

DATE 04/23/2009

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027768

APPLICANT ROBERT PUCKETT PHONE 352-351-8153
 ADDRESS 1748 NE 53 LANE OCALA FL 34475
 OWNER CHARLES REGAR PHONE 755-4161
 ADDRESS 2352 SE COUNTRY CLUB RD LAKE CITY FL 32025
 CONTRACTOR ROBERT PUCKETT PHONE 352-351-8153
 LOCATION OF PROPERTY 90 E, R COUNTRY CLUB RD, 1.8 MILES ON RIGHT PAST 131-A

TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00
 HEATED FLOOR AREA _____ TOTAL AREA _____ HEIGHT _____ STORIES _____
 FOUNDATION _____ WALLS _____ ROOF PITCH _____ FLOOR _____
 LAND USE & ZONING RSF MH-2 MAX. HEIGHT 35
 Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
 NO. EX.D.U. 0 FLOOD ZONE AH DEVELOPMENT PERMIT NO. 09-003

PARCEL ID 09-4S-17-08301-015 SUBDIVISION _____
 LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 1.54

IH0000707 *Robert Puckett*
 Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
 EXISTING 09-0213-E CS WR N
 Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: EXISTING MH TO BE REMOVED, 2.31 LEGAL NON-CONFORMING LOT, 1' RISE LETTER ON FILE, NEED FINISHED FLOOR ELEVATION CERTIFICATE BEFORE POWER SHOWING A MFE OF 104.5' Check # or Cash 3597

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 \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
 MISC. FEES \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 38.52 WASTE FEE \$ 100.50
 FLOOD DEVELOPMENT FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ _____ **TOTAL FEE** 564.02
 INSPECTORS OFFICE *J.H.* CLERKS OFFICE *CH*

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.

CHK#3597

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 1-10-08) Zoning Official 4/9/09 Building Official 4/9/09

AP# 0904-08 Date Received 5/1 By JW Permit # 27768

Flood Zone A.H. Development Permit yes Zoning RSFNMH2 Land Use Plan Map Category RND

Comments Existing MH to be removed. Finished floor 11' high etc. 2-31 legal non-coop. lot hole Eled. cert. before power

FEMA Map# 12023C0313 Elevation 103.5 Finished Floor 104.5 River clay creek In Floodway NO

Site Plan with Setbacks Shown EH # 09-0213 EH Release Well letter Existing well

Recorded Deed or Affidavit from land owner Letter of Auth. from installer State Road Access

Parent Parcel # _____ STUP-MH _____ F W Comp. letter _____

IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____

School _____ = TOTAL _____ DP# 09-003

Property ID # 08-48-17-08301-015 Subdivision _____

- New Mobile Home Mobile Used Mobile Home _____ MH Size 28x56 Year 2006
- Applicant Robert Puckett Phone # 352-351-8153
- Address 1748 NE 58 Lane Ocala FL 32025 34475
- Name of Property Owner Charles Regan Phone# 386-755-4161
- 911 Address 2352 SE Country Club Road Lake City 32025
- Circle the correct power company - FL Power & Light - Clay Electric
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Charles Regan Phone # 386-755-4161
- Address 164 SE Mubble Street Lake City 32025
- Relationship to Property Owner self
- Current Number of Dwellings on Property Removed
- Lot Size 1.54 acres Total Acreage 1.54
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home -Yes- (owes)
- Driving Directions to the Property Lake City East to Country Club Road I.R. to property on right 1.8 miles past 10 A
- Name of Licensed Dealer/Installer Robert Puckett Phone # 352-351-8153
- Installers Address 1748 NE 58 Lane Ocala FL 34475
- License Number IF10000207 Installation Decal # TR0-301690

375.
139.01
514.02 50.01

PERMIT NUMBER

PERMIT WORKSHEET

Installer Robert Puckell License # TH000707

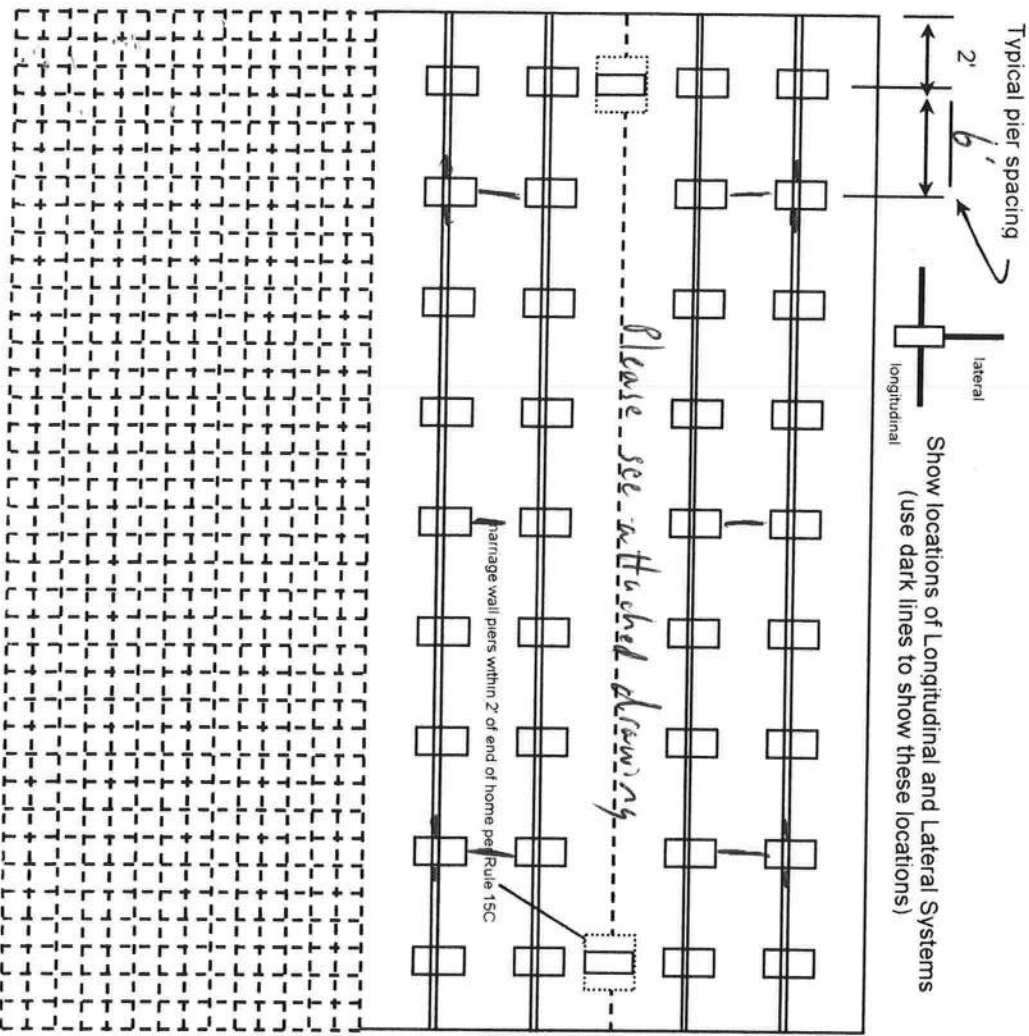
Address of home being installed County Club Road Lake City FL 34478

Manufacturer Nobility Length x width 28x56

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 RP



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 # 1SD

Triple/Quad Serial # N8-12818 a/b

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 dsf	3'	4'	5'	6'	7'	8'
1500 dsf	4' 6"	6'	7'	8'	8'	8'
2000 dsf	6'	8'	8'	8'	8'	8'
2500 dsf	7' 6"	8'	8'	8'	8'	8'
3000 dsf	8'	8'	8'	8'	8'	8'
3500 dsf	8'	8'	8'	8'	8'	8'

* Interpolated from Rule 15C-1 pier spacing table.

PIER PAD SIZES

I-beam pier pad size 16x22.5'

Perimeter pier pad size 16'x16'

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 22.5'x32'

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	446
24 x 24	576
26 x 26	676

ANCHORS

4 ft 5 ft

FRAME TIES

within 2' of end of home spaced at 5' 4" oc

OTHER TIES

Number 11

Sidewall 4

Longitudinal Marriage wall 2

Shearwall 2

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)

Manufacturer Minatec M16n

Longitudinal Stabilizing Device w/ Lateral Arms

Manufacturer Minatec M16n

POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 1500 psf or check here to declare 1000 lb. soil without testing.

X 1500 X 1500 X 1500

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 1500 X 1500 X 1500

TORQUE PROBE TEST

The results of the torque probe test is 176 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 the points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

RP Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Robert Puckett

Date Tested

4-7-09

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. 43

Connect all sewer drains to an existing sewer tap or septic tank. Pg. 42

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. 43

Site Preparation

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

Fastening multi wide units

Floor: Type Fastener: 3/16" x 1/4" Length: 40 Spacing: 12"
Walls: Type Fastener: 6" metal Length: Full Spacing:
Roof: Type Fastener: 6" metal Length: Full 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 R.P.

Type gasket: Foam sealer
Pg. 14
Installed: Between Floors Yes
Between Walls Yes
Bottom of ridgebeam Yes

Weatherproofing

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

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
Electrical crossovers protected. Yes

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature

Robert Puckett

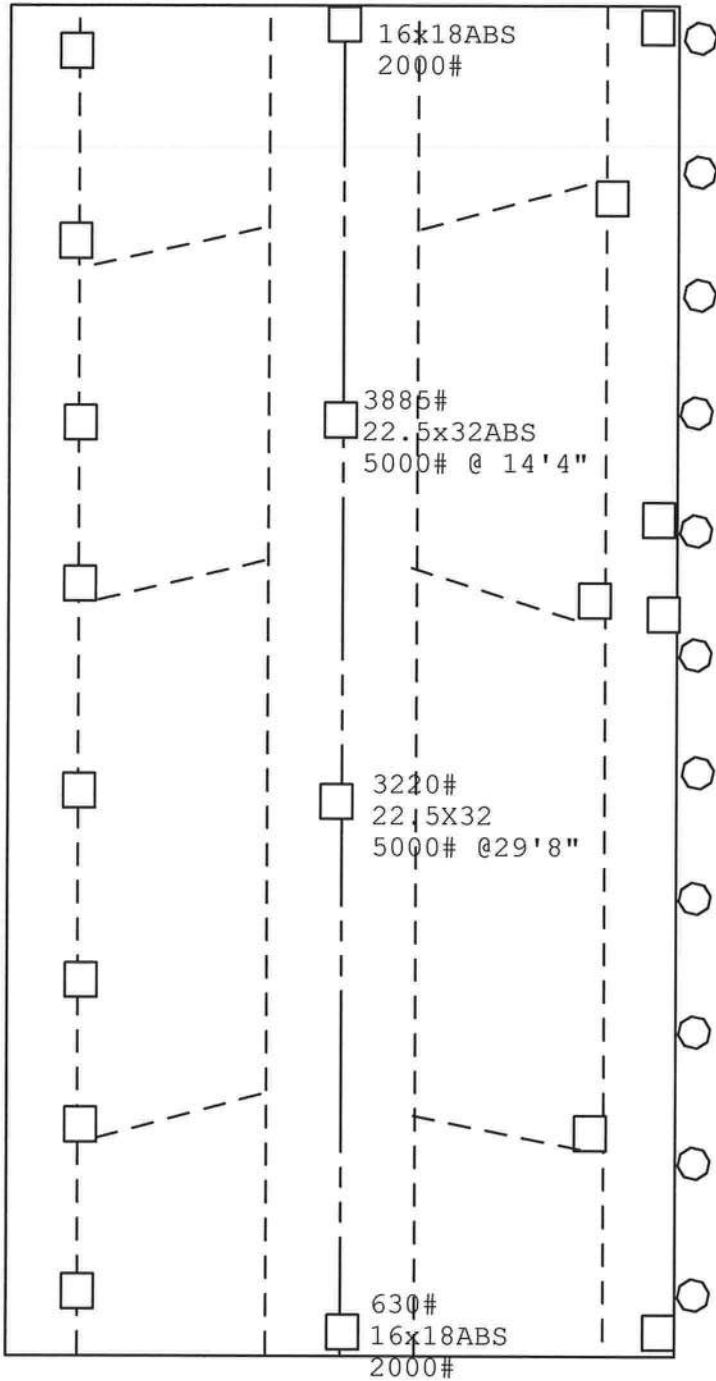
Date

4-7-09

1/8"=1' 28'x56' 56e3f3

Nobility homes

Set-up instruction
Manufactures manual



1500#soil
176 in #torq

□=22.5"x16"ABS pads on 6'
o.c.on main I-beams

□=16"x18"ABS pads for doors
and shearwall piers will
be clearly marked on home

○ 4' anchor on 5'4" oc

longitudinal and lateral
anchors will
be the minute man 6 systems
total for house



State of Florida
 DEPARTMENT OF
 HIGHWAY SAFETY AND MOTOR VEHICLES
 TALLAHASSEE, FLORIDA 32309-0500

FRED O. DICKINSON, III
 Executive Director

May 19, 2000

Mr. Chuck Mackorvish
 Tie Down Engineering, Incorporated
 5901 Wheaton Drive
 Atlanta, Georgia 30336

Dear Mr. Mackorvish:

We wish to acknowledge receipt of your specifications and test results certifying that your ABS Plastic Stabilizing Device listed below, complies with the rules and regulations set by the Department of Highway Safety and Motor Vehicles, Chapter 15-C1.0103.

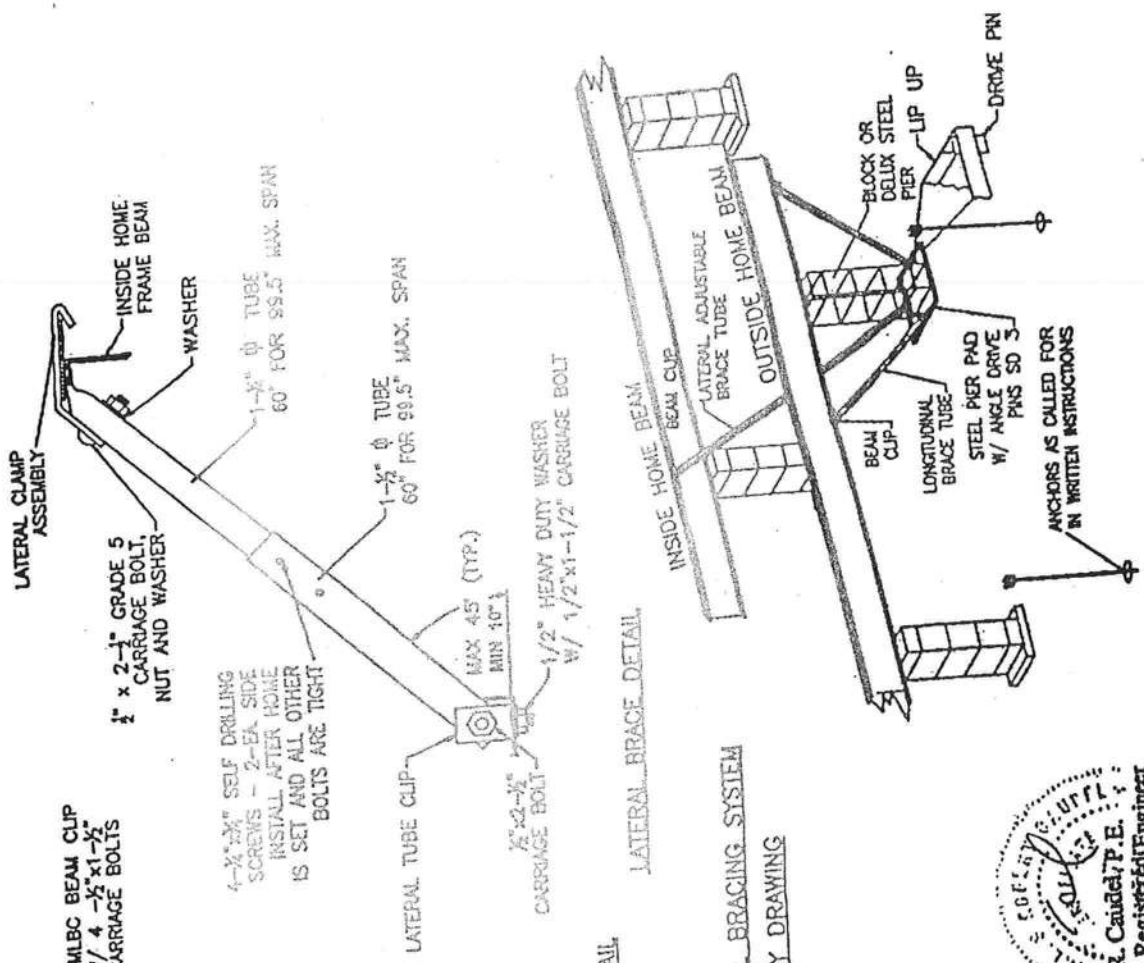
Based on the information submitted to this bureau, the following products are listed for use in Florida as Type I and Type II anchors, when the installation instructions are provided:

MODEL #	DESCRIPTION
502931	Plastic Stabilizer Post 8" x 24" x 1.375 at top

If you have any questions, I can be reached at (850) 413-7600.

Sincerely,

Phil Bergelt
 Phil Bergelt, Program Manager
 Bureau of Mobile Home and
 Recreational Vehicle Construction
 Division of Motor Vehicles



NOTES

MAXIMUM PIER HEIGHT 48"

MAX. SIDEWALL HEIGHT 96"

MAX. BEAM SPACING 99.5"

MAX. ROOF EAVES 16"

WHEN USING LONGITUDINAL BRACES, 2ND PIER IN FROM THE END OF THE HOME MAY BE USED TO MAKE ROOM FOR BRACE TUBES.

2- 39" FOR 18" TO 24" PIER

2- 44" FOR 25" TO 32" PIER

2- 53" FOR 33" TO 40" PIER

2- 65" FOR 41" TO 48" PIER

LONGITUDINAL BRACE DETAIL

LATERAL BRACE DETAIL

LONGITUDINAL & LATERAL BRACING SYSTEM

DETAIL ASSEMBLY DRAWING

NOTE: 1/2" BOLTS ARE GRADE 5

MINUTE MAN ANCHORS

10/10/01

REV 3/6/02

REV 7/14/04

THE ILES BRACING SYSTEM WAS TESTED FOR WIND ZONES I, II & III



Minute Man anchors, Inc.

Installation Instructions for LLBS Longitudinal and Lateral Bracing System
Wind Zones II, III and concrete applications

Special State requirements:

Alabama - Maximum Pier Height: 32'. HUD Code Homes Only.

Florida - See Florida zone II & III Instructions.

Michigan - Foundation depth must be 42" below grade as per Chapter 1805.2.1 2000

Texas - 12 inch long drive pins are needed when the average of three soil test probe

readings (at 6", 12" and 18" depths) exceeds 350 inch pounds. 16 inch long drive pins are needed when the average of three soil test probe readings (at 6", 12" and 18" depths) is 350 inch pounds or less but more than 175 inch pounds.

Minute Man Anchors LLBS System must be installed in complete accordance with Minute Man Anchors Installation Instructions and the Home Manufacturer's Instructions.

Minute Man Anchors LLBS System is listed by a nationally recognized third party.

Minute Man Anchors LLBS System is evaluated, tested and approved by a Professional Engineer.

Minute Man Anchors LLBS System must be allowed by the authority having jurisdiction.

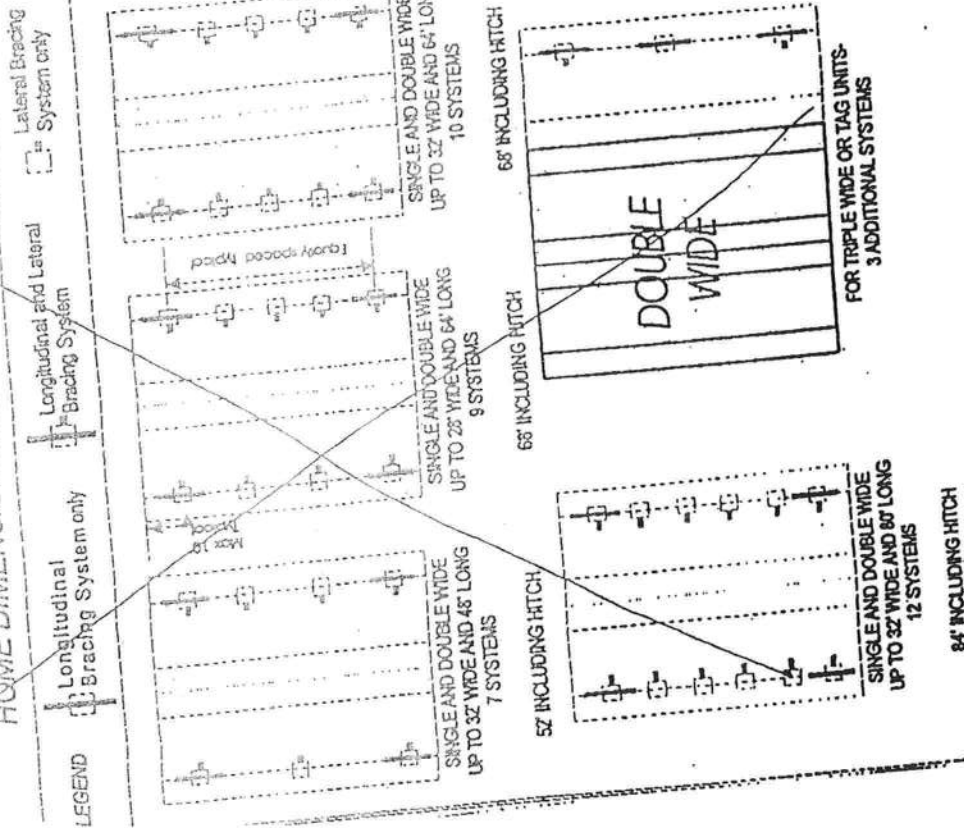
Thank you for using Minute Man Products, Inc. If you have any questions, please call us at (828) 692-0256

MADE IN THE USA

ZONE II AND III LONGITUDINAL AND LATERAL BRACING SYSTEMS PLACEMENT

For 5/12 Roof Pitch

No Frame ties or stabilizer plates. Systems must be as evenly spaced as possible. HOME DIMENSIONS REPRESENT BOX SIZE.



Patent Number
6622439

Minute Man Anchors, inc.

Installation Instructions for Model LLBS Longitudinal and Lateral Bracing System Zone II and III

Note: Your set must be designed by a Registered Professional Engineer if all or one of the following conditions occur:

- Location is within 1,500 feet of Coast
- Roof eaves exceeds 16'
- Pier Height exceeds 48"
- Main beam spacing exceeds 99.5'
- Sidewall height exceeds 96"

1 Refer to the Home Manufacturer Installation Instructions for pier locations. Note: SD3 pad is 2.3 square foot. Vertical tie anchors are required in accordance with home manufacturer. Vertical ties must be used at all connection points furnished by the home manufacturer. Marriage wall anchors are required in accordance with the Home Manufacturer Instructions.

2 Refer to the Systems Placement Plans for the location of Longitudinal Lateral Bracing System.. (See Attached)

3 Remove turf to expose firm soil at each SD3 pad location. Install SD3 pad to manufacturer, state, local codes, and frost line guidelines as it may apply. For extremely hard or rocky soil, mark four (4) slots and pre-drill soil with a 3/4" x 12" masonry drill bit. Zone II & III installations require 16" drive pins.

4 Attach tube clip to SD3 pier pads (see Detail Assembly Drawing) center pad under beam, level pad. Angle Drive Pins may be driven vertically through four (4) slots in SD3 pier pad now or after home is totally set. Angle drive pins may be driven up to ten degrees (10) off of vertical. If you choose to drive pins after home is set, do not cover slots in pier pad.

5 Level home on concrete blocks or deluxe steel pier by Minute Man.

6 Install Longitudinal and Lateral Bracing in accordance with Systems Placement Plan and Detail Assembly Drawing.

7 Install vertical anchors and ties.

MMAPO08.2 R-3

Thank you for using Minute Man Products, Inc. If you have any questions, please call Toll Free at (800) 438-7277.

MADE IN THE USA

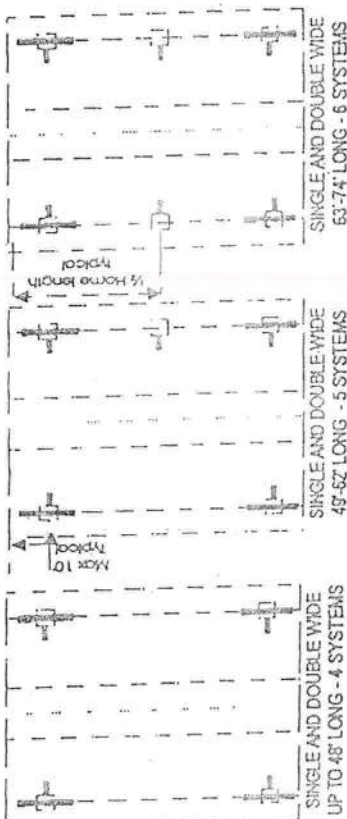
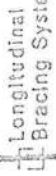
305 West King St. East Flat Rock, North Carolina 28726

ZONE II AND III LONGITUDINAL AND LATERAL BRACING SYSTEMS PLACEMENT

For Roof slopes up to 4/12 pitch

No Frame Ties or Stabilizer Plates. Systems must be as evenly spaced as possible.

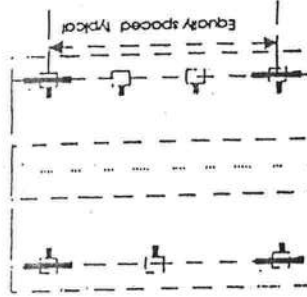
LEGEND



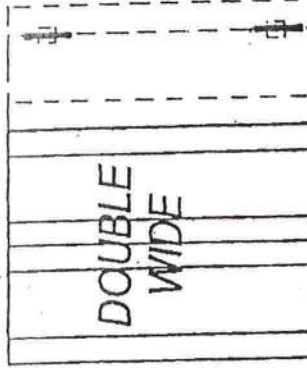
52' INCLUDING HITCH

65' INCLUDING HITCH

80' INCLUDING HITCH



SINGLE AND DOUBLE WIDE
76' LONG - 7 SYSTEMS
80' INCLUDING HITCH



DOUBLE WIDE
FOR TRIPLE WIDE OR TAG UNITS -
2 ADDITIONAL SYSTEMS

SINGLE WIDES UP TO 16' WIDE, DOUBLE WIDES UP TO 32' WIDE, TRIPLE WIDES UP TO 48' WIDE

Minute Man anchors, Inc.

Patent Number
6622439

Installation Instructions for Model LLBS Longitudinal and
Lateral Bracing System Approved for Florida
Revised: 10/27/04

Note: Your set must be designed by a Registered Professional Engineer if all or one of the following conditions occur.

- Location is within 1,500 feet of Coast
- Pier Height exceeds 48"
- Sidewall height exceeds 96"
- Roof eaves exceeds 16"
- Main beam spacing exceeds 99.5"

1 Refer to the Home Manufacturer Installation Instructions for pier locations. 6" Disc anchors 48" long with vertical ties are required at maximum 5'-4" center along both sidewalls starting a maximum of 2'-0" in from each end of the home. Vertical ties must be used at all connection points furnished by the home manufacturer. Centerline anchors to be sized according to soil torque condition. Any manufacturer's specifications for sidewall anchor loads in excess of 4,000 lbs require a 5" anchor.

2 Refer to the Systems Placement Plans for the location of Longitudinal Lateral Bracing System.. (See Attached). Each system is required to have a frame tie and stabilizer attached at each lateral arm stabilizing location.

3 Remove turf to expose firm soil at each SD3 pier location.

4 Attach tube clip to SD3 pier pads (see Detail Assembly Drawing) center pad under beam, level pad. Angle Drive Pins may be driven vertically through four (4) slots in SD3 pier pad now or after home is totally set. Angle drive pins may be driven up to ten degrees (10°) off of vertical. If you choose to drive pins after home is set, do not cover slots in pier pad. 16" Drive pins must be used in Florida.

5 Level home on concrete blocks or deluxe steel pier by Minute Man.

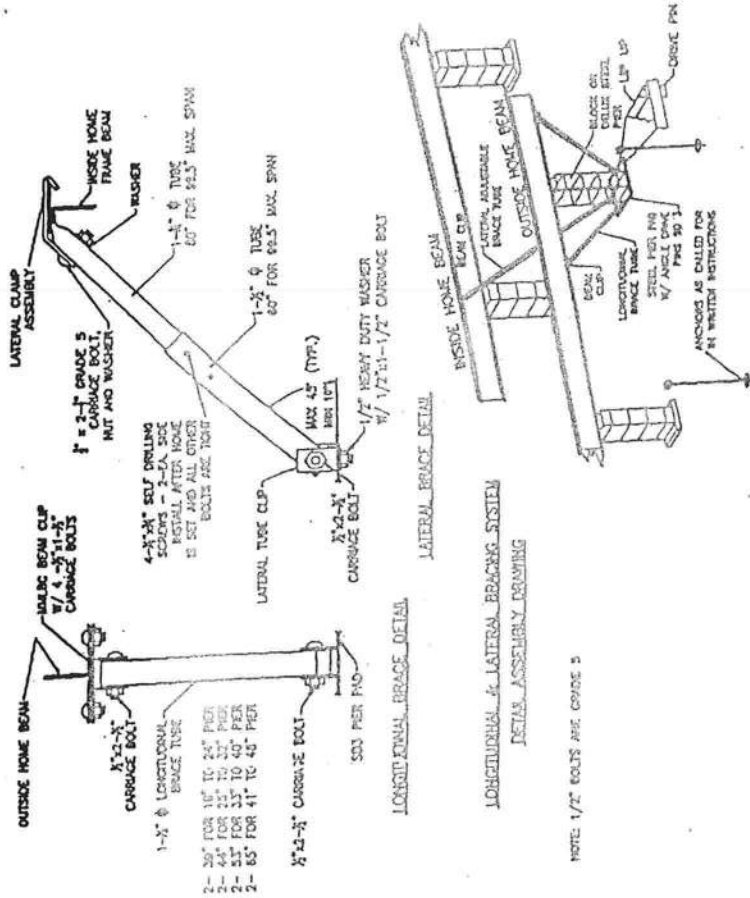
6 Install Longitudinal and Lateral Bracing in accordance with Systems Placement Plan and Detail Assembly Drawing.

7 Install vertical anchors, frame ties and stabilizers at each lateral arm system location..

Thank you for using Minute Man Products, Inc. If you have any questions, please call Toll Free
at (800) 438-7277. MMAP007.2 R-4

305 West King St. East Flat Rock, North Carolina 28726

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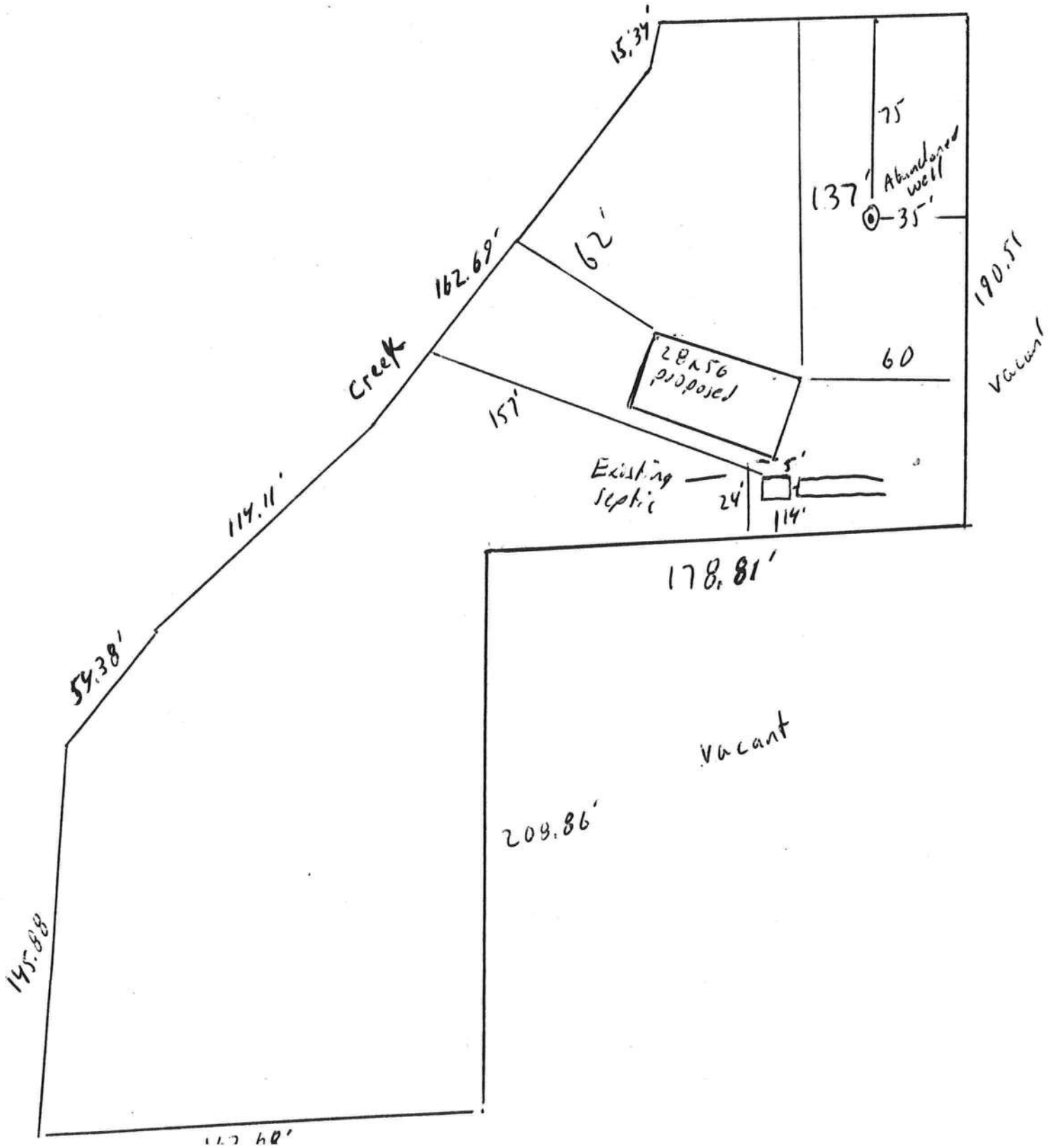
- NOTE: 1/2" BOLTS ARE GRADE 5
- NOTES
 - 1.6" DRIVE PINS FOR FLORIDA
 - MAXIMUM PIER HEIGHT 48"
 - MAX SIDEWALL HEIGHT 96"
 - MAX BEAM SPACING 99.5"
 - MAX ROOF EAVES 16"

WHEN USING LONGITUDINAL BRACES, 2ND PIER IN FROM THE END OF THE HOME MAY BE USED TO MAKE ROOM FOR BRACE TUBES.

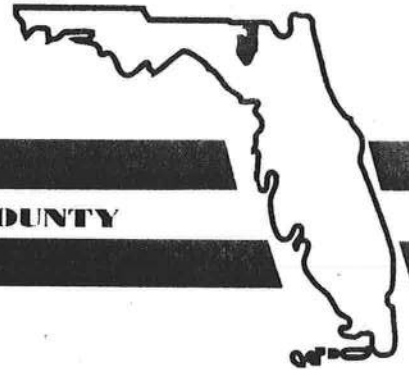
N
1" = 50'

Charles Regur
09-48-17-09301-01S

Country Club Road



District No. 1 - Ronald Williams
District No. 2 - Dewey Weaver
District No. 3 - Jody DuPree
District No. 4 - Stephen E. Bailey
District No. 5 - Scarlet P. Frisina



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

March 24, 2009

RE: Tax Parcel ID # 08-4S-17-08301-015

To Whom It May Concern:

The above referenced property is located within the RSF/MH 2 (Residential Single Family/Mobile Home, 2 per acre) zoning district which allows for mobile homes. If you have any questions concerning this matter, please do not hesitate to contact me at 754-7053.

Sincerely,

A handwritten signature in cursive script that reads "Connie F. Scott".

Connie F. Scott
Planning Technician

BOARD MEETS FIRST THURSDAY AT 7:00 P.M.
AND THIRD THURSDAY AT 7:00 P.M.

MOBILE HOME APPLICATION INFORMATION

(REVISED 1-10-08)

- 4.7.09 - COPY SENT
JW

MOBILE HOME PERMITS BECOME INVALID IF AN APPROVED INSPECTION IS NOT COMPLETED WITHIN 180 DAYS FROM THE DATE OF PERMIT ISSUANCE.

1. **Review Process for Mobile Home Applications**- All of the information in this packet must be completely filled out. The packet is then submitted to the Building Department for review. When the review process is complete, the applicant will be contacted to then pull the Mobile Home Move On Permit. **Mobile Homes can only be set up by a Licensed Installer and the permits must be pulled by an authorized person.**
2. ^{NEW} **Used Mobile Homes.** All used mobile homes placed or relocated in Columbia County must have a pre-inspection form completed before the home is moved to the new location. Any homes that do not meet Wind Zone II or higher requirements can not be moved or set up in Columbia County. Most mobile homes built before 1976 do not meet these requirements therefore cannot be placed or set up in this county. When coming from another county, have that county Inspector complete our pre-inspection form or this form can be completed by a licensed private home inspector. Then return the form to the Building Department before the permit will be issued.
3. **Environmental Health Permit or Sewer Tap Approval.** A copy of the Environmental Health signed site plan or a release must be submitted with your application. Contact them at (386) 758-1058
4. **City Approval.** If the project is located within the city limits of Fort White, prior approval is required. The town of Fort White approval letter is required to be submitted to this office when applying for a Building Permit.
5. **Ownership of Property.** Proof of ownership of the property is required, such as a recorded deed.
6. **Parcel Number.** The parcel number (Tax ID number) from the Property Appraiser (386- 758-1084) is required. This may also be obtained on-line at www.columbiacountyfla.com then go to the Property Appraisers link then follow the screens.
7. **911 Address.** Contact 911 Addressing at (386) 752-8787, an example of the requirements to get the address are included.
8. **Flood Information.** All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting to our office. Any project located within a flood zone where the base flood elevation (100year flood) has been established shall meet the requirements of Section 8.8 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation (100year flood) has not been established shall meet the requirements of section 8.7 of the Columbia County Land Development Regulations. **Certified Finished Floor Elevations Will Be Required On Any Project Where The Base Flood Elevation (100 year flood) Has Been Established.** A development permit will also be required (\$50.00) fee. All dwellings must be placed one foot above the adjacent roadway or a floor height letter submitted from a licensed Engineer. *CFS - OFFICE REVIEW*
9. **(a) Cost of Mobile Home Permit.** The fee associated with your size Mobile home , plus a \$75.00 Zoning & Flood fee, plus the current Special Assessment fees. Plus Impact Fees if applicable. **(b) Special Assessment Fees.** For Fire and Solid Waste, it is prorated monthly. **(c) Impact fees-** Notice of Imposition of Impact Fee Rates for Residential Dwelling Units/Mobile Homes are \$3097.40. All of these fees make up the total permit fee. For questions call the Building Department at (386) 758-1008. *OFFICE*
10. **Driveway Connection.** If the property does not have an existing access to a county maintained public road, then you must apply for culvert permit (\$25.00) or a culvert waiver (\$50.00) if you feel that a culvert is not needed. The waiver is either approved or denied by the Columbia County Public Works Department. If the property will have access from a state maintained road, then an approved application for driveway access from F.D.O.T. must be submitted before a permit will be issued. **No release of final power** will be given until driveway access is complete and given final inspection approval by the appropriate department.
11. **Private Wells.** The well driller has to give you a letter on your well, stating (a) size of pump motor (b) size of pressure tank (c) cycle stop valve if used. This letter should be on there letterhead. Any questions on this contact (386) 758-1008. *PENDING*
12. **Site Plan.** Draw the property with the mobile home where it is going to be placed. Show the actual distance from each property line to the mobile home. Show existing roads and the driveway location. Show all other buildings and residences on the property. list the distance from these to the new mobile home. Show the location of the well and list existing or new. *PE*

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 * 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 REQUESTED: 4/7/2009 DATE ISSUED: 4/22/2009

ENHANCED 9-1-1 ADDRESS:

2352 SE COUNTRY CLUB RD

LAKE CITY FL 32025

PROPERTY APPRAISER PARCEL NUMBER:

09-4S-17-08301-015

Remarks:

Approved Address

APR 22 2009

911Addressing/GIS Dept

Address Issued By:


Columbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Charles Regar		For Insurance Company Use:
		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. SE Country Club Road		Company NAIC Number
City Lake City	State FL	ZIP Code 32025
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Parcel # 08301-015		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>30 09' 17.8"</u> Long. <u>82 36' 37.0"</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>5</u>		
A8. For a building with a crawl space or enclosure(s), provide		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) <u>N/A</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>N/A</u>		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>N/A</u>
c) Total net area of flood openings in A8.b <u>N/A</u> sq in		c) Total net area of flood openings in A9.b <u>N/A</u> sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Columbia County 120070		B2. County Name Columbia		B3. State FL	
B4. Map/Panel Number 12023C0313	B5. Suffix C	B6. FIRM Index Date 02/04/09	B7. FIRM Panel Effective/Revised Date 02/04/09	B8. Flood Zone(s) AH	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 103.5

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) _____
- B11. Indicate elevation datum used for BFE in Item 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 _____ CBRS OPA

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. 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 C2.a-g below according to the building diagram specified in Item A7.
 Benchmark Utilized TBM 090043 Vertical Datum NAVD 1988
 Conversion/Comments _____

Check the measurement used.

- a) Top of bottom floor (including basement, crawl space, or enclosure floor) 104.50 feet meters (Puerto Rico only)
- b) Top of the next higher floor N/A feet meters (Puerto Rico only)
- c) Bottom of the lowest horizontal structural member (V Zones only) N/A feet meters (Puerto Rico only)
- d) Attached garage (top of slab) N/A feet meters (Puerto Rico only)
- e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) N/A feet meters (Puerto Rico only)
- f) Lowest adjacent (finished) grade (LAG) 102.2 feet meters (Puerto Rico only)
- g) Highest adjacent (finished) grade (HAG) 103.2 feet meters (Puerto Rico only)

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 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.

Check here if comments are provided on back of form.

Certifier's Name Scott Daniel, PSM		License Number LS 6449	
Title Professional Surveyor & Mapper	Company Name Daniel & Gore, LLC		
Address PO Box 1501	City Lake City	State FL	ZIP Code 32056
Signature <i>Scott Daniel</i>	Date <u>3-27-09</u>	Telephone 386-208-4176	



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. SE Country Club Road	Policy Number
City Lake City State FL ZIP Code 32025	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

Signature _____ Date _____ Check here if attachments

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

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.


- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the HAG.
 b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. 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, 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, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name
Scott Daniel, PSM

Address PO Box 1501 City Lake City State FL ZIP Code 32056

Signature  Date 3-27-09 Telephone 386-208-4176

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. Check the measurement used in Items G8. and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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
-------------------	------------------------	-----------------------------------------------------

- G7. This permit has been issued for: New Construction Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

Local Official's Name _____ Title _____

Community Name _____ Telephone _____

Signature _____ Date _____

Comments

Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. SE Country Club Road	For Insurance Company Use: Policy Number
City Lake City State FL ZIP Code 32025	Company NAIC Number
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.	

N/A

Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. SE Country Club Road	For Insurance Company Use: Policy Number
City Lake City State FL ZIP Code 32025	Company NAIC Number
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."	

N/A



STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 09-0213E

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: Charles Regar (J+H Mobile Homes)

Site Plan submitted by: QC [Signature] Signature M. B. [Signature] Title MA [Signature]
Plan Approved Not Approved Date 4-16-09
By [Signature] Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

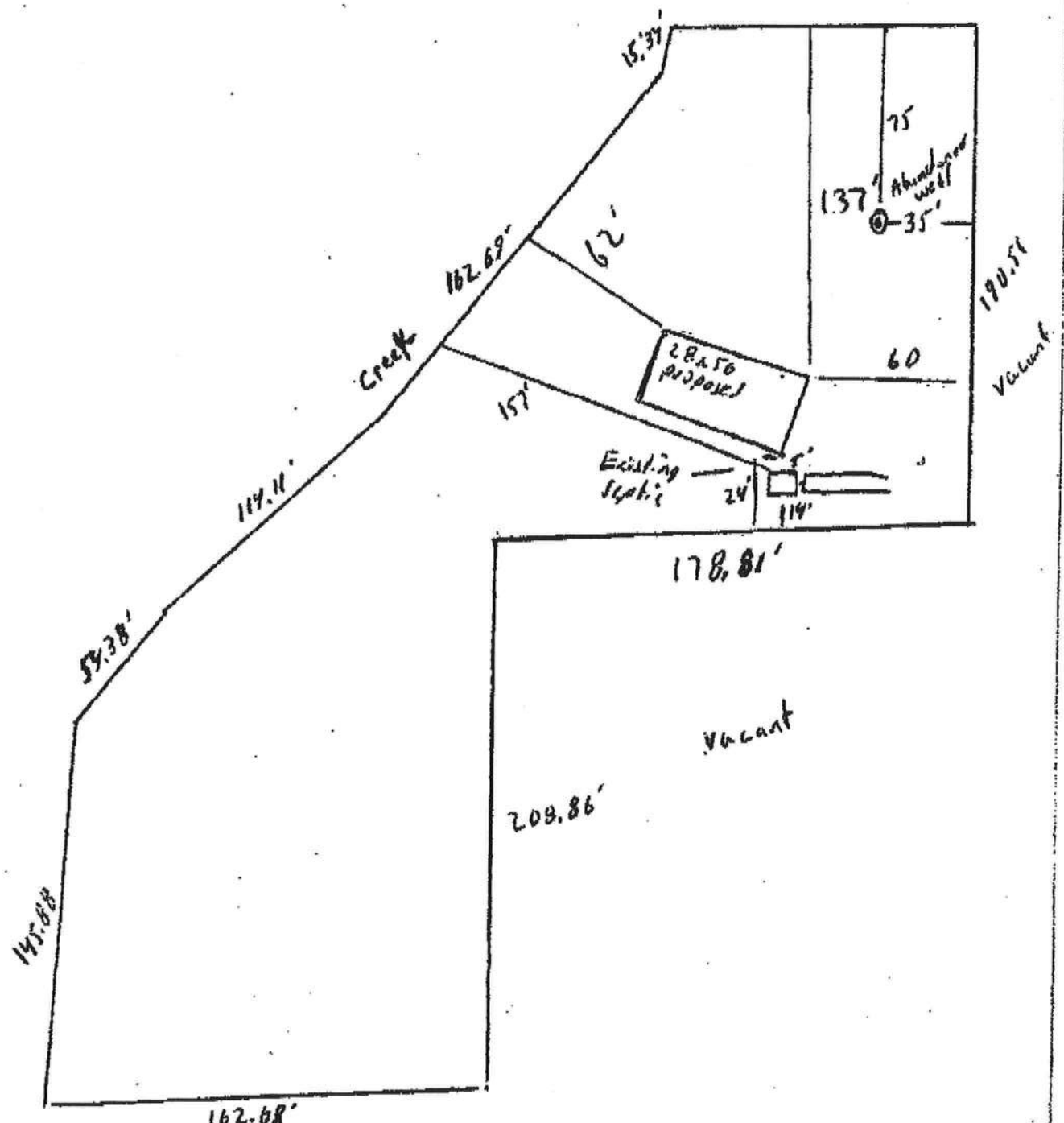
DH 4015, 10/98 (Replaces HRS-H Form 4015 which may be used)
Stock Number: 6744-008-4015-0

09-0213E

N
1" = 50'

Charles Regar
09-48-17-08301-01S
QC Tol 4.8.2009

Country Club Road



**Columbia County Building Department
Flood Development Permit**

**Development Permit
F 023- 09-003**

DATE 04/23/2009 BUILDING PERMIT NUMBER 000027768
APPLICANT ROBERT PUCKETT PHONE 352-351-8153
ADDRESS 1748 NE 53 LANE OCALA FL 34475
OWNER CHARLES REGAR PHONE 755-4161
ADDRESS 2352 SE COUNTRY CLUB RD LAKE CITY FL 32025
CONTRACTOR ROBERT PUCKETT PHONE 352-351-8153
ADDRESS _____ FL _____
SUBDIVISION _____ Lot _____ Block _____ Unit _____ Phase _____
TYPE OF DEVELOPMENT MH,UTILITY PARCEL ID NO. 09-4S-17-08301-015

FLOOD ZONE AH BY CS 1-6-88 FIRM COMMUNITY #. 120070 - PANEL #. 0313 ^{12023C}
FIRM 100 YEAR ELEVATION 103.5 PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 104.5
IN THE REGULATORY FLOODWAY YES or NO RIVER Clay Hole Creek
SURVEYOR / ENGINEER NAME Brett Crews LICENSE NUMBER 65592

ONE FOOT RISE CERTIFICATION INCLUDED
N/A ZERO RISE CERTIFICATION INCLUDED
N/A SRWMD PERMIT NUMBER _____
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED _____

INSPECTED DATE 4-23-09 BY LA
COMMENTS Need finished floor Elevation Certificate
Before power

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



**ONE FOOT RISE ANALYSIS AND CERTIFICATION
100 YEAR BASE FLOOD**

PROJECT DATA

PARCEL ID: 08-4S-17-08301-015

PROPERTY DESCRIPTION: 1.54 ACRES, SE COUNTRY CLUB RD

OWNER: CHARLES REGAR

PROJECT DESCRIPTION: 1,568 SF RESIDENTIAL DWELLING (28'X56' MOBILE HOME) LOCATED +/- 130 FT FROM SE OLD COUNTRY CLUB RD AND +/-60 NORTH OF WOODHAVEN SUBDIVISION BOUNDARY

FLOOD ZONE: AH

BASE FLOOD ELEVATION: 103.50' BASED ON FIRM PANEL 12023C0313

EXISTING GRADE ELEVATION (AT BUILDING LOCATION):
102.2' TO 103.2', ELEVATION BASED ON SURVEY DATA

CONCLUSION

THE PROPERTY IS LOCATED WITHIN A LARGE FLOOD ZONE. TO DEMONSTRATE THE PROPOSED CONSTRUCTION WILL NOT CAUSE MORE THAN A 1 FOOT RISE IN THE FLOOD ELEVATION THE FOLLOWING CALCULATION WAS PERFORMED.

AREA OF LOT = 1.54 ACRES

AREA OF FLOOD ZONE = UNDETERMINED, ASSOCIATED WITH ALLIGATOR LAKE

DEPTH OF LOT BELOW FLOOD ELEVATION = 103.5 FT - 102.2 FT = 1.2 FT

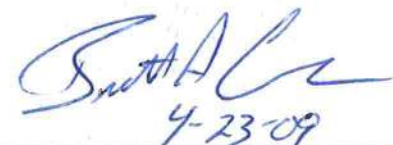
STORAGE VOLUME REMOVED DUE TO DEVELOPMENT = 1.2 FT * 1,568 SF = 1882 SF = 0.043 ACRE-FT

FLOOD LEVEL INCREASE (IF FLOOD ZONE WAS SIZE OF LOT, 1.54 ACRES) = 0.043 ACRE-FT / 1.54 ACRES = 0.03 FT

THIS IS A VERY CONSERVATIVE CALCULATION SINCE THE FLOOD ZONE AS SHOWN ON THE FEMA FLOOD MAP IS MUCH LARGER THAN 1.54 ACRES AND ASSOCIATED ALLIGATOR LAKE.

CERTIFICATION

I hereby certify that, to the best of my knowledge, construction of the project as described above will increase the flood elevations less than one foot at the project location.



4-23-09

Brett A. Crews, PE No. 65592

GERBMAN CORN CO. INC.
OF TN

M/H 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 09-4S-17-08301-015

Building permit No. 000027768

Permit Holder ROBERT PUCKETT

Owner of Building CHARLES REGAR

Location: 2352 SE COUNTRY CLUB RD, LAKE CITY, FL

Date: 05/13/2009

Fary Dickel

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



- District No. 1 - Ronald Williams
- District No. 2 - Dewey Weaver
- District No. 3 - Jody DuPree
- District No. 4 - Stephen E. Bailey
- District No. 5 - Scarlet P. Frisina



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This completed form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

- The attached elevation certificate requires corrections by the surveyor of section(s) _____ prior to acceptance by the community.
- The attached elevation certificated is complete and correct.
- Minor corrections have been made in the below marked sections by the authorized Community Official.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Company NAIC Number
City	State	ZIP Code
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)		
A5. Latitude/Longitude: Lat. _____ Long. _____		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number _____		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP Community Name & Community Number		B2. County Name		B3. State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input type="checkbox"/> No					

COMMENTS: _____

Date of Review: 13 May 2007 BOARD MEETS FIRST THURSDAY AT 7:00 P.M.
 AND THROUGH _____ P.M. [Signature]
 Community Official

27768

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Charles Regar		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2352 SE Country Club Road		Policy Number
City Lake City State FL ZIP Code 32025		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Parcel # 08301-015		

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential

A5. Latitude/Longitude: Lat. 30 09'17.8" Long. 82 36'37.0" Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 5

A8. For a building with a crawlspace or enclosure(s):

a) Square footage of crawlspace or enclosure(s)	<u>N/A</u>	sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>N/A</u>	
c) Total net area of flood openings in A8.b	<u>N/A</u>	sq in
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

A9. For a building with an attached garage:

a) Square footage of attached garage	<u>N/A</u>	sq ft
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	<u>N/A</u>	
c) Total net area of flood openings in A9.b	<u>N/A</u>	sq in
d) Engineered flood openings?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Columbia County 120070		B2. County Name Columbia		B3. State FL	
B4. Map/Panel Number 12023C0313	B5. Suffix C	B6. FIRM Index Date 02/04/09	B7. FIRM Panel Effective/Revised Date 02/04/09	B8. Flood Zone(s) AH	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 103.5

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.
 FIS Profile FIRM Community Determined Other (Describe) _____

B11. Indicate elevation datum used for BFE in Item 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 _____ CBRS OPA

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. 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 C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.
Benchmark Utilized TBM 090043 Vertical Datum NAVD 1988
Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>106.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	<u>106.7</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>102.3</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>103.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	<u>N/A</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

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 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.

Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? Yes No

Certifier's Name Scott Daniel, PSM	License Number LS 6449
Title Professional Surveyor & Mapper	Company Name Daniel & Gore, LLC
Address PO Box 1501	City Lake City State FL ZIP Code 32056
Signature <i>Scott Daniel</i>	Date <u>5-13-09</u> Telephone 386-208-4176



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. 2352 SE Country Club Road	Policy Number
City Lake City State FL ZIP Code 32025	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 Machinery is an A/C unit on a platform at the South end of residence.


Signature

5-13-09
Date

Check here if attachments

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

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
 a) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the HAG.
 b) Top of bottom floor (including basement, crawlspace, or enclosure) is _____ feet meters above or below the LAG.
- E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ feet meters above or below the HAG.
- E3. Attached garage (top of slab) is _____ feet meters above or below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ feet meters above or below the HAG.
- E5. 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, 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, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name

Scott Daniel, PSM

Address PO Box 1501

City Lake City

State FL

ZIP Code 32056

Signature



Date

5-13-09

Telephone 386-208-4176

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. Check the measurement used in Items G8 and G9.

- G1. The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by 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
-------------------	------------------------	-----------------------------------------------------

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ feet meters (PR) Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ feet meters (PR) Datum _____

G10. Community's design flood elevation _____ feet meters (PR) Datum _____

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments

Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2352 SE Country Club Road	For Insurance Company Use: Policy Number
City Lake City State FL ZIP Code 32025	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.



Front View

Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 2352 SE Country Club Road	For Insurance Company Use: Policy Number
City Lake City State FL ZIP Code 32025	Company NAIC Number
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."	



Rear View

DIAGRAM 3

All split-level buildings that are slab-on-grade, either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature – The bottom floor (excluding garage) is at or above ground level (grade) on at least one side.*

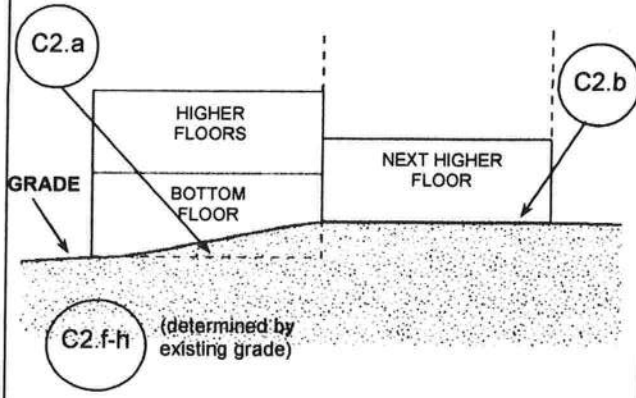


DIAGRAM 4

All split-level buildings (other than slab-on-grade), either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature – The bottom floor (basement or underground garage) is below ground level (grade) on all sides.*

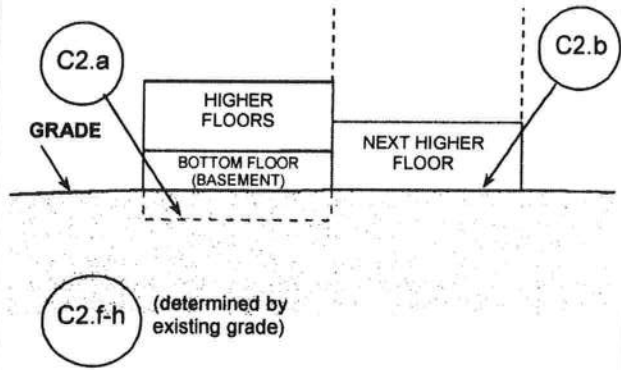


DIAGRAM 5

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 insect screening is permissible).

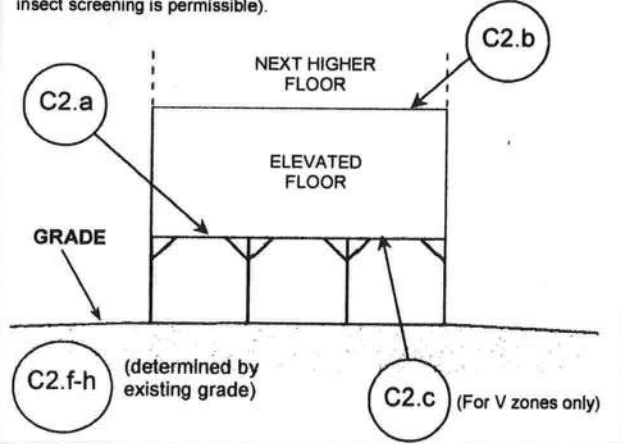
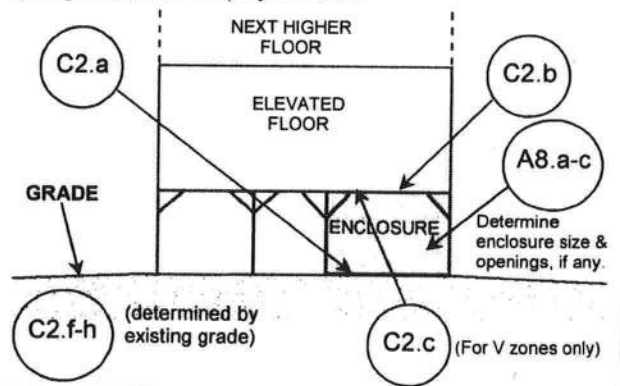


DIAGRAM 6

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 enclosure size and openings in Section A – Property Information.



* A floor that is below ground level (grade) on all sides is considered a basement even if the floor is used for living purposes, or as an office, garage, workshop, etc.

** An "opening" is a permanent opening 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 crawlspaces. The openings shall provide a total net area of not less than one square inch for every square foot of area enclosed, excluding any bars, louvers, or other covers of the opening. Alternatively, an Individual Engineered Flood Openings Certification or an Evaluation Report issued by the International Code Council Evaluation Service (ICC ES) must be submitted to document that the design of the openings 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; openings may be installed in doors. Openings shall be on at least two sides of the enclosed area. If a building has more than one enclosed area, each area must have openings to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the higher of the exterior or interior grade or floor immediately below the opening. For more guidance on openings, see NFIP Technical Bulletin 1.