Allied Building Inspection Services
Inspections. Testing. Engineering
Certificate of Authorization: 28536

December 22, 2022

Building Official
City of Pompano Beach
100 W. Atlantic Blvd.
Pompano Beach, FL 33060

RE: Building Safety Inspection Reports
Subject: 700 Pine Drive, Pompano Beach, FL 33060
Folio: See Attached Schedule

Dear Building Official,

Enclosed, please find the structural report in the format required by your office. This building is structurally and electrically safe for its present use and occupancy. Please allow this letter to serve as our recommendation for re-certification.

As a routine matter, in order to avoid possible misunderstanding, nothing in this report should be construed directly or indirectly as a guarantee for any portion of the structure. To the best of my knowledge and ability, this report represents an accurate appraisal of the present condition of the building.

Sincerely,

Allied Building Inspection Services, Inc

Mark Reardon
Digitally signed by Mark Reardon
Date: 2023.01.03 21:02:24 -05'00'

Mark Reardon RA 17521

ALLIED
BUILDING INSPECTION SERVICES

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*8203 SW 124th Street, Miami, Florida 33156 * Tel: (305) 234-7377 * Fax: (305) 234-7664*

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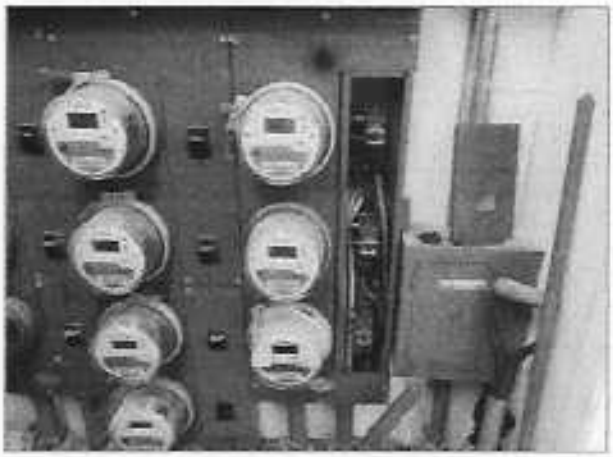

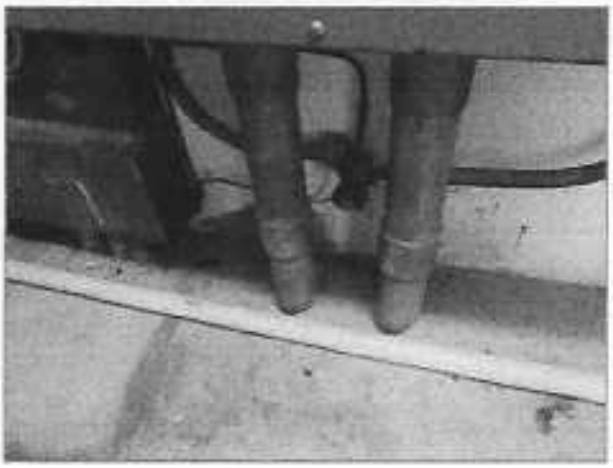

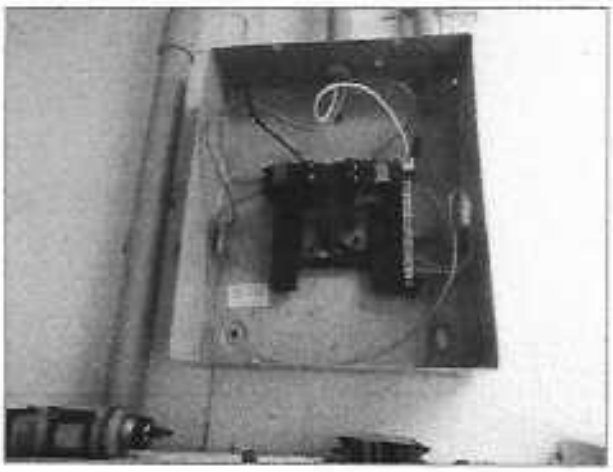

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We have located more than one record for the information you entered.
Directions: Click the folio number to see property details.

○ Sort By Folio Number ○ Sort By Name ◉ Sort By Address

30 Records Found

Folio Number	Owner Name	Property Address
494201AC0010	BELANGER, GAETAN	700 PINE DRIVE 101
494201AC0020	WIELAND, ARLENE EST	700 PINE DRIVE 102
494201AC0030	SACHS, LAURA H/E STRAMIELLO, JOSEPH	700 PINE DRIVE 103
494201AC0040	BEDEI, ALINE	700 PINE DRIVE 104
494201AC0050	BEAUCHAMP, LESHEA	700 PINE DRIVE 105
494201AC0060	ANDERSON, ANTHONY MCCARTER, GEMMA	700 PINE DRIVE 106
494201AC0070	STOLLER, GENE STOLLER, DIANE	700 PINE DRIVE 107
494201AC0080	SWEENEY, TIMOTHY	700 PINE DRIVE 108
494201AC0090	WALBERT, TIMOTHY	700 PINE DRIVE 109
494201AC0100	POST, L E L E POST REV TR	700 PINE DRIVE 110
494201AC0110	PERRY, JEFFREY D PERRY, JOSEPH B	700 PINE DRIVE 201
494201AC0120	DUFFY, ELAINE M & DUFFY, MICHAEL J	700 PINE DRIVE 202
494201AC0130	OLUICH, MICHAEL	700 PINE DRIVE 203
494201AC0140	PICARD, JEAN & THERESE	700 PINE DRIVE 204
494201AC0150	DOMBROFF, DAVID & MARLO	700 PINE DRIVE 205
494201AC0160	ISAKSON, ANGELA D ISAKSON, ERIC S	700 PINE DRIVE 206
494201AC0170	GASPER, MICHAEL J SR	700 PINE DRIVE 207
494201AC0180	CALEX HOLDINGS INC	700 PINE DRIVE 208
494201AC0190	REZZA, ELIZABETH T	700 PINE DRIVE 209
494201AC0200	KAPPEN, LEAH KAPPEN, JOAN ELLEN	700 PINE DRIVE 210
494201AC0210	LIED, TORUNN KIRSTINE SIMONSEN, TERJE	700 PINE DRIVE 301
494201AC0220	GHILAIN, DIANE & JOHN	700 PINE DRIVE 302
494201AC0230	STROUB, ARTHUR G	700 PINE DRIVE 303
494201AC0240	BRAYNE, WINSTON J	700 PINE DRIVE 304
494201AC0250	SMITH, JENNY S	700 PINE DRIVE 305
494201AC0260	BUFALINO, WILLIAM EUGENE III	700 PINE DRIVE 306
494201AC0270	ANDERSEN, GURI SEVERIN ANDERSEN, MORTEN	700 PINE DRIVE 307
494201AC0280	WINDER, EDWARD A	700 PINE DRIVE 308
494201AC0290	RAMPONI, LAURENCE	700 PINE DRIVE 309
494201AC0300	DOYLE, SHARON	700 PINE DRIVE 310

ELECTRICAL SAFETY INSPECTION REPORT FORM

Inspection Firm or Individual Name: ALLIED BUILDING INSPECTION SERVICES

Address: 8203 SE 124TH STREET, PINECREST, FL 33156

Telephone Number: 305-234-7377

Inspection Commenced Date: 12-12-2022 Inspection Completed Date: 12-22-2022

☑ No Repairs Required ☐ Repairs are required as outlined in the attached inspection report

Licensed Professional,

Engineer/Architect Name: Mark Reardon

License Number: RA 17521

I am qualified to practice in the discipline in which I am hereby signing.

Signature Mark Reardon Digitally signed by Mark Reardon Date: Date: 2022.01.03 21:05:12 -05'00'

STATE OF FLORIDA MARK EDWARD REARDON AR0017521 REGISTERED ARCHITECT

This report has been based upon the minimum inspection guidelines for building safety inspection as listed in the Broward County Board of Rules and Appeals' Policy #05-05. To the best of my knowledge and ability, this report represents an accurate appraisal of the present condition of the electrical system, based upon careful evaluation of observed conditions, to the extent reasonably possible

DESCRIPTION OF STRUCTURE	
a. Name on Title:	GARDEN POINT CONDO
b. Street Address:	700 PINE DRIVE, POMPANO BEACH, FL 33060
c. Legal Description:	GARDEN POINT CONDO UNITS 101-310 PER CDO BK/PG: 3289/548
d. Owner's Name:	GARDEN POINT CONDO
e. Owner's Mailing Address:	700 PINE DRIVE, POMPANO BEACH, FL 33060
f. Folio Number of Property on which Building is Located:	SEE ATTACHED SCHEDULE
g. Building Code Occupancy Classification:	R-2
h. Present Use:	30 UNIT RESIDENTIAL CONDOMINIUM COMPLEX
i. General Description, Type of Construction:	Square Footage: Number of Stories:
j. Special Features:	NONE NOTED
k. Additional Comments:	NONE

MINIMUM GUIDELINES AND INFORMATION FOR RECERTIFICATION OF ELECTRICAL SYSTEMS OF FORTY (40) YEAR STRUCTURES

1. ELECTRIC SERVICE

1. Size:	Amperage	1,400	Fuses		Breakers	X
2. Phase:	Three Phase		Single Phase	✓	Needs Repair	
3. Condition:	Good	✓	Fair			

Comments:

SATISFACTORY

2. METER AND ELECTRIC ROOM

1. Clearances:	Good	✓	Fair		Requires Correction	

Comments:

SATISFACTORY

3. GUTTERS

Location:	Good	✓	Requires Repair	
Taps and Fill:	Good	✓	Requires Repair	

Comments:

SATISFACTORY

4. ELECTRICAL PANELS

Location: Good ☑ Needs Repair ☐

1. Panel #(1)

Good ☑ Needs Repair ☐

2. Panel #(2)

Good ☑ Needs Repair ☐

3. Panel #(HOUSE)

Good ☑ Needs Repair ☐

4. Panel #(LIGHTS)

Good ☑ Needs Repair ☐

5. Panel #( )

Good ☐ Needs Repair ☐

Comments:

ALSO 30 INDIVIDUAL BREAKERS IN METER ROOM - SATISFACTOR'

5. BRANCH CIRCUITS:

1. Identified: Yes ☑ Must be identified ☐

2. Conductors: Good ☑ Deteriorated ☐ Must be replaced ☐

Comments:

SATISFACTORY

6. GROUNDING SERVICE:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

7. GROUNDING OF EQUIPMENT:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

8. SERVICE CONDUITS/RACEWAYS:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

9. SERVICE CONDUCTOR AND CABLES:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

10. TYPES OF WIRING METHODS:

Conduit Raceways:	Good	☑	Repairs Required	☐
Conduit PVC:	Good	☑	Repairs Required	☐
NM Cable:	Good	☐	Repairs Required	☐
BX Cable:	Good	☑	Repairs Required	☐

11. FEEDER CONDUCTORS:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

12. EMERGENCY LIGHTING:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

13. BUILDING EGRESS ILLUMINATION:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

14. FIRE ALARM SYSTEM:

Good ☐ Repairs Required ☐

Comments:

N/A

15. SMOKE DETECTORS:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

16. EXIT LIGHTS:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

17. EMERGENCY GENERATOR:

Good ☐ Repairs Required ☐

Comments:

N/A

18. WIRING IN OPEN OR UNDER COVER PARKING GARAGE AREAS:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

19. OPEN OR UNDERCOVER PARKING GARAGE AREAS AND EGRESS ILLUMINATION:

Good ☐ Repairs Required ☐

Comments:

N/A

20. SWIMMING POOL WIRING:

Good ☑ Repairs Required ☐

Comments:

SATISFACTORY

21. WIRING TO MECHANICAL EQUIPMENT:

Good ☑ Repairs Required ☐

Comments:

SATISAFACTORY

22. ADDITIONAL COMMENTS:

NONE

STRUCTURAL SAFETY INSPECTION REPORT FORM

Inspection Firm or Individual Name: Allied Building Inspection Services
Address: 8203 SW 124th Street, Pinecrest, FL 33156
Telephone Number: 305-234-7377
Inspection Commenced Date: 12-12-2022 Inspection Completed Date: 12-21-2022

☑ No Repairs Required ☐ Repairs are required as outlined in the attached inspection report

Licensed Professional,
Engineer/Architect Name: Mark Reardon
License Number: RA 17521

I am qualified to practice in the discipline in which I am hereby signing,

Signature Mark Reardon Digitally signed by Mark Reardon Date: 2023.01.03 21:07:21 -05'00' Date:

STATE OF FLORIDA
MARK EDWARD REARDON
AR0017521
REGISTERED ARCHITECT

This report has been based upon the minimum inspection guidelines for building safety inspection as listed in the Broward County Board of Rules and Appeals' Policy #05-05. To the best of my knowledge and ability, this report represents an accurate appraisal of the present condition of the structure, based upon careful evaluation of observed conditions, to the extent reasonably possible

DESCRIPTION OF STRUCTURE	
a. Name on Title:	GARDEN POINT CONDO
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c. Legal Description:	GARDEN POINT CONDO UNITS 101-310 PER CDO BK/PG: 3289/548
d. Owner's Name:	GARDEN POINT CONDO
e. Owner's Mailing Address:	700 PINE DRIVE, POMPANO BEACH, FL 33060
f. Folio Number of Property on which Building is Located:	SEE ENCLOSED SCHEDULE
g. Building Code Occupancy Classification:	R-2
h. Present Use:	30 UNIT RESIDENTIAL CONDOMINIUM COMPLEX
i. General Description, Type of Construction:	Square Footage: Number of Stories:
j. Special Features:	NONE NOTED
k.Addition Comments:	NONE

l. Additions to original structure:

NONE NOTED (NO PLANS AVAILABLE ON SITE)

2. PRESENT CONDITION OF STRUCTURE

a. General alignment (Note: good, fair, poor, explain if significant):

1. Bulging:	GOOD
2. Settlement:	GOOD
3. Deflections:	GOOD
4. Expansion:	GOOD
5. Contraction:	GOOD

b. Portion showing distress (Note, beams, columns, structural walls, floor, roofs, other):

AREAS REPAIRED - NONE OBSERVED

c. Surface conditions – describe general conditions of finishes, noting cracking, spalling, peeling, signs of moisture penetration and stains:

AREAS REPAIRED - NONE OBSERVED

d. Cracks – note location in significant members. Identify crack size as HAIRLINE if barely discernible; FINE if less than 1 mm in width; MEDIUM if between 1 and 2 mm width; WIDE if over 2 mm:

AREAS REPAIRED - NONE OBSERVED

e. General extent of deterioration – cracking or spalling of concrete or masonry, oxidation of metals; rot or borer attack in wood:

AREAS REPAIRED - NONE OBSERVED

f. Previous patching or repairs:

SOME MINOR REPAIRS - SATISFACTORY

g. Nature of present loading indicate residential, commercial, other estimate magnitude:

30 UNI9T RESIDENTIAL CONDOMINIUM COMPLEX

3. INSPECTIONS

a. Date of notice of required inspection: NOT KNOWN

b. Date(s) of actual inspection: JULY 7, 2022/DECEMBER 12, 2022

c. Name and qualifications of individual submitting report:

Mark Reardon RA 17521

d. Description of laboratory or other formal testing, if required, rather than manual or visual procedures:

N/A - NONE REQUIRED

e. Structural repair-note appropriate line:

1. None required: NONE REQUIRED

2. Required (describe and indicate acceptance):

N/A

4. SUPPORTING DATA

a. NONE sheet written data

b. SEE ATTACHED photographs

c. NONE drawings or sketches

5. MASONRY BEARING WALL = Indicate good, fair, poor on appropriate lines:	
a. Concrete masonry units:	GOOD
b. Clay tile or terra cota units:	N/A
c. Reinforced concrete tie columns:	GOOD
d. Reinforced concrete tie beams:	GOOD
e. Lintel:	GOOD
f. Other type bond beams:	N/A
g. Masonry finishes -exterior:	
1. Stucco:	GOOD
2. Veneer:	N/A
3. Paint only:	N/A
4. Other (describe):	N/A
h. Masonry finishes - interior:	
1. Vapor barrier:	N/A
2. Furring and plaster:	GOOD
3. Paneling:	N/A
4. Paint only:	N/A
5. Other (describe):	FURRING & GYPSUM BOARD - GOOD
i. Cracks:	
1. Location – note beams, columns, other:	N/A
2. Description:	HAIRLINE & FINE - NOT SIGNIFICANT
j. Spalling:	
1. Location – note beams, columns, other:	N/A
2. Description:	SPALLING REPAIRS COMPLETED
k. Rebar corrosion-check appropriate line:	
1. None visible:	NONE VISIBLE
2. Minor-patching will suffice:	N/A
3. Significant-but patching will suffice:	N/A

4. Significant-structural repairs required: NO

l. Samples chipped out for examination in spall areas: NO

1. No:

2. Yes – describe color, texture, aggregate, general quality:

N/A

6. FLOOR AND ROOF SYSTEM

a. Roof: FIBERGLASS DIMENSIONAL SHINGLES

1. Describe (flat, slope, type roofing, type roof deck, condition):

APPROX 4:12 SLOPED SUPPORTED BY WOOD TRUSSES AND PLYWOOD SHEATHING

2. Note water tanks, cooling towers, air conditioning equipment, signs, other heavy equipment and condition of support:

NONE

3. Note types of drains and scuppers and condition:

GUTTERS & DOWNSPOUTS - ALL SIDES

b. Floor system(s):

1. Describe (type of system framing, material, spans, condition):

CONCRETE FLOOR SLAB - GOOD CONDITION

c. Inspection – note exposed areas available for inspection, and where it was found necessary to open ceilings, etc. for inspection of typical framing members:

LIMITED INSPECTION PERFORMED FROM ATTIC SCUTTLE OPENING

7. STEEL FRAMING SYSTEM

a. Description:

CORRIGATED STEEL DECKING

b. Exposed Steel- describe condition of paint and degree of corrosion:

PAINT/COATING IS SATISFACTORY - COROSSION IS INSIGNIFICANT

c. Concrete or other fireproofing – note any cracking or spalling and note where any covering was removed for inspection:

N/A

d. Elevator sheave beams and connections, and machine floor beams – note condition:

GOOD CONDITION - LIMITED ACCESS FOR INSPECTION

8. CONCRETE FRAMING SYSTEM

a. Full description of structural system:

CONTINUOUS FOOTINGS, POURED-IN-PLACE SLABS, TIE COLUMNS & TIE BEAMS

b. Cracking:

1. Not significant: NOT SIGNIFICANT
2. Location and description of members affected and type cracking: N/A

c. General condition:

GOOD CONDITION

d. Rebar corrosion – check appropriate line:

1. None visible: NONE VISIBLE
2. Location and description of members affected and type cracking: N/A
3. Significant but patching will suffice: N/A
4. Significant – structural repairs required (describe): N/A

e. Samples chipped out in spall areas:

1. No: NO
2. Yes, describe color, texture, aggregate, general quality:

N/A

9. WINDOWS	
a. Type (Wood, steel, aluminum, jalousie, single hung, double hung, casement, awning, pivoted, fixed, other): METAL AWNING TYPE	
b. Anchorage- type and condition of fasteners and latches:	SCREWS GOOD
c. Sealant – type of condition of perimeter sealant and at mullions:	CAULKING - FAIR
d. Interiors seals – type and condition at operable vents:	NONE
e. General condition:	FAIR

10. WOOD FRAMING	
a. Type – fully describe if mill construction, light construction, major spans, trusses: WOOD TRUSSES/PLYWOOD SHEATHING - GOOD CONDITION	
b. Note metal fitting i.e., angles, plates, bolts, split pintles, other, and note condition:	GOOD
c. Joints – note if well fitted and still closed:	N/A
d. Drainage – note accumulations of moisture:	N/A
e. Ventilation – note any concealed spaces not ventilated:	N/A
f. Note any concealed spaces opened for inspection:	ATTIC - FROM PULL DOWN STAIRS