

DATE 04/27/2005

Columbia County Building Permit

PERMIT

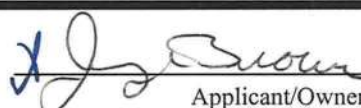
This Permit Expires One Year From the Date of Issue

000023075

APPLICANT JERRY BROWN PHONE 352 472-2477
 ADDRESS 25704 SW 19TH AVE NEWBERRY FL 32669
 OWNER TERRY BROWN PHONE 352 472-5506
 ADDRESS 526 SW PHILLIPS CIRCLE LAKE CITY FL 32024
 CONTRACTOR CHAD MUNN PHONE 352 745-6028
 LOCATION OF PROPERTY 90W, TL ON 252B, TR INTO TURKEY RUN, TL ON SW PHILLIPS CR,
6TH LOT ON RIGHT ON THE CURVE

TYPE DEVELOPMENT SFD,UTILITY ESTIMATED COST OF CONSTRUCTION 83650.00
 HEATED FLOOR AREA 1673.00 TOTAL AREA 2458.00 HEIGHT .00 STORIES 1
 FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB
 LAND USE & ZONING RSF-2 MAX. HEIGHT 21
 Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
 NO. EX.D.U. 0 FLOOD ZONE X PP DEVELOPMENT PERMIT NO. _____

PARCEL ID 03-4S-16-02739-242 SUBDIVISION TURKEY RUN
 LOT 42 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES .50

000000628 N CRC057565 
 Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
 CULVERT PERMIT 05-0187-N BK Y
 Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: CULVERTS MUST BE A MINIMUM OF 20 FT APART, 5FT FROM PROPERTY LINES,
ONE FOOT ABOVE THE ROAD

Check # or Cash 3528

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 _____ Rough-in plumbing above slab and below wood floor _____
 date/app. by _____ date/app. by _____
 Electrical rough-in _____ Heat & Air Duct _____ Peri. beam (Lintel) _____
 date/app. by _____ date/app. by _____ date/app. by _____
 Permanent power _____ C.O. Final _____ Culvert _____
 date/app. by _____ date/app. by _____ date/app. by _____
 M/H tie downs, blocking, electricity and plumbing _____ Pool _____
 date/app. by _____ date/app. by _____
 Reconnection _____ Pump pole _____ Utility Pole _____
 date/app. by _____ date/app. by _____ date/app. by _____
 M/H Pole _____ Travel Trailer _____ Re-roof _____
 date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$ 420.00 CERTIFICATION FEE \$ 12.29 SURCHARGE FEE \$ 12.29
 MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ _____ WASTE FEE \$ _____
 FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ 25.00 **TOTAL FEE** 519.58

INSPECTORS OFFICE  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."

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 INCONVIENCE, 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.

For Office Use Only Application # 0502-59 Date Received 2-22-05 By LN Permit # 628/629 23075
 Application Approved by - Zoning Official BLK Date 09.03.05 Plans Examiner OK JTH Date 4-27-05
 Flood Zone Xempt Development Permit N/A Zoning RSF-2 Land Use Plan Map Category RES. Low Dev
 Comments Culverts must a minimum of 20ft apart and 5' from side property lines
 NEED: NOC & Letter of Authorization

Applicants Name Jerry Brown Phone 352-472-2497 538-1492
 Address 25704 SW 19th Ave Newberry FL 32669
 Owners Name Terry Scott Brown Phone 352-472-5506
 911 Address 526 SW Phillips Cir 32624
 Contractors Name CHAD MURN Phone 352-745-6028
 Address 14520 Main St Alachua FL 32615
 Fee Simple Owner Name & Address _____
 Bonding Co. Name & Address _____
 Architect/Engineer Name & Address _____
 Mortgage Lenders Name & Address _____
 Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive Energy
 Property ID Number 03-46-16-02739-242 Estimated Cost of Construction 130,000.00
 Subdivision Name Turkey Run Lot 42 Block _____ Unit _____ Phase _____
 Driving Directions 90 W to SW CR 252 B turn left go 1/2 mi to Turkey Run turn Right on SW Phillips CR to Lot 42 6th lot on right
 Type of Construction Residential New SFD Number of Existing Dwellings on Property 0
 Total Acreage 0.510 Lot Size _____ Do you need a Culvert Permit or Culvert Waiver or Have an Existing Drive
 Actual Distance of Structure from Property Lines - Front 30' Side 20' Side 15' Rear 45'
 Total Building Height 21' Number of Stories 1 Heated Floor Area 1673 Roof Pitch 6-12

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.

OWNERS AFFIDAVIT: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning.

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

Jerry Brown
 Owner Builder or Agent (Including Contractor)

Chad Murn
 Contractor Signature
 Contractors License Number CRL 057565
 Competency Card Number _____

STATE OF FLORIDA
 COUNTY OF COLUMBIA



Sworn to (or affirmed) and subscribed before me
 this 18th day of Feb

Chad Murn
 Notary Signature

Personally known or Produced Identification _____



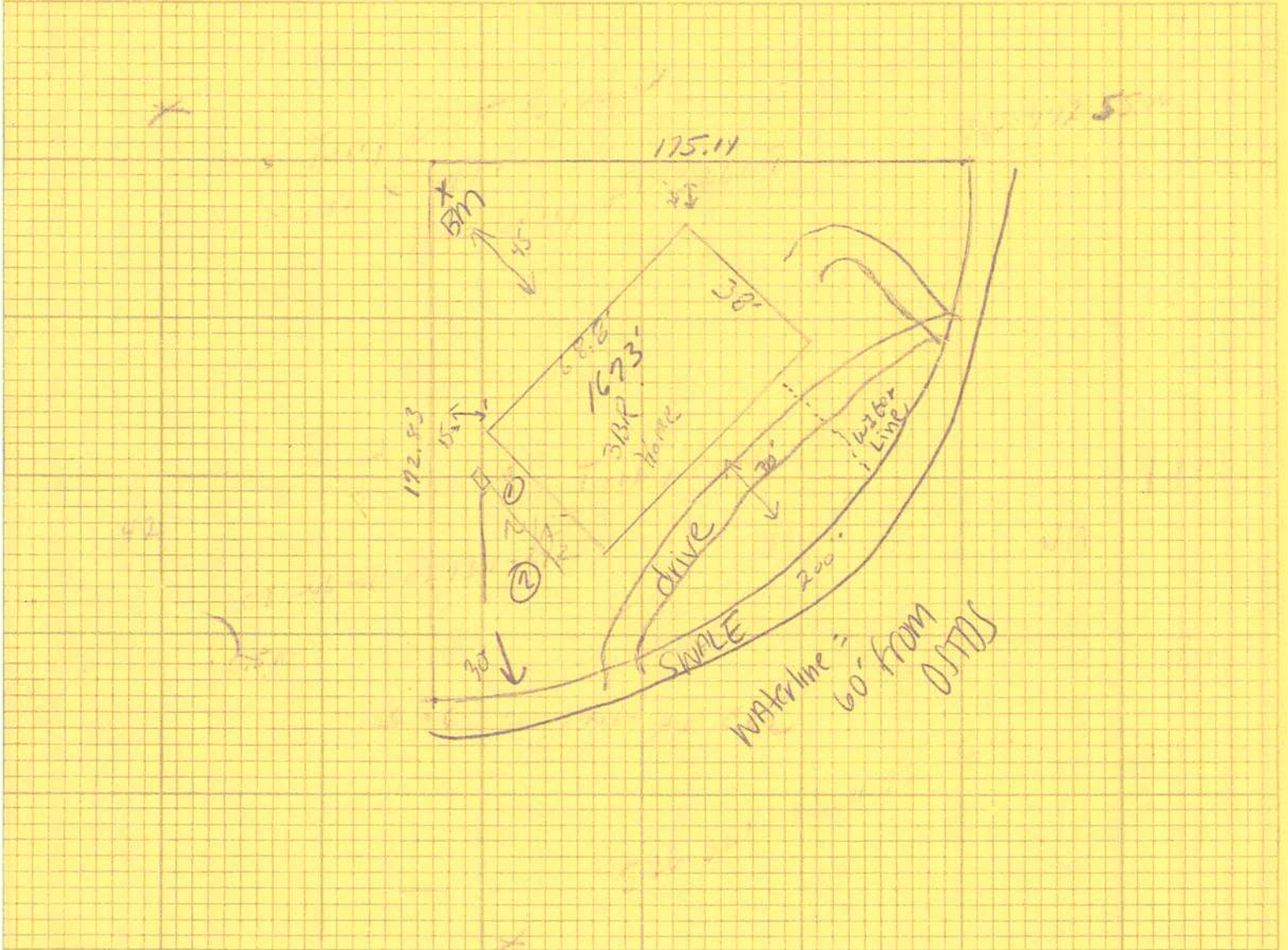
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 05-0187N

PART II - SITE PLAN

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



Notes: _____

Site Plan submitted by: J. Brown 2-22-05 _____
Signature Title
Plan Approved X Not Approved _____ Date 3-1-05
By Sallie Meddy - ESI - COLUMBIA County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

COLUMBIA COUNTY BUILDING DEPARTMENT

**RESIDENTIAL MINIMUM PLAN REQUIREMENTS AND CHECKLIST FOR
FLORIDA BUILDING CODE 2001
ONE (1) AND TWO (2) FAMILY DWELLINGS
ALL REQUIREMENTS ARE SUBJECT TO CHANGE
EFFECTIVE MARCH 1, 2002**

ALL BUILDING PLANS MUST INDICATE THE FOLLOWING ITEMS AND INDICATE COMPLIANCE WITH CHAPTER 1606 OF THE FLORIDA BUILDING CODE 2001 BY PROVIDING CALCULATIONS AND DETAILS THAT HAVE THE SEAL AND SIGNATURE OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE STATE OF FLORIDA, OR ALTERNATE METHODOLOGIES, APPROVED BY THE STATE OF FLORIDA BUILDING COMMISSION FOR ONE-AND-TWO FAMILY DWELLINGS. FOR DESIGN PURPOSES THE FOLLOWING BASIC WIND SPEED AS PER FIGURE 1606 SHALL BE USED.

WIND SPEED LINE SHALL BE DEFINED AS FOLLOWS: THE CENTERLINE OF INTERSTATE 75.

1. ALL BUILDINGS CONSTRUCTED EAST OF SAID LINE SHALL BE ----- 100 MPH
2. ALL BUILDINGS CONSTRUCTED WEST OF SAID LINE SHALL BE -----110 MPH
3. NO AREA IN COLUMBIA COUNTY IS IN A WIND BORNE DEBRIS REGION

APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL

GENERAL REQUIREMENTS: Two (2) complete sets of plans containing the following:

- | Applicant | Plans Examiner | |
|--------------------------|-------------------------------------|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | All drawings must be clear, concise and drawn to scale ("Optional " details that are not used shall be marked void or crossed off). Square footage of different areas shall be shown on plans. |
| <input type="checkbox"/> | <input type="checkbox"/> | Designers name and signature on document (FBC 104.2.1). If licensed <i>B'loc Design</i> architect or engineer, official seal shall be affixed. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Site Plan including:
<input checked="" type="checkbox"/> a) Dimensions of lot <i>see EH APPLICATION</i>
<input checked="" type="checkbox"/> b) Dimensions of building set backs
<input checked="" type="checkbox"/> c) Location of all other buildings on lot, well and septic tank if applicable, and all utility easements.
<input checked="" type="checkbox"/> d) Provide a full legal description of property. |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Wind-load Engineering Summary, calculations and any details required
a) Plans or specifications must state compliance with FBC Section 1606 <i>CERTIFICATION by</i>
b) The following information must be shown as per section 1606.1.7 FBC <i>MARK ESK Ridge</i>
<i>See PAGE 1 OF ASCE</i>
<input checked="" type="checkbox"/> a. Basic wind speed (MPH) <i>110</i>
<input checked="" type="checkbox"/> b. Wind importance factor (I) and building category <i>1</i>
<input checked="" type="checkbox"/> c. Wind exposure - if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated <i>B</i>
<input checked="" type="checkbox"/> d. The applicable internal pressure coefficient
<input checked="" type="checkbox"/> e. Components and Cladding. The design wind pressure in terms of psf (kN/m ²), to be used for the design of exterior component and cladding materials not specifically designed by the registered design professional |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | Elevations including: |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | a) All sides |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | b) Roof pitch <i>6/12</i> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | c) Overhang dimensions and detail with attic ventilation |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | d) Location, size and height above roof of chimneys |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | e) Location and size of skylights |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | f) Building height <i>21' + FOUNDATION</i> |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | e) Number of stories <i>1</i> |

Floor Plan including:

- a) Rooms labeled and dimensioned
- b) Shear walls *See ATTACHED PACKAGE*
- c) Windows and doors (including garage doors) showing size, mfg., approval listing and attachment specs. (FBC 1707) and safety glazing where needed (egress windows in bedrooms to be shown)
- d) Fireplaces (gas appliance) (vented or non-vented) or wood burning with hearth
- e) Stairs with dimensions (width, tread and riser) and details of guardrails and handrails
- f) Must show and identify accessibility requirements (accessible bathroom) *BOTH BATH ROOM*

Foundation Plan including:

- a) Location of all load-bearing wall with required footings indicated as standard Or monolithic and dimensions and reinforcing
- b) All posts and/or column footing including size and reinforcing
- c) Any special support required by soil analysis such as piling *See Sheet 1 Soil Bearing VALVE requires 2000 PSF CALL CONTRACTOR FOR VERIFICATION*
- d) Location of any vertical steel

Roof System:

- a) Truss package including: *MITEK*
 - 1. Truss layout and truss details signed and sealed by FI. Pro. Eng. *Zhang Guo-jie*
 - 2. Roof assembly (FBC 104.2.1 Roofing system, materials, manufacturer, fastening requirements and product evaluation with wind resistance rating)
- b) Conventional Framing Layout including:
 - 1. Rafter size, species and spacing
 - 2. Attachment to wall and uplift
 - 3. Ridge beam sized and valley framing and support details
 - 4. Roof assembly (FBC 104.2.1 Roofing systems, materials, manufacturer, fastening requirements and product evaluation with wind resistance rating)

Wall Sections including:

- a) Masonry wall
 - 1. All materials making up wall
 - 2. Block size and mortar type with size and spacing of reinforcement
 - 3. Lintel, tie-beam sizes and reinforcement
 - 4. Gable ends with rake beams showing reinforcement or gable truss and wall bracing details
 - 5. All required connectors with uplift rating and required number and size of fasteners for continuous tie from roof to foundation
 - 6. Roof assembly shown here or on roof system detail (FBC 104.2.1 Roofing system, materials, manufacturer, fastening requirements and product evaluation with resistance rating)
 - 7. Fire resistant construction (if required)
 - 8. Fireproofing requirements
 - 9. Shoe type of termite treatment (termicide or alternative method)
 - 10. Slab on grade
 - a. Vapor retardant (6mil. Polyethylene with joints lapped 6 inches and sealed)
 - b. Must show control joints, synthetic fiber reinforcement or Welded fire fabric reinforcement and supports
 - 11. Indicate where pressure treated wood will be placed
 - 12. Provide insulation R value for the following:
 - a. Attic space
 - b. Exterior wall cavity
 - c. Crawl space (if applicable)

b) Wood frame wall

1. All materials making up wall
2. Size and species of studs *2x4 ON 16" OC*
3. Sheathing size, type and nailing schedule *1/2"*
4. Headers sized *see wind Design*
5. Gable end showing balloon framing detail or gable truss and wall hinge bracing detail *see wind Design*
6. All required fasteners for continuous tie from roof to foundation (truss anchors, straps, anchor bolts and washers) *see wind Design*
7. Roof assembly shown here or on roof system detail (FBC104.2.1 Roofing system, materials, manufacturer, fastening requirements and product evaluation with wind resistance rating) *see wind Design*
- ~~8. Fire resistant construction (if applicable)~~
9. Fireproofing requirements
10. Show type of termite treatment (termicide or alternative method) *see sheet 1*
11. Slab on grade
 - a. Vapor retardant (6Mil. Polyethylene with joints lapped 6 inches and sealed)
 - b. Must show control joints, synthetic fiber reinforcement or welded wire fabric reinforcement and supports
12. Indicate where pressure treated wood will be placed
13. Provide insulation R value for the following:
 - a. Attic space *R-40*
 - b. Exterior wall cavity *R-13*
 - ~~c. Crawl space (if applicable)~~

c) Metal frame wall and roof (designed, signed and sealed by Florida Prof. Engineer or Architect)

Floor Framing System:

- a) Floor truss package including layout and details, signed and sealed by Florida Registered Professional Engineer
- b) Floor joist size and spacing
- c) Girder size and spacing
- d) Attachment of joist to girder
- e) Wind load requirements where applicable

Plumbing Fixture layout

Electrical layout including:

- a) Switches, outlets/receptacles, lighting and all required GFCI outlets identified
- b) Ceiling fans *4*
- c) Smoke detectors *5*
- d) Service panel and sub-panel size and location(s) *IN GARAGE WALL*
- e) Meter location with type of service entrance (overhead or underground)
- f) Appliances and HVAC equipment *UTILITY ROOM GARAGE*
- g) Arc Fault Circuits (AFCI) in bedrooms *SEE SHEET 6 ELECTRICAL PLAN NOTES*

HVAC information

a) Manual J sizing equipment or equivalent computation

b) Exhaust fans in bathroom *NONE SHOWN*

Energy Calculations (dimensions shall match plans)

Gas System Type (LP or Natural) Location and BTU demand of equipment

Disclosure Statement for Owner Builders

*****Notice Of Commencement Required Before Any Inspections Will Be Done**

Private Potable Water

- a) Size of pump motor
- b) Size of pressure tank
- c) Cycle stop valve if used

NONE
 NONE

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

1. **Building Permit Application:** A current Building Permit Application form is to be completed and submitted for all residential projects.
2. **Parcel Number:** The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested.
3. **Environmental Health Permit or Sewer Tap Approval:** A copy of the Environmental Health permit, existing septic approval or sewer tap approval is required before a building permit can be issued.
(386) 758-1058 (**Toilet facilities shall be provided for construction workers**)
4. **City Approval:** If the project is to be located within the city limits of the Town of Fort White, prior approval is required. The Town of Fort White approval letter is required to be submitted by the owner or contractor to this office when applying for a Building Permit. (386) 497-2321
5. **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 application to this office. Any project located within a flood zone where the base flood elevation (100 year 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 has not been established (Zone A) 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. Development permit cost is **\$50.00**
6. **Driveway Connection:** If the property does not have an existing access to a public road, then an application for a culvert permit (**\$25.00**) must be made. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (**\$50.00**). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.
7. **911 Address:** If the project is located in an area where the 911 address has been issued, then the proper paperwork from the 911 Addressing Department must be submitted. (386) 752-8787

ALL REQUIRED INFORMATION IS TO BE SUBMITTED FOR REVIEW. YOU WILL BE NOTIFIED WHEN YOUR APPLICATION AND PLANS ARE APPROVED AND READY TO PERMIT. PLEASE DO NOT EXPECT OR REQUEST THAT PERMIT APPLICATIONS BE REVIEWED OR APPROVED WHILE YOU ARE HERE – TIME WILL NOT ALLOW THIS –PLEASE DO NOT ASK

NOTICE:

ADDRESSES BY APPOINTMENT ONLY!

TO OBTAIN A 9-1-1 ADDRESS THE REQUESTER MUST CONTACT THE COLUMBIA COUNTY 9-1-1 ADDRESSING DEPARTMENT AT (386) 752-8787 FOR AN APPOINTMENT TIME AND DATE:

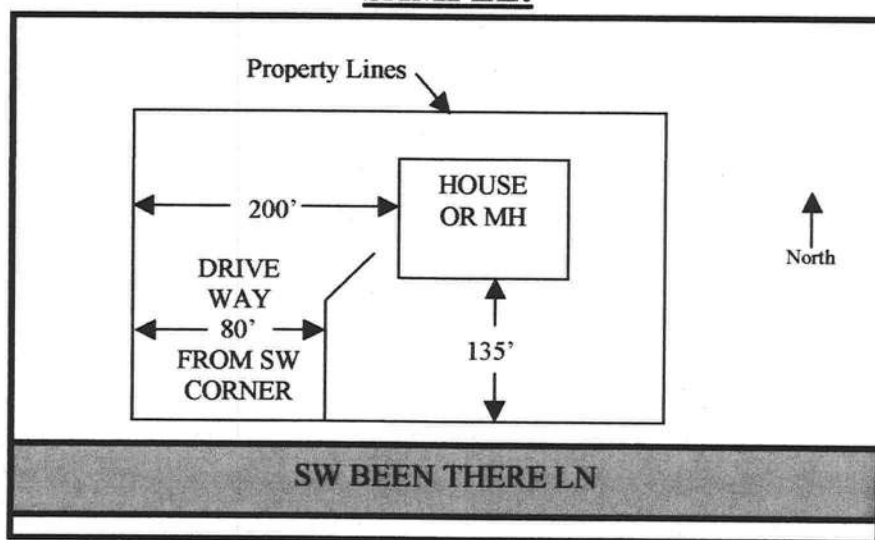
YOU CAN NOT OBTAIN A NEW ADDRESS OVER THE TELEPHONE. MUST MAKE AN APPOINTMENT!

THE ADDRESSING DEPARTMENT IS LOCATED AT 263 NW LAKE CITY AVENUE (OFF OF WEST U.S. HIGHWAY 90 WEST OF INTERSTATE 75 AT THE COLUMBIA COUNTY EMERGENCY OPERATIONS CENTER).

THE REQUESTER WILL NEED THE FOLLOWING:

1. THE PARCEL OR TAX ID NUMBER (SAMPLE: "25-4S-17-12345-123" OR "R12345-123) FOR THE PROPERTY.
2. A PLAT, PLAN, SITE PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
 - a. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
 - b. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
 - c. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



NOTE: 5 TO 7 WORKING DAYS MAY BE REQUIRED IF ADDRESSING DEPARTMENT NEEDS TO CONDUCT AN ON SITE SURVEY.



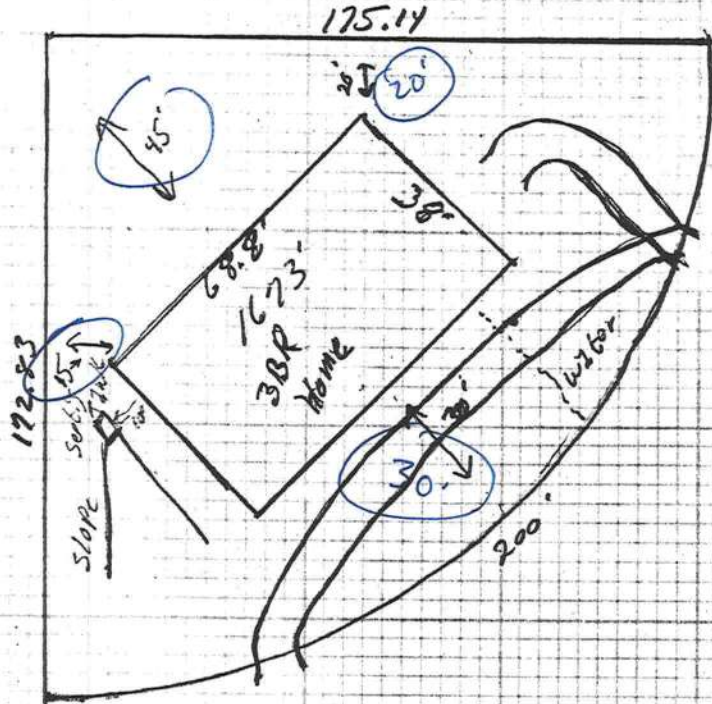
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

PART II - SITE PLAN

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



Notes: _____

Site Plan submitted by: J. Buena 2-22-05 _____
 Signature Title
 Plan Approved _____ Not Approved _____ Date _____
 By _____ County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

Inst:2004029121 Date:12/30/2004 Time:15:44
 Doc Stamp-Deed : 157.50

THIS INSTRUMENT WAS PREPARED BY:

B DC, P. DeWitt Cason, Columbia County B:1036 P:1575

TERRY McDAVID 04-857
 POST OFFICE BOX 1328
 LAKE CITY, FL 32056-1328

RETURN TO:

TERRY McDAVID
 POST OFFICE BOX 1328
 LAKE CITY, FL 32056-1328

Property Appraiser's
 Identification Number R02739-242

WARRANTY DEED

This Warranty Deed, made this 30th day of December, 2004, BETWEEN JERRY T. WOOD and JULIAN McCRANIE, whose post office address is Post Office Box 2817, Lake City, FL 32056, of the County of Columbia, State of Florida, grantor*, and TERRY SCOTT BROWN, whose post office address is P.O. Box 1947, Newberry, FL 32669, of the State of Florida, grantee*.

(Whenever 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 corporations, trusts and trustees)

Witnesseth: that said grantor, for and in consideration of the sum of Ten Dollars (\$10.00), and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Columbia County, Florida, to-wit:

Lot 42, TURKEY RUN, a subdivision according to the plat thereof as recorded in Plat Book 7, Pages 116-117 of the public records of Columbia County, Florida.

N.B.: Neither Grantor nor any member of their families live on or reside on the property described herein or any adjacent land thereto or claim any part hereof or any adjacent land thereto as their homestead.

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

To Have and to Hold, the same in fee simple forever.

And subject to taxes for the current year and later years and all valid easements and restrictions of record, if any, which are not hereby reimposed; and also subject to any claim, right, title or interest arising from any recorded instrument reserving, conveying, leasing, or otherwise alienating any interest in the oil, gas and other minerals. And grantor does warrant the title to said land and will defend the same against the lawful claims of all persons whomsoever, subject only to the exceptions set forth herein.

In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Inst:2004029121 Date:12/30/2004 Time:15:44
Doc Stamp-Deed : 157.50
DC, P. DeWitt Cason, Columbia County B: 1034 P: 1576

Signed, sealed and delivered
in our presence:

[Signature]
(Signature of First Witness)
Terry McDavid
(Typed Name of First Witness)

[Signature]
(Signature of Second Witness)
Crystal L. Brunner
(Typed Name of Second Witness)

[Signature] (SEAL)
Grantor
JERRY T. WOOD
Printed Name

[Signature] (SEAL)
Grantor
JULIAN McCRANIE
Printed Name

STATE OF Florida
COUNTY OF Columbia

The foregoing instrument was acknowledged before me this 30th
day of December, 2004, by JERRY T. WOOD and JULIAN McCRANIE, who
are personally known to me and who did not take an oath.

My Commission Expires:

[Signature]
Notary Public
Printed, typed, or stamped name:



FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name: brown 2 Address: City, State: , Owner: Climate Zone: North	Builder: Terry brown Permitting Office: Permit Number: 23075 Jurisdiction Number: 221008
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">1. New construction or existing</td> <td style="width: 10%; text-align: center;">New</td> <td style="width: 10%; text-align: center;">___</td> <td style="width: 5%;"></td> </tr> <tr> <td>2. Single family or multi-family</td> <td style="text-align: center;">Single family</td> <td style="text-align: center;">___</td> <td></td> </tr> <tr> <td>3. Number of units, if multi-family</td> <td style="text-align: center;">1</td> <td style="text-align: center;">___</td> <td></td> </tr> <tr> <td>4. Number of Bedrooms</td> <td style="text-align: center;">2</td> <td style="text-align: center;">___</td> <td></td> </tr> <tr> <td>5. Is this a worst case?</td> <td style="text-align: center;">Yes</td> <td style="text-align: center;">___</td> <td></td> </tr> <tr> <td>6. Conditioned floor area (ft²)</td> <td style="text-align: center;">1673 ft²</td> <td style="text-align: center;">___</td> <td></td> </tr> <tr> <td>7. Glass area & type</td> <td style="text-align: center;">Single Pane</td> <td style="text-align: center;">Double Pane</td> <td style="text-align: center;">___</td> </tr> <tr> <td> a. Clear glass, default U-factor</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;">127.0 ft²</td> <td style="text-align: center;">___</td> </tr> <tr> <td> b. Default tint</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;">___</td> </tr> <tr> <td> c. Labeled U or SHGC</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;">___</td> </tr> <tr> <td>8. Floor types</td> <td></td> <td></td> <td style="text-align: center;">___</td> </tr> <tr> <td> a. Slab-On-Grade Edge Insulation</td> <td style="text-align: center;">R=0.0, 174.0(p) ft</td> <td></td> <td style="text-align: center;">___</td> </tr> <tr> <td> b. 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Glass/Floor Area: 0.08	Total as-built points: 21514 Total base points: 22846	PASS
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I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY: SUNCOAST INSULATORS


DATE: 1-22-05

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: _____

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BSPM = Points Floor Area				Type/SC	Overhang Ormt Len Hgt			Area X SPM X SOF = Points			
.18	1673.0	20.04	6034.8	Double, Clear	W	2.0	6.0	62.0	38.52	0.85	2028.8
				Double, Clear	N	2.0	6.0	5.0	19.20	0.90	86.4
				Double, Clear	E	2.0	6.0	60.0	42.06	0.85	2140.3
As-Built Total:								127.0	4255.4		
WALL TYPES Area X BSPM = Points				Type	R-Value		Area X SPM = Points				
Adjacent	206.0	0.70	144.2	Frame, Wood, Adjacent	13.0		206.0	0.60 123.6			
Exterior	1000.0	1.70	1700.0	Frame, Wood, Exterior	13.0		1000.0	1.50 1500.0			
Base Total:				1206.0		1844.2		As-Built Total:		1206.0 1623.6	
DOOR TYPES Area X BSPM = Points				Type	Area X SPM = Points						
Adjacent	18.0	2.40	43.2	Exterior Insulated	36.0 4.10 147.6						
Exterior	36.0	6.10	219.6	Adjacent Insulated	18.0 1.60 28.8						
Base Total:				54.0		262.8		As-Built Total:		54.0 176.4	
CEILING TYPES Area X BSPM = Points				Type	R-Value		Area X SPM X SCM = Points				
Under Attic	1673.0	1.73	2894.3	Under Attic	30.0		1673.0	1.73 X 1.00 2894.3			
				Under Attic	30.0		122.0	1.73 X 1.00 211.1			
Base Total:				1673.0		2894.3		As-Built Total:		1795.0 3105.4	
FLOOR TYPES Area X BSPM = Points				Type	R-Value		Area X SPM = Points				
Slab	174.0(p)	-37.0	-6438.0	Slab-On-Grade Edge Insulation	0.0		174.0(p)	-41.20 -7168.8			
Raised	0.0	0.00	0.0								
Base Total:				-6438.0		As-Built Total:		174.0		-7168.8	
INFILTRATION Area X BSPM = Points				Area X SPM = Points							
1673.0 10.21 17081.3				1673.0 10.21 17081.3							
Summer Base Points: 21679.5				Summer As-Built Points: 19073.3							
Total Summer Points	X System Multiplier	=	Cooling Points	Total Component	X Cap Ratio	X Duct Multiplier	X System Multiplier	X Credit Multiplier	=	Cooling Points	
				(DM x DSM x AHU)							
21679.5	0.4266		9248.5	19073.3	1.00	(1.090 x 1.147 x 1.00)	0.341	1.000		8138.7	
						1.250	0.341	1.000		8138.7	

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
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BASE				AS-BUILT										
WATER HEATING				Tank	EF	Number of	X	Tank	X	Multiplier	X	Credit	=	Total
Number of	X	Multiplier	=	Volume		Bedrooms		Ratio				Multiplier		
Bedrooms														
2		2746.00	=	50.0	0.90	2		1.00		2684.98		1.00		5370.0
													As-Built Total:	5370.0

CODE COMPLIANCE STATUS													
BASE					AS-BUILT								
Cooling	+	Heating	+	Hot Water	=	Total	Cooling	+	Heating	+	Hot Water	=	Total
Points		Points		Points		Points	Points		Points		Points		Points
9248		8105		5492		22846	8139		8005		5370		21514

PASS



Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	606.1.ABC.1.1	Maximum: .3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area.	
Exterior & Adjacent Walls	606.1.ABC.1.2.1	Caulk, gasket, weatherstrip or seal between: windows/doors & frames, surrounding wall; foundation & wall sole or sill plate; joints between exterior wall panels at corners; utility penetrations; between wall panels & top/bottom plates; between walls and floor. EXCEPTION: Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate.	
Floors	606.1.ABC.1.2.2	Penetrations/openings >1/8" sealed unless backed by truss or joint members. EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams.	
Ceilings	606.1.ABC.1.2.3	Between walls & ceilings; penetrations of ceiling plane of top floor; around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams.	
Recessed Lighting Fixtures	606.1.ABC.1.2.4	Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC rated with < 2.0 cfm from conditioned space, tested.	
Multi-story Houses	606.1.ABC.1.2.5	Air barrier on perimeter of floor cavity between floors.	
Additional Infiltration reqts	606.1.ABC.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air.	

6A-22 OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	612.1	Comply with efficiency requirements in Table 6-12. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	612.1	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%.	
Shower heads	612.1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	610.1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated, and installed in accordance with the criteria of Section 610. Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	607.1	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	604.1, 602.1	Ceilings-Min. R-19. Common walls-Frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 83.8

The higher the score, the more efficient the home.

<p>1. New construction or existing New <input type="checkbox"/></p> <p>2. Single family or multi-family Single family <input type="checkbox"/></p> <p>3. Number of units, if multi-family 1 <input type="checkbox"/></p> <p>4. Number of Bedrooms 2 <input type="checkbox"/></p> <p>5. Is this a worst case? Yes <input type="checkbox"/></p> <p>6. Conditioned floor area (ft²) 1673 ft² <input type="checkbox"/></p> <p>7. Glass area & type</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"></td> <td style="width: 15%; text-align: center;">Single Pane</td> <td style="width: 15%; text-align: center;">Double Pane</td> <td style="width: 10%;"></td> <td style="width: 30%;"></td> </tr> <tr> <td>a. Clear - single pane</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;">127.0 ft²</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>b. Clear - double pane</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>c. Tint/other SHGC - single pane</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> <tr> <td>d. Tint/other SHGC - double pane</td> <td></td> <td></td> <td style="text-align: center;"><input type="checkbox"/></td> <td></td> </tr> </table> <p>8. Floor types</p> <p>a. Slab-On-Grade Edge Insulation R=0.0, 174.0(p) ft <input type="checkbox"/></p> <p>b. N/A <input type="checkbox"/></p> <p>c. N/A <input type="checkbox"/></p> <p>9. Wall types</p> <p>a. Frame, Wood, Adjacent R=13.0, 206.0 ft² <input type="checkbox"/></p> <p>b. Frame, Wood, Exterior R=13.0, 1000.0 ft² <input type="checkbox"/></p> <p>c. N/A <input type="checkbox"/></p> <p>d. N/A <input type="checkbox"/></p> <p>e. N/A <input type="checkbox"/></p> <p>10. Ceiling types</p> <p>a. Under Attic R=30.0, 1673.0 ft² <input type="checkbox"/></p> <p>b. Under Attic R=30.0, 122.0 ft² <input type="checkbox"/></p> <p>c. N/A <input type="checkbox"/></p> <p>11. Ducts</p> <p>a. Sup: Unc. Ret: Unc. AH: Garage Sup. R=6.0, 124.0 ft <input type="checkbox"/></p> <p>b. N/A <input type="checkbox"/></p>		Single Pane	Double Pane			a. Clear - single pane	0.0 ft ²	127.0 ft ²	<input type="checkbox"/>		b. Clear - double pane	0.0 ft ²	0.0 ft ²	<input type="checkbox"/>		c. Tint/other SHGC - single pane	0.0 ft ²	0.0 ft ²	<input type="checkbox"/>		d. Tint/other SHGC - double pane			<input type="checkbox"/>		<p>12. Cooling systems</p> <p>a. Central Unit Cap: 36.0 kBtu/hr <input type="checkbox"/> SEER: 10.00 <input type="checkbox"/></p> <p>b. N/A <input type="checkbox"/></p> <p>c. N/A <input type="checkbox"/></p> <p>13. Heating systems</p> <p>a. Electric Heat Pump Cap: 35.0 kBtu/hr <input type="checkbox"/> HSPF: 7.00 <input type="checkbox"/></p> <p>b. N/A <input type="checkbox"/></p> <p>c. N/A <input type="checkbox"/></p> <p>14. Hot water systems</p> <p>a. Electric Resistance Cap: 50.0 gallons <input type="checkbox"/> EF: 0.90 <input type="checkbox"/></p> <p>b. N/A <input type="checkbox"/></p> <p>c. Conservation credits <input type="checkbox"/> (HR-Heat recovery, Solar DHP-Dedicated heat pump)</p> <p>15. HVAC credits <input type="checkbox"/> (CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, PT-Programmable Thermostat, MZ-C-Multizone cooling, MZ-H-Multizone heating)</p>
	Single Pane	Double Pane																								
a. Clear - single pane	0.0 ft ²	127.0 ft ²	<input type="checkbox"/>																							
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c. Tint/other SHGC - single pane	0.0 ft ²	0.0 ft ²	<input type="checkbox"/>																							
d. Tint/other SHGC - double pane			<input type="checkbox"/>																							

I certify that this home has complied with the Florida Energy Efficiency Code For Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features.

Builder Signature: _____ Date: _____

Address of New Home: _____ City/FL Zip: _____



**NOTE: The home's estimated energy performance score is only available through the FLA/RES computer program. This is not a Building Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStarTM designation), your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at 321/638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Efficiency Code For Building Construction, contact the Department of Community Affairs at 850/487-1824.*

EnergyGauge® (Version: FLRCSB v3.30)

Columbia County Building Department Culvert Permit

Culvert Permit No.
000000628

DATE 04/27/2005 PARCEL ID # 03-4S-16-02739-242
APPLICANT JERRY BROWN PHONE 352 472-2477
ADDRESS 25704 SW 19TH AVE NEWBERRY FL 32669
OWNER TERRY BROWN PHONE 352 472-5506
ADDRESS 526 SW PHILLIPS CIRCLE LAKE CITY FL 32024
CONTRACTOR CHAD MUNN PHONE 352 745-6028
LOCATION OF PROPERTY 90W, TL ON 252B, TURN INTO TURKEY RUN, TL ON SW PHILLIPS CIRCLE
6TH LOT ON RIGHT ON CORNER

SUBDIVISION/LOT/BLOCK/PHASE/UNIT TURKEY RUN 42

SIGNATURE *Jerry Brown*

INSTALLATION REQUIREMENTS

Culvert size will be 18 inches in diameter with a total length of 32 feet, leaving 24 feet of driving surface. Both ends will be mitered 4 foot with a 4 : 1 slope and poured with a 4 inch thick reinforced concrete slab.

INSTALLATION NOTE: Turnouts will be required as follows:

- a) a majority of the current and existing driveway turnouts are paved, or;
- b) the driveway to be served will be paved or formed with concrete.

Turnouts shall be concrete or paved a minimum of 12 feet wide or the width of the concrete or paved driveway, whichever is greater. The width shall conform to the current and existing paved or concreted turnouts.

Culvert installation shall conform to the approved site plan standards.

Department of Transportation Permit installation approved standards.

Other _____

ALL PROPER SAFETY REQUIREMENTS SHOULD BE FOLLOWED
DURING THE INSTALATION OF THE CULVERT.

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

Amount Paid 25.00



**Columbia County Building Department
Culvert Permit**

**Culvert Permit No.
000000629**

DATE 04/27/2005 PARCEL ID # 03-4S-16-02739-242

APPLICANT JERRY BROWN PHONE 352 472-2477

ADDRESS 25704 SW 19TH AVE NEWBERRY FL 32669

OWNER TERRY BROWN PHONE 352 472-5506

ADDRESS 526 SW PHILLIPS CIRCLE LAKE CITY FL 32024

CONTRACTOR CHAD MUNN PHONE 352 745-6028

LOCATION OF PROPERTY 90W, TL ON 252B, TR INTO TURKEY RUN, TL ON SW PHILLIPS CIRCLE,
6TH LOT ON RIGHT IN CURVE

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

Amount Paid 25.00



Deep South Construction
Of West Florida, Inc.
14520 S. Main Street, Suite 50
Alachua, Florida 32615
(352) 745-6028 Cellular
(386) 462-1683 Office
(386) 462-1751 Facsimile



Columbia County Building Dept
135 NE Hernando Ave
Suite B21
Lake City, FL 32055

LETTER OF AUTHORIZATION

To Whom It May Concern:

Please be informed that Jerry Brown has authorization to pick-up permits as follows:

Owner: Scott Brown
Turkey Run Lot 42
526 SW Phillips Circle

Owner: Joey Langford
Turkey Run Lot 43
484 SW Phillip Circle
03-45-16-02739-243

Thank you,

Chad Munn
Builder/Owner
License CRC057565

STATE OF FLORIDA
COUNTY OF ALACHUA

Subscribed and sworn to before me this 21 day of April 2005 by
CHAD D. MUNN who is personally known to me.

Notary Public State of Florida at Large



My commission expires:

C:\Documents and Settings\Compaq_Owner\My Documents\Letter of auth jerrybrown.doc

CHERRYBROOK CALVERTS OPEN

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 03-4S-16-02739-242

Building permit No. 000023075

Use Classification SFD, UTILITY

Fire: 71.00

Permit Holder CHAD MUNN

Waste: 147.00

Owner of Building JERRY BROWN

Total: 218.00

Location: 526 SW PHILLIPS CIRCLE(TURKEY RUN, LOT 42)

Date: 10/13/2005

Tony Dickel

Building Inspector



POST IN A CONSPICUOUS PLACE
(Business Places Only)

This instrument prepared by: BILL DEEN/CAPITAL CITY BANK
P.O. BOX 476
TRENTON, FL 32693

NOTICE OF COMMENCEMENT

TO WHOM IT MAY CONCERN;

The undersigned hereby informs you that improvements will be made to certain real property, and in accordance with Section 713.13, Florida Statutes, the following information is stated in this Notice.

1. DESCRIPTION OF PROPERTY: LOT 42, TURKEY RUN, A SUBDIVISION ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 7, PAGE 116-117 OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.
2. GENERAL DESCRIPTION OF IMPROVEMENTS: CONSTRUCT 1,673 SQ. FT. HOME
3. NAME AND ADDRESS OF OWNER: TERRY SCOTT BROWN
P.O. BOX 1447
NEWBERRY, FL 32669
4. OWNER'S INTEREST IN SITE OF IMPROVEMENTS: FEE SIMPLE

NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER)

4. NAME AND ADDRESS OF CONTRACTOR: DEEP SOUTH CONSTRUCTION/CHAD MUNN
14216 195TH ST.
ALACHUA, FL 32615

SURETY:

6. NAME AND ADDRESS OF LENDER MAKING A LOAN FOR CONSTRUCTION OF IMPROVEMENTS:
Capital City Bank, P.O. Box 476, Trenton, FL 32693
(NOTE: Lender is not the payout or disbursal agent of the Borrower-Owner or of the contractor. Disbursal of construction loan proceeds will be made by Lender directly to Borrower-Owner.)
7. Name and address of person within the State of Florida designated by Owner upon whom notices or other documents may be served.
8. In addition to himself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.06(2)(b), Florida Statutes. CAPITAL CITY BANK
P.O. BOX 476
TRENTON, FL 32693
9. The expiration date of this Notice of Commencement is one (1) year from the recording date hereof.

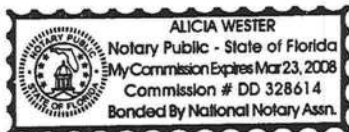

TERRY SCOTT BROWN

STATE OF FLORIDA
COUNTY OF GILCHRIST

The foregoing Notice of Commencement was acknowledged before me this 30TH day of DECEMBER, 2004, by TERRY SCOTT BROWN. The Acknowledger is either (X) personally known to me; or () produced N/A as identification. The Acknowledger did not take an oath.

My Commission Expires:


NOTARY PUBLIC, State of Florida





Cal-Tech Testing, Inc.

- Engineering
- Geotechnical
- Environmental

LABORATORIES

P.O. Box 1625 • Lake City, FL 32056-1625
6919 Distribution Avenue S., Unit #5 • Jacksonville, FL 32257

Tel. (386) 755-3633 • Fax (386) 752-5456
Tel. (904) 262-4046 • Fax (904) 262-4047

JOB NO.: 05-219
DATE TESTED: 05/17/05
DATE REPORTED: 05/23/05

REPORT OF IN-PLACE DENSITY TEST

PROJECT:	Lot # 42, Permit # 000023075, Turkey Run Subdivison, Lake City, FL
CLIENT:	Jerry Brown, 25704 SW 19th Ave., Newberry, FL 32669
GENERAL CONTRACTOR:	Jerry Brown
EARTHWORK CONTRACTOR:	Jerry Brown
INSPECTOR:	C. Allen

ASTM METHOD	SOIL USE
(D-2922) Nuclear	BUILDING FILL
SPECIFICATION REQUIREMENTS: 95%	

TEST NO.	TEST LOCATION	TEST DEPTH	WET DENSITY (lb/ft ³)	MOISTURE PERCENT	DRY DENSITY (lb/ft ³)	PROCTOR TEST NO.	PROCTOR VALUE	% MAXIMUM DENSITY
1	30' NE from SW Corner of Pad	0 - 12"	103.9	2.8	101.1	1	102.6	98.5%
2	15' SE from NW Corner of Pad	0 - 12"	103.7	2.8	100.9	1	102.6	98.3%
3	12' N x 10' E from Corner of Pad	0 - 12"	103.5	1.9	101.6	1	102.6	99.0%

REMARKS: The Above Tests Meet Specification Requirements.

PROCTORS				
PROCTOR NO.	SOIL DESCRIPTION	MAXIMUM DRY UNIT WEIGHT (lb/ft ³)	OPT. MOIST.	TYPE
1	Light Tan Sand	102.6	11.2	MODIFIED (ASTM D-1557)

Respectfully Submitted,
CAL-TECH TESTING, INC.

Reviewed By:

Linda M. Creamer

John D. ...

1cc: Client
1cc: File

Linda M. Creamer
President - CEO

Date: 5/24/05
Florida Registration No.: 52612

The test results presented in this report are specific only to the samples tested at the time of testing. The tests were performed in accordance with generally accepted methods and standards. Since material conditions can vary between test locations and change with time, sound judgement should be exercised with regard to the use and interpretation of the data.

"Excellence in Engineering & Geoscience"