



Property Information		Request Information		Update Information
File#:	BS-X01693-9668211511	Requested Date:	07/17/2024	Update Requested:
Owner:	CHERYL HERRSCHAFT	Branch:		Requested By:
Address 1:	260 MASTERS DR	Date Completed:	07/31/2024	Update Completed:
Address 2:		# of Jurisdiction(s):		
City, State Zip:	POTTSTOWN, PA	# of Parcel(s):	1	

Notes

- CODE VIOLATIONS**

Per Town of Limerick Department of Zoning there are no Code Violation cases on this property.

Collector: Town of Limerick
Payable Address: 646 W. Ridge Pike Limerick, PA 19468
Business# (610) 495-6432 ext. 124
- PERMITS**

Per Town of Limerick Building Department there are Multiple Open Permit on this property.

Collector: Town of Limerick
Payable Address: 646 W. Ridge Pike Limerick, PA 19468
Business# (610) 495-6432 ext. 124

Comments: Per Town of Limerick Building Department there are Multiple Open Permit on this property. Please refer to the attached document for more infomration.
- SPECIAL ASSESSMENTS**

Per Town of Limerick Department of Finance there are no Special Assessments/liens on the property.

Collector: Town of Limerick
Payable Address: 646 W. Ridge Pike Limerick, PA 19468
Business# (610) 495-6432 ext. 124
- DEMOLITION**

NO



UTILITIES

Water
Account #: N/A
Payment Status: N/A
Status: Pvt & Non- Liable
Amount: N/A
Good Thru: N/A
Account Active: N/A
Collector: Pennsylvania American Water
Payable Address: 852 Wesley Drive Mechanicsburg, PA 17055
Business # (800) 565-7292

UNABLE TO PROVIDE INFORMATION TO THIRD PARTIES. HOMEOWNERS AUTHORIZATION
REQUIRED.

Sewer
Account #: N/A
Payment Status: N/A
Status: Pvt & Non-Liable
Amount: N/A
Good Thru: N/A
Account Active: Yes
Collector: Aqua
Payable Address: P.O. Box 70279, Philadelphia, PA 19176-0279
Business # 877-987-2782

UNABLE TO PROVIDE INFORMATION TO THIRD PARTIES. HOMEOWNERS AUTHORIZATION
REQUIRED.

GARBAGE:
GARBAGE PRIVATE HAULER WITH LIEN STATUS AND BALANCE UNKNOWN

PARID: 370002939651

LOCKE MATTHEW & HERRSCHAFT CHERYL

260 MASTERS DR

Parcel

TaxMapID	37005A107
Parid	37-00-02939-65-1
Land Use Code	1101
Land Use Description	R - SINGLE FAMILY
Property Location	260 MASTERS DR
Lot #	107
Lot Size	9733 SF
Front Feet	66
Municipality	LIMERICK
School District	SPRING FORD AREA
Utilities	ALL PUBLIC//

Owner

Name(s)	LOCKE MATTHEW & HERRSCHAFT CHERYL
Name(s)	
Mailing Address	260 MASTERS DR
Care Of	
Mailing Address	
Mailing Address	POTTSTOWN PA 19464

Current Assessment

Appraised Value	Assessed Value	Restrict Code
200,300	200,300	

Estimated Taxes

County	959
Montco Community College	78
Municipality	698
School District	6,512
Total	8,247
Tax Lien	Tax Claim Bureau Parcel Search

Last Sale

Sale Date	02-NOV-2021
Sale Price	\$585,000
Tax Stamps	5850
Deed Book and Page	6259-02561
Grantor	KOENCK MICHAEL & LYNN ANN
Grantee	LOCKE MATTHEW & HERRSCHAFT CHERYL
Date Recorded	28-DEC-2021

Sales History

Sale Date	Sale Price	Tax Stamps	Deed Book and Page	Grantor	Grantee	Date Recorded
11-02-2021	\$585,000	5850	6259-02561	KOENCK MICHAEL & LYNN ANN	LOCKE MATTHEW & HERRSCHAFT CHERYL	12-28-2021
06-09-2008	\$370,000	3700	5695-02843	SWEENEY HEATHER A	KOENCK MICHAEL & LYNN ANN	06-12-2008
09-25-2007	\$360,000	3600	5668-00282	DHLP LIMERICK GOLF COMMUNITY LP	SWEENEY HEATHER A	10-10-2007

Lot Information

Lot Size	9733 SF
Lot #	107
Remarks	66 X IRR 9733 SF
Remarks	
Remarks	

Residential Card Summary

Card	1
Land Use Code	1101
Building Style	COLONIAL
Number of Living Units	1
Year Built	2007
Year Remodeled	
Exterior Wall Material	ALUM/VINYL
Number of Stories	2
Square Feet of Living Area	2,806
Total Rms/Bedrms/Baths/Half Baths	9/4/2/1
Basement	FULL
Finished Basement Living Area	
Rec Room Area	
Unfinished Area	
Wood Burning Fireplace	
Pre Fab Fireplace	1
Heating	CENTRAL WITH A/C
System	WARM FORCED AIR
Fuel Type	GAS
Condo Level	
Condo/Townhouse Type	
Attached Garage Area	497
Basement Garage No. of Cars	

Permits

Permit Date	03-SEP-2008
Permit Number	08-1733
Amount	1000
Purpose	PATIO
Notes	
Notes	
Notes	
Status	CLOSED

Assessment History

Appraised Value	Assessed Value	Restrict Code	Effective Date	Reason	Notice Date
200,300	200,300		01-JAN-2010	APPEAL	30-JUL-2009
232,930	232,930		01-OCT-2007	NEW HOUSE	15-NOV-2007
4,240	4,240		01-APR-2003	SUBDIVISION	13-NOV-2003
	4,240		01-APR-2003	SUBDIVISION	



Daniel K. Kerr
Township Manager/Secretary/Open Records Officer
DKerr@LimerickPA.org

Administration 610.495.6432
Police 610.495.7909
FAX 610.495.0353

646 West Ridge Pike, Limerick, PA 19468

www.LimerickPA.org

July 23, 2024

RE: Right-to-Know Request

This letter is in regard to your July 18, 2024 Right-to-Know Request to Limerick Township pursuant to Pennsylvania's Right-To-Know Law. You requested the following information:

Address: 260 Masters Drive POTTSTOWN PA 19464

Parcel: 370002939651

- 1. Please advise if the above address has any OPEN/PENDING/EXPIRED Permits and demolition permits that need attention and any fees due currently.*
- 2. Also advise if there are any open Code Violation or fines due that needs attention currently.*
- 3. Advise if there are any unrecorded liens/fines/special assessments due.*

We kindly request that you advise us of the complete permit history, including all open and expired permits & Code Case or Active Code Lien, Street Maintenance, Housing and Building, Emergency Repair & Special Assessment Fees Due or Outstanding found for the property

Your request is granted. Please note that the Township will make all property files available electronically and any requested document(s) should be located within this file. If a permit is an open or expired permit, it would be listed as such by the file name. Contained below and within the body of the email is a link which will allow you to download and review the parcel file electronically.

Parcel File: 260 Masters Drive, Pottstown Parcel # 37-00-02939-65-1 (B05A/U107)

As far as active code violations, to the best our knowledge there does not appear to be any current violations on record. However, this statement does not offer any guarantee that the property is currently in compliance with all Township codes.

We have checked our records and there are no outstanding sewer liens on the property. Please note, effective July 26, 2018 Limerick Township sold the Sewer System to Aqua Pennsylvania. Aqua Pennsylvania began billing Limerick Township customers effective August 1, 2018.

Be advised that tax liens, water liens, and other utilities do not fall under the jurisdiction of Limerick Township; therefore, we have no information to provide. However, the following contacts are provided to assist you in obtaining such information:

Taxes: Ryan Wall, Limerick Township Tax Collector
(484) 938-8001 or limericktaxcollector@yahoo.com
The fee for a tax certification is \$35.
Please see the Township Website Tax Collector Page for more information
<http://pa-limerick.civicplus.com/231/Tax-Collector>

Sewer: Aqua Pennsylvania
(877) 987-2782
<https://www.aquaamerica.com/customer-service-center/contact-aqua.aspx>

Water: Pennsylvania American Water
1-(800) 565-7292
<https://amwater.com/paaw/customer-service-billing/contact-us>

Limerick Township does not have a single trash hauler; trash is contracted privately.

This correspondence will constitute compliance according to the PA Right-to-Know Law. If you have any questions or need any further information, please do not hesitate to call.

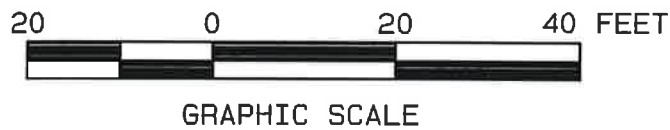
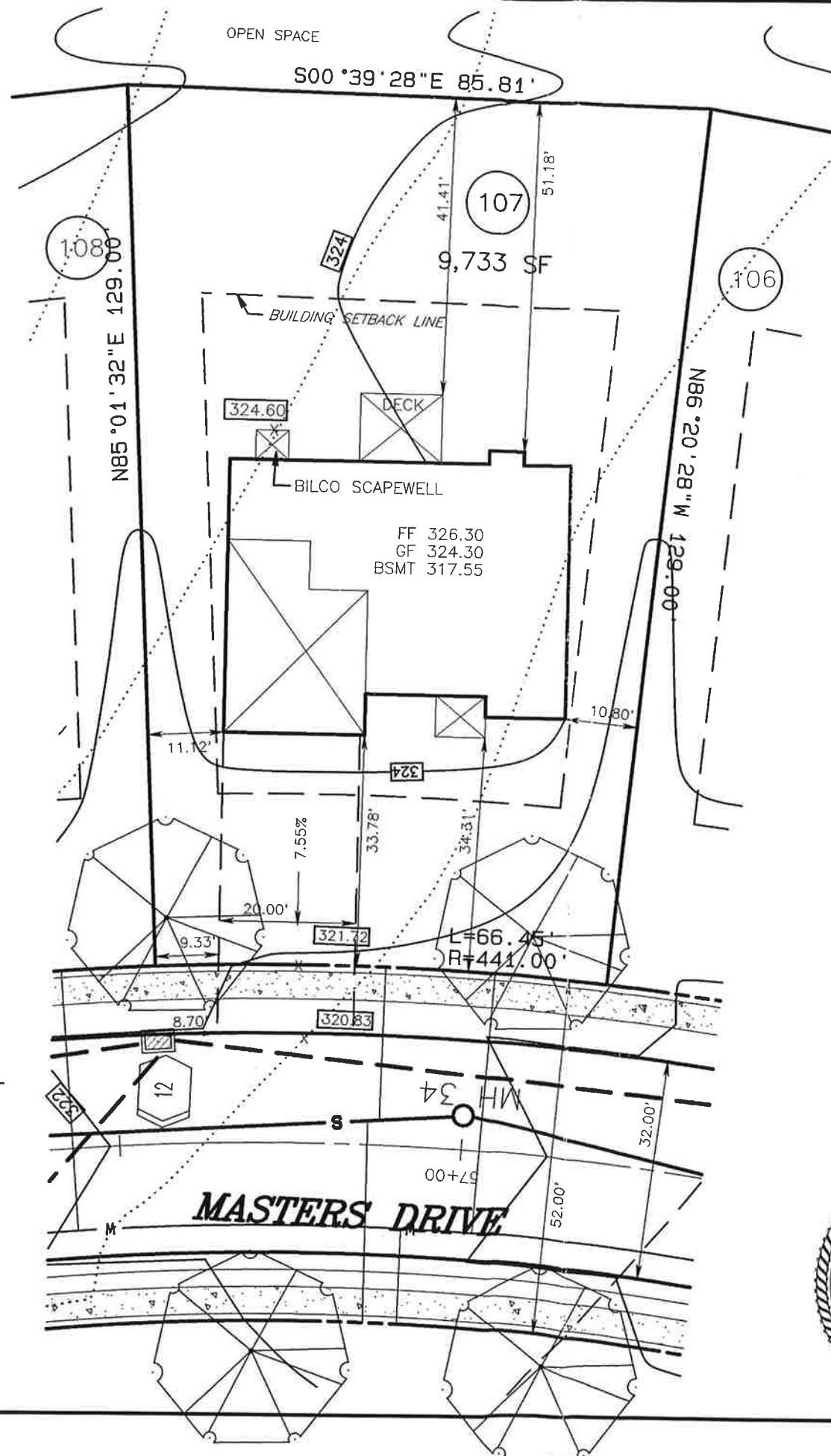
Sincerely,

LIMERICK TOWNSHIP



Daniel K. Kerr
Open Records Officer

DKK/mlm



GENERAL NOTES:

1. BASE PLAN INFORMATION TAKEN FROM FINAL SITE PLANS PREPARED FOR HERITAGE HILLS GOLF CLUB, PREPARED BY VAN CLEEF ENGINEERING ASSOCIATES, DATED SEPTEMBER 12, 2000, LAST REVISED JULY 27, 2003.

BUYERS ACKNOWLEDGEMENT
LOT GRADING

I (WE) AM/ARE THE PURCHASER'S OF LOT NO. 107 IN THE RAVEN'S CLAW COMMUNITY IN LIMERICK TOWNSHIP, MONTGOMERY COUNTY, PENNSYLVANIA. I (WE) HEREBY ACKNOWLEDGE THAT I (WE) HAVE REVIEWED THE LOCATION OF THE HOUSE AS SHOWN ON THE PLOT PLAN AND ARE SATISFIED THAT THE GRADING OF THE LOT SHALL BE CONSISTENT WITH THE PLOT PLAN THAT WE HAVE BEEN PROVIDED BY THE DEVELOPER, DEWEY HOMES LP.

DATE: _____ BUYERS SIGNATURE _____

BUYERS SIGNATURE _____

GOLF COURSE RESIDENTIAL
COMMUNITY OPTION ZONING DATA

MIN. FRONT YARD	25 FT.
MIN. SIDE YARD	10 FT.
MIN. REAR YARD	30 FT.
MAX. BLDG. COVER	35%

APPLICANT
DEWEY HOMES
435 DEVON PARK DRIVE
SAFEGUARD CAMPUS
BUILDING 200
WAYNE, PA 19087

LOT 107 - RAVEN'S CLAW
260 MASTERS DRIVE
AUGUSTA MODEL
COLONIAL ELEVATION
BLDG. COVERAGE: 19.7%

3. 01/25/07 REVISE PORCH PER DEWEY HOMES.
2. 01/17/07 CHANGE ELEVATION, DECK, BSMT ELEV & BILCO PER DEWEY REQUEST.
1. 12/08/06 ADJUST DRIVEWAY LOCATION & ADD DIMENSIONS PER DEWEY REQUEST.

Edward B. Walsh & Associates, Inc. does not guarantee the accuracy of the locations for existing subsurface utility lines, structures, etc. shown on the plans, nor does E. B. Walsh & Assoc., Inc. guarantee that all subsurface utility lines, structures, etc. are shown.

Contractor shall verify the location and elevations of all subsurface utility lines, structures, etc. before the start of work, by calling the Pennsylvania One Call System at 1-800-242-1776.



BUILDING PERMIT PLAN
FOR
THE LINKS AT RAVEN'S CLAW
LOT 107

LIMERICK TOWNSHIP CHESTER COUNTY, PA.

Edward B. Walsh & Associates, Inc.
CIVIL ENGINEERS & SURVEYORS

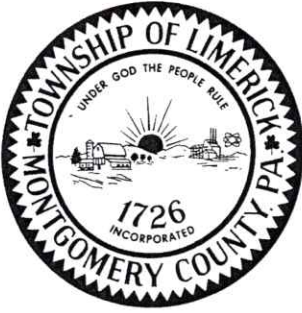
Lionville Professional Center
125 Dowlin Forge Road
Exton, PA 19341
Phone (610) 903-0060
Fax (610) 903-0080



Project-	2806
Date-	11-28-06
Scale-	1" = 20'
Drawn-	CE
Checked-	DHD
Sheet-	1 OF 1

Plotted: Thu Jan 25, 2007

File: F:\JB\2806\2806-B6.pro



Township of Limerick

646 W. Ridge Pike
Limerick, PA 19468
(610) 495-0951
Fax: (610) 495-0952

Certificate of Occupancy and Compliance

Building Permit # **07-467**

Permission is hereby granted by the Township of Limerick, Pennsylvania, to occupy the building and the premises located at and known as:

260 Masters Dr., Pottstown, PA

Subdivision: Raven's Claw

Block: 005A Unit: 107

Building Code Edition: 2006 IRC

Use: Residential Single Family

Type: 2102

Description of Structure: Residential single family

Owner: DHLP Limerick Golf Community, LP
435 Devon Park Dr. Building 20
Wayne, PA 19087

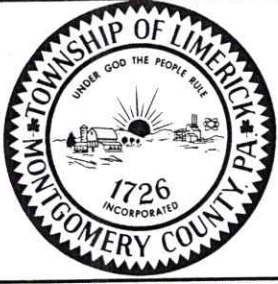
Authorizes said location for the following use: **Residential Single Family**, in accordance with, and subject to, the provisions of the building codes, public works standards, fire codes, and zoning ordinance.

Bob Bilalac

Building Official

7-25-07

Date



New Construction (Residential)

Department Use Only

Limerick Township

Permit #: 07-467

646 W. Ridge Pike
Limerick, PA 19468

Approved Date: 5/2/2007

Issued By: Bob Bieber

Ph. (610) 495-0951 Fax (610) 495-0952

Job Site Information

Owner Information

Address: 260 Masters Dr.	Name: DHLP Limerick Golf Community, LP
City: Pottstown State: PA	Address: 435 Devon Park Dr. Building 20
Tax Map: Zone:	City/State/Zip: Wayne, PA 19087
Subdivision: Raven's Claw	Telephone: 610-353-6002
Parcel/Block/Unit/Lot: 37000293965/005A/107/107	Lot Size:

Applicant Information

Contractor Information

Name: DHLP Limerick Golf Community, LP	Name: DHLP Limerick Golf Community, LP
Address: 435 Devon Park Dr. Building 20	Address: 435 Devon Park Dr. Building 20
City/State/Zip: Wayne, PA 19087	City/State/Zip: Wayne, PA 19087
Telephone: 610-353-6002	Telephone: 610-353-6002
Construction Type: Land Use:	Use Group: Building Use: Residential Single Family

This permit conveys no right to occupy any street, alley or sidewalk or any part thereof, either temporarily or permanently. Encroachments on public property, not specifically permitted under the building code, must be approved by the jurisdiction. Street or alley grades as well as depth and location of public sewers may be obtained from the Department of Public Works. The issuance of this permit does not release the applicant from the conditions of any applicable subdivision restrictions.

1. All applicable inspections must be called for with a minimum of twenty-four (24) hours notice to the building department.
2. Approved plans must be retained on the job and this card kept posted until final inspection has been made. Where a certificate of occupancy is required, such building shall not be occupied until final inspection has been made.
3. Work shall not proceed until the inspector has approved the various stages of construction.
4. Plumbing/Sewer Permits - A house trap with a fresh air vent and clean out is required on all buildings.
5. Permit will become null and void if construction work is not started within six months of the date the permit is issued, as noted above.

Description of Work:

Project Cost: 156,000.00

Build a new 3299 sq. ft. sfd per plans submitted and Limerick Township building/zoning regulations.

Permit Fees

Description	Work Being Done By	Units	Cost @	Sum
Residential use and occupancy			\$35.00	\$35.00
Electrical Fees		3,700.00	\$0.00	\$84.00
Mechanical Fees		6,000.00	\$0.00	\$130.00
Plumbing Fees		20.00	\$10.00 per 1.00	\$200.00
PA State Training Fee		4.00	\$4.00 per 1.00	\$16.00
New Construction Res.		3,299.00	\$0.35 per 1.00	\$1,154.65

Signature: Amanda Mariani

Date: 5/2/2007

Grand Total: **\$1,619.65**

LIMERICK TOWNSHIP

APPLICATION FOR RESIDENTIAL BUILDING PERMIT

646 West Ridge Pike, Limerick, PA 19468 610-495-6432 FAX 610-495-0852

LOCATION OF BUILDING	ADDRESS <u>260 Masters Drive, Pottstown, PA 19464</u>		
	BETWEEN: <u>West Ridge Pike</u> AND <u>Rupert Rd</u>	ZONING <u>R</u>	
	<small>Number</small>	<small>Street</small>	<small>Town</small>
	<small>Cross Street</small>	<small>Cross Street</small>	
SUBDIVISION <u>The Links @ Ravens Claw</u>	LOT <u>107</u>	BLOCK <u>SA</u>	UNIT <u>107</u>

Appeal No.

- | | |
|---|---|
| 01) <input checked="" type="checkbox"/> NEW SINGLE FAMILY DWELLING
02) <input type="checkbox"/> NEW MULT. FAMILY DWELLING
04) <input type="checkbox"/> NEW INSTITUTIONAL BUILDING
05) <input type="checkbox"/> NEW PUBLIC BUILDING

11) <input type="checkbox"/> ADDITION SINGLE FAMILY DWELLING
12) <input type="checkbox"/> ADDITION MULT. FAMILY DWELLING
14) <input type="checkbox"/> ADDITION INSTITUTIONAL BUILDING
15) <input type="checkbox"/> ADDITION PUBLIC BUILDING

21) <input type="checkbox"/> ALTERATION SINGLE FAMILY DWELLING
22) <input type="checkbox"/> ALTERATION MULT. FAMILY DWELLING
24) <input type="checkbox"/> ALTERATION INSTITUTIONAL BUILDING
25) <input type="checkbox"/> ALTERATION PUBLIC BUILDING

31) <input type="checkbox"/> REPAIR SINGLE FAMILY DWELLING
32) <input type="checkbox"/> REPAIR MULT. FAMILY DWELLING
34) <input type="checkbox"/> REPAIR INSTITUTIONAL BUILDING
35) <input type="checkbox"/> REPAIR PUBLIC BUILDING

<input type="checkbox"/> OTHER _____ | 52) <input type="checkbox"/> DEMOLITION
53) <input type="checkbox"/> FIRE REPAIR
54) <input type="checkbox"/> SWIMMING POOL
55) <input type="checkbox"/> TANKS / PUMP
56) <input type="checkbox"/> TENNIS COURT
57) <input type="checkbox"/> SIGN / AWNING
50) <input type="checkbox"/> OTHER (BLDG.) _____

LIMERICK TOWNSHIP
<input type="checkbox"/> TEMPORARY TENT
<input type="checkbox"/> SATELLITE ANTENNA
61) <input type="checkbox"/> H.V.A.C. SYSTEM
62) <input type="checkbox"/> A/C UNIT(S) ONLY
63) <input type="checkbox"/> GAS HEATER
64) <input type="checkbox"/> OIL HEATER
65) <input type="checkbox"/> HEAT PUMP
66) <input type="checkbox"/> CHIMNEY REPAIR |
|---|---|
- 37000293965
- DMLP L.M. Golf
- RECEIVED
- APR 09 2007
- AUGUSTA MODEL

Plan No.

OWNERSHIP	COST	COST	CONTRACTOR'S NAME
81) <input checked="" type="checkbox"/> PRIVATE (IND., INST., CORP.) 82) <input type="checkbox"/> PUBLIC (LOCAL, STATE, FED.)	98) COST OF CONST.		
PROPOSED USE OF PROPERTY 91) <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 92) <input type="checkbox"/> MULT. FAMILY DWELLING (#Units _____) 93) <input type="checkbox"/> BUSINESS (Type) _____ 94) <input type="checkbox"/> INSTITUTIONAL BUILDING 95) <input type="checkbox"/> OTHER (Type) _____ 96) <input type="checkbox"/> PUBLIC BUILDING	ELECTRICAL		
	PLUMBING		
	H.V.A.C.		
	99) TOTAL COST	156,000	

FILL OUT SELECTED CHARACTERISTICS OF BUILDING

PRINCIPAL TYPE OF FRAME <input type="checkbox"/> MASONRY (wall bearing) <input checked="" type="checkbox"/> WOOD FRAME <input type="checkbox"/> STRUCTURAL STEEL <input type="checkbox"/> REINFORCED CONCRETE <input type="checkbox"/> OTHER Specify _____	TYPE OF SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC OR PRIVATE CO. <input type="checkbox"/> INDIVIDUAL (septic tank, etc.) TYPE OF WATER SUPPLY <input checked="" type="checkbox"/> PUBLIC OR PRIVATE CO. <input type="checkbox"/> INDIVIDUAL (well, cistern)	DIMENSIONS NUMBER OF STORIES <u>2</u> TOTAL SQ. FT. OF FLOOR AREA ALL FLOORS, BASED ON EXTERIOR DIMENSIONS TOTAL LAND AREA, SQ. FT. <u>32990</u>	1st: <u>1344</u> 2nd: <u>1333</u> Garage <u>445</u> Porch <u>107</u>
PRINCIPAL TYPE OF HEATING FUEL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> OIL <input type="checkbox"/> ELECTRICITY <input type="checkbox"/> COAL <input type="checkbox"/> OTHER Specify _____	TYPE OF MECHANICAL WILL THERE BE CENTRAL AIR CONDITIONING? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO WILL THERE BE AN ELEVATOR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	NUMBER OF OFF-STREET PARKING SPACES (Enclosed) OUTDOORS RESIDENTIAL BLDGS. ONLY NUMBER OF BEDROOMS NUMBER OF BATHROOMS Full <u>2</u> Partial <u>1</u>	2 2 4 2.1

Permit No.



LIMERICK TOWNSHIP

646 WEST RIDGE PIKE
LIMERICK, PENNSYLVANIA 19468

ADMINISTRATION OFFICES

(610) 495-6432
FAX (610) 495-0353
FAX (610) 495-0952

POLICE DEPARTMENT

(610) 495-7909
FAX (610) 495-5702

APPLICATION FOR USE AND OCCUPANCY PERMIT
(Section 184.14 and 184.15 of Limerick Township Zoning Ordinance)

Applicant: DHLP Limerick Golf Community LP

Address: 435 Devon Park Drive, Bldg 200
Wlync, PA 19081

Phone: 610-535-6002 FAX: 610-535-6003

Location/Address of property subject to this U & O: 260 Masters Drive, Pottstown, PA 19444
B U

Check: New Construction Change in non-conforming use _____
Addition _____ Change in use _____
Alteration _____ Change in occupancy, non-residential _____

Proposed Use: Single family dwelling

Plot Plan Prepared by: EB Walsh : Associates

(Plot plan must show the specific location of the building. If a multi-tenant building, show the exact location within the building, as well as all walls and windows.)

Surveyor/engineer responsible for property line locations and corner pins Dan Daley

(If a residential property, the surveyor/engineer is not required to be registered.)

Name of Property Owner: DHLP Limerick Golf Community LP

Address: Same as above

Phone: _____ FAX: _____

Fee Submitted: \$ 35.00 Check #: _____ Cash: _____

Applicant's Signature Nancy L. Yost Printed Name Nancy L. Yost Date: _____

Name	Mailing Address - Number, Street, City, State, Zip	Tel. No.
1. Property Owner DHL P Limerick Gol Community LP	435 Devon Park Drive, Building 200 Wayne PA 19087	610-535-6002
2. Contractor SAME	"	
3. Architect or Engineer EB Welsh: Assoc.	125 Dowling Forge Road Exton PA 19341	610-903-0060

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction. The issuance of this building permit authorizes Building and Planning Department employees the right to enter the property at reasonable hours for the purpose of conducting code inspections. The content of the certificate of workers compensation insurance or affidavit on file with Limerick Township is still in effect with no changes in coverage of employees.

Signature of Applicant <i>Nancy L. Yost</i>	Address 435 Devon Park Drive, Bldg 200 Wayne PA 19087	Application Date 4-4-07
Print Name Nancy L. Yost	Contact Phone #'s 610-535-6002 x254	

DESCRIBE, IN DETAIL, THE WORK TO BE PERFORMED

Construction of a single family detached dwelling

APPROVED BY: <i>Bob Bueber</i>	PERMIT FEE:	DATE ISSUED: 5-2-07	PERMIT #:
USE GROUP:	FIRE GRADING:	LIVE LOADING:	OCCUPANCY LOAD:

SUBJECT TO A \$2.00 TRAINING FEE

ELECTRICAL PERMIT

Augusta

DATE _____

CONTRACTORS LICENSE NO. EC04-006 PERMIT NUMBER _____

LOCATION The Links @ Raven's Claw, Lot #107 BLDG. PERMIT NO. _____

OWNER 2606 Masters Drive, Pottstown, PA 19464
DHL P Limerick Golf Community LP

KIND OF BUILDING New Construction USED AS Single family

TO BE COMPLETED ABOUT _____ ESTIMATED COST \$ 3700

NEW - ALTERATION - REPAIR - ADDITION (Circle One)

ITEM	NUMBER	FEE
CEILING OUTLETS	20	
SWITCHES	37	
PLUG RECEPTACLES	64	
TOTAL OUTLETS	121	
AIR HEATERS	1	
RANGES	1	
SIGNS		
WATER HEATER	1	
LIGHTING CIRC.		
OTHER CIR.		
TOTAL CIRCUITS		
MOTORS		
PANEL SIZE	200A	
RANGE COND.		
SUB FEEDER SIZE		
TOTAL FEE		84.00

TREASURER'S VALIDATION OF FEE PAID

CONTRACTOR'S NAME AND ADDRESS
Brothers Inc. 1000 Sussex Blvd

CITY Broomall STATE PA ZIP CODE 19008

READY FOR INSPECTION ON _____ (date) OR WILL CONTACT PERMIT CLERK LATER _____

APPLICANT CERTIFIES THAT ALL INFORMATION GIVEN IS CORRECT AND THAT ALL PERTINENT ELECTRICAL ORDINANCES WILL BE COMPLIED WITH IN PERFORMING THE WORK FOR WHICH THIS PERMIT IS ISSUED.

Yancy L. Y...
Signature of Contractor or his Authorized Representative Making Application

BUTS BIEBER
Signature of Permit Clerk

APPLICANT'S COPY

August **\$2.00 TRAINING FEE**

PLUMBING PERMIT

DATE _____

LICENSE NUMBER PC04-029 PERMIT NUMBER _____

LOCATION The Links @ Raven's Claw, Lot #107
260 Masters Drive, Pottstown, PA 19424

OWNER DHLP Limerick Golf Community LP

KIND OF BUILDING New construction USED AS Single family

TO BE COMPLETED ABOUT _____ ESTIMATED COST \$ 7500

OLD - NEW BUILDING NUMBER _____

TYPE	NUMBER	FEE
STACKS	3	
SINKS	1	
BATHS	3	
WATER CLOSET	3	
LAVATORY	5	
TANK AND HEATER	1	
LAUNDRY TRAY	1	
WATER DISTRIBUTION SYSTEMS		
FLOOR DRAINS		
SEWAGE EJECTOR		
FOUNTAIN (DRINKING)		
SUMP	1	
SHOWERS	1	
URINAL		
CATCH BASIN		
DISHWASHING MACHINE	1	
HUMIDIFIER		
GARBAGE GRINDER		
WASHING MACHINE	1	
SPECIAL WASTES		
RAINWATER LEADERS		
MISCELLANEOUS FIXTURES		
TOTAL FEE		<u>200.00</u>

TREASURER'S VALIDATION OF FEE PAID

20 fixtures
@ \$10/ea

CONTRACTOR'S NAME AND ADDRESS
H.S. Plumbing 5883 Wertz town Rd
 CITY Navron STATE PA ZIP CODE 17555

READY FOR INSPECTION ON _____ (date) OR WILL CONTACT PERMIT CLERK LATER _____

APPLICANT CERTIFIES THAT ALL INFORMATION GIVEN IS CORRECT AND THAT ALL PERTINENT CITY ORDINANCES WILL BE COMPLIED WITH IN PERFORMING THE WORK FOR WHICH THIS PERMIT IS ISSUED.

Yancy L. Fort
Signature of Contractor or his Representative Making Application

BUS BILBROE
Signature of Permit Clerk

APPLICANT'S COPY

MECHANICAL PERMIT

Augusta

DATE _____

CONTRACTORS LICENSE NO. M404-008

PERMIT NUMBER _____

LOCATION The Links @ Raven's Claw, Lot # 107
260 Masters Drive, Pottstown PA, 19444

OWNER DHLP Limerick Golf Community LP

KIND OF BUILDING New Construction USED AS Single Family

TO BE COMPLETED ABOUT _____ ESTIMATED COST \$ 4,000

NEW - ALTERATION - REPAIR - ADDITION (Circle One)
OIL GAS LPG ELECT.

TYPE OF EQUIPMENT		NUMBER	FEE
Air Cond. Units—H.P. Ea.		1	
Refrigeration Units—H.P. Ea.			
Boilers—H.P. Ea.			
Forced Air Systems—B.T.U.	MEa.	1	
Gravity Systems—B.T.U.	MEa.		
Floor Furnaces—B.T.U.	M		
Wall Heaters—B.T.U.	M		
Unit Heaters—B.T.U.	M		
Conversion Burner			
Clothes Dryers			
Ventilation Fan			
Range Hood			
Air Handling	C.F.M.		
Incinerator			
Gas Piping			
Range	COM. <input type="checkbox"/> DOM. <input type="checkbox"/>		
TOTAL FEE			130.00

TREASURER'S VALIDATION OF FEE PAID

CONTRACTOR'S NAME AND ADDRESS
Quality Air Heating 1305 Front St.
 CITY Quakertown STATE PA ZIP CODE 18951

READY FOR INSPECTION ON _____ (date) OR WILL CONTACT PERMIT CLERK LATER _____

APPLICANT CERTIFIES THAT ALL INFORMATION GIVEN IS CORRECT AND THAT ALL PERTINENT MECHANICAL ORDINANCES WILL BE COMPLIED WITH IN PERFORMING THE WORK FOR WHICH THIS PERMIT IS ISSUED.

Signature of Contractor or his Authorized Representative Making Application
[Signature]

Signature of Permit Clerk
BOB BURBER

FILE COPY

PRODUCER Phone: (610) 640-4400 Fax: 610-640-5963
HARE, CHASE & HECKMAN, INC.
458 E. KING STREET
MALVERN PA 19355

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

NAIC #

INSURED
DEWEY COMPANIES, LP
435 DEVON PARK DRIVE, BUILDING 200
WAYNE PA 19087

INSURER A: THE OHIO CASUALTY GROUP

24074

INSURER B: AIG INS.CO.

INSURER C:

INSURER D:

INSURER E:

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR/ADD'L LTR/INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
					MED. EXP (Any one person)	\$
					PERSONAL & ADV INJURY	\$
					GENERAL AGGREGATE	\$
					PRODUCTS-COMP/OP AGG.	\$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	BAA53071412	04/20/06	04/20/07	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN AUTO ONLY: EA ACC	\$
					AGG	\$
	EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE	\$
					AGGREGATE	\$
						\$
						\$
						\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC7756158	08/18/05	08/18/06	WC STATUTORY LIMITS	OTHER
					E.L. EACH ACCIDENT	\$ 500,000
					E.L. DISEASE-EA EMPLOYEE	\$ 500,000
					E.L. DISEASE-POLICY LIMIT	\$ 500,000
	OTHER:					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/ SPECIAL PROVISIONS
RE: DHLP LIMERICK GOLF COMMUNITY-RAVENS CLAW

CERTIFICATE HOLDER

CANCELLATION

LIMERICK TOWNSHIP
646 WEST RIDGE PIKE
LIMERICK, PA 19468

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, IT'S AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Spencer P. ...

Attention:

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/19/2006

PRODUCER (610)363-7999 FAX (610)363-5231
 Roehrs & Company Inc.
 PO Box 100, 736 Springdale Dr
 Exton, PA 19341-0100
 CISR, Jennifer McDade

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED DHLP-King's Grant, LP
 435 Devon Park Drive
 Building 200
 Wayne, PA 19087

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Granite State Insurance	
INSURER B: National Union	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS												
A	GENERAL LIABILITY <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-JECT <input type="checkbox"/> LOC	02LX508275-1/000	04/20/2006	04/20/2007	<table border="1"> <tr><td>EACH OCCURRENCE</td><td>\$ 1,000,000</td></tr> <tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td>\$ 100,000</td></tr> <tr><td>MED EXP (Any one person)</td><td>\$ 5,000</td></tr> <tr><td>PERSONAL & ADV INJURY</td><td>\$ 1,000,000</td></tr> <tr><td>GENERAL AGGREGATE</td><td>\$ 2,000,000</td></tr> <tr><td>PRODUCTS - COMP/OP AGG</td><td>\$ 2,000,000</td></tr> </table>	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 - COMP/OP AGG	\$ 2,000,000
	EACH OCCURRENCE	\$ 1,000,000															
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EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 10,000	29UD5687318-1/000	04/20/2006	04/20/2007	<table border="1"> <tr><td>EACH OCCURRENCE</td><td>\$ 5,000,000</td></tr> <tr><td>AGGREGATE</td><td>\$ 5,000,000</td></tr> <tr><td></td><td>\$ 0</td></tr> <tr><td></td><td>\$</td></tr> <tr><td></td><td>\$</td></tr> </table>	EACH OCCURRENCE	\$ 5,000,000	AGGREGATE	\$ 5,000,000		\$ 0		\$		\$			
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	\$ 0																
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WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<table border="1"> <tr><td>WC STATU-TORY LIMITS</td><td>OTH-ER</td></tr> <tr><td>E.L. EACH ACCIDENT</td><td>\$</td></tr> <tr><td>E.L. DISEASE - EA EMPLOYEE</td><td>\$</td></tr> <tr><td>E.L. DISEASE - POLICY LIMIT</td><td>\$</td></tr> </table>	WC STATU-TORY LIMITS	OTH-ER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$					
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E.L. EACH ACCIDENT	\$																
E.L. DISEASE - EA EMPLOYEE	\$																
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OTHER Builders Risk	02LX508275-1/000	04/20/2006	04/20/2007	<table border="1"> <tr><td>\$1,500,000 Any One Dwelling</td></tr> <tr><td>\$3,000,000 Any One Loss</td></tr> <tr><td>\$2,500 Deductible</td></tr> </table>	\$1,500,000 Any One Dwelling	\$3,000,000 Any One Loss	\$2,500 Deductible										
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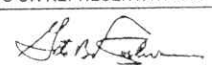
DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Re: DHLP Limerick Golf Community

CERTIFICATE HOLDER

Limerick Township

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
 Giles B. Roehrs/JENN 

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

Spec Title

DISCLOSURE STATEMENT

Address: 260 Maskers Drive, Lot 107, Pottstown, PA B U

This document is for your protection. Read it carefully before signing it. The Code of the Township of Limerick, Chapter 155. Subdivision and Land Development, Article IX, Section 155-41 through Section 155-50 requires that the Sellers of new residential properties, as defined in the Code of Ordinances, provide the purchasers with certain specific information regarding the property to be sold prior to the signing of any Agreement of Sale. This information is intended to benefit the purchaser by clearly delineating the nature of the property in question, and the nature, the location, and presence of certain restrictions or conditions that may affect its use and occupation.

The checklist below is required by the Township to make certain that you have been shown the information required by the Code of Ordinances. It is your obligation to evaluate that information and to consider its impacts and implications relative to your particular situation. The importance of reading and understanding the material presented to you cannot be over stressed. The checklist is not intended to address or identify every circumstance that could arise involving a restriction or use of the property nor is it a comprehensive list of restrictions, ordinances, codes, regulations, or requirements that now exist or may be hereafter adopted, that the property may now or in the future be subject. The use, review, and execution of this checklist should not be in lieu of your own investigation as to the nature of this property. You should be aware that there may be other factors which affect the desirability, suitability, current or future value, and use or occupation of the site that are not referenced or noted herein. You should not rely on the Disclosure Statement as a substitute for your own thorough and complete evaluation of the value, utility, and current and future use of the property.

If you have any questions you would be well advised to seek the assistance of an unbiased professional before signing any Sales Agreement.

RESIDENTIAL DISCLOSURE STATEMENT

The purchasers shall initial each of the following to verify that the information about each of the following was presented and explained fully with regard to your property:

_____ All lot lines within the development.

_____ The current Zoning District in which the property is located. All uses presently permitted within the District in compliance with zoning, including accessory uses, and all Deed restrictions or other restrictions that affect development of the property.

_____ All current dimensional requirements for the principal use on each lot, such as setback requirements, building coverage, impervious coverage, and height limitations.

_____ All current dimensional requirements for accessory uses (such as decks, pools, sheds, garages, fences, etc.) permitted on each lot, such as size, setback requirements, and height limitations.

_____ The location and dimension of all easements throughout the development describing the nature of and facilities within said easement (i.e. street, rights-of-way, sewer, water, storm water, open space, vegetative buffering, etc.), showing which lots are affected by these easements.

_____ The location of all areas within the development and on each lot that are classified as wetlands, wetland buffers, steep slopes, hydric soils, flood plain, flood fringe, and flood way, as well as, encroachment restrictions including, but not limited to, protection of woodlands and mature trees and other consequences affecting the development of the property.

_____ The location of storm water drainage easements and facilities (i.e., easements, drains, catch basins, and retention/detention basins, etc.), and the path of storm water runoff, as well as, the terms and conditions of the property owner's obligations, responsibility and liability.

_____ The existing zoning of land which abuts the property/development and a description of permitted uses and dimensional requirements for each contiguous zoning district.

_____ Public or private common areas, such as parklands, open space, streets, recreation facilities and bikeways.

_____ Membership in a Homeowners Association, if applicable. A copy of the Homeowners Association/Condominium Agreement has been provided.

_____ The date of the zoning and subdivision and land development chapters of the Township's Code of Ordinances the particular plan is being developed under shall be provided to the prospective purchaser. If the property is part of a development that is subject to conditional approvals, stipulations, or other agreements, a copy of all such terms and conditions shall be included in their entirety.

_____ I/We understand that substantial use restrictions may apply to environmentally sensitive areas (i.e., wetlands, wetland buffers, steep slopes, hydric soils, flood plain, flood way, and flood fringe and associated areas protected from encroachment, etc.), and that these restrictions including, but not limited to, woodlands and mature trees will be enforced by the appropriate local, state, and federal agencies. I/We understand that substantial penalties exist for the violation of those restrictions.

_____ I/We are aware that the existing zoning regulations within the Township are subject to change.

I/We are aware that if the site is to be serviced by on-site sanitary sewer collection and disposal that the same is subject to the permits, regulations, and requirements of the Pennsylvania Department of Environmental Protection and the Montgomery County Health Department.

I/We understand that if the site is to be serviced by the municipal sewer collection, conveyance, and treatment facilities that connection thereto must mean compliance with the Code of Ordinances and the regulations adopted pursuant thereto by the local, state, and federal authorities. Further, the cost of connection and of sewer rental (treatment) rates are established by the Board of Supervisors for the Township of Limerick and are subject to change and modification in accordance with law.

I/We are aware that the existing Building Codes within the Township are subject to change.

I/We are aware that if the site is serviced by public water, that the fees, service, facilities, and access to the same are under the supervision and regulation of Citizens Water Company, its successors and/or assigns and the Pennsylvania Utilities Commission and is not otherwise regulated by, associated with, or subject to the direction of the Township.

That if the property is subject to an easement or right-of-way, I/We are aware that the area of the right-of-way may be accessed by governmental interest, the easement holder, the general public or other third parties acting on behalf of one of these entities, if applicable, and that we will not impede, obstruct, or otherwise preclude access to the same for such appropriate purposes.

That if the property is subject to easements or rights-of-way for storm water management facilities (i.e., catch basins, drains, pipes, conduit, and/or storm water detention/retention basins, etc.), that I may have certain obligations

regarding the maintenance, access to, and operation of said facilities and that if I should fail to perform said maintenance, the Township may enter upon the property to perform the same at my cost and expense.

I/We, being the undersigned, acknowledge that I/We have received a full size copy of the plan detailing the scope of the subdivision and/or land development site, as well as, a separate lot plan of my/our property from the Seller. I/We further understand and agree to the constraints imposed thereon with regard to my/our property. I/We have also received a full and complete copy of this Disclosure Statement and understand that signing this Disclosure Statement does not release me/us from meeting the requirements and obligations of the Township of Limerick, Commonwealth of Pennsylvania, or United States Government.

Seller _____

Purchaser _____

Seller _____

Purchaser _____

DATED: _____

**Limerick Township
House / Building Placement**

To: Limerick Township Code Office

Re: House/Building Placement

Date: December 8, 2006

I do hereby certify the placement of the house/building shall be within the allowable building envelope, as indicated on the building permit plan, at the following location:

Subdivision: The Links at Raven's Claw

Location: Masters Drive, Pottstown, Pennsylvania 19464

Lot #: 107

Layout date: _____

Responsible person: Daniel Daley, P.E., E. B. Walsh & Associates, Inc.
Lionville Professional Center, 125 Dowlin Forge Road
Exton, PA 19341
610-903-0060

Signature: 

I do hereby certify the elevation of the building shall be in accordance with the site plan as submitted with the building permit

Signature: 

Date: 1-8-07

Note: This certification must be submitted within the building permit applications, and elevation to be certified at footing inspection.

Permit #

Permit Date



REScheck Software Version 3.7.3 Compliance Certificate

Project Title: The Augusta Model

Report Date: 12/26/06

Data filename: G:\REScheck\DEWEY\Raven's Claw\Augusta.rck

Energy Code: **2003 IECC**
 Location: **Pottstown, Pennsylvania**
 Construction Type: **Single Family**
 Glazing Area Percentage: **14%**
 Heating Degree Days: **5863**

Construction Site:
The Links at Raven's Claw

Owner/Agent:
Dewey Homes, L.P.

Designer/Contractor:
Prepared by The OMNIA Group, Inc

Compliance: **Passes** Maximum UA: **705** Your Home UA: **684** --> **3.0% Better Than Code (UA)**

Assembly	Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Glazing or Door U-Factor	UA
Ceiling 1: Flat Ceiling or Scissor Truss:	1725	30.0	0.0		60
Wall 1: Wood Frame, 16" o.c.:	1728	13.0	0.0		142
Wall 2: Wood Frame, 16" o.c.:	1740	13.0	0.0		101
Window 1: Vinyl Frame:Double Pane:	470			0.510	240
Door 2: Solid:	20			0.130	3
Door 3: Glass:	20			0.350	7
Basement Wall 1: Solid Concrete or Masonry:	1388	0.0	11.0		107
Window 2: Metal Frame, Single Pane:	11			1.000	11
Floor 1: All-Wood Joist/Truss, Over Unconditioned Space:	398	30.0	0.0		13
Furnace 1: Forced Hot Air: 90 AFUE					
Air Conditioner 1: Electric Central Air: 13 SEER					

Compliance Statement: The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the 2003 IECC requirements in REScheck Version 3.7.3 and to comply with the mandatory requirements listed in the REScheck Inspection Checklist.

Builder/Designer

Company Name

Date



REScheck Software Version 3.7.3 Inspection Checklist

Date: 12/26/06

Ceilings:

- Ceiling 1: Flat Ceiling or Scissor Truss, R-30.0 cavity insulation
Comments: Roof

Above-Grade Walls:

- Wall 1: Wood Frame, 16" o.c., R-13.0 cavity insulation
Comments: 2nd Floor
- Wall 2: Wood Frame, 16" o.c., R-13.0 cavity insulation
Comments: 1st Floor

Basement Walls:

- Basement Wall 1: Solid Concrete or Masonry, 7.8' ht/7.0' bg/4.0' insul, R-11.0 continuous insulation
Comments: Basement (Insulation)
Exterior insulation must have a rigid, opaque, weather-resistant protective covering that covers the exposed (above-grade) insulation and extends at least 6 in. below grade.

Windows:

- Window 1: Vinyl Frame:Double Pane, U-factor: 0.510
For windows without labeled U-factors, describe features:
#Panes ____ Frame Type _____ Thermal Break? ____ Yes ____ No
Comments: 1st & 2nd Floor Windows
- Window 2: Metal Frame, Single Pane, U-factor: 1.000
For windows without labeled U-factors, describe features:
#Panes ____ Frame Type _____ Thermal Break? ____ Yes ____ No
Comments: Basement Windows

Doors:

- Door 2: Solid, U-factor: 0.130
Comments: Front Door
- Door 3: Glass, U-factor: 0.350
Comments: Rear Door

Floors:

- Floor 1: All-Wood Joist/Truss, Over Unconditioned Space, R-30.0 cavity insulation
Comments: 2nd Floor over garage

Heating and Cooling Equipment:

- Furnace 1: Forced Hot Air: 90 AFUE or higher
Make and Model Number: _____
- Air Conditioner 1: Electric Central Air: 13 SEER or higher
Make and Model Number: _____

Air Leakage:

- Joints, penetrations, and all other such openings in the building envelope that are sources of air leakage must be sealed.
- Recessed lights must be 1) Type IC rated, or 2) installed inside an appropriate air-tight assembly with a 0.5" clearance from combustible materials. If non-IC rated, the fixture must be installed with a 3" clearance from insulation.

Skylights:

- Minimum insulation requirement for skylight shafts equal to or greater than 12 inches is R-19.

Vapor Retarder:

- Required on the warm-in-winter side of all non-vented framed ceilings, walls, and floors.

Materials Identification:

- Materials and equipment must be installed in accordance with the manufacturer's installation instructions.
- Materials and equipment must be identified so that compliance can be determined.
- Manufacturer manuals for all installed heating and cooling equipment and service water heating equipment must be provided.
- Insulation R-values, glazing U-factors, and heating equipment efficiency must be clearly marked on the building plans or specifications.

Duct Insulation:

- Supply ducts in unconditioned attics or outside the building must be insulated to R-8.
- Return ducts in unconditioned attics or outside the building must be insulated to R-4.
- Supply ducts in unconditioned spaces must be insulated to R-8.
- Return ducts in unconditioned spaces (except basements) must be insulated to R-2.
- Where exterior walls are used as plenums, the wall must be insulated to R-8.
- Insulation is not required on return ducts in basements.

Duct Construction:

- Duct connections to flanges of air distribution system equipment must be sealed and mechanically fastened.
- All joints, seams, and connections must be securely fastened with welds, gaskets, mastics (adhesives), mastic-plus-embedded-fabric, or tapes. Tapes and mastics must be rated UL 181A or UL 181B.
Exception: Continuously welded and locking-type longitudinal joints and seams on ducts operating at less than 2 in. w.g. (500 Pa).
- The HVAC system must provide a means for balancing air and water systems.

Temperature Controls:

- Thermostats are required for each separate HVAC system. A manual or automatic means to partially restrict or shut off the heating and/or cooling input to each zone or floor shall be provided.

Service Water Heating:

- Water heaters with vertical pipe risers must have a heat trap on both the inlet and outlet unless the water heater has an integral heat trap or is part of a circulating system.
- Insulate circulating hot water pipes to the levels in Table 1.

Circulating Hot Water Systems:

- Insulate circulating hot water pipes to the levels in Table 1.

Swimming Pools:

- All heated swimming pools must have an on/off heater switch and require a cover unless over 20% of the heating energy is from non-depletable sources. Pool pumps require a time clock.

Heating and Cooling Piping Insulation:

- HVAC piping conveying fluids above 105 degrees F or chilled fluids below 55 degrees F must be insulated to the levels in Table 2.

Table 1: Minimum Insulation Thickness for Circulating Hot Water Pipes

Heated Water Temperature (°F)	Insulation Thickness in Inches by Pipe Sizes			
	Non-Circulating Runouts		Circulating Mains and Runouts	
	Up to 1"	Up to 1.25"	1.5" to 2.0"	Over 2"
170-180	0.5	1.0	1.5	2.0
140-169	0.5	0.5	1.0	1.5
100-139	0.5	0.5	0.5	1.0

Table 2: Minimum Insulation Thickness for HVAC Pipes

Piping System Types	Fluid Temp. Range(°F)	Insulation Thickness in Inches by Pipe Sizes			
		2" Runouts	1" and Less	1.25" to 2.0"	2.5" to 4"
Heating Systems					
Low Pressure/Temperature	201-250	1.0	1.5	1.5	2.0
Low Temperature	106-200	0.5	1.0	1.0	1.5
Steam Condensate (for feed water)	Any	1.0	1.0	1.5	2.0
Cooling Systems					
Chilled Water, Refrigerant and Brine	40-55	0.5	0.5	0.75	1.0
	Below 40	1.0	1.0	1.5	1.5

NOTES TO FIELD: (Building Department Use Only)



REScheck Software Version 4.0.1
Compliance Certificate

Project Title: The Augusta Model

Report Date: 03/02/07

Data filename: Y:\REScheck\DEWEY\Raven's Claw\Augusta.rck

Energy Code: **2006 IECC**
 Location: **Pottstown, Pennsylvania**
 Construction Type: **Single Family**
 Building Orientation: **Bldg. orientation unspecified**
 Conditioned Floor Area: **2697 ft2**
 Glazing Area Percentage: **14%**
 Heating Degree Days: **5863**
 Climate Zone: **4**

Construction Site:
 The Links at Raven's Claw

Owner/Agent:
 Dewey Homes, L.P.

Designer/Contractor:
 Prepared by The OMNIA Group, Inc

Compliance: Passes on UA Maximum UA: **609** Your Home UA: **594 --> 2.6% Better Than Code**

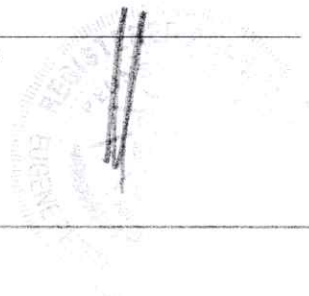
Assembly	Gross Area or Perimeter	Cavity R-Value	Cont. R-Value	Glazing or Door U-Factor	UA
Ceiling 1: Flat Ceiling or Scissor Truss:	1725	30.0	0.0		60
Wall 1: Wood Frame, 16" o.c.: Orientation: Unspecified	1728	13.0	0.0		142
Wall 2: Wood Frame, 16" o.c.: Orientation: Unspecified	1740	13.0	0.0		101
Window 1: Vinyl Frame:Double Pane: SHGC: 0.32 Orientation: Unspecified	470			0.330	155
Door 2: Solid: Orientation: Unspecified	20			0.130	3
Door 3: Glass: SHGC: 0.32 Orientation: Unspecified	20			0.350	7
Basement Wall 1: Solid Concrete or Masonry: Orientation: Unspecified Wall height: 7.8' Depth below grade: 7.0' Insulation depth: 4.0'	1388	0.0	13.0		102
Window 2: Metal Frame, Single Pane: SHGC: 1.00 Orientation: Unspecified	11			1.000	11
Floor 1: All-Wood Joist/Truss, Over Unconditioned Space:	398	30.0	0.0		13
Furnace 1: Forced Hot Air: 90 AFUE					
Air Conditioner 1: Electric Central Air: 13 SEER					

Compliance Statement: The proposed building design described here is consistent with the building plans, specifications, and other calculations submitted with the permit application. The proposed building has been designed to meet the 2006 IECC requirements in REScheck Version 4.0.1 and to comply with the mandatory requirements listed in the REScheck Inspection Checklist.

Name - Title

Signature

Date





REScheck Software Version 4.0.1 Inspection Checklist

Date: 03/02/07

Ceilings:

- Ceiling 1: Flat Ceiling or Scissor Truss, R-30.0 cavity insulation
Comments: Roof

Above-Grade Walls:

- Wall 1: Wood Frame, 16" o.c., R-13.0 cavity insulation
Comments: 2nd Floor
- Wall 2: Wood Frame, 16" o.c., R-13.0 cavity insulation
Comments: 1st Floor

Basement Walls:

- Basement Wall 1: Solid Concrete or Masonry, 7.8' ht / 7.0' bg / 4.0' insul, R-13.0 continuous insulation
Comments: Basement (FSK Insulation)

Windows:

- Window 1: Vinyl Frame:Double Pane, U-factor: 0.330
For windows without labeled U-factors, describe features:
#Panes ____ Frame Type _____ Thermal Break? ____ Yes ____ No
Comments: 1st & 2nd Floor Windows
- Window 2: Metal Frame, Single Pane, U-factor: 1.000
For windows without labeled U-factors, describe features:
#Panes ____ Frame Type _____ Thermal Break? ____ Yes ____ No
Comments: Basement Windows

Note: Up to 15 sq.ft. of glazed fenestration per dwelling is exempt from U-factor and SHGC requirements.

Doors:

- Door 2: Solid, U-factor: 0.130
Comments: Front Door
- Door 3: Glass, U-factor: 0.350
Comments: Rear Door

Floors:

- Floor 1: All-Wood Joist/Truss, Over Unconditioned Space, R-30.0 cavity insulation
Comments: 2nd Floor over garage
Floor insulation is installed in permanent contact with the underside of the subfloor decking.

Heating and Cooling Equipment:

- Furnace 1: Forced Hot Air: 90 AFUE or higher
Make and Model Number: _____
- Air Conditioner 1: Electric Central Air: 13 SEER or higher
Make and Model Number: _____

Air Leakage:

- Joints, penetrations, and all other such openings in the building envelope that are sources of air leakage are sealed.

- Recessed lights are either 1) Type IC rated with enclosures sealed/gasketed against leaks to the ceiling, or 2) Type IC rated and ASTM E283 labeled, or 3) installed inside an air-tight assembly with a 0.5" clearance from combustible materials and a 3" clearance from insulation.

Materials Identification:

- Materials and equipment are identified so that compliance can be determined.
- Manufacturer manuals for all installed heating and cooling equipment and service water heating equipment have been provided.
- Insulation R-values, glazing U-factors, and heating equipment efficiency are clearly marked on the building plans or specifications.
- Insulation is installed according to manufacturer's instructions, in substantial contact with the surface being insulated, and in a manner that achieves the rated R-value without compressing the insulation.

Duct Insulation:

- Ducts in unconditioned spaces are insulated to R-8.
- Ducts in floor trusses are insulated to R-6.

Duct Construction:

- Air handlers, filter boxes, and duct connections to flanges of air distribution system equipment or sheet metal fittings are sealed and mechanically fastened.
- All joints, seams, and connections are made substantially airtight with tapes, gasketing, mastics (adhesives) or other approved closure systems. Tapes and mastics are rated UL 181A or UL 181B.
- Building framing cavities are not used as supply ducts.
- Automatic or gravity dampers are installed on all outdoor air intakes and exhausts.
- Additional requirements for tape sealing and metal duct crimping are included by an inspection for compliance with the International Mechanical Code.

Temperature Controls:

- Thermostats exist for each separate HVAC system. A manual or automatic means to partially restrict or shut off the heating and/or cooling input to each zone or floor is provided.

Heating and Cooling Equipment Sizing:

- Additional requirements for equipment sizing are included by an inspection for compliance with the International Mechanical Code.

Circulating Hot Water Systems:

- Circulating hot water pipes are insulated to R-2.
- Circulating hot water systems include an automatic or accessible manual switch to turn off the circulating pump when the system is not in use.

Heating and Cooling Piping Insulation:

- HVAC piping conveying fluids above 105 degrees F or chilled fluids below 55 degrees F are insulated to R-2.

Certificate:

- A permanent certificate is provided on or in the electrical distribution panel listing the predominant insulation R-values; window U-factors; type and efficiency of space-conditioning and water heating equipment.

NOTES TO FIELD: (Building Department Use Only)



2006 IECC Energy Efficiency Certificate

Insulation Rating	R-Value
-------------------	---------

Ceiling / Roof	30.00
Wall	13.00
Floor / Foundation	30.00
Ductwork (unconditioned spaces):	_____

Glass & Door Rating	U-Factor	SHGC
---------------------	----------	------

Window	0.33	0.32
Door	0.13	0.32

Heating & Cooling Equipment	Efficiency
-----------------------------	------------

Forced Hot Air Furnace	90 AFUE
Electric Central Air Conditioner	13 SEER
Water Heater:	_____

Name: _____ Date: _____

Comments:

INTER-OFFICE RECEIPT TRANSMITTAL

Name: Dewey Hornes
 Development: Raven's Claw
 Location: 260 Masters Dr.

Date: 4/09/2007
 Lot #: 107
 B _____ U _____

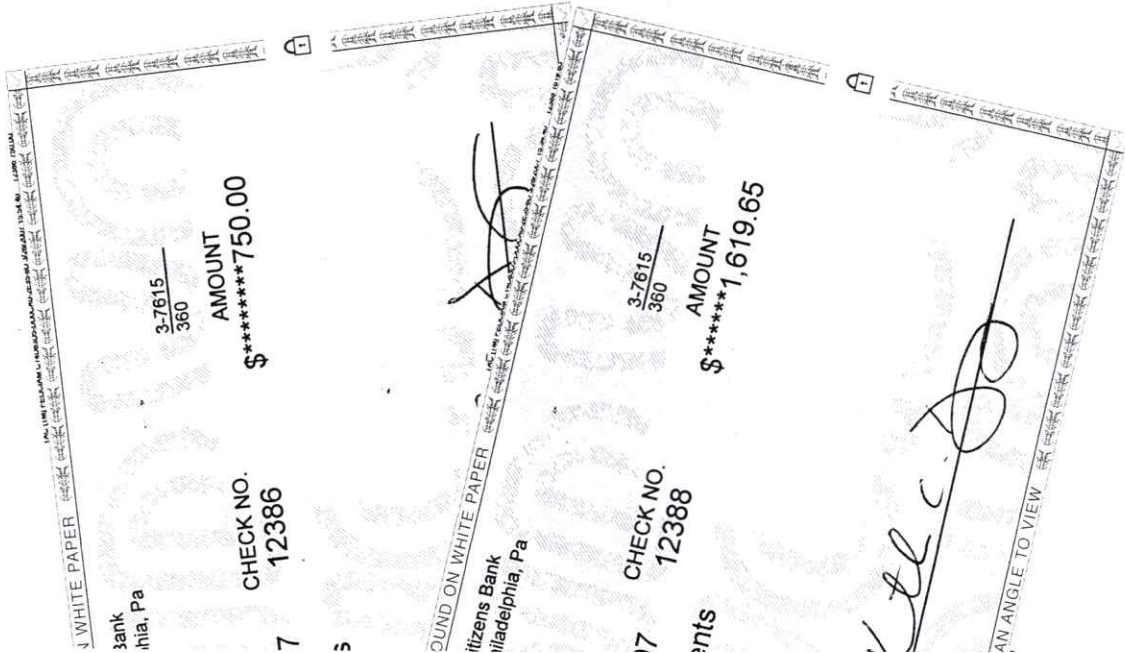
- Check #: _____
- 107 - Cont. Reg. _____
 - 113 - Solicitation _____
 - 109 - Home Occup. Permit _____
 - 114 - Trailer Park _____
 - 801 - Highway Occup. Permit _____
 - 115 - Zoning Permit _____
 - 108 - Sign Permit _____
 - 110 - Zoning Hearing _____
 - 116 - Petition to Re-Zone _____
 - 904 - Conditional Use Hearing _____
 - 111 - Sale of Codes/Maps _____
 - _____
 - 901 - Copying Fees _____
 - 117 - Alarm Permit _____
 - 106 - Grading Permit _____

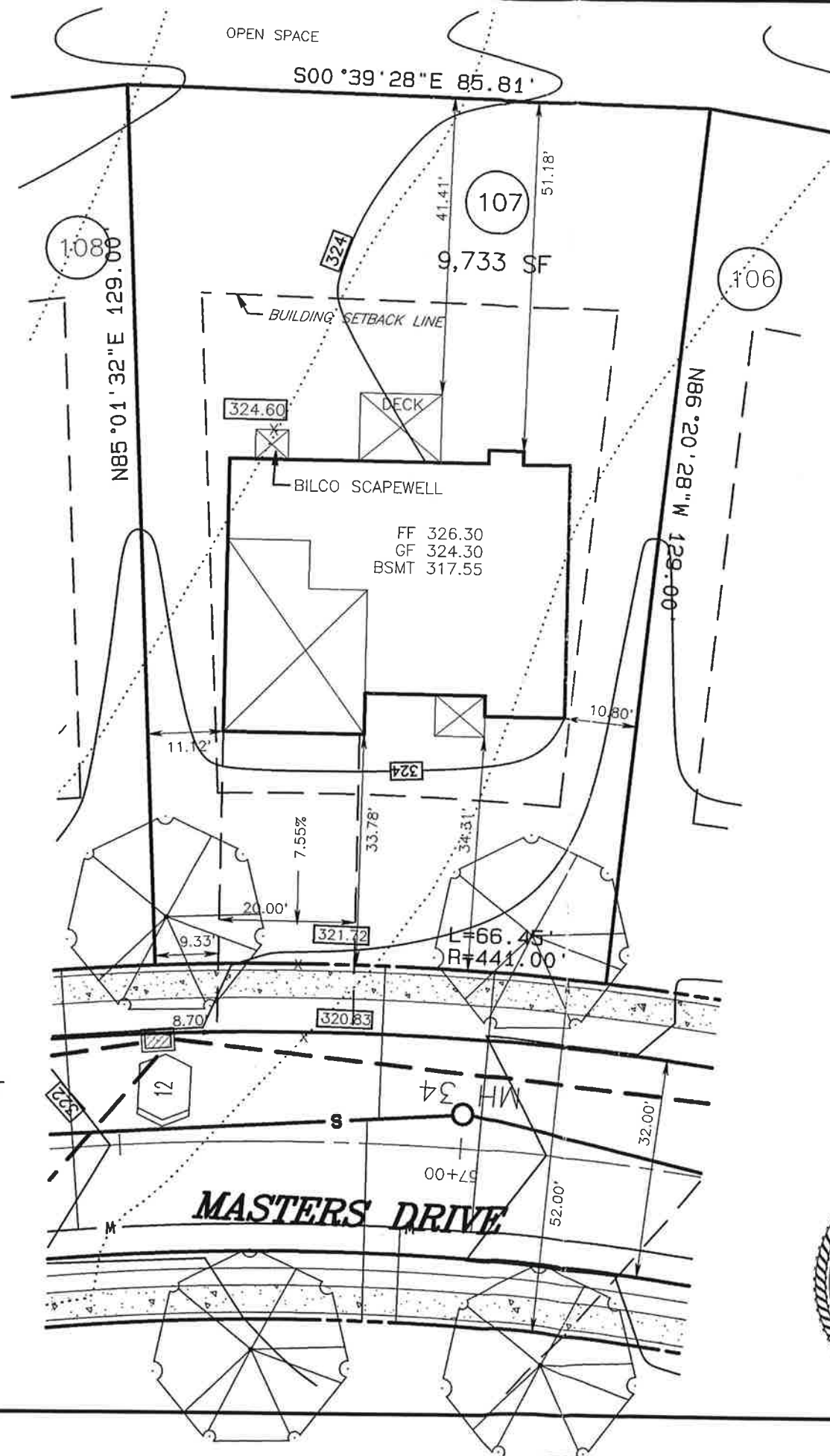
- Commercial or Residential: SFD
 Sq. Ft.: 3299
 Cost of Improvement: _____
 101 - Building Permit \$ 1154.65
 Cost for Electrical 3700
 102 - Electrical Permit \$ 84.00
 Number of Plumbing Fixtures: 20
 103 - Plumbing Permit \$ 200.00
 104 - Use & Occup. Permit: \$ 35.00
 Cost for Mechanical: 6000
 105 - Mechanical Permit: \$ 130.00
 122 - Training Fee: 16.00
 119 - Building Plan Review: _____
 Other _____
 716 - Grading Application Escrow _____

Money Received for the funds listed below MUST be on separate Checks.

- 701 - Road Improvement: \$ 750.00
- 702 - Act 209: _____
- 703 - Lewis Road: _____
- 708 - Open Space: _____

TOTAL \$ 2369.65





GENERAL NOTES:

1. BASE PLAN INFORMATION TAKEN FROM FINAL SITE PLANS PREPARED FOR HERITAGE HILLS GOLF CLUB, PREPARED BY VAN CLEEF ENGINEERING ASSOCIATES, DATED SEPTEMBER 12, 2000, LAST REVISED JULY 27, 2003.

BUYERS ACKNOWLEDGEMENT
LOT GRADING

I (WE) AM/ARE THE PURCHASER'S OF LOT NO. 107 IN THE RAVEN'S CLAW COMMUNITY IN LIMERICK TOWNSHIP, MONTGOMERY COUNTY, PENNSYLVANIA. I (WE) HEREBY ACKNOWLEDGE THAT I (WE) HAVE REVIEWED THE LOCATION OF THE HOUSE AS SHOWN ON THE PLOT PLAN AND ARE SATISFIED THAT THE GRADING OF THE LOT SHALL BE CONSISTENT WITH THE PLOT PLAN THAT WE HAVE BEEN PROVIDED BY THE DEVELOPER, DEWEY HOMES LP.

DATE: _____

BUYERS SIGNATURE _____

BUYERS SIGNATURE _____

GOLF COURSE RESIDENTIAL
COMMUNITY OPTION ZONING DATA

MIN. FRONT YARD	25 FT.
MIN. SIDE YARD	10 FT.
MIN. REAR YARD	30 FT.
MAX. BLDG. COVER	35%

APPLICANT

DEWEY HOMES
435 DEVON PARK DRIVE
SAFEGUARD CAMPUS
BUILDING 200
WAYNE, PA 19087

LOT 107 - RAVEN'S CLAW
260 MASTERS DRIVE
AUGUSTA MODEL
COLONIAL ELEVATION
BLDG. COVERAGE: 19.7%



GRAPHIC SCALE

Edward B. Walsh & Associates, Inc. does not guarantee the accuracy of the locations for existing subsurface utility lines, structures, etc. shown on the plans, nor does E. B. Walsh & Assoc., Inc. guarantee that all subsurface utility lines, structures, etc. are shown.

Contractor shall verify the location and elevations of all subsurface utility lines, structures, etc. before the start of work, by calling the Pennsylvania One Call System at 1-800-242-1776.



3. 01/25/07 REVISE PORCH PER DEWEY HOMES.
2. 01/17/07 CHANGE ELEVATION, DECK, BSMT ELEV & BILCO PER DEWEY REQUEST.
1. 12/08/06 ADJUST DRIVEWAY LOCATION & ADD DIMENSIONS PER DEWEY REQUEST.

BUILDING PERMIT PLAN
FOR
THE LINKS AT RAVEN'S CLAW
LOT 107

LIMERICK TOWNSHIP

CHESTER COUNTY, PA.

Edward B. Walsh & Associates, Inc.
CIVIL ENGINEERS & SURVEYORS

Lionville Professional Center
125 Dowlin Forge Road
Exton, PA 19341
Phone (610) 903-0060
Fax (610) 903-0080



Project-	2806
Date-	11-28-06
Scale-	1" = 20'
Drawn-	CE
Checked-	DHD
Sheet-	1 OF 1

Plotted: Thu Jan 25, 2007

File: F:\JB\2806\2806-B6.pro

Limerick Township Municipal Authority

CK# 12111
50.00
2-22-07

Connection Permit

Authority supervised on site inspection must take place at the time of connection.

Permit No. 4930 Dewey Homes
Issued to Orleans Development-Heritage Hills (owner) of the
Property situated at 260 Masters Dr.

_____, for connection of a building sewer with the public sewer
system which abuts the property on Lot 107

(list street where connection will be made)

I, (we), the undersigned applicant(s) and property owner(s), do hereby agree to permit any member, agent, servant, or employee of Limerick Township Municipal Authority to enter upon my property, as described above, during the course of connection to the public waste water system. At the completion of said work, I, (We), agree to permit any member, agent, servant, or employee of Limerick Township Municipal Authority to enter upon my property for final inspection and any subsequent reinspection of said work.

I, (We), also acknowledge and agree that Limerick Township Municipal Authority is not responsible or liable for any action or order by any governmental regulatory agency which affects or requires the limitation or cessation of said permit or the benefits of the same.

I, (We), the undersigned applicant(s), do hereby agree to abide by all the provisions of all the rules and regulations of Limerick Township Municipal Authority insofar as the above mentioned work is concerned, and further agree to properly safeguard the public during the course of said work covered by this permit.

Connection/tapping fee paid: 3690.00 Date paid 8-28-06

Special Notes For Sewage Enforcement Officer _____

[Signature]
Applicant Signature

** SEE ATTACHED ADDENDUM

Applicant Signature
[Signature]
Issuing Authority

Date 2-22-07

Date Plumbing inspected 6-1-07 By Thomas M DiMaggio

ps#18
P.H.

RECEIVED

APR 9 9 2007

LIMERICK TOWNSHIP

APPLICATION FOR ZONING PERMIT

DATE: _____ PERMIT NO. _____

APPLICANT: DHLP Limerick Golf Community LP
(Printed Name)

APPLICANT SIGNATURE: Yancy L. Jant

PHONE NO(S): 610-535-6049

I DO HEREBY MAKE APPLICATION TO USE THE FOLLOWING PROPERTY:

OWNER NAME: DHLP Limerick Golf Community, LP

PROPERTY ADDRESS: 260 Masters Drive
Pottstown, PA 19464

^{Subdivision}
BLOCK: The Links @ Ravensclaw ^{lots} 107

APPLICATION IS FOR THE PLACEMENT OF:

STRUCTURE

SQ. FOOTAGE

- SHED _____
- PATIO _____
- DECK X _____
- GARAGE _____
- POLE BARN _____

_____ 10'x12' = 120' ϕ as per plot plan

TO BE COMPLETED BY ZONING OFFICER:

PROPERTY ZONING: R-1 PERMITTED USE: X YES ___ NO

Bob Bilbrot _____
CODE ENFORCEMENT/ZONING OFFICER DATE

ZONING OFFICER'S COMMENTS: _____

FEE: \$25.00 UP TO AND INCLUDING 96 SQ. FT.
\$60.00 OVER 96 SQ. FT. UP TO AND INCLUDING 1,000 SQ. FT.

AMT. RECEIVED: _____ CHECK # _____ CASH _____

INTER-OFFICE RECEIPT TRANSMITTAL

Name: Dewey Homes
 Development: Raven's Claw
 Location: 260 Masters Dr.

Date: 4/09/2007
 Lot #: _____
 B _____ U _____

- Check #: _____
- 107 - Cont. Reg. _____
 - 113 - Solicitation _____
 - 109 - Home Occup. Permit _____
 - 114 - Trailer Park _____
 - 801 - Highway Occup. Permit _____
 - 115 - Zoning Permit \$ 600.00
 - 108 - Sign Permit _____
 - 110 - Zoning Hearing _____
 - 116 - Petition to Re-Zone _____
 - 904 - Conditional Use Hearing _____
 - 111 - Sale of Codes/Maps _____
 - 901 - Copying Fees _____
 - 117 - Alarm Permit _____
 - 106 - Grading Permit _____

- Commercial or Residential: Deck
- Sq. Ft.: 120
- Cost of Improvement: _____
 - 101 - Building Permit _____
 - Cost for Electrical _____
 - 102 - Electrical Permit _____
 - Number of Plumbing Fixtures: _____
 - 103 - Plumbing Permit _____
 - 104 - Use & Occup. Permit: _____
 - Cost for Mechanical: _____
 - 105 - Mechanical Permit: _____
 - 122 - Training Fee: _____
 - 119 - Building Plan Review: _____
 - Other _____
 - 716 - Grading Application Escrow _____

Money Received for the funds listed below MUST be on separate Checks.

- 701 - Road Improvement: _____
- 702 - Act 209: _____
- 703 - Lewis Road: _____
- 708 - Open Space: _____

TOTAL \$ 600.00

THE FACE OF THIS DOCUMENT HAS A COLORED BACKGROUND ON WHITE PAPER

Dewey Homes
 435 Devon Park Drive
 Building 200
 Wayne, Pa 19087
 610-535-6002

Citizens Bank
 Philadelphia, Pa

	DATE	CHECK NO.	AMOUNT
	March 26, 2007	12387	\$*****60.00

Pay: *****Sixty dollars and no cents

PAY TO THE ORDER OF
 Limerick Township
 Finance Department
 646 W. Ridge Pike
 Limerick, PA 19468

[Handwritten Signature]



LIMERICK TOWNSHIP
FINAL GRADING PERMIT APPROVAL

Application Number: _____

Property Address or
Lot Number:

LOT # 107 / 260 MASTERS

Date of Inspection:

07.26.2007

Builder, Developer,
Or Subcontractor:

RAVENS CRAW / DEWEY.

Name of Inspector:

J.T. PATRICK

Approved by:

J.T. PATRICK 

Remarks and/or
Conditions:

ALL HAS BEEN APPROVED.
FOR GRADING @ THE
ABOVE MENTIONED LOT.

RECEIVED

JAN 10 2007

LIMERICK TOWNSHIP

For Departmental Use Only

Permit Number: GA - No. GP07-01

Date Issued: _____

Permit Fee: \$ 60.00

LIMERICK TOWNSHIP
Grading Permit Application

I. LOCATION OF GRADING

Address: 260 Masters Drive City: Pottstown, PA 19464

Subdivision: The Links @ Raven's Claw Parcel #: _____

II. IDENTIFICATION - To be completed by all applicants

Owner Name: DHLP Limerick Golf Community, LP Phone: 610-535-6002

Address: 435 Devon Park Drive, Bldg 200

City: Wayne, PA Zip Code: 19087

Email: nancy.yost@deweyhomes.com

Contractor Name: SAME AS ABOVE Phone: _____

Address: _____

City: _____ Zip Code: _____

Email: _____

Design Professional Name: E.B. Walsh: Assoc. Phone: 610-903-0060

Address: 125 Dowlin Forge Road

City: Exton, PA Zip Code: 19341

Email: ddaley@ebwalshinc.com

III. GRADING PLAN (Two Copies of Application and Grading Plan Required)

Plan Title: Building Permit Plan for Raven's Claw Lot #107

Date: 12-8-06 Last Revision: _____

Registered Design Professional: E.B. Walsh: Associates

NOTE: The plan shall show all of the following information with the application: present contours; proposed contours; all lot lines; minimum building setback lines; streets; driveways; building(s) with finished floor and garage floor elevations (basement floor if a walk-out basement); trees over 8" in diameter; description of soil type; and classification details with location of proposed drainage facilities. All plans **shall be** dated with all revisions and must bear the names of: (1) the Person who Prepared the Plan; (2) the Applicant; and (3) the Owner of the Land.

IV. EROSION AND SEDIMENTATION PLAN

If an erosion and sedimentation control plan has not previously been approved, it **must** accompany this application.

Erosion and Sedimentation Control Plan has been previously approved. Yes No

Title: Susan Greth, Environmental Control Technician

Date: 7/30/03 Date Approved: 7/30/03

Erosion and Sedimentation Control Plan attached. Yes No

Estimated Start Date: 3-20-07 Estimated Completion Date: _____

V. PURPOSE

State the purpose for the Grading Application: Construction of a single family detached dwelling

VI. FILL MATERIAL

No Grading Permit shall be issued for the filling of materials other than clean fill.

VII. PERMIT FEES

Permit fees **must be** submitted with the permit application. Compute the appropriate permit fee and engineering escrow amount from the schedule below and remit **TWO (2)** separate checks with this application – One each for the Permit Fee and the Engineering Escrow Fee.

Both checks must be made payable to "Limerick Township". Please be advised, deposit of the checks representing the permit fee and engineering escrow fee amounts for this application **does not** constitute approval or granting of same by Limerick Township.

$$\begin{array}{rcl}
 \$ \underline{600.00} & + & \$ \underline{275.00} & = & \$ \underline{335.00} \\
 \text{Permit Fee} & & \text{Engineering Escrow Fee} & & \text{TOTAL}
 \end{array}$$

Grading Permit Fee Schedule

(As Per Chapter 147 of the Limerick Township Code)

	Permit Fee	Engineering Review/Insp. Escrow
Residential	\$60.00	\$275.00
Multi-Use Residential	\$120.00	\$750.00
Non-Residential/Commercial/Industrial		
0 – 5 Acres	\$75.00	\$1,000.00
5 or More Acres	\$75.00 + \$12.00/Acre	\$1,000.00

VIII. SIGNATURE

I hereby certify the above information to be correct and hereby state that the work to be performed will be as presented herein.

Signature of Applicant: Nancy L. Yost

Name of Applicant: Nancy L. Yost, Dewey Homes, LP

Address: 435 Devon Park Drive, Bldg 200, Wayne, PA 19087

Phone: 610-535-6002 Email: nancy.yost@deweyhomes.com

Date: 1/9/07

IX. VALIDATION (For Department Use Only)

Permit Number: _____

APPROVED BY

Date Issued: _____

Permit Fee: \$ 60 + \$275 escrow

Check Nos. 11792 / 11794

TITLE

Date: _____

Required Information: Yes _____ No _____

Township Engineer Approval: Yes _____ No _____

END APPLICATION

INTER-OFFICE RECEIPT TRANSMITTAL

Name: Dewey Horned Date: 1/10/07
 Development: Raven's claw Lot #: 107
 Location: 260 Masters Dr. B U
 Check #: 11792 / 11794

- | | |
|--|---|
| 107 - Cont. Reg. _____
113 - Solicitation _____
109 - Home Occup. Permit _____
114 - Trailer Park _____
801 - Highway Occup. Permit _____
115 - Zoning Permit _____
108 - Sign Permit _____
110 - Zoning Hearing _____
116 - Petition to Re-Zone _____
904 - Conditional Use Hearing _____
111 - Sale of Codes/Maps _____

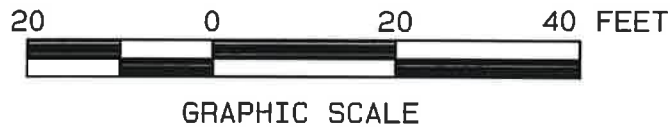
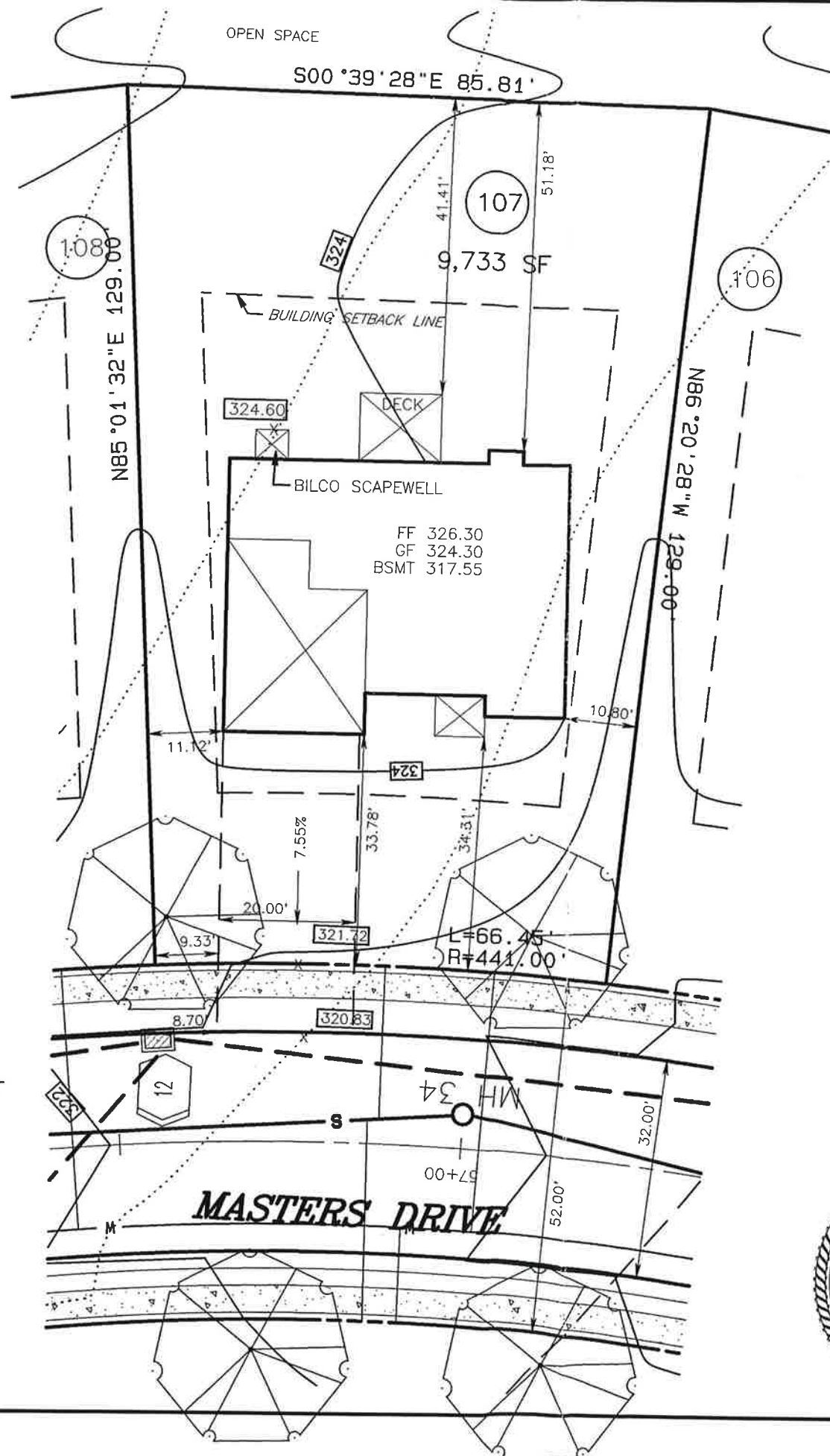
901 - Copying Fees _____
117 - Alarm Permit _____
106 - Grading Permit <u>\$ 60.00</u> | Commercial or <u>Residential</u> <u>SFD</u>
Sq. Ft.: _____
Cost of Improvement: _____
101 - Building Permit _____
Cost for Electrical _____
102 - Electrical Permit _____
Number of Plumbing Fixtures: _____
103 - Plumbing Permit _____
104 - Use & Occup. Permit _____
Cost for Mechanical: _____
105 - Mechanical Permit _____
122 - Training Fee: _____
119 - Building Plan Review: _____
Other _____
716 - Grading Application Escrow <u>\$ 275.00</u> |
|--|---|

Money Received for the funds listed below MUST be on separate Checks.

- | | |
|-------------------------------|--------------------------|
| 701 - Road Improvement: _____ | 702 - Act 209: _____ |
| 703 - Lewis Road: _____ | 708 - Open Spaces: _____ |

TOTAL \$ 335.00





Edward B. Walsh & Associates, Inc. does not guarantee the accuracy of the locations for existing subsurface utility lines, structures, etc. shown on the plans, nor does E. B. Walsh & Assoc., Inc. guarantee that all subsurface utility lines, structures, etc. are shown.

Contractor shall verify the location and elevations of all subsurface utility lines, structures, etc. before the start of work, by calling the Pennsylvania One Call System at 1-800-242-1776.

GENERAL NOTES:

1. BASE PLAN INFORMATION TAKEN FROM FINAL SITE PLANS PREPARED FOR HERITAGE HILLS GOLF CLUB, PREPARED BY VAN CLEEF ENGINEERING ASSOCIATES, DATED SEPTEMBER 12, 2000, LAST REVISED JULY 27, 2003.

BUYERS ACKNOWLEDGEMENT
LOT GRADING

I (WE) AM/ARE THE PURCHASER'S OF LOT NO. 107 IN THE RAVEN'S CLAW COMMUNITY IN LIMERICK TOWNSHIP, MONTGOMERY COUNTY, PENNSYLVANIA. I (WE) HEREBY ACKNOWLEDGE THAT I (WE) HAVE REVIEWED THE LOCATION OF THE HOUSE AS SHOWN ON THE PLOT PLAN AND ARE SATISFIED THAT THE GRADING OF THE LOT SHALL BE CONSISTENT WITH THE PLOT PLAN THAT WE HAVE BEEN PROVIDED BY THE DEVELOPER, DEWEY HOMES LP.

DATE: _____

BUYERS SIGNATURE _____

BUYERS SIGNATURE _____

GOLF COURSE RESIDENTIAL
COMMUNITY OPTION ZONING DATA

MIN. FRONT YARD	25 FT.
MIN. SIDE YARD	10 FT.
MIN. REAR YARD	30 FT.
MAX. BLDG. COVER	35%

APPLICANT

DEWEY HOMES
435 DEVON PARK DRIVE
SAFEGUARD CAMPUS
BUILDING 200
WAYNE, PA 19087

LOT 107 - RAVEN'S CLAW
260 MASTERS DRIVE
AUGUSTA MODEL
COLONIAL ELEVATION
BLDG. COVERAGE: 19.7%

3. 01/25/07 REVISE PORCH PER DEWEY HOMES.
2. 01/17/07 CHANGE ELEVATION, DECK, BSMT ELEV & BILCO PER DEWEY REQUEST.
1. 12/08/06 ADJUST DRIVEWAY LOCATION & ADD DIMENSIONS PER DEWEY REQUEST.



BUILDING PERMIT PLAN
FOR
THE LINKS AT RAVEN'S CLAW
LOT 107

LIMERICK TOWNSHIP

CHESTER COUNTY, PA.

Edward B. Walsh & Associates, Inc.
CIVIL ENGINEERS & SURVEYORS

Lionville Professional Center
125 Dowlin Forge Road
Exton, PA 19341
Phone (610) 903-0060
Fax (610) 903-0080



Project-	2806
Date-	11-28-06
Scale-	1" = 20'
Drawn-	CE
Checked-	DHD
Sheet-	1 OF 1

Plotted: Thu Jan 25, 2007

File: F:\JB\2806\2806-B6.pro



Patio Permit
Limerick Township

646 W. Ridge Pike
Limerick, PA 19468

Phone: 610-495-0951 Fax: 610-495-0952

Department Use Only
Permit #: 08-1733
Approved Date: 9/3/2008
Issued By: Bob Bieber

Job Site Information		Owner Information	
Address: 260 MASTERS DR		Name: Koenck, Michael	
City: Limerick	State: PA	Address: 260 Masters Dr.	
Zone: R1		City/State/Zip: Pottstown, PA 19464	
Subdivision:		Telephone: 484-624-5545	
Parcel/Block/Unit/Lot: 370002939651/005A/107/0107		Lot Size:	
Applicant Information		Contractor Information	
Name: Michael Koenck		Name: Murphy Construction	
Address: 260 Masters Dr.		Address: 1908 Glen Eagles Dr.	
City/State/Zip: Pottstown, PA 19464		City/State/Zip: Pottstown, PA 19464	
Telephone: 484-624-5545		Telephone: 484-429-3839	
Construction Type: Land Use:		Use Group: Building Use:	

This permit conveys no right to occupy any street, alley or sidewalk or any part thereof, either temporarily or permanently. Encroachments on public property, not specifically permitted under the building code, must be approved by the jurisdiction. Street or alley grades as well as depth and location of public sewers may be obtained from the Department of Public Works. The issuance of this permit does not release the applicant from the conditions of any applicable subdivision restrictions.

1. All applicable inspections must be called for with a minimum of twenty-four (24) hours notice to the building department.
2. Approved plans must be retained on the job and this card kept posted until final inspection has been made. Where a certificate of occupancy is required, such building shall not be occupied until final inspection has been made.
3. Work shall not proceed until the inspector has approved the various stages of construction.
4. Plumbing/Sewer Permits - A house trap with a fresh air vent and clean out is required on all buildings.
5. Permit will become null and void if construction work is not started within six months of the date the permit is issued, as noted above.

Description of Work: Build a 120 sq. ft. patio per plans submitted and Limerick Township building/zoning regulations. Project Cost: 1,000.00

Permit Fees

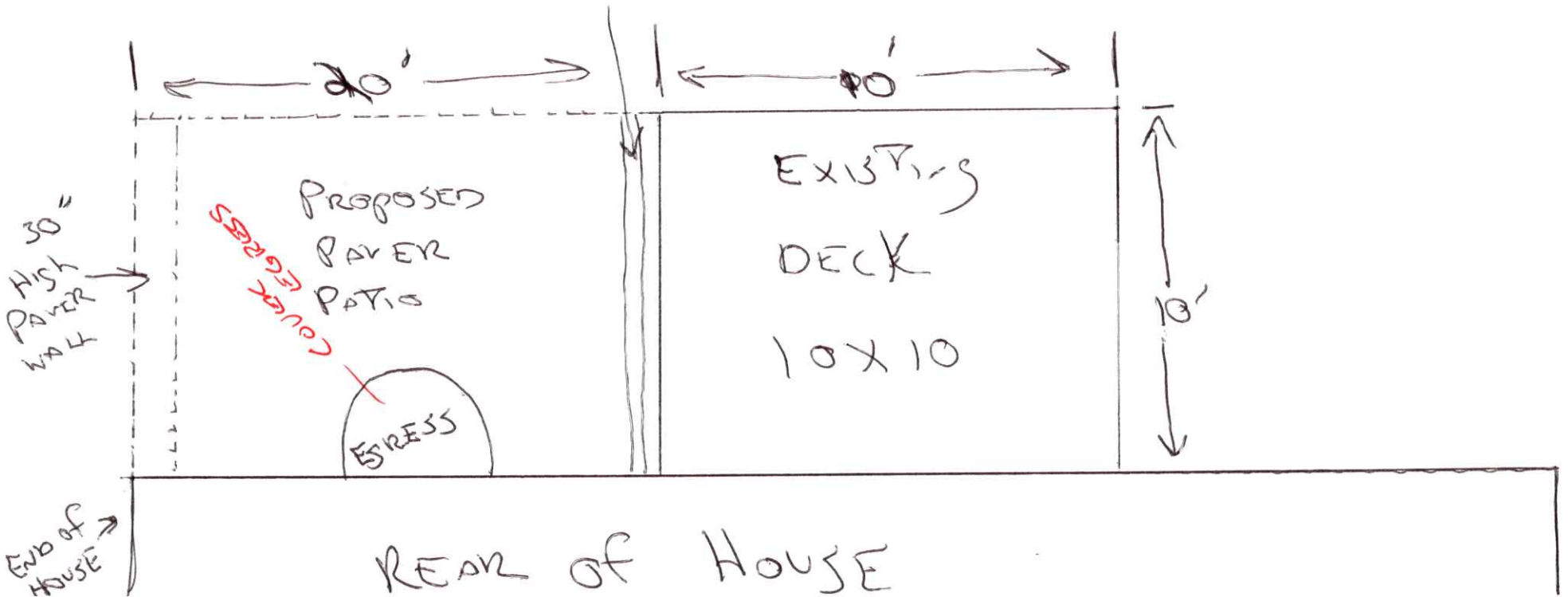
Description	Work Being Done By	Units	Cost @	Sum
PA State Training Fee		1.00	\$4.00 per 1.00	\$4.00
New Construction Res.		120.00	\$0.35 per 1.00	\$42.00

Signature: <u>Amanda Matraw</u>	Grand Total: \$46.00
Date: <u>9/3/08</u>	

PAVERS - EP HENRY COVENTRY 1
6x6 AND 6x9 INTERLOCKING
COLOR - HARVEST BLEND
WALL - COVENTRY

YARD

2 STEPS DOWN
FROM ~~DECK~~ DECK TO PATIO



LIMERICK TOWNSHIP

APPLICATION FOR BUILDING PERMIT

646 West Ridge Pike, Limerick, PA 19467 610-495-6432 FAX 610-495-0952

LOCATION OF BUILDING	ADDRESS 260 MASTERS (RAVENS (LAW))			
	Number	Street	Town	
	BETWEEN: _____ AND _____		ZONING	
	Cross Street	Cross Street		
	SUBDIVISION	LOT 107	BLOCK	UNIT

- | | |
|---|--|
| 01) <input type="checkbox"/> NEW SINGLE FAMILY DWELLING
02) <input type="checkbox"/> NEW MULT. FAMILY DWELLING
04) <input type="checkbox"/> NEW INSTITUTIONAL BUILDING
05) <input type="checkbox"/> NEW PUBLIC BUILDING

11) <input checked="" type="checkbox"/> ADDITION SINGLE FAMILY DWELLING
12) <input type="checkbox"/> ADDITION MULT. FAMILY DWELLING
14) <input type="checkbox"/> ADDITION INSTITUTIONAL BUILDING
15) <input type="checkbox"/> ADDITION PUBLIC BUILDING

21) <input type="checkbox"/> ALTERATION SINGLE FAMILY DWELLING
22) <input type="checkbox"/> ALTERATION MULT. FAMILY DWELLING
24) <input type="checkbox"/> ALTERATION INSTITUTIONAL BUILDING
25) <input type="checkbox"/> ALTERATION PUBLIC BUILDING

31) <input type="checkbox"/> REPAIR SINGLE FAMILY DWELLING
32) <input type="checkbox"/> REPAIR MULT. FAMILY DWELLING
34) <input type="checkbox"/> REPAIR INSTITUTIONAL BUILDING
35) <input type="checkbox"/> REPAIR PUBLIC BUILDING

<input type="checkbox"/> OTHER _____ | 52) <input type="checkbox"/> DEMOLITION
53) <input type="checkbox"/> FIRE REPAIR
54) <input type="checkbox"/> SWIMMING POOL
55) <input type="checkbox"/> TANKS / PUMP
56) <input type="checkbox"/> TENNIS COURT
57) <input type="checkbox"/> SIGN / AWNING
58) <input type="checkbox"/> OTHER (BLDG.) <u>PAVER PATO</u>

<input type="checkbox"/> TEMPORARY TENT
<input type="checkbox"/> SATELLITE ANTENNA
61) <input type="checkbox"/> H.V.A.C. SYSTEM
62) <input type="checkbox"/> A/C UNIT(S) ONLY
63) <input type="checkbox"/> GAS HEATER
64) <input type="checkbox"/> OIL HEATER
65) <input type="checkbox"/> HEAT PUMP
66) <input type="checkbox"/> CHIMNEY REPAIR |
|---|--|

RECEIVED

SEP 02 2003

LIMERICK TOWNSHIP

OWNERSHIP	COST	COST	CONTRACTOR'S NAME
81) <input checked="" type="checkbox"/> PRIVATE (IND., INST., CORP.) 82) <input type="checkbox"/> PUBLIC (LOCAL, STATE, FED.)	98) COST OF CONST.		
PROPOSED USE OF PROPERTY	ELECTRICAL		
91) <input checked="" type="checkbox"/> SINGLE FAMILY DWELLING 92) <input type="checkbox"/> MULT. FAMILY DWELLING (#Units _____) 93) <input type="checkbox"/> BUSINESS (Type) _____ 94) <input type="checkbox"/> INSTITUTIONAL BUILDING 95) <input type="checkbox"/> OTHER (Type) _____ 96) <input type="checkbox"/> PUBLIC BUILDING	PLUMBING		
	H.V.A.C.		
	99) TOTAL COST		

FILL OUT SELECTED CHARACTERISTICS OF BUILDING

PRINCIPAL TYPE OF FRAME <input type="checkbox"/> MASONRY (wall bearing) <input checked="" type="checkbox"/> WOOD FRAME <input type="checkbox"/> STRUCTURAL STEEL <input type="checkbox"/> REINFORCED CONCRETE <input type="checkbox"/> OTHER Specify _____	TYPE OF SEWAGE DISPOSAL <input checked="" type="checkbox"/> PUBLIC OR PRIVATE CO. <input type="checkbox"/> INDIVIDUAL (septic tank, etc.) TYPE OF WATER SUPPLY <input checked="" type="checkbox"/> PUBLIC OR PRIVATE CO. <input type="checkbox"/> INDIVIDUAL (well, cistern)	DIMENSIONS NUMBER OF STORIES TOTAL SQ. FT. OF FLOORAREA ALL FLOORS, BASED ON EXTERIOR DIMENSIONS TOTAL LAND AREA, SQ. FT.	
PRINCIPAL TYPE OF HEATING FUEL <input type="checkbox"/> GAS <input type="checkbox"/> OIL <input type="checkbox"/> ELECTRICITY <input type="checkbox"/> COAL <input type="checkbox"/> OTHER Specify _____	TYPE OF MECHANICAL WILL THERE BE CENTRAL AIR CONDITIONING? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO WILL THERE BE AN ELEVATOR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	NUMBER OF OFF-STREET PARKING SPACES (Enclosed) OUTDOORS RESIDENTIAL BLDGS. ONLY NUMBER OF BEDROOMS NUMBER OF BATHROOMS Full Partial	2 2


Appeal No.

Plan No.

Permit No.

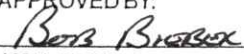
Name	Mailing Address - Number, Street, City, State, Zip	Tel. No.
1. Property Owner KOENIG	260 MASTERS (RAVENS CLAW) LIMERICK, PA	484-624-5545
2. Contractor MURPHY CONSTRUCT.	1988 GLEN EAGLES DR. POTTSTOWN, PA. 19464	
3. Architect or Engineer		

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction. The issuance of this building permit authorizes Building and Planning Department employees the right to enter the property at reasonable hours for the purpose of conducting code inspections. The content of the certificate of workers compensation insurance or affidavit on file with Limerick Township is still in effect with no changes in coverage of employees.

Signature of Applicant 	Address	Application Date
Print Name TIMOTHY S. MURPHY	Contact Phone #'s BUS. + CELL - 484-429-3839	

DESCRIBE, IN DETAIL, THE WORK TO BE PERFORMED

INSTALL 10' x 20' PAVER PATIO
ONE END OF PATIO WILL HAVE A 30" WALL
DOWN 10' SIDE.

APPROVED BY: 	PERMIT FEE:	DATE ISSUED: 9-3-08	PERMIT #:
USE GROUP:	FIRE GRADING:	LIVE LOADING:	OCCUPANCY LOAD:

INTER-OFFICE RECEIPT TRANSMITTAL

Name: Murphy Construction Date: 9/02/08

Development: _____ Lot #: _____

Location: 260 Masterson Dr. B _____ U _____

Check #: 105

107 - Cont. Reg. _____

Commercial or Residential: patio

113 - Solicitation _____

Sq. Ft.: 120

109 - Home Occup. Permit _____

Cost of Improvement: _____

114 - Trailer Park _____

101 - Building Permit 42.00

801 - Highway Occup. Permit _____

Cost for Electrical _____

115 - Zoning Permit _____

102 - Electrical Permit _____

108 - Sign Permit _____

Number of Plumbing Fixtures: _____

110 - Zoning Hearing _____

103 - Plumbing Permit _____

116 - Petition to Re-Zone _____

104 - Use & Occup. Permit: _____

904 - Conditional Use Hearing _____

Cost for Mechanical: _____

111 - Sale of Codes/Maps _____

105 - Mechanical Permit: _____

901 - Copying Fees _____

122 - Training Fee: 4.00

117 - Alarm Permit _____

119 - Building Plan Review: _____

106 - Grading Permit _____

Other _____

123 - Grading Application Escrow _____

Money Received for the funds listed below MUST be on separate Checks.

701 - Road Improvement: _____

702 - Act 209: _____

703 - Lewis Road: _____

708 - Open Space: _____

704 - Waiver Fees: _____

TOTAL \$116.00

MURPHY CONSTRUCTION GROUP LLC
1908 GLEN EAGLES DR
POTTSTOWN, PA 19464

105

3-7615/360
661

DATE 9/2/08

PAY TO THE ORDER OF Limerick Township

\$ 46.00

Forty Six

DOLLARS

Citizens Bank
Pennsylvania

Pay to the order of

[Signature]

©2006 American CF

MP

Security features are included. Details on back.



435 Devon Park Drive
 Building 200
 Wayne, Pa. 19087

The AUGUSTA Collection
 Raven's Claw - Master

DRAWING SCALE

1/8" = 1'-0" unless noted otherwise

DRAWING INDEX

COVER SHEET

S-1 SPECIFICATION INFORMATION
 S-1.1 SPECIFICATION INFORMATION
 S-1.2 SPECIFICATION INFORMATION

A-1A FND PLAN COLONIAL
 A-1B FND PLAN MANOR
 A-1C FND PLAN CHATEAU
 A-FB FINISHED BASEMENT

A-2A FIRST FLOOR PLAN COLONIAL
 A-2B FIRST FLOOR PLAN MANOR
 A-2C FIRST FLOOR PLAN CHATEAU

A-3A SECOND FLOOR PLAN COLONIAL
 A-3B SECOND FLOOR PLAN MANOR
 A-3C SECOND FLOOR PLAN CHATEAU

A-4A FRONT ELEVATION COLONIAL
 A-4A.1 SIDE ELEVATIONS COLONIAL
 A-4A.2 REAR ELEVATION COLONIAL

A-4B FRONT ELEVATION MANOR
 A-4B.1 SIDE ELEVATIONS MANOR
 A-4B.2 REAR ELEVATION MANOR

A-4C FRONT ELEVATION CHATEAU
 A-4C.1 SIDE ELEVATIONS CHATEAU
 A-4C.2 REAR ELEVATION CHATEAU

E-1 ELECTRICAL PLANS
 E-2 ELECTRICAL PLANS

D-1 DETAILS
 D-2 DETAILS
 D-3 DETAILS
 D-4 DETAILS
 D-5 DETAILS

CONSTRUCTION DATA

ISSUE DATE FOR REVIEW: 9/2006
 ISSUE DATE:
 REV DATE:
 CODE: IRC 2006

ARCHITECT

Voice: 215/442-1780
 Fax: 215/442-1781
 Web: theomniagroup.com
 323 South York Rd
 Hatboro, Pa 19040
 • ARCHITECTS • BUILDERS • CONSULTANTS

SQUARE FOOTAGE DATA

SQUARE FOOTAGES	
COLONIAL	
1st Floor	1364
2nd Floor	1333
TOTAL LIVING	2697
Expanded Morning Room	add 47
In Law Suite	add 80
Basement	1364
Garage	495

REVISIONS



General	Garage Fire Rating	Concrete	Stairways (Continued)																																									
<p>The General Contractor shall check and verify all existing conditions and dimensions at the site against the drawings and notify the Architect of discrepancies prior to work. All Design changes shall be approved by the Architect.</p> <p>The "Contractor(s)" are responsible for the quality of workmanship and the selected materials for construction. The Architect shall not be responsible for construction means, methods, techniques or safety precautions, for acts of omission by any persons performing any of the work or failure of any of the above to carry out the work in compliance with the contract documents.</p> <p>Each Subcontractor shall obtain necessary permits for their respective trade or work. All contractors to comply with all applicable codes and ordinances.</p> <p>These drawings are the sole property of the Architect. They are provided to the owner and contractors for their use with respect to this project only. The Architect shall be deemed the author of the drawings and retain all common law, statutory, reserved rights and copyright. Any use or reproduction of these drawings in whole or in part, other of the Architect is prohibited.</p> <p>The use of these drawings for construction purposes by anyone other than a PROFESSIONAL BUILDER is strictly prohibited. of all responsibility from any errors or omissions resulting from the use of these documents by anyone other than a licensed and insured professional.</p> <p>ALL WORK SHALL BE DONE IN ACCORDANCE WITH THE LATEST GOVERNING BUILDING CODE(S) AND ADDENDUM(S) ADOPTED BY THE LOCAL TOWNSHIP AND/OR BOROUGH.</p> <p>GENERAL CONTRACTOR SHALL BE RESPONSIBLE FOR INSTALLATION AND ACCOMMODATION OF PLUMBING AND ELECTRICAL. (MECHANICAL SYSTEMS)</p> <p>NO STRUCTURAL OR ARCHITECTURAL CHANGES SHALL BE MADE WITHOUT PRIOR APPROVAL BY THE ARCHITECT.</p> <p>CONTRACTOR IS RESPONSIBLE FOR NOTIFYING THE ARCHITECT OF ANY INCONSISTENCIES BETWEEN THESE PLANS AND GOVERNING BUILDING CODES OR ORDINANCES. CONTRACTOR SHALL CHECK WITH THE ARCHITECT TEN DAYS PRIOR TO THE START OF CONSTRUCTION FOR ADDENDUMS OR BULLETINS.</p>	<p>1 LAYER 5/8" TYPE X GYPSUM WALL BOARD ON GARAGE SIDE OF CEILING AND WALLS (ENTIRE GARAGE)</p> <p>OPENING BETWEEN THE GARAGE AND RESIDENCE SHALL BE A 20-MINUTE FIRE-RATED DOOR.</p>	<p>All plain and reinforced concrete shall comply with reinforcements in ACI 318.</p>	<p>Porches, balconies or raised floor surfaces located more than 30 inches above the floor or grade below shall have guards not less than 36 inches in height. Open sides of stairs with a total rise of more than 30 inches above the floor or grade below shall have guards not less than 34 inches in height measured vertically from the nosing of the treads.</p>																																									
	<h3>Header Sizes</h3>	<p>Concrete used for ftgs, basement slabs, & Interior slabs on grade shall be 2,500 psi min. @ 28 days Type 1 ASTM C150. Poured foundation walls shall be 3,000 psi min., air entrained 5-7% concrete Type 1A ASTM C150. All exterior concrete work, incl. porches and garage slabs, shall be nominal 4" (3-1/2" min) 3,500 psi, air entrained concrete, Type 1A ASTM C150.</p>	<p>MAX RISE = 7-3/4" (min 4") MIN TREAD = 10" NOSE TO NOSE WITH MIN NOSING OF 3/4" AND MAX OF 1-1/4"</p>																																									
	<p>All window and door header sizes to be min 2-2x10 with 1/2" plywood fitch plate located directly under the double top plate U.N.O. (unless noted otherwise)</p>	<p>Install footings/foundation walls with a min. depth of 36" below finish grade, measured to the bottom of the conc. footing or maintain more restrictive height limitations imposed by local site/frost conditions.</p>	<h3>Prefab Fireplace</h3>																																									
	<h3>Windows</h3> <p>Ref notes on sheet S-1.2 for add'l info</p>	<p>Conc. Contr. shall install min 1/2" dia. galv. mudsill anchor bolts. Reference chart on sheet S-1.2 for spacing requirements. Anchor bolts shall be located at 1'-0" max from corners (2) per plate min. and min 8" embedment installed per manufacturer's specifications.</p>	<p>Fireplace chimneys shall have a min. vertical distance of 2'-0" above any portion of the roof 10'-0" away.</p> <p>PREFAB GAS FIREPLACES INSTALL IN ACCORDANCE WITH MANUFACTURER SPECIFICATIONS AND BE UL LISTED TO UL 127 STANDARDS</p> <p>PREFAB WOOD FIREPLACES INSTALL IN ACCORDANCE WITH MANUFACTURER SPECIFICATIONS AND BE UL LISTED. PREFAB WOOD FIREPLACES SHALL USE AN "OUTSIDE AIR SOURCE" FOR COMBUSTION.</p>																																									
	<p>Basements and every sleeping room shall have at least one openable emergency escape and rescue opening. Where basements contain one or more sleeping rooms emergency egress and rescue openings shall be required in each sleeping room, but shall not be required in adjoining areas of the basement. Windows as 2nd floor egress shall be min. 5.7 sq. ft. openable area with minimum net clear opening height of 24 inches and minimum width of 24 inches. Maximum sill height of 44 inches above the floor. All emergency escape and rescue openings shall be operational from the inside of the room without the uses of keys or tools.</p>	<p>All foundation sill plates to be 2x6 pressure treated with sill sealer U.N.O.</p>	<h3>Wood</h3>																																									
	<h3>Moisture protection</h3>	<p>All footings must bear directly on undisturbed virgin soil with a minimum soil bearing capacity of 2,000 psf or approved compacted fill.</p>	<p>All partitions shall be 2x4 stud construction unless otherwise noted on drawings. Bearing walls shall have stud placement of 16" o.c., maximum.</p>																																									
	<p>All basement walls shall be minimum dampproofed with an Asphalt Coating or Waterproofed with a System Such as "TUFF-N-DRI" or Equal. Basement & garage slab where living space is located above shall have a 6 mil p.v. vapor barrier in-between the crushed stone and the conc slab.</p>	<p>8' Basement Foundation Walls Max depth of unbalanced fill against 10" plain concrete foundation walls - 7'-0".</p>	<p>All wood in contact with concrete slabs concrete / masonry walls to be pressure treated</p>																																									
	<h3>Attic Ventilation/Acess</h3>	<p>9' Basement Foundation Walls Max depth of unbalanced fill against 12" plain concrete foundation walls - 7'-0".</p>	<p>The minimum grade and allowable stresses for structural wood members are:</p>																																									
<h3>Stucco Spec's</h3> <p>Install over solid sheathing as follows: 15 # felt or "TYVEK" stucco wrap moisture barrier lapped to drain (or equal) 17 gauge mesh stucco wire 1" numatic staples at 2" oc at each stud First coat of stucco with raked finish (scratch) Second coat of stucco for color Third coat of stucco for finish and color as required. A minimum 0.019-inch (No. 26 galvanized sheet gage), corrosion-resistant weep screed or plastic weep screed, with a minimum vertical attachment flange of 3 1/2" inches shall be provided at or below the foundation plate line on exterior stud walls in accordance with ASTM C 926. The weep screed shall be placed a minimum of 4" above earth or 2 inches above paved areas and shall be of a type that will allow trapped water to drain to the exterior of the building. The weather-resistant barrier shall lap the attachment flange. The exterior lath shall cover and terminate on the attachment flange of the weep screed.</p>	<p>THE MINIMUM REQUIRED NET FREE VENTILATING AREA SHALL BE 1/300 THE AREA OF THE SPACE VENTILATED. A MIN OF 50% AND NOT MORE THAN 80% OF THE REQ'D VENTILATION SHALL BE PROVIDED BY RIDGE VENTS LOCATED IN THE UPPER THIRD OF THE SPACE TO BE VENTILATED WITH THE BALANCE OF THE REQUIRED VENTILATION PROVIDED BY SOFFIT VENTS (MIN 20% AT SOFFIT). Attic access panel to be a minimum 22"x30" with a 30" minimum unobstructed vertical clearance above the opening.</p>	<h3>Fire stopping</h3>	<p>a.) Studs and Jacks - SPF #2 SURFACE DRY or better approximately 19% moisture content</p>																																									
	<h3>Design Loads</h3>	<p>Fire stopping shall be provided at all interconnections between vertical and horizontal spaces such as soffits and dropped ceilings. In concealed spaces of stud walls and partitions including furred spaces horizontally at intervals not exceeding 10 feet. Fire stopping shall also be provided in concealed spaces between stairway stringers at the top and bottom of the run, or at floor and/or roof levels; at chimneys with non-combustible materials and at vents, pipes and ducts, and chases.</p>	<p>b.) Floor Joists - SPF #2 or better approximately 19% moisture content or Engineered "I" Joist as per plan</p>																																									
	<table border="1"> <thead> <tr> <th rowspan="2">LOCATION / TYPE</th> <th colspan="2">LOAD</th> </tr> <tr> <th>LIVE</th> <th>DEAD</th> </tr> </thead> <tbody> <tr> <td>Living Areas</td> <td>40 psf</td> <td>10 psf</td> </tr> <tr> <td>Sleeping Areas</td> <td>30 psf</td> <td>10 psf</td> </tr> <tr> <td>Roof (ground snow)</td> <td>30 psf</td> <td>15 psf</td> </tr> <tr> <td>Stairs</td> <td>100 psf</td> <td>10 psf</td> </tr> <tr> <td>Wind</td> <td>90 mph</td> <td></td> </tr> <tr> <td>Garage</td> <td>50 psf</td> <td>70 psf</td> </tr> <tr> <td>Exterior Decks</td> <td>40 psf</td> <td>10 psf</td> </tr> <tr> <td>Balconies</td> <td>60 psf</td> <td>10 psf</td> </tr> <tr> <td>Ceilings</td> <td>20 psf</td> <td>5 psf</td> </tr> <tr> <td>Guardrails - 300# along top member, any point or direction Infill of Guardrails - 200# in / sq ft</td> <td></td> <td></td> </tr> <tr> <td>Handrails - 200# along top member, any point or direction</td> <td></td> <td></td> </tr> <tr> <td>Tile floors: Wet bed dead load = 17 psf to 27 psf</td> <td></td> <td></td> </tr> </tbody> </table>	LOCATION / TYPE	LOAD		LIVE	DEAD	Living Areas	40 psf	10 psf	Sleeping Areas	30 psf	10 psf	Roof (ground snow)	30 psf	15 psf	Stairs	100 psf	10 psf	Wind	90 mph		Garage	50 psf	70 psf	Exterior Decks	40 psf	10 psf	Balconies	60 psf	10 psf	Ceilings	20 psf	5 psf	Guardrails - 300# along top member, any point or direction Infill of Guardrails - 200# in / sq ft			Handrails - 200# along top member, any point or direction			Tile floors: Wet bed dead load = 17 psf to 27 psf			<p>Fire stopping to be 2x lumber, 3/4" plywood, sheet metal panning, USG Thermafiber caulk or its approved equal. All caulks shall bear the ASTM E119 or E814 approved dependent upon its area of usage</p>	<p>c.) Trusses - as per Manufacturer's engineered drawings.</p>
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	<p>Wind Category: Exposure B shall be assumed unless the site meets the definition of another type exposure, Seismic Design Category B</p>	<h3>Stairways</h3>	<p>Posts or multiple studs which directly support through all stories/floors below and shall rest directly on the basement girder or foundation. Install Solid Blockings in floor framing spaces under posts/multiple studs to transfer the loads downward without interruption. The area of the cross-section of such blocking shall not have an area less than the cross-section of the posts/multiple studs below.</p>																																									
<h3>Brick Spec's</h3> <p>BRICK VENEER: BUILDING PAPER AT BACK OF VENEER AND OVER EXTERIOR SHEATHING WITH 1" AIR SPACE. BRICK TIES: CORROSION RESISTANT CORRUGATED METAL TIES MIN 22 GA 7/8"x8". FASTEN WITH CORROSION RESISTANT NAILS AT MAX 36" O.C. HORIZ & MAX 24" O.C. VERT (1 AT 3.25 SF MIN.) TIES IN ALTERNATE COURSES SHALL BE STAGGERED. ADD'L TIES AT 36" O.C. AROUND ALL OPENINGS WITHIN 12" OF THE OPENING. WEEP HOLES: 3/16 DIA WEEP HOLES MAX 33" O.C. MAX. IN BASE COURSE HEAD IMMEDIATELY ABOVE FLASHING WITH 1" AIR SPACE FLASHING BENEATH 1ST COURSE AND ABOVE FINISH GRADE</p>	<p>Climate and Geographic Design Criteria</p>	<p>Interior stairways shall have a minimum clear width of 36", with a minimum of 6'-8" headroom measured vertically from nosing of all treads. Measuring Vertically, Handrails shall be located at a Min. height of 34", and a max. height of 38" from the nose of the tread to the top of the rail when rail is attached to walls. Handrails which are part of guardrails to be 34"-38" above nosing of treads. Handrails shall have a maximum projection of 3 1/2" into the stair tread or landing.</p> <p>Guardrails / Risers shall not allow a 4" dia sphere to pass through. (triangular area formed by tread/riser at bottom of guard shall not allow a 6" dia sphere to pass through). Balusters shall be less than 4" apart & shall not result in a ladder effect.</p> <p>HANDRAILS SHALL BE PROVIDED ON AT LEAST ONE SIDE OF EACH CONTINUOUS RUN OF TREADS OR FLIGHT WITH 4 OR MORE RISERS. 2 RISERS OR LESS - NO LANDING REQUIRED. 3 RISERS OR MORE REQUIRES A 3'x3' LANDING AT DOOR THRESHOLD, DOWN MAX 1 RISER BELOW TOP OF THRESHOLD.</p>	<p>All connections and fastenings of wood products shall follow code approved WOOD FRAME CONSTRUCTION FASTENING SCHEDULE.</p>																																									
	<p>Climate and Geographic Design Criteria: (Subject to damage from: WEATHERING: Sever, FROST LINE DEPTH: 3'-0", TERMITE: mod/high, DECAY: slight/mod) WINTER DESIGN TEMP: 10 deg F, ICE SHIELD UNDERLAYMENT REQ'D: yes, avg low 24 deg F, FLOOD HAZARDS: Nov. 10, 2004, AIR FREEZING INDEX: 1000, MEAN ANNUAL TEMP: 51 deg F</p>	<h3>Electrical</h3>	<h3>Electrical</h3> <p>Install a GFI receptacle outlet within 25'-0" of HVAC mechanical equipment. Receptacles installed outdoors in a wet location shall have a in-use weatherproof enclosure. Install a switched light in the vicinity of the attic access panel. INSTALL ARC-FAULT BREAKERS ON BEDROOM CIRCUITS</p>																																									
<h3>Climate and Geographic Design Criteria</h3>		<h3>Smoke Detectors</h3>	<h3>Smoke Detectors</h3> <p>Smoke detectors to be located as follows: in each sleeping room, outside of each separate sleeping areas in the immediate vicinity of the bedrooms, and on each additional story of the dwelling, including the basement ALL SMOKE DETECTORS HARD WIRED AND INTERCONNECTED WITH BATTERY BACKUP</p>																																									

Voice: 215/442-1780
Fax: 215/442-1781
E-mail: theomniagroup.com
323 South York Rd
Hatboro, Pa 19040

The OMNIA Group, Inc.

ARCHITECTS • BUILDERS • CONSULTANTS



GENERAL SPECIFICATIONS
IRC 2006 - PA EDITION

DRAWING DATE	12/28/06
REVISION DATES	

S-1

* NOTE: Local jurisdiction shall verify design loads and Climate and Geographic Design Criteria for code compliance

FLOOR JOIST SPAN TABLE (40 PSF LIVE LOAD + 10 PSF DEAD LOAD)

SPECIES AND GRADE	16" OC	12" OC	16" OC DOUBLE EACH 32"	DOUBLE AT 16"
2X10 SPF #2	15'-5"	17'-3"	17'-11"	19'-9"
2X10 HEM FIR #2	15'-2"	16'-10"	17'-6"	19'-3"

FLOOR JOIST SPAN TABLE (30 PSF LIVE LOAD + 10 PSF DEAD LOAD)

SPECIES AND GRADE	16" OC	12" OC	16" OC DOUBLE EACH 32"	DOUBLE AT 16"
2X10 SPF #2	17'-2"	19'-0"	19'-8"	21'-8"
2X10 HEM FIR #2	16'-10"	18'-6"	19'-3"	21'-2"

Deck Notes

- ALL PRESSURE TREATED LUMBER SHALL BE PROTECTED WITH ACQ WOOD PRESERVATIVE (Alkaline Copper Quaternary) OR COPPER AZONE OR MANUFACTURER'S EQUAL CONTAINING NO ARSENIC OR CHROMIUM.
- ALL METAL FASTENERS SHALL BE RATED FOR DIRECT CONTACT WITH TREATED LUMBER (ex. hot dipped galv., stainless steel, or triple coated zinc polymer materials or approved equal)
- ALUMINUM CAN NOT BE USED IN DIRECT CONTACT WITH ACQ TREATED LUMBER. (ex. ALUM FLASHING, etc.)

- All connections and fastenings of wood products shall follow code approved WOOD FRAME CONSTRUCTION FASTENING SCHEDULE.
- All hot-dipped galvanized coated fasteners should conform to ASTM Standard A153 and all hot-dipped galvanized coated connectors should conform to ASTM Standard A653 (Class G-185).

GENERAL NOTES

- ALL 2x4 EXTERIOR WALLS ARE 3 1/2" WITH 1/2" SHEATHING (4" TOTAL)
- ALL 2x6 EXTERIOR WALLS ARE 5 1/2" WITH 1/2" SHEATHING (6" TOTAL)
- ALL INTERIOR WALLS ARE 3 1/2" UNLESS NOTED OTHERWISE (ROUGH FRAME DIMENSION)

ENGINEERED I-JOIST NOTE

BUILDER TO REFERENCE MANUFACTURER'S FRAMING LAYOUT, INSTALLATION INSTRUCTIONS AND DETAILS

MAX DEFLECTION LIMITS OF MEMBERS

FLOOR JOIST / BEAMS = L/360
 ROOF BEAMS = L/240
 RAFTERS W/ CEILING = L/240
 RAFTERS W/O CEILING = L/180

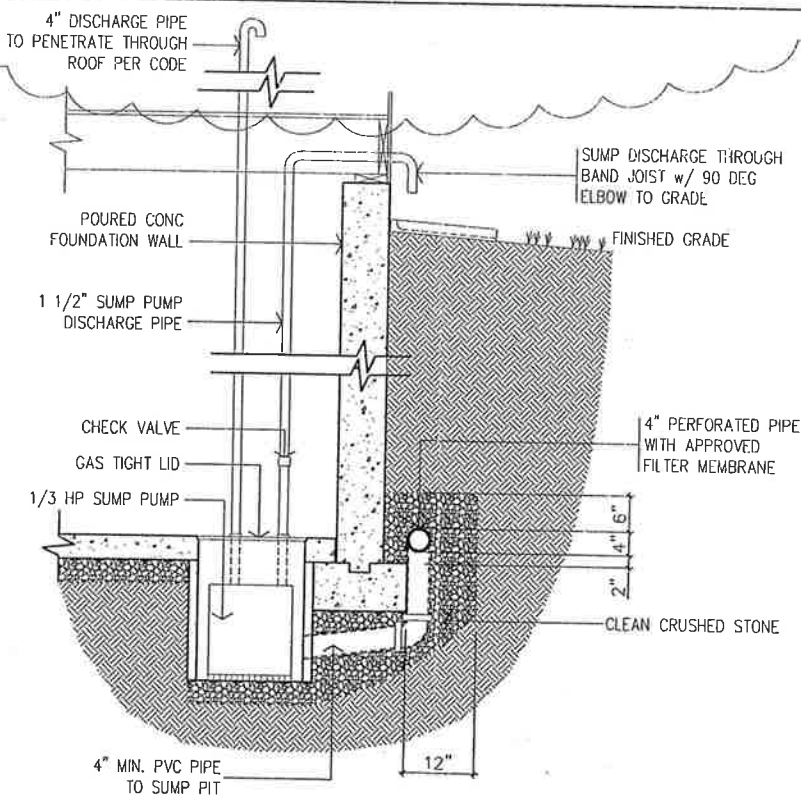
DRYER NOTE

THE MAX LENGTH OF A CLOTHES DRYER EXHAUST DUCT SHALL NOT EXCEED 25 FT FROM THE DRYER LOCATION OF THE OUTLET TERMINAL. THE MAX LENGTH OF THE DUCT SHALL BE REDUCED 2-1/2 FT FOR EACH 45 DEGREE BEND AND 5 FT FOR EACH 90 DEGREE BEND.

EXHAUST DUCTS SHALL HAVE A SMOOTH INTERIOR FINISH AND SHALL BE A MINIMUM NOMINAL SIZE OF 4 INCHES IN DIAMETER.

THE DRYER EXHAUST DUCT SHALL TERMINATE ON THE OUTSIDE OF THE BUILDING AND SHALL BE EQUIP. WITH A BACKDRAFT DAMPER. DUCTS SHALL NOT BE CONNECTED OR INSTALLED WITH SHEET METAL SCREWS.

EXT PERIM W/ RADON



EXTERIOR PERIMETER DRAIN and RADON DETAIL

N.T.S.
 PASSIVE RADON SYSTEM VENTED THROUGH SUMP

TRUSS ROOF

REScheck - IECC

REF REScheck COMPLIANCE REPORT FOR COMPLETE INFO REGARDING COMPLIANCE BY TOTAL BUILDING ENVELOPE PERFORMANCE

ATDC VENTILATION
 REF ATDC VENT CALC'S ON COVER / ELEV'S FOR ADD'L INFO
 30 YR MIN SHINGLE (OR BETTER) MIN CLASS "C" FIRE RATING W/ 15 LB. FELT
 7/16 - 24/16 SHEATHING (OR BETTER) W/ CLIPS
 INSTALL AS PER MANUF'S INSTRUCTIONS

MFRS ROOF TRUSSES 24" OC W/ HURRICANE CLIPS
 "SIMPSON" H2.5A OR MANUF'S EQUAL
 2X6 ALUM WRAP FASCIA W/ ALUM 'K' GUTTER

VENTED SOFFIT
 2-2X10 HEADER U.N.O.
 MIN R-30 INSUL - INSTALL BAFFLES FOR MIN 2" AIR SPACE AS REQ'D

EXT WALL
 EXTERIOR FINISH PER ELEV
 7/16" OSB EXT SHEATHING
 MIN R-13 KRAFT FACED BATT INSUL
 2x4 or 2x6 #2 OR BETTER WALL STUDS AT 16" O.C. 1/2" CWB
 REF PLANS FOR SIZE AND LOCATION

3/4" T&G SUBFLOOR (48/24 SHEATHING) ON FLOOR JOIST AT 16" O.C. (U.N.O.) SEE FDN/FRAMING PLAN FOR SIZING
 MIN R-13 KRAFT FACED BATT INSUL AT BAND

2-2X10 HEADER U.N.O.

WINDOWS REF ELEVATIONS
 U-FACTOR AS PER REScheck

3/4" T&G SUBFLOOR (48/24 SHEATHING) ON FLOOR JOIST AT 16" O.C. (U.N.O.) SEE FDN/FRAMING PLAN FOR SIZING

MIN R-13 KRAFT FACED BATT INSUL AT BAND
 2X6 PT SILL PLATE W/ SILL SEALER
 GRADE MIN 8" BELOW FND

ANCHOR - REF SPEC'S
 INSULATION AS REQUIRED AS PER REScheck

CONC FND WALL ON CONC FTG W/KEY SEE FND PLAN FOR SIZING

DAMP PROOF BELOW GRADE (MIN) OR WATERPROOF WITH "TUFF-N-DRY" OR EQUAL

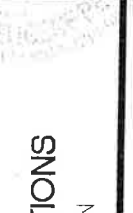
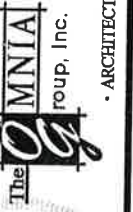
3-1/2" MIN CONC SLAB ON 6 MIL P.V. VAPOR BARRIER ON 4" CRUSHED STONE

4" PERF CORRUGATED PIPE
 4" CRUSHED STONE
 REF DETAIL FOR ADD'L INFO

NOTE:
 SLEEVE PASSING IN OR UNDER FOOTING TO BE CORROSION RESISTANT, STAINLESS STEEL OR IRON IRON 2 PIPE SIZES LARGER

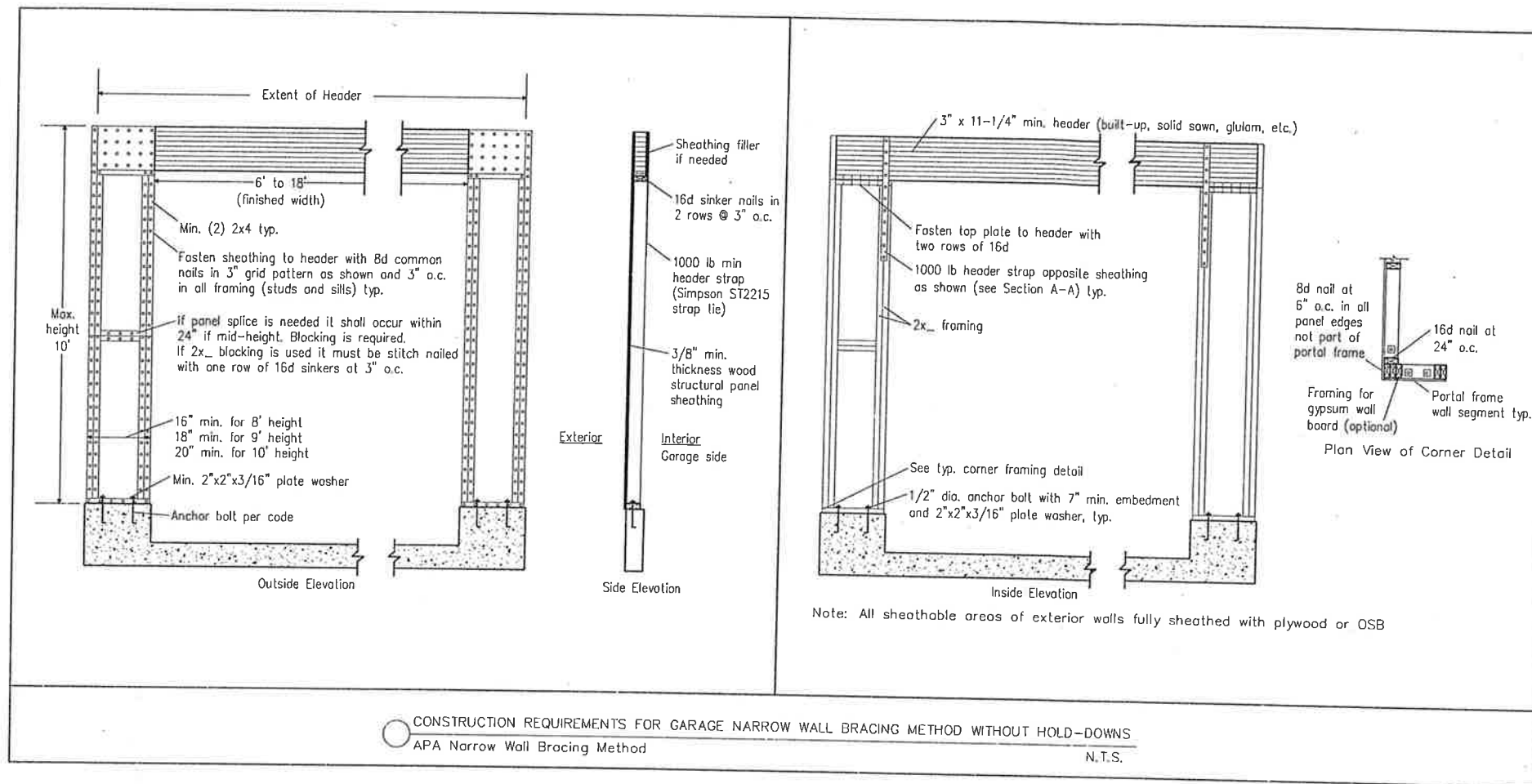
TYPICAL WALL SECTION
 N.T.S.

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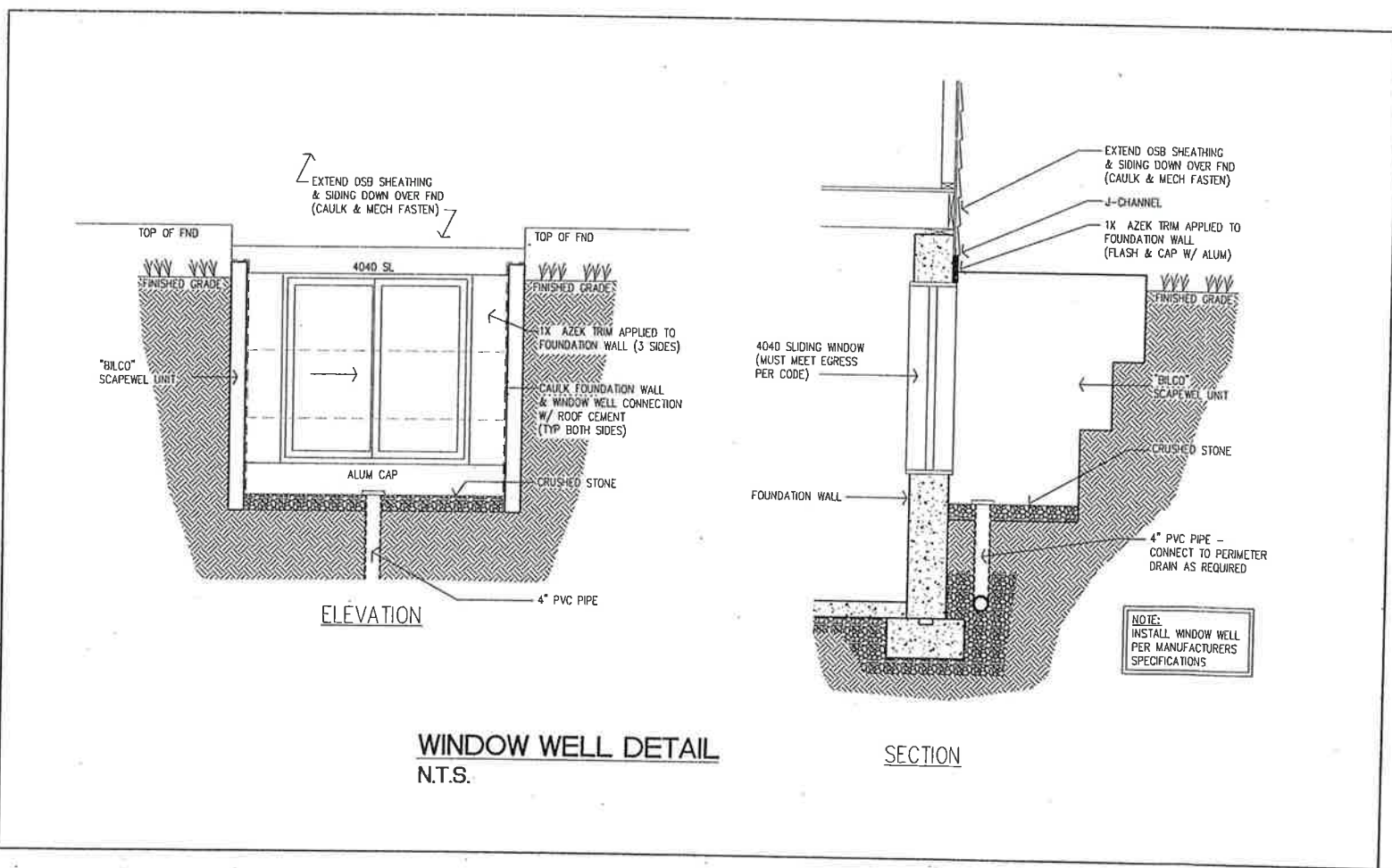


WINDOW SILLS
 THE LOWEST PART OF THE CLEAR OPENING OF THE WINDOW SHALL BE 24 INCHES ABOVE THE FINISH FLOOR WHEN THE FINISH FLOOR IS LOCATED MORE THAN 72 INCHES ABOVE THE FINISHED GRADE OR SURFACE BELOW.

BSMT EGRESS NOTE
 BASEMENT
 INSTALL "BILCO SCAPEWELL" WINDOW WELL SYSTEM FOR EMERGENCY EGRESS OR APPROVED EQUAL AS PER MANUFACTURE

EACH SLEEPING ROOM SHALL HAVE AT LEAST ONE OPENABLE EMERGENCY ESCAPE AND RESCUE OPENING.

WHERE BSMT'S CONTAIN ONE OR MORE SLEEPING ROOMS, EMERGENCY EGRESS AND RESCUE OPENINGS SHALL BE REQ'D IN EACH SLEEPING ROOM, BUT SHALL NOT BE REQ'D IN ADJOINING AREAS OF THE BASEMENT.



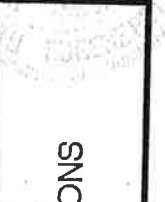
IRC - TABLE R404.1(2)
 REFERENCE SECTION R404
 MAXIMUM PLATE ANCHOR-BOLT SPACING FOR SUPPORTED FOUNDATION WALL^a

ANCHOR BOLT SPACING
 WALL SPECIFICATION PER CODE BASED ON SOIL BEARING CAPACITY AS DETERMINED BY A SOILS ENGINEER

MAX WALL HEIGHT (feet)	MAX UNBALANCED BACKFILL HEIGHT (feet)	SOIL CLASSES		
		GW, GP SW and SP	GM, GC, SM-SC and ML	SC, MH, ML-CL and inorganic CL
7	4	72	58	43
	5	44	30	22
	6	26	17	13
	7	16	11	8
8	4	72	66	50
	5	51	34	25
	6	29	20	15
	7	18	12	9
9	8	12	8	6
	4	72	72	56
	5	57	38	29
	6	33	22	17
	7	21	14	10
	8	14	9	7
	9	10	7	5

b. Spacing is based on 1/2 inch diameter anchor bolts. For 5/8 inch diameter anchor bolts, spacing may be multiplied by 1.27, with a maximum spacing of 72 inches.

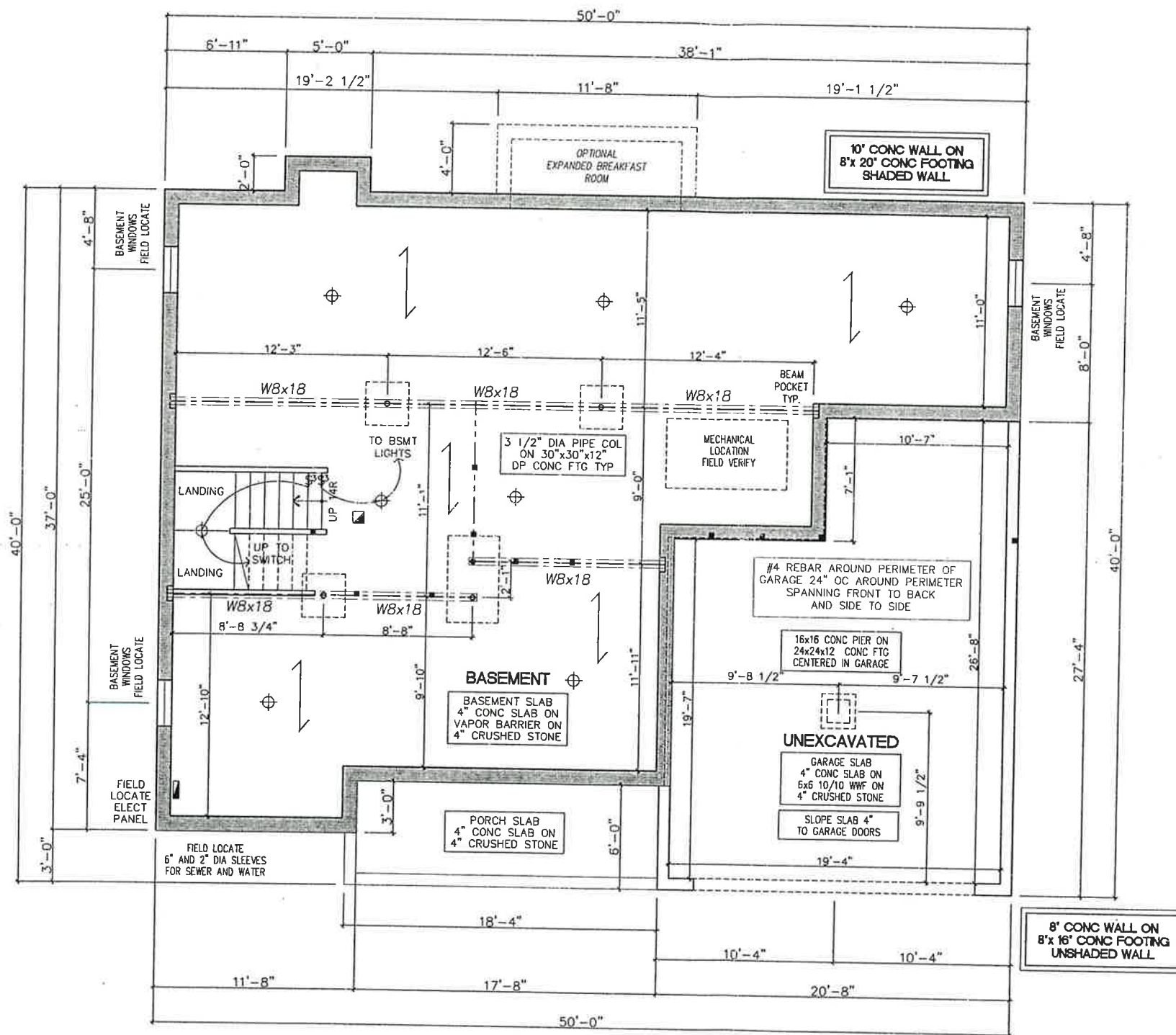
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S-12



11-7/8" ENGINEERED
FLOOR JOISTS
SPACING AND LAYOUT
AS PER ENGINEERED PLAN

Foundation Plan
scale: ref cover sheet

8' HIGH STANDARD CONCRETE WALLS

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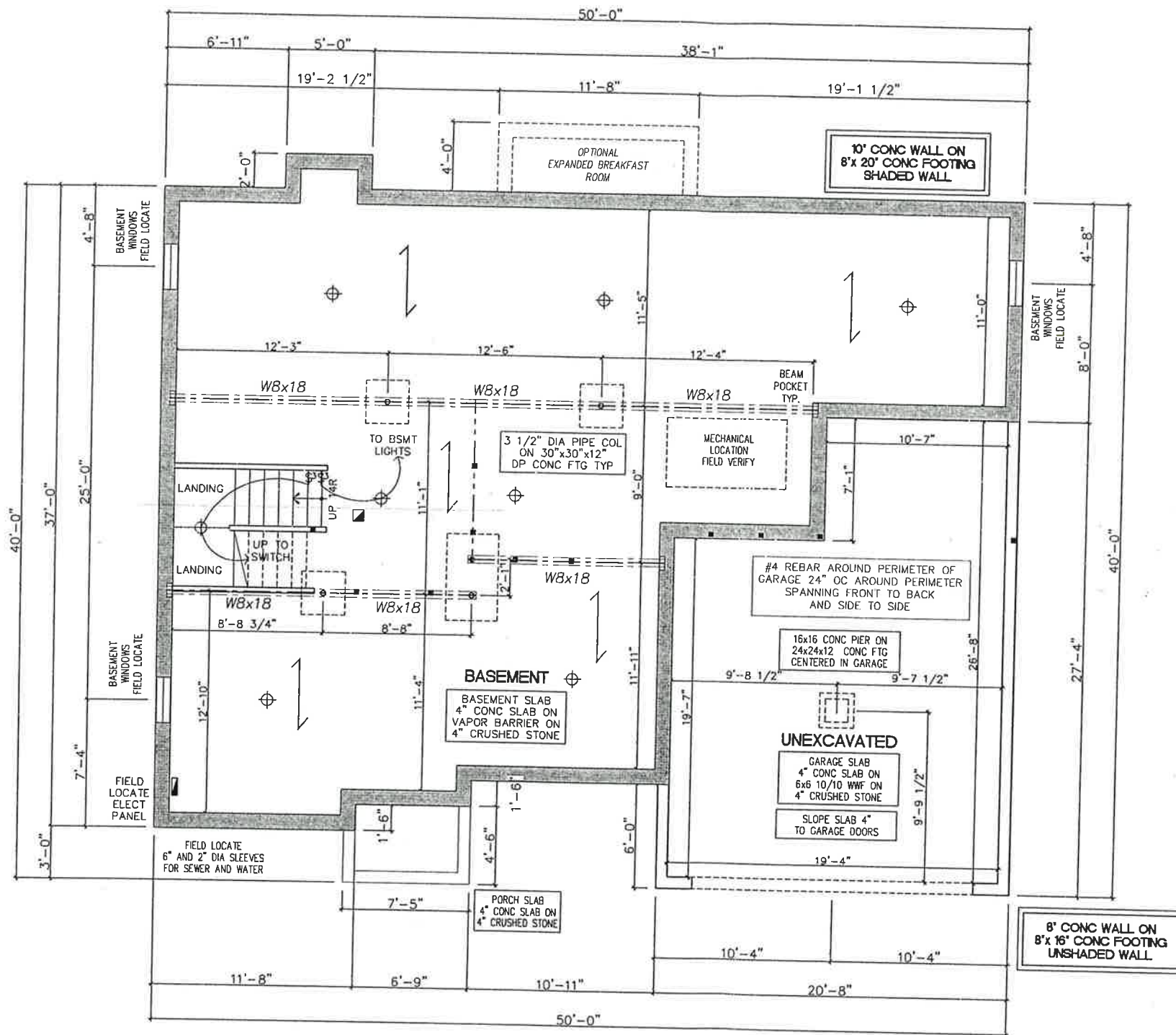


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DEWEY HOMES
 Ravens Claw - Master

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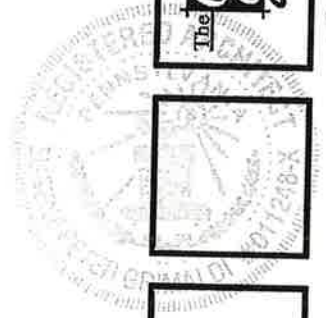


11-7/8" ENGINEERED
FLOOR JOISTS
SPACING AND LAYOUT
AS PER ENGINEERED PLAN
←

Foundation Plan
scale: ref cover sheet

8' HIGH STANDARD CONCRETE WALLS

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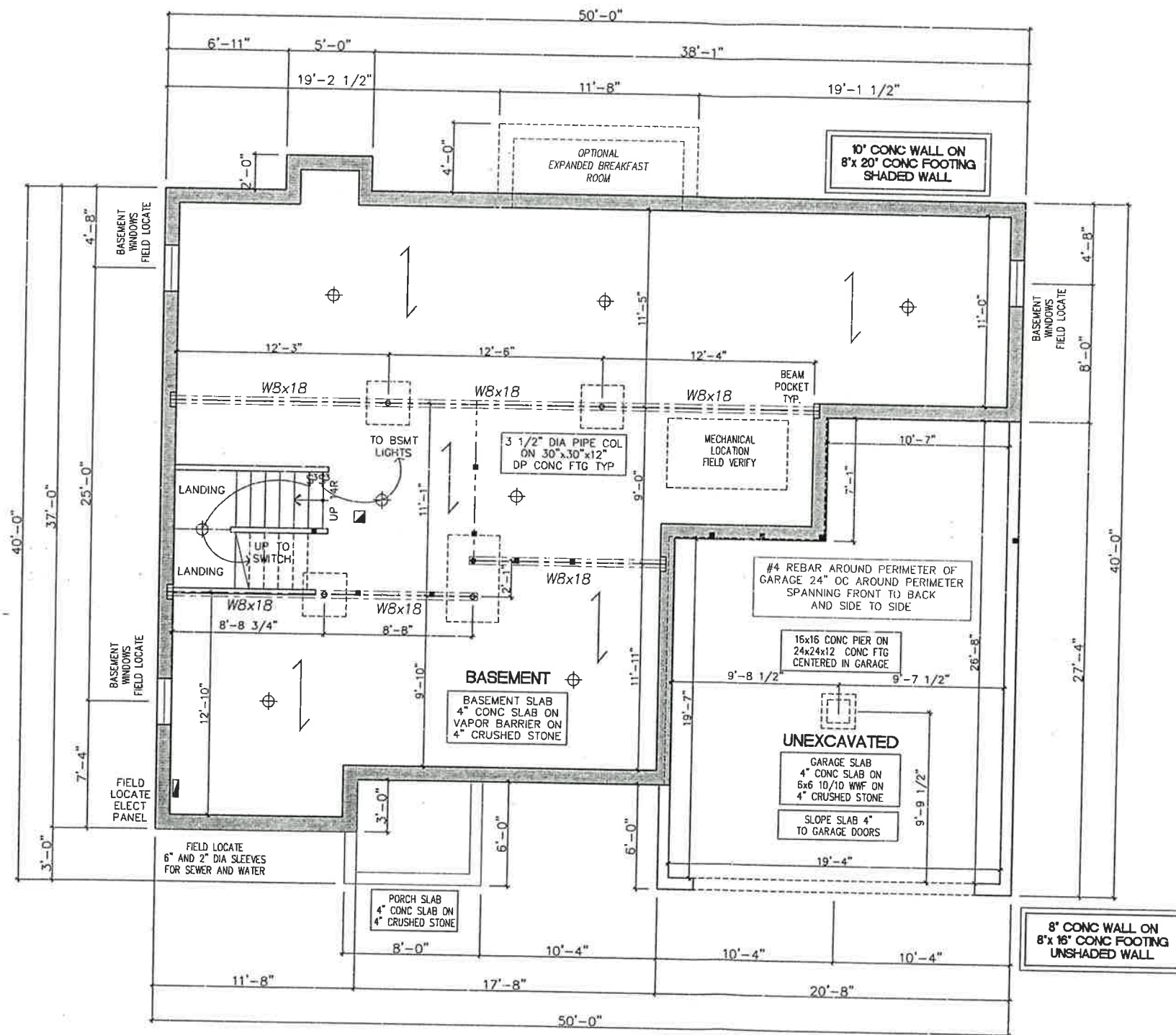


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A-1B

MANOR



Foundation Plan
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8" HIGH STANDARD CONCRETE WALLS

11-7/8" ENGINEERED
FLOOR JOISTS
SPACING AND LAYOUT
AS PER ENGINEERED PLAN

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A-1C

CHATEAU

STAIR NOTE:
10" TREADS PLUS 1" NOSING
AND MAX 7 3/4" RISERS

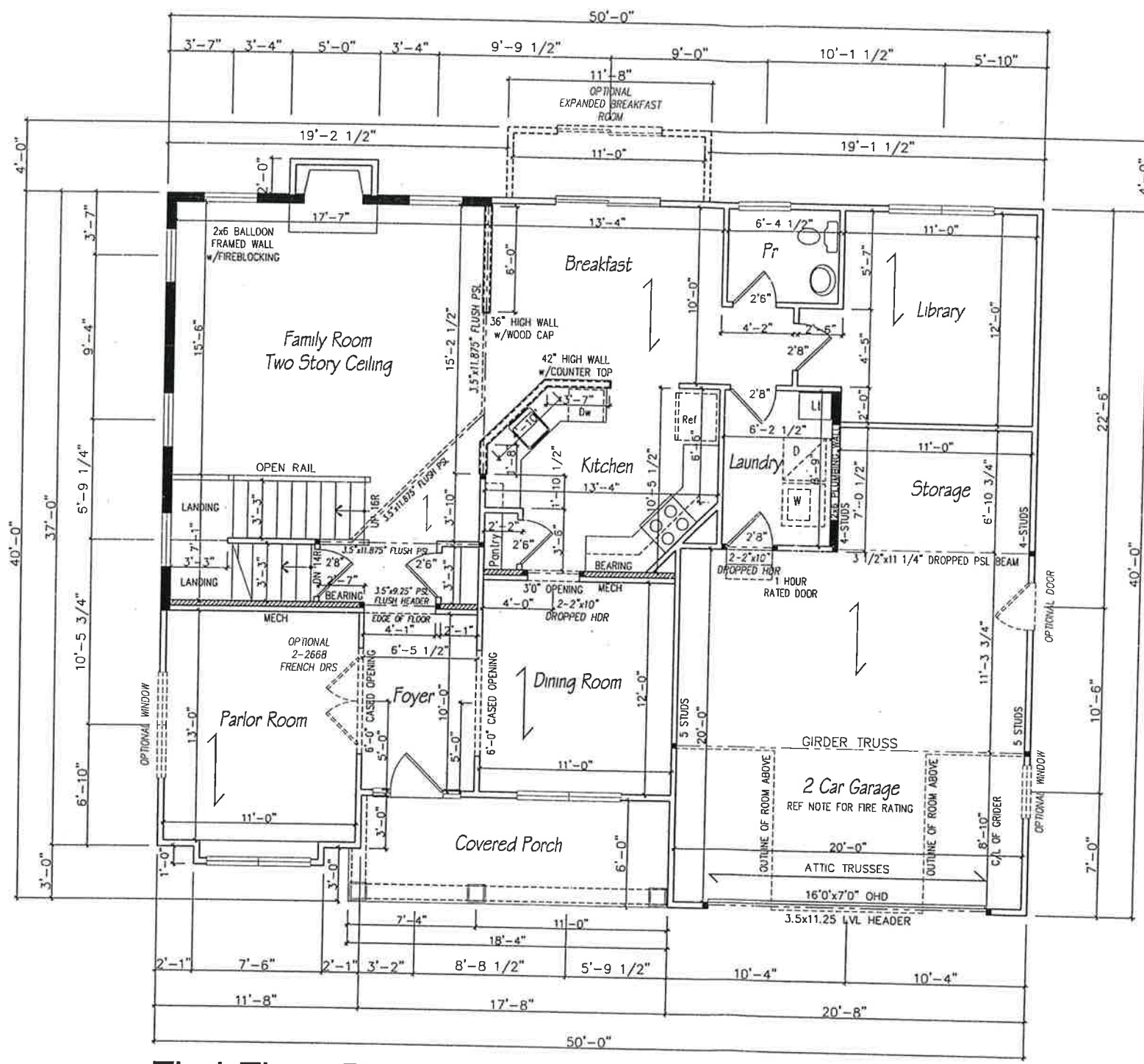
NOTE:
REFERENCE ELEVATIONS
FOR WINDOW SIZES

INTERIOR HEADERS:
(2)2X10 WITH (2)2X4 JACK
UNLESS NOTED OTHERWISE

EXTERIOR SINGLE
WINDOW AND DOOR HEADERS:
(2)2X10 WITH (2)2X4 JACK
UNLESS NOTED OTHERWISE

EXTERIOR TWIN
WINDOW AND DOOR HEADERS:
3.5x9.25 PSL W/ 3 JACKS U.N.O. (6'-0" MAX)
UNLESS NOTED OTHERWISE

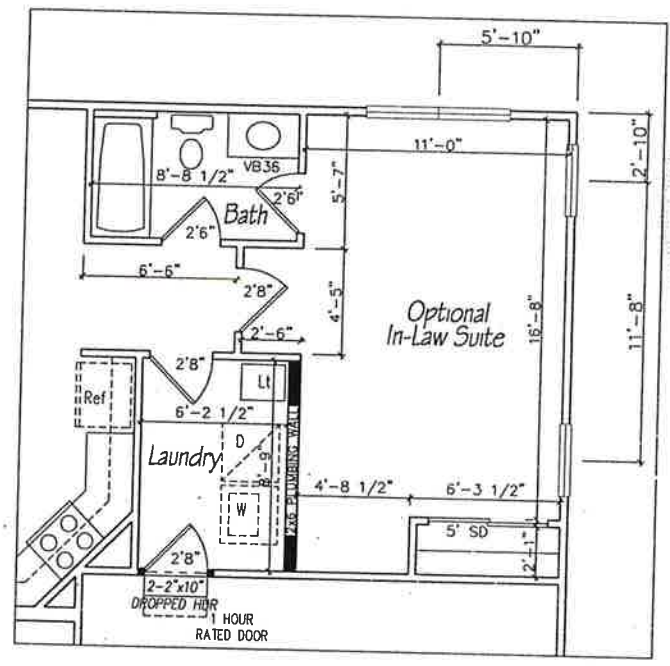
POINT LOAD (MIN 3 STUDS U.N.O.)
PROVIDE SOLID BLOCKING
DOWN TO FOUNDATION
OR BEAM BELOW



First Floor Plan
scale: ref cover sheet

9'-1" PLATE HEIGHT

11-7/8" ENGINEERED
FLOOR JOISTS
SPACING AND LAYOUT
AS PER ENGINEERED PLAN



Optional In-Law Suite

GARAGE FIRE RATING
PROVIDE 1 LAYER 5/8" TYPE X
GYP BD EA SIDE FOR 1 HR
FIRE PROTECTION BETWEEN
HOUSE AND GARAGE
PROVIDE 2 LAYERS 5/8" TYPE X
GYP BD FOR 1 HR FIRE
PROTECTION ON CEILING

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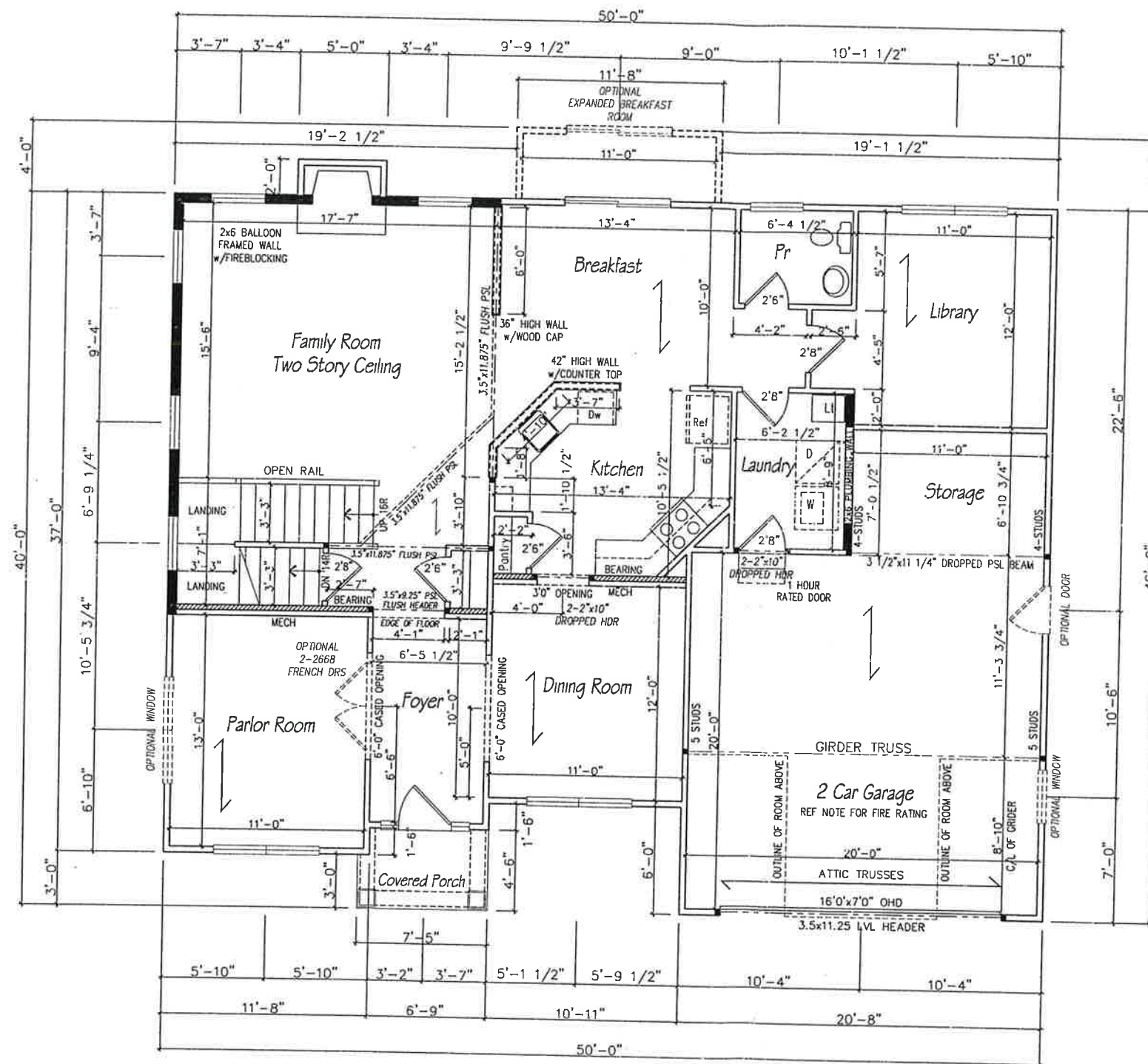
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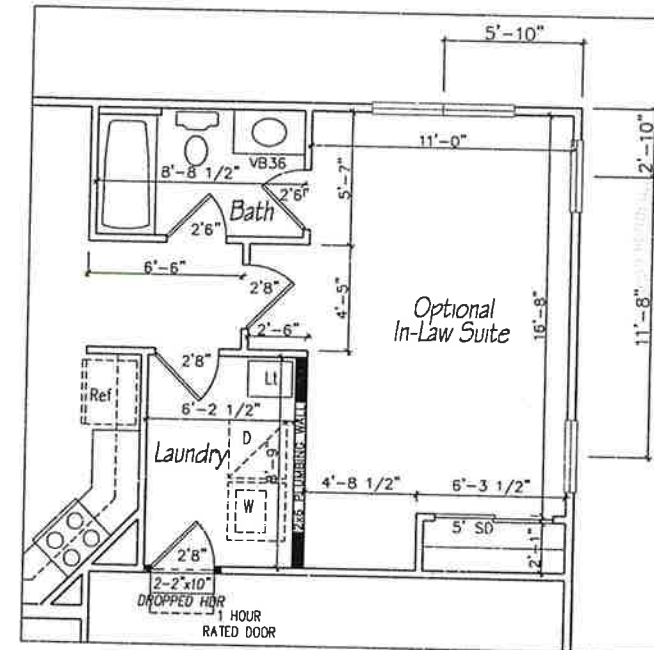
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OR BEAM BELOW



First Floor Plan
scale: ref cover sheet

9'-1" PLATE HEIGHT

11-7/8" ENGINEERED
FLOOR JOISTS
SPACING AND LAYOUT
AS PER ENGINEERED PLAN



Optional In-Law Suite

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GYP BD EA SIDE FOR 1 HR
FIRE PROTECTION BETWEEN
HOUSE AND GARAGE
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PROTECTION ON CEILING

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A-2B

MANOR

STAIR NOTE:
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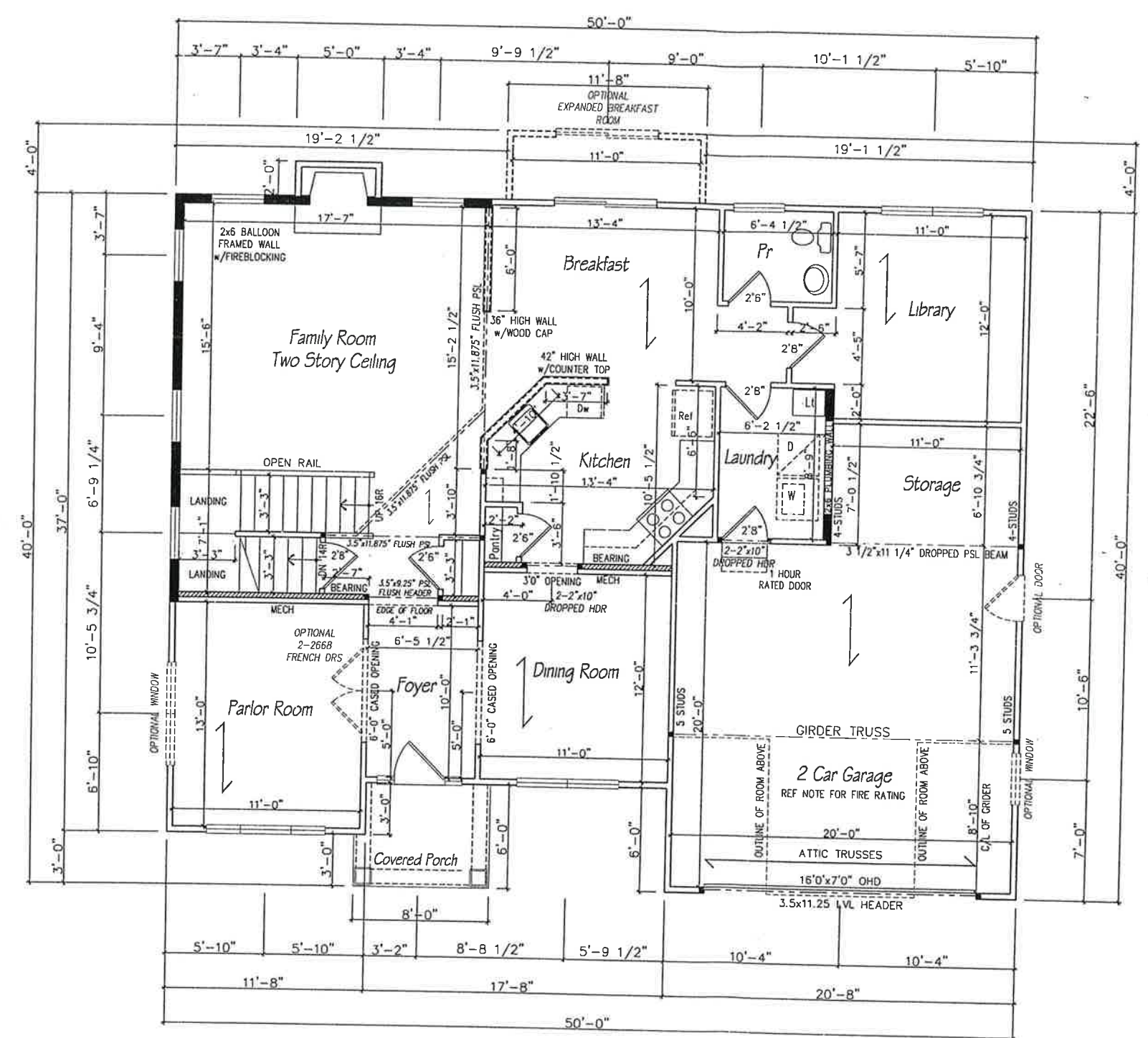
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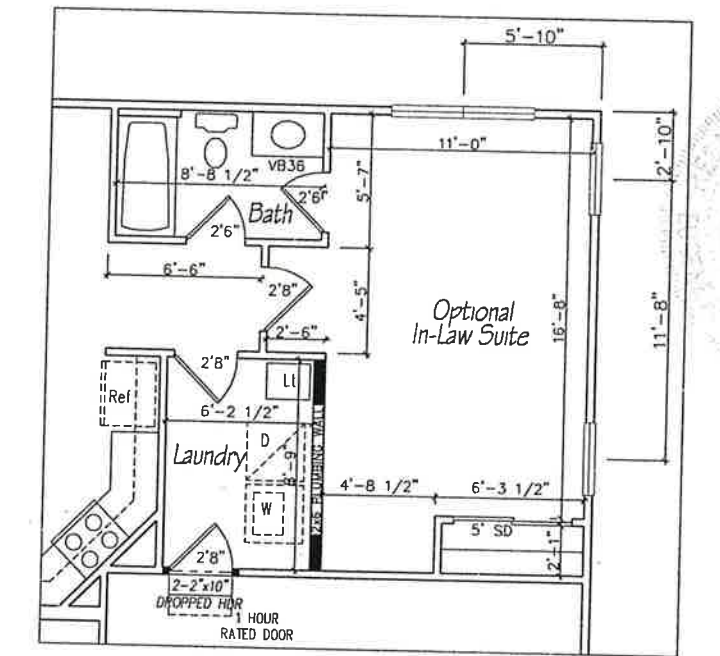
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11-7/8" ENGINEERED
FLOOR JOISTS
SPACING AND LAYOUT
AS PER ENGINEERED PLAN



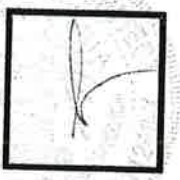
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First Floor Plan
scale: ref cover sheet

9'-1" PLATE HEIGHT

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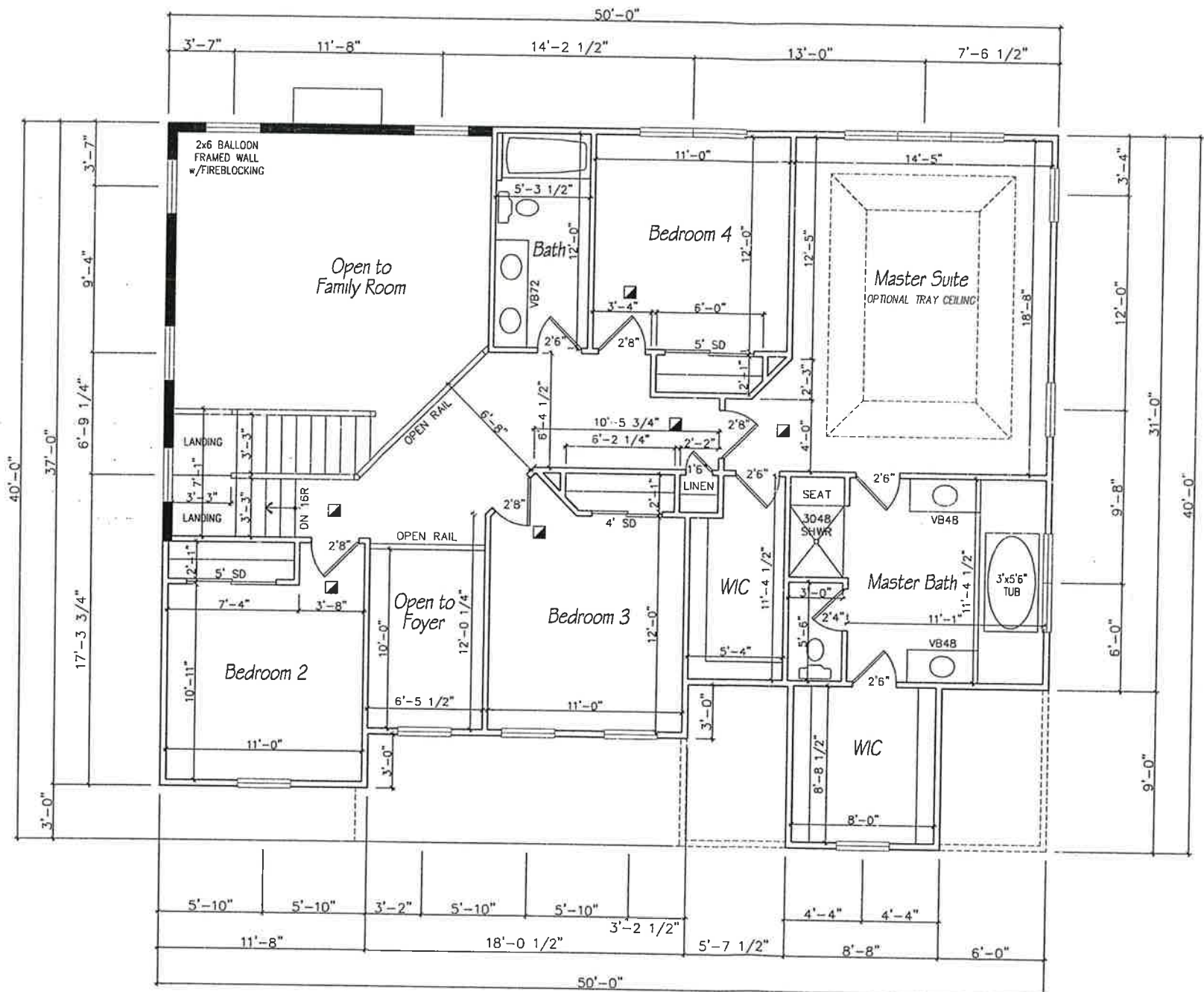
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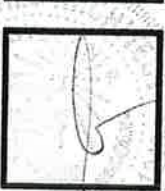
<p>STAIR NOTE: 10" TREADS PLUS 1" NOSING AND MAX 7 3/4" RISERS</p>	<p>NOTE: REFERENCE ELEVATIONS FOR WINDOW SIZES</p>	<p>INTERIOR HEADERS: (2)2X10 WITH (2)2X4 JACK UNLESS NOTED OTHERWISE</p>	<p>EXTERIOR SINGLE WINDOW AND DOOR HEADERS: (2)2X10 WITH (2)2X4 JACK UNLESS NOTED OTHERWISE</p>	<p>EXTERIOR TWIN WINDOW AND DOOR HEADERS: 3.5x9.25 PSL W/ 3 JACKS U.N.O. (6'-0" MAX) UNLESS NOTED OTHERWISE</p>	<p>POINT LOAD (MIN 3 STUDS U.N.O.) PROVIDE SOLID BLOCKING DOWN TO FOUNDATION OR BEAM BELOW</p>
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Second Floor Plan
scale: ref cover sheet

8'-1" PLATE HEIGHT

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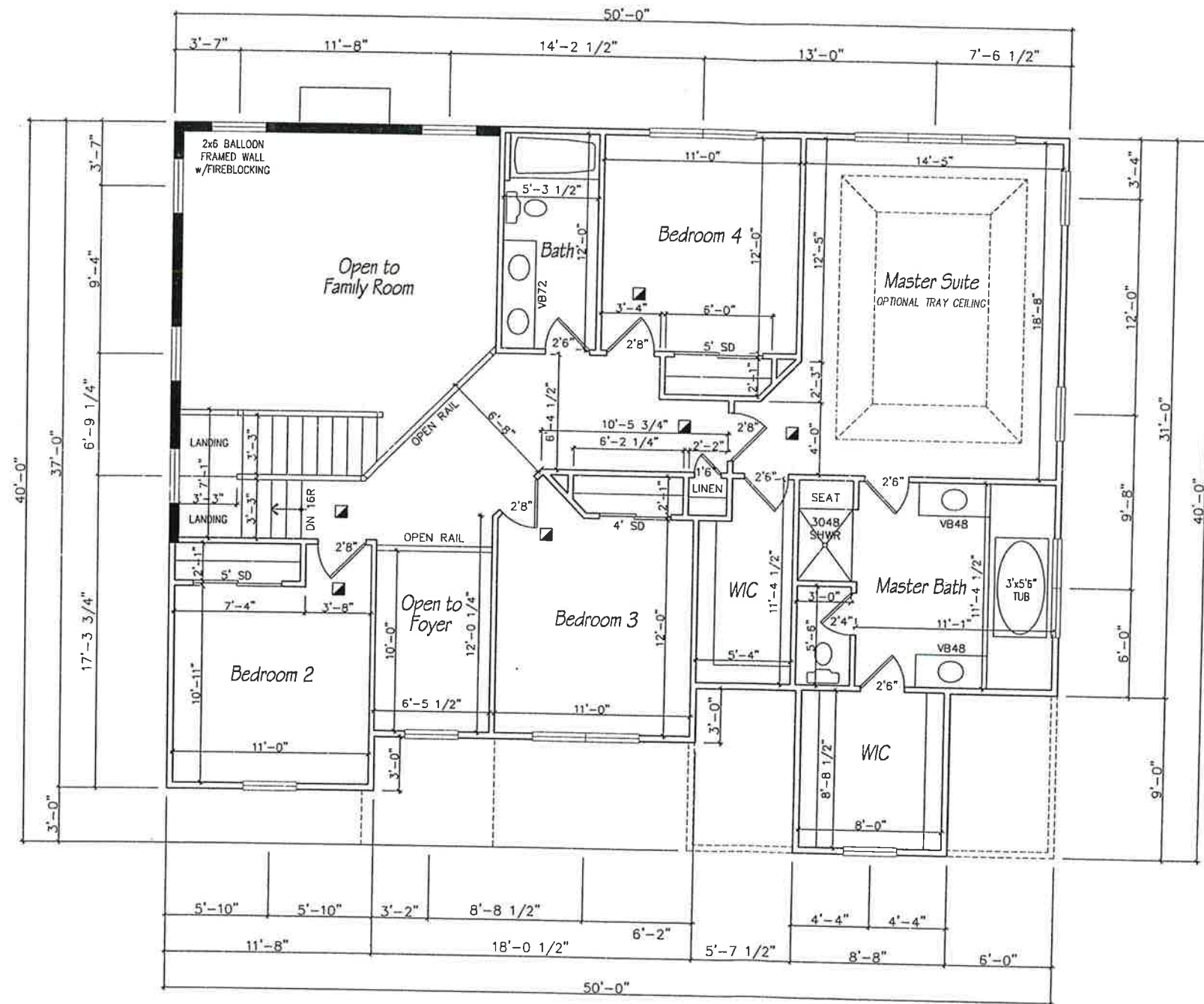
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A-3A

<p>STAIR NOTE: 10" TREADS PLUS 1" NOSING AND MAX 7 3/4" RISERS</p>	<p>NOTE: REFERENCE ELEVATIONS FOR WINDOW SIZES</p>	<p>INTERIOR HEADERS: (2)2X10 WITH (2)2X4 JACK UNLESS NOTED OTHERWISE</p>	<p>EXTERIOR SINGLE WINDOW AND DOOR HEADERS: (2)2X10 WITH (2)2X4 JACK UNLESS NOTED OTHERWISE</p>	<p>EXTERIOR TWIN WINDOW AND DOOR HEADERS: (2)2X10 WITH (2)2X4 JACK UNLESS NOTED OTHERWISE 3.5x9.25 PSL W/ 3 JACKS U.N.O. (6'-0" MAX)</p>	<p>POINT LOAD (MIN 3 STUDS U.N.O.) PROVIDE SOLID BLOCKING DOWN TO FOUNDATION OR BEAM BELOW</p>
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Second Floor Plan
scale: ref cover sheet

8'-1" PLATE HEIGHT

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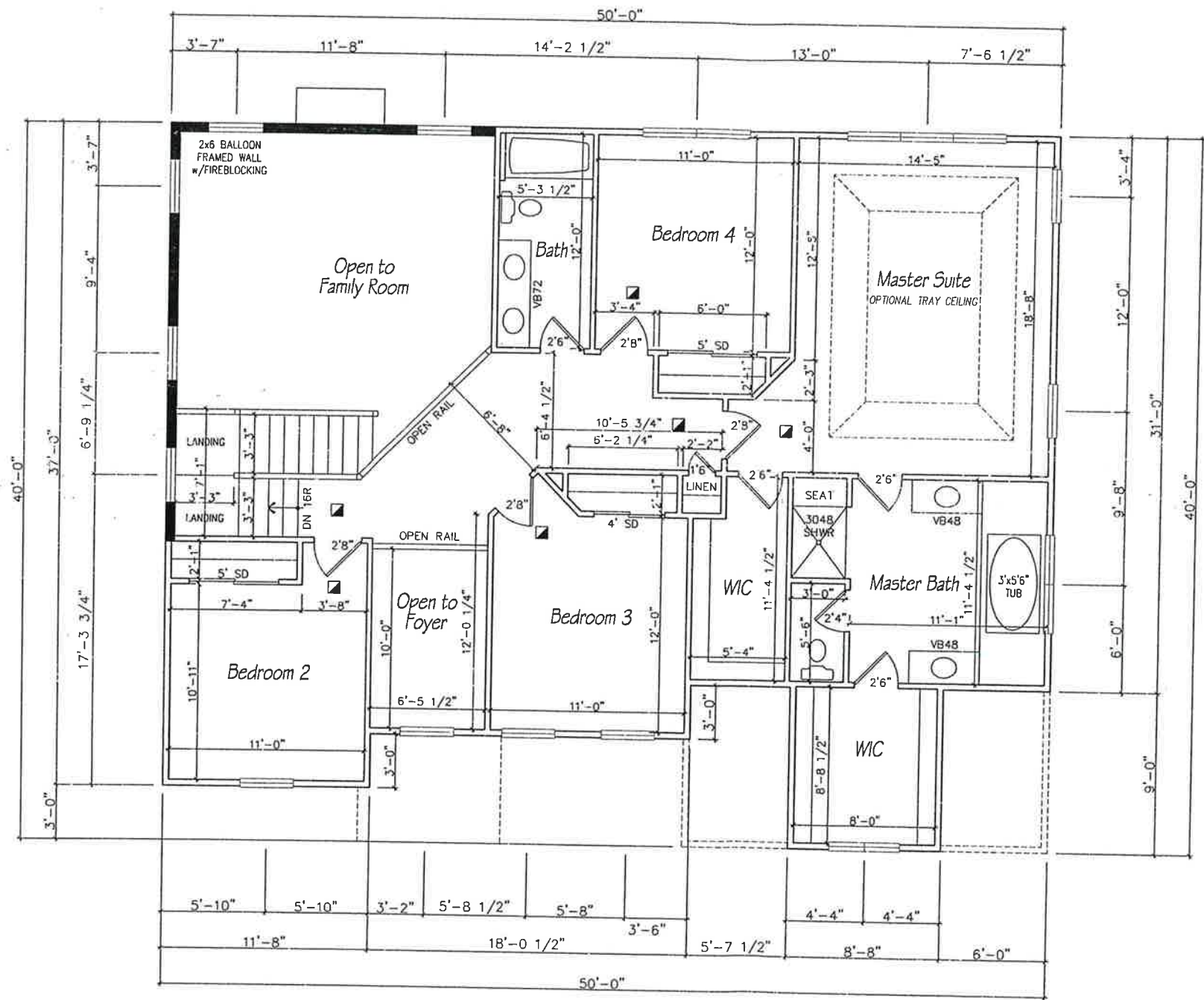
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MANOR

A-3B

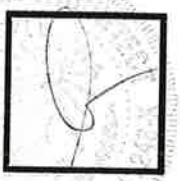
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Second Floor Plan
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8'-1" PLATE HEIGHT

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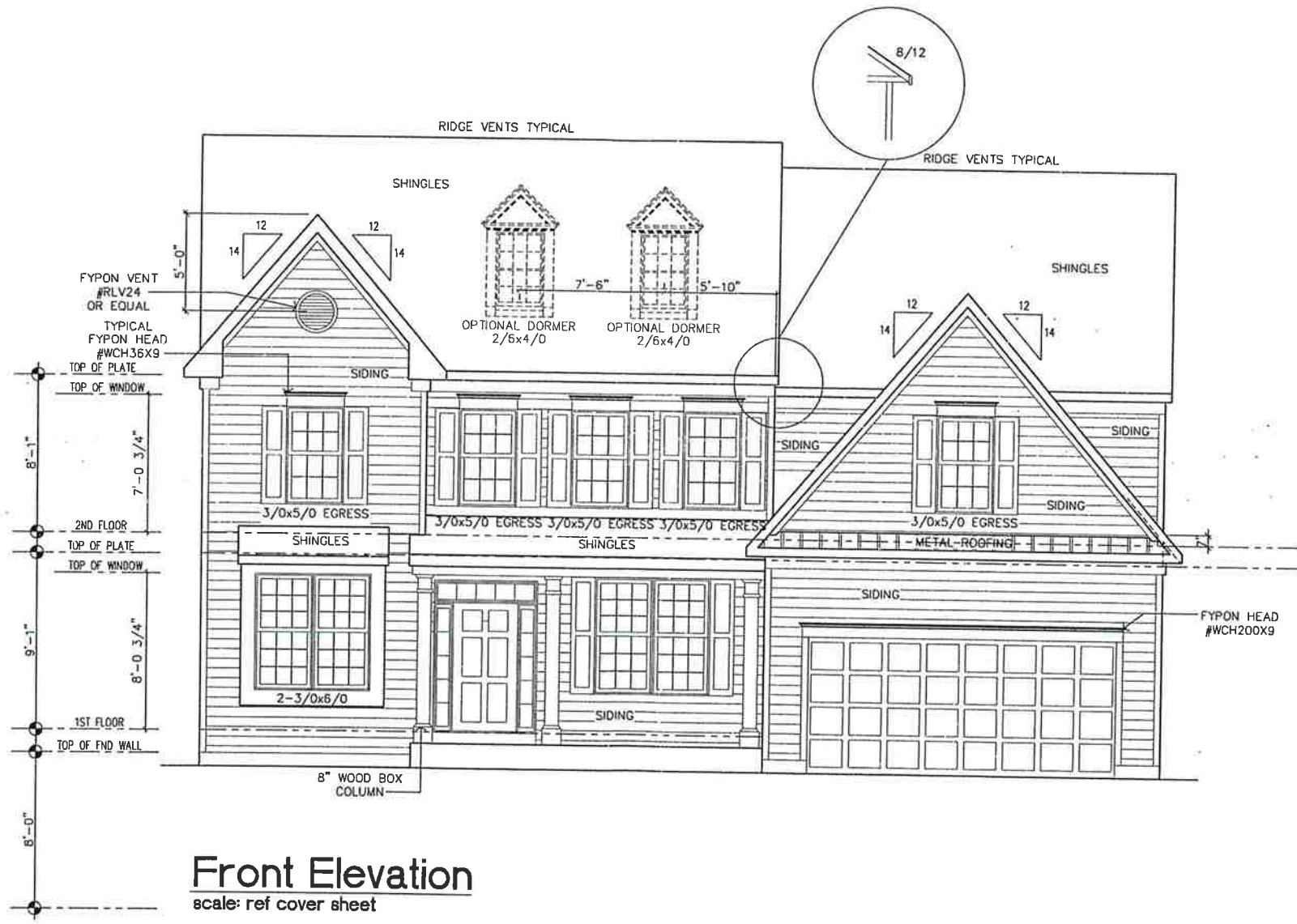


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CHATEAU

A-3C



Front Elevation
scale: ref cover sheet

- SILVERLINE WND MANU
- TYPICAL ELEVATION NOTES**
- 12" OVERHANGS FRONT & REAR
 - FLY GABLE(S) AT FRONT 12"
 - 2X8 ALUM WRAP FASCIA AND FREEZE
 - 2X6 ALUM WRAPPED RAKES
 - 15" PANEL SHUTTERS PER ELEVATION
 - PERFORATED VINYL SOFFITS
 - ENTRY DOOR:
3068 6 PANEL W/(2) 1068
5 LITE SIDELITES
12" TRANSOM ABOVE

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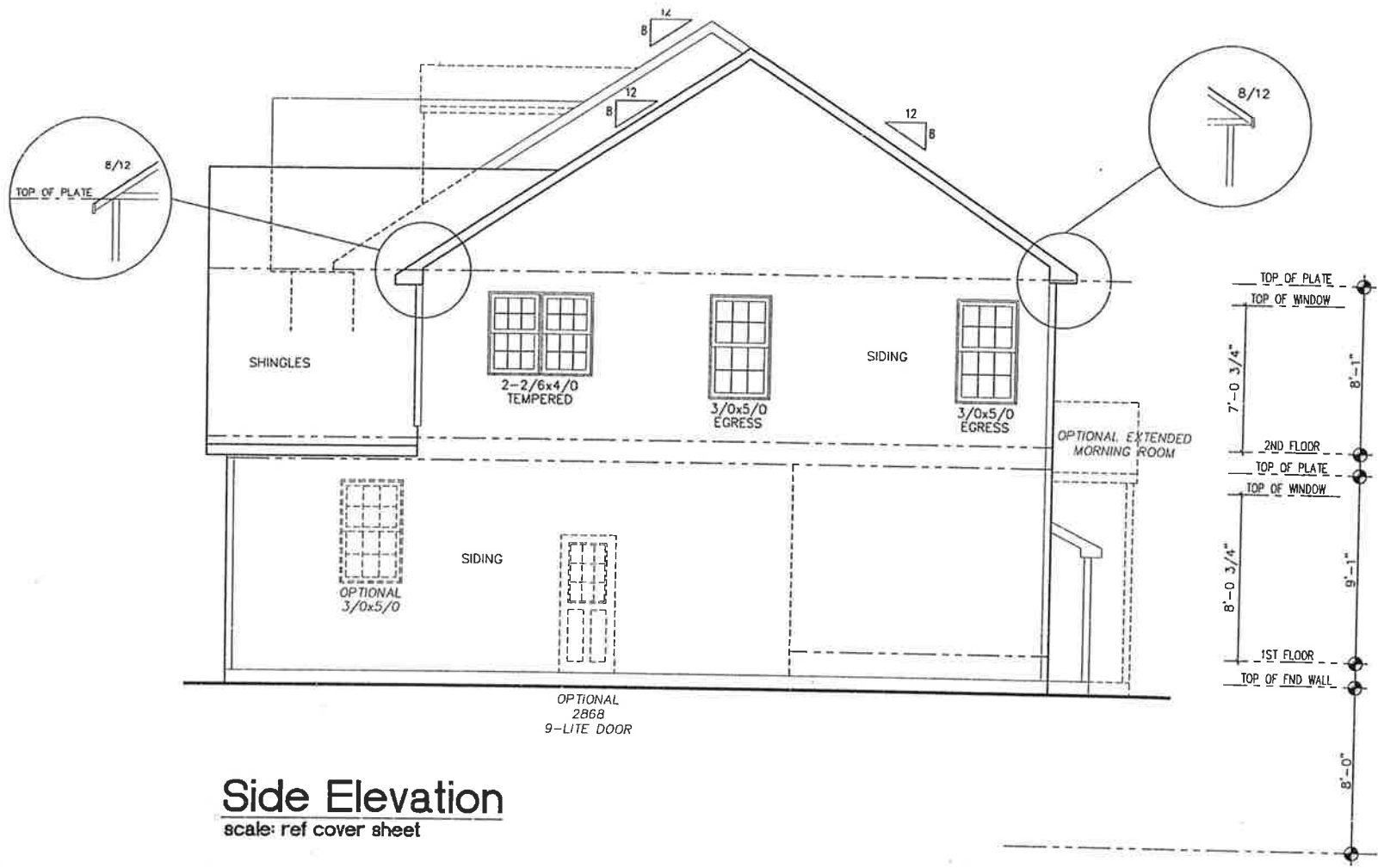


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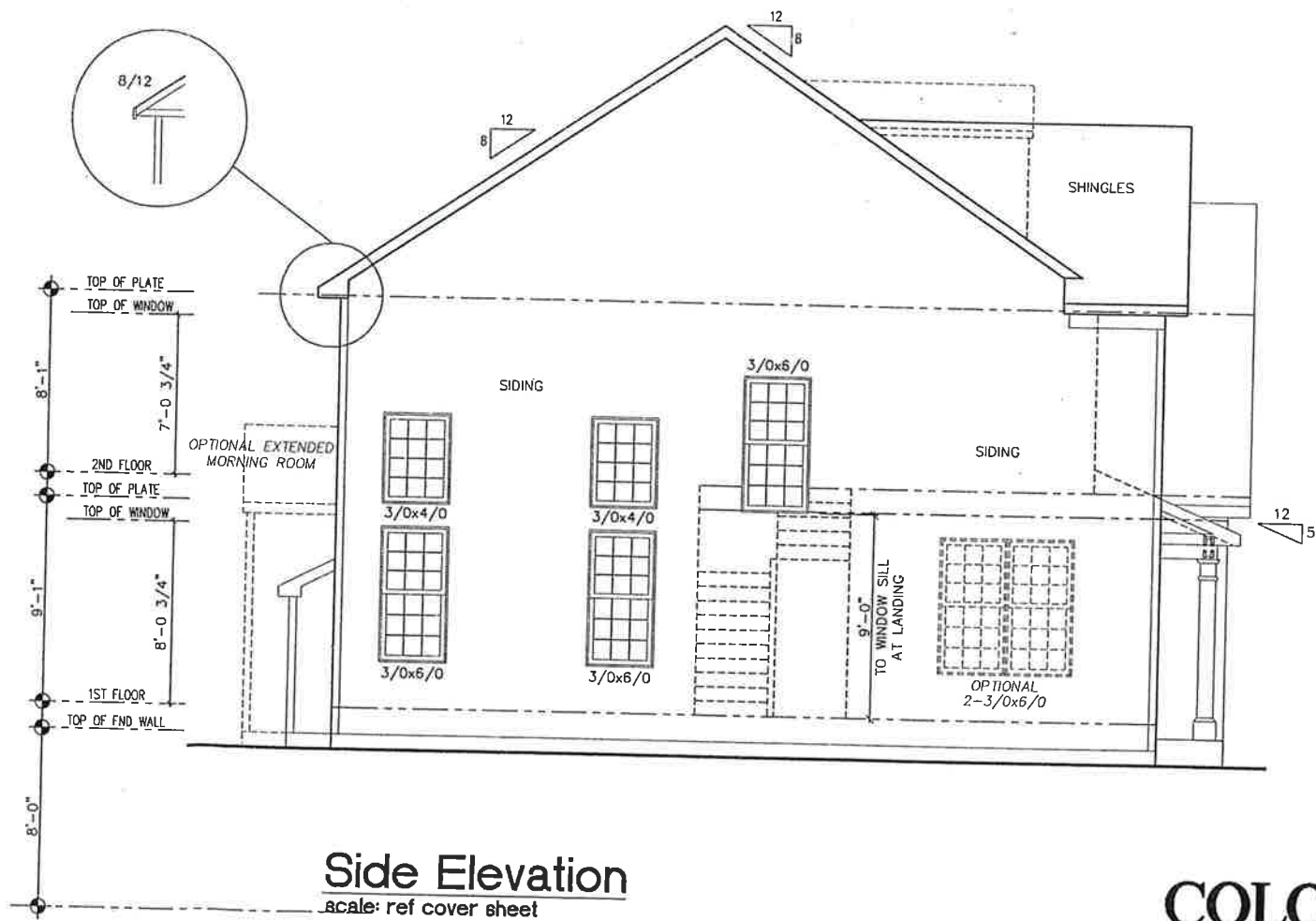
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A-4A



Side Elevation
scale: ref cover sheet



Side Elevation
scale: ref cover sheet

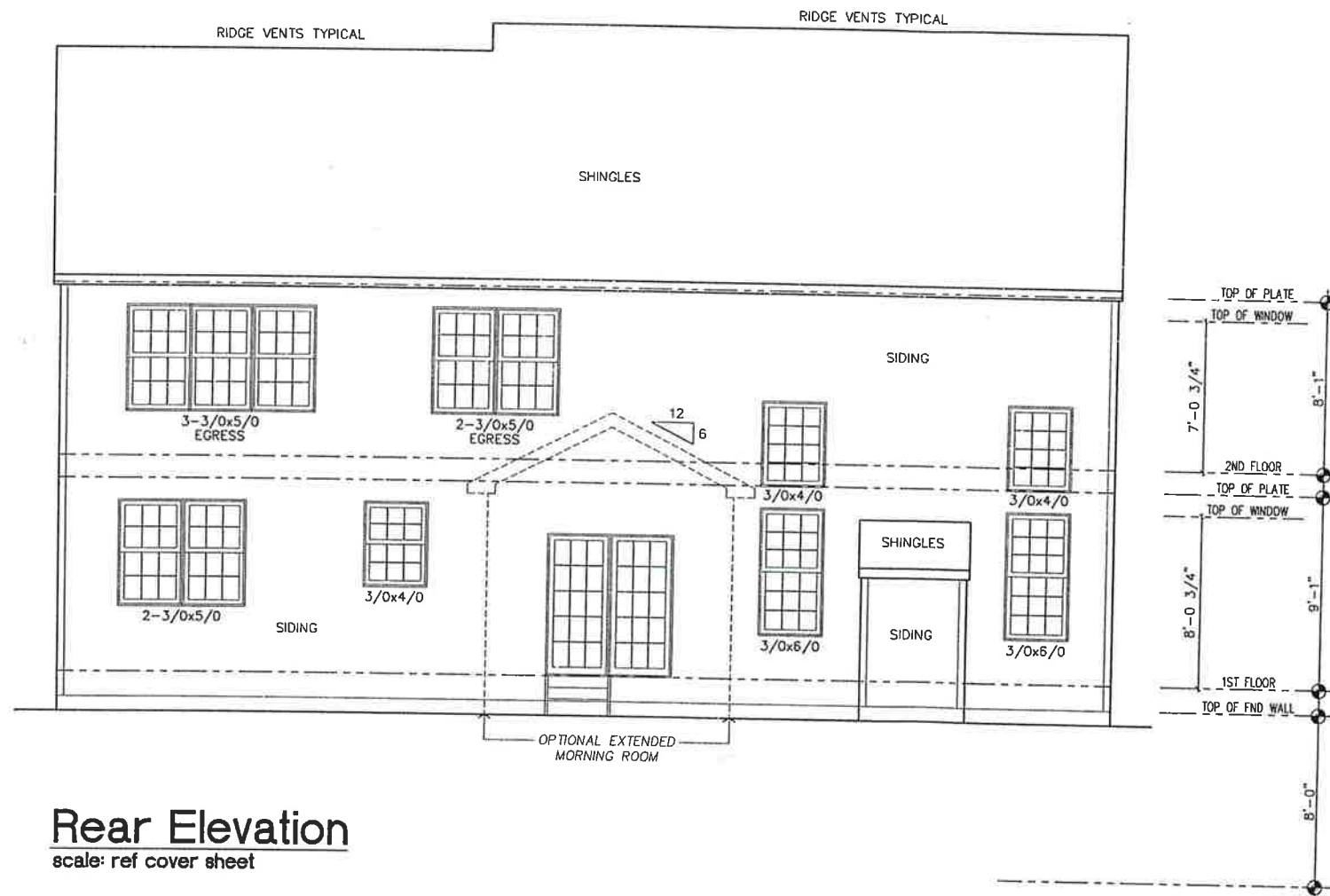
Voice: 215/442-1780
Fax: 215/442-1781
E-mail: theomniacgroup.com
323 South York Rd
Hatboro, Pa 19040

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Model J
DEWEY HOMES
Ravens Claw - Master

DRAWING DATE
9/2006
REVISION DATES



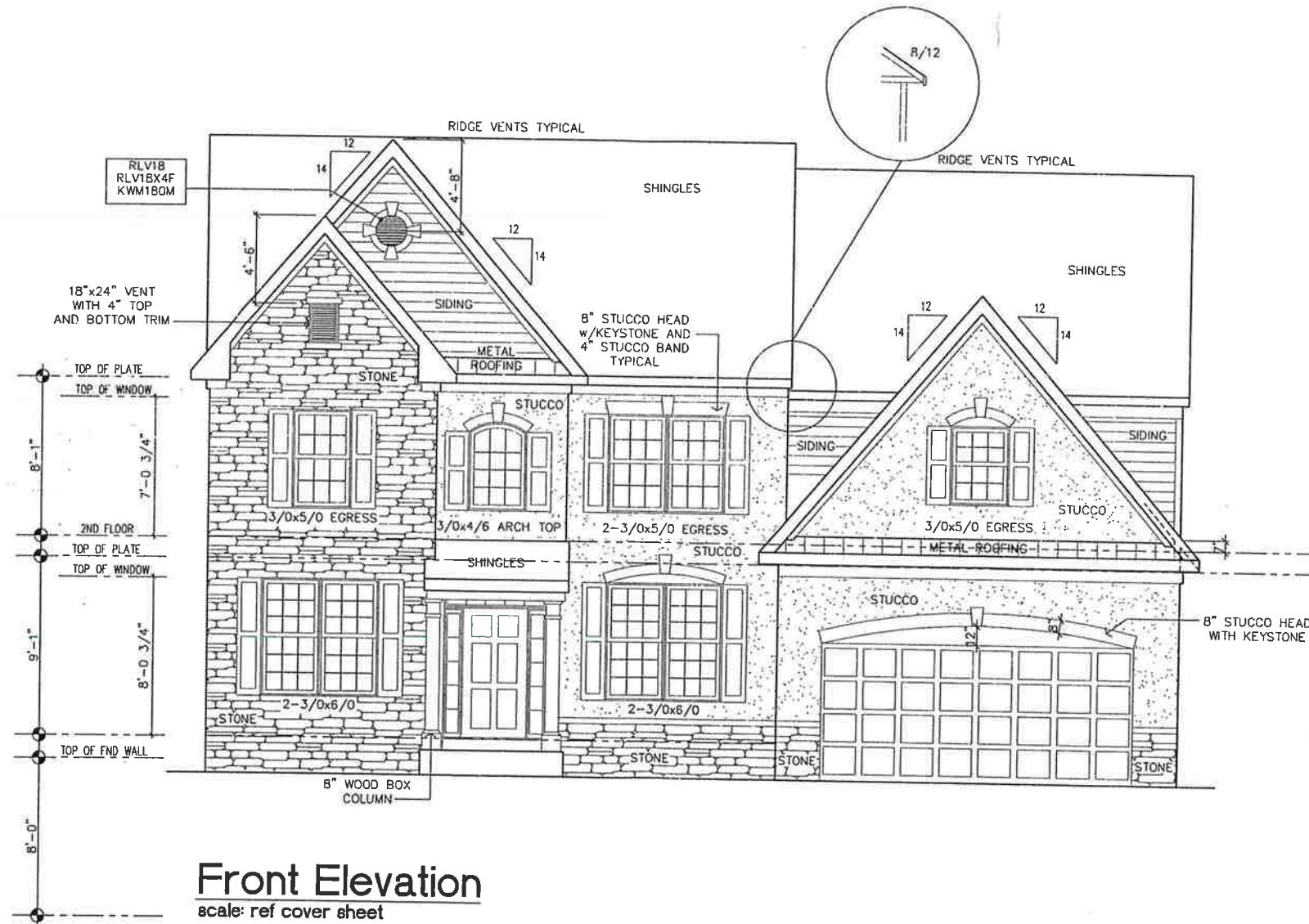
Rear Elevation
scale: ref cover sheet

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SILVERLINE WND MANU

TYPICAL ELEVATION NOTES

12" OVERHANGS FRONT & REAR
FLY GABLE(S) AT FRONT 12"

2XB ALUM WRAP
FASCIA AND FREEZE

2X6 ALUM WRAPPED RAKES

15" PANEL SHUTTERS
PER ELEVATION

PERFORATED VINYL
SOFFITS

ENTRY DOOR:
3068 6 PANEL W/(2) 1068
5 LITE SIDELITES
12" TRANSOM ABOVE

Voice: 215/442-780
Fax: 215/442-781
E-mail: theomniagroup.com
323 South York Rd
Haitboro, Pa 19040

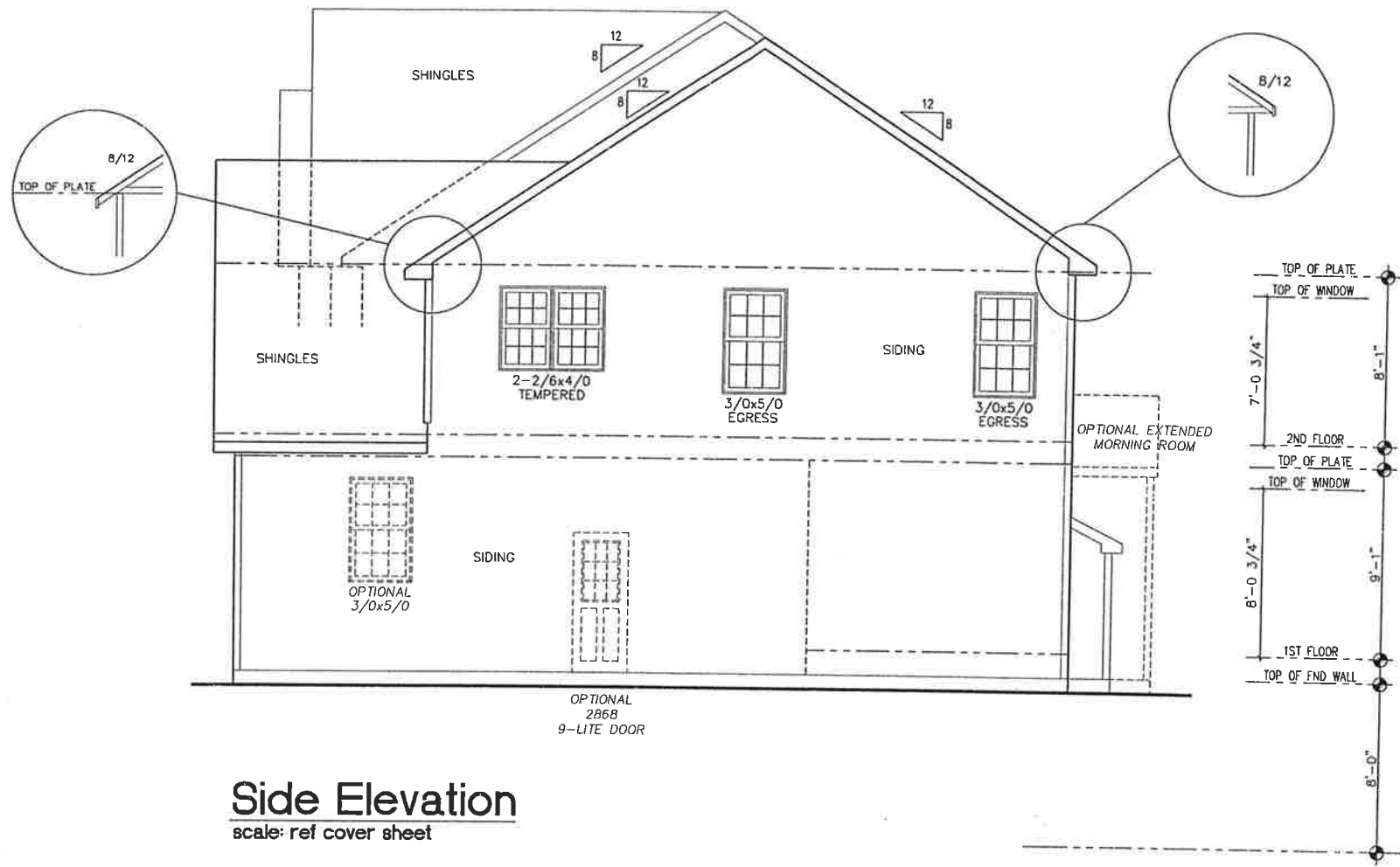


Model J
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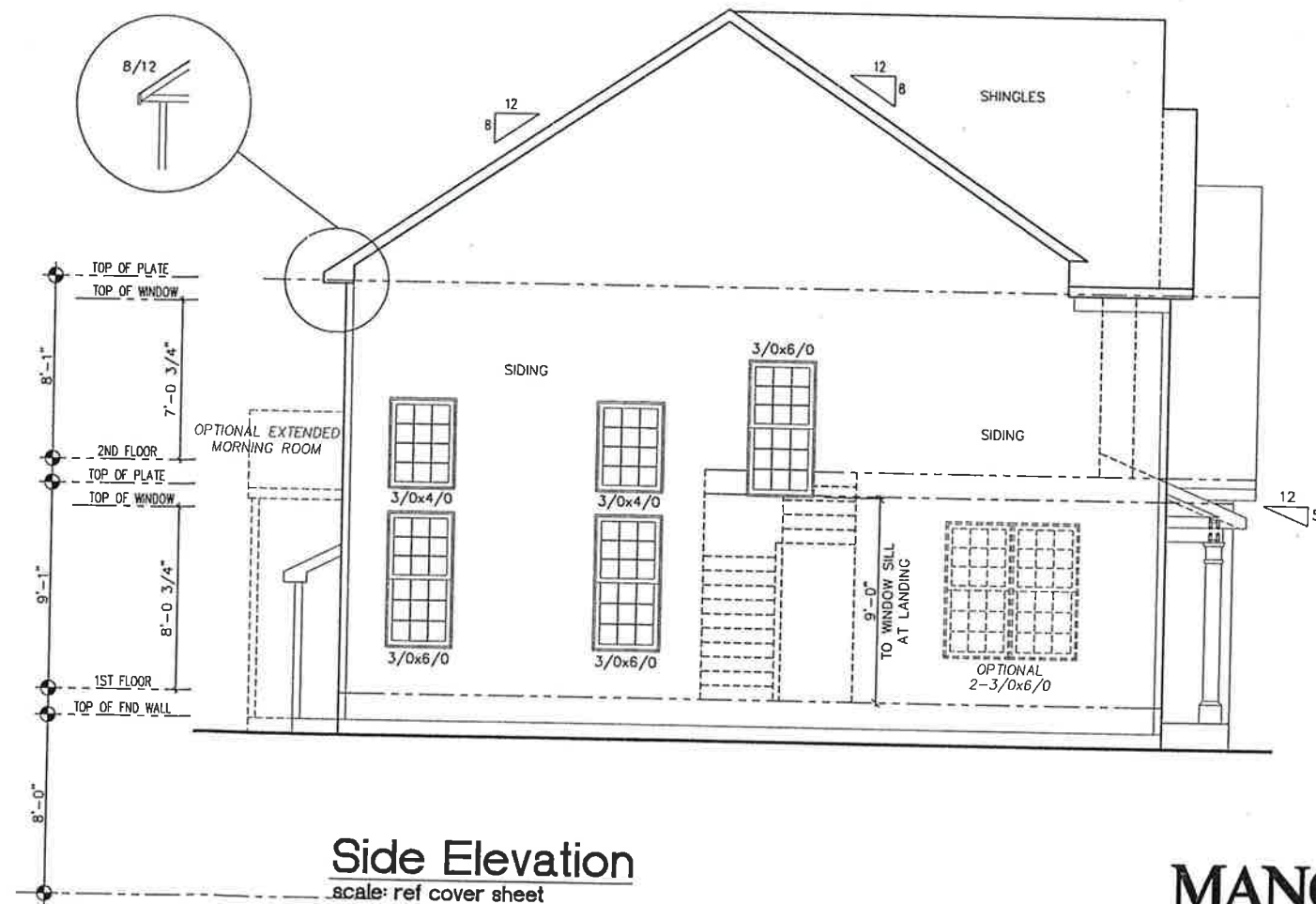
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REVISION DATES

MANOR

A-4B

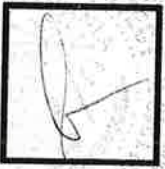


Side Elevation
scale: ref cover sheet



Side Elevation
scale: ref cover sheet

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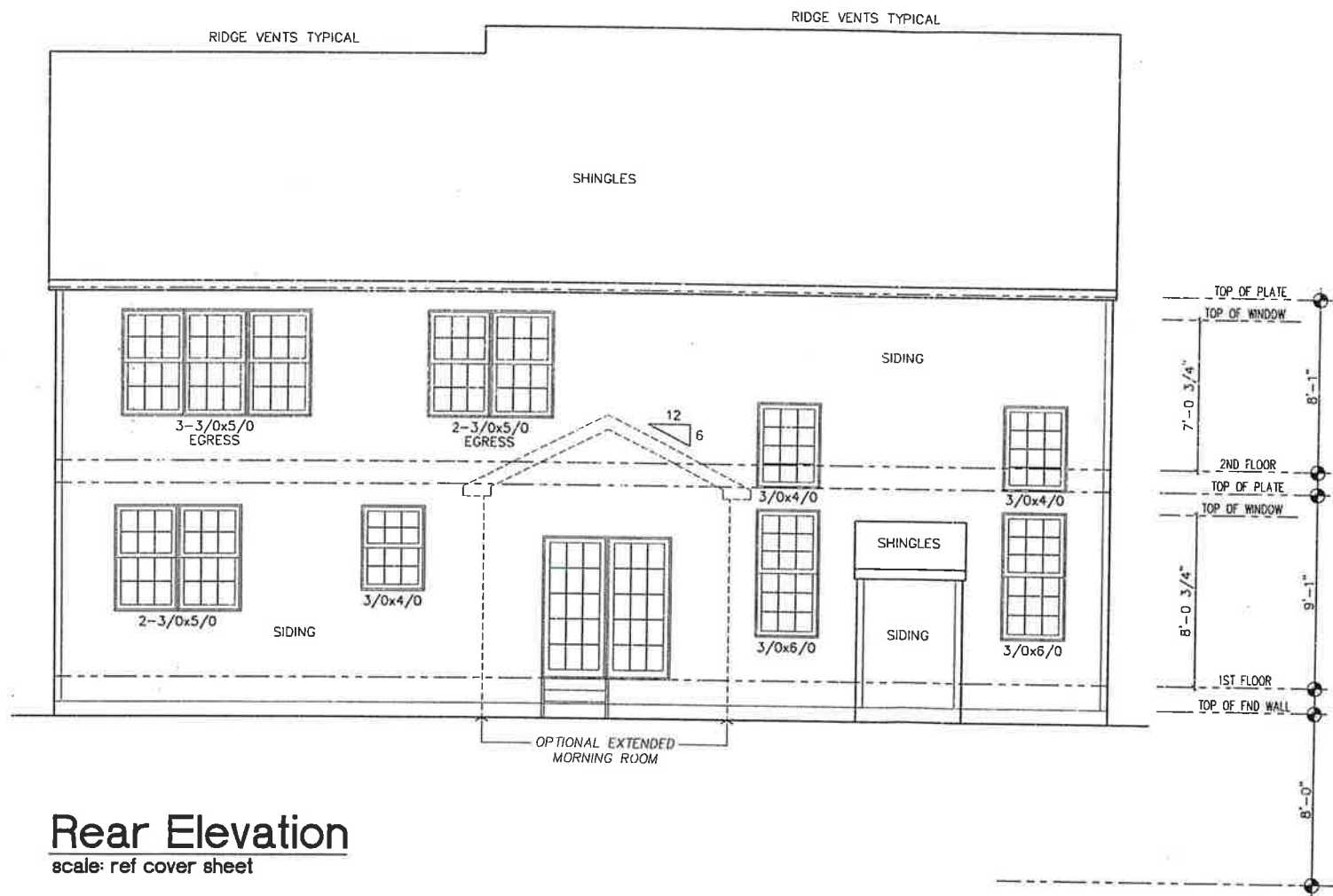


Model J
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 Ravens Claw - Master

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REVISION DATES

MANOR

A-4B.1



Rear Elevation
 scale: ref cover sheet

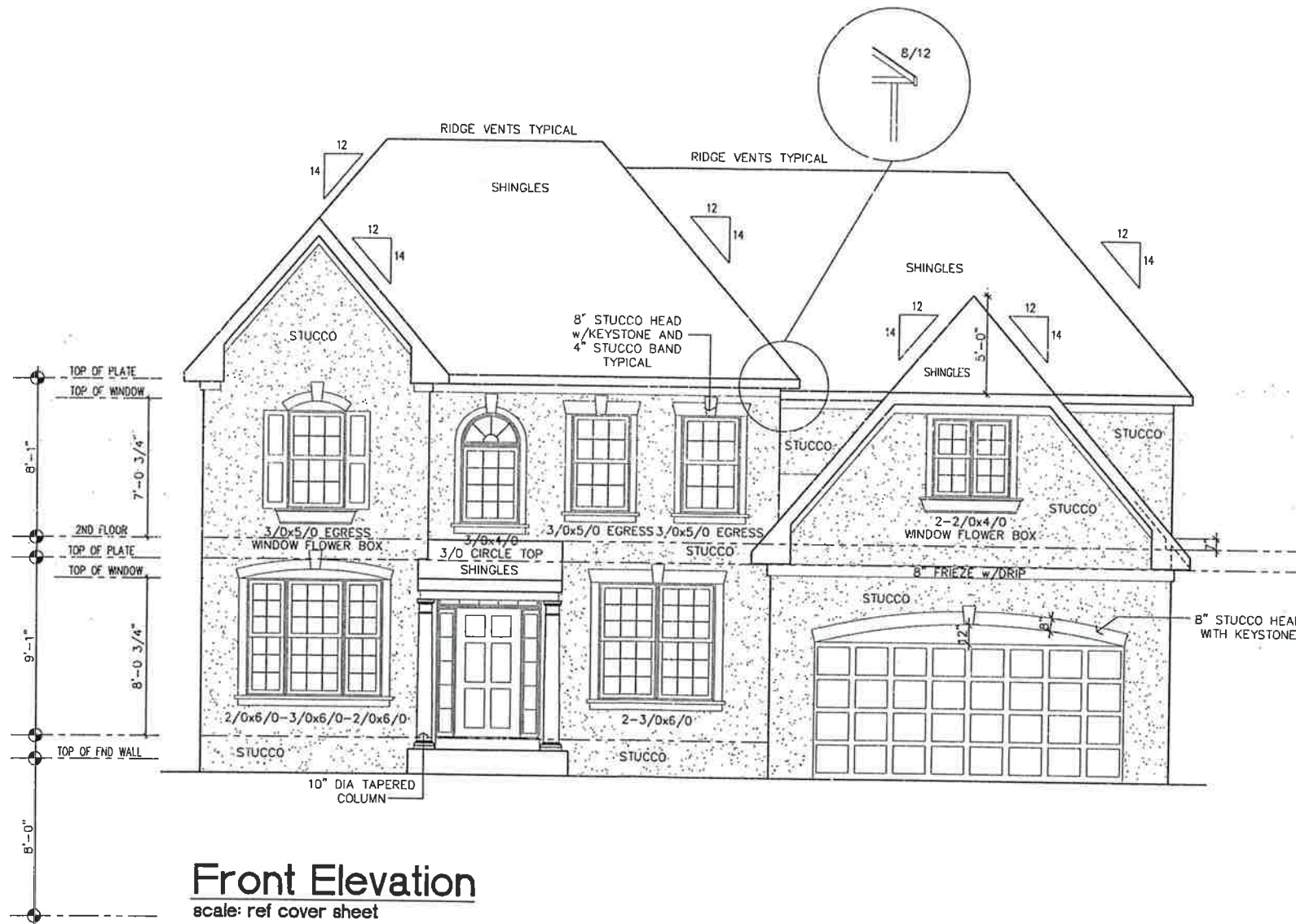
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A-4B.2



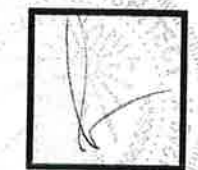
Front Elevation
scale: ref cover sheet

Chateau

- SILVERLINE WND MANU
- TYPICAL ELEVATION NOTES
- 12" OVERHANGS FRONT & REAR FLY GABLE(S) AT FRONT 12"
 - 2X8 ALUM WRAP FASCIA AND FREEZE
 - 2X6 ALUM WRAPPED RAKES
 - 15" PANEL SHUTTERS PER ELEVATION
 - PERFORATED VINYL SOFFITS
 - ENTRY DOOR:
3068 6 PANEL W/(2) 1068
5 LITE SIDELITES
12" TRANSOM ABOVE

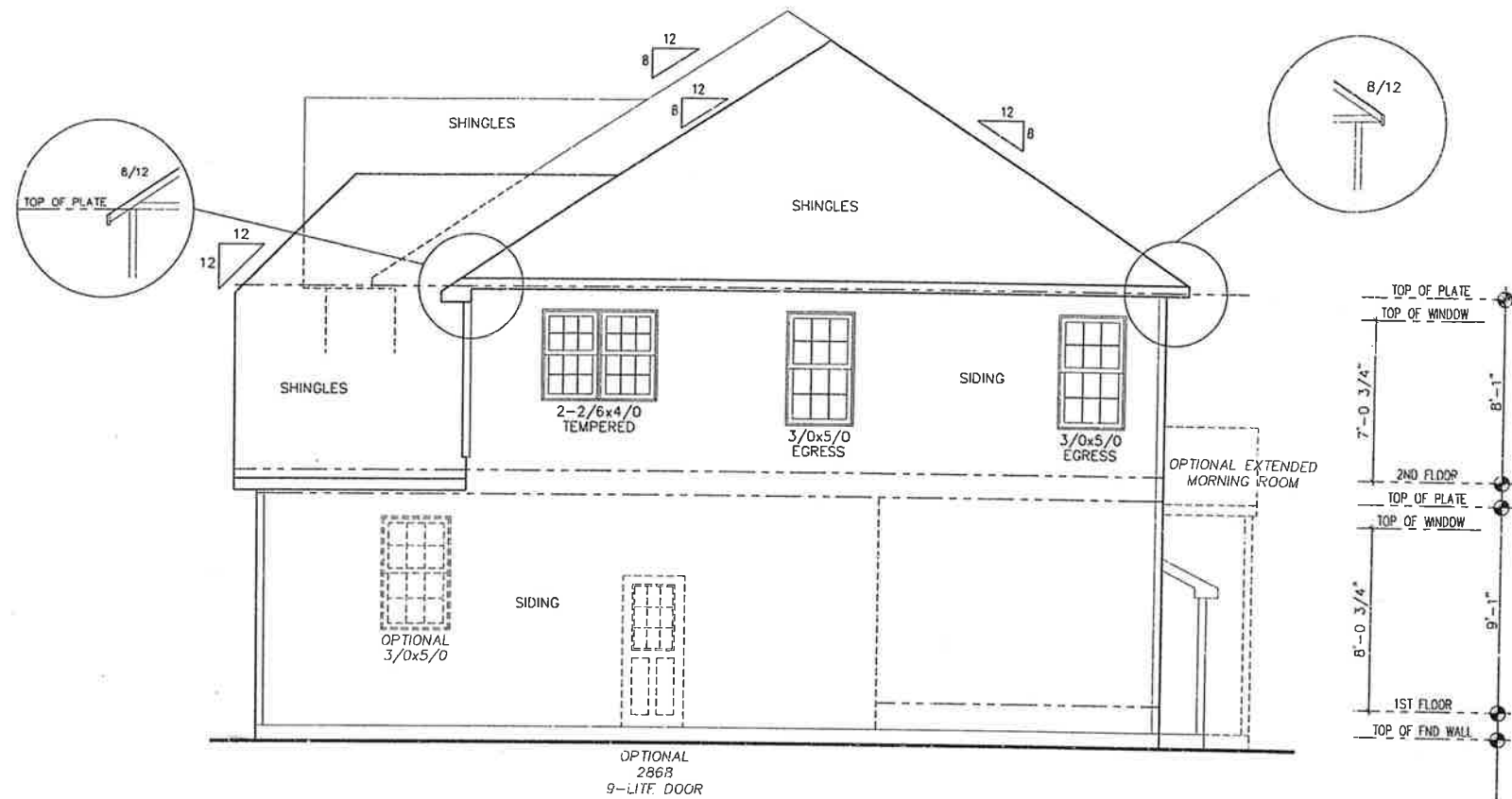
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E-mail: thecomnigroup.com
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Hatboro, Pa 19040

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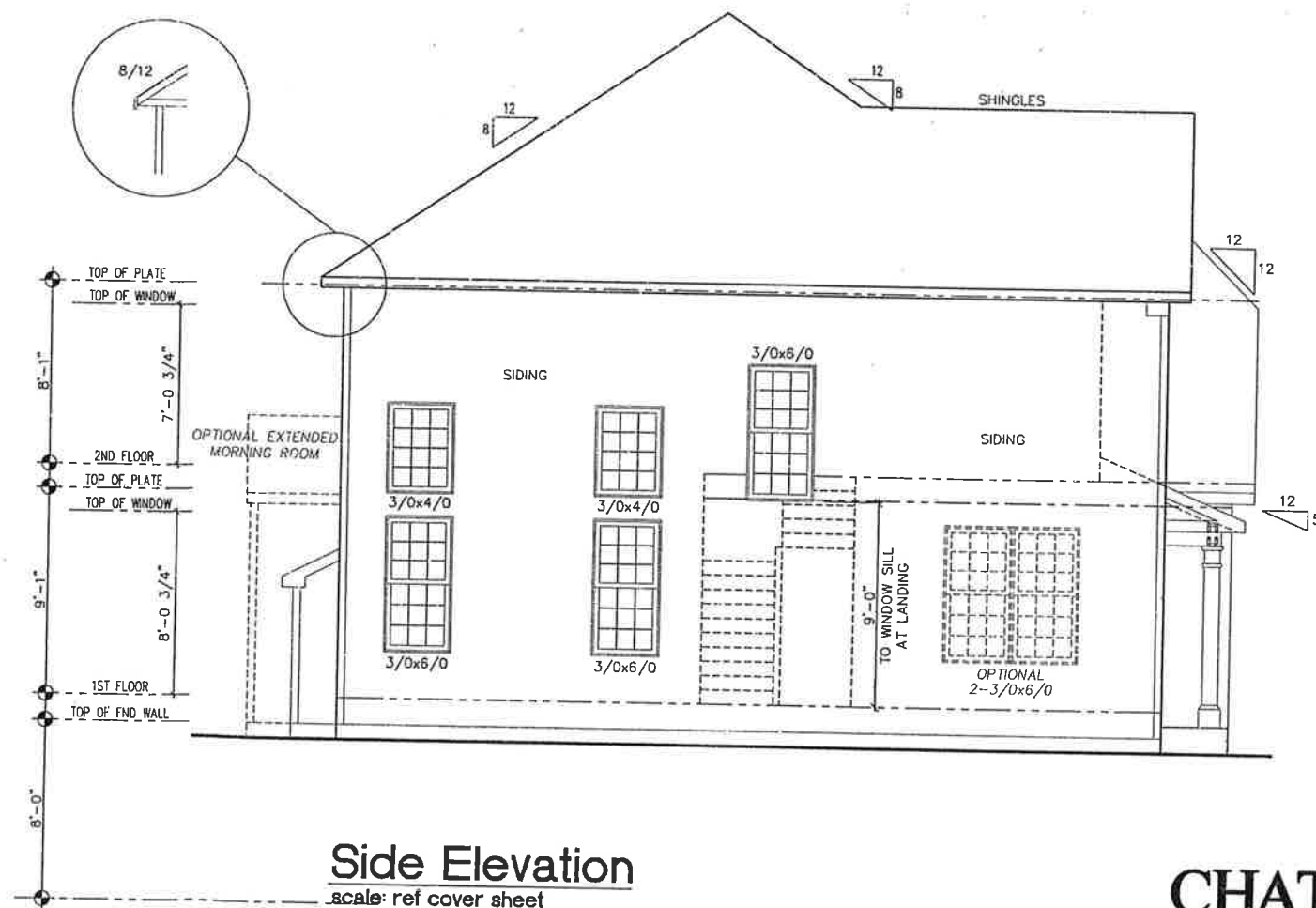


Model J
DEWEY HOMES
Ravens Claw - Master

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Side Elevation
scale: ref cover sheet



Side Elevation
scale: ref cover sheet

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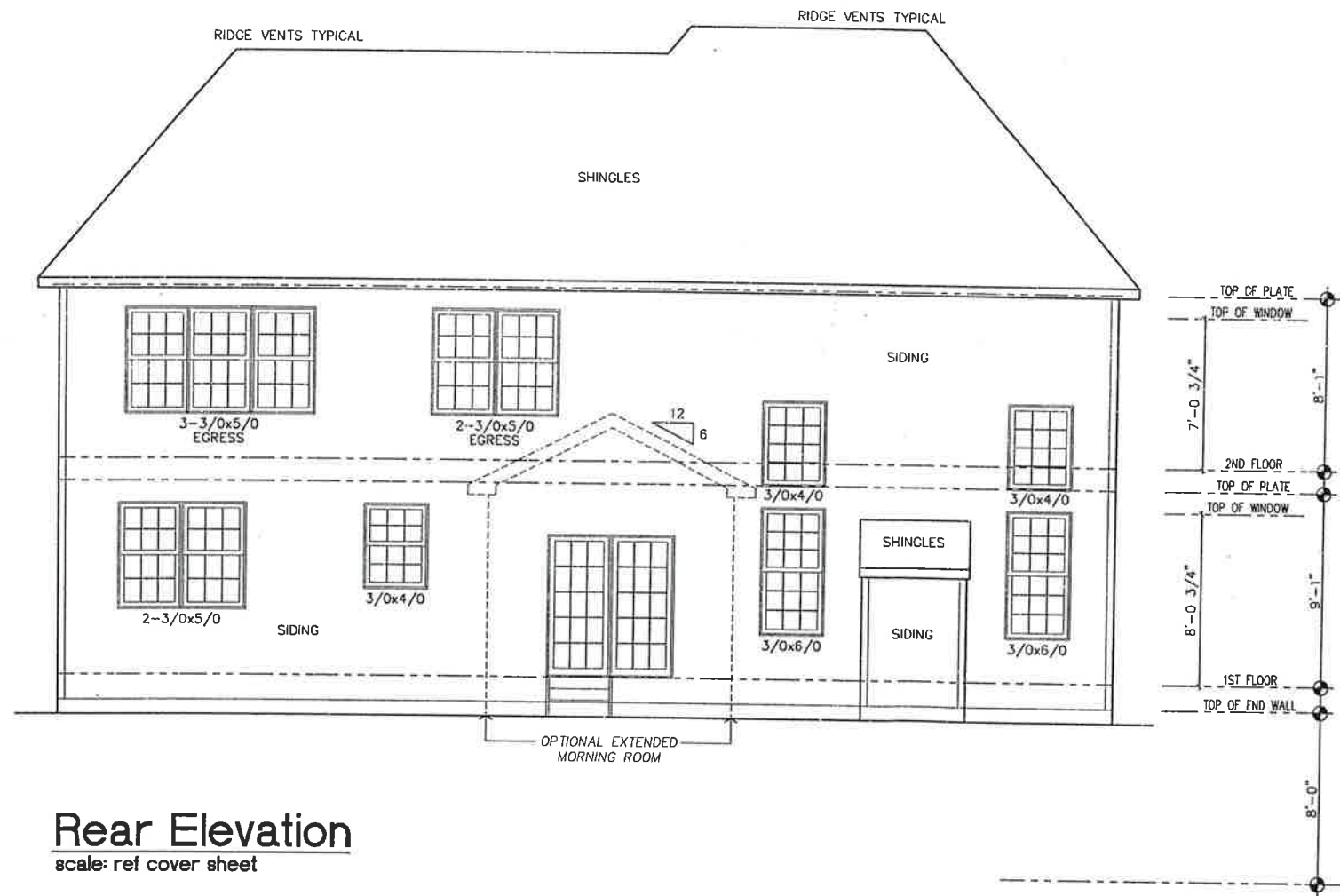


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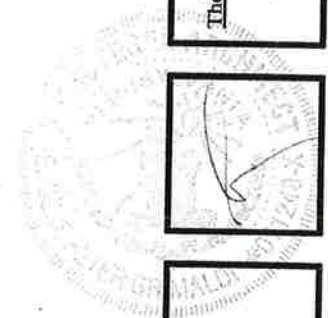
DATE	REVISION
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	REVISION DATES

CHATEAU

A-4C.1



Rear Elevation
scale: ref cover sheet



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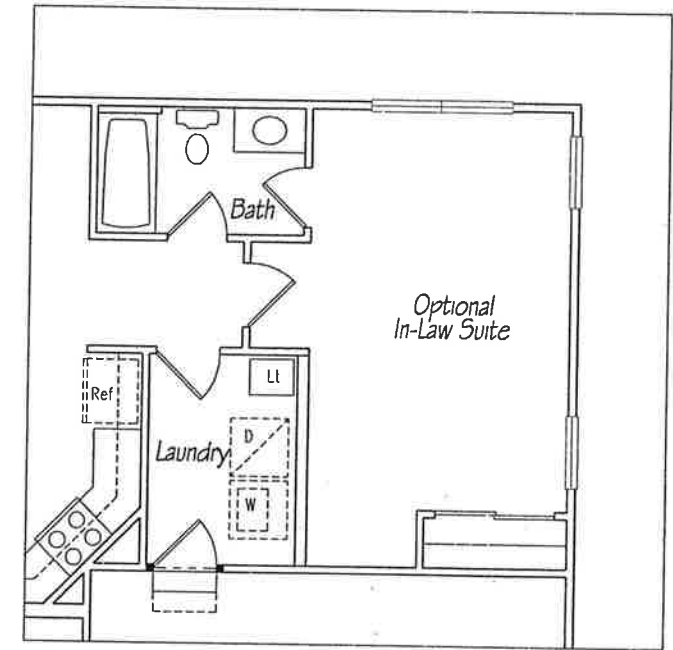
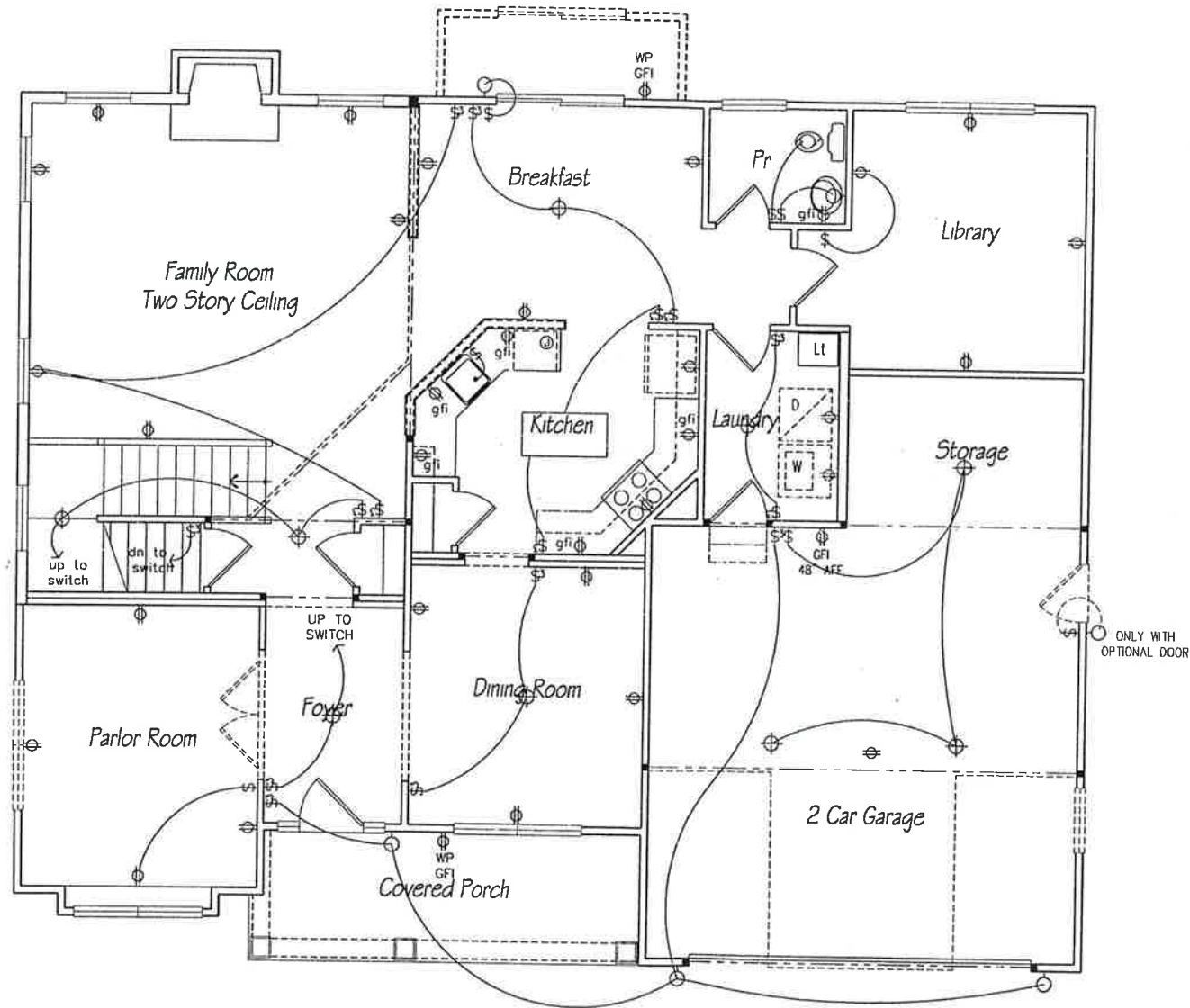
DRAWING DATE
9/2006
REVISION DATES

ELECTRICAL LEGEND:

- ⊕ CEILING MOUNTED LIGHT FIXTURE
- ⊖ WALL MOUNTED LIGHT FIXTURE
- ⊙ RECESSED LIGHT FIXTURE
- ⊙ RECESSED LIGHT FIXTURE (EYEBALL)
- WALL MTD. STRIP FIXTURE W/ NO. OF BULBS INDICATED
- FLUORESCENT FIXTURE W /NO. OF TUBES INDICATED
- ⊖ WALL MOUNTED FLOOD LIGHTS
- ⊖ 110V. DUPLEX OUTLET : 14" ABOVE FLOOR-TYPICAL
- ⊖ 110V. DUPLEX OUTLET - 1/2 HDT : 14" ABOVE FLOOR-TYPICAL
- ⊖ 220V. OUTLET
- ⊖ WP WATERPROOF OUTLET
- ⊖ GFI GROUNDFAULT OUTLET
- ⊖ 48" DISTANCE ABOVE FLOOR : OTHER THAN 14"
- ⊖ SINGLE POLE SWITCH: 52" A.F.F. - TYPICAL
- ⊖ THREE WAY SWITCH: 52" A.F.F.- TYPICAL
- ⊖ THERMOSTAT: 60" A.F.F. - TYPICAL
- ⊖ JUNCTION BOX 110V.
- GARBAGE DISPOSAL
- ⊖ EXHAUST FAN
- ⊖ EXHAUST FAN W/ LIGHT
- ⊖ TELEVISION OUTLET
- ⊖ DOOR BELL
- ⊖ TELEPHONE OUTLET
- ⊖ SMOKE DETECTOR W/110V. JUNCTION BOX
- ⊖ CO2 DETECTOR W/110V. JUNCTION BOX
- ⊖ ELECTRICAL PANEL
- ⊖ FREEZE PROTECTED HOSE BIB

NOTES:

- ALL ABOVE COUNTER OUTLETS AND SWITCHES ⊖ 44" AFF
- BEDROOM SMOKE DETECTORS INSTALLED ONLY WHEN REQUIRED BY TOWNSHIP



Optional In-Law Suite

First Floor Electrical Plan
scale: ref cover sheet

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Model J
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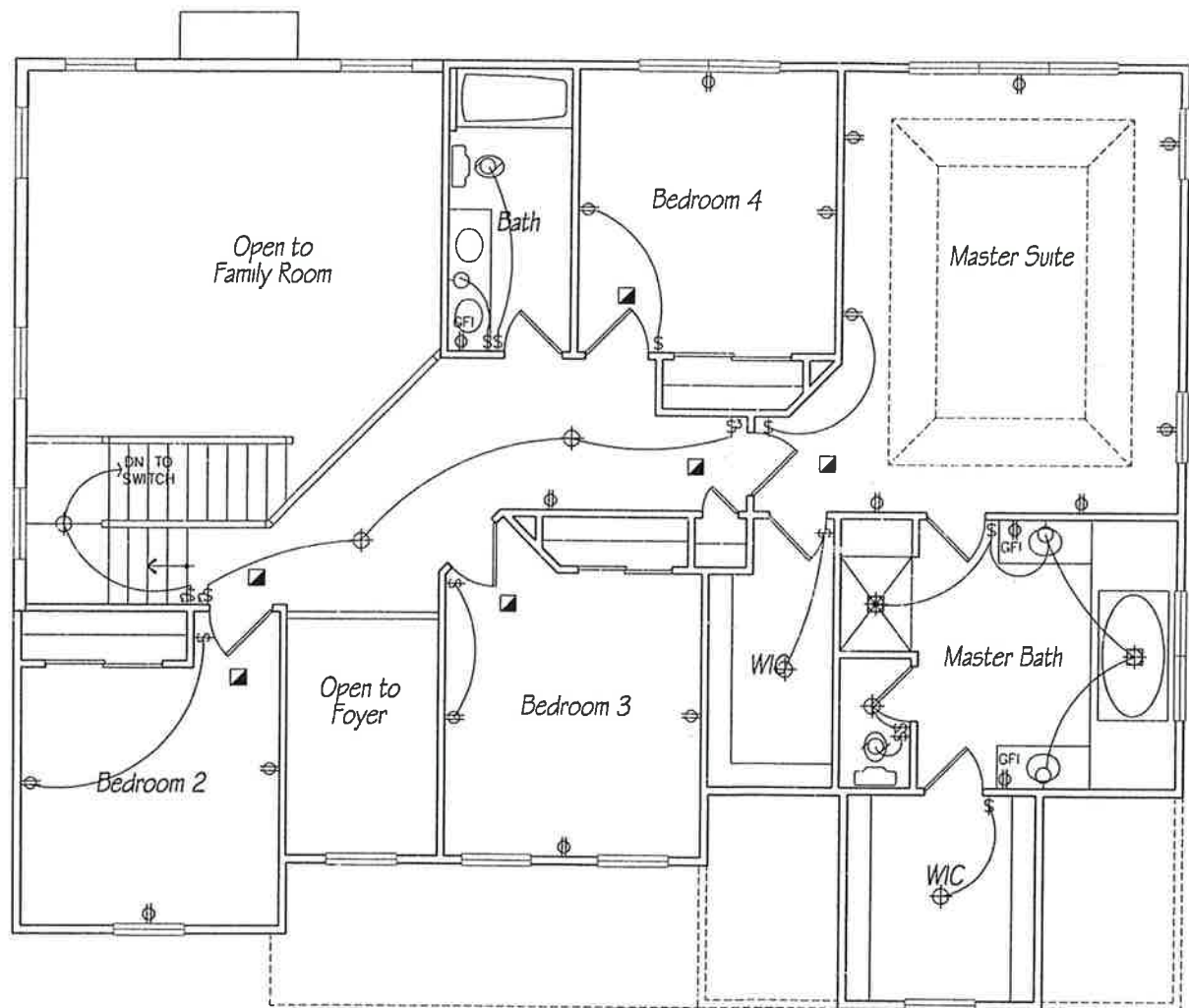
DRAWING DATE
 9/2006
 REVISION DATES

ELECTRICAL LEGEND:

- ⊕ CEILING MOUNTED LIGHT FIXTURE
- ⊖ WALL MOUNTED LIGHT FIXTURE
- ⊖ RECESSED LIGHT FIXTURE
- RECESSED LIGHT FIXTURE (EYEBALL)
- WALL MTD. STRIP FIXTURE W/ NO. OF BULBS INDICATED
- ⊖ FLUORESCENT FIXTURE W /NO. OF TUBES INDICATED
- ⊖ WALL MOUNTED FLOOD LIGHTS
- ⊖ 110V. DUPLEX OUTLET : 14" ABOVE FLOOR-TYPICAL
- ⊖ 110V. DUPLEX OUTLET - 1/2 HDT : 14" ABOVE FLOOR-TYPICAL
- ⊖ 220V. OUTLET
- ⊖ WP WATERPROOF OUTLET
- ⊖ GFI GROUNDFAULT OUTLET
- ⊖ 48" DISTANCE ABOVE FLOOR : OTHER THAN 14"
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- ⊖ THERMOSTAT: 60" A.F.F. - TYPICAL
- ⊖ JUNCTION BOX 110V.
- GARBAGE DISPOSAL
- ⊖ EXHAUST FAN
- ⊖ EXHAUST FAN W/ LIGHT
- ⊖ TELEVISION OUTLET
- ⊖ DOOR BELL
- ⊖ TELEPHONE OUTLET
- ⊖ SMOKE DETECTOR W/110V. JUNCTION BOX
- ⊖ CO2 DETECTOR W/110V. JUNCTION BOX
- ⊖ ELECTRICAL PANEL
- ⊖ FREEZE PROTECTED HOSE BIB

NOTES:

- ALL ABOVE COUNTER OUTLETS AND SWITCHES ⊕ 44" AFF
- BEDROOM SMOKE DETECTORS INSTALLED ONLY WHEN REQUIRED BY TOWNSHIP



Second Floor Electrical Plan
scale: ref cover sheet

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