLEN
MY COMMISSION # CC 825906
EXPIRES: 04/12/2003
1-800-3-NOTARY Fla. Notary Service & Bonding Co.

Notary Public
My Commission Expires:
DEBORAH ANN GILLEN
MY COMMISSION # CC 825906
EXPIRES: 04/12/2003
1-800-3-NOTARY Fla. Notary Service & Bonding Co.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
01/15/2002

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

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

INSURERS AFFORDING COVERAGE

INSURED J&B Boat Lift & Davit Maintenance, Inc.
P. O. Box 1883
Palm City, FL 34991

INSURER A: **Scottsdale Insurance Co.**
INSURER B:
INSURER C:
INSURER D:
INSURER E:

RECEIVED

JAN 19 2002

BY:

COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	BINDERCLS0653694/01	01/14/2002	01/14/2003	EACH OCCURRENCE	\$ 300,00
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$ 50,00
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 1,00
	GEN'L AGGREGATE LIMIT APPLIES PER:				PERSONAL & ADV INJURY	\$ 300,00
<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					GENERAL AGGREGATE	\$ 300,00
					PRODUCTS - COMP/OP AGG	\$ 300,00
	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	\$
					AGG	\$
	EXCESS LIABILITY				EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
	<input type="checkbox"/> DEDUCTIBLE					\$
	RETENTION \$					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTHER
					E.L. EACH ACCIDENT	\$
					E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
	OTHER					

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

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

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

Town of Sewalls Point
1 South Sewalls Point Road
Sewalls Point, FL 34996

AUTHORIZED REPRESENTATIVE
Lee Carroll/JAD

Lee Carroll

©ACORD CORPORATION 19

**2001-2002 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE**

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34985
(888) 288-5004

LICENSE 1998-275-297 CERT _____
PHONE 15611219-0315 SIC NO 07299

LOCATION:
2614 SW BOAT RAMP AVE MAR

CHARACTER COUNTS IN MARTIN COUNTY

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

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

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

14 DAY OF AUGUST 2001
AND ENDING SEPTEMBER 30, 2002

12 01080802 000503

**CURTISS, JAMES
J & B BOAT LIFT & DAVIT MAINT/
DOCK & DECK REFINISHING
P O BOX 1863
PALM CITY FL 34991**

**2001-2002 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE**

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34985
(888) 288-5004

LICENSE 1997-290-022 CERT _____
PHONE 15611219-0315 SIC NO 07299

LOCATION:
2614 SW BOAT RAMP AVE MAR

CHARACTER COUNTS IN MARTIN COUNTY

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

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF **BOAT LIFT REPAIR/MAINTENANCE**

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

14 DAY OF AUGUST 2001
AND ENDING SEPTEMBER 30, 2002

12 01080802 000502

**CURTISS, JAMES JOHN SR
J & B BOAT LIFT & DAVIT
MAINTENANCE, INC
P O BOX 1863
PALM CITY FL 34991**



MARTIN COUNTY, FLORIDA
Construction Industry Lic Bd
Certificate of Competency

License: SP03098
Expires September 30, 2003

CURTISS, CLARENE R

J & B BOAT LIFT & DAVIT MAINT

2614 SW BOAT RAMP AVE

PALM CITY, FL 34990

MARINE CONTRACTOR

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

CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION
FROM FLORIDA WORKERS' COMPENSATION LAW

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

EFFECTIVE DATE 10/04/2000
EXPIRATION DATE 10/04/2002
EXEMPTED INDIVIDUAL NAME CURTISS CLARENE R
S.S. 264-29-5875
BUSINESS NAME J & B BOAT LIFT & DAVIT MAINTENANCE INC
FEIN 650722692
BUSINESS ADDRESS PO BOX 1883
PALM CITY FL 34991

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

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

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



CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION
FROM FLORIDA WORKERS' COMPENSATION LAW

EFFECTIVE DATE 10/04/2000
EXPIRATION DATE 10/04/2002
EXEMPTED PERSON LAST NAME CURTISS
FIRST NAME CLARENE R
SOCIAL SECURITY NUMBER 264-29-5875
BUSINESS NAME J & B BOAT LIFT & DAVIT MAINTENANCE
FEDERAL IDENTIFICATION NUMBER 650722692
BUSINESS ADDRESS PO BOX 1883
PALM CITY FL 34991

F
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D

H
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R
E

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

CUT HERE

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

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 13384100100000001130000

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 1, The Archipelago, Martin County, Plat Book 4, Page 48

GENERAL DESCRIPTION OF IMPROVEMENT: Installation of Four pilings and boat lift.

OWNER: Robert L. Bedell

ADDRESS: 140 S. Sewall's Point Road, Stuart, FL 34996

PHONE #: 219-8617

FAX #: 781-8612

CONTRACTOR: Clarene R. Curtiss (J & B Boat Lift)

ADDRESS: 2614 S.W. Boat Ramp Ave. Palm City, FL 34990

PHONE #: 219-0315

FAX #: 781-8612

SURETY COMPANY (IF ANY) _____

STATE OF FLORIDA
MARTIN COUNTY

ADDRESS: _____

THIS IS TO CERTIFY THAT THE

PHONE # _____

FAX #: _____
FOREGOING 1 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.

BOND AMOUNT: _____

MARSHA EWING, CLERK

LENDER: _____

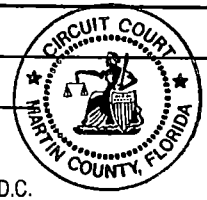
BY: [Signature] D.C.

ADDRESS: _____

DATE 1-22-02

PHONE #: _____

FAX #: _____



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

NAME: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

PHONE #: _____

FAX #: _____

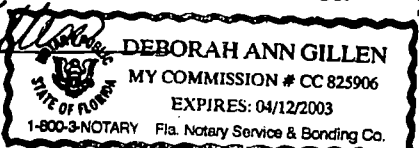
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

[Signature]
SIGNATURE OF OWNER Robert L. Bedell

SWORN TO AND SUBSCRIBED BEFORE ME THIS 21 DAY OF JANUARY 2001 BY Robert L. Bedell

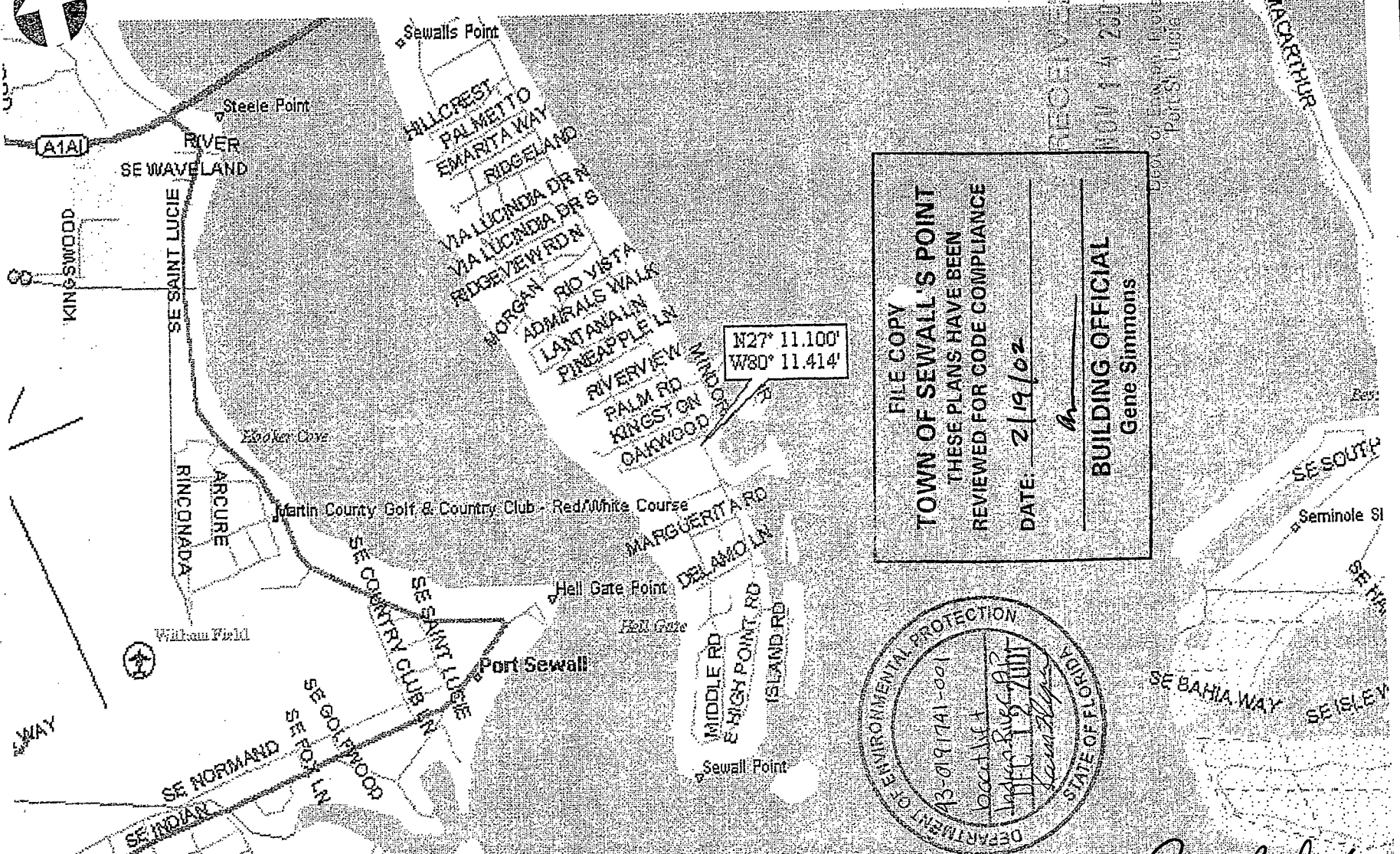
OR
PERSONALLY KNOWN
PRODUCED ID _____
TYPE OF ID _____

[Signature]
NOTARY SIGNATURE



Return To:
J & B Boat Lift
and Davit Maintenance, Inc.
P.O. Box 1883

INSTR 0 1547210 OR BK 1614 PG 0437 RECD 01/22/2002 12:20 PM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S Phoenix

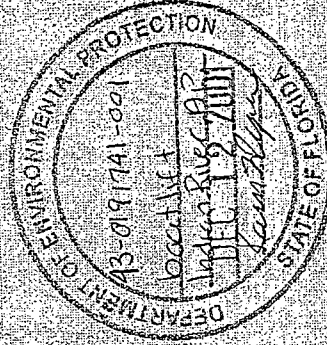


N27° 11.100'
W80° 11.414'

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 2/19/02
BUILDING OFFICIAL
Gene Simmons

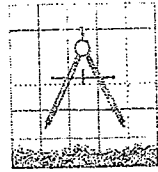
RECEIVED
NOV 14 2001

Dept. of Environ. Protection
Port St. Lucie



© 2000 DeLorme. Street Atlas USA; © 2000 GDT, Inc., Rel. 04/2000

Robert Bedell
140 S. Sewall's Point Rd.
Stuart FL.. 34996



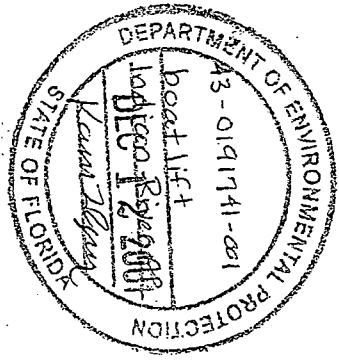
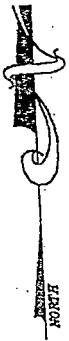
Design & Drawing by:
Jerner & Associates, Inc.
Environmental Consulting
895 NE Dixie Hwy, Suite 103
Jensen Beach, FL 34957
(561)225-1421

Robert Bedell
Scale:

Date: 11/08/01

Sheet 1 of 2

BABER ENGINEERING, INC.
1014 NW Pinelake Dr.
Stuart, FL 34994



Four 10" LIFT PILES

BAKU STREET

NORTH LINE OF LOT 4 HANSON GRANT

LOT 2

FOUND PK NAIL

FOUND 4"x4" CONCRETE MONUMENT (NO ID)

WOOD DOCK

0.7' CONC. SEAWALL

N 66°00'00" E 142.70' (M)

PLATED STEEL N 41°57'41" W

RIGHT OF WAY WATER METER E

FOUND 1/2" IRON ROD (DISTURBED)

5' UTILITY & DRAINAGE EASEMENT (O.R. BOOK 204, PG. 22)

COVERED WALK CARPORT

CONC SLAB

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

319.97' (P) 320.05' (M)

SOUTH SEWALL'S POINT ROAD S 28°12'20" E

LOT 1

PEBBLE-STONE DRIVEWAY

STEP-STONES

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

WOOD DOCK

FOUND 3/4" IRON PIPE (MATHERS & ASSOC)

FOUND 4"x4" CONCRETE MONUMENT (NO ID) 1.52' N.E., 2.84' N.W.

EDGE OF SHORE

CENTERLINE OF 13' ACCESS & EGRESS EASEMENT (O.R. BOOK 1038, PG. 849)

30' ACCESS, INGRESS AND EGRESS EASEMENT OFFICIAL RECORDS BOOK 204, PG. 22

5' UTILITY EASEMENT (O.R. BOOK 204, PG. 22)

EXISTING WELL

CONCRETE SLAB W/ FLORIDA POWER & LIGHT TRANSFORMER

FOUND 1/2" IRON ROD (DISTURBED)

SOUTH LINE OF LOT 4 HANSON GRANT

FOUND PK NAIL

WATER METER

CABLE TELE

WATER METER

Dept. of Environ. Protection
Port St. Lucie

NOV 14 2001

Roger Bailey

BOUNDARY SURVEY

LEGAL DESCRIPTION:

LOT 1, THE ARCHIPELAGO, ACCORDING TO THE PLAT THEREOF ON FILE IN THE OFFICE OF THE CLERK OF THE CIRCUIT COURT IN AND FOR MARTIN COUNTY, FLORIDA RECORDED IN PLAT BOOK 4, PAGE 48; SAID LANDS SITUATE, LYING AND BEING IN MARTIN COUNTY, FLORIDA.

SURVEYORS NOTES:

1. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS AND/OR RIGHTS OF WAY OF RECORD EXCEPT AS SHOWN ON THE RECORD PLAT IF ANY.
2. NO ATTEMPT WAS MADE BY THIS FIRM TO LOCATE UNDERGROUND FOOTINGS OF BUILDINGS OR FENCES ON OR ADJACENT TO THIS SITE.
3. BEARINGS SHOWN HEREON REFER TO AN ASSUMED MERIDIAN OF S 28°12'20" E ALONG THE NORTHEASTERLY RIGHT OF WAY LINE OF SOUTH SEWALL'S POINT ROAD.
4. THIS SITE LIES IN FLOOD ZONE AB (BASE ELEVATION 9) AS SHOWN ON FEMA MAP NO. 120164-0002-D, DATED: JUNE 16, 1992.
5. SITE AREA: 18,054.00 SQUARE FEET OR 0.4145 ACRES.
6. LEGAL DESCRIPTION FURNISHED BY CLIENT
7. LAND SHOWN HEREON WERE SURVEYED IN ACCORDANCE WITH COMMONWEALTH LAND TITLE INSURANCE COMPANY POLICY NUMBER P61472.
EXCEPTION #13: AS SHOWN OF SURVEY
EXCEPTION #15: DOES NOT AFFECT SUBJECT PROPERTY

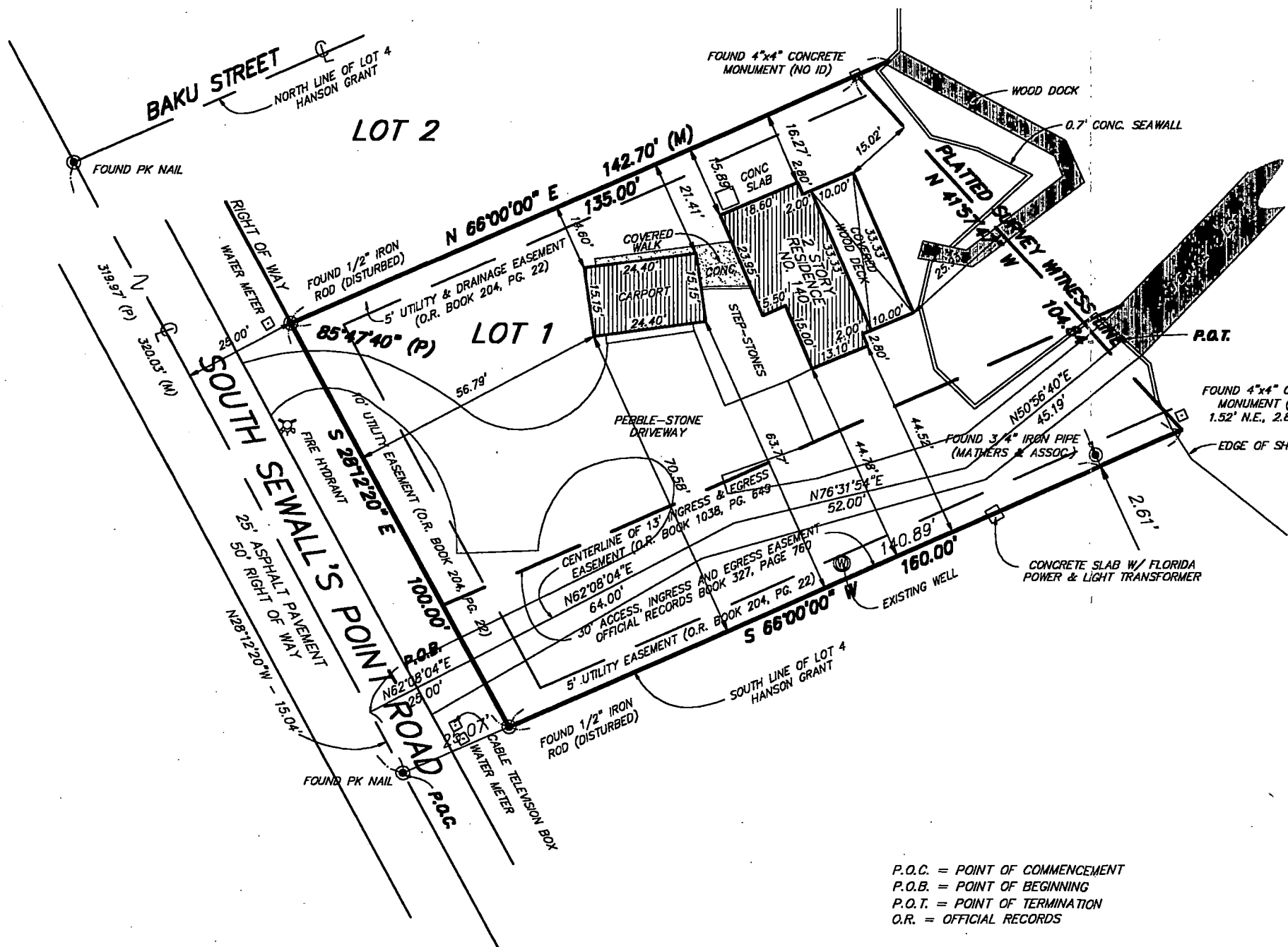
CERTIFICATION:

1. GARY K. GRIFFIS
2. HARBOR FEDERAL SAVINGS BANK, ITS SUCCESSOR'S AND/OR ASSIGNS
3. McCARTY, SUMMERS, BOBKO, McKEY, WOOD & SAWYER, P.A.
4. COMMONWEALTH LAND TITLE INSURANCE COMPANY

SURVEYORS' CERTIFICATION:

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

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



P.O.C. = POINT OF COMMENCEMENT
P.O.B. = POINT OF BEGINNING
P.O.T. = POINT OF TERMINATION
O.R. = OFFICIAL RECORDS

BLOOMSTER
PROFESSIONAL LAND
SURVEYORS, INC.

641 N.E. SPENCER STREET
JENSEN BEACH, FLORIDA 34957
PHONE 561-334-0868

SHEET 1 OF 1	
SCALE:	1" = 30'
DATE:	08-17-88
F.B.:	SKETCH
JOB NO.:	2380
REVISIONS	

PREPARED FOR: GARY K. GRIFFIS
140 SOUTH SEWALL'S POINT ROAD
SEWALL'S POINT, MARTIN COUNTY, FLORIDA

Mrs. Wm. Barry Otto
142 South Sewall's Point Road
Stuart, Florida 34996

February 7, 2002

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

Dear Sirs;

This letter is in reference to the permitting of a boatlift at 140 South Sewall's Point Road, owned by Dr. and Mrs. Rbt. Bedell.

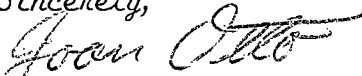
Although we were never contacted by the town on the Bedells as abutting neighbors, we maintain that we are abutting by virtue of our bridge, bottom lands and easement. If we had been contacted, we would have objected by now to the placement of the boatlift that was installed without a building permit from the town on D.E.P.

Whoever installed the lift, started 24 feet from the interior head of the boat slip to measure the 39 feet for the boat and lift. This puts the boat out to the far edge of the shoreline dock and looks to be way too large, marring our water view.

There are mangroves at the head of the boat slip, which can be mitigated, or dealt with by the D.E.P. If properly placed, the end of the boat on the lift would come to the start of our bridge, and we would have no objection.

The Bedells have not received permission from the Archipelago Home Owners Association, Inc. to construct this boatlift on the bottomlands owned by the association by virtue of a deed from Penny Boswell, the Archipelago developer, to the association. We realize that the building department does not rely on association deed restrictions to issue a building permit if all town codes have been met, but we respectfully request that this permit not be issued until we give you a letter of no objection to this project, and the fact that the lift has been built on privately owned land is resolved.

Sincerely,


(Mrs. Wm. B. Otto)

Glenn & Trena Mulcahy
138 S Sewalls Pt. Rd.
Sewalls Point, FL 34996
287-8146
2-7-2002

Gene Simmons, Bldg. Inspector
City Sewalls Point, FL

Re - Mr. Bedell's dock, 140 S Sewalls Pt. Rd.

Dear Sir,

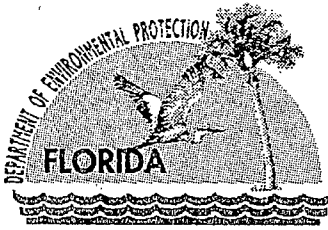
We would like to voice opposition to the location of the boat hoist at Mr. Bedell's. At its current location, when the boat is hoisted, it will block our South view of the water. We would have no objection if it were moved about 15 feet towards his boat slip.

We also would like to know, about an earlier complaint about the Boat Davits placed within 15 feet of our property line, by previous owner Mr. Griffis.

Thank you for your consideration.

Yours truly,


Glenn & Trena Mulcahy



Jeb Bush
Governor

Department of Environmental Protection

Port St. Lucie Branch Office
1801 SE Hillmoor Drive
Suite C-204
Port St. Lucie, FL 34952
(561)398-2806

David B. Struhs
Secretary

DEC 12 2001

Robert Bedell
9851 S.W. 72nd Court
Miami, FL 33156

File Number: 43-0191741-001
Martin County

Dear Mr. Bedell:

On November 14, 2001, we received your application for an exemption to perform the following activities: install a boatlift on an existing dock adjacent to the Jensen Beach to Jupiter Inlet Aquatic Preserve (O.F.W.), Class III Waters of the State, located at 140 S. Sewall's Point Road (Section 12, Township 38 South, Range 41 East), Stuart, Martin County.

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

1. Regulatory Review - EXEMPTION VERIFIED

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

Based on the information you submitted, we have determined that your project is exempt from the need to obtain a DEP Environmental Resource Permit under Rule 40E-4.051(3)(b), (F.A.C.).

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

The Department acts as staff to the Board of Trustees of the Internal Improvement Trust Fund (B.O.T.) and issues certain authorizations for the use of sovereign submerged lands. The Department has the authority to review your project under Chapters 253 and 258, F.S., Chapters 18-20 and 18-21, F.A.C., and Section 62-343.075, F.A.C.

Your project will not occur on sovereign submerged land. Pursuant to Chapter 253.77, Florida Statutes, you will not require authorization from the Board of Trustees to use public property to perform the proposed project.

"More Protection, Less Process"

Printed on recycled paper.

Robert Bedell

File Number: 43-0191741-001

Page Two

3. Federal Review (State Programmatic General Permit) - AUTHORIZATION GRANTED

Federal authorization for the proposed project is reviewed by DEP pursuant to an agreement between the Department and the U.S. Army Corps of Engineers (the Corps). The agreement is outlined in a document titled *Coordination Agreement Between the U.S. Army Corps of Engineers and the Florida Department of Environmental Protection State Programmatic General Permit, Section 10 of the Rivers and Harbor Act of 1899 and Section 404 of the Clean Water Act*.

Your project has been reviewed for compliance with a State Programmatic General Permit (SPGP). Your proposed activity as outlined on the attached drawings is in compliance with the SPGP program. U.S. Army Corps of Engineers (Corps) General conditions apply to your project, as attached. **No further permitting for this activity is required by the Corps.** The authority granted under this SPGP expires December 17, 2003. Your project must be completed prior to this expiration date.

The determinations in this letter are based solely on the information provided to the Department and on the statutes and rules in effect when the application was submitted. The determinations are effective only for the specific activity proposed. These determinations shall automatically expire if site conditions materially change or if the governing statutes or rules are amended. In addition, any substantial modifications in your plans should be submitted to the Department for review, as changes may result in a permit being required. In any event, this determination shall expire after one year.

This letter does not relieve you from the responsibility of obtaining other permits (federal, state, or local) that may be required for the project.

NOTICE OF RIGHTS OF SUBSTANTIALLY AFFECTED PERSONS

This letter acknowledges that the proposed activity is exempt from ERP permitting requirements under Rule 40E-4.051(3)(b), F.A.C. This determination is final and effective on the date filed with the Clerk of the Department unless a sufficient petition for an administrative hearing is timely filed under sections 120.569 and 120.57 of the Florida Statutes as provided below. If a sufficient petition for an administrative hearing is timely filed, this determination automatically becomes only proposed agency action subject to the result of the administrative review process. Therefore, on the filing of a timely and sufficient petition, this action will not be final and effective until further order of the Department. The procedures for petitioning for a hearing are set forth in the attached notice.

This determination is based on the information you provided the Department and the statutes and rules in effect when the application was submitted and is effective only for the specific activity proposed. This determination shall automatically expire if site conditions materially change or the governing statutes or rules are amended. In addition, any substantial modifications in your plans should be submitted to the Department for review, as changes may result in a permit being required. In any event, this determination shall expire after one year.

Be advised that your neighbors and other parties who may be substantially affected by the proposed activity allowed under this determination of exemption have a right to request an administrative hearing on the Department's decision that the proposed activity qualifies for this exemption. Because the administrative hearing process is designed to redetermine final agency action on the application, the filing of a petition for an administrative hearing may result in a final determination that the proposed activity is not authorized under the exemption established under Rule 40E-4.051(3)(b), F.A.C.

Robert Bedell
File Number: 43-0191741-001
Page Three

The Department will not publish notice of this determination. Publication of this notice by you is optional and is not required for you to proceed. However, in the event that an administrative hearing is held and the Department's determination is reversed, proceeding with the proposed activity before the time period for requesting an administrative hearing has expired would mean that the activity was conducted without the required permit.

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

If you wish to limit the time within which any specific person(s) may request an administrative hearing, you may provide such person(s), by certified mail, a copy of this determination, including Attachment A.

For the purposes of publication, a newspaper of general circulation means a newspaper meeting the requirements of sections 50.011 and 50.031 of the Florida Statutes. In the event you do publish this notice, within seven days of publication, you must provide to the following address proof of publication issued by the newspaper as provided in section 50.051 of the Florida Statutes. If you provide direct written notice to any person as noted above, you must provide to the following address a copy of the direct written notice.

Florida Department of Environmental Protection, Southeast District - Port St. Lucie Branch Office
Submerged Lands & Environmental Resources Program, 1801 SE Hillmoor Drive Suite C-204
Port St. Lucie, FL 34952

Thank you for applying to the Submerged Lands and Environmental Resource Program. If you have questions regarding this matter, please contact **Karen Rogers** of this office, at telephone (561)398-2806.

Sincerely,

Danna Small

for John P. Mitnik, P.E.
Environmental Administrator

JPMKR

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

cc: U.S. Army Corps of Engineers, Stuart [without enclosures]
Jerner and Associates, Inc. (Agent) [without enclosures]

Mr. Robert Bedell
140 South Sewall's Point Road
Stuart, FL 34996
(305) 310-5118

January 29, 2002

Mr. Gene Simmons, Building Department
Town of Sewall's Point
1 South Sewall's Point Road
Stuart, FL 34996

Re: Permit Application - Bedell
140 South Sewall's Point Road, Stuart, FL 34996

Dear Mr. Simmons:

This letter serves as the Subdivision Homeowners' Association approval letter required for my building permit application for the above-referenced address. Please note that I am not a member nor a part of any Homeowners' Association within the Town of Sewall's Point.

Thank you for your cooperation in this matter.

Sincerely,



Robert L. Bedell

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Oct 29, 2001; Page 1 of 1.








PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5022	SMITH 133 S. RIVER RD. MACHY BLDG'	TIE BEAM + COLUMN	FAILED	<i>[Signature]</i>
				INSPECTOR:
5563	Collins 23 N. RIDGEVIEW DR. DB.	Ferial - driveway	PASSED.	<i>[Signature]</i>
				INSPECTOR:
—		BOAT LIFT.		POSTED STOP WORK
	140 S. SEWALLS PT RD.	WORK WITHOUT PERMIT	<i>[Signature]</i>	BOAT LIFT CONTRACTOR 561-219-0315
		STOP WORK ORDER		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri MARCH 13, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5671	ATEN	ROUGH PLUMBING	Passed	
(10)	103 ABILE CT. HARBOR BAY	POOL		INSPECTOR: 
5069	WINEZ	ROUGH ELEC	Passed	
(7)	19 RIDGELAND. WINN LEAL			INSPECTOR: 
5597		SCREEN ENC	Passed	
(9)	117 HENRY SEWALLS WAY. PIONEER SCREEN			INSPECTOR: 
5583	GUFFIS	BOAT LIFT.	Failed	not completed (electrics) wrong call
(11)	140 S. SEWALLS PT RD. J & B BOAT LIFT.			INSPECTOR: 
5561	PITTINOS.	POOL FINAL	Passed	
(8)	117 HENRY SEWALLS WAY. POOLS PM GARY			INSPECTOR: 
5279	LIPISCH	DECK FINAL	Failed	Electric
(5)	22 S. SEWALLS-PT. RD. TROPIC MARIN		Done =	complete
				INSPECTOR: 
5363	JOHNSON	FINAL	Passed	
(3)	2 OAK HILL WAY DRIFTWOOD			INSPECTOR: 

OTHER:

4875 ?

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri MARCH 19, 2004 Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5612	De Gaudio 24 High Pt. Pine Orchard	Framing	Passed	INSPECTOR: <i>[Signature]</i>
5683	BIDEZ 140 S. SEWALL'S PT. RD. J+B BOAT LIFTS	BOAT LIFT + ELEC. FINAL.	Passed	INSPECTOR: <i>[Signature]</i>
5352	CLEMENTS 11 W HIGH POINT MOULTER	ROUGH ELEC.	Partial	INSPECTOR: <i>[Signature]</i>
②	601 S RIVER ROAD	LOOK e OAK w/LORRAE 9:00 SEE (GENE)	Passed	INSPECTOR: <i>[Signature]</i>
5681	ZUCCHER 18 E HIGH POINT PACIFIC	TIN TAGS 263 0194 Mark 263-0110 CALL SET TIME	Failed	INSPECTOR: <i>[Signature]</i>
5631	HART 61 S. RIVER RD. WINCHIP.	PATIO. SLAB.	Passed	INSPECTOR: <i>[Signature]</i>
T/R		FRAMING TREE T/R	Failed	INSPECTOR:
③	62 S. River			

OTHER: 19 N River T/R
10 Knowles T/R
22 Louisa T/R

OWNER'S AFFIDAVIT OF BUILDING COSTS

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

STATE OF FLORIDA
MARTIN COUNTY

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

1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 7,000.⁰⁰.
4. That this Affidavit is made for the purpose of inducing the Building Official of the Town to issue a Certificate of Occupancy for the improvements, with the intention that it be relied upon for that purpose.

Affidavit's Signature:

Robert L. Bedell
Robert L. Bedell

Property Address:

140 South Sewall's Point Road
Stuart, FL 34996

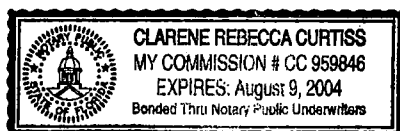
SWORN TO and subscribed before me this 21st day of January, 2002, by Robert L. Bedell, who is personally known to me or produced ✓ as identification.

Clarene Rebecca Curtiss

Notary Public

My commission expires: _____

(Notary Seal)



9357

STORM PANELS



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:	9357	DATE ISSUED:	01/28/2010	FOR 2/1/10
SCOPE OF WORK:	STORM PANELS			
CONDITIONS :				
CONTRACTOR:	ARMOR SCREEN CORP.			
PARCEL CONTROL NUMBER:	133841001000000113	SUBDIVISION	ARCHIPELAGO	Lot 1
CONSTRUCTION ADDRESS:	140 S. SEWALL'S POINT RD.			
OWNER NAME:	COMBS			
QUALIFIER:	WILLIAM YORK	CONTACT PHONE NUMBER:	JASON 561-779-9197	

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

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

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

REQUIRED INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	9357		
ADDRESS	140 S. SEWALL'S PT. RD.		
DATE:	01/28/2010	SCOPE:	STORM PANELS

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
---	----------------	----	--

- Plan Su
- (No plan)
- Total sq
- Total sq
- Total Co
- Building
- Building
- Total num
- Radon Fe

63-8413/2670 5348

**The Permit Group
BoCorp Inc**
 2805 Veronia Dr #201
 561-799-6523
 Palm Beach Gardens, FL 33410

1/28 2010

PAY TO THE ORDER OF Town of Sewall's Point \$ 80.00

Eighty and 00/100 DOLLARS

JPMorgan Chase Bank, N.A.
 3399 PGA Blvd. Ste., 100
 Palm Beach Gardens, FL 33410

FOR ARMUR XI

757190699#5348

Security Features are included. Details on back.

DBPR Licensing Fee: (\$.005 per sq. ft. under roof)	\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)	\$	
Martin County Impact Fee:	\$	
TOTAL BUILDING PERMIT FEE:	\$	

ACCESSORY PERMIT	Declared Value:	\$	3200-
Total number of inspections @ \$75.00 each	1	\$	75.00
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	80.00

ARM

RECEIVED
1-25-10

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: 9357

Date: 1.7.2010

OWNER/TITLEHOLDER NAME: JUDITH COMBS Phone (Day) 561.222.4875 (Fax) _____

Job Site Address: 140 S SEWALLS POINT ROAD City: STUART State: FL Zip: 34996

Legal Description: ARCHIPELAGO LOT 1 Parcel Control Number: 13-38-41-001-000-00011-3

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

Scope of work (please be specific): INSTALL FOUR REMOVABLE ARMOR SCREEN STORM PANELS

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 3200.00
 (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: ARMOR SCREEN CORP. Phone: 561.841.8890 Fax: 561.841.8892

Street: 1881 CUD OKEECHOBEE ROAD City: W PALM BEACH State: FL Zip: 33409

State License Number: CBC056072 OR: Municipality: _____ License Number: _____ 561-721-5611 WHEN READY

LOCAL CONTACT: JASON DANIEL Phone Number: 561.779.9197 Mitch
When ready please call

DESIGN PROFESSIONAL: _____ Lic# _____ Phone Number: 561-721-5611

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

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

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2007
National Electrical Code: 2005(2008 after 6/1/09) Florida Energy Code: 2007, Florida Accessibility Code: 2007, Florida Fire Prevention Code 2007

NOTICES TO OWNERS AND CONTRACTORS:

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

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

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

OWNER SIGNATURE: (required)
 OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Judith Combs
 State of Florida, County of: Palm Beach
 This the 13th day of January, 2010
 by Judith Combs who is personally
 known to me or produced FL DL
 as identification. Sondra Adkins
 My Commission Expires: 2/14/2013
 SONDRA ADKINS
 Notary Public
 Comm# DD0851808

CONTRACTOR SIGNATURE: (required)
William H. York
 On State of Florida, County of: Palm Beach
 This the 13th day of January, 2010
 by William H. York who is personally
 known to me or produced _____
 as identification. Sondra Adkins
 My Commission Expires: _____
 SONDRA ADKINS
 Notary Public
 Comm# DD0851808
 Expires 2/14/2013
 Florida Notary Assn., Inc

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!



Martin County, Florida
Laurel Kelly, C.F.A

Site Provided by...
government.com T1.1

Summary

print Owner
3 of 4

Parcel Info

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
13-38-41-001-000-00011-3	140 S SEWALLS POINT RD	27653	Owner	0	1

- Summary
- Land
- Residential Improvement
- Commercial Image
- Sales & Transfers
- Assessments →
- Taxes →
- Exemptions →
- Parcel Map →
- Full Legal →

Summary
Property Location 140 S SEWALLS POINT RD
Tax District 2200 Sewall's Point
Account # 27653
Land Use 101 0100 Single Family
Neighborhood 193110
Acres 0.373

Legal Description
Property Information
 ARCHIPELAGO LOT 1

Search By

- Parcel ID
- Owner
- Address
- Account #
- Use Code
- Legal Description
- Neighborhood
- Sales
- Map →

Owner Information
Owner Information
 COMBS JUDITH M

Mail Information
 140 S SEWALLS POINT RD
 STUART FL 34996

Assessment Info
Front Ft. 1.00

Market Land Value \$473,100
Market Impr Value \$168,510
Market Total Value \$641,610

Site Functions

- Property Search
- Contact Us
- On-Line Help
- County Home
- Site Home
- County Login

Recent Sale
Sale Amount \$875,000

Sale Date 10/29/2009
Book/Page 2420 0709

Print | Back to List | << First < Previous Next > Last >>

Legal disclaimer / Privacy Statement

Data updated on 12/27/2009



ARMOR.
SEWALLS POINT

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

PERMIT #: _____ TAX FOLIO #: 27653

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE):
ARCHIPELAGO LOT 1, 140 S SEWALLS POINT RD, STUART, FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Four removable armor screen storm panels

OWNER NAME: JUDITH COMBS
ADDRESS: 140 S SEWALLS POINT ROAD STUART FL 34996
PHONE NUMBER: 772.791.7774 FAX NUMBER: _____

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

CONTRACTOR: ARMOR SCREEN CORP.
ADDRESS: 1991 OLD CROCHESSE ROAD WEST PALM BEACH FL 33409
PHONE NUMBER: 561.941.9890 FAX NUMBER: 561.941.2742

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

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

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

NAME: _____
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____

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

FLORIDA STATUES:
PHONE NUMBER: _____ FAX NUMBER: _____

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

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

Judith Combs
SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

SIGNATORY'S TITLE/OFFICE _____

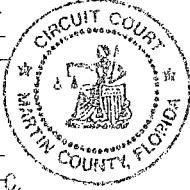
THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 13th DAY OF January, 2010

BY: Judith Combs AS owner FOR _____
NAME OF PERSON TYPE OF AUTHORITY

PERSONALLY KNOWN _____ OR PRODUCED IDENTIFICATION PLA
TYPE OF IDENTIFICATION PRODUCED FLDL

NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED: ADKINS
Comm# DD0851808
Expires 2/14/2013
Florida Notary Assn., Inc

Smile Ann
NOTARY SIGNATURE/ SEAL



UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS IN IT ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF (SECTION 92.525, FLORIDA STATUTES).

Judith Combs
(Signature of Natural Person Signing Above)

INSTR # 2189099 DR BK 02433 PG 2172 RECD 01/25/2010 01:20:09 PM
Pg 2172 (1pg)
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S PHOENIX





HURRICANE PROTECTION

Sales Agreement

1881 Old Okeechobee Road • West Palm Beach, FL 33409

Phone: (561) 841-8891 • Fax: (561) 841-8892

www.armorscreen.com

License Number: CBC056072

PROPOSAL SUBMITTED TO:

Name: Judy Combs Address: 140 S Sewalls Point Rd
 Phone: 561.222.4875 Stuart, Florida 34996
 Cell: _____
 Fax: _____ Email: teneez1@aol.com

JOB INFORMATION:

Job Name: Combs-Refit 140 S Sewalls Pt Rd Address: SAME AS
 Screen Color: Black ABOVE
 Total Screens Quoted: Four County: Martin

WE ARE PLEASED TO QUOTE YOU AS FOLLOWS:

Date: 1.6.2010

To supply and install the Armor Screen Flexible Wind Abatement System. Any unexpected necessary structural work is not included on this quote. Any alteration to or deviation from the agreed specifications involving extra costs will become an extra charge over and above this estimate. The Armor Screen System will remain the property of Armor Screen Corp. until contract is paid in full. This proposal is subject to acceptance within 30 days.

Time: \$2,160.00
 Materials: \$801.50
 Sales Tax: \$52.10
 Permitting Fees: \$250.00
 Engineering: N/A

Specific Job Notes:

Ref#100198-001

Total Job Cost: \$3,263.60
50% Deposit: \$1,631.80
Final Payment: \$1,631.80

*Final Payment to be Collected Upon Passed Final Inspection

WARRANTY INFORMATION

Armor Screen is warranted against defects in manufacture for 10 years prorated from purchase or acceptance. Labor warranty is one year. Defects must be reported immediately. Armor Screen is not responsible for additional warranties extended by an Armor Screen dealer / subcontractor. Upon delivery, the screens will perform to test standards. Armor Screen's only obligation under this limited warranty shall be to replace or repair, at its option, those parts, which are deemed defective. Armor Screen does not warrant the survivability of the structure. Armor Screen is intended as hurricane protection only and should only be deployed for short periods before and after the storm. U.V. damage resulting from extended periods of deployment is not covered by this warranty unless a specific system is designed and intended for such deployments. This warranty does not cover Rollup systems.


Acceptance of Proposal

The above prices, specifications, and conditions are hereby accepted. Armor Screen is authorized to do the work as specified. Armor Screen is authorized to use photographs or video of the installation for advertising purposes.

Authorized Signature: _____ Date: _____
 Armor Screen Authorized Representative: Jason K Daniel Date: 1.6.2010

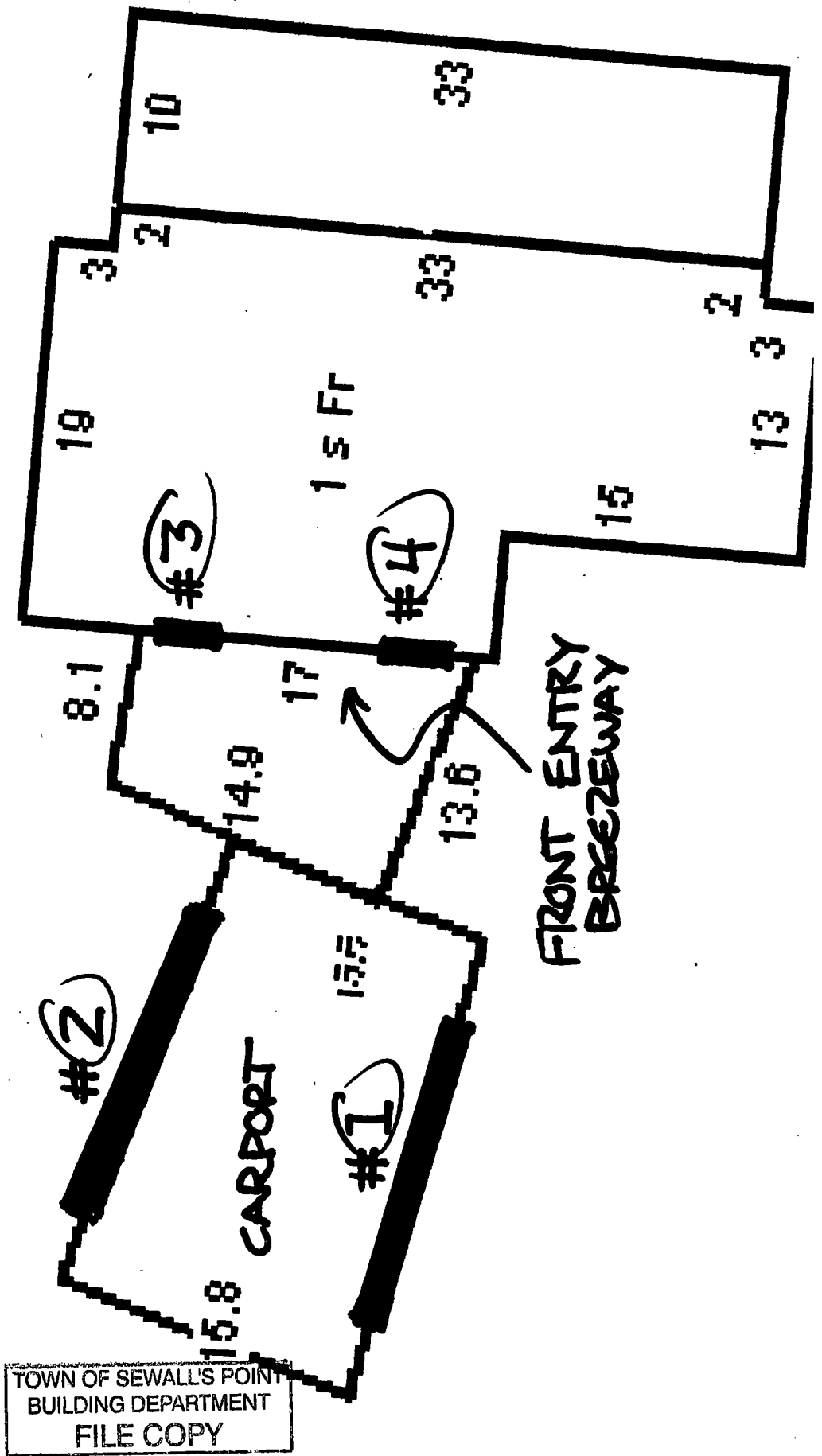
SHUTTER SCHEDULE

I.D. NO.	APPOX OPENING SIZE (WXH)	APPOX SHUTTER WIDTH	APPOX HEIGHT	# OF STORM BARS REQ'D	ANCHOR SPACING		# OF WINDOW BARS EACH SIDE	HEADER REINF. REQ'D YES/NO	REMARKS
					O/C	O/C			
	37"X63"	45"	71"	N/A	Top	Bottom	N/A	NO	EXAMPLE
1	223 x 78	235"	84"	N/A	24"	24"	N/A	N/A	STRAIGHT
2	223 x 78	235"	84"	N/A	24"	24"	N/A	N/A	STRAIGHT
3	32 x 81	40"	84"	N/A	12"	24"	N/A	N/A	ANGLED
4	35 x 83	43"	84"	N/A	12"	24"	N/A	N/A	ANGLED
5									
6									
7									
8									
9									
10									
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25									

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 1-27-10

BUILDING OFFICIAL

1.6.2010

140 S SEWALLS POINT ROAD
STUART, FL 34996



TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

**ALL WIND LOADS DESIGNED IN ACCORDANCE WITH ASCE 7
PER SECTION 1609 OF THE 2004 FLORIDA BUILDING CODE**

ROOF PITCH IS GREATER THAN 2"/12" OR \geq 10 DEGREES

PROJECT NAME:	Combs - Refit
ADDRESS	140 S Swealls Point Road
CITY/STATE	Stuart, FL 34996
CLADDING TYPE:	ARMOR SCREEN



COMPONENTS AND CLADDING OF WALLS

BASIC WIND SPEED(MPH)	140
EXPOSURE	C
IMPORTANCE FACTOR	1.00
MEAN ROOF HEIGHT	28
TOP OF WINDOW OR SHUTTER HEIGHT	8
WIND DIRECTIONALITY FACTOR (Kd)	0.85

ENCLOSED BUILDING $G_{Cpi} = \pm 0.18$	≤ 10 SF	10 SF \Rightarrow ≤ 20 SF	20 SF \Rightarrow ≤ 50 SF
POSITIVE PRESSURE (ZONE 4+5)	37.4	35.4	33.1
NEGATIVE PRESSURE (INTERIOR ZONE 4)	-52.9	-50.8	-46.7
NEGATIVE PRESSURE (END ZONE 5)	-65.2	-59.7	-53.7

PARTIALLY ENCLOSED BUILDING $G_{Cpi} = \pm 0.55$	≤ 10 SF	10 SF \Rightarrow ≤ 20 SF	20 SF \Rightarrow ≤ 50 SF
POSITIVE PRESSURE (ZONE 4+5)	49.2	47.1	44.9
NEGATIVE PRESSURE (INTERIOR ZONE 4)	-68.1	-66.1	-61.9
NEGATIVE PRESSURE (END ZONE 5)	-80.5	-74.9	-69.0

**ALL WIND LOADS DESIGNED IN ACCORDANCE WITH ASCE 7
PER SECTION 1609 OF THE 2004 FLORIDA BUILDING CODE**

ROOF PITCH IS GREATER THAN 2"/12" OR \geq 10 DEGREES

PROJECT NAME:	Combs - Refit
ADDRESS	140 S Sewalls Point Road
CITY/STATE	Stuart, FL 34996
CLADDING TYPE:	ARMOR SCREEN

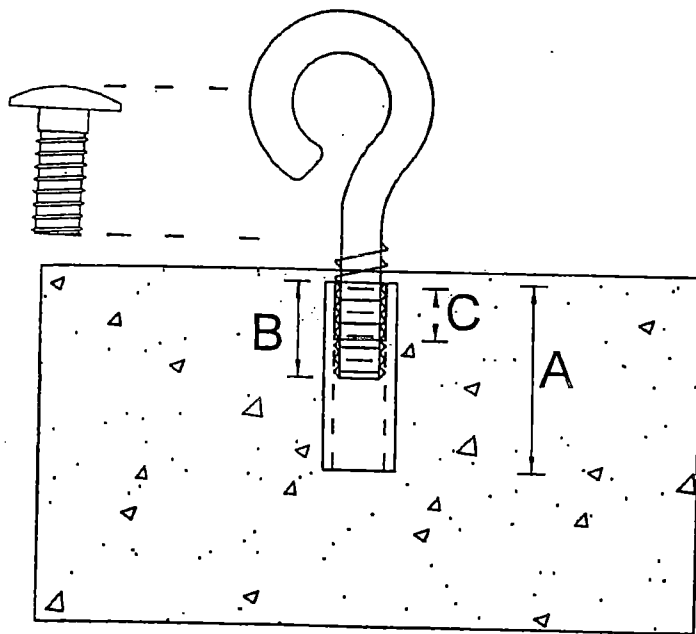


COMPONENTS AND CLADDING OF WALLS

BASIC WIND SPEED(MPH)	140
EXPOSURE	C
IMPORTANCE FACTOR	1.00
MEAN ROOF HEIGHT	28
TOP OF WINDOW OR SHUTTER HEIGHT	8
WIND DIRECTIONALITY FACTOR (Kd)	0.85

ENCLOSED BUILDING $G_{Cpi} = \pm 0.18$	50 SF $\Rightarrow \leq 100$ SF	100 SF $\Rightarrow \leq 200$ SF	200 SF $\Rightarrow \leq 500$ SF
POSITIVE PRESSURE (ZONE 4+5)	31.6	30.5	27.9
NEGATIVE PRESSURE (INTERIOR ZONE 4)	-45.2	-43.8	-40.5
NEGATIVE PRESSURE (END ZONE 5)	-51.8	-45.8	-40.5

PARTIALLY ENCLOSED BUILDING $G_{Cpi} = \pm 0.55$	50 SF $\Rightarrow \leq 100$ SF	100 SF $\Rightarrow \leq 200$ SF	200 SF $\Rightarrow \leq 500$ SF
POSITIVE PRESSURE (ZONE 4+5)	43.3	42.2	39.6
NEGATIVE PRESSURE (INTERIOR ZONE 4)	-60.5	-59.0	-55.7
NEGATIVE PRESSURE (END ZONE 5)	-67.1	-61.1	-55.7



DROP-IN ANCHOR			
	Embedment		
	1/4"	3/8"	1/2"
A	1"	1 9/16"	2"
B	1/2"	11/16"	13/16"
C	5/16"	7/16"	9/16"

A - Drop-In Length
 B - Drop-In Internal Thread
 C - Minimum Thread Engagement

MINIMUM BOLT ENGAGEMENT IN ANCHOR

Gary D. Foreman, PESEAIA
 12399 McGregor Woods Circle
 Ft. Myers, FL 33908
 FL PE 57343 FLAR17125

[Handwritten Signature]
 57243
 7/2/08

MINIMUM BOLT ENGAGEMENT

Copyright © 2008

Date : 07/01/08

Drawn by SA

CONFIDENTIAL
 *This drawing contains material that is the subject of patents

Revision Date:
 Revision Date:

Scale : As Noted

ARMOR SCREEN
 2001-H N. Congress Ave.
 Riviera Beach, FL 33404
 Phone: (888) 941-8890 Fax: (888) 841-8892



Product Approval
USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**

- COMMUNITY PLANNING
- HOUSING & COMMUNITY DEVELOPMENT
- EMERGENCY MANAGEMENT
- OFFICE OF THE SECRETARY

FL #	FL812-R3														
Application Type	Affirmation														
Code Version	2007														
Application Status	Approved														
Comments															
Archived	<input type="checkbox"/>														
Product Manufacturer	Armor Screen Corp.														
Address/Phone/Email	2001-H North Congress Ave. Riviera Beach, FL 33404 (561) 841-8890 danr@armorscreen.com														
Authorized Signature	Daniel Reames danr@armorscreen.com														
Technical Representative															
Address/Phone/Email															
Quality Assurance Representative															
Address/Phone/Email															
Category	Shutters														
Subcategory	Products Introduced as a Result of New Technology														
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received														
Florida Engineer or Architect Name who developed the Evaluation Report	Gary D. Foreman P.E., S.E., A.I.A.														
Florida License	PE-57343														
Quality Assurance Entity	National Accreditation & Management Institute,														
Quality Assurance Contract Expiration Date															
Validated By	Terrence E. Lunn, PE <input type="checkbox"/> Validation Checklist - Hardcopy Received														
Certificate of Independence	FL812 R3 COI 812 Gary F. Certificate Indep.pdf														
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th><u>Standard</u></th> <th><u>Year</u></th> </tr> </thead> <tbody> <tr> <td>ASTM E 1996</td> <td>2005</td> </tr> <tr> <td>ASTM E 1886</td> <td>2005</td> </tr> <tr> <td>ASTM E 330</td> <td>2002</td> </tr> <tr> <td>TAS 201</td> <td>1994</td> </tr> <tr> <td>TAS 202</td> <td>1994</td> </tr> <tr> <td>TAS 203</td> <td>1994</td> </tr> </tbody> </table>	<u>Standard</u>	<u>Year</u>	ASTM E 1996	2005	ASTM E 1886	2005	ASTM E 330	2002	TAS 201	1994	TAS 202	1994	TAS 203	1994
<u>Standard</u>	<u>Year</u>														
ASTM E 1996	2005														
ASTM E 1886	2005														
ASTM E 330	2002														
TAS 201	1994														
TAS 202	1994														
TAS 203	1994														

Equivalence of Product Standards
Certified By

Sections from the Code

I affirm that there are no changes in the new Florida Building Code which affect my product(s) and my product(s) are in compliance with the new Florida Building Code.

Product Approval Method: Method 1 Option D
 Date Submitted: 02/28/2009
 Date Validated: 02/28/2009
 Date Pending FBC Approval:
 Date Approved: 03/02/2009

Summary of Products

FL #	Model, Number or Name	Description
812.1	Armor Screen Series 2000	Flexible Wind Abatement / Impact Protection System
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: +130/-136.5 Other: As per ASTM E 1886 and ASTM E 1996 standards, no glass separation is required for this screen system installation; however, the glass may break with any size screen. The un-breached envelope criterion is met since the system is considered 'non-porous' and remains intact under impact and air pressure loading. The system is to enclose the protected opening all around.		Installation Instructions FL812 R3 II 812 Part 1 Installation Instructions.pdf FL812 R3 II 812 Part 2 Installation Instructions.pdf Verified By: Gary D. Foreman, P.E., A.I.A. No. 57343 Created by Independent Third Party: Evaluation Reports FL812 R3 AE 08-09 Quality Assurance Cert.pdf FL812 R3 AE 812 Product Evaluation Report.pdf FL812 R3 AE PTID 812 Test 201.pdf FL812 R3 AE PTID 812 Test 202.pdf FL812 R3 AE PTID 812 Test 203.pdf FL812 R3 AE PTID 812 Test 204 (2).pdf FL812 R3 AE PTID 812 Test 205.pdf FL812 R3 AE PTID 812 Test 206.pdf Created by Independent Third Party:

[Back](#) [Next](#)

DCA Administration
 Department of Community Affairs
 Florida Building Code Online
 Codes and Standards
 2555 Shumard Oak Boulevard
 Tallahassee, Florida 32399-2100
 (850) 487-1824, Fax (850) 414-8436
 © 2000-2005 The State of Florida. All rights reserved. [Copyright and Disclaimer](#)

Product Approval Accepts:



ARMOR SCREEN INSTALLATION INSTRUCTIONS:

Armor Screen is a flexible wind abatement and impact protection system utilizing a woven monofilament geotextile that fulfills the 2004 Florida Building Code requirement for opening protection.

Geosynthetic hurricane screen: The hurricane screen shall be produced from a polypropylene, woven monofilament geotextile fabric with individual filaments woven into a basket weave network and calendered such that the filaments retain dimensional stability relative to each other. The woven monofilament geotextile fabric shall have the following minimum average roll values:

Grab Tensile Strength	(ASTM D4632)	425 x 325 LBS
Puncture Strength	(ASTM D4833)	130 LBS
Mullen Burst	(ASTM D3786)	675 PSI
Trapezoidal Tear	(ASTM D4533)	150 x 125 LBS
Wide Width Tensile Strength	(ASTM D4595)	225 x 205 LBS/IN
Wide Width Elongation	(ASTM D4595)	22 x 21 %
Thickness		20 Mils.
Apparent Opening Size		30 US STD SIEVE.
Percentage of Open Area		5%

The pores in Armor Screen are small enough that the surface tension of water causes the barrier screen to become solid in the presence of rain, and prevents damaging voluminous water intrusion, even from torrential rains.

In dry conditions, the pores remain open, and based on testing, allow approximately 3% of the wind to pass through.

Barrier can be mounted with opposing primary anchored perimeters in vertical, horizontal or any alignment appropriate to the structure being protected.

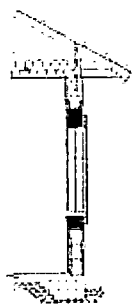
Design loads calculated to ASCE 7-02 as required by the prevailing building code.

Product marking - a label shall be affixed to the barrier with the following statement:

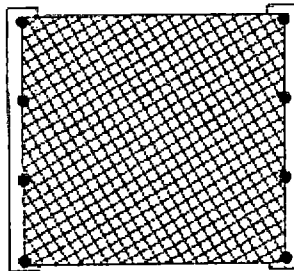
"Armor Screen Corporation, Riviera Beach, Florida Florida Building Code Approved"

ALL GEOSYNTHETIC HURRICANE SCREEN ASSEMBLY INSTALLATION DETAILS DEPICTED WITHIN THESE DRAWINGS ARE TYPICAL FOR THE INSTALLATION OF THIS WIND ABATEMENT AND IMPACT PROTECTION SYSTEM ONLY. ALL OTHER BUILDING COMPONENTS SHOWN HEREIN ARE DEPICTED AS EXISTING, AND NOT CONSTRUCTED BY THE SCREEN COMPANY.

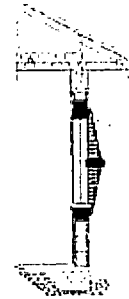
EXAMPLES OF TYPICAL INSTALLATIONS



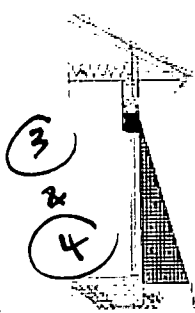
FLUSH



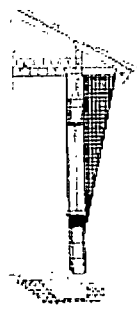
HORIZONTAL



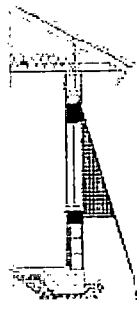
STORM BAR



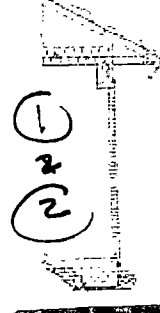
ANGLED



INVERTED
RENDERING NOT TO SCALE



WINDOW



STRAIGHT



BALCONY



ARMOR SCREEN CORP
2001-A N. CONGRESS AVE
RIVIERA BEACH, FL 33404
561-841-8590

Table 1 Anchor Spacing Anchor Choices *

Span	1' O/C	2' O/C	1 *	2 *	3 *	4 *
in feet	Design Pressure**		3/8" open eye	3/8" bolt	1/2" open eye	1/2" bolt
4'	130	65	X	X	X	X
6'	130	65		X	X	X
6'	92.75	46	X	X	X	X
8'	130	90				X
8'	130	65			X	X
8'	115	58		X	X	X
8'	68.75	34	X	X	X	X
10'	130	90				X
10'	130	65		X	X	X
10'	94.75	47	X	X	X	X
12'	130	90				X
12'	130	65			X	X
12'	120	60		X	X	X
12'	69.75	35	X	X	X	X
14'	130	80				X
14'	130	65			X	X
14'	120	60		X	X	X
14'	64.75	32	X	X	X	X
16'	130	75				X
16'	130	65			X	X
16'	110	55		X	X	X
16'	60	34.25	X	X	X	X
20'	58	29			X	X
24'	48	24			X	X

TOP OF #'s: 1, 2 24" O/C

BOTTOM OF #'s: 1, 2, 3, 4 24" O/C

TOP OF #'s: 3, 4

CONCRETE: * Above Table is intended for drop-in and LDT anchors in concrete.

WOOD: Lag anchoring (incl. LDT) into wood as follows

Column 1*: 3/8" thread, 1.75" penetration into SYP (0.55 sg)

Column 2*: 3/8" thread, 3.1" penetration into SYP

Column 3*: 1/2" thread, 3.0" penetration into SYP

Column 4*: 1/2" thread, 3.7" penetration into SYP

EARTH: * Specified earth anchor may be used with any of the above table choices.

HOLLOW BLOCK: Column 1*, approved epoxy anchoring system for 3/8" & 1/2" thread.

NOTE: ** Design pressure may be increased by 5% for negative loads

TRACK SYSTEM: Above Table applies to track system, anchored with two 5/16" fasteners per cleat, as follows:

- into hollow block, min. 1 1/4" embed can be installed as in column 1*
- into concrete, min. 1 3/4" embed can be installed as in column 3*
- into concrete, min. 2" embed can be installed as in column 4*
- into wood (SYP. sg. 0.55), min. 1" embed can be installed as in column 1*
- into wood (SYP. sg. 0.55), min. 2" embed installed as in column 3*

NOTES:

Anchor Spacing: varies inversely with pressure and is subject to rational analysis.

Span: is measured anchor to anchor.

ANCHOR SPECIFICATION:

Part numbers: 3/8" Lag Anchor (AS9038S)

1/2" Lag Anchor (AS9012S)

Tapcon 5/16", 3/8", and 1/2" LDT can anchor in both wood and concrete

Drop-in Anchor: 3/8" Steel Drop-in anchor in 3000 PSI (min.) concrete, 1 5/8" min. embedment (H3038S)

1/2" Steel Drop-in Anchor in 3000 PSI (min.) concrete, 2" min. embedment (H3012S)

Earth Anchor: Proprietary System: Stabilized, 1/2" x 30" shaft with 4" helix Working load 3150 LBS. (E7912P)

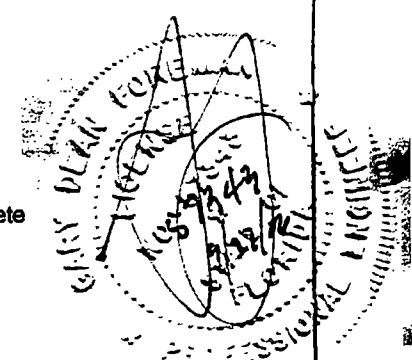
Soil Class: 5 (medium dense coarse sand)

Epoxy Anchor: Equal to Red Head umbrella inserts and screens with C7 adhesive.

TOP (3) (4) →

TOP & BOTTOM (1) (2) →

BOTTOM (3) (4) →



Armor Screen Corp.
2001- H.N. Congress Ave
Riviera Bch, FL 33404
561-841-8890

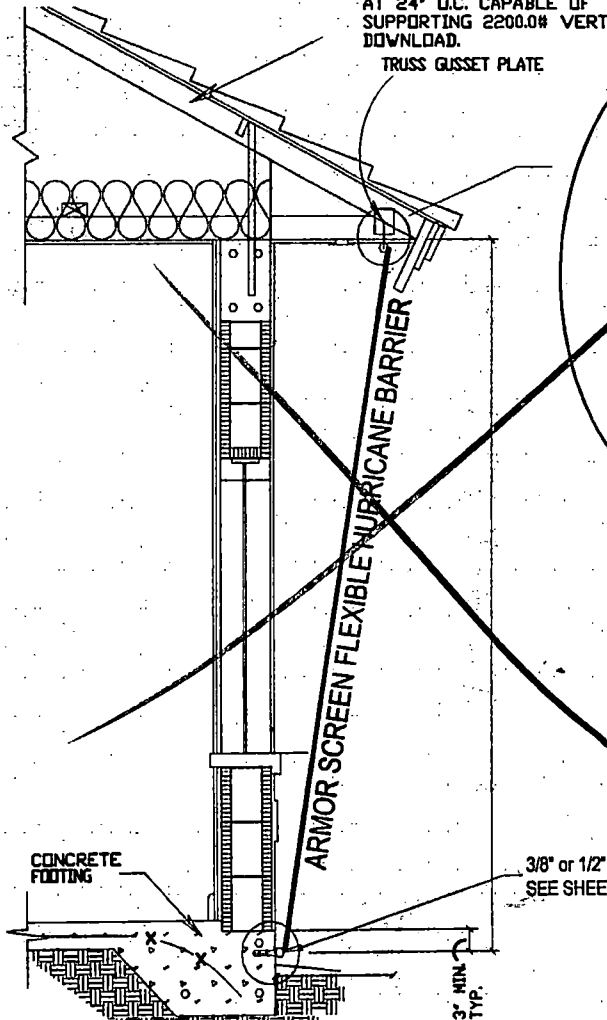
EXISTING WD ROOF TRUSSES
AT 24" O.C. CAPABLE OF
SUPPORTING 2200.0# VERTICAL
DOWNLOAD.

TRUSS GUSSET PLATE

3/8" or 1/2"
SEE: TABLE 1



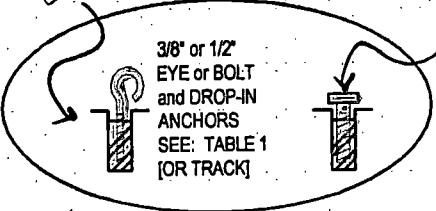
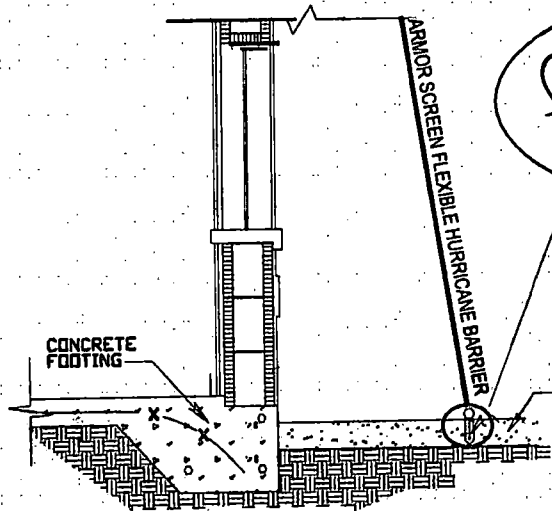
ALTERNATE ANCHORING
LAG; TURNED EYE OR PLAIN
LDT
TRACK
REMOVEABLE LAG
(AS3012S, AS9038S)
INSTALLED VERTICAL ONLY
INTO THE TRUSS MEMBER
WITH 3/4" MIN. EDGE
DISTANCE.



TYPICAL ONE STORY ASSEMBLY
INSTALLATION

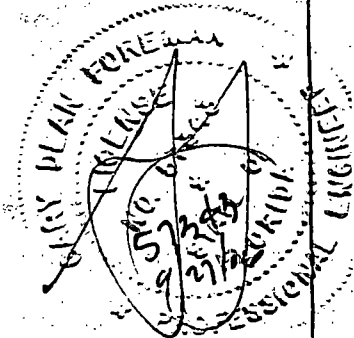
3/8" or 1/2" DROP-IN ANCHORS
SEE SHEET 1 ANCHOR SPECS.

Handwritten notes:
Bottom (1) (2) 24" o/c
Top (1) (2) 24" o/c
(3) (4) 12" o/c



CONCRETE SLAB
(4" MIN. THICKNESS)
(3000 PSI Min.)

ALTERNATE ASSEMBLY
INSTALLATION
AT EXTERIOR SLAB

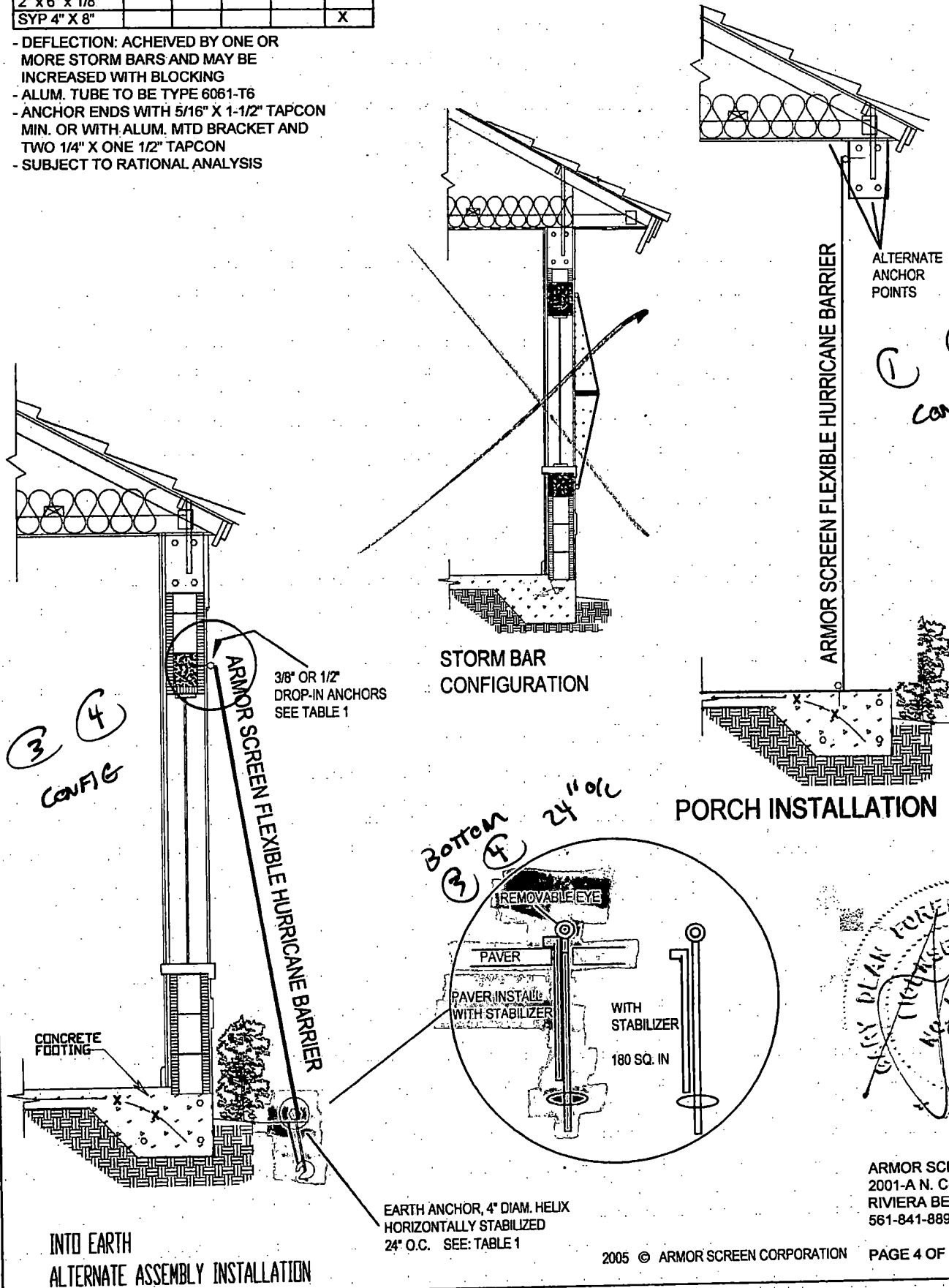


ARMOR SCREEN CORP
2001-A N. CONGRESS AVE
RIVIERA BEACH, FL 33404
561-841-8890

STORM BAR

SPAN	4'	5'	6'	8'	9' 9"
MAX. PSF	135	86	60	135	60
DEFLECTION	5.5"	6.1"	6.7"	8.5"	16"
SYP 2" X 6"	X	X	X		
ALUM. TUBE 2" x 6" x 1/8"				X	
SYP 4" X 8"					X

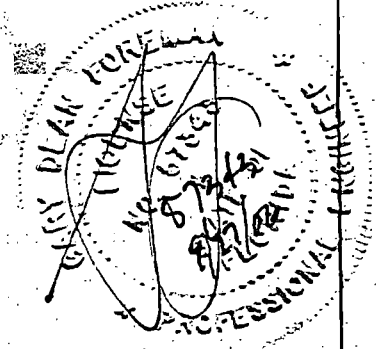
- DEFLECTION: ACHIEVED BY ONE OR MORE STORM BARS AND MAY BE INCREASED WITH BLOCKING
- ALUM. TUBE TO BE TYPE 6061-T6
- ANCHOR ENDS WITH 5/16" X 1-1/2" TAPCON MIN. OR WITH ALUM. MTD BRACKET AND TWO 1/4" X ONE 1/2" TAPCON
- SUBJECT TO RATIONAL ANALYSIS



① ②
CONFIG

③ ④
CONFIG

Bottom 24" O.C.
③ ④



ARMOR SCREEN CORP
2001-A N. CONGRESS AVE
RIVIERA BEACH, FL 33404
561-841-8890

EXISTING W/D ROOF TRUSSES
AT 24" O.C.

TRUSS GUSSET PLATE

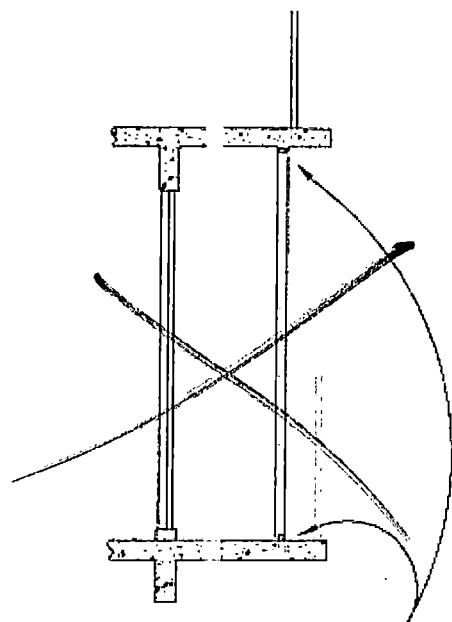
Typical of wall anchors

ARMOR SCREEN FLEXIBLE HURRICANE BARRIER
(ALTERNATE TO TIE BEAM)

ARMOR SCREEN FLEXIBLE HURRICANE BARRIER

3000 PSI CONCRETE
STRUCTURAL MEMBER

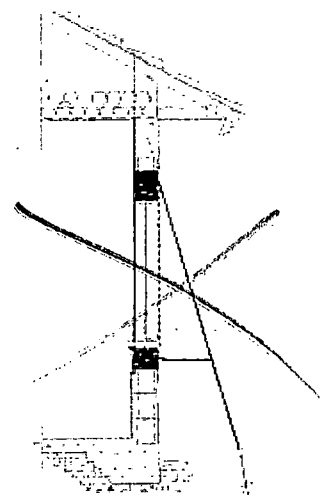
CONCRETE
FOOTING



FOR ANCHOR INSTALLATION
MAINTAIN AT LEAST MIN.
EDGE DISTANCE AND FULL
CAPACITY SPACING FROM
HANDRAIL ANCHORS

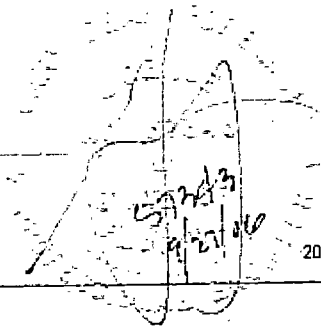
BALCONY SCREEN

ALTERNATE
ASSEMBLY
INSTALLATION



CLOSED ON SIDES AND
BOTTOM
ANCHORED AT LOWER CORNERS

WINDOW SCREEN



ARMOR SCREEN CORP
2001-A N. CONGRESS AVE
RIVIERA BEACH, FL 33404
561-841-8890

WELLINGTON SYNTHETIC FIBERS INC (PRODUCT NO. M-170H) 2" WIDE STRAP
GEO SYNTHETIC POLY PRO FABRIC

SIDE VIEW

QUAD FLAT FELLED SEAM
GEO SYNTHETIC POLYPRO
THREAD # 138 (7) PLACES
AT TOP AND BOTTOM OF
FABRIC SHEET

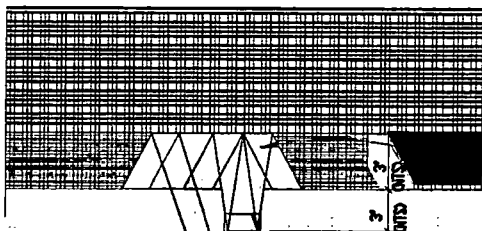
WEAVE NOT SHOWN FOR
CLARITY OF STRAP
CONFIGURATION

WEBBING LOOP FOR EYE ATTACHMENT
WELLINGTON SYNTHETIC FIBER STRAP
(PRODUCT NO. M-170H)
TO BE SEWN INTO GEO SYNTHETIC
FIBER MATERIAL

(May incorporate snap hook or D-ring)
Part Nos AS-5214, HS100, AS9138, AS9112.J

TOP WEAVE OF
GEO SYNTHETIC
MATERIAL

TOP STRAP DETAIL



WEAVE NOT SHOWN FOR
CLARITY OF STRAP
CONFIGURATION

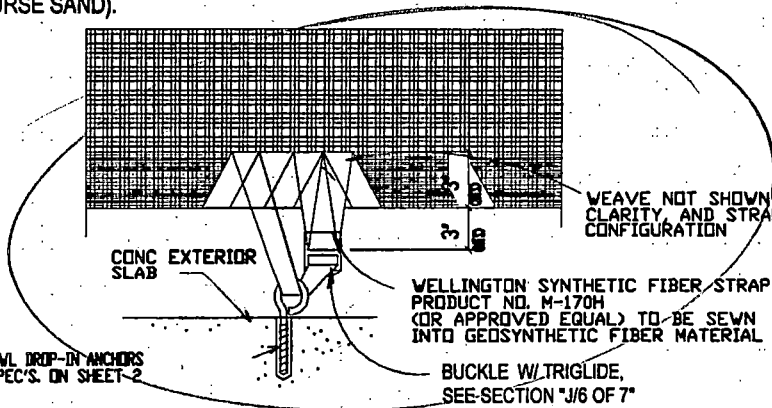
FINISH GRADE

WELLINGTON SYNTHETIC FIBER STRAP
PRODUCT NO. M-170H
(OR APPROVED EQUAL) TO BE SEWN
INTO GEO SYNTHETIC FIBER MATERIAL

BUCKLE W/ STRAP AND TRIGLIDE
SEE SECTION 'J/6 OF 7'

BOTTOM STRAP DETAIL
(AT EARTH ANCHOR)

EARTH ANCHOR,
SEE ANCHOR SPECIFICATIONS
ON SHEET 2 OF 7. SOIL SHALL
BE MIN. CLASS 5 (MEDIUM
DENSE COURSE SAND).



WEAVE NOT SHOWN FOR
CLARITY AND STRAP
CONFIGURATION

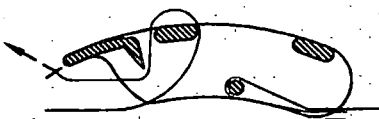
CONC EXTERIOR
SLAB

WELLINGTON SYNTHETIC FIBER STRAP
PRODUCT NO. M-170H
(OR APPROVED EQUAL) TO BE SEWN
INTO GEO SYNTHETIC FIBER MATERIAL

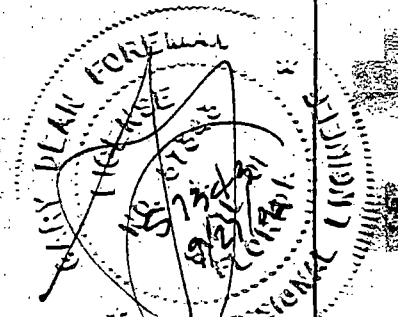
BUCKLE W/ TRIGLIDE,
SEE SECTION 'J/6 OF 7'

BOTTOM STRAP DETAIL
(AT ANCHORAGE INTO CONCRETE)

1/2" OR 3/8" RAWL DRIP-IN ANCHORS
SEE ANCHOR SPEC'S ON SHEET-2



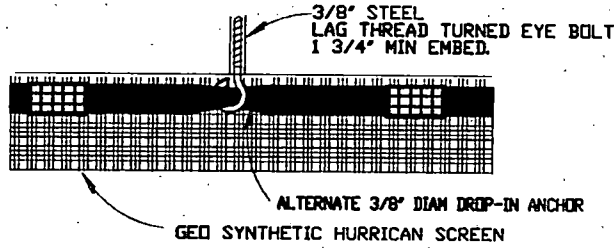
SUPER CONTOURED MODEL BUCKLE
BY NEXUS



ARMOR SCREEN CORP.
2001-A N. CONGRESS AVE
RIVIERA BEACH, FL 33404
561-841-8890

GED SYNTHETIC MULTI FILAMENT
TEX 135 THREAD (8) PLACES
AT TOP AND BOTTOM OF
FABRIC SHEET

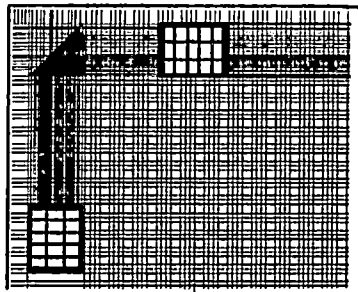
WELLINGTON SYNTHETIC FIBERS
INC. PRODUCT NO.
M-170HD 2" WIDE STRAP



ALTERNATE
TOP STRAP DETAIL
FOR OPENING 10 FEET OR LESS

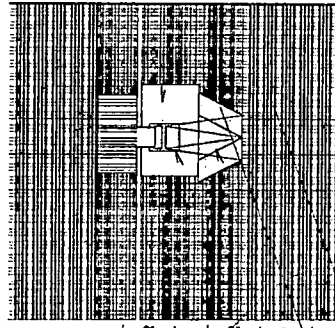
ALTERNATE CORNER DETAIL

N.T.S.



SCREEN THREAD NOT SHOWN
FOR CLARITY

ADJACENT SCREENS



TYPICAL ADJACENT
SCREENS ARE
OVERLAPPED ONE
ANCHOR SPACING.

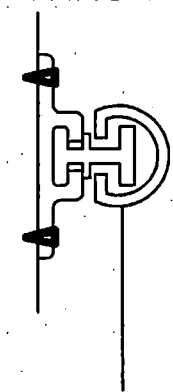
STRAP DETAIL

BUCKLE W/ STRAP AND TRIGLIDE
SEE SECTION "J/6 OF 7"

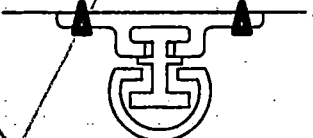
WELLINGTON SYNTHETIC FIBER STRAP
PRODUCT NO. M-170H
(OR APPROVED EQUAL) TO BE SEWN
INTO GEDSYNTHETIC FIBER MATERIAL
(1 Anchor Overlap)

NOTE: SCREENS MAY BE GROMMETED.

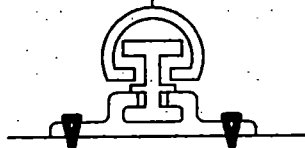
TRACK DETAIL



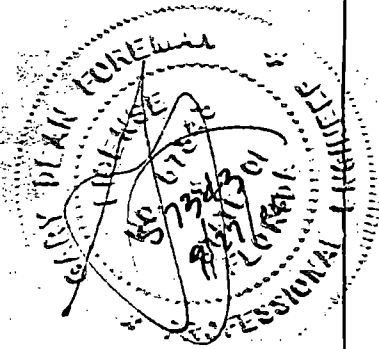
WALL
MOUNT



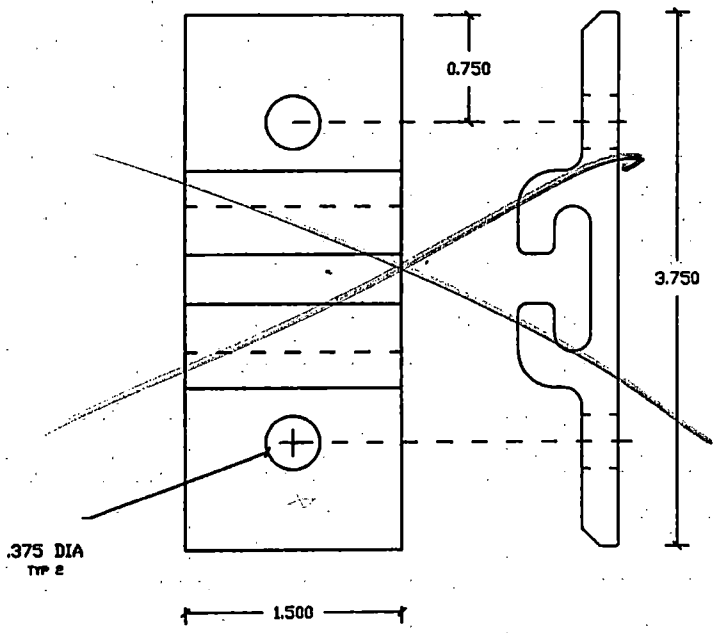
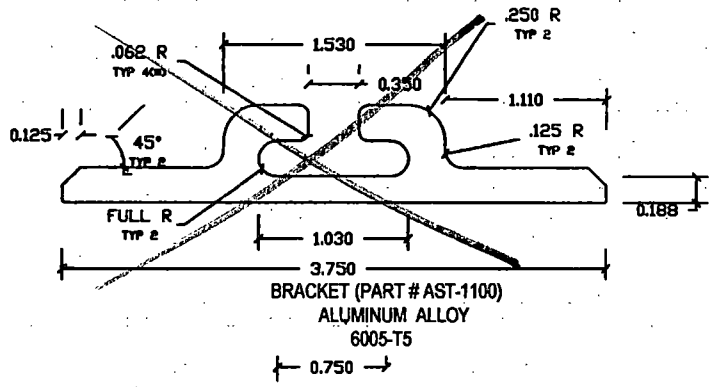
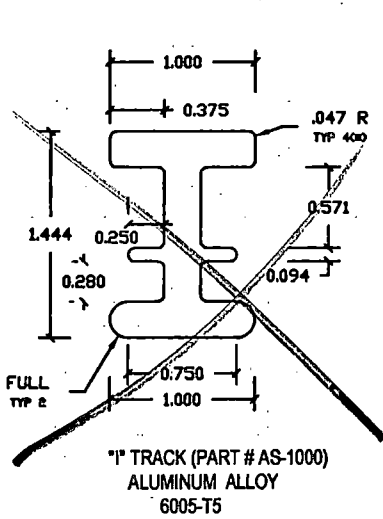
INSIDE MOUNT CEILING








INSIDE MOUNT
FLOOR

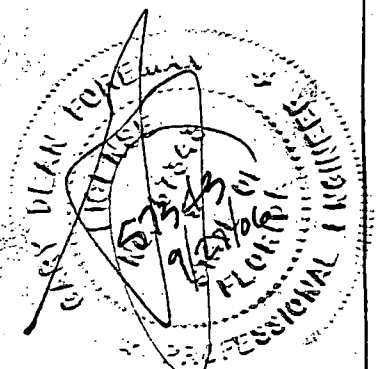


ARMOR SCREEN CORP
2001-A N. CONGRESS AVE
RIVIERA BEACH, FL 33404
561-841-8890



- ~~D-RING CARRIERS (AS-5214)~~ 
- ~~SPRING CLIPS (H-5100)~~ 
- TOP ③ ④ → 3/8" KEYHOLE CLIPS (AS9138)
- TOP ① ② → 1/2" KEYHOLE CLIPS (AS9112) 
- 5/16" TAPCONS (FT1556)
- 3/8" TAPCONS (FT1538)
- 1/2" TAPCONS (FT1512)
- TOP ③ ④ → 3/8" LAG ANCHOR (AS9038S) 
- 3/8" CARRIAGE BOLT
- TOP ① ② → 1/2" LAG ANCHOR (AS9112S) 
- 1/2" CARRIAGE BOLT

IMAGES ARE REPRESENTATIVE AND NOT TO SCALE



ARMOR SCREEN CORP
2001-A N. CONGRESS AVE
RIVIERA BEACH, FL 33404
561-841-8890

561-841-8892

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **3-15-10** Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9300	Justak 171 S Sewalls MisDin	Final Ac	Pass	Close INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9359	Combs 140 S Sewalls Armor Screen	Final Shutters	Pass	Close INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9334	VAN HAN 11 CASTLE HILL Roe	FINAL FENCE	Pass	INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

10427

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:	10427	DATE ISSUED:	APRIL 22, 2013
SCOPE OF WORK:	AC CHANGEOUT		
CONTRACTOR:	NISA IR		
PARCEL CONTROL NUMBER:	133841001-000-000113	SUBDIVISION	ARCHIPELAGO - LOT 1
CONSTRUCTION ADDRESS:	140 S SEWALLS PT RD		
OWNER NAME:	COMBS		
QUALIFIER:	PHILIP NISA	CONTACT PHONE NUMBER:	466-8115

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

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

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

INSPECTIONS

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

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

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

Date: 4.16.13 Permit Number: 10427
 OWNER/LESSEE NAME: Judith Combs Phone (Day) 561-222-4875 (Fax) _____
 Job Site Address: 140 S. Sewalls Point Rd City: Stuart State: Fla Zip: 34996
 Legal Description _____ Parcel Control Number: 13-38-41-001-000-00011-3
 Fee Simple Holder Name: _____ Address: _____
 City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** A/C Change out

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

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

COST AND VALUES: (Required on ALL permit applications)
 Estimated Value of Improvements: \$ 4700⁰⁰
 (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
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
 Estimated Fair Market Value prior to improvement: \$ _____
 (Fair Market Value of the Primary Structure only, Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Nisaire A/C Phone: 466-8115 Fax: 468-9745
 Qualifiers name: Philip Nisa Jr Street: 3700 S. US Hwy 1 City: Freeport State: Fla Zip: 34982
 State License Number: CA0041199 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Philip Nisa Jr Phone Number: 466-8115
 DESIGN PROFESSIONAL: _____ License# _____
 Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

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

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

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

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

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

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

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
 X _____
 State of Florida, County of: Stuart
 On This the 16 day of April, 2013
 by Philip Nisa Jr who is personally
 known to me or produced _____
 As identification. Nichole L. Simmons
 Notary Public
 My Commission Expires: MAY 4 **NICHOLE L. SIMMONS**

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL. NOTIFICATION (FBC 105.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!
 Comm# EE133197
 Expires 10/2/2015



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

Air Conditioning Change out Affidavit

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

Residential Commercial _____
 Package Unit ___ Yes No (Use Condenser side of form below for equipment listing)
 Duct Replacement ___ Yes No - Refrigerant line replacement ___ Yes No
 Flushing Existing Refrigerant lines ___ Yes ___ No - Adding Refrigerant Drier ___ Yes No
 Rooftop A/C Stand Installation ___ Yes No - Curb Installation ___ Yes No
 Smoke Detector in Supply (over 2000 CFM) ___ Yes ___ No

One form required for each A/C system installed

^{AWI}
 3799429

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: Pleem Model# R411M4821
 Volts 208/230 CFM's 1600 Heat Strip 10 Kw
 Min. Circuit Amps 50 Wire gauge #6
 Max. Breaker size 60 Min. Breaker size 50
 Ref. line size: Liquid 3/8 Suction 7/8
 Refrigerant type R410A
 Location: Existing New _____
 Attic/Garage/Close(d) (specify) _____
 Access: _____

Condenser: Mfg: Pleem Model# NAJM49A01
 Volts 208/230 SEER/EER 16 BTU's 46000
 Min. Circuit Amps 29 Wire gauge 8
 Max. Breaker size 50 Min. Breaker size 30
 Ref. line size: Liquid 3/8 Suction 7/8
 Refrigerant type R410A
 Location: Existing New _____
 Left/Right/Rear/Front/Roof _____
 Condensate Location _____

NOTE: CONTRACTOR MUST SUPPLY A PROPER LADDER IF REQUIRED FOR INSPECTION

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: Goodman Model# N/A
 Vol 208/230 CFM's 1600 Heat Strip 9.6 Kw
 Min. Circuit Amps 48 Wire gauge #6
 Max. Breaker size 60 Min. Breaker size 50
 Ref. line size: Liquid 3/8 Suction 7/8
 Refrigerant type R-22
 Location: Ext. New _____
 Attic/Garage/Close(d) (specify) _____
 Access: _____

Condenser: Mfg: Goodman Model# N/A
 Volts 208/230 SEER/EER ✓ BTU's 48000
 Min. Circuit Amps 24.2 Wire gauge 8
 Max. Breaker size 40 Min. Breaker size 30
 Ref. line size: Liquid 3/8 Suction 7/8
 Refrigerant type R-22
 Location: Ext. New _____
 Left/Right/Rear/Front/Roof _____
 Condensate Location _____

Certification:

I hereby certify that the information entered on this form accurately represents the equipment installed and further that this equipment is considered matched as required by FBC - R (N)1107 & 1108

Signature [Signature]

Date 4.16.13

No Escalator than 10 AM ESTIMATE



AIR CONDITIONING Unit CAC00-11198

Area 9 Unit Delivery One
Fort Pierce, FL 34952

Marion: (772) 283-0924
St. Lucie: (772) 488-0113
Toll Free: 1-877-NBAIR

NAME Judy Combs
ADDRESS 140 S Sewalls Point
Road Street Ft 34991a
Phone: _____ Fax: _____

DATE 4-16-13
JOB LOCATION Sewalls Point
FPL Acct/Meter # 0518507561

- THERMOSTATS**
- Digital Thermostat Dig New
 - Hardwired
- ELECTRIC INDOOR AND OUTDOOR**
- New Disconnect Box & Wiring
 - High Voltage Wiring
 - New Weatherproof Conduit & Connections For Outside Unit
 - New Weatherproof Conduit & Connections For Inside Unit
- AIR DISTRIBUTION/DUCT MODIFICATION**
- Increase Return Duct Size to: _____
 - New Return Air Grille Size to: _____
 - Modify New Fiberglass Return Plenum _____
 - Modify New Fiberglass Supply Air Plenum _____
 - Strap, Hang and Support New Plenums
 - Seal Wall Cracks and Cracks to not Draw Air
 - Liquid Mastic Sealant All New Duct Connections
 - New Wood Top & Paint White
 - Polyboard Insulate Return Air Platform & Mastic Seal
 - Seal Off Return Air Platform for Air Leaks
- FILTRATION / CLEAN AIR**
- GWT Poly Media Air Filter 7 23 5 1 1 1
 - High-Efficiency Cleaner _____
 - Ultra Violet Light System _____
- Main panel breakers may need to be resized to new unit requirements, not included in our cost

- PIPING & FITTINGS**
- Repipe Suction & Liquid Lines at new Unit. Insulate New Suction Line & Secure Low Voltage Wiring.
 - New Refrigerant Copper Tubing Line Set Overhead Exterior Line cover includes Armaflex & Detailed Workmanship.
- RECLAIM / EVACUATION / REFRIGERANT**
- Reclaim Refrigerant According to EPA Regulations
 - Liquid Line Drier Suction Line Drier
 - Triple Evacuation to Remove Moisture & Impurities
 - Refrigerant Weighed In to Factory Specifications
- EQUIPMENT ACCESSORIES**
- Precast Concrete Slab
 - Condensate Pump, Power Cord & Fuse
 - Vibration Pads under the Outdoor Unit
 - Emergency Drain Pan & Support
 - Overflow Water Safety Switch
 - 5 Minute Time Delay/Compressor Protector
 - Humming Strap Outdoor Unit to Ground
 - Potential Relay & Start Capacitor for Compressor
 - Clean, Treat & Flush Drain Line System
- *Please Note - Duct Sealing if Required by Florida Statutes Code 101.4.7.1.1 \$85/Hr Plus Materials**

Warranties (Under Terms of Warranty, Routine Scheduled Maint. Must be Performed on System)

A		B		C	
AH Model #	<u>24114U4901</u>	AH Model #		AH Model #	
Cond Model #	<u>14ATM49A01</u>	Cond Model #		Cond Model #	
SEER <u>16</u> Aux. Heat <u>10</u> KW	SEER _____ Aux. Heat _____ KW	SEER _____ Aux. Heat _____ KW	SEER _____ Aux. Heat _____ KW	SEER _____ Aux. Heat _____ KW	SEER _____ Aux. Heat _____ KW
Compressor _____ year	Compressor _____ year	Compressor _____ year	Compressor _____ year	Compressor _____ year	Compressor _____ year
Condenser Coil _____ year	Condenser Coil _____ year	Condenser Coil _____ year	Condenser Coil _____ year	Condenser Coil _____ year	Condenser Coil _____ year
Evaporator Coil _____ year	Evaporator Coil _____ year	Evaporator Coil _____ year	Evaporator Coil _____ year	Evaporator Coil _____ year	Evaporator Coil _____ year
Manufacture Parts _____ year	Manufacture Parts _____ year	Manufacture Parts _____ year	Manufacture Parts _____ year	Manufacture Parts _____ year	Manufacture Parts _____ year
Labor _____ year	Labor _____ year	Labor _____ year	Labor _____ year	Labor _____ year	Labor _____ year
Job Quote \$ <u>5100</u>	Job Quote \$ _____	Job Quote \$ _____	Job Quote \$ _____	Job Quote \$ _____	Job Quote \$ _____
FPL Rebate \$ <u>700</u>	FPL Rebate \$ _____	FPL Rebate \$ _____	FPL Rebate \$ _____	FPL Rebate \$ _____	FPL Rebate \$ _____
Discounts \$ _____	Discounts \$ _____	Discounts \$ _____	Discounts \$ _____	Discounts \$ _____	Discounts \$ _____
Amount Due By Customer \$ <u>4400</u>	Amount Due By Customer \$ _____	Amount Due By Customer \$ _____	Amount Due By Customer \$ _____	Amount Due By Customer \$ _____	Amount Due By Customer \$ _____

We hereby propose to complete work as specified above for the sum of \$ _____

Payment options: Finance _____ (Subject to approval) Check _____ Cash _____ Credit Card _____

Finance Plan: _____ Total _____ Down payment = _____ Amount financed _____

PAYMENT TERMS: 25% deposit required with balance upon completion of installation (unless 100% financed)

SPECIAL COMMENTS & MODIFICATIONS: _____

To be installed Friday April 16th

Call 300 to put Condenser on Stand

includes inspection & seal



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2013.

Certificate of Product Ratings

AHRI Certified Reference Number: 3799429

Date: 4/16/2013

Product: Split System: Air-Cooled Condensing Unit, Coil with Blower

Outdoor Unit Model Number: 14AJM49

Indoor Unit Model Number: RHLL-HM4821+RCSL-H*4821

Manufacturer: RHEEM MANUFACTURING COMPANY

Trade/Brand name: RHEEM 14AJM SERIES

Manufacturer responsible for the rating of this system combination is RHEEM MANUFACTURING COMPANY

Rated as follows in accordance with AHRI Standard 210/240-2008 for Unitary Air-Conditioning and Air-Source Heat Pump Equipment and subject to verification of rating accuracy by AHRI-sponsored, independent, third party testing:

Cooling Capacity (Btuh):	46000*
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.00*

* Ratings followed by an asterisk (*) indicate a voluntary rerate of previously published data, unless accompanied with a WAS, which indicates an involuntary rerate.

DISCLAIMER

AHRI does not endorse the product(s) listed on this Certificate and makes no representations, warranties or guarantees as to, and assumes no responsibility for, the product(s) listed on this Certificate. AHRI expressly disclaims all liability for damages of any kind arising out of the use or performance of the product(s), or the unauthorized alteration of data listed on this Certificate. Certified ratings are valid only for models and configurations listed in the directory at www.ahridirectory.org.

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CERTIFICATE VERIFICATION

The information for the model cited on this certificate can be verified at www.ahridirectory.org, click on "Verify Certificate" link and enter the AHRI Certified Reference Number and the date on which the certificate was issued, which is listed above, and the Certificate No., which is listed below.



Air-Conditioning, Heating, and Refrigeration Institute

©2013 Air-Conditioning, Heating, and Refrigeration Institute

CERTIFICATE NO.: 130106179833562115



DesignStar Load Calculation

Results are intended for use with Rheem heating and cooling systems

The New Degree of Comfort™

Customer Information

Street Address	140 S Sewalls Point Road, Stuart, FL 34996
Latitude, Longitude	26.6726°, -80.0706°
House Square Footage	2050 sq. ft.
Name	Judith Combs
Phone	561-222-4875
Email	example@mail.com

House Information

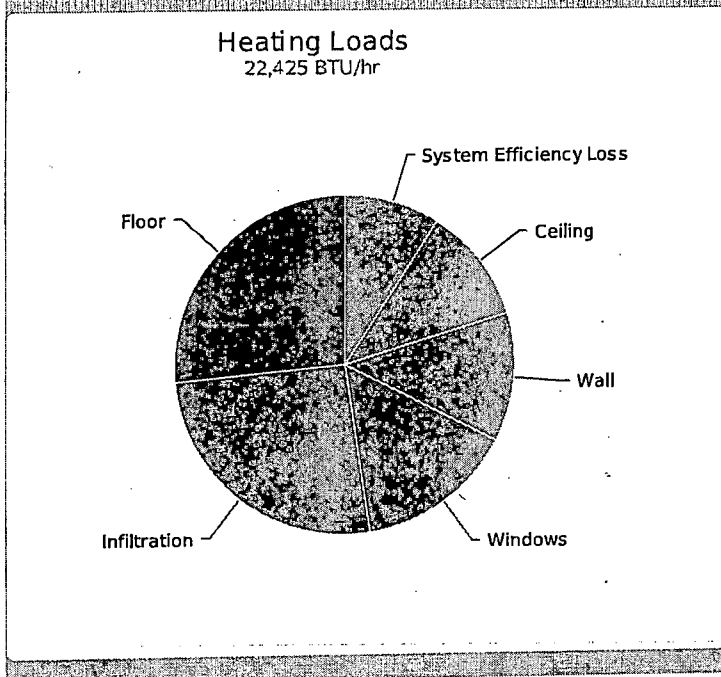
SHR	.75
Number of residents	2
Ceiling height	9
Wall U-value R-value	0.09 11
Floor U-value R-value	0.2 5
Ceiling U-value R-value	0.053 19
Window U-value	0.5
Window SHGF	0.85
Moisture grains	64
Duct loss %	10
Duct gain %	10
Cooling infiltration (ACH)	0.6
Heating infiltration (ACH)	0.8
Winter ventilation	0
Summer ventilation	0

Design Conditions

Outdoor	Heating	Cooling
Dry bulb (°F)	47	90
Daily range		M
Relative humidity		50%
Moisture difference		64
Indoor	Heating	Cooling
Indoor temperature (°F)	70	75
Design temperature difference(°F)	23	15

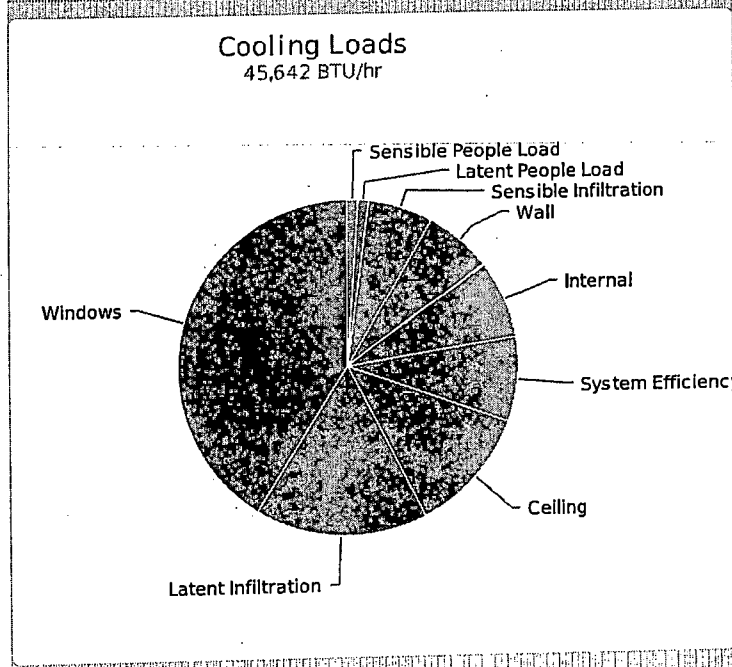
Heating Loads

Area	Btuh	% of load
Wall	2763	12.3
Floor	5943	26.5
Ceiling	2499	11.1
Windows	3393	15.1
Infiltration	5788	25.8
System Efficiency Loss	2039	9.1
Total	22425	

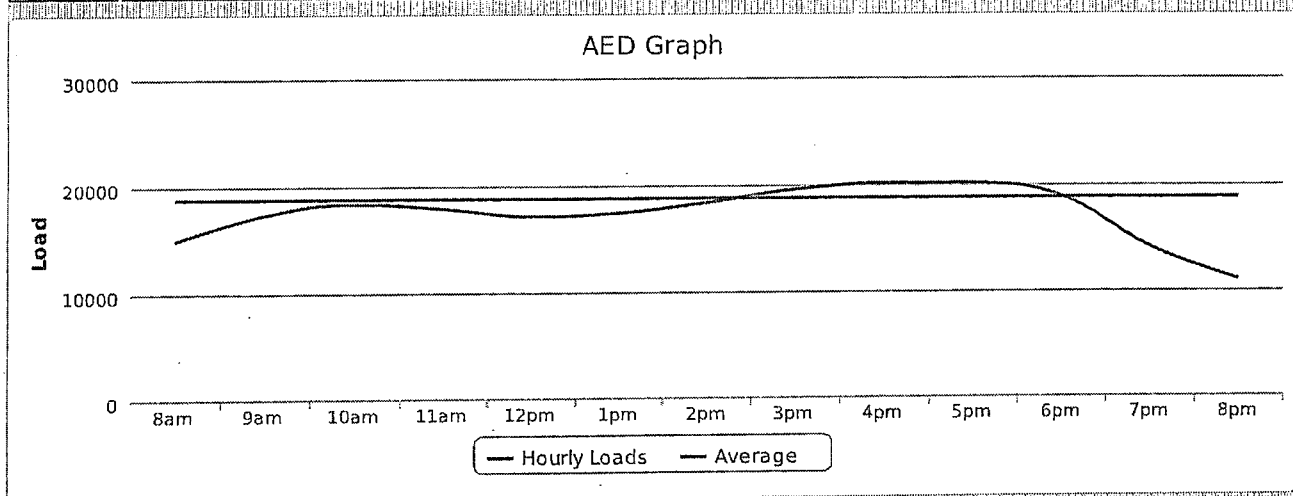


Cooling Loads

Area	Btuh	% of load
Wall	3004	6.6
Ceiling	5433	11.9
Windows	18753	41.1
Sensible Infiltration	2831	6.2
Latent Infiltration	7467	16.4
System Efficiency Gain	3749	8.2
Internal	3485	7.6
Sensible People Load	460	1
Latent People Load	460	1
Total	45642	
Sensible load	37714	
Latent load	7927	
SHR	0.83	
Capacity at 75 SHR	4.19 Tons	



Adequate Exposure Diversity



Equipment selection

System equipment selection will be made using the following derived values.

Glass (E)	149 sq. ft.
Glass (S)	21 sq. ft.
Glass (N)	21 sq. ft.
Glass (W)	104 sq. ft.
Summer Outdoor	90°F
Summer Wet Bulb	78°F
Summer Indoor	75°F
Summer Design Grains	50%
Winter Outdoor	47°F
Winter Indoor	70°F
Sensible Cooling	37,714 Btuh
Latent Cooling	7,927 Btuh
Required Cooling Airflow	1,714 CFM
Sensible Heating	22,425 Btuh
Required Heating Airflow	291 CFM

All calculations are based upon approved hvac industry standards and procedures, and comply with all local, state and federal code requirements. All computed results are Estimates. Product provided by Energy Design Systems and Idea Tree

Custom Metal Manufacturer
Consulting Engineer

ANCHOR CLIPS Installer's Guide

Douglas W. Lowe, P.E.
FLA# 13355
1205 Millennium Parkway
Brandon, FL 33511

WARNING: HAZARDOUS VOLTAGE. DISCONNECT POWER BEFORE SERVICING

PART NUMBER

- #771 (4 pk)
- #772 (100 bar)
- #773 (4 pk including hardware)

CONSTRUCTION

16 gauge galvanized steel, G-90 rated for corrosion coastal applications.

PACKAGING DETAILS

All anchor clips are supplied as per package quantities described above.

INSTALLATION

Minimum of 4 clips required per condenser unit.
Minimum of 2 #14 x 3/4" screws with neoprene washer required to fasten clip to condenser unit.
1/4" x 1 3/4" Tape-on screw required to fasten clip to condenser pad.

Locate the anchor clips to fit comfortably between condenser unit and pad.

Adjust clip accordingly to fit on condenser unit and screw together, at the same time ensuring that the base of the clip is still in contact with the pad.

All hardware must be fastened prior to connecting refrigerant lines and electrical power to the unit.
Suitable for ground mounted units.

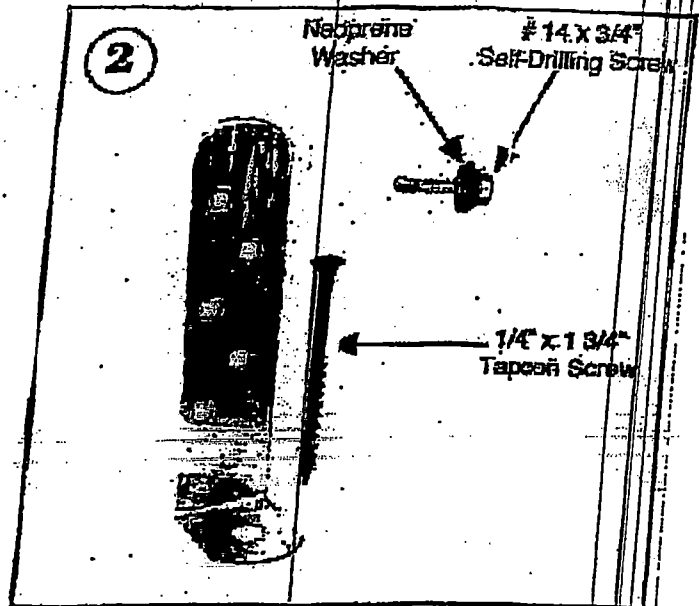
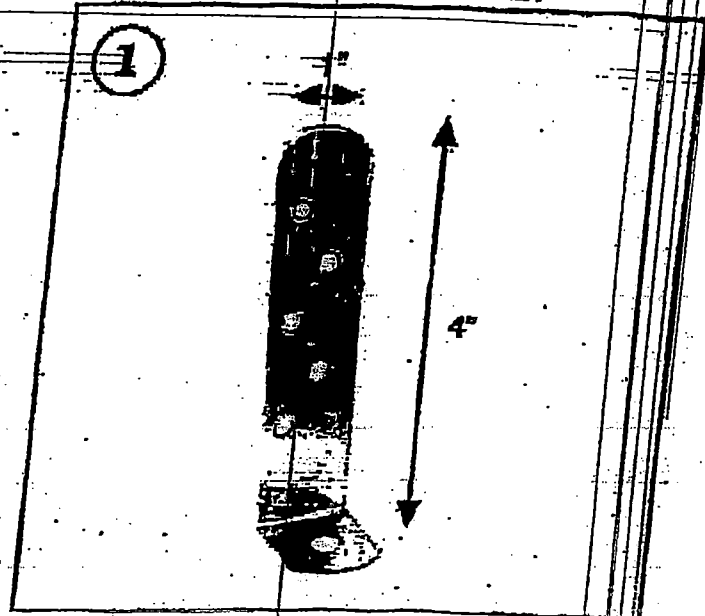
Anchor clip design meets requirements of The Florida Building Code 2007 (Building) Chapter 301.12 for wind resistance up to 140 MPH.

FEATURES

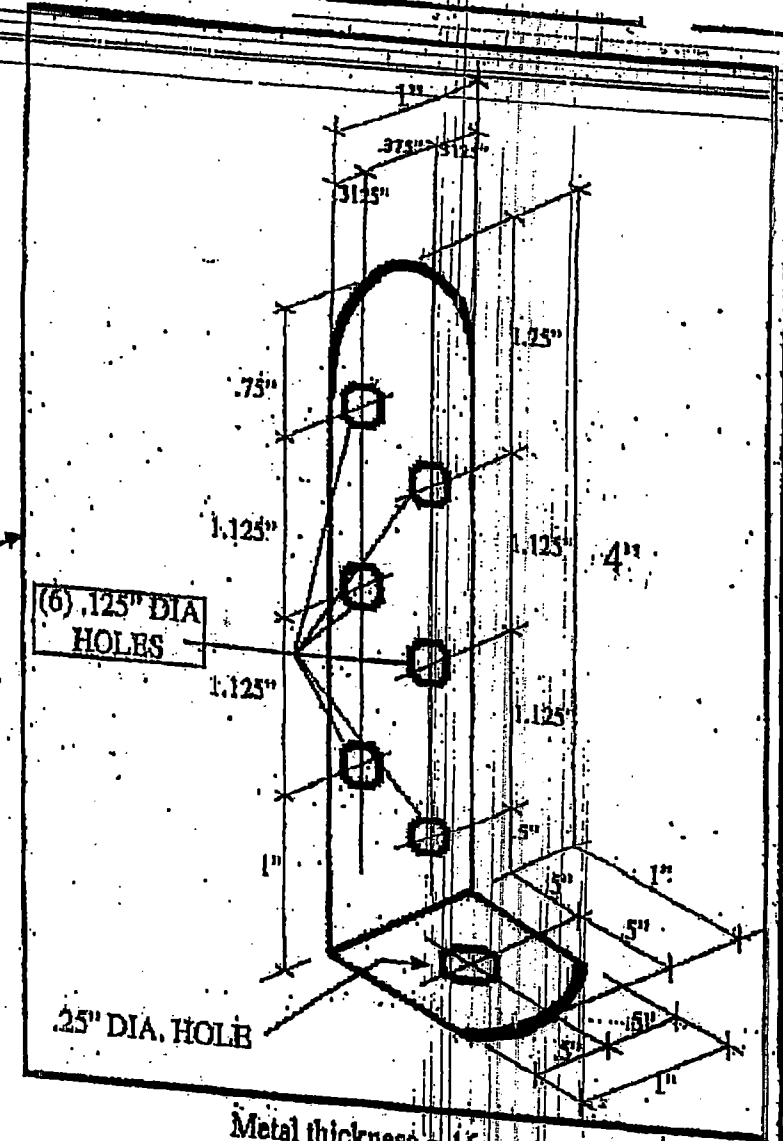
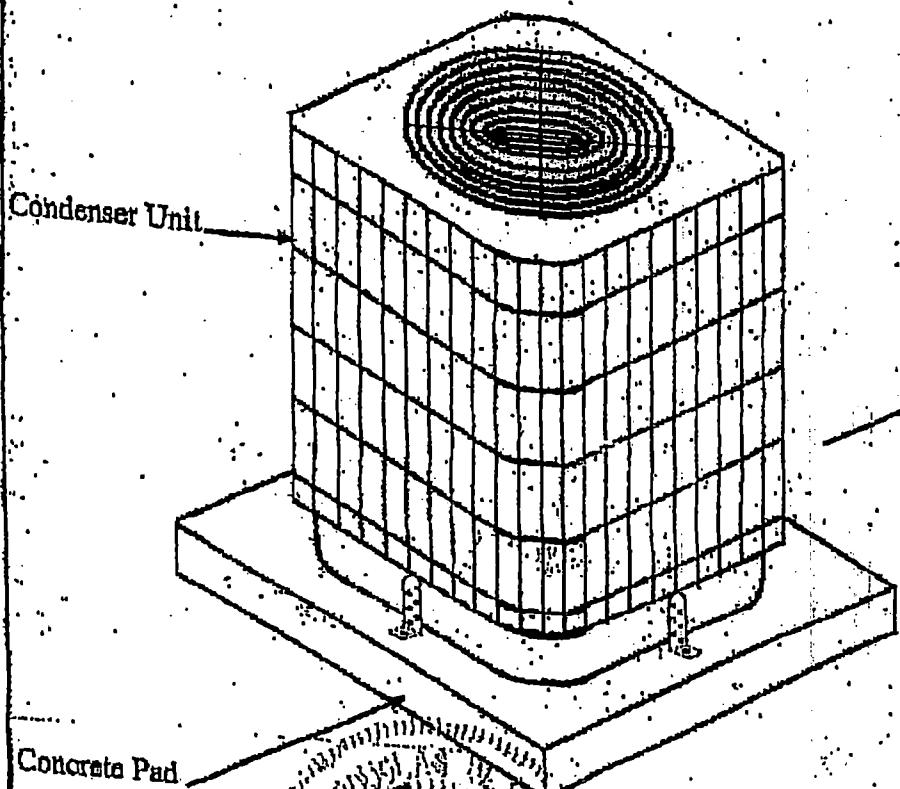
The use of "sized to fit" screw holes compared to slots means that security is never compromised. A tight, secure fit between pad and condenser ensures security for the condenser and offers great assurance during extreme weather conditions.

NOTE

Above installation instruction suitable for up to 5 ton units.



Anchor Clip



[Signature]
 2-14-08

The Metal Shop
 1139 Eldridge Street
 Clearwater
 FL 33765

PH: (727) 441-2492
 Fax: (727) 442-8499
 Web: www.metalsshop.org

Consulting Engineer:
 Douglas W. Lowe, P.E.
 FLA # 19958
 1206 Millennium Parkway
 Brandon, FL 38511

Revision Date:
 2/14/08

Drawn by:
 K.P.R.
 Scale - Not to scale

Page:
 1 of 1

I-S

SCALE	AS NOTED
DATE	9-14-57
ENGINEER	J. J.
DRAWN	J. J.

A/C UNIT ANCHORING DETAILS
 FABRYO CLIPS AS
 MANUFACTURED BY THE
 ORIGINAL PAN CO. FOR USE
 UNDER FLORIDA BUILDING CODE



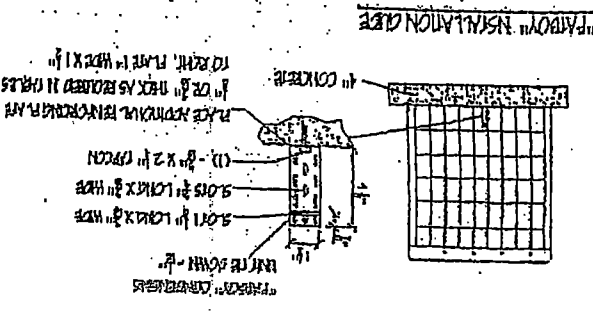
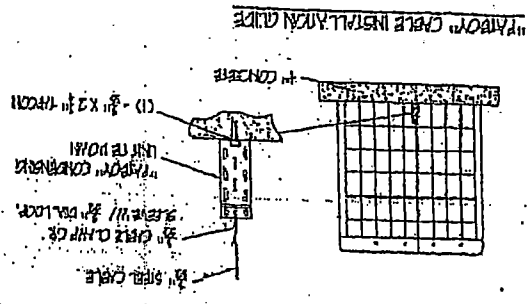
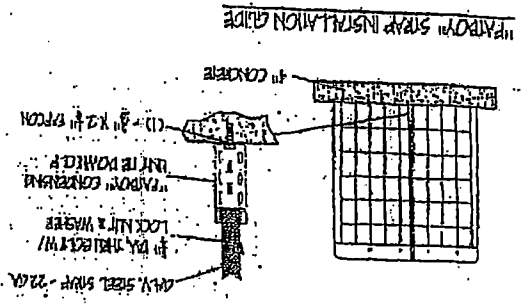
REVISIONS	
NO.	DESCRIPTION

GENERAL NOTES:
 1. FABRYO CLIP SHALL BE MANUFACTURED BY THE ORIGINAL PAN CO. FOR USE UNDER FLORIDA BUILDING CODE.
 2. CONCRETE TO WHICH FABRYO CLIP IS ATTACHED TO BE MINIMUM OF 3000 PSI.
 3. FABRYO CLIP SHALL BE ATTACHED TO CONCRETE WITH FABRYO CLIP WEDGES.
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 20. FABRYO CLIP SHALL BE ATTACHED TO CONCRETE WITH FABRYO CLIP WEDGES.

CLIP SIZE	CLIP TYPE	CLIP WEIGHT	CLIP LENGTH	CLIP WIDTH	CLIP THICKNESS
1/2"	1"	0.25	1.5"	1.0"	0.125"
3/4"	1"	0.38	1.5"	1.0"	0.125"
1"	1"	0.50	1.5"	1.0"	0.125"
1 1/4"	1"	0.75	1.5"	1.0"	0.125"
1 1/2"	1"	0.88	1.5"	1.0"	0.125"
1 3/4"	1"	1.00	1.5"	1.0"	0.125"
2"	1"	1.12	1.5"	1.0"	0.125"
2 1/4"	1"	1.25	1.5"	1.0"	0.125"
2 1/2"	1"	1.38	1.5"	1.0"	0.125"
2 3/4"	1"	1.50	1.5"	1.0"	0.125"
3"	1"	1.62	1.5"	1.0"	0.125"
3 1/4"	1"	1.75	1.5"	1.0"	0.125"
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4"	1"	2.12	1.5"	1.0"	0.125"
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7 1/2"	1"	3.88	1.5"	1.0"	0.125"
7 3/4"	1"	4.00	1.5"	1.0"	0.125"
8"	1"	4.12	1.5"	1.0"	0.125"
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SEE FABRYO CLIP MANUFACTURER'S INSTRUCTIONS FOR FABRYO CLIP WEDGES AND FABRYO CLIP WEDGES.
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TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel: 772-287-2455 Fax 772-220-4765

FLORIDA ENERGY CONSERVATION CODE

Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912)

Owner: Judith Combs Contractor name: NISAR A/C
Street address: 140 S. Sewalls Pt Rd Jurisdiction: _____
City: Stuart Permit No.: _____
Zip: 34996 Final inspection date: _____

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101.4.7.1.1 as indicated below:

- Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent.
- Ducts are located within conditioned space. (Section 101.4.7.1.1 exception 1)
- The joints or seams are already sealed with fabric and mastic (Section 101.4.7.1.1 exception 2)
- System was tested (see below) and repairs were made as necessary – (Section 101.4.7.1.1 exception 3)

Signature: [Signature] Date: 4.26.13
Printed Name: Philip Nisa Jr
Contractor License #: CAAC041194

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in. w.c.).

Signature: _____ Date: _____
Printed Name: _____

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **4-30-13** Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10415	Smith 11 Palmetto Ruk Homes	UG plumbing UG mech AC	PASS	INSPECTOR <i>JA</i>
X	JA			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10412	Smith 19 Banyan Rd Service America	Final AC	PASS	CLOSE INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10429	Combs	Final AC	PASS	CLOSE
980 930	4140 S Sewalls Nis An		PASS	CLOSE INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10397	Krzepisz 10 RIO VISTA On Shore	Dry IN/ METAL IN-PROGRESS	PASS	INSPECTOR <i>JA</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	QUAIL RUN IRRIGATION ROTTEN PANEL ELECTRICAL			INSPECTOR

10607

FENCE



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

BUILDING PERMIT CARD

THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	10607	DATE ISSUED:	SEPTEMBER 26, 2013
SCOPE OF WORK:	FENCE		
CONTRACTOR:	OB		
PARCEL CONTROL NUMBER:	133841001-000-000113	SUBDIVISION	ARCHIPELAGO - L 1
CONSTRUCTION ADDRESS:	140 S SEWALLS PT RD		
OWNER NAME:	COMBS		
QUALIFIER:	OB	CONTACT PHONE NUMBER:	561-222-4875

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

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

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

INSPECTIONS

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

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: _____

Date: 9/13/13

OWNER/LESSEE NAME: Judith Marie Combs Phone (Day) 561 222 4875 (Fax) N/A

Job Site Address: 140 S Sewalls Pt. Rd City: Stuart State: FL Zip: 34996

Legal Description Residential Home Parcel Control Number: _____

Fee Simple Holder Name: _____ Address: _____

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

*SCOPE OF WORK (PLEASE BE SPECIFIC): 4' BIK ALUMINUM FENCE - NO POOL

WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application) YES [checked] 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: \$ 1800.00 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out) Is subject property located in flood hazard area? VE10 AE9 AE8 X FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ (Fair Market Value of the Primary Structure only, Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: _____ Phone: _____ Fax: _____

Qualifiers name: _____ Street: _____ City: _____ State: _____ Zip: _____

State License Number: _____ OR: Municipality: _____ License Number: _____

LOCAL CONTACT: _____ Phone Number: _____

DESIGN PROFESSIONAL: _____ Fla. License# _____

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

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

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

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

WARNINGS TO OWNERS AND CONTRACTORS:

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

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

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

OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE: _____

State of Florida, County of: Martin

On This the 23 day of Sept 2013

by Judith M Combs who is personally known to me or produced by [signature]

As identification: Valerie Combs Notary Public

My Commission Expires: _____

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: _____

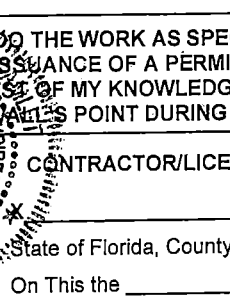
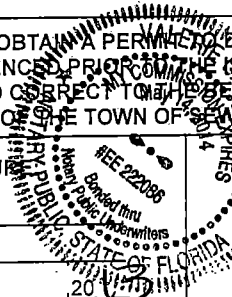
State of Florida, County of: _____

On This the _____ day of _____ 20____

by _____ who is personally known to me or produced _____

As identification: _____ Notary Public

My Commission Expires: _____



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



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

**OWNER/BUILDER QUESTIONNAIRE AND DISCLOSURE STATEMENT
 MUST BE COMPLETED AND REVIEWED PRIOR TO PERMIT ISSUANCE**

**APPLICABLE ONLY TO OWNER-OCCUPIED SINGLE FAMILY RESIDENCES
 AND COMMERCIAL IMPROVEMENTS LESS THAN \$75,000 IN VALUE**

NOTICE: FLORIDA STATUTE 489 REQUIRING CONSTRUCTION TO BE DONE ONLY BY LICENSED CONTRACTORS PROVIDES AN EXEMPTION FROM LICENSING FOR A PROPERTY OWNER WHO ACTS AS HIS/HER OWN CONTRACTOR UNDER SPECIFIC CONDITIONS. ANSWERS TO THE FOLLOWING QUESTIONS ARE ESSENTIAL TO DETERMINE IF THOSE STATE QUALIFICATIONS ARE SATISFIED BY AN OWNER/BUILDER APPLICANT.

ALL QUESTIONS MUST BE ANSWERED. IF A QUESTION DOES NOT APPLY, INDICATE BY WRITING "N/A"

Owner/Builder Applicant Name: Judith Combs

Site address of the proposed building work: 140 S Sewall's Pt Rd

Name of legal title owner of the address above: Judith M. Combs

Describe the scope of work for the proposed new construction: put up a fence

Name of Architect of Record: _____ Structural Engineer of Record: _____

Who will supervise the trade work to meet the applicable code? Homeowner

What provisions have you made for Liability and Property Damage Insurance? N/A

What provisions exist for withholding Social Security and Federal Income Taxes, as required by Federal Law, from wages paid to people you hire who are not licensed? N/A

What previous Owner/Builder improvements have you done in the State of Florida?

Location: 8661 SE Marina Bay Dr Scope of Work Done: Landscaping Year: 2005

Location: 8661 SE Marina Bay Dr Scope of Work Done: Landscaping Year: 2008

What code books do you have available for reference? Building: _____

Electric: _____ Plumbing: _____ HVAC: _____

Other: _____

I have internet access and will view The Florida Building code at www.floridabuilding.org YES NO

Do you understand that as the permit holder you are liable for following all Local, County, State and Federal codes, laws and requirements, and you are also liable for anyone injured on the construction site? yes (yes/no)

Have you consulted with your Homeowner's Insurance Agent? Lender? _____ Attorney? _____

In order to assure your success in this project, please signify your awareness that the function of the building department is to issue you a building permit and verify code compliance through plan review and the inspection process. I am aware that town staff is not obligated to offer supervision, design or instructional advice prior or during my project. me (initials).



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

OWNER/BUILDER DISCLOSURE STATEMENT

NOTICE: STATE LAW REQUIRES THAT ALL PERMITTING AGENCIES PROVIDE INDIVIDUALS SUBMITTING APPLICATIONS FOR OWNER/BUILDER PERMITS THE FOLLOWING INFORMATION:

1. THE TOWN OF SEWALL'S POINT CODE OF LAWS AND ORDINANCES REQUIRES THAT ANY PERSON DESIRING TO ENGAGE IN BUSINESS AS A CONTRACTOR IN THE TOWN OF SEWALL'S POINT BE A HOLDER OF A CERTIFICATE OF COMPETENCY.
2. FLORIDA STATUTES 489.103 (7) ALLOWS YOU, AS A PROPERTY OWNER, AN EXEMPTION TO CONSTRUCT OR IMPROVE A SINGLE FAMILY DWELLING AND ACCESSORY-USE STRUCTURES ON SAID PROPERTY FOR YOUR OWN USE OR OCCUPANCY WITHOUT HAVING A CERTIFICATE OF COMPETENCY.
3. AS AN OWNER/BUILDER, YOU MUST PHYSICALLY PERFORM OR MATERIALLY SUPERVISE ALL CONSTRUCTION/IMPROVEMENTS SPECIFIED ON YOUR OWNER/BUILDER PERMIT AND YOU ARE TOTALLY RESPONSIBLE FOR ALL ACTIVITIES ASSOCIATED THEREWITH. OWNER/BUILDERS WHO WISH TO DO ELECTRICAL OR PLUMBING WORK MUST PASS A SHORT OPEN BOOK QUIZ ADMINISTERED BY THE BUILDING DEPARTMENT.
4. IF YOU DO NOT PHYSICALLY PERFORM A SPECIFIC PHASE OF SAID CONSTRUCTION/IMPROVEMENT, BUT CHOOSE TO SUB-CONTRACT IT, THEN SUCH CONSTRUCTION/IMPROVEMENT MUST BE SUB-CONTRACTED TO A LOCALLY LICENSED OR STATE CERTIFIED CONTRACTOR.
5. YOU MAY NOT HIRE AN UNLICENSED INDIVIDUAL WHO IN ANY MANNER ACTS IN THE CAPACITY OF A GENERAL CONTRACTOR, THAT IS, ONE WHO FULFILLS YOUR DUTIES UNDER PARAGRAPH (3) ABOVE.
6. UNDER AN OWNER/BUILDER PERMIT YOU MAY NOT CONSTRUCT A BUILDING WHICH YOU INTEND TO SELL OR LEASE. THE SALE OR LEASE, OR OFFERING FOR SALE OR LEASE, OF ANY SUCH STRUCTURE BY THE OWNER-BUILDER WITHIN 1 YEAR AFTER COMPLETION OF SAME CREATES A PRESUMPTION THAT THE CONSTRUCTION WAS UNDERTAKEN FOR PURPOSES OF SALE OR LEASE WHICH IS A VIOLATION OF THIS EXEMPTION.
7. THIS EXEMPTION SHALL NOT APPLY TO ANY PERSON WHO HAS LEASED, SOLD, OR OFFERED FOR SALE MORE THAN 1 STRUCTURE BUILT UNDER AN OWNER-BUILDER PERMIT IN ANY JURISDICTION WITHIN THE 5 YEARS IMMEDIATELY PRECEDING THE APPLICATION FOR A PERMIT.
8. THERE MUST BE A THIRTY-SIX (36) MONTH PERIOD BETWEEN THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY FOR THE INITIAL DWELLING AND THE SUBMITTAL OF AN OWNER/BUILDER APPLICATION FOR A SUBSEQUENT DWELLING. NO OTHER BUILDING PERMIT FOR A HOME SHALL BE ISSUED TO THAT OWNER/BUILDER, THE OWNER/BUILDER'S SPOUSE OR ANY MEMBER OF THE OWNER/BUILDER'S IMMEDIATE FAMILY UNDER EIGHTEEN YEARS OF AGE UNTIL THREE YEARS AFTER THE HOME BUILT UNDER THE FIRST BUILDING PERMIT HAS RECEIVED A CERTIFICATE OF OCCUPANCY.
9. ALL CONSTRUCTION IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDER PERMIT MUST BE IN STRICT COMPLIANCE WITH FLORIDA STATE STATUTE SECTION 489, SEWALL'S POINTS CODE OF LAWS AND ORDINANCES, ALL BUILDING & ZONING CODES AND REGULATIONS PERTAINING TO SINGLE FAMILY DWELLINGS, ACCESSORY USE STRUCTURES AS APPLICABLE.
10. YOUR OWNER/BUILDER EXEMPTION DOES NOT WAIVE ANY PERMIT CONDITIONS OR REQUIREMENTS OR WAIVE ANY PORTION OR PORTIONS OF ANY APPLICABLE BUILDING OR SWIMMING POOL CODES OR TOWN ORDINANCES.
11. ALL CONSTRUCTION/IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDING PERMIT MUST ALSO BE IN STRICT COMPLIANCE WITH ALL APPLICABLE ZONING REGULATIONS (QUESTIONS REGARDING ZONING REGULATIONS SHOULD BE DIRECTED TO THE TOWN OF SEWALL'S POINT AT 772-287-2455.)



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

12. YOU MUST BE FAMILIAR WITH AND CALL FOR THE REQUIRED INSPECTIONS OF ALL CONSTRUCTION/IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDER PERMIT.

13. AS AN OWNER/BUILDER YOU MUST VERIFY THAT ALL INDIVIDUALS OR FIRMS ENGAGED IN CONSTRUCTION/IMPROVEMENTS ACTIVITIES UNDER YOUR OWNER/BUILDER PERMIT ARE PROPERLY LICENSED AS REQUIRED BY STATE LAW OR LOCAL ORDINANCE.

14. ANY PERSON WORKING ON YOUR BUILDING WHO IS NOT LICENSED MUST WORK UNDER YOUR DIRECT SUPERVISION AND MUST BE EMPLOYED BY YOU, WHICH MEANS THAT YOU MUST DEDUCT F.I.C.A. AND WITHHOLDING TAX AND PROVIDE WORKERS' COMPENSATION FOR THAT EMPLOYEE, ALL AS PRESCRIBED BY LAW.

15. I, AS AN OWNER/BUILDER, IN CONSIDERATION OF A BUILDING PERMIT ISSUED BY SEWALL'S POINT, FLORIDA, AGREE TO INDEMNIFY AND HOLD HARMLESS SAID SEWALL'S POINT, FLORIDA, ITS OFFICERS AND AGENTS FROM ANY AND ALL CLAIMS, DAMAGES, OR EXPENSES THAT SEWALL'S POINT MAY BE LIABLE FOR WHICH ARISE FROM THE CONSTRUCTION/IMPROVEMENTS ACCOMPLISHED IN CONNECTION WITH SAID BUILDING PERMIT.

I HEREBY ACKNOWLEDGE THAT I HAVE THOROUGHLY READ AND COMPLETELY UNDERSTAND THE PRECEDING PAGE OF THE OWNER/BUILDER DISCLOSURE STATEMENT.

ON THIS 16th DAY OF Sept, 2013.

PROPERTY ADDRESS 140 S Sewalls Pt Rd

CITY Stuart STATE FL ZIP 34996

[Signature]
 SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 23 DAY OF Sept 2013

BY Judith M. Combs

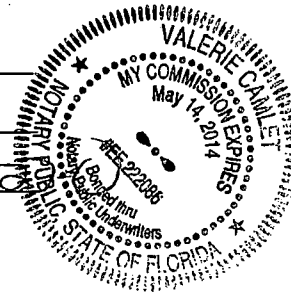
PERSONALLY KNOWN _____

OR PRODUCED ID

TYPE OF ID FID# C512-433-53-60

[Signature]

NOTARY SIGNATURE





(215) 362-8200
info@fencecity.com

Mon-Thu: 8am-5pm
 Fri: 8am-4pm
 Sat: 8am-Noon
 Sun: Closed

[About us](#)

[Contact us](#)

News:

We now carry **NyloDeck** composite deck products.



[Clearance Fences](#)

[Special Offers](#)

[Fence Installation](#)

Fences:

[Aluminum Fence](#)

[Pool Fence](#)

[Pet Fence](#)

[Privacy Fence](#)

[Decorative Fence](#)

[Security Fence](#)

[Residential Fence](#)

[Commercial Fence](#)

[Industrial Fence](#)

[Farm Fence](#)



48" 2-Rail Aluminum Fence

48" 2 rail aluminum fence. GREAT FOR SWIMMING POOLS. Assembly Required (Gates are fully assembled).

This ready to assemble fence meets the BOCA pool fence safety requirements and provides your landscape with the look of old-fashioned wrought-iron fence, without the worries of rust or maintenance. This fence is made in the USA and can be shipped to you or picked up (Black Only) at our facility. Assembly is required. Pickets, posts and rails are pre-punched with holes for easy assembly.



[See this photo in a larger size](#)

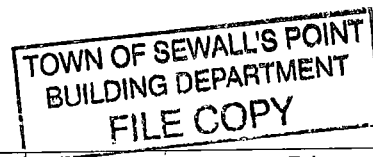
Fence Specifications:

- Material:** Aluminum
- Assembly Type:** Assembly-Required
- Style:** Prestige
- Height:** 48 inches
- Minimum Height:** 48 inches at its lowest point
- Picket Spacing:** 3.875 inches between pickets
- Grade:** Residential
- Fence Structure:** Ornamental
- Product Style Number:** R2E-48-FLT

Available Colors:



If you place order by 2 pm Eastern Standard Time (Monday - Friday), the materials for your order will be ready (or will ship) in 2 days. For products that have shipping available, shipments are picked-up Monday through Saturday.



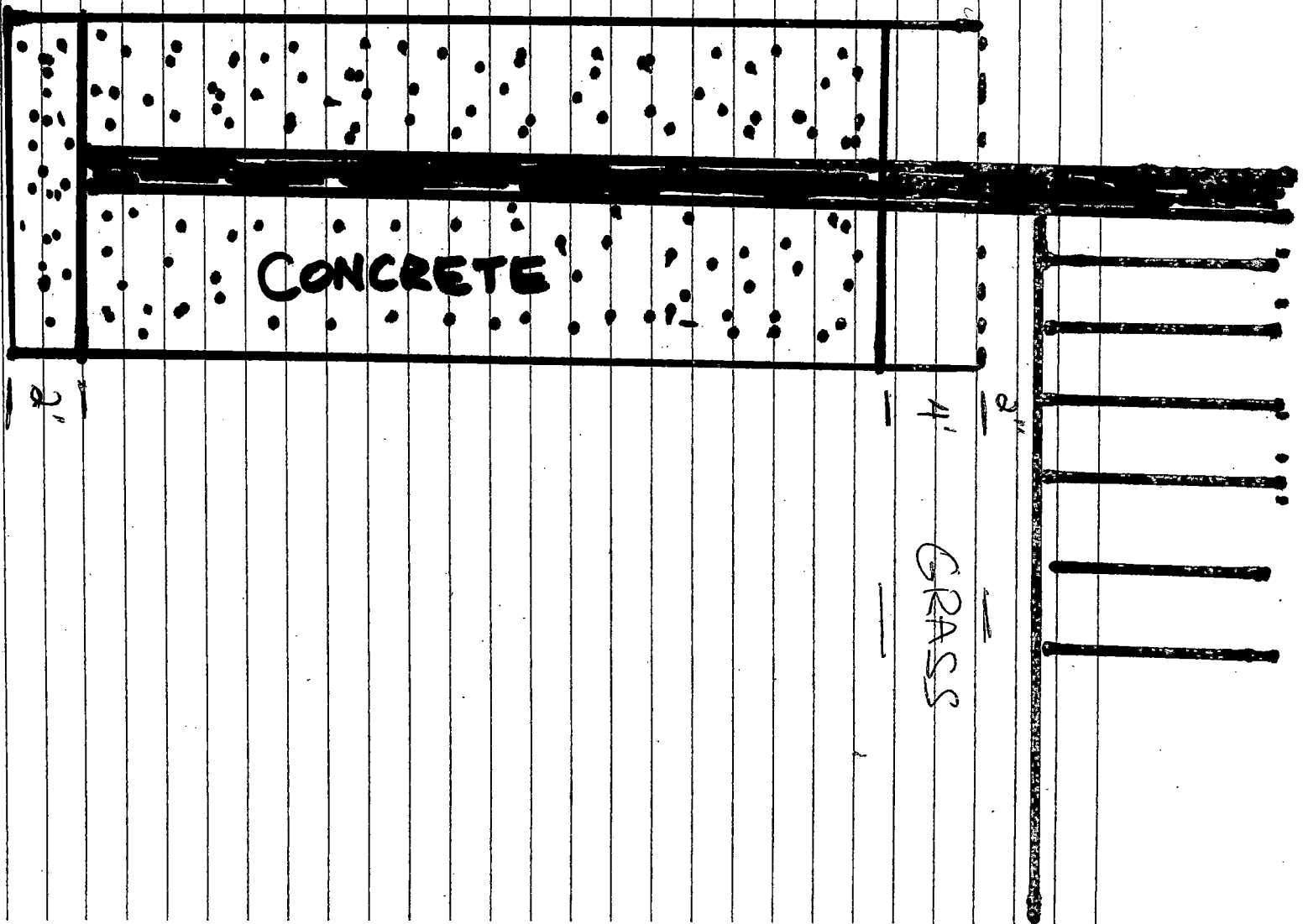
Fence prices:

Part Type	Width	Price
section	6 feet	\$39.95
end post	-	\$18.95
line post	-	\$18.95
corner post	-	\$18.95
gate post	-	\$18.95
gate	3 feet	\$230.69
gate	4 feet	\$245.69
double gate	6 feet	\$450.96
double gate	8 feet	\$470.96
pair-self-closing-hinge	-	\$30.00
magna-latch	-	\$58.00

View [shipping rates](#).
 List of [states and shipping zones for 48" 2-Rail Aluminum Fence](#).

Get an instant quote

HOLE 18" DEEP



CONCRETE

4' GRASS

FENCE FOOTER

JUDY COMBS

check out @ 11:00 AM

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

Mon

Tue

Wed

Thur

Fri

12-9-13

Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10549	Chontos 83 S Sewalls Modern Bressan elect	Service change Meter	PASS	CMU FPL ✓ INSPECTOR <i>JK</i>
Tree	Diaz 15 Palm Rd	Tree	OK	INSPECTOR
Tree	Martin 23 Island	Tree	OK	INSPECTOR
10609	Combs 140 S Sewalls OB	Final Fence	PASS	CLOSE INSPECTOR <i>JK</i>
10693	Bailey 117 N Sewalls Driftwood	stem wall footing	PASS	INSPECTOR <i>JK</i>
10696	Danielson 161 S River OB	Final dock & boathift	PASS	CLOSE INSPECTOR <i>JK</i>
10690	Schepis 18 Castle Hill Mastercare Shuren	Final Shutter	PASS	CLOSE INSPECTOR <i>JK</i>

TREE

TOWN OF SEWALL'S POINT, FLORIDA

Date OCTOBER 31 ~~19~~ 2003 TREE REMOVAL PERMIT No 2133

APPLIED FOR BY HEITZACH (Contractor or Owner)

Owner 140 S. SEWALL'S PT

Sub-division _____, Lot _____, Block _____

Kind of Trees SEA GRAPE SABA PALM SCHEFLERA

No. Of Trees: REMOVE 3

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 15.00

Signed, [Signature]
Applicant

Signed, [Signature]
Town Clerk

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

TOWN OF SEWALL'S POINT

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Large empty rectangular box for notes or drawings]

PROJECT DESCRIPTION _____

REMARKS _____

**TOWN OF SEWALL'S POINT
APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT**

Tree Defined: Any self-supporting, woody plant which normally grows to an overall height of at least fifteen (15) feet in the vicinity of the town. Replant and landscape trees shall be considered a tree.

No permit required for:

1. Trimming of trees unless it effectively removes it, meaning trimming or pruning to the extent that a plant's natural function is severely altered.
2. Trees with a diameter of less than one inch.

Permit Fee:

1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S.F.R.).

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, 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 Dan Hertzach **Address** 140 S. Sewall's Pt **Phone** _____

Contractor Shadetree **Address** 973 Industrial Blvd **Phone** 334-7010

No. of Trees: REMOVE 3 **Type:** Seagrape (decay & disease)

No. of Trees: RELOCATE _____ **WITHIN 30 DAYS** **Type:** 4' OA Sabal Palm (impair ability to see driveway)

No. of Trees: REPLACE _____ **WITHIN 30 DAYS** **Type:** 2 Schefflera

Written statement giving reasons: 1 seagrape (decay & disease), 1 Sabal palm & 2 Schefflera (impair ability to see driveway)

Signature of Applicant [Signature] **Date** 10/30/03







Approved by Building Inspector: [Signature] **Date** 10/21/03 **Fee:** 15.-

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

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/31, 20013 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6473	ZAVATKAY	FINAL GARAGE	Passed	close
①	6 COPAIRE ROAD	door		
	OVERHEAD			INSPECTOR: 
6330	BUSSEY	WINDOWS	Partial	
③	1 PALMETTO	(check Plumbing rough)	✓	
	WORRELL			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
Tree	HERTZACH	TREE	Passed	
⑤	140 S. SEWALL'S Pt			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6335	TWOHEY	ROOF NAILING	Passed	
②	119 HILLCREST	Lower roof		
	SEAGATE			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6419	MENDOZA	FOOTER	Passed	(1 change will get into for eng.)
④	144 S. SEWALL'S Pt			
	MASTER PLAN			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6289	MISER	FINAL	Failed	
⑥	21 ISLAND			
	GULICK + McCANN			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT, FLORIDA

Date SEPT 9 ~~2005~~ 2005 TREE REMOVAL PERMIT No 2568

APPLIED FOR BY SIMPSON (Contractor or Owner)

Owner 140 S. SEWALL'S POINT ROAD

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 1 GUMBO LIMBO

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

Signed, _____ Applicant Signed, Gene Simonous (Signature) FEE \$ 0
Town Clerk

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Large empty rectangular box with horizontal lines for notes or drawings.

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, 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 Melissa Simpson Address 140 S. Sewalls Pt. Phone 443 532 4247 (cell)
 Contractor _____ Address _____ Phone 772 781 5447

No. of Trees: REMOVE 1 Type: Gumbo Limbo

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

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

Written statement giving reasons: Dead. Will put Ribbon on Tree. Call first - Dogs in yard.

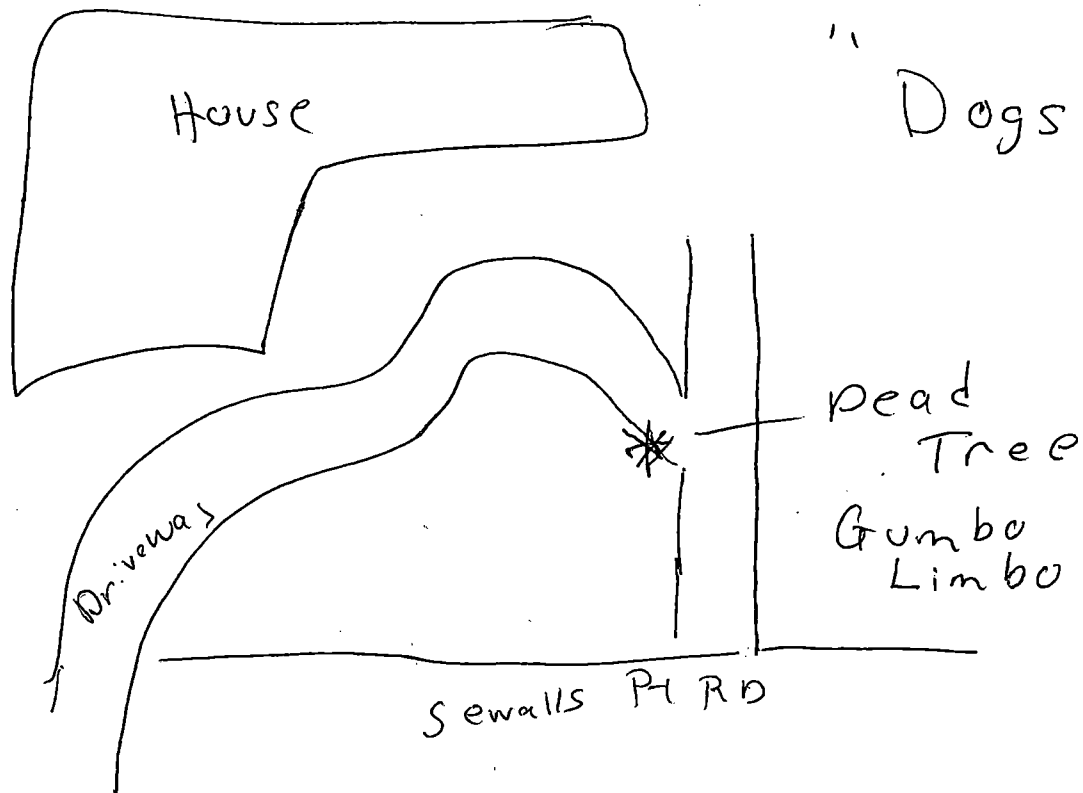
Signature of Property Owner Melissa Simpson Date 9/13/05

Approved by Building Inspector: [Signature] Date 9/19 Fee: 0

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

140 S Sewalls Pt.

Simpson



"Dogs?!"

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7691	THOMAS	FINAL ROOF	PASS	CLOSE
2	10 PALM ROAD FEAZEL ROOFING			INSPECTOR: <i>[Signature]</i>
Tree	SIMPSON	TREE	PASS	
1	140 S. SEWALLS PT	FIRST PLEASE = DOG		INSPECTOR: <i>[Signature]</i>
7755	BARICE	DRY-IN	PASS	
7	17 FIELDWAY DR SUPERIOR ROOFING			INSPECTOR: <i>[Signature]</i>
Tree	CONWAY	TREE	PASS	
8	4 OAK HILL WAY			INSPECTOR: <i>[Signature]</i>
7724	SWEENEY GONIK	FINAL GARAGE DOOR	PASS	CLOSE
4	4 S. VIA LUCINDIA BROTEN GARAGE			INSPECTOR: <i>[Signature]</i>
7511	HART	FINAL RENOV.	PASS	CLOSE
9	113 N. SEWALLS PT BLACK DIAMOND			INSPECTOR: <i>[Signature]</i>
7712	THORNE	FINAL ROOF	FAIL	
10	22 PERRIWINKLE LA DUREN			INSPECTOR: <i>[Signature]</i>
OTHER:	82 SEWALLS PT FREE PROOF WORK W/O PERMIT			NO ACTIVITY ON SITE - <i>[Signature]</i>

~~87 S SEWALLS PT RD~~



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

*Reviewed
2-2-11*

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 Eustace Address 140 S Sewall Phone 772-678-9674
 Contractor All Around Tree Address _____ Phone 772-344-1765
 No. of Trees: REMOVE _____ Species: Melaleuca & Brazilian Pepper
 No. of Trees: RELOCATE _____ Species: _____
 No. of Trees: REPLACE _____ Species: _____

ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

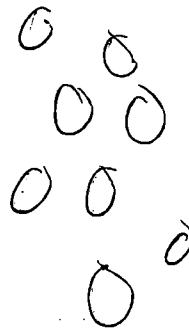
Reason for tree removal /relocation (See notice above) _____

Signature of Property Owner Robert R Eustace Date 2-2-11

Approved by Building Inspector: [Signature] Date 2-2-11 Fee: N/C

NOTES: _____

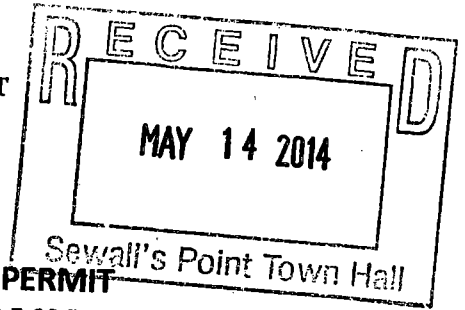
SKETCH:



ROAD



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



TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

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

Owner Judy Combs Address 140 S. SEWALL'S PT. Phone 561 222-4875

Contractor ECOTEC LANDSCAPING Address P.O. Box 2721 RD STUART Phone 772 288-2434

No. of Trees: REMOVE 1 Species: SABLE PALM - BACKYARD

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: TBD

ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY

Reason for tree removal /relocation (See notice above) OWNER IS BUILDING A DECK. TREE IN THE WAY. THE PROPERTY IS VERY TIGHT TO EVEN GET OUR SMALL TRACTOR IN TO RELOCATE. THE TREE IS TOO LARGE FOR THA

Signature of Property Owner [Signature] Date 5/14/14

Approved by Building Inspector: [Signature] Date 5-14-14 Fee: _____

NOTES: TREE REMOVAL PERMIT SHOULD BE SUPPLEMENTED BY THE DECK PERMIT APPLICATION.

IF PERMIT IS APPROVED TREE WILL NEED TO BE MITIGATED WITH A REPLACEMENT

