Columbia County New Building Permit Application Deep Rise Cert
For Office Use Only Application # 101-58 Date Received By LH Permit #35904 Zoning Official Date 10/18/12 Flood Zone A E Land Use ESA Zoning ES4-2
FEMA Map #01590 Elevation 86' MFE 87' River Plans Examiner 100 Date 1-26-17
Comments In Floodway (Sitback from liver Issue? Possible Varience Reg.) Setback 88 From
NOC FEH Deed or PA Site Plan State Road Info / Well letter 911 Sheet Deed Parent Parcel #
Dev Permit # In Floodway Letter of Auth. from Contractor F W Comp. letter
Septic Permit No. 16-069 m OR City Water Fax
Applicant (Who will sign/pickup the permit) SAMES L CSKIPPER HAIR Phone 3863974309 365 7377 Address 275 nw STephen Foster DR. White Springs Flor 32096
Owners Name James L Harra II Phone 386 397-4359
911 Address 275 nw stephen Foctor Diz. white springs Flow 32096
Contractors Name Self Builder Phone
Address
Contractor Email***Include to get updates on this job.
Fee Simple Owner Name & Address
Bonding Co. Name & Address
Architect/Engineer Name & Address Michalas Geisler Lake city Fla 32055
Mortgage Lenders Name & Address name
Circle the correct power company – FL Power & Light – Clay Elec. – Suwannee Valley Elec. – Duke Energy
Property ID Number 01573 - 000 Estimated Construction Cost 190,000,00
Subdivision Name 1071.2.3 of GovT Lot 9 und S/D Lot 1-3 Block Unit Phase
Driving Directions from a Major Road Hwy 136 to white Springs roma turn left on Stephen
Foster DR First gate on the left-
Construction of single Framily Home Commercial OR Residential
Proposed Use/Occupancy Single Framily Hone Number of Existing Dwellings on Property C
Is the Building Fire Sprinkled? If Yes, blueprints included Or Explain
Circle Proposed - Culvert Permit or Culvert Waiver or D.O.T. Permit or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 50 Side 30 Side 60 Rear 40
Number of Stories 2 Heated Floor Area 2235 Total Floor Area 2235 Acreage 1
Zoning Applications applied for (Site & Development Plan, Special Exception, etc.)

Columbia County Building Permit Application

CODE: Florida Building Code 2014 and the 2011 National Electrical Code.

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.

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 pursued in good faith or a permit has been issued.

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 CONTRACTOR AND AGENT: 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.

<u>NOTICE TO OWNER:</u> 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.

JAMES L HAIR II	before any permit will t	e issued.
Print Owners Name	Owners Signature	
**If this is an Owner Builder Permit	t Application then, ONLY the owner can sign the building permit when it	is issued.
written statement to the owner	ny signature I understand and agree that I have informed and pro of all the above written responsibilities in Columbia County for ob Il application and permit time limitations.	
Contractor's Signature	Contractor's License Number Columbia County Competency Card Number	
Affirmed under penalty of perjury to Personally known or Produce	o by the <u>Contractor</u> and subscribed before me this day of ed Identification	20
	SEAL:	
State of Florida Notary Signature (F	For the Contractor)	

**Property owners must sign here

updated: 10/21/2016

Parcel: 07-2S-16-01574-000

<< Ne LowerPar | Ne HigherPar | >>

Tax Collector

Tax Estimator Property Card

2016 TRIM (pdf)

Parcel List Generator

Interactive GIS Map Print

<< Prev

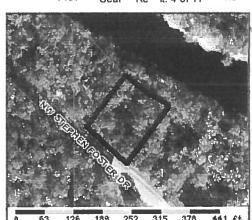
Sear Re It: 4 of 11

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ear

Owner's Name	HAIR JAMES L II & CRYSTAL	N	
Mailing Address	275 NW STEPHEN FOREST D WHITE SPRINGS, FL 32096	R	
Site Address	275 NW STEPHEN FOSTER D	R	
Use Desc. (code)	VACANT (000000)		
Tax District	3 (County)	Neighborhood	7216
Land Area	0.000 ACRES	Market Area	03
Description	NOTE: Thi description i not to for thi par I in an legal tran	be u d a the Legal ion.	Description

LOTS 2 & 3 OF GOVT LOT 9 UNR LOTS 2 & 3 OF GOVT LOT 9 UNR S/D. 241-102, WD 1074-1952, S/D. 241-102, WD 1074-1952, QC 1164-613, WD 1194-2029, QC 1164-613, WD 1194-2029, WD 1316-1046, WD 1316-1046,



2016 Certified Values	
Mkt Land Value	t: (0) \$36,800.0
Ag Land Value	t: (1) \$0.0
Building Value	t: (0) \$0.0
XFOB Value	t: (0) \$0.0
Total Appraised Value	\$36,800.0
Just Value	\$36,800.0
Class Value	\$0.0
Assessed Value	\$36,800.0
Exempt Value	\$0.0
Total Taxable Value	Cnty: \$36,80 Other: \$36,800 Schl: \$36,80

Mkt Land Value	t: (0)	\$36,800.00
Ag Land Value	t: (1)	\$0.00
Building Value	t: (0)	\$0.00
XFOB Value	t: (0)	\$0.00
Total Appraised Value		\$36,800.00
Just Value		\$36,800.00
Class Value		\$0.00
Assessed Value		\$36,800.00
Exempt Value		\$0.00
Total Taxable Value	Other: \$3	Cnty: \$36,800 6,800 Schl: \$36,800

NOTE: 2017 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

Show Similar Sales within 1/2 mile

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
2/13/2014	1316/1046	WD	V	U	11	\$100.00
5/18/2010	1194/2029	WD	V	U	11	\$100.00
12/17/2008	1164/613	QC	V	U	11	\$15,000.00
2/6/2006	1074/1952	WD	V	U	01	\$100.00

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

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

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
009900	AC NON-AG (MKT)	115 FF - (0000000.000AC)	1.00/1.00/1.00/1.00	\$320.00	\$36,800.00

Columbia County Property Appraiser

updated: 10/21/2016

<< Prev

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Next >>

RETURN TO JAMES L. HAIR, II 275 NW Stephen Forest Drive White Springs, Florida 32096

Inst: 201612009538 Date: 06/08/2016 Time: 1:09PNI Page 1 of 1 B: 1316 P: 1046, P.DeWitt Cason, Clerk of Court Columbia, County, By: BD Deputy ClerkDoc Stamp-Deed: 0.70

General Warranty Deed

Made this FEBRUARY 13, 2014 A.D.

BY JUDY L. HAIR, , whose address is: 16387 188th Street, O'Brien, Florida 32071, hereinafter called the grantor,

AS sole Trustee of the 5-dy L. Waik Living Trust paled april 16th 2008

TO JAMES L. HAIR, II AND CRYSTAL N. HAIR, husband and wife, whose post office address is: 275 NW Stephen Forest Drive, White Springs. Florida 32096, hereinafter called the grantee:

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

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

All of the Grantor's undivided 1/2 Interest in the following described property:

LOT 1, 2 and 3 of GOVT, LOT 9, unrecorded subdivision in Section 7, Township 2 South, Range 16 East, as per that certain map or plat recorded in Official Record Book 241 page 102 of the public records of COLUMBIA COUNTY, FLORIDA.

NB: Being the same lands as shown in Official Record Book 1194 page 2029

Parcel ID Number: 01574-000 & 001573-000

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defen the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruin subsequent to December 31, 2013.

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

Signed, sealed and delivered in our presence:

JUDY L. HAIR as sole trustee of the JUDY L. HAIR LIVING

TRUST, dated April 16, 2008

(Seal)

F. LLINGTON

State of FLORIDA
County of COLUMBIA

Witness Printed Name

COLUMBIA COUNTY, FLORIDA.

NB: Being the same lands as shown in Official Record Book 1194 page 2029

Parcel ID Number: 01574-000 & 001573-000

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31, 2013.

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

Signed, sealed and delivered in our presence:	
Datick Tillar Droppe	JUDY L. HAIR as sole trustee of the JUDY L. HAIR/LIVING TRUST, dated April 16, 2008
Witness Printed Name HAMICK / YIEV RUY	TROST, dated April 10, 2006
/ town	(Seal)
Witness Printed Name MATTHEW J. ELLINGTON	

State of FLORIDA County of COLUMBIA

The foregoing instrument was acknowledged before me this February 13, 2014, by Judy L. Hair as sole Trustee of the Judy L. Hair Living Trust dated April 16, 2008., who is/arc/personally known to me or who has produced ______ as identification.

Print (value: 77 11 6 7

My Commission Expires:

MICHEL GREENWALD

MY COMMISSION # EE 875335

EXPIRES: June 15, 2017

Bonded Thru Notary Public Underwriters

DEED Individual Warranty Deed - Legal on Face



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 with in 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.myfloridalicense.com/dbpr/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:

275 NW Stephon Foster Dr

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 of 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

() Farm Outbuilding () Two-Family Residence () Farm Outbuilding
() Addition, Alteration, Modification or other Improvement
() Commercial, Cost of Construction for construction of
() Other
, 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.
Owner Builder Signature Date
NOTARY OF OWNER BUILDER SIGNATURE
The above signer is personally known to me or produced identification HON ACL DIVERS
The above signer is personally known to me or produced identification 101.40. Notary Signature Date 11 Date 11 Date VIRGINIA A EVERETT Notary Public - State of Florida
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



STATE OF FLORIDA DEPARTMENT OF HEALTH

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APPLICATION FOR CONSTRUCTION PERMIT

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Plan submitted by:				
ApprovedNot Approved			Date [[[C]]	



STATE OF FLORIDA DEPARTMENT OF HEALTH ONSITE SEWAGE TREATMENT AND DISPOSAL System

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Page 1 of 4

APPLICATION FOR CONSTRUCTION PERMIT
APPLICATION FOR: [] New System [] Existing System [] Holding Tank [] Innovative [] Repair [] Abandonment [] Temporary [] Occi-
APPLICANT: James C. Harr IT
AGENT:
MAILING ADDRESS: 275. NW Stephen Foster DR. white Spin-y the 32091
TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(x) 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
LOT: 1-3 BLOCK: SUBDIVISION: GOOT LOT 9
PROPERTY ID #: 07 - 25.16.01573. ZONING: I/M OR EQUIVALENT: [Y/N]
PROPERTY SIZE: ACRES WATER SUPPLY: [PRIVATE PUBLIC [] <= 2000GPD [] > 2000GPD
IS SEWER AVAILABLE AS PER 381.0065, F8? [Y/N] DISTANCE TO SEWER:FT
PROPERTY ADDRESS: SAME AS ADOUG
DIRECTIONS TO PROPERTY: Ituy at 111 to white Sprengs turn Lift
on EL 136 town Left on white Springs Korn town
left on Stylen Foster on Frest grate on left.
BUILDING INFORMATION [] RESIDENTIAL [] COMMERCIAL
Unit Type of No. of Building Commercial/Institutional System Design No Establishment Bedrooms Area Sqft Table 1, Chapter 64E-6, FAC
1 Snyk (ranky 2 2235) 1 nou 10,2016
3 —————————————————————————————————————
4
[] Floor/Equipment Drains [] Other (Specify)
SIGNATURE: DATE: 1 Other (Specify)
DH 4015, 08/09 (Obsoletes previous editions which may not be used) Incorporated 64E-6,001, FAC

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:

6/28/2006

DATE ISSUED:

6/29/2006

ENHANCED 9-1-1 ADDRESS:

275

NW STEPHEN FOSTER

DR

WHITE SPRINGS

FL 32096

PROPERTY APPRAISER PARCEL NUMBER:

07-28-01574-000

Remarks:

ALSO 07-2S-16-01573-000

progress Energy

BRANDER mussy

850 694 4126

progress - energy, com

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.

307

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER	161458	CONTRACTOR HAIR	
APPLICATION NUMBER		CUNTRACTUR	

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

PHONE 386 397.4359

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

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

ELECTRICAL	Print Name	Signature	
	License #:	Phor	ne #:
MECHANICAL/	Print Name	Signature	
A/C	License #:	Phon	e #:
PLUMBING/	Print Name	Signature	
GAS	License #:	Phoi	ne #:
ROOFING	Print Name	Signature	
	License #:	Phor	ne #:
SHEET METAL	Print Name	Signature	
	Print Name License #:	Phor	ne #:
FIRE SYSTEM/	Print Name	Signature	
SPRINKLER	License#:	Phor Signature_	ne #:
SOLAR	Print Name	Signature_	
	License #:	Phor	ne #:
Specialty Li	tense License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FIN	ISHER		
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CONCRETE FIN FRAMING	ISHER		
CONCRETE FIN FRAMING INSULATION	ISHER		
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CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL			A A
CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER			A A
CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA	LLER		A CAT
CONCRETE FIN FRAMING INSULATION STUCCO DRYWALL PLASTER CABINET INSTA	LLER		A A
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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.



GTC Design Group, LLC P.O. Box 187 Live Oak, FL 32064 (Phone) 386.362.3678 (Fax) 386.362.6133 ggill@gtcdesigngroup.com

September 11, 2006

Zero Rise Certification

Client / Owner:

James L. Hair II

Property Description:

Lot 2 of unrecorded S/D in the SW ½ of the SW ½ of

Section 7, Township 2 South, Range 16 East

Columbia County, FL

Structure in Floodway:

Single Family Dwelling

River Mile:

169.5

Elevation of 100 yr flood: 87

Community Panel:

120070 0105 B

I hereby certify that construction of the proposed residence will not increase flood elevations of the Upper Suwannee River.

Chadwick Williams, PE

September 11, 2006

Client Copy



GTC Design Group, LLC P.O. Box 187 Live Oak, FL 32064 (Phone) 386.362.3678 (Fax) 386.362.6133 ggill@gtcdesigngroup.com

September 11, 2006
John Hastings, P.E.
% Suwannee River Water Management District
9225 CR 49
Live Oak, FL 32060

SUBJECT: Zero Rise - James L. Hair II

Mr. Hastings,

Mr. Hair proposes to build a home in Section 7, Township 2 South, Range 16 East, Columbia County, FL. The structure will be a 30' x 35' site built home and will include a 14' x 14' deck in the floodway of the Suwannee River.

A new cross section was added at the site location. A site plan is attached locating the property, and existing cross sections.

The following steps were executed in the doing the zero rise calculations.

(1) Run the model with SRWMD existing cross sections. Verify that the model matches the original flood study results.

The output from the run using the existing cross sections matches the original flood study.

(2) Interpolate between existing cross sections and add a new cross section at the site location.

The new section, RS 209.5 (mile post 169.5), was interpolated from river posts 209 (mile post 169.35) and 210 (mile post 169.65). The elevations from the interpolated cross sections were adjusted accordingly.

(3) Verify that the run using the additional cross section matches the original output.

The output from the run using the interpolated cross sections matches the original flood study.

(4) Add obstacles along the new cross section to model the piers under the house.

GTC Design Group, LLC

An obstacle width of 35 feet was added at cross section RS 209.5. RS 209.5 is located at the center of the building. An obstacle elevation of 88 ft was input to insure the structure would be modeled correctly.

(5) Verify the run including the obstacles matches the original model run.

The water surface elevations for all three runs match and a zero rise is achieved.

(6) Print out cross sections

See attachments.

Thank you,

Chadwick Williams, PE

Columbia County Building Department Flood Development Permit

Development Permit F 023- 17-015

DATE 10/23/2017 BUILDING PERMIT NUMBER 000035904				
APPLICANT JAMES L. HAIR,II. PHONE 386.365.7377				
ADDRESS 275 NW STEPHEN FOSTER DR WHITE SPRINGS FL 32096				
OWNER JAMES L. HAIR,II. PHONE 386.365.7377				
ADDRESS 275 NW STEPHEN FOSTER DR WHITE SPRINGS FL 32096				
CONTRACTOR JAMES L. HAIR, II. PHONE 386-365-7377				
ADDRESS 275 NW STEPHEN FOSTER DR WHITE SPRINGS FL 32096				
SUBDIVISION GOVT LOT 9 UNREC S/D Lot 1-3 Block Unit Phase				
TYPE OF DEVELOPMENT SFD/UTILITY PARCEL ID NO. 07-2S-16-01573-000				
FLOOD ZONE <u>AE</u> BY <u>BMS</u> 2-4-2009 FIRM COMMUNITY # 120070 - PANEL # <u>0159</u> C				
FIRM 100 YEAR ELEVATION SGO PLAN INCLUDED YES or NO				
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 87.0				
IN THE REGULATORY FLOODWAY (YES OF NO RIVER SUMANNET				
SURVEYOR/ENGINEER NAME L. SCOTT BRITT LICENSE NUMBER LS 5757				
ONE FOOT RISE CERTIFICATION INCLUDED				
ONE FOOT RISE CERTIFICATION INCLUDED ZERO RISE CERTIFICATION INCLUDED				
ONE FOOT RISE CERTIFICATION INCLUDED ZERO RISE CERTIFICATION INCLUDED				
ZERO RISE CERTIFICATION INCLUDED				
ZERO RISE CERTIFICATION INCLUDED SRWMD PERMIT NUMBER				
ZERO RISE CERTIFICATION INCLUDED SRWMD PERMIT NUMBER (INCLUDING THE ONE FOOT RISE CERTIFICATION)				
ZERO RISE CERTIFICATION INCLUDED SRWMD PERMIT NUMBER (INCLUDING THE ONE FOOT RISE CERTIFICATION)				
ZERO RISE CERTIFICATION INCLUDED SRWMD PERMIT NUMBER (INCLUDING THE ONE FOOT RISE CERTIFICATION) DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED				

135 NE Hernando Ave., Suite B-21 Lake City, Florida 32055

Phone: 386-758-1008 Fax: 386-758-2160





Britt Surveying and Mapping, LLC

2086 SW Main Blvd Ste 112 • Lake City, FL 32025 386-752-7163 P • 386-752-5573 F • www.brittsurvey.com

08/10/17

L-24735

Re: Lots 2 and 3 of a subdivision of part of the SW 1/4 of the SW 1/4 of section 7, township 2 south, range 16 east, Columbia County, Florida.

Suwannee River Campfire Ministries

To Whom It May Concern:

The proposed residence is located on lots 2 and 3 of a subdivision of part of the SW 1/4 of the SW 1/4 of section 7, township 2 south, range 16 east, Columbia County, Florida, and is 88.32 feet to the edge of the water as per field survey data taken on 7/30/17.

Sincerely,

L. Scott Britt LS 5757

