

DATE 09/02/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022277

APPLICANT GARY & PATTI THOMAS PHONE 386.752.0446

ADDRESS 721 SW GABRIEL PLACE LAKE CITY FL 32024

OWNER GARY THOMAS & PATTI THOMAS PHONE 386.752.0446

ADDRESS 723 SW GABRIEL PLACE LAKE CITY FL 32024

CONTRACTOR GARY & PATTI THOMAS PHONE 752.0446

LOCATION OF PROPERTY 90-W TO THOMAS TER, GO ABOUT 3/4 MILE TO SW GABRIEL PL, TURN
R,FOLLOW RD TO END, PAST POND ONL, GO THRU LANE ON IT.

TYPE DEVELOPMENT SFD & UTILITY ESTIMATED COST OF CONSTRUCTION 86700.00

HEATED FLOOR AREA 1734.00 TOTAL AREA 2085.00 HEIGHT 21.00 STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 6'12 FLOOR CONC

LAND USE & ZONING A-3 MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 06-4S-16-02783-000 SUBDIVISION _____

LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 40.00

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

EXISTING _____ 04-0863-N _____ HD _____ HD _____ N _____

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

COMMENTS: NOC ON FILE

1 FOOT ABOVE ROAD

Check # or Cash 511

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

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

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

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

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

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

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

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

BUILDING PERMIT FEE \$ 435.00 CERTIFICATION FEE \$ 10.43 SURCHARGE FEE \$ 10.43

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

FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ _____ TOTAL FEE 505.86

INSPECTORS OFFICE _____ CLERKS OFFICE CH

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

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

This Permit Must Be Prominently Posted on Premises During Construction

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

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

Columbia County Building Permit Application

For Office Use Only Application # 0408-57 Date Received 8/17/04 By JW Permit # 22277
 Application Approved by - Zoning Official HD Date _____ Plans Examiner HD 9-2-04 Date _____
 Flood Zone X Development Permit 4 Zoning A-3 Land Use Plan Map Category _____
 Comments * DISCLOSE STATEMENT
* ENVIRONMENTAL HEALTH OFFICE PLAN

Applicants Name Gary & Patti Thomas Phone 386-752-0446
 Address 721 SW Gabriel PL. 32024 Lake City
 Owners Name Gary & Patti Thomas Phone 386-752-0446
 911 Address 723 S.W. Gabriel PL. 32024 Lake City
 Contractors Name GARY THOMAS (OWNER BUILDER) Phone 386-752-0446
 Address _____
 Fee Simple Owner Name & Address N/A
 Bonding Co. Name & Address N/A
 Architect/Engineer Name & Address Mark Disosway, P.E. - P.O. B. 868, Lake City, FL 32056 - 754-541
 Mortgage Lenders Name & Address NONE
 Property ID Number 06-45-16-02783-000 Estimated Cost of Construction \$75,000
 Subdivision Name N/A Lot N/A Block N/A Unit N/A Phase _____
 Driving Directions 3 mi. W. of I-75 ON US90 - Turn Lt. ON SW Thomas Terrace - Go about 3/4 mile to SW Gabriel Place - Turn Rt. follow Rd to End (Pass Pond on Lt. Then Go thru Lane on Lt. Before Cyprus house.
 Type of Construction NEW Wood frame - conc. slab Number of Existing Dwellings on Property 1
 Total Acreage 40 AC. Lot Size N/A Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
 Actual Distance of Structure from Property Lines - Front 907.52' Side 210' Side 1118.05' Rear 360'
 Total Building Height 21 ft. Number of Stories 1 Heated Floor Area 1734 S.F. 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.

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

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

Gary m. Thomas Patti L. Thomas
 Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
 this 2nd day of August 2004.
 Personally known _____ or Produced Identification ✓

JDAL

Contractor Signature _____
 Contractors License Number LAURA L. HUTCHINS
 Competency Card My Comm. Exp. 3/22/05
 No. CC 999492
 I Personally Supervise Y (If Owner Bldg.)

NOTARY STAMP/SEAL

Laura L Hutchins CC 995952
 Notary Signature Laura L Hutchins

NOTICE OF COMMENCEMENT

STATE OF FLORIDA COUNTY OF

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

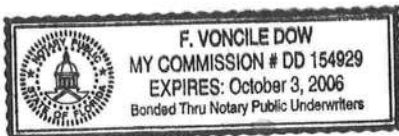
1. Description of Property: Part of Section 6 T4S R16 E
2. General Description of Improvement: New house
3. Owner Information:
 - a. Name and Address: Gary M & Patricia B. Thomas
723 SW Gabriel Pl. Lake City FL 32024
 - b. Interest in Property: owner
 - c. Name and Address of Fee Simple Titleholder (if other than owner): _____
4. Contractor (name and address): owners
5. Surety:
 - a. Name and Address: _____
 - b. Amount of Bond: _____
6. Lender (name and address): N/A
7. Persons within the State of Florida designated by owner upon whom notices or other documents may be served as provided by Florida Statutes 713.13(1)(a)(7): _____
8. In addition to himself, owner designates: _____
to receive a copy of the Leinor's Notice as provided in Florida Statutes 713.13(1)(b).
9. Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified): _____

Gary M. Thomas
Type Owner Name: _____
Patricia B. Thomas
Type Owner Name: _____

Sworn to and subscribed before me this 2nd day of August, 2004.

Personally Known: _____
Produced ID: _____
Did/Did Not Take an Oath: _____

Foncile Dow
Type Notary's Name _____
Notary Public, State of Florida
Commission Expiry & Number: _____



Inst:2004017748 Date:08/02/2004 Time:13:01

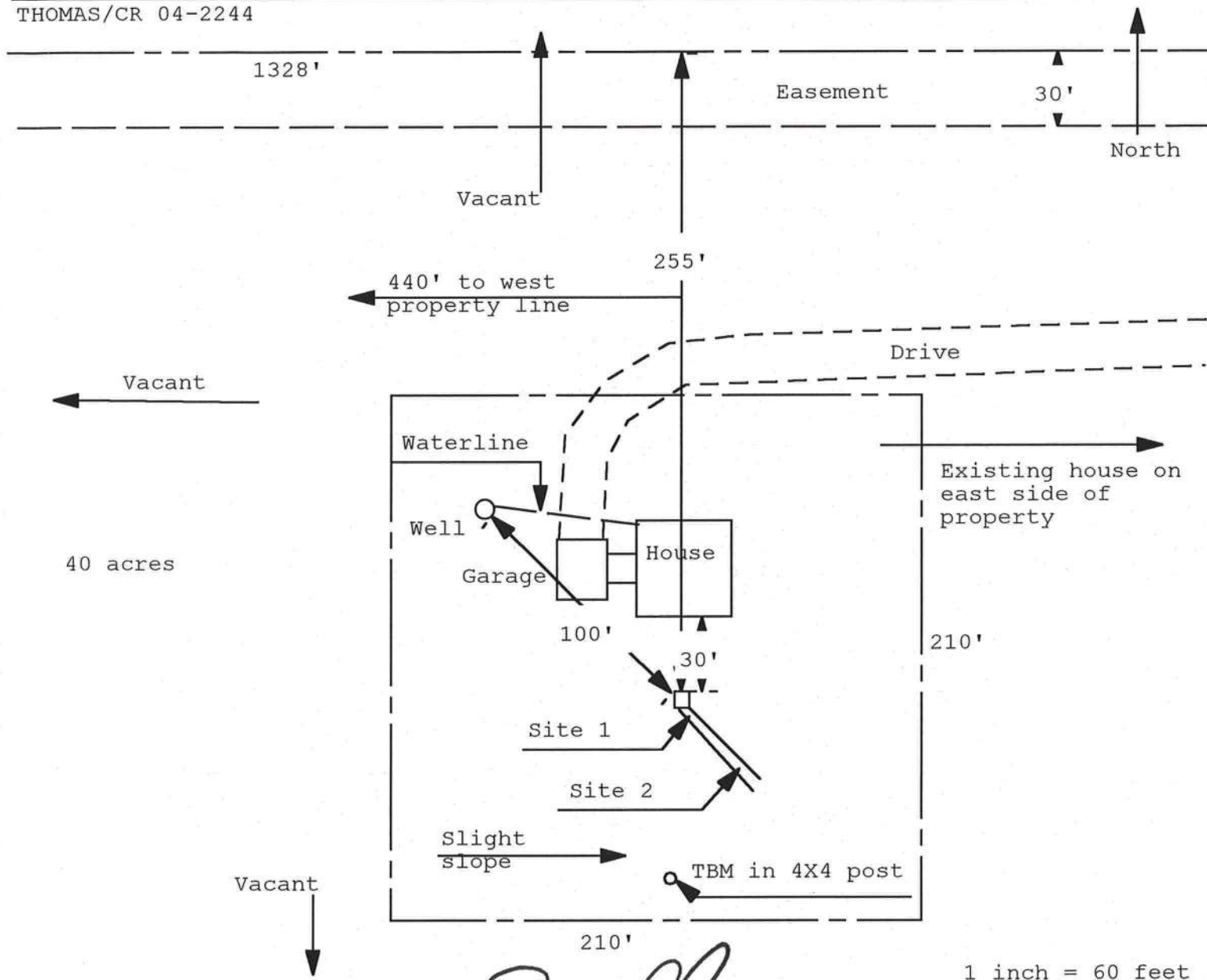
MK DC,P.DeWitt Cason,Columbia County B:1022 P:1283

was

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 04-0863N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

THOMAS/CR 04-2244



1 inch = 60 feet

Site Plan Submitted By Paul Lopez Date 8/5/04
 Plan Approved Not Approved Date 8/5/04
 By Salie Maddy CPHU

Notes: ES - COLUMBIA

APPROVED

Heating and Air Conditioning Economic Analysis

For Future / Existing Home Of

Glenwood King

Lake City, Fl

Gary Thomas

Conducted By

Country Comfort Heating & A. C.

Rt. 18 Box 360

Lake City, Fl 32025

386-752-5841

Wrightsoft Corporation

Note: Actual costs and savings may differ due to weather, operating conditions, maintenance, and construction.



Project Summary

Entire House

Country Comfort Heating & A. C.

Job: Gary Thomas
Date: 8-11-04
By: A W

Rt. 18 Box 360, Lake City, FL 32025 Phone: 386-752-5841

Project Information

For: Glenwood King
Lake City, FL

Notes:

Gary Thomas

22277
221000

Design Information

Weather: Jacksonville, Cecil Field NAS, FL , US

Winter Design Conditions

Outside db	25 °F
Inside db	70 °F
Design TD	45 °F

Summer Design Conditions

Outside db	97 °F
Inside db	78 °F
Design TD	19 °F
Daily range	M
Relative humidity	50 %
Moisture difference	50 gr/lb

Heating Summary

Building heat loss	39330 Btuh
Ventilation air	74 cfm
Ventilation air loss	3633 Btuh
Design heat load	42963 Btuh

Infiltration

Method	Simplified
Construction quality	Average
Fireplaces	1 (Average)

	Heating	Cooling
Area (ft²)	1754	1754
Volume (ft³)	15958	15958
Air changes/hour	0.80	0.40
Equiv. AVF (cfm)	213	106

Heating Equipment Summary

Make AmStd
Trade Heritage 12
Model 6H2036A

Efficiency	8.1 HSPF
Heating input	
Heating output	37200 Btuh @ 47°F
Temperature rise	28 °F
Actual air flow	1200 cfm
Air flow factor	0.031 cfm/Btuh
Static pressure	0.00 in H2O
Space thermostat	

Sensible Cooling Equipment Load Sizing

Structure	22794 Btuh
Ventilation	1534 Btuh
Design temperature swing	3.0 °F
Use mfg. data	n
Rate/swing multiplier	1.02
Total sens. equip. load	24814 Btuh

Latent Cooling Equipment Load Sizing

Internal gains	1800 Btuh
Ventilation	2516 Btuh
Infiltration	3636 Btuh
Total latent equip. load	9017 Btuh

Total equipment load	33832 Btuh
Req. total capacity at 0.70 SHR	3.0 ton

Cooling Equipment Summary

Make AmStd
Trade Heritage 12
Cond 6H2036A
Coil TWE036P13

Efficiency	12 SEER
Sensible cooling	24920 Btuh
Latent cooling	10680 Btuh
Total cooling	35600 Btuh
Actual air flow	1200 cfm
Air flow factor	0.053 cfm/Btuh
Static pressure	0.00 in H2O
Load sensible heat ratio	73 %

Bold/italic values have been manually overridden

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J8 Worksheet

Entire House

Country Comfort Heating & A. C.

Job: Gary Thomas
Date: 8-11-04
By: A W

Rt. 18 Box 360, Lake City, FL 32025 Phone: 386-752-5841

1	Room name					Entire House					Kitchen				
2	Exposed wall					189.0 ft					76.0 ft				
3	Ceiling height					9.1 ft					8.0 ft				
4	Room dimensions					d					20.0 x 24.0 ft				
5	Room area					1754.0 ft²					480.0 ft²				
	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)		
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
6	W	12C-0bw	0.091	n	4.09	1.46	524	452	1851	658	160	145	594	211	
11	G	3A-2om	0.820	n	36.90	19.63	45	0	1661	884	15	0	554	295	
	G	3A-2om	0.820	n	36.90	19.63	6	0	221	118	0	0	0	0	
	D	11N0	0.350	n	15.75	10.68	21	21	331	224	0	0	0	0	
	W	12C-0bw	0.091	e	4.09	1.46	492	405	1658	590	192	120	491	175	
	G	3A-2om	0.820	e	36.90	50.17	45	3	1661	2167	30	2	1107	1445	
	D	71B0	0.000	e	0.00	0.00	42	42	0	0	42	42	0	0	
	W	12C-0bw	0.091	s	4.09	1.46	556	481	1970	700	160	130	532	189	
	G	3A-2om	0.820	s	36.90	23.47	75	75	2768	1473	30	30	1107	589	
	W	12C-0bw	0.091	w	4.09	1.46	126	105	430	153	96	75	307	109	
	D	11N0	0.350	w	15.75	10.68	21	21	331	224	21	21	331	224	
	C	16B-30ad	0.032	-	1.44	1.73	1754	1754	2526	3031	480	480	691	829	
F	22A-tpH	1.358	-	61.11	0.00	1754	189	11550	0	480	76	4644	0		
Envelope loss/gain									26956	10222			10358	4066	
12	a) Infiltration b) Ventilation								10501 0	2217 0			3760 0	794 0	
13	Internal gains:		Occupants @ 230 Appliances @ 1200			9 6			2070 7200	1 3			230 3600		
	Less external load								0 0				0 0		
	Less transfer								0 0				0 0		
	Redistribution								0 0				0 0		
14	Subtotal								37457	21708			14119	8690	
15	Duct loads						5%	5%	1873	1085	5%	5%	706	435	
Total room load									39330	22794			14825	9125	
Air required (cfm)									1200	1200			452	480	

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J8 Worksheet **Entire House** **Country Comfort Heating & A. C.**

Job: Gary Thomas
 Date: 8-11-04
 By: A W

Rt. 18 Box 360, Lake City, FI 32025 Phone: 386-752-5841

1	Room name					Bedroom 2					Family Rm				
2	Exposed wall					23.0 ft					24.0 ft				
3	Ceiling height					10.0 ft					10.0 ft				
4	Room dimensions					12.0 x 11.0 ft					1.0 x 309.0 ft				
5	Room area					132.0 ft²					309.0 ft²				
	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)		
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
6	W	12C-0bw	0.091	n	4.09	1.46	0	0	0	0	0	0	0	0	
11	G	3A-2om	0.820	n	36.90	19.63	0	0	0	0	0	0	0	0	
	G	3A-2om	0.820	n	36.90	19.63	0	0	0	0	0	0	0	0	
	D	11N0	0.350	n	15.75	10.68	0	0	0	0	0	0	0	0	
	W	12C-0bw	0.091	e	4.09	1.46	110	95	389	138	30	30	123	44	
	G	3A-2om	0.820	e	36.90	50.17	15	1	554	722	0	0	0	0	
	D	71B0	0.000	e	0.00	0.00	0	0	0	0	0	0	0	0	
	W	12C-0bw	0.091	s	4.09	1.46	120	105	430	153	180	150	614	218	
	G	3A-2om	0.820	s	36.90	23.47	15	15	554	295	30	30	1107	589	
	W	12C-0bw	0.091	w	4.09	1.46	0	0	0	0	30	30	123	44	
	D	11N0	0.350	w	15.75	10.68	0	0	0	0	0	0	0	0	
	C	16B-30ad	0.032	-	1.44	1.73	132	132	190	228	309	309	445	534	
F	22A-tpb	1.358	-	61.11	0.00	132	23	1406	0	309	24	1467	0		
Envelope loss/gain									3522	1536			3879	1429	
12	a) Infiltration								1422	300			1484	313	
	b) Ventilation								0	0			0	0	
13	Internal gains:		Occupants @		230		2			460	4			920	
	Less external load		Appliances @		1200		0			0	0			0	
	Less transfer								0	0			0	0	
	Redistribution								0	0			0	0	
14	Subtotal								4944	2297			5363	2662	
15	Duct loads						5%	5%	247	115	5%	5%	268	133	
	Total room load								5191	2411			5631	2795	
	Air required (cfm)								158	127			172	147	

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J8 Worksheet Entire House Country Comfort Heating & A. C.

Job: Gary Thomas
Date: 8-11-04
By: A W

Rt. 18 Box 360, Lake City, FL 32025 Phone: 386-752-5841

1	Room name					Master Bedroom					Walkway				
2	Exposed wall					15.0 ft					20.0 ft				
3	Ceiling height					10.0 ft					8.0 ft				
4	Room dimensions					15.0 x 16.0 ft					1.0 x 311.0 ft				
5	Room area					240.0 ft²					311.0 ft²				
	Ty	Construction number	U-value (Btuh/ft²-°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)		
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
6	W	12C-0bw	0.091	n	4.09	1.46	150	120	491	175	64	43	176	63	
11	G	3A-2om	0.820	n	36.90	19.63	30	0	1107	589	0	0	0	0	
	G	3A-2om	0.820	n	36.90	19.63	0	0	0	0	0	0	0	0	
	D	11N0	0.350	n	15.75	10.68	0	0	0	0	21	21	331	224	
	W	12C-0bw	0.091	e	4.09	1.46	0	0	0	0	0	0	0	0	
	G	3A-2om	0.820	e	36.90	50.17	0	0	0	0	0	0	0	0	
	D	71B0	0.000	e	0.00	0.00	0	0	0	0	0	0	0	0	
	W	12C-0bw	0.091	s	4.09	1.46	0	0	0	0	96	96	393	140	
	G	3A-2om	0.820	s	36.90	23.47	0	0	0	0	0	0	0	0	
	W	12C-0bw	0.091	w	4.09	1.46	0	0	0	0	0	0	0	0	
	D	11N0	0.350	w	15.75	10.68	0	0	0	0	0	0	0	0	
	C	16B-30ad	0.032	-	1.44	1.73	240	240	346	415	311	311	448	537	
F	22A-tpb	1.358	-	61.11	0.00	240	15	917	0	311	20	1222	0		
Envelope loss/gain									2861	1178			2570	964	
12	a) Infiltration								928	196			990	209	
	b) Ventilation								0	0			0	0	
13	Internal gains:		Occupants @ 230		2		0		460		0		0		
	Less external load								0				0		
	Less transfer								0				0		
	Redistribution								0				0		
14	Subtotal								3788				3559		
15	Duct loads						5%		189		5%		178		
	Total room load								3978	1926			3737	1232	
	Air required (cfm)								121	101			114	65	

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Right-J8 Worksheet Entire House Country Comfort Heating & A. C.

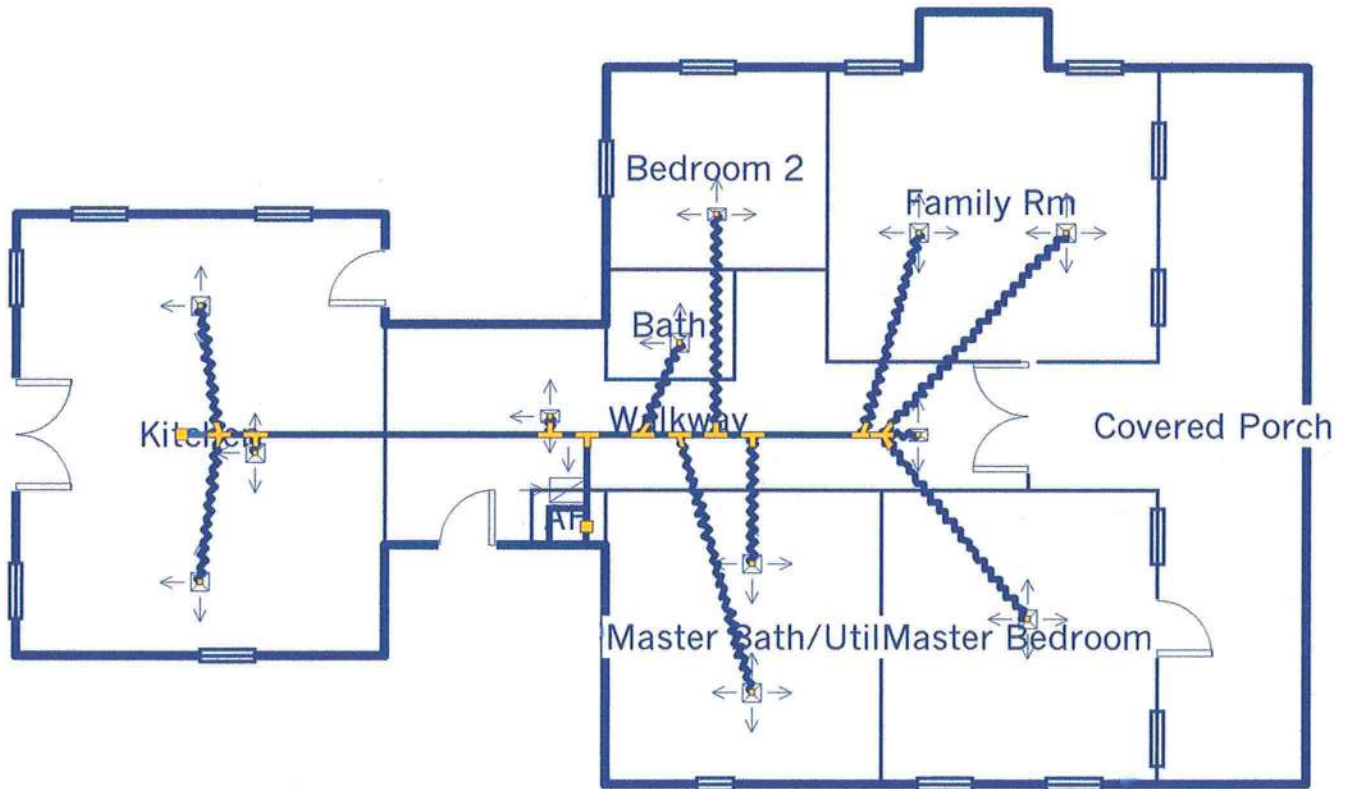
Job: Gary Thomas
Date: 8-11-04
By: A W

Rt. 18 Box 360, Lake City, FL 32025 Phone: 386-752-5841

1	Room name					Master Bath/Util					Bath				
2	Exposed wall					28.0 ft					3.0 ft				
3	Ceiling height					10.0 ft 15.0 x 16.0 ft heat/cool					10.0 ft 7.0 x 6.0 ft heat/cool				
4	Room dimensions														
5	Room area					240.0 ft²					42.0 ft²				
	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)		
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
6	W	12C-0bw	0.091	n	4.09	1.46	150	144	590	210	0	0	0	0	
11	G	3A-2om	0.820	n	36.90	19.63	0	0	0	0	0	0	0	0	
	G	3A-2om	0.820	n	36.90	19.63	6	0	221	118	0	0	0	0	
	D	11N0	0.350	n	15.75	10.68	0	0	0	0	0	0	0	0	
	W	12C-0bw	0.091	e	4.09	1.46	130	130	532	189	30	30	123	44	
	G	3A-2om	0.820	e	36.90	50.17	0	0	0	0	0	0	0	0	
	D	71B0	0.000	e	0.00	0.00	0	0	0	0	0	0	0	0	
	W	12C-0bw	0.091	s	4.09	1.46	0	0	0	0	0	0	0	0	
	G	3A-2om	0.820	s	36.90	23.47	0	0	0	0	0	0	0	0	
	W	12C-0bw	0.091	w	4.09	1.46	0	0	0	0	0	0	0	0	
	D	11N0	0.350	w	15.75	10.68	0	0	0	0	0	0	0	0	
	C	16B-30ad	0.032	-	1.44	1.73	240	240	346	415	42	42	60	73	
F	22A-tph	1.358	-	61.11	0.00	240	28	1711	0	42	3	183	0		
Envelope loss/gain									3400	931			367	116	
12	a) Infiltration							1732	366			186	39		
	b) Ventilation							0	0			0	0		
13	Internal gains:	Occupants @ 230					0		0	0			0	0	
	Less external load	Appliances @ 1200					3		3600	0			0	0	
	Less transfer								0	0			0	0	
	Redistribution								0	0			0	0	
14	Subtotal							5132	4897			552	155		
15	Duct loads						5%	5%	257	245	5%	5%	28	8	
	Total room load								5388	5142			580	163	
	Air required (cfm)								164	271			18	9	

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

Sheet 1



Job #: Gary Thomas
Performed by A W for:
 Glenwood King
 Lake City, FL

Country Comfort Heating & A. C.

Rt. 18 Box 360
 Lake City, FL 32025
 Phone: 386-752-5841

Scale: 1 : 125

Page 1
 Right-Suite Residential J8
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DISCLOSURE STATEMENT

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

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

TYPE OF CONSTRUCTION

- ☒ Single Family Dwelling
☐ Farm Outbuilding
☐ New Construction

- ☐ Two-Family Residence
☐ Other _____

☐ Addition, Alteration, Modification or other Improvement

NEW CONSTRUCTION OR IMPROVEMENT

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

Marym. Thomas Patti Thomas 9/2/04
Signature Date

FOR BUILDING USE ONLY

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

Date 9-2-04 Building Official/Representative Harry Dick

CAM112M01. S . CamaUSA Appraisal System		Columbia County	
8/17/2004 15:40 Legal Description Maintenance		88000	Land 002
Year T	Property		AG 000
2004	R 06-4S-16-02783-000	71199	Bldg 001
	RT 26 BX 599-E		Xfea 000
HX	THOMAS GARY M & PATRICIA B	159199	TOTAL B*

1	NW1/4 OF NE1/4	ORB 701-499 THRU 501,, 871-813,,	2
3	975-587,,		4
5			6
7			8
9			10
11			12
13			14
15			16
17			18
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21			22
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27			28

Mnt 3/04/2003 TERRY

F1=Task F3=Exit F4=Prompt F10=GoTo PGUP/PGDN F24=MoreKeys