

DATE 01/23/2004

Columbia County Building Permit

This Permit Expires One Year From the Date of Issue

PERMIT

000021441

APPLICANT MARYANN CRAWFORD PHONE 752-5152

ADDRESS 885 SW SISTERS WELCOME ROAD LAKE CITY FL 32025

OWNER KENNETH & SONJA MARKHAM PHONE 755-4483

ADDRESS 3171 SE COUNTY ROAD 252 LAKE CITY FL 32025

CONTRACTOR STANLEY CRAWFORD PHONE _____

LOCATION OF PROPERTY 41S, TL ON 252, PAST PRESS RUTH, ON THE LEFT

TYPE DEVELOPMENT SRD, UTILITY ESTIMATED COST OF CONSTRUCTION 87900.00

HEATED FLOOR AREA 1758.00 TOTAL AREA 2474.00 HEIGHT .00 STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 6/12 FLOOR SLAB

LAND USE & ZONING A-3 MAX. HEIGHT 17

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

NO. EX.D.U. 0 FLOOD ZONE OUT DEVELOPMENT PERMIT NO. _____

PARCEL ID 23-4S-17-08710-006 SUBDIVISION _____

LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 5.00

000000180 _____ RG0042896 _____

Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____

PERMIT _____ 04-0043-N _____ BK _____ RJ _____

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

COMMENTS: ONE FOOT ABOVE ROAD, NOC ON FILECheck # or Cash 1203**FOR BUILDING & ZONING DEPARTMENT ONLY**

(footer/Slab)

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

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

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

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

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

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

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

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

BUILDING PERMIT FEE \$ 440.00 CERTIFICATION FEE \$ 12.37 SURCHARGE FEE \$ 12.37

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

FLOOD ZONE DEVELOPMENT FEE \$ _____ CULVERT FEE \$ 25.00 **TOTAL FEE** 539.74

INSPECTORS OFFICE Asse Tedder CLERKS OFFICE CX

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.

CERTIFICATE OF OCCUPANCY

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 23-4S-17-08710-006

Building permit No. 000021441

Use Classification SFD, UTILITY

Fire: 22.80

Permit Holder STANLEY CRAWFORD

Waste: 49.00

Owner of Building KENNETH & SONJA MARKHAM

Total: 71.80

Location: 3171 SE CR 252

Date: 06/18/2004

Randy Jones

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)



180/ 21441
1/16/04
GT

**Columbia County
Building Permit Application**

Date _____

Application No. 0401-29

Applicants Name & Address Stanley Crawford Construction, Inc. Phone (386) 752-5152
885 S. W. Sisters Welcome Rd. Lake City, FL 32025
Owners Name & Address Kenneth N. & Sonja A. Markham Phone (386) 755-4483
Rt. 10 Box 739 Lake City, FL 32025
Fee Simple Owners Name & Address _____ Phone _____

Contractors Name & Address Stanley Crawford Construction, Inc. Phone (386) 752-5152
same as applicant above

Legal Description of Property 23-45-ME - see attached legal description.

Location of Property TBD Highway 252 - Hwy 41 South, turn left on CR 252, past Press Ruth Rd. on the left.

Tax Parcel Identification No. 23-45-17-08710-006 Estimated Cost of Construction \$ 112,150.00
Type of Development Custom Residential house Number of Existing Dwellings on Property 0
Comprehensive Plan Map Category A-3 Zoning Map Category A-3
Building Height 17' 8" Number of Stories 1 Floor Area 1759 S.F. Total Acreage in Development 5 acres
Distance From Property Lines (Set Backs) Front 190 Side 50 Rear 200 Street _____
Flood Zone DUT Certification Date _____ Development Permit _____

Bonding Company Name & Address _____
Architect/Engineer Name & Address Nick Geisler 591 Custard St Lake City, FL 32055
Mortgage Lenders Name & Address CNB National Bank 100 N. 1st St. Lake City, FL 32055

Application is hereby made to obtain a permit to do the 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 will 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 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.

Stanley Crawford
Owner or Agent (including contractor)

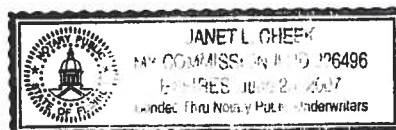
Stanley Crawford
Contractor
RG 0042 896
Contractor License Number

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this 16 day of January by 2004

STATE OF FLORIDA
COUNTY OF COLUMBIA
Sworn to (or affirmed) and subscribed before me
this 16 day of January by 2004

✓ Personally Known _____ OR Produced Identification

✓ Personally Known _____ OR Produced Identification



MARKHAM

EXHIBIT "A"

TOWNSHIP 4 SOUTH - RANGE 17 EAST

SECTION 23: A part of the NW 1/4 of Section 23, Township 4 South, Range 17 East, Columbia County, Florida, being more particularly described as follows: Commence at the NW Corner of said Section 23 and run thence S 01 deg. 21'02" E, 1054.58 feet; thence N 87 deg. 16'30" E., 485.63 feet to the Point of Beginning; thence continue N 87 deg. 16'30" E, 329.46 feet; thence S 07 deg. 22'30" W, 744.82 feet to a point on the North right-of-way line of County Road No. 252, said point being on a curve to the right having a radius of 22958.31 feet, an included angle of 00 deg. 50'20", a chord bearing of N 67 deg. 23'31" W, and a chord distance of 336.16 feet; thence run Northwesterly, along the arc of said curve and along said North right-of-way line, 336.17 feet; thence N 07 deg. 22'30" E, 598.72 feet to the Point of Beginning.

Inst:2004000229 Date:01/06/2004 Time:09:40

_____, P. DeWitt Cason, Columbia County B.1003 P.2667

Columbia County Building Department Culvert Permit

Culvert Permit No.
000000180

DATE 01/23/2004 PARCEL ID # 23-4S-17-08710-006

APPLICANT MARYANN CRAWFORD PHONE 752-5152

ADDRESS 885 SW SISTERS WELCOME ROAD LAKE CITY FL 32025

OWNER KENETH & SONJA MARKHAM PHONE 755-4483

ADDRESS 3171 SE COUNTY ROAD 252 LAKE CITY FL 32025

CONTRACTOR STANLEY CRAWFORD PHONE 752-5152

LOCATION OF PROPERTY 41S, TL ON 252, PAST PRESS RUTH ROAD, ON THE LEFT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT _____

SIGNATURE



INSTALLATION REQUIREMENTS

☒ X

Culvert size will be 18 inches in diameter with a total length of 32 feet, leaving 24 feet of driving surface. Both ends will be mitered 4 foot with a 4 : 1 slope and poured with a 4 inch thick reinforced concrete slab.

INSTALLATION NOTE: Turnouts will be required as follows:

- a) a majority of the current and existing driveway turnouts are paved, or;
- b) the driveway to be served will be paved or formed with concrete.

Turnouts shall be concrete or paved a minimum of 12 feet wide or the width of the concrete or paved driveway, whichever is greater. The width shall conform to the current and existing paved or concreted turnouts.

☐

Culvert installation shall conform to the approved site plan standards.

☐

Department of Transportation Permit installation approved standards.

☐

Other _____

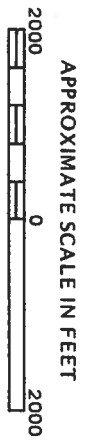
**ALL PROPER SAFETY REQUIREMENTS SHOULD BE FOLLOWED
DURING THE INSTALLATION OF THE CULVERT.**

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

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

Amount Paid 25.00



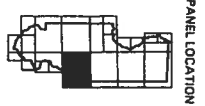


NATIONAL FLOOD INSURANCE PROGRAM

FIRM
FLOOD INSURANCE RATE MAP

COLUMBIA
COUNTY,
FLORIDA
(UNINCORPORATED AREAS)

PANEL 200 OF 300



COMMUNITY-PANEL NUMBER
120070 0200 B
EFFECTIVE DATE:
JANUARY 6, 1988



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT Version 1.0. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. Further information about National Flood Insurance Program flood hazard maps is available at www.fema.gov/nifm

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

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

Mailing Your Existing Address

Rt 10 Box 739
Lake City, FL
32025

Your New Address

3171 SE County Road 252
Lake City, FL 32025

All residences, businesses, industries, schools, churches, organizations and public buildings are covered by this system. You are required to affix your new address numbers permanently on your house or the principal building where they can be seen easily. Also, if your house or the principal building at this address is not clearly visible from the public or private roadway, you are required to erect a post at your driveway entrance. Place your new number on it facing the road so emergency response personnel coming in either direction can easily see the numbers. To help emergency responding personnel, it will be the responsibility of each property owner, trustee, leasee, agent and occupant of each residence, apartment building, business or industry to purchase, post and maintain address numbers. The address number for residences, townhouses and in town businesses shall be made up of numbers, *which are not less than three (3) inches in height and one and one half (1 ½) inches in width*. All industrial and commercial structures located in low density development areas (areas in which small residential style address numbers are not visible from the road) shall display address numbers not less than ten (10) inches in height. All Apartment buildings and high rises shall display address numbers above or to the side of the primary entrance to the building and shall be displayed not less than six (6) inches in height. Apartment numbers for individual units within the complex shall be displayed on, above or to the side of the doorway of each unit.

All numbers shall contrast in color with the background on which affixed, and shall be visible day or night from the street. When possible, the number shall be displayed beside or over the main entrances of the structure. Any old address numbers shall be removed from the structure, mail box or access point.

It is your responsibility to advise all persons and businesses, with which you correspond, of your change of address (unless you receive your mail in a Post Office Box). Your mail will be delivered to your old rural route box number address for a period of one (1) year.

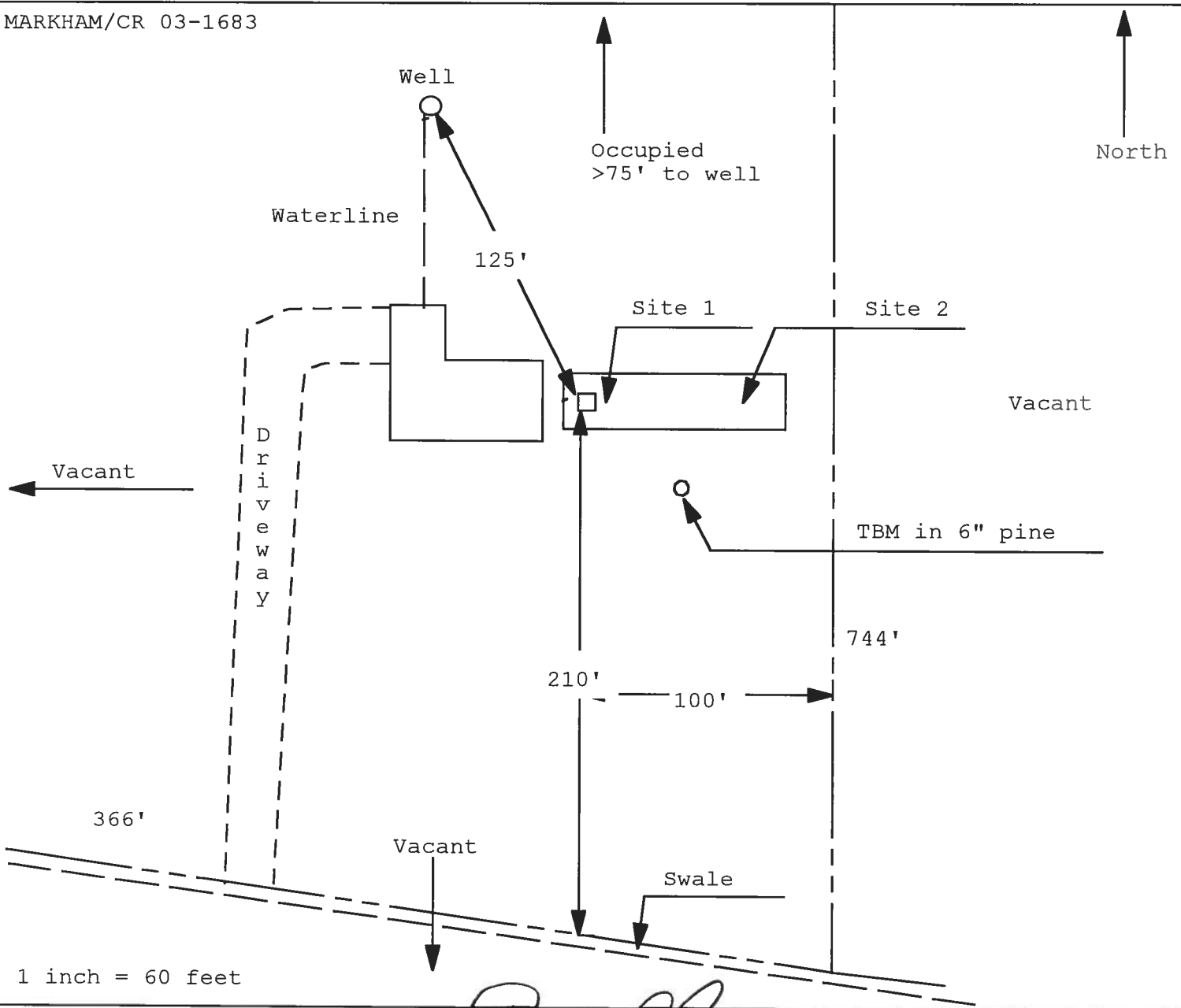
We're counting on the cooperation of all citizens to help make the Enhanced 9-1-1 Emergency Telephone System a success. If you have any questions please call (386) 752-8787 between 8:00 AM and 5:00 PM Monday through Friday.

Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan

Permit Application Number: 04-0043N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

MARKHAM/CR 03-1683



Site Plan Submitted By Paul Lloyd Date 1/14/04
 Plan Approved Paul Lloyd Not/Approved MDH Date 1/14/04
 By Paul Lloyd MDH C CPHU
 Notes: 1-16-04

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name:	MARKHAM	Builder:	STANLEY CRAWFORD
Address:		Permitting Office:	
City, State:		Permit Number:	21441
Owner:	MARKHAM	Jurisdiction Number:	221000
Climate Zone:	North		

1. New construction or existing	New	12. Cooling systems	
2. Single family or multi-family	Single family	a. Central Unit	Cap: 36.0 kBtu/hr
3. Number of units, if multi-family	1		SEER: 10.00
4. Number of Bedrooms	3	b. N/A	
5. Is this a worst case?	Yes	c. N/A	
6. Conditioned floor area (ft ²)	1759 ft ²		
7. Glass area & type	Single Pane Double Pane	13. Heating systems	
a. Clear glass, default U-factor	0.0 ft ² 211.0 ft ²	a. Electric Heat Pump	Cap: 37.0 kBtu/hr
b. Default tint	0.0 ft ² 0.0 ft ²		HSPF: 7.00
c. Labeled U or SHGC	0.0 ft ² 0.0 ft ²	b. N/A	
8. Floor types		c. N/A	
a. Slab-On-Grade Edge Insulation	R=0.0, 190.0(p) ft	14. Hot water systems	
b. N/A		a. Electric Resistance	Cap: 40.0 gallons
c. N/A			EF: 0.88
9. Wall types		b. N/A	
a. Frame, Wood, Exterior	R=13.0, 1250.0 ft ²	c. Conservation credits	
b. N/A		(HR-Heat recovery, Solar	
c. N/A		DHP-Dedicated heat pump)	
d. N/A		15. HVAC credits	
e. N/A		(CF-Ceiling fan, CV-Cross ventilation,	
10. Ceiling types		HF-Whole house fan,	
a. Under Attic	R=30.0, 1759.0 ft ²	PT-Programmable Thermostat,	
b. Under Attic	R=19.0, 122.0 ft ²	MZ-C-Multizone cooling,	
c. N/A		MZ-II-Multizone heating)	
11. Ducts			
a. Sup: Unc. Ret: Unc. AH: Interior	Sup. R=6.0, 142.0 ft		
b. N/A			

Glass/Floor Area: 0.12

Total as-built points: 25769

Total base points: 26495

PASS

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

PREPARED BY: SUNCOAST INSULATORS

DATE: 1/14/14

I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.

OWNER/AGENT: _____

DATE: _____

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.



BUILDING OFFICIAL: _____

DATE: _____

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #.

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BSPM = Points Floor Area											
				Type/SC	Overhang Ornt Len Hgt			Area X SPM X SOF = Points			
.18	1759.0	20.64	6345.1	Double, Clear	N	2.0	6.0	15.0	19.20	0.90	259.2
				Double, Clear	E	2.0	6.0	120.0	42.06	0.85	4280.5
				Double, Clear	S	2.0	6.0	15.0	35.87	0.78	417.5
				Double, Clear	W	2.0	6.0	61.0	36.52	0.85	1996.1
				As-Built Total:							
				211.0 8963.3							
WALL TYPES											
Area X BSPM = Points											
				Type	R-Value			Area X SPM = Points			
Adjacent	0.0	0.00	0.0	Frame, Wood, Exterior	13.0			1250.0	1.50	1875.0	
Exterior	1250.0	1.70	2125.0								
Base Total:				As-Built Total:							
1250.0 2125.0				1250.0 1875.0							
DOOR TYPES											
Area X BSPM = Points											
				Type	Area X SPM = Points						
Adjacent	0.0	0.00	0.0	Exterior Insulated	56.0 4.10			229.6			
Exterior	56.0	6.10	341.6								
Base Total:				As-Built Total:							
56.0 341.6				56.0 229.6							
CEILING TYPES											
Area X BSPM = Points											
				Type	R-Value			Area X SPM X SCM = Points			
Under Attic	1759.0	1.73	3043.1	Under Attic	30.0			1759.0	1.73 X 1.00	3043.1	
				Under Attic	19.0			122.0	2.34 X 1.00	285.5	
Base Total:				As-Built Total:							
1759.0 3043.1				1881.0 3328.6							
FLOOR TYPES											
Area X BSPM = Points											
				Type	R-Value			Area X SPM = Points			
Slab	190.0(p)	-37.0	-7030.0	Slab-On-Grade Edge Insulation	0.0			190.0(p)	-41.20	-7828.0	
Raised	0.0	0.00	0.0								
Base Total:				As-Built Total:							
-7030.0				190.0 -7828.0							
INFILTRATION											
Area X BSPM = Points											
				Area X SPM = Points							
1759.0 10.21 17959.4				1759.0 10.21 17959.4							

SUMMER CALCULATIONS**Residential Whole Building Performance Method A - Details**

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT						
Summer Base Points:		22784.1		Summer As-Built Points:			22517.8			
Total Summer Points	X	System Multiplier	= Cooling Points	Total Component	X	Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier	= Cooling Points
22784.1		0.4266	9719.7	22517.8	1.00	1.00	(1.090 x 1.147 x 0.91)	0.341	1.000	8743.7

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES .18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt			Area X WPM X WOF = Points			
.18	1759.0	12.74	4033.7	Double, Clear	N	2.0	6.0	15.0	24.58	1.00	370.4
				Double, Clear	E	2.0	6.0	120.0	18.79	1.06	2391.7
				Double, Clear	S	2.0	6.0	15.0	13.30	1.28	251.0
				Double, Clear	W	2.0	6.0	61.0	20.73	1.04	1318.4
				As-Built Total:			211.0			4331.5	
WALL TYPES Area X BWPM = Points				Type	R-Value			Area X WPM = Points			
Adjacent	0.0	0.00	0.0	Frame, Wood, Exterior	13.0			1250.0	3.40	4250.0	
Exterior	1250.0	3.70	4625.0								
Base Total:				As-Built Total:			1250.0			4250.0	
DOOR TYPES Area X BWPM = Points				Type	R-Value			Area X WPM = Points			
Adjacent	0.0	0.00	0.0	Exterior Insulated				56.0	8.40	470.4	
Exterior	56.0	12.30	688.8								
Base Total:				As-Built Total:			56.0			470.4	
CEILING TYPES Area X BWPM = Points				Type	R-Value			Area X WPM X WCM = Points			
Under Attic	1759.0	2.05	3605.9	Under Attic	30.0			1759.0	2.05 X 1.00	3605.9	
				Under Attic	19.0			122.0	2.70 X 1.00	329.4	
Base Total:				As-Built Total:			1881.0			3935.3	
FLOOR TYPES Area X BWPM = Points				Type	R-Value			Area X WPM = Points			
Slab	190.0(p)	8.9	1691.0	Slab-On-Grade Edge Insulation	0.0			190.0(p)	18.80	3572.0	
Raised	0.0	0.00	0.0								
Base Total:				As-Built Total:			190.0			3672.0	
INFILTRATION Area X BWPM = Points				Area X WPM = Points							
1759.0 -0.59 -1037.8				1759.0 -0.59 -1037.8							

WINTER CALCULATIONS**Residential Whole Building Performance Method A - Details**

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT									
Winter Base Points:		13606.7		Winter As-Built Points:		15521.5							
Total Winter Points	X	System Multiplier	= Heating Points	Total Component	X	Cap Ratio	X	Duct Multiplier (DM x DSM x AHU)	X	System Multiplier	X	Credit Multiplier	= Heating Points
13606.7		0.6274	8536.8	15521.5		1.000		(1.069 x 1.169 x 0.93)		0.487		1.000	8787.5
				15521.5		1.00		1.162		0.487		1.000	8787.5

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT					
WATER HEATING									
Number of Bedrooms	X	Multiplier	= Total	Tank Volume	EF	Number of Bedrooms	X Ratio	Tank X Multiplier X Credit	= Total Multiplier
3		2746.00	8238.0	40.0	0.86	3	1.00	2746.00	1.00 8238.0
				As-Built Total:					8238.0

CODE COMPLIANCE STATUS							
BASE				AS-BUILT			
Cooling Points	+	Heating Points	+ Hot Water Points = Total Points	Cooling Points	+	Heating Points	+ Hot Water Points = Total Points
9720		8537	8238 26495	8744		8787	8238 25769

PASS

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS , , ,

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	606.1.ABC.1.1	Maximum .3 cfm/sq.ft. window area, .5 cfm/sq.ft. door area.	
Exterior & Adjacent Walls	606.1.ABC.1.2.1	Caulk, gasket, weatherstrip or seal between windows/doors & frames, surrounding wall; foundation & wall sole or sill plate, joints between exterior wall panels at corners; utility penetrations; between wall panels & top/bottom plates; between walls and floor. EXCEPTION: Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate.	
Floors	606.1.ABC.1.2.2	Penetrations/openings >1/8" sealed unless backed by truss or joist members. EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams.	
Ceilings	606.1.ABC.1.2.3	Between walls & ceilings, penetrations of ceiling plane of top floor; around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams.	
Recessed Lighting Fixtures	606.1.ABC.1.2.4	Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC rated with < 2.0 cfm from conditioned space, tested	
Multi-story Houses	606.1.ABC.1.2.5	Air barrier on perimeter of floor cavity between floors	
Additional Infiltration reqts	606.1.ABC.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air	

6A-22 OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	612.1	Comply with efficiency requirements in Table 6-12. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	612.1	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spas & pool heaters must have a minimum thermal efficiency of 78%.	
Shower heads	612.1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	610.1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated, and installed in accordance with the criteria of Section 610. Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	607.1	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	604.1, 602.1	Ceilings-Min. R-19. Common walls-Frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 83.2

The higher the score, the more efficient the home.

MARKHAM, . . .

1. New construction or existing	New	12. Cooling systems	
2. Single family or multi-family	Single family	a. Central Unit	Cap: 36.0 kBtu/hr
3. Number of units, if multi-family	1		SEER: 10.00
4. Number of Bedrooms	3	b. N/A	
5. Is this a worst case?	Yes	c. N/A	
6. Conditioned floor area (ft ²)	1759 ft ²		
7. Glass area & type	Single Pane Double Pane	13. Heating systems	
a. Clear - single pane	0.0 ft ² 211.0 ft ²	a. Electric Heat Pump	Cap: 37.0 kBtu/hr
b. Clear - double pane	0.0 ft ² 0.0 ft ²		HSPF: 7.00
c. Tint/other SHGC - single pane	0.0 ft ² 0.0 ft ²	b. N/A	
d. Tint/other SHGC - double pane		c. N/A	
8. Floor types		14. Hot water systems	
a. Slab-On-Grade Edge Insulation	R=0.0, 190.0(p) ft	a. Electric Resistance	Cap: 40.0 gallons
b. N/A			EF: 0.88
c. N/A		b. N/A	
9. Wall types		c. Conservation credits	
a. Frame, Wood, Exterior	R=13.0, 1250.0 ft ²	(HR-Heat recovery, Solar	
b. N/A		DHP-Dedicated heat pump)	
c. N/A		15. HVAC credits	
d. N/A		(CF-Ceiling fan, CV-Cross ventilation,	
e. N/A		HF-Whole house fan,	
10. Ceiling types		PT-Programmable Thermostat,	
a. Under Attic	R=30.0, 1759.0 ft ²	MZ-C-Multizone cooling,	
b. Under Attic	R=19.0, 122.0 ft ²	MZ-H-Multizone heating)	
c. N/A			
11. Ducts			
a. Sup. Unc. Ret. Unc. AH: Interior	Sup. R=6.0, 142.0 ft		
b. N/A			

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

Builder Signature: _____ Date: _____

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

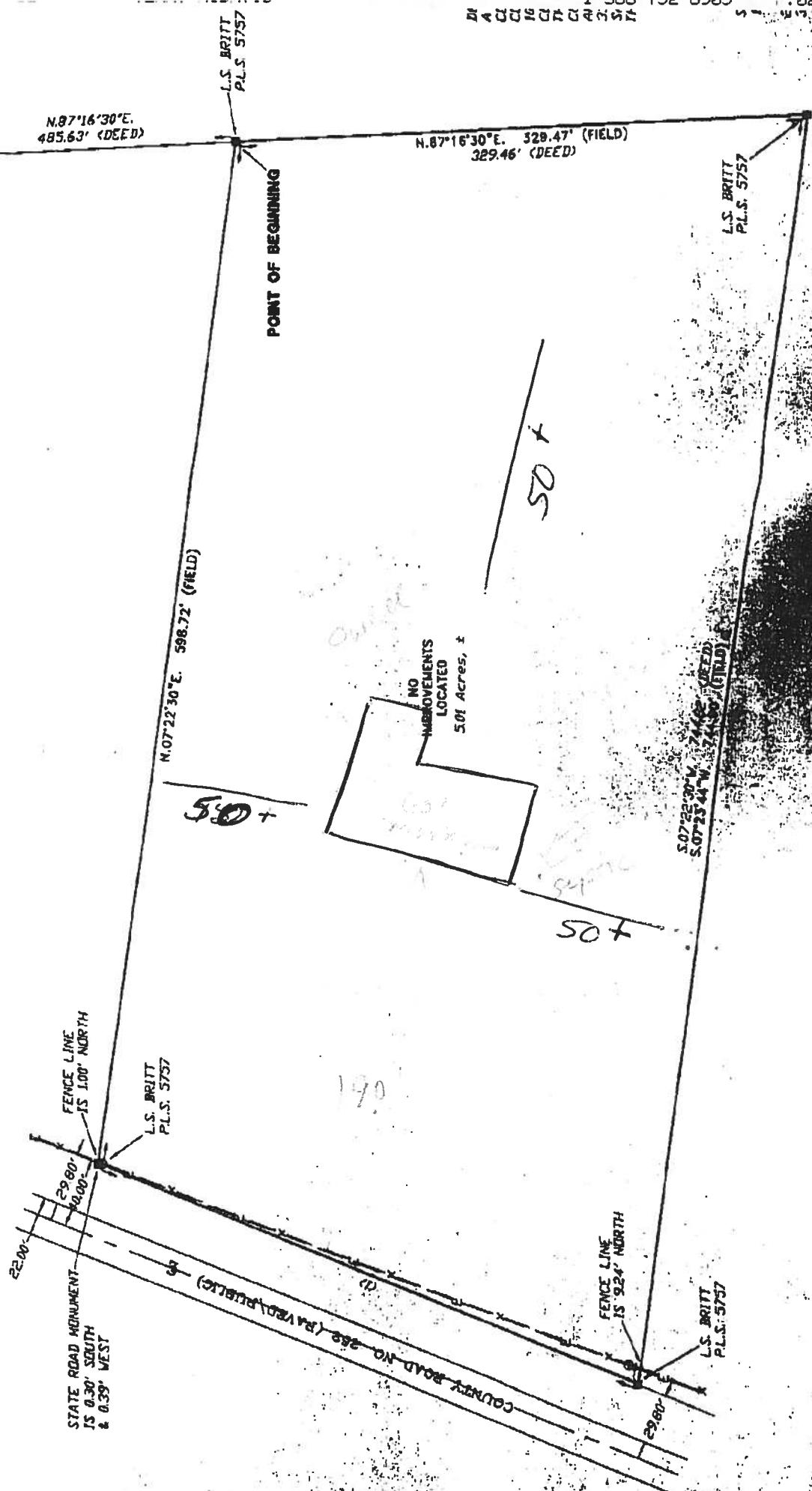


*NOTE: The home's estimated energy performance score is only available through the FLA-RES computer program. This is not a Building Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStar[®] designation), your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at 321-638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Efficiency Code For Building Construction, contact the Department of Community Affairs at 850/487-1824.

EnergyGauge[®] (Version: FLRCSB v3.30)

CURVE TABLE

NO.	RADIUS	DELTA	ARC	TANGENT	CHORD	CHORD BEARING
1	22958.31'	00°50'18"	335.94'	167.97'	335.94'	S 67°22'15"E
DEED	22958.31'	00°50'20"	336.17'		336.16'	N 67°23'31"W



STATE OF FLORIDA, COUNTY OF COLUMBIA
 I HEREBY CERTIFY, that the above and foregoing
 is a true copy of the original filed in this office.
 P. DeWITT CASON, CLERK OF COURTS

Inst: 2004000229 Date: 01/06/2004 Time: 09:40

MLK DC, P. DeWitt Cason, Columbia County B: 1003 P: 2665

By *M. K. Cason*
 Deputy Clerk

Date *1-6-04*



NOTICE OF COMMENCEMENT

STATE OF FLORIDA
 COUNTY OF Columbia

LOAN NO. 2003-1681

THE UNDERSIGNED HEREBY INFORMS ALL CONCERNED THAT IMPROVEMENTS WILL BE MADE TO CERTAIN REAL PROPERTY AND, IN ACCORDANCE WITH SECTION 713.13 OF THE FLORIDA STATUTES, THE FOLLOWING INFORMATION IS STATED IN THE NOTICE OF COMMENCEMENT. THIS NOTICE IS VOID AND OF NO FORCE AND EFFECT IF CONSTRUCTION IS NOT COMMENCED WITHIN (90) DAYS OF RECORDATION.

1. PROPERTY DESCRIPTION

A. Street Address or Location Description:

TBD Highway 252
 Lake City, FLORIDA 32025

B. Legal Description:

See Legal description attached hereto and made a part hereof: as exhibit "A"

2. GENERAL DESCRIPTION OF IMPROVEMENTS:

CONSTRUCTION OF SINGLE FAMILY DWELLING

3. A. OWNER INFORMATION NAME AND ADDRESS:

Name: Kenneth N. Markham AND Sonja A. Markham

Address: TBD Highway 252
 Lake City, FLORIDA 32025

MAILING ADDRESS

RT 10, Box 739
 Lake City, FL 32025

B. OWNER'S INTEREST IN THE SITE OF IMPROVEMENT IS: FEE SIMPLE

C. NAME AND ADDRESS OF FEE SIMPLE TITLEHOLDER (IF OTHER THAN OWNER)

Name:
 Address:

4. NAME AND ADDRESS OF CONTRACTOR:

Name: Stanley Crawford Construction, Inc.

Address: 2119 County Rd. 341
 Lake City, FL

Phone Number: _____

Fax Number: _____

5. SURETY (IF ANY):

Name:
 Address:
 Amount of Bond:

6. LENDER MAKING CONSTRUCTION LOAN:

Name: CNB NATIONAL BANK
 Address: 187 SW BAY DR., P.O. BOX 3239
 LAKE CITY, FLORIDA 32025

7. PERSON DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13 (1) (a) FLORIDA STATUTES:

Name:

Address:

Phone Number: _____

Fax Number: _____

Inst:2004000229 Date:01/06/2004 Time:09:40

DC,P.Dewitt Cason,Columbia County B:1003 P:2656

8. OWNER DESIGNATES THE FOLLOWING PERSON IN ADDITION TO HIMSELF TO RECEIVE A COPY OF THE LIENORS NOTICE AS PROVIDED IN SECTION 713.13 (1) (b), FLORIDA STATUTES:

Name: CNB NATIONAL BANK

Address: 187 SW BAYA DR., P.O. BOX 3239
LAKE CITY, FLORIDA 32025

Attn:

9. EXPIRATION DATE OF NOTICE OF COMMENCEMENT (THE EXPIRATION DATE IS 1 YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED.)


WITNESS Terry McDavid
WITNESS Lisa C. Ogburn
OWNER Kenneth N. Markham
OWNER Sonja A. Markham

OWNER

OWNER

State of Florida

The following instrument was acknowledged before me this JANUARY 2, 2004
Kenneth N. Markham AND Sonja A. Markham, HUSBAND AND WIFE

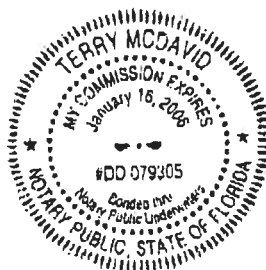
by

who is personally known to me or who has produced
who did take an oath.

as identification and

NOTARY PUBLIC
(Seal)

MY COMMISSION EXPIRES



CAM112M01 S CamaUSA Appraisal System
1/16/2004 10:16 Legal Description Maintenance
Year T Property Sel
2004 R 23-4S-17-08710-006

Columbia County
21042 Land 001
AG 000
Bldg 000
Xfea 000

MARKHAM KENNETH N & SONJA A

21042 TOTAL B

1	COMM NW COR,, RUN S 1054.58 FT,, E 485.63 FT FOR POB,, CONT E . . .	2
3	329.46 FT,, S 7 DEG W 744.82 FT TO N R/W CR-252,, NW'LY ALONG . .	4
5	R/W 366.17 FT,, N 7 DEG E 598.72 FT TO POB. ORB 971-1565	6
7	CWD 1003-2640..	8
9	. . . . .	10
11	. . . . .	12
13	. . . . .	14
15	. . . . .	16
17	. . . . .	18
19	. . . . .	20
21	. . . . .	22
23	. . . . .	24
25	. . . . .	26
27	. . . . .	28

Mnt 1/14/2004 KYLIE

F1=Task F3=Exit F4=Prompt F10=GoTo PGUP/PGDN F24=MoreKeys

Notice of Treatment

Applicator Florida Pest Control & Chemical Co.

Address 5360 CIBOLA AVE

City L.C.

Phone 332 1705

Site Location Subdivision _____

Lot# _____ Block# _____ Permit# 2444

Address 3915E CR 252

AREAS TREATED

Area Treated	Date	Time	Gal.	Print Technician's Name
Main Body				
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 _____ %

Remarks Protect all surrounding areas

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

Notice of Treatment

Applicator Florida Pest Control & Chemical Co.

Address _____

City _____

Phone _____

Site Location Subdivision _____

Lot# _____ Block# _____ Permit# _____

Address _____

AREAS TREATED

Area Treated	Date	Time	Gal.	Print Technician's Name
Main Body				
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 _____ %

Remarks _____

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