

DATE 08/30/2007

Columbia County Building Permit

PERMIT

This Permit Expires One Year From the Date of Issue

000026187

APPLICANT DALE BURD PHONE 497.2311

ADDRESS POB 39 FT. WHITE FL 32038

OWNER NICOLE PONCE PHONE 386.697.1855

ADDRESS 360 SW BUMBLE STREET FT. WHITE FL 32038

CONTRACTOR TERRY L. THRIFT PHONE 386.623.0115

LOCATION OF PROPERTY 47-S TO WILSON SPRINGS,TR TO NEWARK,TR TO COPPERHEAD,TL STRA
TO CENTRAL TO BUMBLE,TL & IT'S THE 1ST. LOT ON L PAST BOSTON

TYPE DEVELOPMENT M/H/UTILITY ESTIMATED COST OF CONSTRUCTION 0.00

HEATED FLOOR AREA TOTAL AREA HEIGHT STORIES

FOUNDATION WALLS ROOF PITCH FLOOR

LAND USE & ZONING A-3 MAX. HEIGHT

Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00

NO. EX.D.U. 0 FLOOD ZONE AE DEVELOPMENT PERMIT NO. 07-011

PARCEL ID 25-6S-15-00687-000 SUBDIVISION 3 RIVERS ESTATES

LOT 17 BLOCK PHASE UNIT 8 TOTAL ACRES 0.76

000001443 IH0000036

Culvert Permit No. Culvert Waiver Contractor's License Number Applicant/Owner/Contractor

WAIVER 07-0512 CFS JTH N

Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: VARIANCE APPROVED #V-260 ON 8.23.2007. 1' RISE LETTER.

FINISH FLOOR CERTIFICATE NEEDED.

Check # or Cash 1964

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power date/app. by Foundation date/app. by Monolithic date/app. by

Under slab rough-in plumbing date/app. by Slab date/app. by Sheathing/Nailing date/app. by

Framing date/app. by Rough-in plumbing above slab and below wood floor date/app. by

Electrical rough-in date/app. by Heat & Air Duct date/app. by Peri. beam (Lintel) date/app. by

Permanent power date/app. by C.O. Final date/app. by Culvert date/app. by

M/H tie downs, blocking, electricity and plumbing date/app. by Pool date/app. by

Reconnection date/app. by Pump pole date/app. by Utility Pole date/app. by

M/H Pole date/app. by Travel Trailer date/app. by Re-roof date/app. by

BUILDING PERMIT FEE \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00

MISC. FEES \$ 200.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 11.16 WASTE FEE \$ 33.50

FLOOD DEVELOPMENT FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 369.66

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.

CH# 1964 - 1965 50

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

For Office Use Only (Revised 9-22-06) Zoning Official afg Building Official OK JH 6-22-07

AP# 0106-73 Date Received 6/22 By TW Permit # 26187/143

Flood Zone AE Development Permit yes Zoning A-3 Land Use Plan Map Category A-3

Comments Variance apvd # 1260 8-23-07 + 1 ft. rise letter + finished floor cut.

FEMA Map# 255B Elevation 34' Finished Floor 35' River FE In Floodway

☒ Site Plan with Setbacks Shown ☒ EH Signed Site Plan ☒ EH Release ☒ Well letter ☒ Existing well

☒ Copy of Recorded Deed or Affidavit from land owner ☒ Letter of Authorization from installer

☐ State Road Access ☐ Parent Parcel # ☐ STUP-MH

Lot 17 Unit 8

Property ID # 00-00-00-001087-00 Subdivision 3 Rivers Estates

▪ New Mobile Home ☒ Used Mobile Home 497-2311 Year 2007

▪ Applicant Dale Burd on for Kelly Bishop Phone # 380-1097-1855

▪ Address PO Box 39 Fort White, FL 32038

▪ Name of Property Owner Nicole Ponce Phone# 386-697-1855

▪ 911 Address 360 SW Bumble St. Ft. White, Fla. 32038

▪ Circle the correct power company - FL Power & Light - Clay Electric

(Circle One) - Suwannee Valley Electric - Progress Energy

▪ Name of Owner of Mobile Home Nicole Ponce Phone # 380-1097-1855

Address SW Bumble St. Fort White FL 32038

▪ Relationship to Property Owner Property Owner

▪ Current Number of Dwellings on Property 0

▪ Lot Size .76 Acre Total Acreage .76 Acre

▪ Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)

(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)

▪ Is this Mobile Home Replacing an Existing Mobile Home NO

▪ Driving Directions to the Property Wilson Spgs Rd - TR on Newark TL on Copperhead straight on Central - TL on Bumble - 1st lot on left past Boston

▪ Name of Licensed Dealer/Installer Terry L Thrift Phone # 380-1023-0115

▪ Installers Address 448 NW NYE Hunter Dr. Lake City FL 32055

▪ License Number IH0000036 Installation Decal # 283788

SW Bumble

STATE OF FLORIDA
DEPARTMENT OF HEALTH

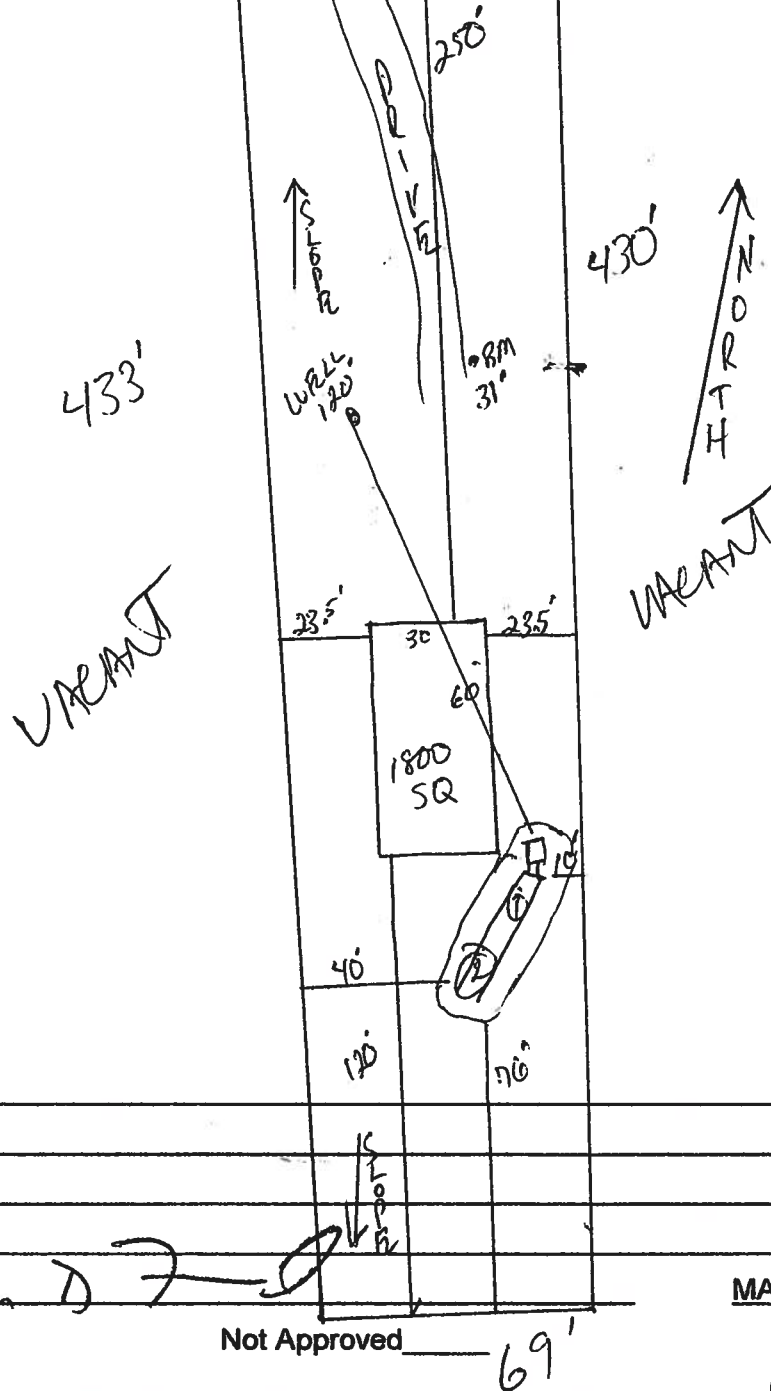
APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number _____

PONCE

PART II - SITEPLAN

Scale: 1 inch = 50 feet.



Notes: _____

Site Plan submitted by Rod D

Plan Approved _____ Not Approved _____

By _____ Date _____

MASTER CONTRACTOR

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

A & B Well Drilling, Inc.
5673 NW Lake Jeffery Road
Lake City, FL, 32055
386-758-3409

6/22/2007

To: Columbia County Building & Zoning Department

Description of well to be installed for Customer:

Located at Address:

PONER
S W BUMBLER FORT WHITE

1 hp 20 gpm- 1 1/4" drop over 82 gallon equivalent captive tank with cycle stop and back flow prevention. With SRWM permit.

William Bias
William Bias

LIMITED POWER OF ATTORNEY

I, Terry L. Thrift, License # IH-0000036 do hereby authorize Dale Burd, Rocky Ford or Kelly Ford to be my representative and act on my behalf in all aspects of applying for a MOBILE HOME PERMIT to be installed any of the following Counties; Alachua, Baker, Bradford, Clay, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Madison, Suwannee & Union. This Power of attorney is valid thru 9/30/07.

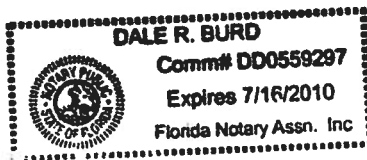
Terry L. Thrift
(Signature)

10-15-06
(Date)

Sworn and subscribed before me this 15 day of OCT, 2006.

[Signature]
Notary Public

Personally Known: _____
Produced ID (Type): _____



MOBILE HOME INSTALLER AFFIDAVIT

As per Florida Statutes Section 320.8249 Mobile Home Installers License:

Any person who engages in mobile home installation shall obtain a mobile home installer's license from the Bureau of Mobile Home and Recreational Vehicle Construction of the Department of Highway Safety and Motor Vehicles pursuant to this section. Said License shall be renewed annually, and each licensee shall pay a fee of \$150.

I, TERRY L THURIFT, license number IH 0000086 do

herby state that the installation of the manufactured home for (applicant)

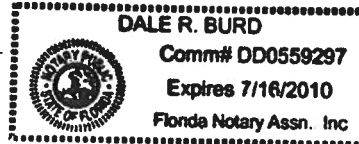
DALE BURD on Roky Ford (customer name) Nicole Powner in
Columbia County will be done under my supervision.

Terry L Thurift
Signature

Sworn to and subscribed before me this 8 day of MAY, 2007.

Notary Public: [Signature]

My Commission Expires: _____



FROM : COLUMBIA CO BUILDING + ZONING FAX NO. : 386-758-2160

Aug. 01 2006 03:45PM Pa

PERMIT NUMBER

Initiator

Kearney L. Thibault License # 14-0000036

Address of home being installed

SC 800432 ST
FOLY WHITE, FL 32038

Manufacturer

Nesco

Length x width

60 x 32

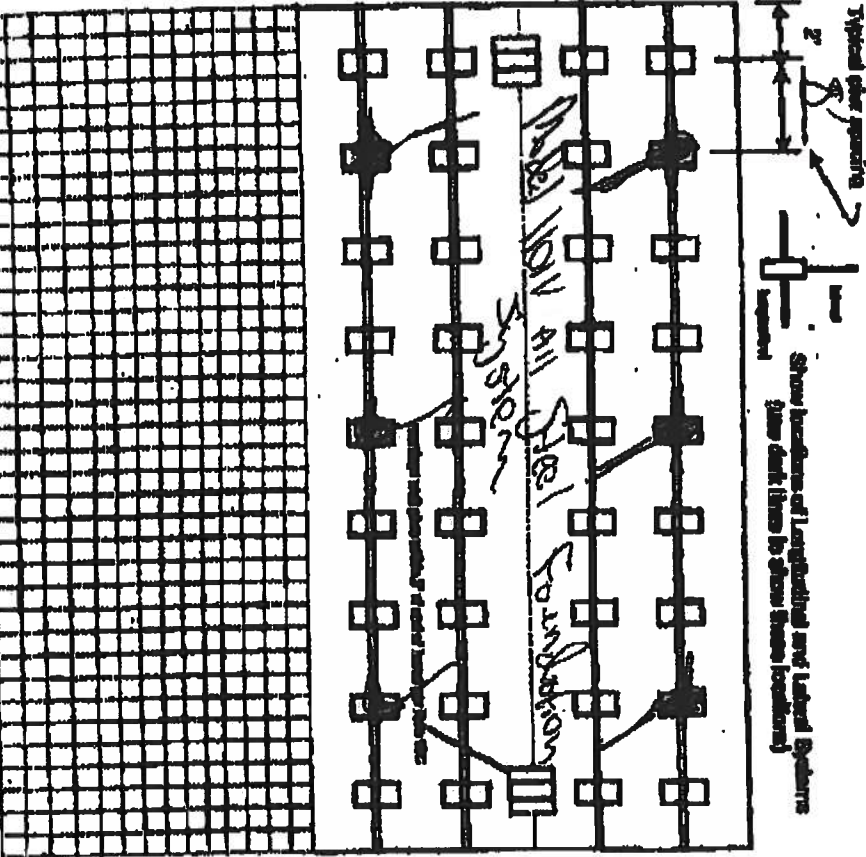
NOTE:

If home is a single unit, list unit and size of the building plan. If home is a triple or quad, list the size of the building plan.

- If underground Lateral Arm Systems cannot be used on any home (new or used) where the address is the same as the address.

Initiator's initials

JL



New Home

☒

Used Home

☐

Home installed in accordance with the Manufacturer's Installation Manual

☒

Home installed in accordance with Rule 15-C

☐

Single unit

☐

Wind Zone II

☒

Wind Zone III

☐

Double unit

☒

Installation Detail #

283788

Triple/Quad

☐

Serial #

PERM SPECIFIC TABLE FOR USED HOMES

Unit	Feet	12' x 12'	12' x 12' x 12' (400)	12' x 12' (400)	12' x 12' (400)	12' x 12' (400)	12' x 12' (400)
Length (ft)	12'	12'	12'	12'	12'	12'	12'
Width (ft)	12'	12'	12'	12'	12'	12'	12'
Height (ft)	12'	12'	12'	12'	12'	12'	12'

Lateral pole post size

☒

Pole post size

☒

Other pole post size

☐

Other pole post size

☐

Draw the approximate location of markings with spacing 4 feet or greater. Use the spacing to show the plan.

☒

Use all markings and spacing greater than 4 feet and their pole post size.

☒

Use all markings and spacing greater than 4 feet and their pole post size.

☒

Use all markings and spacing greater than 4 feet and their pole post size.

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Use all markings and spacing greater than 4 feet and their pole post size.

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Use all markings and spacing greater than 4 feet and their pole post size.

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Use all markings and spacing greater than 4 feet and their pole post size.

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Use all markings and spacing greater than 4 feet and their pole post size.

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Use all markings and spacing greater than 4 feet and their pole post size.

☒

Use all markings and spacing greater than 4 feet and their pole post size.

☒

PERMIT NUMBER

[illegible]

Connect electrical connections between multi-wire units, but not to the main power system. This includes the bonding wire between multi-wire units. **Fig. 10**

Connect all master circuits to an existing master loop or create new. **Fig. 11**

Connect all possible water supply piping to an existing water supply, master loop, or other independent water supply system. **Fig. 12**

[illegible]

I understand a properly installed gutter is a requirement of all new and reroof homes and that carpenters, mfrs, roofers and installers working with me as a result of a permit violation or its products being installed. I understand a set of signs will not serve as a sign-off.

Introduction to the Literature

President
Mr. 11

10/11/1960

President
Mr. 11

The following will be required when placed for sale or rental in buildings to accommodate a special use: The Program advisory Council has no role in these matters of rent/wage.

[illegible]

to accurately and truly based on the
 information and information given with this specific services
 provided by the information and information given with this specific services
 provided by the information and information given with this specific services

Date: 5/30/05

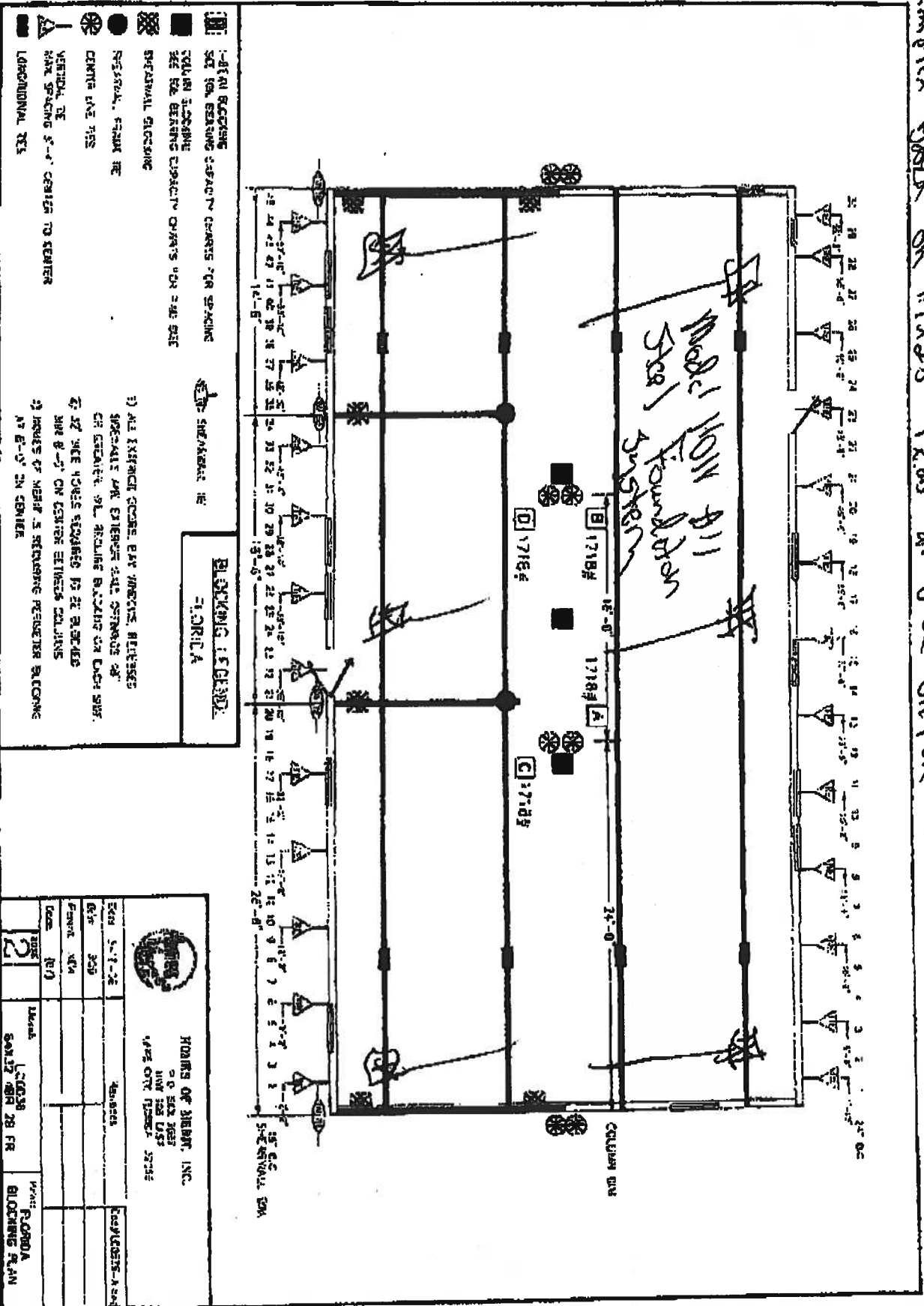
254-1500 on 19"x25" p.d.s. at 8' or
254-1500 with 3150 Hgt anchors at 6' 4" or
254-1500 on 19"x25" p.d.s. at 6' 2" on Per Pln.


Dance & Lark
33x60
Box


→ CAG LOT #1


0003/0032


05/29/2007 11:25 FAX






 - 8 BIT IN RECORDING
 FOR NON RECORDING CAPABLES "FOR SPEAKING"



 "FOR IN RECORDING"
 FOR NON RECORDING CAPABLES "FOR SPEAKING"



 "FOR IN RECORDING"
 FOR NON RECORDING CAPABLES "FOR SPEAKING"



 "FOR IN RECORDING"
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SECRET

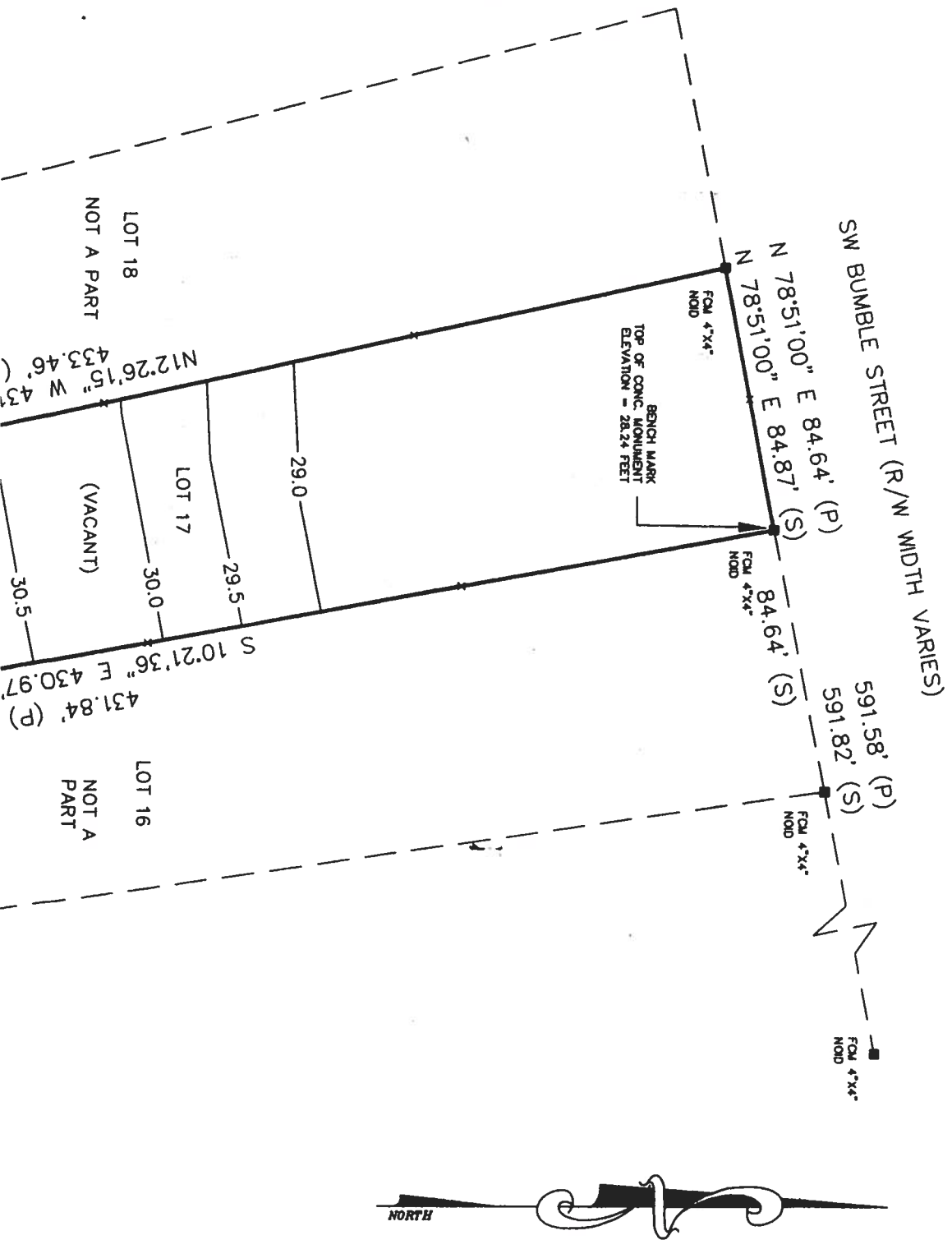
—CORRECTION—

1) ALL INTERIOR SCENES, DAY INTERIORS, REVERSED
SPECULUM ARE EXTERIOR SCENES OF "THE
CR. SCENE". ALL SCENES BEARING ON DAY SHOT
ON 12" WIDE HORNS RECORDED IN 24 REVERSED
MIR. 8-12" ON EXTERIOR INTERIORS COLLINS
2) RESULTS OF MEAS. IN REFRACTIVE REFLECTOR BECOMING
AT 8-12" ON SCENERY

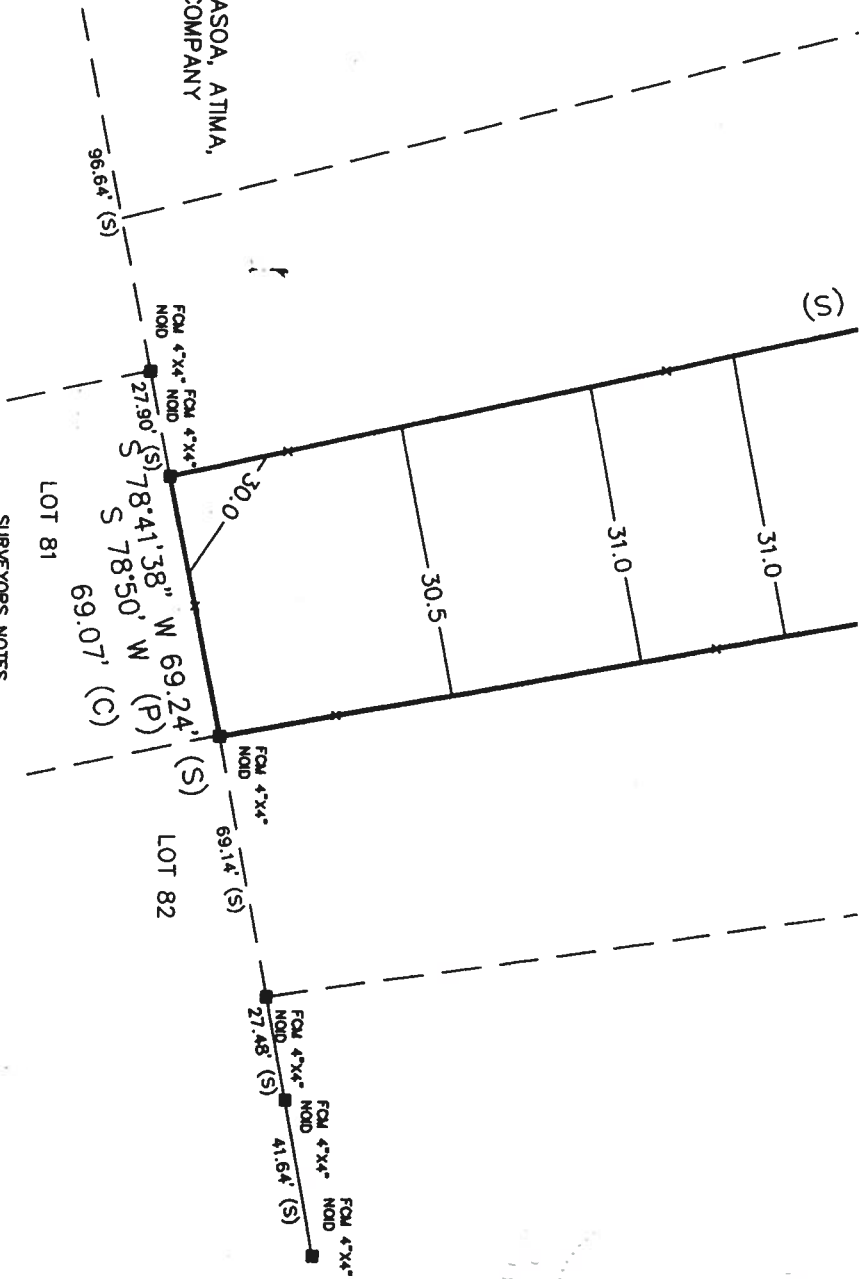
[illegible]

MAP OF BOUNDARY & TOPOGRAPHIC SURVEY

SHOWING LOT 17, UNIT 8, THREE RIVERS ESTATES, A SUBDIVISION, ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 6, PAGE 9, OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.



CERTIFIED TO:
JEFFER A. CARR
NICOLE K. PONCE
TRANSLAND FINANCIAL SERVICES, ISASOA, ATIMA,
FIRST AMERICAN TITLE INSURANCE COMPANY



I HEREBY CERTIFY THIS SURVEY WAS DONE UNDER MY DIRECT SUPERVISION AND IT MEETS THE MINIMUM TECHNICAL STANDARDS FOR LAND SURVEYING PURSUANT TO CHAPTER 61G17-6, FLORIDA ADMINISTRATION CODE, CHAPTER 472, FLORIDA STATUTES.

WILLIAM N. KITCHEN PSM 5490

William N. Kitchen 6-7-2007

NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER.

REV:

WILLIAM N. KITCHEN
PROFESSIONAL SURVEYOR AND MAPPER
152 N MARION AVENUE
LAKE CITY, FLORIDA 32055
PHONE (386) 755-7786

CLIENT: CARR & PONCE

SURVEYORS NOTES

1. BEARING BASED ON PLAT.
2. SUBJECT LOT SHOWN HEREON LIES IN FLOOD ZONE AE, AS BEST DETERMINED FROM F.E.M.A. FLOOD MAPS PANEL NO. 120070 0255 B DATED JAN. 6, 1988
3. SUBJECT LOT SHOWN HEREON LIES IN SANTA FE RIVER MILE 9, THE 100 YEAR FLOOD = 35 FEET, THE 10 YEAR FLOOD = 31 FEET, THE 2 YEAR FLOOD = 23 FEET.
4. NO UNDERGROUND PIPES AND UTILITIES IF ANY LOCATED BY THIS SURVEY.
5. JURISDICTIONAL AND/OR ENVIRONMENTAL SENSITIVE AREAS IF ANY, NOT LOCATED BY THIS SURVEY.
6. THIS SURVEY BASED ON LEGAL DESCRIPTION FURNISHED. THE PUBLIC RECORDS, WERE NOT SEARCHED BY THIS SURVEYOR FOR EASEMENTS, TITLE COVENANTS, RESTRICTIONS, CLOSURES, TAKINGS OR ORDINANCES, ETC., THERE COULD BE OTHER MATTER OF RECORD THAT EFFECT THIS PARCEL.

LEGEND

- (D) = DEED
- (P) = PLAT
- (S) = SURVEY MEASUREMENT
- (C) = CALCULATED MEASUREMENT
- NOD = NO SURVEYORS IDENTIFICATION
- LS = LAND SURVEYOR
- LB = LICENSE BUSINESS
- FR = FOUND IRON ROD
- FRP = FOUND IRON PIPE
- FCM = FOUND CONCRETE MONUMENT
- SIR = SET IRON ROD
- SCM = SET CONCRETE MONUMENT
- PRM = PERMANENT REFERENCE MONUMENT
- C/L = CENTER LINE
- R/W = RIGHT OF WAY
- EOP = EDGE OF PAVEMENT
- ASP = ASPHALT PAVING
- CONC = CONCRETE
- OHE = OVER HEAD ELECTRIC
- WCP = WOOD POWER POLE
- S.T. = SEPTIC TANK
- X-X = WIRE FENCE
- = WOOD FENCE
- USE = UNDER GROUND ELECTRIC

DRAWN BY: WNK FIELD BOOK: 07170
SCALE: 1" = 50'
SURVEY DATE: APRIL 5, 2007
JOB NUMBER SHEET
07170 1 OF 1



FLOOD ELEVATION INFORMATION REPORT

**SUWANNEE
RIVER
WATER
MANAGEMENT
DISTRICT**

9225 CR 49
Live Oak, FL 32060
TELEPHONE: 386-362-1001
TELEPHONE: 800-226-1066
FAX: 386-362-1056

TO: A & B Construction
Post Office Box 39
Ft. White, Florida 32038

DATE: June 6, 2007

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): Santa Fe	
Section/Township/Range: 25 / 06 S / 15E	Subdivision: Three Rivers Estates	
Tax Parcel ID: 00687-000	Unit No.: 8	Lot No.: 17

FLOOD INFORMATION

Flood Elevation Information for the:	Santa Fe River	
Nearest Upstream River Mile:	10	
Datum	NGVD 29	NAVD 88
Elevation of the Flood of Record:		
Elevation of the 100-Year Flood:	35	34
Elevation of the 10-Year Flood:	31	28
Elevation of the 2-Year Flood:	23	

It was determined from the information provided that this property **is not located** in a regulatory floodway zone. Please be advised that new information could change this determination.


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.

06-04-'07 16:23 FROM-

T-089 P003/003 F-739

CARRIANCE**0705 L****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 FT. WHITE 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 SET SITE BENCH MARK FOR CONSTRUCTION. BENCH MARK TOP OF CONC. MONUMENT AT THE NORTHEAST CORNER OF SUBJECT PROPERTY = 28.24 FEET. 100 YEAR FLOOD FOR THIS SITE = 34 FEET. THE HOME HAS TO BE 1 FOOT ABOVE THE 100 YEAR FLO 35' FEET. THEREFOR THE HOME HAS TO BE 6.74 FEET ABOVE SAID BENCH MARK.

Signature William N. KitchenDate 5-30-2007☐ Check here if attach**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zones AO and A (without BFE), complete items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, I and C. For items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

- E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
- a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the LAG.
- E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A items 8 and/or 9 (see page 8 of instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E3. Attached garage (top of slab) is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E4. Top of platform of machinery and/or equipment servicing the building is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.
- E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain manage ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued I or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name _____

Address _____

City _____

State _____

ZIP Code _____

Signature _____

Date _____

Telephone _____

Comments _____

☐ Check here if attach**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 (c and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in items G8 and G9.

- G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. ☐ The following information (items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number _____	G5. Date Permit Issued _____	G6. Date Certificate Of Compliance/Occupancy Issued _____
-------------------------	------------------------------	---

G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _____ ☐ feet ☐ meters (PR) Datum

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ ☐ feet ☐ meters (PR) Datum

Local Official's Name _____

Title _____

Community Name _____

Telephone _____

Signature _____

Date _____

Comments _____

06-04-'07 16:22 FROM-

T-089 P001/003 F-739

U.S. DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency
National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-8.

OMB No. 1550-0006
Expires February 28, 2001

PAGE 1

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name	CARRYPONCE	Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Company NAIC Number
City	FT. WHITE	State
ZIP Code		
A3. Property Description (Lot and Block numbers, Tax Parcel Number, Legal Description, etc.) LOT 17, UNIT 8, THREE RIVERS ESTATES, COLUMBIA CO. FL, PID # 00-00-00-00827-000		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>30°03'45" 25.63"</u> Long. <u>20°02'05" 57.33"</u>		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>5</u>		
A8. For a building with a crawl space or enclosure(s), provide:		
a) Square footage of crawl space or enclosure(s)	NA	sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade	NA	
c) Total net area of flood openings in A8.b		sq in
A9. For a building with an attached garage, provide:		
a) Square footage of attached garage	N	sq ft
b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade		
c) Total net area of flood openings in A9.b		sq in

Horizontal Datum: ☒ NAD 1927 ☐ NAD 1983**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP Community Name & Community Number COLUMBIA UNINCORP 120070		B2. County Name COLUMBIA		B3. State FL	
B4. Map/Panel Number 120070 0255	B5. Suffix B	B6. FIRM Index Date JAN. 6, 1995	B7. FIRM Panel Effective/Revised Date JAN. 6, 1995	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zn AO, use base flood depth) 34.0

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9.
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other (Describe)

B11. Indicate elevation datum used for BFE in item B9: ☒ NGVD 1929 ☐ NAVD 1983 ☐ Other (Describe)

B12. Is the building located in a Coastal Barrier Resource System (CBRS) area or Otherwise Protected Area (OPA)?
 Designation Date ☐ CBRS ☐ OPA ☐ Yes ☒ No

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☒ Construction Drawings ☐ Building Under Construction ☐ Finished Construction
 "A new Elevation Certificate will be required when construction of the building is complete."

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARIA, ARIAE, ARIA1-A30, ARIAH, ARIA0. Complete items C2.a-g below according to the building diagram specified in item A7.
 Benchmark Utilized Vertical Datum
 Conversion/Comments

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	35.0+	<input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	NA	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	NA	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	NA	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	NA	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	NA	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	NA	<input type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☒ Check here if comments are provided on back of form.

Certifier's Name William N. Kitchen

License Number PSM 5492

PLACE
SEAL
HERE

06-04-'07 16:22 FROM-

T-089 P002/003 F-739

Title PROF. SURVEYOR & MAPPER Company Name WILLIAM M. KITCHEN PSM

Address 152 N. MARION AVE. City LAKE CITY State FL ZIP Code 32055

Signature Date 5/29/07 Telephone 386-755-7786

PG. 1
CONT.

Att: Dale/Rocky
Re: Ponce Carr
Fam's Chris L

① FATCO 1094-1600822

Prepared by
Marie Graham, an employee of
First American Title Insurance Company
23335 NW County Road 236, Suite 20
High Springs, Florida 32643
(386)434-2727

Inst:2007010346 Date:05/08/2007 Time:15:54

Doc Stamp-Deed : 188.00

J. P. Dewitt Cason, Columbia County B:1118 P:1852

Return to: Owner

File No.: 1095-1600822

Rec 1850
DS 16800

WARRANTY DEED

This indenture made on April 30, 2007 A.D., by

Mark C. Cornelius and Martha A. Cornelius, husband and wife

whose address is: P.O. Box 382, High Springs, FL 32655
hereinafter called the "grantor", to

Jeffery A. Carr, a single man and Nicole K. Ponce, a single woman, as joint tenants with full rights of survivorship

whose address is: 611 SW MANATEE TERR. FT. WHITE FL 32038
hereinafter called the "grantee":
(Which terms "Grantor" and "Grantee" shall include singular or plural, corporation or individual, and either sex, and shall include heirs, legal representatives, successors and assigns of the same)

Witnesseth, that the grantor, for and in consideration of the sum of Ten Dollars, (\$10.00) and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Columbia County, Florida, to-wit:

Lot 17, UNIT 8, THREE RIVERS ESTATES, INC., a subdivision, according to the Plat thereof as recorded in Plat Book 6, Page(s) 9, of the Public Records of Columbia County, Florida.

Parcel Identification Number: R00687-000

The land is not the homestead of the Grantor under the laws and constitution of the State of Florida and neither the Grantor nor any person(s) for whose support the Grantor is responsible reside on or adjacent to the land.

Subject to all reservations, covenants, conditions, restrictions and easements of record and to all applicable zoning ordinances and/or restrictions imposed by governmental authorities, if any.

06-18-'07 11:19 FROM-

T-292 P003/003 F-163

Att: Dale/Rocky
 RE: Ponce/Carr
 From: Chris L.

Inst:2007010346 Date:05/08/2007 Time:15:54

Doc Stamp-Deed : 168.00

DC, P. Dewitt Cason, Columbia County D:1146 P:1853

Together with all the tenements, hereditaments and appurtenances thereto belonging or in any way appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31st of 2006.

In Witness Whereof, the grantor has hereunto set their hand(s) and seal(s) the day and year first above written.

Mark C. Cornelius
 Mark C. Cornelius

Martha A. Cornelius
 Martha A. Cornelius

Signed, sealed and delivered in our presence:

Marie Graham
 Witness Signature

Dorcas C. Barnett
 Witness Signature

Print Name: MARIE GRAHAM

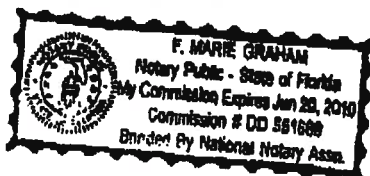
Print Name: DORCAS C. BARNETT

State of FL

County of Alachua

The foregoing instrument was acknowledged before me on April 30, 2007, by Mark C. Cornelius and Martha A. Cornelius, husband and wife who is/are personally known to me or who has/have produced a valid driver's license as identification.

F. Marie Graham
 NOTARY PUBLIC



Notary Print Name _____
 My Commission Expires: _____

Columbia County Property Appraiser

DB Last Updated: 5/11/2007

2007 Proposed Values

Parcel: 00-00-00-00687-000

Tax Record

Property Card

Interactive GIS Map

Print

Owner & Property Info

PINNLE DREG ATTACHED

Search Result: 1 of 1

Owner's Name	CORNELIUS MARK C & MARTHA A		
Site Address			
Mailing Address	P O BOX 382 HIGH SPRINGS, FL 32655		
Use Desc. (code)	VACANT (000000)		
Neighborhood	100000.08	Tax District	3
UD Codes	MKTA02	Market Area	02
Total Land Area	0.000 ACRES		
Description	LOT 17 UNIT 8 THREE RIVERS ESTATES. ORB 750-770, 793-1265, 876-1889, WD 1035-2552.		

GIS Aerial



Property & Assessment Values

Mkt Land Value	cnt: (1)	\$15,300.00
Ag Land Value	cnt: (0)	\$0.00
Building Value	cnt: (0)	\$0.00
XFOB Value	cnt: (0)	\$0.00
Total Appraised Value		\$15,300.00

Just Value	\$15,300.00
Class Value	\$0.00
Assessed Value	\$15,300.00
Exempt Value	\$0.00
Total Taxable Value	\$15,300.00

Sales History

Sale Date	Book/Page	Inst. Type	Sale VImp	Sale Qual	Sale RCode	Sale Price
1/18/2005	1035/2552	WD	V	U	08	\$10,000.00
3/10/1999	876/1889	WD	V	Q		\$23,000.00
7/1/1994	793/1265	WD	V	Q		\$20,300.00

Building Characteristics

Bldg Item	Bldg Desc	Year Blt	Ext. Walls	Heated S.F.	Actual S.F.	Bldg Value
NONE						

Extra Features & Out Buildings

Code	Desc	Year Blt	Value	Units	Dims	Condition (% Good)
NONE						

Land Breakdown

Lnd Code	Desc	Units	Adjustments	Eff Rate	Lnd Value
000000	VAC RES (MKT)	1.000 LT - (.000AC)	1.00/1.00/1.00/1.00	\$15,300.00	\$15,300.00

Columbia County Property Appraiser

DB Last Updated: 5/11/2007

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: 6/22/2007 DATE ISSUED: 6/22/2007

ENHANCED 9-1-1 ADDRESS:

360 SW BUMBLE

ST

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

00-00-00-00687-000

Remarks:

LOT 17 UNIT 8 THREE RIVERS ESTATES

Nicole Ponce # 07-0673

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

JUN 22 2007

911Addressing/GIS Dept

819

SW Bumble

STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

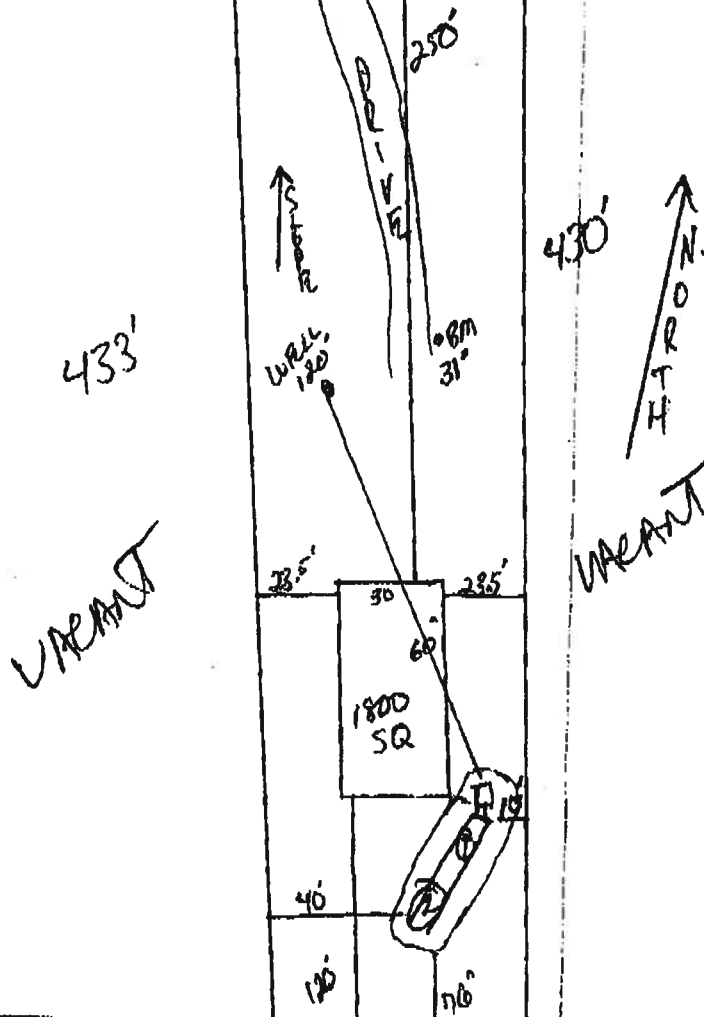
Permit Application Number 070512

PONCE

PART II - SITEPLAN

07-0673

Scale: 1 inch = 50 feet.



Notes:

Site Plan submitted by: Red D 7

Plan Approved 2/3/07

By

Not Approved

MASTER CONTRACTOR

Date 7/2/07

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

DH 4015, 10/98 (Replaces HRS-H Form 4016 which may be used)
(Stock Number: 5744-002-4015-6)

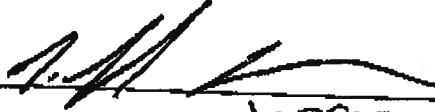
Page 2 of 4

Connie P. Scott,

8/29/07

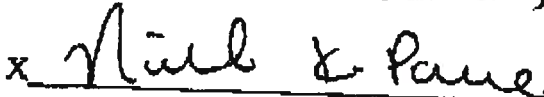
If an appeal is filed and successful within the allotted time, we accept responsibility for moving our mobile home at our own expense. In the event an appeal is successful we will not hold Columbia County responsible.

X



Jeffery A. Carr

X



Nicole K. Ponce

State of Florida
Alachua County

On this 30th day of August 2007 Jeffery A. Carr
and Nicole K. Ponce did acknowledge this
document,



Dale Burd, or any member of A&B Construction of Fort White, FL may pick up the move on permit.

Development Permit
F 023- 07-011

FLOOD ZONE AE BY CFS 1-6-88 FIRM COMMUNITY #. 120070 - PANEL #. 255 B
FIRM 100 YEAR ELEVATION 34.0' PLAN INCLUDED YES or NO
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 35.0'
IN THE REGULATORY FLOODWAY YES or NO RIVER SANTA ANE
SURVEYOR / ENGINEER NAME MARK DISNEY LICENSE NUMBER 53915

One Foot Rise Analysis and Certification, 100 Year Base Flood

Ponce, Nicole K. & Carr, Jeffer A., Lot 7, Unit 8, Three Rivers Estates, 25/06S/15E/00687-000,
Columbia Co, FL

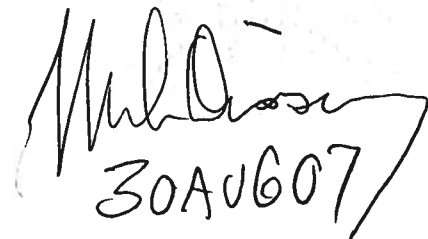
- ☐ PROPERTY DESCRIPTION: Lot 19&20, Three Rivers Estates, Unit 20, 00-00-00-01248-000, Columbia Co, FL
- ☐ OWNER: MARTINSEN, LANCE & JOYCE A
- ☐ CONTRACTOR: A&B Construction
- ☐ PROJECT: A 30' x 60' mobile home on 100 - 16" x 16" CMU piers
- ☐ BASE FLOOD ELEVATION: 35', Ichetucknee River Mile 10 (Per SRWMD Flood Information Report, Dated 06Jun2007)
- ☐ FLOOD ZONE: AE
- ☐ BASIN AREA AT BASE FLOOD ELEVATION: 647 Acres (Calculated from SRWMD flood plain data.)
- ☐ PROPOSED BUILDING AREA: 100 piers x (16" x 16") = 178 ft².
- ☐ PROPOSED BUILDING VOLUME BELOW FLOODPLAIN: (Slab) 178 ft² x 5' = 890 ft³.
- ☐ EXISTING GRADE ELEVATION AT BUILDING LOCATION: 30' average for one foot rise calculations.
(Note: Existing grade at building location based on topo survey, Wm Kitchen Job 07170, Drawing Date 05Apr07, attached.)
- ☐ CALCULATIONS: The project only requires volume calculations in this area since it is not a flowing or riverine area.

Floodplain volume removed = 890 ft³

Floodplain level increase = (890 ft³) / 43560 ft²/acre / 647 acres = 0.00003 ft

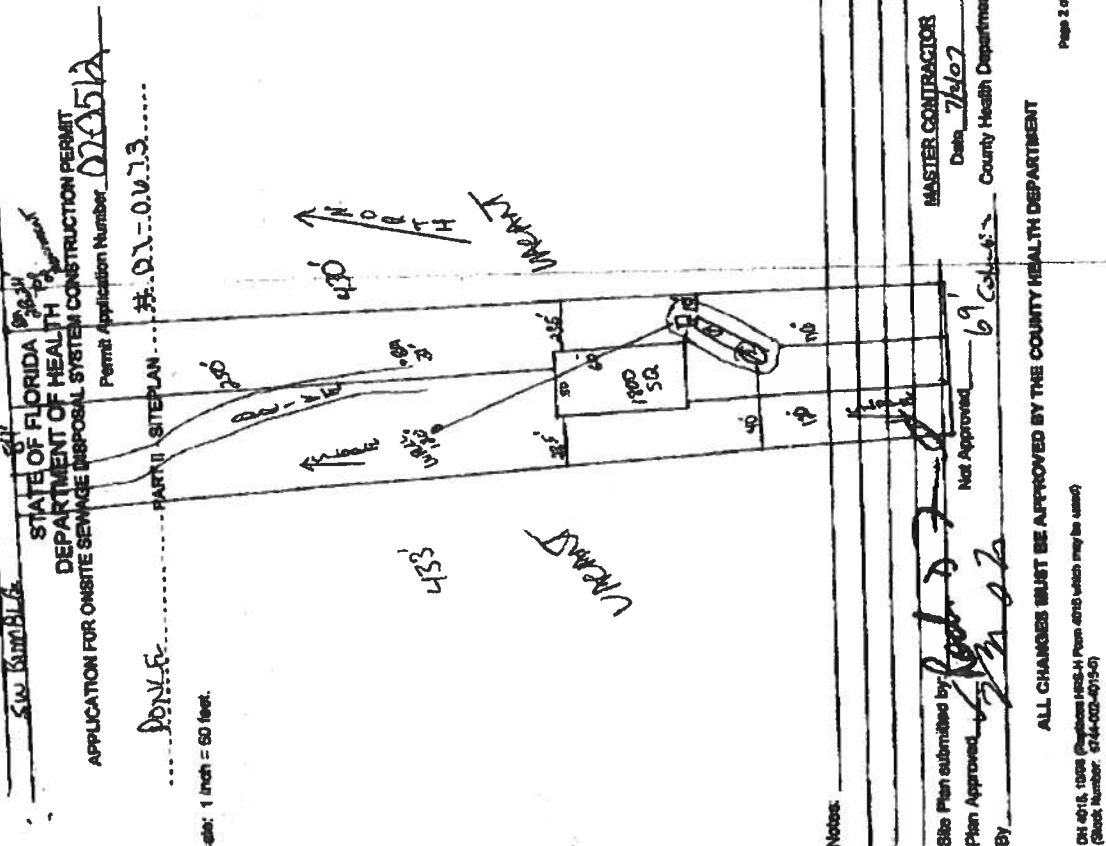
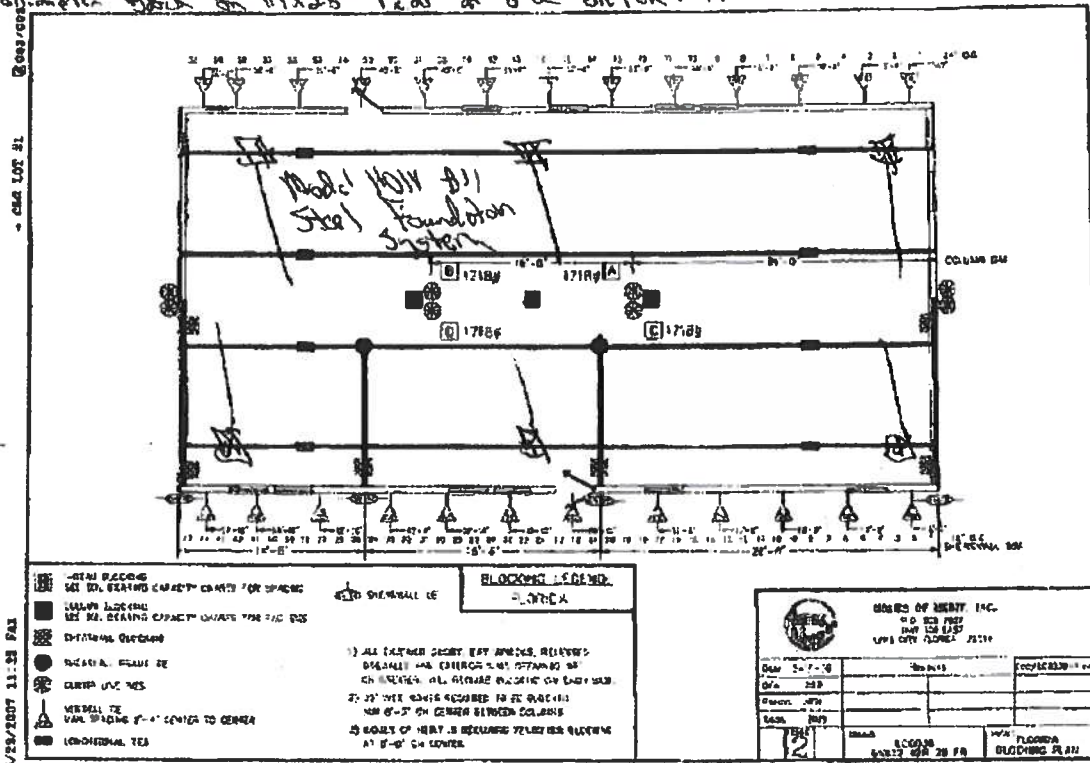
CERTIFICATION:

I hereby certify that construction of Ponce, Nicole K. & Carr, Jeffer A., Lot 7, Unit 8, Three Rivers Estates, 25/06S/15E/00687-000, Columbia Co, FL will increase flood elevations less than one foot at the project location, to the best of my knowledge.

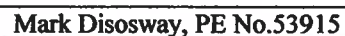

30 AUG 07

255-1500 on 17"x25' Pads at 8' oc
 Joists - 2B5 with 3x50 HPS members at 5'2" oc
 8'0" on 17"x25' Pads at 8' oc on Pca Pluri

Dance + Carr 32x6 Box



SHOWING LOT 17, UNIT B, THREE RIVERS ESTATES, A SUBDIVISION, ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 6, PAGE 9, OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.



24th: WEEGIE
**Columbia County Building Department
Culvert Waiver**

**Culvert Waiver No.
000001443**

DATE: 08/30/2007

BUILDING PERMIT NO. 26187

APPLICANT DALE BURD

PHONE 497.2311

ADDRESS POB 39

FT. WHITE

FL 32038

OWNER NICOLE PONCE

PHONE 386.697.1855

ADDRESS 360 SW BUMBLE STREET

FT. WHITE

FL 32038

CONTRACTOR TERRY L. THRIFT

PHONE 386.623.0115

LOCATION OF PROPERTY 47-S TO WILSON SPRINGS, TR TO NEWARK, TR TO COPPERHEAD, TL STRAIGHT
TO CENTRAL TO BUMBLE, TL & IT'S THE 1ST. LOT ON L PAST BOSTON.

SUBDIVISION/LOT/BLOCK/PHASE/UNIT 3 RIVERS ESTATES

17

8

PARCEL ID # 25-6S-15-00687-000

I HEREBY CERTIFY THAT I UNDERSTAND AND WILL FULLY COMPLY WITH THE DECISION OF THE COLUMBIA COUNTY PUBLIC WORKS DEPARTMENT IN CONNECTION WITH THE HEREIN PROPOSED APPLICATION.

SIGNATURE: *[Signature]*

A SEPARATE CHECK IS REQUIRED
MAKE CHECKS PAYABLE TO BCC

Amount Paid 50.00

PUBLIC WORKS DEPARTMENT USE ONLY

I HEREBY CERTIFY THAT I HAVE EXAMINED THIS APPLICATION AND DETERMINED THAT THE
CULVERT WAIVER IS:

✓

APPROVED

NOT APPROVED - NEEDS A CULVERT PERMIT

COMMENTS: _____

SIGNED: *[Signature]*

DATE: 9-5-07

ANY QUESTIONS PLEASE CONTACT THE PUBLIC WORKS DEPARTMENT AT 386-752-5955.

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



GENERAL PUBLIC AVENUE

M/H 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 25-6S-15-00687-000

Building permit No. 000026187

Permit Holder TERRY L. THRIFT

Owner of Building NICOLE PONCE

Location: 360 SW BUMBLE STREET, FT. WHITE, FL 32038



Date: 09/20/2007

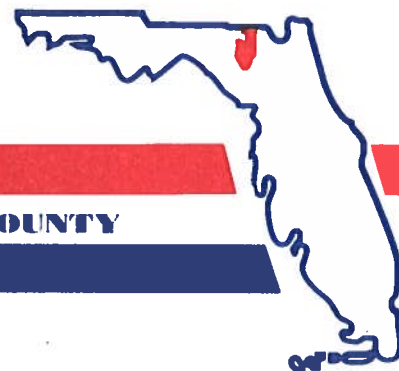
Harry Steele

Building Inspector

POST IN A CONSPICUOUS PLACE
(Business Places Only)

26187

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



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

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

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

☒ The attached elevation certificated is complete and correct.

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

SECTION A - PROPERTY INFORMATION			For Insurance Company Use:
A1. Building Owner's Name	PONCE/CARR		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	361 SW Bumble St.		Company NAIC Number
City	State	ZIP Code	
Ft. White	FL	32038	
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)			
Lot 17, Unit B, Three Rivers Est.			# 00687-000
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential			
A5. Latitude/Longitude: Lat. 29 55.918 Long. 82 46.412 Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983			
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.			
A7. Building Diagram Number 5			
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:	
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft	
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____	
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in	

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number		B2. County Name		B3. State	
120070		Columbia County		FL	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s)	B9. Base Flood Elevation(s) (Zone AO, use base flood depth)
120070225	B	1-6-88	1-6-88	AE	34
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.					
<input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input 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)?					
Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					

COMMENTS:

C3e - A/C unit elevated on wooden platform at 35.4 feet the same as the top of bottom floor elevation.

Date of Review: 8-28-09

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

AND THE Community Official: L. Dech

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

P.O. BOX 1529

LAKE CITY, FLORIDA 32056-1529

PHONE (888) 733-4466

ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>PONCE/CARR</u>		For Insurance Company Use
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Policy Number
City <u>FT. WHITE</u>	State <u>FL</u>	Company NAIC Number
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) <u>LOT 17, UNIT 8, THREE RIVERS ESTATES, COLUMBIA CO., FL PID # 00-00-00-00687-000</u>		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) <u>RESIDENTIAL</u>		
A5. Latitude/Longitude: Lat. <u>29 55.918</u> Long. <u>82 46.412</u>		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number <u>5</u>		
A8. For a building with a crawl space or enclosure(s), provide: a) Square footage of crawl space or enclosure(s) <u>NA</u> sq ft b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade <u>NA</u> c) Total net area of flood openings in A8.b <u>NA</u> sq in		
A9. For a building with an attached garage, provide: a) Square footage of attached garage <u>NA</u> sq ft b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade <u>NA</u> c) Total net area of flood openings in A9.b <u>NA</u> sq in		

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>COLUMBIA UNICORPRATED 120070</u>		B2. County Name <u>COLUMBIA</u>	B3. State <u>FL</u>		
B4. Map/Panel Number <u>120070 225</u>	B5. Suffix <u>B</u>	B6. FIRM Index Date <u>6 JAN. 1988</u>	B7. FIRM Panel Effective/Revised Date <u>6 JAN. 1988</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>34.0</u>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in Item B9: <input 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 _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2 a-g below according to the building diagram specified in Item A7.
Benchmark Utilized SAF22 Vertical Datum NGVD29
Conversion/Comments NA

Check the measurement used

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	<u>35.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	<u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	<u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	<u>NA</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	<u>29.2</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	<u>30.4</u>	<input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only)

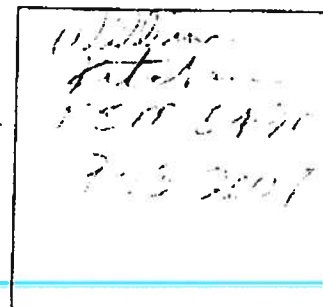
Even with broken floor
Complete C2 e elevation

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☐ Check here if comments are provided on back of form.

Certifier's Name <u>WILLIAM N. KITCHEN</u>	License Number <u>5490</u>
Title <u>PROFESSIONAL SURVEYOR AND MAPPER</u>	Company Name <u>WILLIAM N. KITCHEN, P.S.M.</u>
Address <u>152 N. MARION AVENUE</u>	City <u>LAKE CITY</u> State <u>FL</u> ZIP Code <u>32055</u>
Signature <u>William N. Kitchen</u>	Date <u>9-13-07</u> Telephone <u>386-755-7786</u>



ELEVATION CERTIFICATE

OMB No. 1660-0008
Expires February 28, 2009

Important: Read the instructions on pages 1-8.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name <u>PONCE/CARR</u>	For Insurance Company Use:
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number
	Company NAIC Number

City FT. WHITE State FL ZIP Code

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT 17, UNIT 8, THREE RIVERS ESTATES, COLUMBIA CO., FL. PID # 00-00-00-00687-000

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

A5. Latitude/Longitude: Lat. 29 55.918 Long. 82 46.412

Horizontal Datum: ☐ NAD 1927 ☐ NAD 1983

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

A7. Building Diagram Number 5

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

a) Square footage of crawl space or enclosure(s) NA sq ft

b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade NA

c) Total net area of flood openings in A8.b NA sq in

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

a) Square footage of attached garage NA sq ft

b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade NA

c) Total net area of flood openings in A9.b NA sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <u>COLUMBIA UNICORPRATED 120070</u>		B2. County Name <u>COLUMBIA</u>		B3. State <u>FL</u>	
B4. Map/Panel Number <u>120070 225</u>	B5. Suffix <u>B</u>	B6. FIRM Index Date <u>6 JAN. 1988</u>	B7. FIRM Panel Effective/Revised Date <u>6 JAN. 1988</u>	B8. Flood Zone(s) <u>AE</u>	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) <u>34.0</u>

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.

☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other (Describe) _____

B11. Indicate elevation datum used for BFE in Item B9: ☒ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☒ No
Designation Date _____ ☐ CBRS ☐ OPA

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

- C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* ☒ Finished Construction
*A new Elevation Certificate will be required when construction of the building is complete.
- C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-g below according to the building diagram specified in Item A7.
Benchmark Utilized SAF22 Vertical Datum NGVD29
Conversion/Comments NA

Check the measurement used.

- | | | |
|---|-------------|---|
| a) Top of bottom floor (including basement, crawl space, or enclosure floor) | <u>35.4</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| b) Top of the next higher floor | <u>NA</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| c) Bottom of the lowest horizontal structural member (V Zones only) | <u>NA</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| d) Attached garage (top of slab) | <u>NA</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments) | <u>NA</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| f) Lowest adjacent (finished) grade (LAG) | <u>29.2</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |
| g) Highest adjacent (finished) grade (HAG) | <u>30.4</u> | <input checked="" type="checkbox"/> feet <input type="checkbox"/> meters (Puerto Rico only) |

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

☐ Check here if comments are provided on back of form.

Certifier's Name <u>WILLIAM N. KITCHEN</u>	License Number <u>5490</u>
Title <u>PROFESSIONAL SURVEYOR AND MAPPER</u>	Company Name <u>WILLIAM N. KITCHEN, P.S.M.</u>
Address <u>152 N. MARION AVENUE</u>	City <u>LAKE CITY</u> State <u>FL</u> ZIP Code <u>32055</u>
Signature <u>William Kitchen</u>	Date <u>9-13-07</u> Telephone <u>386-755-7786</u>

William Kitchen
PLACE
PSM 5490
HERE
9-13-2007

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 FT. WHITE State FL. 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

Signature

Date

☐ Check here if attachments

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

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).

a) Top of bottom floor (including basement, crawl space, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

b) Top of bottom floor (including basement, crawl space, or enclosure) is _____ ☐ feet ☐ meters ☐ above or ☐ below the LAG.

E2. For Building Diagrams 6-8 with permanent flood openings provided in Section A Items 8 and/or 9 (see page 8 of Instructions), the next higher floor (elevation C2.b in the diagrams) of the building is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E3. Attached garage (top of slab) is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is _____ ☐ feet ☐ meters ☐ above or ☐ below the HAG.

E5. Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, and E are correct to the best of my knowledge.*

Property Owner's or Owner's Authorized Representative's Name

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. Check the measurement used in Items G8. and G9.

G1. ☐ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☐ The following information (Items G4.-G9.) is provided for community floodplain management purposes.

G4. Permit Number	G5. Date Permit Issued	G6. Date Certificate Of Compliance/Occupancy Issued
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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: _____ ☐ feet ☐ meters (PR) Datum _____

G9. BFE or (in Zone AO) depth of flooding at the building site: _____ ☐ feet ☐ meters (PR) Datum _____

Local Official's Name

Title

Community Name

Telephone

Signature

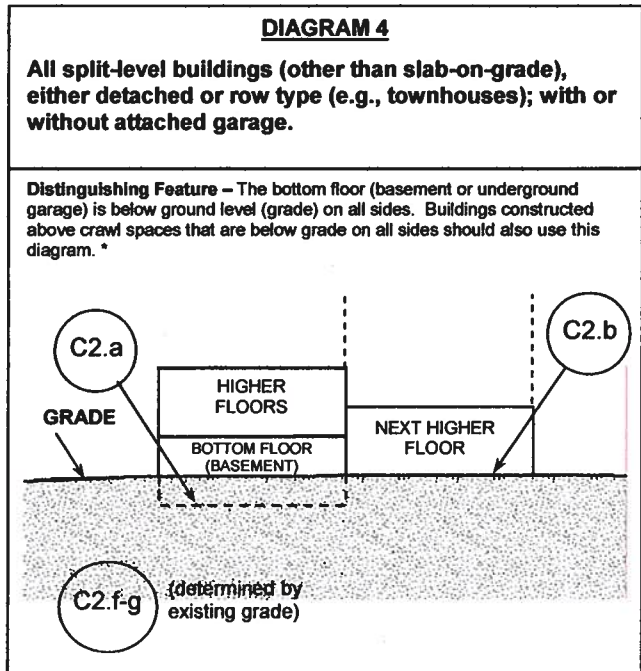
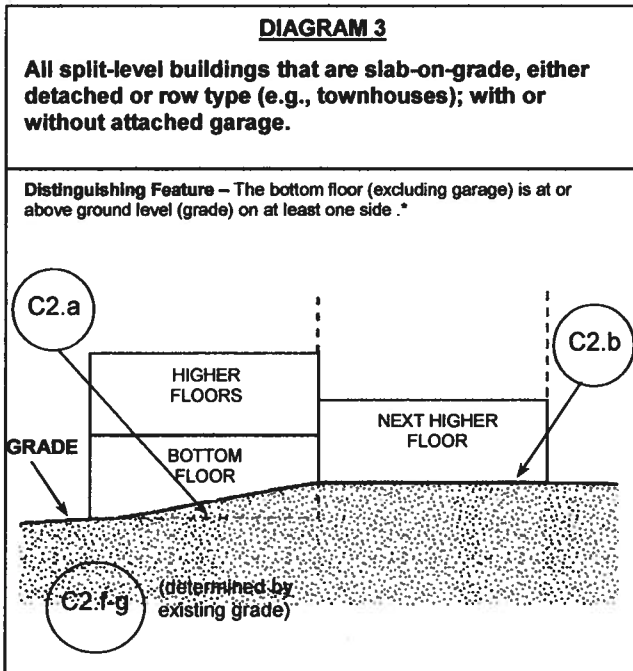
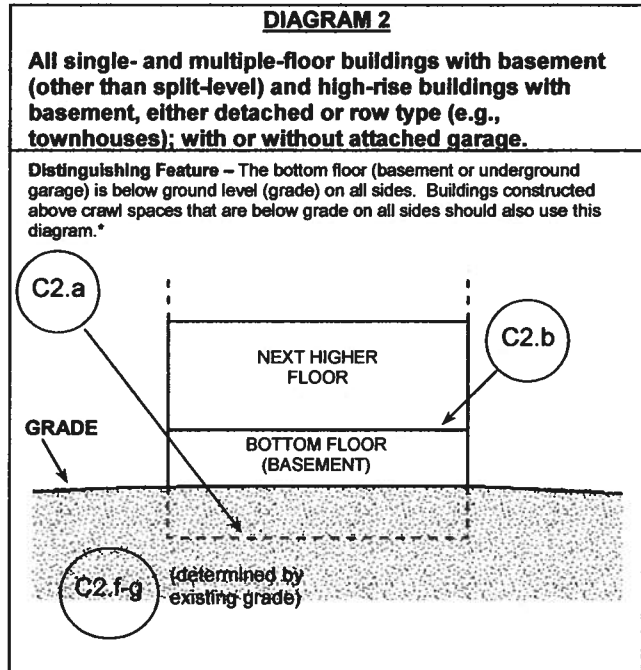
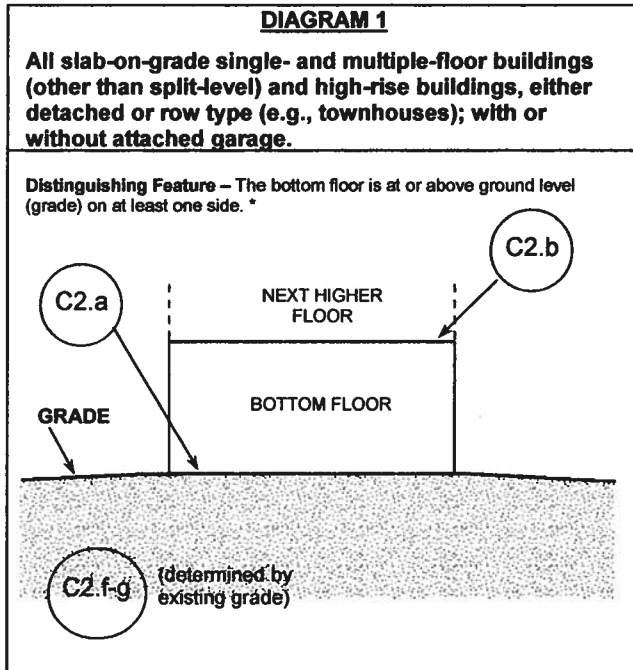
Date

Comments

BUILDING DIAGRAMS

The following eight diagrams illustrate various types of buildings. Compare the features of the building being certified with the features shown in the diagrams and select the diagram most applicable. Enter the diagram number in Item A7., the square footage of crawl space or enclosure(s) and the area of flood openings in square inches in Items A8.a-c, the square footage of attached garage and the area of flood openings in square inches in Items A9.a-c, and the elevations in Items C2.a-g.

In A zones, the floor elevation is taken at the top finished surface of the floor indicated; in V zones, the floor elevation is taken at the bottom of the lowest horizontal structural member (see drawing in instructions for Section C).



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