

## Columbia County Building Permit Application

For Office Use Only Application # 1202-06 Date Received 2-1-12 By UH Permit # 29989  
 Zoning Official BLK Date 16 FEB. 2012 Flood Zone X Land Use A-3 Zoning A-3  
 FEMA Map # N/A Elevation 35 MFE 36 River Santa Fe Plans Examiner T.C. Date 2-3-12  
 Comments Elevation Survey Shows existing Elevation above BFE Elevation Confirmation Letter Required at Slab  
☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☒ State Road Info ☒ Well letter ☒ 911 Sheet ☐ Parent Parcel #  
☐ Dev Permit # ☐ In Floodway ☒ Letter of Auth. from Contractor ☐ F W Comp. letter  
 IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_ ☒ Sub VF Form 1/2 of bottom  
 Road/Code \_\_\_\_\_ School \_\_\_\_\_ = TOTAL (Suspended) ☐ App Fee Paid

Septic Permit No. 12-0095 Fax \_\_\_\_\_

Name Authorized Person Signing Permit James Johnston Phone 365-5999

Address 650 SW main Blvd. Lake City FL 32025

Owners Name Gaston + Glenda McCall Phone \_\_\_\_\_

911 Address 414 SW Memorial Drive L.C. FL 32025

Contractors Name James Johnston Phone 365-5999

Address 650 SW Main Blvd Lake City FL 32025

Fee Simple Owner Name & Address \_\_\_\_\_

Bonding Co. Name & Address \_\_\_\_\_

Architect/Engineer Name & Address Mark Disosway

Mortgage Lenders Name & Address \_\_\_\_\_

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

Property ID Number 06-75-16-04149-210 Estimated Cost of Construction 75,000<sup>00</sup>

Subdivision Name Wilson Springs Community Lot 10 Block 2 Unit \_\_\_\_\_ Phase 1 A

Driving Directions 475, (R) Wilson Springs Rd, (L) Wilson Springs Rd, (R) Memorial Dr, .7 miles on the Left

Number of Existing Dwellings on Property 0

Construction of SFD Total Acreage .850 Lot Size \_\_\_\_\_

Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 21' 11"

Actual Distance of Structure from Property Lines - Front 72 Side 26 Side 45 Rear 50'

Number of Stories 2 Heated Floor Area 1482 Total Floor Area 2007 Roof Pitch 8/12

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. **CODE: Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code.** Page 1 of 2 (Both Pages must be submitted together.) Revised 1-11

OK 3924

JW spoke w/ Richard 2.20.12



**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 such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

**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.

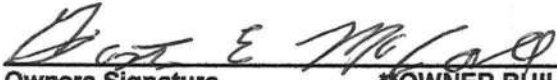
**NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE:** YOU ARE HEREBY NOTIFIED as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage 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.

(Owners Must Sign All Applications Before Permit Issuance.)



Owners Signature

**\*OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

**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.



Contractor's Signature (Permitee)

Contractor's License Number CRL 1328128  
Columbia County  
Competency Card Number \_\_\_\_\_

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 9<sup>th</sup> day of January 2012  
Personally known Carey F. Chandler or Produced Identification \_\_\_\_\_

  
State of Florida Notary Signature (For the Contractor)

SEAL:



CAREY F. CHANDLER  
MY COMMISSION # DD 866347  
EXPIRES: May 22, 2013  
Bonded Thru Budget Notary Services





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



PERMIT NO. 12-0095  
DATE PAID: 5/23/12  
FEE PAID: 210.00  
RECEIPT #: 1817764

## APPLICATION FOR:

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

APPLICANT: Gaston McCallAGENT: ROCKY FORD, A & B CONSTRUCTIONTELEPHONE: 386-497-2311MAILING ADDRESS: P.O. BOX 39 FT. WHITE, FL, 32038

Home - 755-5435  
Cell - 365-1764

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: 10 BLOCK: 2 SUB: Wilson Springs Community PH 1-A PLATTED: 10/1PROPERTY ID #: 6-75-16-04149-210 ZONING: Res. I/M OR EQUIVALENT: ☒ Y ☐ NPROPERTY SIZE: .85 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ <2000GPD ☐ >2000GPDIS SEWER AVAILABLE AS PER 381.0065, FS? ☒ Y ☐ N DISTANCE TO SEWER: — FTPROPERTY ADDRESS: 406 SW Memorial Drive, Fort White, FL, 32038DIRECTIONS TO PROPERTY: 47 South, TR on Wilson Springs Road, At stop sign, TL onWilson Springs Road, After 2<sup>nd</sup> 90 degree turn, TR on Memorial Drive, 3/10thsmiles to site on left

## 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	SF Residential	2	1482	Held for survey
2				info rec'd 3.9.12.
3				

☒ Floor/Equipment Drains ☒ Other (Specify) —SIGNATURE: Rocky D Ford DATE: 2/10/2012

DH 4015, 08/09 (Obsoletes previous editions which may not be used)  
Incorporated 64E-6.001, FAC

Page 1 of 4

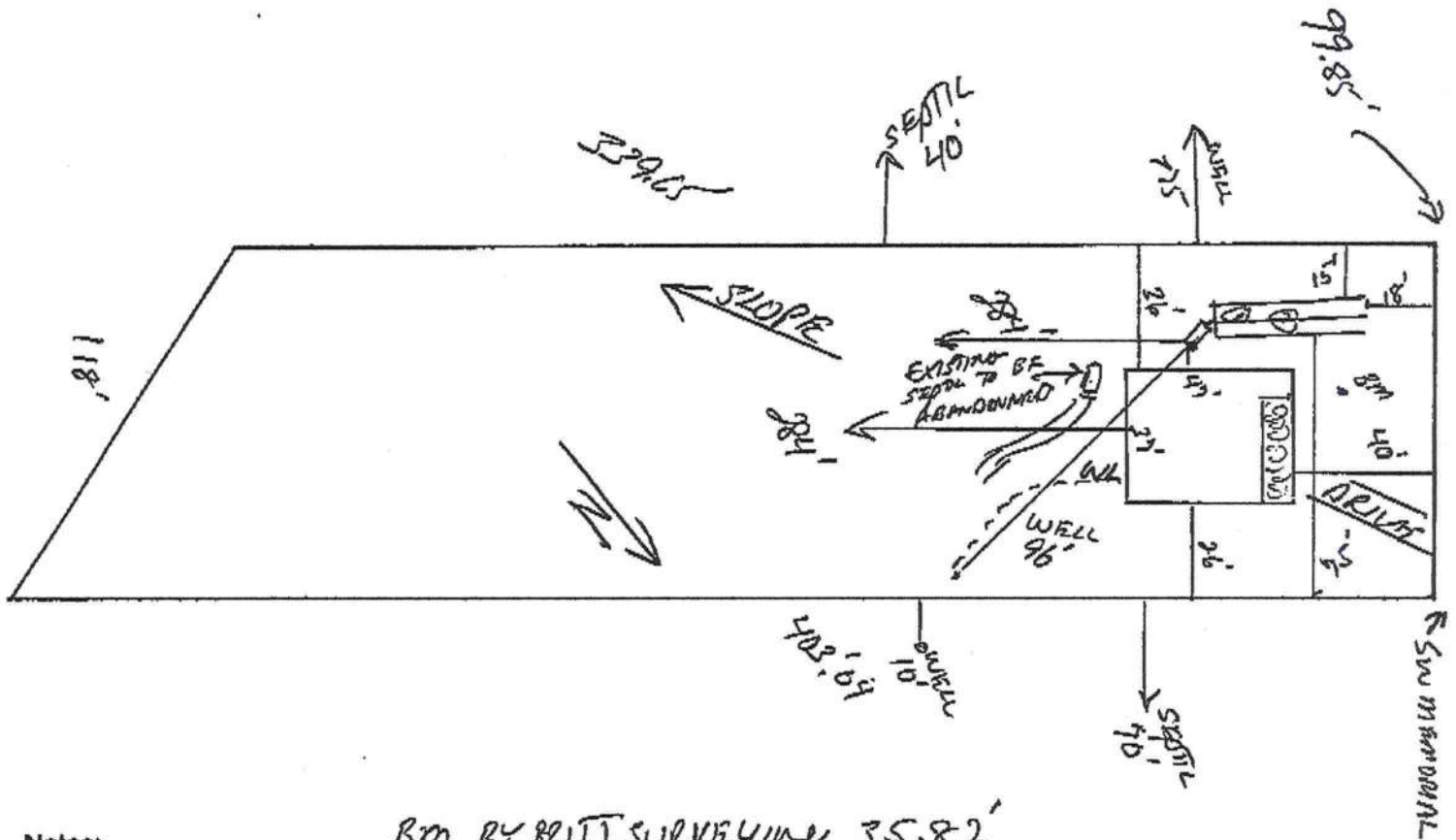
STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 12-0095

MCAN

## PART II - SITEPLAN

Scale: 1 inch = ~~40~~ <sup>50</sup> feet.



**Notes:**

Bm BY BEIT SURVEYING 35.82'

**Site Plan submitted by:**

Rocky D 7-0

MASTER CONTRACTOR

Date 3-9-12

**Plan Approved**

Not Approved

By Sally Ford Env Health Director Columbia

County Health Department

**ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT**



# COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787  
PHONE: (386) 758-1125 \* FAX: (386) 758-1365 \* Email: ron\_croft@columbiacountyfla.com

## Addressing Maintenance

To maintain the Countywide Addressing Policy you must make application for a 9-1-1 Address at the time you apply for a building permit. The established standards for assigning and posting numbers to all principal buildings, dwellings, businesses and industries are contained in Columbia County Ordinance 2001-9. The addressing system is to enable Emergency Service Agencies to locate you in an emergency, and to assist the United States Postal Service and the public in the timely and efficient provision of services to residents and businesses of Columbia County.

DATE REQUESTED: 2/2/2012 DATE ISSUED: 2/2/2012

### ENHANCED 9-1-1 ADDRESS:

414 SW MEMORIAL DR  
FORT WHITE FL 32038  
PROPERTY APPRAISER PARCEL NUMBER:  
06-7S-16-04149-210

### Remarks:

ADDRESS FOR PROPOSED NEW STRUCTURE ON PARCEL.

Address Issued By: SIGNED: / RONAL N. CROFT  
Columbia County 9-1-1 Addressing / GIS Department

**NOTICE: THIS ADDRESS WAS ISSUED BASED ON LOCATION INFORMATION RECEIVED FROM THE REQUESTER. SHOULD, AT A LATER DATE, THE LOCATION INFORMATION BE FOUND TO BE IN ERROR, THIS ADDRESS IS SUBJECT TO CHANGE.**



**Columbia County Property  
Appraiser**

DB Last Updated: 1/17/2012

**2011 Tax Year**

Parcel: 06-7S-16-04149-210

&lt;&lt; Next Lower Parcel   Next Higher Parcel &gt;&gt;

Tax Collector

Tax Estimator

Property Card

Parcel List Generator

Interactive GIS Map

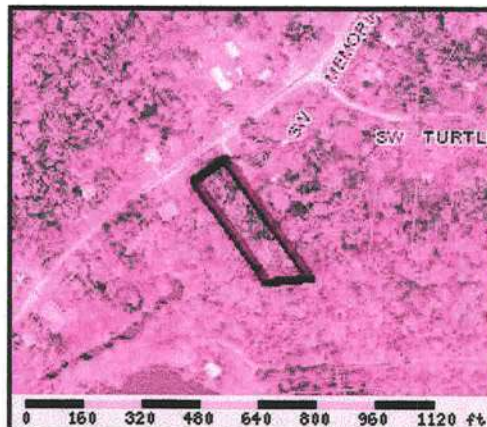
Print

Search Result: 1 of 6

Next &gt;&gt;

**Owner & Property Info**

<b>Owner's Name</b>	MCCALL GASTON & GLENDA		
<b>Mailing Address</b>	250 SE MOHAWK WAY LAKE CITY, FL 32025		
<b>Site Address</b>	406 SW MEMORIAL DR		
<b>Use Desc. (code)</b>	VACANT (000000)		
<b>Tax District</b>	3 (County)	<b>Neighborhood</b>	6716
<b>Land Area</b>	0.850 ACRES	<b>Market Area</b>	02
<b>Description</b>	NOTE: This description is not to be used as the Legal Description for this parcel in any legal transaction.  LOT 10 BLOCK 2 WILSON SPRINGS COMMUNITY PHASE 1-A. COMM NW COR OF SW1/4, RUN S 1218.72 FT, CONT S 967.53 FT TO SE R/W OF SW MEMORIAL DR, N 48 DEG E ALONG R/W 37.62 FT, N 55 DEG E STILL ALONG R/W 299.82 FT FOR POB, CONT N 55 DEG E ALONG R/W 99.85 FT, S 34 DEG E 403.04 FT, WLY 118.75 FT, N 34 DEG W 339.65 FT TO POB. ORB 922-360.		

**Property & Assessment Values**

2011 Certified Values		
Mkt Land Value	cnt: (0)	\$16,580.00
Ag Land Value	cnt: (2)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$16,580.00
Just Value		\$16,580.00
Class Value		\$0.00
Assessed Value		\$16,580.00
Exempt Value		\$0.00
Total Taxable Value	Cnty: \$16,580 Other: \$16,580   Schl: \$16,580	

**2012 Working Values**

**NOTE:**  
2012 Working Values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

[Show Working Values](#)**Sales History**[Show Similar Sales within 1/2 mile](#)

Sale Date	OR Book/Page	OR Code	Vacant / Improved	Qualified Sale	Sale RCode	Sale Price
3/8/2001	922/360	WD	V	Q		\$15,000.00

**Building Characteristics**

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

**Extra Features & Out Buildings**

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

**Land Breakdown**

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value



4962

This Instrument Prepared By:  
Abstract Trust Title LLC  
PO Box 7175  
Lake City, Florida 32055

NOTICE OF COMMENCEMENT

TO WHOM IT MAY CONCERN:

The undersigned hereby give notice that improvements will be made to certain real property and in accordance with Chapter 713, Florida Statutes, the following is provided in this Notice of Commencement:

1. Description of Property: See Exhibit "A" attached hereto and by this reference made a part thereof
  2. General Description of Improvement: Construction of Dwelling
  3. Owner Information:
    - a. Name and Address: Gaston McCall and Glenda McCall, his wife, 250 SE Mohawk Way, Lake City, FL 32025
    - b. Interest in property: Fee Simple
    - c. Name and address of fee simple title holder (if other than Owner): NONE
  4. Contractor (name and address): Hometown Homes LLC, 650 SW Main Blvd, Lake City, FL 32025
  5. Surety:
    - a. Name and Address: N/A
    - b. Amount of Bond: N/A
  6. LENDER: First Federal Bank of Florida  
4705 West US Highway 90  
PO Box 2029  
Lake City, FL 32056
  7. Persons within the State of Florida designated by Owner upon whom notices of other documents may be served as provided in Section 713.13(1)(a)7., Florida Statutes: NONE
  8. In addition to himself, Owner designates PAULA HACKER, of FIRST FEDERAL SAVINGS BANK OF FLORIDA at 4705 WEST US HIGHWAY 90 / PO BOX 2029, LAKE CITY, FL 32056, to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b) Florida Statutes.
  9. Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified).
- 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 1 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 NEED TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.
- \*Owner is used for singular or plural as context requires.

Signed, sealed and delivered in the presence

Donna Cox  
WITNESS  
Donna Cox  
WITNESS

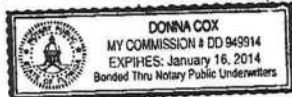
Gaston McCall  
Gaston McCall  
Glenda McCall  
Glenda McCall

STATE OF FLORIDA  
COUNTY OF COLUMBIA

Before me, personally appeared Gaston McCall and Glenda McCall, his wife, to me known to be the person(s) described in and who executed the foregoing instrument, and they acknowledged to and before me that they executed said instrument for the purpose therein expressed.

Witness my hand and official seal this 15th day of December, 2011

(SEAL)



Donna Cox  
NOTARY PUBLIC

My Commission Expires:

Verification Pursuant to Section 22.525, 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.

Gaston McCall  
Gaston McCall



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.  
DEWITT CASON, CLERK OF COURTS

Deanne Dow  
Deputy Clerk

Date: Dec 16, 2011



4962

Exhibit "A"

Block 2- Lot 10

Commence at the Northwest corner of the Southwest ¼ of Section 6, Township 7 South, Range 16 East, Columbia County, Florida and run S 00°15'08" E. along the West line of Said Section 6 a Distance of 1218.72 feet to a point on the Northerly line of Wilson Springs Phase 1, an unrecorded subdivision; thence continue S 00°15'08" E. still along the West line of Section 6, a distance of 967.53 feet to a point on the Southeasterly right-of-way line of SW Memorial Drive (a County Road); thence N 48°19'52" E. along said southeasterly right-of-way line 37.62 feet; thence N 55°28'25" E. still along said Right-of-way line 299.82 feet to the Point of Beginning; thence continue N55°28'25" E. still along said Southeasterly right-of-way line 99.85 feet; thence S 34°35'25" E. 403.04 feet; thence S 87°44'00" W. 118.75 feet; thence N 34°30'22" W. 339.65 feet to the Point of Beginning. Also know as Lot 10, Block 2, Wilson Springs Community, Phase 1-A, Plat Book 7, Pages 55/60.



## SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1202-06

CONTRACTOR

James Johnston

PHONE

365-5999

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

In Columbia County 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 permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

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

<input checked="" type="checkbox"/> ELECTRICAL 23A	Print Name <u>Michael Corns</u> License #: <u>FR 13013192</u>	Signature <u>Michael S. Corns</u> Phone #: <u>386-965-9005</u>
<input checked="" type="checkbox"/> MECHANICAL/ A/C 13	Print Name <u>Dwight Williams</u> License #: <u>CA 1816963</u>	Signature <u>Dwight Williams</u> Phone #: <u>386-754-1987</u>
<input checked="" type="checkbox"/> PLUMBING/ GAS 51b	Print Name <u>Maurice E Perkins</u> License #: <u>CEC1426278</u>	Signature <u>Maurice E Perkins</u> Phone #: <u>(386) 364-4439</u>
<input checked="" type="checkbox"/> ROOFING 48b	Print Name <u>James Johnston</u> License #: <u>CR 1328128</u>	Signature <u>James Johnston</u> Phone #: <u>365-5999</u>
SHEET METAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name _____ License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
<input checked="" type="checkbox"/> MASON	484	James Johnston	<u>James Johnston</u>
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

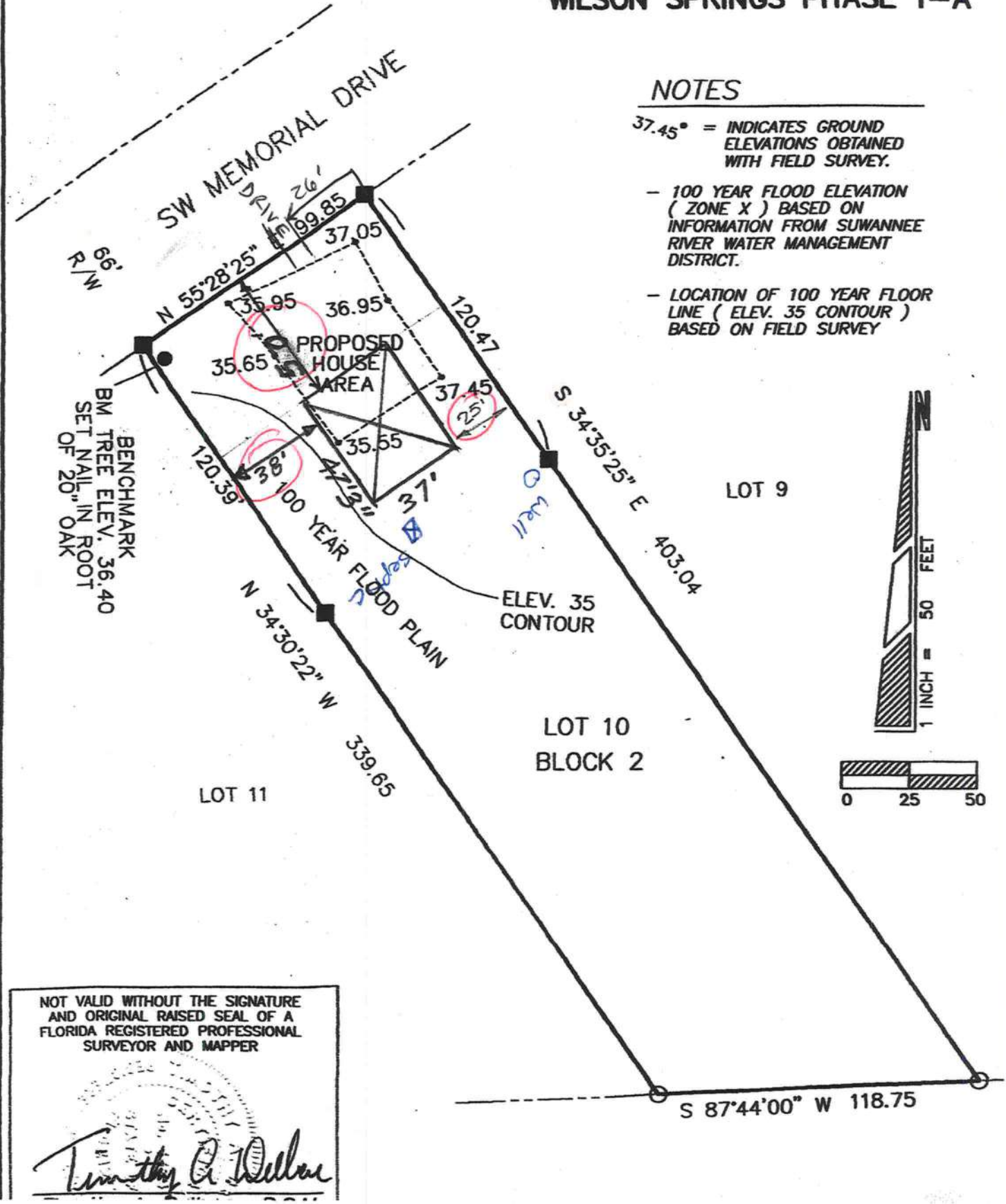
**F. S. 440.103 Building permits; Identification of minimum premium policy.**—Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Contractor Forms: Subcontractor form: 6/09

# FLOOD ZONE LOCATION LOT 10 BLOCK 2 WILSON SPRINGS PHASE 1-A

## NOTES

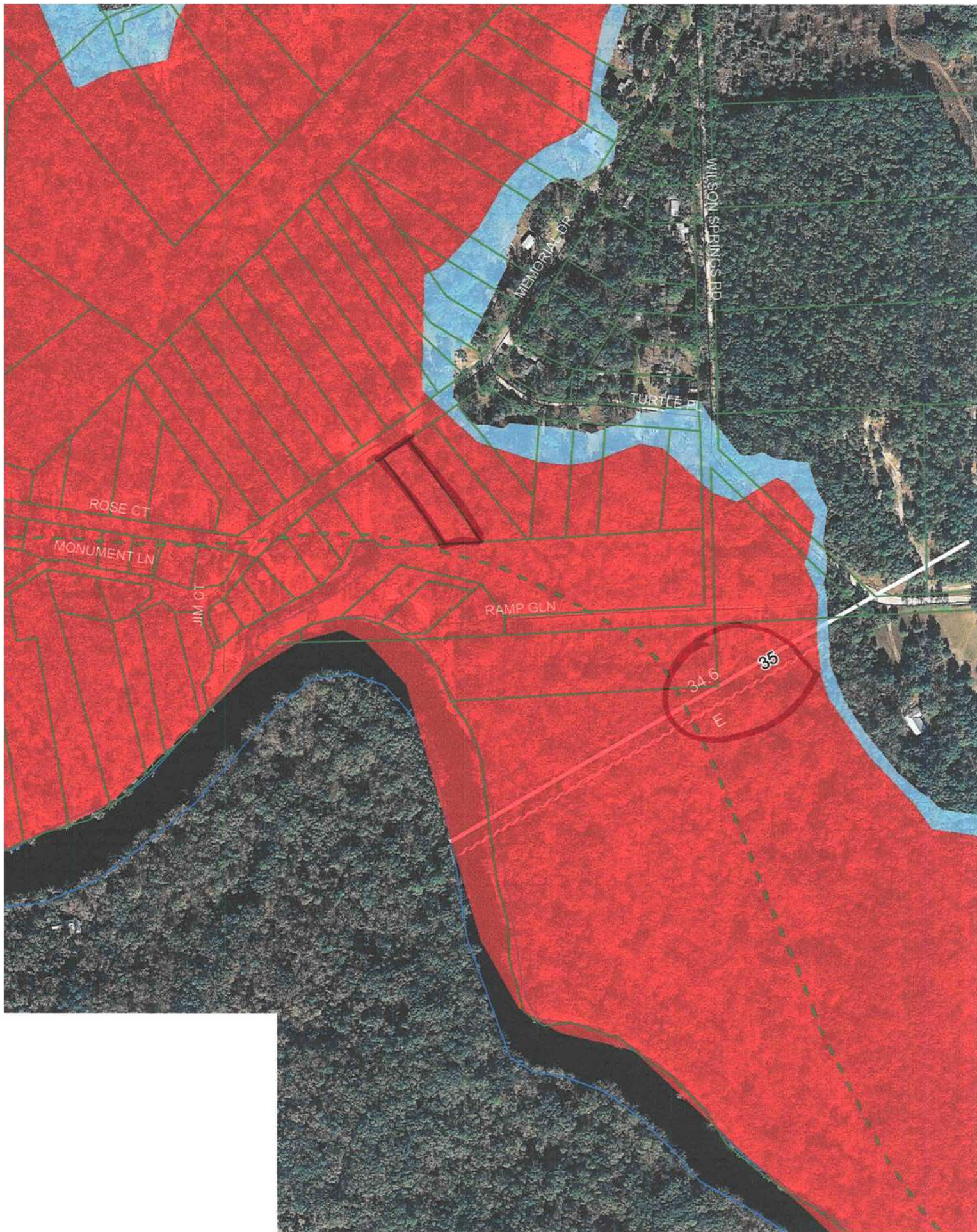
- 37.45° = INDICATES GROUND ELEVATIONS OBTAINED WITH FIELD SURVEY.
- 100 YEAR FLOOD ELEVATION ( ZONE X ) BASED ON INFORMATION FROM SUWANNEE RIVER WATER MANAGEMENT DISTRICT.
- LOCATION OF 100 YEAR FLOOR LINE ( ELEV. 35 CONTOUR ) BASED ON FIELD SURVEY



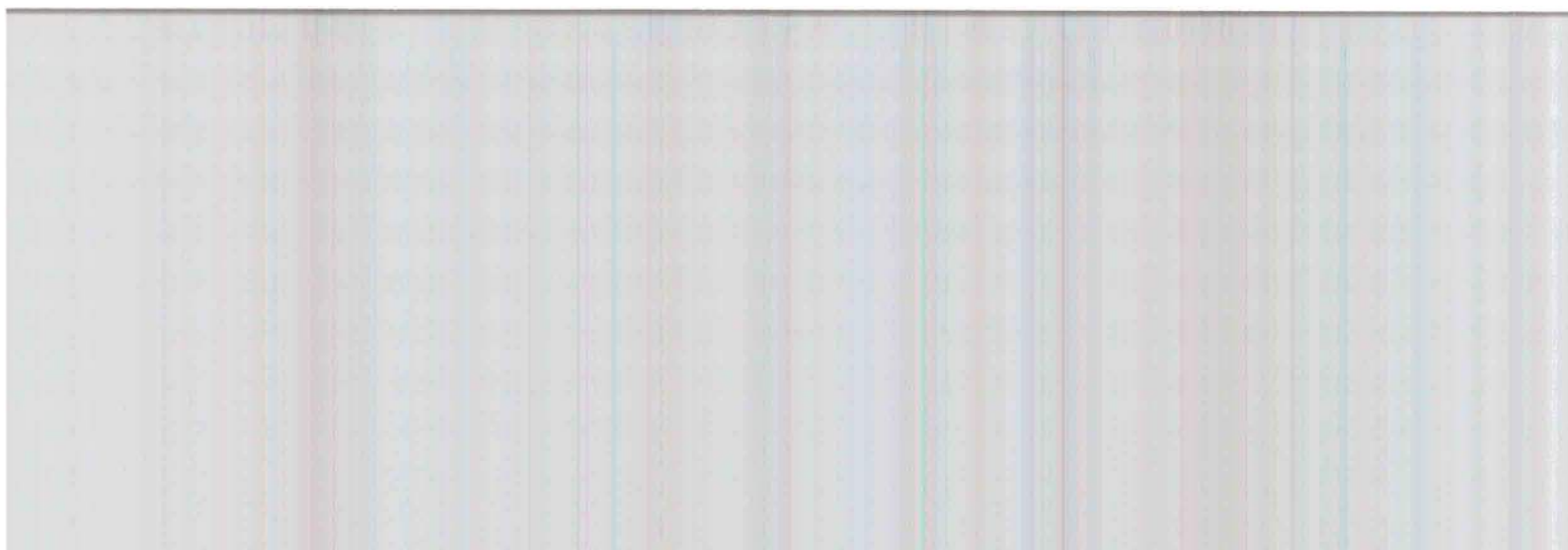
NOT VALID WITHOUT THE SIGNATURE  
 AND ORIGINAL RAISED SEAL OF A  
 FLORIDA REGISTERED PROFESSIONAL  
 SURVEYOR AND MAPPER

*Timothy A. Dillane*





1202-06







Britt Surveying and Mapping, LLC  
2086 SW Main Blvd Ste 112  
Lake City, FL 32025

29989

OK  
BLK  
2 Oct. 2012

L-22324

09/26/12

Re: Gaston & Glenda McCall

Lot 10 in Block 2 of Wilson Springs Community Phase 1-A

To Whom It May Concern:

The finished floor on Lot 10 in Block 2 of Wilson Springs Community Phase 1-A, is found to be 38.86 feet. The FIRM shows the 100-year elevation to be 34.50 feet. The lowest adjacent grade is 34.8 feet and the highest adjacent grade is 36.4 feet. All elevations are shown in NAVD 88 datum.

Sincerely,

L. Scott Britt  
PLS 5757



U.S. DEPARTMENT OF HOMELAND SECURITY  
Federal Emergency Management Agency  
National Flood Insurance Program

**ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008  
Expires March 31, 2012

**SECTION A - PROPERTY INFORMATION**

For Insurance Company Use:

A1. Building Owner's Name Gaston & Glenda McCall

Policy Number

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
406 SW Memorial Drive

Company NAIC Number

City Ft. White State FL ZIP Code 32038A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
Lot 10 Block 2 Wilson Springs Community Phase 1-A / 06-7S-16-04149-210A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) ResidentialHorizontal Datum: ☐ NAD 1927 ☒ NAD 1983A5. Latitude/Longitude: Lat. 29°54.070 Long. 82°45.478

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 5

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) 906 sq ft  
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 2  
c) Total net area of flood openings in A8.b 84 sq in  
d) Engineered flood openings? ☐ Yes ☒ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft  
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade N/A  
c) Total net area of flood openings in A9.b N/A sq in  
d) Engineered flood openings? ☐ Yes ☒ No

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**B1. NFIP Community Name & Community Number  
Columbia 120070B2. County Name  
ColumbiaB3. State  
FLB4. Map/Panel Number  
12023C0469CB5. Suffix  
CB6. FIRM Index  
Date  
Feb 4 2009B7. FIRM Panel  
Effective/Revised Date  
Feb 4 2009B8. Flood  
Zone(s)  
AEB9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
34.5

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.

☐ FIS Profile ☐ FIRM ☐ Community Determined ☒ Other (Describe) SRWMD Flood ReportB11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other (Describe) \_\_\_\_\_B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ NoDesignation Date N/A ☐ CBRS ☐ OPA**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**C1. Building elevations are based on: ☐ Construction Drawings\* ☒ Building Under Construction\* ☐ Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.

Benchmark Utilized See Comments/Vertical Datum NAVD 88Conversion/Comments See Attached Sheet

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 38.86 ☒ feet ☐ meters (Puerto Rico only)  
b) Top of the next higher floor N/A ☐ feet ☐ meters (Puerto Rico only)  
c) Bottom of the lowest horizontal structural member (V Zones only) N/A ☐ feet ☐ meters (Puerto Rico only)  
d) Attached garage (top of slab) N/A ☐ feet ☐ meters (Puerto Rico only)  
e) Lowest elevation of machinery or equipment servicing the building N/A ☐ feet ☐ meters (Puerto Rico only)  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 34.9 ☒ feet ☐ meters (Puerto Rico only)  
g) Highest adjacent (finished) grade next to building (HAG) 36.3 ☒ feet ☐ meters (Puerto Rico only)  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support N/A ☐ feet ☐ meters (Puerto Rico only)

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☒ Check here if comments are provided on back of form.Were latitude and longitude in Section A provided by a licensed land surveyor? ☒ Yes ☐ NoCertifier's Name L. Scott BrittLicense Number PSM 5757Title Chief SurveyorCompany Name Britt Surveying & Associates, Inc.Address 830 W. Duval St.City Lake CityState FLZIP Code 32055Signature [Signature]Date 06/22/12Telephone 386-752-7163



<b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>	<b>For Insurance Company Use:</b>
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 406 SW Memorial Drive	Policy Number
City Ft. WhiteState FL ZIP Code 32038	Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments L-22219

See Attached comments sheet

Signature L. Scott Britt

Date 06/22/12

☒ Check here if attachments**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.b) Top of bottom floor (including basement, crawlspace, or enclosure) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the LAG.E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation G2.b in the diagrams) of the building is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.E3. Attached garage (top of slab) is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.E4. Top of platform of machinery and/or equipment servicing the building is \_\_\_\_\_ ☐ feet ☐ meters ☐ above or ☐ below the HAG.E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name

Address	City	State	ZIP Code
Signature	Date	Telephone	
Comments			

☐ Check here if attachments**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.G3. ☐ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
-------------------	------------------------	---

G7. This permit has been issued for: ☐ New Construction ☐ Substantial ImprovementG8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_G10. Community's design flood elevation \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

Local Official's Name	Title
Community Name	Telephone
Signature	Date
Comments	

☐ Check here if attachments

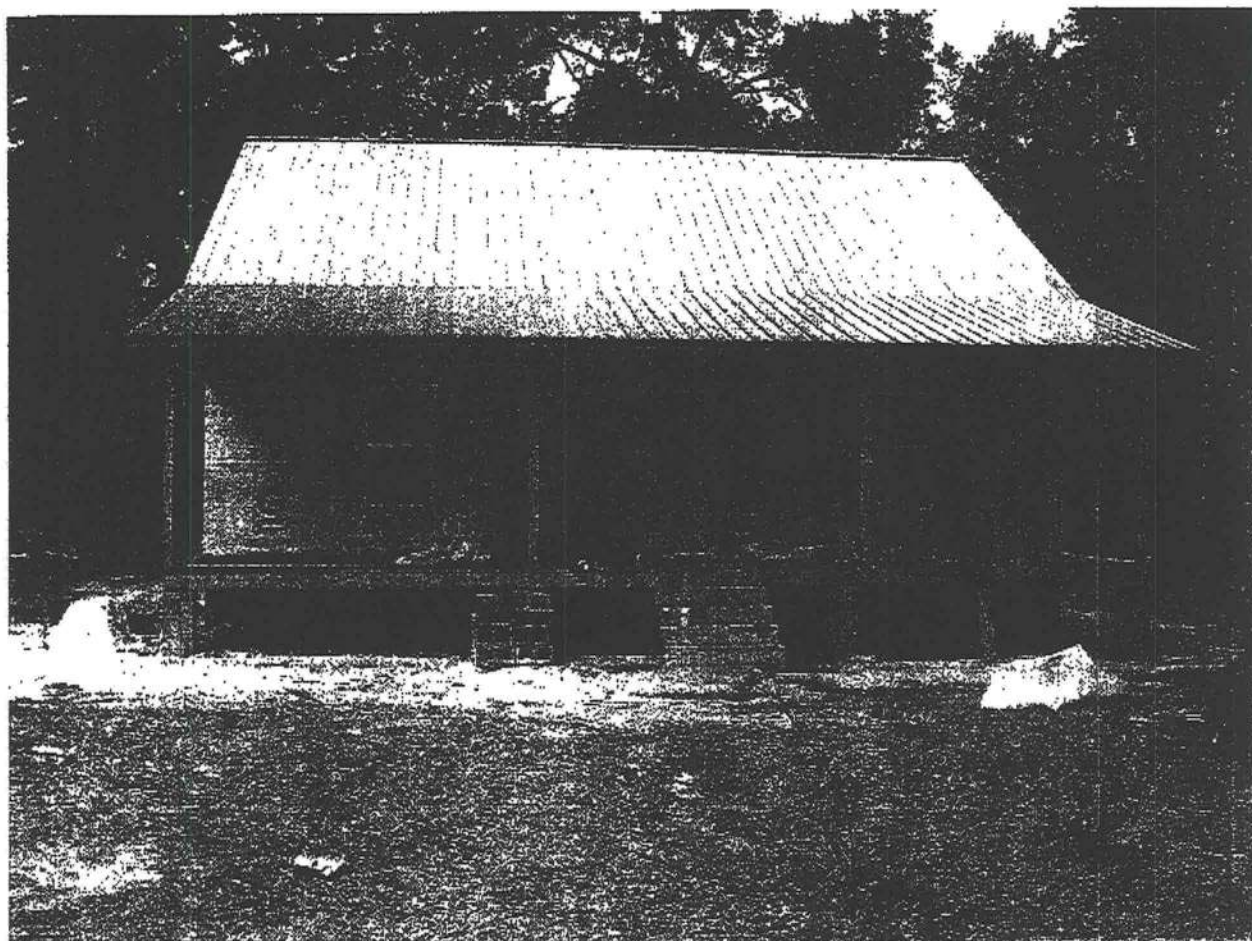


## Building Photographs

See Instructions for Item A6.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 406 SW Memorial Drive	For Insurance Company Use:
City Ft. White State FL ZIP Code 32038	Policy Number
Company NAIC Number	
If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.	

Front View

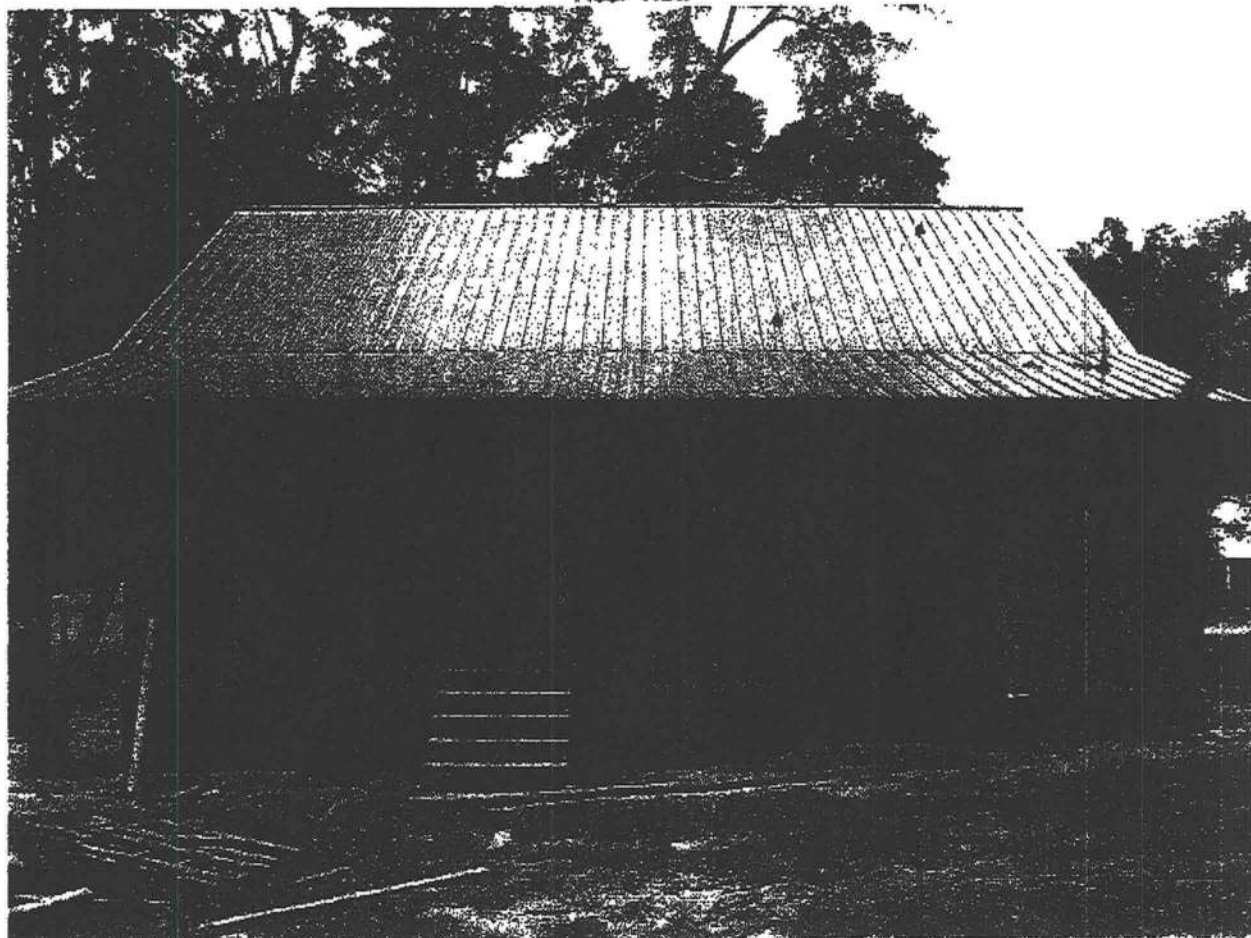


**Building Photographs**

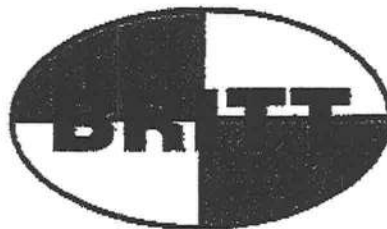
Continuation Page

Building Street Address (including Apt, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 408 SW Memorial Drive	For Insurance Company Use:
City Ft. White State FL ZIP Code 32038	Policy Number
	Company NAIC Number
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."	

Rear View





**BRITT SURVEYING*****Land Surveyors and Mappers*****LAKE CITY • VENICE • SARASOTA****Section A**

A1 – A4 No additional comment  
A5 Hand Held GPS coordinate at the center of building  
A6 No additional comment  
A7 One story frame residence on piers  
A8 a – c No additional comment  
A9 No attached garage.

**Section B**

B1 – B7 No additional comment  
B8 This building appears to be in Zone AE as per the flood report.  
B9 – B10 The BFE as shown hereon is based on the Suwannee River Water Management District flood report.  
B11 – B12 No additional comment

**Section C**

C1 No additional comment  
C2 There is a benchmark set as a spike in a oak tree whose elevation is 35.81 feet NAVD 88 datum.  
C2 a Main living floor  
C2 b No additional comment  
C2 c No additional comment  
C2 d No attached garage  
C2 e -h No additional comment

**Section D**

No additional comment

**Section E**

No additional comment

**Section F**

No additional comment

**Section G**

No additional comment

**Photographs**

The attached photographs were taken by Britt Surveying & Associates, Inc.





# Suwannee River Water Management District Flood Information Report

## LOCATION

Date: 06-22-2012

Parcel: 06-79-16-04149-210

County: Columbia

STR: S006 T07 R16

Columbia Flood Hazard Areas Status: Effective:  
02/04/2009

## FLOOD INFORMATION

FIRM Panel(s): 12023C0469C, 12041C0044  
D

Parcel in Special Flood  
Hazard Area? (SFHA): Yes  
Flood Zone(s): AE

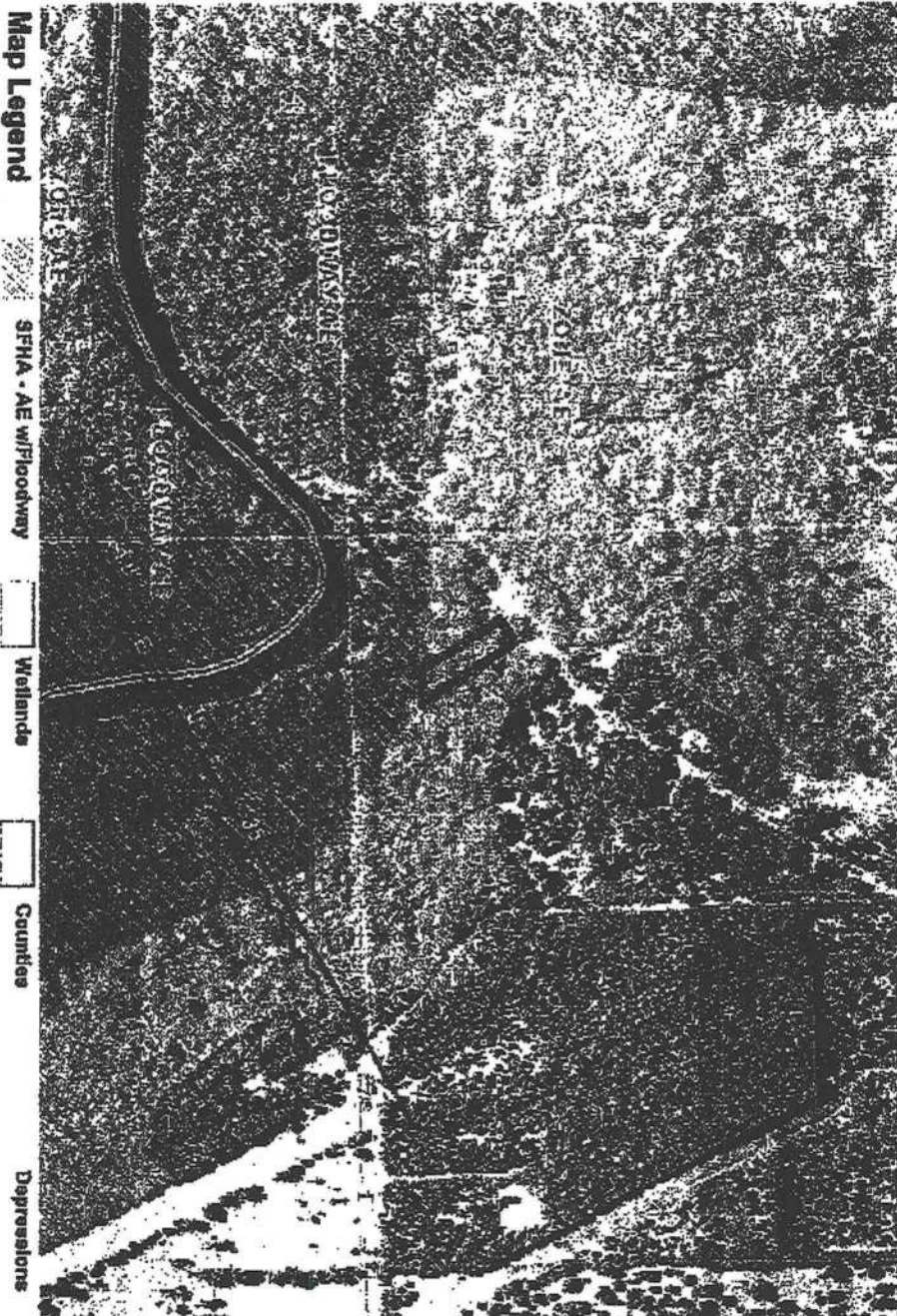
1% Annual Chance  
Flood Elev (BFE): 34.5 (feet)

Floodway: No

10% Annual  
Chance Flood Elev: 28.5 (feet)

50% Annual  
Chance Flood Elev: 23.8 (feet)

Note: Elevations are based on NAVD88



## Map Legend

	SFHA - AE w/Floodway		Wetlands		Counties		Depressions
	SFHA - Zones AE, AH, AO		FIRM Panel		SRWMD		BFE
	SFHA - Zone A		State Lands		Parcels		Cross Sections

The Federal Emergency Management Agency (FEMA) maintains information about map features, such as street locations and names, in or near designated flood hazard areas. The information herein represents the best available data as of the effective date shown. The applicable Flood Insurance Study and a Digital Flood Insurance Rate Map is available online (<http://www.srwmd-flood-report.com>). To obtain more detailed information in areas where Base Flood Elevations (BFEs) and/or floodways have been determined, users are encouraged to also consult the FEMA Map Service Center at 1-800-358-9616 (<http://www.msc.fema.gov>) for information on available products associated with this FIRM panel. Available products from the Map Service Center may include previously issued Letters of Map Change. Requests to revise flood information in or near designated flood hazard areas may be provided to FEMA during the community review period on preliminary maps, or through the Letter of Map Change process for effective maps.



**Base Flood Elevation (BFE)**

The elevation shown on the Flood Insurance Rate Map for Zones AE, AH, A1-A30, AR, AO, V1-V30, and VE that indicates the water surface elevation resulting from a flood that has a one percent chance of equaling or exceeding that level in any given year.

**A**

Areas with a 1% annual chance of flooding and a 26% chance of flooding over the life of a 30-year mortgage. Because detailed analyses are not performed for such areas, no depths or base flood elevations are shown within these zones.

**AE, A1-A30**

Areas with a 1% annual chance of flooding and a 26% chance of flooding over the life of a 30-year mortgage. In most instances, base flood elevations derived from detailed analyses are shown at selected intervals within these zones.

**AH**

Areas with a 1% annual chance of flooding and a 26% chance of flooding over the life of a 30-year mortgage. Usually areas of ponding with flood depths of 1 to 3 feet. Base Flood Elevations are determined.

**AO**

Areas with a 1% annual chance of flooding and a 26% chance of flooding over the life of a 30-year mortgage. Usually areas of sheet flow on sloping terrain with flood depths of 1 to 3 feet. Base Flood Elevations are determined.

**Supplemental Information:**

10%-chance flood elevations (10-year flood-risk elevations) and 50%-chance flood elevations (2-year flood-risk elevations), are calculated during detailed flooding studies but are not shown on FEMA Digital Flood Insurance Rate Maps (FIRMs). They have been provided as supplemental information in the Flood Information section of this report.

**AE FW (FLOODWAYS)**

The channel of a river or other watercourse and the adjacent land areas that must be reserved in order to discharge the base flood (1% annual chance flood event). The floodway must be kept open so that flood water can proceed downstream and not be obstructed or diverted onto other properties.

Please note, if you develop within the regulatory floodway, you will need to contact your Local Government and the Suwannee River Water Management District prior to commencing with the activity. Please contact the District at 800.226.1066.

**X 0.2 PCT (X Shaded, 0.2 PCT ANNUAL CHANCE FLOOD HAZARD)**

Same as Zone X; however, detailed studies have been performed, and the area has been determined to be within the 0.2 percent annual chance floodplain (also known as the 500-year flood zone). Insurance purchase is not required in this zone but is available at a reduced rate and is recommended.

**X**

All areas outside the 1-percent annual chance floodplain are Zone X. This includes areas of 1% annual chance sheet flow flooding where average depths are less than 1 foot, areas of 1% annual chance stream flooding where the contributing drainage area is less than 1 square mile, or areas protected from the 1% annual chance flood by levees. No Base Flood Elevations or depths are shown within this zone. Insurance purchase is not required in these zones.

**FEMA:**

<http://www.fema.gov>

**SRWMD:**

<http://www.srwmd.state.fl.us>

**SRWMD**

9225 County Road 49  
Live Oak, FL 32080

(386) 362-1001

Toll Free:  
(800) 226-1066



FORM 600A-08		FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION		NORTH 1 2 3	
Alternate Residential Points System Method					
PROJECT NAME: AND ADDRESS:		1201006		BUILDER: Hometown Homes	
		PERMITTING OFFICE: Columbia County		CLIMATE ZONE: 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/>	
OWNER: Mcall		PERMIT NO.: 00029989		JURISDICTION NO.: 221 5000	

1. New construction or addition
2. Single-family detached or Multiple-family attached
3. If Multiple-family—No. of units covered by this submission
4. Is this a worst case? (yes/no)
5. Conditioned floor area (sq. ft.)
6. Predominant eave overhang (ft.)
7. Glass type<sup>1</sup> and area: (Label required by 13-104.4.5 if not default)
- a. U-factor: (or Single- or Double-Pane DEFAULT)
- b. SHGC: (or Clear or Tint DEFAULT)
8. Floor type and insulation:
- a. Slab-on-grade (R-value + perimeter)
- b. Wood, raised (R-value + sq. ft.)
- c. Concrete, raised (R-value)
9. Net wall type, area and insulation:
- a. Exterior:
1. Concrete block (Insulation R-value)
2. Wood frame (Insulation R-value)
3. Steel frame (Insulation R-value)
4. Log (Insulation R-value)
5. Other: \_\_\_\_\_
- b. Adjacent:
1. Concrete block (Insulation R-value)
2. Wood frame (Insulation R-value)
3. Steel frame (Insulation R-value)
4. Log (Insulation R-value)
10. Ceiling type, area and insulation:
- a. Under attic (Insulation R-value)
- b. Single assembly (Insulation R-value)
- c. Radiant barrier, IRCC or white roof installed?
11. Air distribution system:
- a. Ducts (Insulation + Location)
- b. Air Handler (Location)
12. Cooling system:
- (Types: central-split, central-single pkg., room unit, PTAC, gas, none)
13. Heating system:
- (Types: heat pump, elec. strip, nat. gas, LP gas, gas h.p., room or PTAC, none)
14. Hot water system:
- (Types: elec., natural gas, solar, LP gas, none)
15. Hot water credits
- a. Heat Recovery (HR)
- b. Dedicated Heat Pump (DHP)
- c. Solar
16. HVAC Credits
- (Use: CF-ceiling fan, CV-cross vent, PT-programmable thermostat, HF-whole house fan, MZ-Multizone)
17. COMPLIANCE STATUS: (PASS if As-Built Pts. are less than Base Pts.)
- a. Total As-Built points
- b. Total Base points

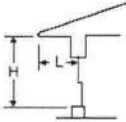


Please Type		CK
1. New		
2. single		
3.		
4. no		
5. 1472	sq. ft.	
6. 1.5	ft.	
Description Area		
7a. double default	212.4	sq. ft.
7b. tint default		sq. ft.
8a. R =		l. ft.
8b. R = 19	1230	sq. ft.
8c. R =		sq. ft.
9a-1 R =		sq. ft.
9a-2 R = 13	1647.6	sq. ft.
9a-3 R =		sq. ft.
9a-4 R =		sq. ft.
9b-1 R =		sq. ft.
9b-2 R =		sq. ft.
9b-3 R =		sq. ft.
9b-4 R =		sq. ft.
10a.		sq. ft.
10b. R=30	1476	sq. ft.
10c.		
11a. R = 6	attic	(cond./uncond.)
11b. R =	int	(cond./uncond.)
12a. Type:	Central-split	
12b. SEER/EER/COP:	13	
12c. Capacity:	36 kBtu/hr	
13a. Type:	Heat-pump	
13b. HSPF/COP/AFUE:	7.80	
13c. Capacity:	36 kBtu/hr	
14a. Type:	elec	
14b. EF:	.94	
15a.		
15b.		
15c.		
16.	PT	
17. PASS		
17a. 18988	17b. 20433	

I hereby certify that the plans and specifications covered by the calculation are in compliance with the Florida Energy Code.		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.	
PREPARED BY: Evan Beamsley	DATE: 2012-1-20		
I hereby certify that this building is in compliance with the Florida Energy Code:		BUILDING OFFICIAL: _____	
OWNER AGENT: _____	DATE: 1-24-12	DATE: _____	

<sup>1</sup> Predominant glass type. For actual glass type and areas, see summer and winter glass output on Pages 2 and 4.



GLASS	ORIENTATION	OVERHANG LENGTH OH (FEET)	GLASS AREA (SQ. FT)	SINGLE-PANE SUMMER POINT MULTIPLIER		DUBLE-PANE SUMMER POINT MULTIPLIER		SUMMER OH FACTOR (from 6A-1)	AS-BUILT GLASS SUMMER PTS
				CLEAR	TINT (2)	CLEAR	TINT (2)		
 <p>OVERHANG RATIO = <math>\frac{OH \text{ LENGTH}}{OH \text{ HEIGHT}}</math></p>	N	9.5	15				14.84	0.681	152
	N	9.5	9				14.84	0.634	85
	N	9.5	26.7				14.84	0.736	292
	E	1.5	26.7				33.89	0.994	899
	E	1.5	30				33.89	1	1017
	E	1.5	15				33.89	0.994	505
	S	9.5	30				28.73	0.493	425
	W	1.5	30				30.93	1	928
	E	1.5	15				33.89	0.994	505
	W	1.5	15				30.93	0.994	461
		0	0				0		0
		0	0				0		0
		0	0				0		0
		0	0				0		0
		0	0				0		0
		0	0				0		0
		0	0				0		0
		0	0				0		0
		0	0				0		0
		0	0				0		0
		0	0				0		0

GLASS	0.18	COND FLOOR AREA	WEIGHTED GLASS MULTIPLIER	BASE GLASS SUBTOTAL	AS-BUILT GLASS SUBTOTAL
	0.18	1472	18.59	4926	5269

	COMPONENT DESCRIPTION	AREA	BASE SUMMER POINT MULT.	BASE SUM POINTS	COMPONENT DESCRIPTION	AREA	SUMMER POINT MULT. (6A-2 - 6A-6)	AS BUILT SUMMER POINTS
WALL	EXTERIOR	1648	1.5	2472	EXT FRAME R13	1648	1.5	2472
	ADJACENT	0	0.6	0	ADJ FRAME R13	0	0.6	0
						0		0
						0		0

DOORS	EXTERIOR	70	6.1	427	EXT INSULATED	70	4.1	287
	ADJACENT	0	2.4	0	ADJ INSULATED	0	1.6	0
						0		0

CEILING	UNDER ATTIC OR SINGLE ASSEMBLY	1230	1.73	2128	ATTIC R30	1476	1.73	2553
					RBS/IECC/white roof (3)	0	1.03	0
	BASE CEILING AREA EQUALS FLOOR AREA DIRECTLY UNDER CEILING. AS-BUILT CEILING AREA EQUALS ACTUAL CEILING SQUARE FOOTAGE							

FLOOR	SLAB (PERIMETER)	0	-41.2	0	SLAB	0	-41.2	0
	RAISED (AREA)	1230	-0.98	-1205	RAISED R19	1230	-1.5	-1845
	FOR SLAB-ON-GRADE USE PERIMETER LENGTH AROUND CONDITIONED FLOOR, FOR RAISED FLOORS USE AREA OVER UNCONDITIONED SPACE							

INFILTRATION & INTERNAL GAINS	1472	10.21	15029		1472	10.21	15029
USE TOTAL FLOOR AREA OF CONDITIONED SPACE							

TOTAL COMPONENT BASE SUMMER POINTS			23776	TOTAL COMPONENT AS-BUILT SUMMER POINTS			23765
------------------------------------	--	--	-------	--	--	--	-------

COOLING SYSTEM	BASE COOLING SYSTEM MULTIPLIER	TOTAL BASE SUMMER POINTS	BASE COOLING POINTS	TOTAL AS-BUILT SUM. PTS.	AS-BUILT DM (6A-8)	AS-BUILT DSM (6A-20)	AS-BUILT AHU (6A-7)	AS-BUILT CMS (6A-9)	AS-BUILT CCM (6A-19)	AS-BUILT COOLING POINTS
	0.325	23776	7727	23765	1.09	0.95	0.91	0.26	0.95	5531

HOT WATER SYSTEM	NUMBER OF BEDROOMS	BASE HOT WATER MULTIPLIER	BASE HOT WATER POINTS	AS-BUILT HOT WATER SYSTEM DESCRIPTION	NUMBER OF BED-ROOMS	AS-BUILT HWM (6A-23)	AS-BUILT HWCM (6A-23)	AS-BUILT HOT WATER POINTS
	3	2635	7905	elec .94	3	2571	1	7713

(1) H = HORIZONTAL GLASS (SKYLIGHTS)	(2) FOR GLASS WITH KNOW SHGC, SEE SEC. 2.1.1 OF APPENDIX G-C of the FBC, Residential. TINT MULTIPLIERS MAY BE USED FOR GLASS WITH SOLAR SCREENS, FILM, OR TINT	(3) MUST MEET CRITERIA OF APPENDIX G-C4.2.1.5 of the FBC, Residential.
--------------------------------------	--	--



6A-1 SUMMER OVERHANG FACTORS (SOF) FOR SINGLE-AND DOUBLE-PANE GLASS

SELECT BY OR	OH Ratio	.00-.11	.12-.17	.18-.26	.27-.35	.36-.46	.47-.57	.58-.70	.71-.83	.84-1.18	1.19-1.72	1.73-2.73	2.74 & up
	North	1.00	0.993	0.971	0.930	0.888	0.842	0.803	0.766	0.736	0.681	0.634	0.593
	Northeast	1.00	0.996	0.967	0.907	0.845	0.775	0.717	0.662	0.619	0.545	0.487	0.441
	East	1.00	0.994	0.963	0.898	0.827	0.745	0.675	0.609	0.558	0.470	0.405	0.357
	Southeast	1.00	0.998	0.952	0.864	0.777	0.689	0.623	0.566	0.525	0.459	0.413	0.379
	South	1.00	0.989	0.931	0.835	0.751	0.675	0.620	0.575	0.543	0.493	0.458	0.432
	Southwest	1.00	0.998	0.953	0.866	0.779	0.691	0.623	0.565	0.522	0.453	0.404	0.368
	West	1.00	0.994	0.963	0.899	0.828	0.748	0.681	0.617	0.569	0.485	0.422	0.375
	Northwest	1.00	0.996	0.968	0.913	0.858	0.797	0.748	0.702	0.667	0.605	0.556	0.516
	OH Length	0.0'	1.0'	1.5'	2.0'	3.0'	3.5'	4.5'	5.5'	6.5'	9.5'	14.0'	20.0'

6A-2 WALL SUMMER POINT MULTIPLIERS (SPM)

FRAME					CONCRETE BLOCK (NORMAL WT)				FACE BRICK				LOG		
					INTERIOR INSULATION		EXT. INSUL.		R-VALUE	WOOD FR	R-VALUE	BLOCK			
R-VALUE	WOOD		STEEL		R-VALUE	EXT	ADJ	EXT	0-6.9	2.4	0-2.9	1.0	R-VALUE	EXT	8 INCH
	EXT	ADJ	EXT	ADJ											
0-6.9	5.5	2.2	7.6	2.8	0-2.9	2.2	1.1	2.2	7-10.9	.6	3-6.9	.6	0-2.9	1.5	1.0
7-10.9	2.1	.8	3.5	1.3	3-4.9	1.3	.8	.8	11-18.9	.4	7-9.9	.4	3-6.9	1.0	.7
11-12.9	1.7	.7	2.7	1.0	5-6.9	1.0	.7	.5	19-25.9	.2	10 & UP	.2	7 & UP	.8	.6
13-18.9	1.5	.6	2.5	0.9	7-10.9	.7	.5	.3	26 & UP	.1					
19-25.9	.9	.4	2.2	0.8	11-18.9	.4	.4	0							
26 & UP	.6	.2	1.2	0.4	19-25.9	.2	.2								
					26 & UP	.1	.1								

6A-3 DOOR SUMMER POINT MULTIPLIERS (SPM)

DOOR TYPE	EXTERIOR	ADJACENT
WOOD	6.1	2.4
INSULATED	4.1	1.6

6A-4 CEILING SUMMER POINT MULTIPLIERS (SPM)

UNDER ATTIC		SINGLE ASSEMBLY		CONCRETE DECK ROOF		
R-VALUE	SPM	R-VALUE	SPM	CEILING TYPE		
19-21.9	2.34	10-10.9	8.49	R-VALUE	EXPOSED	DROPPED
22-25.9	2.11	11-12.9	7.97	10-13.9	9.13	8.47
26-29.9	1.89	13-18.9	7.14	14-20.9	6.80	6.45
30-37.9	1.73	19-25.9	5.64	21 & UP	4.92	4.63
38 & UP	1.52	26-29.9	4.75			
RBS Credit	0.700	30 & UP	4.40			
IRCC Credit	0.849					
White Roof Credit	0.550					

6A-5 FLOOR SUMMER POINT MULTIPLIERS (SPM)

SLAB-ON-GRADE EDGE INSULATION		RAISED CONCRETE		RAISED WOOD			
R-VALUE	SPM	R-VALUE	SPM	POST OR PIER CONSTRUCTION	STEM WALL w/UNDER FLOOR INSULATION	ADJACENT	
				SPM	SPM	SPM	
0-2.9	-41.2	0-2.9	-.8	0-6.9	2.80	-4.7	2.2
3-4.9	-37.2	3-4.9	-1.3	7-10.9	1.34	-2.3	.8
5-6.9	-36.2	5-6.9	-1.3	11-18.9	1.06	-1.9	.7
7 & UP	-35.7	7 & UP	-1.3	19 & UP	.77	-1.5	.4

6A-6 INFILTRATION & INTERNAL GAINS (SPM)

Air Infiltration	3.44
Internal Gains	+6.77
Infiltration/Internal Gains (Combined)	10.21

6A-7 AIR HANDLER MULTIPLIERS (SPM)

Located in garage	1.00
Located in conditioned area	0.91
Located on exterior of building	1.02
Located in attic	1.11

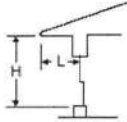
6A-8 DUCT MULTIPLIERS (DM)

SUPPLY DUCTS IN:	DUCT R-VALUE	RETURN DUCTS IN:				
		Unconditioned space	Attic/ RBS	Attic/ IRCC	Attic/ Cool roof	Conditioned space
Unconditioned Space	4.2	1.118	1.111	1.112	1.089	1.107
	6.0	1.090	1.084	1.085	1.066	1.081
	8.0	1.071	1.066	1.067	1.051	1.064
Attic/Radiant Barrier (RBS)	4.2	1.072	1.066	—	—	1.061
	6.0	1.056	1.051	—	—	1.047
	8.0	1.045	1.041	—	—	1.037
Attic/Interior Radiation Control Coatings (IRCC)	4.2	1.099	—	1.092	—	1.084
	6.0	1.076	—	1.071	—	1.065
	8.0	1.061	—	1.057	—	1.052
Attic/Cool Roof	4.2	1.068	—	—	1.096	1.057
	6.0	1.051	—	—	1.071	1.043
	8.0	1.040	—	—	1.055	1.034
Conditioned Space	4.2	1.006	1.005	1.007	1.008	1.000
	6.0	1.005	1.004	1.005	1.006	1.000
	8.0	1.004	1.003	1.004	1.005	1.000

6A-9 COOLING SYSTEM MULTIPLIERS (CSM)

SYSTEM TYPE		COOLING SYSTEM MULTIPLIERS (CSM)											
Central Units (SEER)	Rating		7.5-7.9	8.0-8.4	8.5-8.8	8.9-9.4	9.5-9.9	10.0-10.4	10.5-10.9	11.0-11.4	11.5-11.9	12.0-12.4	
	CSM		.45	.43	.40	.38	.36	.34	.32	.31	.30	.28	
PTAC & Room Units (EER)	Rating	12.5-12.9	13.0-13.4	13.5-13.9	14.0-14.4	14.5-14.9	15.0-15.4	15.5-15.9	16.0-16.4	16.5-16.9	17.0-17.4	17.5 & UP	
	CSM	.27	.26	.25	.24	.24	.23	.22	.21	.21	.20	.19	



GLASS	ORIENTATION	OVERHANG LENGTH OH (FEET)	GLASS AREA (SQ. FT)	SINGLE-PANE WINTER POINT MULTIPLIER		DUBLE-PANE WINTER POINT MULTIPLIER		WINTER OH FACTOR (from 6A-10)	AS-BUILT GLASS WINTER PTS
				CLEAR	TINT (2)	CLEAR	TINT (2)		
 OVERHANG RATIO = OH LENGTH / OH HEIGHT	N	9.5	15				25.37	1.021	389
	N	9.5	9				25.37	1.024	234
	N	9.5	26.7				25.37	1.016	688
	E	1.5	26.7				20.51	1	548
	E	1.5	30				20.51	1	615
	E	1.5	15				20.51	1.007	310
	S	9.5	30				15.87	3.042	1448
	W	1.5	30				22.15	1	665
	E	1.5	15				20.51	1.007	310
	W	1.5	15				22.15	1.002	333
	0	0	0				0		0
	0	0	0				0		0
	0	0	0				0		0
		0	0						0
		0	0						0
		0	0						0
		0	0						0
		0	0						0
		0	0						0
		0	0						0
		0	0						0

GLASS	0.18	COND FLOOR AREA	WEIGHTED GLASS MULTIPLIER	BASE GLASS SUBTOTAL	AS-BUILT GLASS SUBTOTAL
	0.18	1472	20.17	5344	5539

	COMPONENT DESCRIPTION	AREA	BASE SUMMER POINT MULT.	BASE WINTER POINTS	COMPONENT DESCRIPTION	AREA	WINTER POINT MULT. (6A-11 - 6A-15)	AS BUILT WINTER POINTS
WALL	EXTERIOR	1648	3.4	5603	EXT FRAME R13	1648	3.4	5603
	ADJACENT	0	3.3	0	ADJ FRAME R13	0	3.3	0
						0		0
						0		0

DOORS	EXTERIOR	70	12.3	861	EXT INSULATED	70	8.4	588
	ADJACENT	0	11.5	0	ADJ INSULATED	0	8	0
						0		0

CEILING	UNDER ATTIC OR SINGLE ASSEMBLY	1230	2.05	2522	ATTIC R30	1476	2.05	3026
					RBS/IECC/white roof (3)	0	1.2	0
	BASE CEILING AREA EQUALS FLOOR AREA DIRECTLY UNDER CEILING. AS-BUILT CEILING AREA EQUALS ACTUAL CEILING SQUARE FOOTAGE							

FLOOR	SLAB (PERIMETER)	0	18.8	0	SLAB	0	18.8	0
	RAISED (AREA)	1230	1.38	1697	RAISED R19	1230	0.8	984
	FOR SLAB-ON-GRADE USE PERIMETER LENGTH AROUND CONDITIONED FLOOR, FOR RAISED FLOORS USE AREA OVER UNCONDITIONED SPACE							

INFILTRATION & INTERNAL GAINS	1472	-0.58	-854		1472	-0.58	-854
	USE TOTAL FLOOR AREA OF CONDITIONED SPACE						

TOTAL COMPONENT BASE WINTER POINTS				15174	TOTAL COMPONENT AS-BUILT WINTER POINTS				14886
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HEATING SYSTEM	BASE HEATING SYSTEM MULTIPLIER	TOTAL BASE WINTER POINTS	BASE HEATING POINTS	TOTAL AS-BUILT WIN. PTS.	AS-BUILT DM (6A-17)	AS-BUILT DSM (6A-20)	AS-BUILT AHU (6A-16)	AS-BUILT CMS (6A-18)	AS-BUILT CCM (6A-21)	AS-BUILT HEATING POINTS
	0.554	15174	8406	14886	1.069	0.95	0.93	0.43	0.95	5743

TOTAL	BASE COOLING POINTS (From P2)	BASE HEATING POINTS	BASE H/W PTS. (From P2)	0.85	TOTAL BASE PTS. (Enter on P1)	AS-BUILT COOLING POINTS (From P2)	AS-BUILT HEATING POINTS	AS-BUILT H/W PTS. (From P2)	TOTAL AS-BUILT PTS. (Enter on P1)
	7727	8406	7905	24038	20433	5531	5743	7713	18988

(1) H = HORIZONTAL GLASS (SKYLIGHTS)	(2) FOR GLASS WITH KNOW SHGC, SEE SEC. 2.1.1 OF APPENDIX G-C of the FBC, Residential. TINT MULTIPLIERS MAY BE USED FOR GLASS WITH SOLAR SCREENS, FILM, OR TINT	(3) MUST MEET CRITERIA OF APPENDIX G-C4.2.1.5 of the FBC, Residential.
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6A-10 WINTER OVERHANG FACTORS (WOF)

SELECT BY OR	OH Ratio	.00-.11	.12-.17	.18-.26	.27-.35	.36-.46	.47-.57	.58-.70	.71-.83	.84-1.18	1.19-1.72	1.73-2.73	2.74 & up
	North	1.00	1.000	1.001	1.003	1.005	1.009	1.011	1.014	1.016	1.021	1.024	1.027
	Northeast	1.00	0.998	1.001	1.008	1.015	1.023	1.029	1.035	1.040	1.049	1.056	1.061
	East	1.00	1.007	1.018	1.040	1.069	1.109	1.150	1.198	1.242	1.338	1.429	1.507
	Southeast	1.00	1.014	1.043	1.111	1.202	1.332	1.472	1.635	1.787	2.113	2.412	2.650
	South	1.00	0.994	1.032	1.142	1.308	1.563	1.845	2.175	2.471	3.042	3.450	3.661
	Southwest	1.00	1.006	1.025	1.070	1.131	1.217	1.308	1.413	1.508	1.708	1.888	2.031
	West	1.00	1.002	1.010	1.027	1.049	1.077	1.102	1.128	1.149	1.187	1.217	1.238
	Northwest	1.00	0.999	1.000	1.004	1.008	1.012	1.016	1.019	1.022	1.028	1.032	1.036
	OH Length	0.0'	1.0'	1.5'	2.0'	3.0'	3.5'	4.5'	5.5'	6.5'	9.5'	14.0'	20.0'

6A-11 WALL WINTER POINT MULTIPLIERS (WPM)

FRAME					CONCRETE BLOCK (NORMAL WT)				FACE BRICK				LOG		
					INTERIOR INSULATION			EXT. INSUL.	R-VALUE	WOOD FR	R-VALUE	BLOCK			
									0-6.9	12.6	0-2.9	7.9			
													6 INCH	8 INCH	
R-VALUE	EXT	ADJ	EXT	ADJ	R-VALUE	EXT	ADJ	EXT	7-10.9	4.2	3-6.9	5.7	R-VALUE	EXT	EXT
0-6.9	11.1	10.4	15.1	13.1	0-2.9	11.2	6.8	11.2	11-18.9	3.5	7-9.9	3.8	0-2.9	4.5	3.0
7-10.9	4.4	4.4	7.3	6.6	3-4.9	7.3	5.1	5.6	19-25.9	2.2	10 & UP	3.0	3-6.9	2.8	2.2
11-12.9	3.7	3.6	5.7	5.2	5-6.9	5.7	4.2	4.3	26 & UP	1.4			7 & UP	2.1	1.7
13-18.9	3.4	3.3	5.2	4.9	7-10.9	4.6	3.5	3.3							
19-25.9	2.2	2.2	4.6	4.4	11-18.9	3.0	2.6	2.2							
26 & Up	1.5	1.5	2.7	2.6	19-25.9	1.9	1.7								
					26 & UP	1.3	1.2								



6A-19 COOLING CREDIT MULTIPLIERS

SYSTEM TYPE	Cooling credit multipliers (CCM)
Ceiling Fans	.95*
Cross Ventilation	.95*
Whole House Fan	.95*
Multizone	.95
Programmable Thermostat	.95

\*Credit may be taken for only one system type concurrently.

6A-20 AIR DISTRIBUTION SYSTEM CREDIT MULTIPLIERS

TYPE CREDIT	Prescriptive requirements	Multiplier
Air-tight Duct Credit <sup>1</sup>	Appx G-C5.2.2.1.1	1.00
Factory-sealed AHU Credit <sup>2</sup>	Appx G-C5.2.2.1.2	0.95

<sup>1</sup>Duct Sealing Multiplier (DSM) shall be 1.15 (summer) or 1.17 (winter) unless Air-tight Duct Credit is demonstrated by test report.

<sup>2</sup>Multiply Factory-sealed AHU credit by summer (Table 6A-7) or winter (Table 6A-16) AHU multiplier. Insert total in the "As-Built AHU" box on page 2 or 4.

6A-21 HEATING CREDIT MULTIPLIERS (HCM)

SYSTEM TYPE	HEATING CREDIT MULTIPLIERS (HCM)	
Programmable Thermostat	HCM	.95
Multizone	HCM	.95

6A-22 HOT WATER MULTIPLIERS (HWM)

SYSTEM TYPE									
Electric Resistance	EF	.80-.81	.82-.83	.84-.85	.86-.87	.88-.90	.91-.93	.94-.96	.97 & Up
	HWM	3020	2946	2876	2809	2746	2655	2571	2491
Gas Water Heating	EF	.54	.55	.56	.57	.58	.59	.60	.61
	HWM	3020	2946	2876	2809	2746	2655	2571	2491
	EF	.62-.63	.64-.65	.66-.70	.71-.75	.76-.80	.81-.83	.84-.86	.87 & Up
	HWM	2346	2217	2101	1738	1456	1196	1055	933

6A-23 HOT WATER CREDIT MULTIPLIERS (HWCN)

SYSTEM TYPE		HOT WATER CREDIT MULTIPLIERS (HWCN)					
Heat Recovery Unit	With	Air Conditioner			Heat Pump		
	HWCN	.84			.78		
Add-on Dedicated Heat Pump (without tank)	EF	2.0-2.49	2.5-2.99	3.0-3.49		3.5 & Up	
	HWCN	.44	.35	.29		.25	
Add-on Solar Water Heater (without tank)	EF	1.0-1.9	2.0-2.9	3.0-3.9	4.0-4.9	5.0 & Up	
	HWCN	.84	.42	.28	.21	.17	

NOTE: An HWM must be used in conjunction with all HWCN. See Table 6A-22. EF Means Energy Factor.

6A-24 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	N1106.AB.1.1	Max: 3 cfm/sq. ft. window area; .5cfm/sq. ft. door area.	
Exterior & Adjacent Walls	N1106.AB.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; CFM utility penetrations; between wall panels & top/bottom plates; between walls & 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	N1106.AB.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	N1106.AB.1.2.3	Seal: 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	N1106.AB.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.	
Multiple Story Houses	N1106.AB.1.2.5	Air barrier on perimeter of floor cavity between floors.	
Additional Infiltration reqts	N1106.AB.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air.	

6A-25 OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	N1112.AB.3	Comply with efficiency requirements in Table N1112.AB.3. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required for vertical pipe risers.	
Swimming Pools & Spas	N1112.AB.2.3	Spas & heated pools must have covers (except solar heated). Noncommercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%.	
Shower Heads	N1112.AB.2.4	Water flow must be restricted to no more than 2.5 gallons per minute at 80 psig.	
Air Distribution Systems	N1110.AB	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated, and installed in accordance with the criteria of Section N1110. Ducts in unconditioned attics: R-6 minimum insulation.	
HVAC Controls	N1107.AB.2	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	N1104.AB.1 N1102.B.1.1	Ceilings—Min. R-19. Common walls—Frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	



ESTIMATED ENERGY PERFORMANCE INDEX\* =  
The lower the Energy Performance Index, the more efficient the home.

<p>1. New Home or addition <u>new</u></p> <p>2. Single family or multiple family <u>single</u></p> <p>3. Number of units, (if multi-family) _____</p> <p>4. Number of bedrooms <u>3</u></p> <p>5. Is this a worst case? (yes or no) <u>yes</u></p> <p>6. Conditioned floor area <u>1472</u> sq. ft.</p> <p>7. Glass type &amp; area</p> <p style="padding-left: 20px;">a. U-Factor: <u>double default</u> <u>212.4</u> sq. ft.</p> <p style="padding-left: 20px;">(Or single or double Default) _____ sq. ft.</p> <p style="padding-left: 20px;">b. SHGC: <u>tint default</u> _____ sq. ft.</p> <p style="padding-left: 20px;">(Or clear or tint Default) _____ sq. ft.</p> <p>8. Floor types, Insulation level</p> <p style="padding-left: 20px;">a. Slab-on-grade, edge insulation R= _____</p> <p style="padding-left: 20px;">b. Wood, raised R= <u>19</u></p> <p style="padding-left: 20px;">c. Concrete, raised R= _____</p> <p>9. Wall types, Insulation level</p> <p style="padding-left: 20px;">Exterior</p> <p style="padding-left: 40px;">a. Wood frame R= <u>13</u></p> <p style="padding-left: 40px;">b. Metal frame R= _____</p> <p style="padding-left: 40px;">c. Concrete block R= _____</p> <p style="padding-left: 40px;">d. Log R= _____</p> <p style="padding-left: 40px;">e. Other _____ R= _____</p> <p style="padding-left: 20px;">Adjacent</p> <p style="padding-left: 40px;">a. Wood frame R= _____</p> <p style="padding-left: 40px;">b. Metal frame R= _____</p> <p style="padding-left: 40px;">c. Concrete block R= _____</p> <p style="padding-left: 40px;">d. Log R= _____</p> <p style="padding-left: 40px;">e. Other _____ R= _____</p> <p>10. Ceiling types, Insulation level</p> <p style="padding-left: 20px;">a. Under attic R= _____</p> <p style="padding-left: 20px;">b. Single assembly R= <u>30</u></p> <p style="padding-left: 20px;">c. Knee walls/skylight walls R= _____</p> <p style="padding-left: 20px;">d. Radiant barrier installed R= _____</p>	<p>11. Ducts, Location &amp; Insulation Level</p> <p style="padding-left: 20px;">a. Supply ducts: <u>attic</u> R= <u>6</u></p> <p style="padding-left: 20px;">b. Return ducts: <u>attic</u> R= <u>6</u></p> <p>12. Cooling systems Capacity: <u>36</u> kBtu/hr</p> <p style="padding-left: 20px;">a. Split system SEER: <u>13</u></p> <p style="padding-left: 20px;">b. Single package SEER: _____</p> <p style="padding-left: 20px;">c. Ground/water source COP: _____</p> <p style="padding-left: 20px;">d. Room unit EER: _____</p> <p style="padding-left: 20px;">e. PTAC EER: _____</p> <p style="padding-left: 20px;">f. Gas-driven COP: _____</p> <p>13. Heating Systems Capacity: <u>36</u> kBtu/hr</p> <p style="padding-left: 20px;">a. Split system heat pump HSPF: <u>7.8</u></p> <p style="padding-left: 20px;">b. Single package heat pump HSPF: _____</p> <p style="padding-left: 20px;">c. Electric resistance COP: _____</p> <p style="padding-left: 20px;">d. Gas furnace, natural gas AFUE: _____</p> <p style="padding-left: 20px;">e. Gas furnace, LPG AFUE: _____</p> <p style="padding-left: 20px;">f. Gas-driven heat pump Recov. EFF.: _____</p> <p>14. Water heating systems</p> <p style="padding-left: 20px;">a. Electric resistance EF: <u>94</u></p> <p style="padding-left: 20px;">b. Gas fired, natural gas EF: _____</p> <p style="padding-left: 20px;">c. Gas fired, LPG EF: _____</p> <p style="padding-left: 20px;">d. Solar System with tank EF: _____</p> <p style="padding-left: 20px;">e. Dedicated heat pump with tank EF: _____</p> <p style="padding-left: 20px;">f. Heat recovery unit HeatRec% _____</p> <p style="padding-left: 20px;">g. Other: _____</p> <p>15. HVAC credits claimed (Alternate Point System Method only)</p> <p style="padding-left: 20px;">a. Ceiling fans _____</p> <p style="padding-left: 20px;">b. Cross ventilation _____</p> <p style="padding-left: 20px;">c. Whole house fan _____</p> <p style="padding-left: 20px;">d. Multizone cooling credit _____</p> <p style="padding-left: 20px;">e. Multizone heating credit _____</p> <p style="padding-left: 20px;">f. Programmable thermostat <u>X</u></p>
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I certify that this home has complied with the Florida Energy Efficiency Code For Building 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: 1-24-12

Address of New Home: 406 memorial DR NE

City/FL Zip Lake city FL





COLUMBIA COUNTY BUILDING DEPARTMENT  
RESIDENTIAL CHECK LIST REQUIREMENTS

6-25-09

MINIMUM PLAN REQUIREMENTS FOR THE  
FLORIDA BUILDING CODE RESIDENTIAL 2007 EFFECTIVE 1 MARCH 2009 & 2009  
SUPPLEMENTS EFFECTIVE 1 MARCH 2009, ONE (1) AND TWO (2) FAMILY DWELLINGS  
with Supplements and Revision, OF THE NATIONAL ELECTRICAL 2008

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

**ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current 2007 FLORIDA BUILDING CODES RESIDENTIAL EFFECTIVE 1 MARCH 2009 & 2009 SUPPLEMENTS EFFECTIVE 1 MARCH 2009. ALL PLANS OR DRAWINGS SHALL PROVIDE CALCULATIONS AND DETAILS THAT HAVE THE SEAL AND SIGNATURE OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE STATE OF FLORIDA, OR ALTERNATE METHODOLOGIES, APPROVED BY THE STATE OF FLORIDA BUILDING COMMISSION FOR ONE-AND-TWO FAMILY DWELLINGS.**

**FOR DESIGN PURPOSES THE FOLLOWING BASIC WIND SPEEDS ARE PER FIGURE R301.2(4) of the FLORIDA BUILDING CODES RESIDENTIAL (Florida Wind speed map) SHALL BE USED.**

WIND SPEED LINE SHALL BE DEFINED AS FOLLOWS: THE CENTERLINE OF INTERSTATE 75.

ALL BUILDINGS CONSTRUCTED EAST OF SAID LINE SHALL BE ----- 100 MPH

ALL BUILDINGS CONSTRUCTED WEST OF SAID LINE SHALL BE -----110 MPH

NO AREA IN COLUMBIA COUNTY IS IN A WIND BORNE DEBRIS REGION

GENERAL REQUIREMENTS:  
APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL

Items to Include-  
Each Box shall be  
Circled as  
Applicable

			Yes	No	N/A
1	Two (2) complete sets of plans containing the following:		<input checked="" type="checkbox"/>		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void		<input checked="" type="checkbox"/>		
3	Condition space (Sq. Ft.)	1482	Total (Sq. Ft.) under roof	2007	IIIIIIII

Designers name and signature shall be on all documents and a licensed architect or engineer, signature and official embossed seal shall be affixed to the plans and documents as per the FLORIDA BUILDING CODES RESIDENTIAL R101.2.1

**Site Plan information including:**

4	Dimensions of lot or parcel of land	<input checked="" type="checkbox"/>		
5	Dimensions of all building set backs	<input checked="" type="checkbox"/>		
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.	<input checked="" type="checkbox"/>		
7	Provide a full legal description of property.	<input checked="" type="checkbox"/>		



**Wind-load Engineering Summary, calculations and any details required**

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
8	Plans or specifications must show compliance with FBCR Chapter 3	IIII	IIII	IIII
		YES	NO	N/A
9	Basic wind speed (3-second gust), miles per hour	<input checked="" type="checkbox"/>		
10	(Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated)	<input checked="" type="checkbox"/>		
11	Wind importance factor and nature of occupancy	<input checked="" type="checkbox"/>		
12	The applicable internal pressure coefficient, Components and Cladding	<input checked="" type="checkbox"/>		
13	The design wind pressure in terms of psf (kN/m <sup>2</sup> ), to be used for the design of exterior component, cladding materials not specifically designed by the registered design professional.	<input checked="" type="checkbox"/>		

**Elevations Drawing including:**

14	All side views of the structure	<input checked="" type="checkbox"/>		
15	Roof pitch	<input checked="" type="checkbox"/>		
16	Overhang dimensions and detail with attic ventilation	<input checked="" type="checkbox"/>		
17	Location, size and height above roof of chimneys	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
18	Location and size of skylights with Florida Product Approval	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
18	Number of stories	<input checked="" type="checkbox"/>		
20A	Building height from the established grade to the roofs highest peak	<input checked="" type="checkbox"/>		

**Floor Plan including:**

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	<input checked="" type="checkbox"/>		
21	Raised floor surfaces located more than 30 inches above the floor or grade	<input checked="" type="checkbox"/>		
22	All exterior and interior shear walls indicated	<input checked="" type="checkbox"/>		
23	Shear wall opening shown (Windows, Doors and Garage doors)	<input checked="" type="checkbox"/>		
24	Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBCR 613.2 where the opening of an operable window is located more than 72 inches above the finished grade or surface below, the lowest part of the clear opening of the window shall be a minimum of 24 inches above the finished floor of the room in which the window is located. Glazing between the floor and 24 inches shall be fixed or have openings through which a 4-inch-diameter sphere cannot pass.	<input checked="" type="checkbox"/>		
25	Safety glazing of glass where needed			
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 of FBCR)			<input checked="" type="checkbox"/>
27	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails	<input checked="" type="checkbox"/>		
28	Identify accessibility of bathroom (see FBCR SECTION 322)	<input checked="" type="checkbox"/>		



**All materials placed within opening or onto/into exterior walls, soffits or roofs shall have Florida product approval number and mfg. installation information submitted with the plans (see Florida product approval form)**

<p align="center"><b>GENERAL REQUIREMENTS:</b> <b>APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</b></p>	<p align="center">Items to Include- Each Box shall be Circled as Applicable</p>
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**FBCR 403: Foundation Plans**

		YES	NO	N/A
29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	<input checked="" type="checkbox"/>		
30	All posts and/or column footing including size and reinforcing	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
31	Any special support required by soil analysis such as piling.	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
32	Assumed load-bearing value of soil                      Pound Per Square Foot	<input checked="" type="checkbox"/>		
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type) For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an grounding electrode system. Per the National Electrical Code article 250.52.3	<input checked="" type="checkbox"/>		

**FBCR 506: CONCRETE SLAB ON GRADE**

34	Show Vapor retarder (6mil. Polyethylene with joints lapped 6 inches and sealed)			<input checked="" type="checkbox"/>
35	Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports			<input checked="" type="checkbox"/>

**FBCR 320: PROTECTION AGAINST TERMITES**

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or Sub mit other approved termite protection methods. <b>Protection shall be provided by registered termiticides</b>	<input checked="" type="checkbox"/>		
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**FBCR 606: Masonry Walls and Stem walls (load bearing & shear Walls)**

37	Show all materials making up walls, wall height, and Block size, mortar type	<input checked="" type="checkbox"/>		
38	Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement	<input checked="" type="checkbox"/>		

**Metal frame shear wall and roof systems shall be designed, signed and sealed by Florida Prof. Engineer or Architect**

**Floor Framing System: First and/or second story**

39	Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer	<input checked="" type="checkbox"/>		
40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers	<input checked="" type="checkbox"/>		
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers	<input checked="" type="checkbox"/>		
42	Attachment of joist to girder	<input checked="" type="checkbox"/>		
43	Wind load requirements where applicable	<input checked="" type="checkbox"/>		
44	Show required under-floor crawl space	<input checked="" type="checkbox"/>		



45	Show required amount of ventilation opening for under-floor spaces	<input checked="" type="checkbox"/>		
46	Show required covering of ventilation opening	<input checked="" type="checkbox"/>		
47	Show the required access opening to access to under-floor spaces	<input checked="" type="checkbox"/>		
48	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges & interior of the areas structural panel sheathing	<input checked="" type="checkbox"/>		
49	Show Draftstopping, Fire caulking and Fire blocking	<input checked="" type="checkbox"/>		
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
51	Provide live and dead load rating of floor framing systems (psf).	<input checked="" type="checkbox"/>		

### **FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION**

GENERAL REQUIREMENTS: APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	<input checked="" type="checkbox"/>		
53	Fastener schedule for structural members per table FBCR 602.3 are to be shown	<input checked="" type="checkbox"/>		
54	Show Wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing	<input checked="" type="checkbox"/>		
55	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems	<input checked="" type="checkbox"/>		
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FBCR Table 502.5 (1)	<input checked="" type="checkbox"/>		
57	Indicate where pressure treated wood will be placed	<input checked="" type="checkbox"/>		
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	<input checked="" type="checkbox"/>		
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	<input checked="" type="checkbox"/>		

### **FBCR :ROOF SYSTEMS:**

60	Truss design drawing shall meet section FBCR 802.10 Wood trusses			<input checked="" type="checkbox"/>
61	Include a layout and truss details, signed and sealed by Florida Professional Engineer			<input checked="" type="checkbox"/>
62	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters			<input checked="" type="checkbox"/>
63	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details			<input checked="" type="checkbox"/>
64	Provide dead load rating of trusses			<input checked="" type="checkbox"/>

### **FBCR 802:Conventional Roof Framing Layout**

65	Rafter and ridge beams sizes, span, species and spacing	<input checked="" type="checkbox"/>		
66	Connectors to wall assemblies' include assemblies' resistance to uplift rating	<input checked="" type="checkbox"/>		
67	Valley framing and support details	<input checked="" type="checkbox"/>		
68	Provide dead load rating of rafter system	<input checked="" type="checkbox"/>		



**FBCR Table 602.3(2) & FBCR 803 ROOF SHEATHING**

69	Include all materials which will make up the roof decking, identification of structural panel sheathing, grade, thickness	<input checked="" type="checkbox"/>		
70	Show fastener Size and schedule for structural panel sheathing on the edges & intermediate areas	<input checked="" type="checkbox"/>		

**FBCR ROOF ASSEMBLIES FRC Chapter 9**

71	Include all materials which will make up the roof assemblies covering	<input checked="" type="checkbox"/>		
72	Submit Florida Product Approval numbers for each component of the roof assemblies covering	<input checked="" type="checkbox"/>		

**FBCR Chapter 11 Energy Efficiency Code for residential building**

Residential construction shall comply with this code by using the following compliance methods in the FBCR chapter 11 Residential buildings compliance methods. **Two of the required forms are to be submitted, N1100.1.1.1 As an alternative to the computerized Compliance Method A, the Alternate Residential Point System Method hand calculation, Alternate Form 600A, may be used. All requirements specific to this calculation are located in Sub appendix C to Appendix G. Buildings complying by this alternative shall meet all mandatory requirements of this chapter. Computerized versions of the Alternate Residential Point System Method shall not be acceptable for code compliance.**

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A

73	Show the insulation R value for the following areas of the structure	<input checked="" type="checkbox"/>		
74	Attic space	<input checked="" type="checkbox"/>		
75	Exterior wall cavity	<input checked="" type="checkbox"/>		
76	Crawl space	<input checked="" type="checkbox"/>		

**HVAC information**

77	Submit two copies of a Manual J sizing equipment or equivalent computation study	<input checked="" type="checkbox"/>		
78	Exhaust fans shown in bathrooms <b>Mechanical exhaust capacity of 50 cfm intermittent or 20 cfm continuous required</b>	<input checked="" type="checkbox"/>		
79	Show clothes dryer route and total run of exhaust duct	<input checked="" type="checkbox"/>		

**Plumbing Fixture layout shown**

80	All fixtures waste water lines shall be shown on the foundation plan	<input checked="" type="checkbox"/>		
81	Show the location of water heater	<input checked="" type="checkbox"/>		

**Private Potable Water**

82	Pump motor horse power			
83	Reservoir pressure tank gallon capacity			
84	Rating of cycle stop valve if used			

Existing well



**Electrical layout shown including**

85	Show Switches, receptacles outlets, lighting fixtures and Ceiling fans	<input checked="" type="checkbox"/>		
86	Show all 120-volt, single phase, 15- and 20-ampere branch circuits outlets required to be protected by <b>Ground-Fault Circuit Interrupter (GFCI) Article 210.8 A</b>	<input checked="" type="checkbox"/>		
87	Show the location of smoke detectors & Carbon monoxide detectors	<input checked="" type="checkbox"/>		
88	Show service panel, sub-panel, location(s) and total ampere ratings	<input checked="" type="checkbox"/>		
89	<p>On the electrical plans identify the electrical service overcurrent protection device for the main electrical service. This device shall be installed on the exterior of structures to serve as a disconnecting means for the utility company electrical service. Conductors used from the exterior disconnecting means to a panel or sub panel shall have four-wire conductors, of which one conductor shall be used as an equipment ground. Indicate if the utility company service entrance cable will be of the overhead or underground type.</p> <p><b>For structures</b> with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an Grounding electrode system. Per the National Electrical Code article 250.52.3</p>	<input checked="" type="checkbox"/>		
90	Appliances and HVAC equipment and disconnects	<input checked="" type="checkbox"/>		
91	Show all 120-volt, single phase, 15- and 20-ampere branch circuits supplying outlets installed in dwelling unit family rooms, dining rooms, living rooms, parlors, libraries, dens, bedrooms, sunrooms, recreation rooms, closets, hallways, or similar rooms or areas shall be protected by a listed <b>Combination arc-fault circuit interrupter</b> , Protection device.	<input checked="" type="checkbox"/>		

**Disclosure Statement for Owner Builders** *If you as the applicant will be acting as an owner/builder under section 489.103(7) of the Florida Statutes, submit the required owner builder disclosure statement form.*

**Notice Of Commencement**


A notice of commencement form **recorded** in the Columbia County Clerk Office is required to be filed with the building department Before Any Inspections can be preformed.

<p><b>GENERAL REQUIREMENTS:</b> APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</p>	<p>Items to Include- Each Box shall be Circled as Applicable</p>
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**THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS**

		YES	NO	N/A
92	<b>Building Permit Application</b> A current Building Permit Application form is to be completed and submitted for all residential projects	<input checked="" type="checkbox"/>		
93	<b>Parcel Number</b> The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested	<input checked="" type="checkbox"/>		
94	<b>Environmental Health Permit or Sewer Tap Approval</b> A copy of a approved Columbia County Environmental Health (386) 758-1058	<input checked="" type="checkbox"/>		
95	<b>City of Lake City</b> A permit showing an approved waste water sewer tap			<input checked="" type="checkbox"/>
96	<b>Toilet facilities shall be provided for all construction sites</b>	<input checked="" type="checkbox"/>		
97	<b>Town of Fort White</b> (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.			<input checked="" type="checkbox"/>



98	<b>Flood Information:</b> All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting a application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.5.2 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.5.3 of the Columbia County Land Development Regulations		
99	<b>CERTIFIED FINISHED FLOOR ELEVATIONS</b> will be required on any project where the base flood elevation (100 year flood) has been established		
100	A development permit will also be required. Development permit cost is <b>\$50.00</b>		
101	<b>Driveway Connection:</b> If the property does not have an existing access to a public road, then an application for a culvert permit ( <b>\$25.00</b> ) must be made. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver ( <b>\$50.00</b> ). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.		
102	<b>911 Address:</b> If the project is located in an area where a 911 address has not been issued, then application for a 911 address must be applied for and received through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125		

#### **Section R101.2.1 of the Florida Building Code Residential:**

**The provisions of Chapter 1, Florida Building Code, Building shall govern the administration and enforcement of the Florida Building Code, Residential.**

#### **Section 105 of the Florida Building Code defines the:**

##### **Time limitation 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 such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.**

##### **Single-family residential dwelling.**

**Section 105.3.4 A building permit for a single-family residential dwelling must be issued within 30 working days of application therefor unless unusual circumstances require a longer time for processing the application or unless the permit application fails to satisfy the Florida Building Code or the enforcing agency's laws or ordinances.**

##### **Permit intent.**

**Section 105.4.1: A permit issued shall be constructed to be a license to proceed with the work and not as authority to violate, cancel, alter or set aside any of the provisions of the technical codes, nor shall issuance of a permit prevent the building official from thereafter requiring a correction of errors in plans, construction or violations of this code. Every permit issued shall become invalid unless the work authorized by such permit is commenced within six months after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of six months after the time the work is commenced.**



**If work has commenced.**

**Section 105.4.1.1:** If work has commenced and the permit is revoked, becomes null and void, or expires because of lack of progress or abandonment, a new permit covering the proposed construction shall be obtained before proceeding with the work.

**New Permit.**

**Section 105.4.1.2:** If a new permit is not obtained within 180 days from the date the initial permit became null and void, the building official is authorized to require that any work which has been commenced or completed be removed from the building site. Alternately, a new permit may be issued on application, providing the work in place and required to complete the structure meets all applicable regulations in effect at the time the initial permit became null and void and any regulations which may have become effective between the date of expiration and the date of issuance of the new permit.

**Work Shall Be:**

**Section 105.4.1.3:** Work shall be considered to be in active progress when the permit has received an approved inspection within 180 days. This provision shall not be applicable in case of civil commotion or strike or when the building work is halted due directly to judicial injunction, order or similar process.

**The Fee:**

**Section 105.4.1.4:** The fee for renewal reissuance and extension of a permit shall be set forth by the administrative authority.

**When the submitted application is approved for permitting the applicant will be notified by phone as to the date and time a building permit will be prepared and issued by the Columbia County Building & Zoning Department**



# Residential System Sizing Calculation

## Summary

Mcall

Fort White, FL

Project Title:  
1201006

Class 3 Rating  
Registration No. 0  
Climate: North

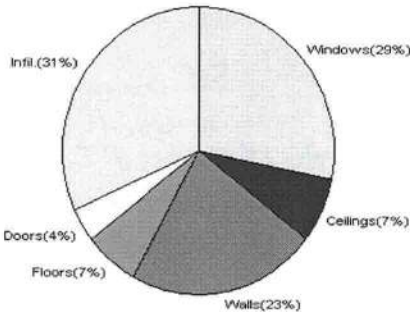
1/20/2012

Location for weather data: Gainesville - Defaults: Latitude(29) Altitude(152 ft.) Temp Range(M)					
Humidity data: Interior RH (50%) Outdoor wet bulb (77F) Humidity difference(54gr.)					
Winter design temperature	33	F	Summer design temperature	92	F
Winter setpoint	70	F	Summer setpoint	75	F
Winter temperature difference	37	F	Summer temperature difference	17	F
<b>Total heating load calculation</b>		<b>23977 Btuh</b>	<b>Total cooling load calculation</b>		<b>30859 Btuh</b>
Submitted heating capacity	% of calc	Btuh	Submitted cooling capacity	% of calc	Btuh
Total (Electric Heat Pump)	150.1	36000	Sensible (SHR = 0.75)	103.4	27000
Heat Pump + Auxiliary(0.0kW)	150.1	36000	Latent	189.9	9000
			Total (Electric Heat Pump)	116.7	36000

## WINTER CALCULATIONS

Winter Heating Load (for 1472 sqft)

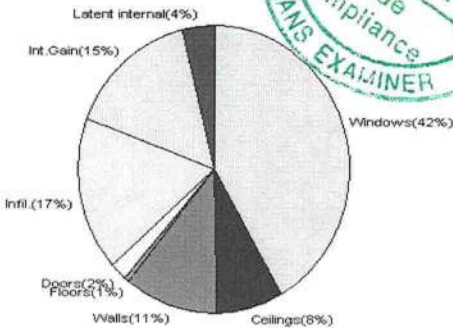
Load component			Load	
Window total	212	sqft	6837	Btuh
Wall total	1648	sqft	5411	Btuh
Door total	70	sqft	906	Btuh
Ceiling total	1476	sqft	1739	Btuh
Floor total	1230	sqft	1559	Btuh
Infiltration	186	cfm	7524	Btuh
Duct loss			0	Btuh
<b>Subtotal</b>			<b>23977</b>	<b>Btuh</b>
Ventilation	0	cfm	0	Btuh
<b>TOTAL HEAT LOSS</b>			<b>23977</b>	<b>Btuh</b>



## SUMMER CALCULATIONS

Summer Cooling Load (for 1472 sqft)

Load component			Load	
Window total	212	sqft	12810	Btuh
Wall total	1648	sqft	3437	Btuh
Door total	70	sqft	686	Btuh
Ceiling total	1476	sqft	2444	Btuh
Floor total			162	Btuh
Infiltration	97	cfm	1802	Btuh
Internal gain			4780	Btuh
Duct gain			0	Btuh
Sens. Ventilation	0	cfm	0	Btuh
<b>Total sensible gain</b>			<b>26120</b>	<b>Btuh</b>
Latent gain(ducts)			0	Btuh
Latent gain(infiltration)			3538	Btuh
Latent gain(ventilation)			0	Btuh
Latent gain(internal/occupants/other)			1200	Btuh
<b>Total latent gain</b>			<b>4738</b>	<b>Btuh</b>
<b>TOTAL HEAT GAIN</b>			<b>30859</b>	<b>Btuh</b>



For Florida residences only

EnergyGauge® System Sizing

PREPARED BY:

DATE: 2012-1-20

EnergyGauge® FLR2PB v4.1

# System Sizing Calculations - Winter

## Residential Load - Whole House Component Details

Mcall

Fort White, FL

Project Title:  
1201006

Class 3 Rating  
Registration No. 0  
Climate: North

Reference City: Gainesville (Defaults) Winter Temperature Difference: 37.0 F

1/20/2012

Component Loads for Whole House						
Window	Panes/SHGC/Frame/U	Orientation	Area(sqft)	X	HTM=	Load
1	2, Clear, Metal, 0.87	N	15.0		32.2	483 Btuh
2	2, Clear, Metal, 0.87	N	9.0		32.2	290 Btuh
3	2, Clear, Metal, 0.87	N	26.7		32.2	859 Btuh
4	2, Clear, Metal, 0.87	E	26.7		32.2	859 Btuh
5	2, Clear, Metal, 0.87	E	30.0		32.2	966 Btuh
6	2, Clear, Metal, 0.87	E	15.0		32.2	483 Btuh
7	2, Clear, Metal, 0.87	S	30.0		32.2	966 Btuh
8	2, Clear, Metal, 0.87	W	30.0		32.2	966 Btuh
9	2, Clear, Metal, 0.87	E	15.0		32.2	483 Btuh
10	2, Clear, Metal, 0.87	W	15.0		32.2	483 Btuh
	Window Total		212(sqft)			6837 Btuh
Walls	Type	R-Value	Area	X	HTM=	Load
1	Frame - Wood - Ext(0.09)	13.0	1648		3.3	5411 Btuh
	Wall Total		1648			5411 Btuh
Doors	Type		Area	X	HTM=	Load
1	Insulated - Exterior		21		12.9	272 Btuh
2	Insulated - Exterior		14		12.9	181 Btuh
3	Insulated - Exterior		14		12.9	181 Btuh
4	Insulated - Exterior		21		12.9	272 Btuh
	Door Total		70			907Btuh
Ceilings	Type/Color/Surface	R-Value	Area	X	HTM=	Load
1	Vented Attic/D/Meta)	30.0	1476		1.2	1739 Btuh
	Ceiling Total		1476			1739Btuh
Floors	Type	R-Value	Size	X	HTM=	Load
1	Raised Wood - Stem Wall	19	1230.0 sqft		1.3	1559 Btuh
	Floor Total		1230			1559 Btuh
	Zone Envelope Subtotal:					16453 Btuh
Infiltration	Type	ACH X	Zone Volume	CFM=		
	Natural	0.94	11856	185.7		7524 Btuh
Ductload	Unsealed, R6.0, Supply(Attic), Return(Attic) (DLM of 0.00)					0 Btuh
Zone #1	Sensible Zone Subtotal					23977 Btuh



# Manual J Winter Calculations

## Residential Load - Component Details (continued)

Mcall  
Fort White, FL

Project Title:  
1201006

Class 3 Rating  
Registration No. 0  
Climate: North

1/20/2012

<b>WHOLE HOUSE TOTALS</b>
---------------------------

	Subtotal Sensible	23977 Btuh
	Ventilation Sensible	0 Btuh
	Total Btuh Loss	23977 Btuh

Key: Window types (SHGC - Shading coefficient of glass as SHGC numerical value or as clear or tint)  
(Frame types - metal, wood or insulated metal)  
(U - Window U-Factor or 'DEF' for default)  
(HTM - ManualJ Heat Transfer Multiplier)  
Key: Floor size (perimeter(p) for slab-on-grade or area for all other floor types )



For Florida residences only

# System Sizing Calculations - Summer

## Residential Load - Whole House Component Details

Mcall

Project Title:  
1201006

Class 3 Rating  
Registration No. 0  
Climate: North

Fort White, FL

Reference City: Gainesville (Defaults)

Summer Temperature Difference: 17.0 F

1/20/2012

### Component Loads for Whole House

Window	Type*	Ornt	Overhang		Window Area(sqft)			HTM		Load	
	Pn/SHGC/U/InSh/ExSh/IS		Len	Hgt	Gross	Shaded	Unshaded	Shaded	Unshaded		
1	2, Clear, 0.87, None,N,N	N	9.5ft.	7ft.	15.0	0.0	15.0	29	29	434	Btuh
2	2, Clear, 0.87, None,N,N	N	9.5ft.	5ft.	9.0	0.0	9.0	29	29	261	Btuh
3	2, Clear, 0.87, None,N,N	N	9.5ft.	8ft.	26.7	0.0	26.7	29	29	773	Btuh
4	2, Clear, 0.87, None,N,N	E	1.5ft.	12ft.	26.7	0.0	26.7	29	80	2123	Btuh
5	2, Clear, 0.87, None,N,N	E	1.5ft.	17ft.	30.0	0.0	30.0	29	80	2385	Btuh
6	2, Clear, 0.87, None,N,N	E	1.5ft.	9ft.	15.0	0.0	15.0	29	80	1193	Btuh
7	2, Clear, 0.87, None,N,N	S	9.5ft.	7ft.	30.0	30.0	0.0	29	34	869	Btuh
8	2, Clear, 0.87, None,N,N	W	1.5ft.	15ft.	30.0	0.0	30.0	29	80	2385	Btuh
9	2, Clear, 0.87, None,N,N	E	1.5ft.	8ft.	15.0	0.0	15.0	29	80	1193	Btuh
10	2, Clear, 0.87, None,N,N	W	1.5ft.	8ft.	15.0	0.0	15.0	29	80	1193	Btuh
Window Total					212 (sqft)					12810 Btuh	
Walls	Type	R-Value/U-Value			Area(sqft)			HTM		Load	
1	Frame - Wood - Ext	13.0/0.09			1647.6			2.1		3437 Btuh	
Wall Total					1648 (sqft)					3437 Btuh	
Doors	Type				Area (sqft)			HTM		Load	
1	Insulated - Exterior				21.0			9.8		206 Btuh	
2	Insulated - Exterior				14.0			9.8		137 Btuh	
3	Insulated - Exterior				14.0			9.8		137 Btuh	
4	Insulated - Exterior				21.0			9.8		206 Btuh	
Door Total					70 (sqft)					686 Btuh	
Ceilings	Type/Color/Surface	R-Value			Area(sqft)			HTM		Load	
1	Vented Attic/DarkMetal	30.0			1476.0			1.7		2444 Btuh	
Ceiling Total					1476 (sqft)					2444 Btuh	
Floors	Type	R-Value			Size			HTM		Load	
1	Raised Wood - Stem Wall	19.0			1230 (sqft)			0.1		162 Btuh	
Floor Total					1230.0 (sqft)					162 Btuh	
Zone Envelope Subtotal:										19538 Btuh	
Infiltration	Type	ACH			Volume(cuft)			CFM=		Load	
	SensibleNatural	0.49			11856			96.8		1802 Btuh	
Internal gain		Occupants			Btuh/occupant			Appliance		Load	
		6			X 230 +			3400		4780 Btuh	
Duct load	Unsealed, R6.0, Supply(Attic), Return(Attic)							DGM = 0.00		0.0 Btuh	
Sensible Zone Load										26120 Btuh	



# Manual J Summer Calculations

## Residential Load - Component Details (continued)

Mcall  
Fort White, FL

Project Title:  
1201006

Class 3 Rating  
Registration No. 0  
Climate: North

1/20/2012

### WHOLE HOUSE TOTALS

<b>Whole House Totals for Cooling</b>	<b>Sensible Envelope Load All Zones</b>	<b>26120 Btuh</b>
	Sensible Duct Load	0 Btuh
	<b>Total Sensible Zone Loads</b>	<b>26120 Btuh</b>
	Sensible ventilation	0 Btuh
	Blower	0 Btuh
	<b>Total sensible gain</b>	<b>26120 Btuh</b>
	Latent infiltration gain (for 54 gr. humidity difference)	3538 Btuh
	Latent ventilation gain	0 Btuh
	Latent duct gain	0 Btuh
	Latent occupant gain (6 people @ 200 Btuh per person)	1200 Btuh
	Latent other gain	0 Btuh
	<b>Latent total gain</b>	<b>4738 Btuh</b>
	<b>TOTAL GAIN</b>	<b>30859 Btuh</b>

\*Key: Window types (Pn - Number of panes of glass)  
(SHGC - Shading coefficient of glass as SHGC numerical value or as clear or tint)  
(U - Window U-Factor or 'DEF' for default)  
(InSh - Interior shading device: none(N), Blinds(B), Draperies(D) or Roller Shades(R))  
(ExSh - Exterior shading device: none(N) or numerical value)  
(BS - Insect screen: none(N), Full(F) or Half(H))  
(Ornt - compass orientation)



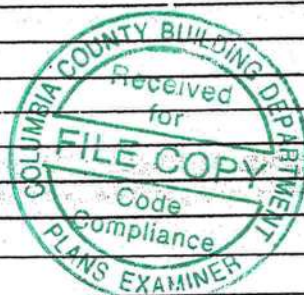
For Florida residences only

Location: Wilson Springs

Project Name: McCall, Gaston

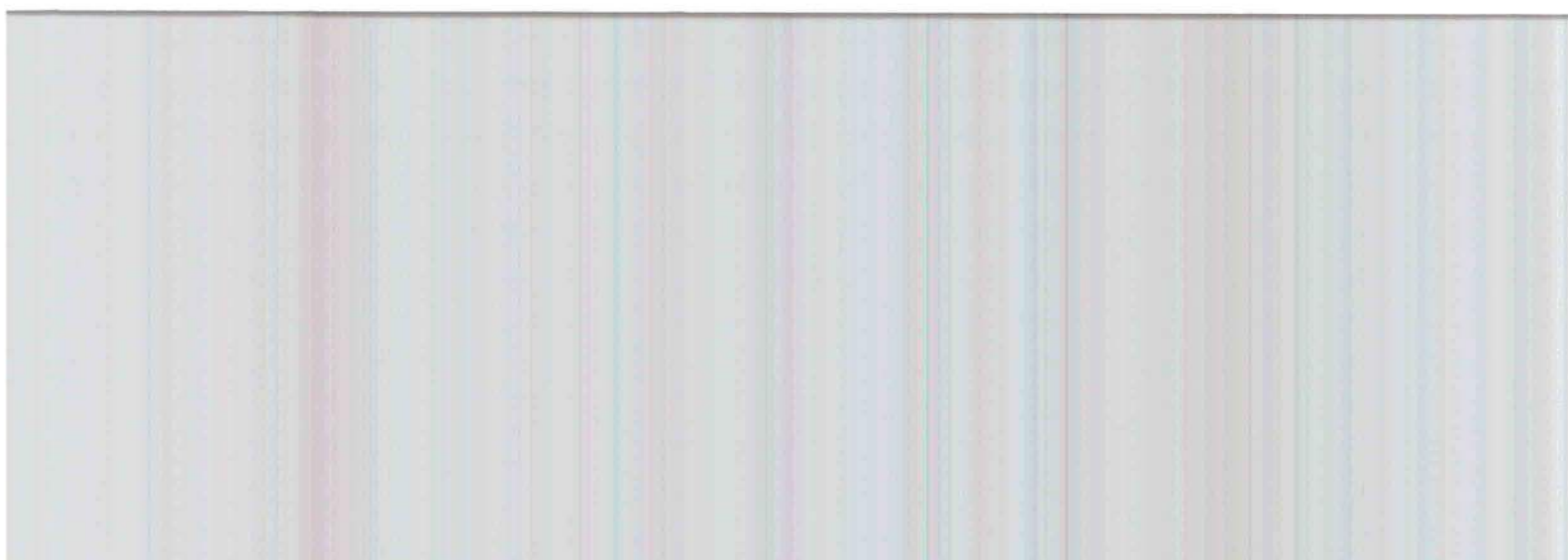
As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below if they will be utilized on the construction project which you are applying for a building permit on or after April 1, 2004. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. More information about statewide product approval can be obtained at [www.floridabuilding.org](http://www.floridabuilding.org)

Category/Subcategory	Manufacturer	Product Description	Approval Number
A. EXTERIOR DOORS			FL 4242-
1. Swinging			
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung			FL 5108
2. Horizontal Slider			FL 5451
3. Casement			
4. Double Hung			
5. Fixed			FL 5418
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
C. PANEL WALL			
1. Siding			FL 889-R
2. Soffits			FL 4899
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			FL 3820-R
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles		FL 5444	FL 586-R2
2. Underlayments			FL 1814-R1
3. Roofing Fasteners			
4. Non-structural Metal Rf			FL 7518.1
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			





10-11-12  
Measurement  
To Grade Level less than 30"  
Permit # 29989



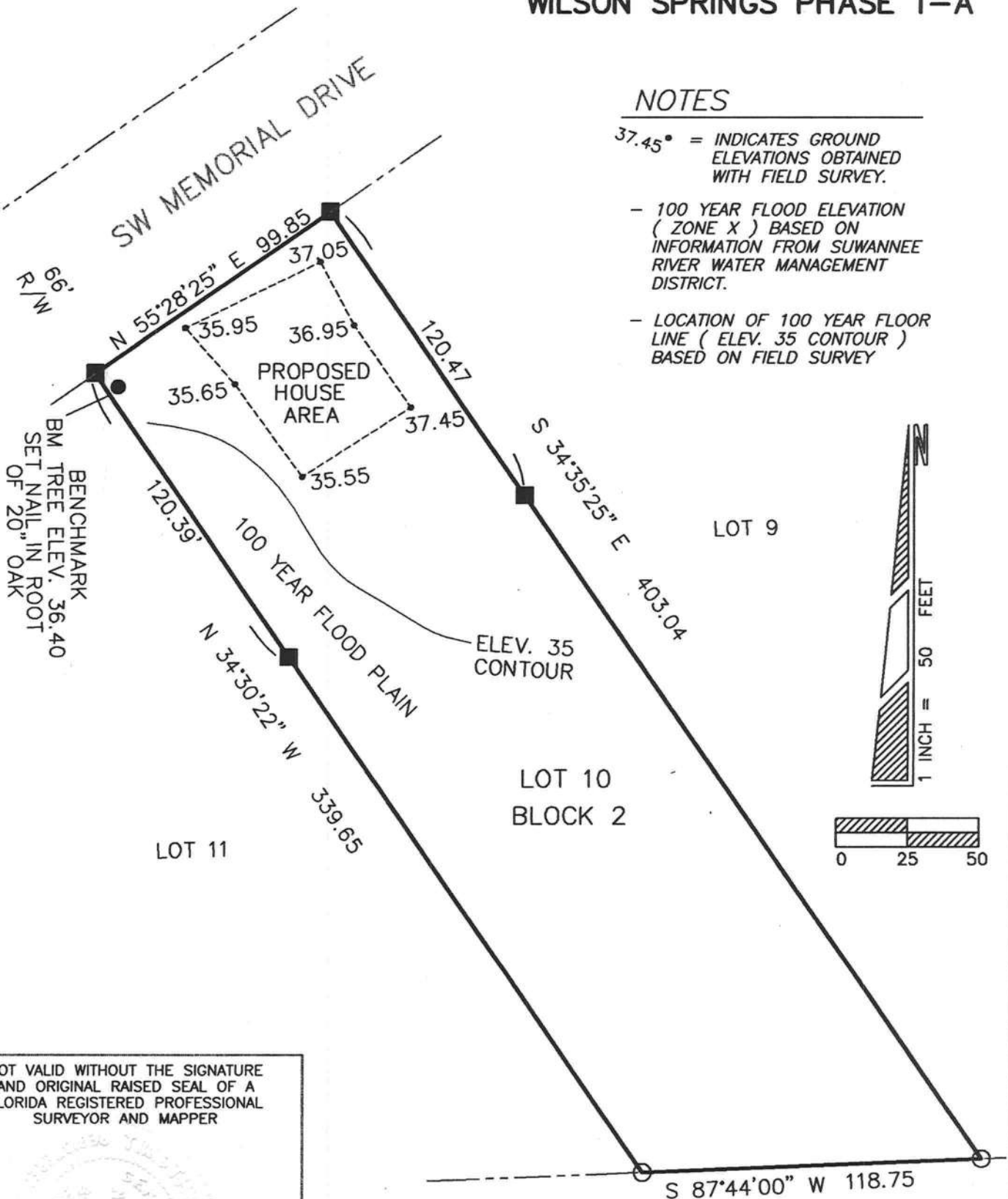
# FLOOD ZONE LOCATION LOT 10 BLOCK 2 WILSON SPRINGS PHASE 1-A

## NOTES

37.45\* = INDICATES GROUND ELEVATIONS OBTAINED WITH FIELD SURVEY.

- 100 YEAR FLOOD ELEVATION (ZONE X) BASED ON INFORMATION FROM SUWANNEE RIVER WATER MANAGEMENT DISTRICT.

- LOCATION OF 100 YEAR FLOOD LINE (ELEV. 35 CONTOUR) BASED ON FIELD SURVEY



NOT VALID WITHOUT THE SIGNATURE  
AND ORIGINAL RAISED SEAL OF A  
FLORIDA REGISTERED PROFESSIONAL  
SURVEYOR AND MAPPER

*Timothy A. Delbene*

Timothy A. Delbene, P.S.M.  
Florida Reg. No. 5594

DATE: 11/1/2001



**Donald F. Lee and Associates, Inc.**

SURVEYORS — ENGINEERS

950 South Ridgewood Drive, Lake City, Florida 32055

Phone: (386) 755-6166

FAX: (386) 755-6167

Certificate of Authorization #LB 7042

Date: 11-01-2001

Drafting: A V G

Computations: A V G

Checked: T A D

**GASTON MCCALL**

Scale: 1"=50'

Field Book: 01-331

Work Order: 01-3782

File: W.O.