

Hold Harmless Agreement Office E-mail: frontdeskcbcmarco@gmail.com

Office E-Mail: Hofficeskebellis	
* ROJER EDIGA GONTHEZ	, the owner(s) of Unit X
0 . 0	
Crescent Beach Condominiums of Marco Island, ask permission	n to (describe type of work):
Replace WINDOW AND S/12/1891	OOR -TURTLE TUIT
(Bronne Irames)	·
to indemnify and Hold Harmless Crescent Beach Condominium	Association, Inc. for any loss, costs or damage to
the common elements, including attorney's fees, incurred by th	e Association as a result of the owner's performing
the permitted work, including work performed by contractors	and subcontractors, both of which are required to
submit their license & liability insurance, prior to starting.	
*Owner(s) Signature: X	Date X 7-20-22
Expl	Date X 7-20-22
Signature: X	Date A
A \$500.00 Deposit will be required by contractors doing m	ajor renovations in units. Contractors may start
renovations May 1st and finish no later than September 30th, or	forfeit their deposit at a \$100 fine for each day after
the September 30th. Work hours: MON-FRI ONLY: 8:00 A.M. TO	4:00 P.M.
X (Owner Initial) X (Owner Initial)	
Name of Contractors Performing Work: :X MRG GLO	izing omrakon
ATTACH A COPY OF ALL SUBS WITH THEIR LICENSE & INSURA	ANCE TO THIS FORM LISTING CRESCENT BEACH &
OWNER AS CERTIFICATE HOLDER	205-470-8706
Company: X CHAZING CONTINUEN	Tele: (X // 028 /
Company: X MRG CHAZING CONTRIBUTED City: X. Street: X 8420 NN 84 St. City: X.	Medley St: X =/ Zip: X 33/66
Estimated Date to Begin Work: X Estima	ited Date to Complete Work: X
CONTRACTORS SIGNATURE X FULLIN	DATE X 7- 20-22
"NO LOCK BOXES" ARE PERMITTE	
DO NOT REMOVE/TOUCH	
Supply lines under sinks or from toilets can be either hard pip flexible braided is not looped.	e or stainless flexible braided as long as the
ATTACH A SHEET EXPLAINING DETAILS WITH BLUEPRINT	LICENSE & INSURANCE LISTING ASSOCATION
& HOMEOWNER AS CERTIFICATE HOLDER	
PX DX	
10000 (10001 /2) 10000 (Q)	¥ / v
Approve by Director Approved Manager	Disapprove by Director
	Rev On/23/2021



Eastern Insurance Group, Inc.

7400 SW 50th Terrace

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 07/20/2022

(305) 595-7135

FAX (A/C, No):

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

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). CONTACT Amanda Nogues
PHONE
(AVC. No. Ext): (305) 595-3323
E-MAIL
amanda@easterni

E-MAIL ADDRESS: amanda@easterninsurance.net

Suite	100			1	IN	SURER(S) AFFOR	RDING COVERAGE		NAIC #
liam	i			FL 33155	INSURER A: Clear Blo	ue Specialty In	s Co		37745
SUR	ED				INSURER B : United S	pecialty Insura	ince Company		
	MRG Glazing Contractors, Inc.				INSURER C : RetailFir	st Insurance C	ompany		10700
					INSURER D :				
	8120 NW 84 Street				INSURER E :				
	Medley			FL 33166	INSURER F :				
ov	ERAGES CER	TIFIC	ATE	NUMBER: Master 22-23			REVISION NUMBER:		
INE	S IS TO CERTIFY THAT THE POLICIES OF I ICATED. NOTWITHSTANDING ANY REQUII RTIFICATE MAY BE ISSUED OR MAY PERTA CLUSIONS AND CONDITIONS OF SUCH PO	REME	NT, TE	ERM OR CONDITION OF ANY O SURANCE AFFORDED BY THE	CONTRACT OR OTHER POLICIES DESCRIBE	D HEREIN IS S	WITH RESPECT TO WHICH T	HIS	
R	TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
Ť	COMMERCIAL GENERAL LIABILITY	11450			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		EACH OCCURRENCE	s 1,000	,000
t	CLAIMS-MADE X OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	s 100,0	00
t							MED EXP (Any one person)	\$ 5,000	
ı				AR01-RS-2102841-01	06/06/2022	06/06/2023	PERSONAL & ADV INJURY	s 1,000,000	
Ì	GEN'L AGGREGATE LIMIT APPLIES PER						GENERAL AGGREGATE	s 2,000	,000
Ī	POLICY PRO- LOC						PRODUCTS - COMP/OP AGG	\$ 2,000	,000
Ī	OTHER:							5	
7	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	
ı	ANY AUTO						BODILY INJURY (Per person)	\$	
Ī	OWNED SCHEDULED AUTOS ONLY						BODILY INJURY (Per accident)	\$	
Ī	HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$	
								S	
T	UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	s 5,000	,000
1	EXCESS LIAB CLAIMS-MADE			BTN2218936	06/06/2022	06/06/2023	AGGREGATE	s 5,000	,000
Ī	DED RETENTION \$	1						s	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						➤ PER OTH-		
.	ANY PROPRIETOR/PARTNER/EXECUTIVE			E20 61422	00/24/2024	00/04/0000	E.L. EACH ACCIDENT	s 1,000	,000
	OFFICER/MEMBER EXCLUDED? N	N/A		520-61422	09/24/2021	09/24/2022	E L. DISEASE - EA EMPLOYEE	s 1.000	
	f ves, describe under DESCRIPTION OF OPERATIONS below						E L DISEASE - POLICY LIMIT	s 1,000	,000
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICLE	ES (AC	ORD 1	01, Additional Remarks Schedule.	may be attached if more s	pace is required)			

CERTIFIC	ATE HOLDER		CANCELLATION
	Marco Island		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	100 N. Collier Blvd		AUTHORIZED REPRESENTATIVE
	Unit 904		AUTONICED REPRESENTATIVE
	Marco Island	FL 34145	8



SEC: 14 TWP:

53 RNG:

40

REBURNEUL ABBIETEDBIE INF YSE PLHNNING HND ZUNING

CERT NO: 2011056823

PROCESS NO: U2011013393

ZONE:

FEE: \$669.32

INC

FOLIO: 3030140100087

MAILING ADDRESS/CONTACT PERSON: 7440 NW 66 ST GLASS DOORS & WINDOWS INC. CORP NAME/D/B/A AND MR. MR. GLASS DOORS 7440 NW 66 ST GLASS DOORS 20 SMOUNIM SMOUNIM ADDRESS:

MIAMI, FL 33166-

BUSINESS USE: USE SPECIFICS: NO OUTSIDE STORAGE/NO RETAIL SALES MFG ALUMINUM DOORS/WINDOWS OTHER/INDUSTRIAL

NO USING, HANDLING, ARDOUS WASTE DISPOSING OR STORAGE HAZ

LEGAL DESCRIPTION: CONDITIONS:

14 53 40 .41 AC M/L AMD PL OF PB 8-16

SIHI CERTIFICATE OF CU ISSUANCE: 9/ 7/2011 M U S T BE POS m ON PREMISES

BELOW PROVIDED THIS CERTIFICATE OF USE OWNERSHIP. ALSO, NEW CERTIFICATE OF USE. APPROVED USE. ALL CHANGES LISTED ABOVE WILL REQUIRE THERE MAY BE NO EXPANSIONS, ALTERATIONS OR ADDITIONS THERE ARE NO CHANGES IN THE USE, BUSINESS IS VALID FOR AN UNLIMITED TIME OR AS ISSUANCE OF NAME INDICATED

WITH ANY FEDERAL, STATE, ALLOW ZONING INSPECTIONS SECTION AT (786) 315-2666. IN ADDITION TO THE ZONING PERMIT THIS CERTIFICATE OF USE APPLICANT MUST ALSO CONTACT THE BUILDING DEPARTMENT THE DEPARTMENT. FOR MORE INFORMATION, PLEASE CONTACT THE ZONING PERMIT OCCUPANCY REQUIREMENTS DOES NOT RELIEVE THE APPLICANT FROM OR LOCAL REGULATIONS. YOU ARE ALSO REQUIRED TO AT ANY REASONABLE TIME AND LOCAL BUSINESS BΥ REPRESENTATIVES OF TAX (786) 315-2100 RECEIPT COMPLIANCE

(305) 270-4949. 9/ 7/2011 14:50 YDENIS 301109070115 TCPM939N CENTRAL

Town of Medley

LOCAL BUSINESS TAX RECEIPT

BTAX22-8536

VALID OCT 1, 2021- SEPT 30, 2022

MR. GLASS DOORS & WINDOWS MANUFACTURING INC. 8120 NW 84 ST MEDLEY, FL 33166

ULISES SENARI 8120 NW 84 ST MEDLEY, FL 33166

Is hereby issued a Local Business Tax Receipt for the Town of Medley, valid through September 30th of the ta year listed above for the occupation of:

MANUFACTURING WINDOWS AND DOORS.

'Issuance of this Business Tax Receipt (BTR) is not a development or zoning Dade County operated pursuant to this BTR shall comply with the Town of Medley Municip Regulations and State Laws.

RESTRICTIONS:

PER DERM: DOORS & STORE FRONTS MANUFACTURING.

PER ZONING: ALL OPERATIONS SHALL BE INDOORS.

NO OUTSIDE STORAGE.

TRACTOR/TRAILERS BACKED TO LOADING DOCK MUST NOT BLOCK RIGHT OF WAY.

This Local Business Tax Receipt must be exhibited conspicuously at your place of business.

Local Business Tax Receipt

Miami-Dade County, State of Florida
-THIS IS NOT A BILL - DO NOT PAY

6121388

BUSINESS NAME/LOCATION MR GLASS DOC 8120 NW 84TH 5 MEDLEY FL 33166

EXPIRES PTEMBER 30, 2021

Must be displayed at place of business Pursuant to County Code Chapter 8A - Art. 9 & 10



MR GLASS DOORS & WINDOWS-INC

196 SPECIALTY BUILDING CONTRACTOR SCC131151307

PAYMENT RECEIVED BY TAX COLLECTOR

\$273.90 10/08/2020 ECHECK-21-001117

Worker(s)

78

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental or nongovernmental regulatory laws and requirements which apply to the business.

The RECEIPT NO. above must be displayed on all commercial vehicles - Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector

007122

Local Business Tax Receipt

Miami-Dade County, State of Florida

7290011

BUSINESS NAME/LOCATION

MRG 8120 NW 84TH ST MEDLEY FL 33166

RECEIPT NO. RENEWAL 7579089



EXPIRES SEPTEMBER 30, 2022

Must be displayed at place of business Pursuant to County Code Chapter 8A - Art. 9 & 10

PAYMENT RECEIVED



SEC. TYPE OF BUSINESS 196 SPECIALTY BUILDING CONTRACTOR SCC131151307

BY TAX COLLECTOR \$231.00 09/27/2021 INT-21-394894

Worker(s)

C/O ULISES SENARIS

MR GLASS DOORS & WINDOWS INC

This Local Business Tax Receipt only confirms payment of the Local Business Tax. The Receipt is not a license, permit, or a certification of the holder's qualifications, to do business. Holder must comply with any governmental payments and requirements which apply to the husiness. or nongovernmental regulatory laws and requirements which apply to the business. The RECEIPT NO. above must be displayed on all commercial vehicles – Miami-Dade Code Sec 8a-276.

For more information, visit www.miamidade.gov/taxcollector



DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION STATE OF FLORIDA

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GLASS AND GLAZING CONTRACTOR HEREIN IS CERTIFIED UNDER THE PROVISIONS OF CHAPTER 489, FLORIC

SENARIS, ULISES

MRG GLAZING CONTRACTORS, INC. 8120 NW 84TH ST. MEDLEY FL 33166

LICENSE NUMBER: SCC131151307

EXPIRATION DATE: AUGUST 31, 2024

Always verify licenses online at MyFloridaLicense.com



Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



Quote #

309116



Phone: 305-470-8284 Fax: 305-470-8285

Email: info@mrgwindows.com

Prepared by:

Mrg Glazing Contractors

Client Name:

ROGER GONZALEZ

Job Name:

100 N. COLLIER BLVD MARCO ISLAND - STACK 04

Client Address:

Rep:

LD

Mark	Qty
Δ	1

Product MG-300 LMI Width 97.0"

Height 25.0"

Config. XOX[1/4][1/2][1/4] Frame Bronze Kynar Screen Yes

90 Days Bluemax

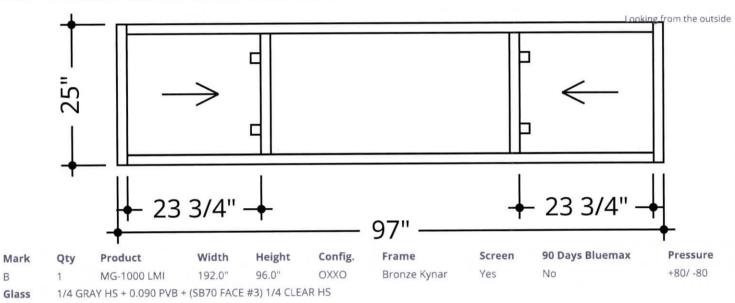
No

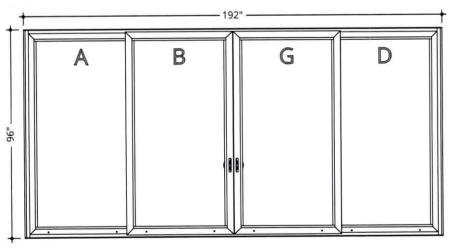
Pressure +80/-80

Glass

В

3/16 GRAY HS + 0.090 PVB + (SB70 FACE #3) 3/16 CLEAR HS





Looking from the outside



· 8120 NW 84th St Medley, FL 33166

Quote #

309116

Phone: 305-470-8284 Fax: 305-470-8285

Email: info@mrgwindows.com

Prepared by:

Mrg Glazing Contractors

Client Name:

ROGER GONZALEZ

No

Job Name:

100 N. COLLIER BLVD MARCO ISLAND - STACK 04

Client Address:

Rep:

LD

Mark	Qty
	- 2

Product MG6000 Width 56.0"

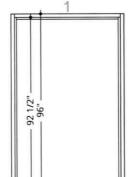
Height 96.0"

Frame Bronze Kynar 90 Days Bluemax

Pressure +100/-104.4

C Glass

[1/4 GRAY HS + 0.090 SGP + (SB70 FACE #3) 1/4 CLEAR HS]



52 1/2"

Looking from the outside

Anchor Type B4 JAMB 2 / MULL 3 (HOT)



· 8120 NW 84th St Medley, FL 33166

Quote #

309116

Phone: 305-470-8284 Fax: 305-470-8285

Email: info@mrgwindows.com

Prepared by:

Mrg Glazing Contractors

Client Name:

ROGER GONZALEZ

Job Name:

100 N. COLLIER BLVD MARCO ISLAND - STACK 04

Client Address:

Rep:

Miscellaneous

Mark D

Description

DELIVERY INCLUDED

Qty



8120 NW 84th St Medley, FL 33166

Phone: 305-470-8284

Email: info@mrgwindows.com

Fax: 305-470-8285

Mrg Glazing Contractors

Client Name:

ROGER GONZALEZ

309116

Quote #

Job Name:

Prepared by:

100 N. COLLIER BLVD MARCO ISLAND - STACK 04

Client Address:

Rep:

LD

Auto Installation

Mark

Description

INS

INSTALLATION INCLUDED



8120 NW 84th St Medley, FL 33166

Quote #

309116

Phone: 305-470-8284 Fax: 305-470-8285

Email: info@mrgwindows.com

Prepared by:

Mrg Glazing Contractors

Client Name:

ROGER GONZALEZ

Job Name:

100 N. COLLIER BLVD MARCO ISLAND - STACK 04

Client Address:

Rep:

LD

Engineering

 Mark
 Description
 Qty

 ENG
 ENGINEER CALCULATION, SHOP-DRAWINGS AND PERMIT PROCESSING INCLUDED. CITY PERMIT FEES INCLUDED.
 1



8120 NW 84th St Medley, FL 33166

66 Quote #

309116

Phone: 305-470-8284 Fax: 305-470-8285

Email: info@mrgwindows.com

Prepared by:

Mrg Glazing Contractors

Client Name:

ROGER GONZALEZ

Job Name:

100 N. COLLIER BLVD MARCO ISLAND - STACK 04

Client Address:

Rep:

LD

Summary

System Summary		Sell Summa	ary
Total Products	3	Total:	\$22,218.11
Sliding Glass Door (MG-1000)	1		
Storefront Window (MG-6000)	1	Sqft Summa	ary
Horizontal Roller (MG-300)	1	Sliding Glass Door (MG-1000)	128.0 sqft
risitzenia (inc see)		Horizontal Roller (MG-300)	16.84 sqft
		Storefront (MG-6000)	37.33 sqft
		Total Sqft	182.17 sqft

Notes:

**** Payment Terms****

60% Deposit

30% Release of materials

10% After installation and all permits.

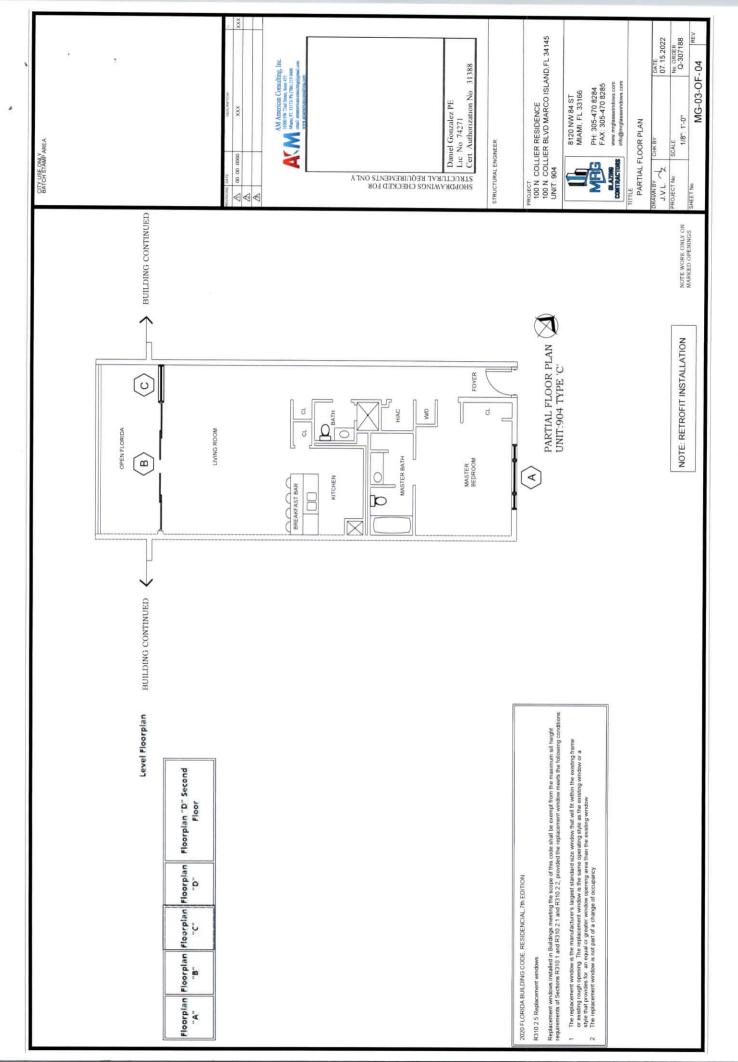
Notes:

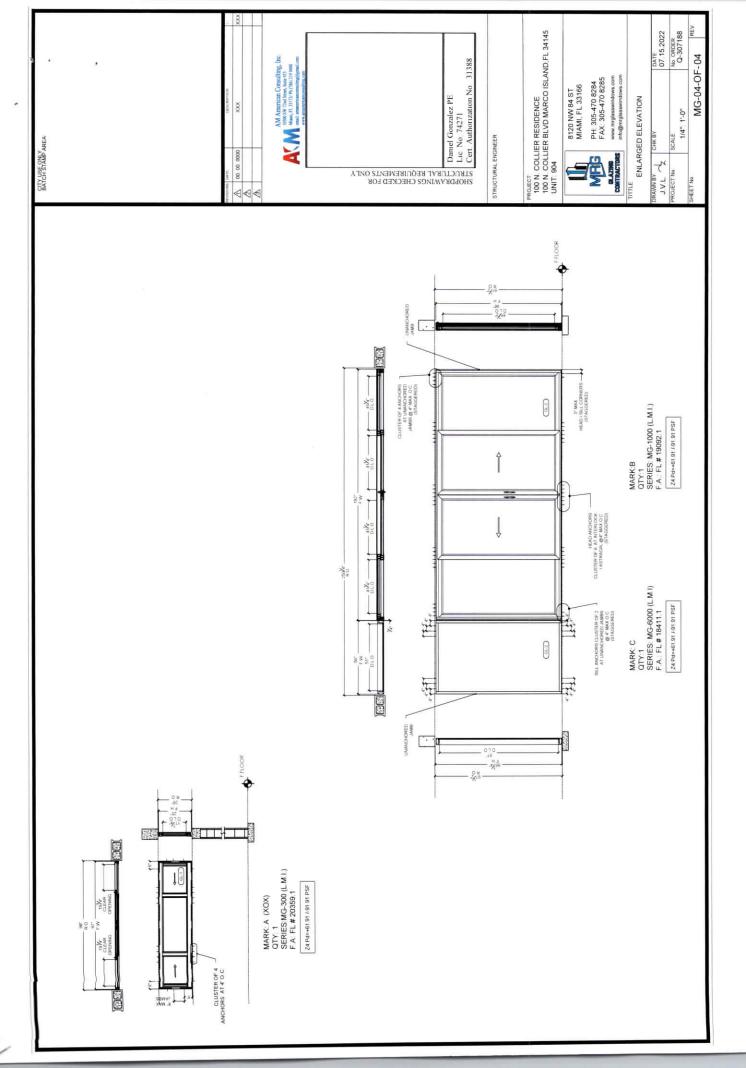
We are upgrading the software, please go to the NOA to check compliance

All rates apply, only line items mentioned are included. Customer agrees to pay all cost/expenses incurred collecting any amount due, including attorney's fees and associated expenses. A \$25 charge is added to checks returned and 1.5% monthly interest fee for past due balance. Quote valid for 30 days.

THIS QUOTE IS SUBJECT TO FIELD VERIFICATION.

ACCEPTED BY:	
Print Name:	Date:
Title:	Signature:
(please complete if party to this quote is a	





DATE 07.15.2022 No. ORDER Q-307188 PROJECT TON N. COLLIER RESIDENCE 100 N. COLLIER BLVD MARCO ISLAND, FL 34145 UNIT: 904 MG-02-0F-04 Daniel Gonzalez PE Lie No 74271 Cert Authorization No. 31388 WINDOWS & DOORS SCHEDULE PH: 305-470 8284 FAX: 305-470 8285 www.mrglasswindows.com info@mrglasswindows.com 8120 NW 84 ST MIAMI, FL 33166 N.T.S. XXX STRUCTURAL ENGINEER: MAGE CONTRACTORS J.V.L. Z J.V.L. Z PROJECT No. ZIKNCINKYF KEÓNIKEMENIZ ONFA RHOÞDKYMINGZ CHECKED ÞOK SHEET NO. ANCHORS QUANTITIES, SPACING AND EDGE DISTANCE AS PER PRODUCTS APPROVAL 182,1736 SQ. FT. AREA NOA/FA
PRESSURE (PSF)
POS NEG

0 800
700 GL-2 GL-2 GL-2 GLASS FL# 20359 1 08/27/2025 FL# 19092 1 08/27/2025 FL# 18411.1 08/27/2025 EXP DATE NOA/FA POS NEG.
6191 MR GLASS DOORS & WINDOWS, INC. ALLMINUM HORIZONTAL SLIDING WINDOW-L M.I.
6191 MR GLASS DOORS & WINDOWS, INC. ALLMINUM SLIDING GLASS DOOR-L M.I.
6191 MR GLASS DOORS & WINDOWS, INC. ALLMINUM WINDOW WALL SYSTEM-L M.I. MANUFACTURE

SITE PRESSURE (PSF)

WIDTH HEIGHT

YTO

MARK

25.

MG-300 MG-1000 MG-6000 SERIES

NOTE: RETROFIT INSTALLATION

WINDOW & DOOR SHOP DRAWINGS

BATCH STAMP AREA

100 N. COLLIER RESIDENCE 100 N. COLLIER BLVD MARCO ISLAND, FL 34145 UNIT: 904

GENERAL NOTES:

- OPENINGS TO HAVE DESIGN WIND PRESSURES PER MARK: 24: +61.91 / -61.91 PSF, Z5: +61.91 / -113.50 PSF
- ALL STRUCTURES DESIGNED IN ACCORDANCE WITH 2020 FLORIDA BUILDING CODE AND ASCE 7-16 (V=170 MPH, RISK CATEGORY "II", MEAN ROOF HEIGHT =140 FT, EXPOSURE CATEGORY "D").
- NOTIFY ENGINEER OF ANY ERRORS/OMISSIONS FOUND OR IF ANY PART OF THE DRAWINGS IS NOT UNDERSTOOD
- ALL DIMENSIONS TO BE FIELD VERIFIED.
- ALL PRODUCTS TO BE INSTALLED AS PER THEIR NOA OR FLORIDA APPROVAL
- REFER TO PRODUCT APPROVAL FOR SPECIFIC MATERIAL INFO
- ALL PRODUCTS TO BE HVHZ APPROVED
- GLAZING ON AND AROUND DOORS COMPLIES WITH 2406.4.1 & 2406.4.2 OF THE FLORIDA BUILDING CODE 2020 ALL GLASS TO BE SAFETY GLASS (CATEGORY II)
- ONLY OPENINGS MARKED ARE PART OF THIS PERMIT
- STRUCTURAL WOOD BUCKS (IF NEEDED) TO BE ATTACHED USING 1/4" Ø X 3-1/4" TAPCONS 4" FROM ENDS & REST @ 8" OC
- EXTERIOR PERIMETER TO BE SEALED WITH DOW CORNING CONTRACTORS CONCRETE SEALANT
- 12 TOTAL AREA OF OPENINGS 182 SQ. FT.
- 13 ALL EGRESS WINDOWS SHALL HAVE A SILL HEIGHT NOT TO EXCEED 44" ABOVE THE FINISHED FLOOR
- ALL ESCAPE WINDOWS SHALL PROVIDE A CLEAR OPENING OF NOT LESS THAN $5.7~\rm SF$ ($5~\rm SF$ FOR GROUND FLOOR) THE WIDTH SHALL NOT BE LESS THAN 2.0° AND THE HEIGHT SHALL NOT BE LESS THAN 2.4°
- THE QUANTITIES AND DIMENSIONS SHOWN ON THE DRAWINGS ARE BASED ACCORDING TO THE OWNER INFORMATION FINAL QUANTITIES TO BE COORDINATED BETWEEN GC & MANUFACTURER.
- OPERABLE WINDOWS (HAZARDOUS AREA): MIN. 36" FROM FINISH FLOOR OR SAFETY BAR REJECT Ø 4" OBJECT (TYP.) ARE REQUIRED
- 17 WINDOW FRAMES / MULLION ANCHORAGE TO MAIN STRUCTURE SHALL BE IN STRICT ACCORDANCE WITH THE UNITS NOTICE OF ACCEPTANCE-REFER TO PRODUCT CONTROLS

ALUMINUM HORIZONTAL SLIDING WINDOW-LM. MANUFACTURER MR. GLASS DOORS & WINDOWS, INC.

SERIES MG-300

GLASS COUCH GRAY LAMMATED GLASS

GLASS COUCH GRAY LAMMATED GLASS

GLASS COMPOSITION GL-1 "X". THK-"A", "GRAY HS +0.090"TROSIFOL PVB +(5870) "X"," CLEAR HS GLASS (TYPE "B" F.A.)

GLASS COMPOSITION GL-1 "X". THK-"A", "GRAY HS +0.090"TROSIFOL PVB +(5870) "X"," CLEAR HS GLASS (TYPE "B" F.A.)

GLASS COMPOSITION GL-1 "X". THK-"A", "GRAY HS +0.090"TROSIFOL PVB +(5870) "X"," CLEAR HS GLASS (TYPE "B" F.A.)

GLASS COMPOSITION GL-1 "X". THK-"A", "GRAY HS +0.090"TROSIFOL PVB +(5870) "X"," CLEAR HS GLASS (TYPE "B" F.A.)

ANUFACTURER MR. GLASS DOOR: L.M.I. WINDOWS, INC.

FRAME COLOR BRONZE KYNAR GLASS COLOR GRAY LAMINATED GLASS GLASS COMPOSITION GL-2 ½," THK-½" GRAY HS +0.080TROSIFOL PVB +(SB70)½" CLEAR HS (TYPE "B" F A) GLASS LOWE SB70 FACE #3

WINUM WINDOW WALL SYSTEM- L.M.I. UFACTURER: MR. GLASS DOORS & WINDOWS, INC.

FRAME COLOR BRONZE KYNAR
GLASS COLOR GRAY LAMIANTED GLASS
GLASS COLOR GRAY LAMIANTED GLASS
GLASS COMPOSITION GL-2 ½," THK-½", GRAY HS +0 00/0°TROSIFOL PVB (SB70)+½" CLEAR HS (TYPE "G1L" F.A.)
GLASS COMPOSITION GL-2 ½,"
GLASS COMPOSITION GL-2 ½,"
F.A. FL # 18411 1

MARITIME TURTLE PROTECTION CODE THIS PRODUCT COMPLIES WITH THE





NOTE: RETROFIT INSTALLATION

PRESENTED BY:

MR GLASS GLAZING CONTRACTORS

8120 NW 84 ST. MIAMI, FL 33166 FAX: 305-470 8285 PH: 305-470 8284

info@mrglasswindows.com www.mrglasswindows.com

MG-01-OF-04



SHOI STRU Cert Authoriza