

DATE 05/31/2011

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000029438

APPLICANT PAUL BARCIA PHONE 386-497-4770

ADDRESS 498 SW MANATEE TERR FORT WHITE FL 32038

OWNER PAUL BARCIA/MARYLAND LANE, LLC PHONE 386-497-4770

ADDRESS 384 SW RENO WAY FORT WHITE FL 32038

CONTRACTOR OWNER BUILDER PHONE _____

LOCATION OF PROPERTY 47 SOUTH, R WILSON SPRINGS RD, R NEWARK, L BRIDE LN,
R RENO WAY, THEN 4TH LOT ON LEFT

TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 106800.00

HEATED FLOOR AREA 1140.00 TOTAL AREA 2136.00 HEIGHT 20.00 STORIES 1

FOUNDATION PIERS WALLS FRAMED ROOF PITCH 5/12 FLOOR WOOD

LAND USE & ZONING ESA-2 MAX. HEIGHT 35

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

NO. EX.D.U. 0 FLOOD ZONE AE DEVELOPMENT PERMIT NO. 11-006

PARCEL ID 36-6S-15-00865-034 SUBDIVISION THREE RIVERS ESTATES

LOT 34 BLOCK _____ PHASE _____ UNIT 12 TOTAL ACRES 1.00

000001890

Culvert Permit No. Culvert Waiver Contractor's License Number TC Applicant/Owner/Contractor N

CULVERT 11-0240 BK TC N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: MINIMUM FLOOR ELEVATION 35', NEED ELEVATION CERTIFICATION FOR FINISHED
FLOOR HEIGHT BEFORE POWER

NOC ON FILE _____ Check # or Cash 1182

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 \$ 535.00 CERTIFICATION FEE \$ 10.68 SURCHARGE FEE \$ 10.68

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

FLOOD DEVELOPMENT FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ 25.00 **TOTAL FEE** 706.36

INSPECTORS OFFICE L.H. CLERKS OFFICE OKH.

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.

Columbia County Building Permit Application

For Office Use Only Application # 1105-33 Date Received 5-16-11 By LH Permit # 29438
Zoning Official B2K Date 25 MAY 2011 Flood Zone AE Land Use ESA Zoning ESA-2
FEMA Map # 0467C Elevation 34' MFE 35' River Santa Fe Plans Examiner T.C Date 5-23-11
Comments DP Required, Elevation Certificate required for permanent power DP# 11-006
☒ NOC ☒ EH ☐ Deed or PA ☐ Site Plan ☐ State Road Info ☐ Well letter ☐ 911 Sheet ☐ Parent Parcel #
☒ Dev Permit # 11-056 ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ W Comp. letter
IMPACT FEES: EMS _____ Fire _____ Corr _____ ☒ Sub VF Form ☒ One ft Rise
Road/Code _____ School _____ = TOTAL (Suspended) ☒ App Fee Paid ☒ Truss

Septic Permit No. 11-0240Fax Only One Set of HVAC DrawingsName Authorized Person Signing Permit Paul Barcia Phone 386-497-4770Address 498 SW Manatee Terr, Fort White, FL 32038Owners Name Paul R. Barcia Phone 386-497-4770911 Address 384 SW Reno Way, Fort White, FL 32038Contractors Name Owner Builder Phone _____

Address _____

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address N/AArchitect/Engineer Name & Address MARK DISOSWAY, PE, PO BOX 868, LAKE CITY FL 32056Mortgage Lenders Name & Address N/ACircle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress EnergyProperty ID Number 00865-034 Estimated Cost of Construction 41,000.00Subdivision Name Three Rivers Estates Lot 34 Block 12 Unit 12 Phase _____Driving Directions SR 47 to Ft White, thru traffic light, go 2 blocks, turn Rt Wilson Springs Rd. go 3 miles, turn Rt. on Newark Dr., go 1 block, left on Bridge Lane, go 1 mi to Reno, turn Rt. Property on left.Number of Existing Dwellings on Property 1Construction of SFD Total Acreage 1 AC Lot Size 1 ACDo you need a Culvert permit or Culvert Waiver or Have an Existing Drive Total Building Height 20Actual Distance of Structure from Property Lines - Front 84 Side 60 Side 50 Rear 150Number of Stories 1 Heated Floor Area 1140 Total Floor Area 2136 Roof Pitch 5:12

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. CODE: Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code. Page 1 of 2 (Both Pages must be submitted together.) Revised 1-11

Spoke to Mr. Barcia 5/25/11

Columbia County Building Permit Application

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

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

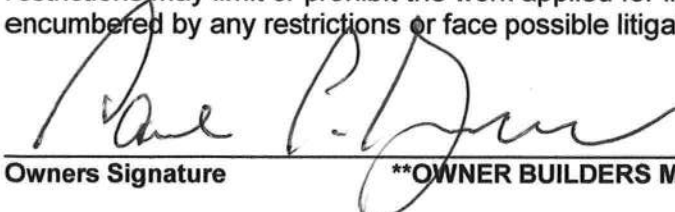
FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor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

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

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

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

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.



(Owners Must Sign All Applications Before Permit Issuance.)

Owners Signature

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

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

Contractor's Signature (Permitee)

Contractor's License Number _____
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this ____ day of _____ 20__.

Personally known _____ or Produced Identification _____

SEAL:

State of Florida Notary Signature (For the Contractor)

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

00865-034

Clerk's Office Stamp

Inst 201112008044 Date: 5/31/2011 Time: 10:56 AM
DC P. DeWitt Cason, Columbia County Page 1 of 1 B. 1215 P. 1117

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

- Description of property (legal description): Lot 34 Three Rivers Est.
a) Street (Job) Address: 384 SW Diamond Way
- General description of improvements: Building House
- Owner Information
a) Name and address: 498 SW Manatee Ave. Ft White Fla 32038
b) Name and address of fee simple titleholder (if other than owner) MARY LAND LAND LLC
c) Interest in property 100%
- Contractor Information
a) Name and address: Paul Barcia 498 SW Manatee Ave
b) Telephone No.: 384 497-4770 Fax No. (Opt.) _____
- Surety Information
a) Name and address: N/A
b) Amount of Bond: _____
c) Telephone No.: _____ Fax No. (Opt.) _____
- Lender
a) Name and address: N/A
b) Phone No.: _____
- Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:
a) Name and address: Paul P. Barcia 497-4770 498 SW Manatee Ave Ft White 32038
b) Telephone No.: 497-4770 Fax No. (Opt.) _____
- In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(l)(b), Florida Statutes:
a) Name and address: _____
b) Telephone No.: _____ Fax No. (Opt.) _____
- Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): _____

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

STATE OF FLORIDA
COUNTY OF COLUMBIA

10.

Signature of Owner or Owner's Authorized Office/Director/Partner/Manager

Paul P. Barcia

Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 31 day of May, 20 11, by: Paul Barcia as Owner (type of authority, e.g. officer, trustee, attorney fact) for Paul Barcia (name of party on behalf of whom instrument was executed)

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature Laurie Hodson Notary Stamp or Seal:



11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Natural Person Signing (in line #10 above.)

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1105-33 CONTRACTOR Paul Barcia PHONE _____
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

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

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

<input checked="" type="checkbox"/> ELECTRICAL	Print Name: <u>Paul P Barcia</u> License #: <u>Owner</u>	Signature: <u>[Signature]</u> Phone #: _____
<input checked="" type="checkbox"/> MECHANICAL/ A/C	Print Name: <u>Owner</u> License #: _____	Signature: _____ Phone #: _____
<input checked="" type="checkbox"/> PLUMBING/ GAS	Print Name: <u>Hometown Plumbing</u> License #: <u>RF11067418</u>	Signature: <u>[Signature]</u> Phone #: <u>(386) 466-5206</u>
ROOFING	Print Name: <u>Paul P Barcia</u> License #: <u>Owner</u>	Signature: <u>[Signature]</u> Phone #: _____
SHEET METAL	Print Name: <u>N/A</u> License #: _____	Signature: _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name: <u>N/A</u> License #: _____	Signature: <u>N/A</u> Phone #: _____
SOLAR	Print Name: <u>N/A</u> License #: _____	Signature: _____ Phone #: _____

Specialty License	License Number	Sub-Contractor's Printed Name	Sub-Contractor's Signature
MASON		<u>Paul P. Barcia</u>	<u>[Signature]</u>
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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

**Columbia County Building Department
Flood Development Permit**

**Development Permit
F 023- 11-006**

DATE 05/31/2011 BUILDING PERMIT NUMBER 000029438
APPLICANT PAUL BARCIA PHONE 386-497-4770
ADDRESS 498 SW MANATEE TERR FORT WHITE FL 32038
OWNER PAUL BARCIA/MARYLAND LANE, LLC PHONE 386-497-4770
ADDRESS 384 SW RENO WAY FORT WHITE FL 32038
CONTRACTOR OWNER BUILDER PHONE _____
ADDRESS _____ FL _____
SUBDIVISION THREE RIVERS ESTATES Lot 34 Block _____ Unit 12 Phase _____
TYPE OF DEVELOPMENT SFD, UTILITY PARCEL ID NO. 36-6S-15-00865-034

FLOOD ZONE AE BY BK _____ 2-4-2009 FIRM COMMUNITY # 120070 - PANEL # 0467-C
FIRM 100 YEAR ELEVATION 34' PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 35'
IN THE REGULATORY FLOODWAY YES or NO RIVER Santa Fe
SURVEYOR / ENGINEER NAME James M. Knight LICENSE NUMBER 47756

☒ ONE FOOT RISE CERTIFICATION INCLUDED
☐ ZERO RISE CERTIFICATION INCLUDED
☐ SRWMD PERMIT NUMBER _____
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED _____

INSPECTED DATE _____ BY _____

COMMENTS _____

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



JAMES M. KNIGHT, P.E.

April 27, 2011

Brian Kepner
Columbia County Building Department
Post Office Box 1529
Lake City, FL 32056

Subject: 1-Foot Rise Calculations
Lots 33 and 34, Unit 12, Three Rivers Estates Subdivision


Dear Mr. Kepner:

Lots 33 and 34, Unit 12, Three Rivers Estates Subdivision have been reviewed to determine if filling the lots could result in increasing the flood levels of the Santa Fe River by more than one foot. The lots are located a River Mile 10.1. To determine if this could happen the FEMA map for the area as well as the hydraulic model for the Santa Fe River (obtained from the Suwannee River Water Management District) have been reviewed. The FEMA map indicates that all of the lots lie in the floodplain but out of the regulatory floodway. Attached is a copy of the map showing the location of the lots.

The hydraulic calculations document that if these lots as well as all other lots located out of the floodway were filled, the rise in water level in the river would be from elevation 34.76 feet to 35.54 feet NGVD 1929 vertical datum (less than one foot of rise). Attached is output from the hydraulic calculations.

Filling all of these lots out of the floodplain will not result in a rise in water surface elevation of more than one foot. If there are any questions concerning these calculations please call at (386) 365-8840.

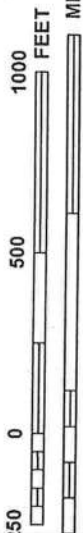
Sincerely,


James M. Knight, P.E.
P.E. Number 47756

4/27/11



MAP SCALE 1" = 500'



NFIP

PANEL 0467C

FIRM

FLOOD INSURANCE RATE MAP
COLUMBIA COUNTY,
FLORIDA
AND INCORPORATED AREAS

PANEL 467 OF 552

(SEE MAP INDEX FOR FIRM PANEL LAYOUT)

CONTAINS:

COMMUNITY
COLUMBIA COUNTY

NUMBER
120070

PANEL
0467

SUFFIX
C

Notice to User: The Map Number shown below should be used when placing map orders; the Community Number shown above should be used on insurance applications for the subject community.



MAP NUMBER
12023C0467C

EFFECTIVE DATE
FEBRUARY 4, 2009

Federal Emergency Management Agency

NATIONAL FLOOD INSURANCE PROGRAM

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov



HEC-RAS Plan: Imported Pla River: RIVER-1 Reach: Reach-1

Reach	River Sta	Profile	Q Total (cfs)	Min Ch El (ft)	W.S. Elev (ft)	Crit W.S. (ft)	E.G. Elev (ft)	E.G. Slope (ft/ft)	Vel Chnl (ft/s)	Flow Area (sq ft)	Top Width (ft)	Froude # Chl
Reach-1	15.08	PF 1	16359.00	6.52	36.22		36.28	0.000078	2.26	26457.61	2538.06	0.09
Reach-1	15.08	PF 2	16359.00	6.52	36.93		36.99	0.000074	2.24	22525.98	1643.00	0.08
Reach-1	14.08	PF 1	16359.00	10.50	35.75		35.82	0.000096	2.51	28533.02	3172.50	0.09
Reach-1	14.08	PF 2	16359.00	10.50	36.52		36.58	0.000080	2.35	25630.53	1883.00	0.09
Reach-1	13.03	PF 1	16359.00	-5.45	35.43		35.47	0.000046	2.08	40415.37	3897.86	0.07
Reach-1	13.03	PF 2	16359.00	-5.45	36.20		36.25	0.000051	2.23	28306.75	1832.00	0.07
Reach-1	11.3	PF 1	16359.00	7.00	35.10		35.14	0.000035	1.71	33321.55	2515.89	0.06
Reach-1	11.3	PF 2	16359.00	7.00	35.87		35.90	0.000034	1.72	28624.53	1615.00	0.06
Reach-1	10.06	PF 1	16359.00	1.81	34.76		34.83	0.000070	2.44	21699.93	2585.04	0.08
Reach-1	10.06	PF 2	16359.00	1.81	35.54		35.61	0.000064	2.38	17981.17	1217.00	0.08
Reach-1	8.43	PF 1	16359.00	-1.00	34.25		34.31	0.000059	2.35	35529.14	5680.49	0.08
Reach-1	8.43	PF 2	16359.00	-1.00	35.07		35.13	0.000055	2.32	25212.38	2099.00	0.07
Reach-1	7.64	PF 1	16359.00	2.75	33.98		34.04	0.000076	2.46	36023.53	5156.06	0.09
Reach-1	7.64	PF 2	16359.00	2.75	34.81		34.87	0.000072	2.45	23999.78	1694.00	0.08



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

PERMIT NO. 14-0870
DATE PAID: 5/13/11
FEE PAID: 310.65
RECEIPT #: 608940

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Maryland Lane, LLC

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: P.O. BOX 39 FT. WHITE, FL, 32038

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 34 BLOCK: na SUB: Three Rivers Estates unit 12 PLATTED: 78

PROPERTY ID #: 00-00-00-00865-034 ZONING: Res- I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: .94 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ≤ 2000 GPD ☐ > 2000 GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☒ N DISTANCE TO SEWER: — FT

PROPERTY ADDRESS: SW Reno Way, Fort White, FL, 32038

DIRECTIONS TO PROPERTY: 47 South, TR on Wilson Springs Road, TR on Newark, TL on

Bridge Lane, TR on Reno Way, 4th lot on left

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
---------	-----------------------	-----------------	--------------------	--

1	SF Residential	2	1140	
---	----------------	---	------	--

2				
---	--	--	--	--

3				
---	--	--	--	--

☒ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Rocky D Ford DATE: 5/12/2011

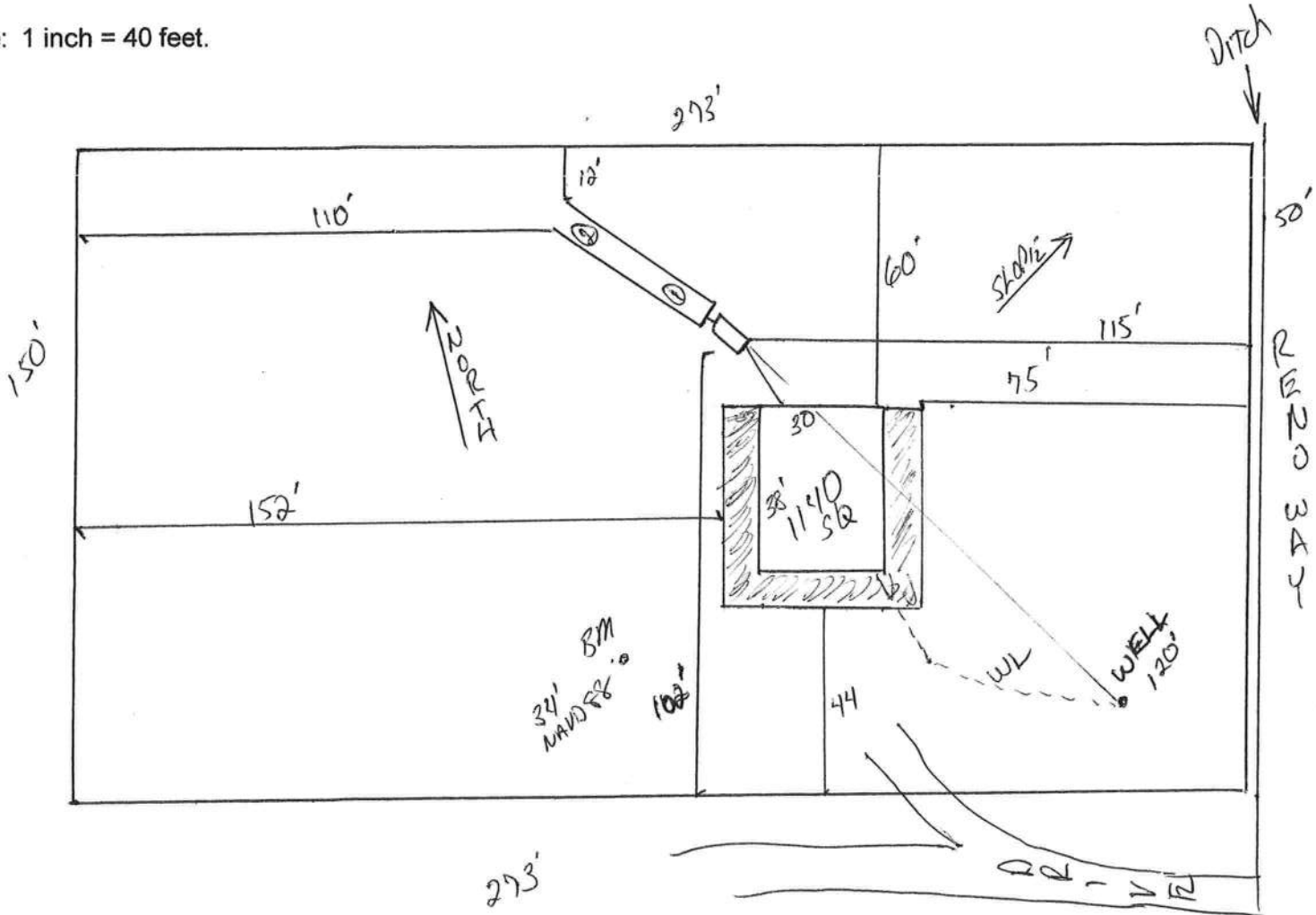
STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 11-0240

Mary Land Law, LLC

PART II - SITEPLAN

Scale: 1 inch = 40 feet.



Notes: SEE ATTACHED SURVEY

Site Plan submitted by: Rocky D F

MASTER CONTRACTOR

Plan Approved X

Not Approved _____

Date _____

By [Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

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

OWNER BUILDER DISCLOSURE STATEMENT

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

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

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

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

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

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

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

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

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

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

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

384 SW Reno Way Fort White FL 32038

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

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

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to Columbia County Building Department.

TYPE OF CONSTRUCTION

- () Single Family Dwelling () Two-Family Residence () Farm Outbuilding
() Addition, Alteration, Modification or other Improvement
() Commercial, Cost of Construction 41,000 Construction of _____
() Other _____

I, Bert P. Baren, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes allowing this exception for the construction permitted by Columbia County Building Permit.

Owner Builder Signature

Date _____

5-16-11

NOTARY OF OWNER BUILDER SIGNATURE

The above signer is personally known to me or produced identification _____

Notary Signature  Date 5-16-11

(Seal)

**FOR BUILDING DEPARTMENT USE ONLY**

I hereby certify that the above listed owner builder has been given notice of the restriction stated above.

Building Official/Representative

Prepared by:
Michael H. Harrell
Abstract & Title Services, Inc.
P. O. Box 7173
Lake City, FL 32055

ATS# 2-18302

961-0117
Font
Ingt:2011-12085043 Date:4/3/2011 Time:10:53 AM
Stamp-Deed:58.00
OC,P,DeWitt Cason,Columbia County Page 1 of 1 B:1212 P:1328

Warranty Deed

Individual to Individual

THIS WARRANTY DEED made the 1st day of April, 2011, Donald P. Kenniston, Jr., and his wife, Melissa M. Ryerson and Allen Ryerson and his wife, Linda Ryerson, hereinafter called the grantor, to Maryland Lane, LLC whose post office address is: 498 SW Manatee Terr., Ft. White, FL 32038 hereinafter called the grantee:

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporation)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys, and confirms unto the grantee, all that certain land situate in COLUMBIA County, Florida, viz: Parcel ID# 00865-034

Lot 34, Three Rivers Estates, Unit 12, according to the map or plat thereof as recorded in Plat Book 4, Page 117-117A, of the Public Records of Columbia County, Florida.

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

TO HAVE AND TO HOLD, the same in fee simple forever.

AND the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2010.

IN WITNESS WHEREOF, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Rosemary Overhulse
Witness:
ROSEMARY OVERHULSE
Printed Name:
R. Overhulse
Witness:
R. Overhulse
Printed Name:

Donald P. Kenniston, Jr.
Donald P. Kenniston, Jr.

Melissa M. Ryerson
Melissa M. Ryerson

Allen Ryerson
Allen Ryerson

Linda Ryerson
Linda Ryerson

STATE OF FLORIDA
COUNTY OF Palm Beach

The foregoing instrument was acknowledged before me this 31 day of March, 2011 by DONALD P. KENNISTON, JR., AND HIS WIFE, MELISSA M. RYERSON AND ALLEN RYERSON AND HIS WIFE, LINDA RYERSON personally known to me or, if not personally known to me, who produced Driver's License for identification and who did not take an oath.

(Notary Seal)



Gilda Tashman
Notary Public

My Commission Expires: 8-06-11

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: 5/11/2011 DATE ISSUED: 5/13/2011

ENHANCED 9-1-1 ADDRESS:

384 SW RENO

WAY

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

00-00-00-00865-034

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON LOT 34, UNIT 12, THREE RIVERS ESTATES S/D

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.

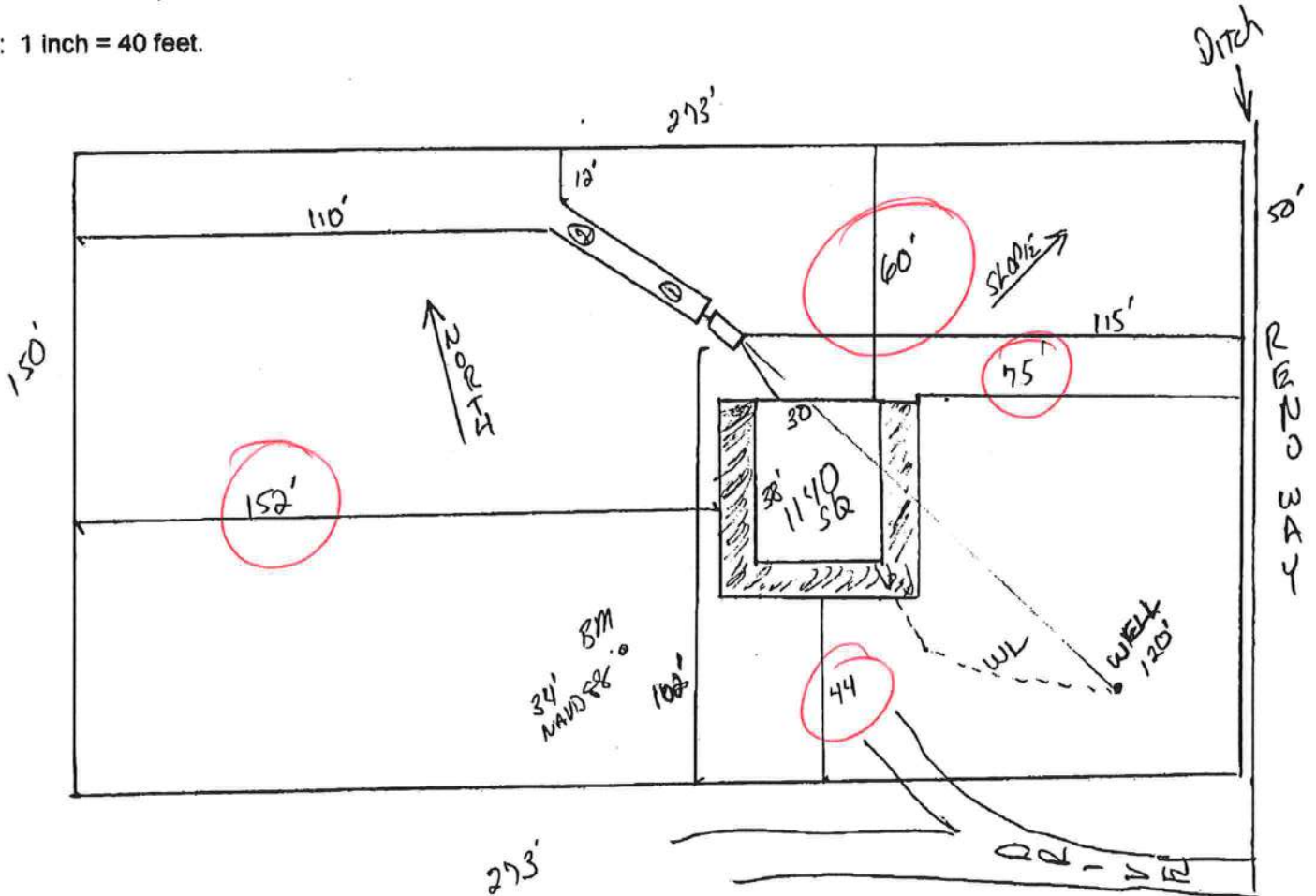
**STATE OF FLORIDA
DEPARTMENT OF HEALTH**
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

Mary Land Law, LLC

----- PART II - SITEPLAN -----

Scale: 1 inch = 40 feet.



Notes: _____

Site Plan submitted by: *Rocky D F*

MASTER CONTRACTOR

Plan Approved _____

Not Approved _____

Date _____

By _____

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

CLYATT WELL DRILLING, INC.

(Established in 1971)
Post Office Box 180
Worthington Springs, FL 32697
Phone (386)496-2488 * FAX (386)496-4640**

WELL DESCRIPTION*DESCRIPTION DATE*

5/13/2011

CUSTOMER NAME AND ADDRESS

Paul Barcia/ Maryland Lane LLC
498 SW Manatee Terr
Ft White, FL 32038

DESCRIPTION OF WORK

New Well Letter

DESCRIPTION

80 Feet 4" Well
1 HP Submersible Pump
82 Gallon Tank
60 Feet 1-1/4" Drop Pipe
60 Feet 14/3 Submersible Pump Wire
4 X 1-1/4 Well Seal
Controls and Fittings
Sales Tax @ 7%

The above description is provided to give a brief description of the water well to be constructed by Clyatt Well Drilling, Inc.

PRODUCT APPROVAL SPECIFICATION SHEET

Location: 384 SW Reno Way **Project Name:** Bardin, House

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit on or after April 1, 2004. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. More information about statewide product approval can be obtained at www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
	MASONITE	STEEL PREHUNG SINGLE	4904.1
1. Swinging	MASONITE	STEEL PREHUNG DOUBLE	5465.1
2. Sliding	MIWNDW/DOOR	ALUMINUM PATIO	5483.R1
3. Sectional	WAYNE-DALTON	SERIES 8000	22-R1
4. Roll up			
5. Automatic			
6. SWINGING	THERMA-TRU	FG GENERAL	8838-R1
B. WINDOWS			
1. Single hung	BETTERBILT	ALUMINUM SINGLEHUNG SERIES 740	8455.R1
2. Horizontal Slider	SILVERLINE	VINYL SERIES 8800	6692
3. Casement			
4. Double Hung	VIWINTech	VINYL SERIES 2100 DH	8206.R1
5. Fixed	VIWINTech	VINYL SERIES 2100 FIXED	8784-R1
6. Single Hung	VIWINTech	VINYL SERIES 2100 SH	8957-R1
7. Pass-through			
8. Projected			
9. Mullion	BETTERBILT	ALUMINUM 60" X 3-5/8" X 1-1/4"	7096
10. Wind Breaker			
11 Dual Action			
12. Other	CAPITOL	VINYL SINGLEHUNG SERIES 3540	5435.8
C. PANEL WALL			
1. Siding	JAMES HARDIE	CEMENT LAP SIDING	889.R2
2. Soffits	ALCOA	ALUMINUM	5543
3. Siding	NICHIHA	CEMENT LAP SIDING	12098
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles	TAMKO	25 YEAR ELITE 3-TAB	1956.2
2. Under Layments			
3. Roofing Fasteners			
4. Non-structural Metal Rf	FABRAL	GRAND RIB-3	5699
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives – Coatings			
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other	TAMKO	30 YEAR AR	1956.3
E. SHUTTERS			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
F. SKYLIGHTS			
1. Skylight			
2. Other			
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor	SIMPSON ST	STRAPS & CONNECTORS	474,538,1901,1725
2. Truss plates			
3. Engineered lumber			
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall	LOGAN	CONCRETE FORMS	2004.04
12. Sheds			
13. Other			
H. NEW EXTERIOR ENVELOPE PRODUCTS			
1.			
2.			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

I understand these products may have to be removed if approval cannot be demonstrated during inspection.

Contractor or Contractor's Authorized Agent Signature

Print Name

Date

Location

Permit # (FOR STAFF USE ONLY)

02/02/04 – 2 of 2

Website: www.tlcperrmits.org

Effective April 1, 2004

NO. 088 / 7

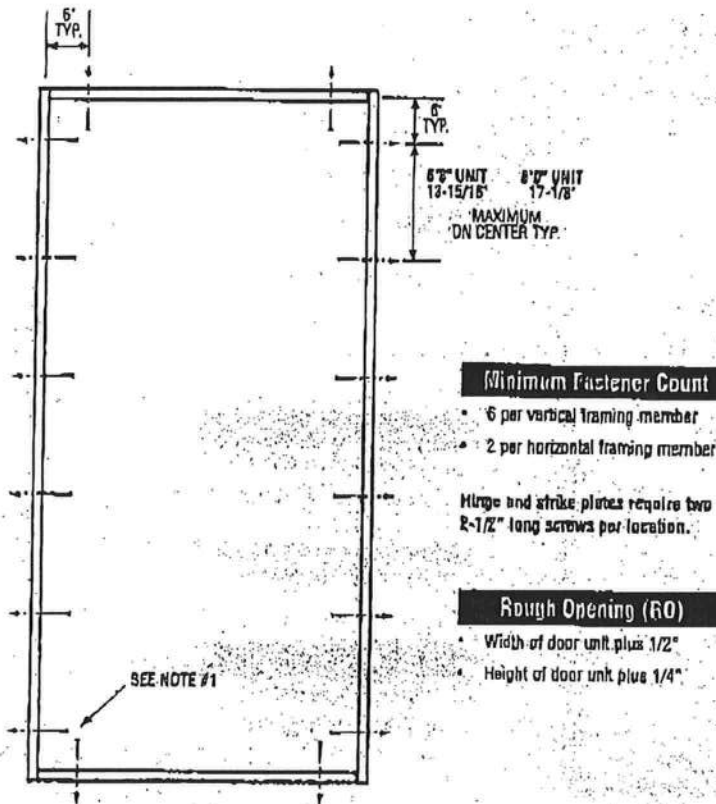
Building Supply

May 14, 2011 8:07AM

X
Unit

MID-WL-MA0001-02

SINGLE DOOR



Warrick-Henry, Inc. Test Data Report Dated 11/13/03 for #3025447A, #3025447B, #3025447C and COP Test Report Validation Matrix
#3025447A-001, 002, 003, 004; #3025447B-001, 002, 003, 004; #3025447C-001, 002, 003, 004 provides
additional information - available from the ITW/WH website (www.masonite.com), the Masonite website
(www.masonite.com) or the Masonite Technical Center.

Latching Hardware:

- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline **OR** that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.

Hardware requirements not mentioned on COP documents shall comply with item 1 as shown above.

Notes:

1. Anchor calculations have been carried out with the lowest (least) fastener rating from the different fasteners being considered for use. Jamb and head fasteners analyzed for this unit include #8 and #10 wood screws or 3/16" Tapcons. A physical shim must be placed in shim space at each anchor location. Threshold fasteners analyzed for this unit include #8 and #10 wood screws, 3/16" Tapcons, or Liquid Nails Builders Choice 490 (or equal structural adhesive).
2. The wood screw single-shear design values come from Table 11.3A of ANSI/APA & PA NDS for southern pine number with a side member thickness of 1-1/4" and achievement of minimum embedment. The 3/16" Tapcon single shear design values come from the ITW and ELCO Dade County approvals respectively, each with minimum 1-1/4" embedment.
3. Wood bucks by others, must be anchored properly to transfer loads to the structure.

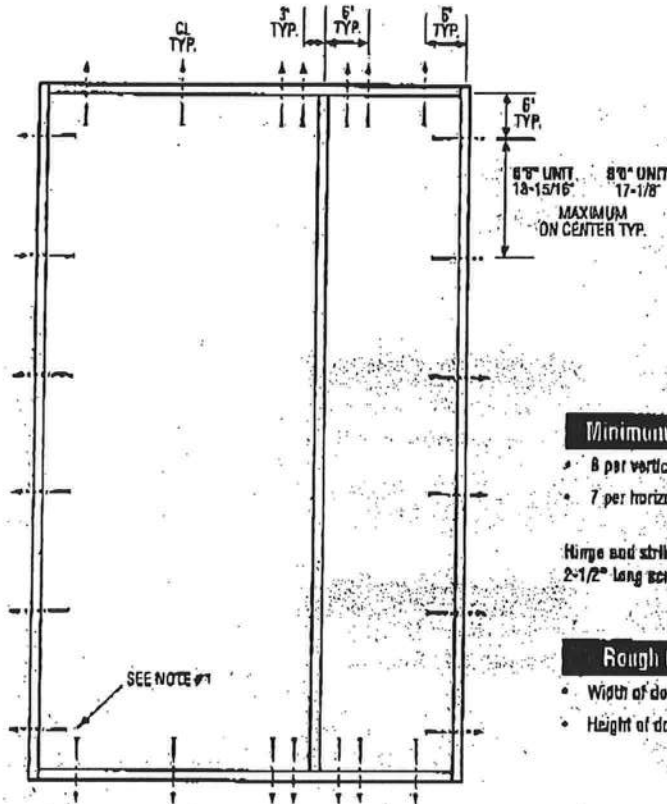
October 27, 2003
Our drawings provide a broad representation of our products,
design and product details subject to change without notice.

Masonite

XO or OX
Unit

MID-WL-MA0003-02

SINGLE DOOR WITH 1 SIDELITE



Minimum Fastener Count

- 8 per vertical framing member
- 7 per horizontal framing member

Hinge and strike plates require two 2-1/2" long screws per location.

Rough Opening (RO)

- Width of door unit plus 1/2"
- Height of door unit plus 1/4"

Warrick-Horsey Test Data Review Certificate #3026447A, #3026447B, #3026447C and COP/Box Region Validation Markers #3026447A-001, 002, 003, 004; #3026447B-001, 002, 003, 004; #3026447C-001, 002, 003, 004 provided by Warrick-Horsey Inc. - available from the ITSWH website (www.itsw.com), the Masonite website (www.masonite.com) or the Masonite Technical Center.

Latching Hardware:

- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline OR that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.

Hardware requirements not mandated on COP components shall comply with those as shown above.

Notes:

1. Anchor calculations have been carried out with the lowest (least) fastener rating from the different fasteners being considered for use. Jamb and head fasteners analyzed for this unit include #8 and #10 wood screws or 3/16" Tapcons. A physical shim must be placed in shim space at each anchor location. Threshold fasteners analyzed for this unit include #8 and #10 wood screws, 3/16" Tapcons, or Liquid Nails Builders Choice 490 (or equal structural adhesive).
2. The wood screw single shear design values come from Table 11.3A of ANS/AF & PANDS for southern pine lumber with a side member thickness of 1-1/4" and achievement of minimum embedment. The 3/16" Tapcon single shear design values come from the ITW and ELCO Dade County approvals respectively, each with minimum 1-1/4" embedment.
3. Wood bucks by others, must be anchored properly to transfer loads to the structure.

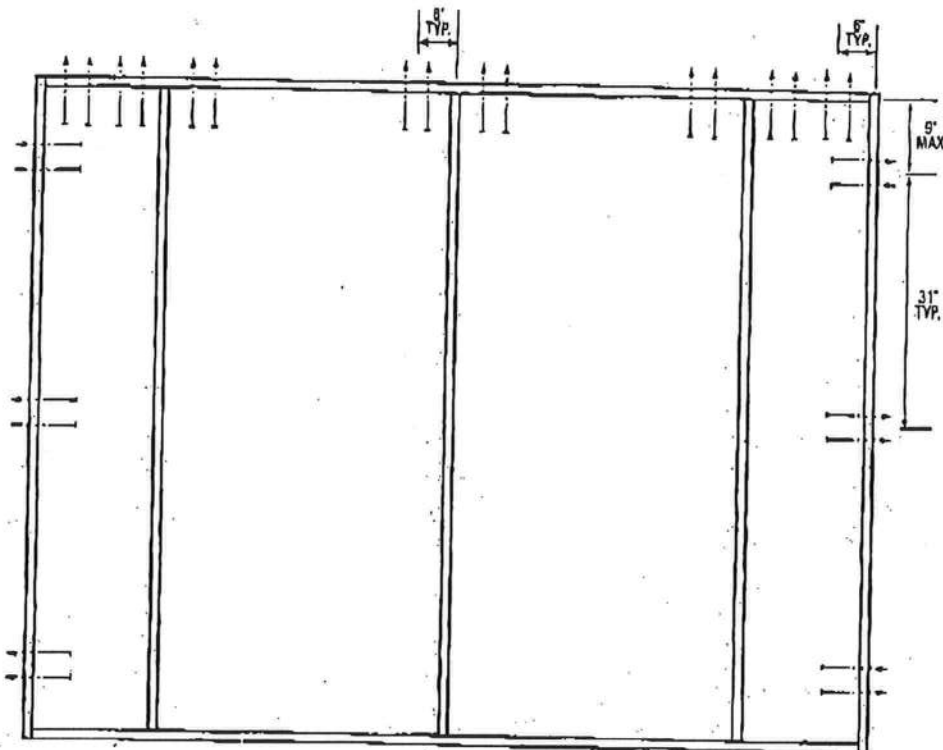
October 27, 2003
On continuing program of product improvement and product development, design and product detail subject to change without notice.

Masonite

OX XO
Unit

MID-WL-MA0005-02

DOUBLE DOOR WITH 2 SIDELITES



Minimum Fastener Count

- 6 per vertical framing member for heights 7'0" and smaller
 - 8 per vertical framing member for heights greater than 7'0"
 - 16 per horizontal framing member
- Hinge and strike plates require two 2-1/2" long screws per location.

Rough Opening (RO)

- Width of door unit plus 1/2"
- Height of door unit plus 1/4"



Third Party Review Certificate #2025447A; #3025447B, #3025447C and COP/Ten Report Validation Marks #3025447A-001, 002, 003, 004; #3025447B-001, 002, 003, 004; #3025447C-001, 002, 003, 004 provide additional information - available from the ITSNVI website (www.rosema.com), the Masonite website (www.masonite.com) or the Masonite Technical Center.

Latching Hardware:

- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline OR that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.

Hardware requirements not furnished on COP documents shall comply with item 1 as shown above.

Notes:

1. Anchor calculations have been carried out with the fastener rating from the different fasteners being considered for use. Jamb and head fasteners analyzed for this unit include 10d common nails. A physical shim must be placed in shim space at each anchor location. Threshold fasteners analyzed for this unit include Liquid Nails Builders Choice 490 (or equal structural adhesive).
2. The common nail single shear design values come from ANSI/AP & PA NDS for southern pine lumber with a side member thickness of 1-1/4" and achievement of minimum embedment of 1-1/4".
3. Wood bucks by others, must be anchored properly to transfer loads to the structure.

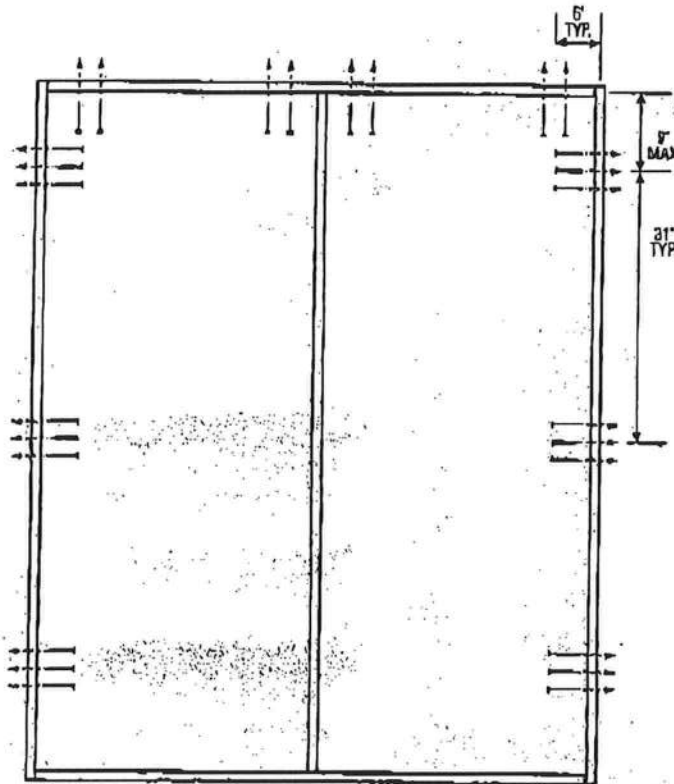
2

October 27, 2003
Our continuing program of product improvement relies on feedback from
users and product data sources to develop without delay.

Masonite®

XX
Unit

MID-WL-MA0002-02

DOUBLE DOOR**Minimum Fastener Count**

- 6 per vertical framing member for 7'0" heights and smaller
- 8 per vertical framing member for heights greater than 7'0"
- 8 per horizontal framing member

Hinge and strike plates require two 2-1/2" long screws per location.

Rough Opening (RO)

- Width of door unit plus 1/2"
- Height of door unit plus 1/4"



For Door Review Certificates #3026474, #3026478, #3026479 and COP/First Approx. Material Estimate #3026474-001, 002, 003, 004; #3026478-001, 002, 003, 004; #3026479-001, 002, 003, 004 provide additional information - available from the WMA website (www.wmaonline.com), the Masonite website (www.masonite.com) or the Masonite Technical Center.

Latching Hardware:

- Compliance requires that GRADE 2 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline OR that GRADE 2 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A150.18) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A150.18) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A150.18) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.

Hardware requirements not mentioned on COP documents shall comply with Item 1 as shown above.

Notes:

1. Anchor calculations have been carried out with the fastener rating from the different fasteners being considered for use. Jamb and head fasteners analyzed for this unit include #8 wood screws and 10d common nails. A physical shim must be placed in shim space at each anchor location. Threshold fasteners analyzed for this unit include Liquid Nails Builders Choice 490 (or equal structural adhesive).
2. The wood screw and common nail single shear design values come from ANSI/APA & PA NDS for southern pine lumber with a side member (thickness of 1-1/4" and achievement of minimum embedment of 1-1/4").
3. Wood bucks by others, must be anchored properly to transfer loads to the structure.

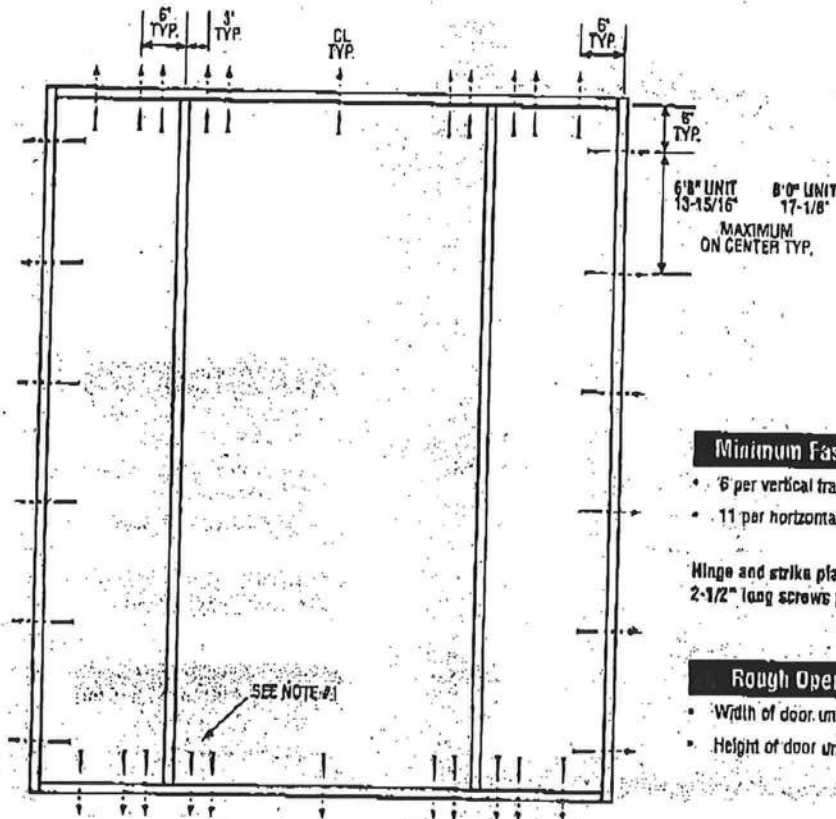
2

October 27, 2003
Our continuing purpose is product improvement through research, design and product detail subject to change without notice.

OXO
Unit

MID-WL-MA0004-02

SINGLE DOOR WITH 2 SIDELITES



Minimum Fastener Count

- 6 per vertical framing member
- 11 per horizontal framing member

Hinge and strike plates require two 2-1/2" long screws per location.

Rough Opening (RO)

- Width of door unit plus 1/2"
- Height of door unit plus 1/4"

Wernicke Marvco Test Data Review Certifications #3026447A, #3026447B, #3026447C and COP/Per Report Validation Matrix #3026447A-001, 002, 003, 004; #3026447B-001, 002, 003, 004; #3026447C-001, 002, 003, 004 provides additional information - including the ITW website (www.itw.com), the Masonite website (www.masonite.com) or the Masonite Technical Center.

Latching Hardware:

- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline OR that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 10-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.
- Compliance requires that GRADE 3 or better (ANSI/BHMA A156.2) cylindrical and deadlock hardware be installed @ 5-1/2" centerline with 8" GRADE 1 (ANSI/BHMA A156.16) surface bolts installed on latch side of active door panel - (1) at top and (1) at bottom.

Hardware requirements not located on COP documents shall comply with Item 1 as shown above.

Notes:

1. Anchor calculations have been carried out with the lowest (least) fastener rating from the different fasteners being considered for use. Jamb and head fasteners analyzed for this unit include #8 and #10 wood screws or 3/16" Tapcons. A physical shim must be placed in shim space at each anchor location. Threshold fasteners analyzed for this unit include #8 and #10 wood screws, 3/16" Tapcons, or Liquid Nails Builders Choice 490 (or equal structural adhesive).
2. The wood screw single shear design values come from Table 11.3A of ANSUF & PA NOS for southern pine lumber with a side member thickness of 1-1/4" and achievement of minimum embedment. The 3/16" Tapcon single shear design values come from the ITW and ELCO Dade County approvals respectively, each with minimum 1-1/4" embedment.
3. Wood bucks by others, must be anchored properly to transfer loads to the structure.

October 27, 2003
The undersigned is a duly qualified professional engineer, architect, or other duly qualified person, and the design and construction of the above project is in accordance with the applicable laws and regulations.

Masonite



LIMITED LIFETIME WARRANTY VINYL AND ALUMINUM NEW CONSTRUCTION PRODUCTS

Basic Warranty

Each MI Windows and Doors, Inc. ("MI") Capitol and BetterBuilt branded new construction product will be free from defects in materials or workmanship that substantially impair operation or performance in the building in which they are originally installed for the applicable period below. This warranty includes product repair and replacement component parts at no charge and any skilled labor (provided or arranged by MI) necessary to repair or replace window or door components.

Owner Occupied Single Family Residence:

For owner-occupied single-family residences (including units sharing up to two common walls) the warranty applies to frame, non-glass, finish and sash components for as long as the initial owner owns and occupies the residence for all products other than aluminum single-glazed products (which are covered for 10 years only). Insulated glass is warranted for 20 years only. If the home is sold in the first 5 years after product purchase, this warranty converts to a commercial warranty (see below) and is effective for a period of 5 years after the product purchase date.

Commercial (and all non-owner occupied and multifamily residences):

For commercial buildings, multi-family dwellings, apartments, and other types of buildings, the warranty applies to frame, nonglass and sash components and is effective for ten (10) years following the product purchase date. Insulated glass and other components are warranted for 10 years.

Special Conditions

Replaced or repaired products are covered for the balance of the original warranty period only. This warranty does not include repainting or refinishing labor or materials. Window and door screens are warranted for one (1) year after the manufacturing date only. Loss of functionality of hardware (except as provided below for stainless steel hardware) in highly corrosive environments, which includes any dwelling located within two miles of salt water and any dwelling located in the state of Hawaii or the Caribbean Islands is excluded from warranty coverage. MI reserves the right to refund the purchase price in lieu of repair or replacement as stated herein. Laminated glass (whether insulated or noninsulated) is warranted for a period of five years after date of purchase only. The warranty for any MI StormArmor product is modified by the StormArmor Warranty Rider, a copy of which is furnished with StormArmor products.

How To Request Assistance

If you have a problem with your MI product, contact the dealer/distributor or contractor who sold you the product or contact us directly:

Eastern Region Claims:

Mail: Warranty Service
P.O. Box 370
Gatz, PA 17030
Fax: (717) 365-3780
Phone: (800) 949-3818

Western Region Claims*

Mail: Warranty Service
7555 East State Route 69
Prescott Valley, AZ 86314
Fax: (928) 759-0913
Phone: 888-417-1162

*AK, AZ, CA, CO, HI, ID, MT, NM, NV, OR, UT, WA, WY

To respond, we need the following:

- How to contact you.
- The address where the product can be inspected.
- A description of the problem and the product (photographs are helpful).

What We Will Do

MI will acknowledge receipt of your claim (generally within three business days), investigate your claim and take appropriate action (generally within 30 days after notification). If the product does not have a defect covered by the warranty, MI may charge an inspection fee for any onsite inspection that is required or that you request. Because manufacturing materials, techniques, and model series can change, replacement part(s) may not be an aesthetic match to the original. If repair is not practicable and replacement is not reasonably available, then MI in its discretion may choose to refund the purchase price of the affected unit. In no event shall MI's liability hereunder exceed the purchase price of the affected products. MI shall have no obligation whatsoever unless you make a request under this warranty, and upon receipt MI shall have the right to perform under this warranty.

Additional Features

This warranty covers only defects in material or workmanship of MI products. Without limitation, MI is not liable for defects, conditions or damage related to:

- Normal wear and tear, natural weathering of surfaces and/or hardware finishes (i.e. corrosion).
- MI will replace at no charge (under terms of the warranty) stainless steel hardware that loses functionality in highly corrosive environments within one (1) year after the date of product purchase. Note that stainless steel hardware must be ordered on the original product purchase for the coverage to apply.
- Glass breakage; failure due to misuse or abuse, and damage caused by failure to provide maintenance, by alteration or modification to the window. Alterations and/or modifications include, but are not limited to: reinstallation, tints and/or films applied by others, paint finishes applied by others, and installation of security systems.
- Any cause beyond MI's control, such as fire, flood, earthquake, other natural causes, or criminal acts.
- Installation that is not in conformance with MI's recommended installation procedures or good building practices; or damage related to water and/or air infiltration as a result of defects or limitations in building design or construction (without limitation, damage resulting from engineered drainage systems or cladding systems that do not manage and drain incidental water or water forward of the nailing flange), and/or installation that is not in compliance with local building codes.
- An application or condition that exceeds product design standards and/or certified performance specifications (including without limitation any damage or defect resulting from localized application of heat)
- Condensation: Unless due to moisture within the sealed glass units as a result of seal failure; the majority of condensation problems are related to excessive humidity levels in a structure. Condensation on exposed surfaces is not covered by this warranty.
- Any building that has been moved (after completion of construction), put under excessive strain or subjected to settling.
- Failure or absence of perimeter caulking used to seal frames or trim packages against water or air penetration (caulk is not part of the product and is a maintenance responsibility of the building owner).
- Inadequate maintenance; use only mild soap or diluted detergent to restore vinyl color which can be affected by environmental conditions. Glass surface should be cleaned only with approved solutions. MI makes no claims or warranty relative to the percentage of fill of inert gases (Argon, Krypton etc.) in any insulated glass units, or the performance of any low emissivity coating over time.

Special care should be used to remove a sash or glass from a window or door! Follow installation instructions closely!

Important Legal Information

THESE WARRANTIES ARE EXCLUSIVE AND IN LIEU OF ALL OTHER REMEDIES, WARRANTIES, GUARANTIES OR LIABILITIES, EXPRESS OR IMPLIED, ARISING BY LAW OR OTHERWISE (INCLUDING WITHOUT LIMITATION ANY WITH RESPECT TO FITNESS AND MERCHANTABILITY). MI WINDOWS AND DOORS, INC. ("MI") SHALL NOT BE LIABLE FOR ANY INCIDENTAL OR CONSEQUENTIAL DAMAGES, REGARDLESS OF THE NATURE OF THE CLAIM OR WHETHER OR NOT OCCASIONED BY MI'S NEGLIGENCE. IN NO EVENT SHALL THE LIABILITY OF MI EXCEED THE PURCHASE PRICE OF THE AFFECTED PRODUCTS. Depending on the state in which you live, these limitations and exclusions may not apply to you. This warranty shall not be extended, altered or varied except by a written instrument signed by MI Windows and Doors, Inc. This warranty is effective for all Capitol and BetterBuilt branded new construction products manufactured on or after 7/1/05. Any previous warranties will continue to apply to products manufactured by MI prior to this date. This warranty, together with the MI product specification sheet and installation instructions for the specific product set out the entire liability of MI with regard to the product. The MI product specification sheet and installation instructions contain important information related to the MI products. If these materials have not been provided, they should be obtained from your distributor, by writing to the address above or by visiting www.mlwd.com.

Individual products may be subject to a variation in performance.



INSTALLATION INSTRUCTIONS FOR ALUMINUM FIN AND FLANGE WINDOWS

FAILURE TO FOLLOW THESE INSTRUCTIONS AND BUILDING CODES REQUIREMENTS MAY EFFECT THE REMEDIES AVAILABLE UNDER YOUR WARRANTY

READ THESE INSTRUCTIONS COMPLETELY BEFORE BEGINNING. Please inspect your MI Windows and Doors, Inc. product thoroughly before beginning installation. Inspect the opening and the product, and do not install if there is any observable damage or other irregularity. The product specification sheet and warranty include important information regarding your product and may include product-specific insulation requirements (for example, types of fasteners to be used with impact resistant windows and limitations on the height at which the product may be installed); if you did not obtain copies please contact MI Windows and Doors, Inc. Local building codes may impose additional requirements, and those codes supersede these instructions.

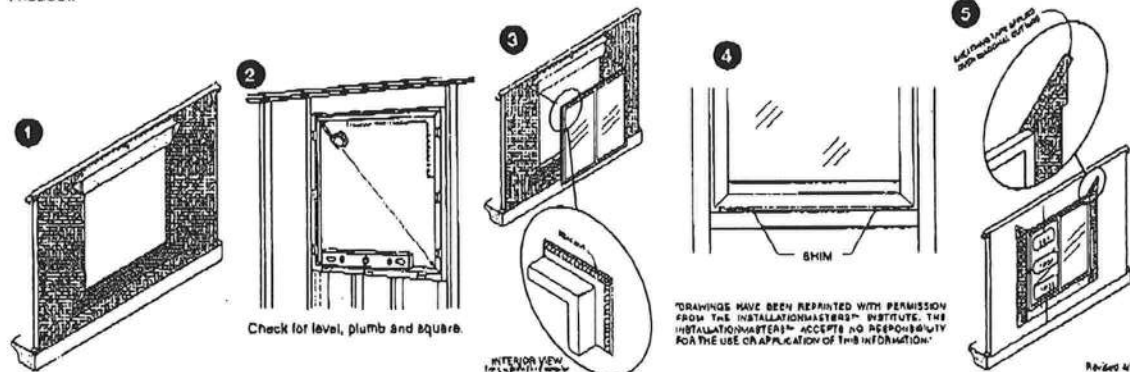
1. IF THE BUILDING HAS A WEATHER RESISTANT BARRIER (WRB) I.E. HOUSE WRAP, PREPARE THE OPENING ACCORDING TO WRB MANUFACTURER'S INSTRUCTIONS. AT EACH TOP CORNER MAKE A 45° CUT IN THE WRB. FOLD UP THE WRB SO THAT THE TOP NAIL FIN OF THE UNIT CAN BE INSTALLED UNDERNEATH IT. (See Figure 1 below) FLASHING OF THE WINDOW OPENING IS RECOMMENDED AND MAY BE REQUIRED BY SOME BUILDING CODES.
2. MAKE SURE THE ROUGH OPENING IS PLUMB, SQUARE AND THE SILL PLATE IS LEVEL. ROUGH OPENINGS SHOULD BE 1/2" LARGER THAN NET WINDOW SIZE IN WIDTH & HEIGHT. (SEE FIGURE 2 BELOW)
3. CLOSE & LOCK THE SASH THROUGHOUT INSTALLATION. KEEP THE SIDE JAMBS PLUMB & SQUARE WITH HEAD AND SILL. BE CAREFUL NOT TO "CROWN UP" OR "BOW DOWN" THE HEAD OR SILL. CONSTANTLY CHECK WIDTH AT THE MEETING RAILS OF SINGLE AND DOUBLE HUNGS TO AVOID A "BOWED OUT" INSTALLATION. WHEN USING FLASHING APPLY THE BOTTOM PIECE BEFORE INSTALLING THE WINDOWS. (SEE FIGURE 11) FLANGE TYPE WINDOWS REQUIRE FLASHING THE ENTIRE OPENING PRIOR TO WINDOW INSTALLATION, FLASHING MUST MEET ASTM D-709, 24 HOUR WATER RESISTANCE TEST.
4. APPLY A CONTINUOUS 3/8" BEAD OF PREMIUM GRADE, COMPATIBLE EXTERIOR SEALANT TO THE INTERIOR (BACKSIDE) OF THE NAIL FIN OR FLANGE NEAR THE OUTSIDE EDGE ON ALL SIDES PRIOR TO SETTING THE WINDOW INTO THE ROUGH OPENING. (SEE FIGURE 3 BELOW)
5. SET AND CENTER THE WINDOW INTO THE OPENING. INSERT 1/4" SHIMS UNDER THE BOTTOM CORNERS (DO NOT PLACE SHIMS OR BLOCKS UNDER THE SILL EXCEPT AT THE CORNERS). THESE SHIMS SHOULD BE REMOVED AFTER INSTALLATION IS COMPLETE. (SEE FIGURE 4 BELOW) MULLED WINDOWS, SLIDERS AND UNITS WITH INTERMEDIATE JAMBS REQUIRE A SHIM AT EACH MULLION, INTERMEDIATE JAMB OR MEETING RAIL TO INSURE A LEVEL SILL. CONDITION. IF ADDITIONAL SHIMS ARE REQUIRED TO MAINTAIN A LEVEL SILL, APPLY SHIMS AS NECESSARY. THESE SHIMS SHOULD REMAIN AFTER INSTALLATION IS COMPLETE.
6. PLACE A TEMPORARY FASTENER THROUGH THE NAIL FIN ON EACH TOP CORNER OF FIN UNITS. ON FLANGE WINDOWS INSTALL TEMPORARY FASTENERS INTO THE HOLES PROVIDED IN THE FRAME AT THE TOP OF JAMBS. PLACE SHIMS AT EACH ANCHOR LOCATION AT THE SIDES AND HEAD. FASTENERS NEED TO BE INSTALLED STRAIGHT AND SUFFICIENT LENGTH TO PENETRATE TO FRAMING BY A MINIMUM OF 1 INCH. CHECK THE SILL FOR LEVEL BY RAISING THE SASH SLIGHTLY, THE SPACE SHOULD BE EQUAL, IF NOT ADJUST ACCORDINGLY, RELOCK SASH. CHECK THE JAMBS FOR PLUMB, THEN MEASURE DIAGONALLY ACROSS THE CORNERS, THESE DIMENSIONS MUST BE THE SAME FOR UNIT TO BE SQUARE. NEXT: PLACE FASTENERS NEAR THE BOTTOM CORNERS, AGAIN CHECKING WINDOW FOR LEVEL, PLUMB AND SQUARE. CONTINUE PLACING FASTENERS IN THE NAIL FIN, EVERY 16" ON ALL SIDES OF FIN WINDOWS UNTIL SECURE. AVOID DISTORTING THE FIN. FLANGE UNITS REQUIRE FASTENERS IN ALL HOLES PROVIDED IN THE FRAME, SHIMMING AS NEEDED AT EACH FASTENING POINT.
7. APPLY SEALANT OVER EXPOSED FASTENER HEADS ON THE NAIL FIN, ALSO SEAL OUTSIDE OF NAIL FIN/FLANGE WHERE IT IS IN CONTACT WITH THE WRB/SHEATHING. OR IF FLASHING (WINDOW TAPE) IS BEING USED. NOTE: SILL FLASHING SHOULD HAVE BEEN APPLIED PRIOR TO INSTALLING THE WINDOW. APPLY THE SIDE FLASHING ON TOP OF THE NAIL FIN OVERLAPPING THE SILL FLASHING AND EXTENDING UP PAST THE TOP NAIL FIN BY APPROXIMATELY 2". THEN APPLY THE TOP FLASHING ALSO COVER THE NAIL FIN, OVERLAPPING THE SIDE PIECES AND EXTENDING PAST THE SIDE FLASHING BY APPROXIMATELY 1". LASTLY FOLD DOWN THE WRB FLAP OVER THE FLASHING, TAPE THE DIAGONAL CUTS ABOVE EACH CORNER. (SEE FIGURE 5 BELOW)
8. PLACE SHIMS AT THE MEETING RAILS/CHECK RAILS AT THE SIDE JAMBS OF FIN UNITS TO PREVENT BOWING. THESE SHIMS SHOULD REMAIN AFTER INSTALLATION. CAUTION SHOULD BE TAKEN AS TO NOT OVER SHIM AND CAUSE DEFLECTION OF THE FRAME AND HINDER SASH OPERATION. CHECK THE WIDTH OF THE WINDOW AT THE TOP, MIDDLE AND BOTTOM, IF NOT THE SAME, SHIM ACCORDINGLY. UNLOCK AND OPERATE THE SASH. TILT IT IN AND VISUALLY INSPECT ALL SIGHT LINES.
9. INSULATE BETWEEN THE WINDOW FRAME & ROUGH OPENING WITH FIBERGLASS INSULATION OR EQUAL. THE SPACE MAY BE FILLED WITH MEASURED USE OF LOW EXPANSION FOAM BUT ONLY AFTER DETERMINING THAT FOAM WILL NOT EXERT PRESSURE AGAINST THE FRAME, WHICH CAN IMPAIR OPERATION. DISTORTION OF THE FRAME WILL AFFECT THE USER'S RIGHTS UNDER THE WARRANTY.
11. ALLOW A 1/4" GAP BETWEEN THE EXTERIOR CLADDING, SIDING, BRICK, STUCCO OR STONE AND THE WINDOW FRAME ON ALL SIDES, EXCEPT VINYL J-CCHANNEL. THE GAP (EXPANSION JOINT) SHOULD BE FILLED WITH CORRECT SIZE BACKER ROD, THEN SEALED WITH A HIGH GRADE EXTERIOR SEALANT AND WILL NEED TO BE MAINTAINED.

CAUTION:

- USE OF SOLVENTS OR ACIDS WILL DAMAGE COMPONENTS OF THIS PRODUCT AND WILL LIMIT RIGHTS UNDER WARRANTY.
- FIN WINDOWS SHOULD BE FASTENED THROUGH THE FIN ONLY-FLANGE WINDOWS SHOULD BE ANCHORED ONLY THROUGH THE PROVIDED HOLES IN THE FRAME. FASTENING IN ANY OTHER PORTION MAY PERMANENTLY DAMAGE UNIT WHICH WILL LIMIT RIGHTS UNDER THE WARRANTY.
- IT IS THE RESPONSIBILITY OF THE OWNER, ARCHITECT, OR BUILDER TO SELECT CORRECT PRODUCTS TO BE IN COMPLIANCE WITH APPLICABLE LAWS AND BUILDING CODES.
- DO NOT STORE IN THE SUN OR LAY FLAT BEFORE OR DURING INSTALLATION.
- ANY PENETRATIONS (e.g. ALARM SENSORS) MADE THROUGH ANY PORTION OF ANY M.I., BETTERBILT OR CAPITOL PRODUCT MAY AFFECT RIGHTS UNDER THE MANUFACTURER'S WARRANTY.
- SOME LAWS AND BUILDING CODES REQUIRE SAFETY GLASS TO BE USED NEAR DOORS AND/OR FLOORS. UNLESS SPECIFICALLY ORDERED, THE MANUFACTURER'S NEW CONSTRUCTION WINDOWS ARE NOT MADE WITH SAFETY GLASS, AND, IF BROKEN, THE GLASS MAY SHATTER AND CAUSE INJURY.

THESE INSTRUCTIONS ARE MINIMUM REQUIREMENTS ONLY. CHECK STATE AND LOCAL CODE RESTRICTIONS FOR ADDITIONAL COMPLIANCE ON INSTALLATION AND OR FASTENING. IF UNIT HAS EXTERIOR TRIM (BRICK MOLD/J CHANNEL, ETC.) THE UNIT MUST BE SEALED BEHIND THE NAIL FIN. THE TRIM IS PROVIDED FOR AESTHETIC PURPOSES ONLY. INSTALLATION INTO MASONRY OR REPLACEMENT OPENINGS MUST BE SEALED TO THE OPENINGS USING AN APPROVED, PROPER METHOD. REFER TO AAMA 2400 AND/OR ASTM E2112 STANDARDS.

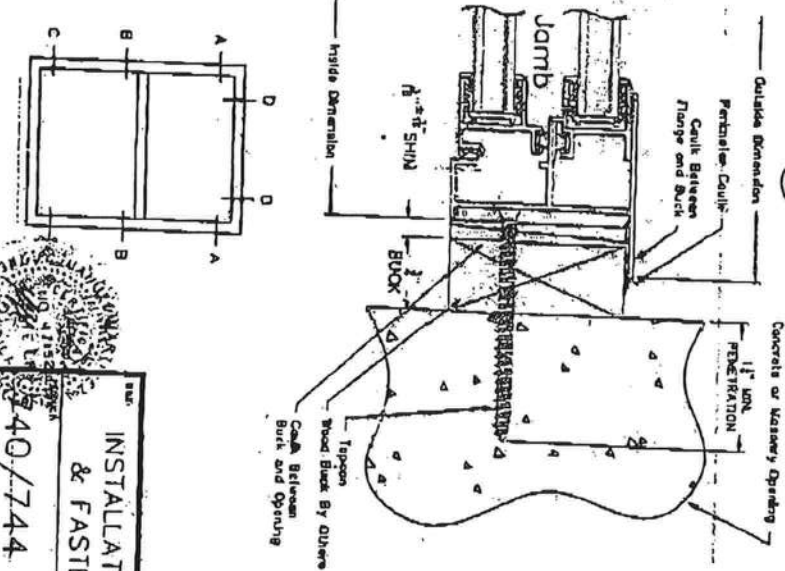
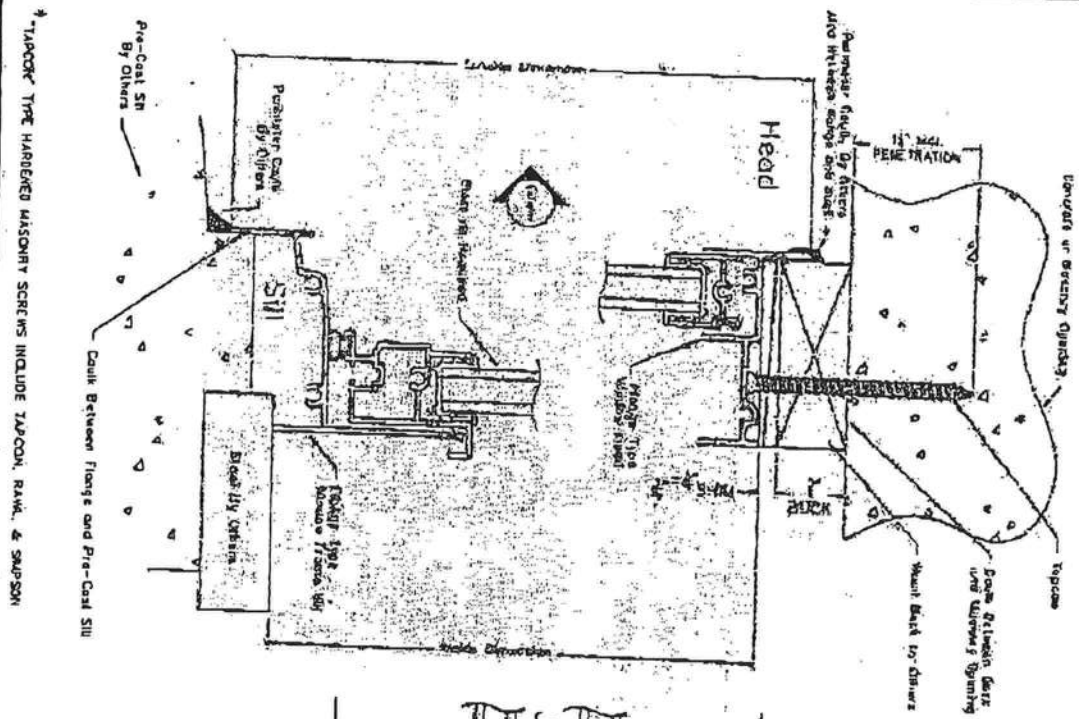
THESE INSTALLATION INSTRUCTIONS ARE PROVIDED FOR INFORMATION ONLY. NO REPRESENTATION AND WARRANTY IS MADE THAT THESE INSTRUCTIONS SET FORTH ALL OF THE INFORMATION NECESSARY FOR PROPER INSTALLATION OF THE PRODUCT. GIVEN THE VARIETY OF FIELD CONDITIONS, PRIMARY RESPONSIBILITY FOR PRODUCT INSTALLATION RESTS WITH THE INSTALLER. DO NOT PROCEED UNLESS YOU HAVE ADDRESSED THE FACTORS NECESSARY TO ACHIEVE WEATHER-TIGHT INSTALLATION OF A PROPERLY FUNCTIONING PRODUCT. MI WINDOWS AND DOORS, INC. ASSUMES NO LIABILITY FOR ANY PERSONAL INJURY OR PROPERTY DAMAGE INCURRED IN INSTALLATION. THESE INSTRUCTIONS, TOGETHER WITH THE PRODUCT SPECIFICATIONS AND WARRANTY SET FORTH THE ENTIRE LIABILITY OF MI WINDOWS AND DOORS, INC. WITH REGARD TO THE PRODUCT.



Revised 4/2004



1. Shown call required of each installation anchor as shown.
2. Anchor must be of a length to have 1 1/4" penetration into masonry or concrete.
3. Caulk between window flange and buck.
4. Caulk full perimeter of window.
5. If exact window size is not given, use anchor quantity for next larger window in chart.
6. Glass thickness will vary with window size and design load.
7. Letter designations on the topcon location chart indicate where anchors are to be installed using the elevation as a key. Should be filled with JB screws of sufficient length to provide min. 5/8" embedment into wood buck.



TOPCON * LOCATION CHART		FASTENER LOCATIONS	
CODE	WINDOW ID	NO. TO DP-15	DP-15 TO DP-20
12	18 1/8 x 25	C, D	C, D
13	18 1/8 x 37 1/8	C, D	C, D
14	18 1/8 x 49 5/8	C, D	C, D
15	18 1/8 x 62	C, D	C, D
16	18 1/8 x 71 1/4	C, D	C, D
17	25 1/2 x 25	C, D	C, D
18	25 1/2 x 37 1/8	C, D	C, D
19	25 1/2 x 49 5/8	C, D	C, D
20	25 1/2 x 62	C, D	C, D
21	25 1/2 x 71 1/4	C, D	C, D
22	35 x 25	C, D	C, D
23	35 x 37 1/8	C, D	C, D
24	35 x 49 5/8	C, D	C, D
25	35 x 62	C, D	C, D
26	35 x 71 1/4	C, D	C, D
27	52 1/8 x 25	C, D	C, D
28	52 1/8 x 37 1/8	C, D	C, D
29	52 1/8 x 49 5/8	C, D	C, D
30	52 1/8 x 62	C, D	C, D
31	52 1/8 x 71 1/4	C, D	C, D
32	52 1/8 x 80 1/4	C, D	C, D
33	52 1/8 x 90 1/4	C, D	C, D
34	52 1/8 x 100 1/4	C, D	C, D
35	52 1/8 x 110 1/4	C, D	C, D
36	52 1/8 x 120 1/4	C, D	C, D
37	52 1/8 x 130 1/4	C, D	C, D
38	52 1/8 x 140 1/4	C, D	C, D
39	52 1/8 x 150 1/4	C, D	C, D
40	52 1/8 x 160 1/4	C, D	C, D
41	52 1/8 x 170 1/4	C, D	C, D
42	52 1/8 x 180 1/4	C, D	C, D
43	52 1/8 x 190 1/4	C, D	C, D
44	52 1/8 x 200 1/4	C, D	C, D
45	52 1/8 x 210 1/4	C, D	C, D
46	52 1/8 x 220 1/4	C, D	C, D
47	52 1/8 x 230 1/4	C, D	C, D
48	52 1/8 x 240 1/4	C, D	C, D
49	52 1/8 x 250 1/4	C, D	C, D
50	52 1/8 x 260 1/4	C, D	C, D
51	52 1/8 x 270 1/4	C, D	C, D
52	52 1/8 x 280 1/4	C, D	C, D
53	52 1/8 x 290 1/4	C, D	C, D
54	52 1/8 x 300 1/4	C, D	C, D
55	52 1/8 x 310 1/4	C, D	C, D
56	52 1/8 x 320 1/4	C, D	C, D
57	52 1/8 x 330 1/4	C, D	C, D
58	52 1/8 x 340 1/4	C, D	C, D
59	52 1/8 x 350 1/4	C, D	C, D
60	52 1/8 x 360 1/4	C, D	C, D
61	52 1/8 x 370 1/4	C, D	C, D
62	52 1/8 x 380 1/4	C, D	C, D
63	52 1/8 x 390 1/4	C, D	C, D
64	52 1/8 x 400 1/4	C, D	C, D
65	52 1/8 x 410 1/4	C, D	C, D
66	52 1/8 x 420 1/4	C, D	C, D
67	52 1/8 x 430 1/4	C, D	C, D
68	52 1/8 x 440 1/4	C, D	C, D
69	52 1/8 x 450 1/4	C, D	C, D
70	52 1/8 x 460 1/4	C, D	C, D
71	52 1/8 x 470 1/4	C, D	C, D
72	52 1/8 x 480 1/4	C, D	C, D
73	52 1/8 x 490 1/4	C, D	C, D
74	52 1/8 x 500 1/4	C, D	C, D
75	52 1/8 x 510 1/4	C, D	C, D
76	52 1/8 x 520 1/4	C, D	C, D
77	52 1/8 x 530 1/4	C, D	C, D
78	52 1/8 x 540 1/4	C, D	C, D
79	52 1/8 x 550 1/4	C, D	C, D
80	52 1/8 x 560 1/4	C, D	C, D
81	52 1/8 x 570 1/4	C, D	C, D
82	52 1/8 x 580 1/4	C, D	C, D
83	52 1/8 x 590 1/4	C, D	C, D
84	52 1/8 x 600 1/4	C, D	C, D
85	52 1/8 x 610 1/4	C, D	C, D
86	52 1/8 x 620 1/4	C, D	C, D
87	52 1/8 x 630 1/4	C, D	C, D
88	52 1/8 x 640 1/4	C, D	C, D
89	52 1/8 x 650 1/4	C, D	C, D
90	52 1/8 x 660 1/4	C, D	C, D
91	52 1/8 x 670 1/4	C, D	C, D
92	52 1/8 x 680 1/4	C, D	C, D
93	52 1/8 x 690 1/4	C, D	C, D
94	52 1/8 x 700 1/4	C, D	C, D
95	52 1/8 x 710 1/4	C, D	C, D
96	52 1/8 x 720 1/4	C, D	C, D
97	52 1/8 x 730 1/4	C, D	C, D
98	52 1/8 x 740 1/4	C, D	C, D
99	52 1/8 x 750 1/4	C, D	C, D
100	52 1/8 x 760 1/4	C, D	C, D

INSTALLATION INSTRUCTIONS
& FASTENER SCHEDULE

40/744 SINGLE HUNG

INST 740

Installation Instructions For New Construction Single Hung, Double Hung, Sliding And Picture Windows

Window Opening

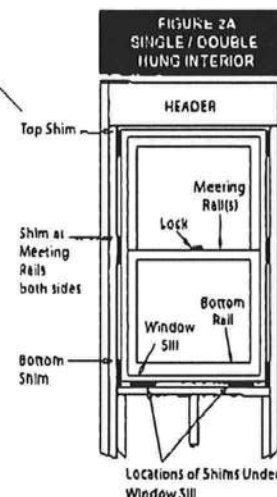
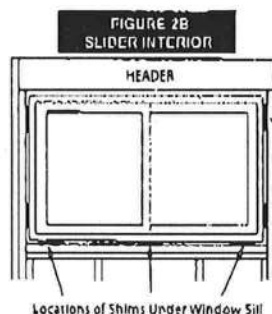
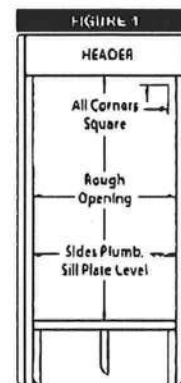
The rough opening must be plumb, level, square and $1/2"$ larger than the window size in width and height, not including the nailing fins (See fig.1). Close and lock the sash to aid in keeping the window square during installation. **Note:** Install sill flashing before the window is installed (refer to "Flashing" below). Apply a $3/8"$ continuous bead of silicone caulking to the interior surface of the nailing fin, covering the holes in the fin, to seal the window's fin to the sheathing or house wrap. If the rough opening is larger than the window unit by more than $1/2"$, also apply the caulk to the sheathing or house wrap making sure the bead is no more than $1/4"$ from the edge of the rough opening, so that it is covered by the nailing fin when the window is installed.

Setting Shims

The sill of the window must be supported in a straight and level position, with shims at all locations where the jamb, intermediate jamb, or the stiles of a slider meet the sill. (See fig. 2A & 2B) Place $1/4"$ shims on the sill plate of the window opening spaced as described above. Multiple twin or triple windows should have a shim under each mullion, intermediate jamb or the center stiles of sliders. (See fig. 2A & 2B)

Setting Window

Set window on the shims and adjust side clearance to be equal on both sides. Tack one upper corner of the nailing fin to keep the window in place. Check the sill with a level and adjust the shims as required to level sill. Readjust side clearance if necessary. Shims must be cut to exact thickness to fit snug and not fall out. Do not force shims into place, possibly pushing the sill upward out of level. Shim both sides of window as needed to assure window is plumb and margins are equal. (see fig. 2A & 2B) Measure window diagonally, from bottom left corner to top right corner and from bottom right corner to top left corner to insure it is square. If the above has been done correctly the width across the top, middle and bottom of the window will measure the same. The wool pile clearance between the sash stile and jamb mainframe should be equal. The meeting rail and lock rail should align evenly, with parallel sight lines. The window locks should engage smoothly.



Nailing Window Fins

Use stainless or galvanized steel roofing nails, long enough to penetrate sheathing a minimum of $1"$.

Nail the entire perimeter of the nailing fin to the sheathing using every other slotted hole at minimum on single windows. Multiple windows twins, & triples should be nailed in every slotted hole.

Nail the fin snug but do not "sink" the nails. Nailing should be just tight enough to hold window but not stop the movement of the "Frame-Work" underneath during expansion and contraction. Make sure the head and sill are NOT crowned up or down, or the jambs bowed in or out.

Flashing

Use self adhesive flexible flashing a minimum of $4"$ wide, approved for use on vinyl, wood & other substances such as house wrap. This flashing material must meet a minimum water resistance of 24 hours in accordance with ASTM-D779.

(See fig. 3) Sill flashing should already be applied prior to window installation and extend beyond the sides of the window nailing fin at least $2"$. Now apply jamb flashing over the jamb-nailing fin, continuing over and beyond the sill flashing, $2"$ below. Apply head flashing similarly extending $2"$ past either side of the jamb flashing, to complete the window flashing detail.

Install batt insulation between the window and rough opening. It is very important that these openings are not "over stuffed" and warp the frame. Do NOT use expanding foam. Doing so will void warranties.

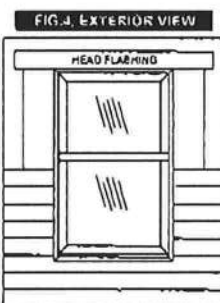
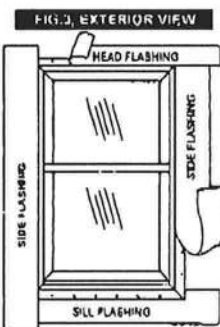
If the exterior finish is brick, stone or stucco, make sure to leave a $1/4"$ gap around the entire window to allow for the expansion of materials.

Cautions

- Remove or cut ventilation holes in plastic shipping wrap if windows are not installed immediately.
- Do not lay windows flat or store in the sun. The heat will shrink the plastic wrapping and warp the frame.
- Do not caulk or plug weep holes.
- Do not drill into or through the sill of the window.
- Protect vinyl sill from traffic and damage.
- Do not lift window by top of frame, only by jambs.
- Protect the window during construction and plastering.

Please call
our hot-line
1(800)-234-4228
for any installation
help that you
might need.

Note: The manufacturer's warranty can be voided if these instructions are not followed. If special applications are needed during the installation, you must contact the manufacturer for approval.





**COLUMBIA COUNTY BUILDING DEPARTMENT
RESIDENTIAL CHECK LIST REQUIREMENTS**

6-25-09

**MINIMUM PLAN REQUIREMENTS FOR THE
FLORIDA BUILDING CODE RESIDENTIAL 2007 EFFECTIVE 1 MARCH 2009 & 2009
SUPPLEMENTS EFFECTIVE 1 MARCH 2009, ONE (1) AND TWO (2) FAMILY DWELLINGS
with Supplements and Revision, OF THE NATIONAL ELECTRICAL 2008**

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

**ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current 2007
FLORIDA BUILDING CODES RESIDENTIAL EFFECTIVE 1 MARCH 2009 & 2009
SUPPLEMENTS EFFECTIVE 1 MARCH 2009. ALL PLANS OR DRAWINGS SHALL
PROVIDE 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 SPEEDS ARE PER
FIGURE R301.2(4) of the FLORIDA BUILDING CODES RESIDENTIAL (Florida Wind
speed map) SHALL BE USED.**

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

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

**GENERAL REQUIREMENTS:
APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL**

Items to Include-
Each Box shall be
Circled as
Applicable

		Yes	No	N/A
1	Two (2) complete sets of plans containing the following:	<input checked="" type="checkbox"/>		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void	<input checked="" type="checkbox"/>		
3	Condition space (Sq. Ft.)			
	Total (Sq. Ft.) under roof			

Designers name and signature shall be on all documents and a licensed architect or engineer, signature and official embossed seal shall be affixed to the plans and documents as per the FLORIDA BUILDING CODES RESIDENTIAL R101.2.1

Site Plan information including:

4	Dimensions of lot or parcel of land			
5	Dimensions of all building set backs			
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.			
7	Provide a full legal description of property.			

Wind-load Engineering Summary, calculations and any details required

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
8	Plans or specifications must show compliance with FBCR Chapter 3	IIII	IIII	IIII
		YES	NO	N/A
9	Basic wind speed (3-second gust), miles per hour	✓		
10	(Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated)	✓		
11	Wind importance factor and nature of occupancy	✓		
12	The applicable internal pressure coefficient, Components and Cladding	✓		
13	The design wind pressure in terms of psf (kN/m ²), to be used for the design of exterior component, cladding materials not specifically designed by the registered design professional.	✓		

Elevations Drawing including:

14	All side views of the structure	✓		
15	Roof pitch	✓		
16	Overhang dimensions and detail with attic ventilation	✓		
17	Location, size and height above roof of chimneys	✓		
18	Location and size of skylights with Florida Product Approval	✓		
18	Number of stories			
20A	Building height from the established grade to the roofs highest peak	✓		

Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	✓		
21	Raised floor surfaces located more than 30 inches above the floor or grade	✓		
22	All exterior and interior shear walls indicated	✓		
23	Shear wall opening shown (Windows, Doors and Garage doors)			
24	Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBCR 613.2 where the opening of an operable window is located more than 72 inches above the finished grade or surface below, the lowest part of the clear opening of the window shall be a minimum of 24 inches above the finished floor of the room in which the window is located. Glazing between the floor and 24 inches shall be fixed or have openings through which a 4-inch-diameter sphere cannot pass.	✓		
25	Safety glazing of glass where needed	✓		
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 of FBCR)	✓		
27	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails	✓		
28	Identify accessibility of bathroom (see FBCR SECTION 322)	✓		

All materials placed within opening or onto/into exterior walls, soffits or roofs shall have Florida product approval number and mfg. installation information submitted with the plans (see Florida product approval form)

<p align="center">GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</p>	<p align="center">Items to Include- Each Box shall be Circled as Applicable</p>
--	---

FBCR 403: Foundation Plans

		YES	NO	N/A
29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	✓		
30	All posts and/or column footing including size and reinforcing	✓		
31	Any special support required by soil analysis such as piling.	✓		
32	Assumed load-bearing value of soil Pound Per Square Foot			
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type) For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an grounding electrode system. Per the National Electrical Code article 250.52.3	✓		

FBCR 506: CONCRETE SLAB ON GRADE

34	Show Vapor retarder (6mil. Polyethylene with joints lapped 6 inches and sealed)			
35	Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports			

FBCR 320: PROTECTION AGAINST TERMITES

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or Sub mit other approved termite protection methods. Protection shall be provided by registered termiticides	✓		
----	--	---	--	--

FBCR 606: Masonry Walls and Stem walls (load bearing & shear Walls)

37	Show all materials making up walls, wall height, and Block size, mortar type	✓		
38	Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement	✓		

Metal frame shear wall and roof systems shall be designed, signed and sealed by Florida Prof. Engineer or Architect

Floor Framing System: First and/or second story

39	Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer	✓		
40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers			
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers			
42	Attachment of joist to girder			
43	Wind load requirements where applicable	✓		
44	Show required under-floor crawl space			

45	Show required amount of ventilation opening for under-floor spaces	✓		
46	Show required covering of ventilation opening	✓		
47	Show the required access opening to access to under-floor spaces	✓		
48	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges & interior of the areas structural panel sheathing			
49	Show Draftstopping, Fire caulking and Fire blocking			
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309			
51	Provide live and dead load rating of floor framing systems (psf).			

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	✓		
53	Fastener schedule for structural members per table FBCR 602.3 are to be shown	✓		
54	Show Wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing	✓		
55	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems	✓		
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FBCR Table 502.5 (1)	✓		
57	Indicate where pressure treated wood will be placed	✓		
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	✓		
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	✓		

FBCR :ROOF SYSTEMS:

60	Truss design drawing shall meet section FBCR 802.10 Wood trusses			
61	Include a layout and truss details, signed and sealed by Florida Professional Engineer			
62	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters			
63	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details			
64	Provide dead load rating of trusses			

FBCR 802:Conventional Roof Framing Layout

65	Rafter and ridge beams sizes, span, species and spacing			
66	Connectors to wall assemblies' include assemblies' resistance to uplift rating			
67	Valley framing and support details			
68	Provide dead load rating of rafter system			

FBCR Table 602.3(2) & FBCR 803 ROOF SHEATHING

69	Include all materials which will make up the roof decking, identification of structural panel sheathing, grade, thickness			
70	Show fastener Size and schedule for structural panel sheathing on the edges & intermediate areas			

FBCR ROOF ASSEMBLIES FRC Chapter 9

71	Include all materials which will make up the roof assemblies covering			
72	Submit Florida Product Approval numbers for each component of the roof assemblies covering			

FBCR Chapter 11 Energy Efficiency Code for residential building

Residential construction shall comply with this code by using the following compliance methods in the FBCR chapter 11 Residential buildings compliance methods. **Two of the required forms are to be submitted, N1100.1.1.1 As an alternative to the computerized Compliance Method A, the Alternate Residential Point System Method hand calculation, Alternate Form 600A, may be used. All requirements specific to this calculation are located in Sub appendix C to Appendix G. Buildings complying by this alternative shall meet all mandatory requirements of this chapter. Computerized versions of the Alternate Residential Point System Method shall not be acceptable for code compliance.**

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
73	Show the insulation R value for the following areas of the structure	✓		
74	Attic space	✓		
75	Exterior wall cavity	✓		
76	Crawl space	✓		

HVAC information

77	Submit two copies of a Manual J sizing equipment or equivalent computation study			
78	Exhaust fans shown in bathrooms Mechanical exhaust capacity of 50 cfm intermittent or 20 cfm continuous required	✓		
79	Show clothes dryer route and total run of exhaust duct			

Plumbing Fixture layout shown

80	All fixtures waste water lines shall be shown on the foundation plan	✓		
81	Show the location of water heater	✓		

Private Potable Water

82	Pump motor horse power	1 hp	✓		
83	Reservoir pressure tank gallon capacity	42 GPM	✓		
84	Rating of cycle stop valve if used	45/65	✓		

Electrical layout shown including

85	Show Switches, receptacles outlets, lighting fixtures and Ceiling fans	✓		
86	Show all 120-volt, single phase, 15- and 20-ampere branch circuits outlets required to be protected by Ground-Fault Circuit Interrupter (GFCI) Article 210.8 A	✓		
87	Show the location of smoke detectors & Carbon monoxide detectors	✓		
88	Show service panel, sub-panel, location(s) and total ampere ratings	✓		
89	On the electrical plans identify the electrical service overcurrent protection device for the main electrical service. This device shall be installed on the exterior of structures to serve as a disconnecting means for the utility company electrical service. Conductors used from the exterior disconnecting means to a panel or sub panel shall have four-wire conductors, of which one conductor shall be used as an equipment ground. Indicate if the utility company service entrance cable will be of the overhead or underground type. For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an Grounding electrode system. Per the National Electrical Code article 250.52.3			
90	Appliances and HVAC equipment and disconnects	✓		
91	Show all 120-volt, single phase, 15- and 20-ampere branch circuits supplying outlets installed in dwelling unit family rooms, dining rooms, living rooms, parlors, libraries, dens, bedrooms, sunrooms, recreation rooms, closets, hallways, or similar rooms or areas shall be protected by a listed Combination arc-fault circuit interrupter, Protection device.			

Disclosure Statement for Owner Builders *If you as the applicant will be acting as an owner/builder under section 489.103(7) of the Florida Statutes, submit the required owner builder disclosure statement form.*

Notice Of Commencement

A notice of commencement form **recorded** in the Columbia County Clerk Office is required to be filed with the building department Before Any Inspections can be preformed.

<p align="center">GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</p>	<p align="center">Items to Include- Each Box shall be Circled as Applicable</p>
---	---

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

		YES	NO	N/A
92	Building Permit Application A current Building Permit Application form is to be completed and submitted for all residential projects	✓		
93	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	✓		
94	Environmental Health Permit or Sewer Tap Approval A copy of a approved Columbia County Environmental Health (386) 758-1058			
95	City of Lake City A permit showing an approved waste water sewer tap		✓	✓
96	Toilet facilities shall be provided for all construction sites			
97	Town of Fort White (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.		✓	✓

98	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 a 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 8.5.2 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 8.5.3 of the Columbia County Land Development Regulations	✓		
99	CERTIFIED FINISHED FLOOR ELEVATIONS will be required on any project where the base flood elevation (100 year flood) has been established	✓		
100	A development permit will also be required. Development permit cost is \$50.00	✓		
101	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.	✓		
102	911 Address: If the project is located in an area where a 911 address has not been issued, then application for a 911 address must be applied for and received through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125	✓		

Section R101.2.1 of the Florida Building Code Residential:

The provisions of Chapter 1, Florida Building Code, Building shall govern the administration and enforcement of the Florida Building Code, Residential.

Section 105 of the Florida Building Code defines the:

Time limitation of application.

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

Single-family residential dwelling.

Section 105.3.4 A building permit for a single-family residential dwelling must be issued within 30 working days of application therefor unless unusual circumstances require a longer time for processing the application or unless the permit application fails to satisfy the Florida Building Code or the enforcing agency's laws or ordinances.

Permit intent.

Section 105.4.1: A permit issued shall be constructed to be a license to proceed with the work and not as authority to violate, cancel, alter or set aside any of the provisions of the technical codes, nor shall issuance of a permit prevent the building official from thereafter requiring a correction of errors in plans, construction or violations of this code. Every permit issued shall become invalid unless the work authorized by such permit is commenced within six months after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of six months after the time the work is commenced.

If work has commenced.

Section 105.4.1.1: If work has commenced and the permit is revoked, becomes null and void, or expires because of lack of progress or abandonment, a new permit covering the proposed construction shall be obtained before proceeding with the work.

New Permit.

Section 105.4.1.2: If a new permit is not obtained within 180 days from the date the initial permit became null and void, the building official is authorized to require that any work which has been commenced or completed be removed from the building site. Alternately, a new permit may be issued on application, providing the work in place and required to complete the structure meets all applicable regulations in effect at the time the initial permit became null and void and any regulations which may have become effective between the date of expiration and the date of issuance of the new permit.

Work Shall Be:

Section 105.4.1.3: Work shall be considered to be in active progress when the permit has received an approved inspection within 180 days. This provision shall not be applicable in case of civil commotion or strike or when the building work is halted due directly to judicial injunction, order or similar process.


The Fee:

Section 105.4.1.4: The fee for renewal reissuance and extension of a permit shall be set forth by the administrative authority.

When the submitted application is approved for permitting the applicant will be notified by phone as to the date and time a building permit will be prepared and issued by the Columbia County Building & Zoning Department

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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Florida Limited Liability Company

MARYLAND LANE LLC

Filing Information

Document Number	L11000017584
FEI/EIN Number	NONE
Date Filed	02/10/2011
State	FL
Status	ACTIVE
Effective Date	02/10/2011

Principal Address

498 SW MANATEE TERRACE
FORT WHITE FL 32038

Mailing Address

498 SW MANATEE TERRACE
FORT WHITE FL 32038

Registered Agent Name & Address

BARCIA, PAUL P SR
498 SW MANATEE TERRACE
FORT WHITE FL 32038 US

Manager/Member Detail

Name & Address	Title
BARCIA, PAUL P SR. 498 SW MANATEE TERRACE FORT WHITE FL 32038	MGRM
BARCIA, ANN R 498 SW MANATEE TERRACE FORT WHITE FL 32038	MGRM
BARCIA, PAUL P JR. 20303 RALSTON ST. ORLANDO FL 32833	MGR
BARCIA, PHILLIP S 220 NW 2ND ST. HIGH SPRINGS FL 32643	MGR

Annual Reports

No Annual Reports Filed

Document Images

[02/10/2011 -- Florida Limited Liability](#)

Troy Crews

From: ppbarcia@windstream.net
Sent: Wednesday, May 25, 2011 6:23 AM
To: Troy Crews
Subject: RE: RE: Paul Barcia residence

approximately 5 feet - no additional fill. Piers in the center of stem wall and piers on the outside of the porch. I'll be traveling back to Florida today. You can reach me on cell 386-365-1537. Paul

----- Troy Crews <troy_crews@columbiacountyfla.com> wrote:

> Mr. Barcia to achieve the required elevation for floor level how high are you going to go with the stem wall I understand that there is only allowed so much fill dirt per zero rise package thanks Troy.

>

> -----Original Message-----

> From: ppbarcia@windstream.net [mailto:ppbarcia@windstream.net]

> Sent: Friday, May 20, 2011 12:48 PM

> To: Troy Crews

> Subject: Fwd: RE: Paul Barcia residence

>

>

> > From: "Michael Harmon" <gbsmph2@gmail.com>

> > To: <ppbarcia@windstream.net>

> > Subject: RE: Paul Barcia residence

> > Date: Fri, 20 May 2011 12:02:48 -0400

> >

> > Product Approval attached

> >

> > Michael Harmon

> > Gilchrist Building Supply Inc.

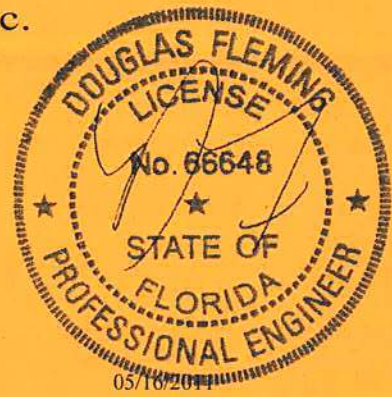
> > Bus.352.463.2738

> > Fax.352.463.7203

> >

ITW Building Components Group, Inc.

1950 Marley Drive Haines City, FL 33844
Florida Engineering Certificate of Authorization Number: 0 278
Florida Certificate of Product Approval # FL1999
Page 1 of 1 Document ID: IUBZ487-Z0216104104



Truss Fabricator: Anderson Truss Company
Job Identification: Q-623--Fill in later PAUL BARCIA -- , **
Truss Count: 5
Model Code: Florida Building Code 2007 and 2009 Supplement
Truss Criteria: FBC2007Res/TPI-2002(STD)
Engineering Software: Alpine Software, Version 9.05.
Structural Engineer of Record: The identity of the structural EOR did not exist as of
Address: the seal date per section 61G15-31.003(5a) of the FAC
Minimum Design Loads: Roof - 40.0 PSF @ 1.25 Duration
Floor - N/A
Wind - 110 MPH ASCE 7-05 -Closed

Notes:

1. Determination as to the suitability of these truss components for the structure is the responsibility of the building designer/engineer of record, as defined in ANSI/TPI 1
2. The drawing date shown on this index sheet must match the date shown on the individual truss component drawing.
3. As shown on attached drawings; the drawing number is preceded by: HCUSR487

Details: BRCLBSUB-A1101505-GBLLETIN-

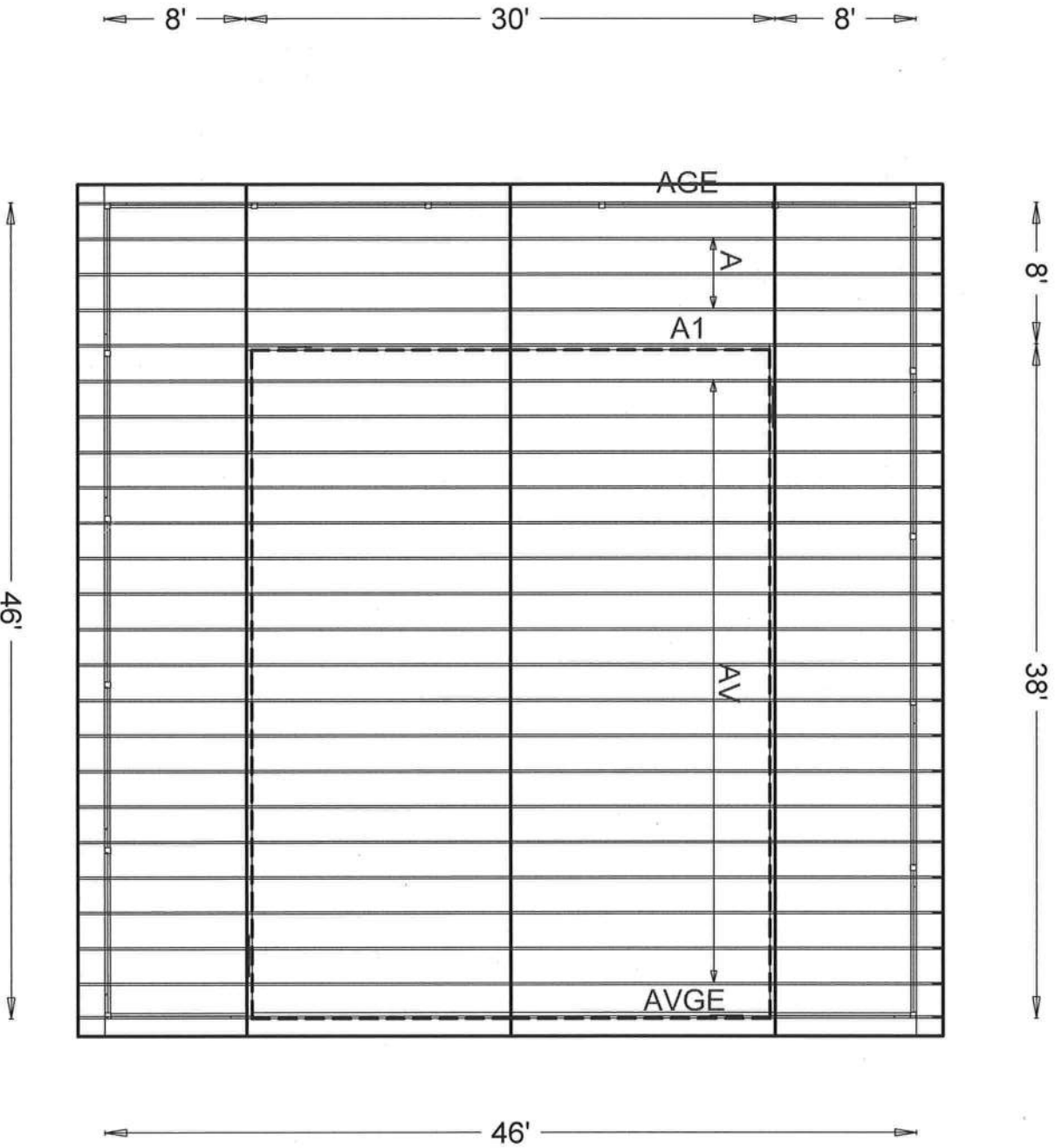
Douglas Fleming
-Truss Design Engineer-

1950 Marley Drive
Haines City, FL 33844

#	Ref	Description	Drawing#	Date
1	37757--A		11136003	05/16/11
2	37758--A1		11136004	05/16/11
3	37759--AGE		11136005	05/16/11
4	37760--AV		11136007	05/16/11
5	37761--AVGE		11136006	05/16/11



Roof Plane Sheathing Area = 2550 sq. ft



PAUL BARCIA

JOB DESCRIPTION:: Fill in later
/: PAUL BARCIA

JOB NO:
11-104

PAGE NO:
1 OF 1

THIS HAS BEEN PREPARED FROM COMPUTER INPUT (1) AND 2 DIMENSIONAL SKETCHES BY THE SAME

110 mph wind, 15.00 ft mean hgt, ASCE 7-05, CLOSED bldg, not located within 6.50 ft from roof edge, CAT II, EXP B, wind TC DL-5.0 psf, wind BC DL=5.0 psf. Iw=1.00 GCPI(+/-)=0.18

Wind reactions based on MWFRS pressures.

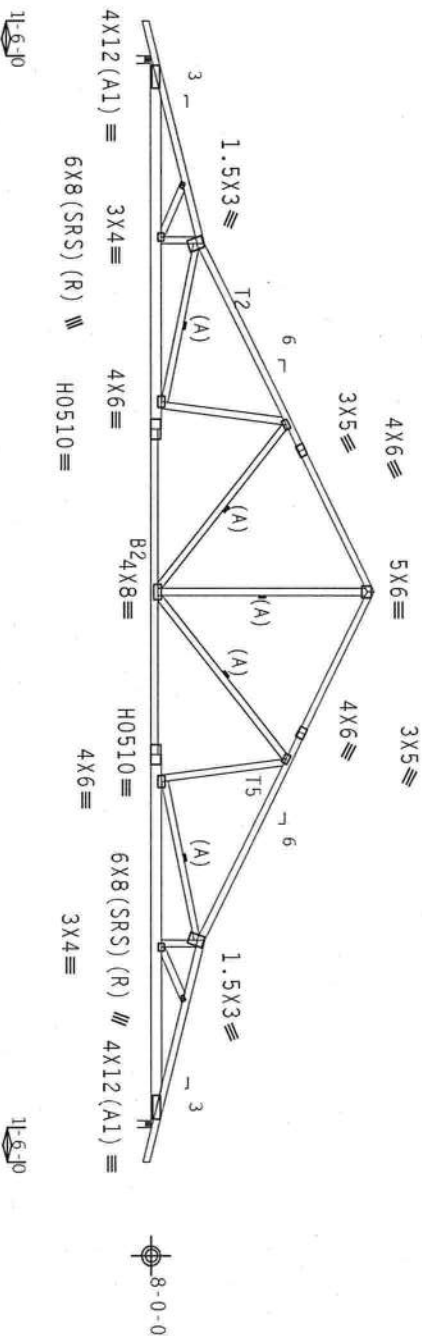
Truss passed check for 20 psf additional bottom chord live load in

0
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P
Q
R
S
T
U
V
W
X
Y
Z

Deflection meets L/240 live and L/180 total load.

WARNING: Furnish a copy of this DWG to the installation contractor.

WARNING: Furnish a copy of this DWG to the installation contractor. Special care must be taken during handling, shipping and installation of trusses. See "WARNING" note below.



REF ID: A66888 U-194 W-3.5"

Design Crit: FBC2007Res/TPI-2002(STD)
FT/RT=10%(0%)/0(0)

9.05.03.0319.17 QTY

FL/-/4/-/-/R/-

Scale = .125" / Ft.

IMPORTANT
FURNISH THIS DESIGN TO ALL CONTRACTORS INCLUDING INSTALLERS.

Insurers requiring extreme care in fabricating, handling, installation and bracing. Refer to a qualified professional engineer for design and construction details. For more information, consult the following: the latest edition of BCSI (Building Component Safety Information, by TPI and NICA) for design and construction details; the latest edition of the International Building Code for building practices noted otherwise; top chord shall have properly attached structural sheathing and bottom chord shall have a properly attached rigid ceiling. Locations for permanent lateral restraint web shall have bracing installed per BCSI sections 8.37 or B10, as applicable.



ITW Building Components Group Inc.

Haines City, FL 33844

FL COA #0 278

The responsibility of the Building Designer per ANSI/IFP 1 Sec.2. For more information see: general notes page: ITH-BG0; www.1stnbg.com; IPI: www.ipinist.org; AICA: www.sbcindustry.com; ICC: www.iccsafe.org

FLORIDA PROFESSIONAL ENGINEER

STATE OF FLORIDA

No. 66648

Douglas Fleming

LICENSE

03.0319.17

05/16/2011

FL/-/4/-/-R/-		Scale = .125"/Ft.
TC LL	20.0 PSF	REF R487-- 37757
TC DL	10.0 PSF	DATE 05/16/11
BC DL	10.0 PSF	DRW HCUSR487 11136003
BC LL	0.0 PSF	HC-ENG JB/DF
TOT. LD.	40.0 PSF	SEGN- 202481
DUR. FAC.	1.25	
SPACING	24.0"	JREF- 1UBZ487_202

THIS DWG PREPARED FROM COMPUTER INPUT (LOADS & DIMENSIONS) SUBMITTED BY TRUSS MFR.

110 mph wind, 15.00 ft mean hgt, ASCE 7-05, CLOSED bldg, not located within 6.50 ft from roof edge, CAT 11, EXP B, wind TC DL=5.0 psf, wind BC DL=5.0 psf. $I_w=1.00$ GCPI (+/-)=0.18

Wind reactions based on MMFRS pressures.

Bottom chord checked for 10.00 psf non-concurrent live load.

WARNING: Furnish a copy of this DWG to the installation contractor.

of trusses. See "WARNING" note below.



No. 95543

Haines City, FL 33844
FL COA #0278

****IMPORTANT**** BRITISH THIS DESIGN TO ALL CONTRACTORS INCLUDING INSULERS.

Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to the following information for details of the correct handling, shipping, installation and bracing practices prior to performing these functions. Insulators shall provide temporary bracing per the drawings and specifications. Insulators shall provide lateral bracing and bottom chord bracing for all trusses noted otherwise. Top chord shall have properly attached structural sheathing and bottom chord shall have bracing installed per BCSI sections B3, B7 or B10 as applicable.

ITS Building Components Group, Inc. (IBCG) shall not be responsible for any deviation from the design and specifications of the trusses. Insulators shall be responsible for the proper handling of any failure to build the trusses in conformance with ASCE/IBC or for handling, shipping, installing or bracing of trusses. Apply plates to each face of truss and position as shown above and on the joint details. Unless noted otherwise, refer to drawings IBC-2 for standard plate positions. A seal on the drawing or cover page listing this drawing, indicates acceptance of professional engineering responsibility for the design and use of the trusses. Insulators shall be responsible for any structural failure or damage to the building system. For additional information, contact IBCG at 1-800-368-4444 or email at info@ibcgroup.com. For ASCE/IBC information, contact ASCE/IBC at 1-800-541-2903 or email at info@ibcgroup.com. For general notes page: IBC-BIG: www.ibcgroup.com; IPI: www.thirdparty.com; IBCA: www.thirdparty.com; OCC: www.occstar.org

05/16/2011

TC LL	20.0 PSF	REF	R487-- 37758
TC DL	10.0 PSF	DATE	05/16/11
BC DL	10.0 PSF	DRW	HCSR487 11136004
BC LL	0.0 PSF	HC-ENG	JB/DF
TOT.LD.	40.0 PSF	SEON-	202454
DUR.FAC.	1.25		
SPACING	24.0"	REF-	1UBZ487_Z02

Top chord 2x4 SP #2 Dense
Bot chord 2x4 SP #2 Dense
Webs 2x4 SP #3

:Stack Chord SC1 2x4 SP #2 Dense::Stack Chord SC2 2x4 SP #2 Dense:

Roof overhang supports 2.00 psf soffit load.

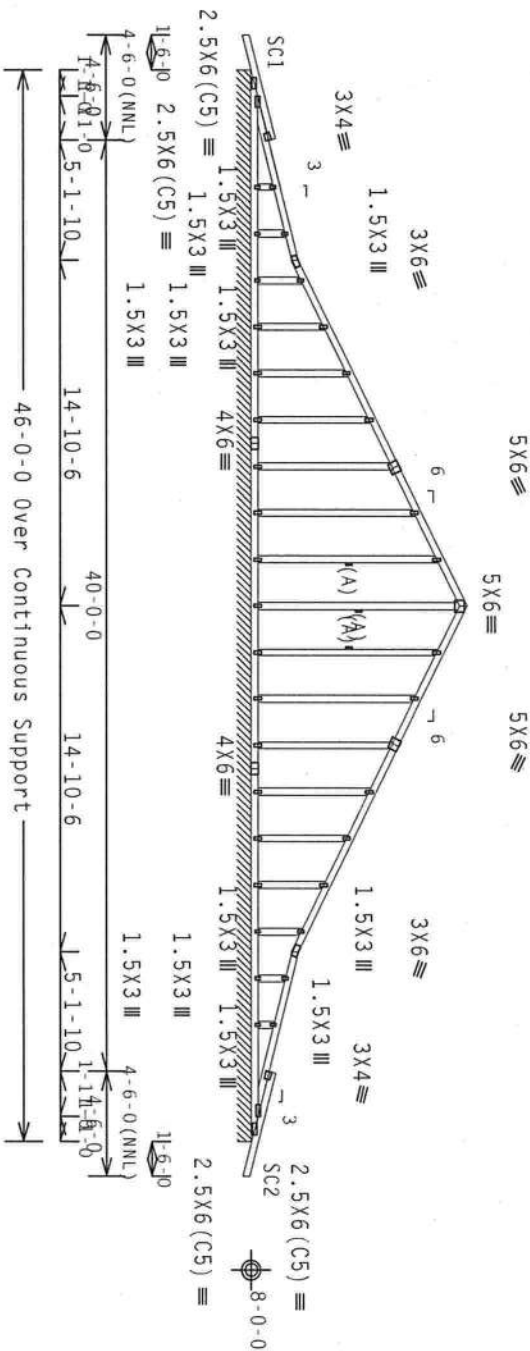
See DWGS A11015050109 & GBLLETT10109 for more requirements.

Stacked top chord must NOT be notched or cut in area (NML). Dropped top chord braced at 24" o.c. intervals. Attach stacked top chord (SC) to dropped top chord in notchable area using 3x4 tie-plates 24" o.c. Center plate on stacked/dropped chord interface, plate length perpendicular to chord length. Splice top chord in notchable area using 3x6.

WARNING: Furnish a copy of this DWG to the installation contractor. Special care must be taken during handling, shipping and installation of trusses. See "WARNING" note below.

110 mph wind, 15.00 ft mean hgt, ASCE 7-05, CLOSED bldg, located anywhere in roof, CAT II, EXP B, wind TC DL-5.0 psf, wind BC DL-5.0 psf. 1w-1.00 GCPI (+/-)-0.18
Wind reactions based on MMFRS pressures.
Truss spaced at 24.0" OC designed to support 1-0-0 top chord outlookers. Cladding load shall not exceed 10.00 PSF. Top chord must not be cut or notched.

(A) Continuous lateral bracing equally spaced on member.
Bottom chord checked for 10.00 psf non-concurrent live load.
Deflection meets L/240 live and L/180 total load.



R-126 PLF U-8 PLF W-46-0-0
RL-4/-4 PLF

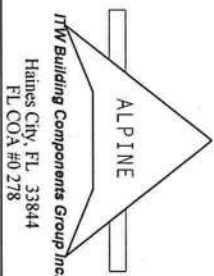
Note: All Plates Are 1.5X4 Except As Shown.

PLT TYP. Wave

WARNING READ AND FOLLOW ALL NOTES ON THIS SHEET.

FURNISH THIS DESIGN TO ALL CONTRACTORS INCLUDING INSTALLERS.
Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to the latest edition of BCSI (Building Component Safety Information, by IPI and NICA) for details, unless noted otherwise. Top chord shall have properly attached structural sheathing and bottom chord shall have a properly attached rigid ceiling. Locations shown for permanent lateral restraint. Wood shall have bracing installed per BCSI sections 89, 97 or 910, as applicable.

any failure to build the truss in accordance with ANSI/APA 1, or for handling, shipping, installing, or bracing, shall be the responsibility of the contractor. ITW Building Components Group Inc. (ITWBCG) shall not be responsible for any deviation from the details, unless noted otherwise. Refer to drawings 100-2 for standard plate positions. A seal on the drawing or cover page listing this design shown, indicates acceptance of professional engineering responsibility solely for the design shown. The suitability and use of this design for any structure is the responsibility of the building designer per ANSI/TPI 1 Sec. 2. For more information see: general notes page: ITH-BCSI: www.ithbcg.com; IPI: www.ipiinc.org; NICA: www.shcindustry.com; ITC: www.itccare.org



ITW Building Components Group Inc.
Haines City, FL 33844
FL COA #0278

FL-14/-1/-R/-
TC LL 20.0 PSF
TC DL 10.0 PSF
BC DL 10.0 PSF
BC LL 0.0 PSF
TOT. LD. 40.0 PSF
DUR. FAC. 1.25
SPACING 24.0"

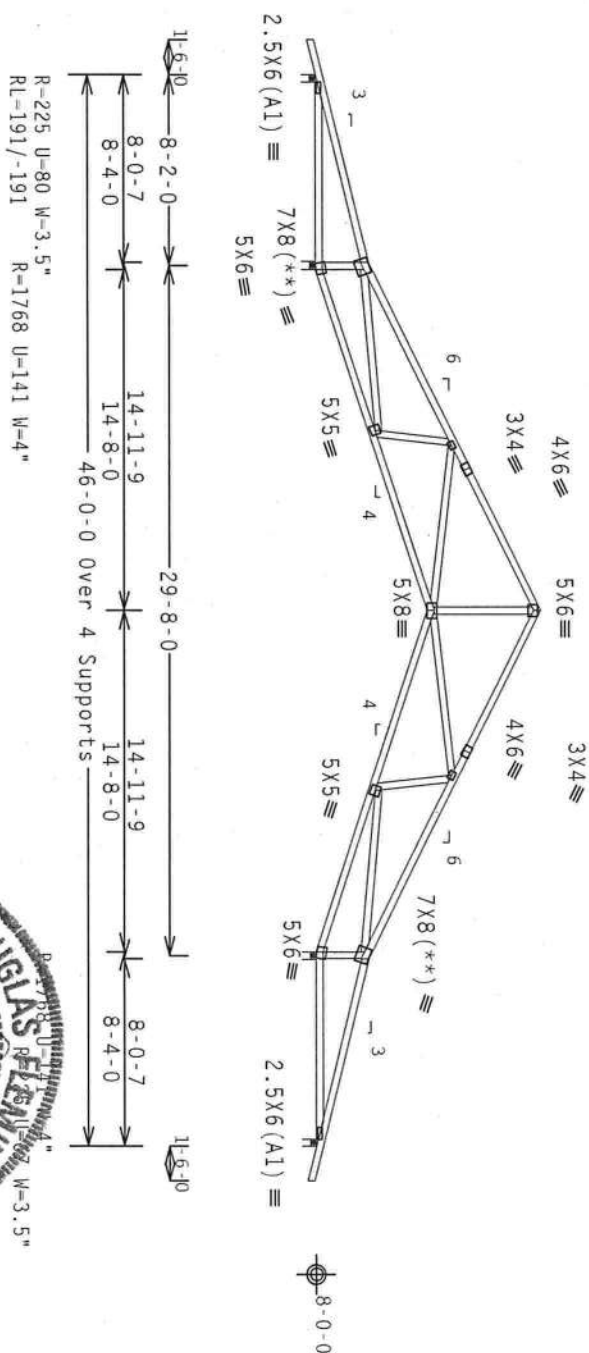
Scale = .125"/ft.
REF R487-- 37759
DATE 05/16/11
DRW HCUR487 11136005
HC-ENG JB/DF
SEQN- 202405
JREF- 1UBZ487_202

DOUGLAS FLEMING
FLORIDA
STATE OF
No. 66648
03/19/17
05/16/2011

Deflection meets L/240 live and L/180 total load.

Wind reactions based on MWFRS pressures.

WARNING: Furnish a copy of this DWG to the installation contractor. Special care must be taken during handling, shipping and installation of trusses. See "WARNING" note below.



R=225 U=80 W=3.5
R=191 U=191 R=1768 U=141 W=4"

Design Crit: FBC2007Res/TPI-2002(STD)
FT/RT=10%(0%)/0(0)

Scale = .125" / Ft.

FURNISH THIS DESIGN TO ALL CONTRACTORS INCLUDING INSTALLERS

ITW Building Components Group Inc

Haines City, FL 33844
FL COA #0278

Trusses requiring erection care in fabricating, handling, shipping, installing and bracing. Refer to the manufacturer's literature for details. Trusses shall be erected in accordance with the following practices noted otherwise. Top chord shall have properly attached structural sheathing bracing panel. Bottom chord shall have bracing installed per BCS Sections B3, B7 or B10, as applicable. Lateral resistance shall be provided in accordance with the manufacturer's literature.

Truss Building Components, Group Inc. (TIBCOS) shall not be responsible for any deviation from this specification. The manufacturer shall be responsible for the design and construction of the trusses. Apply plates to each face of truss and position as shown above and on the manufacturer's drawings. Apply plates to each face of truss and position as shown above and on the manufacturer's drawings. Details, unless noted otherwise. Refer to drawings 1600-2 for standard plate positions. A seal on the top chord of cover plate listing this drawing, indicates acceptance of professional engineering responsibility solely for the design shown. The suitability and use of this design for any structure is the responsibility of the Building Designer. per AISI/1.1 Sec 2.2. For more information see: This job's general notes using TIB-BCG: www.tibco.com; www.tibnet.org; www.steindustry.com; www.tibco-usa.org

03.6319.17
No. 66648
05/16/2011

TC LL	20.0 PSF	REF R487-- 37760
TC DL	10.0 PSF	DATE 05/16/11
BC DL	10.0 PSF	DRW HCU8R487 11136007
BC LL	0.0 PSF	HC-ENG JB/DF
TOT.LD.	40.0 PSF	SEQN- 202369
DUR.FAC.	1.25	
SPACING	24.0"	JREF- 1UBZ487_Z02

```
Stack Chord SC1 2x4 SP #2 Dense::Stack Chord SC2 2x4 SP #2 Dense::
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See DWGS A11015050109 & GBLETTIN0109 for more requirements.

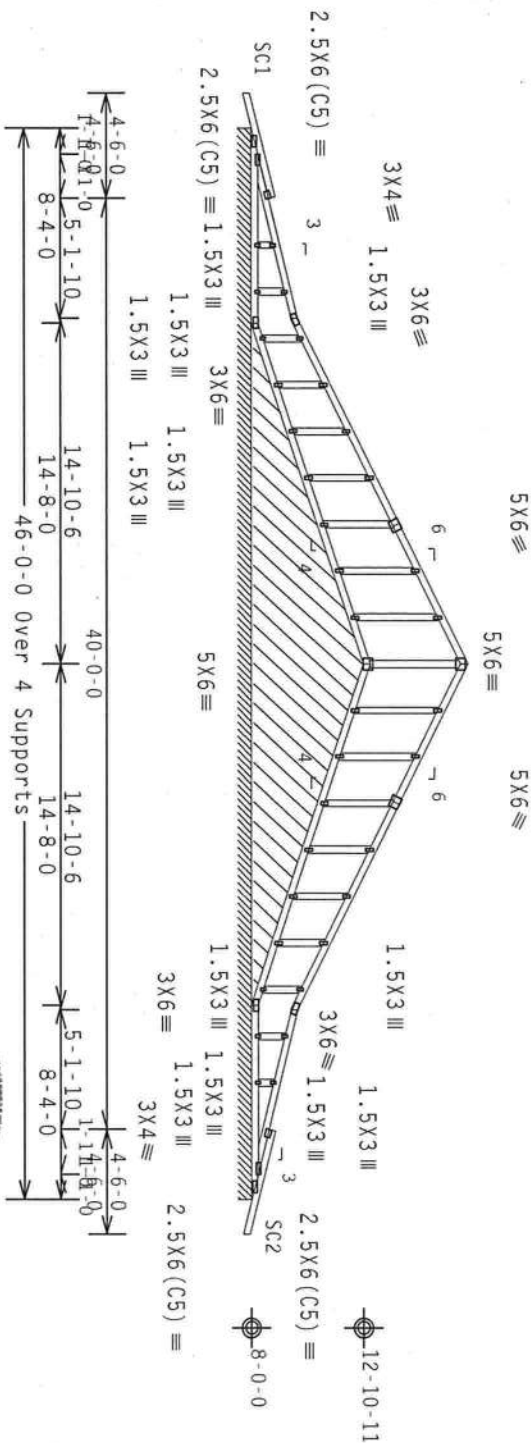
Stacked top chord must NOT be notched or cut in area (NML). Drapped top chord braced at 24" o.c. intervals. Attach stacked top chord (SC) to dropped top chord in notchable area using 3/4 tie-plates 24" o.c. Center plate on stacked/dropped chord interface, plate length perpendicular to chord length. Splice top chord in notchable area using 3x6.

Wind reactions based on MWFRS pressures.

Bottom chord checked for 10.00 psf non-concurrent live load.

Deflection meets L/240 live and L/180 total load.

WARNING: Furnish a copy of this DWG to the installation contractor. Special care must be taken during handling, shipping and installation of trusses. See "WARNING" note below.



R=110 PLF U=9 PLF W=46-0-0
RL=4/-4 PLF

Note: A11 Plates Are 1.5X4 Except As Shown

PLT TYP. Wave

Design Crit: FBC2007Res/TPI-2002(Std)
FT/RT=10%(0%)/0(0)

9.05/03.0319/17 QTY:

~~NOTY:~~

$$FL/-/4/-/-/R/-/$$

Scale = .125"/Ft.

WARNING - READ AND FOLLOW ALL NOTES ON THIS SHEET
FURNISH THIS DESIGN TO ALL CONTRACTORS INCLUDING INSTALLERS

Insurers' latest experience save in fabricating, handling, installing and erecting. Refer to the following the latest edition of BCSI (Building Component Safety Information, by TPI and NCS) for the practices proper to performing these functions. Insulators shall provide temporary bracing per the standards noted otherwise, top chord shall have properly attached structural sheathing and bottom chord shall have a properly attached rigid ceiling. Loadings shown for permanent lateral restraint shall have bracing installed per BCSI sections B7 or B10 as applicable.

ALPINE

ITW Building Components Group Inc

Haines City, FL 33844

FL COA #0278



TC LL	20.0 PSF	REF	R487 - - 3/7761
TC DL	10.0 PSF	DATE	05/16/11
BC DL	10.0 PSF	DRW	HCUSR487 11136006
BC LL	0.0 PSF	HC-ENG	JB/DF
TOT.LD.	40.0 PSF	SEQN-	202484
DUR.FAC.	1.25		
SPACING	24.0"	JREF-	IUBZ487_Z02

CLB WEB BRACE SUBSTITUTION

THIS DETAIL IS TO BE USED WHEN CONTINUOUS LATERAL BRACING (CLB) IS SPECIFIED ON A TRUSS DESIGN BUT AN ALTERNATIVE WEB BRACING METHOD IS DESIRED.

NOTES:

THIS DETAIL IS ONLY APPLICABLE FOR CHANGING THE SPECIFIED CLB SHOWN ON SINGLE PLY SEALED DESIGNS TO T-BRACING OR SCAB BRACING.

ALTERNATIVE BRACING SPECIFIED IN CHART BELOW MAY BE CONSERVATIVE. FOR MINIMUM ALTERNATIVE BRACING, RE-RUN DESIGN WITH APPROPRIATE BRACING.

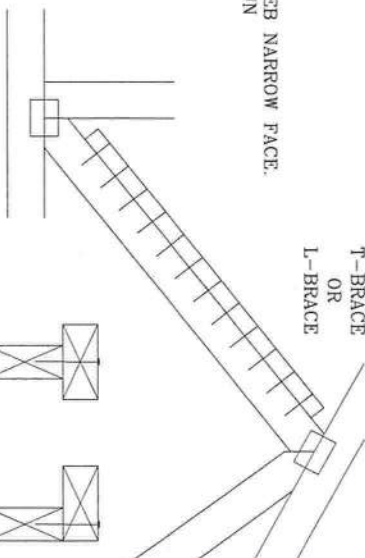
WEB MEMBER SIZE	SPECIFIED CLB BRACING	T OR L-BRACE	SCAB BRACE
2X3 OR 2X4	1 ROW	2X4	1-2X4
2X3 OR 2X4	2 ROWS	2X6	2-2X4
2X6	1 ROW	2X4	1-2X6
2X6	2 ROWS	2X6	2-2X4(*)
2X6	1 ROW	2X6	1-2X6
2X8	2 ROWS	2X6	2-2X6(*)

T-BRACE, L-BRACE AND SCAB BRACE TO BE SAME SPECIES AND GRADE OR BETTER THAN WEB MEMBER UNLESS SPECIFIED OTHERWISE ON ENGINEER'S SEALED DESIGN.

(*) CENTER SCAB ON WIDE FACE OF WEB. APPLY (1) SCAB TO EACH FACE OF WEB.

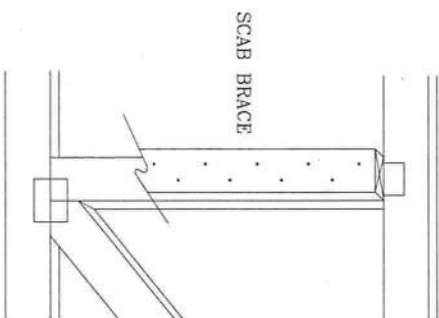
T-BRACING OR L-BRACING:

APPLY TO EITHER SIDE OF WEB NARROW FACE. ATTACH WITH 10d BOX OR GUN (0.128" x 3" MIN) NAILS. AT 6" O.C. BRACE IS A MINIMUM 80% OF WEB MEMBER LENGTH



SCAB BRACING:

APPLY SCAB(S) TO WIDE FACE OF WEB. NO MORE THAN (1) SCAB PER FACE. ATTACH WITH 10d BOX OR GUN (0.128" x 3" MIN) NAILS. AT 6" O.C. BRACE IS A MINIMUM 80% OF WEB MEMBER LENGTH



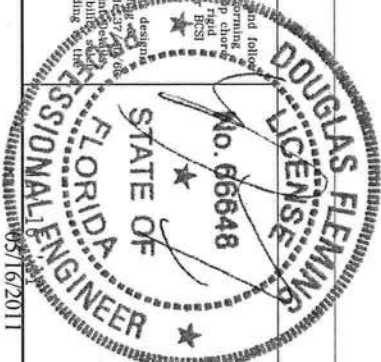
Building Components Group Inc.

Earth City, MO 63045

****WARNING** READ AND FOLLOW ALL NOTES ON THIS SHEET.** Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow BCS (Building Component Safety Information, by TWI and WCA) for safety practices prior to performing these functions. Installers shall provide temporary bracing per BCS. Unless noted otherwise, all bracing shall have properly attached structural plates and bolts. Trusses shall be braced in accordance with BCS sections B3 & B7. See this job's general notes page for more information.

****IMPORTANT** FURNISH COPY OF THIS DESIGN TO INSTALLATION CONTRACTOR.**

Building Components Group Inc. (TWI/BCG) shall not be responsible for any deviation from the design or any failure to build the truss in conformance with TWI and WCA for safety practices prior to performing these functions. Trusses shall be braced in accordance with BCS sections B3 & B7. A seal on this drawing or cover page indicates acceptance and professional engineering responsibility for the truss component design shown. The suitability and use of this component for any building responsibility of the Building Designer per ANSI/TPI 1 Sec. 2. ITW-BCG: www.itwbcg.com; TWI: www.twi.com; WCA: www.abendustry.com; ICC: www.iccsafe.org



TC LL	PSF	REF	CLB SUBST.
TC DL	PSF	DATE	1/1/09
BC DL	PSF	DRWG	BRCLBSUB0109
BC LL	PSF		
TOT. LD.	PSF		
DUR. FAC.			
SPACING			

CABLE STUD REINFORCEMENT DETAIL

MAX GABLE VERTICAL LENGTH														
2x4 GABLE VERTICAL SPECIES	BRACE GRADE	NO BRACES	(1) 1x4 "L" BRACE *		(1) 2x4 "L" BRACE *		(2) 2x4 "L" BRACE **		(1) 2x6 "L" BRACE *		(2) 2x6 "L" BRACE **			
			GROUP A	GROUP B	GROUP A	GROUP B	GROUP A	GROUP B	GROUP A	GROUP B				
24" O.C.	SPF	#1 / #2	3' 10"	6' 8"	6' 10"	7' 11"	8' 1"	9' 5"	9' 8"	12' 5"	12' 9"	14' 0"	14' 0"	
			#3	3' 9"	6' 0"	6' 0"	7' 11"	7' 11"	9' 5"	9' 5"	12' 4"	12' 4"	14' 0"	14' 0"
		STUD	3' 9"	6' 0"	6' 0"	7' 11"	7' 11"	9' 5"	9' 5"	12' 3"	12' 3"	14' 0"	14' 0"	
			STANDARD	3' 9"	5' 2"	5' 2"	6' 9"	6' 9"	9' 1"	9' 1"	10' 7"	10' 7"	14' 0"	14' 0"
		Hf	#1	4' 3"	6' 8"	7' 2"	7' 11"	8' 6"	9' 5"	9' 5"	10' 2"	12' 5"	13' 5"	14' 0"
			#2	4' 2"	6' 8"	7' 2"	7' 11"	8' 6"	9' 5"	9' 5"	10' 2"	12' 5"	13' 5"	14' 0"
	DFL	#3	4' 0"	6' 2"	6' 2"	7' 11"	8' 1"	9' 5"	9' 11"	12' 5"	12' 8"	14' 0"	14' 0"	
			STUD	4' 0"	6' 1"	6' 1"	7' 11"	8' 0"	9' 5"	9' 11"	12' 5"	12' 6"	14' 0"	14' 0"
		STANDARD	3' 10"	5' 3"	5' 3"	6' 11"	6' 11"	9' 4"	9' 4"	10' 10"	10' 10"	14' 0"	14' 0"	
		#1 / #2	4' 5"	7' 8"	7' 10"	9' 1"	9' 4"	10' 10"	11' 1"	14' 0"	14' 0"	14' 0"	14' 0"	
			#3	4' 4"	7' 4"	7' 4"	9' 1"	9' 1"	10' 10"	10' 10"	14' 0"	14' 0"	14' 0"	14' 0"
		Hf	STUD	4' 4"	6' 4"	6' 4"	9' 1"	9' 1"	10' 10"	10' 10"	14' 0"	14' 0"	14' 0"	14' 0"
STANDARD	4' 4"		6' 4"	6' 4"	8' 4"	8' 4"	10' 10"	10' 10"	12' 11"	12' 11"	14' 0"	14' 0"		
#1	4' 10"		7' 8"	8' 3"	9' 1"	9' 9"	10' 10"	11' 8"	14' 0"	14' 0"	14' 0"	14' 0"		
	#2		4' 9"	7' 8"	8' 3"	9' 1"	9' 9"	10' 10"	11' 8"	14' 0"	14' 0"	14' 0"	14' 0"	
SP	#3		4' 6"	7' 7"	7' 7"	9' 1"	9' 6"	10' 10"	11' 4"	14' 0"	14' 0"	14' 0"	14' 0"	
	STUD		4' 6"	7' 6"	7' 6"	9' 1"	9' 6"	10' 10"	11' 4"	14' 0"	14' 0"	14' 0"	14' 0"	
16" O.C.	DFL	STANDARD	4' 5"	6' 5"	6' 5"	8' 6"	8' 6"	10' 10"	11' 1"	13' 3"	13' 3"	14' 0"	14' 0"	
		#1 / #2	4' 11"	8' 5"	8' 8"	10' 0"	10' 3"	11' 11"	12' 3"	14' 0"	14' 0"	14' 0"	14' 0"	
			#3	4' 9"	8' 5"	8' 5"	10' 0"	10' 0"	11' 11"	11' 11"	14' 0"	14' 0"	14' 0"	14' 0"
		Hf	STUD	4' 9"	8' 5"	8' 5"	10' 0"	10' 0"	11' 11"	11' 11"	14' 0"	14' 0"	14' 0"	14' 0"
			STANDARD	4' 9"	7' 3"	7' 3"	9' 7"	9' 7"	11' 11"	11' 11"	14' 0"	14' 0"	14' 0"	14' 0"
		SPF	#1	5' 4"	8' 5"	9' 1"	10' 0"	10' 9"	11' 11"	12' 10"	14' 0"	14' 0"	14' 0"	14' 0"
	#2			5' 3"	8' 5"	9' 1"	10' 0"	10' 9"	11' 11"	12' 10"	14' 0"	14' 0"	14' 0"	14' 0"
	Hf		STUD	5' 0"	8' 5"	8' 5"	10' 0"	10' 6"	11' 11"	12' 6"	14' 0"	14' 0"	14' 0"	14' 0"
			STUD	5' 0"	8' 5"	8' 5"	10' 0"	10' 6"	11' 11"	12' 6"	14' 0"	14' 0"	14' 0"	14' 0"
	DFL		STUD	4' 11"	7' 5"	7' 5"	9' 10"	9' 10"	11' 11"	12' 3"	14' 0"	14' 0"	14' 0"	14' 0"
			STANDARD	4' 11"	7' 5"	7' 5"	9' 10"	9' 10"	11' 11"	12' 3"	14' 0"	14' 0"	14' 0"	14' 0"

GABLE TRUSS DETAIL NOTES:

LIVE LOAD DEFLECTION CRITERIA IS $L/240$.

CONTINUOUS BEARING (5 PSF TC DEAD LOAD).

GABLE END SUPPORTS LOAD FROM 4' 0"

PLYWOOD OVERHANG

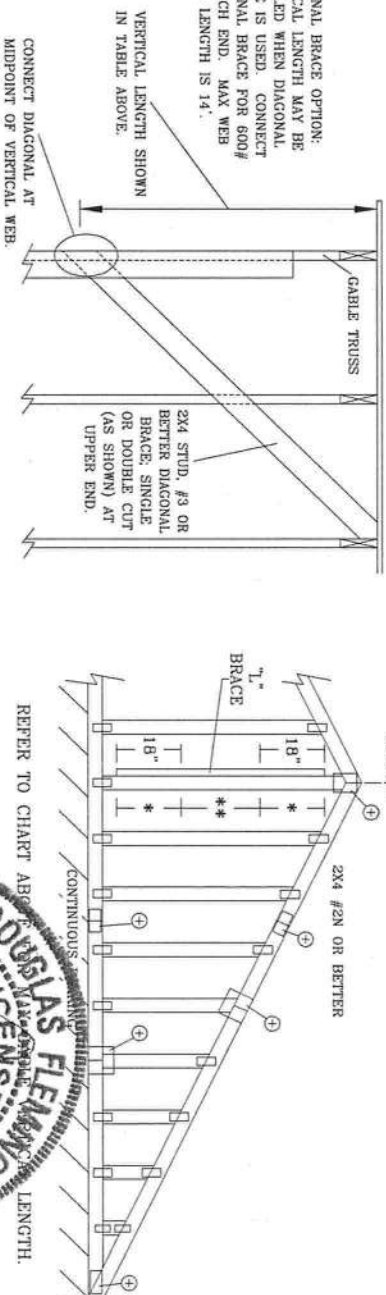
ATTACH EACH "L" BRACE WITH 10d NAILS.

* FOR (1) "L" BRACE: SPACE NAILS AT 2" O.C.

** FOR (2) "L" BRACES: SPACE NAILS AT 3" O.C.

IN 19 END ZONES AND 6 O.C. BETWEEN ZONES

MEMBER LENGTH



REFER TO CHART ABOVE FOR MAXIMUM WING LENGTH.

GABLE VERTICAL PLATE SIZES	
VERTICAL LENGTH	NO SPLICE
LESS THAN 4' 0"	1x4 OR 2x3
GREATER THAN 4' 0", BUT LESS THAN 11' 6"	2.5x4
GREATER THAN 11' 6"	3x4

+ REFER TO COMMON TRUSS DESIGN FOR
PEAK, SPLICE, AND HEEL PLATES.

PEAK, SPLICE, AND HEEL PLATES.

REL# ASCE7-05-CAB1013

DATE 1/1/09

DRWG A1101505010

521

1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2037	2038	2039	2040	2041	2042	2043	2044	2045	2046	2047	2048	2049	2050	2051	2052	2053	2054	2055	2056	2057	2058	2059	2060	2061	2062	2063	2064	2065	2066	2067	2068	2069	2070	2071	2072	2073	2074	2075	2076	2077	2078	2079	2080	2081	2082	2083	2084	2085	2086	2087	2088	2089	2090	2091	2092	2093	2094	2095	2096	2097	2098	2099	2100	2101	2102	2103	2104	2105	2106	2107	2108	2109	2110	2111	2112	2113	2114	2115	2116	2117	2118	2119	2120	2121	2122	2123	2124	2125	2126	2127	2128	2129	2130	2131	2132	2133	2134	2135	2136	2137	2138	2139	2140	2141	2142	2143	2144	2145	2146	2147	2148	2149	2150	2151	2152	2153	2154	2155	2156	2157	2158	2159	2160	2161	2162	2163	2164	2165	2166	2167	2168	2169	2170	2171	2172	2173	2174	2175	2176	2177	2178	2179	2180	2181	2182	2183	2184	2185	2186	2187	2188	2189	2190	2191	2192	2193	2194	2195	2196	2197	2198	2199	2200	2201	2202	2203	2204	2205	2206	2207	2208	2209	2210	2211	2212	2213	2214	2215	2216	2217	2218	2219	2220	2221	2222	2223	2224	2225	2226	2227	2228	2229	2230	2231	2232	2233	2234	2235	2236	2237	2238	2239	2240	2241	2242	2243	2244	2245	2246	2247	2248	2249	2250	2251	2252	2253	2254	2255	2256	2257	2258	2259	2260	2261	2262	2263	2264	2265	2266	2267	2268	2269	2270	2271	2272	2273	2274	2275	2276	2277	2278	2279	2280	2281	2282	2283	2284	2285	2286	2287	2288	2289	2290	2291	2292	2293	2294	2295	2296	2297	2298	2299	2300	2301	2302	2303	2304	2305	2306	2307	2308	2309	2310	2311	2312	2313	2314	2315	2316	2317	2318	2319	2320	2321	2322	2323	2324	2325	2326	2327	2328	2329	2330	2331	2332	2333	2334	2335	2336	2337	2338	2339	2340	2341	2342	2343	2344	2345	2346	2347	2348	2349	2350	2351	2352	2353	2354	2355	2356	2357	2358	2359	2360	2361	2362	2363	2364	2365	2366	2367	2368	2369	2370	2371	2372	2373	2374	2375	2376	2377	2378	2379	2380	2381	2382	2383	2384	2385	2386	2387	2388	2389	2390	2391	2392	2393	2394	2395	2396	2397	2398</
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1001



Building Components Group Inc.

Building Components Group Inc

Earth City, MO 63045

WARNING—READ AND FOLLOW ALL NOTES ON THIS SHEET. Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to the attached following BCSI (Building Component Safety Information, by TPI and WTC) for safety practices prior to performing these functions. Installers shall provide temporary bracing per BCSI. Unless noted otherwise, all joists shall have properly attached structural panels and bottom chord shall have a properly attached rigid ceiling. Locations shown for permanent lateral restraint of webs shall have bracing installed per BCSI sections B5 & B7. See this job's general notes page for more information.

IMPORTANT—FURNISH COPY OF THIS DESIGN TO INSTALLATION CONTRACTOR.

No. 66648

REF	ASCE7-05-GABI1013
DATE	1/1/09
DRWG	A11015050109

the building components group inc. (tlbco) shall not be responsible for any failure to build the truss in conformance with TPl, or fabricating, handling

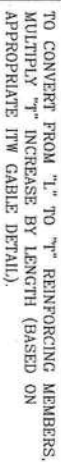
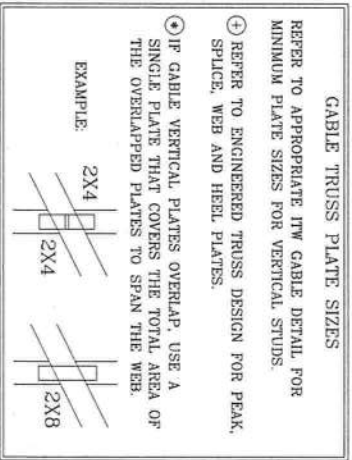
(K/W/H.S.) galv. steel. Apply plates to each face of truss, positioned as shown above and on joint plates. This design of cover plate accordance and professional engineering consultation required.

responsibility of the Building Designer per ANST/TP1 1 Sec. 2.

[illegible]

1107-01/C0-000000000000

GABLE TRUSS PLATE SIZES
REFER TO APPROPRIATE ITW GABLE DETAIL FOR
MINIMUM PLATE SIZES FOR VERTICAL STUDS.



MAXIMUM ALLOWABLE "J" REINFORCED GABLE VERTICAL LENGTH IS 14' FROM TOP TO BOTTOM CHORD.

EXAMPLE:
ASCE WIND SPEED = 100 MPH
MEAN ROOF HEIGHT = 30 FT, $K_{zt} = 1.00$
GABLE VERTICAL = 24" O.C. SP #3
^{typ} REINFORCING MEMBER SIZE = 2X4

[illegible]

to be paid following the performance of the work. The contractor shall be responsible for obtaining all necessary permits and licenses. The contractor shall be responsible for obtaining all necessary permits and licenses. The contractor shall be responsible for obtaining all necessary permits and licenses.

REF	LET-IN VERT
DATE	1/1/09
DRWG	GBLETTINO109

PROJECT NAME: AND ADDRESS:	1105007	BUILDER:	Owner - Paul Barcia
	RENO RD, FL	PERMITTING OFFICE:	Columbia County
OWNER:	PAUL BARCIA	PERMIT NO.:	29438
		CLIMATE ZONE:	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/>
		JURISDICTION NO.:	221000

Please Type

CK

- New construction or addition
- Single-family detached or Multiple-family attached
- If Multiple-family-No. of units covered by this submission
- Is this a worst case? (yes/no)
- Conditioned floor area (sq. ft.)
- Predominant eave overhang (ft.)
- Glass type¹ and area: (Label required by 13-104.4.5 if not default)
 - U-factor: (or Single- or Double-Pane DEFAULT)
 - SHGC: (or Clear or Tint DEFAULT)
- Floor type and insulation:
 - Slab-on-grade (R-value + perimeter)
 - Wood, raised (R-value + sq. ft.)
 - Concrete, raised (R-value)
- Net wall type, area and insulation:
 - Exterior:
 - Concrete block (Insulation R-value)
 - Wood frame (Insulation R-value)
 - Steel frame (Insulation R-value)
 - Log (Insulation R-value)
 - Other: _____
 - Adjacent:
 - Concrete block (Insulation R-value)
 - Wood frame (Insulation R-value)
 - Steel frame (Insulation R-value)
 - Log (Insulation R-value)
- Ceiling type, area and insulation:
 - Under attic (Insulation R-value)
 - Single assembly (Insulation R-value)
 - Radiant barrier, IRCC or white roof installed?
- Air distribution system:
 - Ducts (Insulation + Location)
 - Air Handler (Location)
- Cooling system:
(Types: central split, central single pkg., room unit, PTAC, gas, none)
- Heating system:
(Types: heat pump, elec. strip, nat. gas, LP gas, gas h.p., room or PTAC, none)
- Hot water system:
(Types: elec., natural gas, solar, LP gas, none)
- Hot water credits
 - Heat Recovery (HR)
 - Dedicated Heat Pump (DHP)
 - Solar
- HVAC Credits
(Use: CF-coiling fan, CV-cross vent, PT-programmable thermostat, HF-whole house fan, MZ-Multizone)
- COMPLIANCE STATUS: (PASS if As-Built Pts. are less than Base Pts.)
 - Total As-Built points
 - Total Base points



1. NEW	
2. SINGLE	
3.	
4. YES	
5. 1140	sq. ft.
6. 9.5'	ft.
Description Area	
7a. DOUBLE	124 sq. ft.
7b. U=0.86 SHGC=0.5	sq. ft.
8a. R =	l. ft.
8b. R = 0	1140 sq. ft.
8c. R =	sq. ft.
9a-1 R =	sq. ft.
9a-2 R = 13	1004 sq. ft.
9a-3 R =	sq. ft.
9a-4 R =	sq. ft.
9b-1 R =	sq. ft.
9b-2 R =	sq. ft.
9b-3 R =	sq. ft.
9b-4 R =	sq. ft.
10a. R30	1155 sq. ft.
10b.	sq. ft.
10c.	
11a. R = 6	UNC cond. uncond.
11b. INTERIOR	cond. uncond.
12a. Type: CENTRAL	
12b. SEER/EER/COP: 13	
12c. Capacity: 23 KBTU	
13a. Type: HEAT PUMP	
13b. HSPF/COP/AFUE: 7.9	
13c. Capacity: 23 KBTU	
14a. Type: ELEC	
14b. EF: .94	
15a.	
15b.	
15c.	
16. PT	
17. PASS	
17a. 15120	17b. 15164

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

PREPARED BY: ERAN BEAMLOX DATE: 5/13/11

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

OWNER AGENT: Paul P. Barcia DATE: 5/13/11

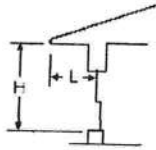
Review of plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed, this building will be inspected for compliance in accordance with Section 558.908, F.S.

BUILDING OFFICIAL:

DATE:

¹ Predominant glass type. For actual glass type and areas, see summer and winter glass output on Pages 2 and 4.

GLASS	ORIENTATION	OVERHANG LENGTH OH (FEET)	GLASS AREA (SQ. FT.)	SINGLE-PANE SUMMER POINT MULTIPLIER		DOUBLE-PANE SUMMER POINT MULTIPLIER		SUMMER OH FACTOR (from 6A-1)	AS-BUILT GLASS SUMMER PTS
				CLEAR	TINT ²	CLEAR	TINT ²		
	N			21.73	17.28	19.20	14.84		
	NE			33.55	27.37	29.56	23.48		
	E			47.92	39.62	42.06	33.89		
	SE			48.65	40.24	42.75	34.47		
	S			40.81	33.55	35.87	28.73		
	SW			45.75	37.77	40.16	32.30		
	W			43.84	36.13	38.52	30.93		
	NW			29.42	23.83	25.97	20.48		
	H ¹			84.46	68.97	74.77	59.51		
	N	9.5'	30	UPPER = .87			12.854	.634	245
	E	8'	35	SHGC = .5			30.171	.470	496
	S	9.5'	44				25.488	.458	513
	W	1.5'	15				27.481	.994	410



OVERHANG RATIO = OH LENGTH / OH HEIGHT

GLASS	.18 X	COND FLOOR AREA	X	WEIGHTED GLASS MULTIPLIER	=	BASE GLASS SUBTOTAL
	.18	1140		18.59		3815

AS-BUILT GLASS SUBTOTAL
1664

WALL	COMPONENT DESCRIPTION	AREA	X	BASE SUMMER POINT. MULT	=	BASE SUMMER POINTS
	EXTERIOR	1004		1.5		1506
	ADJACENT			.6		

WALL	COMPONENT DESCRIPTION	AREA	X	SUMMER POINT MULT. (6A-2 THRU 6A-6)	=	AS-BUILT SUMMER POINTS
	EXT FRAME R13	1004		1.5		1506

DOORS	COMPONENT DESCRIPTION	AREA	X	BASE SUMMER POINT. MULT	=	BASE SUMMER POINTS
	EXTERIOR	35		6.1		214
	ADJACENT			2.4		

DOORS	COMPONENT DESCRIPTION	AREA	X	SUMMER POINT MULT. (6A-2 THRU 6A-6)	=	AS-BUILT SUMMER POINTS
	EXT INS	35		4.1		143

CEILING	UNDER ATTIC OR SINGLE ASSEMBLY	AREA	X	BASE SUMMER POINT. MULT	=	BASE SUMMER POINTS
		1140		1.73		1973

CEILING	COMPONENT DESCRIPTION	AREA	X	SUMMER POINT MULT. (6A-2 THRU 6A-6)	=	AS-BUILT SUMMER POINTS
	ATTIC R30	1155		1.73		1999
	RBS/RCC/white roof			x		

BASE CEILING AREA EQUALS FLOOR AREA DIRECTLY UNDER CEILING. AS-BUILT CEILING AREA EQUALS ACTUAL CEILING SQUARE FOOTAGE.

FLOOR	SLAB PERIMETER	AREA	X	BASE SUMMER POINT. MULT	=	BASE SUMMER POINTS
		1140		-.41.2		
	RAISED (AREA)			-.98		-1117

FLOOR	COMPONENT DESCRIPTION	AREA	X	SUMMER POINT MULT. (6A-2 THRU 6A-6)	=	AS-BUILT SUMMER POINTS
	STEM with R20	1140		-.47		-5358
	RAISED WOOD					

FOR SLAB-ON-GRADE USE PERIMETER LENGTH AROUND CONDITIONED FLOOR. FOR RAISED FLOORS USE AREA OVER UNCONDITIONED SPACE.

INFILTRATION & INTERNAL GAINS	AREA	X	BASE SUMMER POINT. MULT	=	BASE SUMMER POINTS
	1140		10.21		11640

INFILTRATION & INTERNAL GAINS	AREA	X	BASE SUMMER POINT. MULT	=	BASE SUMMER POINTS
	1140		10.21		11640

USE TOTAL FLOOR AREA OF CONDITIONED SPACE

TOTAL COMPONENT BASE SUMMER POINTS

TOTAL COMPONENT AS-BUILT SUMMER POINTS

COOLING SYSTEM	Base Cooling System Multiplier	X	Total Base Summer Points	=	BASE COOLING POINTS
	325		18031		5860

TOTAL AS-BUILT SUM. PTS.	As-Built DM (6A-8)	As-Built DSM (6A-20)	As-Built AHU (6A-7)	As-Built CSM (6A-9)	As-Built CCM (6A-19)	AS-BUILT COOLING POINTS
11594	1.09	1.15	.91	.26	.95	3267

HOT WATER SYSTEM	Number of bedrooms	X	Base Hot Water Multiplier	=	BASE HOT WATER POINTS
	2		2635		5270

AS-BUILT HOT WATER SYS. TEM DESC.	Number of bedrooms	X	As-Built HW/M (6A-22)	As-Built HWCM (6A-23)	AS-BUILT HOT WATER POINTS
CCC.94	2		2571	1	5142

H = HORIZONTAL GLASS (SKYLIGHTS);

² FOR GLASS WITH KNOWN SHGC. SEE SECTION 2.1.1 OF APPENDIX G-C OF THE FBC. Residential. TINT MULTIPLIERS MAY BE USED FOR GLASS WITH SOLAR SCREENS, FILM, OR TINT.

³ MUST MEET CRITERIA OF APPENDIX G-C4.2.1.5 OF THE FBC, Residential.

6A-1 SUMMER OVERHANG FACTORS (SOF) FOR SINGLE-AND DOUBLE-PANE GLASS

SELECT BY OR	OH Ratio	.00-.11	.12-.17	.18-.26	.27-.35	.36-.46	.47-.57	.58-.70	.71-.83	.84-1.18	1.19-1.72	1.73-2.73	2.74 & up
	North	1.00	0.993	0.971	0.930	0.888	0.842	0.803	0.766	0.736	0.681	0.634	0.593
	Northeast	1.00	0.996	0.967	0.907	0.845	0.775	0.717	0.662	0.619	0.545	0.487	0.441
	East	1.00	0.994	0.953	0.893	0.827	0.745	0.675	0.609	0.558	0.470	0.405	0.357
	Southeast	1.00	0.998	0.952	0.864	0.777	0.689	0.623	0.566	0.525	0.459	0.413	0.379
	South	1.00	0.989	0.931	0.835	0.751	0.675	0.620	0.575	0.543	0.493	0.458	0.432
	Southwest	1.00	0.998	0.953	0.866	0.779	0.691	0.623	0.565	0.522	0.453	0.404	0.368
	West	1.00	0.994	0.963	0.899	0.828	0.748	0.681	0.617	0.569	0.485	0.422	0.375
	Northwest	1.00	0.996	0.968	0.913	0.858	0.797	0.748	0.702	0.667	0.605	0.558	0.516
	OH Length	0.0'	1.0'	1.5'	2.0'	3.0'	3.5'	4.5'	5.5'	6.5'	9.5'	14.0'	20.0'

6A-2 WALL SUMMER POINT MULTIPLIERS (SPM)

FRAME					CONCRETE BLOCK (NORMAL WT)				FACE BRICK				LOG		
WOOD		STEEL			INTERIOR INSULATION		EXT. INSUL.		R-VALUE	WOOD FR	R-VALUE	BLOCK			
R-VALUE	EXT	ADJ	EXT	ADJ	R-VALUE	EXT	ADJ	EXT	0-6.9	2.4	0-2.9	1.0	R-VALUE	6 INCH	8 INCH
0-6.9	5.5	2.2	7.6	2.8	0-2.9	2.2	1.1	2.2	7-10.9	.6	3-6.9	.6	0-2.9	1.5	1.0
7-10.9	2.1	.8	3.5	1.3	3-4.9	1.3	.8	.8	11-18.9	.4	7-9.9	.4	3-6.9	1.0	.7
11-12.9	1.7	.7	2.7	1.0	5-6.9	1.0	.7	.5	19-25.9	.2	10 & UP	.2	7 & UP	.8	.6
13-18.9	1.5	.6	2.5	0.9	7-10.9	.7	.5	.3	26 & UP	.1					
19-25.9	.9	.4	2.2	0.8	11-18.9	.4	.4	0							
26 & UP	.6	.2	1.2	0.4	19-25.9	.2	.2								
					26 & UP	.1	.1								

6A-3 DOOR SUMMER POINT MULTIPLIERS (SPM)

DOOR TYPE	EXTERIOR	ADJACENT
WOOD	6.1	2.4
INSULATED	4.1	1.6

6A-4 CEILING SUMMER POINT MULTIPLIERS (SPM)

UNDER ATTIC		SINGLE ASSEMBLY		CONCRETE DECK ROOF		
R-VALUE	SPM	R-VALUE	SPM	CEILING TYPE		
19-21.9	2.34	10-10.9	8.49	R-VALUE	EXPOSED	DROPPED
22-25.9	2.11	11-12.9	7.97	10-13.9	9.13	8.47
26-29.9	1.89	13-18.9	7.14	14-20.9	6.80	6.45
30-37.9	1.73	19-25.9	5.64	21 & UP	4.92	4.63
38 & UP	1.52	26-29.9	4.75			
RBS Credit	0.700	30 & UP	4.40			
IRCC Credit	0.849					
White Roof Credit	0.550					

6A-5 FLOOR SUMMER POINT MULTIPLIERS (SPM)

SLAB-ON-GRADE EDGE INSULATION		RAISED CONCRETE		RAISED WOOD			
R-VALUE	SPM	R-VALUE	SPM	POST OR PIER CONSTRUCTION	STEM WALL w/UNDER FLOOR INSULATION	ADJACENT	
0-2.9	-41.2	0-2.9	.8	R-VALUE	SPM	SPM	SPM
3-4.9	-37.2	3-4.9	-1.3	0-6.9	2.80	-4.7	2.2
5-6.9	-36.2	5-6.9	-1.3	7-10.9	1.34	-2.3	.8
7 & UP	-35.7	7 & UP	-1.3	11-18.9	1.06	-1.9	.7
				19 & UP	.77	-1.5	.4

6A-6 INFILTRATION & INTERNAL GAINS (SPM)

Air Infiltration	3.44
Internal Gains	+6.77
Infiltration/Internal Gains (Combined)	10.21

6A-7 AIR HANDLER MULTIPLIERS (SPM)

Located in garage	1.00
Located in conditioned area	0.91
Located on exterior of building	1.02
Located in attic	1.11

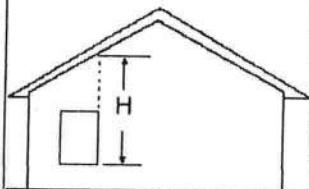
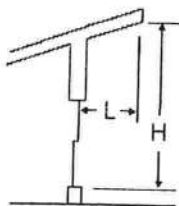
6A-8 DUCT MULTIPLIERS (DM)

SUPPLY DUCTS IN:	DUCT R-VALUE	RETURN DUCTS IN:				
		Unconditioned space	Attic/RBS	Attic/IRCC	Attic/Cool roof	Conditioned space
Unconditioned Space	4.2	1.118	1.111	1.112	1.089	1.107
	6.0	1.090	1.084	1.085	1.066	1.081
	8.0	1.071	1.066	1.067	1.051	1.064
Attic/Radiant Barrier (RBS)	4.2	1.072	1.066	—	—	1.061
	6.0	1.056	1.051	—	—	1.047
	8.0	1.045	1.041	—	—	1.037
Attic/Interior Radiation Control Coatings (IRCC)	4.2	1.099	—	1.092	—	1.084
	6.0	1.076	—	1.071	—	1.065
	8.0	1.061	—	1.057	—	1.052
Attic/Cool Roof	4.2	1.068	—	—	1.096	1.057
	6.0	1.051	—	—	1.071	1.043
	8.0	1.040	—	—	1.055	1.034
Conditioned Space	4.2	1.006	1.005	1.007	1.008	1.000
	6.0	1.005	1.004	1.005	1.006	1.000
	8.0	1.004	1.003	1.004	1.005	1.000

6A-9 COOLING SYSTEM MULTIPLIERS (CSM)

SYSTEM TYPE		COOLING SYSTEM MULTIPLIERS (CSM)									
Central Units (SEER)	Rating		7.5-7.9	8.0-8.4	8.5-8.8	8.9-9.4	9.5-9.9	10.0-10.4	10.5-10.9	11.0-11.4	11.5-11.9
	CSM		.45	.43	.40	.38	.36	.34	.32	.31	.30
PTAC & Room Units (EER)	Rating		12.5-12.9	13.0-13.4	13.5-13.9	14.0-14.4	14.5-14.9	15.0-15.4	15.5-15.9	16.0-16.4	16.5-16.9
	CSM		.27	.26	.25	.24	.24	.23	.22	.21	.21

GLASS



ORIENTATION	OVERHANG LENGTH OH (FEET)	GLASS AREA (SQ. FT.)	SINGLE-PANE WINTER POINT MULTIPLIER		OR	DOUBLE-PANE WINTER POINT MULTIPLIER		WINTER OH FACTOR (from 6A-10)	AS-BUILT GLASS WINTER PTS
			CLEAR	TINT ²		CLEAR	TINT ²		
N			33.22	34.06		24.58	25.37		
NE			32.04	33.05		23.57	24.53		
E			28.41	28.18		18.79	20.51		
SE			21.82	24.24		14.71	17.06		
S			20.24	22.87		13.30	15.87		
SW			24.09	26.20		16.74	18.79		
W			28.84	30.32		20.73	22.15		
NW			32.93	33.82		24.30	25.14		
H			29.19	31.47		19.86	22.11		
N	9.5'	30	U Factor = .87			25.735	1.024		791
E	6'	35	SHGC = .5			21.287	1.338		997
S	9.5'	44				17.052	3.450		2588
W	1.5'	15				22.801	1.002		343

GLASS	.18	COND. FLOOR AREA	X	WEIGHTED GLASS MULTIPLIER	=	BASE GLASS SUBTOTAL
	.18	1140		20.17		4139

AS-BUILT GLASS SUBTOTAL
4719

COMPONENT DESCRIPTION	AREA	X	BASE WINTER POINT. MULT.	=	BASE WINTER POINTS
WALL EXTERIOR	1004		3.4		3414
WALL ADJACENT			3.3		

COMPONENT DESCRIPTION	AREA	WINTER POINT MULT. (6A-11 THRU 6A-15)	AS-BUILT WINTER POINTS
EXT FRAME R13	1004	3.4	3414

DOORS	EXTERIOR	35	12.3	431
	ADJACENT		11.5	

DOORS	EXTERIOR	35	8.4	294
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CEILING	UNDER ATTIC OR SINGLE ASSEMBLY	1140	2.05	2337
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CEILING	ATTIC R30	1155	2.05	2368
	RBS/IRCC/white roof ¹		X	

BASE CEILING AREA EQUALS FLOOR AREA DIRECTLY UNDER CEILING. AS-BUILT CEILING AREA EQUALS ACTUAL CEILING SQUARE FOOTAGE.

FLOOR	SLAB (PERIMETER)	18.8		
	RAISED (AREA)	1140	1.38	1573

FLOOR	STEM WALL R0	1140	3.5	3990
	RAISED WOOD			

FOR SLAB-ON-GRADE USE PERIMETER LENGTH AROUND CONDITIONED FLOOR. FOR RAISED FLOORS USE AREA OVER UNCONDITIONED SPACE.

INFILTRATION & INTERNAL GAINS	1140	-0.58	-661
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INFILTRATION & INTERNAL GAINS	1140	-0.58	-661
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USE TOTAL FLOOR AREA OF CONDITIONED SPACE.

TOTAL COMPONENT BASE WINTER POINTS

TOTAL COMPONENT AS-BUILT WINTER POINTS

14124

HEATING SYSTEM	Base Heating System Multiplier	X	Total Base Winter Points	=	BASE HEATING POINTS
	.554		11233		6223

TOTAL AS-BUILT WIN. PTS.	As-Built DM (6A-17)	As-Built DSM (6A-20)	As-Built AHU (6A-16)	As-Built HSM (6A-18)	As-Built HCM (6A-21)	AS-BUILT HEATING POINTS
14124	1069	1173	.93	.43	.95	6711

BASE COOLING POINTS (From P. 2)	+ BASE HEATING POINTS	+ BASE HOT WATER POINTS (From P. 2)	X 0.85	= TOTAL BASE POINTS (Enter on P. 1)
5860	6711	5270	17841	15169

AS-BUILT COOLING POINTS (From P. 2)	+ AS-BUILT HEATING POINTS	+ AS-BUILT HOT WATER POINTS (From P. 2)	= TOTAL AS-BUILT POINTS (Enter on P. 1)
3267	6711	5142	15120

H = HORIZONTAL GLASS (SKYLIGHTS)

² FOR GLASS WITH KNOWN SHGC. SEE SECTION 2.1.1 OF APPENDIX G-C OF THE FBC. Residential. TINT MULTIPLIERS MAY BE USED FOR GLASS WITH SOLAR SCREENS, FILM, OR TINT.

³ MUST MEET CRITERIA OF APPENDIX G-C.2.1.5 OF THE FBC. Residential.

6A-10 WINTER OVERHANG FACTORS (WOF)

SELECT BY OR	OH Ratio	.00-.11	.12-.17	.18-.26	.27-.35	.36-.46	.47-.57	.58-.70	.71-.83	.84-1.18	1.19-1.72	1.73-2.73	2.74 & up
	North	1.00	1.000	1.001	1.003	1.005	1.009	1.011	1.014	1.016	1.021	1.024	1.027
	Northeast	1.00	0.998	1.001	1.008	1.015	1.023	1.029	1.035	1.040	1.049	1.056	1.061
	East	1.00	1.007	1.018	1.040	1.069	1.109	1.150	1.198	1.242	1.338	1.429	1.507
	Southeast	1.00	1.014	1.043	1.111	1.202	1.332	1.472	1.635	1.787	2.113	2.412	2.650
	South	1.00	0.994	1.032	1.142	1.308	1.563	1.845	2.175	2.471	3.042	3.450	3.661
	Southwest	1.00	1.006	1.025	1.070	1.131	1.217	1.308	1.413	1.508	1.708	1.888	2.031
	West	1.00	1.002	1.010	1.027	1.049	1.077	1.102	1.126	1.149	1.187	1.217	1.233
	Northwest	1.00	0.999	1.000	1.004	1.008	1.012	1.016	1.019	1.022	1.028	1.032	1.036
	OH Length	0.0'	1.0'	1.5'	2.0'	3.0'	3.5'	4.5'	5.5'	6.5'	9.5'	14.0'	20.0'

6A-11 WALL WINTER POINT MULTIPLIERS (WPM)

FRAME					CONCRETE BLOCK (NORMAL WT)					FACE BRICK				LOG		
WOOD			STEEL		INTERIOR INSULATION			EXT. INSUL.	R-VALUE	WOOD FR	R-VALUE	BLOCK				
R-VALUE	EXT	ADJ	EXT	ADJ	R-VALUE	EXT	ADJ	EXT	0-6.9	12.6	0-2.9	7.9	R-VALUE	6 INCH	8 INCH	
0-6.9	11.1	10.4	15.1	13.1	0-2.9	11.2	6.8	11.2	7-10.9	4.2	3-6.9	5.7		0-2.9	EXT	EXT
7-10.9	4.4	4.4	7.3	6.6	3-4.9	7.3	5.1	5.6	11-18.9	3.5	7-9.9	3.8	3-6.9	4.5	3.0	
11-12.9	3.7	3.6	5.7	5.2	5-6.9	5.7	4.2	4.3	19-25.9	2.2	10 & UP	3.0	3-6.9	2.8	2.2	
13-18.9	3.4	3.3	5.2	4.9	7-10.9	4.6	3.5	3.3	26 & UP	1.4			7 & UP	2.1	1.7	
19-25.9	2.2	2.2	4.6	4.4	11-18.9	3.0	2.6	2.2								
26 & Up	1.5	1.5	2.7	2.6	19-25.9	1.9	1.7									
					26 & UP	1.3	1.2									

5A-19 COOLING CREDIT MULTIPLIERS

SYSTEM TYPE	Cooling credit multipliers (CCM)
Ceiling Fans	.95*
Cross Ventilation	.95*
Whole House Fan	.95*
Multizone	.95
Programmable Thermostat	.95

*Credit may be taken for only one system type concurrently.

6A-20 AIR DISTRIBUTION SYSTEM CREDIT MULTIPLIERS

TYPE CREDIT	Prescriptive requirements	Multiplier
Air-tight Duct Credit ¹	Appx G-C5 2.2.1.1	1.00
Factory-sealed AHU Credit ²	Appx G-C5 2.2.1.2	0.95

¹Duct Sealing Multiplier (DSM) shall be 1.15 (summer) or 1.17 (winter) unless Air-tight Duct Credit is demonstrated by test report.

²Multiply Factory-sealed AHU credit by summer (Table 6A-7) or winter (Table 6A-16) AHU multiplier. Insert total in the "As-Built AHU" box on page 2 or 4.

5A-21 HEATING CREDIT MULTIPLIERS (HCM)

SYSTEM TYPE	HEATING CREDIT MULTIPLIERS (HCM)
Programmable Thermostat	HCM .95
Multizone	HCM .95

5A-22 HOT WATER MULTIPLIERS (HWM)

SYSTEM TYPE									
Electric Resistance	EF	.80-.81	.82-.83	.84-.85	.86-.87	.88-.90	.91-.93	.94-.96	.97 & Up
	HWM	3020	2946	2876	2809	2746	2655	2571	2491
Gas Water Heating	EF	.54	.55	.56	.57	.59	.59	.60	.61
	HWM	3020	2946	2876	2809	2746	2655	2571	2491
	EF	.62-.63	.64-.65	.66-.70	.71-.75	.76-.80	.81-.83	.84-.86	.87 & Up
	HWM	2346	2217	2101	1738	1456	1196	1055	933

5A-23 HOT WATER CREDIT MULTIPLIERS (HWCM)

SYSTEM TYPE		HOT WATER CREDIT MULTIPLIERS (HWCM)				
Heat Recovery Unit	With	Air Conditioner		Heat Pump		
	HWCM	.84		.78		
Add-on Dedicated Heat Pump (without tank)	EF	2.0-2.49	2.5-2.99	3.0-3.49	3.5 & Up	
	HWCM	.44	.35	.29	.25	
Add-on Solar Water Heater (without tank)	EF	1.0-1.9	2.0-2.9	3.0-3.9	4.0-4.9	5.0 & Up
	HWCM	.84	.42	.28	.21	.17

NOTE: An HWM must be used in conjunction with all HWCM. See Table 6A-22. EF Means Energy Factor.

5A-24 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	N1106.AB.1.1	Max: 3 cfm/sq. ft. window area; .5cfm/sq. ft. door area.	
Exterior & Adjacent Walls	N1106.AB.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; CFM utility penetrations; between wall panels & top/bottom plates; between walls & 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	N1106.AB.1.2.2	Penetrations/openings > 1/8" sealed unless backed by truss or joist members. EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams.	
Ceilings	N1106.AB.1.2.3	Seal: 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	N1106.AB.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.	
Multiple Story Houses	N1106.AB.1.2.5	Air barrier on perimeter of floor cavity between floors.	
Additional Infiltration reqts	N1106.AB.1.3	Exhaust fans vented to outdoors; dampers; combustion space heaters comply with NFPA, have combustion air.	

5A-25 OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	N1112.AB.3	Comply with efficiency requirements in Table N1112.AB.3. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required for vertical pipe risers.	
Swimming Pools & Spas	N1112.AB.2.3	Spas & heated pools must have covers (except solar heated). Noncommercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%.	
Shower Heads	N1112.AB.2.4	Water flow must be restricted to no more than 2.5 gallons per minute at 80 psig.	
Air Distribution Systems	N1110.AB	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated, and installed in accordance with the criteria of Section N1110. Ducts in unconditioned attics: R-6 minimum insulation.	
HVAC Controls	N1107.AB.2	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	N1104.AB.1 N1102.B.1.1	Ceilings—Min. R-19. Common walls—Frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	

Double Pane: Default U -factor = 0.87								
Solar Heat Gain Coefficient	0.50-0.46	0.45-0.41	0.40-0.36	0.35-0.31	0.30-0.26	0.25-0.21	0.20-0.16	0.15-0
Summer:								
N	12.854	10.866	8.906	6.923	4.942	2.988	1.036	-0.965
NE	20.713	17.944	15.214	12.451	9.690	6.969	4.251	1.464
E	30.171	26.442	22.764	19.039	15.315	11.643	7.971	4.206
SE	30.708	26.929	23.201	19.425	15.650	11.926	8.202	4.381
S	25.488	22.234	19.025	15.776	12.528	9.324	6.123	2.839
SW	28.732	25.150	21.616	18.038	14.461	10.933	7.406	3.789
W	27.481	24.019	20.605	17.147	13.692	10.283	6.876	3.382
NW	17.981	15.477	13.007	10.506	8.007	5.543	3.081	0.556
H	52.565	45.607	38.743	31.794	24.851	18.002	11.158	4.138
Winter:								
N	25.735	26.095	26.448	26.805	27.160	27.508	27.856	28.210
NE	24.963	25.398	25.825	26.257	26.688	27.112	27.534	27.966
E	21.287	22.070	22.843	23.625	24.408	25.180	25.953	26.746
SE	18.143	19.228	20.301	21.391	22.483	23.564	24.647	25.762
S	17.052	18.238	19.413	20.607	21.805	22.991	24.180	25.405
SW	19.729	20.674	21.608	22.557	23.509	24.451	25.394	26.366
W	22.801	23.449	24.089	24.735	25.381	26.018	26.654	27.306
NW	25.522	25.903	26.278	26.656	27.033	27.403	27.771	28.148
H	23.141	24.181	25.213	26.263	27.319	28.365	29.416	30.499

ESTIMATED ENERGY PERFORMANCE INDEX*
The lower the Energy Performance Index, the more efficient the home.

1. New Home or addition	NEW		11. Ducts, Location & Insulation Level	
2. Single family or multiple family	SINGLE		a. Supply ducts: ATTIC	R- 6
3. Number of units, (if multi-family)			b. Return ducts: ATTIC	R- 6
4. Number of bedrooms	2		12. Cooling systems	Capacity: 234 BTU
5. Is this a worst case? (yes or no)	YES		a. Split system	SEER: 13
6. Conditioned floor area	1140	sq. ft.	b. Single package	SEER:
7. Glass type & area			c. Ground/water source	COP:
a. U-Factor: .86	124	sq. ft.	d. Room unit	EER:
(Or single or double Default)		sq. ft.	e. PTAC	EER:
b. SHGC: .5		sq. ft.	f. Gas-driven	COP:
(Or clear or tint Default)		sq. ft.	13. Heating Systems	Capacity: 234 BTU
8. Floor types, Insulation level			a. Split system heat pump	HSPE: 7.9
a. Slab-on-grade, edge insulation	R-		b. Single package heat pump	HSPE:
b. Wood, raised	R- 0		c. Electric resistance	COP:
c. Concrete, raised	R-		d. Gas furnace, natural gas	AFUE:
9. Wall types, Insulation level			e. Gas furnace, LPG	AFUE:
Exterior			f. Gas-driven heat pump	Recov. EFF.:
a. Wood frame	R- 13		14. Water heating systems	EF: .94
b. Metal frame	R-		a. Electric resistance	EF:
c. Concrete block	R-		b. Gas fired, natural gas	EF:
d. Log	R-		c. Gas fired, LPG	EF:
e. Other	R-		d. Solar System with tank	EF:
10. Adjacent			e. Dedicated heat pump with tank	EF:
a. Wood frame	R-		f. Heat recovery unit	HeatRec%
b. Metal frame	R-		g. Other:	
c. Concrete block	R-		15. HVAC credits claimed (Alternate Point System Method only)	
d. Log	R-		a. Ceiling fans	
e. Other	R-		b. Cross ventilation	
11. Ceiling types, Insulation level			c. Whole house fan	
a. Under attic	R- 30		d. Multizone cooling credit	
b. Single assembly	R-		e. Multizone heating credit	
c. Knee walls/skylight walls	R-		f. Programmable thermostat	✓
d. Radiant barrier installed	R-			

certify that this home has complied with the Florida Energy Efficiency Code For Building 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

Residential System Sizing Calculation

Summary

Paul Barcia
Reno Rd
, FL

Project Title:
1105007

Class 3 Rating
Registration No. 0
Climate: North

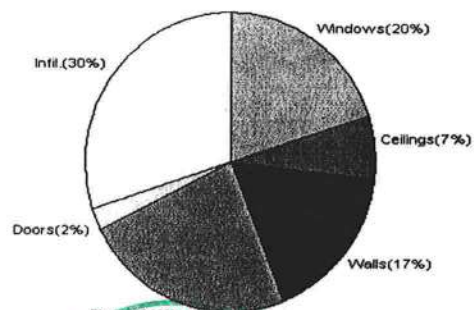
5/13/2011

Location for weather data: Gainesville - Defaults: Latitude(29) Altitude(152 ft.) Temp Range(M)			
Humidity data: Interior RH (50%) Outdoor wet bulb (77F) Humidity difference(54gr.)			
Winter design temperature	33 F	Summer design temperature	92 F
Winter setpoint	70 F	Summer setpoint	75 F
Winter temperature difference	37 F	Summer temperature difference	17 F
Total heating load calculation	19499 Btuh	Total cooling load calculation	17984 Btuh
Submitted heating capacity	% of calc Btuh	Submitted cooling capacity	% of calc Btuh
Total (Electric Heat Pump)	118.0 23000	Sensible (SHR = 0.75)	119.3 17250
Heat Pump + Auxiliary(0.0kW)	118.0 23000	Latent	163.3 5750
		Total (Electric Heat Pump)	127.9 23000

WINTER CALCULATIONS

Winter Heating Load (for 1140 sqft)

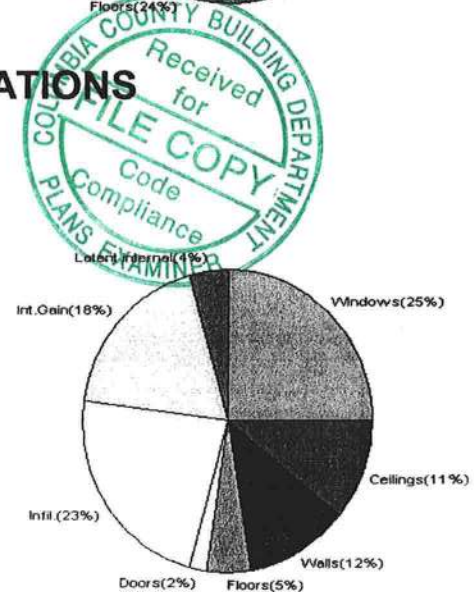
Load component		Load	
Window total	124 sqft	3946	Btuh
Wall total	1004 sqft	3297	Btuh
Door total	35 sqft	453	Btuh
Ceiling total	1155 sqft	1361	Btuh
Floor total	1140 sqft	4654	Btuh
Infiltration	143 cfm	5788	Btuh
Duct loss		0	Btuh
Subtotal		19499	Btuh
Ventilation	0 cfm	0	Btuh
TOTAL HEAT LOSS		19499	Btuh



SUMMER CALCULATIONS

Summer Cooling Load (for 1140 sqft)

Load component		Load	
Window total	124 sqft	4493	Btuh
Wall total	1004 sqft	2094	Btuh
Door total	35 sqft	343	Btuh
Ceiling total	1155 sqft	1913	Btuh
Floor total		913	Btuh
Infiltration	74 cfm	1386	Btuh
Internal gain		3320	Btuh
Duct gain		0	Btuh
Sens. Ventilation	0 cfm	0	Btuh
Total sensible gain		14462	Btuh
Latent gain(ducts)		0	Btuh
Latent gain(infiltration)		2722	Btuh
Latent gain(ventilation)		0	Btuh
Latent gain(internal/occupants/other)		800	Btuh
Total latent gain		3522	Btuh
TOTAL HEAT GAIN		17984	Btuh



For Florida residences only

EnergyGauge® System Sizing

PREPARED BY: ERIAN BISHAM KURY

DATE: 5/13/11

System Sizing Calculations - Winter

Residential Load - Whole House Component Details

Paul Barcia
Reno Rd
, FL

Project Title:
1105007

Class 3 Rating
Registration No. 0
Climate: North

Reference City: Gainesville (Defaults) Winter Temperature Difference: 37.0 F
This calculation is for Worst Case. The house has been rotated 315 degrees.

5/13/2011

Component Loads for Whole House

Window	Panes/SHGC/Frame/U	Orientation	Area(sqft)	X	HTM=	Load
1	2, SHGC=0.5, Metal, 0.86	NW	15.0		31.8	477 Btuh
2	2, SHGC=0.5, Metal, 0.86	NW	9.0		31.8	286 Btuh
3	2, SHGC=0.5, Metal, 0.86	NE	15.0		31.8	477 Btuh
4	2, SHGC=0.5, Metal, 0.86	SE	30.0		31.8	955 Btuh
5	2, SHGC=0.5, Metal, 0.86	SW	30.0		31.8	955 Btuh
6	2, SHGC=0.5, Metal, 0.86	SW	5.0		31.8	159 Btuh
7	2, SHGC=0.5, Metal, 0.86	NW	20.0		31.8	636 Btuh
Window Total			124(sqft)			3946 Btuh
Walls	Type	R-Value	Area	X	HTM=	Load
1	Frame - Wood - Ext(0.09)	13.0	1004		3.3	3297 Btuh
Wall Total			1004			3297 Btuh
Doors	Type		Area	X	HTM=	Load
1	Insulated - Exterior		20		12.9	259 Btuh
2	Insulated - Exterior		15		12.9	194 Btuh
Door Total			35			453Btuh
Ceilings	Type/Color/Surface	R-Value	Area	X	HTM=	Load
1	Vented Attic(D/Shin)	30.0	1155		1.2	1361 Btuh
Ceiling Total			1155			1361Btuh
Floors	Type	R-Value	Size	X	HTM=	Load
1	Raised Wood - Stem Wall	0	1140.0 sqft		4.1	4654 Btuh
Floor Total			1140			4654 Btuh
Zone Envelope Subtotal:						13711 Btuh
Infiltration	Type	ACH X	Zone Volume	CFM=		
	Natural	0.94	9120	142.9		5788 Btuh
Ductload	Unsealed, R6.0, Supply(Attic), Return(Attic) (DLM of 0.00)					0 Btuh
Zone #1	Sensible Zone Subtotal					19499 Btuh

WHOLE HOUSE TOTALS

Subtotal Sensible	19499 Btuh
Ventilation Sensible	0 Btuh
Total Btuh Loss	19499 Btuh

Manual J Winter Calculations

Residential Load - Component Details (continued)

Paul Barcia
Reno Rd
, FL

Project Title:
1105007

Class 3 Rating
Registration No. 0
Climate: North

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

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



For Florida residences only

System Sizing Calculations - Summer

Residential Load - Whole House Component Details

Paul Barcia
Reno Rd
, FL

Project Title:
1105007

Class 3 Rating
Registration No. 0
Climate: North

Reference City: Gainesville (Defaults) Summer Temperature Difference: 17.0 F
This calculation is for Worst Case. The house has been rotated 315 degrees.

5/13/2011

Component Loads for Whole House

Window	Type*	Ornt	Overhang		Window Area(sqft)			HTM		Load	
	Pn/SHGC/U/InSh/ExSh/IS		Len	Hgt	Gross	Shaded	Unshaded	Shaded	Unshaded		
1	2, SHGC=0.5, 0.86, None,N,N	NW	9.5ft	5ft.	15.0	0.0	15.0	25	48	726	Btuh
2	2, SHGC=0.5, 0.86, None,N,N	NW	9.5ft	3ft.	9.0	0.0	9.0	25	48	435	Btuh
3	2, SHGC=0.5, 0.86, None,N,N	NE	1.5ft	10ft.	15.0	0.0	15.0	25	48	726	Btuh
4	2, SHGC=0.5, 0.86, None,N,N	SE	9.5ft	5ft.	30.0	30.0	0.0	25	50	756	Btuh
5	2, SHGC=0.5, 0.86, None,N,N	SW	8ft.	5ft.	30.0	30.0	0.0	25	50	756	Btuh
6	2, SHGC=0.5, 0.86, None,N,N	SW	8ft.	3ft.	5.0	5.0	0.0	25	50	126	Btuh
7	2, SHGC=0.5, 0.86, None,N,N	NW	9.5ft	7ft.	20.0	0.0	20.0	25	48	968	Btuh
	Window Total				124 (sqft)					4493 Btuh	
Walls	Type		R-Value/U-Value		Area(sqft)			HTM		Load	
1	Frame - Wood - Ext		13.0/0.09		1004.0			2.1		2094 Btuh	
	Wall Total				1004 (sqft)					2094 Btuh	
Doors	Type				Area (sqft)			HTM		Load	
1	Insulated - Exterior				20.0			9.8		196 Btuh	
2	Insulated - Exterior				15.0			9.8		147 Btuh	
	Door Total				35 (sqft)					343 Btuh	
Ceilings	Type/Color/Surface		R-Value		Area(sqft)			HTM		Load	
1	Vented Attic/DarkShingle		30.0		1155.0			1.7		1913 Btuh	
	Ceiling Total				1155 (sqft)					1913 Btuh	
Floors	Type		R-Value		Size			HTM		Load	
1	Raised Wood - Stem Wall		0.0		1140 (sqft)			0.8		913 Btuh	
	Floor Total				1140.0 (sqft)					913 Btuh	
	Zone Envelope Subtotal:									9756 Btuh	
Infiltration	Type		ACH		Volume(cuft)			CFM=		Load	
	SensibleNatural		0.49		9120			74.5		1386 Btuh	
Internal gain			Occupants		Btuh/occupant			Appliance		Load	
			4		X 230 +			2400		3320 Btuh	
Duct load	Unsealed, R6.0, Supply(Attic), Return(Attic)							DGM = 0.00		0.0 Btuh	
	Sensible Zone Load									14462 Btuh	

Manual J Summer Calculations

Residential Load - Component Details (continued)

Paul Barcia
Reno Rd
, FL

Project Title:
1105007

Class 3 Rating
Registration No. 0
Climate: North

5/13/2011

WHOLE HOUSE TOTALS

Whole House Totals for Cooling	Sensible Envelope Load All Zones	14462 Btuh
	Sensible Duct Load	0 Btuh
	Total Sensible Zone Loads	14462 Btuh
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	Total sensible gain	14462 Btuh
	Latent infiltration gain (for 54 gr. humidity difference)	2722 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	0 Btuh
	Latent occupant gain (4 people @ 200 Btuh per person)	800 Btuh
	Latent other gain	0 Btuh
	Latent total gain	3522 Btuh
	TOTAL GAIN	17984 Btuh

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



For Florida residences only

Residential Window Diversity

MidSummer

Paul Barcia
Reno Rd
, FL

Project Title:
1105007

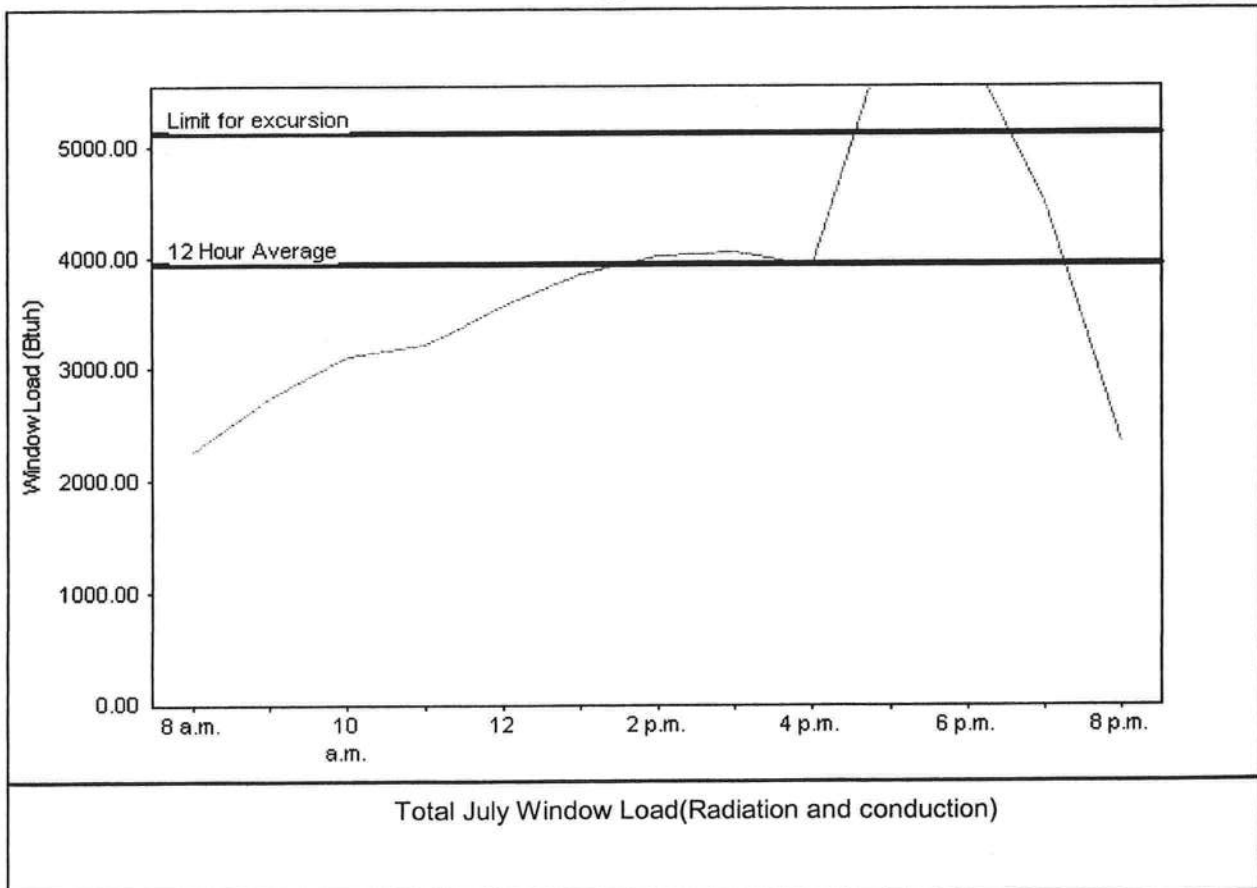
Class 3 Rating
Registration No. 0
Climate: North

5/13/2011

Weather data for: Gainesville - Defaults

Summer design temperature	92 F	Average window load for July	3936 Btuh
Summer setpoint	75 F	Peak window load for July	6101 Btuh
Summer temperature difference	17 F	Excursion limit(130% of Ave.)	5116 Btuh
Latitude	29 North	Window excursion (July)	985 Btuh

WINDOW Average and Peak Loads



This application has glass areas that produce large heat gains for part of the day. Variable air volume devices are required to overcome spikes in solar gain for one or more rooms. Install a zoned system or provide zone control for problem rooms. Single speed equipment may not be suitable for the application.

EnergyGauge® System Sizing for Florida residences only

PREPARED BY:

DATE:

5/13/11

EnergyGauge® FLR2PB v4.1



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



29438



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 form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

_____ The attached certificate requires correction by the surveyor of section (s) _____ prior to acceptance by the community.

☒ The attached elevation certificate is complete and correct.

☒ Minor corrections have been made in the below marked section(s) 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: a) Square footage of crawl space or enclosure(s) _____ sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____ c) Total net area of flood openings in A8.b _____ sq in		A9. For a building with an attached garage, provide: a) Square footage of attached garage _____ sq ft 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 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 02/04/09	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.

☐ 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

Comments: _____

Date of Review: 21 SEPT. 2011

Community Official: [Signature]

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

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

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name Maryland Lane, LLC		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 498 SW Manatee Terrace		Company NAIC Number
City Ft. White State FL ZIP Code 32038		

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lot 34, Unit 12, Three Rivers Estates, PB 4, Pages 117-117A. Tax Parcel No. 00-00-00-00865-034. Columbia County, FL.

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

A5. Latitude/Longitude: Lat. N29D55'08.8" Long. W082D46'04.9" 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 8

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

a) Square footage of crawlspace or enclosure(s)	<u>1140</u>	sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	<u>1</u>	
c) Total net area of flood openings in A8.b	<u>1024</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>NA</u>	sq ft
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	<u>NA</u>	
c) Total net area of flood openings in A9.b	<u>NA</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, Florida 120070		B2. County Name Columbia		B3. State Florida	
B4. Map/Panel Number 12023c0467	B5. Suffix c	B6. FIRM Index Date 1/6/1988	B7. FIRM Panel Effective/Revised Date 2/4/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 34'

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 LOCAL Vertical Datum NAVD88
Conversion/Comments

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	<u>30.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>36.50</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>NA</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>NA</u>	<input 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>35.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	<u>30.8</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	<u>30.6</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>30.7</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 Mark D. Duren		License Number Ls 4708	
Title Surveyor and Mapper		Company Name Mark D. Duren and Associates, Inc.	
Address 120 NW Burk Avenue, Suite 103		City Lake City	State FL ZIP Code 32055

Signature
LS 4708
9/8/2011
9/21/2011
Revision
W0# 11-193

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

Signature  Date 9/8/2011 Telephone 386-758-9831**IMPORTANT:** In these spaces, copy the corresponding information from Section A.

For Insurance Company Use:

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

Policy Number

198 SW Manatee Terrace

City Ft. White State FL ZIP Code 32038

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 One story frame dwelling on concrete block wall foundation creating a dirt floored enclosure (Line C2.a)). There is an opening in the concrete block wall that is within 1' of the grade for access to the crawl space. This is open at this time (see line A8.b) and A8.c)). There are openings for ventilation of the crawl space about 3" above grade. Finished or living area floor (Line C2.b)) is constructed on the top of this foundation wall. Equipment in line c2.e) is air conditioning unit on slab about 3" above grade.

Signature  Date 9/8/2011☐ 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

Mark D. Duren

Address 120 NW Burk Avenue, Suite 103

City Lake City

State FL

ZIP Code 32055

Signature Date

Telephone 386-758-9831

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.

1. ☐ 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.)
2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

34. Permit Number

G5. Date Permit Issued

G6. Date Certificate Of Compliance/Occupancy Issued

7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement3. Elevation of as-built lowest floor (including basement) of the building: feet meters (PR) Datum 9. BFE or (in Zone AO) depth of flooding at the building site: feet meters (PR) Datum 10. Community's design flood elevation feet meters (PR) Datum Local Official's Name Title Community Name Telephone Signature Date

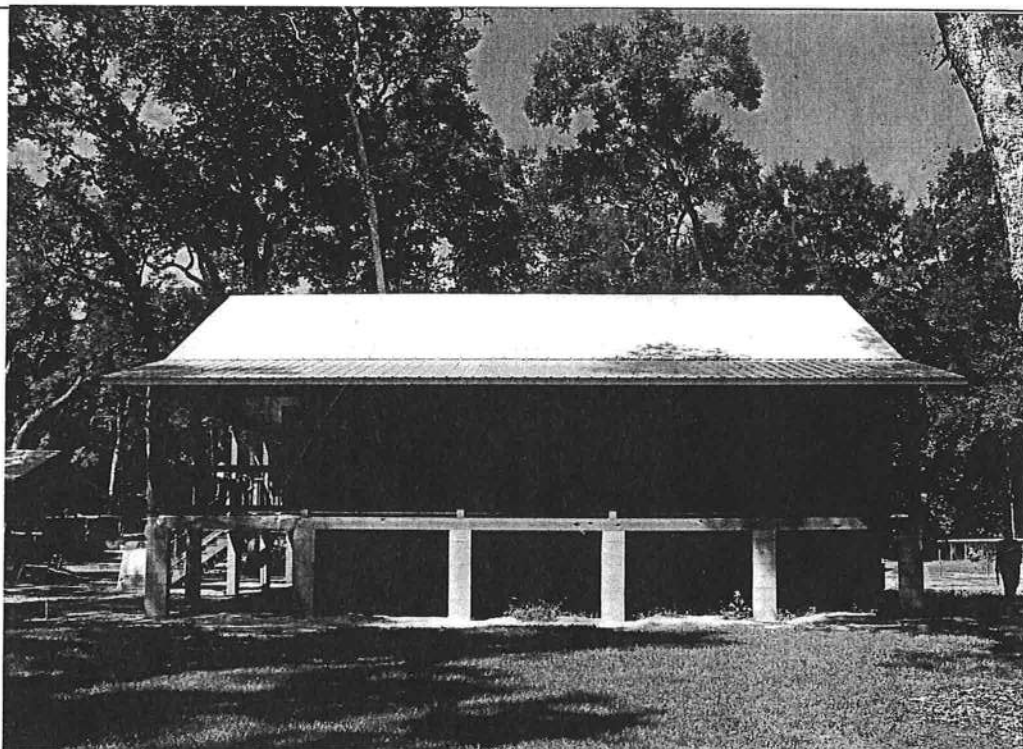
Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 498 SW Manatee Terrace	For Insurance Company Use: Policy Number
City Ft. White State FL ZIP Code 32038	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.

FRONT (EAST) VIEW
(9/7/2011)



RIGHT (SOUTH) VIEW
(9/7/2011)



Building Photographs

Continuation Page

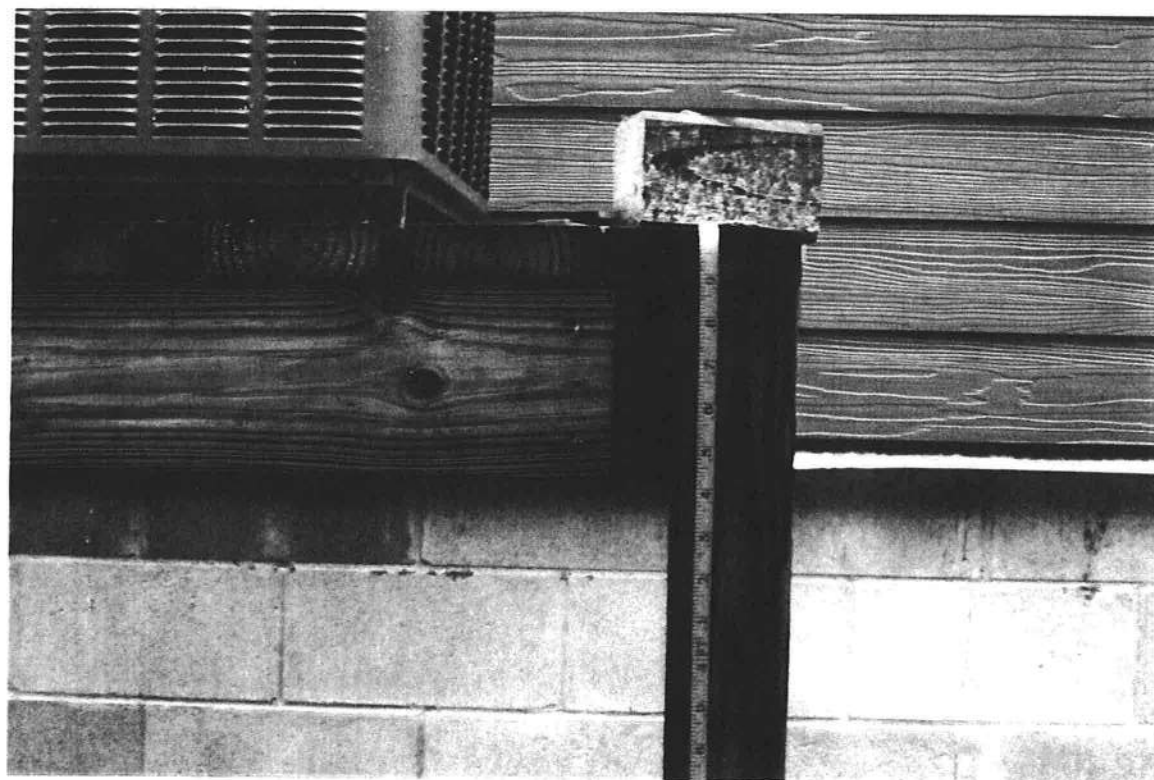
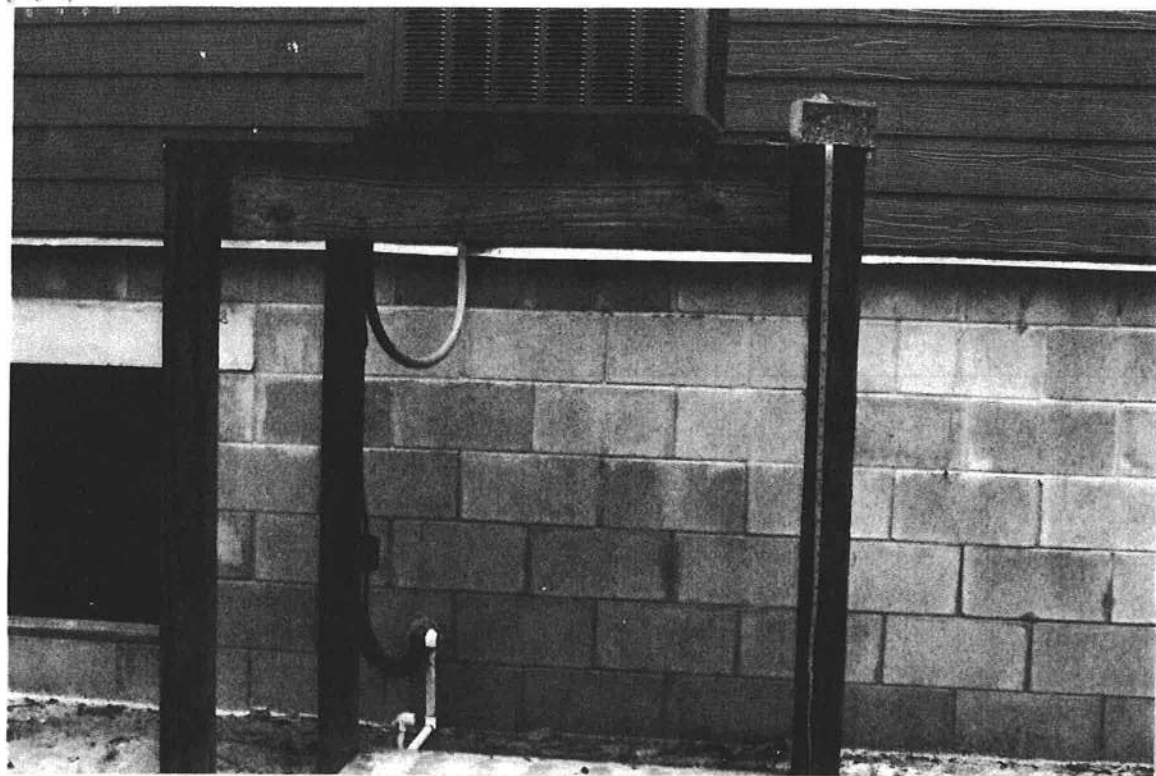
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 498 SW Manatee Terrace	For Insurance Company Use: Policy Number
City Ft. White State FL ZIP Code 32038	Company NAIC Number
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."	

REAR (WEST) VIEW
(9/7/2011)



LEFT (NORTH)VIEW
(9/7/2011)





Columbia County Building Department Culvert Permit

Culvert Permit No.
000001890

DATE 05/31/2011 PARCEL ID # 36-6S-15-00865-034

APPLICANT PAUL BARCIA PHONE 497-4770

ADDRESS 498 SW MANATEE TERR FORT WHITE FL 32038

OWNER PAUL BARCIA PHONE 497-4770

ADDRESS 384 SW RENO WAY FORT WHITE FL 32038

CONTRACTOR OWNER BUILDER

PHONE _____

LOCATION OF PROPERTY 47 S, R WILSON SPRINGS RD, R NEWARK DR, L BRIDGE LN,

R RENO WAY, PROPERTY ON LEFT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT THREE RIVERS ESTATES 34 12

SIGNATURE 

INSTALLATION REQUIREMENTS

☒ X

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 INSTALLATION 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 OFFICE OF THE SHERIFF

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 36-6S-15-00865-034

Building permit No. 000029438

Use Classification SFD, UTILITY

Fire: 6.42

Permit Holder OWNER BUILDER

Waste: 16.75

Owner of Building PAUL BARCIA/MARYLAND LANE, LLC

Total: 23.17

Location: 384 SW RENO WAY, FORT WHITE, FL 32038

Date: 09/21/2011

[Signature]

Building Inspector



POST IN A CONSPICUOUS PLACE
(Business Places Only)

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name Maryland Lane, LLC		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 498 SW Manatee Terrace		Company NAIC Number
City Ft. White State FL ZIP Code 32038		
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 34, Unit 12, Three Rivers Estates, PB 4, Pages 117-117A. Tax Parcel No. 00-00-00-00865-034. Columbia County, FL.		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)		Residential
A5. Latitude/Longitude: Lat. N29D55'08.8" Long. W082D46'04.9"		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 8		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s)	1140 sq ft	a) Square footage of attached garage
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	1	b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade
c) Total net area of flood openings in A8.b	1024 sq in	c) Total net area of flood openings in A9.b
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		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, Florida 120070		B2. County Name Columbia		B3. State Florida	
B4. Map/Panel Number 12023c0467	B5. Suffix c	B6. FIRM Index Date 1/6/1988	B7. FIRM Panel Effective/Revised Date 2/4/2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 34'

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 ☐ Vertical Datum ☐
 Conversion/Comments ☐

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	30.5	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	36.50	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	NA. <input type="checkbox"/>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	NA. <input type="checkbox"/>	<input 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)	30.8	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	30.5	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	30.6	<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	30.7	<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 Mark D. Duren License Number Ls 4708

Title Surveyor and Mapper Company Name Mark D. Duren and Associates, Inc.

Address 120 NW Burk Avenue, Suite 103 City Lake City State FL ZIP Code 32055

Mark D. Duren
LS 4708
9/8/2011
w# 11-193

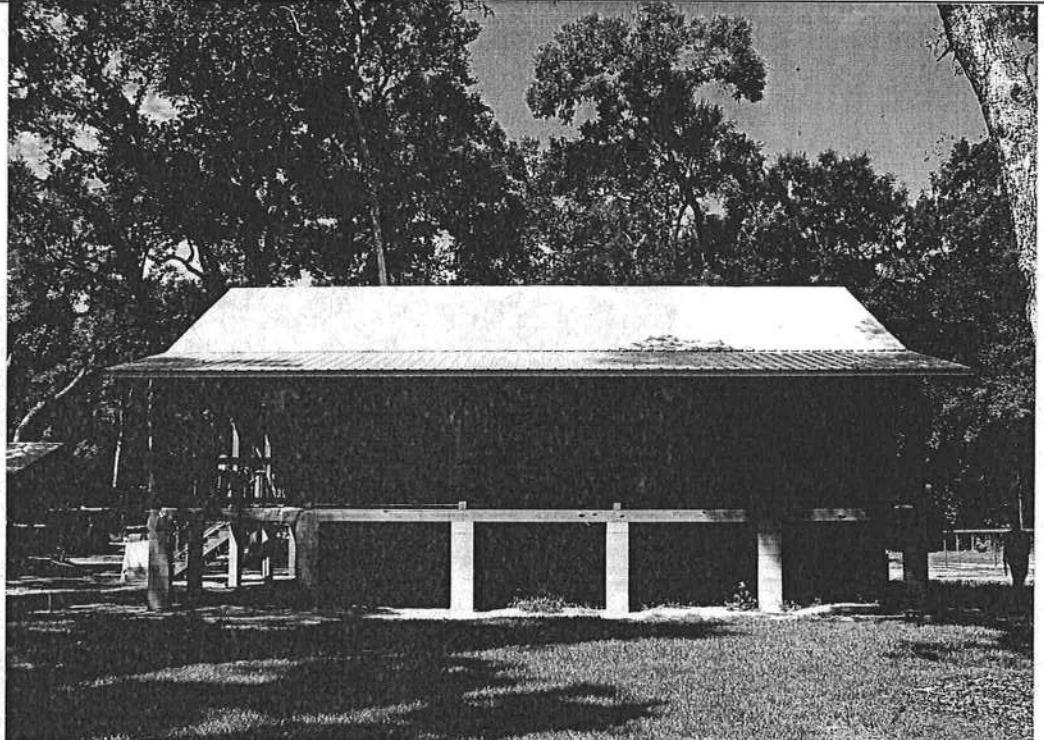
Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 498 SW Manatee Terrace	For Insurance Company Use: Policy Number
City Ft. White State FL ZIP Code 32038	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.

FRONT (EAST) VIEW
(9/7/2011)



RIGHT (SOUTH) VIEW
(9/7/2011)



Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 498 SW Manatee Terrace	For Insurance Company Use: Policy Number
City Ft. White State FL ZIP Code 32038	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 (WEST) VIEW
(9/7/2011)



LEFT (NORTH)VIEW
(9/7/2011)



SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

Signature  Date 9/8/2011 Telephone 386-758-9831**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.

498 SW Manatee Terrace

City Ft. WhiteState FL ZIP Code 32038

For Insurance Company Use:

Policy Number

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 One story frame dwelling on concrete block wall foundation creating a dirt floored enclosure (Line C2.a)). There is an opening in the concrete block wall that is within 1' of the grade for access to the crawl space. This is open at this time (see line A8.b) and A8.c)). There are openings for ventilation of the crawl space about 3' above grade. Finished or living area floor (Line C2.b)) is constructed on the top of this foundation wall. Equipment in line c2.e) is air conditioning unit on slab about 3" above grade.

Signature  Date 9/8/2011☐ 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

Mark D. Duren

Address 120 NW Burk Avenue, Suite 103

City Lake City

State FL

ZIP Code 32055

Signature Date

Telephone 386-758-9831

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