

CHAPTER 553

BUILDING CONSTRUCTION STANDARDS

PART I

MANUFACTURED BUILDINGS (ss. 553.35-553.42)

553.36 Definitions.--The definitions contained in this section govern the construction of this part unless the context otherwise requires.

553.37 Rules; inspections; and insignia.—

2) After the effective date of the Florida Building Code, no manufactured building, except as provided in subsection (1), may be installed in this state unless it is approved and bears the insignia of approval of the department. Approvals issued by the department under the provisions of the prior part shall be deemed to comply with the requirements of this part.

(11) Custom or one-of-a-kind prototype manufactured buildings shall not be required to have state approval but must comply with all local requirements of the governmental agency having jurisdiction at the installation site.

Johnny please review the attached plans and render a decision as to how this structure may relate to Chapter 553 of the FI statutes:
See the attached review letter I have started.

Thank you, Joe

Columbia County Building Permit Application

Revised 9-23-04

Office Use Only Application # 0507-22 Date Received 7/1/02 By JN Permit # 23465
Application Approved by - Zoning Official RSK Date 15.07.05 Plans Examiner OK JTH Date 7/15/05
Flood Zone N/A Development Permit N/A Zoning CI Land Use Plan Map Category Commercial
Comments

Applicant's Name JAMES H. EVANS Phone 386-752-1005
Address 353 SW GREEN RIDGE LN LAKE CITY, FL
Owners Name JAMES H. EVANS Phone 386-752-1005
911 Address 2196 HWY 90 WEST LAKE CITY, FL
Contractors Name Owner Phone _____
Address _____

Fee Simple Owner Name & Address JAMES H. EVANS

Bonding Co. Name & Address _____

Architect/Engineer Name & Address SHIRLEY CRISP ARCH / JANE DAVIS ENGINEERMortgage Lenders Name & Address NONECircle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progressive EnergyProperty ID Number R02634000 Estimated Cost of Construction \$25,000

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Driving Directions CORNER of S.R. 247 & US 90 WESTSECTION 36 TOWNSHIP 4 SOUTH RANGE 16 EASTCOLUMBIA, Co. FLType of Construction STEEL FRAME PHO MOUNTED Number of Existing Dwellings on Property ONETotal Acreage _____ Lot Size 1/4 AC Do you need a - Culvert Permit or Culvert Waiver or Have an Existing DriveActual Distance of Structure from Property Lines - Front 20 Side 20 Side 160 Rear 50Total Building Height 10' Number of Stories 1 Heated Floor Area 300 Roof Pitch 0

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work be performed to meet the standards of all laws regulating construction in this jurisdiction.

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

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

Owner Builder or Agent (Including Contractor) James H. EvansSTATE OF FLORIDA
COUNTY OF COLUMBIA

Sworn to (or affirmed) and subscribed before me

this 5th day of July 20 05.Personally known X or Produced Identification _____

Contractor Signature

Contractors License Number _____

Competency Card Number _____

NOTARY STAMP/SEAL



Notary Signature

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

Tax Parcel ID Number 802631000

1. Description of property: (legal description of the property and street address or 911 address)

2196 Hwy 90 West Lake City, FL
LEGAR'S SECTION 36 TOWNSHIP 4 SOUTH RANGE 16 EAST
COLUMBIA CO. FL

2. General description of improvement: MODULAR ICE VENDING UNIT

3. Owner Name & Address JAMES H. EVANS 353 SW GREEN-RIVER LN
LAKE CITY, FL Interest in Property OWNED

4. Name & Address of Fee Simple Owner (if other than owner):

5. Contractor Name _____ Phone Number _____
Address _____

6. Surety Holders Name N/A Inst: 2005018411 Date: 08/05/2005 Time: 11:59
Address _____
Amount of Bond 70K DC, P. Dewitt Cason, Columbia County B: 1054 P: 307

7. Lender Name N/A
Address _____

8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provided by section 718.13 (1)(a) 7; Florida Statutes:

Name _____ Phone Number _____
Address _____

9. In addition to himself/herself the owner designates _____ of _____
_____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) -
(a) 7. Phone Number of the designee _____

10. Expiration date of the Notice of Commencement (the expiration date is 1 (one) year from the date of recording,
(Unless a different date is specified) _____

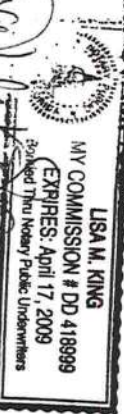
NOTICE AS PER CHAPTER 713, Florida Statutes:

The owner must sign the notice of commencement and no one else may be permitted to sign in his/her stead.

James H. Evans
Signature of Owner

Sworn to (or affirmed) and subscribed before
5th day of July, 2005

NOTARY STAMP/SEAL



Lisa M. King
Signature of Notary

COLUMBIA COUNTY BUILDING DEPARTMENT

**COMMERCIAL MINIMUM PLAN REQUIREMENTS AND CHECKLIST
FOR FLORIDA BUILDING CODE 2001 WITH AMENDMENTS**

ALL REQUIREMENTS LISTED ARE SUBJECT TO CHANGE
EFFECTIVE MARCH 1, 2002

ALL BUILDING PLANS MUST INCLUDE THE FOLLOWING ITEMS AND INDICATE COMPLIANCE WITH CHAPTER 1606 OF THE FLORIDA BUILDING CODE 2001 WITH AMENDMENTS BY PROVIDING CALCULATIONS AND DETAILS THAT HAVE THE SIGNATURE AND SEAL OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE STATE OF FLORIDA. THE FOLLOWING BASIC WIND SPEED AS PER SECTION 1606 SHALL BE USED.

- WIND SPEED LINE SHALL BE DEFINED AS FOLLOWS: THE CENTERLINE OF INTERSTATE 75
1. ALL BUILDINGS CONSTRUCTED EAST OF SAID LINE SHALL BE ----- 100 MPH
 2. ALL BUILDINGS CONSTRUCTED WEST OF SAID LINE SHALL BE ----- 110 MPH
 3. NO AREA IN COLUMBIA COUNTY IS IN A WIND BORNE DEBRIS REGION

APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL

GENERAL REQUIREMENTS: Two (2) complete sets of plans containing a floor plan, site plan, foundation plan, floor/roof framing plan or truss layout, wall sections and all exterior elevations with the following criteria and documents:

☐ **Applicant** ☒ **Plans-Examiner**

- ☐ All drawings must be clear, concise and drawn to scale ("Optional" details that are not used shall be marked void or crossed off). Square footage of different areas shall be shown on plans.
- ☐ Designers name and signature on document (FBC 104.2.1) If licensed architect or engineer, official seal shall be affixed.

☐ **Two (2) Copies of Approved Site Plan**

☐ **Minimum Type Construction (FBC Table 500)**

☐ ☐

Wind Load Engineering Summary, calculations and any details required:

- a) Plans or specifications must state compliance with FBC Section 1606
- b) The following information must be shown as per section 1606.1.7 FBC
1. Basic wind speed (MPH)
 2. Wind importance factor (I) and building category
 3. Wind exposure - if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated
 4. The applicable internal pressure coefficient
 5. Components and Cladding. The design wind pressure in terms of psf (kN/m²), to be used for the design of exterior component and cladding materials not specifically designed by the registered design professional

Fire Resistant Construction Requirements shall include:

- ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
- a) Fire resistant separations (listed system)
- b) Fire resistant protection for type of construction
- c) Protection of openings and penetrations of rated walls (listed systems)
- d) Fire blocking and draft-stopping
- e) Calculated fire resistance

Fire Suppression Systems shall include: (To be reviewed by Fire Department)

- | | |
|---|--------------------------|
| <input type="checkbox"/> a) Fire sprinklers | <input type="checkbox"/> |
| b) Fire alarm system (early warning) with name of licensed installer. If not shown on plans or not known at time of permitting, a separate permit shall be required by the licensed installer | |
| c) Smoke evacuation system schematic | <input type="checkbox"/> |
| d) Stand-pipes | <input type="checkbox"/> |
| Pre-engineered system | |
| Riser diagram | |

Life Safety Systems shall include: (To be reviewed by Fire Department)

- | | |
|--|--------------------------|
| <input type="checkbox"/> a) Occupancy load and egress capacity | <input type="checkbox"/> |
| b) Early warning | <input type="checkbox"/> |
| c) Smoke control | <input type="checkbox"/> |
| d) Stair pressurization | <input type="checkbox"/> |
| e) Systems schematic | <input type="checkbox"/> |

Occupancy Load/Egress Requirements shall include:

- | | |
|--|--------------------------|
| <input type="checkbox"/> a) Occupancy load (gross and net) | <input type="checkbox"/> |
| b) Means of egress | <input type="checkbox"/> |
| exit access, exit and exit discharge | |
| c) Stair construction/geometry and protection | <input type="checkbox"/> |
| d) Doors | <input type="checkbox"/> |
| e) Emergency lighting and exit signs | <input type="checkbox"/> |
| f) Specific occupancy requirements | <input type="checkbox"/> |
| 1. Construction requirements | |
| 2. Horizontal exits/exit passageways | |

Structural Requirements shall include:

- | | |
|---|--------------------------|
| <input type="checkbox"/> a) Soil conditions/analysis | <input type="checkbox"/> |
| b) Show type of termite treatment (termicide or alternative method) | <input type="checkbox"/> |
| c) Design loads | <input type="checkbox"/> |
| d) Wind requirements | <input type="checkbox"/> |
| e) Building envelope | <input type="checkbox"/> |
| f) Structural calculations | <input type="checkbox"/> |
| g) Foundations | <input type="checkbox"/> |
| h) Wall systems | <input type="checkbox"/> |
| i) Floor systems | <input type="checkbox"/> |
| j) Roof systems | <input type="checkbox"/> |
| k) Threshold inspection plan (if applicable) | <input type="checkbox"/> |
| l) Stair systems | <input type="checkbox"/> |

Materials shall include:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> a) Wood | <input checked="" type="checkbox"/> |
| b) Steel | <input type="checkbox"/> |
| c) Aluminum | <input type="checkbox"/> |
| d) Concrete | <input type="checkbox"/> |
| e) Plastic | <input type="checkbox"/> |
| f) Glass (mfg. Listing for wind zone including details for installation and attachments) | <input type="checkbox"/> |
| g) Masonry | <input type="checkbox"/> |
| h) Gypsum board and plaster | <input type="checkbox"/> |
| i) Insulating (mechanical) | <input type="checkbox"/> |
| j) Roofing (mfg. Listed system for wind zone with installation and attachments) | <input type="checkbox"/> |
| k) Insulation | <input type="checkbox"/> |

Accessibility Requirements shall include:

- | | | |
|--------------------------|-----------------------------------|--------------------------|
| <input type="checkbox"/> | a) Site requirements | <input type="checkbox"/> |
| <input type="checkbox"/> | b) Accessible route | <input type="checkbox"/> |
| <input type="checkbox"/> | c) Vertical accessibility | <input type="checkbox"/> |
| <input type="checkbox"/> | d) Toilet and bathing facilities | <input type="checkbox"/> |
| <input type="checkbox"/> | e) Drinking fountains | <input type="checkbox"/> |
| <input type="checkbox"/> | f) Equipment | <input type="checkbox"/> |
| <input type="checkbox"/> | g) Special occupancy requirements | <input type="checkbox"/> |
| <input type="checkbox"/> | h) Fair housing requirements | <input type="checkbox"/> |

Interior Requirements shall include:

- | | | |
|--------------------------|---|--------------------------|
| <input type="checkbox"/> | a) Interior finishes (flame spread/smoke develop) | <input type="checkbox"/> |
| <input type="checkbox"/> | b) Light and ventilation | <input type="checkbox"/> |
| <input type="checkbox"/> | c) Sanitation | <input type="checkbox"/> |

Special Systems shall include:

- | | | |
|--------------------------|---------------|--------------------------|
| <input type="checkbox"/> | a) Elevators | <input type="checkbox"/> |
| <input type="checkbox"/> | b) Escalators | <input type="checkbox"/> |
| <input type="checkbox"/> | c) Lifts | <input type="checkbox"/> |

Swimming Pools – Commercial – Plans shall be signed and sealed by a Professional Engineer registered in the State of Florida and approved by the Department of Business and Professional Regulation/Health Department indicating compliance with the Florida Administrative Code, Chapter 64E-9 And Section 424 of the Florida Building Code

Electrical:

- | | | |
|--------------------------|--|--------------------------|
| <input type="checkbox"/> | a) Electrical wiring, services, feeders and branch circuits, over-current protection, grounding, wiring methods and materials, GFCIs | <input type="checkbox"/> |
| <input type="checkbox"/> | b) Equipment | <input type="checkbox"/> |
| <input type="checkbox"/> | c) Special Occupancies | <input type="checkbox"/> |
| <input type="checkbox"/> | d) Emergency Systems | <input type="checkbox"/> |
| <input type="checkbox"/> | e) Communication Systems | <input type="checkbox"/> |
| <input type="checkbox"/> | f) Low Voltage | <input type="checkbox"/> |
| <input type="checkbox"/> | g) Load calculations | <input type="checkbox"/> |
| <input type="checkbox"/> | h) Riser diagram | <input type="checkbox"/> |

Plumbing:

- | | | |
|--------------------------|--------------------------------|--------------------------|
| <input type="checkbox"/> | a) Minimum plumbing facilities | <input type="checkbox"/> |
| <input type="checkbox"/> | b) Fixture requirements | <input type="checkbox"/> |
| <input type="checkbox"/> | c) Water supply piping | <input type="checkbox"/> |
| <input type="checkbox"/> | d) Sanitary drainage | <input type="checkbox"/> |
| <input type="checkbox"/> | e) Water heaters | <input type="checkbox"/> |
| <input type="checkbox"/> | f) Vents | <input type="checkbox"/> |
| <input type="checkbox"/> | g) Roof drainage | <input type="checkbox"/> |
| <input type="checkbox"/> | h) Back flow prevention | <input type="checkbox"/> |
| <input type="checkbox"/> | i) Irrigation | <input type="checkbox"/> |
| <input type="checkbox"/> | j) Location of water supply | <input type="checkbox"/> |
| <input type="checkbox"/> | k) Grease traps | <input type="checkbox"/> |
| <input type="checkbox"/> | l) Environmental requirements | <input type="checkbox"/> |
| <input type="checkbox"/> | m) Plumbing riser | <input type="checkbox"/> |

Mechanical:

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Energy calculation (signed and sealed by Architect or Engineer, registered in the State of Florida) |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Exhaust systems (clothes dryer exhaust, kitchen equipment exhaust, Specialty equipment exhaust) |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Equipment |
| <input type="checkbox"/> | <input type="checkbox"/> | d) Equipment location |
| <input type="checkbox"/> | <input type="checkbox"/> | e) Make-up air |
| <input type="checkbox"/> | <input type="checkbox"/> | f) Roof mounted equipment |
| <input type="checkbox"/> | <input type="checkbox"/> | g) Duct systems |
| <input type="checkbox"/> | <input type="checkbox"/> | h) Ventilation |
| <input type="checkbox"/> | <input type="checkbox"/> | i) Combustion air |
| <input type="checkbox"/> | <input type="checkbox"/> | j) Chimneys, fireplaces and vents |
| <input type="checkbox"/> | <input type="checkbox"/> | k) Appliances |
| <input type="checkbox"/> | <input type="checkbox"/> | l) Boilers |
| <input type="checkbox"/> | <input type="checkbox"/> | m) Refrigeration |
| <input type="checkbox"/> | <input type="checkbox"/> | n) Bathroom ventilation |
| <input type="checkbox"/> | <input type="checkbox"/> | o) Laboratory |

Gas:

- | | | |
|--------------------------|--------------------------|----------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Gas piping |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Venting |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Combustion air |
| <input type="checkbox"/> | <input type="checkbox"/> | d) Chimney's and vents |
| <input type="checkbox"/> | <input type="checkbox"/> | e) Appliances |
| <input type="checkbox"/> | <input type="checkbox"/> | f) Type of gas |
| <input type="checkbox"/> | <input type="checkbox"/> | g) Fireplaces |
| <input type="checkbox"/> | <input type="checkbox"/> | h) LP tank locations |
| <input type="checkbox"/> | <input type="checkbox"/> | i) Riser diagram/shut offs |

Disclosure Statement for Owner Builders

*****Notice of Commencement Required Before Any Inspections will be Done**

- | | | |
|--------------------------|--------------------------|-----------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | a) Size of pump motor |
| <input type="checkbox"/> | <input type="checkbox"/> | b) Size of pressure tank |
| <input type="checkbox"/> | <input type="checkbox"/> | c) Cycle stop valve if used |

THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS:

- 1. Building Permit Application:** A current Building Permit Application form is to be completed and submitted for all construction projects; If you were required to have a Site and Development Plan Approval, list SDP number.
- 2. Parcel Number:** The parcel number (Tax ID number) from the Property Appraiser is required.
A copy of property deed is also requested. (386) 758-1084
- 3. Environmental Health Permit or Sewer Tap Approval:** A copy of the Environmental Health permit, existing septic tank approval or sewer tap is required
- 4. City Approval:** If the project is located within the city limits of the Town of Fort White prior approval is required. The Town of Fort White approval letter is required to be submitted by the owner or contractor to this office when applying for a Building Permit. (386) 497-2321
- 5. Flood Information:** All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) **has been established** shall meet the requirements of section 8.8 of the Columbia County Land Development Regulations. Any project that is located within a flood zone where the base flood elevation (100 year flood) **has not been established** shall meet the requirements of section 8.7 of the Columbia County Land Development Regulations. **CERTIFIED FINISHED FLOOR ELEVATIONS WILL BE REQUIRED ON ANY PROJECT WHERE THE BASE FLOOD ELEVATION (100 YEAR FLOOD) HAS BEEN ESTABLISHED.**
A development permit will also be required. The development permit cost is \$50.00
- 6. Driveway Connection:** If the property does not have an existing access to a public road, then an application for a culvert permit must be made (\$25.00). Culvert installation for commercial, industrial and other uses shall conform to the approved site plan or to the specifications of a registered engineer. Joint use culverts will comply with Florida Department of Transportation specifications. If the project is to be located on a F.D.O.T. maintained road, then an F.D.O.T. access permit is required.
- 7. Suwannee River Water Management District Approval:** All commercial projects must have an SRWMD permit issued or an exemption letter, before a building will be issued.

ALL REQUIRED INFORMATION IS TO BE SUBMITTED FOR REVIEW. YOU WILL BE NOTIFIED WHEN YOUR APPLICATION AND PLANS ARE APPROVED AND READY TO PERMIT. PLEASE DO NOT EXPECT OR REQUEST THAT PERMIT APPLICATIONS BE REVIEWED OR APPROVED WHILE YOU ARE HERE – TIME WILL NOT ALLOW THIS – PLEASE DO NOT ASK

NOTICE:

ADDRESSES BY APPOINTMENT ONLY!

TO OBTAIN A 9-1-1 ADDRESS THE REQUESTER MUST CONTACT THE COLUMBIA COUNTY 9-1-1 ADDRESSING DEPARTMENT AT (386) 752-8787 FOR AN APPOINTMENT TIME AND DATE:

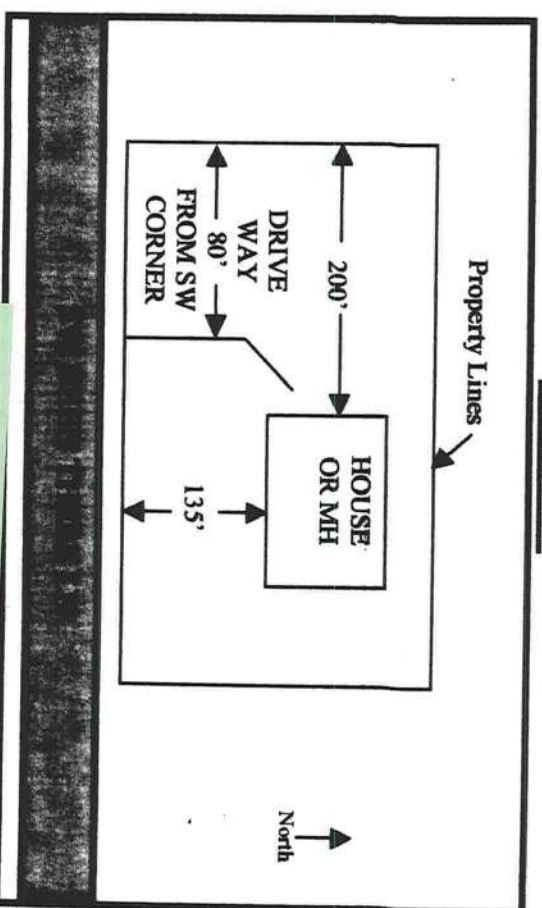
YOU CAN NOT OBTAIN A NEW ADDRESS OVER THE TELEPHONE. MUST MAKE AN APPOINTMENT!

THE ADDRESSING DEPARTMENT IS LOCATED AT 263 NW LAKE CITY AVENUE (OFF OF WEST U.S. HIGHWAY 90 WEST OF INTERSTATE 75 AT THE COLUMBIA COUNTY EMERGENCY OPERATIONS CENTER).

THE REQUESTER WILL NEED THE FOLLOWING:

1. THE PARCEL OR TAX ID NUMBER (SAMPLE: "25-4S-17-12345-123" OR "R12345-123) FOR THE PROPERTY.
2. A PLAT, PLAN, SITE PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
 - a. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
 - b. LOCATION OF THE ACCESS POINT (DRIVEWAY, ETC.) ON THE ROADWAY FROM WHICH LOCATION IS TO BE ADDRESSED WITH A DISTANCE FROM A PARALLEL PROPERTY LINE AND OR PROPERTY CORNER (SEE SAMPLE BELOW).
 - c. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



NOTE: 5 TO 7 WORKING DAYS
DEPARTMENT NEEDS

REQUIRED IF ADDRESSING
ON SITE SURVEY.

HOLDING
FOR

JOE

BOUNDARY SURVEY IN SECTION 36, TOWNSHIP 4 SOUTH
RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA.

1. ■ = CONCRETE MONUMENT POUND.
2. □ = CONCRETE MONUMENT, P.L.S. NO. 1079, SET.
3. ⊗ = POWER POLE.

SURVEYOR'S NOTES:

1. BOUNDARY BASED ON MONUMENTATION FOUND.
2. BEARINGS BASED ON D.O.T. SURVEY OF U.S. HIGHWAY 90.
3. THIS PARCEL IS IN ZONE "X" AND IS DETERMINED TO BE OUTSIDE THE 500 YEAR FLOOD PLAIN AS PER FLOOD INSURANCE RATE MAP, DATED 6 JAN. 1988, COMMUNITY PANEL NO. 120070 0175 B.
4. NO EASEMENT FOR UTILITY AND OR DRAINAGE IS SHOWN ON THIS LOT ON PLAT OF RECORD AS RECORDED IN PLAT BOOK 1, PAGE 45 OF THE PUBLIC RECORDS OF COLUMBIA COUNTY, FLORIDA.

LOCATION SKETCH
NOT TO SCALE.

SCALE : 1" = 20'

I, THE UNDERSIGNED REGISTERED LAND SURVEYOR, HEREBY CERTIFY THAT A SURVEY OF THE ABOVE DESCRIBED PROPERTY WAS MADE UNDER MY DIRECTION AND THAT THIS IS A TRUE AND CORRECT REPRESENTATION THEREOF TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN AND THAT THE IMPROVEMENTS ARE AS INDICATED HEREON. THIS SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS FOR LAND SURVEYING IN THE STATE OF FLORIDA.

(CHAPTER 21 BH-6 F.A.C.)

LAUREN E. BRITth. P.L.S.
FLA. CRT. NO. 1079

BRITT SURVEYING
1426 W. DUVAL STREET
LAKE CITY, FLORIDA
32055
(904) 752-7163

L-4398