

The Savoy on Palm Condominium Association, Inc.

Board of Directors Meeting Minutes

June 11, 2018

Call to Order: The Savoy on Palm Board of Directors Meeting was held June 11, 2018 on the Third Floor of The Savoy on Palm Condominium at 401 South Palm Ave, Sarasota, Florida 34236. The meeting was called to order by Robert Hendel at 3:03 p.m.

Determination of a Quorum: Board Members present were Robert Hendel, Leon Ellin, Jim Heskett, and Richard Rivera. It was confirmed that proper proof of notice of the meeting had been conveyed.

New Business:

- **Unit 1003 remodel plans and consideration for approval** – Bill Veal gave a brief description on the remodel plans mainly covering the topics that needed to be approved by the Board including but not limited to removal and replacement of floor tile throughout the unit, removal and replacement of the master bath tub and installing a standalone tub, removal of the tub in a guest bathroom and installing a walk in shower, removal of the existing wall oven and cook top range and replacement with a stand alone oven/range. Mr. Ellin also asked Bill Veal to be sure that the existing range hood is adequate to vent the proposed new range. After a lengthy discussion amongst the Board and the owners in attendance, a motion was made:

MOTION – (Jim Heskett) to approve the proposed remodel plans in two phases:

Phase 1 – consisting of all demolition and installation of the floor tile to begin immediately.

Phase 2 – consisting of all items listed on the submitted drawing that require a permit to be approved by the Board but not begin any of the work listed on the drawing until the permit has been received from the Building Department. It should also be confirmed that the existing range hood is sufficient for the proposed new range.

Motion seconded by Richard Rivera, the motion was approved unanimously.

Owner Comments:

- Gerald Elden asked about a possible starting date and the amount of time need to complete the project. Bill Veal explained that the Boren's would like to start immediately, but the start date will depend on it when it is approved by the Board, and the entire project is expected to take 8 weeks. The noisiest part of the project will be during the demolition and removal of the floor tile. The contractor anticipates this portion taking approximately one week.
- Gerald Elden asked that in the event his unit has a showing scheduled and there is demolition or any noisy work in progress would it be possible to stop until the showing had been completed. Bill Veal stated that he would ask the contractors to comply if a showing has been scheduled.

Adjournment: There being no further business, the meeting was adjourned at 3:24 p.m.

CONSTRUCTION RULES

This outline provides a minimum guideline and shall not be construed as an all-inclusive list of regulations and requirements. Its purpose is to protect the safety and comfort of all residents and to preserve the integrity of the building structure and those elements which are community, rather than private property. Unit Owners are responsible for the actions of and any damage caused by their contractors.

Remodeling projects have been divided into four categories, which are defined on the following pages, along with notification and approval requirements. The four categories are:

Category A: Project so minor that no formal construction review is required but if possible management should be notified in advance.

Category B: Projects may include items from Category A, in addition to but not limited to possible interruption of water, alteration of unit walls, minor plumbing and electrical

Category C: Complex projects requiring the Board's written approval and inspection.

Complex projects may include items from Categories A and B, in addition to but not limited to possible involvement of common elements and/or extensions or interruptions to electrical, telephone, cable TV, sprinkler or plumbing systems

Category D: Projects requiring Board approval and signing of License Agreement.

Category D projects may include items from Categories A, B, and C, in addition to possible extension into common areas space and other significant construction or renovation projects.

Specifics of the four categories:

Category A: Project so minor that no formal construction review is required.

Category A projects do not affect any common elements, i.e. (includes, but is not limited to):

1. Painting and/or wallpapering (to the extent that a commercial contractor is involved and storing paint and/or solvents on the premises overnight).
2. Installation and/or removal of carpeting and pad.

Requirements: The Savoy's on-site maintenance supervisor should be notified in advance, if possible.

Minor projects requiring Management notification and possible inspection.

Category B:

Category B projects may include items from Category A, in addition to possible interruption of water, alteration of unit walls, minor plumbing and electrical, i.e. (includes, but is not limited to):

1. Replacing kitchen cabinets, if placement of cabinets varies from original installation.
2. Sink, faucet, or bathtub replacements.
3. Refrigerator replacement involving ice maker or water faucet.
4. Dishwasher replacement.

Requirements: Management notification and written approval is required. Approval may take up to one week. If any of the above items are to be relocated, Management submits to the Board or its representative. Certificates of Insurance from all contractors must be submitted to Management prior to Management granting approval. Contractor and Owner must abide by further requirements, changes, etc., if applicable, noted on plans by Management or Board of Directors. Work is subject to inspection by Management. If work involves exact replacement of an outdated or malfunctioning appliance, submission to Association's architectural representative is unnecessary and work may progress immediately upon proper shutoff of water supply.

Category C: Complex projects requiring Board written approval and inspection.

Complex projects may include items from Categories A and B, in addition to possible involvement of common elements and/or extensions or interruptions to electrical, telephone, cable TV, sprinkler or plumbing systems, i.e. (includes, but not limited to):

1. Termination or rerouting of plumbing, electrical or telephone systems.
2. Altering or closing of plumbing pipes.
3. Wall removal, relocation or addition.
4. Installation and removal of hard surface flooring (marble, ceramic tile, hardwood flooring, etc.)
5. Installation of "Jacuzzi", whirlpool, wet bar, etc.
6. Any action affecting operation of ventilation system.
7. Kitchen pass-throughs.
8. Any action affecting operation of sprinkler system.

Requirements: Submission of drawings to Board.

Written Board approval is required which may take up to two weeks following receipt of the plans by the Board or its representative. Certificates of Insurance from all contractors must be submitted to Management prior to Management granting approval. Contractors and Owners must abide by further requirements, changes, etc., noted in the Board's written approval. Inspection by the Board or its representative is required prior to closing up of any

walls or other areas concealing any plumbing, sprinkler, ventilation or electrical work or flooring underlayment. Category D: Projects requiring Board approval and signing of License Agreement.

Category D: projects may include items from Categories A, B, and C, in addition to possible extension into common areas space, i.e. (includes, but is not limited to):

- 1 Moving location of entry door(s) into common area corridor.
- 2 Typical unit combinations instituted by the developer are allowable. Any other configuration requires Board approval.

Requirements: Submission of architectural drawings to Board.

Written Board approval is required and may take up to 30 days following receipt of plans by the Board. Certificates of Insurance forms for all contractors must be submitted to Management prior to the Board granting approval.

Signed License Agreement required. Contractors and owners must abide by further requirements, changes, etc., noted in the Board's written approval. Inspection by the Board or its representative is required prior to closing up of any walls or other areas concealing plumbing, sprinkler, ventilation or electrical work or flooring underlayment.

The following items must be submitted to Board or its representative to obtain approval:

1. Drawings of demolition and proposed additions.
2. A written scope of work.
3. Copies of all selected contractors' proposals.
4. Certificates of Insurance forms for all contractors must be submitted to Management,

Additional Requirements:

After approval from the Board is received, the following must be submitted prior to commencement of project:

- 1 A list of all contractors and subcontractors (names, addresses, telephone numbers) so Management can verify authorization to enter the building and the units.
- 2 Approximate length of time remodeling will take.

- 3 Date remodeling will begin—Management needs to notify Association members at least five (5) business days prior to commencement of the project.
- 4 Copies of all required permits.
- 5 Remodeling agreement signed by Unit Owner (see last page of these guidelines).
- 6 License Agreement signed by Unit Owner, where applicable (see Category D).

Remodeling Guidelines

IA General Conditions

1. Architectural Fee: An hourly architectural fee, at cost, shall be charged to the Unit Owner for review of plans, as required by each specific project and inspection during construction.
2. Insurance: The Unit Owner must provide a Certificate of Insurance in the amount of \$500,000/1,000,000 bodily injury and \$1,000,000 property damage naming Savoy on Palm Association, its agents and employees and the Association's architectural representative. A Certificate of Workers' Compensation in statutory amounts must be provided to the Management Office.
3. Designated Elevator: Transporting of all material or debris must take place through the designated elevator only and must be scheduled through the Management Office. The designated elevator may not be locked off before 8:00 A.M. or after 5:00 P.M. Monday through Friday and 10:00 A.M. to 4:00 P.M. on Saturdays. Workmen must use the designated elevator at all times. All material and equipment must be loaded and unloaded in the loading zone area designated by Management and immediately transported to the unit. Workmen will be required to leave an appropriate ID with the Management office while in the building. Contractors' vehicles must be removed from the loading zone area immediately after unloading. Failure to comply will result in vehicle being towed.
4. Work in Accordance with Plans:
All work is to be performed in strict accordance with the final plans which have been submitted and approved by the Board. If changes to the approved plans are to be made, Management must be notified immediately and plans resubmitted to the Board or its representative for approval before construction can commence or continue.
5. Work in Accordance with Applicable Codes: The work will conform to and be in accordance with Savoy on Palm Condominium Association Declaration of Covenants, Conditions, Restrictions and Easements, Association Rules and conform to all governmental codes and regulations in effect at the time construction is initiated.
6. Qualifications of Contractors-Evidence: The Unit Owner must be able to Provide evidence that all work is to be performed and completed by a qualified individual capable of completing all work in a safe and workmanlike manner. (References and/or Licenses)
7. Inspection of Work: All work is subject to inspection by Building personnel

and/or the Board's representative and charged to the Unit Owner at cost. Management reserves the right to stop or cause to delay any work which has not been approved or which deviates from the approved plan. The Board or its representative will provide a construction script outlining at which points construction must be inspected and documented in writing by same before construction may continue.

8. As-Built Plan: Within 30 days after completion of the work, the Resident must supply the Building Management with a final As-Built Plan.
9. Exterior Alteration: No alteration may be made to the exterior of the Unit without Board approval.
10. Damage to Common Elements: The Unit Owner is responsible for any damage or dirt caused by their contractors to the common elements or any other unit. Inspection by Management of the corridor floors, walls, doors and light fixtures, etc., will be made before, during and after construction. Any damage repair or cleaning necessary will be charged to the Unit Owner. Contractor is to place clean tarps throughout the corridor where carpeting may be subject to damage from dirt. Corridor vacuuming is to be done at the end of each workday by contractors. At no time may any work take place by the contractors in the Common elements. Delivery and removal of materials and debris must be confined to carts and dollies appropriate for transportation over carpeting. Any cart or dolly must fit easily through Common element doorways. No materials shall be kept in the Common elements.
11. Trash Chutes: The use of the trash chutes for the disposal of construction debris is strictly prohibited. Fines will be imposed against Unit Owners whose contractors violate this rule.
12. Restrooms: Unit Owners must provide their workmen usage of private bathroom facilities. Public restrooms are not available for use by workmen.
13. Loitering: At no time may the workmen congregate or loiter in any Common areas of the building. There is no smoking allowed anywhere on the Savoy on Palm Condominium common areas.
14. Construction crew: One member of the construction crew working in the unit must speak English.

B Noise/Hours of Construction

1. "Type 1" noise is usually associated with construction, such as chipping, drilling and pounding. Noise which can be easily transmitted from one Unit to another through common walls, floors, ceilings and chases is considered Type 1 noise. Remodeling which creates Type 1 noise is allowed at the following times:

9:00 A.M. to 5:00 P.M. Monday through Friday

10:00 A.M. to 4:00 P.M. Saturday

No construction resulting in "Type 1" noise is permitted on Sunday or Holidays.

2. "Type 2" noise is usually associated with minor remodeling or repairs which only occasionally penetrate through the perimeters of the Unit. Work such as painting and wallpapering are not considered noisy work, but to enable workers to enter the Building approval must be obtained. Carpet removal, etc., would constitute "Type 2" noise and is allowed during the following hours:

8:30 A.M. to 5:00 P.M. Monday through Friday

10:00 A.M. to 4:00 P.M. Saturday

No construction resulting in "Type 2" noise is permitted on Sunday or Holidays.

TECHNICAL SECTIONS MUST BE REVIEWED BY APPROPRIATE PROFESSIONALS.

C Electrical

1. All electrical work must be completed by a licensed electrician in a safe and workmanlike manner and must satisfy all applicable codes.
2. Electrical panels must have an unobstructed clearance for minimum of thirty (30) inches. Adjustable shelves and removable closet rods are considered obstructions.
3. No wall, floor or ceiling electrical boxes may be buried after the removal of a receptacle or fixture until all wiring no longer in use has been removed.
4. Electrical panels must be covered or protected at all times during construction.
5. Ground Fault Interruption receptacles must be used in all bathrooms, kitchens, laundry, wet bars and all other areas where water is used or present.
6. All steam showers, sauna or whirlpool electrical components and enclosures must be approved by the Board or its representative prior to installation in the Unit.
7. All work to be completed on telephone lines must be completed by a qualified low voltage telephone line specialist as approved by Board or its representative.
8. All work to be done on Cable TV lines must be completed by the building approved cable company.
9. Channeling of support columns is strictly prohibited.
10. Channeling of structural floors and ceilings is strictly prohibited. (See Section F below for additional guidance and requirements).

D. Plumbing

1. All plumbing work is to be completed by a licensed plumber in a safe and workmanlike manner and must satisfy all applicable codes.
2. The relocation of water risers, waste lines, open site relief drains or venting

stacks is strictly prohibited.

3. Any connections made to the building venting or plumbing must be pre-approved and must be inspected and approved in writing by the Board or its representative prior to walls being closed up.
4. Individual shutoff valves are required for all newly installed fixtures.
5. Dielectric unions are mandatory on all domestic plumbing lines, where applicable.
6. Any drain line which exceeds a five foot (5') run from the fixtures to the main waste line is required to be properly vented.
7. For whirlpool, Jacuzzi, sauna and spa installations, manufacturers' specifications indicating weight of "tub" must be submitted for Board approval, and must comply with all governmental codes.

E. Mechanical and Structural

1. Any work to or modification of the common mechanical ductwork, plumbing or fire protection piping, structural column (support pillars) or concrete floor slabs (top and bottom) is strictly prohibited.
2. Connections to any venting system for the purpose of exhausting a dryer or other appliances or devices must be approved by Management.
3. All construction, including raised floors, wall and ceiling decorative finishes must be detailed to permit removal of and service to I-IVAC units.
4. Superimposed live loads shall not exceed 40 pounds per square foot.

F. FLOORING Each Unit Owner who elects to install in any portion of his, her or its Unit hard surface flooring materials (wood flooring or pre-engineered flooring) shall first be required to install an approved sound underlayment material of such kind and quality equivalent or superior to 1/4 inch of cork and perimeter sound insulation material installed in accordance with the procedures as generally provided below. Each Unit Owner is required to submit for approval to the Board of Directors or its representative the proposed hard surface floor underlayment material. Written approval for the proposed materials is required prior to installation of hard surface flooring. Noble seal SIS (sound insulation sheet) has been determined to be quality equivalent or superior to 1/4 inch cork and is recommended for use under all tile or stone flooring. The installed sound insulation material must be inspected and approved prior to installation of the hard surface flooring. Installation procedures shall meet or exceed the following:

1. Isolation Barrier:
 - a. At the perimeter of the entire floor, and the periphery of all protrusions to that floor; fiberglass board (6-15 pd) not less than 3/8 of an inch (9.525 millimeters) thick, to minimize flanking, should be used within 1/4 inches (6.35 millimeters) of the finished surface.

- b. Closed cell polyethylene foam (2.7-9 pcf) not less than 1/4 of an inch (6.35 millimeters) may also be used as the perimeter isolation barriers.
 - c. The fiberglass board or the polyethylene foam can be cut into strips and held in place with a few spots of acoustical sealant. If the strips are too long they can easily be trimmed within the 1/4 inch of the finished surface after the tile is grouted, therefore keeping any hard residue out of the perimeter grout joints.
2. After the tile is set and grouted, additional time should be spent to check the perimeter of the entire floor and the periphery for any protrusions such as pipes, so as not to have any of the mortar, bond coat, or grout, touching the walls or any protrusions that penetrate the floor. Should any of the hard material from the installation make contact between the tile or setting bed and the wall, or a penetrating protrusion, a large reduction in the sound rating will occur. After grouting, but before the edges are caulked, trim the polyethylene sheeting back to the top of the fiberglass or polyethylene foam edging.
 3. A sealant is required at the perimeter of the entire floor and the periphery of all protrusions to that floor.
 - a. This joint shall be 1/4 inch wide (6.35 mm) from the finished top of the tile. This joint must be filled with an elastomeric sealant or an acoustical sealant. Hard grout is unacceptable.
 - b. This caulking can be done before or after grouting as long as the hard grout is left out of the joint between the floor and the wall and around the periphery of any protrusion.
 - c. If USG acoustical sealant is used, the joint can be painted to conform to the color of the grout used in the field.
 - d. Dow-Corning and G.E. Silicone sealant comes in a variety of colors to harmonize with the color of the tile.

G. Windows

Alterations made to the perimeter window wall system are strictly prohibited.

H. Miscellaneous

1. Remodeling construction must begin within six (6) months of Board approval or documentation must be resubmitted.
2. Any questions regarding these Construction Guidelines may be directed to the Management Office.

BOARD APPROVAL

THE SAVOY ON PALM Condominium Association has reviewed the proposed remodeling plans and has:

APPROVED the project in two phases:

PHASE 1 – Demolition and Flooring approved to begin immediately.

PHASE 2 – All items requiring a permit from the City of Sarasota approved to begin after the permit has been approved and received.

Signature Robert Hendel Title VICE-PRESIDENT
ROBERT HENDL


Per your schedule, these are the stages that will require an inspection by Management:

- Proper installation of sound proofing at various stages of installation
- Copy of permit with all final inspections completed for our file
-
-
-
-

REJECTED DUE TO:

REMODELING AGREEMENT

The undersigned has received THE SAVOY ON PALM Condominium Association Construction Rules and agrees to abide by the rules set forth therein.

Owner Name	Unit #	Telephone #	Date
Kathleen Boren <small>Signature</small> 	1003	772-341-0215	06 5 2018

NOTICE TO THE SAVOY ON PALM
CONDOMINIUM RESIDENTS

Dear SAVOY Resident:

Please understand that The Savoy on Palm Condominiums approves architectural plans and inspects work performed on units in this Condominium solely for the purpose of ensuring conformity with the Condominium Declaration. Please sign below to indicate your acknowledgment and acceptance of this fact, and to waive any claims for damages against The Savoy on Palm Condominiums relating to the construction work being performed in your Unit. Please understand that this process protects all of the residents at Savoy on Palm Condominium and will make it a better place to live.

THE SAVOY ON PALM CONDOMINIUMS:

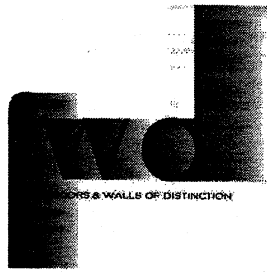
By: _____

Its: _____

(Date)

UNIT OWNER(S) UNIT # _____

(Date)



①

The Savoy on Palm
Condominium Association, Inc
401 S Palm Ave
Sarasota, FL 34236

June 1, 2018

RE: FLOORING RENOVATION UNIT 1003 BOREN

Coming forth on this day to present the scope of marble work in the above mentioned unit.

We, Michelle Turcotte, Inc dba. Floors and Walls of Distinction, a corporation licensed and insured in the State of Florida.

Please review the following for approval:

ENTIRE UNIT FLOORING

Remove and dispose of all existing deteriorating limestone flooring

Using a dustless method of removal eliminating approx. 80% of dust into the air rather than without the special equipment and air filters

Removal and disposal of existing setting materials - Thin set / mud bed and existing underlayment

Professional Installation of polished marble – size 24"x24'

Sound deafening / Crack suppression – NEW to be provided and installed through all areas receiving new flooring.

****Material Proflex MSC-90 ml and Proflex primer to insure bonding*

Supply materials and labor to complete task

GUEST BATH OFFICE

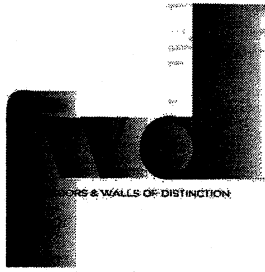
Remove and dispose of tub surround marble / including wall board taking down to studs

Replace walls with Proflex Backer Board

Application of 2 x coats of waterproofing membrane Proflex Hydro-Seal

Professional Installation of new marble with Proflex 42 thin set to achieve Gold 15 year warranty

2434 Stickney Pt Rd – Sarasota, FL 34231 USA
www.floorsandwallsofdistinction.com
941.924.4849
contactfloorsandwalls@gmail.com



2

There will be decorative wall coverings added behind the toilet floor to ceiling as well as the adjacent wall floor to ceiling . 3 x 12 wall tile installed in a herringbone pattern

RE: SLAB WORK RENOVATION UNIT 1003 BOREN

MASTER BATH

Remove and dispose of existing marble countertops

Replace with same footprint of new 2 cm. polished empress green marble

KITCHEN

Remove and dispose of existing granite counter tops

Replace with same footprint at sink and stove wall with the following exceptions:

No replacement of granite 4" back splash

No replacement of granite on built in oven wall area

Island granite will be removed and the replaced.

All kitchen countertops to be replaced with 2cm White Sea Glass and professionally installed and finished

New kitchen backsplash professionally installed with glass tile 2"x8" in a herringbone pattern

ELEVATIONS

These areas are specified to receive wall covering in the form of 2 cm polished marble, empress green in color. Floor to ceiling:

Professionally fabricated and installed:

Foyer entrance – 2 x 2-sided decorative columns – floor to ceiling

TV wall – including returns of approx. 1 foot

In Unit Foyer Wall

Recessed wall adjacent TV Wall

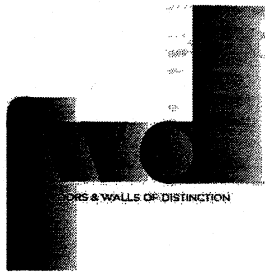
To be fabricated and professionally installed and finished

2434 Stickney Pt Rd – Sarasota, FL 34231 USA

www.floorsandwallsofdistinction.com

941.924.4849

contactfloorsandwalls@gmail.com



SUBCONTRACTORS

All subcontractors to be bound to Michelle Turcotte Design, Inc dba Floors and Walls of Distinction by liability insurance policy. All Subcontractors to either (A) submit proof of workers compensation exemptions or (B) Workers Compensation Insurance policy prior to entering jobsite.

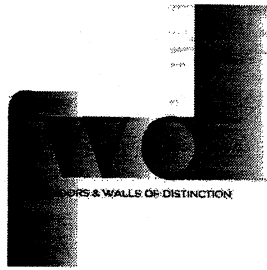
Demolition team will be equipped with a hauling trailer for daily removal of construction debris.

We do not foresee a need for a dumpster on site at any time to complete this project.

Michelle Turcotte Design, Inc

Db, Floors and Walls of Distinction

Michelle Turcotte – owner / operator



Michelle Turcotte -
Brief bio

1994 - 2010 Florida Corporation vice pres and owner
Atlantic Tile and Marble Inc,
dba Ravenna Distinctive Home Finishes
2 x International Award winning Company
Coverings International flooring Competition 2001 & 2004
2004 - Award of recognition from The National Tile Council of The Americas
proper design and installation of Onyx
2013 - currently Michelle Turcotte Design, Inc
dba Floors and Walls of Distinction

The Vue
Supply and installation of 1750 sf of European hardwood flooring
Jan 2018

Hyatt Residence - Siesta Key
Job performed during full capacity at Hoilday Season
Demolition of all flooring - porcelain tile approx. 2300 sf
Replace with sound deafening padding and coretec waterproof luxury vinyl
Jan 2018

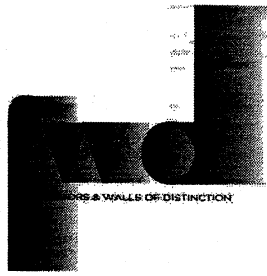
Sunset Royale - Siesta Key
Demolition of all flooring in entire unit and showers
Provide materials and installation - 2018

1500 sf 24 x 24 Italian Porcelain for Architect Christopher Gray (personal residence)
supply material, demo of existing flooring and installation
completed June 2018

Dolphin Bay - JRF Contracting
Floor and wall work - installation only
porcelain tile 2017

Cheryl Goss
3,000 sf demolition of existing flooring
supply and installation of European hardwood - 2017

Murray Custom Homes
The Lake Club
MODEL - The Resolute
All tile and hardwood flooring
Material and labor
Completed
2016
many homes for Steve Murray over the years



5

Rivo - Penthouse
Onyx Development
supplied all materials for unit - 32x32 Italian porcelain tile 2016

Completed Ft Harisson Hotel / Church of Scientology Headquarters
Over 5 million dollars of Hardwood flooring and Natural Stone
Completed 2009

Sarasota Surf and Racquet Club - Siesta Key
Supplied material, scheduled and executed the remodel of all bathroom shower stalls (over 200) while faulty copper piping was changed to CPVC
many owners opted for full flooring renovations at this time
Also All Common areas in 12th floor Tower building
Removed all exterior tile and replaced
4.2 million dollar contract
completed in 2007

2 x penthouses in La Bella Cera - Golden Gate Pt

1 - all 24 x 24 polished marble in a checkerboard pattern
material ordered in blocks from Spain and custom cut and polished for this unit
All Bathroom and elevations

Material and labor
completed approx - 2005
1 x unit / Italian reclaimed hardwood for The Littlestar family
and all tile and marble in unit finished approx 2005

Venice - Dr Richard Devita
Personal res
20,000 sf of interior marble
11,000 sf exterior deck and balconies in marble
2,000 sf guest house
completed 2005



06-03-2016

6

JEFF ATWATER
CHIEF FINANCIAL OFFICER

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

*** * CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW * ***
CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE DATE: 06/03/2016 EXPIRATION DATE: 06/03/2018

PERSON: TURCOTTE MICHELLE M

FEIN: 462614624

BUSINESS NAME AND ADDRESS:

MICHELLE TURCOTTE DESIGN INC
3952 PALAU DR
SARASOTA FL 34241

SCOPES OF BUSINESS OR TRADE:


1- FLOOR COVERING INSTALLATION- R

IMPORTANT: Pursuant to Chapter 440 . 05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

QUESTIONS? (850) 413-1600

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

<p>STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION CONSTRUCTION INDUSTRY CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW</p>  <p>EFFECTIVE: 06/03/2016 EXPIRATION DATE: 06/03/2018</p> <p>PERSON: MICHELLE M TURCOTTE</p> <p>FEIN: 462614624</p> <p>BUSINESS NAME AND ADDRESS: MICHELLE TURCOTTE DESIGN INC 3952 PALAU DR SARASOTA, FL 34241</p> <p>SCOPE OF BUSINESS OR TRADE: 1- FLOOR COVERING INSTALLATION- R</p>	<p>IMPORTANT</p> <p>F Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.</p> <p>O</p> <p>L</p> <p>D</p> <p>H Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt.</p> <p>E Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.</p> <p>QUESTIONS? (850) 413-1609</p>
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CUT HERE

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

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11



MICHE-3

OP ID: SP

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
06/06/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Gifford-Heiden Ins - NG/IG 111 E Venice Avenue Venice, FL 34285 Victor L. Garraus 941-484-0681		CONTACT NAME Victor L. Garraus PHONE (A/C, No, Ext) 941-484-0681 FAX (A/C, No) 941-485-3835 E-MAIL ADDRESS victorgarraus@giffordheidenins.com	
INSURED Michelle Turcotte Design Inc dba Floors and Walls of Distinction 3952 Palau Drive Sarasota, FL 34241-5841		INSURER(S) AFFORDING COVERAGE INSURER A: Southern Owners Ins Co INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 10190	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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

INSR. LTR.	TYPE OF INSURANCE	ADDL. SUBR. INSR. / MOD.	POLICY NUMBER	POLICY EFF. (MM/DD/YYYY)	POLICY EXP. (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO. SECT. <input type="checkbox"/> LOC OTHER:		20244777	05/20/2018	05/20/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PROP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE/OFFICER/ MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - PA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES: (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER SAVOY-1 The Savoy on Palm 401 S Palm Ave Sarasota, FL 34236	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Victor Garraus</i>
---	--

Floor
Sound Proof

PROFLEX®

MSC

f crack Suppression

- Cooler weather will also increase set time.
- Protect Primers from freezing.

4. TECHNICAL DATA

Property	Test Method	Result
Total Thickness		90 mil.
Fabric Thickness		6 mil.
Elongation	ASTM D882	350% min.
Tensile MD	ASTM D1682	1270 psi
Pliability	ASTM D146	Pass-25
Adhesion to Plywood	ASTM D1790	8 lb/in.
Adhesion to Primed Concrete	ASTM D903	10 lb/in.
Impact Insulation Class (IIC)	ASTM E989-89 ASTM E492-90	68*
Sound Transmission Class (STC)	ASTM E90-02	72*

* Sound testing performed as to ASTM E90-02, ASTM E989-89, ASTM E492-90. Test conducted on 8" concrete slab with a suspended drywall ceiling.

APPLICABLE STANDARDS ASTM International (ASTM) ANSI American National Standard Institute

- ASTM C627 "A standard test method for evaluating ceramic floor tile installation systems using the robinson-type floor tester: rated "extra heavy".
- ANSI 118.12 "ANSI specifications for crack isolation membranes for thin-set ceramic tile and dimension stone installation. Meets or exceeds ANSI 118.12.
- ANSI 118.10 "ANSI specification for load bearing , bonded, waterproof membranes for thin-set ceramic tile and dimension stone installation meets or exceeds ANSI 118.10.

5. INSTALLATION

Applications Instructions

PROFLEX® elastomeric membranes, when properly installed in accordance with the following installation guidelines, will provide years of protection for finish flooring installations. In addition to these instructions, installers shall also refer to the most current edition of the following publications: American National Standards Institute (ANSI) publications. Tile Council of North America (TCNA) Handbook for Ceramic Tile Installations The Marble Institute of America (MIA) Dimension Stone Design Manual. Manufacturer's instructions of selected setting materials, substrates, sub-floors, or other manufacturers being used in the total, or any part of, an installed flooring system with PROFLEX® Consult your selected manufacturer of these above mentioned components to ensure selected products are compatible with PROFLEX® elastomeric membranes.

Exclusions

PROFLEX® should not be installed without contacting technical support for including, but not limited to, the following conditions: Expansion or structural design joints in concrete slabs, Out of plane, or structural movement cracks. Horizontal cracks that exceed 3/8" (10mm) Areas where moisture vapor or hydrostatic pressure exceeds 5#-1000sqft-24hrs, as tested using a Calcium Chloride (CaCl) test. Substrates installed not in compliance with industry standards. Substrates that have not been approved by PROFLEX® in this document, or by written authorization from a PROFLEX® representative.

Surface Preparation of Selected Substrates

Concrete Substrates shall be in place a minimum of 28 days. Concrete shall be installed in compliance with industry standards, and concrete manufacturer's instructions. The surface shall have a smooth finish and be free from voids, sharp protrusions, and loose aggregate. Substrate temperatures should be between 40oF and 90oF Concrete shall be structurally sound, dry, clean, and free of dirt, oils, grease, loose peeling paint, concrete sealers or curing compounds, cement laitance, and other similar bond inhibiting materials. Rough or uneven surfaces should be made smooth with a Latex Portland cement underlayment to provide a

wood float or better finish. Do not level with asphalt based products. Concrete should be tested for both moisture vapor transmission and hydrostatic pressure, by use of a Calcium-Chloride (CaCl) test. Consult technical support if test readings indicate a reading greater than 5 # per 1000 sqft-24hours. Existing joint openings larger than 3/16" must be prepared and filled with an approved caulking or sealant prior to the application of PROFLEX®.

Patching, Self Leveling Compounds, Lightweight Gypsum Concrete (Gyp-Crete®) shall cured to the minimum manufactures requirement for moisture sensitive installations. The surface shall have a smooth finish and be free from voids, sharp protrusions, and loose aggregate. Substrate temperatures should be between 40oF and 90oF and shall be structurally sound, dry, clean, and free of dirt, oils, grease, loose peeling paint, sealers or curing compounds.

Plywood must be a minimum of two (2) layers 5/8" exterior grade plywood. Plywood shall be securely fastened in accordance with industry standards. Maintain a 1/8" gap between plywood sheets and all surfaces they abut. Joints in the top layer should be offset from the joints on the bottom layer. It is the responsibility of the installer to verify the deflection of the floor structure and sub-floor does not exceed L/360 of the span under combined live or dead loads. The substrate should be tested for both moisture vapor transmission and hydrostatic pressure, by use of a Calcium-Chloride (CaCl) test. Consult technical support if test readings indicate a reading greater than 5 # per 1000 sqft-24hours

Other Substrates

All other substrates and or sub-flooring systems shall be installed in a manner approved by both the product manufacturer and using an appropriate installation method as recommended in the most current edition of the publications mentioned in page 1, of Application Instructions. Concrete Patching and Leveling compounds should be applied only after a consultation with PROFLEX® technical staff. (1-877-577-6353) or at technical@proflex.us. Substrates should be tested for both moisture vapor transmission and hydrostatic pressure, by use of a Calcium-Chloride (CaCl) test. Consult technical support if test readings indicate a reading greater than 5 # per 1000 sqft-24hours.

Priming

For floors, interior applications, Ceramic Tile, Porcelain Tile, Marble or Stone, engineered wood, hardwood floors.

Priming: Stir or shake PROFLEX® Primer thoroughly. Apply primer with a long nap roller, brush, or spray application. Apply evenly at 300-400 sq.ft. per gallon, with 100% surface coverage. The PROFLEX® Primer has dried satisfactorily when the surface is tacky, but does not transfer when touched. (Note: The primer does not serve as an adhesive, over-application of the product will increase drying times and may compromise the overall bondability of PROFLEX® membranes to the substrate)

Membrane Application

If PROFLEX® is to be used as a vapor barrier, apply Rubber Seam Tape (PROFLEX® RST) beneath all seams, after the surface has been primed. The 4" rubber seam tape should be centered under every seam. The RST will need to be pre-positioned and installed prior to the installation of the PROFLEX® membrane. Place PROFLEX® Membrane with release paper still attached over the area to be treated. Unroll the membrane and cut leaving a 2"-3" excess at one end. *PROFLEX® Hydra-Seal may be used in lieu of the RST at seams for waterproofing applications. Hydra-Seal and mesh may also be used with the membranes for flashing up the sides of the walls to the top of the membrane.*

Method 1: Fold membrane lengthwise. Peel ½ of the release paper from the leading edge of the membrane and slowly pull the release paper toward you, exposing the tacky surface of the membrane and carefully attaching the membrane onto the primed surface, avoiding wrinkles and bubbles.

Method 2: Roll up ½ of the membrane, leaving the other half unrolled. Cut the release paper from the portion of the membrane and slowly pull the release paper toward you, exposing the tacky surface of the membrane and carefully attaching the membrane onto the primed surface, avoiding wrinkles and bubbles. Repeat the procedure with the unrolled portion of the membrane.

Additional Instructions on membrane application

For full coverage application, carefully butt edges (overlapping will cause the floor to become uneven, but not affect performance). Immediately after installation press membrane into place working out from the center of the membrane by applying heavy pressure with the flat side of the trowel, or use a 75-100# roller. Protect exposed membrane and companion products from dirt, traffic, and harmful elements until flooring is installed, grouted, and cured.

Setting Materials

All mortars and thin-sets must meet or exceed ANSI 118.11. Urethane Wood adhesives may be used for wood installations, consult manufacturer for product suitability and approval for use with PROFLEX® elastomeric membranes Consult selected mortar or thinset manufacturer for product suitability and approval for use with PROFLEX® elastomeric membranes Use appropriate notched trowel for application of setting materials in compliance with ANSI, TCNA, MIA, NWFA, and setting materials guidelines and recommendations. Visit our website at www.proflex.us and click to our link listing our approved setting materials that have been approved for use.

PROFLEX®

MSC

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4 of 4

Finish Surface Installation

Apply finish flooring in compliance with the publications listed in *Applications Instructions*, for methods of installation over crack-isolation membranes. Do not install any defective, damaged, or any finish flooring surface not for its intended use. The installation of this product does not eliminate the need for movement joints, including perimeter joints with a tiled surface. Perimeter expansion of ¼" must be maintained at all times. Use PROFLEX® PIB (Perimeter Isolation Barrier) to assist in maintaining the expansion gap. Consult the TCNA handbook for other movement joint applications EJ171. The product is not for use over expansion joints, or structural (out-of-plane) movement cracks.

6. AVAILABILITY

PROFLEX® Products are available nationwide.
To locate Proflex products in your area, please contact:
Phone: 877-577-6353
Website: www.proflex.us

7. WARRANTY

5 year, 10 year and Limited Lifetime warranties are available. Contact PROFLEX® Technical Services for specific warranty information. PROFLEX® Products warrants that this product meets applicable ANSI standards in force at the time of manufacture.

8. MAINTENANCE

None required, but installation performance and durability may depend on properly maintaining products supplied by other manufacturers.

9. TECHNICAL SERVICES

Technical assistance
Information is available by calling the Technical Support
Toll Free: 877-577-6353
Fax: 863-937-9624
Technical and safety literature
To acquire technical and safety literature, please visit our website www.proflex.us

10. FILING SYSTEM

Division 9

11

From: Tamara Heimann <tamarahomesinc@gmail.com>
Sent: Thursday, June 7, 2018 12:28 PM
To: Bill Veal <billv_at_thesavoy@verizon.net>
Subject: Re: Boren (1003 remodel)

Michelle Turcotte -
1994 - 2010 Florida Corporation vice pres and owner
Atlantic Tile and Marble Inc,
dba Ravenna Distinctive Home Finishes
2 x International Award winning Company
Coverings International flooring Competition 2001 & 2004
2004 - Award of recognition from The National Tile Council of The Americas
proper design and installation of Onyx
2013 - currently Michelle Turcotte Design, Inc
dba Floors and Walls of Distinction

Presently I am owner/operator of Tamara Homes Inc. in business since 2009.
I have been in construction since 1989. For Ten years I owned and operated a successful rehab/repair
business, which I gave up to relocate to Florida. I was employed by WCI Communities, Inc. and Lennar
Homes as a construction manager building single family homes and condos.

The most recent remodel jobs Michelle and I have done that would be similar to the Borens were in the
Meridin condos at the Oaks located in Osprey, FL

Thank You,
Tammy

THI Construction Inc.
941-650-7636
888-638-4540 fax
tamarahomesinc@gmail.com



Boren Residence

401 South Palm Ave. Sarasota, FL 34236 unit 1003

carved t-frame master bath vanity mirrors.

cabinets- remove and rework cabinets under cooktop to accommodate Cornue gas range.

cabinets- remove existing cabinets along wall from bump out to corner and install chrome and glass door shelve unit

cabinets- new custom baseboard through-out

Electric- add sconce light fixtures either side of foyer doorway off elevator, entry foyer, and both sides of fireplace

~~Electric- cap off electric to existing double oven being eliminated~~

electric- demo outlet and phone jack.

Electric- install lighting in new cabinet unit in kitchen where double oven is being removed

Electric- relocate ceiling lights over island to above new table location

Electric- relocate master bed smoke detector and wall lights

electric- relocate tv to piano wall, installing over marble

~~electric- remove existing cook top and install Cornue gas stove check electrical~~

electric- remove track lighting all rooms and install light fixtures where j box is located based on 10 fixtures to be hung

electric- run electrical for new fireplace and sconces on either side of fireplace

~~electrical- remove double oven and cap off electric~~

fireplace- install fireplace with step out walls (see picture)

gas- remove double oven and cap off gas line

gas- remove existing cook top and install Cornue gas stove

Mirror- install glass 1/2 shower wall in guest bedroom/office tub or shower

Mirror- install mirrors with frames on wall behind master bath tub (see picture)

mirror/tile- install glass highbar in kitchen with chrome posts. (see picture)

Mirror- install mirror

misc- remove all window cornese and some blinds. Masterbedoom blinds stay valences get removed

Misc- remove built-in furnature, headboards, desks (leaving both desks in guest rooms) and bookshelves

m. remove kitchen door

paint- all cabinets through-out condo. Remove all wallpaper except hall closet doors

Paint- all window frames pearl metallic

Paint- paint all walls white dove sherwin williams eggshell, trim pearl metallic white trim and ceilings white

~~Plumbing- guest bath remove existing tub and install walk-in shower~~

~~Plumbing- Master bath remove existing tub and install free standing tub~~

Contractors list for remodel unit # 1003

✓ Building Contractor: Tamara Homes Inc. Tamara Heimann 2383 S. Tamiami Tr. Venice, FL 34293. 941.650.7636

✓ Electrician: JC Phase 312 E. Venice Ave. Venice Fl 34285 941.894.9063

✓ Plumber: Bill The Plumber 6020F Deacon Rd Sarasota, FL 941.924.8418

Painter: Dat Painting 2628 Dueby St. Sarasota, Fl 34231 941.961.0381

Chimnee Cricket 4463 Ashton Rd unit B Sarasota, Fl 941.926.3662

Superior Design & Cabinetry 4023 Sawyer Rd Bldg4 #141 Sarasota 34233 941.284.3319

Heritage Glass 1200 Ogde Rd #3 Venice, 342285 941.488.0263

14



JIMMY PATRONIS
CHIEF FINANCIAL OFFICER

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

**** CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW ****

CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE DATE: 1/21/2018

EXPIRATION DATE: 1/21/2020

PERSON: HEIMANN

TAMARA

FEIN: 271294446

BUSINESS NAME AND ADDRESS:

TAMARA HOMES INC

THI CONSTRUCTION

2383 S TAMIAMI TR

VENICE FL 34293

SCOPE OF BUSINESS OR TRADE:

Contractor-Project Manager,
Construction Executive,
Construction Manager or
Construction Superintendent

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/7/2018

15

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Ben Brown Insurance Agency 3731 S Tuttle Ave Sarasota FL 34239-6410	CONTACT NAME: Krista Wilson PHONE (A/C No. Ext): (941) 366-9373 FAX (A/C No.): (941) 365-3143 E-MAIL ADDRESS: certificates@benbrownins.com
	INSURER(S) AFFORDING COVERAGE
INSURED Bill the Plumber, Inc. 6020 Deacon Rd. Suite F Sarasota FL 34238-2926	INSURER A: Southern Owners Insurance Co NAIC # 10190
	INSURER B: Auto-Owners Insurance Co 18988
	INSURER C: Zenith Insurance Co 13269
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES **CERTIFICATE NUMBER: 17/ALL** **REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		20704094	12/30/2017	12/30/2018	EACH OCCURRENCE \$ 500,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input checked="" type="checkbox"/> Contractual Liability					MED EXP (Any one person) \$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY \$ 500,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$ 1,000,000
	OTHER					PRODUCTS - COM/POP AGG \$ 1,000,000
B	AUTOMOBILE LIABILITY		4750804900	12/30/2017	12/30/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident) \$
						PIP-Base \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR		4750804901	12/30/2017	12/30/2018	EACH OCCURRENCE \$ 2,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 2,000,000
	DED <input checked="" type="checkbox"/> RETENTION \$ 5,000					
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		2127554003	1/1/2018	1/1/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N/A				EL EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below					EL DISEASE - EA EMPLOYEE \$ 500,000
						EL DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Plumbing Contractor.

CERTIFICATE HOLDER tamarahomesinc@gmail.com Savoy on Palm 401 S Palm Avenue #1003 Sarasota, FL 34236	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Ryan Brown/KRISTA
--	---

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Licensee Details

Licensee Information

Name: **HEIMANN, TAMARA LYNN (Primary Name)**
TAMARA HOMES INC (DBA Name)

Main Address: **173 SANDHURST DR**
VENICE Florida 34293

County: **SARASOTA**

License Mailing:

LicenseLocation:

License Information

License Type: **Certified Building Contractor**

Rank: **Cert Building**

License Number: **CBC1257918**

Status: **Current,Active**

Licensure Date: **01/21/2010**

Expires: **08/31/2018**

Special Qualifications **Qualification Effective**
Construction Business **01/21/2010**

Alternate Names

[View Related License Information](#)

[View License Complaint](#)

2601 Blair Stone Road, Tallahassee FL 32399 :: Email: **[Customer Contact Center](#)** :: Customer Contact Center: 850.487.1395

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Licensee Details

Licensee Information

Name: **LOIKO, WILLIAM J (Primary Name)**
BILL THE PLUMBER INC (DBA Name)

Main Address: **6020 DEACON ROAD**
SUITE: F
SARASOTA Florida 34238

County: **SARASOTA**

License Mailing:

LicenseLocation: **6020 F DEACON RD**
SARASOTA FL 34238

County: **SARASOTA**

License Information

License Type: **Certified Plumbing Contractor**

Rank: **Cert Plumbing**

License Number: **CFC057491**

Status: **Current,Active**

Licensure Date: **07/11/2000**

Expires: **08/31/2018**

Special Qualifications **Qualification Effective**

Construction Business **02/20/2004**

Alternate Names

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However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public.

18

Licensee Details

Licensee Information

Name: **BARRETT, HAROLD F (Primary Name)**
J. C. PHASE ELECTRICAL CONTRACTOR, INC. (DBA Name)

Main Address: **312 E VENICE AVE**
UNIT 210
VENICE Florida 34285

County: **SARASOTA**

License Mailing:

LicenseLocation:

License Information

License Type: **Certified Electrical Contractor**

Rank: **Cert Electrical**

License Number: **EC13001523**

Status: **Current,Active**

Licensure Date: **04/02/2003**

Expires: **08/31/2018**

Special Qualifications **Qualification Effective**

Alternate Names

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2601 Blair Stone Road, Tallahassee FL 32399 :: Email: **Customer Contact Center** :: Customer Contact Center: 850.487.1395

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However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public.

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Licensee Details

Licensee Information

Name: **MOGFORD, MARTIN (Primary Name)**
HERITAGE GLASS INC (DBA Name)

Main Address: **1200 OGDEN ROAD BLDG. 3**
VENICE Florida 34285

County: **SARASOTA**

License Mailing:

LicenseLocation: **1200 OGDEN ROAD BLDG 3**
VENICE FL 34285

County: **SARASOTA**

License Information

License Type: **Certified Specialty Contractor**

Rank: **Cert Specialty**

License Number: **SCC131151319**

Status: **Current,Active**

Licensure Date: **12/09/2004**

Expires: **08/31/2018**

Special Qualifications **Qualification Effective**

Construction Business **12/09/2004**

Glass & Glazing Specialty

Alternate Names

[View Related License Information](#)

[View License Complaint](#)

.....

2601 Blair Stone Road, Tallahassee FL 32399 :: Email: **Customer Contact Center** :: Customer Contact Center: 850.487.1395

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CERTIFICATE OF LIABILITY INSURANCE

DATPA-1

OP ID: KM

DATE (MM/DD/YYYY)

06/04/2018

22

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Insurance Consultants, Inc. PO Box 3290 Brandon, FL 33509 Kacie Miller Swann	CONTACT NAME: Kacie Miller PHONE (A/C No. Ext): 813-643-7770 E-MAIL ADDRESS: KMiller@simpleworkcomp.com	FAX (A/C No): 813-655-8854
	INSURER(S) AFFORDING COVERAGE	
INSURED DAT Painting LLC Derek Thorndike 2628 Dueby Street Sarasota, FL 34231	INSURER A: Frank Winston Crum Ins. Co.	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			GIFL10324500	03/11/2018	03/11/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPOF AGG \$ 2,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED: RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y/N	N/A			PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Painting-Interior
 painting-exterior

CERTIFICATE HOLDER**CANCELLATION**

The Savoy on Palm Condos
 401 S Palm Ave
 Sarasota, FL 34236

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/5/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Ben Brown Insurance Agency 3731 S Tuttle Ave Sarasota FL 34239-6410		CONTACT NAME: Krista Wilson PHONE (A/C, No, Ext): (941) 366-9373 FAX (A/C, No): (941) 365-3143 E-MAIL ADDRESS: Certificates@benbrownins.com	
INSURED Heritage Glass, Inc. 1200 Ogden Rd Venice FL 34285-5554		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Southern Owners Insurance Co	NAIC # 10190
		INSURER B: Auto-Owners Insurance Co	NAIC # 18988
		INSURER C: American Interstate Ins Co	NAIC # 31895
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 18/A11

REVISION NUMBER:

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual Liability <input checked="" type="checkbox"/> XCD GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER		20236906	4/1/2018	4/1/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		5034533902	4/1/2018	4/1/2019	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP-Basic \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE		5034534901	4/1/2018	4/1/2019	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N N/A	AVMCF12669332018	4/1/2018	4/1/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Installation Floater		20236906	4/1/2018	4/1/2019	Limit \$10,000 Deductible \$500

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Manufacturer of Storefronts/mirrors.

CERTIFICATE HOLDER

tamarahomesinc@gmail.com

The Savoy on Palm
 401 S Palm Ave
 Sarasota, FL 34236

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Ryan Brown/KRISTA

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Inquiry For Building Permit Status

App. Number: 20186360
App. Status: **PENDING**

Date Applied: 06/04/2018

Inspections	Parcel Info	Contact Info	Contractor	Zoning App.	Review
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▼ Description of Work

Location of Work:

Type of

Construction:

1 Hour Protected: NO

Census Item: 437

Work Type: ALTERATIONS/REPAIRS - RESIDENTIAL

Work Description: REMODEL REPLACE CABINETS, INSTALL FIREPLACE, PAINT ELECTRIC PLUMBING

Occupancy Use: R2 MULTIPLE DWELLINGS - MORE THAN TWO FAMILIES/APARTMENT HOUSES/BOARDING HOUSES/CONVENTS/FRATERNITIES AND SORORITIES/MONASTERIES

Occupant Load:

Type of Business:

Total Construction Amt: \$100,000.00

Amt:

Prepaid Amount: \$300.00

Conditions: BUILDING

Explain Conditions: 1. NO AS BUILT CD REQUIRED.

Plans: ROLL

De Minimis: YES

Public/Private: PRIVATE

Commencement Notice Required? YES

▼ Additional Building Information

Buildings:

Entire Bldg

(sqft):

Seating:

Sq_ft: 0

Temp CO

Expires in

Day(s)

Units:

Floor Area

(sqft):

Thres Bldg:

Floor Load:

Temp CO

Conditions

Stories: 0

Tenant Area

(sqft):

Fire District:

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Inquiry For Building Permit Status

App. Number: 20186360
App. Status: PENDING

Date Applied: 06/04/2018

Inspection	Permit Info	Contact Info	Contractor	Zoning App.	Review
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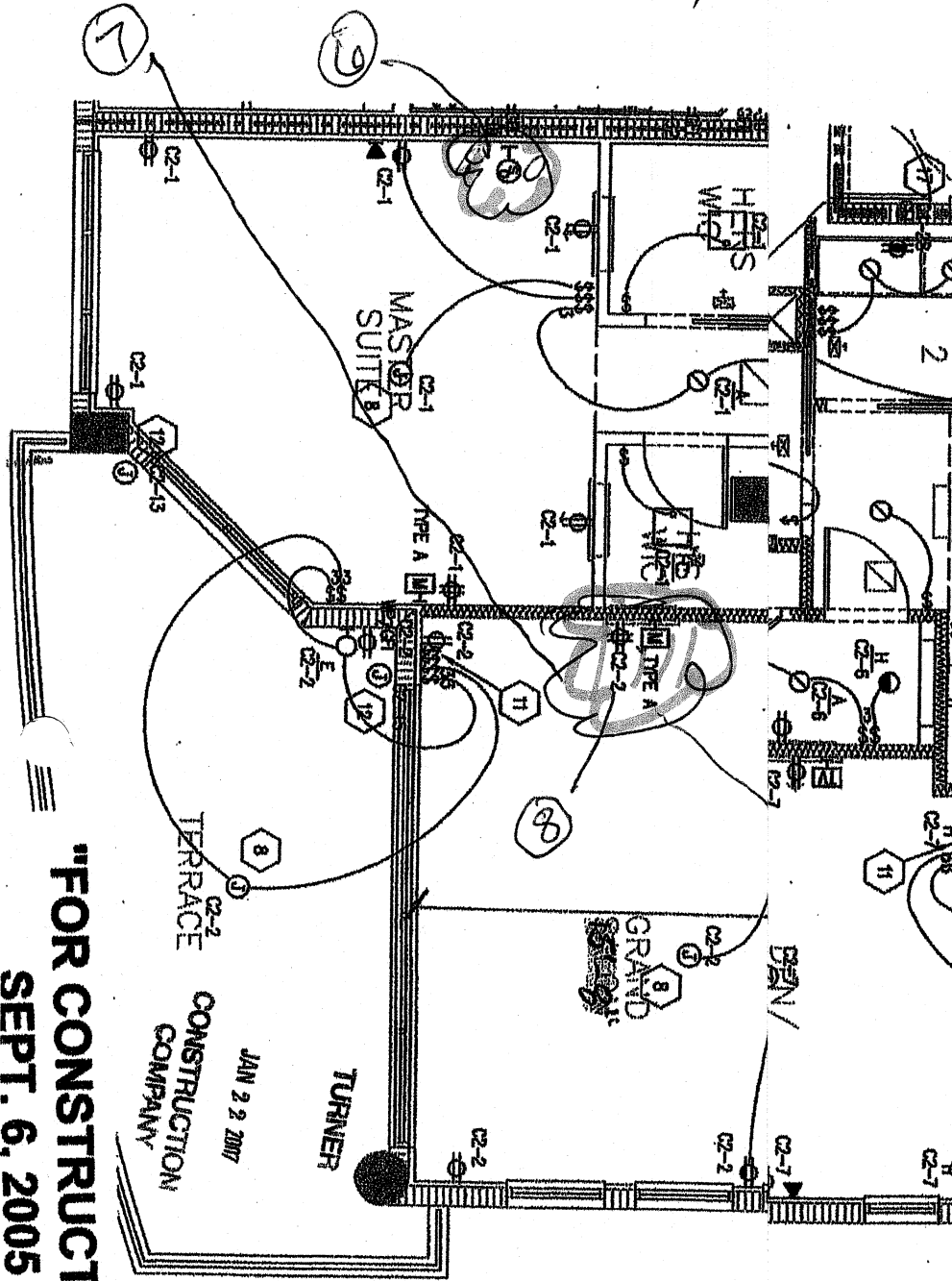
Parcel Address: 401 S PALM AVE 1003
Site Address: 401 to S PALM AVE 1003
City: Sarasota
State: FL
Zip Code: 34236
 S

▼ Legal Owner and Description

Legal owner(s) & owner(s) address: SIEGEL MORTON
 SIEGEL ETHEL
 401 S PALM AVE UNIT 1003
 SARASOTA, FL 34236
Legal Description: UNIT 1003, SAVOY ON PALM THE

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Boren
 401 S. Palm
 Sarasota, FL



1. Change Existing
2. Change Tub/shower/separate
3. move TV cabinet - fire
4. Remove Existing Island Cabinet unit in Bath
5. remove Existing
6. relocate Smoke