

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET VERO BEACH, FL 32960

PERMIT

Confirm. #: 636

ELR ELECTRICAL RESIDENTIAL

PERMIT #: 2020020281 PERMIT TYPE: ELR ISSUED DATE: 02/06/2020 BY: BLDGR

JOB DESCRIPTION: UPGRADE 100AMP EXISTING METER W/ 200 AMP OVERHEAD METER MAIN FEED POOL HEA

JOB ADDRESS 403 21ST PL SE

BLOCK 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N

OWNER NAME: GROOVY PROPERTIES LLC JURISDICTION: IRC

FLOOD ZONE X FLOOD ELEV: U FLOOD MAP: 378H,390 INSP AREA:

PROJECT

APPLICANT: GUIDROZ, GARETT, PETE TYPE: CONTRACTOR JOB PHONE:(772)388-0533

DBA: COMPLETE ELECTRIC, INC. CERT NBR: 9889 JOB FAX: (772)388-2411

SETBACKS FRONT: REAR: LEFT: RIGHT:

FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.

SQFT: JOB VALUE: \$ 1,200.00 #UNITS: #FLOORS #BLDGS:

TIFF #: ROW NBR PLAN NBR:

ADDITIONAL INFO:

6/24/2020 BLDMP - change of contractor (ok per S.M) previous contractor FLORIDA STATE ELECTRIC INC - CERT 19340 - ALAN WALTON

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work has commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at: www.ircgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Owner/Contractor

Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.

Complete Electric, Inc.
637 Sebastian Blvd
Sebastian, Fl. 32958
772-388-0533 / Fax 772-388-2411
EC0001911

June 24th, 2020 ,

Scott McAdam,
Building Official
Indian River County Building Department
1801 27th Street
Vero Beach, FL 32960

RECEIVED

JUN 24 2020

INDIAN RIVER COUNTY
BUILDING DEPARTMENT

Re: Permit # 2020020281
403 21st Place SE, Vero Beach, FL 32962

Dear Mr. McAdam,

I am writing this letter in hopes you can override the signature for the original contractor on the above referenced permit. Since May 21st, 2020, I have made multiple attempts to contact Alan Walton, qualifier for Florida State Electric, Inc, via email and phone calls. I have attached the emails I sent him with no response what so ever. The owner of the property mailed out a certified letter requesting Mr. Walton to sign his change of contractor notice in regards to the above-referenced permit. The letter has been shipped all over south Florida, as the address on file for Florida State Electric, Inc. is not valid. I have attached the certified mail receipt and tracking history for the certified mailing to show this. I have, and the owner of the property, has made numerous attempts to contact the original contractor to obtain his signature on the change of contractor notice with no progress. I have also attached the three forms for the change of contractor notice with a credit card authorization to cover the cost. Please let me know if anything further is needed on our behalf. We are very eager to complete the work for the owner.

Thank you,

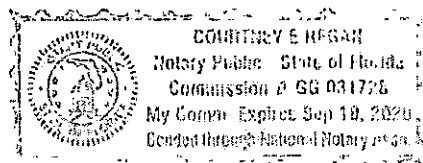
Maci Cook

Maci Cook – Service Department
Complete Electric, Inc.

STATE OF FLORIDA
County of INDIAN RIVER

Sworn to and subscribed before me this 24th day of June, 2020 by Maci Cook, who is personally known by me and did not take an oath.

Courney E. Pagan
Notary Public



BUILDING DIVISION
1801 27th Street, Vero Beach, FL 32960 772 226-1260

CHANGE OF CONTRACTOR NOTICE
(Owner Form)

I GROOVY PROPERTIES LLC, property owner of 403 21ST PLACE SE
(Owner name) (Property address)

Wish to change contractor's for permit # 2020020281

From ALAN WALTON, the qualifier for FLORIDA STATE ELECTRIC, INC.
(Contractor name) (Contractor Company)

To the new Contractor of record GARETT P. GUIDROZ who is
(Contractor name)

The qualifier for COMPLETE ELECTRIC, INC.
(Contractor's Company)

[Signature] 5/21/2020
(Owner signature) (Date)

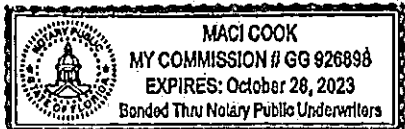
GREGORY FALK
(Owner Printed Name)

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

The foregoing instrument was acknowledged before me this 21ST day of MAY 2020
by GREGORY FALK who:

Is personally known by me- OR-
 Produced as identification: PA DL # 18 958 586
Type and number of identification

[Signature]
Notary Public: State of Florida





CHANGE OF CONTRACTOR NOTICE
(New Contractor Form)

I GARETT P. GUIDROZ, the qualifier for COMPLETE ELECTRIC, INC.
(Contractor name) (Contractor Company)

whose comp card/license # is EC0001911, am the new Contractor of
record for Permit # 2020020281 located at 403 21ST PLACE SE
(Address)

[Handwritten Signature] 5/21/2020
(Contractor signature) (Date)

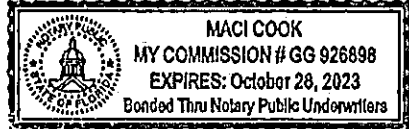
GARETT GUIDROZ
(Name Printed)

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

The foregoing instrument was acknowledged before me this 21ST day of MAY 20 20
by GARETT GUIDROZ who:

[X] Is personally known by me- OR-
Produced as identification:
Type and number of identification

[Handwritten Signature: Maci Cook]
Notary Public: State of Florida





INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION
1801 27th Street, Vero Beach, FL 32960 772 226-1260

CHANGE OF CONTRACTOR NOTICE
(Former/Original Contractor Form)

I ALAN WALTON, the qualifier for FLORIDA STATE ELECTRIC, INC.
(Contractor name) (Contractor Company)

am no longer the Contractor of record for Permit # 2020020281 located

at 403 21ST PLACE SE.
(Address)

(Contractor signature)

(Date)

ALAN WALTON
(Name Printed)

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

The foregoing instrument was acknowledged before me this ____ day of _____
20 20 by ALAN WALTON who:

Is personally known by me- OR-
Produced as identification:

Type and number of identification

Notary Public: State of Florida

INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION
1801 27th Street, Vero Beach, FL 32960 772 226-1260

Alan Walton
Florida State Electric
6901 NW CTC Parkway
Port St. Lucie, FL 34986

Mr. Walton,

Due to the inaction on your part
to complete the electrical work at my home
that you started, we will no longer need your
services at 403 21st PL SE, Vero Beach FL 32962

Please sign the change of contractor
notice and return to me at the address below.

This foregoing instrument
was acknowledged to me
on the 8th day of June
2020 by Gregory Falk who:
X produced DL as ID.

Sincerely,



Gregory S Falk
2170 W. Ridge Dr
Lone, Pa 17603
Tel: 468-7638

Maci Cook
Maci Cook



Maci Cook

From: Maci Cook
Sent: Friday, June 05, 2020 7:58 AM
To: 'floridastateele@gmail.com'
Subject: FW: CHANGE OF CONTRACTOR - 403 21ST PLACE SE, VERO BEACH, FL 32962
Attachments: FL STATE ELE CHANGE OF CONTRACTOR.pdf

Good Morning,

Please have the attached form filled out and return to me as soon as possible. This is the 4th attempt... We would really like to get this job going.

Thank you,

Maci Cook

Service Department
Complete Electric, Inc.
637 Sebastian Blvd.
Sebastian, FL 32958
(772) 388-0533

From: Maci Cook
Sent: Thursday, May 28, 2020 11:41 AM
To: 'floridastateele@gmail.com' <floridastateele@gmail.com>
Subject: FW: CHANGE OF CONTRACTOR - 403 21ST PLACE SE, VERO BEACH, FL 32962

Good Morning,

Please have the attached form filled out and return to me as soon as possible. We would really like to get this job going.
Thank you.

Maci Cook

Service Department
Complete Electric, Inc.
637 Sebastian Blvd.
Sebastian, FL 32958
(772) 388-0533

From: Maci Cook
Sent: Thursday, May 21, 2020 3:46 PM
To: 'floridastateele@gmail.com' <floridastateele@gmail.com>
Subject: FW: CHANGE OF CONTRACTOR - 403 21ST PLACE SE, VERO BEACH, FL 32962

Good Afternoon,

Please confirm receipt of this email and change of contractor form.

Thank you.

Maci Cook

Service Department
Complete Electric, Inc.
637 Sebastian Blvd.
Sebastian, FL 32958
(772) 388-0533

From: Maci Cook

Sent: Wednesday, May 20, 2020 4:04 PM

To: 'floridastateele@gmail.com' <floridastateele@gmail.com>

Subject: CHANGE OF CONTRACTOR - 403 21ST PLACE SE, VERO BEACH, FL 32962

Good Afternoon,

Per our discussion on the phone, Mr. Falk has requested a change of contractor for the above referenced address. Please fill out the attached form and email back to me as soon as possible.

Thank you.

Maci Cook

Service Department
Complete Electric, Inc.
637 Sebastian Blvd.
Sebastian, FL 32958
(772) 388-0533

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com[®]

PORT SAINT LUCIE FL 34986 USE

Certified Mail Fee	\$3.55
Extra Services & Fees (check box; add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00
Postage	\$0.55
Total Postage and Fees	\$6.95

0459
02
Postmark
Here
06/08/2020

Sent To Alan Walton
Street and Apt. No. or PO Box No. 6921 NW LTC Parkway
City, State, ZIP+4[®] Port St. Lucie, FL 34986

PS Form 3800, April 2015 PSN 7530-02-000-90-7

See Reverse for Instructions

7020 0090 0001 7985 1614

ALERT: DUE TO LIMITED TRANSPORTATION AVAILABILITY AS A RESULT OF NATIONWIDE CO...



FAQs >

Track Another Package +

Tracking Number: 70200090000179851614

Remove X

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

In-Transit

June 23, 2020
In Transit to Next Facility

Get Updates v

Feedback

Text & Email Updates



Tracking History



June 23, 2020

In Transit to Next Facility

Your package is moving within the USPS network and is on track to be delivered to its final destination. It is currently in transit to the next facility.

June 22, 2020, 1:38 pm

Arrived at USPS Regional Destination Facility
MIAMI FL DISTRIBUTION CENTER

June 18, 2020, 12:06 am
Departed USPS Regional Destination Facility
WEST PALM BEACH FL DISTRIBUTION CENTER

June 17, 2020, 4:38 pm
Arrived at USPS Regional Destination Facility
WEST PALM BEACH FL DISTRIBUTION CENTER

June 16, 2020, 6:58 pm
Departed USPS Regional Destination Facility
MIAMI FL DISTRIBUTION CENTER

June 13, 2020, 2:00 pm
Arrived at USPS Regional Destination Facility
MIAMI FL DISTRIBUTION CENTER

June 10, 2020, 12:44 pm
Forwarded
PORT SAINT LUCIE, FL

June 9, 2020, 11:43 pm
Departed USPS Regional Destination Facility
WEST PALM BEACH FL DISTRIBUTION CENTER

June 9, 2020, 9:56 am
Arrived at USPS Regional Destination Facility
WEST PALM BEACH FL DISTRIBUTION CENTER

June 8, 2020, 11:51 pm
Arrived at USPS Regional Facility
ORLANDO FL DISTRIBUTION CENTER

June 8, 2020, 4:41 pm
Departed Post Office
WABASSO, FL 32970

June 8, 2020, 12:54 pm
USPS in possession of item
WABASSO, FL 32970

Feedback

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT

Confirm. #: 592

BRADD RESIDENTIAL ADDITION/ALTERATION

PERMIT #: 2018021252 PERMIT TYPE: BRADD ISSUED DATE: 04/24/2018 BY: BLDLK

JOB DESCRIPTION: ADDING 10X 19 CARPORT AND ENCLOSE TO GARAGE

JOB ADDRESS: 403 21ST PL SE

BLOCK: 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N

OWNER NAME: GROOVY PROPERTIES LLC JURISDICTION: IRC

FLOOD ZONE: X FLOOD ELEV: U FLOOD MAP: 378H INSP AREA:

PROJECT:

APPLICANT: SCHLITT, MICHAEL TYPE: CONTRACTOR JOB PHONE: (772)567-1553

DBA: MICHAEL SCHLITT CONSTRUCTION CORP CERT NBR: 1190 JOB FAX: (772)567-1553

SETBACKS FRONT: REAR: LEFT: RIGHT:

FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.

SQFT: 0 JOB VALUE: \$ 34,000.00 #UNITS: #FLOORS: #BLDGs:

TIFF #: ROW NBR: PLAN NBR:

ADDITIONAL INFO:

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www.irccgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Owner/Contractor

Date

Print Name

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KSM

KELLER, SCHLEICHER & MacWILLIAM ENGINEERING AND TESTING, INC.
MARTIN (772) 337-7755 P.O. BOX 78-1377, SEBASTIAN, FL 32978-1377 SEBASTIAN (772) 589-0712
PALM BEACH (561) 845-7445 www.ksmengineering.net MELBOURNE (321) 768-8488
FAX (561) 845-8876 E-Mail: KSM@KSMENGINEERING.NET ST. LUCIE (772) 229-9093
C.A.: 5693 FAX (772) 589-6469

May 1, 2018

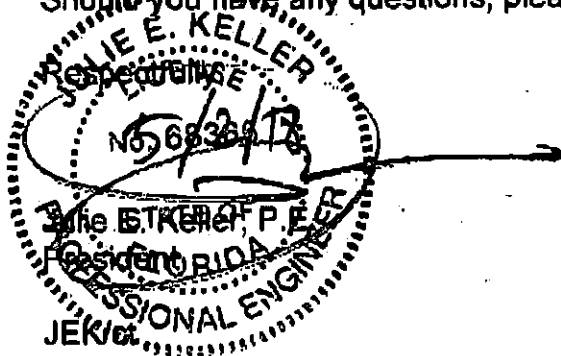
Michael Schlitt Construction
1708 Old Dixie Highway
Suite #101
Vero Beach, Florida 32960

Re: **Falk Residence**
403 21st Place SE
Vero Beach, Florida
Permit #: 2018021252
KSM Project #: 181472-1d

Dear Mr. Schlitt:

Enclosed, please find the nuclear density test results performed on the garage addition at the above referenced project.

Should you have any questions, please feel free to contact our office.



E-mail to: mschcon@yahoo.com
Fax to: Indian River County Building Department

KSM

KELLER, SCHLEICHER & MacWILLIAM ENGINEERING AND TESTING, INC.
 MARTIN (772) 337-7755 P.O. BOX 78-1377, SEBASTIAN, FL 32978-1377 SEBASTIAN (772) 589-0712
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 FAX (561) 845-8876 E-Mail: KSM@KSMENGINEERING.NET ST. LUCIE (772) 229-9093
 C.A.: 5693 FAX (772) 589-6469

SOIL COMPACTION REPORT ASTM D 1557 and ASTM D 2922

DATE TESTED: April 30th, 2018 KSM JOB #: 181472-1d/MR/ct
 PERMIT #: 2018021252
 CONTRACTOR: Michael Schlitt Construction
 JOB LOCATION: Falk Residence
 403 21st Place SE
 Vero Beach, Florida
 MATERIAL: Light Brown Sand with Some Shell and Clay
 ITEM TESTED: Garage Addition

TEST LOCATION OF SAMPLE	DEPTH	MOIS- TURE	PEN READ	DRY DENSITY	MAX. DRY PROCTOR VALUE	PERCENT COMPACTION
1. South	0" - 12"	14.7	47	109.3	111.7	97.9
2. East	"	"	46	108.1	"	96.8
3. North	"	"	46	108.0	"	96.7

KSM

KELLER, SCHLEICHER & MacWILLIAM ENGINEERING AND TESTING, INC.
 MARTIN (772) 337-7755 P.O. BOX 78-1377, SEBASTIAN, FL 32978-1377 SEBASTIAN (772) 589-0712
 PALM BEACH (561) 845-7445 www.ksmengineering.net MELBOURNE (321) 768-8488
 FAX (561) 845-8876 E-Mail: KSM@KSMENGINEERING.NET ST. LUCIE (772) 229-9093
 C.A.: 5693 FAX (772) 589-6469

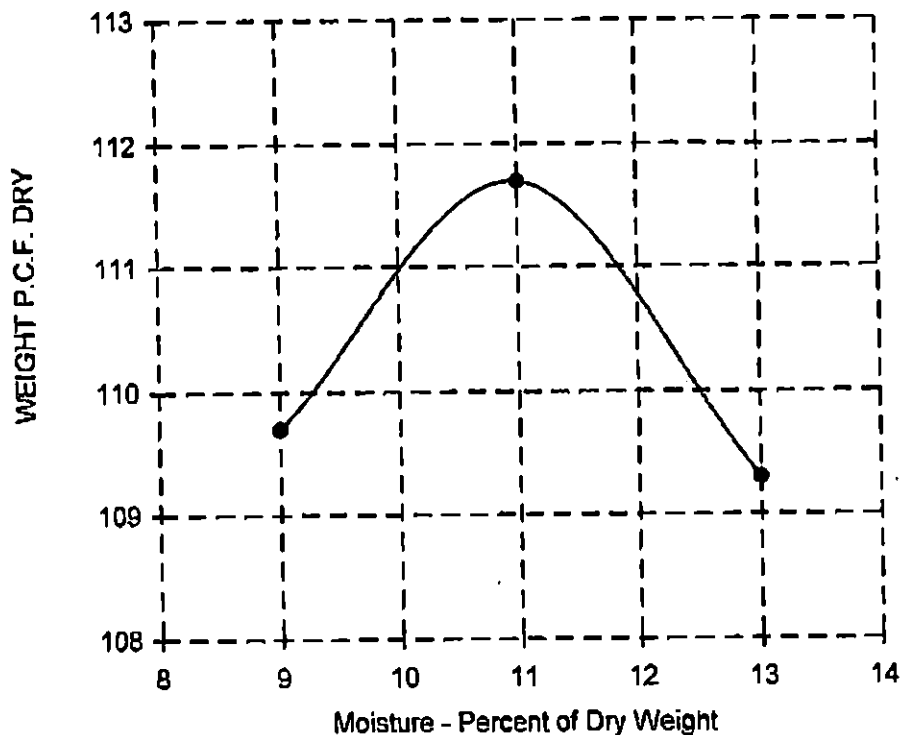
MOISTURE-DENSITY RELATIONSHIP MODIFIED PROCTOR (ASTM D 1557)

DATE TESTED: April 30th, 2018 **KSM JOB #:** 181472-1p

PERMIT #: 2018021252

CONTRACTOR: Michael Schlitt Construction

JOB LOCATION: Falk Residence
 403 21st Place SE
 Vero Beach, Florida



Soil Description: Light Brown Sand with Some Shell and Clay

Max. Dry Density: 111.7 P.C.F.

Optimum Moisture: 11.0 Percent

Julie E. Keller, P.E.
 President



INDIAN RIVER COUNTY/CITY OF VERO BEACH

BUILDING DIVISION

1801 27th Street, Vero Beach, FL 32960 772 226-1260

- Notes: 1. Please complete all fields. Incomplete forms will not be accepted or reviewed.
- 2. All permits must be in issue status at time of submission or they will be discarded.

FORM BOARD/STEM WALL SURVEY FORM

Form Board **Stem Wall

RECEIVED

MAY 21 2018

INDIAN RIVER COUNTY
BUILDING DEPARTMENT

**If the top of the stem wall is also the F.F.E. for the top of slab/finish floor, it must be clearly indicated on the survey.

F.F.E must be indicated on all form board surveys and if the stem wall survey is used as both building location and F.F.E.

Date: 5/21/18
 Permit #: 2018021252
 Address: 403 21st Pl. SE

Contractor Information:

Company/Qualifier name: Michael Schlitt Construction
 License #: CG0047522 Contact person: Ashley
 Office #: call cell Cell #: 633-5051 Fax #: 567-1553
 (Check one): Residential Commercial Multi-Family
 (Check one): Indian River County City of Vero Beach

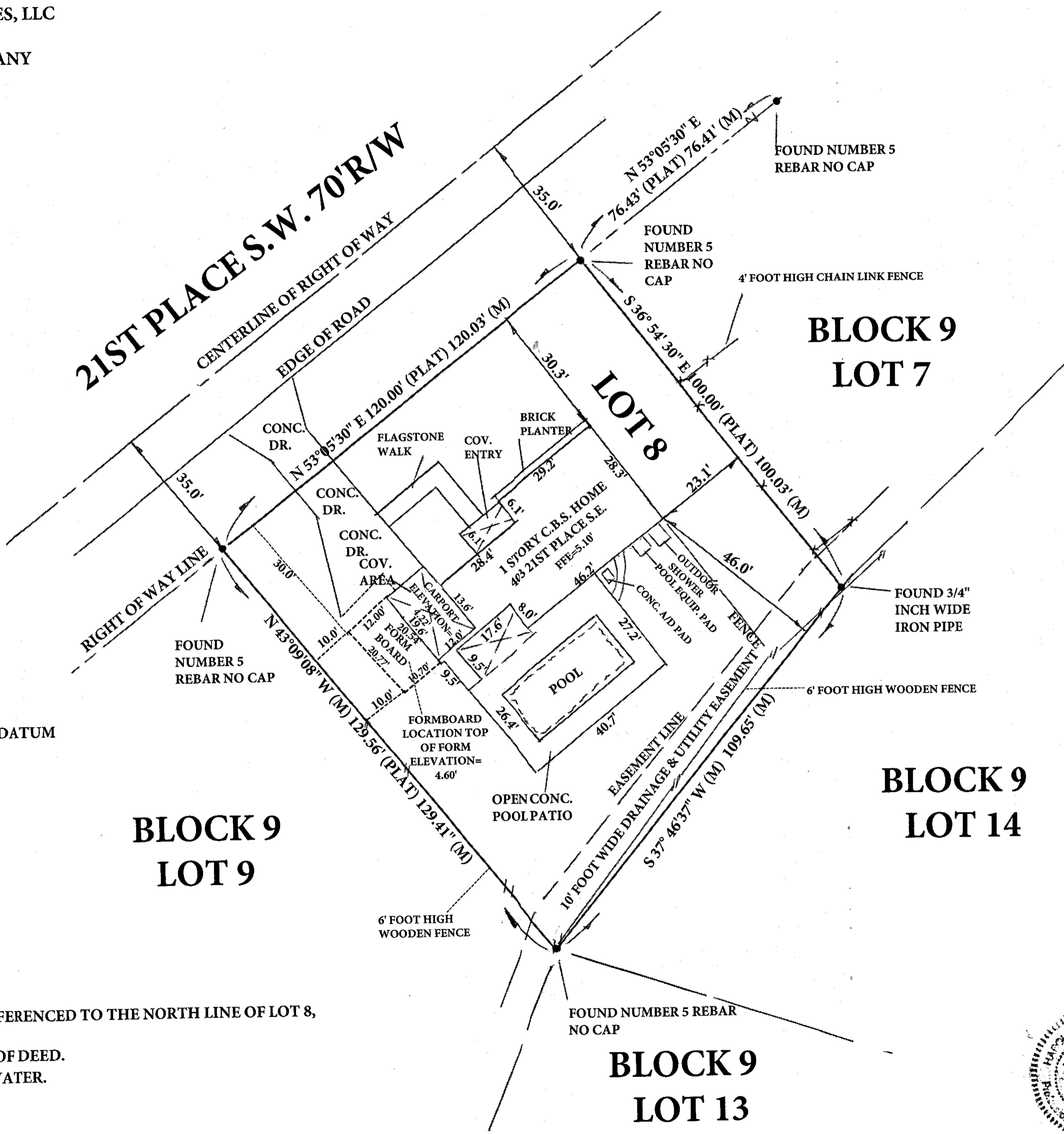
For Office Use Only

Reviewed by: _____ Date: _____
 Results: Approved Rejected

Notes: _____

Contacted: _____ Date: _____

CERTIFIED TO: GROOVY PROPERTIES, LLC
 STEWART TITLE COMPANY
 STEWART TITLE GUARANTY COMPANY



LEGEND

- IP = IRON PIPE
- C.M. = CONCRETE MONUMENT
- P.R.M. = PERMANENT REFERENCE MONUMENT
- P.C.P. = PERMANENT CONTROL POINT
- P.O.B. = POINT OF BEGINNING
- D.W. = DRIVEWAY
- R/W = RIGHT-OF-WAY
- ST = SEPTIC TANK
- DF = DRAIN FIELD
- PP = POWER POLE
- PL = PROPERTY LINE
- CL = CENTER LINE
- F.F.E. = FINISH FLOOR ELEVATION
- EL. = ELEVATION
- E.O.W. = EDGE OF WATER
- M.H.W.L. = MEAN HIGH WATER LINE
- C.C.C.L. = COASTAL CONSTRUCTION CONTROL LINE
- M.H. = MANHOLE
- (P) = PLAT DATA
- (L) = LEGAL DATA
- (M) = MEASURED DATA
- SEC. = SECTION
- TWP. = TOWNSHIP
- RGE. = RANGE
- B.M. = BENCHMARK
- R. = RADIUS
- L. = LENGTH
- A. = CENTRAL ANGLE
- C. = CHORD
- C. BRG. = CHORD BEARING
- FB. = FIELD BOOK
- PG. = PAGE
- P.T. = POINT OF TANGENT
- P.C. = POINT OF CURVE
- P.R.C. = POINT OF REVERSE CURVE
- P.O.C. = POINT OF CURVE
- P.C.C. = POINT OF COMPOUND CURVE
- STA. = STATION
- FND. = FOUND
- E.O.P. = EDGE OF PAVEMENT
- B.O.C. = BACK OF CURVE

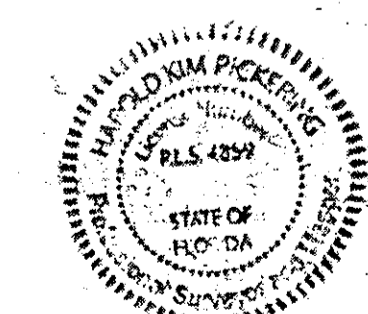
ALL ELEVATION'S SHOWN ARE IN 88 NAVD DATUM
 BEHNCHMARK UTILIZED IS IRBM-249003

NO TITLE SEARCH, TITLE OPINION, OR
 ABSTRACT, WAS PERFORMED BY, NOR
 FURNISHED TO THIS FIRM FOR THE
 SUBJECT PROPERTY. THERE MAY BE
 EASEMENTS, RIGHT-OF-WAYS, OR
 UNRECORDED DEEDS WHICH MAY
 EFFECT SUBJECT PROPERTY.

F.E.M.A.
 FLOOD ZONE X
 C-P # 12061C0378H
 EFFECTIVE DATE: 12-4-12

SURVEYORS CERTIFICATE
 I, H. KIM PICKERING DO HEREBY CERTIFY THAT I AM A DULY
 LICENSED AND PRACTICING REGISTERED LAND SURVEYOR IN THE
 STATE OF FLORIDA; THAT THIS SKETCH OF SURVEY MEETS THE
 MINIMUM TECHNICAL STANDARDS FOR A SURVEY AS SET FORTH BY
 THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS,
 PURSUANT TO FLORIDA ADMINISTRATIVE CODE CHAPTER 6J-17,
 AND THAT UNDER MY SUPERVISION DID MAKE A SURVEY OF:
 LOT 9 BLOCK 9

5/21/18



VERO SHORES UNIT ONE
 AS SHOWN IN THE PUBLIC RECORDS OF INDIAN RIVER COUNTY, FLORIDA,
 AT PLAT BOOK 5, PAGE 52, AND THAT SAID SURVEY WAS
 ACTUALLY MADE ON THE GROUND PER THE DESCRIPTION AND IS
 CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

H. Kim Pickering 1/23/18

H. KIM PICKERING REG. LAND SURVEYOR NO. 4859
 THIS SURVEY IS NOT VALID WITHOUT EMBOSSED SEAL.

- NOTES: 1. THE BEARINGS AS SHOWN ARE REFERENCED TO THE NORTH LINE OF LOT 8,
 BEARING, N 53°05'30" E, PER RECORD PLAT.
 2. SURVEY PERFORMED WITHOUT BENEFIT OF DEED.
 3. PROPERTY SERVICED WITH MUNICIPAL WATER.

REV.	DATE	DESCRIPTION	BY	F.P. & PG.	TASK NO.	DATE OF FIELD WORK
	5/21/18	FORMBOARD SURVEY	TP	FILE		5/21/18
	1/23/18	RECORD SURVEY	TP	FILE		1/23/18

DRAWN	CHK'D
TJP	HKP
SCALE	DATE
1"=20'	1/23/18

**FORMBOARD: SURVEY FOR
 GROOVY PROPERTIES, LLC**

PICKERING & ASSOCIATES
 PROFESSIONAL LAND SURVEYING
 612 HOLLY ROAD
 VERO BEACH, FL 32963
 Ph: 772-231-9323 Cell: 772-480-2349
 E-mail: pickeringassoc@aim.com

DRAWING/JOB #	14-178
SHEET	1
OF	1

INDIAN RIVER COUNTY BUILDING DIVISION
1801 27TH STREET VERO BEACH, FL 32960

PERMIT

Confirm. #: 636



202

ELR ELECTRICAL RESIDENTIAL

PERMIT #: **2020020281** PERMIT TYPE: ELR ISSUED DATE: 02/06/2020 BY: BLD CR

JOB DESCRIPTION: UPGRADE 100AMP EXISTING METER W/ 200 AMP OVERHEAD METER MAIN FEED POOL HEA

JOB ADDRESS 403 21ST PL SE

BLOCK 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N

OWNER NAME: GROOVY PROPERTIES LLC JURISDICTION: IRC

FLOOD ZONE X FLOOD ELEV: U FLOOD MAP: 378H,390 INSP AREA:

PROJECT

APPLICANT: GUIDROZ, GARETT, PETE TYPE: CONTRACTOR JOB PHONE:(772)388-0533

DBA: COMPLETE ELECTRIC, INC. CERT NBR: 9889 JOB FAX: (772)388-2411

SETBACKS FRONT: REAR: LEFT: RIGHT:

FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.

SQFT: JOB VALUE: \$ 1,200.00 #UNITS: #FLOORS #BLDGS:

TIFF #: ROW NBR PLAN NBR:

ADDITIONAL INFO:

6/24/2020 BLDMP - change of contractor (ok per S.M) previous contractor FLORIDA STATE ELECTRIC INC - CERT 19340 - ALAN WALTON

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work has commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at: www.ircgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Owner/Contractor

Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.



INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION
1801 27th Street, Vero Beach, FL 32960 772-226-1260

ELECTRICAL SERVICE CHANGE AFFIDAVIT

RECEIVED
JUN 25 2020
INDIAN RIVER COUNTY
BUILDING DEPARTMENT

Building Permit Number: 2020020281
Job Address: 403 21ST PLACE SE, VERO BEACH, FL 32962
Electrical Contractor: COMPLETE ELECTRIC, INC.
Qualifier: GARETT P. GUIDROZ
License Number: EC0001911

I, GARETT P. GUIDROZ, DO HEREBY AFFIRM:
Print qualifier name

That I take full responsibility for the electrical work performed under the above permit. I also affirm that I have read and understand the "ELECTRICAL SERVICE CHANGE PROCEDURES FOR ELECTRICAL CONTRACTORS" and agree to fully abide by them. All work will be performed to the requirements of the NATIONAL ELECTRICAL CODE and the FLORIDA BUILDING CODE (latest edition).

I further understand that:

This procedure is a privilege being granted to licensed Electrical Contractors only and may be revoked by the Authority Having Jurisdiction at anytime for just cause.

By signing the enclosed affidavit, the Electrical Contractor is taking full responsibility for the work performed.

IF ANY UNSAFE OR POTENTIALLY LIFE THREATENING DEFICIENCIES ARE FOUND AT INSPECTION THE INSPECTOR WILL NOTIFY THE UTILITY FOR IMMEDIATE DISCONNECTION AND YOUR PRIVILEGES WILL BE REVOKED!

[Signature]
Qualifier Signature
Date: 6/25/2020

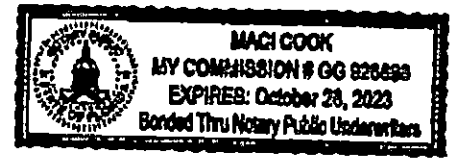
Sworn to and subscribed before me this 25TH day of JUNE, 20 20

By Maci Cook
Notary Public, State of Florida

Seal/Stamp

Personally known to me ✓

Produced Identification _____



PA/PLAN/SPR 12345678
RECEIVED
FEB 2018
APPL DATE 2/26/2018

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT APPLICATION

Confirm. #: 592

BRADD RESIDENTIAL ADDITION/ALTERATION

PERMIT #: 2018021252 PERMIT TYPE: BRADD ISSUED DATE: BY:

JOB DESCRIPTION: ADDING 10X 19 CARPORT AND ENCLOSE TO GARAGE

JOB ADDRESS: 403 21ST PL SE

BLOCK: 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N

OWNER NAME: GROOVY PROPERTIES LLC JURISDICTION: IRC

FLOOD ZONE: SEE MAP FLOOD ELEV.: FLOOD MAP: INSP AREA:

PROJECT

APPLICANT: SCHLITT, MICHAEL TYPE: CONTRACTOR JOB PHONE: (772)567-1553

DBA: MICHAEL SCHLITT CONSTRUCTION CORP CERT NBR: 1190 JOB FAX: (772)567-1553

SETBACKS FRONT: REAR: LEFT: RIGHT:

FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.

SQFT: 0 JOB VALUE: \$ 34,000.00 #UNITS: #FLOORS: #BLDGS:

TIFF #: ROW NBR: PLAN NBR:

ADDITIONAL INFO:

**BUILDING DEPT.
OFFICE COPY**

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work is commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at:
www.ircgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Owner/Contractor

Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.

FOUND NUMBER 5 REBAR NO CAP

4' FOOT HIGH CHAIN LINK FENCE

BLOCK 9 LOT 7

14-174

LOT 8

FOUND 3/4 INCH WID IRON PIPE

6' FOOT HIGH WOODEN FENCE

BLOCK LOT

S 36° 54' 30" E 100.00' (PLAT) 100.03' (M)

S 37° 46' 37" W (M) 109.65' (M) 10' FOOT WIDE DRAINAGE & UTILITY EASEMENT

APR 19 2018
HERRIN COUNTY BUILDING DIVISION

REMOVED

21ST PLACES S. CENTERLINE OF RIGHT OF WAY

EDGE OF ROAD

BRICK PLANTER

FLAGSTONE WALK

CONC. D.R.

CONC. D.R.

RIGHT OF WAY LINE

FOUND NUMBER 5 REBAR NO CAP

Garage/Carport/Pool
as 5-10' carport/garage
outside of all easements of

1 STORY C.B.S. HOME
403 21ST PLACES S.

OUTDOOR SHOWER
POOL EQUIP. PAD
CONC. AID PAD

POOL

OPEN CONC. POOL PATIO

R=20' Carport garage

New Garage

New Carport

BLOCK 9 LOT 9

6' FOOT HIGH



INDIAN RIVER COUNTY/CITY OF VERO BEACH
 BUILDING DIVISION
 1801 27th Street, Vero Beach, FL 32960 772-226-1260

Product Approval Affidavit Form

REVIEWED
 APR 19 2018
 INDIAN RIVER COUNTY
 BUILDING DIVISION

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information below. Product approval information can be obtained at the following sources:
https://floridabuilding.org/pr/pr_app_srch.aspx, http://www.miamidade.gov/building/pc-search_app.asp, or directly from the manufacturer.

This form can be incorporated on the plans or submitted as a separate form. In the event any of the listed products in this form change during construction revisions to this form will be required. The following information must be available on the jobsite for inspections:

1. This entire product approval form, stamped as "Reviewed" by Indian River County Plans Examiner.
2. Miami-Dade NOA or Florida product approval referenced in the product approval form.
3. A copy of the manufacturer's installation instructions, details and requirements for each product.

Permit Number: 2018021252 Address: 403 21st Pl SE Contractor/Applicant: Michael Schlitt Construction

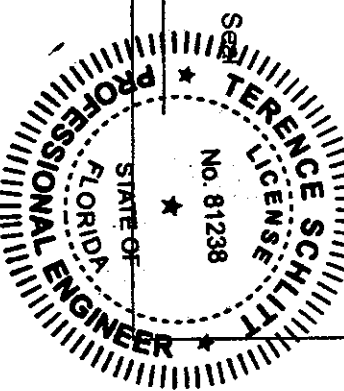
Category/Subcategory	Approval Number(s)	Manufacturer	Model Number	Building Design Pressures (+PSF) (-PSF)	Product Design Pressures (+PSF) (-PSF)
A. EXTERIOR DOORS					
1. Swinging	FL-5891.R5	Thermatru		+37 -35	+67 -67
2. Sliding					
3. Sectional					
4. Roll up garage	15-0225.16	Clopay	W7	+29 -33	+42 -48
5. Automatic					
6. Other					
B. WINDOWS					
1. Single hung					
2. Horizontal slider					
3. Casement					
4. Double hung					
5. Fixed					
6. Awning					
7. Pass-through					
8. Projected					
9. Mullion					
10. Other					
C. PANEL WALL					
1. Siding					
2. Soffits					
3. EIFS					
4. Storefronts					
5. Curtain walls					
6. Wall tower					

7. Glass block						
8. Other						
D. ROOFING PRODUCTS						
1. Asphalt shingles						
2. Underlayments						
3. Roofing fasteners						
4. Non-structural Metal RF						
5. Built-up roofing						
6. Modified bitumen	FL 1654-R22	Polyglass	585-A, ARSA	21	22	23
7. Single ply roofing sys				-40	-75	-84
8. Roofing tiles						-90
9. Roof tile adhesive						
10. Roofing insulation						
11. Wood shingles/shakes						
12. Roofing slate						
13. Liquid applied roof sys						
14. Cements-adhesives-coatings						
15. Spray applied polyurethane roof						
16. Other						
E. SHUTTERS						
1. Accordion						
2. Bahama						
3. Storm panels						
4. Colonial						
5. Roll-up						
6. Others						
F. SKYLIGHTS						
1. Skylight						
2. Other						

I have reviewed the above components or cladding and I have approved their use in this structure. These products provide adequate resistance to the wind loads and forces specified by current code provisions.

Name: Terence Schilt Signature: Terence Schilt
 Design Prof: FL PE 81238 Cert. No. CA 32295

Date: 4/8/18



Print

SHALL BE INSTALLED IN STRICT ACCORDANCE WITH THE SERVICE OF APPROVAL (MIAMI NOA OR FBC

S MUST WITHSTAND THE IMPACT OF WIND BORNE
TECTED WITH AN APPROVED IMPACT RESISTANT

ABEL WITH THE MANUFACTURER'S NAME AND
SHALL REMAIN UNTIL FINAL INSPECTION IS PASSED
NG JURISDICTION.

S USED AS FLASHING SHALL COMPLY WITH AAMA
XTEND PAST THE SURFACE OF THE EXTERIOR WALL

FRAMES AND BUCKS SHALL BE CHECKED FOR
SQUARE.

ON MANUFACTURERS ASSOCIATION) GUIDELINES
GS.

ORNERS OF OPENINGS WITH AN APPROVED

FLASHING TO ALL FOUR SIDES OF OPENINGS.
NTERRUPTED BEAD OF APPROVED SEALANT TO THE
ACHING TO THE OPENING PER WINDOW / DOOR

APPROVED FLASHING MATERIAL.
DOW AND APPLY BEAD OF APPROVED SEALANT

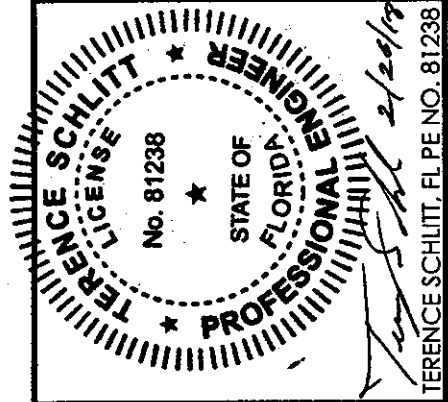
ESISTANT FLASHING SHALL BE APPLIED IN SHINGLE
PREVENT ENTRY OR PENETRATION OF WATER TO
L FRAMING COMPONENTS.

ID TO THE SURFACE OF THE EXTERIOR WALL FINISH.

ENC

1575 IND
VE

STRUC



REVIEWED

APR 19 2018

INDIAN RIVER COUNTY
BUILDING DIVISION

FALK ENCLOSE CARPORT

403 21ST PLACE SE

33403100005009000008.0

VERO BEACH FL

GENERAL
NOTES

S1

1

OF

2

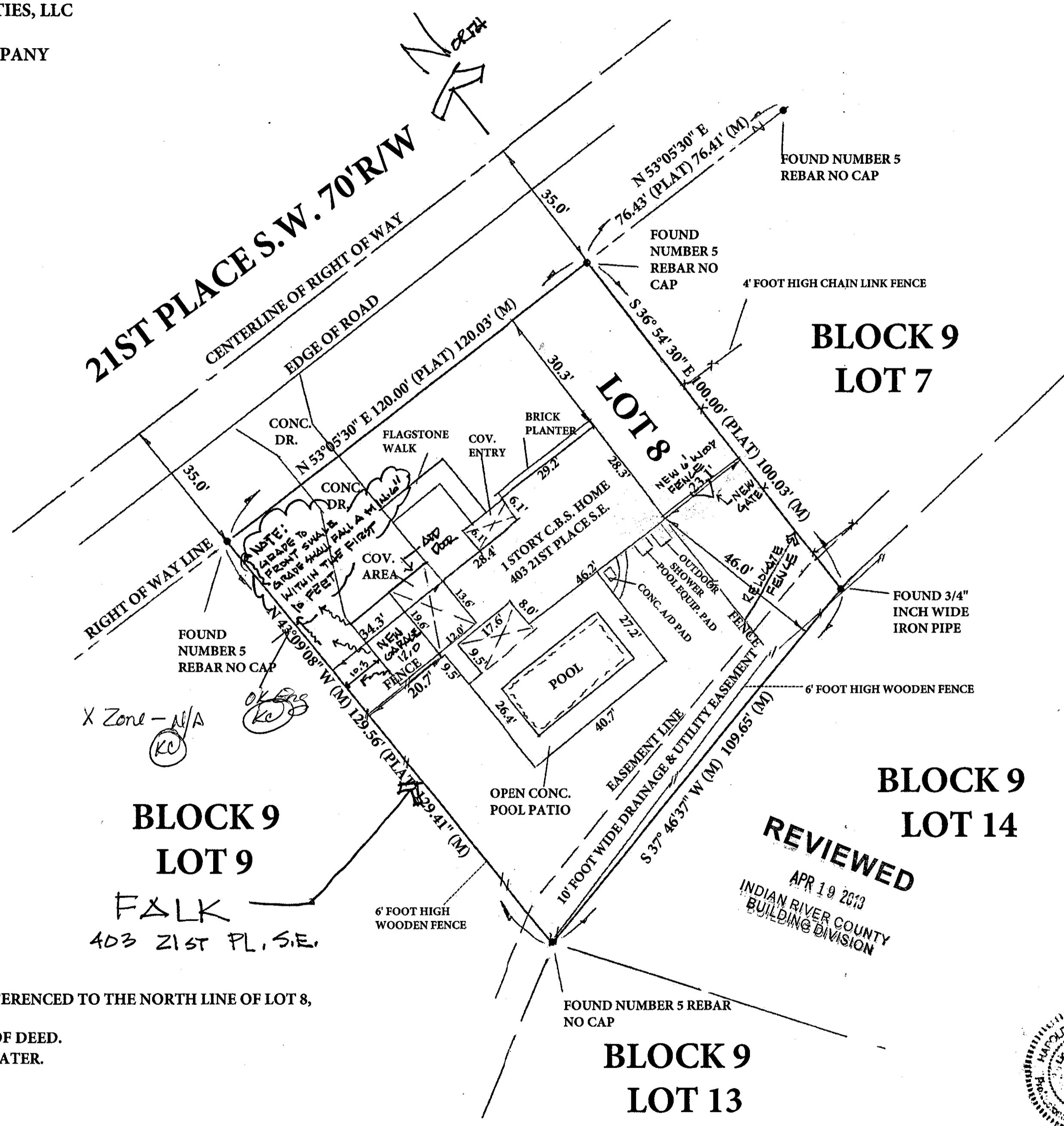
Florida Department of Health
Indian River County Environmental Health

Reviewed By: AR Hoffman Date 3/1/18

No Objection Approval

Site is on public water and
sewer

CERTIFIED TO: GROOVY PROPERTIES, LLC
 STEWART TITLE COMPANY
 STEWART TITLE GUARANTY COMPANY



- LEGEND**
- IP = IRON PIPE
 - C.M. = CONCRETE MONUMENT
 - P.R.M. = PERMANENT REFERENCE MONUMENT
 - P.C.P. = PERMANENT CONTROL POINT
 - P.O.B. = POINT OF BEGINNING
 - D.W. = DRIVEWAY
 - R.W. = RIGHT-OF-WAY
 - ST = SEPTIC TANK
 - D.F. = DRAIN FIELD
 - P.P. = POWER POLE
 - P.L. = PROPERTY LINE
 - C.L. = CENTER LINE
 - F.F.E. = FINISH FLOOR ELEVATION
 - EL. = ELEVATION
 - E.O.W. = EDGE OF WATER
 - M.H.W.L. = MEAN HIGH WATER LINE
 - C.C.C.L. = COASTAL CONSTRUCTION CONTROL LINE
 - M.H. = MANHOLE
 - (P) = PLAT DATA
 - (L) = LEGAL DATA
 - (M) = MEASURED DATA
 - SEC. = SECTION
 - TWP. = TOWNSHIP
 - RGE. = RANGE
 - B.M. = BENCHMARK
 - R = RADIUS
 - L = LENGTH
 - A = CENTRAL ANGLE
 - C = CHORD
 - C. BRG. = CHORD BEARING
 - F.B. = FIELD BOOK
 - PG. = PAGE
 - P.T. = POINT OF TANGENT
 - P.C. = POINT OF CURVE
 - P.R.C. = POINT OF REVERSE CURVE
 - P.O.C. = POINT ON CURVE
 - P.C.C. = POINT OF COMPOUND CURVE
 - STA. = STATION
 - FND. = FOUND
 - E.O.P. = EDGE OF PAVEMENT
 - B.O.C. = BACK OF CURVE

NO TITLE SEARCH, TITLE OPINION, OR ABSTRACT, WAS PERFORMED BY, NOR FURNISHED TO THIS FIRM FOR THE SUBJECT PROPERTY, THERE MAY BE EASEMENTS, RIGHT-OF-WAYS, OR UNRECORDED DEEDS WHICH MAY AFFECT SUBJECT PROPERTY.

F.E.M.A.
 FLOOD ZONE X
 C-P # 12061C0378H
 EFFECTIVE DATE: 12-4-12

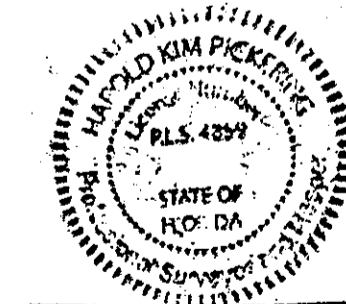
SURVEYORS CERTIFICATE
 I, H. KIM PICKERING DO HEREBY CERTIFY THAT I AM A DULY LICENSED AND PRACTICING REGISTERED LAND SURVEYOR IN THE STATE OF FLORIDA; THAT THIS SKETCH OF SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS FOR A SURVEY AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS, PURSUANT TO FLORIDA ADMINISTRATIVE CODE CHAPTER 61-17, AND THAT UNDER MY SUPERVISION DID MAKE A SURVEY OF:

LOT 5 BLOCK 9
 VERO SHORES UNIT ONE

AS SHOWN IN THE PUBLIC RECORDS OF INDIAN RIVER COUNTY, FLORIDA, AT PLAT BOOK 5, PAGE 52, AND THAT SAID SURVEY WAS ACTUALLY MADE ON THE GROUND PER THE DESCRIPTION AND IS CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

H. Kim Pickering 1/23/18

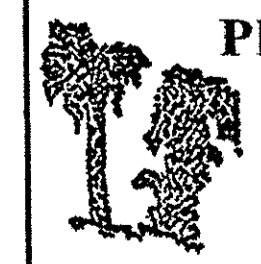
H. KIM PICKERING REG. LAND SURVEYOR NO. 4859
 THIS SURVEY IS NOT VALID WITHOUT EMBOSSED SEAL.



- NOTES:** 1. THE BEARINGS AS SHOWN ARE REFERENCED TO THE NORTH LINE OF LOT 8, BEARING, N 53°05'30" E, PER RECORD PLAT.
 2. SURVEY PERFORMED WITHOUT BENEFIT OF DEED.
 3. PROPERTY SERVICED WITH MUNICIPAL WATER.

REV.	DATE	DESCRIPTION	BY	F.P. & PG.	TASK NO.	DATE OF FIELD WORK
	1/23/18	RECORD SURVEY	TP	FILE		1/23/18

**RECORD SURVEY FOR
 GROOVY PROPERTIES, LLC**



PICKERING & ASSOCIATES
 PROFESSIONAL LAND SURVEYING
 612 HOLLY ROAD
 VERO BEACH, FL 32963
 Ph: 772-231-9323 Cell: 772-480-2349
 E-mail: pickeringassoc@aim.com

DRAWING/JOB #
14-178

SHEET OF
1 1

RECEIVED
 MAR 16 2018
 INDIAN RIVER COUNTY
 ENGINEERING DIVISION

ABBREVIATIONS:

A.B.	ANCHOR BOLT	MAS	MASONRY
AFF	ABOVE FINISHED FLOOR	MATL	MATERIAL
ADJ	ADJACENT	MAX	MAXIMUM
ARCH	ARCHITECTURAL	MECH	MECHANICAL
BLDG	BUILDING	MIN	MINIMUM
BM	BEAM	NTS	NOT TO SCALE
BOT	BOTTOM	OC	ON CENTER
BRG	BEARING	OPT	OPTIONAL
CJ	CONTROL JOINT	OSB	ORIENTED STRAND BOARD
CL	CENTERLINE	PLY	PLYWOOD
CMU	CONCRETE MASONRY UNIT	PSI	POUNDS PER SQUARE INCH
COL	COLUMN	PSF	POUNDS PER SQUARE FOOT
CONC	CONCRETE	PT	PRESSURE TREATED
COND	CONDITION	REINF	REINFORCEMENT
CONT	CONTINUOUS	REQD	REQUIRED
CONSTR	CONSTRUCTION	RO	ROUGH OPENING
CLG	CEILING	SCH	SCHEDULE
DBL	DOUBLE	SHTHG	SHEATHING
DIA	DIAMETER	SIM	SIMILAR
DR	DOOR	SP	SOUTHER YELLOW PINE
DWG	DRAWING	SPF	SPRUCE PINE FIR
EA	EACH	STL	STEEL
EJ	EXPANSION JOINT	STR	STRUCTURAL
ELECT	ELECTRICAL	SGD	SLIDING GLASS DOOR
FOR	ENGINEER OF RECORD	SQ	SQUARE
EQUIP	EQUIPMENT	T & G	TONGUE AND GROOVE
EXP	EXPANSION	TYP	TYPICAL
FT	FOOT / FEET	UNO	UNLESS OTHERWISE NOTED
GA	GAUGE	VERT	VERTICAL
GC	GENERAL CONTRACTOR	W/	WITH
GYP	GYPSUM	WIC	WALK IN CLOSET
HGT	HEIGHT	WD	WOOD
HORIZ	HORIZONTAL	WWF	WELDED WIRE FABRIC
HB	HOSE BIB	W/O	WITHOUT
INS	INSULATION	WDW	WINDOW
KSI	KIPS PER SQUARE INCH		

GENERAL NOTES:

- DESIGN CODE**
 - TO THE BEST OF THE DESIGN PROFESSIONALS KNOWLEDGE, THESE DOCUMENTS HAVE BEEN PREPARED WITH AND ARE IN COMPLIANCE WITH THE APPLICABLE MINIMUM BUILDING CODES AND THE APPLICABLE FIRE SAFETY STANDARDS AS DETERMINED BY THE LOCAL AUTHORITY IN ACCORDANCE WITH CHAPTERS 553 AND 633 OF THE FLORIDA STATUTES. THESE DOCUMENTS MEET OR EXCEED THE REQUIREMENTS OF:
 - 2017 FLORIDA BUILDING CODE, FIFTH EDITION, RESIDENTIAL.
 - 2014 NATIONAL ELECTRIC CODE.
- DESIGN CRITERIA**
 - ALL CONCRETE WORK SHALL BE IN ACCORDANCE WITH AMERICAN CONCRETE INSTITUTE (ACI) 318 AND 332.
 - ALL MASONRY WORK SHALL BE IN ACCORDANCE WITH ACI 530/530.1: AMERICAN SOCIETY OF CIVIL ENGINEERS (ASCE); TMS 402.
 - REINFORCING STEEL SHALL BE IN ACCORDANCE WITH ACI 318.
 - ALL WOOD FRAMING SHALL BE IN ACCORDANCE WITH THE LATEST EDITIONS LISTED IN THE FLORIDA BUILDING CODE OF THE FOLLOWING REFERENCED DOCUMENTS:
 - NATIONAL DESIGN SPECIFICATIONS (NDS) FOR WOOD CONSTRUCTION BY THE AMERICAN WOOD FOREST AND PAPER ASSOCIATION (AFPA)
 - TIMBER CONSTRUCTION MANUAL BY THE AMERICAN INSTITUTE OF TIMBER CONSTRUCTION
 - NATIONAL DESIGN STANDARD FOR METAL PLATE CONNECTED WOOD TRUSSES (ANSI-TPI-1 BY TRUSS PLATE INSTITUTE (TPI))
 - GUIDE TO WOOD PRACTICE FOR HANDLING INSTALLING AND BRACING OF METAL PLATE CONNECTED WOOD TRUSSES (BCSI 1: BY TPI AND WTCA)
 - ROOF AND WALL SHEATHING SHALL BE IN ACCORDANCE WITH APA PS1-95 OR NER-108D.
 - AMERICAN WOOD PROTECTION ASSOCIATION STANDARDS.
- DESIGN LOADS**
 - ROOF DEAD LOAD: 15 PSF (ASPHALT)
 - ROOF LIVE LOAD: 20 PSF
 - DEAD LOAD FOR UPLIFT CALCULATION: 10 PSF (ASPHALT)
- STRUCTURE SPECIFICATIONS**
 - BUILDING OCCUPANCY CATEGORY: II
 - CONSTRUCTION TYPE: V-B
 - OCCUPANCY CLASSIFICATION: R-3
 - WIND SPEED
 - ULTIMATE (LRFD) = 160 MPH
 - ALLOWABLE (ASD) = 124 MPH
 - WIND EXPOSURE CATEGORY: C
 - ENCLOSURE CLASSIFICATION: ENCLOSED
 - INTERNAL PRESSURE COEFFICIENT: +/-0.18
 - WIND-BORNE DEBRIS AREA: YES
 - REFER TO DRAWINGS FOR STRUCTURE HEIGHT AND AREA
 - STRUCTURAL LOADS AND DESIGN PRESSURES LISTED IN THESE PLANS ARE SHOWN IN ALLOWABLE (ASD) UNLESS NOTED OTHERWISE.
- PRODUCT APPROVAL AFFIDAVIT**
 - I HAVE REVIEWED THE COMPONENTS AND CLADDING LISTED ON THE ATTACHED TABLE AND I HAVE APPROVED THEIR USE IN THIS STRUCTURE. THESE PRODUCTS PROVIDE ADEQUATE RESISTANCE TO THE WIND LOADS AND FORCES SPECIFIED BY CURRENT CODE PROVISIONS.

5. PROJECT REQUIREMENTS:

- THE CONTRACTOR AND SUB-CONTRACTORS SHALL STRICTLY ADHERE TO ALL APPLICABLE CODES DURING THE COURSE OF CONSTRUCTION, INCLUDING ALL STATE, CITY AND COUNTY BUILDING, ZONING, ELECTRICAL, MECHANICAL, PLUMBING AND FIRE CODES, AS WELL AS ANY APPLICABLE HOMEOWNER ASSOCIATION REQUIREMENTS.
- THE CONTRACTOR SHALL VERIFY ALL DIMENSIONS IN THE FIELD AND SHALL NOTIFY THE DESIGN PROFESSIONAL OF RECORD OF ANY DISCREPANCIES OR CONFLICT WITH APPLICABLE CODES PRIOR TO CONSTRUCTION.
- THE ARCHITECT / ENGINEER SHALL NOT BE RESPONSIBLE FOR SAFETY PROCEDURES, THE MEANS AND METHODS OF CONSTRUCTION, TECHNOLOGIES OR THE FAILURE OF THE CONTRACTOR TO COMPLETE THE WORK IN ACCORDANCE WITH DRAWINGS, SPECIFICATIONS OR THE RELATED CODES.
- THE CONTRACTOR SHALL FULLY REVIEW ALL ITEMS CONTAINED IN THE DRAWINGS AND SHALL COORDINATE ALL DIMENSIONS, LOCATE DEPRESSED SLABS, SLOPES, DRAINS, OUTLETS, RECESSES, EMBEDS, SLEEVES, ECT. IT IS THE RESPONSIBILITY OF THE CONTRACTOR TO DETERMINE THE ERECTION PROCEDURES AND SEQUENCING. THE GENERAL CONTRACTOR IS RESPONSIBLE FOR HIRING A DESIGN PROFESSIONAL FOR TEMPORARY SHORING OR LIFTING PROGRAMS.
- NOTES, DETAILS, AND SECTIONS ON THE DRAWINGS ARE SHOWN AT SPECIFIC LOCATIONS AND ARE INTENDED TO SHOW GENERAL REQUIREMENTS THROUGHOUT. "TYPICAL" DETAILS SIMPLY REFER TO ALL CONDITIONS TREATED SIMILARLY. CONTRACTOR SHALL MAKE MINOR MODIFICATIONS TO ACCOMMODATE MINOR SIMILAR VARIATIONS.
- THE CONTRACTOR SHALL MAKE NO STRUCTURAL CHANGES OR MODIFICATIONS WITHOUT EXPRESSED WRITTEN APPROVAL OF THE ENGINEER OF RECORD IN ADVANCE.
- TERMITE PROTECTION SHALL BE PROVIDED BY REGISTERED TERMITICIDES, INCLUDING SOIL APPLIED PESTICIDES BAITING SYSTEMS, AND/OR PESTICIDES APPLIED TO WOOD OR OTHER APPROVED METHODS.

SITE WORK:

- SOIL**
 - IF THE SOILS REPORT IS NOT AVAILABLE, SOIL BEARING CAPACITY IS ASSUMED TO BE A MINIMUM OF 1,800 PSF.
 - CONTRACTOR SHALL VERIFY COMPACTION REQUIREMENTS PRIOR TO THE EXECUTION OF WORK. DISCREPANCIES SHALL BE BROUGHT TO THE ATTENTION OF THE DESIGN PROFESSIONAL PRIOR TO COMMENCEMENT OF WORK.
 - FOOTINGS SHALL BE PLACED ON UNDISTURBED SOIL OR COMPACTED FILL, FREE OR ORGANIC MATTER AND COMPACTED TO 95% OF THE MODIFIED PROCTOR, UNLESS OTHERWISE NOTED IN THE GEOTECHNICAL REPORT.
 - THE SOILS WITHIN 5 FEET OF THE PROPOSED BUILDING PAD SHALL BE FREE OF ANY WOOD, VEGETATION, STUMPS, CARDBOARD, TRASH, OR OTHER DELETERIOUS MATERIAL.

CONCRETE:

- CONCRETE**
 - ALL WORK SHALL BE MIXED, PLACED, AND CURED IN ACCORDANCE WITH THE AMERICAN CONCRETE INSTITUTE ACI 318.
 - CONCRETE SHALL HAVE THE FOLLOWING SPECIFICATIONS UNLESS NOTED OTHERWISE:

AREA	STRENGTH (PSI)	SLUMP	AGGREGATE SIZE
FOOTERS/SLAB	2,500 PSI (7 DAYS)	4"-6"	3/4" - 2"
 - MATERIAL FOR CONCRETE SHALL CONFORM TO THE FOLLOWING:
 - PORTLAND CEMENT - ASTM C150
 - AGGREGATES:
 - COURSE AGGREGATE: ASTM C33
 - LIGHTWEIGHT: ASTM C330
 - FINE: ASTM C33
 - WATER SHALL BE FREE OF CONTAMINANTS, CLEAN AND POTABLE.
- REINFORCING**
 - REINFORCING SHALL HAVE GRADE IDENTIFICATION MARKS AND SHALL CONFORM TO ASTM A615, GRADE 60.
 - REINFORCING SHALL BE FREE OF RUST, SCALE OR OTHER BOND REDUCING COATINGS.
 - REINFORCING SHALL BE PLACED IN CONCRETE TO PROVIDE MINIMUM COVERAGE IN ACCORDANCE WITH ACI 318 OR AS INDICATED IN THE DRAWINGS.
 - CONCRETE CAST AGAINST AND PERMANENTLY EXPOSED TO EARTH - 3"
 - CONCRETE EXPOSED TO EARTH OR WEATHER - 1.5"
 - CONCRETE NOT EXPOSED TO WEATHER OR IN CONTACT WITH GROUND - 3/4"
 - MINIMUM LAP SPICE SHALL BE 27" UNLESS NOTED OTHERWISE.

3. PLACEMENT AND FINISHING

- ALL CONCRETE PLACED UNDER ROOF PROTECTION SHALL BE PLACED OVER 6 MIL POLYETHYLENE VAPOR BARRIER, LAPPED 8 INCHES MINIMUM WITH ALL SEAMS TAPED UNLESS NOTED OTHERWISE.
- PLACE ALL EMBEDDED ITEMS (ANCHOR BOLTS, DOWELS, ECT.) IMMEDIATELY PRIOR TO PLACEMENT OF CONCRETE OR DURING CONCRETE OPERATIONS. PROTECT ALL CONCRETE FROM DAMAGE AFTER PLACEMENT.
- CONSOLIDATE CONCRETE THOROUGHLY DURING CONCRETE OPERATIONS.
- CURE CONCRETE FOR THREE DAYS TO MINIMIZE SHRINKAGE CRACKS.

	LRFD	ASD	NAIL SPACING
ZONE 1 - INTERIOR:	+30 / -49	+16 / -29	6" O.C.
ZONE 2 - PERIMETER:	+30 / -77	+16 / -46	6" O.C.
ZONE 3 - CORNER:	+30 / -126	+16 / -75	4" O.C.

NOTES: EDGE DISTANCE = 4"
THE EFFECTIVE AREA FOR ZONES 1 AND 2 ARE 32 SF.
THE EFFECTIVE AREA FOR ZONE 3 IS 16 SF.
ROOF SHEATHING SHALL BE 19/32" MIN.
ATTACHMENT SHALL BE 8G COMMON OR RINGSHANK, FIELD AND EDGE SPACING SHALL BE THE SAME.

WOOD FRAMING COMPONENTS:

LUMBER

- MATERIALS**
 - ALL WOOD AND WOOD CONSTRUCTION SHALL COMPLY WITH THE FOLLOWING SPECIFICATIONS AND CODES INDICATED IN THE DESIGN CRITERIA:
 - LUMBER SHALL BE IN ACCORDANCE WITH THE NATIONAL GRADING RULES AND SHALL BEAR GRADE STAMP OF SPIB, OR OTHER ASSOCIATION RECOGNIZED BY THE AMERICAN INSTITUTE OF WOOD CONSTRUCTION.
 - LUMBER 2 INCH OR LESS IN NOMINAL THICKNESS SHALL NOT EXCEED 19% IN MOISTURE CONTENT AT THE TIME OF INSTALLATION AND SHALL BE STAMPED "S-DRY", "K-D", OR "MC 15". ALL LUMBER SHALL BE S4S.
 - ALL ROOF FRAMING MEMBERS ABOVE THE CEILING LINE SHALL BE SOUTHERN PINE #2 GRADE OR BETTER.
 - INTERIOR BEARING AND EXTERIOR WOOD FRAMED WALL SHALL BE SPF #2, OR BETTER, UNLESS NOTED OTHERWISE ON DRAWINGS.
 - INTERIOR NON-BEARING WALL MAY BE 2x's WOOD OR LIGHT GAUGE METAL STUDS AT 24" ON CENTER.
- EXECUTION**
 - WOOD FASTENING SHALL BE AS SPECIFIED IN THE DRAWINGS. FASTENING NOT SPECIFICALLY IDENTIFIED ON DRAWINGS SHALL COMPLY WITH THE REQUIREMENTS OF THE BUILDING CODE.
 - INTERIOR BEARING AND EXTERIOR WOOD FRAMED WALLS SHALL BE NOMINAL 4 INCHES WIDE SPACED AT 16" ON CENTER MAXIMUM, UNLESS NOTED OTHERWISE ON THE DRAWINGS.
 - DOUBLE TOP PLATES OF FRAMED WALLS SHALL BE LAPPED 24 INCHES REFER TO RAFTER SPAN TABLE FOR CONVENTIONAL FRAME AND OVER-BUILT FRAMING MEMBERS AND CONNECTIONS.
 - HEADERS SHALL BE AS SPECIFIED IN HEADER SCHEDULE WITH STUDS AND STRAPPING SPECIFIED HEADERS SHALL BE SOUTHERN PINE #2 OR BETTER, MINIMUM HEADER UNLESS NOTED OTHERWISE SHALL BE (2) 2x12.

SHEATHING

- MATERIALS**
 - SHEATHING SHALL BE IN ACCORDANCE WITH PS 1-09 / ANSI A 199.1. ALL SHEETS SHALL BEAR APPROPRIATE GRADING STAMP OF APA AND SPAN RATING.
 - SHEATHING SHALL NOT EXCEED 19% MOISTURE CONTENT WHEN INSTALLED. DO NOT INSTALL VAPOR/MOISTURE BARRIERS ON SHEATHING AFTER A RAIN EVENT UNTIL THE MOISTURE CONTENT DROPS BELOW 19%.
 - FLOOR SHEATHING SHALL BE A MINIMUM OF 23/32" 24/16 SPAN RATED STRUCTURAL SHEATHING FOR 16" ON CENTER SPACING OR 48/24 FOR SPACING GREATER THAN 16" ON CENTER.
 - WALL SHEATHING SHALL BE 24/16 SPAN RATED STRUCTURAL SHEATHING.
 - ROOF SHEATHING SHALL BE AS NOTED IN THE ROOF SHEATHING AND ATTACHMENT SCHEDULE.
- EXECUTION**
 - FLOOR SHEATHING SHALL BE INSTALLED WITH FACE GRAIN PERPENDICULAR TO SUPPORTS GLUED AND SCREWED WITH #10 SCREWS AT 6" ON CENTER.
 - ROOF SHEATHING SHALL BE FASTENED AS SPECIFIED IN THE DRAWINGS. ADD BLOCKING AT ALL PANEL EDGES IN ZONE 3 (CORNERS).

FASTENERS

- MATERIALS**
 - WOOD CONNECTORS AND HOLD-DOWNS SHALL BE AS SPECIFIED IN THE DRAWINGS AND SHALL BE INSTALLED IN ACCORDANCE WITH MANUFACTURERS RECOMMENDATIONS.
 - FASTENERS AND CONNECTORS USED ON UN-TREATED WOOD EXPOSED TO THE WEATHER SHALL BE HOT DIPPED GALVANIZED OR STAINLESS STEEL. FASTENERS AND CONNECTORS (INCLUDING TRUSS PLATES, NAILS, BOLTS, ANCHORS, ECT.) USED IN CONTACT WITH TREATED WOOD SHALL BE COMPATIBLE WITH THE TREATMENT METHOD AND AS FOLLOWS:
 - WOOD TREATED WITH DOT SODIUM BORATE - MINIMUM G90 ZINC COATING
 - WOOD TREATED WITH ACQ-C OR ACQ-D OR OTHER BORATE (NON-DOT) - MINIMUM g185 INC COATING
 - FOR ALL OTHER TREATMENT - COMPLY WITH THE RECOMMENDATIONS OF THE PRESERVATIVE WOOD SUPPLIER
 - STAINLESS STEEL CONNECTORS MAY BE USED FOR ANY TYPES OF TREATED OR UNTREATED WOOD

EXECUTION

- HANGARS AND FRAMED COMPONENTS SHALL BE FURNISHED BY THE MANUFACTURER WITH NAILS FOR SPECIFIC USE AND INSTALLATION.
- ALL PRE-MANUFACTURERE CONNECTORS SHALL HAVE NAILS / SCREWS / ANCHORS INSTALLED IN ACCORDANCE WITH THE CONNECTOR SCHEDULE AND MANUFACTURERS SPECIFICATIONS, FULLY DRIVEN.
- ALL SOLE PLATES SHALL BE AS DESCRIBED HEREIN AND SHALL MEET THE FOLLOWING:
 - ALL ANCHOR BOLTS SHALL HAVE 2"x2"x1/8" PLATE WASHERS UNLESS NOTED OTHERWISE.
 - BOLTS SHALL BE LOCATED AT CORNERS AND JAMBS AND IWTHIN 6" OF EACH END OR JOINT IN PLATE.
 - PLATES LESS THAN 20 INCHES IN LENGTH SHALL HAVE ONE ANCHOR INSTALLED IN THE MIDDLE THIRD OF THE PLATE LENGTH.
 - SLEEVE ANCHORS AND EXPANSION ANCHORS ARE NOT PERMITTED AT EXTERIOR WALLS.
- REFER TO THE SOLE PLATE ANCHORAGE SCHEDULE ATTACHMENTS OF PLATE TO CONCRETE OR MASONRY.

ELECTRICAL:

1. GENERAL

- THE DRAWINGS ARE DIAGRAMMATIC AND INDICATE GENERAL LAYOUT OF ELECTRICAL SYSTEMS. THIS ELECTRICAL DESIGN IS INTENDED TO BE A COMPLETE AND WORKABLE ELECTRICAL SYSTEM WITH ALL MISCELLANEOUS PARTS, WHETHER SHOWN OR NOT, TO BE INCLUDED. THE CONTRACTOR SHALL FIELD VERIFY EXISTING CONDITIONS PRIOR TO BIDDING THE PROJECT OR STARTING INSTALLATION.
- MATERIALS**
 - ALL COMPONENTS SHALL BE INSTALLED IN ACCORDANCE WITH THE STANDARDS OF THE MATERIAL, THE MANUFACTURER'S INSTRUCTIONS OR THE NFPA 70 WHICH EVER IS MORE RESTRICTIVE.
 - ALL EQUIPMENT AND MATERIALS PROVIDED SHALL BE NEW AND IN CONFORMANCE WITH APPLICABLE PROVISIONS OF NEMA, ANSI, U.L., ETC. AND SHALL BEAR AN UNDERWRITERS LABEL WHERE APPLICABLE.
 - RECEPTACLES INSTALLED ON 15- AND 20-AMPERE BRANCH CIRCUITS SHALL BE OF THE GROUNDING TYPE.
 - ALL FIXTURES INSTALLED IN WET OR DAMP LOCATIONS SHALL MEET THE REQUIREMENTS OF NEC ARTICLE 410.10.
 - LIGHT FIXTURES WITHIN CLOTHES CLOSETS SHALL MEET THE REQUIREMENTS OF NEC ARTICLE 410.16.
 - AT LEAST ONE 20 AMP CIRCUIT SHALL BE PROVIDED FOR THE LAUNDRY AREA AND SHALL HAVE NO OTHER RECEPTACLES.
 - PROVIDE AT LEAST TWO 20 AMPERE SMALL APPLIANCE BRANCH CIRCUITS AT THE KITCHEN, BREAKFAST, AND DINING AREAS AND SHALL HAVE NO OTHER RECEPTACLES.
 - SMOKE DETECTORS SHALL BE COMBINATION CARBON MONOXIDE DETECTORS.
 - EXECUTION**
 - INSTALLATION AND CONSTRUCTION METHODS SHALL COMPLY WITH THE NEC.
 - ELECTRICAL EQUIPMENT SHALL BE INSTALLED IN A NEAT AND WORKMANLIKE MANNER.
 - ALL WIRING SHALL BE SO INSTALLED THAT WHEN COMPLETED, THE SYSTEM WILL BE FREE FROM SHORT CIRCUITS AND FROM GROUNDS OTHER THAN AS REQUIRED OR PERMITTED IN NEC ARTICLE 250.
 - ALL ELECTRICAL SYSTEMS, CIRCUITS, FIXTURES AND EQUIPMENT SHALL BE GROUNDED IN A MANNER COMPLYING WITH ARTICLE 250 OF THE NEC.
 - SMOKE DETECTORS SHALL BE HANDWIRED INTO AN AC ELECTRICAL POWER SOURCE AND SHALL BE EQUIPPED WITH A MONITORED BATTERY BACK-UP. SMOKE ALARMS SHALL BE INTERCONNECTED IN SUCH A MANNER THAT THE ACTIVATION OF ONE ALARM WILL ACTIVATE ALL OF THE ALARMS.
 - ALL 115-VOLT, SINGLE PHASE, 15 AND 20 AMPERE RECEPTACLES INSTALLED IN THE FOLLOWING LOCATIONS SHALL HAVE GROUND FAULT CIRCUIT INTERRUPTER PROTECTION FOR PERSONS: KITCHENS, BATHROOMS, GARAGES, SUNROOMS, PORCHES, AND OUTDOORS.
 - ALL CONDUCTORS CLOSER THAN 1 1/4 INCH TO THE EDGE OF FRAMING MEMBERS SHALL BE PROTECTED WITH A STEEL PLATE AT LEAST 1/16 INCH IN THICKNESS.

DOORS AND WINDOWS:

1. GENERAL

- THE DESIGN PRESSURES FOR THE DOORS AND WINDOWS SHALL BE NOT LESS THAN THE VALUES SHOWN IN THE SCHEDULE OR PLAN. THESE DESIGN PRESSURES ARE LISTED IN ALLOWABLE (ASD) WIND PRESSURES.
- ALL EGRESS WINDOWS SHALL MEET FBC SECTION 1029 OR FBC-R 310, AS APPLICABLE.

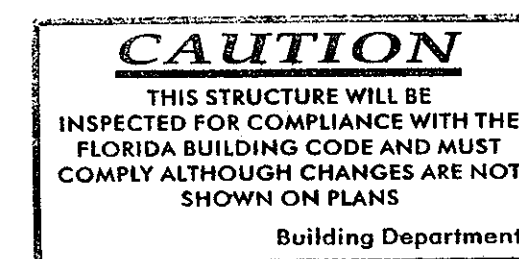
2. MATERIALS

- THE DOORS AND WINDOWS SHALL BE INSTALLED IN STRICT COMPLIANCE WITH THE MANUFACTURER'S NOTICE OF APPROVAL (MIAMI NOA OR FBC APPROVAL).
- THE DOORS AND WINDOWS MUST WITHSTAND THE IMPACT OF WIND BORNE MISSILES, OR SHALL BE PROTECTED WITH AN APPROVED IMPACT RESISTANT COVERING.
- EACH UNIT SHALL BEAR A LABEL WITH THE MANUFACTURER'S NAME AND DESIGN PRESSURES, WHICH SHALL REMAIN UNTIL FINAL INSPECTION IS PASSED BY LOCAL AUTHORITY HAVING JURISDICTION.
- SELF-ADHERED MEMBRANES USED AS FLASHING SHALL COMPLY WITH AAMA 711. THE FLASHING SHALL EXTEND PAST THE SURFACE OF THE EXTERIOR WALL FINISH.

3. EXECUTION

- PRIOR TO INSTALLATION, ALL FRAMES AND BUCKS SHALL BE CHECKED FOR RACK, TWIST, AND OUT OF SQUARE.
- FOLLOW FMA (FENESTRATION MANUFACTURERS ASSOCIATION) GUIDELINES FOR FLASHING ALL OPENINGS.
 - CAULK ALL INSIDE CORNERS OF OPENINGS WITH AN APPROVED SEALANT.
 - APPLY AN APPROVED FLASHING TO ALL FOUR SIDES OF OPENINGS.
 - APPLY A HEAVY, UNINTERRUPTED BEAD OF APPROVED SEALANT TO THE BUCKS PRIOR TO ATTACHING TO THE OPENING PER WINDOW / DOOR DETAILS.
 - SEAL BUCKS WITH AN APPROVED FLASHING MATERIAL.
 - INSTALL DOOR / WINDOW AND APPLY BEAD OF APPROVED SEALANT AROUND PERIMETER.
- APPROVED CORROSION RESISTANT FLASHING SHALL BE APPLIED IN SHINGLE FASHION IN A MANNER TO PREVENT ENTRY OR PENETRATION OF WATER TO THE BUILDINGS STRUCTURAL FRAMING COMPONENTS.
- THE FLASHING SHALL EXTEND TO THE SURFACE OF THE EXTERIOR WALL FINISH.

REVIEWED FOR CODE COMPLIANCE
DATE REVIEWED 4.19.18
WORK ORDER # 2018021250
BUILDING OFFICER [Signature]
CONTRACTOR [Signature]
PERMIT NUMBER 2018021250



BUILDING DEPT. OFFICE COPY
REVIEWED
APR 19 2018
INDIAN RIVER COUNTY BUILDING DIVISION

PROJECT NUMBER: 18A045

DATE	12/30/2017
REVISION	04/13/2018
BLDG. DEPT. COMMENTS	
BLDG. DEPT. COMMENTS	

ISSUE DATE: 02/26/2018
STATUS: PERMIT SET
DRAWN BY: MS
REVIEWED BY: TS

COL 3:12-17

TE SCHLIT ENGINEERING LLC
CA # 32295
1575 INDIAN RIVER BLVD, SUITE C210
VERO BEACH, FL 32940
(772) 501-3372
STRUCTURAL@TEMAIL.COM

FALK ENCLOSE CARPORT
403 21ST PLACE SE
3340310000509000008.0
VERO BEACH FL

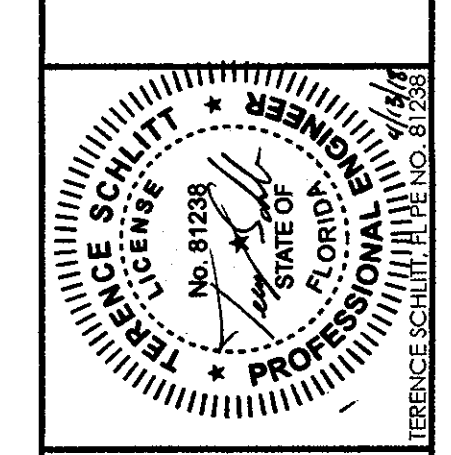
General Notes
S1
1 OF 2

REVISION	DATE	BLDG. DEPT. COMMENTS	BLDG. DEPT. COMMENTS
1	12/30/2017		
2	04/13/2018		

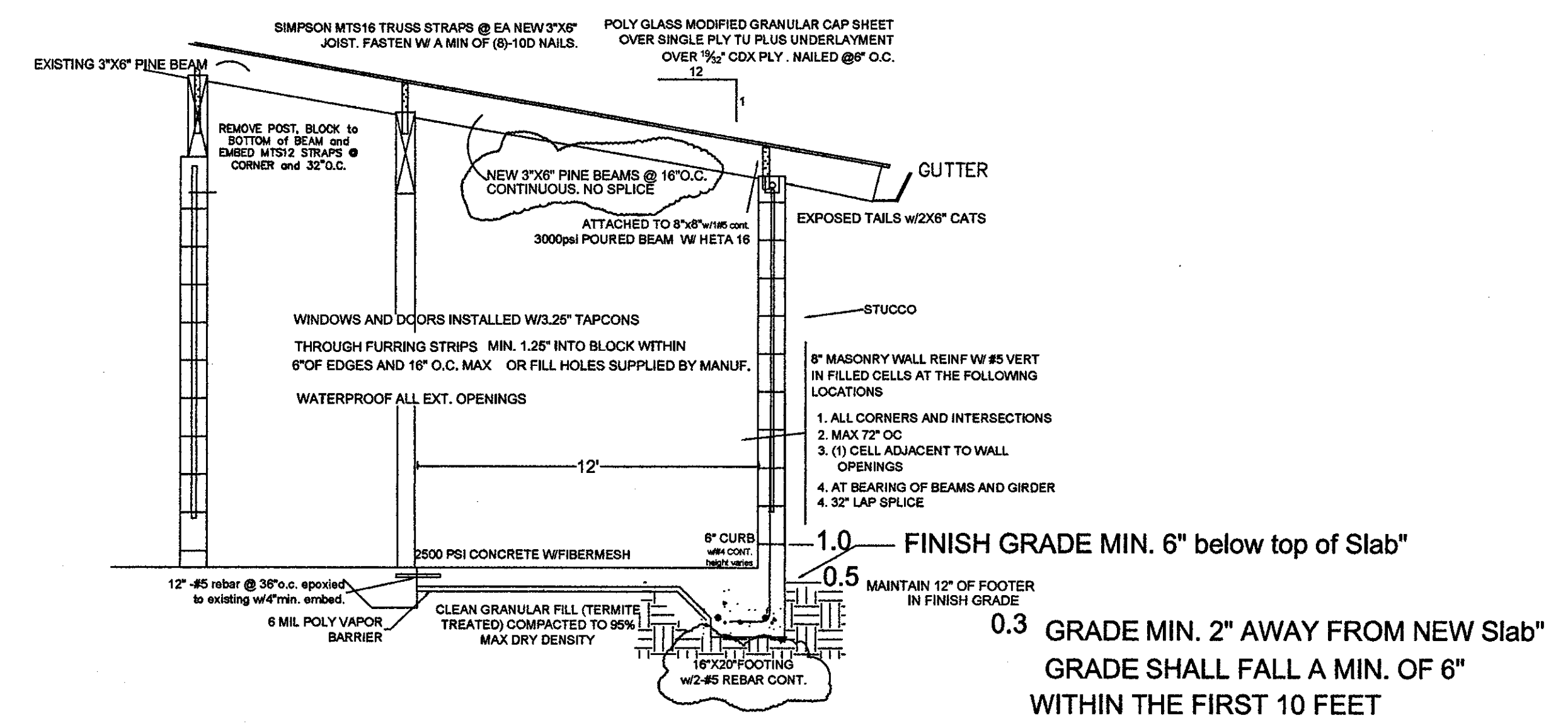
ISSUE DATE:	02/26/2018	PERMIT SET	MS	TS
STATUS:				
DRAWN BY:				
REVIEWED BY:				

COL 3:12-17

TE SCHLITZ ENGINEERING LLC
CA # 32295
1575 INDIAN RIVER BLVD, SUITE C210
VERO BEACH, FL 32960
(772) 501-3372
STRUCTURALE@GMAIL.COM

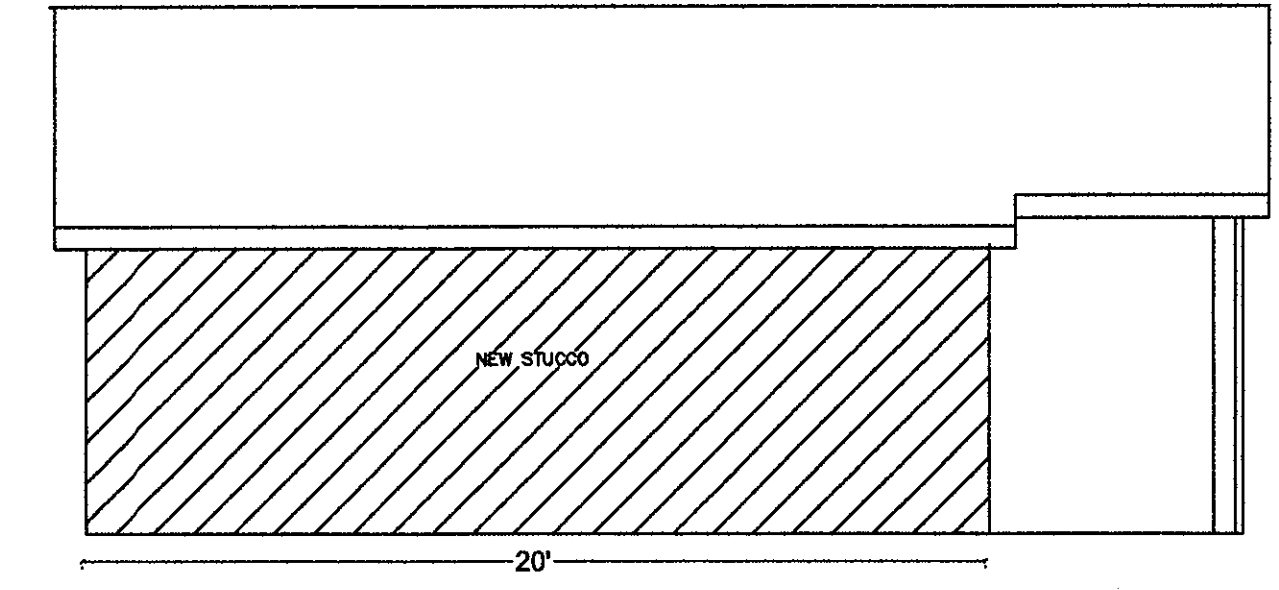


FALK ENCLOSE CARPORT
403 21ST PLACE SE
33403100005009000008.0
VERO BEACH FL

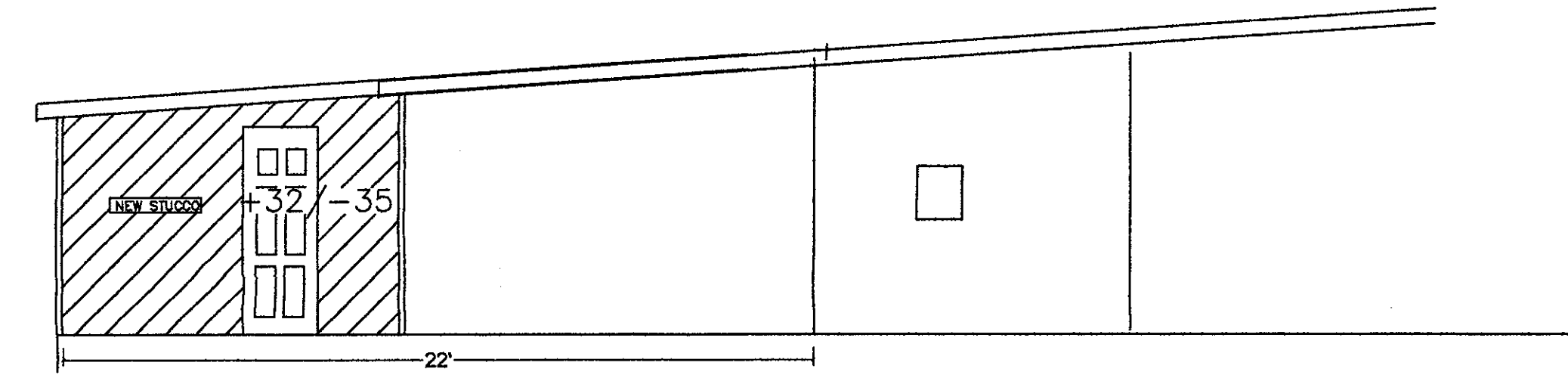


WALL SECTION

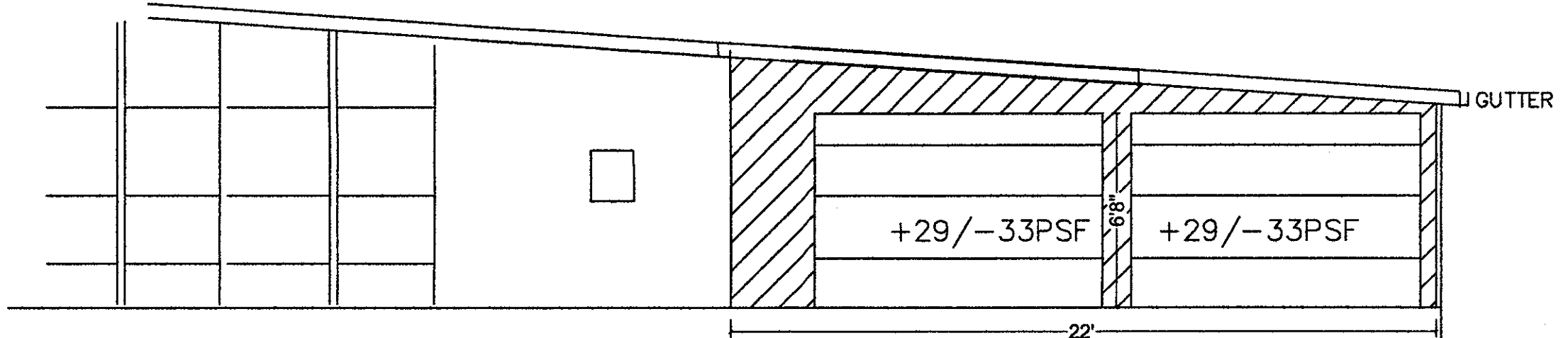
FINISH GRADE MIN. 6" below top of Slab"
0.3 GRADE MIN. 2" AWAY FROM NEW Slab"
GRADE SHALL FALL A MIN. OF 6" WITHIN THE FIRST 10 FEET



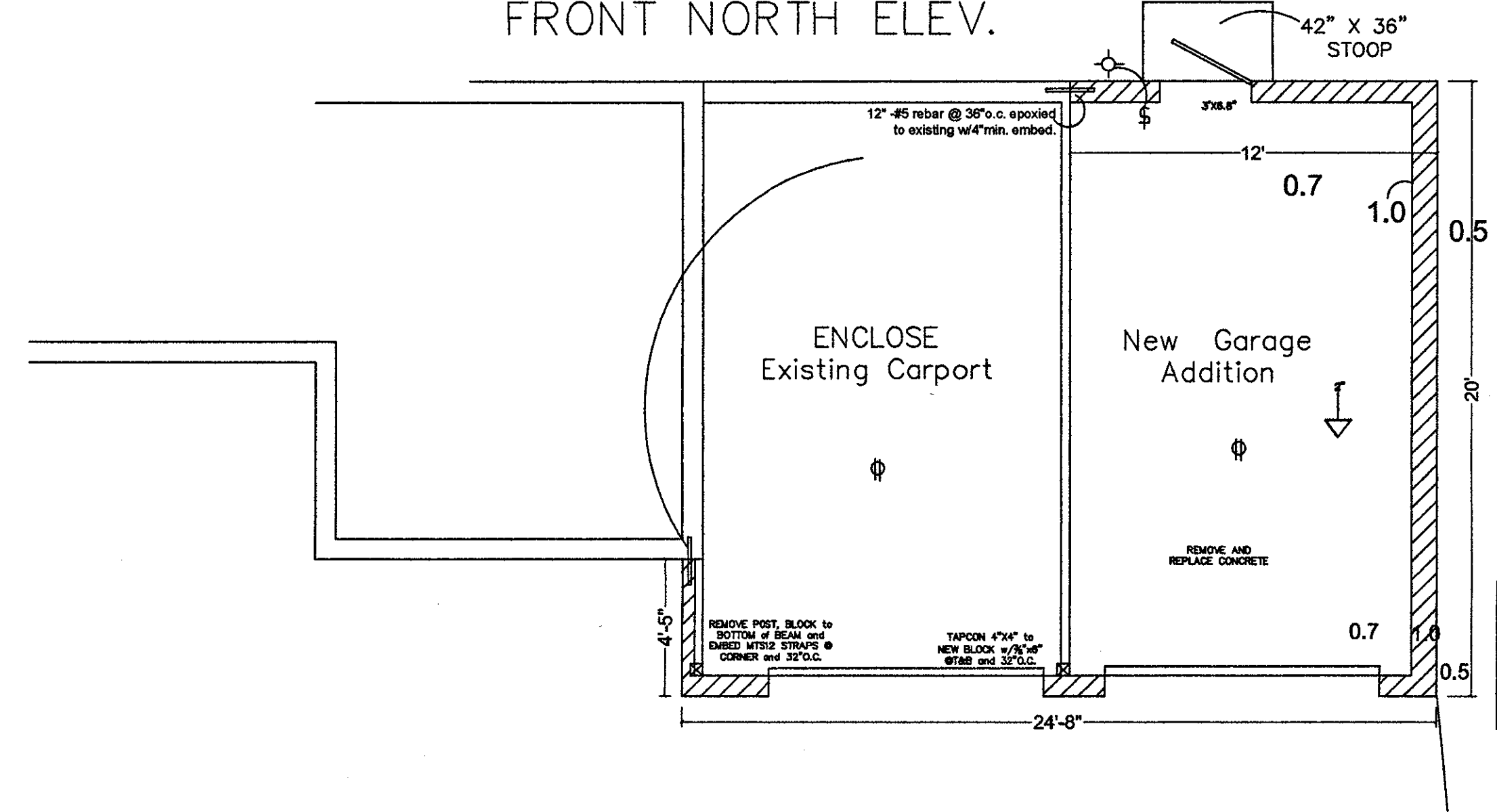
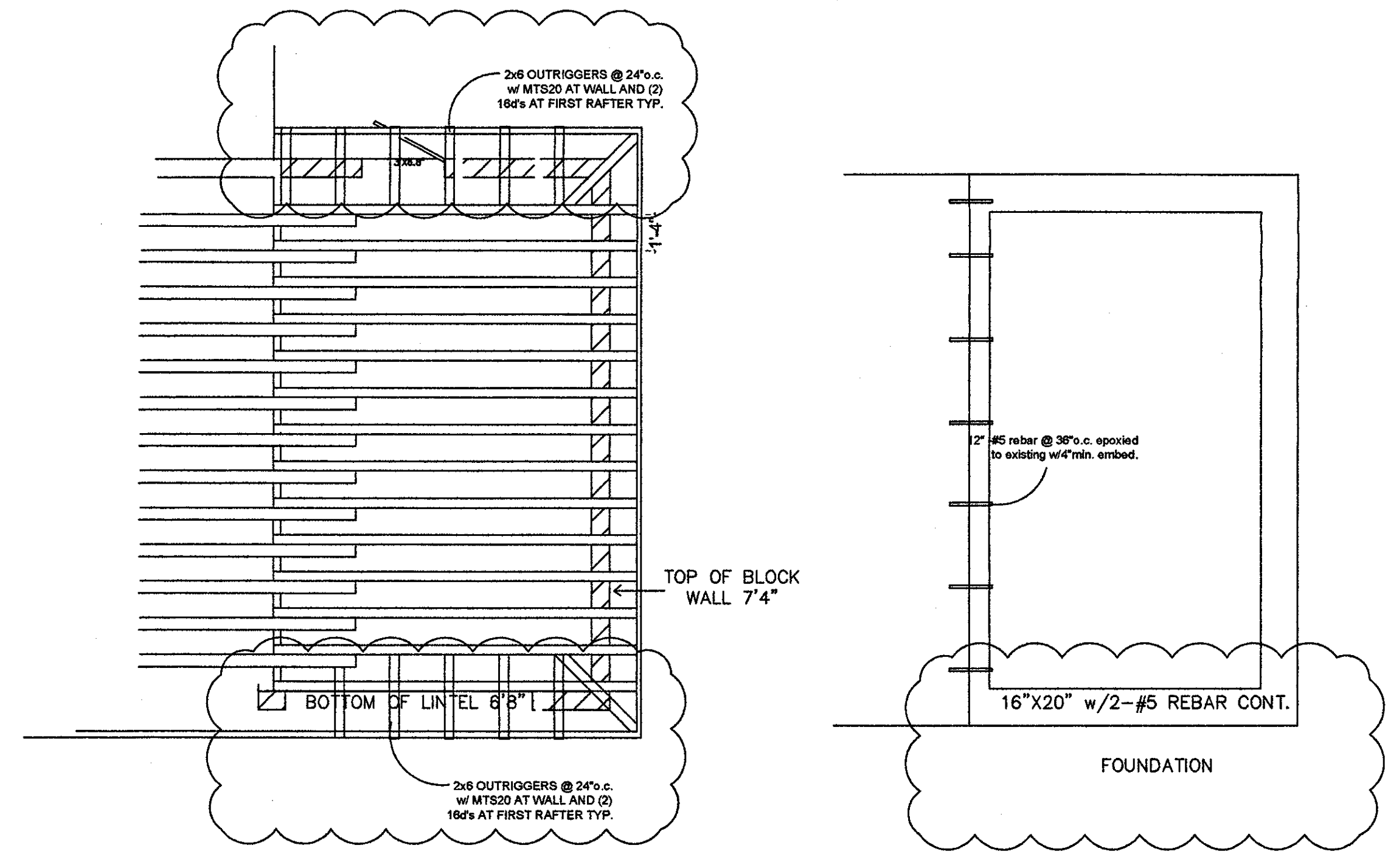
RIGHT WEST ELEV.



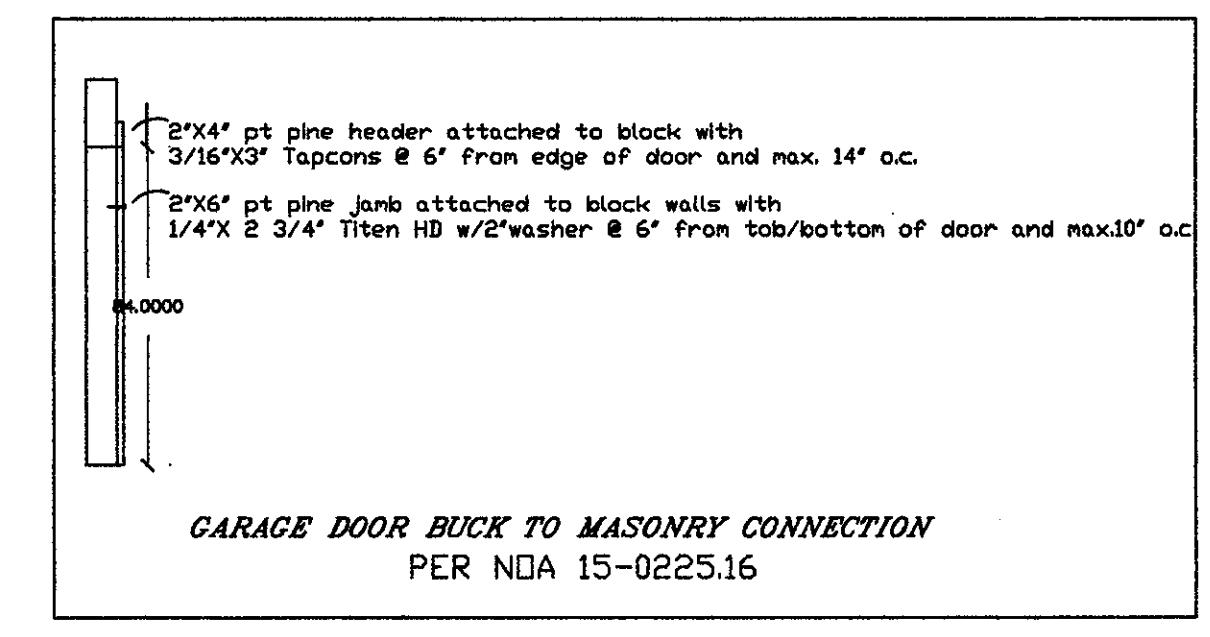
REAR SOUTH ELEV.



FRONT NORTH ELEV.



NOTE:
GRADE TO DRAIN TO FRONT SWALE
GRADE SHALL FALL A MIN. OF 6" WITHIN THE FIRST 10 FEET



REVIEWED
APR 19 2018
INDIAN RIVER COUNTY
BUILDING DIVISION

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT APPLICATION

APPL DATE 2/26/2018

Confirm. #: 592

BRADD RESIDENTIAL ADDITION/ALTERATION

PERMIT #: 2018021252 PERMIT TYPE: BRADD ISSUED DATE: BY:
JOB DESCRIPTION: ADDING 10X 19 CARPORT AND ENCLOSE TO GARAGE
JOB ADDRESS 403 21ST PL SE
BLOCK 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N
OWNER NAME: GROOVY PROPERTIES LLC JURISDICTION: IRC

FLOOD ZONE X FLOOD ELEV: U FLOOD MAP: 378H INSP AREA:
PROJECT

APPLICANT: SCHLITT, MICHAEL TYPE: CONTRACTOR JOB PHONE: (772)567-1553
DBA: MICHAEL SCHLITT CONSTRUCTION CORP CERT NBR: 1190 JOB FAX: (772)567-1553

SETBACKS FRONT: REAR: LEFT: RIGHT:
FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.

SQFT: 0 JOB VALUE: \$ 34,000.00 #UNITS: #FLOORS #BLDGs:
TIFF #: ROW NBR PLAN NBR:

ADDITIONAL INFO:

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work is commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at:
www.ircgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Owner/Contractor

Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.

COMBINATION BUILDING PERMIT APPLICATION (Page 1 of 2)

INDIAN RIVER COUNTY / CITY OF VERO BEACH

I. LEGAL DESCRIPTION: LOT 8 BLOCK 9 SUBDIVISION Vero Shores App. Date: _____
 PARCEL NUMBER: 33-40-31-00005-0090-00008.0 FL Bldg Code: _____
 JOB ADDRESS: 403 21st Pl SE (from tax notice receipt) Supplements: _____

II. CONTRACT / ESTIMATED CONSTRUCTION COST: \$ 34,000.00
 Permit Fee = Construction value multiplied by .00415 Minimum Permit Fee = \$200

III. TOTAL SQUARE FOOTAGE UNDER-ROOF: _____ # of Bedrooms: _____

Water: City County Well **Sewer:** City County Septic Sq Ft Under Air _____ # of Bathrooms: _____ # of Garages: _____
 (Circle one) (Circle one)

IV. PROPOSED USE (Check All That Apply)	(Check All That Apply)	Type Construction (Check All That Apply)
<input checked="" type="checkbox"/> RESIDENTIAL	____ NEW CONSTRUCTION	____ TYPE V - Combustible (All Wood Frame)
____ COMMERCIAL	<input checked="" type="checkbox"/> ADDITION	<input checked="" type="checkbox"/> TYPE III - Exterior Non-Combustible/ Interior Any Material
____ MULTI-FAMILY	<input checked="" type="checkbox"/> ALTERATION	____ TYPE I or II All Non-Combustible (Specify)
____ ACCESSORY Specify: _____	____ DEMOLITION	____ OTHER (Sprinkler, Timber Const) Specify: _____

Scope:
 Add 10'x19' addition to carport & enclose to make garage

	NAME & ADDRESS	CONTACT INFORMATION
OWNER	Groovy Properties, LLC Gregory Falk 2170 W. Ridge Dr. Lancaster, PA 17603	Name: Mike Schlitt
		E-MAIL: mschcon@yahoo.com
		DAYTIME PHONE NUMBER: (772) 473-0962 Fax: (772) 567-1553
TITLE HOLDER (If Other Than Owner)		Name:
		E-MAIL:
		DAYTIME PHONE NUMBER:
CONTRACTOR	Michael Schlitt Construction LICENSE NUMBER: CGC047522 COMP CARD NUMBER: 1190	Name: Mike Schlitt
		E-MAIL: mschcon@yahoo.com
		DAYTIME PHONE NUMBER: (772) 473-0962 Fax: (772) 567-1553
ARCHITECT		E-MAIL:
		DAYTIME PHONE NUMBER:
ENGINEER	TE Schlitt Engineering 1575 IR Blvd Vero Beach, FL 32960	E-MAIL: structuralfl@gmail.com
		DAYTIME PHONE NUMBER: (772) 501-3372

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit, and that all work will be performed to meet the standards of all laws regulating construction, insurance, and worker's compensation. I understand that sub-contractor affidavits must be obtained for electrical, plumbing, air-conditioning, roofing, insulation, pools, irrigation systems, wells, or any other work that is allowed to be included in this permit.

Properties on which earth spills or other debris falls shall be cleaned immediately. All streets, sidewalks, and curbs damaged due to this construction shall be repaired to the satisfaction of the engineering department prior to the issuance of certificate of completion.

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

COMBINATION BUILDING PERMIT APPLICATION (Page 2 of 2)
INDIAN RIVER COUNTY / CITY OF VERO BEACH

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

[Signature]
 Signature of Owner or Agent

{To sign as an Agent for the Owner you must have a Florida Form Power of Attorney signed by the Owner and Notarized with two additional witnesses other than the Notary}

Date: 2/26/18

And [Signature]
 Signature of Contractor

Date: 2/26/18

As to Owner:

State of Florida
 County of Indian River

The foregoing instrument was acknowledged before me this 26th day of February, 2018 by Michael Schlitt who is personally known or who has _____ produced identification. Type identification produced: _____

As to Contractor:

State of Florida
 County of Indian River

The foregoing instrument was acknowledged before me this 26th day of February, 2018 by Michael Schlitt who is personally known or who has _____ produced identification. Type identification produced: _____

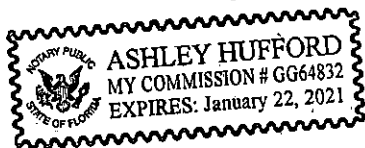
[Signature]
 Official Signature of Notary Public

[Signature]
 Official Signature of Notary Public

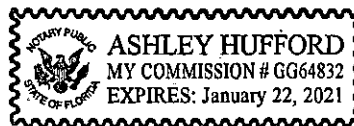
Ashley Hufford
 Notary's Name, Typed, Printed or Stamped

Ashley Hufford
 Notary's Name, Typed, Printed or Stamped

Notary Seal:



Notary Seal:



This Area for Building Division Use Only:

Building Living/Non Living Area: _____ sq ft BR ___ Bath ___ Garage ___

Value: = \$ _____ Per: Plans Examination Contract

Building Permit Fee: = \$ _____
 Radon Fund (State Mandated) = \$ _____
 BCAI Fund (State Mandated) = \$ _____
 Other _____
 Total Fees = \$ _____

**INDIAN RIVER COUNTY/CITY OF VERO BEACH
COMBINATION PERMIT
SUB-CONTRACTOR AGREEMENT/AFFIDAVIT**

***Note: Roof coverings other than shingles require licensed roofing contractor.**

Indian River County Contractor Certificate Number: 1190

State of Florida Certification Number (if applicable): CGC047522

Combination Permit Number (if known): _____

Michael Schlitt Construction has agreed to be the subcontractor (type of construction trade indicated below)
(company/individual name)

- | | | | |
|---|--|--|--|
| <input checked="" type="checkbox"/> concrete | <input checked="" type="checkbox"/> stucco | <input type="checkbox"/> electric | <input type="checkbox"/> aluminum (in-fill only) |
| <input checked="" type="checkbox"/> masonry | <input checked="" type="checkbox"/> insulation | <input type="checkbox"/> mechanical | <input type="checkbox"/> garage door |
| <input checked="" type="checkbox"/> carpentry | <input checked="" type="checkbox"/> roofing* | <input type="checkbox"/> irrigation | <input type="checkbox"/> fuel gas/propane |
| <input checked="" type="checkbox"/> drywall | <input type="checkbox"/> plumbing | <input type="checkbox"/> burglar alarm/low voltage | |

for Michael Schlitt Construction for the project located at 403 21st Pl. S.E.
(Name of prime contractor) (street address)

It is understood that, if there is any change of status regarding our participation with the above mentioned project. I will immediately advise the Indian River County Building Department by personally filing a Change of Contractor.

BUSINESS QUALIFIER (original signatures required):

[Signature] Michael Schlitt 2/26/18
Signature Printed Name Date

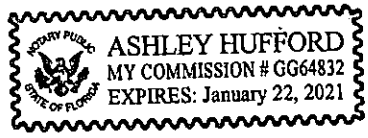
NOTARY AS TO CONTRACTOR: {CANNOT BE OLDER THAN 30 DAYS}

State of Florida
County of Indian River

The foregoing instrument was acknowledged before me this 26th day of February, 2018 by Michael Schlitt who is personally known or who has _____ produced identification. Type identification produced: _____

[Signature]
Official Signature of Notary Public

Ashley Hufford
Notary's Name, Typed, Printed or Stamped



Notary Seal:

**FLOOD ZONE APPLICATION INFORMATION FORM
SUBSTANTIAL IMPROVEMENT INFORMATION**

APPLICANT: Michael Schlitt Construction
SITE LOCATION: 403 21st Pl. SE.
PARCEL NUMBER/TAX I.D. NUMBER: 33403100005009000008.0
FLOOD ZONE DESIGNATION: RS-6e

(To Be Determined by: Planning/Engineering for Indian River County or Plans Examiner for City of Vero Beach)

If the property is located in a flood zone, the following information must be submitted with your application:

1. **BUILDING MARKET VALUE*** \$ _____ **
(Building Staff)

Applicant must provide Property Appraiser's Record of Building Value. Available from Property Appraiser's office, 1st Floor, County Administration Building. Alternate sources listed below.

**To Be Filled in by Building Department Staff

(STAFF: Value determined by Property Appraiser's Record of Building Value Only X 115%)

2. **ESTIMATED COST OF IMPROVEMENT** \$ 34,000.00
(Owner/Contractor)

I hereby certify that the cost estimate submitted includes all the costs of improvements to structure located at the above referenced location.

Michael Schlitt Construction CGC047522 [Signature]
OWNER OR PRIME CONTRACTOR LICENSE NUMBER PRINTED SIGNATURE

If property is located in the Coastal Building Zone (Barrier Island):

1. Applicant must provide total cost of Improvements based on five year tracking rule which extends back five years from the date of application.

2. Estimated Cost of Substantial Improvements \$ 1,600.00
during past five years (refer to #1 above) (Owner)

(STAFF: Check Address Reference Number on Computer for Prior Improvements)

I hereby certify that the referenced costs include all improvements to the above referenced structure for the last five years.

[Signature]
OWNER OR PRIME CONTRACTOR

*Acceptable estimate of market value can be obtained from the following sources:

1. Property Appraisals used for tax assessment purposes. Print-out available from Property Appraiser's office on 1st-floor of County Administration Building.
2. Independent appraisals by a professional appraiser.
3. Detailed estimates of the structure's actual cash value (used as a substitute for market value based on the preference of the community).
4. The value of buildings taken from National Flood Insurance Program Claims data.
5. "Qualified Estimates" based on sound professional judgment made by staff of the local Building Department or local or state Tax Assessor's office.

BRING ONE OF THE ABOVE WITH YOU TO THE BUILDING DEPARTMENT



**INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION**

1801 27th Street, Vero Beach, FL 32960 772 567 8000

RESIDENTIAL PLAN REVIEW

DATE 1st REVIEW: 3/28/18

PERMIT NUMBER: 2018021252

ADDRESS: 403 21st Place SE

CONTRACTOR: Michael Schlitt Construction Corp

PHONE: 772.567.1553

FAX: 772.567.1553

EMAIL: mschcon@yahoo.com

PROJECT NAME: Groovy Properties LLC

PLAN REVIEW HAS BEEN COMPLETED FOR THE ABOVE PROJECT. THE FOLLOWING ITEMS MUST BE RESOLVED PRIOR TO PERMIT ISSUANCE. REVIEW, REVISE AND RE-SUBMIT AS NECESSARY.

1. Revisions sent previously are not signed or sealed by a design professional.
2. Footer size is different on foundation detail and wall section.
3. How are you attaching the outrigger rafters?
4. Product approval affidavit not signed and sealed by a design professional.

APPLICANT:

IN ORDER TO EXPEDITE THE PLAN REVISION REVIEW PROCESS,

1. ANSWER EACH PLAN REVIEW COMMENT. CLOUD ALL REVISIONS TO THE PLANS.
2. RETURN REVISED PLANS AND ALL REQUIRED ITEMS COLLECTIVELY.
3. PLEASE REFERENCE THE PERMIT APPLICATION NUMBER WHEN RE-SUBMITTING.

NOTE: REVIEW OF REVISED PLANS MAY CALL FOR ADDITIONAL CLARIFICATION AND/OR ADDITIONAL INFORMATION ON PLANS.

THANK YOU IN ADVANCE FOR HELPING US REDUCE THE TURN AROUND TIME.

*SINCERELY,
RICK CHEER
PLAN EXAMINER*

NOTES:

•

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT

Confirm. #: 592

BRADD RESIDENTIAL ADDITION/ALTERATION

PERMIT #: 2018021252 PERMIT TYPE: BRADD ISSUED DATE: 04/24/2018 BY: BLDLK

JOB DESCRIPTION: ADDING 10X 19 CARPORT AND ENCLOSE TO GARAGE

JOB ADDRESS 403 21ST PL SE

BLOCK 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N

OWNER NAME: GROOVY PROPERTIES LLC JURISDICTION: IRC

FLOOD ZONE X FLOOD ELEV: U FLOOD MAP: 378H INSP AREA:

PROJECT

APPLICANT: SCHLITT, MICHAEL TYPE: CONTRACTOR JOB PHONE: (772)567-1553

DBA: MICHAEL SCHLITT CONSTRUCTION CORP CERT NBR: 1190 JOB FAX: (772)567-1553

SETBACKS FRONT: REAR: LEFT: RIGHT:

FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.

SQFT: 0 JOB VALUE: \$ 34,000.00 #UNITS: #FLOORS #BLDGs:

TIFF #: ROW NBR PLAN NBR:

ADDITIONAL INFO:

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

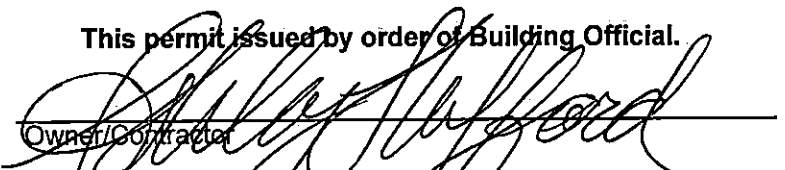
NOTICE: In addition to the requirements in this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies. FS:553.79(10)

A permit expires unless work is commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at:
www.ircgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.



Owner/Contractor

4/24/18
Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT

Confirm. #: 592

BRADD RESIDENTIAL ADDITION/ALTERATION

PERMIT #: 2018021252 PERMIT TYPE: BRADD ISSUED DATE: 04/24/2018 BY: BLDLK

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BLOCK 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N

OWNER NAME: GROOVY PROPERTIES LLC JURISDICTION: IRC

FLOOD ZONE X FLOOD ELEV: U FLOOD MAP: 378H INSP AREA:

PROJECT

APPLICANT: SCHLITT, MICHAEL TYPE: CONTRACTOR JOB PHONE: (772)567-1553

DBA: MICHAEL SCHLITT CONSTRUCTION CORP CERT NBR: 1190 JOB FAX: (772)567-1553

SETBACKS FRONT: REAR: LEFT: RIGHT:

FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.

SQFT: 0 JOB VALUE: \$ 34,000.00 #UNITS: #FLOORS #BLDGS:

TIFF #: ROW NBR PLAN NBR:

ADDITIONAL INFO:

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

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Schedule Inspections Online at:
www.irccgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Owner/Contractor

Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

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Insulation Certification Card

INSULATION CERTIFICATION CARD — 2017 FBC Energy Conservation R402

Revised 01/10/2018 ver.2 fty

Permit #: 2018021252

Insulation Contractor Name: TCI CONTRACTING LLC DBA IBP OF WEST PALM

Jobsite Contractor: Michael Schlitt Construction

Jobsite Address: 403 21st Place SE

Section: _____ Block: _____ Lot: _____

Ceiling Insulation

Manufactures Name: ICynene

Insulation Type: Ultra Select Set Open Cell foam

R-Value of Insulation: R-20

Thickness of Insulation Installed: 5.5

Location of Insulation Installed: top chord of Trusses

Date of Installation: 7.9.18

Wall Insulation

Manufactures Name: _____

Insulation Type: _____

R-Value of Insulation: _____

Thickness of Insulation Installed: _____

Location of Insulation Installed: _____

Date of Installation _____

Please Check One:

Attic insulation installed with ventilation per R806.1, R806.2, R806.3, and R806.4 - Florida Residential Code 2017

Conditioned attic assembly insulation has been installed per R-806.5 - Florida Energy Code 2017

THIS CARD MUST BE POSTED IN A PROMINENT LOCATION AND RETURNED TO THE BUILDING DEPARTMENT BEFORE YOUR FINAL INSPECTION.

Michael Schlitt
Insulation Contractors Signature

CRC 1330863

INDIAN RIVER COUNTY BUILDING DIVISION
1801 27TH STREET VERO BEACH, FL 32960

PERMIT

Confirm. #: 636

ELR ELECTRICAL RESIDENTIAL

PERMIT #: 2020020281 **PERMIT TYPE:** ELR **ISSUED DATE:** 02/06/2020 **BY:** BLD CR
JOB DESCRIPTION: UPGRADE 100AMP EXISTING METER W/ 200 AMP OVERHEAD METER MAIN FEED POOL HEA
JOB ADDRESS: 403 21ST PL SE
BLOCK: 0090 **LOT:** 00008.0 **SUBDIVISION #:** 602-VERO SHORES SUB UNIT 1
ADDR NBR: 66313 **FOLIO NBR:** 33-40-31-00005-0090-00008.0 **WWP (2X fee):** N
OWNER NAME: GROOVY PROPERTIES LLC **JURISDICTION:** IRC
FLOOD ZONE: X **FLOOD ELEV:** U **FLOOD MAP:** 378H,390 **INSP AREA:**
PROJECT:
APPLICANT: WALTON, ALAN, LEE **TYPE:** CONTRACTOR **JOB PHONE:** 772-925-5119
DBA: FLORIDA STATE ELECTRIC INC **CERT NBR:** 19340 **JOB FAX:** 772-673-2844
SETBACKS FRONT: **REAR:** **LEFT:** **RIGHT:**
FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.
SQFT: **JOB VALUE:** \$ 1,200.00 **#UNITS:** **#FLOORS** **#BLDGS:**
TIFF #: **ROW NBR** **PLAN NBR:**
ADDITIONAL INFO:

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work has commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at: www.ircgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries, call 772-226-1260.

Owner/Contractor

Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.



INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION

1801 27th Street, Vero Beach, FL 32960 772-226-1260

PARCEL NUMBER: (from tax notice \ receipt)

OWNER'S NAME: Greg Fink JOB ADDRESS: 403 21st Pl SE
COMPANY NAME Florida State Electric QUALIFER NAME: Alan Whitton LICENSE # 19340
CONTACT INFORMATION: PHONE # 772-539-1524 FAX # E-MAIL floridastateelec@gmail.com
CONTRACT PRICE: \$1,200

- RESIDENTIAL COMMERCIAL
SEPTIC SYSTEM SEWER CONNECTION

- Fence Mechanical Electrical Plumbing Insulation Irrigation Garage Doors
Alarm - low voltage or wireless Shed Tie-Down Windows, Doors and Shutters Driveways/ Slabs
Solar Demolition (Interior Only) Construction Trailer

**Fence permits (check which applies): APPLICANT INDICATES: No pool on property Pool on property (see note)
NOTE: fence must comply with current pool barrier code unless other approved barrier is provided. Year pool was built

Scope of the work anticipated in this permit application. A separate scope of work with a plan is required for review.

UPGRADE 100A EXISTING METER WITH
200 AMP OVERHEAD METER MAIN FEED POOL HEATER

*NOTICE OF COMMENCEMENT IS REQUIRED IF CONTRACT PRICE EXCEEDS \$2,500 (Air Conditioning- \$7500)

Contractor Signature
COMP CARD #: EC1300 19340

Owner Signature

Notary section for Greg Fink: State of Florida, County of Vero Beach. Notary Signature: Candice Reeves. Notary Seal: Candice Reeves, Commission # GG 236843, Expires July 10, 2022.

Notary section for Alan Whitton: State of Florida, County of Vero Beach. Notary Signature: Candice Reeves. Notary Seal: Candice Reeves, Commission # GG 236843, Expires July 10, 2022.

PUAN

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT

Confirm. #: 536

RSP20 RES DOORS/WINDOWS/SHUTTERS - UP TO 4 COMPONENTS/OPENINGS

PERMIT #: 2018100634 PERMIT TYPE: RSP20 ISSUED DATE: 10/12/2018 BY: BLDCR
 JOB DESCRIPTION: INSTALL 1 HURRICANE PANEL
 JOB ADDRESS 403 21ST PL SE
 BLOCK 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1
 ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N
 OWNER NAME: ROBERT SMITH JURISDICTION: IRC
 FLOOD ZONE X FLOOD ELEV: U FLOOD MAP: 378H,390 INSP AREA:
 PROJECT
 APPLICANT: PEASE, THOMAS L. TYPE: CONTRACTOR JOB PHONE:(772)569-2200
 DBA: FLORIDA SHUTTERS INC CERT NBR: 439 JOB FAX: (772)567-3674
 SETBACKS FRONT: REAR: LEFT: RIGHT:
 FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.
 SQFT: JOB VALUE: \$ 2,499.00 #UNITS: #FLOORS #BLDGS:
 TIFF #: ROW NBR PLAN NBR:

ADDITIONAL INFO:

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work is commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at:
www.irccgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.


Owner/Contractor

10/12/18
Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

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9/14/18

SCOPE OF WORK APPLICATION
INDIAN RIVER COUNTY/CITY OF VERO BEACH

PARCEL NUMBER: 33-40-31-00005-009000008-0
(from tax notice \ receipt)

App. Date: _____
FL Bldg Code: _____
Supplements: _____

OWNER'S NAME: Robert Smith JOB ADDRESS: 403 21st PL SE

CONTRACTOR NAME: Florida Shutters, Inc LICENSE # CBC 015453

CONTACT INFORMATION: PHONE # 569-2200 FAX # 567-3674 E-MAIL: Debbie@floridashuttersinc.com

CONTRACT PRICE: 2,499.00 * Permit Fee = Contract Price x .00415 + 3% state surcharge = \$ _____
MINIMUM PERMIT FEE: \$75.00 + 3% state surcharge

- Fence Mechanical Electrical Plumbing Plumbing/Fuel Gas Insulation Irrigation Garage doors
- Alarm - low voltage or wireless Shed Tie-Down Windows, Doors and Shutters Driveways Solar

Scope of the work anticipated in this permit application: Install 1 Hurricane panel

REVIEWED

OCT 11 2018

INDIAN RIVER COUNTY
BUILDING DIVISION

Attach additional sheets if necessary

*NOTICE OF COMMENCEMENT IS REQUIRED IF CONTRACT PRICE EXCEEDS \$2,500. (Air Conditioning - \$7,500)

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

[Signature]
Contractor
COMP CARD #: 439

Owner

As to Contractor:
State of Florida
County of Indian River

As to Owner:
State of _____
County of _____

The foregoing instrument was acknowledged before me this 18th day of September, 2018 by Thomas L. Pease who is X personally known or who has _____ produced identification.

The foregoing instrument was acknowledged before me this _____ day of _____, 20____ by _____ who is _____ personally known or who has _____ produced identification.

Type identification produced: _____
[Signature]
Official Signature of Notary Public

Official Signature of Notary Public

Notary's Name, Typed, Printed or Stamped

Notary's Name, Typed, Printed or Stamped

Notary Seal:

Notary Seal:



3120180009033 RECORDED IN THE RECORDS OF JEFFREY R. SMITH, CLERK OF CIRCUIT COURT INDIAN RIVER CO FL
BK: 3092 PG: 1895, 2/15/2018 2:30 PM D DOCTAX PD \$1,788.50

After Recording Return to:
Cindy Silverstein
Stewart Title Company
333 17th Street, Suite F
Vero Beach, FL 32960

This Instrument Prepared by:
Cindy Silverstein
Stewart Title Company
333 17th Street, Suite F
Vero Beach, FL 32960
as a necessary incident to the fulfillment of conditions
contained in a title insurance commitment issued by it.

Property Appraisers Parcel I.D. (Folio) Number(s):
33-40-31-00005-0090-00008.0
File No.: 161426

WARRANTY DEED

This Warranty Deed, Made the 8th day of February, 2018, by Robert Smith, joined by his husband James W. Lang, whose post office address is: 403 21st Place SE, Vero Beach, FL 32962, hereinafter called the "Grantor", to Groovy Properties, LLC a Pennsylvania limited liability company, whose post office address is: 2170 West Ridge Drive, Lancaster, PA 17603, hereinafter called the "Grantee".

WITNESSETH: That said Grantor, for and in consideration of the sum of Ten Dollars and No Cents (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee, all that certain land situate in Indian River County, Florida, to wit:

Lot 8, Block 9, Vero Shores Unit One, according to the map or plat thereof, as recorded in Plat Book 5, Page (s) 52, of the Public Records of Indian River County, Florida.

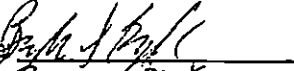
The property is the homestead of the Grantor(s).
TOGETHER with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

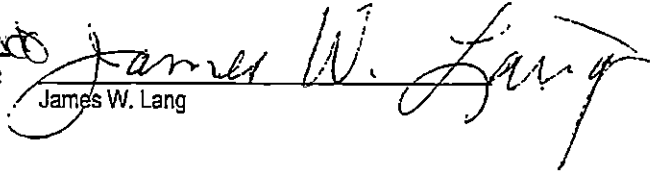
To Have and to Hold, the same in fee simple forever.
And the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said land; that the Grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2016, reservations, restrictions and easements of record, if any.

(The terms "Grantor" and "Grantee" herein shall be construed to include all genders and singular or plural as the context indicates.)

IN WITNESS WHEREOF, Grantor has hereunto set Grantor's hand and seal the day and year first above written.

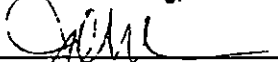
SIGNED IN THE PRESENCE OF THE FOLLOWING WITNESSES
TWO SEPARATE DISINTERESTED WITNESSES REQUIRED

Witness Signature: 
Printed Name: Robert Smith

Witness Signature: 
Printed Name: James W. Lang

State of Florida
County of Indian River

The foregoing instrument was acknowledged before me this 8th day of February, 2018 by Robert Smith and James W. Lang, a married man, who has produced driver license(s) as identification.


Notary Public Signature
Printed Name: Jo-Ann Webster
My Commission Expires: 5/31/2019
(SEAL)



Factory & Showroom
 1055 Commerce Avenue • Vero Beach, FL 32960
 Telephone (772) 569-2200 • Toll Free 1-800-741-2202
 FAX (772) 567-3674

Contact Number:	Date: 2-12-2018	Phone: 717-468-7638	gregorysfalk@gmail.com		
Name: Groovy Properties, LLC.		Job Name: Same			
Street: 403 21st Place SE		Street:			
City: Vero beach	State: FL	Zip: 32962	City:	State:	Zip:
Subdivision:		Subdivision:			

I. To furnish and install florida building code approved large missile impact rated hurricane shutters on specified openings as follows:

No.	Exposure	Code	Description	Size	Type	Price	Remarks
1	Right	N/A	Kitchen Dr.	36 x 87"	Hurr. Panels	N/A	
2	Right	N/A	Storage Rm. Dr.	36 x 87"	Hurr. Panels	N/A	
3	Front	N/A	Living Rm.	196 x 112/124"	Hurr. Panels	\$2,499.00	re-use existing bottom tracks

REVIEWED

OCT 11 2018

INDIAN RIVER COUNTY
 BUILDING DIVISION

Hurricane tracks: white
 .050 aluminum mill finish hurricane panels

If a wind mitigation report is needed please add \$50.00

Florida Shutters Inc. is a state certified contractor

Quoted prices do not include any permits and/or engineering fees

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard industry practices. Any alteration or deviation from above specifications involving extra costs, will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements are contingent upon strikes, accidents or delays beyond our control. This proposal subject to acceptance within 30 days. Authorized Signature Tom Pease Jr.

In the unusual event in which the customer chooses to cancel a shutter order, the security deposit will not be returned.

Sub-Total	\$2,499.00
Florida Sales Tax Included	
Total Contract Amount	\$ 2,499.00
Deposit Due on Order:	500.00
Approx. Delivery Date: 30 weeks	
Balance Due on Completion	\$ 1,999.00

Acceptance of Proposal

The above prices, specifications and conditions are hereby accepted. You are authorized to do the work specified. Payment will be made as outlined above.

ACCEPTED:

Signature:

Greg Falk, president Groovy Properties LLC

Date: Feb 12, 2018

JOB ADDRESS 403 21st Pl SE

WIND SPEED 160 EXPOSURE D



**These Tables Are For Windows, Doors and Shutters
in One and Two Family Dwellings**

REVIEWED

OCT 11 2018

Doors and Windows Installed In Buildings with a Mean Roof Height of 30' or Less Located in Exposures B, C or D Table R301.2 [2] altered per R 301.2.1.6 of the F B C Residential

INDIAN RIVER COUNTY
BUILDING DIVISION

COMPONENTS AND CLADDING WORST CASE DESIGN PRESSURE [PSF]

160 mph wind speed zone is east of I 95 and 150 mph is west of I 95, per current I.R.C. Wind speed map

	160 Exp. B	160 Exp. C One Story	160 Exp. C Two Story	160 Exp. D One Story	160 Exp. D Two Story
Zone 4	+27.7 -30.0	+33.5 -36.3	+38.8 -42.0	+40.7 -44.1	+46.0 -49.8
*Zone 5	+27.7 -37.0	+33.5 -44.8	+38.8 -51.8	+40.7 -54.4	+46.0 -61.4
	150 Exp. B	150 Exp. C One Story	150 Exp. C Two Story	150 Exp. D One Story	150 Exp. D Two Story
Zone 4	+24.3 -26.0	+29.4 -31.5	+34.0 -36.4	+35.7 -38.2	+40.3 -43.2
*Zone 5	+24.3 -32.0	+29.4 -38.7	+34.0 -44.8	+35.7 -47.0	+40.3 -53.1

*End-Zone 5 is NEVER less than 4 ft.

Per section R402.3 of the F.B.C Energy Conservation all fenestrations (fixed or movable vertical windows, opaque doors, glazed doors, glazed block and combination opaque/glazed doors) shall comply with the U factor and S.H.G.C as stated in table R 402.1.2 or provide a performance based energy code Non-impact rated glazing requires a maximum U factor of .40 and S.H.G.C of .25 per Table R402.1.2 Impact rated glazing requires a maximum U factor of .65 and S.H.G.C of .25 per Table R402.1.2 Note j

WINDOWS AND DOORS:

Remove existing windows and doors, secure existing bucks prior to installing new windows or doors.
Have product approval available at time of inspection.

Glazing in hazardous locations must comply with R308 of the FBC Residential

SHUTTERS:

Install shutters per R301.2.1.2 of the FBC Residential and have product approval available at time of inspection.

NOTES:

Per Florida Building Code Existing 707.4(1), shutters or impact-resistant glass is required when more than 25% of the glazed openings are replaced within any 12-month period.

Means of Escape must be provided/maintained per R310.4 of the FBC Residential.

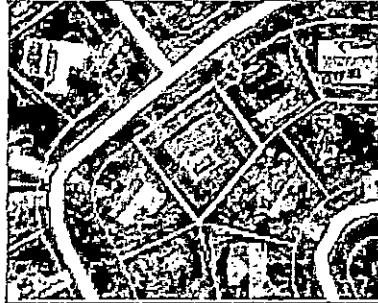
Miami Dade or Florida Product Approval #

FL 11732-R3

Data For Parcel 33403100005009000008.0

Improvements Data

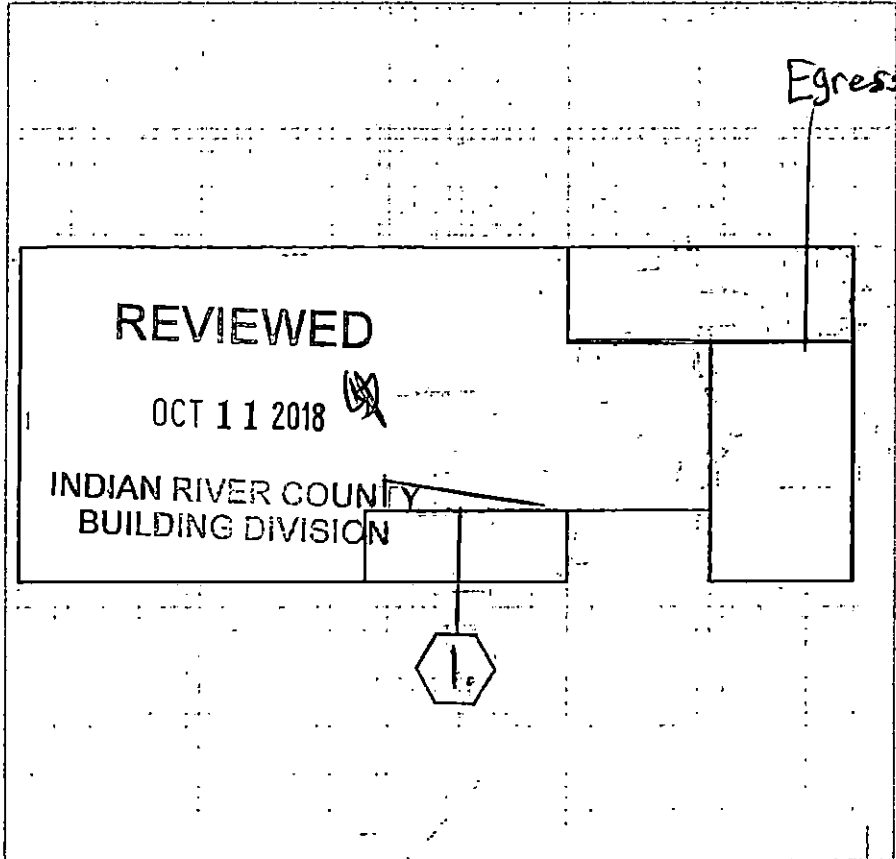
Parcel:	33403100005009000008.0
Owner:	GROOVY PROPERTIES LLC
Site Address:	403 21ST PL SE VERO BEACH, FL 32962



[+] Map this property.

Card

Sketch



FLORIDA SHUTTERS^{INC}
 1055 Commerce Avenue
 Vero Beach, FL 32960-5772
 (772) 569-2200 1-800-741-2202

 - .050 Aluminum Panels

PLAN

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT

Confirm. #: 481

FENCE

PERMIT #: 2014030248 PERMIT TYPE: FN ISSUED DATE: 06/12/2014 BY: BLDDV

JOB DESCRIPTION: 6' BOARD ON BOARD FENCE

JOB ADDRESS: 403 21ST PL SE

BLOCK: 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N

OWNER NAME: ROBERT SMITH JURISDICTION: IRC

FLOOD ZONE: SEE MAP FLOOD ELEV.: FLOOD MAP: INSP AREA:

PROJECT:

APPLICANT: TYPE: OWNER JOB PHONE:

DBA: CERT NBR: JOB FAX:

SETBACKS: FRONT: REAR: LEFT: RIGHT:

FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.

SQFT: JOB VALUE: \$ 1,600.00 #UNITS: #FLOORS: #BLDGs:

TIFF #: ROW NBR: PLAN NBR:

ADDITIONAL INFO:

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work is commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at:

<http://indianriver.clearvillageinc.com/citizenportal/PermitUI/RequestInspections.aspx>

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Robert Smith
Owner/Contractor

6/12/14
Date

ROBERT SMITH
Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code where the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.

**SCOPE OF WORK APPLICATION
INDIAN RIVER COUNTY/CITY OF VERO BEACH**

PARCEL NUMBER: _____
(from tax notice \ receipt)

App. Date: _____
FL Bldg Code: _____
Supplements: _____

OWNER'S NAME: Robert Smith JOB ADDRESS: 403 21st PL SE

BUILDING PERMIT # (IF APPLICABLE): _____

CONTRACT PRICE: 16000.00 * Permit Fee = Contract Price times .00415 = \$ _____
MINIMUM PERMIT FEE: \$75.00

- Fence Mechanical Electrical Plumbing Plumbing/Fuel Gas Insulation
 Irrigation Alarm - low voltage or wireless Shed Tie-Down (DCA approved sheds only)

Scope of the work anticipated in this permit application: 6 foot Board on Board fence

Attach additional sheets if necessary

***NOTICE OF COMMENCEMENT IS REQUIRED IF CONTRACT PRICE EXCEEDS \$2,500. (Air Conditioning - \$7,500)**

“WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.”

Contractor
COMP CARD #: _____

Robert Smith
Owner

As to Contractor:
State of _____
County of _____

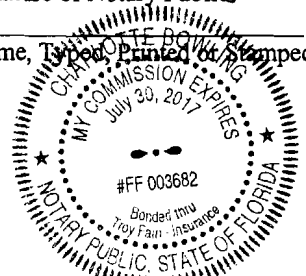
As to Owner:
State of Florida
County of Indian River

The foregoing instrument was acknowledged before me this _____ day of _____, 20____ by _____ who is _____ personally known or who has _____ produced identification. Type identification produced: _____

The foregoing instrument was acknowledged before me this 11th day of March, 2014 by Robert Smith who is _____ personally known or who has X produced identification. Type identification produced: FDI

Official Signature of Notary Public
Notary's Name, Typed, Printed or Stamped
Notary Seal:

Charlotte Blumling
Official Signature of Notary Public
Notary's Name, Typed, Printed or Stamped
Notary Seal:



**OWNER/BUILDER
DISCLOSURE STATEMENT**

REFERENCE: FLORIDA STATE STATUE 489.103(7)

THE OWNER MUST PERSONALLY APPEAR AND SIGN FOR THE BUILDING PERMIT

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

Before me this day personally appeared: _____ who, being duly sworn, deposes and says as follows: I HAVE READ AND FULLY UNDERSTAND THE PROVISIONS OF THIS INSTRUMENT.

Florida State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$75,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building.

It is your responsibility to make sure that people employed by you have a license required by state law and by county, or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers compensation for that employee, all as prescribed by law.

Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

R.S. 1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

R.S. 2. I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

R.S. 3. I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts.

R.S. 4. I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

R.S. 5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

R.S. 6. I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

R.S. 7. I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

**OWNER/BUILDER
DISCLOSURE STATEMENT**

R.S. 8. I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

R.S. 9. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

R.S. 10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 1-850-487-1395 or www.MyFloridaLicense.com for more information about licensed contractors.

R.S. 11. I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address 403 21st PL SE
Uno Bch, FL 32962

R.S. 12. I agree to notify the Indian River County Building Division in writing immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

R.S. 13. I understand and agree that this building cannot be occupied until a "Certificate of Occupancy" has been issued by the Building Official. (NOTE: a Certificate of Occupancy must be requested by the permit holder after the FINAL inspection has been approved).

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

The undersigned further agrees that should he be unable to comply with the above requirements, he shall hire a licensed contractor to take over and complete the job in strict compliance with applicable local codes and ordinances.

Robert Smith
Owners Signature

403 21st PL SE Uno Bch, FL
Present Address 32962

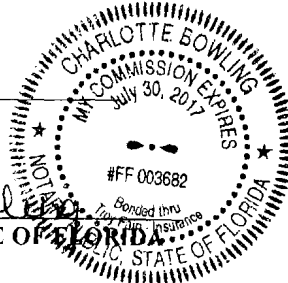
ROBERT SMITH
Owners Printed Name

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

The foregoing instrument was acknowledged before me this 11th day of March, 2014 by Robert Smith who:

is personally known by me - OR -
 produced as identification: FL DL
Type of Identification

Charlotte Bowling
NOTARY PUBLIC: STATE OF FLORIDA





INDIAN RIVER COUNTY
Environmental Planning & Code Enforcement Section
1801 27th Street, Vero Beach FL 32960
772-226-1249 / 772-978-1806 fax
www.ircgov.com

4/28/2014

ROBERT SMITH
403 21ST SE PL
VERO BEACH, FL 32962

RE: Declaration of Covenant for Construction in Easement

Project/Apl. No. : 2014030032 / 72255
Subject Property : 403 21ST PL SE
Parcel Number: 33-40-31-00005-0090-00008.0

Dear ROBERT SMITH:

Your Declaration of Covenant application for construction of a fence through the south ten (10) foot drainage and utility easement and along the west lot line of the south ten (10) foot drainage and utility easement has been reviewed and approved by this department and other reviewing agencies. The Declaration of Covenant document is currently being recorded in the public records. Once the recording process is completed, the original document will be sent to you.

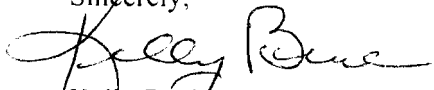
BE ADVISED THAT A COUNTY RIGHT-OF-WAY (ROW) PERMIT MAY BE REQUIRED prior to construction or alteration in a county easement. Please contact County Engineering at (772) 226-1283 to obtain a ROW permit. A county building permit is also required for any proposed structure, including fences.

Additional information, as applicable:

1. FP&L has approved the request. There are facilities in the area of this property and FP&L must maintain access for repairs and/or enhancements. FP&L will not be responsible for damage to customer's property in this easement.
2. Indian River County Engineering Department has approved the request. No drainage impediments observed.
3. Indian River County Utilities Department has approved the request. Please call Sunshine One Locates at 1-800-432-4770 to have all utilities located before any construction begins (see attached map),

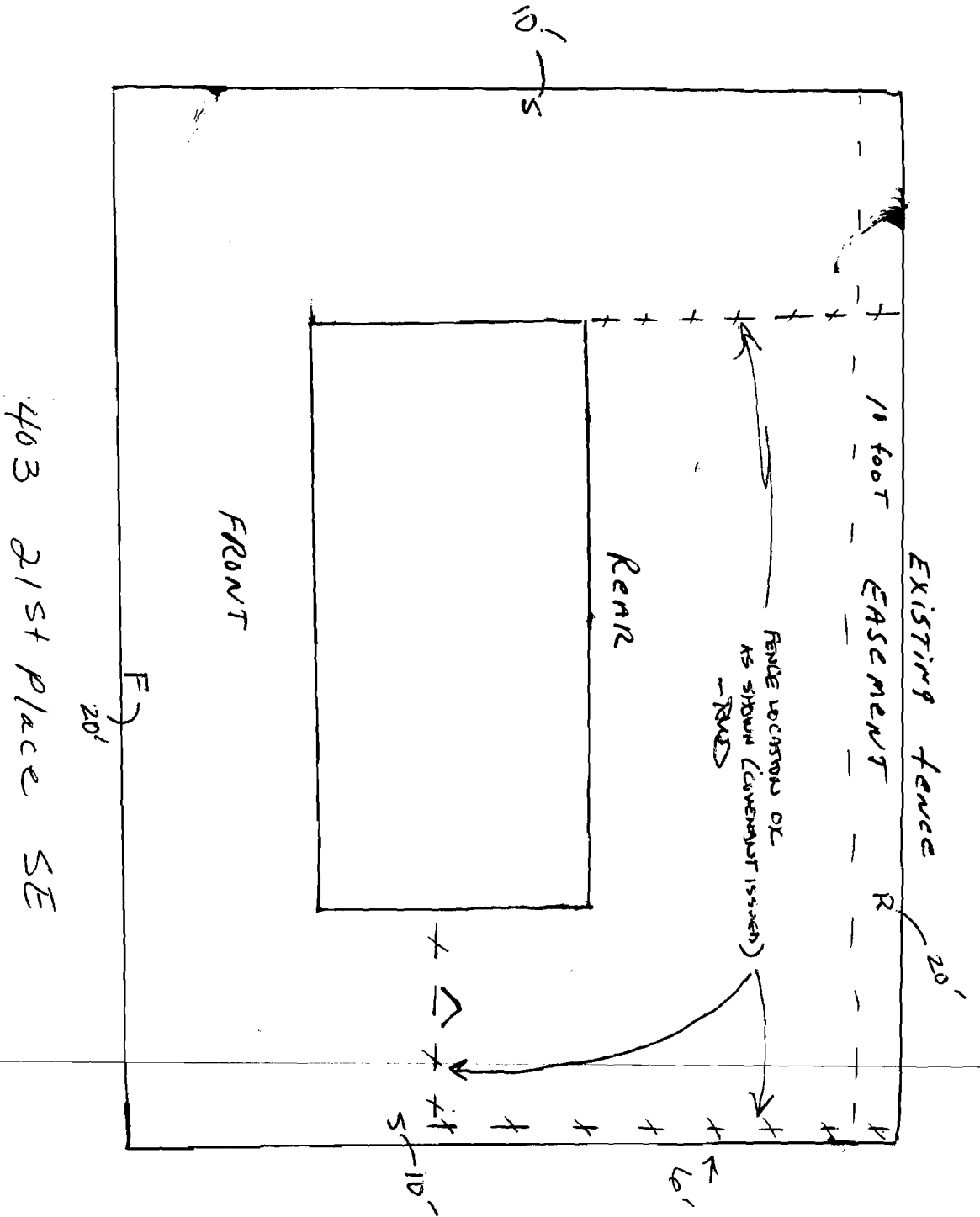
If you have any questions concerning this matter, please do not hesitate to contact this office at (772) 226-1517.

Sincerely,

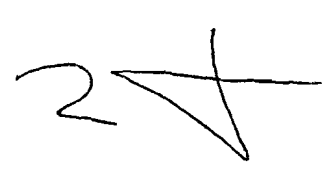

Kelly Buck
Code Enforcement Officer

cc: Stan Boling, AICP, Community Development Director (via email)
Roland M. DeBlois, AICP, Chief, Environmental Planning (via email)
David Hays, Land Development Manager - Engineering (via email)
Kevin Osthus, County Utilities (via email)

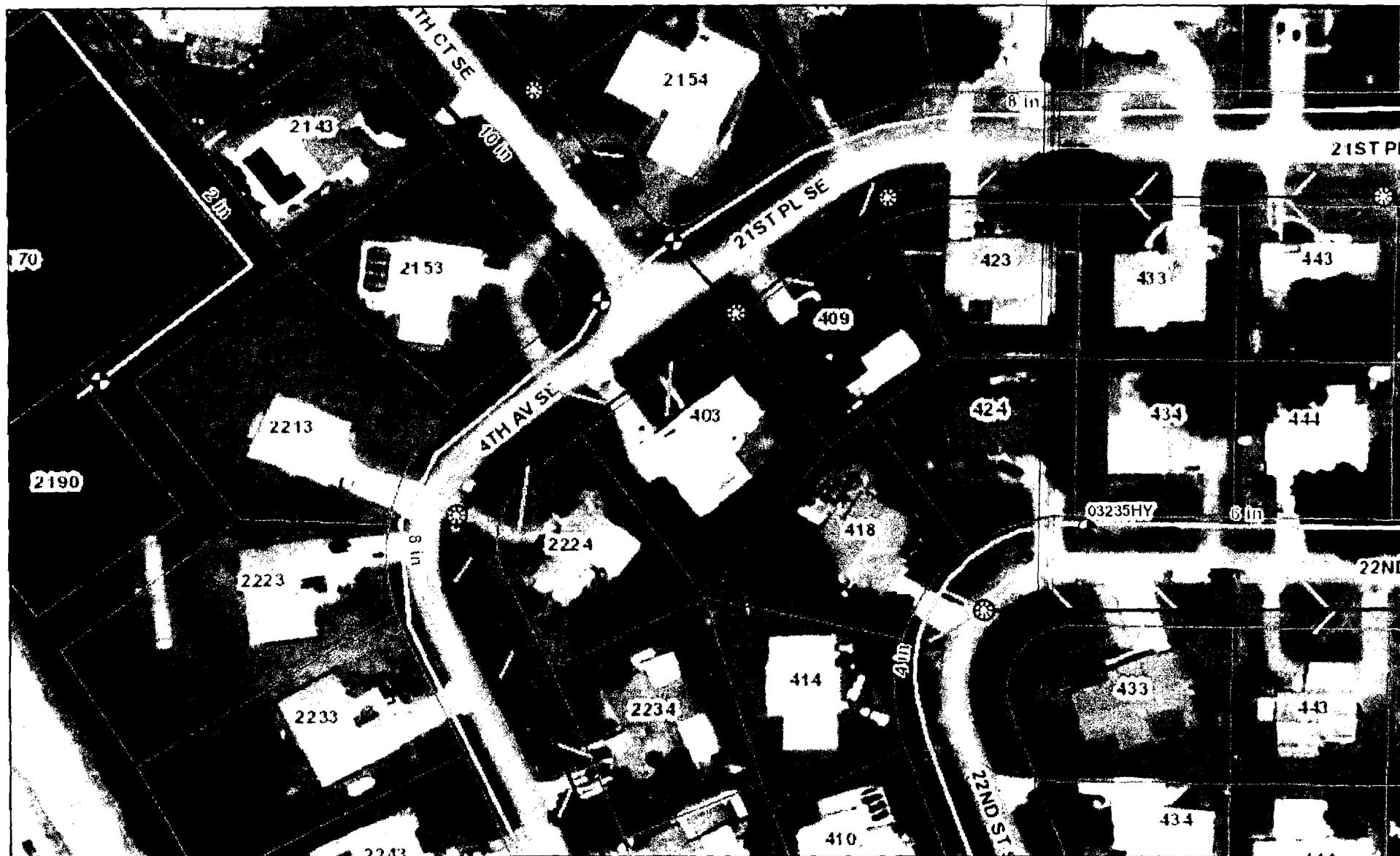
114.19 x 129.78



ZONING: RS-6
SAD
6/12/14 X1258



Indian River County Utility Department

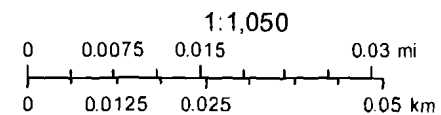


March 17, 2014

Street Intersections



Municipal Boundaries



INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT

Confirm. #: 592

BRADD RESIDENTIAL ADDITION/ALTERATION

PERMIT #: 2018021252 PERMIT TYPE: BRADD ISSUED DATE: 04/24/2018 BY: BLDLK
JOB DESCRIPTION: ADDING 10X 19 CARPORT AND ENCLOSE TO GARAGE
JOB ADDRESS: 403 21ST PL SE
BLOCK: 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1
ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N
OWNER NAME: GROOVY PROPERTIES LLC JURISDICTION: IRC
FLOOD ZONE: X FLOOD ELEV: U FLOOD MAP: 378H INSP AREA:
PROJECT
APPLICANT: SCHLITT, MICHAEL TYPE: CONTRACTOR JOB PHONE: (772)567-1553
DBA: MICHAEL SCHLITT CONSTRUCTION CORP CERT NBR: 1190 JOB FAX: (772)567-1553
SETBACKS FRONT: REAR: LEFT: RIGHT:
FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.
SQFT: 0 JOB VALUE: \$ 34,000.00 #UNITS: #FLOORS #BLDGs:
TIFF #: ROW NBR PLAN NBR:
ADDITIONAL INFO: *Revision/PLAN*

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work is commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at:
www.ircgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Owner/Contractor _____

Date _____

Print Name _____

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.



T.E. SCHLITT
ENGINEERING

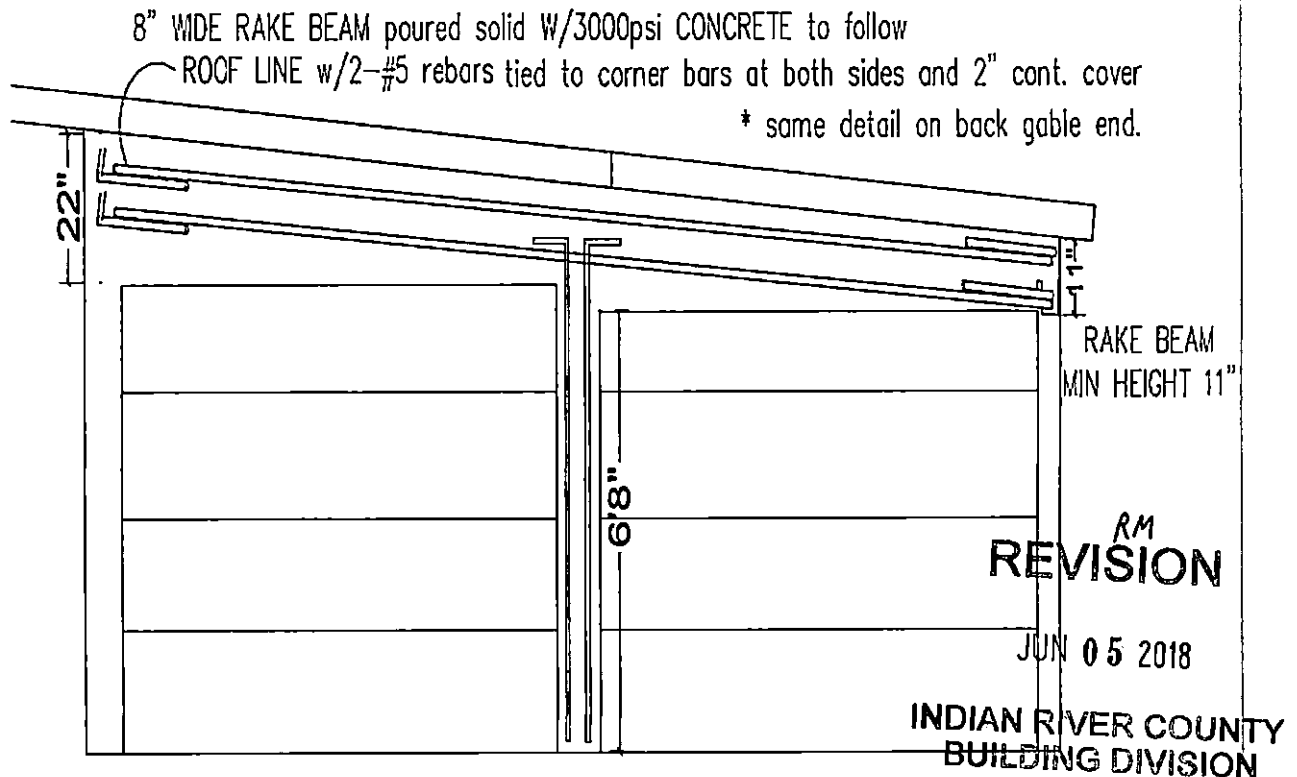
June 5, 2018

Mr. Scott McAdam
Indian River County Building Dept.
1801 27th Street
Vero Beach, FL 32960

Subject: Job: Permit #2018021252
Site Name – Faulk Residence
403 21st Place SE
Vero Beach, Florida
Engineer's Project Number: 18A045

Dear Mr. McAdam:

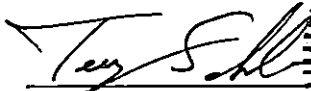
Below is the masonry gable end rake beam detail requested by the inspector for the front and back wall of the above referenced project. Additionally, the side walls will be formed and poured approximately 3" above the originally approved beam block. All other details and notes on the approved set of plans shall be followed accordingly.



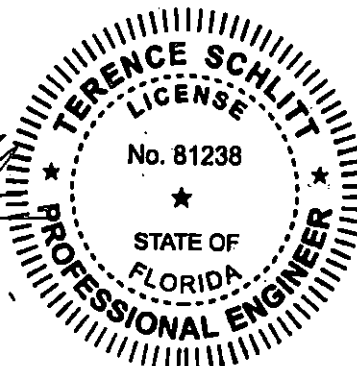
Should you have any questions regarding the above subject, please call.

Very truly yours,

Terence Schlitt, P.E.
FL P.E. # 81238
CA #32295



June 5, 2018



TS/al

cc: Mr. Michael Schlitt, *Michael Schlitt Construction*

REVISION

JUN 05 2018

**INDIAN RIVER COUNTY
BUILDING DIVISION**

INDIAN RIVER COUNTY BUILDING DIVISION

1840 25TH STREET, VERO BEACH, FL 32960

PERMIT

Confirm. #: 632

RE-ROOF

PERMIT #: 2005021315 PERMIT TYPE: RR ISSUED DATE: 02/11/2005 BY: BLDMK
JOB DESCRIPTION: SV CRIMP METAL/FLAT/ SLOPE 3/12 PREVIOUS ROOF MODIFIED BITUMEN
JOB ADDRESS: 403 21ST PL SE

BLOCK: 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1
ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N
OWNER NAME: VONSTEIN, ROBERT JURISDICTION: IRC

FLOOD ZONE: SEE MAP FLOOD ELEV: FLOOD MAP: INSP AREA:

PROJECT:

APPLICANT: MICHAEL DEAN YANCEY TYPE: CONTRACT JOB PHONE: (407)260-6101
DBA: PINNACLE ROOFING INC. CERT NBR: 13595 JOB FAX: (281)754-4826

SETBACKS

FRONT: REAR: LEFT: RIGHT:
FCC CODE: 701 ROOF: REROOF RESIDENTIAL
SQFT: 5000 JOB VALUE: \$ 10,050.00 #UNITS: #FLOORS: #BLDGS:
TIFF #: ROW NBR: PLAN NBR:

ADDITIONAL INFO:

NOC 2/11/05 MK

IN ACCORDANCE WITH APPLICATION ON FILE IN THIS OFFICE CONCEALED WORK MUST BE SHOWN BEFORE BEING COVERED.

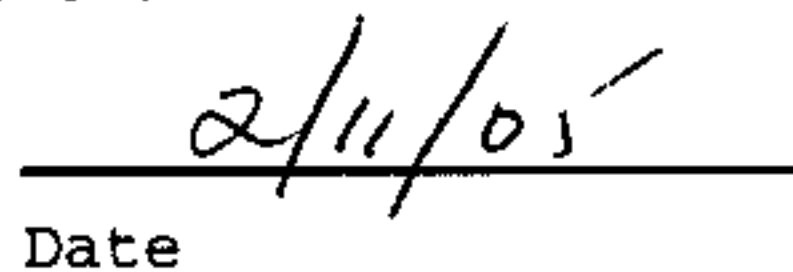
NOTICE: In addition to the requirements in this permit, there may be additional restrictions applicable to this property that may be found in the records of this jurisdiction, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies. FS:553 79(10)

A permit expires if work has not commenced within six(6) months of being issued or if there is no inspection activity for a period of six(6) months per Standard Building Code requirements, "PERMITS" section.

For Inspections, Call 770-5455

This permit issued by order of Building Official.


Owner/Contractor


Date

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

CDPR2020

6532

**ROOFING PERMIT APPLICATION
INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION**

TO ROOF _____ ENLARGE _____ REPAIR _____ RE-ROOF X

PARCEL NUMBER: 33, 40, 31, 00005, 0090, 00008

OWNER'S NAME: Robert VonStein ADDRESS: 403 21st Place SE

BUILDING PERMIT NUMBER (IF APPLICABLE): _____

CONTRACT PRICE: 10,000 ^{10,050}

SQUARE FEET: 5000 ROOF TYPE: Flat + 3/12 ROOF MATERIAL: 5-V Crimp Metal Roof Slope: _____

IF RE-ROOF, PREVIOUS ROOF MATERIAL: Modified Bitumen
(ENGINEER-S CERTIFICATION WILL BE REQUIRED FOR CEMENT TILE RE-ROOF IF PREVIOUS ROOF MATERIAL WAS NOT CEMENT TILE.)

DOES PREVIOUS ROOF MATERIAL CONTAIN ASBESTOS? YES _____ NO X

MINIMUM PERMIT FEE: \$30.00

PLEASE COMPLETE SECTION I, II, OR III BELOW AS APPLICABLE

I. LICENSED ROOFING CONTRACTOR: DBA Pinnacle Roofing Inc Comp Card #: 13595
DATE: _____ BY: Michael Blankman License Number: CC058055
Signature of Roofing Contractor

II. GENERAL, BUILDING OR RESIDENTIAL CONTRACTOR:

EXEMPTION PER FLORIDA STATE STATUE CHAPTER 489: I understand that I am applying for a roofing permit for the installation or repair made under warranty of wood shingles, wood shakes, or asphalt or fiberglass shingle roofing materials on a NEW building of my own construction with all working being done by employees of my construction firm.

DATE: _____ BY: _____ License Number _____ Comp Card #: _____
Signature of Contractor

III. OWNER/BUILDER:

I understand that State law requires construction work to be done by licensed contractors, but as owner and occupant, I may act as my own contractor and assume full responsibility. I understand that I must do the work myself, and that it is unlawful to hire any unlicensed persons to work for me

DATE: _____ BY: _____
Signature of Owner

*CONTRACT PRICE OVER \$2,500, NOTICE OF COMMENCEMENT REQUIRED, UNLESS THIS WORK IS PART OF A PROJECT WITH A BUILDING PERMIT EXCEEDING \$2,500.

“WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.”

POWER OF ATTORNEY

Date: 2-3-05

I hereby name and appoint Ken Margolin
Of Pinnacle Roofing to be my lawful attorney

In fact to act for me and apply to the Indian River County
Building Department for a Re-roof permit

For work to be performed at a location described as:

Section _____ Township _____ Range _____ Lot 8 Block 9
Subdivision Vero Shores
ROBERT VON STEIN - 403 21st PLACE SE
(Owner of Property and Address)

and to sign my name and do all things necessary to this appointment.

Michael Dean Yancey CC058055
Type or Print Name of Register or Certified Contractor and Contractor's License Number

Michael Dean Yancey
Signature of Register or Certified Contractor

The foregoing instrument was acknowledged before me this 3 day of February 2005

By Michael Dean Yancey

Who is personally known to me/who produced _____

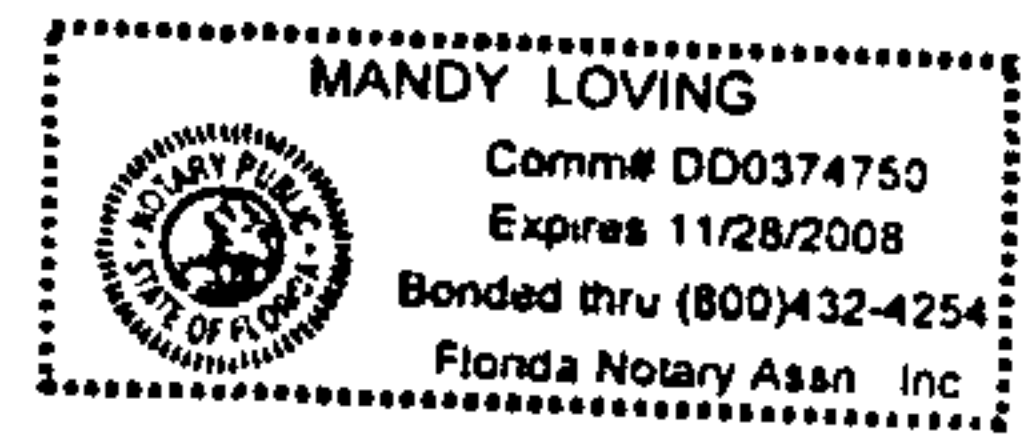
As identification and who did not take oath.

State of Florida

County of Indian River

M. Loving
Notary Public, Orange County, Florida

Seal





PINNACLE ROOFING INC.

598 S. North Lake Blvd. #1040
Altamonte Springs, FL 32701
Fl. Cert. CCC058055



Telephone: (407) 260-6101
Fax: (407) 260-7191

6532

Proposal Submitted to:	Home #	Alternate #	Date:
Robert Von Stein	772/778-4345		11-13-04
Street	City:	State:	Zip:
403 21st PL SE	Vero Beach	FL	32962
Furnish and install a	Manufacturer	Style	Year
	Gibraltar	Serlok-26GA	30
	3 Tab Shingle	Architectural	Color
			Colonial White
Furnish and install a	Manufacturer	Style	Year
	2-Stage Polyethylene		
		Type	Color
			White

- STRIP OFF AND HAUL AWAY 1 LAYERS OF ~~Roofing~~ ¹⁸ modified Bitumen
- PREPARE THE EXISTING DECK FOR ROOF INSTALLATION; ~~WOOD DECK~~ REPLACED AT 775 PER SHEET if needed
- RE-DECK WITH 3/8 PLYWOOD if needed
- APPLY A 30 LB. FELT BASE INSTALL A SHINGLE PERIMETER STARTER COURSE
- INSTALL ICE & WATER SHIELD (FOR LOW SLOPE APPLICATIONS)
- RESET EXISTING HEATER VENTS AND PAINT ALL TO MATCH.
- REPLACE ALL PLUMBING VENTS AND PAINT TO MATCH
- ___ CLOSED VALLEYS ___ OPEN VALLEYS WITH GALVANIZED METAL W-TYPE _____ COLOR _____
- ___ NAIL EACH SHINGLE WITH A MINIMUM OF 6 1-1/4" GALVANIZED NAILS () RIDGE CAP 12" TAB
- ___ REFLASH THE CHIMNEY WITH NEW STEP FLASHING AS NEEDED.
- REPLACE EXISTING DRIP EDGE WITH FACTORY COATED METAL EDGING IN BROWN COLOR
- ___ ROOF TO SIDEWALLS. INSPECT & RESEAL THE EXISTING STEP-FLASHING.
- ___ RESEAL ___ REPLACE ___ SKYLIGHTS, ___ LENSES ___ COLOR _____
- INSTALL ___ ALUMINUM TURBINES 1 AIR HAWK VENTS _____ POWER VENTS _____
- ___ INSTALL ___ LF OF RIDGEVENT SYSTEM
- ___ OPEN RAFTERS ___ CATHEDRAL CEILINGS EXISTING LEAKS ^(YES/NO)
- REMOVE OUTSIDE DEBRIS PROMPTLY FROM JOB; ROLL YARD, DRIVEWAY WITH MAGNETIC NAIL SWEEPER
- HIDDEN SIGHT CONDITIONS. ROOF DEFLECTIONS YES/NO CONTRACTOR NOT RESPONSIBLE FOR PRE-EXISTING CONDITIONS
- 10 YEAR NO LEAK WORKMANSHIP WARRANTY TWO YEAR ON FLAT/LOW SLOPE WORKMANSHIP WARRANTY

ADDITIONAL WORK DESCRIPTION:

25' x 350' = \$8750 - polyethylene #10,050
 25' x 350' = \$1300 Serlok 26GA White 30yr
 \$1500 DOWN Balance Due at completion (CK# 2771)

Claim# HO40034994 INS. CO. AIG PHONE# 800-562-2208 x7600
Jody GUERINGSMAN 877-4839-8151

Pinnacle Roofing Inc. will invest its time and expertise in assisting the homeowner with the insurance claim. This proposal is contingent upon the insurance company paying for the roof and will be void if the claim is disallowed by the insurance company. The insurance company will determine and set the price of the work to be done. The Homeowners and Pinnacle Roofing Inc. agree to do the work as specified on the insurance Loss Sheet/Claim Form. The homeowner's out of pocket expense will not exceed the deductible amount, unless upgrades are added.

Signature Robert L. Von Stein Homeowner
 Signature Derrick Barker Pinnacle Roofing Inc.

THE ONLY COST TO HOMEOWNER IS THEIR DEDUCTIBLE. THE BALANCE IS PAID BY INS. CO. PER FINAL LOSS INVOICE.

Proposal written by DERRICK BARKER/LYNN Date 11-13-04 Call # 772-360-8901
 ACCEPTANCE OF PROPOSAL: The above specifications are satisfactory and are hereby accepted. PINNACLE ROOFING INC. is authorized to do the work as specified. No verbal work descriptions between Pinnacle Roofing Inc. and customer will be accepted. Payment will be made as outlined above.

Signature Robert L. Von Stein Date 11/13/04

Please make all checks payable or co-payable to Pinnacle Roofing Inc. Only.

Thank You

Parcel Identification Number 33-46-31-00005-0070-00008

Prepared By.

*Need
copy*

Return to: PINNACLE ROOFING, INC.
598 S. NORTHLAKE BLVD., #1040
ALTAMONTE SPRINGS, FL 32701
NOTICE OF COMMENCEMENT

6532

State of Florida
County of Indian River

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

1. Description of property: (legal description of property, and street address if available)
VERO SHORES SUB UNIT 1 BIK 9 LOT 8 PBI 5-52
2. General description of improvement(s)
Remove 25 sq ft Pearl & stick 3/12
Install 25 sq Polyethylene, Install 25 sq of Santok Metal Roofing
3. Owner information
Name Robert Von Stein Telephone Number 772-778-4845
Address 403 21st PL SE Fax Number
VERO BEACH, FL 32962 Interest in Property OWNER
4. Fee Simple Title Holder (if other than owner shown above)
Name Telephone Number
Address Fax Number
5. Contractor PINNACLE ROOFING, INC. Telephone Number
Name 598 S. NORTHLAKE BLVD Fax Number
Address SUITE 1040
6. Surety (if any) ALTAMONTE SPRINGS FL 32701 Telephone Number
Name Fax Number
Address Amount of bond \$ _____
7. Lender (if any)
Name Telephone Number
Address Fax Number
8. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(a)7., Florida Statutes.
Name Telephone Number
Address Fax Number
9. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.
Name Telephone Number
Address Fax Number

10. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): _____

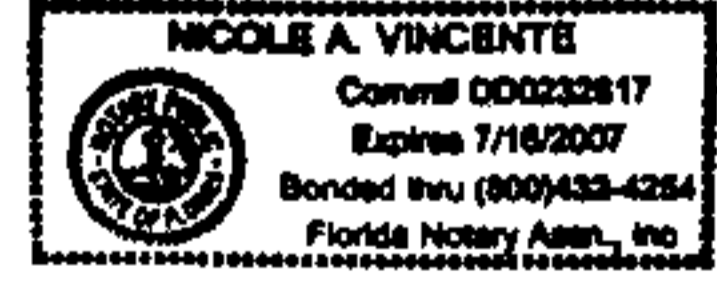
11/13/04
Date Signed Robert Von Stein
Signature of Owner [Note: per Section 713.13(1)(g), "owner must sign, and no one else may be permitted to sign in his or her stead."]

Sworn to and subscribed before me this 13 day of November 04 by
Robert Von Stein
who is _____ personally known to me OR produced FL DL
as identification.

Nicole A. Vincente
Signature of Notary (notary's seal to appear below)

Form Revised: 3/98

FL DL# V523-772-23-209



STATE OF FLORIDA
INDIAN RIVER COUNTY
THIS IS TO CERTIFY THAT THIS IS A
TRUE AND CORRECT COPY OF THE
ORIGINAL ON FILE IN THIS OFFICE.

BY J.K. Barton CLERK
Nicole A. Vincente DEPUTY CLERK
DATE 2/11/2005

SCA

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT

Confirm. #: 592

BRADD RESIDENTIAL ADDITION/ALTERATION

PERMIT #: 2018021252 **PERMIT TYPE:** BRADD **ISSUED DATE:** 04/24/2018 **BY:** BLDLK
JOB DESCRIPTION: ADDING 10X 19 CARPORT AND ENCLOSE TO GARAGE
JOB ADDRESS: 403 21ST PL SE
BLOCK: 0090 **LOT:** 00008.0 **SUBDIVISION #:** 602-VERO SHORES SUB UNIT 1
ADDR NBR: 66313 **FOLIO NBR:** 33-40-31-00005-0090-00008.0 **WWP (2X fee):** N
OWNER NAME: GROOVY PROPERTIES LLC **JURISDICTION:** IRC
FLOOD ZONE: X **FLOOD ELEV:** U **FLOOD MAP:** 378H **INSP AREA:**
PROJECT:
APPLICANT: SCHLITT, MICHAEL **TYPE:** CONTRACTOR **JOB PHONE:** (772)567-1553
DBA: MICHAEL SCHLITT CONSTRUCTION CORP **CERT NBR:** 1190 **JOB FAX:** (772)567-1553
SETBACKS FRONT: **REAR:** **LEFT:** **RIGHT:**
FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.
SQFT: 0 **JOB VALUE:** \$ 34,000.00 **#UNITS:** **#FLOORS:** **#BLDGs:**
TIFF #: **ROW NBR:** **PLAN NBR:**

ADDITIONAL INFO:

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work is commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at:
www.ircgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Owner/Contractor

Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.

**INDIAN RIVER COUNTY/CITY OF VERO BEACH
COMBINATION PERMIT
SUB-CONTRACTOR AGREEMENT/AFFIDAVIT**

***Note: Roof coverings other than shingles require licensed roofing contractor.**

Indian River County Contractor Certificate Number: 20650

State of Florida Certification Number (if applicable): CCC1326745

Combination Permit Number (if known): 2018021252

ARK HOME REMODELING INC has agreed to be the subcontractor (type of construction trade indicated below)
 (company/individual name)

- | | | | |
|------------------------------------|--|--|--|
| <input type="checkbox"/> concrete | <input type="checkbox"/> stucco | <input type="checkbox"/> electric | <input type="checkbox"/> aluminum (in-fill only) |
| <input type="checkbox"/> masonry | <input type="checkbox"/> insulation | <input type="checkbox"/> mechanical | <input type="checkbox"/> garage door |
| <input type="checkbox"/> carpentry | <input checked="" type="checkbox"/> roofing* | <input type="checkbox"/> irrigation | <input type="checkbox"/> fuel gas/propane |
| <input type="checkbox"/> drywall | <input type="checkbox"/> plumbing | <input type="checkbox"/> burglar alarm/low voltage | |

for MICHAEL SCHLITT CONSTRUCTION CORP for the project located at 403 21ST PL SE VERO BEACH, FL 32962
 (Name of prime contractor) (street address)

It is understood that, if there is any change of status regarding our participation with the above mentioned project. I will immediately advise the Indian River County Building Department by personally filing a Change of Contractor.

BUSINESS QUALIFIER (original signatures required):

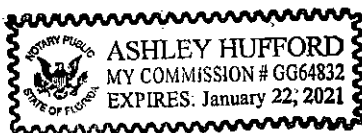
[Signature] ANTHONY PROFETA SR 08/18/2018
 Signature Printed Name Date

NOTARY AS TO CONTRACTOR: {CANNOT BE OLDER THAN 30 DAYS}

State of Florida
 County of Indian River

The foregoing instrument was acknowledged before me this 18th day of June, 2018 by Anthony Profeta who is personally known or who has produced identification. Type identification produced:

[Signature]
 Official Signature of Notary Public
Ashley Hufford
 Notary's Name, Typed, Printed or Stamped



Notary Seal:

SCIA

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT

Confirm. #: 592

BRADD RESIDENTIAL ADDITION/ALTERATION

PERMIT #: 2018021252 PERMIT TYPE: BRADD ISSUED DATE: 04/24/2018 BY: BLDLK

JOB DESCRIPTION: ADDING 10X 19 CARPORT AND ENCLOSE TO GARAGE

JOB ADDRESS 403 21ST PL SE

BLOCK 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N

OWNER NAME: GROOVY PROPERTIES LLC JURISDICTION: IRC

FLOOD ZONE X FLOOD ELEV: U FLOOD MAP: 378H INSP AREA:

PROJECT

APPLICANT: SCHLITT, MICHAEL TYPE: CONTRACTOR JOB PHONE: (772)567-1553

DBA: MICHAEL SCHLITT CONSTRUCTION CORP CERT NBR: 1190 JOB FAX: (772)567-1553

SETBACKS FRONT: REAR: LEFT: RIGHT:

FCC CODE: 434 RES. ADDIT., ALTER., & CONVERS.

SQFT: 0 JOB VALUE: \$ 34,000.00 #UNITS: #FLOORS #BLDGs:

TIFF #: ROW NBR PLAN NBR:

ADDITIONAL INFO:

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires unless work is commenced and a "passed" inspection is obtained within 180 days after its issuance. Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

Schedule Inspections Online at:
www.ircgov.com and select the Building Division Online Services link

This permit issued by order of Building Official.

For administrative inquiries call 772-226-1260.

Owner/Contractor

Date

Print Name

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

105.6 Suspension or revocation. The Building Official is authorized to suspend or revoke a permit issued under the provisions of this code wherever the permit is issued in error or on the basis of incorrect, inaccurate or incomplete information, or in violation of any ordinance or regulation or any of the provisions of this code. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.

**INDIAN RIVER COUNTY/CITY OF VERO BEACH
COMBINATION PERMIT
SUB-CONTRACTOR AGREEMENT/AFFIDAVIT**

***Note: Roof coverings other than shingles require licensed roofing contractor.**

Indian River County Contractor Certificate Number: 20752

State of Florida Certification Number (if applicable): EC13006658

Combination Permit Number (if known): 2018021252

SCHLITT ELECTRICAL CONTRACTING INC has agreed to be the subcontractor (type of construction trade indicated below)
 (company/individual name)

- | | | | |
|------------------------------------|-------------------------------------|--|--|
| <input type="checkbox"/> concrete | <input type="checkbox"/> stucco | <input checked="" type="checkbox"/> electric | <input type="checkbox"/> aluminum (in-fill only) |
| <input type="checkbox"/> masonry | <input type="checkbox"/> insulation | <input type="checkbox"/> mechanical | <input type="checkbox"/> garage door |
| <input type="checkbox"/> carpentry | <input type="checkbox"/> roofing* | <input type="checkbox"/> irrigation | <input type="checkbox"/> fuel gas/propane |
| <input type="checkbox"/> drywall | <input type="checkbox"/> plumbing | <input type="checkbox"/> burglar alarm/low voltage | |

for MICHAEL SCHLITT CONSTRUCTION CORP for the project located at 403 21ST PL SE VERO BEACH, FL 32962
 (Name of prime contractor) (street address)

It is understood that, if there is any change of status regarding our participation with the above mentioned project. I will immediately advise the Indian River County Building Department by personally filing a Change of Contractor.

BUSINESS QUALIFIER (original signatures required):

Gary Schlitt Gary Schlitt 06/25/18
 Signature Printed Name Date

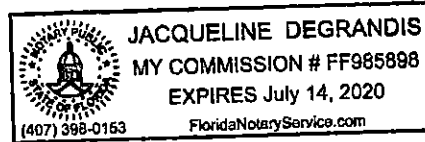
NOTARY AS TO CONTRACTOR: {CANNOT BE OLDER THAN 30 DAYS}

State of FL
 County of Indian River

The foregoing instrument was acknowledged before me this 25th day of June, 2018 by Gary Schlitt who is X personally known or who has _____ produced identification. Type identification produced: _____

Jacqueline DeGrandis
 Official Signature of Notary Public

Jacqueline DeGrandis
 Notary's Name, Typed, Printed or Stamped



Notary Seal:

INDIAN RIVER COUNTY BUILDING DIVISION

1801 27TH STREET
VERO BEACH, FL 32960

PERMIT

Confirm. #: 357

ROOFING

PERMIT #: 2009050466 PERMIT TYPE: RR ISSUED DATE: 05/28/2009 BY: BLD12

JOB DESCRIPTION: RE-ROOF

JOB ADDRESS 403 21ST PL SE

BLOCK 0090 LOT: 00008.0 SUBDIVISION #: 602-VERO SHORES SUB UNIT 1

ADDR NBR: 66313 FOLIO NBR: 33-40-31-00005-0090-00008.0 WWP (2X fee): N

OWNER NAME: VONSTEIN, ROBERT JURISDICTION: IRC

FLOOD ZONE SEE MAP FLOOD ELEV: FLOOD MAP: INSP AREA:

PROJECT

APPLICANT: TYPE: OWNER JOB PHONE:

DBA: CERT NBR: JOB FAX:

SETBACKS FRONT: REAR: LEFT: RIGHT:

FCC CODE: 701 ROOF: REROOF RESIDENTIAL

SQFT: JOB VALUE: \$ 3,000.00 #UNITS: #FLOORS #BLDGS:

TIFF #: ROW NBR PLAN NBR:

ADDITIONAL INFO:

IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND THE APPLICATION ON FILE IN THIS OFFICE, WORK MUST BE INSPECTED BEFORE BEING CONCEALED OR COVERED.

NOTICE: In addition to the requirements in 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. FS:553.79(10)

A permit expires if work has not commenced within six(6) months of being issued or if there is no "Passed" inspection activity for a period of six(6) months per Florida Building Code requirements.

Exception: ALL DEMOLITION PERMITS WILL EXPIRE 60 DAYS FROM ISSUE DATE.

For Inspections, Call 770-5455

This permit issued by order of Building Official.

Robert S. Von Stein
Owner/Contractor

5/28/09
Date

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

This permit is based upon information supplied on the application. Insufficient or erroneous information does not relieve the applicant of any future requirements that may be imposed to comply with Indian River County Ordinances. Engineering reserves the right to modify the original permitted conditions as needed at any time prior to final acceptance in order to comply with Indian River County Ordinances.

INDIAN RIVER COUNTY BUILDING DIVISION
1801 27th Street, Vero Beach, Florida 32960

RESIDENTIAL RE-ROOFING PERMIT APPLICATION

App. Date: _____
FL Bldg Code: _____
Supplements: _____

Effective date: February 1, 2008.

Note: These requirements apply to site-built single family detached residential structures built prior to implementation of the FBC on March 1, 2002.

REVIEWED

MAY 28 2008 6C

I. LEGAL DESCRIPTION: LOT _____ BLOCK _____ SUBDIVISION _____

PARCEL NUMBER: 33-40-31-10000-5009-00008.0

JOB ADDRESS: 403 21st pl SE
(from tax notice \ receipt)

INDIAN RIVER COUNTY
BUILDING DEPARTMENT

Value of Residential Structure: \$ 62,310 **Re-Roof Contract value:** \$ 3,000 **Year Built:** 1960

Single Family Detached **Single Family Attached**

Value less
300,000

- **Value:** show proof of insured value of residential structure or a copy of the ad-valorem tax value.
- **Provide copy of contract**

IV. PROPOSED USE (Check All That Apply)	(Check All That Apply)	Type Construction (Check All That Apply)
<input checked="" type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> NEW CONSTRUCTION	<input type="checkbox"/> TYPE V – Combustible (All Wood Frame)
<input type="checkbox"/> COMMERCIAL	<input type="checkbox"/> ADDITION	<input type="checkbox"/> TYPE III – Exterior Non-Combustible/ Interior Any Material
<input type="checkbox"/> MULTI-FAMILY	<input checked="" type="checkbox"/> ALTERATION	<input type="checkbox"/> TYPE I or II All Non-Combustible (Specify)
<input type="checkbox"/> ACCESSORY Specify: _____	<input type="checkbox"/> DEMOLITION	<input checked="" type="checkbox"/> OTHER (Sprinkler, Timber Const) Specify: <u>RE-ROOF 2/12 pitch</u> <u>FR roof</u>
	NAME & ADDRESS	CONTACT INFORMATION
OWNER		Name:
		E-MAIL:
		DAYTIME PHONE NUMBER: Fax:
CONTRACTOR		Name:
	LICENSE NUMBER: COMP CARD NUMBER:	E-MAIL:
		DAYTIME PHONE NUMBER: Fax:

All re-roofs regardless of value shall comply with the following:
(Exception – where re-roofing over existing roofing) ROOF-OVER _____

Re-nailing: All sheathing and decking shall be re-nailed in accordance with section 201.1 “Hurricane Mitigation Manual” and a secondary water barrier shall be installed.

201.1 Roof sheathing fastening for site-built single family residential structures. For site-built single family residential structures the fasteners and spacing required in Table 201.1 are deemed to comply with the requirements of Section 507.2.2 of the 2004 Florida Existing Building Code.

INDIAN RIVER COUNTY BUILDING DIVISION
1801 27th Street, Vero Beach, Florida 32960

Board roof decking secured with at least two 8d nails into roof framing members shall be deemed to be sufficiently connected. Board roof decking secured with smaller fasteners than 8d nails or with fewer than two 8d nails per board shall be deemed sufficiently connected if two 8d clipped head, round head, or ring shank nails are in place on each framing member.

Supplemental fasteners as required by Table 201.1 shall be 8d ring shank nails at 6 inches on center and 4 inches on center in zone 3 with round heads and the following minimum dimensions:

1. 0.113 inch nominal shank diameter
2. Ring diameter of 0.012 over shank diameter
3. 16 to 20 rings per inch
4. 0.280 inch full round head diameter
5. Ring Shank to extend a minimum of 1 ½ inches from the tip of the nail.
6. Minimum 2-1/4 inch nail length
7. Fastener spacing in accordance with FBC 803.2.3.1

*** **

- **Indicate below which method is to be used to satisfy the secondary water barrier requirements:**

_____ All joints in roof sheathing or decking shall be covered with a minimum 4 in. wide strip of self-adhering polymer modified bitumen tape applied directly to the sheathing or decking. The deck and self adhering polymer modified bitumen tape shall be covered with one of the underlayment systems approved for the particular roof covering to be applied to the roof.

The entire roof deck shall be covered with an approved self-adhering polymer modified bitumen sheet. No additional underlayment shall be required on top of this sheet for new installations.

_____ An asphalt impregnated 30# felt underlayment installed with nails and tin-tabs as required for the HVHZ .

An underlayment complying with section 1507.2.3 of the Florida Building Code, Building fastened as described below or a layer of asphalt impregnated approved #30 felt shall be installed. The felt is to be fastened with 1" round plastic cap or metal cap nails, attached to a nailable deck in a grid pattern of 12 inches (305 mm) staggered between the overlaps, with 6-inch (152 mm) spacing at the overlaps. For slopes of 2:12 to 4:12 an additional layer of felt shall be installed in a shingle-fashion and lapped 19" and fastened as described above.

Residential Structure valued at \$300,000 or more shall comply with the following:

When a roof is replaced on a building that is located in the wind-borne debris region as defined in s. 1609.2 of the Florida Building Code Building (All of Indian River County) and that has an insured value of \$300,000 or more or, if the building is uninsured or for which documentation of insured value is not presented, has a just valuation for the structure for purposes of ad valorem taxation of \$300,000 or more: Roof to wall connections shall be improved as required by section 201.3.

Exceptions:

- 1) Where it can be proved that the structure was constructed under a permit issued by Indian River County after its adoption of the "Southern Standard Building Code 1965 edition" on February 21, 1968.
- (a) Roof to wall connections shall not be required where evaluation and installation of the roof-to-wall connections as prescribed in Section 201.3 would exceed 15 percent of the cost of the re-roofing project.

- **A certified or registered general, building or residential contractor permit application must accompany the re-roof permit application**

INDIAN RIVER COUNTY BUILDING DIVISION
1801 27th Street, Vero Beach, Florida 32960

Residential Structure valued over \$750,000, with any construction activity of \$50,000 or more:

Effective: July 1, 2008

Must provide opening protection in accordance with FBC requirements for new construction

- **A certified or registered general, building or residential or an Aluminum Specialties contractor permit application must accompany the re-roof permit application**

*** **

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit, and that all work will be performed to meet the standards of all laws regulating construction, insurance, and worker's compensation. I understand that sub-contractor affidavits must be obtained for electrical, plumbing, air-conditioning, roofing, insulation, pools, irrigation systems, wells, or any other work that is allowed to be included in this permit.

Properties on which earth spills or other debris falls shall be cleaned immediately. All streets, sidewalks, and curbs damaged due to this construction shall be repaired to the satisfaction of the engineering department prior to the issuance of certificate of completion.

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

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Robert L. Von Stein
Signature of Owner or Agent

And/or _____
Signature of Contractor

{To sign as an Agent for the Owner you must have a Florida Form Power of Attorney signed by the Owner and Notarized with two additional witnesses other than the Notary}

Date: 5/28/09

Date: _____

As to Owner:

As to Contractor:

State of Florida
County of Indian River

State of _____
County of _____

The foregoing instrument was acknowledged before me this 28th day of May, 2009 by

The foregoing instrument was acknowledged before me this _____ day of _____, 20__ by

Robert Von-Stein who is _____ personally known or who has produced identification. Type identification produced: FL DL

_____ who is _____ personally known or who has _____ produced identification. Type identification produced: _____

Charlotte Bowling
Official Signature of Notary Public

Official Signature of Notary Public

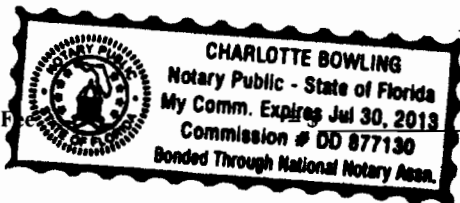
Notary's Name, Typed, Printed or Stamped

Notary's Name, Typed, Printed or Stamped

Notary Seal:

Notary Seal:

Building Permit Fee _____



**OWNER/BUILDER
DISCLOSURE STATEMENT**

REFERENCE: FLORIDA STATE STATUE 489.103(7)

THE OWNER MUST PERSONALLY APPEAR AND SIGN FOR THE BUILDING PERMIT

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

Before me this day personally appeared: _____ who, being duly sworn, deposes and says as follows: I HAVE READ AND FULLY UNDERSTAND THE PROVISIONS OF THIS INSTRUMENT.

Florida State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building.

It is your responsibility to make sure that people employed by you have a license required by state law and by county, or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law.

Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

The undersigned further agrees that should he be unable to comply with the above requirements, he shall hire a licensed contractor to take over and complete the job in strict compliance with applicable local codes and ordinances.

Robert L. Von Stein
Owner's Signature

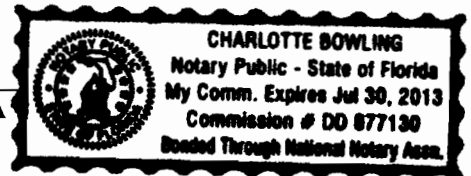
403 S.E. 21st Place
Present Address

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

The foregoing instrument was acknowledged before me this 28th day of May, 2009 by Robert Von-Stein who:

is personally known by me - OR -
 produced as identification: FL DL
Type of Identification

Charlotte Bowling
NOTARY PUBLIC: STATE OF FLORIDA



518-524-4612

**AIR-CONDITIONING/HEATING PERMIT APPLICATION
INDIAN RIVER COUNTY/CITY OF VERO BEACH**

PARCEL NUMBER: _____ (from tax notice / receipt) App. Date: _____
FL Bldg Code: _____
Supplements: _____

NEW: Demolish ADDITION: _____ ALTERATION: _____

OWNER'S NAME: Smith JOB ADDRESS: 403 2nd place S.E.

BUILDING PERMIT # (IF APPLICABLE): _____

CONTRACT PRICE: 4200.00 Permit Fee = Contract Price times .00415 = \$ 79.00
MINIMUM PERMIT FEE: \$75.00

* NOTICE OF COMMENCEMENT REQUIRED IF CONTRACT PRICE TO REPAIR OR REPLACE AIR CONDITIONING SYSTEM IS OVER \$7,500, unless this work is part of a project with a building permit exceeding \$2,500.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

CERTIFICATION ON AIR-CONDITIONING/HEATING EQUIPMENT

AIR-CONDITIONING EQUIPMENT:

MODEL: TRANE

SIZE (TON): 3 1/2

EER OR SEER RATING: 16

HEATING EQUIPMENT: NOTE: Be sure to mark kW rating on air handler for proper size overcurrent protection.

TYPE: electric

Btu RATING: 10

DUCTS:

Must be installed in accordance with FBC Mechanical and Energy Code.

Mechanical Contractor
COMP CARD #: _____

Owner

State of Florida
County of Indian River

State of _____
County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____ by _____ who is _____ personally known or who has _____ produced identification.

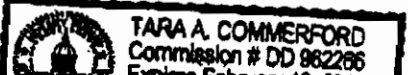
The foregoing instrument was acknowledged before me this _____ day of _____, 20____ by _____ who is _____ personally known or who has _____ produced identification.

Type identification produced: _____
[Signature]
Official Signature of Notary Public

Official Signature of Notary Public

Notary's Name, Typed, Printed or Stamped Notary Seal:

Notary's Name, Typed, Printed or Stamped Notary Seal:





DesignStar Load Calculation

Results are intended for use with Rheem heating and cooling systems only

The New Degree of Comfort™

Customer Information

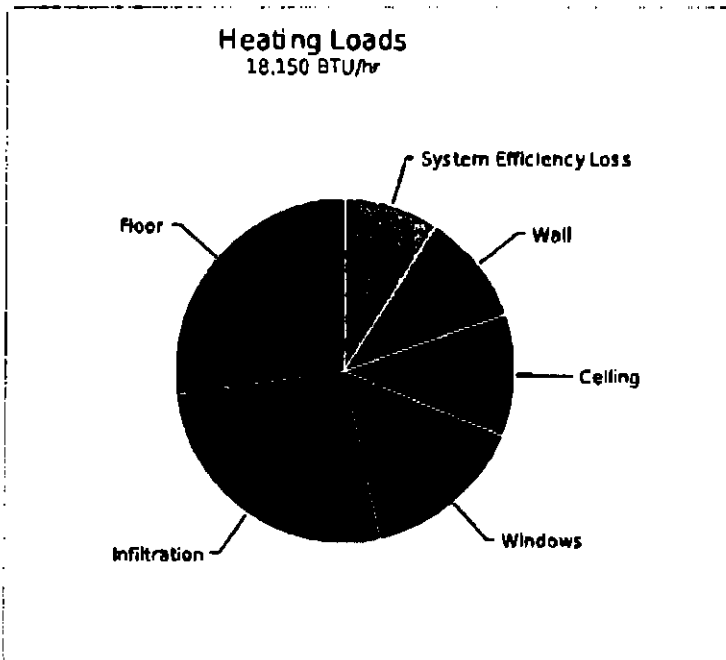
Location:
Street Address: 403 21st place s.e. INDIAN RIVER, FL 32860
Latitude, Longitude: 26.6726°, -80.0706°
House Square Footage: 1700 sq. ft.
Name: Phil Jeffers
Phone: 123-123-1234
Email: example@mail.com

Design Conditions

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

Heating Loads

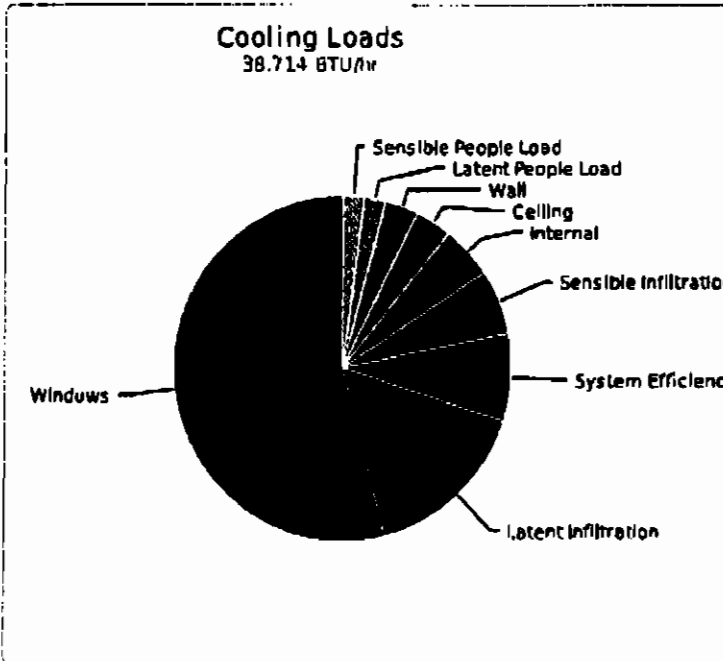
Area	Btuh	% of load
Wall	1907	10.5
Floor	4927	27.1
Ceiling	2072	11.4
Windows	2795	15.4
Infiltration	4800	26.4
System Efficiency Loss	1650	9.1
Total:	18150	



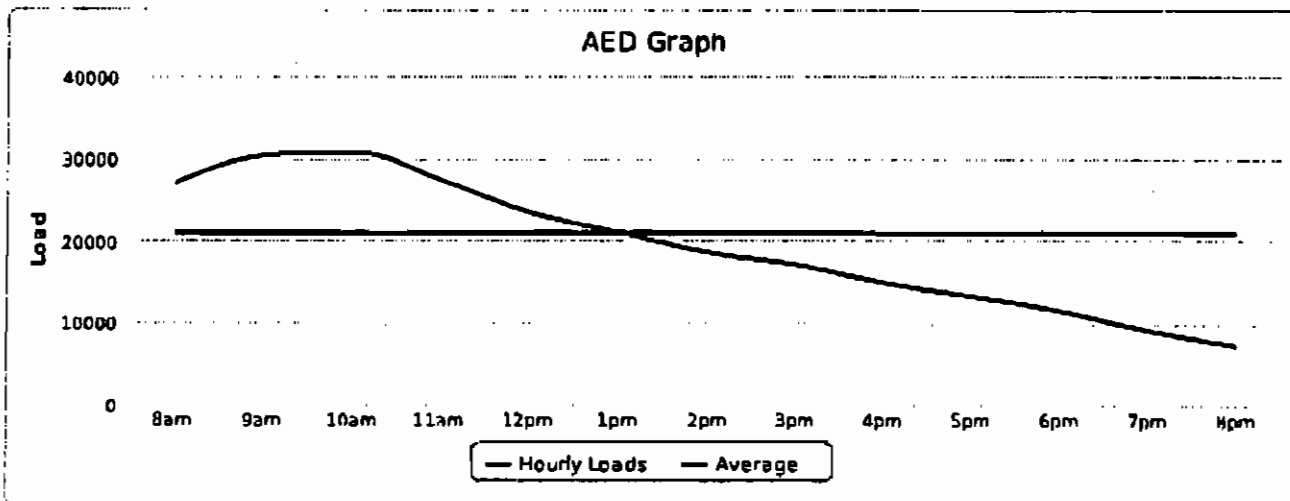
Cooling Loads

Area	Btuh	% of load
Wall	1243	3.2
Ceiling	1352	3.5
Windows	20904	54
Sensible Infiltration	2348	6.1
Latent Infiltration	6192	16
System Efficiency Gain	3204	8.3
Internal	1907	4.9
Sensible People Load	782	2
Latent People Load	782	2
Total:	38714	

Sensible load	31740
Latent load	8974
SHR	0.82
Capacity at .75 SHR	3.53 Tons



Adequate Exposure Diversity



ACCA Manual S

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

Summer Outdoor	90°F
Summer Wet Bulb	78°F
Summer Indoor	75°F
Summer Design Gains	50%
Winter Outdoor	47°F

Winter Indoor	70°F
Sensible Cooling	31,740 Btu/h
Latent Cooling	8,974 Btu/h
Required Cooling Airflow	1,443 CFM
Sensible Heating	18,150 Btu/h
Required Heating Airflow	236 CFM

All calculations based on the ACCA Manual J 8th Edition. All computed results are Estimates. Product provided by Energy Design Systems and Idea Tree

COMBINATION BUILDING PERMIT APPLICATION (Page 1 of 2)
INDIAN RIVER COUNTY

I. LEGAL DESCRIPTION: LOT 17+18 BLOCK A SUBDIVISION Vero Lake Estates ^{unit 6}
 App. Date: 5-27-09
 PARCEL NUMBER: _____ FL Bldg Code: _____
 Supplements: _____

JOB ADDRESS: 7916 98th Ct Vero Beach Fl 32967
(from tax notice \ receipt)

II. CONTRACT / ESTIMATED CONSTRUCTION COST: \$ 2400.00
 Permit Fee = Construction value multiplied by .00415 Minimum Permit Fee = \$200

III. TOTAL SQUARE FOOTAGE UNDER-ROOF: _____ # of Bedrooms: _____

Water: City County Well Sewer: City County Septic Sq Ft Under Air _____ # of Bathrooms: _____ # of Garages: _____
 (Circle one) (Circle one)

IV. PROPOSED USE (Check All That Apply)	(Check All That Apply)	Type Construction (Check All That Apply)
____ RESIDENTIAL	<input checked="" type="checkbox"/> NEW CONSTRUCTION	____ TYPE V - Combustible (All Wood Frame)
____ COMMERCIAL	<input checked="" type="checkbox"/> ADDITION	____ TYPE III - Exterior Non-Combustible/ Interior Any Material
____ MULTI-FAMILY	____ ALTERATION	____ TYPE I or II All Non-Combustible (Specify)
<input checked="" type="checkbox"/> ACCESSORY Specify: <u>Screen Enclosure</u>	____ DEMOLITION	____ OTHER (Sprinkler, Timber Const) Specify: _____

	NAME & ADDRESS	CONTACT INFORMATION	Job Email to
OWNER	<u>Doug Millwater</u> <u>7916 98th Ct</u> <u>Vero Beach Fl 32967</u>	Name: <u>Doug Millwater</u>	
		E-MAIL:	
		DAYTIME PHONE NUMBER: Fax: <u>772-633-0974</u>	
TITLE HOLDER (If Other Than Owner)	<u>// //</u>	Name: <u>// //</u>	
		E-MAIL:	
		DAYTIME PHONE NUMBER: <u>// //</u>	
CONTRACTOR	LICENSE NUMBER: COMP CARD NUMBER:	Name:	
		E-MAIL:	
		DAYTIME PHONE NUMBER: Fax:	
ARCHITECT		E-MAIL:	
		DAYTIME PHONE NUMBER:	
ENGINEER	<u>Jason W. Short.</u>	E-MAIL:	
		DAYTIME PHONE NUMBER: <u>(772) 473-2571</u>	

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit, and that all work will be performed to meet the standards of all laws regulating construction, insurance, and worker's compensation. I understand that sub-contractor affidavits must be obtained for electrical, plumbing, air-conditioning, roofing, insulation, pools, irrigation systems, wells, or any other work that is allowed to be included in this permit.

Properties on which earth spills or other debris falls shall be cleaned immediately. All streets, sidewalks, and curbs damaged due to this construction shall be repaired to the satisfaction of the engineering department prior to the issuance of certificate of completion.

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

COMBINATION BUILDING PERMIT APPLICATION (Page 2 of 2)
INDIAN RIVER COUNTY

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

[Signature]
 Signature of Owner or Agent
 {To sign as an Agent for the Owner you must have a Florida Form Power of Attorney signed by the Owner and Notarized with two additional witnesses other than the Notary}
 Date: 5/27/09

And/or _____
 Signature of Contractor
 Date: _____

As to Owner:
 State of Florida
 County of Indian River

As to Contractor:
 State of _____
 County of _____

The foregoing instrument was acknowledged before me this 27th day of May, 2009 by Douglas Millwater who is _____ personally known or who has produced identification. Type identification produced: FL DL.

The foregoing instrument was acknowledged before me this _____ day of _____, 20__ by _____ who is _____ personally known or who has _____ produced identification. Type identification produced: _____.

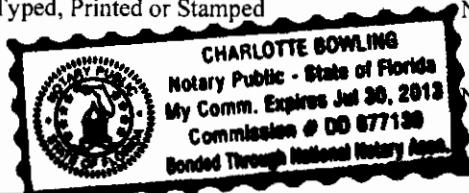
Charlotte Bowling
 Official Signature of Notary Public

 Official Signature of Notary Public

Notary's Name, Typed, Printed or Stamped

Notary's Name, Typed, Printed or Stamped

Notary Seal:



Notary Seal:

This Area for Building Division Use Only:

Building Living/Non Living Area: _____ sq ft BR ___ Bath ___ Garage ___

Value: = \$ _____ Per: Plans Examination Contract

Building Permit Fee: = \$ _____
 Radon Fund (State Mandated) = \$ _____
 BCAI Fund (State Mandated) = \$ _____
 Other _____
 Total Fees = \$ _____

ADD REF # _____
 PROJECT # _____

**OWNER/BUILDER
DISCLOSURE STATEMENT**

REFERENCE: FLORIDA STATE STATUE 489.103(7)

THE OWNER MUST PERSONALLY APPEAR AND SIGN FOR THE BUILDING PERMIT

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

Before me this day personally appeared: _____ who, being duly sworn, deposes and says as follows: **I HAVE READ AND FULLY UNDERSTAND THE PROVISIONS OF THIS INSTRUMENT.**

Florida State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building.

It is your responsibility to make sure that people employed by you have a license required by state law and by county, or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law.

Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

The undersigned further agrees that should he be unable to comply with the above requirements, he shall hire a licensed contractor to take over and complete the job in strict compliance with applicable local codes and ordinances.

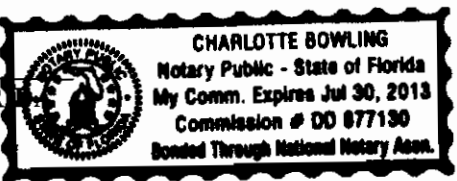
[Signature] 916 9879 ct Vero Beach FL 32967
Owner's Signature Present Address

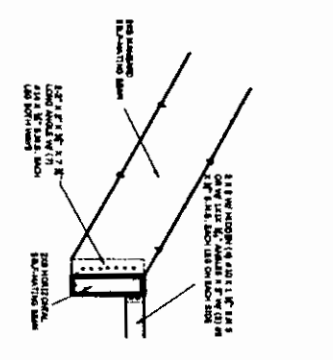
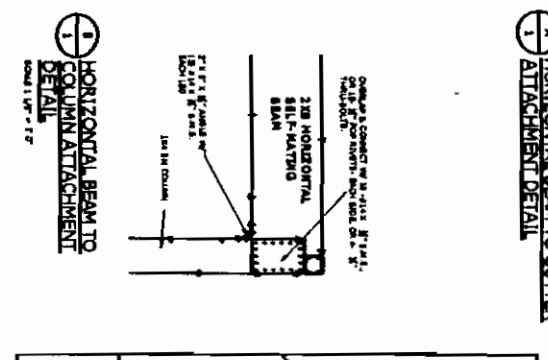
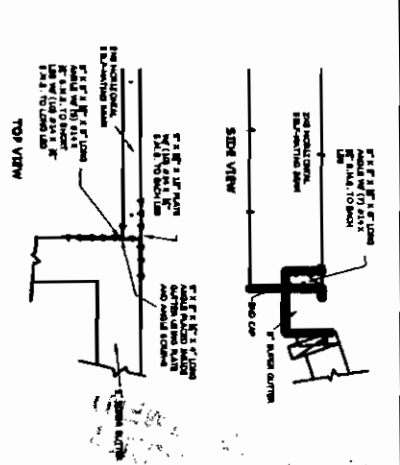
STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

The foregoing instrument was acknowledged before me this 27th day of May, 2009 by Douglas Millwater who:

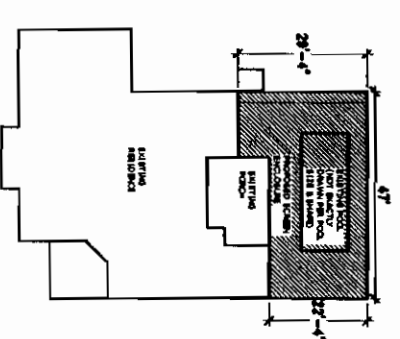
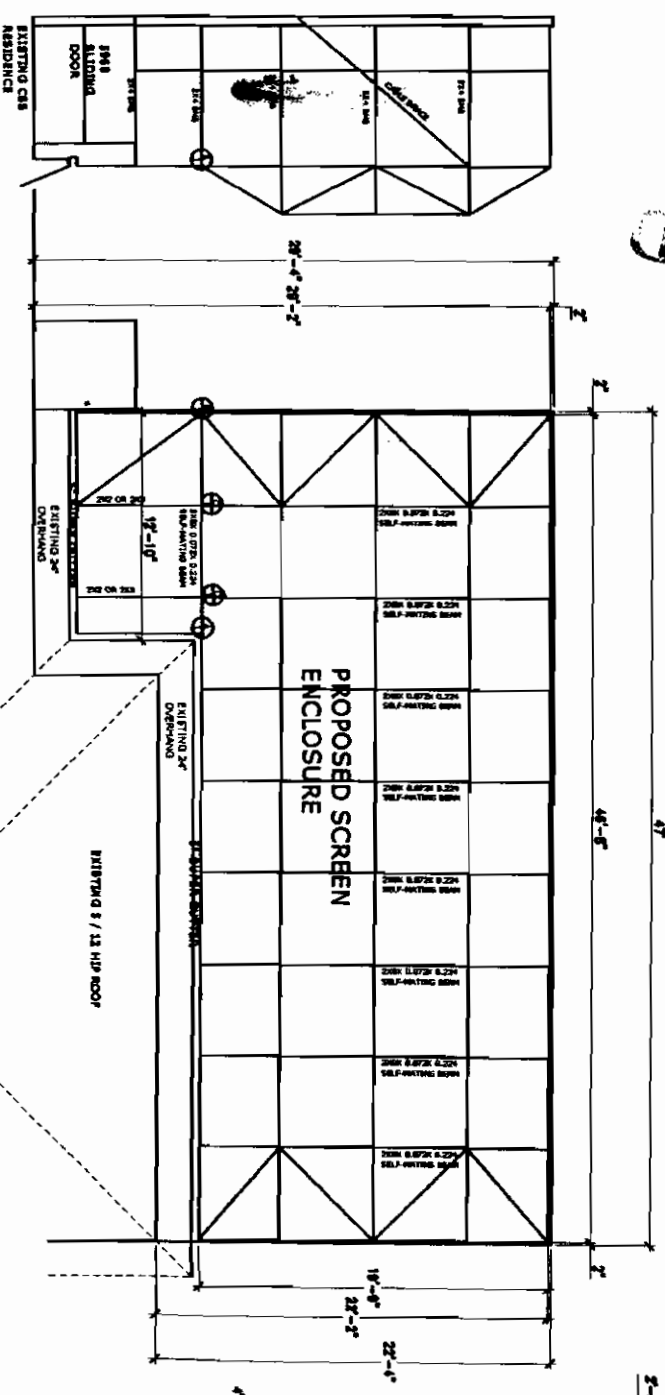
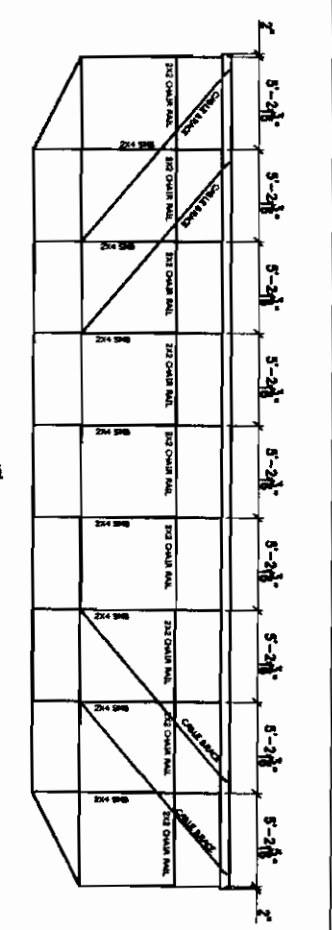
is personally known by me - OR -
 produced as identification: FL DL
Type of Identification

Charlotte Bowling
NOTARY PUBLIC: STATE OF FLORIDA





Handwritten notes:
 1.11\"/>



NOTES:
 1. DESIGN PRESSURE, ADJUSTMENT FACTOR: 1) HORIZONTAL PRESSURE ON WINDOW SURFACES - 18 PSF;
 2. HORIZONTAL PRESSURE ON WINDOW SURFACES 18 PSF; VERTICAL PRESSURE-SCREEN SURFACES 1 PER VERTICAL
 PRESSURE ON SOLID SURFACES 18 PSF
 3. WIND PRESSURES DESIGNED FOR SCREEN ENCLOSURES W/ SCREENS OF 60% OPEN ATTACHED W/ PLAT OR ROUND
 STAKE
 4. ALL FASTENERS TO BE 2024-T3 ALLOY, NON-MAGNETIC STAINLESS STEEL, OR CORIUM PLATED OR OTHERWISE
 CORROSION RESISTANT MATERIAL, AND SHALL COMPLY W/ A.I.C. SPECIFICATIONS FOR ALUMINUM STRUCTURE-SECTION
 5. ALL MEMBERS SHALL BE AND HAVE BEEN DESIGNED USING ALUMINUM ALLOY TYP-6063-T5 UNLESS NOTED
 6. THE CONTRACTOR IS RESPONSIBLE TO INSULATE ALUMINUM MEMBERS FROM DISSIPABLE METALS TO PREVENT
 GALVANIC
 7. ELECTRICAL GROUND, AND RELATED WIRING, WHEN REQUIRED, TO BE DESIGNED & INSTALLED BY OTHERS.
 8. ALL SELF-MATING BEAMS SHALL HAVE 98 S.M.S. @ 2\"/>

SCREEN ENCLOSURE PLAN
 ROAD W/ 1'-2"

SCREEN ENCLOSURE PLAN
 ROAD W/ 1'-2"

SCREEN ENCLOSURE PLAN
 ROAD W/ 1'-2"

SCREEN ENCLOSURE PLAN
 ROAD W/ 1'-2"

JASON W. SHORT P.E.
 P.L. LIC. # 99018
 3135 ASHLEY WAY
 VERO BEACH, FL 32906
 772-473-2573

THIS STRUCTURE HAS BEEN ASSIGNED AN ACCORDANCE
 WITH SECTION 1609.06 CHAPTER 2 OF THE 2007 FLORIDA
 BUILDING CODE BY CODES SUPERVISOR.
 DATE: APRIL 20, 2009
 BY: LARRY HARRISON
 CHECKED BY: M
 SCALE: AS SHOWN

REVISIONS

NO.	DATE	DESCRIPTION

SCREEN ENCLOSURE FOR DOUG MILLWATER,
 7818 98TH CT., VERO BEACH, FLORIDA

Handwritten signature: Enclosure + Chase Rick
 Harrison

NOTICE OF COMMENCEMENT

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

PERMIT #: 2009050466 TAX FOLIO #: 33-40-31-00005-0090-00008.0

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

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

lot 8, Bk 90 Vero Shores Sub Unit 1

GENERAL DESCRIPTION OF IMPROVEMENT:

Re-root

OWNER NAME:

Robert Von-Stein

ADDRESS: 403 21st Pl. SE, Vero Beach, FL 32962

PHONE NUMBER: 772-778-4345 FAX NUMBER:

INTEREST IN PROPERTY:

owner/builder

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

CONTRACTOR:

owner/builder

ADDRESS:

PHONE NUMBER: FAX NUMBER:

SURETY COMPANY (IF ANY):

ADDRESS:

PHONE NUMBER: FAX NUMBER:

BOND AMOUNT:

LENDER/MORTGAGE COMPANY:

1996126
THIS DOCUMENT HAS BEEN RECORDED IN THE PUBLIC RECORDS OF INDIAN RIVER COUNTY FL BK-2344 PG-106, Page 1 of 1 05/28/2009 at 11:32 AM.

JEFFREY K BARTON, CLERK OF COURT

ADDRESS:

PHONE NUMBER: FAX NUMBER:

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

NAME:

ADDRESS:

PHONE NUMBER: FAX NUMBER:

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES

OF

TO RECEIVE A

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

PHONE NUMBER: FAX NUMBER:

EXPIRATION DATE OF NOTICE OF COMMENCEMENT:

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

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

X Robert L. Von Stein

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

SIGNATORY'S TITLE/OFFICE

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 28th DAY OF May, 2009 BY: Robert Von-Stein

AS owner FOR owner
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN OR PRODUCED IDENTIFICATION
TYPE OF IDENTIFICATION PRODUCED FL DL

Charlotte Bowling
NOTARY SIGNATURE NOTARY SEAL

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

X Robert L. Von Stein
Signature of Natural Person Signing Above

