

Administrative Certificates of Appropriateness

Attached are Certificates of Appropriateness issued administratively in September 2020.

- COA #20-57, 311 South 2th Street – Windows and doors replacement, new paint.
- COA #20-58, 903 Boston Avenue – Hurricane shutters
- COA #20-59, 903 Boston Avenue – Windows and doors replacement
- COA # 20-60, 220 Orange Avenue – Façade sign



CERTIFICATE OF APPROPRIATENESS
TO ALTER A DESIGNATED HISTORIC SITE

COA#20-57 HISTORIC PRESERVATION BOARD APPROVAL ADMINISTRATIVE APPROVAL

Site address: 311 South 2nd Street

Contributing Non-Contributing Individually Designated

SITE ALTERATIONS:

Request	Conditions	Applicable Standards
Remove and replace 9 windows and 3 sliding glass doors with PGT impact doors and windows. Remove and replace soffit with vinyl vented soffit. Paint exterior same color. Please see attached.		Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

APPROVED:

Board Approval

Administrative Approval

Suzanne Boardman, Chair Date
Historic Preservation Board



Maria Lewicka, AICP Date
Historic Preservation Planner 09/21/20

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@cityoffortpierce.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	Richard V Neill, Jr., Nancy M Neill, Red Brick Building, LLC 311 S 2 nd Street, Suite 200 Fort Pierce, FL 34950	E-Mail rneilljr@neillgriffin.com
Applicant	Earl Gaines 5821 Starcher Avenue Fort Pierce, FL 34947	E-Mail erlgaines@comcast.net

Bldg. Permit # _____

COA# 20-57



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: 311 South 2nd Street
Parcel ID #: 2410-807-0007-000-1
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): Richard V. Neill, Jr., Nancy M. Neill, Red Brick Building, LLC
Mailing Address: 311 S 2nd Street, Suite 200, Fort Pierce, FL 34950
Phone Number(s): 772-464-8200 Email: rneilljr@neillgriffin.com

Applicant
Name(s): Earl Gaines
Mailing Address: 5821 Starcher Ave., Fort Pierce, FL 34947
Phone Number(s): 772-577-0826 Email: erlgaines@comcast.net

Representative
Name(s): _____
Mailing Address: _____
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, Richard V. Neill, Jr., Nancy M. Neill, & Red Brick Building, LLC as Owner(s) of the subject property, do hereby authorize the filing of this application on my/our behalf.

[Signature] as manager of Red Brick Bldg, LLC 9/14/20
Signature of Owner Date
[Signature] 9/14/20
Signature Date

RECEIVED
SEP 15 2020
9:35 AM
Building Department

Description of Requested Work

Please indicate the type of work requested:

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

Site Improvements (describe) _____

Other (describe) _____

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

remove & replace (9) windows, (3) sliding glass doors with PGT impact doors and windows

remove & replace soffit with vinyl vented soffit. Paint exterior same color

remove and replace (1) window sill. See detailed engineering sheet

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.

NORTH SIDE



REMOVE & REPLACE
SOFFIT

EAST SIDE



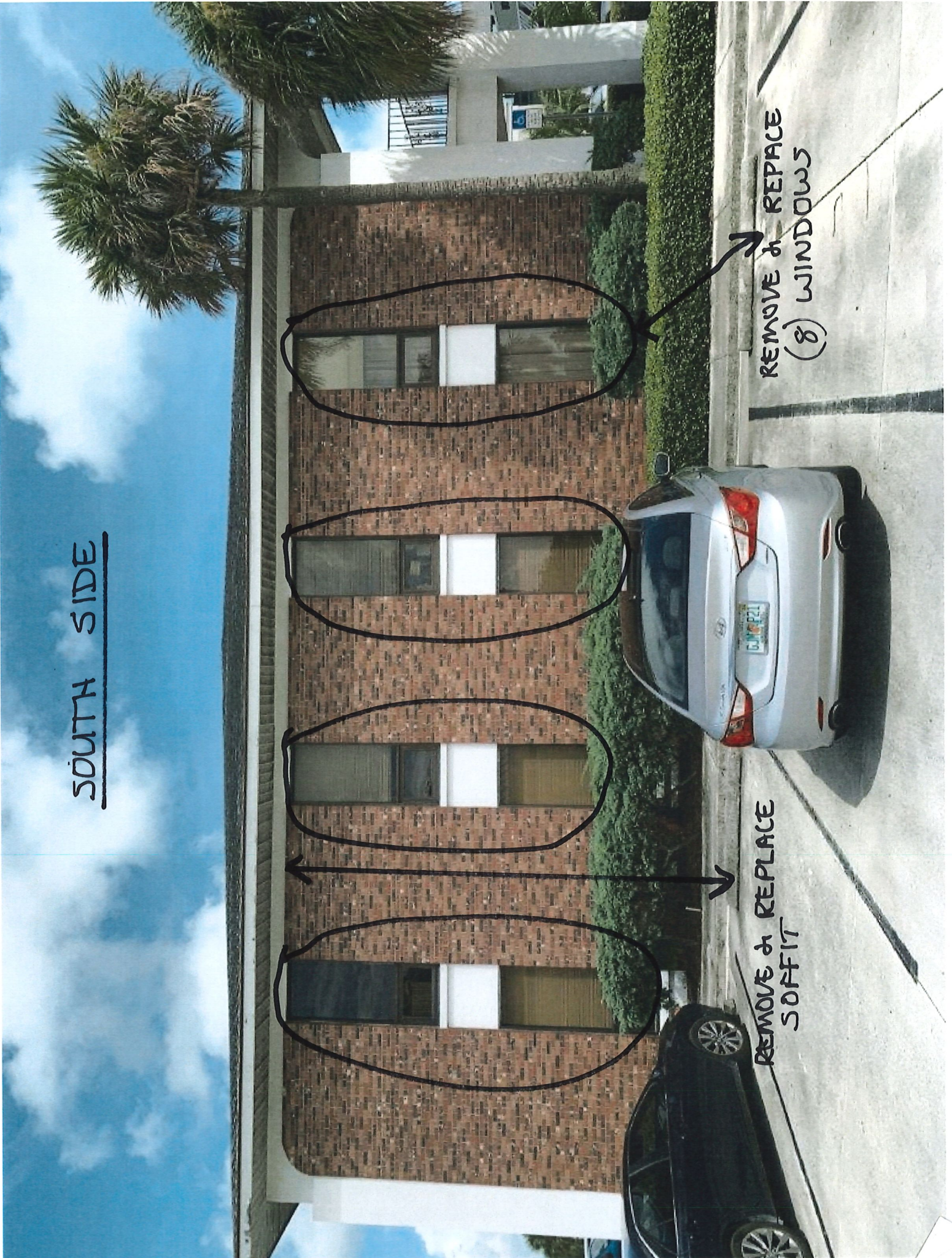
REMOVE & REPLACE

3 REMOVE & REPLACE SIDING GLASS DOORS

REMOVE & REPLACE

SOFFIT

SOUTH SIDE



REMOVE & REPLACE
SOFFIT

REMOVE & REPLACE
(8) WINDOWS

WEST SIDE



REMOVE & REPLACE
SOFFIT

REPLACE
WINDOW &
SILL

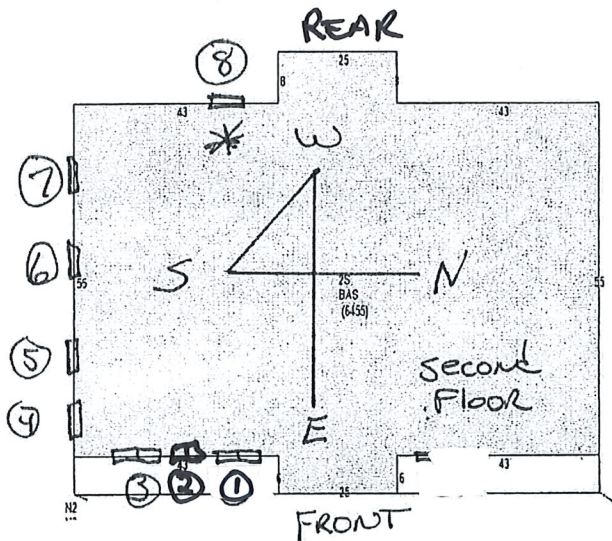


E & B Elite Services, Inc.

5821 Starcher Ave • Ft. Pierce, FL. 34947 • Tel: 772-577-0826 • Email: erlgaines@comcast.net

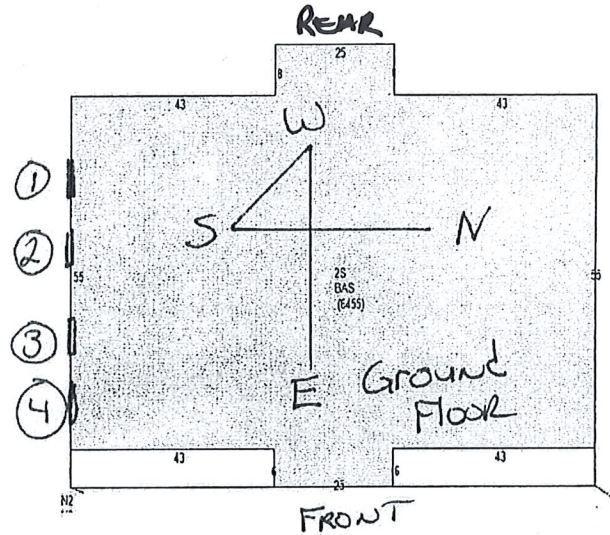
September 9, 2020

311 South 2nd St.



Second Floor

- 1) 110" X 96" Sliding Glass door
- 2) 110" X 96" Sliding Glass door
- 3) 110" X 96" Sliding Glass door
- 4) 39" X 96" Impact window
- 5) 39" X 96" Impact window
- 6) 39" X 96" Impact window
- 7) 39" X 96" Impact window
- 8) 39" X 96" Impact window * Repair window sill *



Ground Floor

- 1) 39" X 96" Impact fixed window
- 2) 39" X 96" Impact fixed window
- 3) 39" X 96" impact fixed window
- 4) 39" X 96" Impact fixed window

Earl L. Gaines

E & B Elite Services, Inc.

5821 Starcher Avenue

Fort Pierce, FL 34947

(772) 577-0826 cell

(772) 465-2351 fax

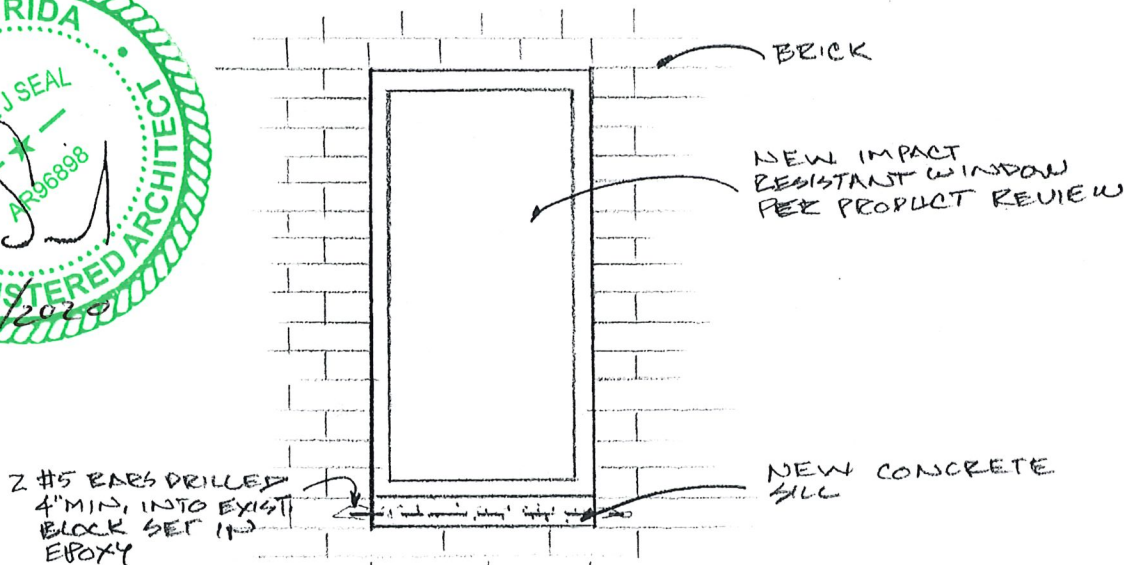
ERLGAINES@COMCAST.NET

CGC#1517445

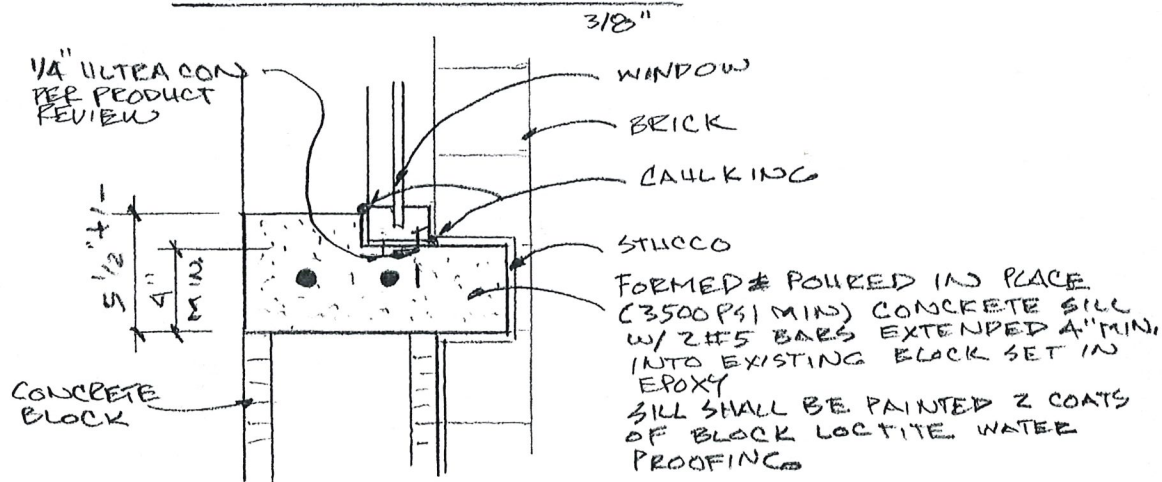
Architectonic Inc

PROPOSED WINDOW AND SILL REPLACEMENT
 FOR 311 SOUTH SECOND ST.
 FT. PIERCE, FLORIDA

2017 FLORIDA BUILDING CODE
 165 MPH, RISK CATEGORY II
 EXPOSURE "C"



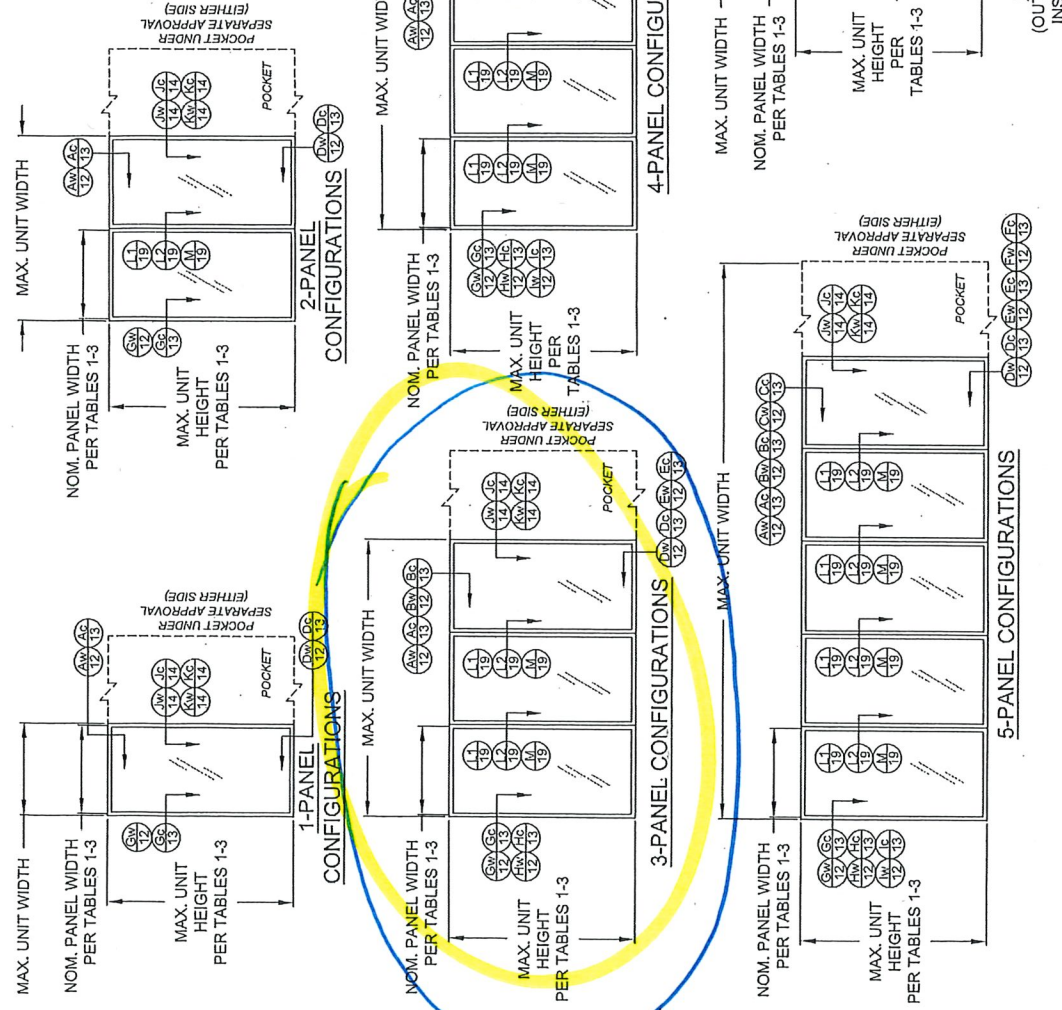
ELEVATION



PRODUCT	OPENING DESIGN PRESSURES (WORST CASE)	PRODUCT DESIGN PRESSURES	MANU.	MODEL #	APPROVAL#	GLASS TYPE	ATTACHMENT METHOD
STOREFRONT WINDOW	ZONE 4 -36.08 ZONE 5 -43.81	-90	CGI WINDOWS AND DOORS	SS-3500	FL# 22574	IMPACT	1/4" ULTRACON @ 3" O.C., 1-3/8" MIN. EMBEDMENT AND 2-1/2" DISTANCE TO EDGE

THE SEAL HEREON IS PROVIDED ONLY TO INDICATE OUR REVIEW AND APPROVAL FOR USE OF PRODUCTS LISTED FOR THIS STRUCTURE. THE ACCEPTANCE OF THESE PRODUCTS AND METHODS OF ATTACHMENT ARE BASED ENTIRELY UPON TEST DATA PROVIDED BY THE MANUFACTURER, WHICH CARRIES ITS OWN ENGINEER'S CERTIFICATION AND IMPLIES NO WARRANTY OR GUARANTEE BY THIS OFFICE FOR THESE PRODUCTS.

EXAMPLE CONFIGURATIONS



CONFIGURATIONS NOTES:

- 1) ALL CONFIGURATIONS SHOWN ARE ALSO AVAILABLE AS POCKET CONFIGURATIONS AT EITHER OR BOTH JAMB LOCATIONS USING DETAIL "Jw", "Jc", "Kw" OR "Kc" INSTALLATION. EXAMPLE: 4-PANEL XXXX IN POCKET (p) CONFIGURATION CAN BE pXXXXp, pXXXX OR XXXXp. OXXX IN POCKET CONFIGURATION CAN BE OXXXp.
- 2) 90° & 135° CORNER CONFIGURATIONS CAN BE A COMBINATION OF ANY 2 STRAIGHT CONFIGURATIONS.
- 3) FOR NOM. PANEL WIDTH, SEE TABLES 1-3.

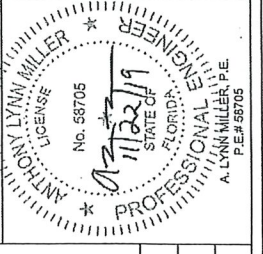
"X" = OPERABLE PANEL,
 "O" = INOPERABLE PANEL,
 "p" = POCKET

○ = DETAIL LETTER
 "W" = WOOD OR METAL INSTALLATION
 "C" = CONCRETE INSTALLATION

○ = SHEET NUMBER

DLO WIDTH = NOM. PANEL WIDTH - 7"
 DLO HEIGHT = DOOR UNIT HEIGHT - 10, 125"
 PANEL HEIGHT = DOOR UNIT HEIGHT - 1, 866"

PRODUCT RENEWED
 in compliance with the Florida
 Building Code
 Expiration No. 19-1126-03
 Expiration Date 2/17/2015
 By: [Signature]
 Michael Deane Product Committee



1070 TECHNOLOGY DRIVE N. VENICE, FL 34275 (941) 480-1600 CERT. OF AUTH. #28296		Designer: EXAMPLE CONFIGURATIONS Title: SERIES 770 ALUM. SGD - LM IMPACT Scale: Drawing No.: SCD-770	Sheet: 2 of 22 NTS Rev: PG10130 C
---	--	--	--

Date: 04/05/17
 Drawn By: JR
 Checked By: JR
 Reviewed: C
 NO CHANGES THIS SHEET.



CERTIFICATE OF APPROPRIATENESS
 TO ALTER A DESIGNATED HISTORIC SITE

COA#20-58 HISTORIC PRESERVATION BOARD APPROVAL ADMINISTRATIVE APPROVAL
 BP # 20-3111

Site address: 903 Boston Avenue

Contributing Non-Contributing Individually Designated

SITE ALTERATIONS:

Request	Conditions	Applicable Standards
The applicant is requesting consideration of approval for installation of white accordion shutters on all windows. Please see attached.	Storm shutters shall be deployed only upon the issuance of a storm warning from the governing agency authorized to issue such warning.	Secretary of the Interior's Standards for Rehabilitation of Historic Properties, Standard 9.

APPROVED:

Board Approval

Administrative Approval

 Suzanne Boardman, Chair Date
 Historic Preservation Board

Maria Lewicka
 Maria Lewicka, AICP 10/01/20
 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@cityoffortpierce.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/Applicant	Ida D Paul 903 Boston Avenue Fort Pierce, FL 34950	E-Mail

Bldg. Permit # _____

COA# 20-58



CITY OF FORT PIERCE

PLANNING DEPARTMENT

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

RECEIVED

SEP 30 2020

CITY OF FORT PIERCE
PLANNING & ZONING

Certificate of Appropriateness Application

Building & Site Information

Address of the Site:

903 Boston Ave, Ft Pierce, FL 34950

Parcel ID #:

2410-706-0055-000-2

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):

Ida D Paul

Mailing Address:

903 Boston Ave, Ft Pierce FL 34950

Phone Number(s):

772-332-6716

Email: _____

Applicant

Name(s): _____

Mailing Address: _____

Phone Number(s): _____

Email: _____

Representative

Name(s): _____

Mailing Address: _____

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, IDA D PAUL as Owner(s) of the subject property do hereby authorize the filing of this application on my/our behalf.

X Ida Paul
Signature of Owner

9/23/2020
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 checked="" 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) _____
- Other (describe) _____

Please provide a detailed description of the proposed work to be performed: Install new white
Accordion Shutters on all window
openings.

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.



MARTIN COUNTY
PLUMBING







Bldg. Permit # _____

COA# 20-59



CITY OF FORT PIERCE

PLANNING DEPARTMENT

RECEIVED

SEP 30 2020

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

CITY OF FORT PIERCE
PLANNING & ZONING

Certificate of Appropriateness Application

Building & Site Information

Address of the Site: 903 Boston Ave, Ft Pierce, FL 34950

Parcel ID #: 2410-706-0055-000-2

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): Ida D Paul

Mailing Address: 903 Boston Ave, Ft Pierce, FL 34950

Phone Number(s): 772-332-6716 Email: _____

Applicant

Name(s): _____

Mailing Address: _____

Phone Number(s): _____ Email: _____

Representative

Name(s): _____

Mailing Address: _____

Phone Number(s): _____ Email: _____

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

Ida D Paul
Signature of Owner

09-21-2020
Date

Description of Requested Work

Please indicate the type of work requested:

- | | | | |
|---|---|---|-------------------------------------|
| <input type="checkbox"/> Fence | <input type="checkbox"/> Shed | <input checked="" type="checkbox"/> Door(s) | <input type="checkbox"/> Roof |
| <input checked="" 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) _____

Other (describe) _____

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

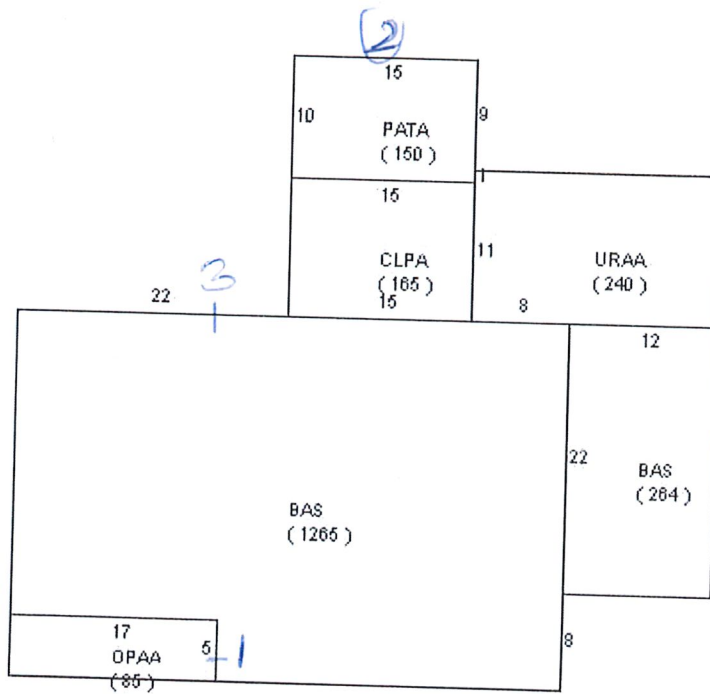
Replacing all three exterior doors and two windows. One in front of property and the other on the right side.

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

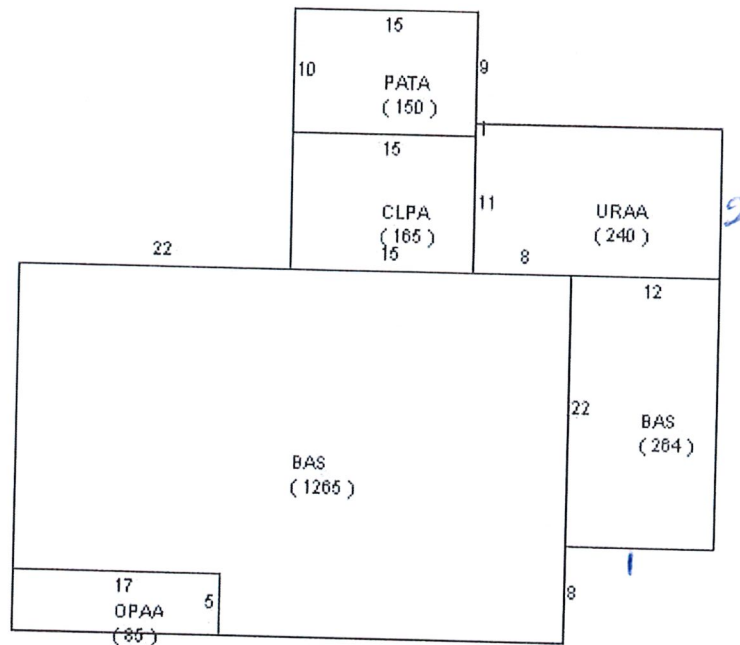
Will the proposed work require a Zoning Variance? No Yes, Code Section(s): _____

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.



Doors Replacement



Window Replacement



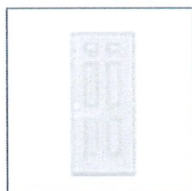




Gallery



CHAT
NOW

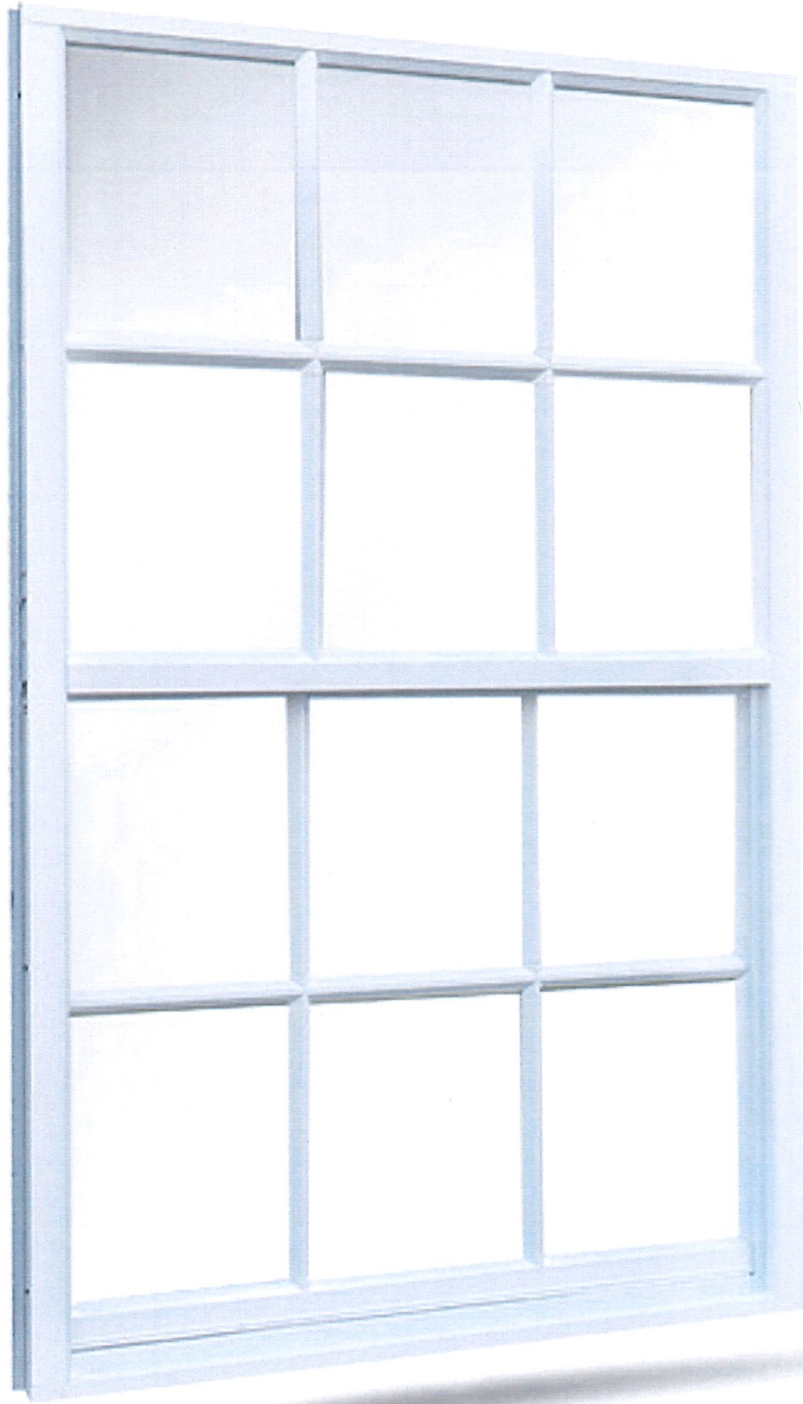








onal good looks with state-of-the-art weather protectio





Bldg. Permit # _____

COA# 20-60

Certificate of Appropriateness Application

RECEIVED
SEP 30 2020

CITY OF FORT PIERCE
PLANNING & ZONING

Building & Site Information

Address of the Site: 220 Orange Ave
Parcel ID #: 2410-503-0083-000-4
Type of Designation: Contributing Non-contributing Site within the _____ Historic District
 Individually Designated Site, City Commission Resolution No. _____

Property Owner/ Applicant Information

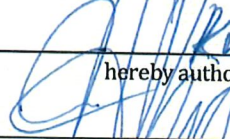
Property Owner(s)
Name(s): Kraaz & Kraaz Finance Inc.
Mailing Address: 124 N. 2nd St. Suite A Ft. Pierce, FL 34950
Phone Number(s): _____ Email: _____

Applicant
Name(s): Glomaster Sign Co., Inc.
Mailing Address: 4141 Bandy Blvd. Ft. Pierce, FL 34981
Phone Number(s): 772-464-0718 Email: signs30@bellsouth.net

Representative
Name(s): James Hart
Mailing Address: 4141 Bandy Blvd. Ft. Pierce, FL 34981
Phone Number(s): 772-464-0718 Email: signs30@bellsouth.net

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



Signature of Owner

9/29/20
Date



RECEIVED
SEP 28 2020
Building Department

CITY OF FORT PIERCE, FLORIDA
BUILDING DEPARTMENT
APPLICATION FOR BUILDING PERMIT
(772) 467-3718 FAX (772) 467-3849
building@city-ftpiercing.com

PERMIT # 20-3201
FBC (2017) 6th Edition
PIN # 289049

PROJECT MANAGER:
CINDY

*Property Address 220 Orange Ave *Date 9/23/20
Parcel ID# 2410-503-0083-000-4 *# of plans submitted 2 *# of CD's submitted _____
(Located on your tax bill)
*Owner Name Kraaz & Kraaz Finance Inc. *Owner Address 124 N 2nd St. Suite A
Phone # () - Fax # () - Cell # () -
Email Address _____

***Required Information**

Type of permit Sign *Valuation \$ 1550.00
*Description of Work: Installation of non illuminated injection molded plastic letters
22 Sq. Ft. Proposed Oceanside Realty Partners
Architect: _____
Phone () - Fax () - Email Address _____
Engineer: Christian Langley - Easy Seals
Phone (888) 371-3113 Fax () - Email Address _____

***CONTRACTOR/APPLICANT INFORMATION:**

City License # 21-00017800 State License # ET0000157
Company Name Glomaster Sign Co., Inc. Qualifier James Hart
Address 4141 Bandy Blvd. City/State Ft. Pierce, FL Zip 34981
Phone # (772) 464 - 0718 Fax # (772) 464 - 2157 Cell # () -
Email Address signs30@bellsouth.net

Occupancy Common Construction Type _____ # of Units _____ # of Stories _____
Sq. Ft. Conditioned Space _____ Total Sq. Ft. 22^{sq}

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 ordinances, state statutes and other applicable rules and regulations have been satisfied. I am also verifying that all sets of plans submitted are identical.

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for electrical work, plumbing, signs, wells, pools, furnaces, boilers, heaters, tanks, and air conditioners etc.

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

INJECTION MOLDED LETTERS 12" X 8'7" OCEANSIDE 8" X 11' REALTY PARTNERS

PROJECT LOCATION:
220 ORANGE AVE
FT LIERCE, FL

Anchor Notes:

- #10-24 studs (6061-T6 Alum or 316 S.S.), centered in stroke width
- Min (3) studs per letter, spaced evenly
- Letters drilled and tapped to receive studs, min (5) threads engaged
- Stud length to accommodate embed to host structure
- Min 1.5" stud embed to hollow CBS (block) or concrete
- Fill holes w/ LiquidNails LN-901 adhesive (or equiv)

1200 N Federal Hwy, #200
Boca Raton, FL 33432
1-888-371-3113
Christian Langley
Florida PE #67382
Cert of Auth #31174



- Sign Height = 30 ft max
- ASD Load Coeff = 0.6
- Kz1=1.0, Kd=0.85, G=0.85
- Zone 4: ± 42.7 psf
- Zone 5: ± 54.4 psf
- Wall components & cladding:
- Risk Category 2 Structure
- V=160 mph • Exposure 'D'
- ASCE 7-10 WIND LOADS:

General - Design is in accordance with the requirements of the Fla. Bldg Code 6th Ed (2017) for use within & outside the High Velocity Hurricane Zone (HVHZ). - This engineering certifies only the structural integrity of those systems, components, and/or other construction explicitly specified herein. - Electrical notes, details & specifications are provided by and are the sole responsibility of the electrical contractor. No electrical review has been performed and no certification of such is intended. - Structural design meets requirements of ACI 318-14, AISI 360-10, ADM1-15, & NDS-15, as applicable. - Steel components shall be coated, painted, or otherwise protected against corrosion per FBC Sec 205.2.2222.6. - Alum components in contact with steel shall be protected against galvanic corrosion per FBC Sec 205.2.2222.6. - Steel welds: E70xx filler alloy. - Alum extrusions: 6063-T6 or stronger, UNO.

Notes: or embedded in concrete shall be painted or protected as prescribed in ADM1-15(1a), or plastic/neoprene spacers provided. - All exposed fasteners shall be SS, or have a protective coating for corrosion protection. - All Welding shall be per AWS requirements. - Aluminum welds: E70xx electrodes. - Steel welds: E70xx filler alloy. - Alum extrusions: 6063-T6 or stronger, UNO.