

DATE 05/0/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000021849

APPLICANT KATIE REED PHONE 752-4072

ADDRESS 2230 SE BAYA DRIVE SUITE 101 LAKE CITY FL 32055

OWNER WALTER & MICHELE LEE PHONE _____

ADDRESS 708 NW EMERALD LAKES DRIVE LAKE CITY FL 32055

CONTRACTOR DON REED PHONE 752-4072

LOCATION OF PROPERTY 90W, TR ON BROWN ROAD, TL ON WINDING PLACE, TL ON EMERALD LAKE DRIVE, LOT 31 ON LEFTACROSS FROM HERITAGE COURT

TYPE DEVELOPMENT SFD,UTILITY ESTIMATED COST OF CONSTRUCTION 121800.00

HEATED FLOOR AREA 2436.00 TOTAL AREA 3297.00 HEIGHT .00 STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB

LAND USE & ZONING RSF-2 MAX. HEIGHT 25

Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00

NO. EX.D.U. 0 FLOOD ZONE X PP DEVELOPMENT PERMIT NO. _____

PARCEL ID 28-3S-16-02372-631 SUBDIVISION ARBOR GREEN AT EMERALD LAKES

LOT 31 BLOCK _____ PHASE 2 UNIT _____ TOTAL ACRES .50

000000301 N CGC036224 Katie Reed

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

PERMIT 04-0399-N BK JK

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

COMMENTS: ONE FOOT ABOVE THE ROAD, NOC ON FILECheck # or Cash 2246**FOR BUILDING & ZONING DEPARTMENT ONLY**

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
date/app. by date/app. by date/app. by

Under slab rough-in plumbing _____ Slab _____ Sheathing/Nailing _____
date/app. by date/app. by date/app. by

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

Electrical rough-in _____ Heat & Air Duct _____ Peri. beam (Lintel) _____
date/app. by date/app. by date/app. by

Permanent power _____ C.O. Final _____ Culvert _____
date/app. by date/app. by date/app. by

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

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

M/H Pole _____ Travel Trailer _____ Re-roof _____
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 610.00 CERTIFICATION FEE \$ 16.48 SURCHARGE FEE \$ 16.48

MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ _____ WASTE FEE \$ _____

FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ 25.00 TOTAL FEE 717.96

INSPECTORS OFFICE [Signature] CLERKS OFFICE CH

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

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

This Permit Must Be Prominently Posted on Premises During Construction

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

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

Columbia County Building Permit Application

301/21849

Application Approved by - Zoning Official BLK Date 4/28/04 Plans Examiner _____ Date _____
Flood Zone Xempt Development Permit N/A Zoning RSF-2 Land Use Plan Map Category RES. Low G
Comments _____

Applicants Name Katie Reed Phone 752-4072
Address 2230 SE Baya Drive Suite 101 Lake City, FL 32025
Owners Name Walter and Michele Lee Phone 752-4072
911 Address 708 NW Emerald Lakes Drive Lake City, FL 32055
Contractors Name Don Reed Construction, Inc. Phone 752-4072
Address 2230 SE Baya Drive Suite 101 Lake City, FL 32025
Fee Simple Owner Name & Address N/A
Bonding Co. Name & Address N/A
Architect/Engineer Name & Address Mark Disosway, PE P.O. Box 868 Lake City, FL 3205
Mortgage Lenders Name & Address CNB National Bank 145 W Baya Avenue Lake City, FL 32025
Property ID Number 28-3S-16-02372-631 Estimated Cost of Construction \$161,000.00
Subdivision Name Arbor Greene at Emerald Lakes Lot 31 Block _____ Unit _____ Phase _____
Driving Directions Phase 2 90W to Brown Rd; TR on Brown; TL on Winding Place; TL on Emerald Lakes Drive; Lot 31 on the left across from Heritage Court
Type of Construction Single family dwelling Number of Existing Dwellings on Property 0
Total Acreage .500 Lot Size _____ Do you need a Culvert Permit or Culvert Waiver or Have an Existing D
Actual Distance of Structure from Property Lines - Front 35 Side 15 Side 40 Rear 100
Total Building Height 25 Number of Stories 1 Heated Floor Area 2436 Roof Pitch 6/12

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards all laws regulating construction in this jurisdiction.

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

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

Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me

this 20th day of April 2004.

Personally known ✓ or Produced Identification _____

Contractor Signature Don Reed
Contractors License Number CGC036224
Competency Card Number Ingrid Geiger

NOTARY STAMP/SEAL

Notary Signature Ingrid Geiger

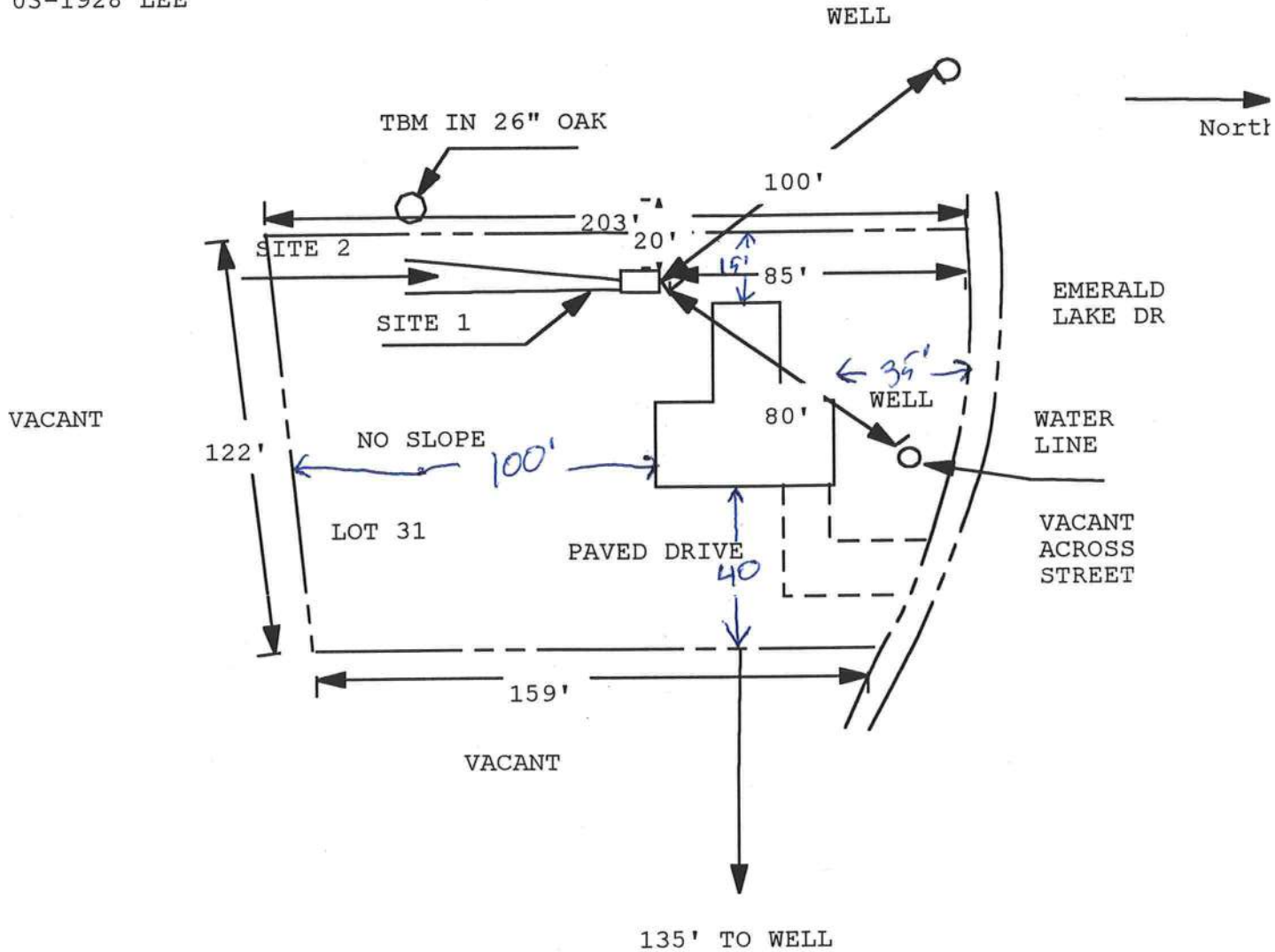


Commission # CC 987
Expires Jan. 26, 2006
Bonded Thru
Atlantic Bonding Co., Inc.

**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
Permit Application Number: 04-03990

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

03-1928 LEE



1 inch = 50 feet

Site Plan Submitted By Paul Lloyd Date 4/1/04
Plan Approved Paul Lloyd Not Approved _____ Date 4/1/04
By Paul Lloyd Mr. J. H. CPHU
4-6-04

Notes: _____

STATE OF FLORIDA, COUNTY OF COLUMBIA
I HEREBY CERTIFY, that the above and foregoing
is a true copy of the original filed in this office.
P. DEWITT GASON, CLERK OF COURTS

By M. K. Koon
Deputy Clerk

Date April 21, 2004

Inst: 2004008980 Date: 04/21/2004 Time: 13:13

DC, P. Dewitt Gason, Columbia County B:1013 P:96



NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF Columbia

LOAN NO. 2004-1815

THE UNDERSIGNED HEREBY INFORMS ALL CONCERNED THAT IMPROVEMENTS WILL BE MADE TO CERTAIN REAL PROPERTY AND, IN ACCORDANCE WITH SECTION 713.13 OF THE FLORIDA STATUTES, THE FOLLOWING INFORMATION IS STATED IN THE NOTICE OF COMMENCEMENT. THIS NOTICE IS VOID AND OF NO FORCE AND EFFECT IF CONSTRUCTION IS NOT COMMENCED WITHIN (90) DAYS OF RECORDATION.

1. PROPERTY DESCRIPTION

A. Street Address or Location Description:

TBD Emerald Lakes Drive
Lake City, FLORIDA 32055

B. Legal Description:

See Legal description attached hereto and made a part hereof: as
exhibit "A"

2. GENERAL DESCRIPTION OF IMPROVEMENTS:

CONSTRUCTION OF SINGLE FAMILY DWELLING

3. A. OWNER INFORMATION NAME AND ADDRESS:

Name: Walter E. Lee AND Michele Lee

Address: TBD Emerald Lakes Drive
Lake City, FLORIDA 32055

MAILING ADDRESS

PO Box 2316
Lake City, FL 32056

B. OWNER'S INTEREST IN THE SITE OF IMPROVEMENT IS: FEE SIMPLE

C. NAME AND ADDRESS OF FEE SIMPLE TITLEHOLDER (IF OTHER THAN OWNER)

Name:
Address:

4. NAME AND ADDRESS OF CONTRACTOR:

Name: Don Reed Construction
Address: 3492 East Baya Ave
Lake City, FL

Phone Number: _____

Fax Number: _____

5. SURETY (IF ANY):

Name:
Address:
Amount of Bond:

6. LENDER MAKING CONSTRUCTION LOAN:

Name: CNB NATIONAL BANK
Address: 187 SW BAYA DR., P.O. BOX 3239
LAKE CITY, FLORIDA 32025

7. PERSON DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13 (1) (a) FLORIDA STATUTES:

Name:
Address:

Phone Number: _____

Fax Number: _____

Inst:2004008980 Date:04/21/2004 Time:13:13

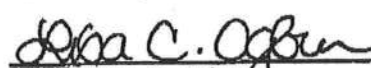
DC,P.Dewitt Cason,Columbia County B:1013 P:97

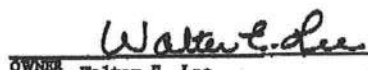
8. OWNER DESIGNATES THE FOLLOWING PERSON IN ADDITION TO HIMSELF TO RECEIVE A COPY OF THE LIENORS NOTICE AS PROVIDED IN SECTION 713.13 (1) (b), FLORIDA STATUTES:

Name: CNE NATIONAL BANK
Address: 187 SW BAY DR., P.O. BOX 3239
LAKE CITY, FLORIDA 32025
Attn:

9. EXPIRATION DATE OF NOTICE OF COMMENCEMENT (THE EXPIRATION DATE IS 1 YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED.)


WITNESS Terry McDavid


WITNESS Lisa C. Ogburn


OWNER Walter E. Lee


OWNER Michele Lee

OWNER

OWNER

State of Florida

The following instrument was acknowledged before me this APRIL 13, 2004
Walter E. Lee AND Michele Lee, Husband and wife

by

who is personally known to me or who has produced
who did take an oath.

as identification and

NOTARY PUBLIC
(Seal)

MY COMMISSION EXPIRES: _____



Schedule "A"

Lot 31, ARBOR GREENE AT EMERALD LAKES, PHASE 2, a subdivision according to the plat thereof as recorded in Plat Book 7, Pages 131-133, of the public records of Columbia County, Florida.

Inst:2004008980 Date:04/21/2004 Time:13:13

____DC,P.Dewitt Cason,Columbia County B:1013 P:98

COLUMBIA COUNTY 9-1-1 ADDRESSING

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

Addressing Maintenance

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

DATE ISSUED: 4-19-04**ENHANCED 9-1-1 ADDRESS:**708 NW Emerald Lakes Dr. (Lake City, Fl 32055)**Addressed Location 911 Phone Number:** N/A**OCCUPANT NAME:** Walter E Michele Lee**OCCUPANT CURRENT MAILING ADDRESS:** N/A**PROPERTY APPRAISER MAP SHEET NUMBER:** 44**PROPERTY APPRAISER PARCEL NUMBER:** 29-35-16-02372-631**Other Contact Phone Number (If any):** _____**Building Permit Number (If known):** _____**Remarks:** LOT 31, Arbor Greene @ Emerald Lakes S/B.**Address Issued By:**Columbia County 9-1-1 Addressing Department

APPR 9/26/2003 JEFF

[illegible]



DON REED CONSTRUCTION, INC.

Builder of Fine Homes & Offices

3492 East Baya Ave.
Lake City, Florida 32025
(386) 752-4072
Fax- (386) 755-7272

April 20, 2004

Board of County Commissioners
Columbia County Building Department
P.O. Box 1529
Lake City, FL 32055

To Whom It May Concern:

We are submitting the Permit Package for Mr. Walter and Mrs. Michele Lee. The recorded Notice of Commencement is not included. The owners have closed on their property however, the recorded document has not been received yet. Once we receive the recorded document, we will submit a copy to you.

Please contact the office should you have any questions or other concerns. Thank you.

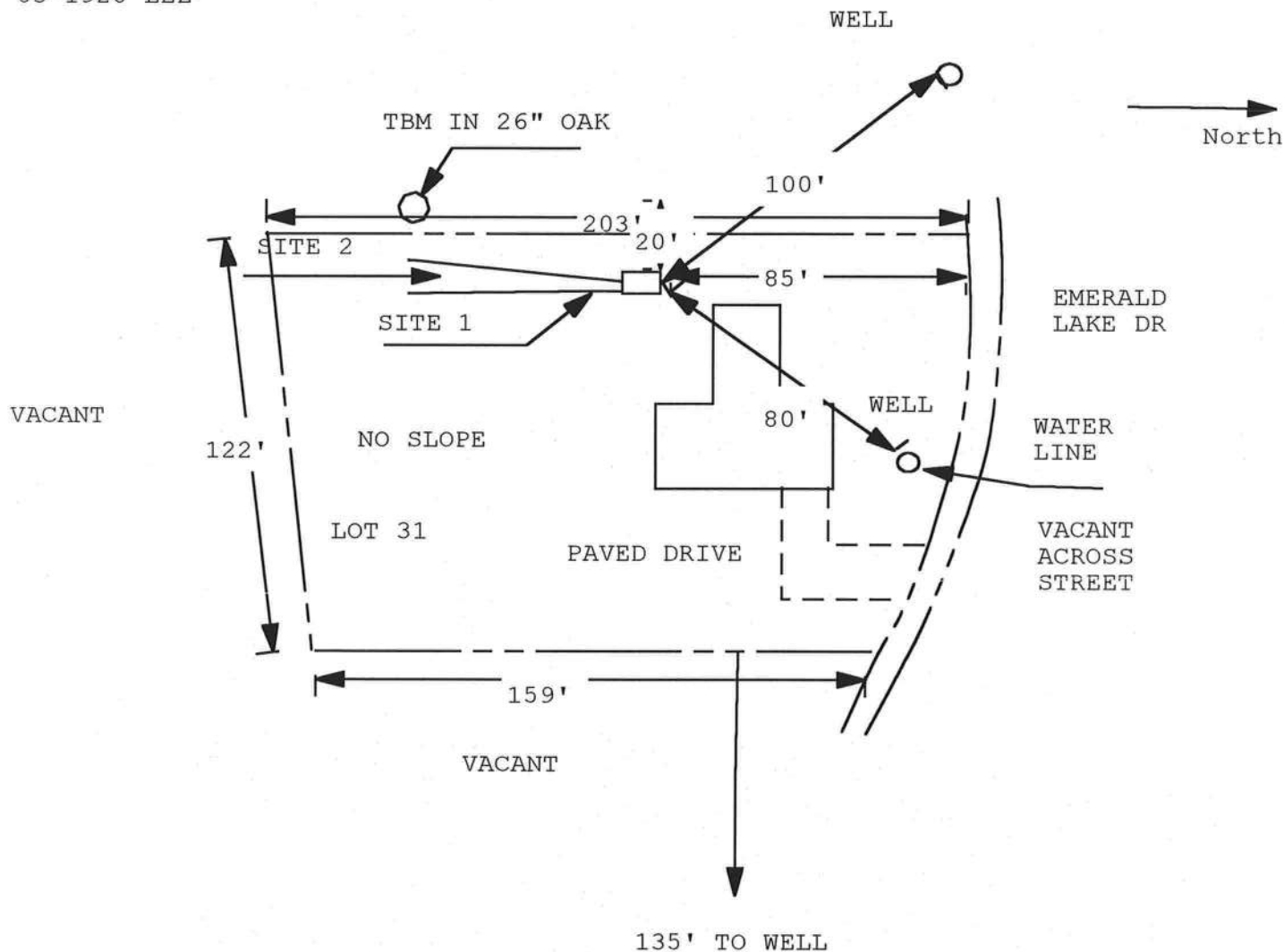
Sincerely,

Don Reed

**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
Permit Application Number: 04-039970

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

03-1928 LEE



1 inch = 50 feet

Site Plan Submitted By Paul Lloyd Date 4/1/04
Plan Approved Not Approved Date 4/1/04

By Paul Lloyd mm j h CPHU
4-6-04

Notes: _____

THIS INSTRUMENT WAS PREPARED BY:

Rec. 10.50

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

Doc. 150.50

RETURN TO:

03-728

TERRY McDAVID
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328Inst:2003023670 Date:10/31/2003 Time:14:54
Doc Stamp-Deed : 150.50
XXX DC, P. DeWitt Cason, Columbia County B:998 P:2257Property Appraiser's
Parcel Identification No.:WARRANTY DEED

THIS INDENTURE, made this 15th day of October, 2003, between D D P CORPORATION, a corporation existing under the laws of the State of Florida, whose post office address is 5012 U.S. Highway 90 West, Lake City, FL 32055 and having its principal place of business in the County of Columbia, State of Florida, party of the first part, and WALTER E. LEE and MICHELE LEE, Husband and Wife whose post office address is 2210 SE 6th Court, Homestead, FL 33033, of the State of Florida, parties of the second part,

WITNESSETH: that the said party of the first part, for and in consideration of the sum of Ten Dollars (\$10.00), to it in hand paid, the receipt whereof is hereby acknowledged, has granted, bargained, sold, aliened, remised, released, conveyed and confirmed, and by these presents doth grant, bargain, sell, alien, remise, release, convey and confirm unto the said party of the second part, and its heirs and assigns forever, all that certain parcel of land lying and being in the County of Columbia and State of Florida, more particularly described as follows:

Lot 31, ARBOR GREENE AT EMERALD LAKES PHASE 2, a subdivision according to the plat thereof as recorded in Plat Book 7, Pages 131-133 of the public records of Columbia County, Florida.

SUBJECT TO: Restrictions, easements and outstanding mineral rights of record, if any, and taxes for the current year.

TOGETHER with all the tenements, hereditaments and appurtenances, with every privilege, right, title, interest and estate, reversion, remainder and easement thereto belong or in anywise appertaining;

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


And the said party of the first part doth covenant with said party of the second part that it is lawfully seized of said premises; that they are free of all encumbrances, and that it has good right and lawful authority to sell the same; and the said party of the first part does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

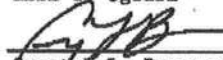
IN WITNESS WHEREOF, the party of the first part has caused these presents to be signed in its name by its President, the day and year above written.

Signed, sealed and delivered
in our presence:

D D P CORPORATION, A Florida
Corporation


Lisa C. Ogburn

By: 
O.P. DAUGHTRY, III, President


Crystal L. Brunner

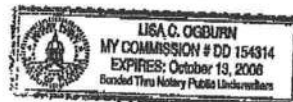
Inst:2003023670 Date:10/31/2003 Time:14:54
Doc Stamp-Deed : 150.50

DC, P. DeWitt Cason, Columbia County B:998 P:2258

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 15th day of October, 2003, by O.P. DAUGHTRY, III, as President of D D P CORPORATION, a State of Florida corporation, on behalf of the corporation. He is personally known to me and did not take an oath.


Notary Public
My Commission Expires: _____



FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name: **Lee Residence**
Address: **Lot: 31, Sub: Arbor Greene II, Plat:**
City, State: **Lake City, FL 32055-**
Owner: **Walter & Michelle Lee**
Climate Zone: **North**

Builder: **Don Reed**
Permitting Office:
Permit Number: **21849**
Jurisdiction Number: **221000**

- | | | | | | |
|--|--------------------------------|-----|--|-------------------|-----|
| 1. New construction or existing | New | ___ | 12. Cooling systems | | |
| 2. Single family or multi-family | Single family | ___ | a. Central Unit | Cap: 48.0 kBtu/hr | ___ |
| 3. Number of units, if multi-family | 1 | ___ | | SEER: 10.00 | ___ |
| 4. Number of Bedrooms | 4 | ___ | b. N/A | | ___ |
| 5. Is this a worst case? | Yes | ___ | c. N/A | | ___ |
| 6. Conditioned floor area (ft ²) | 2437 ft ² | ___ | 13. Heating systems | | |
| 7. Glass area & type | | ___ | a. Electric Heat Pump | Cap: 48.0 kBtu/hr | ___ |
| a. Clear - single pane | 0.0 ft ² | ___ | | HSPF: 6.80 | ___ |
| b. Clear - double pane | 353.0 ft ² | ___ | b. N/A | | ___ |
| c. Tint/other SHGC - single pane | 0.0 ft ² | ___ | c. N/A | | ___ |
| d. Tint/other SHGC - double pane | 0.0 ft ² | ___ | 14. Hot water systems | | |
| 8. Floor types | | ___ | a. Electric Resistance | Cap: 50.0 gallons | ___ |
| a. Slab-On-Grade Edge Insulation | R=0.0, 271.0(p) ft | ___ | | EF: 0.88 | ___ |
| b. N/A | | ___ | b. N/A | | ___ |
| c. N/A | | ___ | c. Conservation credits | | ___ |
| 9. Wall types | | ___ | (HR-Heat recovery, Solar | | ___ |
| a. Frame, Wood, Exterior | R=13.0, 2439.0 ft ² | ___ | DHP-Dedicated heat pump) | | ___ |
| b. Frame, Wood, Adjacent | R=6.0, 130.0 ft ² | ___ | 15. HVAC credits | CF, ___ | ___ |
| c. N/A | | ___ | (CF-Ceiling fan, CV-Cross ventilation, | | ___ |
| d. N/A | | ___ | HF-Whole house fan, | | ___ |
| e. N/A | | ___ | PT-Programmable Thermostat, | | ___ |
| 10. Ceiling types | | ___ | MZ-C-Multizone cooling, | | ___ |
| a. Under Attic | R=30.0, 2437.0 ft ² | ___ | MZ-H-Multizone heating) | | ___ |
| b. N/A | | ___ | | | ___ |
| c. N/A | | ___ | | | ___ |
| 11. Ducts | | ___ | | | ___ |
| a. Sup: Unc. Ret: Unc. AH: Not In Attic | Sup. R=6.0, 210.0 ft | ___ | | | ___ |
| b. N/A | | ___ | | | ___ |

Glass/Floor Area: 0.14

Total as-built points: 38520

Total base points: 38976

PASS

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

PREPARED BY: [Signature]

DATE: 3-25-04

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

OWNER/AGENT: _____

DATE: _____

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.

BUILDING OFFICIAL: _____

DATE: _____



Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: Lot: 31, Sub: Arbor Greene II, Plat: , Lake City, FL, 32055-

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

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

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: Lot: 31, Sub: Arbor Greene II, Plat: , Lake City, FL, 32055-

PERMIT #:

BASE				AS-BUILT					
WATER HEATING									
Number of Bedrooms	X	Multiplier	= Total	Tank Volume	EF	Number of Bedrooms	X Tank Ratio	Multiplier X Credit Multiplier	= Total
4		2746.00	10984.0	50.0	0.88	4	1.00	2746.00	10984.0
				As-Built Total:					10984.0

CODE COMPLIANCE STATUS							
BASE				AS-BUILT			
Cooling Points	+	Heating Points	+ Hot Water Points = Total Points	Cooling Points	+	Heating Points	+ Hot Water Points = Total Points
13952		14040	10984 38976	13454		14082	10984 38520

PASS



WINTER CALCULATIONS**Residential Whole Building Performance Method A - Details**

ADDRESS: Lot: 31, Sub: Arbor Greene II, Plat: , Lake City, FL, 32055-

PERMIT #:

BASE				AS-BUILT						
Winter Base Points: 22378.6				Winter As-Built Points: 22470.4						
Total Winter Points	X	System Multiplier	= Heating Points	Total Component	X	Cap Ratio	X Duct Multiplier	X System Multiplier	X Credit Multiplier	= Heating Points
						(DM x DSM x AHU)				
22378.6		0.6274	14040.4	22470.4	1.000	(1.069 x 1.169 x 1.00)	0.501	1.000		14081.5
				22470.4	1.00	1.250	0.501	1.000		14081.5

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: Lot: 31, Sub: Arbor Greene II, Plat: , Lake City, FL, 32055-

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt		Area X WPM X WOF = Points				
.18	2437.0	12.74	5588.5	Double, Clear	NE	1.5	6.0	25.0	13.40	1.01	337.1
				Double, Clear	NE	1.5	6.0	20.0	13.40	1.01	269.7
				Double, Clear	NE	1.5	6.0	30.0	13.40	1.01	404.5
				Double, Clear	NW	1.5	5.5	27.0	14.03	1.00	380.3
				Double, Clear	NW	1.5	5.5	27.0	14.03	1.00	380.3
				Double, Clear	SW	1.5	7.0	90.0	7.17	1.04	672.6
				Double, Clear	NW	1.5	6.0	30.0	14.03	1.00	422.2
				Double, Clear	SW	1.5	7.0	24.0	7.17	1.04	179.3
				Double, Clear	SE	1.5	6.0	80.0	5.33	1.10	467.8
				As-Built Total:				353.0	3513.7		
WALL TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Adjacent	130.0	3.60	468.0	Frame, Wood, Exterior	13.0		2439.0	3.40	8292.6		
Exterior	2439.0	3.70	9024.3	Frame, Wood, Adjacent	6.0		130.0	5.26	683.4		
Base Total: 2569.0 9492.3				As-Built Total:		2569.0		8976.0			
DOOR TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Adjacent	16.0	11.50	184.0	Exterior Wood			20.0	12.30	246.0		
Exterior	93.0	12.30	1143.9	Exterior Wood			33.0	12.30	405.9		
				Exterior Wood			40.0	12.30	492.0		
				Adjacent Wood			16.0	11.50	184.0		
Base Total: 109.0 1327.9				As-Built Total:		109.0		1327.9			
CEILING TYPES Area X BWPM = Points				Type	R-Value		Area X WPM X WCM = Points				
Under Attic	2437.0	2.05	4995.9	Under Attic	30.0		2437.0	2.05 X 1.00	4995.9		
Base Total: 2437.0 4995.9				As-Built Total:		2437.0		4995.9			
FLOOR TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Slab	271.0(p)	8.9	2411.9	Slab-On-Grade Edge Insulation	0.0		271.0(p)	18.80	5094.8		
Raised	0.0	0.00	0.0								
Base Total: 2411.9				As-Built Total:		271.0		5094.8			
INFILTRATION Area X BWPM = Points						Area X WPM = Points					
2437.0 -0.59 -1437.8						2437.0 -0.59 -1437.8					

SUMMER CALCULATIONS**Residential Whole Building Performance Method A - Details**

ADDRESS: Lot: 31, Sub: Arbor Greene II, Plat: , Lake City, FL, 32055-

PERMIT #:

BASE					AS-BUILT										
Summer Base Points: 32704.5					Summer As-Built Points: 33190.7										
Total Summer Points	X	System Multiplier	=	Cooling Points	Total Component	X	Cap Ratio	X	Duct Multiplier	X	System Multiplier	X	Credit Multiplier	=	Cooling Points
									(DM x DSM x AHU)						
32704.5		0.4266		13951.8	33190.7		1.000		(1.090 x 1.147 x 1.00)		0.341		0.950		13454.5
					33190.7		1.00		1.250		0.341		0.950		13454.5

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: Lot: 31, Sub: Arbor Greene II, Plat: , Lake City, FL, 32055-

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES .18 X Conditioned X BSPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt		Area X SPM X SOF = Points				
.18	2437.0	20.04	8790.7	Double, Clear	NE	1.5	6.0	25.0	28.72	0.92	661.1
				Double, Clear	NE	1.5	6.0	20.0	28.72	0.92	528.9
				Double, Clear	NE	1.5	6.0	30.0	28.72	0.92	793.3
				Double, Clear	NW	1.5	5.5	27.0	25.46	0.91	626.7
				Double, Clear	NW	1.5	5.5	27.0	25.46	0.91	626.7
				Double, Clear	SW	1.5	7.0	90.0	38.46	0.92	3183.8
				Double, Clear	NW	1.5	6.0	30.0	25.46	0.93	706.9
				Double, Clear	SW	1.5	7.0	24.0	38.46	0.92	849.0
				Double, Clear	SE	1.5	6.0	80.0	40.86	0.88	2887.6
				As-Built Total:		353.0			10863.9		
WALL TYPES Area X BSPM = Points				Type	R-Value		Area X SPM		= Points		
Adjacent	130.0	0.70	91.0	Frame, Wood, Exterior	13.0		2439.0	1.50	3658.5		
Exterior	2439.0	1.70	4146.3	Frame, Wood, Adjacent	6.0		130.0	1.00	130.0		
Base Total:				2569.0		4237.3		As-Built Total:		2569.0 3788.5	
DOOR TYPES Area X BSPM = Points				Type			Area X SPM		= Points		
Adjacent	16.0	2.40	38.4	Exterior Wood			20.0	6.10	122.0		
Exterior	93.0	6.10	567.3	Exterior Wood			33.0	6.10	201.3		
				Exterior Wood			40.0	6.10	244.0		
				Adjacent Wood			16.0	2.40	38.4		
Base Total:				109.0		605.7		As-Built Total:		109.0 605.7	
CEILING TYPES Area X BSPM = Points				Type	R-Value		Area X SPM X SCM		= Points		
Under Attic	2437.0	1.73	4216.0	Under Attic	30.0		2437.0	1.73 X 1.00	4216.0		
Base Total:				2437.0		4216.0		As-Built Total:		2437.0 4216.0	
FLOOR TYPES Area X BSPM = Points				Type	R-Value		Area X SPM		= Points		
Slab	271.0(p)	-37.0	-10027.0	Slab-On-Grade Edge Insulation	0.0		271.0(p)	-41.20	-11165.2		
Raised	0.0	0.00	0.0								
Base Total:				-10027.0		As-Built Total:		271.0		-11165.2	
INFILTRATION Area X BSPM = Points						Area X SPM		= Points			
	2437.0	10.21	24881.8			2437.0		10.21	24881.8		

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 82.2

The higher the score, the more efficient the home.

Walter & Michelle Lee, Lot: 31, Sub: Arbor Greene II, Plat: , Lake City, FL, 32055-

1. New construction or existing	New	___	12. Cooling systems	
2. Single family or multi-family	Single family	___	a. Central Unit	Cap: 48.0 kBtu/hr
3. Number of units, if multi-family	1	___		SEER: 10.00
4. Number of Bedrooms	4	___	b. N/A	___
5. Is this a worst case?	Yes	___	c. N/A	___
6. Conditioned floor area (ft ²)	2437 ft ²	___		___
7. Glass area & type		___	13. Heating systems	
a. Clear - single pane	0.0 ft ²	___	a. Electric Heat Pump	Cap: 48.0 kBtu/hr
b. Clear - double pane	353.0 ft ²	___		HSPF: 6.80
c. Tint/other SHGC - single pane	0.0 ft ²	___	b. N/A	___
d. Tint/other SHGC - double pane	0.0 ft ²	___	c. N/A	___
8. Floor types		___	14. Hot water systems	
a. Slab-On-Grade Edge Insulation	R=0.0, 271.0(p) ft	___	a. Electric Resistance	Cap: 50.0 gallons
b. N/A	___	___		EF: 0.88
c. N/A	___	___	b. N/A	___
9. Wall types		___	c. Conservation credits	___
a. Frame, Wood, Exterior	R=13.0, 2439.0 ft ²	___	(HR-Heat recovery, Solar	___
b. Frame, Wood, Adjacent	R=6.0, 130.0 ft ²	___	DHP-Dedicated heat pump)	___
c. N/A	___	___	15. HVAC credits	CF, ___
d. N/A	___	___	(CF-Ceiling fan, CV-Cross ventilation,	___
e. N/A	___	___	HF-Whole house fan,	___
10. Ceiling types		___	PT-Programmable Thermostat,	___
a. Under Attic	R=30.0, 2437.0 ft ²	___	RB-Attic radiant barrier,	___
b. N/A	___	___	MZ-C-Multizone cooling,	___
c. N/A	___	___	MZ-H-Multizone heating)	___
11. Ducts		___		___
a. Sup: Unc. Ret: Unc. AH: Not In Attic	Sup. R=6.0, 210.0 ft	___		___
b. N/A	___	___		___

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

Builder Signature: _____ Date: _____

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



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

EnergyGauge® (Version: FLRCPB v3.2)

Columbia County Building Department Culvert Permit

Culvert Permit No.
000000301

DATE 05/10/2004 PARCEL ID # 28-3S-16-02372-631
APPLICANT KATIE REED PHONE 752-4072
ADDRESS 2230 SE BAYA DRIVE SUITE 101 LAKE CITY FL 32025
OWNER WALTER & MICHELE LEE PHONE 752-4072
ADDRESS 708 NW EMERALD LAKES DRIVE LAKE CITY FL 32025
CONTRACTOR DON REED PHONE 752-4072
LOCATION OF PROPERTY 90W, TR ON BROWN, TL ON WINDING PLACE, TL ON EMERALD LAKES DR.,
LOT 31 ONLEFT ACROSS FROM HERITAGE COURT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT AR.GREEN @ EM. LAKES 31 2

SIGNATURE

Katie Reed

INSTALLATION REQUIREMENTS



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

INSTALLATION NOTE: Turnouts will be required as follows:

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

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



Culvert installation shall conform to the approved site plan standards.



Department of Transportation Permit installation approved standards.



Other _____

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

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

Amount Paid 25.00



Notice of Treatment

Applicator Florida Pest Control & Chemical Co. 10878

Address _____

City Lake City Phone 252-1703

Site Location Subdivision Emerald Lakes

Lot# 31 Block# _____ Permit# 21849

Address 708 NW Emerald Lakes Dr.

AREAS TREATED

Area Treated	Date	Time	Gal.	Print Technician's Name
Main Body				
Patio/s #				
Stoop/s #				
Porch/s #				
Brick Veneer				
Extension Walls				
A/C Pad				
Walk/s #	<u>1</u>	<u>09/22/04</u>	<u>2</u>	<u>Travis</u>
Exterior of Foundation				
Driveway Apron	<u>09/22/04</u>		<u>4</u>	<u>Travis</u>
Out Building				
Tub Trap/s				
(Other)				

Name of Product Applied Dursban 105%

Remarks Exterior not finished

Applicator - White • Permit File - Canary • Permit Holder - Pink

Notice of Treatment

10878

Applicator Florida Pest Control & Chemical Co.

Address 536 SE BAYA AVE

City Lake City Phone _____

Site Location Subdivision EMERALD FOREST

Lot# 31 Block# _____ Permit# 21849

Address 708 NW Emerald Forest Dr

AREAS TREATED

Area Treated	Date	Time	Gal.	Print Technician's Name
Main Body	5/24/04	0900	553	F254 GUNNY
Patio/s #				
Stoop/s #				
Porch/s #				
Brick Veneer				
Extension Walls				
A/C Pad				
Walk/s #				
Exterior of Foundation				
Driveway Apron				
Out Building				
Tub Trap/s				
(Other)				

Name of Product Applied DURSBAUTC 2.05 %

Remarks Exterior not to grade

Applicator - White • Permit File - Canary • Permit Holder - Pink

Oct 13 04 01:15p Florida Pest Control



FOUNDED 1949

CORPORATE HEADQUARTERS:

P.O. BOX 5389
118 N.W. 16TH AVENUE
GAINESVILLE, FL 32602-5389(352) 376-2861
FAX (352) 376-2791

SCIENTIFIC PEST CONTROL DIRECTED BY GRADUATE ENTOMOLOGISTS

Complete Pest Control Service
Member Florida & National Pest Control AssociationsReply to: 536 SE Baya Dr
Lake City, FL 32025
Phone (386) 752-1703 Fax (386) 752-0171

10878

TERMITE TREATMENT CERTIFICATION

Owner:	Permit Number:
WALTER LEE	21849
Lot:	Block:
31	
Subdivision:	Street Address:
EMERALD LAKES	708 NW EMERALD LAKES DRIVE
City:	County:
Lake City	Columbia
General Contractor:	Area Treated:
DON REED CONSTRUCTION	EXTERIOR OF FOUNDATION
Date:	Time:
10/12/04	6:00 PM
Name of applicator:	Applicator ID Number:
ANDY PARRISH	JE117932
Product Used: Active Ingredient: % Concentration	Number of gallons used:
Duraban TC: Chlorpyrifos: 0.5%	120
Method of termite prevention treatment: Soil Treatment	

The building has received a complete treatment for the prevention of subterranean termites. Treatment is in accordance with rules and laws established by the Florida Department of Agriculture and Consumer Services.

This form is proof of complete treatment for Certificate of Occupancy or Closing.

THIS IS PROOF OF WARRANTY

Warranty and Treatment Certifications Have Been Issued.

Authorized Signature:	Date:
<i>Kathi Schmidt</i>	10/12/04

BRANCHES:

• Crystal River • Daytona Beach • Ft. Walton Beach • Jacksonville South • Jacksonville West • Lake City • Milton • Ocala • Orlando • Palatka • Panama City • Pensacola • Starke • St. Augustine • Tallahassee • Winter Haven • Leesburg • Kissimmee •