



**Town of Fort White**  
**P.O. Box 129 Fort White, FL 32038**  
**386-497-2321 Fax: 386-4974946**

**APPLICATION FOR BUILDING PERMIT/COMPLIANCE**

**\$50.00 FEE**

**FILE No. \_\_\_\_\_ RECPT No. \_\_\_\_\_**

*PAID  
50.00  
CK # 11745*

**Applicant's Name** George Cote' **Phone:** 813-842-8522

**Address:** 7819 Professional Place Tampa, FL 33637

**Owner's Name:** Reality Income Properties 29 LLC **Phone:** 513-403-7437

**Address:** 500 Volvo Parkway Chesapeake, VA 23320

**Contractor's Name:** Peak Power Services, Inc.

**Address:** 7819 Professional Place Tampa, FL 33637

**\*\*\*\*\*Location of property:** Family Dollar 30021 7323 SW US Highway 27 Fort White, FL 32038

**\*\*\*\*\*Type of development:** Retail store

**Land use & zoning:** STORES/1 STORY (1100)

**Minimum set-back: Street-front/side** \_\_\_\_\_ **rear** \_\_\_\_\_ **side** \_\_\_\_\_

**Legal Description (acres)** PARCEL A FORT WHITE SQUARE. 691-406, WD 1233-434, WD 1261-44,

I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all the foregoing information is accurate and all work will be done in compliance with all laws regulating construction and zoning

CAC1822363

*George Cote'* **Contractor's**

**License Number Applicant/Owner Contractor**

*Corrie Schaper* **by Reviewing Clerk**

*8/14/2005* **Date Approved**

**\*\*\*\*\*IF PROPERTY IS NOT OWNED BY APPLICANT, A STATEMENT FROM THE OWNER AUTHORIZING USE OF PROPERTY FOR THE TYPE OF DEVELOPMENT STATED ON THIS APPLICATION WILL BE REQUIRED.**

File No.

Town of Fort White  
**Building Compliance Check List**

Name of Applicant George Cote

Address 7819 Professional Place Tampa, FL 33637

Phone 813-842-8522

Physical location of site and current zoning 7323 SW US Highway 27 Fort White

Type of Construction ☐ New ☒ remodel renovation fire damage

Describe Construction Replace the existing (2) 10-ton HVAC RTU's, like for like.

- ☐ Authorized owner or builder signs compliance application.
- ☐ Zoning is appropriate for type of construction
- ☐ Property will ☒ will not require application to SRWMD for water use runoff permit
- ☐ Property will require curb cut or access culvert over road right of way from:  
DOT Columbia County Town of Fort White
- ☐ Property will ☒ will not require Health Dept. Sanitary WasteWater Permit.
- ☐ Property will ☒ will not require potable fresh water supply from:  
private well Town of Fort White municipal water works.
- ☐ Property will require slab to be at least 1 foot above elevation (crown) of roadway.
- ☐ Property will ☒ will not require approval of solid waste removal facilities.
- ☐ Property will ☒ will not require permit for infill or land removal
- ☐ Applicant understands that a copy of the Town of Fort White Land Use Certification must be taken to Columbia County Building Department for application and issuance of building permit. Certification of land use or zoning by the Town of Fort White is NOT a building permit.

☐ Other steps required for Building Compliance: *Property Owner will be responsible for submitting a copy of the Columbia County Building Permit to the Town of Fort White.*

The applicant and Town of Fort White Clerk's Office have reviewed the foregoing information and the information is true and correct

  
Signature of Applicant

8/12/2025

Date

  
Signature of Reviewing Clerk

Compliance given to applicant on

Date

8/14/2025



PEAKPOW-01

MFOX

## CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
8/12/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER  
ASSOCIATES AGENCY, INC.  
125 W. Country Club Dr  
Tampa, FL 33612

CONTACT NAME: Mackenzie Fox

PHONE (A/C, No, Ext): (813) 988-1234

FAX (A/C, No): (813) 988-0989

E-MAIL ADDRESS: certs@associatesins.com

## INSURED

Peak Power Services, Inc.  
7819 Professional Place  
Tampa, FL 33637-6745

## INSURER(S) AFFORDING COVERAGE

## NAIC #

INSURER A: Auto Owners Insurance Co

18988

INSURER B: Southern Owners Insurance Co

10190

INSURER C: Zurich American Insurance Company of Illinois

27855

INSURER D: Navigators Specialty Insurance Company

36056

INSURER E:

INSURER F:

## COVERAGES

## CERTIFICATE NUMBER:

## REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual Liab. <input checked="" type="checkbox"/> XCU GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:			20719258	4/21/2025	4/21/2026	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			4661344000	4/21/2025	4/21/2026	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP \$ 10,000
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			4939405301	4/21/2025	4/21/2026	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N	N/A	WC 9264065-15	4/23/2025	4/23/2026	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Professional Liabli			SF24ECPU00709NC	7/10/2024	7/10/2026	Agg \$2,000,000/Occ 2,000,000
D	Pollution Policy			SF24ECPU00709NC	7/10/2024	7/10/2026	Occ 5,000,000 Agg 10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

## CERTIFICATE HOLDER

Town of Fort White  
PO Box 129  
Fort White, FL 32038

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Charles Salyer*

<b>Certified Contractor</b>	<b>Peak Power Services, Inc.</b>		
<b>Insurance Carrier</b>	Navigators Specialty Insurance Company		
<b>Policy #</b>	SF24ECPU00709NC	<b>Policy Period</b>	7/10/2024 - 7/10/2026

The potential risk of a pollution event is inherent in all construction work. Such an event can cause significant financial loss for project owners and other contractors at the site and can even impact the community and environment. Some contractors actively manage this risk, while others do not. Environmental Risk Professionals, LLC hereby certifies that the above referenced contractor has distributed protocols to avoid pollution incidents on job sites and has purchased a comprehensive pollution liability insurance policy to provide financial responsibility should an accident arise.

**Training** – The above referenced contractor has distributed “Pollution Prevention Practices” designed to mitigate common environmental risks associated with their contracting operations. Examples of these written protocols may include, but are not limited to, the following activities:

Chemical Storage	Fugitive Dust Control
Solid and Hazardous Waste Management	Stormwater Pollution Prevention
General Housekeeping	Personal Protective Equipment
Mold Identification and Abatement	Deterring Illicit Abandonment
Responding to Spills	Asbestos and Lead Based Paint

**Insurance**– Even when Pollution Prevention Practices are followed, accidents still happen. Property owners bear the ultimate responsibility for a pollution problem at their site, even if caused by a contractor working on their behalf. A contractor needs to purchase a true pollution liability policy in order to properly protect the entities for whom they perform operations. Environmental Risk Professionals, LLC has reviewed the above referenced pollution liability policy and hereby confirms that it provides the following important financial responsibility provisions:

1. A policy limit of at least \$1,000,000
2. Coverage is primary and non-contributory, with the certificate holders included as Additional Insureds and carrier rights to subrogation waived in their favor
3. On-site and off-site remediation expense for pollution conditions arising from contracting operations
4. No mold exclusion on policy
5. A pollution event includes damage to natural resources
6. Coverage for transportation and disposal of pollutants
7. No limitation to sudden and accidental pollution release only

Signed Environmental Risk Professionals, LLC

This certificate was issued on 5/5/2025 and serves as a matter of information only. The Certificate is only valid through the current policy period with an active policy. This certificate confers no rights upon the certificate holder and does not affirmatively or negatively amend, extend or alter the coverage afforded by the policy listed above. This certificate does not constitute a contract between the Issuing Insurer and the certificate holder.



**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

2601 BLAIR STONE ROAD  
TALLAHASSEE FL 32399-0783

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

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Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



**STATE OF FLORIDA DEPARTMENT  
OF BUSINESS AND PROFESSIONAL  
REGULATION**

CAC1822363  
CERTIFIED AIR COND CONTR  
COTE, GEORGE MARCEL  
PEAK POWER SERVICES, INC.

ISSUED: 07/22/2024

\_\_\_\_\_  
Signature  
LICENSED UNDER CHAPTER 489, FLORIDA STATUTES  
EXPIRATION DATE: AUGUST 31, 2026

Ron DeSantis, Governor

Melanie S. Griffin, Secretary

**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD**

**LICENSE NUMBER: CAC1822363**

**EXPIRATION DATE: AUGUST 31, 2026**

THE CLASS B AIR CONDITIONING CONTRACTOR HEREIN IS CERTIFIED UNDER THE  
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

COTE, GEORGE MARCEL  
PEAK POWER SERVICES, INC.  
7819 PROFESSIONAL PLACE  
TAMPA FL 33637



ISSUED: 07/22/2024

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Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.

Approved  
James Staving  
Ship to:  
Peak Power Services  
7819 Professional Place  
Tampa, FL. 33637  
M-F 8am to 4 pm



# HVAC Equipment Submittal Data

**For Review and Approval**

08/04/2025

**Project Info**

Project Name: **FD 30021 Fort White, FL**  
Software version: **3.0**

**Submitted By**

Dealer Name: **Denise Mejia**  
Email: **[denise.mejia@daikincomfort.com](mailto:denise.mejia@daikincomfort.com)**

**Certifications:**

Daikin brand heating and cooling units are certified as follows:

- AHRI Certified
- ETL & CETL Listed
- GAMA Certified

**Limited Warranty:**

- 5 year parts limited warranty
- 20 year heat exchanger limited warranty
- Complete warranty details attached

Daikin North America, LLC is not responsible for products installed outside the United States or its territories, or Canada.

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Model Number	Item	Description	Page
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**Design Requirements**

Cooling Capacity **120,000 BTU/h**  
 Configuration **Horizontal**

**Standard Features: DS Series Packaged Units**

- R-32 chlorine-free refrigerant
- High-efficiency Copeland scroll compressor(s)
- Copper tube / aluminum fin coils
- High-capacity, steel-cased filter dryer
- High- and Low-pressure switches
- Lugged electrical contactor
- Single-point power
- Color Coded Wiring
- Foil Faced Internal Insulation
- Heavy-gauge, galvanized-steel cabinet
- UV-resistant powder-paint finish
- Full perimeter base rail

**Unit Electrical Data**

Power Supply **208-230/3/60 VOLT/PH**  
 Total Unit MCA **50.9/55.1 A**  
 Total Unit MOP **60/60 A**  
 Indoor Motor HP **2.4 HP**  
 Total Unit FLA **46.60/46.60 A**  
 • Compressor RLA **34.6**  
 • Blower FLA **8.0**  
 • Outdoor Fan FLA **4.0**  
 • Heat Kit FLA **31.3/36.1**  
 SCCR **5 kA**

**Model Number: DSC1203D000001S**

**Code String: DSC1203DXXXCXADXXXXXX**

**Tag: RTU**

**Cooling Performance \*4**

Total Capacity **118,836 BTU/h**  
 Sensible Capacity **92,038 BTU/h**  
 Cooling Stages **Two**  
 Refrig Type **R-32**  
 Compressor Type **Copeland Scroll**  
 Pressure Switches **High & Low Pressure (std)**  
 Outdoor Design Temp **95.00°F**  
 Entering Air Temp(db) **80.00°F**  
 Entering Air Temp(wb) **67.00°F**  
 Leaving Air Temp(db) **59.00°F**  
 Leaving Air Temp(wb) **57.60°F**  
 Efficiency **15.2 IEER/11.4 EER**

**Heating Performance \*4**

Heat Type **Electric**  
 Elect Htr KW **15kW Elect Htr**  
 Entering Air Temp **55.00 °F**  
 Leaving Air Temp **66.90 °F**

**Supply Air Blower Performance**

ACFM **3989 cfm**  
 SCFM **3989 cfm**  
 Speed Tap **T5**  
 ESP **0.50 IWG**  
 Total ESP **0.50 IWG**  
 Blower Type **Direct Drive - Standard Static**  
 Elevation **0 ft**

**Physical Attributes**

Base Unit Oper. Weight (lbs) **1070**  
 Filter(s) **20"X25"X2" Qty: 2  
 25"X25"X2" Qty: 2**

**Outdoor sound (db) at 60 Hz**

Model	A-Weighted	63	125	250	500	1000	2000	4000	8000
120	82.7	N/A	67.4	72.2	76.5	78.4	78.1	70.3	60.1

db - decibel

**Notes:**

- 1 Outdoor sound data is measured in accordance with AHRI standard 270.
- 2 Measurements are expressed in terms of sound power. Do not compare these values to sound pressure values because sound pressure depends on specific environment factors which normally do not match individual applications. Sound power values are independent of the environment and therefore more accurate.
- 3 A-weighted sound ratings filter out high and very low frequencies, to better approximate the response of average human ear. A-weighted measurements for Daikin units are taken in accordance with AHRI standard 270.
- 4 All air temps are measured at the unit's inlet and outlet. Air temps are not measured at the coil.

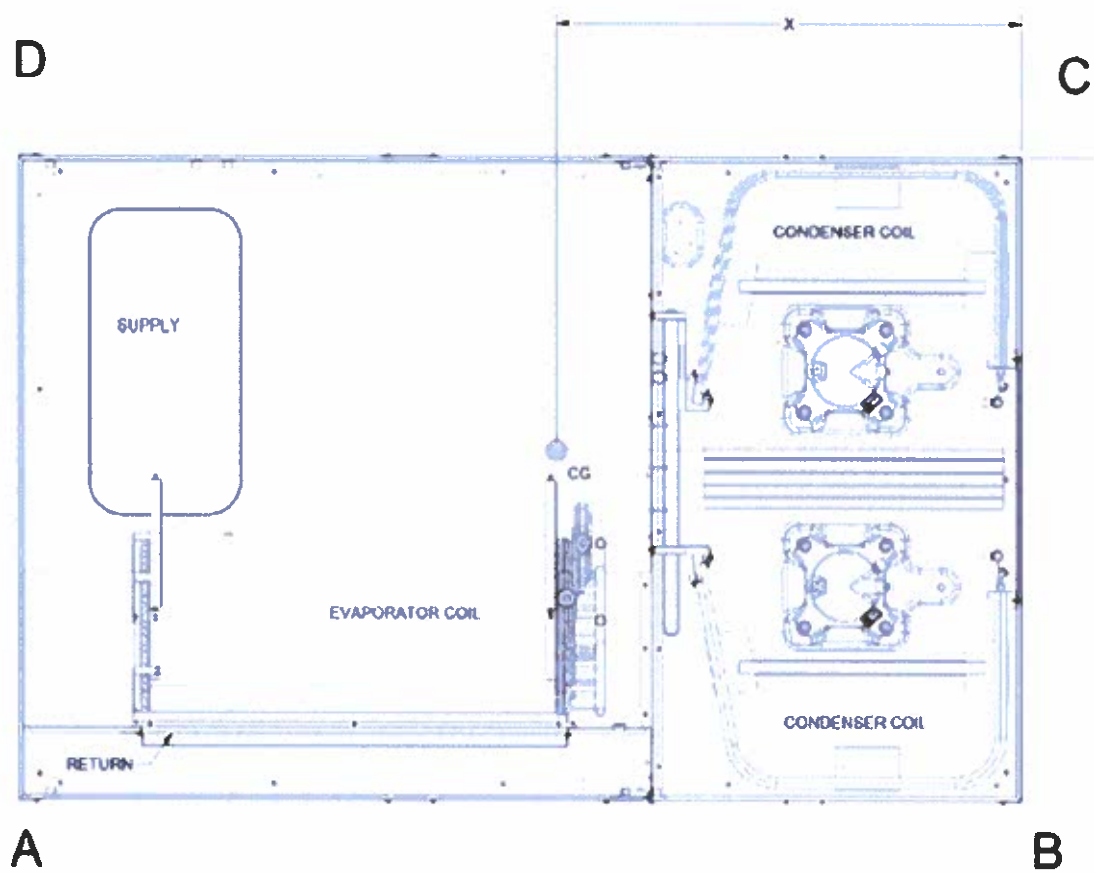


LIST OF ACCESSORIES

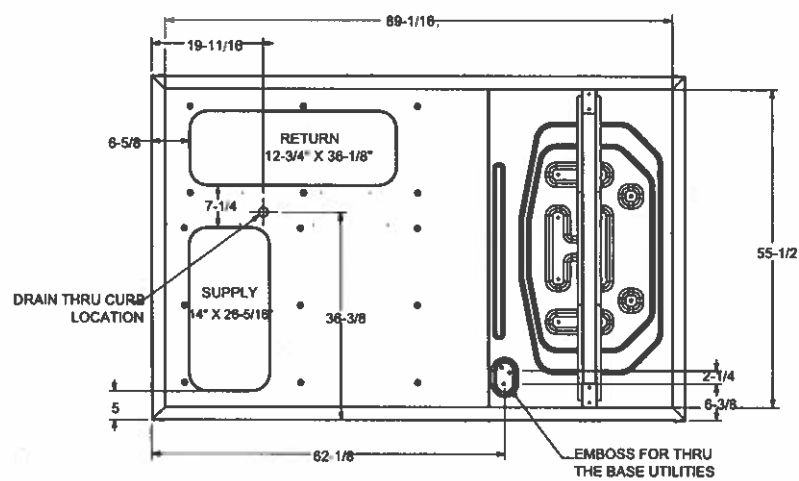
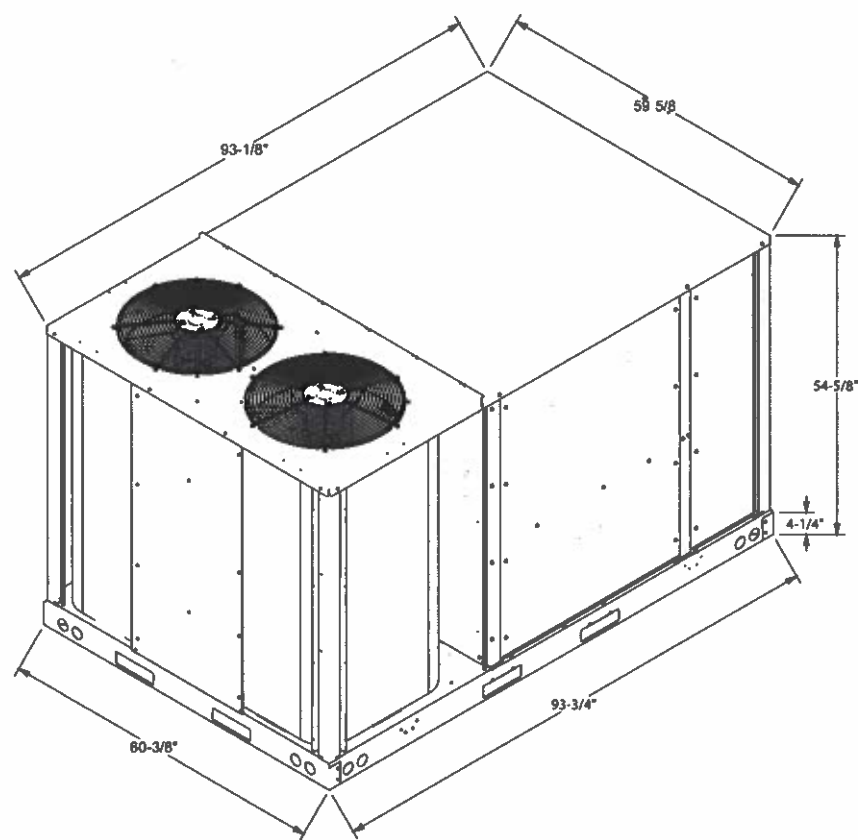
Model Number: DSC1203D000001S; Code String: DSC1203DXXXCXADXXXXXXX; Tag: RTU;

Accessories				
Fld Inst	Fct Inst	Item #	Description	lbs
Y		HAILGD90150BE	Condenser Hail Guard	N/A
Y		EHXD-3M15	15kW Elect Htr	
			Base Unit Oper. Weight	1070
			Total Weight	1070

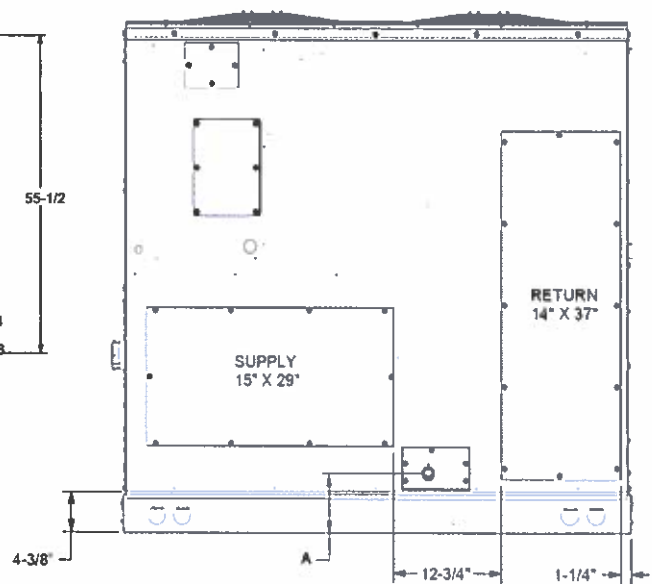
CORNER WEIGHTS DIMENSIONS



Model	Shipping Weight (lbs)	Operating Weight (lbs)	Corner Weights (lbs)				Length	Width
			A	B	C	D	X (In)	Y (In)
DSC1203D	1142	1070	229	280	235	328	30.60	42.70



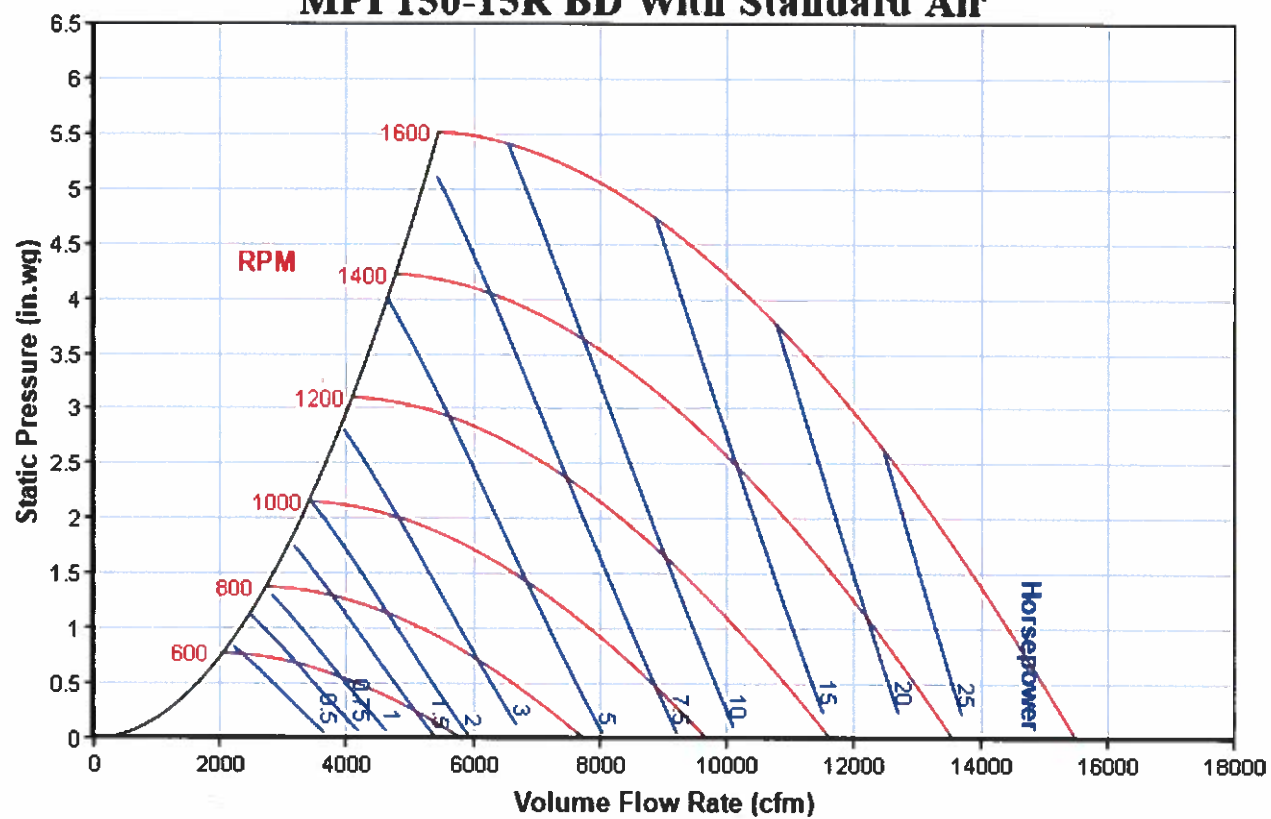
UNIT	DIM "A"
DSC 090	9"
DSC 102	9"
DSC 120	6 1/2"
DSC 150	6 1/2"





## Centrifugal Blowers

### MPI 150-15R BD With Standard Air



# Certificate of Product Ratings

AHRI Certified Reference Number : 215440983      Date : 08-13-2025      Model Status : Active

Brand Name : DAIKIN

Model Number : DSC1203\*\*\*\*\*A\*

Series Name : DSC120

AHRI Type : SP-A

Refrigerant Type : R-32

Hertz : 60

Sold In? : USA, Canada

Rated as follows in accordance with the following test procedures and subject to verification of rating accuracy by AHRI-sponsored, independent, third-party testing:

- AHRI Standard 340/360-2022, Performance Rating of Commercial and Industrial Unitary Air-Conditioning and Heat Pump Equipment
- AHRI Standard 365-2009, Commercial and Industrial Unitary Air-Conditioning Condensing Units

Cooling Capacity 95F/Cooling Capacity 95F at 230v : 116000/116000

EER 95F/EER 95F at 230v : 11.40/11.40

IEER/IEER at 230v : 15.2/15.2

The following data is for reference only and is not certified by AHRI

Full Load Indoor Coil Air Quantity (scfm) : 3380

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www.ahridirectory.org

†"Active" Model Status are those that an AHRI Certification Program Participant is currently producing AND selling or offering for sale; OR new models that are being marketed but are not yet being produced. "Production Stopped" Model Status are those that an AHRI Certification Program Participant is no longer producing BUT is still selling or offering for sale.

Ratings that are accompanied by WAS indicate an involuntary re-rate. The new published rating is shown along with the previous (i.e. WAS) rating.

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**CERTIFICATE NO.:**

133995650909528487