

DATE 07/09/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022061

APPLICANT JOSEPH KLANDERUD PHONE 755.3791
ADDRESS RT. 29, BOX 1188 LAKE CITY FL 32055
OWNER JOE KLANDERUD PHONE 755.3791
ADDRESS 144 SW STAFFORD COURT LAKE CITY FL 32024
CONTRACTOR STEVE KLANDERUD PHONE
LOCATION OF PROPERTY -247-S TO CALLAHAN RD,L, GO TO PHEASANT WAY,R, GO TO STOP
SIGN, TUN L, NEXT STOP SIGN, L, LOT 61 ON LEFT.

TYPE DEVELOPMENT SFD & UTILITY ESTIMATED COST OF CONSTRUCTION 90650.00
HEATED FLOOR AREA 1813.00 TOTAL AREA 2385.00 HEIGHT 20.00 STORIES 1
FOUNDATION CONC WALLS FRAMED ROOF PITCH 8'12 FLOOR CONC
LAND USE & ZONING RSF-2 MAX. HEIGHT
Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 15-4S-16-03023-361 SUBDIVISION CALLAWAY
LOT 61 BLOCK PHASE 3 UNIT TOTAL ACRES .50

000000351 CBC053047
Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
18"X32"MITERED 04-0633-N BLK JLW
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: NOC ON FILE
1 FOOT ABOVE ROAD.

Check # or Cash 527

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power Foundation Monolithic
date/app. by date/app. by date/app. by
Under slab rough-in plumbing Slab Sheathing/Nailing
date/app. by date/app. by date/app. by
Framing Rough-in plumbing above slab and below wood floor
date/app. by date/app. by
Electrical rough-in Heat & Air Duct Peri. beam (Lintel)
date/app. by date/app. by date/app. by
Permanent power C.O. Final Culvert
date/app. by date/app. by date/app. by
M/H tie downs, blocking, electricity and plumbing Pool
date/app. by date/app. by
Reconnection Pump pole Utility Pole
date/app. by date/app. by date/app. by
M/H Pole Travel Trailer Re-roof
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 455.00 CERTIFICATION FEE \$ 11.93 SURCHARGE FEE \$ 11.93
MISC. FEES \$.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ WASTE FEE \$
FLOOD ZONE DEVELOPMENT FEE \$ CULVERT FEE \$ 25.00 TOTAL FEE 553.86

INSPECTORS OFFICE CLERKS OFFICE

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

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

This Permit Must Be Prominently Posted on Premises During Construction

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

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

THIS INSTRUMENT WAS PREPARED BY:

Inst:2004011671 Date:05/20/2004 Time:09:54

mk DC, P. DeWitt Cason, Columbia County B:1015 P:2974

TERRY McDAVID 04-389
POST OFFICE BOX 1328
LAKE CITY, FL 32056-1328

PERMIT NO. _____

TAX FOLIO NO.: Part of R03023-099

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF COLUMBIA

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

1. Description of property:

Lot 61, CALLAWAY PHASE THREE, a subdivision according to the plat thereof recorded in Plat Book 7, Pages 145-146 of the public records of Columbia County, Florida.

2. General description of improvement: Construction of Dwelling

3. Owner information:

a. Name and address: JOSEPH J. KLANDERUD,

Route 29, Box 1188, Lake City, FL 32024

Phone No.: (386) 867-9031

b. Interest in property: Fee Simple

c. Name and address of fee simple title holder (if other than Owner): None

4. Contractor: KLANDERS CONSTRUCTION

Post Office Box 3515, Lake City, FL 32056, Phone No. (386) 755-3791

5. Surety n/a

a. Name and address:

b. Amount of bond:

6. Lender: CHARLES M. MYERS and his wife, MARILEE I. MYERS

Post Office Box 2511, Lake City, FL 32056-2511

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a) 7., Florida Statutes: None

8. In addition to himself, Owner designates Charles M. Myers and Marilee I. Myers, Post Office Box 2511, Lake City, FL 32056-2511 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). May 12, 2005.

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

By Maui Keen

Deputy Clerk

Date May 20, 2004

JOSEPH J. KLANDERUD

The foregoing instrument was acknowledged before me this 12th day of May, 2004, by JOSEPH J. KLANDERUD, who is personally known to me and who did not take an oath.



Notary Public

My commission expires: _____

Columbia County Building Permit Application

For Office Use Only Application # 0406-31 Date Received 6/11/04 By JTW Permit # 22061
 Application Approved by - Zoning Official RJ Date 6/11/04 Plans Examiner RJ Date 6/11/04
 Flood Zone X Development Permit _____ Zoning RSF-2 Land Use Plan Map Category RCD
 Comments _____

Applicants Name Joseph J. KLANDERUD / KLANDE ^{CONS.} Phone 867-9031
 Address RT. 29 Box 1188 LAKE CITY Florida 32024
 Owners Name JOE KLANDERUD Phone _____
 911 Address 144 SW STAFFORD COURT, LAKE CITY, FL 32024
 Contractors Name KLANDERS Construction Phone 755 3791
 Address PO Box 3515 LAKE CITY Florida 32024
 Fee Simple Owner Name & Address Same as owner
 Bonding Co. Name & Address N/A
 Architect/Engineer Name & Address MARK DISOSWAY / Will MYERS - Craftsman
 Mortgage Lenders Name & Address CHARLES M. MYERS Post Office Box 2511 LAKE CITY Florida 32056
 Property ID Number BO 3023-099 (15-45-16) Estimated Cost of Construction \$123,000.00
 Subdivision Name GALLAWAY 361 Lot 61 Block _____ Unit _____ Phase _____
 Driving Directions S. 247 LEFT CALLAHAN RD, LEFT on GALLAWAY RD, Right Pheasant Go To Stop Sign then Left, NEXT Stop Sign LEFT, Lot 61 on LEFT.
 Type of Construction FRAMED - V-F-I Number of Existing Dwellings on Property None
 Total Acreage .5077 Lot Size _____ Do you need a YES Culvert Permit or Culvert Waiver or Have an Existing D
 Actual Distance of Structure from Property Lines - Front 35' Side 20' Side 20' Rear 133'
 Total Building Height 20' Number of Stories 1 Heated Floor Area 1813 sq' 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 all laws regulating construction in this jurisdiction.

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

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

Owner Builder or Agent (Including Contractor)

JOE KLANDERUD
 STATE OF FLORIDA
 COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me

this 11th day of June 2004

Personally known X or Produced Identification _____

351

Contractor Signature

Contractors License Number CB 6053047

Competency Card Number _____

NOTARY STAMP/SEA



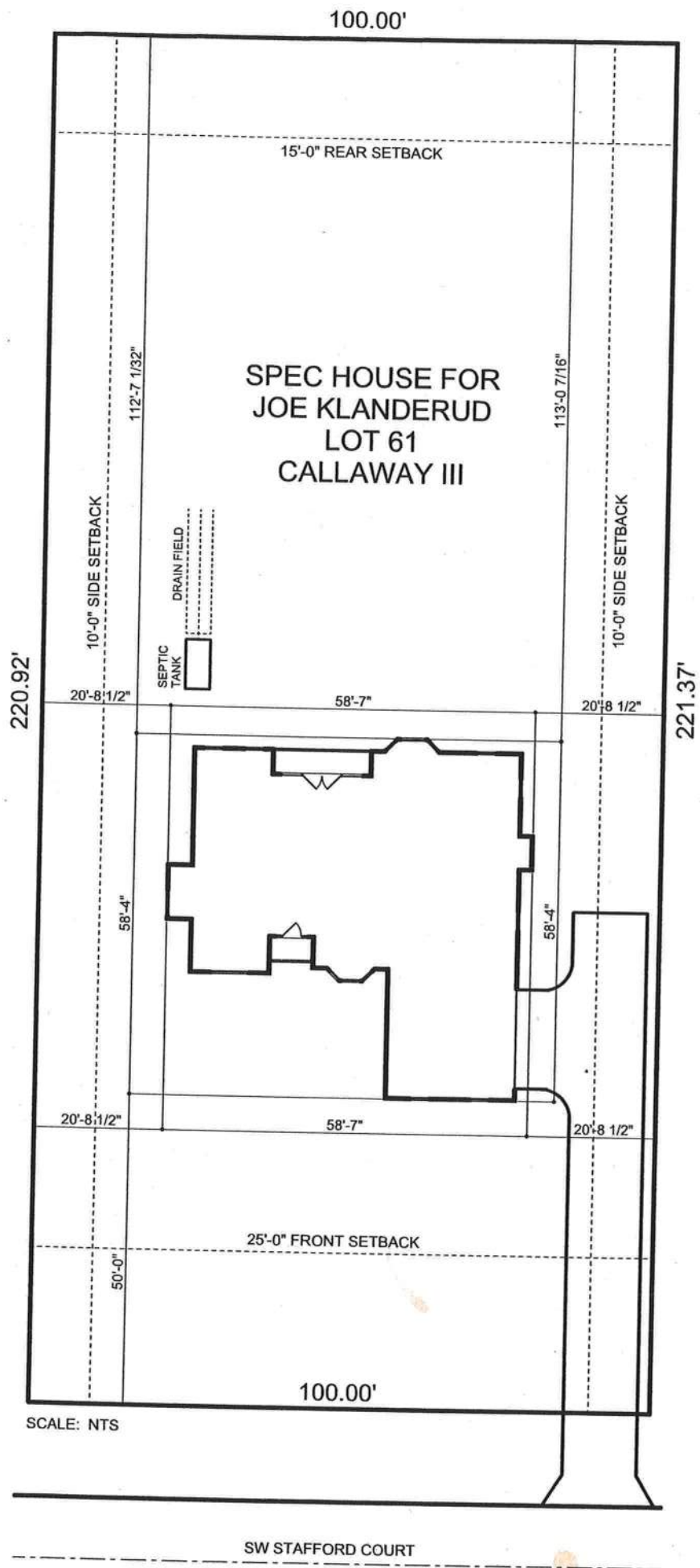
Austin Schlimmer

Commission # DD28808

Expires February 5, 2006

Bonded Troy Fain - Insurance, Inc. 800-385-70

Notary Signature



Contract For Sale And Purchase

FLORIDA ASSOCIATION OF REALTORS® AND THE FLORIDA BAR



1* **PARTIES:** Callaway Land Trust ("Seller"),
 2* and Joseph J. Klanderud ("Buyer"),

3 hereby agree that Seller shall sell and Buyer shall buy the following described Real Property and Personal Property (collectively "Property")
 4 pursuant to the terms and conditions of this Contract for Sale and Purchase and any riders and addenda ("Contract");

5 **I. DESCRIPTION:**

6* (a) Legal description of the Real Property located in Columbia County, Florida: _____
 7* Lot 61 Callaway Phase 3

8* _____
 9* (b) Street address, city, zip, of the Property: 144 SW Stafford Court ← Also (911 Number)

10 (c) Personal Property includes existing range, refrigerator, dishwasher, ceiling fans, light fixtures, and window treatments unless
 11 specifically excluded below. Parcel I.D. # 15-4S-16

12* Other items included are: no personal property 03023

13* _____
 14* Items of Personal Property (and leased items, if any) excluded are: _____
 15* _____

16* **II. PURCHASE PRICE** (U.S. currency): _____ \$ 22,900.00
 17 **PAYMENT:**

18* (a) Deposit held in escrow by _____ (Escrow Agent) in the amount of . . . \$ _____

19* (b) Additional escrow deposit to be made to Escrow Agent within _____ days after Effective Date

20* (see Paragraph III) in the amount of . . . \$ _____

21 (c) Assumption of existing mortgage in good standing (see Paragraph IV(c)) having an approximate

22* present principal balance of . . . \$ _____

23* (d) New mortgage financing with a Lender (see Paragraph IV(b)) in the amount of . . . \$ _____

24* (e) Purchase money mortgage and note to Seller (See Paragraph IV(d)) in the amount of . . . \$ _____

25* (f) Other: _____ \$ _____

26 (g) Balance to close by cash or LOCALLY DRAWN cashier's or official bank check(s), subject

27* to adjustments or prorations . . . \$ 22,900.00

28 **III. TIME FOR ACCEPTANCE OF OFFER AND COUNTEROFFERS; EFFECTIVE DATE:**

29 (a) If this offer is not executed by and delivered to all parties OR FACT OF EXECUTION communicated in writing between the parties on or

30* before _____, the deposit(s) will, at Buyer's option, be returned and this offer withdrawn. **UNLESS OTH-**

31 **ERWISE STATED, THE TIME FOR ACCEPTANCE OF ANY COUNTEROFFERS SHALL BE 2 DAYS FROM THE DATE THE COUN-**

32 **TEROFFER IS DELIVERED.**

33 (b) The date of Contract ("Effective Date") will be the date when the last one of the Buyer and Seller has signed or initialed this offer or the

34 final counteroffer. If such date is not otherwise set forth in this Contract, then the "Effective Date" shall be the date determined above for

35 acceptance of this offer or, if applicable, the final counteroffer.

36 **IV. FINANCING:**

37* ☐ (a) This is a cash transaction with no contingencies for financing;

38* ☒ (b) This Contract is contingent on Buyer obtaining approval of a loan ("Loan Approval") within _____ days after Effective Date for (CHECK

39* ONLY ONE): ☐ a fixed; ☐ an adjustable; or ☐ a fixed or adjustable rate loan, in the principal amount of \$ _____, at an initial inter-

40* est rate not to exceed _____%, discount and origination fees not to exceed _____% of principal amount, and for a term of _____

41* years. Buyer will make application within _____ days (if blank, then 5 days) after Effective Date and use reasonable diligence to obtain Loan

42 Approval and, thereafter, to satisfy terms and conditions of the Loan Approval and close the loan. Buyer shall pay all loan expenses. If Buyer

43 fails to obtain a Loan Approval or fails to waive Buyer's rights under this subparagraph within the time for obtaining Loan Approval or, after

44 diligent, good faith effort, fails to meet the terms and conditions of the Loan Approval by Closing, then either party thereafter, by written notice

45 to the other, may cancel this Contract and Buyer shall be refunded the deposit(s);

46* ☐ (c) Assumption of existing mortgage (see rider for terms); or

47* ☐ (d) Seller financing (see Standard B and riders; addenda; or special clauses for terms).

48* **V. TITLE EVIDENCE:** At least _____ days (if blank, then 5 days) before Closing:

49* ☒ (a) Title insurance commitment with legible copies of instruments listed as exceptions attached thereto ("Title Commitment") and, after

50* Closing, an owner's policy of title insurance (see Standard A for terms); or ☐ (b) Abstract of title or other evidence of title (see rider for terms),

51* shall be obtained by (CHECK ONLY ONE): ☒ (1) Seller, at Seller's expense and delivered to Buyer or Buyer's attorney; or

52* ☐ (2) Buyer at Buyer's expense.

53* **VI. CLOSING DATE:** This transaction shall be closed and the closing documents delivered on on or before 6/1/04 ("Closing"), unless

54 modified by other provisions of this Contract. If Buyer is unable to obtain Hazard, Wind, Flood, or Homeowners' insurance at a reasonable rate

55 due to extreme weather conditions, Buyer may delay Closing for up to 5 days after such coverage becomes available.

56 **VII. RESTRICTIONS; EASEMENTS; LIMITATIONS:** Seller shall convey marketable title subject to: comprehensive land use plans, zoning,

57 restrictions, prohibitions and other requirements imposed by governmental authority; restrictions and matters appearing on the plat or otherwise

58 common to the subdivision; outstanding oil, gas and mineral rights of record without right of entry; unplatted public utility easements of record

59 (located contiguous to real property lines and not more than 10 feet in width as to the rear or front lines and 7 1/2 feet in width as to the side



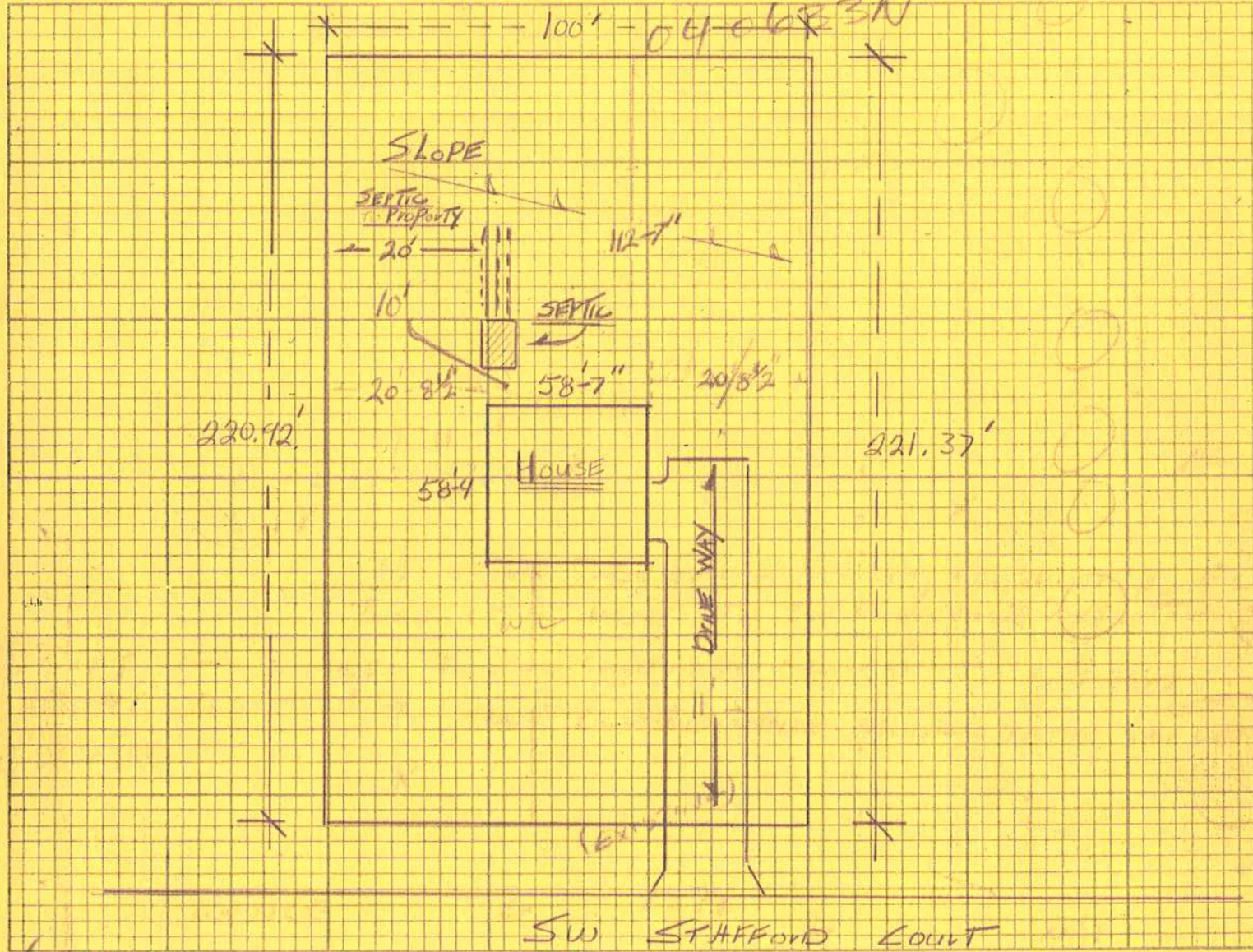
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 04-06331

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes:

Site Plan submitted by: [Signature]

Signature

OWNER
Title

Plan Approved [Signature]

Not Approved [Signature]

Date 6-8-04

By [Signature]

Salbi Yadd
ESI - COLUMBIA

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name: **Joe Klanderud**
Address:
City, State: **Lake City, FL 32024-**
Owner: **spec house**
Climate Zone: **North**

Builder: **Joe Klanderud**
Permitting Office: **Columbia**
Permit Number:
Jurisdiction Number: **221000**

1. New construction or existing	New	___	12. Cooling systems		
2. Single family or multi-family	Single family	___	a. Central Unit	Cap: 40.0 kBtu/hr	___
3. Number of units, if multi-family	1	___		SEER: 11.50	___
4. Number of Bedrooms	3	___	b. N/A		___
5. Is this a worst case?	No	___	c. N/A		___
6. Conditioned floor area (ft ²)	1813 ft ²	___	13. Heating systems		
7. Glass area & type		___	a. Electric Heat Pump	Cap: 40.0 kBtu/hr	___
a. Clear - single pane	0.0 ft ²	___		HSPF: 7.40	___
b. Clear - double pane	333.0 ft ²	___	b. N/A		___
c. Tint/other SHGC - single pane	0.0 ft ²	___	c. N/A		___
d. Tint/other SHGC - double pane	0.0 ft ²	___	14. Hot water systems		
8. Floor types		___	a. Electric Resistance	Cap: 50.0 gallons	___
a. Slab-On-Grade Edge Insulation	R=0.0, 210.0(p) ft	___		EF: 0.90	___
b. N/A		___	b. N/A		___
c. N/A		___	c. Conservation credits		___
9. Wall types		___	(HR-Heat recovery, Solar		___
a. Frame, Wood, Exterior	R=13.0, 1258.0 ft ²	___	DHP-Dedicated heat pump)		___
b. Frame, Wood, Adjacent	R=13.0, 175.0 ft ²	___	15. HVAC credits		___
c. N/A		___	(CF-Ceiling fan, CV-Cross ventilation,		___
d. N/A		___	HF-Whole house fan,		___
e. N/A		___	PT-Programmable Thermostat,		___
10. Ceiling types		___	MZ-C-Multizone cooling,		___
a. Under Attic	R=30.0, 2075.0 ft ²	___	MZ-H-Multizone heating)		___
b. N/A		___			___
c. N/A		___			___
11. Ducts		___			___
a. Sup: Unc. Ret: Unc. AH: Garage	Sup. R=6.0, 55.0 ft	___			___
b. N/A		___			___

Glass/Floor Area: 0.18

Total as-built points: 26603

Total base points: 27016

PASS

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

PREPARED BY: Will Myers

DATE: 4.15.04

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

OWNER/AGENT: _____

DATE: _____

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

BUILDING OFFICIAL: _____

DATE: _____



SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , Lake City, FL, 32024-

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES .18 X Conditioned X BSPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt			Area X SPM X SOF = Points			
.18	1813.0	20.04	6539.9	Double, Clear	W	1.5	6.0	45.0	36.99	0.91	1520.2
				Double, Clear	W	5.5	7.7	80.0	36.99	0.61	1818.7
				Double, Clear	SW	1.5	6.0	10.0	38.46	0.89	340.4
				Double, Clear	W	1.5	6.0	20.0	36.99	0.91	675.6
				Double, Clear	NW	1.5	6.0	10.0	25.46	0.93	235.6
				Double, Clear	N	1.5	6.0	30.0	19.22	0.94	541.2
				Double, Clear	NE	1.5	9.0	10.0	28.72	0.97	279.5
				Double, Clear	E	1.5	9.0	60.0	40.22	0.97	2340.4
				Double, Clear	SE	1.5	9.0	10.0	40.86	0.96	393.4
				Double, Clear	E	5.5	10.7	20.0	40.22	0.72	575.6
				Double, Clear	E	5.5	10.7	22.0	40.22	0.72	633.2
				Double, Clear	S	1.5	5.0	16.0	34.50	0.81	445.4
				As-Built Total:			333.0			9799.2	
WALL TYPES Area X BSPM = Points				Type	R-Value			Area X SPM = Points			
Adjacent	175.0	0.70	122.5	Frame, Wood, Exterior	13.0			1258.0	1.50	1887.0	
Exterior	1258.0	1.70	2138.6	Frame, Wood, Adjacent	13.0			175.0	0.60	105.0	
Base Total: 1433.0 2261.1				As-Built Total:			1433.0			1992.0	
DOOR TYPES Area X BSPM = Points				Type				Area X SPM = Points			
Adjacent	17.0	2.40	40.8	Adjacent Insulated				17.0	1.60	27.2	
Exterior	20.0	6.10	122.0	Exterior Insulated				20.0	4.10	82.0	
Base Total: 37.0 162.8				As-Built Total:			37.0			109.2	
CEILING TYPES Area X BSPM = Points				Type	R-Value			Area X SPM X SCM = Points			
Under Attic	1813.0	1.73	3136.5	Under Attic	30.0			2075.0	1.73 X 1.00	3589.8	
Base Total: 1813.0 3136.5				As-Built Total:			2075.0			3589.8	
FLOOR TYPES Area X BSPM = Points				Type	R-Value			Area X SPM = Points			
Slab	210.0(p)	-37.0	-7770.0	Slab-On-Grade Edge Insulation	0.0			210.0(p)	-41.20	-8652.0	
Raised	0.0	0.00	0.0								
Base Total: -7770.0				As-Built Total:			210.0			-8652.0	

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

ADDRESS: , Lake City, FL, 32024-

PERMIT #:

BASE				AS-BUILT				
INFILTRATION Area X BSPM = Points				Area X SPM = Points				
1813.0 10.21 18510.7				1813.0 10.21 18510.7				
Summer Base Points: 22841.0				Summer As-Built Points: 25348.9				
Total Summer X System = Cooling Points Multiplier Points				Total X Cap X Duct X System X Credit = Cooling Component Ratio Multiplier Multiplier Multiplier Points (DM x DSM x AHU)				
22841.0 0.4266 9744.0				25348.9 1.000 (1.090 x 1.147 x 1.00) 0.297 1.000 9405.6 25348.9 1.00 1.250 0.297 1.000 9405.6				

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , Lake City, FL, 32024-

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt			Area X WPM X WOF = Points			
.18	1813.0	12.74	4157.6	Double, Clear	W	1.5	6.0	45.0	10.77	1.02	495.8
				Double, Clear	W	5.5	7.7	80.0	10.77	1.13	972.7
				Double, Clear	SW	1.5	6.0	10.0	7.17	1.06	76.0
				Double, Clear	W	1.5	6.0	20.0	10.77	1.02	220.4
				Double, Clear	NW	1.5	6.0	10.0	14.03	1.00	140.7
				Double, Clear	N	1.5	6.0	30.0	14.30	1.00	430.1
				Double, Clear	NE	1.5	9.0	10.0	13.40	1.00	134.1
				Double, Clear	E	1.5	9.0	60.0	9.09	1.02	554.0
				Double, Clear	SE	1.5	9.0	10.0	5.33	1.04	55.3
				Double, Clear	E	5.5	10.7	20.0	9.09	1.13	204.7
				Double, Clear	E	5.5	10.7	22.0	9.09	1.13	225.1
				Double, Clear	S	1.5	5.0	16.0	4.03	1.20	77.2
				As-Built Total:			333.0		3586.2		
WALL TYPES Area X BWPM = Points				Type	R-Value		Area X WPM		= Points		
Adjacent	175.0	3.60	630.0	Frame, Wood, Exterior	13.0		1258.0	3.40	4277.2		
Exterior	1258.0	3.70	4654.6	Frame, Wood, Adjacent	13.0		175.0	3.30	577.5		
Base Total:				As-Built Total:		1433.0		4854.7			
DOOR TYPES Area X BWPM = Points				Type	R-Value		Area X WPM		= Points		
Adjacent	17.0	11.50	195.5	Adjacent Insulated			17.0	8.00	136.0		
Exterior	20.0	12.30	246.0	Exterior Insulated			20.0	8.40	168.0		
Base Total:				As-Built Total:		37.0		304.0			
CEILING TYPES Area X BWPM = Points				Type	R-Value		Area X WPM X WCM		= Points		
Under Attic	1813.0	2.05	3716.6	Under Attic	30.0		2075.0	2.05 X 1.00	4253.8		
Base Total:				As-Built Total:		2075.0		4253.8			
FLOOR TYPES Area X BWPM = Points				Type	R-Value		Area X WPM		= Points		
Slab	210.0(p)	8.9	1869.0	Slab-On-Grade Edge Insulation	0.0		210.0(p)	18.80	3948.0		
Raised	0.0	0.00	0.0								
Base Total:				As-Built Total:		210.0		3948.0			

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , Lake City, FL, 32024-

PERMIT #:

BASE				AS-BUILT						
INFILTRATION Area X BWPM = Points				Area X WPM = Points						
1813.0 -0.59 -1069.7				1813.0 -0.59 -1069.7						
Winter Base Points:		14399.7		Winter As-Built Points:			15877.0			
Total Winter Points	X	System Multiplier	= Heating Points	Total Component	X	Cap Ratio	X Duct Multiplier	X System Multiplier	X Credit Multiplier	= Heating Points
				(DM x DSM x AHU)						
14399.7		0.6274	9034.3	15877.0	1.000	(1.069 x 1.169 x 1.00)	0.461	1.000		9142.9
				15877.0	1.00	1.250	0.461	1.000		9142.9

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: , Lake City, FL, 32024-

PERMIT #:

BASE				AS-BUILT					
WATER HEATING									
Number of Bedrooms	X	Multiplier	= Total	Tank Volume	EF	Number of Bedrooms	X	Tank X Ratio	Multiplier X Credit = Total Multiplier
3		2746.00	8238.0	50.0	0.90	3		1.00	2684.98
				As-Built Total:					8054.9

CODE COMPLIANCE STATUS							
BASE				AS-BUILT			
Cooling Points	+	Heating Points	+ Hot Water Points = Total Points	Cooling Points	+	Heating Points	+ Hot Water Points = Total Points
9744		9034	8238 27016	9406		9143	8055 26603

PASS



Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: , Lake City, FL, 32024-

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

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

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 82.9

The higher the score, the more efficient the home.

spec house, , Lake City, FL, 32024-

1. New construction or existing	New	___	12. Cooling systems	
2. Single family or multi-family	Single family	___	a. Central Unit	Cap: 40.0 kBtu/hr
3. Number of units, if multi-family	1	___		SEER: 11.50
4. Number of Bedrooms	3	___	b. N/A	___
5. Is this a worst case?	No	___	c. N/A	___
6. Conditioned floor area (ft ²)	1813 ft ²	___		___
7. Glass area & type		___	13. Heating systems	
a. Clear - single pane	0.0 ft ²	___	a. Electric Heat Pump	Cap: 40.0 kBtu/hr
b. Clear - double pane	333.0 ft ²	___		HSPF: 7.40
c. Tint/other SHGC - single pane	0.0 ft ²	___	b. N/A	___
d. Tint/other SHGC - double pane	0.0 ft ²	___	c. N/A	___
8. Floor types		___	14. Hot water systems	
a. Slab-On-Grade Edge Insulation	R=0.0, 210.0(p) ft	___	a. Electric Resistance	Cap: 50.0 gallons
b. N/A	___	___		EF: 0.90
c. N/A	___	___	b. N/A	___
9. Wall types		___	c. Conservation credits	___
a. Frame, Wood, Exterior	R=13.0, 1258.0 ft ²	___	(HR-Heat recovery, Solar	___
b. Frame, Wood, Adjacent	R=13.0, 175.0 ft ²	___	DHP-Dedicated heat pump)	___
c. N/A	___	___	15. HVAC credits	___
d. N/A	___	___	(CF-Ceiling fan, CV-Cross ventilation,	___
e. N/A	___	___	HF-Whole house fan,	___
10. Ceiling types		___	PT-Programmable Thermostat,	___
a. Under Attic	R=30.0, 2075.0 ft ²	___	MZ-C-Multizone cooling,	___
b. N/A	___	___	MZ-H-Multizone heating)	___
c. N/A	___	___		___
11. Ducts		___		___
a. Sup: Unc. Ret: Unc. AH: Garage	Sup. R=6.0, 55.0 ft	___		___
b. N/A	___	___		___

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

Builder Signature: _____

Date: _____

Address of New Home: _____

City/FL Zip: _____



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

EnergyGauge® (Version: FLR1PB v3.22)

Columbia County Building Department Culvert Permit

Culvert Permit No.
000000351

DATE 07/09/2004 PARCEL ID # 15-4S-16-03023-361
APPLICANT JOSEPH KLANDERUD PHONE 386.755.3791
ADDRESS RT. 29, BOX 1188 LAKE CITY FL 32024
OWNER JOE KLNADERUD PHONE 755.3791
ADDRESS _____ FL _____
CONTRACTOR STEVE KLANDERUD PHONE 755.3791
LOCATION OF PROPERTY C-247-S TO CALLAHAN RD, L, R, N PHEASANT WAY, GO TO STOP SIGN, TURN
L, NEXT STOP SIGN, L, LOT 61 ON L.
SUBDIVISION/LOT/BLOCK/PHASE/UNIT CALLAWAY 61 3

SIGNATURE

INSTALLATION REQUIREMENTS



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

INSTALLATION NOTE: Turnouts will be required as follows:

a) a majority of the current and existing driveway turnouts are paved, or;

b) the driveway to be served will be paved or formed with concrete.

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



Culvert installation shall conform to the approved site plan standards.



Department of Transportation Permit installation approved standards.



Other _____

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

135 NE Hernando Ave., Suite B-21
Lake City, FL 32055
Phone: 386-758-1008 Fax: 386-758-2160

Amount Paid 25.00



New Construction Subterranean Termite Soil Treatment Record

OMB Approval No. 2502-0525
(exp. 10/31/2005)

This form is completed by the licensed Pest Control Company

Public reporting burden for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This information is mandatory and is required to obtain benefits. HUD may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Section 24 CFR 200.926d(b)(3) requires that the sites for HUD insured structures must be free of termite hazards. This information collection requires the builder to certify that an authorized Pest Control company performed all required treatment for termites, and that the builder guarantees the treated area against infestation for one year. Builders, pest control companies, mortgage lenders, homebuyers, and HUD as a record of treatment for specific homes will use the information collected. The information is not considered confidential.

This report is submitted for informational purposes to the builder on proposed (new) construction cases when soil treatment for prevention of subterranean termite infestation is specified by the builder, architect, or required by the lender, architect, FHA, or VA.

All contracts for services are between the Pest Control Operator and builder, unless stated otherwise.

Section 1: General Information (Treating Company Information)

Company Name: Aspen Pest Control, Inc.
Company Address: 301 NW Cole Terrace City: Lake City State: FL Zip: 32055
Company Business License No. JB109476 Company Phone No. 386-755-3611
FHA/VA Case No. (if any) _____

Section 2: Builder Information

Company Name: Klondike Const Phone No. _____

Section 3: Property Information

Location of Structure (s) Treated (Street Address or Legal Description, City, State and Zip)

Type of Construction (More than one box may be checked) ☒ Slab ☐ Basement ☐ Crawl ☐ Other _____
Approximate Depth of Footing: Outside 12 Inside 24 Type of Fill Dirt

Section 4: Treatment Information

Date(s) of Treatment(s) 7-30-04
Brand Name of Product(s) Used GroundGuard
EPA Registration No. 70907-7-53843
Approximate Final Mix Solution % 0.5
Approximate Size of Treatment Area: Sq. ft. 2380 Linear ft. 223 Linear ft. of Masonry Voids 223
Approximate Total Gallons of Solution Applied _____
Was treatment completed on exterior? ☐ Yes ☒ No
Service Agreement Available? ☒ Yes ☐ No
Note: Some state laws require service agreements to be issued. This form does not preempt state law.

Attachments (List) _____

Comments _____

Name of Applicator(s) Steve Brenner

JF104376

Certification No. (if required by State law) _____

The applicator has used a product in accordance with the product label and state requirements. All treatment materials and methods used comply with state and federal regulations.

Authorized Signature [Signature] Date 7-30-04

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Form NPCA-99-B may still be used

Reorder Product #2581 • From CROWN GRAPHICS • 1-800-252-4011

form HUD-NPCA-99-B (04/2003)

**CERTIFICATE OF
OCCUPANCY**

OCCUPANCY

COLUMBIA COUNTY, FLORIDA

Department of Building and Zoning Inspection

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

Parcel Number 15-4S-16-03023-361

Building permit No. 000022061

Use Classification SFD & UTILITY

Fire: 34.02

Permit Holder STEVE KLANDERUD

Waste: 73.50

Owner of Building JOE KLANDERUD

Total: 107.52

Location: 144 SW STAFFORD CT (CALLAWAY, LOT 61)

Date: 02/28/2005



Building Inspector

**POST IN A CONSPICUOUS PLACE
(Business Places Only)**

