

DATE 11/18/2009

Columbia County Building Permit  
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT  
000028228

APPLICANT JOE WILLIAMS PHONE 755-3139  
ADDRESS 319 SW SOLSTICE CT LAKE CITY FL 32024  
OWNER RICHARD & RENA SCAFF PHONE \_\_\_\_\_  
ADDRESS 818 SW MANATEE ST. FT. WHITE FL 32038  
CONTRACTOR LITTLE & WILLIAMS, INC PHONE 755-3139  
LOCATION OF PROPERTY 47S, TR WILSON SPRINGS RD, TR NEWARK, TL ON BRIDGE, TR  
ON MANATEE, 1/8 TO 1/4 MILE ON LEFT, 3RD LOT PAST OHIO PLACE  
TYPE DEVELOPMENT SFD, UTILITY ESTIMATED COST OF CONSTRUCTION 64600.00  
HEATED FLOOR AREA 1292.00 TOTAL AREA 1292.00 HEIGHT \_\_\_\_\_ STORIES 1  
FOUNDATION CONC WALLS FRAMED ROOF PITCH 4/12 FLOOR SLAB  
LAND USE & ZONING ESA-2 MAX. HEIGHT \_\_\_\_\_  
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00  
NO. EX.D.U. 0 FLOOD ZONE AE DEVELOPMENT PERMIT NO. 09-009

PARCEL ID 36-6S-15-00579-000 SUBDIVISION 3 RIVERS ESTATES  
LOT 20 BLOCK \_\_\_\_\_ PHASE \_\_\_\_\_ UNIT \_\_\_\_\_ TOTAL ACRES 1.23

CGC003903  
Culvert Permit No. \_\_\_\_\_ Culvert Waiver \_\_\_\_\_ Contractor's License Number \_\_\_\_\_ Applicant/Owner/Contractor \_\_\_\_\_  
EXISTING 09-460 BK WR Y  
Driveway Connection \_\_\_\_\_ Septic Tank Number \_\_\_\_\_ LU & Zoning checked by \_\_\_\_\_ Approved for Issuance \_\_\_\_\_ New Resident \_\_\_\_\_

COMMENTS: PRE-EXISTING SETBACKS NOT INCREASING THE NON-CONFORMITY,  
NOC ON FILE, MFE @ 35', ELEVATION CERTIFICATE NEEDED BEFORE

POWER \_\_\_\_\_ Check # or Cash 4808

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 \_\_\_\_\_ Insulation \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
Rough-in plumbing above slab and below wood floor \_\_\_\_\_ Electrical rough-in \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
Heat & Air Duct \_\_\_\_\_ Peri. beam (Lintel) \_\_\_\_\_ Pool \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
Permanent power \_\_\_\_\_ C.O. Final \_\_\_\_\_ Culvert \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
Pump pole \_\_\_\_\_ Utility Pole \_\_\_\_\_ M/H tie downs, blocking, electricity and plumbing \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_  
Reconnection \_\_\_\_\_ RV \_\_\_\_\_ Re-roof \_\_\_\_\_  
date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_ date/app. by \_\_\_\_\_

BUILDING PERMIT FEE \$ 325.00 CERTIFICATION FEE \$ 6.46 SURCHARGE FEE \$ 6.46  
MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$ \_\_\_\_\_  
FLOOD DEVELOPMENT FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ \_\_\_\_\_ TOTAL FEE 462.92 ✓  
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."

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 THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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



## Columbia County Building Permit Application

SWRMD

For Office Use Only Application # 0911-11 Date Received 11/9 By JW Permit # 28228  
 Zoning Official BLK Date 16.11.09 Flood Zone AE Land Use Environ. Sens. Zoning ESA-2  
 FEMA Map # 0467C Elevation 34' (88) MFE 35' (88) River Santa Fe Plans Examiner (WBE) Date 11/12/09  
 Comments Pre-existing setbacks not increasing the non-conformity  
☒ NOC ☐ EH ☐ Deed or PA ☐ Site Plan ☐ State Road Info ☐ Parent Parcel # \_\_\_\_\_  
☐ Dev Permit # 09-009 ☒ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter  
 IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_ Road/Code \_\_\_\_\_  
 School \_\_\_\_\_ = TOTAL N/A Replacing Existing ☒ V F Structure

Septic Permit No. 09-0460-E

Fax \_\_\_\_\_

Name Authorized Person Signing Permit Joe WilliamsPhone 386 755-3139Address 319 SW Solstice Ct., Lake City, FL 32024Owners Name Richard and Rena Scaff

Phone \_\_\_\_\_

911 Address 818 Manatee St., Fort White, FL 32038Contractors Name Little & Williams, Inc.Phone 386 755-3139Address 319 SW Solstice Ct., Lake City, FL 32024

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

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

Architect/Engineer Name & Address NICHOLAS GEISLER, PEMortgage Lenders Name & Address CASHCircle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress EnergyProperty ID Number 00-00-00-00579-000 Estimated Cost of Construction \$137,710.00Subdivision Name Three Rivers EstatesLot 20 Block \_\_\_\_\_ Unit 2 Phase \_\_\_\_\_

Driving Directions 47-5 TO US 27, TR TO WILSON SPRINGS RD, TL  
Go to stop sign, TR newark 1/4 mile to BRIDGE BLVD, TL TO MANATEE, TR  
Approx 1/8 to 1/4 to Vite ON L. 3rd lot past Ohio Place  
 Number of Existing Dwellings on Property 0

Construction of SEDITotal Acreage 1.23 Lot Size \_\_\_\_\_Do you need a - Culvert Permit or Culvert Waiver or Have an Existing DriveTotal Building Height 50'Actual Distance of Structure from Property Lines - Front 290 Side 23' Side 23' Rear 200'Number of Stories 1 Heated Floor Area 1292 Total Floor Area 1292 Roof Pitch 4/12

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.



## Columbia County Building Permit Application

**TIME LIMITATIONS OF APPLICATION :** An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless 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. It may be to your advantage to check and see if your property is encumbered by any restrictions.

  
  
Owners Signature

(Owners Must Sign All Applications Before Permit Issuance.)

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

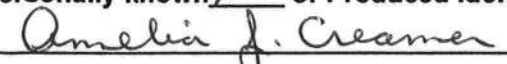
**CONTRACTORS AFFIDAVIT:** By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

  
Contractor's Signature (Permitee)

Contractor's License Number CGC 003903  
Columbia County  
Competency Card Number \_\_\_\_\_

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 26<sup>th</sup> day of October 2009.

Personally known ☒ or Produced Identification \_\_\_\_\_

  
State of Florida Notary Signature (For the Contractor)

SEAL:



AMELIA J. CREAMER  
Notary Public, State of Florida  
My Comm. Expires March 10, 2013  
Commission No. DD 858805

District No. 1 - Ronald Williams  
District No. 2 - Dewey Weaver  
District No. 3 - Jody DuPree  
District No. 4 - Stephen E. Bailey  
District No. 5 - Scarlet P. Frisina



## BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

### MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This completed form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

The attached elevation certificate requires corrections by the surveyor of section(s) \_\_\_\_\_ prior to acceptance by the community.

The attached elevation certificated is complete and correct.

Minor corrections have been made in the below marked sections by the authorized Community Official.

#### SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name	For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <u>818 SW Manatee Street</u>	Policy Number
City _____ State _____ ZIP Code _____	Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)	

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) \_\_\_\_\_

A5. Latitude/Longitude: Lat. \_\_\_\_\_ Long. \_\_\_\_\_ Horizontal Datum: ☐ NAD 1927 ☐ NAD 1983

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

A7. Building Diagram Number \_\_\_\_\_

A8. For a building with a crawl space or enclosure(s), provide:

- a) Square footage of crawl space or enclosure(s) \_\_\_\_\_ sq ft
- b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade \_\_\_\_\_
- c) Total net area of flood openings in A8.b \_\_\_\_\_ sq in

A9. For a building with an attached garage, provide:

- a) Square footage of attached garage \_\_\_\_\_ sq ft
- b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade \_\_\_\_\_
- c) Total net area of flood openings in A9.b \_\_\_\_\_ sq in

#### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number		B2. County Name		B3. State	
B4. Map/Parcel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)

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) \_\_\_\_\_

B11. 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 ☐ No  
Designation Date \_\_\_\_\_ ☐ CBRS ☐ OPA

#### COMMENTS:

Date of Review:

3 May 2010

BOARD MEETS FIRST THURSDAY AT 7 00 P.M.

AND THE COMMUNITY OFFICIAL:

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

P. O. BOX 1529

LAKE CITY, FLORIDA 32056-1529

PHONE (386) 755-4166



# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Richard Scaff	For Insurance Company Use: Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. SW Manatee Terrace City Ft White State FL ZIP Code 32038	Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 20, Three Rivers Estates Unit 2 - Columbia County	
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>	
A5. Latitude/Longitude: Lat. <u>29°55.399</u> Long. <u>82°46.220</u>	Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.	
A7. Building Diagram Number <u>5</u>	
A8. For a building with a crawlspace or enclosure(s): a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A8.b <u>N/A</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No	A9. For a building with an attached garage: a) Square footage of attached garage <u>N/A</u> sq ft b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u> c) Total net area of flood openings in A9.b <u>N/A</u> sq in d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Columbia County, FL 120070		B2. County Name Columbia		B3. State Florida	
B4. Map/Panel Number 12023C0467	B5. Suffix C	B6. FIRM Index Date 2/4/09	B7. FIRM Panel Effective/Revised Date 2/4/09	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 34
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> 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 Local Vertical Datum NAVD1988  
Conversion/Comments \_\_\_\_\_

Check the measurement used.

a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>35.99</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only) <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab) <u>N/A</u>	<input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>35.87</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade next to building (LAG) <u>23.0</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade next to building (HAG) <u>22.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>22.5</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> 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 ☐ No

Certifier's Name Timothy A. Delbene	License Number LS 5594
Title Land Surveyor & Mapper	Company Name Donald F. Lee & Associates, Inc.
Address 140 NW Ridgewood Ave.	City Lake City State FL ZIP Code 32055

Signature Timothy A. Delbene Date 4/22/2010 Telephone 286 755 6166

PLACE  
SEAL  
HERE



**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

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

SW Manatee Terrace

City Ft White State FL ZIP Code 32038

For Insurance Company Use:

Policy Number

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 Mechanical Equipment is an Air conditioning unit (at upper deck level). The house is structurally complete...some finish work is still underway. House is described hereon as "finished construction".

Signature

Date 4/22/2010

☐ 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 C2.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

Timothy Delbene

Address 140 NW Ridgewood Ave

City Lake City

State FL

ZIP Code 32055

Signature

Date 4/22/2010

Telephone 386-755-6166

Comments Donald F. Lee &amp; Associates, Inc. - Land Surveyors

☐ 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



## 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. SW Manatee Terrace	For Insurance Company Use: Policy Number
City Ft White State FL ZIP Code 32038	Company NAIC Number
<p>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.</p>	



FRONT VIEW OF HOUSE



REAR VIEW OF HOUSE



# Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. SW Manatee Terrace	For Insurance Company Use: Policy Number
City Ft White State FL ZIP Code 32038	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."



RIGHT SIDE VIEW OF HOUSE



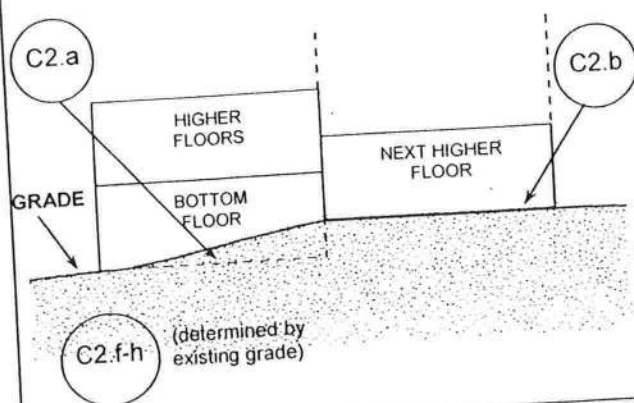
LEFT SIDE VIEW OF HOUSE



**DIAGRAM 3**

All split-level buildings that are slab-on-grade, either detached or row type (e.g., townhouses); with or without attached garage.

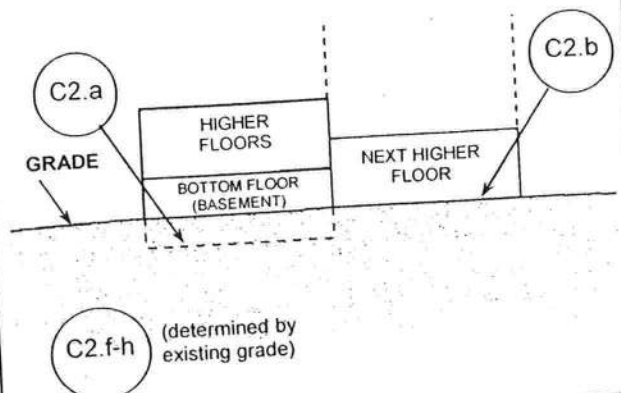
Distinguishing Feature – The bottom floor (excluding garage) is at or above ground level (grade) on at least one side.\*



**DIAGRAM 4**

All split-level buildings (other than slab-on-grade), either detached or row type (e.g., townhouses); with or without attached garage.

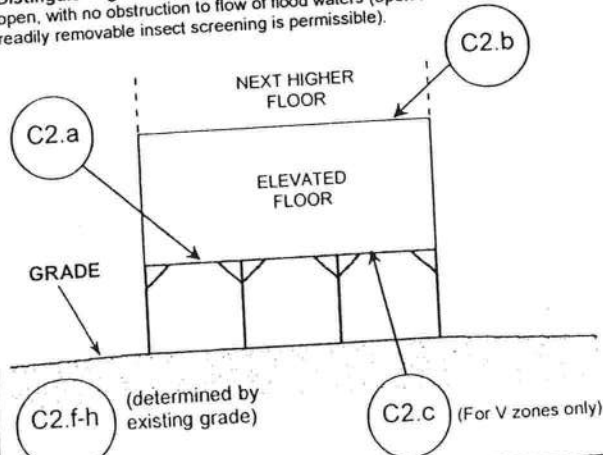
Distinguishing Feature – The bottom floor (basement or underground garage) is below ground level (grade) on all sides.\*



**DIAGRAM 5**

All buildings elevated on piers, posts, piles, columns, or parallel shear walls. No obstructions below the elevated floor.

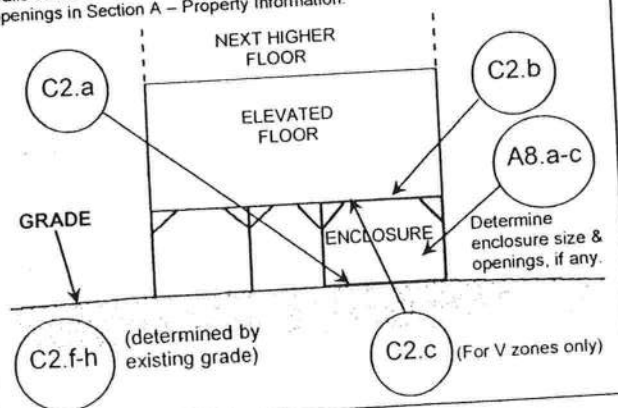
Distinguishing Feature – For all zones, the area below the elevated floor is open, with no obstruction to flow of flood waters (open lattice work and/or readily removable insect screening is permissible).



**DIAGRAM 6**

All buildings elevated on piers, posts, piles, columns, or parallel shear walls with full or partial enclosure below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings\*\* present in the walls of the enclosure. Indicate information about enclosure size and openings in Section A – Property Information.



\* A floor that is below ground level (grade) on all sides is considered a basement even if the floor is used for living purposes, or as an office, garage, workshop, etc.

\*\* An "opening" is a permanent opening that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawlspaces. The openings shall provide a total net area of not less than one square inch for every square foot of area enclosed, excluding any bars, louvers, or other covers of the opening. Alternatively, an Individual Engineered Flood Openings Certification or an Evaluation Report issued by the International Code Council Evaluation Service (ICC ES) must be submitted to document that the design of the openings will allow for the automatic equalization of hydrostatic flood forces on exterior walls. A window, a door, or a garage door is not considered an opening; openings may be installed in doors. Openings shall be on at least two sides of the enclosed area. If a building has more than one enclosed area, each area must have openings to allow floodwater to directly enter. The bottom of openings must be no higher than one foot above the higher of the exterior or interior grade or floor immediately below the opening. For more guidance on openings, see NFIP Technical Bulletin 1.



11/04/2009 11:27 3867582160

BUILDING AND ZONING

PAGE 01/01

RICHARD WAYNE. RETURN TO 758-2160  
SCAFF SUBCONTINENTAL VERIFICATION FORM

APPLICATION NUMBER 0911-11 COI RACTOR JOE WILLIAMS PHONE 755.3139  
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades and 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.**

<b>ELECTRICAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>MECHANICAL/ A/C _____</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>PLUMBING/ GAS</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>ROOFING</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/ SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
CABINET INSTALLER			
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE	000656	Melvin L. Taylor	Melvin L. Taylor
FLOOR COVERING	000655	Melvin L. Taylor	Melvin L. Taylor
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

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

Contractor Form: Subcontractor Form: 6

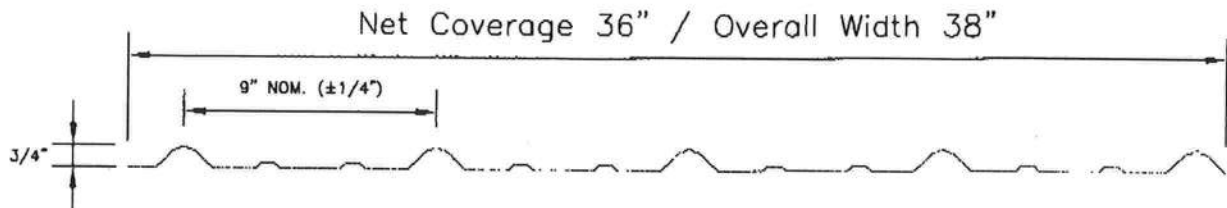




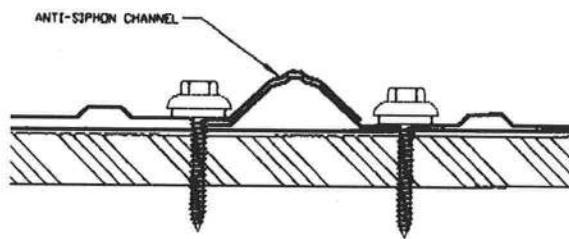
# MILLENNIUM METALS, INC.

10200 EASTPORT ROAD JACKSONVILLE, FL 32216  
LOCAL 904-358-8285 WATS 1-877-358-8285  
FAX 904-358-8285 MAIL2000.NET

Product  
Approval



PANEL PROFILE



Sidelap Detail

Product Approval

over 3/8. F152112RI  
Over 1/2. F178092RI

## PITCH ALERT:

THIS PRODUCT SHOULD NOT BE USED ON APPLICATIONS LESS THAN 3:12 PITCH WITHOUT A SECONDARY UNDERLAYMENT SUCH AS PEEL & SEAL AND SIDE LAP SEALANT APPLIED TO SIPHON CHANNEL. THE MINIMUM PITCH ALLOWANCE WITH THE SECONDARY UNDERLAYMENT AND SIDE LAP SEALANT IS 2:12.

## Specifications:

Gauge	Finishes	Nominal Thickness	ASTM & Grade Specifications
29	Galvanized	.0142	ASTM A-653 Grade 80 Structural Steel
29	PTD Galvanized *	.0142	ASTM A-755 Grade 80 Structural Steel
26	PTD Galvanized **	.0185	ASTM A-755 Grade 80 Structural Steel
29	Acrylic Galvalume	.0142	ASTM A-792 AZ55 Grade 80 Structural Steel
26	Acrylic Galvalume	.0185	ASTM A-792 AZ55 Grade 80 Structural Steel

PTD Material is siliconized polyester unless otherwise noted.

Millennium Metals Offers a Limited 40 year warranty on Painted Panels. 20 year limited warranty on Mill Finished Galvalume Panels. Please request warranty information from your distributor.

\* 29 colors: Red, White, Blue, Gray, Hunter Green, Stone, Brown, Charcoal, Tan, Ivory, Burgundy & Burnished Slate  
\*\* 26 colors: Red, Reflective White, Gallery Blue, Gray, Hunter Green, Stone, Brown, Charcoal, Tan & Ivory

## MILLENNIUM METALS INC.

TOLL FREE: 1-877-358-7883

FAX: 904-358-8285

MAIL2000.NET

SUBJECT TO CHANGE WITHOUT NOTICE

Office





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## Product Approval

USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > [Application Detail](#)



FL # FL3148-R2  
 Application Type Revision  
 Code Version 2007  
 Application Status Approved  
 Comments  
 Archived ☐

Product Manufacturer CertainTeed Corporation Siding Products  
 Address/Phone/Email 803 Belden Road  
 Jackson, MI 49203  
 (517) 780-3185  
 neil.j.sexton@saint-gobain.com

Authorized Signature Neil Sexton  
 neil.j.sexton@saint-gobain.com

Technical Representative  
 Address/Phone/Email

Quality Assurance Representative Craig Berry  
 Address/Phone/Email 1200 Avenue G  
 White City, OR 97503  
 craig.a.berry@saint-gobain.com

Category Panel Walls  
 Subcategory Siding

Compliance Method Certification Mark or Listing

Certification Agency Miami-Dade BCCO - CER  
 Validated By Robert J. M. Nieminen, PE  
☒ Validation Checklist - Hardcopy Received

Referenced Standard and Year (of Standard)	<u>Standard</u>	<u>Year</u>
	TAS 202	1994
	TAS 203	1994

Equivalence of Product Standards  
 Certified By

7543.4	Non-Impact Vertical Steel Mullion	253273 Classic Series
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> No <b>Design Pressure:</b> N/A <b>Other:</b> For max. D.P. please refer to installation drawings set MWM016. Max. Window size used for Evaluation: 48" x 82". Max. transom size used for evaluation: 48" x 41". Mullions to be used with pre-qualified approved classic series vinyl products.		<b>Installation Instructions</b> <a href="#">FL7543_R1_II_MWM016 Classic Vertical Mullion Non Impact.pdf</a> Verified By: Jyrki T. J. Pulkkinen FL PE# 52914 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL7543_R1_AE_PER P-0808-12 MW 415.pdf</a> <a href="#">FL7543_R1_AE_PER P-0808-12 MW 416.pdf</a> Created by Independent Third Party: Yes



# MW MANUFACTURERS

## CLASSIC VERTICAL MULLION NON IMPACT

### INSTALLATION NOTES:

- 1) THE PRODUCT SHOWN HEREIN IS DESIGNED AND MANUFACTURED TO COMPLY WITH THE 2007 FLORIDA BUILDING CODE, SECTION 1714.5.5.
- 2) MULLION INSTALLATION DETAILS APPLY TO DUAL 253273 1/4" MULL STEEL REINFORCEMENTS WITH EXTRUDED VINYL MULL STRIP WHEN USED TO MULL WINDOWS SIDE BY SIDE.
- 3) APPROVED IMPACT PROTECTIVE SYSTEM IS REQUIRED ON THIS PRODUCT IN AREAS REQUIRING IMPACT RESISTANCE.
- 4) USE 3/16" ELCO TAPCON ANCHOR OF SUFFICIENT LENGTH TO ACHIEVE MINIMUM EMBEDMENT OF 1 1/4" INTO MASONRY OR CONCRETE. 3/16" ELCO TAPCON MUST HAVE A 2 1/2" MINIMUM EDGE DISTANCE FROM EDGE OF MASONRY OR CONCRETE. (SEE CHARTS & NOTES ON SHEET 3 FOR DESIGN PRESSURE AND ANCHOR NOTES).
- 5) USE #8 WOOD SCREWS OF SUFFICIENT LENGTH TO ACHIEVE MINIMUM EMBEDMENT OF 1 1/2" INTO WOOD FRAMING. (SEE CHARTS & NOTES ON SHEET 3 FOR DESIGN PRESSURE AND ANCHOR NOTES).
- 6) USE #8 TEK SCREWS OF SUFFICIENT LENGTH TO ACHIEVE A MINIMUM EMBEDMENT OF 3 THREADS PAST THE ANCHOR MATERIAL. (SEE CHARTS & NOTES ON SHEET 3 FOR DESIGN PRESSURE AND ANCHOR NOTES).
- 7) MASONRY, 12x2 & 2x4 WOOD BLOCKS TO BE DESIGNED AND ANCHORED TO PROPERLY TRANSFER ALL LOADS TO STRUCTURE AND IS THE RESPONSIBILITY OF THE ARCHITECT OR ENGINEER OF RECORD.
- 8) THIS MULLION IS ONLY VALID WHEN USED IN CONJUNCTION WITH APPLICABLE MW PRODUCTS.
- 9) ALL WINDOWS USED WITH THIS MULLION SHALL BE QUALIFIED UNDER SEPARATE APPROVAL.

### GENERAL NOTES:

1. THE PRODUCT SHOWN HEREIN IS DESIGNED AND MANUFACTURED TO COMPLY WITH THE 2007 FLORIDA BUILDING CODE (FBC), EXCLUDING HVHZ AND HAS BEEN EVALUATED ACCORDING TO THE FOLLOWING:
  - ASTM E-1996-02/ASTM E-1886-02
2. ADEQUACY OF THE EXISTING STRUCTURAL CONCRETE/MASONRY AND 2X FRAMING AS A MAIN WIND FORCE RESISTING SYSTEM CAPABLE OF WITHSTANDING AND TRANSFERRING APPLIED PRODUCT LOADS TO THE FOUNDATION IS THE RESPONSIBILITY OF THE ENGINEER OR ARCHITECT OF RECORD FOR THE PROJECT OF INSTALLATION.
3. 1X AND 2X BLOCKS (WHEN USED) SHALL BE DESIGNED AND ANCHORED TO PROPERLY TRANSFER ALL LOADS TO THE STRUCTURE. BLOCK DESIGN AND INSTALLATION IS THE RESPONSIBILITY OF THE ENGINEER OR ARCHITECT OF RECORD FOR THE PROJECT OF INSTALLATION.
4. THE INSTALLATION DETAILS DESCRIBED HEREIN ARE GENERIC AND MAY NOT REFLECT ACTUAL CONDITIONS FOR A SPECIFIC SITE. IF SITE CONDITIONS CAUSE INSTALLATION TO DEVIATE FROM THE REQUIREMENTS DETAILED HEREIN, A LICENSED ENGINEER OR ARCHITECT SHALL PREPARE SITE SPECIFIC DOCUMENTS FOR USE WITH THIS DOCUMENT.
5. MULLION MATERIAL: 1010 COLD ROLLED STEEL.

TABLE OF CONTENTS

SHEET	REVISION	SHEET DESCRIPTION
1	-	INSTALLATION & GENERAL NOTES
2	-	ELEVATION & ANCHOR LAYOUT
3	-	VERTICAL & HORIZONTAL SECTIONS
4	-	DETAILS
5	-	CHARTS & NOTES

### REVISIONS

NO.	DESCRIPTION	BY	DATE

TITLE:  
VERTICAL MULLION  
INSTALLATION &  
GENERAL NOTES

PREPARED FOR:  
MW MANUFACTURERS Inc  
433 NORTH MAIN ST  
ROCKY MOUNT, VA 24151  
PH: 800.999.8400 FX: 540.484.6683

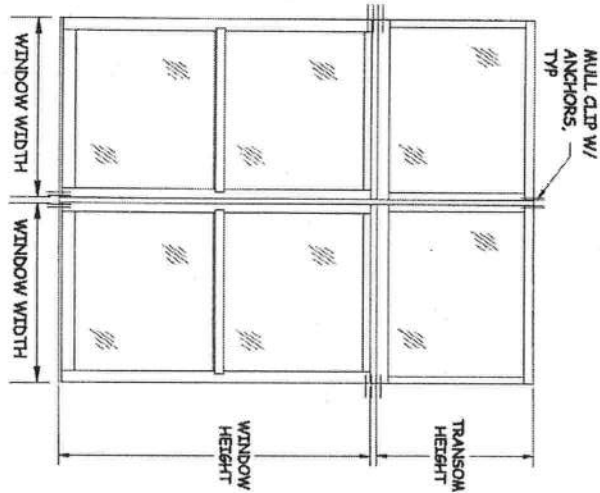


MW Manufacturers, Inc  
433 North Main St  
Rocky Mount, VA 24151  
PH: 800.999.8400 - FX: 540.484.6683

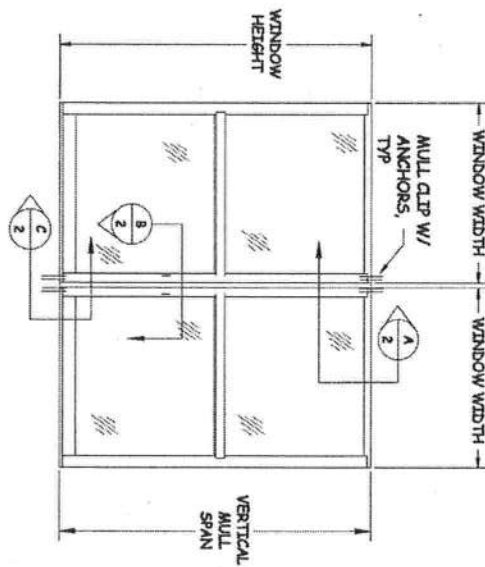
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10.29.08  
OWN BY:  
GRN  
CHK BY:  
HN  
SCALE:  
NTS

DWG #:  
MWM016  
SHEET: 1 OF 5

JOSE T.S. PALMISTON  
FLORIDA P.E. NO. 30564  
1907 HERBERT PALM WAY  
TALLAHASSEE, FL 32309



VERTICAL MULLION  
FOR TWIN WINDOW WITH TRANSOM  
SEE CHARTS ON SHEET 5 FOR DESIGN  
PRESSURES AND ANCHOR SCHEDULE



VERTICAL MULLION FOR TWIN WINDOWS  
SEE CHARTS ON SHEET 5 FOR DESIGN  
PRESSURES AND ANCHOR SCHEDULE

## REVISIONS

NO.	DESCRIPTION	BY	DATE

TITLE:  
VERTICAL MULLION  
ELEVATION &  
ANCHOR LAYOUT

PREPARED FOR:  
MW MANUFACTURERS Inc  
433 NORTH MAIN ST  
ROCKY MOUNT, VA 24151  
Ph: 800.999.8400 FX: 540.484.6603



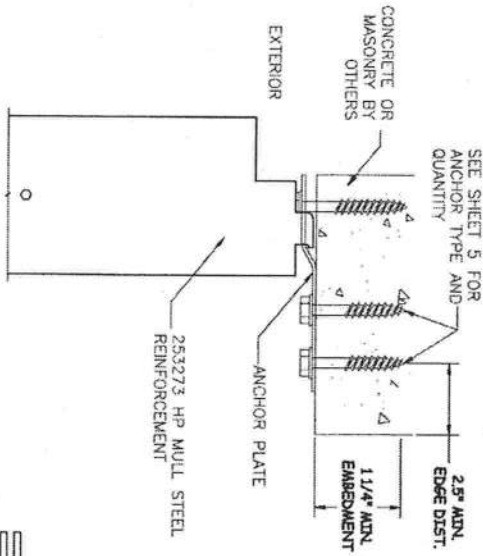
MW MANUFACTURERS, Inc  
433 North Main St.  
Rocky Mount, VA 24151  
Ph: 800.999.8400 - FX: 540.484.6603

DATE: 10.29.08  
DWN BY: GRN  
CHK BY: HN  
SCALE: NTS  
DWG #: MW016  
SHEET: 2 OF 5

*[Handwritten signature]*  
10/29/08  
TALLAHASSEE, FL 32309  
2700 E. 12TH AVE. SUITE 100  
TALLAHASSEE, FL 32309  
WWW.MWMFG.COM  
800.999.8400



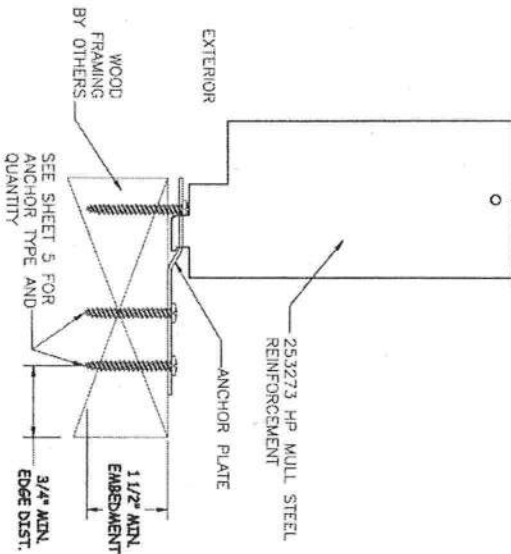
**A**  
**2** VERTICAL SECTION  
(MASONRY, ANCHOR PLATE)



**B**  
**2** HORIZONTAL SECTION



**C**  
**2** VERTICAL SECTION  
(WOOD, ANCHOR PLATE)



# REVISIONS

NO.	DESCRIPTION	BY	DATE

**TITLE:**  
VERTICAL MULLION  
VERTICAL &  
HORIZONTAL SECTIONS

**PREPARED FOR:**  
MW MANUFACTURERS Inc.  
433 NORTH MAIN ST  
ROCKY MOUNT, VA 24151  
PH: 800.999.8400 FX: 540.484.6683

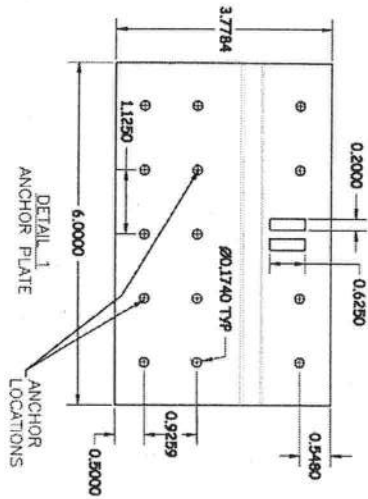


**MW Manufacturers, Inc.**  
433 North Main St.  
Rocky Mount, VA 24151  
PH: 800.999.8400 FX: 540.484.6683

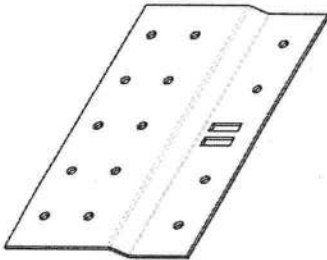
**DATE:**  
10.29.08  
**DWN BY:**  
GRN  
**CHK BY:**  
HN  
**SCALE:**  
NTS

**DWG #:**  
MWM016

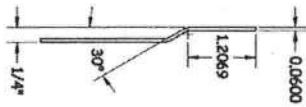
**SHEET:**  
3 OF 5



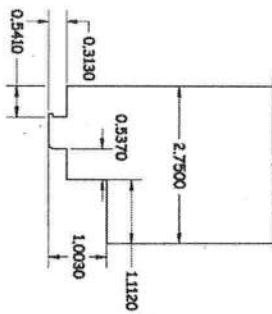
DETAIL 3  
ISOMETRIC VIEW OF ANCHOR PLATE



DETAIL 2  
SECTION VIEW OF ANCHOR PLATE



DETAIL 4  
MULLION END



## REVISIONS

NO.	DESCRIPTION	BY	DATE

TITLE:  
VERTICAL MULLION  
DETAILS

PREPARED FOR:  
MW MANUFACTURERS Inc  
433 NORTH MAIN ST  
ROCKY MOUNT, VA 24151  
Ph: 800.999.8400 FX: 540.484.6683



MW MANUFACTURERS, Inc  
433 NORTH MAIN ST.  
ROCKY MOUNT, VA 24151  
Ph: 800.999.8400 FX: 540.484.6683

DATE: 10.29.08  
OWN BY: GRN  
CHK BY: HN  
SCALE: NTS

DWG #  
MWM016

SHEET: 4 OF 5



**Maximum design pressure capacity chart (psi)**  
**Vertical Mullion (Twin)**

Design pressures are limited either by mullion or anchor screws or anchor clip capacity.

Height (in)	18.0	24.0	30.0	36.0	42.0	48.0
17.0	75.0	75.0	75.0	75.0	75.0	75.0
24.0	75.0	75.0	75.0	75.0	75.0	75.0
30.0	75.0	75.0	75.0	75.0	75.0	75.0
36.0	75.0	75.0	75.0	75.0	75.0	75.0
42.0	75.0	75.0	75.0	75.0	75.0	75.0
48.0	75.0	75.0	75.0	75.0	75.0	75.0
54.0	75.0	75.0	75.0	69.0	63.1	58.8
60.0	75.0	75.0	62.3	54.1	48.8	45.4
66.0	75.0	61.7	50.7	43.7	39.0	35.8
72.0	67.5	51.5	42.1	36.1	31.9	29.1
78.0	57.3	43.6	36.5	30.3	26.7	24.2
82.0	51.8	39.3	32.0	27.2	23.9	21.6

NOTES FOR TYPICAL WINDOW AND MULLION DETAIL: SEE SHEET 2 FOR MULLION DETAIL, SEE SHEET 3 FOR ANCHOR PLATE DETAIL.

- 1) THE DESIGN PRESSURES IN THIS CHART ARE FOR THE MULLIONS LISTED ABOVE WHEN USED WITH THE CLIP LISTED ABOVE.
- 2) FOR VERTICAL MULLION CLIPS IN WOOD FRAMING INSTALLATION USE (2) TWO #8 WOOD SCREWS AT EACH ANCHOR CLIP. MUST BE OF SUFFICIENT LENGTH TO ACHIEVE A 1 1/2" MINIMUM EMBEDMENT INTO FRAMING. SEE SHEET 3 FOR DETAIL.
- 3) FOR VERTICAL MULLION CLIPS IN MASONRY INSTALLATION USE (2) TWO 3/16" TAPSCREWS AT EACH ANCHOR CLIP WITH SUFFICIENT LENGTH TO ACHIEVE A 1 1/2" MINIMUM EMBEDMENT INTO SUBSTRATE. SEE SHEET 2 FOR DETAIL.
- 4) FOR VERTICAL MULLION CLIPS IN ALUMINUM INSTALLATION USE (2) TWO #8 TEK SCREWS, GRADE 5 AT EACH ANCHOR CLIP WITH SUFFICIENT LENGTH TO ACHIEVE AN EMBEDMENT OF 3 TIMES FAST SUBSTRATE.
- 5) CHART APPLIES ONLY TO MULLION DETAIL: SEE SHEET 2 FOR MULLION DETAIL, SEE SHEET 3 FOR ANCHOR PLATE DETAIL.
- 6) HEAD WINDOW WIDTH AND MULLION SPAN IN INCHES. DESIGN PRESSURE VALUES ON THIS CHART ARE POSITIVE AND NEGATIVE PSF.
- 7) DESIGN PRESSURE VALUES APPLY TO MULLION WHERE TWO OR MORE WINDOWS ARE LISTED IN A SINGLE COLUMN.

**Maximum design pressure capacity chart**  
**Vertical mullion, twin with twin transom**

Design pressures are limited either by mullion, anchor clip or anchor screws capacity.

Height (in)	18.0	24.0	30.0	36.0	42.0	48.0
17.0	8.5	75.0	75.0	75.0	75.0	75.0
24.0	12.0	75.0	75.0	75.0	75.0	75.0
30.0	15.0	75.0	75.0	75.0	75.0	75.0
36.0	18.0	75.0	75.0	75.0	75.0	75.0
42.0	21.0	75.0	75.0	75.0	75.0	75.0
48.0	24.0	68.0	61.5	54.5	50.1	46.8
54.0	27.0	63.5	56.5	50.5	45.5	42.8
60.0	30.0	59.5	52.5	46.5	41.5	38.8
66.0	33.0	55.5	48.5	42.5	37.5	34.8
72.0	36.0	51.5	44.5	38.5	33.5	30.8
78.0	39.0	47.5	40.5	34.5	29.5	26.8
82.0	41.0	43.5	36.5	30.5	25.5	22.8

NOTES FOR TYPICAL WINDOW AND MULLION DETAIL: SEE SHEET 2 FOR MULLION DETAIL, SEE SHEET 3 FOR ANCHOR PLATE DETAIL.

- 1) THE DESIGN PRESSURES IN THIS CHART ARE FOR THE MULLIONS LISTED ABOVE WHEN USED WITH THE CLIP LISTED ABOVE.
- 2) FOR VERTICAL MULLION CLIPS IN WOOD FRAMING INSTALLATION USE (2) TWO #8 WOOD SCREWS AT EACH ANCHOR CLIP. MUST BE OF SUFFICIENT LENGTH TO ACHIEVE A 1 1/2" MINIMUM EMBEDMENT INTO FRAMING. SEE SHEET 3 FOR DETAIL.
- 3) FOR VERTICAL MULLION CLIPS IN MASONRY INSTALLATION USE (2) TWO 3/16" TAPSCREWS AT EACH ANCHOR CLIP WITH SUFFICIENT LENGTH TO ACHIEVE A 1 1/2" MINIMUM EMBEDMENT INTO SUBSTRATE. SEE SHEET 2 FOR DETAIL.
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**MW Manufacturers, Inc.**  
433 North Main St.  
Rocky Mount, VA 24151  
PH: 800.99.8400 FAX: 540.484.6653

**TITLE:**  
VERTICAL MULLION  
**CHARTS & NOTES**  
**PREPARED FOR:**  
MW MANUFACTURERS Inc  
433 NORTH MAIN ST  
ROCKY MOUNT, VA 24151  
PH: 800.99.8400 FAX: 540.484.6653

**REVISIONS**

NO.	DESCRIPTION	BY	DATE

**DATE:** 10.29.08  
**OWN BY:** GRN  
**CHK BY:** HN  
**SCALE:** NTS

**DWG #:** MWMO16  
**SHEET:** 5 OF 5

11933.3	MW Classic/5000 Stationary Window	Vinyl Direct Set Fixed Window (Size: 6-0 x 6-0)
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> No <b>Design Pressure:</b> +60/-60 <b>Other:</b> Frame: 72" x 72" (6-0 x 6-0), DLO: 5-6 x 5-6", IGU: 3/4" Overall, Individual glass thickness meets ASTM E1300 requirements		<b>Installation Instructions</b> <a href="#">FL11933_R0_II_FL11933 MWM020 Casement.pdf</a> Verified By: Kristina S. Daugherty 68455 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL11933_R0_AE_PER 615.pdf</a> Created by Independent Third Party: Yes



GENERAL NOTES:

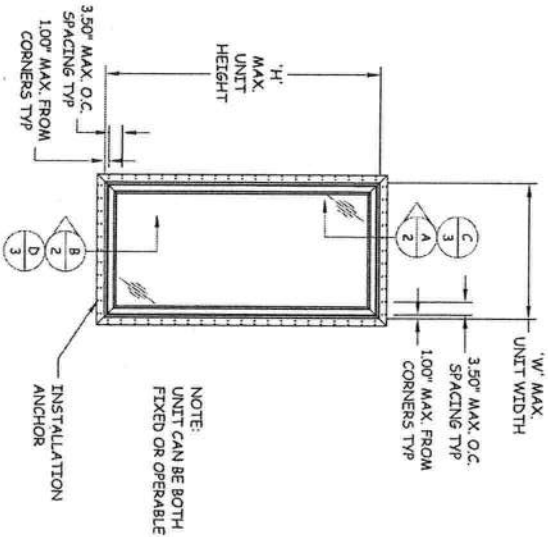
- THIS PRODUCT, WINDOW, DOOR, IS DESIGNED AND MANUFACTURED TO BE USED IN ACCORDANCE WITH THE FOLLOWING NOTES AND HAS BEEN EVALUATED IN ACCORDANCE WITH THE FOLLOWING:
  - AWMA/ANWMA 100.5.5.97
- ADDED TO THE EXISTING STRUCTURAL CONCRETE/MASONRY, EX AND STILL, IT IS TO BE A MAIN WALL FOR THE EXISTING SYSTEM. THE FOUNDATION IS THE RESPONSIBILITY OF THE ENGINEER OR ARCHITECT FOR THE PROJECT OR INSTALLATION.
- 2X BRICKS (WHEN USED) SHALL BE DESIGNED AND ANCHORED TO PROVIDE THE REQUIRED STRENGTH FOR THE STRUCTURE. BRICK DESIGN AND INSTALLATION IS THE RESPONSIBILITY OF THE ENGINEER OR ARCHITECT FOR THE PROJECT OR INSTALLATION.
- THE INSTALLATION DETAILS DESCRIBED HEREIN ARE GENERAL AND MAY NOT REFLECT ACTUAL CONDITIONS FOR A SPECIFIC SITE. IF SITE CONDITIONS ARE DIFFERENT, THE INSTALLATION SHALL BE IN ACCORDANCE WITH THE REQUIREMENTS OF THE PROJECT OR INSTALLATION. A LICENSED ENGINEER OR ARCHITECT SHALL PROVIDE THE SPECIFIC DOCUMENT FOR USE WITH THIS DOCUMENT.
- APPROVED IMPACT PROTECTIVE SYSTEM IS REQUIRED TO PROTECT THE PRODUCT IN AREAS REQUIRING IMPACT RESISTANCE.
- DISPOSITION "X" AND "Y" STAND FOR THE FOLLOWING:
  - "X" - FIXED PANEL
  - "Y" - FIXED PANEL
- WINDOW FRAME MATERIAL, PVC
- GLASS MEETS THE REQUIREMENTS OF ASTM E1300 GLASS CURVES. SEE SHEET 2 FOR GLASSING DETAILS.

INSTALLATION NOTES:

- ONE (1) INSTALLATION ANCHOR IS REQUIRED AT EACH ANCHOR LOCATION SHOWN, UNLESS OTHERWISE STATED.
- THE NUMBER OF INSTALLATION ANCHORS SHOWN IN THE MANUAL NUMBER OF ANCHORS TO BE USED FOR PRODUCT INSTALLATION.
- INSTALL INDIVIDUAL INSTALLATION ANCHORS WITHIN 1/2 INCH OF THE CORNER LOCATION IN THE ANCHOR LAYOUT DETAIL. IF, WITHOUT CONSULTATION WITH THE MANUFACTURER, THE ANCHORS ARE NOT CALLED OUT FROM ONE INSTALLATION ANCHOR TO THE NEXT.
- INSTALLATION ANCHORS AND ASSOCIATED HARDWARE MUST BE MADE OF GALVANIZED STEEL OR RESISTANT MATERIAL OR HAVE A CORROSION RESISTANT FINISH.
- FOR INSTALLATION THROUGH 12" BRICK, USE 1/4" WOOD SCREWS OR 1/2" WOOD SCREWS INTO 1/2" WOOD ANCHORS EMBEDDED INTO WOOD SUBSTRATE.
- FOR INSTALLATION THROUGH 12" BRICK, USE 1/4" WOOD SCREWS OR 1/2" WOOD SCREWS INTO 1/2" WOOD ANCHORS EMBEDDED INTO WOOD SUBSTRATE. NAIL HEAD DIMENSIONS TO BE AT LEAST 3/8 INCH.
- MINIMUM EMBEDMENT AND BOLT DISTANCE EXCLUDE WALL THICKNESS, INCLUDING BUT NOT LIMITED TO STUDS, TIE BARS, REINFORCING AND SIGNS.
- FOR 12" WALL BRICK AND BOLT TIE BRICK, DO NOT INSTALL INSTALLATION ANCHORS AND ASSOCIATED HARDWARE INTO THE BRICK JOINT. EDGE DISTANCE IS MEASURED FROM THE EDGE OF BRICK OR EDGE OF MORTAR JOINT INTO FACE SHELL OF BRICK.
- INSTALLATION ANCHORS SHALL BE INSTALLED IN ACCORDANCE WITH ANCHOR MANUFACTURER'S INSTRUCTIONS. ANCHORS SHALL NOT BE USED IN CONCRETE OR MASONRY WITHOUT THE MINIMUM STRENGTH SPECIFIED BY THE ANCHOR MANUFACTURER.
- INSTALLATION ANCHOR CAPACITIES FOR PRODUCTS HEREIN ARE BASED ON SUBSTRATE MATERIALS WITH THE FOLLOWING PROPERTIES:
  - A. CONCRETE - MINIMUM COMPRESSIVE STRENGTH OF 4,000 PSI
  - B. CONCRETE - MINIMUM TENSILE STRENGTH OF 4,000 PSI
  - C. MASONRY - MINIMUM COMPRESSIVE STRENGTH OF 4,000 PSI
  - D. MASONRY - MINIMUM TENSILE STRENGTH OF 4,000 PSI
  - E. MASONRY - MINIMUM YIELD STRENGTH OF 31,000 PSI
  - F. MASONRY - MINIMUM YIELD STRENGTH OF 31,000 PSI

TABLE OF CONTENTS

SHEET	REVISION	SHEET DESCRIPTION
1	A	INSTALLATION & GENERAL NOTES, ELEVATION & ANCHOR LAYOUT
2	A	OPERATING WINDOW DETAILS
3	A	FIXED WINDOW DETAILS



NOTE:  
UNIT CAN BE BOTH  
FIXED OR OPERABLE

TYPICAL ELEVATION WITH  
FASTENER SPACING  
CASEMENT

MAXIMUM SIZES			
WINDOW TYPE	MAX. 'W'	MAX. 'H'	
CASEMENT OPERATING WINDOW	35.50"	71.50"	
CASEMENT FIXED WINDOW	71.50"	71.50"	

MW WINDOWS & DOORS  
CLASSIC CASEMENT WINDOW,  
CASEMENT FIXED WINDOW



MW Windows & Doors  
433 North Route 12  
Rocky Mount, VA 24151  
PH: 540.999.9400 • FX: 540.999.9403

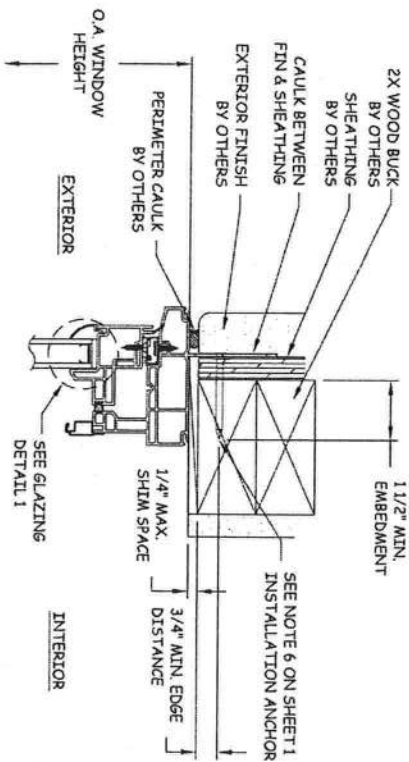
TITLE:  
CLASSIC CASEMENT  
INSTALLATION & GENERAL NOTES,  
ELEVATION & ANCHOR LAYOUT  
PREPARED FOR:  
PLY GEM WINDOW GROUP  
PRODUCT ENGINEERING  
ROCKY MOUNT, VA 24151  
PH: 540.484.9558 FX: 540.484.9688

REVISIONS

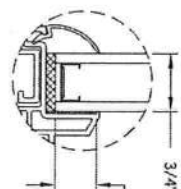
NO.	DESCRIPTION	BY	DATE
A	REMOVED AWNING ELEVATION	JLR	02.05.09

DATE: 12.24.08  
DWN BY: JLR  
CHK BY: KSD  
SCALE: NTS

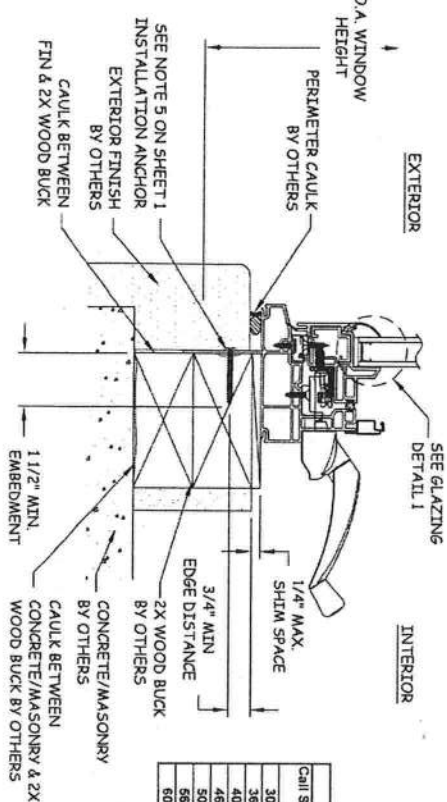
DWG #: MW020  
SHEET: 1 OF 3



**A** OPERATING SECTION  
2X WOOD FRAME - HEAD  
FIN INSTALLATION



**B** OPERATING SECTION  
2X WOOD BUCK - SILL  
FIN INSTALLATION

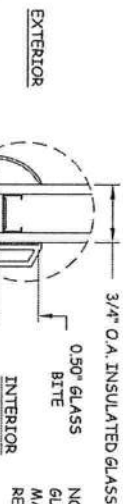


**C** OPERATING SECTION  
2X WOOD BUCK - SILL  
FIN INSTALLATION

Call Size	Unit Dim	10	12	14	16	18	19.5	20	23.5	24	28	30	35.5	40	50	60	71.5
30	35.5	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70
36	41.5	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70
40	47.5	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70
46	53.5	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70
50	59.5	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70
56	65.5	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70
60	71.5	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70	+60/70

Call Size	Unit Dim	16	18	20	24	28	30
30	35.500	+60/60	+60/60	+60/60	+60/60	+60/60	+60/60
36	41.500	+60/60	+60/60	+60/60	+60/60	+60/60	+60/60
40	47.500	+60/60	+60/60	+60/60	+60/60	+60/60	+60/60
46	53.500	+60/60	+60/60	+60/60	+60/60	+60/60	+60/60
50	59.500	+60/60	+60/60	+60/60	+60/60	+60/60	+60/60
56	65.500	+60/60	+60/60	+60/60	+60/60	+60/60	+60/60
60	71.500	+60/60	+60/60	+60/60	+60/60	+60/60	+60/60

**GLAZING DETAIL 1**



NOTE:  
GLASS THICKNESS AND TYPE  
MAY VARY PER ASTM E 1300  
REQUIREMENT GLASS CHARTS.


**Casement Operating Window  
Non-Impact DP Ratings**

**Casement Fixed Window  
Non-Impact DP Ratings**

# REVISIONS

NO.	DESCRIPTION	BY	DATE
A	REMOVED AWNING DP CHART	JLR	02.05.09

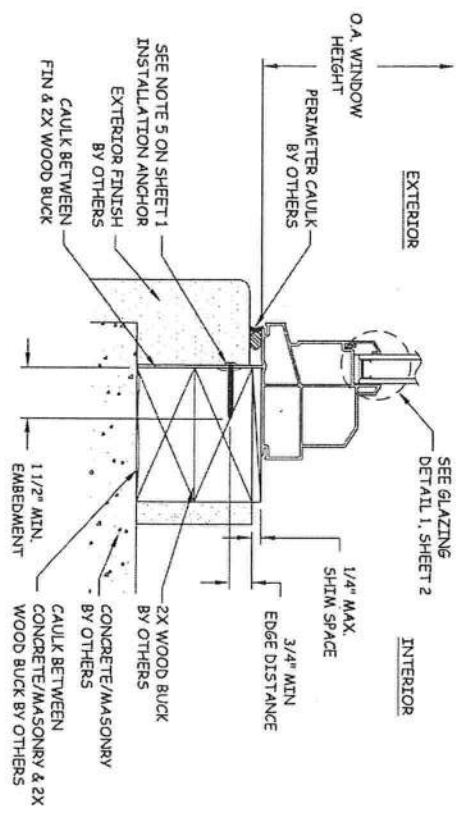
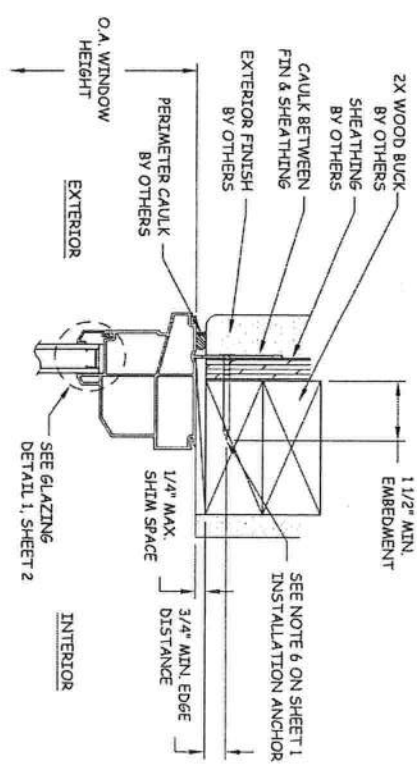
TITLE: CLASSIC CASEMENT OPERATING WINDOW DETAILS	PREPARED FOR: PLY GEM WINDOW GROUP PRODUCT ENGINEERING ROCKY MOUNT, VA 24151 PH: 540.484.6558 FX: 540.484.6668
--	--



**MW**  
 WINDOW & EXTERIOR  
 Manufacturers, Inc.  
 433 North Main St.  
 Rocky Mount, VA 24151  
 PH: 800.999.6400 FX: 540.484.6668

DATE: 12.24.08	DWG #: MW/MO20
DWN BY: JLR	CHK BY: KSD
SCALE: NTS	SHEET: 2 OF 3






**REVISIONS**

NO.	DESCRIPTION	BY	DATE
A	REMOVED AWNING DETAILS	JLR	02.05.09

**TITLE:**  
CLASSIC CASEMENT  
FIXED WINDOW  
DETAILS

**PREPARED FOR:**  
PLY GEM WINDOW GROUP  
PRODUCT ENGINEERING  
ROCKY MOUNT, VA 24151  
PH: 540.484.6358 FX: 540.484.6688



**MW**  
Manufacturers, Inc.  
433 North Main St.  
Rocky Mount, VA 24151  
PH: 800.390.8400 - FX: 540.484.6683

**DATE:** 12.24.08  
**DWN BY:** JLR  
**CHK BY:** KSD  
**SCALE:** NTS

**DWG #:** MW020  
**SHEET:** 3 OF 3

# Material List Report

## LAKE CITY INDUSTRIES

250 NW RAILROAD STREET

LAKE CITY, FL 32055

(386)-752-3511

(386)-758-4735

Level Name: First Floor Framing Plan

Report Date: 9/17/2009 8:22:01 AM

### Joist Products

Plot ID	Length	Product Label	Ply	Net Qty.	Unit Price	Net Price
A13	13'	11 7/8" TJI 210 joist	1	43	\$0.00/ft	\$0.00
A12	12'	11 7/8" TJI 210 joist	1	22	\$0.00/ft	\$0.00
A5	5'	11 7/8" TJI 210 joist	1	3	\$0.00/ft	\$0.00
A3	3'	11 7/8" TJI 210 joist	1	3	\$0.00/ft	\$0.00
Sub-total						\$0.00

### Rectangular Products

Plot ID	Length	Product Label	Ply	Net Qty.	Unit Price	Net Price
TS1	12'	1 3/4" x 11 7/8" 1.7E TimberStrand LSL	1	2	\$0.00/ft	\$0.00
TS2	5'	1 3/4" x 11 7/8" 1.7E TimberStrand LSL	1	2	\$0.00/ft	\$0.00
TS3	38'	3 1/2" x 11 7/8" 1.7E TimberStrand LSL	1	2	\$0.00/ft	\$0.00
TS4	34'	3 1/2" x 11 7/8" 1.7E TimberStrand LSL	1	4	\$0.00/ft	\$0.00
TS5	13'	3 1/2" x 11 7/8" 1.7E TimberStrand LSL	1	1	\$0.00/ft	\$0.00
Sub-total						\$0.00

### HANGER LIST - Simpson Strong-Tie Company, Inc.®

Plot ID	Product Label	Hanger Support	Member	Ply	Notes	Net Qty.	Net Price
See iLevel® Framers Pocket Guide for Product Trademark Information							



H1	ITS2.06/11.88	LSL	11 7/8" TJI 210 joist	1	(1)	142	\$0.00
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## Fasteners

Top: 4 - N10

Face: 2 - N10

Member:

H2	MGU3.63 (H1=9.25)	LSL	3 1/2" x 11 7/8" 1.7E TimberStrand LSL	1	(1)	10	\$0.00
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## Fasteners

Top:

Face: 24 - SDS1/4 x 2 1/2

Member: 16 - SDS1/4 x 2 1/2

H3	WPU1.81/11.88	LSL	1 3/4" x 11 7/8" 1.7E TimberStrand LSL	1	(1)	4	\$25.00
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## Fasteners

Top: 3 - 16d

Face: 4 - 16d

Member: 6 - N10

H4	IUT9	LSL	1 3/4" x 11 7/8" 1.7E TimberStrand LSL	1	(1)	4	\$10.32
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## Fasteners

Top:

Face: 8 - N10

Member: 2 - N10

Sub-total	\$35.32
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## Hanger Notes:

(1) Indicates non-stocked hanger

Sub-total	\$35.32
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REPORT TOTAL:	\$35.32
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See iLevel® Framer's Pocket Guide for Product Trademark Information





# ITW Building Components Group, Inc.

1950 Marley Drive Haines City, FL 33844

Florida Engineering Certificate of Authorization Number: 0 278

Florida Certificate of Product Approval # FL1999

Page 1 of 1 Document ID:1TUS8228Z0204130021

Truss Fabricator: Anderson Truss Company  
Job Identification: 9-179--Little & Williams Richard Scaff -- , \*\*  
Truss Count: 5  
Model Code: Florida Building Code 2007 and 2009 Supplement  
Truss Criteria: FBC2007Res/TPI-2002(STD)  
Engineering Software: Alpine Software, Version 9.02.  
Structural Engineer of Record: The identity of the structural EOR did not exist as of  
Address: the seal date per section 61G15-31.003(5a) of the FAC  
Minimum Design Loads: Roof - 40.0 PSF @ 1.25 Duration  
Floor - N/A  
Wind - 110 MPH ASCE 7-05 -Closed

## Notes:

1. Determination as to the suitability of these truss components for the structure is the responsibility of the building designer/engineer of record, as defined in ANSI/TPI 1
2. The drawing date shown on this index sheet must match the date shown on the individual truss component drawing.
3. As shown on attached drawings; the drawing number is preceded by: HCUSR8228

Details: BRCLBSUB-A1103005-GBLLETIN-

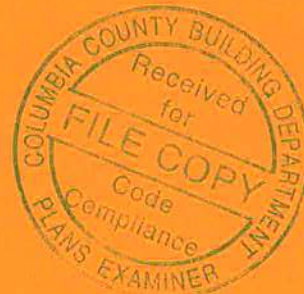
#	Ref	Description	Drawing#	Date
1	62118--A3		09247005	09/04/09
2	62119--A2		09247002	09/04/09
3	62120--A1		09247003	09/04/09
4	62121--AA-GE		09247006	09/04/09
5	62122--A-GE		09247004	09/04/09

Seal Date: 09/04/2009

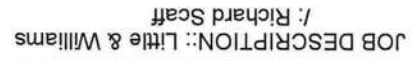
-Truss Design Engineer-  
Doug Fleming

Florida License Number: 66648

1950 Marley Drive  
Haines City, FL 33844



Roof Plane Sheathing Area = 2003 sq. ft  
Gable Sheathing Area = 325 sq. ft  
Total Sheathing Area = 2328 sq. ft  
Fascia Material = 181 linear ft  
Ridge Cap Material = 38 linear ft



PAGE NO:  
1 OF 1

110 mph wind, 24.83 ft mean hgt, ASCE 7-05, CLOSED bldg, located anywhere in roof, CAT II, EXP B, wind TC DL=5.0 psf, wind BC DL=5.0 psf, lw=1.00 GCpi (+/-) -0.18

Wind reactions based on MWFRS pressures.

(A) Continuous lateral bracing equally spaced on member.

Bottom chord checked for 10.00 psf non-concurrent live load.

**WARNING:** Furnish a copy of this DWG to the installation contractor. Special care must be taken during handling, shipping and installation of trusses. See "WARNING" note below.



Scale = .125" / Ft.

2.00  
DOUGLAS FLEMING  
LICENSE  
No. 66648  
OTY

**\*\*IMPORTANT\*\*** FURNISH A COPY OF THIS DESIGN TO THE INSTALLATION CONTRACTOR. ITW BCG, INC. SHALL NOT

ITW Building Components Group Inc

Haines City, FL 33844

FL COA #0 278



04, 05

REF	R8228 - 62118
DATE	09/04/09
DRW	HCSUR8228 092470
HC-ENG	DF/DF
SEON -	43834
FROM	AH
REF -	1TUS8228Z02



110 mph wind, 24.83 ft mean hgt, ASCE 7-05, CLOSED bldg, located anywhere in roof, CAT 11, EXP B, wind TC DL=5.0 psf, wind BC DL=5.0 psf.  $I_w=1.00$  Gcpi (+/-)=0.18

Wind reactions based on MIFRS pressures.

Calculated horizontal deflection is 0.17" due to live load and 0.17" due to dead load.

Bottom chord checked for 10.00 psf non-concurrent live load.

Deflection meets L/240 live and L/180 total load.

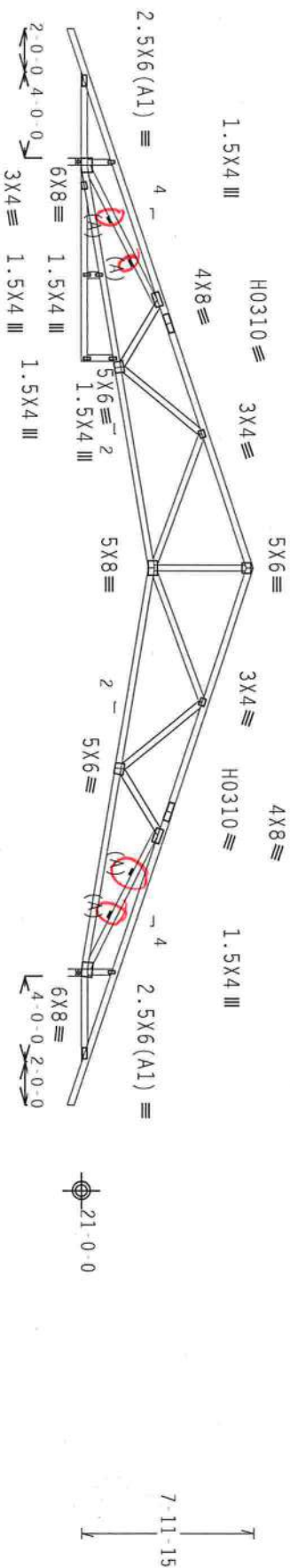


Figure 1: Elevation view of the bridge deck showing dimensions and support locations. The deck is 46'-0" wide over 2 supports. The total length is 200'1" (U-309) and 200'1" (U-313). The deck is supported by 2 supports. The dimensions are: 4'-5" 8" (top left), 4'-2" 4" (top left), 4'-4" 0" (top left), 6'-4" 7" (top left), 9'-4" 0" (top left), 23'-0" 0" (top left), 18'-8" 0" (top left), 46'-0" 0" (top left), 18'-8" 0" (top left), 23'-0" 0" (top left), 18'-8" 0" (top left), 4'-4" 0" (top left), 4'-5" 8" (top right), 4'-2" 4" (top right), 4'-4" 0" (top right), 6'-4" 7" (top right), 9'-4" 0" (top right), 32'-7" 0" (top right), 6'-2" 11" (top right), 6'-2" 11" (top right), 6'-4" 7" (top right), 4'-2" 4" (top right), 4'-4" 0" (top right).

Design Crit: FBC2007Res/TPI-2002(STD)  
FT/RT=20%(0%)/0(0)

FL/-/4/-/-/R/-

Scale = .125"/Ft.

2.00  
DOUGLAS FLEMING  
LICENSE  
No. 66648  
QTY

**\*\*IMPORTANT\*\*** FURNISH A COPY OF THIS DESIGN TO THE INSTALLATION CONTRACTOR. ITW BCG, INC. SHALL NOT

DESIGN CONFORMS WITH APPLICABLE PROVISIONS OF MDS (NATIONAL DESIGN SPEC. BY ASEA) AND ISI 1171; OR FABRICATING, SHAPING, INSTALLING & DRILLING OF JOINTS;


CONNECTOR PLATES ARE MADE OF 20119/16GA (H. H/SS/L) ASTM A653 GRADE 40/60 (H. K/H/SS) GALV. STEEL. APPLY

PLATES TO EACH FACE OF TRUSS AND, UNLESS OTHERWISE LOCATED ON THIS DESIGN, POSITION PER DRAWINGS 160A-Z

DRAWING INDICATES ACCEPTANCE OF PROFESSIONAL ENGINEERING RESPONSIBILITY SOLELY FOR THE TRUSS COMPONENT

BUILDING DESIGNER PER ANSI/TPI 1 SEC. 2.

--



**ALPINE**

**ITW Building Components Group Inc.**  
 Haines City, FL 33844  
 FL COA #0278

[illegible]

TC LL	20.0 PSF	REF	R8228- 62119
TC DL	10.0 PSF	DATE	09/04/09
BC DL	10.0 PSF	DRW	HCUSR8228 09247002
BC LL	0.0 PSF	HC-ENG	DF/DF
TOT.LD.	40.0 PSF	SEON-	43825
DUR.FAC.	1.25	FROM	AH
SPACING	24.0"	JREF-	1TUS8228Z02

110 mph wind, 24.83 ft mean hgt, ASCE 7-05, CLOSED bldg, located anywhere in roof, CAT II, EXP B, wind TC DL=5.0 psf, wind BC DL=5.0 psf, lw=1.00 Gcpi (+/-) -0.18

Wind reactions based on MWFRS pressures.

Bottom chord checked for 10.00 psf non-concurrent live load.

**WARNING:** Furnish a copy of this DWG to the installation contractor. Special care must be taken during handling, shipping and installation of trusses. See "WARNING" note below.



Scale = .125"/Ft.

02.00 011515  
QTY  
DOUGLAS FLEMING  
LICENSE  
No. 66648

TC LL	20.0 PSF	REF	R8228 - 62120
TC DL	10.0 PSF	DATE	09/04/09
BC DL	10.0 PSF	DRW	HCUSR8228 03247003

BC LL	0.0
-------	-----

DUR.FAC. 1.25

SPACING	24 0"	JREF - 1T11S8228702
---------	-------	---------------------

JKET - 11058228702

Webs 2x4 Sp #3

Roof overhang supports 2.00 psf soffit load.

Truss spaced at 24.0" OC designed to support 2-0-0 top chord outlookers. Cladding load shall not exceed 10.00 PSF. Top chord must not be cut or notched.

Stacked top chord must NOT be notched or cut in area (NNL). Attach stacked top chord (SC) to dropped top chord in notchable area using 3x4 tie plates 24" o.c. Center plate on stacked/dropped chord interface, plate length perpendicular to chord length. Splice top chord in notchable area using 3x6

**WARNING:** Furnish a copy of this DWG to the installation contractor. Special care must be taken during handling, shipping and installation of trusses. See "WARNING" note below.

+ MEMBER TO BE Laterally Braced For Out Of Plane Wind Loads To Truss. Bracing System To Be Designed And Furnished By Others



Note: All Plates Are 1.5X4 Except As Shown.

Design Crit: FBC2007Res/TPI-2002(STD)

PLT TYP. 20 Gauge HS, Wave

$$FT/RT=20\%(0\%)/0(0)$$

9.02.00

QTY:1

FL/-/4/-/-/R/-/

Scale = .125" / Ft.

**\*WARNING\***—PRIORS, REPAIRS, EXISTING, CASE, IN FABRICATION, HANDLING, SHIPPING, INSTALLING AND BRACING REFER TO GC51 (BUILDING COMPONENT SAFETY INFORMATION). PUBLISHED BY THE IRONPS PLATE INSTITUTE, 218 NORTH LEE STREET, SUITE 312, ALEXANDRIA, VA, 22314 AND WELCO TRUSS COMPANY, INC., AMERICA, 65000 INTERSTATE LANE, MIDLAND, TX, 79701 FOR SAFETY PRACTICES PLEASE REFER TO PERFORM THESE OPERATIONS, OTHERWISE INDICATED TOP CHORD SHALL HAVE PROPERLY ATTACHED STRUCTURAL PANELS AND BOTTOM CHORD SHALL HAVE PROPERLY ATTACHED CHORD CEILING.

ALPINE

**ITW Building Components Group Inc.**

Haines City, FL 33844  
FL COA #0378

[illegible]

TC LL	20.0 PSF	REF	R8228- 62121
TC DL	10.0 PSF	DATE	09/04/09
BC DL	10.0 PSF	DRW	HCUS8228 09247006
BC LL	0.0 PSF	HC-ENG	DF/DF
TOT.LD.	40.0 PSF	SEQN-	44001
DUR.FAC.	1.25	FROM	AH
SPACING	SEE ABOVE	JREF-	1TUS8228Z02



```
:Stack Chord SC1 2x4 SP #2 Dense::Stack Chord SC2 2x4 SP #2 Dense:
```

See DWGS A11030050109 & GBULLETIN0109 for more requirements.

Deflection meets L/240 live and L/180 total load.

THE BUILDING DESIGNER IS RESPONSIBLE FOR THE DESIGN OF THE ROOF, FLOOR AND CEILING DIAPHRAGMS, GABLE END SHEAR WALLS, AND SUPPORTING SHEAR WALLS. DIAPHRAGMS AND SHEAR WALLS MUST PROVIDE CONTINUOUS LATERAL RESTRAINT TO THE GABLE END. ALL CONNECTIONS ARE TO BE PROVIDED BY THE BUILDING DESIGNER.

4 MEMBER TO BE LATERALLY BRACED FOR OUT OF PLANE WIND LOADS TO TRUSS. BRACING SYSTEM TO BE DESIGNED AND FURNISHED BY OTHERS.

\*\*\* (1) 2X(X8-0-0) SP #2 OR BETTER SCAB TRIMMED TO FIT.  
ATTACH ONE SCAB TO ONE FACE OF TRUSS USING 2 ROWS OF  
0.128"X3-0" NAILS STAGGERED @ 6" OC PER ROW THROUGHOUT,  
WITHOUT SPLITTING THE LUMBER.



Design Crit: FBC2007Res/TPI-2002(STD)

PLT TYP. 20 Gauge HS, Wave

$$FT/RT = 20\%(0\%) / 0(0)$$

9.02.00

QTY:1

FL/-/4/-/-/R/-/

Scale = .125" / Ft.

**WARNING:** PRIORS TO OURS, EXTREME CARE IN FABRICATION, HANDLING, SHIPPING, INSTALLING AND BRACING, REFER TO DCSS (BUILDING COMPONENT SAFETY INFORMATION), PUBLISHED BY THE (FROSS PLATE INSTITUTE, 218 MOSELY LEE STREET, SUITE 312, ALABAMA, VA, 22314) AND AISC (6000 FROSS CIRCLE, OFF-AMERIC, 65000 ENTERPRISE LANE, MADISON, WI 53719) FOR SAFETY PRACTICES AND FOR REFORMING THESE FUNCTIONS. OTHERWISE INDICATED FOR CHORD SHALL HAVE PROPERLY ATTACHED STRUCTURAL PANELS AND BOTTOM CHORD SHALL HAVE A PROPERLY ATTACHED RIGID CELLING.

**\*\*IMPORTANT\*\*** FURNISH A COPY OF THIS DESIGN TO THE INSTALLATION CONTRACTOR. THE BCG, INC. SHALL NOT BE RESPONSIBLE FOR ANY DEVIATION FROM THIS DESIGN; ANY FAILURE TO BUILD THE TRUSS IN CONFORMANCE WITH THE OR FABRICATING, WELDING, SHIPPING, INSTALLING & BRACING OF TRUSSES.

CONNECTOR PLATES ARE MADE OF 2019/1660 (N HCSS/KN) ASTM A653 GRADE 40/60 (N K/H SS) GALV DESIGN CONFORM WITH APPLICABLE PROVISIONS OF AISC (NATIONAL DESIGN SPEC., 101, 161&62) AND 1-1

PLATES TO EACH FACE OF TRUSS AND, UNLESS OTHERWISE LOCATED ON THIS DESIGN, POSITION PER DRAWINGS 160A-Z

ANY INSPECTION OR REPEATS FOLLOWED BY (1) SHALL BE PER ANNEX A3 OF IPT-2002 SEC.3. A SEAL ON THE DRAWING INDICATES ACCEPTANCE OF PROFESSIONAL ENGINEERING RESPONSIBILITY SOLELY FOR THE BUSS COMPONENTS.

DESIGN SHOWN, THE SUSTAINABILITY AND USE OF THIS COMPONENT FOR ANY BUILDING IS THE RESPONSIBILITY OF THE BUILDING DESIGNER PER ANSI/TPI 1 SEC. 2.

DESIGN SHOWN. THE SUSTAINABILITY AND USE BUILDING DESIGNED PER ANSI/TPI 1 SEC. 2.



TC LL	20.0 PSF	REF	R8228- 62122
TC DL	10.0 PSF	DATE	09/04/09
BC DL	10.0 PSF	DRW	HCUSR8228 09247004
BC LL	0.0 PSF	HC-ENG	DF/DF
TOT.LD.	40.0 PSF	SEQN-	43867
DUR.FAC.	1.25	FROM	AH
SPACING	24.0"	JREF-	1TUS8228202

# CLB WEB BRACE SUBSTITUTION

THIS DETAIL IS TO BE USED WHEN CONTINUOUS LATERAL BRACING (CLB) IS SPECIFIED ON A TRUSS DESIGN BUT AN ALTERNATIVE WEB BRACING METHOD IS DESIRED.

## NOTES:

THIS DETAIL IS ONLY APPLICABLE FOR CHANGING THE SPECIFIED CLB SHOWN ON SINGLE PLY SEALED DESIGNS TO T-BRACING OR SCAB BRACING.

ALTERNATIVE BRACING SPECIFIED IN CHART BELOW MAY BE CONSERVATIVE, FOR MINIMUM ALTERNATIVE BRACING, RE-RUN DESIGN WITH APPROPRIATE BRACING.

WEB MEMBER SIZE	SPECIFIED CLB BRACING	T OR L-BRACE	SCAB BRACE
2X3 OR 2X4	1 ROW	2X4	1-2X4
2X3 OR 2X4	2 ROWS	2X6	2-2X4
2X6	1 ROW	2X4	1-2X6
2X6	2 ROWS	2X6	2-2X4(*)
2X8	1 ROW	2X6	1-2X8
2X8	2 ROWS	2X6	2-2X6(*)

T-BRACE, L-BRACE AND SCAB BRACE TO BE SAME SPECIES AND GRADE OR BETTER THAN WEB MEMBER UNLESS SPECIFIED OTHERWISE ON ENGINEER'S SEALED DESIGN.

(\*) CENTER SCAB ON WIDE FACE OF WEB. APPLY (1) SCAB TO EACH FACE OF WEB.

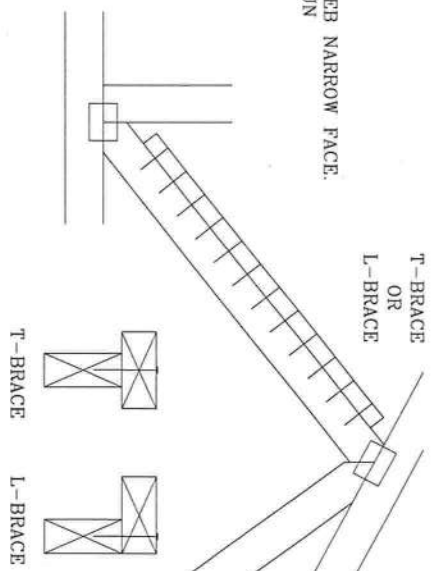


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Earth City, MO 63045

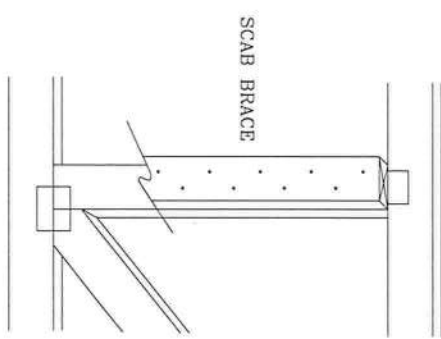
## T-BRACING OR L-BRACING:

APPLY TO EITHER SIDE OF WEB NARROW FACE. ATTACH WITH 10d BOX OR GUN (0.128" x 3", MIN) NAILS. AT 6" O.C. BRACE IS A MINIMUM 80% OF WEB MEMBER LENGTH



## SCAB BRACING:

APPLY SCAB(S) TO WIDE FACE OF WEB. NO MORE THAN (1) SCAB PER FACE. ATTACH WITH 10d BOX OR GUN (0.128" x 3", MIN) NAILS. AT 6" O.C. BRACE IS A MINIMUM 80% OF WEB MEMBER LENGTH



**\*\*WARNING\*\*** READ AND FOLLOW ALL NOTES ON THIS SHEET. Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow BCS (Building Component Safety Information, by TPI and WCA) for safety practices prior to performing these functions. Insulators shall provide temporary bracing per BCS. Unless noted otherwise, top chord bracing shall be installed on both sides of the truss. Locations shown for permanent lateral restraint of webs shall have bracing installed per BCS sections B3 & B7. See this job's general notes page for more information.

**\*\*IMPORTANT\*\*** FURNISH COPY OF THIS DESIGN TO INSTALLATION CONTRACTOR.

Building Components Group Inc. (BCCI) shall not be responsible for any deviation from this design, any failure or loss in condition or any damage to the truss or any other component of the truss system, or any other loss or damage, whether or not caused by the use of this design, or any other loss or damage, whether or not caused by the use of this design, or any other loss or damage, whether or not caused by the use of this design. A seal on this drawing or cover page indicates acceptance and professional engineering responsibility solely for the truss component design shown. The suitability and use of this component for any building is the responsibility of the Building Designer per ANSI/TPI 1 Sec. 2.

ITW-BCC: www.itwbcg.com; TPI: www.tpiintl.com; WCA: www.abcdindustry.com; ICC: www.iccsafe.org



TC LL	PSF	REF	CLB SUBST.
TC DL	PSF	DATE	1/1/09
BC DL	PSF	DRWG	BRCLBSUB0109
BC LL	PSF		
TOT. LD.	PSF		
EUR. FAC.			
SPACING			

ASCE 7-05: 110 MPH WIND SPEED, 30' MEAN HEIGHT, ENCLOSED, I = 1.00, EXPOSURE C, Kzt = 1.00

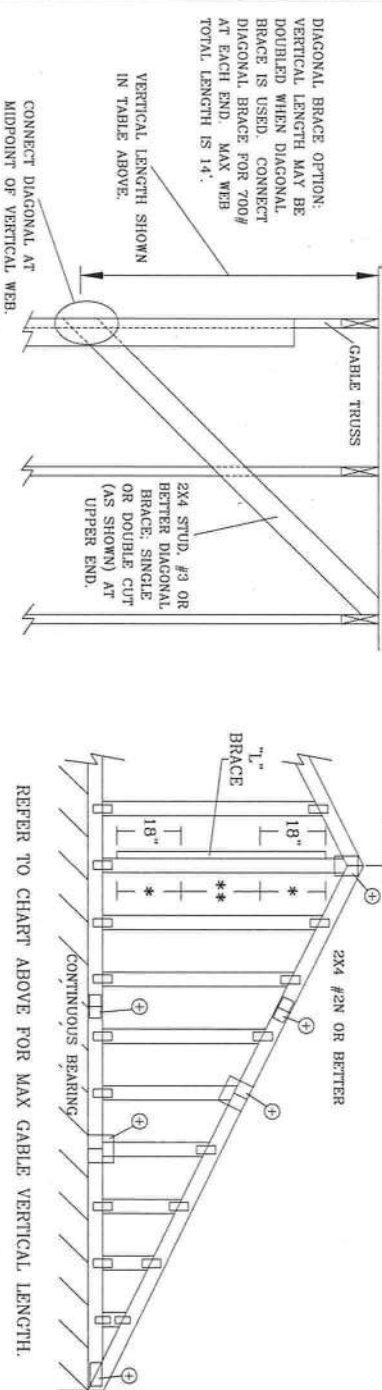
# CABLE STUD REINFORCEMENT DETAIL

2x4		BRACE	NO BRACES	(1) 1x4 "L" BRACE • (1) 2x4 "L" BRACE • (2) 2x4 "L" BRACE • (1) 2x6 "L" BRACE • (2) 2x6 "L" BRACE •									
GABLE VERTICAL SPACING	SPECIES			GROUP A	GROUP B	GROUP A	GROUP B	GROUP A	GROUP B	GROUP A	GROUP B	GROUP A	GROUP B
12" O.C.	SPF	#1 / #2	3' 8"	6' 4"	6' 6"	7' 6"	7' 8"	8' 11"	9' 2"	11' 9"	12' 1"	14' 0"	14' 0"
	STUD	#3	3' 7"	5' 5"	5' 5"	7' 2"	7' 2"	8' 11"	8' 11"	11' 2"	11' 2"	14' 0"	14' 0"
	HF	STANDARD	3' 7"	5' 5"	5' 5"	7' 1"	7' 1"	8' 11"	8' 11"	11' 1"	11' 1"	14' 0"	14' 0"
	SP	#1	4' 0"	6' 4"	6' 10"	7' 6"	8' 1"	8' 11"	9' 7"	11' 9"	12' 8"	14' 0"	14' 0"
16" O.C.	STUD	#2	3' 11"	6' 4"	6' 10"	7' 6"	8' 1"	8' 11"	9' 7"	11' 9"	12' 8"	14' 0"	14' 0"
	HF	#3	3' 9"	5' 7"	5' 7"	7' 4"	7' 4"	8' 11"	9' 5"	11' 5"	11' 5"	14' 0"	14' 0"
	SPF	STANDARD	3' 9"	5' 6"	5' 6"	7' 3"	7' 3"	8' 11"	9' 5"	11' 4"	11' 4"	14' 0"	14' 0"
	DFL	#1 / #2	4' 2"	7' 3"	7' 5"	8' 7"	8' 10"	10' 3"	10' 6"	13' 5"	13' 10"	14' 0"	14' 0"
24" O.C.	STUD	#3	4' 1"	6' 8"	6' 8"	8' 7"	8' 7"	10' 3"	10' 3"	13' 5"	13' 5"	14' 0"	14' 0"
	HF	STANDARD	4' 1"	6' 8"	6' 8"	8' 7"	8' 7"	10' 3"	10' 3"	13' 5"	13' 5"	14' 0"	14' 0"
	SP	#1	4' 6"	7' 3"	7' 9"	8' 7"	9' 3"	10' 3"	11' 0"	13' 5"	14' 0"	14' 0"	14' 0"
	DFL	#2	4' 4"	6' 10"	6' 10"	8' 7"	9' 0"	10' 3"	11' 0"	13' 5"	14' 0"	14' 0"	14' 0"

## GABLE TRUSS DETAIL NOTES:

LIVE LOAD DEFLECTION CRITERIA IS L/240.  
 PROVIDE UPLIFT CONNECTIONS FOR 100 PLF OVER CONTINUOUS BEARING (5 PSF TO DEAD LOAD).  
 GABLE END SUPPORTS LOAD FROM 4' 0" OUTLOOKERS WITH 2' 0" OVERHANG, OR 12" PLYWOOD OVERHANG.

BRACING GROUP SPECIES AND GRADES:			
GROUP A:		GROUP B:	
SPRUCE-PINE-FIR	HEM-FIR	HEM-FIR	HEM-FIR
#1 / #2	STUD	#1	#1
#3	STUD	#2	#2
STANDARD	STANDARD	STANDARD	STANDARD



DIAGONAL BRACE OPTION:  
 VERTICAL LENGTH MAY BE DOUBLED WHEN DIAGONAL BRACE IS USED. CONNECT DIAGONAL BRACE FOR 700# AT EACH END. MAX WEB TOTAL LENGTH IS 14'.

VERTICAL LENGTH SHOWN IN TABLE ABOVE.  
 CONNECT DIAGONAL AT MIDPOINT OF VERTICAL WEB.

REFER TO CHART ABOVE FOR MAX GABLE VERTICAL LENGTH.

GABLE VERTICAL PLATE SIZES			
VERTICAL LENGTH	NO SPLICE	1x4 OR 2x3	2.5x4
LESS THAN 4' 0"			
GREATER THAN 4' 0" BUT LESS THAN 11' 6"			
GREATER THAN 11' 6"		3x4	

+ REFER TO COMMON TRUSS DESIGN FOR PEAK, SPLICE, AND HEEL PLATES.



Building Components Group Inc.

Earth City, MO 63045

\*\*\*WARNING\*\*\* READ AND FOLLOW ALL NOTES ON THIS SHEET.  
 Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow ICCS (Building Component Safety Information, by TPI and WTA) for safety practices prior to performing any field work. Trusses shall have properly attached structural panels and bottom chord shall have a properly attached field ceiling. Locations shown for permanent lateral restraint of webs shall have bracing installed per ICCS sections B3 & B7. See this job's general notes page for more information.

\*\*\*IMPORTANT\*\*\* FURNISH COPY OF THIS DESIGN TO INSTALLATION CONTRACTOR.

Building Components Group Inc. is not responsible for any deviation from this design. Trusses shall be installed in accordance with the manufacturer's instructions. Trusses shall be installed in accordance with the manufacturer's instructions. Trusses shall be installed in accordance with the manufacturer's instructions.



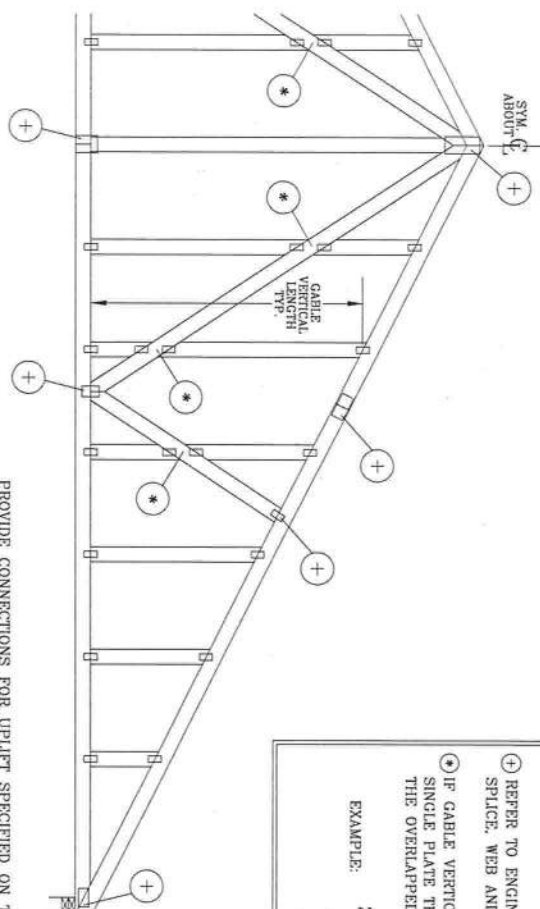
MAX. TOT. LD. 60 PSF

MAX. SPACING 24.0"

REF ASCE7-05-CAB1030  
 DATE 1/1/09  
 DRWG A11030050109



# CABLE DETAIL FOR LET-IN VERTICALS



**GABLE TRUSS PLATE SIZES**

REFER TO APPROPRIATE ITW GABLE DETAIL FOR MINIMUM PLATE SIZES FOR VERTICAL STUDS.

⊕ REFER TO ENGINEERED TRUSS DESIGN FOR PEAK SPLICE, WEB AND HEEL PLATES.

⊙ IF GABLE VERTICAL PLATES OVERLAP, USE A SINGLE PLATE THAT COVERS THE TOTAL AREA OF THE OVERLAPPED PLATES TO SPAN THE WEB.

EXAMPLE: 2X4 2X4 2X8

PROVIDE CONNECTIONS FOR UPLIFT SPECIFIED ON THE ENGINEERED TRUSS DESIGN.

ATTACH EACH "T" REINFORCING MEMBER WITH END DRIVEN NAILS:

10d COMMON (0.148" x 3.125" MIN) NAILS AT 4" O.C. PLUS

(4) NAILS IN TOP AND BOTTOM CHORD.

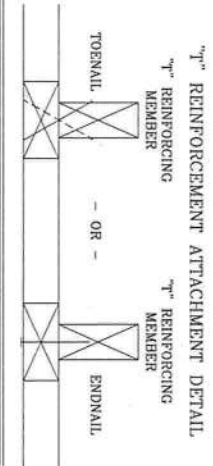
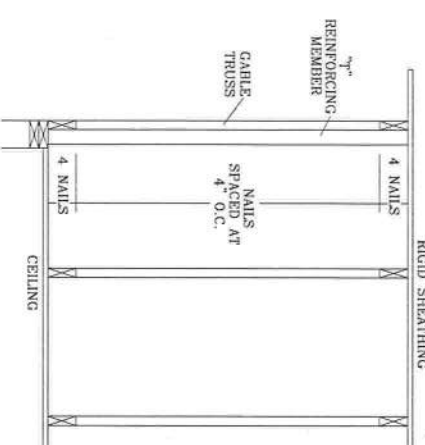
TOENAILED NAILS:

10d COMMON (0.148" x 3.125" MIN) TOENAILS AT 4" O.C. PLUS

(4) TOENAILS IN TOP AND BOTTOM CHORD.

THIS DETAIL TO BE USED WITH THE APPROPRIATE ITW GABLE DETAIL FOR ASCE WIND LOAD.

- ASCE 7-98 GABLE DETAIL DRAWINGS
- A13015980109, A12015980109, A11015980109, A10015980109
- A13030980109, A12030980109, A11030980109, A10030980109
- ASCE 7-02 GABLE DETAIL DRAWINGS
- A13015020109, A12015020109, A11015020109, A10015020109
- A13030020109, A12030020109, A11030020109, A10030020109
- ASCE 7-05 GABLE DETAIL DRAWINGS
- A13015050109, A12015050109, A11015050109, A10015050109
- A13030050109, A12030050109, A11030050109, A10030050109
- SEE APPROPRIATE ITW GABLE DETAIL FOR MAXIMUM UNREINFORCED GABLE VERTICAL LENGTH.



**"T" REINFORCEMENT ATTACHMENT DETAIL**

"T" REINFORCING MEMBER - OR - "T" REINFORCING MEMBER

TOENAIL - ENDNAIL

TO CONVERT FROM "T" TO "T" REINFORCING MEMBERS, MULTIPLY "T" INCREASE BY LENGTH (BASED ON APPROPRIATE ITW GABLE DETAIL).

MAXIMUM ALLOWABLE "T" REINFORCED GABLE VERTICAL LENGTH IS 14' FROM TOP TO BOTTOM CHORD.

WEB LENGTH INCREASE W/ "T" BRACE

WIND SPEED AND MRH	"T" REINFORCING MEMBER SIZE	"T" INCREASE
140 MPH	2x4	10 %
15 FT	2x6	50 %
140 MPH	2x4	10 %
30 FT	2x6	50 %
130 MPH	2x4	10 %
15 FT	2x6	50 %
130 MPH	2x4	10 %
30 FT	2x6	50 %
120 MPH	2x4	10 %
15 FT	2x6	50 %
120 MPH	2x4	10 %
30 FT	2x6	50 %
110 MPH	2x4	10 %
15 FT	2x6	50 %
110 MPH	2x4	10 %
30 FT	2x6	50 %
100 MPH	2x4	20 %
15 FT	2x6	30 %
100 MPH	2x4	10 %
30 FT	2x6	40 %
90 MPH	2x4	20 %
15 FT	2x6	20 %
90 MPH	2x4	20 %
30 FT	2x6	30 %

EXAMPLE:

ASCE WIND SPEED = 100 MPH

MEAN ROOF HEIGHT = 30 FT,  $K_{zt} = 1.00$

GABLE VERTICAL = 24" O.C. SP #3

"T" REINFORCING MEMBER SIZE = 2x4

"T" BRACE INCREASE (FROM ABOVE) = 10% = 1.10

(1) 2x4 "T" BRACE LENGTH = 6' 7"

MAXIMUM "T" REINFORCED GABLE VERTICAL LENGTH 1.10 x 6' 7" = 7' 3"



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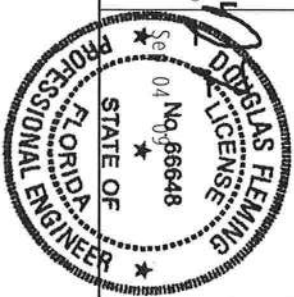
**WARNING: READ AND FOLLOW ALL NOTES ON THIS SHEET.**

Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow BCSI (Building Component Safety Information) by TPI and WTCO for safety practices relating to performing these functions. Truss manufacturers shall provide temporary bracing per BCSI. Unless noted otherwise, top chord bracing shall be provided. Truss manufacturers shall provide temporary bracing for permanent lateral restraint of webs shall have bracing installed per BCSI sections B3 & B7. See this job's general notes page for more information.

**IMPORTANT: FURNISH COPY OF THIS DESIGN TO INSTALLATION CONTRACTOR.**

ITW Building Components Group Inc. (ITWBCG) shall not be responsible for any deviation from this design, including but not limited to, the use of materials, methods, or equipment not specified herein. ITWBCG connector plates are made of 2014-T6 ALUMINUM (A5053 grade 37/40/60 (K/W/H/S) galv. steel. Apply plates to each face of truss, positioned as shown above and on joint details. A seal on this drawing or cover page indicates acceptance and professional engineering responsibility solely for the truss component design shown. The suitability and use of this component for any building is the responsibility of the Building Designer per ASCE 7-10 Sec. 2.

ITW-BCG: [www.itwbcg.com](http://www.itwbcg.com), TPI: [www.tpiusa.com](http://www.tpiusa.com), WTCO: [www.wtcocorp.com](http://www.wtcocorp.com)



MAX TOT. LD. 60 PSF	REF LET-IN VERT
DUR. FAC. ANY	DATE 1/1/09
MAX SPACING 24.0"	DRWG GBLTIN0109

**GENERAL PERMIT**

**PERMIT NUMBER:** ERP09-0146  
**DATE ISSUED:** 10/15/2009  
**DATE EXPIRES:** 10/15/2012  
**COUNTY:** COLUMBIA  
**TRS:** S36/T6S/R15E

**PERMITTEE:**  
RICHARD & RENA SCAFF  
PO BOX 1869  
LAKE CITY, FL 32025

**PROJECT:** RICHARD & RENA SCAFF DISTRICT FLOODWAY RESIDENCE

Approved entity to whom operation and maintenance may be transferred pursuant to rule 40B-4.1130, Florida Administrative Code (F.A.C.):

RICHARD & RENA SCAFF  
PO BOX 1869  
LAKE CITY, FL 32025

Based on information provided, the Suwannee River Water Management District's (District) rules have been adhered to and an environmental resource general permit is in effect for the permitted activity description below:

This permit authorizes a 1427 square foot single family home within the regulatory floodway of the Sante Fe River. The project will be completed in a manner consistent with the plans received by the District on October 13, 2009. This set of plans was certified by Nicholas Geisler on April 9, 2009; and subject to conditions of District rule(s) 40B-4.3030, F.A.C

It is your responsibility to ensure that adverse off-site impacts do not occur either during or after construction. Any additional construction or alterations not authorized by this permit may result in flood control or water quality problems both on and off site and will be a violation of District rule. You or any other substantially affected persons are entitled to request an administrative hearing or mediation. Please refer to enclosed notice of rights.

This permit is issued under the provisions of chapter 373, F.S., chapter 40B-4, and chapter 40B-400,



*Office*





**SUWANNEE  
RIVER  
WATER  
MANAGEMENT  
DISTRICT**

9225 CR 49  
LIVE OAK, FLORIDA 32060  
TELEPHONE: (386) 362-1001  
TELEPHONE: 800-226-1066  
FAX (386) 362-1056

**GENERAL PERMIT**

**PERMITTEE:**

RICHARD & RENA SCAFF  
PO BOX 1869  
LAKE CITY, FL 32025

**PERMIT NUMBER:** ERP09-0146

**DATE ISSUED:** 10/15/2009

**DATE EXPIRES:** 10/15/2012

**COUNTY:** COLUMBIA

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Approved entity to whom operation and maintenance may be transferred pursuant to rule 40B-4.1130, Florida Administrative Code (F.A.C.):

RICHARD & RENA SCAFF  
PO BOX 1869  
LAKE CITY, FL 32025

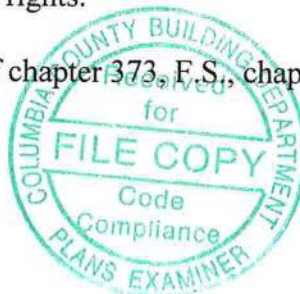
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It is your responsibility to ensure that adverse off-site impacts do not occur either during or after construction. Any additional construction or alterations not authorized by this permit may result in flood control or water quality problems both on and off site and will be a violation of District rule.

You or any other substantially affected persons are entitled to request an administrative hearing or mediation. Please refer to enclosed notice of rights.

This permit is issued under the provisions of chapter 373, F.S., chapter 40B-4, and chapter 40B-400,



*Office*



F.A.C. A general permit authorizes the construction, operation, maintenance, alteration, abandonment, or removal of certain minor surface water management systems. This permit authorizes the permittee to perform the work necessary to construct, operate, and maintain the surface water management system shown on the application and other documents included in the application. This is to notify you of District's agency action concerning Notice Of Intent. This action is taken pursuant to rule 40B-4 and 40B-400, F.A.C.

Standard Conditions for All General Permits:

1. The permittee shall perform all construction authorized in a manner so as to minimize adverse impacts to fish, wildlife, natural environmental values, and water quality. The permittee shall institute necessary measures during construction including riprap, reinforcement, or compaction of any fill materials placed around newly installed structures, to minimize erosion, turbidity, nutrient loading, and sedimentation in the receiving waters.
2. Water quality data representative of the water discharged from the permitted system, including, but not limited to, the parameters in chapter 62-302, F.A.C., shall be submitted to the District as required. If water quality data are required, the permittee shall provide data as required on the volume and rate of discharge including the total volume discharged during the sampling period. All water quality data shall be in accordance with and reference the specific method of analysis in "Standard Methods for the Examination of Water and Wastewater" by the American Public Health Association or "Methods for Chemical Analysis of Water and Wastes" by the U.S. Environmental Protection Agency.
3. The operational and maintenance phase of an environmental resource permit will not become effective until the owner or his authorized agent certifies that all facilities have been constructed in accordance with the design permitted by the District. If required by the District, such as-built certification shall be made by an engineer or surveyor. Within 30 days after the completion of construction of the system, the permittee shall notify the District that the facilities are complete. If appropriate, the permittee shall request transfer of the permit to the responsible entity approved by the District for operation and maintenance. The District may inspect the system and, as necessary, require remedial measures as a condition of transfer of the permit or release for operation and maintenance of the system.
4. Off-site discharges during and after construction shall be made only through the facilities authorized by the permit. Water discharged from the project shall be through structures suitable for regulating upstream stage if so required by the District. Such discharges may be subject to operating schedules established by the District.
5. The permit does not convey to the permittee any property right nor any rights or privileges other

than those specified in the permit and chapter 40B-1, F.A.C.

6. The permittee shall hold and save the District harmless from any and all damages, claims, or liabilities which may arise by reason of the construction, operation, maintenance, alteration, abandonment, or development in a Works of the District which is authorized by the permit.
7. The permit is issued based on the information submitted by the applicant which reasonably demonstrates that adverse off-site water resource impacts will not be caused by the permitted activity. It is the responsibility of the permittee to insure that such adverse impacts do not in fact occur either during or after construction.
8. It is the responsibility of the permittee to obtain all other clearances, permits, or authorizations required by any unit of local, state, or federal government.
9. The surfacewater management system shall be constructed prior to or concurrent with the development that the system is intended to serve and the system shall be completed within 30 days of substantial completion of the development which the system is intended to serve.
10. Except for General Permits After Notice or permits issued to a unit of government, or unless a different schedule is specified in the permit, the system shall be inspected at least once every third year after transfer of a permit to operation and maintenance by the permittee or his agent to ascertain that the system is being operated and maintained in a manner consistent with the permit. A report of inspection is to be sent to the District within 30 days of the inspection date. If required by chapter 471, F.S., such inspection and report shall be made by an engineer.
11. The permittee shall allow reasonable access to District personnel or agents for the purpose of inspecting the system to insure compliance with the permit. The permittee shall allow the District, at its expense, to install equipment or devices to monitor performance of the system authorized by their permit.
12. The surfacewater management system shall be operated and maintained in a manner which is consistent with the conditions of the permit and chapter 40B-4.2040, F.A.C.
13. The permittee is responsible for the perpetual operation and maintenance of the system unless the operation and maintenance is transferred pursuant to chapter 40B-4.1130, F.A.C., or the permit is modified to authorize a new operation and maintenance entity pursuant to chapter 40B-4.1110, F.A.C.
14. All activities shall be implemented as set forth in the plans, specifications and performance criteria as approved by this permit. Any deviation from the permitted activity and the conditions for

undertaking that activity shall constitute a violation of this permit.

15. This permit or a copy thereof, complete with all conditions, attachments, exhibits, and modifications, shall be kept at the work site of the permitted activity. The complete permit shall be available for review at the work site upon request by District staff. The permittee shall require the contractor to review the complete permit prior to commencement of the activity authorized by this permit.

16. Activities approved by this permit shall be conducted in a manner which do not cause violations of state water quality standards.

17. Prior to and during construction, the permittee shall implement and maintain all erosion and sediment control measures (best management practices) required to retain sediment on-site and to prevent violations of state water quality standards. All practices must be in accordance with the guidelines and specifications in the Florida Stormwater, Erosion, and Sedimentation Control Inspector's Manual unless a project specific erosion and sediment control plan is approved as part of the permit, in which case the practices must be in accordance with the plan. If site-specific conditions require additional measures during any phase of construction or operation to prevent erosion or control sediment, beyond those specified in the erosion and sediment control plan, the permittee shall implement additional best management practices as necessary, in accordance with the Florida Stormwater, Erosion, and Sedimentation Control Inspector's Manual. The permittee shall correct any erosion or shoaling that causes adverse impacts to the water resources.

18. Stabilization measures shall be initiated for erosion and sediment control on disturbed areas as soon as practicable in portions of the site where construction activities have temporarily or permanently ceased, but in no case more than seven days after the construction activity in that portion of the site has temporarily or permanently ceased.

19. At least 48 hours prior to commencement of activity authorized by this permit, the permittee shall submit to the District a Construction Commencement Notice Form No. 40B-1.901(14) indicating the actual start date and the expected completion date.

20. When the duration of construction will exceed one year, the permittee shall submit construction status reports to the District on an annual basis utilizing an Annual Status Report Form No. 40B-1.901(15). These forms shall be submitted during June of each following year.

21. For those systems which will be operated or maintained by an entity requiring an easement or deed restriction in order to provide that entity with the authority necessary to operate or maintain the system, such easement or deed restriction, together with any other final operation or maintenance documents as are required by Paragraph 40B-4.2030(2)(g), F.A.C., and Rule 40B-4.2035, F.A.C.,



must be submitted to the District for approval. Documents meeting the requirements set forth in these subsections of District rules will be approved. Deed restrictions, easements and other operation and maintenance documents which require recordation either with the Secretary of State or Clerk of the Circuit Court must be so recorded prior to lot or unit sales within the project served by the system, or upon completion of construction of the system, whichever occurs first. For those systems which are proposed to be maintained by county or municipal entities, final operation and maintenance documents must be received by the District when maintenance and operation of the system is accepted by the local governmental entity. Failure to submit the appropriate final documents referenced in this paragraph will result in the permittee remaining liable for carrying out maintenance and operation of the permitted system.

22. Each phase or independent portion of the permitted system must be completed in accordance with the permitted plans and permit conditions prior to the initiation of the permitted use of site infrastructure located within the area served by that portion or phase of the system. Each phase or independent portion of the system must be completed in accordance with the permitted plans and permit conditions prior to transfer of responsibility for operation and maintenance of that phase or portion of the system to a local government or other responsible entity.

23. Within 30 days after completion of construction of the permitted system, or independent portion of the system, the permittee shall submit a written statement of completion and certification by a registered professional engineer or other appropriate individual as authorized by law, using the supplied As-Built Certification Form No. 40B-1.901(16) incorporated by reference in Subsection 40B-1.901(16), F.A.C. When the completed system differs substantially from the permitted plans, any substantial deviations shall be noted and explained and two copies of as-built drawings submitted to the District. Submittal of the completed form shall serve to notify the District that the system is ready for inspection. The statement of completion and certification shall be based on on-site observation of construction (conducted by the registered professional engineer, or other appropriate individual as authorized by law, or under his or her direct supervision) or review of as-built drawings for the purpose of determining if the work was completed in compliance with approved plans and specifications. As-built drawings shall be the permitted drawings revised to reflect any changes made during construction. Both the original and any revised specifications must be clearly shown. The plans must be clearly labeled as "as-built" or "record" drawing. All surveyed dimensions and elevations shall be certified by a registered surveyor. The following information, at a minimum, shall be verified on the as-built drawings:

- a. Dimensions and elevations of all discharge structures including all weirs, slots, gates, pumps, pipes, and oil and grease skimmers;
- b. Locations, dimensions, and elevations of all filter, exfiltration, or underdrain systems including cleanouts, pipes, connections to control structures, and points of discharge to the receiving waters;

- c. Dimensions, elevations, contours, or cross-sections of all treatment storage areas sufficient to determine stage-storage relationships of the storage area and the permanent pool depth and volume below the control elevation for normally wet systems, when appropriate;
  - d. Dimensions, elevations, contours, final grades, or cross-sections of the system to determine flow directions and conveyance of runoff to the treatment system;
  - e. Dimensions, elevations, contours, final grades, or cross-sections of all conveyance systems utilized to convey off-site runoff around the system;
  - f. Existing water elevation(s) and the date determined; and
  - g. Elevation and location of benchmark(s) for the survey.
24. The operation phase of this permit shall not become effective until the permittee has complied with the requirements of the condition in paragraph 23 above, the District determines the system to be in compliance with the permitted plans, and the entity approved by the District in accordance with Rule 40B-4.2035, F.A.C., accepts responsibility for operation and maintenance of the system. The permit may not be transferred to such approved operation and maintenance entity until the operation phase of the permit becomes effective. Following inspection and approval of the permitted system by the District, the permittee shall request transfer of the permit to the approved responsible operation and maintenance operating entity if different from the permittee. Until the permit is transferred pursuant to Rule 40B-4.1130, F.A.C., the permittee shall be liable for compliance with the terms of the permit.
25. Should any other regulatory agency require changes to the permitted system, the permittee shall provide written notification to the District of the changes prior to implementation so that a determination can be made whether a permit modification is required.
26. This permit does not eliminate the necessity to obtain any required federal, state, local and special District authorizations prior to the start of any activity approved by this permit. This permit does not convey to the permittee or create in the permittee any property right, or any interest in real property, nor does it authorize any entrance upon or activities on property which is not owned or controlled by the permittee, or convey any rights or privileges other than those specified in the permit and in this chapter and Chapter 40B-4, F.A.C.
27. The permittee is hereby advised that Section 253.77, F.S., states that a person may not commence any excavation, construction, or other activity involving the use of sovereign or other lands of the state, the title to which is vested in the Board of Trustees of the Internal Improvement Trust Fund without obtaining the required lease, license, easement, or other form of consent

authorizing the proposed use. Therefore, the permittee is responsible for obtaining any necessary authorizations from the Board of Trustees prior to commencing activity on sovereignty lands or other state-owned lands.

28. Any delineation of the extent of a wetland or other surface water submitted as part of the permit application, including plans or other supporting documentation, shall not be considered specifically approved unless a specific condition of this permit or a formal determination under 40B-400.046, F.A.C., provides otherwise.

29. The permittee shall notify the District in writing within 30 days of any sale, conveyance, or other transfer of ownership or control of the permitted system or the real property at which the permitted system is located. All transfers of ownership or transfers of a permit are subject to the requirements of Rule 40B-4.1130, F.A.C. The permittee transferring the permit shall remain liable for any corrective actions that may be required as a result of any permit violations prior to such sale, conveyance or other transfer.

30. If historical or archaeological artifacts are discovered at any time on the project site, the permittee shall immediately notify the District.

31. The permittee shall immediately notify the District in writing of any previously submitted information that is later discovered to be inaccurate.

WITHIN 30 DAYS AFTER COMPLETION OF THE PROJECT, THE PERMITTEE SHALL NOTIFY THE DISTRICT, IN WRITING, THAT THE FACILITIES ARE COMPLETE.

Approved by  Date Approved 10-16-09  
District Staff

 Clerk       Executive Director



#### NOTICE OF RIGHTS

1. A person whose substantial interests are or may be determined has the right to request an administrative hearing by filing a written petition with the Suwannee River Water Management District (District), or may choose to pursue mediation as an alternative remedy under Section 120.569 and 120.573, Florida Statutes, before the deadline for filing a petition. Choosing mediation will not adversely affect the right to a hearing if mediation does not result in a settlement. The procedures for pursuing mediation are set forth in Sections 120.569 and 120.57 Florida Statutes. Pursuant to Rule 28-106.111, Florida Administrative Code, the petition must be filed at the office of the District Clerk at District Headquarters, 9225 C.R. 49, Live Oak, Florida 32060 within twenty-one (21) days of receipt of written notice of the decision or within twenty-one (21) days of newspaper publication of the notice of District decision (for those persons to whom the District does not mail actual notice). A petition must comply with Chapter 28-106, Florida Administrative Code.
2. If the Governing Board takes action which substantially differs from the notice of District decision to grant or deny the permit application, a person whose substantial interests are or may be determined has the right to request an administrative hearing or may chose to pursue mediation as an alternative remedy as described above. Pursuant to Rule 28-106.111, Florida Administrative Code, the petition must be filed at the office of the District Clerk at District Headquarters, 9225 C.R. 49, Live Oak, Florida 32060 within twenty-one (21) days of receipt of written notice of the decision or within twenty-one (21) days of newspaper publication of the notice of District decision (for those persons to whom the District does not mail actual notice). Such a petition must comply with Chapter 28-106, Florida Administrative Code.
3. A substantially interested person has the right to a formal administrative hearing pursuant to Section 120.569 and 120.57(1), Florida Statutes, where there is a dispute between the District and the party regarding an issue of material fact. A petition for formal hearing must comply with the requirements set forth in Rule 28-106.201, Florida Administrative Code.
4. A substantially interested person has the right to an informal hearing pursuant to Section 120.569 and 120.57(2), Florida Statutes, where no material facts are in dispute. A petition for an informal hearing must comply with the requirements set forth in Rule 28-106.301, Florida Administrative Code.
5. A petition for an administrative hearing is deemed filed upon receipt of the petition by the Office of the District Clerk at the District Headquarters in Live Oak, Florida.
6. Failure to file a petition for an administrative hearing within the requisite time frame shall constitute a waiver of the right to an administrative hearing pursuant to Rule 28-106.111, Florida Administrative Code.

7. The right to an administrative hearing and the relevant procedures to be followed is governed by Chapter 120, Florida Statutes, and Chapter 28-106, Florida Administrative Code.

8. Pursuant to Section 120.68, Florida Statutes, a person who is adversely affected by final District action may seek review of the action in the District Court of Appeal by filing a notice of appeal pursuant to the Florida Rules of Appellate Procedure, within 30 days of the rendering of the final District action.

9. A party to the proceeding before the District who claims that a District order is inconsistent with the provisions and purposes of Chapter 373, Florida Statutes, may seek review of the order pursuant to Section 373.114, Florida Statutes, by the Florida Land and Water Adjudicatory Commission, by filing a request for review with the Commission and serving a copy of the Department of Environmental Protection and any person named in the order within 20 days of adoption of a rule or the rendering of the District order.

10. For appeals to the District Courts of Appeal, a District action is considered rendered after it is signed on behalf of the District, and is filed by the District Clerk.

11. Failure to observe the relevant time frames for filing a petition for judicial review, or for Commission review, will result in waiver of the right to review.

#### CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing Notice of Rights has been sent by U.S. Mail to:

RICHARD & RENA SCAFF  
PO BOX 1869  
LAKE CITY, FL 32025

At 4:00 p.m. this 16<sup>th</sup> day of October, 2009.



Jon M. Dinges  
Deputy Clerk  
Suwannee River Water Management District  
9225 C.R. 49  
Live Oak, Florida 32060

Permit No.: ERP09-0146

Project: RICHARD & RENA SCAFF DISTRICT FLOODWAY RESIDENCE

Page 10 of 10

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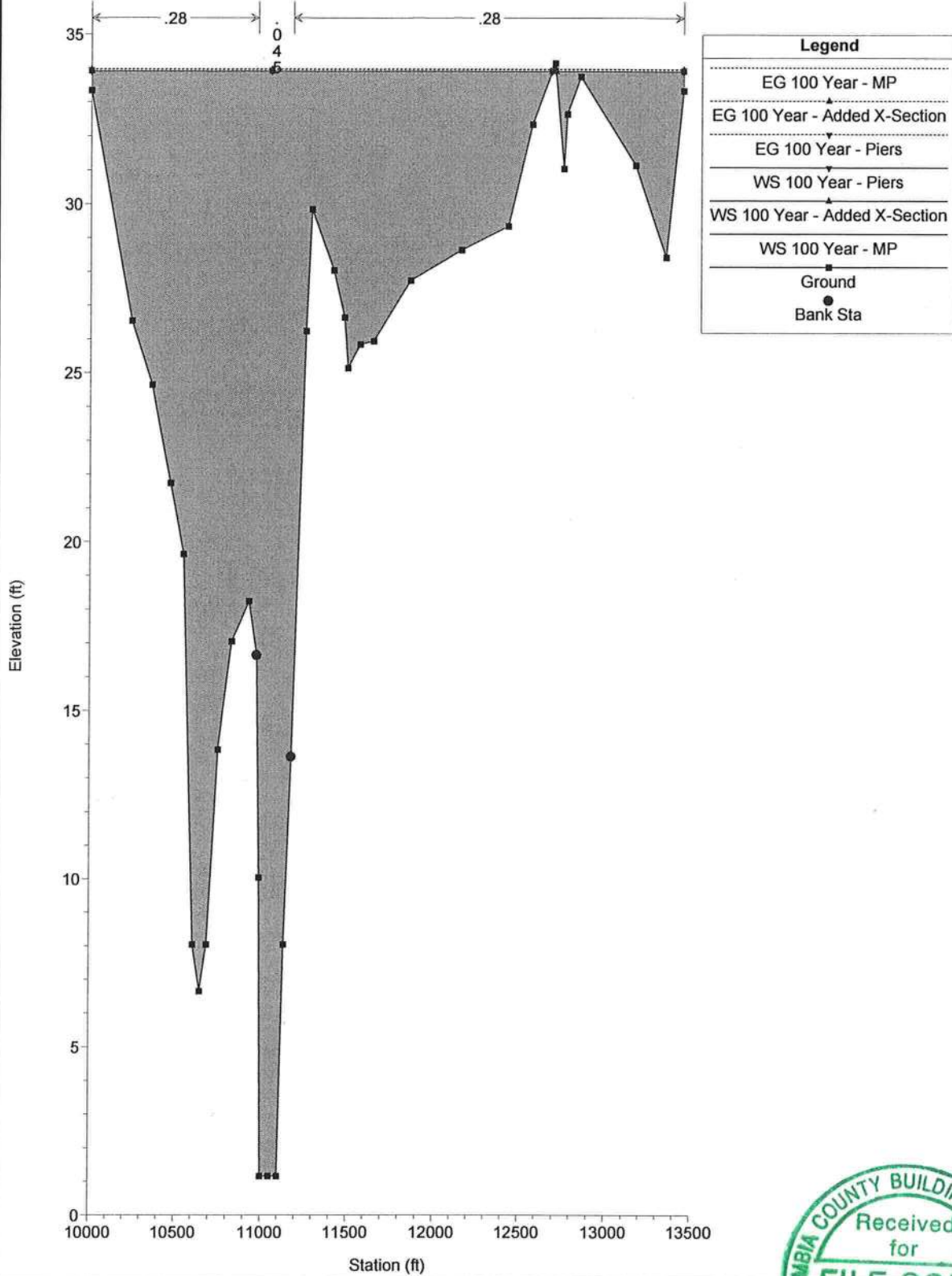
386.362.1001 or 800.226.1066 (Florida only)

cc: File Number: ERP09-0146



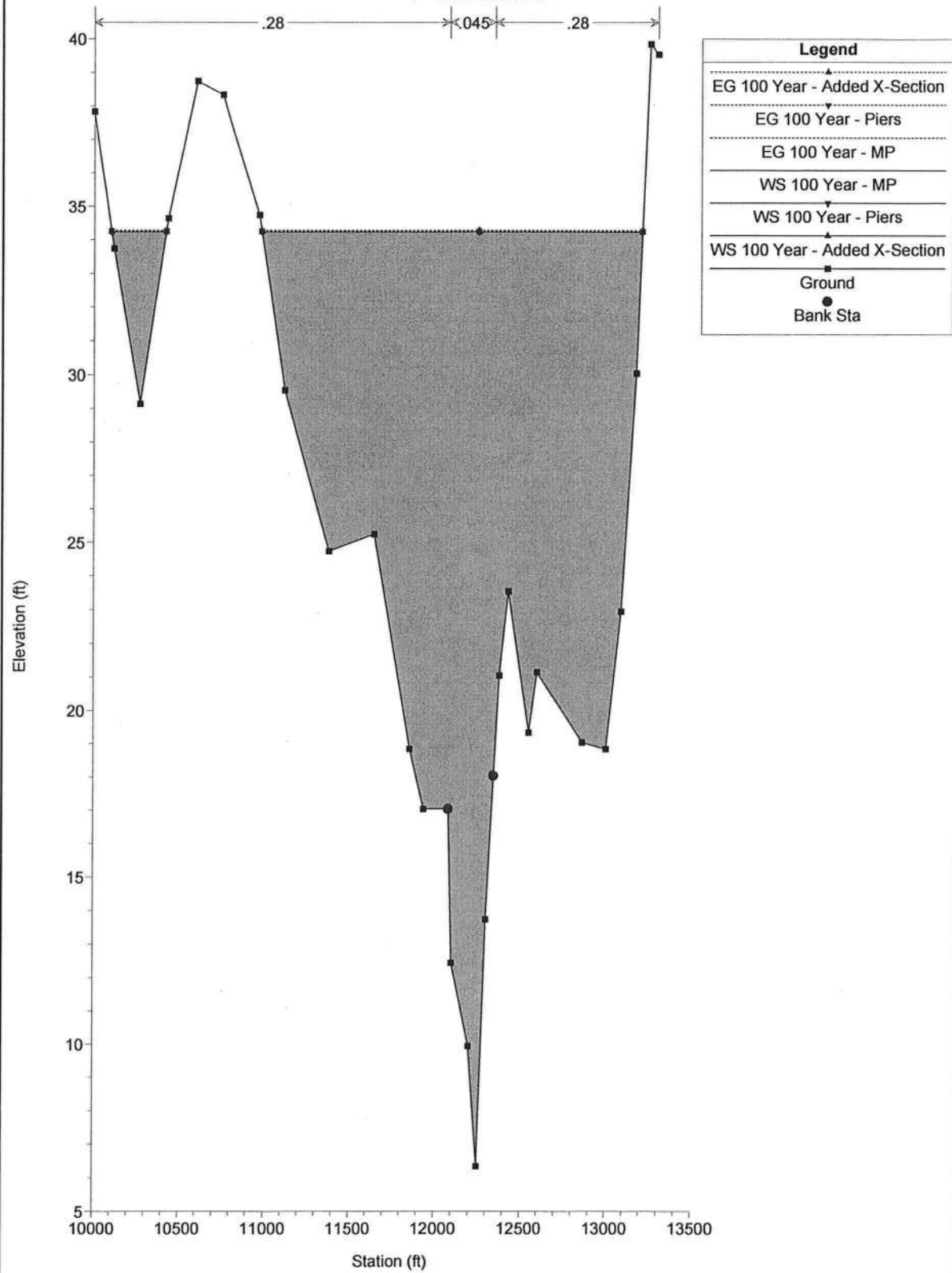
scaff zero rise Plan: 1) MP 7/14/2009 2) Added X-Section 7/21/2009 3) Piers 7/21/2009

H - GILCHRIST FIS -

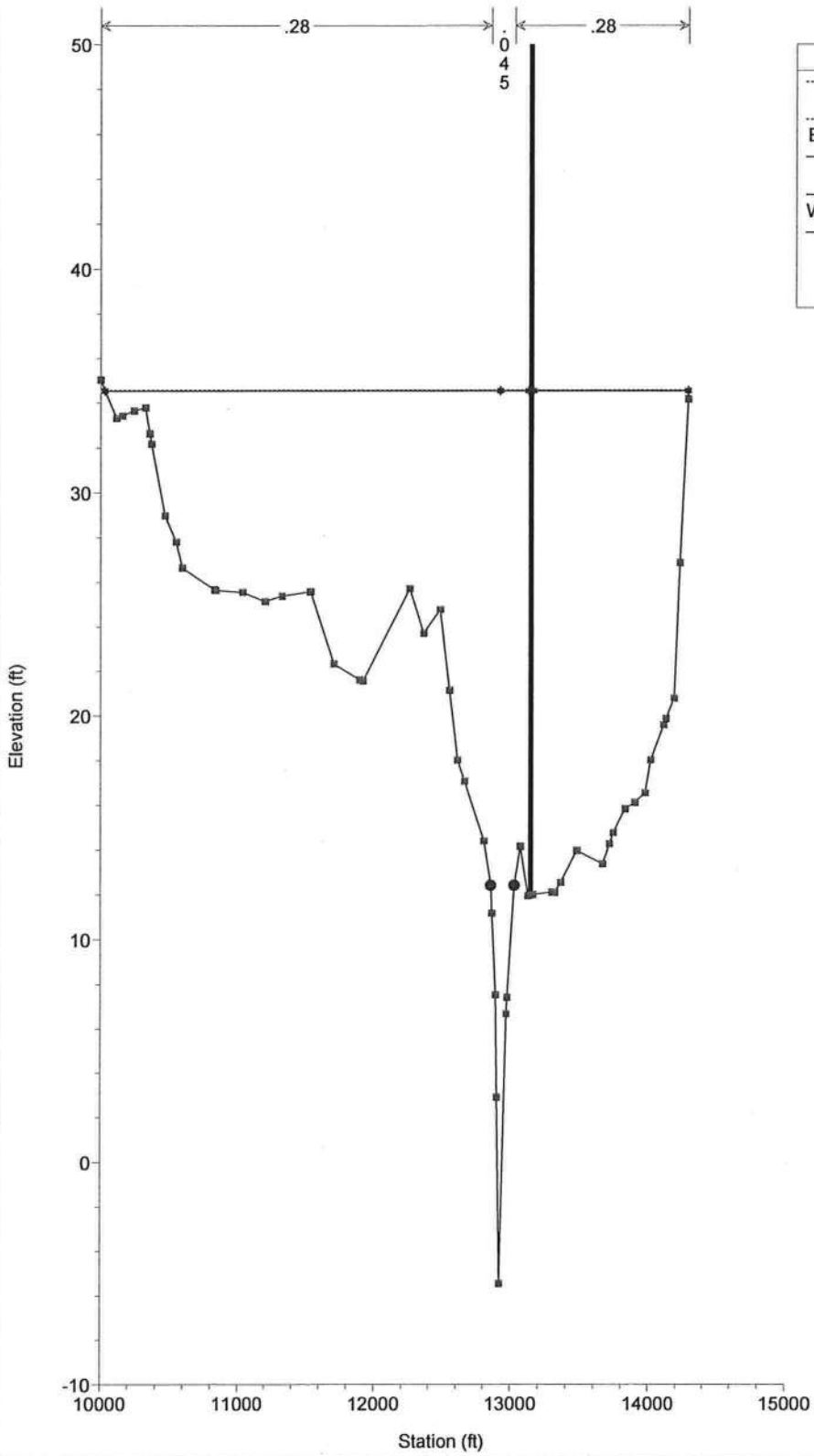


scaff zero rise Plan: 1) MP 7/14/2009 2) Added X-Section 7/21/2009 3) Piers 7/21/2009

I - GILCHRIST FIS -



scaff zero rise Plan: 1) MP 7/14/2009 2) Added X-Section 7/21/2009 3) Piers 7/21/2009



Legend	
EG 100 Year - Piers	▲
EG 100 Year - Added X-Section	▲
WS 100 Year - Piers	▲
WS 100 Year - Added X-Section	▲
Ground	■
Bank Sta	●



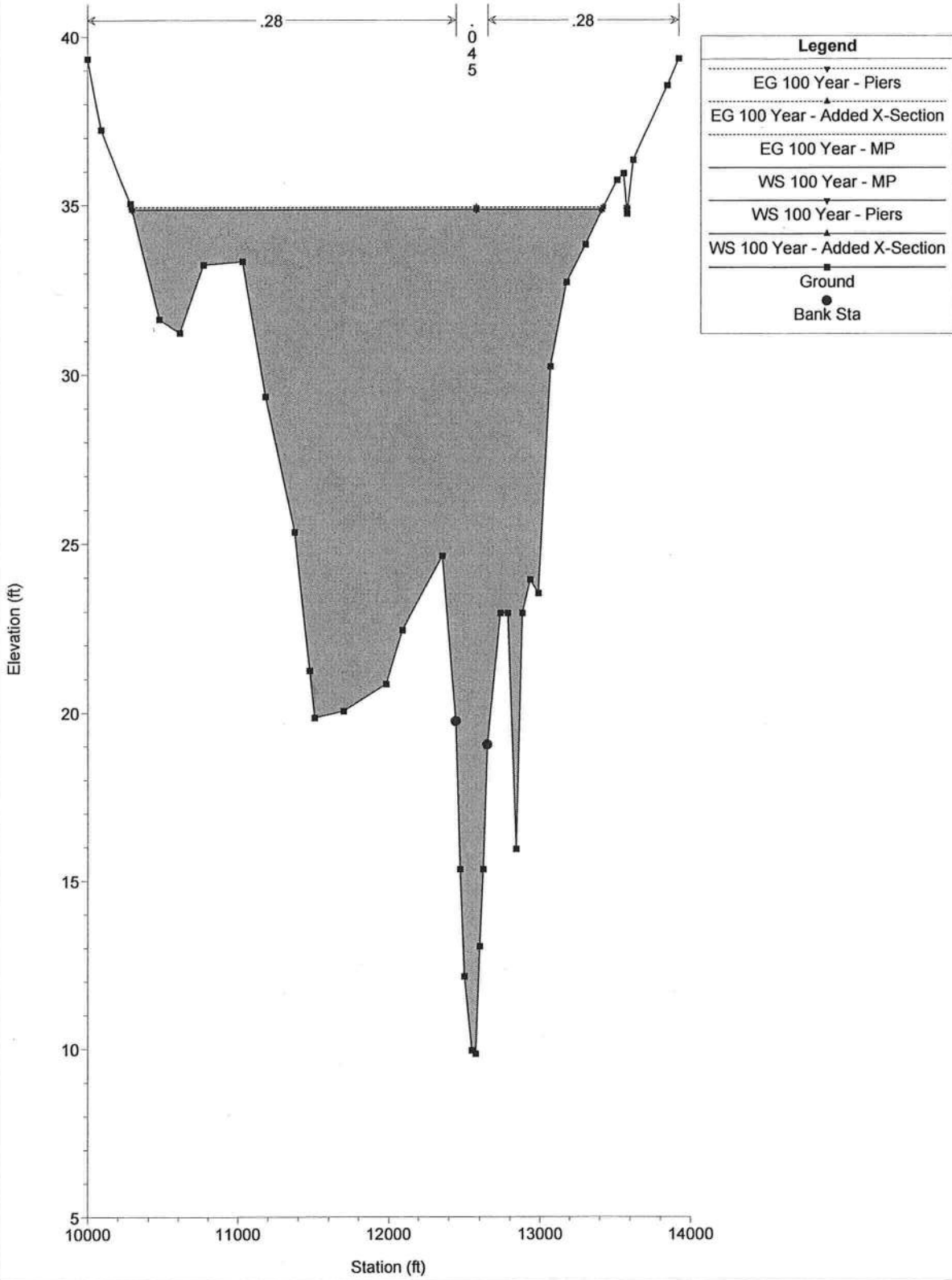
scaff zero rise Plan: 1) MP 7/14/2009 2) Added X-Section 7/21/2009 3) Piers 7/21/2009

J - GILCHRIST FIS -



scaff zero rise Plan: 1) MP 7/14/2009 2) Added X-Section 7/21/2009 3) Piers 7/21/2009

K - GILCHRIST FIS -



**Columbia County Building Department  
Flood Development Permit**

**Development Permit  
F 023- 09-009**

DATE 11/18/2009 BUILDING PERMIT NUMBER 000028228  
APPLICANT JOE WILLIAMS PHONE 755-3139  
ADDRESS 319 SW SOLSTICE CT LAKE CITY FL 32024  
OWNER RICHARD & RENA SCAFF PHONE \_\_\_\_\_  
ADDRESS 818 SW MANATEE ST. FT. WHITE FL 32038  
CONTRACTOR LITTLE & WILLIAMS, INC PHONE 755-3139  
ADDRESS 319 SW SOLSTICE CT LAKE CITY FL 32024  
SUBDIVISION 3 RIVERS ESTATES Lot 20 Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_  
TYPE OF DEVELOPMENT SFD, UTILITY PARCEL ID NO. 36-6S-15-00579-000

FLOOD ZONE AE BY BK \_\_\_\_\_ 1-6-88 FIRM COMMUNITY #. 120070 - PANEL #. 467B  
FIRM 100 YEAR ELEVATION 34' PLAN INCLUDED YES or NO  
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 35'  
IN THE REGULATORY FLOODWAY YES or NO RIVER Santa Fe  
SURVEYOR / ENGINEER NAME Gary Gill LICENSE NUMBER 51942

☒ ONE FOOT RISE CERTIFICATION INCLUDED

☐ ZERO RISE CERTIFICATION INCLUDED

☐ SRWMD PERMIT NUMBER \_\_\_\_\_  
(INCLUDING THE ONE FOOT RISE CERTIFICATION)

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED \_\_\_\_\_

INSPECTED DATE \_\_\_\_\_ BY \_\_\_\_\_

COMMENTS \_\_\_\_\_

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





## **COLUMBIA COUNTY 911 ADDRESSING / GIS DEPARTMENT**

P. O. Box 1787, Lake City, FL 32056-1787  
Telephone: (386) 758-1125 • Fax: (386) 758-1365 • Email: [ron\\_croft@columbiacountyfla.com](mailto:ron_croft@columbiacountyfla.com)



### **ADDRESS ASSIGNMENT DATA**

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

**A Residential or Other Structure(s) on Parcel Number:**  
**00-00-00-00579-000 (UNIT 2 THREE RIVERS ESTATES)**

**Address Assignment(s):**  
**818 SW MANATEE TER, FORT WHITE, FL, 32038**



**Note: Old home was demolished, new structure being constructed in same location, no change necessary in address assignment.**

Any questions concerning this information should be referred to the Columbia County 911 Addressing / GIS Department at the address or telephone number above.





APPLICATION FOR  
GENERAL WORK OF THE  
DISTRICT  
DEVELOPMENT PERMIT  
FORM 40B-1.901(11)

**Suwannee  
River  
Water  
Management  
District**

9225 CR 49

Live Oak, FL 32060

TELEPHONE: 386.362.1001

TELEPHONE: 800.226.1066

FAX: 386.362.1056

Application #:

FOR AGENCY USE ONLY

Please provide complete information for the items on this application. Applicants should consult the listings of content and conditions for use of a general permit in 40B-4.3020 and 40B-4.3030, Florida Administrative Code (F.A.C.). This information may be found on [www.mysuwanneeriver.com](http://www.mysuwanneeriver.com). For a general permit to be valid, all of the information required on this application must be supplied and the proposed development must meet the conditions listed in 40B-4.3030, F.A.C.

Application Type: ☒ New Permit ☐ Modification to Existing Permit

Existing Permit Number and/or Related District Permit Numbers:

Name of Project (if applicable): River House		Parcel Identification Number(s): 00-00-00-00579-000	
Applicant's Name: Richard and Rena Scaff		Project Description (please check all that apply): <input checked="" type="checkbox"/> Buildings <input type="checkbox"/> Boardwalk <input type="checkbox"/> Deck <input type="checkbox"/> Floating Dock <input type="checkbox"/> Non-floating Dock <input type="checkbox"/> Boat Ramp/Seawalls/Retaining Walls/Rip-Rap <input type="checkbox"/> Other (please specify)	
Title and Company:		Owner's Name, Title and Company (if different than applicant):	
Mailing Address: P.O. Box 1869, 348 SW Deanna Terrace		Owner's Address (including city, state and zip code):	
City, State and Zip: Lake City, FL 32025		Telephone Number:	
Telephone Number (including area code): 386-755-0394		Email Address:	
Fax Number (including area code):			
Email Address:			
County of Project: Columbia	Project Size (acres): 1.23	Section: 36	Township: 6 S
		Range: 15 E	
Property Address (if applicable): 818 Manatee St. Fort White FL			

A General Works of the District Development Permit is authorized by paragraph 40B-4.3010(1), F.A.C., and requires permittees to comply with all limiting conditions listed in rule 40B-4.3030, F.A.C. Submission of this application and subsequent development under the provisions of the general permit constitutes agreement by the permittee to abide by these conditions. Failure to abide by these conditions may constitute a violation of District rules and result in District enforcement action.

Signature of the OWNER of the property on which the development will occur.

Date

Incorporated by reference in 40B-1.901, Florida Administrative Code.

Water for Nature, Water for People



GTC Design Group, LLC  
P.O. Box 187  
Live Oak, FL 32064  
(Phone) 386.362.3678  
(Fax) 386.362.6133  
cwilliams@gtcdesigngroup.com

July 22, 2009

**ZERO RISE CERTIFICATION**

Client/Owner: **Richard and Rena Scaff**

Property Description: **Lot 20,  
Three Rivers Estates Unit 2  
Section 36, Township 6 South, Range 15 East  
Columbia County, Florida**

Structure in Floodway: **34' x 46' structure on piers**

River Mile: **13**

Elevation of 100yr flood: **34**  
Community Panel: **12023C0467 C**

I hereby certify that construction of the proposed residence will not increase flood elevations of the Sante Fe River.

Gary J. Gill  
PE# 51942  
7/22/09  
July 22, 2009



GTC Design Group, LLC  
P.O. Box 187  
Live Oak, FL 32064  
(Phone) 386.362.3678  
(Fax) 386.362.6133  
cwilliams@gtcdesigngroup.com

August 24, 2009

Leroy Marshall II  
c/o Suwannee River Water Management District  
9225 County Road 49  
Live Oak, FL 32060

**SUBJECT: Zero Rise- Richard & Rena Scaff**

Mr. Marshall

Mr. Richard Scaff proposes to build a residence in Section 36, Township 6 South, Range 15 East, Lot 20, Columbia County, Florida. The structure will be a 34 x 46 residential addition on piers in the floodway of the Santa Fe River.

A new cross section was added at the site location. A site plan is attached locating the property, and existing cross sections.

**All elevations per NAV D1998 Datum.**

The following steps were executed in doing the zero rise calculations.

- (1) Run the model with SRWMD existing cross sections. Verify that the model matches the original flood study results.

**The output from the run using the existing cross sections matches the original flood study.**

- (2) Interpolate between existing cross sections and add a new cross section at the site location.

**The new section, RS 12.90, was interpolated from river posts 11.3 and 13.03. The elevations from the interpolated cross sections were adjusted accordingly.**

- (3) Verify that the run using the additional cross section matches the original output.

**The output from the run using the interpolated cross sections matches the original flood study.**

- (4) Add obstacles along the new cross section to model the piers under the house.

**An obstacle width of 60 feet was added at cross section RS 12.90. RS 12.90 is located at the center of the building. An obstacle height of 60 feet was input to insure the structure would be modeled correctly.**

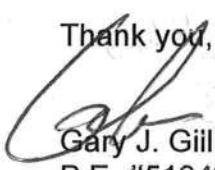
- (5) Verify the run including the obstacles matches the original model run.

**The water surface elevations for all three runs match and a zero rise is achieved.**

- (6) Print out cross sections.

**See attachments.**

Thank you,

  
Gary J. Gill  
P.E. #51942

7/22/07





## Columbia County Property Appraiser

J. Doyle Crews, CFA - Lake City, Florida - 386-758-1083

**PARCEL: 00-00-00-00579-000** - SINGLE FAM (000100)

Name: HAMMOND PAULINE G	LandVal	\$39,600.00
Site: MANATEE	BldgVal	\$18,875.00
23255 NW 199TH PL APT 1	ApprVal	\$58,865.00
Mail: HIGH SPRINGS, FL 32643	JustVal	\$58,865.00
Sales	Assd	\$58,865.00
Info	Exmpt	\$0.00
	Taxable	County: \$58,865.00   City: \$58,865.00
		Other: \$58,865.00   School: \$58,865.00

0 0.06 0.12 0.18 mi



This information, GIS Map Updated: 4/27/2009, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

HEC-RAS River, Santa Fe Reach, Main Profile: 100 Year

Reach	River Sta	Profile	Plan	Q Total (cfs)	Min Ch El (ft)	W.S. Elev (ft)	Crit W.S. (ft)	E.G. Elev (ft)	E.G. Slope (ft/ft)	Vel Chnl (ft/s)	Flow Area (sq ft)	Top Width (ft)	Froude # Chl
Main	14.08	100 Year	MP	16359.00	9.84	34.86		34.92	0.000087	2.37	27817.51	3123.31	0.09
Main	14.08	100 Year	Added X-Section	16359.00	9.84	34.86		34.93	0.000101	2.55	27789.66	3121.45	0.10
Main	14.08	100 Year	Piers	16359.00	9.84	34.86		34.93	0.000101	2.55	27807.79	3122.66	0.10
Main	13.03	100 Year	MP	16359.00	-6.11	34.55		34.59	0.000046	2.06	39548.80	3890.19	0.07
Main	13.03	100 Year	Added X-Section	16359.00	-6.11	34.55		34.58	0.000042	1.98	45637.04	4068.60	0.06
Main	13.03	100 Year	Piers	16359.00	-6.11	34.55		34.59	0.000042	1.98	45662.21	4069.62	0.06
Main	12.8973*	100 Year	Added X-Section	16359.00	-5.46	34.54		34.56	0.000029	1.64	55337.80	4252.69	0.05
Main	12.8973*	100 Year	Piers	16359.00	-5.46	34.54		34.57	0.000030	1.67	54590.99	4219.02	0.05
Main	11.3	100 Year	MP	16359.00	6.34	34.23		34.26	0.000035	1.70	32793.08	2491.62	0.06
Main	11.3	100 Year	Added X-Section	16359.00	6.34	34.23		34.28	0.000056	1.97	28886.68	2541.67	0.07
Main	11.3	100 Year	Piers	16359.00	6.34	34.23		34.28	0.000056	1.97	28886.68	2541.67	0.07
Main	10.06	100 Year	MP	16359.00	1.15	33.89		33.96	0.000068	2.39	21181.37	2550.87	0.08
Main	10.06	100 Year	Added X-Section	16359.00	1.15	33.89		33.95	0.000049	2.14	28977.51	3421.40	0.07
Main	10.06	100 Year	Piers	16359.00	1.15	33.89		33.95	0.000049	2.14	28977.51	3421.40	0.07

Inst: 200912018510 Date: 11/4/2009 Time: 9:52 AM

DC, P DeWitt Cason, Columbia County Page 1 of 1 B: 1183 P: 1674

## NOTICE OF COMMENCEMENT

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number \_\_\_\_\_

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

Lot 30 of Comm SE Lot 21, Run W 35.31 ft for POB, Cont W 139.81 ft, NE 123.43 ft, SE 37.74 ft & POB (Unit 2 Three Rivers Estates)

1. Description of property (legal description): Orb 366-419, 659-010, (DC Wiley M Hammond 1171-560)
- a) Street (job) Address: 318 Manatee St., Ft. White, FL 32038
2. General description of improvements: One story residence, 2116 sq ft, masonry, wood, dumb waiter, wood studs w/ batt insulation, hardy board

### 3. Owner Information

- a) Name and address: RICHARD H. SCAFF AND RENAYEE SCAFF
- b) Name and address of fee simple titleholder (if other than owner): NAME SAME AS ABOVE - ADDRESS:
- c) Interest in property: OWNERS - P.O. Box 1869, LAKE CITY, FL 32056

### 4. Contractor Information

- a) Name and address: Little Williams, Inc. 319 SW Solstice Ct., Lake City, FL 32024
- b) Telephone No.: 386 755-3139 Fax No. (Opt.): 386 961-9539

### 5. Surety Information

- a) Name and address: N/A
- b) Amount of Bond: \_\_\_\_\_
- c) Telephone No.: \_\_\_\_\_ Fax No. (Opt.): \_\_\_\_\_

### 6. Lender

- a) Name and address: N/A
- b) Phone No.: \_\_\_\_\_

### 7. Identity of person within the State of Florida designated by owner upon whom notices or other documents may be served:

- a) Name and address: \_\_\_\_\_
- b) Telephone No.: \_\_\_\_\_ Fax No. (Opt.): \_\_\_\_\_

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

- a) Name and address: Little Williams, Inc. 319 SW Solstice Ct., Lake City, FL 32024
- b) Telephone No.: 386 755-3139 Fax No. (Opt.): 386 961-9539

### 9. Expiration date of Notice of Commencement (the expiration date is one 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 I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA  
COUNTY OF COLUMBIA

10. Richard H. Scaff  
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager

RICHARD H. SCAFF & RENAYEE SCAFF  
Print Name

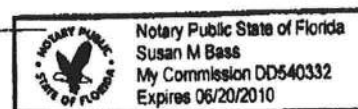
The foregoing instrument was acknowledged before me, a Florida Notary, this 26th day of October, 2009, by:

Richard H. Scaff & Renayee Scaff (type of authority, e.g. officer, trustee, attorney

fact) for \_\_\_\_\_ (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification \_\_\_\_\_ Type \_\_\_\_\_

Notary Signature Susan M. Bass Notary Stamp or Seal:



11. Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Richard H. Scaff  
Signature of Natural Person Signing in line #10 above.)



*Scott, K.*

SUBCONTRACTOR

VERIFICATION FORM

RETURN TO: 754-2160

APPLICATION NUMBER

0911-11

CONTRACTOR

ACTOR

JOE WILLIAMS

PHONE

386-755-3139

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

FOR THE

FBI #

In Columbia County one permit will cover all trades and records of the subcontractors who actually did the trade work. 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.

work at the permitted site. It is REQUIRED that we have a specific work under the permit. Per Florida Statute 440 and contractors to provide evidence of workers' compensation or Certificate of Competency license in Columbia County.

or 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.

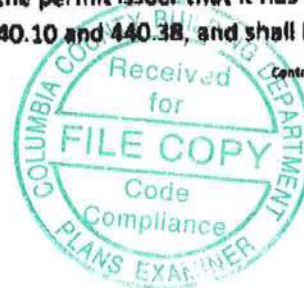
<b>ELECTRICAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>MECHANICAL/ A/C</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>PLUMBING/ GAS</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>ROOFING</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SHEET METAL</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>FIRE SYSTEM/ SPRINKLER</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____
<b>SOLAR</b>	Print Name _____ License #: _____	Signature _____ Phone #: _____

Specialty License	Contractor Name	Subcontractor Signature
MASON		
CONCRETE FINISHER		
FRAMING		
INSULATION		
STUCCO		
DRYWALL		
PLASTER		
CABINET INSTALLER		
* PAINTING	42 William R Davis	William R Davis
ACOUSTICAL CEILING		
GLASS		
CERAMIC TILE		
FLOOR COVERING		
ALUM/VINYL SIDING		
GARAGE DOOR		
METAL BLDG ERECTOR		

F. S. 440.103 Building permits; identification of mini-applying for and receiving a building permit, show proof of compensation for its employees under this chapter at the time the employer applies for a building permit.

um premium policy.--Every employer shall, as a condition to if and certify to the permit issuer that it has secured provided in ss. 440.10 and 440.38, and shall be presented each





THE "AMELIA"

SCAFF  
0911-11

SUBCONT

CTOR VERIFICATION FORM FAX BACK TO: 754-2160

APPLICATION NUMBER

CO

TRACTOR JOE WILLIAMS

PHONE 755-3139

THIS FORM MUST BE SUB

MITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades records of the subcontractors who actually did the t Ordinance 89-6, a contractor shall require all subco exemption, general liability insurance and a valid Ce

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Any changes, the permitted contractor is responsib start of that subcontractor beginning any work. Vlt

for the corrected form being submitted to this office prior to the ations will result in stop work orders and/or fines.

ELECTRICAL	Print Name _____ License #: _____	Signature _____ Phone #: _____
MECHANICAL/ A/C _____	Print Name _____ License #: _____	Signature _____ Phone #: _____
PLUMBING/ GAS _____	Print Name _____ License #: _____	Signature _____ Phone #: _____
ROOFING	Print Name _____ License #: _____	Signature _____ Phone #: _____
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
MASON			
CONCRETE FINISHER			
FRAMING			
INSULATION			
STUCCO			
DRYWALL			
PLASTER			
* CABINET INSTALLER	CGIC 003903	LITTLE & WILLIAMS	Joe Williams
PAINTING			
ACOUSTICAL CEILING			
GLASS			
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING			
GARAGE DOOR			
METAL BLDG ERECTOR			

F. S. 440.103 Building permits; identification of m applying for and receiving a building permit, show compensation for its employees under this chapter

imum premium policy.--Every employer shall, as a condition to oof and certify to the permit issuer that it has secured s provided in ss. 440.10 and 440.38, and shall be presented each

## SUBCONTRACTOR VERIFICATION FORM

 APPLICATION NUMBER 091111 CONTRACTOR Little & Williams, Inc PHONE 386 755 3139

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	Print Name <u>Oscar Gray</u>	Signature <u>[Signature]</u>	Phone #: <u>904 259-6546</u>
	License #: <u>EC0001471</u>		
<input checked="" type="checkbox"/> MECHANICAL/ A/C	Print Name <u>Oscar Gray</u>	Signature <u>[Signature]</u>	Phone #: <u>904 259-6546</u>
	License #: <u>CAC057649</u>		
<input checked="" type="checkbox"/> PLUMBING/ GAS	Print Name <u>Morris A Foster</u>	Signature <u>[Signature]</u>	Phone #: <u>904 6531136</u>
	License #: <u>CFL057536</u>		
<input checked="" type="checkbox"/> ROOFING	Print Name <u>LITTLE &amp; WILLIAMS</u>	Signature <u>[Signature]</u>	Phone #: <u>386 7553139</u>
	License #: <u>EGC003903</u>		
<input type="checkbox"/> SHEET METAL	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
<input type="checkbox"/> FIRE SYSTEM/ SPRINKLER	Print Name _____	Signature _____	Phone #: _____
	License #: _____		
<input type="checkbox"/> SOLAR	Print Name _____	Signature _____	Phone #: _____
	License #: _____		



Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	GGC003903	Little & Williams	[Signature]
CONCRETE FINISHER	"	Little & Williams	[Signature]
FRAMING	"	Little & Williams	[Signature]
INSULATION	000232	Shane's Insulation Inc.	[Signature]
STUCCO	N/A		
DRYWALL	GGC003903	Little & Williams	[Signature]
PLASTER	N/A		
C	2		
PAINTING			
ACOUSTICAL CEILING	N/A		
GLASS	GGC003903	Little & Williams	[Signature]
CERAMIC TILE			
FLOOR COVERING			
ALUM/VINYL SIDING	SCC047025	Hunt's Aluminum	[Signature]
GARAGE DOOR	N/A		
METAL BLDG ERECTOR	N/A		

**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.



<b>ACORD CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) 11/04/2009
PRODUCER (904)268-7310 FAX (904)268-2801 JP Perry Insurance Inc 3342 Kori Road Jacksonville, FL 32257		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURED Dickie's Plumbing, Inc. 10174 Hilliard Avenue Glen St. Mary, FL 32040		
INSURERS AFFORDING COVERAGE		NAIC #
INSURER A: Old Dominion Ins Co		42293
INSURER B: BusinessFirst Insurance Co		11697
INSURER C:		
INSURER D:		
INSURER E:		

**COVERAGES**

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

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY	MPG88299	05/03/2009	05/03/2010	EACH OCCURRENCE \$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 10,000
						PERSONAL & ADV INJURY \$ 1,000,000
						GENERAL AGGREGATE \$ 2,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER:				
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				
A		AUTOMOBILE LIABILITY	B1G88299	05/03/2009	05/03/2010	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
		<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
		<input checked="" type="checkbox"/> HIRED AUTOS				
<input checked="" type="checkbox"/> NON-OWNED AUTOS						
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
		<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
						AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE \$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
						\$
		DEDUCTIBLE				\$
		RETENTION \$				\$
B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	521041530	06/26/2009	06/26/2010	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$ 100,000
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$ 100,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Re: Little &amp; Williams

**CERTIFICATE HOLDER**

Columbia County Building Department  
 P.O. Box 1529  
 Lake City, FL 32056-1259

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Joseph Perry, III/TMM

AC# 4425948

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L09060200819

DATE	BATCH NUMBER	LICENSE NBR
06/02/2009	080503143	QB37236

The BUSINESS ORGANIZATION

Named below IS QUALIFIED  
Under the provisions of Chapter 489 FS.

Expiration date: AUG 31, 2011

(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS  
COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)

DICKIE'S PLUMBING INC

10174 HILLIARD AVE

GLEN ST MARY

FL 32040

CHARLIE CRIST  
GOVERNOR

CHARLES W. DRAGO  
SECRETARY

DISPLAY AS REQUIRED BY LAW



MAY 04 2009

AC# 3853594

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L08071200287

DATE	BATCH NUMBER	LICENSE NBR
07/12/2008	078159048	CFC057556

The PLUMBING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2010

FOSTER, MORRIS LYNN  
DICKIE, S PLUMBING INC  
10174 HILLIARD AVENUE  
GLEN SAINT MARY FL 32040

CHARLIE CRIST  
GOVERNOR

CHUCK DRAGO  
INTERIM SECRETARY

DISPLAY AS REQUIRED BY LAW

AC# 3853594

## STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L08071290287

DATE BATCH NUMBER LICENSE NBR

07/12/2008 078159048 CFC057556

The PLUMBING-CONTRACTOR

Named below IS CERTIFIED

Under the provisions of Chapter 489, FS

Expiration date: AUG 31, 2010

FOSTER, MORRIS LYNN  
DICKIE'S PLUMBING INC  
10174 HILLIARD AVENUE  
GLEN SAINT MARY FL 32040CHARLIE CRIST  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CHUCK DRAGO  
INTERIM SECRETARY

**LICENSE RECEIPT 000232**  
**COLUMBIA COUNTY BUILDING DEPARTMENT**  
**CONTRACTOR LICENSING**

INSULATION

ISSUE DATE 09/24/2009

NAME HENRY S. NASH


EXPIRATION DATE 09/30/2011

ADDRESS 232 SW CANNON COURT

PHONE 386-758-3081

CHECK NUMBER CASH LAKE CITY FL 32024

FEE PAID 100.00

<b>COLUMBIA COUNTY COMPETENCY LICENSE</b>	
<b>HENRY S. NASH</b>	
SHANE'S INSULATION, INC.	
<b>INSULATION</b>	
Issued: 09/24/2009	
Expires: 09/30/2011	
Status: A	
State Lic #	
Image not Available	
<b>000232</b>	<b>INSULATION</b>
Building Official <i>John Hume</i>	
	



**FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION**

## Florida Department of Community Affairs Residential Performance Method A

<b>Project Name:</b> Scaff 0101 <b>Street:</b> 818 Manatee St <b>City, State, Zip:</b> Fort White, FL, 32038- <b>Owner:</b> Richard & Rena Scaff. <b>Design Location:</b> FL, Jacksonville	<b>Builder Name:</b> Little and Williams <b>Permit Office:</b> Columbia <b>Permit Number:</b> 22228 <b>Jurisdiction:</b> 22100C
--	--

<table style="width: 100%;"> <tr> <td style="width: 30%;">1. New construction or existing</td> <td style="width: 30%;">New (From Plans)</td> <td style="width: 40%;"></td> </tr> <tr> <td>2. Single family or multiple family</td> <td>Single-family</td> <td></td> </tr> <tr> <td>3. Number of units, if multiple family</td> <td>1</td> <td></td> </tr> <tr> <td>4. Number of Bedrooms</td> <td>2</td> <td></td> </tr> <tr> <td>5. Is this a worst case?</td> <td>No</td> <td></td> </tr> <tr> <td>6. Conditioned floor area (ft²)</td> <td>1187</td> <td></td> </tr> <tr> <td>7. Windows</td> <td>Description</td> <td>Area</td> </tr> <tr> <td>a. U-Factor:</td> <td>DbI, U=0.80</td> <td>122.00 ft²</td> </tr> <tr> <td>SHGC:</td> <td>SHGC=0.60</td> <td></td> </tr> <tr> <td>b. U-Factor:</td> <td>DbI, U=0.55</td> <td>15.00 ft²</td> </tr> <tr> <td>SHGC:</td> <td>SHGC=0.60</td> <td></td> </tr> <tr> <td>c. U-Factor:</td> <td>N/A</td> <td>ft²</td> </tr> <tr> <td>SHGC:</td> <td></td> <td></td> </tr> <tr> <td>d. U-Factor:</td> <td>N/A</td> <td>ft²</td> </tr> <tr> <td>SHGC:</td> <td></td> <td></td> </tr> <tr> <td>e. U-Factor:</td> <td>N/A</td> <td>ft²</td> </tr> <tr> <td>SHGC:</td> <td></td> <td></td> </tr> <tr> <td>8. Floor Types</td> <td>Insulation</td> <td>Area</td> </tr> <tr> <td>a. Raised Floor</td> <td>R=30.0</td> <td>1187.00 ft²</td> </tr> <tr> <td>b. N/A</td> <td>R=</td> <td>ft²</td> </tr> <tr> <td>c. N/A</td> <td>R=</td> <td>ft²</td> </tr> </table>	1. New construction or existing	New (From Plans)		2. Single family or multiple family	Single-family		3. Number of units, if multiple family	1		4. Number of Bedrooms	2		5. Is this a worst case?	No		6. Conditioned floor area (ft²)	1187		7. Windows	Description	Area	a. U-Factor:	DbI, U=0.80	122.00 ft²	SHGC:	SHGC=0.60		b. U-Factor:	DbI, U=0.55	15.00 ft²	SHGC:	SHGC=0.60		c. U-Factor:	N/A	ft²	SHGC:			d. U-Factor:	N/A	ft²	SHGC:			e. U-Factor:	N/A	ft²	SHGC:			8. Floor Types	Insulation	Area	a. Raised Floor	R=30.0	1187.00 ft²	b. N/A	R=	ft²	c. N/A	R=	ft²	<table style="width: 100%;"> <tr> <td style="width: 30%;">9. Wall Types</td> <td style="width: 30%;">Insulation</td> <td style="width: 40%;">Area</td> </tr> <tr> <td>a. Frame - Wood, Exterior</td> <td>R=13.0</td> <td>1152.00 ft²</td> </tr> <tr> <td>b. N/A</td> <td>R=</td> <td>ft²</td> </tr> <tr> <td>c. N/A</td> <td>R=</td> <td>ft²</td> </tr> <tr> <td>d. N/A</td> <td>R=</td> <td>ft²</td> </tr> <tr> <td>10. Ceiling Types</td> <td>Insulation</td> <td>Area</td> </tr> <tr> <td>a. Under Attic (Vented)</td> <td>R=30.0</td> <td>1187.00 ft²</td> </tr> <tr> <td>b. N/A</td> <td>R=</td> <td>ft²</td> </tr> <tr> <td>c. N/A</td> <td>R=</td> <td>ft²</td> </tr> <tr> <td>11. Ducts</td> <td></td> <td></td> </tr> <tr> <td>a. Sup: Attic Ret: Attic AH: Exterior Sup. R= 6,</td> <td colspan="2">237.4 ft²</td> </tr> <tr> <td>12. Cooling systems</td> <td></td> <td></td> </tr> <tr> <td>a. Central Unit</td> <td>Cap: 24 kBtu/hr</td> <td>SEER: 14</td> </tr> <tr> <td>13. Heating systems</td> <td></td> <td></td> </tr> <tr> <td>a. Electric Heat Pump</td> <td>Cap: 24 kBtu/hr</td> <td>HSPF: 8.5</td> </tr> <tr> <td>14. Hot water systems</td> <td></td> <td></td> </tr> <tr> <td>a. Electric</td> <td>Cap: 40 gallons</td> <td>EF: 0.92</td> </tr> <tr> <td>b. Conservation features</td> <td>None</td> <td></td> </tr> <tr> <td>15. Credits</td> <td></td> <td>Pstat</td> </tr> </table>	9. Wall Types	Insulation	Area	a. Frame - Wood, Exterior	R=13.0	1152.00 ft²	b. N/A	R=	ft²	c. N/A	R=	ft²	d. N/A	R=	ft²	10. Ceiling Types	Insulation	Area	a. Under Attic (Vented)	R=30.0	1187.00 ft²	b. N/A	R=	ft²	c. N/A	R=	ft²	11. Ducts			a. Sup: Attic Ret: Attic AH: Exterior Sup. R= 6,	237.4 ft²		12. Cooling systems			a. Central Unit	Cap: 24 kBtu/hr	SEER: 14	13. Heating systems			a. Electric Heat Pump	Cap: 24 kBtu/hr	HSPF: 8.5	14. Hot water systems			a. Electric	Cap: 40 gallons	EF: 0.92	b. Conservation features	None		15. Credits		Pstat
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11. Ducts																																																																																																																									
a. Sup: Attic Ret: Attic AH: Exterior Sup. R= 6,	237.4 ft²																																																																																																																								
12. Cooling systems																																																																																																																									
a. Central Unit	Cap: 24 kBtu/hr	SEER: 14																																																																																																																							
13. Heating systems																																																																																																																									
a. Electric Heat Pump	Cap: 24 kBtu/hr	HSPF: 8.5																																																																																																																							
14. Hot water systems																																																																																																																									
a. Electric	Cap: 40 gallons	EF: 0.92																																																																																																																							
b. Conservation features	None																																																																																																																								
15. Credits		Pstat																																																																																																																							

Glass/Floor Area: 0.115	Total As-Built Modified Loads: 30.45	<b>PASS</b>
	Total Baseline Loads: 36.08	

I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.  <b>PREPARED BY:</b> <u>And B...</u> <b>DATE:</b> <u>7-8-09</u>  I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.  <b>OWNER/AGENT:</b> _____ <b>DATE:</b> _____	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.  <b>BUILDING OFFICIAL:</b> _____ <b>DATE:</b> _____
--	---



Office



## PROJECT

Title: Scaff 0101	Bedrooms: 2	Address Type: Street Address
Building Type: FLAsBuilt	Bathrooms: 0	Lot #
Owner: Richard & Rena Scaff	Conditioned Area: 1187	SubDivision:
# of Units: 1	Total Stories: 1	PlatBook:
Builder Name: Little and Williams	Worst Case: No	Street: 818 Manatee St
Permit Office:	Rotate Angle: 0	County: Columbia
Jurisdiction:	Cross Ventilation:	City, State, Zip: Fort White ,
Family Type: Single-family	Whole House Fan:	Fl , 32038-
New/Existing: New (From Plans)		
Comment:		

## CLIMATE

✓	Design Location	TMY Site	IECC Zone	Design Temp 97.5 %	Design Temp 2.5 %	Int Design Temp Winter	Int Design Temp Summer	Heating Degree Days	Design Moisture	Daily Temp Range
✓	FL, Jacksonville	FL_JACKSONVILLE_INT	2	32	93	75	70	1281	49	Medium

## FLOORS

✓	#	Floor Type	R-Value	Area	Tile	Wood	Carpet
✓	1	Raised Floor		1187 ft²	30	0.15	0 0.85

## ROOF

✓	#	Type	Materials	Roof Area	Gable Area	Roof Color	Solar Absor.	Tested	Deck Insul.	Pitch
✓	1	Gable or shed	Metal	1251 ft²	198 ft²	Medium	0.96	No	0	18.4 deg

## ATTIC

✓	#	Type	Ventilation	Vent Ratio (1 in)	Area	RBS	IRCC
✓	1	Full attic	Vented	300	1187 ft²	N	N

## CEILING

✓	#	Ceiling Type	R-Value	Area	Framing Frac	Truss Type
✓	1	Under Attic (Vented)	30	1187 ft²	0.11	Wood

## WALLS

✓	#	Omt	Adjacent To	Wall Type	Cavity R-Value	Area	Sheathing R-Value	Framing Fraction	Solar Absor.
✓	1	N	Exterior	Frame - Wood	13	272 ft²		0.23	0.75
✓	2	E	Exterior	Frame - Wood	13	304 ft²		0.23	0.75
✓	3	S	Exterior	Frame - Wood	13	208 ft²		0.23	0.75
✓	4	W	Exterior	Frame - Wood	13	104 ft²		0.23	0.75
✓	5	S	Exterior	Frame - Wood	13	64 ft²		0.23	0.75
✓	6	W	Exterior	Frame - Wood	13	200 ft²		0.23	0.75

DOORS												
✓	#	Omt	Door Type		Storms	U-Value	Area					
✓	1	N	Insulated		None	0.46	20 ft²					
✓	2	S	Insulated		None	0.46	20 ft²					

WINDOWS													
Window orientation below is as entered. Actual orientation is modified by rotate angle shown in "Project" section above.													
✓	#	Omt	Frame	Panes	NFRC	U-Factor	SHGC	Storms	Area	Overhang		Int Shade	Screening
										Depth	Separation		
✓	1	E	Metal	Double (Tinted)	Yes	0.55	0.6	N	15 ft²	2 ft 0 in	6 ft 0 in	HERS 2006	None
✓	2	E	Metal	Double (Tinted)	Yes	0.8	0.6	N	8 ft²	2 ft 0 in	8 ft 6 in	HERS 2006	None
✓	3	E	Metal	Double (Tinted)	Yes	0.8	0.6	N	15 ft²	0 ft 0 in	0 ft 0 in	HERS 2006	None
✓	4	W	Metal	Double (Tinted)	Yes	0.8	0.6	N	9 ft²	10 ft 0 in	1 ft 0 in	HERS 2006	None
✓	5	W	Metal	Double (Tinted)	Yes	0.8	0.6	N	30 ft²	2 ft 0 in	8 ft 0 in	HERS 2006	None
✓	6	W	Metal	Double (Tinted)	Yes	0.8	0.6	N	15 ft²	2 ft 0 in	7 ft 0 in	HERS 2006	None
✓	7	W	Metal	Double (Tinted)	Yes	0.8	0.6	N	15 ft²	2 ft 0 in	6 ft 0 in	HERS 2006	None
✓	8	W	Metal	Double (Tinted)	Yes	0.8	0.6	N	15 ft²	2 ft 0 in	5 ft 0 in	HERS 2006	None
✓	9	W	Metal	Double (Tinted)	Yes	0.8	0.6	N	15 ft²	2 ft 0 in	4 ft 0 in	HERS 2006	None

INFILTRATION & VENTING										
✓	Method	SLA	CFM 50	ACH 50	ELA	EqLA	— Forced Ventilation —		Run Time	Fan
							Supply CFM	Exhaust CFM	Fraction	Watts
✓	Default	0.00036	1121	7.08	61.5	115.7	0 cfm	0 cfm	0	0

COOLING SYSTEM								
✓	#	System Type	Subtype	Efficiency	Capacity	Air Flow	SHR	Ductless
✓	1	Central Unit	None	SEER: 14	24 kBtu/hr	720 cfm	0.75	False

HEATING SYSTEM						
✓	#	System Type	Subtype	Efficiency	Capacity	Ductless
✓	1	Electric Heat Pump	None	HSPF: 8.5	24 kBtu/hr	False

HOT WATER SYSTEM							
✓	#	System Type	EF	Cap	Use	SetPnt	Conservation
✓	1	Electric	0.92	40 gal	50 gal	120 deg	None

SOLAR HOT WATER SYSTEM							
✓	FSEC	Company Name	System Model #	Collector Model #	Collector Area	Storage Volume	FEF
	Cert #						
✓	None	None			ft²		

DUCTS												
✓	#	— Supply — Location	R-Value	Area	— Return — Location	Area	Leakage Type	Air Handler	CFM 25	Percent Leakage	QN	RLF
	1	Attic	6	237.4 ft	Attic	59.35 ft	Default Leakage	Exterior				

TEMPERATURES													
Programable Thermostat: Y				Ceiling Fans:									
Cooling	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec	
Heating	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec	
Venting	<input checked="" type="checkbox"/> Jan	<input checked="" type="checkbox"/> Feb	<input checked="" type="checkbox"/> Mar	<input checked="" type="checkbox"/> Apr	<input checked="" type="checkbox"/> May	<input checked="" type="checkbox"/> Jun	<input checked="" type="checkbox"/> Jul	<input checked="" type="checkbox"/> Aug	<input checked="" type="checkbox"/> Sep	<input checked="" type="checkbox"/> Oct	<input checked="" type="checkbox"/> Nov	<input checked="" type="checkbox"/> Dec	
Thermostat Schedule: HERS 2006 Reference													
Schedule Type		1	2	3	4	5	6	7	8	9	10	11	12
Cooling (WD)	AM	78	78	78	78	78	78	78	78	80	80	80	80
	PM	80	80	78	78	78	78	78	78	78	78	78	78
Cooling (WEH)	AM	78	78	78	78	78	78	78	78	78	78	78	78
	PM	78	78	78	78	78	78	78	78	78	78	78	78
Heating (WD)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68
Heating (WEH)	AM	66	66	66	66	66	68	68	68	68	68	68	68
	PM	68	68	68	68	68	68	68	68	68	68	68	68

## Code Compliance Checklist

### Residential Whole Building Performance Method A - Details

ADDRESS: 818 Manatee St  
Fort White, FL, 32038-

PERMIT #:

#### INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	N1106.AB.1.1	Maximum: .3 cfm/sq.ft. window area; .5 cfm/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; 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	N1106.AB.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	N1106.AB.1.2.3	Between walls & ceilings; penetrations of ceiling plane to 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 with < 2.0 cfm from conditioned space, tested.	
Multi-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.	

#### 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 N112.ABC.3. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	N1112.AB.2.3	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%. Heat pump pool heaters shall have a minimum COP of 4.0.	
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.AB. Ducts in unconditioned attics: R-6 min. 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.	



# ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

**ESTIMATED ENERGY PERFORMANCE INDEX\* = 84**

The lower the EnergyPerformance Index, the more efficient the home.

1. New construction or existing	New (From Plans)		9. Wall Types	Insulation	Area
2. Single family or multiple family	Single-family		a. Frame - Wood, Exterior	R=13.0	1152.00 ft <sup>2</sup>
3. Number of units, if multiple family	1		b. N/A	R=	ft <sup>2</sup>
4. Number of Bedrooms	2		c. N/A	R=	ft <sup>2</sup>
5. Is this a worst case?	No		d. N/A	R=	ft <sup>2</sup>
6. Conditioned floor area (ft <sup>2</sup> )	1187		10. Ceiling Types	Insulation	Area
7. Windows**	Description	Area	a. Under Attic (Vented)	R=30.0	1187.00 ft <sup>2</sup>
a. U-Factor:	DbI, U=0.80	122.00 ft <sup>2</sup>	b. N/A	R=	ft <sup>2</sup>
SHGC:	SHGC=0.60		c. N/A	R=	ft <sup>2</sup>
b. U-Factor:	DbI, U=0.55	15.00 ft <sup>2</sup>	11. Ducts		
SHGC:	SHGC=0.60		a. Sup: Attic Ret: Attic AH: Exterior Sup. R= 6,	237.4 ft <sup>2</sup>	
c. U-Factor:	N/A	ft <sup>2</sup>	12. Cooling systems		
SHGC:			a. Central Unit	Cap: 24 kBtu/hr	
d. U-Factor:	N/A	ft <sup>2</sup>		SEER: 14	
SHGC:			13. Heating systems		
e. U-Factor:	N/A	ft <sup>2</sup>	a. Electric Heat Pump	Cap: 24 kBtu/hr	
SHGC:				HSPF: 8.5	
8. Floor Types	Insulation	Area	14. Hot water systems		
a. Raised Floor	R=30.0	1187.00 ft <sup>2</sup>	a. Electric	Cap: 40 gallons	
b. N/A	R=	ft <sup>2</sup>	b. Conservation features	EF: 0.92	
c. N/A	R=	ft <sup>2</sup>	None		
			15. Credits		Pstat

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 Index is only available through the EnergyGauge USA - FlaRes2008 computer program. This is not a Building Energy Rating. If your Index is below 100, your home may qualify for 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 [energygauge.com](http://energygauge.com) 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.

\*\*Label required by Section 13-104.4.5 of the Florida Building Code, Building, or Section B2.1.1 of Appendix G of the Florida Building Code, Residential, if not DEFAULT.

# Florida Code Summary Report

Richard & Rena Scaff  
818 Manatee St  
Fort White, FL 32038-  
Registration #:

Title: Scaff 0101  
FLAsBuilt

TMY City: FL JACKSONVILLE\_  
Elec Util: Florida Average  
Gas Util: Florida Average  
Run Date:

Energy Uses	Baseline Home	As-Built Home	e-Ratio
Heating	3.62 MBtu	2.03 MBtu	0.56
Cooling	9.80 MBtu	8.63 MBtu	0.88
Hot Water	7.64 MBtu	7.64 MBtu	1.00
Total	21.06 MBtu	18.30 MBtu	0.87

Building Loads	Baseline Home	As-Built Home	e-Ratio
Heating	6.75 MBtu	3.79 MBtu*	0.56
Cooling	22.32 MBtu	19.65 MBtu*	0.88
Hot Water	7.01 MBtu	7.01 MBtu*	1.00
Total	36.08 MBtu	30.45 MBtu	0.84

\* normalized modified loads

Glass/Floor Area: 0.115

Total As-Built Modified Loads: 30.45

Total Baseline Loads: 36.08

**PASS**



### Columbia County Property Appraiser

J. Doyle Crews, CFA - Lake City, Florida - 386-758-1083

**PARCEL: 00-00-00-00579-000 - SINGLE FAM (000100)**

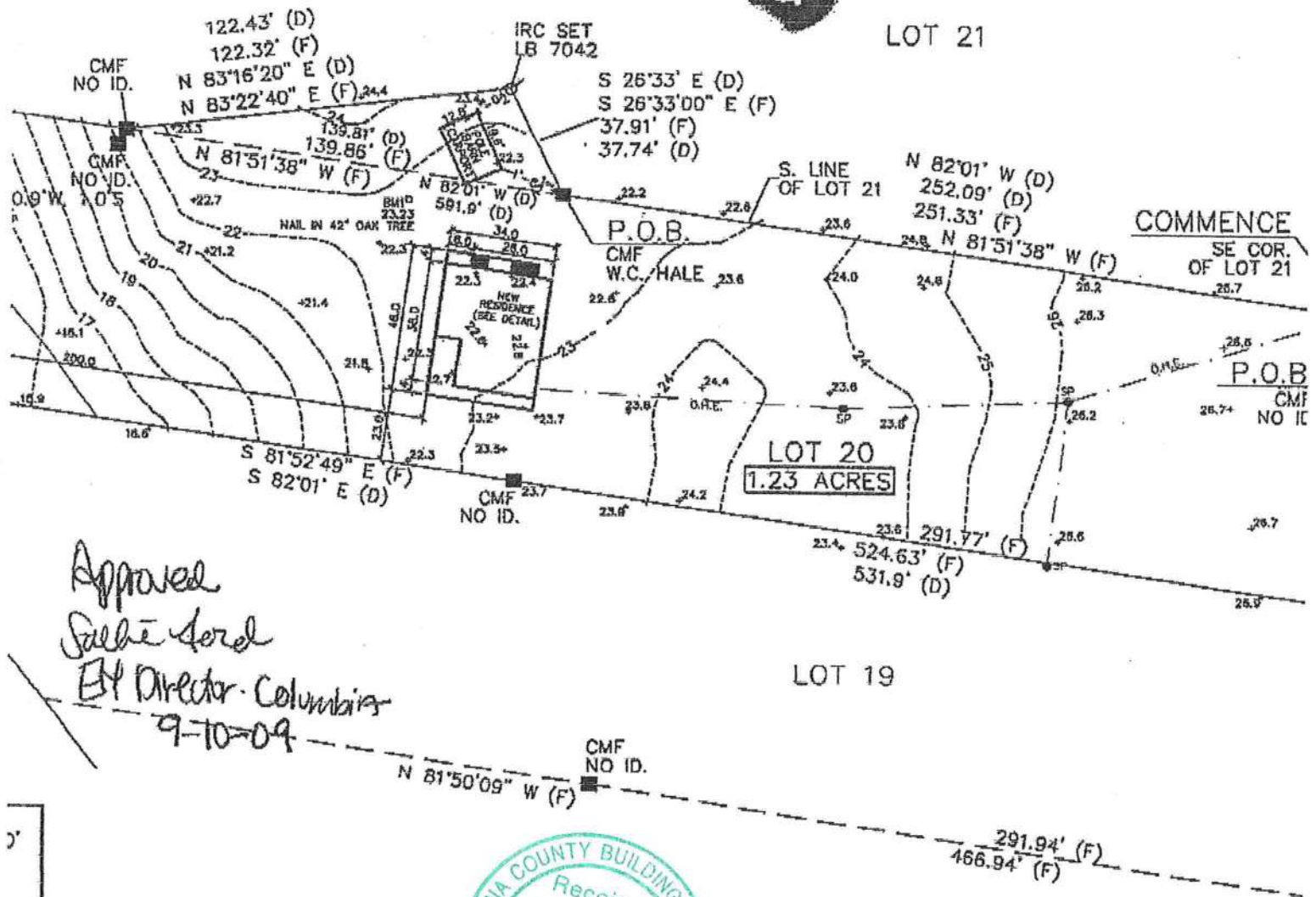
Name:	SCAFF RICHARD H & RENA VEE	LandVal	\$39,600.00
		BldgVal	\$18,490.00
Site:	MANATEE	ApprVal	\$58,480.00
Mail:	P O BOX 1869	JustVal	\$58,480.00
	LAKE CITY, FL 32056	Assd	\$58,480.00
Sales Info		Exmpt	\$0.00
		County:	\$58,480.00   City:
			\$58,480.00
		Other:	\$58,480.00   School:
			\$58,480.00
		Taxable	

0 0.1 0.2 0.3 mi



This information, GIS Map Updated: 10/9/2009, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

OSTAS  
#09-0360-E  
OKED E SM



Approved  
Sally Ford  
City Director - Columbia  
9-10-09



North



EE RIVERS ESTATES, a subdivision of a part  
Township 6 South, Range 15 East, Columbia  
of 20 being more particularly described as;  
northeast corner of Government Lot 3, Section  
Range 16 East Columbia County Florida and



A & B CONSTRUCTION, INC.  
P.O. Box 39  
Fort White, FL, 32038

CERTIFIED MAINTENANCE ENTITY

Owner: Richard Scaff.  
Address: 312 Deanna Terrace, Lake City, FL, 32025  
Subject Property: Lot 208, 3 Rivers Estates, Unit 2  
Property ID#: 00-00-00-00579-000

This maintenance agreement shall be effective as of the \_\_\_\_\_ day of \_\_\_\_\_, 2008, by and between the owner and A&B Construction, Inc, herein after referred to as Maintenance Entity (ME). In consideration for payments provided for herein, the ME shall provide the services of a trained / certified technician. The technician will perform a preventive maintenance inspection of the equipment described herein on the frequency shown below. If all parties do not sign this maintenance inspection agreement within 30 days of above date or if good funds are not received within 30 days of the above date, this maintenance inspection agreement will be considered null and void.

This agreement shall be for one (1) year (included with installation). Following the initial one-year term, this maintenance agreement will be renewable in minimum one (1) year increments, \$300 payable in advance. This and any future maintenance agreements between the owner and the ME shall be valid only if payment has been made in good funds to the ME. The ME is required to obtain an operating permit for the system from the County Health Department. The owner is hereby made responsible for any and all fees with regard to such obtaining permit. Failure by the owner to provide these monies in a timely fashion may result in enforcement action on the owner by Department of Health. The ME will notify the owner approximately 30 days prior to the expiration of the operating permit. In the event the owner fails to maintain said operating permit, this ME shall be forfeited.

Thirty days written notice shall be given to the owner, lessees, and the County Health department in the event that the ME wishes to discontinue provision of the maintenance services. The property owners shall, within 30 days of the date of service termination by the ME (for any reason), contact with an approval maintenance service and provide the County Health Department a copy of a new agreement.

**Reporting and Inspection:**

- Residential inspection shall occur two (2) times per year.
- Each inspection shall be followed by a written report to the owner, upon the owner's written request. The inspection report will describe the operational status of the system. It will also include recommendations for any preventive maintenance deemed necessary by the inspector as well as a list of any

replacement parts needed and a recommendation of who to contact in order to effect such repair.

- Reports shall be provided to the DOH County Health Department as required by code (64E-6.012, FAC).

This agreement does not:

- Assume any responsibilities or obligations that are normally the responsibilities of the owners related to parts or labor.
- Extend to cover any costs that may be associated with any recommendations made under this agreement.
- Provide for the ME to supply parts or labor for repairs or replacement without the owners purchase order.
- Provide for replacement of finite materials, including but not limited to, chlorine or other chemicals, filter media, etc.
- Provide for cleaning of filter or pump out if any tanks.
- Provide for payment of any effluent sampling costs required.

Non-routine maintenance visits may be necessary if the system alarms sound. In the event, the ME shall be notified immediately in order to investigate the alarm. There may be an additional charge for such a visit, not to exceed \$125.00 per visit, based on the nature of the alarm. Owner hereby agrees to pay the charge for this visit within 10 days of the emergency visit. Should this charge not be paid, owner agrees to pay a late fee of \$2.50 per day (at the discretion of the ME) until the ME or their designated representative receives payment in good funds. Failure of owner to make sure that the ME is paid may result in a lien against the property.

The cost for any sampling or testing required will be borne by the owner. ME shall make recommendations as to pump out needs based on observed system function at scheduled inspection visits. ME shall supervise the pump out of sludge from the treatment tank so long as the pump out occurs during a scheduled maintenance visit as set forth herein and takes not more than one hour.

The owner shall provide the ME with reasonable access to wastewater treatment system for the purpose of inspection visits. The owner shall also notify the ME and Engineer of Record if the occupancy changes or if there is any notable difference in use of the facilities serviced by this treatment system.

This maintenance inspection agreement may be assigned in case of sale of the property. This maintenance inspection agreement and the terms herein are specific to this real estate parcel and the equipment named herein.

In no event shall A&B Construction, Inc., (or their agents and workers) be responsible for special or consequential damages, including but not limited to, loss of time, injury to person or property or any other consequential damages or incidental or economic loss due to equipment failure or for any other reason.

## **EQUIPMENT COVERED UNDER THIS AGREEMENT**

**This Maintenance Agreement covers the inspection requirements for the septic system and components located at the above mentioned property.**

**The annual (12 month) cost of the Maintenance Agreement is \$300.00.  
First year waived with installation.**

**The biennial (24 months) Operating Permit (Required by the Department of Health) is \$150.00**

**Please send \$150.00 to the address below.**

---

**Signed / Owner**

---

**Signed A & B Construction**

**PLEASE MAKE CHECKS PAYABLE TO:  
A&B CONSTRUCTION, INC.  
P.O. BOX 39  
FORT WHITE, FLORIDA 32038  
(386)497-2311 OFFICE  
(386)497-4866 FAX**

# A & B CONSTRUCTION, INC.

P.O. Box 39

FORT WHITE, FLORIDA 32038

Phone: (386) 497-2311 • Fax: (386) 497-4866

JOB WORK ORDER

No. 011498

CUSTOMER'S ORDER NO.		PHONE	MECHANIC	HELPER	DATE OF ORDER <u>8-27-09</u>
BILL TO	<u>Richard Scott</u>		ORDER TAKEN BY		STARTING DATE <u>1</u>
ADDRESS			<input type="checkbox"/> DAY WORK <input type="checkbox"/> CONTRACT <input type="checkbox"/> EXTRA		
CITY					
JOB NAME AND LOCATION			JOB PHONE		
DESCRIPTION OF WORK					

0.5 FAST Aerobic System 8200  
operating permit 150.00  
maintenance Agreement 300.00  
Repair Permit 300.00  
existing Tank Permit 150.00  
Ramp out septic 200.00  
Total 9300.00

Re: Review - 818 S.W.  
Granada Ter.

Lot 20, Unit 2, Three  
Rivers Estates -

Pr. 08-31-09  
Ch. No. 159

DATE COMPLETED	WORK ORDERED BY	TOTAL MATERIALS	TOTAL LABOR	TAX	TOTAL AMOUNT
<u>1</u>					

☐ No one home  
☐ Total amount due for above work, or  
☐ Total billing to be mailed after completion of work

Signature \_\_\_\_\_  
 I hereby acknowledge the satisfactory completion of the above described work





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

PERMIT NO. 934471  
DATE PAID: 8/31/09  
FEE PAID: 110.00  
RECEIPT #: 1172356

APPLICATION FOR

[ ] New System [X] Existing System [ ] Holding Tank [ ] Innovative  
[ ] Repair [ ] Abandonment [ ] Temporary [ ]

APPLICANT:

Richard Scalf

AGENT: ROCKY FORD, A & B CONSTRUCTION

TELEPHONE: 386-497-2311

MAILING ADDRESS: P.O. BOX 39 FT. WHITE, FL, 32038

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: 20 BLOCK: NA SUB: Three Rivers Est. PLATTED: 56

PROPERTY ID #: 00-00-00-00579-000 ZONING: \_\_\_\_\_ I/M OR EQUIVALENT: [ Y / N ]

PROPERTY SIZE: 1.23 ACRES WATER SUPPLY: [X] PRIVATE PUBLIC [ ] <=2000GPD [ ] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [ Y / (N) ] DISTANCE TO SEWER: \_\_\_\_\_ FT

PROPERTY ADDRESS: SW Manatee Terr

DIRECTIONS TO PROPERTY: 47 South TR on Wilson Springs Road  
TR on Newark TR on Bridge TR on Manatee Terr  
Lot on left Past Ohio Ave

BUILDING INFORMATION

[ ] RESIDENTIAL [ ] COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC
1	<u>2</u>	<u>2</u>	<u>1187</u>	
2				
3				

[ ] Floor/Equipment Drains [ ] Other (Specify) \_\_\_\_\_

SIGNATURE:

Rocky D Ford

DATE: 8/27/2009

RECEIVED  
8/28/09



## COLUMBIA COUNTY BUILDING DEPARTMENT RESIDENTIAL CHECK LIST REQUIREMENTS

### MINIMUM PLAN REQUIREMENTS FOR THE FLORIDA BUILDING CODE RESIDENTIAL 2007 ONE (1) AND TWO (2) FAMILY DWELLINGS

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

**ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current 2007 FLORIDA BUILDING CODES RESIDENTIAL. 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**

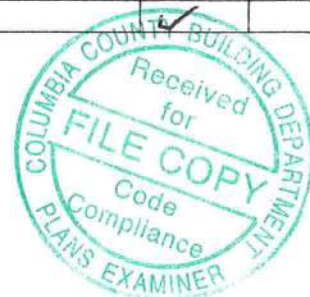
Items to Include-  
Each Box shall be  
Circled as  
Applicable

		Yes	No	N/A
1	Two (2) complete sets of plans containing the following:	✓		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void	✓		
3	Condition space (Sq. Ft.)			
	Total (Sq. Ft.) under roof			

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	✓		
5	Dimensions of all building set backs	✓		
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.	✓		
7	Provide a full legal description of property.	✓		



Office Copy

## 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	IIIII	IIIII	IIIII
		YES	NO	N/A
9	Basic wind speed (3-second gust), miles per hour	✓		
10	(Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated)	✓		
11	Wind importance factor and nature of occupancy	✓		
12	The applicable internal pressure coefficient, Components and Cladding	✓		
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.	✓		

## Elevations Drawing including:

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

## Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	✓		
21	Raised floor surfaces located more than 30 inches above the floor or grade	✓		
22	All exterior and interior shear walls indicated	✓		
23	Shear wall opening shown (Windows, Doors and Garage doors)	✓		
24	Emergency escape and rescue opening shown in each bedroom (net clear opening shown)	✓		
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)	✓		
27	Stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails (see FBCR SECTION 311)	✓		
28	Identify accessibility of bathroom (see FBCR SECTION 322)	✓		

**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 plan (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"><b>Items to Include-</b>  <b>Each Box shall be</b>  <b>Circled as</b>  <b>Applicable</b></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.	✓		
30	All posts and/or column footing including size and reinforcing	✓		✓
31	Any special support required by soil analysis such as piling.		✓	
32	Assumed load-bearing value of soil _____ Pound Per Square Foot		✓	
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type)	✓		

### **FBCR 506: CONCRETE SLAB ON GRADE**

34	Show Vapor retarder (6mil. Polyethylene with joints lapped 6 inches and sealed)			✓
35	Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports			✓

### **FBCR 320: PROTECTION AGAINST TERMITES**

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or submit other approved termite protection methods. Protection shall be provided by registered termiticides			✓
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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	✓		
38	Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement			✓

**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	✓		
40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers	✓		
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers			✓
42	Attachment of joist to girder			✓
43	Wind load requirements where applicable			✓
44	Show required under-floor crawl space			✓
45	Show required amount of ventilation opening for under-floor spaces			✓
46	Show required covering of ventilation opening			✓
47	Show the required access opening to access to under-floor spaces			✓
	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges &			✓



48	intermediate of the areas structural panel sheathing			✓
49	Show Draftstopping, Fire caulking and Fire blocking			✓
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309			✓
51	Provide live and dead load rating of floor framing systems (psf).		✓	

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

<b>GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</b>		<b>Items to Include- Each Box shall be Circled as Applicable</b>		
		YES	NO	N/A
52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	✓		
53	Fastener schedule for structural members per table FBCR 602.3 are to be shown	✓		
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	✓		
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		✓	
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)	✓		
57	Indicate where pressure treated wood will be placed	✓		
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	✓		
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	✓		

## **FBCR :ROOF SYSTEMS:**

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

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

65	Rafter and ridge beams sizes, span, species and spacing	✓		
66	Connectors to wall assemblies' include assemblies' resistance to uplift rating	✓		
67	Valley framing and support details			✓
68	Provide dead load rating of rafter system		✓	

## **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	✓		
70	Show fastener Size and schedule for structural panel sheathing on the edges & intermediate areas	✓		

## **FBCR ROOF ASSEMBLIES FRC Chapter 9**

71	Include all materials which will make up the roof assemblies covering			
72	Submit Florida Product Approval numbers for each component of the roof assemblies covering			

## **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, showing dimensions condition area equal to the total condition living space area*

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	✓		
74	Attic space	✓		
75	Exterior wall cavity	✓		
76	Crawl space	✓		

## **HVAC information**

77	Submit two copies of a Manual J sizing equipment or equivalent computation study	✓		
78	Exhaust fans locations in bathrooms	✓		
79	Show clothes dryer route and total run of exhaust duct	✓		

## **Plumbing Fixture layout shown**

80	All fixtures waste water lines shall be shown on the foundation plan	✓		
81	Show the location of water heater	✓		

## **Private Potable Water**

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

## **Electrical layout shown including**

85	Switches, outlets/receptacles, lighting and all required GFCI outlets identified	✓		
86	Ceiling fans	✓		
87	Smoke detectors & Carbon dioxide detectors	✓		
88	Service panel, sub-panel, location(s) and total ampere ratings	✓		
89	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.	✓		

90	Appliances and HVAC equipment and disconnects	✓		
91	Arc Fault Circuits (AFCI) in bedrooms + other Rooms	✓		

**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.

<b>GENERAL REQUIREMENTS:</b> <b>APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL</b>		<b>Items to Include-</b> <b>Each Box shall be</b> <b>Circled as</b> <b>Applicable</b>
---	--	--

### 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	✓		
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	✓		
94	<b>Environmental Health Permit or Sewer Tap Approval</b> A copy of a approved Columbia County Environmental Health (386) 758-1058			0
95	<b>City of Lake City</b> A permit showing an approved waste water sewer tap			N/A
96	<b>Toilet facilities shall be provided for all construction sites</b>	✓		
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.			N/A
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 \$50.00			
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 (\$25.00) must be made. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$50.00). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.	Existing		
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 <b>received</b> 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.**



## PRODUCT APPROVAL SPECIFICATION SHEET

**Location:** \_\_\_\_\_

**Project Name:** \_\_\_\_\_

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 for 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(s)
<b>A. EXTERIOR DOORS</b>			
1. Swinging ✓	Therma-Tru	STEEL DOOR 26 GA.	FL 8838.2
2. Sliding			
3. Sectional			
4. Roll up			
5. Automatic			
6. Other			
<b>B. WINDOWS</b>		Exterior	HVHZ
1. Single hung			
2. Horizontal Slider			
3. Casement			
4. Double Hung			
5. Fixed			
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11 Dual Action			
12. Other			
<b>C. PANEL WALL</b>			
1. Siding			
2. Soffits			
3. EIFS			
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
<b>D. ROOFING PRODUCTS</b>			
1. Asphalt Shingles			
2. Underlayments			
3. Roofing Fasteners			
4. Non-structural Metal Rf			
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			

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys			
14. Cements-Adhesives – Coatings			
15. Roof Tile Adhesive			
16. Spray Applied Polyurethane Roof			
17. Other <i>Metal Roof</i>			<i>F17809.2 RI</i>
<b>E. SHUTTERS</b>			
1. Accordion			
2. Bahama			
3. Storm Panels			
4. Colonial			
5. Roll-up			
6. Equipment			
7. Others			
<b>F. SKYLIGHTS</b>			
1. Skylight			
2. Other			
<b>G. STRUCTURAL COMPONENTS</b>			
1. Wood connector/anchor			
2. Truss plates			
3. Engineered lumber			
4. Railing			
5. Coolers-freezers			
6. Concrete Admixtures			
7. Material			
8. Insulation Forms			
9. Plastics			
10. Deck-Roof			
11. Wall			
12. Sheds			
13. Other			
<b>H. NEW EXTERIOR ENVELOPE PRODUCTS</b>			
1.			
2.			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

I understand these products may have to be removed if approval cannot be demonstrated during inspection

*Joseph E. Williams*  
Contractor or Contractor's Authorized Agent Signature

*JOSEPH E. WILLIAMS 10-28*  
Print Name Date

# Columbia County Property Appraiser

DB Last Updated: 10/9/2009

## 2009 Preliminary Values

Tax Record

Property Card

Interactive GIS Map

Print

Parcel: 00-00-00-00579-000

&lt;&lt; Prev

Search Result: 2 of 2

### Owner & Property Info

Owner's Name	SCAFF RICHARD H & RENA VEE		
Site Address	MANATEE		
Mailing Address	P O BOX 1869 LAKE CITY, FL 32056		
Use Desc. (code)	SINGLE FAM (000100)		
Neighborhood	100000.02	Tax District	3
UD Codes	MKTA02	Market Area	02
Total Land Area	0.000 ACRES		
Description	LOT 20 & COMM SE COR LOT 21, RUN W 252.09 FT FOR POB, CONT W 139.81 FT, NE 122.43 FT, SE 37.74 FT TO POB. (UNIT 2 THREE RIVERS ESTATES) ORB 366-419, 659-010, (DC WILEY M HAMMOND 1171-560),		

### GIS Aerial



### Property & Assessment Values

Mkt Land Value	cnt: (1)	\$39,600.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (1)	\$18,490.00
XFOB Value	cnt: (1)	\$390.00
Total Appraised Value		\$58,480.00

Just Value	\$58,480.00
Class Value	\$0.00
Assessed Value	\$58,480.00
Exemptions	\$0.00
Total Taxable Value	County: \$58,480.00   City: \$58,480.00 Other: \$58,480.00   School: \$58,480.00

### Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
3/27/2009	1170/458	WD	I	Q	01	\$135,000.00

### Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
1	SINGLE FAM (000100)	1973	Wall Board (02)	822	1746	\$18,490.00
Note: All S.F. calculations are based on exterior building dimensions.						

### Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
0070	CARPORT UF	1993	\$390.00	0000260.000	13 x 20 x 0	(000.00)

### Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000132	SFR RIVER (MKT)	0000090.000 FF - (0000000.000AC)	1.00/1.00/1.10/1.00	\$440.00	\$39,600.00

Columbia County Property Appraiser

DB Last Updated: 10/9/2009

[<< Prev](#)

2 of 2

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### Disclaimer

This information was derived from data which was compiled by the Columbia County Property Appraiser's Office solely for the government purpose of property assessment. The information shown is a **work in progress** and should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's Office. The assessed values are **NOT CERTIFIED** values and therefore are subject to change before finalized for ad-valorem assessment purposes.

**Notice:**

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7543.3	Non-Impact Horizontal Steel Mullion	253273 Classic Series
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> No <b>Design Pressure:</b> N/A <b>Other:</b> For max. D.P. please refer to installation drawings set MWM015. Max. Window size to be: 48" x 42". Maximum transom size to be 96" x 41". Mullions to be used with pre-qualified approved classic series vinyl products.		<b>Installation Instructions</b> <a href="#">FL7543_R1_II_MWM015 Classic Horizontal Mullion Non Impact.pdf</a> Verified By: Jyrki T. J. Pulkkinen FL PE# 52914 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL7543_R1_AE_PER 413 P-0808-12 MW.pdf</a> <a href="#">FL7543_R1_AE_PER 414 P-0808-12 MW.pdf</a> Created by Independent Third Party: Yes



# MW MANUFACTURERS, INC

## CLASSIC HORIZONTAL MULLION

### NON IMPACT

GENERAL NOTES:  
 1) THE PRODUCT SHOWN HEREIN IS DESIGNED AND MANUFACTURED TO COMPLY WITH THE 2007 FLORIDA BUILDING CODE, SECTION 1714.5.

2) MULLION INSTALLATION DETAILS APPLY TO DUAL 23373 HP MULL STEEL REINFORCEMENTS WITH EXTRUDED VINYL MULL STRIP WHEN USED TO MULL WINDOWS SIDE BY SIDE.

3) APPROVED IMPACT PROTECTIVE SYSTEM IS REQUIRED ON THIS PRODUCT IN AREAS REQUIRING IMPACT RESISTANCE.

4) USE 3/16" ELCO TAPCON ANCHOR OF SUFFICIENT LENGTH TO ACHIEVE MINIMUM EMBEDMENT OF 1 1/4" INTO MASONRY OR CONCRETE. 3/16" ELCO TAPCON MUST HAVE A 1/2" MINIMUM EDGE DISTANCE FROM EDGE OF MASONRY OR CONCRETE. (SEE CHARTS & NOTES ON SHEET 3 FOR DESIGN PRESSURE AND ANCHOR NOTES).

5) USE #8 WOOD SCREWS OF SUFFICIENT LENGTH TO ACHIEVE MINIMUM EMBEDMENT OF 1 1/2" INTO WOOD FRAMING. (SEE CHARTS & NOTES ON SHEET 5 FOR DESIGN PRESSURE AND ANCHOR NOTES).


6) USE #8 TEK SCREWS OF SUFFICIENT LENGTH TO ACHIEVE A MINIMUM EMBEDMENT OF 3 THREADS PAST THE ANCHOR MATERIAL. (SEE CHARTS & NOTES ON SHEET 5 FOR DESIGN PRESSURE AND ANCHOR NOTES).

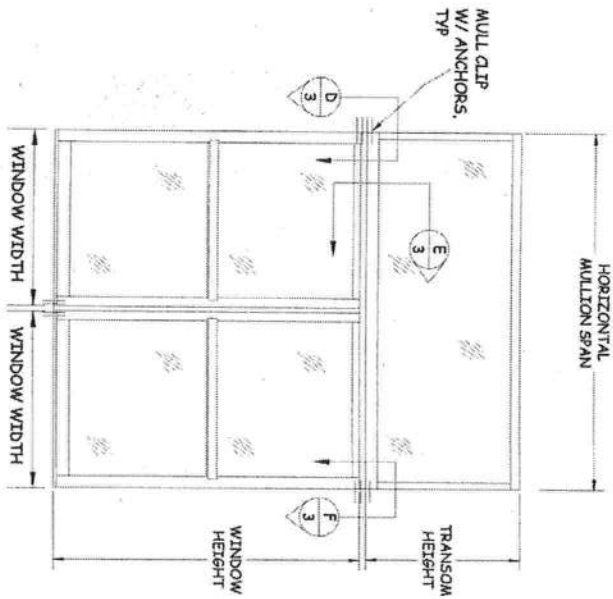
7) MASONRY 1X2 & 2X4 WOOD BUCKS TO BE DESIGNED AND ANCHORED TO PROPERLY TRANSFER ALL LOADS TO STRUCTURE AND IS THE RESPONSIBILITY OF THE ARCHITECT OR ENGINEER OF RECORD.

8) THIS MULLION IS ONLY VALID WHEN USED IN CONJUNCTION WITH APPLICABLE MW PRODUCTS.

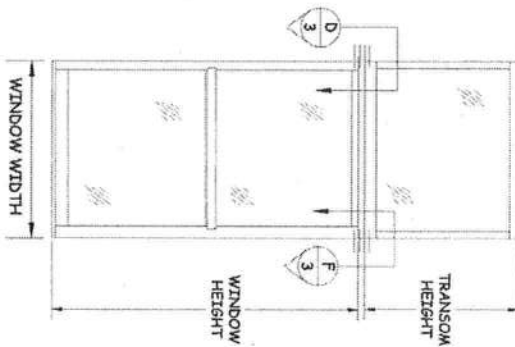
9) ALL WINDOWS USED WITH THIS MULLION SHALL BE QUALIFIED UNDER SEPARATE APPROVAL.

TABLE OF CONTENTS		
SHEET	REVISION	SHEET DESCRIPTION
1	-	GENERAL NOTES
2	-	ELEVATION
3	-	VERTICAL & HORIZONTAL SECTIONS
4	-	DETAILS
5	-	CHARTS & NOTES



 <b>MW Manufacturers, Inc</b> 433 NORTH MAIN ST. ROCKY MOUNT, VA 24151 PH: 800.599.8400 - FX: 540.454.6683		<b>TITLE:</b> CLASSIC MULLION <b>GENERAL NOTES</b>		<b>PREPARED FOR:</b> MW MANUFACTURERS Inc 433 NORTH MAIN ST ROCKY MOUNT, VA 24151 PH: 800.599.8400 FX: 540.454.6683																					
<b>REVISIONS</b> <table border="1"> <thead> <tr> <th>NO.</th> <th>DESCRIPTION</th> <th>BY</th> <th>DATE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>						NO.	DESCRIPTION	BY	DATE																
NO.	DESCRIPTION	BY	DATE																						
DATE: 10.29.08 DWN BY: GRN CHK BY: HN SCALE: NTS		DWG #: <b>MW/MO15</b> SHEET: 1 OF 5																							





HORIZONTAL MULLION  
FOR TWIN WINDOW WITH TRANSOM  
SEE CHARTS ON PAGE 5 FOR DESIGN  
PRESSURE AND ANCHOR SCHEDULE

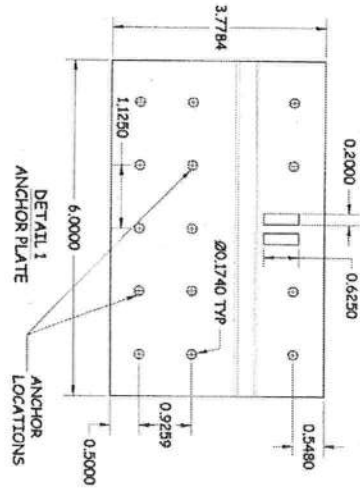


HORIZONTAL MULLION  
FOR SINGLE WINDOW WITH TRANSOM  
SEE CHART ON PAGES 5 FOR DESIGN  
PRESSURE AND ANCHOR SCHEDULE

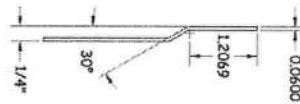
DWG #: <b>MW/M015</b> SHEET: <b>2 OF 5</b>	DATE: 10.29.08 DWN BY: GRN CHK BY: HN SCALE: NTS	 T. J. PACKER PROJECT MGR 2477 MEDICAL PARKWAY TALLAHASSEE, FL 32309	<b>REVISIONS</b> <table border="1"> <thead> <tr> <th>NO.</th> <th>DESCRIPTION</th> <th>BY</th> <th>DATE</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	NO.	DESCRIPTION	BY	DATE																	TITLE: <b>CLASSIC MULLION</b> ELEVATION: PREPARED FOR: <b>MW MANUFACTURERS Inc</b> 433 NORTH MAIN ST ROCKY MOUNT, VA 24151 PH: 800.999.8400 FX: 540.484.6683	 <b>MW MANUFACTURERS, Inc</b> 433 North Main St. Rocky Mount, VA 24151 PH: 800.999.8400 FX: 540.484.6683
	NO.	DESCRIPTION	BY	DATE																					

DWG #: <b>MWM015</b>  SHEET: 3 OF 5	DATE: 10.29.08		<b>REVISIONS</b>				TITLE: CLASSIC MULLION VERTICAL & HORIZONTAL SECTIONS	 MWM MANUFACTURERS & EXPOSERS MWM Manufacturers, Inc 433 North Main St. Rocky Mount, VA 24151 PH: 800.399.9400 • FX: 540.484.6683
	DWN BY: GRN		CHK BY: HN	SCALE: NTS	NO.	DESCRIPTION	BY	

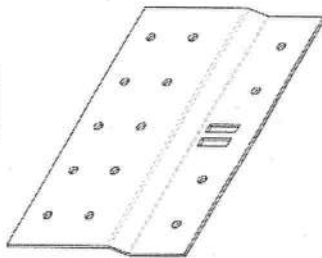




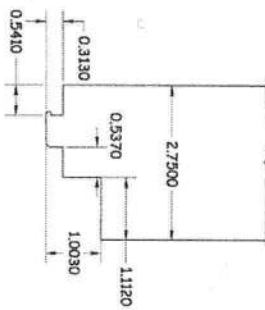
DETAIL 2  
SECTION VIEW OF ANCHOR PLATE



DETAIL 3  
ISOMETRIC VIEW OF ANCHOR PLATE



DETAIL 4  
MULLION END



## REVISIONS

NO.	DESCRIPTION	BY	DATE

TITLE:  
CLASSIC MULLION  
DETAILS

PREPARED FOR:  
MW MANUFACTURERS Inc  
433 NORTH MOUNT ST  
ROCKY MOUNT, VA 24151  
PH: 800.99.8400 FX: 540.484.6683

MW MANUFACTURERS, Inc  
433 North Mount St  
Rocky Mount, VA 24151  
PH: 800.99.8400 FX: 540.484.6683



DWG #: MW/MO15  
DATE: 10.29.08  
DWN BY: GRN  
CHK BY: HN  
SCALE: NTS  
SHEET: 4 OF 5

*Handwritten signature and date: 11/1/08*  
APPROVED BY: [Signature]  
DATE: 11/1/08  
MW MANUFACTURERS, Inc  
433 North Mount St  
Rocky Mount, VA 24151  
PH: 800.99.8400 FX: 540.484.6683

# DESIGN PRESSURE CHARTS

## Maximum design pressure capacity chart (psf) Classic Horizontal mullion, twin with transom

Design pressures are limited either by mullion or anchor screw or anchor clip capacity.

Height (ft)	Unit width (ft)															
	Window	Transom	18.0	24.0	30.0	36.0	42.0	48.0	54.0	60.0	66.0	72.0	78.0	84.0	90.0	96.0
17.0	8.5	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	60.7	53.3
24.0	12.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
30.0	15.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
36.0	18.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
42.0	21.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
48.0	24.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
54.0	27.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
60.0	30.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
66.0	33.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
72.0	36.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
78.0	39.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3
82.0	41.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	66.7	49.7	43.3

NOTES FOR TWIN WINDOW W/ TRANSOM AND DUAL 2027T HP MULL STEEL.  
DESIGN PRESSURES WITH ANCHOR CLIP.

- 1) THE DESIGN PRESSURES IN THIS CHART ARE FOR THE MULLIONS LISTED ABOVE WHEN USED WITH THE CLIP LISTED ABOVE.
- 2) FOR VERTICAL MULL CLIPS IN WOOD FRAMING INSTALLATION USE (1) THREE #8 WOOD SCREWS AT EACH ANCHOR CLIP WITH SUFFICIENT LENGTH TO ACHIEVE A 1 1/2" MINIMUM EMBEDMENT INTO FRAMING. SEE SHEET 3 FOR DETAILS.
- 3) FOR VERTICAL MULL CLIPS IN MASONRY INSTALLATION USE (1) THREE #4 WOOD SCREWS AT EACH ANCHOR CLIP WITH SUFFICIENT LENGTH TO ACHIEVE A 1 1/2" MINIMUM EMBEDMENT INTO SUBSTRATE. SEE SHEET 3 FOR DETAILS.
- 4) FOR VERTICAL MULL CLIPS IN ALUMINUM INSTALLATION USE (1) THREE #8 TEK SCREWS, GRADE 5, AT EACH ANCHOR CLIP WITH SUFFICIENT LENGTH TO ACHIEVE AN EMBEDMENT OF 3 THREADS PAST SUBSTRATE.
- 5) CHART APPLIES ONLY TO DUAL 2027T HP STEEL REINFORCEMENT MULLIONS AS SPECIFIED ABOVE WHEN USED TO MULL WINDOWS ABOVE EACH OTHER.
- 6) BEAD WINDOW WIDTH AND MULL SPAN IN INCHES. DESIGN PRESSURE VALUES ON THIS CHART ARE POSITIVE AND NEGATIVE PSF.
- 7) DESIGN PRESSURE VALUES APPLY TO MULLION WHERE TWO OR MORE WINDOWS ARE LISTED IN A SINGLE OPENING.
- 8) REFER TO REPORT #411 FOR MORE MULLION SPECIFICATIONS.

## Maximum design pressure capacity chart Classic Horizontal mullion, single with transom (hook and anchor plate)

Design pressures are limited either by mullion or anchor screw or anchor clip capacity.

Height (ft)	Unit width (ft)															
	Window	Transom	18.0	24.0	30.0	36.0	42.0	48.0	54.0	60.0	66.0	72.0	78.0	84.0	90.0	96.0
17.0	8.5	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
24.0	12.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
30.0	15.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
36.0	18.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
42.0	21.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
48.0	24.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
54.0	27.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
60.0	30.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
66.0	33.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
72.0	36.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
78.0	39.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0
82.0	41.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0	75.0

NOTES FOR SINGLE WINDOW W/ TRANSOM AND DUAL 2027T HP MULL STEEL REINFORCEMENTS WITH ANCHOR CLIP.

- 1) THE DESIGN PRESSURES IN THIS CHART ARE FOR THE MULLIONS LISTED ABOVE WHEN USED WITH THE CLIP LISTED ABOVE.
- 2) FOR VERTICAL MULL CLIPS IN WOOD FRAMING INSTALLATION USE (1) THREE #8 WOOD SCREWS AT EACH ANCHOR CLIP WITH SUFFICIENT LENGTH TO ACHIEVE A 1 1/2" MINIMUM EMBEDMENT INTO FRAMING. SEE SHEET 3 FOR DETAILS.
- 3) FOR VERTICAL MULL CLIPS IN MASONRY INSTALLATION USE (1) THREE #4 WOOD SCREWS AT EACH ANCHOR CLIP WITH SUFFICIENT LENGTH TO ACHIEVE A 1 1/2" MINIMUM EMBEDMENT INTO SUBSTRATE. SEE SHEET 3 FOR DETAILS.
- 4) FOR VERTICAL MULL CLIPS IN ALUMINUM INSTALLATION USE (1) THREE #8 TEK SCREWS, GRADE 5, AT EACH ANCHOR CLIP WITH SUFFICIENT LENGTH TO ACHIEVE AN EMBEDMENT OF 3 THREADS PAST SUBSTRATE.
- 5) CHART APPLIES ONLY TO DUAL 2027T HP STEEL REINFORCEMENT MULLIONS AS SPECIFIED ABOVE WHEN USED TO MULL WINDOWS ABOVE EACH OTHER.
- 6) BEAD WINDOW WIDTH AND MULL SPAN IN INCHES. DESIGN PRESSURE VALUES ON THIS CHART ARE POSITIVE AND NEGATIVE PSF.
- 7) DESIGN PRESSURE VALUES APPLY TO MULLION WHERE TWO OR MORE WINDOWS ARE LISTED IN A SINGLE OPENING.
- 8) REFER TO REPORT #411 FOR MORE MULLION SPECIFICATIONS.



MW Manufacturers, Inc.  
433 North Main St.  
Rocky Mount, VA 24151  
PH 800.999.8400 - FX 540.484.6683

TITLE:  
CLASSIC MULLION

CHARTS & NOTES

PREPARED FOR:  
MW MANUFACTURERS Inc  
433 NORTH MAIN ST  
ROCKY MOUNT, VA 24151  
PH 800.999.8400 FX 540.484.6683

## REVISIONS

NO.	DESCRIPTION	BY	DATE

DATE: 10.29.08  
DWN BY: GRN  
CHK BY: HN  
SCALE: NTS

DWG #: MWMO15  
SHEET: 5 OF 5

11933.3	MW Classic/5000 Stationary Window	Vinyl Direct Set Fixed Window (Size: 6-0 x 6-0)
<b>Limits of Use</b> <b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> No <b>Design Pressure:</b> +60/-60 <b>Other:</b> Frame: 72" x 72" (6-0 x 6-0), DLO: 5-6 x 5-6", IGU: 3/4" Overall, Individual glass thickness meets ASTM E1300 requirements		<b>Installation Instructions</b> <a href="#">FL11933_R0_II_FL11933_MWM020_Casement.pdf</a> Verified By: Kristina S. Daugherty 68455 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL11933_R0_AE_PER 615.pdf</a> Created by Independent Third Party: Yes

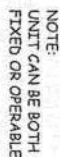
1. THIS PRODUCT SHOWN HEREIN DESIGNED AND MANUFACTURED TO COMPLY WITH THE CURRENT FLORIDA BUILDING CODE (FBC) EXCLUDING HMV2, AND HAS BEEN EVALUATED IN ACCORDANCE WITH THE FOLLOWING:

2. ANALOGY OF THE EXISTING STRUCTURAL CONCEPTS CATEGORY 2X AND CATEGORY 3X SHALL BE PROVIDED FOR THE DESIGN OF THE EXISTING FOUNDATION TO BE THE RESPONSIBILITY OF THE ENGINEER OR ARCHITECT FOR RECORD FOR THE PROJECT OF RESTORATION.
3. EXISTING PIERCE SHALL BE DESIGNED AND ADAPTED TO THE DESIGN AND INSTALLATION IS THE RESPONSIBILITY OF THE ENGINEER OR ARCHITECT FOR RECORD FOR THE PROJECT OF RESTORATION.
4. THE INSTALLATION DETAILS DESCRIBED HEREIN ARE GENERAL AND MAY NOT BE APPLICABLE TO ALL SITUATIONS. THE ENGINEER OR ARCHITECT SHALL PROVIDE A DETAILED DESIGN OF THE FOUNDATION AND ARCHITECT SHALL PREPARE THE SPECIFIC DOCUMENTS FOR USE WITH THE DOCUMENT.
5. APPROVED MEANS INCLUDING PROTECTIVE MEASURES TO PROTECT THIS PRODUCT IN MEANS INCLUDING AVOIDING DAMAGE.
6. DESIGNATIONS "X," AND "Y" STAND FOR THE FOLLOWING:
  - a. CRITICAL PANEL
  - b. FIBERGLASS
7. WINDOW FRAME MATERIAL, PNC
8. GLASS MEETS THE REQUIREMENTS OF ASTM E1300 GLASS CURTAINS, SEE SHEET 77 FOR GLAZING DETAILS.

1. ONE (1) INSTALLATION ANCHOR IS REQUIRED AT EACH ANCHOR LOCATION SHOWN, UNLESS OTHERWISE STATED.

2. THE NUMBER OF INSTALLATION ANCHORS DEPENDS ON THE MINIMUM NUMBER OF ANCHORS TO BE USED FOR PRODUCT INSTALLATION.
3. INSTALLATION ANCHORS SHALL BE INSTALLED WITHIN 12" OF THE DISTAL LOCATION OF THE ANCHOR ANCHOR DETAIL (I.E., WITHOUT CONSIDERATION OF TOLERANCES). TOLERANCES ARE NOT DEDUCTIVE FROM THE INSTALLATION ANCHORS TO THE NEXT.
4. INSTALLATION ANCHORS AND ASSOCIATED HARDWARE MUST BE MADE OF CORROSION RESISTANT MATERIAL OR HAVE A CORROSION RESISTANT COATING.
5. FOR INSTALLATION THROUGH 32 BLOCK, USE 1/4" WOOD SCREWS OF SUFFICIENT LENGTH TO ACHIEVE 1 1/2" MINIMUM EMBEDMENT INTO WOOD SUBSTRATE.
6. FOR INSTALLATION THROUGH 32 BLOCK, USE 1/4" WOODING NAIL OF SUFFICIENT LENGTH TO ACHIEVE 1 1/2" MINIMUM EMBEDMENT INTO WOOD SUBSTRATE. NAIL HEADS MUST BE AT LEAST 3/8" INCH.
7. MINIMUM EMBEDMENT AND EDGE DISTANCE EXCLUDE WALL FINISHES, INCLUDING BUT NOT LIMITED TO STUCCO, FOAM, BRICK VENEER, AND SIDING.
8. FOR HOLLOW BLOCK AND CEMENT FILLED BLOCK, DO NOT INSTALL ANCHOR WITHIN 12" OF THE DISTAL END OF BLOCK OR EDGE OF MORTAR JOINT OR FACE SILL OF BLOCK.
9. INSTALLATION ANCHORS SHALL BE INSTALLED IN THE MINIMUM STRENGTH SPECIFIED BY THE ANCHOR BRAND FACTOR.
10. INSTALLATION ANCHOR CAPACITIES FOR PRODUCTS HEREIN ARE BASED ON SUBSTRATE MATERIALS WITH THE FOLLOWING PROPERTIES:
  - A. WOOD: MINIMUM SPECIFIC GRAVITY OF .65.
  - B. CONCRETE: MINIMUM COMPRESSIVE STRENGTH OF 2000 PSI.
  - C. MASONRY: STRENGTH COMPARABLE TO MCM-C 80 GRADE II, TYPE 3.
  - D. STEEL: MINIMUM YIELD STRENGTH OF 33 KSI. MINIMUM WALL THICKNESS OF 3/16 IN.

**INW WINDOWS & DOORS**  
CLASSIC CASEMENT WINDOW,  
CASEMENT FIXED WINDOW



**TYPICAL ELEVATION WITH  
FASTENER SPACING  
CASEMENT**

MAXIMUM SIZES	
WINDOW TYPE	MAX 'W'      MAX 'H'
CASEMENT OPERATING WINDOW	39.50"      71.50"
CASEMENT FIXED WINDOW	71.50"      71.50"

REVISIONS			
NO.	DESCRIPTION	BY	DATE
1	REMOVED AWNING ELEVATION	JLR	02.05.09

TITLE:	CLASSIC CASEMENT
INSTALLATION & GENERAL NOTES	ELEVATION & ANCHOR LAYOUT
PREPARED FOR:	PLY GEM WINDOW GROUP PRODUCT ENGINEERING ROCKY MOUNT, VA 24151
PH: 540.484.6558	FX: 540.484.6668

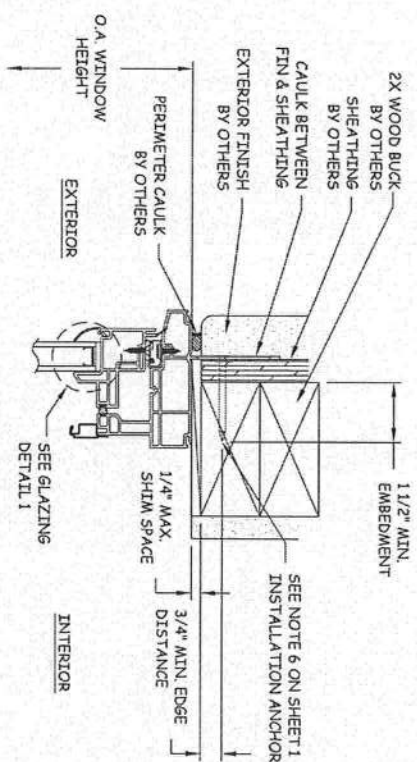
PH: 800.999.8400 • FX: 540.4184.6663

**MW Manufacturers, Inc.**  
433 North Main St.

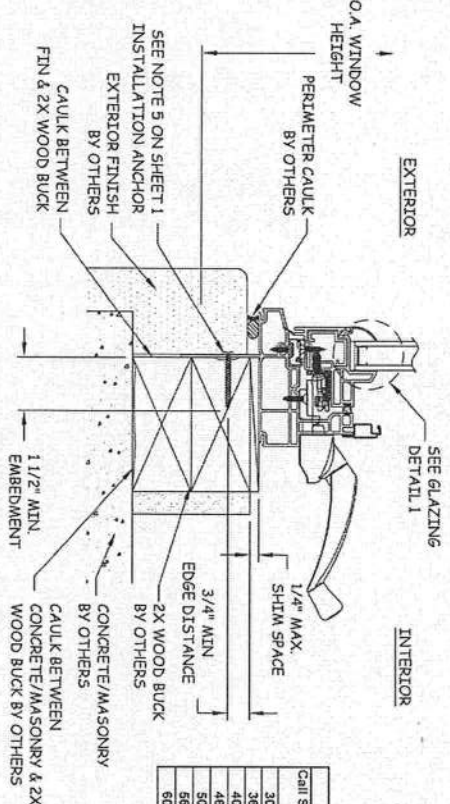


DWG #: <b>MWM020</b> SHEET: <b>1 OF 3</b>	DATE: 12.24.08
	DWN BY: JLR
	CHK BY: KSD
	SCALE: NTS

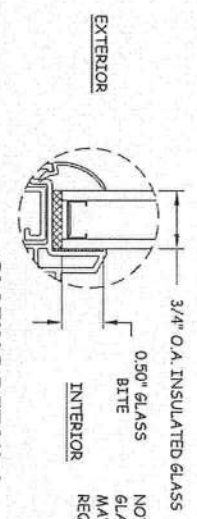




**A** OPERATING SECTION  
2X WOOD FRAME - HEAD  
FIN INSTALLATION



**B** OPERATING SECTION  
2X WOOD BUCK - SILL  
FIN INSTALLATION




**GLAZING DETAIL 1**

**Casement Operating Window  
Non-Impact DP Ratings**

Call Size	16	18	20	24	28	30
Unit Dim	17.500	19.500	23.500	27.500	31.500	35.500
30	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
36	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
38	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
40	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
46	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
50	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
56	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60

**Casement Fixed Window  
Non-Impact DP Ratings**

Call Size	10	12	14	16	18	20	24	28	30	36	40	46	50	56	60
Unit Dim	11.5	13.5	15.5	17.5	19.5	23.5	27.5	31.5	35.5	47.5	59.5	71.5	83.5	95.5	107.5
30	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70
36	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70
40	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70	+60/-70
46	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
50	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
56	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60
60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60	+60/-60



**MW**  
WINDOWS & DOORS  
MW Manufacturers, Inc.  
433 North Main St.  
Rocky Mount, VA 24151  
PH: 800.999.6400 FX: 540.484.6588

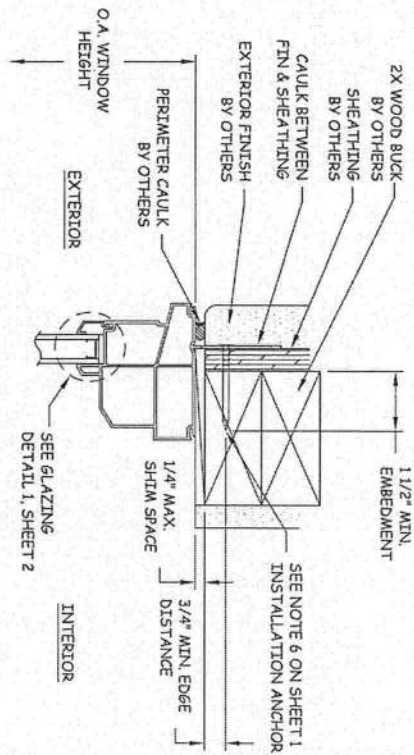
**TITLE:**  
CLASSIC CASEMENT  
OPERATING WINDOW DETAILS

**PREPARED FOR:**  
PLY GEM WINDOW GROUP  
PRODUCT ENGINEERING  
ROCKY MOUNT, VA 24151  
PH: 540.484.6555 FX: 540.484.6588

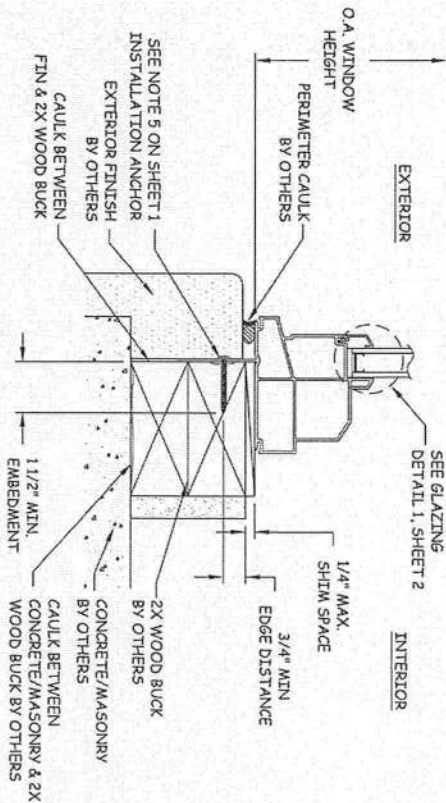
NO.	DESCRIPTION	BY	DATE
A	REMOVED AWNING DP CHART	JLR	02.05.09

**DATE:** 12.24.08  
**DWN BY:** JLR  
**CHK BY:** KSD  
**SCALE:** NTS

**DWG #:** MW/MO20  
**SHEET:** 2 OF 3



**C**  
**FIXED SECTION**  
2X WOOD FRAME - HEAD  
FIN INSTALLATION



**D**  
**FIXED SECTION**  
2X WOOD BUCK - SILL  
FIN INSTALLATION



**MW Manufacturers, Inc**  
WINDOWS & DOORS  
433 North Main St.  
Rocky Mount, VA 24151  
PH: 800.980.6400 - FX: 540.484.6663

**TITLE:**  
CLASSIC CASEMENT  
FIXED WINDOW  
DETAILS  
**PREPARED FOR:**  
PLY GEM WINDOW GROUP  
PRODUCT ENGINEERING  
ROCKY MOUNT, VA 24151  
PH: 540.484.6558 FX: 540.484.6668

REVISIONS			
NO.	DESCRIPTION	BY	DATE
A	REMOVED AWNING DETAILS	JLR	02.05.09

DATE: 12.24.08  
DWN BY: JLR  
CHK BY: KSD  
SCALE: NTS

DWG #: **MWM020**  
SHEET: **3 OF 3**





APPLICATION FOR  
GENERAL WORK OF THE  
DISTRICT  
DEVELOPMENT PERMIT  
FORM 40B-1.901(11)

**Suwannee  
River  
Water  
Management  
District**

9225 CR 49  
Live Oak, FL 32060  
TELEPHONE: 386.362.1001  
TELEPHONE: 800.226.1066  
FAX: 386.362.1056

Application #:

FOR AGENCY USE ONLY

Please provide complete information for the items on this application. Applicants should consult the listings of content and conditions for use of a general permit in 40B-4.3020 and 40B-4.3030, Florida Administrative Code (F.A.C.). This information may be found on [www.mysuwanneeriver.com](http://www.mysuwanneeriver.com). For a general permit to be valid, all of the information required on this application must be supplied and the proposed development must meet the conditions listed in 40B-4.3030, F.A.C.

Application Type: ☒ New Permit ☐ Modification to Existing Permit

Existing Permit Number and/or Related District Permit Numbers:

Name of Project (if applicable): River House		Parcel Identification Number(s): 00-00-00-00579-000	
Applicant's Name: Richard and Rena Scaff		Project Description (please check all that apply): <input checked="" type="checkbox"/> Buildings <input type="checkbox"/> Boardwalk <input type="checkbox"/> Deck <input type="checkbox"/> Floating Dock <input type="checkbox"/> Non-floating Dock <input type="checkbox"/> Boat Ramp/Seawalls/Retaining Walls/Rip-Rap <input type="checkbox"/> Other (please specify)	
Title and Company:		Owner's Name, Title and Company (if different than applicant):	
Mailing Address: P.O. Box 1869, 348 SW Deanna Terrace		Owner's Address (including city, state and zip code):	
City, State and Zip: Lake City, FL 32025		Telephone Number:	
Telephone Number (including area code): 386-755-0394		Email Address:	
Fax Number (including area code):			
Email Address:			
County of Project: Columbia	Project Size (acres): 1.23	Section: 36	Township: 6 S
Property Address (if applicable): 818 Manatee St. Fort White FL		Range: 15 E	

A General Works of the District Development Permit is authorized by paragraph 40B-4.3010(1), F.A.C., and requires permittees to comply with all limiting conditions listed in rule 40B-4.3030, F.A.C. Submission of this application and subsequent development under the provisions of the general permit constitutes agreement by the permittee to abide by these conditions. Failure to abide by these conditions may constitute a violation of District rules and result in District enforcement action.

Signature of the OWNER of the property on which the development will occur.

Date

Incorporated by reference in 40B-1.901, Florida Administrative Code.

Water for Nature, Water for People

Page 1 of 1





GTC Design Group, LLC  
P.O. Box 187  
Live Oak, FL 32064  
(Phone) 386.362.3678  
(Fax) 386.362.6133  
cwilliams@gtcdesigngroup.com

July 22, 2009

**ZERO RISE CERTIFICATION**

Client/Owner: **Richard and Rena Scaff**

Property Description: **Lot 20,  
Three Rivers Estates Unit 2  
Section 36, Township 6 South, Range 15 East  
Columbia County, Florida**

Structure in Floodway: **34' x 46' structure on piers**

River Mile: **13**

Elevation of 100yr flood: **34**  
Community Panel: **12023C0467 C**

I hereby certify that construction of the proposed residence will not increase flood elevations of the Sante Fe River.



Gary J. Gill  
PE# 51942  
7/22/09  
July 22, 2009





GTC Design Group, LLC  
P.O. Box 187  
Live Oak, FL 32064  
(Phone) 386.362.3678  
(Fax) 386.362.6133  
cwilliams@gtcdesigngroup.com

August 24, 2009

Leroy Marshall II  
c/o Suwannee River Water Management District  
9225 County Road 49  
Live Oak, FL 32060

**SUBJECT: Zero Rise- Richard & Rena Scaff**

Mr. Marshall

Mr. Richard Scaff proposes to build a residence in Section 36, Township 6 South, Range 15 East, Lot 20, Columbia County, Florida. The structure will be a 34 x 46 residential addition on piers in the floodway of the Santa Fe River.

A new cross section was added at the site location. A site plan is attached locating the property, and existing cross sections.

**All elevations per NAV D1998 Datum.**

The following steps were executed in doing the zero rise calculations.

- (1) Run the model with SRWMD existing cross sections. Verify that the model matches the original flood study results.

**The output from the run using the existing cross sections matches the original flood study.**

- (2) Interpolate between existing cross sections and add a new cross section at the site location.

**The new section, RS 12.90, was interpolated from river posts 11.3 and 13.03. The elevations from the interpolated cross sections were adjusted accordingly.**

- (3) Verify that the run using the additional cross section matches the original output.

**The output from the run using the interpolated cross sections matches the original flood study.**

- (4) Add obstacles along the new cross section to model the piers under the house.

**An obstacle width of 60 feet was added at cross section RS 12.90. RS 12.90 is located at the center of the building. An obstacle height of 60 feet was input to insure the structure would be modeled correctly.**

- (5) Verify the run including the obstacles matches the original model run.

**The water surface elevations for all three runs match and a zero rise is achieved.**

- (6) Print out cross sections.

**See attachments.**

Thank you,

  
Gary J. Gill  
P.E. #51942  
7/22/09



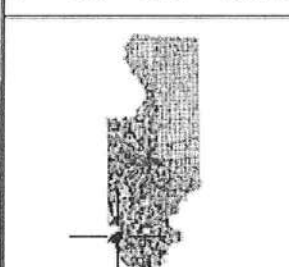
## Columbia County Property Appraiser

J. Doyle Crews, CFA - Lake City, Florida - 386-758-1083

**PARCEL: 00-00-00-00579-000 - SINGLE FAM (000100)**

Name: HAMMOND PAULINE G	LandVal	\$39,600.00
Site: MANATEE	BldgVal	\$18,875.00
Mail: 23255 NW 199TH PL APT 1	ApprVal	\$58,865.00
High Springs, FL 32643	JustVal	\$58,865.00
Sales	Assd	\$58,865.00
Info	Exmpt	\$0.00
	Taxable	County: \$58,865.00   City: \$58,865.00
		Other: \$58,865.00   School: \$58,865.00

0 0.06 0.12 0.18 mi



This information, GIS Map Updated: 4/27/2009, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, its use, or its interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

HEC-RAS River Santa Fe Reach: Main Profile: 100 Year

Reach	River Sta	Profile	Plan	Q Total (cfs)	Min Ch El (ft)	W.S. Elev (ft)	Crit W.S. (ft)	E.G. Elev (ft)	E.G. Slope (ft/ft)	Vel Chnl (ft/s)	Flow Area (sq ft)	Top Width (ft)	Froude # Chl
Main	14.08	100 Year	MP	16359.00	9.84	34.86		34.92	0.000087	2.37	27817.51	3123.31	0.09
Main	14.08	100 Year	Added X-Section	16359.00	9.84	34.86		34.93	0.000101	2.55	27789.66	3121.45	0.10
Main	14.08	100 Year	Piers	16359.00	9.84	34.86		34.93	0.000101	2.55	27807.79	3122.66	0.10
Main	13.03	100 Year	MP	16359.00	-6.11	34.55		34.59	0.000046	2.06	38548.80	3890.19	0.07
Main	13.03	100 Year	Added X-Section	16359.00	-6.11	34.55		34.58	0.000042	1.98	45637.04	4068.60	0.06
Main	13.03	100 Year	Piers	16359.00	-6.11	34.55		34.59	0.000042	1.98	45662.21	4069.62	0.06
Main	12.8973*	100 Year	Added X-Section	16359.00	-5.46	34.54		34.56	0.000029	1.64	55337.80	4252.69	0.05
Main	12.8973*	100 Year	Piers	16359.00	-5.46	34.54		34.57	0.000030	1.67	54590.99	4219.02	0.05
Main	11.3	100 Year	MP	16359.00	6.34	34.23		34.26	0.000035	1.70	32793.08	2491.62	0.06
Main	11.3	100 Year	Added X-Section	16359.00	6.34	34.23		34.28	0.000056	1.97	28886.68	2541.67	0.07
Main	11.3	100 Year	Piers	16359.00	6.34	34.23		34.28	0.000056	1.97	28886.68	2541.67	0.07
Main	10.06	100 Year	MP	16359.00	1.15	33.89		33.96	0.000068	2.39	21181.37	2550.87	0.08
Main	10.06	100 Year	Added X-Section	16359.00	1.15	33.89		33.95	0.000049	2.14	28977.51	3421.40	0.07
Main	10.06	100 Year	Piers	16359.00	1.15	33.89		33.95	0.000049	2.14	28977.51	3421.40	0.07





# Project Summary Entire House W'mson Brothers

Job: Gray skaff  
Date: Oct 28, 2009  
By:

9223 South State Road 228, Macclenny, FL 32063 Phone: 904-259-7445 Email: GWmson@AOL.com

## Project Information

For: Richard & Rena Skaff  
818 Manatee Street, Fort White, FL

Notes:

## Design Information

Weather: Gainesville, FL, US

### Winter Design Conditions

Outside db	33 °F
Inside db	68 °F
Design TD	35 °F

### Summer Design Conditions

Outside db	92 °F
Inside db	75 °F
Design TD	17 °F
Daily range	M
Relative humidity	50 %
Moisture difference	52 gr/lb

### Heating Summary

Structure	18510 Btuh
Ducts	0 Btuh
Central vent (22 cfm)	857 Btuh
Humidification	0 Btuh
Piping	0 Btuh
Equipment load	19366 Btuh

### Sensible Cooling Equipment Load Sizing

Structure	20277 Btuh
Ducts	0 Btuh
Central vent (22 cfm)	416 Btuh
Blower	0 Btuh
Use manufacturer's data	n
Rate/swing multiplier	0.97
Equipment sensible load	20073 Btuh

### Infiltration

Method	Simplified
Construction quality	Average
Fireplaces	0

	Heating	Cooling
Area (ft <sup>2</sup> )	1222	1222
Volume (ft <sup>3</sup> )	9815	9815
Air changes/hour	0.45	0.23
Equiv. AVF (cfm)	74	38

### Latent Cooling Equipment Load Sizing

Structure	1923 Btuh
Ducts	0 Btuh
Central vent (22 cfm)	787 Btuh
Equipment latent load	2709 Btuh
Equipment total load	22782 Btuh
Req. total capacity at 0.70 SHR	2.4 ton

### Heating Equipment Summary

Make	
Trade	
Model	
ARI ref no.	
Efficiency	0 HSPF
Heating input	
Heating output	0 Btuh @ 47°F
Temperature rise	0 °F
Actual air flow	927 cfm
Air flow factor	0.050 cfm/Btuh
Static pressure	0 in H2O
Space thermostat	

### Cooling Equipment Summary

Make	
Trade	
Cond	
Coil	
ARI ref no.	
Efficiency	0 EER
Sensible cooling	0 Btuh
Latent cooling	0 Btuh
Total cooling	0 Btuh
Actual air flow	927 cfm
Air flow factor	0.046 cfm/Btuh
Static pressure	0 in H2O
Load sensible heat ratio	0.88



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Office



# AED Assessment Entire House W'mson Brothers

Job: Gray skaff  
Date: Oct 28, 2009  
By:

9223 South State Road 228, Macclenny, FL 32063 Phone: 904-259-7445 Email: GWmson@AOL.com

## Project Information

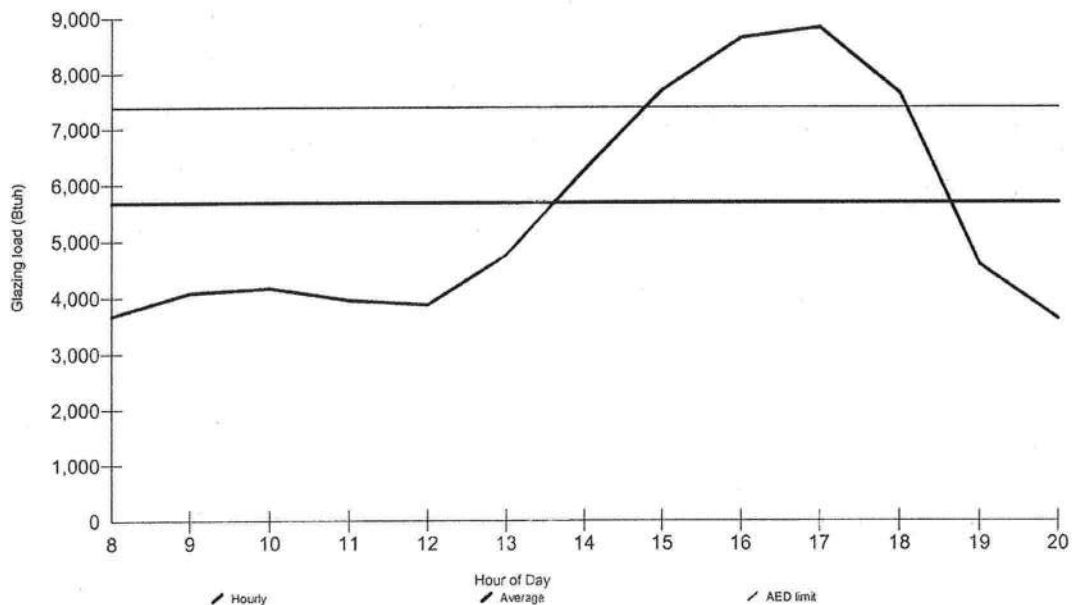
For: Richard & Rena Skaff  
818 Manatee Street, Fort White, FL

## Design Conditions

Location:		Indoor:		Heating	Cooling
Gainesville, FL, US		Indoor temperature (°F)		68	75
Elevation: 151 ft		Design TD (°F)		35	17
Latitude: 30°N		Relative humidity (%)		50	50
		Moisture difference (gr/lb)		29.0	52.0
Outdoor:		Heating	Cooling	Infiltration:	
Dry bulb (°F)		33	92		
Daily range (°F)		-	19 ( M )		
Wet bulb (°F)		-	77		
Wind speed (mph)		15.0	7.5		

## Test for Adequate Exposure Diversity

### Hourly Glazing Load



Maximum hourly glazing load exceeds average by 55.3%.

House does not have adequate exposure diversity (AED), based on AED limit of 30%.

AED excursion: 1439 Btuh (PFG - 1.3\*AFG)



Wrightsoft

Right-Suite® Universal 7.1.01 RSU05926

C:\Documents and Settings\Andy\My Documents\Wrightsoft HVAC\Scaff Richard & Rena.rup Calc = MJ8

2009-Nov-03 10:13:44

Page 1



# **Right-J® Worksheet** **Entire House** **W'mson Brothers**

Job: Gray skaff  
 Date: Oct 28, 2009  
 By:

9223 South State Road 228, Macclenny, FL 32063 Phone: 904-259-7445 Email: GWmson@AOL.com

		Room name																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
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# Right-J® Worksheet Entire House W'mson Brothers

Job: Gray skaff  
Date: Oct 28, 2009  
By:

9223 South State Road 228, Macclenny, FL 32063 Phone: 904-259-7445 Email: GWmson@AOL.com

1 2 3 4 5	Room name		Exposed wall		Ceiling height		Room dimensions		Room area		living		bath1	
	8.0 ft		33.0 ft		heat/cool		8.0 ft		8.0 ft		8.0 ft		heat/cool	
	260.0 ft²		13.0 x 20.0 ft											
6	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
11	W	12B-0sw	0.097	n	3.39	2.59	160	139	472	361	0	0	0	0
	D	11D0	0.390	n	13.65	11.37	21	21	287	239	0	0	0	0
	W	12B-0sw	0.097	n	3.39	2.59	0	0	0	0	0	0	0	0
	W	12B-0sw	0.097	e	3.39	2.59	0	0	0	0	64	56	190	145
	G	1D-c2ov	0.570	e	19.95	40.48	0	0	0	0	8	0	160	324
	G	1D-c2ov	0.570	e	19.95	40.48	0	0	0	0	0	0	0	0
	W	12B-0sw	0.097	e	3.39	2.59	0	0	0	0	0	0	0	0
	G	1D-c2ov	0.570	e	19.95	40.48	0	0	0	0	0	0	0	0
	W	12E-0sw	0.068	e	2.38	1.36	0	0	0	0	0	0	0	0
	W	12B-0sw	0.097	s	3.39	2.59	0	0	0	0	0	0	0	0
	D	11D0	0.390	s	13.65	11.37	0	0	0	0	0	0	0	0
	W	12B-0sw	0.097	w	3.39	2.59	0	0	0	0	0	0	0	0
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0
	G	1D-c2ov	0.570	w	19.95	63.43	0	0	0	0	0	0	0	0
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0
	W	12B-0sw	0.097	w	3.39	2.59	104	59	200	153	0	0	0	0
	G	1D-c2ov	0.570	w	19.95	40.48	15	0	299	607	0	0	0	0
	G	1D-c2ov	0.570	w	19.95	40.48	15	0	299	607	0	0	0	0
	G	1D-c2ov	0.570	w	19.95	48.35	15	0	299	725	0	0	0	0
C		16B-30ad	0.032	-	1.12	1.68	0	0	0	0	0	0	0	0
C		16B-30md	0.032	-	1.12	1.68	260	260	291	438	80	80	90	135
C		16C-30al	0.032	-	1.12	1.36	0	0	0	0	0	0	0	0
F		20P-0c	0.385	-	13.47	4.87	0	0	0	0	80	80	1078	390
F		20P-19c	0.050	-	1.75	0.63	260	260	455	164	0	0	0	0
F		22A-cpm	1.180	-	0.00	0.00	0	0	0	0	0	0	0	0
6	c) AED excursion								673					33
	Envelope loss/gain								2603	3968			1517	1027
12	a) Infiltration								623	155			151	37
	b) Room ventilation								0	0			0	0
13	Internal gains:		Occupants @	230			0			0	0			0
			Appliances @	1200			0			0	0			0
	Subtotal (lines 6 to 13)								3226	4122			1668	1064
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								3226	4122			1668	1064
15	Duct loads						0%	0%	0	0	0%	0%	0	0
	Total room load								3226	4122			1668	1064
	Air required (cfm)								161	188			84	49

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.





# Right-J® Worksheet Entire House W'mson Brothers

Job: Gray skaff  
Date: Oct 28, 2009  
By:

9223 South State Road 228, Macclenny, FL 32063 Phone: 904-259-7445 Email: GWmson@AOL.com

1	Room name					bath2				utility					
2	Exposed wall					5.0 ft				0 ft					
3	Ceiling height					8.0 ft				9.0 ft					
4	Room dimensions					5.0 x 10.0 ft				13.0 x 3.0 ft					
5	Room area					50.0 ft²				39.0 ft²					
	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)		
Heat					Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool		
6	W	12B-0sw	0.097	n	3.39	2.59	0	0	0	0	0	0	0	0	
	D	11D0	0.390	n	13.65	11.37	0	0	0	0	0	0	0	0	
	W	12B-0sw	0.097	n	3.39	2.59	0	0	0	0	0	0	0	0	
	W	12B-0sw	0.097	e	3.39	2.59	0	0	0	0	0	0	0	0	
11	G	1D-c2ov	0.570	e	19.95	40.48	0	0	0	0	0	0	0	0	
	G	1D-c2ov	0.570	e	19.95	40.48	0	0	0	0	0	0	0	0	
	W	12B-0sw	0.097	e	3.39	2.59	0	0	0	0	0	0	0	0	
	G	1D-c2ov	0.570	e	19.95	40.48	0	0	0	0	0	0	0	0	
	W	12E-0sw	0.068	e	2.38	1.36	40	40	95	55	0	0	0	0	
	W	12B-0sw	0.097	s	3.39	2.59	0	0	0	0	0	0	0	0	
	D	11D0	0.390	s	13.65	11.37	0	0	0	0	0	0	0	0	
	W	12B-0sw	0.097	w	3.39	2.59	0	0	0	0	0	0	0	0	
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0	
	G	1D-c2ov	0.570	w	19.95	63.43	0	0	0	0	0	0	0	0	
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0	
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0	
	W	12B-0sw	0.097	w	3.39	2.59	0	0	0	0	0	0	0	0	
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0	
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0	
	G	1D-c2ov	0.570	w	19.95	48.35	0	0	0	0	0	0	0	0	
	C	16B-30ad	0.032	-	1.12	1.68	0	0	0	0	39	39	44	66	
	C	16B-30md	0.032	-	1.12	1.68	50	50	56	84	0	0	0	0	
	C	16C-30al	0.032	-	1.12	1.36	0	0	0	0	0	0	0	0	
	F	20P-0c	0.385	-	13.47	4.87	50	50	674	244	0	0	0	0	
	F	20P-19c	0.050	-	1.75	0.63	0	0	0	0	0	0	0	0	
	F	22A-cpm	1.180	-	0.00	0.00	0	0	0	0	39	0	0	0	
6	c) AED excursion									-28				-4	
	Envelope loss/gain								825	355			44	61	
12	a) Infiltration								94	23			0	0	
	b) Room ventilation								0	0			0	0	
13	Internal gains: Occupants @ 230						0			0		0		0	
	Appliances @ 1200						0			0		0		0	
	Subtotal (lines 6 to 13)								919	378			44	61	
	Less external load								0	0			0	0	
	Less transfer								0	0			0	0	
	Redistribution								0	0			0	0	
14	Subtotal								919	378			44	61	
15	Duct loads						0%	0%	0	0		0%	0%	0	0
	Total room load								919	378			44	61	
	Air required (cfm)								46	17			2	3	

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Wrightsoft

Right-Suite® Universal 7.1.01 RSU05926

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Page 3



# Right-J® Worksheet

## Entire House

### W'mson Brothers

Job: Gray skaff  
Date: Oct 28, 2009  
By:

9223 South State Road 228, Macclenny, FL 32063 Phone: 904-259-7445 Email: GWmson@AOL.com

1	Room name				bed 2				dining							
2	Exposed wall				23.0 ft				21.0 ft							
3	Ceiling height				8.0 ft 13.0 x 10.0 ft				8.0 ft 13.0 x 21.0 ft							
4	Room dimensions				130.0 ft²				273.0 ft²							
5	Room area															
	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)			
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool		
6	W D W W G G W G W W D W G G G G W G G G C C C F F F	12B-0sw	0.097	n	3.39	2.59	0	0	0	0	0	0	0	0		
		11D0	0.390	nn	13.65	11.37	0	0	0	0	0	0	0	0		
		12B-0sw	0.097	n	3.39	2.59	0	0	0	0	0	0	0	0		
		12B-0sw	0.097	e	3.39	2.59	104	89	302	231	0	0	0	0		
		1D-c2ov	0.570	e	19.95	40.48	0	0	0	0	0	0	0	0		
		1D-c2ov	0.570	e	19.95	40.48	15	0	299	607	0	0	0	0		
		12B-0sw	0.097	e	3.39	2.59	0	0	0	0	0	0	0	0		
		1D-c2ov	0.570	e	19.95	40.48	0	0	0	0	0	0	0	0		
		12E-0sw	0.068	e	2.38	1.36	0	0	0	0	0	0	0	0		
		12B-0sw	0.097	s	3.39	2.59	80	80	272	208	64	43	146	112		
		11D0	0.390	s	13.65	11.37	0	0	0	0	21	21	287	239		
		12B-0sw	0.097	w	3.39	2.59	0	0	0	0	104	59	200	153		
		1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	15	0	299	607		
		1D-c2ov	0.570	w	19.95	63.43	0	0	0	0	0	0	0	0		
		1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	15	0	299	607		
		1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	15	0	299	607		
		1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0		
		1D-c2ov	0.570	w	19.95	40.48	0	0	0	0	0	0	0	0		
		1D-c2ov	0.570	w	19.95	48.35	0	0	0	0	0	0	0	0		
		16B-30ad	0.032	-	1.12	1.68	0	0	0	0	0	0	0	0		
16B-30md	0.032	-	1.12	1.68	130	130	146	219	273	273	306	460				
16C-30al	0.032	-	1.12	1.36	0	0	0	0	0	0	0	0				
20P-0c	0.385	-	13.47	4.87	130	130	1752	633	0	0	0	0				
20P-19c	0.050	-	1.75	0.63	0	0	0	0	273	273	478	173				
22A-cpm	1.180	-	0.00	0.00	0	0	0	0	0	0	0	0				
6	c) AED excursion									41				759		
	Envelope loss/gain									2770	1939			2314	3717	
12	a) Infiltration									434	108			396	98	
	b) Room ventilation									0	0			0	0	
13	Internal gains:		Occupants @ 230				1			230	0			0	0	
			Appliances @ 1200				0			0	0			0	0	
	Subtotal (lines 6 to 13)									3204	2277			2710	3815	
14	Less external load									0	0			0	0	
	Less transfer									0	0			0	0	
15	Redistribution									0	0			0	0	
	Subtotal									3204	2277			2710	3815	
	Duct loads								0%	0%	0	0			0	0
	Total room load									3204	2277			2710	3815	
	Air required (cfm)									160	104			136	174	

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**Right-J® Worksheet**  
**Entire House**  
**Wmson Brothers**

Job: Gray skaff  
Date: Oct 28, 2009  
By:

9223 South State Road 228, Macclenny, FL 32063 Phone: 904-259-7445 Email: GWmson@AOL.com

1	Room name					kitchen									
2	Exposed wall					29.0 ft									
3	Ceiling height					8.0 ft									
4	Room dimensions					13.0 x 16.0 ft					heat/cool				
5	Room area					208.0 ft²									
	Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area or perimeter		Load		
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
6	W	12B-0sw	0.097	n	3.39	2.59	0	0	0	0					
	D	11D0	0.390	n	13.65	11.37	0	0	0	0					
	W	12B-0sw	0.097	n	3.39	2.59	0	0	0	0					
	W	12B-0sw	0.097	e	3.39	2.59	0	0	0	0					
11	G	1D-c2ov	0.570	e	19.95	40.48	0	0	0	0					
	G	1D-c2ov	0.570	e	19.95	40.48	0	0	0	0					
	W	12B-0sw	0.097	e	3.39	2.59	0	0	0	0					
	G	1D-c2ov	0.570	e	19.95	40.48	0	0	0	0					
	W	12E-0sw	0.068	e	2.38	1.36	0	0	0	0					
	W	12B-0sw	0.097	s	3.39	2.59	128	128	435	332					
	D	11D0	0.390	s	13.65	11.37	0	0	0	0					
	W	12B-0sw	0.097	w	3.39	2.59	104	92	312	239					
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0					
	G	1D-c2ov	0.570	w	19.95	63.43	12	0	239	761					
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0					
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0					
	W	12B-0sw	0.097	w	3.39	2.59	0	0	0	0					
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0					
	G	1D-c2ov	0.570	w	19.95	40.48	0	0	0	0					
	G	1D-c2ov	0.570	w	19.95	48.35	0	0	0	0					
C		16B-30ad	0.032	-	1.12	1.68	0	0	0	0					
C		16B-30md	0.032	-	1.12	1.68	208	208	233	350					
C		16C-30al	0.032	-	1.12	1.36	0	0	0	0					
F		20P-0c	0.385	-	13.47	4.87	208	208	2803	1013					
F		20P-19c	0.050	-	1.75	0.63	0	0	0	0					
F		22A-cpm	1.180	-	0.00	0.00	0	0	0	0					
6	c) AED excursion									-83					
	Envelope loss/gain									4022		2613			
12	a) Infiltration									547		136			
	b) Room ventilation									0		0			
13	Internal gains:		Occupants @	230			0				0				
			Appliances @	1200			3				3600				
	Subtotal (lines 6 to 13)									4569		6349			
	Less external load									0		0			
	Less transfer									0		0			
	Redistribution									0		0			
14	Subtotal									4569		6349			
15	Duct loads							0%	0%	0		0			
	Total room load									4569		6349			
	Air required (cfm)									229		290			

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**GERMAN CRN(CA)NRY**  
**OF**

**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 36-6S-15-00579-000

Building permit No. 000028228

Use Classification SFD, UTILITY

Fire: 0.00

Permit Holder LITTLE & WILLIAMS, INC

Waste:           

Owner of Building RICHARD & RENA SCAFF

Total: 0.00

Location: 818 SW MANATEE ST., FT. WHITE, FL

Date: 07/08/2010

*Fanny Dicker*

Building Inspector

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





District No. 1 - Ronald Williams  
 District No. 2 - Dewey Weaver  
 District No. 3 - Jody DuPree  
 District No. 4 - Stephen E. Bailey  
 District No. 5 - Scarlet P. Frisina



28228



## BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

### MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This completed form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

The attached elevation certificate requires corrections by the surveyor of section(s) \_\_\_\_\_ prior to acceptance by the community.

☒ The attached elevation certificated is complete and correct.

Minor corrections have been made in the below marked sections by the authorized Community Official.

#### SECTION A - PROPERTY INFORMATION

A1 Building Owner's Name		For Insurance Company Use
A2 Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. <b>818 SW Manatee Street</b>		Policy Number
City	State	Company NAIC Number
A3 Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)		

A4 Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)		Horizontal Datum <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983	
A5 Latitude/Longitude: Lat. _____ Long. _____			
A6 Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance			
A7 Building Diagram Number _____			
A8 For a building with a crawl space or enclosure(s), provide:		A9 For a building with an attached garage, provide:	
a) Square footage of crawl space or enclosure(s) _____ sq ft	a) Square footage of attached garage _____ sq ft		
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____	b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____		
c) Total net area of flood openings in A8.b _____ sq in	c) Total net area of flood openings in A9.b _____ sq in		

#### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1 NFIP Community Name & Community Number		B2 County Name		B3 State	
B4 Map/Panel Number	B5 Suffix	B6 FIRM Index Date	B7 FIRM Panel Effective/Revised Date	B8 Flood Zone(s)	B9 Base Flood Elevation(s) (Zone AO, use base flood depth)

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) \_\_\_\_\_

B11 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 ☐ No  
 Designation Date \_\_\_\_\_ ☐ CBRS ☐ OPA

#### COMMENTS:

Date of Review:

3 May 2010

BOARD MEETS FIRST THURSDAY AT 7:00 P.M.

AND THE COMMUNITY OFFICIAL:

*[Signature]*

All elevation certificates shall be maintained by the community and copies with the attached memo made available upon request.

# ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

## SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name Richard Scaff		For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. SW Manatee Terrace		Policy Number
City Ft White State FL ZIP Code 32038		Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 20, Three Rivers Estates Unit 2 - Columbia County		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>Residential</u>		
A5. Latitude/Longitude: Lat. <u>29°55.399</u> Long. <u>82°46.220</u>		Horizontal Datum: <input type="checkbox"/> NAD 1927 <input checked="" type="checkbox"/> NAD 1983
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>5</u>		
A8. For a building with a crawlspace or enclosure(s):		A9. For a building with an attached garage:
a) Square footage of crawlspace or enclosure(s) <u>N/A</u> sq ft		a) Square footage of attached garage <u>N/A</u> sq ft
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade <u>N/A</u>		b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade <u>N/A</u>
c) Total net area of flood openings in A8.b <u>N/A</u> sq in		c) Total net area of flood openings in A9.b <u>N/A</u> sq in
d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No		d) Engineered flood openings? <input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number Columbia County, FL 120070		B2. County Name Columbia	B3. State Florida		
B4. Map/Panel Number 12023C0467	B5. Suffix C	B6. FIRM Index Date 2/4/09	B7. FIRM Panel Effective/Revised Date 2/4/09	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 34
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input checked="" type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> 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 Local/Vertical Datum NAVD1988
- Conversion/Comments \_\_\_\_\_

- Check the measurement used.
- |   |   |
|---|---|
| a) Top of bottom floor (including basement, crawlspace, or enclosure floor) <u>35.99</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| b) Top of the next higher floor <u>N/A</u>  | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)            |
| c) Bottom of the lowest horizontal structural member (V Zones only) <u>N/A</u>  | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)            |
| d) Attached garage (top of slab) <u>N/A</u>   | <input type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)            |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>35.87</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| f) Lowest adjacent (finished) grade next to building (LAG) <u>23.0</u>  | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| g) Highest adjacent (finished) grade next to building (HAG) <u>22.4</u>   | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support <u>22.5</u>                                | <input checked="" type="checkbox"/> feet <input type="checkbox"/> 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 ☐ No

Certifier's Name Timothy A. Delbene License Number LS 5594

Title Land Surveyor & Mapper Company Name Donald F. Lee & Associates, Inc.

Address 140 NW Ridgewood Ave. City Lake City State FL ZIP Code 32055

Signature Timothy A. Delbene Date 4/22/2010 Telephone 286 755 6166

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

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

SW Manatee Terrace

City Ft White State FL ZIP Code 32038

For Insurance Company Use:

Policy Number

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 Mechanical Equipment is an Air conditioning unit (at upper deck level). The house is structurally complete...some finish work is still underway. House is described hereon as "finished construction".

Signature

Date 4/22/2010

☐ 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 C2.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

Timothy Delbene

Address 140 NW Ridgewood Ave

City Lake City

State FL

ZIP Code 32055

Signature

Date 4/22/2010

Telephone 386-755-6166

Comments Donald F. Lee &amp; Associates, Inc. - Land Surveyors

☐ 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



## 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. SW Manatee Terrace	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 OF HOUSE



REAR VIEW OF HOUSE



# Building Photographs

Continuation Page

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. SW Manatee Terrace	For Insurance Company Use:
City Ft White State FL ZIP Code 32038	Policy Number
	Company NAIC Number

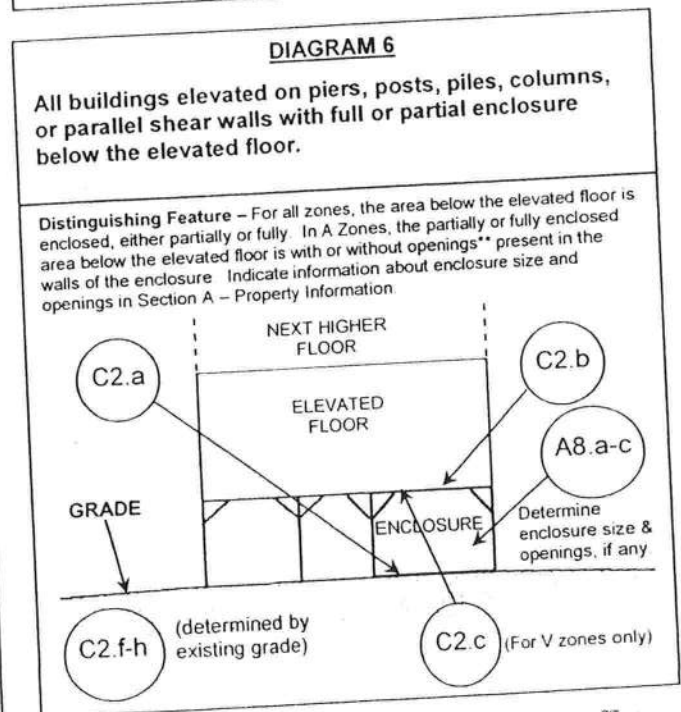
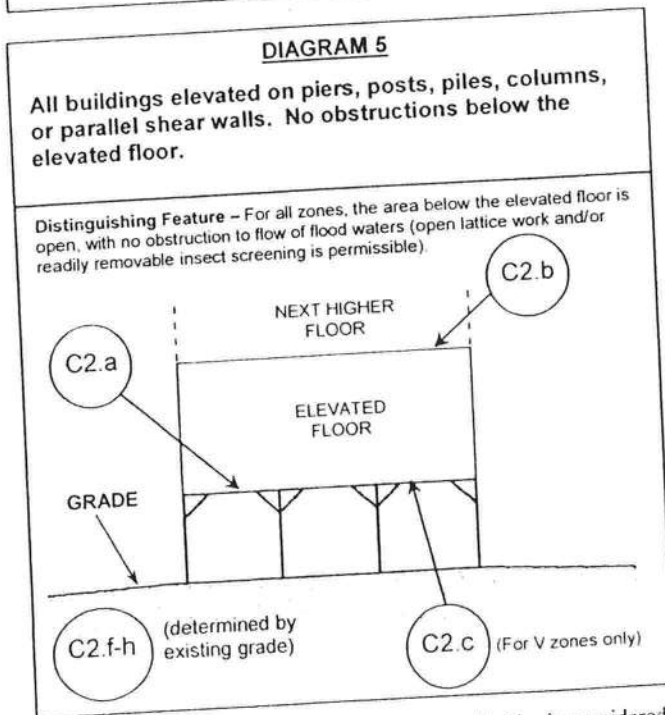
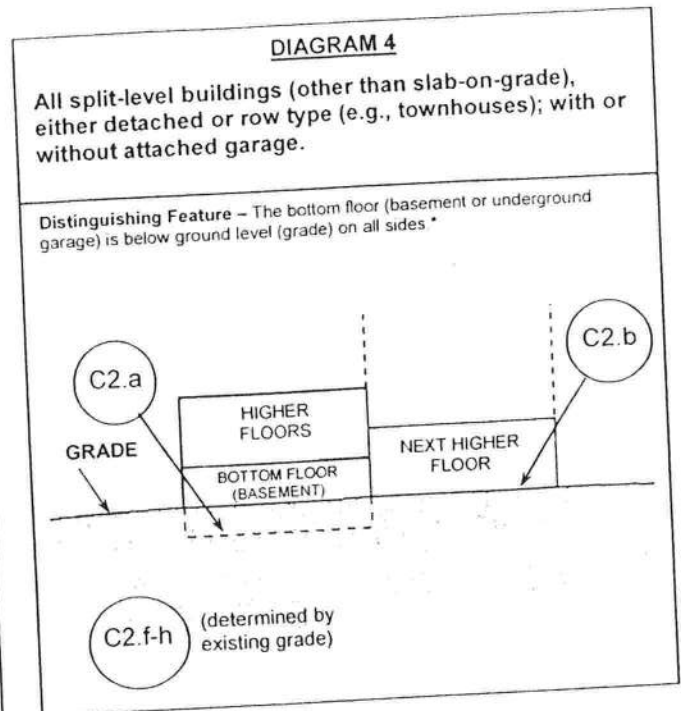
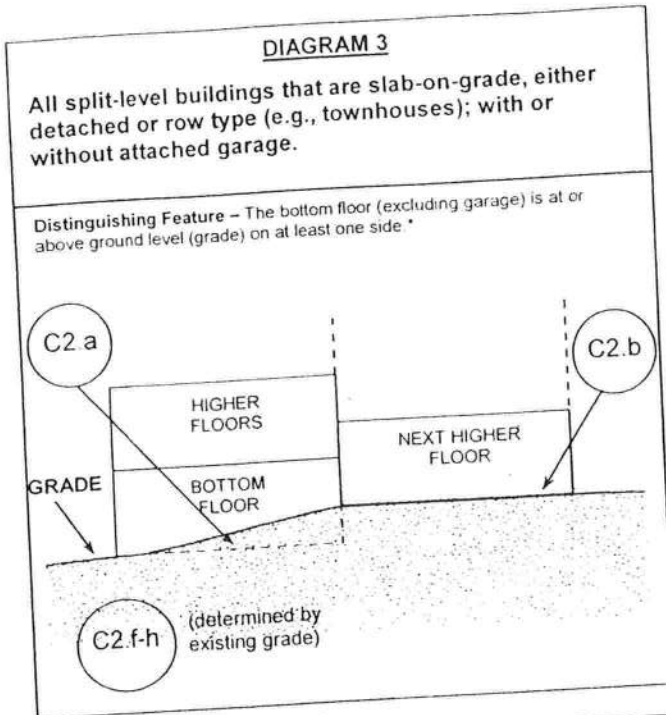
If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View."



RIGHT SIDE VIEW OF HOUSE



LEFT SIDE VIEW OF HOUSE



- \* A floor that is below ground level (grade) on all sides is considered a basement even if the floor is used for living purposes, or as an office, garage, workshop, etc.
- \*\* An "opening" is a permanent opening that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawlspaces. The openings shall provide a total net area of not less than one square inch for every square foot of area enclosed, excluding any bars, louvers, or other covers of the opening. Alternatively, an Individual Engineered Flood Openings Certification or an Evaluation Report issued by the International Code Council Evaluation Service (ICC ES) must be submitted to document that the design of the openings will allow for the automatic equalization of hydrostatic flood forces on exterior walls. A window, a door, or a garage door is not considered an opening; openings may be installed in doors. Openings shall be on at least two sides of the enclosed area. If a building has more than one enclosed area, each area must have openings to allow floodwater to directly enter. The bottom of openings must be no higher than one foot above the higher of the exterior or interior grade or floor immediately below the opening. For more guidance on openings, see NFIP Technical Bulletin 1.







46'-0"

38'-0"

14'-10"

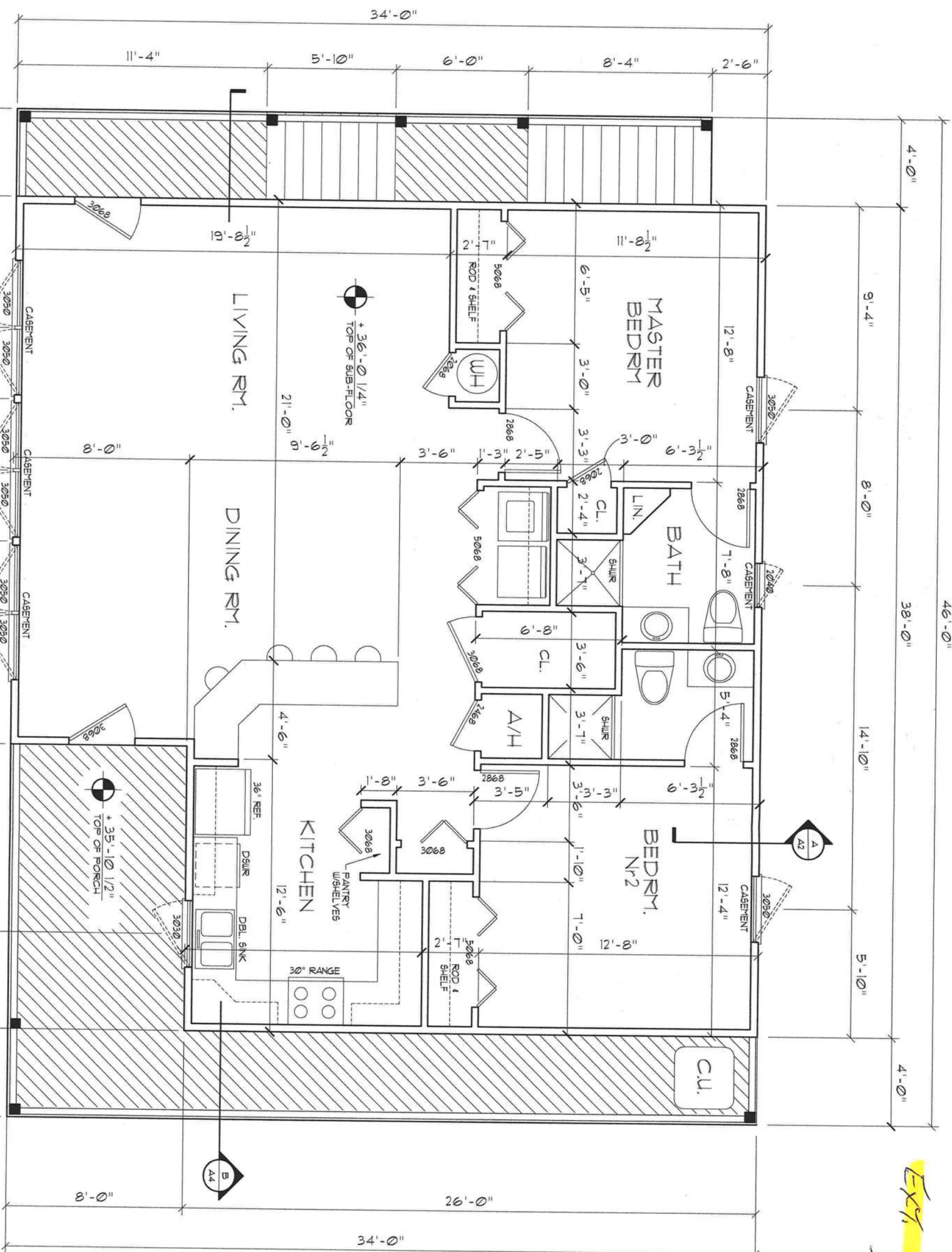
5'-10"

4'-0"

Approval Code

EX7. DOORS FL 8838.2

Therma Tree



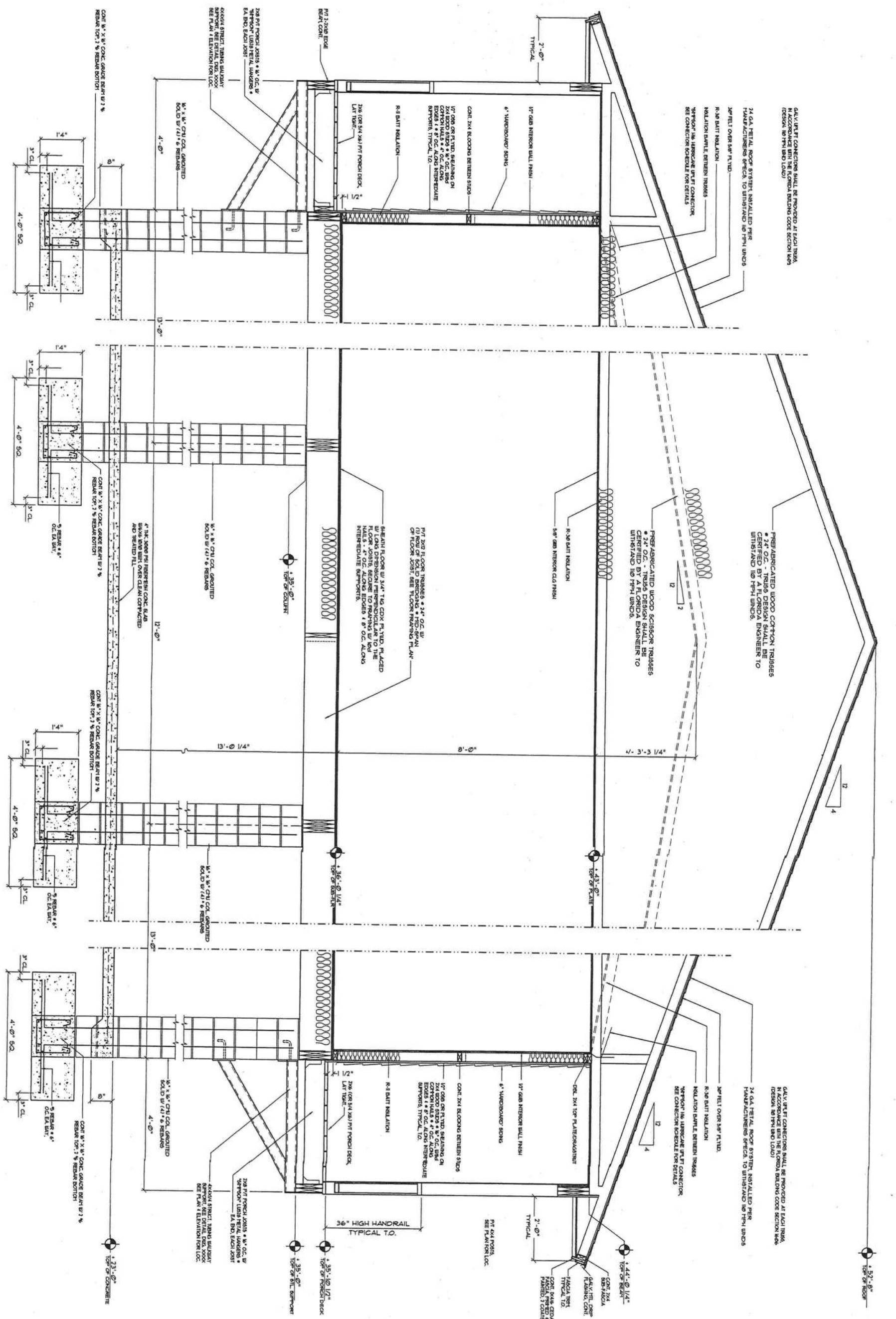
Office







These drawings, as instruments of service, are the sole property of the architect, and may not be used, copied or reproduced in whole or in part for use on or in connection with any other job without specific and individual authorization by the architect.



Typical Building Section  
SCALE 3/4" = 1'-0"

B  
44

AR0007005

REVISION:	DATE: 08/12/2005			Custom Designed Home for: <b>Richard &amp; Rena Scaff</b> COLUMBIA COUNTY, FLORIDA <b>Typ. Building Section</b>	DATE: 08/12/2005
DRAWN: DJR	COM: 4 of 12				BY: Nicholas Paul Gesler



REVISION:

Copyright 2005  
H.P. Geller, PhD  
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**DRAWN:**

DJR

Custom Designed Home for:  
**Richard & Rena Scaff**  
COLUMBIA COUNTY, FLORIDA  
Exterior Elevations



**ARCHITECTURAL DRAFTING & DESIGN, INC.**  
 Lake City, FL 32055 - 386.752.4670

**N3**  
NICHOLAS  
PAUL  
GESLER  
ARCHITECT  
N.C.A.R.B. Certified

1758 NW Brown Rd.  
Lake City, FL 32055  
386-755-9021

DATE: 08JUNE2009  
COUNT:

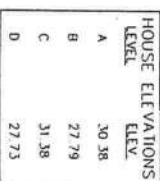
SHEET:

A3

3 of 12

AR0007005

LOT 20, THREE RIVERS ESTATES, UNIT 2  
IN SECTION 36, TOWNSHIP 6 SOUTH, RANGE 15 EAST  
COLUMBIA COUNTY, FLORIDA



1.) Monumentation is as shown and designated on the face of the plot

- 2) Boundary based on monumentation found in place, description furnished by client, prior survey and subdivision by B.G. Moore, P.L.S.
- 3) Boundary projected from East property line and based on above referenced prior survey and subdivision by B.G. Moore, P.L.S.
- 4) Interior improvements were located by field ties.
- 5) Underground encroachments, if present, were not located with this survey.
- 6) This survey was made without benefit of a title search. There may be additional encroachments, easements, rights of way, or other interests found in the Public Records. Issues regarding title, land use & zoning, easements & other encumbrances are not a part of the scope of a Boundary Survey and can only be revealed with a title search.
- 7.) Date of field survey completion: May 26, 2009
- 8) Examination of the Flood Insurance Rate Maps (FIRM) for Columbia County shows that, per said maps, the described parcel lies within Flood Zone "AE", which according to said maps is inside of the 1% annual chance flood plain (1 ft. to 100 year flood plain) (see: Map No. 12023C04657C). A base flood elevation (BFE) of 34 feet is shown on said FIRM maps.

O.R.B. 366, PG. 419

Lot 20, Strawn & 35, Township 6 South, Range 15 East, Columbia County, Florida. The following is a plat of the property described as COMMENCE at the Northeast corner of a public road, Section 16, Township 6 North, Range 15 East, Columbia County, Florida and run S 19°32'30" W Lambert Grid Bearing 1803.35 feet for a POINT OF BEGINNING; thence N 82°01' W 591.9 feet more or less to wolver's edge Santa Fe River; thence Southwesteasterly along said wolver's edge Santa Fe River to a point; thence S 82°01' E 531.9 feet more or less to a point; thence N 14°24' W 100 feet to the POINT OF BEGINNING.

AND ALSO

O.R.B. 659, Pg. 010

COMMENCE at the Southeast corner of Lot 21; THREE RIVERS STRAITS, Section No. 2, a subdivision recorded to Plat recorded in Florida Public Records, Vol. 33 of the Public Records of Columbia County, Florida and run N 2°00' E 122.43 feet to the POINT OF BEGINNING; Lot 21, 252.09 feet to the POINT OF BEGINNING; thence containing N 82°01' W along said South line of Lot 21, 139.81 feet; thence N 53°16'20" E, 122.43 feet; thence S 26°33' E, 37.74 feet to the POINT OF BEGINNING.

AND ALSO

COMMENCE of the Southeast corner of Lot 21: THREE RIVERS

ESTATES, Section No. 2, a subdivision according to Plat recorded in the Public Records of Columbia County, Florida and run thence N 82°31' W along the South line of said Lot 21, 252.09 feet to the POINT OF BEGINNING, thence continue N 82°31' W along said South line of Lot 21, 139.81 feet, thence N 83°16'20" E, 122.43 feet, thence S 26°33' E, 37.74 feet to the POINT OF BEGINNING.

[illegible]

Parcel ID # 00-00-00-00579-000





- Design Data  
1187 SF. - LIVING AREA  
240 SF. - OPEN DECKS  
1421 SF. - TOTAL AREA

Roof: Gable Roof Construction, Wood Trusses @ 24" O.  
Walls: 2x4 Wood Studs @ 16" O.C.  
Floor: 2x12 Floor Joist @ 16" O.C.  
Foundation: 48"x48"x16" Tpk Conc. Pile @ 16"x16" Conc. Columns

**Material:** 5/8" CD Plywood  
**Sheet Size:** 48"x96" Sheets Perpendicular to Roof Framing  
**Fasteners:** See Nail Schedule on sheet A13

**Material:** 15/32" CD Plywood or 7/16" OSB.  
**Sheet Size:** 48"x96" Sheets Placed Vertical  
**Fasteners:** 8d Common Nails 4" OC Edges 1 1/2" OC Interiors

HURRICANE UPLIFT CONNECTORS

Beam to column Anchor: Steel Column Caps w/Anchors  
Corner Hold-down Devices: "SLIPSON" M5TC4EB3 • ea. corner & opn'g.  
Porch Column Connectors: (1) CB46 • ea. base, (1) CC64 • ea. can

Header:	16"x16" Conc. Beam w/ (4) #5 dowels
Column:	16"x16" CMU Blocks w/ (4) #5 dowels
Footing:	48"x48"x16" Conc. Flg's w/ #5 bars @ 6" O.C. ea. way

NOTE: See Connector Schedule, Foundation Plan, Roof Framing Plan, and

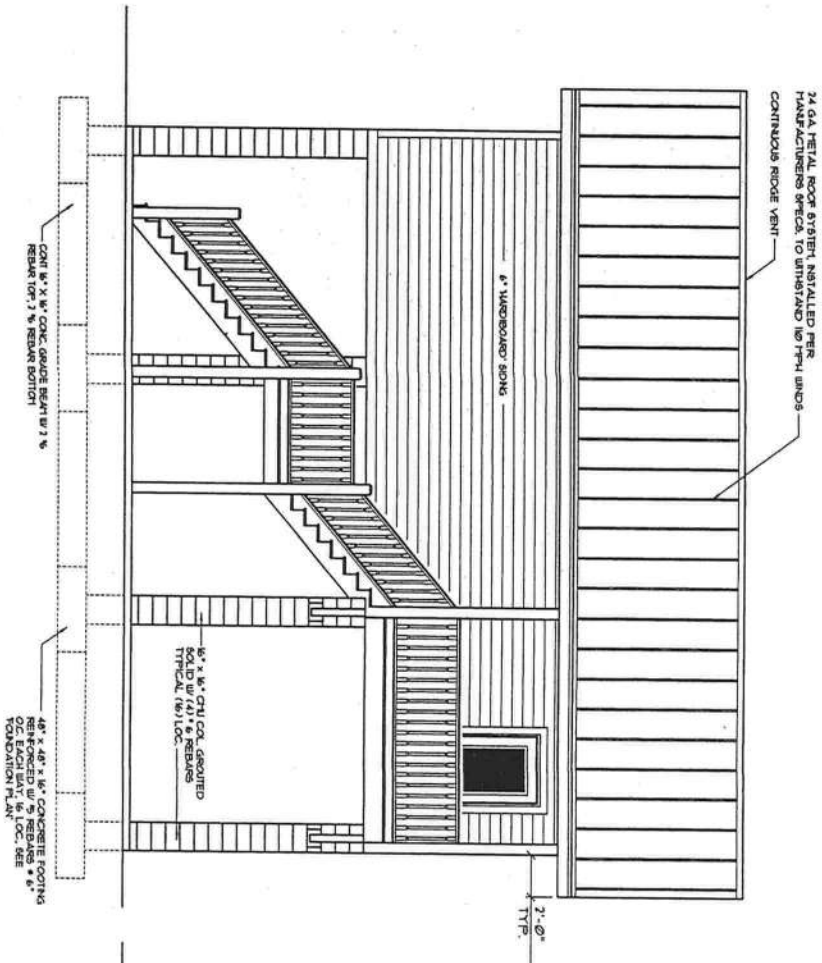
ALL WIND LOADS ARE IN ACCORDANCE WITH SECTION 1609, FLORIDA BUILDING CODE, 2007 EDITION.	
BASIC WIND SPEED:	80 MPH
WIND PERFORMANCE FACTOR (I)	I = 1.00
BUILDING CATEGORY:	CATEGORY II
WIND EXPOSURE:	"B"
INTERNAL PRESSURE COEFFICIENT:	+/- 0.18
WINDS PER TABLE 16-9-2A (FBC 2004) DEBRIS AND PRESSURES:	ROOF : + .21 PSF WALL : + .66 PSF EAVES : - .31 PSF
COMPONENTS & CLADDING PER TABLE 16-9-2C (FBC 2004) DEBRIS AND PRESSURES:	OPNWA : + .18 / - .21 PSF EAVEH : + .83 PSF ROOF : + .13 / - .75 PSF

GALV. UPSET CONNECTORS SHALL BE PROVIDED AT EACH TRUSS, IN ACCORDANCE WITH THE FLORIDA BUILDING CODE SECTION 605 (DESIGN 160 TPN WIND LOAD)



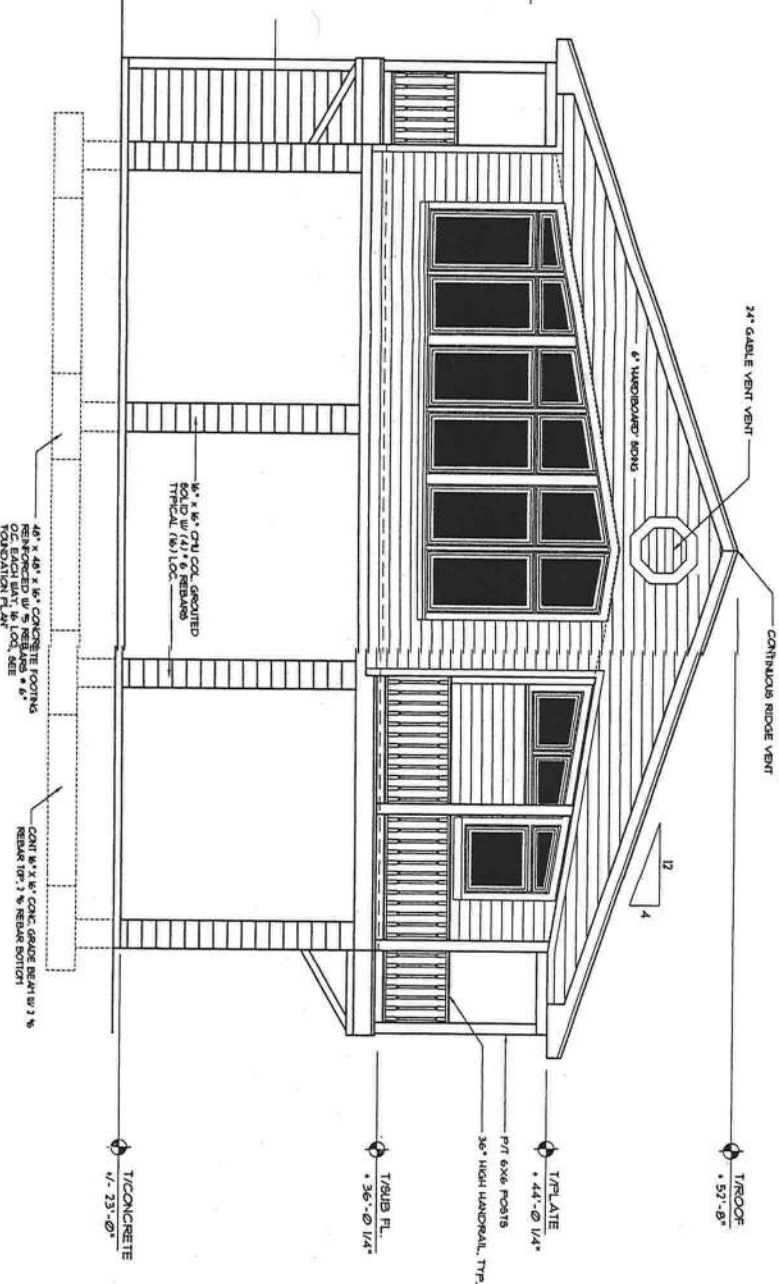
AR00007005

These drawings, as instruments of service, are the sole property of the architect, and may not be used, copied or reproduced in whole or in part for use on or incorporated within any other job without specific and individual authorization by the architect.



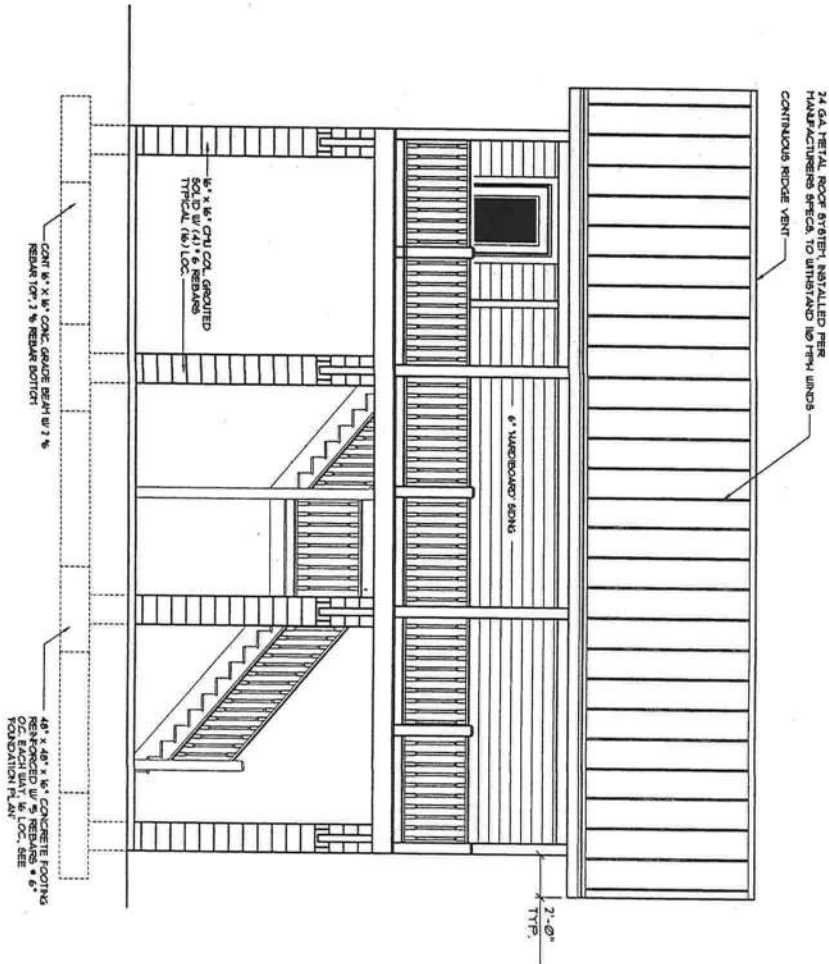
Right Side ELEVATION

SCALE: 1/4" = 1'-0"



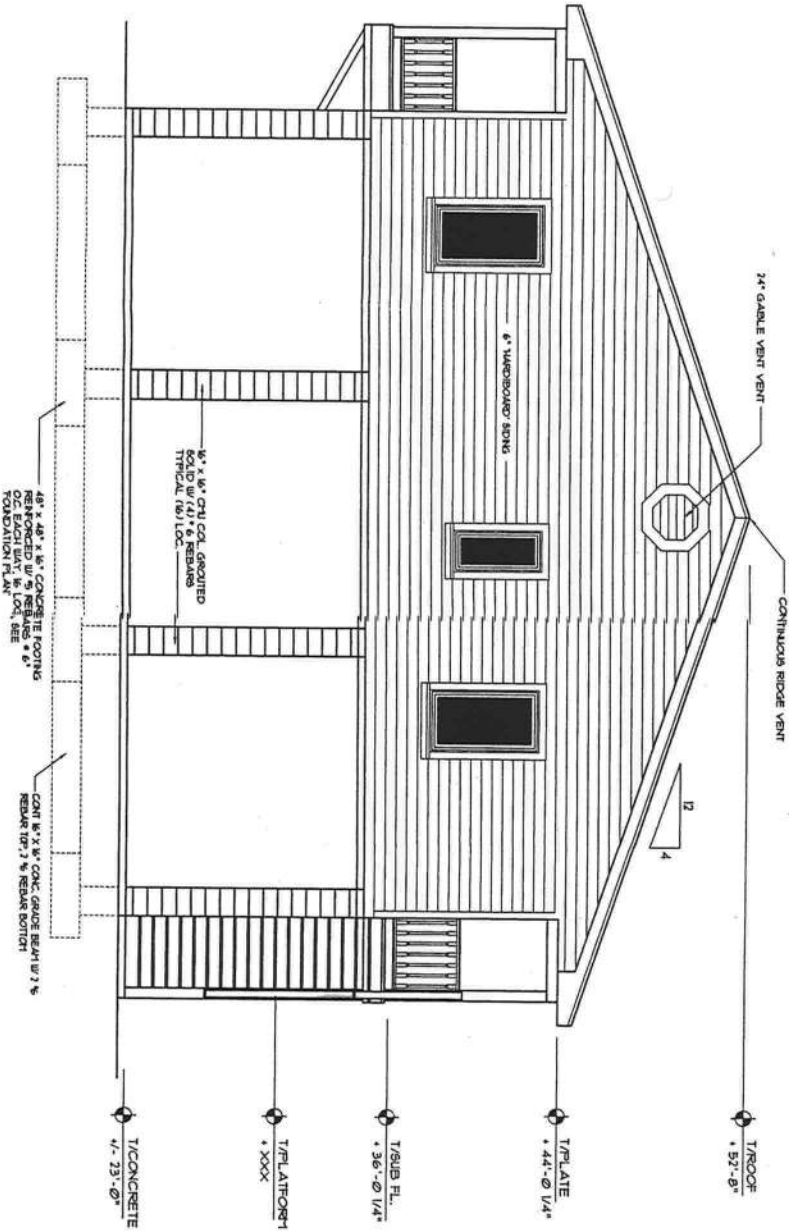
River Front ELEVATION

SCALE: 1/4" = 1'-0"



Left Side ELEVATION

SCALE: 1/4" = 1'-0"



Rear ELEVATION

SCALE: 1/4" = 1'-0"

REVISION:  
DATE: 08/11/2011  
BY: [Signature]  
CHECKED: [Signature]  
DUR

Custom Designed Home for:  
**Richard & Rena Scaff**  
COLUMBIA COUNTY, FLORIDA

Exterior Elevations

**ADD**  
ARCHITECTURAL DRAFTING & DESIGN, INC.  
Lake City, FL 32055 - 386.752.4670

**N3**  
NICHOLAS PAUL GIESLER  
ARCHITECT  
N.C.A.R.B. Certified  
1758 NW Brown Rd.  
Lake City, FL 32055  
386-755-9021

DATE: 08/11/2011  
CONC: 08/11/2011

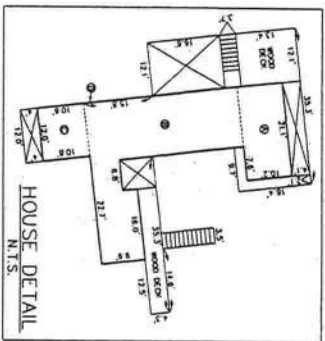
SHEET:

A3

3 of 12

AR0007005

LOT 20, THREE RIVERS ESTATES, UNIT 2  
IN SECTION 36, TOWNSHIP 6 SOUTH, RANGE 15 EAST  
COLUMBIA COUNTY, FLORIDA



HOUSE ELEVATIONS	
LEVEL	ELEV.
A	20.38
B	27.79
C	31.38
D	27.73

- 1) Monumentation is as shown and designated on the face of the plat.
- 2) Boundary based on monumentation found in place, description furnished by client, prior survey and subdivision by B.G. Moore, PLS.
- 3) Bearings projected from East property line and based on above referenced prior survey and subdivision by B.G. Moore, PLS.
- 4) Interior improvements were located by field ties.
- 5) Underground encroachments, if present, were not located with this survey.
- 6) This survey was made without benefit of a title search. There may be additional easements, restrictions, etc. not shown hereon but found in the Public Records. Issues regarding title, land use & zoning, easements & other encumbrances are not a part of the scope of a Boundary Survey and can only be revealed with a title search.
- 7) Date of field survey completion: May 26, 2009.
- 8) Examination of the Flood Insurance Rate Map (FIRM) for Columbia County shows that, per said maps, the described parcel lies within Flood Zone "AE" (which according to said maps is inside of the 1% annual chance flood plain (1 ft. x 100 year flood plain) (ref. Map N-12023C0467C). A base flood elevation (BFE) of 34 feet is shown on said FIRM maps.

Lot 20, Section 2 and 36, Township 6 South, Range 15 East, Columbia County, Florida, said Lot 20 being more particularly described as follows: Beginning at the Southeast corner of Lot 21, Section 35, Township 6 South, Range 15 East, Columbia County, Florida, run S. 19.32.30" W. Lambert Grid Bearing 180.335 feet for a POINT OF BEGINNING; thence N. 82.01° W. 591.9 feet more or less to wolver's edge Santa Fe River; thence Southwesteasily along said wolver's edge Santa Fe River to a point; thence S. 82.01° E. 531.9 feet more or less to a point; thence N. 14.24° W. 100 feet to the POINT OF BEGINNING.

AND ALSO

O.R.B. 659, PG. 010

COMMENCE at the Southeast corner of Lot 21; THREE RIVERS ESTATES, Section No. 2, a subdivision recorded to Plat recorded in Plat Book 44, Page 37 of the Public Records of Columbia County, Florida, and thence S. 82.01° W. along the South line of said Lot 21, 235.00 feet to a point; thence S. 82.01° W. along said South line of Lot 21, 138.81 feet; thence N. 83.16.20" E. 122.43 feet; thence S. 26.33° E. 37.74 feet to the POINT OF BEGINNING.

[illegible]

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

*Timothy A. DeLeone*

Timothy A. DeLeone, P.L.S.  
Florida Reg. No. 5594

DATE: 5/28/2009

Donald F. Lee and Associates, Inc.

SURVEYORS - ENGINEERS

140 Northwest Ridgewood Avenue, Lake City, Florida 32055

Phone: (386) 755-6166 FAX: (386) 755-5167

CERTIFICATE OF AUTHORIZATION # LB 1042

Scale: 1" = 1"

Field Book:

RICHARD SCAFF

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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File: A-48

Parcel ID # 00-00-00-00579

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