

DATE 09/15/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022308

APPLICANT JERRY CASTAGNA PHONE 755-6867

ADDRESS 521 NW OLD MILL ROAD LAKE CITY FL 32055

OWNER DANIEL CRAPPS PHONE 755-5110

ADDRESS 932 NW BLACKBERRY CIRCLE LAKE CITY FL 32055

CONTRACTOR JERRY CASTAGNA PHONE _____

LOCATION OF PROPERTY LAKE JEFFREY RD., TL ON NASH, TR ON BLACKBERRY CIRCLE,
FOLLOW AROUND, 4TH LOT ON LEFT

TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 122800.00

HEATED FLOOR AREA 2456.00 TOTAL AREA 3361.00 HEIGHT .00 STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 7/12 FLOOR SLAB

LAND USE & ZONING PRRD MAX. HEIGHT 18

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

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

PARCEL ID 17-3S-16-02168-123 SUBDIVISION BLACKBERRY FARMS

LOT 23 BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES _____

000000403 N CBC047842 Signature on File, could not print - virus

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

PERMIT 04-0838-N BK RJ Y

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

COMMENTS: ONE FOOT ABOVE THE ROAD, NOC ON FILE

Check # or Cash 1321

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

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

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

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

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

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

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

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

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

BUILDING PERMIT FEE \$ 615.00 CERTIFICATION FEE \$ 16.81 SURCHARGE FEE \$ 16.81

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

FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ 25.00 TOTAL FEE 723.62

INSPECTORS OFFICE [Signature] CLERKS OFFICE CH

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

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

This Permit Must Be Prominently Posted on Premises During Construction

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

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

Columbia County Building Permit Application

For Office Use Only Application # 0408-89 Date Received 8/27/04 By GT Permit # 403/22308
 Application Approved by - Zoning Official _____ Date _____ Plans Examiner RS Date 9/15/04
 Flood Zone Xperplex Development Permit N/A Zoning PRRD Land Use Plan Map Category A-3
 Comments _____

Applicants Name JERRY CASTANA Phone 386-755-6867
 Address 521 NW Old Mill Rd LAKE CITY FLA 32055
 Owners Name DANIAL CRAPPS Phone 386 755 5110
 911 Address 932 NW Blackberry Circle L.C. 32055
 Contractors Name CASTANA. Cons Phone 386-755-6867
 Address 521 NW Old Mill Rd LAKE CITY FLA 32055
 Fee Simple Owner Name & Address DANIAL CRAPPS - W Hwy 90 Lake City
 Bonding Co. Name & Address N/A
 Architect/Engineer Name & Address NICHOLAS PAUL GRISLER - RT 17 BOX 103 LAKE CITY FL
 Mortgage Lenders Name & Address _____

Property ID Number 17-35-1602168123 Estimated Cost of Construction 105,000.00
 Subdivision Name Lot 23 Blackberry Lot 23 Block _____ Unit _____ Phase 1
 Driving Directions LAKE JARVIS Rd TO WASH Rd TURN LEFT.
GO APP 2 1/2 MILE BLACK BERRY SUB TURN RIGHT.
FOLLOW Rd TO Lot 23
 Type of Construction FRAM B / STUCCO / BRICK Number of Existing Dwellings on Property 0
 Total Acreage 2.53 Lot Size 2.40 Do you need a Culvert Permit or Culvert Waiver or Have an Existing Dr _____
 Actual Distance of Structure from Property Lines - Front 100' Side 70' Side 70' Rear 300'
 Total Building Height 18'0 Number of Stories 1 Heated Floor Area 2455 Roof Pitch 7/12

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction.

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

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

[Signature]
 Owner Builder or Agent (Including Contractor)

STATE OF FLORIDA
 COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me
 this 15th day of Sept 2004.

Personally known ✓ or Produced Identification _____

[Signature]
 Contractor Signature
 Contractors License Number CBC 047842
 Competency Card Number _____

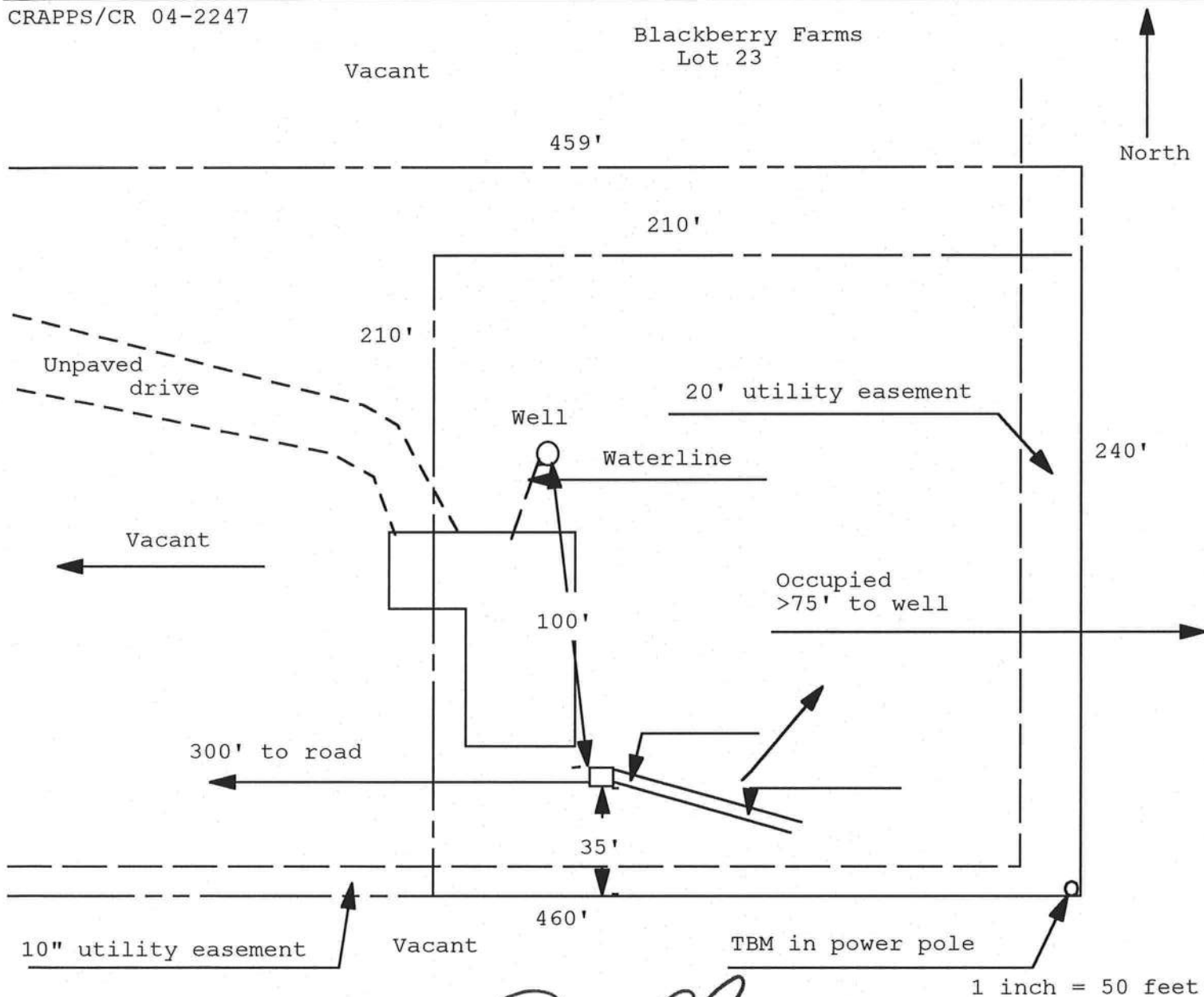


[Signature]
 Notary Signature

Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan
Permit Application Number: 04 0838N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

CRAPPS/CR 04-2247



Site Plan Submitted By Paul Lloyd

Date 8/6/04

Plan Approved Paul Lloyd Not Approved

Date 8/6/04

By Paul Lloyd

Sallie Hradsky

CPHU

Notes:

ESI- COLUMBIA

APPROVED

NOTICE OF COMMENCEMENT FORM
COLUMBIA COUNTY, FLORIDA

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

Tax Parcel ID Number 17-35-16 02168/123

1. Description of property: (legal description of the property and street address or 911 address)

LOT 23 BLACK BERRY SUB NASH Rd. (W)

Inst: 2004019779 Date: 08/26/2004 Time: 14:21

B DC, P. DeWitt Cason, Columbia County B: 1024 P: 1642

2. General description of improvement: NEW HOUSE

3. Owner Name & Address DANIAL CRAPPS & SARA CASTAGNA

Interest in Property _____

4. Name & Address of Fee Simple Owner (if other than owner): DANIAL CRAPPS

5. Contractor Name CASTAGNA Cons. Phone Number 386 755 6867

Address 521 NW Old Mill Rd LAKE CITY FLA 32055

6. Surety Holders Name N/A. Phone Number _____

Address _____

Amount of Bond _____

7. Lender Name JERRY CASTAGNA Phone Number 386-755-6867

Address 521 NW Old Mill Rd LAKE CITY FLA 32055

8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:

Name JERRY CASTAGNA Phone Number 386-755-6867

Address 521 NW Old Mill Rd

9. In addition to himself/herself the owner designates N/A. of

_____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) -

(a) 7. Phone Number of the designee N/A

10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording, (Unless a different date is specified) _____

NOTICE AS PER CHAPTER 713, Florida Statutes:

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.

Sworn to (or affirmed) and subscribed before
day of August 24, 2004

NOTARY STAMP/SEAL
K. LEDEE
MY COMMISSION # DD 286044
EXPIRES: January 28, 2008
Bonded Thru Budget Notary Services

Signature of Owner

Signature of Notary

SITE PLAN

NEW BLACK BEAR CIRCLE

240'

1 DRIVE

MURK RD
BLACK BEAR, SUB
LOT 23
246' X 459'

TAX PARCELS
10 #

17-35-1002168112

440'

SEPTIC

70'-0"

NEW HOUSE

130'-0"

300'

60'-0"

70'

50' DRIVE

459'

NOT TO SCALE

240

COLUMBIA COUNTY 9-1-1 ADDRESSING

263 NW Lake City Ave. * P. O. Box 2949 * Lake City, FL 32056-2949
 PHONE: (386) 752-8787 * 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 ISSUED: August 30, 2004

ENHANCED 9-1-1 ADDRESS:

932 NW BLACKBERRY CIR (LAKE CITY, FL 32055)

Addressed Location 911 Phone Number: NOT AVAIL.

OCCUPANT NAME: NOT AVAIL.

OCCUPANT CURRENT MAILING ADDRESS: _____

PROPERTY APPRAISER MAP SHEET NUMBER: 21

PROPERTY APPRAISER PARCEL NUMBER: 17-3S-16-02168-123

Other Contact Phone Number (If any): _____

Building Permit Number (If known): _____

Remarks: LOT 23 BLACKBERRY FARMS S/D

Address Issued By: _____

Columbia County 9-1-1 Addressing Department

**COLUMBIA COUNTY
 9-1-1 ADDRESSING
 APPROVED**

RIGHT-J LOAD AND EQUIPMENT SUMMARY

8-25-04

File name: Project4.rsr
For: CASTAGNA CONSTRUCTION

Zone: Entire House

By: LAKE CITY
Phone: BRINKLEY ELECTRIC INC
P O BOX 1675
LAKE CITY
Phone: 386-752-6810
Job #: 04-15

FL
Fax:
FL 32056
Fax: 386-752-6018

Wthr :
Notes:

Gainesville AP (S) FL

Lot 23 Blkberry

WINTER DESIGN CONDITIONS

Outside db: 31 °F
Inside db: 70 °F
Design TD: 39 °F

SUMMER DESIGN CONDITIONS

Outside db: 93 °F
Inside db: 75 °F
Design TD: 18 °F
Daily Range M
Rel. Hum. : 50 %
Grains Water 51 gr

HEATING SUMMARY

Bldg. Heat Loss 30317 Btuh
Ventilation Air 0 CFM
Vent Air Loss 0 Btuh
Design Heat Load 30317 Btuh

SENSIBLE COOLING EQUIP LOAD SIZING

Structure 39122 Btuh
Ventilation 0 Btuh
Design Temp. Swing 3.0 °F
Use Mfg. Data n
Rate/Swing Mult. 0.98
Total Sens Equip Load 38340 Btuh

INFILTRATION

Method Simplified
Construction Quality Average
Fireplaces 0

LATENT COOLING EQUIP LOAD SIZING

Internal Gains 5980 Btuh
Ventilation 0 Btuh
Infiltration 4772 Btuh
Tot Latent Equip Load 10752 Btuh
Total Equip Load 49092 Btuh

	HEATING	COOLING
Area (sq.ft.)	2190	2190
Volume (cu.ft.)	20599	20599
Air Changes/Hour	0.7	0.4
Equivalent CFM	241	138

HEATING EQUIPMENT SUMMARY

Make *RHEEM Manufac.*
Trade *RHEEM RJMA Series*
RJMA A060D

Efficiency *70.2* AFUE
Heating Input 0 Btuh
Heating Output 0 Btuh
Heating Temp Rise 0 °F
Actual Heating Fan *1835* CFM
Htg Air Flow Factor 0.052 CFM/Btuh

Space Thermostat

COOLING EQUIPMENT SUMMARY

Make *RHEEM Manufac.*
Trade *RHEEM RJMA Series*
RJMA-A060D

Efficiency *12.1* EER
Sensible Cooling *4200* 0 Btuh
Latent Cooling *1800* 0 Btuh
Total Cooling *6000* 0 Btuh
Actual Cooling Fan *1835* CFM
Clg Air Flow Factor 0.043 CFM/Btuh

Load Sens Heat Ratio 78

MANUAL J: 7th Ed.

Right-Suite:

Ver 4.1.31

S/N

RSR25116

RIGHT-J CALCULATION PROCEDURES A, B, C, D

Job #: 04-15

Zone: Entire House

Procedure A - Winter Infiltration HTM Calculation*

8-25-04

File name: Project4.rsr

1.	Winter Infiltration CFM						
	0.7 AC/HR x	20599	Cu.Ft. x 0.0167 =	241	CFM		
2.	Winter Infiltration Btuh						
	1.1 x	241	CFM x	39	Winter TD =	10331	Btuh
3.	Winter Infiltration HTM						
	10331 Btuh /	348	Total Window =	29.7	HTM		
			and Door Area				

Procedure B - Summer Infiltration HTM Calculation*

1.	Summer Infiltration CFM						
	0.4 AC/HR x	20599	Cu.Ft. x 0.0167 =	138	CFM		
2.	Summer Infiltration Btuh						
	1.1 x	138	CFM x	18	Summer TD =	2725	Btuh
3.	Summer Infiltration HTM						
	2725 Btuh /	348	Total Window =	7.8	HTM		
			and Door Area				

Procedure C - Latent Infiltration Gain

0.68 x	51	gr.diff. x	138	CFM =	4772	Btuh
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Procedure D - Equipment Sizing Loads

1.	Sensible Sizing Load						
	Sensible Ventilation Load						
	1.1 x	0	Vent.CFM x	18	Summer TD	=	0 Btuh
	Sensible Load for Structure (Line 19)					+	39122 Btuh
	Sum of Ventilation and Structure Loads					=	39122 Btuh
	Rating and Temperature Swing Multiplier					x	0.98 RSM
	Equipment Sizing Load - Sensible					+	38340 Btuh
2.	Latent Sizing Load						
	Latent Ventilation Load						
	0.68 x	0	Vent.CFM x	51	gr.diff.	=	0 Btuh
	Internal Loads =	230	x	26	No. People	+	5980 Btuh
	Infiltration Load From Procedure C					+	4772 Btuh
	Equipment Sizing Load - Latent					=	10752 Btuh

*Construction Quality is:

a

No. of Fireplaces is:

0

MANUAL J: 7th Ed.

Right-Suite:

Ver 4.1.31

S/N

RSR25116

RIGHT-J WINDOW DATA

Job # 04-15

File name Project4.rsr 8-25-04

W	S	D	W	G	L	S	S	O	N	A	S	O	O	W	C	W	S
N	K	I	A	L	O	T	H	V	G	N	H	V	V	H	H	N	H
D	Y	R	L	A	W	R	A	H	L	G	C	R	R	G	T	A	A
W			L	Z	E	M	D	G	Z	L	O	X	Y	T	M	R	R

MASTER BED

a	n	e	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	71.2	40.0	0.0
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MASTER BATH

NOOK

a	n	e	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	71.2	45.0	0.0
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KITCHEN

FAMILY ROOM

a	n	e	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	71.2	36.0	0.0
b	n	e	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	71.2	21.0	0.0

DINING ROOM

a	n	w	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	71.2	30.0	0.0
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FOYER

PARLOR

a	n	w	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	71.2	30.0	0.0
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BED 1

a	n	w	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	71.2	1.0	0.0
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BATH

a	n	s	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	37.2	4.0	0.0
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BED 2

a	n	s	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	37.2	30.0	0.0
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HALL BATH

a	n	s	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	37.2	4.0	0.0
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BED 3

a	n	e	a	c	n	n	n	n	2	90	1.0	0.0	0.0	1.0	71.2	30.0	0.0
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MANUAL J: 7th Ed. — Right-Suite 4.1.31 — S/N RSR25116																
1	Name of Room				Entire House			MASTER BED			MASTER BATH			NOOK		
2	Running Ft. Exposed Wall				221.0 Ft.			34.0 Ft.			16.0 Ft.			12.5 Ft.		
3	Room Dimensions, Ft.							20.5 x 13.9 ft			16.0 x 20.0 ft			12.5 x 9.0 ft		
4	Ceilings, Ft		Condit. Option		9.2 d			10.0 heat/cool			10.0 heat/cool			10.0 heat/cool		
	TYPE OF EXPOSURE		CST NO.	HTM Htg Clg	Area Length	Btuh Htg Clg	Area Length	Btuh Htg Clg	Area Length	Btuh Htg Clg	Area Length	Btuh Htg Clg	Area Length	Btuh Htg Clg		
5	Gross Exposed Walls and Partitions	a	12I	2.1 1.2	2012	**** ****	340	**** ****	160	**** ****	125	**** ****				
b			0.0 0.0	0	**** ****	0	**** ****	0	**** ****	0	**** ****					
c			0.0 0.0	0	**** ****	0	**** ****	0	**** ****	0	**** ****					
d			0.0 0.0	0	**** ****	0	**** ****	0	**** ****	0	**** ****					
e			0.0 0.0	0	**** ****	0	**** ****	0	**** ****	0	**** ****					
f			0.0 0.0	0	**** ****	0	**** ****	0	**** ****	0	**** ****					
6	Windows and Glass Doors Heating	a	4C	19.1 **	250	4778 ****	40	764 ****	0	0 ****	45	860 ****				
b		9G	20.4 **	21	428 ****	0	0 ****	0	0 ****	0	0 ****					
c			0.0 **	0	0 ****	0	0 ****	0	0 ****	0	0 ****					
d			0.0 **	0	0 ****	0	0 ****	0	0 ****	0	0 ****					
e			0.0 **	0	0 ****	0	0 ****	0	0 ****	0	0 ****					
f			0.0 **	0	0 ****	0	0 ****	0	0 ****	0	0 ****					
7	Windows and Glass Doors Cooling	North		0.0	0	****	0	0 ****	0	0 ****	0	0 ****				
NE/NW			0.0	0	****	0	0 ****	0	0 ****	0	0 ****					
E/W			71.2	233	****	16590	40	****	2848	0	****	45	****			
SE/SW			0.0	0	****	0	0 ****	0	0 ****	0	0 ****					
South			37.2	38	****	1414	0	****	0	0 ****	0	0 ****				
Horz			0.0	0	****	0	0 ****	0	0 ****	0	0 ****					
8	Other doors	a	11C	18.3 10.2	77	1411 782	41	752 416	0	0 0	0	0 0				
b			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
9	Net Exposed Walls and Partitions	a	12I	2.1 1.2	1664	3569 1977	259	556 308	160	343 190	80	172 95				
b			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
c			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
d			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
e			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
f			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
10	Ceilings	a	16G	1.3 1.4	2190	2819 3036	285	367 395	320	412 444	113	145 156				
b			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
c			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
11	Floors	a	22A	31.6 0.0	221	6981 0	34	1074 0	16	505 0	13	395 0				
b			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
c			0.0 0.0	0	0 0	0	0 0	0	0 0	0	0 0					
12	Infiltration	a		29.7 7.8	348	10331 2725	81	2405 634	0	0 0	45	1336 352				
13	Subtot Btuh Loss=6+8...+11+12				****	30317	****	****	5917	****	****	1260	****	****	2907	****
14	Duct Btuh Loss				0%	0	****	0%	0	****	0%	0	****	0%	0	****
15	Total Btuh Loss = 13+14				****	30317	****	****	5917	****	****	1260	****	****	2907	****
16	Int. Gains: People @			300	26	****	7800	2	****	600	4	****	1200	1	****	300
		Appl. @			1200	4	****	4800	0	****	0	0	****	0	0	****
17	Subtot RSH Gain=7+8...+12+16				****	****	39122	****	****	5201	****	****	1834	****	****	4107
18	Duct Btuh Gain				0%	****	0	0%	****	0	0%	****	0	0%	****	0
19	Total RSH Gain=(17+18)*PLF				1.00	****	39122	1.00	****	5201	1.00	****	1834	1.00	****	4107
20	CFM Air Required				****	1694	1694	****	331	225	****	70	79	****	162	178

MANUAL J: 7th Ed. — Right-Suite 4.1.31 — S/N RSR25116																	
1	Name of Room				KITCHEN			FAMILY ROOM			DINING ROOM			FOYER			
2	Running Ft. Exposed Wall				0.0 Ft.			16.2 Ft.			11.0 Ft.			8.3 Ft.			
3	Room Dimensions, Ft.				12.5 x 11.5 ft			16.2 x 19.0 ft			11.0 x 13.0 ft			8.3 x 10.0 ft			
4	Ceilings, Ft		Condit. Option		10.0 heat/cool			10.0 heat/cool			10.0 heat/cool			10.0 heat/cool			
TYPE OF EXPOSURE		CST NO.	HTM Htg	HTM Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	
5	Gross Exposed Walls and Partitions	a	12I	2.1	1.2	0	****	****	162	****	****	110	****	****	83	****	****
		b		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		c		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		d		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		e		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		f		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
6	Windows and Glass Doors Heating	a	4C	19.1	**	0	0	****	36	688	****	30	573	****	0	0	****
		b	9G	20.4	**	0	0	****	21	428	****	0	0	****	0	0	****
		c		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		d		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		e		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		f		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
7	Windows and Glass Doors Cooling	North		0.0	0	****	0	0	****	0	0	****	0	0	****	0	0
		NE/NW		0.0	0	****	0	0	****	0	0	****	0	0	****	0	0
		E/W		71.2	0	****	0	57	****	4058	30	****	2136	0	****	0	0
		SE/SW		0.0	0	****	0	0	****	0	0	****	0	0	****	0	0
		South		37.2	0	****	0	0	****	0	0	****	0	0	****	0	0
		Horz		0.0	0	****	0	0	****	0	0	****	0	0	****	0	0
8	Other doors	a	11C	18.3	10.2	0	0	0	0	0	0	0	0	0	36	660	365
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
9	Net Exposed Walls and Partitions	a	12I	2.1	1.2	0	0	0	105	225	125	80	172	95	47	101	56
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		d		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		e		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		f		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
10	Ceilings	a	16G	1.3	1.4	144	185	199	308	396	427	143	184	198	83	107	115
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
11	Floors	a	22A	31.6	0.0	0	0	0	16	512	0	11	347	0	8	262	0
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
12	Infiltration	a		29.7	7.8	0	0	0	57	1692	446	30	891	235	36	1069	282
13	Subtot Btuh Loss=6+8..+11+12					****	185	****	****	3941	****	****	2167	****	****	2198	****
14	Duct Btuh Loss					0%	0	****	0%	0	****	0%	0	****	0%	0	****
15	Total Btuh Loss = 13+14					****	185	****	****	3941	****	****	2167	****	****	2198	****
16	Int. Gains:	People @		300	1	****	300	4	****	1200	4	****	1200	1	****	300	
		Appl. @		1200	4	****	4800	0	****	0	0	****	0	0	****	0	
17	Subtot RSH Gain=7+8..+12+16					****	****	5299	****	****	6256	****	****	3864	****	****	1118
18	Duct Btuh Gain					0%	****	0	0%	****	0	0%	****	0	0%	****	0
19	Total RSH Gain=(17+18)*PLF					1.00	****	5299	1.00	****	6256	1.00	****	3864	1.00	****	1118
20	CFM Air Required					****	10	229	****	220	271	****	121	167	****	123	48

MANUAL J: 7th Ed. — Right-Suite 4.1.31 — S/N RSR25116																	
1	Name of Room				PARLOR			BED 1			BATH			BED 2			
2	Running Ft. Exposed Wall				24.0 Ft.			30.0 Ft.			13.0 Ft.			10.7 Ft.			
3	Room Dimensions, Ft.				11.0 x 13.0 ft			15.0 x 12.0 ft			15.0 x 9.0 ft			10.7 x 12.0 ft			
4	Ceilings, Ft		Condit. Option		10.0 heat/cool			8.0 heat/cool			8.0 heat/cool			8.0 heat/cool			
TYPE OF EXPOSURE		CST NO.	HTM Htg	HTM Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	Area Length	Btuh Htg	Btuh Clg	
5	Gross Exposed Walls and Partitions	a	12I	2.1	1.2	240	****	****	240	****	****	104	****	****	86	****	****
		b		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		c		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		d		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		e		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
		f		0.0	0.0	0	****	****	0	****	****	0	****	****	0	****	****
6	Windows and Glass Doors Heating	a	4C	19.1	**	30	573	****	1	19	****	4	76	****	30	573	****
		b	9G	20.4	**	0	0	****	0	0	****	0	0	****	0	0	****
		c		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		d		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		e		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
		f		0.0	**	0	0	****	0	0	****	0	0	****	0	0	****
7	Windows and Glass Doors Cooling	North		0.0	0	****	0	0	****	0	0	****	0	0	****	0	0
		NE/NW		0.0	0	****	0	0	****	0	0	****	0	0	****	0	0
		E/W		71.2	30	****	2136	1	****	71	0	****	0	0	****	0	0
		SE/SW		0.0	0	****	0	0	****	0	0	****	0	0	****	0	0
		South		37.2	0	****	0	0	****	0	4	****	149	30	****	1116	0
		Horz		0.0	0	****	0	0	****	0	0	****	0	0	****	0	0
8	Other doors	a	11C	18.3	10.2	0	0	0	0	0	0	0	0	0	0	0	0
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
9	Net Exposed Walls and Partitions	a	12I	2.1	1.2	210	450	249	239	513	284	100	215	119	56	119	66
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		d		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		e		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		f		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
10	Ceilings	a	16G	1.3	1.4	143	184	198	180	232	249	135	174	187	128	165	178
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
11	Floors	a	22A	31.6	0.0	24	758	0	30	948	0	13	411	0	11	338	0
		b		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
		c		0.0	0.0	0	0	0	0	0	0	0	0	0	0	0	0
12	Infiltration	a		29.7	7.8	30	891	235	1	30	8	4	119	31	30	891	235
13	Subtot Btuh Loss=6+8.+11+12					****	2857	****	****	1741	****	****	994	****	****	2086	****
14	Duct Btuh Loss					0%	0	****	0%	0	****	0%	0	****	0%	0	****
15	Total Btuh Loss = 13+14					****	2857	****	****	1741	****	****	994	****	****	2086	****
16	Int. Gains: People @			300	4	****	1200	1	****	300	1	****	300	1	****	300	0
	Appl. @			1200	0	****	0	0	****	0	0	****	0	0	****	0	0
17	Subtot RSH Gain=7+8.+12+16					****	****	4019	****	****	912	****	****	786	****	****	1895
18	Duct Btuh Gain					0%	****	0	0%	****	0	0%	****	0	0%	****	0
19	Total RSH Gain=(17+18)*PLF					1.00	****	4019	1.00	****	912	1.00	****	786	1.00	****	1895
20	CFM Air Required					****	160	174	****	97	39	****	56	34	****	117	82

MANUAL J: 7th Ed. — Right-Suite 4.1.31 — S/N RSR25116																	
1	Name of Room				HALL BATH				BED 3								
2	Running Ft. Exposed Wall				5.3 Ft.				40.0 Ft.			Ft.			Ft.		
3	Room Dimensions, Ft.				10.0 x 5.3 ft				12.0 x 13.0 ft								
4	Ceilings, Ft		Condit. Option		8.0 heat/cool				8.0 heat/cool								
TYPE OF EXPOSURE		CST NO.	Htg	Clg	Area Length	Htg	Clg	Area Length	Htg	Clg	Area Length	Htg	Clg	Area Length	Htg	Clg	
5	Gross Exposed Walls and Partitions	a	12I	2.1	1.2	42	****	****	320	****	****		****	****		****	****
		b		0.0	0.0	0	****	****	0	****	****		****	****		****	****
		c		0.0	0.0	0	****	****	0	****	****		****	****		****	****
		d		0.0	0.0	0	****	****	0	****	****		****	****		****	****
		e		0.0	0.0	0	****	****	0	****	****		****	****		****	****
		f		0.0	0.0	0	****	****	0	****	****		****	****		****	****
6	Windows and Glass Doors Heating	a	4C	19.1	**	4	76	****	30	573	****		****			****	
		b	9G	20.4	**	0	0	****	0	0	****		****			****	
		c		0.0	**	0	0	****	0	0	****		****			****	
		d		0.0	**	0	0	****	0	0	****		****			****	
		e		0.0	**	0	0	****	0	0	****		****			****	
		f		0.0	**	0	0	****	0	0	****		****			****	
7	Windows and Glass Doors Cooling	North		0.0	0	****	0	0	****	0		****			****		
		NE/NW		0.0	0	****	0	0	****	0		****			****		
		E/W		71.2	0	****	0	30	****	2136		****			****		
		SE/SW		0.0	0	****	0	0	****	0		****			****		
		South		37.2	4	****	149	0	****	0		****			****		
		Horz		0.0	0	****	0	0	****	0		****			****		
8	Other doors	a	11C	18.3	10.2	0	0	0	0	0	0						
		b		0.0	0.0	0	0	0	0	0	0						
9	Net Exposed Walls and Partitions	a	12I	2.1	1.2	38	82	46	290	622	345						
		b		0.0	0.0	0	0	0	0	0	0						
		c		0.0	0.0	0	0	0	0	0	0						
		d		0.0	0.0	0	0	0	0	0	0						
		e		0.0	0.0	0	0	0	0	0	0						
		f		0.0	0.0	0	0	0	0	0	0						
10	Ceilings	a	16G	1.3	1.4	53	68	73	156	201	216						
		b		0.0	0.0	0	0	0	0	0	0						
		c		0.0	0.0	0	0	0	0	0	0						
11	Floors	a	22A	31.6	0.0	5	167	0	40	1264	0						
		b		0.0	0.0	0	0	0	0	0	0						
		c		0.0	0.0	0	0	0	0	0	0						
12	Infiltration	a		29.7	7.8	4	119	31	30	891	235						
13	Subtot Btuh Loss=6+8..+11+12					****	513	****	****	3550	****	****	****	****		****	****
14	Duct Btuh Loss					0%	0	****	0%	0	****	%	****	****	%	****	****
15	Total Btuh Loss = 13+14					****	513	****	****	3550	****	****	****	****		****	****
16	Int. Gains: People @		300		1	****	300	1	****	300		****			****		
	Appl. @		1200		0	****	0	0	****	0		****			****		
17	Subtot RSH Gain=7+8..+12+16					****	****	599	****	****	3232	****	****		****	****	
18	Duct Btuh Gain					0%	****	0	0%	****	0	%	****		%	****	
19	Total RSH Gain=(17+18)*PLF					1.00	****	599	1.00	****	3232		****			****	
20	CFM Air Required					****	29	26	****	198	140	****			****		

Compliance with Method B Chapter 6 of the Florida Energy Efficiency Code may be demonstrated by the use of Form 600B for single and multifamily residences of 3 stories or less in height, and additions to existing residential buildings. To comply, a building must meet or exceed all of the energy efficiency prescriptives in any one of the prescriptive component packages and comply with the prescriptive measures listed in Table 6B-1 of this form. An alternative method is provided for additions of 600 square feet or less by use of Form 600C. If a building does not comply with this method, it may still comply under other sections in Chapter 6 of the Code.

PROJECT NAME: AND ADDRESS:	BLK BERRAN NASH RD. LOT 23	BUILDER:	CASAGNA
OWNER:	DANIAL CRAPPS	PERMITTING OFFICE:	
		PERMIT NO.:	22308
		CLIMATE ZONE:	1 ☐ 2 ☐ 3 ☐
		JURISDICTION NO.:	221000

GENERAL DIRECTIONS

1. New construction including additions which incorporates any of the following features cannot comply using this method: steel stud walls, single assembly roof/ceiling construction, or skylights or other non-vertical roof glass.
2. Choose one of the component packages "A" through "E" from Table 6B-1 by which you intend to comply with the Code. Circle the column of the package you have chosen.
3. Fill in all the applicable spaces of the "To Be Installed" column on Table 6B-1 with the information requested. All "To Be Installed" values must be equal to or more efficient than the required levels.
4. Complete page 1 based on the "To Be Installed" column information.
5. Read "Minimum Requirements for All Packages", Table 6B-2 and check each box to indicate your intent to comply with all applicable items.
6. Read, sign and date the "Prepared By" certification statement at the bottom of page 1. The owner or owner's agent must also sign and date the form.

Please Print

CK

1. Compliance package chosen (A-F)
2. New construction or addition
3. Single family detached or Multifamily attached
4. If Multifamily—No. of units covered by this submission
5. Is this a worst case? (yes / no)
6. Conditioned floor area (sq. ft.)
7. Predominant eave overhang (ft.)
8. Glass type and area :
 - a. Clear glass
 - b. Tint, film or solar screen
9. Percentage of glass to floor area
10. Floor type, area or perimeter, and insulation:
 - a. Slab on grade (R-value)
 - b. Wood, raised (R-value)
 - c. Wood, common (R-value)
 - d. Concrete, raised (R-value)
 - e. Concrete, common (R-value)
11. Wall type, area and insulation:
 - a. Exterior: 1. Masonry (Insulation R-value)
2. Wood frame (Insulation R-value)
 - b. Adjacent: 1. Masonry (Insulation R-value)
2. Wood frame (Insulation R-value)
12. Ceiling type, area and insulation:
 - a. Under attic (Insulation R-value)
 - b. Single assembly (Insulation R-value)
13. Air Distribution System: Duct insulation, location
Test report (attach if required)
14. Cooling system
(Types: central, room unit, package terminal A.C., gas, none)
15. Heating system:
(Types: heat pump, elec. strip, nat. gas, L.P. gas, gas h.p., room or PTAC, none)
16. Hot water system:
(Types: elec., nat. gas, L.P. gas, solar, heat rec., ded. heat pump, other, none)

1.	B	
2.	New	
3.	Single	
4.	1/1	
5.	NO	
6.		
7.		
	Single Pane	Double Pane
8a.	sq. ft.	360 sq. ft.
8b.	sq. ft.	sq. ft.
9.	15 %	
10a.	R=	310 lin. ft.
10b.	R=	sq. ft.
10c.	R=	sq. ft.
10d.	R=	sq. ft.
10e.	R=	sq. ft.
11a-1	R= 13	2480 sq. ft.
11a-2	R=	sq. ft.
11b-1	R=	sq. ft.
11b-2	R=	sq. ft.
12a.	R= 30	2455 sq. ft.
12b.	R=	sq. ft.
13.	R=	
14a.	Type: RHEEM	
14b.	SEER/EER: 10.5	
14c.	Capacity: 3 1/2	
15a.	Type: HEAT PUMP	
15b.	HSPF/COP/AFUE:	
15c.	Capacity: 50 GAL	
16a.	Type: RHEEM	
16b.	EF: 90	

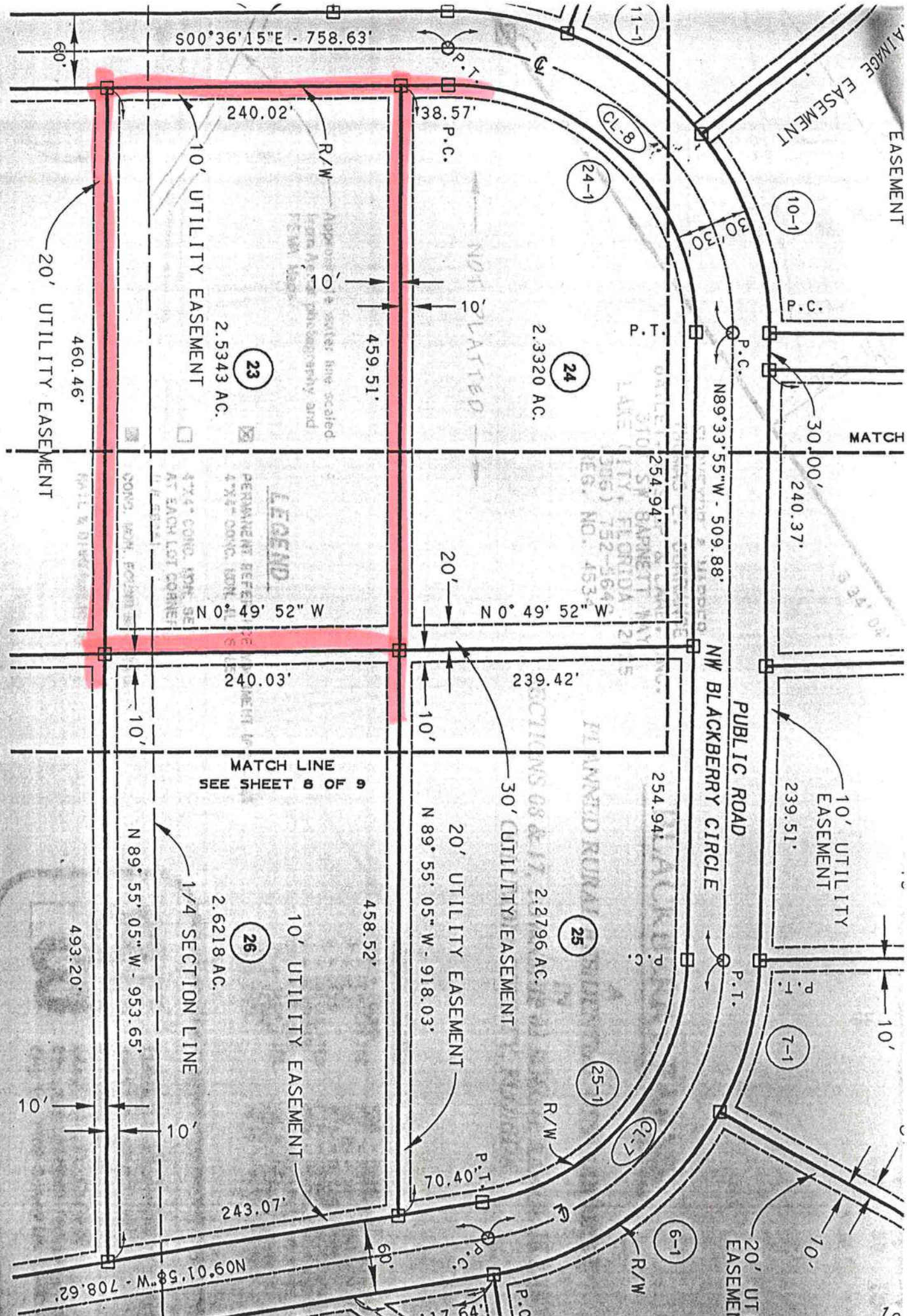
I hereby certify that the plans and specifications covered by the calculation are in compliance with the Florida Energy Code.

PREPARED BY: [Signature] DATE: Sept 15, 2004
I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.

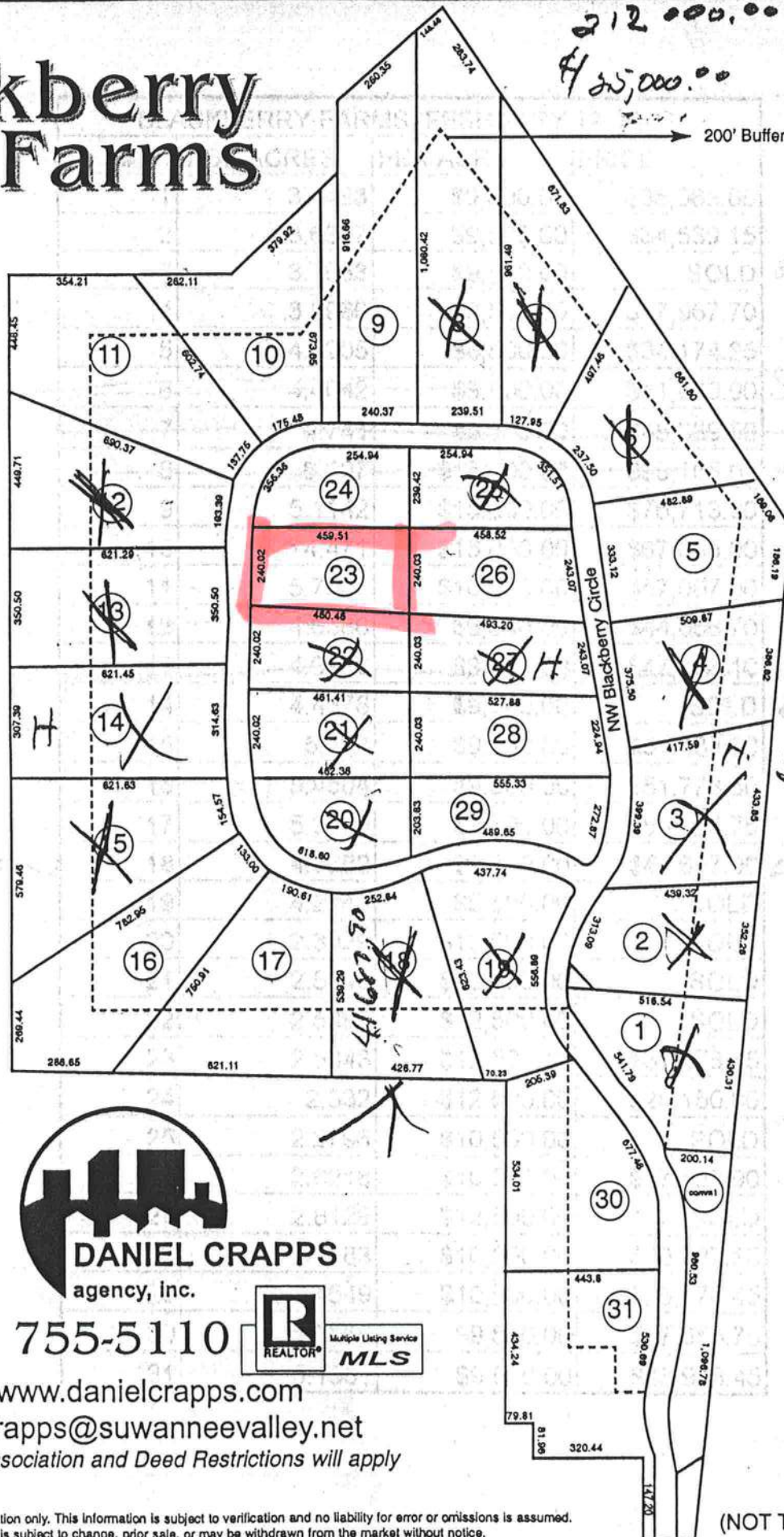
OWNER AGENT: _____ DATE: _____

Review of 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 in accordance with Section 553.908, F.S.

BUILDING OFFICIAL: _____
DATE: _____



Blackberry Farms



DANIEL CRAPPS
agency, inc.



Multiple Listing Service
MLS

Contact

@ (386) 755-5110

Web: www.danielcrapps.com

E-mail: dcrapps@suwanneevalley.net

Homeowner's Association and Deed Restrictions will apply

This sheet is for general information only. This information is subject to verification and no liability for error or omissions is assumed. Property or price is subject to change, prior sale, or may be withdrawn from the market without notice.

(NOT TO SCALE)

COLUMBIA COUNTY OFFICE OF OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

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

Parcel Number 17-3S-16-02168-123

Building permit No. 000022308

Use Classification SFD, UTILITY

Fire: 17.76

Permit Holder JERRY CASTAGNA

Waste: 36.75

Owner of Building DANIEL CRAPPS

Total: 54.51

Location: 932 NW BLACKBERRY CIRCLE(BLACKBERRY FARMS, LOT 23)

Date: 07/20/2006



A handwritten signature in black ink, appearing to be "J. L. J.", is written over a horizontal line.

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

Castagna Construction, Inc
521 NW Old Mill Rd
Lake City, FL 32055
*386-755-6867*phone
*386-755-6867*fax
Castagnaconstruc@bellsouth.net

September 14, 2005

RE: Blackberry Lot 23
923 NW Blackberry Circle
Permit #000022308

Building Dept:
ATTN: Randy

I am requesting an extension on building permit #000022308. I have been working on the house, but need more time. House is located at 932 NW Blackberry Circle Lot #23 Blackberry Subdivision on Nash Rd.

Thank you

Castagna Construction, Inc
Jerry Castagna



Notice of Treatment

11226

Applicator Florida Pest Control & Chemical Co.

Address 536 SE BAYA DR.

City Lake City

Phone (386) 752-1703

Site Location Subdivision Blackberry

Lot# 23 **Block#** **Permit#** 22308

Address

AREAS TREATED

Print Technician's

Area Treated

Date

Time

Gal.

Name

Main Body

11-02-04

4:15

534

R.D. Crawford

Patio/s #

Stoop/s #

Porch/s #

Brick Veneer

Extension Walls

A/C Pad

Walk/s #

Exterior of Foundation

Driveway Apron

Out Building

Tub Trap/s

(Other)

Name of Product Applied

Dursban TC

05 %

Remarks

Applicator - White • Permit File - Canary • Permit Holder - Pink

Notice of Treatment

Applicator: Florida Pest Control & Chemical Co. (www.flapest.com)

Address: _____

City _____ **Phone** 752- _____

Site Location: Subdivision _____

Lot # _____ **Block#** _____ **Permit #** 22308

Address _____

<u>Product used</u>	<u>Active Ingredient</u>	<u>% Concentration</u>
☐ Dursban TC	Chlorpyrifos	0.5%
☐ Termidor	Fipronil	0.06%
☐ Bora-Care	Disodium Octaborate Tetrahydrate	23.0%

Type treatment:

☐ Soil

☐ Wood

<u>Area Treated</u>	<u>Square feet</u>	<u>Linear feet</u>	<u>Gallons Applied</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

As per Florida Building Code 104.2.6 – If soil chemical barrier method for termite prevention is used, final exterior treatment shall be completed prior to final building approval.

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

_____ **Date**

_____ **Time**

_____ **Print Technician's Name**

Remarks: _____

Applicator - White

Permit File - Canary

Permit Holder - Pink

6/04

