

**18 Simara  
Street**

139

DOCK

STATE OF FLORIDA Department of Professional Regulation

**CONSTRUCTION INDUSTRY  
LICENSING BOARD**

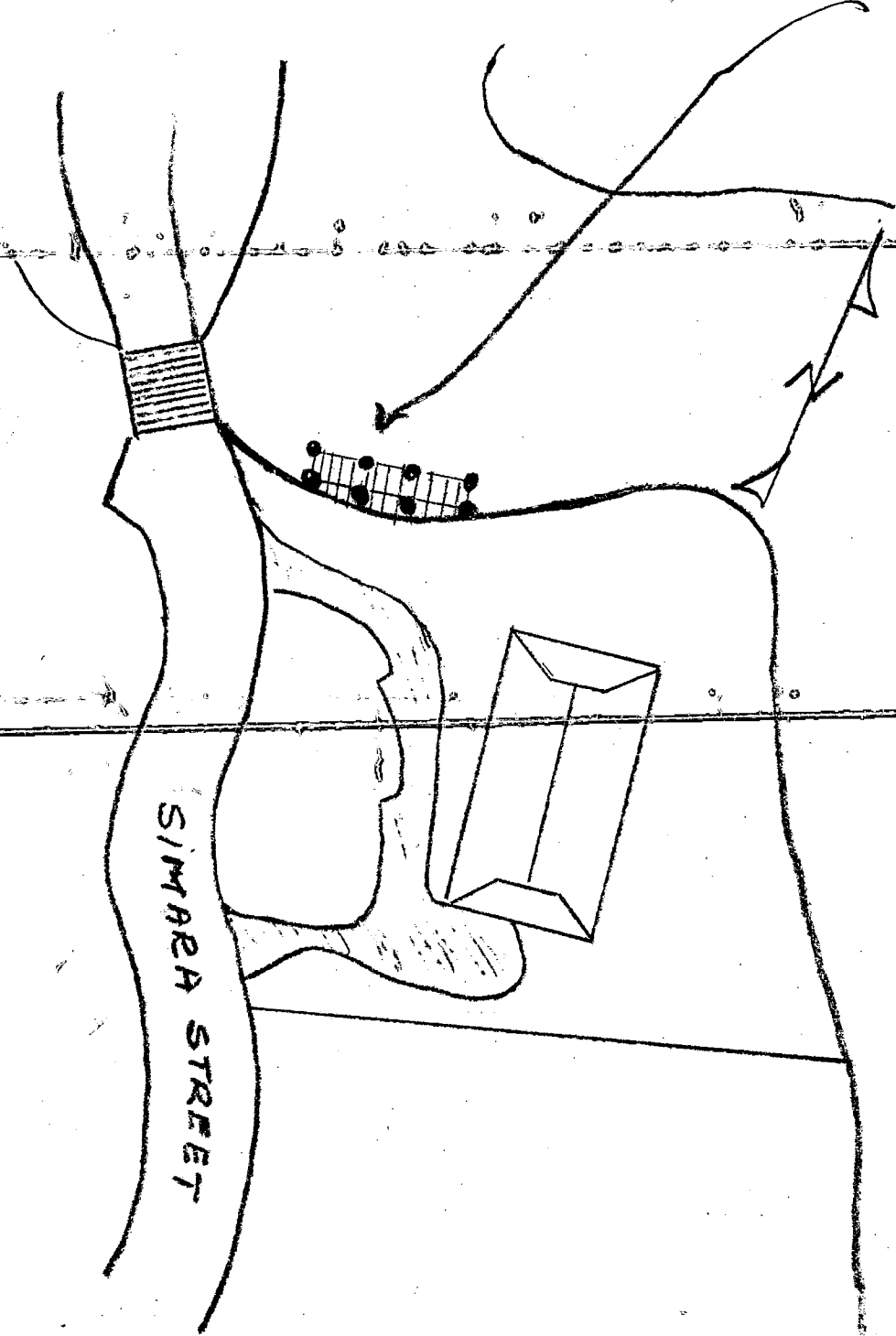
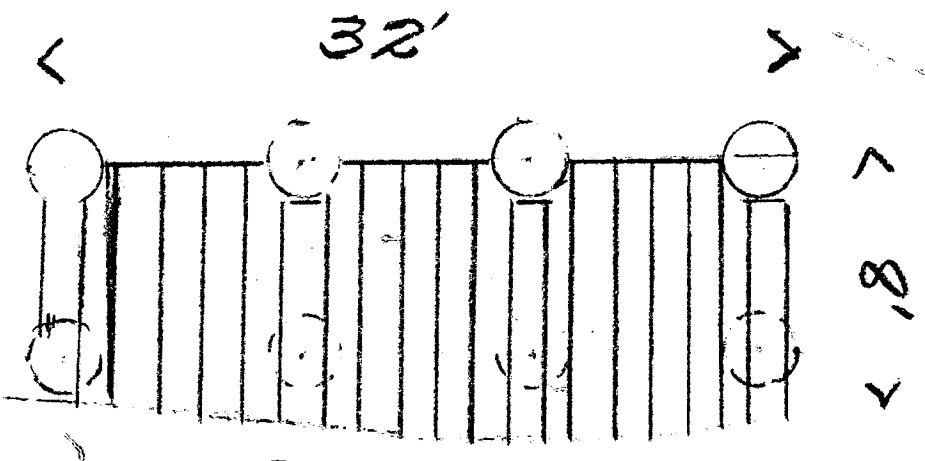
**ANDREWS, CHARLES S JR  
EAST OCEAN CONSTRUCTION INC  
CERTIFIED GENERAL CONTRACTOR  
HAS PAID THE FEE REQUIRED BY CHAPTER 489  
FOR THE YEAR EXPIRING **JUNE 30, 1983****

*Charles S. Andrews, Jr.*  
SIGNATURE

*Rob Green*  
GOVERNOR

PLEASE READ IMPORTANT  
INFORMATION ON REVERSE

*Nancy Kelly Littlejohn*  
SECRETARY OF PROFESSIONAL  
REGULATION



INDIAN RIVER

SIMRA STREET

SKETCH OF DOCK

FOR

LOT 31 ARCHIBALDO

PROPERTY OF

MR. & MRS. R. WILKINSON JR.

139



1530

DEMOLITION

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.

RECEIVED / 530  
DEC - 7 1982 Date 11/30/82

APPLICATION FOR A PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

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

Owner Stewart Rye Present address \_\_\_\_\_

Phone 1-201-224-0120 \_\_\_\_\_

General contractor East Ocean Const. Address 1045E Ocean Blvd.

Phone 286-4933 Stuart

Where licensed Stuart / State of Fla. License No. CBC 010622

Plumbing contractor \_\_\_\_\_ License No. \_\_\_\_\_

Electrical contractor \_\_\_\_\_ License No. \_\_\_\_\_

Air-conditioning contractor \_\_\_\_\_ License No. \_\_\_\_\_

Describe the building, or alteration to existing building  
Demolition

Name the street on which the building, its front building line and its front yard will face 18 Simera St.

Subdivision Archipelago Lot No. 31 Area Sewalls Pt.

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet \_\_\_\_\_

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 3,200

Cost of permit \$ 16 Plans approved as submitted \_\_\_\_\_ or, as marked \_\_\_\_\_

I understand that this permit is good for 12 months from the date of its issue and that the building for which this permit is issued must be completed within that time and in accordance with the approved plans. 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. I agree that the building site will be clean and rough-graded before a Certificate of Occupancy is sought, and, moreover, that I shall be 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 with the above requirements may result in a Building Inspector or a Town Commissioner "Red-tagging" the building project.

Contractor Charles J. Andru

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

Owner See attached sheet

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

TOWN RECORD Date submitted \_\_\_\_\_

Approved by Building Inspector (date) 12/7/82 Inspector's initials Jmy

Approved by Town Commissioner (date) 12/8/82 Commissioner's initials GL

Certificate of Occupancy issued (date) Not Req

SP/1 Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point's Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code. completed 11/30/82

SBR ATTACHMENTS

NOV. 30, 1982

Sewall's Point Municipal Office  
Sewall's Point  
Stuart, Fla. 33494

I, Stuart Kaye, of 18 Simara St.,  
Sewall's Point, Stuart, Fla., give permission  
to Mr. Charles Andrews of East Ocean  
Construction Co. to demolish my residence  
at the above address.

Thank you very much.

Sincerely,

Stuart Kaye

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

1545

SFR

# TOWN of SEWALL'S POINT

One South Sewall's Point Road, Sewall's Point, Stuart, Florida 33494

## COMMISSIONERS

GILBERT C. STRUBELL, Mayor  
WILLIAM E. BARTON, III, Vice Mayor  
DANA deWINDT, Commissioner  
EDWARD G. GLUCKLER, Commissioner  
MIMI TOWL, Commissioner

Telephone (305) 287-2455

JOAN H. BARROW  
Town Clerk  
\*F.J. MATUSZEWSKI  
Chief of Police

1545  
November 22, 1982

Charles Andrews  
c/o East Ocean Construction  
1045 East Ocean Blvd.  
Stuart, Florida 33494

Dear Mr. Andrews:

RE: Kaye, Archipelago

I have reviewed the plans for Mr. and Mrs. Kaye's residence, dated 11/19/82, as drawn by Charles R. Stinson. It appears that these plans meet the Town requirements for setbacks.

Sincerely,

TOWN OF SEWALL'S POINT

*G. C. Strubell*

Gilbert C. Strubell,  
Mayor/Building Commissioner

GCS:jb

1545

May 3, 1983

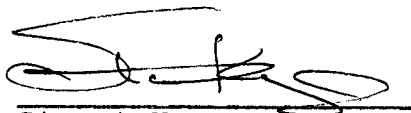
City of Sewalls Point  
Building Department  
1 North River Road  
Sewalls Point, Florida

RE: Building Permit Number 1545  
18 Simara St., Sewalls Point, FL  
Lot #31 and part of #32, Archipelago

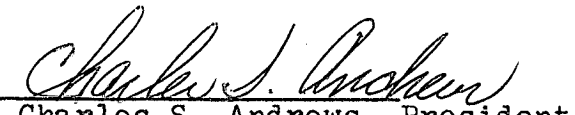
Dear Joe:

With mutual consent, Stuart Kaye, owner, and East Ocean Construction, Inc. do hereby request the building permit be transferred from the name of East Ocean Construction, Inc., to Stuart Kaye.

Dated: 5/5/83

  
Stuart Kaye

Dated: 5/5/83

  
Charles S. Andrews, President  
East Ocean Construction, Inc.



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR SEPTIC TANK PERMIT
AND FINAL INSPECTION FORM

Permit VOID if well or septic system is installed in a location other than area permitted. PRIOR HEALTH DEPARTMENT APPROVAL REQUIRED

Authority: Chapter 381, 386, 387, FS Chapter 10D-6, FAC

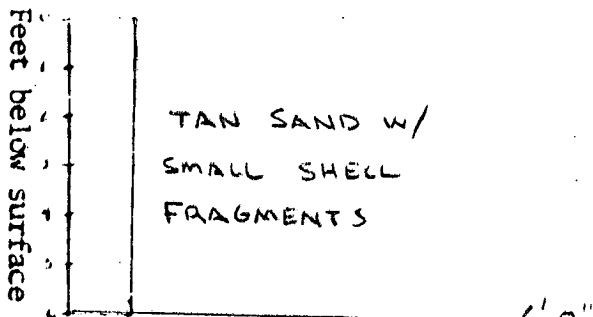
MARTIN COUNTY

Permit Number HD-83-64 East Ocean Constr, Inc
Price Engineering Company, 1320 Palm Beach Rd., Stuart, FL
Name of Applicant CHARLIE ANDREWS Telephone 286-4933
Mailing Address of Applicant 1045 E. OCEAN BLVD. STUART FLA.
To be Installed at: (Give Street Address)\* 18 SIMARA STREET, SEAWALLS PT.
Lot 31 PART Block - Subdivision "ARCHIPELAGO" S/D
Plat Book & Page BK 4, PG 48 Date Recorded 2/25/66
Residential: No. Living Units 1 Number Bedrooms 4
Commercial: Type of Business Number People Number Toilets
\*Note: Attach site location map and other supportive documents.
Signature of Applicant [Signature]

SITE INFORMATION

Is there a private well within 75 ft. of the proposed septic system? NO
Is there a public well within 100 ft. of the proposed septic system? NO
Is there a public sewer within 100 ft. of the proposed lot? NO
Is there a lake, stream, canal or other body of water within 50 ft. of the proposed septic system? NO
Is there a septic system or other interference within 75 ft. of the proposed private well? NO
Is the proposed or existing public water line within 10 ft. of the proposed septic system? NO
There is 1250 square feet of unobstructed land for future expansion of the drainfield.

SOIL PROFILE AND PERCOLATION DATA



Water table..... 6.0' 6.0"
Wet season water table... 6.0'
Compacted fill of..... 0' required.

Certified by: Ronald J. Price
Florida Professional Number: 17788
Date: 2/10/63 Job Number 83-040
Percolation Rate - Minutes/Inch
USDA Soil Map Unit: CANAVERAL SAND
USDA Symbol # 28

INSTALLATION SPECIFICATIONS

Septic Tank Capacity 1050 Gallons Absorption Bed Size 350 Square Ft.
Dosing Tank Capacity Gallons Lateral Drainfield Size Square Ft.
Grease Trap Capacity Gallons Sand Filter Size Square Ft.

Specifications:

2-14-83
Date Processed

THIS PERMIT EXPIRES ONE (1) YEAR FROM DATE OF ISSUANCE

[Signature]
Signature of Sanitarian

Martin County Health Department

FINAL INSPECTION DATA

Date and Time of Inspection Type of Tank (Concrete, Fiberglass, Etc.)

Size Tank Installed Drainfield Size
Dosing Tank Size Grease Trap Size Sand Filter Size
Who Made Installation

RECOMMENDATION: Approval Disapproval

Signature of Sanitarian

022696

SEWALL'S POINT

# MATHERS & ASSOCIATES

ENGINEERING — SURVEYING  
STUART, FLORIDA



SCALE — 1" = 30'

## DESCRIPTION FURNISHED

Description: As Furnished  
All of lot 31 of recorded subdivision of "Archipelago" as same is recorded in Plat Book 4, Page 48, of the public records of Martin County, and all of that part of lot 32 lying northerly of the following described line to wit: from concrete marker at the Northwestern corner of said lot 32, proceed South 40°01'20" East along platted road right-of-way for a distance of 16.26' to concrete marker on point of curvature of a curve to the right or Southwesterly, said curve having a radius of 154.0 feet and central angle of 43°22'37"; Thence proceed Northerly along arc of above described curve for an arc distance of 21.00' to P.O.B. of above mentioned line; Thence on said line running North 69°58'40" East for a distance of 179' more or less to the Westerly shore of the Indian River; together with all submerged lands and riparian rights there unto belonging or apertaining.

### NOTES

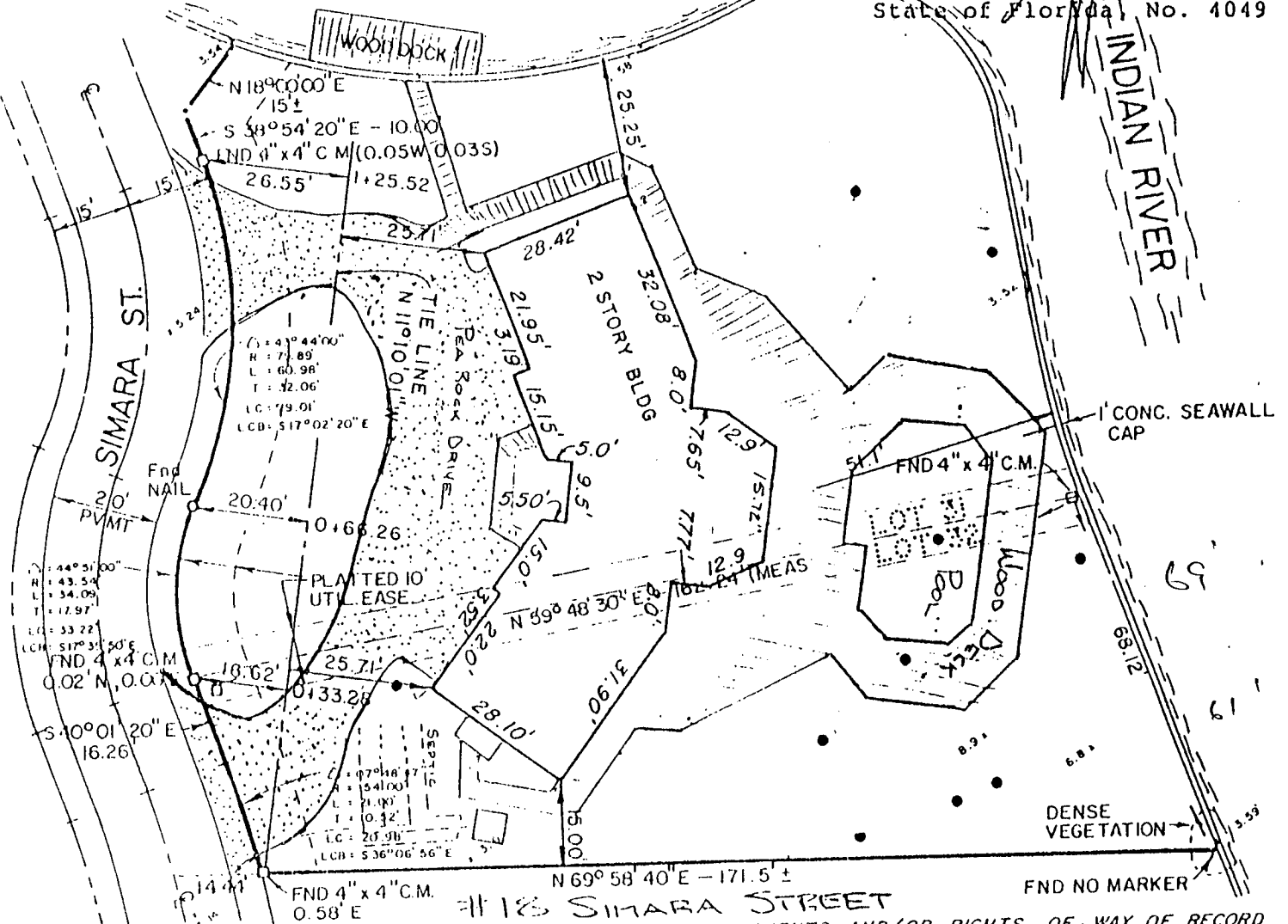
#### SURVEYOR'S CERTIFICATE:

We hereby certify that the boundary survey as shown hereon is true and correct to the best of our knowledge and belief as surveyed under our direction. We further certify that it meets the minimum technical standards under Rule 21III-6 Fla. Administrative Code, pursuant to Chapter 472.027 Fla. Statutes.

BY:

Stephen J. Brown  
Professional Land Surveyor  
State of Florida, No. 4049

• — DENOTES TREE



NOTE: LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS AND/OR RIGHTS - OF - WAY OF RECORD.  
PREPARED FOR: STUART KAYE

SURVEYOR'S CERTIFICATE: WE HEREBY CERTIFY THAT THE PARCEL SHOWN HEREON IS A TRUE AND CORRECT REPRESENTATION OF A SURVEY MADE UNDER OUR SUPERVISION AND DIRECTION AND THAT SAID SURVEY IS ACCURATE TO THE BEST OF OUR KNOWLEDGE AND BELIEF AND THAT THERE ARE NO ABOVE GROUND ENCROACHMENTS EXCEPT AS SHOWN. NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.

*Robert M. Watford* July 7, 1982  
ROBERT M. WATFORD PROFESSIONAL LAND SURVEYOR,  
REGISTRATION NO. 3171, STATE OF FLORIDA.

DRAWN BY: H. G. KIERNAN	FIELD BK. NO. 82 - 11
CHECKED BY: RMW. / SJB	JOB NO. 470-01-22-01
DATE: 11/20/81	SCALE: 1" = 30'

4-12-83 "AS BUILT SURVEY ONLY"  
MARC L. GAIQUI, PROFESSIONAL LAND SURVEYOR  
REGISTRATION NO. 3194, STATE OF FLORIDA

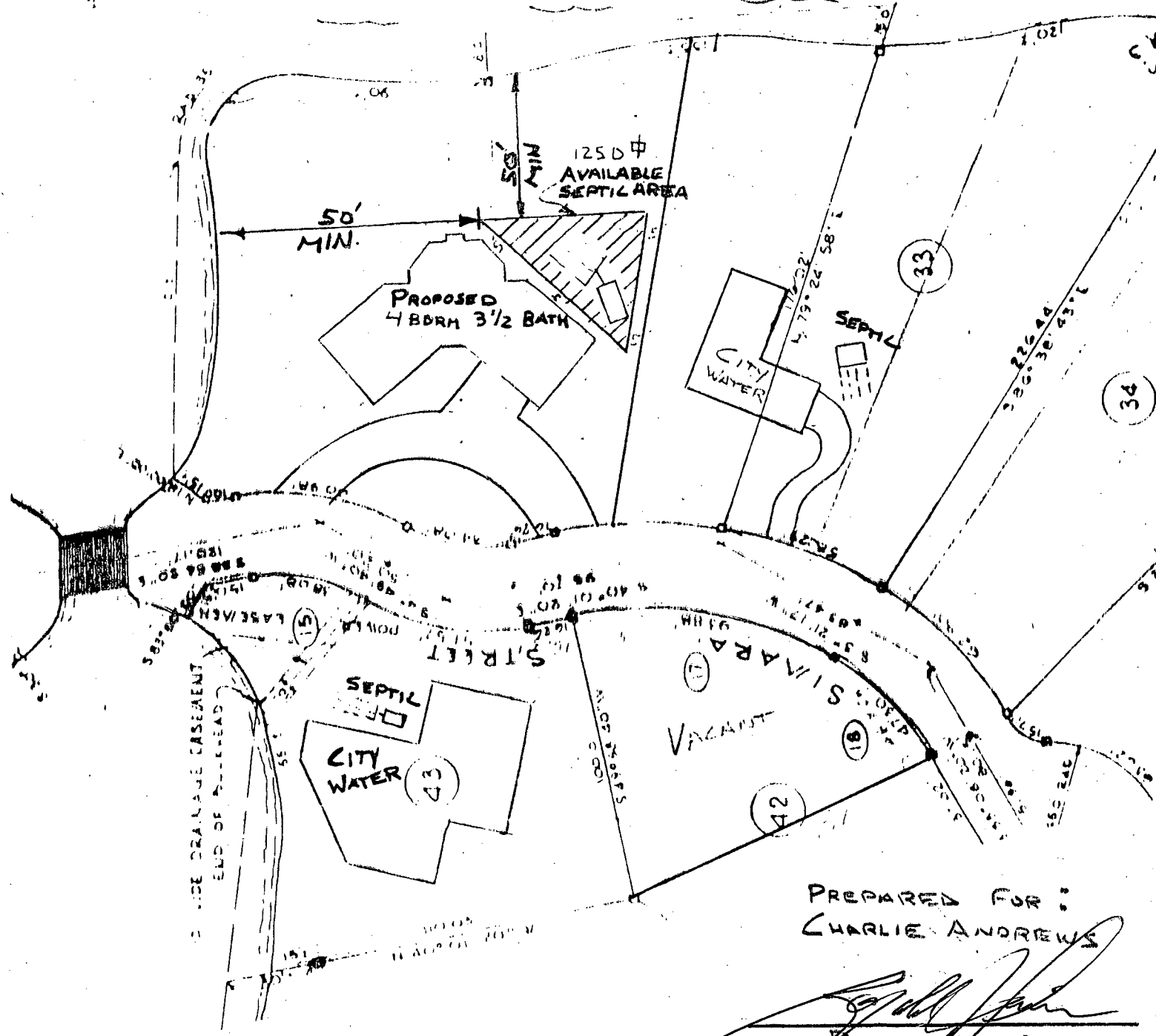


NOTE: A 30' WIDE EASEMENT IS HERE BETWEEN LOTS AND ALONG ALL (SEE SHEET 1)

SEE SHEET 1 FOR

NORTH  
1"=50'

INDIAN RIVER



PREPARED FOR:  
CHARLIE ANDREWS

*Ronald J. Arice*  
RONALD J. ARICE

DESCRIPTION

BEING KNOWN AS LOT 31 AND PART OF LOT 32 "ARCHIPELAGO 3/8" (SEWALLS PT) AS RECORDED IN PLAT BOOK 4, PAGE 48, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA

# This Indenture,

(The words "grantor" and "grantee" herein shall be construed to include all genders and singular or plural as the context indicates.)

443899

Made this 1st day of June 1982

ROBERT W. WILSON, JR., and HENRIETTA WILSON, his wife,  
grantor, and

of the County of Martin, State of Florida

STUART KAYE and MARCIA KAYE, his wife,

whose post-office address is 6 Horizon Road, Fort Lee, New Jersey 07024,  
of the County of Bergen, State of New Jersey, grantee

Witness: That said grantor, for and in consideration of the sum of Ten and 00/100 Dollars, and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs, successors and assigns forever the following described land, situate, lying and being in Martin County, Florida, to-wit:

All of Lot 31 of the recorded subdivision of "The Archipelago" as same is recorded in Plat Book 4, page 48 of the Official Records of Martin County and all of that part of Lot 32 lying Northerly of the following described line, to wit: From the concrete marker at the Northwesterly Corner of said Lot 32, proceed South 40°01'20" East along the platted road right of way for a distance of 16.26 feet to a concrete marker on the point of curvature of a curve to the right, or Southwesterly, said curve having a radius of 154.0 feet and a central angle of 43°22'37"; thence proceed Southerly along the arc of above described curve for an arc distance of 21.00 feet, to the Point of Beginning of the above mentioned line; thence proceed on said line running North 69°58'40" East for a distance of 179 feet, more or less, to the Westerly shore of the Indian River; Together with all submerged lands and riparian rights thereunto belonging or in anywise appertaining.

Subject, however, to the covenants, restrictions, reservations, easements, limitations and zoning regulations of record.

and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claim of all persons whomsoever.

In Witness Whereof, Grantor has hereunto set grantor's hand and seal the day and year first above Signed, sealed and delivered in our presence:

*[Signatures of witnesses]*

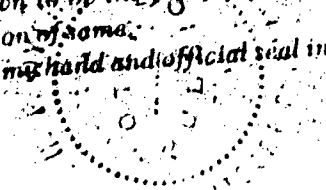
*[Signature of Robert W. Wilson, Jr.]*  
Robert W. Wilson, Jr.

*[Signature of Henrietta Wilson]*  
Henrietta Wilson

STATE OF Florida  
COUNTY OF Martin

BOOK 546 PAGE 2383

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally to me known to be the person(s) described in and who executed the foregoing instrument and acknowledge the execution of same.  
WITNESS my hand and official seal in the County and State last aforesaid this 1st day of June 1982



Notary Public  
My commission expires  
BONDED

BOBBIAN RAY LESTER  
Attorney At Law  
8600 South U.S. Highway One  
Port St. Lucie, Florida 33452

1545  
Date 2/15/83

Permit No. \_\_\_\_\_

Date 2/15/83

APPLICATION FOR A PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

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

Owner Stuart Kaye Present address 18 Simara

Phone 225-2345

General contractor East Ocean Constr., Inc. Address 1045 East Ocean Blvd.

Phone 286-4933

Where licensed State of Florida License No. CGC 010622

Plumbing contractor Nortons Plumbing License No. 00069

Electrical contractor La Chance Elect. License No. 4866

Air-conditioning contractor Commercial Cooling License No. RA 0023529

Describe the building, or alteration to existing building To construct a

4 br 3 1/2 bath house - wood frame

Name the street on which the building, its front building line and its front yard will face Simara 18 Simara Rd.

Subdivision Archipelago Lot No. 31 Area 22,000

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet 4,400

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 8

Cost of permit \$ 800 <sup>770+30</sup> Plans approved as submitted        or, as marked       

I understand that this permit is good for 12 months from the date of its issue and that the building for which this permit is issued must be completed within that time and in accordance with the approved plans. 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. I agree that the building site will be clean and rough-graded before a Certificate of Occupancy is sought, and, moreover, that I shall be 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 with the above requirements may result in a Building Inspector or a Town Commissioner "Red tagging" the building project.

Contractor Charles S. Andrews  
Charles S. Andrews

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

Owner Stuart Kaye  
Stuart Kaye

Regulation builders will be required to sign both of the above statements.

TOWN RECORD Date submitted \_\_\_\_\_

Building Inspector (date) 2/23/83 Inspector's initials JMM

Town Commissioner (date) 2/25/83 Commissioner's initials AS

Certificate of Occupancy issued (date) \_\_\_\_\_

Approved in no way  
by contractor or builder of  
this building with the Town of Sewall's  
Point Ordinances and the State of Florida  
Building Code and the State of Florida  
Energy Efficiency Building Code.  
Mod. 1-79



FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM

1545

OMB 3067-0077  
Expires: July 1984

# ELEVATION CERTIFICATE

This form is to be used for: 1) New/Emergency Program construction in Special Flood Hazard Areas; 2) Pre-FIRM construction after September 30, 1982; 3) Post-FIRM construction; and, 4) Other buildings rated as Post-FIRM rules.

**STUART KAYE**

BUILDING OWNER'S NAME: **LOT 31 & PORTION OF LOT 32 OF ARCHIPELAGO**  
ADDRESS: \_\_\_\_\_

PROPERTY LOCATION (Lot and Block numbers and address if available):  
**(P.B. 4 @ Page 48) Martin County, Florida**

I certify that the information on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. code, Section 1001.

**SECTION I ELIGIBILITY CERTIFICATION** (Completed by Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor)

COMMUNITY NO.	PANEL NO.	SUFFIX	DATE OF FIRM	FIRM ZONE	DATE OF CONSTR.	BASE FLOOD ELEV. (In AO Zone, use depth)	BUILDING IS
							<input type="checkbox"/> New/Emergency <input type="checkbox"/> Pre-FIRM Reg <input type="checkbox"/> Post-FIRM Reg

YES  NO  It is intended that the building described above will be constructed in compliance with the community's flood plain ordinance. The certifier may rely on community records. The lowest floor (including basement) will be at an elevation of \_\_\_\_\_ ft. NGVD. Failure to construct the building at this elevation may place the building in violation of the community's flood plain management ordinance.

YES  NO  The building described above has been constructed in compliance with the community's flood plain management ordinance based on elevation data and visual inspection or other reasonable means.  
If NO is checked, attach copy of variance issued by the community.

YES  NO  The mobile home located at the address described above has been tied down (anchored) in compliance with the community's flood plain management ordinance, or in compliance with the NFIP Specifications.

MOBILE HOME MAKE	MODEL	YR. OF MANUFACTURE	SERIAL NO.	DIMENSIONS X

(Community Permit Official or Registered Professional Engineer, Architect, or Surveyor)

NAME: **MARC L. GAIQUI** ADDRESS: **40 MATHERS 295 FLA ST**

TITLE: **Professional Surveyor** CITY: **STUART** STATE: **FLA** ZIP: **33494**

SIGNATURE: *[Signature]* DATE: **9-27-83** PHONE: **287-0525**

**SECTION II ELEVATION CERTIFICATION** (Certified by a Local Community Permit Official or a Registered Professional Engineer, Architect, or Surveyor.)

FIRM ZONE A1-A30: I certify that the building at the property location described above has the lowest floor (including basement) at an elevation of 9.30 feet, NGVD (mean sea level) and the average grade at the building site is at an elevation of 4.7 feet, NGVD.

FIRM ZONES V, V1-V30: I certify that the building at the property location described above has the bottom of the lowest floor beam at an elevation of \_\_\_\_\_ feet, NGVD (mean sea level), and the average grade at the building site is at an elevation of \_\_\_\_\_ feet, NGVD.

FIRM ZONES A, A99, AO, AH, and EMERGENCY PROGRAM: I certify that the building at the property location described above has the lowest floor elevation of \_\_\_\_\_ feet, NGVD. The elevation of the highest adjacent grade next to the building is \_\_\_\_\_ feet, NGVD.

**SECTION III FLOODPROOFING CERTIFICATION** (Certification by a Registered Professional Engineer or Architect)

I certify to the best of my knowledge, information, and belief, that the building is designed so that the building is watertight, with walls substantially impermeable to the passage of water and structural components having the capability of resisting hydrostatic and hydrodynamic loads and effects of buoyancy that would be caused by the flood depths, pressures velocities, impact and uplift forces associated with the base flood.

YES  NO  In the event of flooding, will this degree of floodproofing be achieved with human intervention? (Human intervention means that water will enter the building when floods up to the base flood level occur unless measures are taken prior to the flood to prevent entry of water (e.g., bolting metal shields over doors and windows).  
YES  NO  Will the building be occupied as a residence?

If the answer to both questions is YES, the floodproofing cannot be credited for rating purposes and the actual lowest floor must be completed and certified instead. Complete both the elevation and floodproofing certificates.

FIRM ZONES A, A1-A30, V1-V30, AO and AH: Certified Floodproofed Elevation is \_\_\_\_\_ feet, (NGVD).

THIS CERTIFICATION IS FOR  SECTION II  BOTH SECTIONS II AND III (Check One)

CERTIFIER'S NAME: **MARC L. GAIQUI** COMPANY NAME: **MATHERS & ASSOC.** LICENSE NO. (or Affix Seal): **3194**

TITLE: **of Land Surveyor** ADDRESS: **295 FLA ST. STUART** ZIP: **FLA 33494**

SIGNATURE: *[Signature]* DATE: **9-27-83** CITY: **STUART** STATE: **FLA** PHONE: **287-0525**

The insurance agent should attach the original copy of the completed form to the flood insurance policy application, the second copy should be supplied to the policyholder and the third copy retained by the  
**INSURANCE AGENTS MAY ORDER THIS FORM.**

MARTIN COUNTY HEALTH DEPT.  
131 E. 7th Street  
Stuart, Fl 33497

FILL CERTIFICATION AND SITE INFORMATION

APPLICANT: ~~CHARLIE ANDREWS~~ East Ocean Constr., Inc.

LEGAL DESCRIPTION: LOT 31 "ARCHIPELAGO" S/D

1. Present water depth 6.0' feet below natural grade, not including fill.
2. Wet season water depth 6.0 feet below natural grade, not including fill.
3. Elevation of crown of road, midway between front lot boundary 10.00. If road is not paved, another permanent reference point must be noted. Show location on plot plan.
4. Elevation of natural grade at area of septic system 13.87'. Show location on plot plan.
5. I certify that an average depth of 0' feet of compacted fill presently exists above natural grade in area of the proposed building. Date fill observed:       .
6. I certify that an average depth of — feet of compacted fill presently exists above natural grade in the area of the septic system. Date fill observed:       . Surface area of fill observed        square feet. A minimum of 150 square feet of filled surface area for each bedroom is required.
7. Has fill been compacted comparable to the surrounding natural soil?
8. Are all wells, septic systems and surface waters on adjacent or contiguous land within 75 feet of the applicants lot shown on plot plan? YES
9. Is there a storm water retention area within 15 feet of the proposed septic system? NO
10. Is the septic system in an area proposed for paving? NO

CERTIFIED BY: 

Florida Professional Number: 17783

Date: 2-10-83 Job Number: 28-000



FLORIDA MODEL ENERGY EFFICIENCY CODE  
FOR BUILDING CONSTRUCTION

FORM 902

BOB GRAHAM  
GOVERNOR

SECTION 9/9H POINTS METHOD  
DEPARTMENT OF COMMUNITY AFFAIRS

CLIMATE ZONES  
SOUTH 789

PROJECT NAME	KAYE RESIDENCE	JURISDICTION	
AND ADDRESS	SEWALL'S POINT ZIP	ZONE	8 TOWN OF SEWALLS POINT
BUILDER	EAST OCEAN CONSTRUCTION	PERMIT NO.	
OWNER	M/M STEWART KAYE	JURISDICTION NO.	537300

STATISTICS

<input type="checkbox"/> RENOVATION <input type="checkbox"/> ADDITION <input type="checkbox"/> MULTI-FAMILY	IF MULTI-FAMILY, NO. OF UNITS COVERED BY THIS CALCULATION:		GLASS AREA AND TYPE	
	(SEPARATE CALCULATIONS REQUIRED FOR EACH WORST CASE UNIT TYPE.) SEC. H901.1		CLEAR	TINT OR FILM
			<input type="checkbox"/> SGL	<input type="checkbox"/> SGL
			<input type="checkbox"/> DBL	<input checked="" type="checkbox"/> DBL

GROSS WALL AREA AND INSULATION				CONDITIONED FLOOR AREA	CEILING INSULATION	
CBS	R=	FRAME	R=		UNDER ATTIC	SGL ASSEMBLY
		4223	19	4350	R= 19.0	R= 19.0

COOLING SYSTEM		PRIMARY HEATING SYSTEM			PRIMARY HOT WATER SYSTEM		
<input checked="" type="checkbox"/> CENTRAL	<input type="checkbox"/> NONE	<input checked="" type="checkbox"/> STRIP	<input type="checkbox"/> GAS	<input type="checkbox"/> NONE	<input checked="" type="checkbox"/> RESISTANCE	<input type="checkbox"/> SOLAR	
<input type="checkbox"/> UNITARY		<input type="checkbox"/> OIL	<input type="checkbox"/> SOLAR		<input type="checkbox"/> HEAT RECOVERY	<input type="checkbox"/> GAS	
EER-SEER =		<input type="checkbox"/> HEAT PUMP: COP =			<input type="checkbox"/> DED. HEAT PUMP: COP =		
		<input type="checkbox"/> OTHER:			<input type="checkbox"/> OTHER:		

MAX. E.P.I. ALLOWED (from 9A):	80.0	CALCULATED E.P.I.:	76.2
CHECK IF COMPLYING WITH "ALTERNATE PRESCRIPTIVE COMPLIANCE APPROACH" (SEC. 903.11)* <input type="checkbox"/>			
CERTIFIED BY:	<i>Gene Murphy</i> (owner/agent)	DATE:	2-1-83
FORM COMPLETION CHECKED BY:		DATE:	
THIS DATA IS TO BE SENT TO DCA BY THE LOCAL BUILDING DEPARTMENT.			

9A	MAX. E.P.I. ALLOWED (CALCULATED E.P.I. MUST NOT EXCEED VALUE SHOWN BELOW)								
CONDITIONED FLOOR AREA	0-900	901-1100	1101-1300	1301-1500	1501-1700	1701-1900	1901-2100	2101-2300	2301-ABOVE
BASE E P I	120	115	110	105	100	95	90	85	80
DEDUCTIONS	A/C EFFICIENCY LESS THAN 8.0 EER/SEER (7.5 HEAT PUMP) (as of October 1, 1982)								
	IF MULTI-FAMILY: COMMON WALLS (maximum of 5 points)								
	IF MULTI-FAMILY: COMMON CEILING and/or FLOOR (maximum of 12 points)								
	TOTAL DEDUCTIONS								
COMPUTE MAX. E.P.I. ALLOWED	BASE E.P.I.			DEDUCTIONS			MAX. E.P.I. ALLOWED		
	80			- 0			= 80.0		

\*RESIDENCES WHICH COMPLY WITH THIS CODE BY THE "ALTERNATE PRESCRIPTIVE COMPLIANCE APPROACH" (SEC. 903.11) ARE REQUIRED TO MEET OR EXCEED ALL MINIMUM PRESCRIPTIVE LEVELS INDICATED BY SHADED BLOCKS ON THIS FORM, AND ALL OTHER APPLICABLE PRESCRIPTIVE REQUIREMENTS LISTED IN TABLE 9B. THE E.P.I. FOR A HOUSE COMPLYING UNDER THIS METHOD IS NOT CALCULATED BUT WILL BE THE MAXIMUM E.P.I. ALLOWED FOR THAT HOUSE SIZE AS SHOWN ON TABLE 9A. THE STATISTICS SECTION ABOVE SHALL BE COMPLETED AND SUBMITTED TO THE LOCAL BUILDING DEPARTMENT.

9B	PRESCRIPTIVE MEASURES (CHECKLIST)			
INFILTRATION: windows/doors	903.1	<input checked="" type="checkbox"/>	HVAC DUCT CONSTRUCTION	903.5 <input checked="" type="checkbox"/>
WATER HEATER - ASHRAE LABEL	903.2	<input checked="" type="checkbox"/>	PIPING INSULATION	903.6 <input checked="" type="checkbox"/>
SWIMMING POOLS	903.3	<input type="checkbox"/>	HVAC CONTROLS	903.7 <input checked="" type="checkbox"/>
SHOWER FLOW RESTRICTORS	903.4	<input checked="" type="checkbox"/>	HVAC SYSTEM EFFICIENCY SECTION	903.8 <input checked="" type="checkbox"/>
			CEILING INSULATION	903.10 <input checked="" type="checkbox"/>

# RESIDENTIAL CALCULATION

FORM 902

CLIMATE ZONES 7, 8, 9

COMPONENT		
WALLS	CONCRETE	R 2.7 - 3.9
		R 4-5.9
		R 6 & UP
	FRAME OR BRICK VENEER	R 11 - 18.9
		R 19-25.9
		R 26 & UP
COMMON		

WINTER			GROSS WINTER POINTS
AREA	x	WPM	
		6.6	
		5.0	
		4.4	
		2.5	
3,022		1.5	4,533
		1.1	
		2.7	

SUMMER			GROSS SUMMER POINTS
AREA	x	SPM	
		17.5	
		15.0	
		13.9	
		13.9	
3,022		8.6	25,989
		6.5	
		3.8	

DOORS		
DOORS	WOOD OR METAL INSULATED	
	STORM DOOR	
	COMMON	

71.5		86.5	6,185
		84.0	
		44.6	
		21.6	

71.5		55.4	3,961
		22.2	
		44.3	
		6.9	

CEILING		
CEILING	UNDER ATTIC	R 19 - 21.9
		R 22-29.9
		R 30 & UP
SINGLE ASSEMBLY NO ATTIC	R 6-7.9	
	R 8-9.9	
	R 10-11.9	
	R 12-18.9	
	R 19 - 21.9	
COMMON		

3,558		1.9	6,760
		1.7	
		1.5	
		5.4	
		4.0	
		3.5	
792		1.9	1,505
		1.7	

3,558		8.4	29,887
		7.6	
		5.5	
		22.6	
		17.3	
		14.6	
792		10.6	6,653
		8.4	
		2.0	

FLOOR OVER UNCONDITIONED SPACE		
FLOOR OVER UNCONDITIONED SPACE	WOOD	R 0-6.9
		R 7-10.9
		R 11 - 18.9
		R 19 & UP
CONCRETE	R 0-2.9	
	R 3-5.9	
	R 6-10.9	
	R 11 - 18.9	
	R 19 & UP	
COMMON		

		5.8	
		2.4	
		2.1	
150		1.4	210
		6.8	
		4.3	
		3.4	
		2.3	
		1.5	
		1.7	

		6.6	
		2.9	
		2.3	
150		1.5	225
		8.2	
		5.7	
		3.6	
		2.9	
		1.9	
		2.0	

SLAB ON GRADE		
SLAB ON GRADE	PERIMETER	EDGE INSULATION
		R 0 - 2.9
		R 3-5.9
	R 6 & UP	

PERIMETER		WPM	
302		28.3	8,547
		20.4	
		12.4	



GLASS  
DO NOT INCLUDE INTERIOR SHADING

OR	AREA	SGL	DBL	WOF 9F	GWP
N	375	5.54	38.5	1.0	14,438
NE	160	5.54	38.5	.99	6,098
E	256.5	5.54	38.5	.87	8,591
SE	30	5.54	38.5	.80	924
S	12	5.54	38.5	.87	402
SW	27	5.54	38.5	.99	1029
W	12	5.54	38.5	1.0	462
NW		5.54	38.5		
H		22.6	6.8		
Z	256.5		38.5	1.0	9,875

OR	AREA	SINGLE		DOUBLE		SOF 9F	GSP
		CLR	TIN	CLR	TIN		
N	375	204	176	163	139	1.0	52,125
NE	160	309	264	258	218	.95	33,136
E	256.5	425	360	362	304	.89	69,399
SE	30	418	354	355	298	.87	7,778
S	12	346	294	287	242	.86	2,497
SW	27	418	354	355	298	.87	7,000
W	12	425	360	362	304	.89	3,247
NW		309	264	258	218		
H		720	605	627	524		
N	256.5				139	1.0	35,654

GLASS AREA MUST NOT EXCEED: SGL/CLR 15% OF FLOOR AREA, SGL/TINT 17% OF FLOOR AREA, DBL/CLR 18% OF FLOOR AREA, DBL/TINT 20% OF FLOOR AREA.

H = HORIZONTAL GLASS (SKYLIGHTS). FOR SC LESS THAN 0.83 SEE SEC. 902.2d

TOTAL GROSS WINTER POINTS 69,559

TOTAL GROSS SUMMER POINTS 307,501

DUCT MULT	R	WINTER POINTS	WOF	GWP
	R = 3.5	69,559	1.15	79,993
	R = 5.0		1.12	
	R = 6.7		1.09	
	DUCT IN COND SPACE		1.00	

R	SUMMER POINTS	WOF	GSP
R = 3.5	307,501	1.15	353,626
R = 5.0	277,544	1.12	319,176
R = 6.7		1.09	
DUCT IN COND SPACE		1.00	

HSM FROM 9G 79,993 x 1.0 = 79,993

CSM FROM 9H 353,626 x .76 = 268,756

DIVIDE BY FLOOR AREA 79,993 ÷ 4,350 = 18.4 WINTER POINTS

DIVIDE BY FLOOR AREA 268,756 ÷ 4,350 = 61.8 SUMMER POINTS

CALCULATE E.P.I. 242,574

WINTER POINTS	SUMMER POINTS	HOT WTR PTS.	CREDIT POINTS	PENALTY POINTS	E.P.I.
18.4	+ 61.8	- 0 (9I)	- 12 (9C) + (9D)	+ 8 (9E)	= 76.2

FEWER TOTAL POINTS ARE ENCOURAGED FOR MAXIMUM ENERGY SAVINGS

18.4 + 61.8 - 0 - 12 + 8 = 76.2

9C	DESIGN CREDIT POINTS (CP)	CP
CEILING FAN IN COND SPACE (max 5 CP)		1
MULTIZONE A/C SEPARATED BY DOOR		5
CROSS VENTILATION (1 CP per room)		1
WHOLE HOUSE FAN (min. 1.5 cfm/s.f.)		5
WOOD STOVE		2
FIREPLACE with outside combustion air		2
9C TOTAL (not to exceed 12 points)		12

9D	HEATING SYSTEM CREDIT POINTS	CP
NATURAL GAS/PROPANE HEATING		8.0
OIL HEATING		6.4

9E	DESIGN PENALTY POINTS	PP
WASHER AND DRYER IN COND SPACE		3
TOTAL GLASS OPENS LESS THAN 40%		5
FIREPLACE W/ INSIDE COMBUSTION AIR		5



**9F WINTER OVERHANG FACTOR (WOF)**

FEET	N	NE	E	SE	S	SW	W	NW
0-0.9	1.00	0.99	0.85	0.75	0.83	0.98	1.00	1.00
1-1.9	1.00	0.99	0.85	0.76	0.84	0.98	1.00	1.00
2-2.9	1.00	0.99	0.86	0.77	0.86	0.99	1.00	1.00
3-3.9	1.00	0.99	0.87	0.80	0.87	0.99	1.00	1.00
4-4.9	1.00	0.99	0.89	0.83	0.90	0.99	1.00	1.00
5-5.9	1.00	0.99	0.91	0.86	0.92	1.00	1.00	1.00
6-6.9	1.00	0.99	0.92	0.90	0.94	1.00	1.00	1.00
7-7.9	1.00	1.00	0.94	0.92	0.96	1.00	1.00	1.00
8-8.9	1.00	1.00	0.96	0.95	0.97	1.00	1.00	1.00
9-9.9	1.00	1.00	0.97	0.97	0.98	1.00	1.00	1.00
10-10.9	1.00	1.00	0.98	0.98	0.99	1.00	1.00	1.00
11-11.9	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
12 UP	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00

**9F SUMMER OVERHANG FACTOR (SOF)**

FEET	N	NE	E	SE	S	SW	W	NW
0-0.9	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
1-1.9	1.00	1.00	0.99	0.99	0.98	0.99	0.99	1.00
2-2.9	1.00	0.98	0.95	0.93	0.92	0.93	0.95	0.98
3-3.9	1.00	0.95	0.89	0.87	0.86	0.87	0.89	0.95
4-4.9	1.00	0.91	0.84	0.81	0.80	0.81	0.84	0.91
5-5.9	0.99	0.88	0.80	0.76	0.76	0.76	0.80	0.88
6-6.9	0.99	0.85	0.76	0.72	0.72	0.72	0.76	0.85
7-7.9	0.99	0.83	0.72	0.68	0.70	0.68	0.72	0.83
8-8.9	0.98	0.81	0.69	0.66	0.68	0.66	0.69	0.81
9-9.9	0.98	0.79	0.67	0.64	0.66	0.64	0.67	0.79
10-10.9	0.98	0.78	0.65	0.62	0.65	0.62	0.65	0.78
11-11.9	0.97	0.76	0.63	0.61	0.65	0.61	0.63	0.76
12 UP	0.97	0.76	0.62	0.59	0.64	0.59	0.62	0.76

**9G HEATING SYSTEM MULTIPLIER (HSM)**

HEAT PUMP	COP	2.2-2.3	2.4-2.5	2.6-2.7	2.8-2.9	3.0-3.1	3.2-3.3	3.4 & UP
	HSM	0.45	0.42	0.38	0.36	0.33	0.31	0.29
SOLAR HEATING SYSTEM	(BACKUP SYSTEM FRACTION) x (BACKUP SYSTEM HSM)							
ELECTRIC STRIP HEAT	1.00							
NATURAL GAS / PROPANE	1.0 (SEE TABLE 9D FOR CREDITS)							
OIL	1.0 (SEE TABLE 9D FOR CREDITS)							

**9H COOLING SYSTEM MULTIPLIER (CSM)**

ELEC.	EER/SEER	6.8-6.9	7.0-7.4	7.5-7.9	8.0-8.4	8.5-8.9	9.0-9.4	9.5-9.9	10.0-10.4	10.5-10.9	11.0-11.9	12.0-UP
	CSM	1.00	0.93	0.87	0.81	0.76	0.72	0.68	0.65	0.62	0.59	0.54
GAS	COP	0.40-0.44	0.45-0.49	0.50-0.54	0.55-0.59	0.60-0.64	0.65-0.69	0.70 & UP				
	CSM	1.50	1.25	1.20	1.09	1.00	0.92	0.89				

\*ALTERNATE PRESCRIPTIVE COMPLIANCE APPROACH MINIMUM AIR CONDITIONER EFFICIENCY LEVEL 8.0 SEER/EER FOR STRAIGHT COOL OR 7.5 FOR HEAT PUMPS.

NOTE: EER = COOLING MODE COP x 3.413 = ARI RATED COOLING OUTPUT IN BTUH ÷ TOTAL WATTS CONSUMED

**9I HOT WATER CREDIT POINTS (HWCP)**

ELECTRIC RESISTANCE WATER HEATER												0	
GAS WATER HEATER												10	
INSTANTANEOUS WATER HEATER	ELECTRIC BACKUP											4.5	
	GAS BACKUP											12.6	
HRU (A/C) WATER HEATER	ELECTRIC BACKUP											8.9	
	GAS BACKUP											15.2	
HRU (HP) WATER HEATER	ELECTRIC BACKUP											9.7	
	GAS BACKUP											15.4	
HEAT PUMP WATER HEATER (DEDICATED HEAT PUMP)	COP		1.60 - 1.89	1.90 - 2.19	2.20 - 2.49	2.50 - 2.79	2.80 - 3.00						
	CREDIT POINTS		9.0	11.4	13.1	14.4	15.4						
SOLAR HOT WATER	OVERALL SOLAR FRACTION*	0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0		
	CREDIT POINTS	ELECTRIC BACKUP	2.4	4.8	7.2	9.6	12.0	14.4	16.8	19.2	21.6	24.0	
		GAS BACKUP	11.4	12.8	14.2	15.6	17.0	18.8	19.8	21.2	22.6	24.0	

\*PERCENT OF ANNUAL HOT WATER PROVIDED BY SOLAR SYSTEM ÷ 100 = OVERALL SOLAR FRACTION

# RESOLUTION

207

RESOLUTION NO. 207

A RESOLUTION OF THE TOWN COMMISSION OF THE TOWN OF SEWALL'S POINT, FLORIDA, AUTHORIZING AND APPROVING CONSTRUCTION OF A SWIMMING POOL TEN (10) FEET FROM SEAWALL FOR STUART KAYE.

481884

LEGAL DESCRIPTION

Lot 31, and the North 1/2 of Lot 32, ARCHIPELAGO SUBDIVISION, according to the Plat thereof recorded in Plat Book 4, page 48, Martin County, Florida, Public Records.

WHEREAS, the Town Commission of the Town of Sewall's Point has authority under the Code of Ordinances of the Town of Sewall's Point, Appendix B - Zoning, Section XI.E.2., to grant permission for lot owners to construct swimming pools within fifty (50) feet of the natural high water mark on waterfront lots, and

WHEREAS, STUART KAYE, the record owner of the above-described property, has applied for permission and a permit for construction of a swimming pool to be located within fifty (50) feet of the natural high water mark on the property, and

WHEREAS, the Town Commission has reviewed the application for the permit by STUART KAYE, and have determined that it meets all other criteria and requirements of the Code of Ordinances of the Town of Sewall's Point.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COMMISSION OF THE TOWN OF SEWALL'S POINT, FLORIDA, THAT:

1. STUART KAYE is hereby granted approval of the Town Commission of the Town of Sewall's Point to construct a swimming pool on the above-described waterfront lot in accordance with plans submitted to the Building Department of the Town of Sewall's Point.

2. This approval shall be for construction of a swimming pool only and shall not constitute permission or license, either now or in the future, to enclose with a screen enclosure or other type of enclosure, the swimming pool hereby approved.

3. This resolution shall be recorded by STUART KAYE in the public records of Martin County, Florida, at his sole expense.

PASSED AND ADOPTED this 13<sup>th</sup> day of July, 1983.

ATTEST:

Joan Barrow  
JOAN BARROW, Town Clerk

Approved as to form and  
correctness:  
M. Lanning Fox  
M. LANNING FOX,  
Town Attorney

Gilbert C. Strubell  
GILBERT C. STRUBELL,  
Mayor-Commissioner

Helena B. Towl  
HELENA B. TOWL,  
Commissioner

John C. Guenther  
JOHN C. GUENTHER,  
Commissioner

Dana de Windt  
DANA deWINDT,  
Commissioner

Edward H. Gluckler  
EDWARD H. GLUCKLER,  
Commissioner

LOUISE V. ISAACS  
CLERK OF THE DISTRICT COURT  
BY [Signature] D.C.

83 JUL 15 P 2: 35

FILED FOR RECORD  
MARTIN COUNTY, ALA.

1583

POOL

Permit No. 1583

Date 6-21-83

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 STUART KAYE Present Address #18 SIMARA ST

Phone 225-2345

Contractor Olympic Pools Address 1565 S.W. Martin Hwy

Phone 286-6070 Palm City, Fl. 33490

Where licensed STATE License number CPC011014

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: POOL

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

Subdivision Archipelago SEWALLS POINT Lot number 31 1/2 Block number Lot 32

Contract price \$ 10,000 Cost of permit \$ 150

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] DOUGLAS ALLEN

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

Owner [Signature]  
TOWN RECORD

Date submitted \_\_\_\_\_ Approved: \_\_\_\_\_  
Building Inspector Date

Approved: [Signature] 6/23 Final Approval given: \_\_\_\_\_  
Commissioner Date Date

Certificate of Occupancy issued (if applicable) \_\_\_\_\_  
Date

Steel & Grounding 7/8/83  
SP1282 Patroly owner 8/8/83 Permit No. \_\_\_\_\_  
Final 8/8/83

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.

#1583

Told Stuart Kaye that  
7' elevation for the pipe is OK  
12/27/83

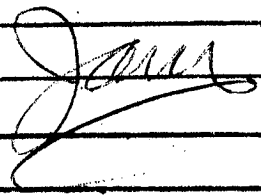
**RECORD OF INSPECTIONS**

**TOWN OF SEWALL'S POINT, FLORIDA**

**CERTIFICATE OF APPROVAL FOR OCCUPANCY**

Date 12-8-83

This is to request that a Certificate of Approval for Occupancy be issued to Street Kaye  
 For property built under Permit No. 1545 Dated 2-23-83 when completed in  
 conformance with the Approved Plans.

Item		
1. LOT STAKES/SET BACKS	3/15/83	Signed
2. TERMITE PROTECTION	3/15/83	Approved by
3. FOOTING SLAB	3/15/83 → 5/17/83	
4. ROUGH PLUMBING	3/29/83 8/11/83	
5. ROUGH ELECTRIC	8/11/83	
6. LINTEL		
7. ROOF	8/11/83	
8. FRAMING	8/11/83	
9. INSULATION	8/24/83	
10. A/C DUCTS	8/11/83	
11. FINAL ELECTRIC	12/8/83	
12. FINAL PLUMBING	12/8/83	
13. FINAL CONSTRUCTION	12/8/83	

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector J. J. Zulla 12/8/83 date

Approved by Building Commissioner J. E. Strubell date 12/8/83

Utilities notified \_\_\_\_\_ date \_\_\_\_\_

Original Copy sent to \_\_\_\_\_

(Keep carbon copy for Town files)



1605

PILINGS

&

BOATLIFT

Permit No. \_\_\_\_\_

Date \_\_\_\_\_

1605

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 STUART KAYE Present Address 18 SIMARA ST

Phone 225 2345 STUART FLA 33494

Contractor Owner Builder 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: MOVING 3 EXISTING PILING AS

PER DRAWING + ~~MOVING~~ ADDING A ~~MECHANICAL~~ MECHANICAL  
State the street address at which the proposed structure will be built: LIT

Subdivision \_\_\_\_\_ Lot number \_\_\_\_\_ Block number \_\_\_\_\_

Contract price \$ 1600 Cost of permit \$ 8950

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 Doss Morris Piling Mechanical lifts - Lit

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 8/19/83 Approved: [Signature] 8/19/83  
Building Inspector Date

Approved: [Signature] 8/23 Final Approval given: \_\_\_\_\_  
Commissioner Date Date

Certificate of Occupancy issued (if applicable) \_\_\_\_\_

Final Inspection 9/8/83  
OK. Date

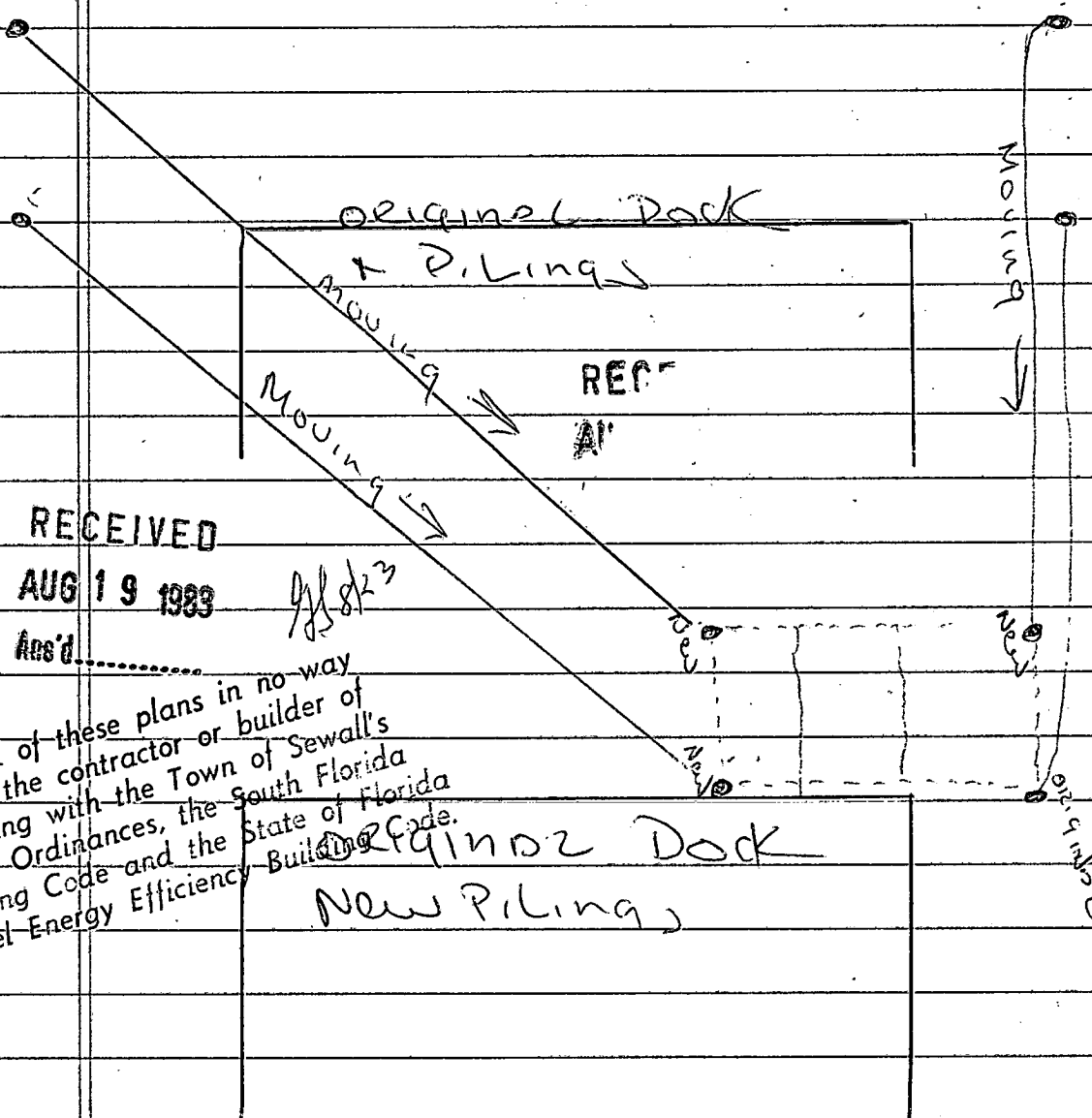
SP1282

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.

Kaye Residence  
18 SIMARA ST  
SEWALL'S POINT FLA

8/19/83



RECEIVED

AUG 19 1983

Ans'd

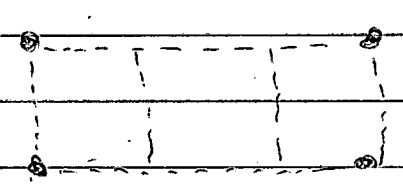
8/23

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

ORIGINAL DOCK  
New Piling

LIFT TO BE PUT IN ON MONDAY 8/22/83

LIFT IN DOTTED LINES



2749

PAVER DRIVEWAY

Permit No. \_\_\_\_\_

Date 4/5/90

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 NATHAN OWEN Present Address 18 SIMARA ST.

Phone 287-4913

Contractor KENRO & CSC1 Address 1104 N/E INDUSTRIAL BLVD

Phone 407 334-9903 JENSEN BEACH, FL.

Where licensed STATE OF FLORIDA License number CRC 033363

Electrical contractor N/A License number \_\_\_\_\_

Plumbing contractor N/A License number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: REPLACE DRIVEWAY WITH INTERLOCKING PAVERS

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

Subdivision ARCHIPELAGO 25/26 Lot number \_\_\_\_\_ Block number \_\_\_\_\_

Contract price \$ 7800 Cost of permit \$ 40XX

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 Logan Hegewald

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 Nathan Owen

Date submitted \_\_\_\_\_ Approved: Dale Brown 4/10/90  
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.

2899

REPAIR SEAWALL

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

2899

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

Owner MR & MRS. OWEN Present Address 18 Simara Street

Phone 287-4913

Contractor Plaza Marine Const. Inc Address 1200 SE Cutler Rd Ste G

Phone (407) 220-3623 Stuart, FL 34997

Where licensed Martin County License number SP01581e

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: To the rear 5' Barrier Walling for swimming sea wall cap.

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

18 Simara Street Sewalls Point, Florida 34996

Subdivision \_\_\_\_\_ Lot number \_\_\_\_\_ Block number \_\_\_\_\_

Contract price \$ 5,025.00 Cost of permit \$ \_\_\_\_\_

Plans approved as submitted \_\_\_\_\_ Plans approved as marked \_\_\_\_\_

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

Contractor Lisa Danquiano-Guidice

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 John Owens WJO

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: \_\_\_\_\_  
Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

Approved: \_\_\_\_\_ Commissioner \_\_\_\_\_ Date \_\_\_\_\_  
Final Approval given: \_\_\_\_\_ Date \_\_\_\_\_

Certificate of Occupancy issued (if applicable) \_\_\_\_\_  
Date \_\_\_\_\_

SP1282

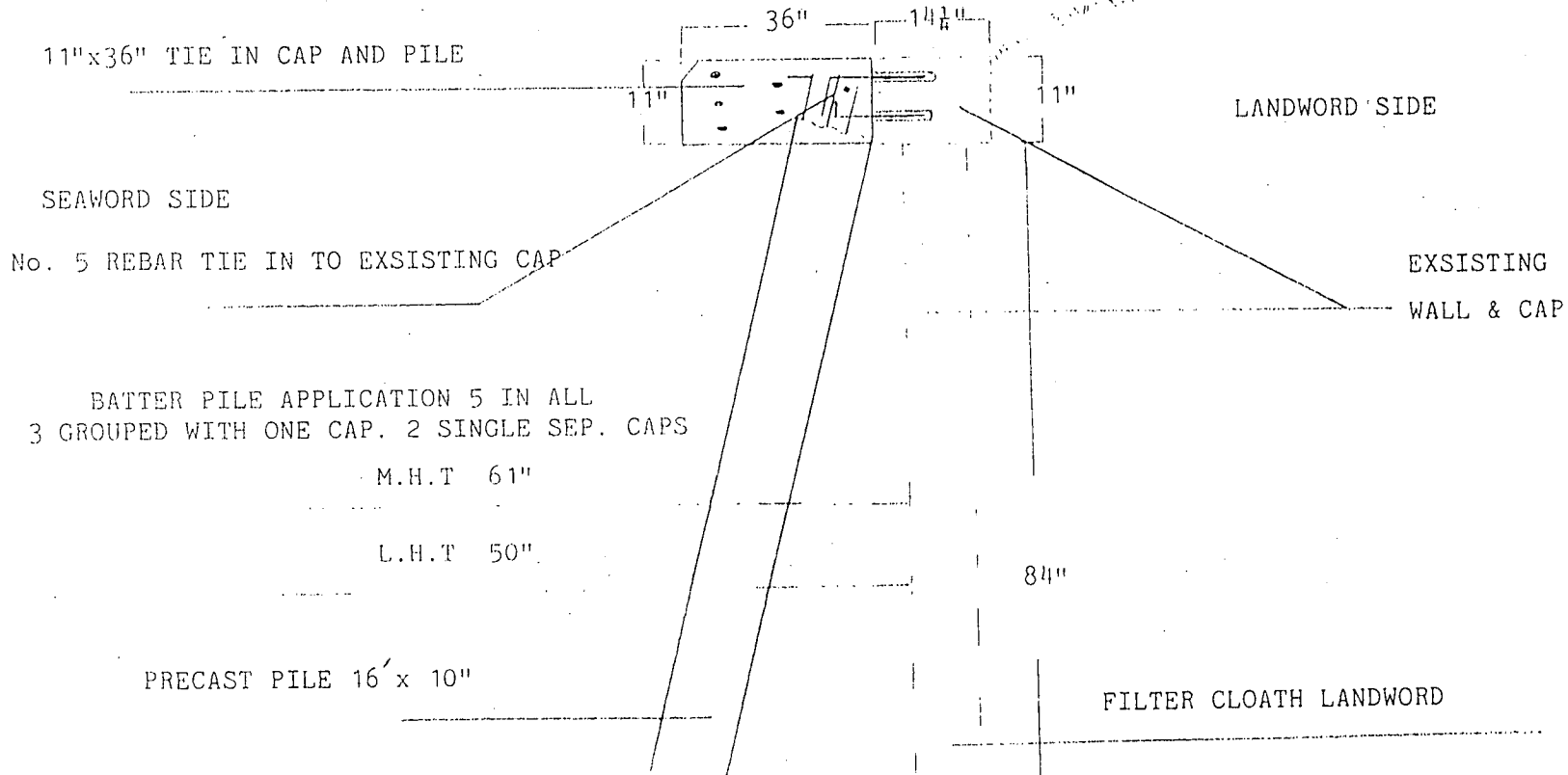
Permit No. \_\_\_\_\_

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

Subdivision of " ARCHIPELAGO "

Residents of Mr & Mrs J. Owen  
18 Simara St.

Lot No. 32



11"x36" TIE IN CAP AND PILE

SEAWORD SIDE

No. 5 REBAR TIE IN TO EXSISTING CAP

LANDWORD SIDE

EXSISTING  
WALL & CAP

BATTER PILE APPLICATION 5 IN ALL  
3 GROUPED WITH ONE CAP. 2 SINGLE SEP. CAPS

M.H.T 61"

L.H.T 50"

84"

PRECAST PILE 16' x 10"

FILTER CLOATH LANDWORD

16' x 10" PRECAST PILE DRIVEN / JETED TO SOLID  
BASE AT ABOUT 220 FT LBS. PER SQUARE INCH. NOT  
LESS THAN 6' penetration.

NOTE:

SINGLE PILE TO HAVE CAP NOT  
LESS THAN 36"x 60" x 11"

ENGINEERING REVIEW

& APPROVAL

By: S. J. AMICO P.E.

LC # 25140

12-13-90

*S. J. Amico P.E.*



Producer  
 SUSAN M. FINES AGENCY  
 1779 SE Manth Lane  
 Port St. Lucie  
 FL 34983-  
 (407)879-0052 Ext

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

COMPANIES AFFORDING COVERAGE

Insured  
 Plaza Marine  
 Construction, Inc.  
 1200 SE Cutoff Rd. S-6  
 Stuart, FL 34997  
 (407)220-3625 Ext

Company Letter A Scottsdale Insurance Co.  
 Company Letter B Liberty Mutual Insurance  
 Company Letter C  
 Company Letter D  
 Company Letter E

COVERAGES This is to certify that 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.

Co Ltr	Type of Insurance	Policy Number	Policy Eff. Date	Policy Exp. Date	Limits
A	General Liability				Bodily Injury Occ. \$ 100
	<input checked="" type="checkbox"/> Comprehensive Form				Bodily Injury Agg. \$ 0
	<input type="checkbox"/> Premises/Operations				Property Damage Occ. \$ 25
	<input type="checkbox"/> Underground Exp. & Coll Hzd.				Property Damage Agg. \$ 25
	<input checked="" type="checkbox"/> Products/Completed Oper.				BI & PD Combined Occ. \$ 0
	<input type="checkbox"/> Contractual	GLS 334008	06-15-90	06-15-91	BI & PD Combined Agg. \$ 0
	<input type="checkbox"/> Independent Contractors				Personal Injury Agg. \$ 0
	<input type="checkbox"/> Broad Form Property Damage				
	<input type="checkbox"/> Personal Injury				
	Automobile Liability				
	<input type="checkbox"/> Any Auto				Bodily Injury
	<input type="checkbox"/> All Owned Autos Prvt Pas				(Per person) \$ 0
	<input type="checkbox"/> All Owned Autos Not Prvt Pas				Property Damage
	<input type="checkbox"/> Hired Autos				(Per person) \$ 0
	<input type="checkbox"/> Non-Owned Autos				Property Damage \$ 0
	<input type="checkbox"/> Garage Liability				Bodily Injury & Property
	<input type="checkbox"/>				Damage Combined \$ 0
	Excess Liability				Each Occurrence \$ 0
	<input type="checkbox"/> Umbrella Form				Aggregate \$ 0
	<input type="checkbox"/> Other Than Umbrella				
					Statutory Limits
B	Worker's Compensation				\$ 100 (Each Accident)
	And	09-15628-90179	06-15-90	06-15-91	\$ 0 (Disease-Policy Limit)
	Employers' Liability				\$ 0 (Disease-Each Employee)
	Other				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / SPECIAL ITEMS

Certificate Holder  
 Martin County  
 ATTN: Contractors Licensing  
 12401 SE Monterey Road  
 Stuart, FL 34996

Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 10 days written notice to the certificate holder named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives.

Authorized Representative:

*Susan M. Fines*



MARTIN COUNTY CONTRACTORS  
CERTIFICATE OF COMPETENCY

LISA ANN JULIANO GUIDICE

Plaza Marine Construction, Inc.

1708 SE Outlaw Road - Sta G

Stuart, FL 34997

EXPIRES SEPTEMBER 30, 19 91

CERTIFICATE  
NUMBER

14276

CERTIFICATE NUMBER

SP01586

CERTIFIED  
CONTRACTOR

MARINE CONTRACTOR

SIGNATURE *John A. Johnson*

ATTEST: *Valerie A. Johnson*  
LICENSING ADMINISTRATOR

2923

FLAG POLE

Permit No.

2923

Date

2-11-91

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 NATHAN OWEN Present Address 18 SIMARA STREET

Phone \_\_\_\_\_ STUART FL 34994

Contractor GOULD SIGNS Address 3035 SE WAVER ST

Phone 282-4666 STUART FL 34997

Where licensed MARTIN COUNTY License number MC00103

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: 25' FLAGPOLE - BRONZE ANODIZE

SINGLE PIECE ALUMINUM

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

18 SIMARA STREET

Subdivision Archipelago Lot number 31 Block number \_\_\_\_\_

Contract price \$ 1350.00 Cost of permit \$ \_\_\_\_\_

Plans approved as submitted \_\_\_\_\_ Plans approved as marked \_\_\_\_\_

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

Contractor Joseph R. Gould

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 Nathan R. Owen

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: \_\_\_\_\_ Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

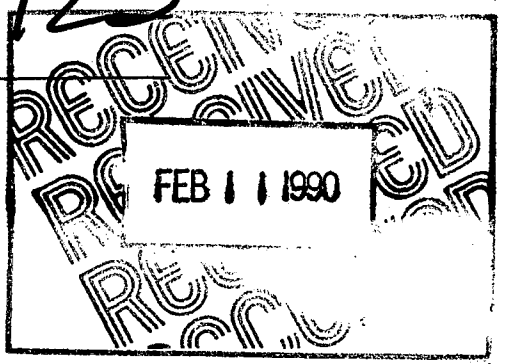
Approved: [Signature] Commissioner \_\_\_\_\_ Date \_\_\_\_\_ Final Approval given: \_\_\_\_\_ Date \_\_\_\_\_

Certificate of Occupancy issued (if applicable) \_\_\_\_\_ Date \_\_\_\_\_

SP1282

Permit No.

2923



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.

3313

DOCK EXTENTION

Permit # \_\_\_\_\_

Date 9/28/92

APPLICATION FOR A PERMIT TO BUILD A DOCK, FENCE, POOL SOLAR HEATING DEVICE, SCREENED ENCLOSURE, GARAGE OR ANY OTHER STRUCTURE NOT A HOUSE OR 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 NATHAN OWEN Present Address 18 SIMARA SEA

Phone 287-4913 SEWALL'S POINT

Contractor HITIDE MARINE CONSTRUCTION Address 3191 S.E. WAREL ST.

Phone 283-9354 STUART, FL. 34997

Where licensed STATE License number CGC045373

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 10" EXTENSION TO EAST END OF EXISTING DOCK

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

18 SIMARA

Subdivision ARCHIPELAGO Lot number 31 & 1/2 of 32 Block number \_\_\_\_\_

Contract price \$ 1600 Cost of permit \$ \_\_\_\_\_

Plans approved as submitted  Plans approved as marked \_\_\_\_\_

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

TOWN RECORD

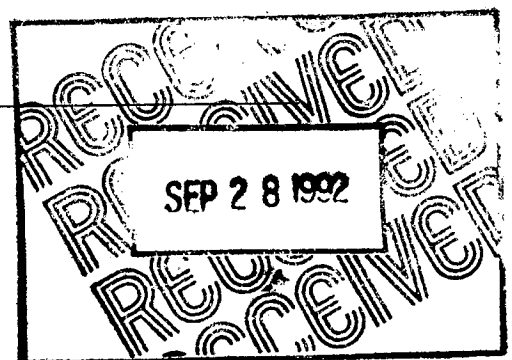
Date submitted 9/28/92 Approved: Dale Brown 1/5/93 Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

Approved: [Signature] 1/4/93 Final Approval given: 1/5/93 Commissioner \_\_\_\_\_ 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 Town of Sewall's Point ordinances, The South Florida Building Code and State of Florida Model Energy Efficiency Building Code.



# Florida Department of Environmental Regulation

Office Bldg. • 2600 Blair Stone Road • Tallahassee, Florida 32399-2400

JUL 15 1992

Dept. of Environmental Reg.  
Port St. Lucie

## Joint Application for Works in the Waters of Florida

Department of the Army (Corps)/Florida Department of Environmental Regulation (DER)/  
Department of Natural Resources (DNR)/Delegated Water Management District (Delegated WMD)

Type or Print Legibly

DER Form #	17-312 (00/87)
Form Title	Joint App. for Works in the Waters of Florida
Effective Date	October 10, 1980
DER Application No.	(Filled in by DER)

Corps Application Number (official use only)	DER Application Number (official use only) <b>432163458</b>
--	--

1. Applicant's Name and Address

Name OWEN, NATHAN  
Last Name, First Name (If Individual); Corporate Name; Name of Govt. Agency

Street 18 SIMARA STREET

City (SEWALL'S POINT) STUART State FLORIDA Zip 34996

Telephone (407) 287-4913 (Day) ( ) (Night)

2. Name, Address, Zip Code, Telephone Number and Title of Applicant's Authorized Agent

Name HUBBS, SID  
Last Name, First Name

Corporate Name; Name of Govt. Agency HITIPS MARINE CONSTRUCTION INC.

Street 3191 S.E. WALKER STR.

City STUART State FLA. Zip 34997

Telephone (407) 283-9354 (Day) (407) 283-9354 (Night)

3. Name of Waterway at Work Site: MAN MADE CHANNEL OFF OF INDIAN RIVER

4. Street, Road or Other Location of Work 18 SIMARA STREET

Incorporated City or Town SEWALL'S POINT

Section 7 Township 3B Range 42

Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

County(ies) MARTIN

Coordinates in Center of Project: \_\_\_\_\_ Federal Projects Only: \_\_\_\_\_ x \_\_\_\_\_ y

Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

Lot 31 1/2 of 32 Block \_\_\_\_\_ Subd ARCHIPELAGO Plat Bk \_\_\_\_\_ Pg \_\_\_\_\_

Directions to Locate Site: EAST ON EAST OCEAN BLVD. TO SOUTH SEWALL'S PT RD;  
SOUTH TO SIMARA STREET; GO LEFT OVER 2 SMALL BRIDGES; FIRST  
HOUSE ON LEFT AFTER 2ND BRIDGE

5. Names, Addresses, and Zip Codes of Adjacent Property Owners Whose Property Also Adjoins the Water (Excluding Applicant). Show Numbers or Names of These Owners on Plan Views. If More Than Six (6) Owners Adjoin the Project, You May Be Required to Publish a Public Notice for the DER.

1. _____	2. _____	3. _____
4. _____	5. _____	6. _____

AUG 10 1992  
TITLE SECTION

Northwest District  
160 Government Center  
Tallahassee, Florida 32301-3794  
(904) 437-4300

Northwest District  
Suite 0200, 1425 Independence Way  
Tallahassee, Florida 32306-7511  
(904) 437-4300

Central District  
3319 Wayne Blvd. Suite 202  
Gainesville, Florida 32603-2001  
(813) 337-3333

Southern District  
4520 Oak Tree Blvd.  
Temple, Florida 32685-7241  
(813) 477-3201

South District  
2264 Bay St.  
Fort Myers, Florida 33901-2294  
(813) 337-6973

Southern District  
1900 S Congress Ave. Suite A  
West Palm Beach, Florida 33409  
(407) 433-7650

**EXEMPT  
FROM FURTHER REQUIREMENTS OF  
THE DIVISION OF STATE LANDS.  
PER CHAPTER 253.77 F.S.**

H. Michaels 8/24/92  
By Date





DEPARTMENT OF THE ARMY  
TAMPA REGULATORY FIELD OFFICE, JACKSONVILLE DISTRICT CORPS OF ENGINEERS  
P. O. BOX 19247  
TAMPA, FLORIDA 33686-9247

REPLY TO  
ATTENTION OF

September 2, 1992

Tampa Regulatory  
Field Office  
199241132  
NW2

Mr. Nathan Owen  
c/o Hi-Tide Marine Construction, Inc.  
Attn: Mr. Sid Hobbs  
3191 S.E. Waaler Street  
Stuart, Florida 34997

Dear Applicant:

Reference is made to your joint permit application received July 27, 1992, requesting authorization to construct a 10' marginal dock addition and install 2 mooring pilings in a man-made canal off the Indian River at Section 7, Township 38 South, Range 42 East, Martin County, Florida.

This verifies that your proposal is authorized by Nationwide Permit number NW2, in accordance with the enclosed copy of our regulations as stated in 33 CFR Part 330, Appendix A. This verification is valid for a period of 2 years from the date of this letter. If the work authorized herein is not completed within the 2-year period, this verification, if not previously revoked or specifically extended, shall automatically expire.

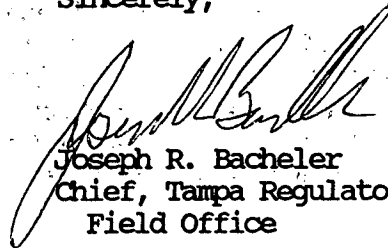
A separate Department of the Army permit is not required providing the work is done in accordance with the enclosed drawings/information submitted, the conditions listed in 33 CFR 330, Appendix A, Subparagraph C and any appropriate regional conditions (copy enclosed).

This letter does not give absolute authority to perform the work as specified on your application. The proposed work may be subject to local building restrictions mandated by the National Flood Insurance Program. You should contact your local office that issues building permits to determine if your site is located in a flood-prone or floodway area, and if you must comply with the local building requirements mandated by the National Flood Insurance Program. If the local office cannot provide you the necessary information, you may provide a letter with a small scale map showing the location of the site, requesting a flood-hazard evaluation of

the site. The request should be addressed to the Chief, Flood Control and Floodplain Management Branch, Jacksonville District, U.S. Army Corps of Engineers, Post Office Box 4970, Jacksonville, Florida 32232-0019. This letter authorization does not obviate the necessity to obtain any other Federal, State, and local permits which may be necessary for your proposed work. You should check State permitting requirements with the Florida Department of Environmental Regulation. A list of addresses of the appropriate State office is enclosed for your information and use.

Thank you for your cooperation with the permit program.

Sincerely,



Joseph R. Bachelier  
Chief, Tampa Regulatory  
Field Office

Enclosures

#### NOTICE

This letter does not give absolute authority to perform the work as specified on your application. The proposed work may be subject to local building restrictions mandated by the National Flood Insurance Program. You should contact your local office that issues building permits to determine if your site is located in a flood-prone or floodway area, and if you must comply with the local building requirements mandated by the national Flood Insurance Program. If the local office cannot provide you the necessary information, you may provide our District Office a letter with a small scale map showing the location of the site, requesting a flood-hazard evaluation for the site. The request should be addressed to the Chief, Flood Control and Floodplain Management Branch, Jacksonville District, U.S. Army Corps of Engineers, Post Office Box 4970, Jacksonville, Florida 32232-0019.





6. Proposed Use (Check one or more as applicable) Private  Single Family  Multi Family   
 Public  Commercial  New Work  Alteration of Existing Works  Maintenance  Other (Explain) \_\_\_\_\_

7. Desired Permit Duration (see Fee Schedule)  
 5 Yr  10 Yr  Other (Specify) \_\_\_\_\_

8. General Permit or Exemption Requested  
 DER General Permit FAC Rule 17-312. \_\_\_\_\_ DER Exemption FAC Rule 17-312. \_\_\_\_\_ Section 403. \_\_\_\_\_ FS:

9. Total Extent of Work In Jurisdictional Open Waters or Wetlands: (Use additional sheets and provide complete breakdown of each category if more space is needed.)

a. Within Corps Jurisdiction:  
 Fill: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ Acres \_\_\_\_\_ Cu. Yds.  
 Excavation: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ Acres \_\_\_\_\_ Cu. Yds.

b. Within DER Jurisdiction:  
 Fill: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ Acres \_\_\_\_\_ Cu. Yds.  
 Excavation: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ Acres \_\_\_\_\_ Cu. Yds.  
 Excavation Waterward of MHW \_\_\_\_\_ cu. yds. (information needed for DNR)

c. DER Jurisdictional Area Severed (Area Landward of Fill Structures which will be Severed):  
 \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ Acres

d. DER Jurisdictional Area Created (New Excavation from Uplands, Exclusive of Mitigation):  
 \_\_\_\_\_ Sq. Ft. \_\_\_\_\_ Acres

e. Docks, Piers, and Over Water Structures:  
 Total Number of Slips 1 Total Number of Mooring Pilings 2  
 Length 10' Width 8' Height above MHW 3'  
 Length \_\_\_\_\_ Width \_\_\_\_\_ Height above MHW \_\_\_\_\_  
 Number of Finger Piers \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_  
 Number of Finger Piers \_\_\_\_\_ Length \_\_\_\_\_ Width \_\_\_\_\_ Height \_\_\_\_\_  
 Total area of structure over waters & wetlands 80 sq. ft.  
 Use of structure MOORING OF VESSEL

Will the docking facility provide:

	No	Yes	Number
Liveaboard Slips	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Fueling Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Sewage Pump-out Facilities	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____
Other Supplies or Services Required for Boating (Excluding refreshments, bait and tackle)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	_____

f. Seawall length \_\_\_\_\_ ft Seawall material \_\_\_\_\_  
 Riprap revetment length \_\_\_\_\_ ft Slope \_\_\_\_\_ H: \_\_\_\_\_ V \_\_\_\_\_ Toe width \_\_\_\_\_ ft.  
 Riprap at toe of seawall length \_\_\_\_\_ ft Slope \_\_\_\_\_ H: \_\_\_\_\_ V \_\_\_\_\_ Toe width \_\_\_\_\_ ft.  
 Size of riprap \_\_\_\_\_  
 Type of riprap or seawall material \_\_\_\_\_

g. Other (See Item 10).



RECEIVED

JUL 15 1992

Dept. of Environmental Reg.  
Fort St. Lucie

DER Form	
Form No.	Joint Application in the Waters of Florida
Effective Date	October 10, 1990
DER Application No.	(Filled in by DER)

10. Description of Work (be specific; use additional sheets as necessary).

ADDITION OF 10' OF DOCK TO EXISTING 8' WIDE X 30' LONG DOCK.

11. Turbidity, Erosion, and Sedimentation Controls Proposed:

TURBIDITY SCREEN WILL BE IN PLACE DURING INSTALLATION OF PILING TO PREVENT DISPERSION OF WATER BORN SEDIMENT.

12. Date Activity is Proposed to Commence 7/28/92; to be Completed 7/31/92

Total Time Required to Construct \_\_\_\_\_

13. Previous Applications for this Project have been:

DER No.

Corps No.

A. Denied (date) \_\_\_\_\_

B. Issued (date) \_\_\_\_\_

C. Other (please explain) \_\_\_\_\_

Differentiate between existing work and proposed work on the drawings.

14. Certification. Application is hereby made for a permit or permits to authorize the activities described herein.

A. I Certify That: (Please check appropriate space)

1. I am the record owner , lessee , or the record easement holder  of the property on which the proposed project is to be undertaken, as described in the attached legal document.

2. I am not  the record owner, lessee, or record easement holder of the property on which the proposed project is to be undertaken, as described in the attached legal document, but I will have, before undertaking the proposed work, the requisite property interest. (Please explain what the interest will be and how it will be acquired.)

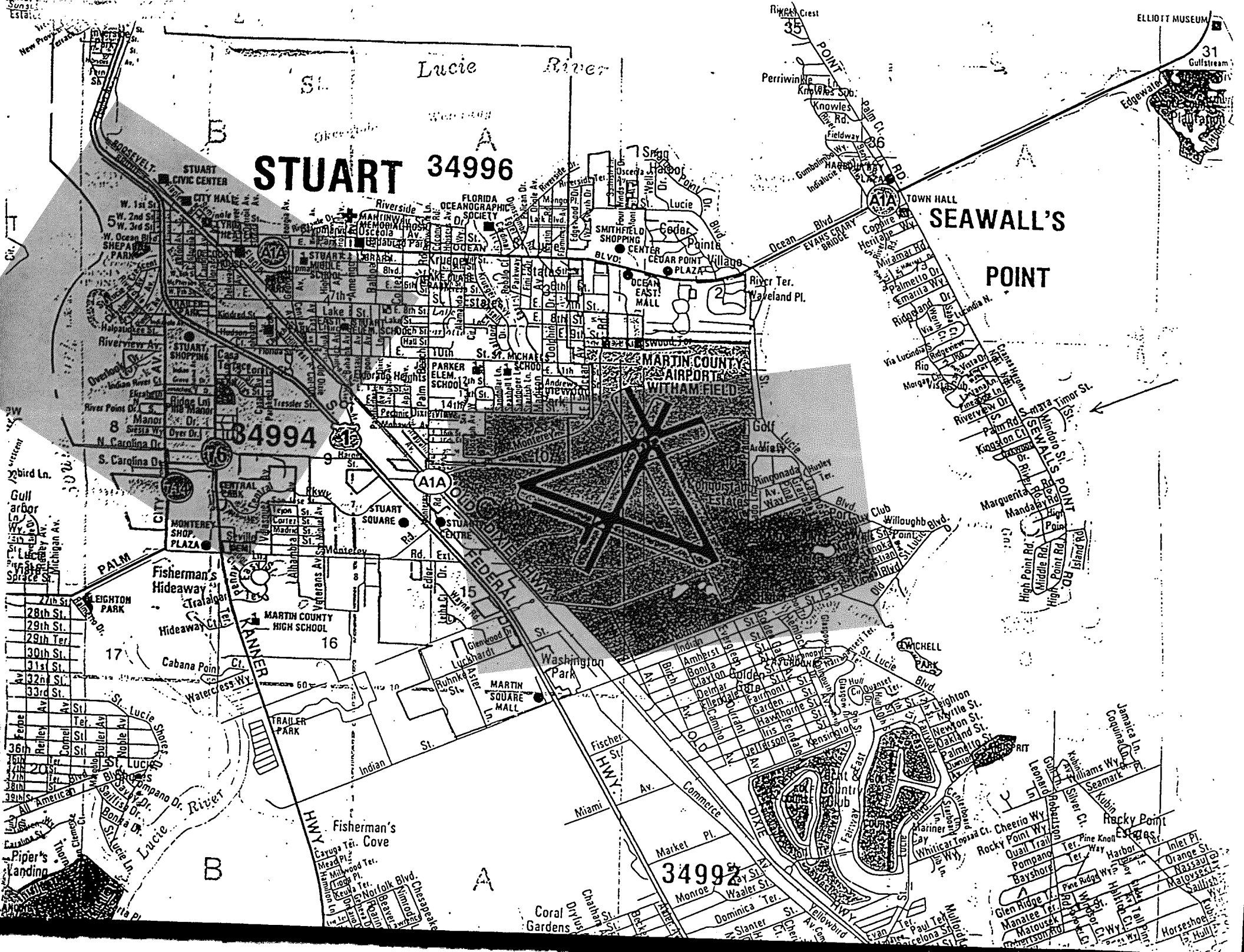
Attach legal description of property or copy of deed to the property on which project is to occur (must be provided)

B. I understand I may have to provide any additional information/data that may be necessary to provide reasonable assurance or evidence that the proposed project will comply with the applicable State Water Quality Standards or other environmental standards both before construction and after the project is completed.

C. In addition, I agree to provide entry to the project site for inspectors with proper identification or documents as required by law from the environmental agencies for the purpose of inspecting the site. Further, I agree to provide entry to the project site for such inspectors to monitor permitted work, if a permit is granted.

D. This is a Joint Application and is not a Joint Permit. I hereby acknowledge the obligation and responsibility for obtaining all of the required state, federal or local permits before commencement of construction. I also understand that before commencement of this proposed project, I must be granted separate permits or authorizations from the U.S. Corps of Engineers, the U.S. Coast Guard, the Department of Environmental Regulation, the Delegated Water Management District (where applicable), and the Department of Natural Resources, as necessary.





ELLIOTT MUSEUM

31 Gulfstream

Lucie River

STUART 34996

SEAWALL'S POINT

POINT

MARTIN COUNTY AIRPORT WITHAM FIELD

34994

34994

New Providence St.  
W. 1st St.  
W. 2nd St.  
W. 3rd St.  
W. Ocean Blvd.  
SHEPARD'S PARK  
Riverview Av.  
Dover Dr.  
S. Carolina Dr.  
7th St.  
28th St.  
29th St.  
29th Ter.  
30th St.  
31st St.  
32nd St.  
33rd St.  
36th St.  
37th St.  
38th St.  
39th St.  
Piper's Landing

STUART CIVIC CENTER  
CITY HALL  
STUART SHOPPING CENTER  
MONTEREY SHOP PLAZA  
FISHERMAN'S HIDEAWAY  
HIDEAWAY CLUB  
CABANA POINT  
TRAILER PARK  
FISHERMAN'S COVE  
MEAD PLAZA  
MILLWOOD TER.  
LARGE PL.  
COURT  
NORFOLK BLVD.  
CHESAPEAKE

FLORIDA OCEANOGRAPHIC SOCIETY  
STUART SQUARE  
STUART CENTRE  
MARTIN COUNTY HIGH SCHOOL  
MARTIN SQUARE MALL

RIVERSIDE  
SMITHFIELD SHOPPING CENTER  
OCEAN EAST MALL  
PARKER ELEMENTARY SCHOOL  
STUART SQUARE  
STUART CENTRE  
LUCKHARDT  
MARTIN SQUARE MALL

CEAR POINT VILLAGE PLAZA  
MARTIN COUNTY AIRPORT WITHAM FIELD  
GOLF COURSE  
WASHINGTON PARK  
FISHER HWY.

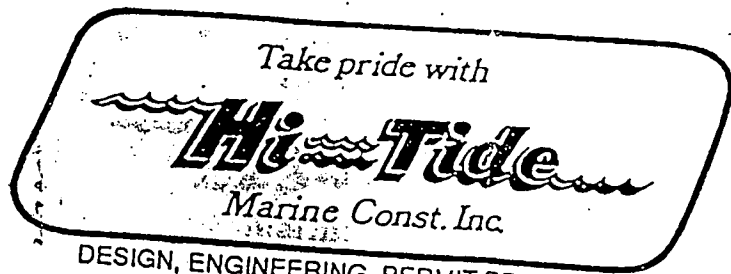
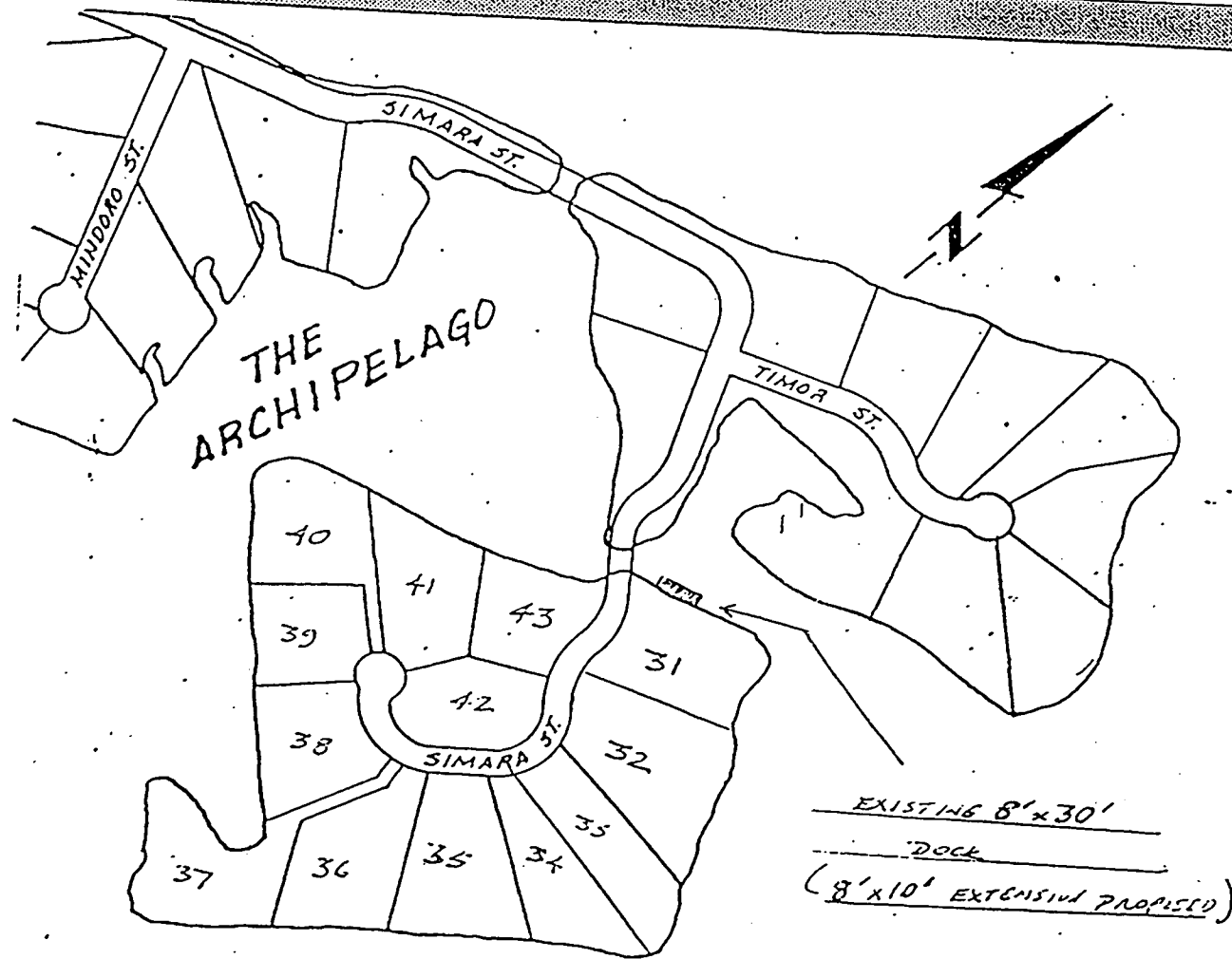
OCEAN BLVD.  
EVANS CRAWFORD BRIDGE  
RIVER TER.  
WAVELAND PL.  
WILLAUGHBY BLVD.  
MARTIN COUNTY AIRPORT WITHAM FIELD  
MARTIN COUNTY AIRPORT WITHAM FIELD  
MARTIN COUNTY AIRPORT WITHAM FIELD

POINT  
TOWN HALL  
HERITAGE WY.  
MARIAM BLVD.  
PALMETTO DR.  
EMERALD WY.  
RIDGELAND DR.  
VIA LUCIE DR.  
RIO  
HIDEGREW  
VITA DR.  
LAVANA DR.  
EMERALD DR.  
RIVERSIDE DR.  
S-MARA TIMOR ST.  
PAIN RD.  
SWALL'S POINT  
KINGSTON CT.  
MARGUERITA BLVD.  
MANDALAY BLVD.  
HIGH POINT RD.  
MIDDLE RD.  
HIGH POINT RD.  
ISLAND RD.

W. 1st St.  
W. 2nd St.  
W. 3rd St.  
W. Ocean Blvd.  
SHEPARD'S PARK  
Riverview Av.  
Dover Dr.  
S. Carolina Dr.  
7th St.  
28th St.  
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36th St.  
37th St.  
38th St.  
39th St.  
Piper's Landing

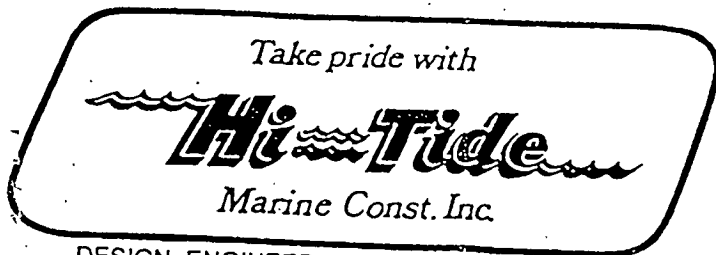
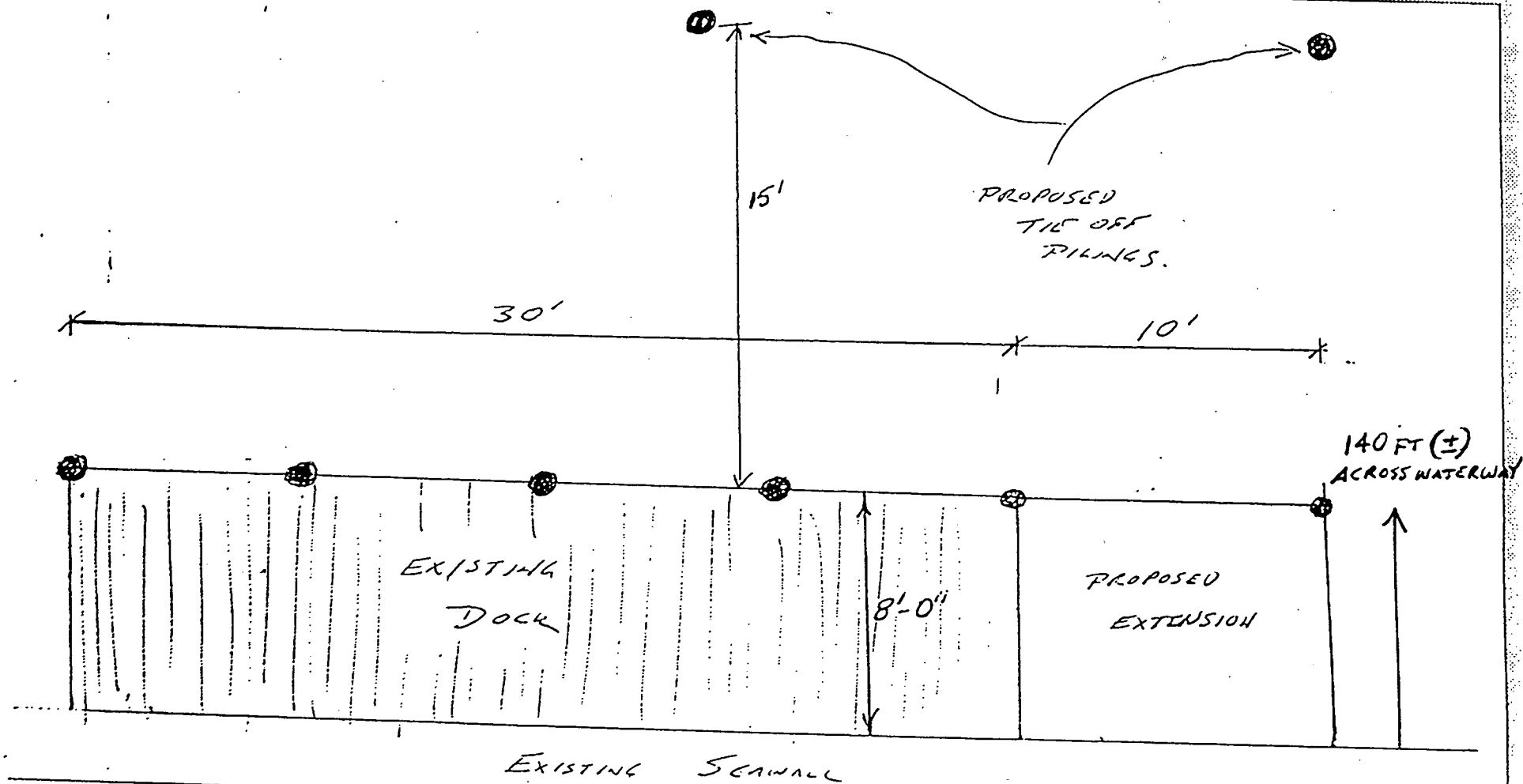
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Piper's Landing

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36th St.  
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38th St.  
39th St.  
Piper's Landing



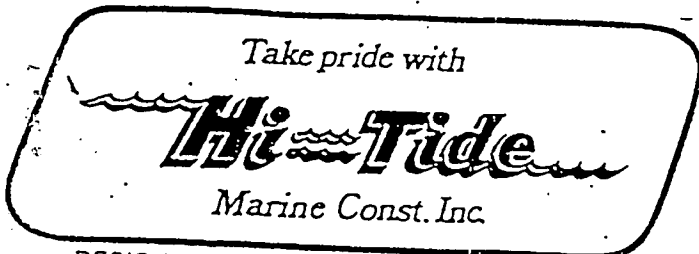
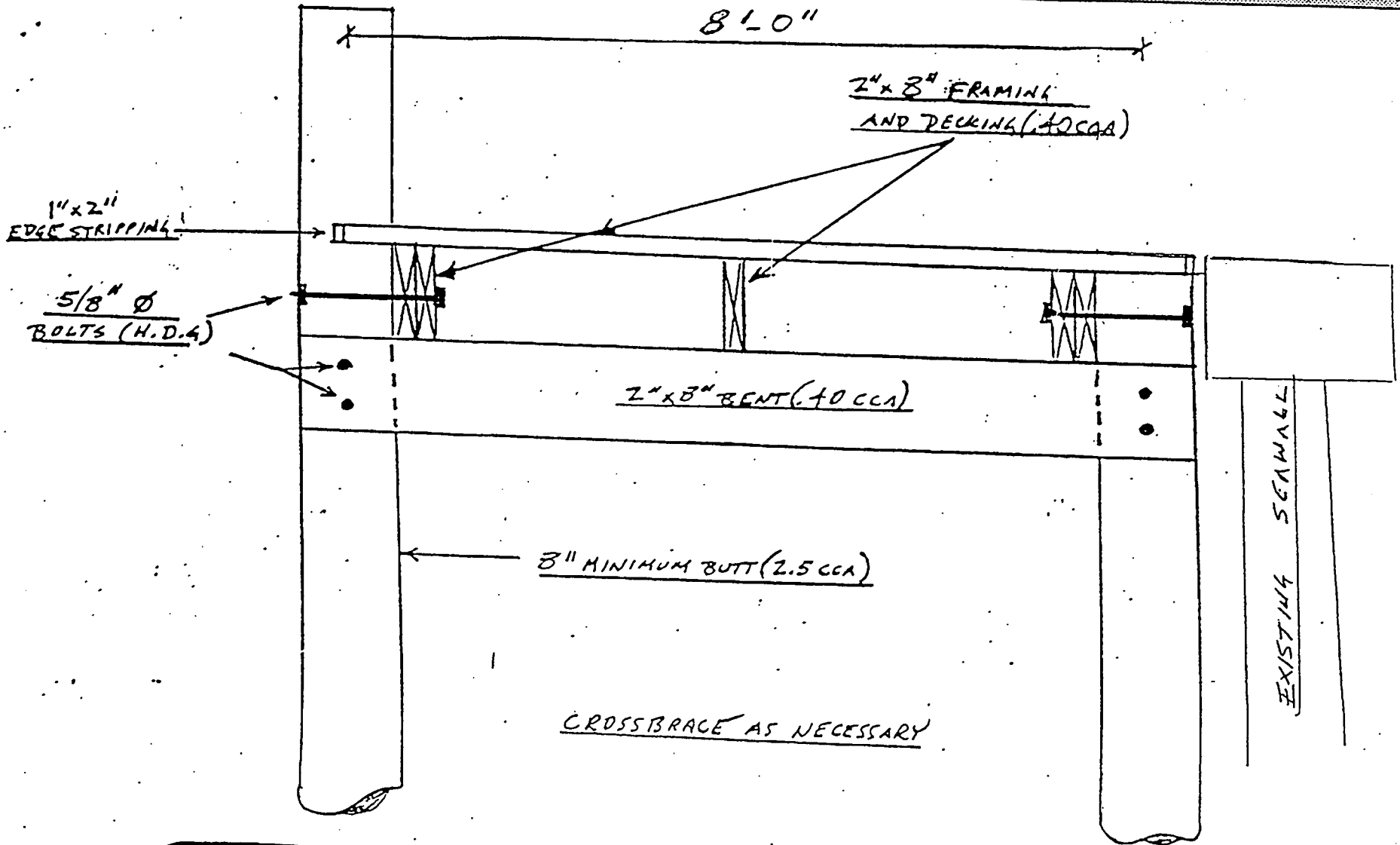
DESIGN, ENGINEERING, PERMIT PROCESSING  
GENERAL CONTRACTING

DATE: 6/4/92	DRAWN BY: SKH	APPROVED BY:
SCALE: N.T.S.	REVISED:	
PROJECT: OWENS - DOCK EXTENSION		
MARINE PERMIT CLASSIFICATION DER, DNR, ARMY CORPS, TOWN OF SEWALLS PT.		DRAWING NUMBER AREA PLAN, VIEW



DESIGN, ENGINEERING, PERMIT PROCESSING  
GENERAL CONTRACTING

DATE: 6/4/92	DRAWN BY: SKH	APPROVED BY:
SCALE: 1" = 5'	REVISED: 8/13/92	
PROJECT: OWENS DOCK EXTENSION		
MARINE PERMIT CLASSIFICATION		DRAWING NUMBER
DER, DNR, ARMY CORPS, TOWN SEWAGE DEPT. DOCK PLAN VIEW		



DESIGN, ENGINEERING, PERMIT PROCESSING  
GENERAL CONTRACTING

DATE: 6/4/92	DRAWN BY: SKH	APPROVED BY:
SCALE:	REVISED:	
PROJECT: TYPICAL DOCK CROSS SECTION		
MARINE PERMIT CLASSIFICATION		DRAWING NUMBER
DEC, DNR ARMY CORPS, TOWN OF SEAWALLS, NY		

4149

REROOF

TAX FOLIO NO. \_\_\_\_\_

DATE 3/4/97

APPLICATION FOR A PERMIT TO BUILD A DOCK, FENCE, POOL, SOLAR HEATING DEVICE, SCREENED, RE-1 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 Dave Horner Present Address 18 Sumara st

Phone 223 5250 Stuart Fl 34996

Contractor Stuart Roofing inc Address P.O Box 2556 Stuart Fl

Phone 286-2310

Where licensed STATE License Number CCC 024411

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: remove wood shakes & flat roof replace with

pressure treated shakes - single ply

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

Subdivision Archpelgo Lot Number 31 1/2 of 32 Block Number \_\_\_\_\_

Contract Price \$ 14,895 Cost of Permit \$ \_\_\_\_\_

Plans approved as submitted \_\_\_\_\_ Plans approved as marked \_\_\_\_\_

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

TOWN RECORD

Date submitted 3/4/97

Approved: [Signature] 3/4/97  
Building Inspector Date

Approved: \_\_\_\_\_ Date Final Approval given: \_\_\_\_\_ Date  
Commissioner Date

Certificate of Occupancy issued(if applicable) \_\_\_\_\_ Date

SP1282 Permit No. \_\_\_\_\_

TO BE COMPLETE WHEN CONSTRUCTION VALUE IS \$2500.00 OR MORE

PERMIT # \_\_\_\_\_ TAX FOLIO # \_\_\_\_\_

NOTICE OF COMMENCEMENT

THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENTS WILL BE MADE 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 KNOWN)

pc # 133 841 001 00000 31 01 0000

GENERAL DISCRETION OF IMPROVEMENTS REEROOF

OWNER: Dave Humer

ADDRESS: 18 Simara St Stuart FL 34996

OWNER'S INTEREST IN PROPERTY: REEROOF

FEE SIMPLE TITLE HOLD (IF OTHER THAN OWNER): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CONTRACTOR: Stuart Roofing Inc

ADDRESS: P.O. Box 2556 Stuart FL 34995

SURETY COMPANY (IF ANY) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

LENDER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PERSON WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.3(1) (A)7., FLORIDA STATUTES:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

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

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

Dave Humer  
SIGNATURE OF OWNER

STATE OF Florida  
COUNTY OF Martin

STATE OF FLORIDA  
MARTIN COUNTY  
THIS IS TO CERTIFY THAT THE  
FOREGOING \_\_\_\_\_ PAGES IS A TRUE  
AND CORRECT COPY OF THE ORIGINAL  
MARSHA STILLER, CLERK  
BY J. C. [Signature] D.C.  
DATE 3-4-97



THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 4 DAY OF March, 1997, BY \_\_\_\_\_ WHO IS KNOWN TO ME OR WHO PRODUCED \_\_\_\_\_ AND WHO DID NOT TAKE AN OATH.

Eric M. Lauritsen  
NOTARY SIGNATURE

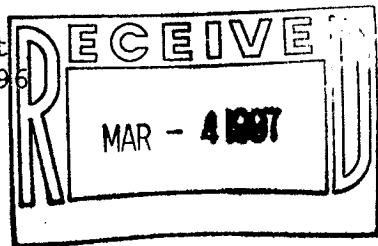


**STUART ROOFING, INC.**  
 P.O. Box 2556  
 STUART, FLORIDA 34995

# PROPOSAL

(407) 286-2317  
 FAX (407) 286-0537

TO Dave Horner  
 18 Simara Street  
 Stuart, FL 34996



PHONE	223-5250	DATE	2/20/97
JOB NAME / LOCATION		Sewall's Point	
JOB NUMBER		JOB PHONE	

We hereby submit specifications and estimates for:

We propose to tear off existing woodshake and flat roofs down to sheeting and haul away all trash and debris. Dry in roof with a 30# felt dry in sheet tin tag nailed to sheeting, ~~1/2" to 3/4"~~ Cedar Shakes nailed with 10' exposure to weather, 18" layer of 30# felt between each coarse of Cedar Shakes.

Copper 16" valley metal,

On flat roof dry in with 43# base sheet tin tag nailed to sheeting, Single ply modified bitumen elastomeric asphalt roof system with white granular surface modified adhered.

Re-roofing permit

16885



5438

BOAT LIFT

MASTER PERMIT NO. N/A

**TOWN OF SEWALL'S POINT**

Date 7/16/01

BUILDING PERMIT NO. 5438

Building to be erected for LEON E. ZYGMON

Type of Permit DOCK-BOAT LIFT

Applied for by OCTOPUS MARINE SERVICES, INC (Contractor)

Building Fee \$240.00

Subdivision ARCHIPELAGO Lot 31 1/2 32 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 18 SIMARA STREET

Impact Fee \_\_\_\_\_

Type of structure S.F.R.

A/C Fee \_\_\_\_\_

Electrical Fee \_\_\_\_\_

Parcel Control Number:  
13-38-41-001-000-00310-10000

Plumbing Fee \_\_\_\_\_

Roofing Fee \_\_\_\_\_

Amount Paid \$240.00 Check # 2332 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 11,000.00

TOTAL Fees \$240.00

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Inspector OFFICIAL

# DOCK PERMIT

### INSPECTIONS

SETBACKS  
PILINGS  
BOAT LIFT

DATE \_\_\_\_\_  
DATE \_\_\_\_\_  
DATE \_\_\_\_\_

WATER  
ELECTRIC  
DECK  
FINAL

DATE \_\_\_\_\_  
DATE \_\_\_\_\_  
DATE \_\_\_\_\_  
DATE 8/13/01

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

**New Construction**    **Remodel**    **Addition**    **Demolition**

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

Town of Sewall's Point  
BUILDING PERMIT APPLICATION

RECEIVED Bldg. Permit Number: 5438  
JUN 20 2001

Owner or Titleholder's Name LEON E. ZYGMON Phone No. (561) 220 4292  
Street: 18 SIMARA STREET City SEWALL'S POINT State: FL Zip 33496  
Legal Description of Property: ARCHIPELAGO lot 31 + N 1/2 of lot 32

Parcel Number: 1338 41 001 000 0031.0.1  
Location of Job Site: 18 SIMARA STREET STUART, FL (Town of Sewall's Pt)  
TYPE OF WORK TO BE DONE: INSTALL BOAT LIFT

CONTRACTOR/Company Name: OCTOBER MARINE SERVICES, INC Phone No. (561) 247 2500  
Street: 19655 RIVERSIDE DR City TEQUESTA State: FL Zip 33469  
State Registration: MARTINCO SPO2369 State License: \_\_\_\_\_

ARCHITECT: N/A Phone No. ( ) \_\_\_\_\_  
Street: \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

ENGINEER: E.A. KUONEN PE# 22920 Phone No. (561) 747-2152  
Street: 134 Bottonwood CR City TEQUESTA State: FL Zip 33469

AREA SQUARE FOOTAGE - SEWER - ELECTRIC:  
Living Area: N/A 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: N/A Minimum Base Flood Elevation (BFE): \_\_\_\_\_ NGVD  
Proposed first habitable floor finished elevation: \_\_\_\_\_ NGVD (minimum 1 foot above BFE)

COSTS AND VALUES  
Estimated cost of construction or improvement: \$ 11,000  
Estimated Fair Market Value (FMV) prior to improvement: \$ OVER 1,000,000  
If Improvement, is cost greater than 50% of Fair Market Value? YES \_\_\_\_\_ NO X  
Method of determining Fair Market Value: GUESS

SUBCONTRACTOR INFORMATION: (Notification to this office of subcontractor change is mandatory.)  
Electrical: RAO ELECTRIC CO State: FL License # EC 0000135  
Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_  
Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_  
Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_

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

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

OWNER or AGENT SIGNATURE (Required)  
Jon Newman  
State of Florida, County of: Martin On this the 20 day of June, 2000, by Jon Newman who is personally known to me or produced FL DL as identification.

CONTRACTOR SIGNATURE (Required)  
Jon Newman  
State of Florida, County of: \_\_\_\_\_ On this the 20 day of June, 2000, by Jon Newman who is personally known to me or produced FL DL as identification.

Notary Public  
My Commission Expires: 3/11/03  
Patricia F. Stump  
MY COMMISSION # CC816550 EXPIRES (Seal)  
March 11, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

Notary Public  
My Commission Expires: 3/11/03  
Patricia F. Stump  
MY COMMISSION # CC816550 EXPIRES (Seal)  
March 11, 2003  
BONDED THRU TROY FAIN INSURANCE, INC.

**TREE REMOVAL** (Attach sealed survey)

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

DEVELOPMENT ORDER # \_\_\_\_\_

**1. ALL APPLICATIONS REQUIRE**

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

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

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

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

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

**ADDITIONAL Required Documents are:**

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

**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:  Date: 7/3/01

Approved by Town Engineer \_\_\_\_\_ Date: \_\_\_\_\_  
(If required)

# ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID RP  
OCTOP-1

DATE (MM/DD/YY)  
06/18/01

<b>PRODUCER</b> Massey, Clark, Fischer, Inc. 400 Executive Ctr Dr, Ste 205 West Palm Beach FL 33401 Phone: 561-478-1660 Fax: 561-478-6876	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.	
	<b>INSURERS AFFORDING COVERAGE</b>	
<b>INSURED</b> Octopus Marine Services, Inc. Mr. Jon P. Newman, President 19655 Riverside Drive Tequesta FL 33469	INSURER A:	The Charter Oak Fire Ins Co
	INSURER B:	The Travelers Indemnity Co
	INSURER C:	
	INSURER D:	
	INSURER E:	

**FILE**  
*he ju*  
**COPY**

**RECEIVED**  
JUN 18 2001

**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, IT 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	<b>GENERAL LIABILITY</b>	I680101Y6782COF01	01/01/01	01/01/02	EACH OCCURRENCE	\$ 300,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$ 300,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000
					PERSONAL & ADV INJURY	\$ 300,000
					GENERAL AGGREGATE	\$ 600,000
					PRODUCTS - COMP/OP AGG	\$ 600,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	
B	<b>AUTOMOBILE LIABILITY</b>	I810101Y6942IND01	01/01/01	01/01/02	COMBINED SINGLE LIMIT (Ea accident)	\$ 300,000
	<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS					
	<input checked="" type="checkbox"/> NON-OWNED AUTOS					
	<b>GARAGE LIABILITY</b>				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY	EA ACC \$ AGG \$
	<b>EXCESS LIABILITY</b>				EACH OCCURRENCE	\$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input type="checkbox"/> RETENTION \$					\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				WC STATU-TORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	\$
					E.L. DISEASE - EA EMPLOYEE	\$
					E.L. DISEASE - POLICY LIMIT	\$
	<b>OTHER</b>					

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

<b>CERTIFICATE HOLDER</b>	N	ADDITIONAL INSURED; INSURER LETTER:	<b>CANCELLATION</b>
Town of Sewall's Point & Mr. Edwin B. Arnold Building Department 1 South Sewall's Point Road Sewall's Point FL 34996		SEWELLS	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
			Jeff M. Platz

**Certificate of Insurance**

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

**RECEIVED**  
JUN 18 2001  
BY: *SA*

**Named Insured(s):**

Staff Leasing, LP, By Staff Acquisition, Inc., The General Partner, And The Affiliated Limited Partnerships Of Which Staff Acquisition, Inc. Is The General Partner And Staff Leasing, Inc. Is The Limited Partner including Staff Leasing of Texas, LP, Staff Leasing of Texas II, LP, Staff Leasing IV, LP  
600 301 Boulevard West, Suite 202  
Bradenton, Florida 34205

**FILE**

**CNA**  
**RISK MANAGEMENT**

**Insurer Affording Coverage**  
Continental Casualty Company

**Coverages:**

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

Type of Insurance	Certificate Exp. Date <input type="checkbox"/> CONTINUOUS <input type="checkbox"/> EXTENDED <input checked="" type="checkbox"/> POLICY TERM	Policy Number	Limits
Workers' Compensation	1-1-2002	WC 189165165 WC 189165182 WC 247848874 WC 247848888	<b>Employers Liability</b>
			Bodily Injury By Accident \$1,000,000      Each Accident
			Bodily Injury By Disease \$1,000,000      Policy Limit
			Bodily Injury By Disease \$1,000,000      Each Person

**Other :**

**Employees Leased To:**  
12176.Octopus Marine Services Inc

**Effective Date :** 01-JAN-2001

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

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

**Notice of Cancellation:** (Not applicable unless a number of days are entered below)  
Before the stated expiration date the company will not cancel or reduce the insurance afforded under the above policy(ies) until at least 30 days notice of such cancellation has been mailed to:

**Certificate Holder**

TOWN OF SEWALL'S POINT  
C/O MR EDWIN B ARNOLD BUILDING DEPARTMENT  
1 SOUTH SEWALL'S POINT ROAD  
Sewalls Point, FL 34996

*Martin Oosterbaan*

**Martin Oosterbaan**  
Authorized Representative

St. Louis, MO (877)427-5567      15-JUN-2001  
Office      Phone      Date Issued



**MARTIN COUNTY, FLORIDA**  
**Construction Industry Lic Bd**  
**Certificate of Competency**

License: SP02369  
Expires September 30, 2001

NEWMAN, JOHN M

OCTOPUS MARINE SERVICES INC

19655 RIVERSIDE DR

TEQUESTA, FL 33469

**MARINE CONTRACTOR**

RET TO OCTOPUS

NOTICE OF COMMENCEMENT \*

State of FLORIDA  
County of Martin City of \_\_\_\_\_

PERMIT NUMBER: (Not Req'd) PCN: 13-38-41-001-000-00310-10000

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

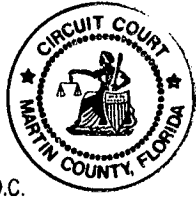
1. Description of Property: Residential  
Legal: [partial]: ARCHIPELAGO LOT 31 & N1/2 OF LOT 32  
Street address: 18 Simara Street, STUART, FL 34996

2. General description of improvements: Install Boatlift

3. Owner information:

A. Name Mr. Leon E. Zygmou STATE OF FLORIDA  
B. Address 18 Simara Street, STUART, FL 34996 IN COUNTY  
C. Interest in Property: fee simple title holder  
D. Name and address of fee simple title holder. SAME

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



4. Contractor Information:

A. Name: Octopus Marine Services, Inc.  
B. Address: Via Mail 19655 Riverside Dr., Tequesta, FL 33469

5. Surety: (Bond)

A. Name: NA  
B. Address: NA

6. Lender Information:

A. Name: NA  
B. Address: NA

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

8. In addition to himself, Owner designates \_\_\_\_\_ to receive a copy of the Lienor Notice as provided in Section 713.13 (1) (b), Florida Statute

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

Leon E. Zygmou  
Signature of Owner

\_\_\_\_\_  
Signature of Owner

STATE OF FLORIDA  
COUNTY OF ~~PALM BEACH~~ MARTIN

The foregoing instrument was acknowledged before me this 3-30-01  
Date

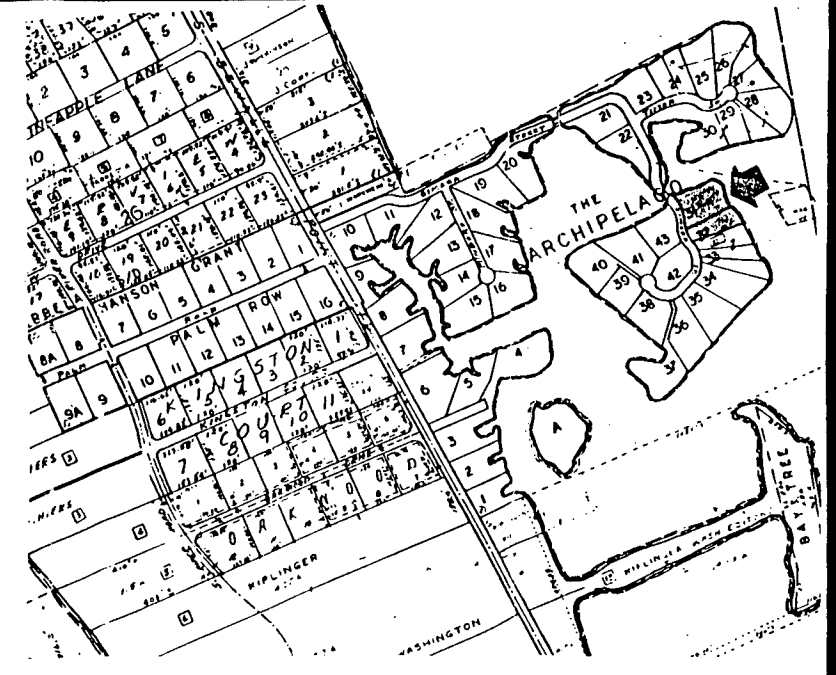
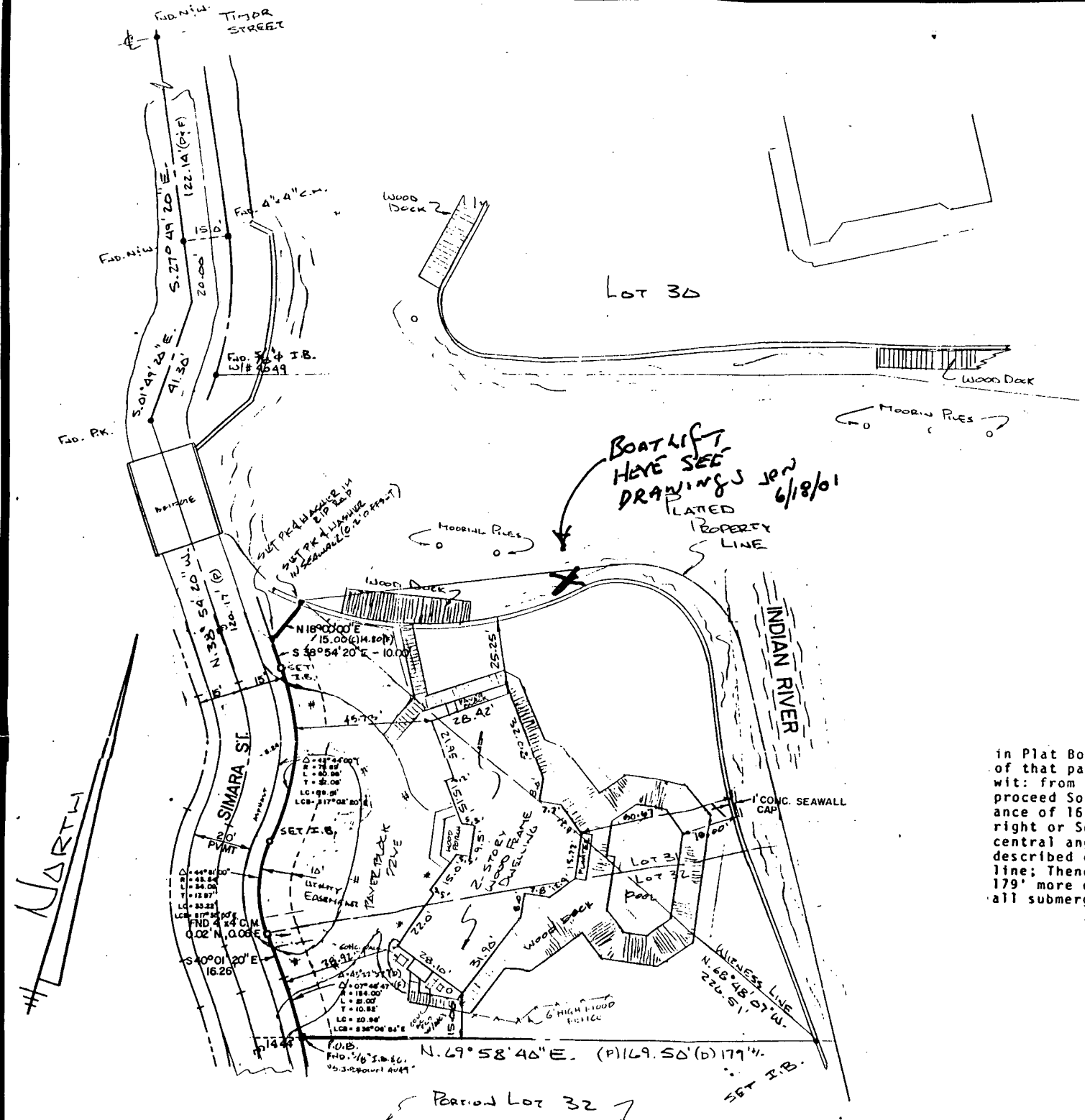
by Leon E Zygmou who is personally known to me or who has  
Name of Person Acknowledging  
produced \_\_\_\_\_ as identification and who did/did not take an oath.  
SEAL

Julie Tilton Haggas  
(Signature of person taking acknowledgment) (Name of officer taking acknowledgment typed, printed or stamped)

\* This notice is being supplied as required by Florida Statute 713.13 (1) (d)







LOCATION MAP

LEGAL DESCRIPTION

In Plat Book 4, Page 48, of the public records of Martin County, and all of that part of lot 32 lying Northerly of the following described line to wit: from concrete marker at the Northwestern corner of said lot 32, proceed South 40°01'20" East along platted road right-of-way for a distance of 16.26' to concrete marker on point of curvature of a curve to the right or Southwesterly, said curve having a radius of 154.0 feet and central angle of 43°22'37"; Thence proceed Southerly along arc of above described curve for an arc distance of 21.00' to P.O.B. of above mentioned line; Thence on said line running North 69°58'40" East for a distance of 179' more or less to the Westerly shore of the Indian River; together with all submerged lands and riparian rights there unto belonging or appertaining.

SURVEYOR'S CERTIFICATE

WE HEREBY CERTIFY THAT THE BOUNDARY SURVEY AS SHOWN HEREON IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF AS SURVEYED UNDER OUR DIRECTION. WE FURTHER CERTIFY THAT IT MEETS THE MINIMUM TECHNICAL STANDARDS UNDER RULE 61G17-6 FLA. ADMINISTRATIVE CODE PURSUANT TO CHAPTER 472.027 FLA. STATUTES. NOT VALID, UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.

STEPHEN J. BROWN INC.

Stephen J. Brown, PROFESSIONAL LAND SURVEYOR  
REGISTRATION NO. 2042, STATE OF FLORIDA

NOTES:

- Survey of description as furnished by Client
- Lands shown hereon were not abstracted for easements and/or rights-of-way of record.  
(P) Denotes distance or bearing by description as furnished.  
(F) Denotes measured distance or bearing  
(C) Denotes calculated distance or bearing.
- All bearings are referenced to the instrument of record as shown hereon, unless otherwise noted.
- Elevations shown hereon are relative to National Geodetic Vertical Datum of 1929, and are based on bench mark.
- There are no above ground encroachments, unless otherwise shown.

P.O.B. - POINT OF BEGINNING (F) - FIELD MEASUREMENT (D) - DEED CALL  
SET I.B. - SET 5/8 IRON BAR & CAP #4049  
FND. - FOUND OBJECT  
I.P. - IRON PIPE  
C.M. - CONCRETE MONUMENT  
I.B. - IRON BAR  
P.K. - P.K. NAIL  
R.R.S. - RAILROAD SPIKE  
N. & W. - NAIL & WASHER  
N. & TT - NAIL & TIN TAB

OHW - OVERHEAD WIRE  
- DRAINAGE FLOW  
M.H. - MANHOLE  
P.P. - POWER POLE  
C.B. - CATCH BASIN  
8.50  
- EXISTING ELEVATION

- PROPERTY LOCATED WITHIN FLOOD ZONE: "A-8"
- PROPERTY ADDRESS: 18 SIMARA STREET
- CERTIFIED TO: LEON E. ZYGMUN & PATRICIA ZYGMUN  
THOMAS A. FOGT, ESQUIRE  
COMMONWEALTH LAND TITLE INSURANCE COMPANY

REVISIONS	BY
UPDATE SURVEY 6/7/95	ZUC
6/15/95 LEGAL	SLB
UPDATE BOUNDARY SURVEY 1/29/01	RAC

BOUNDARY SURVEY

PREPARED FOR: ZYGMUN  
**STEPHEN J. BROWN III, C.**  
SURVEYORS • DESIGNERS • LANDPLANNERS • CONSULTANTS  
619 E. 5TH STREET STUART, FLORIDA 34954  
(561) 288-7176

DRAWN	
S.J.B.	CHECKED
S.J.B.	DATE
12/27/1992	SCALE
1" = 30'	JOB NO.
470-01-01	SHEET
ONE	

Archipelago Community Association, Inc.  
c/o Robert H. Smith, President  
11 Simara Street  
Stuart, FL 34996

May 22, 2001

Mr. Leon Zygmunt  
18 Simara Street  
Stuart, FL 34996

Dear Mr. Zygmunt:

We have reviewed the plan you submitted regarding your proposed boat lift, a copy of which is attached to this letter, and we have noted the locations of the stakes you installed to indicate the outer limits of the proposed boatlift.

We approve installation of the proposed boat lift in accordance with the plan you have submitted, a copy of which is attached to this letter, in the location indicated by the stakes you have had installed, subject to the conditions stated in the following paragraph. We do not approve any boat lift which does not conform with the plan submitted or which is not within the location delineated by the stakes you installed.

By installing the boat lift pursuant to this approval you evidence your agreement with the Archipelago Community Association, Inc. that you will pay all costs and expenses incurred by the Archipelago Community Association, Inc. to enforce the limitations of this approval should such enforcement be deemed necessary by this Association on account of the boat lift you install, or subsequently change, not conforming to the limitations of this approval, including costs of removal of non-conforming structures, and further including all attorneys' fees and expenses.

Sincerely yours,

Archipelago Community Association, Inc.

  
Robert H. Smith, President



DEPARTMENT OF THE ARMY  
JACKSONVILLE DISTRICT CORPS OF ENGINEERS  
STUART REGULATORY OFFICE  
P.O. BOX 2391  
STUART, FLORIDA 34995

ARMY  
DEP  
STAMPED DWCS  
LTC Dignan

Regulatory Division  
South Permits Branch  
200102363 (GP-CK)

Mr. Leon E. Zygmon  
c/o John Newman  
Octopus Marine Services, Inc.  
19655 Riverside Drive  
Tequesta, Florida 33469

**MAY 30 2001**

Dear Mr. Zygmon:

Reference is made to your Department of the Army (DA) permit application received April 2, 2001, to install 4 mooring piles and a boat lift. The project is located in the Intracoastal Waterway in Martin County, Florida. The project has been assigned number 200102363 (GP-CK). Please refer to this number in future correspondence.

The proposed minor structures are authorized by General Permit SAJ-17, a copy of which is enclosed for your information and use. You are authorized to proceed with the project in accordance with the enclosed drawings subject to ALL conditions of the permit.

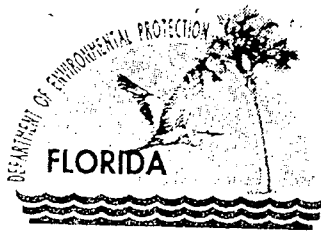
If the work authorized herein is not completed by March 1, 2006, no further work may be undertaken and you should contact this office. A determination of the status of the General Permit will be made and you will be advised. If the General Permit has been reissued with no substantive change(s), a request for an extension of your previous authorization will be considered. If the General Permit has not been reissued or was reissued with new conditions, a new application and drawings may need to be submitted for further review.

Thank you for your cooperation with our permit program.

Sincerely,

Linda S. Ferrell  
Chief, South Permits Branch

Enclosures



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

Grey

David B. Struhs  
Secretary

Colonel James C  
mays  
904 232  
2271

APR 13 2001  
Leon Zygmom  
18 Simara Street  
Stuart, FL 34996

File Number: 43-0181994-001  
Martin County

Dear Mr. Zygmom:

On March 14, 2001, we received your application for an exemption to perform the following activities: install a piling supported boatlift, marginally to an existing bulkhead in the Indian River, Class III waters of the state, located at 18 Simara Street (Section 1, Township 41 South, Range 38 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.

### 3. Federal Review (State Programmatic General Permit) - NOT 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). As shown on the attached drawings, the proposed project is not consistent with the SPGP program. A copy of your application has been sent to the U.S. Army Corps of Engineers (the Corps) who may require a separate permit. Failure to obtain their authorization prior to construction could subject you to enforcement action. For further information, contact the Corps directly.

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.

Leon Zygmom  
File Number: 43-0181994-001  
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 **Darryl DeLeeuw** of this office, at telephone (561)398-2806.

Sincerely,

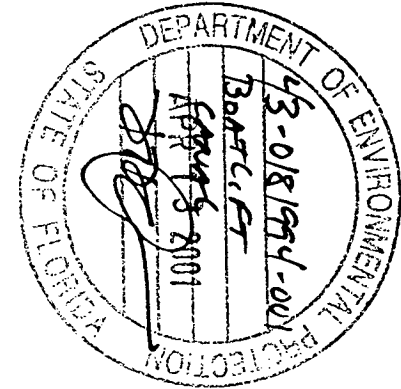
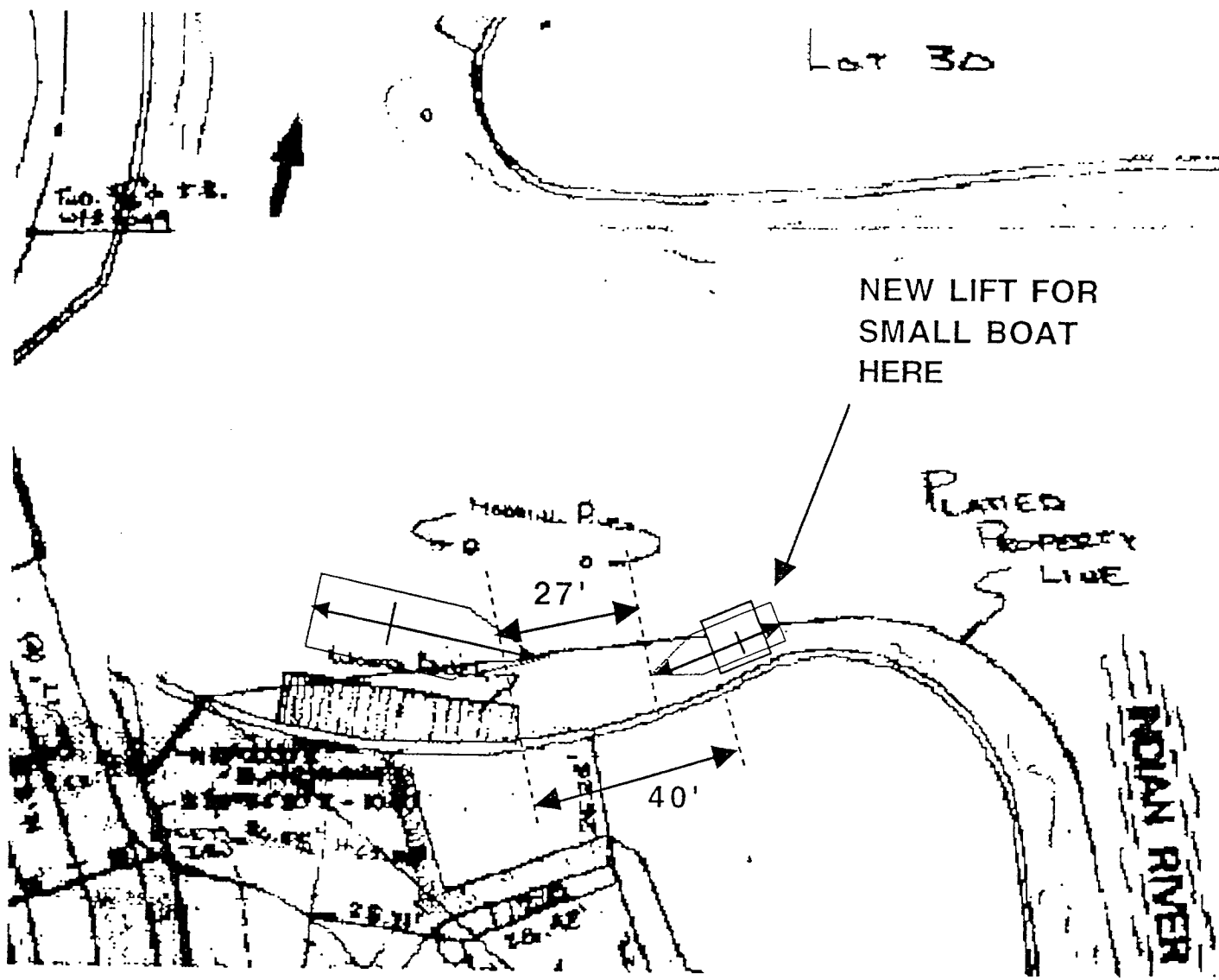


Gary N. Roderick  
Environmental Administrator

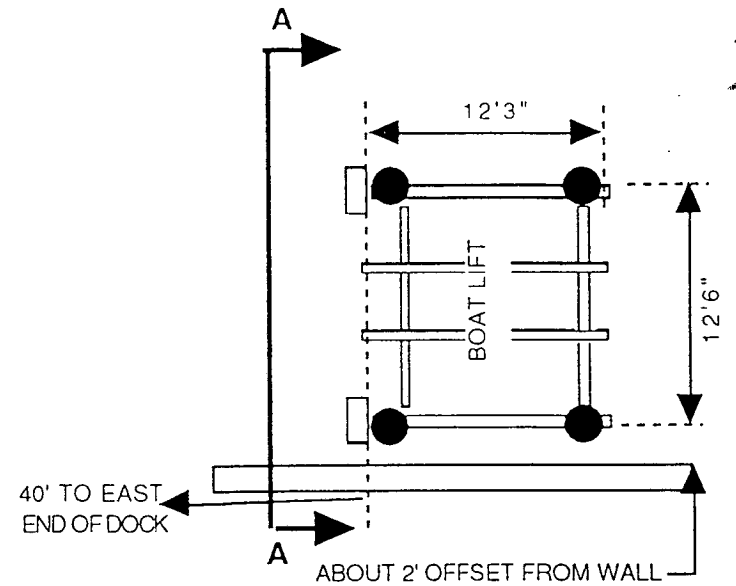
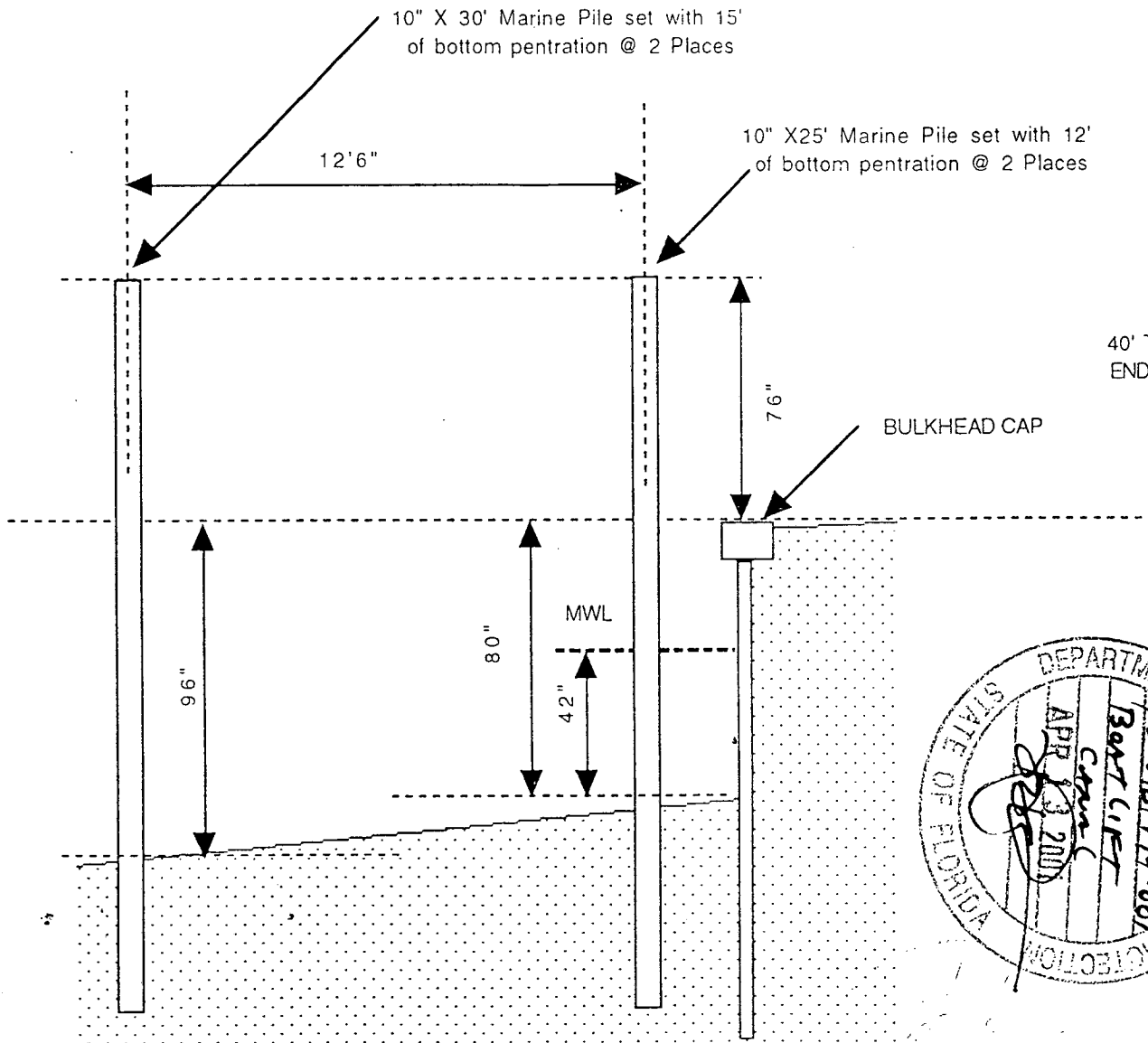
GNR\DD\jv

Enclosures: Attachment A- Notice of Determination of Qualification for Exemption

cc: U.S. Army Corps of Engineers, Stuart [without enclosures]  
Octopus Marine Services, Inc. (Agent) [without enclosures]

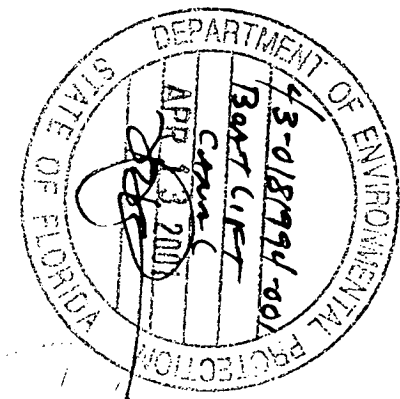


<b>OCTOPUS</b> MARINE SERVICES, INC. U-17332 PH 561-747-2500 FAX 561-745-0653
Dr. Ernest A. Kuonen, PE 022920 134 BUTTONWOOD CIRCLE TEQUESTA, FL 33469 561-747-2152
<b>PROPOSED BOATLIFT</b> <b>EXISTING DOCK</b> 18 Simard Street South Sewals Pt
DATE: 00 03 09 DWG JPN
SK NO. 0103091 SH 1 OF



PLAN VIEW  
BOAT LIFT  
INSTALLATION

**FILE**



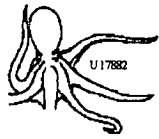
PILES TO BE SET TO DEPTHS SHOWN OR TILL REJECTION IF 8' OR DEEPER

SECTION VIEW AA  
ELEVATION

*Handwritten signature and date: 6/19/10*

<b>OCTOPUS</b>	
MARINE SERVICES, INC. U-17332 PH 561-747-2500 FAX 561-745-0653	
Dr. Ernest A. Kuonen, PE 022920 134 BUTTWOOD CIRCLE TEQUESTA, FL 33469 561-747-2152	
<b>PROPOSED BOATLIFT INSTALLATION DETAILS</b>	
18 Simard Street South Sewals Pt	
DATE: 00 03 09 DWG JPN	
SK NO. 0103091 SH 2 OF	

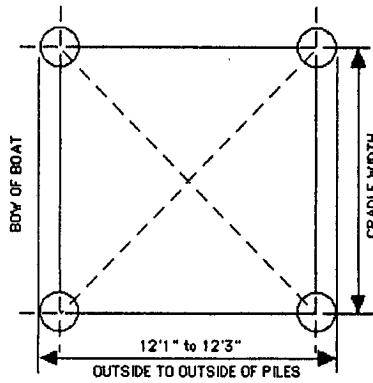




# OCTOPUS Boat Lifts

Built Stronger To Last Longer

561-747-2500

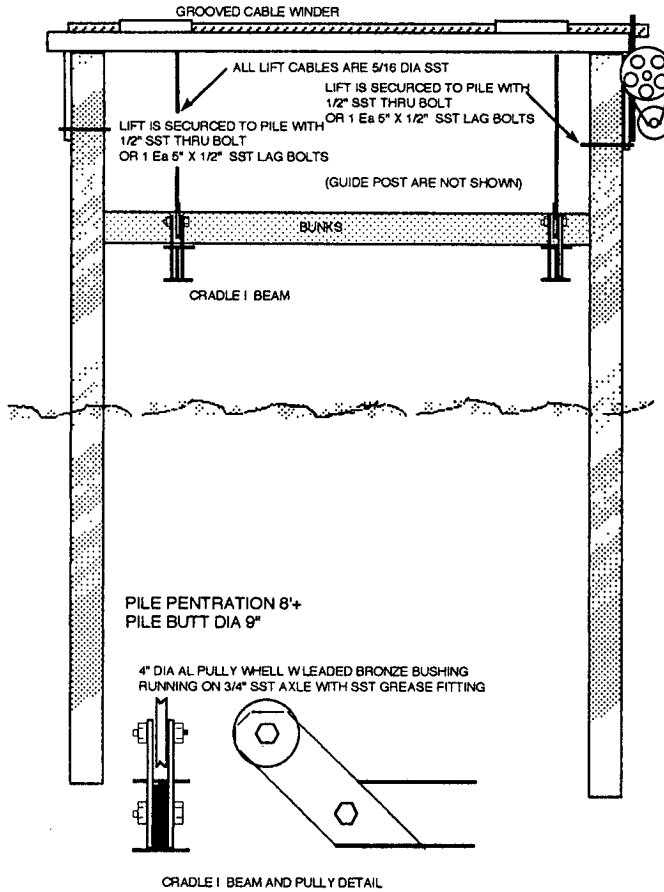


**Capacity**  
 Top Beam  
 Beam #/Ft  
 Top Beam Length  
 Cradle I Beam  
 Cradle Width  
 12' Bunks  
 SST Cables Dia  
 SST Cable Length  
 Drive Unit  
 Grooved Winder Dia  
 Cable Parts  
 Drive Shaft Bearings  
 Drive Shaft Dia  
 Motors  
 120/240 VAC Power  
 Guide Post

**SPECIFICATIONS**  
 10,000  
 DBL 6" Channel  
 5.7 PPF  
 12'6"  
 8"  
 To Suit 13'1" Max 12' 6" STD'  
 2X8 2.5 CCA  
 5/16"  
 30'  
 WORM & BELT  
 2.375"  
 2 Part  
 Nylatron Greaseless  
 1.937 Tube  
 2- 3/4 HP  
 22.4/11.2 Amps  
 4 Ea 7"

FILE

DETAIL SPECIFICATIONS, DIMENSIONS AND CAPACITY OF THE LIFTS ARE STATED ON ATTACHED TABLE.



OCTOPUS BOAT LIFTS ARE MANUFACTURED BY I.M.M. BOATLIFTS A DIV OF BECKER WELDING & MACHINE 5940 Youngquist Road FT. MYERES, FL 33912 PHONE 941-454-7020

**NOTE:**

TOP BEAMS FOR THIS LIFT ARE STANDARD LENGTH

*Handwritten signature and date: 6/19/01*

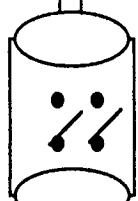
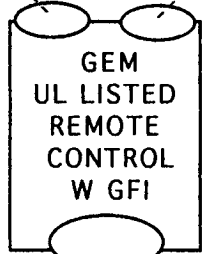
Dr. Ernest A. Kuonen, PE 022920  
 134 BUTTWOOD CIRCLE  
 TEQUESTA, FL 33469  
 561-747-2152

<b>OCTOPUS</b>	
MARINE SERVICES, INC. U-17332 PH 561-747-2500 FAX 561-745-0653	
I.M.M. BOATLIFTS A DIVISION OF BECKER WELDING & MACHINE 5940 Youngquist Road FT. MYERES, FL 33912 PHONE 941-454-7020	
BOAT LIFT 10,000 POUND LIFT CAPACITY	
DATE: 97 05 20	DWN: JPN
DWG NO. 970065 REV - SH OF	

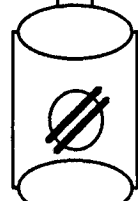
MOTOR #1

MOTOR #2

FILE

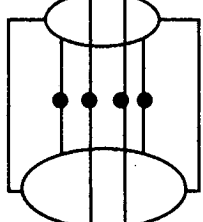


DOUBLE POLE MANUAL SHUT OFF SWITCH W WET LOCATION COVER



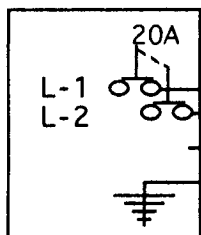
RECEPTACLES REQUIRE WET LOCATION COVERS  
LEVITON 20A 125V GFI RECEPTACLE #6899 GY (GRAY) OR EQUAL

3/4 OR LARGER ELEC PVC W 4 EA #12 AWG CONDUCTORS



4 X 4 X 2 JB W WATER TIGHT COVER

3/4 OR LARGER ELEC PVC W 3 EA #10 AWG CONDUCTORS & 1 EA #10 AWG CONDUCTORS MIN BURIAL DEPTH 18 INCHES



EXISTING ELECTRICAL SHOREPOWER PANEL AT WEST END OF DOCK

Black  
Red  
White = Neutral  
Green = Ground

NOTES:

BOAT LIFT WITH TWO 3/4 HP MOTORS: THE FULL LOAD CURRENT DEMAND IS 11.6 AMPS PER MOTOR AT 230 VAC.

<b>OCTOPUS</b>	
MARINE SERVICES, INC. U-17332 PH 561-747-2500 FAX 561-745-0653	
ELECTRICAL DIAGRAM BOATLIFT POWER 18 Simara Street	
DATE: 00 05 20	DWN: JPN
DWG NO. 000235 REV - SH OF	

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
✓ 5384	DERMARKARIAN 19 CASTLE HILL WAY UNITED FENCE & STL.	FENCE - FINAL	Passed	Chair luk rear + sides INSPECTOR: [Signature] 8/13
✓ 5438	ZYGMON 18 SIMARA ST. OCTOPUS MARINE	BOAT LIFT - FINAL	Passed	INSPECTOR: [Signature] 8/13
✓ 5475	ZUCKER 18 E. HIGH POINT HOBE SOUND ALUM.	STORM SHUTTER - FINAL	Passed	INSPECTOR: [Signature] 8/13
✓ 4978	RIMER 29 S. RIVER RD. LEAR DEVELOPMENT CORP.	CONC. STAIRS: - GUEST HOUSE ✓ - REAR/MAIN " ✓	Passed	INSPECTOR: [Signature] 8/13
T/R	THOMPSON 179 S. RIVER ROAD O/B	FIELD VERIF.	Passed	(Approved) INSPECTOR: [Signature] 8/13
5494	Roemer Orig. 3752 E Ocean Rosth Co.	D-wall scow	Passed ✓	INSPECTOR: [Signature] 8/13
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: 50 RIO VISTA DRIVE (POTSDAM): STORM SHUTTER INST. COMMENCED?

7285

REROOF

### TOWN OF SEWALL'S POINT

Date 2/8/05

BUILDING PERMIT NO. 7285

Building to be erected for ZYGMAN

Type of Permit REROOF

Applied for by ALL AMERICAN ROOFING (Contractor)

Building Fee \_\_\_\_\_

Subdivision ARCH. DELAGO Lot 3 1/2 Block 32

Radon Fee \_\_\_\_\_

Address 18 SIMARA ST

Impact Fee \_\_\_\_\_

Type of structure SFL

A/C Fee \_\_\_\_\_

Parcel Control Number:

Electrical Fee \_\_\_\_\_

1338410010000031010000

Plumbing Fee \_\_\_\_\_

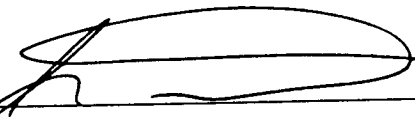
Roofing Fee 120.00

Amount Paid 120.00 Check # 4317 Cash \_\_\_\_\_

Other Fees ( \_\_\_\_\_ ) 1

Total Construction Cost \$ 69,283.

TOTAL Fees 120.00

Signed   
Applicant

Signed   
Town Building Official

## PERMIT

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

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

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

## INSPECTIONS

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

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

FEB 08 2005

Date: 2-2-05  
BY:

Permit Number: \_\_\_\_\_

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

OWNER/TITLEHOLDER NAME: Leon E. & Patricia A. Zygmunt Phone (Day) \_\_\_\_\_ (Fax) \_\_\_\_\_

Job Site Address: 18 Simara St. City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block): Archipelago Lot 31 & N 1/2 of Lot 32 Parcel Number: 13384100100000310-1

Owner Address (if different): 18 Simara St. City: Stuart State: FL Zip: 34996

Description of Work To Be Done: Reroof Shake and flat to tile and flat

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

CONTRACTOR/Company: All American Roofing of The Treasure Coast, Inc. Phone: 772-463-8055 Fax: 772-463-8054

Street: 3006 SE Walker St. City: Stuart State: FL Zip: 34997

State Registration Number: CCC058118 State Certification Number: \_\_\_\_\_ Martin County License Number: \_\_\_\_\_

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 69,283.00 (Notice of Commencement needed over \$2500)

#### SUBCONTRACTOR INFORMATION:

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

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

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

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

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

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

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

OWNER OR AGENT SIGNATURE (required)  
Leon E. Zygmunt

State of Florida, County of: MARTIN  
This the 21st day of JANUARY, 2005  
by LEON E. ZYGMUNT who is personally known to me or produced FL02  
as identification: Shelia A. Beale

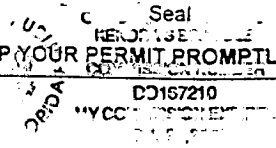
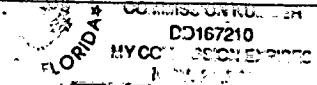
Notary Public  
My Commission Expires: 11/24/06

CONTRACTOR SIGNATURE (required)  
Paul D. Wilkins

On State of Florida, County of: MARTIN  
This the 2nd day of FEBRUARY, 2005  
by PAUL D. WILKINS who is personally known to me or produced \_\_\_\_\_  
As identification: Shelia A. Beale

Notary Public  
My Commission Expires: 11/24/06

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



# ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID BL  
ALLA002

DATE (MM/DD/YYYY)  
10/11/04

**PRODUCER**  
J.W. Edens & Company  
Commercial Ins of Brevard, Inc  
5005 Wickham Road  
Melbourne FL 32940  
Phone: 321-751-3737 Fax: 321-751-3738

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

**INSURED**  
  
All American Roofing of The  
Treasure Coast, Inc.  
3006 SE Waaler Street  
Stuart FL 34991

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Canal Indemnity Company	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

**COVERAGES**

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

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY	CPF50439	10/16/04	10/16/05	EACH OCCURRENCE	\$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$ 1,000,000
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMP/OP AGG	\$ 1,000,000
						GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		<input type="checkbox"/> HIRED AUTOS					
		<input type="checkbox"/> NON-OWNED AUTOS					
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
		<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$
						AUTO ONLY: AGG	\$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
							\$
		<input type="checkbox"/> DEDUCTIBLE					\$
		<input type="checkbox"/> RETENTION \$					\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$
		OTHER					

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

**CERTIFICATE HOLDER**  
  
SEWALLS  
  
Town of Sewall's Point  
One South Sewall's Point Rd.  
Stuart FL 33494

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

# ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
12/04/2004

**PRODUCER**  
Serial #  
**CONDON-MEEK, INC.**  
1211 COURT ST.  
CLEARWATER, FL 34616-5897

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

**INSURED**  
**CRUM STAFFING II, INC.**  
100 SOUTH MISSOURI AVENUE  
CLEARWATER, FL 33756

INSURERS AFFORDING COVERAGE	NAIC#
INSURER A: FRANK WINSTON CRUM INSURANCE, INC.	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

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

INSR LTR	ADDL INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
		<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COM/OP AGG \$
		<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
A		<b>WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC 5 0000 0000	01/01/2005	01/01/2008	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input checked="" type="checkbox"/> OTHER EL EACH ACCIDENT \$ 1,000,000 EL DISEASE - EA EMPLOYEE \$ 1,000,000 EL DISEASE - POLICY LIMIT \$ 1,000,000
		OTHER				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS**  
 This certificate remains in effect provided the client's account is in good standing with Crum Staffing II, Inc. Coverage is not provided for any employee for which the client is not reporting hours to Crum Staffing II, Inc. Applies to 100% of the employees of Crum Staffing II, Inc. leased to ALL AMERICAN ROOFING OF THE TREASURE COAST, INC.

**CERTIFICATE HOLDER**  
  
**TOWN OF SEWALLS POINT**  
 1 S. SEWALLS POINT RD  
 SEWALLS POINT, FL 34996

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



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L03082502230

DATE	BATCH NUMBER	LICENSE NBR
08/25/2003	030123269	QB0020109

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

ALL AMERICAN ROOFING OF THE TREASURE COAST IN  
3006 WAALER STREET  
STUART FL 34997

JEB BUSH  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR  
SECRETARY

AC#1479402

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L04070800927

DATE	BATCH NUMBER	LICENSE NBR
07/08/2004	040019579	CCC058118

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

WILKINS, PAUL D  
ALL AMER ROOF OF THE TREASURE COAST INC  
3006 SE WAALER ST  
STUART FL 34997

JEB BUSH  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR  
SECRETARY

2004-2005 MARTIN COUNTY ORIGINAL  
COUNTY OCCUPATIONAL LICENSE

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

LICENSE 2002-513-008 CERT CC-C058118

PHONE (772)463-8055 SIC NO 023561

LOCATION:

3006 SE WAALER ST STU

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR. S	<u>.00</u>	LIC. FEE E	<u>25.00</u>
S	<u>.00</u>	PENALTY S	<u>.00</u>
S	<u>.00</u>	COL. FEE S	<u>.00</u>
S	<u>.00</u>	TRANSFER S	<u>.00</u>
TOTAL	<u>25.00</u>		

WILKINS, PAUL D (QUALIFIER)  
ALL AMERICAN ROOFING OF THE  
TREASURE COAST, INC.  
3006 SE WAALER STREET  
STUART, FL 34997

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

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

15 DAY OF SEPTEMBER 04  
AND ENDING SEPTEMBER 2005

12 04091402 002665

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 THE NOTICE OF COMMENCEMENT.

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE): 18 Simara Street  
Archipelago Lot 31 & N 1/2 of Lot 32

GENERAL DESCRIPTION OF IMPROVEMENT: RE-ROOF

OWNER: Leon E. & Patricia A. Zygmunt

ADDRESS: 18 Simara St. Stuart, FL 34996

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

CONTRACTOR: ALL AMERICAN ROOFING OF THE TREASURE COAST, INC.

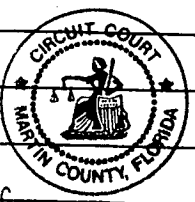
ADDRESS: 3006 SE WAALER STREET, STUART, FL 34997

PHONE#: (772)463-8055 FAX#: (772)463-8054

SURETY COMPANY (IF ANY): \_\_\_\_\_

ADDRESS: STATE OF FLORIDA  
MARTIN COUNTY

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



LENDER: MARSHA EWING, CLERK  
ADDRESS: BY: M. Ferschke D.C.

PHONE #: \_\_\_\_\_ DATE: 2/3/05 FAX #: \_\_\_\_\_

INSTR # 1811851  
OR BK 01979 PG 0856  
RECORDED 02/03/2005 03:07:36 PM  
MARSHA EWING  
CLERK OF MARTIN COUNTY FLORIDA  
RECORDED BY M Ferschke

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER OF THIS PROPERTY 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.

Leon E. Zygmunt  
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 21<sup>st</sup> DAY OF DECEMBER

2004 BY LEON E. ZYGMUNT  
Marsha Ewing  
NOTARY SIGNATURE OR

PERSONALLY KNOWN \_\_\_\_\_  
PRODUCED ID X  
TYPE OF ID FLDC



**BUILDING CODE COMPLIANCE OFFICE (BCCO)  
PRODUCT CONTROL DIVISION**

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

## **NOTICE OF ACCEPTANCE (NOA)**

---

**Hanson Roof Tile d.b.a. Pioneer Concrete Tile  
1340 SW 34<sup>th</sup> Ave  
Deerfield Beach, FL 33442**

### **SCOPE:**

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by the BCCO and accepted by the Building Code and Product Review Committee to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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

This product is approved as described herein, and has been designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County or Florida Building Code.

**DESCRIPTION: Rustic Shake/ Rustic Slate and 9" Flat Tile**

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

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

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

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

This NOA consists of pages 1 through 6.

The submitted documentation was reviewed by Frank Zuloaga, RRC



**NOA No.: 02-0709.04  
Expiration Date: 12/16/07  
Approval Date: 08/22/02  
Page 1 of 6**



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

**NOTICE OF ACCEPTANCE (NOA)**

CertainTeed Corporation (PA)  
1409 Union Meeting Road, P.O. Box 1100  
Blue Bell, PA 19422

**SCOPE:**

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by the BCCO and accepted by the Building Code and Product Review Committee to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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

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

**DESCRIPTION:** CertainTeed Modified Bitumen Roofing Systems Over Wood Decks

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

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

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

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

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

This NOA consists of pages 1 through 30.

The submitted documentation was reviewed by Frank Zuloaga, R.R.C.

**FILE COPY**  
**TOWN OF SEWALL'S POINT**  
**THESE PLANS HAVE BEEN**  
**REVIEWED FOR CODE COMPLIANCE**  
**DATE: 2/18/06**  

---

**BUILDING OFFICIAL**  
**Gene Simmons**

NOA No.: 02-1205.02  
Expiration Date: 06/19/2008  
Approval Date:  
Page 1 of 30



7285

**TOWN OF SEWALL'S POINT**

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

**CORRECTION NOTICE**

ADDRESS: 18 SIMARA

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

DPM - IN

RESCHEDULE WHEN ROOFING  
PERSONNEL ARE ON SITE  
TO CUT DPM IN FELTS FOR  
PAVING INSPECTION.

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

DATE: 4/18

[Signature]  
INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 4/18, 20045 Page 1 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
738	BONIFACE	CONC. WALL	PASS	
7	63 S. RIVER RD WILSON BLDGS			INSPECTOR: <i>[Signature]</i>
743	SCHRADER	POOL ELECTRIC	FAIL	
9	EMARITA WAY SIPOIS ELECTRIC	SILENCE 486-1568		INSPECTOR: <i>[Signature]</i>
7454	FOWLER	ROOF FINAL	PASS	CLOSE
10	18 FIELDWAY DR ALL AREA ROOFING			INSPECTOR: <i>[Signature]</i>
6812	MADER	STEM WALL	PASS	
1	106 ABBIE COURT PUNCKER HOMES	(FIRST PLEASE)	0	INSPECTOR: <i>[Signature]</i>
7285	ZYGMAN	DRY-IN	FAIL	MUST RESCHEDULE
6	18 SIMA ST AN AMERICAN		PASS	REINSPECTED LATE MORNING INSPECTOR: <i>[Signature]</i>
7267	TAYLOR	DRY-IN	PASS	
8	11 PALM ROAD COMPANY ROOFING	315 534 0536 (late to 11. Please)		INSPECTOR: <i>[Signature]</i>
7136	Weinbergh	Final - Dock	PASS	CLOSE
5	146 S. SPR Tropic Marine Contract			INSPECTOR: <i>[Signature]</i>
<b>OTHER:</b>				
6908	715. ROAD PHOENIX	PERMIT FOR ROOFER?	PASS	<i>[Signature]</i>

157- S. RIVER. NEEDS PERMIT.  
TO CHANGE GUASS & WINDOWS-



7285

## TOWN OF SEWALL'S POINT

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

### CORRECTION NOTICE

ADDRESS: 18 SIMARA

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

ROOF FINAL

DRY-IN INSPECTION WAS NEVER  
RESCHEDULED AS REQUESTED BY  
CORRECTION NOTICE OF 4/18.

NEED ENGR. LETTER CERTIFYING  
SHEATHING IS NAILED PER  
FLA. BLDG CODE.

5/23 NOTE - DRY IN WAS REINSPECTED 4/18  
LATE MORNING.

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

DATE: 5/20

INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 5/20, 20015 Page 1 of    

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7432	MURPHY/BASSH	FENCE/FINAL	PASS	CLOSE
8	8 HERON'S NEST O/B			INSPECTOR: <i>[Signature]</i>
7285	ZYGMAN	ROOF/FINAL	FAIL	
7	18 SIMARA ALL AMERICAN		PASS	CLOSE INSPECTOR: <i>[Signature]</i>
6839	WADE	BARREN-BACK	FAIL	
1	9 E. HIGH POINT PINE ORCH BLDG			INSPECTOR: <i>[Signature]</i>
7527	GAUL	FINAL GAS	PASS	CLOSE
3	107 S. RIVER RD MARTIN CITY PROP.			INSPECTOR: <i>[Signature]</i>
7539	DE SANTIS	WINDOW/BURR	PASS	<del>REWORK</del> CLOSE INSPECTOR: <i>[Signature]</i>
5	73 S. RIVER RD SPECIAL FORCES			INSPECTOR: <i>[Signature]</i>
7666	WITTMAN	TREE	PASS	
6	13 RIVERVIEW DR			INSPECTOR: <i>[Signature]</i>
7548	NORDBEREN	IN GET TANK LINES		<del>CX</del>
	5 KINGSTON CT PROPANE DISCOUNTS			INSPECTOR: <i>[Signature]</i>
<b>OTHER:</b>				
7127	20 FIELDWAY CLIFFORD	ELEC. FINAL	PASS	CLOSE <i>[Signature]</i>



7556

SEAWALL

MASTER PERMIT NO. \_\_\_\_\_

### TOWN OF SEWALL'S POINT

Date 5/12/05

BUILDING PERMIT NO. 7556

Building to be erected for ZYGMUN

Type of Permit SEAWALL

Applied for by WILCO. CONSTRUCTION (Contractor)

Building Fee 165' x 2,400' = 396.00

Subdivision ARCHIPELAGO Lot 31P32 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 18 SIMARA ST

Impact Fee \_\_\_\_\_

Type of structure SFR

A/C Fee \_\_\_\_\_

Parcel Control Number:

1338410010000031010000

Electrical Fee \_\_\_\_\_

Plumbing Fee \_\_\_\_\_

Roofing Fee \_\_\_\_\_

Amount Paid 435.60 Check # 5209 Cash \_\_\_\_\_

Other Fees (10% PR) 39.60

Total Construction Cost \$ 65,175

TOTAL Fees 435.60

Signed Ron Erlich  
Applicant

Signed Gene Simmons  
Town Building Official

## PERMIT

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

## 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 _____         |

APR 05 2005

BY:

Permit Number: \_\_\_\_\_

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

OWNER/TITLEHOLDER NAME: LEON ZYGMUN Phone (Day) (772) 220-4292 (Fax) \_\_\_\_\_

Job Site Address: 18 SIMARA STREET City: STUART State: FL Zip: 34996

Legal Description of Property: ARCHIPELAGO lot 31 & N 1/2 of lot 32 Parcel Number: 13-38-41-001-000-00310-1

Owner Address (if different): SAME AS ABOVE City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Description of Work To Be Done: CONSTRUCT 165 +/- LINEAR FEET OF SEAWALL IN FRONT OF EXISTING SEAWALL

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

CONTRACTOR/Company: WILCO CONSTRUCTION, INC. Phone (772) 460-6928 Fax: (772) 460-6929

Street: 28 N. CAUSEWAY DRIVE UNIT #1 City: FT. PIERCE State: FL Zip: 34946

State Registration Number: \_\_\_\_\_ State Certification Number: CGC1507437 Martin County License Number: PIN # 498

COST AND VALUES: Estimated Cost of Construction or Improvements: \$165,175.00 (Notice of Commencement needed over \$2500)

#### SUBCONTRACTOR INFORMATION:

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

ARCHITECT JERNER + ASSOCIATES, INC. Phone Number: (772) 283-2950

Street: 110 SW 5<sup>th</sup> STREET City: STUART State: FL Zip: 34994

ENGINEER \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

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

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

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

OWNER OR AGENT SIGNATURE (required)  
Leon Zygmun

State of Florida, County of: MARTIN

This the 28 day of MARCH, 2005

by JEON E. ZYGMUN who is personally known to me or produced

as identification. Cheryl A. Marland

Notary Public  
My Commission Expires: 4-6-2008

Seal

CONTRACTOR SIGNATURE (required)  
Don Williams

On State of Florida, County of: ST. LUCIE

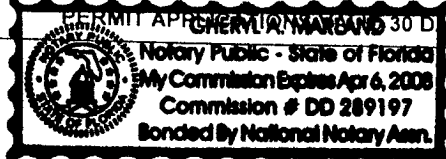
This the 5 day of APRIL, 2005

by DON WILLIAMS who is personally known to me or produced

As identification. Don Evers

Notary Public  
My Commission Expires: \_\_\_\_\_

Seal



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

<b>ACORD. CERTIFICATE OF LIABILITY INSURANCE</b>		OP ID # <b>KZ</b> <b>WILCO-1</b>	DATE (MM/DD/YYYY) <b>08/06/04</b>
PRODUCER <b>Brooke Agency Services Co. LLC</b> Agency # 316 6035 Morrow Street, Suite 101 Jacksonville FL 32217 Phone: 904-731-7922 Fax: 904-739-0725		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED  <b>Wilco Construction, Inc.</b> 6901 NW Jorgensen Rd. Port St. Lucie FL 34983		INSURERS AFFORDING COVERAGE	
		INSURER A: <b>Marine Office of America Corp.</b>	
		INSURER B: <b>Progressive Companies</b>	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		NAIC #	
		24260	

**COVERAGES**

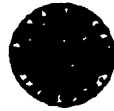
THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES 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 ACCT/LTR PRSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-SECT <input type="checkbox"/> LOC	ML086974601	08/09/04	08/09/05	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				CA02585805	03/29/04
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				DAMAGE TO RENTED PREMISES (Per occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMPROP AGG	\$ 50,000 \$ 5,000 \$ 1,000,000 \$ 2,000,000 \$ 1,000,000
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY: EA ACC AGG	\$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/OWNER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	\$ \$ \$
A	Hull Prot & Indemnity	H0863362	08/09/04	08/09/05	Hull P&I	10,000 1,000,000

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

<b>CERTIFICATE HOLDER</b>  TOWNSEW  Town of Sewall's Point P# 772-220-4765 #1 S. Sewall's Pt Rd Sewall's Point FL 34996	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.  AUTHORIZED REPRESENTATIVE Patrick Higgins
--	--

06-03-2004



TOM GALLAGHER  
CHIEF FINANCIAL OFFICER

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

**\*\* CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW \*\***

**CONSTRUCTION INDUSTRY EXEMPTION**

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

EFFECTIVE DATE: 06/26/2004      \*\* EXPIRATION DATE: 06/26/2006

PERSON: WILLIAMS, ROBERT      V

FEIN: 1278412

BUSINESS NAME AND ADDRESS: WILCO CONSTRUCTION INC.  
6901 NW JORGENSEN ROAD  
PORT SAINT LUCE FL 34983

SCOPE OF BUSINESS OR TRADE: MARINE CONSTRUCTION

**MEETS REISSUANCE REQUIREMENTS**

**IMPORTANT:** Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04

QUESTIONS? (850) 488-2333

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

<p>STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION</p> <p>CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW</p> <p>EFFECTIVE: 06/26/2004 ** EXPIRATION DATE: 06/26/2006</p> <p>PERSON: WILLIAMS, ROBERT      V</p> <p>FEIN: 1278412</p> <p>BUSINESS NAME AND ADDRESS: WILCO CONSTRUCTION INC. 6901 NW JORGENSEN ROAD PORT SAINT LUCE FL 34983</p> <p>SCOPE OF BUSINESS OR TRADE: MARINE CONSTRUCTION</p>	<p>F O L D  H E R E</p> <p><b>IMPORTANT</b></p> <p>Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.</p> <p>QUESTIONS? (850) 488-2333</p>
--	--

CUT HERE

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



05-03-2004

TOM GALLAGHER  
CHIEF FINANCIAL OFFICER

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

**\*\* CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW \*\***

CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE DATE: 04/13/2004      \*\* EXPIRATION DATE: 04/13/2006

PERSON:                      WILLIAMS, RONALD                      B

FEIN:                              1338412

BUSINESS NAME AND ADDRESS:      WILCO CONSTRUCTION INC  
6901 N. WEST JORGENSENN RD.  
PORT SAINT LUCE      FL 34983

SCOPE OF BUSINESS OR TRADE: MARINE CONSTRUCTION

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04

QUESTIONS? (850) 408-2333

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

<p>STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION</p> <p>CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW</p> <p>EFFECTIVE:                      04/13/2004 ** EXPIRATION DATE: 04/13/2006</p> <p>PERSON:                              WILLIAMS, RONALD                      B</p> <p>FEIN:                                      1338412</p> <p>BUSINESS NAME AND ADDRESS:      WILCO CONSTRUCTION INC 6901 N. WEST JORGENSENN RD. PORT SAINT LUCE                      FL 34983</p> <p>SCOPE OF BUSINESS OR TRADE: MARINE CONSTRUCTION</p>	<p style="text-align: center;"><b>IMPORTANT</b></p> <p>Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.</p> <p style="text-align: right;">QUESTIONS? (850) 408-2333</p>
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CUT HERE

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

# CITY OF FORT PIERCE OCCUPATIONAL LICENSE

2004 - 2005

No. 05-14332

100 N. U.S. # 1 - Fort Pierce, FL - 34950  
772-480-2200 ext 371 or 372

**BUSINESS NAME** WILCO CONSTRUCTION, INC. : WILCO CONSTRUCTION, INC.  
**MAILING ADDRESS** 5901 NW JOHNSON ROAD **LOCATION** 28 N CAUSEWAY 1  
PORT ST LUCIE **FL** 34943 **PHONE** 340-3184

is hereby licensed to engage in the following business, profession or occupation.  
**CLASSIFICATION:** 067 CONTRACTORS, GENERAL OR SPECIALTY  
 MARINE CONSTRUCTION; BUILDING SEAWALLS,  
 AND DOCKS, INSTALLING BOAT RAMPS, ETC.

IN THE CITY OF FORT PIERCE, FLA. FOR THE PERIOD BEGINNING ON THE 1ST DAY OF OCTOBER AND ENDING SEPTEMBER 30.  
 ISSUED AUGUST 09 2004

*Cassandra Steele* (SEAL) CITY CLERK

This License becomes null and void if business name, classification, ownership or address is changed.

I understand and agree that issuance of an Occupational License does not allow occupancy, nor exempt the possessor from compliance with any City Code or Ordinance. License may be revoked in accordance with Section 9-29.

LICENSE AMOUNT	9	100.00
NEW / RENEWAL FEE	5	5.00
PENALTY	0	0.00
TOTAL	4	105.00

48929

THIS LICENSE MUST BE PROMPTLY POSTED FOR PUBLIC VIEW

2004-2005

## ST. LUCIE COUNTY OCCUPATIONAL LICENSE

ACCOUNT 1799-20030028  
 EXPIRES SEP 30, 2005

FACILITIES OR MACHINES  
 TYPE OF BUSINESS  
 BUSINESS LOCATION  
 NAME MAILING ADDRESS

ROOMS SEATS EMPLOYEES 1-10  
 1799-Marine Contractor  
 28 N Causeway Dr  
 City of Fort Pierce  
 Ronald Williams - affil  
 Wilco Construction Inc  
 Williams, Ronald  
 28 N Causeway Dr #1  
 Ft Pierce, FL 34946

680033256

RENEWAL	
NEW LICENSE	
TRANSFER	
ORIGINAL TAX	11.25
AMOUNT	
PENALTY	
COLLECTION COST	
TOTAL	11.25

Please see back for additional information

P0000087951

PAID 08/23/2004 99-20040823-071360 11.25



TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # \_\_\_\_\_

TAX FOLIO # 13-38-41-001-000-00310-1

**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 31 + N 1/2 of LOT 32 / 18 SIMARA STREET STUART, FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: CONSTRUCT 165' +/- LINEAR FEET OF SEAWALL

OWNER: LEON ZYGMUN

ADDRESS: 18 SIMARA STREET STUART, FL 34996

PHONE #: (772) 220-4292

FAX #: \_\_\_\_\_

CONTRACTOR: WILCO CONSTRUCTION, INC.

ADDRESS: 28 N. CAUSEWAY DRIVE UNIT #1 FORT PIERCE, FL 34946

PHONE #: (772) 460-6928

FAX #: (772) 460-6929

SURETY COMPANY (IF ANY) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

STATE OF FLORIDA

MARTIN COUNTY

PHONE # \_\_\_\_\_

FAX #: \_\_\_\_\_ THIS IS TO CERTIFY THAT THE

BOND AMOUNT \_\_\_\_\_

FOREGOING \_\_\_\_\_ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.

LENDER: \_\_\_\_\_

MARSHA EWING, CLERK

ADDRESS: \_\_\_\_\_

BY [Signature] D.C.

PHONE #: \_\_\_\_\_

DATE 4-5-05

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 #: \_\_\_\_\_

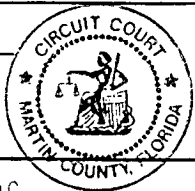
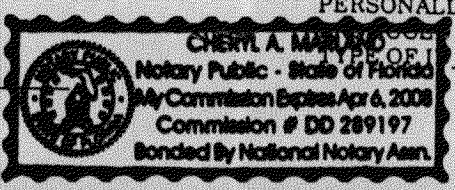
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_

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

[Signature]  
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 28 DAY OF MARCH 2005 BY LEON E ZYGMUN PERSONALLY KNOWN

[Signature]  
NOTARY SIGNATURE



INST # 1827784 OR BK 01999 PG 0157 RECD 04/05/2005 09:44:27 AM  
MARSHA EWING MARTIN COUNTY DEPUTY CLERK T COPUS (asst MGR)



# Department of Environmental Protection

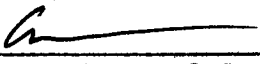
Jeb Bush  
Governor

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

Colleen M. Castille  
Secretary

FEB 28 2005

Leon Zygmunt  
18 Simara Street  
Stuart, FL 34996

(772) 398-2806 Fax (772) 398-2815  
FILE COPY  
TOWN OF SEWALL'S POINT  
THESE PLANS HAVE BEEN  
REVIEWED FOR CODE COMPLIANCE  
DATE: 5/6/05  
  
BUILDING OFFICIAL  
Gene Simmons

File Number: 43-0181994-002/003  
Martin County

Dear Mr. Zygmunt:

On February 8, 2005, we received your application for an exemption to perform the following activities: replace approximately 165 linear feet of seawall within 12" of the existing seawall; install batter piles in the Indian River Lagoon, Class III Waters of the State, located at 18 Simara Street (Section 13, 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 the seawall replacement is exempt from the need to obtain a DEP Environmental Resource Permit under Rule 40E-4.051(4)(b), (F.A.C.). This determination is based solely on the information provided to the Department and the statutes and rules in effect when the application was submitted and is effective only for the specified activity. In addition, the Department has reviewed the request to install batter piles and has determined that the project is not expected to cause the release of pollutants in sufficient quantity, quality, content, or character with respect to the circumstances surrounding the location, use, and operation of the project, as to contribute to pollution in contravention of the provisions of Chapters 373 and 403, Florida Statutes (F.S.), or Title 62, Florida Administrative Code (F.A.C.)

Therefore, based solely upon the documents submitted to the Department, the installation of the batter piles has been determined to qualify as an activity that is exempt from the need for an environmental resource permit pursuant to Chapter 373.406(6), F.S.

This determination is applicable only pursuant to the statutes and rules in effect at the time the information was submitted. This determination may not be valid in the event subsequent changes occur in the applicable statutes and rules of the Department. Pursuant to Rule 62-302, F.A.C., activities that qualify for this exemption must be constructed and operated using appropriate best management practices and in a manner that does not cause water quality violations.

"More Protection, Less Process"

Printed on recycled paper.

Leon Zygmunt  
File Number: 43-0181994-002/003  
Page Two

**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.

**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 June 17, 2005. Your project must be completed prior to this expiration date.

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

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

**NOTICE OF RIGHTS OF SUBSTANTIALLY AFFECTED PERSONS**

This letter acknowledges that the proposed activities are exempt from ERP permitting requirements under Rules 40E-4.051(4)(b) F.A.C and 373.406(6) F.S. 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 proposed activities are not authorized under the exemption established under Rules 40E-4.051(4)(b) F.A.C. and 373.406(6), F.S.

Leon Zygmun  
File Number: 43-0181994-002/003  
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.

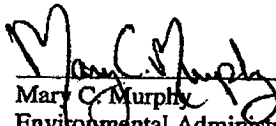
If you wish to limit the time within which any specific person(s) may request an administrative hearing, you may provide such person(s), by certified mail, a copy of this determination, including Attachment A.

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 Jimmy Sellers of this office, at telephone number (772) 398-2806.

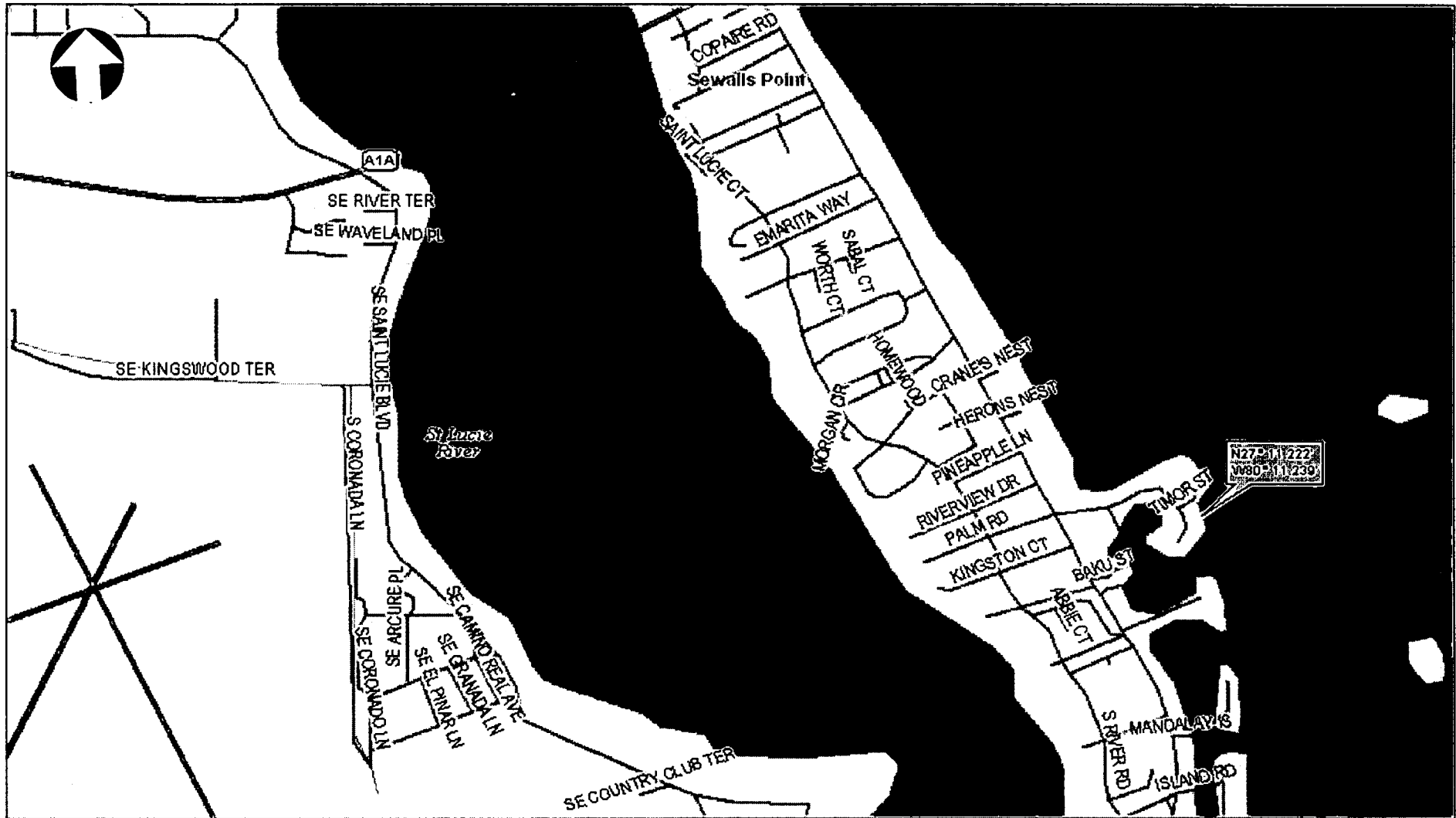
Sincerely,

 2/28/05  
\_\_\_\_\_  
Mary C. Murphy Date  
Environmental Administrator  
Florida Department of Environmental Protection  
Southeast District Branch Office

MCM/JS

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

cc: Duane Fike, Jerner and Associates, Inc. (Agent) [without enclosures]



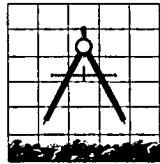
**DeLORME**

© 2003 DeLorme  
 www.delorme.com  
 Street Atlas USA® 2004

MN (0.0° W)

0 1000 2000 ft  
 Data Zoom 13-1

**Leon Zygmun**  
 18 Simara Street  
 Stuart, FL 34996



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

Date: 2-3-05

Sheet 1 of 4



# Indian River

Flood/Ebb

Proposed Seawall within 12" of existing seawall

Batter Piles

Adjacent P.O. wall

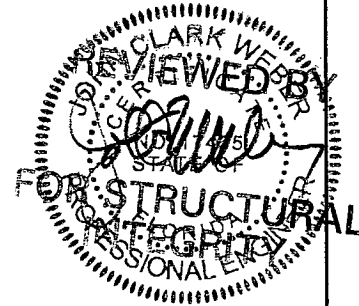
MHW

Existing Seawall

PL

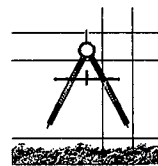
165'

Pool Deck



Feb 9 2005

**Leon Zygmunt**  
18 Simara Street  
Stuart, FL 34996

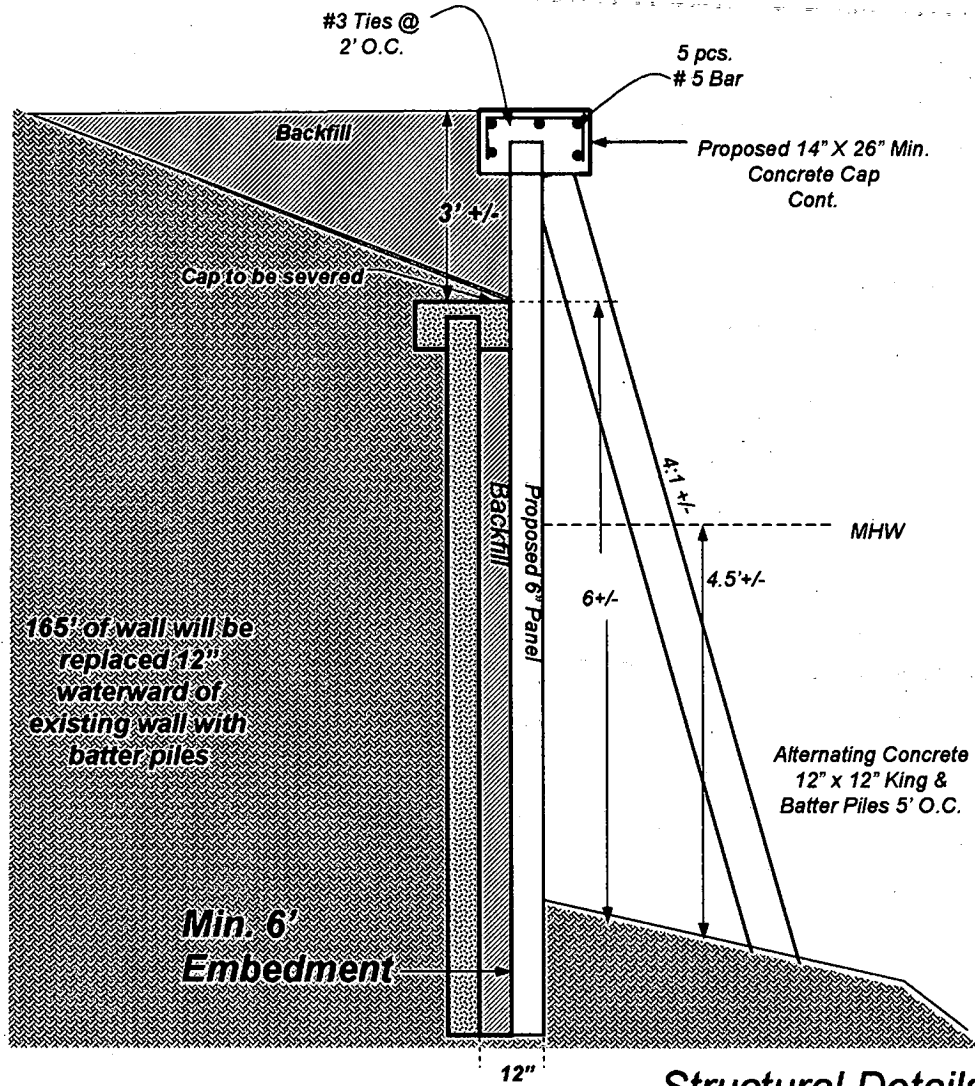


Design & Drawing by: DJF  
**Jerner & Associates, Inc.**  
Environmental Consulting  
110 SW. 5<sup>th</sup> Street  
Stuart, FL 34994  
Ph. (772) 283-2950 / Fax (772) 283-2760

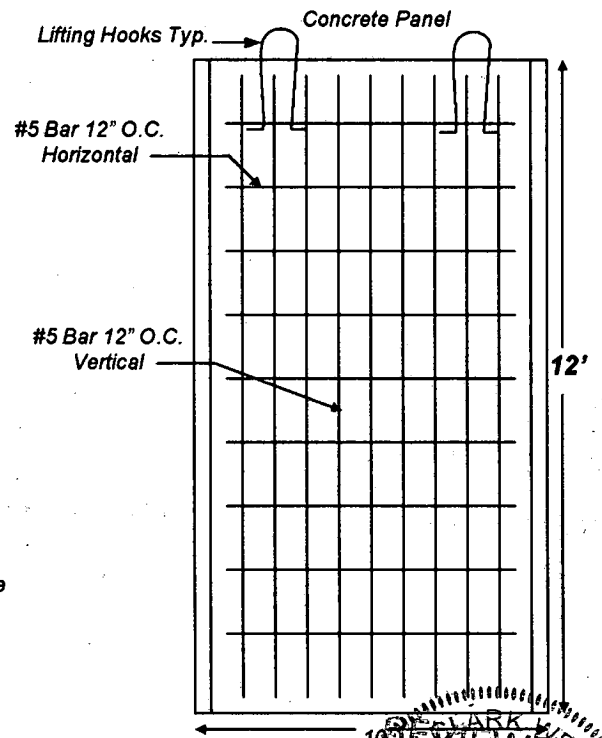
Drawing not to scale

Date: 2-3-05

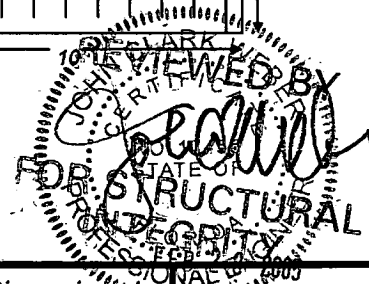
Sheet 2 of 4



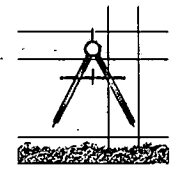
All Concrete to have a Min. Compressive Strength of 3000 P.S.I. @ 28 Days



**Structural Details**

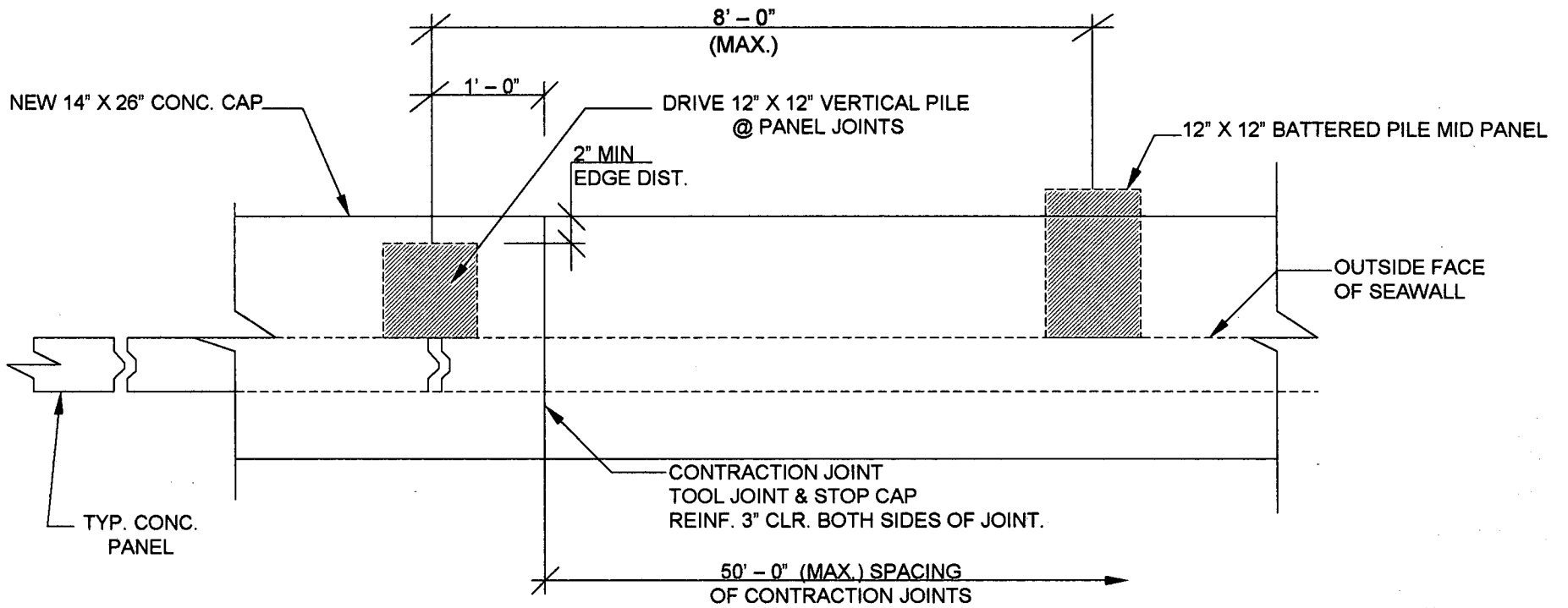


**Leon Zygmunt**  
**18 Simara Street**  
**Stuart, FL 34996**

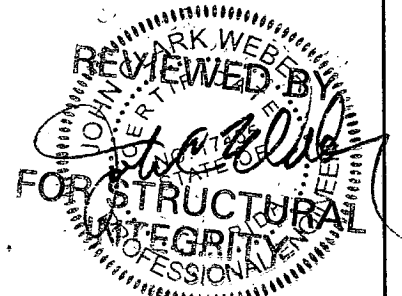


Design & Drawing by: DF  
**Jerner & Associates, Inc.**  
 Environmental Consulting  
 110 SW 5th Street, Stuart FL 34994  
 Ph. (772) 283-2950 / Fax (772) 283-2760

Dimensioned  
 Date: 2-3-05  
 Sheet 3 of 4

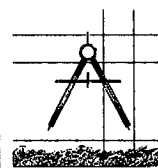


**NOTE:**  
 LOCATE CONTRACTION JOINTS  
 ADJACENT TO VERTICAL PILES.



DRAWING NOT TO SCALE  
 FEB 20 2005

**Leon Zygmunt**  
 18 Simara Street  
 Stuart, FL 34996



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

Dimensioned  
 Date: 2/03/05

Sheet 4 of 4



# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri \_\_\_\_\_, 2005 Page \_\_\_\_\_ of \_\_\_\_\_

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7613	Preissman	Footing in rear	PASS	
3	28 Rio Vista Winchip			INSPECTOR: <i>[Signature]</i>
7556	Zigman	Cap	PASS	
2	18 Simara St Wilco			INSPECTOR: <i>[Signature]</i>
7679	Mac Dougan	Propane tank	PASS	
5	28 N. River Rd	(U.G.)		INSPECTOR: <i>[Signature]</i>
7684	Off	<del>Roofing/Sealing</del>	<del>CANCEL</del>	
6	26 N 5 PR Addudel Rodry	Roofing → 9:30 - 10:00		INSPECTOR:
7663	Hill	Garage Door	FAIL	
7	48 N River Rd Treasure Coast Gen	Final →		INSPECTOR: <i>[Signature]</i>
7612	McCarthy	Deck removal	PASS	CLOSE
4	114 E River Road TCRI	Final 9:00 A.M.		INSPECTOR: <i>[Signature]</i>
7663	Becker	Sheathing, Metal	PASS	
1	16 E High Pt Rd All American	Tin Tag		INSPECTOR: <i>[Signature]</i>
OTHER:		Sheathings	PASS	CLOSE
761	Bruner			<i>[Signature]</i>
4A	19 Ravenview			<i>[Signature]</i>

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 7/29, 2005

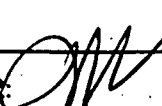


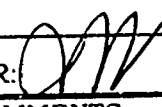
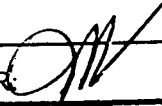
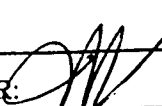
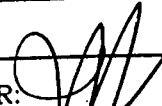
Page 2 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6833	FOSTER	STEEL PREPOUR	PASS	
1	7 TIMOR STREET CUSTOM BUILT MARINE	<sup>Pour at 11am</sup> * FIRST PLEAS		INSPECTOR: <i>OM</i>
7606	POBLEY	FINAL ROOF	FAIL	
4	96 S. SEWALL'S PT A & P CONSTRUCTION			INSPECTOR: <i>OM</i>
7623	SANDS	FINAL ROOF	FAIL	
8	82 S. RIVER RD PACIFIC ROOFING			INSPECTOR: <i>OM</i>
7680	BRUCE	DRINKING	FAIL	
3	2 CRANE'S NEST - BANK PAVERS	FINAL		\$40 INSPECTOR: <i>OM</i>
7396	Joyce's Flowers Herba Bay Plaza Coachman	Above ceiling Electrical / Mechanical		INSPECTOR:
7556	Zygmunt 18 Simara Street Wilco	Cap	PASS	INSPECTOR: <i>OM</i>
7449	FERRARO	FINAL RENOV.	FAIL	
6	4 KINGSTON CT GULICK & McCAULEY			\$40 FEE INSPECTOR: <i>OM</i>
OTHER: _____				

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 8/5, 2005 Page 1 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7696	POTSDAM	FINAL GAS	PASS	CLOSE
7	50 RIO VISTA Dr			INSPECTOR: 
	MARTIN CITY PROPANE			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7687	COOPER	DRY IN	PASS	
1	33 W. HIGH POINT			INSPECTOR: 
	TOTAL ROOFING	FIRST FINIS		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7702	MILLARD	FINAL GARAGE DOOR		RESCHEDULE FOR
11	5 INDIAN LUCIE Pkwy			8/8 INSPECTOR: 
	O/B			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	BARRY	TREE	PASS	
6	97 S. SEWALLS Pt			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7556	ZYGMAN	FINAL SEAWALL	PASS	CLOSE
5	18 SIMARA ST			INSPECTOR: 
	WILCO CONSTR			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7568	STORCK	FINAL ROOF	PASS	CLOSE
12	27 N. RIVER RD			INSPECTOR: 
	PACIFIC ROOFING			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7691	THOMAS	DRY-IN	FAIL	
2	10 Palm Road	SHEATHING	PASS	INSPECTOR: 
	FEAZEL	SECOND PLEAS		
OTHER: _____				

8572

GAS TANK

&

LINES

MASTER PERMIT NO. \_\_\_\_\_

### TOWN OF SEWALL'S POINT

Date 4-12-07

BUILDING PERMIT NO. 8572

Building to be erected for Zygmunt

Type of Permit Gas tank & lines

Applied for by Ferrell Gas (Contractor)

Building Fee 35-

Subdivision Archipelago Lot 31 & 32 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 18 Simara St

Impact Fee \_\_\_\_\_

Type of structure SFR

A/C Fee \_\_\_\_\_

Electrical Fee \_\_\_\_\_

Parcel Control Number:  
133841-001-000-00310-1

Plumbing Fee \_\_\_\_\_

Roofing Fee \_\_\_\_\_

Amount Paid \$35 Check # \_\_\_\_\_ Cash

Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 2400-

TOTAL Fees 35-

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Official

## PERMIT

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

## INSPECTIONS

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



Town of Sewall's Point BUILDING PERMIT APPLICATION

Date: 1-15-07

Permit Number

OWNER/TITLEHOLDER NAME: LEON E ZYGMUN Phone (Day) 772 220-4292 (Fax) 772 220-4293

Job Site Address: 18 Seward City: SEWALL, FL State: FL Zip: 34986

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

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

Description of Work To Be Done: L.P GAS TANK + LINES

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 2400.00

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$

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

Method of Determining Fair Market Value:

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: FERRELLGAS Phone: 287-4330 Fax: 287-3456

Street: 3232 S.E. DIKIE HIGHWAY City: STUART State: FL Zip: 34997

State Registration Number: State Certification Number: Martin County License Number: 16434

SUBCONTRACTOR INFORMATION:

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

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

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

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

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

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

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

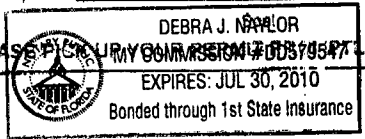
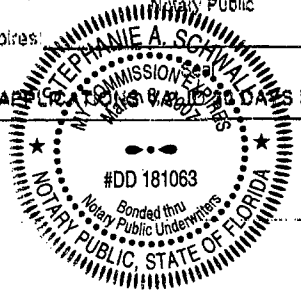
OWNER OR AGENT SIGNATURE (required) State of Florida, County of: martin This the 25th day of January 2007 by Leon E. Zygmun who is personally known to me or produced as identification: Stephanie A. Schwall

CONTRACTOR SIGNATURE (required) State of Florida, County of: Martin This the 30th day of March 2007 by Sonny Weaver who is personally known to me or produced as identification: Debra J. Naylor Notary Public

My Commission Expires:

- My Commission Expires:

PERMIT APPROVAL DATE: 1/15/07 EXPIRES: 180 DAYS FROM APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT 70379547



DATE (MM/DD/YY)

08/01/2007

07/17/2006

# ACORD CERTIFICATE OF LIABILITY INSURANCE

PRODUCER

Lockton Companies  
444 W. 47th Street, Suite 900  
Kansas City Mo 64112-1906  
(816) 960-9000

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

### INSURERS AFFORDING COVERAGE

INSURER A: ACE AMERICAN INSURANCE COMPANY

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURED  
0265

FERRELLGAS, LP  
ONE LIBERTY PLAZA  
LIBERTY, MO 64068

**THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER AND THE CERTIFICATE HOLDER.**

COVERAGES FERCO03 YA

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


INSURER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> (500,000 SIR) GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	XSL G21732552	08/01/2006	08/01/2007	EACH OCCURRENCE \$ 3,000,000 FIRE DAMAGE (Any one fire) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 3,000,000 GENERAL AGGREGATE \$ 7,500,000 PRODUCTS - COMP/OP AGG \$ Included
A	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	ISA H08221510	08/01/2006	08/01/2007	COMBINED SINGLE LIMIT (Ea accident) \$ 3,000,000 BODILY INJURY (Per person) \$ XXXXXXXX BODILY INJURY (Per accident) \$ XXXXXXXX PROPERTY DAMAGE (Per accident) \$ XXXXXXXX
	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO	NOT APPLICABLE			AUTO ONLY - EA ACCIDENT \$ XXXXXXXX OTHER THAN EA ACC \$ XXXXXXXX AUTO ONLY: AGG \$ XXXXXXXX
	<b>EXCESS LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> RETENTION \$	NOT APPLICABLE			EACH OCCURRENCE \$ XXXXXXXX AGGREGATE \$ XXXXXXXX \$ XXXXXXXX \$ XXXXXXXX
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>	WLR C44442310 (AOS) SCF C44442322(W1)	08/01/2006 08/01/2006	08/01/2007 08/01/2007	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E L EACH ACCIDENT \$ 1,000,000 E L DISEASE - EA EMPLOYEE \$ 1,000,000 E L DISEASE - POLICY LIMIT \$ 1,000,000
A	<b>OTHER CARGO</b>	ISA H08221510	08/01/2006	08/01/2007	\$100,000

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

**CERTIFICATE HOLDER**  
 1681228  
 TOWN OF SEWALLS POINT  
 1 SOUTH SEWALLS POINT RD  
 STUART, FL 34996

**ADDITIONAL INSURED, INSURER LETTER:**

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

AUTHORIZED REPRESENTATIVE 

**CITY OF STUART  
OCCUPATIONAL LICENSE  
2006-2007**

LICENSE NO.	ACCOUNT NO.	CATEGORY NO.
5866	23251	120430

TAX YEAR BEGINS OCTOBER 1 AND ENDS SEPTEMBER 30.  
PAYMENT AFTER OCTOBER 1 CONSTITUTES VIOLATION  
OF CITY CODE OF ORDINANCES

This occupational license does not permit the holder to operate in violation of any City law, ordinance, or regulation. Any changes in location or ownership must be approved by the City License Section, subject to zoning restrictions. This license does not constitute an endorsement, approval, or disapproval of the holder's skill or competence or of the compliance or non-compliance of the holder with other laws, regulations, or standards.

Occupational Licensing 772-288-5319

BUSINESS TYPE	GAS DISTRIBUTOR
OWNER AND LOCATION	WEAVER, SONNY 3232 SE DIXIE HWY
ST/CTY LICENSE	CGF16434
DESCRIPT	

FEE	PENALTY	TRANSFER	MISCELLANEOUS	PAID
100.00	0.00	0.00	0.00	100.00

BUSINESS NAME AND MAILING ADDRESS	FERRELL GAS WEAVER, SONNY 3232 SE DIXIE HWY STUART FL 34997
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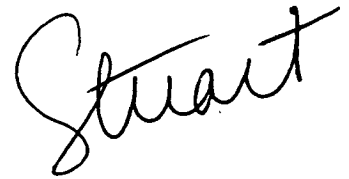
DATE  
08/24/2006

CHERYL WHITE  
CITY CLERK

*Stuart*



Florida Department of Agriculture and Consumer Services  
Bureau of Liquefied Petroleum Gas  
P.O. Box 6720  
Tallahassee, Florida 32399-6720



License Number: 05487

Business Mailing Address

Licensed Location Address

FERRELLGAS #5539  
3232 S.E. DIXIE HIGHWAY  
STUART, FL 34997

FERRELLGAS #5539  
3232 SE DIXIE HWY  
STUART, FL 34997-5239

The liquefied petroleum gas license at the bottom of this form is valid ONLY for the company located at the address on the license. Each business location of a company must be licensed. All LP Gas licenses must be renewed annually. Any license allowed to expire shall become inoperative because of failure to renew. The fee for restoration of a license is equal to the original license fee and must be paid before the licensee may resume operations.

Pursuant to Chapter 527, Florida Statutes, LP Gas licensees must present proof of licensure to any consumer, owner, or end user upon request when engaged in the business of servicing, testing, repairing, maintaining or installing LP Gas systems and/or equipment.

For future correspondence, please make any needed corrections or changes to your business mailing address and/or your licensed location address and return the UPPER PORTION with corrections to:

Florida Department of Agriculture and Consumer Services  
Bureau of Liquefied Petroleum Gas  
P.O. Box 6720  
Tallahassee, Florida 32399-6720



Cut Here



POST LICENSE  
CONSPICUOUSLY

State of Florida  
Department of Agriculture and Consumer Services

Division of Standards  
Bureau of Liquefied Petroleum Gas  
(850) 921-8001  
Tallahassee, Florida

License Number: 05487  
Expiration Date: August 31, 2007  
Date of Issue: September 1, 2006  
License Fee: \$400.00  
Type and Class: 0804

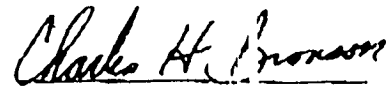
**Liquefied Petroleum Gas License**

**PIPELINE SYSTEM OPERATOR**

GOOD FOR ONE LOCATION

This license is issued under authority of Section 527.02, Florida Statutes, to:

FERRELLGAS #5539  
3232 SE DIXIE HWY  
STUART, FL 34997-5239



CHARLES H. BRONSON  
COMMISSIONER OF AGRICULTURE

Florida Department of Agriculture and Consumer Services  
Bureau of Liquefied Petroleum Gas  
P.O. Box 1650  
Tallahassee, Florida 32399-1650

*Stuart*

**Master Qualifier Mailing Address**

SONNY DIRAND WEAVER  
FERRELLGAS #5539  
3232 SE DIXIE HWY  
STUART, FL 34997-5239

**Licensed Location Address**

FERRELLGAS #5539  
3232 SE DIXIE HWY  
STUART, FL 34997-5239

**Certificate Number**  
16434

**License Number**  
01237

This Master Qualifier Certificate is issued pursuant to Chapter 527, Florida Statutes. This certificate is valid only for the person and licensed holder listed. Any changes to the Master Qualifier status (such as transfer or termination of employment) must be reported to the Bureau of LP Gas Inspections at 850/921-8001 immediately.

The Master Qualifier Certificate is valid only through the date noted on the Certificate. A notice of renewal will be sent to you in advance of your expiration date. A Master Qualifier Certificate may be renewed if certification of a minimum of 12 (twelve) hours continuing education is provided along with the renewal. If training cannot be documented, an examination must be taken.

For future correspondence, please make any needed corrections or changes to this certificate and return the upper portion with corrections to:

Bureau of Liquefied Petroleum Gas Inspections  
P.O. Box 1650  
Tallahassee, Florida 32399-1650

< Cut Here >



**State of Florida**  
**Department of Agriculture and Consumer Services**

Division of Standards  
Bureau of Liquefied Petroleum Gas  
(850) 921-8001  
Tallahassee, Florida

Certificate No: 16434  
Exam Date: June 28, 2002  
Issue Date: July 13, 2006  
Expiration Date: July 13, 2009  
Exam: 0601

**MASTER QUALIFIER CERTIFICATE**

This Certificate is issued under authority of Section 527.02, Florida Statutes, to:  
**SONNY DIRAND WEAVER**

Valid For  
License Number: 01237  
FERRELLGAS #5539  
3232 SE DIXIE HWY  
STUART, FL 34997-5239

*Charles H. Bronson*  
CHARLES H. BRONSON  
COMMISSIONER OF AGRICULTURE

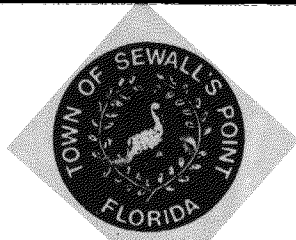
# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 4-25, 2007 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8533	West	Pre electric	PASS	
6	7 Palmetto Dr O/B	framing	PASS	INSPECTOR: <i>[Signature]</i>
8481	Galinis	Final-gas	PASS	CLOSE
8	26 S Sewalls Prop Disc.			INSPECTOR: <i>[Signature]</i>
<del>8531</del>	<del>COMMINGS GUEST</del>	<del>Sheathing</del>		<del>RESCHEDULED FOR FRI.</del>
4	83 S. RIVER E. MANDALAY			INSPECTOR:
8440	Tidakis	Plumbing rough	PASS	
5	12 Cranes Nest A+G Pools	Pipe Test		INSPECTOR: <i>[Signature]</i>
8572	Zygman	gas rough	<del>PASS</del>	
3	18 Simara St Terrellgas	V.G. TANK		INSPECTOR: <i>[Signature]</i>
8105	Galinis	Final	PASS	READY FOR C.O.
8 LAST	26 S Sewalls Pt Driftwood			INSPECTOR: <i>[Signature]</i>
8528	Masterpiece Sys.	Plumbing slab		RESCHEDULE FOR FRI/W
1	5 Mandalay Masterpiece			INSPECTOR: <i>[Signature]</i>

OTHER: \_\_\_\_\_



**TOWN OF SEWALL'S POINT**

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

**CORRECTION NOTICE**

ADDRESS: 18 SIMARA

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

FINAL GAS

MISSING DIRT LEG @  
GAS REGULATOR -

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

DATE: 7/25

INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

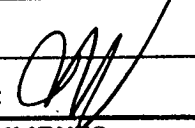
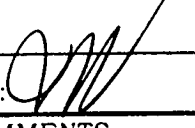


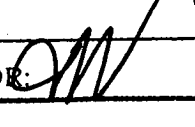
Date of Inspection:  Mon  Wed  Fri 7/25, 2007 Page 1 of 2

PERM	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8631	McKelvey 21 E High Pt Gulfstream	Final	PASS	CLOSE  INSPECTOR: <i>OM</i>
8667	Cabrera 3 Melody La Seaside Roof	hintag/metal SHEATHING	PASS	  INSPECTOR: <i>OM</i>
8565	Bryan 28 Sumara St Genthouse Elec	Final	<del>FAIL</del> PASS	<del>RESCHEDULE</del> CLOSE INSPECTOR: <i>OM</i>
8666	McMahon 5 Melody La Code book roofers	hintag		RESCHEDULE 7/26 8:15 INSPECTOR: <i>OM</i>
8441	Dressler 12 Island Rd Harbor Course	Entry tie beam	PASS	  INSPECTOR: <i>OM</i>
8473	Kremsler 23 Ridgeland Dr Duffwood	Final (See me for permit)	PASS	CLOSE  INSPECTOR: <i>OM</i>
8572	Zygmund 18 Sumara St Fenel Gas	Final	FAIL	  INSPECTOR: <i>OM</i>
OTHER:	8041 B. MIDDLEB.	FINAL ROOF.		CONTRACTOR WILL RESCHEDULE & PROVIDE PHOTOS - <i>OM</i>

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

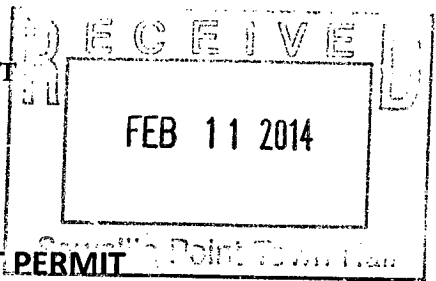
Date of Inspection:  Mon  Wed  Fri 7/30, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8528		A/C ROUGH	PASS	
3	SMANDALAY MASTERPIECE			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6	VIA DECHRISTO	WORK W/O PERMIT		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8633		FINAL SHUTTERS	PASS	CLOSE
2	8 E. HIGH POINT GULF STREAM			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8561	<del>SHARFI</del>	<del>+</del>	<del>CANCEL</del>	
5	<del>73 N SPR</del>	<del>FINAL REMODEL</del>		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8572			PASS	CLOSE
4	18 SIMARA	FINAL GAS RE-INSPECT		INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8535	STARK.	1ST FL. BECK.	FAIL	
1	87 S. RIVER. CAVIOCA	REINSPECT.		INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8651	FABINSKY	FINAL	PASS	CLOSE
	10 MANAVALI PHANTOM HVR. PROTECT.			INSPECTOR: 
OTHER:				

**TREE**



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 PATRICIA A. ZYGMUND Address 18 SIMARA ST. Phone 772-220-4292

Contractor Capital Lawn Maint Address PO Box 7343, PSL Phone 772-337-6391

No. of Trees: REMOVE \_\_\_\_\_ Species: 3 cabbage palms, 1 live oak, 3 WASHINGTONIA palms

No. of Trees: RELOCATE 1 Species: Adonidia

No. of Trees: REPLACE \_\_\_\_\_ Species: \_\_\_\_\_

\*\*\*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) cabbage palms & live oak to be removed for new drainfield installation; Washingtonias are a hazard to the house

Signature of Property Owner Patricia A. Zygmund Date 2/10/14

Approved by Building Inspector: [Signature] Date 2-12-14 Fee: N/C

NOTES:

2/12/14 320<sup>00</sup> advised  
 2/18/14 Picked up

SKETCH:

All trees are tagged on the front driveway



# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri 2/12 - 14 Page      of     

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10754	Mangan	Refr. AC		483-1505
	16 Perennelle ho	Metal	PASS	
	On Shore Roofing			INSPECTOR <i>JA</i>
	Roy Arman	JOB SITE		485-6339
		VISIT	ON	
				INSPECTOR
	West	Final		772-781-4410
	7 Palmetto Dr.		FATL	
	All American Roofing			INSPECTOR <i>JA</i>
	Z. Y. MUN			
PM	18 SIMARA ST	TREES	ON	
				INSPECTOR
	DESANTIS	TREE/		
	73 S. RIVER RD	SIGNALINE	ON	
		TRIMMING		INSPECTOR
10739		A/C		287-1402
PM	6 MICHAEL RD	FINAL	PASS	
				INSPECTOR <i>JA</i>
	STARK	FINAL		
PM	83 S RIVER	PAVED	RESET	FOR TRUTH
	CRITWOOD			INSPECTOR