

Affix One Clear Photograph for each of the Rear & Side Elevations

Affix Clear Photographs of Adjacent Properties

Attach additional pages if necessary



**AFFIDAVIT OF COMPLIANCE WITH ROOF DECKING ATTACHMENT
HURRICANE MITIGATION RETROFIT FOR EXISTING SITE-BUILT
SINGLE FAMILY RESIDENTIAL STRUCTURES
PURSUANT TO SECTION 553.844 F.S.**

ROOF DECKING ATTACHMENT

To: Lake Worth Building Department
7 N. Dixie Highway
Lake Worth, FL 33460

Re: Owner's Name: 721 N Dixie HWY LLC
Property address: 215 S. Federal Highway
Roofing Permit#: 12-2619

1

Dear Building Official:

I Darma Sainmervil certify that the roof decking attachment and fasteners have been strengthened and corrected as required by the "Manual of Hurricane Mitigation Retrofits for Existing Site-Built Single Family Structures" adopted by the Florida Building Commission by Rule 9B-3.047 F.A.C.

Qualifying Agent

[Handwritten Signature]
Signature of Qualifying Agent

CCC 1326578

DARMA SAINMERVIL
Print Name

STATE OF FLORIDA COUNTY OF

Palm Beach

Sworn to and subscribed before me this

8

day of

Oct

, 20 12

[Handwritten Signature]

Personally Known

NOTARY PUBLIC-STATE OF FLORIDA
Edese S. Simon
Commission # EE018426
Expires: AUG. 18, 2014
BONDED THRU ATLANTIC BONDING CO., INC.

City of Lake Worth
Building Department
1900 2nd Ave N
Lake Worth, FL 33461

Town of L.W.LT
BLK 93

Inspection Request (561) 586-1691 Main Office (561) 586-1647

Application Number 13-00000680 Date 3/19/13
Property Address 215 S FEDERAL HWY
PROPERTY CONTROL NUMBER: 38-43-44-21-15-093-0120
Application type description RESIDENTIAL RE-ROOF
Subdivision Name
Property Use SINGLE FAMILY
Application valuation 10000

Description of Work

REMOVE EXISTING ROOF AND REINSTALL NEW SHINGLES

Property owner DEUTSCHE BANK NATIONAL TR CO
Owner address C/O AMERICAN HOME MRTG
3 ADA
IRVINE CA 926182322
()

Contractor JM PROPERTIES OF WPB INC

--- Structure Information 000 000 REMOVE EXISTING ROOF AND REINSTALL NEW S

* Permit RESIDENTIAL ROOF
Additional desc . . REMOVE EXISTING ROOF AND REINS
Issue Date 3/19/13 Valuation 10000
Expiration Date . . 9/15/13

Special Notes and Comments

* PLEASE BE ADVISED: City of Lake Worth's
Public Services Department requires all
open construction containers within City
limits to be provided by CITY OF LAKE
* WORTH PUBLIC SERVICES. Please contact
PUBLIC SERVICES AT (561)533-7344.
Failure to comply could result in fines
and fees.

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

* March 13, 2013 2:55:33 PM kchristens.
COA#13-00100042. Approved. Diamond asbestos single roof to
architectural asphalt shingle. Please see result letter for
full approval details.

Inspections must be scheduled by 4:00 pm the previous day.
Building Inspections 586-1691. Fire Inspections 561-233-0050
Landscape Inspections 586-1677.
Public Services Inspections 586-1720

Safety is everybody's job!

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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.

City of Lake Worth
 Building Department
 1900 2nd Ave N
 Lake Worth, FL 33461

Inspection Request (561) 586-1691 Main Office (561) 586-1647

Application Number	13-00000680	Page	2
Property Address	215 S FEDERAL HWY	Date	3/19/13
PROPERTY CONTROL NUMBER:	38-43-44-21-15-093-0120		
Application description . . .	RESIDENTIAL RE-ROOF		
Subdivision Name			
Property Use	SINGLE FAMILY		
Permit	RESIDENTIAL ROOF		
Additional desc . .	REMOVE EXISTING ROOF AND REINS		

Required Inspections

Seq	Insp Code	Description	Initials	Date
10	101	BD IN PROGRESS	_____	__/__/__
10	112	BD ROOF METAL/TIN TAG	_____	__/__/__
10	118	BD ROOF SHEATHING	_____	__/__/__
1000	104	BD FINAL	_____	__/__/__

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H

CITY OF LAKE WORTH, FLORIDA
BUILDING DEPARTMENT
PERMIT APPLICATION
"Where the Tropics begin"

B

1900 2nd Ave N
LAKE WORTH, FL 33461
(561) 586-1647
Visit us at Lakeworth.org

MASTER PERMIT NUMBER

PERMIT NUMBER (FOR OFFICE USE ONLY)
13-600

WORK LOCATION

CONTRACTOR

ADDRESS 215 S Federal Hwy
FLOOR/BAY/SUITE/APT # TOWN OF LAKE WORTH
SUBDIVISION _____ BLOCK 93 LOT 12
PARCEL ID# 38-43-44-21-15-093-0120

QUALIFIER NAME DARMA SAINMERVIL
COMPANY NAME JM PROPERTIES OF NPB
ADDRESS 10606 VERSAILLES BLVD
CITY WOLLINGTON STATE FL ZIP 33449
STATE LIC. OR COMPETENCY # CCC1326578
PHONE# 561.804.1248 CELL# 301.786.5744
EMAIL JM-PROPERTIES@COMCAST.NET

PERMIT TYPE

- STRUCTURE
- ADDITION
- ALTERATION
- REPAIR
- FIRE SPRINKLER
- FIRE ALARM
- DRIVEWAY
- APPROACH
- RESIDENTIAL
- WINDOW
- DEMOLITION
- RELOCATION
- ROOFING
- FENCE
- SIGN
- SIDEWALK
- GAS
- FUEL
- COMMERCIAL
- SHUTTER
- ELECTRICAL
- MECHANICAL
- PLUMBING
- POOL
- IRRIGATION
- BACKFLOW
- CHANGE OF CONTRACTOR
- GENERATOR
- DOOR
- OTHER

RECEIVED
MAR 01 2013
By _____

OWNER OF RECORD

NAME LAST FIRST MI
721 NORTH DUNE LLC
ADDRESS 215 S. FEDERAL HWY
CITY LAKE WORTH STATE FL ZIP _____
PHONE _____ CELL _____
TENANT NAME _____

DESCRIBE PROJECT IN DETAIL

Remove existing roof & re-install new system using
ARCHITECTURAL SHINGLES
VALUE \$ 10,000 - SQUARE FOOTAGE 2,000 - CHANGE OF OCCUPANCY OR USE YES NO

PRIMARY PERMIT FEES SHALL INCLUDE THE FEES FOR SUBPERMITS, PROVIDED THAT ALL APPLICABLE SUBCONTRACTOR QUALIFIER SIGNATURES ARE ON THE APPLICATION AND PLANS INCLUDE THE DETAILS OF ALL SUBCONTRACTOR WORK. FAILURE TO INCLUDE THE REQUIRED INFORMATION AT THE TIME OF APPLICATION SHALL REQUIRE THAT A SEPARATE PERMIT BE ISSUED WITH APPROPRIATE FEES BEING CHARGED TO THE APPLICANT. CURRENT REGISTRATION REQUIRED AT TIME OF SUBMITTAL.

Building Contractor: _____ Qualifier/Agent Signature _____	DATE _____	STATE LIC./CERT. OF COMPETENCY _____	BUILDING PERMIT # _____
Electrical Contractor: _____ Qualifier/Agent Signature _____	DATE _____	STATE LIC./CERT. OF COMPETENCY _____	ELECTRICAL PERMIT # _____
Mechanical Contractor: _____ Qualifier/Agent Signature _____	DATE _____	STATE LIC./CERT. OF COMPETENCY _____	MECHANICAL PERMIT # _____
Plumbing Contractor: _____ Qualifier/Agent Signature _____	DATE _____	STATE LIC./CERT. OF COMPETENCY _____	PLUMBING PERMIT # _____
Roofing Contractor: <u>JM PROPERTIES</u> Qualifier/Agent Signature <u>DARMA SAINMERVIL</u>	DATE <u>2/21/13</u>	STATE LIC./CERT. OF COMPETENCY <u>CCC1326578</u>	ROOFING PERMIT # _____

For Additional sub-contractors please use supplemental form.

NOTICE TO PROPERTY OWNERS

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.

BEFORE ANY WORK IS DONE BY YOU OR YOUR CONTRACTOR, IMMEDIATELY FILE FOR AND RECORD A NOTICE OF COMMENCEMENT WITH THE OFFICE OF THE CLERK OF THE CIRCUIT COURT. THIS STEP IS REQUIRED BY THE FLORIDA CONSTRUCTION LIEN LAW.

IF YOU HAVE HIRED A CONTRACTOR TO DO THE WORK, MAKE SURE THAT THE CONTRACTOR OBTAINS THE PERMIT. THE CONTRACTOR'S SIGNATURE INDICATES HE OR SHE IS RESPONSIBLE FOR THE WORK, AND IF THE WORK IS NOT PERFORMED ACCORDING TO CODE, THE CITY CAN REQUIRE CORRECTIVE ACTION BY THE PARTY WHO OBTAINED THE PERMIT. FURTHERMORE, IF THE CONTRACTOR IS NOT LICENSED, YOU CAN BE IN VIOLATION OF STATE LAW BY ALLOWING AN UNLICENSED PERSON TO DO THIS WORK.

SINCE YOU OR YOUR CONTRACTOR HAVE APPLIED FOR A BUILDING PERMIT FOR WORK TO BE DONE ON PROPERTY YOU OWN, YOU SHOULD BE AWARE THAT:

ANY PERSON WHO FURNISHED LABOR (A CONTRACTOR, SUBCONTRACTOR OR LABORER) OR SUPPLIES MATERIALS FOR YOUR HOME REPAIR, IMPROVEMENT OR NEW CONSTRUCTION MAY BE ABLE TO FILE A CLAIM (CALLED A LIEN) AGAINST YOU IF HE HAS NOT BEEN PAID BY YOUR CONTRACTOR OR YOU. YOU ARE LIABLE TO SUBCONTRACTORS OR SUPPLIERS IF THEY ARE NOT PAID BY YOUR CONTRACTOR OR YOURSELF.

AT THE COMPLETION OF WORK, REQUIRE THE CONTRACTOR TO GIVE YOU A SWORN NOTARIZED STATEMENT INDICATING ALL BILLS FOR LABOR AND MATERIALS HAVE BEEN PAID OR A LIST NAMING THOSE SUPPLYING LABOR AND MATERIALS THAT HAVE NOT BEEN PAID ASK FOR THE AFFIDAVIT BEFORE MAKING THE LAST PAYMENT

UNLICENSED CONTRACTORS: NO PERSON SHALL ENGAGE IN BUSINESS OR ACT IN THE CAPACITY OF A CONTRACTOR WITHOUT BEING DULY REGISTERED OR CERTIFIED. ANY PERSON WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR OF THE FIRST DEGREE AND MAY BE PUNISHED BY A PRISON TERM NOT EXCEEDING ONE (1) YEAR AND/OR A FINE NOT TO EXCEED \$1,000 (SECTION 489.127 FLORIDA STATUTES).

FEE SIMPLE TITLEHOLDER (if other than owner) Name <u>SANDY OWEN</u> Address _____ City _____ State _____ Zip _____		MORTGAGE LENDER Name <u>DA</u> Address _____ City _____ State _____ Zip _____	
--	--	---	--

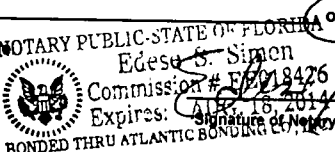
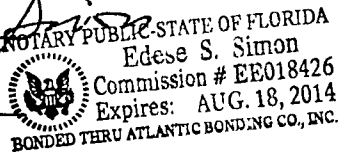
BONDING COMPANY Name _____ Address _____ City _____ State _____ Zip _____	ARCHITECT/ENGINEER/RESIDENTIAL PLANS CERTIFIER I CERTIFY THAT THE PLANS ACCOMPANYING THIS DOCUMENT MEET ALL REQUIREMENTS PERTAINING TO BUILDING CONSTRUCTION IN THE CITY OF LAKE WORTH. Name _____ Signature _____ Address _____ City _____ State _____ Zip _____ Phone () _____ Cell () _____ Fax () _____
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APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATIONS AS INDICATED. I CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND THAT ALL WORK WILL BE PERFORMED TO MEET THE STANDARDS OF ALL LAWS REGULATING CONSTRUCTION IN THIS JURISDICTION. I UNDERSTAND THAT A SEPARATE PERMIT MUST BE ACQUIRED FOR ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, ROOFING AND AIR CONDITIONERS, ETC.

OWNER'S AFFIDAVIT: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION & ZONING.

ALL SIGNATURES MUST BE ORIGINAL

Owner (Signature) <u>Brandon Hadler</u> Print Name <u>BRANDON HADLER</u>	Contractor/Agent (Signature) <u>DARMA SANDMERR</u> Print Name <u>DARMA SANDMERR</u>
STATE OF <u>FL</u> (MANA) <u>FL</u> COUNTY OF <u>PALM BEACH</u> Sworn to (or affirmed) and subscribed to before me this <u>21</u> day of <u>FEB</u> 20 <u>13</u> by Owner or Agent, who has produced the following identification _____ or who is personally known to me.	STATE OF <u>FL</u> COUNTY OF <u>PALM BEACH</u> Sworn to (or affirmed) and subscribed to before me this <u>21</u> day of <u>FEB</u> 20 <u>13</u> by Contractor, who has produced the following identification _____ or who is personally known to me.
Signature of Notary <u>Edese S. Simon</u> Print Name of Notary _____	Signature of Notary <u>Edese S. Simon</u> Print Name of Notary _____



PERMIT NUMBER _____

NOTICE OF COMMENCEMENT

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.

1. DESCRIPTION OF PROPERTY (Legal description of the property & street address, if available) TAX FOLIO NO.: 38434421150930120

SUBDIVISION TOWN OF LAKE WORTH BLOCK 93 TRACT _____ LOT 12 BLDG _____ UNIT _____

2. GENERAL DESCRIPTION OF IMPROVEMENT:

General Improvement

3. OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:

a Name and address 721 North Dixie Hwy LLC, 215 S. Dixie Hwy, Lake Worth, Florida

b Interest in property Fee simple Hwy LLC

c Name and address of fee simple titleholder (if different from Owner listed above) 1111 SW 1st Avenue,

4. a. CONTRACTOR'S NAME: JM Properties of W. P. B., Inc.

Contractor's address 10606 Versailles Blvd, Wellington, FL 33449

b Phone number 561-756-5744

5. SURETY (if applicable, a copy of the payment bond is attached)

a Name and address N/A

b Phone number N/A

c Amount of bond \$ _____

6. a. LENDER'S NAME: N/A

Lender's address N/A

b Phone number _____

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

a Name and address. N/A

b Phone numbers of designated persons N/A

8. a. In addition to himself or herself, Owner designates N/A of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.

b Phone number of person or entity designated by Owner N/A

9. Expiration date of notice of commencement (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): _____, 20____

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.

Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated therein are true to the best of my knowledge and belief.

[Signature]
(Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager)

DAVID STAPLES
(Print Name and Provide Signatory's Title/Office)

State of FL

County of Palm Beach

The foregoing instrument was acknowledged before me this 14 day of Sept, 2012

by DAVID STAPLES, as Officer
(name of person) (type of authority, ...e.g. officer, trustee, attorney in fact)

for _____
(name of party on behalf of whom instrument was executed)

Personally Known or Produced Identification _____ Type of Identification Produced _____

NOTARY PUBLIC-STATE OF FLORIDA
Edese S. Simon
Commission # EE018426
Expires: AUG. 18, 2014
BONDED THRU ATLANTIC BONDING CO., INC.

Edese S. Simon
(Signature of Notary Public)
(Print, Type, or Stamp Commissioned Name of Notary Public)

A.C.R. Environmental, Inc.

12864 Biscayne Blvd.

Suite: #306

North Miami, Florida 33181-0007

Phone (305) 219-0875

PROPOSED CONTRACT

Between the Client

Darma
JM Properties
10606 Versailles Blvd.
Wellington, Florida 33449

And The Contractor

ACR Environmental, Inc.
12864 Biscayne Blvd
Suite: #306
North Miami, FL 33181

For The Project

Job Location
215 S Federal Hwy
Lake Worth, Florida

Proposal Date: February 22nd, 2013

Bid #ACR-2013-0213

ARTICLE 1.- CONTRACT DOCUMENTS:

- 1.1 All documents noted herein shall be provided to the Contractor by the Owner. These Contract Documents represent the entire agreement of both parties and supersede any prior oral or written agreement. Contract subject to acceptance within 30 calendar days from the above date, and is void thereafter at the option of the contractor.

ARTICLE 2.- SCOPE OF WORK

- 2.1 ACR Environmental, Inc. Propose to remove Approx. 2,390 SF Asbestos Containing Transit Shingles from the Roof.

ARTICLE 3. -THE CONTRACT PRICE

- 3.1 The purchase price of the project shall be for the sum of:
\$ 3,980.00; Price includes: DERM Notification, Materials, Labor, and Waste Disposal.

ARTICLE 4. - MOBILIZATION PAYMENT

- 4.1 The Mobilization payment of 30% is required prior to commencement.
No Mobilization is required.

ARTICLE 5. -PROGRESS PAYMENT & FINAL PAYMENT

- 5.1 Progress payment is due by.
No progress payment is required.
- 5.2 Payment of the balance will be due upon completion of the job.
\$3,980.00

ARTICLE 6. - CONTRACTOR

- 6.1 Work shall be in accordance to the provision of the plan and specifications. All systems shall be in good working order.
- 6.2 Work to be completed in a workmanlike manner according to standard practices. Contractor shall follow and comply to all State, Local and Federal guidelines.
- 6.3 A.C.R. Environmental, Inc., is fully aware of and fully informed of its obligations.

ARTICLE 7. - OWNER

- 7.1 The Owner shall communicate with subcontractor only through the contractor.
- 7.2 The Owner will not assume any liability of responsibility, nor have control over or charge of construction means, methods, techniques, procedures, or for safety precautions and programs in connection with the project, since these are solely the Contractor's responsibility.
- 7.3 Electric and bathroom facilities will be provided by the Owner.
- 7.4 All movable items must be removed prior to commencement.

ARTICLE 8. - CHANGE ORDERS

- 8.1 A Change Order is any change to the original plans and/or specification. All change order need to be agreed upon in writing, including cost, and additional time consideration.

ARTICLE 9. - INSURANCE

- 9.1 The Owner will purchase and maintain property insurance to the full and insurable value of the project, in case of a fire, vandalism malicious mischief or other instances that may occur.
- 9.2 The Contractor shall purchase and maintain needed Workman's Compensation and Liability insurance coverage as required by law and deemed necessary for his own protection.

ARTICLE 10. - GENERAL PROVISIONS

- 10.1 If conditions are encountered at the construction site which are subsurface or otherwise concealed physical conditions or unknown physical conditions of an unusual nature, which differ naturally from those ordinarily found to exist and generally recognized as inherent in construction activities, the Owner will promptly investigate such conditions and, if they differ materially and cause an increase or decrease in the contractor's cost of, and/or time required for, performance of any part of the work, will negotiate with the contractor an equitable adjustment in the contract sum, contract time or both.
- 10.2 Contractor not responsible for damage to walls/fixtures due to the use of adhesives.

ARTICLE 11. - ARBITRATION OF DISPUTES

- 11.1 Any controversy or claim arising out of or relating to this contract, or the breach thereof, shall be settled by arbitration administered by the American Arbitration Association under its Construction Industry Arbitration Rules, and judgment on the award rendered by the arbitrator(s) may be entered in any court having jurisdiction thereof.

ARTICLE 12. - TERMINATION OF CONTRACT

- 12.1 Should the Owner or Contractor fail to carry out this contract, with all of its provisions, the following option and stipulation shall apply.
- 12.2 If Owner or the contractor shall default on the contract, the non-defaulting party may declare the contract is in default and proceed against the defaulting party for the recovery of all damages incurred as a result of said breach of contract including a reasonable attorney's fee. In the case of a defaulting Owner, the earnest money herein mentioned shall be applied to the legally ascertained damages.
- 12.3 In the event of a default by the Owner or Contractor, the non-defaulting party may state his intention to comply with the contract and proceed for specific performance.
- 12.4 In the case of a defaulting Owner, the Contractor may accept, at his option the earnest money as shown herein as liquidated damages, should earnest money not cover the expenses to date, the Contractor may make claim to the Owner for all work executed and for proven loss with respect to equipment, materials, tools construction equipment and machinery, including reasonable overhead, profit and damages applicable to the property less the earnest money.

ARTICLE 13.- ACCEPTANCE

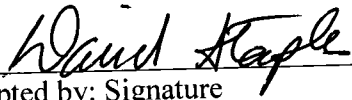
By execution of this document, I agree to have read and fully understand all statements and implications of this document. I agree to explicitly abide by and follow the above conditions as listed in this agreement.



Contractor's Signature, Adolfo Hodgson

02/22/2013

Date



Accepted by: Signature

2/27/13

Date

ROOFING PERMIT APPLICATION SUMMARY of SUPPLEMENTAL INFORMATION

Section A General Information

PR Number: _____ Date: 2-21-12
Contractor: JM PROPERTIES of WYD License #: CCC1326578
Owner: 721 NORTH DIXIE LLC Job Address: 215 S. Federal Hwy

Use of Building:

- 1 or 2 Family Dwelling Multi-Family (3 or More Units) Non-Residential

Exposure Category: _____ Existing Roof Material: SHINGLES

Roof Type:

- New Roof Re-Roofing Recovering Repair _____ % Roof / Section

Roof Slope: 5 / 12 Deck Type: _____ Roof Height: _____ Ft.

Proposed Roof Covering: (Check all that apply to this permit application)

- Flat Roof Mechanically Fastened Tile Mortar / Foam Set Tile
 Asphalt Shingles Metal Panel / Shingle **RETROFIT.** The voluntary process of strengthening or improving buildings or structures, or individual components of buildings or structures, for the purpose of making existing conditions better serve the purpose for which they were originally intended or the purpose that current building codes intend.
 Wood Shakes / Shingles Other: _____

Slope of Roofing Work by Area: (Complete all that apply)

Flat Roof Area ($\leq 2" / 12"$) 0 sf Steep Slope Roof Area ($\geq 4" / 12"$) 2000 sf
Low Slope roof Area ($> 2" - 4" / 12"$) 0 sf Total Roof Area, This Permit: 2000 sf

CERTIFICATION:

To the best of my knowledge and belief, all information supplied on any or all of the pages of this form, or supplied by any other means, is true and correct.

DANNA SAIN MERVIL [Signature] 2/21/12
Qualifier Name (Print) Signature Date

**ROOFING PERMIT APPLICATION SUMMARY of SUPPLEMENTAL
INFORMATION (Continued)**

**Section B
Roof Plan**

Sketch Roof Plan: Illustrate all levels and sections. Include dimensions of sections and levels: clearly identify all roof areas per zone and provide all uplift pressures per zone. Identify and locate all parapet walls and expansion joints. If applicable, identify locations of hurricane mitigation and provide attachment details on the following page.

NOTE: for flat roofs, provide the perimeter width (a') and the corner size (a' x a')

CITY OF LAKE WORTH	
NO CHANGES SHALL BE MADE TO THE INFORMATION ON THIS APPROVED SET OF DRAWINGS DURING OR AFTER THE CONSTRUCTION PERIOD THAT COULD IN ANY WAY CONSTITUTE A CHANGE IN THE AESTHETIC CHARACTER OF THE PROJECT WITHOUT APPROVAL OF THE	
CASE#	13-00100042
APPROVED AS NOTED	<input checked="" type="checkbox"/>
APPROVED	
<i>Kelly M. @ CW</i>	3/13/13
PZHP DIVISION	DATE
RETROFIT. The voluntary process of strengthening or improving buildings or structures, or individual components of buildings or structures, for the purpose of making existing conditions better serve the purpose for which they were originally intended or the purpose that current building codes intend.	

ROOFING PERMIT APPLICATION SUMMARY of SUPPLEMENTAL INFORMATION
Section C

HURRICANE MITIGATION PER F.S. 553

"Hurricane Mitigation Retrofits for Existing Single Family Residential Structures"

Address: 215 S. Federal Hwy

Water Barrier: Florida Statute 553.844 Section 201.2

As of October 1, 2007, all single family dwelling re-roof applications must provide for a secondary water barrier as defined in Section 201.2.

- Method of secondary water barrier installation:
 - Roof sheathing joints covered with 4" self-adhering polymer modified bitument tape applied directly to the sheathing. Tape must be covered with an underlayment system as required for the roofing system.
 - Entire roof deck covered with a self adhering polymer modified bitument sheet. No additional underlayment is required unless specified by the product approval or the
 - Entire roof deck covered with 30# felt underlayment installed with nails and tin-tabs as required for the HVHZ. No additional underlayment shall be required over the top of
 - Approved 30# underlayment fastened with 1" round plastic cap or metal cap nails attached to a nailable deck in a grid pattern 12" staggered between the laps with 6" spacing at the laps. For slopes 2:12 to 4:12, two layers installed shingle fashion, lapped
- Secondary Water Barrier: N/A
Manufacturer _____ Product Approval FL#: _____

Roof To Wall Connections: Florida Statute 553.844 Section 201.3

- YES NO Was the permit for construction applied on or after March 1, 2002?
(if yes, proceed to signature and permit submittal)
- Applicant must provide documentation of building value: Indicate the type provided:
 - Copy of current home insurance summary sheet.
 - Copy of latest Tax Bill or Property Appraiser office webpage for the home.
- YES NO Is the value of the building \$300,000.00 or more?
(if no, proceed to signature and permit submittal)
- If yes to # 3, then roof to wall connections must be enhanced to comply with 201.3. The priorities for upgrading are outlined in section 201.3.5 of the manual. An additional 15% of the cost of re-roofing must be spent on enhanced connections. A separate permit application by a residential, building or general contractor is required.

DARMA SAIN NEVIN Qualifier / Owner -Builder Name (Print) [Signature] Qualifier / Owner -Builder's Signature 2/21/13 Date



Gary R. Nikolits, CFA
Property Appraiser
 Palm Beach County

Property Appraiser's Public Access **PAPAW**



Location Address 215 S FEDERAL HWY
 Municipality LAKE WORTH
 Parcel Control Number 38-43-44-21-15-093-0120
 Subdivision LAKE WORTH TOWN OF IN PB 2 PGS 29 TO 40 INC
 Official Records Book 25389 Page 241
 Sale Date MAY-2012
 Legal Description TOWN OF LAKE WORTH LT 12 BLK 93

Owners
 721 NORTH DIXIE LLC

Mailing address
 1111 SW 1ST AVE # 2517
 MIAMI FL 33130

Sales Date	Price	OR Book/Page	Sale Type	Owner
MAY-2012	\$72,511	25389 / 0241	WARRANTY DEED	721 NORTH DIXIE LLC
APR-2012	\$90,200	25121 / 1010	CERT OF TITLE	DEUTSCHE BANK NATIONAL TRUST CO TR
DEC-1999	\$65,000	11527 / 0275	WARRANTY DEED	MARLOW LINDA (M)
FEB-1994	\$100	08139 / 0284	QUIT CLAIM	
NOV-1991	\$100	07036 / 0111	WARRANTY DEED	

12

No Exemption Information Available.

Number of Units 2 *Total Square Feet 880 Acres 0.1550
 Use Code 1200 - STORE/OFFICE/RESIDENTIAL Zoning POMF30 - (38-LAKE WORTH)

Tax Year	2012 P	2011	2010
Improvement Value	\$67,317	\$70,831	\$75,752
Land Value	\$57,713	\$78,975	\$87,750
Total Market Value	\$125,030	\$149,806	\$163,502

P - Preliminary All values are as of January 1st each year

Tax Year	2012 P	2011	2010
Assessed Value	\$125,030	\$149,806	\$163,502
Exemption Amount	\$0	\$0	\$0
Taxable Value	\$125,030	\$149,806	\$163,502

Tax Year	2012 P	2011	2010
Ad Valorem	\$3,006	\$3,666	\$4,015
Non Ad Valorem	\$991	\$991	\$975
Total tax	\$3,997	\$4,657	\$4,990



BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

GAF Materials Corporation
1361 Alps Road.
Wayne, NJ 07470

SCOPE:

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

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

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

DESCRIPTION: Timberline® Prestique® Lifetime

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

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

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

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

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

This renews NOA #07-0507.11 and consists of pages 1 through 4.
The submitted documentation was reviewed by Alex Tigera.



NOA No.:07-1120.15
Expiration Date: 04/22/13
Approval Date: 05/08/08

ROOFING ASSEMBLY APPROVAL

Category: Roofing
Sub-Category: 07310 Asphalt Shingles
Materials
Deck Type: Dimensional
Wood

1. SCOPE

This renews Timberline Prestique Lifetime as manufactured by GAF Materials Corp described in Section 2 of this Notice of Acceptance.

2. PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Timberline Prestique Lifetime	13 ¹ / ₄ " x 39 ³ / ₈ "	TAS 110	Fiberglass reinforced heavy weight asphalt roof shingle, with a laminate profile

3. EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Center for Applied Engineering	TAS 100		02/23/94
Underwriters Laboratories, Inc.	ASTM 3462	ASTM D3462	03/03/06
Underwriters Laboratories, Inc.	TAS 107	Modified ASTM D 3161	04/13/94
PRI Asphalt Technologies, Inc.	ASTM D3462	GAF-103-02-02	11/02/05
PRI Asphalt Technologies, Inc.	TAS 100	GAF-046-02-01 GAF-103-02-01	01/13/04 11/14/05
Underwriters Laboratories, Inc.	TAS 107	04NK04273	02/20/04
Underwriters Laboratories, Inc.	Modified ASTM D 3161	05CA42840	11/11/05

4. LIMITATIONS

- 4.1 Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
- 4.2 Shall not be installed on roof mean heights in excess of 33 ft.
- 4.3 All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.

5. INSTALLATION

- 5.1 Shingles shall be installed in compliance with Roofing Application Standard RAS 115.
- 5.2 Flashing shall be in accordance with Roofing Application Standard RAS 115
- 5.3 The manufacturer shall provide clearly written application instructions.
- 5.4 Exposure and course layout shall be in compliance with Detail 'A', attached.
- 5.5 Nailing shall be in compliance with Detail 'B', attached.

6. LABELING

6.1 Shingles shall be labeled with the Miami-Dade Product Control Approved Seal or the wording "Miami-Dade County Product Control Approved".



7. BUILDING PERMIT REQUIREMENTS

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

7.1.1 This Notice of Acceptance.

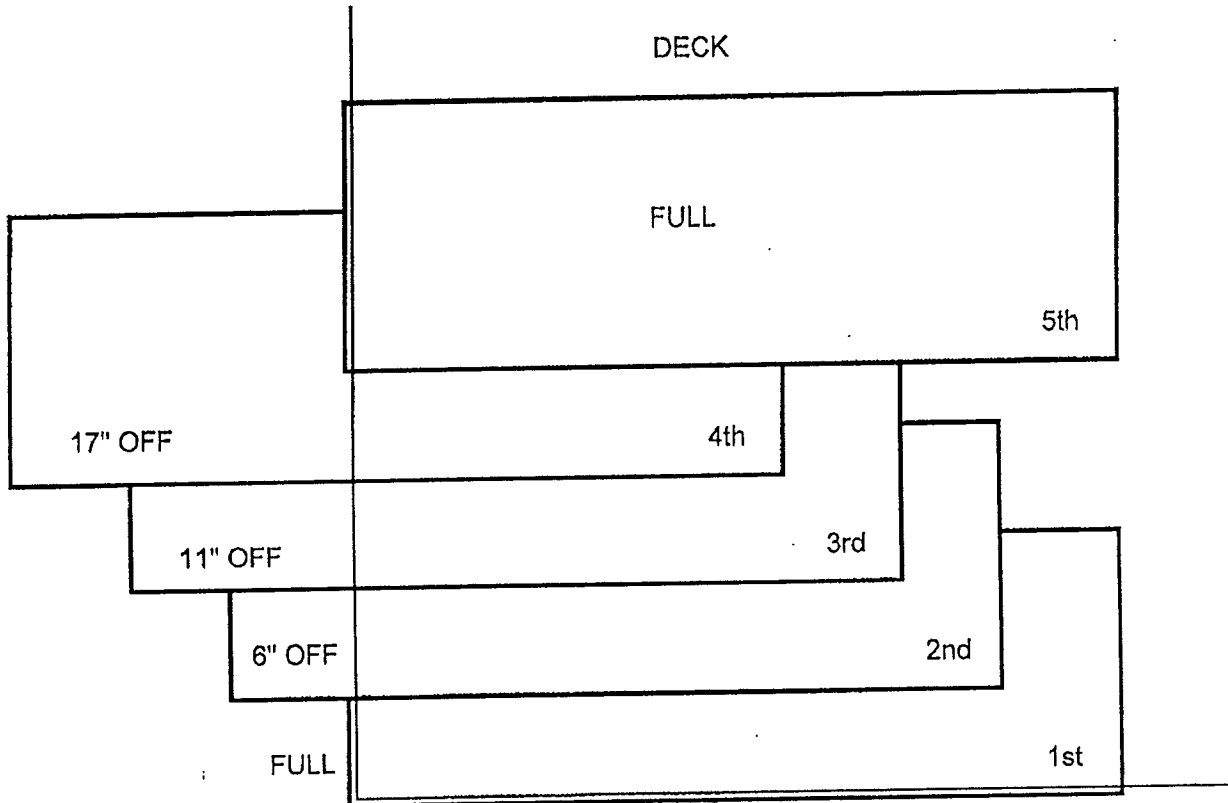
7.1.2 Any other documents required by the Building Official or the applicable code in order to properly evaluate the installation of this system.

8. MANUFACTURING PLANTS

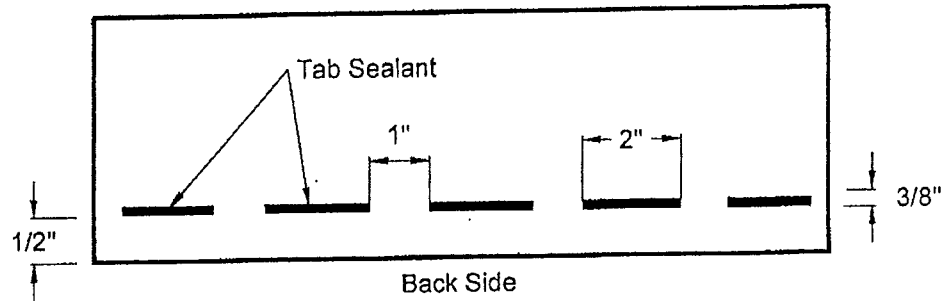
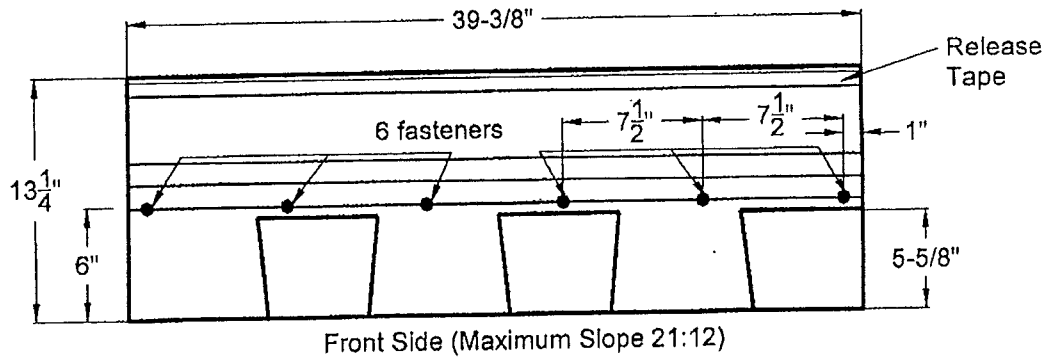
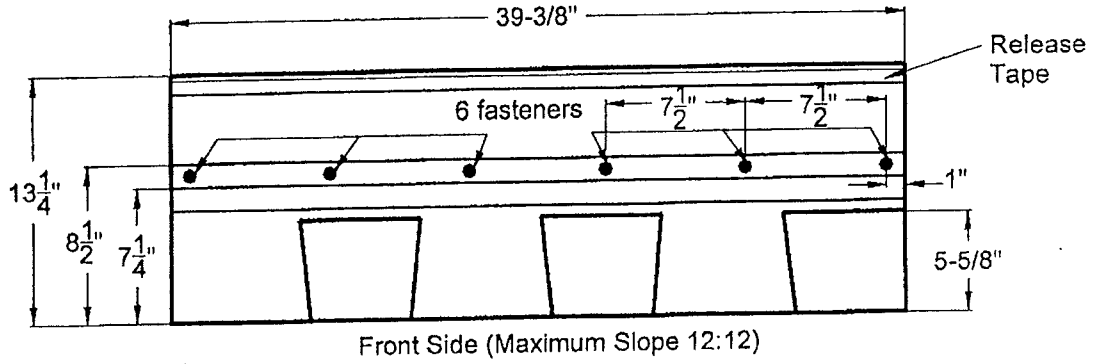
8.1 Tampa, FL

8.2 Michigan City, IN

DETAIL A



DETAIL B – 13-1/4" X 39-3/8"



END OF THIS ACCEPTANCE



NOA No.:07-1120.15
 Expiration Date: 04/22/13
 Approval Date: 05/08/08
 Page 4 of 4

**TFWZ.R3915
Prepared Roof-covering Materials**[Page Bottom](#)**Prepared Roof-covering Materials**[See General Information for Prepared Roof-covering Materials](#)**GAF MATERIALS CORP**

R3915

SUITE 600
14911 QUORUM DR
DALLAS, TX 75254 USA

Asphalt glass mat shingles designated "Timberline Natural Shadow," "Timberline Prestique 30," "Timberline Prestique 40," "Timberline Majestic 30," "Timberline Prestique Lifetime," "Timberline Prestique Grande" and "Capstone," for installation as Class A prepared roof coverings. Suitable for installation on minimum 3/8-in. thick plywood decks. Also Classified in accordance with ASTM D3161, Class F. Also Classified in accordance with ASTM D3462.

Asphalt glass mat shingles designated "Timberline ArmorShield II" and "ProStart Starter Strip" for installation as Class A prepared roof coverings. Suitable for installation on minimum 3/8-in. thick plywood decks. Also Classified in accordance with ASTM D3462.

Hip and ridge shingles designated "Seal-A-Ridge," "Seal-A-Ridge ArmorShield" and "Z-Ridge" for installation as Class A prepared roof coverings.

[Last Updated](#) on 2011-04-05[Questions?](#)[Print this page](#)[Notice of Disclaimer](#)[Page Top](#)

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TFWZ.GuideInfo Prepared Roof-covering Materials

[View Listings](#)[Page Bottom](#)

[Roof-covering Materials] Prepared Roof-covering Materials

[See General Information for Roof-covering Materials](#)

GENERAL

This category covers materials intended to provide Classes A, B and C coverings on combustible (wood, 3/4-in. thick sheathing boards or 3/4-in. thick plywood unless otherwise indicated) decks when applied in accordance with detailed instructions included with the packages.

The use of 15/32-in. thick (minimum) plywood is a suitable alternate to 1/2-in. thick (minimum) plywood specified in Listings for individual manufacturers.

The use of 3/8-in.-thick (minimum) nonveneer PS-2-rated sheathing (oriented strandboard panels, structural particleboard panels, composite panels or waferboard panels) is a suitable alternate to 1/2-in. thick (minimum) plywood specified in Listings for individual manufacturers when a Classified underlayment is utilized between the sheathing and the prepared roof covering.

Listings are applicable either for new work or for recovering purposes.

Flashings and trimmings are intended to be the same as or not less than the equivalent of the roof coverings in each class, or of 16 oz. or heavier copper, No. 26 USS gauge or heavier galvanized steel, or 0.019-in. thick or heavier aluminum.

This category also covers shingles with factory-applied adhesives or integral locking features. The Listing Mark for such shingles may, in addition to fire resistance information, include wind resistance information.

PREPARED ROOF COVERINGS

Asphalt Organic-Felt Shingle Coverings are composed of asphalt organic-felt (previously identified as rag-felt) grit-surfaced shingles, one or more thickness, laid in accordance with the instruction sheets accompanying the packages. These coverings are limited to roof decks capable of receiving and retaining nails and to inclines sufficient to permit drainage.

Asphalt Glass-Fiber Mat Shingle or Sheet Roofing Coverings are composed of asphalt glass-fiber mat, grit-surfaced shingles or sheet roofing, laid in accordance with the instruction sheets accompanying the packages. These coverings are limited to roof decks capable of receiving and retaining nails and to inclines sufficient to permit drainage.

Modified Asphalt Glass-Fiber Mat, Asphalt Organic-Felt or Glass-Fiber/Polyester Composite Shingle Coverings are composed of modified asphalt-coated glass-fiber mat or glass-fiber/polyester composite, grit-surfaced shingles, laid in accordance with the instruction sheets accompanying the packages. These coverings are limited to roof decks capable of receiving and retaining nails and to inclines sufficient to permit drainage.

Wind-resistant Asphalt Glass-Fiber Mat Shingles are provided with field-applied or factory-applied adhesive or integral locking tabs. Some shingles with factory-applied adhesive utilize bands or spots of a heat-sensitive adhesive located either on the surface of the shingles or on the back side of each tab. Adhesives of this type must be activated by solar heat of intensity generally attained on warm, sunny days. Other shingles with factory-applied adhesive utilize a combination pressure-sensitive and heat-sensitive adhesive. Due to the nature of adhesives of this type, sealing is induced by application of pressure and/or heat.

Wind-resistant Asphalt Organic-Felt Shingles are provided with factory-applied adhesive or integral locking tabs. Some shingles with factory-applied adhesive utilize bands or spots of a heat-sensitive adhesive located either on the surface of the shingles or on the back side of each tab. Adhesives of this type must be activated by solar heat of intensity generally attained on warm, sunny days. Other shingles with factory-applied adhesive utilize a combination pressure-sensitive and heat-sensitive adhesive. Due to the nature of adhesives of this type, sealing is induced by application of pressure and/or heat.

Wind-resistant Modified Asphalt Glass-Fiber Mat Shingles are provided with factory-applied adhesive. Some shingles with factory-applied adhesive utilize bands or spots of a heat-sensitive adhesive located either on the surface of the shingles or on the back of each tab. Adhesives of this type must be activated by solar heat of intensity generally attained on warm, sunny days. Other shingles with factory-applied adhesive utilize a combination pressure-sensitive and heat-sensitive adhesive. Due to the nature of adhesives of this type, sealing is induced by application of pressure and/or heat.

Hip and Ridge Shingles are composed of asphalt or modified asphalt-coated glass-fiber mat surfaced with granules and are intended to be installed as specified on packaging supplied with the product for hip and ridge installations only. They are investigated for fire resistance in accordance with the fire test portion of [UL Subject 2375](#), "Outline of Investigation for Hip and Ridge Shingles." Where indicated, they have also been investigated for wind resistance in accordance with the test procedures of [UL Subject 2375](#). The class of shingles and performance criteria are

in accordance with ASTM D3161. Wind-resistant hip and ridge shingles may utilize locking mechanisms, field-applied adhesives or factory-applied heat-sensitive adhesive which must be activated by solar heat of intensity generally attained on warm, sunny days.

RELATED PRODUCTS

Prepared roof-covering materials investigated for impact resistance are covered under Roof-covering Materials, Impact Resistance (TGAM).

Asphalt shingles investigated for wind resistance are covered under Prepared Roof-covering Materials, Asphalt Shingle Wind Resistance (TGAH).

Accessory components utilized in the prepared roof-covering system are covered under Prepared Roofing Accessories (TGDY). Ridge vents utilized in the prepared roof-covering system are covered under Ridge Vents (TGEW). Type 15 and Type 30 asphalt felts, used as underlayments, are covered under Roofing Systems (TGFU). Underlayments, ridge vents and accessory components, when utilized, are intended to be Classified materials

ADDITIONAL INFORMATION

For additional information, see Roof-covering Materials (TEVT) and Roofing Materials and Systems (AARM).

REQUIREMENTS

The basic standard used to investigate products in this category is ANSI/UL 790, "Tests for Fire Resistance of Roof Covering Materials" (ASTM E108 and ANSI/NFPA 256).

ADJUNCT SERVICE

UL provides a service for the Classification of specific prepared roof-covering materials that not only meet the appropriate requirements of UL but also have been investigated as follows:

1. Where indicated in the individual Listings, specific products have also been Classified in accordance with ASTM D3161, "Standard Test Method for Wind-Resistance of Asphalt Shingles (Fan-Induced Method)." Where Classes A, D and F are referenced, tests were conducted at 60, 90 mph and 110 mph, respectively.
2. Also, where indicated in the individual Listings, specific shingle products have also been Classified in accordance with ASTM D3462, "Standard Specifications for Asphalt Shingles Made from Glass Felt and Surfaced with Mineral Granules," or CAN/CSA-A123.5, "Asphalt Shingles Made From Organic Felt and Surfaced With Mineral Granules / Asphalt Shingles Made From Glass Felt and Surfaced With Mineral Granules."
3. Also, where indicated in the individual Listings, specific sheet roofing products have also been Classified in accordance with ASTM D3909, "Standard Specification for Asphalt Roll Roofing (Glass Felt) Surfaced with Mineral Granules."

UL MARK

The Listing Mark of UL on the product is the only method provided by UL to identify products manufactured under its Listing and Follow-Up Service. The Listing Mark for these products includes the UL symbol (as illustrated in the Introduction of this Directory) together with the word "LISTED," and the following additional information:

**PREPARED ROOF COVERING MATERIALS
DEGREE OF RESISTANCE TO EXTERNAL FIRE - CLASS +
Issue No.**

Combination Listing/Classification Mark — A Listing Mark combined with a Classification Mark is provided on products that have additionally been investigated in accordance with the standards detailed below. The combined Listing/Classification Mark consists of the Listing Mark elements detailed above and the following marking: **ALSO CLASSIFIED IN ACCORDANCE WITH ***, where "*" is one or more of the texts detailed below.

ASTM D3161, CLASS ++

ASTM D3462

CSA-A123.5

ASTM D3909

+ A, B or C

++ A, D or F

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arising out of or in connection with the use, interpretation of, or reliance upon this Guide Information.

Last Updated on 2009-03-04

Questions?

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**DEPARTMENT for COMMUNITY SUSTAINABILITY
PLANNING, ZONING, AND HISTORIC PRESERVATION**

1900 2nd Ave North · Lake Worth, Florida 33461 · Phone: 561-586-1687

3/13/2013

721 North Dixie LLC
215 South Federal Highway
Lake Worth, FL 33460

HRPB Project Number 13-00100042: Consideration of a Certificate of Appropriateness (COA) for roof replacement for the subject property located at 215 South Federal Highway; PCN#38-43-44-21-15-093-0120. The subject property is a contributing resource within the Southeast Lucerne Local Historic District.

Dear Applicant:

On March 1, 2013 the Division of Planning, Zoning, and Historic Preservation received your COA application for roof replacement for the property located at 215 South Federal Highway. Your application proposes to replace the existing diamond-shaped asbestos shingle roof with a new architectural asphalt shingle roof. This COA application was submitted concurrently with building permit application #13-680.

Staff approves your request as described in your application. The property in question, constructed c.1925, has historically has an asbestos shingle roof. However, as asbestos shingles are no longer permitted to be installed as a roofing material, a new roofing material is required to replace the existing shingles. Based on additional research undertaken by Staff and the applicant's contractor, there are currently no comparable products on the market in Florida that can replicate the diamond shingle pattern of the roof. After speaking with local specialty roofing contractors, a custom metal roof could potentially be commissioned to replicate the existing shingle pattern, but it would be at a significantly greater expense than the roof proposed. The proposed roof represents an adverse effect on the materials and design of the existing and potentially original roof. However, it is the opinion of Staff that because no compatible products exist on the market at present as a viable alternative that can be presented to the applicant or the Board, the roof proposed should be approved as having the least amount of impact possible on the historic integrity of the property.

This letter only constitutes an approval of compliance with the review process for exterior changes to a property within a local historic district as defined in City of Lake Worth Municipal Code §23.27.05.00. This approval does not exempt you from complying with the building code and zoning ordinance of the City of Lake Worth concerning roof installation.

No changes shall be made to the information on this approved application that could in any way constitute a change in the aesthetic character of the project without approval of staff or the Historic Resources Preservation Board.

Please be advised the Certificate of Appropriateness authorized herein shall be null and void unless construction has commenced and is proceeding within one (1) year from the staff approval date.

If you have any questions, please feel free to call me at 561-586-1690.

Sincerely,

A handwritten signature in black ink, appearing to read "Kelly M. Christensen". The signature is written in a cursive style with a large, circular flourish at the end.

Kelly M. Christensen, Preservation Planner
Division of Planning, Zoning, and Historic Preservation
Department for Community Sustainability

**CITY OF LAKE WORTH
BUILDING, PLANNING AND ZONING DEPARTMENT
APPLICATION FOR CERTIFICATION OF APPROPRIATENESS**

If approved, a CA/COA is valid for 12 months from the date of approval.

Project Name: 721 North Dixie LLC

Address or General Location: 215 S. Dixie Hwy

PART ONE - APPLICANT INFORMATION:

APPLICANT

Name: 721 ~~North~~ North Dixie LLC

Address: 215 S. Federal Hwy

Telephone Number: _____

AGENT

Name: Jm Pro Penros of W.P.B.

Address: 10606 Versailles Blvd
Wellington FL 33440

Telephone Number: 501. 786. 5744

OWNER (if other than applicant)

Name: S Amel

Address: _____

Telephone Number: _____

Applicant is: Owner [] Lessee [] Other _____

PART TWO - PROPERTY INFORMATION:

Property Control Number: 38434421150930120

Legal Description (attach separate sheet if necessary): _____

Historic District or Historic Site: SOUTH EAST LUCERNE (CONTRIBUTING)

Zoning Designation: PO MF 20

Existing Use of Property: _____

Proposed Use of Property: _____

Proposed Changes (refer to DESCRIPTION OF WORK Pages 4 & 5): _____

Proposed Project Value: 10,000

Requested Waivers and Modifications (Fill-In Applicable Spaces Below):

	Code Requirement	Request
Front Yard Setback	_____	_____
Side Yard Setback	_____	_____
Rear Yard Setback	_____	_____
Parking	_____	_____
Height	_____	_____
Floor Area	_____	_____
Finished Floor Elevation	_____	_____
Other	_____	_____

Attach separate pages if necessary, with all necessary photographs to show work areas. Label each picture to describe what is to be done in each area.

PART THREE - DESCRIPTION OF WORK FOR WHICH THE CA/COA IS DESIRED

[Check Appropriate Item(s)]

_____ Maintenance or Repair: The act or process of applying measures to sustain the existing form, integrity and material of a building or structure and the existing form or vegetative cover of a site that requires a building permit. It may include initial stabilization work, where necessary, as well as on-going maintenance and repair.

✓ _____ Restoration: The process of accurately recovering the form and details of a property and its setting as it appeared at a particular period of time by means of the removal of later work or by the replacement of missing earlier work.

✓ _____ Renovation: The process of returning a property to a state of utility through repair or alteration which makes possible an efficient contemporary use while preserving those portions or features of the property which are significant to its historical, architectural and cultural values.

_____ Landscaping: The process of improving the landscape features which includes, but is not limited to, subsurface alteration, site regarding, fill deposition, paving, landscaping, courtyards, and exterior lighting.

_____ Signage: The process of installing or altering signs, billboards, advertisements or any other signage.

_____ Excavation: The process of performing an archeological dig to recover artifacts, historical materials or other archeological features.

_____ Demolition: The process of destroying or tearing down a building or structure or a part thereof, or the process of removing or destroying an archeological site or a part thereof.

_____ New Construction: The process of constructing a building or structure that has never existed at the location.

_____ Relocation: The process of moving a building or structure from its current foundation to another site.

_____ Walls, Fences and Sidewalks: The process of making any material change in existing walls, fences and sidewalks, or construction of new walls, fences and sidewalks.

_____ Change of Color: The process of changing the color of the exterior of any buildings or structures, walls, fences, sidewalks, or any other architectural features.

OVERALL DESCRIPTION OF THE WORK PLAN

Explain the chronology of the work involved and describe all new construction, excavation, demolition and relocation that will be required. If complete or partial demolition is involved, also complete the demolition section of this application. (Attach additional pages if necessary.)

Remove existing roof covering (2 days)
Install new underlayment (2 days)
Install New roof covering (3 days)

DEMOLITION (If Applicable)

Explain why the proposed demolition should occur. (attach additional pages if necessary.)

Handwritten initials: P M

The Lake Worth Historic Resources Preservation Board will consider the following factors in reviewing requests for demolition:

- A. Is the structure of such interest or quality that it would reasonably fulfill criteria for designation on the National Register?
- B. Is the structure of such design, craftsmanship or material that it could be reproduced only with great difficulty and/or economically unviable expense?
- C. Is the structure one of the last remaining examples of its kind in the neighborhood, City or designated historic district?
- D. Would retaining the structure promote the general welfare of the City of Lake Worth by providing an opportunity to study local history, architecture and design, or by developing an understanding of the importance and value of a particular culture and heritage?
- E. Are there definite plans for immediate reuse of the property if the proposed demolition is carried out, and what effect will those plans have on the character of the surrounding area?
- F. Would relocation of the building be a viable alternative to the proposed demolition?
- G. Would the Board's action on the requested COA cause undue economic hardship to the applicant?

DOCUMENTATION ATTACHED IN SUPPORT OF THIS APPLICATION

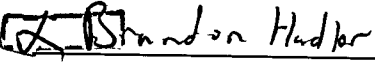
Unless otherwise requested by Staff, five (5) 11 X 17 copies of drawings/plans and the following additional items must accompany this application in order for it to be processed. A master CD with all application documents in Word or pdf must also be provided. (Check Only the Appropriate Items.) All plans must be folded appropriately.

- Site Plan and/or Survey
- Continuation Sheets
- Elevation Plan
- Landscape Plan
- Floor Plan
- Other Plans
- Master Project CD
- Architectural Drawings
- Sketches or Artistic Renderings
- Photographs*
- Samples of Building Materials
- Engineering or Other Reports
- Other Photographs which Support this Application
- Published Materials, Documents and Bibliographies
- Other
- Appropriate Fee with Check Made Payable to the City of Lake Worth
- Executed and Notarized Agent Authorization Form

* Photographs of all elevations of each building or structure on the subject property must be attached. If the subject property is vacant, photographs of the entire site must be attached. Also, photographs of the adjacent properties must be attached.

PART FOUR - SIGNATURE(S) OF OWNERS/APPLICANTS

The undersigned owner(s) and/or applicant(s) certifies under penalties of perjury that all the statements contained in this application, including any statement attached to the application or any papers or plans submitted herewith are true and correct.

Owner's Signature  Date 3/1/13

Owner's Signature _____ Date _____

Applicant's Signature _____ Date _____

Applicant's Signature _____ Date _____

CITY OF LAKE WORTH

NO CHANGES SHALL BE MADE TO THE INFORMATION ON THIS APPROVED SET OF DRAWINGS DURING OR AFTER THE CONSTRUCTION PERIOD THAT COULD IN ANY WAY CONSTITUTE A CHANGE IN THE AESTHETIC CHARACTER OF THE PROJECT WITHOUT APPROVAL OF THE

CASE# 13-00100042

APPROVED AS NOTED X

APPROVED _____

 3/13/13
DATE

Sign Posting Agreement

Applicant:

Owner:

Property Address:

Meeting

Date: _____

I, _____ will post the notification sign provided to me for a minimum of 10 calendar before the scheduled date of the hearing of my case.

Signed: _____

Date: _____

OWNER'S CONSENT AND DESIGNATION OF AGENCY

(This form must be completed by ALL property owners)

I 721 North Dixie LLC, (Owner's Name), the fee simple owner of the following:

Describe property (give legal description or attach separate page): _____

215 S. Federal Hwy.

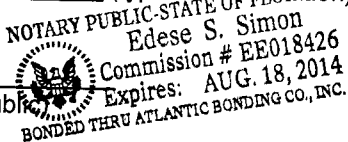
Folio # 38 4344 211 SD9 30120

hereby petition to the City of Lake Worth for certificate of appropriateness approval for (Project Name) Re-Roofing and affirm that JM PROPERTIES (Applicants/Agent's Name) is hereby designated to act as agent on my behalf to accomplish the above.

I certify that I have examined the application and that all statements and diagrams submitted are true and accurate to the best of my knowledge. Further, I understand that this application, attachments and fees become part of the Official Records of the City of Lake Worth, Florida, and are not returnable.

Brandon Hadler (Owner's Signature) (As manager)

The foregoing instrument was acknowledged before me this 27 day of Feb 20 13 by BRANDON HADLER who is personally known to me or has produced _____ (type of identification) as identification and who did/did not take an oath.



(Printed Name of Notary Public)

Edese S. Simon (Signature of Notary Public)

Commission # _____

My Commission Expires _____

(NOTARY'S SEAL)

ROOFING PERMIT APPLICATION SUMMARY of SUPPLEMENTAL INFORMATION

**Section A
General Information**

PR Number: _____ Date: 2-21-12
Contractor: JM PROPERTIES of NPM License #: ECC1326578
Owner: 721 NORTH DIXIE LLC Job Address: 215 S. Federal Hwy

Use of Building:

- 1 or 2 Family Dwelling Multi-Family (3 or More Units) Non-Residential

Exposure Category: _____ Existing Roof Material: SHingles

Roof Type:

- New Roof Re-Roofing Recovering Repair _____ % Roof / Section

Roof Slope: 5 / 12 Deck Type: _____ Roof Height: _____ Ft.

Proposed Roof Covering: (Check all that apply to this permit application)

- Flat Roof Mechanically Fastened Tile Mortar / Foam Set Tile
 Asphalt Shingles Metal Panel / Shingle
 Wood Shakes / Shingles Other: _____

Slope of Roofing Work by Area: (Complete all that apply)

Flat Roof Area ($\leq 2" / 12"$) 0 sf Steep Slope Roof Area ($\geq 4" / 12"$) 2000 sf
Low Slope roof Area ($> 2" - 4" / 12"$) 0 sf Total Roof Area, This Permit: 2000 sf

CERTIFICATION:

To the best of my knowledge and belief, all information supplied on any or all of the pages of this form, or supplied by any other means, is true and correct.

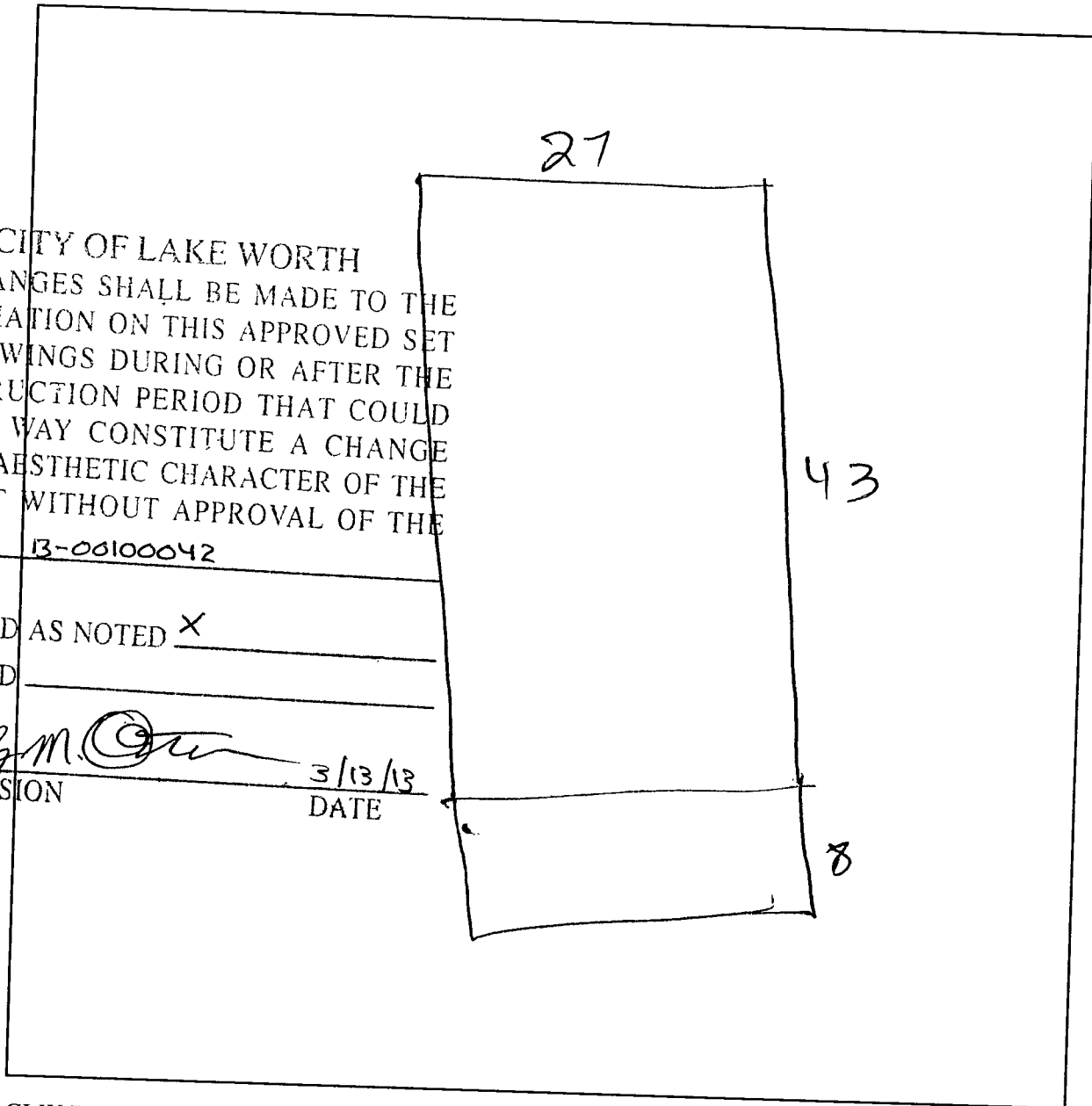
DARMA STAIN MERVIL [Signature] 2/21/12
Qualifier Name (Print) Signature Date

ROOFING PERMIT APPLICATION SUMMARY of SUPPLEMENTAL INFORMATION (Continued)

**Section B
Roof Plan**

Sketch Roof Plan: Illustrate all levels and sections. Include dimensions of sections and levels: clearly identify all roof areas per zone and provide all uplift pressures per zone. Identify and locate all parapet walls and expansion joints. If applicable, identify locations of hurricane mitigation and provide attachment details on the following page.

NOTE: for flat roofs, provide the perimeter width (a') and the corner size (a' x a')



ROOFING PERMIT APPLICATION SUMMARY of SUPPLEMENTAL INFORMATION
Section C

HURRICANE MITIGATION PER F.S. 553

"Hurricane Mitigation Retrofits for Existing Single Family Residential Structures"

Address: 215 S. Federal Hwy

Water Barrier: Florida Statute 553.844 Section 201.2

As of October 1, 2007, all single family dwelling re-roof applications must provide for a secondary water barrier as defined in Section 201.2.

1. Method of secondary water barrier installation:
 - Roof sheathing joints covered with 4" self-adhering polymer modified bitument tape applied directly to the sheathing. Tape must be covered with an underlayment system as required for the roofing system.
 - Entire roof deck covered with a self adhering polymer modified bitument sheet. No additional underlayment is required unless specified by the product approval or the
 - Entire roof deck covered with 30# felt underlayment installed with nails and tin-tabs as required for the HVHZ. No additional underlayment shall be required over the top of
 - Approved 30# underlayment fastened with 1" round plastic cap or metal cap nails attached to a nailable deck in a grid pattern 12" staggered between the laps with 6" spacing at the laps. For slopes 2:12 to 4:12, two layers installed shingle fashion, lapped
2. Secondary Water Barrier: N/A
Manufacturer _____ Product Approval FL#: _____

Roof To Wall Connections: Florida Statute 553.844 Section 201.3

1. YES NO Was the permit for construction applied on or after March 1, 2002?
(if yes, proceed to signature and permit submittal)
2. Applicant must provide documentation of building value: Indicate the type provided:
 - Copy of current home insurance summary sheet.
 - Copy of latest Tax Bill or Property Appraiser office webpage for the home.
3. YES NO Is the value of the building \$300,000.00 or more?
(if no, proceed to signature and permit submittal)
4. If yes to # 3, then roof to wall connections must be enhanced to comply with 201.3. The priorities for upgrading are outlined in section 201.3.5 of the manual. An additional 15% of the cost of re-roofing must be spent on enhanced connections. A separate permit application by a residential, building or general contractor is required.

DARMA SAIN NEUR Qualifier / Owner -Builder Name (Print) [Signature] Qualifier / Owner -Builder's Signature 2/21/13 Date



Gary R. Nikolits, CFA
Property Appraiser
 Palm Beach County

Property Appraiser's Public Access **PAPAD**



Location Address 215 S FEDERAL HWY
 Municipality LAKE WORTH
 Parcel Control Number 38-43-44-21-15-093-0120
 Subdivision LAKE WORTH TOWN OF IN PB 2 PGS 29 TO 40 INC
 Official Records Book 25389 Page 241
 Sale Date MAY-2012
 Legal Description TOWN OF LAKE WORTH LT 12 BLK 93

Owners
 721 NORTH DIXIE LLC

Mailing address
 1111 SW 1ST AVE # 2517
 MIAMI FL 33130

Sales Date	Price	OR Book/Page	Sale Type	Owner
MAY-2012	\$72,511	25389 / 0241	WARRANTY DEED	721 NORTH DIXIE LLC
APR-2012	\$90,200	25121 / 1010	CERT OF TITLE	DEUTSCHE BANK NATIONAL TRUST CO TR
DEC-1999	\$65,000	11527 / 0275	WARRANTY DEED	MARLOW LINDA (M)
FEB-1994	\$100	08139 / 0284	QUIT CLAIM	
NOV-1991	\$100	07036 / 0111	WARRANTY DEED	

12

No Exemption Information Available.

Number of Units 2 *Total Square Feet 880 Acres 0.1550
 Use Code 1200 - STORE/OFFICE/RESIDENTIAL Zoning POMF30 - (38-LAKE WORTH)

Tax Year	2012 P	2011	2010
Improvement Value	\$67,317	\$70,831	\$75,752
Land Value	\$57,713	\$78,975	\$87,750
Total Market Value	\$125,030	\$149,806	\$163,502

P = Preliminary

All values are as of January 1st each year

Tax Year	2012 P	2011	2010
Assessed Value	\$125,030	\$149,806	\$163,502
Exemption Amount	\$0	\$0	\$0
Taxable Value	\$125,030	\$149,806	\$163,502

Tax Year	2012 P	2011	2010
Ad Valorem	\$3,006	\$3,666	\$4,015
Non Ad Valorem	\$991	\$991	\$975
Total tax	\$3,997	\$4,657	\$4,990



BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

GAF Materials Corporation
1361 Alps Road.
Wayne, NJ 07470

SCOPE:

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

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

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

DESCRIPTION: Timberline® Prestique® Lifetime

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

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

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

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

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

This renews NOA #07-0507.11 and consists of pages 1 through 4.
The submitted documentation was reviewed by Alex Tigera.



NOA No.:07-1120.15
Expiration Date: 04/22/13
Approval Date: 05/08/08
Page 1 of 4

ROOFING ASSEMBLY APPROVAL

Category: Roofing
Sub-Category: 07310 Asphalt Shingles
Materials: Dimensional
Deck Type: Wood

1. SCOPE

This renews Timberline Prestique Lifetime as manufactured by GAF Materials Corp described in Section 2 of this Notice of Acceptance.

2. PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Timberline Prestique Lifetime	13 ¹ / ₄ " x 39 ³ / ₈ "	TAS 110	Fiberglas reinforced heavy weight asphalt roof shingle, with a laminate profile

3. EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Center for Applied Engineering	TAS 100		02/23/94
Underwriters Laboratories, Inc.	ASTM 3462	ASTM D3462	03/03/06
Underwriters Laboratories, Inc.	TAS 107	Modifed ASTM D 3161	04/13/94
PRI Asphalt Technologies, Inc.	ASTM D3462	GAF-103-02-02	11/02/05
PRI Asphalt Technologies, Inc.	TAS 100	GAF-046-02-01 GAF-103-02-01	01/13/04 11/14/05
Underwriters Laboratories, Inc.	TAS 107	04NK04273	02/20/04
Underwriters Laboratories, Inc.	Modifed ASTM D 3161	05CA42840	11/11/05

4. LIMITATIONS

- 4.1 Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
- 4.2 Shall not be installed on roof mean heights in excess of 33 ft.
- 4.3 All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.

5. INSTALLATION

- 5.1 Shingles shall be installed in compliance with Roofing Application Standard RAS 115.
- 5.2 Flashing shall be in accordance with Roofing Application Standard RAS 115
- 5.3 The manufacturer shall provide clearly written application instructions.
- 5.4 Exposure and course layout shall be in compliance with Detail 'A', attached.
- 5.5 Nailing shall be in compliance with Detail 'B', attached.



NOA No.:07-1120.15
Expiration Date: 04/22/13
Approval Date: 05/08/08

6. LABELING

6.1 Shingles shall be labeled with the Miami-Dade Product Control Approved Seal or the wording "Miami-Dade County Product Control Approved".



7. BUILDING PERMIT REQUIREMENTS

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

7.1.1 This Notice of Acceptance.

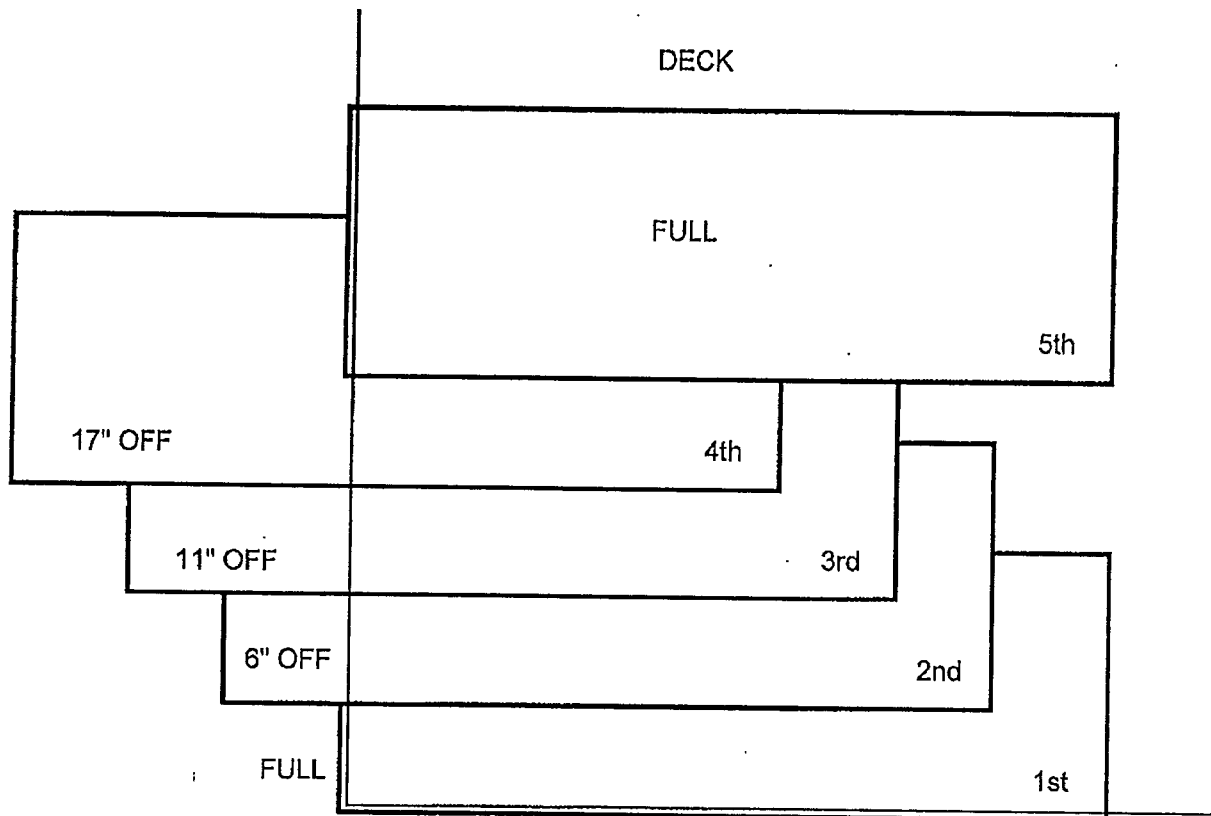
7.1.2 Any other documents required by the Building Official or the applicable code in order to properly evaluate the installation of this system.

8. MANUFACTURING PLANTS

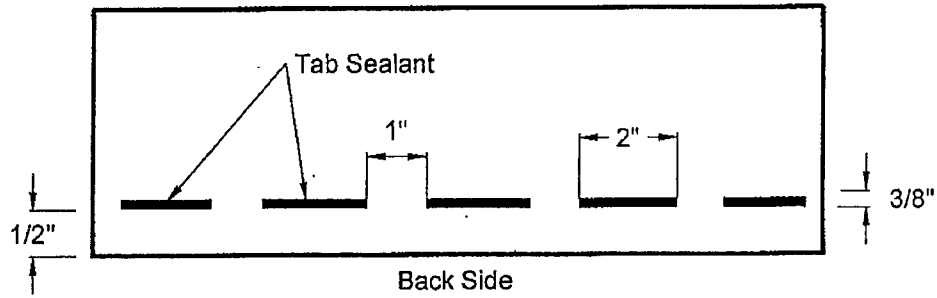
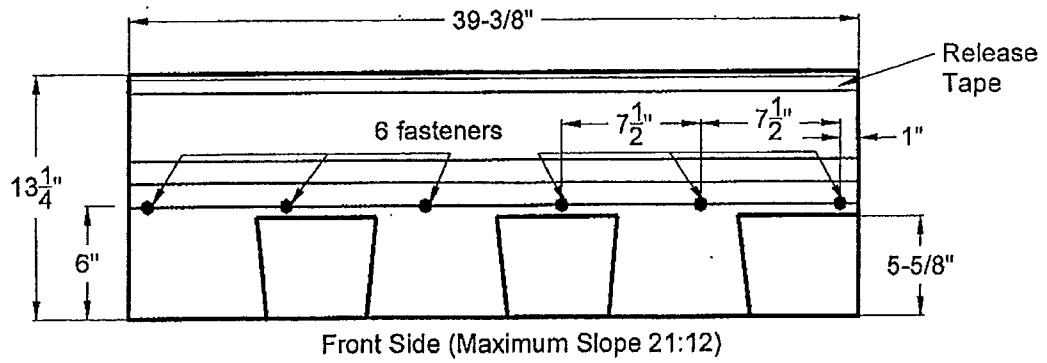
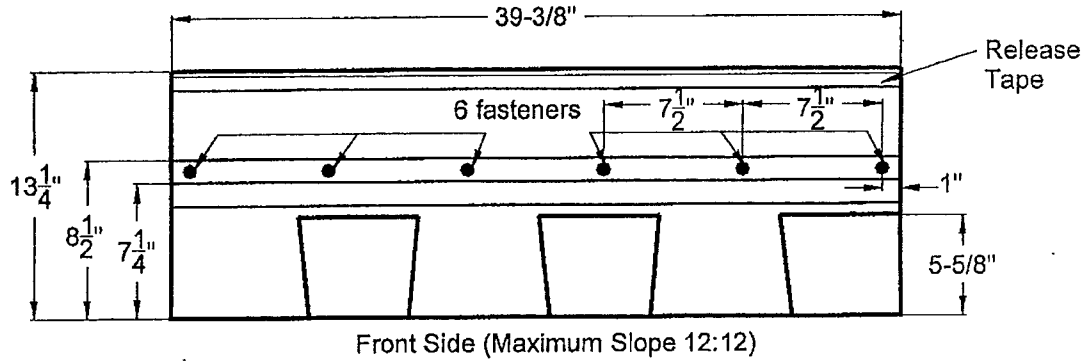
8.1 Tampa, FL

8.2 Michigan City, IN

DETAIL A

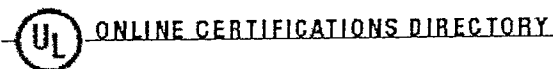


DETAIL B – 13-1/4" X 39-3/8"



END OF THIS ACCEPTANCE





TFWZ.R3915 Prepared Roof-covering Materials

[Page Bottom](#)

Prepared Roof-covering Materials

[See General Information for Prepared Roof-covering Materials](#)

GAF MATERIALS CORP

R3915

SUITE 600
14911 QUORUM DR
DALLAS, TX 75254 USA

Asphalt glass mat shingles designated "Timberline Natural Shadow," "Timberline Prestique 30," "Timberline Prestique 40," "Timberline Majestic 30," "Timberline Prestique Lifetime," "Timberline Prestique Grande" and "Capstone," for installation as Class A prepared roof coverings. Suitable for installation on minimum 3/8-in. thick plywood decks. Also Classified in accordance with ASTM D3161, Class F. Also Classified in accordance with ASTM D3462.

Asphalt glass mat shingles designated "Timberline ArmorShield II" and "ProStart Starter Strip" for installation as Class A prepared roof coverings. Suitable for installation on minimum 3/8-in. thick plywood decks. Also Classified in accordance with ASTM D3462.

Hip and ridge shingles designated "Seal-A-Ridge," "Seal-A-Ridge ArmorShield" and "Z-Ridge" for installation as Class A prepared roof coverings.

[Last Updated](#) on 2011-04-05

[Questions?](#)

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TFWZ.GuideInfo Prepared Roof-covering Materials

[View Listings](#)

[Page Bottom](#)

[Roof-covering Materials] Prepared Roof-covering Materials

[See General Information for Roof-covering Materials](#)

GENERAL

This category covers materials intended to provide Classes A, B and C coverings on combustible (wood, 3/4-in. thick sheathing boards or 3/4-in. thick plywood unless otherwise indicated) decks when applied in accordance with detailed instructions included with the packages.

The use of 15/32-in. thick (minimum) plywood is a suitable alternate to 1/2-in. thick (minimum) plywood specified in Listings for individual manufacturers.

The use of 3/8-in.-thick (minimum) nonveneer PS-2-rated sheathing (oriented strandboard panels, structural particleboard panels, composite panels or waferboard panels) is a suitable alternate to 1/2-in. thick (minimum) plywood specified in Listings for individual manufacturers when a Classified underlayment is utilized between the sheathing and the prepared roof covering.

Listings are applicable either for new work or for recovering purposes.

Flashings and trimmings are intended to be the same as or not less than the equivalent of the roof coverings in each class, or of 16 oz. or heavier copper, No. 26 USS gauge or heavier galvanized steel, or 0.019-in. thick or heavier aluminum.

This category also covers shingles with factory-applied adhesives or integral locking features. The Listing Mark for such shingles may, in addition to fire resistance information, include wind resistance information.

PREPARED ROOF COVERINGS

Asphalt Organic-Felt Shingle Coverings are composed of asphalt organic-felt (previously identified as rag-felt) grit-surfaced shingles, one or more thickness, laid in accordance with the instruction sheets accompanying the packages. These coverings are limited to roof decks capable of receiving and retaining nails and to inclines sufficient to permit drainage.

Asphalt Glass-Fiber Mat Shingle or Sheet Roofing Coverings are composed of asphalt glass-fiber mat, grit-surfaced shingles or sheet roofing, laid in accordance with the instruction sheets accompanying the packages. These coverings are limited to roof decks capable of receiving and retaining nails and to inclines sufficient to permit drainage.

Modified Asphalt Glass-Fiber Mat, Asphalt Organic-Felt or Glass-Fiber/Polyester Composite Shingle Coverings are composed of modified asphalt-coated glass-fiber mat or glass-fiber/polyester composite, grit-surfaced shingles, laid in accordance with the instruction sheets accompanying the packages. These coverings are limited to roof decks capable of receiving and retaining nails and to inclines sufficient to permit drainage.

Wind-resistant Asphalt Glass-Fiber Mat Shingles are provided with field-applied or factory-applied adhesive or integral locking tabs. Some shingles with factory-applied adhesive utilize bands or spots of a heat-sensitive adhesive located either on the surface of the shingles or on the back side of each tab. Adhesives of this type must be activated by solar heat of intensity generally attained on warm, sunny days. Other shingles with factory-applied adhesive utilize a combination pressure-sensitive and heat-sensitive adhesive. Due to the nature of adhesives of this type, sealing is induced by application of pressure and/or heat.

Wind-resistant Asphalt Organic-Felt Shingles are provided with factory-applied adhesive or integral locking tabs. Some shingles with factory-applied adhesive utilize bands or spots of a heat-sensitive adhesive located either on the surface of the shingles or on the back side of each tab. Adhesives of this type must be activated by solar heat of intensity generally attained on warm, sunny days. Other shingles with factory-applied adhesive utilize a combination pressure-sensitive and heat-sensitive adhesive. Due to the nature of adhesives of this type, sealing is induced by application of pressure and/or heat.

Wind-resistant Modified Asphalt Glass-Fiber Mat Shingles are provided with factory-applied adhesive. Some shingles with factory-applied adhesive utilize bands or spots of a heat-sensitive adhesive located either on the surface of the shingles or on the back of each tab. Adhesives of this type must be activated by solar heat of intensity generally attained on warm, sunny days. Other shingles with factory-applied adhesive utilize a combination pressure-sensitive and heat-sensitive adhesive. Due to the nature of adhesives of this type, sealing is induced by application of pressure and/or heat.

Hip and Ridge Shingles are composed of asphalt or modified asphalt-coated glass-fiber mat surfaced with granules and are intended to be installed as specified on packaging supplied with the product for hip and ridge installations only. They are investigated for fire resistance in accordance with the fire test portion of [UL Subject 2375](#), "Outline of Investigation for Hip and Ridge Shingles." Where indicated, they have also been investigated for wind resistance in accordance with the test procedures of [UL Subject 2375](#). The class of shingles and performance criteria are

in accordance with ASTM D3161. Wind-resistant hip and ridge shingles may utilize locking mechanisms, field-applied adhesives or factory-applied heat-sensitive adhesive which must be activated by solar heat of intensity generally attained on warm, sunny days.

RELATED PRODUCTS

Prepared roof-covering materials investigated for impact resistance are covered under Roof-covering Materials, Impact Resistance ([TGAM](#)).

Asphalt shingles investigated for wind resistance are covered under Prepared Roof-covering Materials, Asphalt Shingle Wind Resistance ([TGAH](#)).

Accessory components utilized in the prepared roof-covering system are covered under Prepared Roofing Accessories ([TGDY](#)). Ridge vents utilized in the prepared roof-covering system are covered under Ridge Vents ([TGEW](#)). Type 15 and Type 30 asphalt felts, used as underlayments, are covered under Roofing Systems ([TGFU](#)). Underlayments, ridge vents and accessory components, when utilized, are intended to be Classified materials.

ADDITIONAL INFORMATION

For additional information, see Roof-covering Materials ([TEVT](#)) and Roofing Materials and Systems ([AARM](#)).

REQUIREMENTS

The basic standard used to investigate products in this category is [ANSI/UL 790](#), "Tests for Fire Resistance of Roof Covering Materials" (ASTM E108 and ANSI/NFPA 256).

ADJUNCT SERVICE

UL provides a service for the Classification of specific prepared roof-covering materials that not only meet the appropriate requirements of UL but also have been investigated as follows:

1. Where indicated in the individual Listings, specific products have also been Classified in accordance with ASTM D3161, "Standard Test Method for Wind-Resistance of Asphalt Shingles (Fan-Induced Method)." Where Classes A, D and F are referenced, tests were conducted at 60, 90 mph and 110 mph, respectively.
2. Also, where indicated in the individual Listings, specific shingle products have also been Classified in accordance with ASTM D3462, "Standard Specifications for Asphalt Shingles Made from Glass Felt and Surfaced with Mineral Granules," or CAN/CSA-A123.5, "Asphalt Shingles Made From Organic Felt and Surfaced With Mineral Granules / Asphalt Shingles Made From Glass Felt and Surfaced With Mineral Granules."
3. Also, where indicated in the individual Listings, specific sheet roofing products have also been Classified in accordance with ASTM D3909, "Standard Specification for Asphalt Roll Roofing (Glass Felt) Surfaced with Mineral Granules."

UL MARK

The Listing Mark of UL on the product is the only method provided by UL to identify products manufactured under its Listing and Follow-Up Service. The Listing Mark for these products includes the UL symbol (as illustrated in the Introduction of this Directory) together with the word "LISTED," and the following additional information:

**PREPARED ROOF COVERING MATERIALS
DEGREE OF RESISTANCE TO EXTERNAL FIRE - CLASS +
Issue No.**

Combination Listing/Classification Mark — A Listing Mark combined with a Classification Mark is provided on products that have additionally been investigated in accordance with the standards detailed below. The combined Listing/Classification Mark consists of the Listing Mark elements detailed above and the following marking: **ALSO CLASSIFIED IN ACCORDANCE WITH ***, where "*" is one or more of the texts detailed below:

ASTM D3161, CLASS ++

ASTM D3462

CSA-A123.5

ASTM D3909

+ A, B or C

++ A, D or F

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Last Updated on 2009-03-04

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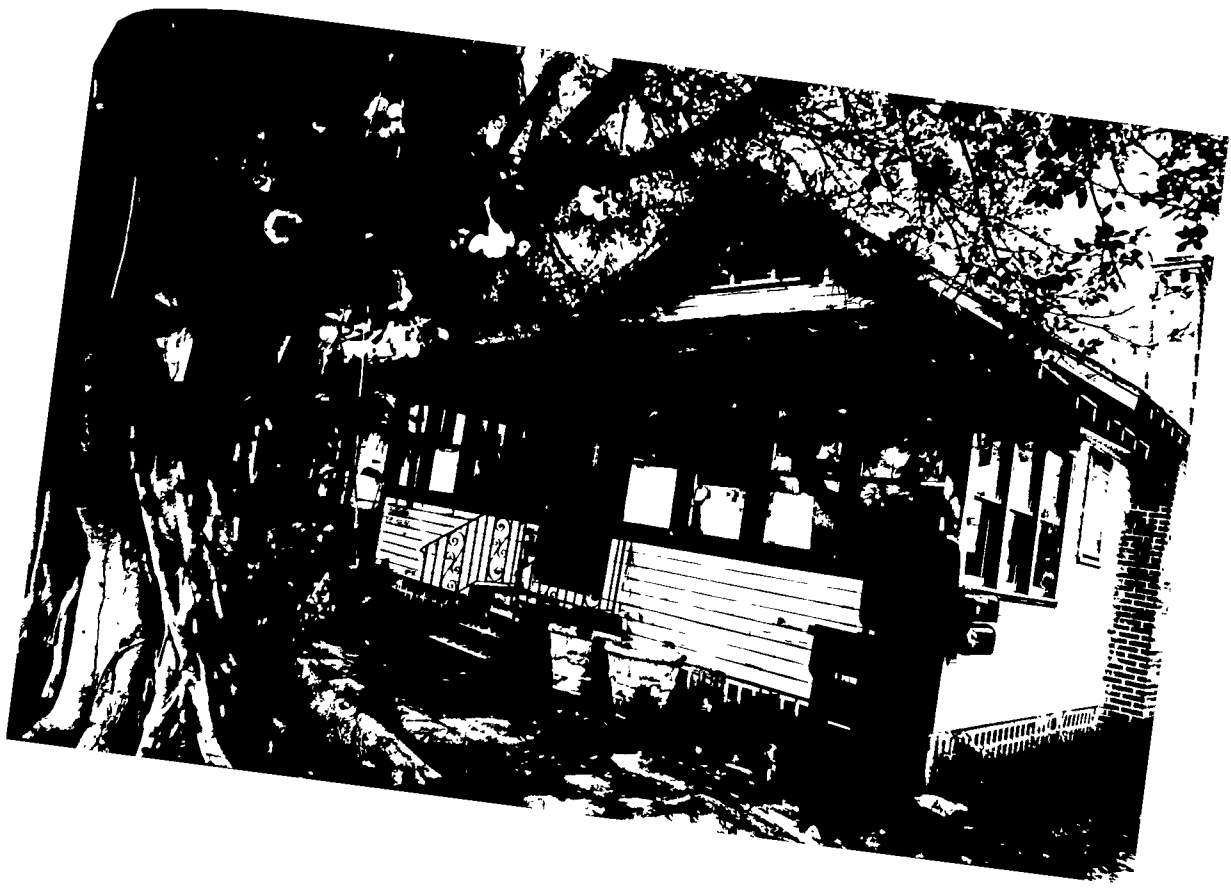






RECYCLE
♻️





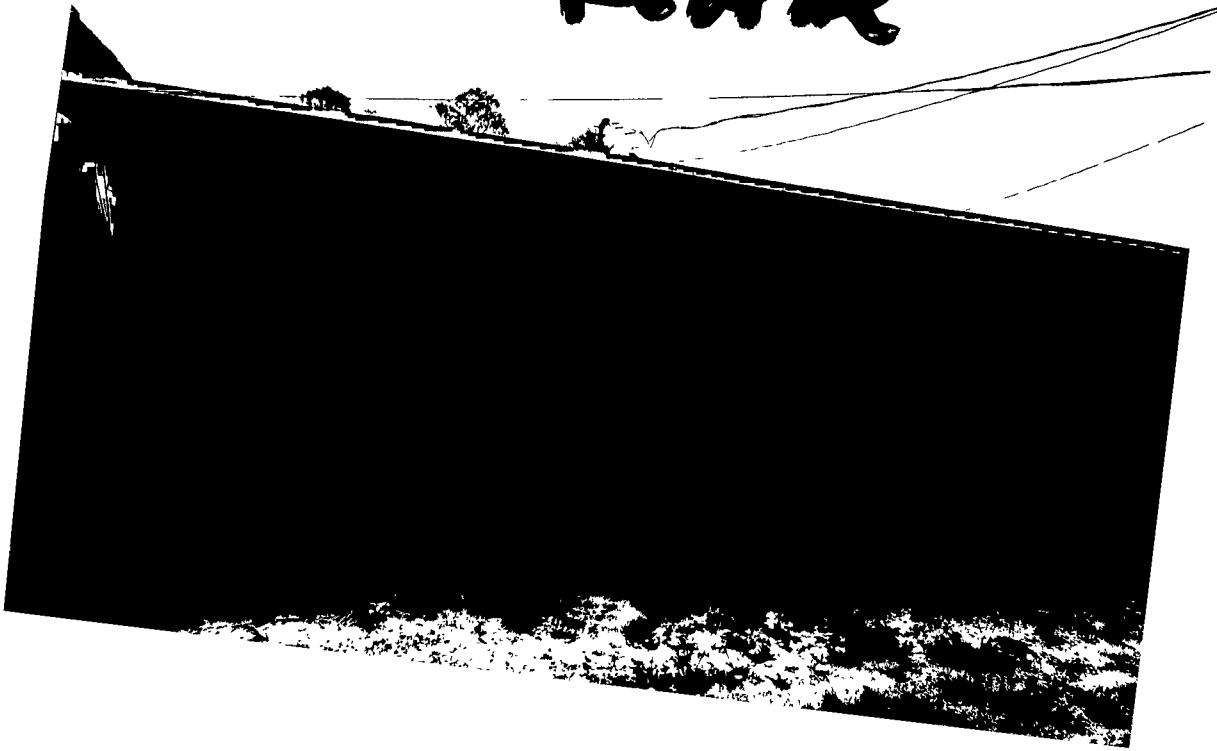




LEFT SOUTH



West Rent

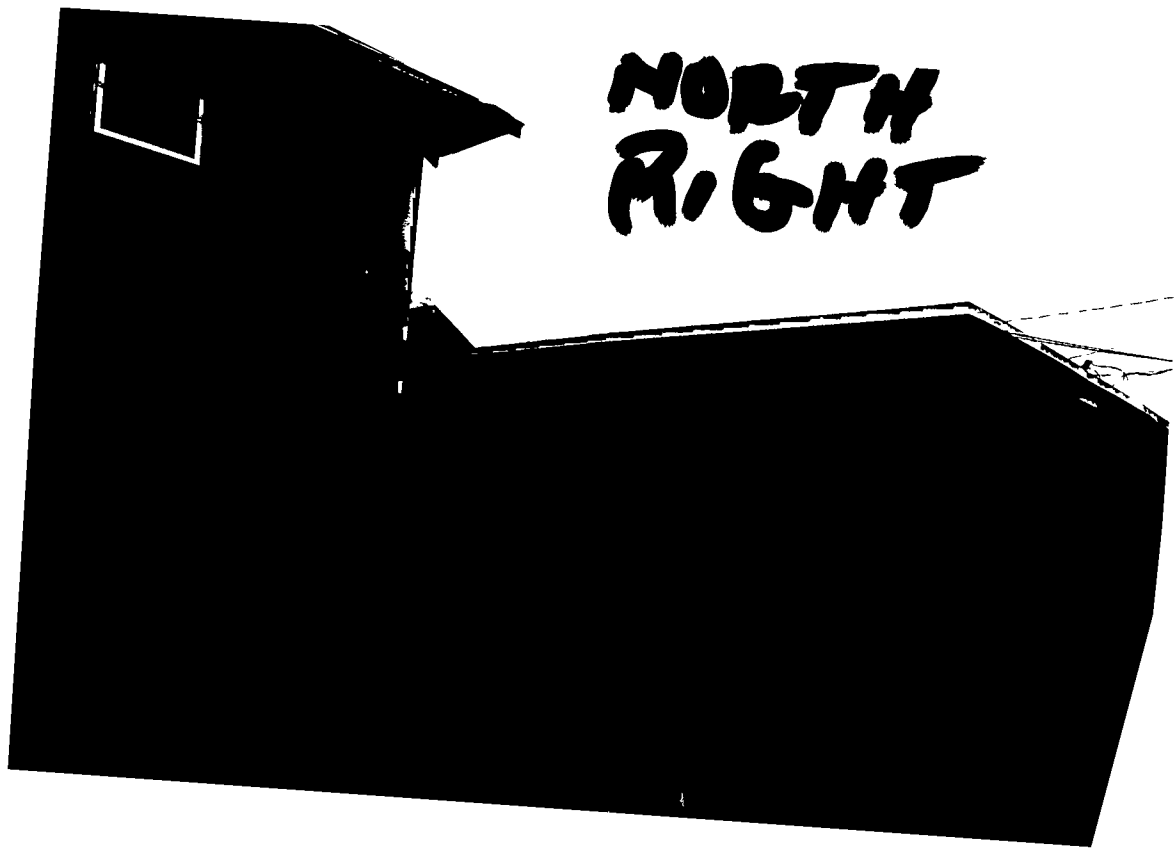


EAST

FRONT



**NORTH
RIGHT**





City of LAKE WORTH

HISTORIC RESOURCES PRESERVATION BOARD

7 NORTH DIXIE HIGHWAY
LAKE WORTH, FLORIDA 33460-3787

www.lakeworth.org

Where the Tropics Begin

PAD

COMMUNITY APPEARANCE AND CERTIFICATE OF APPROPRIATENESS APPLICATION COA# 13-00100642

Address of Property: 215 S. Federal Hwy

CA CASE # _____ Date _____ COA HRPB CASE# _____

Affix One Clear Photograph of the Property (Front Elevation)

INSTRUCTIONS FOR COMPLETING AND FILING THE COA APPLICATION

Applications may be submitted to the Planning, Zoning and Historic Preservation Department at any time between the hours of 8:00 a.m. and 4:00 p.m., Monday thru Friday. The Historic Resources Preservation Board (HRPB) will act on an application at the next available meeting. The application must be filed by 12:00 Noon a minimum of 15 days prior to that meeting. The application must be accompanied by the appropriate processing fee (make checks payable to the City of Lake Worth). Please print or type all required information, and ensure the application is complete and accurate.

It is necessary that an owner, or an authorized agent, be present at the Board meeting when the COA is reviewed. If a property owner wishes to designate a representative/agent, please execute the "Owner's Consent and Designation of Agent" form found on Page 9.

Pursuant to the City's Zoning Code Section 23.27.05.03 no application for a COA will be accepted by the HRPB unless it contains all required and pertinent information. A pre-application conference with a member of the Planning, Zoning and Historic Preservation staff is strongly recommended, and can be scheduled at your convenience. We will be glad to assist you in any way possible. If you are undergoing a substantial rehabilitation, please make sure to ask about the Historic Preservation Tax Abatement Program.

Office Use Only: Requires Board Approval, Meeting Date: _____, 200__
Requires Staff Approval X

Affix One Clear Photograph for each of the Rear & Side Elevations

Affix Clear Photographs of Adjacent Properties

Attach additional pages if necessary

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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.

City of Lake Worth
 Building Department
 1900 2nd Ave N
 Lake Worth, FL 33461
 Inspection Request (561) 586-1691 Main Office (561) 586-1647

Application Number	13-00001533	Page	2
Property Address	215 S FEDERAL HWY	Date	6/24/13
PROPERTY CONTROL NUMBER:	38-43-44-21-15-093-0120		
Application description . . .	RESIDENTIAL WINDOW/DOOR NEW		
Subdivision Name			
Property Use	SINGLE FAMILY		
Permit	RESIDENTIAL WINDOW/DOOR NEW		
Additional desc . .	REPLACE 5 WINDOWS		

Required Inspections

Seq	Insp Code	Description	Initials	Date
10	129	BD WINDOW INPROGRESS	_____	___/___/___
10	127	BD WINDOW MULLION/CLIP	_____	___/___/___
1000	104	BD FINAL	_____	___/___/___

**WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF
COMMENCEMENT MAY RESULT IN YOU 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.**



COA



BUILDING DIVISION
DEPARTMENT FOR COMMUNITY SUSTAINABILITY
CITY OF LAKE WORTH
1900 2ND AVENUE NORTH
LAKE WORTH, FL 33461
561.586.1647

PERMIT APPLICATION

MASTER PERMIT NUMBER

PERMIT NUMBER (FOR OFFICE USE ONLY)
13-1333

WORK LOCATION

CONTRACTOR

ADDRESS 215 S. Federal Hwy
FLOOR/BAY/SUITE/APT # Cottage
SUBDIVISION TOWN OF LAKE WORTH BLOCK 93 LOT 12
PARCEL ID# 38-43-44-21 15 093 0120

QUALIFIER NAME Darma Sainmervil
COMPANY NAME JM Properties of W. Palm Beach, Inc.
ADDRESS 10606 Versailles Boulevard
CITY Wellington STATE FL ZIP 33449
STATE LIC. OR COMPETENCY # CBC 1251448
PHONE# 561-756-5744 CELL# 561-804-1248
E-MAIL jm-properties @ comcast.net

PERMIT TYPE

Structure, Addition, Alteration, Repair, Fire Sprinkler, Fire Alarm, Driveway, Approach, Residential, Window, Demolition, Relocation, Roofing, Fence, Sign, Gas, Fuel, Commercial, Shutter, Electrical, Mechanical, Plumbing, Pool, Irrigation, Backflow, Change of Contractor, Generator, Door, Other

OWNER OF RECORD

NAME LAST 721 North Dixie LLC FIRST MI
ADDRESS 11 SW 1st Avenue # 2517
CITY Miami STATE FL ZIP 33130
PHONE 561-727-0084 CELL
TENANT NAME

DESCRIBE PROJECT IN DETAIL

Removing 5 windows and reinstall 5 new impact windows

VALUE \$ 3,800.00 SQUARE FOOTAGE 1100 sqft/ CHANGE OF OCCUPANCY OR USE YES NO

PRIMARY PERMIT FEES SHALL INCLUDE THE FEES FOR SUBPERMITS, PROVIDED THAT ALL APPLICABLE SUBCONTRACTOR QUALIFIER SIGNATURES ARE ON THE APPLICATION AND PLANS INCLUDE THE DETAILS OF ALL SUBCONTRACTOR WORK. FAILURE TO INCLUDE THE REQUIRED INFORMATION AT THE TIME OF APPLICATION SHALL REQUIRE THAT A SEPARATE PERMIT BE ISSUED WITH APPROPRIATE FEES BEING CHARGED TO THE APPLICANT. CURRENT REGISTRATION REQUIRED AT TIME OF SUBMITTAL.

Table with 4 columns: Contractor Name/Signature, Date, State Lic./Cert. of Competency, and Permit #. Rows include Building Contractor, Electrical Contractor, Mechanical Contractor, Plumbing Contractor, and Roofing Contractor.

NOTICE TO PROPERTY OWNERS

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.

BEFORE ANY WORK IS DONE BY YOU OR YOUR CONTRACTOR, IMMEDIATELY FILE FOR AND RECORD A NOTICE OF COMMENCEMENT WITH THE OFFICE OF THE CLERK OF THE CIRCUIT COURT. THIS STEP IS REQUIRED BY THE FLORIDA CONSTRUCTION LIEN LAW.

IF YOU HAVE HIRED A CONTRACTOR TO DO THE WORK, MAKE SURE THAT THE CONTRACTOR OBTAINS THE PERMIT. THE CONTRACTOR'S SIGNATURE INDICATES HE OR SHE IS RESPONSIBLE FOR THE WORK, AND IF THE WORK IS NOT PERFORMED ACCORDING TO CODE, THE CITY CAN REQUIRE CORRECTIVE ACTION BY THE PARTY WHO OBTAINED THE PERMIT. FURTHERMORE, IF THE CONTRACTOR IS NOT LICENSED, YOU CAN BE IN VIOLATION OF STATE LAW BY ALLOWING AN UNLICENSED PERSON TO DO THIS WORK.

SINCE YOU OR YOUR CONTRACTOR HAVE APPLIED FOR A BUILDING PERMIT FOR WORK TO BE DONE ON PROPERTY YOU OWN, YOU SHOULD BE AWARE THAT: ANY PERSON WHO FURNISHED LABOR (A CONTRACTOR, SUBCONTRACTOR OR LABORER) OR SUPPLIES MATERIALS FOR YOUR HOME REPAIR, IMPROVEMENT OR NEW CONSTRUCTION MAY BE ABLE TO FILE A CLAIM (CALLED A LIEN) AGAINST YOU IF HE HAS NOT BEEN PAID BY YOUR CONTRACTOR OR YOU. YOU ARE LIABLE TO SUBCONTRACTORS OR SUPPLIERS IF THEY ARE NOT PAID BY YOUR CONTRACTOR OR YOURSELF.

AT THE COMPLETION OF WORK, REQUIRE THE CONTRACTOR TO GIVE YOU A SWORN NOTARIZED STATEMENT INDICATING ALL BILLS FOR LABOR AND MATERIALS HAVE BEEN PAID OR A LIST NAMING THOSE SUPPLYING LABOR AND MATERIALS THAT HAVE NOT BEEN PAID. ASK FOR THE AFFIDAVIT BEFORE MAKING THE LAST PAYMENT.

UNLICENSED CONTRACTORS: NO PERSON SHALL ENGAGE IN BUSINESS OR ACT IN THE CAPACITY OF A CONTRACTOR WITHOUT BEING DULY REGISTERED OR CERTIFIED. ANY PERSON WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR OF THE FIRST DEGREE AND MAY BE PUNISHED BY A PRISON TERM NOT EXCEEDING ONE (1) YEAR AND/OR A FINE NOT TO EXCEED \$1,000 (SECTION 489.127 FLORIDA STATUTES).

FEE SIMPLE TITLEHOLDER (if other than owner) Name _____ Address _____ City _____ State _____ Zip _____		MORTGAGE LENDER Name _____ Address _____ City _____ State _____ Zip _____	
BONDING COMPANY Name _____ Address _____ City _____ State _____ Zip _____		ARCHITECT/ENGINEER/RESIDENTIAL PLANS CERTIFIER I CERTIFY THAT THE PLANS ACCOMPANYING THIS DOCUMENT MEET ALL REQUIREMENTS PERTAINING TO BUILDING CONSTRUCTION IN THE CITY OF LAKE WORTH. Name _____ Signature _____ Address _____ City _____ State _____ Zip _____ Phone () _____ Cell () _____ Fax () _____	

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATIONS AS INDICATED. I CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND THAT ALL WORK WILL BE PERFORMED TO MEET THE STANDARDS OF ALL LAWS REGULATING CONSTRUCTION IN THIS JURISDICTION. I UNDERSTAND THAT A SEPARATE PERMIT MUST BE ACQUIRED FOR ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, ROOFING AND AIR CONDITIONERS, ETC.

OWNER'S AFFIDAVIT: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION & ZONING.

ALL SIGNATURES MUST BE ORIGINAL

Owner (Signature) _____ Print Name <u>GUY MOROSI</u>	Contractor/Agent (Signature) _____ Print Name <u>DANNA SAWNEAVE</u>
STATE OF <u>FL</u> COUNTY OF <u>Polk</u> Sworn to (or affirmed) and subscribed to before me this <u>16</u> day of <u>May</u> 20 <u>13</u> by Owner or Agent, who has produced the following identification _____ or who is personally known to me.	STATE OF <u>FL</u> COUNTY OF <u>Polk</u> Sworn to (or affirmed) and subscribed to before me this <u>16</u> day of <u>May</u> 20 <u>13</u> by Contractor, who has produced the following identification _____ known to me.
Signature of Notary _____ Print Name of Notary _____	Signature of Notary _____ Print Name of Notary _____

NOTARY PUBLIC-STATE OF FLORIDA
 Edese S. Simon
 Commission # EE018426
 Expires. AUG. 18, 2014
 BONDED THROUGH ATLANTIC BONDING CO., INC.

NOTARY PUBLIC-STATE OF FLORIDA
 Edese S. Simon
 Commission # EE018426
 Expires. AUG. 18, 2014
 BONDED THROUGH ATLANTIC BONDING CO., INC.



13-1533

CFN 20130217667
OR BK 26020 PG 0748
RECORDED 05/15/2013 09:47:53
Palm Beach County, Florida
Sharon R. Bock, CLERK & COMPTROLLER
Pg 0748; (1pg)

PERMIT NUMBER CLW PLANS EXAMINER

NOTICE OF COMMENCEMENT

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.

1. DESCRIPTION OF PROPERTY (Legal description of the property & street address, if available) TAX FOLIO NO.: 3843442115 093
SUBDIVISION TOWN OF LAKE WORTH BLOCK 93 TRACT _____ LOT 12 BLDG _____ UNIT 0120

2. GENERAL DESCRIPTION OF IMPROVEMENT: GENERAL IMPROVEMENT

3. OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:

a. Name and address: 721 N. DIXIE LK 2155 FORT HWY LAKE WORTH 33467

b. Interest in property: Fee Simple

c. Name and address of fee simple titleholder (if different from Owner listed above): SAME

4. a. CONTRACTOR'S NAME: JM Properties / W. Palm Beach Inc.

Contractor's address: 10606 VERSAILLES BLVD WELLINGTON FL 33449 b. Phone number: 904.756.5744

5. SURETY (if applicable, a copy of the payment bond is attached):

a. Name and address: _____

b. Phone number: _____

c. Amount of bond: \$ _____

6. a. LENDER'S NAME: NA

Lender's address: _____

b. Phone number: _____

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

a. Name and address: _____

b. Phone numbers of designated persons: NA

8. a. 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.

b. Phone number of person or entity designated by Owner: _____

9. Expiration date of notice of commencement (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): _____, 20____

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.

Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated therein are true to the best of my knowledge and belief.

David Stapp
(Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager)

DAVID STAPP
(Print Name and Provide Signatory's Title/Office)

State of FL
County of Palm Beach

The foregoing instrument was acknowledged before me this 10 day of May, 2013

by DAVID STAPP, as MANAGER
(name of person) (type of authority, ...e.g. officer, trustee, attorney in fact)

for _____
(name of party on behalf of whom instrument was executed)

Personally Known or Produced Identification _____

Type of Identification Produced _____

NOTARY PUBLIC STATE OF FLORIDA
Edese S. Simon
Commission # EE018426
Expires AUG. 18, 2014
BONDED THROUGH ATLANTIC BONDING CO., INC.

Edese S. Simon
(Signature of Notary Public)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Rev. 10-01-11 (S.Recording)



STATE OF FLORIDA • PALM BEACH COUNTY

I hereby certify that the foregoing is a true copy of the record in my office with redactions, if any as required by law.

THIS 10 DAY OF May, 2013

SHARON R. BOCK
CLERK & COMPTROLLER

By [Signature]
DEPUTY CLERK



**DEPARTMENT for COMMUNITY SUSTAINABILITY
PLANNING, ZONING, AND HISTORIC PRESERVATION**

1900 2nd Ave North · Lake Worth, Florida 33461 Phone: 561-586-1687

REVIEWED

13-1533

OFFICE COPY
SUBJECT TO COMPLIANCE WITH ALL
CODES AND ORDINANCES IN EFFECT
IN THE CITY OF LAKE WORTH

DATE: 6/7/2013

APPLICANT: JM Properties of WPB Inc. CLW PLANS EXAMINER
10606 Versailles Blvd
Wellington, FL 33449

PROJECT: COA#13-00100104: Certificate of Appropriateness (COA) window replacement for the subject property located at 215 North Federal Highway; PCN#38-43-44-21-15093-0120. The subject property is a contributing resource within the Southeast Lucerne Local Historic District.

On May 16, 2013 the Division of Planning, Zoning, and Historic Preservation received a COA application for window replacement for the property located at 215 South Federal Highway. The property contains two building, a single family residence built c.1925 and a rear office/utility building built in 1956. The application proposes to replace the non-impacted aluminum windows on the rear building with new impact rated fixtures, per the plans submitted. No size of window openings is proposed. This COA application was submitted concurrently with building permit application #13-1533.

Staff approves the request as described in the COA application. The project constitutes a like for like window replacement on the rear building, as the existing windows are also recent replacement windows. The project as proposed is consistent with the requirements of the historic preservation ordinance and will have no adverse physical or visual effect on the property or the surrounding historic district. This letter only constitutes an approval of compliance with the review process for exterior changes to a property within a local historic district as defined in City of Lake Worth Municipal Code §23.27.05.00. This approval does not exempt the applicant from complying with the building code and zoning ordinance of the City of Lake Worth concerning window installation.

No changes shall be made to the information on this approved application that could in any way constitute a change in the aesthetic character of the project without approval of staff or the Historic Resources Preservation Board.

Please be advised the Certificate of Appropriateness authorized herein shall be null and void unless construction has commenced and is proceeding within one (1) year from the staff approval date.

Kelly M. Christensen, Preservation Planner
Division of Planning, Zoning, and Historic Preservation
Department for Community Sustainability



PLANNING & PRESERVATION DIVISION
 DEPARTMENT FOR COMMUNITY SUSTAINABILITY
 CITY OF LAKE WORTH
 1900 2ND AVENUE NORTH
 LAKE WORTH, FL 33461
 561.586.1687

DEVELOPMENT APPLICATION

Note to Applicant: If you have any questions or need assistance in filling out this application, please speak with a planner. Planners are available to the public between 9:00 – 10:30 and 3:00 – 4:30 daily, or by appointment.

- Cert. of Appropriateness Variance Special Land Use Site Plan Review
- Subdivision/Plat Annexation Sustainable Bonus Incentives
- Community Appearance Distance Proximity Waiver Sign Mural

Other HISTORICAL DISTRICT- REMOVE and
REPLACE^T WINDOWS ON COTTAGE IN BACK

PROJECT NAME 721 N DIXIE LLC / DAVID STAPPLES

PROJECT LOCATION 215 S. FEDERAL HWY (BACK COTTAGE)

PROJECT SQUARE FOOTAGE 1100 ESTIMATED COST \$ 3800⁰⁰

LEGAL DESCRIPTION: LOT(S) 12 BLOCK 93

SUBDIVISION OR PLAT TOWN OF LAKE WORTH

LOT SIZE _____ BAY SIZE _____

PRESENT USE _____ PRESENT ZONING CLASSIFICATION _____

PROPERTY CONTROL NUMBER 38-43-44-21-15-093-0120

Applicant JM Properties of WPB Inc.

Address 10606 VERSAILLES BLVD WELLINGTON FL 33449

Phone 561-756-5744

E-mail JM-PROPERTIES@COMCAST-NET

Preferred method of contact: Mail Email
 The Applicant is: (Check one) Owner Lessee Trustee
 Other (Specify) _____

Property Owner DAVID STAPPLES / 721 NDWE LLC
 Address 3301 NE 1st Ave MIAMI, FL 33134 (Suite 11-307)
 Phone 786-522-7620
 E-mail david.ocean2@aol.com

Preferred method of correspondence: Mail Email

Agent/Contact Person DANMA SAINMERVIL / JM Properties
 Address 10606 VERSAILLES Blvd Wellington FL 33449
 Phone 561-756-5744
 E-mail JM-PROPERTIES@COMCAST.NET

Preferred method of correspondence: Mail Email

Additional Contacts (Architect, Engineer, Planner, Landscape Architect, etc.)

Name _____ Company _____
 Phone 0/2 _____ E-mail _____
 Name _____ Company _____
 Phone _____ E-mail _____

I affirm and certify that I understand and will comply with the provisions and regulations of the City of Lake Worth Zoning Code. I further certify that all statements contained within this application are true to the best of my knowledge and belief. Further, I understand that the application, attachments, supporting documents and fees become part of the Official Records of the Department for Community Sustainability and are not returnable. I understand that misrepresentation of information contained within this application may be cause to void any development approvals associated with this application.

I also understand that once submitted, the application will be reviewed by staff for completeness. If deficiencies exist in the application, staff will notify the applicant/owner/agent regarding the deficient items, and the department will take no further action on the application until the required information is submitted. I understand that the Planning and Zoning Board, Historic Resources Preservation Board, or City Commission may request additional information during the public hearing process.

I understand any development application approval may carry a date of expiration (typically 1 year from date of approval) unless a building permit for the construction authorized has been applied for and constructions is diligently progressing toward completion.

SIGNATURE OF APPLICANT [Signature]

DATE 5/15/13

SIGNATURE OF PROPERTY OWNER [Signature]

DATE 5/15/13

The Department for Community Sustainability Director has the discretion to require from the Applicant additional studies, data, or analysis upon an evaluation of the application. The application may not move forward until this additional information is provided. The Department for Community Sustainability Director shall allow the applicant reasonable time to prepare and submit this information.

APPLICATION FEE

\$35

ADVERTISING FEE

0

CITY OF LAKE WORTH

NO CHANGES SHALL BE MADE TO THE INFORMATION ON THIS APPROVED SET OF DRAWINGS DURING OR AFTER THE CONSTRUCTION PERIOD THAT COULD IN ANY WAY CONSTITUTE A CHANGE IN THE AESTHETIC CHARACTER OF THE PROJECT WITHOUT APPROVAL OF THE

This Space for Office Use Only:

Intake date: 5/16/13

Intake staff:

Assigned to: KMC

Project No.: 13-00100104

Paid: Y

Date application deemed complete: 6/7/13 ZHP DIVISION

Scheduled for meeting: N/A

The owner or his agent has or has not submitted a request regarding the subject property within the past twelve (12) months.

Any Code Violations? YES NO If yes, attach information.

APPROVED AS NOTED _____

APPROVED X

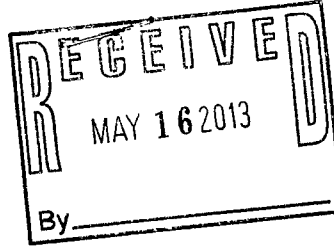
[Signature]

6/7/13
DATE

↓
Case # 12-1208
Maintenance + Repair
U+O, BTR Rental License
Open Lien active as of 5/20/13



COA



BUILDING DIVISION
DEPARTMENT FOR COMMUNITY SUSTAINABILITY
CITY OF LAKE WORTH
1900 2ND AVENUE NORTH
LAKE WORTH, FL 33461
561.586.1647

PERMIT APPLICATION

MASTER PERMIT NUMBER

PERMIT NUMBER (FOR OFFICE USE ONLY)
13-1333

WORK LOCATION

CONTRACTOR

ADDRESS 215 S. Federal Hwy
FLOOR/BAY/SUITE/APT # Cottage
SUBDIVISION TOWN OF LAKE WORTH BLOCK 93 LOT 12
PARCEL ID# 38-43-44-21 15 093 0120

QUALIFIER NAME Darma Sainmervil
COMPANY NAME JM Properties of W. Palm Beach, Inc.
ADDRESS 10606 Versailles Boulevard
CITY Wellington STATE FL ZIP 33449
STATE LIC. OR COMPETENCY # CBC 1251448
PHONE# 561-756-5744 CELL# 561-804-1248
E-MAIL jm-properties @ comcast.net

PERMIT TYPE

Structure, Addition, Alteration, Repair, Fire Sprinkler, Fire Alarm, Driveway, Approach, Residential, Window, Demolition, Relocation, Roofing, Fence, Sign, Fuel, Commercial, Shutter, Electrical, Mechanical, Plumbing, Pool, Irrigation, Backflow, Change of Contractor, Generator, Door, Other

OWNER OF RECORD

NAME LAST 721 North Dixie LLC FIRST MI
ADDRESS 11 SW 1st Avenue # 2517
CITY Miami STATE FL ZIP 33130
PHONE 561-727-0084 CELL
TENANT NAME

DESCRIBE PROJECT IN DETAIL

Removing 5 windows and reinstall 5 new impact windows

VALUE \$ 3,800.00 SQUARE FOOTAGE 1100 sqft/ CHANGE OF OCCUPANCY OR USE YES NO

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Table with 4 columns: Contractor Name, Date, State Lic./Cert. of Competency, and Permit #. Includes Building Contractor (JM Properties), Electrical Contractor, Mechanical Contractor, Plumbing Contractor, and Roofing Contractor.



DEPARTMENT OF PERMITTING, ENVIRONMENT, AND REGULATORY
AFFAIRS (PERA)
BOARD AND CODE ADMINISTRATION DIVISION

NOTICE OF ACCEPTANCE (NOA)

MIAMI-DADE COUNTY
PRODUCT CONTROL SECTION
11805 SW 26 Street, Room 208
Miami, Florida 33175-2474
T (786) 315-2590 F (786) 315-2599

www.miamidade.gov/pera/

Lawson Industries, Inc.
8501 NW 90 Street
Medley, FL 33166

SCOPE:

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

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

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

DESCRIPTION: Series "HS-8700 (Flange Frame)" Aluminum Horizontal Sliding Window - L.M.I.

APPROVAL DOCUMENT: Drawing No. L8700-0901, titled "HS-8700 Horizontal Rolling Flange Impact Window", sheets 1 through 10 of 10, dated 05/30/09 with revision A dated 01/25/12, prepared by manufacturer, signed and sealed by Thomas J. Sotos, P. E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Section.

MISSILE IMPACT RATING: Large and Small Missile Impact Resistant

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

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

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

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

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA revises and renews NOA # 11-0705.10 and consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

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



MP
7/3/19/12

NOA No. 12-0127.08
Expiration Date: April 11, 2017
Approval Date: March 29, 2012
Page 1



DEPARTMENT OF PERMITTING, ENVIRONMENT, AND REGULATORY
AFFAIRS (PERA)
BOARD AND CODE ADMINISTRATION DIVISION
NOTICE OF ACCEPTANCE (NOA)

MIAMI-DADE COUNTY
PRODUCT CONTROL SECTION
11805 SW 26 Street, Room 208
Miami, Florida 33175-2474
T (786) 315-2590 F (786) 315-2599
www.miamidade.gov/pera/

Lawson Industries, Inc.
8501 NW 90 Street
Medley, FL 33166

SCOPE:

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

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Section (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. PERA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Section that this product or material fails to meet the requirements of the applicable building code. This product is approved as described herein, and has been designed to comply with the Florida Building Code, including the High-Velocity Hurricane Zone.

DESCRIPTION: Series "SH-7700 (Flange Frame)" Aluminum Single Hung Window - L.M.I.

APPROVAL DOCUMENT: Drawing No. L7700-0901, titled "Series-7700 Single Hung Flange Frame Impact Window", sheets 1 through 5 of 5, dated 05/27/09 with revision A dated 01/20/12, prepared by manufacturer, signed and sealed by Thomas J. Sotos, P. E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Section.

MISSILE IMPACT RATING: Large Missile Impact Resistant

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

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

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

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

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA revises NOA # 11-0705.09 and consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

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

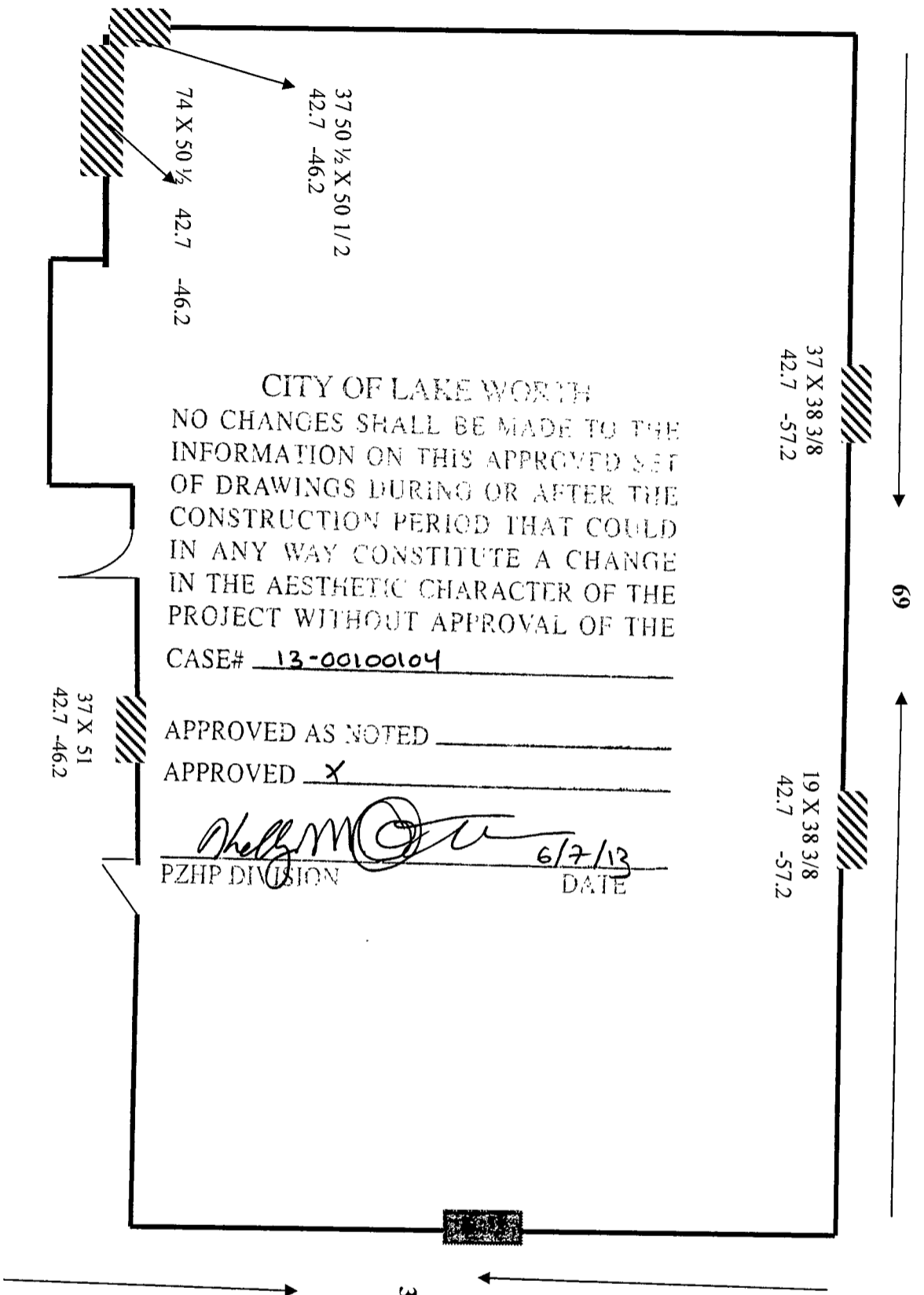


MP
3/29/12

NOA No. 12-0127.16
Expiration Date: December 27, 2016
Approval Date: March 29, 2012
Page 1

Not included

Proposed windows replacement



PROPOSED WINDOW REPLACEMENT
 721 N DIXIE LL C
 215 S. Federal Hwy
 Lake Worth, Florida

REVIEWED

13-1533

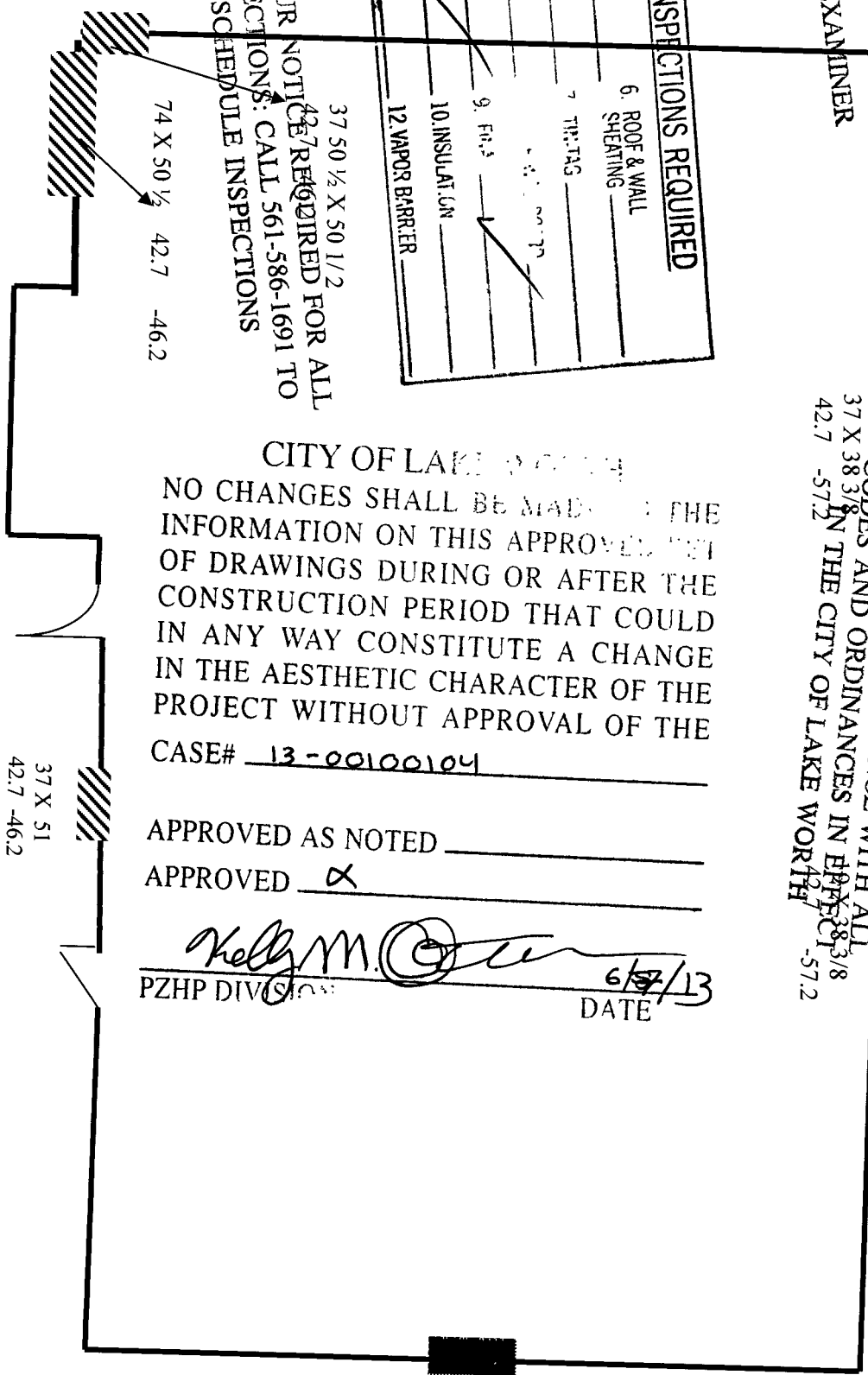
CLW PLANS EXAMINER

OFFICE COPY

SUBJECT TO COMPLIANCE WITH ALL CODES AND ORDINANCES IN EFFECT IN THE CITY OF LAKE WORTH

VISUAL INSPECTIONS REQUIRED	
1. FOOTINGS FOUNDATION	6. ROOF & WALL SHEATING
2. SLF	7. TRUSSES
3. REFRIG	8. FLOORING
4. FRAMING	9. FINS
5. IN PROGRESS	10. INSULATION
11. PRE-INSPECTOR	12. VAPOR BARRIER

24 HOUR NOTICE REQUIRED FOR ALL INSPECTIONS: CALL 561-586-1691 TO SCHEDULE INSPECTIONS



CITY OF LAKE WORTH
NO CHANGES SHALL BE MADE TO THE INFORMATION ON THIS APPROVED SET OF DRAWINGS DURING OR AFTER THE CONSTRUCTION PERIOD THAT COULD IN ANY WAY CONSTITUTE A CHANGE IN THE AESTHETIC CHARACTER OF THE PROJECT WITHOUT APPROVAL OF THE

CASE# 13-00100104

APPROVED AS NOTED

APPROVED *[Signature]*

Kelly M. [Signature]
PZHP DIVISION DATE 6/13/13

DESIGN DATA

F.B.C 2010, V=170 MPH, ASCE -7-10
GROUP R3 OCCUPANCY
TYPE VB CONSTRUCTION
EXISTING BUILDING, ALTERATION LEVEL 2

33 May 10, 2013

CITY OF LAKE WORTH

REVIEWED FOR CODE COMPLIANCE

DATE 6/19/13

REVIEWED BY: *[Signature]*

ISSUANCE OF THIS PERMIT SHALL NOT CONSTITUTE PERMISSION TO VIOLATE BUILDING, ZONING OR LICENSING REQUIREMENTS.

Not included
Proposed windows replacement

PROPOSED WINDOW REPLACEMENT
721 N DIXIE LL C
215 S. Federal Hwy
Lake Worth, Florida

OFFICE COPY
SUBJECT TO COMPLIANCE WITH ALL
CODES AND ORDINANCES IN EFFECT
IN THE CITY OF LAKE WORTH



DEPARTMENT OF PERMITTING, ENVIRONMENT, AND REGULATORY
AFFAIRS (PERA)
BOARD AND CODE ADMINISTRATION DIVISION

NOTICE OF ACCEPTANCE (NOA)

MIAMI-DADE COUNTY
PRODUCT CONTROL SECTION
11805 SW 26 Street, Room 208
Miami, Florida 33175-2474
T (786) 315-2590 F (786) 315-2599

www.miamidade.gov/pera/
REVIEWED

Lawson Industries, Inc.
8501 NW 90 Street
Medley, FL 33166

13-1533 11

SCOPE:

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

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

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

DESCRIPTION: Series "HS-8700 (Flange Frame)" Aluminum Horizontal Sliding Window - L.M.I.

APPROVAL DOCUMENT: Drawing No. L8700-0901, titled "HS-8700 Horizontal Rolling Flange Impact Window", sheets 1 through 10 of 10, dated 05/30/09 with revision A dated 01/25/12, prepared by manufacturer, signed and sealed by Thomas J. Sotos, P. E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Section.

MISSILE IMPACT RATING: Large and Small Missile Impact Resistant

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

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

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

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

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA revises and renews NOA # 11-0705.10 and consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

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

MIAMI-DADE COUNTY
APPROVED

MP
3/19/12

NOA No. 12-0127.08
Expiration Date: April 11, 2017
Approval Date: March 29, 2012
Page 1

Lawson Industries, Inc.

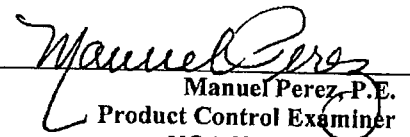
NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS

1. Manufacturer's die drawings and sections.
2. Drawing No **L8700-0901**, titled "HS-8700 Horizontal Rolling Flange Impact Window", sheets 1 through 10 of 10, dated 05/30/09 with revision A dated 01/25/12, prepared by manufacturer, signed and sealed by Thomas J. Sotos, P. E. **REVIEWED**

B. TESTS

1. Test reports on: 1) Air Infiltration Test, per FBC, TAS 202-94
2) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
3) Water Resistance Test, per FBC, TAS 202-94
4) Large Missile Impact Test per FBC, TAS 201-94
5) Cyclic Wind Pressure Loading per FBC, TAS 203-94
6) Forced Entry Test, per FBC 2411 3.2.1, TAS 202-94
along with marked-up drawings and installation diagram of 8 specimens of an aluminum horizontal sliding window, XOX (1/4, 1/2, 1/4 and 1/3, 1/3, 1/3) configuration, prepared by Hurricane Engineering & Testing, Inc., Test Reports No.'s: **HETI-10-3047, HETI-10-3048, HETI-10-3049, HETI-10-3049I, HETI-10-3050, HETI-10-3051, HETI-10-3052B, HETI-10-3053, HETI-10-3056, HETI-10-3057, HETI-10-3130, HETI-10 3131, HETI-10-3223, HETI-10-3224, HET-10-3225, HETI-10-3226 and HETI-10-3251**, dated 11/09/10, 03/23/11 and 04/25/11, signed and sealed by Candido F. Font, P.E. and Rafael E. Droz-Seda, P.E.
(Submitted under previous NOA No. 11-0705.10)
2. Test reports on: 1) Air Infiltration Test, per FBC, TAS 202-94
2) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
3) Water Resistance Test, per FBC, TAS 202-94
4) Large Missile Impact Test per FBC, TAS 201-94
5) Cyclic Wind Pressure Loading per FBC, TAS 203-94
6) Forced Entry Test, per FBC 2411 3.2.1, TAS 202-94
along with marked-up drawings and installation diagram of 8 specimens of an aluminum horizontal sliding window, XO configuration, prepared by Hurricane Engineering & Testing, Inc., Test Reports No.'s **HETI-08-2033, HETI-08-2034, HETI-08-2035, HETI-08-2036, HETI-08-2037, HETI-08-2038, HETI-08-2116A and HETI-08-2116B**, dated 02/28/08, all signed and sealed by Candido F. Font, P. E.
(Submitted under previous NOA No. 09-0706.05)


Manuel Perez, P.E.
Product Control Examiner
NOA No. 12-0127.08
Expiration Date: April 11, 2017
Approval Date: March 29, 2012

Lawson Industries, Inc.

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

B. TESTS (CONTINUED)

3. Test reports on: 1) Air Infiltration Test, per FBC, TAS 202-94
2) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
3) Water Resistance Test, per FBC, TAS 202-94
4) Large Missile Impact Test per FBC, TAS 201-94
5) Cyclic Wind Pressure Loading per FBC, TAS 203-94
6) Forced Entry Test, per FBC 2411 3.2.1, TAS 202-94

along with marked-up drawings and installation diagram of 8 specimens of an aluminum horizontal sliding window, XO configuration, prepared by Fenestration Testing Laboratory, Inc., Test Reports No.'s **FTL-3097**, **FTL-3098** and **FTL-3364**, dated 12/06/01, 12/11/01 and 01/28/002, all signed and sealed by Luis Antonio Figueredo, P. E.

(Submitted under NOA No. 02-02.05)

C. CALCULATIONS:

1. Anchor verification calculations and structural analysis, complying with FBC-2010, prepared by manufacturer, dated 05/28/09, revised on 07/10 and updated on 01/25/12, signed and sealed by Thomas J. Sotos, P. E.
2. Glazing complies with ASTM E1300-04

D. QUALITY ASSURANCE

1. Miami-Dade Department of Permitting, Environment, and Regulatory Affairs (PERA),
13-1533
QUALITY ASSURANCE EXAMINER

E. MATERIAL CERTIFICATIONS

1. Notice of Acceptance No. **11-0624.01** issued to **E.I. DuPont DeNemours & Co., Inc.** for their "**DuPont Butacite® PVB Interlayer**" dated 09/08/11, expiring on 12/11/16.
2. Notice of Acceptance No. **11-0325.05** issued to Solutia, Inc. for their "**Saflex and Vanceva clear and color interlayers**" dated 05/05/11, expiring on 05/21/16.

F. STATEMENTS

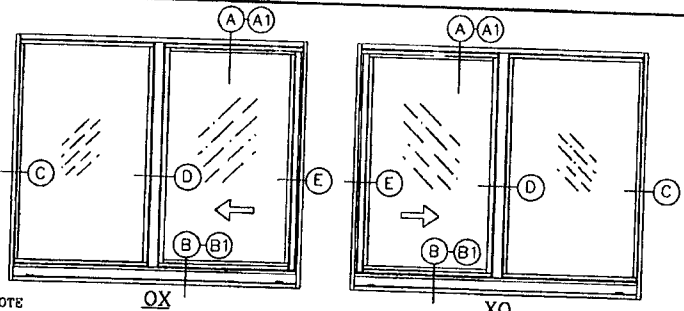
1. Statement letter of conformance, complying with FBC-2010, dated January 25, 2012, signed and sealed by Thomas J. Sotos, P.E.
2. Statement letter of no financial interest, dated May 20, 2010, signed and sealed by Thomas J. Sotos, P.E.

G. OTHERS

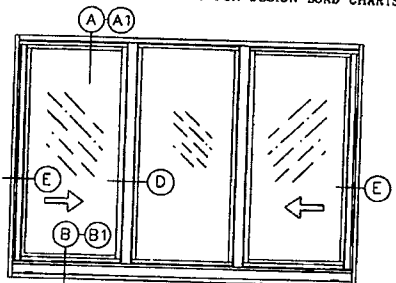
1. Notice of Acceptance No. **11-0705.10**, issued to Lawson Industries, Inc. for their Series "**HS-8700 Flange**" Aluminum Horizontal Sliding Window - L.M.I., approved on 09/08/11 and expiring on 04/11/12.


Manuel Perez, P.E.

Product Control Examiner
NOA No. 12-0127.08
Expiration Date: April 11, 2017
Approval Date: March 29, 2012

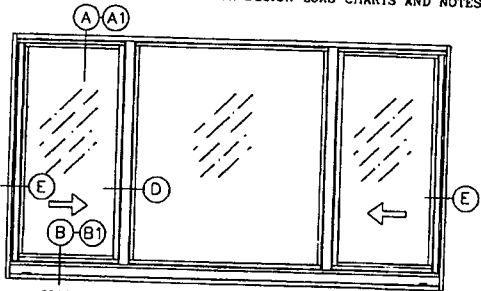


- NOTE
- 1) REFER TO SHEET 2 OF 10 FOR INSTALLATION ANCHOR DETAILS AND NOTES.
 - 2) FOR VERTICAL CROSS-SECTION DETAILS "A, A1, B, & B1" REFER TO SHEET #3
 - 3) FOR HORIZONTAL CROSS-SECTION DETAILS "C, D, & E" REFER TO SHEET #4
 - 4) REFER TO SHEET 6 OF 10 FOR DESIGN LOAD CHARTS AND NOTES.



XOX - Equal Lite (1/3-1/3-1/3)

- NOTES:
- 1) REFER TO SHEET 2 OF 10 FOR INSTALLATION ANCHOR DETAILS AND NOTES
 - 2) FOR VERTICAL CROSS-SECTION DETAILS "A, A1, B, & B1" REFER TO SHEET #3
 - 3) FOR HORIZONTAL CROSS-SECTION DETAILS "D, & E" REFER TO SHEET #5
 - 4) REFER TO SHEET 8 OF 10 FOR DESIGN LOAD CHARTS AND NOTES



XOX - Un-Equal Lite (1/4-1/2-1/4)

- NOTES:
- 1) REFER TO SHEET 2 OF 10 FOR INSTALLATION ANCHOR DETAILS AND NOTES.
 - 2) FOR VERTICAL CROSS-SECTION DETAILS "A, A1, B, & B1" REFER TO SHEET #3
 - 3) FOR HORIZONTAL CROSS-SECTION DETAILS "D, & E" REFER TO SHEET #5
 - 4) REFER TO SHEET 7 OF 10 FOR DESIGN LOAD CHARTS AND NOTES

**SERIES-8700 HORIZONTAL SLIDING IMPACT WINDOW
APPROVED ELEVATIONS**

CLW PLANS EXAMINER

13-1533

REVIEWED

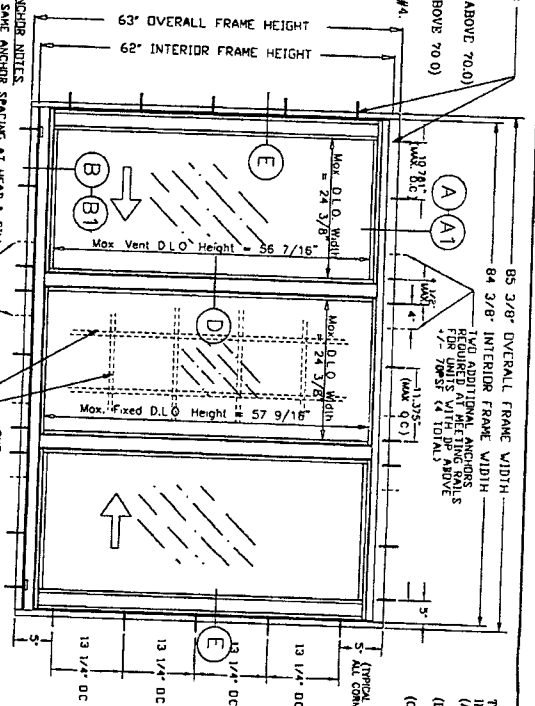
General Notes:

- 1.) THIS WINDOW SYSTEM IS DESIGNED AND TESTED TO COMPLY WITH THE REQUIREMENTS OF THE 2010 FLORIDA BUILDING CODE INCLUDING HIGH VELOCITY HURRICANE ZONE (HVHZ) AND ASTM 1300-02. THIS PRODUCT IS IMPACT RESISTANT. (SHUTTERS NOT REQUIRED)
- 2.) WOOD BUCKS SHALL BE INSTALLED AND ANCHORED SO THAT THE BUILDING RESISTS THE SUPERIMPOSED LOADS IN ACCORDANCE WITH THE REQUIREMENTS OF 2010 F.B.C & TO BE REVIEWED BY BUILDING OFFICIAL.
- 3.) ANCHORS SHOWN ON SHEET 2 OF 10 ARE AS PER TEST UNITS. ANCHORS ON ALL WINDOW SIZES ARE NOT TO EXCEED THESE MAXIMUM SPACINGS ON CENTER (O.C.), AND AS TABULATED ON SHEETS 6, 7, or 8
- 4.) ANCHOR CONDITIONS NOT DESCRIBED IN THESE DRAWING'S ARE TO BE ENGINEERED ON A SITE SPECIFIC BASIS, UNDER SEPARATE APPROVAL AND TO BE REVIEWED BY BUILDING OFFICIAL.
- 5.) WINDOWS ARE QUALIFIED FOR USE WITH SINGLE GLAZE LAMINATED GLASS TYPES TABULATED HEREIN (SEE SHEETS #6, 7, or 8), AND FOR USE WITH DOUBLE GLAZE LAMINATED INSULATED GLASS TYPES TABULATED HEREIN (SEE SHEETS #6, 7 or 8).
- 6.) WINDOWS WITH GLASS TYPES "A, C, OR G" INSTALLED ABOVE 30FT. IN THE HVHZ, THE I.G. EXTERIOR LITE SHALL BE TEMPERED
- 7.) SEE SHEET 4 FOR LOCK DETAILS & OPTIONS.
- 8.) SEE SHEET 9 FOR GLASS TYPES.
- 9.) SEE SHEET 6 FOR DESIGN PRESSURES ON "Xo or OX" WINDOWS.
- 10.) SEE SHEET 7 FOR DESIGN PRESSURES ON EQUAL-LITE "XOX" WINDOWS.
- 11.) SEE SHEET 8 FOR DESIGN PRESSURES ON UN-EQUAL LITE "XOX" WINDOWS.
- 12.) FOR OPTIONAL FRAME INSTALLATION DETAILS SEE SHEETS 3, 4, or 9.
- 13.) EXT. & INT. FALSE COLONIAL MUNTINS ARE OPTIONAL & AND ARE APPLIED W/ SILICONE
- 14.) WOOD BUCKS IN CONTACT WITH CONCRETE MUST BE PRESSURE TREATED AND ANCHORED (BY OTHERS), PRIOR TO WINDOW INSTALLATION. (SEE SHEET #3, 4 & 5 FOR DETAILS & NOTES) WOOD BUCKS TO BE ANCHORED IN COMPLIANCE WITH THE 2007 FBC CHAPTER 24 SECTION 11 3 3 3
- 15.) APPROVAL APPLIES TO SINGLE UNITS OR SIDE BY SIDE MULLED UNITS
- 16.) SEE SHEET # 5 FOR MULLION/METAL ATTACHMENT DETAILS, NOTES & OPTIONS
- 17.) MULLION HORIZONTAL SLIDING WINDOWS WITH OTHER TYPES OF MIAMI-DADE COUNTY APPROVED WINDOWS USING A MIAMI-DADE COUNTY APPROVED MULLION IN BETWEEN ARE ACCEPTABLE BUT THE LOWER DESIGN PRESSURE FROM THE WINDOWS OR MULLION APPROVAL WILL APPLY TO THE ENTIRE MULLED SYSTEM.
- 18.) ALL METAL/STEEL IN CONTACT WITH ALUMINUM OR OTHER DISSIMILAR MATERIALS TO BE PAINTED OR PLATED AND SHALL MEET SECTION 2003 8 4 OF THE 2010 FLORIDA BLDG. CODE.

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No 12-0127.08
 Expiration Date APR 11, 2017
 By *Walter Perry*
 Miami Dade Product Control

LAWSON INDUSTRIES, INC. MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS HS-8700 HORIZONTAL ROLLING FLANGE IMPACT WINDOW APPROVED ELEVATIONS, AND GENERAL NOTES		8501 N.W. 90 ST. MEDLEY, FLORIDA 33166 PH No. (305) 696-8660	Drawing Number: 18700-0901 Sheet: 11 OF 10
Revision Made: "A" - Revised date for the F.B.C.-2010	Issue Date: 05/30/09	Issue Revised: 01/25/12	Scale:
Design By: N. BRAZO	Check By: N. BRAZO	Issue Date: 01/25/12	Scale:
DATE:			

TEST UNIT SIZE 111" X 63"
 * INSTALLATION PASTERERS *
 (A) 10 AT FRAME HEAD
 (B) 10 AT FRAME HEAD IF DP ABOVE 70.0
 (C) 5 AT EA FRAME SILL
 (D) 5 AT EA FRAME JAMB
 * SEE GENERAL NOTE #3 & #4.

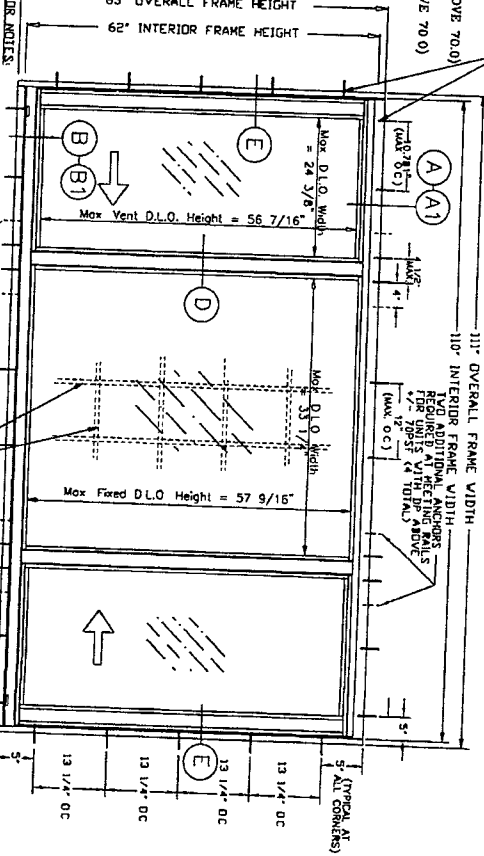


ANCHOR NOTES:
 1 SAME ANCHOR SPACING AT HEAD & SILL
 2 TWO ADDITIONAL ANCHORS REQUIRED AT MEETING RAILS FOR UNITS WITH DP ABOVE 70.0SF / - 70SF (4 TOTAL)
 * SEE GENERAL NOTE #3 & #4.

NOTES:
 1 SEE VERTICAL CROSS-SECTION DETAILS "A", "B", "C", "D", "E" AT SHEET #3
 2 SEE HORIZONTAL CROSS-SECTION DETAILS "C", "D", "E" AT SHEET #5

"OX" WINDOW EQUAL LITE

TEST UNIT SIZE 111" X 63"
 * INSTALLATION PASTERERS *
 (A) 10 AT FRAME HEAD
 (B) 10 AT FRAME HEAD IF DP ABOVE 70.0
 (C) 5 AT EA FRAME SILL
 (D) 5 AT EA FRAME JAMB
 * SEE GENERAL NOTE #3 & #4.



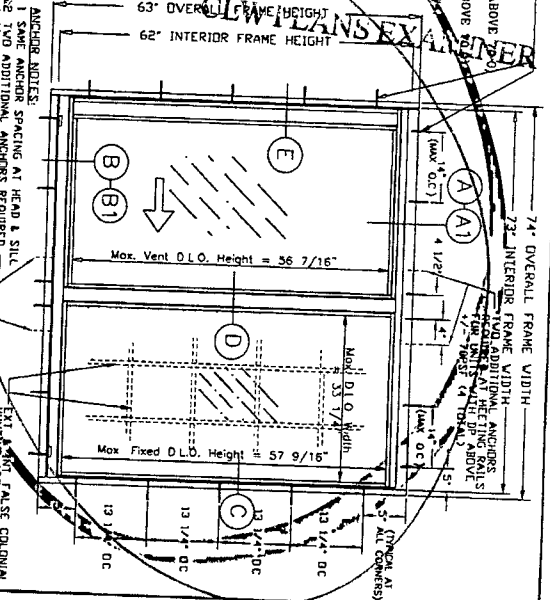
ANCHOR NOTES:
 1 SAME ANCHOR SPACING AT HEAD & SILL
 2 TWO ADDITIONAL ANCHORS REQUIRED AT MEETING RAILS FOR UNITS WITH DP ABOVE 70.0SF / - 70SF (4 TOTAL)
 * SEE GENERAL NOTE #3 & #4.

NOTES:
 1 SEE VERTICAL CROSS-SECTION DETAILS "A", "B", "C", "D", "E" AT SHEET #3
 2 SEE HORIZONTAL CROSS-SECTION DETAILS "C", "D", "E" AT SHEET #5

"OX" WINDOW - UN-EQUAL LITE

SERIES-8700 HORIZONTAL SLIDING WINDOW
 FLANGE FRAME ELEVATIONS - I.M.I.

REVIEWED
 13-1533
 OLIVE PLAIN EXAMINER



ANCHOR NOTES:
 1 SAME ANCHOR SPACING AT HEAD & SILL
 2 TWO ADDITIONAL ANCHORS REQUIRED AT MEETING RAILS FOR UNITS WITH DP ABOVE 70.0SF / - 70SF (4 TOTAL)
 * SEE GENERAL NOTE #3 & #4.

NOTES:
 1 SEE VERTICAL CROSS-SECTION DETAILS "A", "B", "C", "D", "E" AT SHEET #3
 2 SEE HORIZONTAL CROSS-SECTION DETAILS "C", "D", "E" AT SHEET #4

"OX" WINDOW EQUAL LITE

PRODUCT REVISED
 as compliance with the Florida
 Building Code
 Acceptance No. 19-01708
 by *Matthew Davis*
 Miami Dade Product Control

THOMAS S. THOMAS PROFESSIONAL ENGINEER NO. 55225 STATE OF FLORIDA REGISTERED PROFESSIONAL ENGINEER	Revision Note: "A" - No change this sheet	Revision No.:	Revision Date:
Drawn By: N. ERAZO	Date Drawn: 05/30/09	Product Reference Number:	Drawing Number: L8700-0901
Revised By: N. ERAZO	Date Revised: 01/25/12	Scale:	Sheet: 2 OF 10
Revision Level:	Scale:	Product Reference Number:	Revision #: "A"

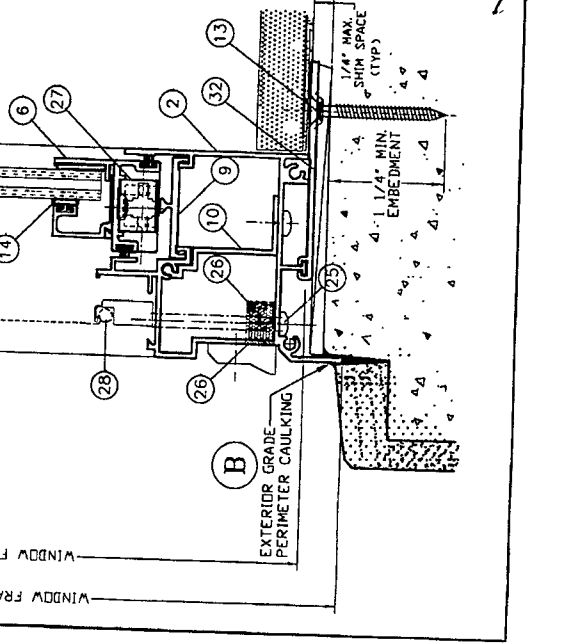
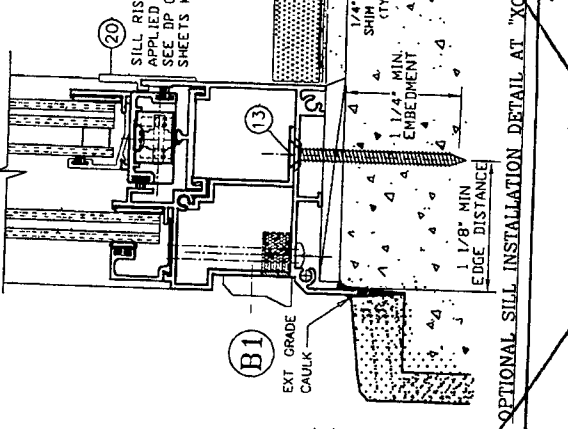
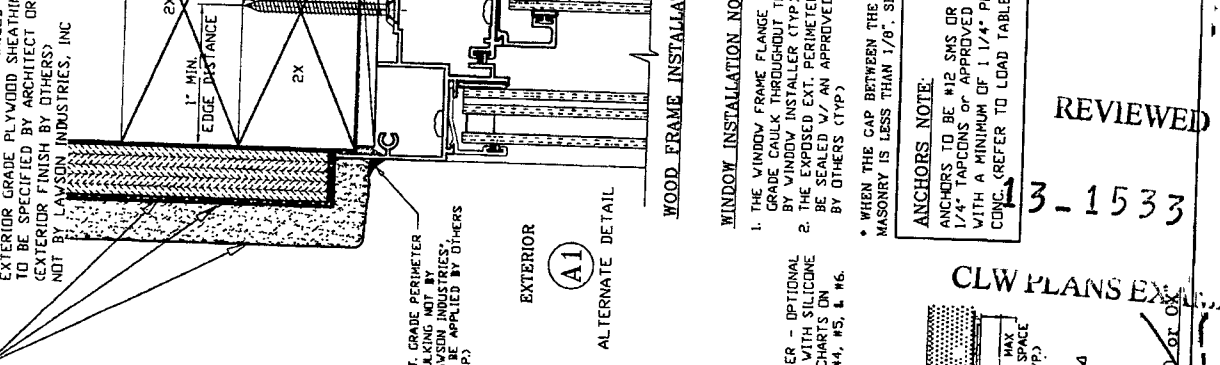
LAWSON INDUSTRIES, INC.
 8501 N.W. 90 ST.
 MEDLEY, FLORIDA 33166
 PH No. (305) 696-8660

MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS

HS-8700 HORIZONTAL ROLLING FLANGE IMPACT WINDOW
 APPROVED ELEVATIONS, AND GENERAL NOTES

DATE	01/25/12	Revision Level	N EBAZO
Drawn By	N EBAZO	Date Printed	06/30/08
Scale		Product Reference Number	LS700-0901
Sheet	3 OF 10	Revision Number	7.1

MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND CLASS DOORS
LAWSON INDUSTRIES, INC.
 8501 N.W. 90 ST.
 MEDLEY, FLORIDA 33166
 PH No. (305) 698-8660



WINDOW INSTALLATION NOTES:

1. THE WINDOW FRAME FLANGE TO BE BACK-BEDDED W/ AN EXT. GRADE CAULK THROUGHOUT THE ENTIRE PERIMETER OF FLANGE BY WINDOW INSTALLER (TYP)
2. THE EXPOSED EXT. PERIMETER OF THE WINDOW FRAME TO BE SEALED W/ AN APPROVED EXTERIOR GRADE CAULK BY OTHERS (TYP)

* WHEN THE GAP BETWEEN THE WINDOW FRAME AND THE BUCK OR MASONRY IS LESS THAN 1/8", SHIMS ARE NOT REQUIRED.

ANCHORS NOTE:

ANCHORS TO BE #12 SMS OR V.D. SCREWS INTO WOOD, OR 1/4" TAPCONS OR APPROVED CONC. FASTENERS INTO CONC., WITH A MINIMUM OF 1 1/4" PENETRATION INTO WOOD OR CONC. (REFER TO LOAD TABLES FOR QUANTITIES REQUIRED)

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Edition No. 12-01-08
 Expiration Date 12-31-11
 By: *M. [Signature]*
 Miami-Lasde Product Control

REVIEWED

13-1533

*bottom Sill Screw
 Wound by Manufacturer*

1. ALL WOOD BUCKS ENGINEERED SEPARATELY & TO BE REVIEWED BY BLDG. OFFICIAL (TYP)
2. WOOD BUCK AND FRAMING (NOT BY LAWSON INDUSTRIES) MUST SUSTAIN LOADS IMPOSED BY THE GLAZING SYSTEM

1/4" TAPCON 1/2" 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #2 FOR MAX. FASTENER SPACING)

1 1/4" MIN. EMBEDMENT
 1 1/8" MIN. EDGE DISTANCE

EXTERIOR GRADE PERIMETER CAULKING

CLEAR SILICONE ADHESIVE BEDDING COMPOUND

LAMINATED GLASS

EXTERIOR GRADE PERIMETER CAULKING

OPTIONAL SILL INSTALLATION DETAIL AT 'X' OR 'Y' OF WINDOW

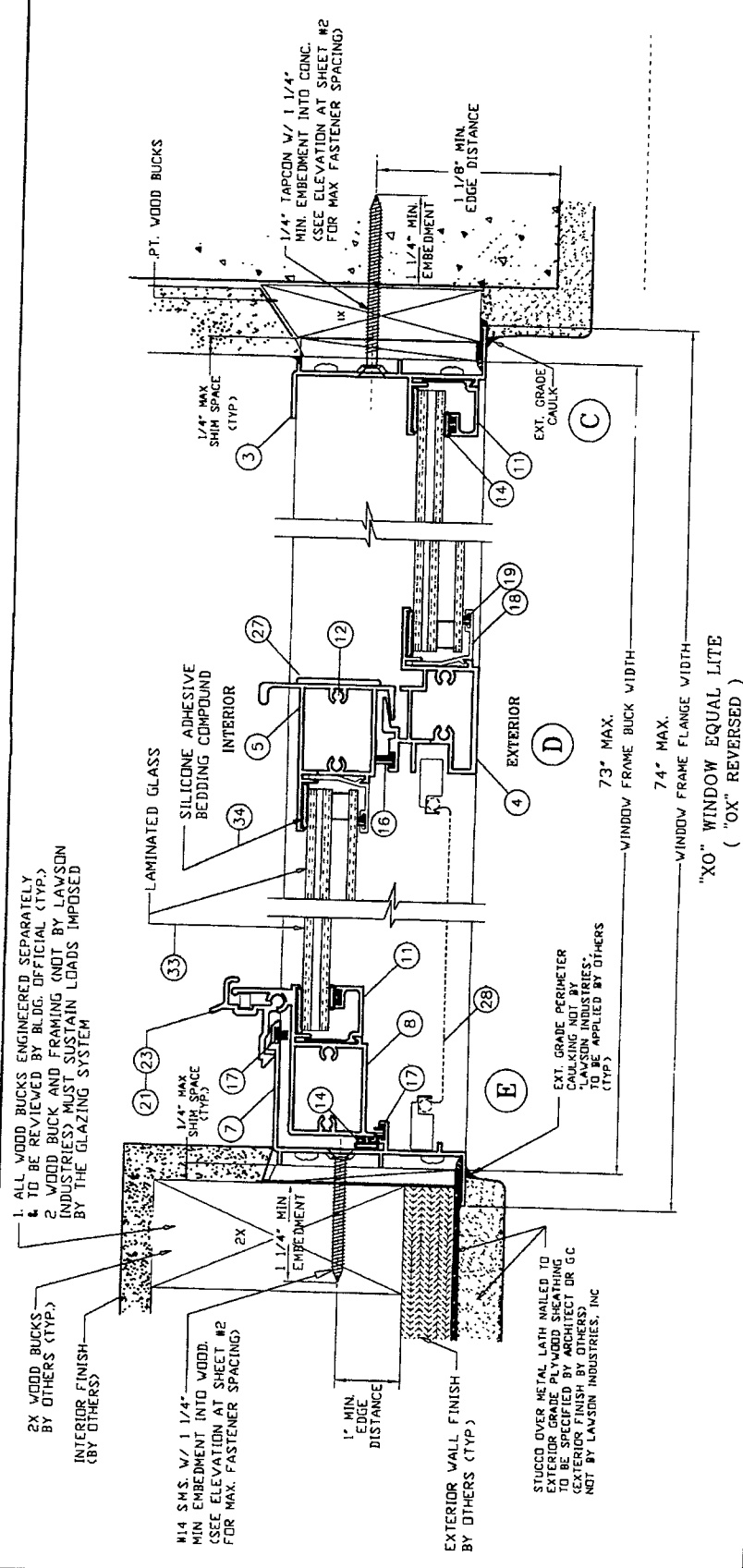
WINDOW FRAME FLANGE HEIGHT
 63" MAX
 WINDOW FRAME BUCK HEIGHT
 62"

Product Reference Number	18700-0901	Revision #	4 OF 10
Drawn By	N. ERAZO	Date Drawn	05/30/09
Reviewed By	N. ERAZO	Date Revised	01/25/12
Scale			

LAWSON INDUSTRIES, INC.
 MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS
 8501 N.W. 90 ST.
 MEDLEY, FLORIDA 33166
 PH No. (305) 696-8660

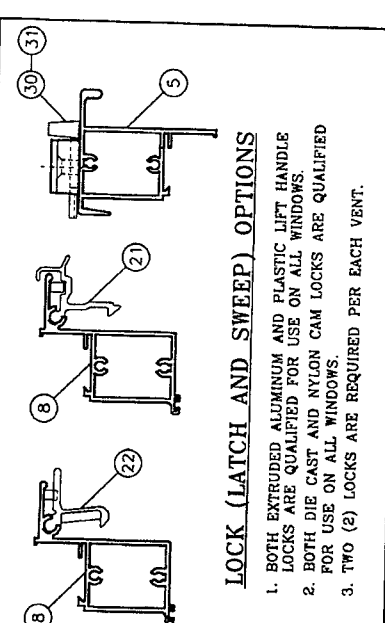
THOMAS H. THOMPSON, P.E.
 PROFESSIONAL ENGINEER
 LICENSE NO. 105225
 STATE OF FLORIDA
 DATE: 12-11-08
 EXPIRES: 12-31-11

PRODUCT REVISIONED as complying with the Florida Building Code
 Expiration Date 12-01-08
 By: [Signature]
 (Miami Pads Product Control)



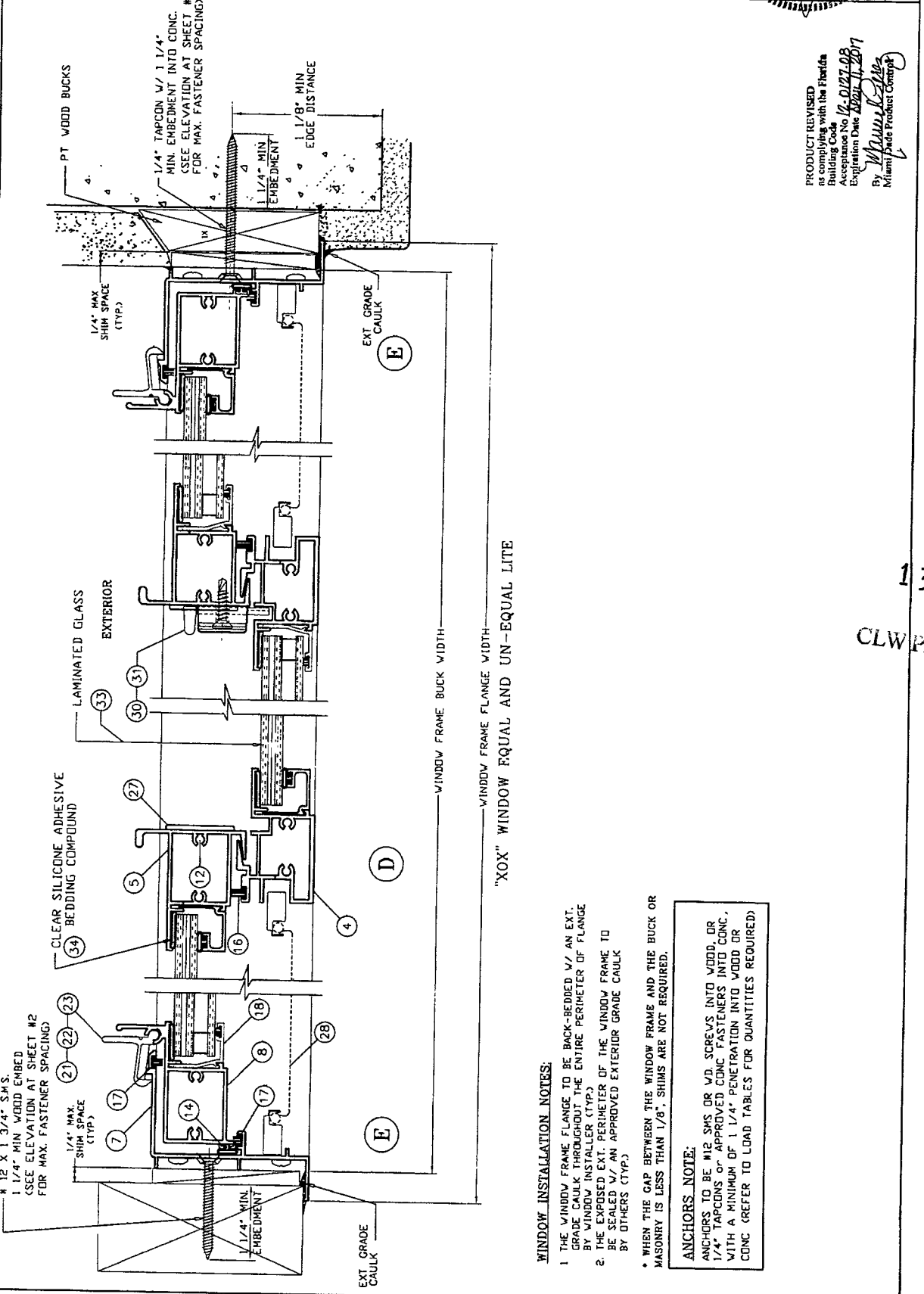
- WINDOW INSTALLATION NOTES:**
1. THE WINDOW FRAME FLANGE TO BE BACK-BEDDED W/ AN EXT GRADE CAULK THROUGHOUT THE ENTIRE PERIMETER OF FLANGE BY WINDOW INSTALLER (TYP.)
 2. THE EXPOSED EXT PERIMETER OF THE WINDOW FRAME TO BE SEALED W/ AN APPROVED EXTERIOR GRADE CAULK BY OTHERS (TYP.)
- * WHEN THE GAP BETWEEN THE WINDOW FRAME AND THE BUCK OR MASONRY IS LESS THAN 1/8", SHIMS ARE NOT REQUIRED.

ANCHORS NOTE:
 ANCHORS TO BE #12 SMS OR VD. SCREWS INTO WOOD, OR 1/4" TAPCONS OR APPROVED CONC FASTENERS INTO CONC., WITH A MINIMUM OF 1 1/4" PENETRATION INTO WOOD OR CONC REFER TO LOAD TABLES FOR QUANTITIES REQUIRED



REVIEWED
 13-1533
 CLW PLANS EXAMINER

DATE: _____ PROJECT: _____ DRAWING NO.: 155225 STATE OF FLORIDA PROFESSIONAL ENGINEER	DESIGNER: N. ERAZO DATE DESIGNED: 05/30/09 SCALE: 21/25/12	REVISIONS: N. ERAZO DATE REVISION: 01/25/12	PRODUCT REFERENCE NUMBER: _____ DRAWING NUMBER: 18700-0901 SHEET: 5 OF 10
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12 X 1 3/4" S.M.S.
 1 1/4" MIN WOOD EMBED
 (SEE ELEVATION AT SHEET #2
 FOR MAX. FASTENER SPACING)

1/4" MAX. SHIM SPACE (TYP)

CLEAR SILICONE ADHESIVE BEDDING COMPOUND

LAMINATED GLASS EXTERIOR

1/4" MAX SHIM SPACE (TYP)

PT WOOD BUCKS

1/4" TAPCON 1/2" X 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #2 FOR MAX. FASTENER SPACING)

1 1/4" MIN EMBEDMENT

1 1/8" MIN EDGE DISTANCE

EXT GRADE CAULK

EXT GRADE CAULK

WINDOW FRAME BUCK WIDTH

WINDOW FRAME FLANGE WIDTH

"XOX" WINDOW EQUAL AND UN-EQUAL LITE

WINDOW INSTALLATION NOTES:

- 1 THE WINDOW FRAME FLANGE TO BE BACK-BEDDED 1/2" AN EXT. GRADE CAULK THROUGHOUT THE ENTIRE PERIMETER OF FLANGE BY WINDOW INSTALLER (TYP)
- 2 THE EXPOSED EXT. PERIMETER OF THE WINDOW FRAME TO BE SEALED 1/2" AN APPROVED EXTERIOR GRADE CAULK BY OTHERS (TYP)

* WHEN THE GAP BETWEEN THE WINDOW FRAME AND THE BUCK OR MASONRY IS LESS THAN 1/8", SHIMS ARE NOT REQUIRED.

ANCHORS NOTE:

ANCHORS TO BE #12 SMS OR VD. SCREWS INTO WOOD, OR 1/4" TAPCONS OF APPROVED CONC FASTENERS INTO CONC, WITH A MINIMUM OF 1 1/4" PENETRATION INTO WOOD OR CONC (REFER TO LOAD TABLES FOR QUANTITIES REQUIRED)

PRODUCT REVISED
 in complying with the Florida
 Building Code
 Adoption No. 12-017-08
 Effective Date 02-01-2011
 By: *M. J. [Signature]*
 Miami Trade Product Center

REVIEWED
 13-1533 '1
 CLW PLANS EXAMINER

LAWSON INDUSTRIES, INC.

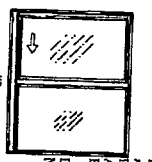
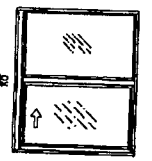
8501 N.W. 90 ST.
 MEDLEY, FLORIDA 33166
 PH No. (305) 696-8660

MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS
 HS-8700 HORIZONTAL ROLLING FLANGE IMPACT WINDOW
 CROSS SECTION DETAILS, LOCK OPTIONS AND FRAME INSTALLATION DETAIL

DESIGN LOAD CAPACITY (PSF) - OX or XO WINDOWS

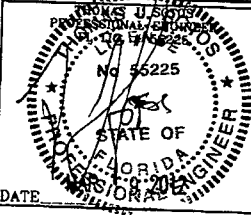
WINDOW WIDTH	HEIGHT	# Jamb Anchors	# H & S Anchors	Glass Type "A" (*2)		Glass Type "B" (*2)		Glass Type "C" (*2)		Glass Type "D" (*2)		Glass Type "E" (*3)		Glass Type "F" (*3)	
				+ psf	- psf	+ psf	- psf	+ psf	- psf	+ psf	- psf	+ psf	- psf		
24	24	3	3	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
36	24	3	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
48	24	3	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
60	24	3	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
72	24	3	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
24	36	3	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
36	36	3	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
48	36	3	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
60	36	3	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
72	36	3	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
24	48	4	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
36	48	4	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
48	48	4	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
60	48	4	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
72	48	4	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
24	60	5	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
36	60	5	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
48	60	5	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
60	60	5	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
72	60	5	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
26.5	26	3	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
37	26	3	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
53.125	26	3	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
74	26	3	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
26.5	36.375	4	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
37	36.375	4	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
53.125	36.375	4	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
74	36.375	4	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
26.5	50.625	5	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
37	50.625	5	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
53.125	50.625	5	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
74	50.625	5	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
26.5	58	5	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
37	58	5	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
53.125	58	5	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
74	58	5	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
26.5	63	6	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
37	63	6	4	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
53.125	63	6	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0
74	63	6	6	65.0	65.0	65.0	65.0	70.0	70.0	70.0	70.0	80.0	80.0	80.0	80.0

- Notes (*):
- SEE SHEET 9 FOR GLAZING TYPES, DETAILS & SILICONE OPTIONS.
 - STANDARD SILL USED ON WINDOWS WITH +70.0 DP AND BELOW (WINDOWS WITH GLASS TYPES "A, B, C, & D")
 - SILL WITH RISER ADAPTER ARE FOR WINDOWS ABOVE +70.0 DP (WINDOWS WITH GLASS TYPES "E, & F") AND +80.0 DP MAX. ADDITIONAL ANCHORS REQUIRED AT FRAME HEAD & SILL ON WINDOWS WITH DP ABOVE 70.0 (SEE ELEVATION AT SHEET 2 OF 10) IN THE HVHZ. THE I.C. EXTERIOR LITE SHALL BE TEMPERED.



PRODUCT KEYS:
 At complying with the Florida Building Code, 2017 Edition, Chapter 610, Part 610.10, Section 610.10.1.2, (20) STILL RISER - OPTIONAL APPLIED WITH SILICONE FOR DP ABOVE +70.0 PSF (+80.0 DP MAX.)

CLW PLANS EXAMINER
 13-1533
 REVIEWED



Revision Notes:
 "A" - No change this sheet

Drawn By:	N. ERAZO	Date Drawn:	05/30/09
Revised By:	N. ERAZO	Date Revised:	01/25/12
Revision Level:		Scale:	

LAWSON INDUSTRIES, INC.

8501 N.W. 90 ST.
 MEDLEY, FLORIDA 33166
 PH No. (305) 696-8660

MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS

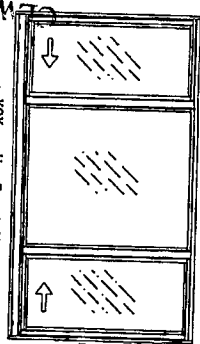
HS-8700 HORIZONTAL ROLLING FLANGE IMPACT WINDOW
 DESIGN LOAD CHART WITH GLASS OPTIONS (XO OR OX)

Product Reference Number: L8700-09D1 Drawing Number: L8700-09D1 Sheet: 6 OF 10 Revision #: "A"

DESIGN LOAD CAPACITY (PSF) - XOX WINDOWS WITH Un-EQUAL LITE (1/4-1/2-1/4)
+ / - Pressures (psf)

FRAME SIZE WIDTH HEIGHT	# Jamb Anchors	# H & S Anchors	Glass Type "B" (* 2)		Glass Type "C" (* 2)		Glass Type "D" (* 2)		Glass Type "E" (* 3)		Glass Type "F" (* 3)		Glass Type "G" (* 2)	
			+ psf	- psf	+ psf	- psf	+ psf	- psf	+ psf	- psf	+ psf	- psf	+ psf	- psf
60 24	3	7	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
72 24	3	7	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
84 24	3	8	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
96 24	3	10	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
108 24	3	11	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
60 36	3	7	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
72 36	3	7	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
84 36	3	8	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
96 36	3	10	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
108 36	3	11	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
60 48	4	7	70.0	75.0	70.0	75.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
72 48	4	7	70.0	75.0	70.0	75.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
84 48	4	8	70.0	75.0	70.0	75.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
96 48	4	10	70.0	75.0	70.0	75.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
108 48	4	11	70.0	75.0	70.0	75.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
60 60	5	7	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
72 60	5	7	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
84 60	5	8	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
96 60	5	10	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
108 60	5	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
74 26	3	7	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
74 36-37.5	3	7	80.0	80.0	80.0	80.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
74 50-62.5	4	7	70.0	75.0	70.0	75.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
74 63	5	7	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
74 74	5	7	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
79.5 26	3	9	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
79.5 36-37.5	4	9	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
79.5 50-62.5	4	9	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
79.5 58	5	9	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
79.5 63	5	9	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
106-25 26	3	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
106-25 38-37.5	4	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
106-25 50-62.5	4	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
106-25 58	5	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
106-25 63	5	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
111 26	3	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
111 38-37.5	4	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
111 50-62.5	4	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
111 58	5	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0
111 63	5	11	52.0	52.0	52.0	52.0	65.0	75.0	65.0	75.0	52.0	52.0	65.0	75.0

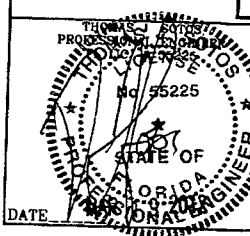
- Notes (*):
- SEE SHEET 9 FOR GLAZING TYPES, DETAILS & SILICONE OPTIONS.
 - STANDARD SILL USED ON WINDOWS WITH +700 DP AND BELOW (WINDOWS WITH GLASS TYPES "A, B, C & D")
 - SILL WITH RISER ADAPTER ARE FOR WINDOWS ABOVE +700 DP (WINDOWS WITH GLASS TYPES "E, & F") AND +800 DP MAX. ADDITIONAL ANCHORS REQUIRED AT FRAME HEAD & SILL ON WINDOWS WITH DP ABOVE 700.0. (SEE ELEVATION AT SHEET 2 OF 10)
 - WINDOWS WITH GLASS TYPES "A, C, OR G" INSTALLED ABOVE COFT. IN THE HVHZ, THE IG, EXTERIOR LITE SHALL BE TEMPERED.



PRODUCT REVISED
in compliance with the Florida Building Code
Acceptance No. **12-0127-08**
Expiration Date **12/25/12**
By **William J. ...**
Member/Date (noted) (noted)

(20) SILL RISER - OPTIONAL APPLIED WITH SILICONE FOR DP ABOVE +700 PSF (+800 DP MAX.)

3-1533
REVIEWED
PLANS EXAMINER



Revised By:	N. ERAZO	Date Drawn:	05/30/09
Revised By:	N. ERAZO	Date Revised:	01/25/12
Revision Note:	A - No change the sheet		

LAWSON INDUSTRIES, INC.

8501 N.W. 90 ST.
MEDLEY, FLORIDA 33166
PH No. (305) 896-8660

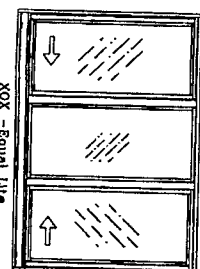
MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS

HS-8700 HORIZONTAL ROLLING FLANGE IMPACT WINDOW
DESIGN LOAD CHART WITH GLASS OPTIONS (XOX EQUAL LITE)

DESIGN LOAD CAPACITY (PSF) - XOX WINDOWS with Equal Lite (1/3-1/3-1/3)

FRAME SIZE WIDTH	HEIGHT	# Jamb Anchors	# H & S Anchors	Glass Type "B" (* 2)		Glass Type "C" (* 2)		Glass Type "D" (* 2)		Glass Type "E" (* 3)		Glass Type "F" (* 3)		Glass Type "G" (* 2)	
				+ psf	- psf	+ psf	- psf	+ psf	- psf	+ psf	- psf	+ psf	- psf		
60	24	3	7	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
72	24	3	9	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
84	24	3	9	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
60	36	3	7	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0
72	36	3	9	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0
84	36	3	9	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0
60	48	4	7	-	-	-	-	-	-	-	-	-	-	-	-
72	48	4	9	-	-	-	-	-	-	-	-	-	-	-	-
84	48	4	9	-	-	-	-	-	-	-	-	-	-	-	-
60	60	5	7	-	-	-	-	-	-	-	-	-	-	-	-
72	60	5	9	-	-	-	-	-	-	-	-	-	-	-	-
84	60	5	9	-	-	-	-	-	-	-	-	-	-	-	-
53.125	26	3	6	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
53.125	38.375	4	6	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
53.125	50.625	4	6	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0
53.125	58	5	6	-	-	-	-	-	-	-	-	-	-	-	-
53.125	63	5	6	-	-	-	-	-	-	-	-	-	-	-	-
74	26	3	9	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
74	38.375	4	9	-	-	-	-	-	-	-	-	-	-	-	-
74	50.625	4	9	-	-	-	-	-	-	-	-	-	-	-	-
74	58	5	9	-	-	-	-	-	-	-	-	-	-	-	-
74	63	5	9	-	-	-	-	-	-	-	-	-	-	-	-
79.5	26	3	9	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
79.5	38.375	4	9	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0
79.5	50.625	4	9	-	-	-	-	-	-	-	-	-	-	-	-
79.5	58	5	9	-	-	-	-	-	-	-	-	-	-	-	-
79.5	63	5	9	-	-	-	-	-	-	-	-	-	-	-	-
84	26	3	9	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0	70.0
84	38.375	4	9	70.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
84	50.625	4	9	-	-	-	-	-	-	-	-	-	-	-	-
84	58	5	9	-	-	-	-	-	-	-	-	-	-	-	-
84	63	5	9	-	-	-	-	-	-	-	-	-	-	-	-

Notes (*): 1) SEE SHEET 9 FOR GLAZING TYPES, DETAILS & SILICONE OPTIONS
 2) STANDARD SILL USED ON WINDOWS WITH +70.0 DP AND BELOW (WINDOWS WITH GLASS TYPES "A, B, C, & D")
 3) SILL WITH RISER ADAPTER ARE FOR WINDOWS ABOVE +70.0 DP (WINDOWS WITH GLASS TYPES "E, & F") AND +90.0 DP MAX. ADDITIONAL ANCHORS REQUIRED AT FRAME HEAD & SILL ON WINDOWS WITH DP ABOVE 70.0 (SEE ELEVATION AT SHEET 2 OF 10)
 4) WINDOWS WITH GLASS TYPES "A, C, OR G" INSTALLED ABOVE 30FT IN THE WINDZ, THE I.G. EXTERIOR LITE SHALL BE TEMPERED.



PRODUCT REVISIONS
 as complying with the Florida Building Code No. 12-0127-08
 Acceptance No. 12-0127-08
 Expiration Date 08/11/2017
 By *William J. ...*
 Miami Trade Product Center
 20 SILL RISER - OPTIONAL APPLIED WITH SILICONE FOR DP ABOVE +70.0 PSF (+80.0 DP MAX.)

PROFESSIONAL ENGINEER
 STATE OF FLORIDA
 No. 55225
 DATE: _____

Revision Notes
 "A" - No change this sheet

Drawn By: N ERAZO
 Date Drawn: 05/30/09

Revised By: N ERAZO
 Date Revised: 01/23/12

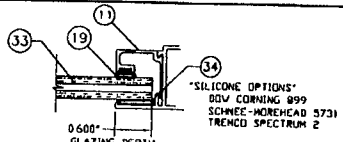
Revised Level: _____
 Scaled: _____

LAWSON INDUSTRIES, INC.
 8501 N.W. 90 ST.
 MEDLEY, FLORIDA 33166
 PH No. (305) 696-8660

MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS

HS-8700 HORIZONTAL ROLLING FLANGE IMPACT WINDOW
 DESIGN LOAD CHART WITH GLASS OPTIONS (XOX UN-EQUAL LITE)

Product Reference Number: _____
 Drawing Number: L8700-0901
 Sheet: 8 OF 10
 Revision #: "A"

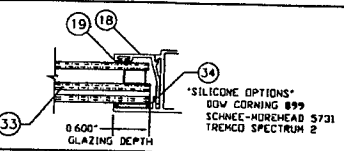


LAMINATED GLASS COMPOSITION - TYPE B		
ITEM	GLASS DESCRIPTION	LAMINATE DESCRIPTION
1	1/8" ANNEALED GLASS	SAFLEX/KEEPSAFE By: 'SOLUTIA'
2	0.090" PLASTIC INTERLAYER	
3	1/8" ANNEALED GLASS	

LAMINATED GLASS COMPOSITION - TYPE D		
ITEM	GLASS DESCRIPTION	LAMINATE DESCRIPTION
1	1/8" HEAT-STRENGTHENED GLASS	BUTACITE PVB By: 'DUPONT'
2	0.090" PLASTIC INTERLAYER	
3	1/8" HEAT-STRENGTHENED GLASS	

LAMINATED GLASS COMPOSITION - TYPE E		
ITEM	GLASS DESCRIPTION	LAMINATE DESCRIPTION
1	1/8" HEAT-STRENGTHENED GLASS	SAFLEX/KEEPSAFE By: 'SOLUTIA'
2	0.090" PLASTIC INTERLAYER	
3	1/8" HEAT-STRENGTHENED GLASS	

LAMINATED GLASS COMPOSITION - TYPE P		
ITEM	GLASS DESCRIPTION	LAMINATE DESCRIPTION
1	1/8" ANNEALED GLASS	BUTACITE PVB By: 'DUPONT'
2	0.090" PLASTIC INTERLAYER	
3	1/8" ANNEALED GLASS	



INSULATED LAMINATED GLASS COMPOSITION TYPE A		
ITEM	GLASS DESCRIPTION	LAMINATE DESCRIPTION
1	1/8" ANNEALED GLASS	SAFLEX PVB By: 'SOLUTIA'
2	0.090" PLASTIC INTERLAYER	
3	1/8" ANNEALED GLASS	
4	1/4" INSULATED AIR SPACE	
5	1/8" ANNEALED GLASS (2)	

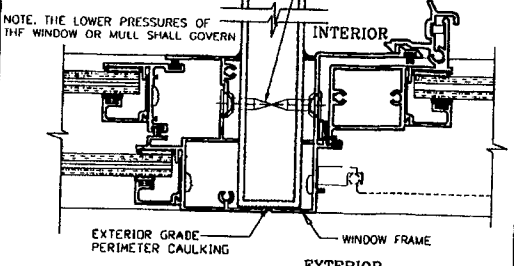
INSULATED LAMINATED GLASS COMPOSITION TYPE C		
ITEM	GLASS DESCRIPTION	LAMINATE DESCRIPTION
1	1/8" ANNEALED GLASS	PVB By: 'DUPONT'
2	0.090" PLASTIC INTERLAYER	
3	1/8" ANNEALED GLASS	
4	1/4" INSULATED AIR SPACE	
5	1/8" ANNEALED GLASS (2)	

INSULATED LAMINATED GLASS COMPOSITION TYPE G		
ITEM	GLASS DESCRIPTION	LAMINATE DESCRIPTION
1	1/8" HEAT-STRENGTHENED GLASS	PVB By: 'DUPONT'
2	0.090" PLASTIC INTERLAYER	
3	1/8" HEAT-STRENGTHENED GLASS	
4	1/4" INSULATED AIR SPACE	
5	1/8" ANNEALED GLASS (2)	

(*) WINDOWS WITH GLASS TYPES 'A, C, OR G' INSTALLED ABOVE 30FT. IN THE HVHZ, THE LG. EXTERIOR LITE SHALL BE TEMPERED

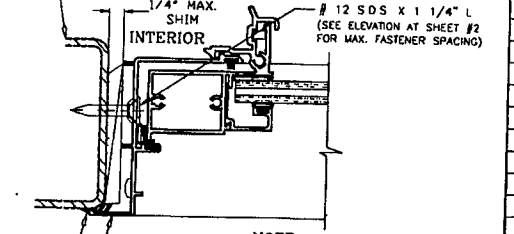
GLAZING DETAILS AND OPTIONS

ALUMINUM MULLION
SEE MULLION APPROVALS FOR MULLION TYPE, SIZE AND MAX DESIGN PRESSURE LIMITATIONS (ALUM 0.078" MIN. THICK)



(E2) FRAME MULLING DETAIL

SEE MULLION APPROVALS FOR MULLION TYPE, SIZE AND MAX DESIGN PRESSURE LIMITATIONS
NOTE: THE LOWER PRESSURES OF THE WINDOW OR MULL SHALL GOVERN



(E1) METAL STRUCTURE ATTACHMENT DETAIL

NOTE:
1 ALL STEEL IN CONTACT WITH ALUM. TO BE PAINTED OR PLATED.
2 METAL STRUCTURES:
A) STEEL Fy = 35 KSI MIN (STEEL 18 GA MIN THICK - 0.048")
B) ALUMINUM . 6063-T5 MIN (ALUM 0.078" MIN THICK)

HS-8700 FLANGE WINDOW BILL OF MATERIALS				
ITEM #	PART #	REQD.	DESCRIPTION	REMARKS
1	L-7703	1	FRAME HEAD	6063-T6 ALUMINUM
2	L-8701	1	FRAME SILL	6063-T6 ALUMINUM
3	L-7701	1	FRAME FXD. JAMB	6063-T6 ALUMINUM
4	L-7704	1	FRAME FIXED MEETING RAIL	6063-T6 ALUMINUM
5	L-7705	1	VENT MEETING RAIL	6063-T6 ALUMINUM
6	L-7707	1	VENT TOP/BOTTOM RAIL	6063-T6 ALUMINUM
7	L-8703	1	FRAME VENT JAMB	6063-T6 ALUMINUM
8	L-7706	1	VENT JAMB LATCH RAIL	6063-T6 ALUMINUM
9	L-8702	1	FRAME SILL TRACK	6063-T5 ALUMINUM
10	L-8705	1	FRAME SILL RETAINING CLIP	6063-T5 ALUMINUM
11	L-7708	AS REQ'D	GLAZING BEAD (3/8")	6063-T5 ALUMINUM
12	FS-006	AS REQ'D	FRAME ASSEMBLY SCREWS	#8 X 3/4" PH PHILLIPS
13	FS-040	AS REQ'D	INSTALLATION SCREWS	#14 SHS FH/PHIL.
14	L-7531	AS REQ'D	VINYL BULB	1/4" DIA BULB #3033
15	PWS-003	AS REQ'D	FIN SEAL WEATHERSTRIP	.187" w x .230" h
16	PWS-005	AS REQ'D	FIN SEAL WEATHERSTRIP	.187" w x .350" h
17	PWS-009	AS REQ'D	FIN SEAL WEATHERSTRIP	.187" w x .310" h
18	L-7711	AS REQ'D	GLAZING BEAD (INSULATED)	6063-T5 ALUMINUM
19	PWS-001	AS REQ'D	PILE @ GLAZING BEAD	.187" w x 150" h
20	L-8706	AS REQ'D	SILL RISER ADAPTER	6063-T5 ALUM - OPTIONAL
21	L-7539	2	VENT EXTRUDED SPRING LATCH	6063-T5 ALUMINUM
22	HC-057-1	2	VENT MOLDED SPRING LATCH	MOLDED NYLON
23	L-7523	1 X LATCH	LATCH SPRING	STAINLESS STEEL
24	*	2	SILL/JAMB JOINT GASKET	1/16" CLOSED CELL FOAM
25	FS-041	2	SILL RAIL ASSEMBLY SCREW	#8 X 2 1/4" PH/PHIL.
26	HC-044-1	2	WEEP FLAP & BAFFLE	*
26	HC-	1 X WEEP	OPEN CELL FOAM PAD	1/2" X 1/2" X 2" L.
27	HC-040-1	2	SASH ROLLER & HOUSING	*
28	HC-026-1	1	SCREEN FRAME & MESH	*
29	*	1	ATTACHMENT SCREW @ CLIP	#8 X 5/8" S.D.S
30	HC-058-1	2	VENT SWEEP LATCH	MOLDED NYLON
31	HC-059-1	2	VENT SWEEP LATCH	DIE CAST METAL
32	L-8830	1 X Anchor	FRAME SILL ANCHOR CLIP	6063-T5 ALUMINUM
33	*	2	LAMINATED GLASS	See Details @ L.H of sheet 9
34	*	AS REQ'D	GLAZING SILICONE	See Details @ L.H of sheet 9
35	OPTIONAL	AS REQ'D	COLONIAL FALSE MUNTIN	ALUMINUM
36	SM-5504	AS REQ'D	JOINT SEALANT	*
37	*	AS REQ'D	PERIMETER ACRYLIC CAULK	OSI POLYSEAMSEAL

8501 N.W. 90 ST.
MEDLEY, FLORIDA 33166
PH No. (305) 696-8660

LAWSON INDUSTRIES, INC.

MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS

SERIES-8700 HORIZONTAL ROLLING FLANGE IMPACT WINDOW

GLAZING DETAILS, MULLION DETAILS & BILL OF MATERIALS

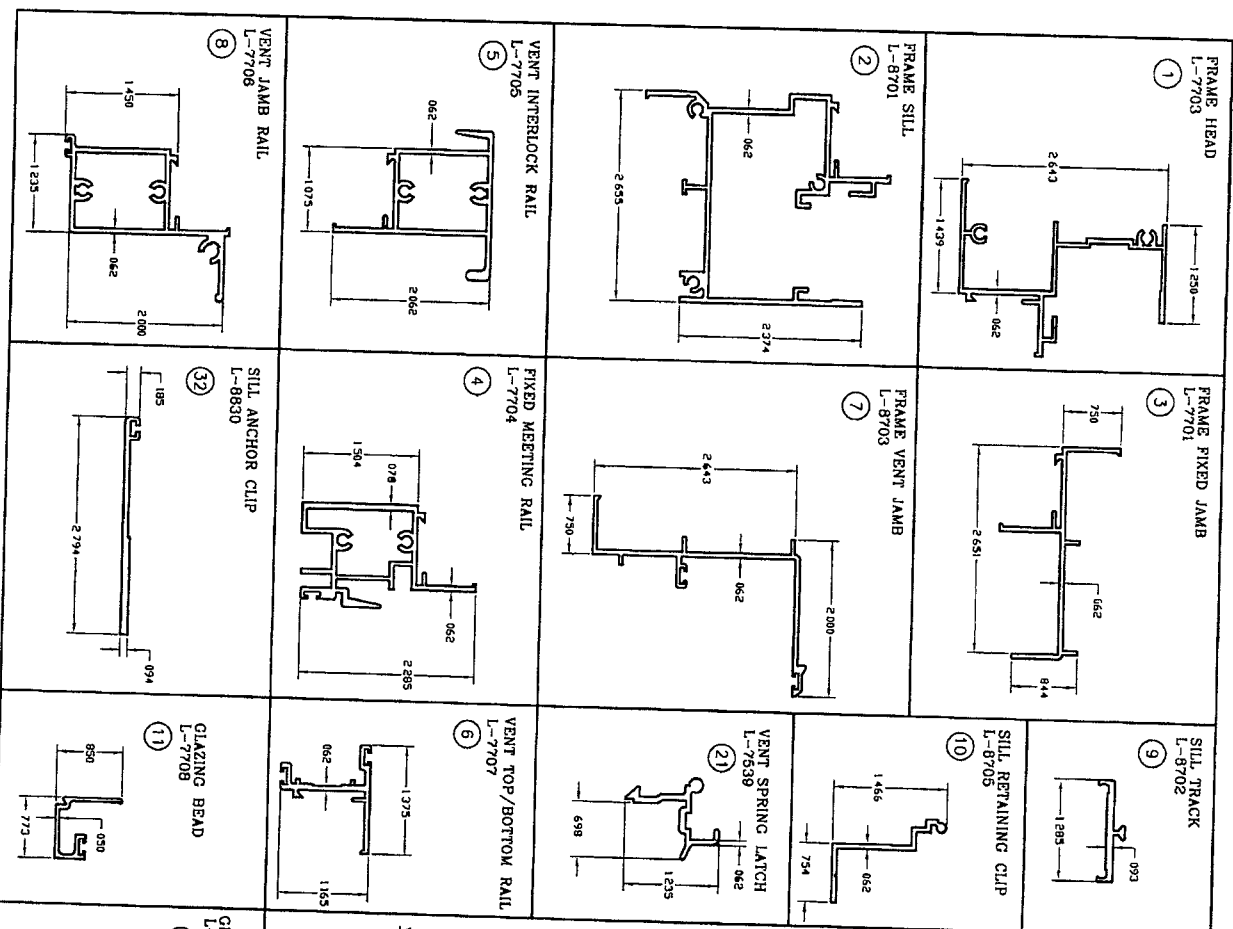
Revision # 1
9 of 10
Drawing Number: LB700-0901

Product Reference Number:

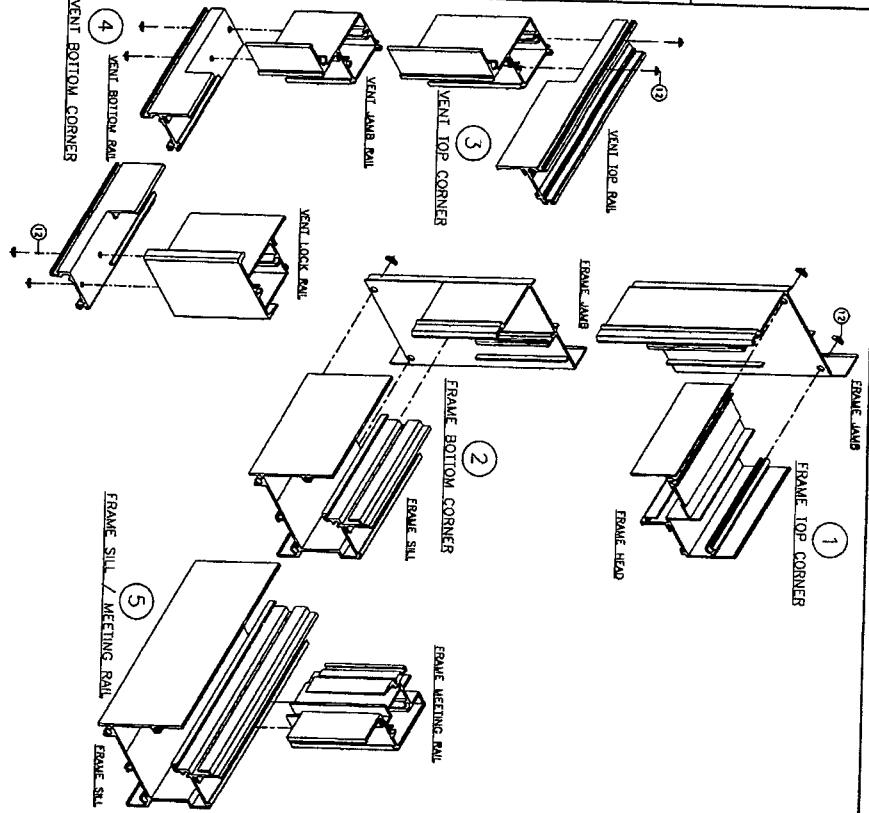
Revision #1
N BRAZO
Date: 05/05/08
Revision #1
N BRAZO
Date: 01/25/12

PROFESSIONAL ENGINEER
STATE OF FLORIDA
No. 55225
DATE: 12-01-27-08
EXPIRATION DATE: APRIL 11, 2017
By: *Mamuel Lopez*
Miami Trade Product Control

REVIEWED
13-1533
CLM PLANS EXAMINER

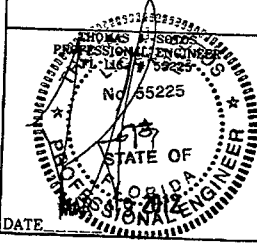


FRAME & SASH CORNER ASSEMBLY DETAILS



REVIEWED
13-1533
PLAN EXAMINER

PRODUCT REVISED
as complying with the Florida
Building Code
Acceptance No. 12-0127-08
Expiration Date 08/11/2017
By *Michael J. ...*
Miami/Orca Product Control



Revision Notes "A" - No change this sheet	
Drawn By: N. ERAZO	Date Drawn: 05/30/09
Revised By: N. ERAZO	Date Revised: 01/25/12
Revision Level:	Scale:

LAWSON INDUSTRIES, INC.
8501 N.W. 90 ST.
MEDLEY, FLORIDA 33166
PH No. (305) 696-8660

MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS

HS-8700 HORIZONTAL ROLLING FLANGE IMPACT WINDOW
EXTRUSION DETAILS & CORNER ASSEMBLY DETAILS

Product Reference Number: _____
Drawing Number: LB700-0901
Sheet: 10 OF 10
Revision #: "A"



DEPARTMENT OF PERMITTING, ENVIRONMENT, AND REGULATORY
AFFAIRS (PERA)
BOARD AND CODE ADMINISTRATION DIVISION

NOTICE OF ACCEPTANCE (NOA)

MIAMI-DADE COUNTY
PRODUCT CONTROL SECTION
11805 SW 26 Street, Room 208
Miami, Florida 33175-2474
T (786) 315-2590 F (786) 315-2599
www.miamidadecounty.gov/pera/

Lawson Industries, Inc.
8501 NW 90 Street
Medley, FL 33166

REVIEWED

13-1533

SCOPE:

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

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

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

DESCRIPTION: Series "SH-7700 (Flange Frame)" Aluminum Single Hung Window - L.M.I.

APPROVAL DOCUMENT: Drawing No. L7700-0901, titled "Series-7700 Single Hung Flange Frame Impact Window", sheets 1 through 5 of 5, dated 05/27/09 with revision A dated 01/20/12, prepared by manufacturer, signed and sealed by Thomas J. Sotos, P. E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Section.

MISSILE IMPACT RATING: Large Missile Impact Resistant

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

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

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

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

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA revises NOA # 11-0705.09 and consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

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



MP
3/29/12

NOA No. 12-0127.16
Expiration Date: December 27, 2016
Approval Date: March 29, 2012
Page 1

Lawson Industries, Inc.

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS

1. Manufacturer's die drawings and sections.
2. Drawing No **L7700-0901**, titled "Series-7700 Single Hung Flange Frame Impact Window", sheets 1 through 5 of 5, dated 05/27/09 with revision A dated 01/20/12, prepared by manufacturer, signed and sealed by Thomas J. Sotos, P. E.

B. TESTS

1. Test reports on: 1) Large Missile Impact Test per FBC, TAS 201-94
2) Cyclic Wind Pressure Loading per FBC, TAS 203-94
3) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
along with marked-up drawings and installation diagram of aluminum single hung window, prepared by Hurricane Engineering & Testing, Inc., Test Reports No.'s **HETI-09-2530A** and **HETI-09-2530B**, dated 03/02/09, all signed and sealed by Candido F. Font, P. E.
(Submitted under previous NOA No. 09-0706.09)
2. Test reports on: 1) Large Missile Impact Test per FBC, TAS 201-94
2) Cyclic Wind Pressure Loading per FBC, TAS 203-94
3) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
along with marked-up drawings and installation diagram of aluminum single hung window, prepared by Hurricane Engineering & Testing, Inc., Test Reports No.'s **HETI-08-2003 C**, **HETI-08-2004 A**, **HETI-08-2060 A**, **HETI-08-2060 B**, **HETI-08-2061 A**, **HETI-08-2061 B**, **HETI-08-2062 A**, **HETI-08-2062 B**, **HETI-08-2063A**, **HETI-08-2063B**, **HETI-08-2064A** and **HETI-08-2064B**, dated 03/15/08, all signed and sealed by Candido F. Font, P. E.
(Submitted under previous NOA No. 08-0825.17)
3. Test reports on: 1) Air Infiltration Test, per FBC, TAS 202-94
2) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
3) Water Resistance Test, per FBC, TAS 202-94
4) Large Missile Impact Test per FBC, TAS 201-94
5) Cyclic Wind Pressure Loading per FBC, TAS 203-94
6) Forced Entry Test, per FBC 2411 3.2.1, TAS 202-94
along with marked-up drawings and installation diagram of aluminum single hung window, prepared by Fenestration Testing Laboratory, Inc., Test Reports No.'s **FTL-2987** and **FTL-2986**, dated 04/03/01 and 03/27/01, all signed and sealed by Luis Antonio Figueredo, P. E.
(Submitted under previous NOA No. 06-0406.08)

13-1533
PLANS EXAMINER


Manuel Perez, P.E.
Product Control Examiner

NOA No. 12-0127.16
Expiration Date: December 27, 2016
Approval Date: March 29, 2012

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

13-1533 1

CLW PLANS EXAMINER

C. CALCULATIONS:

1. Anchor verification calculations and structural analysis, complying with FBC-2007, prepared by Lawson Industries, Inc., dated 05/28/09, revised on 01/18/10, signed and sealed by Thomas J. Sotos, P. E.
2. Glazing complies with ASTM E1300-02/04.

D. QUALITY ASSURANCE

1. Miami-Dade Department of Permitting, Environment, and Regulatory Affairs (PERA).

E. MATERIAL CERTIFICATIONS

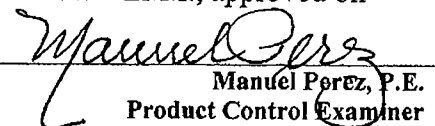
1. Notice of Acceptance No. 11-0624.02 issued to **E.I. DuPont DeNemours & Co., Inc.** for their "**DuPont SentryGlas® Interlayer**" dated 08/25/11, expiring on 01/14/17.
2. Notice of Acceptance No. 11-0624.01 issued to **E.I. DuPont DeNemours & Co., Inc.** for their "**DuPont Butacite® PVB Interlayer**" dated 09/08/11, expiring on 12/11/16.
3. Notice of Acceptance No. 11-0325.05 issued to Solutia, Inc. for their "**Saflex and Vanceva clear and color interlayers**" dated 05/05/11, expiring on 05/21/16

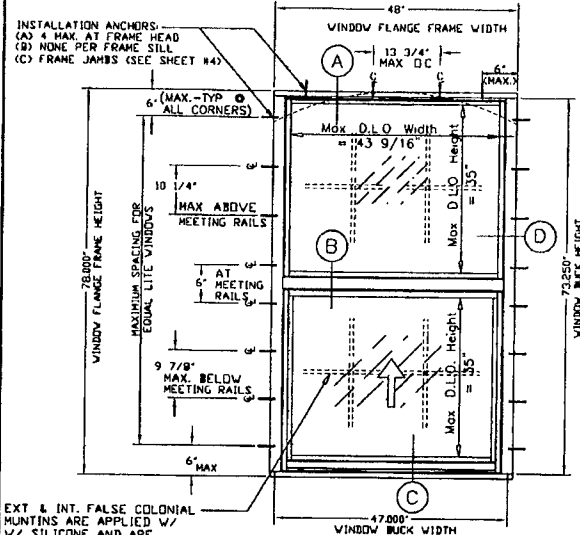
F. STATEMENTS

1. Statement letter of conformance, complying with FBC-2010, dated January 25, 2012, signed and sealed by Thomas J. Sotos, P.E.
2. Statement letter of no financial interest, dated May 28, 2009, signed and sealed by Thomas J. Sotos, P. E. (*Submitted under previous NOA No. 11-0705.09*)
3. Laboratory compliance letter for Test Reports No. HETI-09-2530 A and HETI-09-2530B, issued by Hurricane Engineering & Testing, Inc., dated 03/02/09, all signed and sealed by Candido F. Font, P. E. (*Submitted under NOA No. 09-0706.09*)
4. Laboratory compliance letter for Test Reports No. HETI-08-2003 C, HETI-08-2004 A, HETI-08-2060 A, HETI-08-2060 B, HETI-08-2061 A, HETI-08-2061 B, HETI-08-2062 A, HETI-08-2062 B, HETI-08-2063A, HETI-08-2063B, HETI-08-2064A and HETI-08-2064B, issued by Hurricane Engineering & Testing, Inc., dated 03/15/08, all signed and sealed by Candido F. Font, P. E. (*Submitted under previous NOA No. 08-0825.17*)
5. Laboratory compliance letter for Test Reports No. FTL-2987 and FTL-2986, issued by Fenestration Testing Laboratory, Inc., dated April 03 and March 27, 2001, all signed and sealed by Luis Antonio Figueredo, P. E. (*Submitted under previous NOA No. 06-0406.08*)

G. OTHERS

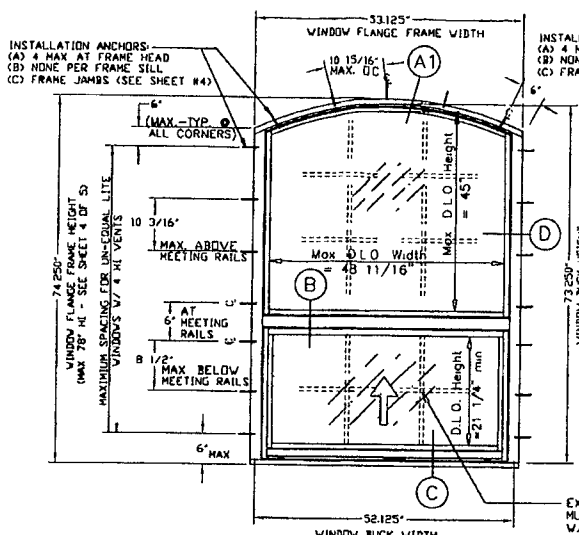
1. Notice of Acceptance No. 11-0705.09, issued to Lawson Industries, Inc. for their Series "SH-7700 Flange" Aluminum Single Hung Window - L.M.I., approved on 08/18/11 and expiring on 12/27/16.


Manuel Perez, P.E.
Product Control Examiner
NOA No. 12-0127.16
Expiration Date: December 27, 2016
Approval Date: March 29, 2012

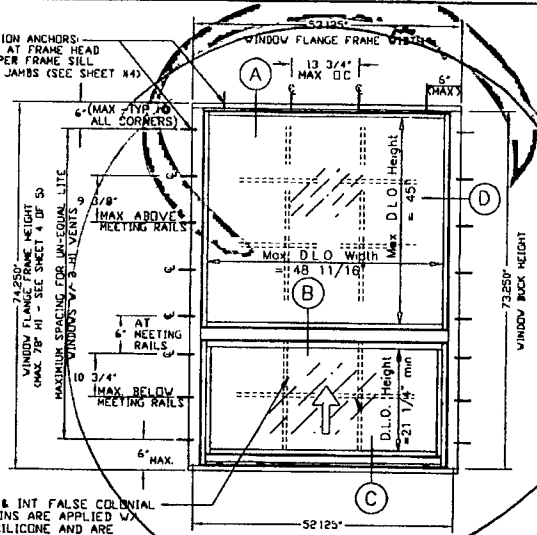


EXT & INT. FALSE COLONIAL MUNTINS ARE APPLIED W/ V/V SILICONE AND ARE AVAILABLE AS OPTIONAL

48" x 78" EQUAL LITE ELEVATION
 * INCLUDES UN-EQUAL LITE AND RADIUS HEAD (LIMITED TO LOADS ON SHEET 4 OF 5)



UN-EQUAL LITE RADIUS ELEVATION
 (LIMITED TO LOADS ON SHEET 4 OF 5)



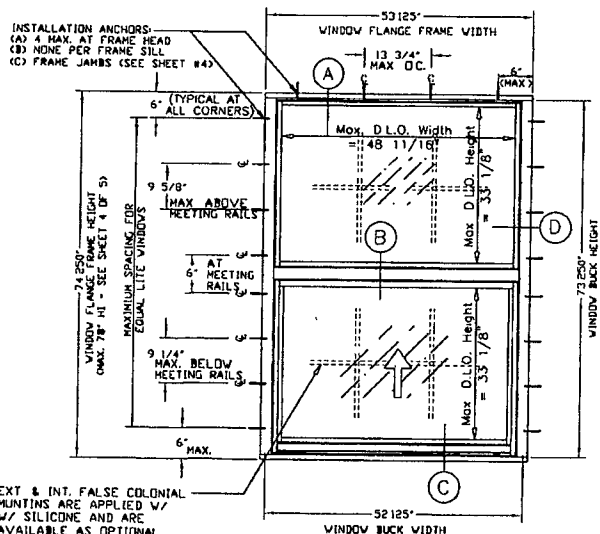
EXT & INT. FALSE COLONIAL MUNTINS ARE APPLIED W/ V/V SILICONE AND ARE AVAILABLE AS OPTIONAL

UN-EQUAL LITE ELEVATION
 (LIMITED TO LOADS ON SHEET 4 OF 5)

General Notes:

- THIS WINDOW SYSTEM IS DESIGNED AND TESTED TO COMPLY WITH THE REQUIREMENTS OF THE 2010 FLORIDA BUILDING CODE INCLUDING HIGH VELOCITY HURRICANE ZONE VELOCITY (HVHZ) AND ASTM 1300-02. THIS PRODUCT IS IMPACT RESISTANT. (SHUTTERS NOT REQUIRED)
- WOOD BUCKS SHALL BE INSTALLED AND ANCHORED SO THAT THE BUILDING RESISTS THE SUPERIMPOSED LOADS IN ACCORDANCE WITH THE REQUIREMENTS OF 2010 F.B.C. & TO BE REVIEWED BY BUILDING OFFICIAL
- ANCHORS SHOWN ABOVE ARE AS PER TEST UNITS. ANCHORS ON ALL WINDOW SIZES ARE NOT TO EXCEED THESE MAXIMUM SPACINGS ON CENTER (O.C) AND AS TABULATED ON SHEET 4
- ANCHOR CONDITIONS NOT DESCRIBED IN THESE DRAWING'S ARE TO BE ENGINEERED ON A SITE SPECIFIC BASIS, UNDER SEPARATE APPROVAL AND TO BE REVIEWED BY BUILDING OFFICIAL.
- WINDOWS ARE QUALIFIED FOR USE WITH SINGLE GLAZE LAMINATED GLASS TYPES TABULATED HEREIN (SEE SHEET #3), AND FOR USE WITH DOUBLE GLAZE LAMINATED INSULATED GLASS TYPES TABULATED HEREIN (SEE SHEET #3).
- SEE SHEET 3 FOR LOCK DETAILS & OPTIONS.
- SEE SHEET 4 FOR DESIGN PRESSURES AND GLASS TYPES.
- FOR OPTIONAL FRAME INSTALLATION DETAILS SEE SHEET 3.
- EXT. & INT. FALSE COLONIAL MUNTINS ARE OPTIONAL & AND ARE APPLIED W/ SILICONE
- WOOD BUCKS IN CONTACT WITH CONCRETE MUST BE PRESSURE TREATED AND ANCHORED (BY OTHERS), PRIOR TO WINDOW INSTALLATION (SEE SHEET #2 FOR DETAIL & NOTES) WOOD BUCKS TO BE ANCHORED IN COMPLIANCE WITH THE 2010 FBC CHAPTER 24, SECTION 11.3.3
- APPROVAL APPLIES TO SINGLE UNITS OR SIDE BY SIDE MULLED UNITS.
- MULLING SINGLE HUNG WINDOWS WITH OTHER TYPES OF MIAMI-DADE COUNTY APPROVED WINDOWS USING A MIAMI-DADE COUNTY APPROVED MULLION IN BETWEEN ARE ACCEPTABLE BUT THE LOWER DESIGN PRESSURE FROM THE WINDOWS OR MULLION APPROVAL WILL APPLY TO THE ENTIRE MULLED SYSTEM
- SEE SHEET # 3 FOR MULLION/METAL ATTACHMENT DETAILS & OPTIONS
- ALL METAL/STEEL IN CONTACT WITH ALUMINUM OR OTHER DISSIMILAR MATERIALS TO BE PAINTED OR PLATED AND SHALL MEET SECTION 2003.8.4 OF THE 2010 FLORIDA BLDG. CODE

SERIES-7700 SINGLE HUNG IMPACT WINDOW - FLANGE FRAME



EXT & INT. FALSE COLONIAL MUNTINS ARE APPLIED W/ V/V SILICONE AND ARE AVAILABLE AS OPTIONAL.

EQUAL LITE ELEVATION
 (LIMITED TO LOADS ON SHEET 4 OF 5)

PRODUCT REVISED as complying with the Florida Building Code
 Acceptance No. 17-0127.16
 Expiration Date Dec. 31, 2016
 By *Wanda...*
 Miami Dade Product Control

LAWSON INDUSTRIES, INC.
 MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS
 SERIES-7700 SINGLE HUNG FLANGE FRAME IMPACT WINDOW
 APPROVED ELEVATIONS, CONFIGURATIONS AND NOTES

8501 N.W. 90 ST.
 MEDLEY, FLORIDA 33166
 PH NO. (305) 696-8660

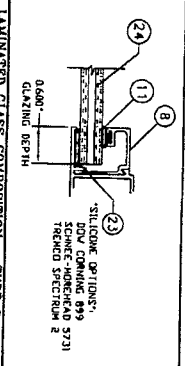
Revision 1
 Sheet 1 OF 5
 Product Reference Number: L7700-0901

Revision	Refer	A. Revised to Comply w/ 2010 FBC
Drawn By	N. ERAZO	05-27-09
Checked By	N. ERAZO	01/20/12
Revision Level	A	

THOMAS J. SOTOS
 PROFESSIONAL ENGINEER
 FL LICENSE NO. 55225

STATE OF FLORIDA
 PROFESSIONAL ENGINEER

DATE

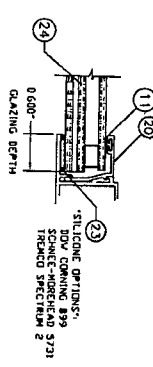


ITEM	GLASS DESCRIPTION	DETAIL	LAMINATE DESCRIPTION
1	1/8" ANNEALED GLASS	①	SAFLEX PVB
2	0.09" PLASTIC INTERLAYER	②	By "SAFLEX"
3	1/8" ANNEALED GLASS	③	SAFLEX PVB

ITEM	GLASS DESCRIPTION	DETAIL	LAMINATE DESCRIPTION
1	1/8" ANNEALED GLASS	①	SAFLEX PVB
2	0.09" PLASTIC INTERLAYER	②	By "SAFLEX"
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1	1/8" ANNEALED GLASS	①	SAFLEX PVB
2	0.09" PLASTIC INTERLAYER	②	By "SAFLEX"
3	1/8" ANNEALED GLASS	③	SAFLEX PVB

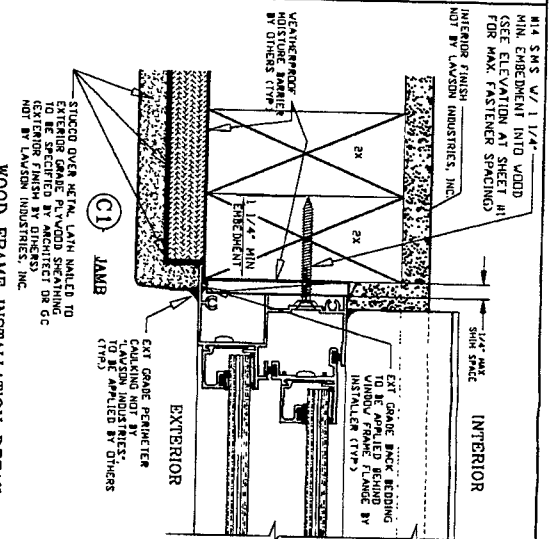
ITEM	GLASS DESCRIPTION	DETAIL	LAMINATE DESCRIPTION
1	1/8" HEAT-STRENGTHENED GLASS	①	SAFLEX PVB
2	0.09" PLASTIC INTERLAYER	②	By "SAFLEX"
3	1/8" HEAT-STRENGTHENED GLASS	③	SAFLEX PVB



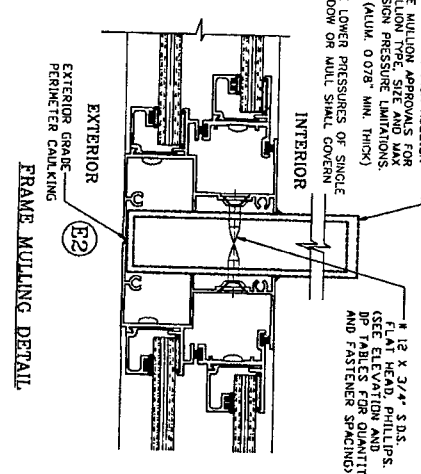
ITEM	GLASS DESCRIPTION	DETAIL	LAMINATE DESCRIPTION
1	1/8" HEAT-STRENGTHENED GLASS	①	SAFLEX PVB
2	0.09" PLASTIC INTERLAYER	②	By "SAFLEX"
3	1/8" HEAT-STRENGTHENED GLASS	③	SAFLEX PVB
4	1/8" INSULATED AIR SPACE	④	By "SAFLEX"
5	1/8" ANNEALED GLASS	⑤	SAFLEX PVB

ITEM	GLASS DESCRIPTION	DETAIL	LAMINATE DESCRIPTION
1	1/8" ANNEALED GLASS	①	SAFLEX PVB
2	0.09" PLASTIC INTERLAYER	②	By "SAFLEX"
3	1/8" ANNEALED GLASS	③	SAFLEX PVB
4	1/8" INSULATED AIR SPACE	④	By "SAFLEX"
5	1/8" ANNEALED GLASS	⑤	SAFLEX PVB

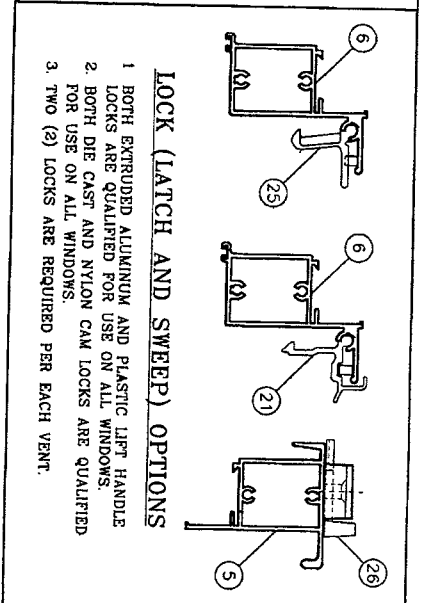
GLAZING DETAILS AND OPTIONS



WOOD FRAME INSTALLATION DETAIL

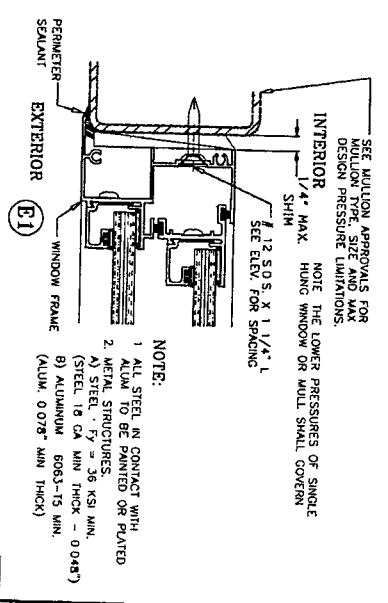


ALUMINUM MULLION DETAIL



LOCK (LATCH AND SWEEP) OPTIONS

- BOTH EXTRUDED ALUMINUM AND PLASTIC LEFT HANDLE LOCKS ARE QUALIFIED FOR USE ON ALL WINDOWS.
- BOTH DIE CAST AND NYLON CAM LOCKS ARE QUALIFIED FOR USE ON ALL WINDOWS.
- TWO (2) LOCKS ARE REQUIRED PER EACH VENT.



METAL STRUCTURE ATTACHMENT DETAIL

PRODUCT REVISED as complying with the Florida Building Code Acceptance No. 12-0197-16-016
 By *Thomas J. Sotos*
 Miami Product Control Center

THOMAS J. SOTOS
 PROFESSIONAL ENGINEER
 FL LIC. # 55225

STATE OF FLORIDA
 PROFESSIONAL ENGINEER

LAWSON INDUSTRIES, INC.
 MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS

8501 N.W. 90 ST.
 MEDLEY, FLORIDA 33166
 PH No. (305) 696-8660

SERIES-7700 SINGLE HUNG FLANGE FRAME IMPACT WINDOW
 DESIGN PRESSURES, GLAZING DETAILS & LOCK OPTIONS

Product Reference Number: L7700-0901
 Drawing Number: L7700-0901
 Sheet: 3 OF 5
 Revision #:

Revised By: N. ERAZO	Date Revised: 05-27-08
Revised By: N. ERAZO	Date Revised: 01/20/12
Revision Level: A	Scale:

REVIEWED
 13-1533
 CLW PLANS EXAMINER

DATE	THOMAS J. SOTOS PROFESSIONAL ENGINEER 7116 W. ... MIRAMAR, FLORIDA 33166
Revision Level: A	Revision Number: 1
Drawn By: N. ERAZO	Checked By: N. ERAZO
Date Drawn: 05-27-09	Date Check: 01/20/12
Product Reference Number: L7700-0901	Sheet: 2 OF 5

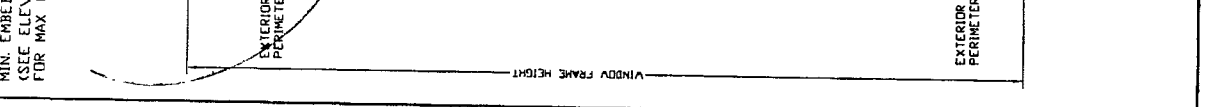
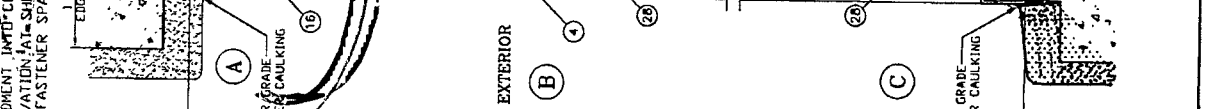
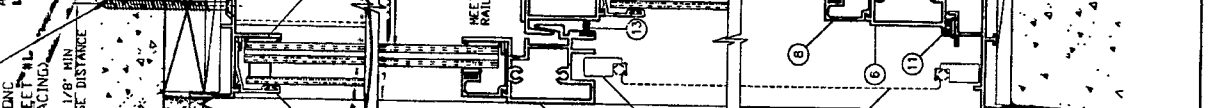
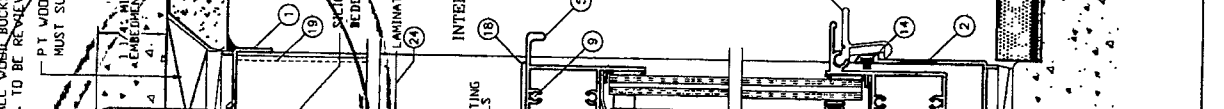
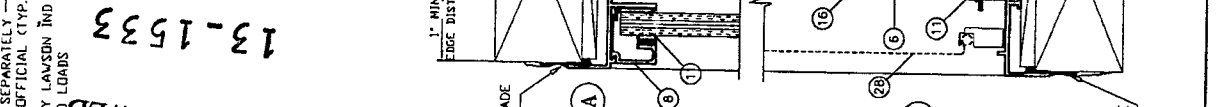
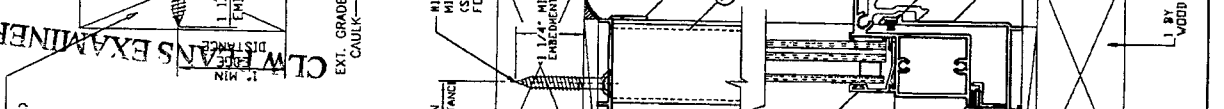
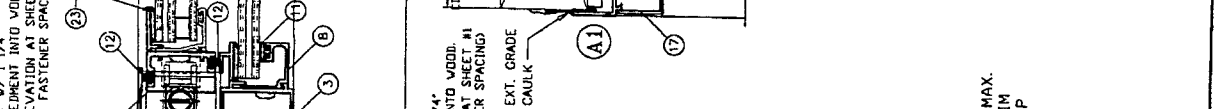
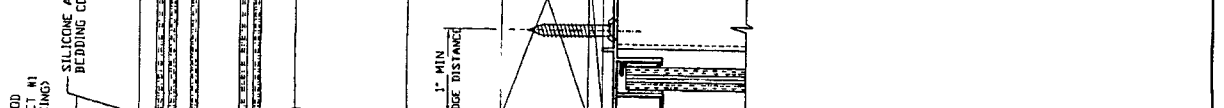
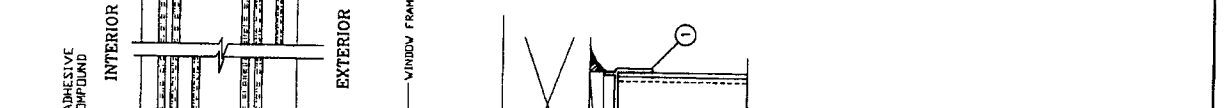
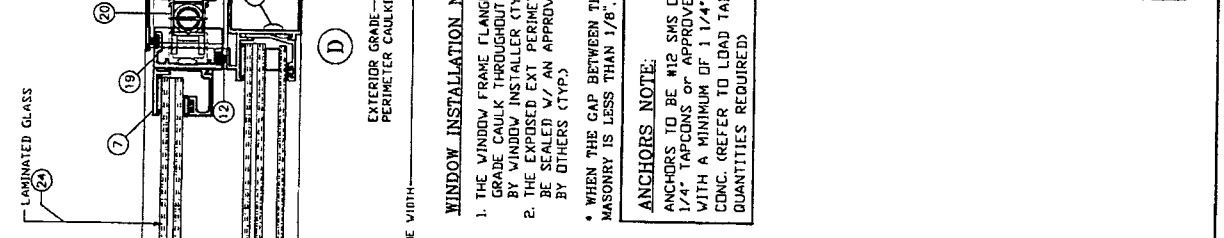
MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS
LAWSON INDUSTRIES, INC.
 8501 N.W. 90 ST.
 MEDLEY, FLORIDA 33166
 PH No. (305) 696-8660

WINDOW INSTALLATION NOTES:

1. THE WINDOW FRAME FLANGE TO BE BACK-BEDDED W/ AN EXT. GRADE CAULK THROUGHOUT THE ENTIRE PERIMETER OF FLANGE BY WINDOW INSTALLER (TYP)
2. THE EXPOSED EXT PERIMETER OF THE WINDOW FRAME TO BE SEALED W/ AN APPROVED EXTERIOR GRADE CAULK BY OTHERS (TYP)

* WHEN THE GAP BETWEEN THE WINDOW FRAME AND THE BUCK OR MASONRY IS LESS THAN 1/8", SHIMS ARE NOT REQUIRED

ANCHORS NOTE:
 ANCHORS TO BE #12 SMS OR W/D. SCREWS INTO WOOD, OR 1/4" TAPCON'S OR APPROVED CONC. FASTENERS INTO CONC. WITH A MINIMUM OF 1 1/4" PENETRATION INTO WOOD OR CONC. REFER TO LOAD TABLES AT SHEET 4 OF 5 FOR QUANTITIES REQUIRED)



REVIEWED
 13-1533
 ALL WOOD BUCKS ENGINEERED SEPARATELY & TO BE REVIEWED BY BLDG. OFFICIAL (TYP.)
 P.T. WOOD BUCK NOT BY LAWSON IND MUST SUSTAIN IMPOSED LOADS

1/4" TAPCON W/ 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #1 FOR MAX FASTENER SPACING)

1 1/8" MIN. EMBEDMENT

1 1/4" TAPCON W/ 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #1 FOR MAX FASTENER SPACING)

1 1/4" MIN. EMBEDMENT

1 1/8" MIN. EMBEDMENT

1 1/4" TAPCON W/ 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #1 FOR MAX FASTENER SPACING)

1 1/4" MIN. EMBEDMENT

1 1/8" MIN. EMBEDMENT

1 1/4" TAPCON W/ 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #1 FOR MAX FASTENER SPACING)

1 1/4" MIN. EMBEDMENT

1 1/8" MIN. EMBEDMENT

1 1/4" TAPCON W/ 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #1 FOR MAX FASTENER SPACING)

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1 1/8" MIN. EMBEDMENT

1 1/4" TAPCON W/ 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #1 FOR MAX FASTENER SPACING)

1 1/4" MIN. EMBEDMENT

1 1/8" MIN. EMBEDMENT

1 1/4" TAPCON W/ 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #1 FOR MAX FASTENER SPACING)

1 1/4" MIN. EMBEDMENT

1 1/8" MIN. EMBEDMENT

1 1/4" TAPCON W/ 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #1 FOR MAX FASTENER SPACING)

1 1/4" MIN. EMBEDMENT

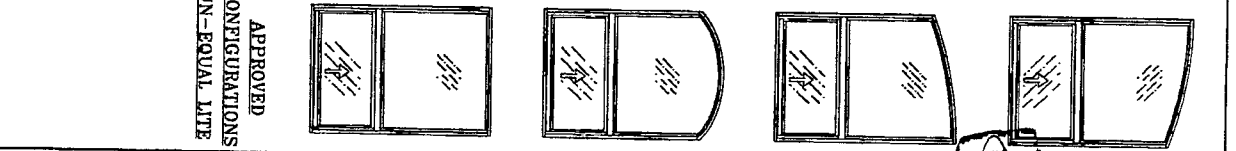
1 1/8" MIN. EMBEDMENT

1 1/4" TAPCON W/ 1 1/4" MIN. EMBEDMENT INTO CONC. (SEE ELEVATION AT SHEET #1 FOR MAX FASTENER SPACING)

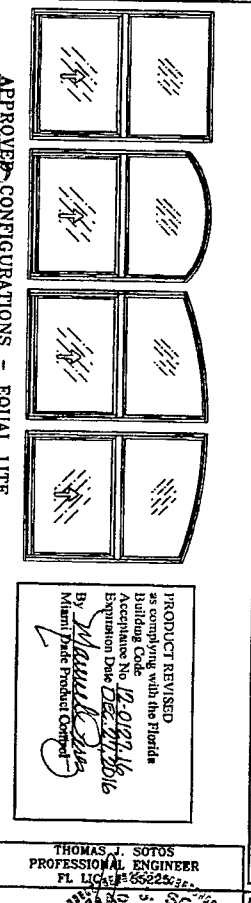
1 1/4" MIN. EMBEDMENT

1 1/8" MIN. EMBEDMENT

DESIGN LOAD CAPACITY (PSF) - VIEW WINDOWS W/ 3H VENTS						
WINDOW WIDTH	WINDOW HEIGHT	# Jamb Anchors	+/- Pressures (psf)			Glass Type
			4	5	6	
19.125	50.625	6	60.0	80.0	80.0	80.0
26.5	50.625	6	60.0	80.0	80.0	80.0
37	50.625	6	60.0	80.0	80.0	80.0
42	50.625	6	60.0	80.0	80.0	80.0
48	50.625	6	60.0	80.0	80.0	80.0
53.125	50.625	6	60.0	80.0	80.0	80.0
19.125	59	6	60.0	80.0	80.0	80.0
26.5	59	6	60.0	80.0	80.0	80.0
37	59	6	60.0	80.0	80.0	80.0
42	59	6	60.0	80.0	80.0	80.0
48	59	6	60.0	80.0	80.0	80.0
53.125	59	6	60.0	80.0	80.0	80.0
19.125	63	6	60.0	80.0	80.0	80.0
26.5	63	6	60.0	80.0	80.0	80.0
37	63	6	60.0	80.0	80.0	80.0
42	63	6	60.0	80.0	80.0	80.0
48	63	6	60.0	80.0	80.0	80.0
53.125	63	6	60.0	80.0	80.0	80.0
19.125	74.25	8	60.0	80.0	80.0	80.0
26.5	74.25	8	60.0	80.0	80.0	80.0
37	74.25	8	60.0	80.0	80.0	80.0
42	74.25	8	60.0	80.0	80.0	80.0
48	74.25	8	60.0	80.0	80.0	80.0
53.125	74.25	8	60.0	80.0	80.0	80.0
19.125	78	8	60.0	80.0	80.0	80.0
26.5	78	8	60.0	80.0	80.0	80.0
37	78	8	60.0	80.0	80.0	80.0
42	78	8	60.0	80.0	80.0	80.0
48	78	8	60.0	80.0	80.0	80.0



DESIGN LOAD CAPACITY (PSF) - EQUAL LITE WINDOWS										
WINDOW WIDTH	WINDOW HEIGHT	# Jamb Anchors	+/- Pressures (psf)						Glass Type	
			2	3	4	5	6	7		
19.125	26	4	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
26.5	26	4	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
37	26	4	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
42	26	4	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
48	26	4	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
53.125	26	4	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
19.125	38.375	6	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
26.5	38.375	6	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
37	38.375	6	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
42	38.375	6	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
48	38.375	6	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
53.125	38.375	6	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
19.125	50.625	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
26.5	50.625	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
37	50.625	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
42	50.625	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
48	50.625	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
53.125	50.625	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
19.125	59	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
26.5	59	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
37	59	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
42	59	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
48	59	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
53.125	59	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
19.125	63	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
26.5	63	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
37	63	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
42	63	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
48	63	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
53.125	63	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
19.125	74.25	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
26.5	74.25	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
37	74.25	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
42	74.25	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
48	74.25	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
53.125	74.25	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
19.125	78	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
26.5	78	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
37	78	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
42	78	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0
48	78	8	80.0	80.0	80.0	80.0	80.0	80.0	80.0	80.0



APPROVED CONFIGURATIONS - EQUAL LITE

APPROVED

UN-EQUAL LITE

DESIGN PRESSURE CHARTS, & CONFIGURATION OPTIONS

LAWSON INDUSTRIES, INC.

8501 N.W. 90 ST.
MEDLEY, FLORIDA 33166
PH No. (305) 696-8660

MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS

SERIES-7700 SINGLE HUNG FLANGE FRAME IMPACT WINDOW

Revision Note: A Revised to Comply w/ 2010 FBC

THOMAS J. SOTOS
PROFESSIONAL ENGINEER
FL. License # 55225

By: *Thomas J. Sotos*
Professional Engineer
as complying with the Florida Building Code
Department of Building
Examination Date: 01/20/12

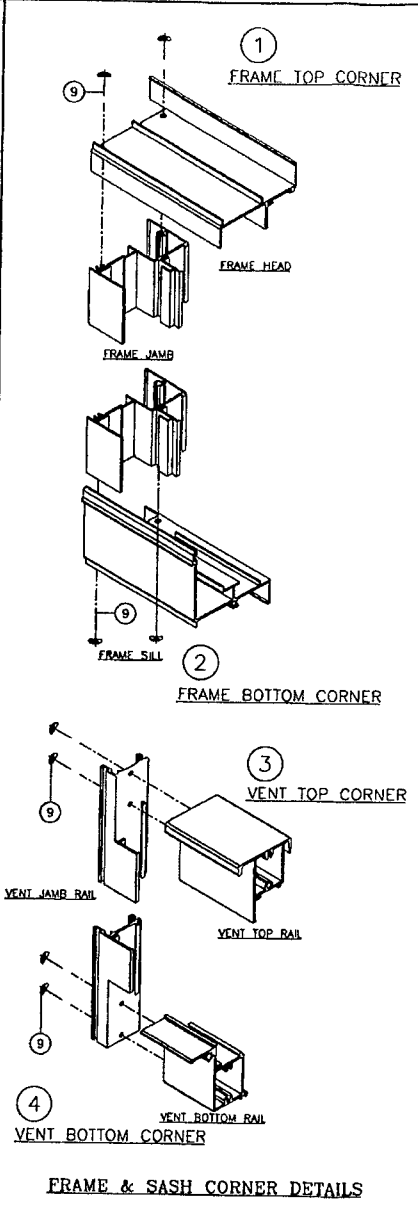
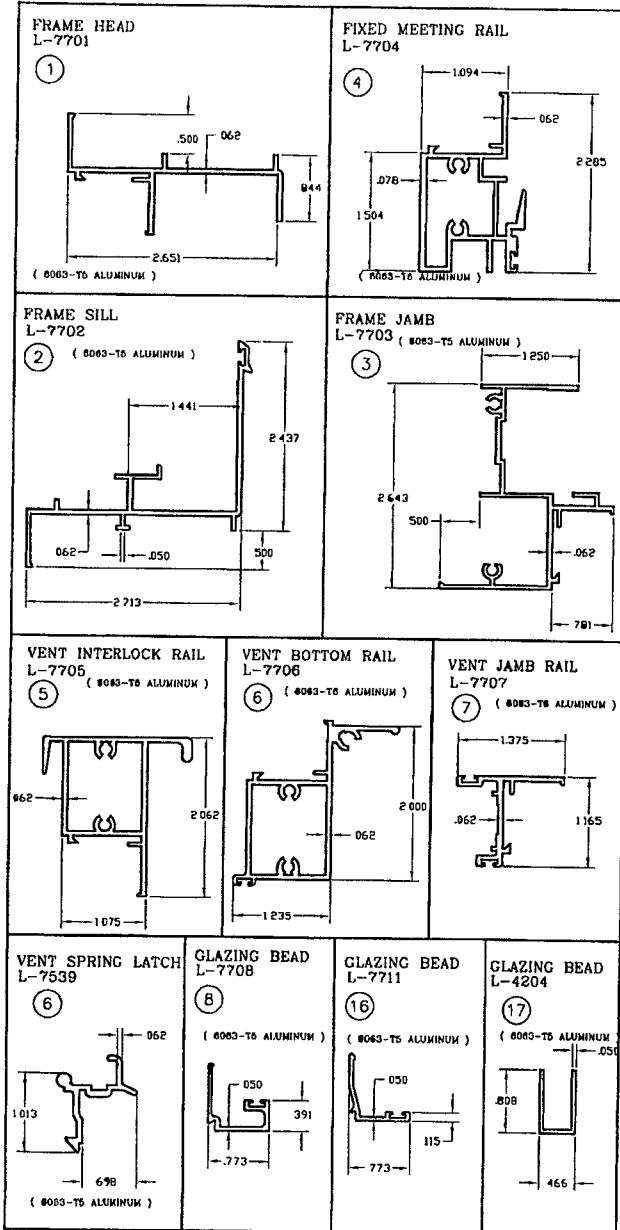
Product Reference Number: L7700-0901

Drawing Number: L7700-0901

Sheet: 4 OF 5

Revision #: 1

LAW PLANS EXAMINER
13-1533
REVIEWED



BILL OF MATERIALS					
ITEM #	PART #	REQD.	DESCRIPTION	REMARKS	
1	L-7801	1	FIN FRAME HEAD	6063-T6 ALUMINUM	
2	L-7802	1	FIN FRAME SILL	6063-T6 ALUMINUM	
3	L-7803	2	FIN FRAME JAMB	6063-T6 ALUMINUM	
4	L-7704	1	FRAME FIXED MEETING RAIL	6063-T6 ALUMINUM	
5	L-7705	1	VENT MEETING (TOP) RAIL	6063-T6 ALUMINUM	
6	L-7706	1	VENT BOTTOM (LATCH) RAIL	6063-T6 ALUMINUM	
7	L-7707	2	VENT JAMB (SIDE) RAIL	6063-T6 ALUMINUM	
8	L-7708	AS REQ'D	GLAZING BEAD (3/8")	6063-T5 ALUMINUM	
9	FS-006	AS REQ'D	FRAME ASSEMBLY SCREWS	#8 X 3/4" P.H. PHILLIPS	
10	FS-040	AS REQ'D	INSTALLATION SCREWS	#14 X 1 1/4" F.H./PHIL	
11	L-7531	AS REQ'D	BULB VINYL WTS'P	1/4" DIA. BULB #3033	
12	PWS-003	AS REQ'D	FIN SEAL WEATHERSTRIP	.187"x.230"	
13	PWS-005	AS REQ'D	FIN SEAL WEATHERSTRIP	.187"x.350"	
14	PWS-009	AS REQ'D	FIN SEAL WEATHERSTRIP	.187"x.310"	
15	HC-024-1	2	SELF ADHESIVE PILE PAD	1/4" X 1 1/2"	
16	L-7711	AS REQ'D	GLAZING BEAD/ INSULATED	6063-T5 ALUMINUM	
17	L-4204	AS REQ'D	GLAZING BEAD - RADIUS	6063-T5 ALUMINUM	
18	L-7723	1	SASH BALANCE CAM/GUIDE	(2 X VENT)	
19	L-7725	2	RIGID VINYL SASH STOP	(2 X FRAME)	
20	L-7727	2	BLOCK & TACKLE BALANCE	BSI Balance Systems	
21	L-7539	2	VENT LIFT LATCH	6063-T5 ALUMINUM	
22	L-7523	1X	LATCH	VENT LATCH SPRING	STAINLESS STEEL
23	*	AS REQ'D	GLAZING SILICONE	SEE GLAZING @ SHT. 3	
24	*	2	Laminated Glass	SEE GLAZING DETAILS	
25	HC-057-1	2	VENT LIFT LATCH	MOLDED NYLON	
26	HC-058-1	2	VENT SWEEP LATCH	MOLDED NYLON	
27	*	2	FRAME SILL FOAM GASKET	SELF ADHESIVE	
28	HC-026-1	1	SCREEN FRAME & MESH		
29	L-7730	1	PRODUCT LABEL		
30	*	*	*	*	
31	SM-5504	AS REQ'D	JOINT SEALANT	SM-5504	
32	*	AS REQ'D	PERIMETER ACRYLIC CAULK	OSI POLYSEAMSEAL	

LAWSON INDUSTRIES, INC.
MANUFACTURER OF QUALITY ALUMINUM WINDOWS AND GLASS DOORS
8501 N.W. 90 ST.
MEDLEY, FLORIDA 33166
PH No. (305) 696-8660

Series-7700 SINGLE HUNG FLANGE FRAME IMPACT WINDOW
BILL OF MATERIALS, EXTRUSION DETAILS & CORNER ASSEMBLY DETAILS

Product Reference Number: L7700-0901

Revision: 5 OF 5

Revision: A, Revison to Comply w/ 2010 FBC

Drawn By: N. ERAGO
Checked By: N. ERAGO
Date: 01/20/12

THOMAS J. SOTOS
PROFESSIONAL ENGINEER
FLIC # 55225

STATE OF FLORIDA
PROFESSIONAL ENGINEER
No. 55225
Expiration Date: Dec 31, 2016

By: *Manuel...*
Miami Trade Product Control

DLW PLANS EXAMINER
13-1533
REVIEWED

PRODUCT REVISED
as complying with the Florida
Building Code
Acceptance No. 12-0127-16
Expiration Date Dec 31, 2016
By: *Manuel...*
Miami Trade Product Control

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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.

City of Lake Worth
Building Department
1900 2nd Ave N
Lake Worth, FL 33461

Inspection Request (561) 586-1691 Main Office (561) 586-1647

Application Number 13-00002253
Revision number 2

Page 2
Date 11/21/13

Special Notes and Comments

Failure to comply could result in fines and fees.

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

Inspections must be scheduled by 4:00 pm the previous day.
Building Inspections 586-1691. Fire Inspections 561-233-0050
Landscape Inspections 586-1677.
Public Services Inspections 586-1720

Safety is everybody's job!

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Application Number	13-00002253	Page	3
Revision number	2	Date	11/21/13
Property Address	215 S FEDERAL HWY		
PROPERTY CONTROL NUMBER:	38-43-44-21-15-093-0120		
Application description . . .	RESIDENTIAL REMODEL		
Subdivision Name			
Property Use	SINGLE FAMILY		

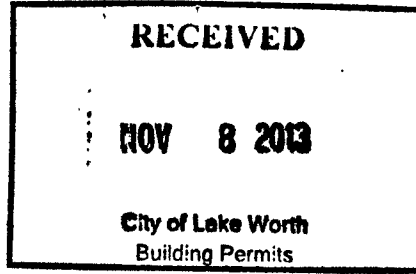
Required Inspections

Seq	Insp Code	Description	Initials	Date
Permit type COMMERCIAL BUILDING				
10	604	ME ROUGH		/ /
10	704	PL 1ST ROUGH		/ /
10	106	BD FRAMING		/ /
10	103	BD DRYWALL/FASTENING		/ /
10	107	BD INSULATION		/ /
10	203	EL FINAL		/ /
10	302	FD FINAL		/ /
10	301	FD FIRE ALARM		/ /
10	602	ME FINAL		/ /
10	703	PL FINAL		/ /
10	502	PS FINAL		/ /
10	113	BD WALK & DRIVEWAY		/ /
10	209	EL ROUGH		/ /
10-50	210	EL EARLY POWER		/ /
10	314	FD FIRE FRAMING		/ /
1000	104	BD FINAL		/ /

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HYB



BUILDING DIVISION
DEPARTMENT FOR COMMUNITY SUSTAINABILITY
CITY OF LAKE WORTH
1900 2ND AVENUE NORTH
LAKE WORTH, FL 33461
561.586.1647

PLAN REVIEW CRITIQUE RESPONSE

IF YOU RECEIVE PLAN REVIEW COMMENTS, YOU MUST RETURN THE ORIGINAL CONSTRUCTION DOCUMENT ALONG WITH THE AMMENDED/CORRECTED CONSTRUCTION DOCUMENT.

This form is to be used for documents being submitted in response to a plan review critique. It is NOT to be used for submitting revisions to an issued permit.

Applicant: JM Properties Date: 11-8-13

Job Address: 215 S Federal Hwy Phone: 904-756-5744

Permit #: 13-2253 Email: JM-Properties @ Comcast.net

CHECK ALL THAT APPLY:

- RESIDENTIAL COMMERCIAL BUILDING MECHANICAL
- ELECTRICAL PLUMBING ZONING FIRE

PLEASE NOTE THE FOLLOWING:

1. Two (2) sets of documents are required for submittal.
2. Complete responses are required. Partial submittals will not be accepted.

Applicant Comments: Correction

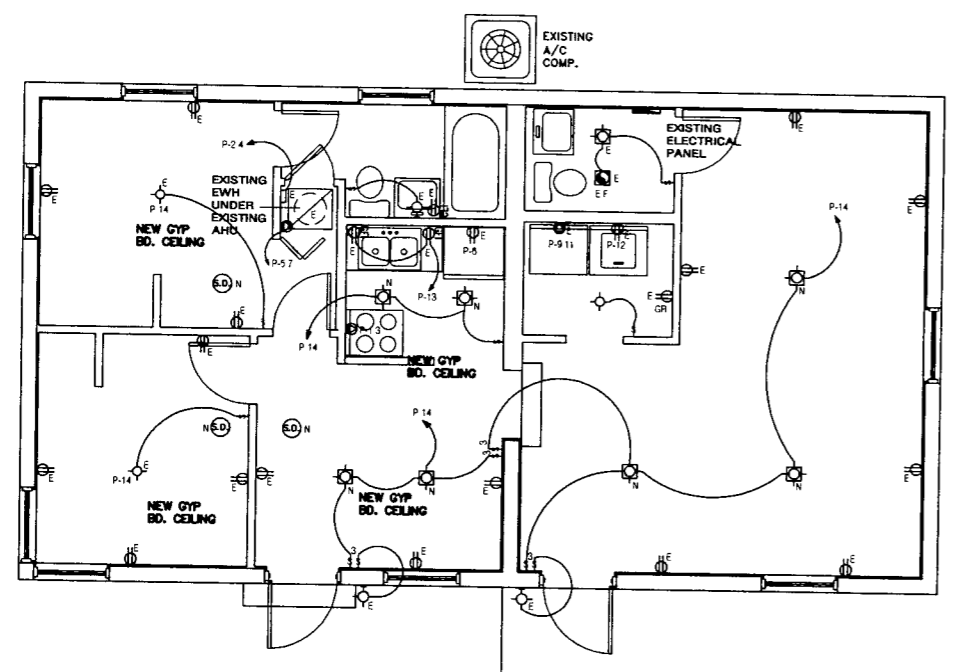
REVISIONS	DATE	BY
1	11/04/2013	GCH
2	03/24/2014	GCH
-	-	-
-	-	-
-	-	-

INTERIOR RENOVATION OF EXISTING BUILDING FOR:
721 N Dixie LLC.
 215 S. FEDERAL HWY LAKE WORTH, FLORIDA

Date SEPT 04/2013
 Scale AS SHOWN
 Drawn GCH

ARCHO Corporation
 ARCHITECTS
 8024 BOCA RIO DRIVE
 BOCA RATON, FLORIDA 33433
 PH. 561.245.5228 FAX 561.807.7187

SEPT 04/2013
 JAMES R. DIEHL
 ARCHITECT
 File: R-13-053
 Project: R-13-053
 Sheet:

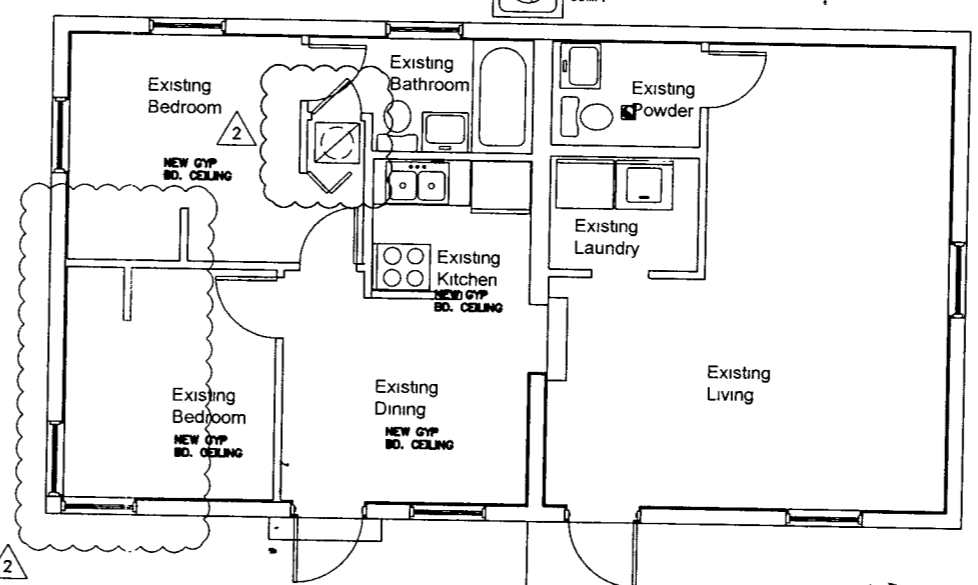


- ### ELECTRICAL NOTES & LEGENDS
- PADBLE FANS TO BE WIRED WITH 3 #14 CU
 - ⊕ TYPICAL OUTLET
 - ⊕ GFI GROUND FAULT OUTLET
 - ⊖ DEDICATED OUTLET
 - ⊕ TYPICAL SWITCH
 - ⊕ 3-WAY SWITCH
 - ⊕ TELEVISION JACK
 - ⊕ TELEPHONE JACK
 - ⊕ A/C DIFUSSER
 - ⊕ ELECTRICAL PANEL LOCATION
 - ⊕ TYPICAL LIGHT FIXTURE
 - ⊕ LIGHT FIXTURE WALL MOUNTED
 - ⊕ RECESSED VAPOR PROOF FIXTURE
 - ⊕ RECESSED LIGHT FIXTURE (HIGH HAT)
 - ⊕ SMOKE DETECTOR
 - ⊕ FLOOD LIGHT FIXTURE
 - ⊕ JUNCTION BOX
 - ⊕ PADBLE FAN JUNCTION BOX

- NOTE:** COMPLIANCE WITH NEC 2008 210.52 (E) (1) RECEPTACLE OUTLET FRONT AND BACK OF DWELLING (GFC)
- NOTE:** ARC-FAULT ALL CIRCUITS SHALL COMPLY WITH NEC 2008 210.12 (NEW CIRCUITS ONLY)
- NOTE:** CARBON MONOXIDE ALARM SHALL COMPLY WITH NEC 2008 ART R315.1 AND SMOKE ALARM WITH ART R314.1 (TO BE INSTALLED WITHIN 10 FEET OF ALL ROOMS USED FOR SLEEPING)
- NOTE:** COMPLIANCE WITH NEC 2008 406.11 TAMPER-RESISTANT RECEPTACLES (NEW CIRCUITS ONLY)
- THE BATHROOM RECEPTACLE CIRCUIT SHALL BE #12 WIRE, 20 AMP PROTECTED AND SHALL SUPPLY NO OTHER OUTLETS PER NEC 210.11 RECEPTACLES SHALL BE SPACED ACCORDING TO NEC 210.52
- ELECTRICAL NOTES**
- ALL ELECTRICAL INSTALLATION IS EXISTING UNLESS NOTED OTHERWISE
- ELECTRICAL PANEL TO BE REPLACED WITH NEW, CIRCUITS TO REMAIN AS IS ADD NEW LIGHTS TO NEW 15 AMP CIRCUIT WITH 14 WIRE
- "RE" - DENOTES RELOCATED ELECTRICAL FIXTURE
- "N" - DENOTES NEW ELECTRICAL FIXTURE
- "E" - DENOTES EXISTING ELECTRICAL FIXTURE
- MECHANICAL NOTE:** EXISTING A/C TO REMAIN AS IS NO WORK TO BE DONE

ELECTRICAL PLAN

SCALE 1/16" = 1'-0"



FLOOR PLAN

SCALE 1/16" = 1'-0"

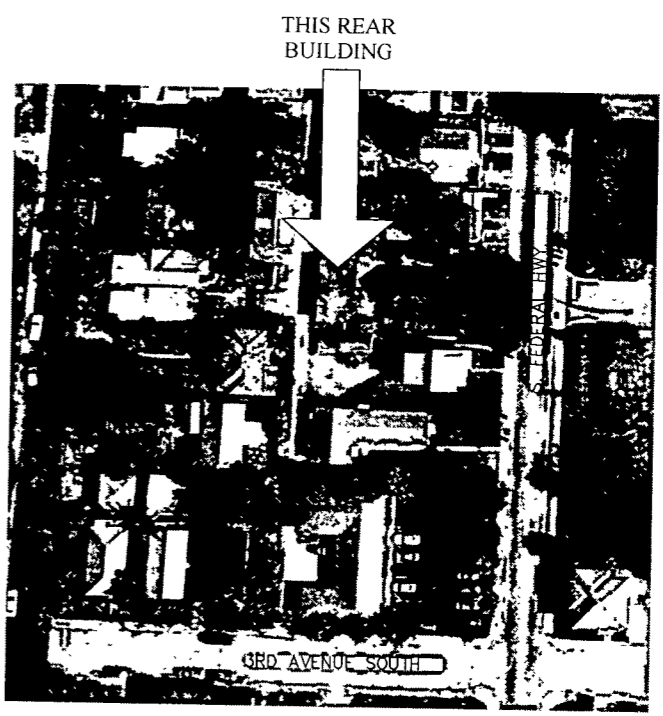
LOAD CALCULATION

EXISTING AREA UNDER A/C	883	
TOTAL GENERAL LIGHTING LOAD @ 3VA/SQFT	883	SOFT
EXISTING LOAD	VA/VA	VA
1 Range	5,000	0 000
1 Refrigerator	1,000	1 000
1 Washer	1,200	1 500
1 Dryer	5,000	5 000
3 small appliance circuit	1,200	1 500
1 Bath GFI Cr	1 500	1 500
NEW LOAD		
7 Recessed lights @ 7E	7E	525
TOTAL GENERAL LOAD (VA)		19 874
FIRST 10,000 VA @ 100%		10,000
BALANCE @ 40%		3,870
TOTAL		13 870
A/C LOAD @ 100%		
COOLING	7,500	7,500
HEATING	7,500	7,500
TOTAL LOAD		21 370 VA
AMPS		85.0
EXISTING SERVICE 150 AMPS		
120/240 3-PHASE 3W		

EXISTING BUILDING: 1-STORY RESIDENCE
CODE IN EFFECT: FLORIDA BUILDING CODE 2010
LEVEL OF ALTERATION: III
TYPE OF CONSTRUCTION: I
OCCUPANCY: GROUP R2
REMODELING TO EXISTING RESIDENCE IS DESIGNED AS ENCLOSED
SCOPE OF WORK: REPAIR AND RENOVATE EXISTING INTERIOR OF REAR BUILDING OF THE PROPERTY MAIN RESIDENCE TO REMAIN AS IS

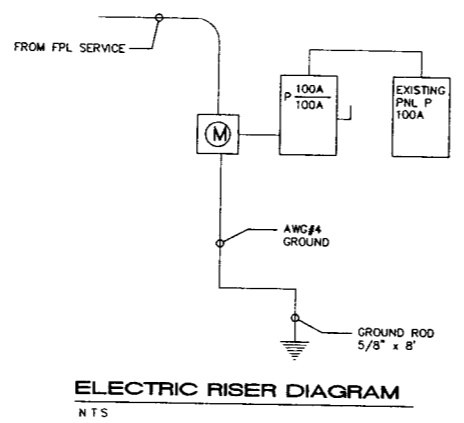
- ### DEMOLITION NOTES FOR REMOVAL
- ALL WINDOWS AND EXTERIOR DOORS NOT NOTED ON PLANS ARE EXISTING AND SHALL REMAIN AS IS
 - ANY AREA OF UNIT THAT IS NOT NOTED OR CALLED OUT IS TO REMAIN AS IS
 - ALL EXISTING PLUMBING SHALL REMAIN AS IS UNLESS NOTED, OR SHOWN
 - ALL EXISTING ELECTRIC SHALL REMAIN AS IS UNLESS NOTED, OR SHOWN
 - ANY EXISTING ELECTRICAL TO BE REMOVED SHALL HAVE ALL REQUIRED WIRES CAPPED FOR SAFETY
 - ANY EXISTING PLUMBING TO BE REMOVED SHALL HAVE ALL REMAINING PIPES CAPPED

- NOTES:**
- REMOVE EXISTING FLOORING IN ALL ROOMS AND INSTALL NEW FLOOR FINISH--TO BE SELECTED BY OWNER.
 - REPLACE DAMAGED GYPSUM BOARD AT WALLS REPLACE WITH NEW 1/2" GYP. BOARD
 - REMOVE DAMAGED GYPSUM BOARD CEILING AND REPLACE WITH NEW 5/8" GYPSUM BOARD WHERE INDICATED ATTACH TO EXISTING RAFTERS
 - INSTALL NEW R-19 BATT INSULATION AT CEILING WHERE GYPSUM BOARD IS BEEN REPLACED



SITE PLAN

SCALE=NTS



ELECTRIC RISER DIAGRAM
NTS

EXISTING PANEL "P"

NO	POLE/TRIP	KVA	DESCRIPTION	WIRE	NO	POLE/TRIP	KVA	DESCRIPTION	WIRE
1	2/50		RANGE	6	2	2/30		AHU	8
3					4				
5	2/40		WATER HEATER	8	6	1/20		REFRIGERATOR	12
7					8	1/20		GENERAL LIGHTING	12
9	2/40		DRYER	8	10	1/20		RECEPTACLES	12
11					12	1/20		WASHER	12
13	1/20		SMALL APPLIANCES	12	14	1/15	10	NEW LIGHTS	14

TOTAL ---
 TOTAL --- KW
 FIRST 10 @ 100% --- KW
 REMAINDER @ 40% --- KW
 TOTAL --- KW
 --- KW/240V = --- AMPS - SEE LOAD CALCULATIONS

Office Copy AS Built Job 03/26/14

 #13-2253

City of Lake Worth
Building Department
1900 2nd Ave N
Lake Worth, FL 33461

Taw LT 12 BLK 93

Inspection Request (561) 586-1691 Main Office (561) 586-1647

Application Number 13-00002253
Revision number 2 Date 1/14/15
Property Address 215 S FEDERAL HWY
PROPERTY CONTROL NUMBER: 38-43-44-21-15-093-0120
Application type description RESIDENTIAL REMODEL
Subdivision Name
Property Use SINGLE FAMILY
Application valuation 14000

Description of Work
RPR DMGED DRY WALL RPLCE KITCH CAB UPGRADE ELEC PA

Property owner DEUTSCHE BANK NATIONAL TR CO
Owner address C/O AMERICAN HOME MRTG
3 ADA
IRVINE CA 926182322
()

Contractor JM PROPERTIES OF WPB INC

Construction Type Structure Information 000 000
Occupancy Type I-B NONCOMBUSTIBLE 2004
Flood Zone APTS, DORMS
A

Permit COMMERCIAL BUILDING
Additional desc RPAR DRYWALL CAB UPGRADE ELEC
Permit pin number 512137
Issue Date 11/21/13 Valuation 14000
Expiration Date 3/15/15

Permit RESIDENTIAL ELECTRIC
Additional desc ELEC UPGRADE
Permit pin number 512152
Sub Contractor STONE ELECTRIC & GENERAL CONTR
Issue Date 11/21/13 Valuation 0
Expiration Date 3/15/15

Permit RESIDENTIAL PLUMBING
Additional desc PLUMBING FOR REMODEL
Permit pin number 512384
Sub Contractor BLESSING PLUMBING INC
Issue Date 11/21/13 Valuation 0
Expiration Date 3/15/15

Special Notes and Comments
PLEASE BE ADVISED: City of Lake Worth's
Public Services Department requires all
open construction containers within City

Inspections must be scheduled by 4:00 pm the previous day.
Building Inspections 586-1691. Fire Inspections 561-233-0050
Landscape Inspections (561) 586-1677
Public Services Inspections (561) 586-1720
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Inspection Request (561) 586-1691 Main Office (561) 586-1647

Application Number 13-00002253
Revision number 2

Page 2
Date 1/14/15

Special Notes and Comments

limits to be provided by CITY OF LAKE WORTH PUBLIC SERVICES. Please contact PUBLIC SERVICES AT (561)533-7344. Failure to comply could result in fines and fees.

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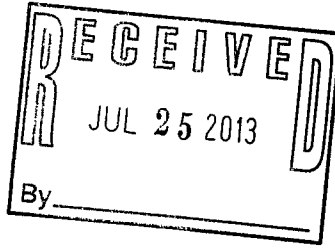
City of Lake Worth
 Building Department
 1900 2nd Ave N
 Lake Worth, FL 33461
 Inspection Request (561) 586-1691 Main Office (561) 586-1647

Application Number	13-00002253	Page	3
Revision number	2	Date	1/14/15
Property Address	215 S FEDERAL HWY		
PROPERTY CONTROL NUMBER:	38-43-44-21-15-093-0120		
Application description	RESIDENTIAL REMODEL		
Subdivision Name			
Property Use	SINGLE FAMILY		

Required Inspections

Seq	Insp Code	Description	Initials	Date
		Permit type COMMERCIAL BUILDING		
10	704	PL 1ST ROUGH		
10	106	BD FRAMING		
10	103	BD DRYWALL/FASTENING	PAP AP	12/04/13
10	107	BD INSULATION	PAP AP	12/10/13
10	203	EL FINAL	PAP AP	12/04/13
10	703	PL FINAL		
10	209	EL ROUGH		
10-50	210	EL EARLY POWER		
10	104	BD FINAL		
			LAM AP	1/14/15

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BUILDING DIVISION
 DEPARTMENT FOR COMMUNITY SUSTAINABILITY
 CITY OF LAKE WORTH
 1900 2ND AVENUE NORTH
 LAKE WORTH, FL 33461
 561.586.1647

PERMIT APPLICATION

MASTER PERMIT NUMBER

PERMIT NUMBER (FOR OFFICE USE ONLY)
13-2253
 CONTRACTOR

WORK LOCATION

ADDRESS 215 S. Federal Hwy

FLOOR/BAY/SUITE/APT # Cottage in the back

SUBDIVISION LAKE WORTH TOWN BLOCK 93 LOT 12

PARCEL ID# 38-43-44-21-15-093-0120

QUALIFIER NAME Darma Sainmervil

COMPANY NAME JM Properties of W. Palm Beach, Inc.

ADDRESS 10606 Versailles Boulevard

CITY Wellington STATE FL ZIP 33449

STATE LIC. OR COMPETENCY # CBC1251448

PHONE# 561-756-5744 CELL# 561-804-1248

E-MAIL Jm-Properties@comcast.net

PERMIT TYPE

STRUCTURE DEMOLITION ELECTRICAL

ADDITION RELOCATION MECHANICAL

ALTERATION ROOFING PLUMBING

REPAIR FENCE POOL

FIRE SPRINKLER SIGN IRRIGATION

FIRE ALARM SIDEWALK BACKFLOW

DRIVEWAY GAS CHANGE OF CONTRACTOR

APPROACH FUEL GENERATOR

RESIDENTIAL COMMERCIAL DOOR

WINDOW SHUTTER OTHER

OWNER OF RECORD

NAME LAST 721 N. Dixie LLC FIRST MI

ADDRESS 215 S. Federal HWY

CITY Lake Worth STATE FL ZIP

PHONE 561-727-0084 CELL

TENANT NAME

DESCRIBE PROJECT IN DETAIL

Repair Damages Dry Wall (walls & Ceils) Replace Kitchen Cabinet
Cabinet - upgrade electrical Panel

VALUE \$ 4,000.00 SQUARE FOOTAGE 1200 CHANGE OF OCCUPANCY OR USE YES NO

PRIMARY PERMIT FEES SHALL INCLUDE THE FEES FOR SUBPERMITS, PROVIDED THAT ALL APPLICABLE SUBCONTRACTOR QUALIFIER SIGNATURES ARE ON THE APPLICATION AND PLANS INCLUDE THE DETAILS OF ALL SUBCONTRACTOR WORK. FAILURE TO INCLUDE THE REQUIRED INFORMATION AT THE TIME OF APPLICATION SHALL REQUIRE THAT A SEPARATE PERMIT BE ISSUED WITH APPROPRIATE FEES BEING CHARGED TO THE APPLICANT. CURRENT REGISTRATION REQUIRED AT TIME OF SUBMITTAL.

Building Contractor: <u>Jm Properties</u>	DATE: <u>7/25/13</u>	STATE LIC./CERT. OF COMPETENCY: <u>CBC1251448</u>	BUILDING PERMIT #
Qualifier/Agent Signature: <u>[Signature]</u>			
Electrical Contractor: <u>JOHNE ELECTRIC</u>	DATE: <u>7/25/13</u>	STATE LIC./CERT. OF COMPETENCY: <u>EC-13003685</u>	ELECTRICAL PERMIT #
Qualifier/Agent Signature: <u>[Signature]</u>			
Mechanical Contractor: _____	DATE: _____	STATE LIC./CERT. OF COMPETENCY: _____	MECHANICAL PERMIT #
Qualifier/Agent Signature: _____			
Plumbing Contractor: _____	DATE: _____	STATE LIC./CERT. OF COMPETENCY: _____	PLUMBING PERMIT #
Qualifier/Agent Signature: _____			
Roofing Contractor: _____	DATE: _____	STATE LIC./CERT. OF COMPETENCY: _____	ROOFING PERMIT #
Qualifier/Agent Signature: _____			

NOTICE TO PROPERTY OWNERS

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.

BEFORE ANY WORK IS DONE BY YOU OR YOUR CONTRACTOR, IMMEDIATELY FILE FOR AND RECORD A NOTICE OF COMMENCEMENT WITH THE OFFICE OF THE CLERK OF THE CIRCUIT COURT. THIS STEP IS REQUIRED BY THE FLORIDA CONSTRUCTION LIEN LAW.

IF YOU HAVE HIRED A CONTRACTOR TO DO THE WORK, MAKE SURE THAT THE CONTRACTOR OBTAINS THE PERMIT. THE CONTRACTOR'S SIGNATURE INDICATES HE OR SHE IS RESPONSIBLE FOR THE WORK, AND IF THE WORK IS NOT PERFORMED ACCORDING TO CODE, THE CITY CAN REQUIRE CORRECTIVE ACTION BY THE PARTY WHO OBTAINED THE PERMIT. FURTHERMORE, IF THE CONTRACTOR IS NOT LICENSED, YOU CAN BE IN VIOLATION OF STATE LAW BY ALLOWING AN UNLICENSED PERSON TO DO THIS WORK.

SINCE YOU OR YOUR CONTRACTOR HAVE APPLIED FOR A BUILDING PERMIT FOR WORK TO BE DONE ON PROPERTY YOU OWN, YOU SHOULD BE AWARE THAT: ANY PERSON WHO FURNISHED LABOR (A CONTRACTOR, SUBCONTRACTOR OR LABORER) OR SUPPLIES MATERIALS FOR YOUR HOME REPAIR, IMPROVEMENT OR NEW CONSTRUCTION MAY BE ABLE TO FILE A CLAIM (CALLED A LIEN) AGAINST YOU IF HE HAS NOT BEEN PAID BY YOUR CONTRACTOR OR YOU. YOU ARE LIABLE TO SUBCONTRACTORS OR SUPPLIERS IF THEY ARE NOT PAID BY YOUR CONTRACTOR OR YOURSELF.

AT THE COMPLETION OF WORK, REQUIRE THE CONTRACTOR TO GIVE YOU A SWORN NOTARIZED STATEMENT INDICATING ALL BILLS FOR LABOR AND MATERIALS HAVE BEEN PAID OR A LIST NAMING THOSE SUPPLYING LABOR AND MATERIALS THAT HAVE NOT BEEN PAID. ASK FOR THE AFFIDAVIT BEFORE MAKING THE LAST PAYMENT

UNLICENSED CONTRACTORS: NO PERSON SHALL ENGAGE IN BUSINESS OR ACT IN THE CAPACITY OF A CONTRACTOR WITHOUT BEING DULY REGISTERED OR CERTIFIED. ANY PERSON WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR OF THE FIRST DEGREE AND MAY BE PUNISHED BY A PRISON TERM NOT EXCEEDING ONE (1) YEAR AND/OR A FINE NOT TO EXCEED \$1,000 (SECTION 489.127 FLORIDA STATUTES).

FEE SIMPLE TITLEHOLDER (if other than owner) Name _____ Address _____ City _____ State _____ Zip _____		MORTGAGE LENDER Name _____ Address _____ City _____ State _____ Zip _____	
BONDING COMPANY Name _____ Address _____ City _____ State _____ Zip _____		ARCHITECT/ENGINEER/RESIDENTIAL PLANS CERTIFIER BUILDING CONSTRUCTION IN THE CITY OF LAKE WORTH. Name _____ Signature _____ Address _____ City _____ Phone () _____ Cell () _____ State _____ Fax () _____ Zip _____	

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATIONS AS INDICATED. I CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND THAT ALL WORK WILL BE PERFORMED TO MEET THE STANDARDS OF ALL LAWS REGULATING CONSTRUCTION IN THIS JURISDICTION. I UNDERSTAND THAT A SEPARATE PERMIT MUST BE ACQUIRED FOR ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, ROOFING AND AIR CONDITIONERS, ETC.

OWNER'S AFFIDAVIT: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION & ZONING.

ALL SIGNATURES MUST BE ORIGINAL

Owner (Signature) <u>David Staple</u> Print Name <u>DAVID STAPLE</u> STATE OF <u>FL</u> COUNTY OF <u>Palm Beach</u> Sworn to (or affirmed) and subscribed to before me this <u>27</u> day of <u>July</u> 20 <u>13</u> by Owner or Agent, who has produced the following identification _____ or who is personally known to me.	Contractor/Agent (Signature) <u>Danna Spinmez</u> Print Name <u>DANNA SPINMEZ</u> STATE OF <u>FL</u> COUNTY OF <u>Palm Beach</u> Sworn to (or affirmed) and subscribed to before me this <u>27</u> day of <u>July</u> 20 <u>13</u> by Contractor, who has produced the following identification _____ or who is personally known to me.
--	---

Signature of Notary _____
 Print Name of Notary _____

NOTARY PUBLIC STATE OF FLORIDA
Edese S. Simon
 Commission # EE018426
 Expires: AUG. 18, 2014
 BONDED THRU ATLANTIC BONDING CO., INC.

Signature of Notary _____

NOTARY PUBLIC STATE OF FLORIDA
Edese S. Simon
 Commission # EE018426
 Expires: AUG. 18, 2014
 BONDED THRU ATLANTIC BONDING CO., INC.



CFN 20130217667
OR BK 26020 PG 0748
RECORDED 05/15/2013 09:47:53
Palm Beach County, Florida
Sharon R. Bock, CLERK & COMPTROLLER
Pg 0748; (1pg)

PERMIT NUMBER: _____

NOTICE OF COMMENCEMENT

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.

1. DESCRIPTION OF PROPERTY (Legal description of the property & street address, if available) TAX FOLIO NO.: 3843442115 093
SUBDIVISION TOWN OF LAKE WORTH BLOCK 93 TRACT _____ LOT 12 BLDG _____ UNIT 0120

2. GENERAL DESCRIPTION OF IMPROVEMENT: GENERAL IMPROVEMENT

3. OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:

a. Name and address: 721 N. DIXIE LLC 2155 FED HWY LAKE WORTH 33467

b. Interest in property: Fee Simple

c. Name and address of fee simple titleholder (if different from Owner listed above): SAME

4. a. CONTRACTOR'S NAME: JM Properties of W. Palm Beach Inc.

Contractor's address: 10606 VERSAILLES BLVD WELLINGTON FL 33449

b. Phone number: 801-756-5744

5. SURETY (if applicable, a copy of the payment bond is attached):

a. Name and address: _____

b. Phone number: _____

c. Amount of bond: \$ _____

6. a. LENDER'S NAME: NA

Lender's address: _____

b. Phone number: _____

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

a. Name and address: _____

b. Phone numbers of designated persons: NA

8. a. 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.

b. Phone number of person or entity designated by Owner: _____

9. Expiration date of notice of commencement (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): _____, 20____

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.

Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated therein are true to the best of my knowledge and belief.

[Signature]
(Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager)

DAVID STAPF
(Print Name and Provide Signatory's Title/Office)

State of FL
County of Palm Beach

The foregoing instrument was acknowledged before me this 10 day of May, 2013

by DAVID STAPF, as MANAGER (type of authority, ...e.g. officer, trustee, attorney in fact)

for _____ (name of party on behalf of whom instrument was executed)

Personally Known or Produced Identification _____

Type of Identification Produced _____

NOTARY PUBLIC-STATE OF FLORIDA
Edese S. Simon
Commission # EE018426
Expires AUG. 18, 2014
BONDED THRU ATLANTIC BONDING CO., INC.

[Signature]
(Signature of Notary Public)

(Print, Type, or Stamp Commissioned Name of Notary Public)



BUILDING DIVISION
 DEPARTMENT FOR COMMUNITY SUSTAINABILITY
 CITY OF LAKE WORTH
 1900 2ND AVENUE NORTH
 LAKE WORTH, FL 33461
 561.586.1647

PERMIT APPLICATION

MASTER PERMIT NUMBER
2013-2253

PERMIT NUMBER (FOR OFFICE USE ONLY)

WORK LOCATION
 ADDRESS 2155. Fed. Hwy
 FLOOR/BAY/SUITE/APT # Cottage Park
 SUBDIVISION _____ BLOCK _____ LOT _____
 PARCEL ID# 38-43-44-

CONTRACTOR
 QUALIFIER NAME PHANOND JOSEPH
 COMPANY NAME BLESSING PLUMBING
 ADDRESS 523 NW 50 PL
 CITY Boca Raton STATE FL ZIP 33431
 STATE LIC. OR COMPETENCY # CPC 1427948
 PHONE# 813-05-0289 CELL# _____
 E-MAIL BlessingPlumbing@gmail.com

- PERMIT TYPE
- STRUCTURE
 - ADDITION
 - ALTERATION
 - REPAIR
 - FIRE SPRINKLER
 - FIRE ALARM
 - DRIVEWAY
 - APPROACH
 - RESIDENTIAL
 - WINDOW
 - DEMOLITION
 - RELOCATION
 - ROOFING
 - FENCE
 - SIGN
 - SIDEWALK
 - GAS
 - FUEL
 - COMMERCIAL
 - SHUTTER
 - ELECTRICAL
 - MECHANICAL
 - PLUMBING
 - POOL
 - IRRIGATION
 - BACKFLOW
 - CHANGE OF CONTRACTOR
 - GENERATOR
 - DOOR
 - OTHER

OWNER OF RECORD
 NAME LAST _____ FIRST _____ MI _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE _____ CELL _____
 TENANT NAME _____

INCLUDED in MASTER fm.
DESCRIBE PROJECT IN DETAIL
 VALUE \$ 1,200 SQUARE FOOTAGE _____ CHANGE OF OCCUPANCY OR USE YES NO

PRIMARY PERMIT FEES SHALL INCLUDE THE FEES FOR SUBPERMITS, PROVIDED THAT ALL APPLICABLE SUBCONTRACTOR QUALIFIER SIGNATURES ARE ON THE APPLICATION AND PLANS INCLUDE THE DETAILS OF ALL SUBCONTRACTOR WORK. FAILURE TO INCLUDE THE REQUIRED INFORMATION AT THE TIME OF APPLICATION SHALL REQUIRE THAT A SEPARATE PERMIT BE ISSUED WITH APPROPRIATE FEES BEING CHARGED TO THE APPLICANT. CURRENT REGISTRATION REQUIRED AT TIME OF SUBMITTAL.

Building Contractor: Qualifier/Agent Signature _____	DATE _____	STATE LIC./CERT. OF COMPETENCY _____	BUILDING PERMIT # _____
Electrical Contractor: Qualifier/Agent Signature _____	DATE _____	STATE LIC./CERT. OF COMPETENCY _____	ELECTRICAL PERMIT # _____
Mechanical Contractor: Qualifier/Agent Signature _____	DATE _____	STATE LIC./CERT. OF COMPETENCY _____	MECHANICAL PERMIT # _____
Plumbing Contractor: Qualifier/Agent Signature <u>Blessing Plumbing</u>	DATE <u>1/26/13</u>	STATE LIC./CERT. OF COMPETENCY <u>CPC 1427948</u>	PLUMBING PERMIT # _____
Roofing Contractor: Qualifier/Agent Signature _____	DATE _____	STATE LIC./CERT. OF COMPETENCY _____	ROOFING PERMIT # _____

NOTICE TO PROPERTY OWNERS

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.

BEFORE ANY WORK IS DONE BY YOU OR YOUR CONTRACTOR, IMMEDIATELY FILE FOR AND RECORD A NOTICE OF COMMENCEMENT WITH THE OFFICE OF THE CLERK OF THE CIRCUIT COURT. THIS STEP IS REQUIRED BY THE FLORIDA CONSTRUCTION LIEN LAW.

IF YOU HAVE HIRED A CONTRACTOR TO DO THE WORK, MAKE SURE THAT THE CONTRACTOR OBTAINS THE PERMIT. THE CONTRACTOR'S SIGNATURE INDICATES HE OR SHE IS RESPONSIBLE FOR THE WORK, AND IF THE WORK IS NOT PERFORMED ACCORDING TO CODE, THE CITY CAN REQUIRE CORRECTIVE ACTION BY THE PARTY WHO OBTAINED THE PERMIT. FURTHERMORE, IF THE CONTRACTOR IS NOT LICENSED, YOU CAN BE IN VIOLATION OF STATE LAW BY ALLOWING AN UNLICENSED PERSON TO DO THIS WORK.

SINCE YOU OR YOUR CONTRACTOR HAVE APPLIED FOR A BUILDING PERMIT FOR WORK TO BE DONE ON PROPERTY YOU OWN, YOU SHOULD BE AWARE THAT: ANY PERSON WHO FURNISHED LABOR (A CONTRACTOR, SUBCONTRACTOR OR LABORER) OR SUPPLIES MATERIALS FOR YOUR HOME REPAIR, IMPROVEMENT OR NEW CONSTRUCTION MAY BE ABLE TO FILE A CLAIM (CALLED A LIEN) AGAINST YOU IF HE HAS NOT BEEN PAID BY YOUR CONTRACTOR OR YOU. YOU ARE LIABLE TO SUBCONTRACTORS OR SUPPLIERS IF THEY ARE NOT PAID BY YOUR CONTRACTOR OR YOURSELF.

AT THE COMPLETION OF WORK, REQUIRE THE CONTRACTOR TO GIVE YOU A SWORN NOTARIZED STATEMENT INDICATING ALL BILLS FOR LABOR AND MATERIALS HAVE BEEN PAID OR A LIST NAMING THOSE SUPPLYING LABOR AND MATERIALS THAT HAVE NOT BEEN PAID. ASK FOR THE AFFIDAVIT BEFORE MAKING THE LAST PAYMENT.

UNLICENSED CONTRACTORS: NO PERSON SHALL ENGAGE IN BUSINESS OR ACT IN THE CAPACITY OF A CONTRACTOR WITHOUT BEING DULY REGISTERED OR CERTIFIED. ANY PERSON WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR OF THE FIRST DEGREE AND MAY BE PUNISHED BY A PRISON TERM NOT EXCEEDING ONE (1) YEAR AND/OR A FINE NOT TO EXCEED \$1,000 (SECTION 489.127 FLORIDA STATUTES).

FEE SIMPLE TITLEHOLDER (if other than owner) Name _____ Address _____ City _____ State _____ Zip _____		MORTGAGE LENDER Name _____ Address _____ City _____ State _____ Zip _____	
BONDING COMPANY Name _____ Address _____ City _____ State _____ Zip _____		ARCHITECT/ENGINEER/RESIDENTIAL PLANS CERTIFIER BUILDING CONSTRUCTION IN THE CITY OF LAKE WORTH. Name _____ Signature _____ Address _____ City _____ State _____ Zip _____ Phone () _____ Cell () _____ Fax () _____	

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATIONS AS INDICATED. I CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND THAT ALL WORK WILL BE PERFORMED TO MEET THE STANDARDS OF ALL LAWS REGULATING CONSTRUCTION IN THIS JURISDICTION. I UNDERSTAND THAT A SEPARATE PERMIT MUST BE ACQUIRED FOR ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, ROOFING AND AIR CONDITIONERS, ETC.

OWNER'S AFFIDAVIT: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION & ZONING.

ALL SIGNATURES MUST BE ORIGINAL

Owner (Signature) <i>[Handwritten Signature]</i> Print Name _____ STATE OF _____ COUNTY OF _____ Sworn to (or affirmed) and subscribed to before me this _____ day of _____ 20____ by Owner or Agent, who has produced the following identification _____ or who is personally known to me. Signature of Notary _____ Print Name of Notary _____	Contractor/Agent (Signature) <i>[Handwritten Signature]</i> Print Name PHANOR JOSEPH STATE OF FLA COUNTY OF DALLAS Sworn to (or affirmed) and subscribed to before me this 25 day of July 20 13 by Contractor, who has produced the following identification <i>[Handwritten Signature]</i> or who is personally known to me. Signature of Notary <i>[Handwritten Signature]</i>
--	---

REVIEW

PLAN REVIEW COMMENT SHEET
for

Address: 215 S. FEDERAL Hwy

Date: 9.25.2013

Project Name:

Permit #:

Building Zoning Electrical Plumbing Mechanical Fire

The following items are required before further plan review:

① PLUMBING PERMIT APPLICATION HAS NO COST VALUE

② NO ELECTRICAL PERMIT APPLICATION

③ CEILING INSULATION SHALL MEET THE REQUIREMENT OF TABLE 402.1.1.3 OF THE FLORIDA ENERGY CONSERVATION CODE, 2010 EDITION

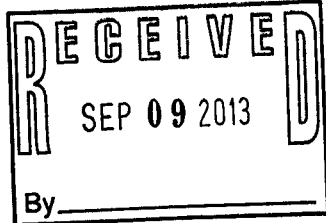
④ PROPOSED "NEW" ELECTRICAL PANEL AND "NEW" FIXTURES. SUPPLY ALL APPROPRIATE CALCULATIONS AND COMPUTATIONS. PROVIDE A PANEL SCHEDULE AND A SINGLE LINE DRAWING FOR SERVICE/FEEDERS

Plan Review Date: 9.25.2013 Plan Reviewer: D. MCINTOSH

215 S. FEDERAL Highway

- ① PROVIDE SCOPE OF WORK FOR PROJECT IN ACCORDANCE WITH SECTION 107.2.1 OF THE FLORIDA BUILDING CODE, 2010 EDITION
- ② PROVIDE VALUE OF PROPOSED PROJECT.
- ③ SUPPLY DRAWINGS, DETAILS, CALCULATIONS, COMPUTATIONS AND ALL MANUFACTURERS' SPECIFICATIONS FOR PROPOSED PROJECT.

D. MCINTOSH, MCP
PLANS EXAMINER



BUILDING DIVISION
DEPARTMENT FOR COMMUNITY SUSTAINABILITY
CITY OF LAKE WORTH
1900 2ND AVENUE NORTH
LAKE WORTH, FL 33461
561.586.1647

PLAN REVIEW CRITIQUE RESPONSE

IF YOU RECEIVE PLAN REVIEW COMMENTS, YOU MUST RETURN THE ORIGINAL CONSTRUCTION DOCUMENT ALONG WITH THE AMMENDED/CORRECTED CONSTRUCTION DOCUMENT.

This form is to be used for documents being submitted in response to a plan review critique. It is NOT to be used for submitting revisions to an issued permit.

Applicant: Jim Properties JWPA Date: 9-8-13
Job Address: 215 S. Federal Hwy Phone: 561-756-5744
Permit #: 13-2753 Email: Jim Properties @ Amcast-wr

CHECK ALL THAT APPLY:

- | | | | |
|---|--|--|-------------------------------------|
| <input checked="" type="checkbox"/> RESIDENTIAL | <input type="checkbox"/> COMMERCIAL | <input checked="" type="checkbox"/> BUILDING | <input type="checkbox"/> MECHANICAL |
| <input checked="" type="checkbox"/> ELECTRICAL | <input checked="" type="checkbox"/> PLUMBING | <input type="checkbox"/> ZONING | <input type="checkbox"/> FIRE |

PLEASE NOTE THE FOLLOWING:

- Two (2) sets of documents are required for submittal.
- Complete responses are required. Partial submittals will not be accepted.

Applicant Comments: Correction to answer previous comments,
DLU



TLW BR03
412

(H) (B)

BUILDING DIVISION
DEPARTMENT FOR COMMUNITY SUSTAINABILITY
CITY OF LAKE WORTH
1900 2ND AVENUE NORTH
LAKE WORTH, FL 33461
561.586.1647

REVISION SUBMITTAL FORM

Two (2) sets of documents are required for submittal

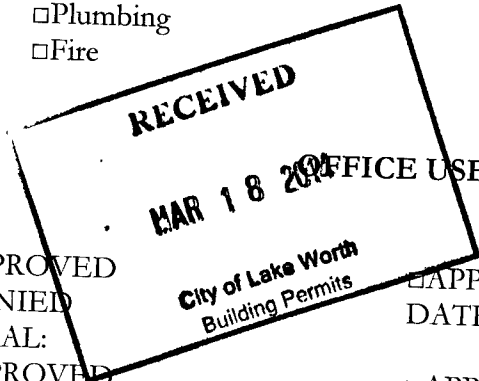
Applicant: Jim Probert Date: 0328-14 Phone #: 201.700.5754

Job Address: 215 S. Federal Hwy Permit #: 13-1537

Description: Check all that apply

- Residential Commercial
- Building Mechanical
- Electrical Plumbing
- Zoning Fire

Brief description: Door missing window from the original plan.



OFFICE USE / APPROVALS ONLY

BUILDING:

- APPROVED
- DENIED

APPROVED W/ COMMENTS
DATE: _____ BY: _____

MECHANICAL:

- APPROVED
- DENIED

APPROVED W/ COMMENTS
DATE: _____ BY: _____

ELECTRICAL:

- APPROVED
- DENIED

APPROVED W/ COMMENTS
DATE: _____ BY: _____

PLUMBING:

- APPROVED
- DENIED

APPROVED W/ COMMENTS
DATE: _____ BY: _____

ZONING:

- APPROVED
- DENIED

APPROVED W/ COMMENTS
DATE: _____ BY: _____

FIRE:



- APPROVED
- DENIED

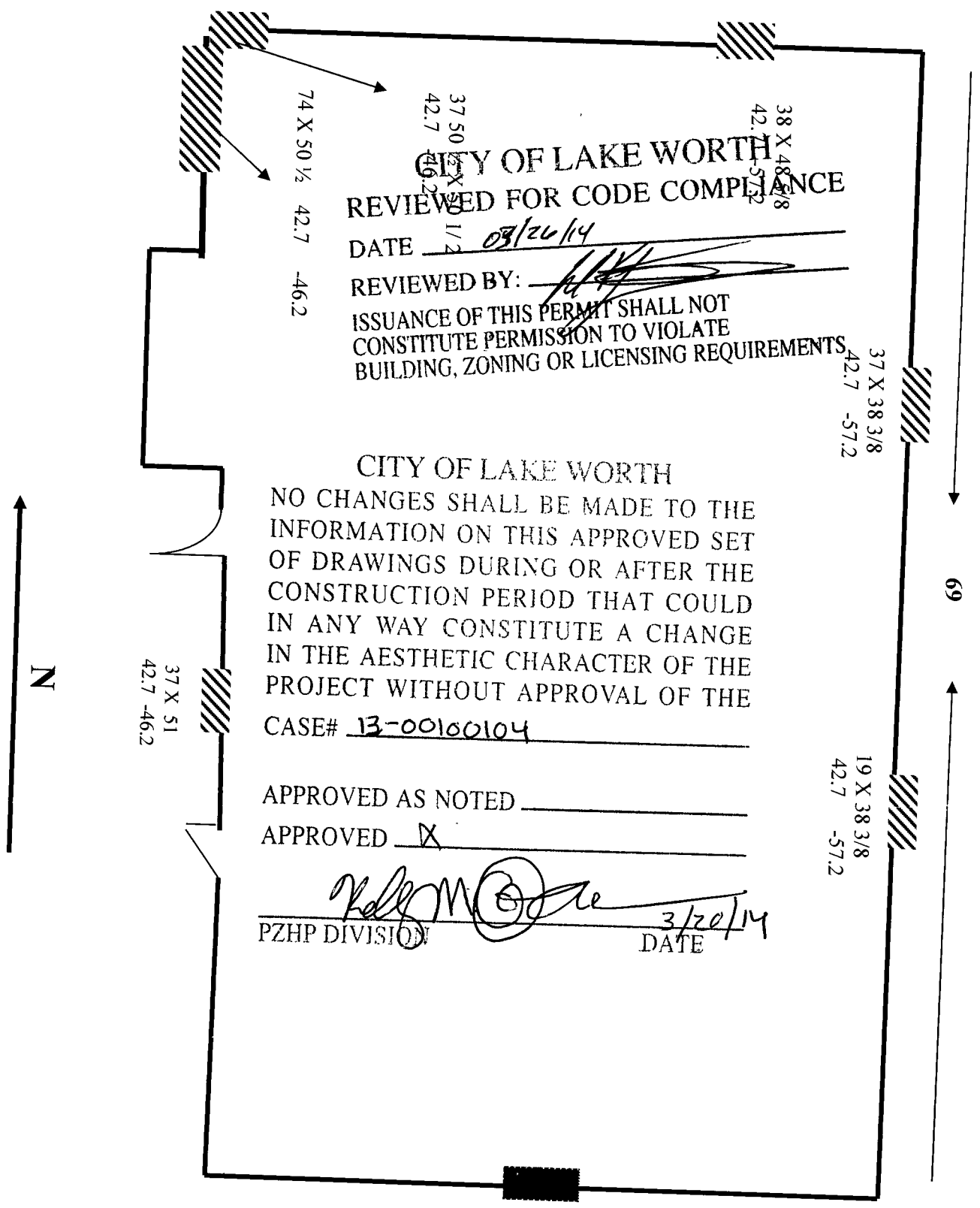
APPROVED W/ COMMENTS
DATE: _____ BY: _____

FEE: BASE FEE OF \$25.00 PLUS \$10.00 PER PLAN PAGE OR ATTACHMENT

Number of Plan Pages / Attachments: 1 @ \$10.00 Each = 10.00
Base fee: \$25.00

Processed by: [Signature] Total: 35.00

 Not included
 Proposed windows replacement



CITY OF LAKE WORTH
 REVIEWED FOR CODE COMPLIANCE
 DATE 03/26/14
 REVIEWED BY: [Signature]
 ISSUANCE OF THIS PERMIT SHALL NOT
 CONSTITUTE PERMISSION TO VIOLATE
 BUILDING, ZONING OR LICENSING REQUIREMENTS

CITY OF LAKE WORTH
 NO CHANGES SHALL BE MADE TO THE
 INFORMATION ON THIS APPROVED SET
 OF DRAWINGS DURING OR AFTER THE
 CONSTRUCTION PERIOD THAT COULD
 IN ANY WAY CONSTITUTE A CHANGE
 IN THE AESTHETIC CHARACTER OF THE
 PROJECT WITHOUT APPROVAL OF THE
 CASE# 13-00160104

APPROVED AS NOTED _____
 APPROVED _____
[Signature] PZHP DIVISION DATE 3/20/14

DESIGN DATA
 F.B.C 2010, V=170 MPH, ASCE -7-10
 GROUP R3 OCCUPANCY
 TYPE VB CONSTRUCTION
 EXISTING BUILDING, ALTERATION LEVEL 2

City of Lake Worth
 Permit #
13-01533

33
 Revision March 17, 2014

PROPOSED WINDOW REPLACEMENT
 721 N DIXIE LL C
 215 S. Federal Hwy
 Lake Worth, Florida



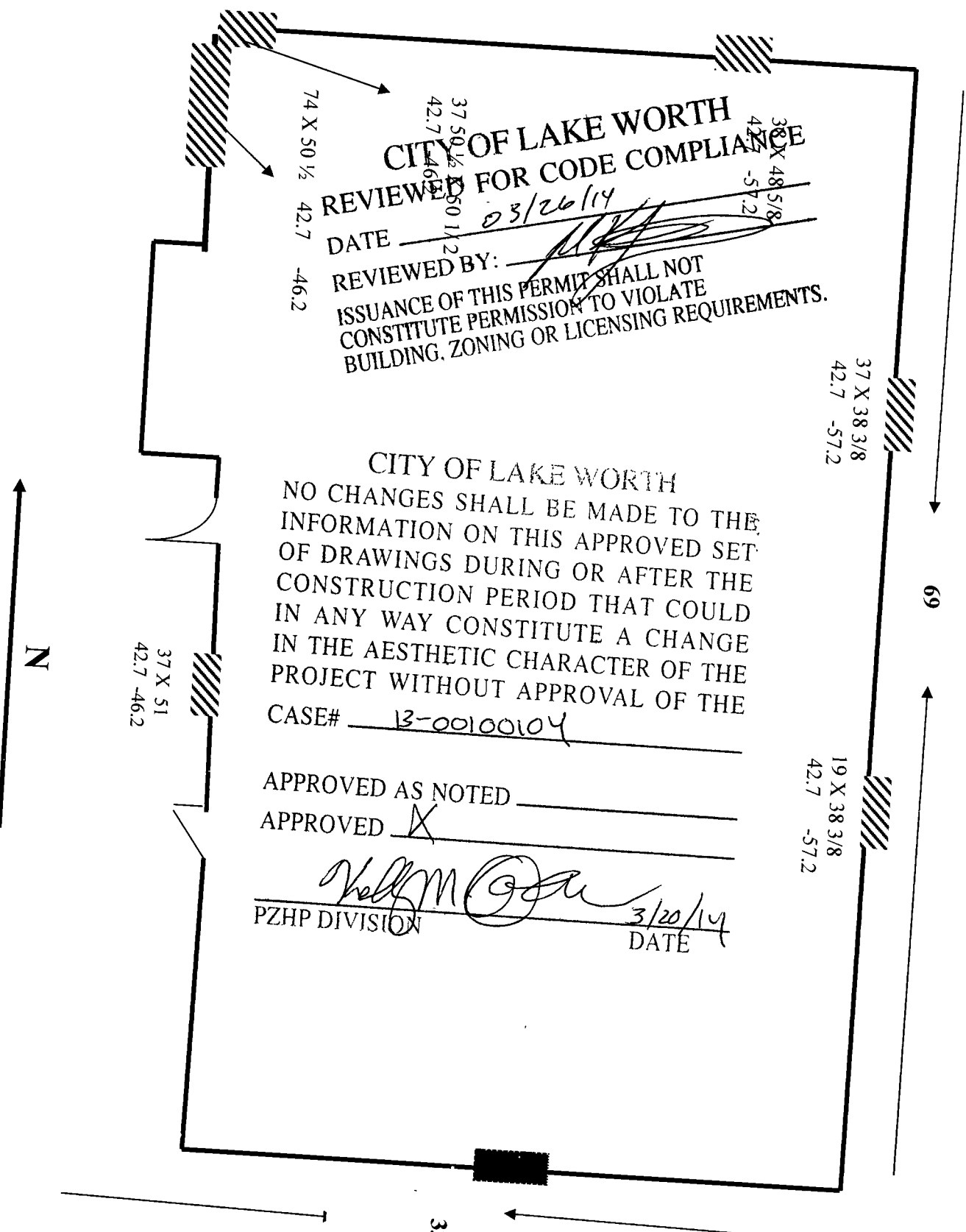
Not included

Proposed windows replacement

CITY OF LAKE WORTH
REVIEWED FOR CODE COMPLIANCE
 DATE 03/26/14
 REVIEWED BY: [Signature]
 ISSUANCE OF THIS PERMIT SHALL NOT
 CONSTITUTE PERMISSION TO VIOLATE
 BUILDING, ZONING OR LICENSING REQUIREMENTS.

CITY OF LAKE WORTH
 NO CHANGES SHALL BE MADE TO THE
 INFORMATION ON THIS APPROVED SET
 OF DRAWINGS DURING OR AFTER THE
 CONSTRUCTION PERIOD THAT COULD
 IN ANY WAY CONSTITUTE A CHANGE
 IN THE AESTHETIC CHARACTER OF THE
 PROJECT WITHOUT APPROVAL OF THE
 CASE# 13-00100104

APPROVED AS NOTED _____
 APPROVED _____
[Signature] 3/20/14
 PZHP DIVISION DATE



DESIGN DATA
 F.B.C 2010, V=170 MPH, ASCE-7-10
 GROUP R3 OCCUPANCY
 TYPE VB CONSTRUCTION
 EXISTING BUILDING, ALTERATION LEVEL 2

Revision March 17, 2014

City of Lake Worth
 Permit #
13-01533

PROPOSED WINDOW REPLACEMENT
 721 N DIXIE LLC
 215 S. Federal Hwy
 Lake Worth, Florida