

DATE 01/13/2010

# Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000028320

APPLICANT MIKE MOSES PHONE 397-5500  
 ADDRESS 413 NW RIDGE GLEN WELLBORN FL 32094  
 OWNER MIKE MOSES PHONE 397-5500  
 ADDRESS 413 NW RIDGE GLEN WELLBORN FL 32094  
 CONTRACTOR OWNER BUILDER PHONE \_\_\_\_\_

LOCATION OF PROPERTY 90W, TR BROWN ROAD, PAST FEED MILL CROSS RR TRACKS, TR RIDGE GLENN, TO THE END (WHISTLE STOP FARMS)

TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 276850.00

HEATED FLOOR AREA 2608.00 TOTAL AREA 5537.00 HEIGHT \_\_\_\_\_ STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 10/12 FLOOR SLAB

LAND USE & ZONING A-3 MAX. HEIGHT \_\_\_\_\_

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. \_\_\_\_\_

PARCEL ID 13-3S-15-00176-005 SUBDIVISION \_\_\_\_\_

LOT \_\_\_\_\_ BLOCK \_\_\_\_\_ PHASE \_\_\_\_\_ UNIT \_\_\_\_\_ TOTAL ACRES 16.00

Culvert Permit No. \_\_\_\_\_ Culvert Waiver \_\_\_\_\_ Contractor's License Number \_\_\_\_\_ Applicant/Owner/Contractor \_\_\_\_\_  
 EXISTING 09-638 BK WR Y  
 Driveway Connection \_\_\_\_\_ Septic Tank Number \_\_\_\_\_ LU & Zoning checked by \_\_\_\_\_ Approved for Issuance \_\_\_\_\_ New Resident \_\_\_\_\_

COMMENTS: ATTACHED LETTER WAS GIVEN TO MIKE MOSES, ONE FOOT ABOVE THE ROAD, NOC ON FILE

Check # or Cash 7794

## FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power \_\_\_\_\_ Foundation \_\_\_\_\_ Monolithic \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Under slab rough-in plumbing \_\_\_\_\_ Slab \_\_\_\_\_ Sheathing/Nailing \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Framing \_\_\_\_\_ Insulation \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Rough-in plumbing above slab and below wood floor \_\_\_\_\_ Electrical rough-in \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Heat & Air Duct \_\_\_\_\_ Peri. beam (Lintel) \_\_\_\_\_ Pool \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Permanent power \_\_\_\_\_ C.O. Final \_\_\_\_\_ Culvert \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Pump pole \_\_\_\_\_ Utility Pole \_\_\_\_\_ M/H tie downs, blocking, electricity and plumbing \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

Reconnection \_\_\_\_\_ RV \_\_\_\_\_ Re-roof \_\_\_\_\_  
 date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

BUILDING PERMIT FEE \$ 1385.00 CERTIFICATION FEE \$ 27.69 SURCHARGE FEE \$ 27.69

MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$ \_\_\_\_\_

FLOOD DEVELOPMENT FEE \$ \_\_\_\_\_ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ \_\_\_\_\_ **TOTAL FEE** 1515.38

INSPECTORS OFFICE [Signature] CLERKS OFFICE [Signature]

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

**The Issuance of this Permit Does Not Waive Compliance by Permittee with Deed Restrictions.**

**Notice of Prevention for Subterranean Termites**  
(As required by Florida Building Code (FBC) 104.2.6)



A locally owned  
company serving  
you since 1972

17856 U.S. 129 • McALPIN, FLORIDA 32062  
(386) 362-3887 • 1-800-771-3887 • Fax: (386) 364-3529

Permit # 000028320

413 New Glen Ridge Wellborn FL 32094

Address of Treatment or Lot/Block of Treatment

1-26-10  
Date

11:30  
Time

David Kern  
Applicator

Premise  
Product Used

Inidcloprid  
Chemical used (active ingredient)

300 gal  
Number of gallons applied

.10%  
Percent Concentration

4650  
Area treated (square feet)

504  
Linear feet treated

Horizontal - Vertical

Stage of treatment (Horizontal, Vertical, Adjoining Slab, retreat of disturbed area)

As per 104.2.6 - If soil chemical barrier method for Subterranean termite prevention is used, final exterior treatment shall be completed prior to final building approval.  
If this notice is for the final exterior treatment, initial and date this line. \_\_\_\_\_



Columbia County Building Permit Application

**For Office Use Only** Application # 0912-526 Date Received 12/29/09 By LH Permit # 28320  
 Zoning Official B2K Date 06.01.10 Flood Zone X Land Use A-3 Zoning A-3  
 FEMA Map # N/A Elevation N/A MFE A-3 River N/A Plans Examiner WR Date 12/31/09  
 Comments Please give Authorized Person attached Letter  
 NOC  EH  Deed or PA  Site Plan  State Road Info  Parent Parcel # \_\_\_\_\_  
 Dev Permit # \_\_\_\_\_  In Floodway  Letter of Auth. from Contractor  F W Comp. letter  
 IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_ Road/Code \_\_\_\_\_  
 School \_\_\_\_\_ = TOTAL N/A Suspended

Septic Permit No. 09-0638 Fax \_\_\_\_\_  
 Name Authorized Person Signing Permit Mike Moses Phone \_\_\_\_\_

Address \_\_\_\_\_

Owners Name Michael & Cathy Moses Phone 397-5500

911 Address 413 NW Ridge GLN ~~Wellborn FL 32094~~ Wellborn FL 32094

Contractors Name \_\_\_\_\_ Phone 623-3331

Address PO BOX 2051 Lake City FL Wellborn FL 32094

Fee Simple Owner Name & Address \_\_\_\_\_

Bonding Co. Name & Address \_\_\_\_\_

Architect/Engineer Name & Address William Myers PO Box 1513 LL FL 32056

Mortgage Lenders Name & Address \_\_\_\_\_

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 13-35-15-00176-005 Estimated Cost of Construction \$250,000

Subdivision Name N/A Lot \_\_\_\_\_ Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_

Driving Directions 90 west turn right on brown RD, Past feed Mill cross R/R track, turn right on ridge Glean (1st Right) follow to end <sup>whistle</sup> stop farms

Number of Existing Dwellings on Property 0

Construction of new construction house SFD w/ garage Total Acreage 16 Lot Size \_\_\_\_\_

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 28.8

Actual Distance of Structure from Property Lines - Front 55' Side 274' Side 299' Rear 456'

Number of Stories 1 Heated Floor Area 2608 Total Floor Area 5537 Roof Pitch 10/12

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction.

left message 1/2/10

**Columbia County Building Permit Application**

**TIME LIMITATIONS OF APPLICATION :** An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

**TIME LIMITATIONS OF PERMITS:** Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the time work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

**FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment:** According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

**NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE:** ***YOU ARE HEREBY NOTIFIED*** as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

**OWNERS CERTIFICATION:** I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.


**NOTICE TO OWNER:** There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. It may be to your advantage to check and see if your property is encumbered by any restrictions.

(Owners Must Sign All Applications Before Permit Issuance.)

  
\_\_\_\_\_  
Owners Signature

**\*\*OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

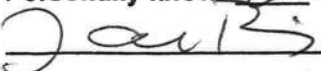
**CONTRACTORS AFFIDAVIT:** By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

  
\_\_\_\_\_  
Contractor's Signature (Permitee)

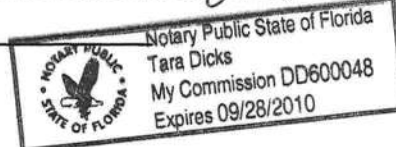
Contractor's License Number \_\_\_\_\_  
Columbia County  
Competency Card Number \_\_\_\_\_

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 28 day of December 2009.

Personally known  or Produced Identification \_\_\_\_\_

  
\_\_\_\_\_  
State of Florida Notary Signature (For the Contractor)

SEAL:





Inst:201012000087 Date:1/7/2010 Time:1:04 PM  
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1187 P:118

NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 13-35-15-00076-003

I/HE, UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

1. Description of property (legal description): 13-35-15 6200/9900 16.35 Acres Containing NE 1/4 of NE 1/4 of SE 1/4  
a) Street (job) Address: 413 NW RIDGE GLN  
2. General description of improvements: House new construction

3. Owner Information  
a) Name and address: Mike Moses 413 NW Ridge Gln  
b) Name and address of fee simple titleholder (if other than owner)  
c) Interest in property: Owner

4. Contractor Information  
a) Name and address: Wade Willis PO Box 1546 Lk Fl 32056  
b) Telephone No.: 623 3331 Fax No. (Opt.)

5. Surety Information  
a) Name and address:  
b) Amount of Bond:  
c) Telephone No.: Fax No. (Opt.)

6. Lender  
a) Name and address:  
b) Phone No.

7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:  
a) Name and address:  
b) Telephone No.: Fax No. (Opt.)

8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:  
a) Name and address:  
b) Telephone No.: Fax No. (Opt.)

9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified):

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

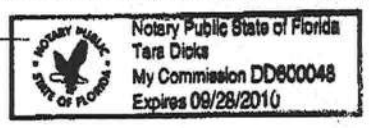
STATE OF FLORIDA  
COUNTY OF COLUMBIA

10. [Signature]  
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager  
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 28 day of December, 2009, by: Michael Moses as \_\_\_\_\_ (type of authority, e.g. officer, trustee, attorney fact) for \_\_\_\_\_ (name of party on behalf of whom instrument was executed).

Personally Known  OR Produced Identification \_\_\_\_\_ Type \_\_\_\_\_

Notary Signature [Signature] Notary Stamp or Seal:



—AND—

11. Verification pursuant to Section 92.525, Florida Statutes, Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.  
[Signature]  
Signature of Natural Person Signing (in line #10 above.)



# COLUMBIA COUNTY

## 911 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787  
Telephone: (386) 758-1125 \* Fax: (386) 758-1365 \* Email: ron\_croft@columbiacountyfla.com



### ADDRESS ASSIGNMENT DATA

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

#### A Residential or Other Structure(s) on Parcel Number:

13-3S-15-00176-005 (New Parcel)

13-3S-15-00176-003 (Old Parcel)

#### Address Assignment(s):

413 NW RIDGE GLN, WELLBORN, FL, 32094

Any questions concerning this information should be referred to the Columbia County 911 Addressing / GIS Department at the address or telephone number above.

00174-000  
209.97 Ac

R R

OFFICE OF  
PROPERTY APPRAISER



THRESA B. FRAZE, CFE  
LAND RECORDS DEPUTY

J. DOYLE CREWS  
COLUMBIA COUNTY  
PROPERTY APPRAISER  
Email: thresa@ccpafl.com

COURTHOUSE ANNEX  
135 N.E. HERNANDO AVE.  
SUITE 238  
LAKE CITY, FL 32055  
OFFICE: (386) 754-7137  
FAX: (386) 758-2131

13

00176-000  
41.50 Ac.



00176-005

00176-006

00176-001  
15.04 Ac

1043.94'

00176-004  
16.35 Ac

1044.77'

00176-003  
16.35 Ac

1018.31'

00176-002  
15.46 Ac



11.94'

SCL RAILROAD  
(AKA CR - 135)

30'

NW

00178-000  
60.40 Ac.

1 inch = 400 feet

This Instrument Prepared By:  
Michael H. Harrell  
Abstract & Title Services, Inc.  
PO Box 7175  
Lake City, Florida 32055  
ATS# 2-17801

### GENERAL WARRANTY DEED

Individual to Individual (or Corporation/LLC)

This Warranty Deed made this 11th day of December, 2009 by

John Logan McCall, and his wife, Laura E. McCall

hereinafter called the Grantor, to

Michael C. Moses, and his wife, Cathy S. Moses

whose post office address is 798 SW Main Blvd, Lake City, FL 32025, hereinafter called the Grantee.

Inst: 200912020837 Date: 12/15/2009 Time: 3:48 PM  
Doc Stamp-Deed: \$80.30  
D.C.P. DeWitt Casson, Columbia County Page 1 of 2 B:1155 P:2248

*(Wherever used herein the terms "Grantor" and "Grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of Individuals, and the successors and assigns of Corporation.)*

The Grantor, for and in consideration of the sum of \$10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, unto the Grantee all that certain land, situate in Columbia County, Florida, viz: TAX ID: P/O 00176-000 :

See Exhibit "A" attached hereto and by this reference made a part thereof.

Together with all the tenements, hereditaments, and appurtenances thereto belonging or in any ways appertaining.

To have and to hold, the same in fee simple forever.

And the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said land, and hereby warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31, 2008.

In witness whereof, the said Grantor has signed and sealed these presents the day and year first above written.

Donna Cox  
WITNESS  
Printed Name: Donna Cox

John Logan McCall  
Laura E. McCall  
John Logan McCall  
Laura E. McCall

Traci Landey  
WITNESS  
Printed Name: Traci Landey

State of Florida  
County of Columbia

I hereby certify that on this 11th day of December, 2009, before me, an officer duly authorized to administer oaths and take acknowledgements, personally appeared John Logan McCall, and his wife, Laura E. McCall, who is personally known to me or produced a DL for identification, and known to me to be the person described in and who executed the foregoing instrument, who acknowledged before me that he/she/they executed the same, and an oath was not taken.

(SEAL)

Donna Cox  
NOTARY PUBLIC

My Commission Expires:



DONNA COX  
Notary Public, State of Florida  
My Comm. Expires Jan. 18, 2010  
Commission No. DD 807081  
Bonded Thru Notary Public Underwriters



17801

## Exhibit "A"

## Parcel "A"

Commence at the NE Corner of the NE  $\frac{1}{4}$  of the SE  $\frac{1}{4}$  of Section 13, Township 3 South, Range 15 East, Columbia County, Florida and run S 89°03'47" W., 529.66 feet; thence N 78°32'53" W., 111.17 feet to the Point of Beginning; thence continue N 78°32'53" W., 703.08 feet; thence S 00°11'30" W., 634.73 feet; thence S 81°49'30" E., 698.51 feet; thence N 00°01'12" W., 594.46 feet to the Point of Beginning.

## Parcel "B"

Begin at the NE Corner of the NE  $\frac{1}{4}$  of the SE  $\frac{1}{4}$  of Section 13, Township 3 South, Range 15 East, Columbia County, Florida and run S 89°03'47" W., 529.66 feet; thence N 78°32'53" W., 111.17 feet; thence S 00°01'12" E., 594.46 feet; thence S 81°49'30" E., 647.17 feet to a point on the East line of Section 13; thence S 81°49'30" E., 8.08 feet; thence N 00°01'17" W., 674.39 feet; thence S 89°03'47" W., 10.00 feet to the Point of Beginning.

634.52'

25'-0" SIDE SETBACK

703.61'

25'-0" REAR SETBACK

155'-4"

MIKE & CATHY MOSES  
NOEGEL RD, COLUMBIA COUNTY, FLORIDA  
(9.75 ACRES +/-)

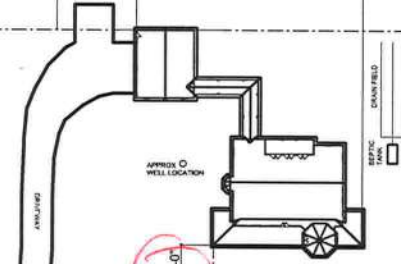
25'-0" SIDE SETBACK

594.52'

274'-0"

117'-2"

299'-0"



55'-0"

25'-0" FRONT SETBACK

699.00'



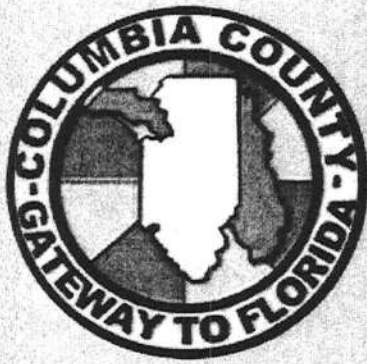
EXISTING 14' X 72'  
HORSE BARN

CATHY MOSES  
413 NW RIDGE GLEN  
WELBORN, FLORIDA 32094  
(Parcel: 13-3S-15-00176-003)  
(16.35 ACRES +/-)

1027.33'

1027.64'

SCALE: 1" = 100'-0"



## Columbia County, Florida Planning & Zoning Department

Review of Building Permit for compliance with  
County's Comprehensive Plan and  
Land Development Regulations

6 January 2010

Michael and Cathy Moses  
413 Northwest Ridge Glen  
Wellborn, FL 32094

RE: Legal Access to Property for Building Permit Application 0912-53

Dear Mr. and Mrs. Moses:

Upon review of the above referenced building permit application a question has been raised concerning legal access to the property with ID number of 13-3S-15-00176-005. According to the deed submitted with the application, there is no indication that you were given an easement in order to access the property. The property to the south that is directly adjacent to the above referenced property owned by Mrs. Moses gives you access but not legal access. Upon consultation with the County Attorney, a building permit can be issued because of the adjacent property owned by your wife giving access. The County Attorney wanted you to be aware of potential legal problems you may have with this property in the future.

If you have any questions concerning this matter, please do not hesitate to contact me at 386.754.7119.

Sincerely,

Brian L. Kepner  
Land Development Regulation Administrator,  
County Planner



# FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

## Florida Department of Community Affairs Residential Performance Method A

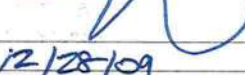
<p>Project Name: Moses Residence                  Street:                  City, State, Zip: Lake City, FL, 32055                  Owner: Mike &amp; Cathy Moses                  Design Location: FL, Gainesville</p>	<p>Builder Name: Wade Willis                  Permit Office: Columbia County                  Permit Number: <b>28320</b>                  Jurisdiction: <b>221000</b></p>
--	--

<p>1. New construction or existing <span style="float:right">New (From Plans)</span></p> <p>2. Single family or multiple family <span style="float:right">Single-family</span></p> <p>3. Number of units, if multiple family <span style="float:right">1</span></p> <p>4. Number of Bedrooms <span style="float:right">3</span></p> <p>5. Is this a worst case? <span style="float:right">No</span></p> <p>6. Conditioned floor area (ft<sup>2</sup>) <span style="float:right">2608</span></p> <p>7. Windows</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Description</th> <th style="width:30%;">Area</th> </tr> </thead> <tbody> <tr> <td>a. U-Factor: Dbl. U=0.30 SHGC: SHGC=0.50</td> <td style="text-align:right">646.00 ft<sup>2</sup></td> </tr> <tr> <td>b. U-Factor: N/A SHGC:</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> <tr> <td>c. U-Factor: N/A SHGC:</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> <tr> <td>d. U-Factor: N/A SHGC:</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> <tr> <td>e. U-Factor: N/A SHGC:</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> </tbody> </table> <p>8. Floor Types</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Insulation</th> <th style="width:30%;">Area</th> </tr> </thead> <tbody> <tr> <td>a. Slab-On-Grade Edge Insulation R=5.0</td> <td style="text-align:right">2608.00 ft<sup>2</sup></td> </tr> <tr> <td>b. N/A R=</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> <tr> <td>c. N/A R=</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> </tbody> </table>	Description	Area	a. U-Factor: Dbl. U=0.30 SHGC: SHGC=0.50	646.00 ft <sup>2</sup>	b. U-Factor: N/A SHGC:	ft <sup>2</sup>	c. U-Factor: N/A SHGC:	ft <sup>2</sup>	d. U-Factor: N/A SHGC:	ft <sup>2</sup>	e. U-Factor: N/A SHGC:	ft <sup>2</sup>	Insulation	Area	a. Slab-On-Grade Edge Insulation R=5.0	2608.00 ft <sup>2</sup>	b. N/A R=	ft <sup>2</sup>	c. N/A R=	ft <sup>2</sup>	<p>9. Wall Types</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Insulation</th> <th style="width:30%;">Area</th> </tr> </thead> <tbody> <tr> <td>a. Frame - Wood, Exterior R=19.0</td> <td style="text-align:right">2198.20 ft<sup>2</sup></td> </tr> <tr> <td>b. N/A R=</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> <tr> <td>c. N/A R=</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> <tr> <td>d. N/A R=</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> </tbody> </table> <p>10. Ceiling Types</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">Insulation</th> <th style="width:30%;">Area</th> </tr> </thead> <tbody> <tr> <td>a. Under Attic (Vented) R=30.0</td> <td style="text-align:right">2869.00 ft<sup>2</sup></td> </tr> <tr> <td>b. N/A R=</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> <tr> <td>c. N/A R=</td> <td style="text-align:right">ft<sup>2</sup></td> </tr> </tbody> </table> <p>11. Ducts</p> <p>a. Sup: Attic Ret: Attic AH: Interior Sup. R= 6, 652 ft<sup>2</sup></p> <p>12. Cooling systems</p> <p>a. Central Unit <span style="float:right">Cap: 58.8 kBtu/hr SEER: 16</span></p> <p>13. Heating systems</p> <p>a. Electric Heat Pump <span style="float:right">Cap: 58.8 kBtu/hr HSPF: 7.7</span></p> <p>14. Hot water systems</p> <p>a. Electric <span style="float:right">Cap: 80 gallons EF: 0.9</span></p> <p>b. Conservation features None</p> <p>15. Credits <span style="float:right">Pstat</span></p>	Insulation	Area	a. Frame - Wood, Exterior R=19.0	2198.20 ft <sup>2</sup>	b. N/A R=	ft <sup>2</sup>	c. N/A R=	ft <sup>2</sup>	d. N/A R=	ft <sup>2</sup>	Insulation	Area	a. Under Attic (Vented) R=30.0	2869.00 ft <sup>2</sup>	b. N/A R=	ft <sup>2</sup>	c. N/A R=	ft <sup>2</sup>
Description	Area																																						
a. U-Factor: Dbl. U=0.30 SHGC: SHGC=0.50	646.00 ft <sup>2</sup>																																						
b. U-Factor: N/A SHGC:	ft <sup>2</sup>																																						
c. U-Factor: N/A SHGC:	ft <sup>2</sup>																																						
d. U-Factor: N/A SHGC:	ft <sup>2</sup>																																						
e. U-Factor: N/A SHGC:	ft <sup>2</sup>																																						
Insulation	Area																																						
a. Slab-On-Grade Edge Insulation R=5.0	2608.00 ft <sup>2</sup>																																						
b. N/A R=	ft <sup>2</sup>																																						
c. N/A R=	ft <sup>2</sup>																																						
Insulation	Area																																						
a. Frame - Wood, Exterior R=19.0	2198.20 ft <sup>2</sup>																																						
b. N/A R=	ft <sup>2</sup>																																						
c. N/A R=	ft <sup>2</sup>																																						
d. N/A R=	ft <sup>2</sup>																																						
Insulation	Area																																						
a. Under Attic (Vented) R=30.0	2869.00 ft <sup>2</sup>																																						
b. N/A R=	ft <sup>2</sup>																																						
c. N/A R=	ft <sup>2</sup>																																						

Glass/Floor Area: 0.248 Total As-Built Modified Loads: 39.80  
Total Baseline Loads: 51.09

# PASS

I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

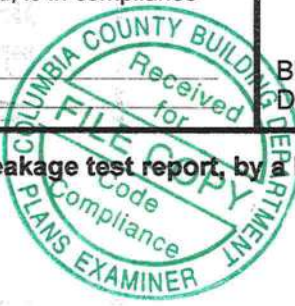
PREPARED BY:   
 DATE: 12/28/09

I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.

OWNER/AGENT: \_\_\_\_\_  
 DATE: \_\_\_\_\_

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.

BUILDING OFFICIAL: \_\_\_\_\_  
 DATE: \_\_\_\_\_



- Compliance requires an envelope leakage test report, by a Florida Class 1 Rater, in accordance with N1113.A.1.

**PROJECT**

Title:	Moses Residence	Bedrooms:	3	Address Type:	Street Address
Building Type:	FLAsBuilt	Bathrooms:	0	Lot #	
Owner:	Mike & Cathy Moses	Conditioned Area:	2608	SubDivision:	
# of Units:	1	Total Stories:	1	PlatBook:	
Builder Name:	Wade Willis	Worst Case:	No	Street:	
Permit Office:	Columbia County	Rotate Angle:	0	County:	Columbia
Jurisdiction:		Cross Ventilation:		City, State, Zip:	Lake City , FL , 32055-
Family Type:	Single-family	Whole House Fan:			
New/Existing:	New (From Plans)				
Comment:					

**CLIMATE**

✓	Design Location	TMY Site	IECC Zone	Design Temp 97.5 %	Design Temp 2.5 %	Int Design Temp Winter	Int Design Temp Summer	Heating Degree Days	Design Moisture	Daily Temp Range
_____	FL, Gainesville	FL_GAINESVILLE_REGI	2	32	92	75	70	1305.5	51	Medium

**FLOORS**

✓	#	Floor Type	Perimeter	R-Value	Area	Tile	Wood	Carpet
_____	1	Slab-On-Grade Edge Insulatio	244.3 ft	5	2608 ft²	0	0	1

**ROOF**

✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	Tested	Deck Insul.	Pitch
_____	1	Gable or shed	Metal	3395 ft²	1086 ft²	Dark	0.96	No	0	39.8 deg

**ATTIC**

✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
_____	1	Partial cathedral cei	Vented	303	2608 ft²	N	N

**CEILING**

✓	#	Ceiling Type	R-Value	Area	Framing Frac	Truss Type
_____	1	Under Attic (Vented)	30	2869 ft²	0.11	Wood

**WALLS**

✓	#	Ornt	Adjacent To	Wall Type	Cavity R-Value	Area	Sheathing R-Value	Framing Fraction	Solar Absor.
_____	1	N	Exterior	Frame - Wood	19	531.84 ft²	0	0.23	0.75
_____	2	S	Exterior	Frame - Wood	19	243.54 ft²	0	0.23	0.75
_____	3	E	Exterior	Frame - Wood	19	288.87 ft²	0	0.23	0.75
_____	4	W	Exterior	Frame - Wood	19	271.87 ft²	0	0.23	0.75
_____	5	NE	Exterior	Frame - Wood	19	191.54 ft²	0	0.23	0.75
_____	6	SE	Exterior	Frame - Wood	19	231.54 ft²	0	0.23	0.75
_____	7	NW	Exterior	Frame - Wood	19	199.54 ft²	0	0.23	0.75
_____	8	SW	Exterior	Frame - Wood	19	239.52 ft²	0	0.23	0.75

### DOORS

✓	#	Ornt	Door Type	Storms	U-Value	Area
✓	1	N	Insulated	None	0.46	20 ft <sup>2</sup>

### WINDOWS

Window orientation below is as entered. Actual orientation is modified by rotate angle shown in "Project" section above.

✓	#	Ornt	Frame	Panes	NFRC	U-Factor	SHGC	Storms	Area	Overhang		Int Shade	Screening		
										Depth	Separation				
✓	1	N	Metal	Double (Clear)	Yes	0.3	0.5	N	120 ft <sup>2</sup>	0 ft	138 in	0 ft	0 in	HERS 2006	None
✓	2	N	Metal	Double (Clear)	Yes	0.3	0.5	N	38.33 ft <sup>2</sup>	0 ft	138 in	0 ft	0 in	HERS 2006	None
✓	3	W	Metal	Double (Clear)	Yes	0.3	0.5	N	33.33 ft <sup>2</sup>	0 ft	60 in	0 ft	0 in	HERS 2006	None
✓	4	SW	Metal	Double (Clear)	Yes	0.3	0.5	N	40 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	5	S	Metal	Double (Clear)	Yes	0.3	0.5	N	40 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	6	SE	Metal	Double (Clear)	Yes	0.3	0.5	N	40 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	7	E	Metal	Double (Clear)	Yes	0.3	0.5	N	33.33 ft <sup>2</sup>	0 ft	60 in	0 ft	0 in	HERS 2006	None
✓	8	S	Metal	Double (Clear)	Yes	0.3	0.5	N	12 ft <sup>2</sup>	0 ft	138 in	0 ft	0 in	HERS 2006	None
✓	9	E	Metal	Double (Clear)	Yes	0.3	0.5	N	40 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	10	E	Metal	Double (Clear)	Yes	0.3	0.5	N	6 ft <sup>2</sup>	0 ft	18 in	0 ft	12 in	HERS 2006	None
✓	11	E	Metal	Double (Clear)	Yes	0.3	0.5	N	18 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	12	N	Metal	Double (Clear)	Yes	0.3	0.5	N	18 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	13	N	Metal	Double (Clear)	Yes	0.3	0.5	N	144 ft <sup>2</sup>	0 ft	114 in	0 ft	0 in	HERS 2006	None
✓	14	W	Metal	Double (Clear)	Yes	0.3	0.5	N	15 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	15	NW	Metal	Double (Clear)	Yes	0.3	0.5	N	8 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	16	W	Metal	Double (Clear)	Yes	0.3	0.5	N	8 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	17	SW	Metal	Double (Clear)	Yes	0.3	0.5	N	8 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None
✓	18	W	Metal	Double (Clear)	Yes	0.3	0.5	N	24 ft <sup>2</sup>	0 ft	18 in	0 ft	0 in	HERS 2006	None

### INFILTRATION & VENTING

✓	Method	SLA	CFM 50	ACH 50	ELA	EqLA	— Forced Ventilation —		Run Time	Fan
							Supply CFM	Exhaust CFM	Fraction	Watts
✓	Proposed ACH	0.00036	2463	6.30	135.2	254.3	0 cfm	0 cfm	0	0

### COOLING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Ductless
✓	1	Central Unit	None	SEER: 16	58.8 kBtu/hr	cfm	0.75	

### HEATING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Ductless
✓	1	Electric Heat Pump	None	HSPF: 7.7	58.8 kBtu/hr	



### HOT WATER SYSTEM

✓	#	System Type	EF	Cap	Use	SetPnt	Conservation
—	1	Electric	0.9	80 gal	60 gal	120 deg	None

### SOLAR HOT WATER SYSTEM

✓	FSEC Cert #	Company Name	System Model #	Collector Model #	Collector Area	Storage Volume	FEF
—	None	None			ft <sup>2</sup>		

### DUCTS

✓	#	— Supply —		— Return —		Leakage Type	Air Handler	CFM 25	Percent Leakage	QN	RLF
		Location	R-Value	Area	Location	Area					
—	1	Attic	6	652 ft <sup>2</sup>	Attic	130.4 ft	Default Leakage	Interior			

### TEMPERATURES

Programable Thermostat: Y														Ceiling Fans:											
Cooling	<input checked="" type="checkbox"/>	Jan	<input checked="" type="checkbox"/>	Feb	<input checked="" type="checkbox"/>	Mar	<input checked="" type="checkbox"/>	Apr	<input checked="" type="checkbox"/>	May	<input checked="" type="checkbox"/>	Jun	<input checked="" type="checkbox"/>	Jul	<input checked="" type="checkbox"/>	Aug	<input checked="" type="checkbox"/>	Sep	<input checked="" type="checkbox"/>	Oct	<input checked="" type="checkbox"/>	Nov	<input checked="" type="checkbox"/>	Dec	
Heating	<input checked="" type="checkbox"/>	Jan	<input checked="" type="checkbox"/>	Feb	<input checked="" type="checkbox"/>	Mar	<input checked="" type="checkbox"/>	Apr	<input checked="" type="checkbox"/>	May	<input checked="" type="checkbox"/>	Jun	<input checked="" type="checkbox"/>	Jul	<input checked="" type="checkbox"/>	Aug	<input checked="" type="checkbox"/>	Sep	<input checked="" type="checkbox"/>	Oct	<input checked="" type="checkbox"/>	Nov	<input checked="" type="checkbox"/>	Dec	
Venting	<input checked="" type="checkbox"/>	Jan	<input checked="" type="checkbox"/>	Feb	<input checked="" type="checkbox"/>	Mar	<input checked="" type="checkbox"/>	Apr	<input checked="" type="checkbox"/>	May	<input checked="" type="checkbox"/>	Jun	<input checked="" type="checkbox"/>	Jul	<input checked="" type="checkbox"/>	Aug	<input checked="" type="checkbox"/>	Sep	<input checked="" type="checkbox"/>	Oct	<input checked="" type="checkbox"/>	Nov	<input checked="" type="checkbox"/>	Dec	
Thermostat Schedule: HERS 2006 Reference														Hours											
Schedule Type			1	2	3	4	5	6	7	8	9	10	11	12											
Cooling (WD)	AM	78	78	78	78	78	78	78	78	78	80	80	80	80											
	PM	80	80	78	78	78	78	78	78	78	78	78	78	78											
Cooling (WEH)	AM	78	78	78	78	78	78	78	78	78	78	78	78	78											
	PM	78	78	78	78	78	78	78	78	78	78	78	78	78											
Heating (WD)	AM	66	66	66	66	66	66	68	68	68	68	68	68	68											
	PM	68	68	68	68	68	68	68	68	68	68	68	68	66	66										
Heating (WEH)	AM	66	66	66	66	66	66	68	68	68	68	68	68	68	68										
	PM	68	68	68	68	68	68	68	68	68	68	68	68	66	66										





# Residential System Sizing Calculation

## Summary

Mike & Cathy Moses

Project Title:  
Moses Residence

Code Only  
Professional Version  
Climate: North

Lake City, FL 32055-

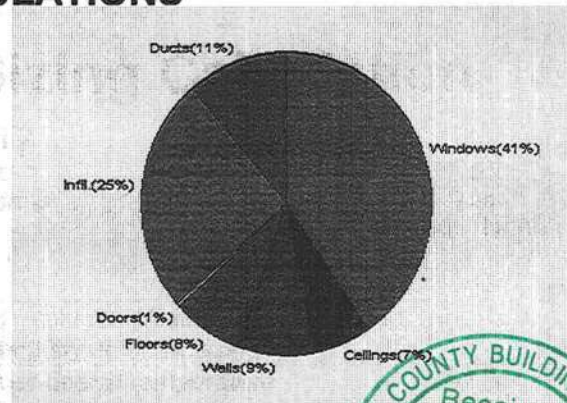
12/28/2009

Location for weather data: Gainesville - Defaults: Latitude(29) Altitude(152 ft.) Temp Range(M)			
Humidity data: Interior RH (50%) Outdoor wet bulb (77F) Humidity difference(54gr.)			
Winter design temperature	33 F	Summer design temperature	92 F
Winter setpoint	70 F	Summer setpoint	75 F
Winter temperature difference	37 F	Summer temperature difference	17 F
<b>Total heating load calculation</b>	<b>51321 Btuh</b>	<b>Total cooling load calculation</b>	<b>53504 Btuh</b>
Submitted heating capacity	% of calc Btuh	Submitted cooling capacity	% of calc Btuh
Total (Electric Heat Pump)	114.6 58800	Sensible (SHR = 0.75)	106.3 44100
Heat Pump + Auxiliary(0.0kW)	114.6 58800	Latent	122.3 14700
		Total (Electric Heat Pump)	109.9 58800

## WINTER CALCULATIONS

Winter Heating Load (for 2608 sqft)

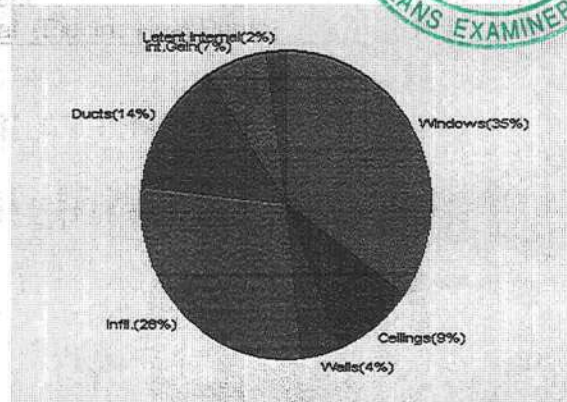
Load component		Load	
Window total	646 sqft	20794	Btuh
Wall total	1532 sqft	4381	Btuh
Door total	20 sqft	259	Btuh
Ceiling total	2869 sqft	3381	Btuh
Floor total	244 sqft	3995	Btuh
Infiltration	313 cfm	12677	Btuh
Duct loss		5834	Btuh
<b>Subtotal</b>		<b>51321</b>	<b>Btuh</b>
Ventilation	0 cfm	0	Btuh
<b>TOTAL HEAT LOSS</b>		<b>51321</b>	<b>Btuh</b>



## SUMMER CALCULATIONS

Summer Cooling Load (for 2608 sqft)

Load component		Load	
Window total	646 sqft	18709	Btuh
Wall total	1532 sqft	2297	Btuh
Door total	20 sqft	196	Btuh
Ceiling total	2869 sqft	4751	Btuh
Floor total		0	Btuh
Infiltration	274 cfm	5096	Btuh
Internal gain		3780	Btuh
Duct gain		6652	Btuh
Sens. Ventilation	0 cfm	0	Btuh
<b>Total sensible gain</b>		<b>41482</b>	<b>Btuh</b>
Latent gain(ducts)		815	Btuh
Latent gain(infiltration)		10008	Btuh
Latent gain(ventilation)		0	Btuh
Latent gain(internal/occupants/other)		1200	Btuh
<b>Total latent gain</b>		<b>12022</b>	<b>Btuh</b>
<b>TOTAL HEAT GAIN</b>		<b>53504</b>	<b>Btuh</b>



Version 8  
For Florida residences only

EnergyGauge® System Sizing  
PREPARED BY: \_\_\_\_\_  
DATE: 12/28/09



# System Sizing Calculations - Winter

## Residential Load - Whole House Component Details

Mike & Cathy Moses

Project Title:  
Moses Residence

Code Only  
Professional Version  
Climate: North

Lake City, FL 32055-

Reference City: Gainesville (Defaults) Winter Temperature Difference: 37.0 F

12/28/2009

### WHOLE HOUSE TOTALS

	Subtotal Sensible	51321 Btuh
	Ventilation Sensible	0 Btuh
	Total Btuh Loss	51321 Btuh

### EQUIPMENT

1. Electric Heat Pump	#	58800 Btuh
-----------------------	---	------------

Key: Window types (SHGC - Shading coefficient of glass as SHGC numerical value or as clear or tint)  
(Frame types - metal, wood or insulated metal)  
(U - Window U-Factor or 'DEF' for default)  
(HTM - ManualJ Heat Transfer Multiplier)

Key: Floor size (perimeter(p) for slab-on-grade or area for all other floor types)



Version 8  
For Florida residences only

# System Sizing Calculations - Winter

## Residential Load - Room by Room Component Details

Mike & Cathy Moses

Project Title:  
Moses Residence

Code Only  
Professional Version  
Climate: North

Lake City, FL 32055-

Reference City: Gainesville (Defaults) Winter Temperature Difference: 37.0 F

12/28/2009

Component Loads for Zone #1						
Window	Panes/SHGC/Frame/U	Orientation	Area(sqft)	X	HTM=	Load
1	2, Clear, Metal, 0.87	N	120.0		32.2	3863 Btuh
2	2, Clear, Metal, 0.87	N	38.3		32.2	1234 Btuh
3	2, Clear, Metal, 0.87	W	33.3		32.2	1073 Btuh
4	2, Clear, Metal, 0.87	SW	40.0		32.2	1288 Btuh
5	2, Clear, Metal, 0.87	S	40.0		32.2	1288 Btuh
6	2, Clear, Metal, 0.87	SE	40.0		32.2	1288 Btuh
7	2, Clear, Metal, 0.87	E	33.3		32.2	1073 Btuh
8	2, Clear, Metal, 0.87	S	12.0		32.2	386 Btuh
9	2, Clear, Metal, 0.87	E	40.0		32.2	1288 Btuh
10	2, Clear, Metal, 0.87	E	6.0		32.2	193 Btuh
11	2, Clear, Metal, 0.87	E	18.0		32.2	579 Btuh
12	2, Clear, Metal, 0.87	N	18.0		32.2	579 Btuh
13	2, Clear, Metal, 0.87	N	144.0		32.2	4635 Btuh
14	2, Clear, Metal, 0.87	W	15.0		32.2	483 Btuh
15	2, Clear, Metal, 0.87	NW	8.0		32.2	258 Btuh
16	2, Clear, Metal, 0.87	W	8.0		32.2	258 Btuh
17	2, Clear, Metal, 0.87	SW	8.0		32.2	258 Btuh
18	2, Clear, Metal, 0.87	W	24.0		32.2	773 Btuh
Window Total			646(sqft)			20794 Btuh
Walls	Type	R-Value	Area	X	HTM=	Load
1	Frame - Wood - Ext(0.08)	19.0	1532		2.9	4381 Btuh
Wall Total			1532			4381 Btuh
Doors	Type		Area	X	HTM=	Load
1	Insulated - Exterior		20		12.9	259 Btuh
Door Total			20			259 Btuh
Ceilings	Type/Color/Surface	R-Value	Area	X	HTM=	Load
1	Vented Attic/D/Shin	30.0	2869		1.2	3381 Btuh
Ceiling Total			2869			3381 Btuh
Floors	Type	R-Value	Size	X	HTM=	Load
1	Slab On Grade	5	244.3 ft(p)		16.4	3995 Btuh
Floor Total			244			3995 Btuh
Zone Envelope Subtotal:						32810 Btuh
Infiltration	Type	ACH X Volume(cuft)	walls(sqft)	CFM=		Load
	Natural	0.80	23472	1532	313.0	12677 Btuh
Ductload	Pro. leak free, Supply(R6.0-Attic), Return(R6.0-Attic) (DLM of 0.128)					5834 Btuh
Zone #1	Sensible Zone Subtotal					51321 Btuh

# Manual J Winter Calculations

## Residential Load - Component Details (continued)

Mike & Cathy Moses

Project Title:  
Moses Residence

Code Only  
Professional Version  
Climate: North

Lake City, FL 32055-

12/28/2009

### WHOLE HOUSE TOTALS

	Subtotal Sensible	51321 Btuh
	Ventilation Sensible	0 Btuh
	Total Btuh Loss	51321 Btuh

### EQUIPMENT

1. Electric Heat Pump	#	58800 Btuh
-----------------------	---	------------

Key: Window types (SHGC - Shading coefficient of glass as SHGC numerical value or as clear or tint)  
(Frame types - metal, wood or insulated metal)  
(U - Window U-Factor or 'DEF' for default)  
(HTM - ManualJ Heat Transfer Multiplier)

Key: Floor size (perimeter(p) for slab-on-grade or area for all other floor types )



Version 8  
For Florida residences only

Subtotal Sensible  
Ventilation Sensible  
Total Btuh Loss



# System Sizing Calculations - Summer

## Residential Load - Whole House Component Details

Mike & Cathy Moses

Project Title:  
Moses Residence

Code Only  
Professional Version  
Climate: North

Lake City, FL 32055-

Reference City: Gainesville (Defaults) Summer Temperature Difference: 17.0 F

12/28/2009

# Manual J Summer Calculations

## Residential Load - Component Details (continued)

Mike & Cathy Moses

Project Title:  
Moses Residence

Code Only  
Professional Version  
Climate: North

Lake City, FL 32055-

12/28/2009

### WHOLE HOUSE TOTALS

<b>Whole House Totals for Cooling</b>	<b>Sensible Envelope Load All Zones</b>	<b>34830 Btuh</b>
	Sensible Duct Load	6652 Btuh
	<b>Total Sensible Zone Loads</b>	<b>41482 Btuh</b>
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	<b>Total sensible gain</b>	<b>41482 Btuh</b>
	Latent infiltration gain (for 54 gr. humidity difference)	10008 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	815 Btuh
	Latent occupant gain (6 people @ 200 Btuh per person)	1200 Btuh
	Latent other gain	0 Btuh
	<b>Latent total gain</b>	<b>12022 Btuh</b>
	<b>TOTAL GAIN</b>	<b>53504 Btuh</b>

### EQUIPMENT

1. Central Unit	#	58800 Btuh
-----------------	---	------------

\*Key: Window types (Pn - Number of panes of glass)  
 (SHGC - Shading coefficient of glass as SHGC numerical value or as clear or tint)  
 (U - Window U-Factor or 'DEF' for default)  
 (InSh - Interior shading device: none(N), Blinds(B), Draperies(D) or Roller Shades(R))  
 (ExSh - Exterior shading device: none(N) or numerical value)  
 (BS - Insect screen: none(N), Full(F) or Half(H))  
 (Ornt - compass orientation)



Version 8  
For Florida residences only

# System Sizing Calculations - Summer

## Residential Load - Room by Room Component Details

Mike & Cathy Moses

Project Title:  
Moses Residence

Code Only  
Professional Version  
Climate: North

Lake City, FL 32055-

Reference City: Gainesville (Defaults) Summer Temperature Difference: 17.0 F

12/28/2009

### Component Loads for Zone #1: main

Window	Type*		Overhang		Window Area(sqft)			HTM		Load
	Pn/SHGC/U/InSh/ExSh/IS	Ornt	Len	Hgt	Gross	Shaded	Unshaded	Shaded	Unshaded	
1	2, Clear, 0.87, None,0.00,N	N	11.5f	1ft.	120.0	0.0	120.0	29	29	3475 Btuh
2	2, Clear, 0.87, None,0.00,N	N	11.5f	1ft.	38.3	0.0	38.3	29	29	1110 Btuh
3	2, Clear, 0.87, None,0.00,N	W	5ft.	1ft.	33.3	33.3	0.0	29	29	965 Btuh
4	2, Clear, 0.87, None,0.00,N	SW	1.5ft	1.5ft	40.0	40.0	0.0	29	29	1158 Btuh
5	2, Clear, 0.87, None,0.00,N	S	1.5ft	2ft.	40.0	40.0	0.0	29	29	1158 Btuh
6	2, Clear, 0.87, None,0.00,N	SE	1.5ft	1ft.	40.0	40.0	0.0	29	29	1158 Btuh
7	2, Clear, 0.87, None,0.00,N	E	5ft.	1ft.	33.3	33.3	0.0	29	29	965 Btuh
8	2, Clear, 0.87, None,0.00,N	S	11.5f	1ft.	12.0	12.0	0.0	29	29	348 Btuh
9	2, Clear, 0.87, None,0.00,N	E	1.5ft	4ft.	40.0	23.5	16.5	29	29	1158 Btuh
10	2, Clear, 0.87, None,0.00,N	E	1.5ft	4ft.	6.0	0.5	5.5	29	29	174 Btuh
11	2, Clear, 0.87, None,0.00,N	E	1.5ft	2ft.	18.0	15.7	2.3	29	29	521 Btuh
12	2, Clear, 0.87, None,0.00,N	N	1.5ft	1ft.	18.0	0.0	18.0	29	29	521 Btuh
13	2, Clear, 0.87, None,0.00,N	N	9.5ft	1ft.	144.0	0.0	144.0	29	29	4171 Btuh
14	2, Clear, 0.87, None,0.00,N	W	1.5ft	2ft.	15.0	11.2	3.8	29	29	434 Btuh
15	2, Clear, 0.87, None,0.00,N	NW	1.5ft	1ft.	8.0	0.0	8.0	29	29	232 Btuh
16	2, Clear, 0.87, None,0.00,N	W	1.5ft	1ft.	8.0	8.0	0.0	29	29	232 Btuh
17	2, Clear, 0.87, None,0.00,N	SW	1.5ft	1ft.	8.0	8.0	0.0	29	29	232 Btuh
18	2, Clear, 0.87, None,0.00,N	W	1.5ft	2ft.	24.0	21.0	3.0	29	29	695 Btuh
<b>Window Total</b>					<b>646 (sqft)</b>					<b>18709 Btuh</b>
<b>Walls</b>	Type		R-Value/U-Value		Area(sqft)			HTM	Load	
1	Frame - Wood - Ext		19.0/0.08		1532.3			1.5	2297 Btuh	
<b>Wall Total</b>					<b>1532 (sqft)</b>				<b>2297 Btuh</b>	
<b>Doors</b>	Type		R-Value/U-Value		Area (sqft)			HTM	Load	
1	Insulated - Exterior		19.0/0.08		20.0			9.8	196 Btuh	
<b>Door Total</b>					<b>20 (sqft)</b>				<b>196 Btuh</b>	
<b>Ceilings</b>	Type/Color/Surface		R-Value		Area(sqft)			HTM	Load	
1	Vented Attic/DarkShingle		30.0		2869.0			1.7	4751 Btuh	
<b>Ceiling Total</b>					<b>2869 (sqft)</b>				<b>4751 Btuh</b>	
<b>Floors</b>	Type		R-Value		Size			HTM	Load	
1	Slab On Grade		5.0		244 (ft(p))			0.0	0 Btuh	
<b>Floor Total</b>					<b>244.3 (sqft)</b>				<b>0 Btuh</b>	
<b>Zone Envelope Subtotal:</b>									<b>25953 Btuh</b>	
<b>Infiltration</b>	Type		ACH	Volume(cuft)	wall area(sqft)	CFM=		Load		
	SensibleNatural		0.70	23472	1532	273.8		5096 Btuh		
<b>Internal gain</b>		Occupants		Btuh/occupant	Appliance			Load		
		6	X	230	+	2400		3780 Btuh		
<b>Sensible Envelope Load:</b>									<b>34830 Btuh</b>	
<b>Duct load</b>	Prop. leak free, Supply(R6.0-Attic), Return(R6.0-Attic)						(DGM of 0.191)		6652 Btuh	
<b>Sensible Zone Load</b>									<b>41482 Btuh</b>	



# Manual J Summer Calculations

## Residential Load - Component Details (continued)

Mike & Cathy Moses

Project Title:  
Moses Residence

Code Only  
Professional Version  
Climate: North

Lake City, FL 32055-

12/28/2009

### WHOLE HOUSE TOTALS

<b>Whole House Totals for Cooling</b>	<b>Sensible Envelope Load All Zones</b>	<b>34830 Btuh</b>
	Sensible Duct Load	6652 Btuh
	<b>Total Sensible Zone Loads</b>	<b>41482 Btuh</b>
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	<b>Total sensible gain</b>	<b>41482 Btuh</b>
	Latent infiltration gain (for 54 gr. humidity difference)	10008 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	815 Btuh
	Latent occupant gain (6 people @ 200 Btuh per person)	1200 Btuh
	Latent other gain	0 Btuh
	<b>Latent total gain</b>	<b>12022 Btuh</b>
	<b>TOTAL GAIN</b>	<b>53504 Btuh</b>

### EQUIPMENT

1. Central Unit	#	58800 Btuh
-----------------	---	------------

\*Key: Window types (Pn - Number of panes of glass)

(SHGC - Shading coefficient of glass as SHGC numerical value or as clear or tint)

(U - Window U-Factor or 'DEF' for default)

(InSh - Interior shading device: none(N), Blinds(B), Draperies(D) or Roller Shades(R))

(ExSh - Exterior shading device: none(N) or numerical value)

(BS - Insect screen: none(N), Full(F) or Half(H))

(Ornt - compass orientation)



Version 8  
For Florida residences only



# Residential Window Diversity

## MidSummer

Mike & Cathy Moses

Project Title:  
Moses Residence

Code Only  
Professional Version  
Climate: North

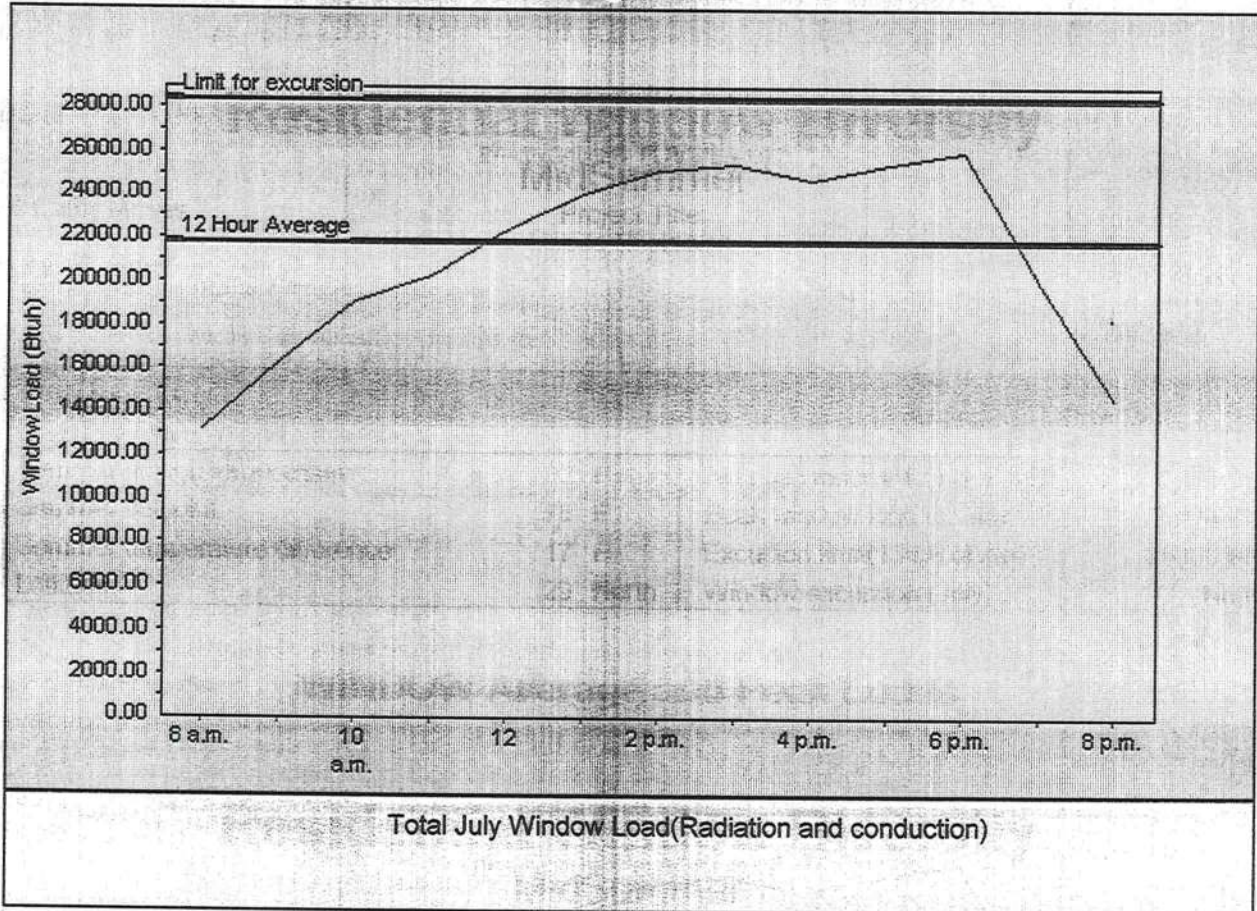
Lake City, FL 32055-

12/28/2009

Weather data for: Gainesville - Defaults

Summer design temperature	92 F	Average window load for July	21831 Btu
Summer setpoint	75 F	Peak window load for July	26014 Btu
Summer temperature difference	17 F	Excursion limit(130% of Ave.)	28380 Btu
Latitude	29 North	Window excursion (July)	None

### WINDOW Average and Peak Loads



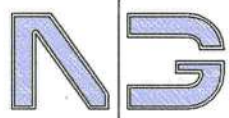
The midsummer window load for this house does not exceed the window load excursion limit.  
This house has adequate midsummer window diversity.

EnergyGauge® System Sizing for Florida residences only  
 PREPARED BY: \_\_\_\_\_  
 DATE: 12/28/09





~~Wade Willis~~  
Moses Job



**NICHOLAS  
PAUL  
GEISLER**  
**ARCHITECT**  
N.C.A.R.B. Certified

1758 NW Brown Road  
Lake City, FL 32055  
386/755-9021

31 MARCH 2010

JOHNNY KEARSE, BUILDING OFFICIAL  
COLUMBIA COUNTY, BUILDING DEPT.  
COLUMBIA COUNTY COURTHOUSE ANNEX  
LAKE CITY, FLORIDA 32055

RE: RESIDENCE  
PERMIT Nr.: 28220

DEAR SIR:

PLEASE BE ADVISED THAT I HAVE INSPECTED THE HAND FRAMING AT THE OCTAGONAL ROOF FOR THE ABOVE REFERENCED PROJECT AND RECOMMEND THE FOLLOWING TWO ADDITIONS TO THE FRAMING:

1. ACROSS THE PEAK OF THE ROOF, INSTALL 4 "SIMPSON" ST22 STRAPS, CENTERED ON THE PEAK AND ALIGNED WITH THE 4 RAFTER SETS THAT FORM THE OCTAGONAL PEAKED ROOF. SECURE WITH 4 - 10d NAILS, EACH RAFTER.
2. ACROSS ANY ONE SET OF MAIN RAFTERS AT THE INTERIOR PEAK OF THE ROOF, INSTALL 1 - 2X4 COLLAR-TIE, 12" BELOW THE INTERIOR PEAK. SECURE THE COLLAR-TIE WITH 4 - 16d NAILS TO THE ADJOINING RAFTER SET AT EACH END OF THE COLLAR-TIE - NAILS TO BE CLINCHED.

SHOULD YOU HAVE ANY FURTHER QUESTIONS WITH THIS, PLEASE CALL FOR ASSISTANCE.

YOURS TRULY,  
NICHOLAS PAUL GEISLER, ARCHITECT ARO00T005



BOARD OF COUNTY COMMISSIONERS  
OFFICE OF  
**BUILDING & ZONING**  
COLUMBIA COUNTY, FLORIDA

**CERTIFICATE OF OCCUPANCY RECEIPT**

RECEIPT NUMBER / PERMIT NUMBER 000028320 DATE 06/28/2010

APPLICANT MIKE MOSES

OWNER MIKE MOSES

CONTRACTOR OWNER BUILDER

PARCEL ID NUMBER 13-3S-15-00176-005 NUMBER OF EXISTING DWELLINGS 0

TYPE OF DEVELOPMENT SFD, UTILITY

HEATED FLOOR AREA 2608.00 TOTAL AREA 5537.00

**FEES:**

FIRE FEE (5 ACRES OR LESS) 25.68

FIRE FEE (MORE THAN 5 ACRES) 23.20

WASTE ASSESSMENT FEE 67.00

TOTAL ASSESSMENT FEES CHARGED 115.88

CHECK NUMBER \_\_\_\_\_

MAKE CHECKS PAYABLE TO: BCC (Board of County Commissioners)

135 NE Hernando Ave., Suite B-21  
Lake City, Florida 32055  
Phone: 386-758-1008  
Fax: 386-758-2160



*Never PAID - Sent to tax office  
9/3/10*

# GENTRYPANORAMA OPEN COLUMBIA AVENUE

## OCCUPANCY

COLUMBIA COUNTY, FLORIDA

### Department of Building and Zoning Inspection

*This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.*

Parcel Number 13-3S-15-00176-005

Building permit No. 000028320

Use Classification SFD, UTILITY

Fire: 48.88

Permit Holder OWNER BUILDER

Waste: 67.00

Owner of Building MIKE MOSES

Total: 115.88

Location: 413 NW RIDGE GLEN, WELLBORN, FL

Date: 06/28/2010

*Fanny Dickel*

Building Inspector



POST IN A CONSPICUOUS PLACE  
(Business Places Only)





## **COLUMBIA COUNTY BUILDING DEPARTMENT**

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

### **OWNER BUILDER DISCLOSURE STATEMENT**

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed and bonded in Florida and to list his or her license numbers on permits and contracts.

I understand that I may build or improve a one-family or two-family residence or farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

I understand that it is frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.



I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or Internet website address <http://www.myflorida.com/dbpr/pro/cilb/index.html> for more information about licensed contractors.

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

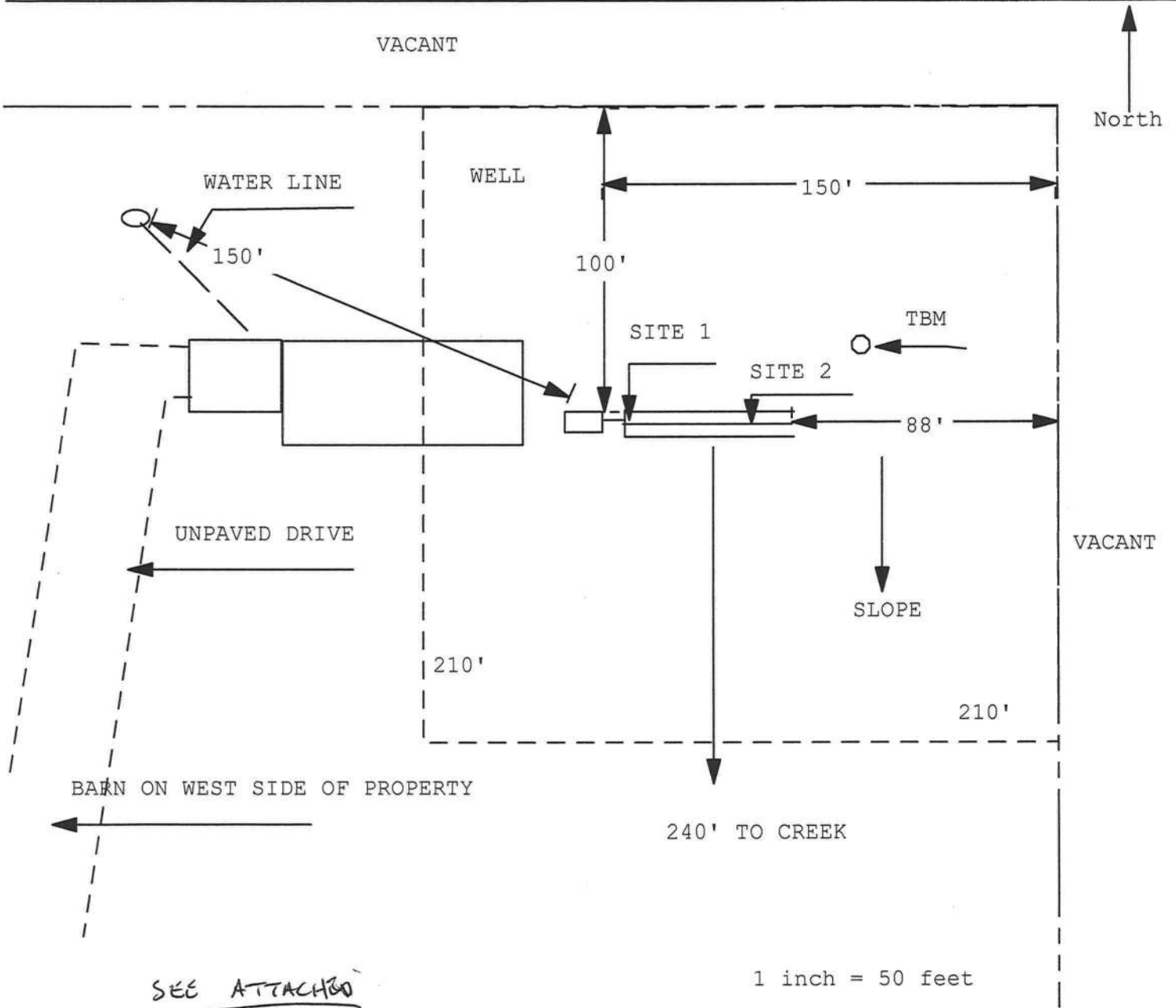
413 NW Ridge Gln LC FL

I agree to notify Columbia County Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

I understand that if I hire subcontractors they must be licensed for that type of work in Columbia County, ex: framing, stucco, masonry, and state registered builders. Registered Contractors must have a minimum of \$300,000.00 in General Liability insurance coverage and the proper workers' compensation. Specialty Contractors must have a minimum of \$100,000.00 in General Liability insurance coverage and the proper workers' compensation coverage.

**Application for Onsite Sewage Disposal System  
Construction Permit. Part II Site Plan**  
 Permit Application Number: 09-0638

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT**



Site Plan Submitted By Paul R. [Signature] Date 12/22/09  
 Plan Approved X Not Approved      Date 12/28/09  
 By [Signature] Columbia CPHU  
 Notes: [Signature]

**SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR \_\_\_\_\_ PHONE \_\_\_\_\_

**THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT**

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

**Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.**

<del>ELECTRICAL</del> Concrete	Print Name <u>DARRELL SPADLEY CONCRETE</u> Signature <u><i>Darrell Spadley</i></u> License #: <u>000063</u> Phone #: <u>386-752-5947</u>
MECHANICAL/ A/C _____	Print Name _____ Signature _____ License #: _____ Phone #: _____
PLUMBING/ GAS	Print Name <u>C. L. BOYK BOYETTE PLUMBING</u> Signature <u><i>C. L. Boyette</i></u> License #: <u>CF021546</u> Phone #: <u>(386) 752-0776</u>
ROOFING	Print Name _____ Signature _____ License #: _____ Phone #: _____
SHEET METAL	Print Name _____ Signature _____ License #: _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ Signature _____ License #: _____ Phone #: _____
SOLAR	Print Name _____ Signature _____ License #: _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

**F. S. 440.103 Building permits; identification of minimum premium policy.**--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.



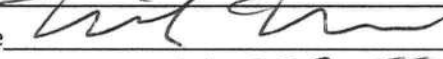
**SUBCONTRACTOR VERIFICATION FORM**

APPLICATION NUMBER \_\_\_\_\_ CONTRACTOR \_\_\_\_\_ PHONE \_\_\_\_\_

**THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT**

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

***Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.***

<b>ELECTRICAL</b>	Print Name <u>Mike Moscs</u> License #: <u>owner</u>	Signature  Phone #: <u>386-397-5800</u>
<b>MECHANICAL/ A/C</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>PLUMBING/ GAS</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>ROOFING</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/ SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

**F. S. 440.103 Building permits; identification of minimum premium policy.**--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.