

DATE 03/10/2011

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000029238

APPLICANT JOHN ANDY SHIPP PHONE 386-867-6340
ADDRESS 355 NE LAVERNE STREET LAKE CITY FL 32055
OWNER MARY L. DAVIS PHONE 386-867-6340
ADDRESS 260 NW WEIGHTY GLN LAKE CITY FL 32055
CONTRACTOR JOHN SHIPP PHONE 386-867-6340
LOCATION OF PROPERTY 41-N TO BAUGHN RD, TL TO PARNELL, TL ON WEIGHTY GLN, TR
AND IT'S THE 3RD LOT ON L.
TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00
HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES
FOUNDATION WALLS ROOF PITCH FLOOR
LAND USE & ZONING ESA-2 MAX. HEIGHT 35
Minimum Set Back Requirements: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE AE DEVELOPMENT PERMIT NO. 11-003

PARCEL ID 32-2S-16-01812-015 SUBDIVISION AKA PARCEL NO 11
LOT BLOCK PHASE UNIT TOTAL ACRES 5.00

IH1025240
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
EXISTING 1795 10-0460 BK TC N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: MINIMUM FLOOR ELEVATION SET @ 88.0', NEED ELEVATION CERTIFICATE

BEFORE POWER, ONE FOOT RISE LETTER REC'D

Check # or Cash CASH

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic
date/app. by date/app. by date/app. by
Under slab rough-in plumbing Slab Sheathing/Nailing
date/app. by date/app. by date/app. by
Framing Insulation
date/app. by date/app. by
Rough-in plumbing above slab and below wood floor Electrical rough-in
date/app. by date/app. by
Heat & Air Duct Peri. beam (Lintel) Pool
date/app. by date/app. by date/app. by
Permanent power C.O. Final Culvert
date/app. by date/app. by date/app. by
Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by date/app. by
Reconnection RV Re-roof
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00
MISC. FEES \$ 300.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 44.94 WASTE FEE \$ 117.25
FLOOD DEVELOPMENT FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 587.19
INSPECTORS OFFICE La. Hb CLERKS OFFICE CH

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

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

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT 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 INSPECTION.

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

For Office Use Only

(Revised 1-10-08)

Zoning Official

Building Official

AP#

1102-27

Date Received

2/14

By

Permit #

29238

Flood Zone

AE

Development Permit

YES

Zoning

ESA-2

Land Use Plan Map Category

ESA

Comments

1' Soot Rise Letter

Culvert Permit # 1795

FEMA Map#

0190C

Elevation

87.0'

Finished Floor

88.0'

River

Suwannee

In Floodway

N/A

☒ Site Plan with Setbacks Shown ☒ EH # 10-0460 ☐ EH Release ☒ Well letter ☐ Existing well☒ Recorded Deed or Affidavit from land owner ☒ Letter of Auth from installer ☐ State Road Access☐ Parent Parcel #☐ STUP-MH☐ F W Comp. letter

IMPACT FEES: EMS

Fire

Corr

Road/Code

\$15.00 fee

School

= TOTAL

Suspended

Vf form

Pre Insp

☒ CERT of Risk ☒ Bond☒ Blocking Diagram 2sh

Property ID #

32-25-16-01812-015

Subdivision

☐ New Mobile Home ☒ Used Mobile Home ☒ MH Size 28x40 year 1982☒ Applicant John Shipp Phone # 386-867-6340☐ Address 355 NE Leverage St☐ Name of Property Owner MARY DAVES Phone # 386-623-7447☒ 911 Address 260 NW Weightly Gl. L.C. 32055☐ Circle the correct power company - ☒ FL Power & Light - ☐ Clay Electric
(Circle One) - ☒ Suwannee Valley Electric ☐ Progress Energy☐ Name of Owner of Mobile Home MARY DAVES Phone # 386-623-7447☐ Address 260 NW Weightly Gl. L.C. 32055☐ Relationship to Property Owner SELF☐ Current Number of Dwellings on Property 1☐ Lot Size 335 x 638 x 335 x 638 Total Acreage 5☐ Do you : Have ☒ Existing Drive or ☐ Private Drive or need ☒ Culvert Permit or ☐ Culvert Waiver (Circle one)
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)☐ Is this Mobile Home Replacing an Existing Mobile Home NO (over)☐ Driving Directions to the Property 41 N, (1) Baughn Rd, (2) Parnell Ave,
(12) Weightly Glen, 3rd lot on (12)☐ Name of Licensed Dealer/Installer John Shipp Phone # 386-867-6340☐ Installers Address 355 NE Leverage St, L.C. 71 32055☐ License Number Installation Decal #

IH1025240

5248

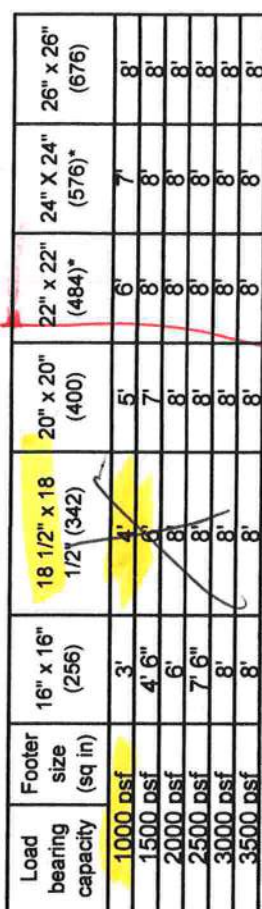
587.19

page 1 of 2

$$18\frac{1}{2} \times 18\frac{1}{2} \text{ p.d.s}$$

1A1E AB 453203540

PIER SPACING TABLE FOR USED HOMES



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

POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

108 x 108

9/8/6

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

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

ANCHORS

Opening	Pier pad size
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
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83	83
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85	85
86	86
87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

5 ft

FRAME TIES

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

TIEDOWN COMPONENTS

OTHER TIES

Number

Longitudinal Stabilizing Device (LSD)

Sidewall

Longitudinal

Longitudinal Stabilizing Device w/ Lateral Arms

Marriage wall

Shearwall

POCKET PENETROMETER TEST

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

X _____

X _____

X _____

POCKET PENETROMETER TESTING METHOD

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

X _____

X _____

X _____

TORQUE PROBE TEST

The results of the torque probe test is 270 inch pounds or check here if you are declaring 5' anchors without testing. A test showing 275 inch pounds or less will require 4 foot anchors.

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

Installer's initials

ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

Electrical

Plumbing

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

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

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

Site Preparation

Debris and organic material removed _____ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor: Type Fastener: log Bolt Length: 9' Spacing: 2 ft
Walls: Type Fastener: _____ Length: _____ Spacing: _____
Roof: Type Fastener: log Bolt Length: 5' Spacing: 4 ft

For used homes 9/16 in. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

Gasket (weatherproofing requirement)

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

Installer's initials

Type gasket

lam

Installed:

Between Floors Yes _____
Between Walls Yes _____
Bottom of ridgebeam Yes _____

Weatherproofing

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

Miscellaneous

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

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

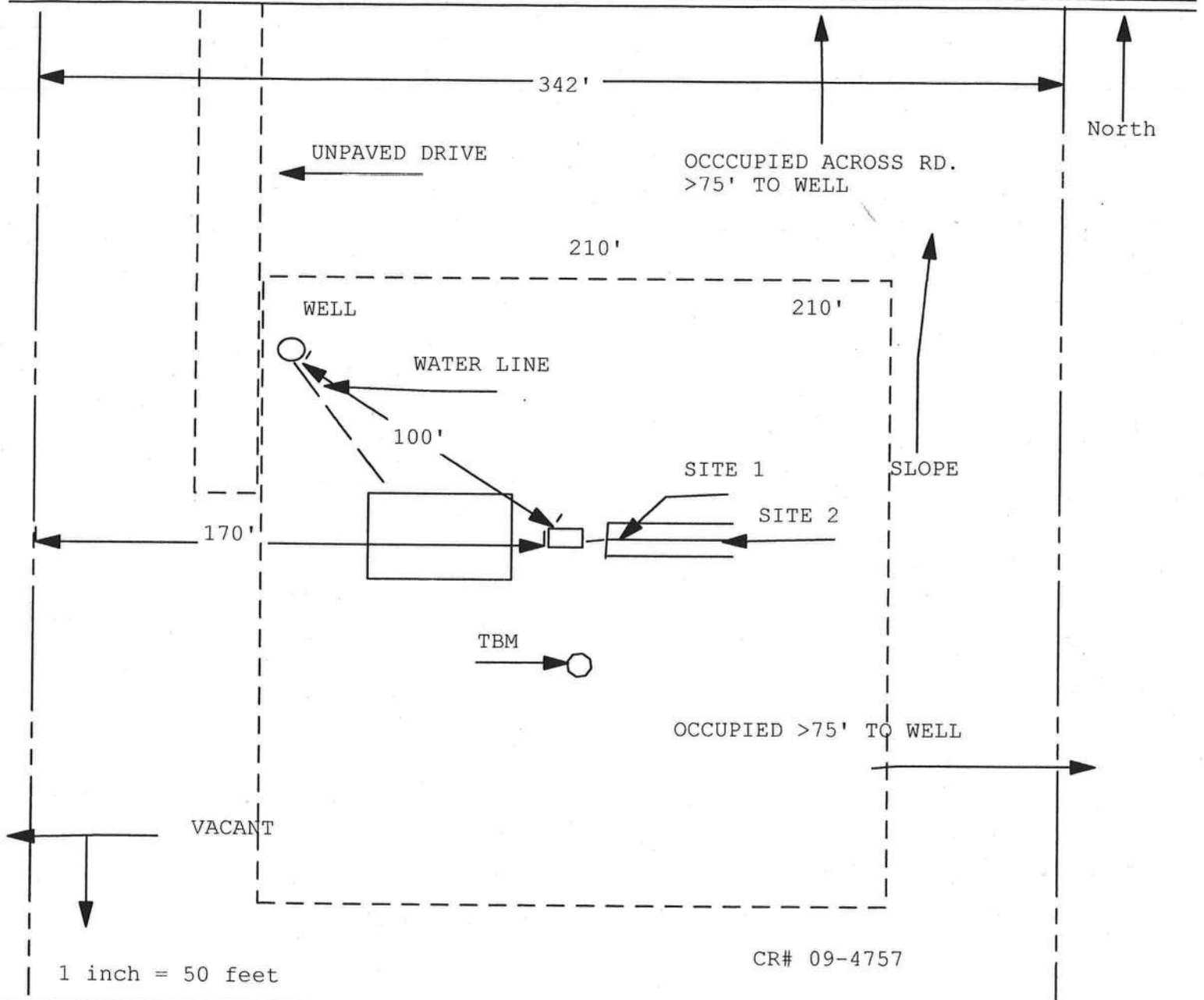
Installer Signature

John Slipp

Date Feb 14 2011

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 10-0460

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul R. Ford Date 6/11/10
Plan Approved X Not Approved Date 10-21-10
By Salhe Ford - EH Director **Columbia CHD** CPHU

Notes: _____

\$50.00 fee

CODE ENFORCEMENT
PRELIMINARY MOBILE HOME INSPECTION REPORT

DATE RECEIVED 12-21-10 BY LH ^{NO Application} IS THE M/H ON THE PROPERTY WHERE THE PERMIT WILL BE ISSUED? NO

OWNERS NAME Mary Davis PHONE _____ CELL 623-7447

ADDRESS _____

MOBILE HOME PARK _____ SUBDIVISION _____

DRIVING DIRECTIONS TO MOBILE HOME Freedom MH Sales (Mike Cox Salesman)

MOBILE HOME INSTALLER ? PHONE _____ CELL _____

MOBILE HOME INFORMATION

MAKE Suncoast YEAR 82 SIZE 8 x 40 COLOR Tan

SERIAL No. 6712AB 45320540

WIND ZONE II Must be wind zone II or higher NO WIND ZONE I ALLOWED

INSPECTION STANDARDS

INTERIOR:

(P or F) - P=PASS F=FAILED

✓ SMOKE DETECTOR () OPERATIONAL () MISSING

F FLOORS () SOLID () WEAK () HOLES DAMAGED LOCATION _____

✓ DOORS () OPERABLE () DAMAGED

✓ WALLS () SOLID () STRUCTURALLY UNSOUND

✓ WINDOWS () OPERABLE () INOPERABLE

✓ PLUMBING FIXTURES () OPERABLE () INOPERABLE () MISSING

✓ CEILING () SOLID () HOLES () LEAKS APPARENT

✓ ELECTRICAL (FIXTURES/OUTLETS) () OPERABLE () EXPOSED WIRING () OUTLET COVERS MISSING () LIGHT FIXTURES MISSING

EXTERIOR:

F WALLS / SIDING () LOOSE SIDING () STRUCTURALLY UNSOUND () NOT WEATHERTIGHT () NEEDS CLEANING

✓ WINDOWS () CRACKED/ BROKEN GLASS () SCREENS MISSING () WEATHERTIGHT

✓ ROOF () APPEARS SOLID () DAMAGED

STATUS

APPROVED ✓ WITH CONDITIONS: Rotten or weak siding - replace
Wall in dining room repair - Floor at backdoor repair

NOT APPROVED _____ NEED RE-INSPECTION FOR FOLLOWING CONDITIONS _____

SIGNATURE [Signature] ID NUMBER 402 DATE 12-22-10

A&B Well Drilling, Inc.

5673 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 758-3409
Cell: (386) 623-3151
Fax: (386) 758-3410
Owner: Bruce Park

December 27, 2010

To: Columbia County Building Department

Description of Well to be installed for Customer

Located @ Address:

MARY DAVIS
2600 NW Weighty Glen
LAKE CITY 32055

1 HP 15 GPM submersible pump, 1 1/4" drop pipe, 86 gallon captive tank, and backflow prevention.
With SRWMD permit.

Bruce N. Park
Sincerely,
Bruce N. Park
President

Return to: Mary Davis
896 NW Everett Terrace
White Springs, Florida 32096
Parcel ID No: 01812-015

Inst:201012003360 Date:3/5/2010 Time:3:55 PM
Doc Stamp-Deed:0.70
Ras DC.P.DeWitt Cason,Columbia County Page 1 of 1 B:1190 P:360

Quit Claim Deed

Made this MARCH 5, 2010 A.D.

By **MARY L. DAVIS**, a married woman, who does not reside on this property, hereinafter called the grantor,

To **MARY L. DAVIS and RICHARD F. DAVIS, SR, wife and husband** whose post office address is: 896 NW Everett Terrace, White Springs, Florida 32096 hereinafter called the grantee:

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal re-presentatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth, that the grantor, for and in consideration of the sum of \$ TEN AND NO/100 DOLLARS (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, does hereby remise, release, and quit claim unto the grantee forever, all the right, title, interest, claim and demand which the said grantor has in and to, all that certain land situate in Columbia County, Florida, viz:

TOWNSHIP 2 SOUTH, RANGE 16 EAST

SECTION 32: The E 1/2 of the SW 1/4 of the NE 1/4 of the NE 1/4, Section 32, Township 2 South, Range 16 East, Except the North 25.00 feet thereof for road and Utility purposes. a/k/a Parcel No. 11
IN COLUMBIA COUNTY, FLORIDA

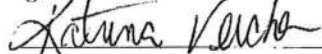
NB: Said Property is not the homestead of the Grantor under the laws and constitution of the State of Florida in that neither Grantor nor any members of the household of Grantor reside thereon.

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

To Have and to Hold, the same together with all and singular the appurtenances thereunto belonging or in anywise appertaining, and all the estate, right, title, interest, lien, equity and claim whatsoever of the said grantor, either in law or equity, to the only proper use, benefit and behoof of the said grantee forever.

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:



Witness

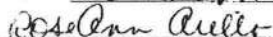
Printed Name

Katrina Vercher



MARY L. DAVIS

(Seal)



Witness

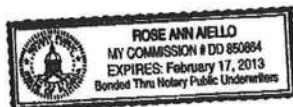
Printed Name

RoseAnn Aiello

(Seal)

State of Florida
County of COLUMBIA

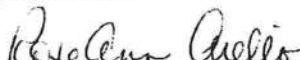
The foregoing instrument was acknowledged before me this 5 day, of MARCH, 2010, by MARY L. DAVIS, who is personally known to me or who has produced FL DL as identification.



Notary Public

Print Name:

My Commission Expires:



RoseAnn Aiello

02/17/2013

Columbia County Property Appraiser

DB Last Updated: 11/4/2010

2010 Tax Year

Parcel: 32-2S-16-01812-015

<< Next Lower Parcel

Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

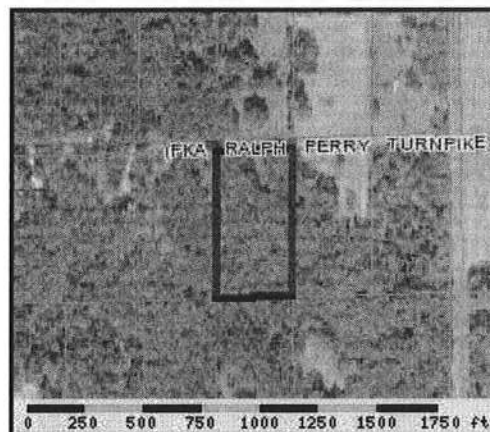
Interactive GIS Map

Print

Owner & Property Info

Search Result: 1 of 1

Owner's Name	DAVIS MARY L & RICHARD F SR		
Mailing Address	896 NW EVERETT TER WHITE SPRINGS, FL 32096		
Site Address	EVERETT TER		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	32216
Land Area	4.920 ACRES	Market Area	03
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
E1/2 OF SW1/4 OF NE1/4 OF NE1/4 EX N 25 FT FOR RD R/W. (AKA PARCEL NO 11) ORB 613-173, 901-49, QUIETING TITLE CS #00-467-CA 921-1655, WD 1189-2228, QCD 1190-360,			



Property & Assessment Values

2010 Certified Values		
Mkt Land Value	cnt: (0)	\$14,765.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$14,765.00
Just Value		\$14,765.00
Class Value		\$0.00
Assessed Value		\$14,765.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$14,765 Other: \$14,765 Schl: \$14,765	

2011 Working Values

NOTE:
2011 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
3/5/2010	1190/360	QC	V	U	11	\$100.00
2/23/2010	1189/2228	WD	V	Q	01	\$20,000.00
4/17/2000	901/49	TD	V	U	01	\$4,700.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
			NONE			

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
						NONE

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
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SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ PHONE _____

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

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

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

ELECTRICAL ✓	Print Name <u>Richard Davis</u> License #: <u>Owner</u>	Signature <u>[Signature]</u> Phone #: _____
MECHANICAL/A/C ✓	Print Name <u>Richard Davis</u> License #: <u>Owner</u>	Signature <u>[Signature]</u> Phone #: _____
PLUMBING/GAS ✓	Print Name <u>Richard Davis</u> License #: <u>Owner</u>	Signature <u>[Signature]</u> Phone #: _____
ROOFING	Print Name <u>John A. Smith</u> License #: <u>TH0000329 R607 Cap</u>	Signature <u>[Signature]</u> Phone #: <u>367 6340</u>
SHEET METAL NA	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/SPRINKLER NA	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR NA	Print Name _____ License #: _____	Signature _____ Phone #: _____

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

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

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: 3/22/2010 **DATE ISSUED:** 3/25/2010

ENHANCED 9-1-1 ADDRESS:

260 NW WEIGHTTY GLN

LAKE CITY FL 32055

PROPERTY APPRAISER PARCEL NUMBER:

32-2S-16-01812-015

Remarks:

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 AND REHABILITATIVE SERVICES
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS & Chapter 10D-6, FAC

PERMIT #
DATE PAID
FEE PAID \$
RECEIPT #
CR #

10-0460
980545
310.00
10/1/10
1509942
09-4757

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Temporary/Experimental System
☐ Repair ☐ Abandonment ☐ Other (Specify) _____

APPLICANT: MARY & RICHARD DAVIS

TELEPHONE: 623-7447

AGENT: _____

MAILING ADDRESS: 260 NW Wright GL CITY: LAKE CITY STATE: FL ZIP: 32055

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 10D-6, FLORIDA ADMINISTRATIVE CODE.

PROPERTY INFORMATION [IF LOT IS NOT IN A RECORDED SUBDIVISION, ATTACH LEGAL DESCRIPTION OR DEED]

LOT: _____ BLOCK: _____ SUBDIVISION: MEETS & BOUNDS DATESUBD: _____

PROPERTY ID #: 32-2S-16-01812-015 [Section/Township/Range/Parcel] ZONING: AG

PROPERTY SIZE: 4.92 ACRES [Sqft/43560] PROPERTY WATER SUPPLY: ☒ PRIVATE ☐ PUBLIC

PROPERTY STREET ADDRESS: 260 WRIGHT WAY 260 NW Weighty GL

DIRECTIONS TO PROPERTY: US 41 NORTH TURN LEFT ON BAUHN RD. TURN LEFT ON PARNELL AVE. TURN RIGHT ON WEIGHT WAY LOT 3ED ON RIGHT.

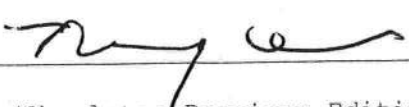
BUILDING INFORMATION ☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	# Persons Served	Business Activity For Commercial Only
1	<u>MOBILE HOME</u>	<u>3</u>	<u>1296</u>	<u>4</u>	
2					
3					
4					

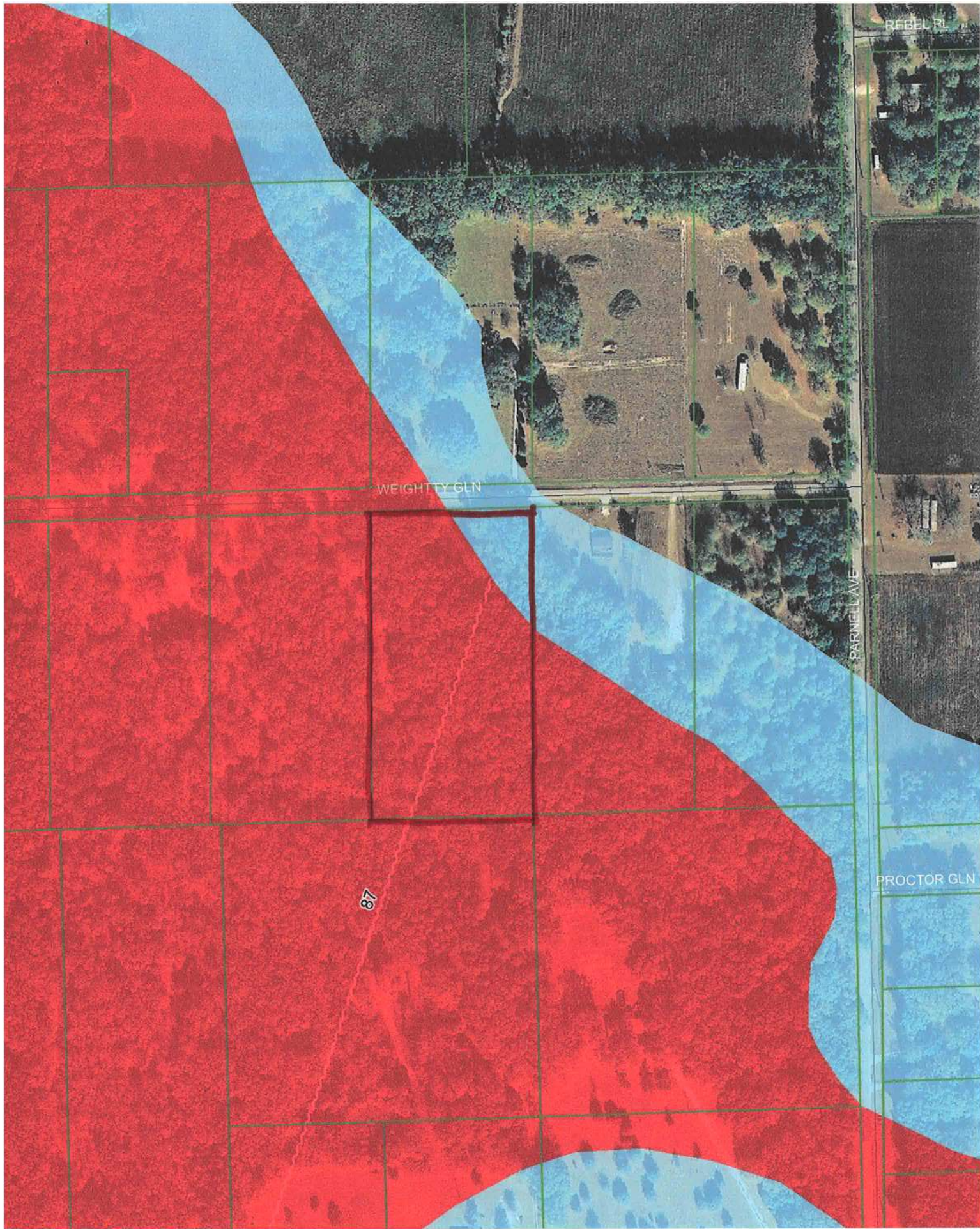
☐ Garbage Grinders/Disposals
☐ Ultra-low Volume Flush Toilets

☐ Spas/Hot Tubs
☐ Other (Specify) _____

☐ Floor/Equipment Drains

APPLICANT'S SIGNATURE: 

DATE: 10/1/10



1102-27



GTC Design Group, LLC
176 NW Lake Jeffery Rd
Lake City, FL 32055
(Phone) 386.719.9985
(Fax) 386.719.8828
cww@gtcdesigngroup.com

ONE FOOT RISE ANALYSIS AND CERTIFICATION 100 YEAR BASE FLOOD

PROJECT DATA

PARCEL ID

32-2S-16-01812-015

PROPERTY DESCRIPTION

E1/2 OF SW1/4 OF NE1/4 OF NE1/4 EX N 25 FT FOR RD R/W. (AKA PARCEL NO 11) ORB 613-173, 901-49, QUIETING TITLE CS #00-467-CA 921-1655, WD 1189-2228, QCD 1190-360,

OWNER

Richard F Sr. and Mary L Davis

PROJECT DESCRIPTION

RESIDENTIAL DWELLING (MOBILE HOME)

FLOOD ZONE

AE, Panel 12023C10190C

EXISTING LOT GRADE ELEVATION (AT BUILDING LOCATION)


± 85' to 90', ELEVATION BASED ON QUAD MAP (SEE ATTACHED QUAD MAP)

CONCLUSIONS

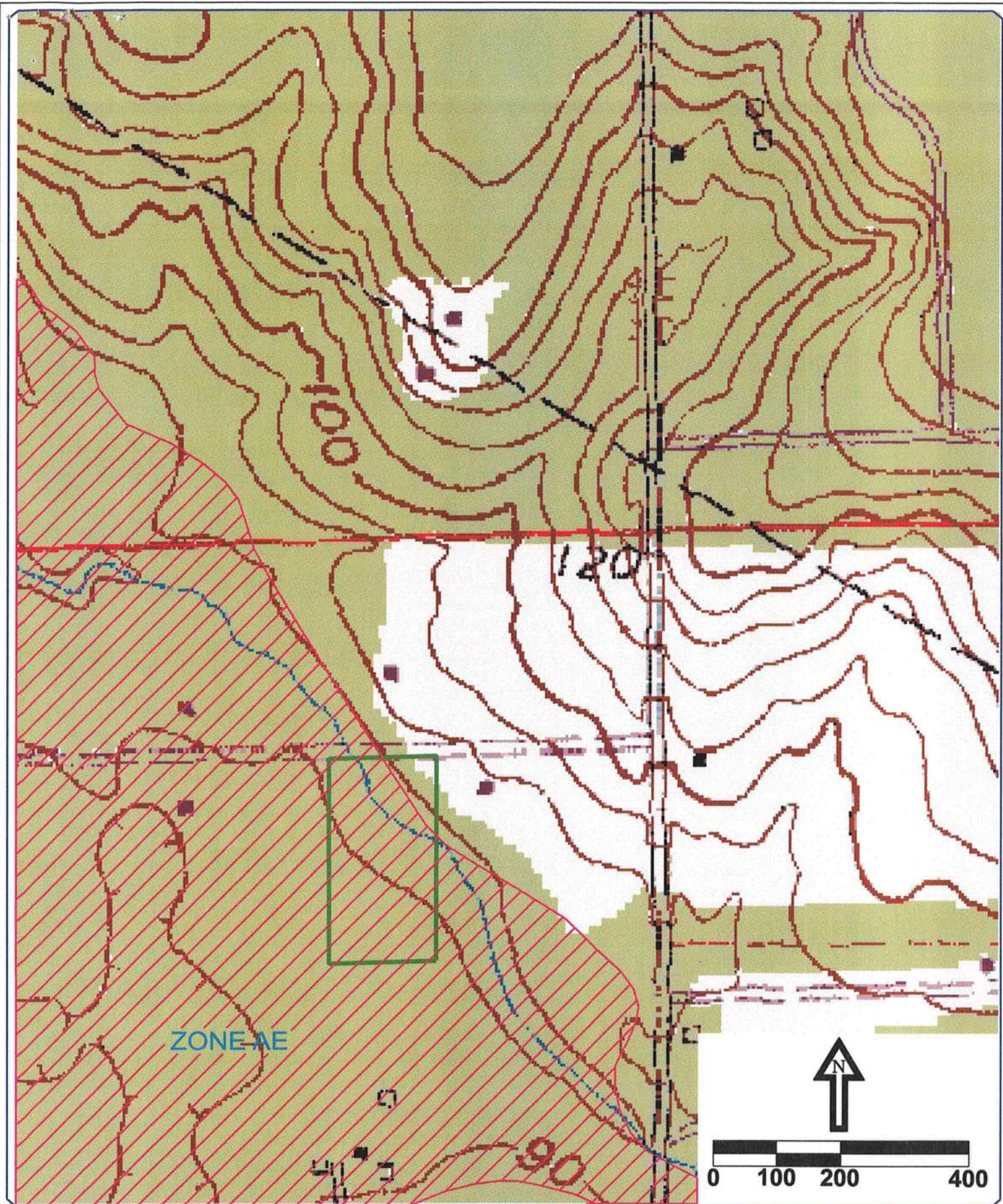
A new mobile home is proposed to be set up on the abovementioned parcel. This new set up should include an increase in volume from only the concrete block piers of less than 225 CF within the flood zone. This additional volume would raise the flood elevation **ONLY** +/- 0.001 ft, **IF** the flood zone was **ONLY** the 4.92 acres of the property. The flood zone is much larger.

CERTIFICATION

I hereby certify that to the best of my knowledge the construction of the abovementioned residence will increase the flood elevations less than one foot at the project location.



2-22-2011
Chad Williams, P.E. 63144



RICHARD & MARY DAVIS

FEMA FLOOD ZONE



GTC Design Group, LLC.
Auth. # 9481
Structural / Civil Engineers
www.gtcdesigngroup.com

P.O. BOX 187
130 W HOWARD ST
LIVE OAK FL, 32084
PHONE: (386) 382-3678
FAX: (386) 382-6133

178 NW LAKE JEFFREY RD
LAKE CITY, FL 32055
Phone: (386) 719-9985
Fax: (386) 719-8628

PROJECT NUMBER

PF11-999

SHEET

Q1

32-2S-16-01812-015
DAVIS MARY L & RICHARD F SR
4.92AC | 2/23/2010 - \$20,000 - VQ

Columbia County Property Appraiser

J. Doyle Crews - Lake City, Florida 32055 | 386-758-1083

PARCEL: 32-2S-16-01812-015 - VACANT (000000)

E1/2 OF SW1/4 OF NE1/4 OF NE1/4 EX N 25 FT FOR RD R/W. (AKA PARCEL NO 11) ORB 613-173, 901-49, QUIETING TITLE
CS #00-467-CA 921-1655, WD 1189-2228, QC

Name:	DAVIS MARY L & RICHARD F SR	
Site:	EVERETT TER	
Mail:	896 NWEVERETT TER	
	WHITE SPRINGS, FL 32096	
Sales	3/5/2010	\$100.00 V/U
Info	2/23/2010	\$20,000.00 V/Q

2010 Certified Values	
Land	\$14,765.00
Bldg	\$0.00
Assd	\$14,765.00
Exmpt	\$0.00
Cnty:	\$14,765
Taxbl	
Other:	\$14,765 Schl: \$14,765

NOTES:

This information, GIS Map Updated: 2/17/2011, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

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GrizzlyLogic.com



Columbia County, Florida Planning & Zoning Department

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

17 February 2011

John Shipp
355 Northeast Laverne Street
Lake City, FL 32055

RE: Mobile Home move-on Permit Application 1102-27, Mary and Richard Davis

Dear Mr. Shipp:

*Rec'd
2-23-11*

The above referenced application for a mobile home is located within the 100 year flood zone (Zone AE) with a base flood elevation of 87 feet (88NAVD) in accordance with the FEMA Flood Insurance Rate Maps (FIRM) effect as of 4 February 2009. Under the County's Land Development Regulations (LDR's) a one (1) foot rise letter signed and seal by an engineer stating that the structure once placed on the property will not cause the flood waters to rise greater than one (1) foot, including calculations will need to be submitted. This will need to be provided and reviewed for approval prior to the permit being issued. In addition, the finished floor elevation with any or all machinery and or equipment servicing the mobile home also to be one (1) foot above the FEMA determined flood elevation referenced above. Once the mobile home has been installed, an elevation certification from a surveyor will be required before permanent power will be released.

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

Sincerely,

A handwritten signature in black ink, appearing to read "Brian L. Kepner".

Brian L. Kepner
Land Development Regulation Administrator,
County Planner

Development Permit
F 023- 11-003

FLOOD ZONE AE BY BK 2-4-2009 FIRM COMMUNITY # 120070 - PANEL # 0190C
FIRM 100 YEAR ELEVATION 87' PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 88'
IN THE REGULATORY FLOODWAY YES or NO RIVER Suwannee
SURVEYOR / ENGINEER NAME Chad Williams LICENSE NUMBER 63144

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED _____

COMMENTS

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



29238



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

A1. Building Owner's Name		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Policy 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: ☐ 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 _____
- 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	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)?
Designation Date _____ ☐ CBRS ☐ OPA ☐ Yes ☐ No

Comments: _____

Date of Review: 30 JUNE 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.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Richard & Mary Davis		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 260 NW Weighty Glenn		Policy Number
City Lake City State FL ZIP Code 32055		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 32-2S-16-01812-015		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential		
A5. Latitude/Longitude: Lat. 30°16.566' Long. 082°43.821'		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 5		
A8. For a building with a crawlspace or enclosure(s):		
a) Square footage of crawlspace or enclosure(s)	N/A	sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade	N/A	
c) Total net area of flood openings in A8.b	N/A	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	N/A	sq ft
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade	N/A	
c) Total net area of flood openings in A9.b	N/A	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 120070		B2. County Name Columbia		B3. State FL	
B4. Map/Panel Number 12023C0190C	B5. Suffix C	B6. FIRM Index Date Feb 04, 2009	B7. FIRM Panel Effective/Revised Date Feb 04, 2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 87.00
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) See comments sheet					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date N/A <input type="checkbox"/> CBRS <input type="checkbox"/> 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 See Comments Vertical Datum NAVD 88
Conversion/Comments See attached conversion sheet


Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor)	88.15	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	N/A	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	N/A	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	N/A	<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)	89.4	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG)	85.2	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG)	85.5	<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	N/A	<input 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 L. Scott Britt	License Number PSM 5757
Title Chief Surveyor	Company Name Britt Surveying & Associates, Inc.
Address 830 W. Duval St.	City Lake City State FL ZIP Code 32055
Signature 	Date 06/03/11 Telephone 386-752-7163

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.

260 NW Weighty Glenn

City Lake City State FL ZIP Code 32055

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 L-20919

See Attached comments sheet


Signature L. Scott Britt

Date 06/03/11

☒ 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

Address City State ZIP Code

Signature Date Telephone

Comments

☐ Check here if attachments**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. 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 ImprovementG8. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ feet ☐ meters (PR) Datum _____G9. BFE or (in Zone AO) depth of flooding at the building site: _____ ☐ feet ☐ meters (PR) Datum _____G10. Community's design flood elevation _____ ☐ feet ☐ meters (PR) Datum _____

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

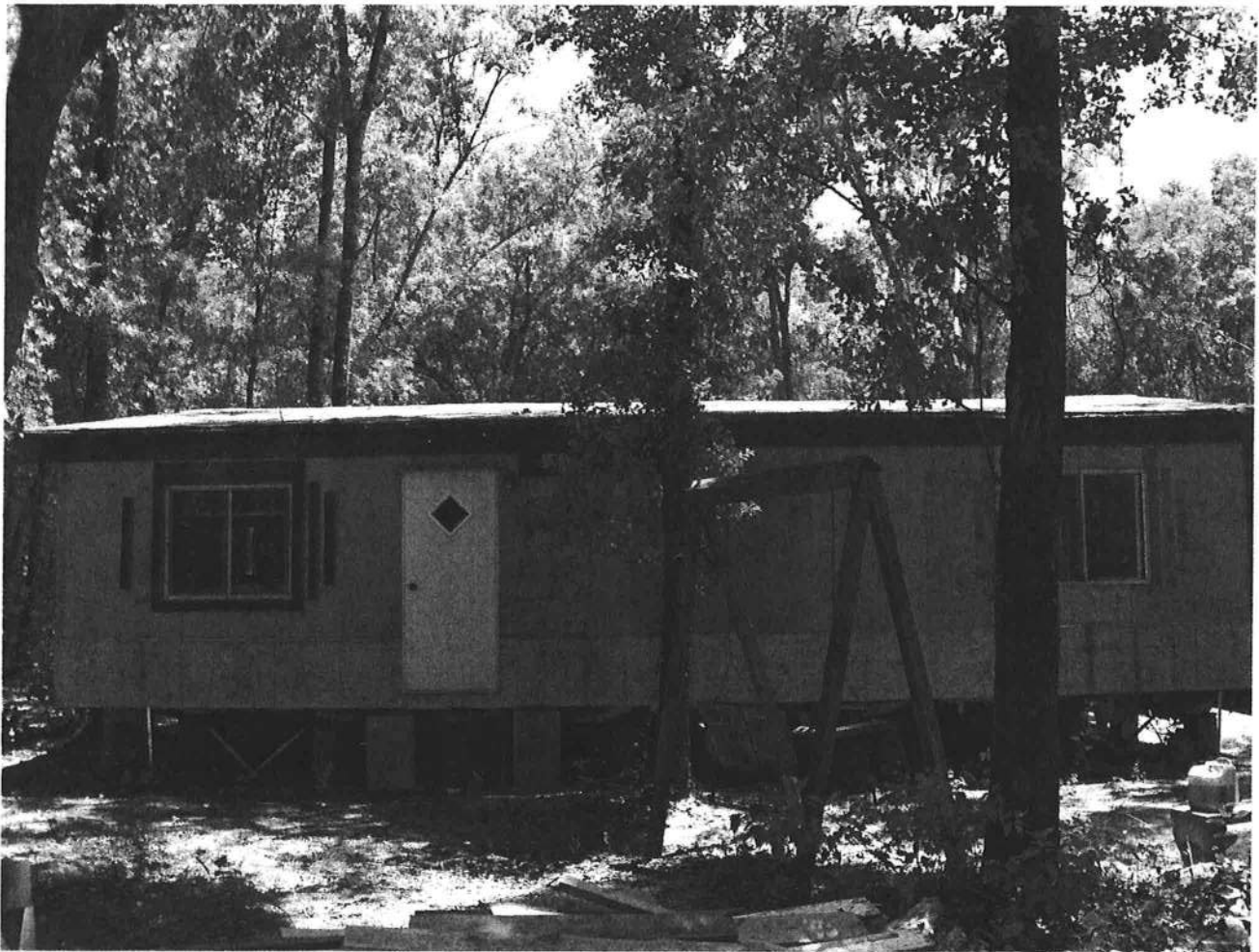
☐ Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 260 NW Weighty Glenn	For Insurance Company Use:
City Lake City State FL ZIP Code 32055	Policy Number
	Company NAIC Number
<p>If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.</p>	

Front View



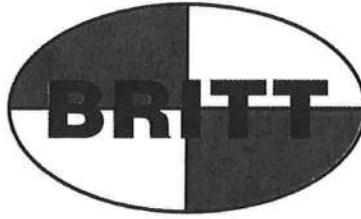
Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 260 NW Weighty Glenn	For Insurance Company Use:
City Lake City State FL ZIP Code 32055	Policy Number
	Company NAIC Number
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."	

Rear View





BRITT SURVEYING

Land Surveyors and Mappers

LAKE CITY • VENICE • SARASOTA

Section A

- A1 No additional comment
- A2 The address is per Mrs. Davis
- A3 – A4 No additional comment
- A5 Hand Held GPS coordinate at the center of building along the center of the front wall
- A6 No additional comment
- A7 Concrete Block building on grade
- A8 None
- A9 None

Section B

- B1 – B7 No additional comment
- B8 This building appears to be in Zone AE as per the attached flood report.
- B9 – B10 We have attached the flood report based on the FIS and the FIRM
- B11 – B12 No additional comment

Section C

- C1 No additional comment
- C2 There is a benchmark set in a 14" oak tree near the residence at an elevation of 88.00 feet NAVD 88 datum.
- C2 a Premanufactured home
- C2 b-c No additional comment
- C2 d No attached garage
- C2 e The electrical meter canister.
- C2 f - h No additional comment

Section D

No additional comment

Section E

No additional comment

Section F

No additional comment

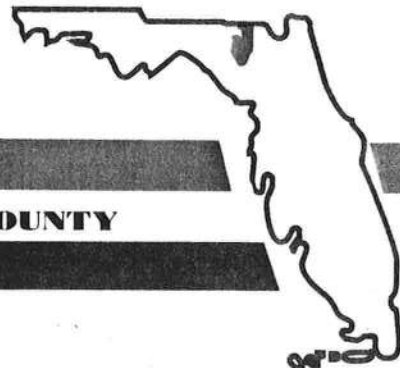
Section G

No additional comment

Photographs

The attached photographs were taken by Britt Surveying & Associates, Inc.

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



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

A1. Building Owner's Name		For Insurance Company Use:
		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		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: ☐ 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 _____
- 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	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: 30 JUNE 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.

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Richard & Mary Davis		For Insurance Company Use:
		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 260 NW Weighty Glenn		Company NAIC Number
City Lake City	State FL	ZIP Code 32055
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) 32-2S-16-01812-015		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>30°16.566'</u> Long. <u>082°43.821'</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>5</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>
c) Total net area of flood openings in A8.b <u>N/A</u> sq in		c) Total net area of flood openings in A9.b <u>N/A</u> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		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 120070		B2. County Name Columbia		B3. State FL	
B4. Map/Panel Number 12023C0190C	B5. Suffix C	B6. FIRM Index Date Feb 04, 2009	B7. FIRM Panel Effective/Revised Date Feb 04, 2009	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 87.00
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) <u>See comments sheet</u>					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date <u>N/A</u> <input type="checkbox"/> CBRS <input type="checkbox"/> 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 See Comments Vertical Datum NAVD 88
Conversion/Comments See attached conversion sheet


Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>88.15</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <u>N/A</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>89.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) <u>85.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) <u>85.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>N/A</u>	<input 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 L. Scott Britt	License Number PSM 5757
Title Chief Surveyor	Company Name Britt Surveying & Associates, Inc.
Address 830 W. Duval St.	City Lake City State FL ZIP Code 32055
Signature 	Date 06/03/11 Telephone 386-752-7163

PLACE
SEAL
HERE

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. 260 NW Weighty Glenn	Policy Number
City Lake CityState FL ZIP Code 32055	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 L-20919
See Attached comments sheet


Signature L. Scott Britt

Date 06/03/11

☒ 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

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. 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
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- G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ feet ☐ meters (PR) Datum _____
- G9. BFE or (in Zone AO) depth of flooding at the building site: _____ ☐ feet ☐ meters (PR) Datum _____
- G10. Community's design flood elevation _____ ☐ feet ☐ meters (PR) Datum _____

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments

Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 260 NW Weighty Glenn	For Insurance Company Use: Policy Number
City Lake City State FL ZIP Code 32055	Company NAIC Number
<p>If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.</p>	

Front View



Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 260 NW Weighty Glenn	For Insurance Company Use: Policy Number
City Lake City State FL ZIP Code 32055	Company NAIC Number
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."	

Rear View





BRITT SURVEYING
Land Surveyors and Mappers

LAKE CITY • VENICE • SARASOTA

Section A

A1 No additional comment

A2 The address is per Mrs. Davis

A3 – A4 No additional comment

A5 Hand Held GPS coordinate at the center of building along the center of the front wall

A6 No additional comment

A7 Concrete Block building on grade

A8 None

A9 None

Section B

B1 – B7 No additional comment

B8 This building appears to be in Zone AE as per the attached flood report.

B9 – B10 We have attached the flood report based on the FIS and the FIRM

B11 – B12 No additional comment

Section C

C1 No additional comment

C2 There is a benchmark set in a 14" oak tree near the residence at an elevation of 88.00 feet NAVD 88 datum.

C2 a Premanufactured home

C2 b-c No additional comment

C2 d No attached garage

C2 e The electrical meter canister.

C2 f - h No additional comment

Section D

No additional comment

Section E

No additional comment

Section F

No additional comment

Section G

No additional comment

Photographs

The attached photographs were taken by Britt Surveying & Associates, Inc.

~~NW WEIGHTY GLEN (PAVED PUBLIC) - 6 -~~

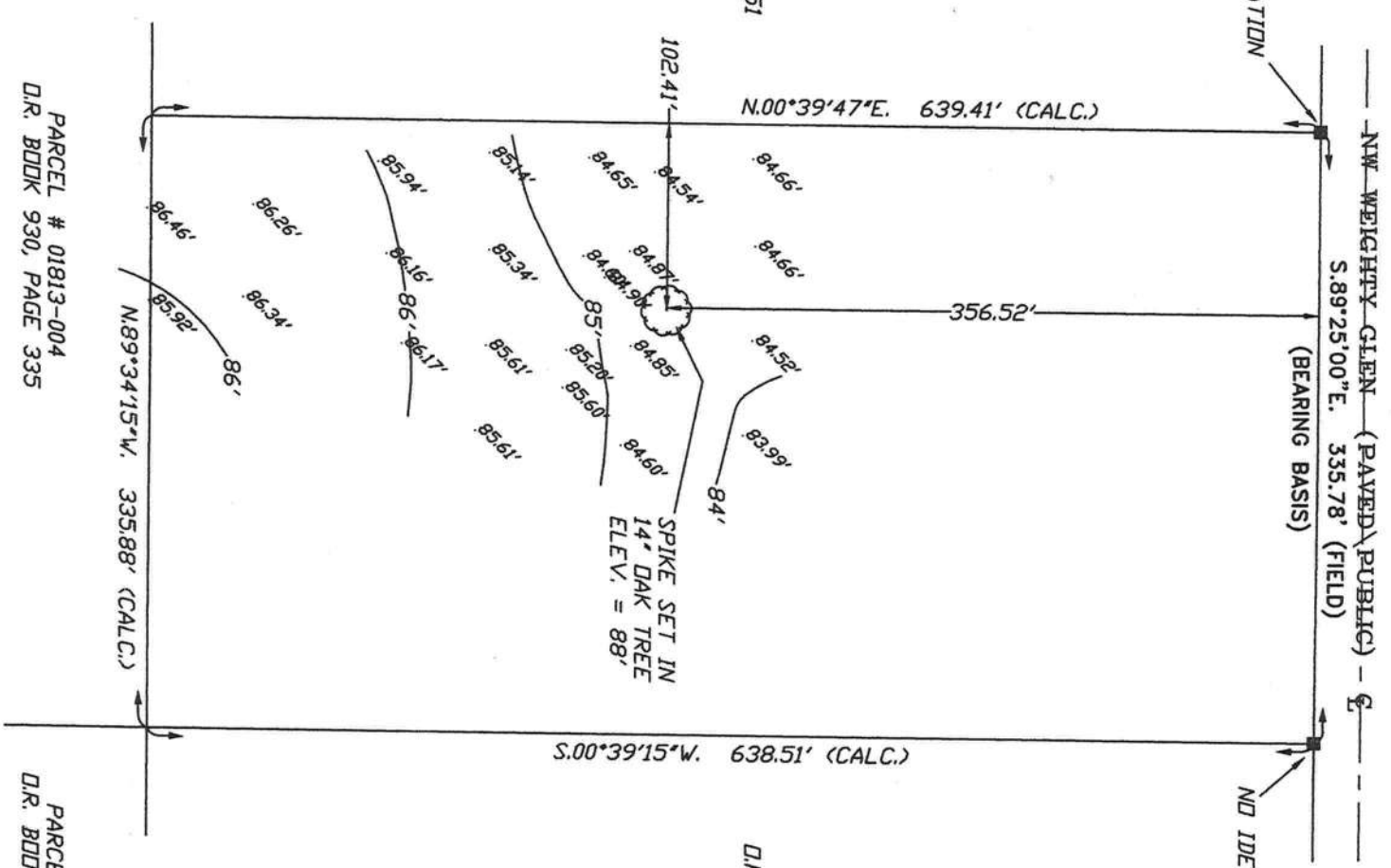
S.89°25'00"E. 335.78' (FIELD)

NO IDENTIFICATION

NO IDENTIFICATION

PARCEL # 01812-006
D.R. BOOK 1096, PAGE 651

PARCEL # 01812-013
D.R. BOOK 1041, PAGE 333



PARCEL # 01813-004
D.R. BOOK 930, PAGE 335

PARCEL # 01813-001
D.R. BOOK 938, PAGE 167

DESCRIPTION:
THE EAST 1/2 OF THE SW 1/4 OF THE NE 1/4, SECTION 32, TOWNSHIP
2 SOUTH, RANGE 16 EAST, EXCEPT THE NORTH 25.00 FEET THEREOF FOR ROAD AND
UTILITY PURPOSES. ALSO KNOWN AS PARCEL NO. 11 IN COLUMBIA COUNTY, FLORIDA.

SURVEYOR'S NOTES.

1. THIS IS NOT A BOUNDARY SURVEY.
2. BEARINGS ARE BASED ON AN ASSUMED BEARING OF S.89°25'00"E. FOR THE SOUTH RIGHT-OF-WAY LINE OF SW WEIGHTY GLEN.
3. THIS PARCEL IS IN ZONE "4E" AND IS SUBJECT TO FLOODING. A BASE FLOOD ELEVATION IS ESTABLISHED TO BE 86.8 FEET AS PER FLOOD INSURANCE RATE MAP, DATED 4 FEB., 2009 FIRM PANEL NO. 12023C0190C. HOWEVER, THE FLOOD INSURANCE RATE MAPS ARE SUBJECT TO CHANGE.
4. IF THEY EXIST, NO UNDERGROUND ENCROACHMENTS AND/OR UTILITIES WERE LOCATED FOR THIS SURVEY EXCEPT AS SHOWN HEREON.
5. THIS SURVEY WAS COMPLETED WITHOUT THE BENEFIT OF A TITLE COMMITMENT OR A TITLE POLICY.
6. DIMENSIONS SHOWN HEREON ARE IN FEET AND DECIMAL PARTS THEREOF.
7. THIS SURVEY DOES NOT REFLECT OR DETERMINE OWNERSHIP.
8. THE ADJACENT OWNERSHIP INFORMATION AS SHOWN HEREON IS BASED ON THE COUNTY PROPERTY APPRAISERS GIS SYSTEM, UNLESS OTHERWISE DENOTED.

SCALE: 1" = 100'



SYMBOL LEGEND:

- | | |
|---------|-------------------------------|
| ■ | 4"x4" CONCRETE MONUMENT FOUND |
| □ | 4"x4" CONCRETE MONUMENT SET |
| ○ | IRON PIPE FOUND |
| ● | IRON PIN AND CAP SET |
| ✕ | 4" CUT IN PAVEMENT |
| + | CALCULATED PROPERTY CORNER |
| ⊙ | NAIL & DISK |
| ⊕ | POWER POLE |
| + | SIGN POST |
| ▲ | WATER METER |
| ⊙ | UTILITY BOX |
| * * | WELL |
| Ⓐ | SANITARY MANHOLE |
| Ⓔ | CENTERLINE |
| — | SECTION LINE |
| —E— | ELECTRIC LINES |
| —X— | WIRE FENCE |
| —O— | CHAIN LINK FENCE |
| —□— | WOODEN FENCE |
| (PLAY) | AS PER A PLAT OF RECORD |
| (DEED) | AS PER A DEED OF RECORD |
| (CALC.) | AS PER CALCULATIONS |
| (FIELD) | AS PER FIELD MEASUREMENTS |
| P.R.M. | PERMANENT REFERENCE MARKER |
| P.C.P. | PERMANENT CONTROL POINT |

CERTIFIED TO:

MARY & RICHARD DAVIS

FIELD BOOK SEE PAGE(S) FILE

SURVEYOR'S CERTIFICATION:
DATE: 08/04/2010 TIME: 08:00 AM BY: J. L. JONES, JR.

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE UNDER MY RESPONSIBLE CHARGE AND MEETS THE MINIMUM TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL SURVEYORS AND MAPPERS IN CHAPTER 61G17-6, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 47B.027, FLORIDA STATUTES.

10/12/10
FIELD SURVEY DATE

10/14/10
DRAWING DATE

NOTE: UNLESS IT BEARS THE SIGNATURE AND THE ORIGINAL, RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER THIS DRAWING, SKETCH, PLAT OR MAP IS FOR INFORMATIONAL PURPOSES ONLY AND IS NOT VALID.



BRITT SURVEYING
& ASSOCIATES, INC.

LAND SURVEYORS AND MAPPERS, L.B. # 7593
830 WEST DUVAL STREET LAKE CITY, FLORIDA 32055
(386)752-7163 FAX (386)752-5573
WORK ORDER # L-20619