

DATE 07/26/2004

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000022129

APPLICANT WILLIAM SCOTT

PHONE 758-7337

ADDRESS 780 SW RIDGE STREET

LAKE CITY

FL 32024

OWNER BLAINE & HOLLY HUDSON

PHONE 961-8871

ADDRESS 244 SE HORZION GLENN

LAKE CITY

FL 32025

CONTRACTOR WILLIAM SCOTT CONSTRUCTION

PHONE

LOCATION OF PROPERTY BAYA AVE, TR ON COUNTRY CLUB, TL ON SE HORIZON GLENN,
2ND ON RIGHT

TYPE DEVELOPMENT SFD,UTILTY

ESTIMATED COST OF CONSTRUCTION 134900.00

HEATED FLOOR AREA 2698.00

TOTAL AREA 3733.00

HEIGHT .00 STORIES 1

FOUNDATION CONC

WALLS FRAMED

ROOF PITCH 10/12

FLOOR SLAB

LAND USE & ZONING A-3

MAX. HEIGHT 27

Minimum Set Back Requirments: STREET-FRONT 30.00

REAR 25.00

SIDE 25.00

NO. EX.D.U. 0

FLOOD ZONE X

DEVELOPMENT PERMIT NO.

PARCEL ID 22-4S-17-08679-006

SUBDIVISION

LOT BLOCK PHASE UNIT TOTAL ACRES 4.07

CRC1250835

Culvert Permit No.

Culvert Waiver

Contractor's License Number

Applicant/Owner/Contractor

EXISTING

04-0643-N

BK

RJ

Y

Driveway Connection

Septic Tank Number

LU & Zoning checked by

Approved for Issuance

New Resident

COMMENTS: ONE FOOT ABOVE THE ROAD, NOC ON FILE

Check # or Cash 1262

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power

Foundation

Monolithic

date/app. by

date/app. by

date/app. by

Under slab rough-in plumbing

Slab

Sheathing/Nailing

date/app. by

date/app. by

date/app. by

Framing

Rough-in plumbing above slab and below wood floor

date/app. by

date/app. by

Electrical rough-in

Heat & Air Duct

Peri. beam (Lintel)

date/app. by

date/app. by

date/app. by

Permanent power

C.O. Final

Culvert

date/app. by

date/app. by

date/app. by

M/H tie downs, blocking, electricity and plumbing

date/app. by

Pool

date/app. by

Reconnection

Pump pole

Utility Pole

date/app. by

date/app. by

date/app. by

M/H Pole

Travel Trailer

Re-roof

date/app. by

date/app. by

date/app. by

BUILDING PERMIT FEE \$ 675.00

CERTIFICATION FEE \$ 18.66

SURCHARGE FEE \$ 18.66

MISC. FEES \$.00

ZONING CERT. FEE \$ 50.00

FIRE FEE \$

WASTE FEE \$

FLOOD ZONE DEVELOPMENT FEE \$

CULVERT FEE \$

TOTAL FEE 762.32

INSPECTORS OFFICE

CLERKS OFFICE

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

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

This Permit Must Be Prominently Posted on Premises During Construction

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

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

Columbia County Building Permit Application

For Office Use Only Application # 0407-45 Date Received 7/15/04 By G Permit # 22129
Application Approved by - Zoning Official BSLK Date 23.07.04 Plans Examiner _____ Date _____
Flood Zone X Development Permit NIA Zoning A-3 Land Use Plan Map Category A-3
Comments _____

Applicants Name Blaine and Holly Hudson Phone 961-8871
Address 2975 EAST US Hwy 90
Owners Name Blaine + Holly Hudson Phone 961-8871
911 Address SE Horizon Glenn, L
Contractors Name William Scott Constroction Phone (386) 758-7337
Address 780 SW Ridge st LL. 32024
Fee Simple Owner Name & Address _____
Bonding Co. Name & Address _____
Architect/Engineer Name & Address Nelson Design Group / MARK DISOWAY, PE
Mortgage Lenders Name & Address People State BANK

Property ID Number W22-45-17-08679-006 Estimated Cost of Construction 177,890.
Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____
Driving Directions EAST ON ROYA TURN RIGHT ON COUNTRY CLUB GO SOUTH ON COUNTRY CLUB
TO SE-HORIZON GLENN TURN LEFT ON SE HORIZON GLENN HOUSE ON RIGHT
Type of Construction NEW Construction SFD Number of Existing Dwellings on Property 1
Total Acreage 4.07 Lot Size _____ Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive
Actual Distance of Structure from Property Lines - Front 372' Side 150' Side 94' Rear 310
Total Building Height 27'-5" Number of Stories 2 Heated Floor Area 2698 Roof Pitch 10/12

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.

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

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

Owner Builder or Agent (Including Contractor) _____

STATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me

this 15TH day of JULY 20 04.

Personally known X or Produced Identification _____

William Scott
Contractor Signature

Contractors License Number CRC1250835

Competency Card Number _____

My Commission DD041807

Expires July 11 2005

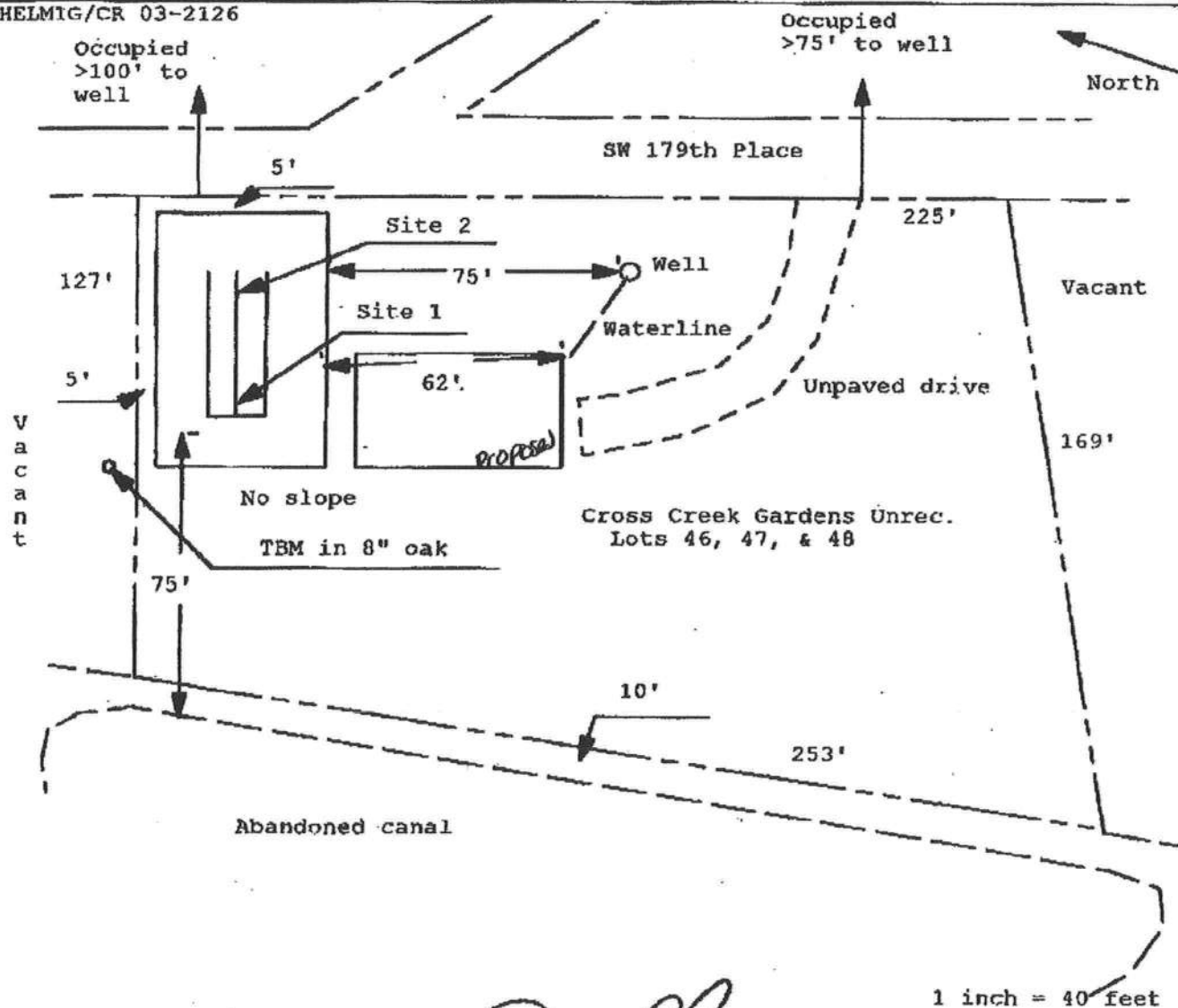
NOTARY STAMP/SEAL

Peggy Sue Canipe
Notary Signature

**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
Permit Application Number: 04-06431V

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT

HELMIG/CR 03-2126



Site Plan Submitted By Paul L. Lapp Date 6/7/04
Plan Approved Not Approved Date 6/7/04
By Paul L. Lapp Larkland Hook C CPHU 6-11-04

Notes:

STATE OF FLORIDA
DEPARTMENT OF HEALTH
ON-SITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION PERMITCENTRAX #: 12-SC-05839
DATE PAID: 6-9-04
FEE PAID: \$215.00
RECEIPT: 504060900
OSTDSNBR: 04-0643-N

2:00

CONSTRUCTION PERMIT FOR:

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

APPLICANT: HUDSON, BLAINE K.

AGENT: 96-0476, Ford Rocky

PROPERTY STREET ADDRESS: S. HORIZON GLEN Lake City FL 32055

LOT: NA BLOCK: NA SUBDIVISION: Not Applicable

[Section/Township/Range/Parcel No.]

PROPERTY ID #: 22-48-17-08679-005

[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF CHAPTER 64E-6, FAC
DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC TIME
PERIOD. ANY CHANGE IN MATERIAL FACTS WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT,
REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS
PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM
COMPLIANCE WITH OTHER FEDERAL, STATE OR LOCAL PERMITTING REQUIRED FOR PROPERTY DEVELOPMENT.

SYSTEM DESIGN AND SPECIFICATIONS

T [1200] Gallons SEPTIC TANK MULTI-CHAMBERED/IN SERIES: [Y]
A [0] Gallons MULTI-CHAMBERED/IN SERIES: [Y]
N [0] GALLONS GREASE INTERCEPTOR CAPACITY
K [0] GALLONS DOSING TANK CAPACITY [0] GALLONS @ [0] DOSES PER 24 HRS # PUMPS [0]

D [556] SQUARE FEET PRIMARY DRAINFIELD SYSTEM
R [0] SQUARE FEET SYSTEM

A TYPE SYSTEM: [Y] STANDARD [N] FILLED [N] MOUND [N]
I CONFIGURATION: [Y] TRENCH [N] BED [N]

F LOCATION TO BENCHMARK: 6" Post South of System Site

I ELEVATION OF PROPOSED SYSTEM SITE [12.0] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [27.0] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT

D FILL REQUIRED: [3.0] INCHES EXCAVATION REQUIRED: [0.0] INCHES

OTHER REMARKS:

The licensed contractor installing the system is responsible for installing the minimum
category of tank in accordance with s. 64E-6.013(3)(f), FAC.

SPECIFICATIONS BY: Lloyd, Paul

TITLE: PR. SOIL EVAL.

APPROVED BY: *Salhi*

TITLE: Environmental Spec Columbia

CHD

DATE ISSUED: 6/11/04

EXPIRATION DATE: 12/11/05



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT
Authority: Chapter 381, FS

CENTRAX #
DATE PAID
FEE PAID
RECEIPT
OSTDSNBR:

12-55-05030/
6-9-04
125.00
504069.00
04-0643-N

04-0643N

APPLICATION FOR:

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

APPLICANT: HUDSON, BLAINE K. TELEPHONE: 386 623-3105

AGENT: 95-0476 Rocky Ford,

MAILING ADDRESS: 2975 E. US HWY 90 LC 32055

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. ATTACH BUILDING PLAN AND TO-SCALE SITE PLAN SHOWING PERTINENT FEATURES REQUIRED BY CHAPTER 84E-6, FLORIDA ADMINISTRATIVE CODE.

PROPERTY INFORMATION (IF LOT IS NOT IN A RECORDED SUBDIVISION, ATTACH LEGAL DESCRIPTION OR DEED)

LOT: NA BLOCK: NA SUBDIVISION: Not Applicable PLATTED: NA

PROPERTY ID #: 22-46-17-08679-005 ZONING: Res. I/M OR EQUIVALENT: (Y/N)

PROPERTY SIZE: 4.89 ACRES [Sqft/43560] PROPERTY WATER SUPPLY: ☒ PRIVATE ☐ PUBLIC

IS SEWER AVAILABLE AS PER 381.0065, FLORIDA STATUTES? (Y/N) DISTANCE TO SEWER: 0 FT

PROPERTY STREET ADDRESS: S. HORIZON GLEN, Lake City

DIRECTIONS TO PROPERTY:

HWY 41 SOUTH, TL ON CR 252, TR ON OLD COUNTRY CLUB RD, ACROSS FROM DEAD END AT RACE TRACK ROAD

BUILDING INFORMATION

☒ RESIDENTIAL ☐ COMMERCIAL

Unit No	Type of Establishment	No. of Bedrooms	Building Area Sqft	# Persons Served	Business Activity For Commercial Only
1	4 Bdrm Single/Multi Fm	5 2x3	2608	4	

☐ Floor/Equipment Drains ☐

☐ Other (Specify) See Original

APPLICANT'S SIGNATURE:

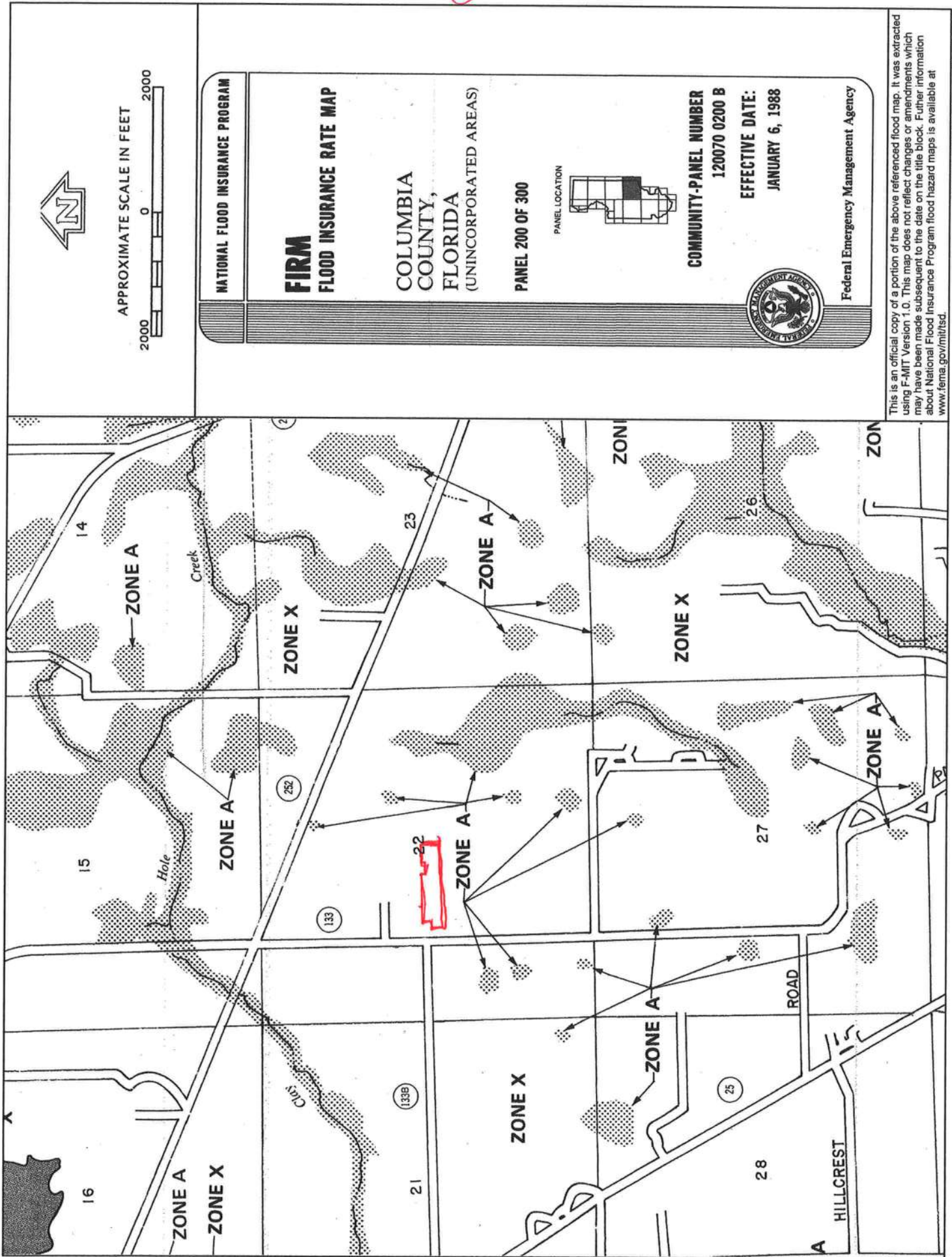
DH 4015, 03/87 (Obsoletes previous editions which may not be used)

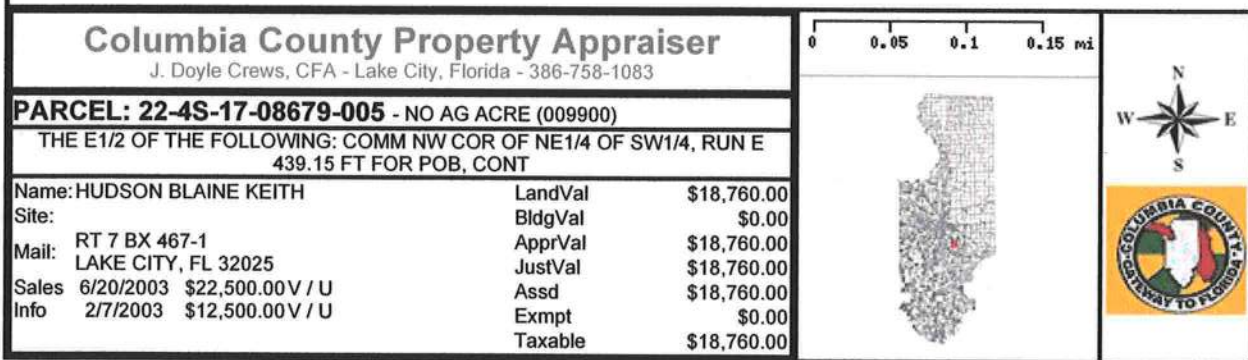
(Stock Number: 5744-001-4015-1)

[osids_appL4015-1]

DATE: 6/9/04

0407-45





http://appraiser.columbiacountyfla.com/GIS/Print_Map.asp?pjdoahgpgkkmahomlblehflchmahejho... 7/23/2004

CAM112M01 S CamaUSA Appraisal System
 7/07/2004 16:26 Legal Description Maintenance
 Year T Property Sel
 2004 R 22-4S-17-08679-006

Columbia County
 20034 Land 001
 AG 000
 Bldg 000
 Xfea 000
 20034 TOTAL B

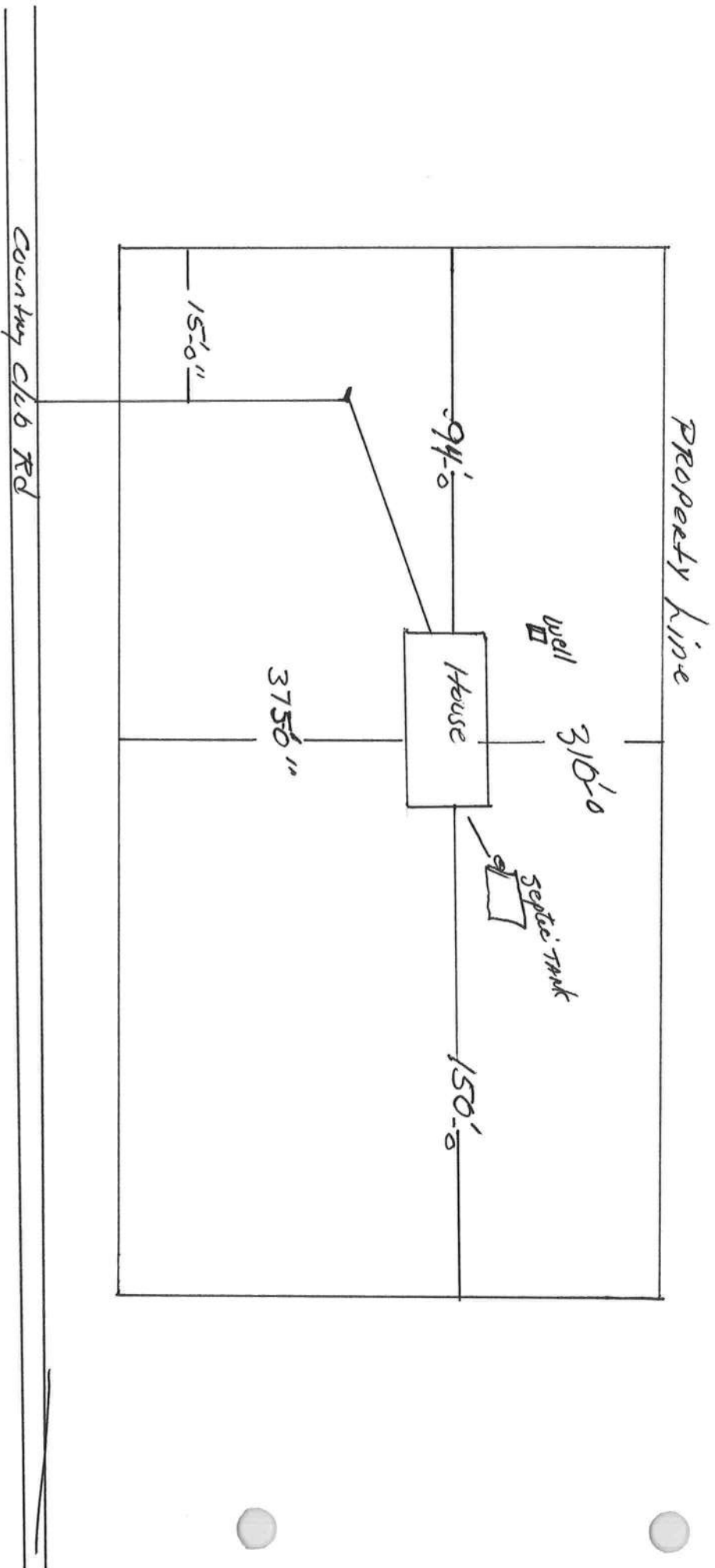
RT 6 BX 385-6
 HUDSON BLAINE KEITH

1	THE W1/2 OF THE FOLLOWING:	COMM NW COR OF NE1/4 OF SW1/4,	2
3	RUN E 439.15 FT FOR POB, CONT	E 1370.75 FT, S 329.89 FT, W	4
5	1534.43 FT, N 110.35 FT, E	164.05 FT, N 221.92 FT TO POB.	6
7	ORB 823-1426, 974-680,		8
9			10
11			12
13			14
15			16
17			18
19			20
21			22
23			24
25			26
27			28

Mnt 2/18/2003 TERRY

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

B/aine Hudson
22-45-17-08679-006



NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713 Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

DESCRIPTION OF PROPERTY: SEE SCHEDULE A ATTACHED HERETO.

GENERAL DESCRIPTION OF IMPROVEMENTS: Residence

OWNER AND ADDRESS: Blaine Keith Hudson
4975 East U. S. Highway 90
Lake City, Florida 32055

OWNER'S INTEREST IN PROPERTY: Fee Simple

FEE SIMPLE TITLE HOLDER: OWNER

CONTRACTOR AND ADDRESS: William Scott Construction
Post Office Box 364
Lake City, Florida 32056

SURETY AND ADDRESS (if any):
NONE

AMOUNT OF BOND: N/A

LENDER: Peoples State Bank
350 SW Main Blvd.
Lake City, Florida 32055

Name and address of person within the State of Florida designated by owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)(7), Florida Statutes.


OWNER

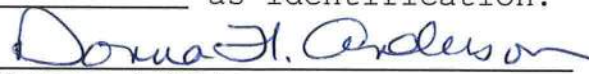
In addition to himself, Owner designate the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b) Florida Statutes: LENDER


OWNER, Blaine Keith Hudson

STATE OF FLORIDA
COUNTY OF COLUMBIA

The foregoing instrument was acknowledged before me this 1st day of June, 2004, by BLAINE KEITH HUDSON. He is personally known to me or produced SL D/K as identification.

 Donna H. Anderson
My Commission DD199996
Expires June 13, 2007
(Notary Seal)


Notary Public
My Commission Expires:

This Instrument Prepared By
EDDIE M. ANDERSON, P.A.
P. O. Box 1179
Lake City, Florida 32056-1179

Inst:2004012706 Date:06/01/2004 Time:15:38
DC, P. DeWitt Cason, Columbia County B:1017 P:429

SCHEDULE A
Notice of Commencement
Hudson-Peoples State Bank

TOWNSHIP 4 SOUTH, RANGE 17 EAST

Section 22: Commence at the Northwest corner of NE¼ of SW¼ of said Section 22, Columbia County, Florida, and run thence N 89°37'51" E along the North line of said NE¼ of SW¼ 439.15 feet to the point of beginning; thence continue N 89°37'51" E along said North line 1370.75 feet; thence S 01°26'19" E 329.89 feet; thence S 89°39'10" W 1534.43 feet; thence N 1°30'12" W 110.35 feet; thence S 89°20'04" E 164.05 feet; thence N 01°29'10" W 221.92 feet to the point of beginning.

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name: **407092HudsonRes.**
Address:
City, State: ,
Owner:
Climate Zone: **North**

Builder:
Permitting Office:
Permit Number: **22129**
Jurisdiction Number: **221000**

- | | | |
|-------------------------------------|----------------------|-------------|
| 1. New construction or existing | New | ___ |
| 2. Single family or multi-family | Single family | ___ |
| 3. Number of units, if multi-family | 1 | ___ |
| 4. Number of Bedrooms | 5 | ___ |
| 5. Is this a worst case? | Yes | ___ |
| 6. Conditioned floor area (ft²) | 2698 ft² | ___ |
| 7. Glass area & type | Single Pane | Double Pane |
| a. Clear glass, default U-factor | 0.0 ft² | 314.8 ft² |
| b. Default tint, default U-factor | 0.0 ft² | 0.0 ft² |
| c. Labeled U-factor or SHGC | 0.0 ft² | 0.0 ft² |
| 8. Floor types | | |
| a. Slab-On-Grade Edge Insulation | R=0.0, 201.0(p) ft | ___ |
| b. N/A | | ___ |
| c. N/A | | ___ |
| 9. Wall types | | |
| a. Frame, Wood, Exterior | R=13.0, 1628.0 ft² | ___ |
| b. Frame, Wood, Exterior | R=13.0, 340.0 ft² | ___ |
| c. N/A | | ___ |
| d. N/A | | ___ |
| e. N/A | | ___ |
| 10. Ceiling types | | |
| a. Under Attic | R=30.0, 2607.0 ft² | ___ |
| b. N/A | | ___ |
| c. N/A | | ___ |
| 11. Ducts | | |
| a. Sup: Unc. Ret: Unc. AH: Garage | Sup. R=6.0, 260.0 ft | ___ |
| b. N/A | | ___ |

- | | | |
|--|-------------------|-----|
| 12. Cooling systems | | |
| a. Central Unit | Cap: 82.0 kBtu/hr | ___ |
| | SEER: 11.00 | ___ |
| b. N/A | | ___ |
| c. N/A | | ___ |
| 13. Heating systems | | |
| a. Electric Heat Pump | Cap: 82.0 kBtu/hr | ___ |
| | HSPF: 7.00 | ___ |
| b. N/A | | ___ |
| c. N/A | | ___ |
| 14. Hot water systems | | |
| a. Electric Resistance | Cap: 40.0 gallons | ___ |
| | EF: 0.89 | ___ |
| b. N/A | | ___ |
| c. Conservation credits | | ___ |
| (HR-Heat recovery, Solar | | ___ |
| DHP-Dedicated heat pump) | | ___ |
| 15. HVAC credits | | ___ |
| (CF-Ceiling fan, CV-Cross ventilation, | | ___ |
| HF-Whole house fan, | | ___ |
| PT-Programmable Thermostat, | | ___ |
| MZ-C-Multizone cooling, | | ___ |
| MZ-H-Multizone heating) | | ___ |

Glass/Floor Area: 0.12

Total as-built points: 40853

Total base points: 41048

PASS

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

PREPARED BY: Evan Beamsley

DATE: 7/13/04

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

OWNER/AGENT: _____

DATE: _____

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



BUILDING OFFICIAL: _____

DATE: _____

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BSPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt		Area X SPM X SOF = Points				
.18	2698.0	20.04	9732.2	Double, Clear	SE	1.5	5.0	8.0	42.75	0.83	285.5
				Double, Clear	E	4.0	8.0	16.0	42.06	0.73	488.3
				Double, Clear	SE	7.5	8.0	32.0	42.75	0.51	693.0
				Double, Clear	S	12.0	8.5	10.0	35.87	0.48	171.8
				Double, Clear	SE	11.5	8.0	42.0	42.75	0.44	786.5
				Double, Clear	SE	11.5	1.5	7.0	42.75	0.38	113.6
				Double, Clear	SE	1.5	6.0	16.0	42.75	0.88	604.3
				Double, Clear	SW	1.5	11.0	6.0	40.16	0.99	237.5
				Double, Clear	NW	1.5	8.0	32.0	25.97	0.96	800.7
				Double, Clear	NW	7.5	8.0	64.0	25.97	0.65	1079.8
				Double, Clear	NW	7.5	8.5	15.6	25.97	0.66	266.4
				Double, Clear	NW	7.5	2.0	6.2	25.97	0.52	83.3
				Double, Clear	SE	1.5	8.0	15.0	42.75	0.95	606.0
				Double, Clear	NW	1.5	8.0	45.0	25.97	0.96	1125.9
				As-Built Total:		314.8			7342.5		
WALL TYPES Area X BSPM = Points				Type	R-Value		Area X SPM = Points				
Adjacent	0.0	0.00	0.0	Frame, Wood, Exterior	13.0		1628.0	1.50		2442.0	
Exterior	1968.0	1.70	3345.6	Frame, Wood, Exterior	13.0		340.0	1.50		510.0	
Base Total: 1968.0 3345.6				As-Built Total:		1968.0			2952.0		
DOOR TYPES Area X BSPM = Points				Type	Area X SPM = Points						
Adjacent	46.0	2.40	110.4	Exterior Insulated			18.0	4.10		73.8	
Exterior	38.0	6.10	231.8	Exterior Insulated			20.0	4.10		82.0	
				Adjacent Insulated			20.0	1.60		32.0	
				Adjacent Insulated			26.0	1.60		41.6	
Base Total: 84.0 342.2				As-Built Total:		84.0			229.4		
CEILING TYPES Area X BSPM = Points				Type	R-Value		Area X SPM X SCM = Points				
Under Attic	1885.0	1.73	3261.1	Under Attic	30.0		2607.0	1.73 X 1.00		4510.1	
Base Total: 1885.0 3261.1				As-Built Total:		2607.0			4510.1		
FLOOR TYPES Area X BSPM = Points				Type	R-Value		Area X SPM = Points				
Slab	201.0(p)	-37.0	-7437.0	Slab-On-Grade Edge Insulation	0.0		201.0(p)	-41.20		-8281.2	
Raised	0.0	0.00	0.0								
Base Total: -7437.0				As-Built Total:		201.0			-8281.2		

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT					
INFILTRATION Area X BSPM = Points				Area X SPM = Points					
2698.0 10.21 27546.6				2698.0 10.21 27546.6					
Summer Base Points: 36790.7				Summer As-Built Points: 34299.4					
Total Summer Points	X	System Multiplier	= Cooling Points	Total Component	X	Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier = Cooling Points
36790.7		0.4266	15694.9	^{34299.4} 34299.4		^{1.000} 1.00	^(1.090 x 1.147 x 1.00) 1.250	^{0.310} 0.310	^{1.000} 1.000 ^{13305.1} 13305.1

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt		Area X WPM X WOF = Points				
.18	2698.0	12.74	6187.1	Double, Clear	SE	1.5	5.0	8.0	14.71	1.14	134.3
				Double, Clear	E	4.0	8.0	16.0	18.79	1.12	336.7
				Double, Clear	SE	7.5	8.0	32.0	14.71	1.88	883.5
				Double, Clear	S	12.0	8.5	10.0	13.30	3.21	426.7
				Double, Clear	SE	11.5	8.0	42.0	14.71	2.25	1389.6
				Double, Clear	SE	11.5	1.5	7.0	14.71	2.65	272.8
				Double, Clear	SE	1.5	6.0	16.0	14.71	1.10	257.9
				Double, Clear	SW	1.5	11.0	6.0	16.74	1.01	101.5
				Double, Clear	NW	1.5	8.0	32.0	24.30	1.00	778.1
				Double, Clear	NW	7.5	8.0	64.0	24.30	1.02	1592.0
				Double, Clear	NW	7.5	8.5	15.6	24.30	1.02	386.6
				Double, Clear	NW	7.5	2.0	6.2	24.30	1.04	156.6
				Double, Clear	SE	1.5	8.0	15.0	14.71	1.05	231.4
				Double, Clear	NW	1.5	8.0	45.0	24.30	1.00	1094.1
				As-Built Total:		314.8			8041.9		
WALL TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Adjacent	0.0	0.00	0.0	Frame, Wood, Exterior	13.0		1628.0	3.40		5535.2	
Exterior	1968.0	3.70	7281.6	Frame, Wood, Exterior	13.0		340.0	3.40		1156.0	
Base Total:				As-Built Total:		1968.0			6691.2		
DOOR TYPES Area X BWPM = Points				Type	Area X WPM = Points						
Adjacent	46.0	11.50	529.0	Exterior Insulated			18.0	8.40		151.2	
Exterior	38.0	12.30	467.4	Exterior Insulated			20.0	8.40		168.0	
				Adjacent Insulated			20.0	8.00		160.0	
				Adjacent Insulated			26.0	8.00		208.0	
Base Total:				As-Built Total:		84.0			687.2		
CEILING TYPES Area X BWPM = Points				Type	R-Value		Area X WPM X WCM = Points				
Under Attic	1885.0	2.05	3864.3	Under Attic	30.0		2607.0	2.05 X 1.00		5344.4	
Base Total:				As-Built Total:		2607.0			5344.4		
FLOOR TYPES Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Slab	201.0(p)	8.9	1788.9	Slab-On-Grade Edge Insulation	0.0		201.0(p)	18.80		3778.8	
Raised	0.0	0.00	0.0								
Base Total:				As-Built Total:		201.0			3778.8		

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT					
INFILTRATION Area X BWPM = Points				Area X WPM = Points					
2698.0 -0.59 -1591.8				2698.0 -0.59 -1591.8					
Winter Base Points: 18526.4				Winter As-Built Points: 22951.6					
Total Winter Points	X	System Multiplier	= Heating Points	Total Component	X	Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier = Heating Points
18526.4		0.6274	11623.5	22951.6	1.000	(1.069 x 1.169 x 1.00)	0.487	1.000	13972.1
				22951.6	1.00	1.250	0.487	1.000	13972.1

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT					
WATER HEATING									
Number of Bedrooms	X	Multiplier	= Total	Tank Volume	EF	Number of Bedrooms	X	Tank X Ratio	Multiplier X Credit = Total Multiplier
5		2746.00	13730.0	40.0	0.89	5		1.00	2715.15
				As-Built Total:					13575.7

CODE COMPLIANCE STATUS							
BASE				AS-BUILT			
Cooling Points	+	Heating Points	= Total Points	Cooling Points	+	Heating Points	= Total Points
15695		11623	41048	13305		13972	40853

PASS

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

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

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 82.6

The higher the score, the more efficient the home.

....

1. New construction or existing	New	___	12. Cooling systems	
2. Single family or multi-family	Single family	___	a. Central Unit	Cap: 82.0 kBtu/hr
3. Number of units, if multi-family	1	___		SEER: 11.00
4. Number of Bedrooms	5	___	b. N/A	___
5. Is this a worst case?	Yes	___	c. N/A	___
6. Conditioned floor area (ft ²)	2698 ft ²	___		___
7. Glass area & type	Single Pane	Double Pane	13. Heating systems	
a. Clear glass, default U-factor	0.0 ft ²	314.8 ft ²	a. Electric Heat Pump	Cap: 82.0 kBtu/hr
b. Default tint, default U-factor	0.0 ft ²	0.0 ft ²		HSPF: 7.00
c. Labeled U-factor or SHGC	0.0 ft ²	0.0 ft ²	b. N/A	___
8. Floor types			c. N/A	___
a. Slab-On-Grade Edge Insulation	R=0.0, 201.0(p) ft	___		___
b. N/A	___	___	14. Hot water systems	
c. N/A	___	___	a. Electric Resistance	Cap: 40.0 gallons
9. Wall types				EF: 0.89
a. Frame, Wood, Exterior	R=13.0, 1628.0 ft ²	___	b. N/A	___
b. Frame, Wood, Exterior	R=13.0, 340.0 ft ²	___	c. Conservation credits	___
c. N/A	___	___	(HR-Heat recovery, Solar	___
d. N/A	___	___	DHP-Dedicated heat pump)	___
e. N/A	___	___	15. HVAC credits	___
10. Ceiling types			(CF-Ceiling fan, CV-Cross ventilation,	___
a. Under Attic	R=30.0, 2607.0 ft ²	___	HF-Whole house fan,	___
b. N/A	___	___	PT-Programmable Thermostat,	___
c. N/A	___	___	MZ-C-Multizone cooling,	___
11. Ducts			MZ-H-Multizone heating)	___
a. Sup: Unc. Ret: Unc. AH: Garage	Sup. R=6.0, 260.0 ft	___		___
b. N/A	___	___		___

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

Builder Signature: _____

Date: _____

Address of New Home: _____

City/FL Zip: _____



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

EnergyGauge® (Version: FLR2PB v3.4)

New Construction Subterranean Termite Soil Treatment Record

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

This form is completed by the licensed Pest Control Company

22/29

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

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

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

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

Section 1: General Information (Treating Company Information)

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

Section 2: Builder Information

Company Name Blaine Hudson Phone No. _____

Section 3: Property Information

2445 E Horizon Blvd Lake City, FL

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

Type of Construction (More than one box may be checked) ☒ Slab ☐ Basement ☐ Crawl ☐ Other _____

Approximate Depth of Footing: Outside 12 Inside 24 Type of Fill Dirt

Section 4: Treatment Information

Date(s) of Treatment(s) 8-18-04

Brand Name of Product(s) Used Sorbothane

EPA Registration No. 70907-7-53883

Approximate Final Mix Solution % 0.5%

Approximate Size of Treatment Area: Sq. ft. 2687 Linear ft. 238 Linear ft. of Masonry Voids 238

Approximate Total Gallons of Solution Applied 546

Was treatment completed on exterior? ☐ Yes ☒ No

Service Agreement Available? ☒ Yes ☐ No upon completion

Note: Some state laws require service agreements to be issued. This form does not preempt state law.

Attachments (List) _____

Comments _____

Name of Applicator(s) Steve Brannon

Certification No. (if required by State law) JF104376

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

Authorized Signature [Signature] Date 8-18-04

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

COLUMBIA COUNTY OFFICE OF THE SHERIFF

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 22-4S-17-08679-006

Building permit No. 000022129

Use Classification SFD, UTILITY

Fire: 39.69

Permit Holder WILLIAM SCOTT CONSTRUCTION

Waste: 85.75

Owner of Building BLAINE & HOLLY HUDSON

Total: 125.44

Location: 244 SE HORIZON GLEN, LAKE CITY

Date: 02/10/2005



[Signature]

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)