

DATE 03/05/2003

Columbia County
Building Permit / Application

PERMIT

000020477

This Permit Expires One Year From Date of Issue

New Resident

APPLICANT DONALD HEMBREE PHONE 755-0556
ADDRESS 402 N. BRADY CIRCLE LAKE CITY FL 32055
OWNER SAME AS APPLICANT PHONE
ADDRESS FL
CONTRACTOR JACKIE GIBBS PHONE
LOCATION OF PROPERTY 41N, TL ON SUWANNEE VALLEY ROAD, TR ON EVERETT, TR ON LONNIE, TR ON BELFORD CT, 2ND ON LEFT
TYPE DEVELOPMENT MH/UTILITY ESTIMATED COST OF CONSTRUCTION .00
FLOOR AREA TOTAL AREA HEIGHT .00 STORIES WALLS
FOUNDATION ROOF (Type & Pitch) FLOOR
LAND USE & ZONING ESA-2 MAX. HEIGHT
MINIMUM SET BACK: STREET-FRONT / SIDE 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE AE CERT. DATE DEV. PERMIT 2303007

LEGAL DESCRIPTION

PARCEL ID 20-2S-16-01657-020 SUBDIVISION DAVIS
BLOCK LOT 20 UNIT TOTAL ACRES

I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction and that all foregoing information is accurate and all work will be done in compliance with all applicable laws regulating construction and zoning.

EXISTING IH0000214
Driveway Connection Culvert Waiver Contractor's License Number Applicant/Owner/Contractor
01-0431-N GT RK
Septic Tank Number LU & Zoning checked by Approved for Issuance

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 framing
date/app. by date/app. by date/app. by
Rough-in plumbing above slab and below wood floor
date/app. by
Electrical rough-in Heat and Air Duct Peri. beam
date/app. by date/app. by date/app. by
Permanent power Final Pool
date/app. by date/app. by date/app. by

COMMENTS: FIRE, 39.69, WASTE, 106.75, TOTAL 281.44, DP \$10, FINISHED FLOOR REQ

OTHER TYPES OF INSPECTIONS

Culvert M/H tie downs, blocking, electricity and plumbing
date/app. by date/app. by
Utility Pole Pump pole Reconnection
date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$.00 ZONING CERT. FEE \$ 25.00 Certification Fee \$.00 Surcharge \$.00
MISC. FEES \$ 100.00 CULVERT FEE \$ TOTAL PERMIT FEE \$ 125.00 + 10.00 = 135.00
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 INCONVENIENCE, PHONE 758-1008. THIS PERMIT IS NOT VALID UNLESS THE WORK AUTHORIZED BY IT IS COMMENCED WITHIN 6 MONTHS AFTER ISSUANCE.

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

PK
OK
3-4-03

ALL M/H APPLICATIONS MUST HAVE A COMPLETED BUILDING PERMIT APPLICATION ATTACHED

PREMIT APPLICATION/MANUFACTURED HOME INSTALLATION

20477

Applicant Sackie Gibbs
Address Rt 14 Box 346C
Lake City FL.

Permit # _____
Owner Name Hembree Donald
Address _____

Name of Licensed Dealer/Installer Sackie Gibbs
License Number TH 0000214 Installation Decal # 189635
Manufacturers Name GENERAL

Roof Zone DP51 Wind Zone 11
Number of Sections 2 Width 32 Length 60 Year 2020 Serial # GMAA
2280027268A

Installation Standard Used (Check One)
MANUFACTURERS MANUAL _____ 15C-1 ☒

SITE PREPARATION :

Debris and Organic Removal ☒ _____ Compacted Fill _____
Water Drainage: Natural ☒ Swale _____ Pad _____ Other _____

SUPPLY A FOUNDATION PLAN DRAWN TO SCALE

See Foundation Plan Example:

Anchors

1. Use manufactures set-up manual if available
2. If not available use the following;
 - a. Frame ties shall be a maximum of 5' 4" apart
 - b. Over the roof ties when required a 60ft. home or less shall have 3.61 ft. or above shall have four when required.

Minimum Permitting Requirements : A building permit by the local building authority must be obtained prior to the installation of any new or used mobile/manufactured home. The building permit application shall include, but not limited to a scale drawing of all pier block locations and foundation or footer dimensions and the soil load bearing capacity at the installation site. The soil load bearing capacity can be determined by a penetrometer test performed by a licensed installer, a general soil load bearing capacity declaration by a local building official or a test performed by a geotechnical testing company. When the soil load bearing capacity is not known, pier placement shall be based on soil load bearing capacity of 1,000 psf. (See example of pocket penetrometer test)

3/04/03
Jason Libby

POCKET PENETROMETER TEST

1500
X

1500
X

1500
X

1. Test the perimeter of the home at six (6) locations
2. Take the reading at the depth of the footer
3. Using 500 lb. increment, take the lowest reading and round down to that increment

X 1500

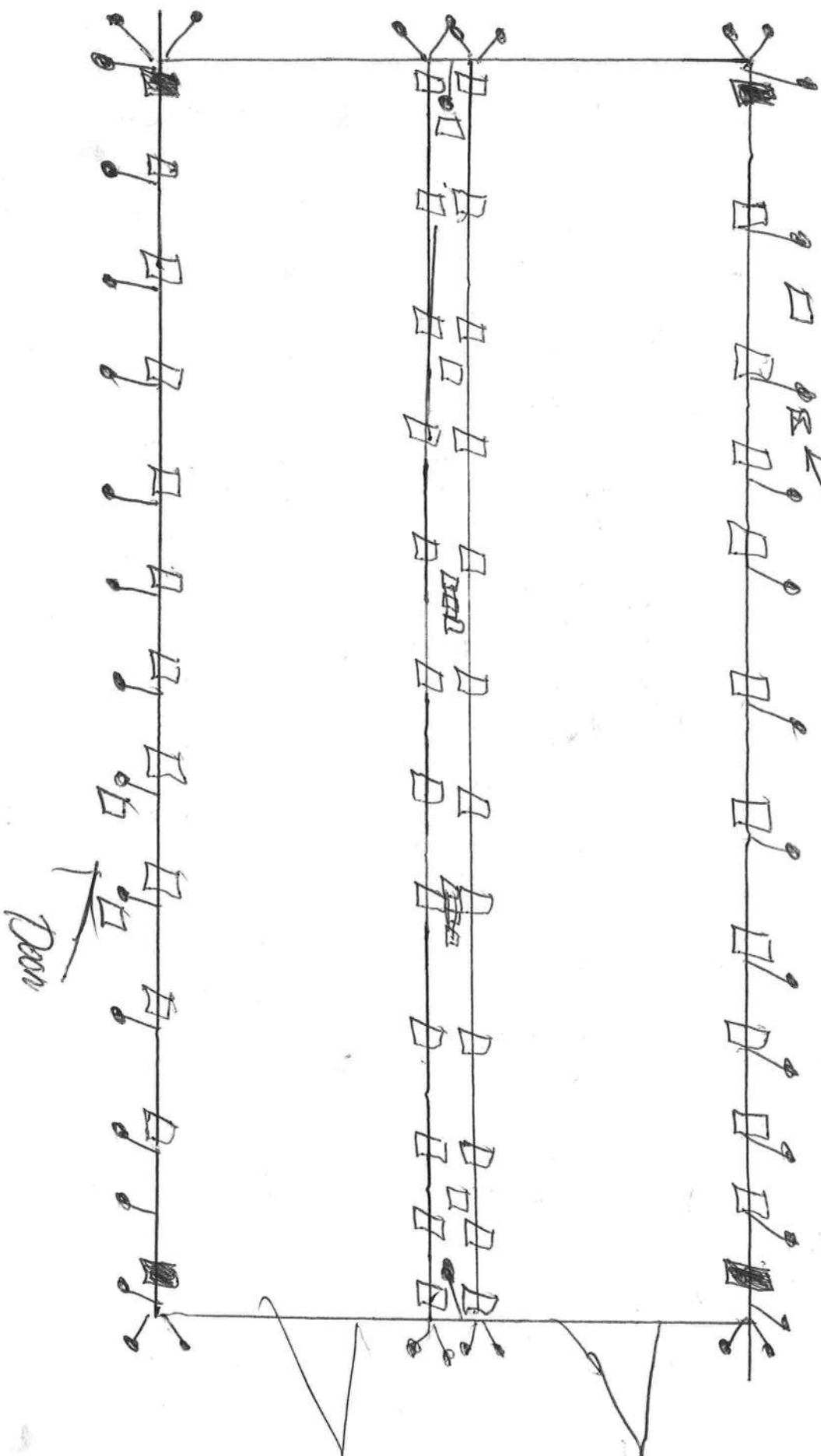
X 1500

X 1500

32X60

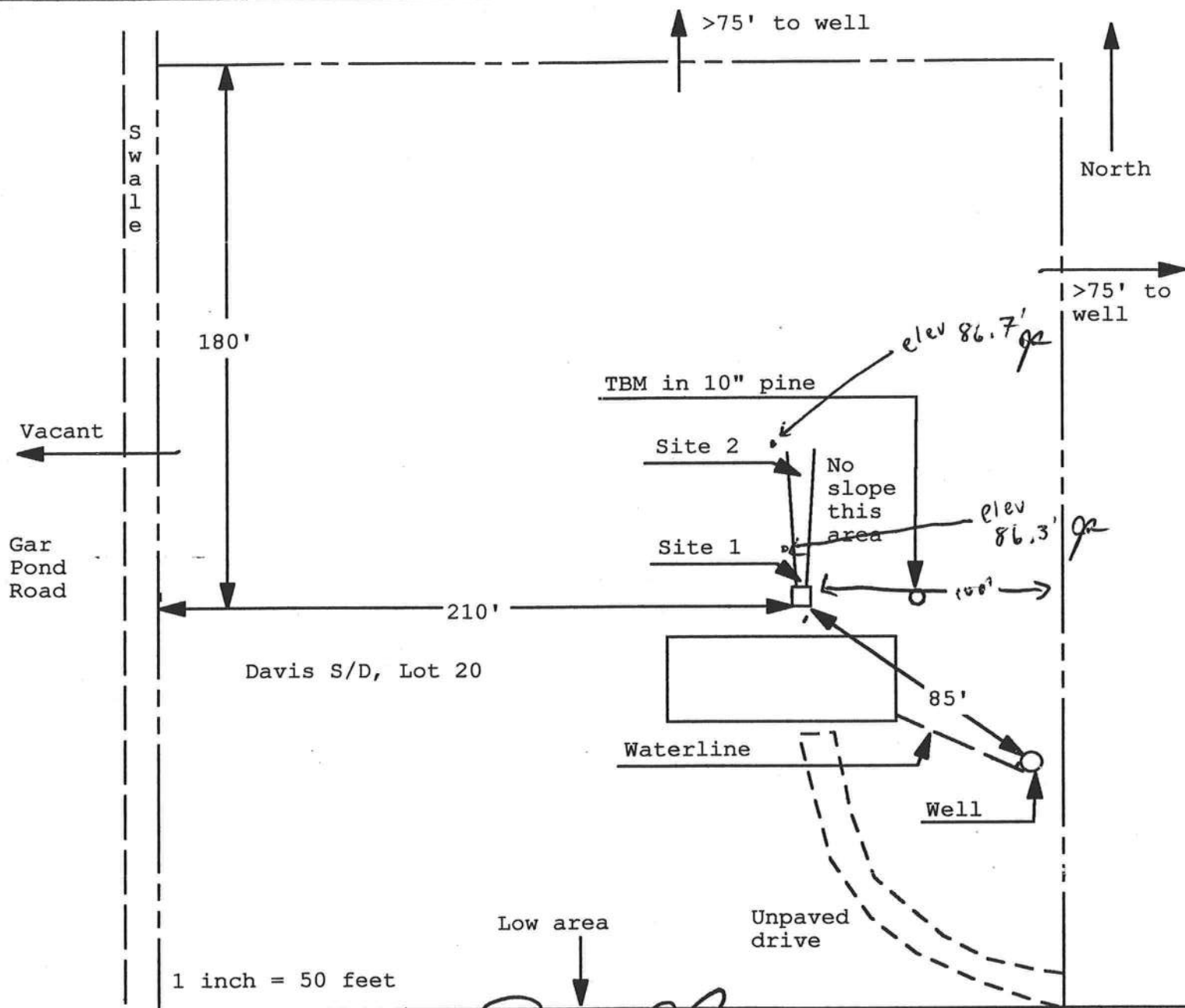
- 4" Tare Conduits Double blocked
! - Anchors on 5' 4" Center using 4" at 280 LB force
□ - Blocking on 5' Center using 26X30 ABS pnds

Door



**Application for Onsite Sewage Disposal System
Construction Permit. Part II Site Plan**
Permit Application Number: DI-04317N

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH UNIT



Site Plan Submitted By Paul Lep Date 5/9/01
Plan Approved Not Approved Date 5/9/01

By Paul Lep / Jh Sweeney ES1 CPHU

Notes: _____

Donald Hembree

CAM112M01 S CamaUSA Appraisal System
 3/05/2003 9:14 Legal Description Maintenance
 Year T Property Sel
 2003 R 20-2S-16-01657-020
 LOT 20 DAVIS S/D
 HEMBREE DONALD K & MARY SUE

Columbia County
 9828 Land 001 *
 AG 000
 Bldg 000
 Xfea 000
 9828 TOTAL B

1	LOT 20 DAVIS S/D. ORB 342-349. 777-885. 924-937. 947-1767. . .	2
3	952-851. 961-50. 971-635.	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

Mnt 1/08/2003 KYLIE

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

ESA-2
 Flood AE

APPLICATION FOR DEVELOPMENT PERMIT

PERMIT NO. 7-023-03-007
(COUNTY NO. & SEQUENCE)DATE: 3-5-03APPLICANT: Donald HembreeADDRESS: 402 N. Brady CircleTELEPHONE: (386) 755-0556OWNER: SameADDRESS: SameTELEPHONE: —NEW SUBDIVISION NO Davis S/D (YES/NO)Mark Di'sosway
IF YES, RECORD THE ENGINEER'S
REGISTRATION NO. P.E. NO. 05391Lot 20
TRS 20-25-16-01657-020SUBDIVISION Davis LOT/BLOCK: 20DU Mobile Home WORK —RIVER: — RIVER MILE —PLAN — (YES/NO) WELL PERMIT NO. —SUR-ELEVATION 85.4 SANITARY PERMIT NO. 01-0431-NSURVEYOR NO. 53915 BUILDING PERMIT NO. 20477OFFICIAL 100-YEAR ELEVATION 88' MSL (SRWMD)REQUIRED LOWEST HABITABLE FLOOR ELEVATION 89' MSL (SRWMD)PERMIT APPROVED J. J. [Signature] 3-5-03
ADMINISTRATOR SIGNATURE DATEEXPIRATION DATE OF PERMIT 3-5-04VIOLATIONS: — FINAL INSPECTION DATE: —COMMENTS: Waiting on finished floor
Have 1 ft rise letter on file

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires July 31, 2002

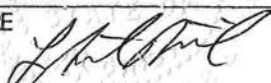
ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use	
BUILDING OWNER'S NAME Donald K. & Mary Sue Hembree			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 265 Belfry Court			Company NAIC Number	
CITY White Springs	STATE FL	ZIP CODE 32096		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 20 in "Davis Subdivision" Plat Book 4, Pages 11 - 11A				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential				
LATITUDE/LONGITUDE (OPTIONAL) (##° - ##' - ###" or ##.####")		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 120070		B2. COUNTY NAME Columbia		B3. STATE FL	
B4. MAP AND PANEL NUMBER 0105	B5. SUFFIX B	B6. FIRM INDEX DATE 6 Jan 1988	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 88 ft
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input checked="" type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe):					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input 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					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)	
C1. Building elevations are based on: <input type="checkbox"/> Construction Drawings* <input type="checkbox"/> Building Under Construction* <input checked="" type="checkbox"/> Finished Construction	
*A new Elevation Certificate will be required when construction of the building is complete.	
C2. Building Diagram Number <u>5</u> (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)	
C3. 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 C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.	
Datum _____ Conversion/Comments	
Elevation reference mark used _____ Does the elevation reference mark used appear on the FIRM? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<input type="checkbox"/> a) Top of bottom floor (including basement or enclosure)	89. 0 ft.(m)
<input type="checkbox"/> b) Top of next higher floor	_____ ft.(m)
<input type="checkbox"/> c) Bottom of lowest horizontal structural member (V zones only)	_____ ft.(m)
<input type="checkbox"/> d) Attached garage (top of slab)	_____ ft.(m)
<input type="checkbox"/> e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)	_____ ft.(m)
<input type="checkbox"/> f) Lowest adjacent (finished) grade (LAG)	84. 84 ft.(m)
<input type="checkbox"/> g) Highest adjacent (finished) grade (HAG)	85. 19 ft.(m)
<input type="checkbox"/> h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade	
<input type="checkbox"/> i) Total area of all permanent openings (flood vents) in C3.h _____ sq. in. (sq. cm)	

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 in Sections A, B, and C 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.			
CERTIFIER'S NAME	L. Scott Britt	LICENSE NUMBER	P.S.M. #5757
TITLE	Professional Surveyor and Mapper	COMPANY NAME	Britt Surveying
ADDRESS	830 W. Duval Street	CITY	Lake City
		STATE	FL
		ZIP CODE	32055
SIGNATURE		DATE	03/25/03
		TELEPHONE	(386) 752-7163
			L-13607

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.			Policy Number
CITY	STATE	ZIP CODE	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

There is a mobile home on the property at this time.

L13607

☐ Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed -- see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. For 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, C (Items C3.h and C3.i only), 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, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS CITY STATE ZIP CODE

SIGNATURE DATE TELEPHONE

COMMENTS

☐ Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

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

G1. ☐ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local 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
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G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

_____. ft.(m)

Datum:

G9. BFE or (in Zone AO) depth of flooding at the building site is:

_____. ft.(m)

Datum:

LOCAL OFFICIAL'S NAME TITLE

COMMUNITY NAME TELEPHONE

SIGNATURE DATE

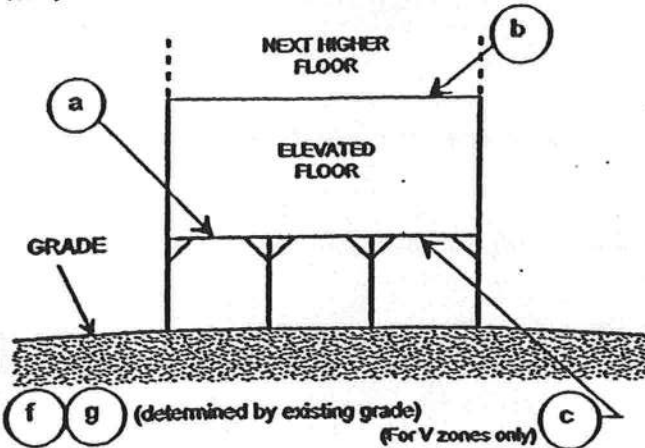
COMMENTS

☐ Check here if attachments

DIAGRAM 5

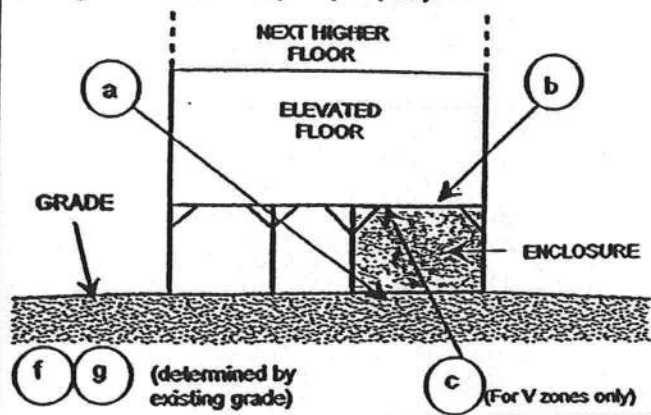
All buildings elevated on piers, posts, piles, columns, or parallel shear walls. No obstructions below the elevated floor.

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**

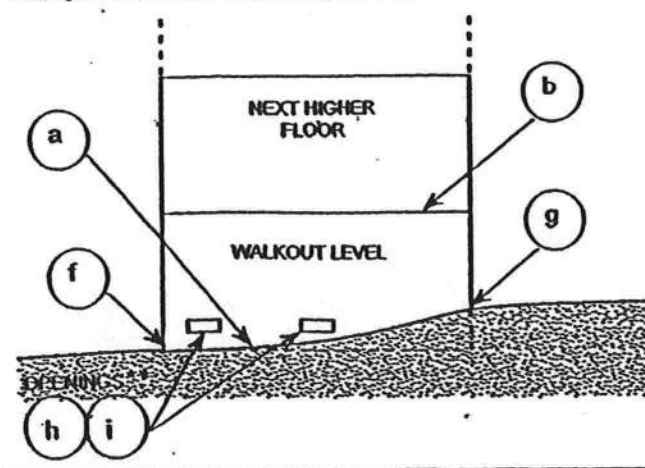
All buildings elevated on piers, posts, piles, columns, or parallel shear walls with full or partial enclosure below the elevated floor.

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 openings in Section C, Building Elevation Information (Survey Required).

**DIAGRAM 7**

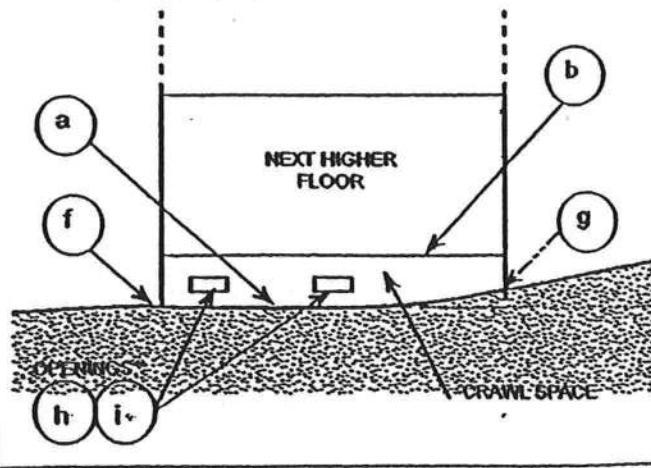
All buildings elevated on full-story foundation walls with a partially or fully enclosed area below the elevated floor. This includes walkout levels, where at least one side is at or above grade. The principal use of this building is located in the elevated floors of the building.

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 openings in Section C, Building Elevation Information (Survey Required).

**DIAGRAM 8**

All buildings elevated on a crawl space with the floor of the crawl space at or above grade on at least one side.

Distinguishing Feature – For all zones, the area below the first floor is enclosed by solid or partial perimeter walls. In all A zones, the crawl space is with or without openings^{***} present in the walls of the crawl space. Indicate information about the openings in Section C, Building Elevation Information (Survey Required).



An "opening" (flood vent) is defined as a permanent opening in a wall 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 crawl spaces with a total net area of not less than one square inch for every square foot of area enclosed. Each opening must be on different sides of the enclosed area. If a building has more than one enclosed area, each area must have openings on exterior walls to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the grade underneath the flood vents. Alternatively, you may submit a certification by a registered professional engineer or architect that the design 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.

One Foot Rise Analysis and Certification, 100 Year Base Flood

DONALD K. AND MARY SUE HEMBREE RESIDENCE, Lot 20, Davis Subdivision, Columbia County, FL

- ☐ PROPERTY DESCRIPTION: Lot 20, Davis Subdivision, as recorded in plat book 4, page 11 and 11A of the public records of Columbia County, Florida.
- ☐ OWNER: Donald K. and Mary Sue Hembree
- ☐ CONTRACTOR: Gibbs, Mover
- ☐ PROJECT: A double wide mobile home on 16"x16" CMU piers on 4 loads of fill (approximately 12 yd³ / load).
- ☐ BASE FLOOD ELEVATION: 88' Mark Duren, Land Surveyor, FL #4708, Dwg. No. 02-716, Drawn 16Dec2002, Based on FEMA Flood Insurance Rate Map, Dated 06Jan1988, Community Panel No. 120070 0105B.)
- ☐ FLOOD ZONE: AE
- ☐ BASIN AREA AT BASE FLOOD ELEVATION: At least 1280 Acres (Calculated from NGS topographic flood plain data.)
- ☐ PROPOSED BUILDING VOLUME BELOW FLOODPLAIN: (Piers + Fill = Total) 48 * 16" * 16" * 3' + 4 * 12yd³ = 7236 ft².
- ☐ EXISTING GRADE ELEVATION AT BUILDING LOCATION: 85.4' per grade elevation at mobile home site location shown on survey, Mark Duren, Land Surveyor, FL #4708, Dwg. No. 02-716, Drawn 16Dec2002.
- ☐ CALCULATIONS: The project only requires volume calculations in this area since it is not a flowing or riverine area.

Floodplain volume removed = 7236 ft³

Floodplain level increase = (7236ft³) / 43560 ft²/acre / 1280 acres = 0.00013 ft

CERTIFICATION:

I hereby certify that construction of DONALD K. AND MARY SUE HEMBREE RESIDENCE, Lot 20, Davis Subdivision, Columbia County, FL will increase flood elevations less than one foot at the project location, to the best of my knowledge.

Mark Disosway
05 FEB 03

Mark Disosway, PE



Flood Elevation Information Report

To John Sweeney

Date: 05/30/2001

**SUWANNEE
RIVER
WATER
MANAGEMENT
DISTRICT**

9225 CR 49
LIVE OAK, FLORIDA 32060
TELEPHONE: (904)362-1001
TELEPHONE: 800-226-1066
FAX (904) 362-1056

As a service to the public, the Suwannee River Water Management District (District) is providing information on flooding along particular rivers within the District. The river mile location and flood elevations are based upon the location description that was provided to the District. This information should not be used to make any final determinations regarding flood insurance and/or building requirements. It is provided solely as an assistance for local county and/or city building departments to make those decisions. Bench mark elevations and topographical surveys are the only means of providing actual flood elevation data for a specific lot along a river.

Flood information is being provided for the following legal description:

County: Columbia River (nearest) Suwannee
Section: 16 Township: 02-S Range: 20-E Quarter Section: _____
Subdivision: Davis Subdivision
Unit: _____ Lot(s): 21 Block: _____

FLOOD INFORMATION

NOTE: All elevations are in feet above mean sea level (MSL)

Flood Elevation Information for the Suwannee River
River Mile Location Number: 171
Elevation of the FLOOD OF RECORD: 88 (MSL)
Elevation of the 100-YEAR FLOOD: 88 (MSL)
Elevation of the 10-YEAR FLOOD: 81 (MSL)
Elevation of the 2-YEAR FLOOD: 70 (MSL)

It was determined from the information provided that this property (is) (is not)
(is partially) located in a regulatory floodway zone.

Gloria Hancock
District Staff

This flooding information is based upon the Federal Emergency Management Agency (FEMA) study and is a matter of public record. The FEMA flooding records have also been provided to the local building department offices.

cc: Flood Information

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION

For Insurance Company Use:

Policy Number

Company NAIC Number

BUILDING OWNER'S NAME

Sandra Perry

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

CITY

STATE

ZIP CODE

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

Lot 20 in Davis Subdivision

BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use Comments section if necessary.)

LATITUDE/LONGITUDE (OPTIONAL)

##-##-## or #####

HORIZONTAL DATUM:

☐ NAD 1927 ☐ NAD 1983SOURCE: ☐ GPS (Type):☐ USGS Quad Map ☐ Other:

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

FIRM COMMUNITY NAME & COMMUNITY NUMBER

120070

B2. COUNTY NAME

Columbia

B3. STATE

FL

B4. MAP AND PANEL NUMBER

0105

B5. SUFFIX

B

B6. FIRM INDEX DATE

6, Jan. 1988

B7. FIRM PANEL EFFECTIVE/REVISED DATE

B8. FLOOD ZONE(S)

AE

B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)

88.00 Feet

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

☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other (Describe):Indicate the elevation datum used for the BFE in B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe):Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
Designation Date:

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

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.

Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

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 C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum Conversion/Comments

Elevation reference mark used Does the elevation reference mark used appear on the FIRM? ☐ Yes ☒ No☐ a) Top of bottom floor (including basement or enclosure) ft.(m)☐ b) Top of next higher floor ft.(m)☐ c) Bottom of lowest horizontal structural member (V zones only) ft.(m)☐ d) Attached garage (top of slab) ft.(m)☐ e) Lowest elevation of machinery and/or equipment servicing the building ft.(m)☐ f) Lowest adjacent grade (LAG) ft.(m)☒ g) Highest adjacent grade (HAG) 86.70 ft.(m)☐ h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade☐ i) Total area of all permanent openings (flood vents) in C3h sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

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 in Sections A, B, and C 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.

CERTIFIER'S NAME

L. Scott Britt

LICENSE NUMBER

P. S. M. 5757

E Surveyor and Mapper

COMPANY NAME

Britt Surveying

ADDRESS 1426 W. Duval St.

CITY Lake City

STATE FL

ZIP CODE

32025

NATURE

DATE 05/25/01

TELEPHONE

(904) 752-7163

STATE

ZIP CODE

Company NAIC Number

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

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

MENTS

There is a nail set in a 12" Pine tree with an Elevation of 89.00 Feet.

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

Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting

information for a LOMA or LOMR-F, Section C must be completed.

Building Diagram Number _____ (Select the building diagram most similar to the building for which this certificate is being completed –
pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

Top of the bottom floor (including basement or enclosure) of the building is _____ ft.(m) _____ in.(cm) _____ above or _____ below
check one) the highest adjacent grade.

Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is
_____ ft.(m) _____ in.(cm) above the highest adjacent grade.

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

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.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

SS

CITY

STATE

ZIP CODE

SURE

DATE

TELEPHONE

ENTS

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

Community official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete
A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor,
engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the
elevation data in the Comments area below.)

A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or
Zone AO.

The following information (Items G4-G9) is provided for community floodplain management purposes.

PERMIT NUMBER

G5. DATE PERMIT ISSUED

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY
ISSUED

Permit has been issued for: ☐ New Construction ☐ Substantial Improvement

Elevation of as-built lowest floor (including basement) of the building is:

or (in Zone AO) depth of flooding at the building site is:

_____ ft.(m) Datum: _____

_____ ft.(m) Datum: _____

OFFICIAL'S NAME

TITLE

CITY NAME

TELEPHONE

RE

DATE

ENTS

☐ Check here if attachments

LOCATION SKETCH IN SECTION 20 , TOWNSHIP 2 SOUTH,
RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA.



SCALE: 1" = 100'

SYMBOL LEGEND

■	4"x4" CONCRETE MONUMENT FOUND
□	4"x4" CONCRETE MONUMENT SET
●	IRON PIPE FOUND
○	IRON PIN AND CAP SET
⊕	POWER POLE
▲	WATER METER
⊙	CENTERLINE
*	WELL
⊗	SATELLITE DISH
⊙	TELEPHONE BOX
---E---	ELECTRIC LINES
---X---	WIRE FENCE
---o---	CHAIN LINK FENCE
---a---	WOODEN FENCE

NOTICE:

THIS IS NOT A BOUNDARY SURVEY. THIS IS A LOCATION SKETCH FOR INFORMATION PURPOSES ONLY.

DESCRIPTION:

LOT 20 IN DAVIS SUBDIVISION AS PER PLAT THEREOF RECORDED IN PLAT BOOK 4 PAGES 11 - 11A OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.

SURVEYOR'S NOTES:

1. NO MONUMENTATION LOCATED.
2. BEARINGS ARE BASED ON SAID PLAT OF RECORD.
3. THIS PARCEL IS IN ZONE "AE" AND IS SUBJECT TO FLOODING. A BASE FLOOD ELEVATION IS ESTABLISHED TO BE 88.0 FEET AS PER FLOOD INSURANCE RATE MAP, DATED 6 JAN. 1988 COMMUNITY PANEL NO. 120070 0105 B. HOWEVER, THE FLOOD INSURANCE RATE MAPS ARE SUBJECT TO CHANGE.
4. THE IMPROVEMENTS, IF ANY, INDICATED ON THIS SURVEY DRAWING ARE AS LOCATED ON DATE OF FIELD SURVEY AS SHOWN HEREON.
5. IF THEY EXIST, NO UNDERGROUND ENCROACHMENTS AND/OR UTILITIES WERE LOCATED FOR THIS SURVEY EXCEPT AS SHOWN HEREON.
6. THIS SURVEY WAS COMPLETED WITHOUT THE BENEFIT OF A TITLE COMMITMENT OR A TITLE POLICY.

TOP

RESPONSIBLE CHARGE AND MEETS THE MINIMUM
1 OF PROFESSIONAL SURVEYORS AND MAPPERS
VT TO SECTION 478007, FLORIDA STATUTES.

L. SCOTT BRITT, P.S.M.
CERTIFICATION # 5717

TO SEAL OF A FLORIDA LICENSED SURVEYOR AND
INAL PURPOSES ONLY AND IS NOT VALID.



BRITT SURVEYING

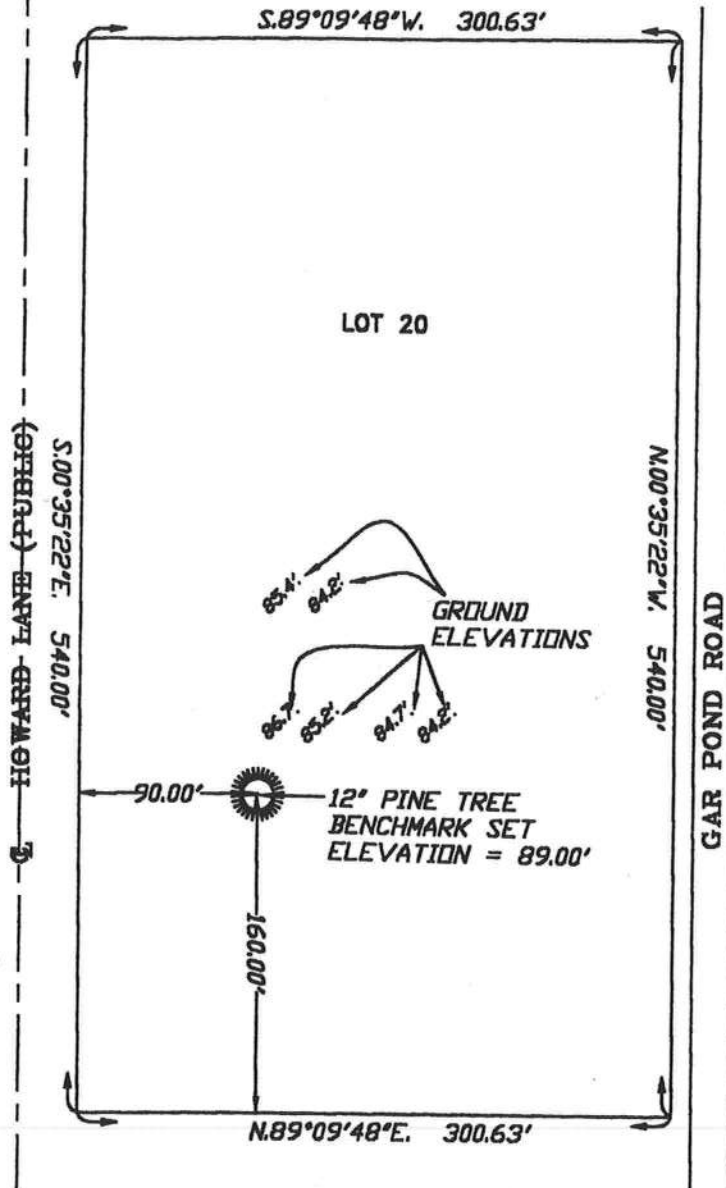
LAND SURVEYORS AND MAPPERS

1426 WEST DUVAL STREET LAKE CITY, FLORIDA 32055

(904)752-7163 FAX (904)752-5573

WORK ORDER # L-11522

LOT 19



LOT 20

LOT 21

CERTIFIED TO:
SANDRA PERRY

FIELD BOOK: 228 PAGE(S): 10

SURVEYOR'S

I HEREBY CERTIFY THAT THIS SURVEY WAS MADE IN
TECHNICAL STANDARDS AS SET FORTH BY THE FLD
IN CHAPTER 61G17-6, FLORIDA ADMINISTRATIVE CODE

05/24/01
FIELD SURVEY DATE

05/25/01
DRAWING DATE

NOTE: UNLESS IT BEARS THE SIGNATURE AND THE ORIGINAL
MAPPER THIS DRAWING, SKETCH, PLAN OR MAP IS FOR