

CA 1076

For Office Use Only Application # 0712-66 Date Received 12-20-07 By LH Permit # 1505/26563  
Zoning Official BLK Date 28.12.07 Flood Zone Appt FEMA Map # N/A Zoning RSF-2  
Land Use Residential Elevation N/A MFE Along Rd River N/A Plans Examiner OK JTH Date 12-21-07  
Comments

☒ NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☒ State Road Info ☐ Parent Parcel # \_\_\_\_\_  
☐ Dev Permit # \_\_\_\_\_ ☐ In Floodway ☒ Letter of Authorization from Contractor  
☐ Unincorporated area ☒ Incorporated area ☐ Town of Fort White ☐ Town of Fort White Compliance letter

Septic Permit No. 07-0961 Leighann Fraser Fax FRASER

Name Authorized Person Signing Permit Mike Roberts Phone \_\_\_\_\_

Address 657 S.W. Catherine Lane Lake City FL 32024

Owners Name Mike Roberts Phone 755-9476

911 Address 657 S.W. Catherine Lane

Contractors Name Glenn J. Hunter Phone 386-752-2707

Address 1330 SW MAIN BLVD LAKE CITY FL 32025

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

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

Architect/Engineer Name & Address M. Dosoosway P.O. Box 868 754-5419

Mortgage Lenders Name & Address N A

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

Property ID Number 24-45-16-0347-112 Estimated Cost of Construction \$2,000.00

Subdivision Name Crosswinds Lot 12 Block \_\_\_\_\_ Unit \_\_\_\_\_ Phase 1

Driving Directions South on SR47, Right on CR242, Right on Arrowhead Terrace, follow road 1 mile, left into Crosswinds Subd. TL Cannon Creek Dr, TL Chesterfield Circle, TR Chesterfield Circle, 1 3rd lot on right.  
Number of Existing Dwellings on Property 0

Construction of House Total Acreage 1/2 Lot Size \_\_\_\_\_

Do you need a ☒ Culvert Permit or ☐ Culvert Waiver or ☐ Have an Existing Drive Total Building Height 18' 2"

Actual Distance of Structure from Property Lines - Front 35' Side 40' Side 20' Rear 115'

Number of Stories 1 Heated Floor Area 1495 Total Floor Area 2137 Roof Pitch 6/12

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.

Spoke with  
Hunter Printing  
12/28/07

# NOTICE OF COMMENCEMENT

Tax Parcel Identification Number 24-45-16-03117-112 County Clerk's Office Stamp or Seal

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.

1. Description of property (legal description): lot 12 Crosswinds S/D Phase 1  
a) Street (job) Address: 833 S.W. Chesterfield Cir 32024
2. General description of improvements: \_\_\_\_\_
3. Owner Information  
a) Name and address: Mike Roberts 657 S.W. Catherine Ln. L.C. Fla  
b) Name and address of fee simple titleholder (if other than owner) \_\_\_\_\_  
c) Interest in property \_\_\_\_\_
4. Contractor Information  
a) Name and address: Glenn J. Hunter, LLC. 1330 SW Main Blvd  
b) Telephone No.: 386-752-2707 Fax No. (Opt.) 386-752-2724
5. Surety Information  
a) Name and address: \_\_\_\_\_  
b) Amount of Bond: \_\_\_\_\_  
c) Telephone No.: \_\_\_\_\_
6. Lender  
a) Name and address: N/A Inst: 200712028167 Date: 12/21/2007 Time: 2:03 PM  
b) Phone No. 12 DC, P. DeWitt Cason, Columbia County Page 1 of 1
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: \_\_\_\_\_  
b) Telephone No.: \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
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. Mike Roberts  
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager  
MIKE ROBERTS  
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 17 day of December, 2007, by:  
MIKE ROBERTS as → (type of authority, e.g. officer, trustee, attorney  
fact) for - NA (name of party on behalf of whom instrument was executed).

Personally Known ☒ OR Produced Identification ☐ Type -

Notary Signature Shiela Darlene Kaemmer Notary Stamp or Seal:



SHIELA DARLENE KAEMMER  
MY COMMISSION # DD 322429  
EXPIRES: June 24, 2008  
Bonded Thru Budget Notary Services

—AND—

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.

Mike Roberts  
Signature of Natural Person Signing (in line #10 above.)

# FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs  
Residential Whole Building Performance Method A

Project Name: <b>mike roberts-1495</b>	Builder: <b>owner</b>
Address:	Permitting Office: <b>COLUMBIA</b>
City, State: ,	Permit Number: <b>26563</b>
Owner:	Jurisdiction Number: <b>221866</b>
Climate Zone: <b>North</b>	

1. New construction or existing <b>New</b> <input type="checkbox"/>	12. Cooling systems
2. Single family or multi-family <b>Single family</b> <input type="checkbox"/>	a. Central Unit <b>Cap: 28.0 kBtu/hr</b>
3. Number of units, if multi-family <b>1</b> <input type="checkbox"/>	<b>SEER: 13.00</b>
4. Number of Bedrooms <b>3</b> <input type="checkbox"/>	b. N/A <input type="checkbox"/>
5. Is this a worst case? <b>Yes</b> <input type="checkbox"/>	c. N/A <input type="checkbox"/>
6. Conditioned floor area (ft²) <b>1495 ft²</b> <input type="checkbox"/>	13. Heating systems
7. Glass type <sup>1</sup> and area: (Label reqd. by 13-104.4.5 if not default)	a. Electric Heat Pump <b>Cap: 30.0 kBtu/hr</b>
a. U-factor: <b>Description Area</b>	<b>HSPF: 8.00</b>
(or Single or Double DEFAULT) 7a. (Dble Default) 146.0 ft² <input type="checkbox"/>	b. N/A <input type="checkbox"/>
b. SHGC:	c. N/A <input type="checkbox"/>
(or Clear or Tint DEFAULT) 7b. (Clear) 146.0 ft² <input type="checkbox"/>	14. Hot water systems
8. Floor types	a. Electric Resistance <b>Cap: 50.0 gallons</b>
a. Slab-On-Grade Edge Insulation <b>R=0.0, 189.0(p) ft</b> <input type="checkbox"/>	<b>EF: 0.90</b>
b. N/A <input type="checkbox"/>	b. N/A <input type="checkbox"/>
c. N/A <input type="checkbox"/>	c. Conservation credits
9. Wall types	(HR-Heat recovery, Solar
a. Frame, Wood, Adjacent <b>R=13.0, 290.0 ft²</b> <input type="checkbox"/>	DHP-Dedicated heat pump)
b. Frame, Wood, Exterior <b>R=13.0, 1100.0 ft²</b> <input type="checkbox"/>	15. HVAC credits
c. N/A <input type="checkbox"/>	(CF-Ceiling fan, CV-Cross ventilation,
d. N/A <input type="checkbox"/>	HF-Whole house fan,
e. N/A <input type="checkbox"/>	PT-Programmable Thermostat,
10. Ceiling types	MZ-C-Multizone cooling,
a. Under Attic <b>R=30.0, 1495.0 ft²</b> <input type="checkbox"/>	MZ-H-Multizone heating)
b. Under Attic <b>R=19.0, 200.0 ft²</b> <input type="checkbox"/>	
c. N/A <input type="checkbox"/>	
11. Ducts	
a. Sup: Unc. Ret: Unc. AH: Garage <b>Sup. R=6.0, 123.0 ft</b> <input type="checkbox"/>	
b. N/A <input type="checkbox"/>	

Glass/Floor Area: 0.10

Total as-built points: 21270

Total base points: 22002

## PASS

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

PREPARED BY: Suncoast Insulators

DATE: 6-20-07

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: \_\_\_\_\_

<sup>1</sup> Predominant glass type. For actual glass type and areas, see Summer & Winter Glass output on pages 2&4.

# SUMMER CALCULATIONS

## Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES .18 X Conditioned X BSPM = Points Floor Area				Overhang Type/SC Omt Len Hgt Area X SPM X SOF = Points							
.18	1495.0	18.59	5003.0	1.Double, Clear	E	2.0	5.0	59.0	42.06	0.80	1977.0
				2.Double, Clear	W	2.0	5.0	77.0	38.52	0.80	2371.0
				3.Double, Clear	S	2.0	5.0	4.0	35.87	0.72	103.0
				4.Double, Clear	N	2.0	5.0	6.0	19.20	0.87	100.0
				As-Built Total: 146.0 4551.0							
WALL TYPES Area X BSPM = Points				Type R-Value Area X SPM = Points							
Adjacent	290.0	0.70	203.0	1. Frame, Wood, Adjacent			13.0	290.0	0.60		174.0
Exterior	1100.0	1.70	1870.0	2. Frame, Wood, Exterior			13.0	1100.0	1.50		1650.0
Base Total: 1390.0 2073.0				As-Built Total: 1390.0 1824.0							
DOOR TYPES Area X BSPM = Points				Type Area X SPM = Points							
Adjacent	18.0	2.40	43.2	1.Exterior Insulated				18.0	4.10		73.8
Exterior	18.0	6.10	109.8	2.Adjacent Insulated				18.0	1.60		28.8
Base Total: 36.0 153.0				As-Built Total: 36.0 102.6							
CEILING TYPES Area X BSPM = Points				Type R-Value Area X SPM X SCM = Points							
Under Attic	1495.0	1.73	2586.4	1. Under Attic			30.0	1495.0	1.73 X 1.00		2586.4
				2. Under Attic			19.0	200.0	2.34 X 1.00		468.0
Base Total: 1495.0 2586.4				As-Built Total: 1695.0 3054.4							
FLOOR TYPES Area X BSPM = Points				Type R-Value Area X SPM = Points							
Slab	189.0(p)	-37.0	-6993.0	1. Slab-On-Grade Edge Insulation			0.0	189.0(p)	-41.20		-7786.8
Raised	0.0	0.00	0.0								
Base Total: -6993.0				As-Built Total: 189.0 -7786.8							
INFILTRATION Area X BSPM = Points				Area X SPM = Points							
	1495.0	10.21	15264.0					1495.0	10.21		15264.0

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

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT						
<b>Summer Base Points: 18086.3</b>				<b>Summer As-Built Points: 17009.1</b>						
Total Summer Points	X System Multiplier	=	Cooling Points	Total Component (System - Points)	X Cap Ratio (DM x DSM x AHU)	X Duct Multiplier (1.09 x 1.147 x 1.00)	X System Multiplier	X Credit Multiplier	=	Cooling Points
18086.3	0.3250		5878.0	<small>(sys 1: Central Unit 28000btuh ,SEER/EFF(13.0) Ducts:Unc(S),Unc(R),Gar(AH),R6.0(INS)</small> 17009      1.00      (1.09 x 1.147 x 1.00)      0.260      1.000      5529.0 <b>17009.1      1.00      1.250      0.260      1.000      5529.0</b>						

# WINTER CALCULATIONS

## Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT							
<b>GLASS TYPES</b>											
.18 X Conditioned X BWPM = Points Floor Area				Overhang Type/SC Omt Len Hgt Area X WPM X WOF = Points							
.18	1495.0	20.17	5428.0	1.Double, Clear	E	2.0	5.0	59.0	18.79	1.08	1201.0
				2.Double, Clear	W	2.0	5.0	77.0	20.73	1.06	1690.0
				3.Double, Clear	S	2.0	5.0	4.0	13.30	1.40	74.0
				4.Double, Clear	N	2.0	5.0	6.0	24.58	1.01	148.0
				<b>As-Built Total:</b> 146.0 3113.0							
<b>WALL TYPES</b> Area X BWPM = Points				Type R-Value Area X WPM = Points							
Adjacent	290.0	3.60	1044.0	1. Frame, Wood, Adjacent			13.0	290.0	3.30		957.0
Exterior	1100.0	3.70	4070.0	2. Frame, Wood, Exterior			13.0	1100.0	3.40		3740.0
<b>Base Total:</b> 1390.0 6114.0				<b>As-Built Total:</b> 1390.0 4697.0							
<b>DOOR TYPES</b> Area X BWPM = Points				Type Area X WPM = Points							
Adjacent	18.0	11.50	207.0	1.Exterior Insulated				18.0	8.40		151.2
Exterior	18.0	12.30	221.4	2.Adjacent Insulated				18.0	8.00		144.0
<b>Base Total:</b> 36.0 428.4				<b>As-Built Total:</b> 36.0 295.2							
<b>CEILING TYPES</b> Area X BWPM = Points				Type R-Value Area X WPM X WCM = Points							
Under Attic	1495.0	2.05	3064.8	1. Under Attic			30.0	1495.0	2.05 X 1.00		3064.8
				2. Under Attic			19.0	200.0	2.70 X 1.00		540.0
<b>Base Total:</b> 1495.0 3064.8				<b>As-Built Total:</b> 1695.0 3604.8							
<b>FLOOR TYPES</b> Area X BWPM = Points				Type R-Value Area X WPM = Points							
Slab	189.0(p)	8.9	1682.1	1. Slab-On-Grade Edge Insulation			0.0	189.0(p)	18.80		3553.2
Raised	0.0	0.00	0.0								
<b>Base Total:</b> 1682.1				<b>As-Built Total:</b> 189.0 3553.2							
<b>INFILTRATION</b> Area X BWPM = Points				Area X WPM = Points							
1495.0 -0.59 -882.0				1495.0 -0.59 -882.0							

# WINTER CALCULATIONS

## Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

BASE				AS-BUILT									
Winter Base Points: 14835.2				Winter As-Built Points: 14381.1									
Total Winter Points	X	System Multiplier	= Heating Points	Total Component (System - Points)	X	Cap Ratio (DM x DSM x AHU)	X	Duct Multiplier	X	System Multiplier	X	Credit Multiplier	= Heating Points
14835.2		0.5540	8218.7	(sys 1: Electric Heat Pump 30000 btuh ,EFF(8.0) Ducts:Unc(S),Unc(R),Gar(AH),R6.0 14381.1 1.000 (1.069 x 1.169 x 1.00) 0.426 1.000 7660.4 14381.1 1.00 1.250 0.426 1.000 7660.4									

**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
3		2635.00	7905.0	50.0	0.90	3		1.00	2693.56	1.00 8080.7
				As-Built Total:						8080.7

**CODE COMPLIANCE STATUS**

BASE					AS-BUILT				
Cooling Points	+	Heating Points	+	Hot Water Points = Total Points	Cooling Points	+	Heating Points	+	Hot Water Points = Total Points
5878		8219		7905 22002	5529		7660		8081 21270

**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 612.1.ABC.3.2. 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\* = 85.2**

**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: 28.0 kBtu/hr
3. Number of units, if multi-family	1	___		SEER: 13.00
4. Number of Bedrooms	3	___	b. N/A	___
5. Is this a worst case?	Yes	___	c. N/A	___
6. Conditioned floor area (ft <sup>2</sup> )	1495 ft <sup>2</sup>	___		___
7. Glass type <sup>1</sup> and area: (Label reqd. by 13-104.4.5 if not default)			13. Heating systems	
a. U-factor:	Description Area		a. Electric Heat Pump	Cap: 30.0 kBtu/hr
(or Single or Double DEFAULT)	7a. (Dble Default) 146.0 ft <sup>2</sup>	___		HSPF: 8.00
b. SHGC:			b. N/A	___
(or Clear or Tint DEFAULT)	7b. (Clear) 146.0 ft <sup>2</sup>	___	c. N/A	___
8. Floor types				___
a. Slab-On-Grade Edge Insulation	R=0.0, 189.0(p) ft	___	14. Hot water systems	
b. N/A		___	a. Electric Resistance	Cap: 50.0 gallons
c. N/A		___		EF: 0.90
9. Wall types			b. N/A	___
a. Frame, Wood, Adjacent	R=13.0, 290.0 ft <sup>2</sup>	___	c. Conservation credits	___
b. Frame, Wood, Exterior	R=13.0, 1100.0 ft <sup>2</sup>	___	(HR-Heat recovery, Solar	___
c. N/A		___	DHP-Dedicated heat pump)	___
d. N/A		___	15. HVAC credits	___
e. N/A		___	(CF-Ceiling fan, CV-Cross ventilation,	
10. Ceiling types			HF-Whole house fan,	
a. Under Attic	R=30.0, 1495.0 ft <sup>2</sup>	___	PT-Programmable Thermostat,	
b. Under Attic	R=19.0, 200.0 ft <sup>2</sup>	___	MZ-C-Multizone cooling,	
c. N/A		___	MZ-H-Multizone heating)	
11. Ducts				
a. Sup: Unc. Ret: Unc. AH: Garage	Sup. R=6.0, 123.0 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: \_\_\_\_\_



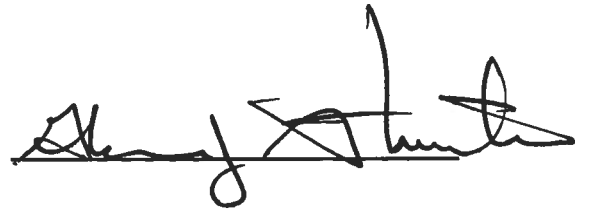
*\*NOTE: The home's estimated energy performance score is only available through the FLA/RES computer program. This is not a Building Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStar<sup>TM</sup> designation), your home may qualify for energy efficiency mortgage (EEM) 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](http://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.*

<sup>1</sup> Predominant glass type. For actual glass type and areas, see Summer & Winter Glass output on pages 2&4.  
EnergyGauge® (Version: FLRCSB v4.5)

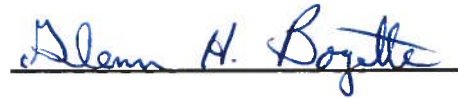
December 21, 2007

To Whom It May Concern:

As general contractor and partner in Glenn J. Hunter, LLC, I give authorization to partner Glenn H. Boyette to sign and obtain the necessary paperwork for all needed permits.



Glenn J. Hunter

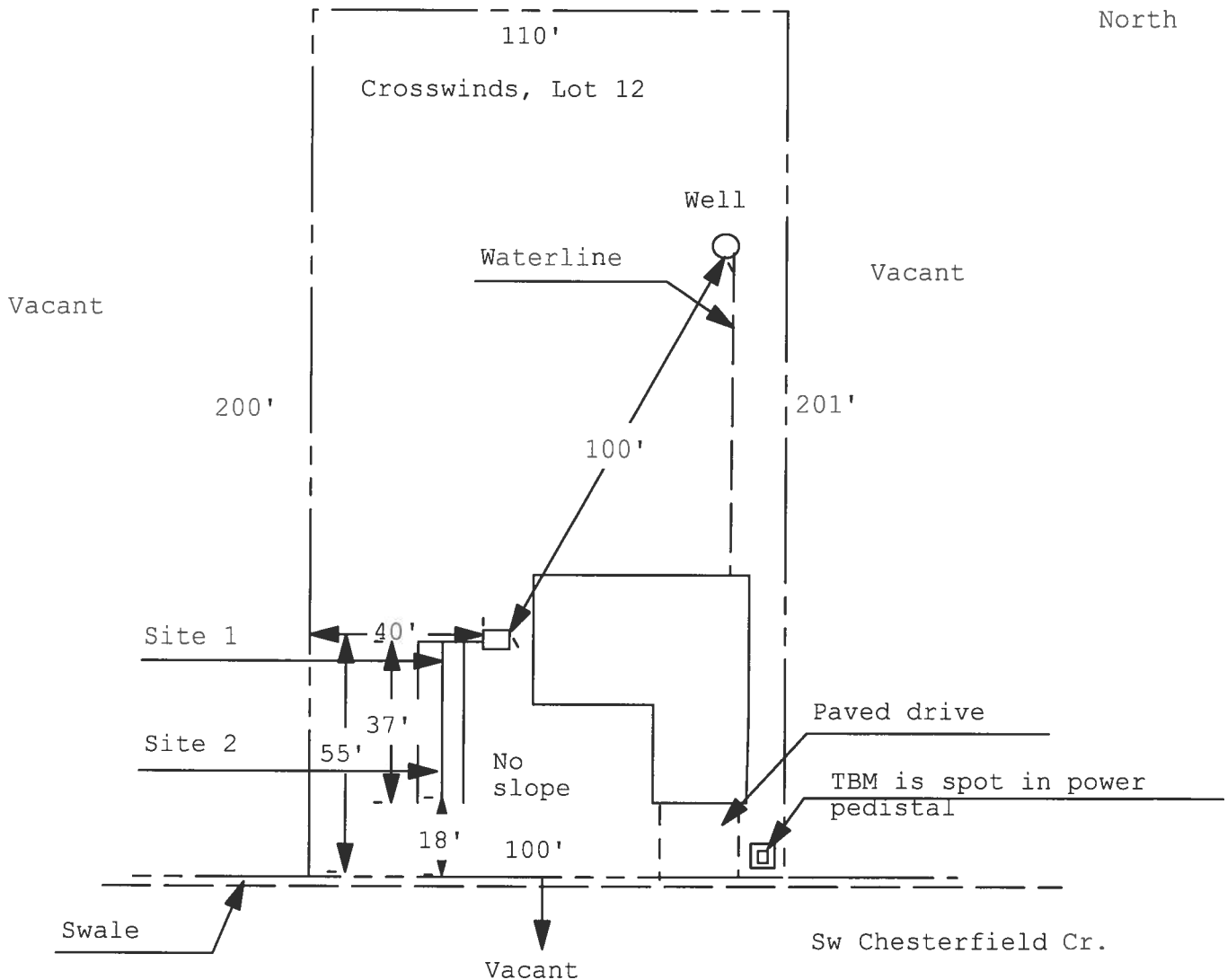


Glenn H. Boyette

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

Vacant

North



1 inch = 40 feet

By Man o Lande Columbia CPHU

Notes: \_\_\_\_\_

PREPARED BY AND RETURN TO:  
TERRY McDAVID  
POST OFFICE BOX 1328  
LAKE CITY, FL 32056-1328

Property Appraiser's  
Parcel Identification No.: R-03117-000

Inst:2007009361 Date:04/25/2007 Time:16:05  
Doc Stamp-Deed : 882.00  
DC, P. DeWitt Cason, Columbia County B:1117 P:1483

File No: 07-156

WARRANTY DEED

THIS INDENTURE, made this 21<sup>st</sup> day of April, 2007 between  
DELTA OMEGA PROPERTIES, INC., a corporation existing under the  
laws of the State of Florida, whose post office address is 3454  
SW CR 242, Lake City, FL 32024, and having its principal place of  
business in the County of Columbia, State of Florida, party of  
the first part, and MICHAEL W. ROBERTS, whose post office address  
is 657 SW Catherine Lane, Lake City, Florida, of the County of  
Columbia, State of Florida, parties of the second part,

WITNESSETH: that the said party of the first part, for and  
in consideration of the sum of Ten Dollars (\$10.00), to it in  
hand paid, the receipt whereof is hereby acknowledged, has  
granted, bargained, sold, aliened, remised, released, conveyed  
and confirmed, and by these presents doth grant, bargain, sell,  
alien, remise, release, convey and confirm unto the said party of  
the second part, and its heirs and assigns forever, all that  
certain parcel of land lying and being in the County of Columbia  
and State of Florida, more particularly described as follows:

Lot 12, 25 and 45, Crosswinds, Phase One, a subdivision  
according to the plat thereof recorded in Plat Book 8, Page  
79-82, public records, Columbia County, Florida.

SUBJECT TO: Restrictions, easements and outstanding  
mineral rights of record, if any, and taxes for the  
current year.

TOGETHER with all the tenements, hereditaments and  
appurtenances, with every privilege, right, title, interest and  
estate, reversion, remainder and easement thereto belong or in  
anywise appertaining:


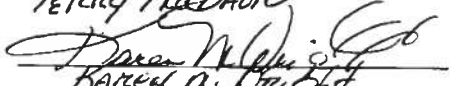
TO HAVE AND TO HOLD the same in fee simple forever.

And the said party of the first part doth covenant with said party of the second part that it is lawfully seized of said premises; that they are free of all encumbrances, and that it has good right and lawful authority to sell the same; and the said party of the first part does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, the party of the first part has caused these presents to be signed in its name by its President, and its corporate seal to be affixed, the day and year above written.

Signed, sealed and delivered  
in our presence:

DELTA OMEGA PROPERTIES, INC.

  
TERRY MCDIVID  
  
KAREN R. WRIGHT  
"Witnesses"

By:

  
James R. Smithey, President

Inst:2007009361 Date:04/25/2007 Time:16:05


Doc Stamp-Deed : 882.00

DC,P,DeWitt Cason,Columbia County B:1117 P:1484

STATE OF FLORIDA  
COUNTY OF COLUMBIA

24 The foregoing instrument was acknowledged before me this day of April, 2007, by James R. Smithey, President of Delta Omega Properties, Inc., a State of Florida corporation, on behalf of the corporation. He is personally known to me and did not take an oath.



  
Notary Public  
My Commission Expires: \_\_\_\_\_

# COLUMBIA COUNTY 9-1-1 ADDRESSING

P. O. Box 1787, Lake City, FL 32056-1787

PHONE: (386) 758-1125 \* FAX: (386) 758-1365 \* Email: ron\_croft@columbiacountyfla.com

## Addressing Maintenance

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

DATE REQUESTED: 11/5/2007 DATE ISSUED: 11/7/2007

### ENHANCED 9-1-1 ADDRESS:

833 SW CHESTERFIELD CIR  
LAKE CITY FL 32024

### PROPERTY APPRAISER PARCEL NUMBER:

24-4S-16-03117-112

### Remarks:

LOT 12 CROSSWINDS S/D PHASE 1

Address Issued By:



Columbia County 9-1-1 Addressing / GIS Department

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

Approved Address

NOV 07 2007

911Addressing/GIS Dept

1017

# LYNCH WELL DRILLING, INC.

173 SW Tustenuggee Ave

Lake City, FL. 32025

Phone 386-752-6677

Fax 386-752-1477

Building Permit # \_\_\_\_\_ Owner's Name Mike Roberts

Well Depth \_\_\_\_\_ Ft. Casing Depth \_\_\_\_\_ Ft. Water Level \_\_\_\_\_ Ft.

Casing Size 4 inch Steel Pump Installation: Deep Well Submersible

Pump Make Aermotor Pump Model 520-100 HP 1

System Pressure (PSI) \_\_\_\_\_ On 30 Off 50 Average Pressure 40

Pumping System GPM at average pressure and pumping level \_\_\_\_\_ (GPM)

Tank Installation: Bladder ~~Galvanized~~ Make Challenger  
Model PC244 Size 8L

Tank Draw-down per cycle at system pressure 25.1 gallons

**I HEREBY VERIFY THAT THIS WATER WELL SYSTEM HAS BEEN  
INSTALLED AS PER THE ABOVE INFORMATION.**

Linda Newcomb  
Signature

Linda Newcomb  
Print Name

2609  
License Number

\_\_\_\_\_  
Date

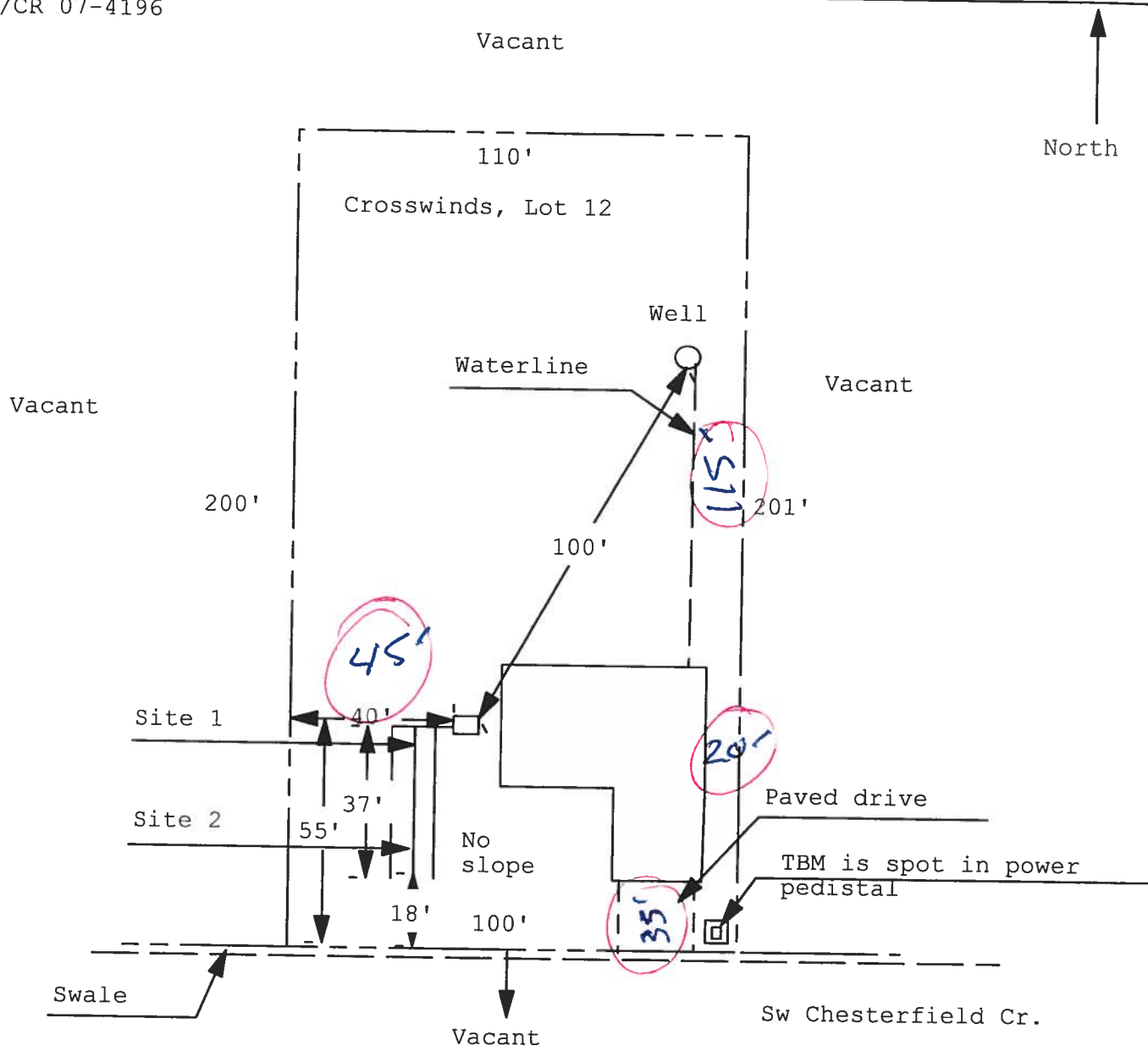


# Application for Onsite Sewage Disposal System Construction Permit. Part II Site Plan

Permit Application Number: \_\_\_\_\_

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

ROBERTS/CR 07-4196



1 inch = 40 feet

Site Plan Submitted By Paul Lloyd Date 12/11/07  
 Plan Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ Date \_\_\_\_\_  
 By \_\_\_\_\_ CPHU

Notes: \_\_\_\_\_

# Columbia County Building Department Culvert Permit

Culvert Permit No.

000001505

DATE 12/31/2007 PARCEL ID # 24-4S-16-03117-112  
APPLICANT LEIGHANN FRASER PHONE 752-2707  
ADDRESS 1330 SW MAIN BLVD LAKE CITY FL 32025  
OWNER MIKE ROBERTS PHONE 755-9476  
ADDRESS 657 SW CATHERINE LANE LAKE CITY FL 32055  
CONTRACTOR GLENN HUNTER PHONE 752-2707  
LOCATION OF PROPERTY 47S. TR ON CR 242. TR ON ARROWHEAD TERR. TL CANNON CREEK DR. TL  
ON CHESTFIELD CIRCLE. TR ON CHESTERFIELD. 3RD LOT ON RIGHT

SUBDIVISION/LOT/BLOCK/PHASE/UNIT CROSSWINDS 12

SIGNATURE *Leigh Ann Fraser*

## INSTALLATION REQUIREMENTS

☒

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

INSTALLATION NOTE: Turnouts will be required as follows:

- a) a majority of the current and existing driveway turnouts are paved, or;
- b) the driveway to be served will be paved or formed with concrete.

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

☐

Culvert installation shall conform to the approved site plan standards.

☐

Department of Transportation Permit installation approved standards.

☐

Other \_\_\_\_\_

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

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

Amount Paid 25.00



12-28-07

I Glenn J. Hunter authorize on  
behalf of Glenn J. Hunter LLC Leighann  
Fraser to pickup permits for  
Glenn J. Hunter LLC.

GLENN J. HUNTER



SHIRLA DARLENE KAEMMER  
MY COMMISSION # DD 322429  
EXPIRES: June 24, 2008  
Bonded Thru Budget Notary Services

Shirla Darlene Kaemmer

Date	Inspection	Inspect.	Owner	Pass	Location	Perr
01/03/08	Temp Service	Randy	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
01/08/08	Rough Plumbing	Randy	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
01/14/08	Mono Slab	RJ-WR	Glenn Hunter - Roberts	Not Right	Crosswinds Lot 12	2656
01/14/08	Set Backs	RJ-WR	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
01/15/08	Recheck M. Slab	Randy	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
01/24/08	Nailing	Wayne	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
02/12/08	Nailing	Wayne	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
03/05/08	Framing	Harry	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
03/05/08	Electrical	Harry	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
03/05/08	Plumbing	Harry	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
03/05/08	A/C	Harry	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
04/17/08	Perm Power	Harry	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656
09/26/08	Final	HD-JK	Glenn Hunter - Roberts	Not Right	Crosswinds Lot 12	2656
09/30/08	Recheck Final	HD-WR	Glenn Hunter - Roberts	OK	Crosswinds Lot 12	2656

# New Construction Subterranean Termite Soil Treatment Record

OMB Approval No. 2502-0525

This form is completed by the licensed Pest Control Company.

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

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

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

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

26563

## Section 1: General Information (Treating Company Information)

Company Name: Aspen Pest Control, Inc.  
Company Address: 321 N.W. Cole Terrace, Suite 107 City Lake City State FL Zip 32055  
Company Business License No. 321096711 Company Phone No. 386-755-3611 • 352-494-5751  
FHA/VA Case No. (if any) \_\_\_\_\_

## Section 2: Builder Information

Company Name: Miller, Robert Jr. Company Phone No. \_\_\_\_\_

## Section 3: Property Information

Location of Structure(s) Treated (Street Address or Legal Description, City, State and Zip) Tranquility lot 12

Type of Construction (More than one box may be checked) ☐ Slab ☐ Basement ☐ Crawl ☐ Other \_\_\_\_\_  
Approximate Depth of Footing: Outside \_\_\_\_\_ Inside \_\_\_\_\_ Type of Fill \_\_\_\_\_

## Section 4: Treatment Information

Date(s) of Treatment(s) 2-20-08  
Brand Name of Product(s) Used Bora-Terminator  
EPA Registration No. 60406-1  
Approximate Final Mix Solution % 1.3  
Approximate Size of Treatment Area: Sq. ft. 2000 Linear ft. \_\_\_\_\_ Linear ft. of Masonry Voids \_\_\_\_\_  
Approximate Total Gallons of Solution Applied 4  
Was treatment completed on exterior? ☐ Yes ☐ No  
Service Agreement Available? ☐ Yes ☐ No

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

Attachments (List) \_\_\_\_\_

Comments Treated all walls

Name of Applicator(s) Steve Bunn Certification No. (if required by State law) \_\_\_\_\_

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

Authorized Signature \_\_\_\_\_ Date 2-20-08

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

Form NPCA-99-B may still be used

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



# COLUMBIA COUNTY OFFICE ALLENBY

## 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 24-4S-16-03117-112

Building permit No. 000026563

Use Classification SFD, UTILITY

Fire: 6.42

Permit Holder GLENN HUNTER

Waste: 16.75

Owner of Building MIKE ROBERTS

Total: 23.17

Location: 833 SW CHESTERFIELD CIRCLE, LAKE CITY, FL

Date: 10/13/2008

*Fanny Buick*

Building Inspector

POST IN A CONSPICUOUS PLACE  
(Business Places Only)



*Re-Print*

# COLUMBIA COUNTY ALUMNI

## 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 24-4S-16-03117-112

Building permit No. 000026563

Use Classification SFD, UTILITY

Fire: 6.42

Permit Holder GLENN HUNTER

Waste: 16.75

Owner of Building MIKE ROBERTS

Total: 23.17

Location: 833 SW CHESTERFIELD CIRCLE, LAKE CITY, FL

Date: 02/25/2010

*Harry Dickie*

Building Inspector



POST IN A CONSPICUOUS PLACE  
(Business Places Only)