DATE 10/31/2008

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT
000027456

APPLICANT FRED ALLEN PHONE 963-1345

ADDRESS 4345 US HIGHWAY 90 WELLBORN FL 32094

OWNER JERRY SCOTT CASE PHONE

ADDRESS 152 SW NUTHATCH CT FT. WHITE FL 32038

CONTRACTOR BENJAMIN MILLER PHONE 963-1345

LOCATION OF PROPERTY 441S, TR CR 18, TR TUSTENUGEE RD, TL JASMINE ST.,
RIGHT CORNER OF JASMINE AND NUTHATCH CT

TYPE DEVELOPMENT SFD,UTILITY ESTIMATED COST OF CONSTRUCTION 62300.00

HEATED FLOOR AREA 1246.00 TOTAL AREA 1542.00 HEIGHT STORIES 2

FOUNDATION WOOD WALLS FRAMED ROOF PITCH 12/12 FLOOR WOOD

LAND USE & ZONING A-3 MAX. HEIGHT 27

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

NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 07-6S-17-03816-422 SUBDIVISION TUSTENUGGEE TRACE

LOT 22 BLOCK PHASE UNIT TOTAL ACRES 10.02

		CBC1255824	Fred Miller
Culvert Permit No.	Culvert Waiver	Contractor's License Number	Applicant/Owner/Contractor

EXISTING	08-676	BK	WR	Y
Driveway Connection	Septic Tank Number	LU & Zoning checked by	Approved for Issuance	New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD

Check # or Cash 2666

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

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

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

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

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

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

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

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

BUILDING PERMIT FEE $ 315.00 CERTIFICATION FEE $ 7.71 SURCHARGE FEE $ 7.71

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 $ **TOTAL FEE** 405.42

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."

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 TO BE IN ACTIVE PROGESS WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS.

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

Columbia County Building Permit Application

For Office Use Only Application # 0810-47 Date Received 10/23/08 By [initials] Permit # 27456

Zoning Official BLK Date 31.10.08 Flood Zone X Land Use A-3 Zoning A-3

FEMA Map # N/A Elevation N/A MFE 1ft above Rd River N/A Plans Examiner [initials] Date 10/30/08

Comments

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 $829.88 Fire $78.63 Corr 409.16 Road/Code $2,046.00/26

School $1,500.00 = TOTAL $3,063.67 ✓ well letter

Septic Permit No. 08-1010 Fax

Name Authorized Person Signing Permit Fred Allen Phone 963-1345

Address 4345 US Highway 90, Wellborn, FL 32094 Cell 362-9021

Owners Name Jerry Scott Case Phone

911 Address 152 SW Nuthatch, Ft. White, FL 32038

Contractors Name Benjamin Miller Phone 386-963-1345

Address 4345 US Hwy 90, Wellborn, FL 32094

Fee Simple Owner Name & Address N/A

Bonding Co. Name & Address

Architect/Engineer Name & Address GARY GILL P.O BOX 187 130 WEST LIVE OAK FLA 32064

Mortgage Lenders Name & Address NONE

Circle the correct power company – FL Power & Light – Clay Elec. – Suwannee Valley Elec. – Progress Energy (circled)

Property ID Number 07-6S-17-03816-422 Estimated Cost of Construction 200 T

Subdivision Name LOT 22 TUSTENUGGEE TRACE Lot 22 Block Unit Phase

Driving Directions See Attached. 441S, TR CR 18, TR Tustenugee Rd, TL Jasmine St, Right corner of Jasmine + Nuthatch Ct.

Number of Existing Dwellings on Property NONE

Construction of LOG HOME SFD Total Acreage 10.02 Lot Size 10.02

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive (circled) Total Building Height 27

Actual Distance of Structure from Property Lines - Front 320 Side 300 Side 400 Rear 420

Number of Stories 2 Heated Floor Area 1246 Total Floor Area 1542 Roof Pitch 12/12

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.

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.

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.

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.

Jerry Scott Lee

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.

Contractor's Signature (Permitee)

Contractor's License Number CBC1255824
Columbia County
Competency Card Number_____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 22nd **day of** October **20**02.

Personally known ✓ **or Produced Identification**_____

Kimberly Mott Wilson

State of Florida Notary Signature (For the Contractor)

SEAL

KIMBERLY MOTT WILSON
NOTARY PUBLIC
STATE OF FLORIDA
My Comm. Expires February 12, 2011
No. DD 639625

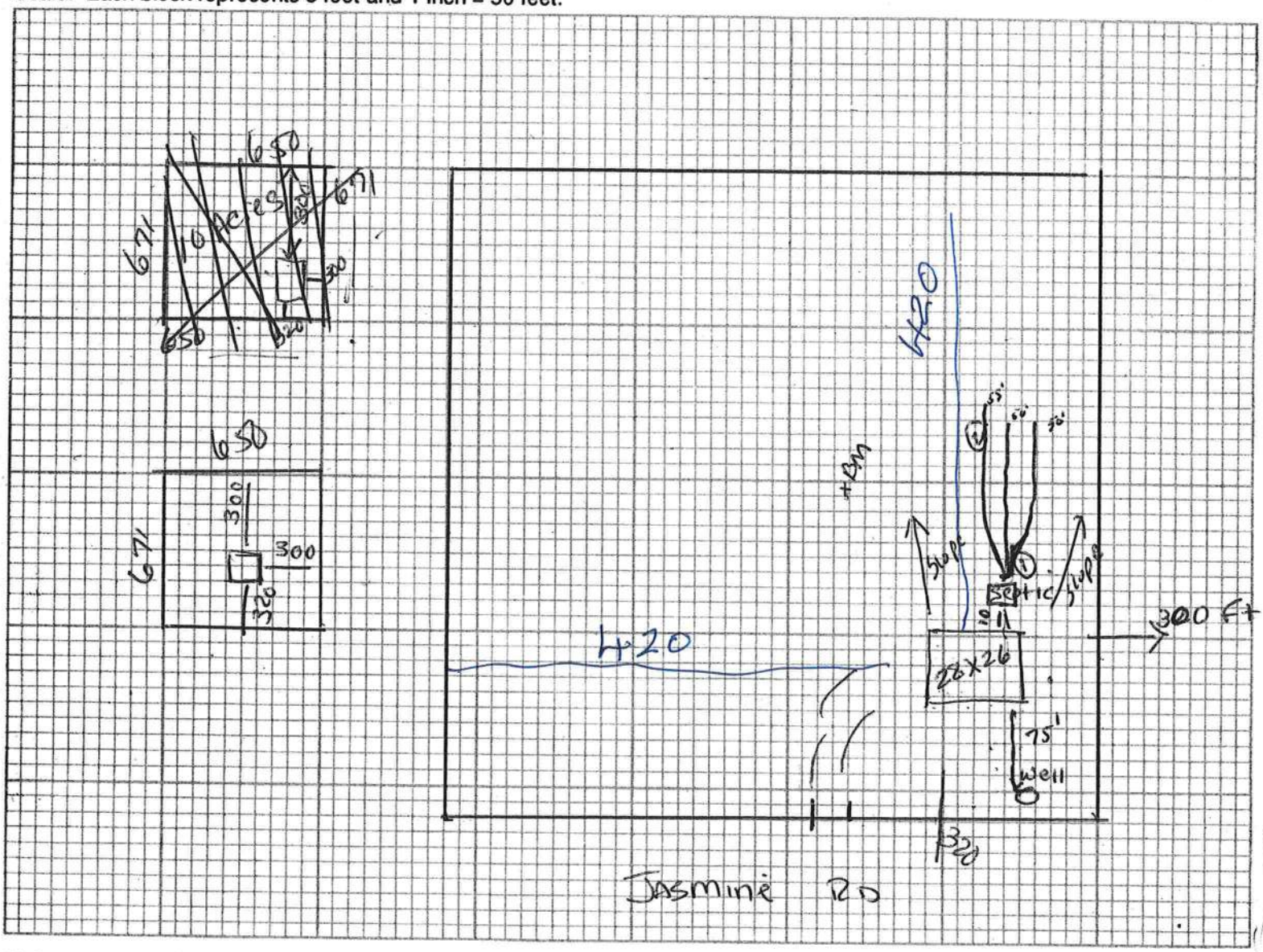
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 08-676

PART II - SITE PLAN

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



Notes: _____

Site Plan submitted by: A. Ford Adkins 10-8-08
Signature

_____
Title

Plan Approved ✓ Not Approved _____ Date 10-20-08

By Mr A Rowden Columbia County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

COLUMBIA COUNTY 9-1-1 ADDRESSING

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

Addressing Maintenance

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

DATE REQUESTED: 10/6/2008 **DATE ISSUED:** 10/8/2008

ENHANCED 9-1-1 ADDRESS:

152 SW NUTHATCH CT

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

07-6S-17-03816-422

Remarks:

LOT 22 TUSTENUGGEE TRACE S/D UNREC

RECEIVED
OCT 08 2008
By_____

Address Issued By: _____
Columbia 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.

1304

Gaylord Pump & Irrigation Inc.

P.O. Box 548
Branford, Fl. 32008
386-935-0932 Fax 386-935-0778

10/13/08

We will be drilling a well for Jerry Scott Case. The property ID number 07-6s-17-03816-422.The following equipment will be used.

4" Steel Casing
1 Hp Submersible pump
1-1/4" Galvanize drop pipe
81Gallon diaphragm tank with 24.9 gallons of draw down

This equipment meets or exceeds the Florida building code, plumbing section 612 table 612.1

Sincerely,

Donald Gaylord
Licensed Well Driller
Florida License 2630
Donald Gaylord

Gaylord Pump & Irrigation Inc.

P.O. Box 548
Branford Fl. 32008
386-935-0932 Fax 386-935-0778

RECEIVED
OCT 13 2008
By KW

Contract

Suwannee River Construction Company
Attn: Fred Allen

Date 10/08/08

4345 US 90

Phone 963-1345

Wellborn, FL 32094

Cell 362-9021

~~BEV~~# Jerry Scott Case -

Fax 963-4316

We hereby submit contract to cover work as indicated below.

1. Drill water well up to 100 feet, and up to 84 feet of casing included in contract price. *Note volume of water is guaranteed but not quality or content of water. Customer is responsible for filtration system required for purification of water.)*
2. Steel Casing 4 inch — Section 07
3. Submersible Pump 1 Hp — Township 6S
4. Galvanize Drop Pipe 1¼ inch — Range 17
5. Tank $1gallon (Pre-charged Diaphragm)/Galvanize — Location Columbia - Ft White
6. State Construction Permit ($45.00) Property ID 07-6S-17-03816-422
7. Additional Supplies Needed

It is the purchaser responsibility to run power to the pressure switch, and also run water line from Tank to where purchaser needs water, not Gaylord Pump & Irrigation

We hereby propose to furnish labor and materials as explained in this contract complete in accordance with the above specifications. For the sum of $2850.00 dollars. This is for up to 100 feet of well, and up to 84 feet of casing. If well is over 100 feet there is an additional charge of $12.50 per foot. If casing goes past 84 feet there is an additional charge of $12.50 per foot. Contract is to be paid as follows. 50% of contract due before work starts. 50% of $ -0- is $ -0- dollars. Balance due upon completion of job. Balance may be more than $2850.00 dollars because of well depth, or casing depth. Gaylord Pump & Irrigation Inc. reserves the right to come back on the property to repossess the pump, tank, and accessories if satisfactory payment is not met. Contract is void if well is in a delineated area.

In the event the company (Gaylord Pump & Irrigation Inc.) has to refer a past due contract or any part to an attorney or collection agency. The purchaser agrees to pay reasonable attorney fees, and all other cost of collection including court cost.

Purchaser / Agent has read this contract in its entirety and is in agreement with all terms stated above. *If contract is not signed within 30 days, prices are subject to change.*

Fred Allen
Purchaser / Agent

OCT-13-08
Date

AC# 3870423

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L08072300756

DATE	BATCH NUMBER	LICENSE NBR
07/23/2008	080055017	CBC1255824

The BUILDING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2010

MILLER, BENJAMIN DAVID
SUWANNEE RIVER CONSTRUCTION COMPANY INC
4345 US HWY 90
WELLBORN FL 32094

CHARLIE CRIST
GOVERNOR

CHUCK DRAGO
INTERIM SECRETARY

DISPLAY AS REQUIRED BY LAW

STATE OF FLORIDA AC# 3870423
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CBC1255824 07/23/08 080055017

CERTIFIED BUILDING CONTRACTOR
MILLER, BENJAMIN DAVID
SUWANNEE RIVER CONSTRUCTION COMP

IS CERTIFIED under the provisions of Ch.489 FS.
Expiration date: AUG 31, 2010 L08072300756

Columbia County Property Appraiser

DB Last Updated: 8/5/2008

2008 Proposed Values

Tax Record | Property Card | Interactive GIS Map | Print

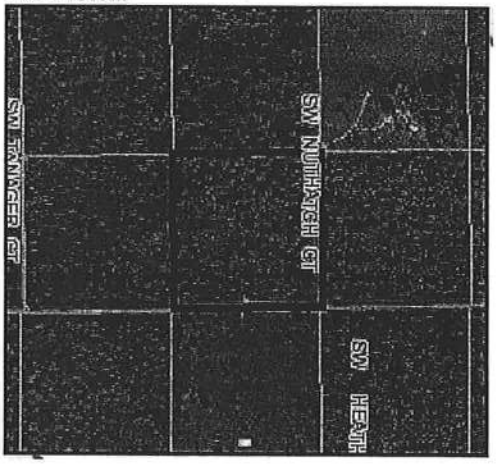
Parcel: 07-6S-17-03816-422

Search Result: 1 of 1

Owner & Property Info

Owner's Name	CASE JERRY SCOTT		
Site Address			
Mailing Address	13082 63RD LANE NORTH WEST PALM BEACH, FL 33412		
Use Desc. (code)	NO AG ACRE (009900)		
Neighborhood	12616.02	**Tax District**	3
UD Codes	MKTA02	**Market Area**	02
Total Land Area	10.020 ACRES		
Description	COMM SW COR OF SE1/4 OF SEC 12-6S-16E, RUN E ALONG SEC LINE 1310.23 FT, N 703.95 FT, E 1950.56 FT FOR POB, CONT E 650.03 FT, N 671.46 FT, W 650.03 FT, S 671.46 FT TO POB. (AKA LOT 22 TUSTENUGGEE TRACE S/D UNREC) ORB 912-495, (ALL LYING & BEING IN SEC 07-TWP 6S-RGE 17E) CT 981-348, 985-2075, WD 990-2677, 990-2679. WD 1102-1346.		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (1)	$71,392.00
Ag Land Value	cnt: (0)	$0.00
Building Value	cnt: (0)	$0.00
XFOB Value	cnt: (0)	$0.00
Total Appraised Value		$71,392.00

Just Value	$71,392.00
Class Value	$0.00
Assessed Value	$71,392.00
Exempt Value	$0.00
Total Taxable Value	$71,392.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale Vlmp	Sale Qual	Sale RCode	Sale Price
11/17/2006	1102/1346	WD	V	U	08	$33,700.00
8/1/2003	990/2679	WD	V	Q		$33,000.00
8/1/2003	990/2677	WD	V	U	04	$11,522.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
009900	AC NON-AG (MKT)	10.020 AC	1.00/1.00/1.00/1.00	$7,125.00	$71,392.00

SUWANNEE RIVER CONSTRUCTION COMPANY

"A House is only as strong as the company that builds it."

CBC1255824

October 22, 2008

Columbia County Building Department
135 Hernando Avenue
Lake City, FL 32055

I, Benjamin D. Miller, license number CBC1255824, hereby authorize Fred Allen to obtain permits in my absence.

Benjamin D. Miller

Signed this 22nd day of October, 2008

STATE OF Florida

COUNTY OF Suwannee

Notary Kimberly Mott Wilson

Notary Expires

KIMBERLY MOTT WILSON NOTARY PUBLIC STATE OF FLORIDA My Comm. Expires February 12, 2011 No. DD 639625

P.O. Box 607 * Wellborn, FL 32094 Ph 877-962-7722 Fax 386-963-4316

S/S/10 2853801803

08676

STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. AP898394
DATE PAID: 425.00
FEE PAID: 10/9/08
RECEIPT #: 12-PFD-1072244

APPLICATION FOR:
[X] New System [ ] Existing System [ ] Holding Tank [ ] Innovative
[ ] Repair [ ] Abandonment [ ] Temporary [ ] _____

APPLICANT: CASE JERRY SCOTT

AGENT: SUWANNEE RIVER CONT. CO. FRED ALLEN TELEPHONE: 963-1345 FX. 963-4316

MAILING ADDRESS: 152 S.W. NUTHATCH CELL 362-9021
FT WHITE FLA 32038

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: 22 BLOCK: _____ SUBDIVISION: TUSTENUGGEE TRACE PLATTED: _____

PROPERTY ID #: 07-65-17-03816-422 ZONING: R I/M OR EQUIVALENT: [Y / N]

PROPERY SIZE: 10 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ]<=2000GPD [ ]>2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: _____ FT

PROPERTY ADDRESS: 152 S.W NUTHATCH FT WHITE FL 32038

DIRECTIONS TO PROPERTY: Iron Jasmine to Site at Corner of Nuthatch

BUILDING INFORMATION [X] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	Log Home	1	1246	
2				
3				
4				

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

SIGNATURE: J. Fred Allen DATE: OCT-8-08

FORM 600A-2004R EnergyGauge® 4.5.2

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs

Residential Whole Building Performance Method A

Project Name:	**Case Residence**	Builder:	Miller
Address:		Permitting Office:	Columbia
City, State:	,	Permit Number:	27456
Owner:	**Scott Case**	Jurisdiction Number:	221000
Climate Zone:	**North**		

1.	New construction or existing	New	
2.	Single family or multi-family	Single family	
3.	Number of units, if multi-family	1	
4.	Number of Bedrooms	2	
5.	Is this a worst case?	Yes	
6.	Conditioned floor area (ft²)	1246 ft²	
7.	Glass type[1] and area: (Label reqd. by 13-104.4.5 if not default)		
a.	U-factor: (or Single or Double DEFAULT)	7a. Description (Dble, U=0.3) Area 107.8 ft²	
b.	SHGC: (or Clear or Tint DEFAULT)	7b. (SHGC=0.30) 98.3 ft²	
8.	Floor types		
a.	Raised Wood, Stem Wall	R=13.0, 728.0ft²	
b.	N/A		
c.	N/A		
9.	Wall types		
a.	Log, 6 inch, Exterior	R=0.0, 1392.2 ft²	
b.	N/A		
c.	N/A		
d.	N/A		
e.	N/A		
10.	Ceiling types		
a.	Single Assembly	R=19.0, 1056.0 ft²	
b.	N/A		
c.	N/A		
11.	Ducts		
a.	Sup: Unc. Ret: Con. AH: Interior	Sup. R=6.0, 156.0 ft	
b.	N/A		

12.	Cooling systems		
a.	Central Unit	Cap: 30.0 kBtu/hr SEER: 13.00	
b.	N/A		
c.	N/A		
13.	Heating systems		
a.	Electric Heat Pump	Cap: 30.0 kBtu/hr HSPF: 7.70	
b.	N/A		
c.	N/A		
14.	Hot water systems		
a.	Electric Resistance	Cap: 40.0 gallons EF: 0.92	
b.	N/A		
c.	Conservation credits (HR-Heat recovery, Solar DHP-Dedicated heat pump)		
15.	HVAC credits (CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, PT-Programmable Thermostat, MZ-C-Multizone cooling, MZ-H-Multizone heating)	PT, CF,	

Glass/Floor Area: 0.09

Total as-built points: 15511

Total base points: 17530

PASS

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

PREPARED BY: [signature]

DATE: 8/25/09

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.

GREAT SEAL OF THE STATE OF FLORIDA — IN GOD WE TRUST

BUILDING OFFICIAL: _____

DATE: _____

1 Predominant glass type. For actual glass type and areas, see Summer & Winter Glass output on pages 2&4.

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , , PERMIT #:

BASE				AS-BUILT								
GLASS TYPES .18 X Conditioned Floor Area	X BSPM	= Points		Type/SC	Overhang Ornt	Len	Hgt	Area X	SPM X	SOF	= Points	
.18	1246.0	18.59	4169.0	1.Double,U=0.34,SHGC=0.3	NE	2.0	5.7	9.5	12.95	0.85	104.0	
				2.Double,U=0.34,SHGC=0.30	SE	2.0	56.3	13.5	18.90	1.00	255.0	
				3.Double,U=0.34,SHGC=0.30	SW	2.0	5.3	13.5	17.70	0.77	183.0	
				4.Double,U=0.34,SHGC=0.30	NW	2.0	5.3	13.5	11.35	0.85	130.0	
				5.Double,U=0.34,SHGC=0.30	NW	2.0	5.3	9.5	11.35	0.85	91.0	
				6.Double,U=0.34,SHGC=0.30	NE	2.0	4.5	6.3	12.95	0.79	64.0	
				7.Double,U=0.34,SHGC=0.30	NE	2.0	4.5	23.0	12.95	0.79	235.0	
				8.Double,U=0.34,SHGC=0.30	NW	2.0	4.5	19.0	11.35	0.81	174.0	
				As-Built Total:				**107.8**			**1236.0**	
WALL TYPES	Area X	BSPM =	Points	Type			R-Value	Area X	SPM =		Points	
Adjacent	0.0	0.00	0.0	1. Log, 6 inch, Exterior			0.0	1392.2	1.50		2088.3	
Exterior	1392.2	1.70	2366.7									
Base Total:	**1392.2**		**2366.7**	**As-Built Total:**				**1392.2**			**2088.3**	
DOOR TYPES	Area X	BSPM =	Points	Type				Area X	SPM =		Points	
Adjacent	0.0	0.00	0.0	1.Exterior Insulated				42.0	4.10		172.2	
Exterior	42.0	6.10	256.2									
Base Total:	**42.0**		**256.2**	**As-Built Total:**				**42.0**			**172.2**	
CEILING TYPES	Area X	BSPM =	Points	Type			R-Value	Area X	SPM X SCM =		Points	
Under Attic	728.0	1.73	1259.4	1. Single Assembly			19.0	1056.0	5.64 X 1.00		5955.8	
Base Total:	**728.0**		**1259.4**	**As-Built Total:**				**1056.0**			**5955.8**	
FLOOR TYPES	Area X	BSPM =	Points	Type			R-Value	Area X	SPM =		Points	
Slab	0.0(p)	0.0	0.0	1. Raised Wood, Stem Wall			13.0	728.0	-1.80		-1310.4	
Raised	728.0	-3.99	-2904.7									
Base Total:			**-2904.7**	**As-Built Total:**				**728.0**			**-1310.4**	
INFILTRATION	Area X	BSPM =	Points					Area X	SPM =		Points	
	1246.0	10.21	12721.7					1246.0	10.21		12721.7	

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:

BASE			AS-BUILT					
Summer Base Points: 17868.3			**Summer As-Built Points:**					**20863.6**
Total Summer Points	X System Multiplier	= Cooling Points	Total Component (System - Points)	X Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier	= Cooling Points
			(sys 1: Central Unit 30000btuh ,SEER/EFF(13.0) Ducts:Unc(S),Con(R),Int(AH),R6.0(INS)					
			20864	1.00	(1.08 x 1.147 x 0.91)	0.260	0.902	5523.8
17868.3	**0.3250**	**5807.2**	**20863.6**	**1.00**	**1.128**	**0.260**	**0.902**	**5523.8**

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , , PERMIT #:

BASE				AS-BUILT								
GLASS TYPES .18 X Conditioned Floor Area	X BWPM	= Points		Type/SC	Overhang Ornt	Len	Hgt	Area X	WPM X	WOF	= Points	
.18	1246.0	20.17	4524.0	1.Double,U=0.34,SHGC=0.3	NE	2.0	5.7	9.5	10.61	1.01	102.0	
				2.Double,U=0.34,SHGC=0.30	SE	2.0	56.3	13.5	6.57	1.00	89.0	
				3.Double,U=0.34,SHGC=0.30	SW	2.0	5.3	13.5	7.52	1.14	115.0	
				4.Double,U=0.34,SHGC=0.30	NW	2.0	5.3	13.5	10.91	1.01	148.0	
				5.Double,U=0.34,SHGC=0.30	NW	2.0	5.3	9.5	10.91	1.01	104.0	
				6.Double,U=0.34,SHGC=0.30	NE	2.0	4.5	6.3	10.61	1.02	68.0	
				7.Double,U=0.34,SHGC=0.30	NE	2.0	4.5	23.0	10.61	1.02	248.0	
				8.Double,U=0.34,SHGC=0.30	NW	2.0	4.5	19.0	10.91	1.01	209.0	
				As-Built Total:				**107.8**			**1083.0**	
WALL TYPES	Area X	BWPM =	Points	Type			R-Value	Area X	WPM =		Points	
Adjacent	0.0	0.00	0.0	1. Log, 6 inch, Exterior			0.0	1392.2	4.50		6264.9	
Exterior	1392.2	3.70	5151.1									
Base Total:	**1392.2**		**5151.1**	**As-Built Total:**				**1392.2**			**6264.9**	
DOOR TYPES	Area X	BWPM =	Points	Type				Area X	WPM =		Points	
Adjacent	0.0	0.00	0.0	1.Exterior Insulated				42.0	8.40		352.8	
Exterior	42.0	12.30	516.6									
Base Total:	**42.0**		**516.6**	**As-Built Total:**				**42.0**			**352.8**	
CEILING TYPES	Area X	BWPM =	Points	Type			R-Value	Area X	WPM X	WCM =	Points	
Under Attic	728.0	2.05	1492.4	1. Single Assembly			19.0	1056.0	1.86 X 1.00		1964.2	
Base Total:	**728.0**		**1492.4**	**As-Built Total:**				**1056.0**			**1964.2**	
FLOOR TYPES	Area X	BWPM =	Points	Type			R-Value	Area X	WPM =		Points	
Slab	0.0(p)	0.0	0.0	1. Raised Wood, Stem Wall			13.0	728.0	1.10		800.8	
Raised	728.0	0.96	698.9									
Base Total:			**698.9**	**As-Built Total:**				**728.0**			**800.8**	
INFILTRATION	Area X	BWPM =	Points					Area X	WPM =		Points	
	1246.0	-0.59	-735.1					1246.0	-0.59		-735.1	

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:

BASE			AS-BUILT					
Winter Base Points:		**11647.9**	**Winter As-Built Points:**					**9730.5**
Total Winter Points	X System Multiplier	= Heating Points	Total Component (System - Points)	X Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier	= Heating Points
			(sys 1: Electric Heat Pump 30000 btuh ,EFF(7.7) Ducts:Unc(S),Con(R),Int(AH),R6.0					
			9730.5	1.000	(1.060 x 1.169 x 0.93)	0.443	0.950	4717.7
11647.9	**0.5540**	**6452.9**	**9730.5**	**1.00**	**1.152**	**0.443**	**0.950**	**4717.7**

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: , , , PERMIT #:

BASE				AS-BUILT							
WATER HEATING											
Number of Bedrooms	X	Multiplier	= Total	Tank Volume	EF	Number of Bedrooms	X Tank Ratio	X Multiplier	X Credit Multiplier	= Total	
2		2635.00	5270.0	40.0	0.92	2	1.00	2635.00	1.00	5270.0	
				As-Built Total:						**5270.0**	

CODE COMPLIANCE STATUS

BASE				AS-BUILT			
Cooling Points	+ Heating Points	+ Hot Water Points	= Total Points	Cooling Points	+ Heating Points	+ Hot Water Points	= Total Points
5807	**6453**	**5270**	**17530**	**5524**	**4718**	**5270**	**15511**

PASS

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: , , , PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	612.1	Comply with efficiency requirements in Table 612.1.ABC.3.2. Switch or clearly marked circ breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	612.1	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%.	
Shower heads	612.1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	610.1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated, and installed in accordance with the criteria of Section 610. Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	607.1	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	604.1, 602.1	Ceilings-Min. R-19. Common walls-Frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	

BUILDING INPUT SUMMARY REPORT

PROJECT

Title:	Case Residence	**Family Type:**	Single	**Address Type:**	Street Address
Owner:	Scott Case	**New/Existing:**	New	**Lot #:**	N/A
# of Units:	1	**Bedrooms:**	2	**Subdivision:**	N/A
Builder Name:	(blank)	**Conditioned Area:**	1246	**Platbook:**	N/A
Climate:	North	**Total Stories:**	2	**Street:**	(blank)
Permit Office:	(blank)	**Worst Case:**	Yes	**County:**	(blank)
Jurisdiction #:	(blank)	**Rotate Angle:**	45	**City, St, Zip:**	, ,

FLOORS

#	Floor Type	R-Val	Area/Perimeter	Units
1	Raised Wood/Stem Wall	13.0	728.0ft²	1

DOORS

#	Door Type	Orientation	Area	Units
1	Insulated	Exterior	21.0 ft²	2

CEILINGS

#	Ceiling Type	R-Val	Area	Base Area	Units
1	Single Assembly	19.0	1056.0 ft²	728.0 ft²	1

Credit Multipliers: None

COOLING

#	System Type	Efficiency	Capacity
1	Central Unit	SEER: 13.00	30.0 kBtu/hr

Credit Multipliers: Ceil Fn, PT

WALLS

#	Wall Type	Location	R-Val	Area	Units
1	Log - 6 inch	Exterior	0.0	1392.2 ft²	1

HEATING

#	System Type	Efficiency	Capacity
1	Electric Heat Pump	HSPF: 7.70	30.0 kBtu/hr

Credit Multipliers: PT

WINDOWS

#	Panes	Tint	Ornt	Area	OH Length	OH Hght	Units
1	D, U=0.34	SHGC=0.3	N	9.5 ft²	2.0 ft	5.7 ft	1
2	D, U=0.34	SHGC=0.30	E	13.5 ft²	2.0 ft	56.3 ft	1
3	D, U=0.34	SHGC=0.30	S	13.5 ft²	2.0 ft	5.3 ft	1
4	D, U=0.34	SHGC=0.30	W	13.5 ft²	2.0 ft	5.3 ft	1
5	D, U=0.34	SHGC=0.30	W	9.5 ft²	2.0 ft	5.3 ft	1
6	D, U=0.34	SHGC=0.30	N	6.3 ft²	2.0 ft	4.5 ft	1
7	D, U=0.34	SHGC=0.30	N	11.5 ft²	2.0 ft	4.5 ft	2
8	D, U=0.34	SHGC=0.30	W	9.5 ft²	2.0 ft	4.5 ft	2

DUCTS

#	Supply Location	Return Location	Air Handler Location	Supply R-Val	Supply Length
1	Uncond.	Cond.	Interior	6.0	156.0 ft

Credit Multipliers: None

WATER

#	System Type	EF	Cap.	Conservation Type	Con. EF
1	Electric Resistance	0.92	40.0	None	0.00

REFR.

#	Use Default?	Annual Operating Cost	Electric Rate
1	Yes	N/A	N/A

MISC

Rater Name:	CodeOnlyPro	**Class #:**	3	**Pool Size:**	0
Rater Certification #:	CodeOnlyPro	**Duct Leakage Type:**	N/A	**Pump Size:**	0.00 hp
Area Under Fluorescent:	0.0	**Visible Duct Disconnects:**	N/A	**Dryer Type:**	Electric
Area Under Incandescent:	1246.0	**Leak Free Duct System Proposed:**	No	**Stove Type:**	Electric
NOTE: Not all Rating info shown		**HRV/ERV System Present?:**	No	**Avg Ceil Hgt:**	

0810-47

SUWANNEE RIVER
LOG HOMES, INC.

4345 HIGHWAY 90 WEST, WELLBORN, FL 32094
PHONE 386-963-5647
FAX 386-963-2809

PROJECT NAME: SCOTT CASE

PROJECT LOCATION: COLUMBIA COUNTY, FLORIDA

TO WHOM IT MAY CONCERN,

THIS IS AN ADDENDUM TO THE SOIL DESIGN STATEMENT ON A.8 UNDER DESIGN LOADS/VALUES & CODES:

FOOTING DESIGN IS BASED UPON 1500PSF SOIL BEARING PRESSURE PROVIDED BY CLEAN SAND, GRAVEL OR STONE. OTHER SOIL CONDITIONS ie: CLAY, HIGH LEVEL OF ORGANICS OR OTHER UNDESIRABLE SOILS SHALL BE REPORTED TO YOUR SALES REPRESENTATIVE, PRIOR TO CONSTRUCTION.

THANK YOU,

GARY J. GILL, P.E.
10/30/08

COLUMBIA COUNTY B... Recei... for FILE CO... Code Compliance PLANS EXAMINER

Gary J. Gill, P.E. #51942
P.O. Box 187
130 West Howard Street
Live Oak FL, 32064
Phone: (386) 362-3678
Fax: (386) 362-6133
STRUCTURAL/CIVIL ENGINEERS Auth. #: 9461

GTC DESIGN GROUP

STRUCTURAL AND WIND LOAD CALCULATIONS

For

Suwannee River Log Homes

Scott Case

8/26/08

Gary Gill, P.E. 51942
P.O. Box 187
130 West Howard Street
Live Oak, FL 32064
Ph. (386) 362-3678
Fax (386) 362-6133
AUTH # 9461

WIND02 v2-21

Detailed Wind Load Design (Method 2) per ASCE 7-02

Analysis by: Gary Gill **Company Name:** GTC Design Group
Description: SRLH- Case 1

User Input Data		
Structure Type	Building	
Basic Wind Speed (V)	110	mph
Struc Category (I, II, III, or IV)	II	
Exposure (B, C, or D)	B	
Struc Nat Frequency (n1)	1	Hz
Slope of Roof	4.7	:12
Slope of Roof (Theta)	21.3	Deg
Type of Roof	Gabled	
Kd (Directonality Factor)	0.85	
Eave Height (Eht)	18.00	ft
Ridge Height (RHt)	22.80	ft
Mean Roof Height (Ht)	20.00	ft
Width Perp. To Wind Dir (B)	25.80	ft
Width Paral. To Wind Dir (L)	27.80	ft

Calculated Parameters		
Importance Factor	1	
Hurricane Prone Region (V>100 mph)		
Table 6-2 Values		
Alpha =	7.000	
zg =	1200.000	
At =	0.143	
Bt =	0.840	
Bm =	0.450	
Cc =	0.300	
l =	320.00	ft
Epsilon =	0.333	
Zmin =	30.00	ft

Calculated Parameters	
Type of Structure	
Height/Least Horizontal Dim	0.78
Flexible Structure	No

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
Izm	Cc * (33/z)^0.167	0.3048	
Lzm	l*(zm/33)^Epsilon	309.99	ft
Q	(1/(1+0.63*((B+Ht)/Lzm)^0.63))^0.5	0.9171	
Gust2	0.925*((1+1.7*Izm*3.4*Q)/(1+1.7*3.4*Izm))	0.8761	
Gust Factor Summary			
G	Since this is not a flexible structure the lessor of Gust1 or Gust2 are used	0.85	

Fig 6-5 Internal Pressure Coefficients for Buildings, Gcpi

Condition	Gcpi	
	Max +	Max -
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**

WIND02 v2-21

Detailed Wind Load Design (Method 2) per ASCE 7-02

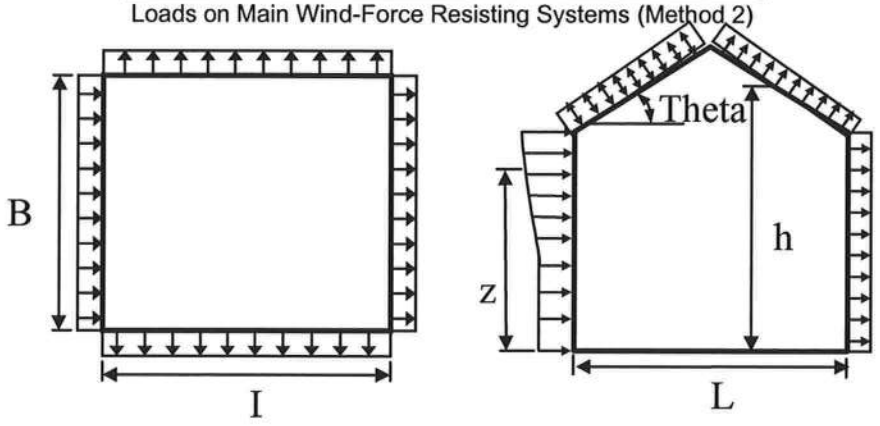
6.5.12.2.1 Design Wind Pressure - Buildings of All Heights

Elev	Kz	Kzt	qz	Pressure (lb/ft^2)						
				Windward Wall*		Leeward Wall		Total	Shear	Moment
ft			lb/ft^2	+GCpi	-GCpi	+GCpi	-GCpi	+/-Gcpi	(Kip)	(Kip-ft)
22.8	0.65	1.00	17.06	8.64	14.55	-9.72	-3.81	18.36	1.33	1.86
20	0.62	1.00	16.43	8.21	14.13	-9.72	-3.81	17.94	2.25	4.64
18	0.61	1.00	15.94	7.88	13.80	-9.72	-3.81	17.61	3.61	8.94
15	0.57	1.00	15.13	7.33	13.25	-9.72	-3.81	17.06	10.22	118.08

Note: 1) Positive forces act toward the face and Negative forces act away from the face.

Figure 6-6 - External Pressure Coefficients, Cp

Loads on Main Wind-Force Resisting Systems (Method 2)



Variable	Formula	Value	Units
Kh	2.01*(Ht/zg)^(2/Alpha)	0.62	
Kht	Topographic factor (Fig 6-4)	1.00	
Qh	.00256*(V)^2*I*Kh*Kht*Kd	16.43	psf
Khcc	Comp & Clad: Table 6-3 Case 1	0.70	
Qhcc	.00256*V^2*I*Khcc*Kht*Kd	18.45	psf

Wall Pressure Coefficients, Cp	
Surface	**Cp**
Windward Wall (See Figure 6.5.12.2.1 for Pressures)	0.8

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

Calculations for Wind Normal to 25.8 ft Face *Additional Runs may be req'd for other wind directions*	Cp	Pressure (psf) +GCpi	 -GCpi
Leeward Walls (Wind Dir Normal to 25.8 ft wall)	-0.48	-9.72	-3.81
Leeward Walls (Wind Dir Normal to 27.8 ft wall)	-0.50	-9.94	-4.02
Side Walls	-0.70	-12.73	-6.82
Roof - Wind Normal to Ridge (Theta>=10) - for Wind Normal to 25.8 ft face			
Windward - Min Cp	-0.49	-9.86	-3.94
Windward - Max Cp	-0.03	-3.37	2.55
Leeward Normal to Ridge	-0.60	-11.34	-5.42

WIND02 v2-21

Detailed Wind Load Design (Method 2) per ASCE 7-02

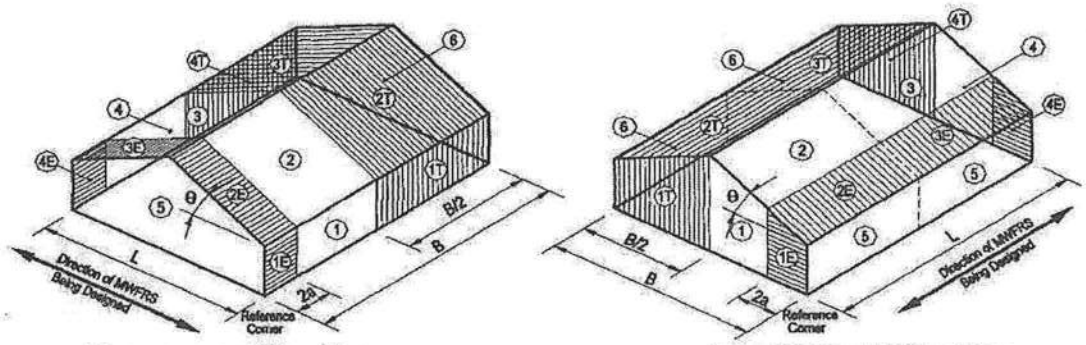
Overhang Top (Windward)	-0.49	-6.90	-6.90
Overhang Top (Leeward)	-0.60	-8.38	-8.38
Overhang Bottom (Applicable on Windward only)	0.80	10.84	10.84
Roof - Wind Parallel to Ridge (All Theta) - for Wind Normal to 27.8 ft face			
Dist from Windward Edge: 0 ft to 40 ft - Max Cp	-0.18	-5.47	0.44
Dist from Windward Edge: 0 ft to 10 ft - Min Cp	-1.12	-18.60	-12.68
Dist from Windward Edge: 10 ft to 20 ft - Min Cp	-0.79	-13.99	-8.07
Dist from Windward Edge: 20 ft to 25.8 ft - Min Cp	-0.61	-11.48	-5.56

* Horizontal distance from windward edge

Figure 6-10 - External Pressure Coefficients, GCpf

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

Kh =	2.01*(Ht/zg)^(2/Alpha)	=	0.70
Kht =	Topographic factor (Fig 6-2)	=	1.00
Qh =	0.00256*(V)^2*ImpFac*Kh*Kht*Kd	=	18.45
Theta =	Angle of Roof	=	21.3 Deg



Transverse Direction | Longitudinal Direction

Torsional Load Cases

Wind Pressures on Main Wind Force Resisting System						
Surface	GCpf	+GCpi	-GCpi	qh (psf)	Min P (psf)	Max P (psf)
1	0.53	0.18	-0.18	18.45	6.53	13.17
2	-0.57	0.18	-0.18	18.45	-13.89	-7.25
3	-0.47	0.18	-0.18	18.45	-12.05	-5.41
4	-0.42	0.18	-0.18	18.45	-11.11	-4.47
5	-0.45	0.18	-0.18	18.45	-11.62	-4.98
6	-0.45	0.18	-0.18	18.45	-11.62	-4.98
1E	0.79	0.18	-0.18	18.45	11.17	17.81
2E	-0.90	0.18	-0.18	18.45	-19.84	-13.20
3E	-0.67	0.18	-0.18	18.45	-15.66	-9.02
4E	-0.62	0.18	-0.18	18.45	-14.74	-8.10

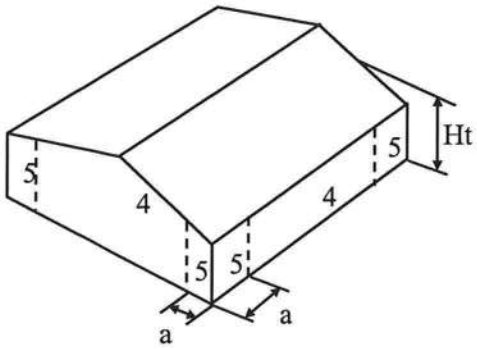
* p = qh * (GCpf - GCpi)

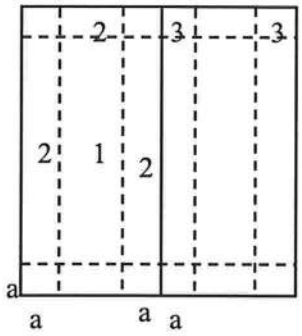
WIND02 v2-21

Detailed Wind Load Design (Method 2) per ASCE 7-02

Figure 6-11 - External Pressure Coefficients, GCp

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





Gabled Roof

7 < Theta <= 45

a = 2.58 ==> 3.00 ft

Double Click on any data entry line to receive a help Screen

Component	Width (ft)	Span (ft)	Area (ft^2)	Zone	GCp		Wind Press (lb/ft^2	
					Max	Min	Max	Min
Wall	10	1	10.00	4	1.00	-1.10	21.77	-23.61
Wall Exterior	10	1	10.00	5	1.00	-1.40	21.77	-29.15
Roof	10	1	10.00	1	0.50	-0.90	12.54	-19.92
Roof Exterior	10	1	10.00	2	0.50	-1.70	12.54	-34.68
Roof Corner	10	1	10.00	3	0.50	-2.60	12.54	-51.28
			0.00					
			0.00					
			0.00					
			0.00					
			0.00					

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

WIND02 v2-21

Detailed Wind Load Design (Method 2) per ASCE 7-02

Analysis by: Gary Gill **Company Name:** GTC Design Group
Description: SRLH- Case-2

User Input Data		
Structure Type	Building	
Basic Wind Speed (V)	110	mph
Struc Category (I, II, III, or IV)	II	
Exposure (B, C, or D)	B	
Struc Nat Frequency (n1)	1	Hz
Slope of Roof	4.7	:12
Slope of Roof (Theta)	21.3	Deg
Type of Roof	Gabled	
Kd (Directonality Factor)	0.85	
Eave Height (Eht)	18.00	ft
Ridge Height (RHt)	22.80	ft
Mean Roof Height (Ht)	20.00	ft
Width Perp. To Wind Dir (B)	27.80	ft
Width Paral. To Wind Dir (L)	25.80	ft

Calculated Parameters		
Importance Factor	1	
Hurricane Prone Region (V>100 mph)		
Table 6-2 Values		
Alpha =	7.000	
zg =	1200.000	
At =	0.143	
Bt =	0.840	
Bm =	0.450	
Cc =	0.300	
l =	320.00	ft
Epsilon =	0.333	
Zmin =	30.00	ft

Calculated Parameters	
Type of Structure	
Height/Least Horizontal Dim	0.78
Flexible Structure	No

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	l*(zm/33)^Epsilon	309.99	ft
Q	(1/(1+0.63*((B+Ht)/Lzm)^0.63))^0.5	0.9152	
Gust2	0.925*((1+1.7*Izm*3.4*Q)/(1+1.7*3.4*Izm))	0.8749	
Gust Factor Summary			
G	Since this is not a flexible structure the lessor of Gust1 or Gust2 are used	0.85	

Fig 6-5 Internal Pressure Coefficients for Buildings, Gcpi

Condition	Gcpi	
	Max +	Max -
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**

WIND02 v2-21

Detailed Wind Load Design (Method 2) per ASCE 7-02

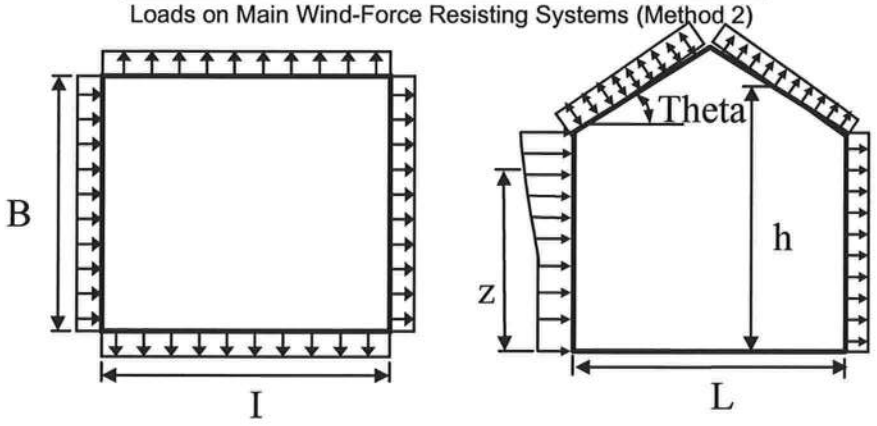
6.5.12.2.1 Design Wind Pressure - Buildings of All Heights

Elev	Kz	Kzt	qz	Pressure (lb/ft^2)						
				Windward Wall*		Leeward Wall		Total	Shear	Moment
ft			lb/ft^2	+GCpi	-GCpi	+GCpi	-GCpi	+/-Gcpi	(Kip)	(Kip-ft)
22.8	0.65	1.00	17.06	8.64	14.55	-9.94	-4.02	18.58	1.45	2.02
20	0.62	1.00	16.43	8.21	14.13	-9.94	-4.02	18.15	2.46	5.06
18	0.61	1.00	15.94	7.88	13.80	-9.94	-4.02	17.82	3.94	9.74
15	0.57	1.00	15.13	7.33	13.25	-9.94	-4.02	17.27	11.14	128.80

Note: 1) Positive forces act toward the face and Negative forces act away from the face.

Figure 6-6 - External Pressure Coefficients, Cp

Loads on Main Wind-Force Resisting Systems (Method 2)



Variable	Formula	Value	Units
Kh	2.01*(Ht/zg)^(2/Alpha)	0.62	
Kht	Topographic factor (Fig 6-4)	1.00	
Qh	.00256*(V)^2*I*Kh*Kht*Kd	16.43	psf
Khcc	Comp & Clad: Table 6-3 Case 1	0.70	
Qhcc	.00256*V^2*I*Khcc*Kht*Kd	18.45	psf

Wall Pressure Coefficients, Cp	
Surface	**Cp**
Windward Wall (See Figure 6.5.12.2.1 for Pressures)	0.8

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

Calculations for Wind Normal to 27.8 ft Face *Additional Runs may be req'd for other wind directions*	Cp	Pressure (psf) +GCpi	 -GCpi
Leeward Walls (Wind Dir Normal to 27.8 ft wall)	-0.50	-9.94	-4.02
Leeward Walls (Wind Dir Normal to 25.8 ft wall)	-0.48	-9.72	-3.81
Side Walls	-0.70	-12.73	-6.82
Roof - Wind Normal to Ridge (Theta>=10) - for Wind Normal to 27.8 ft face			
Windward - Min Cp	-0.52	-10.29	-4.37
Windward - Max Cp	-0.05	-3.65	2.26
Leeward Normal to Ridge	-0.60	-11.34	-5.42

WIND02 v2-21

Detailed Wind Load Design (Method 2) per ASCE 7-02

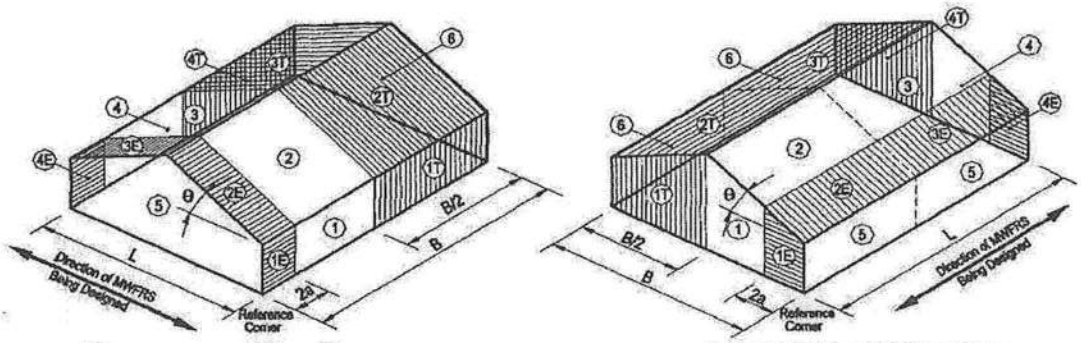
Overhang Top (Windward)	-0.52	-7.33	-7.33
Overhang Top (Leeward)	-0.60	-8.38	-8.38
Overhang Bottom (Applicable on Windward only)	0.80	10.84	10.84
Roof - Wind Parallel to Ridge (All Theta) - for Wind Normal to 25.8 ft face			
Dist from Windward Edge: 0 ft to 40 ft - Max Cp	-0.18	-5.47	0.44
Dist from Windward Edge: 0 ft to 10 ft - Min Cp	-1.08	-17.98	-12.06
Dist from Windward Edge: 10 ft to 20 ft - Min Cp	-0.81	-14.30	-8.39
Dist from Windward Edge: 20 ft to 27.8 ft - Min Cp	-0.59	-11.16	-5.25

* Horizontal distance from windward edge

Figure 6-10 - External Pressure Coefficients, GCpf

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

Kh =	2.01*(Ht/zg)^(2/Alpha)	=	0.70
Kht =	Topographic factor (Fig 6-2)	=	1.00
Qh =	0.00256*(V)^2*ImpFac*Kh*Kht*Kd	=	18.45
Theta =	Angle of Roof	=	21.3 Deg



Transverse Direction

Longitudinal Direction

Torsional Load Cases

Wind Pressures on Main Wind Force Resisting System						
Surface	GCpf	+GCpi	-GCpi	qh (psf)	Min P (psf)	Max P (psf)
1	0.53	0.18	-0.18	18.45	6.53	13.17
2	-0.57	0.18	-0.18	18.45	-13.89	-7.25
3	-0.47	0.18	-0.18	18.45	-12.05	-5.41
4	-0.42	0.18	-0.18	18.45	-11.11	-4.47
5	-0.45	0.18	-0.18	18.45	-11.62	-4.98
6	-0.45	0.18	-0.18	18.45	-11.62	-4.98
1E	0.79	0.18	-0.18	18.45	11.17	17.81
2E	-0.90	0.18	-0.18	18.45	-19.84	-13.20
3E	-0.67	0.18	-0.18	18.45	-15.66	-9.02
4E	-0.62	0.18	-0.18	18.45	-14.74	-8.10

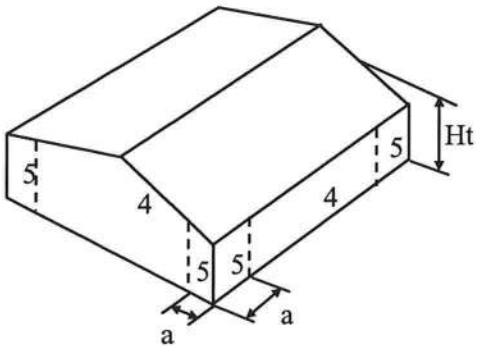
* p = qh * (GCpf - GCpi)

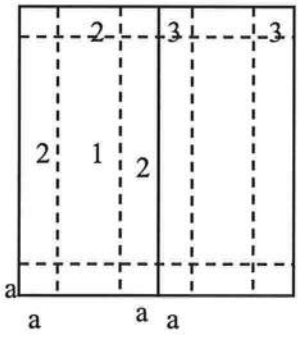
WIND02 v2-21

Detailed Wind Load Design (Method 2) per ASCE 7-02

Figure 6-11 - External Pressure Coefficients, GCp

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





Gabled Roof

7 < Theta <= 45

a = 2.58 ==> 3.00 ft

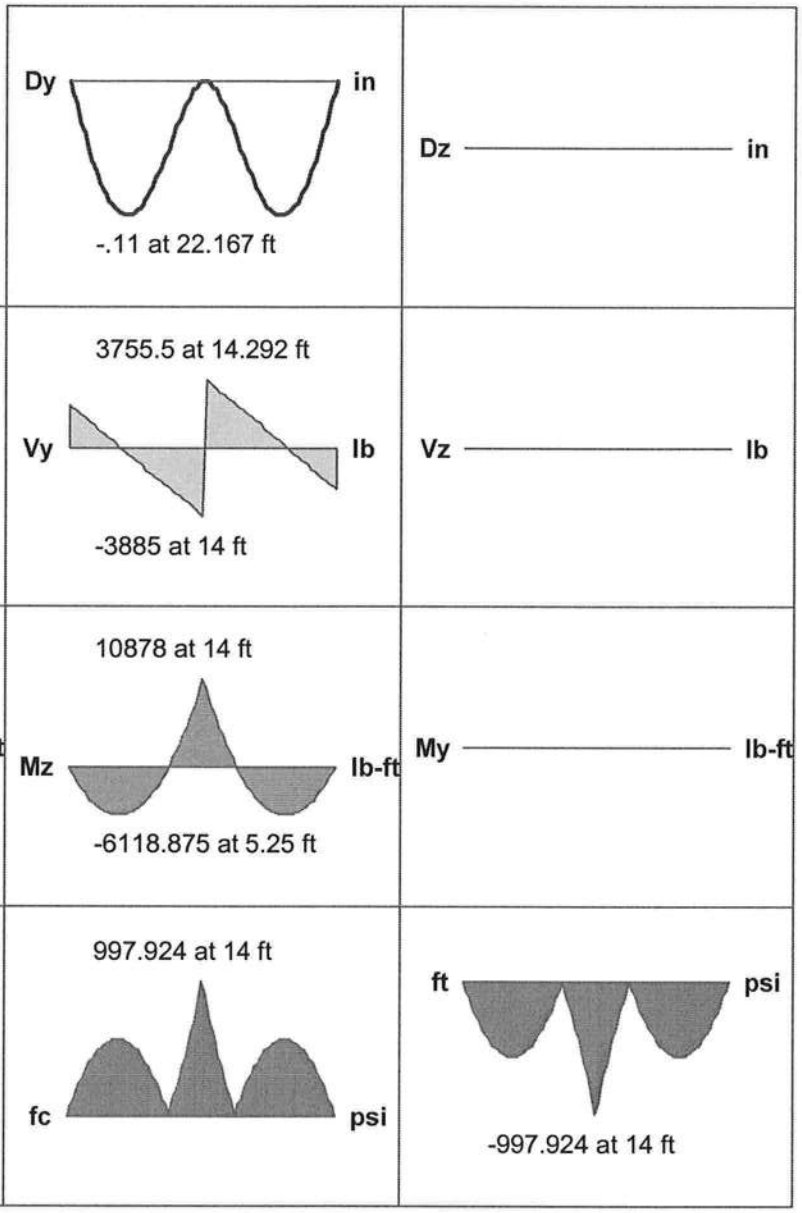
Double Click on any data entry line to receive a help Screen

Component	Width (ft)	Span (ft)	Area (ft^2)	Zone	GCp		Wind Press (lb/ft^2	
					Max	Min	Max	Min
Wall	10	1	10.00	4	1.00	-1.10	21.77	-23.61
Wall Exterior	10	1	10.00	5	1.00	-1.40	21.77	-29.15
Roof	10	1	10.00	1	0.50	-0.90	12.54	-19.92
Roof Exterior	10	1	10.00	2	0.50	-1.70	12.54	-34.68
Roof Corner	10	1	10.00	3	0.50	-2.60	12.54	-51.28
			0.00					
			0.00					
			0.00					
			0.00					
			0.00					

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

Beam: ***M1***

Shape: **5.125X12.375FS**
Material: **Glu-lam**
Length: **28 ft**
I Joint: **N1**
J Joint: **N2**
LC 3: (DL+RLL)IBC 16-10 (a)
Code Check: **0.421 (bending)**
Report Based On 97 Sections



NDS 2005 Code Check

Max Bending Check	**0.421**	Max Shear Check	**0.283 (y)**
Location	**14 ft**	Location	**14 ft**
Equation	**3.9-3**	Max Defl Ratio	**L/3067**

CD **1.25** RB **12.582** CL **.972** CV **.984**
Cr **1** Cfu **1.1** CP **.078**

	(psi)	Cm	Ct	CF
Fc'	**160.355**	1	1	1
Ft'	**1437.5**	1	1	1
Fb1'	**2368.12**	1	1	1
Fb2'	**2368.239**	1	1	1
Fv'	**293.75**	1	1	
E'	**1.8e+6**	1	1	

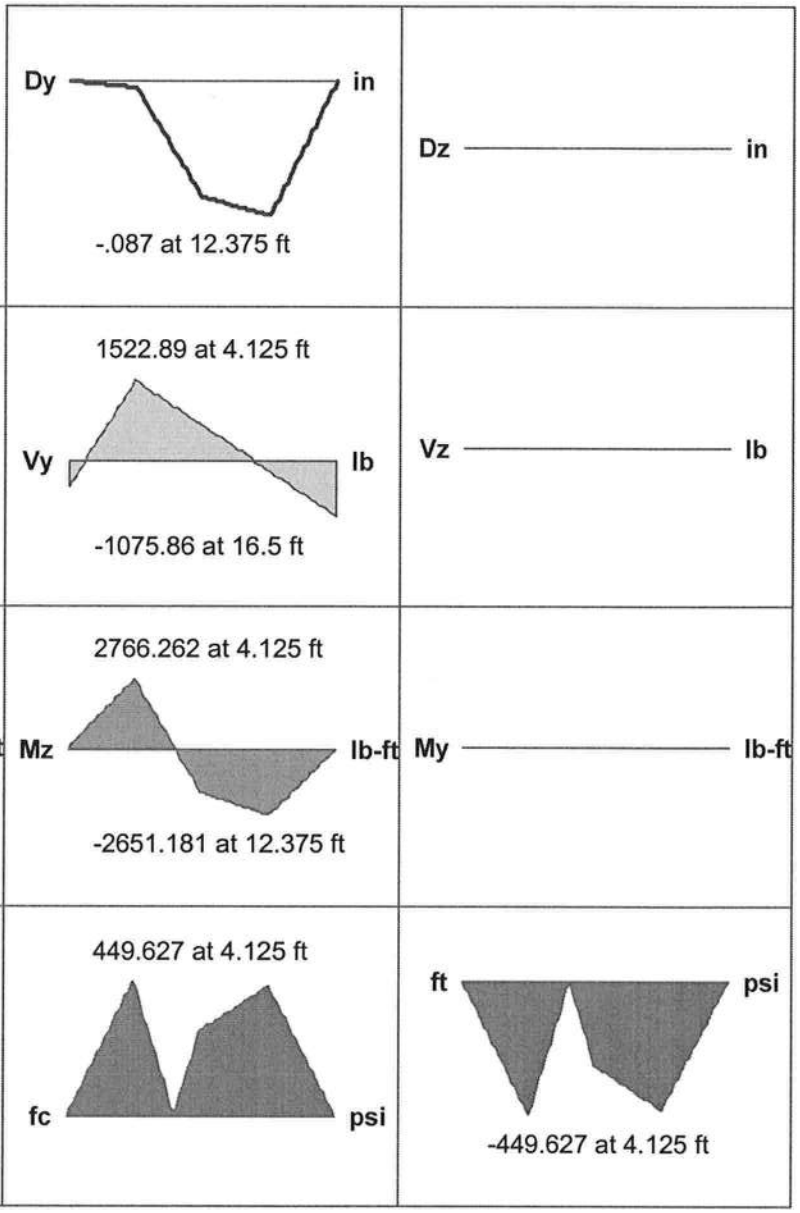
	Y-Y	Z-Z
Lb	**28 ft**	**28 ft**
le/d	**65.561**	**27.152**
Sway	**No**	**No**

Le-Bending Top **28 ft**
Le-Bending Bot **28 ft**

WARNING: Detail Report Based On Less Than 10 Sections!

Beam: ***M2***

Shape: **4X12**
Material: **DF Larch**
Length: **16.5 ft**
I Joint: **N4**
J Joint: **N6**
LC 3: (DL+RLL)IBC 16-10 (a)
Code Check: **0.400 (bending)**
Report Based On 5 Sections



NDS 2005 Code Check

Max Bending Check	**0.400**	Max Shear Check	**0.270 (y)**
Location	**3.781 ft**	Location	**3.781 ft**
Equation	**3.9-3**	Max Defl Ratio	**L/2287**

CD **1.25** RB **13.485** CL **.976**
Cr **1** Cfu **1.1** CP **.084**

	(psi)	Cm	Ct	CF
Fc'	**156.653**	**1**	**1**	**1**
Ft'	**843.75**	**1**	**1**	**1**
Fb1'	**1342.312**	**1**	**1**	**1.1**
Fb2'	**1512.5**	**1**	**1**	**1.1**
Fv'	**225**	**1**	**1**	
E'	**1.7e+6**	**1**	**1**	

	Y-Y	Z-Z
Lb	**16.5 ft**	**16.5 ft**
le/d	**56.571**	**17.6**
Sway	**No**	**No**

Le-Bending Top **16.5 ft**
Le-Bending Bot **16.5 ft**

COLUMBIA COUNTY BUILDING DEPARTMENT
RESIDENTIAL MINIMUM PLAN REQUIREMENTS AND CHECKLIST
FOR THE FLORIDA RESIDENTIAL BUILDING CODE 2004 with 2005 & 2006
Supplements and One (1) and Two (2) Family Dwellings

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current FLORIDA BUILDING CODES and the Current FLORIDA RESIDENTIAL CODE. ALL PLANS OR DRAWING SHALL PROVIDED 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 Residential Code (Florida Wind speed map) **SHALL BE USED.**

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

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

GENERAL REQUIREMENTS;

- ✓ Two (2) complete sets of plans containing the following:
- ✓ All drawings must be clear, concise and drawn to scale, details that are not used shall be marked void
- ✓ Condition space (Sq. Ft.) and total (Sq. Ft.) under roof shall be shown on the plans.
- ✓ 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 per FBC 106.1.

Site Plan information including:

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

Wind-load Engineering Summary, calculations and any details required:

- ✓ Plans or specifications must meet state compliance with FRC Chapter 3
- ○ The following information must be shown as per section FRC
- ✓ Basic wind speed (3-second gust), miles per hour
- ✓ Wind importance factor and nature of occupancy
- ○ Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated
- ○ The applicable internal pressure coefficient, Components and Cladding The design wind pressure in terms of psf (kN/m²), to be used for the design of exterior component and cladding materials not specifally designed by the registered design professional.

Elevations Drawing including:

- ✓ All side views of the structure
- ✓ Roof pitch
- ✓ Overhang dimensions and detail with attic ventilation
- ○ Location, size and height above roof of chimneys
- ○ Location and size of skylights with Florida Product Approval
- ✓ Number of stories
- ○ e) Building height from the established grade to the roofs highest peak

Floor Plan including:

- ✓ Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies and raised floor surfaces located more than 30 inches above the floor or grade
- ○ All exterior and interior shear walls indicated
- ○ Shear wall opening shown (Windows, Doors and Garage doors
- ○ Emergency escape and rescue opening in each bedroom (net clear opening shown)
- ○ Safety glazing of glass where needed
- ○ Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 of FRC)
- ✓ Stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails (see FRC 311)
- ✓ Plans must show and identify accessibility of bathroom (see FRC 322)

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

Foundation Plans Per FRC 403:

- ✓ a) Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.
- ✓ b) All posts and/or column footing including size and reinforcing
- ○ c) Any special support required by soil analysis such as piling.
- ○ d) Assumed load-bearing valve of soil_____ (psf)
- ✓ e) Location of horizontal and vertical steel, for foundation or walls (include # size and type)

CONCRETE SLAB ON GRADE Per FRC R506

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

PROTECTION AGAINST TERMITES Per FRC 320:

- ✓ 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

Masonry Walls and Stem walls (load bearing & shear Walls) FRC Section R606

- ✓ Show all materials making up walls, wall height, and Block size, mortar type
- ✓ 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

- ✓ Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer
- ✓ Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or priers
- ✓ Girder type, size and spacing to load bearing walls, stem wall and/or priers
- ✓ Attachment of joist to girder
- ✓ Wind load requirements where applicable
- ○ Show required under-floor crawl space
- ✓ Show required amount of ventilation opening for under-floor spaces
- ○ Show required covering of ventilation opening.
- ✓ 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 & intermediate of the areas structural panel sheathing
- ○ Show Draft stopping, Fire caulking and Fire blocking
- ○ Show fireproofing requirements for garages attached to living spaces, per FRC section R309
- ○ Provide live and dead load rating of floor framing systems (psf).

WOOD WALL FRAMING CONSTRUCTION FRC CHAPTER 6

- Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls.
- Fastener schedule for structural members per table R602.3 (1) are to be shown.
- 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
- 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.
- Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FRC Table R502.5 (1)
- Indicate where pressure treated wood will be placed.
- Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas
- A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail

ROOF SYSTEMS:

- Truss design drawing shall meet section FRC R802.10 Wood trusses. Include a layout and truss details and be signed and sealed by Fl. Pro. Eng.
- Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters
- Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details
- Provide dead load rating of trusses

Conventional Roof Framing Layout Per FRC 802:

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

ROOF SHEATHING FRC Table R602,3(2) FRC 803

- Include all materials which will make up the roof decking, identification of structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing on the edges & intermediate areas

ROOF ASSEMBLIES FRC Chapter 9

- Include all materials which will make up the roof assembles covering; with Florida Product Approval numbers for each component of the roof assembles covering.

FCB Chapter 13 Florida Energy Efficiency Code for Building Construction

- Residential construction shall comply with this code by using the following compliance methods in the FBC Subchapter 13-6, 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
- Show the insulation R value for the following areas of the structure: Attic space, Exterior wall cavity and Crawl space (if applicable)

HVAC information shown

- Manual J sizing equipment or equivalent computation
- Exhaust fans locations in bathrooms

Plumbing Fixture layout shown

- All fixtures waste water lines shall be shown on the foundation plan

Electrical layout shown including:

- Switches, outlets/receptacles, lighting and all required GFCI outlets identified
- Ceiling fans
- Smoke detectors
- Service panel, sub-panel, location(s) and total ampere ratings

- 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.
- Appliances and HVAC equipment and disconnects
- Arc Fault Circuits (AFCI) in bedrooms

- Notarized Disclosure Statement for Owner Builders

- Notice of Commencement Recorded (in the Columbia County Clerk Office) Notice Of Commencement is required to be filed with the building department Before Any Inspections Will Be Done.

Private Potable Water

- Size of pump motor
- Size of pressure tank
- Cycle stop valve if used

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

- 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 the Environmental Health permit, existing septic approval or sewer tap approval is required before a building permit can be issued. (386) 758-1058 (Toilet facilities shall be provided for construction workers)

- City Approval: If the project is to be located within the city limits of the Town of Fort White, prior approval is required. The Town of Fort White approval letter is required to be submitted by the owner or contractor to this office when applying for a Building Permit. (386) 497-2321

- Flood Information: All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.8 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.7 of the Columbia County Land Development Regulations. CERTIFIED FINISHED FLOOR ELEVATIONS WILL BE REQUIRED ON ANY PROJECT WHERE THE BASE FLOOD ELEVATION (100 YEAR FLOOD) HAS BEEN ESTABLISHED. A development permit will also be required. The 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 the 911 address has been issued, then the proper Paper work from the 911 Addressing Departments must be submitted. (386) 758-1125

ALL REQUIRED INFORMATION IS TO BE SUBMITTED FOR REVIEW. NOTIFICATION WILL BE GIVEN WHEN THE APPLICATION AND PLANS ARE APPROVED AND READY TO PERMIT.

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

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
1. Swinging			
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung			
2. Horizontal Slider			
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			
2. Soffits			
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles			
2. Underlayments			
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			
12. Roofing Slate			

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives – Coatings			
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			
2. Other			
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor			
2. Truss plates			
3. Engineered lumber			
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

_____

_____

_____

_____ _____

Contractor or Contractor's Authorized Agent Signature Print Name Date

_____ _____

Location Permit # **(FOR STAFF USE ONLY)**

NOTICE OF COMMENCEMENT

Inst:200812019379 Date:10/23/2008 Time:11:31 AM
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1160 P:2507

Tax Parcel Identification Number 07-6S-17-03816-422

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)*: SE 1/4 SECTION OF ~~TOWNSHIP~~ SECTION 12 TOWNSHIP 6 SOUTH RANGE 6 EAST COLUMBIA COUNTY
   a) Street *(job)* Address: _____
2. General description of improvements: _____
3. Owner Information
   a) Name and address: Jerry Scott Case
   b) Name and address of fee simple titleholder (if other than owner) _____
   c) Interest in property _____
4. Contractor Information
   a) Name and address: Suwannee River Const. Co, Inc. PO Box 607, Wellborn, FL 32094
   b) Telephone No.: (386) 963-1345 Fax No. (Opt.) _____
5. Surety Information
   a) Name and address: _____
   b) Amount of Bond: _____
   c) Telephone No.: _____ Fax No. (Opt.) _____
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.: _____ Fax No. (Opt.) _____
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(l)(b), Florida Statutes:
   a) Name and address: _____
   b) Telephone No.: _____ 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)**: _____

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

10. Jerry Scott Case
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager

Jerry Scott Case
Print Name

The foregoing instrument was acknowledged before me , a Florida Notary, this 6th day of October, 2008, by:

Jerry Scott Case as _____ **(type of authority, e.g. officer, trustee, attorney fact) for** _____ **(name of party on behalf of whom instrument was executed).**

Personally Known ✓ OR Produced Identification ____ Type _____

Notary Signature Kimberly Mott Wilson Notary Stamp or Seal:

KIMBERLY MOTT WILSON
NOTARY PUBLIC
My Comm. Expires
February 12, 2011
No. DD 639625
STATE OF FLORIDA

—AND—

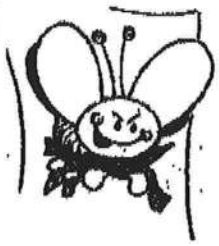
11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

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

#27456

Noling Pest Control

Cory Noling, Owner
Phone (386) 454-3883
~~15702 NW SR 45 (32643)~~
P.O. Box 949 (32655)
High Springs, Florida



CERTIFICATE OF COMPLIANCE OF TERMITE PROTECTION

(AS REQUIRED BY FLORIDA BUILDING CODE (FBC) 1816.1.7)

Scott Case 1525W Nuthatch Ct Ft.
Address of Treatment of Lot/Block of Treatment

Premise Pro- Soil Barrier
Method of Termite Prevention Treatment-soil barrier, wood treatment, bait system, other (describe)

The building has received a complete treatment for the prevention of subterranean termites. Treatment is in accordance with rules and laws established by the Florida Department of Agriculture and Consumer Services.

Authorized Signature

8-3-09
Date

Permit # 9000 27456

CERTIFICATE OF

OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

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

Parcel Number 07-6S-17-03816-422 **Building permit No.** 000027456

Use Classification SFD,UTILITY **Fire:** 24.44

Permit Holder BENJAMIN MILLER **Waste:** 33.50

Owner of Building JERRY SCOTT CASE **Total:** 57.94

Location: 152 SW NUTHATCH CT., FT. WHITE, FL

Date: 08/14/2009

Wayne H. Russ

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)