

Columbia County Swimming Pool/Spa Permit Application

For Office Use Only Application # 44517 Date Received 2/12 By JW Permit # 55206
39466
 Zoning Official LW/H Date 2-18-20 Flood Zone A Land Use Ag Zoning A-3
 FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner J.C. Date 2-20-20

Comments

- ☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☒ 911 Sheet (If NO Address Exists) ☐ Owner Builder Disclosure Statement
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
☐ Land Owner Affidavit ☐ Ellisville Water ☒ App Fee Paid ☒ Sub VF Form

Notes:

☒ HELME
 LIAB 2.21.20

Septic Permit No. 20-0113 Or City Water System Fax _____

Applicant (Who will sign/pickup the permit) RICK JOHNSON Phone 352-332-7665

Address 3601 NW 97th BLVD GAINESVILLE FL 32606

Owners Name RAYMOND WILLIAMS Phone 386-365-8245

911 Address 851 Union Park Rd. Wellborn FL 32094

Contractors Name Michael Canto Phone 352-332-7665

Address 3601 NW 97th BLVD GAINESVILLE FL 32606

Contractor Email MIKE@FUNSTATEPOOLCINC.COM***Include to get updates on this job.

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address JAMES P.E

Architect/Engineer Name & Address Kimes - 3990 SR 64-E Bradenton FL 34204

Mortgage Lenders Name & Address _____

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

Property ID Number 11-3S-15-00157-006 Cost of Construction \$50,000.00

Subdivision Name - Lot - Block - Unit - Phase -

Driving Directions N on main, W on NW Bascom Norris

NW on Lake Jeffery, S on Union Park

Residential ☒ OR Commercial _____

Construction of INGROUND POOL ADA Compliant _____ Total Acreage 26

Actual Distance of Pool from Property Lines - Front 670 Side 285 Side 400 Rear 160

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 2014 and the 2011 National Electrical Code.

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 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.

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.

Ray Williams
Print Owners Name

Ray Williams
Owners Signature

****Property owners must sign here before any permit will be issued.**

****If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.**

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.

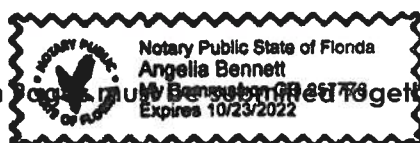
Nahat Sat
Contractor's Signature

Contractor's License Number CPC1457386
Columbia County
Competency Card Number 961

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 10th day of February 2020

Personally known ✓ or Produced Identification ✓

Angelia Bennett SEAL:
State of Florida Notary Signature (For the Contractor)





COLUMBIA COUNTY BUILDING DEPARTMENT

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

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

www.columbiacountyfla.com/BuildingandZoning.asp

NOTICE TO SWIMMING POOL OWNERS

I Ray Williams have been informed and I understand that prior to the final inspection approval and use of my pool, I will need all the inspections approved and the required fencing installed in accordance with applicable regulations. The Florida Building Code requires private residential swimming pools, hot tubs, or non-portable spas containing water over 24 inches deep to meet the following pool barrier safety feature requirements:

- The pool access must be isolated by a barrier at least 4 feet high and installed around the perimeter of the pool.
Unless the pool is equipped with a safety cover complying with the specifications of American Society for Testing and Materials standard F-1346-91.
- The barrier shall not have any gaps or openings which would allow a child to crawl under, squeeze through or climb over and must be placed no less than 20 inches from the water's edge.
- Gates located in the pool barrier must open outward away from the pool and be both self-closing and self latching, with a release mechanism not less than 54" above the standing surface at the gate.
- The barrier must be separate from any other fence, wall, or other enclosure surrounding the yard unless the fence, wall or other enclosure or portion thereof is situated on the perimeter of the pool and meets the pool barrier requirements.
- Where a wall of a dwelling serves as part of the barrier **one** of the following shall apply:
 - 1) All doors and first floor windows with a sill height of less than 48 inches providing direct access from the home to the pool must be equipped with an alarm that has a minimum sound pressure rating of 85 decibels at 10 feet. The alarm shall sound immediately upon opening the window or door unless the temporary bypass mechanism is activated.
 - 2) **Or;** all doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism located at least 54 inches above the floor.

According to Florida statutes chapter 515: Residential Swimming Pool Safety Act, failure to comply with these requirements is a misdemeanor of the second degree, punishable by imprisonment for up to 60 days or a fine of up to \$500, except that no penalty shall be imposed if within 45 days after arrest or issuance of a summons or notice to appear, the pool is equipped with the aforementioned safety features and the responsible person attends a drowning prevention education program developed by the Florida Department of Health. I also understand that there are several inspections required in addition to a final inspection for my swimming pool.

Ray Williams 10/22/19
Owner Signature / Date

Address: 851 Union Park Rd. Wellborn FL

Michael Smith 10/22/19
Contractor Signature / Date

CPC 1457306
License Number

Columbia County Property Appraiser

Jeff Hampton

2019 Preliminary Certified Values

updated: 8/14/2019

Parcel: << 11-3S-15-00157-006 >>

Aerial Viewer Pictometry Google Maps

Owner & Property Info

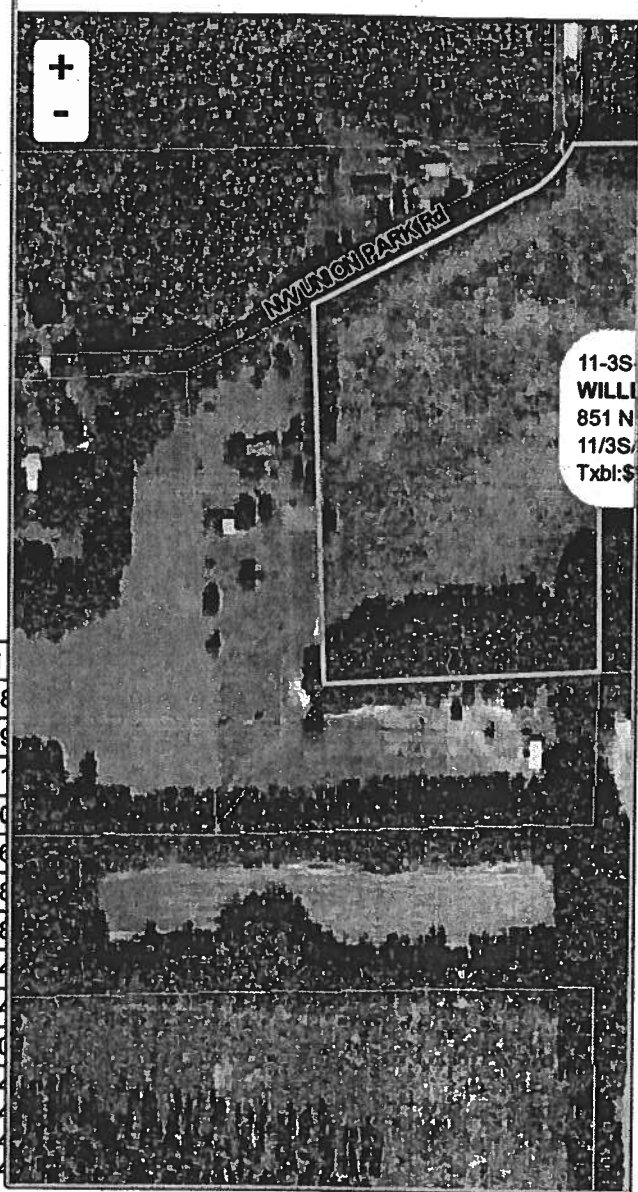
Owner	WILLIAMS RAYMOND MARVIN & LINDA K WILLIAMS P O BOX 52 WELLBORN, FL 32094		
Site	851 UNION PARK RD, WELLBORN		
Description*	COMM NE COR, RUN S 2200.93 FT, W 1331.14 FT FOR POB, RUN S 1100.40 FT, W 1904.19 FT, N 791.19 FT, TO S'LY R/W OF CO RD. NE ALONG R/W 659.27 FT, E 1331.14 FT TO POB EX 20.21 AC DESC ORB 1174-161. ORB 795-1707, 804-2130, WD 1026-2532,		
Area	25.89 AC	S/T/R	11-3S-15
Use Code**	IMPROVED A (005000)	Tax District	3

*The Description above is not to be used as the Legal Description for this parcel in any legal transaction.

**The Use Code is a FL Dept. of Revenue (DOR) code and is not maintained by the Property Appraiser's office. Please contact your city or county Planning & Zoning office for specific zoning information.

Property & Assessment Values

2018 Certified Values		2019 Preliminary Certified	
Mkt Land (2)	\$11,768	Mkt Land (2)	\$13,018
Ag Land (3)	\$5,709	Ag Land (3)	\$5,749
Building (1)	\$241,826	Building (1)	\$261,311
XFOB (2)	\$12,020	XFOB (2)	\$12,020
Just	\$391,111	Just	\$411,846
Class	\$271,323	Class	\$292,098
Appraised	\$271,323	Appraised	\$292,098
SOH Cap [?]	\$2,155	SOH Cap [?]	\$23,614
Assessed	\$263,760	Assessed	\$268,484
Exempt	HX H3 \$50,000	Exempt	HX H3 \$50,000
Total Taxable	county:\$213,760 city:\$213,760 other:\$213,760 school:\$238,760	Total Taxable	county:\$218,484 city:\$218,484 other:\$218,484 school:\$243,484

☒ 2019 ☐ 2016 ☐ 2013 ☐ 2010 ☐ 2007 ☐ 2005 ☒ Sales
**▼ Sales History**

Sale Date	Sale Price	Book/Page	Deed	V/I	Quality (Codes)	RCode
9/24/2004	\$100	1026/2532	WD	V	U	06
5/1/1995	\$0	804/2130	WD	V	U	03
9/14/1994	\$0	795/1707	WD	V	U	02 (Multi-Parcel Sale) - show

▼ Building Characteristics

Bldg Sketch	Bldg Item	Bldg Desc*	Year Blt	Base SF	Actual SF	Bldg Value
Sketch	2	SINGLE FAM (000100)	2008	3538	4148	\$261,311

*Bldg Desc determinations are used by the Property Appraisers office solely for the purpose of determining a property's Just Value for ad valorem tax purposes and should not be used for any other purpose.

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # 44157 JOB NAME Williams

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

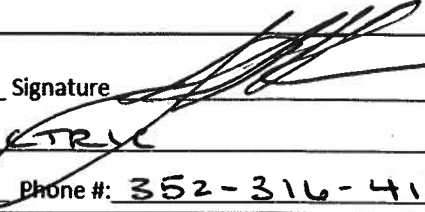
Columbia County issues combination permits. One permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the general contractors permit.

NOTE: It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

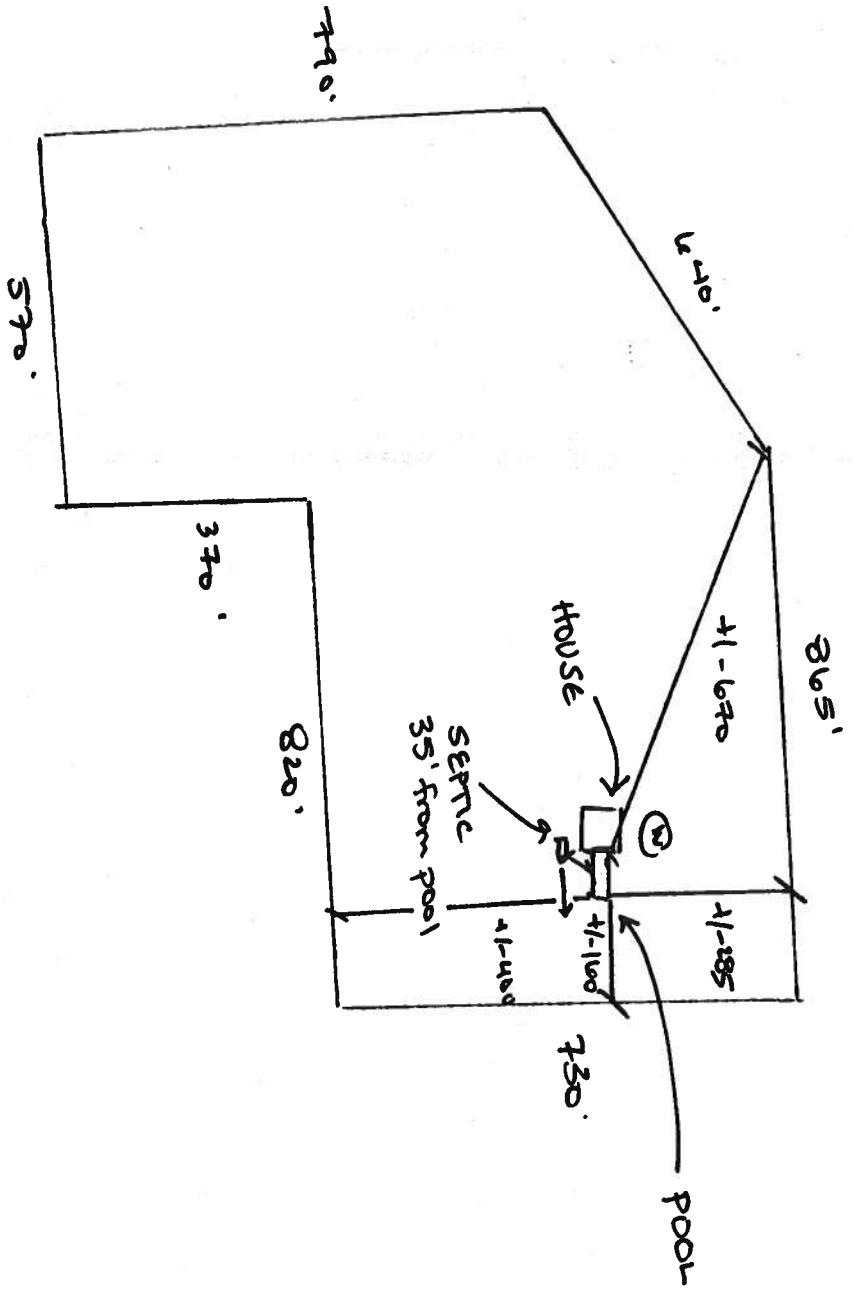
Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

NOTE: If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

ELECTRICAL <input checked="" type="checkbox"/> CC# <u>1500</u>	Print Name <u>RICK HELME</u> Signature  Company Name: <u>HELME ELECTRIC</u> License #: <u>EC13005536</u> Phone #: <u>352-316-4185</u>	Need <input type="checkbox"/> Lic <input checked="" type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
MECHANICAL/ A/C <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
PLUMBING/ GAS <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
ROOFING <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SHEET METAL <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
FIRE SYSTEM/ SPRINKLER <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SOLAR <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
STATE SPECIALTY <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE

RAY & LINDA WILLIAMS
11-35-15-00157-000



SCALE 1:30

NOTICE OF COMMENCEMENT

Inst: 202012003454 Date: 02/12/2020 Time: 11:59AM
Page 1 of 1 B: 1405 P: 1130, P.DeWitt Cason, Clerk of Court
Columbia, County, By: BD
Deputy Clerk

This Instrument Prepared By:

Name: Fun State Pools, Inc.

Address: 3601 NW 97 Blvd Gville FL 32606

Permit No: _____

Tax Folio No: 11-33-15-00157-006

STATE OF: Florida

COUNTY: COLUMBIA

THE UNDERSIGNED HEREBY gives notice that improvement(s) 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.

1. DESCRIPTION OF PROPERTY: Street Address: BS1 UNION PARK RD WELBORN FL
Legal Description: _____

2. GENERAL DESCRIPTION OF IMPROVEMENT(S): INGROUND CONCRETE POOL

3. OWNER INFORMATION: a.) Name: RAYMOND WILLIAMS Address: BS1 Union Park Rd. Welborn, FL
b.) Interest in Property: Fee Simple
c.) Fee Simple Titleholder (if other than owner) Name: _____ Address: _____

4. CONTRACTOR: a.) Name: Fun State Pools, Inc Address: 3601 NW 97 Blvd Gville 32606 b.) Phone: 352-332-7665

5. SURETY: a.) Name: N/A Address: N/A
b.) Amount of bond \$: N/A c.) Phone: N/A

6. LENDER: a.) Name: N/A Address: N/A b.) Phone: N/A

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a) 7., Florida Statutes:

a.) Name: N/A Address: N/A b.) Phone: N/A

8. In addition to himself, Owner designates the following person(s) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

a.) Name: N/A Address: N/A b.) Phone: N/A

9. Expiration date of notice of commencement (the expiration date is one (1) year from the date of recording unless a different date is specified.) N/A

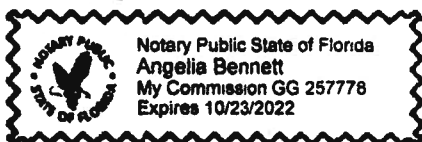
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Ray Williams
Signature of Owner or Owner's Authorized Officer/Director
Partner/Manager

Signatory's Title/Office _____

The foregoing instrument was acknowledged before me this 22nd day of October, (year) 2019
by Raymond Williams (name of person) as _____ (type of authority, e.g. officer,
trustee, attorney in fact) for _____ (name of party on behalf of whom instrument was executed).

FL W452-733 57-103-0



Angela Bennett
Signature of Notary Public - State of Florida
Print, Type, or Stamp Commissioned Name of Notary Public
Commission Number: _____
Personally Known _____ or Produced Identification _____

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.

Ray Williams
Signature of Natural Person Signing Above

App#44517



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

PERMIT NO: 20-0113
DATE PAID: 2113120
FEE PAID: 200.00
RECEIPT #: 1462478

APPLICATION FOR:

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

APPLICANT: RAY WILLIAMSAGENT: RICK JOHNSONTELEPHONE: 352 322 7465MAILING ADDRESS: 851 UNION PARK RD WELDON FL

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

LOT: _____ BLOCK: _____ SUBDIVISION: _____ PLATTED: _____

PROPERTY ID #: 11-38-15-00157-006 ZONING: SFR I/M OR EQUIVALENT: ☐ Y ☐ NPROPERTY SIZE: 26 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <=2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: _____ FTPROPERTY ADDRESS: 851 Union Park Rd. Weldon FL

DIRECTIONS TO PROPERTY: West on Lake Jeffery Rd, S on Union Park, at curve take metal gate into field and follow road to house

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	<u>POOL</u>	<u>1</u>	<u>1800</u>	
2				
3				
4				

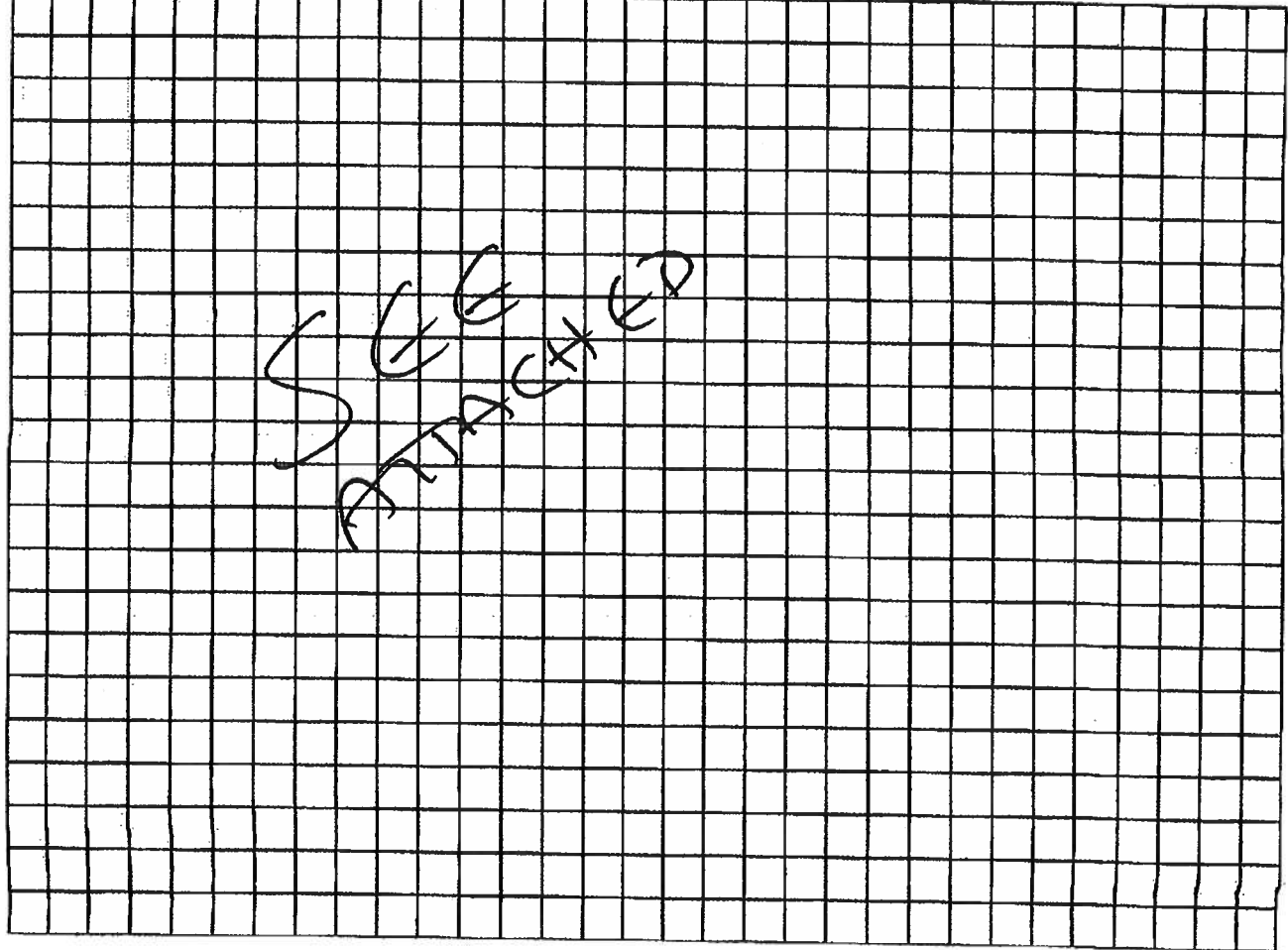
☐ Floor/Equipment Drains ☐ Other (Specify) _____SIGNATURE: [Signature] DATE: 10/22/19

STATE OF FLORIDA
DEPARTMENT OF HEALTH
APPLICATION FOR CONSTRUCTION PERMIT

Permit Application Number 20-0113

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

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



Notes: _____

Site Plan submitted by: Rick Johnson

Plan Approved [Signature]

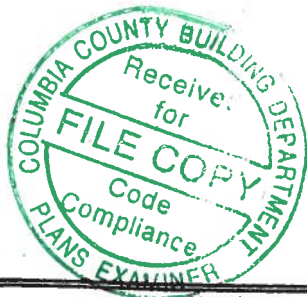
Not Approved _____

Date 2/17/20

By [Signature]

[Signature] County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



FUNSTATE POOLS INC
CONTRACTOR

Worksheet showing data for compliance with ANSI/APSP-15

Owner: RAY WILLIAMS

Address: 851 Union Park Rd Lot: _____

ANSI 15 Filtration Flow

Area: _____

Volume of Pool Area 512 x Avg Depth 4.75 = Vol in CF

Vol in CF x 7.48 gal/CF = 18191 GALLONS

2432

Calculate Maximum Filtration Flow Rate: Pool Volume/ 360 =

50.5 GPM (if <13,000 MAY use 36 gpm)

ANSI 15 Auxiliary Flow

Calculate Maximum Auxiliary Load Design Flow Rate:

MAY USE LESS THAN THIS MAXIMUM
IF AT LEAST ANSI 5 12 HR TURNOVER

Number Spa Jets X 7 to 15 GPM = _____

GPM

Or Water Feature Flow: _____

GPM

ANSI 15 Flow

ACTUAL TURNOVER AT ANSI 15 FLOW= _____ HR

IF LESS THAN 12 HR MEETS ANSI 5

ANSI 15 Flow: _____

GPM [maximum ANSI 15 Filtration Flow, minimum 12 hour turnover]

PUMP FROM APSP LISTING

Select a pump with Curve A (pools <17,000 gal) or Curve C (pools >17,000 gal) flow equal to or less than **ANSI 15 Filtration Flow**. May select a multi speed pump with flows acceptable for the **ANSI 15 Auxiliary Flow**, with acceptable Curve A or C listed flows. Curve A or C flows listed have no relationship or requirement related to **ANSI 15 Auxiliary Flow**.

Pump Make & Model: _____

Pentair VS+SARS

Pump Flow Rate(s) from Listing: @ Low/Single speed

11 GPM, & @ High Speed

73 GPM

Pump Control: Filtration Pump has no auxiliary load:

N/A, time clock to be installed.

Filtration Pump with auxiliary load: Control for low speed default w/in 24 hrs: Pentair VS+SARS self contained program
Make/model

Size filter on "FILTRATION Flow"

Filter Rates: Cartridge= 0.375 gpm/sf; Sand= 15 gpm/sf; DE= 2 gpm/sf

Filter size: ANSI 15 Flow 50.5 GPM / 0.375 gpm/sf = 135 SF Min Filter Size

[see pool plan for filter model or show here: Sta-r-ih PLM]

ANSI 7 Flow see Site Specific Information Sheet

ANSI 5 Flow: Depending on the pipe, use any of the ANSI 15 Filtration, or ANSI 15 flows or the flow at 60 ft TDH on the selected pump curve for the **ANSI 5 Flow**.

See flow vs velocity vs pipe size on Standard Engineering.

See summary of pipe sizes on ANSI 7 Site Specific Information Sheet

HEATER MODEL: _____

GAS HEATER EFFICIENCY RATING: _____

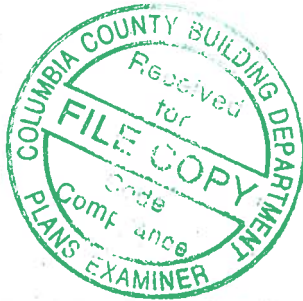
with no pilot light [min 78%]

HEAT PUMP EFFICIENCY C.O.P.: _____

[min 4.0]

CONTRACTOR SIGNATURE: _____

DATE: 1/30/20



FUNGATE POOLS INC
CONTRACTOR

Owner: RAY WILLIAMS

Address: 851 Union Park Rd

SITE SPECIFIC INFORMATION FOR COMPLIANCE WITH ANSI/APSP-7
METHOD OF DETERMINING ANSI 7 PUMP FLOW

Max Flow from Pump Curve ☐

Pump Curve Attached ☐

Simplified TDH

Curve & Calc ☒

Detailed TDH

Curve & Calc ☐

SUCTION OUTLET FOR: **FILTRATION PUMP**

Manufacturer & Model

Pentair VS+SVRS

Pump Flow from Pump Curve with method indicated:

Maximum Pump Flow for sizing Branch Pipe & Suction based on number of Suction Outlets used:

GPM

Minimum Branch Pipe Size given flow at 6 FPS:

GPM

INCH

LISTED SUCTION OUTLET COVER/GRATE- POOL OUTLET

Number of Suction Outlets: 1

Manufacturer & Model:

CMP 25506-320-00

APPROVED Maximum Outlet Flow (GPM)

Floor flow:

Wall flow:

TRUNK/SUCTION PIPE SIZING- ANSI 7 FLOW

Minimum Trunk Pipe Size given flow @ 8 FPS

Inch Pipe

SUCTION OUTLET FOR: **SPA**

Manufacturer & Model

Pump Flow from Pump Curve with method indicated:

Maximum Pump Flow for sizing Branch Pipe & Suction based on number of Suction Outlets used:

GPM

Minimum Branch Pipe Size given flow at 6 FPS:

GPM

INCH

LISTED SUCTION OUTLET COVER/GRATE- SPA OUTLETS

Number of Suction Outlets: 1

Manufacturer & Model:

APPROVED Maximum Outlet Flow (GPM)

Floor flow:

Wall flow:

GPM

TRUNK/SUCTION PIPE SIZING- ANSI 7 FLOW

Minimum Trunk Pipe Size given flow @ 8 FPS

Inch Pipe

ANSI 15 FLOW=

GPM

OTHER PIPE SIZE SUMMARY

PIPE SIZE "INCH"

FULL FLOW

SPLIT FLOW

SKIMMER SUCTION- ANSI 15 FLOW @ 6 FPS:

73.19

2"

FILTRATION RETURN SIDE- ANSI 15 FLOW @ 8 FPS:

73.19

2"

GPM SPA

AUXILIARY RETURN SIDE- ANSI 5 FLOW @ 10 FPS:

MIN 1.5"

GPM

2" AUXILIARY RETURN SIDE- ANSI 5 FLOW @ 10 FPS:

MIN 1.5"

OPTIONAL VACUUM OR SWEEP LINE- ANSI 5 FLOW @ 8 FPS:

TYP 1-1/2

NOTES:

CONTRACTOR SIGNATURE: [Signature]

DATE: 1/30/20



COLUMBIA COUNTY BUILDING DEPARTMENT

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

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

www.columbiacountyfla.com/BuildingandZoning.asp

NOTICE TO SWIMMING POOL OWNERS

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- The pool access must be isolated by a barrier at least 4 feet high and installed around the perimeter of the pool.
Unless the pool is equipped with a safety cover complying with the specifications of American Society for Testing and Materials standard F-1346-91.
- The barrier shall not have any gaps or openings which would allow a child to crawl under, squeeze through or climb over and must be placed no less than 20 inches from the water's edge.
- Gates located in the pool barrier must open outward away from the pool and be both self-closing and self latching, with a release mechanism not less than 54" above the standing surface at the gate.
- The barrier must be separate from any other fence, wall, or other enclosure surrounding the yard unless the fence, wall or other enclosure or portion thereof is situated on the perimeter of the pool and meets the pool barrier requirements.
- Where a wall of a dwelling serves as part of the barrier **one** of the following shall apply:
 - 1) All doors and first floor windows with a sill height of less than 48 inches providing direct access from the home to the pool must be equipped with an alarm that has a minimum sound pressure rating of 85 decibels at 10 feet. The alarm shall sound immediately upon opening the window or door unless the temporary bypass mechanism is activated.
 - 2) **Or;** all doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism located at least 54 inches above the floor.

According to Florida statutes chapter 515: Residential Swimming Pool Safety Act, failure to comply with these requirements is a misdemeanor of the second degree, punishable by imprisonment for up to 60 days or a fine of up to \$500, except that no penalty shall be imposed if within 45 days after arrest or issuance of a summons or notice to appear, the pool is equipped with the aforementioned safety features and the responsible person attends a drowning prevention education program developed by the Florida Department of Health. I also understand that there are several inspections required in addition to a final inspection for my swimming pool.

Ray Williams
Owner Signature / Date

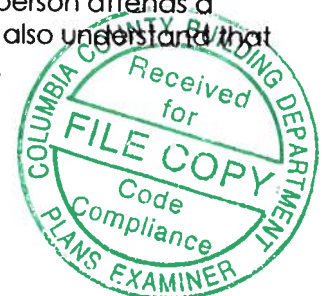
10/22/19

Address: 851 Union Park Rd. Wellborn FL

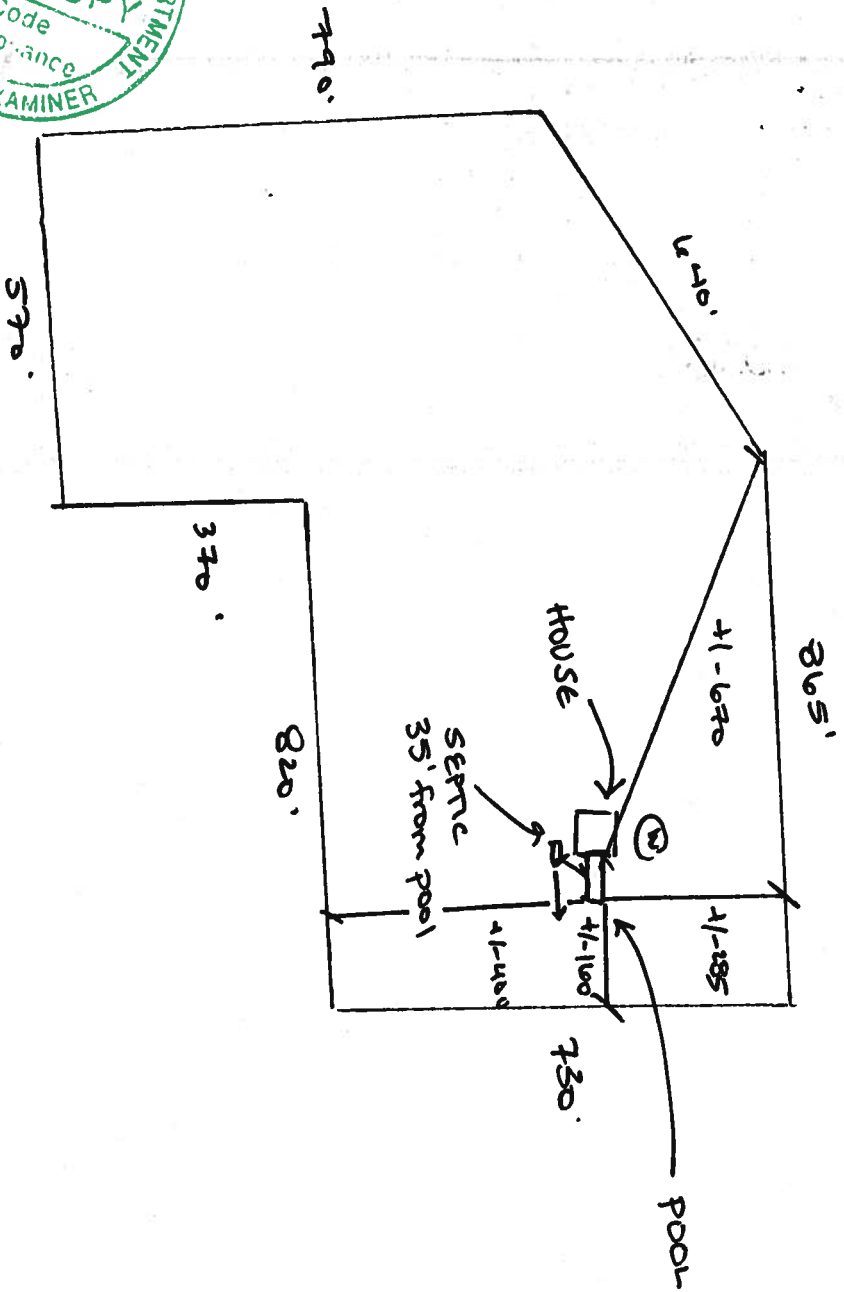
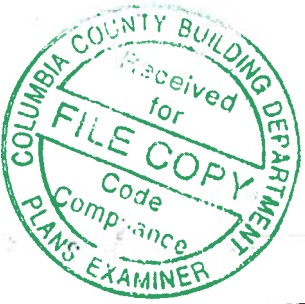
Michael J. [Signature]
Contractor Signature / Date

10/22/19

CPC1457386
License Number



RAY & LINDA WILLIAMS
 11-35-15-00157-000



Scale 1:30

ANSI/APSP-7 2006 Specifies three methods for determining the maximum system flow rate. The following simplified TDH calculation is one of the methods specified.

Simplified Total Dynamic Head (TDH) Calculation Worksheet

Determine Maximum System Flow Rate:

Minimum Flow Rate Required: 35 gpm Per Skimmer (Required: 1 skimmer per 800 sf of surf. area)

- Calculate Pool Volume: $\frac{512}{(Surf. Area)} \times \frac{4.75}{(Avg. Depth)} \times 7.48 \text{ (gal./cubic foot)} = \frac{18191}{(Vol. in gal.)}$
- Determine preferred Turnover Time in hours: $\frac{8}{(Hours)} \times 60 \text{ (min. / hr.)} = \frac{480}{(Turnover in Min.)}$
- Determine Max Flow Rate: $\frac{18191}{(Turnover Mins.)} = \frac{38}{(Flow Rate)} + \frac{38}{(System Flow Rate)}$
- Spa Jets: $\frac{(No. of Jets)}{(Jet Flow)} \times \text{gpm per jet} = \text{flow rate.}$
(For single pump pool/spa combo, use the higher of No. 3 or No. 4 in the following calculations for the pool & spa)

Determine Pipe Sizes:

Branch Piping to be 2" inch to keep velocity @ 6 fps max. at 82 gpm Maximum System Flow Rate.
Trunk Piping to be 2" inch to keep velocity @ 8 fps max. at 82 gpm Maximum System Flow Rate.
Return Piping to be 2" inch to keep velocity @ 10 fps max. at 103 gpm Maximum System Flow Rate.

Determine Simplified TDH:

- Distance from pool to pump in feet: 10'
- Friction loss (in suction pipe) in 2" inch pipe per 1 ft. @ 82 gpm = .10 (from pipe flow/friction loss chart)
- Friction loss (in return pipe) in 2" inch pipe per 1 ft. @ 103 gpm = .16 (from pipe flow/friction loss chart)
- $\frac{10'}{(Length of Suct. Pipe)} \times \frac{1.0}{(ft. of head/ft. of Pipe)} = \frac{1.0}{(TDH Suct. Pipe)}$
- $\frac{10'}{(Length of Return Pipe)} \times \frac{1.6}{(ft. of head/ft. of Pipe)} = \frac{1.6}{(TDH Return Pipe)}$

TDH in Piping: 2.6

Filter loss in TDH (from filter data sheet): 4

Header loss in TDH (from header data sheet): -

Total all other loss: 20.08

Total Dynamic Head (TDH): 29.68

Selected Pump and Main Drain Cover:

Pump selection

NS45VPS Pentair
011017
(Pump model and size in Horsepower)

using pump curve for TDH & System Flow Rate

Main Drain Cover

CMP 25506-320-000
(Make and Model)

(System Flow Rate must not exceed approved cover flow rates)

Notes: Minimum system flow based on min. flow per skimmer of 35 gpm.

Determine the Number and Type of Required In-Floor Suction Outlets:

Check all that apply.

- ☐ 3'-0" suction outlets @ 175 gpm max. flow (see note 2).
☐ 3 suction outlets @ 175 gpm max. flow (see note 3).
☒ 1-32" channel drain @ 175 gpm w/ 2 ports (see note 4).

TDH Calculation Options

For each pump

Check one:

- ☐ Simplified Total Dynamic Head (STDH):
Complete STDH Worksheet - Fill in all blanks.
- ☐ Total Dynamic Head (TDH):
Complete Program or other calcs. Fill in required blanks on worksheet & attach calculations.
- ☐ Maximum Flow Capacity:
of the new or replacement pump.

Notes

- If a variable speed pump is used, use the max. pump flow in calculations.
- For side wall drains, use appropriate side wall drain flow as published by manufacturer.
- Insert manufacturer's name and approved maximum flow
- See installation instructions for number of ports to be used.
- In-Floor suction outlet cover/grate must conform to most recent edition of ASME/ANSI A112.19.8 and be embossed with that edition approval.
- Pump, Filter & Header make and model cannot be changed, and equipment location cannot be moved closer to pool without submitting a revised plan and TDH calculation worksheet for approval.

Flow and Friction Loss Per Foot Schedule 40 PVC Pipe

Pipe Size	6 fps	8 fps	10 fps
1"	16 gpm	21 gpm	26 gpm
1.5"	37 gpm	50 gpm	62 gpm
2"	62 gpm	82 gpm	103 gpm
2.5"	88 gpm	117 gpm	146 gpm
3"	136 gpm	181 gpm	227 gpm
4"	234 gpm	313 gpm	392 gpm
6"	534 gpm	712 gpm	883 gpm

Total Head In Feet Conversion Chart

Inches Mercury (Vacuum Gauge)

0	2	4	6	8	10	12	14	16	18
0.0	2.3	4.5	6.8	9.0	11.3	13.6	15.8	18.1	20.3
1	2.3	4.6	6.8	9.1	11.4	13.6	15.9	18.1	20.4
2	4.6	6.9	9.1	11.4	13.7	15.9	18.2	20.4	22.7
3	6.9	9.2	11.5	13.7	16.0	18.2	20.5	22.8	25.0
4	9.2	11.5	13.8	16.0	18.3	20.5	22.8	25.1	27.3
5	11.5	13.8	16.1	18.3	20.6	22.8	25.1	27.4	29.6
6	13.8	16.1	18.4	20.6	22.9	25.2	27.4	29.7	31.9
7	16.1	18.4	20.7	23.0	25.3	27.5	29.7	32.0	34.3
8	18.4	20.7	23.0	25.3	27.6	29.8	32.0	34.3	36.6
9	20.7	23.1	25.3	27.6	29.9	32.1	34.3	36.6	38.9
10	23.1	25.4	27.6	29.9	32.2	34.4	36.7	38.9	41.2
11	25.4	27.7	29.9	32.2	34.5	36.7	39.0	41.2	43.5
12	27.7	30.0	32.2	34.5	36.8	39.0	41.3	43.5	45.8
13	30.0	32.3	34.5	36.8	39.1	41.3	43.6	45.9	48.1
14	32.3	34.6	36.9	39.1	41.4	43.6	45.9	48.2	50.4
15	34.6	36.9	39.2	41.4	43.7	45.9	48.2	50.5	52.7
16	37.0	39.2	41.5	43.7	46.0	48.3	50.5	52.8	55.0
17	39.3	41.5	43.8	46.1	48.3	50.6	52.8	55.1	57.3
18	41.6	43.8	46.1	48.4	50.6	52.9	55.1	57.4	59.6
19	43.9	46.1	48.4	50.7	52.9	55.2	57.4	59.7	61.9
20	46.2	48.5	50.7	53.0	55.2	57.5	59.8	62.0	64.3
21	48.5	50.8	53.0	55.3	57.6	59.8	62.1	64.3	66.6
22	50.8	53.1	55.3	57.6	59.9	62.1	64.4	66.6	68.9
23	53.1	55.4	57.7	59.9	62.2	64.4	66.7	68.9	71.2
24	55.4	57.7	60.0	62.2	64.5	66.7	69.0	71.3	73.5
25	57.8	60.0	62.3	64.5	66.8	69.1	71.3	73.6	75.8
26	60.1	62.3	64.6	66.8	69.1	71.4	73.6	75.9	78.1
27	62.4	64.6	66.9	69.2	71.4	73.7	75.9	78.2	80.4
28	64.7	66.9	69.2	71.5	73.7	76.0	78.2	80.5	82.8
29	67.0	69.3	71.5	73.8	76.0	78.3	80.5	82.8	85.1
30	69.3	71.6	73.8	76.1	78.3	80.6	82.9	85.1	87.4
31	71.6	73.9	76.1	78.4	80.7	82.9	85.2	87.4	89.7
32	73.9	76.2	78.4	80.7	83.0	85.3	87.5	89.7	92.0
33	76.2	78.5	80.7	83.0	85.3	87.5	89.8	92.1	94.3
34	78.5	80.8	83.1	85.3	87.6	89.8	92.1	94.4	96.6
35	80.8	83.1	85.4	87.6	89.9	92.2	94.4	96.7	98.9

NOTE: FIELD TDH MUST BE EQUAL TO OR HIGHER THAN THE CALCULATED TDH.

This form is the property of PE and may only be used in conjunction with my Residential Swimming Pool Specification Drawings or by others with my written permission.

Date: 1/30/20

Date:

Michael S. Canto
Contractor Signature
Michael S. Canto
Contractor Printed Name
CPC 1457306
Contractor Cert. No.
247-232-7665

Fun State Pools
332-POOL

Michael Canto

www.funstatepoolsinc.com

3601 N.W. 97th Blvd., Gainesville, Florida 32606

Swimming Pool Specification For:



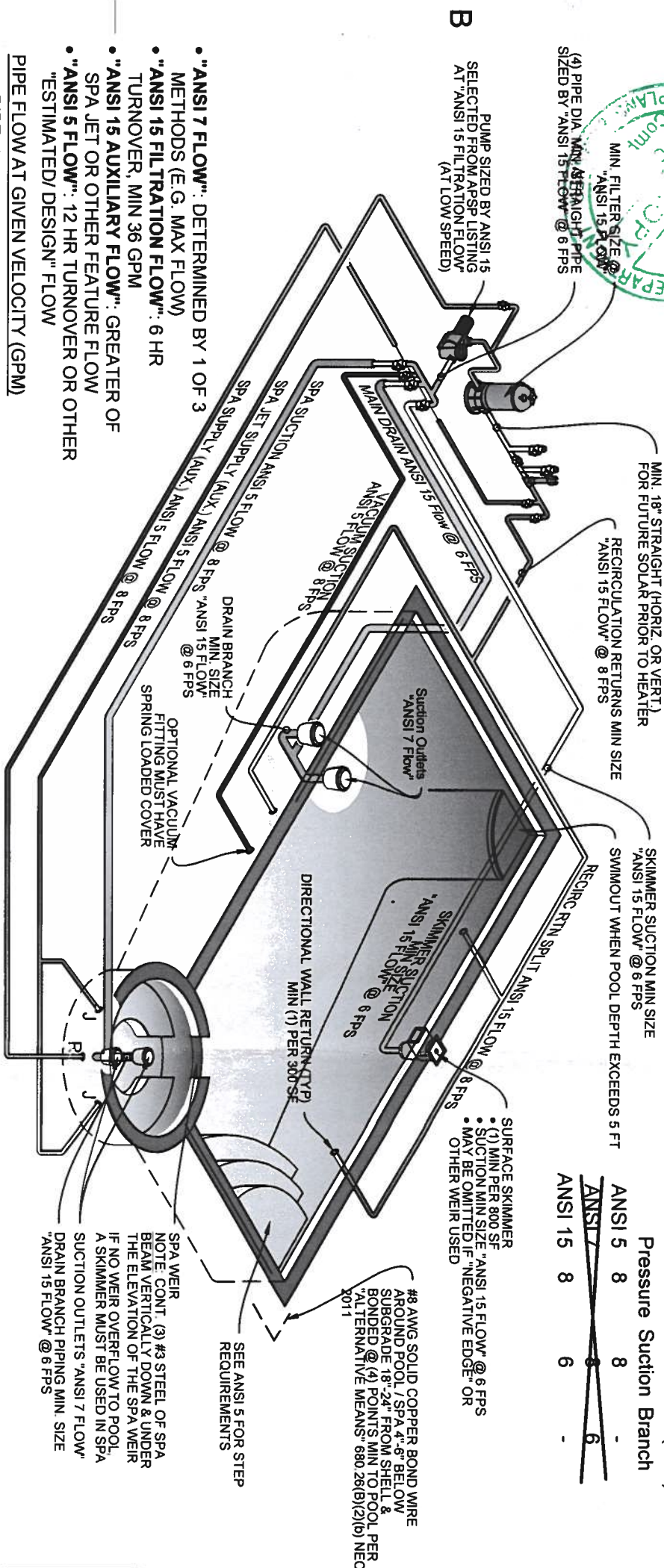


SHEET OF

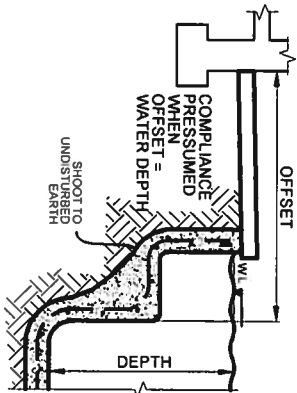
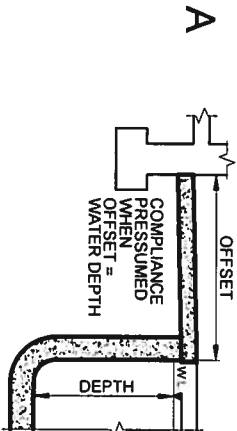
CHKD. BY: JKK	SCALE: AS NOTED
DATE: 27-Feb-19	

19
PROFESSIONAL ENGINEER
STATE OF FLORIDA
115
11/15/11

COMPLIES WITH 2017 FBC 6TH ED, ALL VOLUMES



- "ANSI 7 FLOW": DETERMINED BY 1 OF 3 METHODS (E.G. MAX FLOW)
 - "ANSI 15 FILTRATION FLOW": 6 HR TURNOVER, MIN 36 GPM
 - "ANSI 15 AUXILIARY FLOW": GREATER OF SPA JET OR OTHER FEATURE FLOW
 - "ANSI 5 FLOW": 12 HR TURNOVER OR OTHER "ESTIMATED/ DESIGN" FLOW
- | PIPE | 6 FPS | 8 FPS |
|--------|-------|-------|
| 1" | 16 | 22 |
| 1-1/2" | 38 | 51 |
| 2" | 63 | 84 |
| 2-1/2" | 90 | 119 |
| 3" | 138 | 184 |
| 4" | 238 | 317 |
| 6" | 540 | 720 |
- PIPE FLOW AT GIVEN VELOCITY (GPM)



"ANGLE OF REPOSE"
OR SEE CONTRACTOR PLAN

TYPICAL RESIDENTIAL POOL / SPA SCHEMATIC PLAN & NOTES

SCALE: N.T.S.

FBC NO LONGER REQUIRES EXCAVATIONS OUT OF THE "ANGLE OF REPOSE PLUS 1 FT". THE CURRENT REQUIREMENT IN 2017 FBC 6TH ED, SECTION 1804.1 STATES THAT "EXCAVATIONS SHALL NOT REMOVE LATERAL SUPPORT FROM ANY FOUNDATION." THEREFORE THE FOLLOWING IS REQUIRED:

1. WHEN THE POOL DECK DISTANCE IS EQUAL TO OR GREATER THAN WATER DEPTH, NO MITIGATION OF THE SHELL STRUCTURE IS REQUIRED.
2. WHEN THE POOL DECK DISTANCE IS EQUAL TO OR GREATER THAN THE WATER DEPTH, THERE IS NO SHORING OR FOUNDATION SUPPORT INITIALLY REQUIRED.
3. WHEN THE POOL DECK DISTANCE IS LESS THAN THE WATER DEPTH, THE ENGINEER SHALL PROVIDE A MITIGATION SPECIFICATION, EITHER TO PROTECT THE FOUNDATION DURING EXCAVATION OR STRENGTHEN THE SHELL FROM STRUCTURE LOADS.
4. IF DURING EXCAVATION, SOIL CONDITIONS APPEAR TO LEAD TO LOSS OF FOUNDATION SUPPORT, THE CONTRACTOR SHALL CEASE EXCAVATION AND CONTACT THE ENGINEER FOR MITIGATION SPECIFICATIONS.
5. IF AFTER EXCAVATION THE CONTRACTOR OR INSPECTOR FIND A LOSS OR THREATENED LOSS OF SOIL SUPPORT AT THE FOUNDATION, CONTACT THE ENGINEER FOR A MITIGATION SPECIFICATION.

NOTES:

- This plan is schematic & piping shall be connected to provide a functioning system.
- Pool piping shall hold a static water or air pressure not less than 35 psi for 15 minutes, per R4501.12.1
- Pools shall have pumps selected to provide minimum 12 hr. turnover & maximum 6 hour turnover.
- Determine pipe sizing from attached work sheets.
- Spa piping determined from attached work sheets.
- The dual main drains shall have a minimum separation of 3 ft, unless one is located on the vertical wall or a single unblockable drain is used.
- All suction covers shall meet ANSI/ASME A112.19.8-2007
- All piping shall be NSF-PW approved & meet the requirements of Florida Building Code 6TH Ed, 2017.
- Electrical equipment, wiring, & installation shall conform to the National Electrical Code 2014 Edition.
- Bonding of pool steel & light to footing steel shall be continued to & include all pumps & heaters.
- Temporary fencing shall be installed & maintained until permanent child safety features are installed.
- There shall be a passing electrical & child safety final inspection prior to filling the pool or spa with water.
- Pool shall meet the applicable criteria in ANSI/APSP 3.4, 5.6, 7 & 15 standards.
- Regardless of the criteria here, the project shall comply with all sections of the FBC 6th Edition - Residential, Building, Mechanical, Plumbing & Gas Codes, as applicable respectively & amended.

SEE INFORMATION ATTACHED TO THIS PERMIT PACKAGE FOR SITE SPECIFIC DETAILS SHOWING ANSI 7 & 15 AND FBC COMPLIANCE

INFORMATION ON THIS SHEET COMPLIES WITH 6TH ED 2017 FBC, ALL VOLUMES, INCLUDING 2017 FBC ENERGY CONSERVATION CODE

Fun-State Pools, Inc.



Office: 941-748-0311, Fax: 941-746-7391
kent@kimesengineering.com
P.E. 33678, C.A. 27189

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02-27-19	LIMITS ON STRUCTURE APPROVED BY	JAMES KIMES
DATE:	REVISIONS:	
DWG. BY: MCM	PRINTED BY: JKK	SCALE: AS NOTED
CHKD. BY: JKK	DATE: 27-Feb-19	STATE OF FLORIDA

TYPICAL PLAN SECTIONS FOR RESIDENTIAL POOL/SPA

ORIG. DWG: 17"x11" (ANSI B)

SHEET OF