
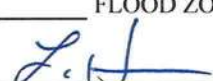



DATE	01/30/2013		Columbia County Building Permit			PERMIT			
						000030753			
This Permit Must Be Prominently Posted on Premises During Construction									
APPLICANT	PAUL FOUNTAIN			PHONE	386.628.2199				
ADDRESS	4423	SW HERLONG ST		FORT WHITE	FL	32038			
OWNER	PAUL & NANCY FOUNTAIN			PHONE	386.628.2199				
ADDRESS	4432	SW HERLONG STREET		FORT WHITE	FL	32038			
CONTRACTOR	PAUL FOUNTAIN			PHONE	386.628.2199				
LOCATION OF PROPERTY	47-S TO HERLONG, TL TO 1/2 MILE ON R, JUST PAST SKYLINE LOOP								
TYPE DEVELOPMENT	SFD, UTILITY			ESTIMATED COST OF CONSTRUCTION	134000.00				
HEATED FLOOR AREA	1504.00		TOTAL AREA	2680.00	HEIGHT	25.00	STORIES	1	
FOUNDATION	CONCRETE		WALLS	FRAMED	ROOF PITCH	6/12	FLOOR	SLAB	
LAND USE & ZONING	AG-3			MAX. HEIGHT	35				
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	10-6S-16-03815-144			SUBDIVISION	CARDINAL FARMS UNREC				
LOT	44	BLOCK		PHASE		UNIT		TOTAL ACRES	9.62
1939				OWNER					
Culvert Permit No.	Culvert Waiver	Contractor's License Number		Applicant/Owner/Contractor					
APPROV WAIVER	13-0042	BK		TC					
Driveway Connection	Septic Tank Number	LU & Zoning checked by		Approved for Issuance			New Resident		
COMMENTS: FLOOR ONE FOOT ABOVE THE ROAD, NOC ON FILE									
WAIVER APPROVED 4/18/12- 1939									
OWNER BUILDER DISCLOSURE REC'D					Check # or Cash		2006		

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

BUILDING PERMIT FEE \$	670.00	CERTIFICATION FEE \$	13.40	SURCHARGE FEE \$	13.40
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	771.80
INSPECTORS OFFICE			CLERKS OFFICE		

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY.

NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS PERMITTED DEVELOPMENT.

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

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

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



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

OWNER BUILDER DISCLOSURE STATEMENT

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed and bonded in Florida and to list his or her license numbers on permits and contracts.

I understand that I may build or improve a one-family or two-family residence or farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

I understand that it is frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

I understand that I 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 my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or Internet website address <http://www.myflorida.com/dbpr/pro/cilb/index.html> for more information about licensed contractors.

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

4432 SW HERLONG RD. Ft. White, FL 32038

I agree to notify Columbia County Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

I understand that if I hire subcontractors they must be licensed for that type of work in Columbia County, ex: framing, stucco, masonry, and state registered builders. Registered Contractors must have a minimum of \$300,000.00 in General Liability insurance coverage and the proper workers' compensation. Specialty Contractors must have a minimum of \$100,000.00 in General Liability insurance coverage and the proper workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to Columbia County Building Department.

TYPE OF CONSTRUCTION

- ☒ Single Family Dwelling () Two-Family Residence () Farm Outbuilding
() Addition, Alteration, Modification or other Improvement
() Commercial, Cost of Construction _____ Construction of _____
() Other _____

I Paul/Nancy Fountain, 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 allowing this exception for the construction permitted by Columbia County Building Permit.

Nancy Fountain Date 1-14-13
Owner Builder Signature

NOTARY OF OWNER BUILDER SIGNATURE

The above signer is personally known to me or produced identification FL Drivers License

Notary Signature Amanda Edenfield Date 1-14-2013



FOR BUILDING DEPARTMENT USE ONLY

I hereby certify that the above listed owner builder has been given notice of the restriction stated above.

Building Official/Representative Daniel L. [Signature]

FUDL F535693513340

FUDL F535632496100

Revised: 7-23-09
DISCLOSURE STATEMENT 09
Documents: B&Z Forms



Columbia County Property Appraiser - Interactive Record Search & GIS Mapping System -

[New Search](#)
[Search Results](#)
[Parcel Details](#)
[GIS Map](#)
[HOME](#)
[News Releases](#)
[Record Search](#)
[GIS Map](#)
[Sales Report](#)
[TAX Estimator](#)
[General Info](#)
[Exemptions](#)
[Amendment 1](#)
[Amendment 10](#)
[AG Classification](#)
[Tax Rates](#)
[T P P](#)
[HB 909](#)
[F A Q](#)
[Budget](#)
[Homestead Fraud](#)
[Download Data](#)
[Download Forms](#)
[Important Dates](#)
[Links](#)
[Contact Us](#)

Columbia County Property Appraiser

CAMA updated: 12/19/2012

2012 Tax Year

Parcel: 10-6S-16-03815-144

[<< Next Lower Parcel](#)
[Next Higher Parcel >>](#)
[Tax Collector](#)
[Tax Estimator](#)
[Property Card](#)
[Parcel List Generator](#)
[Interactive GIS Map](#)
[Print](#)
[<< Prev](#)

Search Result: 7 of 8

[Next >>](#)

Owner & Property Info

Owner's Name	FOUNTAIN PAUL & NANCY		
Mailing Address	225 SW PECAN GLEN LAKE CITY, FL 32024		
Site Address	4432 SW HERLONG ST		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	11616
Land Area	9.620 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 44 CARDINAL FARMS UNREC: COMM AT SE COR OF SEC 11, RUN W 5311.34 FT, N 1995.16 FT, W 60.18 FT, N 2780.95 FT, W 872.34 FT FOR POB, W 872.01 FT, N 495.08 FT, TO THE S R/W OF OLD ICHETUCKNEE RD, E ALONG R/W 872 FT MOL, S 506.61 FT TO POB, AG 1034-485, QC 1176-1554 & WD 1229-1434 & EX 0.39 ACRES FOR CO RD R/W TAKEN PRCL #09 AS DESC ORB 1238-576			



Property & Assessment Values

2012 Certified Values		
Mkt Land Value	cnt: (0)	\$40,473.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$40,473.00
Just Value		\$40,473.00
Class Value		\$0.00
Assessed Value		\$40,473.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$40,473 Other: \$40,473 Schl:	\$40,473

2013 Working Values

NOTE:
2013 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
2/8/2012	1229/1434	WD	V	Q	01	\$52,900.00
6/18/2009	1176/1554	QC	V	U	11	\$24,000.00
7/1/2004	1034/485	AG	V	Q		\$50,000.00

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						

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: 4/5/2012 DATE ISSUED: 4/11/2012

ENHANCED 9-1-1 ADDRESS:

4432 SW HERLONG ST
FORT WHITE FL 32038
PROPERTY APPRAISER PARCEL NUMBER:
10-6S-16-03815-144

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL.

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.

LYNCH WELL DRILLING, INC.

173 SW Tustenuggee Ave

Lake City, FL. 32025

Phone 386-752-6677

Fax 386-752-1477

Building Permit # _____ Owner's Name Paul Fountain

Well Depth 130 Ft. Casing Depth 87 Ft. Water Level 53 Ft.

Casing Size 4 inch Steel Pump Installation: Deep Well Submersible

Pump Make Schaefer Pump Model 20SV15-54 HP 1 1/2 HP

System Pressure (PSI) 50 On 40 Off 50 Average Pressure 50

Pumping System GPM at average pressure and pumping level 20 (GPM)

Tank Installation: Bladder / Galvanized Make DSI Tank
Model PC286 Size 86 gallon

Tank Draw-down per cycle at system pressure 27 gallons

**I HEREBY VERIFY THAT THIS WATER WELL SYSTEM HAS BEEN
INSTALLED AS PER THE ABOVE INFORMATION.**

Linda Newcomb
Signature

2609
License Number

Linda Newcomb
Print Name

9/19/2012
Date

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1301-24 CONTRACTOR Paul Fountain PHONE 386 628.2999

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

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

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

ELECTRICAL	Print Name <u>Paul M. Fountain</u> License #: <u>OWNER-BUILDER</u>	Signature <u>[Signature]</u> Phone #: <u>386-628-2199</u>
MECHANICAL/ A/C	Print Name <u>Wiring</u> License #: <u>for it ONLY - NOT</u>	Signature <u>[Signature]</u> Phone #: <u>INSTALLING NOW</u>
PLUMBING/ GAS	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name <u>N/A</u> License #: _____	Signature <u>N/A</u> Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

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

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

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

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DATE REQUESTED: 4/5/2012 DATE ISSUED: 4/11/2012

ENHANCED 9-1-1 ADDRESS:

4432 SW HERLONG ST

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

10-6S-16-03815-144

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL.

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.

HERLONG COMPANY
INC.

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 10-6S-16-03815-144

Building permit No. 000030753

Use Classification SFD, UTILITY

Fire: 0.00

Permit Holder PAUL FOUNTAIN

Waste: 0.00

Owner of Building PAUL & NANCY FOUNTAIN

Total: 0.00

Location: 4432 SW HERLONG ST, FORT WHITE, FL 32038

Date: 11/17/2016



Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



Columbia County Building Permit Application

For Office Use Only		Application # <u>1301-24</u>	Date Received <u>1/15</u>	By <u>RL</u>	Permit # <u>30753</u>
Zoning Official <u>RLK</u>	Date <u>23 Jan 2013</u>	Flood Zone <u>X</u>	Land Use <u>A-3</u>	Zoning <u>A-3</u>	
FEMA Map # <u>N/A</u>	Elevation <u>N/A</u>	MFE <u>1.25</u>	River <u>N/A</u>	Plans Examiner <u>L.C.</u>	Date <u>1-22-13</u>
Comments					
<input checked="" type="checkbox"/> NOC <input checked="" type="checkbox"/> EH <input checked="" type="checkbox"/> Deed or PA <input checked="" type="checkbox"/> Site Plan <input checked="" type="checkbox"/> State Road Info <input checked="" type="checkbox"/> Well letter <input checked="" type="checkbox"/> 911 Sheet <input type="checkbox"/> Parent Parcel # _____ <input type="checkbox"/> Dev Permit # _____ <input type="checkbox"/> In-Floodway <input type="checkbox"/> Letter of Auth. from Contractor <input checked="" type="checkbox"/> F W Comp. letter IMPACT FEES: EMS _____ Fire _____ Corr _____ <input checked="" type="checkbox"/> Sub VF Form Road/Code _____ School _____ = TOTAL (Suspended) <input checked="" type="checkbox"/> App Fee Paid					

Septic Permit No. 13-0042

Fax _____

Name Authorized Person Signing Permit Paul Fountain + Nancy Fountain Phone 386-628-2199

Address 4432 Herlong St Ft. White FL 32038

Owners Name Paul Fountain + Nancy Fountain Phone 386-628-2199

911 Address 4432 SW Herlong St. Ft. White FL 32038

Contractors Name owner/Builder Phone 386-628-2199

Address 4432 SW Herlong St. Ft. White FL 32038

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address N/A

Architect/Engineer Name & Address Mark Disosway P.E. P.O. Box 868 Lake City FL

Mortgage Lenders Name & Address N/A

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

Property ID Number 10-65-16-03815-144 Estimated Cost of Construction 50,000

Subdivision Name unrecorded Cardinal Farms Lot 44 Block _____ Unit _____ Phase _____

Driving Directions From Downtown Lake City: Drive South on HW 47 (14.5 miles) to SW Herlong St. - turn Left (East) Drive approx 1 mile ON 4432 on Right (South Side of Herlong) Across Appalachee Terr
 Number of Existing Dwellings on Property 0

Construction of Single Family Dwelling Total Acreage 9.6 mol Lot Size _____

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 25 ft.

Actual Distance of Structure from Property Lines - Front 152 ft. Side 163 ft. Side _____ Rear _____

Number of Stories 1 Heated Floor Area 1504 Total Floor Area 2720 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. **CODE:** Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code. Page 1 of 2 (Both Pages must be submitted together.) Revised 1-11

RL spoke w/ Mr. Fountain 1.23.13 clt# 2005
Tried to call - could not leave message 1-28-13

#30753

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 68

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

4432 SW Herlong St., Ft. White, FL,

1. New construction or existing	New (From Plans)		9. Wall Types	Insulation	Area
2. Single family or multiple family	Single-family		a. Frame - Wood, Exterior	R=19.0	2395.30 ft ²
3. Number of units, if multiple family	1		b. Frame - Wood, Exterior	R=26.0	544.00 ft ²
4. Number of Bedrooms	3		c. N/A	R=	ft ²
5. Is this a worst case?	No		d. N/A	R=	ft ²
6. Conditioned floor area (ft ²)	2642		10. Ceiling Types	Insulation	Area
7. Windows**	Description	Area	a. Cathedral/Single Assembly (Vented)	R=0.0	2590.00 ft ²
a. U-Factor:	Dbl, U=0.31	260.01 ft ²	b. N/A	R=	ft ²
SHGC:	SHGC=0.31		c. N/A	R=	ft ²
b. U-Factor:	Dbl, U=0.32	25.07 ft ²	11. Ducts		R ft ²
SHGC:	SHGC=0.27		a. Sup: Bedroom 2, Ret: Bedroom 2, AH: Bedroom		6.4000000
c. U-Factor:	N/A	ft ²	12. Cooling systems	kBtu/hr	Efficiency
SHGC:			a. Central Unit	35.7	SEER:14.00
d. U-Factor:	N/A	ft ²	13. Heating systems	kBtu/hr	Efficiency
SHGC:			a. Electric Heat Pump	48.1	HSPF:8.40
Area Weighted Average Overhang Depth:		1.000 ft.	14. Hot water systems		Cap: 40 gallons
Area Weighted Average SHGC:		0.306	a. Electric		EF: 0.92
8. Floor Types	Insulation	Area	b. Conservation features		
a. Slab-On-Grade Edge Insulation	R=0.0	2021.70 ft ²	None		
b. Floor Over Other Space	R=0.0	620.75 ft ²	15. Credits		CF, CV, Pstat
c. N/A	R=	ft ²			

I certify that this home has complied with the Florida Energy Efficiency Code for Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features.

Builder Signature: _____ Date: _____

Address of New Home: _____ City/FL Zip: _____



*Note: This is not a Building Energy Rating. If your Index is below 70, your home may qualify for energy efficient mortgage (EEM) incentives if you obtain a Florida EnergyGauge Rating. Contact the EnergyGauge Hotline at (321) 638-1492 or see the EnergyGauge web site at energygauge.com for information and a list of certified Raters. For information about the Florida Building Code, Energy Conservation, contact the Florida Building Commission's support staff.

**Label required by Section 303.1.3 of the Florida Building Code, Energy Conservation, if not DEFAULT.

#30753

Residential System Sizing Calculation

Summary

Paul and Nancy Fountain
4432 SW Herlong St.
Ft. White, FL

Project Title:
Paul and Nancy Fountain Residence

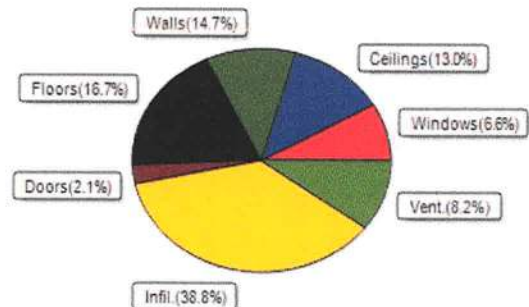
10/15/2015

Location for weather data: Gainesville, FL - Defaults: Latitude(29.7) Altitude(152 ft.) Temp Range(M)					
Humidity data: Interior RH (50%) Outdoor wet bulb (77F) Humidity difference(51gr.)					
Winter design temperature(TMY3 99%)	30	F	Summer design temperature(TMY3 99%)	94	F
Winter setpoint	70	F	Summer setpoint	75	F
Winter temperature difference	40	F	Summer temperature difference	19	F
Total heating load calculation	53659	Btuh	Total cooling load calculation	43425	Btuh
Submitted heating capacity	% of calc	Btuh	Submitted cooling capacity	% of calc	Btuh
Total (Electric Heat Pump)	89.6	48100	Sensible (SHR = 0.75)	98.8	26778
Heat Pump + Auxiliary(0.0kW)	89.6	48100	Latent	54.7	8926
			Total (Electric Heat Pump)	82.2	35704

WINTER CALCULATIONS

Winter Heating Load (for 2642 sqft)

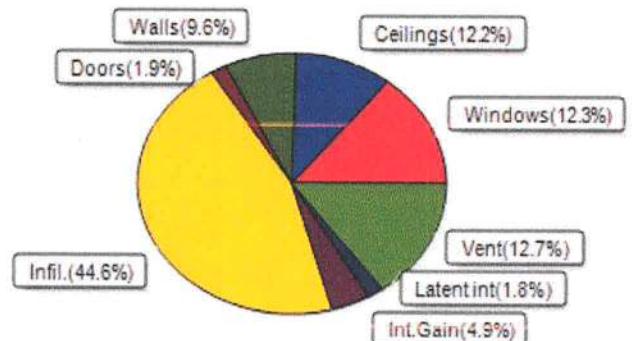
Load component		Load	
Window total	285 sqft	3545	Btuh
Wall total	2594 sqft	7886	Btuh
Door total	60 sqft	1104	Btuh
Ceiling total	2590 sqft	6953	Btuh
Floor total	See detail report	8968	Btuh
Infiltration	476 cfm	20824	Btuh
Duct loss		0	Btuh
Subtotal		49280	Btuh
Ventilation	100 cfm	4379	Btuh
TOTAL HEAT LOSS		53659	Btuh



SUMMER CALCULATIONS

Summer Cooling Load (for 2642 sqft)

Load component		Load	
Window total	285 sqft	5321	Btuh
Wall total	2594 sqft	4152	Btuh
Door total	60 sqft	828	Btuh
Ceiling total	2590 sqft	5319	Btuh
Floor total		0	Btuh
Infiltration	350 cfm	7278	Btuh
Internal gain		2120	Btuh
Duct gain		0	Btuh
Sens. Ventilation	100 cfm	2080	Btuh
Blower Load		0	Btuh
Total sensible gain		27097	Btuh
Latent gain(ducts)		0	Btuh
Latent gain(infiltration)		12076	Btuh
Latent gain(ventilation)		3452	Btuh
Latent gain(internal/occupants/other)		800	Btuh
Total latent gain		16328	Btuh
TOTAL HEAT GAIN		43425	Btuh



8th Edition

EnergyGauge® System Sizing

PREPARED BY: Paul and Nancy Fountain

DATE: 10/15/2015

#30753

Building Input Summary Report

PROJECT

Title:	Paul and Nancy Fountain Res	Bedrooms:	3	Address Type:	Street Address
Building Type:	User	Bathrooms:	2	Lot #	
Owner:	Paul and Nancy Fountain	Conditioned Area:	2642 sq.ft.	Block/SubDivision:	
# of Units:	1	Total Stories:	2	PlatBook:	
Builder Name:	Owner/Builder	Worst Case:	No	Street:	4432 SW Herlong St.
Permit Office:		Rotate Angle:	0	County:	Columbia
Jurisdiction:		Cross Ventilation:	Yes	City, State, Zip:	Ft. White , FL ,
Family Type:	Single-family	Whole House Fan:	No		
New/Existing:	New (From Plans)	Terrain:	Suburban		
Year Construct:	2013	Shielding:	Suburban		
Comment:					

CLIMATE

Design Location	Tmy Site	Design Temp 97.5 %	Design Temp 2.5 %	Int Design Temp Winter	Int Design Temp Summer	Heating Degree Days	Design Moisture	Daily Temp Range
FL, Gainesville	FL GAINESVILLE REGIONAL AP	32	92	70	75	1305.5	51	Medium

UTILITY RATES

Fuel	Unit	Utility Name	Monthly Fixed Cost	\$/Unit
Electricity	kWh	EnergyGauge Default	0	0.1188
Natural Gas	Therm	EnergyGauge Default	0	1.72
Fuel Oil	Gallon	EnergyGauge Default	0	1.1
Propane	Gallon	EnergyGauge Default	0	1.4

SURROUNDINGS

Ornt	Type	Shade Trees			Exist	Adjacent Buildings		
		Height	Width	Distance		Height	Width	Distance
N	None	0 ft	0 ft	0 ft		0 ft	0 ft	0 ft
NE	None	0 ft	0 ft	0 ft		0 ft	0 ft	0 ft
E	None	0 ft	0 ft	0 ft		0 ft	0 ft	0 ft
SE	None	0 ft	0 ft	0 ft		0 ft	0 ft	0 ft
S	None	0 ft	0 ft	0 ft		0 ft	0 ft	0 ft
SW	None	0 ft	0 ft	0 ft		0 ft	0 ft	0 ft
W	None	0 ft	0 ft	0 ft		0 ft	0 ft	0 ft
NW	None	0 ft	0 ft	0 ft		0 ft	0 ft	0 ft

BLOCKS

Number	Name	Area	Volume
1	Block1	2642.459	38513.7

SPACES

Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Finished	Cooled	Heated
1	Master Bedroom	429	3432	No	2	1	Yes	Yes	Yes
2	Bathroom 1	204.25	1634	No	0	0	Yes	Yes	Yes
3	Laundry Room	94.71	757.7	No	0	0	Yes	Yes	Yes
4	Great Room	1241	27302	Yes	0	0	Yes	Yes	Yes
5	Bedroom 2	267.75	2142	No	1	1	Yes	Yes	Yes
6	Bedroom 3	267.75	2142	No	1	1	Yes	Yes	Yes
7	Bathroom 2	85.25	682	No	0	0	Yes	Yes	Yes

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EnergyGauge® / USRCZB v4.0

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Building Input Summary Report

SPACES

Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Finished	Cooled	Heated
8	Master Closet	52.75	422	No	0	0	Yes	Yes	Yes

FLOORS

#	Floor Type	Space	Perimeter	Perimeter R-Value	Area	Joist R-Value	Tile	Wood	Carpet
1	Slab-On-Grade Edge Insulation	Master Bedroom	42 ft	0	429 ft²	---	0	0	1
2	Slab-On-Grade Edge Insulation	Bathroom 1	31.75 ft	0	204.25 ft²	---	0	0	1
3	Slab-On-Grade Edge Insulation	Laundry Room	8.75 ft	0	94.71 ft²	---	0	0	1
4	Slab-On-Grade Edge Insulation	Great Room	106.5 ft	0	1241 ft²	---	0	0	1
5	Floor Over Other Space	Bedroom 2			267.75 ft²	0	0	0	1
6	Floor Over Other Space	Bedroom 3			267.75 ft²	0	0	0	1
7	Floor Over Other Space	Bathroom 2			85.25 ft²	0	0	0	1
8	Slab-On-Grade Edge Insulation	Master Closet	1 ft	0	52.75 ft²	---	0	0	1

ROOF

#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	SA Tested	Emitt	Emitt Tested	Deck Insul.	Pitch (deg)
1	Hip	Metal	2062 ft²	0 ft²	Medium	0.96	No	0.9	No	14	22.6

ATTIC

#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
1	Full cathedral ceiling	Vented	300	1904 ft²	N	N

CEILING

#	Ceiling Type	Space	R-Value	Area	Framing Fraction	Truss Type
1	Cathedral/Single Assembly ()	Great Room	0	1241 ft²	0.11	Wood
2	Cathedral/Single Assembly ()	Bedroom 2	0	268 ft²	0.11	Wood
3	Cathedral/Single Assembly ()	Bedroom 3	0	268 ft²	0.11	Wood
4	Cathedral/Single Assembly ()	Bathroom 2	0	85 ft²	0.11	Wood
5	Cathedral/Single Assembly ()	Master Bedroom	0	429 ft²	0.11	Wood
6	Cathedral/Single Assembly ()	Bathroom 1	0	204 ft²	0.11	Wood
7	Cathedral/Single Assembly ()	Laundry Room	0	95 ft²	0.11	Wood

WALLS

Wall orientation below is as entered. Actual orientation is modified by rotate angle shown in "Project" section above.

#	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft	In	Height Ft	In	Area	Sheathing R-Value	Framing Fraction	Solar Absor.	Below Grade%
1	N	Exterior	Frame - Wood	Master Bedroo	19	19	6	8		156.0 ft²		0	0.75	0
2	E	Exterior	Frame - Wood	Master Bedroo	19	22		8		176.0 ft²		0	0.75	0

Building Input Summary Report

WALLS

Wall orientation below is as entered. Actual orientation is modified by rotate angle shown in "Project" section above.

#	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft	In	Height Ft	In	Area	Sheathing R-Value	Framing Fraction	Solar Absor.	Below Grade%
3	E	Exterior	Frame - Wood	Bathroom 1	19	19	8			152.0 ft²		0	0.75	0
4	S	Exterior	Frame - Wood	Bathroom 1	19	10	9	8		86.0 ft²		0	0.75	0
5	S	Exterior	Frame - Wood	Laundry Room	19	12	11	8		103.3 ft²		0	0.75	0
6	S	Exterior	Frame - Wood	Great Room	19	36	6	8		292.0 ft²		0	0.75	0
7	W	Exterior	Frame - Wood	Great Room	26	34		8		272.0 ft²		0	0.75	0
8	N	Exterior	Frame - Wood	Great Room	19	36	6	8		292.0 ft²		0	0.75	0
9	N	Exterior	Frame - Wood	Bedroom 2	19	15	9	8		126.0 ft²		0	0.75	0
10	E	Exterior	Frame - Wood	Bedroom 2	19	17		8		136.0 ft²		0	0.75	0
11	E	Exterior	Frame - Wood	Bedroom 3	19	17		8		136.0 ft²		0	0.75	0
12	S	Exterior	Frame - Wood	Bedroom 3	19	15	9	8		126.0 ft²		0	0.75	0
13	S	Exterior	Frame - Wood	Bathroom 2	19	7	9	8		62.0 ft²		0	0.75	0
14	S	Exterior	Frame - Wood	Great Room	19	32	6	8		260.0 ft²		0	0.75	0
15	E	Exterior	Frame - Wood	Great Room	26	34		8		272.0 ft²		0	0.75	0
16	N	Exterior	Frame - Wood	Great Room	19	36	6	8		292.0 ft²		0	0.75	0

DOORS

#	Ornt	Door Type	Space	Storms	U-Value	Width Ft	In	Height Ft	In	Area
1	N	Wood	Great Room	None	.46	6		6	8	40 ft²
2	S	Wood	Laundry Room	None	.46	3		6	8	20 ft²

WINDOWS

#	Ornt	Wall ID	Frame	Panes	NFRC	U-Factor	SHGC	Storm	Area	Overhang Depth	Separation	Interior Shade	Screening
1	N	1	Vinyl	Low-E Double	Yes	0.31	0.31	N	21.3 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
2	E	2	Vinyl	Low-E Double	Yes	0.31	0.31	N	21.3 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
3	E	3	Vinyl	Low-E Double	Yes	0.32	0.27	N	5.0 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
4	S	6	Vinyl	Low-E Double	Yes	0.32	0.27	N	2.5 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
5	S	6	Vinyl	Low-E Double	Yes	0.31	0.31	N	42.5 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
6	W	7	Vinyl	Low-E Double	Yes	0.31	0.31	N	42.5 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
7	N	8	Vinyl	Low-E Double	Yes	0.31	0.31	N	42.5 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
8	N	9	Vinyl	Low-E Double	Yes	0.32	0.27	N	5.0 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
9	E	10	Vinyl	Low-E Double	Yes	0.31	0.31	N	21.3 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
10	E	11	Vinyl	Low-E Double	Yes	0.31	0.31	N	21.3 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
11	S	12	Vinyl	Low-E Double	Yes	0.32	0.27	N	5.0 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
12	S	14	Vinyl	Low-E Double	Yes	0.32	0.27	N	5.0 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
13	E	15	Vinyl	Low-E Double	Yes	0.31	0.31	N	42.5 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
14	E	15	Vinyl	Low-E Double	Yes	0.32	0.27	N	2.5 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None
15	N	16	Vinyl	Low-E Double	Yes	0.31	0.31	N	5.0 ft²	1 ft 0 in	0 ft 6 in	Drapes/blinds	None

Building Input Summary Report

INFILTRATION

#	Scope	Method	SLA	CFM 50	ELA	EqLA	ACH	ACH 50	Space(s)
1	Wholehouse	Best Guess	.0005	3465.6	190.26	357.81	.474	5.399	All

MASS

Mass Type	Area	Thickness	Furniture Fraction	Space
No Added Mass	0 ft²	0 ft	0.3	Master Bedroom
No Added Mass	0 ft²	0 ft	0.3	Bathroom 1
No Added Mass	0 ft²	0 ft	0.3	Laundry Room
No Added Mass	0 ft²	0 ft	0.3	Great Room
No Added Mass	0 ft²	0 ft	0.3	Bedroom 2
No Added Mass	0 ft²	0 ft	0.3	Bedroom 3
No Added Mass	0 ft²	0 ft	0.3	Bathroom 2
No Added Mass	0 ft²	0 ft	0.3	Master Closet

HEATING SYSTEM

#	System Type	Subtype	Efficiency	Capacity	-----Geothermal HeatPump-----				Ducts	Block
					Entry	Power	Volt.	Curr		
1	Electric Heat Pump	Split	HSPF:8.4	48.1 kBtu/hr		0	0	0	sys#1	1

COOLING SYSTEM

#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Ducts	Block
1	Central Unit	Split	SEER:14	35.7 kBtu/hr	1080 cfm	0.75	sys#1	1

HOT WATER SYSTEM

#	System Type	SubType	Location	EF	Cap	Use	SetPnt	Credits
1	Electric	None	Laundry Room	0.92	40 gal	60 gal	120 deg	None

SOLAR HOT WATER

Collector Type		Collector		Surface		Absorp.	Trans	Tank	Tank	Tank	Heat	PV	Pump
		Tilt	Azimuth	Area	Loss Coef.	Prod.	Corr.	Volume	U-Value	Surf Area	Exch Eff	Pumped	Energy

DUCTS

DUCT #	Location	Supply R-Value	Supply Area	Return Location	Return Area	Number	Leakage Type	Air Handler	CFM 25 TOT	CFM25 OUT	QN	RLF	HVAC # Heat Cool
1	Bedroom 2	6.400000	570.5600	Bedroom 2	2142.6400		Default Leakage	Bedroom 2	(Default)	(Default)			1 1

TEMPERATURES

Programable Thermostat: Y												Ceiling Fans: N												
Cooling	<input type="checkbox"/>	Jan	<input type="checkbox"/>	Feb	<input type="checkbox"/>	Mar	<input type="checkbox"/>	Apr	<input type="checkbox"/>	May	<input checked="" type="checkbox"/>	Jun	<input checked="" type="checkbox"/>	Jul	<input checked="" type="checkbox"/>	Aug	<input checked="" type="checkbox"/>	Sep	<input type="checkbox"/>	Oct	<input checked="" type="checkbox"/>	Nov	<input type="checkbox"/>	Dec
Heating	<input checked="" type="checkbox"/>	Jan	<input checked="" type="checkbox"/>	Feb	<input checked="" type="checkbox"/>	Mar	<input checked="" type="checkbox"/>	Apr	<input type="checkbox"/>	May	<input type="checkbox"/>	Jun	<input type="checkbox"/>	Jul	<input type="checkbox"/>	Aug	<input type="checkbox"/>	Sep	<input type="checkbox"/>	Oct	<input type="checkbox"/>	Nov	<input checked="" type="checkbox"/>	Dec
Venting	<input type="checkbox"/>	Jan	<input type="checkbox"/>	Feb	<input type="checkbox"/>	Mar	<input type="checkbox"/>	Apr	<input checked="" type="checkbox"/>	May	<input type="checkbox"/>	Jun	<input type="checkbox"/>	Jul	<input type="checkbox"/>	Aug	<input type="checkbox"/>	Sep	<input type="checkbox"/>	Oct	<input checked="" type="checkbox"/>	Nov	<input type="checkbox"/>	Dec

Building Input Summary Report

Thermostat Schedule: HERS 2006 Reference													
Schedule Type		1	2	3	4	5	6	7	8	9	10	11	12
Cooling (WD)	AM	78	78	78	78	78	78	78	78	80	80	80	80
	PM	80	80	78	78	78	78	78	78	78	78	78	78
Cooling (WEH)	AM	78	78	78	78	78	78	78	78	78	78	78	78
	PM	78	78	78	78	78	78	78	78	78	78	78	78
Heating (WD)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68
Heating (WEH)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68

APPLIANCES & LIGHTING

Appliance Schedule: HERS 2006 Reference													
Schedule Type		1	2	3	4	5	6	7	8	9	10	11	12
Ceiling Fans (Summer)	AM	0.65	0.65	0.65	0.65	0.65	0.65	0.65	0.33	0.33	0.33	0.33	0.33
	PM	0.33	0.33	0.33	0.33	0.33	1	0.9	0.9	0.9	0.9	0.9	0.65
Annual Use: 0 kWh/Yr		Peak Value: 0 Watts											
Clothes Washer	AM	0.105	0.081	0.046	0.046	0.081	0.128	0.256	0.57	0.849	1	0.977	0.872
	PM	0.779	0.698	0.605	0.57	0.581	0.57	0.57	0.57	0.57	0.488	0.43	0.198
Annual Use: 0 kWh/Yr		Peak Value: 0 Watts											
Dishwasher	AM	0.139	0.05	0.028	0.024	0.029	0.09	0.169	0.303	0.541	0.594	0.502	0.443
	PM	0.377	0.396	0.335	0.323	0.344	0.448	0.791	1	0.8	0.597	0.383	0.281
Annual Use: 0 kWh/Yr		Peak Value: 0 Watts											
Dryer	AM	0.2	0.1	0.05	0.05	0.05	0.075	0.2	0.375	0.5	0.8	0.95	1
	PM	0.875	0.85	0.8	0.625	0.625	0.6	0.575	0.55	0.625	0.7	0.65	0.375
Annual Use: 0 kWh/Yr		Peak Value: 0 Watts											
Lighting	AM	0.16	0.15	0.16	0.18	0.23	0.45	0.4	0.26	0.19	0.16	0.12	0.11
	PM	0.16	0.17	0.25	0.27	0.34	0.55	0.55	0.88	1	0.86	0.51	0.28
Annual Use: 2569 kWh/Yr		Peak Value: 839 Watts											
Miscellaneous	AM	0.48	0.47	0.47	0.47	0.47	0.47	0.64	0.71	0.67	0.61	0.55	0.53
	PM	0.52	0.5	0.5	0.5	0.59	0.73	0.79	0.99	1	0.96	0.77	0.55
Annual Use: 4610 kWh/Yr		Peak Value: 845 Watts											
Pool Pump	AM	0	0	0	0	0	0	0	0	0	1	1	1
	PM	1	1	1	1	0	0	0	0	0	0	0	0
Annual Use: 0 kWh/Yr		Peak Value: 0 Watts											
Range	AM	0.057	0.057	0.057	0.057	0.057	0.114	0.171	0.286	0.343	0.343	0.343	0.4
	PM	0.457	0.343	0.286	0.4	0.571	1	0.857	0.429	0.286	0.229	0.171	0.114
Annual Use: 0 kWh/Yr		Peak Value: 0 Watts											
Refrigeration	AM	0.85	0.78	0.75	0.73	0.73	0.73	0.75	0.75	0.8	0.8	0.8	0.8
	PM	0.88	0.85	0.85	0.83	0.88	0.95	1	0.98	0.95	0.93	0.9	0.85
Annual Use: 775 kWh/Yr		Peak Value: 106 Watts											
Well Pump	AM	0.05	0.05	0.05	0.05	0.05	0.05	0.1	0.1	0.1	0.1	0.1	0.1
	PM	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Annual Use: 0 kWh/Yr		Peak Value: 0 Watts											

MECHANICAL VENTILATION

Type	Supply CFM	Exhaust CFM	HRV	Fan	Run Time	Heating System	Cooling System
Runtime Vent	100	0	0	W	%	1 - Electric Heat Pump	1 - Central Unit

Building Input Summary Report

REFRIGERATORS

ID	Type	Screen	Location	Quantity	Vol	FrZ. Vol	Make	Model	Schedule	kWhPerYr
1	Refrigerat	Default New	Kitchen	1	25.6	5			HERS201	691

CLOTHES WASHERS

ID	Type	Screen	Location	Capacity	Make	Model	Schedule	LoadsPerYr
1	1 Kitchen	Default New	Garage	2.847			HERS201	(invalid)

CLOTHES DRYERS

ID	Type	Screen	Location	Capacity	Fuel Type	Make	Model	Schedule	LoadsPerYr
1	Dryer	Default New	Garage	2.847	Electricity			HERS201	330.3936

DISHWASHERS

ID	Type	Screen	Location	Capacity	Vintage	Make	Model	Schedule	kWhPerYr
1	Dishwash	Default New	Kitchen	12	2004 or N			HERS201	372

RANGE OVEN

ID	Type	Screen	Location	Type	Fueltype	Make	Model	Cooktop	Oven
1	RangeOv	Default New	Kitchen	CooktopOven C	Electric			Electric fl	Not Conv

HARD WIRED LIGHTING

ID	Type	Screen	Location	Total#	Qualify#	Comp FI	All Other FL	txtBulbtype	Schedule	Watts per bulb
1	Hard-Wir	Default	Family R	20	2	0	2	Incandes	HERS201	60
2	Hard-Wir	Default	Bedroom	20	2	0	2	Incandes	HERS201	60
3	Hard-Wir	Default	Bedroom	20	2	0	2	Incandes	HERS201	60
4	Hard-Wir	Default	Bathroom	20	2	0	2	Incandes	HERS201	60
5	Hard-Wir	Default	Living Ro	20	2	0	2	Incandes	HERS201	60
6	Hard-Wir	Default	Master B	20	2	0	2	Incandes	HERS201	60
7	Hard-Wir	Default	Master B	20	2	0	2	Incandes	HERS201	60
8	Hard-Wir	Default	Kitchen	20	2	0	2	Incandes	HERS201	60
9	Hard-Wir	Default	Exterior	20	2	0	2	Incandes	HERS201	60
10	Hard-Wir	Default	Garage	20	2	0	2	Incandes	HERS201	60

MISC ELECTRICAL LOADS

ID	Type	Screen	Item	Quantity	Catagory	Operating	Location	Schedule	Off Standby
1	Misc Elec	Simple Default		1		1	Main	HERS201	1


FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Business and Professional Regulation - Residential Performance Method

<p>Project Name: Paul and Nancy Fountain Residence Street: 4432 SW Herlong St. City, State, Zip: Ft. White, FL, Owner: Paul and Nancy Fountain Design Location: FL, Gainesville</p>	<p>Builder Name: Owner/Builder Permit Office: Permit Number: Jurisdiction:</p>
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<p>1. New construction or existing New (From Plans) 2. Single family or multiple family Single-family 3. Number of units, if multiple family 1 4. Number of Bedrooms 3 5. Is this a worst case? No 6. Conditioned floor area above grade (ft²) 2642.45996093 Conditioned floor area below grade (ft²) 0 7. Windows(285.1 sqft.) Description Area a. U-Factor: Dbl, U=0.31 260.01 ft² SHGC: SHGC=0.31 b. U-Factor: Dbl, U=0.32 25.07 ft² SHGC: SHGC=0.27 c. U-Factor: N/A ft² SHGC: d. U-Factor: N/A ft² SHGC: Area Weighted Average Overhang Depth: 1.000 ft. Area Weighted Average SHGC: 0.306 8. Floor Types (2642.5 sqft.) Insulation Area a. Slab-On-Grade Edge Insulation R=0.0 2021.70 ft² b. Floor Over Other Space R=0.0 620.75 ft² c. N/A R= ft²</p>	<p>9. Wall Types(2939.3 sqft.) Insulation Area a. Frame - Wood, Exterior R=19.0 2395.30 ft² b. Frame - Wood, Exterior R=26.0 544.00 ft² c. N/A R= ft² d. N/A R= ft² 10. Ceiling Types (2590.0 sqft.) Insulation Area a. Cathedral/Single Assembly (Vented) R=0.0 2590.00 ft² b. N/A R= ft² c. N/A R= ft² 11. Ducts R ft² a. Sup: Bedroom 2, Ret: Bedroom 2, AH: Bedroom 6.4000000 12. Cooling systems kBtu/hr Efficiency a. Central Unit 35.7 SEER:14.00 13. Heating systems kBtu/hr Efficiency a. Electric Heat Pump 48.1 HSPF:8.40 14. Hot water systems a. Electric Cap: 40 gallons EF: 0.920 b. Conservation features None 15. Credits CF, CV, Pstat</p>
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Glass/Floor Area: 0.108	Total Proposed Modified Loads: 40.37	PASS
	Total Standard Reference Loads: 59.04	

<p>I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.</p> <p style="text-align: right;"><i>M. W. Allen</i></p> <p>PREPARED BY: _____ DATE: 10/15/2015</p> <p>I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.</p> <p>OWNER/AGENT: _____ DATE: _____</p>	<p>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.</p> <div style="text-align: center;">  </div> <p>BUILDING OFFICIAL: _____ DATE: _____</p>
---	---

- Compliance requires completion of a Florida Air Barrier and Insulation Inspection Checklist

PROJECT

Title: Paul and Nancy Fountain Res	Bedrooms: 3	Address Type: Street Address
Building Type: User	Conditioned Area: 2642	Lot #
Owner: Paul and Nancy Fountain	Total Stories: 2	Block/SubDivision:
# of Units: 1	Worst Case: No	PlatBook:
Builder Name: Owner/Builder	Rotate Angle: 0	Street: 4432 SW Herlong St.
Permit Office:	Cross Ventilation: Yes	County: Columbia
Jurisdiction:	Whole House Fan: No	City, State, Zip: Ft. White , FL ,
Family Type: Single-family		
New/Existing: New (From Plans)		
Comment:		

CLIMATE

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

BLOCKS

Number	Name	Area	Volume
1	Block1	2642.459	38513.7

SPACES

Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Infil ID	Finished	Cooled	Heated
1	Master Bedroom	429	3432	No	2	1	1	Yes	Yes	Yes
2	Bathroom 1	204.25	1634	No	0	0	1	Yes	Yes	Yes
3	Laundry Room	94.71	757.7	No	0	0	1	Yes	Yes	Yes
4	Great Room	1241	27302	Yes	0	0	1	Yes	Yes	Yes
5	Bedroom 2	267.75	2142	No	1	1	1	Yes	Yes	Yes
6	Bedroom 3	267.75	2142	No	1	1	1	Yes	Yes	Yes
7	Bathroom 2	85.25	682	No	0	0	1	Yes	Yes	Yes
8	Master Closet	52.75	422	No	0	0	1	Yes	Yes	Yes

FLOORS

✓	#	Floor Type	Space	Perimeter	Perimeter R-Value	Area	Joist R-Value	Tile	Wood	Carpet
_____	1	Slab-On-Grade Edge Insulatio	Master Bedroom	42 ft	0	429 ft²	---	0	0	1
_____	2	Slab-On-Grade Edge Insulatio	Bathroom 1	31.75 ft	0	204.25 ft²	---	0	0	1
_____	3	Slab-On-Grade Edge Insulatio	Laundry Room	8.75 ft	0	94.71 ft²	---	0	0	1
_____	4	Slab-On-Grade Edge Insulatio	Great Room	106.5 ft	0	1241 ft²	---	0	0	1
_____	5	Floor Over Other Space	Bedroom 2	---	---	267.75 ft²	0	0	0	1
_____	6	Floor Over Other Space	Bedroom 3	---	---	267.75 ft²	0	0	0	1
_____	7	Floor Over Other Space	Bathroom 2	---	---	85.25 ft²	0	0	0	1
_____	8	Slab-On-Grade Edge Insulatio	Master Closet	1 ft	0	52.75 ft²	---	0	0	1

ROOF												
✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	SA Tested	Emitt	Emitt Tested	Deck Insul.	Pitch (deg)
✓	1	Hip	Metal	2062 ft²	0 ft²	Medium	0.96	No	0.9	No	14	22.6

ATTIC							
✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
✓	1	Full cathedral ceilin	Vented	300	1904 ft²	N	N

CEILING							
✓	#	Ceiling Type	Space	R-Value	Area	Framing Frac	Truss Type
✓	1	Cathedral/Single Assembly (Vented)	Great Room	0	1241 ft²	0.11	Wood
✓	2	Cathedral/Single Assembly (Vented)	Bedroom 2	0	268 ft²	0.11	Wood
✓	3	Cathedral/Single Assembly (Vented)	Bedroom 3	0	268 ft²	0.11	Wood
✓	4	Cathedral/Single Assembly (Vented)	Bathroom 2	0	85 ft²	0.11	Wood
✓	5	Cathedral/Single Assembly (Vented)	Master Bedroom	0	429 ft²	0.11	Wood
✓	6	Cathedral/Single Assembly (Vented)	Bathroom 1	0	204 ft²	0.11	Wood
✓	7	Cathedral/Single Assembly (Vented)	Laundry Room	0	95 ft²	0.11	Wood

WALLS															
✓	#	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft	In	Height Ft	In	Area	Sheathing R-Value	Framing Fraction	Solar Absor.	Below Grade%
✓	1	N	Exterior	Frame - Wood	Master Bedro	19	19	6	8		156.0 ft²		0	0.75	0
✓	2	E	Exterior	Frame - Wood	Master Bedro	19	22		8		176.0 ft²		0	0.75	0
✓	3	E	Exterior	Frame - Wood	Bathroom 1	19	19		8		152.0 ft²		0	0.75	0
✓	4	S	Exterior	Frame - Wood	Bathroom 1	19	10	9	8		86.0 ft²		0	0.75	0
✓	5	S	Exterior	Frame - Wood	Laundry Roo	19	12	11	8		103.3 ft²		0	0.75	0
✓	6	S	Exterior	Frame - Wood	Great Room	19	36	6	8		292.0 ft²		0	0.75	0
✓	7	W	Exterior	Frame - Wood	Great Room	26	34		8		272.0 ft²		0	0.75	0
✓	8	N	Exterior	Frame - Wood	Great Room	19	36	6	8		292.0 ft²		0	0.75	0
✓	9	N	Exterior	Frame - Wood	Bedroom 2	19	15	9	8		126.0 ft²		0	0.75	0
✓	10	E	Exterior	Frame - Wood	Bedroom 2	19	17		8		136.0 ft²		0	0.75	0
✓	11	E	Exterior	Frame - Wood	Bedroom 3	19	17		8		136.0 ft²		0	0.75	0
✓	12	S	Exterior	Frame - Wood	Bedroom 3	19	15	9	8		126.0 ft²		0	0.75	0
✓	13	S	Exterior	Frame - Wood	Bathroom 2	19	7	9	8		62.0 ft²		0	0.75	0
✓	14	S	Exterior	Frame - Wood	Great Room	19	32	6	8		260.0 ft²		0	0.75	0
✓	15	E	Exterior	Frame - Wood	Great Room	26	34		8		272.0 ft²		0	0.75	0
✓	16	N	Exterior	Frame - Wood	Great Room	19	36	6	8		292.0 ft²		0	0.75	0

DOORS											
✓	#	Ornt	Door Type	Space	Storms	U-Value	Width Ft	In	Height Ft	In	Area
✓	1	N	Wood	Great Room	None	.46	6		6	8	40 ft²
✓	2	S	Wood	Laundry Roo	None	.46	3		6	8	20 ft²

WINDOWS

Orientation shown is the entered, Proposed orientation.

✓	#	Ornt	Wall ID	Frame	Panes	NFRC	U-Factor	SHGC	Area	Overhang Depth Separation	Int Shade	Screening
✓	1	N	1	Vinyl	Low-E Double	Yes	0.31	0.31	21.3 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	2	E	2	Vinyl	Low-E Double	Yes	0.31	0.31	21.3 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	3	E	3	Vinyl	Low-E Double	Yes	0.32	0.27	5.0 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	4	S	6	Vinyl	Low-E Double	Yes	0.32	0.27	2.5 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	5	S	6	Vinyl	Low-E Double	Yes	0.31	0.31	42.5 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	6	W	7	Vinyl	Low-E Double	Yes	0.31	0.31	42.5 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	7	N	8	Vinyl	Low-E Double	Yes	0.31	0.31	42.5 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	8	N	9	Vinyl	Low-E Double	Yes	0.32	0.27	5.0 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	9	E	10	Vinyl	Low-E Double	Yes	0.31	0.31	21.3 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	10	E	11	Vinyl	Low-E Double	Yes	0.31	0.31	21.3 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	11	S	12	Vinyl	Low-E Double	Yes	0.32	0.27	5.0 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	12	S	14	Vinyl	Low-E Double	Yes	0.32	0.27	5.0 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	13	E	15	Vinyl	Low-E Double	Yes	0.31	0.31	42.5 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	14	E	15	Vinyl	Low-E Double	Yes	0.32	0.27	2.5 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None
✓	15	N	16	Vinyl	Low-E Double	Yes	0.31	0.31	5.0 ft²	1 ft 0 in 0 ft 6 in	Drapes/blinds	None

INFILTRATION

#	Scope	Method	SLA	CFM 50	ELA	EqLA	ACH	ACH 50
1	Wholehouse	Best Guess	.0005	3465.6	190.26	357.81	.474	5.399

HEATING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Block	Ducts
✓	1	Electric Heat Pump	Split	HSPF:8.4	48.1 kBtu/hr	1	sys#1

COOLING SYSTEM

✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Block	Ducts
✓	1	Central Unit	Split	SEER: 14	35.7 kBtu/hr	1080 cfm	0.75	1	sys#1

HOT WATER SYSTEM

✓	#	System Type	SubType	Location	EF	Cap	Use	SetPnt	Conservation
✓	1	Electric	None	Laundry Room	0.92	40 gal	60 gal	120 deg	None

SOLAR HOT WATER SYSTEM

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

DUCTS

✓	#	Location	Supply R-Value	Area	Location	Return Area	Leakage Type	Air Handler	CFM 25 TOT	CFM25 OUT	QN	RLF	HVAC # Heat	Cool
	1	Bedroom 2	6.4000	570.56	Bedroom 2	142.64	Default Leakage	Bedroom 2	(Default)	(Default)			1	1

TEMPERATURES

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

MECHANICAL VENTILATION

Type	Supply CFM	Exhaust CFM	Fan Watts	HRV	Heating System	Run Time	Cooling System
Runtime Vent	100	0		0	1 - Electric Heat Pump	%	1 - Central Unit

Florida Code Compliance Checklist

Florida Department of Business and Professional Regulations
Residential Whole Building Performance Method

ADDRESS: 4432 SW Herlong St.
Ft. White, FL,

PERMIT #:

MANDATORY REQUIREMENTS SUMMARY - See individual code sections for full details.

COMPONENT	SECTION	SUMMARY OF REQUIREMENT(S)	CHECK
Air leakage	402.4	To be caulked, gasketed, weatherstripped or otherwise sealed. Recessed lighting IC-rated as meeting ASTM E 283. Windows and doors = 0.30 cfm/sq.ft. Testing or visual inspection required. Fireplaces: gasketed doors & outdoor combustion air. Must complete envelope leakage report or visually verify Table 402.4.2.	
Thermostat & controls	403.1	At least one thermostat shall be provided for each separate heating and cooling system. Where forced-air furnace is primary system, programmable thermostat is required. Heat pumps with supplemental electric heat must prevent supplemental heat when compressor can meet the load.	
Ducts	403.2.2	All ducts, air handlers, filter boxes and building cavities which form the primary air containment passageways for air distribution systems shall be considered ducts or plenum chambers, shall be constructed and sealed in accordance with Section 503.2.7.2 of this code.	
	403.3.3	Building framing cavities shall not be used as supply ducts.	
Water heaters	403.4	Heat trap required for vertical pipe risers. Comply with efficiencies in Table 403.4.3.2. Provide switch or clearly marked circuit breaker (electric) or shutoff (gas). Circulating system pipes insulated to = R-2 + accessible manual OFF switch.	
Mechanical ventilation	403.5	Homes designed to operate at positive pressure or with mechanical ventilation systems shall not exceed the minimum ASHRAE 62 level. No make-up air from attics, crawlspaces, garages or outdoors adjacent to pools or spas.	
Swimming Pools & Spas	403.9	Pool pumps and pool pump motors with a total horsepower (HP) of = 1 HP shall have the capability of operating at two or more speeds. Spas and heated pools must have vapor-retardant covers or a liquid cover or other means proven to reduce heat loss except if 70% of heat from site-recovered energy. Off/timer switch required. Gas heaters minimum thermal efficiency=78% (82% after 4/16/13). Heat pump pool heaters minimum COP= 4.0.	
Cooling/heating equipment	403.6	Sizing calculation performed & attached. Minimum efficiencies per Tables 503.2.3. Equipment efficiency verification required. Special occasion cooling or heating capacity requires separate system or variable capacity system. Electric heat >10kW must be divided into two or more stages.	
Ceilings/knee walls	405.2.1	R-19 space permitting.	

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Business and Professional Regulation - Residential Performance Method

<p>Project Name: 121029 Street: 4432 SW Herlong St. City, State, Zip: Ft White, FL, Owner: Paul Fountain Design Location: FL, Gainesville</p>	<p>Builder Name: Owner Permit Office: Permit Number: Jurisdiction: 221000</p>
---	--

Replaced
 12-14-15


<p>1. New construction or existing New (From Plans) 2. Single family or multiple family Single-family 3. Number of units, if multiple family 1 4. Number of Bedrooms 2 5. Is this a worst case? No 6. Conditioned floor area above grade (ft²) 2700 Conditioned floor area below grade (ft²) 0 7. Windows(409.7 sqft.) Description Area a. U-Factor: Dbl, U=0.35 409.67 ft² SHGC: SHGC=0.35 b. U-Factor: N/A ft² SHGC: c. U-Factor: N/A ft² SHGC: d. U-Factor: N/A ft² SHGC: Area Weighted Average Overhang Depth: 1.500 ft. Area Weighted Average SHGC: 0.350 8. Floor Types (1904.0 sqft.) Insulation Area a. Slab-On-Grade Edge Insulation R=0.0 1904.00 ft² b. N/A R= ft² c. N/A R= ft²</p>	<p>9. Wall Types(3077.3 sqft.) Insulation Area a. Frame - Wood, Exterior R=19.0 3077.30 ft² b. N/A R= ft² c. N/A R= ft² d. N/A R= ft² 10. Ceiling Types (2284.0 sqft.) Insulation Area a. Cathedral/Single Assembly (Vented) R=12.0 2284.00 ft² b. N/A R= ft² c. N/A R= ft² 11. Ducts R ft² 12. Cooling systems kBtu/hr Efficiency 13. Heating systems kBtu/hr Efficiency a. LP Gas Furnace 46.0 AFUE:0.78 WOOD STOVE 14. Hot water systems a. Electric Cap: 40 gallons EF: 0.920 b. Conservation features None 15. Credits None</p>
--	---

Glass/Floor Area: 0.152

Total Proposed Modified Loads: 45.96

Total Standard Reference Loads: 57.50

PASS

<p>I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.</p> <p>PREPARED BY: <u>ERAN BEANSLEY</u> DATE: <u>1/10/13</u></p> <p>I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.</p> <p>OWNER/AGENT: <u>[Signature]</u> DATE: _____</p>	<p>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.</p> <div style="text-align: center;">  </div> <p>BUILDING OFFICIAL: _____ DATE: _____</p>
--	---

- Compliance requires completion of a Florida Air Barrier and Insulation Inspection Checklist



PROJECT

Title:	1212029	Bedrooms:	2	Address Type:	Street Address
Building Type:	User	Conditioned Area:	2700	Lot #	
Owner:	Paul Fountain	Total Stories:	2	Block/SubDivision:	
# of Units:	1	Worst Case:	No	PlatBook:	
Builder Name:	Owner	Rotate Angle:	0	Street:	4432 SW Herlong St.
Permit Office:		Cross Ventilation:		County:	Columbia
Jurisdiction:		Whole House Fan:		City, State, Zip:	Ft White , FL ,
Family Type:	Single-family				
New/Existing:	New (From Plans)				
Comment:					

CLIMATE

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

BLOCKS

Number	Name	Area	Volume
1	Block1	2700	34560

SPACES

Number	Name	Area	Volume	Kitchen	Occupants	Bedrooms	Infil ID	Finished	Cooled	Heated
1	Main	2700	34560	Yes	6	2	1	Yes	No	Yes

FLOORS

✓	#	Floor Type	Space	Perimeter	R-Value	Area		Tile	Wood	Carpet
_____	1	Slab-On-Grade Edge Insulatio	Main	180 ft	0	1904 ft²	----	0.3	0.3	0.4

ROOF

✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	SA Tested	Emitt	Emitt Tested	Deck Insul.	Pitch (deg)
_____	1	Hip	Composition shingles	2129 ft²	0 ft²	Dark	0.96	No	0.9	No	0	26.6

ATTIC

✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
_____	1	Full cathedral ceilin	Vented	300	1904 ft²	N	N

CEILING

✓	#	Ceiling Type	Space	R-Value	Area	Framing Frac	Truss Type
_____	1	Cathedral/Single Assembly (Vented)	Main	12	2284 ft²	0.11	Wood

WALLS

✓ #	Ornt	Adjacent To	Wall Type	Space	Cavity R-Value	Width Ft In	Height Ft In	Area	Sheathing R-Value	Framing Fraction	Solar Absor	Below Grade%
1	N	Exterior	Frame - Wood	Main	19	56	15 4	858.6666		0.16	0.75	0
2	E	Exterior	Frame - Wood	Main	19	34	20	680 ft²		0.16	0.75	0
3	S	Exterior	Frame - Wood	Main	19	56	15 4	858.6666		0.16	0.75	0
4	W	Exterior	Frame - Wood	Main	19	34	20	680 ft²		0.16	0.75	0

DOORS

✓ #	Ornt	Door Type	Space	Storms	U-Value	Width Ft In	Height Ft In	Area
1	N	Insulated	Main	None	0.400000	2	6 8	13.33333
2	S	Insulated	Main	None	0.400000	2	6 8	20 ft²

WINDOWS

Orientation shown is the entered, Proposed orientation.

✓ #	Ornt	Wall ID	Frame	Panes	NFRC	U-Factor	SHGC	Area	Overhang Depth	Overhang Separation	Int Shade	Screening
1	N	1	Metal	Low-E Double	Yes	0.35	0.35	75 ft²	1 ft 6 in	6 ft 0 in	None	None
2	N	1	Metal	Low-E Double	Yes	0.35	0.35	26.66666	1 ft 6 in	6 ft 0 in	None	None
3	N	1	Metal	Low-E Double	Yes	0.35	0.35	28 ft²	1 ft 6 in	2 ft 0 in	None	None
4	E	2	Metal	Low-E Double	Yes	0.35	0.35	50 ft²	1 ft 6 in	3 ft 0 in	None	None
5	E	2	Metal	Low-E Double	Yes	0.35	0.35	25 ft²	1 ft 6 in	14 ft 0 in	None	None
6	E	2	Metal	Low-E Double	Yes	0.35	0.35	5 ft²	1 ft 6 in	13 ft 0 in	None	None
7	S	3	Metal	Low-E Double	Yes	0.35	0.35	50 ft²	1 ft 6 in	6 ft 0 in	None	None
8	S	3	Metal	Low-E Double	Yes	0.35	0.35	16 ft²	1 ft 6 in	6 ft 0 in	None	None
9	S	3	Metal	Low-E Double	Yes	0.35	0.35	6 ft²	1 ft 6 in	6 ft 0 in	None	None
10	S	3	Metal	Low-E Double	Yes	0.35	0.35	28 ft²	1 ft 6 in	2 ft 0 in	None	None
11	W	4	Metal	Low-E Double	Yes	0.35	0.35	100 ft²	1 ft 6 in	7 ft 0 in	None	None

INFILTRATION

#	Scope	Method	SLA	CFM 50	ELA	EqLA	ACH	ACH 50
1	Wholehouse	Best Guess	0.000300	2124.6	116.64	219.35	0.2843	3.6886

HEATING SYSTEM

✓ #	System Type	Subtype	Efficiency	Capacity	Block	Ducts
1	LP Gas Furnace WOOD STOVE	None	AFUE: 0.78	46 kBtu/hr	1	Ductless

HOT WATER SYSTEM

✓ #	System Type	SubType	Location	EF	Cap	Use	SetPnt	Conservation
1	Electric	None	Main	0.92	40 gal	50 gal	120 deg	None

SOLAR HOT WATER SYSTEM

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

TEMPERATURES

Programable Thermostat: None				Ceiling Fans:																				
Cooling	<input type="checkbox"/>	Jan	<input type="checkbox"/>	Feb	<input type="checkbox"/>	Mar	<input type="checkbox"/>	Apr	<input type="checkbox"/>	May	<input type="checkbox"/>	Jun	<input checked="" type="checkbox"/>	Jul	<input checked="" type="checkbox"/>	Aug	<input checked="" type="checkbox"/>	Sep	<input checked="" type="checkbox"/>	Oct	<input type="checkbox"/>	Nov	<input type="checkbox"/>	Dec
Heating	<input checked="" type="checkbox"/>	Jan	<input checked="" type="checkbox"/>	Feb	<input checked="" type="checkbox"/>	Mar	<input checked="" type="checkbox"/>	Apr	<input checked="" type="checkbox"/>	May	<input type="checkbox"/>	Jun	<input type="checkbox"/>	Jul	<input type="checkbox"/>	Aug	<input type="checkbox"/>	Sep	<input type="checkbox"/>	Oct	<input checked="" type="checkbox"/>	Nov	<input checked="" type="checkbox"/>	Dec
Venting	<input type="checkbox"/>	Jan	<input type="checkbox"/>	Feb	<input type="checkbox"/>	Mar	<input checked="" type="checkbox"/>	Apr	<input checked="" type="checkbox"/>	May	<input type="checkbox"/>	Jun	<input type="checkbox"/>	Jul	<input type="checkbox"/>	Aug	<input type="checkbox"/>	Sep	<input type="checkbox"/>	Oct	<input type="checkbox"/>	Nov	<input type="checkbox"/>	Dec

Thermostat Schedule: HERS 2006 Reference		Hours											
Schedule Type		1	2	3	4	5	6	7	8	9	10	11	12
Cooling (WD)	AM	78	78	78	78	78	78	78	78	78	78	78	78
	PM	78	78	78	78	78	78	78	78	78	78	78	78
Cooling (WEH)	AM	78	78	78	78	78	78	78	78	78	78	78	78
	PM	78	78	78	78	78	78	78	78	78	78	78	78
Heating (WD)	AM	68	68	68	68	68	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68
Heating (WEH)	AM	68	68	68	68	68	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68

Florida Code Compliance Checklist

Florida Department of Business and Professional Regulations
Residential Whole Building Performance Method

ADDRESS: 4432 SW Herlong St.
Ft White, FL,

PERMIT #:

MANDATORY REQUIREMENTS SUMMARY - See individual code sections for full details.

COMPONENT	SECTION	SUMMARY OF REQUIREMENT(S)	CHECK
Air leakage	402.4	To be caulked, gasketed, weatherstripped or otherwise sealed. Recessed lighting IC-rated as meeting ASTM E 283. Windows and doors = 0.30 cfm/sq.ft. Testing or visual inspection required. Fireplaces: gasketed doors & outdoor combustion air. Must complete envelope leakage report or visually verify Table 402.4.2.	
Thermostat & controls	403.1	At least one thermostat shall be provided for each separate heating and cooling system. Where forced-air furnace is primary system, programmable thermostat is required. Heat pumps with supplemental electric heat must prevent supplemental heat when compressor can meet the load.	
Ducts	403.2.2	All ducts, air handlers, filter boxes and building cavities which form the primary air containment passageways for air distribution systems shall be considered ducts or plenum chambers, shall be constructed and sealed in accordance with Section 503.2.7.2 of this code.	
	403.3.3	Building framing cavities shall not be used as supply ducts.	
Water heaters	403.4	Heat trap required for vertical pipe risers. Comply with efficiencies in Table 403.4.3.2. Provide switch or clearly marked circuit breaker (electric) or shutoff (gas). Circulating system pipes insulated to = R-2 + accessible manual OFF switch.	
Mechanical ventilation	403.5	Homes designed to operate at positive pressure or with mechanical ventilation systems shall not exceed the minimum ASHRAE 62 level. No make-up air from attics, crawlspaces, garages or outdoors adjacent to pools or spas.	
Swimming Pools & Spas	403.9	Pool pumps and pool pump motors with a total horsepower (HP) of = 1 HP shall have the capability of operating at two or more speeds. Spas and heated pools must have vapor-retardant covers or a liquid cover or other means proven to reduce heat loss except if 70% of heat from site-recovered energy. Off/timer switch required. Gas heaters minimum thermal efficiency=78% (82% after 4/16/13). Heat pump pool heaters minimum COP= 4.0.	
Cooling/heating equipment	403.6	Sizing calculation performed & attached. Minimum efficiencies per Tables 503.2.3. Equipment efficiency verification required. Special occasion cooling or heating capacity requires separate system or variable capacity system. Electric heat >10kW must be divided into two or more stages.	
Ceilings/knee walls	405.2.1	R-19 space permitting.	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 80

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

4432 SW Herlong St., Ft White, FL,

1. New construction or existing	New (From Plans)		9. Wall Types	Insulation	Area
2. Single family or multiple family	Single-family		a. Frame - Wood, Exterior	R=19.0	3077.30 ft ²
3. Number of units, if multiple family	1		b. N/A	R=	ft ²
4. Number of Bedrooms	2		c. N/A	R=	ft ²
5. Is this a worst case?	No		d. N/A	R=	ft ²
6. Conditioned floor area (ft ²)	2700		10. Ceiling Types	Insulation	Area
7. Windows**	Description	Area	a. Cathedral/Single Assembly (Vented)	R=12.0	2284.00 ft ²
a. U-Factor:	DbI, U=0.35	409.67 ft ²	b. N/A	R=	ft ²
SHGC:	SHGC=0.35		c. N/A	R=	ft ²
b. U-Factor:	N/A	ft ²	11. Ducts		R ft ²
SHGC:					
c. U-Factor:	N/A	ft ²	12. Cooling systems	kBtu/hr	Efficiency
SHGC:					
d. U-Factor:	N/A	ft ²	13. Heating systems	kBtu/hr	Efficiency
SHGC:			a. LP Gas Furnace	46.0	AFUE:0.78
Area Weighted Average Overhang Depth:	1.500 ft.		WOOD STOVE		
Area Weighted Average SHGC:	0.350		14. Hot water systems		
8. Floor Types	Insulation	Area	a. Electric	Cap: 40 gallons	
a. Slab-On-Grade Edge Insulation	R=0.0	1904.00 ft ²		EF: 0.92	
b. N/A	R=	ft ²	b. Conservation features		
c. N/A	R=	ft ²	None		
			15. Credits		None

I certify that this home has complied with the Florida Energy Efficiency Code for Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features.

Builder Signature: _____ Date: _____

Address of New Home: _____ City/FL Zip: _____



*Note: This is not a Building Energy Rating. If your Index is below 70, your home may qualify for energy efficient mortgage (EEM) incentives if you obtain a Florida EnergyGauge Rating. Contact the EnergyGauge Hotline at (321) 638-1492 or see the EnergyGauge web site at energygauge.com for information and a list of certified Raters. For information about the Florida Building Code, Energy Conservation, contact the Florida Building Commission's support staff.

**Label required by Section 303.1.3 of the Florida Building Code, Energy Conservation, if not DEFAULT.

Residential System Sizing Calculation

Summary

Paul Fountain
4432 SW Herlong St.
Ft White, FL

Project Title:
1212029

1/10/2013

Location for weather data: Gainesville, FL - Defaults: Latitude(29.7) Altitude(152 ft.) Temp Range(M)			
Humidity data: Interior RH (50%) Outdoor wet bulb (77F) Humidity difference(54gr.)			
Winter design temperature(MJ8 99%)	33 F	Summer design temperature(MJ8 99%)	92 F
Winter setpoint	70 F	Summer setpoint	75 F
Winter temperature difference	37 F	Summer temperature difference	17 F
Total heating load calculation	38357 Btuh	Total cooling load calculation	28027 Btuh

System Sizing Calculations - Winter

Residential Load - Whole House Component Details

Paul Fountain
4432 SW Herlong St.
Ft White, FL

Project Title:
1212029
Building Type: User

1/10/2013

Reference City: Gainesville, FL (Defaults) Winter Temperature Difference: 37.0 F (MJ8 99%)

Component Loads for Whole House

Window	Panes/Type	Frame	U	Orientation	Area(sqft)	X	HTM=	Load
1	2, NFRC 0.35	Metal	0.35	N	75.0		12.9	971 Btuh
2	2, NFRC 0.35	Metal	0.35	N	26.7		12.9	345 Btuh
3	2, NFRC 0.35	Metal	0.35	N	28.0		12.9	363 Btuh
4	2, NFRC 0.35	Metal	0.35	E	50.0		12.9	648 Btuh
5	2, NFRC 0.35	Metal	0.35	E	25.0		12.9	324 Btuh
6	2, NFRC 0.35	Metal	0.35	E	5.0		12.9	65 Btuh
7	2, NFRC 0.35	Metal	0.35	S	50.0		12.9	648 Btuh
8	2, NFRC 0.35	Metal	0.35	S	16.0		12.9	207 Btuh
9	2, NFRC 0.35	Metal	0.35	S	6.0		12.9	78 Btuh
10	2, NFRC 0.35	Metal	0.35	S	28.0		12.9	363 Btuh
11	2, NFRC 0.35	Metal	0.35	W	100.0		12.9	1295 Btuh
Window Total					409.7(sqft)			5305 Btuh
Walls	Type	Ornt.	Ueff.	R-Value (Cav/Sh)	Area	X	HTM=	Load
1	Frame - Wood	- Ext	(0.077)	19.0/0.0	716		2.86	2046 Btuh
2	Frame - Wood	- Ext	(0.077)	19.0/0.0	600		2.86	1715 Btuh
3	Frame - Wood	- Ext	(0.077)	19.0/0.0	739		2.86	2112 Btuh
4	Frame - Wood	- Ext	(0.077)	19.0/0.0	580		2.86	1658 Btuh
Wall Total					2634(sqft)			7532 Btuh
Doors	Type	Storm	Ueff.		Area	X	HTM=	Load
1	Insulated - Exterior,	n	(0.400)		13		14.8	197 Btuh
2	Insulated - Exterior,	n	(0.400)		20		14.8	296 Btuh
Door Total					33(sqft)			493Btuh
Ceilings	Type/Color/Surface		Ueff.	R-Value	Area	X	HTM=	Load
1	Cathedral/D/Shing		(0.078)	12.0/0.0	2284		2.9	6551 Btuh
Ceiling Total					2284(sqft)			6551Btuh
Floors	Type		Ueff.	R-Value	Size	X	HTM=	Load
1	Slab On Grade		(1.180)	0.0	180.0 ft(perim.)		43.7	7859 Btuh
Floor Total					1904 sqft			7859 Btuh
Envelope Subtotal:								27740 Btuh
Infiltration	Type	Wholehouse	ACH	Volume(cuft)	Wall Ratio	CFM=		
	Natural		0.46	34560	1.00	262.1		10617 Btuh
Duct load	NA, R0.0, Supply(), Return() (DLM of 0.000)							0 Btuh
All Zones	Sensible Subtotal All Zones							38357 Btuh

Manual J Winter Calculations

Residential Load - Component Details (continued)

Paul Fountain
4432 SW Herlong St.
Ft White, FL

Project Title:
1212029
Building Type: User

1/10/2013

WHOLE HOUSE TOTALS

Totals for Heating	Subtotal Sensible Heat Loss	38357 Btuh
	Ventilation Sensible Heat Loss	0 Btuh
	Total Heat Loss	38357 Btuh

EQUIPMENT

1. LP Gas Furnace WOOD STOVE		46000 Btuh
--	--	------------

Key: Window types - NFRC (Requires U-Factor and Shading coefficient(SHGC) of glass as numerical values)
or - Glass as 'Clear' or 'Tint' (Uses U-Factor and SHGC defaults)
U - (Window U-Factor)
HTM - (ManualJ Heat Transfer Multiplier)



Version 8

Columbia County Building Permit Application

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

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

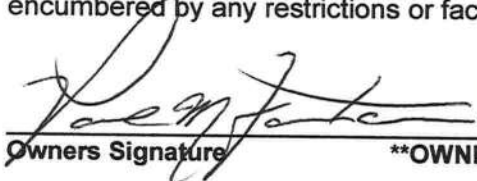
FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor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

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

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

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

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.



(Owners Must Sign All Applications Before Permit Issuance.)

Owners Signature

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

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

Contractor's Signature (Permitee)

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

Affirmed under penalty of perjury to by the Contractor and subscribed before me this _____ day of _____ 20____.
Personally known _____ or Produced Identification _____

SEAL:

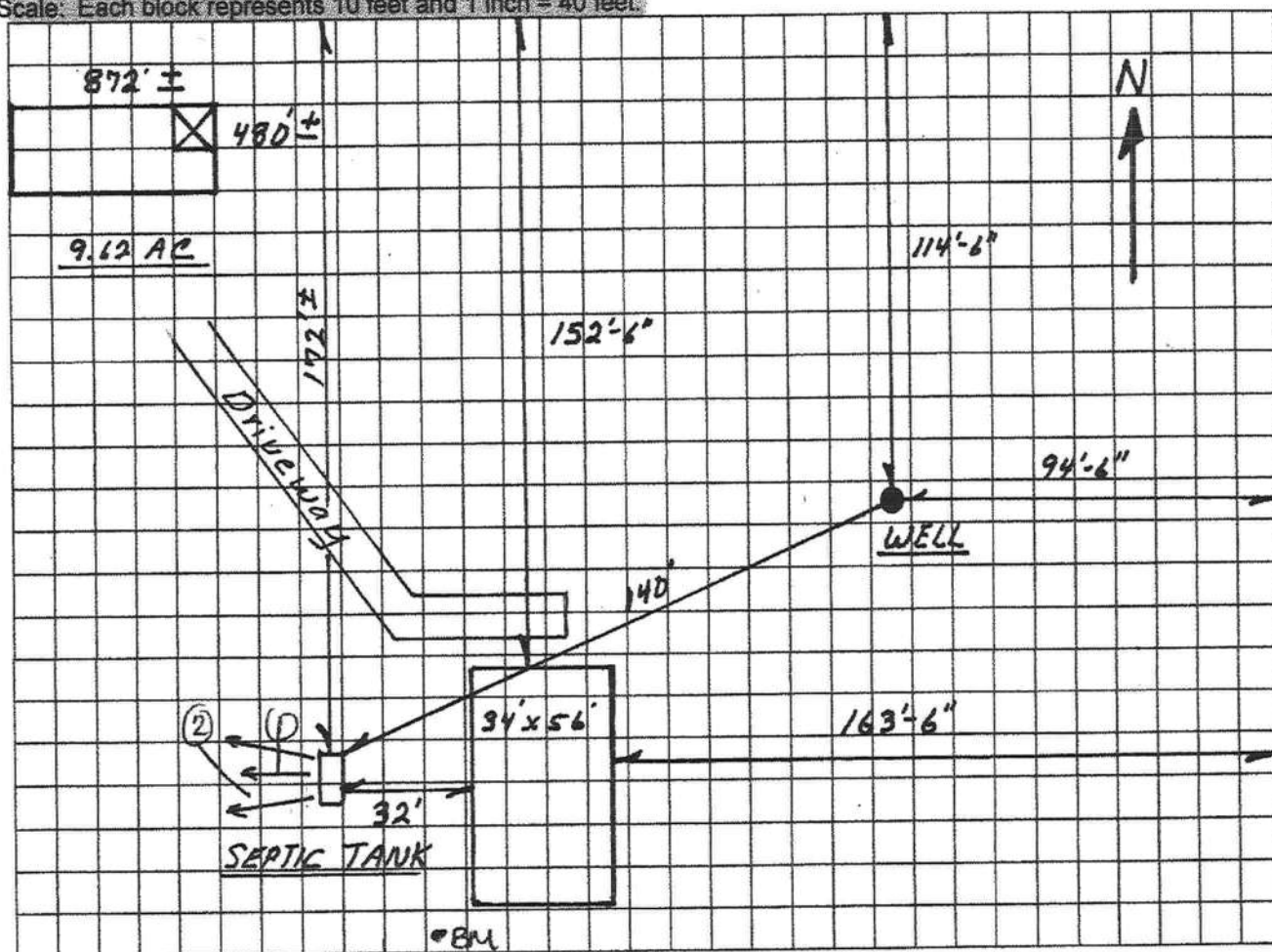
State of Florida Notary Signature (For the Contractor)

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 13-0042

----- PART II - SITEPLAN -----

Scale: Each block represents 10 feet and 1 inch = 40 feet.



Notes: 17AC of 9.62

Site Plan submitted by: Paul M. Fountain - Owner

Plan Approved [Signature]

Not Approved _____

Date 1/18/13

By _____

Colleen G County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

10-65-16-03815-144

Clerk's Office Stamp

Inst: 201312001510 Date: 1/30/2013 Time: 11:37 AM
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B: 1248 P: 2009

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): 10-65-16-03815-144 - Lot 44 Cardinal Farms
a) Street (job) Address: 4432 SW Herling St. Ft. White, FL 32038
2. General description of improvements: New Residence

3. Owner Information
a) Name and address: Paul M Fountain 4432 SW Herling St. Ft. White, FL 32038
b) Name and address of fee simple titleholder (if other than owner)
c) Interest in property

4. Contractor Information
a) Name and address: OWNER-BUILDER
b) Telephone No.: 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: Paul M Fountain 4432 SW Herling St. Ft. White FL 32038
b) Telephone No.: 386-1628-2199 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(1)(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): 2 years

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.

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

Paul M. Fountain
Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 30 day of January, 2013, by:

Paul fountain as Owner (type of authority, e.g. officer, trustee, attorney
fact) for Self-Owner Builder (name of party on behalf of whom instrument was executed).

Personally Known OR Produced Identification ☒ Type FCOL

Notary Signature L. Hodson Notary Stamp or Seal:



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.

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

SSO 024333511



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

PERMIT NO. 13-0042
DATE PAID: 1/24/13
FEE PAID: 425.00
RECEIPT #: 1095381

APPLICATION FOR:

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

APPLICANT: Paul M Fountain

AGENT: _____

TELEPHONE: 386-628-2199MAILING ADDRESS: 4432 SW Herlong St. Ft. White, FL 32034

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. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

Unrecorded

LOT: 44 BLOCK: _____ SUBDIVISION: Cardinal Farms PLATTED: _____PROPERTY ID #: 10-6S-16-03815-144 ZONING: _____ I/M OR EQUIVALENT: [Y / N]PROPERTY SIZE: 9.62 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC [] <=2000GPD [] >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? [Y / ☒ N] DISTANCE TO SEWER: _____ FTPROPERTY ADDRESS: 4432 SW Herlong St., Ft White FL 32038DIRECTIONS TO PROPERTY: South on HW 47, 14 miles Left on SW
Herlong St. 1 mile to Address on right (South Side)

BUILDING INFORMATION

☐ RESIDENTIAL☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	Single family Home	1	2680 total	
2				
3				
4				

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

SIGNATURE: Paul M Fountain DATE: 1-24-13



Columbia County Property Appraiser - Interactive Record Search & GIS Mapping System -

- HOME
- News Releases
- Record Search
- GIS Map
- Sales Report
- TAX Estimator
- General Info
- Exemptions
- Amendment 1
- Amendment 10
- AG Classification
- Tax Rates
- T P P
- HB 909
- F A Q
- Budget
- Homestead Fraud
- Download Data
- Download Forms
- Important Dates
- Links
- Contact Us

New Search | Search Results | Parcel Details | GIS Map

Columbia County Property Appraiser

CAMA updated: 12/19/2012

2012 Tax Year

Parcel: 10-6S-16-03815-144
<< Next Lower Parcel | Next Higher Parcel >>

Tax Collector | Tax Estimator | Property Card | Parcel List Generator | Interactive GIS Map | Print
<< Prev | Search Result 7 of 8 | Next >>

Owner & Property Info

Owner's Name	FOUNTAIN PAUL & NANCY		
Mailing Address	225 SW PECAN GLEN LAKE CITY, FL 32024		
Site Address	4432 SW HERLONG ST		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	11616
Land Area	9.620 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 44 CARDINAL FARMS UNREC: COMM AT SE COR OF SEC 11, RUN W 5311.34 FT, N 1995.16 FT, W 60.18 FT, N 2780.95 FT, W 872.34 FT FOR POB, W 872.01 FT, N 495.08 FT, TO THE S R/W OF OLD ICHETUCKNEE RD, E ALONG R/W 872 FT MOL, S 506.61 FT TO POB. AG 1034-485, QC 1176-1554 & WD 1229-1434 & EX 0.39 ACRES FOR CO RD R/W TAKEN PRCL #09 AS DESC ORB 1238-576			



Property & Assessment Values

2012 Certified Values		
Mkt Land Value	cnt: (0)	\$40,473.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$40,473.00
Just Value		\$40,473.00
Class Value		\$0.00
Assessed Value		\$40,473.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$40,473 Other: \$40,473 Schl: \$40,473	

2013 Working Values

NOTE:
2013 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Working Values

Sales History

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
2/8/2012	1229/1434	WD	V	Q	01	\$52,900.00
6/18/2009	1176/1554	QC	V	U	11	\$24,000.00
7/1/2004	1034/485	AG	V	Q		\$50,000.00

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						

~~Thru Connie:~~

BUILDING PERMIT NO. NA

3825625228 1939

Columbia County Property Appraiser

DB Last Updated: 3/12/2012

2011 Tax Year

Parcel: 10-6S-16-03815-144

<< Next Lower Parcel

Next Higher Parcel >>

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

Print

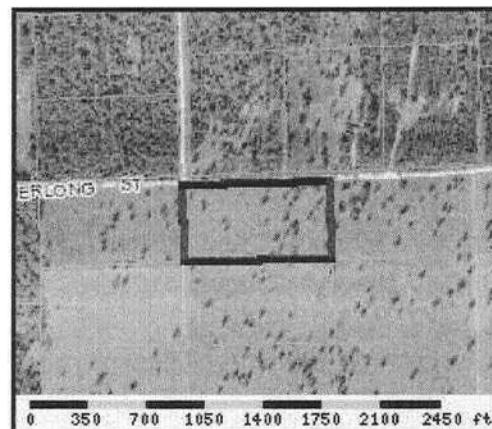
Owner & Property Info

<< Prev

Search Result: 8 of 9

Next >>

Owner's Name	FOUNTAIN PAUL & NANCY		
Mailing Address	5881 CHERRY BLOSSOM COURT LAS VEGAS, NV 89130		
Site Address	2016 SW SKYLINE LOOP		
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	11616
Land Area	10.010 ACRES	Market Area	02
Description	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.		
LOT 44 CARDINAL FARMS UNREC: COMM AT SE COR OF SEC 11, RUN W 5311.34 FT, N 1995.16 FT, W 60.18 FT, N 2780.95 FT, W 872.34 FT FOR POB, W 872.01 FT, N 495.08 FT, TO THE S R/W OF OLD ICHETUCKNEE RD, E ALONG R/W 872 FT MOL, S 506.61 FT TO POB, AG 1034-485, QC 1176-1554 & WD 1229-1434			



Property & Assessment Values

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$46,793.00
Ag Land Value	cnt: (1)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$46,793.00
Just Value		\$46,793.00
Class Value		\$0.00
Assessed Value		\$46,793.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$46,793 Other: \$46,793 Schl: \$46,793	

2012 Working Values

NOTE:

2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)

Sales History

[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
2/8/2012	1229/1434	WD	V	Q	01	\$52,900.00
6/18/2009	1176/1554	QC	V	U	11	\$24,000.00
7/1/2004	1034/485	AG	V	Q		\$50,000.00

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

--	--	--	--	--	--	--

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: 4/5/2012 DATE ISSUED: 4/11/2012

ENHANCED 9-1-1 ADDRESS:

4432 SW HERLONG ST

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

10-6S-16-03815-144

Remarks:

ADDRESS FOR PROPOSED STRUCTURE ON PARCEL.

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.

COLUMBIA COUNTY, FLORIDA
LAND DEVELOPMENT REGULATION ADMINISTRATOR
SPECIAL PERMIT FOR TEMPORARY USE
APPLICATION

Permit No. STUP - 1303-03

Date 3-22-2013

Fee \$100.00

Receipt No. 04339

Building Permit No. 000030753

Name of Title Holder(s) Paul & Nancy Fountain

Address 4432 SW Herlong St. City Ft. White

Zip Code 32038

Phone (386) 628-2199

NOTE: If the title holder(s) of the subject property are appointing an agent to represent them, a letter from the title holder(s) addressed to the Land Development Regulation Administrator **MUST** be attached to this application at the time of submittal stating such appointment.

Title Holder(s) Representative Agent(s) _____

Address _____ City _____

Zip Code _____

Phone ()

Paragraph Number Applying for #5

Proposed Temporary Use of Property RU while Constructing House

Proposed Duration of Temporary Use 1 yr.

Tax Parcel ID# 1D-65-16-03815-144

Size of Property 9.6 Ac.

Present Land Use Classification A-3

Present Zoning District A-3

Certain uses are of short duration and do not create excessive incompatibility during the course of the use. Therefore, the Land Development Regulation Administrator is authorized to issue temporary use permits for the following activities, after a showing that any nuisance or hazardous feature involved is suitably separated from adjacent uses; excessive vehicular traffic will not be generated on minor residential streets; and a vehicular parking problem will not be created:

1. In any zoning district: special events operated by non-profit, eleemosynary organizations.
2. In any zoning district: Christmas tree sales lots operated by non-profit, eleemosynary organizations.
3. In any zoning district: other uses which are similar to (1) and (2) above and which are of a temporary nature where the period of use will not extend beyond thirty (30) days.
4. In any zoning district: mobile homes or travel trailers used for temporary purposes by any agency of municipal, County, State, or Federal government; provided such uses shall not be or include a residential use.
5. In any zoning district: mobile homes or travel trailers used as a residence, temporary office, security shelter, or shelter for materials of goods incident to construction on or development of the premises upon which the mobile home or travel trailer is located. Such use shall be strictly limited to the time construction or development is actively underway. In no event shall the use continue more than twelve (12) months without the approval of the Board of County Commissioners and the Board of County Commissioners shall give such approval only upon finding that actual construction is continuing.
6. In agricultural, commercial, and industrial districts: temporary religious or revival activities in tents.
7. In agricultural districts: In addition to the principal residential dwelling, two (2) additional mobile homes may be used as an accessory residence, provided that such mobile homes are occupied by persons related by the grandparent, parent, step-parent, adopted parent, sibling, child, stepchild, adopted child or grandchild of the family occupying the principal residential use. Such mobile homes are exempt from lot area requirements. A temporary use permit for such mobile homes may be granted for a time period up to five (5) years. The permit is valid for occupancy of the specified family member as indicated on Family Relationship Affidavit and Agreement which shall be recorded in the Clerk of the Courts by the applicant.

The Family Relationship Affidavit and Agreement shall include but not be limited to:

- a. Specify the family member to reside in the additional mobile home;
- b. Length of time permit is valid;

- c. Site location of mobile home on property and compliance with all other conditions not conflicting with this section for permitting as set forth in these land development regulations. Mobile homes shall not be located within required yard setback areas and shall not be located within twenty (20) feet of any other building;
- d. Responsibility for non ad-valorem assessments;
- e. Inspection with right of entry onto the property by the County to verify compliance with this section. The Land Development Regulation Administrator, and other authorized representatives are hereby authorized to make such inspections and take such actions as may be required to enforce the provisions of this Section and;
- f. Shall be hooked up to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.
- g. Recreational vehicles (RV's) as defined by these land development regulations are not allowed under this provision (see Section 14.10.2#10).
- h. Requirements upon expiration of permit. Unless extended as herein provided, once a permit expires the mobile home shall be removed from the property within six (6) months of the date of expiration.

The property owner may apply for one or more extensions for up to two (2) years by submitting a new application, appropriate fees and family relationship residence affidavit agreement to be approved by the Land Development Regulations Administrator.

Previously approved temporary use permits would be eligible for extensions as amended in this section.

- 8. In shopping centers within Commercial Intensive districts only: mobile recycling collection units. These units shall operate only between the hours of 7:30 a.m. and 8:30 p.m. and shall be subject to the review of the Land Development Regulation Administrator. Application for permits shall include written confirmation of the permission of the shopping center owner and a site plan which includes distances from buildings, roads, and property lines. No permit shall be valid for more than thirty (30) days within a twelve (12) month period, and the mobile unit must not remain on site more than seven (7) consecutive days. Once the unit is moved off-site, it must be off-site for six (6) consecutive days.
- 9. In agriculture and environmentally sensitive area districts: a single recreational vehicle as described on permit for living, sleeping, or housekeeping purposes for one-hundred eighty (180) consecutive days from date that permit is issued, subject to the following conditions:
 - a. Demonstrate a permanent residence in another location.
 - b. Meet setback requirements.

- c. Shall be hooked up to or have access to appropriate electrical service, potable well and sanitary sewer facilities (bathroom and septic tank) that have been installed pursuant to permits issued by the Health Department and County Building and Zoning Department, where required.

Upon expiration of the permit the recreational vehicle shall not remain on property parked or stored and shall be removed from the property for 180 consecutive days.

Temporary RV permits are renewable only after one (1) year from issuance date of any prior temporary permit.

Temporary RV permits existing at the effective date of this amendment may be renewed for one (1) additional temporary permit in compliance with these land development regulations, as amended. Recreational vehicles as permitted in this section are not to include RV parks.

Appropriate conditions and safeguards may include, but are not limited to, reasonable time limits within which the action for which temporary use permit is requested shall be begun or completed, or both. Violation of such conditions and safeguards, when made a part of the terms under which the special permit is granted, shall be deemed a violation of these land development regulations and punishable as provided in Article 15 of these land development regulations.

I (we) hereby certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true and correct to the best of my (our) knowledge and belief.

Paul M. Fountain
Applicants Name (Print or Type)

[Signature]
Applicant Signature

3-22-2013
Date

OFFICIAL USE

Approved

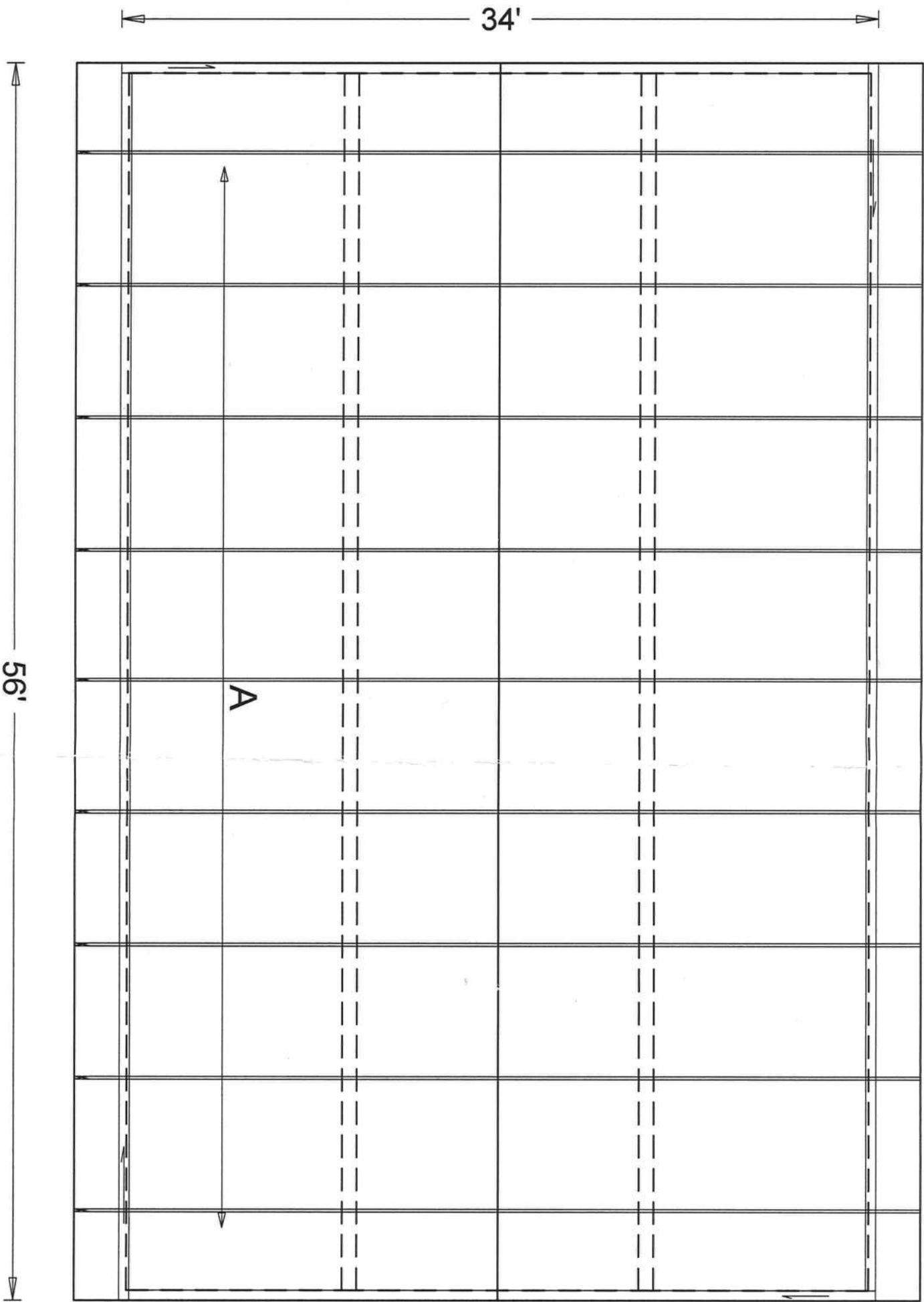
X BLK
22 MARCH 2013

Denied

Reason for Denial

Conditions (if any)

Fountain Res



Total Plan Area with OHs = 2128 sq.ft

Roof Plane Sheathing Area = 2379 sq. ft

Total Truss Quantity = 9.



:
Created : 03-07-2014
: <Not Found>

Customer: OWNER BUILDER
Job Name: Paul Fountain
:
Job Numb: 14-033
Designer: Jon Williams
Salesman: Curt V Burlingame

JOB NO:
14-033

PAGE NO:

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