

DATE 10/03/2003

Columbia County
Building Permit / Application

PERMIT

000021132

This Permit Expires One Year From Date of Issue

New Resident

APPLICANT L.L. CLEMONS PHONE 352 665-6444
ADDRESS 1911 NW 97TH ST GAINESVILLE FL 32606
OWNER SAME AS APPLICANT PHONE _____
ADDRESS _____ FL _____
CONTRACTOR OWNER BUILDER PHONE _____
LOCATION OF PROPERTY 47S, TR ON 27, TL ON RIVERSIDE DR., CORNER OF NEBRASKA AND
RIVERSIDE DRIVE (911) 511SW RIVERSIDE AVE)
TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 63000.00
FLOOR AREA 2100.00 TOTAL AREA 2940.00 HEIGHT .00 STORIES 2 WALLS FRAMED
FOUNDATION CONC ROOF (Type & Pitch) 6/12 FLOOR SLAB
LAND USE & ZONING ESA-2 MAX. HEIGHT 21
MINIMUM SET BACK: STREET-FRONT / SIDE 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE AE CERT. DATE _____ DEV. PERMIT 2303022

LEGAL DESCRIPTION

PARCEL ID 00-00-00-00852-000 SUBDIVISION THREE RIVERS ESTATES
BLOCK _____ LOT 17AA UNIT 11 TOTAL ACRES 1.00

I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all foregoing information accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

WAIVER Y
Driveway Connection _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____

03-0825-N GT HD
Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____

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 _____ framing _____
date/app. by _____ date/app. by _____ date/app. by _____
Rough-in plumbing above slab and below wood floor _____
date/app. by _____
Electrical rough-in _____ Heat and Air Duct _____ Peri. beam _____
date/app. by _____ date/app. by _____ date/app. by _____
Permanent power _____ Final _____ Pool _____
date/app. by _____ date/app. by _____ date/app. by _____

COMMENTS: 1 FT ABOVE RD, DP \$10, CK#1006 total 379.40

OTHER TYPES OF INSPECTIONS

Culvert _____ M/H tie downs, blocking, electricity and plumbing _____
date/app. by _____ date/app. by _____
Utility Pole _____ Pump pole _____ Reconnection _____
date/app. by _____ date/app. by _____ date/app. by _____

BUILDING PERMIT FEE \$ 315.00 ZONING CERT. FEE \$ 25.00 Certification Fee \$ 14.70 Surcharge \$ 14.70
MISC. FEES \$.00 CULVERT FEE \$ _____ TOTAL PERMIT FEE \$ 369.40
INSPECTORS OFFICE [Signature] CLERKS OFFICE msb

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 OFFICE OF OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.

Parcel Number 00-00-00-00852-000

Building permit No. 000021132

Use Classification SFD, UTILITY

Fire: 22.68

Permit Holder OWNER BUILDER

Waste: 49.00

Owner of Building L.L. CLEMONS

Total: 71.68

Location: THREE RIVERS ESTATES, LOT 17AA, UNIT 11

Date: 06/29/2004

Harry Dicks

Building Inspector



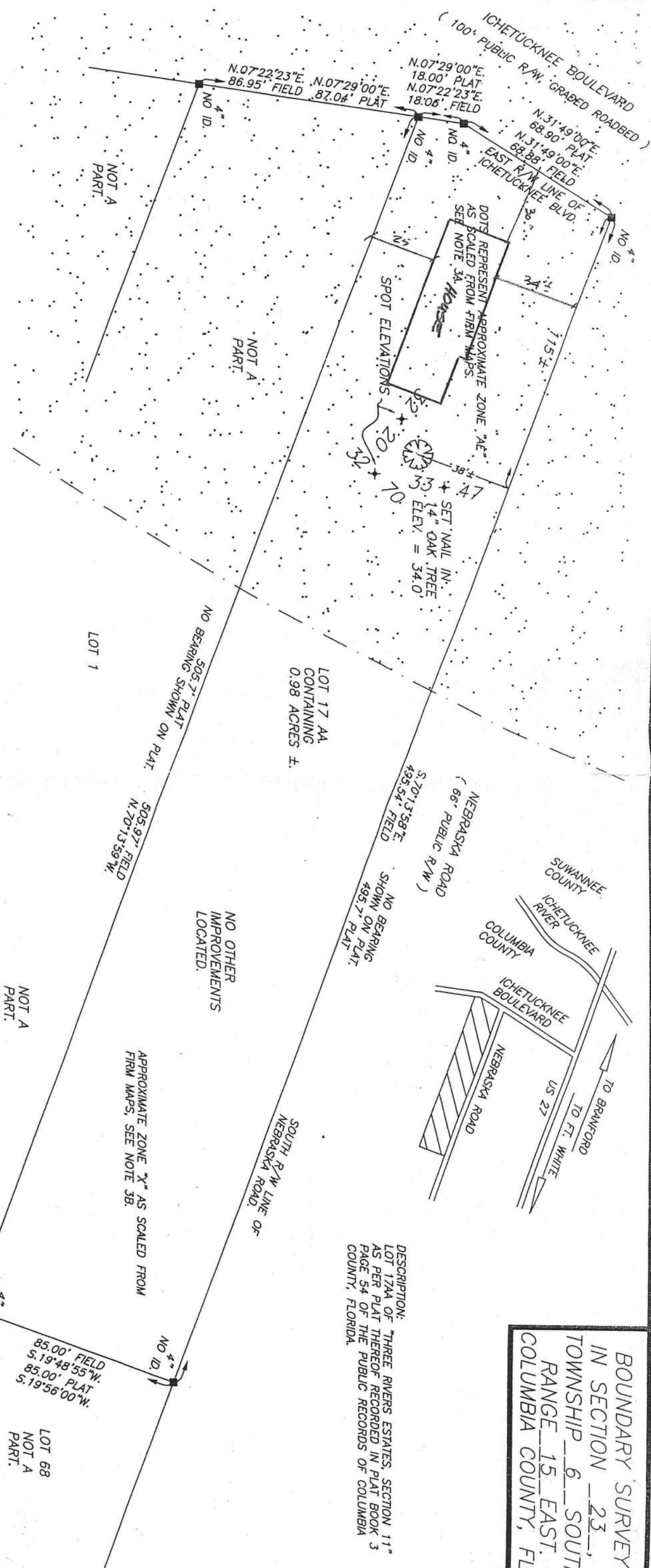
POST IN A CONSPICUOUS PLACE
(Business Places Only)

APPLICATION FOR DEVELOPMENT PERMIT

PERMIT NO. 1-023-03-022
(COUNTY NO. & SEQUENCE)DATE: 10-3-03APPLICANT: L.L. CLEMONS
ADDRESS: 1511 SW Riverside Avenue, Ft. White, FL 32038
TELEPHONE: (352) 665-6444
OWNER: Same as above
ADDRESS: " " "
TELEPHONE: " " "NEW SUBDIVISION NO (YES/NO) IF YES, RECORD THE ENGINEER'S
REGISTRATION NO. P.E. NO. 11630
EDA RALPH ENGR. P.E.
97 NEW ENGR.
TRS 23-66-15
SUBDIVISION 3 RIVERS ESTATES LOT/BLOCK: 17AA
DU SINGLE FAMILY DWELLING WORK _____
RIVER: ICHETUCNEE RIVER MILE _____
PLAN NO (YES/NO) WELL PERMIT NO. _____
SUR-ELEVATION 32.20' SANITARY PERMIT NO. 03-0825-1
SURVEYOR NO. OU - 174 RILEY LETTER BUILDING PERMIT NO. 21132
OFFICIAL 100-YEAR ELEVATION 34.0' MSL (SRWMD)
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 35.0' MSL (SRWMD)
PERMIT APPROVED [Signature] 10-3-03
ADMINISTRATOR SIGNATURE DATE
EXPIRATION DATE OF PERMIT 10-3-04
VIOLATIONS: _____ FINAL INSPECTION DATE: _____
COMMENTS: Over Rise Certificate on file
Requests Final Flood Elevation Certificate.

BOUNDARY SURVEY
IN SECTION 23,
TOWNSHIP 6 SOUTH,
RANGE 15 EAST,
COLUMBIA COUNTY, FLA.

DESCRIPTION:
LOT 17A OF THREE RIVERS ESTATES, SECTION 11
AS PER PLAT THEREOF RECORDED IN PLAT BOOK 3
PAGE 54 OF THE PUBLIC RECORDS OF COLUMBIA
COUNTY, FLORIDA.



- SURVEYOR'S NOTES:
1. BOUNDARY BASED ON MONUMENTATION FOUND IN ACCORDANCE WITH THE RETRACEMENT OF THE ORIGINAL SURVEY FOR SAID PLAT OF RECORD.
 2. BEARINGS BASED ON PLAT OF RECORD USING MONUMENTS FOUND ON THE WEST LINE OF SAID PARCEL.
 - 3A. SOME PORTIONS OF THIS PARCEL ARE IN ZONE "AE" AND HAS A BASE FLOOD ELEVATION OF 34 FEET.
 - 3B. SOME PORTIONS OF THIS PARCEL ARE IN ZONE "X" AND IS DETERMINED TO BE AREAS OF 500 YEAR FLOOD; AREAS OF 100 YEAR FLOOD WITH AVERAGE DEPTHS OF LESS THAN 1 FOOT OR WITH DRAINAGE AREAS LESS THAN 1 SQUARE MILE AS PER FLOOD INSURANCE RATE MAP, DATED 6 JANUARY 1988, 120070 0225 B.
 4. NO EASEMENT FOR UTILITY AND/OR DRAINAGE IS SHOWN ON THIS LOT ON SAID PLAT OF RECORD.
 5. THE IMPROVEMENTS, IF ANY, INDICATED ON THIS SURVEY DRAWING ARE AS LOCATED ON DATE OF FIELD SURVEY AS SHOWN HEREON.
 6. IF THEY EXIST, NO UNDERGROUND ENCROACHMENTS AND/OR UTILITIES WERE LOCATED FOR THIS SURVEY EXCEPT AS SHOWN HEREON.
 7. NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER.
 8. CLOSURE OF FIELD SURVEY IS 1/41,530.
 9. CERTIFIED TO:
SKIP CLEMONS

- SYMBOL LEGEND
- CONCRETE MONUMENT FOUND
 - CONCRETE MONUMENT SET, LS 4708
 - IRON PIN OR PIPE FOUND
 - 5/8" IRON ROD SET, LS 4708
 - x- WIRE FENCE
 - E- ELECTRIC UTILITY LINE (OVERHEAD)
 - UG- UNDERGROUND ELECTRIC SERVICE
 - CIV- CABLE TV LINE (OVERHEAD)
 - CHAIN LINK FENCE
 - WOODEN FENCE
 - CMP CORRUGATED METAL PIPE
 - RCP REINFORCED CONCRETE PIPE
 - LS LAND SURVEYOR
 - LB LICENSED BUSINESS
 - ORB OFFICIAL RECORD BOOK
 - PRM PERMANENT REFERENCE MONUMENT
 - PCP PERMANENT CONTROL POINT
 - ⊗ UTILITY POLE
 - ⊙ RIGHT-OF-WAY
 - NO ID. NO IDENTIFICATION
 - FLA. D.O.T. FLA. DEPT. OF TRANSPORTATION
 - ⊕ C.M. CENTERLINE
 - CONCRETE MONUMENT
 - IRON ROD
 - IRON PIPE

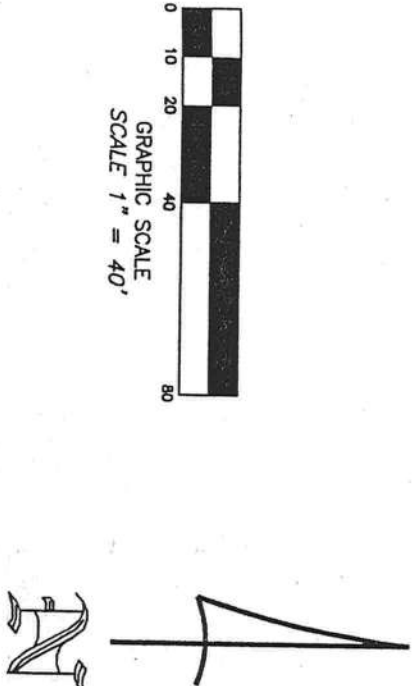
MARK D. DUREN, P.S.M.
LS 4708
RT. 18 BOX 555
SISTERS WELCOME ROAD
LAKE CITY, FLA. 32025
(386) 758-9831 OFFICE
(386) 758-8010 FAX

FIELD SURVEY DATE: JUNE 15, 2003
DATE DRAWN: JUNE 16, 2003
FOR: SKIP CLEMONS

FIELD BOOK 125 PAGE 54
DRAWN BY: BRANDON STUBBS

WO# 03-367

SIGNED:
MARK D. DUREN, LS 4708



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

BUILDING OWNER'S NAME <u>SKIP CLEMENS</u>	For Insurance Company Use: Policy Number
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. <u>511 RIVER SIDE AVE</u>	Company NAIC Number
CITY <u>FT WHITE</u>	STATE <u>FL</u>
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 17 AA THREE RIVERS EST UNIT 11 (ELEVEN)</u>	ZIP CODE <u>32038</u>
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)	

LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ##.###" or ##.#####)	HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other
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SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER <u>120070 0225 B</u>	B2. COUNTY NAME <u>COLUMBIA</u>	B3. STATE <u>FL</u>
B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE
		B7. FIRM PANEL EFFECTIVE/REVISED DATE <u>JAN 6 1988</u>
		B8. FLOOD ZONE(S) <u>AE</u>
		B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) <u>34.0</u>

- 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): SUWANNEE RIVER WATER MANAGEMENT DIST.
- 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 1 (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 SAF-22 Conversion/Comments
- Elevation reference mark used SAF-22 Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No
- | | |
|--|---------------------------|
| <input type="checkbox"/> a) Top of bottom floor (including basement or enclosure) | <u>35</u> <u>2</u> ft.(m) |
| <input type="checkbox"/> b) Top of next higher floor | <u>NA</u> ft.(m) |
| <input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only) | <u>NA</u> ft.(m) |
| <input type="checkbox"/> d) Attached garage (top of slab) | <u>NA</u> ft.(m) |
| <input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area.) | <u>33</u> <u>5</u> ft.(m) |
| <input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG) | <u>31</u> <u>6</u> ft.(m) |
| <input type="checkbox"/> g) Highest adjacent (finished) grade (HAG) | <u>32</u> <u>8</u> ft.(m) |
| <input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade <u>NA</u> | |
| <input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h <u>NA</u> sq. in. (sq. cm) | |

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 <u>William H. Kitchen</u>	LICENSE NUMBER <u>LS 5490</u>
TITLE <u>PROF. SURVEYOR & MAPPER</u>	COMPANY NAME
ADDRESS <u>152 N. MARION</u>	CITY <u>LAKE CITY</u>
SIGNATURE <u>William H. Kitchen</u>	STATE <u>FL</u>
	ZIP CODE <u>32055</u>
	TELEPHONE <u>758 9352</u>

IMPORTANT: In these spaces, copy the corresponding information from Section A.

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

For Insurance Company Use:

Policy Number

CITY

STATE

ZIP CODE

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

C3a WATER WELL PUMP

☐ 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 E5. 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
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building 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

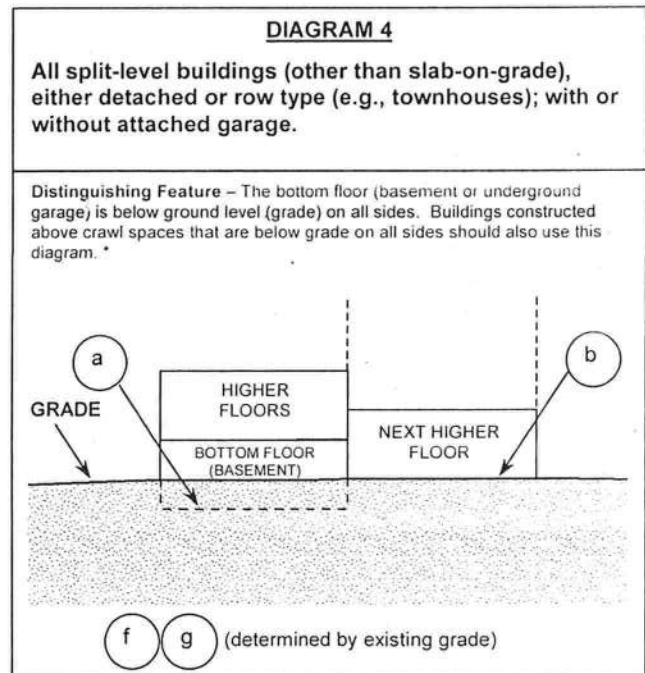
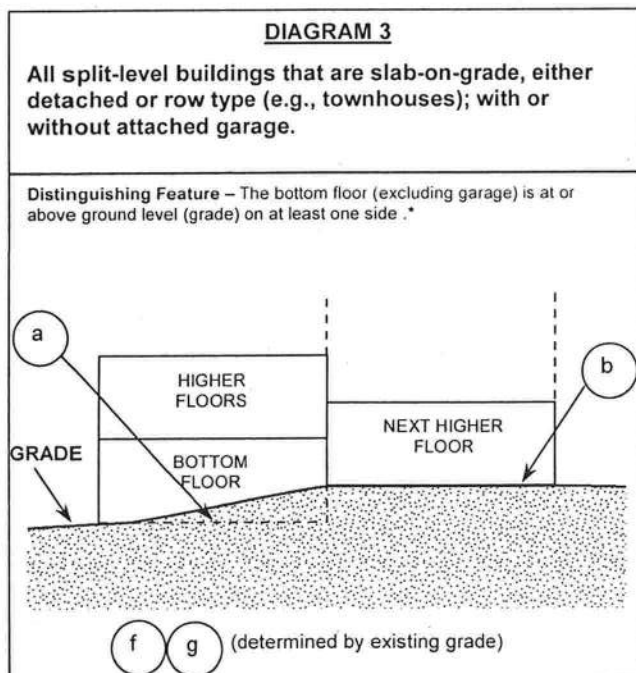
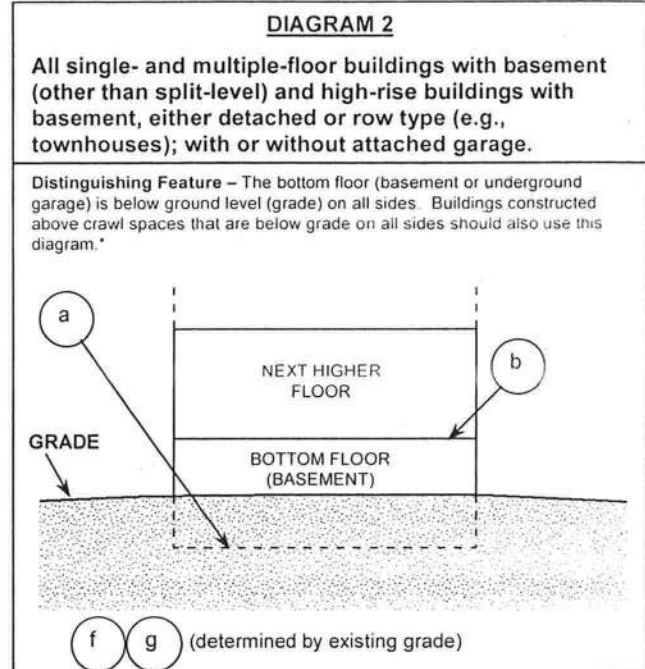
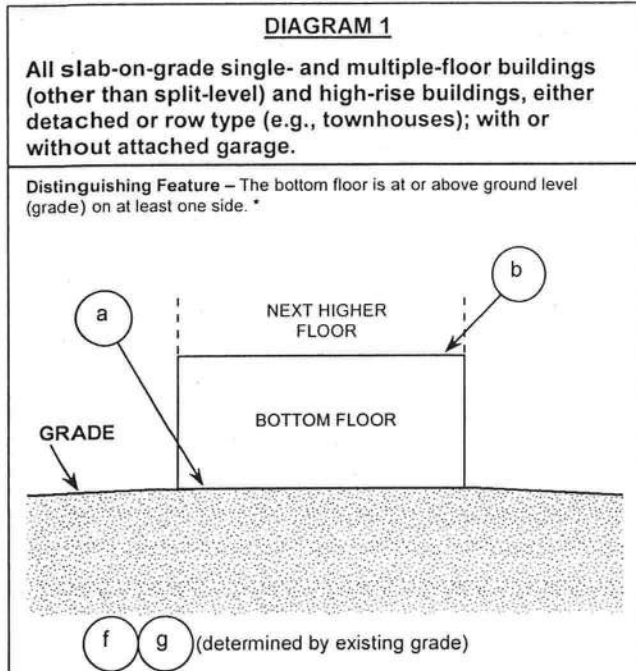
COMMENTS

☐ Check here if attachments

BUILDING DIAGRAMS

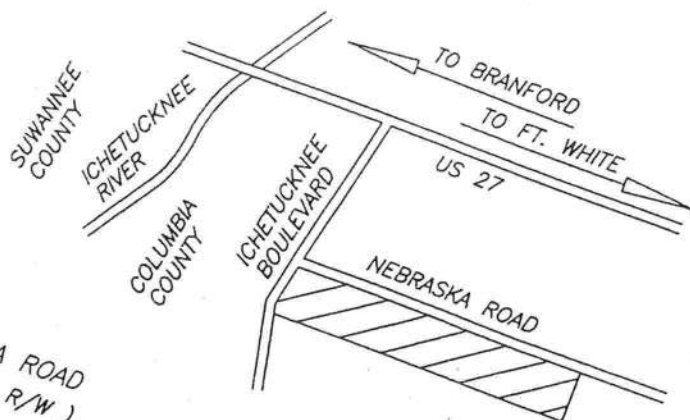
The following eight diagrams illustrate various types of buildings. Compare the features of the building being certified with the features shown in the diagrams and select the diagram most applicable. Enter the diagram number in Item C2. and the elevations in Items C3.a-C3.g.

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).



* 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.

BOUNDARY SURVEY
IN SECTION 23,
TOWNSHIP 6 SOUTH,
RANGE 15 EAST.
COLUMBIA COUNTY, FLA.



DESCRIPTION:
LOT 17AA OF "THREE RIVERS ESTATES, SECTION 11"
AS PER PLAT THEREOF RECORDED IN PLAT BOOK 3
PAGE 54 OF THE PUBLIC RECORDS OF COLUMBIA
COUNTY, FLORIDA.

NEBRASKA ROAD
66' PUBLIC R/W)

70°13'58"E.
54' FIELD
NO BEARING
SHOWN ON PLAT.
495.7' PLAT

SOUTH R/W LINE OF
NEBRASKA ROAD.

NO OTHER
IMPROVEMENTS
LOCATED.

APPROXIMATE ZONE "X" AS SCALED FROM
FIRM MAPS, SEE NOTE 3B.

505.97' FIELD
N. 70°13'59"W.

NOT A
PART.

NO 4" ID.
85.00' FIELD
S. 19°48'55"W.
85.00' PLAT
S. 19°56'00"W.

LOT 68
NOT A
PART.

NO 4" ID.
LOT 67
NOT A
PART.

SYMBOL LEGEND

- CONCRETE MONUMENT FOUND
- CONCRETE MONUMENT SET, LS 4708
- IRON PIN OR PIPE FOUND
- 5/8" IRON ROD SET, LS 4708
- x- WIRE FENCE
- E- ELECTRIC UTILITY LINE (OVERHEAD)
- UGE- UNDERGROUND ELECTRIC SERVICE
- ctv- CABLE TV LINE (OVERHEAD)
- o- CHAIN LINK FENCE
- ◇- WOODEN FENCE
- CMP CORRUGATED METAL PIPE
- RCP REINFORCED CONCRETE PIPE
- LS LAND SURVEYOR
- LB LICENSED BUSINESS
- ORB OFFICIAL RECORD BOOK
- PRM PERMANENT REFERENCE MONUMENT
- PCP PERMANENT CONTROL POINT
- ⊙ UTILITY POLE
- R/W RIGHT-OF-WAY
- NO ID. NO IDENTIFICATION
- FLA. D.O.T. FLA. DEPT. OF TRANSPORTATION
- ⊕ CENTERLINE
- C.M. CONCRETE MONUMENT
- I.R. IRON ROD
- I.P. IRON PIPE

MARK D. DUREN, P.S.M.
LS 4708

RT. 18 BOX 555
SISTERS WELCOME ROAD
LAKE CITY, FLA. 32025
(386) 758-9831 OFFICE
(386) 758-8010 FAX

FIELD SURVEY DATE JUNE 15, 2003
DATE DRAWN JUNE 16, 2003
FOR SKIP CLEMONS

FIELD BOOK 125 PAGE 54
DRAWN BY BRANDON STUBBS

WO# 03-367

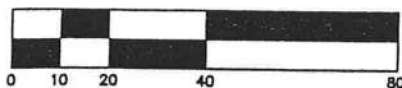
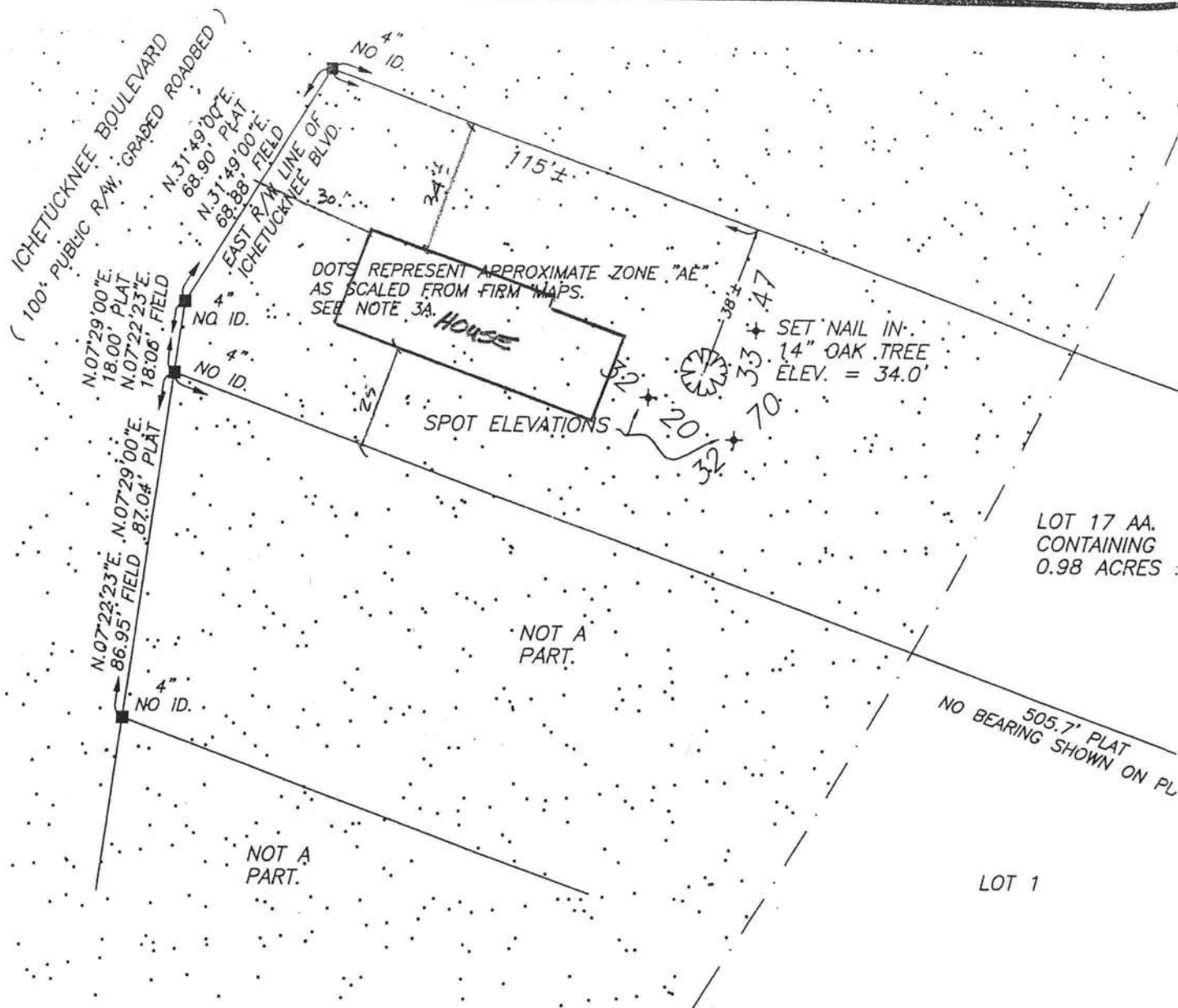
ND IN ACCORDANCE WITH THE
R SAID PLAT OF RECORD.
VG MONUMENTS FOUND

ZONE "AE" AND HAS A BASE

ZONE "X" AND IS DETERMINED
OF 100 YEAR FLOOD WITH
R WITH DRAINAGE AREAS LESS
RANCE RATE MAP, DATED

SE IS SHOWN ON THIS LOT

THIS SURVEY DRAWING ARE
SHOWN HEREON.
HMENTS AND/OR UTILITIES
IS SHOWN HEREON.
HE ORIGINAL RAISED SEAL
PPER."



GRAPHIC SCALE
SCALE 1" = 40'



SIGNED:

MARK D. DUREN, LS 4708

SURVEYOR'S NOTES:

1. BOUNDARY BASED ON MONUMENTATION RETRACEMENT OF THE ORIGINAL SURVEY
2. BEARINGS BASED ON PLAT OF RECORD ON THE WEST LINE OF SAID PARCEL.
- 3A. SOME PORTIONS OF THIS PARCEL ARE FLOOD ELEVATION OF 34 FEET.
- 3B. SOME PORTIONS OF THIS PARCEL ARE TO BE AREAS OF 500 YEAR FLOOD; AT AVERAGE DEPTHS OF LESS THAN 1 FOOT FOR THAN 1 SQUARE MILE AS PER FLOOD 1 6 JANUARY 1988, 120070 0225 B.
4. NO EASEMENT FOR UTILITY AND/OR DR. ON SAID PLAT OF RECORD.
5. THE IMPROVEMENTS, IF ANY, INDICATED AS LOCATED ON DATE OF FIELD SURVEY
6. IF THEY EXIST, NO UNDERGROUND ENCL. WERE LOCATED FOR THIS SURVEY EXCE
7. NOT VALID WITHOUT THE SIGNATURE AN OF A FLORIDA LICENSED SURVEYOR ANI
8. CLOSURE OF FIELD SURVEY IS 1/41,53
9. CERTIFIED TO:

SKIP CLEMONS

One Foot Rise Analysis and Certification, 100 Year Base Flood

NEW CLEMON'S RESIDENCE, Lot 17AA, Three Rivers Estates, Section 11, Columbia County, FL

- **PROPERTY DESCRIPTION:** Lot 17AA, Three Rivers Estates, Section 11, as recorded in plat book 3, page 54 of the public records of Columbia County, Florida.
- **OWNER:** L.L. Clemons
- **CONTRACTOR:** L.L. Clemons
- **PROJECT:** 25' x 50' with 20' x 22' garage wood frame home on concrete block with stem wall and 4" concrete floor
- **BASE FLOOD ELEVATION:** 34', Mile 7, Ichetucknee River (Per Mark D. Duren, Land Surveyor, FL #4708, Dwg. No. 03-367, dated 15Jun2003, Based on FEMA Flood Insurance Rate Map, Dated -, Community Panel No. 120070 0225B.)
- **FLOOD ZONE:** AE
- **BASIN AREA AT BASE FLOOD ELEVATION:** 647 Acres (Calculated from SRWMD flood plain data, per Mark D. Duren, Land Surveyor, FL #4708.)
- **PROPOSED BUILDING VOLUME BELOW FLOODPLAIN:** House: 25' x 50' = 1250 S.F., Garage: 20' x 22' = 440 S.F.; TOTAL = 1690 S.F.. Volume (1690)(34-32.20) = 3042 cu. ft.
- **EXISTING GRADE ELEVATION AT BUILDING LOCATION:** Elevation = 32.20, at garage area, per survey (Per Mark D. Duren, Land Surveyor, FL #4708, Dwg. No. 03-367, dated 15Jun2003). Attached survey drawing with house location.
- **CALCULATIONS:** The project only requires volume calculations in this area since it is not a flowing or riverine area.

Floodplain volume removed = 3042 cu. ft.

Floodplain level increase = $3042 \text{ ft}^3 / 43560 \text{ ft}^2/\text{acre} / 647 \text{ acres} = 0.00010 \text{ ft}$.

CERTIFICATION:

I hereby certify that construction of NEW CLEMON'S RESIDENCE, lot 17AA, Three Rivers Estates, Section 11, Columbia County, FL will increase flood elevations less than one foot at the project location, to the best of my knowledge.

9/23/03
Ralph E. Eng

Ralph E. Eng, P.E.
Florida Registered P.E. No. 11630

Building Permit Application

Date 9-17-03

21132

9/22/03

Application No. 0309-57

352-665-6444
Phone 352-332-1807

Applicants Name & Address L.H. Clemons
1911 N.W. 97th St. Gainesville FL 32606

Owners Name & Address L.H. Clemons
1911 N.W. 97th St. Gainesville, FL 32606 Phone 352-332-1807

Fee Simple Owners Name & Address L.H. Clemons
1911 N.W. 97th St. Gainesville FL 32606 Phone 352-332-1807

Contractors Name & Address L.H. Clemons Phone _____

Legal Description of Property Lot 17AA Three Rivers Estates Sec. 11 as per Plat Bk 3 P. 54 of
Public Records Columbia County FL. Sec. 23 Twn 6S Range 15 E.

Location of Property Three Rivers Estates Sec. 11

Tax Parcel Identification No. 00-00-00.00852-000 Estimated Cost of Construction \$ 100,000.00

Type of Development Single Fam. Number of Existing Dwellings on Property 0

Comprehensive Plan Map Category ESA Zoning Map Category ESA-2

Building Height 21' Number of Stories 2 Floor Area 2100 Total Acreage in Development _____

Distance From Property Lines (Set Backs) Front 30' Side 25' Rear N/A Street 30'

Flood Zone AE Certification Date _____ Development Permit YES

Bonding Company Name & Address N/A

Architect/Engineer Name & Address Marty Eskridge

Mortgage Lenders Name & Address N/A

Application is hereby made to obtain a permit to do the 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 will be performed to meet the standards of all laws regulating construction in this jurisdiction.

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

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

[Signature]
Owner or Agent (including contractor)

Contractor

Contractor License Number

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
his _____ day of _____ by _____

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this _____ day of _____ by _____

Personally Known _____ OR Produced Identification

Personally Known _____ OR Produced Identification

HFD/lss
978.02-03-210
7/8/03

REC. 15.00
DOC. 105.00
INT. _____

✓ This instrument prepared by
Herbert F. Darby
Darby, Peele, Bowdoin & Payne
Attorneys at Law
Post Office Drawer 1707
Lake City, Florida 32056-1707

Inst:2003014683 Date:07/15/2003 Time:08:27
Doc Stamp-Deed : 105.00

mk DC, P. DeWitt Cason, Columbia County B:988 P:1653

WARRANTY DEED

THIS WARRANTY DEED made this 11th day of July, 2003, by CLINTON F. DICKS, JR., and NORMA JEAN DICKS, his wife, whose mailing address is Route 3, Box 138-E, Lake City, Florida 32025, hereinafter called the Grantor, to L. L. CLEMONS, whose post office address is 1911 Northwest 97th Street, Gainesville, Florida 32606, hereinafter called the Grantee:

WITNESSETH:

That the Grantor, for and in consideration of the sum of TEN AND NO/100 (\$10.00) DOLLARS and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the Grantee, all that certain land situate in Columbia County, Florida, viz:

Lot 17AA, Section II of 3 Rivers Estates, Inc., a Subdivision as recorded in Plat Book 3, Page 54, Columbia County, Florida.

SUBJECT TO: Restrictions in Official Records Book 129, Page 90 and Official Records Book 733, Page 144, public records of Columbia County, Florida.

SUBJECT TO: Mineral Conveyance in Warranty Deed in Official Records Book 2204, Page 113, public records of Columbia County, Florida.

Parcel Number: 00-00-00-00852-000

Inst: 2003014683 Date: 07/15/2003 Time: 08:27

Loc Stamp-Deed : 105.00

MCK DC, P. DeWitt Cason, Columbia County B:988 P:1654

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

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

AND the Grantor hereby covenants with said Grantee that the Grantor is lawfully seized of said land in fee simple; that the Grantor has good right and lawful authority to sell and convey said land; that the Grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2002.

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

Signed, sealed and delivered
in the presence of:

Sabrina L. Fullbright
Witness

Sabrina L. Fullbright
(Print/type name)

Loretta S. Steinmann
Witness

Loretta S. Steinmann

(Print/type name)

Clinton F. Dicks, Jr. (SEAL)
CLINTON F. DICKS, JR.

Norma Jean Dicks (SEAL)
NORMA JEAN DICKS

nst:2003014683 Date:07/15/2003 Time:08:27

oc Stamp-Deed : 105.00

7KK DC, P. DeWitt Cason, Columbia County B:988 P:1655

STATE OF FLORIDA

COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 11th day of July, 2003, by CLINTON F. DICKS, JR., and NORMA JEAN DICKS, his wife, who are personally known to me.

(NOTARIAL
SEAL)



Loretta S. Steinmann
Notary Public, State of Florida
Loretta S. Steinmann
(Print/type name)

My Commission Expires:

Permit No. _____

Tax Parcel No. 00-00-00-00 852-000

COLUMBIA COUNTY NOTICE OF COMMENCEMENT

STATE OF FLORIDA

COUNTY OF COLUMBIA

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. Description of property: (legal description of the property, and street address if available.)

Lot 17AA "Three Rivers Estates Section 11"
Plat Book 3 Page 54
SEC. 23 Twp 6 South Range 15 East

2. General description of improvement: Single Family Home

3. Owner Information:

A. Name and address:

L. H. Clemons
1911 N.W. 97th St Gainesville FL 32606

B. Interest in property:

C. Name and address of fee simple titleholder (if other than owner):

4. Contractor: (name and address)

L. H. Clemons
1911 N.W. 97th St. Gainesville FL 32606

5. Surety

A. Name and address: _____

B. Amount of bond: _____

6. Lender: (name and address) _____

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 718.13 (1) (a) 7., Florida Statutes: (name and address) _____

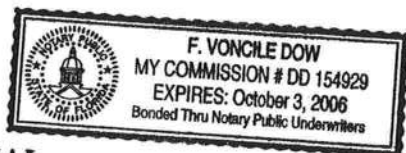
1st: 2003020192 Date: 09/17/2003 Time: 14:19
DC, P. Dewitt Cason, Columbia County B: 994 P: 2947

8. In addition to himself, owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (a) 7., Florida Statutes.


9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified) _____.


(Signature of Owner)

SWORN TO and subscribed before me this 17 day of Sept 2003
19.



(NOTARIAL
SEAL)


Notary Public

My Commission Expires:

1st:2003020192 Date:09/17/2003 Time:14:19
6 DC,P.Dewitt Cason,Columbia County B:994 P:2948

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: September 22, 2003

ENHANCED 9-1-1 ADDRESS:

511 SW RIVERSIDE AVE (FORT WHITE, FL 32038)

Addressed Location 911 Phone Number: NOT AVAIL.

OCCUPANT NAME: NOT AVAIL.

OCCUPANT CURRENT MAILING ADDRESS: _____

PROPERTY APPRAISER MAP SHEET NUMBER: 14C

PROPERTY APPRAISER PARCEL NUMBER: 23-6S-15-00852-000

Other Contact Phone Number (If any): _____

Building Permit Number (If known): _____

Remarks: LOT 17AA UNIT 2 THREE RIVERS ESTES

Address Issued By: _____

Ron Croft
Columbia County 9-1-1 Addressing Department

COLUMBIA COUNTY
9-1-1 ADDRESSING
APPROVED

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan

Permit Application Number: 03-0825-N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

CLEMONS/CR 03-1338



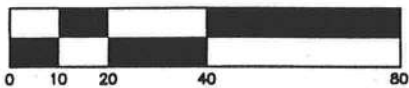
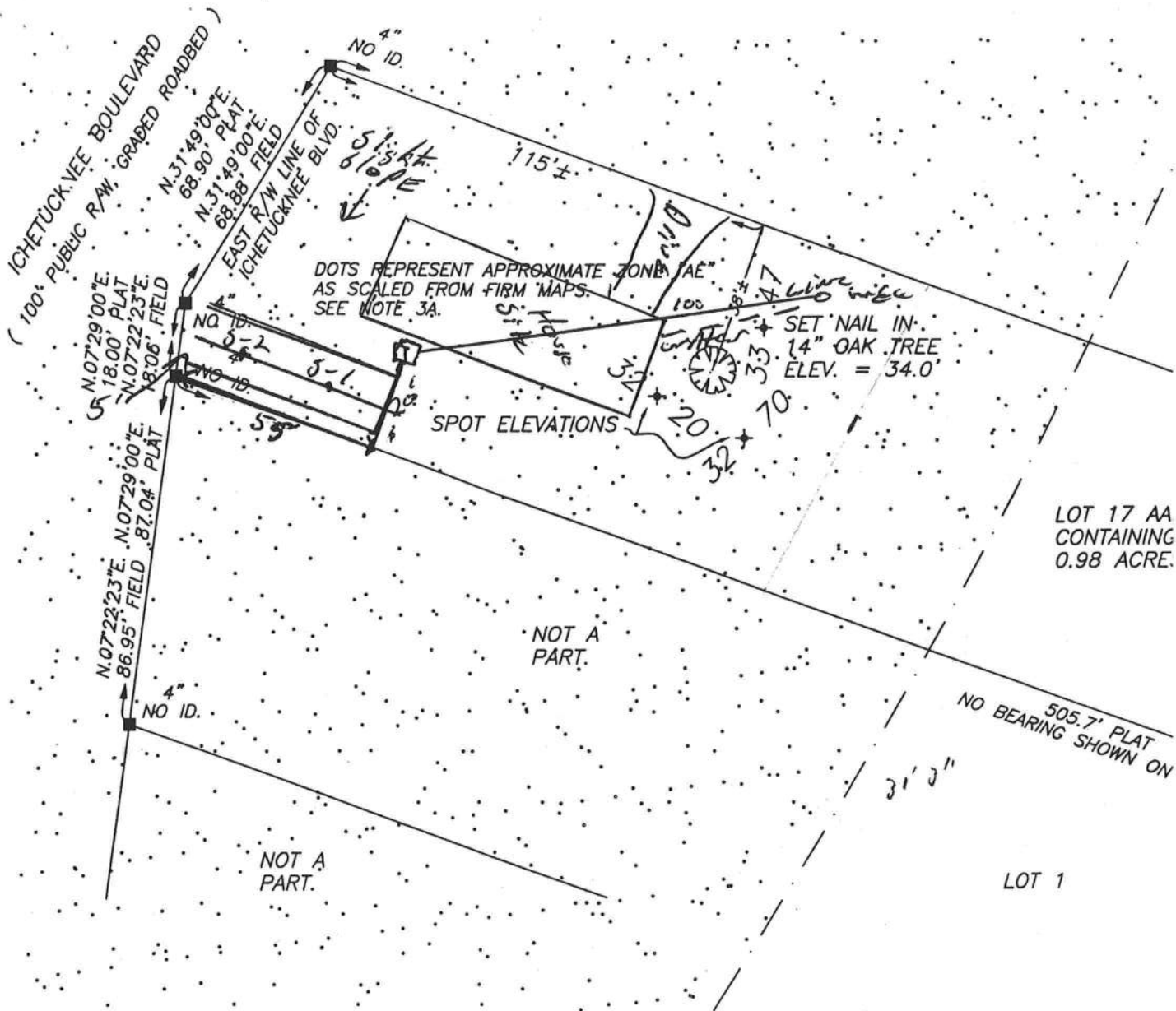
SEE ATTACHED

1 inch = 50 feet

Site Plan Submitted By Paul Lloyd Date 9/11/03
Plan Approved Paul Lloyd Not Approved DATE 9/11/03

By Paul Lloyd SHARITA GRAMM CPHU
ESL. CUMMINGS

Notes: _____



GRAPHIC SCALE
SCALE 1" = 40'



SURVEYOR'S NOTES:

1. BOUNDARY BASED ON MONUMENTAL RETRACEMENT OF THE ORIGINAL SURVEY.
2. BEARINGS BASED ON PLAT OF RECORD ON THE WEST LINE OF SAID PARCELS.
- 3A. SOME PORTIONS OF THIS PARCEL ARE IN A 500 YEAR FLOOD ELEVATION OF 34 FEET.
- 3B. SOME PORTIONS OF THIS PARCEL ARE IN AREAS OF 500 YEAR FLOOD AVERAGE DEPTHS OF LESS THAN 1 FOOT.
4. NO EASEMENT FOR UTILITY AND/OR SERVICE ON SAID PLAT OF RECORD.
5. THE IMPROVEMENTS, IF ANY, INDICATED AS LOCATED ON DATE OF FIELD SURVEY.
6. IF THEY EXIST, NO UNDERGROUND UTILITIES WERE LOCATED FOR THIS SURVEY.
7. "NOT VALID WITHOUT THE SIGNATURE OF A FLORIDA LICENSED SURVEYOR."
8. CLOSURE OF FIELD SURVEY IS 1/4 INCH.
9. CERTIFIED TO:

SKIP CLEMONS

SIGNED: 
MARK D. DUREN, LS 4708

0309-57



APPROXIMATE SCALE IN FEET
2000 0 2000

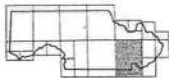
NATIONAL FLOOD INSURANCE PROGRAM

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

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. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/mit/fisd.

Print Date: 10/3/03 (printed at scale and type A)



DISCLOSURE STATEMENT

FOR OWNER/BUILDER WHEN ACTING AS THEIR OWN CONTRACTOR AND CLAIMING EXEMPTION OF CONTRACTOR LICENSING REQUIREMENTS IN ACCORDANCE WITH FLORIDA STATUTES, ss. 489.103(7).

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

TYPE OF CONSTRUCTION

☒ Single Family Dwelling
☐ Farm Outbuilding

☐ Two-Family Residence
☐ Other _____

NEW CONSTRUCTION OR IMPROVEMENT

☒ New Construction ☐ Addition, Alteration, Modification or other Improvement

I L.H. Clemons, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes ss.489.103(7) allowing this exception for the construction permitted by Columbia County Building Permit Number _____


Signature

9/22/03
Date

FOR BUILDING USE ONLY

I hereby certify that the above listed owner/builder has been notified of the disclosure statement in Florida Statutes ss 489.103(7).

Date 10-3-03 Building Official/Representative Harry Dicko



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS

CENTRAX # : 12-SC-04877
DATE PAID : 9-12-03
FEE PAID : \$ 140.00
RECEIPT : 5030912002
OSTDSNBR : 03-0825-N

03-0825N

APPLICATION FOR:

[☒] New System [☐] Existing System [☐] Holding Tank [☐] Innovative
[☐] Repair [☐] Abandonment [☐] Temporary [☒] NA

APPLICANT: Clemons, L.L. (Skip) TELEPHONE: 352 665-6444

AGENT: LLOYD, Paul Lloyd,

MAILING ADDRESS: 1911 NW 97th St., G'ville

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 64E-6, FLORIDA ADMINISTRATIVE CODE.

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

LOT: 17AA BLOCK: 01A SUBDIVISION: Three River Estates PLATTED: 4/29/58

PROPERTY ID #: 00-00-00-00852-000 ZONING: _____ I/M OR EQUIVALENT: [Y] ☒ [N]

PROPERTY SIZE: 1.00 ACRES [Sqft/43560] PROPERTY WATER SUPPLY: [☒] PRIVATE [☐] PUBLIC

IS SEWER AVAILABLE AS PER 381.0065, FLORIDA STATUTES? [Y] ☒ [N] DISTANCE TO SEWER: _____ FT
N/A

PROPERTY STREET ADDRESS: Riverside, Fort White

DIRECTIONS TO PROPERTY:

State Road 47 South, TR on State Road 27, TL on Riverside (Formerly Ichetucknee) First lot on left past Nebraska.

BUILDING INFORMATION

[☒] RESIDENTIAL [☐] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	# Persons Served	Business Activity For Commercial Only
<u>1</u>	<u>4 Bdrm Single/Multi Fa</u>	<u>4</u>	<u>2100</u>	<u>4</u>	

[☐] Floor/Equipment Drains [☐] Other (Specify) _____

APPLICANT'S SIGNATURE:

X See Attached
DH 4015, 03/97 (Obsoletes previous editions which may not be used)
(Stock Number: 5744-001-4015-1)

[ostds_appl_4015-1]

DATE: 9/12/03



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

CENTRAX #: 12-SC-04877
DATE PAID: 9-12-03
FEE PAID: \$ 140.00
RECEIPT: S030912002
OSTDSNBR: 03-0825-N

03-0825-N

CONSTRUCTION PERMIT FOR:

[X] New System [] Existing System [] Holding Tank [] Innovative Other
[] Repair [] Abandonment [] Temporary [NA]

APPLICANT: Clemons, L.L. (Skip) AGENT: LLOYD, Lloyd Paul

PROPERTY STREET ADDRESS: Riverside Fort White FL 32038

LOT: 17AA BLOCK: C/A SUBDIVISION: Three River Estates

[Section/Township/Range/Parcel No.]

PROPERTY ID #: 00-00-00-00852-000

[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF CHAPTER 64E-6, FAC
DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC TIME
PERIOD. ANY CHANGE IN MATERIAL FACTS WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT,
REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS
PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM
COMPLIANCE WITH OTHER FEDERAL, STATE OR LOCAL PERMITTING REQUIRED FOR PROPERTY DEVELOPMENT.

SYSTEM DESIGN AND SPECIFICATIONS

T [1050] Gallons SEPTIC TANK MULTI-CHAMBERED/IN SERIES: [Y]
A [0] Gallons MULTI-CHAMBERED/IN SERIES: [Y]
N [0] GALLONS GREASE INTERCEPTOR CAPACITY
K [0] GALLONS DOSING TANK CAPACITY [0] GALLONS @ [0] DOSES PER 24 HRS # PUMPS [0]

D [444] SQUARE FEET PRIMARY DRAINFIELD SYSTEM

R [0] SQUARE FEET SYSTEM

A TYPE SYSTEM: [Y] STANDARD [N] FILLED [N] MOUND [N]
I CONFIGURATION: [Y] TRENCH [N] BED [N]

N

F LOCATION TO BENCHMARK: 14" Oak Tree North of System Site (34.0msl)

I ELEVATION OF PROPOSED SYSTEM SITE [32.0] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE \leq [48.0] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT

L [47.0 MSL]

D FILL REQUIRED: [5-6.0] INCHES EXCAVATION REQUIRED: [0.0] INCHES

OTHER REMARKS:

The licensed contractor installing the system is responsible for installing the minimum
category of tank in accordance with s. 64E-6.013(3)(f), FAC.

Drainfield to be no deeper than 30.0 MSL!

SPECIFICATIONS BY: Lloyd, Paul

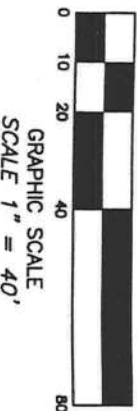
TITLE:

APPROVED BY: Graddy, Sallie

TITLE: EH Specialist I Columbia CHD

DATE ISSUED: 9/12/03

EXPIRATION DATE: 3/12/05



- SURVEYOR'S NOTES:
1. BOUNDARY BASED ON MONUMENTATION FOUND IN ACCORDANCE WITH THE RETRACEMENT OF THE ORIGINAL SURVEY FOR SAID PLAT OF RECORD.
 2. BEARINGS BASED ON PLAT OF RECORD USING MONUMENTS FOUND ON THE WEST LINE OF SAID PARCEL.
 - 3A. SOME PORTIONS OF THIS PARCEL ARE IN ZONE "AE" AND HAS A BASE FLOOD ELEVATION OF 34 FEET.
 - 3B. SOME PORTIONS OF THIS PARCEL ARE IN ZONE "X" AND IS DETERMINED TO BE AREAS OF 500 YEAR FLOOD; AREAS OF 100 YEAR FLOOD WITH AVERAGE DEPTHS OF LESS THAN 1 FOOT OR WITH DRAINAGE AREAS LESS THAN 1 SQUARE MILE AS PER FLOOD INSURANCE RATE MAP, DATED 6 JANUARY 1988, 120070 0225 B
 4. NO EASEMENT FOR UTILITY AND/OR DRAINAGE IS SHOWN ON THIS LOT ON SAID PLAT OF RECORD.
 5. THE IMPROVEMENTS, IF ANY, INDICATED ON THIS SURVEY DRAWING ARE AS LOCATED ON DATE OF FIELD SURVEY AS SHOWN HEREON.
 6. IF THEY EXIST, NO UNDERGROUND ENCROACHMENTS AND/OR UTILITIES WERE LOCATED FOR THIS SURVEY EXCEPT AS SHOWN HEREON.

- SYMBOL LEGEND
- CONCRETE MONUMENT FOUND
 - CONCRETE MONUMENT SET, LS 4708
 - IRON PIN OR PIPE FOUND
 - 5/8" IRON ROD SET, LS 4708
 - X- WIRE FENCE
 - E- ELECTRIC UTILITY LINE (OVERHEAD)
 - UG- UNDERGROUND ELECTRIC SERVICE
 - CV- CABLE TV LINE (OVERHEAD)
 - CHAIN LINK FENCE
 - WOODEN FENCE
 - CMP CORRUGATED METAL PIPE
 - RCP REINFORCED CONCRETE PIPE
 - LS LAND SURVEYOR
 - LB LICENSED BUSINESS
 - ORB OFFICIAL RECORD BOOK

NOT A PART.

LOT 1

NOT A PART.

NOT A PART.

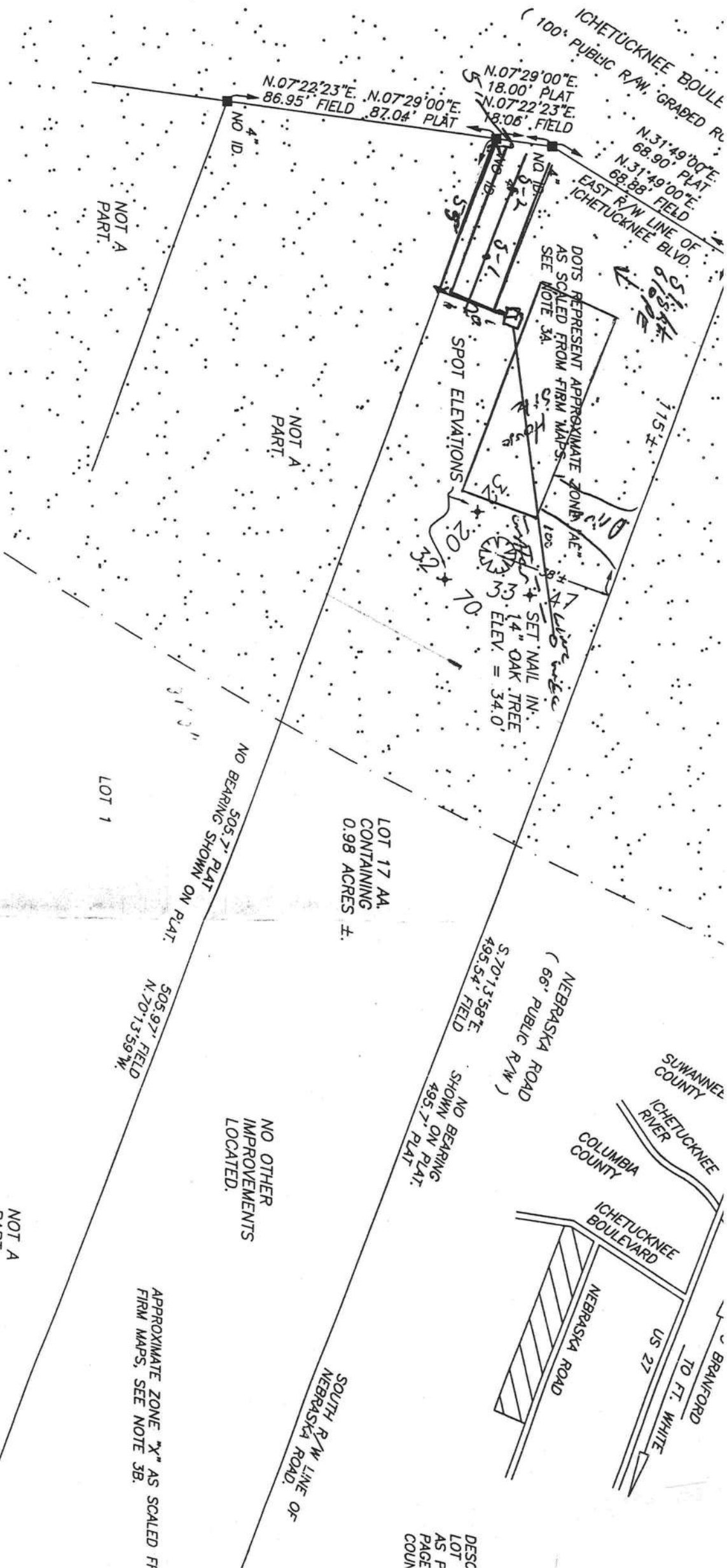
LOT 17 A,
CONTAINING
0.98 ACRES ±.

APPROXIMATE ZONE "X" AS SCALED FROM
FIRM MAPS, SEE NOTE 3B.

NO OTHER
IMPROVEMENTS
LOCATED.

SOUTH R/W LINE OF
NEBRASKA ROAD.

DESC
LOT
AS F
PAGE
COUN



COLUMBIA COUNTY BUILDING DEPARTMENT

RESIDENTIAL MINIMUM PLAN REQUIREMENTS AND CHECKLIST FOR FLORIDA BUILDING CODE 2001

ONE (1) AND TWO (2) FAMILY DWELLINGS

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

EFFECTIVE MARCH 1, 2002

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

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

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

APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL

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

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

- ☒ ☐
- ☒ ☐
- ☒ ☐

Floor Plan including:

- ☐ ☐
- ☒ ☐
- ☐ ☐

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

- ☒ ☐
- ☒ ☐
- ☒ ☐
- ☒ ☐

Foundation Plan including:

- a) Location of all load-bearing wall with required footings indicated as standard Or monolithic and dimensions and reinforcing
- b) All posts and/or column footing including size and reinforcing
- c) Any special support required by soil analysis such as piling
- d) Location of any vertical steel

- ☒ ☐

Roof System:

- ☒ ☐

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

- ☐ ☐

Wall Sections including:

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

b) Wood frame wall

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

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

Floor Framing System:

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

Plumbing Fixture layout

Electrical layout including:

- a) Switches, outlets/receptacles, lighting and all required GFCI outlets identified
- b) Ceiling fans
- c) Smoke detectors
- d) Service panel and sub-panel size and location(s)
- e) Meter location with type of service entrance (overhead or underground)
- f) Appliances and HVAC equipment
- g) Arc Fault Circuits (AFCI) in bedrooms

HVAC information

- a) Manual J sizing equipment or equivalent computation
- b) Exhaust fans in bathroom

Energy Calculations (dimensions shall match plans)

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

Disclosure Statement for Owner Builders

Notice Of Commencement

Private Potable Water

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

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

1. **Building Permit Application:** A current Building Permit Application form is to be completed and submitted for all residential projects.
2. **Parcel Number:** The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested.
3. **Environmental Health Permit or Sewer Tap Approval:** A copy of the Environmental Health permit, existing septic approval or sewer tap approval is required before a building permit can be issued. (386) 758-1058 (Toilet facilities shall be provided for construction workers)
4. **City Approval:** If the project is to be located within the city limits of the Town of Fort White, prior approval is required. The Town of Fort White approval letter is required to be submitted by the owner or contractor to this office when applying for a Building Permit.
5. **Flood Information:** All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.8 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.7 of the Columbia County Land Development Regulations. **CERTIFIED FINISHED FLOOR ELEVATIONS WILL BE REQUIRED ON ANY PROJECT WHERE THE BASE FLOOD ELEVATION (100 YEAR FLOOD) HAS BEEN ESTABLISHED.**
A development permit will also be required. Development permit cost is \$10.00
6. **Driveway Connection:** If the property does not have an existing access to a public road, then an application for a culvert permit (\$5.00) must be made. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$25.00). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.
7. **911 Address:** If the project is located in an area where the 911 address has been issued, then the proper paperwork from the 911 Addressing Department must be submitted. (386) 758-8787

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

Letter from
Eng.
I will letter

DRILL
House acat
Miss Floor Joist
Measure them

CLYATT WELL DRILLING, INC.

Established in 1971

Post Office Box 180

Worthington Springs, Florida 32697

Phone (386)496-2488 FAX (386)496-4640

9/18/2003

CUSTOMER NAME AND ADDRESS	DESCRIPTION OF WORK
L.L. Clemmons 1911 Northwest 97th Street Gainesville, Florida 32606	Lot 17-AA, Three Rivers Estate Columbia County

QTY	DESCRIPTION	PRICE	SUB-TOTAL
	4" Well 1-1/2 HP Submersible Pump 1-1/4" Galvanized Drop Pipe 14/3 Submersible Pump Wire With Ground WF255 (220 Gallon Equivalent) Tank 4 X 1-1/4 Well Seal Pressure Relief Valve Controls & Fittings		

THANK YOU FOR YOUR BUSINESS! Payment is due when work is completed. All materials remain the property of Clyatt Well Drilling, Inc., until paid for in full. Clyatt Well Drilling, Inc., does not agree to find or develop water, nor does it represent warrant or guarantee the quality or kind of water which may be encountered. If it is necessary to install water filters, the owner agrees it is his/her responsibility to pay the cost. Please note that a surcharge equivalent to 18% per annum, will be assessed on any outstanding balance after 30 Days. Right to repossess is granted.

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name: **Clemons-River House**
Address:
City, State: **, 00000-000**
Owner: **Clemons, Skip**
Climate Zone: **North**

Builder:
Permitting Office: **Columbia**
Permit Number:
Jurisdiction Number:

1. New construction or existing New ☐
2. Single family or multi-family Single family ☐
3. Number of units, if multi-family 1 ☐
4. Number of Bedrooms 4 ☐
5. Is this a worst case? Yes ☐
6. Conditioned floor area (ft²) 2100 ft² ☐
7. Glass area & type ☐
 - a. Clear - single pane 0.0 ft² ☐
 - b. Clear - double pane 0.0 ft² ☐
 - c. Tint/other SHGC - single pane 0.0 ft² ☐
 - d. Tint/other SHGC - double pane 344.0 ft² ☐
8. Floor types ☐
 - a. Slab-On-Grade Edge Insulation R=0.0, 149.2(p) ft ☐
 - b. N/A ☐
 - c. N/A ☐
9. Wall types ☐
 - a. Frame, Wood, Exterior R=19.0, 2502.0 ft² ☐
 - b. Frame, Wood, Adjacent R=19.0, 176.0 ft² ☐
 - c. N/A ☐
 - d. N/A ☐
 - e. N/A ☐
10. Ceiling types ☐
 - a. Under Attic R=30.0, 1140.0 ft² ☐
 - b. Under Attic R=19.0, 363.5 ft² ☐
 - c. N/A ☐
11. Ducts ☐
 - a. Sup: Unc. Ret: Unc. AH: Interior Sup. R=6.0, 98.0 ft ☐
 - b. Sup: Con. Ret: Con. AH: Interior Sup. R=6.0, 78.0 ft ☐

12. Cooling systems ☐
 - a. Central Unit Cap: 24.0 kBtu/hr ☐
SEER: 10.00 ☐
 - b. Central Unit Cap: 24.0 kBtu/hr ☐
SEER: 10.00 ☐
 - c. N/A ☐
13. Heating systems ☐
 - a. Natural Gas Cap: 50.0 kBtu/hr ☐
AFUE: 0.92 ☐
 - b. Natural Gas Cap: 50.0 kBtu/hr ☐
AFUE: 0.92 ☐
 - c. N/A ☐
14. Hot water systems ☐
 - a. Natural Gas Cap: 50.0 gallons ☐
EF: 0.56 ☐
 - b. N/A ☐
 - c. Conservation credits ☐
(HR-Heat recovery, Solar
DHP-Dedicated heat pump)
15. HVAC credits MZ-C, PT, CF, MZ- ☐
(CF-Ceiling fan, CV-Cross ventilation,
HF-Whole house fan,
PT-Programmable Thermostat,
MZ-C-Multizone cooling,
MZ-H-Multizone heating)

Glass/Floor Area: 0.16

Total as-built points: 21626

Total base points: 34943

PASS

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

PREPARED BY: Aaron Davenport

DATE: 9.13.03

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

OWNER/AGENT: _____

DATE: _____

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



BUILDING OFFICIAL: _____

DATE: _____

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , , 00000-000

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES .18 X Conditioned X BSPM = Points Floor Area				Overhang Type/SC Ornt Len Hgt Area X SPM X SOF = Points							
.18	2100.0	20.04	7575.1	Double,U=0.34,SHGC=0.37	N	1.3	6.5	29.0	10.99	0.96	306.4
				Double,U=0.34,SHGC=0.37	S	7.0	7.0	25.0	20.21	0.52	263.0
				Double,U=0.34,SHGC=0.37	S	7.0	8.0	50.0	20.21	0.54	544.0
				Double,U=0.34,SHGC=0.37	S	7.0	8.0	10.0	20.21	0.54	108.8
				Double,U=0.34,SHGC=0.37	E	1.3	2.5	20.0	23.66	0.71	337.3
				Double,U=0.34,SHGC=0.37	E	1.3	4.0	24.0	23.66	0.85	485.3
				Double,U=0.34,SHGC=0.37	E	1.3	6.0	7.0	23.66	0.94	155.1
				Double,U=0.34,SHGC=0.37	E	1.3	16.5	18.0	23.66	1.00	424.1
				Double,U=0.34,SHGC=0.37	E	1.3	15.0	18.0	23.66	1.00	423.9
				Double,U=0.34,SHGC=0.37	E	8.5	8.0	10.0	23.66	0.50	118.8
				Double,U=0.34,SHGC=0.37	E	8.5	6.0	12.5	23.66	0.44	131.0
				Double,U=0.34,SHGC=0.37	W	1.3	4.5	24.0	21.70	0.88	460.6
				Double,U=0.34,SHGC=0.37	W	1.3	7.0	16.0	21.70	0.96	333.2
				Double,U=0.34,SHGC=0.37	W	1.3	2.5	20.0	21.70	0.72	311.5
				Double,U=0.34,SHGC=0.37	W	1.3	12.0	19.5	21.70	0.99	421.1
				Double,U=0.34,SHGC=0.37	W	1.3	15.5	18.0	21.70	1.00	389.2
				Double,U=0.34,SHGC=0.37	W	1.3	17.0	7.0	21.70	1.00	151.4
				Double,U=0.34,SHGC=0.37	W	1.3	8.3	16.0	21.70	0.98	338.9
				As-Built Total: 344.0 5703.5							
WALL TYPES Area X BSPM = Points				Type R-Value Area X SPM = Points							
Adjacent	176.0	0.70	123.2	Frame, Wood, Exterior			19.0	2502.0	0.90		2251.8
Exterior	2502.0	1.70	4253.4	Frame, Wood, Adjacent			19.0	176.0	0.40		70.4
Base Total:	2678.0		4376.6	As-Built Total: 2678.0 2322.2							
DOOR TYPES Area X BSPM = Points				Type Area X SPM = Points							
Adjacent	18.0	2.40	43.2	Exterior Insulated				32.0	4.10		131.2
Exterior	32.0	6.10	195.2	Adjacent Insulated				18.0	1.60		28.8
Base Total:	50.0		238.4	As-Built Total: 50.0 160.0							
CEILING TYPES Area X BSPM = Points				Type R-Value Area X SPM X SCM = Points							
Under Attic	1140.0	1.73	1972.2	Under Attic			30.0	1140.0	1.73 X 1.00		1972.2
				Under Attic			19.0	363.5	2.34 X 1.00		850.6
Base Total:	1140.0		1972.2	As-Built Total: 1503.5 2822.8							

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , , 00000-000

PERMIT #:

BASE				AS-BUILT			
FLOOR TYPES Area X BSPM = Points				Type	R-Value	Area X SPM = Points	
Slab	149.2(p)	-37.0	-5520.4	Slab-On-Grade Edge Insulation	0.0	149.2(p)	-6147.0
Raised	0.0	0.00	0.0				
Base Total:			-5520.4	As-Built Total:		149.2	-6147.0
INFILTRATION Area X BSPM = Points				Area X SPM = Points			
	2100.0	10.21	21441.0			2100.0	21441.0
Summer Base Points:			30082.9	Summer As-Built Points:			26302.4
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)	
				26302.4	0.500	(1.090 x 1.147 x 0.91)	0.341 0.857 4218.1
				26302.4	0.500	(1.000 x 1.147 x 0.91)	0.341 0.857 4218.1
30082.9	0.4266		12833.4	26302.4	1.00	1.096	0.341 0.857 8436.1

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , , 00000-000

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES .18 X Conditioned X BWPM = Points Floor Area				Overhang Type/SC Ornt Len Hgt Area X WPM X WOF = Points							
.18	2100.0	12.74	4815.7	Double,U=0.34,SHGC=0.37	N	1.3	6.5	29.0	10.59	1.00	307.4
				Double,U=0.34,SHGC=0.37	S	7.0	7.0	25.0	4.30	2.73	293.6
				Double,U=0.34,SHGC=0.37	S	7.0	8.0	50.0	4.30	2.53	543.5
				Double,U=0.34,SHGC=0.37	S	7.0	8.0	10.0	4.30	2.53	108.7
				Double,U=0.34,SHGC=0.37	E	1.3	2.5	20.0	7.43	1.13	167.5
				Double,U=0.34,SHGC=0.37	E	1.3	4.0	24.0	7.43	1.06	188.6
				Double,U=0.34,SHGC=0.37	E	1.3	6.0	7.0	7.43	1.03	53.4
				Double,U=0.34,SHGC=0.37	E	1.3	16.5	18.0	7.43	1.00	134.3
				Double,U=0.34,SHGC=0.37	E	1.3	15.0	18.0	7.43	1.01	134.4
				Double,U=0.34,SHGC=0.37	E	8.5	8.0	10.0	7.43	1.30	96.8
				Double,U=0.34,SHGC=0.37	E	8.5	6.0	12.5	7.43	1.38	127.7
				Double,U=0.34,SHGC=0.37	W	1.3	4.5	24.0	8.44	1.03	209.0
				Double,U=0.34,SHGC=0.37	W	1.3	7.0	16.0	8.44	1.01	136.4
				Double,U=0.34,SHGC=0.37	W	1.3	2.5	20.0	8.44	1.09	183.6
				Double,U=0.34,SHGC=0.37	W	1.3	12.0	19.5	8.44	1.00	164.8
				Double,U=0.34,SHGC=0.37	W	1.3	15.5	18.0	8.44	1.00	152.0
				Double,U=0.34,SHGC=0.37	W	1.3	17.0	7.0	8.44	1.00	59.1
				Double,U=0.34,SHGC=0.37	W	1.3	8.3	16.0	8.44	1.01	135.9
				As-Built Total: 344.0 3196.8							
WALL TYPES Area X BWPM = Points				Type R-Value Area X WPM = Points							
Adjacent	176.0	3.60	633.6	Frame, Wood, Exterior			19.0	2502.0	2.20		5504.4
Exterior	2502.0	3.70	9257.4	Frame, Wood, Adjacent			19.0	176.0	2.20		387.2
Base Total: 2678.0 9891.0				As-Built Total: 2678.0 5891.6							
DOOR TYPES Area X BWPM = Points				Type Area X WPM = Points							
Adjacent	18.0	11.50	207.0	Exterior Insulated				32.0	8.40		268.8
Exterior	32.0	12.30	393.6	Adjacent Insulated				18.0	8.00		144.0
Base Total: 50.0 600.6				As-Built Total: 50.0 412.8							
CEILING TYPES Area X BWPM = Points				Type R-Value Area X WPM X WCM = Points							
Under Attic	1140.0	2.05	2337.0	Under Attic			30.0	1140.0	2.05 X 1.00		2337.0
				Under Attic			19.0	363.5	2.70 X 1.00		981.5
Base Total: 1140.0 2337.0				As-Built Total: 1503.5 3318.4							

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , , 00000-000

PERMIT #:

BASE				AS-BUILT									
FLOOR TYPES Area X BWPM = Points				Type	R-Value	Area X WPM	=	Points					
Slab	149.2(p)	8.9	1327.9	Slab-On-Grade Edge Insulation	0.0	149.2(p)	18.80	2805.0					
Raised	0.0	0.00	0.0										
Base Total:			1327.9	As-Built Total:		149.2		2805.0					
INFILTRATION Area X BWPM = Points				Area X WPM = Points									
	2100.0	-0.59	-1239.0			2100.0	-0.59	-1239.0					
Winter Base Points:			17733.2	Winter As-Built Points:					14385.6				
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)									
17733.2	0.6274	11125.8		14385.6	0.500	(1.069 x 1.169 x 0.93)	0.432		0.902		3168.8		
				14385.6	0.500	(1.000 x 1.169 x 0.93)	0.432		0.902		3168.8		
			14385.6	1.00	1.129	0.432	0.902		6337.6				

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: , , , 00000-000

PERMIT #:

BASE				AS-BUILT						
WATER HEATING										
Number of Bedrooms	X	Multiplier	= Total	Tank Volume	EF	Number of Bedrooms	X	Tank X Ratio	Multiplier X Credit	= Total Multiplier
4		2746.00	10984.0	50.0	0.56	4		1.00	1713.11	1.00 6852.4
				As-Built Total:						6852.4

CODE COMPLIANCE STATUS

BASE					AS-BUILT				
Cooling Points	+	Heating Points	+	Hot Water Points = Total Points	Cooling Points	+	Heating Points	+	Hot Water Points = Total Points
12833		11126		10984 34943	8436		6338		6852 21626

PASS

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: , , , 00000-000

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

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

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 88.2

The higher the score, the more efficient the home.

Clemons, Skip, , , , 00000-000

1. New construction or existing	New	12. Cooling systems	
2. Single family or multi-family	Single family	a. Central Unit	Cap: 24.0 kBtu/hr
3. Number of units, if multi-family	1		SEER: 10.00
4. Number of Bedrooms	4	b. Central Unit	Cap: 24.0 kBtu/hr
5. Is this a worst case?	Yes		SEER: 10.00
6. Conditioned floor area (ft ²)	2100 ft ²	c. N/A	
7. Glass area & type		13. Heating systems	
a. Clear - single pane	0.0 ft ²	a. Natural Gas	Cap: 50.0 kBtu/hr
b. Clear - double pane	0.0 ft ²		AFUE: 0.92
c. Tint/other SHGC - single pane	0.0 ft ²	b. Natural Gas	Cap: 50.0 kBtu/hr
d. Tint/other SHGC - double pane	344.0 ft ²		AFUE: 0.92
8. Floor types		c. N/A	
a. Slab-On-Grade Edge Insulation	R=0.0, 149.2(p) ft	14. Hot water systems	
b. N/A		a. Natural Gas	Cap: 50.0 gallons
c. N/A			EF: 0.56
9. Wall types		b. N/A	
a. Frame, Wood, Exterior	R=19.0, 2502.0 ft ²	c. Conservation credits	
b. Frame, Wood, Adjacent	R=19.0, 176.0 ft ²	(HR-Heat recovery, Solar	
c. N/A		DHP-Dedicated heat pump)	
d. N/A		15. HVAC credits	MZ-C, PT, CF, MZ-
e. N/A		(CF-Ceiling fan, CV-Cross ventilation,	
10. Ceiling types		HF-Whole house fan,	
a. Under Attic	R=30.0, 1140.0 ft ²	PT-Programmable Thermostat,	
b. Under Attic	R=19.0, 363.5 ft ²	MZ-C-Multizone cooling,	
c. N/A		MZ-H-Multizone heating)	
11. Ducts			
a. Sup: Unc. Ret: Unc. AH: Interior	Sup. R=6.0, 98.0 ft		
b. Sup: Con. Ret: Con. AH: Interior	Sup. R=6.0, 78.0 ft		

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: FLR1PB v3.22)

District No. 1 - Ronald Williams
District No. 2 - Dewey Weaver
District No. 3 - George Skinner
District No. 4 - Jennifer Flinn
District No. 5 - James Montgomery

Webbie

1147

BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY



DATE 10/3/03

PERMIT #. 21132

COLUMBIA COUNTY

APPLICATION FOR CULVERT WAIVER

OCT 06 2003

PUBLIC WORKS DEPT.

APPLICANT: L.L. Clemons

MAILING ADDRESS: 511 SW Riverside Ave
Ft. White 32038

PHONE#: 352 665-6444

OWNER OF PROPERTY: Same

STREET ADDRESS OR LOCATION OF PROPERTY: 475, TR on 27,
TL Riverside DR, Corner of Nebraska &
Riverside

I HEREBY CERTIFY THAT I UNDERSTAND AND WILL FULLY COMPLY WITH THE
DECISION OF THE COLUMBIA COUNTY PUBLIC WORKS DEPT. IN CONNECTION WITH
THE HEREIN PROPOSED APPLICATION.

SIGNED: [Signature]

(applicant)

I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATION AND DETERMINED
THAT THE CULVERT WAIVER IS:

☒ APPROVED

NOT APPROVED ☐

FEE: \$25.00

SIGNED: [Signature]
PUBLIC WORKS DEPT.

COMMENTS: _____

DATE: _____

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

Notice of Treatment

Applicator Florida Pest Control & Chemical Co.

Address 116 NW 16th

City Gville

Phone 376 2661

Site Location

Subdivision 3 Rivers Est.

Lot#

Block#

Permit#

Address 511 SW Riverside DR - White

AREAS TREATED

21132

Print Technician's

Area Treated

Date

Time

Gal.

Name

Main Body

10/22/03

1208

280.6

Tony R. Stein

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 Dursbate

5 %

Remarks