



Historic Architectural Review Commission Staff Report for Item 10

To: Chairman Haven Burkee and Historic Architectural Review
Commission Members

From: Enid Torregrosa-Silva, MSHP
Historic Preservation Planner

Meeting Date: April 23, 2024

Applicant: Rumac Construction Group

Application Number: H2024-0016

Address: 1315 William Street

Description of Work:

New house on vacant lot.

Site Facts:

The site under review is a vacant lot. On November 29, 2023, the Commission was presented with a declaration of unsafe condition by the Chief Building Officer. The condemned building was demolished in February 2024 and the site became a vacant lot. A large tree is in the front yard. Mixed use buildings are adjacent to the site and at the rear there is a one-story house that faces Royal Street.

About the demolished house

The house located on 1315 William Street was a contributing resource to the historic district. Build circa 1930 the one and a half-story frame vernacular house with a one-story addition attached to its rear was abandoned and neglected for decades. During Hurricane Irma the roofs caved in. The front porch used to have a roof deck and a door was installed in the gable end.



The house before demolition.



The house circa 1965.

Guidelines Cited on Review:

- New construction (pages 38a-38q), specifically guidelines 1, 2, 3, 6, 7, 8, 9, 11, 12, 13, 14, 17, 18, 20, 22, 23, 24, and 25.

Staff Analysis:

The Certificate of Appropriateness under review proposes a new frame house. The applicant wanted to design a new structure as close as possible as what was there before, but the addition of habitable space in the envelope required the introduction of dormers to add interior height to the attic space. The new house will be elevated on concrete piers approximately 3'-2" from grade and the structure will have its highest point at 24'-4" from grade. The one and a half story structure will have a front gable roof and a one-story attached to the rear. A one-story covered porch will also be attached at the rear of the house. A two-car driveway is proposed on the south side of the house.

The building will have a two-story front porch without a roof covering. Exterior walls will be finished with horizontal hardie board, windows will be all aluminum impact and roof will be covered with 5 v-crimp metal panels.



REAR ELEVATION
SCALE: 1/4" = 1'-0"



LEFT ELEVATION
SCALE: 1/4" = 1'-0"



RIGHT ELEVATION
SCALE: 1/4" = 1'-0"



FRONT ELEVATION
SCALE: 1/4" = 1'-0"

ELEVATION NOTES



HARC CONTEXT ELEVATIONS
SCALE: 1" = 10'



750 UNITED STREET (WILLIAM STREET ELEVATION)



1310 WILLIAM STREET

Proposed elevations and context.

Consistency with Cited Guidelines:

The applicant wanted to replicate as much as possible the roof form of the building that used to be there. Although the building will be in a current X flooding zone the owners want to build the house to the future flooding maps. This elevates the house approximately 3'- 2" from grade, making the house taller than the previous house on the site, which was built at grade.

The design is not a full reconstruction of the condemned building as the program has increased in habitable space that requires conformance with current codes, and that is why the design includes dormers. One can argue that although the two-story front porch with no roof was part of the original house current guidelines will not support this treatment as the proportions of a front porch for a half-story portion of a building is not a traditional treatment or correct proportion for a front porch. There are no other examples in the immediately adjacent context where single family houses have a two-story roofless front porch on a one and a half-story house.

Staff finds that the building form meet guidelines for scale, massing and materials.

APPLICATION

RECEIVED
 MAR 25 2024
 BY: *AM*

HARC MAJOR PROJECTS CERTIFICATE OF APPROPRIATENESS



City of Key West
 1300 White Street
 Key West, Florida 33040

HARC COA # <i>HARC 2024-6016</i>	REVISION # <i>6016</i>	INITIAL & DATE
FLOOD ZONE	ZONING DISTRICT	BLDG PERMIT # <i>BLD2024-0573</i>

A PRE-APPLICATION MEETING WITH HARC STAFF IS REQUIRED PRIOR TO SUBMITTAL

ADDRESS OF PROPOSED PROJECT:	<i>1315 William St. Key West, FL 33040</i>	
NAME ON DEED:	<i>CASA DE William, LLC</i>	PHONE NUMBER <i>305-951-5091</i>
OWNER'S MAILING ADDRESS:	<i>6326 SW 10th Terr Miami, FL 33144</i>	EMAIL <i>Lugorestepo@hotmail.com</i>
APPLICANT NAME:	<i>RUMAC Construction Group, Inc.</i>	PHONE NUMBER <i>305-905-7448</i>
APPLICANT'S ADDRESS:	<i>2711 SW 137 Ave #91 Miami, FL 33175</i>	EMAIL <i>RMacias@rumacconstruction.com</i>
APPLICANT'S SIGNATURE:	<i>[Signature] Ruben Macias Qualifier</i>	DATE <i>3-6-24</i>

ANY PERSON THAT MAKES CHANGES TO AN APPROVED CERTIFICATE OF APPROPRIATENESS MUST SUBMIT A NEW APPLICATION.

FLORIDA STATUTE 837.06: WHOEVER KNOWINGLY MAKES A FALSE STATEMENT IN WRITING AND WITH THE INTENT TO MISLEAD A PUBLIC SERVANT IN THE PERFORMANCE OF HIS OR HER OFFICIAL DUTY SHALL BE GUILTY OF A MISDEMEANOR OF THE SECOND-DEGREE PUNISHABLE PER SECTION 775.082 OR 775.083. THE APPLICANT FURTHER HEREBY ACKNOWLEDGES THAT THE SCOPE OF WORK AS DESCRIBED IN THE APPLICATION SHALL BE THE SCOPE OF WORK THAT IS CONTEMPLATED BY THE APPLICANT AND THE CITY. THE APPLICANT FURTHER STIPULATES THAT SHOULD FURTHER ACTION BE TAKEN BY THE CITY FOR EXCEEDING THE SCOPE OF THE DESCRIPTION OF WORK, AS DESCRIBED HEREIN, AND IF THERE IS CONFLICTING INFORMATION BETWEEN THE DESCRIPTION OF WORK AND THE SUBMITTED PLANS, THE AFOREMENTIONED DESCRIPTION OF WORK SHALL BE CONTROLLING.

PROJECT INCLUDES: REPLACEMENT OF WINDOWS ___ RELOCATION OF A STRUCTURE ___ ELEVATION OF A STRUCTURE ___
 PROJECT INVOLVES A CONTRIBUTING STRUCTURE: YES ___ NO ___ INVOLVES A HISTORIC STRUCTURE: YES ___ NO ___
 PROJECT INVOLVES A STRUCTURE THAT IS INDIVIDUALLY LISTED ON THE NATIONAL REGISTER: YES ___ NO ___

DETAILED PROJECT DESCRIPTION INCLUDING MATERIALS, HEIGHT, DIMENSIONS, SQUARE FOOTAGE, LOCATION, ETC.	
GENERAL:	<i>Construction of New Single family Residence AS per construction drawings.</i>
MAIN BUILDING:	
DEMOLITION (PLEASE FILL OUT AND ATTACH DEMOLITION APPENDIX):	
	<i>Vacant lot CBO declared building unsafe.</i>

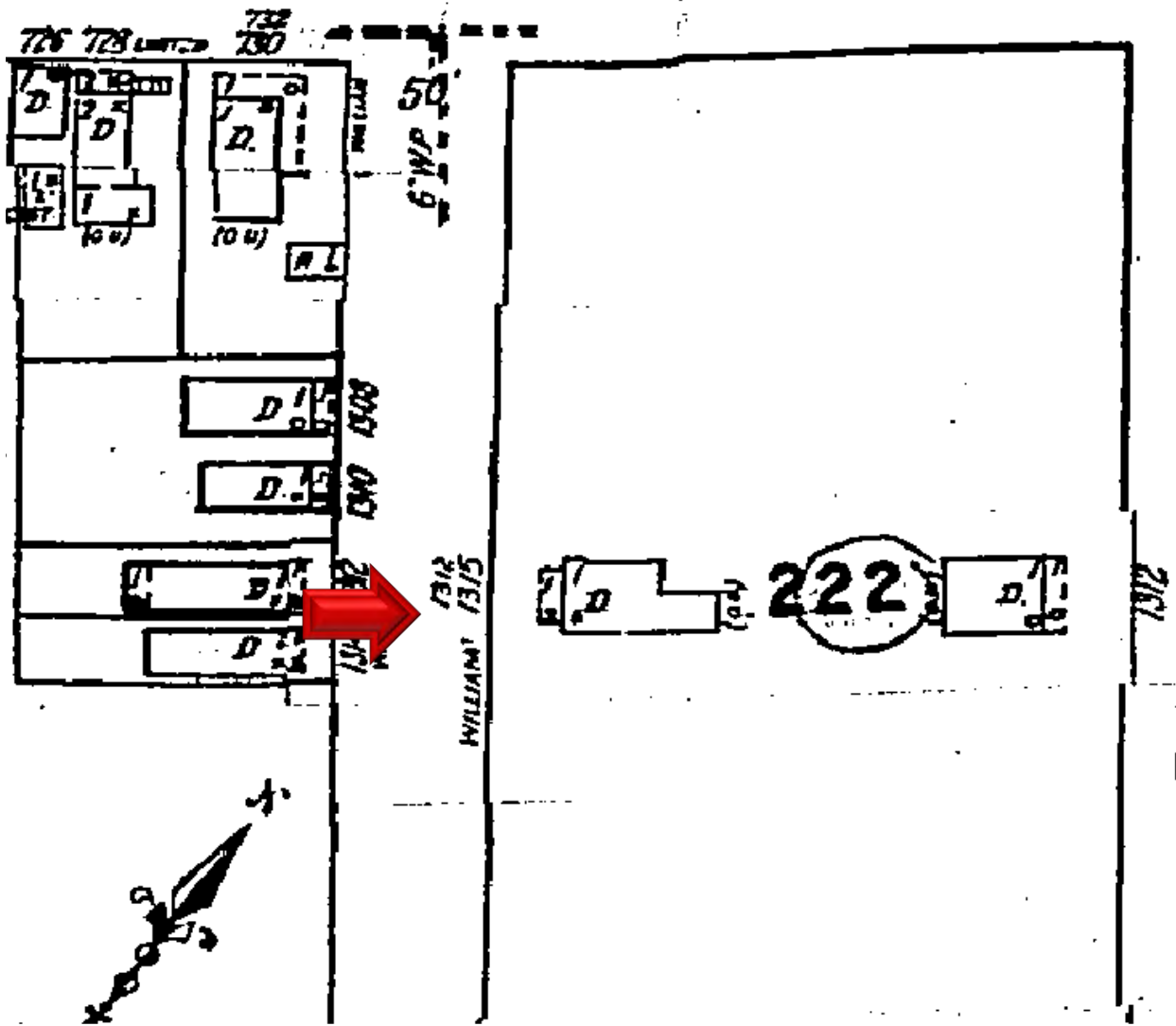
APPLICATIONS MUST BE SUBMITTED IN PERSON WITH HARD COPIES BY 3PM ON THE SCHEDULED DEADLINE
 PLEASE SEND AN ELECTRONIC COPY OF ALL DOCUMENTS CITY_HARC@CITYOFKEYWEST-FL.GOV

ACCESSORY STRUCTURE(S):	
*PAVERS: <i>Concrete Paver driveway color GRAY.</i>	FENCES:
DECKS:	PAINTING:
SITE (INCLUDING GRADING, FILL, TREES, ETC):	*POOLS (INCLUDING EQUIPMENT):
	<i>In ground pool with pump motor and filter</i>
*ACCESSORY EQUIPMENT (GAS, A/C, VENTS, ETC):	OTHER:
<i>Two AC units with ductwork distribution</i>	

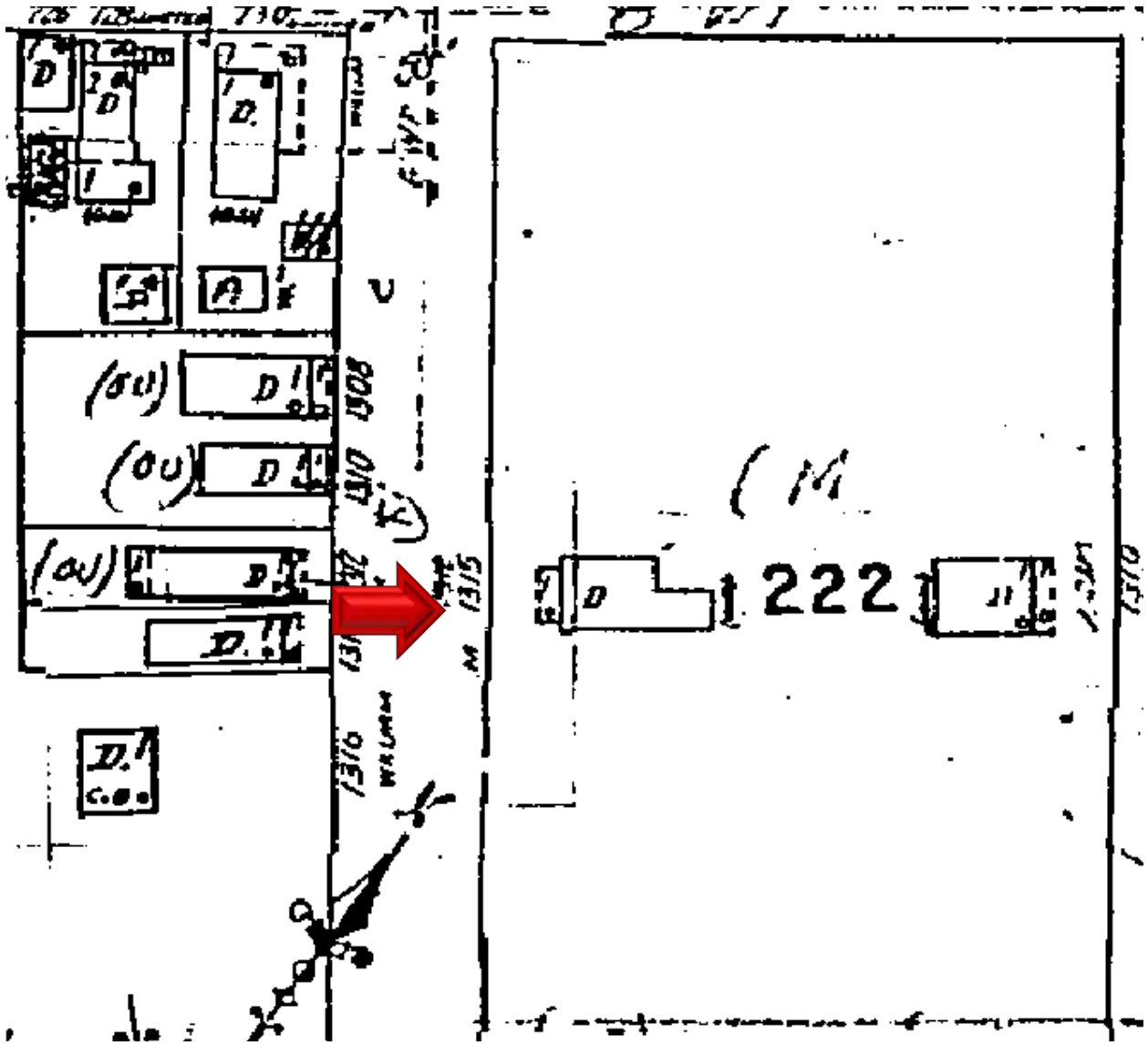
OFFICIAL USE ONLY:	HARC COMMISSION REVIEW	EXPIRES ON:
MEETING DATE:	<input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/> DEFERRED FOR FUTURE CONSIDERATION	INITIAL:
MEETING DATE:	<input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/> DEFERRED FOR FUTURE CONSIDERATION	INITIAL:
MEETING DATE:	<input type="checkbox"/> APPROVED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/> DEFERRED FOR FUTURE CONSIDERATION	INITIAL:
REASONS OR CONDITIONS:		
STAFF REVIEW COMMENTS:		
FIRST READING FOR DEMO:	SECOND READING FOR DEMO:	
HARC STAFF SIGNATURE AND DATE:	HARC CHAIRPERSON SIGNATURE AND DATE:	

THIS APPLICATION MAY BE REVIEWED BY PLANNING DEPARTMENT STAFF.

SANBORN MAPS



1948 Sanborn Map






1962 Sanborn Map

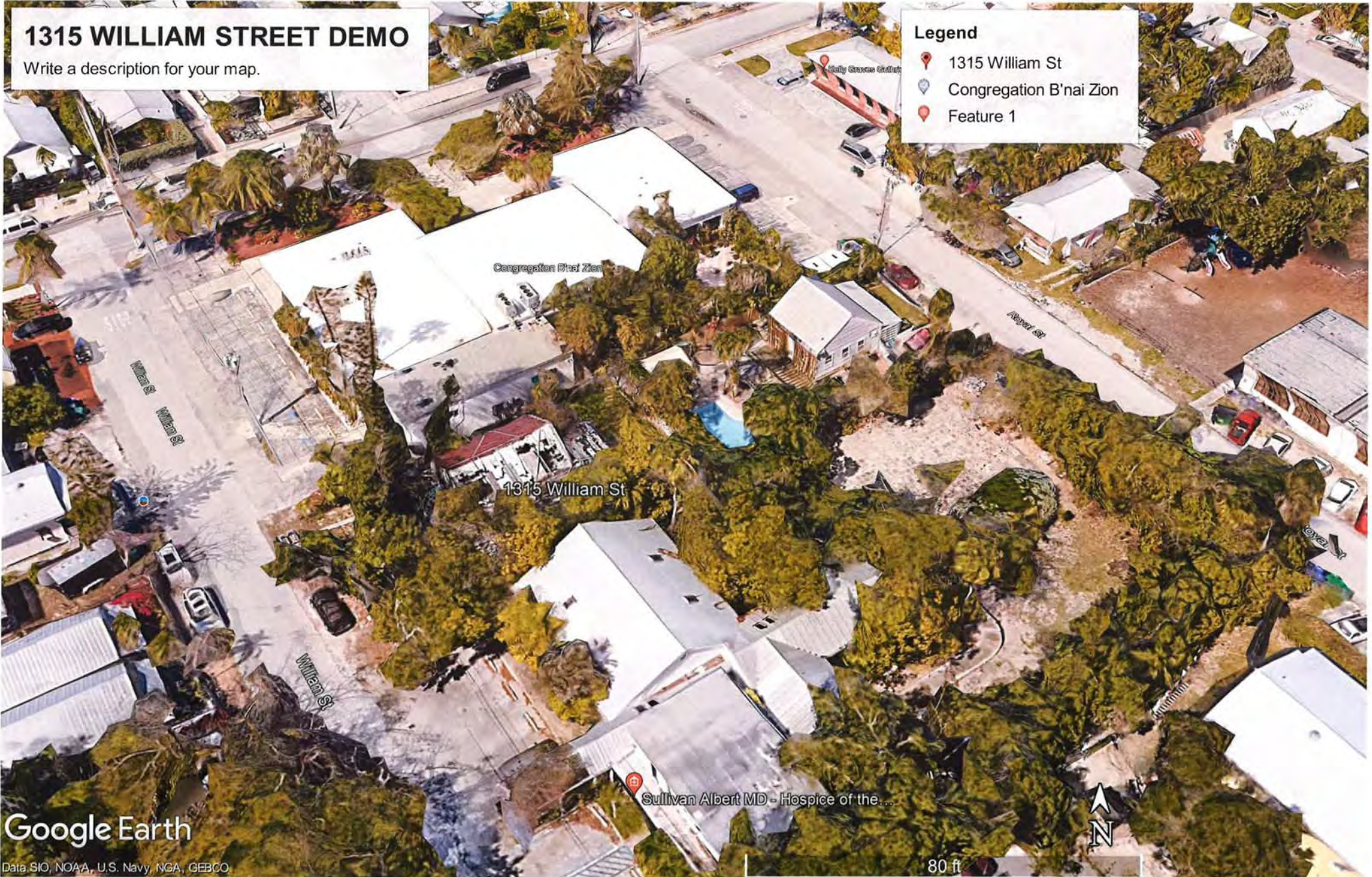
PROJECT PHOTOS

1315 WILLIAM STREET DEMO

Write a description for your map.

Legend

-  1315 William St
-  Congregation B'nai Zion
-  Feature 1



Google Earth

Data SIO, NOAA, U.S. Navy, NGA, GEBCO

80 ft



02-05-2024 06:59:01 AM GPS X= 24.550262 Y= -81.792819



02-05-2024 06:59:07 AM GPS X= 24.550262 Y= -81.792813

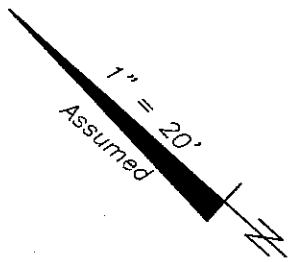


02-05-2024 06:59:18 AM GPS X= 24.550278 Y= -81.792795



SURVEY

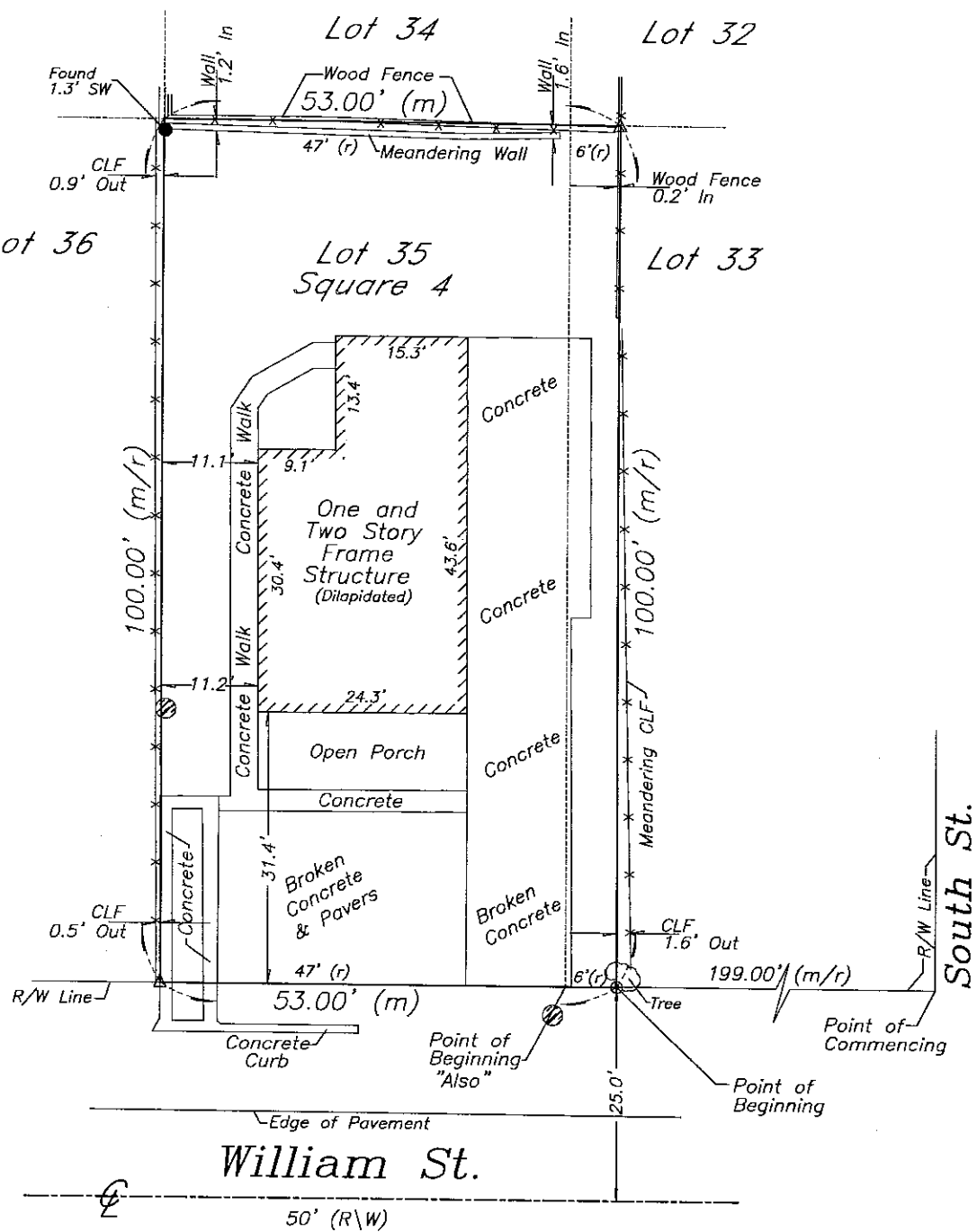
Boundary Survey Map of Lot 35 and part of Lot 33, Square 4 Tract 17, Island of Key West, Florida



LEGEND

- ⊙ Found 1/2" Iron Pipe (FHH)
- Set 3/4" Iron Pipe w/cap (6298)
- Found 1/2" Iron Rod (No ID)
- ▲ Found Nail & Disc (5234)
- △ Set Nail & Disc (6298)
- (M) Measured
- (R) Record
- (M/R) Measured & Record
- C.B.S. Concrete Block Structure
- R\W Right of Way
- CLF Chain Link Fence
- ⊕ Centerline
- ⊗ Wood Utility Pole
- ⊠ Concrete Utility Pole
- P- Overhead Utility Lines

NOTE:
All improvements
are not shown



NOTES:

1. The legal description shown hereon was furnished by the client or their agent. This survey does not determine or imply ownership.
2. Underground foundations and utilities were not located.
3. All angles are 90° (Measured & Record) unless otherwise noted.
4. Street address: 1315 William Street, Key West, FL.
5. This survey is not valid without the signature and the original raised seal of a Florida licensed surveyor and mapper.
6. Lands shown hereon were not abstracted for rights-of-way, easements, ownership, or other instruments of record.
7. North Arrow is assumed and based on the legal description.
8. Date of field work: July 26, 2023
9. Ownership of fences is undeterminable, unless otherwise noted.
10. Adjoiners are not furnished.

BOUNDARY SURVEY OF: In the City of Key West and known as a part of Lot 33 in Square 4 of Tract 17, according to White's & Pierce's diagram of said Square 4, Tract 17, recorded in Deed Book "N" Page 613, records of Monroe County, Florida; **COMMENCING** at a point on the Northeast side of William Street, 199 feet Northwesterly from the corner of South and William Streets and running thence Northwesterly on said Northeast side of William Street, a distance of Six (6) feet; thence at right angles in a Northeasterly direction One Hundred (100) feet; thence at right angles in a Southeasterly direction Six (6) feet; thence at right angles in a Southwesterly direction One Hundred (100) feet, back to the Point of Beginning on William Street. **ALSO**

On the Island of Key West and known on Whitehead's Map as a part of Tract 17, and described as Lot 35, according to Pierce's & White's Subdivision recorded in Deed Book "N" Page 613, Public Records of Monroe County, Florida, more particularly described as follows:

COMMENCING a point on the Northeast side of William Street 205 feet Northwesterly from the corner of South and William Streets, running thence Northwesterly on the Northeast side of William Street a distance of 47 feet; thence at right angles in a Northeasterly direction 100 feet; thence at right angles in a Southeasterly direction 47 feet; thence at right angles in a Southwesterly direction 100 feet to the Point of Beginning.

BOUNDARY SURVEY FOR: Casa de Williams;

I **HEREBY CERTIFY** that this survey was made under my responsible charge and meets the Standard of Practice as set forth by the Florida Board of Professional Surveyors & Mappers in Chapter 5J-17, Florida Administrative Code, pursuant to Section 472.027, Florida Statutes.

J. LYNN O'FLYNN, INC.

J. Lynn O'Flynn, PSM
Florida Reg. #6298

August 8, 2023

THIS SURVEY
IS NOT
ASSIGNABLE

J. LYNN O'FLYNN, Inc.



Professional Surveyor & Mapper
PSM #6298

3430 Duck Ave., Key West, FL 33040
(305) 296-7422 FAX (305) 296-2244

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

OMB Control No. 1660-0008
Expiration Date: 06/30/2026

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A – PROPERTY INFORMATION	FOR INSURANCE COMPANY USE
A1. Building Owner's Name: <u>CASA DE WILLIAMS LLC</u>	Policy Number: _____
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>1315 WILLIAM STREET</u>	Company NAIC Number: _____
City: <u>KEY WEST</u> State: <u>FL</u> ZIP Code: <u>33040</u>	
A3. Property Description (e.g., Lot and Block Numbers or Legal Description) and/or Tax Parcel Number: <u>(TAX PARCEL #00036980-000000) (KW WHITE & PIERCE DIAGRAM N-612 LOT 35 & PT LOT 33 SQR 4 TR 17)</u>	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.): <u>RESIDENTIAL</u>	
A5. Latitude/Longitude: Lat. <u>24.550354 N</u> Long. <u>-81.792799 W</u> Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983 <input type="checkbox"/> WGS 84	
A6. Attach at least two and when possible four clear photographs (one for each side) of the building (see Form pages 7 and 8).	
A7. Building Diagram Number: <u>1B</u>	
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s): _____ sq. ft. b) Is there at least one permanent flood opening on two different sides of each enclosed area? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A c) Enter number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade: Non-engineered flood openings: _____ Engineered flood openings: _____ d) Total net open area of non-engineered flood openings in A8.c: _____ sq. in. e) Total rated area of engineered flood openings in A8.c (attach documentation – see Instructions): _____ sq. ft. f) Sum of A8.d and A8.e rated area (if applicable – see Instructions): _____ sq. ft.	
A9. For a building with an attached garage: a) Square footage of attached garage: _____ sq. ft. b) Is there at least one permanent flood opening on two different sides of the attached garage? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A c) Enter number of permanent flood openings in the attached garage within 1.0 foot above adjacent grade: Non-engineered flood openings: _____ Engineered flood openings: _____ d) Total net open area of non-engineered flood openings in A9.c: _____ sq. in. e) Total rated area of engineered flood openings in A9.c (attach documentation – see Instructions): _____ sq. ft. f) Sum of A9.d and A9.e rated area (if applicable – see Instructions): _____ sq. ft.	
SECTION B – FLOOD INSURANCE RATE MAP (FIRM) INFORMATION	
B1.a. NFIP Community Name: <u>CITY OF KEY WEST</u> B1.b. NFIP Community Identification Number: <u>120168</u>	
B2. County Name: <u>MONROE</u> B3. State: <u>FL</u> B4. Map/Panel No.: <u>12087C1516</u> B5. Suffix: <u>K</u>	
B6. FIRM Index Date: <u>02/18/2005</u> B7. FIRM Panel Effective/Revised Date: <u>02/18/2005</u>	
B8. Flood Zone(s): <u>X</u> B9. Base Flood Elevation(s) (BFE) (Zone AO, use Base Flood Depth): _____	
B10. Indicate the source of the BFE data or Base Flood Depth entered in Item B9: <input type="checkbox"/> FIS <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other: _____	
B11. Indicate elevation datum used for BFE in Item B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other/Source: _____	
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date: _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA	
B13. Is the building located seaward of the Limit of Moderate Wave Action (LiMWA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: <u>1315 WILLIAM STREET</u>	FOR INSURANCE COMPANY USE
City: <u>KEY WEST</u> State: <u>FL</u> ZIP Code: <u>33040</u>	Policy Number: _____
	Company NAIC Number: _____

SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.
- C2. Elevations – Zones A1–A30, AE, AH, AO, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, AR/AH, AR/AO, A99. Complete Items C2.a–h below according to the Building Diagram specified in Item A7. In Puerto Rico only, enter meters.
Benchmark Utilized: BASIC Vertical Datum: 1929

Indicate elevation datum used for the elevations in items a) through h) below.

NGVD 1929 NAVD 1988 Other: _____

Datum used for building elevations must be the same as that used for the BFE. Conversion factor used? Yes No

If Yes, describe the source of the conversion factor in the Section D Comments area.

Check the measurement used:

- | | | | |
|---|------|--|---------------------------------|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor): _____ | 9.33 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| b) Top of the next higher floor (see Instructions): _____ | | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| c) Bottom of the lowest horizontal structural member (see Instructions): _____ | | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| d) Attached garage (top of slab): _____ | | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| e) Lowest elevation of Machinery and Equipment (M&E) servicing the building (describe type of M&E and location in Section D Comments area): _____ | | <input type="checkbox"/> feet | <input type="checkbox"/> meters |
| f) Lowest Adjacent Grade (LAG) next to building: <input checked="" type="checkbox"/> Natural <input type="checkbox"/> Finished _____ | 7.56 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| g) Highest Adjacent Grade (HAG) next to building: <input type="checkbox"/> Natural <input checked="" type="checkbox"/> Finished _____ | 8.23 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |
| h) Finished LAG at lowest elevation of attached deck or stairs, including structural support: _____ | 7.94 | <input checked="" type="checkbox"/> feet | <input type="checkbox"/> meters |

SECTION D – SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by state law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Check here if attachments and describe in the Comments area.

Certifier's Name: J. LYNN O'FLYNN License Number: 6298

Title: PROFESSIONAL SURVEYOR & MAPPER

Company Name: J. LYNN O'FLYNN, INC.

Address: 3430 DUCK AVENUE

City: KEY WEST State: FL ZIP Code: 33040

Signature: _____ Date: 08/09/2023

Telephone: (305) 296-7422 Ext.: _____ Email: _____

Place Seal Here

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments (including source of conversion factor in C2; type of equipment and location per C2.e; and description of any attachments):

C2. a) –FIRST FLOOR LIVING AREA
STRUCTURE IS DILAPIDATED AND COULD NOT ACCESS SECOND FLOOR.
ELECTRIC CUT OFF TO STRUCTURE
LONGITUDE & LATITUDE WERE DETERMINED BY USING GOOGLE EARTH

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 1315 WILLIAM STREET	FOR INSURANCE COMPANY USE
City: KEY WEST State: FL ZIP Code: 33040	Policy Number: _____
	Company NAIC Number: _____

SECTION E – BUILDING MEASUREMENT INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO, ZONE AR/AO, AND ZONE A (WITHOUT BFE)

For Zones AO, AR/AO, and A (without BFE), complete Items E1–E5. For Items E1–E4, use natural grade, if available. If the Certificate is intended to support a Letter of Map Change request, complete Sections A, B, and C. Check the measurement used. In Puerto Rico only, enter meters.

Building measurements are based on: Construction Drawings* Building Under Construction* Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

E1. Provide measurements (C.2.a in applicable Building Diagram) for the following and check the appropriate boxes to show whether the measurement is above or below the natural HAG and the LAG.

a) Top of bottom floor (including basement, crawlspace, or enclosure) is: _____ feet meters above or below the HAG.

b) Top of bottom floor (including basement, crawlspace, or enclosure) is: _____ feet meters above or below the LAG.

E2. For Building Diagrams 6–9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 1–2 of Instructions), the next higher floor (C2.b in applicable Building Diagram) of the building is: _____ feet meters above or below the HAG.

E3. Attached garage (top of slab) is: _____ feet meters above or below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is: _____ feet meters above or below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown The local official must certify this information in Section G.

SECTION F – PROPERTY OWNER (OR OWNER'S AUTHORIZED REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge*

Check here if attachments and describe in the Comments area.

Property Owner or Owner's Authorized Representative Name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Telephone: _____ Ext.: _____ Email: _____

Comments: _____

ELEVATION CERTIFICATE

IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.: 1315 WILLIAM STREET	FOR INSURANCE COMPANY USE
City: KEY WEST State: FL ZIP Code: 33040	Policy Number: _____
	Company NAIC Number: _____

SECTION G – COMMUNITY INFORMATION (RECOMMENDED FOR COMMUNITY OFFICIAL COMPLETION)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Section A, B, C, E, G, or H of this Elevation Certificate. Complete the applicable item(s) and sign below when:

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by state law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2.a. A local official completed Section E for a building located in Zone A (without a BFE), Zone AO, or Zone AR/AO, or when item E5 is completed for a building located in Zone AO.
- G2.b. A local official completed Section H for insurance purposes.
- G3. In the Comments area of Section G, the local official describes specific corrections to the information in Sections A, B, E and H.
- G4. The following information (Items G5–G11) is provided for community floodplain management purposes.
- G5. Permit Number: _____ G6. Date Permit Issued: _____
- G7. Date Certificate of Compliance/Occupancy Issued: _____
- G8. This permit has been issued for: New Construction Substantial Improvement
- G9.a. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters Datum: _____
- G9.b. Elevation of bottom of as-built lowest horizontal structural member: _____ feet meters Datum: _____
- G10.a. BFE (or depth in Zone AO) of flooding at the building site: _____ feet meters Datum: _____
- G10.b. Community's minimum elevation (or depth in Zone AO) requirement for the lowest floor or lowest horizontal structural member: _____ feet meters Datum: _____
- G11. Variance issued? Yes No If yes, attach documentation and describe in the Comments area.

The local official who provides information in Section G must sign here. *I have completed the information in Section G and certify that it is correct to the best of my knowledge. If applicable, I have also provided specific corrections in the Comments area of this section.*

Local Official's Name: _____ Title: _____

NFIP Community Name: _____

Telephone: _____ Ext.: _____ Email: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Signature: _____ Date: _____

Comments (including type of equipment and location, per C2.e; description of any attachments; and corrections to specific information in Sections A, B, D, E, or H):

ELEVATION CERTIFICATE
IMPORTANT: MUST FOLLOW THE INSTRUCTIONS ON PAGES 9-19
BUILDING PHOTOGRAPHS

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.:

1315 WILLIAM STREET

City: KEY WEST

State: FL

ZIP Code: 33040

FOR INSURANCE COMPANY USE

Policy Number: _____

Company NAIC Number: _____

Instructions: Insert below at least two and when possible four photographs showing each side of the building (for example, may only be able to take front and back pictures of townhouses/rowhouses). Identify all photographs with the date taken and "Front View," "Rear View," "Right Side View," or "Left Side View." Photographs must show the foundation. When flood openings are present, include at least one close-up photograph of representative flood openings or vents, as indicated in Sections A8 and A9.



Photo One

Photo One Caption:

FRONT VIEW

08/09/2023

Clear Photo One



Photo Two

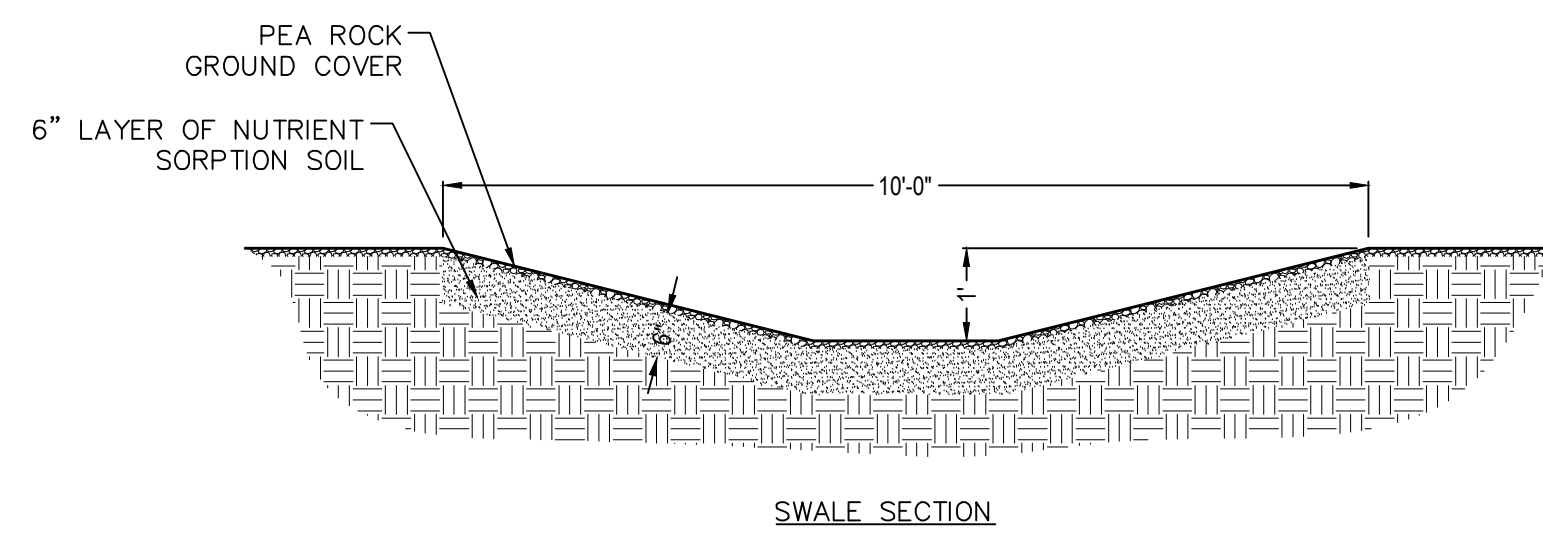
Photo Two Caption:

REAR VIEW

08/09/2023

Clear Photo Two

PROPOSED DESIGN



- NOTES:**
- SWALE SIDE SLOPE MUST BE 4:1 OR SHALLOWER (HORIZONTAL TO VERTICAL)
 - SWALE LENGTH MUST BE GREATER THAN ITS WIDTH
 - SWALE MUST NOT DISTURB ANY NATURAL AREAS
 - 6" LAYER OF NUTRIENT SORPTION SOIL AMENDMENT FORMULATED TO REDUCE NUTRIENT LOADING MUST BE INSTALLED DIRECTLY BELOW THE SWALE. (NutriGone BY EcoSense Intl or Bold and Gold BY ECS)

NUTRIENT SORPTION SOIL LAYER NOT NEEDED IF SWALE WILL BE VEGETATED

SWALE DETAILS

SCALE: N.T.S

2022 SINGLE-FAMILY/DUPLEX LOT STORMWATER CALCULATIONS

1. DETERMINE PERCENTAGE OF IMPERVIOUS COVERAGE

FOUNDATION / SLABS	A	1,405 SF
DECKS / PATIOS	B	-
DRIVEWAYS	C	932 SF
SIDEWALKS	D	-
POOL (& DECK IF NOT INCLUDED ABOVE)	E	-
OTHER	F	-
TOTAL IMPERVIOUS COVERAGE (A+B+C+D+E+F)		2,337 SF

2. DETERMINE EFFECTIVE IMPERVIOUS AREA & SWALE VOLUME

UNCONNECTED IMPERVIOUS AREA *		
EFFECTIVE IMPERVIOUS AREA **		2,337 SF

* UNCONNECTED IMPERVIOUS AREA IS AN IMPERVIOUS AREA THAT HAS TO DRAIN OVER MORE THAN 20 FEET OF PERVIOUS AREA BEFORE ENTERING THE DRAINAGE SYSTEM (SWALE OR INLET)

** SUM OF DIRECTLY CONNECTED IMPERVIOUS AND HALF THE UNCONNECTED IMPERVIOUS

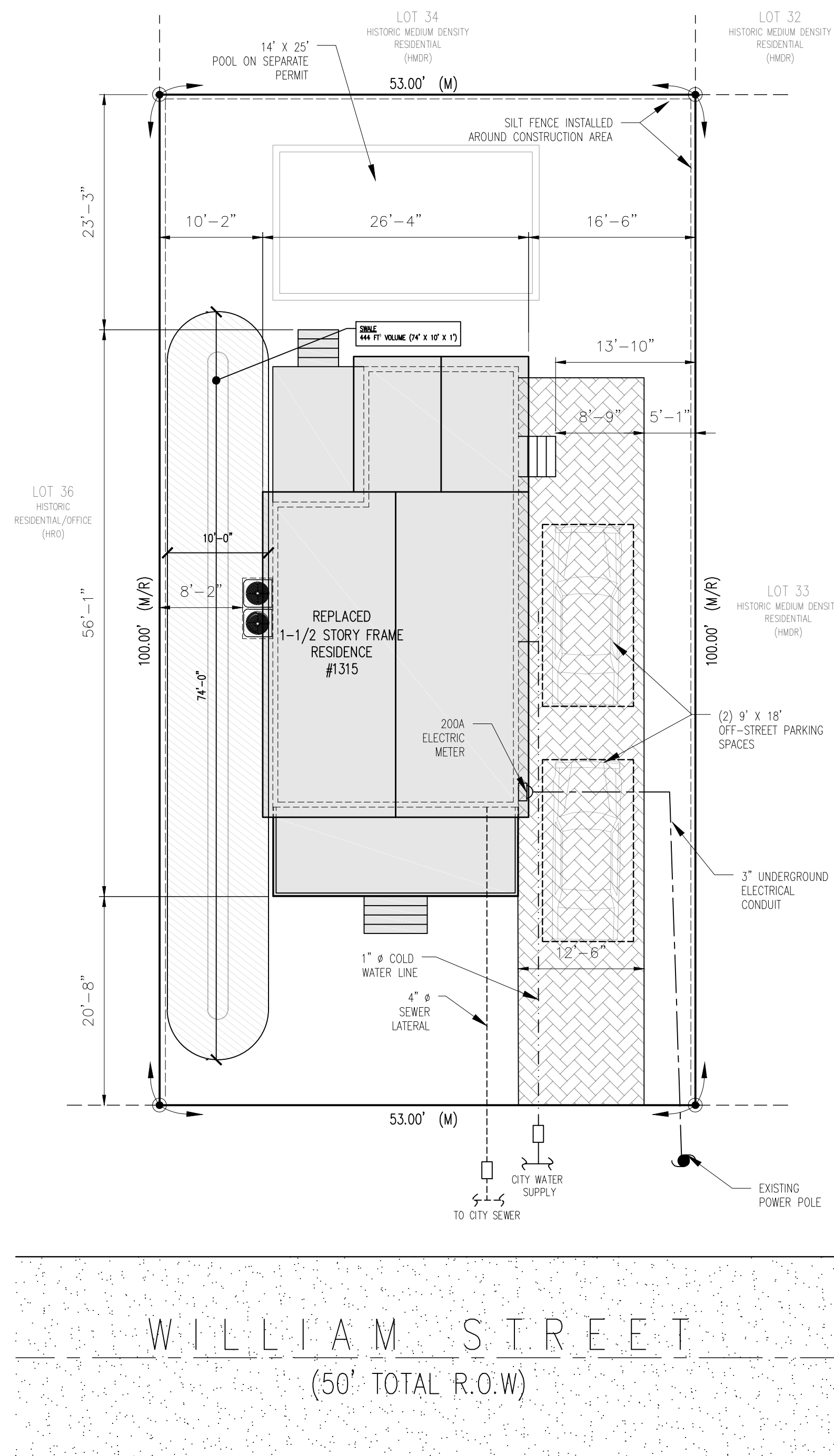
TOTAL LOT SIZE (DISTURBED AREA)	5,300 SF
RATIO OF EFFECTIVE IMPERVIOUS AREA TO DISTURBED AREA	0.44
REQUIRED RETENTION DEPTH (FT) ENTER THE VALUE FROM THE "REQUIRED RETENTION DEPTH (FEET)" COLUMN FROM TABLE 1 BELOW	0.188
REQUIRED SWALE VOLUME	439.36 SF

UNIT AREA:

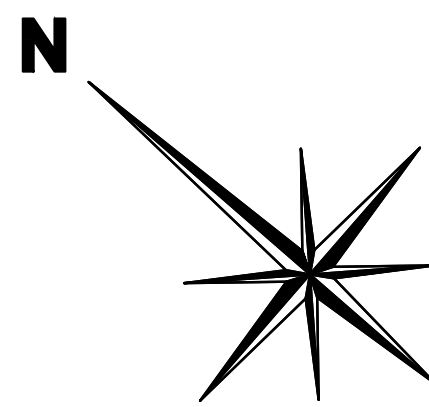
FIRST FLOOR (UNDER A/C):	939 SF
SECOND FLOOR (UNDER A/C):	734 SF
TOTAL AREA UNDER A/C:	1,673 SF
PORCHES/BALCONY'S:	550 SF
TOTAL:	2,223 SF

OPEN SPACE CALCULATIONS:

LOT SIZE:	5,300 SF
BUILDING COVERAGE:	1,405 SF
DRIVEWAY:	932 SF
TOTAL COVERAGE ALLOWED (60%):	3,180 SF
TOTAL LOT COVERAGE:	(44.0%) 2,337 SF



WILLIAM STREET
(50' TOTAL R.O.W)



SITE PLAN

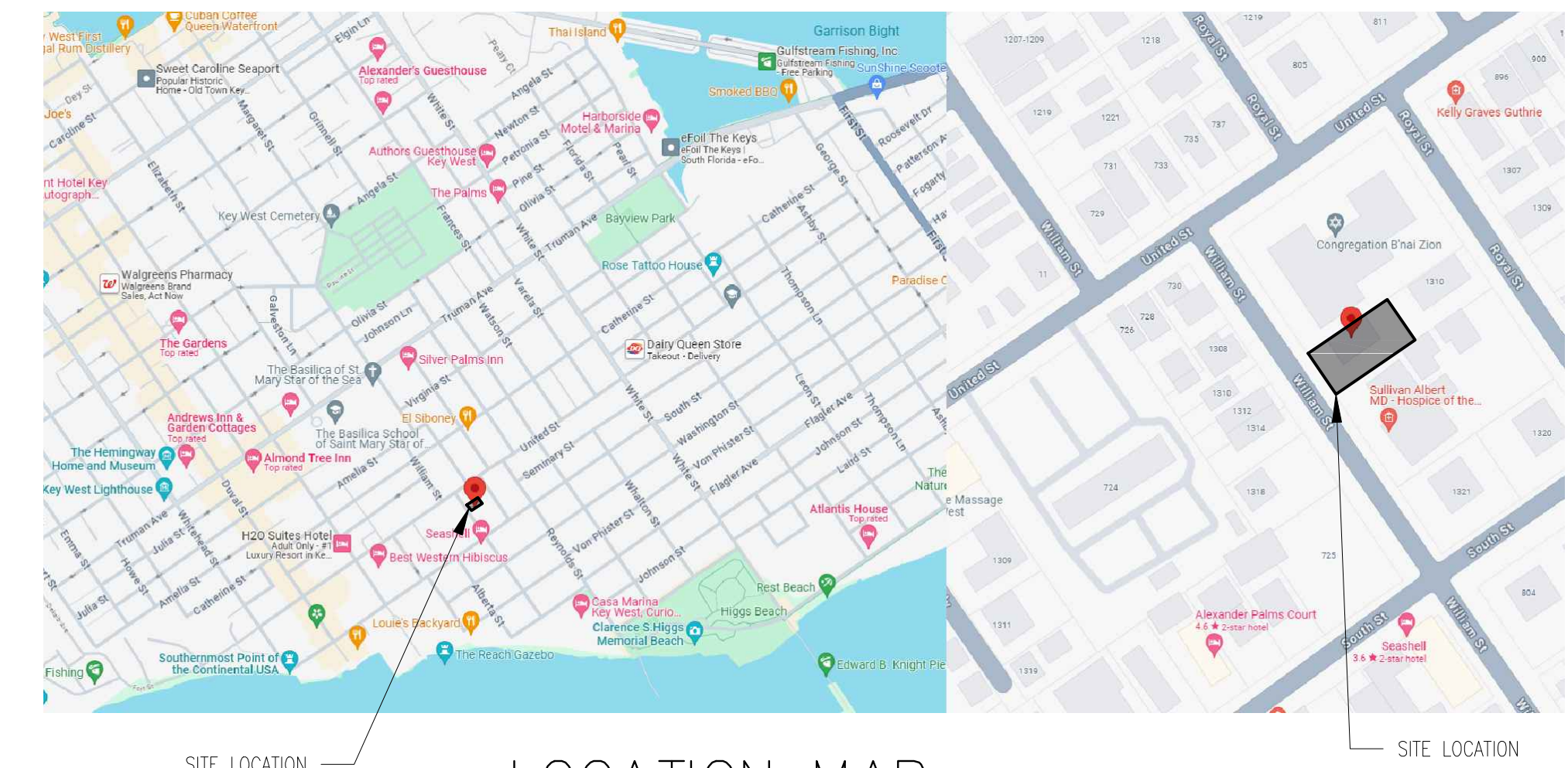
SCALE: 1" = 10'

PROJECT STATISTICS

FEMA FLOOD ZONE	ZONE X		
ZONING DESIGNATION	HMDR		
LOT SIZE	5,300 FT ²		
OCCUPANCY	SINGLE FAMILY		
	REQUIRED	EXISTING	PROPOSED
BUILDING COVERAGE (5,300 FT ² X 40%)	2,120 FT ² MAX.		1,405 FT ²
IMPERVIOUS SURFACE (5,300 FT ² X 60%)	3,180 FT ² MAX.		2,337 FT ²
FRONT SETBACK	10'-0" MIN.		20'-8"
SIDE SETBACK (NORTH)	5'-0" MIN.		8'-2"
SIDE SETBACK (SOUTH)	5'-0" MIN.		13'-10"
REAR SETBACK	15'-0" MIN.		23'-3"
OPEN SPACE (35%)			2,963 FT ²

SHEET INDEX

C1 - SITE PLAN
C2 - HARC CONTEXT ELEVATIONS
A1 - FLOOR PLANS
A2 - BUILDING ELEVATIONS
S1 - FOUNDATION PLAN
S2 - SECOND FLOOR FRAMING PLAN
ROOF FRAMING PLAN
S3 - SECTIONS & DETAILS
E1 - GROUND & FIRST FLOOR ELECTRICAL
M1 - FIRST & SECOND FLOOR HVAC LAYOUT
M2 - HVAC DETAILS
P1 - SANITARY PIPING PLAN
P2 - HOT & COLD WATER SUPPLY PLAN



LOCATION MAP

SCALE: N.T.S

LEGAL DESCRIPTION

IN THE CITY OF KEY WEST AND KNOWN AS A PART OF LOT 33 IN SQUARE 4 OF TRACT 17, ACCORDING TO WHITE'S & PIERCE'S DIAGRAM OF SAID SQUARE 4, TRACT 17, RECORDED IN DEED BOOK "N" PAGE 613, RECORDS OF MONROE COUNTY, FLORIDA.

SITE INFORMATION

RE#: 00036980-000000
AK#: 1037770
ZONING: HISTORIC MEDIUM DENSITY RESIDENTIAL (HMDR)
TIER: N/A
FLUM: N/A
LOT SIZE: 5,300 SF

FLOOD INFORMATION

COMMUNITY NUMBER: 120168
PANEL NUMBER: 12087C1516K
SUFFIX: K
FIRM ZONE: X
BASE FLOOD ELEVATION: -
DESIGN FLOOD ELEVATION: -

GENERAL NOTES

- THESE PLANS INTEND TO SHOW THE GENERAL AGREEMENT, DESIGN AND EXTENT OF THE WORK AND ARE PARTIALLY DIAGRAMMATIC. THEY ARE NOT INTENDED TO BE SCALED FOR ROUGH-IN MEASUREMENTS OR TO SERVE AS SHOP DRAWINGS OR PORTIONS THEREOF.
- ALL DETAILS AND SECTIONS SHOWN ON THE DRAWINGS ARE INTENDED TO BE TYPICAL AND SHALL BE CONSTRUED TO APPLY TO ANY SIMILAR SITUATION ELSEWHERE ON THE PROJECT EXCEPT WHERE A DIFFERENT DETAIL IS SHOWN.
- THE CONTRACTOR AND ALL SUBCONTRACTORS SHALL VERIFY ALL GRADES, LINES, LEVELS, DIMENSIONS AND EXISTING CONDITIONS AT THE JOB SITE AND AS SHOWN ON THE DRAWINGS. THEY SHALL REPORT ANY ERRORS OR INCONSISTENCIES IN THE ABOVE TO THE ARCHITECT OR ENGINEER BEFORE COMMENCING WORK. THE CONTRACTOR AND HIS SUBCONTRACTORS SHALL LAY OUT THEIR WORK FROM ESTABLISHED REFERENCE.
- IF ANY ERRORS OR OMISSIONS APPEAR IN THE DRAWINGS, GENERAL NOTES OR ANY OTHER DOCUMENTS, THE CONTRACTOR SHALL NOTIFY THE ARCHITECT OR ENGINEER IN WRITING OF SUCH OMISSIONS OR ERRORS PRIOR TO PROCEEDING WITH ANY WORK WHICH APPEARS IN QUESTION. IN THE EVENT OF THE CONTRACTOR FAILING TO GIVE SUCH NOTICE, HE SHALL BE HELD RESPONSIBLE FOR THE RESULTS OF ANY SUCH ERRORS OR OMISSIONS AND THE COST OF RECTIFYING WITH THE SAME.
- THE CONTRACTOR SHALL USE THE STRUCTURAL DRAWINGS TOGETHER WITH THE ARCHITECTURAL, MECHANICAL, AND ELECTRICAL DRAWINGS TO LOCATE DEPRESSED SLABS, SLOPES, OUTLETS, RECESSES, OPENINGS, ROUGH SETTINGS, SLEEVES, DIMENSIONS, ETC. NOTIFY ARCHITECT OR ENGINEER OF ANY POTENTIAL CONFLICTS BEFORE PROCEEDING WITH THE WORK.
- SHOP DRAWINGS: NO SHOP DRAWINGS SHALL BE SUBMITTED FOR ARCHITECTS OR ENGINEERS APPROVAL OR REVIEW UNTIL AFTER THEY HAVE BEEN THOROUGHLY REVIEWED BY THE CONTRACTOR FOR CONSTRUCTION METHODS, DIMENSIONS AND OTHER TRADE REQUIREMENTS AND STAMPED WITH THE CONTRACTORS APPROVAL STAMP. ARCHITECT ASSUMES NO RESPONSIBILITY FOR DIMENSIONS, QUANTITIES, ERRORS OR OMISSIONS AS A RESULT OF REVIEWING ANY SHOP DRAWINGS.

ENGINEER'S NOTES:

TO THE BEST OF MY PROFESSIONAL KNOWLEDGE AND BELIEF, THE STRUCTURAL DESIGN COMPLIES WITH THE APPLICABLE SECTION OF THE FLORIDA BUILDING CODE AND ALL MONROE COUNTY APPLICABLE CODES.

MEANS AND METHODS OF CONSTRUCTION AND SAFETY PRECAUTIONS ARE THE RESPONSIBILITIES OF THE CONTRACTOR.

IT IS THE RESPONSIBILITY OF THE OWNER OR GENERAL CONTRACTOR TO VERIFY ALL NOTES, DIMENSIONS AND DESIGN OF THESE PLANS, PRIOR TO COMMENCEMENT OF WORK. IF ANY DISCREPANCIES SHALL ARISE, STOP WORK AND CONTACT ENGINEER IMMEDIATELY.

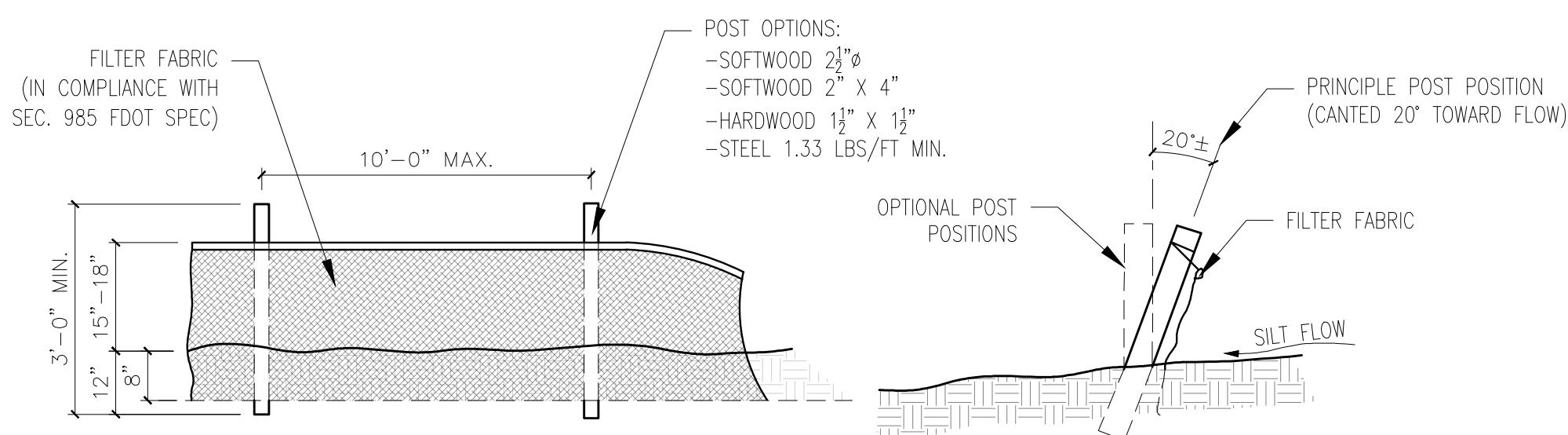
TERMITE PROTECTION:

PROVIDE PRE-CONSTRUCTION TREATMENT PROTECTION AGAINST SUBTERRANEAN TERMITES IN COMPLIANCE WITH FBC SECTION 1816.1-1816.8. A CERTIFICATE OF COMPLIANCE SHALL BE ISSUED TO THE BUILDING DEPARTMENT BY A LICENSED PEST CONTROL COMPANY THAT CONTAINS THE FOLLOWING STATEMENT:

"THE BUILDING HAS RECEIVED A COMPLETE TREATMENT FOR THE PREVENTION OF SUBTERRANEAN TERMITES. TREATMENT IS IN ACCORDANCE WITH RULES AND LAWS ESTABLISHED BY THE FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES."

CERTIFICATE OF COMPLIANCE

I CERTIFY THIS BUILDING TO BE DESIGNED TO WITHSTAND 180 MPH WIND SPEED ACCORDING TO ASCE 7-16 AS REQUIRED BY THE FLORIDA BUILDING CODE 2020. SEE STRUCTURAL SHEETS FOR OTHER DESIGN CRITERIA.



SILT FENCE DETAILS

SCALE: N.T.S

PERSON	DATE

(305)525-0611
K.E.S. CONSULTING, INC.
CONSULTING ENGINEERS
102025 OVERSEAS HWY. UNIT #1
KEY LARGO, FLORIDA 33037

GENERAL CONTRACTOR
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2711 SW 137 AVE., SUITE 91
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P. 305.266.8885 | F. 305.266.8828
C.C. 15.3192

A NEW SFR FOR: RE#: 00036980-000000
CASA DE WILLIAM, LLC
1315 WILLIAM STREET
KEY WEST, FL 33040

DATE:	3-20-24
SCALE:	SHOWN
DRAWN:	JTB
JOB:	2023-056
FILE NAME:	
SHEET NO.:	C1
OF 12 SHEETS	

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REVISION	DATE



HARC CONTEXT ELEVATIONS
SCALE: 1" = 10'



750 UNITED STREET (WILLIAM STREET ELEVATION)



1319 WILLIAM STREET

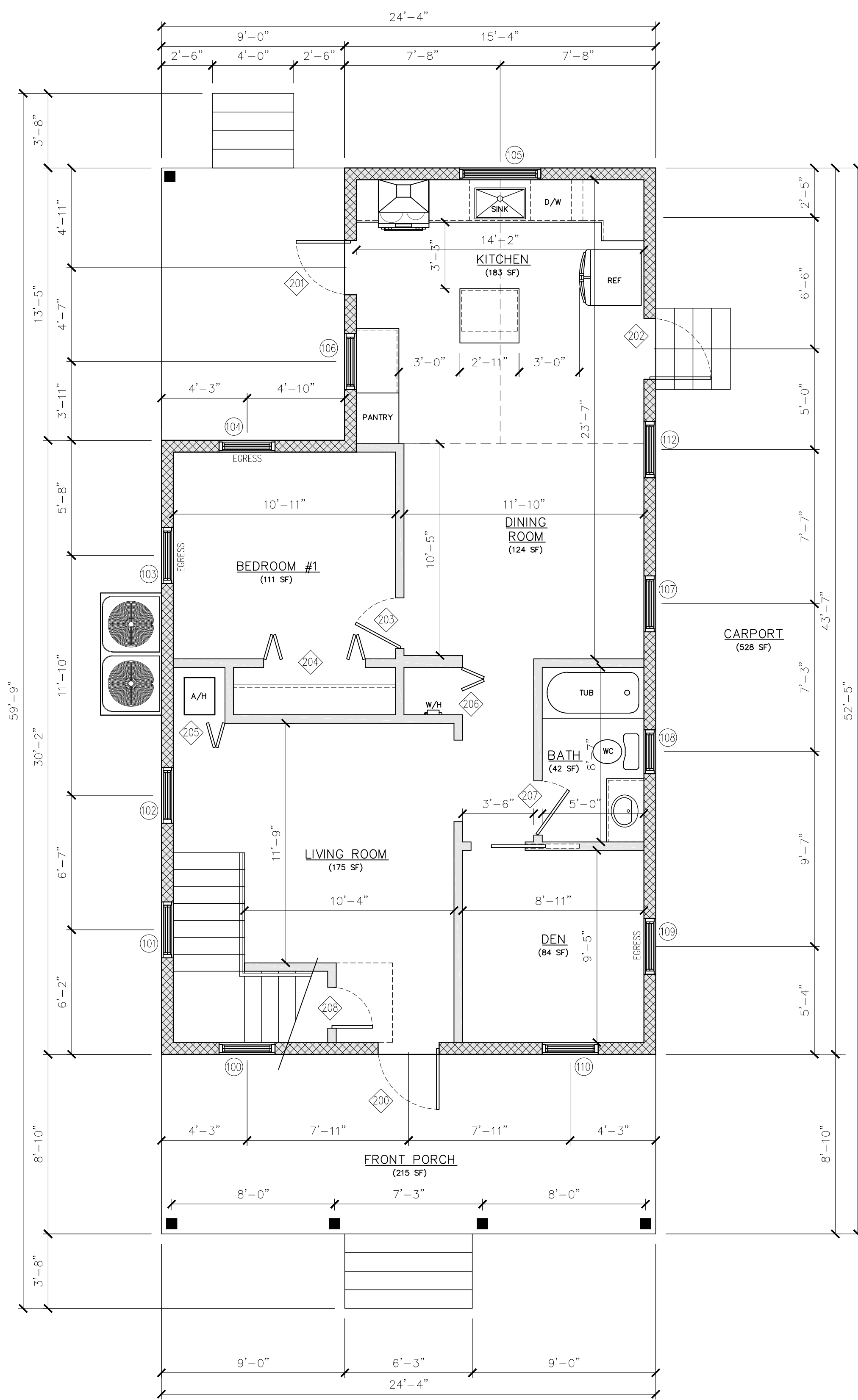
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GCC 1513192

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CASA DE WILLIAM, LLC
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KEY WEST, FL 33040

DATE: 3-20-24
SCALE: SHOWN
DRAWN: JTB
JOB: 2023-056
FILE NAME:
SHEET NO: **C2**
OF 12 SHEETS

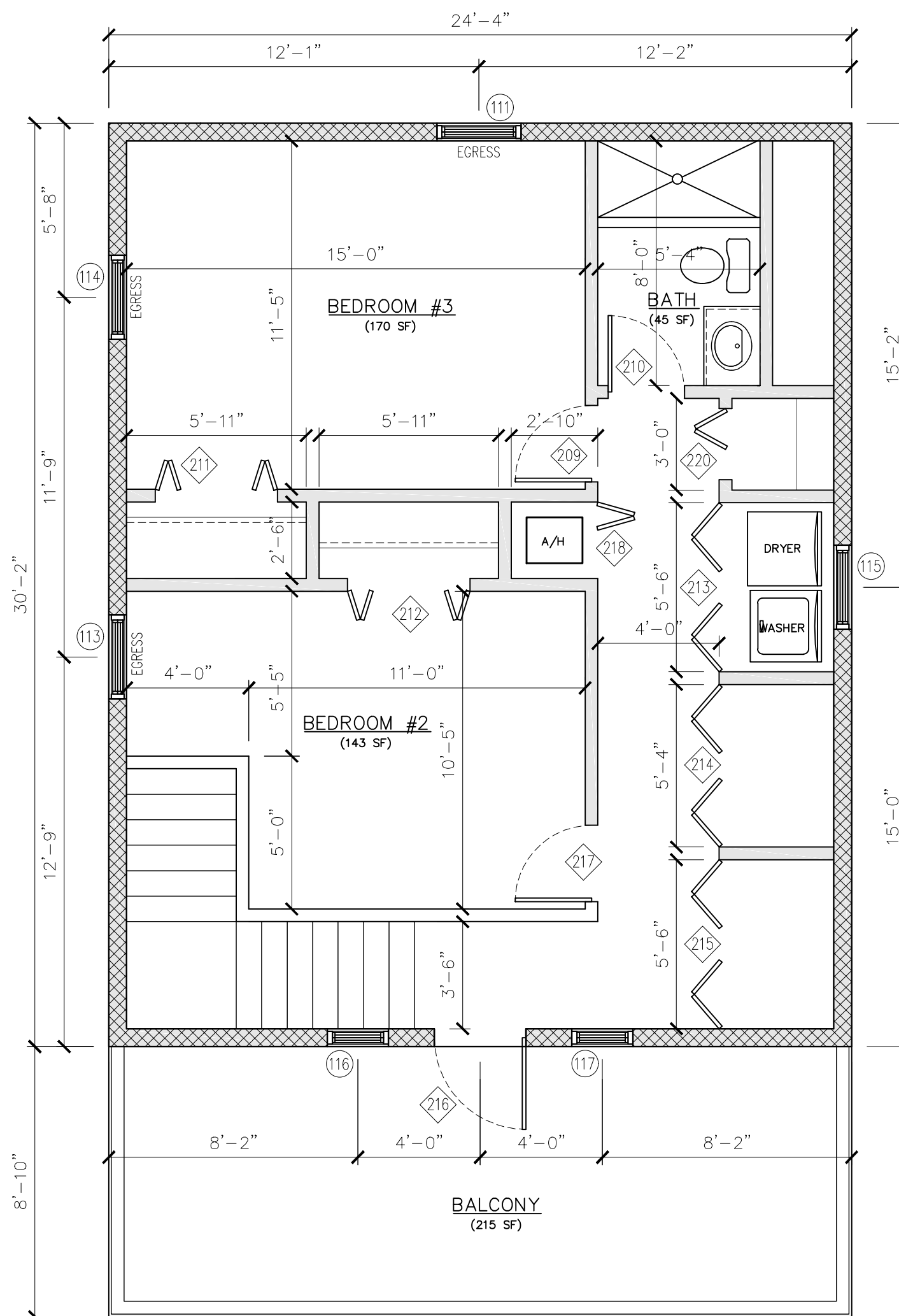
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GROUND FLOOR PLAN
SCALE: 1/4" = 1'-0" 939 SF

PARTITIONS AND LUMBER

1. ALL FINISH MATERIALS SHALL HAVE A MINIMUM FLAME SPREAD CLASSIFICATION REQUIRED BY FBC.
2. PARTITIONS TO RUN FROM FLOOR TO UNDERSIDE OF SLABS, JOISTS OR TRUSSES AND TO CONSIST OF WOOD STUDS AT 16" O.C WITH 1/2" GYPSUM WALLBOARD ON BOTH SIDES.
3. ALL WALLBOARD BEHIND SINKS, LAVATORIES, BATHTUBS, SHOWERS, WATER CLOSETS AND BIDETS TO BE WATER RESISTANT.
4. CONTRACTOR TO COORDINATE THICKNESS OF ALL PARTITIONS TO ACCOMMODATE MECHANICAL, PLUMBING, AND ELECTRICAL WORK. DIMENSIONS SHOWN ON PLANS ARE NOMINAL.
5. LUMBER USED FOR JOIST, RAFTERS, COLUMNS, BEAMS OR OTHER STRUCTURAL MEMBERS SHALL BE OF A STRESS GRADE NOT LESS THAN 1000 PSI NOMINAL EXTREME FIBER STRESS IN BENDING.
6. LUMBER USED FOR STUDS IN INTERIOR NON-BEARING PARTITIONS SHALL BE OF A STRESS GRADE NOT LESS THAN 225 PSI NOMINAL EXTREME FIBER STRESS IN BENDING.
7. LUMBER USED FOR STUDS IN INTERIOR BEARING PARTITIONS SHALL BE OF A STRESS GRADE OF NOT EXTREME STRESS IN BENDING.
8. ALL WOOD IN CONTACT WITH MASONRY SHALL BE PRESSURE TREATED.
9. LOAD BEARING PARTITION TO BE 2"x4" P.T. AT 12" O.C. WITH 2"x4" P.T. TOP PLATE AND 2"x4" P.T. BOTTOM PLATE. PROVIDE HURRICANE CLIPS AT EACH STUD TOP AND BOTTOM



SECOND FLOOR PLAN
SCALE: 1/4" = 1'-0" 734 SF

EGRESS WINDOW NOTES

1. PROVIDE NET CLEAR OPENING OF NO LESS THAN 5.7 SF. (FBC 2020 R310.2.1)
2. MINIMUM NET CLEAR OPENING HEIGHT DIMENSION SHALL BE 24". THE MINIMUM NET CLEAR OPENING WIDTH DIMENSION SHALL BE 20". (FBC 2020 R310.2.1)
3. EMERGENCY ESCAPE AND RESCUE OPENINGS SHALL HAVE THE BOTTOM CLEAR OPENING NOT GREATER THAN 44" MEASURED FROM THE FLOOR. (FBC 2020 R310.2.2)

WINDOW SCHEDULE

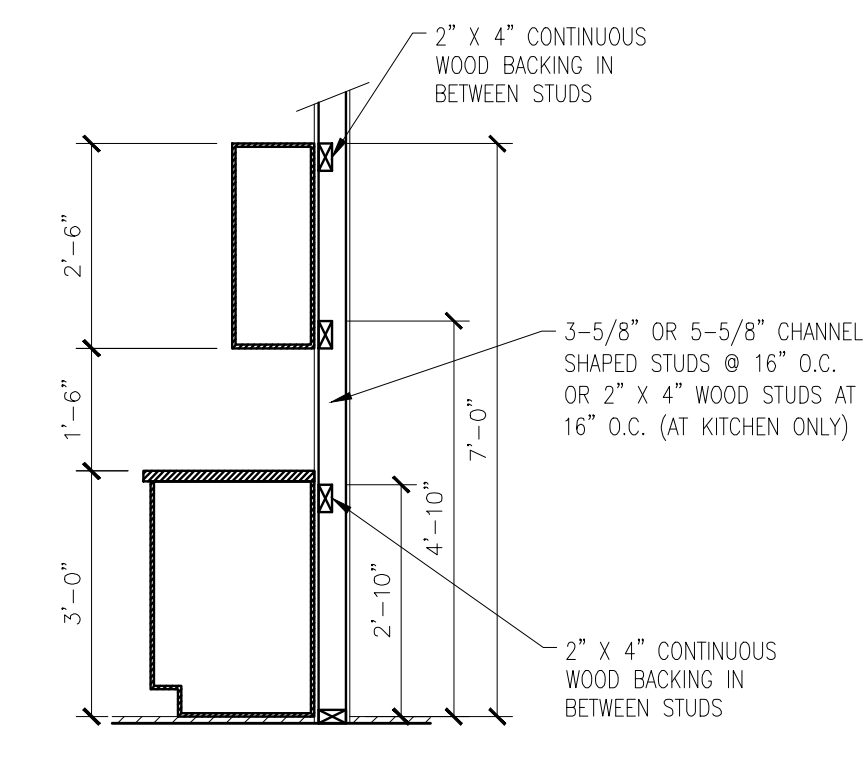
MARK	WIDTH	HEIGHT	MATERIAL	COLOR	TYPE	POSITIVE PRESSURE	NEGATIVE PRESSURE	MANUFACTURER - MODEL	MAX DESIGN PRESSURE	N.O.A #
100	32"	63"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-75.5	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
101	32"	63"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-61.9	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
102	32"	63"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-61.9	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
103	32"	63"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-61.9	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
104	32"	63"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-75.5	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
105	48"	38-3/8"	ALUMINUM	WHITE	SINGLE HUNG	+57.4	-62.3	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
106	32"	38-3/8"	ALUMINUM	WHITE	SINGLE HUNG	+58.3	-63.2	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
107	32"	63"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-61.9	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
108	26-1/2"	26"	ALUMINUM	WHITE	SINGLE HUNG	+58.3	-63.2	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
109	32"	63"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-61.9	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
110	32"	63"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-75.5	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
111	32"	53"	ALUMINUM	WHITE	SINGLE HUNG	+58.2	-63.1	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
112	32"	63"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-61.9	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
113	32"	53"	ALUMINUM	WHITE	SINGLE HUNG	+57.0	-61.9	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
114	32"	53"	ALUMINUM	WHITE	SINGLE HUNG	+58.2	-77.9	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
115	32"	53"	ALUMINUM	WHITE	SINGLE HUNG	+58.3	-63.2	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
116	24"	36"	ALUMINUM	WHITE	SINGLE HUNG	+58.3	-63.2	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14
117	24"	36"	ALUMINUM	WHITE	SINGLE HUNG	+58.3	-63.2	ECO GUARD - 'SERIES 100'	+75/-90	20-1119.14

DOOR SCHEDULE

MARK	WIDTH	HEIGHT	MATERIAL	CORE	TYPE	STYLE	POSITIVE PRESSURE	NEGATIVE PRESSURE	MAX DESIGN PRESSURE	N.O.A #	COMMENTS
200	3'-0"	6'-8"	ALUMINUM	-	FRENCH	FULL LITE	+55.7	-60.6		20-1007.08	FRONT DOOR
201	3'-0"	6'-8"	ALUMINUM	-	FRENCH	FULL LITE	+55.7	-60.6		20-1007.08	KITCHEN PATIO
202	3'-0"	6'-8"	ALUMINUM	-	FRENCH	FULL LITE	+55.7	-60.6		20-1007.08	SIDE DOOR
203	2'-6"	6'-8"	WOOD	SOLID	SWING	6 PANEL					BEDROOM
204	5'-0"	6'-8"	WOOD	SOLID	BI-FOLD	6 PANEL					CLOSET
205	2'-6"	6'-8"	WOOD	SOLID	BI-FOLD	LOUVERED					A/C CLOSET
206	2'-4"	6'-8"	WOOD	SOLID	BI-FOLD	6 PANEL					LINEN CLOSET
207	2'-8"	6'-8"	WOOD	SOLID	SWING	6 PANEL					BATHROOM
208	2'-0"	6'-8"	WOOD	SOLID	SWING	6 PANEL					STORAGE
209	2'-6"	6'-8"	WOOD	SOLID	SWING	6 PANEL					BEDROOM
210	2'-6"	6'-8"	WOOD	SOLID	SWING	6 PANEL					BATHROOM
211	4'-0"	6'-8"	WOOD	SOLID	BI-FOLD	6 PANEL					CLOSET
212	4'-0"	6'-8"	WOOD	SOLID	BI-FOLD	6 PANEL					CLOSET
213	5'-6"	6'-8"	WOOD	SOLID	BI-FOLD	6 PANEL					STORAGE
214	5'-6"	6'-8"	WOOD	SOLID	BI-FOLD	6 PANEL					STORAGE
215	5'-6"	6'-8"	WOOD	SOLID	BI-FOLD	6 PANEL					STORAGE
216	3'-0"	6'-8"	ALUMINUM	-	FRENCH	FULL LITE	+55.7	-60.6		20-1007.08	BALCONY DOOR
217	2'-6"	6'-8"	WOOD	SOLID	SWING	6 PANEL					BEDROOM
218	2'-6"	6'-8"	WOOD	SOLID	BI-FOLD	LOUVERED					A/C CLOSET
219	2'-8"	6'-8"	WOOD	SOLID	POCKET	6 PANEL					DEN
220	2'-4"	6'-8"	WOOD	SOLID	BI-FOLD	6 PANEL					LINEN CLOSET

BATHTUB AND SHOWER SPACES
BATHTUB AND SHOWER FLOORS AND WALLS ABOVE BATHTUBS WITH INSTALLED SHOWER HEADS AND IN SHOWER COMPARTMENTS SHALL BE FINISHED WITH A NONABSORBENT SURFACE. SUCH WALL SURFACES SHALL EXTEND TO A HEIGHT OF NOT LESS THAN 6 FEET ABOVE THE FLOOR.

CERAMIC TILE SETTING
FIBER-CEMENT, FIBER-MAT REINFORCED CEMENT, GLASS MAT GYPSUM BACKERS OR FIBER-REINFORCED GYPSUM BACKERS IN COMPLIANCE WITH ASTM C 1268, C1325, C1178 OR C 1278, RESPECTIVELY, AND INSTALLED IN ACCORDANCE WITH MANUFACTURERS' RECOMMENDATIONS SHALL BE USED AS BACKERS FOR WALL TILE IN TUB AND SHOWER AREAS AND WALL PANELS IN SHOWER AREAS.



CABINET BLOCKING DETAIL
SCALE: N.T.S.

REVISION	DATE

(305)525-0611
K.E.S. CONSULTING, INC.
CONSULTING ENGINEERS
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CCC-1513192

A NEW SFR FOR: RE#: 00036980-000000
CASA DE WILLIAM, LLC
1315 WILLIAM STREET
KEY WEST, FL 33040

DATE:	3-20-24
SCALE:	SHOWN
DRAWN:	JTB
JOB:	2023-056
FILE NAME:	
SHEET NO.:	A1

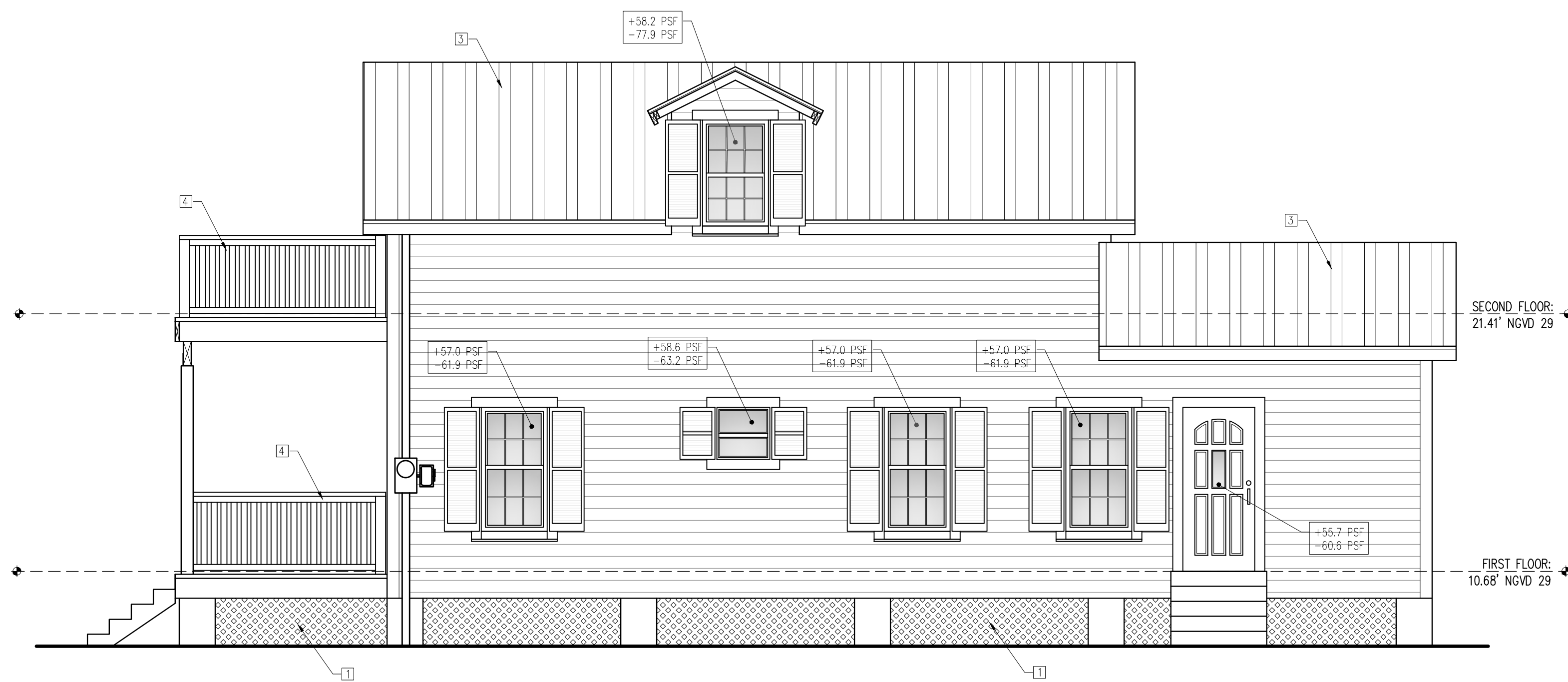
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REAR ELEVATION
SCALE: 1/4" = 1'-0"



LEFT ELEVATION
SCALE: 1/4" = 1'-0"



RIGHT ELEVATION
SCALE: 1/4" = 1'-0"



FRONT ELEVATION
SCALE: 1/4" = 1'-0"

ELEVATION NOTES	
MARK	DESCRIPTION
1	PVC LATTICE - 2-7/8" GRID OPENING
2	HARDI PLANK LAP BOARD SIDING WITH 6" REVEAL
3	5V CRIMP METAL ROOF
4	36" HIGH MIN. RAILING TO CODE

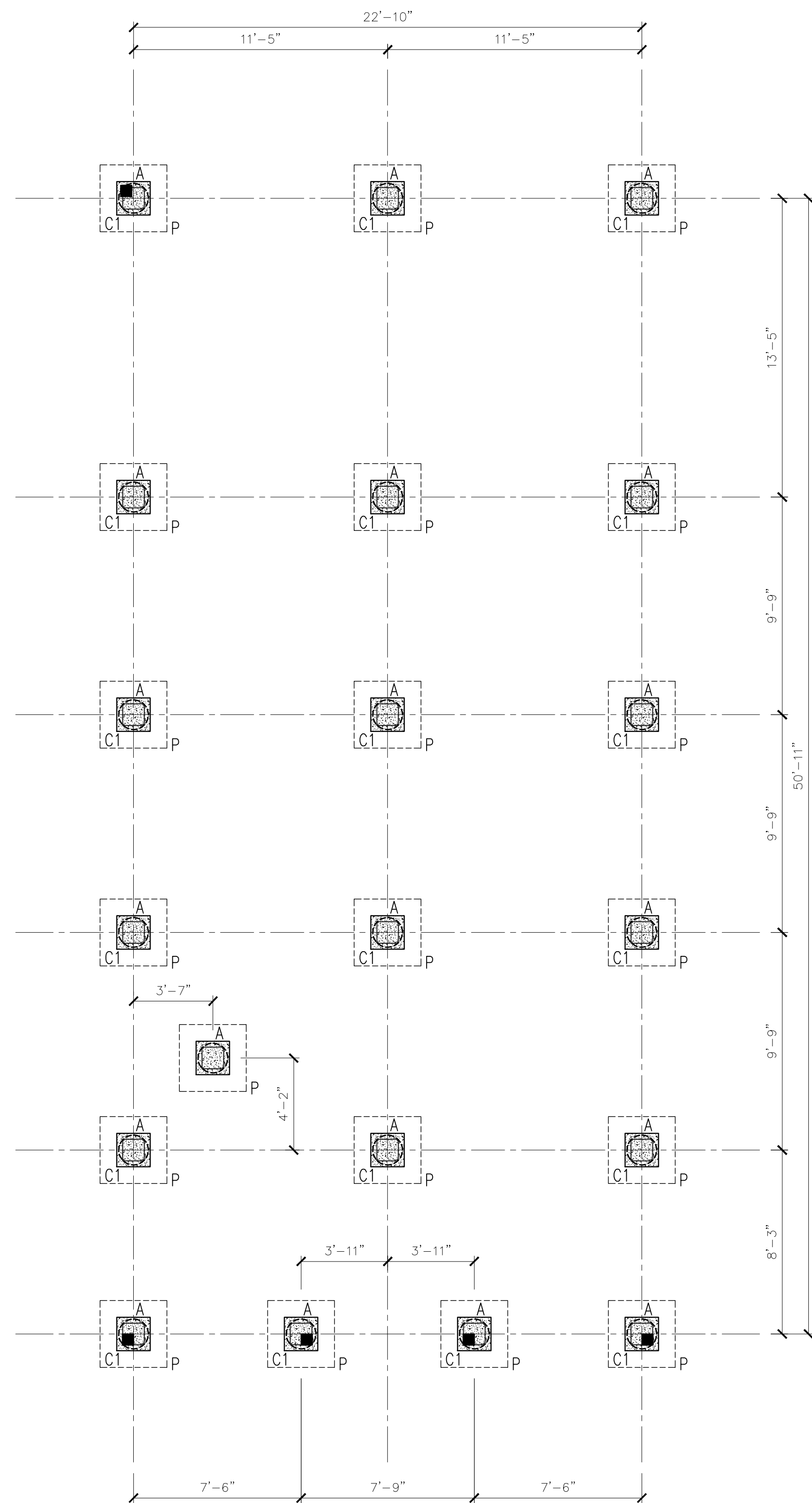
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CCC 1513192

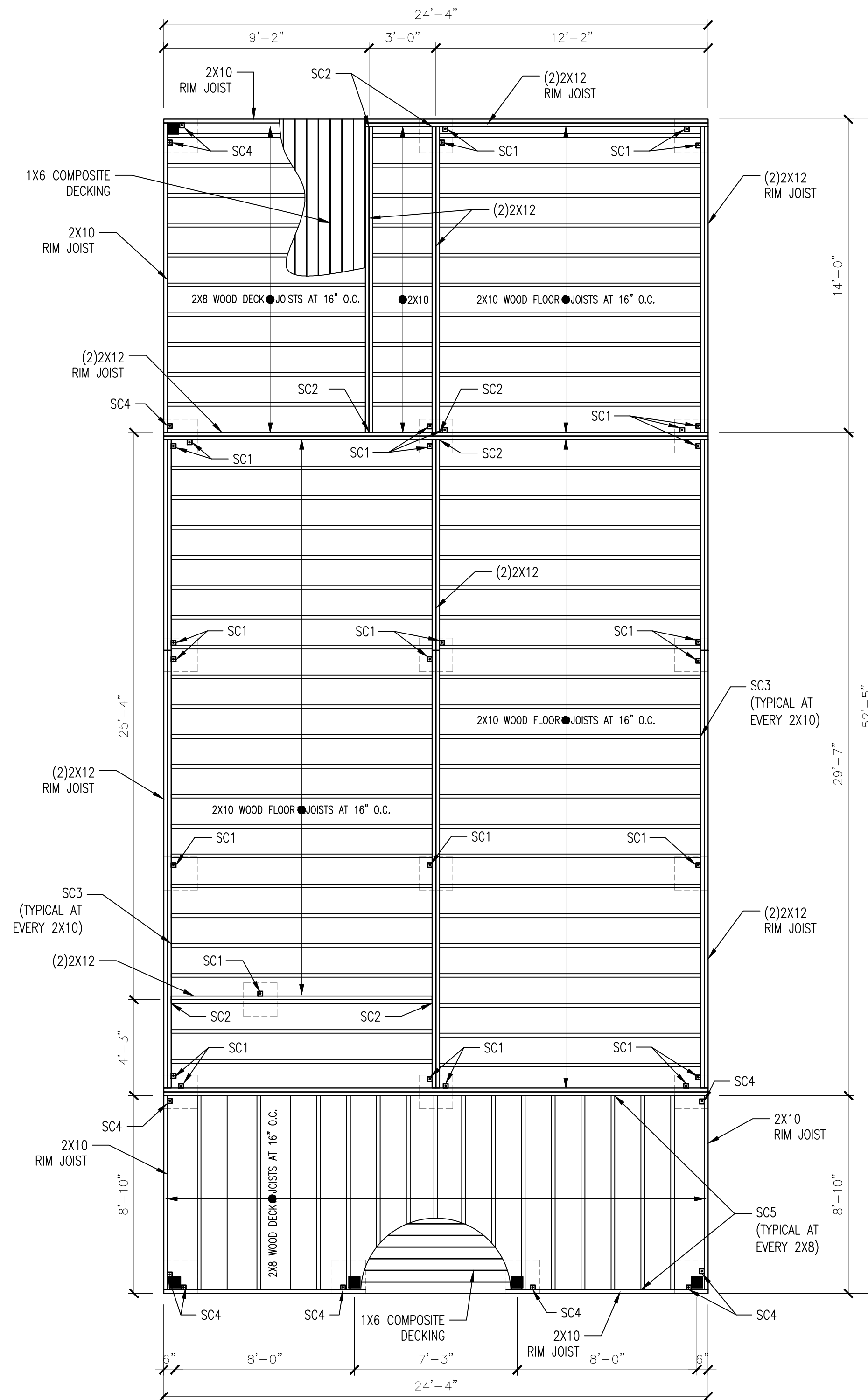
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CASA DE WILLIAM, LLC
1315 WILLIAM STREET
KEY WEST, FL 33040

DATE: 3-20-24
SCALE: SHOWN
DRAWN: JTB
JOB: 2023-056
FILE NAME:
SHEET NO. **A2**
OF 12 SHEETS

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FOUNDATION PLAN
SCALE: 1/4" = 1'-0"



FIRST FLOOR FRAMING PLAN
SCALE: 1/4" = 1'-0"

STRUCTURAL DESIGN CRITERIA:

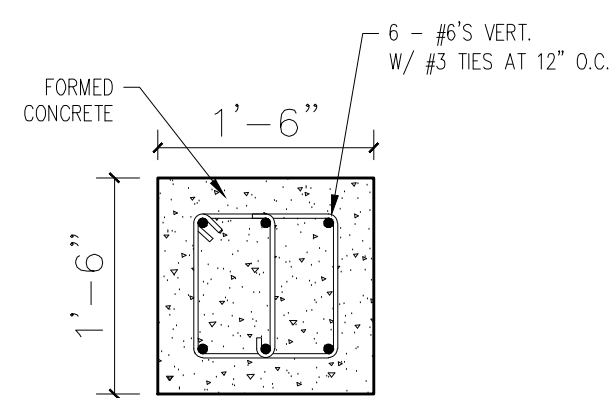
WINDSPEED: 180 MPH PER ASCE 7-16

EXPOSURE: D

IMPORTANCE FACTOR: 1.0

INTERNAL PRESSURE COEFFICIENT: -0.18

FLOOR LIVE LOAD: 40 PSF
FLOOR DEAD LOAD: 80 PSF
ROOF LIVE LOAD: 30 PSF
ROOF DEAD LOAD: 15 PSF



C-1

FOUNDATION SCHEDULE

MARK	DESCRIPTION
A	16"Ø AUGER HOLE DRILLED 3' MIN. INTO ROCK WITH 4 - #5'S VERT. AND #3 TIES AT 12" O.C.
P	36" X 36" X 12" AUGER CAP WITH #5'S AT 8" O.C. BOTH WAYS BOTTOM

COLUMN SCHEDULE

MARK	WIDTH	LENGTH	VERTICALS	TIES	NOTES
C1	18"	18"	6 - #5'S	#3 @ 12"	FORMED AND POURED CONCRETE

STRUCTURAL CONNECTOR SCHEDULE

MARK	DESCRIPTION
SC1	SIMPSON HD5B HOLDDOWN
SC2	SIMPSON HUS212-21F HEAVY TOP FLANGE HANGER
SC3	SIMPSON LU210 FACE MOUNT JOIST HANGER
SC4	SIMPSON HD3B HOLDDOWN
SC5	SIMPSON LU28 FACE MOUNT JOIST HANGER
SC6	SIMPSON H1A HURRICANE TIE
SC7	SIMPSON LUS28 JOIST HANGER

STRUCTURAL NOTES

CONCRETE

- CONCRETE SHALL HAVE 3,000 PSI COMPRESSIVE STRENGTH AT 28 DAYS, UNLESS OTHERWISE NOTED (U.O.N).
- ALL REINFORCING STEEL SHALL BE DEFORMED BARS, AND SHALL HAVE A MINIMUM YIELD STRENGTH OF 60,000 PSI GRADE 60, AND MEET A-615 SPECIFICATIONS.
- ALL STRUCTURAL STEEL SHALL HAVE A MINIMUM YIELD STRENGTH OF 36,000 PSI AND MEET ASTM A-36 SPECIFICATIONS.

FOUNDATIONS

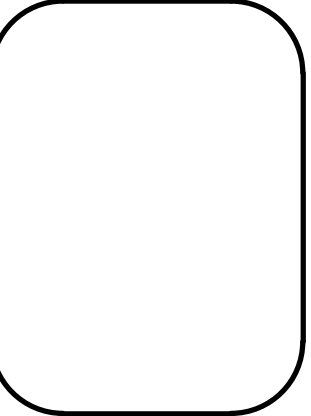
- CENTERLINE OF FOOTINGS IS CENTERLINE OF COLUMNS AND BEARING WALLS, UNLESS OTHERWISE NOTED (U.O.N)
- ELEVATION OF THE TOP FOUNDATION SHALL BE 1'-0" BELOW THE FINISH GRADE, (U.O.N).
- PROVIDE BENT DOWELS AT ALL COLUMNS AND VERTICAL REINFORCEMENT, SAME SIZE AND QUANTITY AS REINFORCEMENT.

REINFORCING

- MINIMUM CLEAR COVER FOR REBAR ARE AS FOLLOWS:
CONCRETE FOOTINGS (CAST AGAINST SOIL) 3"
SLABS (ABOVE GRADE LEVEL, U.O.N) 3/4"
BEAMS AND COLUMNS 1-1/2"
- ALL REINFORCING SHALL BE HELD SECURELY IN POSITION WITH STANDARD ACCESSORIES.
- SPLICING IN CONTINUOUS TOP REBARS SHALL BE MADE AT MIDSPAN. SPLICES IN CONTINUOUS BOTTOM REBARS SHALL BE OVER SUPPORT(S).
- SPLICING IN REINFORCING, WHERE PERMITTED, SHALL BE AS FOLLOWS:
-12" MINIMUM 6" COLUMN VERTICAL BARS - 30 BAR DIAMETERS
TEMPERATURE REBARS - 30 BAR DIAMETERS
- PROVIDE 2-#5 36" LONG BEND BARS AT CORNERS OF BEAMS

PERSON	DATE

(305)525-0611
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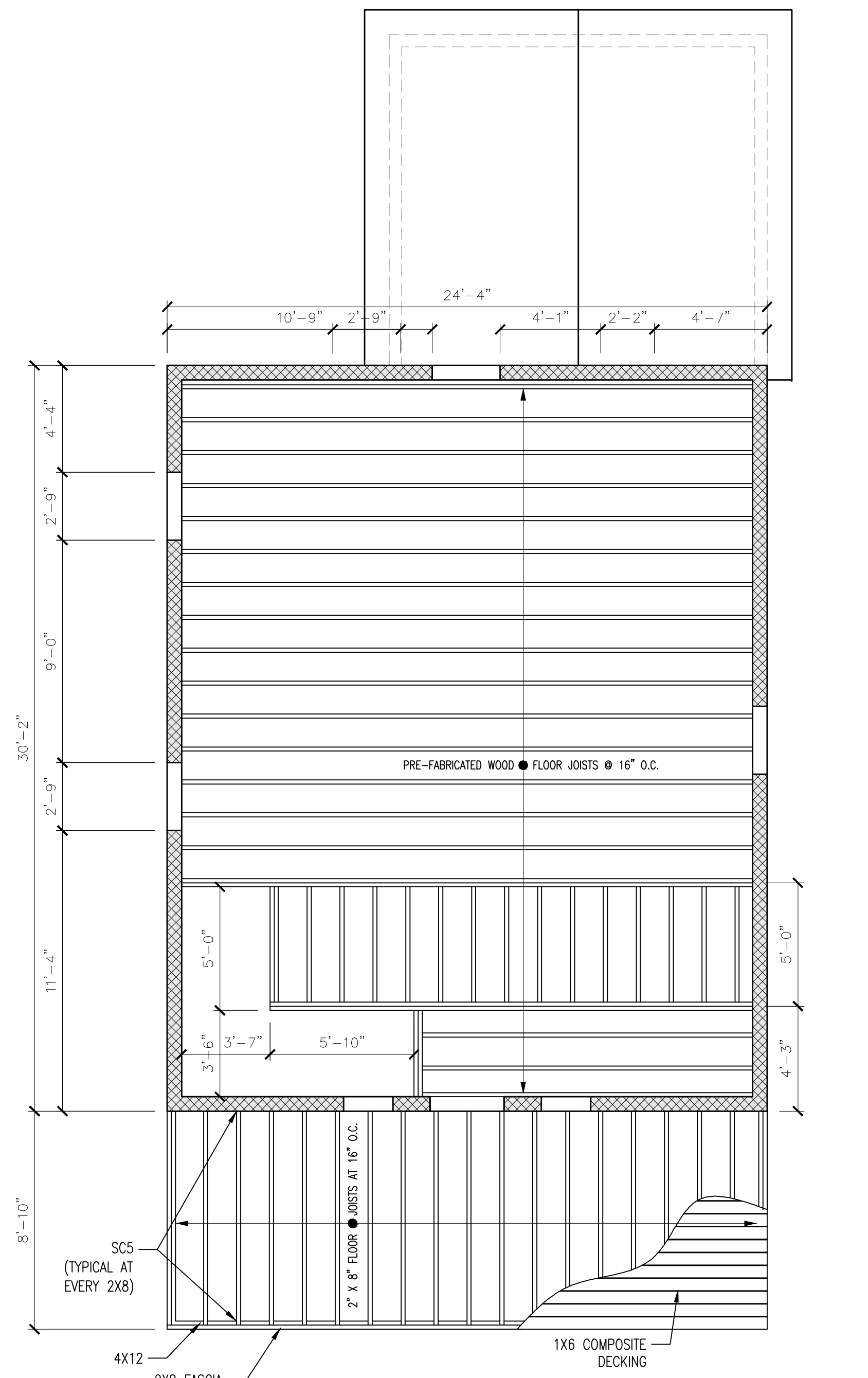


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RUMAC
Construction Group, Inc.
2711 SW 137 AVE. SUITE 91
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CC 1513192

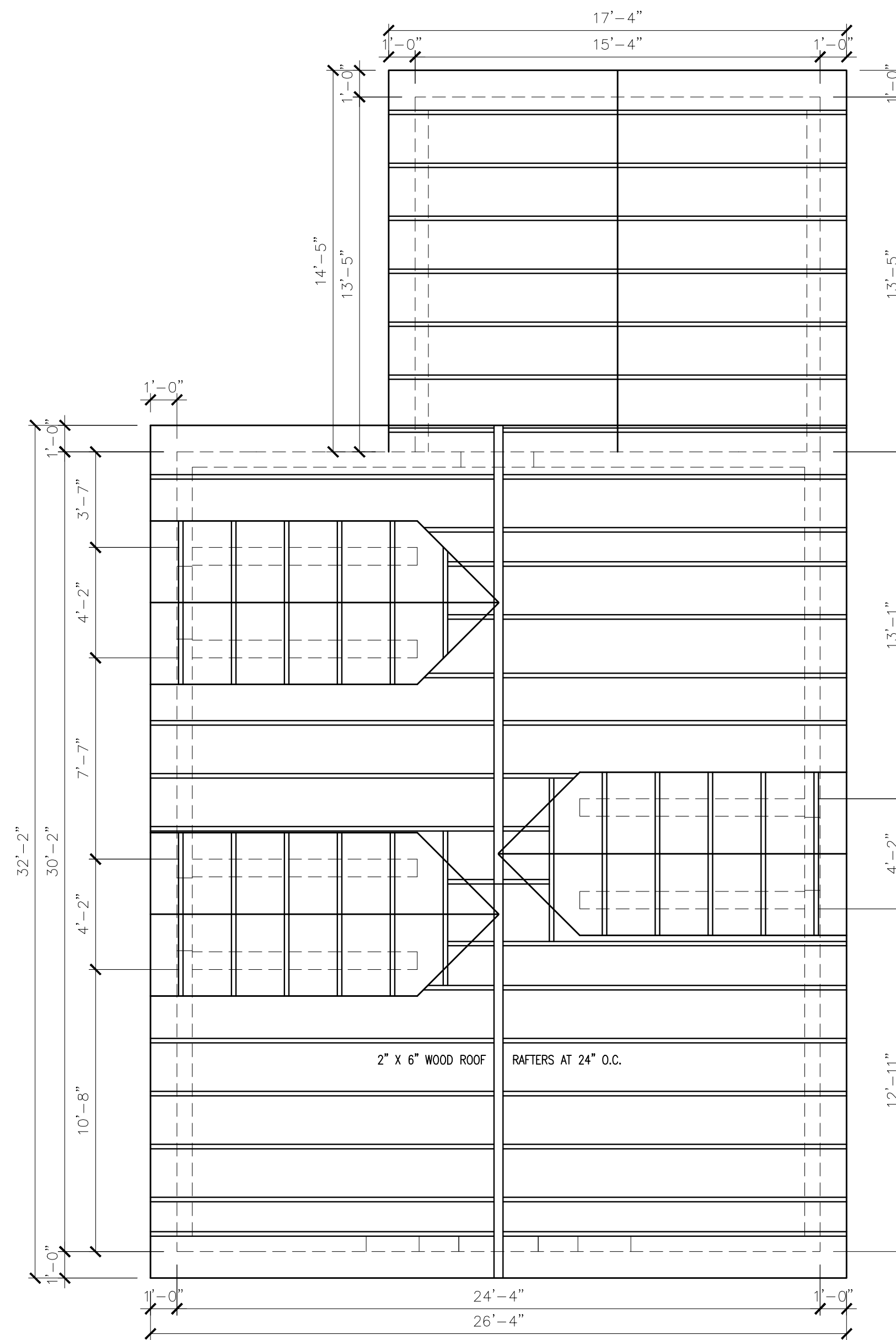
A NEW SFR FOR: RE#: 00036980-000000
CASA DE WILLIAM, LLC
1315 WILLIAM STREET
KEY WEST, FL 33040

DATE	SCALE	DRAWN	JOB	FILE NAME	SHEET NO.
3-20-24	SHOWN	JTB	2023-056		S1

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SECOND FLOOR FRAMING PLAN
SCALE: 1/4" = 1'-0"



ROOF FRAMING PLAN
SCALE: 1/4" = 1'-0"

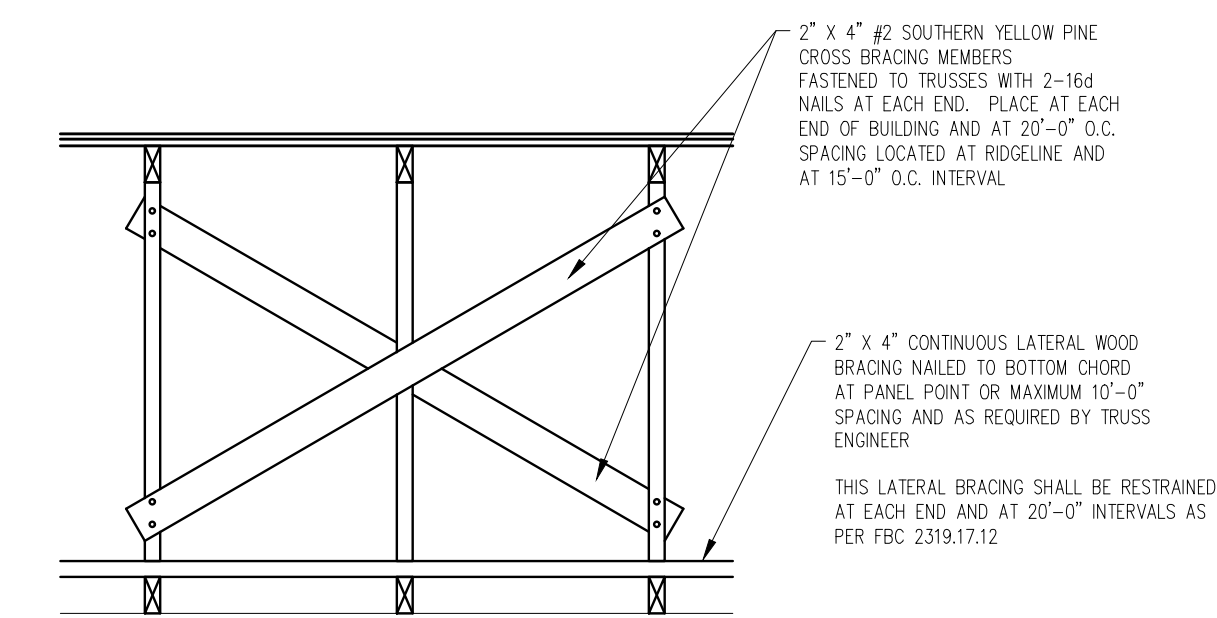
VENTILATION OF ATTIC SPACE
THE RATIO OF TOTAL NET VENTILATION AREA TO THE AREA OF CEILING SHALL NOT BE LESS THAN 1/150 AS PER 2326.3.2 FBC. PROVIDE - 4X24 VENTS

1,019 SF / 150 = 6.8 PROVIDE 7 - 4X24 VENTS IN SOFFIT

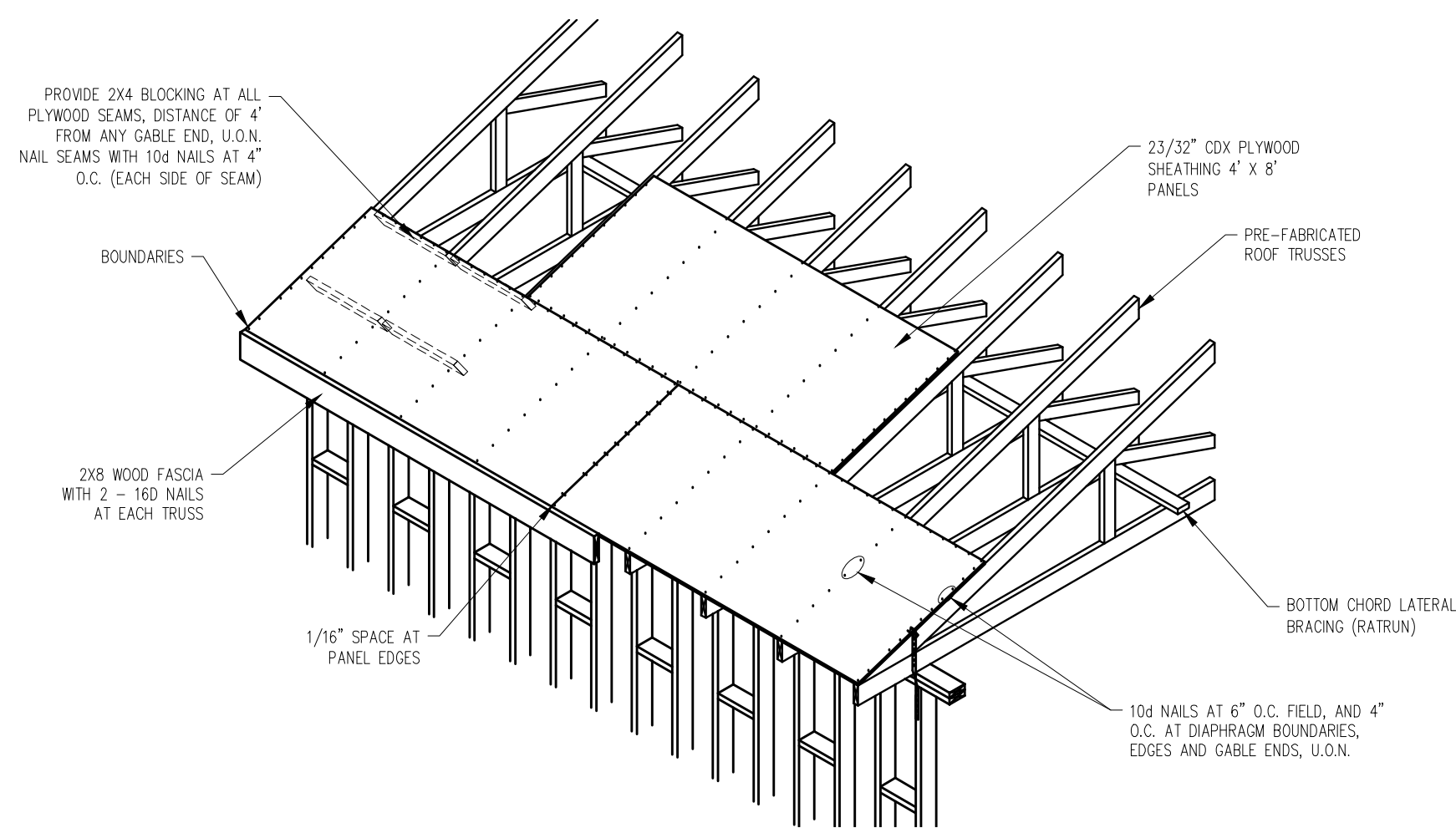
FOUNDATION SCHEDULE	
MARK	DESCRIPTION
A	16" AUGER HOLE DRILLED 3' MIN. INTO ROCK WITH 4 - #5'S VERT. AND #3 TIES AT 12" O.C.
P	36" X 36" X 12" AUGER CAP WITH #5'S AT 8" O.C. BOTH WAYS BOTTOM

COLUMN SCHEDULE					
MARK	WIDTH	LENGTH	VERTICALS	TIES	NOTES
C1	18"	18"	6 - #5'S	#3 @ 12"	FORMED AND POURED CONCRETE

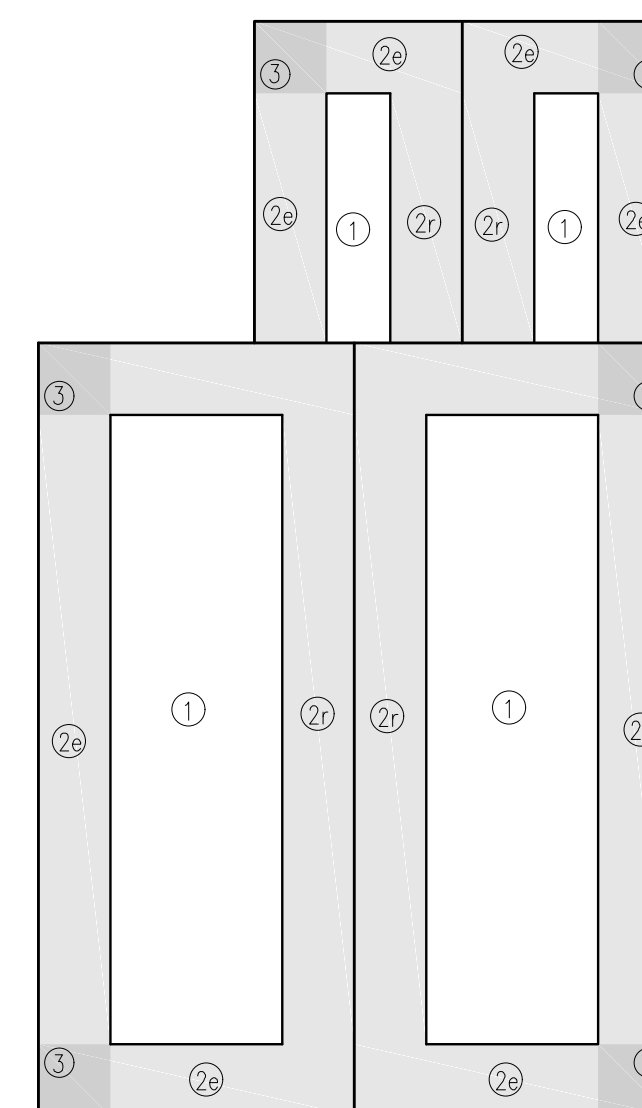
STRUCTURAL CONNECTOR SCHEDULE	
MARK	DESCRIPTION
SC1	SIMPSON HD5B HOLDOWN
SC2	SIMPSON HUS212-2TF HEAVY TOP FLANGE HANGER
SC3	SIMPSON LU210 FACE MOUNT JOIST HANGER
SC4	SIMPSON HD3B HOLDOWN
SC5	SIMPSON LU28 FACE MOUNT JOIST HANGER
SC6	SIMPSON H1A HURRICANE TIE
SC7	SIMPSON LUS28 JOIST HANGER



TYPICAL X-BRACING DETAIL
SCALE: N.T.S.



TYPICAL ROOF SHEATHING DETAIL
SCALE: N.T.S.



ROOF WINDLOAD CALCULATIONS

ZONE	COMPONENT	WINDLOADS
1	5 V CRMP	+43.7 -102.8
2a	5 V CRMP	+29.8 -118.5
2b	5 V CRMP	+31.6 -120.0
3	5 V CRMP	+37.7 -138.0

HEREFORE, ATTACH GALVANIZED 3/8 GA 5 V CRMP TO ROOF W/ FASTENERS AS SPECIFIED AT ZONES:

- 1 #8-15 HH CORROSION RESISTANT FASTENERS @ 12" O.C. AT SIDE LAPS PERPENDICULAR TO ROOF SLOPE & 12" O.C. IN THE CENTER OF THE PANEL AT THE FIELD PERPENDICULAR TO ROOF SLOPE.
- 2a #8-15 HH CORROSION RESISTANT FASTENERS @ 12" O.C. AT SIDE LAPS PERPENDICULAR TO ROOF SLOPE & 6" O.C. IN THE CENTER OF THE PANEL AT THE FIELD PERPENDICULAR TO ROOF SLOPE. (APPLIES TO EAVE & ENCLAP)
- 3 #8-15 HH CORROSION RESISTANT FASTENERS @ 6" O.C. AT SIDE LAPS PERPENDICULAR TO ROOF SLOPE & 6" O.C. IN THE CENTER OF THE PANEL AT THE FIELD PERPENDICULAR TO ROOF SLOPE. (APPLIES TO EAVE & ENCLAP)

MATERIALS AS SPECIFIED TO BE PROVIDED BY VALUE METALS & INSTALLED PER DADE COUNTY NDA.

WIND LOAD INFORMATION
SCALE: 1/8" = 1'-0"

ROOF PLAN NOTES:

1. SUPER IMPOSED LOADS:
DL = 15 PSF
LL = 30 PSF
- PRE-ENGINEERED WOOD ROOF TRUSSES AT 24" FOR EXACT GT MEMBERS (A MINIMUM OF 2)
2. FOR CONNECTING OF PREFAB. WOOD TRUSSES (GIRDER TRUSS) TO CONCRETE BEAMS PROVIDE UPLIFT STRAP CONNECTOR.
3. FOR ROOF SHEATHING PROVIDE 23/32" CDX PLYWOOD SPACING 1/16" WITH 10d NAILS AT 6" O.C. ALONG EDGES AND AT ALL SUPPORTING TRUSSES AND 10d NAILS AT GABLE ENDS
4. FOR ALL EXTERIOR SOFFITS EXCEPT OVERHANGS PROVIDE MINIMUM 1/2" PLYWOOD SHEATHING WITH 8d NAILS AT 6" ALONG EDGES AND AT ALL SUPPORTING TRUSSES BOTTOM CHORDS
5. FOR ALL PIGGYBACKS PROVIDE 14 GA X 1" GALVANIZED STRAP BY "SEMCO" MODEL NO. RTPG816 AT EACH TRUSS WITH 3-16d NAILS AT EACH MEMBER
6. ALL ROOF CONNECTIONS TRUSS TO TRUSS TO BE SUPPLIED BY MANUFACTURER

REVISIONS: [] DATE: []

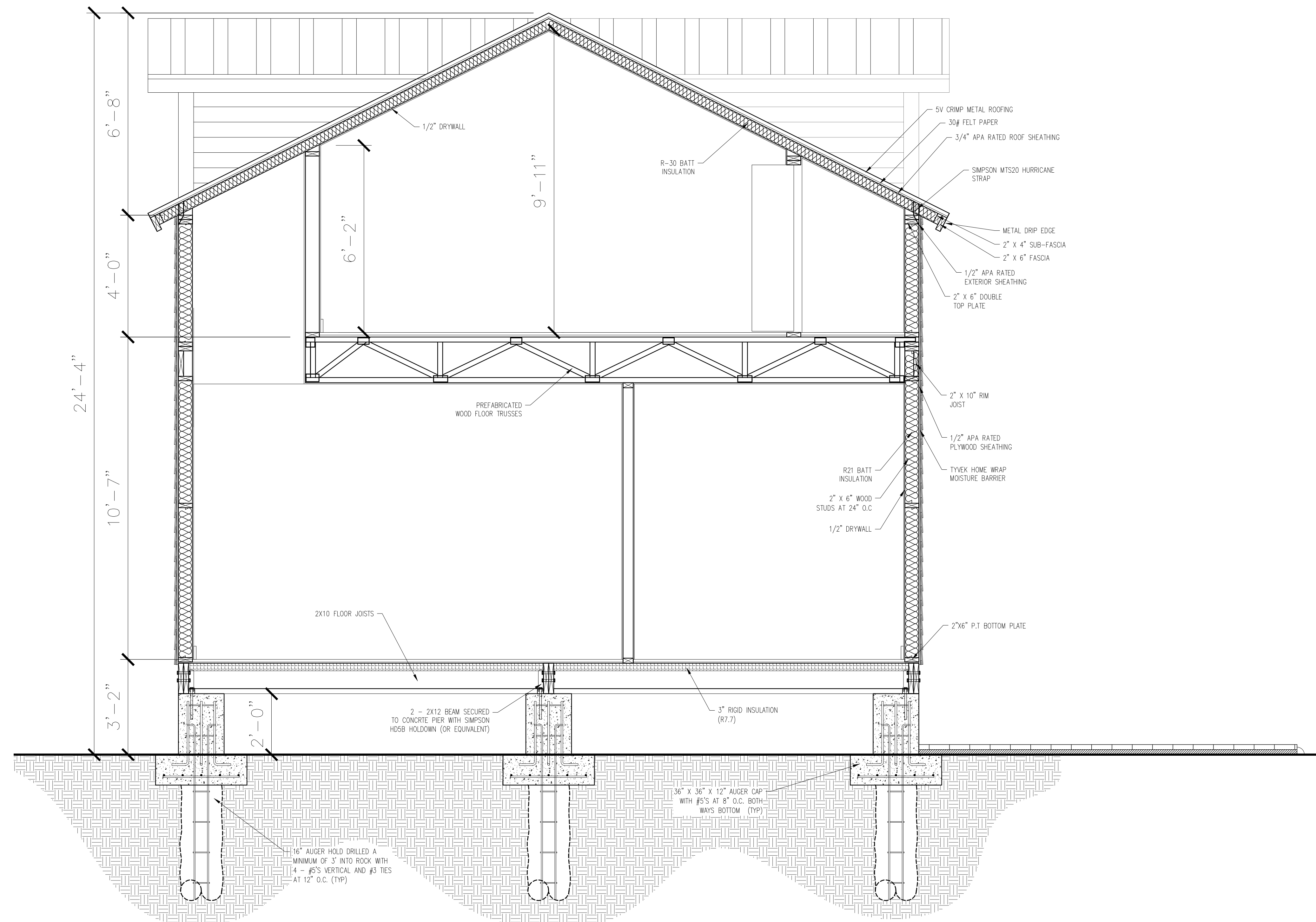
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COC 1513192

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KEY WEST, FL 33040

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FILE NAME:
SHEET NO. S2
OF 12 SHEETS

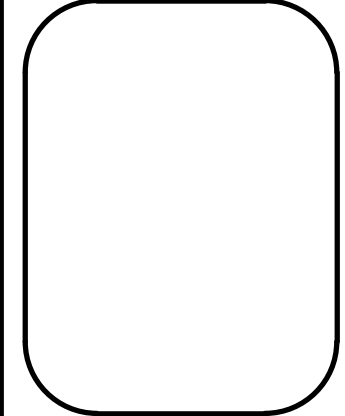
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TYPICAL SECTION
SCALE: 1/2" = 1'-0"

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KEY WEST, FL 33040

DATE: 3-20-24
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JOB: 2023-056
FILE NAME:

SHEET NO. **S3**
OF 12 SHEETS

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ELECTRICAL NOTES

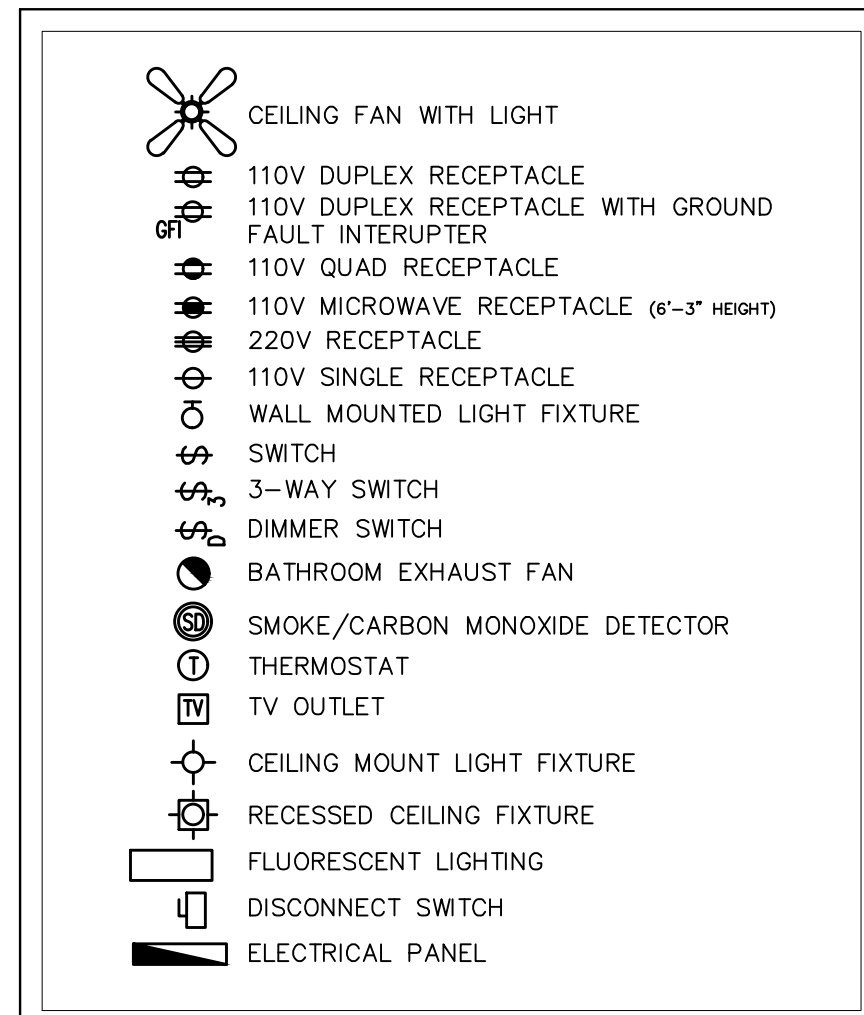
- ALL WORK TO BE DONE IN ACCORDANCE WITH THE NATIONAL ELECTRICAL CODE, LATEST EDITION AND ALL LOCAL CODES AND ORDINANCES AND FBC 2020.
- MINIMUM WIRE SIZE SHALL BE #12 AWG EXCLUDING CONTROL WIRING. ALL CONDUCTORS SHALL BE COPPER WITH THW INSULATION, UNLESS OTHERWISE NOTED. (U.O.N)
- ALL RACEWAYS UNDERGROUND AND/OR LARGER THAN 2" DIAMETER SHALL BE GALVANIZED RIGID CONDUIT. PVC ENCASED IN CONCRETE AS ALTERNATIVE.
- ALL RACEWAYS AND PIPES IN OR THROUGH CONCRETE SHALL BE SPACED A MINIMUM OF 3X THE DIAMETER OF THE LARGEST RACEWAY.
- OUTLET BOXES SHALL BE PRESSED STEEL IN DRY LOCATIONS CAST ALLOY WITH THREADED HUBS IN WET OR DAMP LOCATIONS.
- DISCONNECT SWITCHES SHALL BE HP RATED, HEAVY DUTY, QUICKMAKE, QUICKBREAK, ENCLOSURE AS REQUIRED.
- ELECTRIC SYSTEM SHALL BE COMPLETELY AND EFFECTIVELY GROUNDED.
- ALL MATERIALS SHALL BE NEW AND BEAR THE UNDERWRITERS LABORATORY SEAL.
- CONTRACTOR SHALL PERFORM HIS WORK IN FIRST CLASS WORKMANLIKE MANNER AND COMPLETE THE SYSTEM TO BE FULLY OPERATIVE, INSPECTED AND APPROVED.
 - GUARANTEE ALL MATERIALS AND WORKMANSHIP FREE FROM DEFECTS FOR 1 YEAR FROM THE DATE OF ACCEPTANCE
 - COORDINATE HIS WORK WITH OTHER TRADES
 - CORRECT ANY DEFECTS (WITHIN GUARANTEE PERIOD) WITHOUT ADDITIONAL CHARGE
 - PROVIDE ALL REQUIRED INSURANCE FOR, AND INCLUDE REPLACEMENT AND REPAIR OF, ANY OTHER PHASE OF THE WORK WHICH PROTECTION OF PUBLIC LIABILITY AND PROPERTY DAMAGE FOR THE DURATION OF HIS WORK
 - PAY FOR ALL PERMITS, FEES, INSPECTIONS AND TESTING
 - COORDINATE HIS WORK WITH THE LOCAL POWER AND TELEPHONE UTILITIES
 - FURNISH AND INSTALL DISCONNECT SWITCHES, WIRING AND CONNECTIONS TO A/C SYSTEM (CONTROLS PROVIDED BY A/C CONTRACTOR AND WIRE BY ELECTRICAL CONTRACTOR)
- CONTRACTOR SHALL VERIFY ALL EXISTING CONDITIONS.
- CATALOG CUTS OF EQUIPMENT SELECTED FOR INSTALLATION SHALL BE SUBMITTED TO THE ARCHITECT/ENGINEER.
- ANY DISCREPANCIES, CHANGES, SUBSTITUTIONS, ADDITIONS OR DELETIONS FROM THE DESIGN DEPICTED HEREIN SHALL BE REPORTED TO THE ARCHITECT/ENGINEER PRIOR TO INSTALLATION.
- VERIFY EXACT LOCATION OF AN OUTLET IN THE FIELD PRIOR TO INSTALLATION.
- ELECTRICAL CONTRACTOR SHALL VERIFY ALL EQUIPMENT NOT FURNISHED UNDER THIS SECTION BEFORE ROUGH-IN.
- ALL BEDROOM OUTLETS SHALL HAVE AFCIP PER NEC 210-12A.
- ALL SMOKE DETECTORS TO BE CONNECTED TO AFCIP CIRCUITS.
- ALL SMOKE DETECTORS TO BE INTERCONNECTED WITH BATTERY BACKUP

2017 NEC-210.12 ARC-FAULT CIRCUIT = INTERRUPTER PROTECTION.

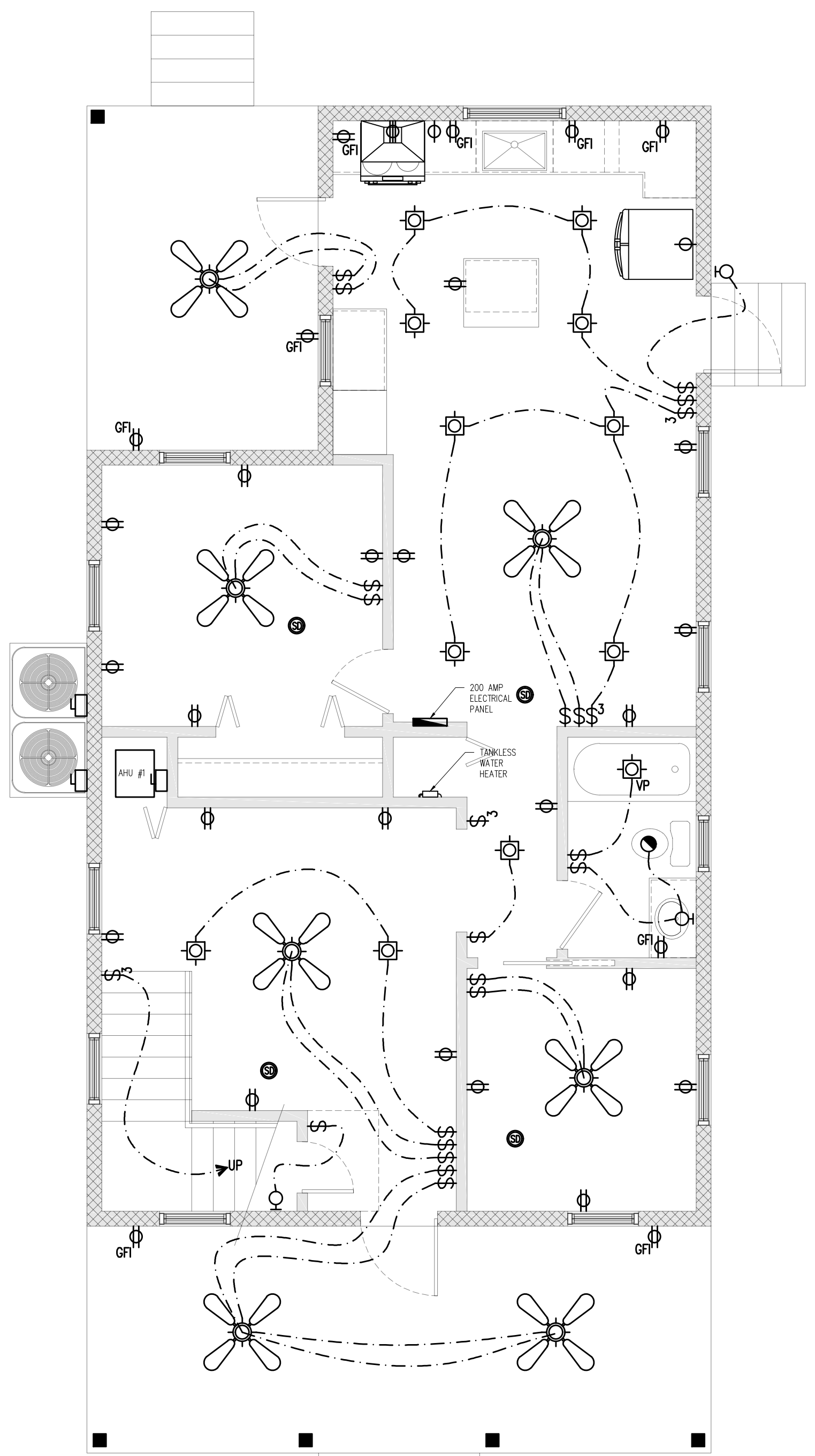
(A) DWELLING UNITS.
ALL 120-VOLT, SINGLE PHASE, 15- AND 20-AMPERE BRANCH CIRCUITS SUPPLYING OUTLETS OR DEVICES INSTALLED IN DWELLING UNIT KITCHENS, FAMILY ROOMS, DINING ROOMS, LIVING ROOMS, PARLORS, LIBRARIES, DEN'S, SUN ROOMS, RECREATION ROOMS, CLOSETS, HALLWAYS, LAUNDRY AREAS OR SIMILAR ROOMS OR AREAS SHALL BE PROTECTED BY A LISTED COMBINATION-TYPE ARC-FAULT CIRCUIT INTERRUPTER, INSTALLED TO PROVIDE PROTECTION OF THE ENTIRE BRANCH CIRCUIT.

A MINIMUM OF 75 PERCENT OF THE LAMPS IN PERMANENTLY INSTALLED LIGHTING FIXTURES SHALL BE HIGH-EFFICACY LAMPS AS PER SECTION 404.1 OF THE 2009 IECC

ALL RECEPTACLES TO COMPLY WITH NEC 2017 406.12
TAMPER-RESISTANT RECEPTACLES IN DWELLING UNITS IN ALL AREAS SPECIFIED IN 210.52, ALL 125V, 15 AMP RECEPTACLES SHALL BE LISTED TAMPER-RESISTANT RECEPTACLES

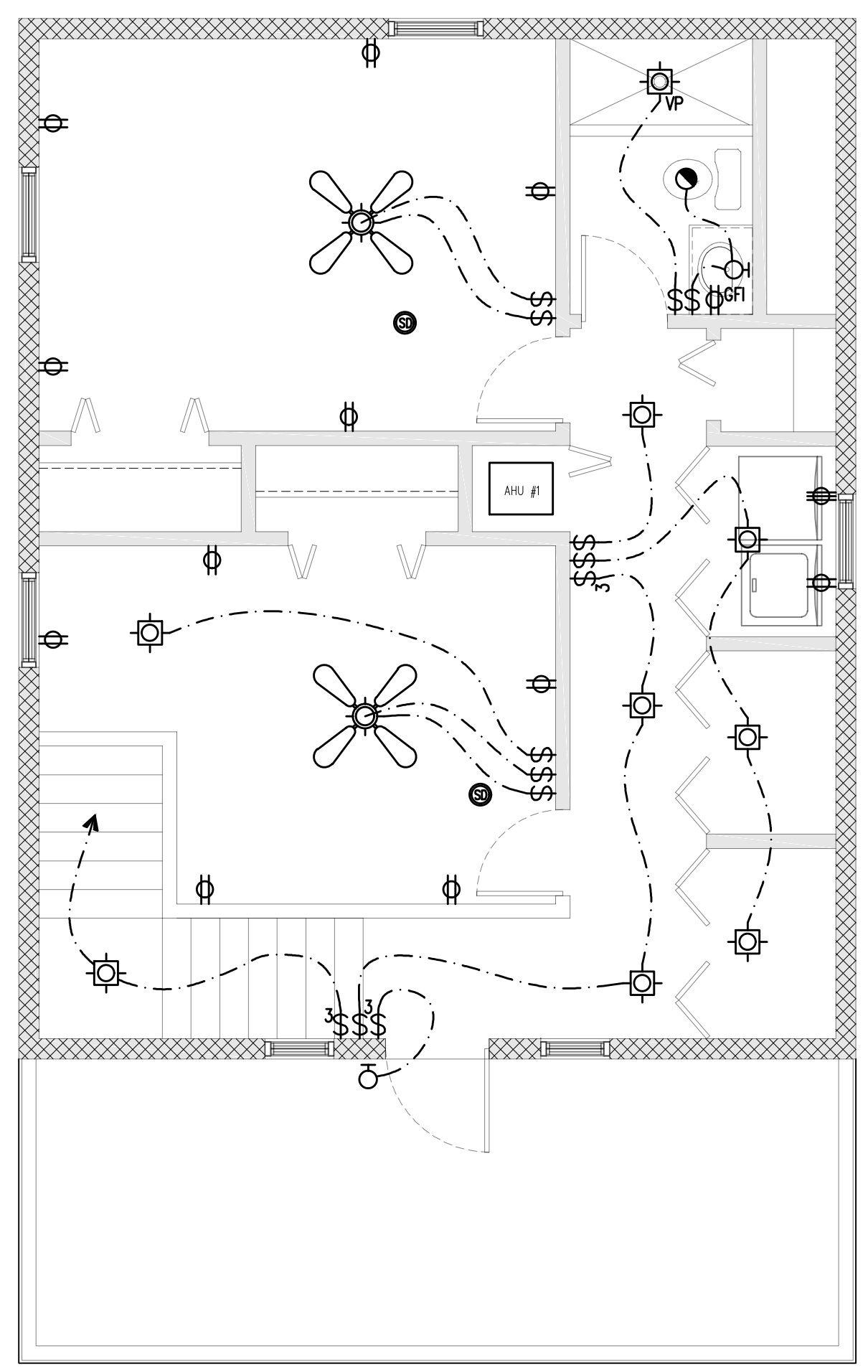


200 AMP PANEL	
ITEM	DEMAND
GENERAL LIGHTING (X3 WATT PER SQ. FT.)	4,692
SMALL APPLIANCE (2)	3,000
RANGE/OVEN	12,000
TANKLESS WATER HEATER (1)	11,800
MICROWAVE	1,200
REFRIGERATOR	1,500
GARBAGE DISPOSAL	800
LAUNDRY	1,500
DRYER	5,000
TOTAL HOUSE LOAD IN WATTS	41,492
FIRST 10 KW AT 100%	10,000
REMAINDER AT 40%	12,596
A/C AT 100% (1)	12,000
A/C AT 100% (2)	12,000
TOTAL DEMAND WATTAGE	46,596 W
TOTAL WATTS DIVIDED BY 240 VOLT = AMP	194.15 AMPS
200 AMP SERVICE IS SUFFICIENT	



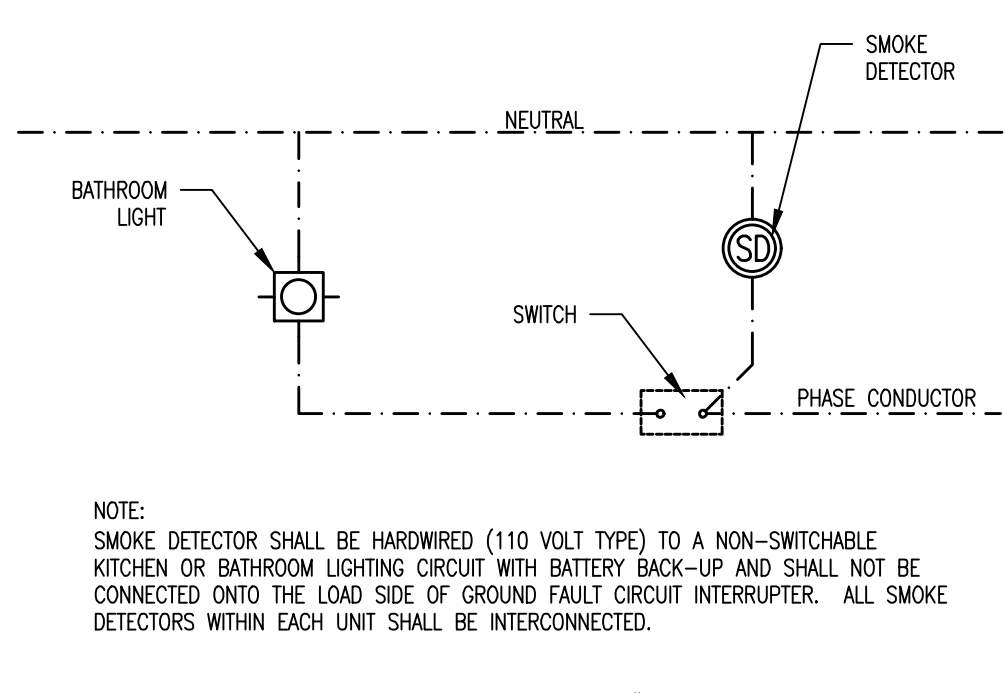
GROUND FLOOR ELECTRICAL
SCALE: 1/4" = 1'-0"

ELECTRICAL CONTRACTOR TO VERIFY ELECTRICAL PLANS PRIOR TO COMMENCING OF WORK. IF ANY DISCREPANCIES SHALL ARISE, NOTIFY ENGINEER IMMEDIATELY.

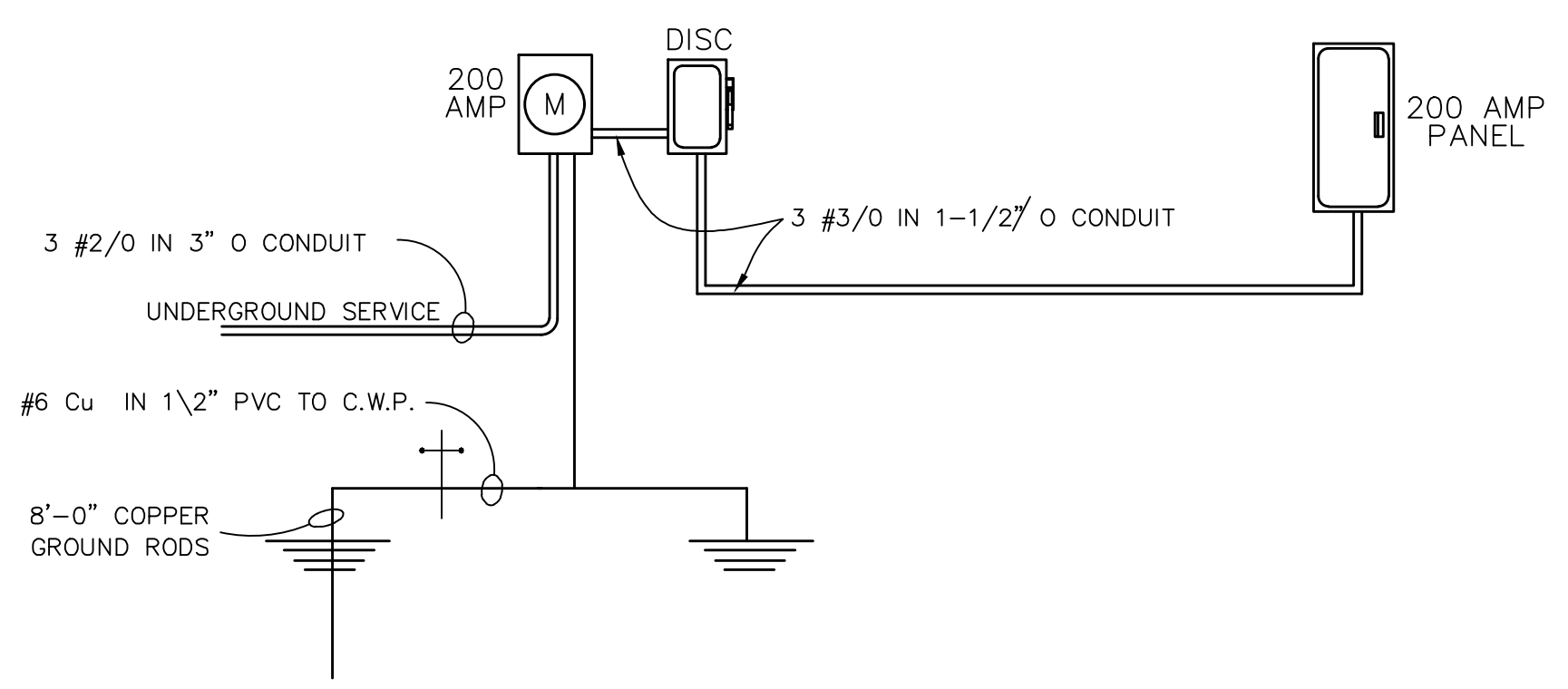


SECOND FLOOR ELECTRICAL
SCALE: 1/4" = 1'-0"

ELECTRICAL PANEL											
240 V. 1 PH. , 3W SURFACE MOUNT 200A MLO LOCATION: DINING ROOM											
SERVES	TRIP POLE	WIRE	CONDUIT	VA	CIRCUIT	CIRCUIT	VA	CONDUIT	WIRE	TRIP POLE	SERVES
A/C A.H.U. NO. 1	50/2	6	1-1/4"	8,000	1	2	8,000	1-1/4"	6	50/2	A/C A.H.U. NO. 2
A/C CONDENSING UNIT NO. 1	30/2	10	3/4"	4,000	5	6	4,000	3/4"	10	30/2	A/C CONDENSING UNIT NO. 2
TANKLESS WATER HEATER	60/2	6	3/4"	11,800	9	10	1,500	1/2"	12	20/1	SMOKE DETECTORS
GENERAL LIGHTS & RECEPTACLES	15/1	14	1/2"	1,500	11	12	1,500	1/2"	12	20/1	GENERAL LIGHTS & RECEPTACLES
GENERAL LIGHTS & RECEPTACLES	15/1	14	1/2"	1,500	15	16	1,500	1/2"	12	20/1	SMALL APPLIANCE
GENERAL LIGHTS & RECEPTACLES	15/1	14	1/2"	1,500	17	18	1,500	1/2"	14	15/1	MASTER BEDROOM LTS/RECEPT.
GENERAL LIGHTS & RECEPTACLES	15/1	14	1/2"	1,500	19	20	1,500	1/2"	14	15/1	GUEST BEDROOM LTS/RECEPT.
BATH / GFI	20/1	12	1/2"	1,500	21	22	1,500	1/2"	14	15/1	BATH / GFI
REFRIGERATOR	20/1	12	1/2"	1,500	23	24	5,000	3/4"	10	30/2	DRYER
KITCHEN LIGHTS	15/1	14	1/2"	1,500	25	26					SPARE
RANGE / OVEN	30/2	10	3/4"	12,000	27	28	1,500	3/4"	12	20/1	WASHER
SPARE					29	30					
					31	32					
					33	34					
					35	36					
					37	38					
					39	40					
					41	42					



SMOKE DETECTOR DETAIL
SCALE: N.T.S.



ELECTRICAL RISER DIAGRAM
SCALE: N.T.S.

REVISION	DATE

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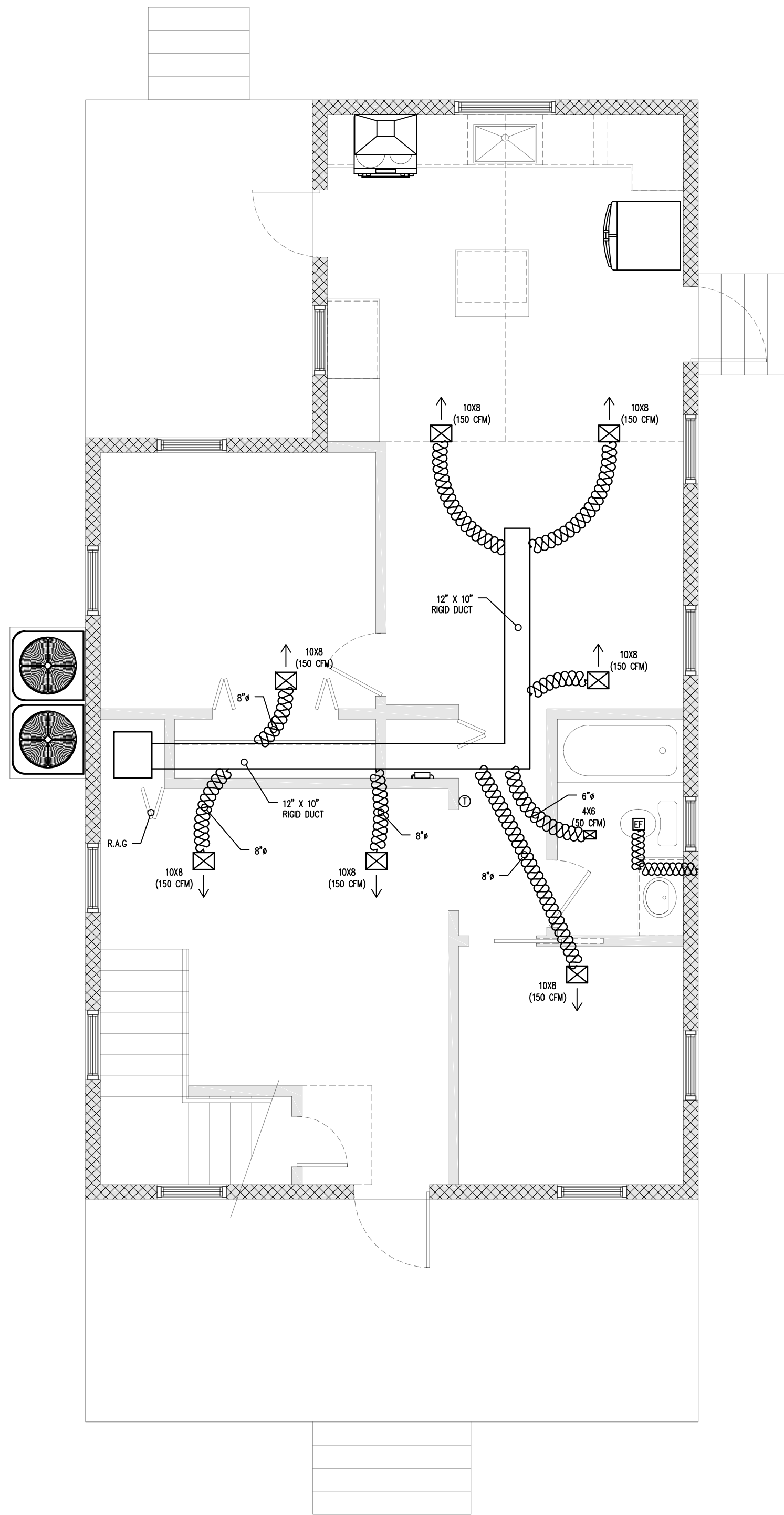
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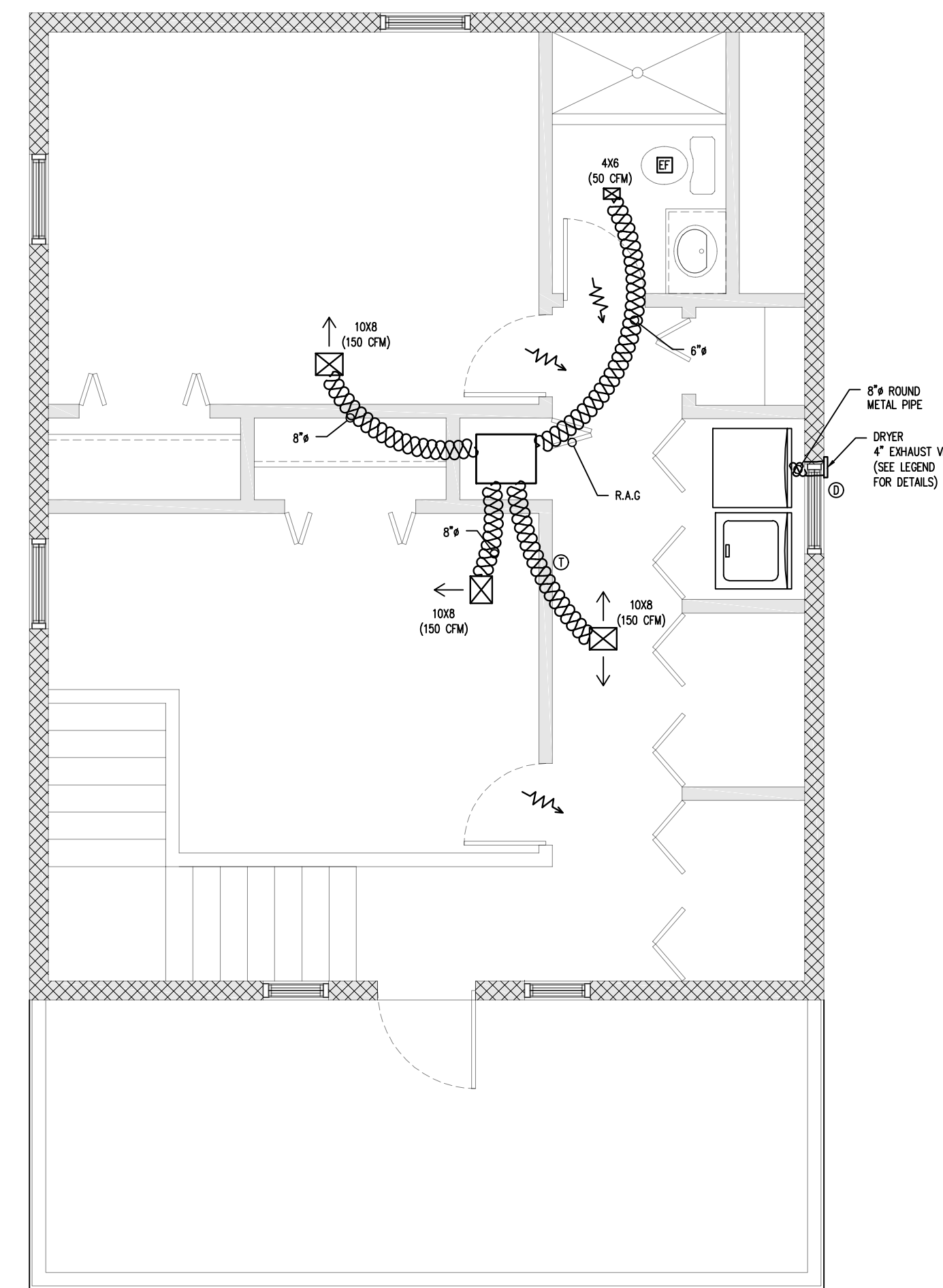
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FIRST FLOOR MECHANICAL
SCALE: 1/4" = 1'-0"



SECOND FLOOR MECHANICAL
SCALE: 1/4" = 1'-0"

MECHANICAL DUCT WORK SHOWN IS FOR DESIGN ILLUSTRATION PURPOSES. ACTUAL DUCT WORK, PLENUM, SUPPLY GRILLS, RETURN GRILLS AND GENERAL CONCEPT MAY VARY AND BE SIZED ACCORDINGLY AS PER HVAC CONTRACTOR. MECHANICAL CONTRACTOR TO REVIEW PLANS AND EQUIPMENT SCHEDULES TO VERIFY THAT THE HVAC SYSTEM SELECTION IS WHAT THE SPACE REQUIRES AND THAT ALL PROPOSED DUCTWORK AND GRILLS ARE SIZED CORRECTLY. HVAC SYSTEM SELECTION MAY BE SUBSTITUTED BY OTHER APPROVED EQUAL.

MECHANICAL NOTES

- 1.1 PROVIDE (FURNISH AND INSTALL) ALL NECESSARY MATERIALS AND LABOR FOR A COMPLETELY OPERATIONAL AIR CONDITIONING, HEATING AND VENTILATING SYSTEM AS SHOWN ON THE DRAWINGS AND HEREIN 2020 FLORIDA BUILDING MECHANICAL CODE, ASHRAE, SMACNA, NFPA, AND LOCAL ORDINANCES
- 1.2 SCOPE OF WORK:
PROVIDE THE FOLLOWING COMPLETE SYSTEMS:
A. SUPPLY AND RETURN DUCT SYSTEM
B. EXHAUST SYSTEM FOR BATHROOMS AND KITCHEN
C. AIR CONDITIONING UNITS WITH REFRIGERANT PIPING AND CONTROLS
- 1.3 PAY FOR ALL FEES, INSPECTIONS AND CONNECTION CHARGES REQUIRED
- 1.4 VERIFY AT JOB SITE ALL SPACE CONDITIONS, DIMENSIONS AND EQUIPMENT SIZES PRIOR TO DUCT FABRICATION OR INSTALLATION, COORDINATE REQUIREMENTS TO AVOID INTERFERENCE WITH OTHER TRADES.
- 1.5 SUBMIT SHOP DRAWINGS FOR ENGINEER APPROVAL BEFORE PROCEEDING WITH THE PURCHASE AND INSTALLATION OF EQUIPMENT AND MATERIALS.
- 1.6 GUARANTEE ALL WORK FREE OF DEFECTS IN MATERIALS AND WORKMANSHIP FOR A PERIOD OF ONE YEAR FROM DATE OF ACCEPTANCE.
- 2.0 MATERIALS
 - 2.1 DUCTWORK
 - 2.1.1 GENERAL
ALL DUCT SIZES SHOWN ARE CLEAR INSIDE DIMENSIONS
 - 2.1.2 MATERIAL
FIVE POUNDS DENSITY 1 GLASSFIBER DESIGNED, CONSTRUCTED AND INSTALLED IN ACCORDANCE WITH SMACNA'S LOW PRESSURE DUCT MANUAL. ALL DUCT JOINTS SHALL BE SEALED AND TAPED.
 - 2.1.3 PROVIDE DOUBLE THICKNESS TURNING VANES AT ALL SQUARE ELBOWS. WHERE THE ELBOWS ARE RECTANGULAR INSTALL SINGLE THICKNESS INSTEAD.
 - 2.1.4 PROVIDE VOLUME EXTRACTORS BEHIND EACH SUPPLY OUTLET AND AT EACH DUCT BRANCH.
 - 2.2 REFRIGERANT PIPING WILL BE SEAMLESS COPPER TYPE "L" AND HARD OR SOFT DRAWN ON ACR COPPER TUBING WITH WROUGHT COPPER SOLDER JOINT FITTING. SOLDER SHALL BE $\frac{3}{32}$ APPLIED WITH SUITABLE FLUX.
 - 2.3 REFRIGERANT SUCTION PIPING SHALL BE INSULATED 3/4" THICK FOAMED PLASTIC INSULATION. FIRE RETARDANT TYPE INSULATION SHALL BE INSTALLED IN PIPING BEFORE ASSEMBLY. NO SPLIT INSULATION WILL BE ACCEPTABLE. SEAL JOINTS WITH MANUFACTURER'S APPROVED ADHESIVE AND GREY TAPE.
 - 2.4 PROVIDE AIR CONDITIONING UNITS WITH MATCHING LOW VOLTAGE HEAT-COOL THERMOSTATS WITH ON/OFF AUTO SUB-BASE SWITCH, FURNISHED BY THE EQUIPMENT MANUFACTURER.
 - 2.5 ALL AIR CONDITIONING COMPRESSORS SHALL BE WARRANTED FOR A MINIMUM OF FIVE YEARS AFTER DATE OF ACCEPTANCE OF THE PROJECT.
 - 2.6 AIR DISTRIBUTION PRODUCTS:
 - 2.6.1 PROVIDE SUPPLY AND RETURN GRILLES AND DIFFUSERS AS INDICATED ON THE DRAWINGS.
 - 2.6.2 PROVIDE EXTRUDED ALL ALUMINUM AIR DISTRIBUTION PRODUCTS.
 - 2.6.3 PROVIDE FINISHES AND TYPES OF MOUNT IN COORDINATION WITH THE CEILING TYPES AS SHOWN ON ARCHITECTURAL DRAWINGS.
 - 2.6.4 PROVIDE OPPOSED BLADE, KEY OPERATED DAMPERS BEHIND ALL AIR SUPPLY OUTLETS
 - 2.6.5 CLOTHES DRYER EXHAUST DUCTWORK SHALL BE MIN. 26 GAUGE SHEET METAL WITH SMOOTH INTERIOR SURFACES AND JOINTS RUNNING IN DIRECTION OF AIRFLOW. DO NOT USE SCREWS OR OTHER INTRUSIVE FASTENERS. MAKE SMOOTH JOINTS. DUCTWORK SHALL COMPLY WITH MANUFACTURER'S RECOMMENDATIONS.
- 3.0 INSTALLATION
 - 3.1 INSTALL ALL EQUIPMENT IN ACCORDANCE TO THE MANUFACTURER'S MANUAL AND RECOMMENDATIONS, PAYING SPECIAL ATTENTION TO REQUIRED CLEARANCES FOR INSTALLATION, OPERATION AND SERVICE.
 - 3.2 BALANCE ALL SYSTEMS TO PROVIDE AIR QUANTITIES AND CAPACITIES INDICATED ON DRAWINGS. SUBMIT FINAL TEST AND BALANCE REPORT TO ENGINEER FOR ACCEPTANCE.

HVAC LEGEND

(H) RANGE HOOD WITH 4" EXHAUST DUCT UP TO 6" ABOVE FINISH ROOF LINE

(D) 4" DRYER EXHAUST THRU WALL W/VENT CAP (MIN. 26 GA. SHEET METAL W/SMOOTH INTERIOR SURFACES AND JOINTS RUNNING IN DIRECTION OF AIRFLOW. DO NOT USE SCREWS OR OTHER INTRUSIVE FASTENERS. MAKE SMOOTH JOINTS. DUCTWORK SHALL COMPLY WITH DRYER MANUFACTURER'S RECOMMENDATIONS.)

EF 50 CFM EXHAUST FAN W/4" TOILET EXHAUST DUCT UP TO 6" ABOVE FINISH ROOF LINE.

(T) THERMOSTAT

R.A.G RETURN AIR GRILL IN DOOR
WOOD LOUVERS SHALL HAVE A 25% OPEN AREA; METAL LOUVERS WILL HAVE A 75% OPEN AREA. LOUVERS SHALL BE KEPT IN THE OPEN POSITION

↔↔↔ RETURN AIR GRILL INSTALLED OVER DOOR HEADER

VENTILATION

CONTINUOUS WHOLE-HOUSE VENTILATION REQUIRED: 82 CFM

ACCORDING TO ASHRAE 62.2 SECTION 4.1.1
 $Q_{tot} = 0.03A_{tot} + 7.5(N_z + 1)$
 $81.93 = 0.03(1,981) + 7.5(2 + 1)$

LOCAL VENTILATION REQUIRED:
 BATHROOMS: 50 CFM DEMAND-CONTROLLED EXHAUST
 KITCHEN: 100 CFM DEMAND-CONTROLLED EXHAUST

REVISION	DATE

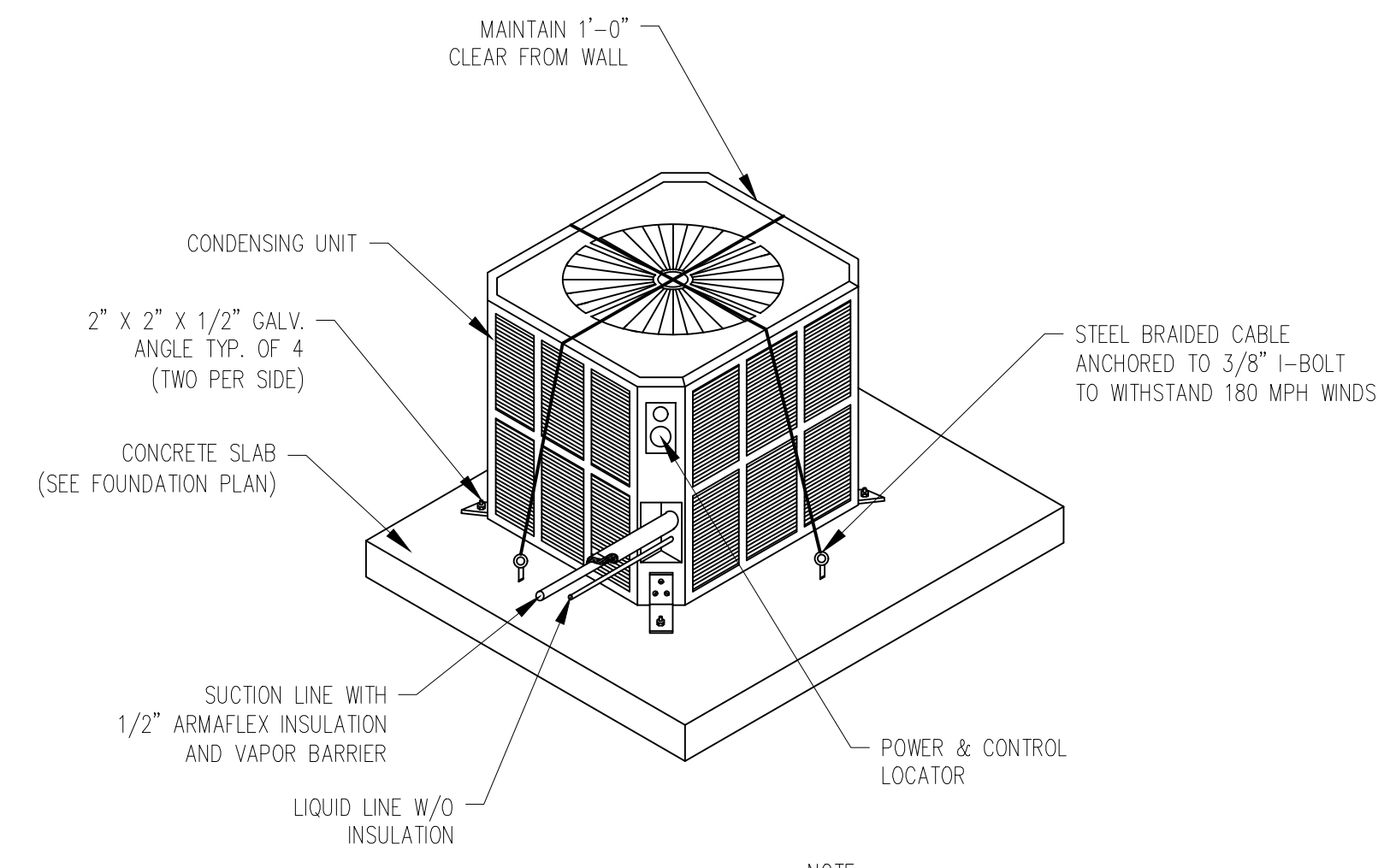
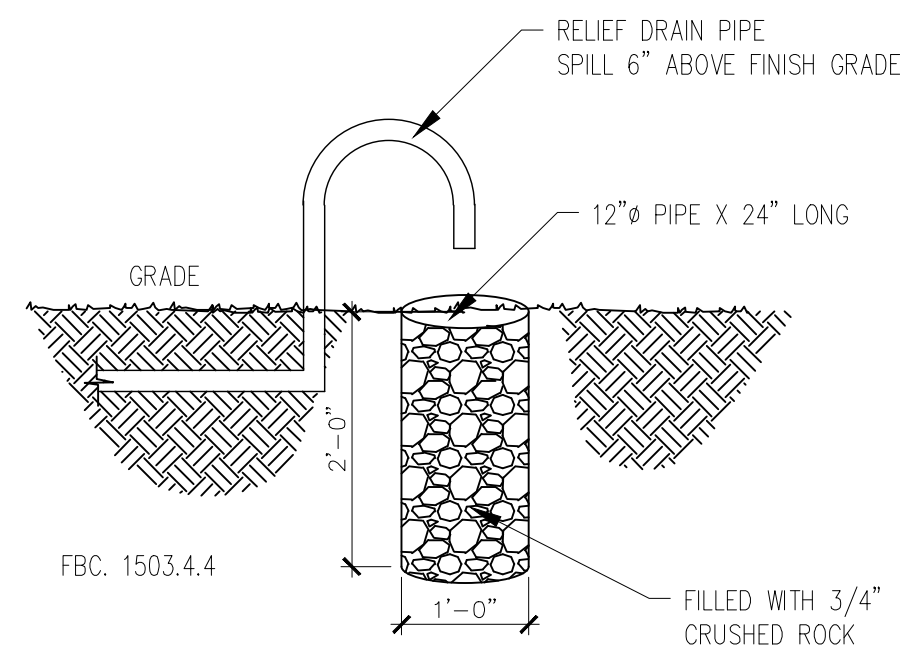
(305)525-0611
K.E.S. CONSULTING, INC.
 CONSULTING ENGINEERS
 102025 OVERSEAS HWY. UNIT #1 KEY LARGO, FLORIDA 33037

RUMAC
 Construction Group, Inc.
 2711 SW 137 AVE. SUITE 91
 P. 305.266.8885 F. 305.266.8828
 CCC-1513192

A NEW SFR FOR: RE#: 00036980-000000
 CASA DE WILLIAM, LLC
 1315 WILLIAM STREET
 KEY WEST, FL 33040

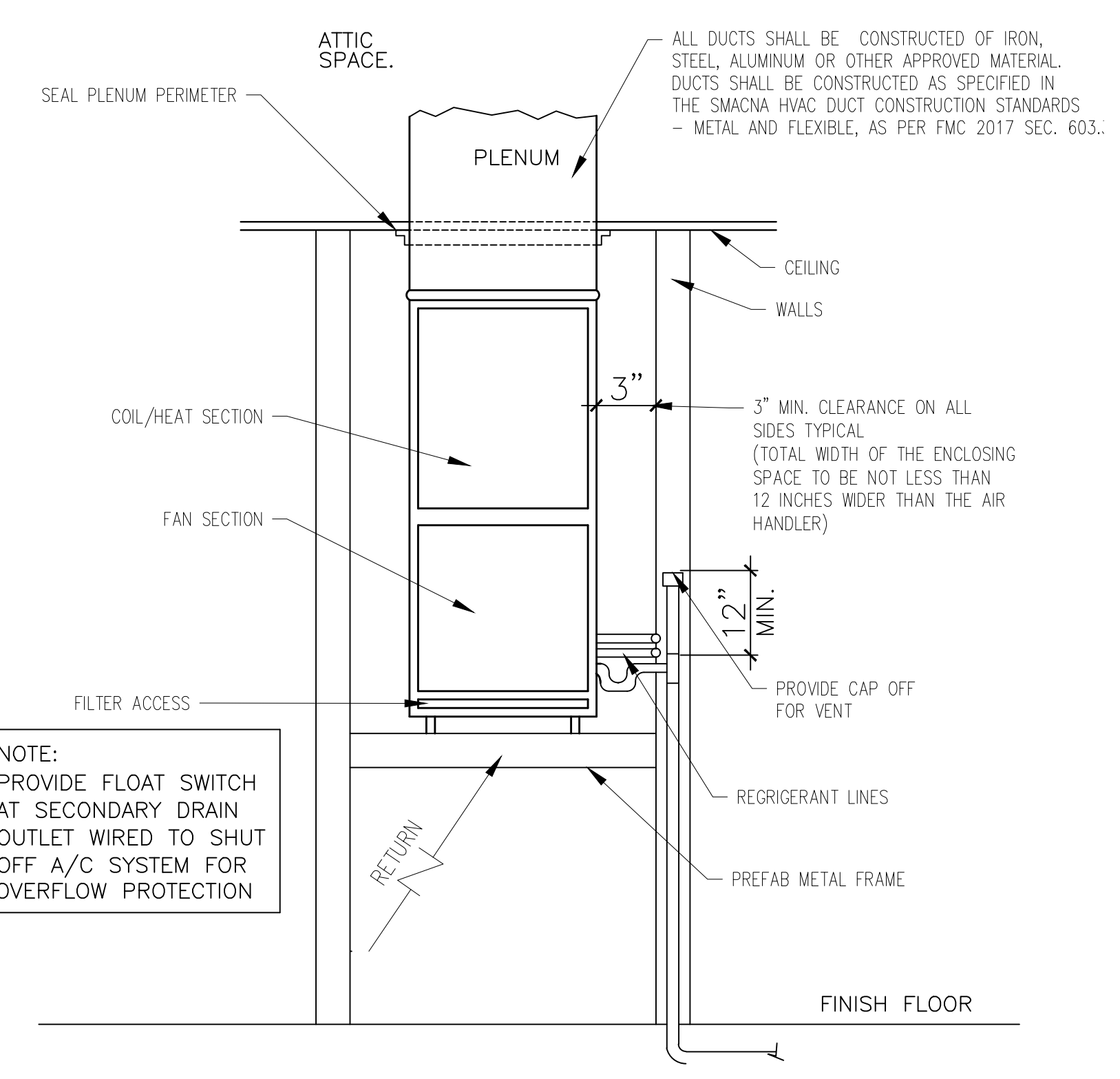
DATE:	3-20-24
SCALE:	SHOWN
DRAWN:	JTB
JOB:	2023-056
FILE NAME:	
SHEET No.:	M1
OF 12 SHEETS	

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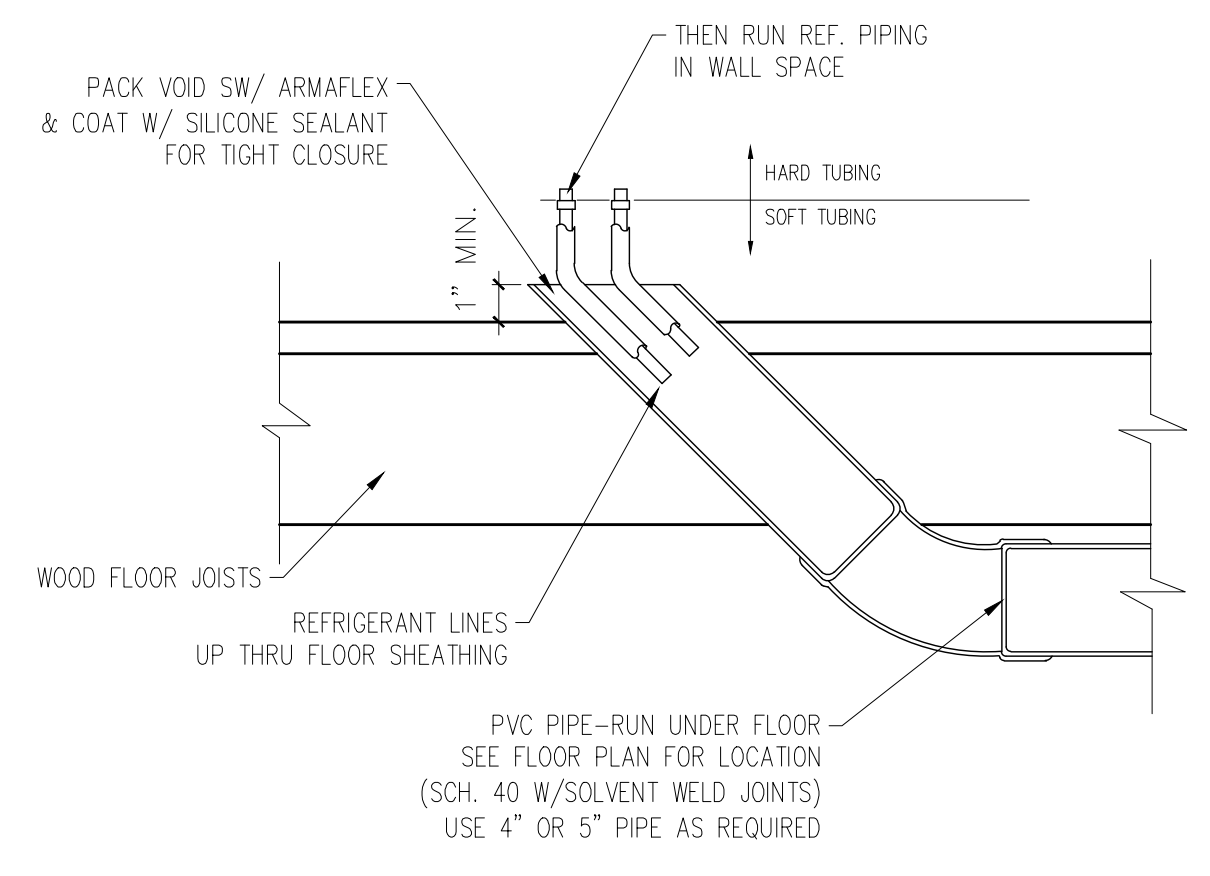


NOTE:
SEAL ENTRANCE OF REFRIGERANT LINES INTO PVC PIPE WITH IMPERMEABLE RESILIENT MATERIAL (SEE DETAIL)
COMPRESSOR MUST BE MOUNTED ABOVE FLOOD LEVEL

CONDENSING UNIT DETAIL
SCALE: N.T.S

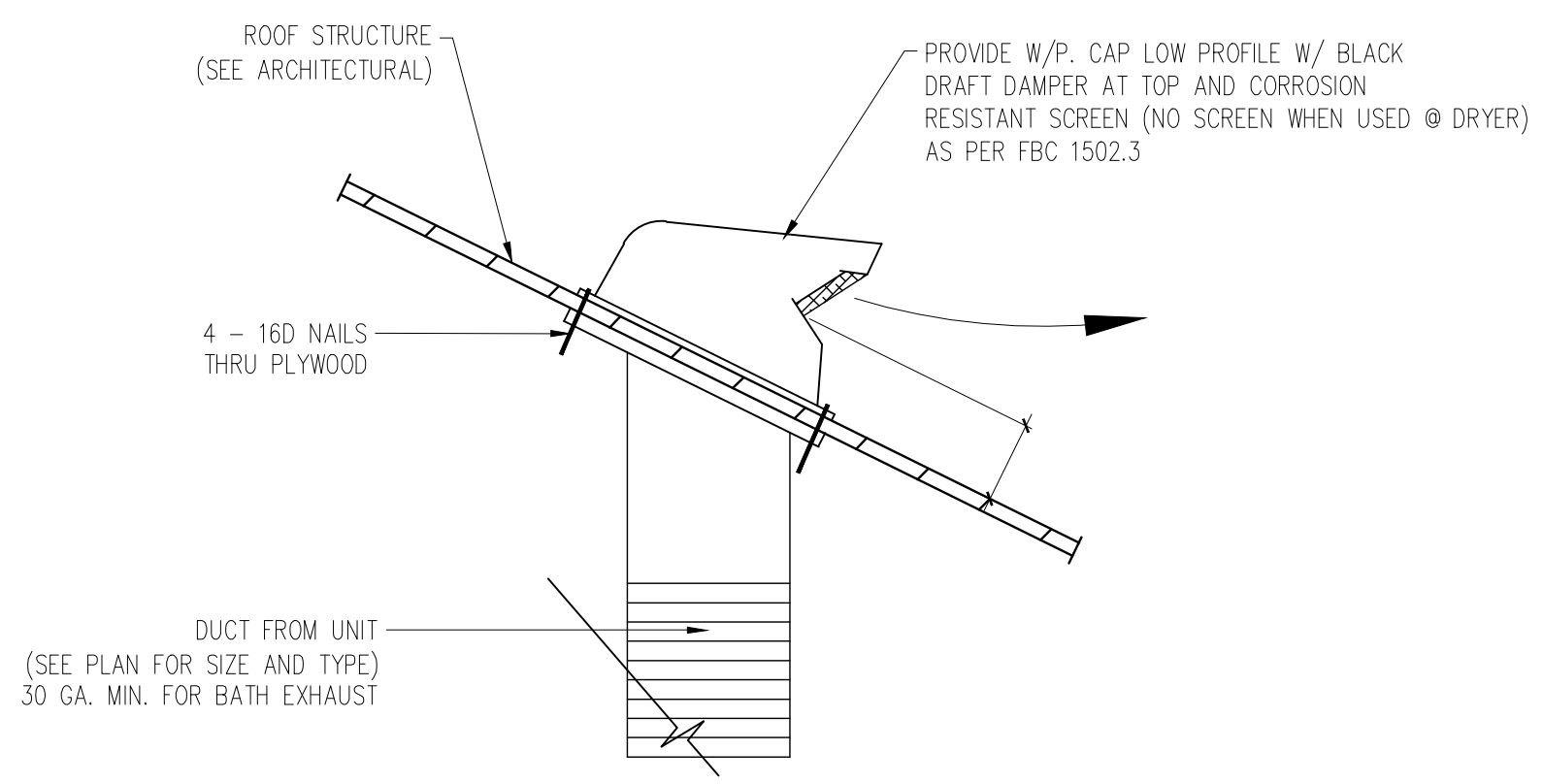


A/C CLOSET INSTALLATION
SCALE: N.T.S

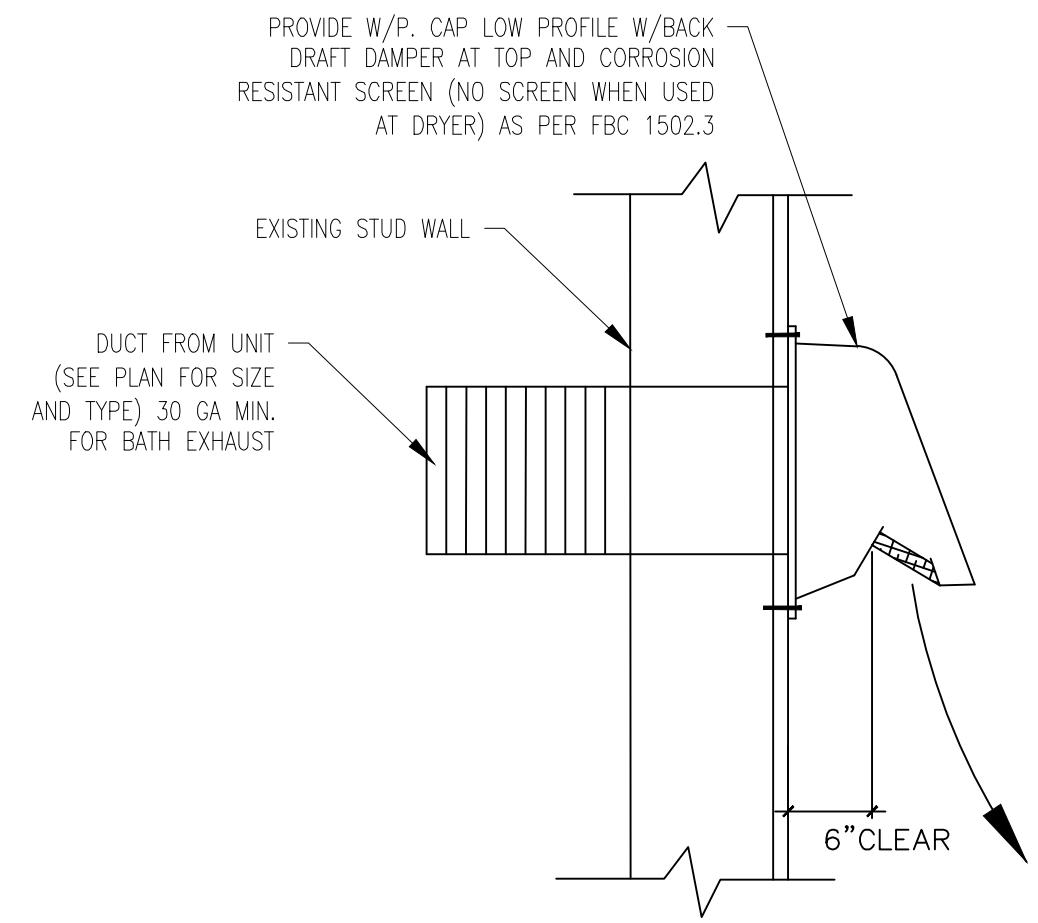


NOTES:
1. CONCEALED OR NOW REMOVABLE JOINTS SHALL NOT BE INSTALLED BELOW SLAB
2. PVC, SCH. 40 SLEEVE SHALL BE 2\"/>

REFRIGERANT PIPING LINE DETAIL
SCALE: N.T.S



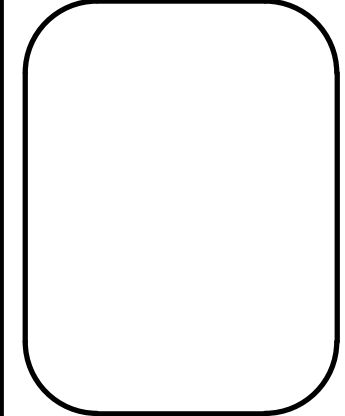
ROOF VENT CAP DETAIL
SCALE: N.T.S



TYPICAL WALL CAP DETAIL AT DRYER AND EXHAUST
N.T.S.

REVISION	DATE

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SHEET No.
M2
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PLUMBING NOTES

1.1 PROVIDE (FURNISH AND INSTALL) ALL NECESSARY MATERIALS AND LABOR FOR A COMPLETELY OPERATIONAL PLUMBING SYSTEM AS SHOWN ON THE DRAWINGS AND HEREIN SPECIFIED. INSTALL IN ACCORDANCE WITH THE FLORIDA BUILDING PLUMBING CODE 2020 AND LOCAL ORDINANCES.

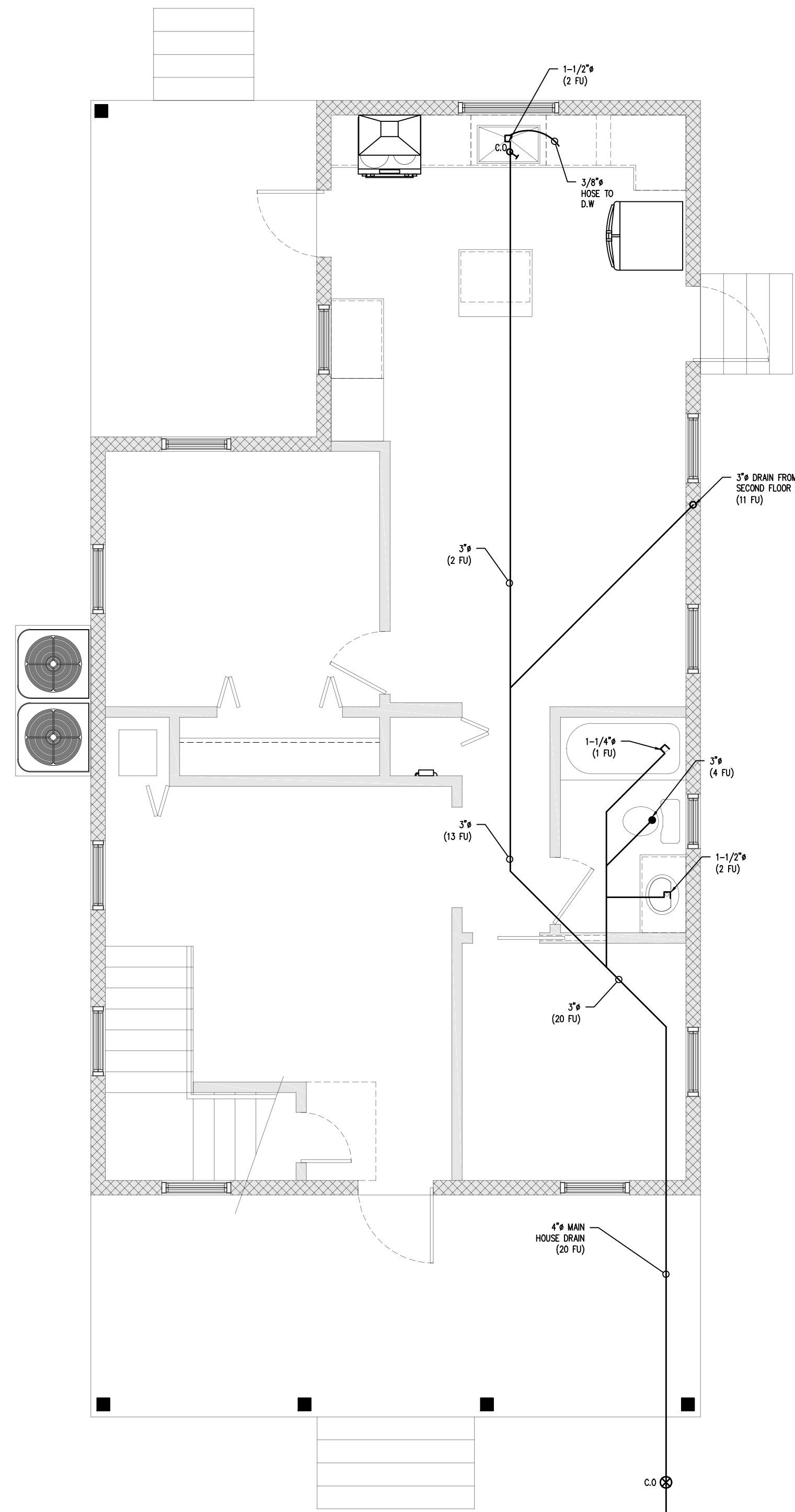
1.2 SCOPE OF WORK:
 PROVIDE THE FOLLOWING COMPLETE SYSTEMS:
 A. SANITARY COLLECTION.
 B. DOMESTIC HOT AND COLD WATER.
 C. AIR CONDITIONING CONDENSATE.
 1.3 PAY FOR ALL FEES, INSPECTIONS AND CONNECTION CHARGES REQUIRED.
 1.4 VERIFY AT JOB SITE ALL SPACE CONDITIONS, DIMENSIONS WITH PIPE, FIXTURES, AND EQUIPMENT SIZES PRIOR TO FABRICATION OR INSTALLATION. COORDINATE REQUIREMENTS TO AVOID INTERFERENCE WITH OTHER TRADES.
 1.5 SUBMIT SHOP DRAWINGS FOR ENGINEER APPROVAL BEFORE PROCEEDING WITH THE PURCHASE OR INSTALLATION OF EQUIPMENT AND MATERIALS.

2.0 MATERIALS
 2.1 PROVIDE SHUT-OFF VALVES FOR EACH FIXTURE AND AIR CHAMBERS WHERE SHOWN AND WHERE REQUIRED FOR PROPER PERFORMANCE OF THE SYSTEM.
 2.2 PROVIDE DIELECTRIC FITTINGS TO CONNECT PIPING TO EQUIPMENT OF DISSIMILAR METALS. USE CLAMPS AND FASTENERS OF SIMILAR METALS OR ISOLATE THEM FROM PIPING AND SLABS TO PREVENT CORROSION.
 2.3 PIPING
 2.3.1 DOMESTIC HOT AND COLD WATER: COPPER TUBING TYPE "K" OR "L" WITH SOLDER JOINTS. WOG BRONZE VALVES 125 P.S.I. MIN. PROVIDE PRE-MOLDED FIBERGLASS INSULATION FOR HOT WATER LINES.
 2.3.2 SANITARY WASTE AND VENT: CAST IRON PIPING UNDER SLABS, CAST IRON NO-HUB OR COPPER D.W.V. ABOVE P.V.C. DRAIN PIPE AND FITTINGS MAY BE USED WHEN ALLOWED BY LOCAL JURISDICTION.
 2.3.3 A/C CONDENSATE: PVC SCHEDULE 40 PIPE AND FITTINGS.

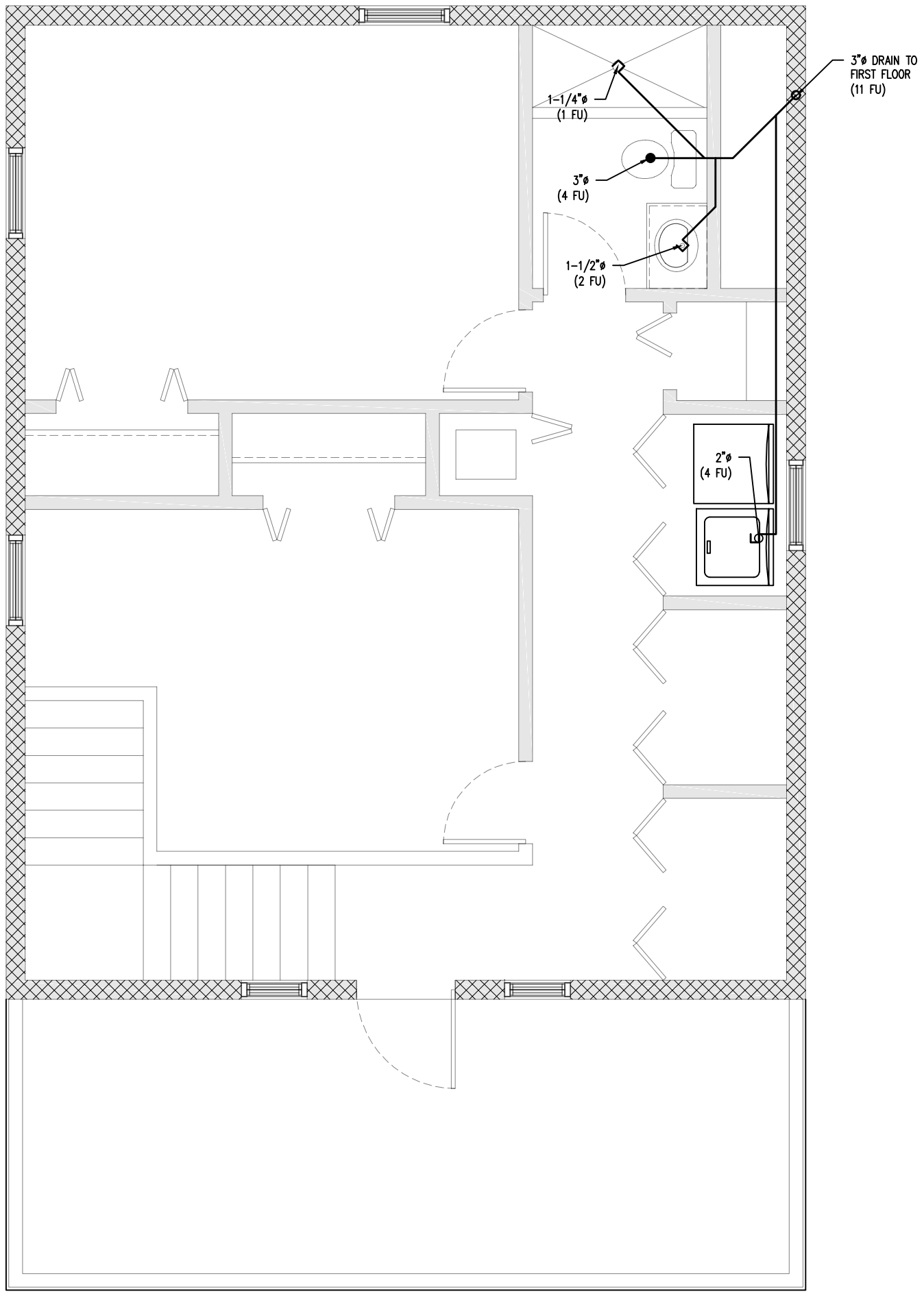
- NOTES:**
- ALL SHOWER/TUB VALVES SHALL BE ANTI-SCALD WITH PRESSURE BALANCE TYPE.
 - ALL FIXTURES SHALL COMPLY WITH THE FLORIDA BUILDING CODE WATER CONSERVATION STANDARDS.
 - PROVIDE WATER HAMMER ARRESTOR FOR ALL FIXTURES W/ AUTOMATIC VALVE AND PROVIDE AIR CHAMBER IN E.A WATER RISER OR WATER LINE FIXTURES.
 - BIDET AND SHOWER REQUIRE 2" WASTE UNDER GROUND.
 - BATHROOM GROUP FIXTURES AS DEFINED IN SECTION 202 FBC (5 FIXTURE UNITS).
 - WASHING MACHINE AND DISHWASHER SHALL BE "ENERGY STAR/WATER SENSE CERTIFIED".

NOTE:
 ALL PIPES OF 2 INCHES OR LESS SHALL BE SLOPED AT 1/4" PER FOOT.
 ALL PIPES OF 3 INCHES OR LESS SHALL BE SLOPED AT 1/8" PER FOOT.

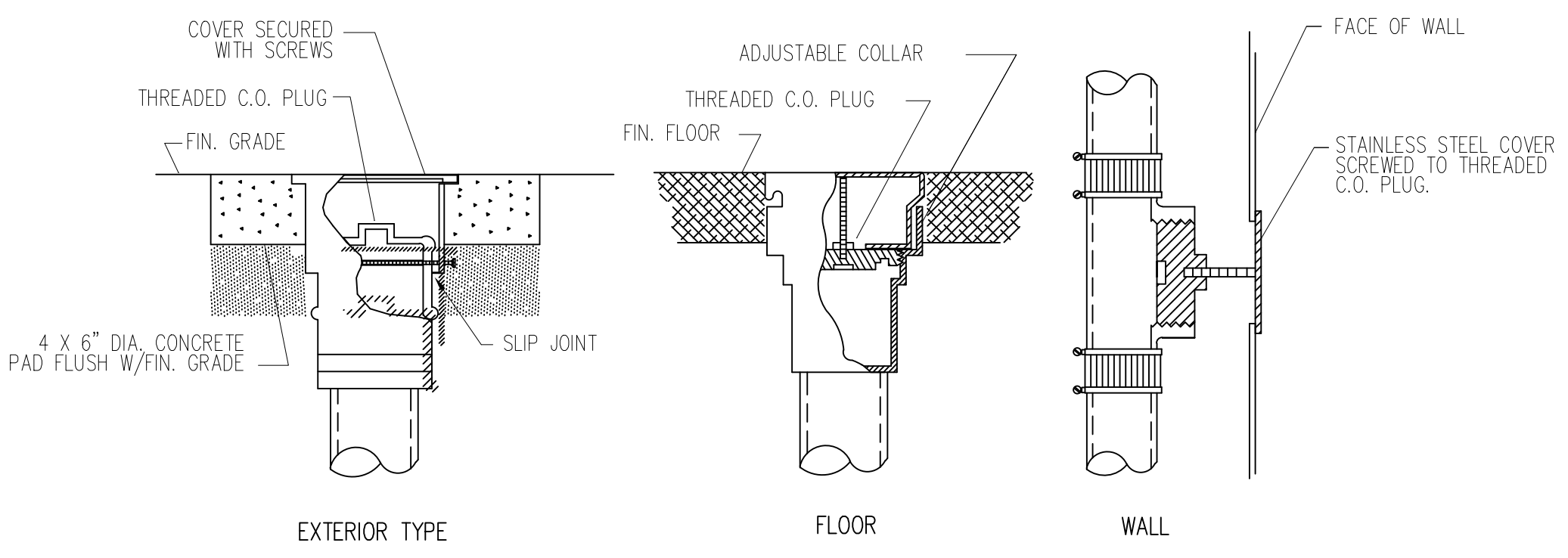
NO.	DESCRIPTION	VENT	DRAIN	WATER		FIXTURE UNIT	COMMENTS
				COLD	HOT		
WC	WATER CLOSET	3"	3"	1/2"	--	4 FU	FLUSH TANK, 1.28 GPF (MIN. M&P RATING OF 600G)
LAV	LAVATORY (COUNTER TYPE)	1-1/4"	1-1/4"	1/2"	1/2"	1 FU	PROVIDE 1.0 GPM FAUCET
TUB	TUB (SEE NOTE 1 & 4)	1-1/2"	1-1/2"	1/2"	1/2"	2 FU	PROVIDE 2.0 GPM SHOWERHEAD
SHWR	SHOWER (SEE NOTE 1)	2"	2"	1/2"	1/2"	2 FU	PROVIDE 2.0 GPM SHOWERHEAD
SINK	KITCHEN SINK	1-1/2"	1-1/2"	1/2"	1/2"	2 FU	PROVIDE 2.5 GPM FAUCET
W	CLOTHES WASHER	2"	2"	1/2"	1/2"	4 FU	
REF	REFRIGERATOR	--	--	1/2"	--	--	
DW	DISHWASHER	1-1/2"	1-1/2"	--	1/2"	--	
HB	HOSE BIBB	--	--	1/2"	--	--	SHUT-OFF VALVE WITH VACUUM BREAKER
BS	BAR SINK	1-1/2"	1-1/2"	1/2"	1/2"	1 FU	PROVIDE 1.0 GPM FAUCET
LT	LAUNDRY TRAY	1-1/2"	1-1/2"	1/2"	1/2"	2 FU	PROVIDE 2.5 GPM FAUCET
BID	BIDET	1-1/2"	1-1/2"	1/2"	1/2"	2 FU	PROVIDE 1.28 GPM FAUCET



FIRST FLOOR SANITARY
 SCALE: 1/4" = 1'-0"



SECOND FLOOR SANITARY
 SCALE: 1/4" = 1'-0"



TYPICAL CLEANOUT DETAIL
 SCALE: N.T.S

PLUMBING CONTRACTOR TO VERIFY PLUMBING PLANS PRIOR TO COMMENCING OF WORK. IF ANY DISCREPANCIES SHALL ARISE, NOTIFY ENGINEER IMMEDIATELY.

REVISION	DATE

(305)525-0611
K.E.S CONSULTING, INC.
 CONSULTING ENGINEERS
 102025 OVERSEAS HWY. UNIT #1
 KEY LARGO, FLORIDA 33037

GENERAL CONTRACTOR
RUMAC
 Construction Group, Inc.
 2711 SW 137 AVE. SUITE 91
 MIAMI, FL 33157
 P. 305.266.8885 F. 305.266.8828
 CCC-1513192

A NEW SFR FOR: RE#: 00036980-000000
 CASA DE WILLIAM, LLC
 1315 WILLIAM STREET
 KEY WEST, FL 33040

DATE: 3-20-24
 SCALE: SHOWN
 DRAWN: JTB
 JOB: 2023-056
 FILE NAME:
 SHEET NO: **P1**
 OF 12 SHEETS

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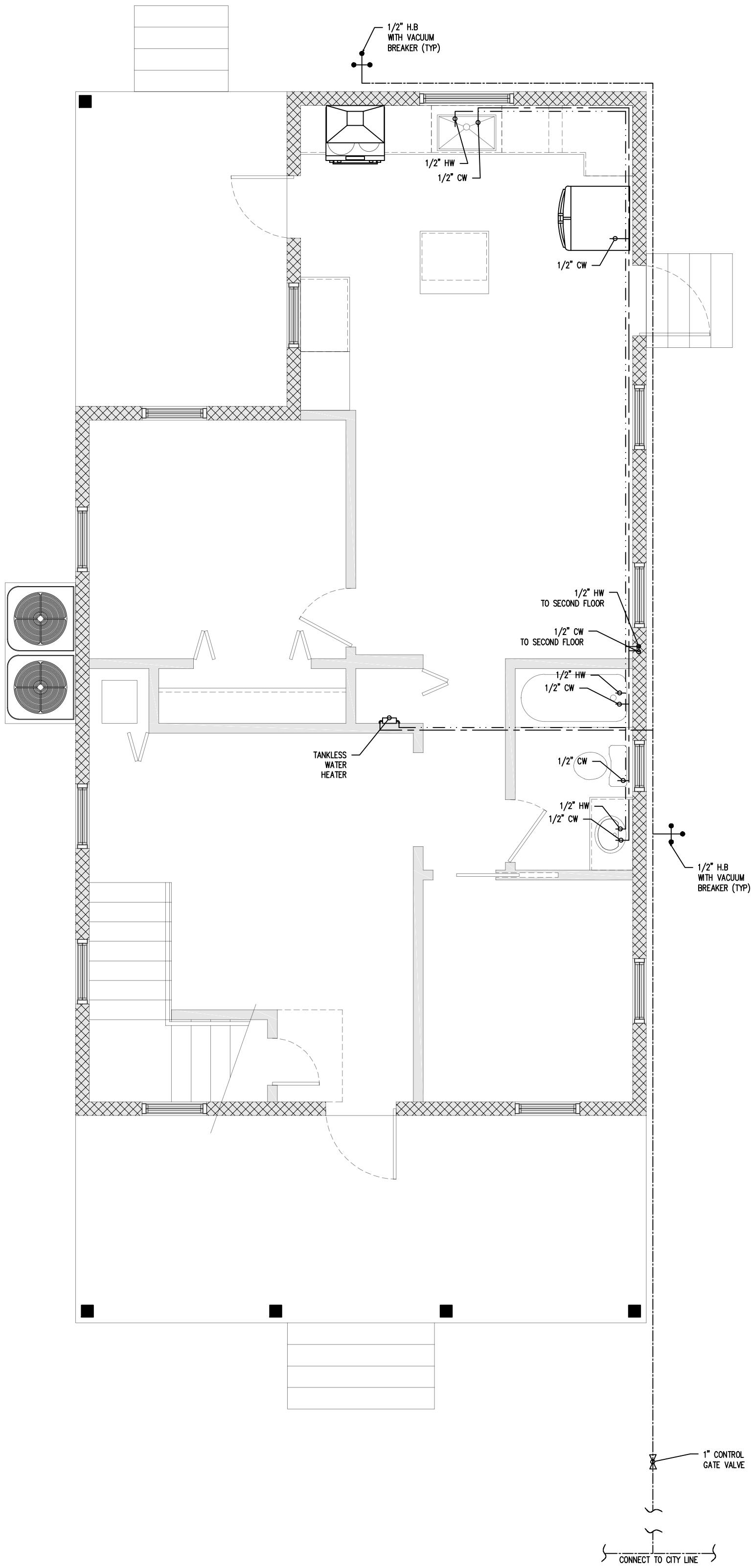
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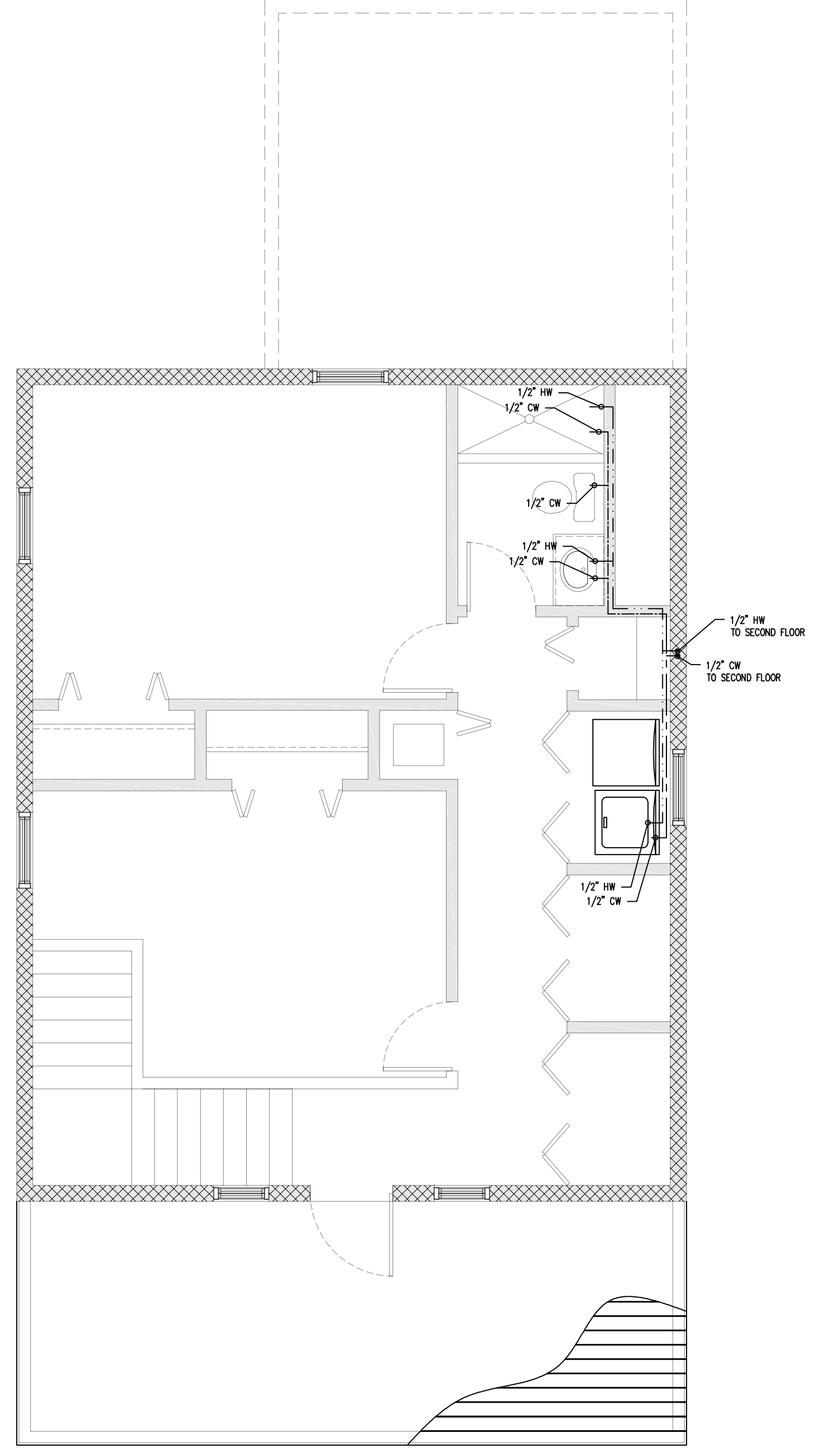
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TITAN N-120 (OR APPROVED EQUAL)
 TANKLESS WATER HEATER
DETAILS:
 THERMOSTATICALLY CONTROLLED TEMPERATURE ON FRONT COVER
 60% ENERGY SAVINGS VS. CONVENTIONAL ELECTRIC WATER HEATERS
 99.5% EFFICIENT
 STEEL OUTER / COPPER-BRASS INNER CASING
 MIAMI DADE PRODUCT APPROVED: 97-0627.16
 ANSI-Z 10.03 CERTIFIED
TECH SPECS
 PIPE FITTINGS: 1/2"
 11.8KW AT 220V
 54 AMPS - 1 DOUBLE POLE 60 AMP BREAKER REQUIRED WITH #6 WIRE
 DIMENSIONS: 7" W X 10" H X 2-3/4" D
 WEIGHT: 8.0 LBS

NO.	DESCRIPTION	VENT	DRAIN	WATER		FIXTURE UNIT	COMMENTS
				COLD	HOT		
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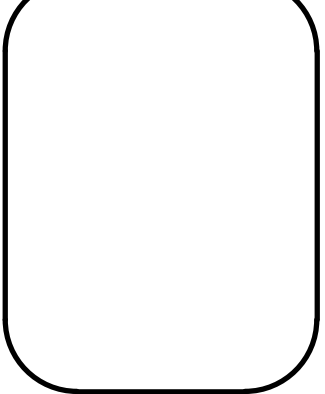
FIRST FLOOR H&C WATER SUPPLY
 SCALE: 1/4" = 1'-0"



SECOND FLOOR H&C WATER SUPPLY
 SCALE: 1/4" = 1'-0"

REVISION	DATE

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NOTICING

Public Meeting Notice

The Historic Architectural Review Commission will hold a public meeting at **5:00 p.m., April 23, 2024, at City Hall, 1300 White Street**, Key West, Florida. In order to view the live feed of the meeting, you can tune in to Comcast channel 77, AT&T Uverse channel 99. If you wish to participate virtually, please contact HARC staff at 305-809-3975. The purpose of the hearing will be to consider a request for:

NEW HOUSE ON VACANT LOT.

#1315 WILLIAM STREET

Applicant – Rumac Construction Group Application #H2024-0015

If you wish to see the application or have any questions, you may visit the Planning Department during regular office hours at 1300 White Street, call 305-809-3973 or visit our website at www.cityofkeywest-fl.gov.

THIS NOTICE CAN NOT BE REMOVED FROM THE SITE UNTIL HARC FINAL DETERMINATION

ADA ASSISTANCE: It is the policy of the City of Key West to comply with all requirements of the Americans with Disabilities Act (ADA). Please call the TTY number at 800-955-8771 or 800-955-8770 (Voice) or the ADA Coordinator at 305-809-3811 at least five business days in advance for sign language interpreters, assistive listening devices, or materials in accessible format.

HARC POSTING AFFIDAVIT

STATE OF FLORIDA:
COUNTY OF MONROE:

BEFORE ME, the undersigned authority, personally appeared _____
Ruben Macias, who, first being duly sworn, on oath,
depose and says that the following statements are true and correct to the best of
his/her knowledge and belief:

1. That a legal notice for Public Notice of Hearing of the Historic Architectural Review Commission (HARC) was placed on the following address:
1315 William Street, Key West, FL on the
18 day of April, 2024.

This legal notice(s) contained an area of at least 8.5"x11".

The property was posted to notice a public hearing before the Key West Historic Architectural Review Commission to be held on April 23, 2024.

The legal notice(s) is/are clearly visible from the public street adjacent to the property.

The Certificate of Appropriateness number for this legal notice is H 2024-0015

2. A photograph of that legal notice posted in the property is attached hereto.

Signed Name of Affiant:

[Signature]
Date: 4-18-2024

Address: 2711 SW 137 Ave. #91

City: Miami

State, Zip: FL, 33175

The forgoing instrument was acknowledged before me on this 18 day of
April, 2024.

By (Print name of Affiant) Ruben Macias who is
personally known to me or has produced _____ as
identification and who did take an oath.

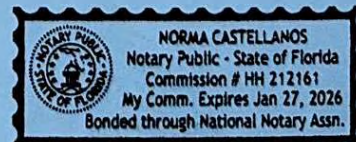
NOTARY PUBLIC

Sign Name: _____

Print Name: Norma Castellanos

Notary Public - State of Florida (seal)

My Commission Expires: 1/27/2026





RUMAC

Construction Group, Inc.

General Contractor

CGC 1513192

P 305.266.8885

rumacconstruction.com

Public
Meeting
Notice

**NO
TRESPASS**
1315

PROPERTY APPRAISER INFORMATION

Monroe County, FL

Disclaimer

The Monroe County Property Appraiser's office maintains data on property within the County solely for the purpose of fulfilling its responsibility to secure a just valuation for ad valorem tax purposes of all property within the County. The Monroe County Property Appraiser's office cannot guarantee its accuracy for any other purpose. Likewise, data provided regarding one tax year may not be applicable in prior or subsequent years. By requesting such data, you hereby understand and agree that the data is intended for ad valorem tax purposes only and should not be relied on for any other purpose.

By continuing into this site you assert that you have read and agree to the above statement.

Summary

Parcel ID 00036980-000000
Account# 1037770
Property ID 1037770
Millage Group 10KW
Location 1315 WILLIAM St, KEY WEST
Address
Legal Description KW WHITE AND PIERCE DIAGRAM N-613 PT LOT 33 SQR 4 TR 17 6 FT X 100FT WILLIAM ST AND LOT 35 SQR 4 TR 17 OR336-316 OR444-419 OR448-162/63 OR1065-1159 OR1455-1815/16 OR1970-1171/72 OR2771-907L/E OR3220-0202
(Note: Not to be used on legal documents.)
Neighborhood 6131
Property Class SINGLE FAMILY RESID (0100)
Subdivision
Sec/Twp/Rng 05/68/25
Affordable Housing No



Owner

CASA DE WILLIAM LLC
 1315 William St
 Key West FL 33040

Valuation

	2023 Certified Values	2022 Certified Values	2021 Certified Values	2020 Certified Values
+ Market Improvement Value	\$452	\$472	\$442	\$455
+ Market Misc Value	\$506	\$506	\$506	\$506
+ Market Land Value	\$1,272,000	\$959,300	\$630,700	\$583,000
= Just Market Value	\$1,272,958	\$960,278	\$631,648	\$583,961
= Total Assessed Value	\$764,276	\$694,799	\$631,648	\$583,961
- School Exempt Value	\$0	\$0	\$0	\$0
= School Taxable Value	\$1,272,958	\$960,278	\$631,648	\$583,961

Historical Assessments

Year	Land Value	Building Value	Yard Item Value	Just (Market) Value	Assessed Value	Exempt Value	Taxable Value	Maximum Portability
2022	\$959,300	\$472	\$506	\$960,278	\$694,799	\$0	\$960,278	\$0
2021	\$630,700	\$442	\$506	\$631,648	\$631,648	\$0	\$631,648	\$0
2020	\$583,000	\$455	\$506	\$583,961	\$583,961	\$0	\$583,961	\$0
2019	\$630,700	\$97,561	\$506	\$728,767	\$661,695	\$0	\$728,767	\$0
2018	\$606,850	\$97,561	\$506	\$704,917	\$601,541	\$0	\$704,917	\$0

The Maximum Portability is an estimate only and should not be relied upon as the actual portability amount. Contact our office to verify the actual portability amount.

Land

Land Use	Number of Units	Unit Type	Frontage	Depth
RESIDENTIAL DRY (010D)	5,300.00	Square Foot	53	100

Buildings

Building ID 2919	Exterior Walls WD FRAME
Style 2 STORY ELEV FOUNDATION	Year Built 1948
Building Type S.F.R. - R1 / R1	EffectiveYearBuilt 1948
Building Name	Foundation WD CONC PADS
Gross Sq Ft 1650	Roof Type GABLE/HIP
Finished Sq Ft 930	Roof Coverage METAL
Stories 1 Floor	Flooring Type SFT/HD WD
Condition POOR	Heating Type NONE with 0% NONE
Perimeter 136	Bedrooms 3
Functional Obs 99	Full Bathrooms 1
Economic Obs 0	Half Bathrooms 0
Depreciation % 68	Grade 400
Interior Walls DRYWALL	Number of Fire Pl 0

Code	Description	Sketch Area	Finished Area	Perimeter
FHS	FINISH HALF ST	720	0	108
FLA	FLOOR LIV AREA	930	930	136
TOTAL		1,650	930	244

Yard Items

Description	Year Built	Roll Year	Size	Quantity	Units	Grade
CONC PATIO	1947	1948	0 x 0	1	125 SF	2

Sales

Sale Date	Sale Price	Instrument	Instrument Number	Deed Book	Deed Page	Sale Qualification	Vacant or Improved	Grantor	Grantee
4/3/2023	\$100	Quit Claim Deed	2413575	3220	0202	11 - Unqualified	Improved		
11/13/2015	\$100	Quit Claim Deed		2771	907	14 - Unqualified	Improved		
1/19/2004	\$40,000	Quit Claim Deed		1970	1171	K - Unqualified	Improved		

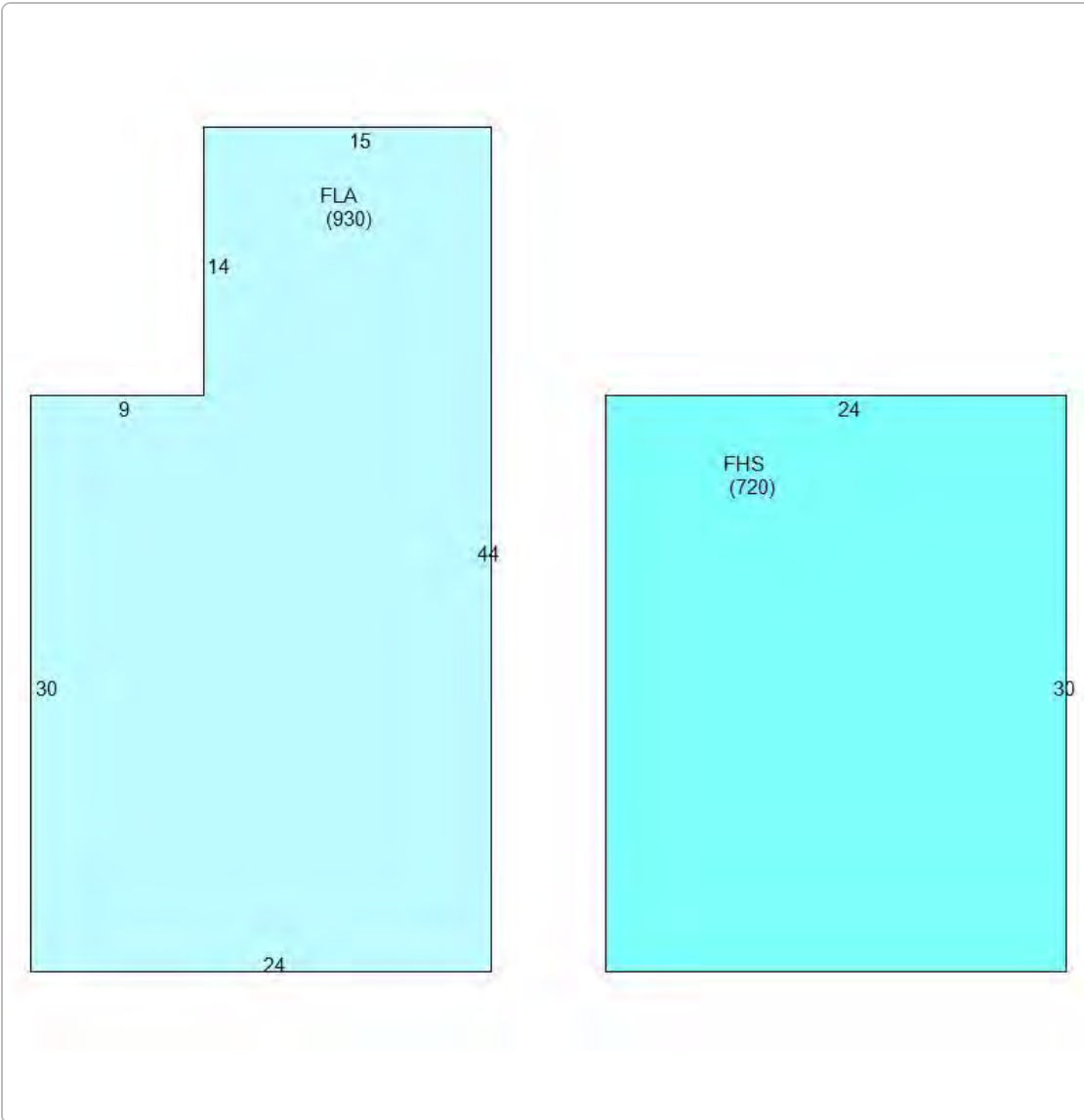
Permits

Number	Date Issued	Date Completed	Amount	Permit Type	Notes
13-0469	2/6/2013	2/6/2015	\$500	Residential	REPLACE 28 SQ. FT. OF CARPORT CONSISTS OF 5 2X8X16' CEILING JOIST & 4 4X8X1/2 PLYWOOD.
13-0471	2/6/2013	2/6/2015	\$800	Residential	REPAIR 40 SQ. FT. OF ROOF.
04-3274	10/13/2004	12/17/2004	\$5,000		ELEC - OUTLETS, WIRING...
04-2749	8/19/2004	12/17/2004	\$500		REPLACE FUSE BOX
020443	5/2/2002	10/10/2002	\$500		REPAIR PORCHES

View Tax Info

[View Taxes for this Parcel](#)

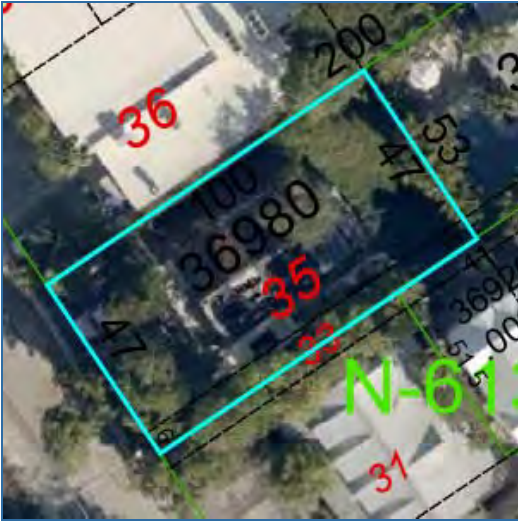
Sketches (click to enlarge)



Photos



Map



TRIM Notice

[2023 TRIM Notice \(PDF\)](#)

The Monroe County Property Appraiser's office maintains data on property within the County solely for the purpose of fulfilling its responsibility to secure a just valuation for ad valorem tax purposes of all property within the County. The Monroe County Property Appraiser's office cannot guarantee its accuracy for any other purpose. Likewise, data provided regarding one tax year may not be applicable in prior or subsequent years. By requesting such data, you hereby understand and agree that the [User Privacy Policy](#) | [GDPR Privacy Notice](#)
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