| DATE 06/02/2010 Columbia County Bu This Permit Must Be Prominently Posted of | | ·• | PERMIT |
|--|--|--|--|
| APPLICANT KIMMY EDGLEY | | | 000028618 |
| ADDRESS 590 SW ARLINGTON BLVD.,STE. 113 | PHONE LAKE CITY | 386.752.0180 | EI 22025 |
| OWNER ELMAR & TERE KRUZA | PHONE | 440.338.3476 | FL 32025 |
| ADDRESS 235 SW WINGS TERRACE | LAKE CITY | 440.330.3470 | FL 32025 |
| CONTRACTOR DOUG EDGLEY | PHONE | 440.338.3476 | 32723 |
| LOCATION OF PROPERTY 47-S TO BURNETT RD,TR TO H | —— OLLY,TL GO AROUND | CURVE,TL TO | |
| WINGS TERRACE TO END ON I | | | |
| TYPE DEVELOPMENT HANGAR/UTILITY EST | TIMATED COST OF COM | ISTRUCTION | 85000.00 |
| HEATED FLOOR AREA TOTAL ARE | Α | HEIGHT | STORIES 1 |
| FOUNDATION CONC WALLS FRAMED R | OOF PITCH 4'12 | FLO | OR 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 PERM | IT NO. | |
| PARCEL ID 07-4S-17-08106-022 SUBDIVISION | COUNTRY LANDI | NGS | |
| LOT 22 BLOCK PHASE UNIT | ТОТА | L ACRES 0.84 | 1 |
| R282811326 | Linus | Eda. | |
| Culvert Permit No. Culvert Waiver Contractor's License Num | ber A | pplicant/Owner/C | Contractor |
| PRIVATE 10-0174 BLK | н | | N |
| Driveway Connection Septic Tank Number LU & Zoning | g checked by Appr | oved for Issuance | New Resident |
| COMMENTS: ACCESSORY USE ZONING & FLOOD CHARGED O | ON ORIGINAL SFD PERI | MIT # 28617. | |
| NOC ON FILE. | | | |
| | | Check # or Cas | sh 1990 |
| FOR BUILDING & ZONIN | G DEPARTMENT | ONLY | (footer/Slab) |
| Temporary Power Foundation | | Monolithic | (rocerolad) |
| date/app. by | date/app. by | Q | date/app. by |
| Under slab rough-in plumbing Slab | | Sheathing/Na | ailing |
| Framing Insulation | date/app. by | | date/app. by |
| Insulation | /app. by | | |
| Rough-in plumbing above slab and below wood floor | | trical rough-in | |
| Heat & Air Duct Peri. beam (Lintel) | | | |
| date/app. by | te/app. by | D. 1 | date/app. by |
| | | Pool | 3.3 (|
| Permanent power C.O. Final | date/app. by | Pool | date/app. by |
| Pump pole date/app. by date/app. by Dump pole Utility Pole M/H tie do | date/app. by | Culvert | 3.3 (|
| Pump pole date/app. by date/app. by Dtility Pole date/app. by date/app. by date/app. by | date/app. by | Culvertand plumbing | date/app. by |
| Pump pole date/app. by date/app. by Dump pole Utility Pole M/H tie do | date/app. by | Culvert | date/app. by |
| Pump pole date/app. by date/app. by date/app. by M/H tie down date/app. by Reconnection RV | date/app. by ate/app. by wns, blocking, electricity date/app. by | Culvertand plumbing | date/app. by date/app. by date/app. by date/app. by |
| Pump pole date/app. by date/app. by | date/app. by ate/app. by wns, blocking, electricity date/app. by \$ 0.00 | Culvert and plumbing Re-roof _ SURCHARGE F | date/app. by date/app. by date/app. by date/app. by |
| Pump pole date/app. by date/app. by | date/app. by ate/app. by wns, blocking, electricity date/app. by \$ 0.00 FIRE FEE \$ 0.00 | Culvert Re-roof SURCHARGE F | date/app. by date/app. by date/app. by date/app. by |

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. Notice of Prevention for Subterranean Termites

Notice of Prevention for Subterranean Termites

(As required by Florida Building Code (FBC) 104.2.6)

(As required by Florida Building Code (FBC) 104.2.6)

(TS56 U.S. 129 • McALPIN, FLORIDA 32062

(386) 362-3887 • 1-800-771-3887 • Fax: (386) 364-3529

Address of Treatment or LouBlock of Treatment

Time

Product Used

Product Used

Product Used

Product Used

Area treated (square feet)

Stage of treatment (Horizontal, Vertical, Adjoining Slab, retreat of disturbed area)

As per 104-26 • If soil chemical barrier method for Subterranean termite prevention is used.

As per 104-26 • If soil chemical barrier method for Subterranean termite prevention is used.

If this notice is for the final exterior treatment, initial and date this line.

If this notice is for the final exterior treatment, initial and date this line.



COLUMBIA COUNTY, FLORIDA

epartment 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 | |
|---------------------|---------|
| 0/-4S-1/-08106-0ZZ | |
| Building permit No. | |
| NO. UUUUZoo lo | 2000000 |

Permit Holder DOUG EDGLEY

Owner of Building

ELMAR & TERE KRUZA

Location: 235 SW WINGS TERR, LAKE CITY, FL 32025

Date: 11/23/2010

Building Inspector

POST IN A CONSPICUOUS PLACE (Business Places Only)

PICOMER PROPERTY OF THE PROPER



ENGINEERING & TESTING LABORATORY

P.O. Box 1625, Lake City, FL 32056-1625 4784 Rosselle St. • Jacksonville, FL 32254 Lake City • (386) 755-3633

Fax • (386) 752-5456

Jacksonville • (904) 381-8901 Fax • (904) 381-8902



JOB NO.: 10-253
DATE TESTED: 6-28-10

REPORT OF IN-PLACE DENSITY TEST 286/8

| AS ⁻ | TM M | ETHOD: | (D-2922) Nucle | ear | ([| 0-2937) Driv | e Cylinder | 18- | Other |
|-----------------|--|----------------|--------------------|--------------------|----------------|-------------------------|-------------------------|------------------|-----------------|
| PRO | JECT:_ | Konega Res | idence - Aurplano | Hangan | | | 2 × 6 | | Mah |
| | | Dong Edgley | | | | | | | 10.04 |
| GEN | ERAL (| CONTRACTOR: | SAC | EARTHW | ORK COM | NTRACTOR: | SAC | | |
| SOIL | USE (| SEE NOTE): | 1 | SPECIFIC | ATION R | EQUIREMEN | NTS:95° | 10 | |
| TEC | HNICIA | N: C. Day | | | *ta | | | | |
| MOD | MODIFIED (ASTM D-1557): STANDARD (ASTM D-698): | | | | | | | | |
| TEST NO. | , | | TEST CATION | TEST:DEPTHELEVLIFT | PROCTOR NO. | WET DENS. LBS.CU.FT. | DRY DENS. LBS.CU.FT. | MOIST PERCENT | % MAX. DENS. |
| 1 | S.w. | Carner of prod | 15'N x 15'E | 12" | Puit | 119.6 | 108.5 | 10.2 | 103 |
| | | cx. ecenter of | | 12" | Puit | 119.3 | 108.8 | 9.7 | 104 |
| 3 | N.E. | Corner of pao | (15'5 x 15' W | 12 " | Puit | 119.9 | 107.9 | 11.1 | 103 |
| | | | | | | | | | |
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| REMA | ARKS: | | | | | | | | |
| PRO | OCTOR | | | | | | | | , |
| 100 | <u>VO.</u> | | SOIL DESCRIPTION | 0 | | PROCTOR | | T | MOIST. |
| Pi | it | 14n Sand - | Richardson's Suite | | | 105. | 0 | /1, | 0 |
| | | | Survannee Vally | rut | | | | | |
| | | | | | | | | | |

NOTE: 1. Building Fill 2. Trench Backfill 3. Base Course 4. Subbase/Stabilized Subgrade 5. Embankment 6. Subgrade/Natural Soil 7. Other 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 location and change with time, sound judgement should be exercised with regard to the use and interpretation of the data.

See Plans for SFD

| 1 | See PlA | ns don | - StD | | 1,5 | 1 |
|--|------------------|----------------|-------------------|------------------|----------------|-----------------|
| Co | lumbia County I | Building Perr | nit Application | Resd J | 1115+ 6 | |
| For Office Use Only Application # / | | | | | | |
| Zoning Official Chik Date | | | | | | |
| FEMA Map # N/A Elevation | A MFE WA | 4-#River | V/A Plans | Examiner | f D | Date 5-3-10 |
| Comments | | | | | | |
| DNOC DEH DOBED OF PA Site Plan | n 🗆 State Road I | Info o Paren | t Parcel # | | | |
| Dev Permit # a In | Floodway - Le | etter of Auth. | from Contract | or pFW | / Comp. lett | ter |
| IMPACT FEES: EMS | | | | Road/Code | | |
| School | = TOTAL | M/A A | cessory Us | e | | |
| Septic Permit No. 10-0174 | | | | Fax <u>386</u> - | 752-490 | 4 |
| Name Authorized Person Signing Permit | KIMMY EDGI | LEY | | Phone 38 | 6-752-0 | 580 |
| Address 590 SW ARLINGTON BLVD | SUITE 113 | LAKE CIT | Y FL 32025 | 5 | | |
| Owners Name ELMAR & TERE J K | RUZA | | Ph | one 440 | -338-34 | 76 |
| The second like the contract of the second like the second lindicate the second like the second like the second like the secon | | | | | | |
| 911 Address 235 SW WINGS TERR | | | | | | 200 |
| Contractors Name EDGLEY CONSTRU | CTION CO DI | IV of CEE | BAS INCPh | one | -752-05 | 80 |
| Address 590 SW ARLINGTON BLV | D SUITE 113 | 3 LAKE CI | TY FL 3202 | 25 | | |
| Fee Simple Owner Name & Address_EI | MAR & TERE | J KRUZA | | | | |
| | | | | | | |
| Bonding Co. Name & Address N/A | | | | | | |
| Architect/Engineer Name & Address MP | | Y P.A., P | .O. BOX 86 | 68, LAKE | CITY F | L 32056 |
| Mortgage Lenders Name & Address | I/A | | | | | |
| Circle the correct power company – FL | . Power & Light | |) – Suwanne | e Valley El | ec. – Pro | gress Energy |
| Property ID Number 07-4S-17-0810 | 06-022 | Ecitor | tod Cost of C | onetriction | 8500 | 30 |
| | | | | | | |
| Subdivision Name COUNTRY LAND | | | Lot _22 | | | |
| Driving Directions 47 S TR ON BU | JRNETT, TL (| ON HOLLY, | AROUND C | URVE TUR | N LEFT | ON |
| WINGS TERRACE TO END ON | 1 LEFT | | | | | |
| | | Numbe | er of Existing De | wellings on | Property_ | N/A |
| Construction of RESIDENTIAL HANG | SAR/ | | Total Ac | reage .8 | 34 Lot Si | ize |
| o you need a - <u>Culvert Permit</u> or <u>Culvert Permit</u> | | | | | ng Height | 00 Tel #10020## |
| Actual Distance of Structure from Properl | | | | | | 44'6" |
| Number of Storles1_ Heated Floor A | | | | Č | | |
| Application is hereby made to obtain a p | | | | | | |
| application is heleby made to obtain a p | CHINE CO GO WOIN | Carro motorio | do indice | 1.00. I OCI (I | ., that no v | TOTAL OF |

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 othe 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 COMMENCMENT 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.)

1 -12

| and the me | |
|---|--|
| Owners Signature OWNER BUILDERS MU | ST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT |
| ELMAR KRUZA IERE KRUZH | |
| CONTRACTORS AFFIDAVIT: By my signature I unders written statement to the owner of all the above written | stand and agree that I have informed and provided this ten responsibilities in Columbia County for obtaining |
| this Building Permit including all application and pe | rmit time limitations. |
| ₽: | |
| Contractor's Signature (Permitee) | Contractor's License Number RR282811326 |
| Contractor a Signature (Permitee) | Columbia County Competency Card Number 44 |
| Affirmed under penalty of perjury to by the Contractor and | 4 |
| Pleasonally known or Produced Identification | SEAL: |
| State of Florida Notary Signature (For the Contractor) | NANCI L. BRINKLEY MY COMMISSION # DD 932450 |
| | EXPIRES: December 26, 2013 |

This Instrument Prepared by & return to:

Name:

MARY SANDAGE, an employee of NORTH CENTRAL FLORIDA TITLE,

LLC

Address:

343 NW COLE TERRACE, SUITE 101 LAKE CITY, FLORIDA 32055

File No. 09Y-08003MAS

Parcel I.D. #: 08106-003

SPACE ABOVE THIS LINE FOR PROCESSING DATA

nst 200012013550 Qete (I/13/2009 Time 3 28 PM log Stamp-Devid 350 00 DC P Devvidt Cason Columbia County Page 1 of 2 8 1178 P 2778

SPACE ABOVE THIS LINE FOR RECORDING DATA

THIS WARRANTY DEED Made the 7th day of August, A.D. 2009, by F. C. CARROLL PROPERTIES,

INC., A FLORIDA CORPORATION, having its principal place of business at 163 SW BONANZA GLEN, LAKE CITY, FLORIDA 32025, hereinafter called the grantor, to ELMAR KRUZA and TERE J. KRUZA, HIS WIFE, whose post office address is 1573 BELL ROAD, CHAGRIN FALLS, OHIO 44022, hereinafter called the grantees:

(Wherever used herein the terms "grantor" and "grantees" include all the parties to this instrument, singular and plural, the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations, wherever the context so admits or requires.)

Witnesseth: That the grantor, for and in consideration of the sum of \$10.00 and other valuable consideration, receipt whereof is hereby acknowledged, does hereby grant, bargain, sell, alien, remise, release, convey and confirm unto the grantees all that certain land situate in Columbia County, State of Florida, viz:

A PART OF THE SW ¼ OF SW ¼ OF SECTION 7, TOWNSHIP 4 SOUTH, RANGE 17 EAST, COLUMBIA COUNTY, FLORIDA, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGIN AT THE SE CORNER OF LOT 21 OF "COUNTRY LANDINGS" AS PER PLAT THEREOF RECORDED IN PLAT BOOK 6, PAGE 89 OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA AND RUN S 00°34'19" E, 253.11 FEET; THENCE S 89°25'41" W, 145.62 FEET; THENCE N 00°16'00" W, 158.04 FEET; THENCE N 12°08'05" E, 90.16 FEET; THENCE N 00°34'21" W, 3034 FEET TO THE SW CORNER OF SAID LOT 21, "COUNTRY LANDINGS"; THENCE N 87°41'47" E, ALONG THE SOUTH LINE OF SAID LOT 21, 125.00 FEET TO THE POINT OF BEGINNING. ALSO KNOWN AS LOT 22, COUNTRY LANDINGS SUBDIVISION.

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 grantees that it is lawfully seized of said land in fee simple; that it has good right and lawful authority to sell and convey said land, and 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, 2009.

In Witness Whereof, the said grantor has caused these presents to be executed in its name and its corporate seal to be hereunto affixed by its proper officers thereunto duly authorized, the day and year first above written.

Signed, sealed and delivered in the presence of:

Witness Signature

MARY SANDAGE

Pottildi

Witness Signature PATRICIA LANG

Printed Name

F. C. CARROLL PROPERTIES, INC.

Name RAYMOND R. SESSIONS, JR.

Title: PRESIDENT

Page 2 of 2

STATE OF FLORIDA COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 7th day of August, 2009, by RAYMOND R. SESSIONS, JR. as PRESIDENT of F. C. CARROLL PROPERTIES, INC., A FLORIDA CORPORATION. He is nersonally known to me or has produced. as identification.

personally known to me or has produced _

MARY SANDAGE MY COMMISSION # DD847494 EXPIRES December 23, 2012

My commission expires

STATE OF FLORIDA

DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
ONSITE SEMAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Chapter 381, FS 4 Chapter 100-6, FAC

PERMIT 4 910318 DATE PAID 5 (30.0) RECEIPT 4 1359 115 CR # 09-4617

| appli | CANT: TERRY | ELM | RKRUZ | A | | | | TELED | HONE. 3 | CO 0500 | |
|----------------|--|---------------|------------------|-------------------------------------|-------------------|---|--|-------------|------------------|----------|----------------|
| | EDGLEY CON | | | | | | | | | | |
| | | | | | | | | | | | |
| | NG ADDRESS: 6 | | | | | | | | | | |
| TO BE | COMPLETED BY | APP | LICANT | OR APPLICA | MTIC | AUTHODITOR | E COLLE | 30000 | | | |
| | | | | SATURES RE | OUTKE | D BY CHAPTE | R 10D-6 | , FLORI | DA ADMI | INISTRAT | IVE CODE. |
| | | Ota (| E LUI . | IS NOT IN | A REC | ORDED SUBDI | VISION, | ATTACH | LEGAL | DESCRIP | tion or dee |
| OT:_ | 20 22 BI | OCK: | | SUBDI | VISIO | N:C | DUNTRY | LANDING | s | DATES | DBD: |
| ROPER | RIY ID #: Br | of or | 4S-17-0 | 106-082 | | (Section/To | wnship/ | Range/P | arcell | ZONING: | DEC |
| ROPER | RTY SIZE: 0. | м | ACRES I | Sqft/4356 | 01 | PROPERTY | WATER | SUPPLY: | IX 1 P | RTVATE | / 1 oras |
| ROPER | RTY STREET AD | DRESS | : | | sw | WINGS TERR | | | | | [] [004 |
| | | | | | | THE PERSON | | | | | |
| RECT | CIONS TO PROP | erty: | 47 SQL LEFT (| JTH TURN R DN WINGS T | HIGHT (ERR. 1 | ON BURNETT TO END ON LE | TURN LE FT. | FT ON H | OLLY, AF | ROUND CL | JRVE TURN |
| IRECT | NG INFORMATION Type of | erty: | 47 SOL LEFT C | TH TURN R ON WINGS T RESIDENT | ERR. T | ON BURNETT O END ON LE | TURN LE | ERCIAL | OLLY, AF | ROUND CL | JRVE TURN |
| UILDI | NG INFORMATIONS Type of | erty: | 47 SOL LEFT C | TH TURN RON WINGS TO RESIDENT | ERR. 1 | ON BURNETT TO END ON LE | TURN LE | ERCIAL | Busine | ROUND CL | URVE TURN |
| IRECT | Type of | erty: | 47 SOL LEFT C | TH TURN RON WINGS TO RESIDENT | ERR. 1 | ON BURNETT TO END ON LE | TURN LE | ERCIAL | Busine | ROUND CL | URVE TURN |
| UILDI | NG INFORMATION Type of Earabliabment | ERTY: | 47 SOL | TH TURN RON WINGS TO RESIDENT | ERR. T | ON BURNETT TO END ON LE Building Area Sqft 2 4 KE | TURN LE | ERCIAL | Busine For Co | ROUND CL | Vicy 1 Only |
| DILDI | NG INFORMATION Type of Earabliabment | ERTY: | 47 SOL | TH TURN RON WINGS TO RESIDENT | ERR. T | ON BURNETT TO END ON LE | TURN LE | ERCIAL | Busine For Co | ROUND CL | Vicy 1 Only |
| DILDI | NG INFORMATION Type of Earabliabment | ERTY: | 47 SOL | TH TURN RON WINGS TO RESIDENT | ERR. T | ON BURNETT TO END ON LE Building Area Sqft 2 4 KE | TURN LE | ERCIAL | Busine For Co | ROUND CL | Vicy 1 Only |
| UILDI DILDI | NG INFORMATION Type of Earabliabment | ON CONTRACTOR | 47 SOL | TH TURN RON WINGS TO | TIAL | ON BURNETT TO END ON LE Building Axes Sqfr 1214 KE 1200 | TURN LE | ERCIAL SONS | Busine For Co | ROUND CL | Vicy 1 Only |
| UILDI | NG INFORMATION Type of Earabliahment HOUSE | s/Dis | 47 SOL | TH TURN RON WINGS TO | TIAL | ON BURNETT TO END ON LE Building Area Sqft 1214 KE | TURN LE | ERCIAL SONS | Busine For Co | ROUND CL | Vicy 1 Only |
| UILDI | TONS TO PROPI | s/Dis | 47 SOL | TH TURN RON WINGS TO | TIAL | ON BURNETT TO END ON LE Building Axes Sqfr 1214 KE 1200 | TURN LE | ERCIAL SONS | Busine For Co | ess Acti | Vicy 1 Only |
| UILDI | NG INFORMATION Type of Earabliahment HOUSE | s/Dis | 47 SOL LEFT C | RESIDENT No. of Bedrooms | MGHT (PERR. T | Building Area Sqft Z 4 KE 1200 | TURN LEFT. COMMIT Per Server Pubs acify) | ERCIAL SONS | Busine For Co | ess Acti | Vicy 1 Only |



STATE OF FLORIDA

DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

ONSITE SEWAGE DISPOSAL SYSTEM

CONSTRUCTION PERMIT

Authority: Chapter 381, FS & Chapter 10D-6, FAC

PERMIT # 9100
DATE PAID
FEE PAID \$ 210
RECEIPT # 125
CR # 09-481

91003103

| [X] New System [] Existing System [] Holding Tank [] Temporary/Experimental System [] Repair [] Abandonment [] Other(Specify) |
|--|
| APPLICANT: TERRY & ELMAR KRUZA AGENT: EDGLEY CONSTRUCTION |
| PROPERTY STREET ADDRESS: SW WINGS TERR. |
| LOT: 22 BLOCK: SUBDIVISION: COUNTRY LANDINGS |
| PROPERTY ID #: 07-4S-17-08106-993- [SECTION/TOWNSHIP/RANGE/PARCEL NO.] |
| SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF CHAPTER 10D-6, FACE REPAIR PERMITS AND HOLDING TANK PERMITS EXPIRE 90 DAYS FROM THE DATE OF ISSUE. ALL OTHER PERMITS EXPIRE 18 MONTHS FROM THE DATE OF ISSUE. HRS 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. |
| SYSTEM DESIGN AND SPECIFICATIONS |
| T [900] [GALLONS / GPD] SEPTIC TANK CAPACITY MULTI-CHAMBERED/IN SERIES:[] N [0] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 1250 GALLONS] K [] GALLONS PER DOSE DOSING TANK CAPACITY DOSE RATE [N] PER 24 HRS NO. OF PUMPS: [N] D [375.0] SQUARE FEET PRIMARY DRAINFIELD SYSTEM |
| R [] SQUARE FEET SYSTEM A TYPE SYSTEM: [X] STANDARD [] FILLED [] MOUND [] I CONFIGURATION: [X] TRENCH [] BED [] |
| LOCATION OF BENCHMARK: NAIL IN 6" OAK TREE EAST OF SYSYTEM SITE ELEVATION OF PROPOSED SYSTEM SITE IS [24] INCHES BELOW BENCHMARK/REFERENCE POINT BOTTOM OF DRAINFIELD TO BE [22] INCHES BELOW BENCHMARK/REFERENCE POINT FILL REQUIRED: [20] INCHES EXCAVATION REQUIRED: [0.0] INCHES |
| 911 address shall be required. |
| H E R |
| APPROVED BY: Paul Lloyd TITLE: Soil Scientist TITLE: FI DIRECTOR COLUMBIA CPHU DATE ISSUED: 4-21-10 EXPIRATION DATE: 10 21111 |
| HRS-H Form 4016 March 1992 (Obsoletes Previous Editions Which May Not Be Used) Page 1 of 2 |

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan Permit Application Number: ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT OCCUPIED >75' TO WELL SAWALE WINGS TERR. 125' 20 NORTH SITE 1 TBM UNPAVED DRIVE SITE 2 NO SLOPE HOUSE 100' 253' HANAGER VACNAT WATER LINE 1581 WELL OCCUPIED NO WELL 145' -VACANT CR# 09-4817 1 inch = 50 feet

Site Plan Submitted By Con Folian Date 2/24/10
Plan Approved Not Approved Date H/4/10

By Sulli And CH Director Columbia CHD

Notes:

COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787
PHONE: (386) 758-1125 * FAX: (386) 758-1365 * Email: roa_croft@columbiacnuntyflat.com

Addressing Maintenance

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

DATE REQUESTED:

3/19/2010

DATE ISSUED:

3/23/2010

ENHANCED 9-1-1 ADDRESS:

235

SW WINGS

TER

LAKE CITY

FL 32025

PROPERTY APPRAISER PARCEL NUMBER:

07-48-17-08106-022

Remarks:

LOT 22, COUNTRY LANDING S/D UNR

Address Issued By:

olumbia County 9-1-1 Addressing / GIS Department

NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.

1671

HALL'S PUMP & WELL SERVICE, INC.

SPECIALIZING IN 4"-6" WELLS



DONALD AND MARY HALL OWNERS PHONE (386) 752-1854 FAX (388) 755-7022 904 NW MAIN BLVD. LAKE CITY, FLORIDA 32055

August 12, 2009

Notice to All Contractors: Re: Doug Edgley

Please be advised that due to the new building codes we will use a large capacity diaphragm tank on all new wells. This will insure a minimum of one (1) minute draw down or one (1) minute refill. If a smaller diaphragm tank is used then we will install a cycle stop valve which will produce the same results. All wells will have a pump & tank combination that will be sufficient enough for each situation.

If you have any questions please feel free to call our office.

Thank You,

Donald D. Hall

SUBCONTRACTOR VERIFICATION FORM

| APPLICATION NUMBER _ | 1004-38 | CONTRACTOR Edgley Construction | PHONE 752-0580 |
|----------------------|----------------|--|----------------|
| | 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 <u>REQUIRED</u> 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 Dowald Ho | Muzeron | Signature | uch the same |
|---|--|---|--|--|
| OK 31 | License #: /30/23 77 | , , | Pho | ne# 386-755-5944 |
| MECHANICAL/ | , | 3602Kr/- | Signature | arner Doog- |
| A/C DK 138 | License #: RA 003 | 5027 | Pho | ne #: |
| PLUMBING/ | Print Name MAIL | BRICS | Signature | W BR |
| GAS B/C114 | License #: CFCb 3 | 57219 | Pho | ine #: 1752-8656 |
| ROOFINGLIB | Print Name | Summerlin | Signature | n (-50~ |
| 4/27 534 | License #: CCC 132 | 4192 | Pho | ne #: 288 - 5426 |
| SHEET METAL | Print Name | | Signature | |
| | License #: | | Pho | ne #: |
| FIRE SYSTEM/ | Print Name | | Signature | |
| SPRINKLER | License#: | | Pho | ne #: |
| SOLAR | Print Name | | Signature | |
| | License #: | | Pho | ne #: |
| | | The same of the same of the same of the | NW W. Wales | |
| Specialty Li | cense License Number | Sub-Contractors F | rinted Name | Sub-Contractors Signature |
| Specialty Li MASON | cense License Number | 10- 11-1 | rinted Name | Sub-Contractors Signature |
| MASON | | | yd-ew | Hentel Socie |
| MASON | OK 000097 | Butch VAus | LN Guernse | Hentel Socie |
| MASON CONCRETE FIN FRAMING INSULATION | OK 000097 IISHER OK 000028 | Butch VAUG | Wodew KN Guernse GUERN SIN | Hentel Socie |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO | OK 000097 IISHER OK 000028 600046 OK 000246 | Butch VAUS Willis SIN | hn Guernse Gracen & y | Hentel Socie |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL | OK 000097 HISHER OK 000028 | Butch VAUS | hn Guernse Gracen & y | Hentel Socie |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER | OK 000097 IISHER OK 000028 600046 0K 000246 | Butch VAUG Willis SIN Jesse AMI | LN GUETUSE GUERNE SE P SR 05 | Henth Socie |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA | OK 000097 IISHER OK 000028 000246 ALLER OK 000762 | Kenneth Lo Butch VAUS Willis SIN Jesse AMI STRUR ROA | LO SOFACE | Henth Socie |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA | OK 000097 IISHER OK 000028 OK 000246 CE 080621 ALLER OK 000762 SCIUB 006 632 | Butch VAUG Willis SIN Jesse AMI | LO SOFACE | Henth Socie |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA | OK 000097 IISHER OK 000028 VOIDLERCO 22354 OK 000246 ALLER OK 000762 SC/4B 006 632 EILING | Butch VAUG WILLIAM T WILLIAM T WILLIAM T STEUR BOR JOHN BISH | SROS | Jenet breez Butch J William J Chang John Berghen |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL CO | OK 000097 IISHER OK 000028 OK 000246 CE 080621 ALLER OK 000762 SCIUB 006 632 | Kenneth Lo Butch VAUG WILLIAM T WILLIAM T WILLIAM T STEUR BON STEUR BON JOHN BISH | SROS | Henth Socie |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL C GLASS CERAMIC TILE | OK 000097 IISHER OK 000028 OK 000246 ALLER OK 000162 EILING OK 000214 | Butch VAUG Butch VAUG Willis SIN JESSE AMI STRUR ROBER JOHN BISH CARL BULLARD JAMES L. R | BROS EDENCE Shaw | Jenet breez Butch J William J Chang John Berghen |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL C GLASS CERAMIC TILE FLOOR COVER | OK 000097 IISHER OK 000028 LOODERCO 22354 OK 000246 ALLER OK 000162 SCICIB 006 632 EILING OK 000214 ING | Butch VAUG WILLIAM T WILLIAM T WILLIAM T STEUR BOR JOHN BISH CARL BURGER JAMES L. R | SROS EDFACE DAM TACHED | Jenet breez Butch Jan While I Shan John Beighen Ca. Challan |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL CO GLASS CERAMIC TILE FLOOR COVER ALUM/VINYL S | OK 000097 IISHER OK 000028 LOWERCO 22354 OK 000246 ALLER OK 000762 SCIUB 006 632 EILING OK 000214 ING IDING 0000144 | STEUR BULLARD JAMES N. R MIKE NICHOLS | BROS BROS | Jenet breez Butch Jen Which I Chang John Berghen Ca. Challan |
| MASON CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA PAINTING ACOUSTICAL C GLASS CERAMIC TILE FLOOR COVER | OK 000097 IISHER OK 000028 LOUDGERCO 22354 OK 000246 ALLER OK 000162 EILING OK 000618 OK 0000146 ING IDING 000619 | Butch VAUG WILLIAM T WILLIAM T WILLIAM T STEUR BOR JOHN BISH CARL BURGER JAMES L. R | BROS BROS | Jenet breez Butch Jan While I Shan John Beighen Ca. Challan |

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.

Contractor Forms: Subcontractor form: 6,

SUBCONTRACTOR VERIFICATION FORM

| APPLICATION NUMBER 1004-38 CONTRACTOR FAGILY CONSTRUCTION PHONE 752-0580 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 <u>REQUIRED</u> 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. | | | | | | | | |
| | | | | | | eing submitted to this office prior to the york orders and/or fines. | | |
| ELECTRICAL | Print Name | 2 | | | Signature | hone #: | | |
| MECHANICAL/ | | • | | | | none #: | | |
| PLUMBING/ GAS | | | | | Signature | hone #: | | |
| ROOFING | Print Name | 1 | ***** | | Signature | hone #: | | |
| SHEET METAL | | | | | Signature | hone #: | | |
| FIRE SYSTEM/ SPRINKLER | Print Name License#: | | | | SignaturePhone #: | | | |
| SOLAR | Print Name License #: | | | | SignaturePi | none #: | | |
| Specialty Lic | cense | License Number | Sub-C | ontractors Pr | nted Name | Sub-Contractors Signature | | |
| MASON | | | Autoria Arena | | | | | |
| CONCRETE FIN | ISHER | | | | | | | |
| FRAMING | | | | | | | | |
| INSULATION | | | | | | | | |
| STUCCO | | 35.4 | | | | | | |
| DRYWALL | | | | | | | | |
| PLASTER | | | | West. | | | | |
| CABINET INSTA | LLER | | | | | | | |
| PAINTING | | | | | | | | |
| ACOUSTICAL CI | EILING | | | | | | | |
| GLASS | | | | 1-9 | | | | |
| CERAMIC TILE | K | 874 | Ryan | Hardin | | Run Hali | | |
| FLOOR COVERI | NG OK | 546 | Ryan | Hardin | | Ryntui | | |
| ALUM/VINYL SI | DING | | , | | | | | |
| GARAGE DOOR | | | | | | | | |
| METAL BLDG EF | RECTOR | | , | seudinis selek teleb | | | | |
| 5 AAO 103 Building permits: identification of minimum premium policy —Every employer shall as a condition to | | | | | | | | |

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.

Contractor Forms: Subcontractor torm: 6/

Kruza Slænger 85,600 00



COLUMBIA COUNTY BUILDING DEPARTMENT RESIDENTIAL CHECK LIST REQUIRMENTS

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 Inclu Each Box shal Circled as Applicable | |
|---|---|---|-----|--|-------|
| | - <u> </u> | 12 FOR S | Yes | No | N/A |
| 1 | Two (2) complete sets of | plans containing the following: | | | |
| 2 | All drawings must be cle | ar, concise, drawn to scale, details that are not used shall be marked void | 1 | | |
| 3 | Condition space (Sq. | Total (Sq. Ft.) under roof | шшш | ШШП | IIIII |

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:

| 3 | te rian information including: | |
|---|---|---|
| 4 | Dimensions of lot or parcel of land | |
| 5 | Dimensions of all building set backs | V |
| | 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. Was santy Deed | |

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 | IIIII | ШШ |
| | | YES | NO | N/A |
| 9 | Basic wind speed (3-second gust), miles per hour 110 mPH | - | | |
| 10 | (Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated) | L | | |
| 11 | Wind importance factor and nature of occupancy | ~ | | |
| 12 | | L | | |
| 13 | The design wind pressure in terms of psf (kN/m²), to be used for the design of exterior component, cladding materials not specifally designed by the registered design professional. | V | | |
| | | | | |

Elevations Drawing including:

| 14 | All side views of the structure | L | |
|-----|--|---|---|
| 15 | Roof pitch | | |
| 16 | Overhang dimensions and detail with attic ventilation | | |
| 17 | Location, size and height above roof of chimneys | | 1 |
| 18 | Location and size of skylights with Florida Product Approval | | |
| 18 | Number of stories | V | |
| 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, | V | |
|----|---|---|---|
| 20 | 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 | V | |
| 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) | | v |
| 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: | Found | ation | Plans |
|-------------|------|-------|-------|-------|
|-------------|------|-------|-------|-------|

| FE | SCR 403: Foundation Flans | YES | NO | N/A |
|----|--|-----|----|-----|
| | Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing. | L | | |
| 30 | All posts and/or column footing including size and reinforcing | | - | |
| 31 | Any special support required by soil analysis such as piling. | 1 | - | + |
| 32 | Assumed load-bearing valve of soil 1500 165. Pound Per Square Foot | 1 | | + |
| 33 | Location of horizontal and vertical steel, for foundation or walls (include # size and type) | | - | |

FBCR 506: CONCRETE SLAB ON GRADE

| 74 | Show Vapor retarder (6mil. Polyethylene with joints lapped 6 inches and sealed) | | |
|----|---|---|--|
| 34 | Show vapor retarder (offitt. For following the state of the following reinforcement and Supports | - | |
| 35 | Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports | | |

FBCR 320: PROTECTION AGAINST TERMITES

| | FBCR 320: PROTECTION AGAINST TERMITES | |
|---|--|--|
| Γ | 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 Theat Soil | |

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

| | Show all materials making up walls, wall height, and Block size, mortar type | _ | |
|----|---|---|---|
| 37 | Show all materials making up waits, wan neight, and block size, the same of | | 1 |
| 38 | Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement wood Frank | | |

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 priers | |
| 41 | the state of the state and and or priors | |
| 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 | 1 |
| 47 | Show the required access opening to access to under-floor spaces | 1 |
| | 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 | V |
| 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). | 1 |

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 | V | | |
| 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 | V | | |
| 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) | V | | |
| 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 | V | | |
| 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 | V | |
|----|--|---|--|
| | Include a layout and truss details, signed and sealed by Florida Professional Engineer | V | |
| 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 | | |
| | Provide dead load rating of trusses | | |

FBCR 802:Conventional Roof Framing Layout

| 65 | Rafter and ridge beams sizes, span, species and spacing | L | |
|----|--|---------|--|
| 66 | Connectors to wall assemblies' include assemblies' resistance to uplift rating | L- | |
| 67 | Valley framing and support details | <u></u> | |
| 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 | V | |
|----|---|---|--|
| 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 assembles covering | |
|----|---|--|
| 72 | Submit Florida Product Approval numbers for each component of the roof assembles 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

| 1 2 5 | GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL | Each I | to Inclusion shall reled as oplicable | l be |
|-------|---|--------|---------------------------------------|------|
| | | YES | NO | N/A |
| | Show the insulation R value for the following areas of the structure (Not IN Solated) | | | Ш |
| 73 | | | | ~ |
| 74 | Attic space | | | L |
| 75 | Exterior wall cavity | 1 | 1 | - |
| 76 | Crawl space | | | |
| 76 | Crawl space AC information | | | |
| = 1 | Submit two copies of a Manual J sizing equipment or equivalent computation study | T | | L |
| 77 | Submit two copies of a Marida J Sizing equipment of equipment of | 1 | 1 | |
| 78 | Exhaust fans locations in bathrooms | | | |
| 79 | Show clothes dryer route and total run of exhaust duct | | 1 | J |

Plumbing Fixture layout shown

| | All fixtures waste water lines shall be shown on the foundation plan | 48 | 4 |
|----|---|----|---|
| 80 | All fixtures waste water titles shart be shown on the roundaries part | 1 | |
| 81 | Show the location of water heater | | |

Private Potable Water

| 00 | Dump motor horse nower 11/2 11, P. Shared with Home. | | |
|----|--|---|--|
| 82 | Pump motor noise power 7 12 A1 | 4 | |
| | Reservoir pressure tank gallon capacity 86 601. | 4 | |
| 84 | Rating of cycle stop valve if used 30 bay. per m/n. | | |

Electrical layout shown including

| 05 | Switches, outlets/receptacles, lighting and all required GFCI outlets identified | L |
|----|---|---|
| | Ceiling fans | - |
| 97 | 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 | |

Home than Sub fed from

5

| 90 | Appliances and HVAC equipment and disconnects | |
|----|---|--|
| | | |

<u>Disclosure Statement for Owner Builders</u> 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 |
|--|--|
| 그 이 그를 하게 하는데, 그는 그림을 보는 그들이 그렇게 되는 것들은 모양하는 이 바람들이 그를 가입니다. | Applicable |

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS NO N/A YES Building Permit Application A current Building Permit Application form is to be completed and submitted for all residential projects 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 Environmental Health Permit or Sewer Tap Approval A copy of a approved 94 Columbia County Environmental Health (386) 758-1058 Some 45 Home. City of Lake City A permit showing an approved waste water sewer tap 95 Toilet facilities shall be provided for all construction sites 96 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. 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 98 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 CERTIFIED FINISHED FLOOR ELEVATIONS will be required on any project where the base flood elevation (100 year flood) has been established A development permit will also be required. Development permit cost is \$50.00 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. 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

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 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 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 nu 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 if 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 applican will be notified by phone as to the date and time a building permit will b prepared and issued by the Columbia County Building & Zoning Department