

DATE 08/28/2003

Columbia County Building Permit / Application

PERMIT

000021018

This Permit Expires One Year From Date of Issue

New Resident

APPLICANT GAYLE EDDY PHONE 496-3687

ADDRESS RT 4 BO 3260 LAKE BUTLER FL 32054

OWNER LARRY NEILL PHONE 755-1971

ADDRESS 293 NW PATRIOT COURT LAKE CITY FL 32055

CONTRACTOR GAYLE EDDY PHONE _____

LOCATION OF PROPERTY 41N, TL ON MOORE, TR ON CIMMARON, TR ON CANTON, TL ON PATRIOT, 6TH ON RIGHT

TYPE DEVELOPMENT MH/UTILITY ESTIMATED COST OF CONSTRUCTION .00

FLOOR AREA _____ TOTAL AREA _____ HEIGHT .00 STORIES _____ WALLS _____

FOUNDATION _____ ROOF (Type & Pitch) _____ FLOOR _____

LAND USE & ZONING RR MAX. HEIGHT _____

MINIMUM SET BACK: STREET-FRONT / SIDE 25.00 REAR 15.00 SIDE 10.00

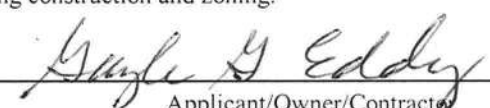
NO. EX.D.U. 0 FLOOD ZONE AE CERT. DATE _____ DEV. PERMIT 2303019

LEGAL DESCRIPTION

PARCEL ID 13-3S-16-02100-111 SUBDIVISION HUNTER'S LANDING

BLOCK _____ LOT 11 UNIT _____ TOTAL ACRES 1.50

I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

EXISTING IH0000714  Applicant/Owner/Contractor

Driveway Connection _____ Culvert Waiver _____ Contractor's License Number _____

01-0075-N BK RK

Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____

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 _____ framing _____
 date/app. by _____ date/app. by _____ date/app. by _____

Rough-in plumbing above slab and below wood floor _____
 date/app. by _____

Electrical rough-in _____ Heat and Air Duct _____ Peri. beam _____
 date/app. by _____ date/app. by _____ date/app. by _____

Permanent power _____ Final _____ Pool _____
 date/app. by _____ date/app. by _____ date/app. by _____

COMMENTS: REPLACEMENT, CASH RECEIVED, DP \$10, 1 FT ABOVE ROAD

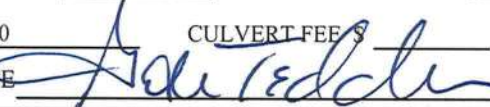
OTHER TYPES OF INSPECTIONS

Culvert _____ M/H tie downs, blocking, electricity and plumbing _____
 date/app. by _____ date/app. by _____

Utility Pole _____ Pump pole _____ Reconnection _____
 date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$.00 ZONING CERT. FEE \$ 25.00 Certification Fee \$.00 Surcharge \$.00

MISC. FEES \$ 100.00 CULVERT FEE \$ _____ TOTAL PERMIT FEE \$ 125.00

INSPECTORS OFFICE  CLERKS OFFICE CN

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."

This Permit Must Be Prominently Posted on Premises During Construction

PLEASE NOTIFY THE COLUMBIA COUNTY BUILDING DEPARTMENT AT LEAST 24 HOURS IN ADVANCE OF EACH INSPECTION, IN ORDER THAT IT MAY BE MADE WITHOUT DELAY OR INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

EXISTING well

PRE INSPECTION OK

*** The well affidavit, from the well driller, is required before the permit can be issued.***

This application must be ,completely, filled out to be accepted. Incomplete applications will not be accepted.

For Office Use Only Zoning Official BLA Building Official RK 8-25-03

AP# 0308-52 Date Received 8/22/03 By G Permit # 21018

Flood Zone AE Development Permit YES Zoning RR Land Use Plan Map Category RVLD

Comments 147' 1st Floor Elevation

- Property ID # R13-3S-16-02100-111 ^{Parcel #} *(Must have a copy of the property dec)
- New Mobile Home _____ Used Mobile Home Year 1992
- Applicant Larry Neill Phone # 755-1971
- Address 293 NW Patriot Ct. Lake City
- Name of Property Owner Larry Neill Phone# 755-1971
- Address Same as Above
- Name of Owner of Mobile Home Larry Neill Phone # 755-1971
- Address Same as Above
- Relationship to Property Owner Same
- Current Number of Dwellings on Property 0
- Lot Size 152 x 450 Total Acreage 1.5 Acres
- Current Driveway connection is existing culvert
- Is this Mobile Home Replacing an Existing Mobile Home Yes
- Name of Licensed Dealer/Installer Gayle G. Eddy Phone # 352-494-2326
386-496-3087
- Installers Address RE 4 Box 3260 Lake Butler FL 32054
- License Number DH0000714 Installation Decal # 209445

The Permit Worksheet (2 pages) must be submitted with this application.

Installers Affidavit and Letter of Authorization must be notarized when submitted.

PERMIT NUMBER

PERMIT WORKSHEET

Address of home being installed _____

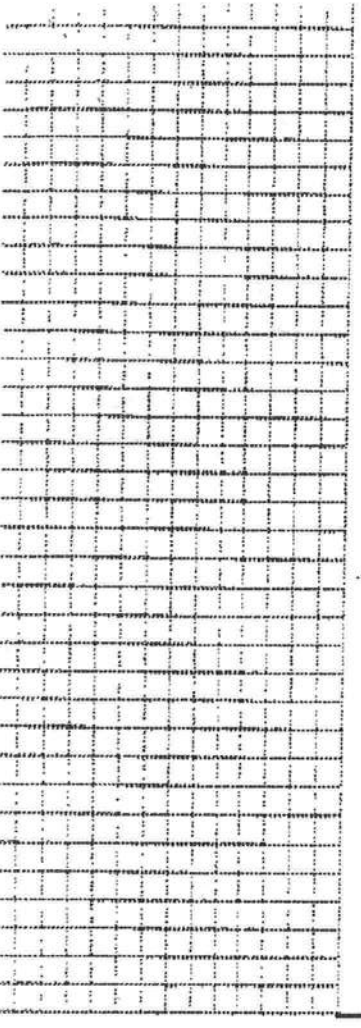
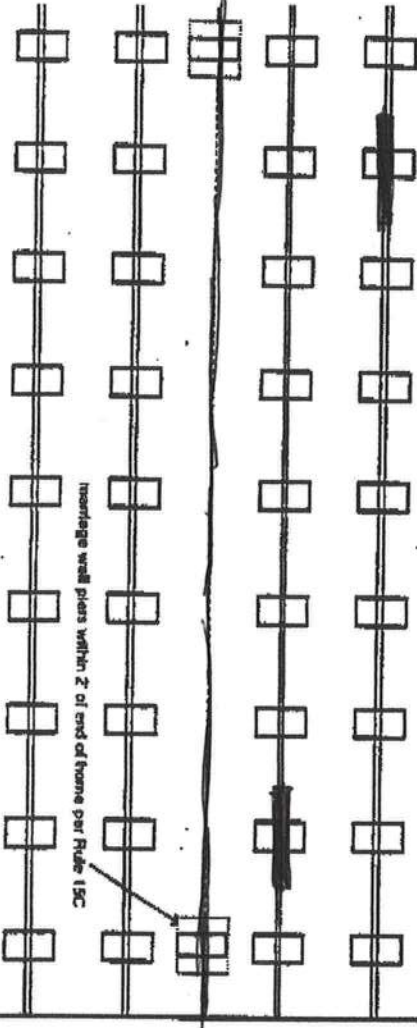
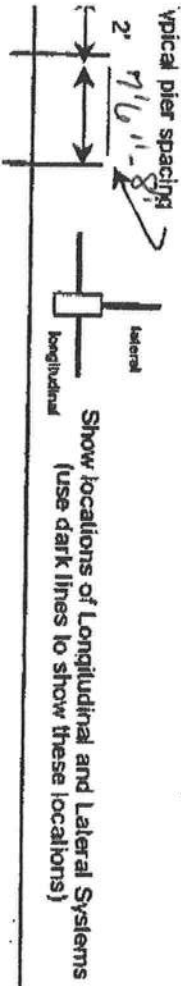
Installer Wayle J. Eddy License # IH0000714

Manufacturer _____ Length x width _____

NOTE: If home is a single wide fill out one half of the blocking plan. If home is a triple or quad wide sketch in remainder of home.

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials WJE



New Home Used Home

Home installed to the Manufacturer's Installation Manual

Home is installed in accordance with Rule 15-C

Single wide Wind Zone II Wind Zone III

Double wide Installation Decal # 209445

Triple/Quad Serial # 3610891E Title -

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity (sq in)	Footer size (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)	24" x 24" (576)	26" x 26" (676)
1000 psi	3'	4'	5'	6'	7'	8'
1500 psi	4'6"	6'	7'	8'	8'	8'
2000 psi	6'	8'	8'	8'	8'	8'
2500 psi	7'8"	8'	8'	8'	8'	8'
3000 psi	9'	8'	8'	8'	8'	8'
3500 psi	8'	8'	8'	8'	8'	8'

Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 17 x 22

Perimeter pier pad size 16 x 16

Other pier pad sizes (required by the mfg.) _____

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening _____ Pier pad size _____

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	448
24 x 24	576
26 x 26	676

ANCHORS

4 ft 5 ft

FRAME TIES

within 2' of ends of home spaced at 5' 4" on

OTHER TIES

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD) _____

Manufacturer _____

Longitudinal Stabilizing Device w/ Lateral Arms _____

Manufacturer _____

Sidewall Longitudinal Marriage wall Shearwall

Number _____

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 2000 psi or check here to declare 1000 lb. soil without testing.

X 2000 X 2000 X 2500

POCKET PENETROMETER TESTING METHOD

- 1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb increments, take the lowest reading and round down to that increment.

X 2500 X 2500 X 3000

TORQUE PROBE TEST

The results of the torque probe test is 300 inch pounds or check here if you are declaring 5 anchors without testing. A test showing 275 inch pounds or less will require 4 foot anchors.

Note: A state approved lateral arm system is being used and 4 ft anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline locations where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb holding capacity.

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name: Gayle G. Eddy
Date Tested: 7/10/03

Electrical

Plumbing

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. 1

Connect all sewer drains to an existing sewer lap or septic tank. Pg. 1

Connect all potable water supply piping to an existing water meter, water tap, or other dependent water supply systems. Pg. 1

Site Preparation

Debris and organic material removed
Water drainage: Natural Swale Pad Other

Fastening multi wide units

Floor: Type Fastener: Length: Spacing:
Walls: Type Fastener: Length: Spacing:
Roof: Type Fastener: Length: Spacing:
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Installer's initials: GE N/A

Type gasket Pg. 1

Installed: Between Floors Yes Between Walls Yes Bottom of ridgebeam Yes

Weatherproofing

The bottomboard will be repaired and/or lapped. Yes Pg. 1
Sliding on units is installed to manufacturer's specifications. Yes Pg. 1
Fireplace chimney installed so as not to allow intrusion of rain water. Yes Pg. 1

Miscellaneous

Skirting to be installed. Yes No
Dryer vent installed outside of skirting. Yes N/A
Range downflow vent installed outside of skirting. Yes N/A
Drain lines supported at 4 foot intervals. Yes N/A
Electrical crossovers protected. Yes N/A

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature: Gayle G. Eddy Date: 8/21/03

CAM112M01 S CamaUSA Appraisal System
8/22/2003 10:15 Legal Description Maintenance
Year T Property Sel

Columbia County
14500 Land 002
AG 000
Bldg 000
Xfea 000
14500 TOTAL B

2003 R 13-3S-16-02100-111
HUNTERS LANDING
SUBRANDY LIMITED PARTNERSHIP

1	LOT 11, HUNTERS, LANDING, S/D.	2
3		4
5		6
7		8
9		10
11		12
13		14
15		16
17		18
19		20
21		22
23		24
25		26
27		28

Mnt 9/20/2001 JEFF

F1=Task F3=Exit F4=Prompt F10=GoTo PGUP/PGDN F24=MoreKeys

TRUTH IN LENDING DISCLOSURE STATEMENT

Creditor: Subrandy Limited Partnership
 Debtor (s): Larry E. Neill
 Loan Amount: \$16,400.00
 Maturity Date: 07/15/18
 Property Address: Lot 11 Hunters Landing

ANNUAL PERCENTAGE RATE: The Cost Of Your Credit As a yearly Rate.	FINANCE CHARGE: The Dollar Amount the Credit Will Cost You.	AMOUNT FINANCED: The amount of credit provided to you or on your behalf.	TOTAL OF PAYMENTS: The amount you will have paid after you have made all payments as scheduled
12.50%	\$19,983.40	\$16,400.00	\$36,383.40

YOUR NEXT PAYMENT SCHEDULE WILL BE:

Number Of Payments	Amount Of Each Payment	When Monthly Payments are Due
180	\$202.13	MONTHLY BEGINNING 08/15/03

INSURANCE: Creditor does not require you to obtain property insurance, flood insurance or credit Insurance.

Security: You are giving a security interest in:
 The Goods or Property Being Purchased

Filing Fees: \$260.20

Late Charge: You will be charged \$10.00 for any payment received more than 10 days after the due date, and \$10.00 per month for each month that the payment remains outstanding until it is paid.

Prepayment: If you pay off early, you will not have to pay a penalty and you will not be entitled to a refund of part of the finance charge.

Assumption: Someone buying your property may not be allowed to assume the remainder of the mortgage on the original terms.

If checked, this obligation has a demand feature.

SEE YOUR CONTRACT DOCUMENTS FOR ANY ADDITIONAL INFORMATION ABOUT NON-PAYMENT, DEFAULT, ANY REQUIRED REPAYMENT IN FULL BEFORE THE SCHEDULE DATE, AND PREPAYMENT REFUNDS AND PENALTIES.

ITEMIZATION OF AMOUNT FINANCED:

Amount given to me directly \$0
 Amount paid on my (loan) account \$0
 Amount paid on my behalf:
 Public Officials \$0
 0 \$0
 Less prepaid Finance Charge(s) \$0
 Amount Financed \$16,400.00

By signing below, I indicate that I have received a copy Of this statement on the indicated date.

Date: 7-11-03


 Larry E. Neill



COLUMBIA COUNTY 9-1-1 ADDRESSING

263 NW Lake City Ave. * P. O. Box 2949 * Lake City, FL 32056-2949
PHONE: (386) 752-8787 * FAX: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com

Addressing Maintenance

To maintain the Countywide addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE ISSUED: August 21, 2003

ENHANCED 9-1-1 ADDRESS:

293 NW PATRIOT CT (LAKE CITY, FL 32055)

Addressed Location 911 Phone Number: NOT AVAIL.

OCCUPANT NAME: NOT AVAIL.

OCCUPANT CURRENT MAILING ADDRESS: _____

PROPERTY APPRAISER MAP SHEET NUMBER: 68A

PROPERTY APPRAISER PARCEL NUMBER: 13-3S-16-02100-111

Other Contact Phone Number (If any): _____

Building Permit Number (If known): _____

Remarks: LOT 11, HUNTERS LANDING S/D

Address Issued By: _____

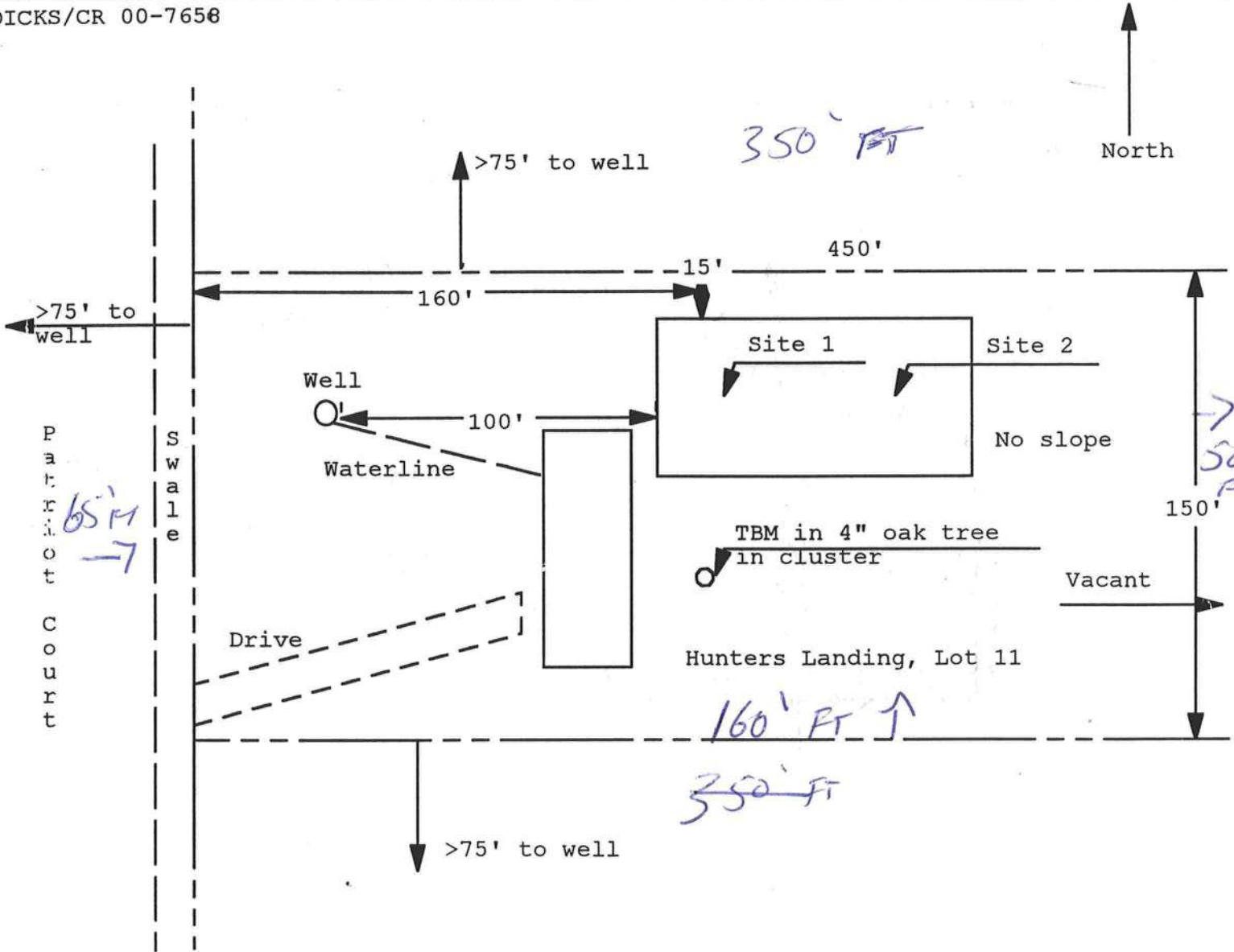

Columbia County 9-1-1 Addressing Department

COLUMBIA COUNTY
9-1-1 ADDRESSING
APPROVED

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan
Permit Application Number: 01-0075-N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

DICKS/CR 00-7656



1 inch = 50 feet

Site Plan Submitted By Paul Lloyd Date 1/22/01
 Plan Approved Paul Lloyd Not Approved _____ Date 1/22/01
 By Paul Lloyd / John How Columbia CPHU

Notes: _____

APPLICATION FOR DEVELOPMENT PERMIT

PERMIT NO. F-023-03-019
(COUNTY NO. & SEQUENCE)

DATE: 8/28/03

APPLICANT: Gayle Eddy

ADDRESS: Rt 4 Box 3266, Lake Butler, 32054

TELEPHONE: (386) 496-3687

OWNER: Larry Neill

ADDRESS: 293 NW Patriot Ct, Lake City, FL

TELEPHONE: 755-1971

NEW SUBDIVISION _____ (YES/NO) IF YES, RECORD THE ENGINEER'S
REGISTRATION NO. P.E. NO. 45263
Date Johns

TRS 13-35-16

SUBDIVISION Hunter Landing LOT/BLOCK: 11

DU mobile home WORK _____

RIVER: _____ RIVER MILE _____

PLAN No (YES/NO) WELL PERMIT NO. _____

SUR-ELEVATION 146 SANITARY PERMIT NO. 01-0075-D

SURVEYOR NO. 45263 BUILDING PERMIT NO. 21018

OFFICIAL 100-YEAR ELEVATION 146 MSL (SRWMD)

REQUIRED LOWEST HABITABLE FLOOR ELEVATION 147 MSL (SRWMD)

PERMIT APPROVED [Signature] 8-28-03
ADMINISTRATOR SIGNATURE DATE

EXPIRATION DATE OF PERMIT 8-28-04

VIOLATIONS: _____ FINAL INSPECTION DATE: _____

COMMENTS: waiting on finished floor elevation before power
1 ft on file

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME Shirley Hitson			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Company NAIC Number	
CITY Lake City	STATE FL	ZIP CODE		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 11 Hunters Landing				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential				
LATITUDE/LONGITUDE (OPTIONAL) (##-##-## or ##.####)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 120070		B2. COUNTY NAME Columbia		B3. STATE FL	
B4. MAP AND PANEL NUMBER 0125	B5. SUFFIX B	B6. FIRM INDEX DATE 6 Jan 1988	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 146.00

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): Dale C. Johns, P.E.
 B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe):
 B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

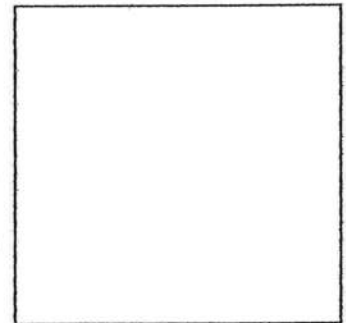
C2. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO
 Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
 Datum _____ Conversion/Comments _____

Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? Yes No

<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	148. 78 ft.(m)
<input type="checkbox"/> b) Top of next higher floor	_____ ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____ ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	_____ ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	145. 26 ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	145. 86 ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)	

License Number, Embossed Seal, Signature, and Date



SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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

CERTIFIER'S NAME	L. Scott Britt	LICENSE NUMBER	P.S.M. #5757
TITLE	Professional Surveyor and Mapper	COMPANY NAME	Britt Surveying
ADDRESS	830 W. Duval Street	CITY	Lake City
		STATE	FL
		ZIP CODE	32055
SIGNATURE		DATE	09/08/03
		TELEPHONE	(386) 752-7163
			L-14142

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number
CITY	STATE	ZIP CODE	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

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

COMMENTS

There is a mobile home on this parcel at this time

L-14142

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?
 Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
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G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum:

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum:

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

COMMENTS

Check here if attachments

DIAGRAM 5

All buildings elevated on piers, posts, piles, columns, or parallel shear walls. No obstructions below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is open, with no obstruction to flow of flood waters (open lattice work and/or readily removable insect screening is permissible).

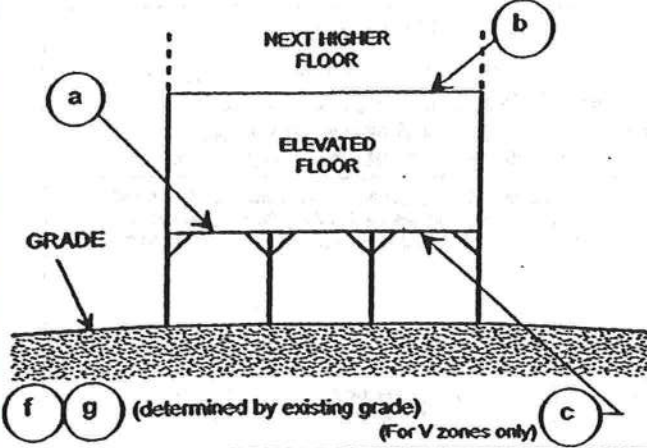


DIAGRAM 6

All buildings elevated on piers, posts, piles, columns, or parallel shear walls with full or partial enclosure below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings** present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

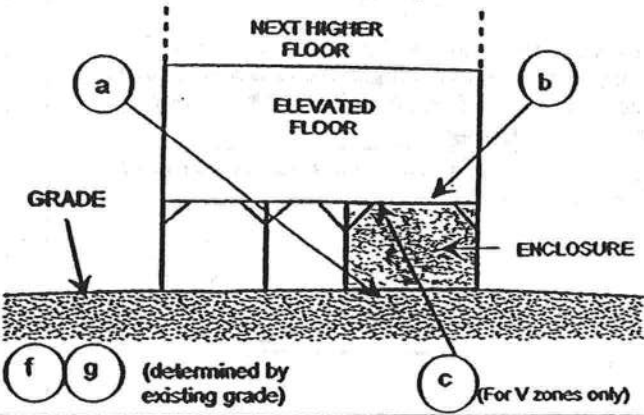


DIAGRAM 7

All buildings elevated on full-story foundation walls with a partially or fully enclosed area below the elevated floor. This includes walkout levels, where at least one side is at or above grade. The principal use of this building is located in the elevated floors of the building.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings** present in the walls of the enclosure. Indicate information about openings in Section C, Building Elevation Information (Survey Required).

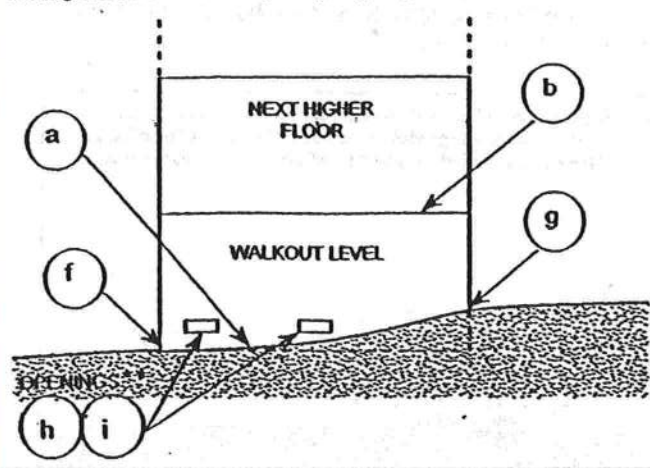
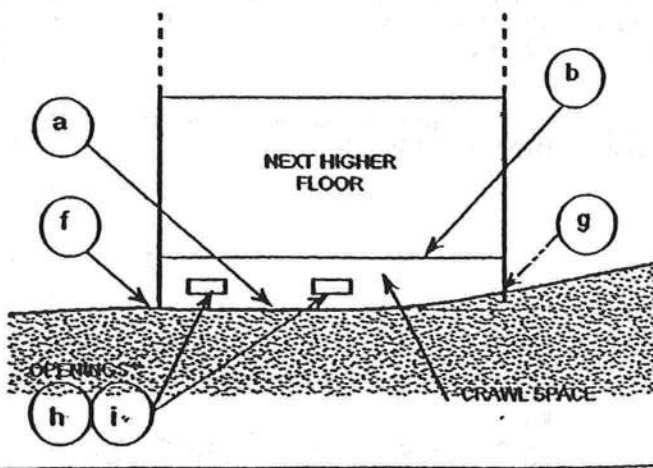


DIAGRAM 8

All buildings elevated on a crawl space with the floor of the crawl space at or above grade on at least one side.

Distinguishing Feature – For all zones, the area below the first floor is enclosed by solid or partial perimeter walls. In all A zones, the crawl space is with or without openings** present in the walls of the crawl space. Indicate information about the openings in Section C, Building Elevation Information (Survey Required).



An "opening" (flood vent) is defined as a permanent opening in a wall that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawl spaces with a total net area of not less than one square inch for every square foot of area enclosed. Each opening must be on different sides of the enclosed area. If a building has more than one enclosed area, each area must have openings on exterior walls to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the grade underneath the flood vents. Alternatively, you may submit a certification by a registered professional engineer or architect that the design will allow for the automatic equalization of hydrostatic flood forces on exterior walls. A window, a door, or a garage door is not considered an opening.

ONE FOOT RISE CERTIFICATION

HUNTERS LANDING

ALL LOTS... 1-23

I hereby certify that construction of the proposed residences of less than 3000 square feet per lot will increase flood elevations less than one foot in the floodplain at the project location.



Dale C. Johns, P.E

Date: 9/24/01

P.E. NUMBER 45263

ROUTE 15 BOX 3834

LAKE CITY, FL 32024

HUNTERS LANDING SUBDIVISION

100 YEAR FLOOD ELEVATIONS

Lots 1-3	155.0'
Lot 4	154.0'
Lot 5-6	152.0'
Lot 7	150.0
Lot 8-9	153.0'
Lot 10-11	146.0
Lot 12	145.0'
Lot 13-15	144.0'
Lot 16-23	1' above roadway (no 100-yr elevations needed)



Dale C. Johns, P.E.

9-17-01

PE number 45263