DATE 08/10/2004

Columbia County Building Permit

This Permit Expires One Year From the Date of Issue

PERMIT
000022177

APPLICANT WAYNE JOHNDROW PHONE 497-4168

ADDRESS 948 SW MONTANA STREET FT. WHITE FL 32038

OWNER WAYNE JOHNDROW PHONE 497-4168

ADDRESS 946 SW MONTANA STREET FT. WHITE FL 32038

CONTRACTOR VIC ETHERIDGE PHONE

LOCATION OF PROPERTY 47S, TR ON 27, TL ON RIVER ROAD, TL ON UTAH, TR ON WASHINGTON,TL ON MONTANA, 1ST ON RIGHT

TYPE DEVELOPMENT MH,UTILITY ESTIMATED COST OF CONSTRUCTION .00

HEATED FLOOR AREA TOTAL AREA HEIGHT .00 STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING ESA-2 MAX. HEIGHT

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

NO. EX.D.U. 0 FLOOD ZONE AE DEVELOPMENT PERMIT NO. 304038

PARCEL ID 26-6S-15-00775-000 SUBDIVISION 3 RIVERS ESTATES

LOT 33 BLOCK PHASE UNIT 10 TOTAL ACRES 1.00

		IH0000144		
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor	
EXISTING	04-0752-E	BK	HD	Y
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: ONE FT RISE LETTER RECEIVED

Check # or Cash 1597

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

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

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

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

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

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

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

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

BUILDING PERMIT FEE $ .00 CERTIFICATION FEE $ .00 SURCHARGE FEE $ .00

MISC. FEES $ 200.00 ZONING CERT. FEE $ 50.00 FIRE FEE $ 11.34 WASTE FEE $ 24.50

FLOOD ZONE DEVELOPMENT FEE $ 50.00 CULVERT FEE $ **TOTAL FEE** 335.84

INSPECTORS OFFICE CLERKS OFFICE CH

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

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

This Permit Must Be Prominently Posted on Premises During Construction

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

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

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only Zoning Official BLK 6.23.04 Building Official NO 8-4-04

AP# 0407-53 Date Received 7-19-04 By LH Permit # 22177

Flood Zone AE Development Permit Yes Zoning ESA-2 Land Use Plan Map Category ESA

Comments 34' flood Elevation.

What wind Zone is m/H ?

☑ Site Plan with Setbacks shown ☑ Environmental Health Signed Site Plan ☑ N/A Env. Health Release

☐ N/A Need a Culvert Permit ☐ N/A Need a Waiver Permit ☐ N/A Well letter provided ☑ Existing Well ~~Need~~

- Property ID 26-65-15 ~~00-00-00~~-00775-000 (2nd unit on 3 lots - Need to pay asse Must have a copy of the property deed
- New Mobile Home _____ Used Mobile Home ✓ Year _____
- Subdivision Information 3 Rivers Esti Unit 10 Lot 33
- Applicant Wayne Johndrow Phone # 386-497-4168
- Address 948 SW Montana Street, Fort White, FL 32038-462
- Name of Property Owner Wayne, Brenda Johndrow Phone# 386-497-4168
- 911 Address 946 SW Montana St. Ft. White, FL 32038
- Name of Owner of Mobile Home Wayne Johndrow Phone # 386 497 4168
- Address 948 SW Montana Street Fort White FL 32038-462
- Relationship to Property Owner Husband & Wife.
- Current Number of Dwellings on Property 1 (Lot 33)
- Lot Size ½ Lots 33, ~~###~~ Total Acreage Approx 1 acres
- Explain the current driveway Existing
- Driving Directions Hwy 47 South, Take ~~Left~~ Right on 27 Hwy Turn Left on River Road, take Left Utah, take Right on Washington, take Left Montana Street, 1st Mob home on Right
- Is this Mobile Home Replacing an Existing Mobile Home no
- Name of Licensed Dealer/Installer Vic Etheridge Phone # 386 462 7554
- Installers Address PO Box 3266 High Springs FL 32655
- License Number IH0000144 Installation Decal # 218532

PERMIT WORKSHEET

PERMIT NUMBER _____

Installer Vic Ethridge License # I Hoooo 144

Address of home being installed 948 Sw. Mountain St Ft. White, FL 32038 462-4

Manufacturer Freedwood Length x width 62x56

NOTE: ***If home is a single wide fill out one half of the blocking plan***
If home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials VE

New Home ☐ Used Home ☑

Home installed to the Manufacturer's Installation Manual ☐

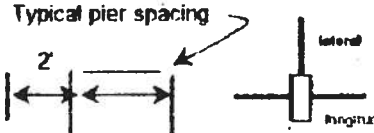
Home is installed in accordance with Rule 15-C ☑

Single wide ☑ Wind Zone II ☐ Wind Zone III ☐

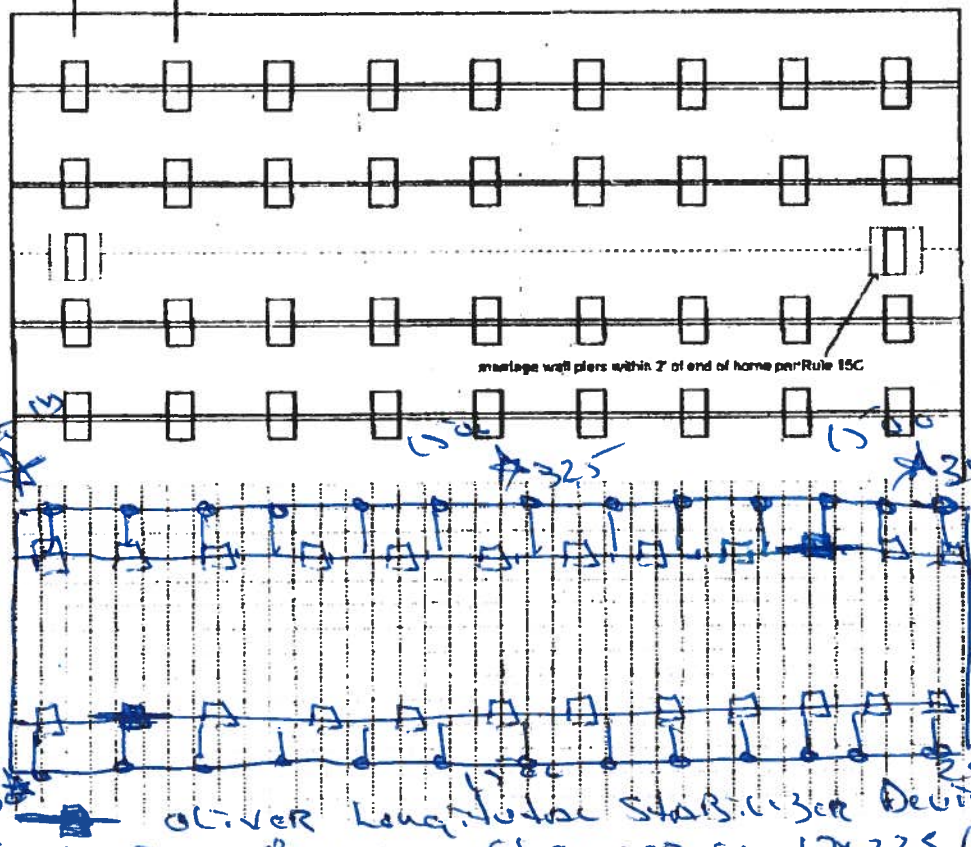
Double wide ☐ Installation Decal # 218532

Triple/Quad ☐ Serial # FLAFLA34A20802

Typical pier spacing



Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



OLIVER Longitudinal STABILIZER DEVICES
1500 lb Soil Blocked 6' Center on 17x22.5 ABS PADS

PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" X 24" (576)*	26" x 26" (676)
1000 psf		3'	4'	5'	6'	7'	8'
1500 psf		4'6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7'6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		8'	8'	8'	8'	8'	8'

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

PIER PAD SIZES

I-beam pier pad size 17x22.5

Perimeter pier pad size N/A

Other pier pad sizes (required by the mfg.) N/A

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

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

Opening	Pier pad size
N/A	

TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)
Manufacturer Oliver

Longitudinal Stabilizing Device w/ Lateral Arms
Manufacturer N/A

POPULAR PAD SIZES

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

ANCHORS

4 ft 4 5 ft _____

FRAME TIES

within 2' of end of home spaced at 5' 4" oc 26

OTHER TIES

	Number
Sidewall	3
Longitudinal	N/A
Marriage wall	N/A
Shearwall	N/A

11/17/2003 12:56 3867582256 BLDG AND ZONING PAGE 05

PERMIT WORKSHEET

PERMIT NUMBER _____

POCKET PENETROMETER TEST

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

X 1500 X 1500 X 1500

POCKET PENETROMETER TESTING METHOD

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

X 1500 X 2000 X 1500

TORQUE PROBE TEST

The results of the torque probe test is 350 inch pounds or check here if you are declaring 5' anchors without testing 4'. 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 Vic Ethridge

Date Tested 6-16-04

Electrical

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

Plumbing

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

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

Site Preparation

Debris and organic material removed ✓

Water drainage: Natural ✓ Swale _____ Pad _____ Other _____

Fastening multi wide units

Floor:	Type Fastener: N/A	Length: _____	Spacing: _____
Walls	Type Fastener: N/A	Length: _____	Spacing: _____
Roof:	Type Fastener: N/A	Length: _____	Spacing: _____

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

Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, meldew 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.

Type gasket N/A

Pg. _____

Installer's initials _____

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 ✓

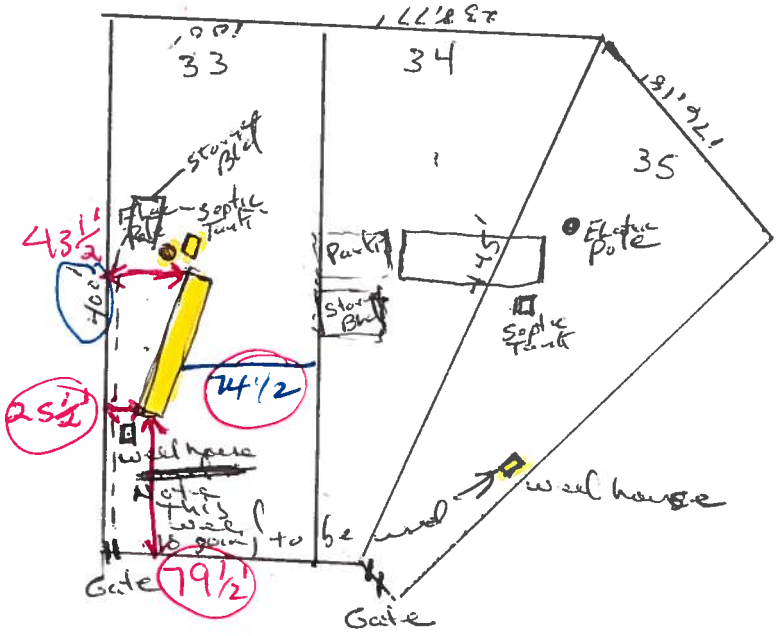
Electrical crossovers protected. Yes N/A

Other _____

Installer verifies all information given with this permit worksheet is accurate and true based on the manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature _____ Date 6-23-04

Three Rivers Estates
unit NO, 10
Tract 33



Power Pole Already all were in before Trailer Positioned on Tract 33

Septic Tank

Well -

N

AAA
MOBILE HOME TRANSPORT

Phone (352) 372-1366
Home (386) 462-7554
Mobile (352) 316-0953
State Lic# IH0000144
Vic Etheridge Owner/Operator

DATE: 6-23-04

NAME OF LICENSE HOLDER: Vic Etheridge

LICENSE CERTIFICATE #: IH0000144

THE FOLLOWING PERSON(S) ARE AUTHORIZED TO SIGN FOR PERMITS FOR THE ABOVE REFERENCED LICENSE HOLDER.

NAME(S) : PLEASE PRINT	***SIGNATURE(S):***	***RELATIONSHIP***
[illegible]	[signature]	Customer
[illegible]	[signature]	

Authorization forms are good 12 months of dated form. (Unless otherwise specified if less than 12 months _____)

The foregoing instrument was acknowledged before me this _____ day of _____, _____

by _____, who is personally known to me or has produced

identification Type of Identification _____ # _____

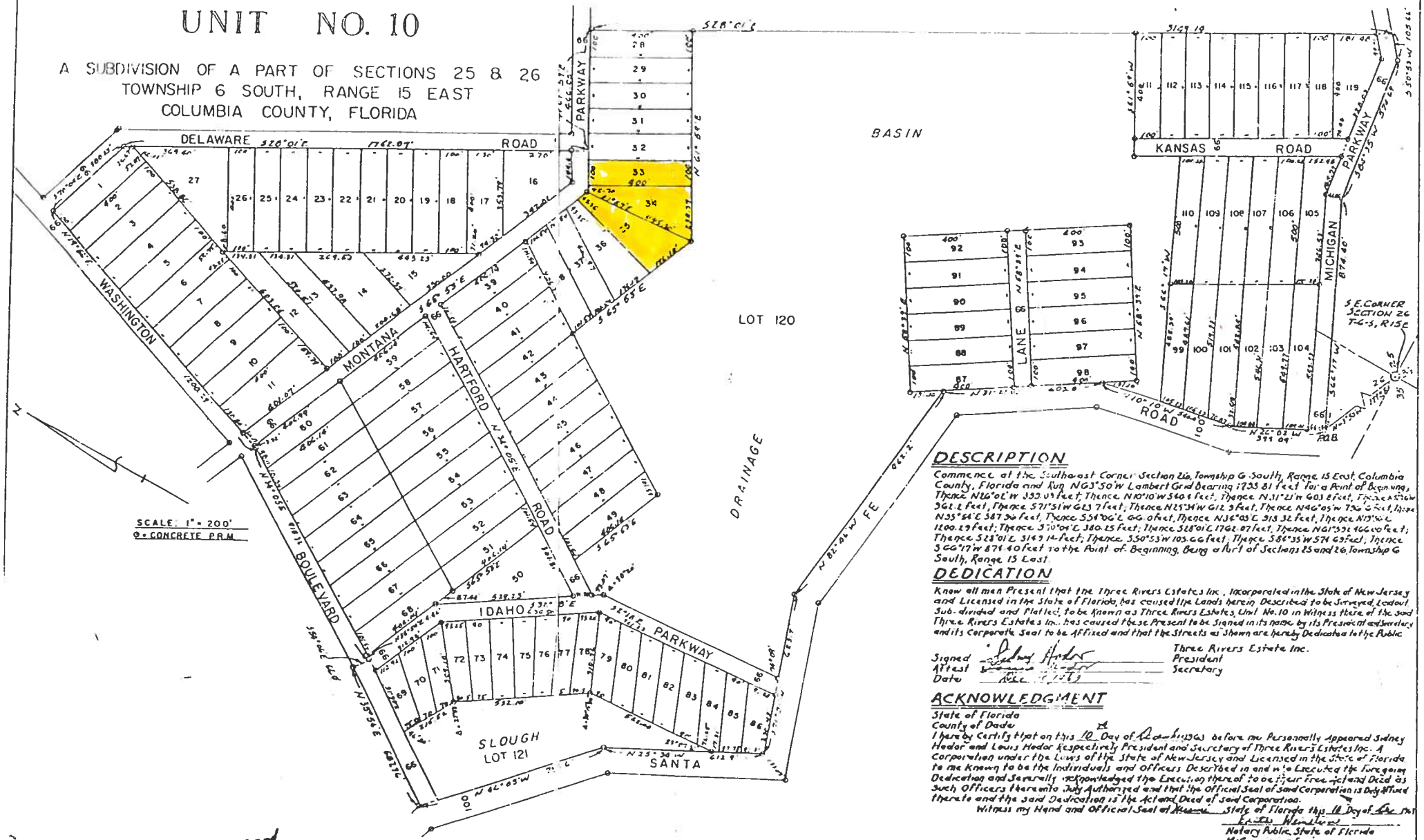
Signature of License Holder _____

Signature of Notary: _____

Commission # & Seal/Stamp:

THREE RIVERS ESTATES
UNIT NO. 10

A SUBDIVISION OF A PART OF SECTIONS 25 & 26
TOWNSHIP 6 SOUTH, RANGE 15 EAST
COLUMBIA COUNTY, FLORIDA



RECORDED THIS 23rd DAY OF OCTOBER, 1989
IN PLAT BOOK 5 PAGE 10
P. Dewitt Cason CLERK OF COURT
COLUMBIA COUNTY, FLORIDA

APPROVED BY COUNTY COMMISSION
COLUMBIA COUNTY, FLORIDA, FOR RECORDING
Date October 19, 1989
Signed Susie Shupp Chairman
Attest Bill J. Brown Clerk

DESCRIPTION

Commence at the Southeast Corner Section 26, Township 6 South, Range 15 East Columbia County, Florida and Run N63°50'W Lambert Grid Bearing 1735.81 feet for a Point of Beginning, Thence N16°01'W 350.05 feet; Thence N10°10'W 540.6 feet, Thence N31°21'W 603.8 feet, Thence N58°39'E 362.2 feet, Thence S71°51'W 615.7 feet, Thence N25°34'W 612.9 feet, Thence N46°05'W 736.6 feet, Thence N35°56'E 587.36 feet, Thence S54°06'E 66.0 feet, Thence N35°05'E 318.32 feet, Thence N13°10'E 1200.29 feet; Thence S70°01'E 380.25 feet; Thence S28°01'E 1761.07 feet, Thence N61°59'E 166.00 feet; Thence S28°01'E 3149.14 feet; Thence S50°53'W 105.66 feet, Thence S86°35'W 571.65 feet; Thence S66°17'W 879.40 feet to the Point of Beginning, Being a Part of Sections 25 and 26, Township 6 South, Range 15 East.

DEDICATION

Know all men Present that the Three Rivers Estates Inc., Incorporated in the State of New Jersey and Licensed in the State of Florida, has caused the Lands herein Described to be Surveyed, Laid out Sub-divided and Platted, to be Known as Three Rivers Estates, Unit No. 10 in Witness there of the said Three Rivers Estates Inc. has caused these Present to be Signed in its name by its President and Secretary and its Corporate Seal to be Affixed and that the Streets as Shown are hereby Dedicated to the Public.

Three Rivers Estate Inc.
Signed Sidney Hodor President
Attest Secretary
Date

ACKNOWLEDGMENT

State of Florida
County of Dade

I Hereby Certify that on this 10 Day of October 1989 before me Personally Appeared Sidney Hodor and Louis Hodor Respectively President and Secretary of Three Rivers Estates Inc. A Corporation under the Laws of the State of New Jersey and Licensed in the State of Florida to me Known to be the Individuals and Officers Described in and who Executed the Foregoing Dedication and Severally Acknowledged the Execution there of to be their Free Act and Deed as Such Officers there unto Duly Authorized and that the Official Seal of Said Corporation is Duly Affixed there to and the said Dedication is the Act and Deed of said Corporation.

Witness my Hand and Official Seal of Miami State of Florida this 10 Day of October 1989

Notary Public, State of Florida
My Commission Expires

SURVEYORS CERTIFICATE

I Hereby Certify that I am a duly Authorized Land Surveyor and that a Survey of the lands herein Described has been made under my Supervision and Sub-divided as Shown on this plat and that Permanent Concrete Monuments have been placed on each Lot Corner or as Shown on the Plat.

Bennett R. Waitles

BENNETT R. WAITLES, LAND SURVEYOR, CERT. NO. 1643

10

Inst:2003014485 Date:07/11/2003 Time:09:34
Doc Stamp-Deed : 525.00
Doc Stamp-Mort : 248.50
Intang. Tax : 141.81
MCK DC.P.DeWitt Cason,Columbia County B:988 P:1016

AGREEMENT FOR DEED

This Agreement made the 9th day of June, 2003 A.D.

(Wherever used herein the term "party" shall include the heirs, personal representatives, successors and/or assigns of the respective parties hereto; the use of singular number shall include the plural, and the plural the singular; the use of any gender shall include all genders; and, if used, the term "note" shall include all the notes herein described if more than one.)

Between NANCY M. HOLLIFIELD, TRUSTEE UNDER THE PROVISIONS OF A CERTAIN TRUST AGREEMENT DATED THE 1ST DAY OF FEBRUARY 1992, KNOWN AS THE HOLLIFIELD FAMILY TRUST, party of the first part, address: 351 ASHVILLE HIGHWAY, PISGUAH FOREST, NC 28768-9722

and

WAYNE F. JOHNDROW AND BRENDA J. JOHNDROW, HIS WIFE party of the second part,
address: 8549 262ND TERRACE, BRANFORD, FL 32008

Witnesseth: That if the said party of the second part shall first make the payments and perform the covenants hereinafter mentioned on his part to be made and performed, the said party of the first part hereby covenants and agrees to convey and assure to the said party of the second part, in fee simple, clear of all encumbrances whatever, by a good and sufficient deed, the lot, piece, or parcel, of ground situated in the County of COLUMBIA, State of Florida, known and described as follows:

LOTS 33, 34 AND 35, UNIT 10, THREE RIVERS ESTATES, A SUBDIVISION ACCORDING TO THE PLAT THEREOF RECORDED IN PLAT BOOK 6, PAGE 10, PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA. ALSO A 1995 F Chadwick Mobile Home ID#GAFLSO 5A23444CW21 & GAFLSO5B23444CW21

Selling Price: $75,000.00
and the said party of the second part hereby covenants and agrees to pay to the said party of the first part the sum of Seventy Thousand Nine Hundred Six and 01/100---- Dollars, in the manner following:

The sum of $650.00 shall be due and payable on July 15, 2003 and a like sum of $650.00 shall be due and payable on the 15th day of each month thereafter until principal and interest are paid in full. A late charge of $15.00 is due and payable if payments are 15 days past due. No penalty for prepayment in part or in whole.

with interest at the rate of 7.5 per centum, per annum payable monthly on the whole sum remaining from time to time unpaid; and to pay all taxes, assessments or impositions that may be legally levied or imposed upon said land subsequent to the year 2002, and to keep the buildings upon said premises insured in some company satisfactory to the party of the first part in a sum not less than N/A, during the term of this agreement. And in case of failure of the said party of the second part to make either of the payments or any part thereof, or to perform any of the covenants on his part hereby made and entered into, his contract shall, at the option of the party of the first part, be forfeited and terminated, and the party of the second part shall forfeit all payments made on this contract; and such payment shall be retained by the said party of the first part in full satisfaction and liquidation of all damages by him sustained and said party of the first part shall have the right to re-enter and take possession of the premises aforesaid without being liable to any action therefore, and at the option of the party of the first part the unpaid balance shall without demand become due and payable, and all costs and expenses of collection of said moneys by foreclosure or otherwise, including solicitor's fees, shall be paid by the party of the second part, and the same are hereby secured.

If any payment is not paid within thirty (30) days after such payment is due, the balance of principal shall bear interest at the rate of Eighteen percent (18%) per annum after said date. In the event that the Mortgagor should default in any of the terms, provisions and conditions hereof, and this mortgage is placed in the hands of an Attorney for collection, foreclosure, or other action, the Mortgagor agrees to pay the Mortgagee's reasonable Attorneys' fees for the use and benefit of the Mortgagees' Attorneys, and such other reasonable costs as may be incurred thereby, whether suit be brought or not, including all Appellate proceedings.

It is Mutually Agreed, by and between the parties hereto, that the time of payment shall be an essential part of this contract, and that all covenants and agreements herein contained shall extend to and be obligatory upon the heirs, executors, administrators and assigns of the respective parties.

Inst:2003014485 Date:07/11/2003 Time:09:34
Doc Stamp-Deed : 525.00
Doc Stamp-Mort : 248.50
Intang. Tax : 141.81
MCK DC,P.DeWitt Cason,Columbia County B:988 P:1017

In Witness Whereof, the parties to these presents have hereunto set their hands and seals the day and year first above written.

Signed, sealed and delivered
in the presence of:

X Doris L. Owens
Witness:

X Sarah K McCall
Witness:

Witness:

Witness:

X Nancy Hollifield Trustee
Nancy Hollifield, Trustee
351 Ashville Highway
Pisquah Forest, NC 28768-9722

STATE OF NC
COUNTY OF Transylvania

I hereby certify that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Nancy Hollifield, who produced the identification described below, and who acknowledged before me that they executed the foregoing instrument.
Witness my hand and official seal in the county and state aforesaid this 9 day of June, 2003.

X Regina A. Mason
Notary Public: Regina A. Mason
Identification Examined:
FLDL H.414630-38-831-0
Commission expires: 8/26/07

Inst:2003014485 Date:07/11/2003 Time:09:34
Doc Stamp-Deed : 525.00
Doc Stamp-Mort : 248.50
Intang. Tax : 141.81
MCK DC.P.DeWitt Cason.Columbia County B:988 P:1018

Signed, sealed and delivered
in the presence of:

Lillian D. Hunt
Witness:

Lillian D. Hunt
Witness:

Barbara A Fraddosio
Witness:

Barbara A. Fraddosio
Witness:

Wayne F. Johndrow
Wayne F. Johndrow
8549 262nd Terrace
Branford, Florida 32008

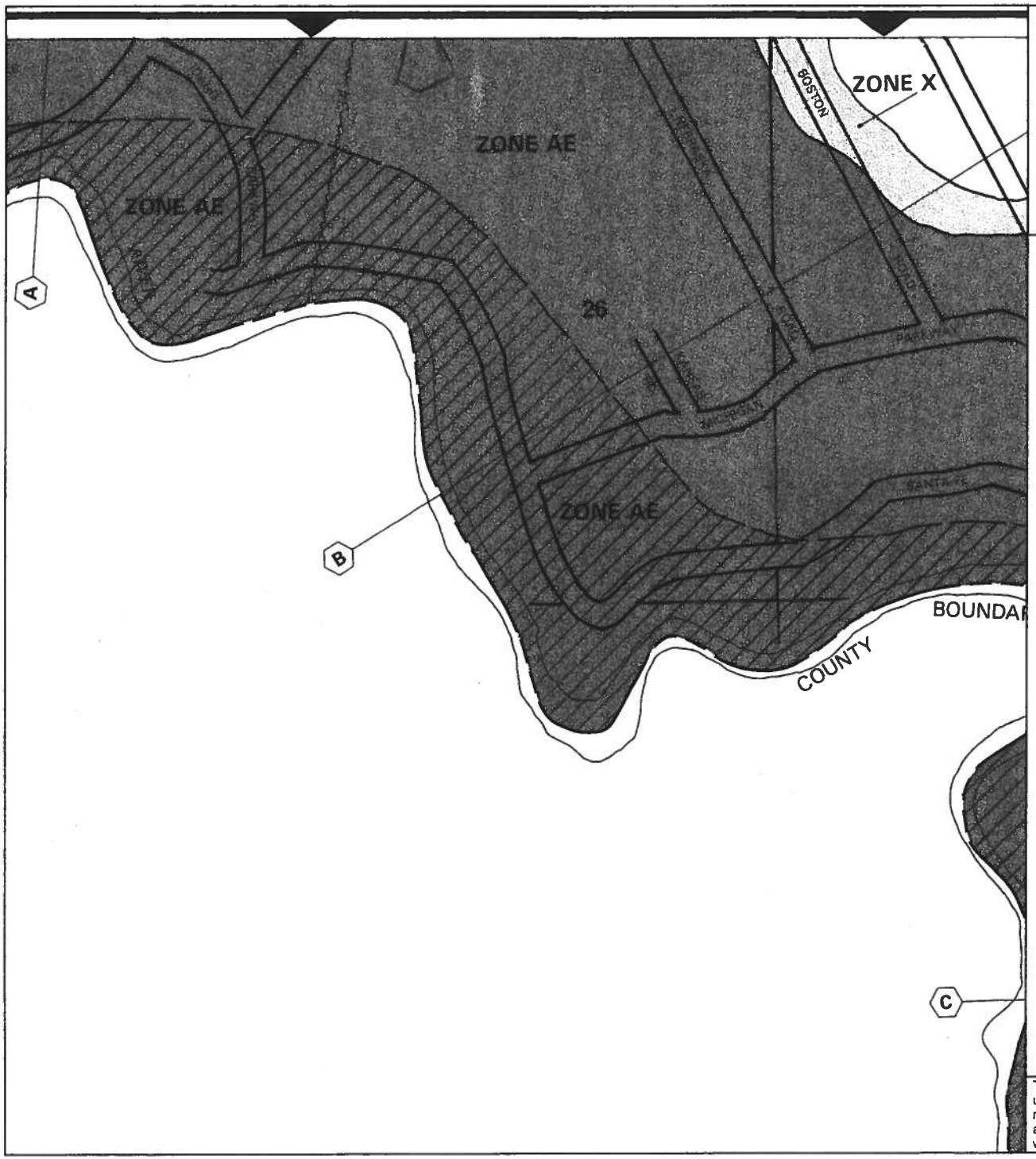
Brenda J. Johndrow
Brenda J. Johndrow
8549 262nd Terrace
Branford, Florida 32008

STATE OF FLORIDA
COUNTY OF Columbia

I hereby certify that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared Wayne F. Johndrow and Brenda J. Johndrow, who produced the identification described below, and who acknowledged before me that they executed the foregoing instrument.
Witness my hand and official seal in the county and state aforesaid this day of June, 2003.

BARBARA A. FRADDOSIO
MY COMMISSION # DD 156070
EXPIRES: November 1, 2006
Bonded Thru Notary Public Underwriters

Barbara A Fraddosio
Notary Public:
Identification Examined:
drivers license



N

APPROXIMATE SCALE IN FEET

1000 0 1000

NATIONAL FLOOD INSURANCE PROGRAM

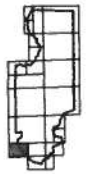
FIRM

FLOOD INSURANCE RATE MAP

COLUMBIA COUNTY, FLORIDA
(UNINCORPORATED AREAS)

PANEL 255 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0255 B

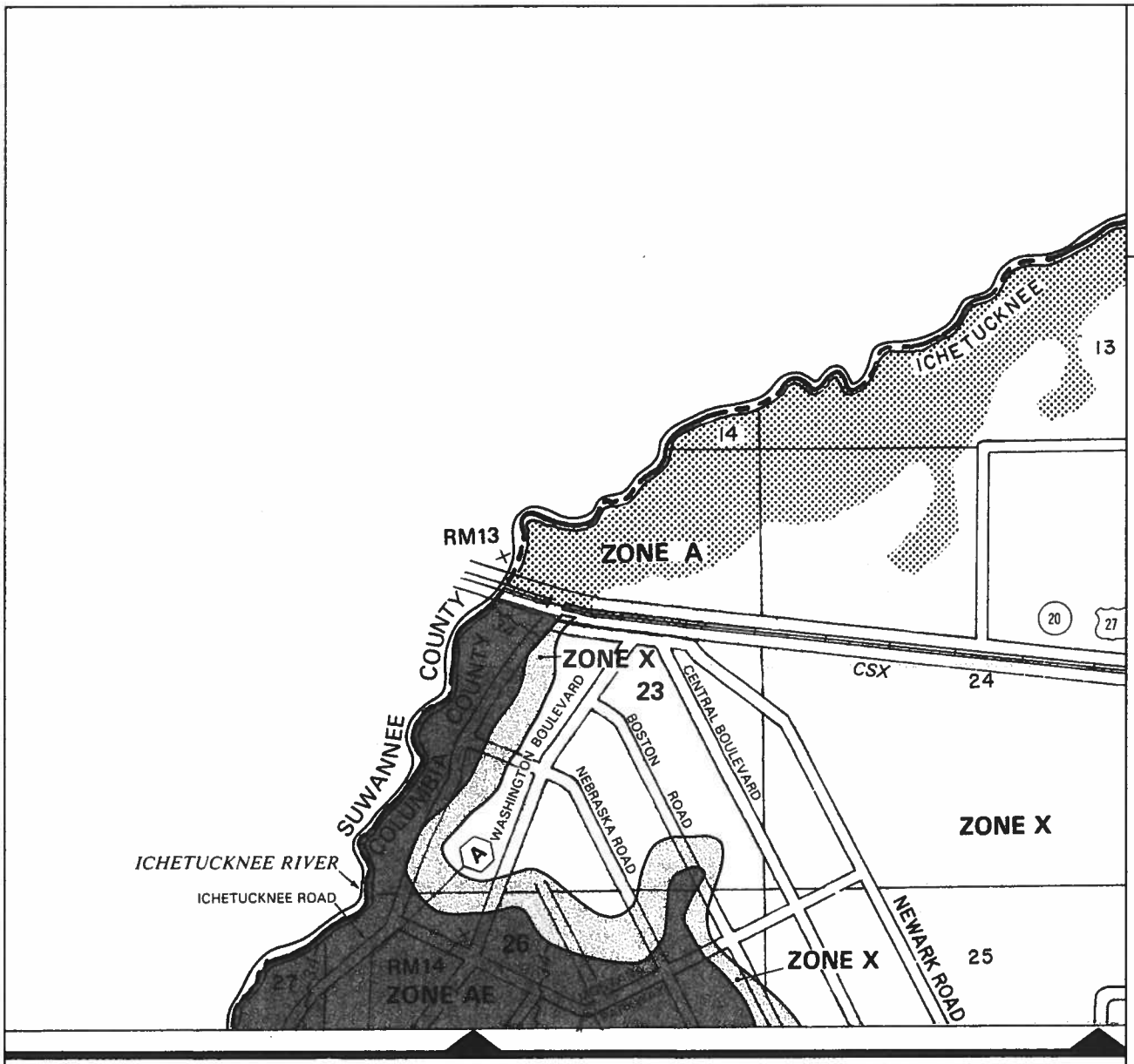
EFFECTIVE DATE:
JANUARY 6, 1988

Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Futher information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/mit/tsd.

Print Date: 7/23/2004 (printed at scale and type A)

0407-53



APPROXIMATE SCALE IN FEET

2000 0 2000

NATIONAL FLOOD INSURANCE PROGRAM

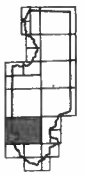
FIRM

FLOOD INSURANCE RATE MAP

COLUMBIA COUNTY, FLORIDA
(UNINCORPORATED AREAS)

PANEL 225 OF 290

PANEL LOCATION



COMMUNITY-PANEL NUMBER
120070 0225 B

EFFECTIVE DATE:
JANUARY 6, 1988

Federal Emergency Management Agency

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Print Date 7/23/2004 (printed at scale and type A)

DATE 7-19-04 INSPECTION TAKEN BY CH

BUILDING PERMIT # _____ CULVERT / WAIVER PERMIT # _____

WAIVER APPROVED _____ WAIVER NOT APPROVED _____

PARCEL ID # _____ ZONING _____

SETBACKS: FRONT _____ REAR _____ SIDE _____ HEIGHT _____

FLOOD ZONE _____ SEPTIC _____ NO. EXISTING D.U. _____

TYPE OF DEVELOPMENT MH Pre Insp.

SUBDIVISION (Lot/Block/Unit/Phase) _____

OWNER Wayne Johndrow PHONE 386-497-4168

ADDRESS 946 sw Montana St. ft. White fl 32038

CONTRACTOR _____ PHONE _____

LOCATION 47 @ 27 @ River Rd @ Utah @ Washington @ Montana St. 1st MH on @

COMMENTS: _____

INSPECTION(S) REQUESTED: **INSPECTION DATE:** Tuesday

_____ Temp Power _____ Foundation _____ Set backs _____ Monolithic Slab

_____ Under slab rough-in plumbing _____ Slab _____ Framing

_____ Rough-in plumbing above slab and below wood floor _____ Other _____

_____ Elecrtical Rough-in _____ Heat and Air duct _____ Perimeter Beam (Lintel)

_____ Permanent Power _____ CO Final _____ Culvert _____ Pool _____ Reconnection

_____ M/H tie downs, blocking, electricity and plumbing _____ Utility pole

_____ Travel Trailer _____ Re-roof _____ Service Change _____ Spot check/Re-check

INSPECTORS:

APPROVED J NOT APPROVED _____ BY FOP POWER CO. _____

INSPECTORS COMMENTS: install smoke detectors before final

22177

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077
Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME
Wayne & Brenda Johndrow

Policy Number

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.
948 SW Montana

Company NAIC Number

CITY	STATE	ZIP CODE
Fort White	FL	32038

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lot 33 Three Rivers Estates Unit 10

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)
Residential

LATITUDE/LONGITUDE (OPTIONAL) (##° - ## - ##.## or ##.######°)
HORIZONTAL DATUM: ☐ NAD 1927 ☐ NAD 1983
SOURCE: ☐ GPS (Type):_____ ☐ USGS Quad Map ☐ Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	B2. COUNTY NAME	B3. STATE
Columbia 120070	Columbia	FL

B4. MAP AND 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 depth of flooding)
120070 0225	B	6 Jan 1988	6 Jan 1988	AE	35.00

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

B11. Indicate the elevation datum used for the BFE in 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____

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. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum 29 Conversion/Comments N/A
Elevation reference mark used N/A Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

- o a) Top of bottom floor (including basement or enclosure) 36. 06 ft.(m)
- o b) Top of next higher floor N. A ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) N. A ft.(m)
- o d) Attached garage (top of slab) N. A ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) N. A ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 31. 0 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 31. 3 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A
- o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

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 in Sections A, B, and C 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.

CERTIFIER'S NAME L. Scott Britt LICENSE NUMBER PLS #5757

TITLE Chief Surveyor COMPANY NAME Britt Surveying

ADDRESS	CITY	STATE	ZIP CODE
830 W. Duval St.	Lake City	FL	32055

SIGNATURE DATE 10/04/04 TELEPHONE 386-752-7163

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. 948 SW Montana			Policy Number
CITY Fort White	STATE FL	ZIP CODE 32038	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS
Information shown hereon if for a single wide mobile home.

L-15476 ☐ Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number _(Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. For 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, C (Items C3.h and C3.i only), 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, C, 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.

G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

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

G8. Elevation of as-built lowest floor (including basement) of the building is: ____.__ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: ____.__ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME | TITLE

COMMUNITY NAME | TELEPHONE

SIGNATURE | DATE

COMMENTS

☐ Check here if attachments

BUILDING DIAGRAMS

The following eight diagrams illustrate various types of buildings. Compare the features of the building being certified with the features shown in the diagrams and select the diagram most applicable. Enter the diagram number in Item C2 and the elevations in Items C3a-C3g.

In A zones, the floor elevation is taken at the top finished surface of the floor indicated; in V zones, the floor elevation is taken at the bottom of the lowest horizontal structural member (see drawing in instructions for Section C).

DIAGRAM 1

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

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

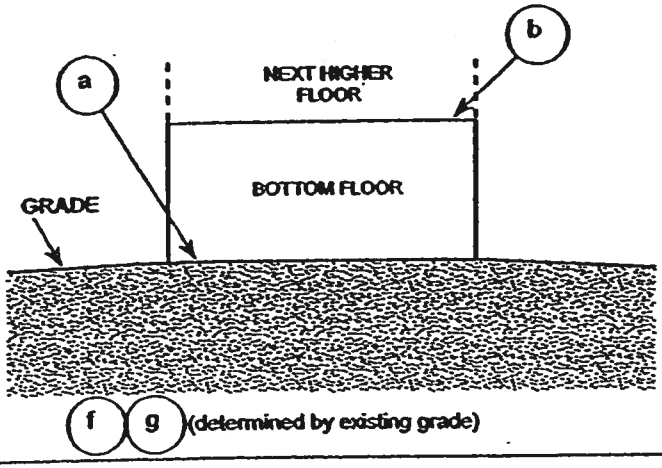


DIAGRAM 2

All single- and multiple-floor buildings with basement (other than split-level) and high-rise buildings with basement, either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature – The bottom floor (basement or underground garage) is below ground level (grade) on all sides. Buildings constructed above crawl spaces that are below grade on all sides should also use this diagram.*

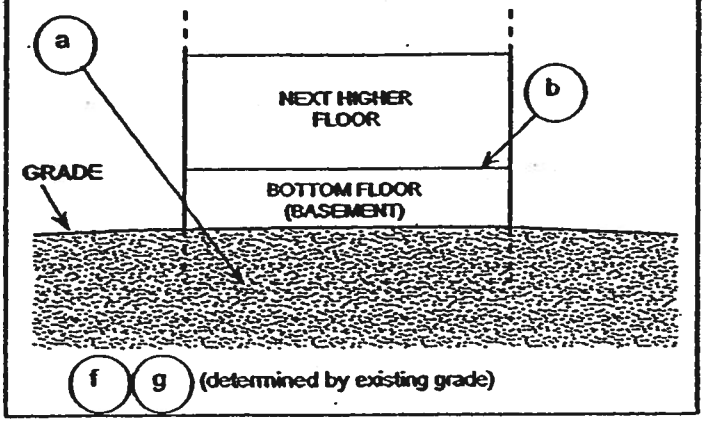


DIAGRAM 3

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

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

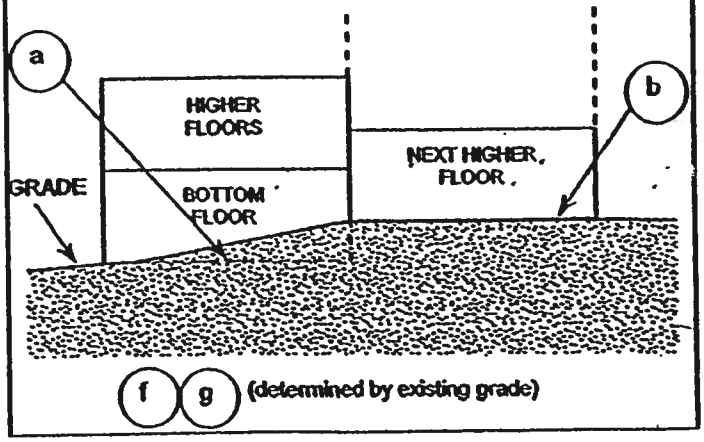
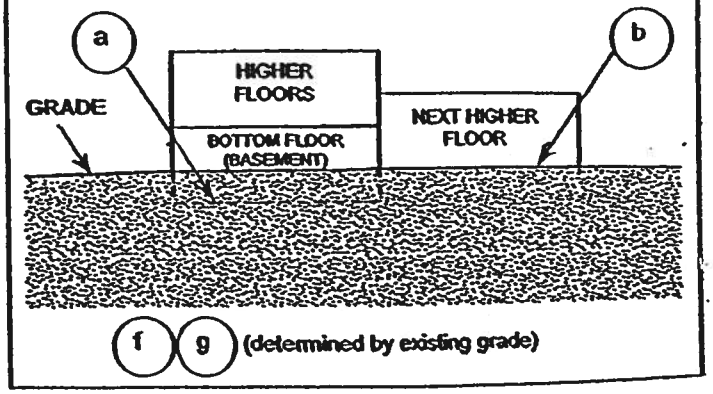


DIAGRAM 4

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

Distinguishing Feature – The bottom floor (basement or underground garage) is below ground level (grade) on all sides. Buildings constructed above crawl spaces that are below grade on all sides should also use this diagram.*



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

22177

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077
Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME
Wayne & Brenda Johndrow

Policy Number

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.
948 SW Montana

Company NAIC Number

CITY	STATE	ZIP CODE
Fort White	FL	32038

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lot 33 Three Rivers Estates Unit 10

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)
Residential

LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.##" or ##.######°)
HORIZONTAL DATUM: ☐ NAD 1927 ☐ NAD 1983
SOURCE: ☐ GPS (Type):____ ☐ USGS Quad Map ☐ Other: ____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	B2. COUNTY NAME	B3. STATE
Columbia 120070	Columbia	FL

B4. MAP AND 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 depth of flooding)
120070 0225	B	6 Jan 1988	6 Jan 1988	AE	35.00

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

B11. Indicate the elevation datum used for the BFE in 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 ____

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. Building Diagram Number 5 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum 29 Conversion/Comments N/A
Elevation reference mark used N/A Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

o a) Top of bottom floor (including basement or enclosure)	36. 06 ft.(m)
o b) Top of next higher floor	N. A ft.(m)
o c) Bottom of lowest horizontal structural member (V zones only)	N. A ft.(m)
o d) Attached garage (top of slab)	N. A ft.(m)
o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	N. A ft.(m)
o f) Lowest adjacent (finished) grade (LAG)	31. 0 ft.(m)
o g) Highest adjacent (finished) grade (HAG)	31. 3 ft.(m)
o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A	
o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm)	

License Number, Embossed Seal, Signature, and Date

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 in Sections A, B, and C 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.

CERTIFIER'S NAME L. Scott Britt LICENSE NUMBER PLS #5757

TITLE Chief Surveyor COMPANY NAME Britt Surveying

ADDRESS	CITY	STATE	ZIP CODE
830 W. Duval St.	Lake City	FL	32055

SIGNATURE DATE 10/04/04 TELEPHONE 386-752-7163

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. 9[illegible] SW Montana			Policy Number
CITY Fort White	STATE FL	ZIP CODE 32038	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS
Information shown hereon if for a single wide mobile home.

L-15476 ☐ Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number _(Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. For 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, C (Items C3.h and C3.i only), 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, C, 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.

G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

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

G8. Elevation of as-built lowest floor (including basement) of the building is: ____.__ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: ____.__ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME | TITLE

COMMUNITY NAME | TELEPHONE

SIGNATURE | DATE

COMMENTS

☐ Check here if attachments

BUILDING DIAGRAMS

The following eight diagrams illustrate various types of buildings. Compare the features of the building being certified with the features shown in the diagrams and select the diagram most applicable. Enter the diagram number in Item C2 and the elevations in Items C3a-C3g.

In A zones, the floor elevation is taken at the top finished surface of the floor indicated; in V zones, the floor elevation is taken at the bottom of the lowest horizontal structural member (see drawing in instructions for Section C).

DIAGRAM 1

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

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

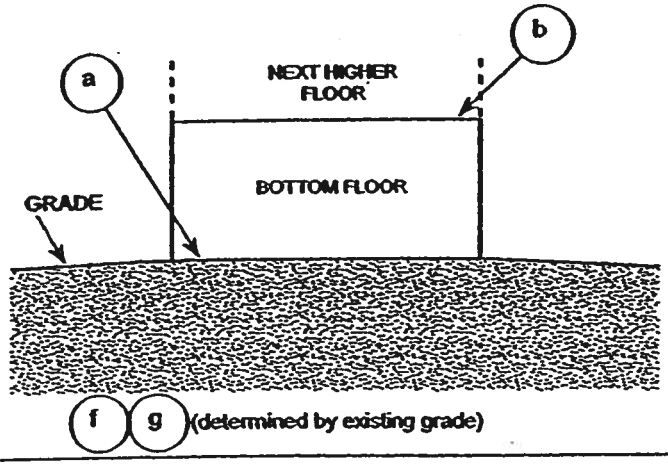


DIAGRAM 2

All single- and multiple-floor buildings with basement (other than split-level) and high-rise buildings with basement, either detached or row type (e.g., townhouses); with or without attached garage.

Distinguishing Feature – The bottom floor (basement or underground garage) is below ground level (grade) on all sides. Buildings constructed above crawl spaces that are below grade on all sides should also use this diagram.*

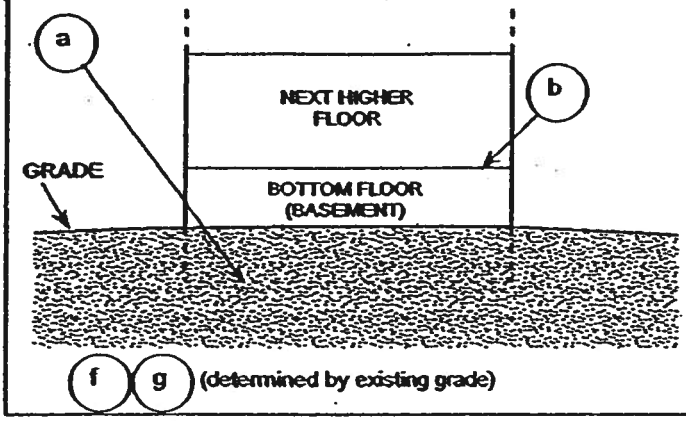


DIAGRAM 3

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

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

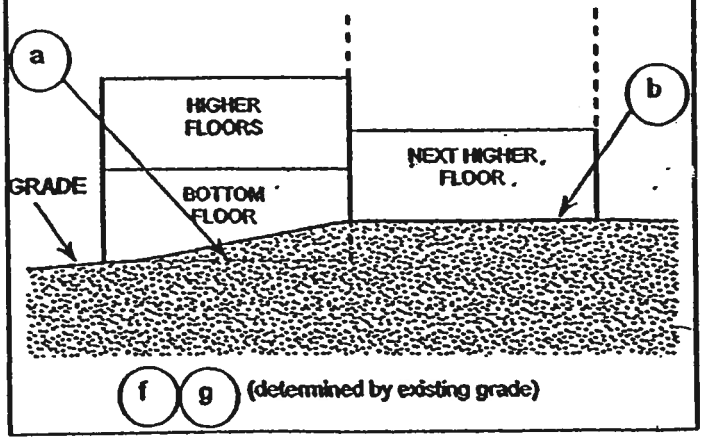
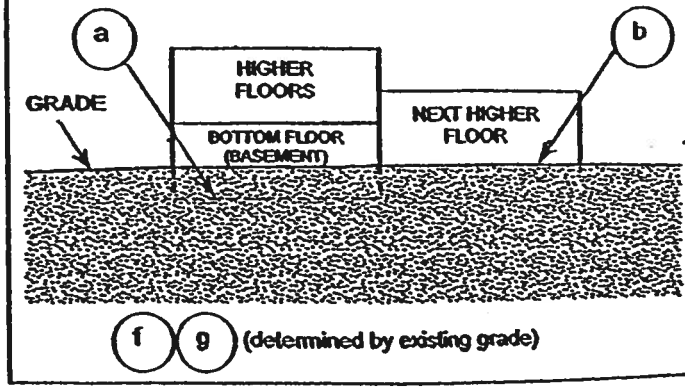


DIAGRAM 4

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

Distinguishing Feature – The bottom floor (basement or underground garage) is below ground level (grade) on all sides. Buildings constructed above crawl spaces that are below grade on all sides should also use this diagram.*



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

Columbia County Building Department
Flood Development Permit

Development Permit
F 023- 304038

DATE 08/10/2004 BUILDING PERMIT NUMBER 000022177

APPLICANT WAYNE JOHNDROW PHONE 497-4168

ADDRESS 948 SW MONTANA STREET FT. WHITE FL 32038

OWNER WAYNE JOHNDROW PHONE 497-4168

ADDRESS 946 SW MONTANA STREET FT. WHITE FL 32038

CONTRACTOR VIC ETHERIDGE PHONE

ADDRESS P.O. BOX 326 HIGH SPRINGS FL 32655

SUBDIVISION 3 RIVERS ESTATES Lot 33 Block Unit Phase

TYPE OF DEVELOPMENT MH,UTILITY PARCEL ID NO. 26-6S-15-00775-000

FLOOD ZONE AE BY BK 1-6-88 FIRM COMMUNITY #. 120070 - PANEL #. 225 B

FIRM 100 YEAR ELEVATION 35 PLAN INCLUDED YES or NO

REQUIRED LOWEST HABITABLE FLOOR ELEVATION 36

IN THE REGULATORY FLOODWAY YES or NO RIVER Santa Fe

SURVEYOR / ENGINEER NAME William Freeman LICENSE NUMBER

✓ ONE FOOT RISE CERTIFICATION INCLUDED

ZERO RISE CERTIFICATION INCLUDED

SRWMD PERMIT NUMBER
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED

INSPECTED DATE BY

COMMENTS

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

PERMIT EXPIRES ONE YEAR FROM THE DATE OF ISSUANCE

Freeman Design Group inc
Engineers • Planners

161 N.W. Madison St., Suite 102
Lake City, Florida 32055
Tel: 386-758-4209
Fax: 386-758-4290

8/09/2004

Columbia County Building Department

To whom it may concern,

RE: Wayne F & Brenda Johndrow
Lot 33, 34, and 35 Unit 10 Three Rivers Estates

I have reviewed the conditions for the referenced lot. The property is located in a flood zone (Zone AE). The required floor elevation (36.00') shall be set 1' above the 100 year flood elevation. The 100 year flood elevation is established at 35.00' according to the elevation certificate performed by Britt Surveying. Please find a copy of the calculations verifying the flood rise to be less than 1'-0". If you have any questions, please call me at (386) 758-4209.

Sincerely,

William H. Freeman

William Freeman, P.E.

1 FOOT RISE CALCULATIONS

By: William H. Freeman
Company: Freeman Design Group, Inc.

Size of piers	1.78 sq ft
Number of piers	40
Height of piers	4.7 ft
Volume of Displacement	334.64 cu ft
Total land area	56340 sf
total rise = Vol Displacement/Total land area	0.0059 ft
	0.0713 inches

Total rise is much less than 1'-0" so this meets requirements

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

BUILDING OWNER'S NAME
Wayne F. & Brenda J. Johndrow

Policy Number

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.
948 SW Montana St.

Company NAIC Number

CITY	STATE	ZIP CODE
Ft White	FL	32038

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
Lot 33 in Three Rivers Estates Unit 10

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)
Residential

LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.##" or ##.######°)
HORIZONTAL DATUM: ☐ NAD 1927 ☐ NAD 1983
SOURCE: ☐ GPS (Type): ____ ☐ USGS Quad Map ☐ Other: ____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER	B2. COUNTY NAME	B3. STATE
Columbia 120070	Columbia	FL

B4. MAP AND 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 depth of flooding)
12007C 0225	B	6 Jan 1988	6 Jan 1988	AE	36.00

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

B11. Indicate the elevation datum used for the BFE in 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: ____

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. Building Diagram Number 6 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.
Datum 29 Conversion/Comments N/A
Elevation reference mark used N/A Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No

o a) Top of bottom floor (including basement or enclosure)	N. A	ft.(m)
o b) Top of next higher floor	N. A	ft.(m)
o c) Bottom of lowest horizontal structural member (V zones only)	N. A	ft.(m)
o d) Attached garage (top of slab)	N. A	ft.(m)
o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	N. A	ft.(m)
o f) Lowest adjacent (finished) grade (LAG)	30. 3	ft.(m)
o g) Highest adjacent (finished) grade (HAG)	30. 5	ft.(m)
o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade N/A		
o i) Total area of all permanent openings (flood vents) in C3.h N/A sq. in. (sq. cm)		

License Number, Embossed Seal, Signature, and Date

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 in Sections A, B, and C 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.

CERTIFIER'S NAME L. Scott Britt
LICENSE NUMBER PLS # 5757

TITLE Chief Surveyor
COMPANY NAME Britt Surveying

ADDRESS	CITY	STATE	ZIP CODE
830 W. Duval St.	Lake City	FL	32055

SIGNATURE
DATE 8/04/04
TELEPHONE 386-752-7163

L-15238A

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Includir Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 948 SW Montana St.			Policy Number
CITY Ft White	STATE FL	ZIP CODE 32038	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS
Bench mark set at 36.00 feet in a 18" Sweet Gum Tree near proposed mobile home

L-15239A

☐ Check here if attachments

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

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number _(Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-9 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E5. For 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, C (Items C3.h and C3.i only), 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, C, 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.

G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

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

G8. Elevation of as-built lowest floor (including basement) of the building is: ____.__ ft.(m) Datum: ____

G9. BFE or (in Zone AO) depth of flooding at the building site is: ____.__ ft.(m) Datum: ____

LOCAL OFFICIAL'S NAME | TITLE

COMMUNITY NAME | TELEPHONE

SIGNATURE | DATE

COMMENTS

☐ Check here if attachments