

DATE 07/23/2009

Columbia County Building Permit
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000027964

APPLICANT JOHN SMITH PHONE 786.295.9296
ADDRESS 377 SW MAULDIN AVENUE LAKE CITY FL 32024
OWNER WEISLEDER ASSOCIATES, INC. PHONE 386.754.0042
ADDRESS 224 SW WISE DRIVE LAKE CITY FL 32024
CONTRACTOR LOUIS R. SCHWARTZ PHONE 305.971.3935
LOCATION OF PROPERTY 47-S TO C-242, TR TO WISE ESTATES TO WISE DR, TR, 5TH LOT
ON LEFT
TYPE DEVELOPMENT SFD/UTILITY ESTIMATED COST OF CONSTRUCTION 110000.00
HEATED FLOOR AREA 2200.00 TOTAL AREA 1642.00 HEIGHT 16.00 STORIES 1
FOUNDATION CONC WALLS FRAMED ROOF PITCH 6'12 FLOOR CONC
LAND USE & ZONING RSF-2 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 23-4S-16-03113-105 SUBDIVISION WISE ESTATES
LOT 5 BLOCK A PHASE _____ UNIT _____ TOTAL ACRES 0.56

000001742 _____ CBC1253816 _____
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
18"X32"MITERED 09-0364 BLK HD N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: ELEVATION CONFIRMATION LETTER REQUIRED @ SLAB. MFE @ 98.5' PER PLAT.

NOC ON FILE.

Check # or Cash 1043

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

BUILDING PERMIT FEE \$ 550.00 CERTIFICATION FEE \$ 8.21 SURCHARGE FEE \$ 8.21
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$ _____
FLOOD DEVELOPMENT FEE \$ _____ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ 25.00 TOTAL FEE 666.42
INSPECTORS OFFICE _____ CLERKS OFFICE _____

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

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

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

Printed 7-1-07

DATE 07/23/2009

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027964

APPLICANT JOHN SMITH PHONE 786.295.9296
ADDRESS 377 SW MAULDIN AVENUE LAKE CITY FL 32024
OWNER WEISLEDER ASSOCIATES,INC. PHONE 386.754.0042
ADDRESS 224 SW WISE DRIVE LAKE CITY FL 32024
CONTRACTOR LOUIS R. SCHWARTZ PHONE 305.971.3935
LOCATION OF PROPERTY 47-S TO C-242,TR TO WISE ESTATES TO WISE DR,TR, 5TH LOT
ON LEFT
TYPE DEVELOPMENT SFD/UTILITY ESTIMATED COST OF CONSTRUCTION 110000.00
HEATED FLOOR AREA 2200.00 TOTAL AREA 1642.00 HEIGHT 16.00 STORIES 1
FOUNDATION CONC WALLS FRAMED ROOF PITCH 6'12 FLOOR CONC
LAND USE & ZONING RSF-2 MAX. HEIGHT 35
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 23-4S-16-03113-105 SUBDIVISION WISE ESTATES
LOT 5 BLOCK A PHASE UNIT TOTAL ACRES 0.56

000001742 CBC1253816
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
18"X32'MITERED 09-0364 BLK HD N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident
COMMENTS: ELEVATION CONFIRMATION LETTER REQUIRED @ SLAB. MFE @ 98.5' PER PLAT.
NOC ON FILE, ELEVATION CONFIRMATION LETTER RECEIVED/BLK
COMPACTION TEST RECEIVED Check # or Cash 1043

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power 07/27/2009 WR Foundation date/app. by Monolithic 07/31/2009 WR date/app. by
Under slab rough-in plumbing 07/29/2009 HD Slab date/app. by Sheathing/Nailing 08/11/2009 HD date/app. by
Framing 08/31/2009 HD Insulation date/app. by
Rough-in plumbing above slab and below wood floor 08/31/2009 HD Electrical rough-in 08/31/2009 HD date/app. by
Heat & Air Duct 08/31/2009 HD Peri. beam (Lintel) date/app. by Pool date/app. by
Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by
Pump pole date/app. by Utility Pole date/app. by M/H tie downs, blocking, electricity and plumbing date/app. by
Reconnection date/app. by RV date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 550.00 CERTIFICATION FEE \$ 8.21 SURCHARGE FEE \$ 8.21
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$
FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ 25.00 TOTAL FEE 666.42
INSPECTORS OFFICE CLERKS OFFICE

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

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

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

Columbia County Building Permit Application

ck# 1043

For Office Use Only Application # 0907-18 Date Received 7/15/09 By G Permit # 1742/27964
Zoning Official BLK Date 2.10.09 Flood Zone X Land Use RES. L. Dev Zoning RSF-2
FEMA Map # N/A Elevation N/A MFE 98.5 ft River N/A Plans Examiner HD Date 7-17-09
Comments Elevation Confirmation Letter Required at Slab
☐ NOC ☒ EH ☐ Deed or PA ☐ Site Plan ☐ State Road Info ☐ Parent Parcel #
☐ Dev Permit # ☐ In Floodway ☒ Letter of Auth. from Contractor ☐ F W Comp. letter
IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____
School _____ = TOTAL Suspended

Septic Permit No. 09-0364 697-3664 Fax 386-755-6824
Name Authorized Person Signing Permit John or Pam Smith Phone 786-295-9296
Address 377 SW Mauldin Ave LAKE CITY, FL 32024
Owners Name Weisleder Associates Inc Phone 386-754-0042
911 Address 224 SW Wise Dr. LAKE CITY, FL 32024
Contractors Name Catalina Caststone Creations, Inc. Phone 386-697-3447
Address 9801 SW 121st. Miami, FL 33176 - Main Office
Fee Simple Owner Name & Address N/A
Bonding Co. Name & Address N/A
Architect/Engineer Name & Address Schafer Engineering, LLC 14705 Main St.
Mortgage Lenders Name & Address N/A Alachua, FL 32615

Circle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress Energy

Property ID Number 23-4S-16-03113-105 Estimated Cost of Construction \$87,000
Subdivision Name Wise Estates Lot 5 Block A Unit _____ Phase _____
Driving Directions Hwy 47 to CR 242 Turn Right One mile on Right
to Wise estates Turn Right 5th lot on left
(Wise DR)
Number of Existing Dwellings on Property 0

Construction of Residential SFD Total Acreage 0.56 Lot Size _____
Do you need a Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 14'11"
Actual Distance of Structure from Property Lines - Front 45' Side 39' Side 39' Rear 98'
Number of Stories 1 Heated Floor Area 1642 Total Floor Area 2200 Roof Pitch 6/12

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

Columbia County Building Permit Application

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

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

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

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

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

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

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. It may be to your advantage to check and see if your property is encumbered by any restrictions.

(Owners Must Sign All Applications Before Permit Issuance.)

Owners Signature

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

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

Contractor's Signature (Permitee)

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

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

Personally known _____ or Produced Identification _____

SEAL:

State of Florida Notary Signature (For the Contractor)

Columbia County Building Permit Application

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

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment

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

NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE:

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

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

OWNERS CERTIFICATION: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

Owners Signature

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

James R. Schwart
Contractor's Signature (Permittee)

Contractor's License Number CAC 1253816
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 15th day of July 2009.
Personally known ☒ or Produced Identification N/A

[Signature]
State of Florida Notary Signature (For the Contractor)

SEAL:



MATTHEW CUTLER
Notary Public, State of Florida
Commission #DD790343
My Commission Expires May 20, 2012

Columbia County Building Department Culvert Permit

Culvert Permit No.
000001742

DATE 07/24/2009 PARCEL ID # 23-4S-16-03113-105

APPLICANT JOHN SMITH PHONE 786.295.9296

ADDRESS 377 SW MAULDIN AVENUE LAKE CITY FL 32024

OWNER WEISLEDER ASSOCIATES, INC. PHONE 386.754.0042

ADDRESS 224 SW WISE DRIVE LAKE CITY FL 32024

CONTRACTOR LOUIS R. SCHWARTZ PHONE 305.971.3935

LOCATION OF PROPERTY 47-S TO C-242, TR TO WISE ESTATES TO WISE DR, TR, 5TH LOT ON LEFT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT WISE ESTATES 5 A

SIGNATURE



INSTALLATION REQUIREMENTS



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

INSTALLATION NOTE: Turnouts will be required as follows:

- a) a majority of the current and existing driveway turnouts are paved, or;
 - b) the driveway to be served will be paved or formed with concrete.
- Turnouts shall be concrete or paved a minimum of 12 feet wide or the width of the concrete or paved driveway, whichever is greater. The width shall conform to the current and existing paved or concreted turnouts.



Culvert installation shall conform to the approved site plan standards.



Department of Transportation Permit installation approved standards.



Other _____

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

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

Amount Paid 25.00



SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER Wise 0907-18CONTRACTOR CATALINAPHONE 786-295-9296

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

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

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

ELECTRICAL	Print Name <u>STEVE THOMAS ELECTRIC LLC</u>	Signature <u>[Signature]</u>	Phone #: <u>386-752-5125</u>
	License #: <u>EC 0001121</u>		
MECHANICAL/ A/C	Print Name <u>Glenn I Jones Inc</u>	Signature <u>[Signature]</u>	Phone #: <u>386-752-5389</u>
	License #: <u>CAC051486</u>		
PLUMBING/ GAS	Print Name <u>DANIEL D. WEILAND</u>	Signature <u>[Signature]</u>	Phone #: <u>386-758-3570</u>
	License #: <u>CFC 1426221</u>		
ROOFING	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
SHEET METAL	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
FIRE SYSTEM/ SPRINKLER	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
SOLAR	Print Name _____	Signature _____	Phone #: _____
	License #: _____		

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	<u>08-00004634</u>	<u>N/A</u>	
CONCRETE FINISHER	<u>08-00004634</u>	<u>Gary W. Moore JR</u>	<u>[Signature]</u>
FRAMING	<u>000252</u>	<u>Glenn L Keen</u>	<u>[Signature]</u>
INSULATION	<u>CBC1253816</u>	<u>CATALINA</u>	
STUCCO	<u>—</u>	<u>N/A</u>	
DRYWALL	<u>000349</u>	<u>JAMES TIMPSON</u>	<u>[Signature]</u>
PLASTER	<u>000348</u>	<u>JAMES TIMPSON</u>	<u>[Signature]</u>
CABINET INSTALLER	<u>CBC1253816</u>	<u>CATALINA</u>	
PAINTING	<u>11</u>	<u>11</u>	
ACOUSTICAL CEILING	<u>—</u>	<u>N/A</u>	
GLASS	<u>—</u>	<u>N/A</u>	
CERAMIC TILE	<u>(GRC04636)</u>	<u>Steve Cronin</u>	<u>[Signature]</u>
FLOOR COVERING	<u>(GRC04636)</u>	<u>Steve Cronin</u>	<u>[Signature]</u>
ALUM/VINYL SIDING	<u>000253</u>	<u>Glenn L Keen</u>	<u>[Signature]</u>
GARAGE DOOR	<u>—</u>	<u>N/A</u>	
METAL BLDG ERECTOR	<u>—</u>	<u>N/A</u>	

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

NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 23-45-16-03113-105

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

1. Description of property (legal description):

a) Street (job) Address: 224 SW Wise Dr, Lake City, FL 32024

2. General description of improvements: Single Family Home

3. Owner Information

a) Name and address: Weisleder Associates Inc. 51 Tarpon Lane

b) Name and address of fee simple titleholder (if other than owner) 1224 Largo, FL

c) Interest in property 33036

4. Contractor Information

a) Name and address: Catalina Caststone Creations Inc

b) Telephone No.: 386-755-6824

Fax No. (Opt.)

5. Surety Information

a) Name and address

b) Amount of Bond:

c) Telephone No.:

6. Lender

a) Name and address:

b) Phone No.

7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served

a) Name and address:

b) Telephone No.:

Inst: 200912011780 Date: 7/15/2009 Time: 2:36 PM

DC, P. DeWitt Cason, Columbia County Page 1 of 1 B: 1177 P: 410

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

a) Name and address: John Smith 377 SW Mauldin Ave. Lake City, FL 32024

b) Telephone No: 386-697-3664

Fax No. (Opt.)

9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): July 14, 2009

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

STATE OF FLORIDA
COUNTY OF COLUMBIA



NOTARY PUBLIC-STATE OF FLORIDA
L. Taylor Goes
Commission # DD589823
Expires: AUG. 28, 2010
BONDED THRU ATLANTIC BONDING CO., INC.

10.

John Smith

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

John Smith, Vice President

Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 13th day of July, 2009, by:

John Smith as Vice President (type of authority, e.g. officer, trustee, attorney

fact) for Weisleder & Associates Inc. (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification ☐ Type

Notary Signature L. Taylor Goes

Notary Stamp or Seal:


—AND—

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

John Smith

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

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

www.Sunbiz.org



[Home](#) [Contact Us](#) [E-Filing Services](#) [Document Searches](#) [Forms](#) [Help](#)

[Previous on List](#) [Next on List](#) [Return To List](#)

Entity Name Search

Submit

No Events

No Name History

Detail by Entity Name

Florida Profit Corporation

WEISLEDER ASSOCIATES, INC.

Filing Information

Document Number	P04000064375
FEI/EIN Number	201040473
Date Filed	04/13/2004
State	FL
Status	ACTIVE

Principal Address

53 TARPON LN ORC
KEY LARGO FL 33037

Mailing Address

53 TARPON LN ORC
KEY LARGO FL 33037

Registered Agent Name & Address

WEISLEDER, BROOKE R
53 TARPON LN ORC
KEY LARGO FL 33037

Officer/Director Detail

Name & Address

Title PS

WEISLEDER, BROOKE R
53 TARPON LN ORC
KEY LARGO FL 33037

Annual Reports

Report Year	Filed Date
2007	01/16/2007
2008	01/04/2008
2009	01/12/2009

Document Images

01/12/2009 -- ANNUAL REPORT	View image in PDF format
01/04/2008 -- ANNUAL REPORT	View image in PDF format

Catalina Caststone Creations, Inc.

9801 Southwest 121 Street
Miami, Florida 33176

Phone: 305-971-3935

Fax: 305-971-2147

August 27, 2009

Columbia County Building Department
135 NE Hernando Avenue
Suite B21
Lake City, FL 32055
Attn: Laurie Hodson

RE: License #: CBC1253816
License Holder: Louis R Schwartz
Catalina Caststone Creations, Inc.
9801 SW 121 Street
Miami, FL 33176

On August 24, 2009 we sent you a letter stating that we will no longer be the contractor of record for Permit #27964 issued July 23, 2009 or Permit #27965 issued July 24, 2009. This was stated in error. We will remain the contractor of record for these two permits until their satisfactory closure. However, no new permits should be pulled under this license number.

We apologize for any confusion or inconvenience this mis-statement may have caused. If you need any clarification of this matter please don't hesitate to contact me via email: LRS48@aol.com, or via phone: 305-542-9193, 305-971-3935 or fax: 305-971-2147.

Thank you for your help and cooperation in this matter.

Sincerely,



Randy Schwartz

enc. August 24 letter

cc. Pam & John Smith
Brooke Weisleder

RECEIVED
LH 9-2-09

Catalina Caststone Creations, Inc.

9801 Southwest 121 Street
Miami, Florida 33176

Phone: 305-971-3935

Fax: 305-971-2147

August 24, 2009

Columbia County Building Department
135 NE Hernando Avenue
Suite B21
Lake City, FL 32055
Attn: Laurie Hodson

RE: License #: CBC1253816
License Holder: Louis R Schwartz
Catalina Caststone Creations, Inc.
9801 SW 121 Street
Miami, FL 33176

This letter is to inform you that as of August 31, 2009 no permits are to be pulled under the above cited license number. If any one applies for a permit using this license please notify me at once via email: LRS48@aol.com, phone: 305-542-9193 or 305-971-3935 or fax: 305-971-2147. In addition, as of August 31, 2009 I will no longer be the contractor of record for Permit #27964, issued July 23, 2009 or Permit #27965 issued July 24, 2009. Please contact John Smith at 786-295-9296 for the new contractor information.

Thank you for your help and cooperation in this matter.

Sincerely,



Randy Schwartz

cc. Pam & John Smith
Brooke Weisleder

RECEIVED
8-31-09 *L. Hodson*



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. AP928024
DATE PAID: 6/30/09
PAID: 310.00
RECEIPT #: 12-PID-1157318

LC

APPLICATION FOR:

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

APPLICANT: Weisleder Associates Inc (Pam Smith)

AGENT: Robert Ford NEST inc TELEPHONE: 755-6372

MAILING ADDRESS: 580 NW Guerdon Rd LAKE CITY FLA 32055

=====

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES.

=====

PROPERTY INFORMATION

LOT: 5 BLOCK: A SUBDIVISION: Wise Estates PLATTED: 4/2004

PROPERTY ID #: 23-45-16-03113-105 ZONING: SF I/M OR EQUIVALENT: (Y ☒ N ☐)

PROPERTY SIZE: 0.560 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPD

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

PROPERTY ADDRESS: 224 SW Wise Dr. LC FLA 32024

DIRECTIONS TO PROPERTY: Hwy 47 SOUTH TO 242 TR GO to WISE DR.
TR LOT on left

BUILDING INFORMATION

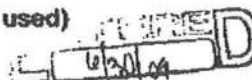
☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sq Ft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>S/F House</u>	<u>3</u>	<u>1542</u> <u>1542</u>	
2				
3				
4				

☐ Floor/Equipment Drains ☐ Other (Specify) _____

SIGNATURE: Robert Ford

DATE: 6/30/09





STATE OF FLORIDA
DEPARTMENT OF HEALTH

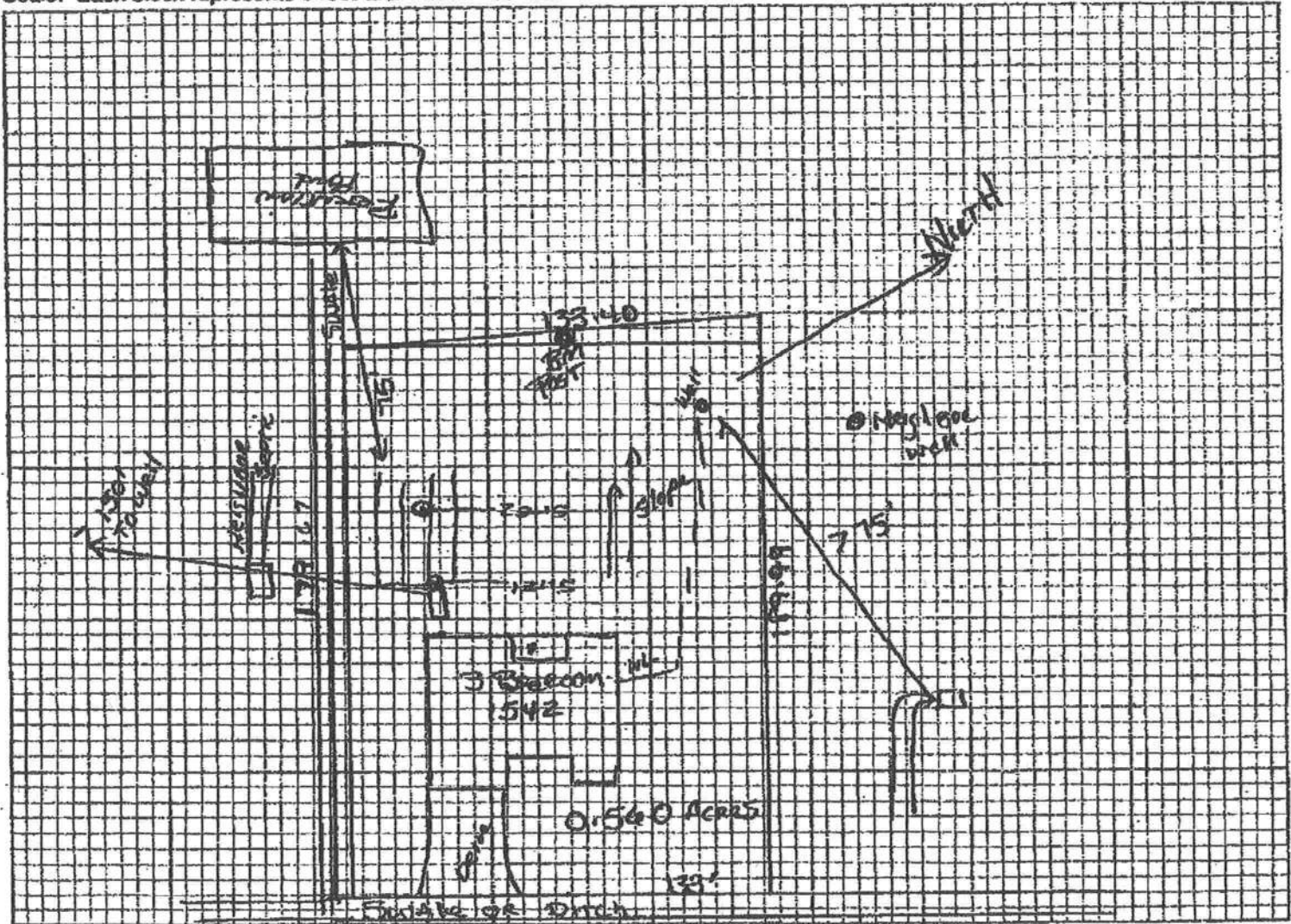
09-0364

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes:

SW Wise Drive

Weisleder Associates Inc

Lot 5 Bk A Wise Estates

23-45-16-03113-105 — 0.560 Acres

Site Plan submitted by:

Robert W. Judd

Signature

Agent

Title

Plan Approved

APPROVED

Not Approved

Date

7/7/11

By

Columbia CHD

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

09-0364



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

PERMIT NO. AT 709027
DATE PAID: 6/20/9
FEE PAID: 30.00
RECEIPT #: 12-PD-117737

CONSTRUCTION PERMIT FOR:

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

APPLICANT: Weisleder Associates IncPROPERTY ADDRESS: 224 SW Wise DriveLOT: 5 BLOCK: A SUBDIVISION: Wise Estates

[SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]
[OR TAX ID NUMBER]

PROPERTY ID #: 03113-105

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065, F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. 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 DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [900] GALLONS / GPD SEPTIC TANK AEROBIC UNIT CAPACITY MULTI-CHAMBERED /IN-SERIES []
A [] GALLONS / GPD _____ CAPACITY MULTI-CHAMBERED /IN-SERIES []
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 1250 GALLONS]
K [] GALLONS DOSING TANK CAPACITY [] GALLONS @ [] DOSES PER 24 HRS # PUMPS []

D [315] SQUARE FEET PRIMARY DRAINFIELD SYSTEM

R [] SQUARE FEET _____ SYSTEM

A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND []

I CONFIGURATION: [X] TRENCH [] BED []

N

F LOCATION OF BENCHMARK: NAIL Pink Ribbon Fence PostI ELEVATION OF PROPOSED SYSTEM SITE [0] [INCHES/FT] [ABOVE/BELOW] BENCHMARK/REFERENCE POINTE BOTTOM OF DRAINFIELD TO BE [18] [INCHES/FT] [ABOVE/BELOW] BENCHMARK/REFERENCE POINT

L

D FILL REQUIRED: [0] INCHES EXCAVATION REQUIRED: [0] INCHES

O

T

H

E

R

SPECIFICATIONS BY: Robert W. [Signature]TITLE: Master SMO890475APPROVED BY: [Signature]TITLE: ES I

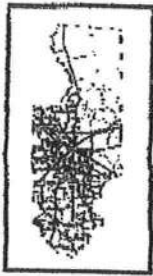
Columbia CHD CHD
EXPIRATION DATE: 1/9/11

DATE ISSUED: 7/9/9

DH 4016, 12/99 (Page 1) (Previous Editions May Be Used)

Page 1 of 3

pt. 1: Health Department
pt. 2: Applicant
pt. 3: Installer/Contractor
pt. 4: Building Department



COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787
Telephone: (386) 758-1125 * Fax: (386) 758-1365 * Email: ron_croft@columbiacountyfla.com



ADDRESS ASSIGNMENT DATA

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

A Residential or Other Structure(s) on Parcel Number:
23-4S-16-03113-105 (LOT 5 BLOCK A WISE ESTATE S/D)

Address Assignment(s):
224 SW WISE DR, LAKE CITY, FL, 32024

Any questions concerning this information should be referred to the Columbia County 911 Addressing / GIS Department at the address or telephone number above.

Prepared by & Return to:

Matthew D. Rocco

Sierra Title, LLC

619 SW Baya Drive, Suite 102

Lake City, Florida 32025

File Number: 08-0406

Inst 200812018156 Date 10/2/2008 Time: 3:25 PM
Doc Stamp-Deed: 210.00
DC, P DeWitt Cason, Columbia County Page 1 of 1 B: 1159 P: 1686

General Warranty Deed

Made this September 30 2008 A.D. By **Ruben A. Alvarez**, whose post office address is: 20018 Rustic Lake Lane, Cypress, TX 77433, hereinafter called the grantor, to **Weisleder Associates, Inc., a Florida corporation**, whose post office address is: 53 Tarpon Lane ORC, Key Largo, FL 33037, hereinafter called the grantee:

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

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, viz:

Lot 5, Block A, WISE ESTATES, a subdivision according to the plat thereof, filed in Plat Book 7, Page 164-167, of the Public Records of Columbia County, Florida.

Parcel ID Number: **R03113-105**

Said property is not the homestead of the Grantor(s) under the laws and constitution of the State of Florida in that neither Grantor(s) or any members of the household of Grantor(s) reside thereon.

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, 2007.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:


Witness Printed Name Christine Sullivan


Ruben A. Alvarez (Seal)
Address: 20018 Rustic Lake Lane, Cypress, TX 77433

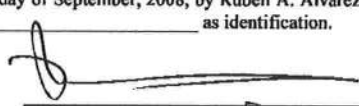

Witness Printed Name CHRIS O. ODUME

(Seal)
Address:

State of Texas
County of Harris

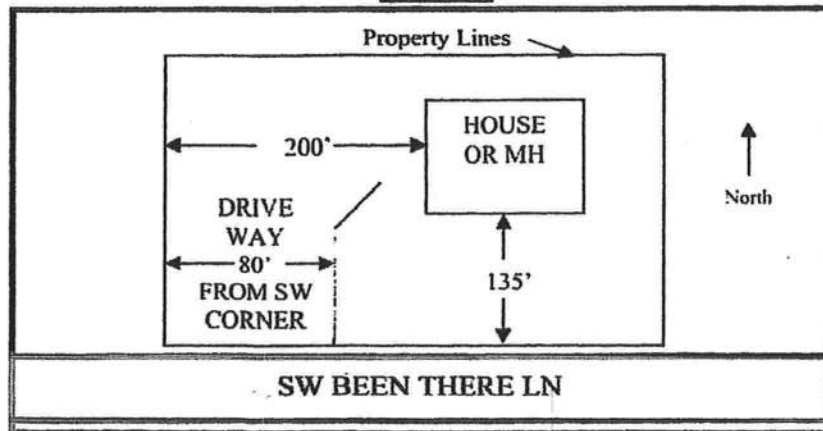
The foregoing instrument was acknowledged before me this 30 day of September, 2008, by Ruben A. Alvarez, who is/are personally known to me or who has produced Virginia ID as identification.



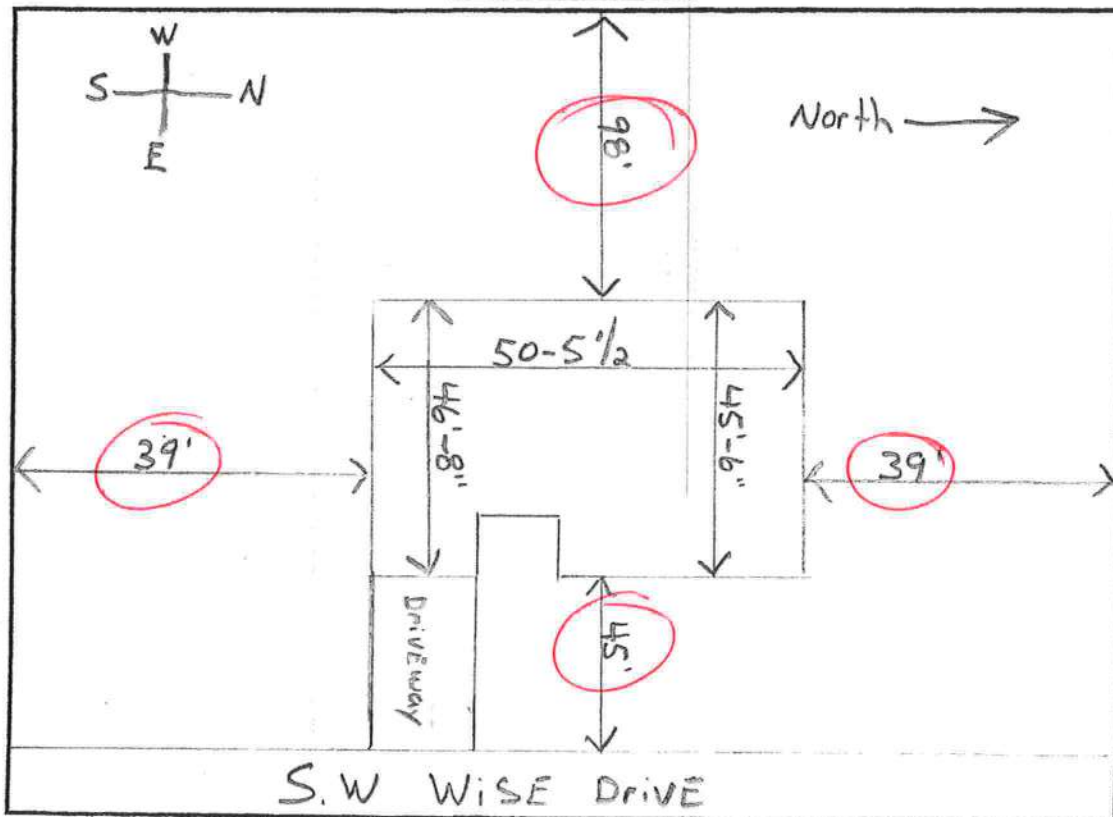

Notary Public
Print Name: Helen Dexter
My Commission Expires: 11/22/08

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:



A&B Well Drilling, Inc.

5873 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 768-3409
Cell: (386) 623-3151
Fax: (386) 768-3410
Owner: Bruce Park

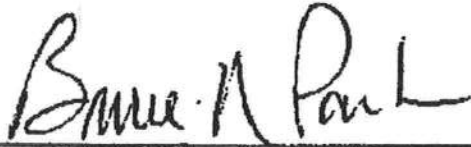
July 14, 2009

To: Columbia County Building Department

Description of Well to be installed for Customer _____

Located @ Address: _____

1 HP 15 GPM submersible pump, 1 1/2" drop pipe, 86 gallon captive tank, and backflow prevention.
With SRWMD permit.



Sincerely,
Bruce N. Park
President

Catalina Caststone Creations, Inc.

9801 Southwest 121 Street
Miami, Florida 33176

Phone: 305-971-3935

Fax: 305-971-2147

CBC1253816

RE: License Number

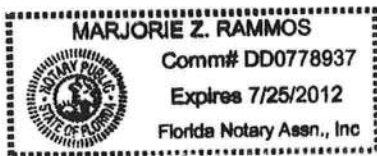
To Whom It May Concern:

This letter is to inform you that I give permission to John J Smith to authorize work in my name in Lake City, Florida, County of Columbia. This includes pulling building permits and picking up the Certificate of Occupancy when the project is complete.

Signature of Affiant: L. Randy Schwartz
L. Randy Schwartz
President, Catalina Caststone Creations, Inc.

Sworn (or affirmed) and subscribed before me this 14th day of July, 2009 By L. Randy Schwartz, the affiant is personally known to me.

Notary Seal:



[Signature]
Signature of Notary Public

Notary Public for the State of Florida
My commission expires: July 25, 2012

Louis R. Schwartz
Catalina Caststone Creations
9601 SW 121 Street
Miami, FL 33176
License Number: 7001785

To Whom It May Concern:

This Letter is to inform you that I give permission to John J. or Pamela T. Smith to authorize work in my name in Lake City, FL, county of Columbia. This includes pulling building permit and picking up the Certificate of Occupancy when the project is complete.

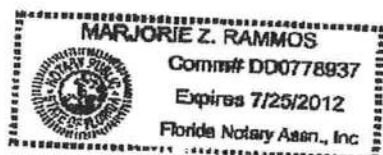
Signature of Affiant: Louis R. Schwartz

Certificate of Acknowledgment of Notary Public

Sworn (or affirmed) and subscribed before me this 7 day of July, 2009.

By Louis R. Schwartz, the affiant is X personally known to me, or _____ produced the following identification:

Notary Seal:



[Signature]
Signature of Notary Public

Notary Public for the State of Florida

My commission expires: 7/25/2012

AC# 3824137

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L08062000652

DATE	BATCH NUMBER	LICENSE NBR
06/20/2008	078161833	CBC1253816

The BUILDING CONTRACTOR

Named below IS CERTIFIED

Under the provisions of Chapter 489 FS.

Expiration date: AUG 31, 2010

SCHWARTZ, LOUIS R
CATALINA CASTSTONE CREATIONS INC
9801 SW 121 STREET
MIAMI FL 33176CHARLIE CRIST
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CHUCK DRAGO
INTERIM SECRETARY

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Performance Method A

Project Name: John and Pam Smith
 Street:
 City, State, Zip: , FL ,
 Owner: John and Pam Smith
 Design Location: FL, Gainesville

Builder Name: *Latino Cestone Curby Inc*
 Permit Office: Columbia County
 Permit Number: *27546*
 Jurisdiction: *221006*

- | | | |
|--|------------------|-------------------------|
| 1. New construction or existing | New (From Plans) | |
| 2. Single family or multiple family | Single-family | |
| 3. Number of units, if multiple family | 1 | |
| 4. Number of Bedrooms | 3 | |
| 5. Is this a worst case? | No | |
| 6. Conditioned floor area (ft ²) | 1542 | |
| 7. Windows | Description | Area |
| a. U-Factor: | Dbl, U=0.65 | 201.00 ft ² |
| SHGC: | SHGC=0.35 | |
| b. U-Factor: | Dbl, U=0.55 | 6.00 ft ² |
| SHGC: | SHGC=0.35 | |
| c. U-Factor: | N/A | ft ² |
| SHGC: | | |
| d. U-Factor: | N/A | ft ² |
| SHGC: | | |
| e. U-Factor: | N/A | ft ² |
| SHGC: | | |
| 8. Floor Types | Insulation | Area |
| a. Slab-On-Grade Edge Insulation | R=0.0 | 1542.00 ft ² |
| b. N/A | R= | ft ² |
| c. N/A | R= | ft ² |

- | | | |
|--|-----------------------|-------------------------|
| 9. Wall Types | Insulation | Area |
| a. Frame - Wood, Exterior | R=19.0 | 1869.70 ft ² |
| b. N/A | R= | ft ² |
| c. N/A | R= | ft ² |
| d. N/A | R= | ft ² |
| 10. Ceiling Types | Insulation | Area |
| a. Under Attic (Vented) | R=30.0 | 1542.00 ft ² |
| b. N/A | R= | ft ² |
| c. N/A | R= | ft ² |
| 11. Ducts | | |
| a. Sup: Attic Ret: Attic AH: Garage Sup. R= 6, | 308.4 ft ² | |
| 12. Cooling systems | | |
| a. Central Unit | Cap: 30 kBtu/hr | SEER: 13 |
| 13. Heating systems | | |
| a. Electric Heat Pump | Cap: 30 kBtu/hr | HSPF: 7.7 |
| 14. Hot water systems | | |
| a. Electric | Cap: 50 gallons | EF: 0.92 |
| b. Conservation features | | |
| None | | |
| 15. Credits | | Pstat |

Glass/Floor Area: 0.134

Total As-Built Modified Loads: 30.23

Total Baseline Loads: 36.84

PASS

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

PREPARED BY: *Nora L. Terry*
 DATE: *7/14/09*

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:

PROJECT

Title: John and Pam Smith	Bedrooms: 3	Address Type: Street Address
Building Type: FLAsBuilt	Bathrooms: 0	Lot #
Owner: John and Pam Smith	Conditioned Area: 1542	SubDivision:
# of Units: 1	Total Stories: 1	PlatBook:
Builder Name:	Worst Case: No	Street:
Permit Office: Columbia County	Rotate Angle: 0	County: Columbia
Jurisdiction:	Cross Ventilation:	City, State, Zip: , FL ,
Family Type: Single-family	Whole House Fan:	
New/Existing: New (From Plans)		
Comment:		

CLIMATE

✓	Design Location	TMY Site	IECC Zone	Design Temp 97.5 %	Design Temp 2.5 %	Int Design Temp Winter	Int Design Temp Summer	Heating Degree Days	Design Moisture	Daily Temp Range
✓	FL, Gainesville	FL_GAINESVILLE_REGI	2	32	92	75	70	1305.5	51	Medium

FLOORS

✓	#	Floor Type	Perimeter	R-Value	Area	Tile	Wood	Carpet
✓	1	Slab-On-Grade Edge Insulatio	193 ft	0	1542 ft²	0.1	0.25	0.65

ROOF

✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	Tested	Deck Insul.	Pitch
✓	1	Hip	Composition shingles	1725 ft²	0 ft²	Medium	0.96	No	0	26.6 deg

ATTIC

✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
✓	1	Full attic	Vented	300	1542 ft²	N	N

CEILING

✓	#	Ceiling Type	R-Value	Area	Framing Frac	Truss Type
✓	1	Under Attic (Vented)	30	1542 ft²	0.11	Wood

WALLS

✓	#	Ornt	Adjacent To	Wall Type	Cavity R-Value	Area	Sheathing R-Value	Framing Fraction	Solar Absor.
✓	1	W	Exterior	Frame - Wood	19	373.33 ft²		0.23	0.75
✓	2	N	Exterior	Frame - Wood	19	507.67 ft²		0.23	0.75
✓	3	E	Exterior	Frame - Wood	19	364 ft²		0.23	0.75
✓	4	S	Exterior	Frame - Wood	19	624.67 ft²		0.23	0.75

DOORS													
✓	#	Ornt	Door Type			Storms		U-Value		Area			
_____	1	W	Insulated			None		0.46		20 ft²			
_____	2	S	Insulated			None		0.46		20 ft²			
_____	3	E	Insulated			None		0.46		27.5 ft²			
_____	4	N	Insulated			None		0.46		33.33 ft²			

WINDOWS													
Window orientation below is as entered. Actual orientation is modified by rotate angle shown in "Project" section above.													
✓	#	Ornt	Frame	Panes	NFRC	U-Factor	SHGC	Storms	Area	Overhang Depth Separation		Int Shade	Screening
_____	1	W	Vinyl	Low-E Double	Yes	0.55	0.35	N	6 ft²	1 ft 0 in	0 ft 6 in	HERS 2006	None
_____	2	N	Vinyl	Low-E Double	Yes	0.65	0.35	N	60 ft²	1 ft 6 in	0 ft 6 in	HERS 2006	None
_____	3	E	Vinyl	Low-E Double	Yes	0.65	0.35	N	30 ft²	1 ft 0 in	0 ft 6 in	HERS 2006	None
_____	4	E	Vinyl	Low-E Double	Yes	0.65	0.35	N	6 ft²	1 ft 0 in	0 ft 6 in	HERS 2006	None
_____	5	S	Vinyl	Low-E Double	Yes	0.65	0.35	N	60 ft²	1 ft 6 in	0 ft 6 in	HERS 2006	None
_____	6	N	Vinyl	Low-E Double	Yes	0.65	0.35	N	45 ft²	1 ft 8 in	0 ft 6 in	HERS 2006	None

INFILTRATION & VENTING											
✓	Method	SLA	CFM 50	ACH 50	ELA	EqLA	---- Forced Ventilation ---- Supply CFM Exhaust CFM		Run Time Fraction	Fan Watts	
_____	Default	0.00036	1456	7.08	79.9	150.3	0 cfm 0 cfm		0	0	

GARAGE						
✓	#	Floor Area	Ceiling Area	Exposed Wall Perimeter	Avg. Wall Height	Exposed Wall Insulation
_____	1	382.6653 ft²	382.6653 ft²	49.75 ft	8 ft	13

COOLING SYSTEM								
✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Ductless
_____	1	Central Unit	None	SEER: 13	30 kBtu/hr	900 cfm	0.7	False

HEATING SYSTEM						
✓	#	System Type	Subtype	Efficiency	Capacity	Ductless
_____	1	Electric Heat Pump	None	HSPF: 7.7	30 kBtu/hr	False

HOT WATER SYSTEM							
✓	#	System Type	EF	Cap	Use	SetPnt	Conservation
_____	1	Electric	0.92	50 gal	60 gal	120 deg	None

SOLAR HOT WATER SYSTEM

✓	FSEC Cert #	Company Name	System Model #	Collector Model #	Collector Area	Storage Volume	FEF
_____	None	None			ft²		

DUCTS

✓	#	Location	---- Supply ---- R-Value	Area	---- Return ---- Location	Area	Leakage Type	Air Handler	CFM 25	Percent Leakage	QN	RLF
_____	1	Attic	6	308.4 ft	Attic	77.1 ft²	Default Leakage	Garage				

TEMPERATURES

Programable Thermostat: Y				Ceiling Fans:											
Cooling	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec			
Heating	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec			
Venting	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec			
Thermostat Schedule: HERS 2006 Reference				Hours											
Schedule Type		1	2	3	4	5	6	7	8	9	10	11	12		
Cooling (WD)	AM	78	78	78	78	78	78	78	78	80	80	80	80		
	PM	80	80	78	78	78	78	78	78	78	78	78	78		
Cooling (WEH)	AM	78	78	78	78	78	78	78	78	78	78	78	78		
	PM	78	78	78	78	78	78	78	78	78	78	78	78		
Heating (WD)	AM	66	66	66	66	66	68	68	68	68	68	68	68		
	PM	68	68	68	68	68	68	68	68	68	68	66	66		
Heating (WEH)	AM	66	66	66	66	66	68	68	68	68	68	68	68		
	PM	68	68	68	68	68	68	68	68	68	68	66	66		

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS:

PERMIT #:

, FL,

INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	N1106.AB.1.1	Maximum: .3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area.	
Exterior & Adjacent Walls	N1106.AB.1.2.1	Caulk, gasket, weatherstrip or seal between: windows/doors & frames, surrounding wall; foundation & wall sole or sill plate; joints between exterior wall panels at corners; 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	N1106.AB.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	N1106.AB.1.2.3	Between walls & ceilings; penetrations of ceiling plane to top floor; around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams.	
Recessed Lighting Fixtures	N1106.AB.1.2.4	Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC with < 2.0 cfm from conditioned space, tested.	
Multi-story Houses	N1106.AB.1.2.5	Air barrier on perimeter of floor cavity between floors.	
Additional Infiltration reqts	N1106.AB.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air.	

OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	N1112.AB.3	Comply with efficiency requirements in Table N112.ABC.3. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	N1112.AB.2.3	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%. Heat pump pool heaters shall have a minimum COP of 4.0.	
Shower heads	N1112.AB.2.4	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	N1110.AB	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated and installed in accordance with the criteria of Section N1110.AB. Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	N1107.AB.2	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	N1104.AB.1 N1102.B.1.1	Ceilings-Min. R-19. Common walls-frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 82

The lower the EnergyPerformance Index, the more efficient the home.

1. New construction or existing	New (From Plans)		9. Wall Types	Insulation	Area
2. Single family or multiple family	Single-family		a. Frame - Wood, Exterior	R=19.0	1869.70 ft ²
3. Number of units, if multiple family	1		b. N/A	R=	ft ²
4. Number of Bedrooms	3		c. N/A	R=	ft ²
5. Is this a worst case?	No		d. N/A	R=	ft ²
6. Conditioned floor area (ft ²)	1542		10. Ceiling Types	Insulation	Area
7. Windows**	Description	Area	a. Under Attic (Vented)	R=30.0	1542.00 ft ²
a. U-Factor:	DbI, U=0.65	201.00 ft ²	b. N/A	R=	ft ²
SHGC:	SHGC=0.35		c. N/A	R=	ft ²
b. U-Factor:	DbI, U=0.55	6.00 ft ²	11. Ducts		
SHGC:	SHGC=0.35		a. Sup: Attic Ret: Attic AH: Garage Sup. R= 6, 308.4 ft ²		
c. U-Factor:	N/A	ft ²	12. Cooling systems		
SHGC:			a. Central Unit	Cap: 30 kBtu/hr	
d. U-Factor:	N/A	ft ²		SEER: 13	
SHGC:			13. Heating systems		
e. U-Factor:	N/A	ft ²	a. Electric Heat Pump	Cap: 30 kBtu/hr	
SHGC:				HSPF: 7.7	
8. Floor Types	Insulation	Area	14. Hot water systems		
a. Slab-On-Grade Edge Insulation	R=0.0	1542.00 ft ²	a. Electric	Cap: 50 gallons	
b. N/A	R=	ft ²		EF: 0.92	
c. N/A	R=	ft ²	b. Conservation features		
			None		
			15. Credits		Pstat

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 Index is only available through the EnergyGauge USA - FlaRes2008 computer program. This is not a Building Energy Rating. If your Index is below 100, your home may qualify for 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 energygauge.com 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.

**Label required by Section 13-104.4.5 of the Florida Building Code, Building, or Section B2.1.1 of Appendix G of the Florida Building Code, Residential, if not DEFAULT.

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

27964
27965CONTRACTOR CatalinaPHONE 386-623-7341

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

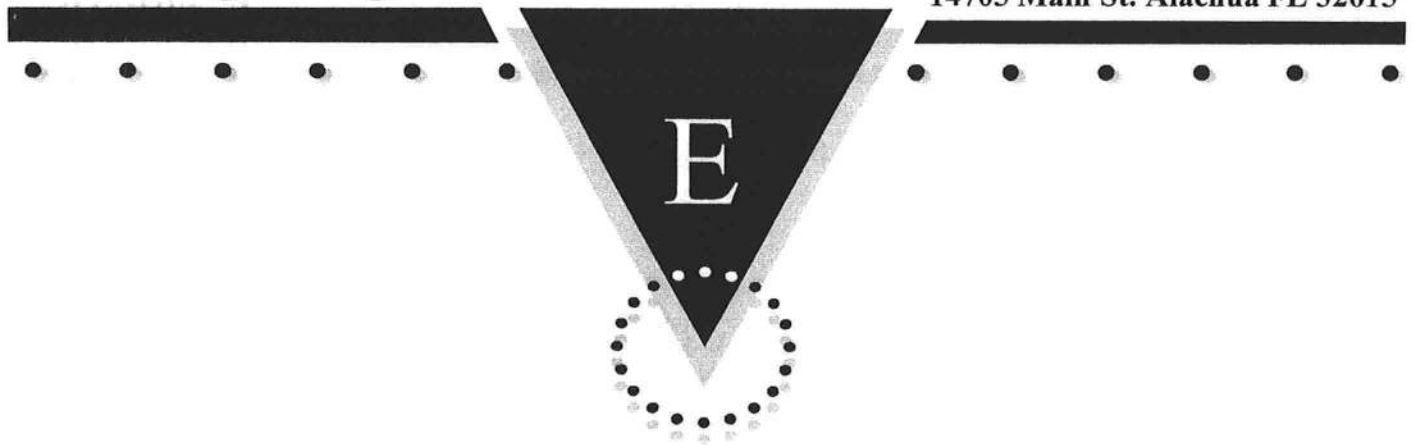
In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide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

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

ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C	Print Name <u>CHART WILSON</u> License #: <u>CAC057886</u>	Signature <u>Chart Wilson</u> Phone #: <u>386-623-0618</u>
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

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

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



Prepared for:

JASON ELIXSON CONSTRUCTION
THE SMITH RESIDENCE
COLUMBIA COUNTY, FLORIDA

By:

Schafer Engineering, LLC

386-462-1340 / 352-375-6329

NO COPIES ARE TO BE PERMITTED



SCHAFER ENGINEERING LLC

Trusses: Pre-engineered with manufacturer's required bracing system installed.

Roof Sheathing: Type: OSB Size: 7/16 Fastener type nails: 8d/.113 Ring Shank
Interior zone spacing: Interior: 6 in. Periphery: 4 in.
Edge and end zone spacing: Interior: 6 in. Periphery: 4 in.

Top Double Pl: Type: Spruce Grade: #1 #2 Size: 2 x 4 Nail spacing: 8 in.

Studs: Wood or Steel: Wood Type: Spruce Grade: #1 #2 Size: 2 x 4
Interior Stud spacing: 16 in. Composite: (yes or no) Y
End Stud spacing: 16 in. Composite: (yes or no) Y

Shear Wall Siding: Type: 7/16 Thickness: 7/16 in.
91 ft. Trans: Fastener: 8d/131 Spacing: Int 8 in. Edge 4 in.
32 ft. Long: Fastener: 8d/131 Spacing: Int 8 in. Edge 4 in.

Allowable Unit Shear on Shear Walls: 314 pounds per linear foot

Unit Shear Transferred from Diaphragm: Trans: 58 Long: 168

Wall Tension Transferred by: Siding nails: 8d/131 @ 4 O.C. edges

Foundation Anchor Bolts: Concrete Strength: 3000 psi Size: 1/2 in. Shape: L
Washer: 2" Embedment: 7 in. Location of first anchor bolt from corner: 8 in.

Anchor Bolts @ 48" O.C. Model: A307 Loc. from corner: 8 in.

Type of Foundation: (1) - #5 rebar continuous required in bond beam.

Floor Slab: 4 in. CMU: Size 8 x 16 in. Height: 24 in. Reinf.: #5 at 72 in.

Monolithic Footing: Depth: 20 in. Bottom Width: 12 in. Reinf.: 2 # 5 bars

Footing: Width: 20 in. Depth: 10 in. Reinforcing: 2 # 5 bars
Interior Footings: 16" W X 10" D

Porch Columns: _____ **Column Fasteners:** _____

Special Comments: Window + Door Headers to be (2) Ply 2x12 Syp^{#2} with 7/16" OSB spacer

NOTE:

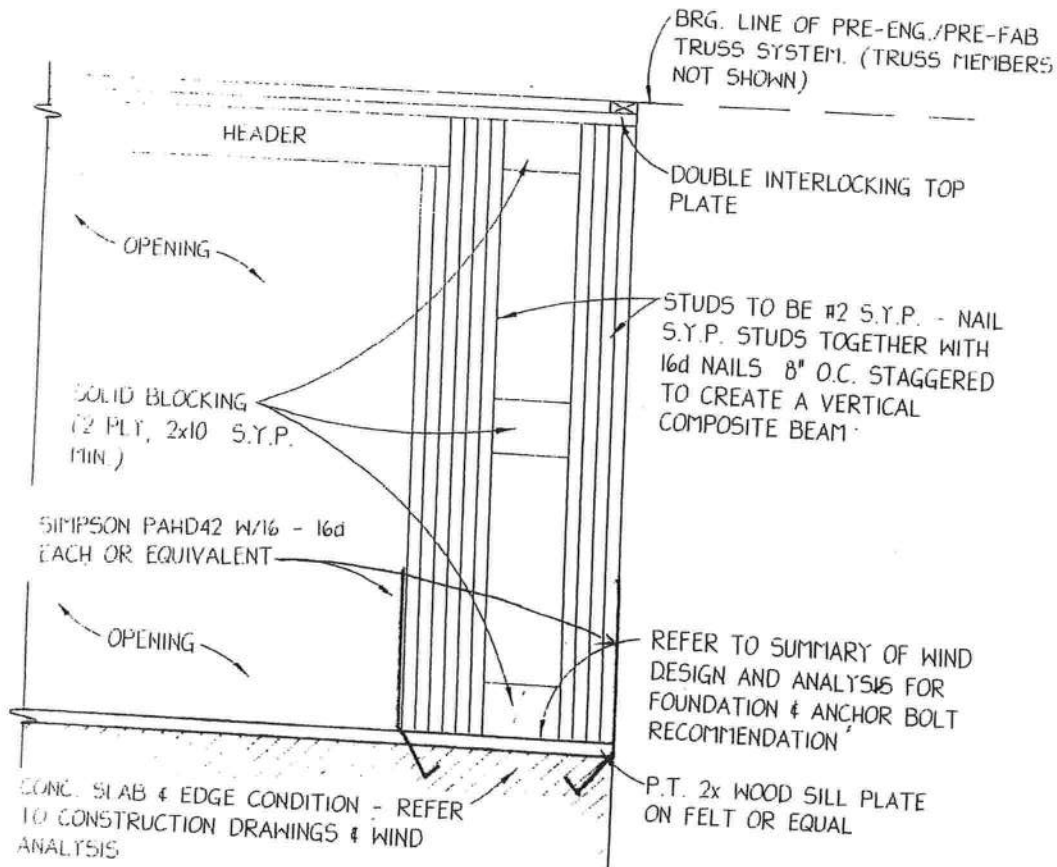
1. Balloon frame ALL gable ends unless this summary is accompanied by Gable End Wall Brace detail.
2. All trusses must bear on exterior walls & porch beams.
3. All walls to be nailed with same nailing pattern as shear walls.
4. This is a wind load only, NOT a structural analysis.
5. This wind load is not valid without a raised, embossed seal.
6. It is assumed that ideal soil conditions and pad preparations are provided.
7. Fiber mesh or WWM may be used in concrete slab.
8. Trusses must be anchored and supported in accordance to the truss engineering.
9. Wind design and analysis valid for one use only \ 2007 FBC \ no copies permitted.
10. The foundation is for minimum design use and may be increased.
11. All headers over 12 feet to be pre-engineered.

B. Sch
6-12-02

48984
7104 NW 42nd Ln
Gainesville, FL

SCHAFER ENGINEERING, LLC

7104 N. W. 42ND LANE
GAINESVILLE, FLORIDA 32606



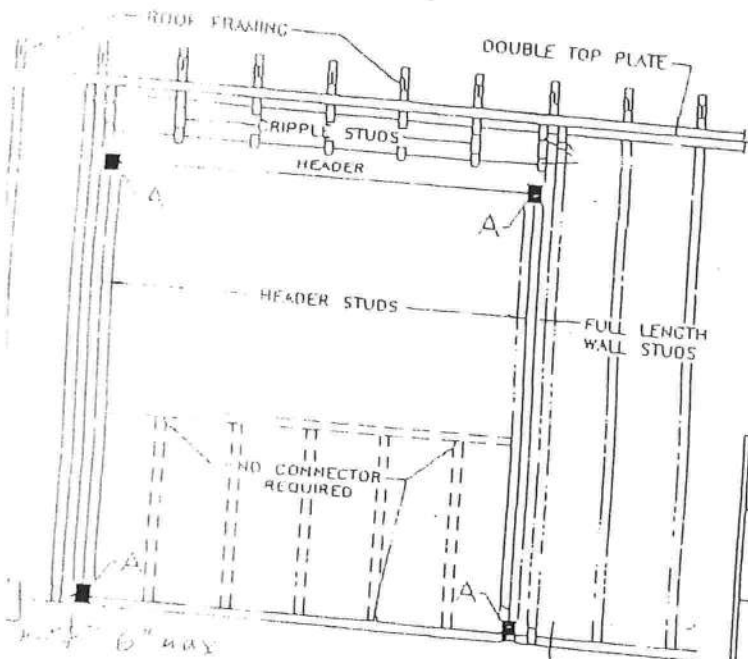
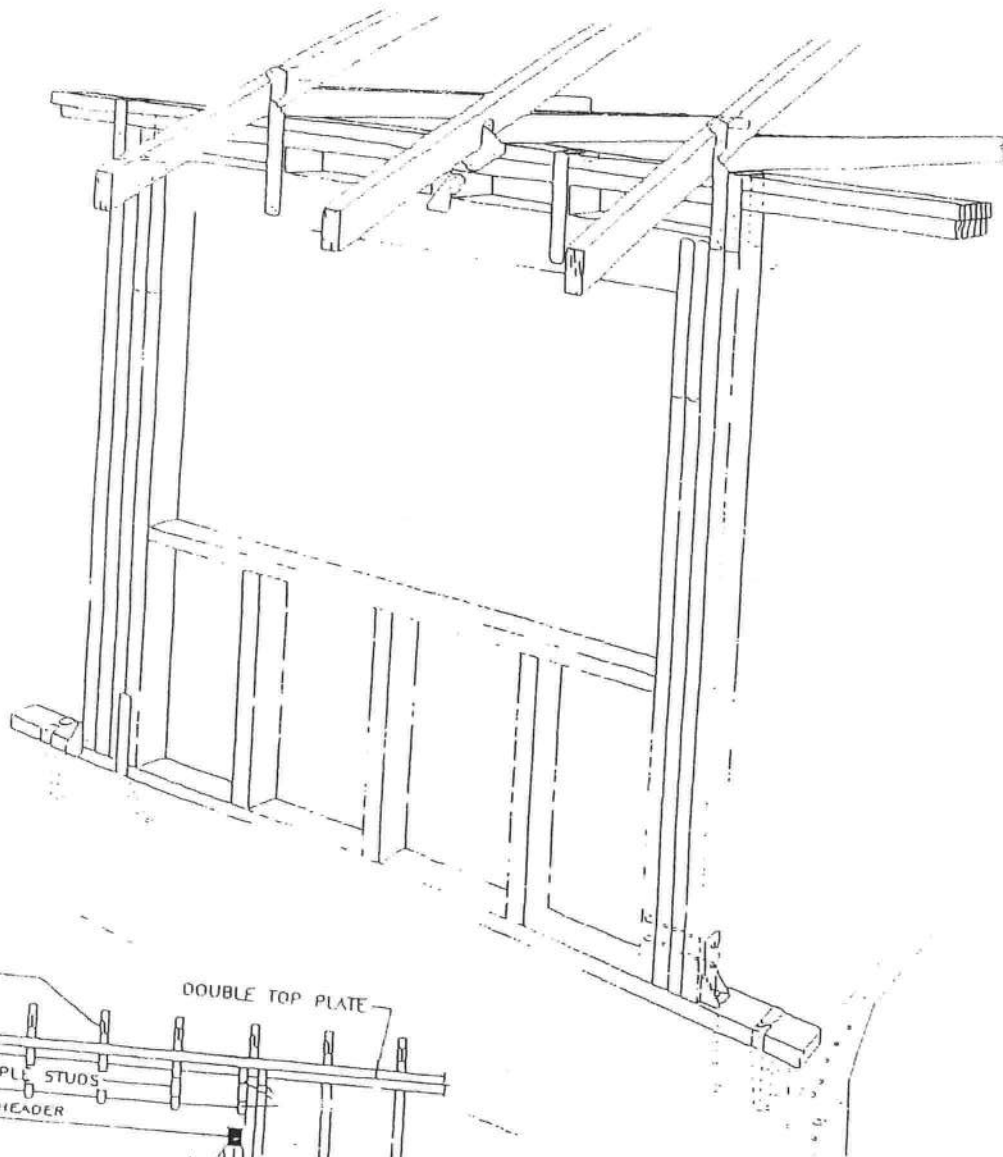
MINIMUM 2'-0" SHEAR WALL SEGMENT

ALLOWABLE EQUIVALENT SHEAR WALL EQUAL TO 1.5 TIMES THE ACTUAL WALL SEGMENT LENGTH. MINIMUM WALL SEGMENT LENGTH OF 2'-0" WHICH EQUATES TO A 3'-0" SHEAR WALL SEGMENT. SEE WINDLOAD ANALYSIS FOR NAIL SIZES AND SPACING ON SHEATHING.

[Signature]

6-12-09

48984
7104 NW 42nd Ln
Gainesville, FL



		Maximum Header Span (ft)					
		3'	6'	9'	12'	15'	18'
		Number of Header Studs Supporting End of Header					
		1	1	2	2	2	2
		Number of Full Length Studs at Each End of Header					
Unsupported Wall Height	12 in.	2	2	3	3	3	3
	16 in.	2	2	3	3	3	3
	24 in.	1	2	2	2	2	2
greater than 10'	12 in.	2	2	3	4	5	5
	16 in.	2	2	3	3	4	4
	24 in.	1	2	2	2	3	3

Total each truss uplift on the header divide by 2 for header anchorage

TIE-DOWN TABLES

HEADERS				
Uplift Force Lbs	Top Connector **	Rating Lbs	Bottom Connector **	Rating Lbs
to 455	LSTA9	725	H3	455
to 910	LSTA12	905	2-H3	910
to 1265	LSTA18	1265	LTT19	1350
to 1750	2-LSTA12	1810	LTT20	1750
to 2530	2-LSTA18	2530	HD2A-2.5	2565
to 2865	3-LSTA18	3255	HD2A-3.5	2865
to 3700	3-LSTA24	3880	HD5A-3	3700
Total uplift for each truss resting on the header and divide by 2 to determine the uplift force. Use proper bolt anchors sufficient to support required load.				

TRUSSES/GIRDERS		
Uplift Force Lbs	Top Connector **	Bottom Connector **
to 500	H2.5A	N/A
501-1049	H10	N/A
1050-1350	TS22	LTT19
1351-1750	2-TS22	LTT20
1751-2570	2-TS22	HD2A
2571-3665	3-TS22	HD5A
3666-5260	2-MST148	HTT22
5261-8300	2-MST48	HD10A
Two 12d common toenails are required per truss/rafter per bearing point into plate. Use proper bolt anchors. Strap rafters to truss or at each end with minimum uplift resistance of 450# each end. Strap ridge beam at each end with minimum uplift resistance of 1000#. It is the contractors' responsibility to provide a continuous load path from truss/rafter/ridge beam to foundation.		

	Top Connector **	Rating Lbs	Bottom Connector **	Rating
BEAM SEATS	LSTA18*	1200	LTT19*	1250
POSTS	2-LSTA18	2400	ABU44	2300
*or per truss engineering Use proper bolt anchors All beams to be sheathed or strapped to Double Top Plate when applicable.				

CRIPPLES Sheathing nailing alone adequate w/8d nails @ 3" O.C.

STUDS
Wall sheathing nailing Adequate exterior walls bottom w/8d nails.
Use SP1 & SP2 @32" O.C. on all interior non-sheathed bearing walls.
Interior anchor bolts to be 1/2" x 8" A307 or 1/2" x 7" wedge anchor or equivalent.

** Equivalent Simpson hardware, or other manufacturer, may be substituted for any of the hardware specified on this page as long as it meets the required load capacities/uplift resistance.

NOTE:

1. For nailing into SPF members, multiply table values by .86
2. See truss engineering for anchor tie-down values.

ASCE 7-05

User Input Data		
Structure Type	Building	
Basic Wind Speed (V)	110	mph
Structural Category	II	
Exposure	B	
Struc Nat Frequency (n1)	1	Hz
Slope of Roof (Theta)	26.6	Deg
Type of Roof	Hipped	
Eave Height (Eht)	8.00	ft
Ridge Height (Rht)	19.67	ft
Mean Roof Height (Ht)	14.33	ft
Width Perp. to Wind (B)	46.67	ft
Width Parallel to Wind (L)	50.50	ft
Damping Ratio (beta)	0.01	

Red values should be changed only through "Main Menu"

Calculated Parameters	
Type of Structure	
Height/Least Horizontal Dim	0.31
Flexible Structure	No

Calculated Parameters		
Importance Factor	1	
Hurricane Prone Region (V>100 mph)		
Table C6-4 Values		
Alpha =	7.000	
zg =	1200.000	
At =	0.143	
Bt =	0.840	
Am =	0.250	
Bm =	0.450	
Cc =	0.300	
I =	320.00	ft
Epsilon =	0.333	
Zmin =	30.00	ft

Gust Factor Category I: Rigid Structures - Simplified Method			
Gust1	For rigid structures (Nat Freq > 1 Hz) use 0.85	0.85	
Gust Factor Category II: Rigid Structures - Complete Analysis			
Zm	Zmin	30.00	ft
lzm	$Cc * (33/z)^{0.167}$	0.3048	
Lzm	$I * (zm/33)^{Epsilon}$	309.99	ft
Q	$(1/(1+0.63*((B+Ht)/Lzm)^{0.63}))^{0.5}$	0.9031	
Gust2	$0.925 * ((1+1.7 * lzm * 3.4 * Q)/(1+1.7 * 3.4 * lzm))$	0.8678	
Gust Factor Category III: Flexible or Dynamically Sensitive Structures			
Vhref	$V * (5280/3600)$	161.33	ft/s
Vzm	$bm * (zm/33)^{Am} * Vhref$	70.89	ft/s
NF1	$NatFreq * Lzm / Vzm$	4.37	Hz
Rn	$(7.47 * NF1) / (1 + 10.302 * NF1)^{1.667}$	0.0552	
Nh	$4.6 * NatFreq * Ht / Vzm$	0.93	
Nb	$4.6 * NatFreq * B / Vzm$	3.03	
Nd	$15.4 * NatFreq * Depth / Vzm$	10.97	
Rh	$1 / Nh - (1 / (2 * Nh^2) * (1 - Exp(-2 * Nh)))$	0.5872	
Rb	$1 / Nb - (1 / (2 * Nb^2) * (1 - Exp(-2 * Nb)))$	0.2758	
Rd	$1 / Nd - (1 / (2 * Nd^2) * (1 - Exp(-2 * Nd)))$	0.0870	
RR	$((1/Beta) * Rn * Rh * Rb * (0.53 + 0.47 * Rd))^{0.5}$	0.7143	
gg	$+(2 * LN(3600 * n1))^{0.5} + 0.577 / (2 * LN(3600 * n1))^{0.5}$	4.19	
Gust3	$0.925 * ((1 + 1.7 * lzm * (3.4^2 * Q^2 + GG^2 * RR^2)^{0.5}) / (1 + 1.7 * 3.4 * lzm))$	1.08	

Gust Factor Summary			
Main Wind-force resisting system:		Components and Cladding:	
Gust Factor Category:	I	Gust Factor Category:	I
Gust Factor (G)	0.87	Gust Factor (G)	0.87

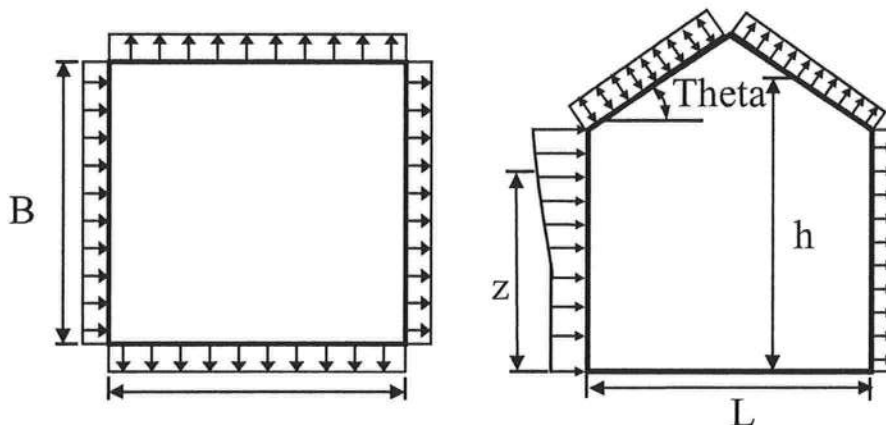
ASCE 7-05

6.5.12.2.1 Design Wind Pressure - Buildings of All Heights (Non-flexible)

Elev. ft	Kz	Kzt	Kd	qz lb/ft ²	Pressure (lb/ft ²)	
					Windward Wall*	
			1.00		+GCpi	-GCpi
19.67	0.70	1.00	1.00	21.70	11.86	18.27
15	0.70	1.00	1.00	21.70	11.86	18.27

Figure 6-3 - External Pressure Coefficients, Cp

Loads on Main Wind-Force Resisting Systems



Variable	Formula	Value	Units
Kh	$2.01 \cdot (15/z_g)^{2/\alpha}$	0.57	
Kht	Topographic factor (Fig 6-2)	1.00	
Qh	$.00256 \cdot (V)^2 \cdot \text{ImpFac} \cdot K_h \cdot K_{ht} \cdot K_d$	17.80	psf

Wall Pressure Coefficients, Cp	
Surface	Cp
Windward Wall (See Figure 6.5.12.2.1 for Pressures)	0.80

Roof Pressure Coefficients, Cp	
Roof Area (sq. ft.)	-
Reduction Factor	1.00

Description	Cp	Pressure (psf)	
		+GCpi	-GCpi
Leeward Walls (Wind Dir Parallel to 46.67 ft wall)	-0.48	-10.68	-4.27
Leeward Walls (Wind Dir Parallel to 50.5 ft wall)	-0.50	-10.93	-4.52
Side Walls	-0.70	-14.02	-7.61
Roof - Normal to Ridge (Theta ≥ 10)			
Windward - Max Negative	-0.21	-6.44	-0.03
Windward - Max Positive	0.29	1.22	7.63
Leeward Normal to Ridge	-0.60	-12.47	-6.06
Overhang Top	-0.21	-3.23	-3.23
Overhang Bottom	0.80	0.69	0.69
Roof - Parallel to Ridge (All Theta)			
Dist from Windward Edge: 0 ft to 7.165 ft	-0.90	-17.11	-10.70
Dist from Windward Edge: 7.165 ft to 14.33 ft	-0.90	-17.11	-10.70
Dist from Windward Edge: 14.33 ft to 28.66 ft	-0.50	-10.93	-4.52

ASCE 7-05

Dist from Windward Edge: > 28.66 ft	-0.30	-7.84	-1.43
-------------------------------------	-------	-------	-------

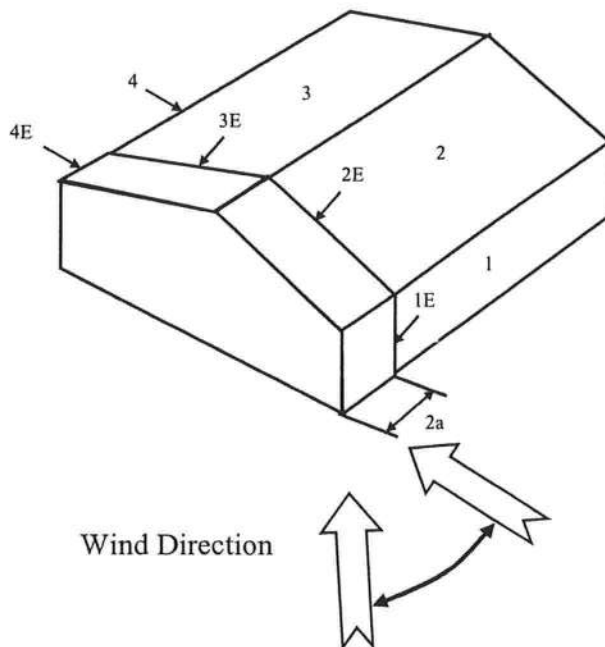
* Horizontal distance from windward edge

Figure 6-4 - External Pressure Coefficients, GCpf

Loads on Main Wind-Force Resisting Systems w/ Ht ≤ 60 ft

$$\begin{aligned}
 K_h &= 2.01 \cdot (15/z_g)^{2/\alpha} &= & 0.57 \\
 K_{ht} &= \text{Topographic factor (Fig 6-2)} &= & 1.00 \\
 Q_h &= 0.00256 \cdot (V)^2 \cdot \text{ImpFac} \cdot K_h \cdot K_{ht} \cdot K_d &= & 17.80
 \end{aligned}$$

Case A						
Surface	GCpf	+GCpi	-GCpi	qh (psf)	Min P (psf)	Max P (psf)
1	0.55	0.18	-0.18	21.70	8.03	15.84
2	-0.10	0.18	-0.18	21.70	-5.99	1.82
3	-0.45	0.18	-0.18	21.70	-13.61	-5.79
4	-0.39	0.18	-0.18	21.70	-12.38	-4.57
5	0.00	0.18	-0.18	21.70	-3.91	3.91
6	0.00	0.18	-0.18	21.70	-3.91	3.91
1E	0.73	0.18	-0.18	21.70	11.88	19.69
2E	-0.19	0.18	-0.18	21.70	-7.93	-0.12
3E	-0.58	0.18	-0.18	21.70	-16.59	-8.78
4E	-0.53	0.18	-0.18	21.70	-15.50	-7.69
5E	0.00	0.18	-0.18	21.70	-3.91	3.91
6E	0.00	0.18	-0.18	21.70	-3.91	3.91

* $p = q_h \cdot (GC_{pf} - GC_{pi})$ 

ASCE 7-05

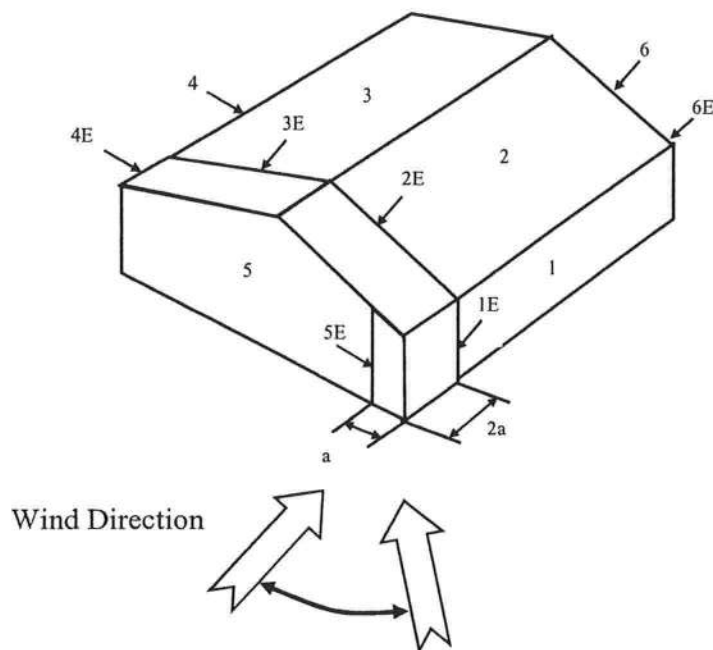
Figure 6-4 - External Pressure Coefficients, GCpf

Loads on Main Wind-Force Resisting Systems w/ Ht ≤ 60 ft

$$\begin{aligned}
 K_h &= 2.01 \cdot (15/z_g)^{2/\alpha} &= & 0.57 \\
 K_{ht} &= \text{Topographic factor (Fig 6-2)} &= & 1.00 \\
 Q_h &= 0.00256 \cdot (V)^2 \cdot \text{ImpFac} \cdot K_h \cdot K_{ht} \cdot K_d &= & 17.80
 \end{aligned}$$

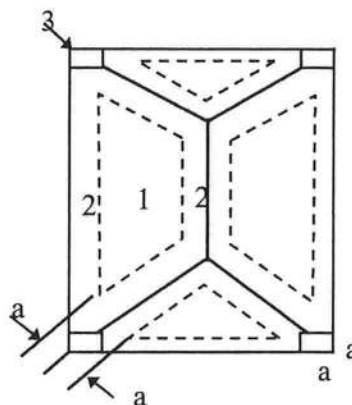
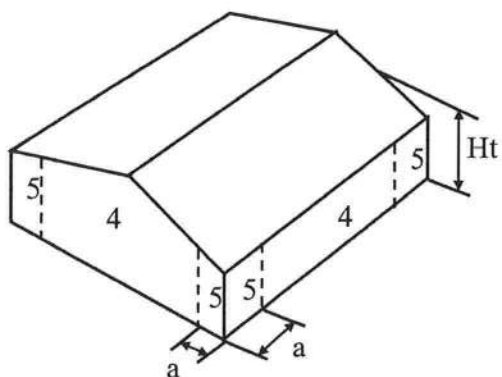
Case B						
Surface	GCpf	+GCpi	-GCpi	qh (psf)	Min P (psf)	Max P (psf)
1	-0.45	0.18	-0.18	21.70	-13.67	-5.86
2	-0.69	0.18	-0.18	21.70	-18.88	-11.07
3	-0.37	0.18	-0.18	21.70	-11.94	-4.12
4	-0.45	0.18	-0.18	21.70	-13.67	-5.86
5	0.40	0.18	-0.18	21.70	4.77	12.59
6	-0.29	0.18	-0.18	21.70	-10.20	-2.39
1E	-0.48	0.18	-0.18	21.70	-14.32	-6.51
2E	-1.07	0.18	-0.18	21.70	-27.13	-19.31
3E	-0.53	0.18	-0.18	21.70	-15.41	-7.60
4E	-0.48	0.18	-0.18	21.70	-14.32	-6.51
5E	0.61	0.18	-0.18	21.70	9.33	17.14
6E	-0.43	0.18	-0.18	21.70	-13.24	-5.43

$$* p = q_h * (GCpf - GCpi)$$

**Figure 6-5 - External Pressure Coefficients, GCp**

Loads on Components and Cladding for Buildings w/ Ht ≤ 60 ft

ASCE 7-05



Hipped Roof

 $10 < \text{Theta} \leq 30$
$$a = 4.667$$
 \Rightarrow

4.67 ft[illegible]

Note: * Enter Zone 1 through 5, or 1H through 3H for overhangs.

Table 6-7 Internal Pressure Coefficients for Buildings, G_{cpi}

Condition	Gcpi	
	Max +	Max -

ASCE 7-05

Open Buildings	0.00	0.00
Partially Enclosed Buildings	0.55	-0.55
Enclosed Buildings	0.18	-0.18
Enclosed Buildings	0.18	-0.18

Table 6-8 External Pressure Coefficients for Arched Roofs, C_p

r (Rise-to-Span Ratio) = 0.3

Condition	Variable	C_p		
		Windward Quarter	Center Half	Leeward Quarter
Roof on Elevated Structure	C_p	0.13	-1	-0.5
	P (+GCpi) - psf	-1.27	-18.65	-10.93
	P (-GCpi) - psf	5.14	-12.24	-4.52
Roof Springing from Ground	C_p	0.42	-1	-0.5
	P (+GCpi) - psf	3.28	-18.65	-10.93
	P (-GCpi) - psf	3.28	-18.65	-10.93

Table 6-9 Force Coefficients for Monoslope Roofs over Open Buildings, C_f

Variable	Description	Value	
L	Roof dimension normal to wind direction	50.50	ft
B	Roof dimension parallel to wind direction	46.67	ft
L/B	Ratio of L to B	1.082	
Theta	Slope of Roof	26.6	Deg
C_f	Force Coefficient	1.18	
X	Distance to center of pressure from windward edge	0.41	ft



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

**MINIMUM PLAN REQUIREMENTS FOR THE
FLORIDA BUILDING CODE RESIDENTIAL 2007
ONE (1) AND TWO (2) FAMILY DWELLINGS**

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current 2007 FLORIDA BUILDING CODES RESIDENTIAL. ALL PLANS OR DRAWINGS SHALL PROVIDE CALCULATIONS AND DETAILS THAT HAVE THE SEAL AND SIGNATURE OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE STATE OF FLORIDA, OR ALTERNATE METHODOLOGIES, APPROVED BY THE STATE OF FLORIDA BUILDING COMMISSION FOR ONE-AND-TWO FAMILY DWELLINGS.

FOR DESIGN PURPOSES THE FOLLOWING BASIC WIND SPEEDS ARE PER FIGURE R301.2(4) of the FLORIDA BUILDING CODES RESIDENTIAL (Florida Wind speed map) SHALL BE USED.

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

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

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL	Items to Include- Each Box shall be Circled as Applicable
---	--

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

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

Site Plan information including:

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

Wind-load Engineering Summary, calculations and any details required

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

Elevations Drawing including:

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

Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	/		
21	Raised floor surfaces located more than 30 inches above the floor or grade			/
22	All exterior and interior shear walls indicated	/		
23	Shear wall opening shown (Windows, Doors and Garage doors)	/		
24	Emergency escape and rescue opening shown in each bedroom (net clear opening shown)	/		
25	Safety glazing of glass where needed			/
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 of FBCR)			/
27	Stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails (see FBCR SECTION 311)			/
28	Identify accessibility of bathroom (see FBCR SECTION 322)	/		

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

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable
---	--	--

FBCR 403: Foundation Plans

		YES	NO	N/A
29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	/		
30	All posts and/or column footing including size and reinforcing	/		
31	Any special support required by soil analysis such as piling.			/
32	Assumed load-bearing value of soil _____ Pound Per Square Foot			/
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type)			/

FBCR 506: CONCRETE SLAB ON GRADE

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

FBCR 320: PROTECTION AGAINST TERMITES

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

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

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

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

Floor Framing System: First and/or second story

39	Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer			/
40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers			/
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers			/
42	Attachment of joist to girder			/
43	Wind load requirements where applicable			/
44	Show required under-floor crawl space			/
45	Show required amount of ventilation opening for under-floor spaces			/
46	Show required covering of ventilation opening			/
47	Show the required access opening to access to under-floor spaces			/
	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges &			/

48	intermediate of the areas structural panel sheathing			/
49	Show Draftstopping, Fire caulking and Fire blocking			/
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309			/
51	Provide live and dead load rating of floor framing systems (psf).			/

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A

52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	/		
53	Fastener schedule for structural members per table FBCR 602.3 are to be shown	/		
54	Show Wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing	/		
55	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems	/		
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FBCR Table 502.5 (1)	/		
57	Indicate where pressure treated wood will be placed	/		
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	/		
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	/		

FBCR :ROOF SYSTEMS:

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

FBCR 802:Conventional Roof Framing Layout

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

FBCR Table 602,3(2) & FBCR 803 ROOF SHEATHING

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

FBCR ROOF ASSEMBLIES FRC Chapter 9

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

FBCR Chapter 11 Energy Efficiency Code for residential building

Residential construction shall comply with this code by using the following compliance methods in the FBCR chapter 11 Residential buildings compliance methods. *Two of the required forms are to be submitted, showing dimensions condition area equal to the total condition living space area*

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

HVAC information

77	Submit two copies of a Manual J sizing equipment or equivalent computation study	/		
78	Exhaust fans locations in bathrooms	/		
79	Show clothes dryer route and total run of exhaust duct	/		

Plumbing Fixture layout shown

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

Private Potable Water

82	Pump motor horse power			/
83	Reservoir pressure tank gallon capacity			/
84	Rating of cycle stop valve if used			/

Electrical layout shown including

85	Switches, outlets, receptacles, lighting and all required GFCI outlets identified	/		
86	Ceiling fans	/		
87	Smoke detectors & Carbon dioxide detectors	/		
88	Service panel, sub-panel, location(s) and total ampere ratings	/		
89	On the electrical plans identify the electrical service overcurrent protection device for the main electrical service. This device shall be installed on the exterior of structures to serve as a disconnecting means for the utility company electrical service. Conductors used from the exterior disconnecting means to a panel or sub panel shall have four-wire conductors, of which one conductor shall be used as an equipment ground. Indicate if the utility company service entrance cable will be of the overhead or underground type.	/		

90	Appliances and HVAC equipment and disconnects	<input checked="" type="checkbox"/>		
91	Arc Fault Circuits (AFCI) in bedrooms	<input checked="" type="checkbox"/>		

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

Notice Of Commencement

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

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable
---	--	--

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

		YES	NO	N/A
92	Building Permit Application A current Building Permit Application form is to be completed and submitted for all residential projects	<input checked="" type="checkbox"/>		
93	Parcel Number The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested	<input checked="" type="checkbox"/>		
94	Environmental Health Permit or Sewer Tap Approval A copy of a approved Columbia County Environmental Health (386) 758-1058	<input checked="" type="checkbox"/>		
95	City of Lake City A permit showing an approved waste water sewer tap	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
96	Toilet facilities shall be provided for all construction sites	<input checked="" type="checkbox"/>		
97	Town of Fort White (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.			<input checked="" type="checkbox"/>
98	Flood Information: All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting a application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.5.2 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.5.3 of the Columbia County Land Development Regulations			<input checked="" type="checkbox"/>
99	CERTIFIED FINISHED FLOOR ELEVATIONS will be required on any project where the base flood elevation (100 year flood) has been established			<input checked="" type="checkbox"/>
100	A development permit will also be required. Development permit cost is \$50.00			<input checked="" type="checkbox"/>
101	Driveway Connection: If the property does not have an existing access to a public road, then an application for a culvert permit (\$25.00) must be made. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$50.00). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.		<input checked="" type="checkbox"/>	
102	911 Address: If the project is located in an area where a 911 address has not been issued, then application for a 911 address must be applied for and received through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125	<input checked="" type="checkbox"/>		

Section R101.2.1 of the Florida Building Code Residential:

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

Section 105 of the Florida Building Code defines the:

Time limitation of application.

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

Single-family residential dwelling.

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

Permit intent.

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

If work has commenced.

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

New Permit.

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

Work Shall Be:

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

The Fee:

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

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

PRODUCT APPROVAL SPECIFICATION SHEET

Location: _____

Project Name: _____

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

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
1. Swinging			FL 4242 R
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			FL 5519
6. Other			
B. WINDOWS			
1. Single hung			FL 9353.1
2. Horizontal Slider			FL 5451
3. Casement			
4. Double Hung			
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11 Dual Action			
12. Other			
C. PANEL WALL			
1. Siding			FL 889-R
2. Soffits			FL 4899
3. EIFS			FL 4905
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			FL 3820 R1
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles			FL 586 R2
2. Underlayments			FL 1814 R1
3. Roofing Fasteners			
4. Non-structural Metal Rf			
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives – Coatings			FL 1960 R1
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other			
E. SHUTTERS			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
F. SKYLIGHTS			
1. Skylight			FL 451 R1
2. Other			
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor			FL 474 R1
2. Truss plates			
3. Engineered lumber			FL 1008 R1
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
H. NEW EXTERIOR ENVELOPE PRODUCTS			
1.			
2.			

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

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

John Smith
Contractor or Contractor's Authorized Agent Signature

John Smith
Print Name

Date

GERMAN CRN(CA)NEN
OLD

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 23-4S-16-03113-105

Building permit No. 000027964

Use Classification SFD/UTILITY

Fire: 38.52

Permit Holder LOUIS R. SCHWARTZ

Waste: 100.50

Owner of Building WEISLEDER ASSOCIATES, INC.

Total: 139.02

Location: 224 SW WISE DRIVE

Date: 04/05/2010

Harry Dick

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)





*Land Surveyors
and Mappers*

BRITT SURVEYING & ASSOCIATES

830 West Duval Street • Lake City, FL 32055
Phone (386) 752-7163 • Fax (386) 752-5573

07/30/09

L-20010

To Whom It May Concern:

C/o: John Smith

Re: Lot 5 in Block A of Wise Estates / 23-4S-16-03113-105

Permit No. 000027964

The elevation of the proposed residence's finished floor is 99.53 feet. The minimum finished floor elevation is 98.50 feet as per the plat of record. The highest adjacent grade is 97.6 feet. The lowest adjacent grade is 97.3 feet. The elevations shown hereon are based on NGVD 29 Datum.

L. Scott Britt
PLS #5757

OK
BLK
30/7/09



- Engineering
 - Geotechnical
 - Environmental
- Laboratories

Cal-Tech Testing, Inc.

P.O. Box 1625 • Lake City, FL 32056-1625 • Tel(386)755-3633 • Fax(386)752-5456
4784 Rosselle St., Jacksonville, FL 32254 • Tel(904)381-8901 • Fax(904)381-8902

27964

REPORT OF IN-PLACE DENSITY TEST

JOB NO.: 09-00294-01

DATE TESTED: 7/30/09

DATE REPORTED: 7/30/09

PROJECT:	Lot 5, Wise Estates, Lake City
CLIENT:	Catalina Caststone Creations, 377 SW Maudlin Ave, Lake City, FL 32024
GENERAL CONTRACTOR:	Catalina Caststone Creations
EARTHWORK CONTRACTOR:	Catalina Caststone Creations
INSPECTOR:	Pam Geiger
ASTM METHOD	SOIL USE
(D-2922) Nuclear	BUILDING FILL
SPECIFIED REQUIREMENTS: 95%	

TEST NO.	TEST LOCATION	TEST DEPTH	WET DENSITY (lb/ft ³)	MOISTURE PERCENT	DRY DENSITY (lb/ft ³)	PROCTOR TEST NO.	PROCTOR VALUE	MAXIMUM DENSITY
1	20' West x 15' south of NE Corner	12"	102.8	1.9	100.9	09-295-1	102.0	99%
2	Approx. Center of Pad	12"	105.5	3.0	102.4	09-295-1	102.0	100%
3	10' East x 8' North of SW Corner	12"	102.9	6.5	96.6	09-295-1	102.0	95%
4	15' East x 6' South of NW Corner	12"	104.4	7.3	97.3	09-295-1	102.0	95%

REMARKS: The Above Tests Meet Specified Requirements.

PROCTORS				
PROCTOR NO.	SOIL DESCRIPTION	MAXIMUM DRY UNIT WEIGHT (lb/ft ³)	OPT. MOIST.	TYPE
09-295-1		102.0	0.0	MODIFIED (ASTM D-1557)

Respectfully Submitted,
CAL-TECH TESTING, INC.

Pending

Linda M. Creamer
President - CEO

ee

Reviewed By:

Pending

Date:
Licensed, Florida No: 57842

The test results presented in this report are specific only to the samples tested at the time of testing. The tests were performed in accordance with generally accepted methods and standards. Since material conditions can vary between test locations and change with time, sound judgement should be exercised with regard to the use and interpretation of the data.



• Engineering
• Geotechnical
• Environmental
Laboratories

Cal-Tech Testing, Inc.

P.O. Box 1625 • Lake City, FL 32056-1625 • Tel(386)755-3633 • Fax(386)752-5456

4784 Rosselle St., Jacksonville, FL 32254 • Tel(904)381-8901 • Fax(904)381-8902

JOB NO.: 09-00295-01

DATE TESTED: 7/28/09

DATE REPORTED: 7/30/09

REPORT OF IN-PLACE DENSITY TEST

PROJECT:	Lot 9 Megan Glenn, Lake City
CLIENT:	Catalina Caststone Creations, 377 SW Mauldin Ave. Lake City, FL 32024
GENERAL CONTRACTOR:	Catalina Caststone Creations
EARTHWORK CONTRACTOR:	Catalina Caststone Creations
INSPECTOR:	Louis Roberts
ASTM METHOD (D-2922) Nuclear	SOIL USE BUILDING FILL
SPECIFIED REQUIREMENTS: 95%	

TEST NO.	TEST LOCATION	TEST DEPTH	WET DENSITY (lb/ft ³)	MOISTURE PERCENT	DRY DENSITY (lb/ft ³)	PROCTOR TEST NO.	PROCTOR VALUE	MAXIMUM DENSITY
1	NW Corner of Building 10' East x 10' South, Lift 1	12"	105.2	2.5	102.6	2	102.0	101%
2	NE Corner of Building 32' West x 10' South, Lift 1	12"	102.8	2.1	100.7	2	102.0	99%
3	SW Corner of Building 25' North x 10' East, Lift 1	12"	100.8	2.2	98.6	2	102.0	97%

REMARKS: The Above Tests Meet Specified Requirements.

PROCTORS				
PROCTOR NO.	SOIL DESCRIPTION	MAXIMUM DRY UNIT WEIGHT (lb/ft ³)	OPT. MOIST.	TYPE
2		102.0	0.0	MODIFIED (ASTM D-1557)

Respectfully Submitted,
CAL-TECH TESTING, INC.

Reviewed By:

Pending

Linda M. Creamer
President - CEO

ee

Date:
Licensed, Florida No: 57842

The test results presented in this report are specific only to the samples tested at the time of testing. The tests were performed in accordance with generally accepted methods and standards. Since material conditions can vary between test locations and change with time, sound judgement should be exercised with regard to the use and interpretation of the data.

SUBCONTRACTOR VERIFICATION FORM

Permit #

APPLICATION NUMBER

27964/wise

CONTRACTOR

Catalina Castore

786

PHONE 295-9296

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

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

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

ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name <u>STEPHEN MAILER</u> License #: <u>CCC1327323</u>	Signature <u>[Signature]</u> Phone #: <u>561-722-5988</u>
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

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

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