

DATE 02/24/2012

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000029960

APPLICANT BRENDA LACY

PHONE 386.752.2547

ADDRESS 153 SW LOBLOLLY PLACE

LAKE CITY

FL 32024

OWNER CHRIS & BRENDA LACY

PHONE 752-2547

ADDRESS 153 SW LOBLOLLY PLACE

LAKE CITY

FL 32024

CONTRACTOR BRENDA LACY

PHONE 386.752.2547

LOCATION OF PROPERTY 90W, TL 247S, TL FOREST COUNTRY, TL LONG LEAF,
TR LOBLOLLY, 6TH HOUSE ON LEFT.

TYPE DEVELOPMENT POOL HOUSE/UTILITY ESTIMATED COST OF CONSTRUCTION 25000.00

HEATED FLOOR AREA TOTAL AREA 240.00 HEIGHT 1 STORIES 1

FOUNDATION CONC WALLS FRAMED ROOF PITCH 8'12 FLOOR CONC

LAND USE & ZONING RSF-2 MAX. HEIGHT 35

Minimum Set Back Requirments: STREET-FRONT 25.00 REAR 15.00 SIDE 10.00

NO. EX.D.U. 1 FLOOD ZONE X DEVELOPMENT PERMIT NO.

PARCEL ID 15-4S-16-03000-106 SUBDIVISION FOREST COUNTRY

LOT 6 BLOCK A PHASE 3RD UNIT TOTAL ACRES 0.75

OWNER

Culvert Permit No. Culvert Waiver Contractor's License Number

EXISTING BLK Applicant/Owner/Contractor

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

COMMENTS: NOC ON FILE.

Check # or Cash 4140

FOR BUILDING & ZONING DEPARTMENT ONLY

Temporary Power Foundation Monolithic (footer/Slab)

date/app. by date/app. by date/app. by

Under slab rough-in plumbing Slab Sheathing/Nailing

date/app. by date/app. by date/app. by

Framing Insulation

date/app. by date/app. by

Rough-in plumbing above slab and below wood floor Electrical rough-in

date/app. by date/app. by

Heat & Air Duct Peri. beam (Lintel) Pool

date/app. by date/app. by date/app. by

Permanent power C.O. Final Culvert

date/app. by date/app. by date/app. by

Pump pole Utility Pole M/H tie downs, blocking, electricity and plumbing

date/app. by date/app. by date/app. by

Reconnection RV Re-roof

date/app. by date/app. by date/app. by

BUILDING PERMIT FEE \$ 125.00 CERTIFICATION FEE \$ 1.20 SURCHARGE FEE \$ 1.20

MISC. FEES \$ 0.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 0.00 WASTE FEE \$

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 202.40

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.

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. A VALID PERMIT RECIEVES AN APPROVED INSPECTION EVERY 180 DAYS. WORK SHALL BE CONSIDERED NOT SUSPENDED, ABANDONED OR INVALID WHEN THE PERMIT HAS RECIEVED AN APPROVED INSPECTION WITHIN 180 DAYS OT THE PREVIOUS INSPECTION.

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

CK# 4140

Sikes

Columbia County Building Permit Application

QUESTION VF: By B2

For Office Use Only Application # 1202-36 Date Received 2/20 By JA Permit # 29960
 Zoning Official BLK Date 23 FEB 2012 Flood Zone X Land Use RES. Low Dens Zoning RSF-2
 FEMA Map # N/A Elevation N/A MFE N/A River N/A Plans Examiner J.C. Date 2.22.12
 Comments _____
☒ NOC ☒ LEH ☒ Deed or PA ☒ Site Plan ☐ State Road Info ☐ Well letter ☐ 911 Sheet ☐ Parent Parcel # _____
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ FW Comp. letter _____
 IMPACT FEES: EMS _____ Fire _____ Corr _____ ☐ Sub VF Form _____
 Road/Code _____ School _____ = TOTAL (Suspended) ☒ App Fee Paid

Septic Permit No. N/A Fax _____Name Authorized Person Signing Permit Brenda Lacy Phone 752-2547Address 153 SW Loblolly PL Lake City, FL 32024Owners Name Same as above Phone _____911 Address 153 SW Loblolly PL Lake City, FL 32024Contractors Name owner - Same as above Phone 752-2547

Address _____

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address Mark Dickey PO Box 868 LC, FL 32056Mortgage Lenders Name & Address N/ACircle the correct power company - FL Power & Light - Clay Elec. - Suwannee Valley Elec. - Progress EnergyProperty ID Number K-45-16-03000-106 Estimated Cost of Construction 25,000-Subdivision Name Forest Country Lot 6 Block A Unit _____ Phase 3rd AddnDriving Directions US 90 to CR 247, go to Forest Country @ stop sign T/L then 1st right on Loblolly, 6th house on leftNumber of Existing Dwellings on Property 1Construction of Pool House Total Acreage 3/4 Lot Size _____Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 15'Actual Distance of Structure from Property Lines - Front 130' Side 30' Side 110' Rear 100'Number of Stories 1 Heated Floor Area _____ Total Floor Area 240 Roof Pitch 8/12

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. **CODE:** Florida Building Code 2007 with 2009 Supplements and the 2008 National Electrical Code.

Page 1 of 2 (Both Pages must be submitted together.)

Revised 1-11

JLW LEFT A MSG for Brenda 2.23.12



**COLUMBIA COUNTY BUILDING DEPARTMENT
RESIDENTIAL CHECK LIST REQUIREMENTS**

6-25-09

**MINIMUM PLAN REQUIREMENTS FOR THE
FLORIDA BUILDING CODE RESIDENTIAL 2007 EFFECTIVE 1 MARCH 2009 & 2009
SUPPLEMENTS EFFECTIVE 1 MARCH 2009, ONE (1) AND TWO (2) FAMILY DWELLINGS
with Supplements and Revision, OF THE NATIONAL ELECTRICAL 2008**

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

**ALL BUILDING PLANS MUST INDICATE COMPLIANCE with the Current 2007
FLORIDA BUILDING CODES RESIDENTIAL EFFECTIVE 1 MARCH 2009 & 2009
SUPPLEMENTS EFFECTIVE 1 MARCH 2009. ALL PLANS OR DRAWINGS SHALL
PROVIDE CALCULATIONS AND DETAILS THAT HAVE THE SEAL AND
SIGNATURE OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE
STATE OF FLORIDA, OR ALTERNATE METHODOLOGIES, APPROVED BY THE
STATE OF FLORIDA BUILDING COMMISSION FOR ONE-AND-TWO FAMILY
DWELLINGS.**

**FOR DESIGN PURPOSES THE FOLLOWING BASIC WIND SPEEDS ARE PER
FIGURE R301.2(4) of the FLORIDA BUILDING CODES RESIDENTIAL (Florida Wind
speed map) SHALL BE USED.**

WIND SPEED LINE SHALL BE DEFINED AS FOLLOWS: THE CENTERLINE OF INTERSTATE 75.

ALL BUILDINGS CONSTRUCTED EAST OF SAID LINE SHALL BE ----- 100 MPH
ALL BUILDINGS CONSTRUCTED WEST OF SAID LINE SHALL BE -----110 MPH
NO AREA IN COLUMBIA COUNTY IS IN A WIND BORNE DEBRIS REGION

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL			Items to Include- Each Box shall be Circled as Applicable		
			Yes	No	N/A
1	Two (2) complete sets of plans containing the following:		<input checked="" type="checkbox"/>		
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void		<input checked="" type="checkbox"/>		
3	Condition space (Sq. Ft.)	0			
		Total (Sq. Ft.) under roof			240

Designers name and signature shall be on all documents and a licensed architect or engineer, signature and official embossed seal shall be affixed to the plans and documents as per the FLORIDA BUILDING CODES RESIDENTIAL R101.2.1

Site Plan information including:

4	Dimensions of lot or parcel of land	<input checked="" type="checkbox"/>		
5	Dimensions of all building set backs	<input checked="" type="checkbox"/>		
6	Location of all other structures (include square footage of structures) on parcel, existing or proposed well and septic tank and all utility easements.	<input checked="" type="checkbox"/>		
7	Provide a full legal description of property.	<input checked="" type="checkbox"/>		

Wind-load Engineering Summary, calculations and any details required

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
8	Plans or specifications must show compliance with FBCR Chapter 3	IIIIII	IIII	IIIIII
		YES	NO	N/A
9	Basic wind speed (3-second gust), miles per hour	✓		
10	(Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated)	✓		
11	Wind importance factor and nature of occupancy	✓		
12	The applicable internal pressure coefficient, Components and Cladding	✓		
13	The design wind pressure in terms of psf (kN/m²), to be used for the design of exterior component, cladding materials not speciffally designed by the registered design professional.	✓		

Elevations Drawing including:

14	All side views of the structure	✓		
15	Roof pitch	✓		
16	Overhang dimensions and detail with attic ventilation	✓		
17	Location, size and height above roof of chimneys			✓
18	Location and size of skylights with Florida Product Approval			✓
18	Number of stories	✓		
20A	Building height from the established grade to the roofs highest peak	✓		

Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	✓		
21	Raised floor surfaces located more than 30 inches above the floor or grade			✓
22	All exterior and interior shear walls indicated	✓		
23	Shear wall opening shown (Windows, Doors and Garage doors)	✓		
24	Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBCR 613.2 where the opening of an operable window is located more than 72 inches above the finished grade or surface below, the lowest part of the clear opening of the window shall be a minimum of 24 inches above the finished floor of the room in which the window is located. Glazing between the floor and 24 inches shall be fixed or have openings through which a 4-inch-diameter sphere cannot pass.	✓		✓
25	Safety glazing of glass where needed	✓		
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 of FBCR)			✓
27	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails			✓
28	Identify accessibility of bathroom (see FBCR SECTION 322)			✓

All materials placed within opening or onto/into exterior walls, soffits or roofs shall have Florida product approval number and mfg. installation information submitted with the plans (see Florida product approval form)

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL	Items to Include- Each Box shall be Circled as Applicable
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FBCR 403: Foundation Plans

		YES	NO	N/A
29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30	All posts and/or column footing including size and reinforcing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31	Any special support required by soil analysis such as piling.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
32	Assumed load-bearing value of soil <u>1,000</u> Pound Per Square Foot	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type) For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an grounding electrode system. Per the National Electrical Code article 250.52.3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FBCR 506: CONCRETE SLAB ON GRADE

34	Show Vapor retarder (6mil. Polyethylene with joints lapped 6 inches and sealed)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35	Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FBCR 320: PROTECTION AGAINST TERMITES

36	Indicate on the foundation plan if soil treatment is used for subterranean termite prevention or Sub mit other approved termite protection methods. Protection shall be provided by registered termiticides	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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FBCR 606: Masonry Walls and Stem walls (load bearing & shear Walls)

37	Show all materials making up walls, wall height, and Block size, mortar type	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
38	Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Metal frame shear wall and roof systems shall be designed, signed and sealed by Florida Prof. Engineer or Architect

Floor Framing System: First and/or second story

39	Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
42	Attachment of joist to girder	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
43	Wind load requirements where applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
44	Show required under-floor crawl space	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

N/A

45	Show required amount of ventilation opening for under-floor spaces			✓
46	Show required covering of ventilation opening			✓
47	Show the required access opening to access to under-floor spaces			✓
48	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges & interior of the areas structural panel sheathing			✓
49	Show Draftstopping, Fire caulking and Fire blocking			✓
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309			✓
51	Provide live and dead load rating of floor framing systems (psf).			✓

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
52	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	✓		
53	Fastener schedule for structural members per table FBCR 602.3 are to be shown	✓		
54	Show Wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing	✓		
55	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems	✓		
56	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FBCR Table 502.5 (1)	✓		
57	Indicate where pressure treated wood will be placed	✓		
58	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	✓		
59	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	✓		

FBCR :ROOF SYSTEMS:

60	Truss design drawing shall meet section FBCR 802.10 Wood trusses	✓		
61	Include a layout and truss details, signed and sealed by Florida Professional Engineer	✓		
62	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters	✓		
63	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details	✓		
64	Provide dead load rating of trusses	✓		

FBCR 802:Conventional Roof Framing Layout

N/A

65	Rafter and ridge beams sizes, span, species and spacing	✓		✓
66	Connectors to wall assemblies' include assemblies' resistance to uplift rating	✓		✓
67	Valley framing and support details			✓
68	Provide dead load rating of rafter system			✓

FBCR Table 602,3(2) & FBCR 803 ROOF SHEATHING

69	Include all materials which will make up the roof decking, identification of structural panel sheathing, grade, thickness			<input checked="" type="checkbox"/>
70	Show fastener Size and schedule for structural panel sheathing on the edges & intermediate areas			<input checked="" type="checkbox"/>

FBCR ROOF ASSEMBLIES FRC Chapter 9

71	Include all materials which will make up the roof assembles covering			<input checked="" type="checkbox"/>
72	Submit Florida Product Approval numbers for each component of the roof assembles covering			<input checked="" type="checkbox"/>

FBCR Chapter 11 Energy Efficiency Code for residential building

Residential construction shall comply with this code by using the following compliance methods in the FBCR chapter 11 Residential buildings compliance methods. **Two of the required forms are to be submitted, N1100.1.1.1 As an alternative to the computerized Compliance Method A, the Alternate Residential Point System Method hand calculation, Alternate Form 600A, may be used. All requirements specific to this calculation are located in Sub appendix C to Appendix G. Buildings complying by this alternative shall meet all mandatory requirements of this chapter. Computerized versions of the Alternate Residential Point System Method shall not be acceptable for code compliance.**

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
		YES	NO	N/A
73	Show the insulation R value for the following areas of the structure	<input checked="" type="checkbox"/>		
74	Attic space	<input checked="" type="checkbox"/>		
75	Exterior wall cavity	<input checked="" type="checkbox"/>		
76	Crawl space			<input checked="" type="checkbox"/>

HVAC information

77	Submit two copies of a Manual J sizing equipment or equivalent computation study			<input checked="" type="checkbox"/>
78	Exhaust fans shown in bathrooms Mechanical exhaust capacity of 50 cfm intermittent or 20 cfm continuous required	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>
79	Show clothes dryer route and total run of exhaust duct			<input checked="" type="checkbox"/>

Plumbing Fixture layout shown

80	All fixtures waste water lines shall be shown on the foundation plan	<input checked="" type="checkbox"/>		
81	Show the location of water heater	<input checked="" type="checkbox"/>		

Private Potable Water

82	Pump motor horse power			<input checked="" type="checkbox"/>
83	Reservoir pressure tank gallon capacity			<input checked="" type="checkbox"/>
84	Rating of cycle stop valve if used			<input checked="" type="checkbox"/>

Electrical layout shown including

85	Show Switches, receptacles outlets, lighting fixtures and Ceiling fans	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
86	Show all 120-volt, single phase, 15- and 20-ampere branch circuits outlets required to be protected by Ground-Fault Circuit Interrupter (GFCI) Article 210.8 A	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
87	Show the location of smoke detectors & Carbon monoxide detectors	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
88	Show service panel, sub-panel, location(s) and total ampere ratings	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
89	<p>On the electrical plans identify the electrical service overcurrent protection device for the main electrical service. This device shall be installed on the exterior of structures to serve as a disconnecting means for the utility company electrical service. Conductors used from the exterior disconnecting means to a panel or sub panel shall have four-wire conductors, of which one conductor shall be used as an equipment ground. Indicate if the utility company service entrance cable will be of the overhead or underground type.</p> <p>For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an Grounding electrode system. Per the National Electrical Code article 250.52.3</p>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
90	Appliances and HVAC equipment and disconnects	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
91	Show all 120-volt, single phase, 15- and 20-ampere branch circuits supplying outlets installed in dwelling unit family rooms, dining rooms, living rooms, parlors, libraries, dens, bedrooms, sunrooms, recreation rooms, closets, hallways, or similar rooms or areas shall be protected by a listed Combination arc-fault circuit interrupter , Protection device.	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>

Disclosure Statement for Owner Builders *If you as the applicant will be acting as an owner/builder under section 489.103(7) of the Florida Statutes, submit the required owner builder disclosure statement form.*

Notice Of Commencement

A notice of commencement form **recorded** in the Columbia County Clerk Office is required to be filed with the building department Before Any Inspections can be preformed.

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL	Items to Include- Each Box shall be Circled as Applicable
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THE FOLLOWING ITEMS MUST BE SUBMITTED WITH BUILDING PLANS

		YES	NO	N/A	
92	Building Permit Application A current Building Permit Application form is to be completed and submitted for all residential projects	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
93	Parcel Number The parcel number (Tax ID number) from the Property Appraiser (386) 758-1084 is required. A copy of property deed is also requested	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
94	Environmental Health Permit or Sewer Tap Approval A copy of a approved Columbia County Environmental Health (386) 758-1058	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
95	City of Lake City A permit showing an approved waste water sewer tap			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
96	Toilet facilities shall be provided for all construction sites	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
97	Town of Fort White (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

98	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 a 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 8.5.2 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.5.3 of the Columbia County Land Development Regulations			✓
99	CERTIFIED FINISHED FLOOR ELEVATIONS will be required on any project where the base flood elevation (100 year flood) has been established			✓
100	A development permit will also be required. Development permit cost is \$50.00			✓
101	Driveway Connection: If the property does not have an existing access to a public road, then an application for a culvert permit (\$25.00) must be made. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$50.00). All culvert waivers are sent to the Columbia County Public Works Department for approval or denial.	✓		
102	911 Address: If the project is located in an area where a 911 address has not been issued, then application for a 911 address must be applied for and received through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125	✓		

Section R101.2.1 of the Florida Building Code Residential:

The provisions of Chapter 1, Florida Building Code, Building shall govern the administration and enforcement of the Florida Building Code, Residential.

Section 105 of the Florida Building Code defines the:

Time limitation of application.

An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

Single-family residential dwelling.

Section 105.3.4 A building permit for a single-family residential dwelling must be issued within 30 working days of application therefor unless unusual circumstances require a longer time for processing the application or unless the permit application fails to satisfy the Florida Building Code or the enforcing agency's laws or ordinances.

Permit intent.

Section 105.4.1: A permit issued shall be constructed to be a license to proceed with the work and not as authority to violate, cancel, alter or set aside any of the provisions of the technical codes, nor shall issuance of a permit prevent the building official from thereafter requiring a correction of errors in plans, construction or violations of this code. Every permit issued shall become invalid unless the work authorized by such permit is commenced within six months after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of six months after the time the work is commenced.



JEFF ATWATER, CHIEF FINANCIAL OFFICER
FLORIDA DEPARTMENT OF FINANCIAL SERVICES

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Exemption Detail Page

This database was last updated Thursday, February 23, 2012 11:17 PM.

[Return to Previous Page](#)

Exemption Details						
Name	Title	Effective Date	*Termination Date	Exemption Type	**Business Activities	Employer Name
✓ WILLIS W SIKES	PR	Feb 8 2012	Feb 7 2014	Construction	Click Here to View Activities Listed on Exemption	SIKES ENVIROSEAL INSULATION INC
WILLIS W SIKES	SP	Feb 27 2002	Dec 31 2003	Construction	Click Here to View Activities Listed on Exemption	SIKES INSULATION
WILLIS W SIKES	SP	Jan 13 2000	Jan 12 2002	Construction	Click Here to View Activities Listed on Exemption	SIKES INSULATION
WILLIS W SIKES	PR	Feb 20 2010	Feb 20 2012	Construction	Click Here to View Activities Listed on Exemption	SIKES INSULATION INC
WILLIS W SIKES	PR	Feb 21 2008	Feb 20 2010	Construction	Click Here to View Activities Listed on Exemption	SIKES INSULATION INC
WILLIS W SIKES	PR	Feb 26 2006	Feb 21 2008	Construction	Click Here to View Activities Listed on Exemption	SIKES INSULATION INC
WILLIS W SIKES	PR	Feb 27 2004	Feb 26 2006	Construction	Click Here to View Activities Listed on Exemption	SIKES INSULATION INC
WILLIS W SIKES	DI	Jan 1 2004	Feb 27 2004	Construction	Click Here to View Activities Listed on Exemption	SIKES INSULATION INC
*Termination may be through the revocation of the exemption, or expiration of the exemption.						
**The exemption only applies to the business activities listed on the exemption.						

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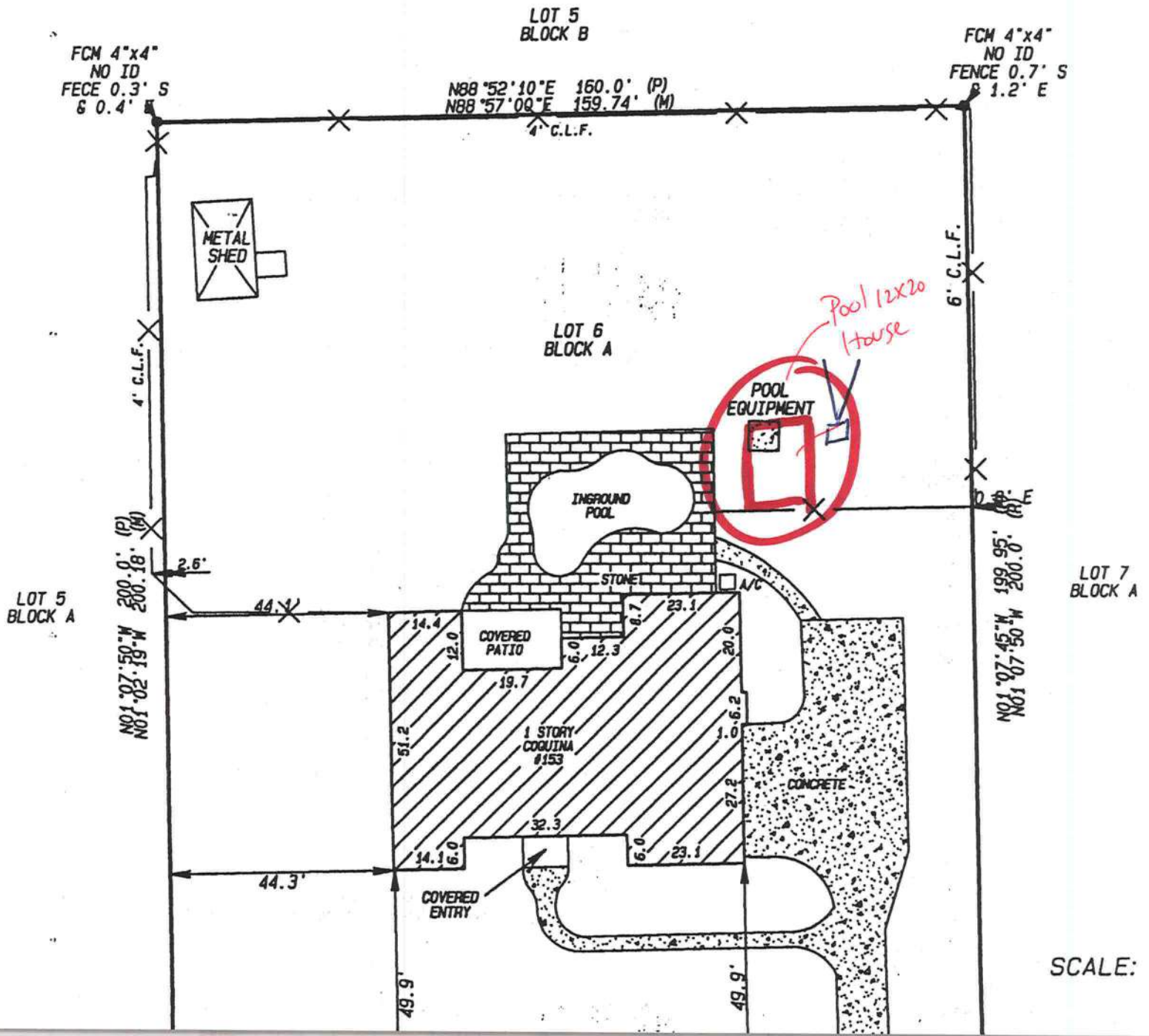
Flagged

Jeff = 2.24.12

#290

SIKES

BLOCK A, FOREST COUNTRY THIRD ADDITION ACCORDING TO THE PLAT 1
RECORDED IN PLAT BOOK 6, PAGES 55, AND 55A OF THE PUBLIC RECORD
COLUMBIA COUNTY, FLORIDA.



11/22/2011 12:09

3867588920

BRYAN ZECHER CONST

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER

1202-36

CONTRACTOR

BRENDA Lacy

PHONE

386-752-2547

THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

<input checked="" type="checkbox"/> ELECTRICAL 76	Print Name: Marc Matthews License #: ER-0014352	Signature: <i>Marc Matthews</i> Phone #: 344-2029
<input checked="" type="checkbox"/> MECHANICAL/ A/C	Print Name: Glen Jones License #: CAC 051186	Signature: <i>Glen Jones</i> Phone #: 867-0424 N/A
<input checked="" type="checkbox"/> PLUMBING/ GAS 1081	Print Name: Wolfe Plumbing License #: CFC 051621	Signature: <i>Wolfe</i> Phone #: 623-7148
<input checked="" type="checkbox"/> ROOFING 187	Print Name: Mac Johnson License #: RC 0061384	Signature: <i>Mac Johnson</i> Phone #: 352-472-4943
SHEET METAL	Print Name: N/A License #: N/A	Signature: _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name: N/A License #: N/A	Signature: _____ Phone #: _____
SOLAR	Print Name: N/A License #: N/A	Signature: _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER	P12053658263-0	Perrish Ent (623-0500)	
FRAMING			
INSULATION	000240	Sykes Insulation (365-1404)	
STUCCO	0256	Ron David (623-0547)	
DRYWALL	000345	Kim Heitman (365-0103)	
PLASTER	N/A		
CABINET INSTALLER		Mac Johnson (623-472-4943)	
<input checked="" type="checkbox"/> PAINTING	000330	Bobby Touchan (466-4686)	<i>Bobby Touchan</i>
ACOUSTICAL CEILING	N/A		
GLASS	N/A		
PAINTING	710	Mac Johnson (623-472-4943)	
FLOOR COVERING	710	Mac Johnson (623-472-4943)	
STUMP/INVL SIDING	000106	Mike Nicholson (623-2316)	
GARAGE DOOR	000106	Mac Johnson (623-472-4943)	
METAL BLDG ERECTOR	N/A		

F. S. 440.103 Building permits; Identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Contractor Form: Subcontractor Form: 6/08

11/22/2011 TUE 11:26 [TX/RX NO 7751] 002

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1202-36 CONTRACTOR Brenda Lee PHONE 386.752.254
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is **REQUIRED** that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>Marc Matthews</u>	Signature _____	Phone # _____
	License #: _____		
MECHANICAL/ A/C	Print Name <u>Steve Jones</u>	Signature <u>[Signature]</u>	Phone # <u>[Number]</u>
	License #: <u>CBC051486</u>		
PLUMBING/ GAS	Print Name <u>Wolf Plumbing</u>	Signature <u>[Signature]</u>	Phone #: <u>386-935-0616</u>
	License #: <u>CFC051621</u>		
ROOFING	Print Name <u>McC Johnson Roofing</u>	Signature _____	Phone #: _____
	License #: _____		
SHEET METAL	Print Name <u>N/A</u>	Signature _____	Phone #: _____
	License #: _____		
FIRE SYSTEM/ SPRINKLER	Print Name <u>N/A</u>	Signature _____	Phone #: _____
	License #: _____		
SOLAR	Print Name <u>N/A</u>	Signature _____	Phone #: _____
	License #: _____		

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	000097	Kenneth Linder	[Signature]
CONCRETE FINISHER		Larry Parrish Ent.	[Signature]
✓ FRAMING <u>853</u>	<u>CBC054575</u>	Bryan Zacher	<u>[Signature]</u>
✓ INSULATION <u>240</u>	<u>240</u>	• Will Sikes	Will Sikes 22012 (Ex. Card)
STUCCO		N/A	
✓ DRYWALL <u>345</u>	<u>345</u>	• Kim Heitzman (wade)	<u>[Signature]</u>
PLASTER		N/A	
✓ CABINET INSTALLER <u>853</u>	<u>CBC054575</u>	Bryan Zacher	<u>[Signature]</u>
PAINTING			
ACOUSTICAL CEILING		N/A	
GLASS		N/A	
✓ CERAMIC TILE <u>853</u>	<u>CBC054575</u>	Bryan Zacher	<u>[Signature]</u>
✓ FLOOR COVERING <u>853</u>	"	"	<u>[Signature]</u>
✓ ALUM/VINYL SIDING	<u>CBC005166</u>	• Mike Nicholson	<u>[Signature]</u>
✓ GARAGE DOOR <u>99</u>	<u>CBC01258205</u>	DD Garage Door	<u>[Signature]</u>
METAL BLDG ERECTOR		N/A	

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SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1202-36 CONTRACTOR Brenda Lacy PHONE 386 752 2547
 THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT

In Columbia County one permit will cover all trades doing work at the permitted site. It is REQUIRED that we have records of the subcontractors who actually did the trade specific work under the permit. Per Florida Statute 440 and Ordinance 89-6, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

Any changes, the permitted contractor is responsible for the corrected form being submitted to this office prior to the start of that subcontractor beginning any work. Violations will result in stop work orders and/or fines.

ELECTRICAL	Print Name <u>Marc Matthews</u> License #: <u>ER-0014352</u>	Signature <u>[Signature]</u> Phone #: <u>344-2029</u>
MECHANICAL/ A/C <input checked="" type="checkbox"/>	Print Name <u>Glenn Jones</u> License #: <u>CAC-05486</u>	Signature <u>[Signature]</u> Phone #: <u>867-0424</u> NA
PLUMBING/ GAS	Print Name <u>Wolfe Plumbing</u> License #: <u>CFC 051621</u>	Signature _____ Phone #: <u>623-7798</u>
ROOFING	Print Name <u>Mac Johnson</u> License #: <u>RC 0061384</u>	Signature _____ Phone #: <u>352-472-4943</u>
SHEET METAL	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____
SOLAR	Print Name <u>N/A</u> License #: _____	Signature _____ Phone #: _____

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON			
CONCRETE FINISHER	<u>P62053658</u>	<u>263-0 Perrish Ent (623-0500)</u>	
FRAMING			
INSULATION	<u>000240</u>	<u>Sykes Insulation (365-1404)</u>	<u>[Signature]</u>
STUCCO	<u>0256</u>	<u>Ron David (623-0547)</u>	
DRYWALL	<u>000345</u>	<u>Kim Heitman (365-0103)</u>	<u>[Signature]</u>
PLASTER	<u>N/A</u>		
CABINET INSTALLER		Marble Today (404-614-1815)	
PAINTING	<u>000330</u>	<u>Bobby Touchton (466-4680)</u>	<u>[Signature]</u>
ACOUSTICAL CEILING	<u>N/A</u>		
GLASS	<u>N/A</u>		
CERAMIC TILE	<u>CB054575</u>	<u>Bryan Zacher Const.</u>	<u>[Signature]</u>
FLOOR COVERING	710	Mark Van (Grown Van)	[Signature]
ALUM/VINYL SIDING	000106	Mike Nicholson (623-2306)	[Signature]
GARAGE DOOR	000294	D & D Garage Drs (Kevin)	[Signature]
METAL BLDG ERECTOR	<u>N/A</u>		

F. S. 440.103 Building permits; identification of minimum premium policy.--Every employer shall, as a condition to applying for and receiving a building permit, show proof and certify to the permit issuer that it has secured compensation for its employees under this chapter as provided in ss. 440.10 and 440.38, and shall be presented each time the employer applies for a building permit.

Permit Application Number 12-0055

PART II - SITEPLAN

Permit Application Number 10-000

hwy

40 feet.

SEPTIC 245

200'

WALL 15'

SWALE

PART II - SITEPLAN

160'

5'

31'

20'

200'

WALL 245'

110'

POOL

EXISTING SFR

CONCRETE DRIVE

124'

61'

22'

118'

110'

160'

SEPTIC 245

SEPTIC 20'

PROPOSED

200'

WALL 15'

SWALE

LOG 20114

Notes:

(E) EXISTING (P) PROPOSED

Site Plan submitted by:

Plan Approved

Not Approved

MASTER CONTRACTOR

Date 2.6.12

By Sacki Ford Env Health Director Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

LOT 6 BLOCK A FOREST COUNTRY
3RD ADDITION, ORB 816-429
964-394.
LACY BRENDA & CHRIS J
153 SW LOBLOLLY PLACE
LAKE CITY, FL 32024
15-4S-16-03000-106
Columbia County
2012 R
CARD 001 of 001
BY JEFF

PRINTED 1/16/2012 22:17
APPR 12/14/2010 TWSO
12/14/2010 TWSO

BUSE	000100	SINGLE FAM	AE? Y	2467	HTD AREA	143.628	INDEX	15416.03	FOREST COUNTRY	PUSE	000100	SINGLE FAMILY
MOD	1	SFR		2895	EFF AREA	67.505	E-RATE	100.000	INDX	STR 15-4S-16E		
EXW	10	ABOVE AVG.		195427	RCN			1996	AYB	MKT AREA 06		166,112 BLDG
RSTR	08	IRREGULAR		85.00	%GOOD	166,112	B BLDG VAL	1996	EYB	(PUDI		28,682 XFOB
RCVR	03	COMP SHNGL								AC		17,625 LAND
INTW	05	DRYWALL								NTCD		0 CLAS
FLO	14	CARPET								APPR CD		0 MKTUSE
30%	15	HARDTILE								CNDO		212,419 JUST
HTTP	04	AIR DUCTED								SUBD		212,419 APPR
A/C	03	CENTRAL								BLK		0 SOHD
QUAL	09	SPCD								LOT		0 ASSD
FNDN	09	DEPR								MAP# 46-A		0 EXPT
SIZE	04	IRREGULAR								HX MH		0 COTXBL
CEIL	N/A	UD-1								TXDT	003	
ARCH	N/A	UD-2										
FRME	01	NONE										
KTCH	01	UD-5										
WINDO	N/A	UD-6										
CLAS	N/A	UD-7										
OCC	N/A	UD-8										
COND	03	UD-9										
SUB	A-AREA	% E-AREA										
BAS96	2467	100										
FG96	621	55										
FOP96	285	30										

AE BN	CODE	DESC	LEN	WID	HGHT	QTY	QL	YR	ADJ	FIELD CK:	UNITS	UT	PRICE	ADJ	UT	PR	SPCD	%GOOD	XFOB	VALUE
Y	0166	CONC, PAVMT	12	20		1		1996	1.00		2610.000	UT	2.000					100.00		5,220
Y	0296	SHED METAL	1			1		2007	1.00		240.000	SF	12.000					100.00		2,880
Y	0280	POOL R/CON	33			1		2010	1.00		693.000	SF	33.000					90.00		20,582
TOTAL	3373	FEATURES	166112																	

AE	CODE	DESC	ZONE	ROAD	TOPO	UTIL	UD1	UD2	UD3	FRONT	DEPTH	FIELD	CK:	UNITS	UT	PRICE	ADJ	UT	PR	SPCD	%GOOD	XFOB	VALUE
Y	000100	SFR	RSF-1	0002	0002	0				160	200	1.00	1.00	1.00	1.00	1.000	LT	17625.600		17625.60			17,625

L001 - 0.73 AC.

inst:2002019757 Date:10/08/2002 Time:08:53
Doc Stamp-Deed : 1393.00
 DC, P. DeWitt Cason, Columbia County B:964 P:394

Individual to Individual

Alton Russell Adams and Shirley A. Adams, husband wife hereinafter called the grantor, to

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporation)

Lot 6, Block "A" Forest Country Third Addition, a subdivision as per plat thereof recorded in Plat Book 6, Page 55-55A, Public Records of Columbia County, Florida.

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

IN WITNESS WHEREOF, the said grantor has signed and sealed these presents the day and year first above written.

Witness: Angela M. Osburne

Alton Russell Adams
Alton Russell Adams

Witness: Kipley Smith

Shirley A. Adams
Shirley A. Adams

The foregoing instrument was acknowledged before me this 30th day of September, 2002 by Alton Russell Adams and Shirley A. Adams, husband wife personally known to me or, if not personally known to me, who produced a Driver's License for identification and who did not take an oath.

K. Smith
Notary Public Kipley Smith

Prepared by:
Michael H. Harrell
Abstract & Title Services, Inc.
382 SW Baya Drive
Lake City, FL 32025

NOTICE OF COMMENCEMENT

Tax Parcel Identification Number:

15-45-16-03000-106

Clerk's Office Stamp

Inst: 201212002577 Date: 2/20/2012 Time: 9:30 AM
DC.P.DeWitt Cason, Columbia County Page 1 of 1 B:1230 P:119

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): 153 SW Loblolly PL Lake City, FL 32024 Forest Country Lot 6-A
a) Street (job) Address: 153 SW Loblolly PL Lake City, FL 32024 3rd addition
2. General description of improvements: Pool house
3. Owner Information
a) Name and address: Chris & Brenda Lacy
b) Name and address of fee simple titleholder (if other than owner) 153 SW Loblolly PL Lake City, FL 32024
c) Interest in property Fee Simple
4. Contractor Information
a) Name and address: Bryan Zeher/Chris Lacy PO Box 815 Lake City, FL 32056
b) Telephone No.: 727-8653 Fax No. (Opt.) _____
5. Surety Information
a) Name and address: N/A
b) Amount of Bond: _____
c) Telephone No.: _____ Fax No. (Opt.) _____
6. Lender
a) Name and address: N/A
b) Phone No.: _____
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(1)(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. Brenda K. Lacy
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
Brenda K. Lacy
Printed Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 20th day of February, 2012, by:
Brenda Lacy as Homeowner (type of authority, e.g. officer, trustee, attorney
fact) for Brenda Lacy (name of party on behalf of whom instrument was executed).

Personally Known _____ OR Produced Identification ☒ Type EL

Notary Signature Laurie Hodson Notary Stamp or Seal:



---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.

Brenda K. Lacy
Signature of Natural Person Signing (in line #10 above.)



COLUMBIA COUNTY BUILDING DEPARTMENT

135 NE Hernando Ave., Suite B-21

Lake City, FL 32055

Office: 386-758-1008 Fax: 386-758-2160

OWNER BUILDER DISCLOSURE STATEMENT

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed and bonded in Florida and to list his or her license numbers on permits and contracts.

I understand that I may build or improve a one-family or two-family residence or farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

I understand that it is frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 850-487-1395 or Internet website address <http://www.myflorida.com/dbpr/pro/cilb/index.html> for more information about licensed contractors.

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

I agree to notify Columbia County Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

I understand that if I hire subcontractors they must be licensed for that type of work in Columbia County, ex: framing, stucco, masonry, and state registered builders. Registered Contractors must have a minimum of \$300,000.00 in General Liability insurance coverage and the proper workers' compensation. Specialty Contractors must have a minimum of \$100,000.00 in General Liability insurance coverage and the proper workers' compensation coverage.

Columbia County Building Permit Application

TIME LIMITATIONS OF APPLICATION: An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

TIME LIMITATIONS OF PERMITS: Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 180 days after the time work is commenced. A valid permit receives an approved inspection every 180 days. Work shall be considered not suspended, abandoned or invalid when the permit has received an approved inspection within 180 days of the previous approved inspection.

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment: According to Florida Law, those who work on your property or provide materials, and are not paid-in-full, have a right to enforce their claim for payment against your property. This claim is known as a construction lien. If your contractor fails to pay subcontractors or material suppliers or neglects to make other legally required payments, the people who are owed money may look to your property for payment, even if you have paid your contractor in full. This means if a lien is filed against your property, it could be sold against your will to pay for labor, materials or other services which your contractor may have failed to pay.

NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE: **YOU ARE HEREBY NOTIFIED** as the recipient of a building permit from Columbia County, Florida, you will be held responsible to the County for any damage to sidewalks and/or road curbs and gutters, concrete features and structures, together with damage to drainage facilities, removal of sod, major changes to lot grades that result in ponding of water, or other damage to roadway and other public infrastructure facilities caused by you or your contractor, subcontractors, agents or representatives in the construction and/or improvement of the building and lot for which this permit is issued. No certificate of occupancy will be issued until all corrective work to these public infrastructures and facilities has been corrected.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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 WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNERS CERTIFICATION: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

NOTICE TO OWNER: There are some properties that may have deed restrictions recorded upon them. These restrictions may limit or prohibit the work applied for in your building permit. You must verify if your property is encumbered by any restrictions or face possible litigation and or fines.

(Owners Must Sign All Applications Before Permit Issuance.)

Brenda K. Lucy
Owners Signature

****OWNER BUILDERS MUST PERSONALLY APPEAR AND SIGN THE BUILDING PERMIT.**

CONTRACTORS AFFIDAVIT: By my signature I understand and agree that I have informed and provided this written statement to the owner of all the above written responsibilities in Columbia County for obtaining this Building Permit including all application and permit time limitations.

Contractor's Signature (Permitee)

Contractor's License Number _____
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this _____ day of _____ 20____.
Personally known _____ or Produced Identification _____

SEAL:

State of Florida Notary Signature (For the Contractor)

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to Columbia County Building Department.

TYPE OF CONSTRUCTION

- ☐ Single Family Dwelling ☐ Two-Family Residence ☐ Farm Outbuilding
☐ Addition, Alteration, Modification or other Improvement
☐ Commercial, Cost of Construction _____ Construction of _____
☒ Other Pool House

I Brenda K. Lacy, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes allowing this exception for the construction permitted by Columbia County Building Permit.

Brenda K. Lacy Date 02/20/2012
Owner Builder Signature Date

NOTARY OF OWNER BUILDER SIGNATURE

The above signer is personally known to me or produced identification ✓

Notary Signature L. Hodson Date 2.20.12



FOR BUILDING DEPARTMENT USE ONLY

I hereby certify that the above listed owner/builder has been given notice of the restriction stated above.

Building Official/Representative [Signature]

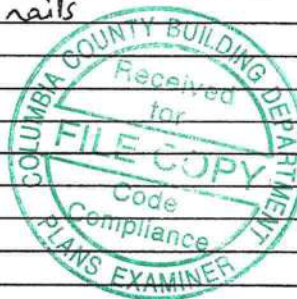
PRODUCT APPROVAL SPECIFICATION SHEET

Location: Lake City, FL

Project Name: _____

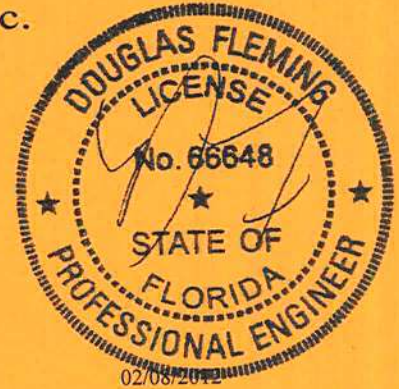
As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit on or after April 1, 2004. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. More information about statewide product approval can be obtained at www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
1. Swinging	Thermo-Tru	Exterior Hinged doors	FL 5262-R2
2. Sliding	P&T	Sliding Glass Doors	FL 251-R15
3. Sectional	Clb Pany	Garage Doors	FL 5675-R6
4. Roll up			
5. Automatic			
6. Other			
B. WINDOWS			
1. Single hung	P&T	Window Low E	FL 236-R16
2. Horizontal Slider	P&T	Window Low E	FL 242-R12
3. Casement			
4. Double Hung			
5. Fixed	P&T	Window Low E	FL 243-R10
6. Awning			
7. Pass-through			
8. Projected			
9. Mullion			
10. Wind Breaker			
11. Dual Action			
12. Other			
C. PANEL WALL			
1. Siding	CertainTeed	Cement Fibered Siding	FL 1573-R2
2. Soffits	Kaycan	Alum soffit / fascia	FL 12198-R1
3. EIFS	Sto	Stucco/accucoat finish	FL 7229-R1
4. Storefronts			
5. Curtain walls			
6. Wall louver			
7. Glass block			
8. Membrane			
9. Greenhouse			
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles	CertainTeed	Arch Shingles 30 yr	FL 5444-R3
2. Underlayments	GAF	Tar paper	FL 9637-R1
3. Roofing Fasteners	OmG	Roofing nails	FL 699-R3
4. Non-structural Metal Rf			
5. Built-Up Roofing			
6. Modified Bitumen			
7. Single Ply Roofing Sys			
8. Roofing Tiles			
9. Roofing Insulation			
10. Waterproofing			
11. Wood shingles /shakes			
12. Roofing Slate			



ITW Building Components Group, Inc.

1950 Marley Drive Haines City, FL 33844
Florida Engineering Certificate of Authorization Number: 0 278
Florida Certificate of Product Approval # FL1999
Page 1 of 1 Document ID:1UJF487-Z0108075200



Truss Fabricator: Anderson Truss Company
Job Identification: 12-028--Fill in later BRYAN ZECHER/POOL HOUSE -- , **
Truss Count: 2
Model Code: Florida Building Code 2007 and 2009 Supplement
Truss Criteria: FBC2007Res/TPI-2002(STD)
Engineering Software: Alpine Software, Version 10.03.
Structural Engineer of Record: The identity of the structural EOR did not exist as of
Address: the seal date per section 61G15-31.003(5a) of the FAC
Minimum Design Loads: Roof - 40.0 PSF @ 1.25 Duration
Floor - N/A
Wind - 110 MPH ASCE 7-05 -Closed

Notes:

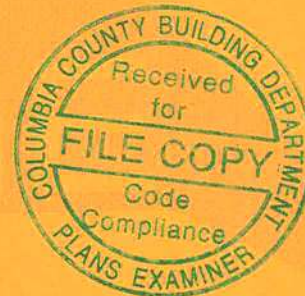
1. Determination as to the suitability of these truss components for the structure is the responsibility of the building designer/engineer of record, as defined in ANSI/TPI 1
2. The drawing date shown on this index sheet must match the date shown on the individual truss component drawing.
3. As shown on attached drawings; the drawing number is preceded by: HCUSR487

Details: A1101505-GBLLETIN-

Douglas Fleming
-Truss Design Engineer-

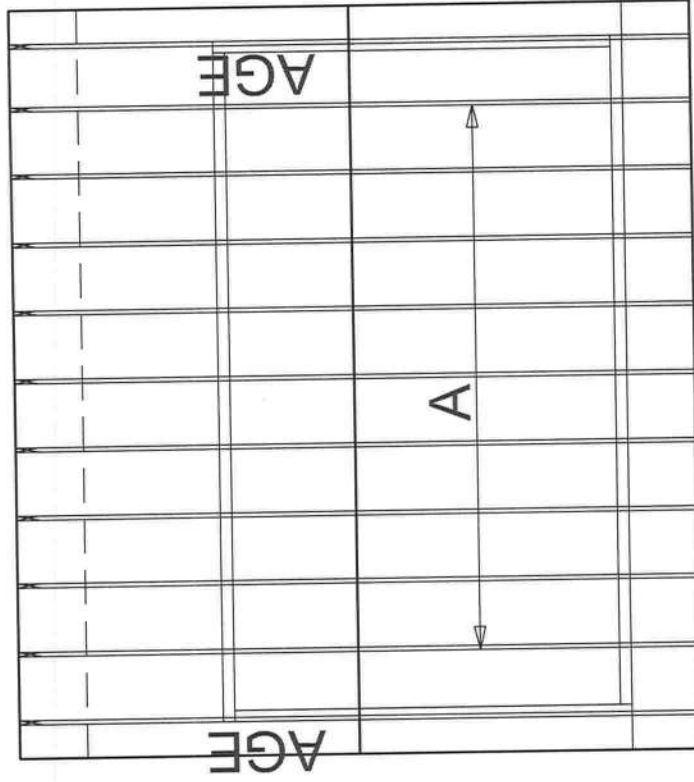
1950 Marley Drive
Haines City, FL 33844

#	Ref	Description	Drawing#	Date
1	16233--A		12039001	02/08/12
2	16234--AGE		12039002	02/08/12



Roof Plane Sheathing Area = 529 sq. ft
Gable Sheathing Area = 97 sq. ft

20'



12' 4'

BRYAN ZECHE/ POOL HOUSE

JOB DESCRIPTION: Fill in later
/ BRYAN ZECHE/POOL HOUSE

JOB NO:
12-028

PAGE NO:
1 OF 1

(12-028--Fill) in later BRYAN ZECHER/POOL HOUSE -- . ** - A)

Top chord 2x4 SP #1
Bot chord 2x4 SP #1
Webs 2x4 SP #3

Special loads

----- (Lumber
Dur.Fac.=1.25 / Plate Dur.Fac.=1.25)
TC- From 64 plf at 1.50 to 64 plf at 8.00
TC- From 64 plf at 8.00 to 64 plf at 17.50
BC- From 5 plf at 1.50 to 5 plf at 0.00
BC- From 20 plf at 0.00 to 20 plf at 4.49
BC- From 60 plf at 4.49 to 60 plf at 13.20
BC- From 20 plf at 13.20 to 20 plf at 16.00
BC- From 5 plf at 16.00 to 5 plf at 17.50

Wind loads and reactions based on MWFRS with additional C&C member 4x6== design.

110 mph wind, 15.00 ft mean hgt, ASCE 7-05, CLOSED bldg. Located anywhere in roof, CAT II, Exp B, wind TC DL-5.0 psf, wind BC DL-5.0 psf. Iw=1.00 GCpl(+/-)=0.18

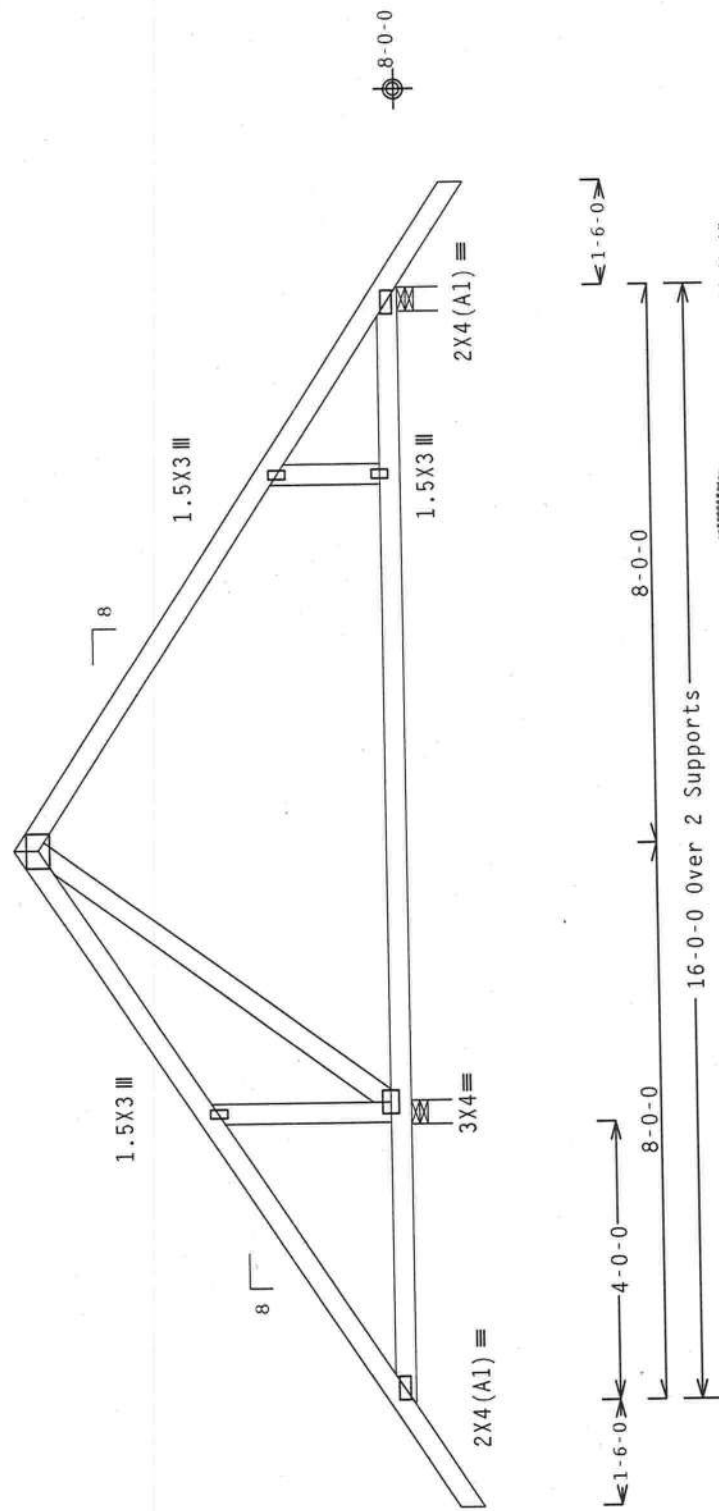
Left cantilever is exposed to wind

Roof overhang supports 2.00 psf soffit load.

Calculated horizontal deflection is 0.23" due to live load and 0.16" due to dead load.

Bottom chord checked for 10.00 psf non-concurrent live load.

Deflection meets L/240 live and L/180 total load.



R-632 U=68 W-4"

R-1267 U=136 W-4"
RL=162/-162

Design Crit: FBC2007Res/TPI-2002 (STD)
FT/RT=10% (0%) / 0 (0)

Scale = .375" / Ft.

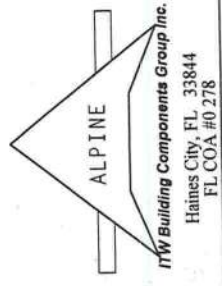
REF	R487 - -	16233
DATE	02/08/12	
DRW	HCUSR487	12039001
HC-ENG	JB/DF	
SEQN-	267900	
JREF-	1UJF487_Z01	



WARNING READ AND FOLLOW ALL NOTES ON THIS SHEET
FURNISH THIS DESIGN TO ALL CONTRACTORS INCLUDING INSTALLERS.

Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Follow the latest edition of BCSI (Building Component Safety Information, by IPI and WICA) practices prior to performing these functions. Installers shall provide 1" sheathing and bottom chord unless noted otherwise. Top chord shall have properly attached and secured bracing. Webs shall have a properly attached rigid ceiling. B3, B7 or B10, as applicable.

ITW Building Components Group Inc. (ITWBCG) shall not be responsible for any deviation from the any failure to build the truss in conformance with the design shown above and on the Job. Details, unless otherwise noted, shall be in accordance with the design shown above and on the Job. Responsibility of the Building Designer per ANSI/TPI 1 Sec.2. For more information, visit the general notes page: ITW-BCG: www.itwbcg.com; IPI: www.ipinst.org; WICA: www.iccsafe.org; ICC: www.iccsafe.org



PLT TYP. Wave

(12-028--Fill in later BRYAN ZECHER/POOL HOUSE --, ** - AGE)

Top chord 2x4 SP #1
Bot chord 2x4 SP #1
Webs 2x4 SP #3
:Stack Chord SC1 2x4 SP #1::Stack Chord SC2 2x4 SP #1:
Left cantilever is exposed to wind

Wind loads and reactions based on MWFRS with additional C&C member design.

Roof overhang supports 2.00 psf soffit load.

See DWGS A11015050109 & 68LLETIN0109 for more requirements.

Truss passed check for 20 psf additional bottom chord live load in areas with 42'-high x 24'-wide clearance.

Bottom chord checked for 10.00 psf non-concurrent live load.

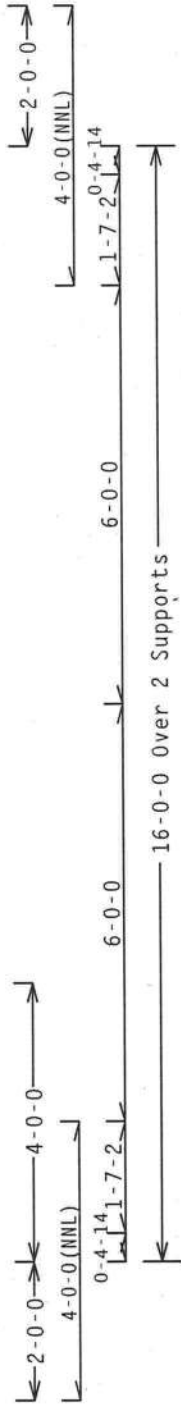
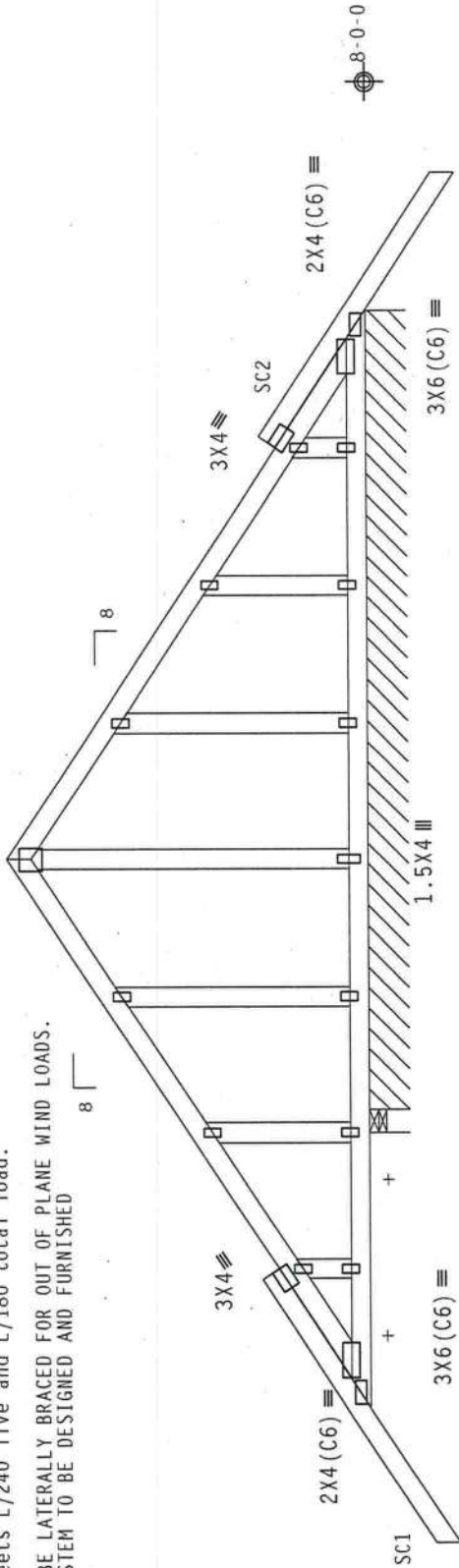
Deflection meets L/240 live and L/180 total load.

+ MEMBER TO BE LATERALLY BRACED FOR OUT OF PLANE WIND LOADS.
BRACING SYSTEM TO BE DESIGNED AND FURNISHED BY OTHERS.

Gable end supports 8" max rake overhang.

Stacked top chord must NOT be notched or cut in area (NNL). Dropped top chord braced at 24" o.c. intervals. Attach stacked top chord (SC) to dropped top chord in noticable area using 3x4 tie-plates 24" o.c. Center plate on stacked/dropped chord interface, plate length perpendicular to chord length. Splice top chord in noticable area using 3x6.

4X4



Note: All Plates Are 1.5X3 Except As Shown.

Design Crit: FBC2007Res/TPI-2002 (STD)
FT/RT=10%(0%)/0(0)

PLT TYP. Wave

Scale = .375"/Ft.



****WARNING**** READ AND FOLLOW ALL NOTES ON THIS SHEET
****IMPORTANT**** FURNISH THIS DESIGN TO ALL CONTRACTORS INCLUDING INSTALLERS.
Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to and follow the latest edition of BCSI (Building Component Safety Information, by TPI and WICA) for safety practices prior to performing these functions. Installers shall provide temporary bracing per BCSI. Unless noted otherwise, top chord shall have properly attached structural sheathing and bottom chord shall have a properly attached rigid ceiling. Locations shown for permanent lateral restraint for who shall have bracing installed per BCSI Sections B2, B7 or B10, as applicable.
ITW Building Components Group Inc. (ITWBCG) shall not be responsible for any deviation from the design shown. The truss is designed for use in accordance with the design shown. A seal of any failure to build the truss in accordance with the design shown. The seal is not a warranty. Details, unless noted otherwise. Refer to drawings 1600-2 for standard plate positions. A seal drawing or cover page listing this drawing. Indicates acceptance of professional engineering responsibility solely for the design shown. The suitability and use of this design for any structure the responsibility of the Building Designer per ANSI/TPI 1 Sec.2. For more information see: This job general notes page: ITW-BCG: www.itwbcg.com; TPI: www.tpinet.org; NICA: www.nicaindustry.com; IEC: www.1ccsafe.org

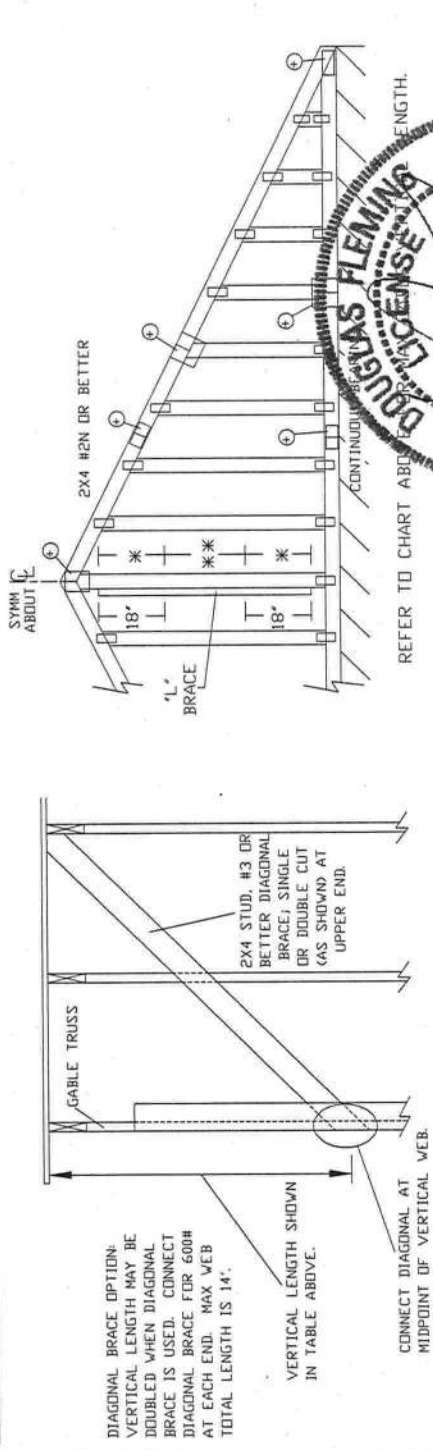


TC LL	20.0 PSF	REF R487--	16234
TC DL	10.0 PSF	DATE	02/08/12
BC DL	10.0 PSF	DRW	HCSR487 12039002
BC LL	0.0 PSF	HC-ENG	JB/DF
TOT.LD.	40.0 PSF	SEQN-	267904
DUR.FAC.	1.25		
SPACING	24.0"	JREF-	1UJF487_Z01

ASCE 7-05: 110 MPH WIND SPEED, 15' MEAN HEIGHT, ENCLOSED, I = 1.00, EXPOSURE C, Kzt = 1.00

GABLE STUD REINFORCEMENT DETAIL

MAX GABLE VERTICAL LENGTH	2X4 GABLE VERTICAL SPACING	GABLE VERTICAL SPECIES	GRADE	BRACE		NO BRACES	(1) 1X4 'L' BRACE		(2) 2X4 'L' BRACE		(1) 2X6 'L' BRACE		(2) 2X6 'L' BRACE		(1) 2X6 'L' BRACE		(2) 2X6 'L' BRACE		(1) 2X6 'L' BRACE		(2) 2X6 'L' BRACE	
				BRACE		NO BRACES	GROUP A		GROUP B		GROUP A		GROUP B		GROUP A		GROUP B		GROUP A		GROUP B	
				#1 / #2	#3	STANDARD	#1	#2	#3	STANDARD	#1	#2	#3	STANDARD	#1	#2	#3	STANDARD	#1	#2	#3	STANDARD
12" D.C.	SPF	SPF	SPF	3' 10"	3' 9"	3' 9"	6' 8"	6' 0"	6' 0"	6' 0"	7' 11"	7' 11"	7' 11"	7' 11"	9' 5"	9' 5"	9' 5"	9' 5"	12' 5"	12' 5"	12' 5"	12' 5"
	HF	HF	HF	3' 9"	3' 9"	3' 9"	6' 0"	6' 0"	6' 0"	6' 0"	7' 11"	7' 11"	7' 11"	7' 11"	9' 5"	9' 5"	9' 5"	9' 5"	12' 4"	12' 4"	12' 4"	12' 4"
	SP	SP	SP	4' 3"	4' 3"	4' 3"	5' 2"	5' 2"	5' 2"	5' 2"	6' 9"	6' 9"	6' 9"	6' 9"	9' 1"	9' 1"	9' 1"	9' 1"	10' 7"	10' 7"	10' 7"	10' 7"
	DFL	DFL	DFL	4' 2"	4' 2"	4' 2"	5' 2"	5' 2"	5' 2"	5' 2"	6' 9"	6' 9"	6' 9"	6' 9"	9' 1"	9' 1"	9' 1"	9' 1"	10' 7"	10' 7"	10' 7"	10' 7"
16" D.C.	SPF	SPF	SPF	4' 0"	4' 0"	4' 0"	6' 1"	6' 1"	6' 1"	6' 1"	7' 11"	7' 11"	7' 11"	7' 11"	9' 5"	9' 5"	9' 5"	9' 5"	12' 5"	12' 5"	12' 5"	12' 5"
	HF	HF	HF	4' 0"	4' 0"	4' 0"	6' 1"	6' 1"	6' 1"	6' 1"	7' 11"	7' 11"	7' 11"	7' 11"	9' 5"	9' 5"	9' 5"	9' 5"	12' 5"	12' 5"	12' 5"	12' 5"
	SP	SP	SP	4' 4"	4' 4"	4' 4"	7' 4"	7' 4"	7' 4"	7' 4"	9' 1"	9' 1"	9' 1"	9' 1"	10' 10"	10' 10"	10' 10"	10' 10"	14' 0"	14' 0"	14' 0"	14' 0"
	DFL	DFL	DFL	4' 4"	4' 4"	4' 4"	7' 4"	7' 4"	7' 4"	7' 4"	9' 1"	9' 1"	9' 1"	9' 1"	10' 10"	10' 10"	10' 10"	10' 10"	14' 0"	14' 0"	14' 0"	14' 0"
12" D.C.	SPF	SPF	SPF	4' 9"	4' 9"	4' 9"	7' 3"	7' 3"	7' 3"	7' 3"	9' 7"	9' 7"	9' 7"	9' 7"	11' 11"	11' 11"	11' 11"	11' 11"	14' 0"	14' 0"	14' 0"	14' 0"
	HF	HF	HF	4' 9"	4' 9"	4' 9"	7' 3"	7' 3"	7' 3"	7' 3"	9' 7"	9' 7"	9' 7"	9' 7"	11' 11"	11' 11"	11' 11"	11' 11"	14' 0"	14' 0"	14' 0"	14' 0"
	SP	SP	SP	5' 4"	5' 4"	5' 4"	8' 5"	8' 5"	8' 5"	8' 5"	10' 0"	10' 0"	10' 0"	10' 0"	12' 10"	12' 10"	12' 10"	12' 10"	14' 0"	14' 0"	14' 0"	14' 0"
	DFL	DFL	DFL	5' 4"	5' 4"	5' 4"	8' 5"	8' 5"	8' 5"	8' 5"	10' 0"	10' 0"	10' 0"	10' 0"	12' 10"	12' 10"	12' 10"	12' 10"	14' 0"	14' 0"	14' 0"	14' 0"



TW
Building Components Group Inc.

Earth City, MO 63045

DIAGONAL BRACE OPTION: VERTICAL LENGTH MAY BE DOUBLED WHEN DIAGONAL BRACE IS USED. CONNECT DIAGONAL BRACE FOR 600# AT EACH END. MAX VEB TOTAL LENGTH IS 14'.

VERTICAL LENGTH SHOWN IN TABLE ABOVE.

CONNECT DIAGONAL AT MIDPOINT OF VERTICAL VEB.

MAX. TOT. L.D. 60 PSF

MAX. SPACING 24.0"

REF ASCE7-05-GABI1015

DATE 1/1/09

DRWG A11015050109

BRACING GROUP SPECIES AND GRADES:

GROUP A:		GROUP B:	
SPRUCE-PINE-FIR	HEM-FIR	SPRUCE-PINE-FIR	HEM-FIR
#1 / #2 STANDARD	#2 STUD	#1 / #2 STANDARD	#2 STUD
#3 STUD	#3 STANDARD	#3 STUD	#3 STANDARD

DOUGLAS FIR-LARCH

#1 STUD	SOUTHERN PINE
#2 STUD	#3 STUD
#3 STUD	STANDARD

DOUGLAS FIR-LARCH

#1 STUD	SOUTHERN PINE
#2 STUD	#3 STUD
#3 STUD	STANDARD

GABLE TRUSS DETAIL NOTES:

LIVE LOAD DEFLECTION CRITERIA IS L/240.

PROVIDE UPLIFT CONNECTIONS FOR 80 PLF OVER CONTINUOUS BEARING (5 PSF TO DEAD LOAD).

GABLE END SUPPORTS LOAD FROM 4' 0" OUTLOOKERS WITH 2' 0" OVERHANG, OR 12" PLYWOOD OVERHANG.

ATTACH EACH 'L' BRACE WITH 10d NAILS.

FOR (1) 'L' BRACE: SPACE NAILS AT 2' O.C. IN 18" END ZONES AND 4' O.C. BETWEEN ZONES.

FOR (2) 'L' BRACES: SPACE NAILS AT 3' O.C. IN 18" END ZONES AND 6' O.C. BETWEEN ZONES.

'L' BRACING MUST BE A MINIMUM OF 80% OF WEB MEMBER LENGTH.

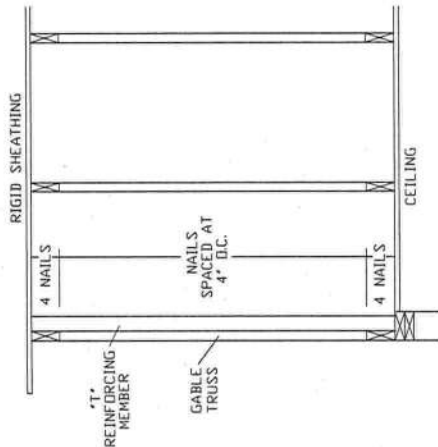
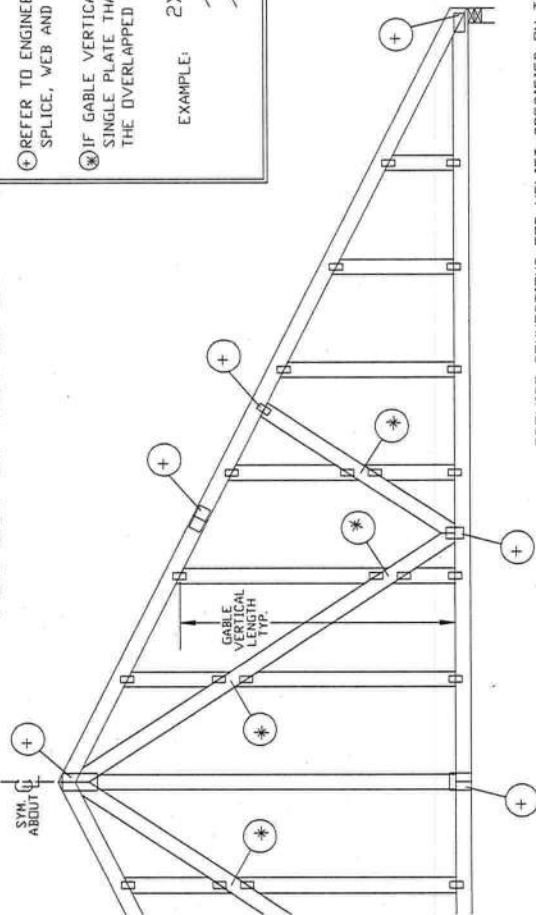
GABLE VERTICAL PLATE SIZES

VERTICAL LENGTH	NO SPLICE
LESS THAN 4' 0"	1X4 OR 2X3
GREATER THAN 4' 0", BUT LESS THAN 11' 6"	2.5X4
GREATER THAN 11' 6"	3X4

* REFER TO COMMON TRUSS DESIGN FOR PEAK, SPLICE, AND HEEL PLATES.



GABLE DETAIL FOR LET-IN VERTICALS



PROVIDE CONNECTIONS FOR UPLIFT SPECIFIED ON THE ENGINEERED TRUSS DESIGN.

ATTACH EACH "T" REINFORCING MEMBER WITH

END DRIVEN NAILS:

(1) 10d COMMON (0.148"x3") MIN NAILS AT 4" O.C. PLUS

(2) NAILS IN TOP AND BOTTOM CHORD.

TOENAIL NAILS:

(1) 10d COMMON (0.148"x3") MIN TOENAILS AT 4" O.C. PLUS

(2) TOENAILS IN TOP AND BOTTOM CHORD.

THIS DETAIL TO BE USED WITH THE APPROPRIATE ITV GABLE DETAIL FOR ASCE

WIND LOAD.

ASCE 7-98 GABLE DETAIL DRAWINGS

A13015980109, A12015980109, A11015980109, A10015980109,

A130130980109, A120130980109, A110130980109, A100130980109

ASCE 7-02 GABLE DETAIL DRAWINGS

A13015020109, A12015020109, A11015020109, A10015020109,

A130130020109, A120130020109, A110130020109, A100130020109

ASCE 7-05 GABLE DETAIL DRAWINGS

A13015050109, A12015050109, A11015050109, A10015050109,

A130130050109, A120130050109, A110130050109, A100130050109

SEE APPROPRIATE ITV GABLE DETAIL FOR MAXIMUM

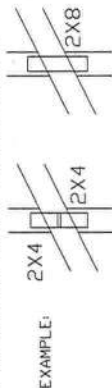
UNREINFORCED GABLE VERTICAL LENGTH.

GABLE TRUSS PLATE SIZES

REFER TO APPROPRIATE ITV GABLE DETAIL FOR MINIMUM PLATE SIZES FOR VERTICAL STUDS.

(+) REFER TO ENGINEERED TRUSS DESIGN FOR PEAK, SPICE, WEB AND HEEL PLATES.

(*) IF GABLE VERTICAL PLATES OVERLAP, USE A SINGLE PLATE THAT COVERS THE TOTAL AREA OF THE OVERLAPPED PLATES TO SPAN THE WEB.



"T" REINFORCEMENT ATTACHMENT DETAIL
"T" REINFORCING MEMBER



TO CONVERT FROM "L" TO "T" REINFORCING MEMBERS, MULTIPLY "T" INCREASE BY LENGTH (BASED ON APPROPRIATE ITV GABLE DETAIL).

MAXIMUM ALLOWABLE "T" REINFORCED GABLE VERTICAL LENGTH IS 14' FROM TOP TO BOTTOM CHORD.

WEB LENGTH INCREASE W/ "T" BRACE

WIND SPEED AND MRH	"T" REINFORCING MEMBER SIZE	"T" INCREASE
140 MPH	2x4	10 %
15 FT	2x6	50 %
140 MPH	2x4	10 %
30 FT	2x6	50 %
130 MPH	2x4	10 %
15 FT	2x6	50 %
130 MPH	2x4	10 %
30 FT	2x6	50 %
120 MPH	2x4	10 %
15 FT	2x6	50 %
120 MPH	2x4	10 %
30 FT	2x6	50 %
110 MPH	2x4	10 %
15 FT	2x6	40 %
110 MPH	2x4	10 %
30 FT	2x6	50 %
100 MPH	2x4	10 %
15 FT	2x6	30 %
100 MPH	2x4	10 %
30 FT	2x6	20 %
90 MPH	2x4	10 %
15 FT	2x6	20 %
90 MPH	2x4	10 %
30 FT	2x6	20 %

EXAMPLE:

ASCE WIND SPEED = 100 MPH

MEAN ROOF HEIGHT = 30 FT, Kzt = 1.00

GABLE VERTICAL = 24' O.C. SP #3

"T" REINFORCING MEMBER SIZE = 2x4

"T" BRACE INCREASE (FROM ABOVE) = 10% = 1.10

(1) 2x4 "L" BRACE LENGTH = 6' 7"

MAXIMUM "T" REINFORCED GABLE VERTICAL LENGTH

1.10 x 6' 7" = 7' 3"

*****WARNING***** READ AND FOLLOW ALL NOTES ON THIS SHEET. Trusses require extreme care in fabricating, handling, shipping, installing and bracing. Refer to the ITV Building Components Group, Inc. (ITVBCG) website for more information. Do not use temporary bracing prior to performing these functions. Installers shall provide temporary bracing per BCSI sections 83 & 87. See this job's general notes page for more information. **IMPORTANT**** FURNISH COPY OF THIS DESIGN TO INSTALLATION CONTRACTOR. ITV Building Components Group, Inc. (ITVBCG) shall not be responsible for any deviation from the ITVBCG design. ITVBCG connector plates are made of 2018/1564 (A/H/S/K) ASTM A36 steel, grade 37/40/60 (K/V/H/S) galv. steel. Apply plates to each face of truss, positioned as shown on and on Joint Details. A seal on this drawing or cover page indicates acceptance and professional engineering responsibility for the Truss design. The responsibility of the Building Designer per ANSI/TPI 1 Sec. 2. ITV-BCG: www.itvbcg.com TPI: www.tpinet.com VITCA: www.sbcindustry.com IEC: www.lccsafe.org



REF	LET-IN VERT
DATE	1/1/09
DRWG	GBLLETIN0109
MAX TOT. L.D.	60 PSF
DUR. FAC.	ANY
MAX SPACING	24.0"

