

## **Administrative Certificates of Appropriateness**

Attached are Certificates of Appropriateness issued administratively in February 2017.

- COA #17-09, 130 N 2<sup>nd</sup> Street – Complete Renovations/Amendment. Add concrete bar wall w/wood lap siding. Add new flush metal emergency exit door.
- COA #17-10, 716 S 10<sup>th</sup> Street – Install new hurricane rolling shutters.
- COA #17-11, 701 Orange Avenue – Remove one window and add exterior door.
- COA #17-13, 520 Means Court – Remove and replace existing flat roof.
- COA #17-14, 520 Means Court – Remove and replace two exterior doors, new stucco and paint.





Bldg. Permit # \_\_\_\_\_

COA# 17-09

## Certificate of Appropriateness Application



### Building & Site Information

Address of the Site: 130 N 2nd St  
 Parcel ID #: 2410-503-0055-000-9  
 Type of Designation:  Contributing  Non-contributing Site within the Downtown Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

### Property Owner/ Applicant Information

Property Owner(s)  
 Name(s): Kraaz & Kraaz Finance, LLC  
 Mailing Address: 201 S 2nd St Ste 206 Ft Pierce 34950  
 Phone Number(s): (772) 409-8527 Email: bstone@baatloan.com

Applicant  
 Name(s): KRAAZ & KRAAZ  
 Mailing Address: \_\_\_\_\_  
 Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

Representative  
 Name(s): COOK & MENARD ARCHITECTURE INC  
 Mailing Address: 806 DELAWARE AVE FT PIERCE  
 Phone Number(s): 460 7751 Email: COOKMENARD@YAHOO.COM

**Property Owner(s) Acknowledgements:-** This application will not be considered complete without the signature of all property owners of record, which shall serve as an acknowledgement of the submission of this application. The property owner's signature below shall also authorize the Applicant (if other than the property owner) and/or Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I / We, Kraaz & Kraaz Finance, LLC as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

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

2/3/17  
 \_\_\_\_\_  
 Date

**Description of Requested Work**

Please indicate the type of work requested:

Fence

Shed

Door(s)

Roof

Window(s)

Signage

Shutter(s)

Porch

Rehabilitation

New Construction

Demolition

Relocation

Site Improvements (describe) \_\_\_\_\_

Other (describe) COMPLETE RENOVATION / AMENDMENT

Please provide a detailed description of the proposed work to be performed: \_\_\_\_\_

OPEN FRONT OF BUILDING FOR COVERED SEATING  
ADD CONCRETE BASE NEW WALL W/ WOOD LAP  
SIPINGO

Have other alterations been made to the site within the last 12 months?  No  Yes, \_\_\_\_\_

Will the proposed work require a Zoning Variance?  No  Yes, Code Section(s): \_\_\_\_\_

**Application Requirements**

- \$10.00 Application fee
- Site Plan with dimensions.
- Architectural Drawings:
  - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
  - Drawings should indicate materials to be used.
- Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
- Material(s) specifications and/or sample(s)
- Color samples.
- Demolition - Plans for what will be taking the demolished structure's place should be submitted.

















# CITY OF FORT PIERCE

## PLANNING DEPARTMENT

COMPREHENSIVE PLANNING ♦ DEVELOPMENT REVIEW  
HISTORIC PRESERVATION ♦ URBAN DESIGN ♦ URBAN FORESTRY ♦ ZONING



### Certificate of Appropriateness Application

#### Building & Site Information

Address of the Site: 716 S 10<sup>th</sup> st. Ft. Pierce, FL

Parcel ID #: 2410-710-0022-000-5

Type of Designation:  Contributing  Non-contributing Site within the \_\_\_\_\_ Historic District

Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

#### Property Owner / Applicant Information

Property Owner(s)  
Name(s): Kara Wood

Mailing Address: 716 S 10<sup>th</sup> st. Ft. Pierce, FL 34950

Phone Number(s): 305-778-6117 Email: \_\_\_\_\_

Applicant  
Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

Representative  
Name(s): Miriam Van Tassel - D.V.T. Hurricane Shutters, Inc.

Mailing Address: 3100 N Kings Hwy. Ft. Pierce, FL 34951

Phone Number(s): 406-4575 Email: dvthurricanes shuttersinc@hotmail.com

*Property Owner(s) Acknowledgements:- This application will not be considered complete without the signature of all property owners of record, which shall serve as an acknowledgement of the submission of this application. The property owner's signature below shall also authorize the Applicant (if other than the property owner) and/or Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.*

I / We, Kara Wood as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Kara Wood Signature of Owner 02/07/17 Date

**Description of Requested Work**

Please indicate the type of work requested:

- Fence
- Shed
- Door(s)
- Roof
- Window(s)
- Signage
- Shutter(s)
- Porch
- Rehabilitation
- New Construction
- Demolition
- Relocation

Site Improvements (describe) INSTALLATION OF Hurricane shutters.

Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: \_\_\_\_\_

We will install thirteen (13) Nautilus Rolling Shutters - WHITE -

Have other alterations been made to the site within the last 12 months?  No  Yes, \_\_\_\_\_

Will the proposed work require a Zoning Variance?  No  Yes, Code Section(s): \_\_\_\_\_

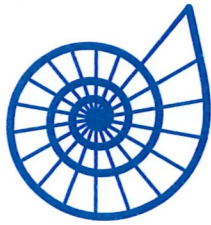
**Application Requirements**

- \$10.00 Application fee
- Site Plan with dimensions.
- Architectural Drawings:
  - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
  - Drawings should indicate materials to be used.
- Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
- Material(s) specifications and/or sample(s)
- Color samples.
- Demolition - Plans for what will be taking the demolished structure's place should be submitted.





412



# Nautilus™ Rolling Shutter System

**"The World's Most Compact Rolling Shutter!"**

## Appearance

The Nautilus Rolling Shutter System is a state of the art end-retention shutter featuring the most compact housing sizes in the world. Snap covers are utilized to conceal all fastening hardware. Home and business owners alike can now utilize the Nautilus Shutter, where previously, the space available would not accommodate a roll shutter. The size of the housing will no longer detract from the appearance of the building.

## Applications

The Nautilus Rolling Shutter System has a variety of uses including: hurricane protection, storefront, security and counter top applications. Nautilus Shutters are permanently attached, easy to operate and deploy quickly. No put up, take down or storage required. The Nautilus is ideal for use in protecting large patios and balconies. They are built to protect your most valuable asset and its contents.

## Versatility

The Nautilus can be electrically operated with the use of a wall switch or a hand held remote control capable of operating twenty shutters from a single remote. Shutters can also be manually operated with the use of a removable crank or hand operated where they can be pulled up and down. Nautilus is extremely versatile and can be utilized where other systems fall short. Available in four colors: White, Ivory, Bronze and Beige.

## Strength

Nautilus Shutters undergo extensive and rigorous testing, including large missile impact tests, and are Florida Building Code approved for Non-High Velocity and High Velocity Hurricane Zones (Dade and Broward Counties). A series of forced entry tests are also performed for security protection. Nautilus has the ability to span over twenty feet in width without any intermediate support or storm bars.

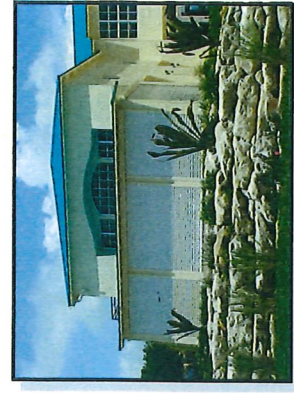
## Dependability

Every component of the Nautilus Shutter has been designed for increased durability and longevity, even in the harshest of environments. Rigorous fatigue tests are performed for up to 20,000 cycles. These tests are used to evaluate the integrity and dependability of each and every component. We make certain these components and the entire system will perform consistently year after year.

## Quality

All aluminum components including slats, side rails, axles, housings and end caps are fabricated from 6063 T-6 extruded aluminum alloy. All fasteners and assembly hardware are made from 316 or 410 series marine grade stainless steel. The end-retention bushings are made of high performance acetal polymer. Nautilus Shutters are designed and manufactured to the absolute highest standards in the industry.

## Security & Storm Protection Residential - Commercial - High-Rise





**CERTIFICATE OF APPROPRIATENESS**  
 TO ALTER A DESIGNATED HISTORIC SITE

COA#17-11     HISTORIC PRESERVATION BOARD APPROVAL     ADMINISTRATIVE APPROVAL

Site address 701 Orange Avenue  
 Contributing                       Non-Contributing                       Individually Designated

**SITE ALTERATIONS:**

Request	Conditions	Applicable Standards
Remove one window and add exterior door (secondary façade).  Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

**APPROVED:**

*Board Approval*

*Administrative Approval*

\_\_\_\_\_  
 Paul Samson, Chair                      Date  
 Historic Preservation Board

  
 \_\_\_\_\_  
 Maria Lewicka, AICP                      2/9/17  
 Historic Preservation Planner                      Date

*This alteration meets the Secretary of the Interior's Standards for the Treatment of Historic Properties and the City of Fort Pierce Code of Ordinances.*

*Should you have any further questions or concerns, contact Maria Lewicka, Historic Preservation Planner, at (772) 467-3738 or via e-mail at [mlewicka@city-ftpierce.com](mailto:mlewicka@city-ftpierce.com).*

*Thank you for your efforts to preserve and redevelop historic Fort Pierce through your participation in the Certificate of Appropriateness Application process. Staff looks forward to working with you in the future to preserve and rehabilitate our historic neighborhoods and structures.*

Provided to:	Name/Address	Via
Owner	Bunwin, Inc. 4521 PGA Blvd., Suite 201 Palm Beach Gardens, FL 33418	E-Mail <a href="mailto:hovenre@gmail.com">hovenre@gmail.com</a>
Representative	Steve Tarr 4521 PGA Blvd., Suite 201 Palm Beach Gardens, FL 33418	E-Mail <a href="mailto:hovenre@gmail.com">hovenre@gmail.com</a>
Other	Paul Thomas, CFP Building Administrator Kim West, CFP Building Department Susan Keller, CFP Building Department	E-Mail E-Mail E-Mail



Bldg. Permit # \_\_\_\_\_

COA# 17-11

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 701 ORANGE Ave

Parcel ID #: 2410 - 703 - 0004 - 000/1

Type of Designation:  Contributing  Non-contributing Site within the \_\_\_\_\_ Historic District

Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

### Property Owner/ Applicant Information

Property Owner(s) Name(s): BUNVIN, INC

Mailing Address: 4521 PGA BLVD #201

Phone Number(s): 861 622 3386 Email: hovenre@gmail.com

Applicant Name(s): SAME

Mailing Address: \_\_\_\_\_

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

Representative Name(s): Steve Tarr

Mailing Address: same

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

*Property Owner(s) Acknowledgements:- This application will not be considered complete without the signature of all property owners of record, which shall serve as an acknowledgement of the submission of this application. The property owner's signature below shall also authorize the Applicant (if other than the property owner) and/or Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.*

I / We, Steven Tarr as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

2/7/17  
Date

**Description of Requested Work**

Please indicate the type of work requested:

- |                                         |                                           |                                     |                                     |
|-----------------------------------------|-------------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Fence          | <input type="checkbox"/> Shed             | <input type="checkbox"/> Door(s)    | <input type="checkbox"/> Roof       |
| <input type="checkbox"/> Window(s)      | <input type="checkbox"/> Signage          | <input type="checkbox"/> Shutter(s) | <input type="checkbox"/> Porch      |
| <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> New Construction | <input type="checkbox"/> Demolition | <input type="checkbox"/> Relocation |

- Site Improvements (describe) Adding interior bathroom + exterior door,
- Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: \_\_\_\_\_

See above

Have other alterations been made to the site within the last 12 months?  No  Yes, \_\_\_\_\_

Will the proposed work require a Zoning Variance?  No  Yes, Code Section(s): \_\_\_\_\_

**Application Requirements**

- \$10.00 Application fee
- Site Plan with dimensions.
- Architectural Drawings:
  - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
  - Drawings should indicate materials to be used.
- Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
- Material(s) specifications and/or sample(s)
- Color samples.
- Demolition - Plans for what will be taking the demolished structure's place should be submitted.



Bathroom Addition

URAA  
(66)

15

4

36

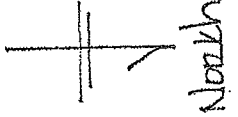
48

CINZ  
(731)

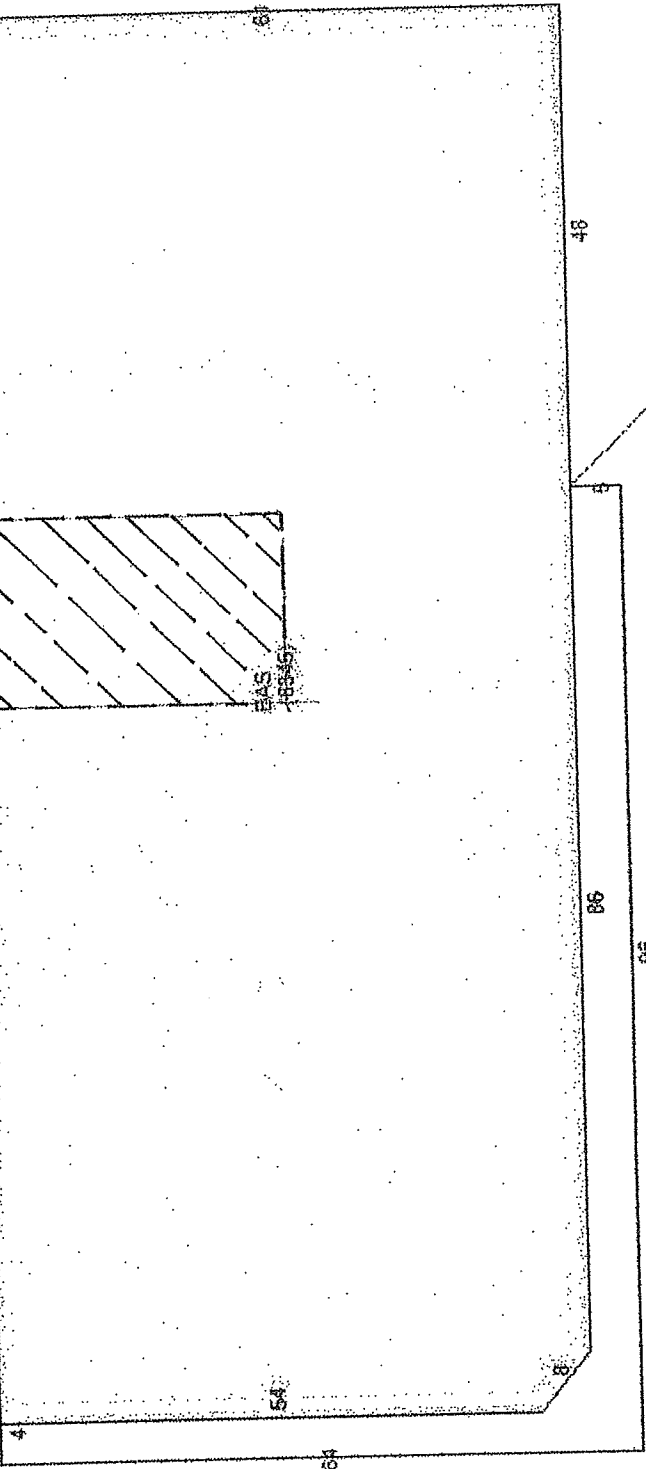
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86

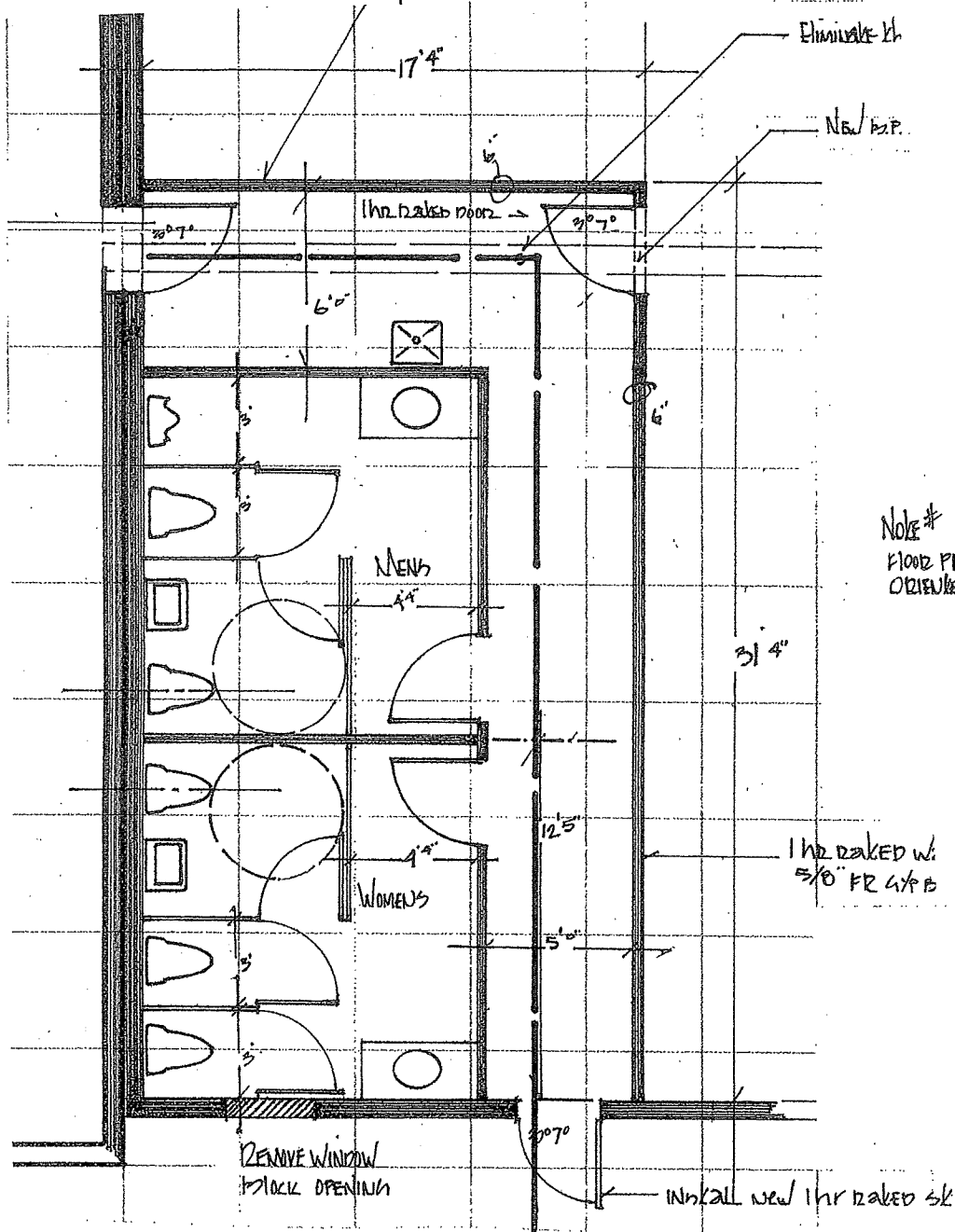
96



SAS  
(8545)



North 1/4" SCALE



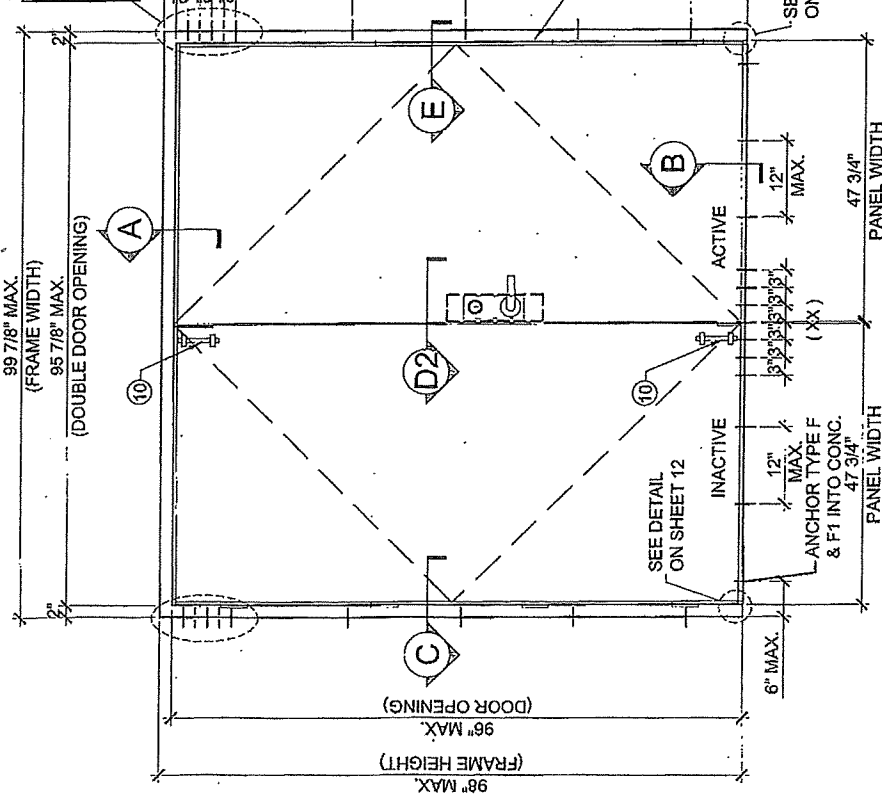
Note #  
FLOOR PLAN HAS BEEN  
ORIENTED FOR CLARITY.

max travel distance is 42'

Bathroom Addition

TABLE 1

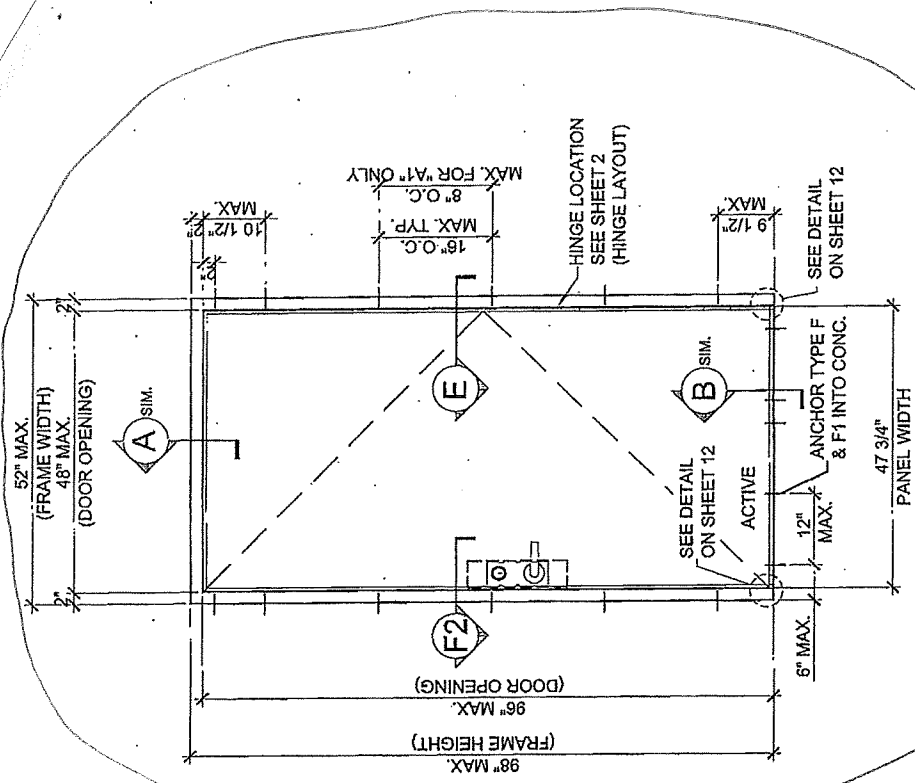
ANCHOR TYPE (THRU EMA)	NUMBER OF RECD ANCHOR
A, B, C1 & D	2
B1, C, D1E & J	3
A1	5



DESIGN LOADS  
(FOR SIZES SHOWN ABOVE OR SMALLER)  
AS PERMITTED BY FBC

+90.0 PSF
-90.0 PSF

**TYPICAL EXTERIOR ELEVATION (XX)**  
(DOUBLE PANEL OUTSWINGING STEEL DOOR)  
MORTISE LOCK W/ DEADBOLT  
(LOCK OPTION 2 SEE SHEET 9)



**TYPICAL EXTERIOR ELEVATION (X)**  
(SINGLE PANEL OUTSWINGING STEEL DOOR)  
MORTISE LOCK W/ DEADBOLT  
(LOCK OPTION 2 SEE SHEET 9)

As we comply with the  
Florida Building Code  
Date 4/26/16  
NOA# 15-0526-02  
Miami Dade Product Control  
By 16607.1.1.1.1.1.1

GENSTORM OUTSWING 4888 HD OPAQUE STEEL DOOR (LMI & SMI)

DATE: \_\_\_\_\_ SCALE: \_\_\_\_\_ DRAWN: \_\_\_\_\_ CHECKED: \_\_\_\_\_

FLORIDA REGISTERED PROFESSIONAL ENGINEER  
No. 55983  
STATE OF FLORIDA  
MIAMI DADE COUNTY



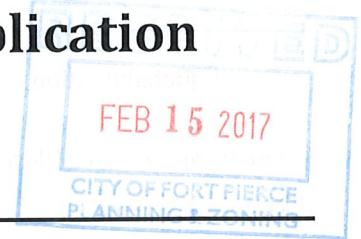




COA# 17-13

Bldg. Permit # \_\_\_\_\_

## Certificate of Appropriateness Application



### Building & Site Information

Address of the Site: 520 Means Court  
Parcel ID #: \_\_\_\_\_  
Type of Designation:  Contributing  Non-contributing Site within the \_\_\_\_\_ Historic District  
 Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

### Property Owner/ Applicant Information

Property Owner(s)  
Name(s): Sarah George  
Mailing Address: 520 Means Court  
Phone Number(s): (772) 475-6934 Email: Sarahgeorge212@att.net

Applicant  
Name(s): John L. George  
Mailing Address: 786 Bent Creek Drive  
Phone Number(s): (772) 834-7001 Email: Jgeorge@constructionbygeorge.com

Representative  
Name(s): \_\_\_\_\_  
Mailing Address: SAME AS ABOVE  
Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

**Property Owner(s) Acknowledgements:-** This application will not be considered complete without the signature of all property owners of record, which shall serve as an acknowledgement of the submission of this application. The property owner's signature below shall also authorize the Applicant (if other than the property owner) and/or Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.

I / We, John L. George as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

[Signature]  
Signature of Owner

2/15/2017  
Date

**Description of Requested Work**

Please indicate the type of work requested:

- Fence                       Shed                       Door(s)                       Roof  
 Window(s)                       Signage                       Shutter(s)                       Porch

- Rehabilitation                       New Construction                       Demolition                       Relocation

- Site Improvements (describe) Re-roof flat roof, replace & remove  
 Other (describe) \_\_\_\_\_

Please provide a detailed description of the proposed work to be performed: \_\_\_\_\_

30 lb felt paper & Peel and stick overlay

Have other alterations been made to the site within the last 12 months?  No  Yes, \_\_\_\_\_

Will the proposed work require a Zoning Variance?  No  Yes, Code Section(s): \_\_\_\_\_

**Application Requirements**

- \$10.00 Application fee
- Site Plan with dimensions.
- Architectural Drawings:
  - Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
  - Drawings should indicate materials to be used.
- Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
- Material(s) specifications and/or sample(s)
- Color samples.
- Demolition – Plans for what will be taking the demolished structure’s place should be submitted.



DUPLICATE COPY

CITY OF FORT PIERCE, FLORIDA
BUILDING DEPARTMENT
APPLICATION FOR BUILDING PERMIT
(772) 467-3529 or 467-3724 FAX (772) 467-3849

Permit # 17-432
FBC 2014(5th edition)
PIN # 885648

\*Property Address 520 Means Ct. \*Date 2/10/2017 # of plans submitted \_\_\_ \* # of CD's submitted \_\_\_
Parcel ID# 2409 501 0047 0000 Phone # ( ) - Fax # ( )
(Located on your tax bill) Email Address Cell # ( )
\*Owner Name Sarah George \*Owner Address 520 Means Ct.

Type of permit Roofing \*Valuation \$ 6500.00
\*Description of Work Flat Roof Remove & Replace Complete Roof

Architect: Phone( ) Fax ( )
Email Address
Engineer: Phone( ) Fax ( )
Email Address

\*CONTRACTOR/APPLICANT INFORMATION: City License # 17-00014881 State License #
Company Name George & Associates Const. Inc. Qualifier John L. George
Address 786 Bent Creek Dr City/State Ft. Pierce Zip 34947
Phone # (772) 834-7001 Fax # ( ) Cell # ( )
Email Address jgeorge@constructionbygeorge.com

RECEIVED
FEB 10 2017
Building Department

SUBCONTRACTORS: See Subcontractor Verification Sheet. It may be Required to accompany this application
Occupancy Res Construction Type # of Units # of Stories
Sq. Ft. Conditioned Space Total Sq. Ft. 19.

Is the property located in a Special Flood Hazard Area (floodplain) per the current Flood Insurance Rate Map (FIRM)
[ ] Yes [X] No

If Yes, the applicant must include certified elevation information on a FEMA NFIP Elevation Certificate.

I understand that no building may be occupied until a Certificate of Occupancy/Certificate of Completion has been issued after final inspection by the Building Department and full compliance with the building code, city and state ordinances and other applicable rules and regulations. I am also verifying that all sets of plans submitted are identical.

Signature of Applicant [Signature]
State of Florida, County of St. Lucie
Affirmed to and subscribed before me this 10th
Feb, 2017, by John L. George
personally known to me or who has produced
as identification.

Signature of Property Owner
State of Florida, County of
Affirmed to and subscribed before me this
20, by
personally known to me or who has produced
as identification.

Notary Signature: [Signature]
Notary (print name) AMARIS GIL

AMARIS ISABEL GIL
MY COMMISSION # FF 81419
EXPIRES: August 30, 2019
Bonded Thru Budget Notary Public

Construction documents must accompany this application. The Florida energy code submitted becomes an integral part of this plan and must pass final inspection. "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 record of this county, and there may be additional permits required from other governmental entities such as waste management district, state agencies, or federal agencies." SIGNATURE OF THE APPLICANT MUST BE NOTARIZED. If owner builder, applicant must sign in person. BUILDING PERMIT includes: Building, Electrical, Plumbing, Mechanical, and Sewer only. All other trades require separate permits.
\*Required Information

Asbestos compliance: It is the owner's or operator's responsibility to comply with section 469.003, Florida Statutes, and to notify the Department of Environmental Protection of his or her intentions to remove asbestos, when applicable, in accordance with state and federal law.

OFFICE USE ONLY

FEES: \* See the break Down Fee Sheet
Total Fees Due \$

PF 100.00
PL 75.00
RT 15.00
SC 5.25

Remarks
Reviewed by Date Building Official Date

Case # 16-2472

Reviewed: \_\_\_\_\_

Date: \_\_\_\_\_



**CITY OF FORT PIERCE  
BUILDING DEPARTMENT  
RE-ROOF FORM**

PHONE: 772-467-3529 or 467-3724

FAX: 772-467-3849

*These plans and all proposed work are subject to any corrections required by field inspectors that may be necessary in order to comply with all applicable codes*

Owner Name: Sarah George

Property Address: 520 Means Court

Description of Work: Re-Roofing

Roof Spec's: \_\_\_\_\_

Notice: Shingles **can not** be used on roof slope less than 2/12 pitch.  
Check manufacturer specifications, some indicate min 3/12.

**Less than 4/12 requires 19" lap for underlayment.**

**Flat Roofs: Less than 7 degrees and less than 400sqft area requires enhanced nailing**

2014 (5<sup>th</sup> Edition) FBC Residential Section 905

2014 (5<sup>th</sup> Edition) FBC Building Section 1507

**ALLOWED FOR CODE COMPLIANCE**  
The responsibility of the general contractor to insure that all construction is performed to and meet all applicable codes including plumbing, mechanical, gas, Florida Building Code, fire and safety codes. In no event shall the subcontractor be released from liability as outlined in Chapter 1 Section 105.01 (2)(c)

Roof Dimensions: \_\_\_\_\_

Square Footage: 1900

Rotten Wood:  Yes  No

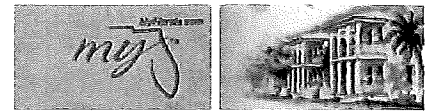
Roof Type:  Gable  Hip  Flat  Other

Roof Material  Shingle  Metal  Tile  Tar & Gravel  Other

Pitch/Slope: ~~Poly Gls Elastoflex~~ Flat

Underlayment: Poly Gls Elastoflex # Felt: 30/15 Other: \_\_\_\_\_

**\*\* Must note on Product Approval any material used\*\***



**Product Approval**  
USER: Public User

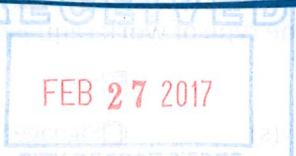
[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**



FL #	FL1654-R19														
Application Type	Revision														
Code Version	2014														
Application Status	Approved														
Comments															
Archived															
Product Manufacturer	POLYGLASS USA														
Address/Phone/Email	150 Lyon Drive Fernley, NV 89408 (570) 384-1230 Ext 242 jakins@polyglass.com														
Authorized Signature	James Akins jakins@polyglass.com														
Technical Representative	Steve Wadding														
Address/Phone/Email	150 Lyon Drive Fernley, NV 98408 (602) 363-7139 stevew@polyglass.com														
Quality Assurance Representative	James Akins														
Address/Phone/Email	555 Oakridge Road Humboldt Industrial Pkwy Hazleton, PA 18201 (800) 894-4563 jakins@polyglass.com														
Category	Roofing														
Subcategory	Modified Bitumen Roof System														
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer Evaluation Report - Hardcopy Received														
Florida Engineer or Architect Name who developed the Evaluation Report	Robert Nieminen														
Florida License	PE-59166														
Quality Assurance Entity	UL LLC														
Quality Assurance Contract Expiration Date	10/06/2018														
Validated By	John W. Knezevich, PE Validation Checklist - Hardcopy Received														
Certificate of Independence	<a href="#">FL1654_R19_COI_2016_01_COI_Nieminen.pdf</a>														
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th><u>Standard</u></th> <th><u>Year</u></th> </tr> </thead> <tbody> <tr> <td>ASTM D6162</td> <td>2000</td> </tr> <tr> <td>ASTM D6163</td> <td>2000</td> </tr> <tr> <td>ASTM D6164</td> <td>2005</td> </tr> <tr> <td>ASTM D6222</td> <td>2008</td> </tr> <tr> <td>ASTM D6509</td> <td>2009</td> </tr> <tr> <td>FM 4470</td> <td>1992</td> </tr> </tbody> </table>	<u>Standard</u>	<u>Year</u>	ASTM D6162	2000	ASTM D6163	2000	ASTM D6164	2005	ASTM D6222	2008	ASTM D6509	2009	FM 4470	1992
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ASTM D6222	2008														
ASTM D6509	2009														
FM 4470	1992														







Bldg. Permit # \_\_\_\_\_

COA# 17-14

## Certificate of Appropriateness Application

### Building & Site Information

Address of the Site: 520 Means Ct

Parcel ID #: \_\_\_\_\_

Type of Designation:  Contributing  Non-contributing Site within the  Historic District

Individually Designated Site, City Commission Resolution No. \_\_\_\_\_

### Property Owner/ Applicant Information

Property Owner(s) Name(s): Sarah L. George

Mailing Address: P O Box 1165 Ft. Pierce, FL 34954

Phone Number(s): (772) 475-6934 Email: sarahgeorge212@att.net

#### Applicant

Name(s): \_\_\_\_\_

Mailing Address: S As Above

Phone Number(s): \_\_\_\_\_ Email: \_\_\_\_\_

#### Representative

Name(s): George & Associates Construction

Mailing Address: \_\_\_\_\_

Phone Number(s): (772) 834-7001 Email: \_\_\_\_\_

*Property Owner(s) Acknowledgements:- This application will not be considered complete without the signature of all property owners of record, which shall serve as an acknowledgement of the submission of this application. The property owner's signature below shall also authorize the Applicant (if other than the property owner) and/or Representative to act in his/her behalf for the purposes of seeking approval for the application described herein. The undersigned consents to inspection and photographing of the subject property by the Historic Preservation staff for purposes of consideration of this Application and/or presentation to the Historic Preservation Board.*

I, We, Sarah L. George as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

Sarah L. George  
Signature of Owner



SUSAN J. KELLER Date  
MY COMMISSION #FF022470  
EXPIRES August 25, 2017  
FloridaNotaryService.com

2/27/2017  
Susan J. Keller  
Susan J. Keller

**Description of Requested Work**

Please indicate the type of work requested:

- Fence
- Shed
- Door(s)
- Roof
- Window(s)
- Signage
- Shutter(s)
- Porch
- Rehabilitation
- New Construction
- Demolition
- Relocation

Site Improvements (describe) Remodeling (2 DOORS REPLACEMENT)  
 Other (describe) NEW STUCCO AND PAINT - "YELLOW GOLD"

Please provide a detailed description of the proposed work to be performed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have other alterations been made to the site within the last 12 months?  No  Yes, \_\_\_\_\_

Will the proposed work require a Zoning Variance?  No  Yes, Code Section(s): \_\_\_\_\_

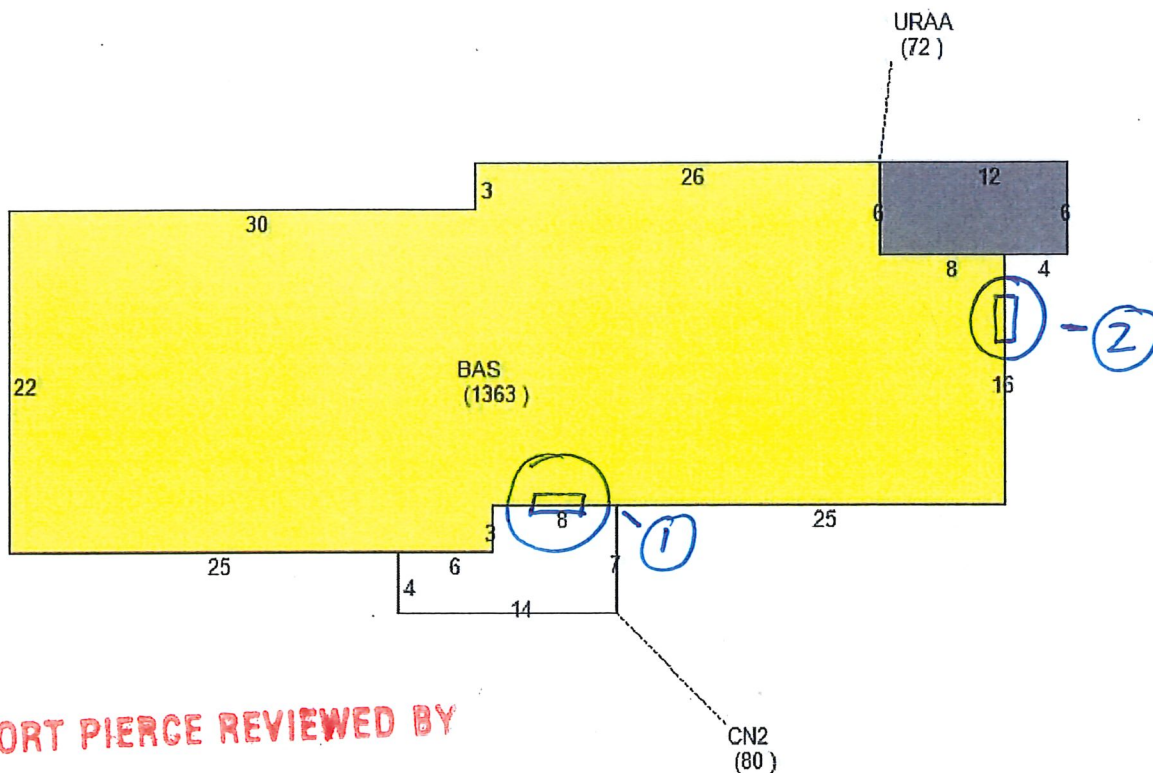
\_\_\_\_\_  
\_\_\_\_\_

**Application Requirements**

- \$10.00 Application fee
- Site Plan with dimensions.
- Architectural Drawings:
  - > Drawings should show all current and proposed floor plans and elevations, fences, walls, and any other landscape features.
  - > Drawings should indicate materials to be used.
- Photos - One (1) color photograph of the main façade of the site and photographs of any areas affected by the proposed project.
- Material(s) specifications and/or sample(s)
- Color samples.
- Demolition - Plans for what will be taking the demolished structure's place should be submitted.



17-522  
520 Means Ct



CITY OF FORT PIERCE REVIEWED BY

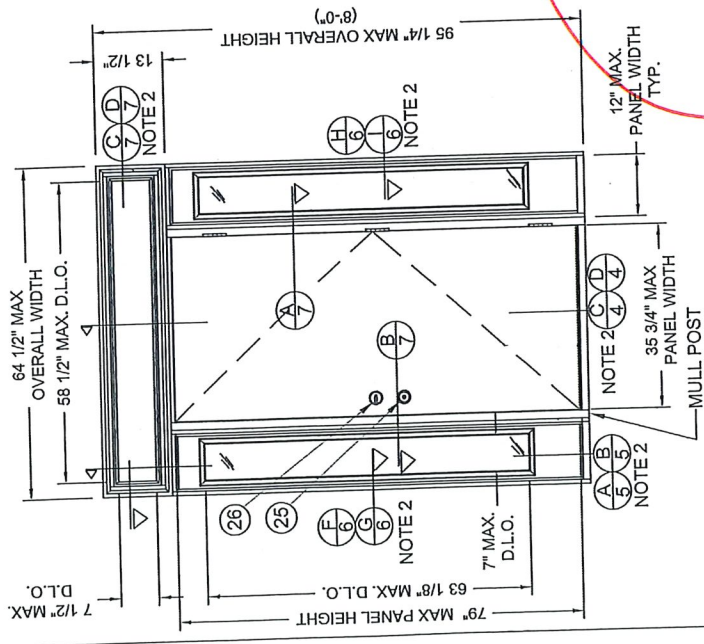
DATE

CN2  
(80)

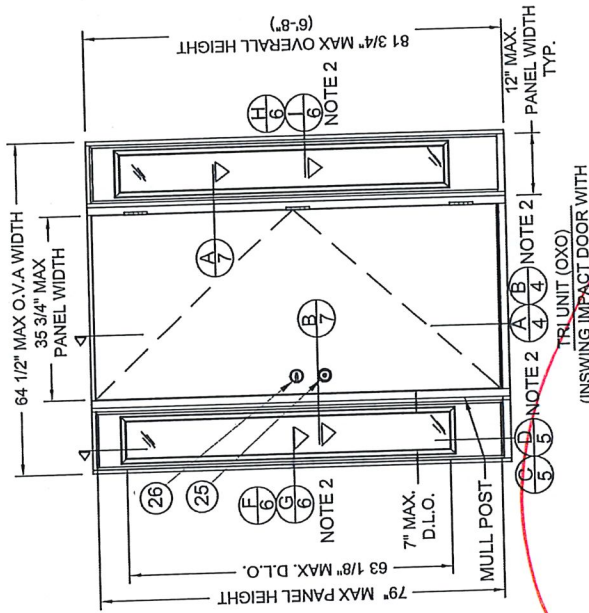
"REVIEWED FOR CODE COMPLIANCE"

These plans and all proposed work are subject to any corrections required by field inspectors that may be necessary in order to comply with all applicable codes

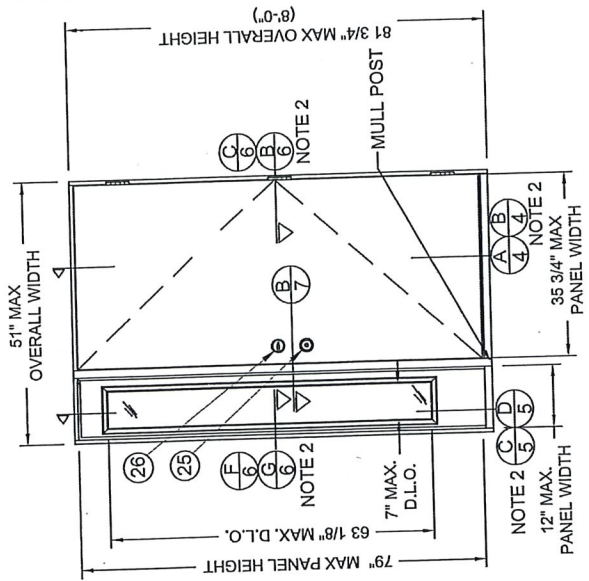
A permit issued shall be construed to be a license to proceed with the work and not as authority to violate, cancel, alter or set aside any of the provisions of the technical codes, nor shall issuance of a permit prevent the building official from thereafter requiring a correction of errors in plans, construction or violations of this code inadvertently overlooked during plan review as outlined in Chapter 1 Section 105.4 of the Florida Building Code. All proposed work is subject to any corrections required by field inspectors that may be necessary in order to comply with all applicable codes.



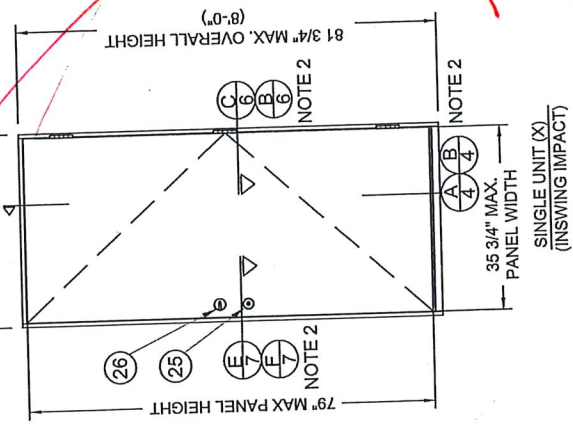
TRI UNIT (O/OXO)  
(INSWING IMPACT DOOR WITH  
NON-IMPACT SIDELITES & TRANSOM)



TRI UNIT (OXO)  
(INSWING IMPACT DOOR WITH  
NON-IMPACT SIDELITES)



DUAL UNIT (OX)  
(INSWING IMPACT DOOR WITH  
NON-IMPACT SIDELITE)



SINGLE UNIT (X)  
(INSWING IMPACT)

NOTES:  
1- ALL VIEWS FROM INTERIOR.  
2- MASONRY AND CONCRETE CONSTRUCTION



DATE:	12/31/09
SCALE:	1/2" = 1'
DWG. BY:	B.G. LUBBECKE
CHK. BY:	S. FREY
DRAWING NO.:	JW162009
SHEET 2 OF 16	

NO.	DATE	DESCRIPTION	BY
A	12.01.11	2010 CODE CHANGE	JLA
B	10.27.14	5TH ED CODE CHANGE	SM

PRODUCT:  
CONTOURS STEEL DOOR, WOOD EDGE  
6-0x6-8 (XX) & 5-4x6-8 (O/OX)  
INSWING/OUTSWING 24GA. STEEL  
PART OR ASSEMBLY:  
INSWING ELEVATIONS

JELD-WEN, INC.  
3737 LAKEPORT BLVD.  
KLAMATH FALLS, OR, 97601  
PH. 541-882-3451



← NEW  
PROPOSED  
door



DOOR  
TO BE REPLACED



DOOR  
TO BE REPLACED

How to use...

**YELLOW**

**GOLD**