

06/26/2009

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000027912

APPLICANT CALVIN PATRICK PHONE 752-8597
ADDRESS 1141 SW CUMORAH HILL ST FT. WHITE FL 32038
OWNER CALVIN PATRICK PHONE 752-8597
ADDRESS 1171 SW CUMORAH HILL ST FT. WHITE FL 32038
CONTRACTOR SAME AS APPLICANT PHONE _____
LOCATION OF PROPERTY 441S, TR ON TUSTENUGGEE, TR CUMORAH HILL ST.,
1 MILE ON RIGHT (1141 CUMORAH HILL0 TO THE BACK
TYPE DEVELOPMENT SFD,UTILITY ESTIMATED COST OF CONSTRUCTION 93500.00
HEATED FLOOR AREA 1635.00 TOTAL AREA 1870.00 HEIGHT _____ STORIES 1
FOUNDATION CONC WALLS FRAMED ROOF PITCH 12/12 FLOOR SLAB
LAND USE & ZONING A-3 MAX. HEIGHT _____
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00
NO. EX.D.U. 0 FLOOD ZONE X DEVELOPMENT PERMIT NO. _____

PARCEL ID 24-6S-16-03934-015 SUBDIVISION _____
LOT _____ BLOCK _____ PHASE _____ UNIT _____ TOTAL ACRES 0.51

Culvert Permit No. _____ Culvert Waiver _____ Contractor's License Number _____ Applicant/Owner/Contractor _____
EXISTING 09-168 BK RJ
Driveway Connection _____ Septic Tank Number _____ LU & Zoning checked by _____ Approved for Issuance _____ New Resident _____

COMMENTS: ONE FOOT ABOVE THE ROAD, SEC.14.9, SPECIAL FAMILY LOT, NOC ON FILE

Check # or Cash 10177

FOR BUILDING & ZONING DEPARTMENT ONLY

(footer/Slab)

Temporary Power _____ Foundation _____ Monolithic _____
date/app. by _____ date/app. by _____ date/app. by _____
Under slab rough-in plumbing _____ Slab _____ 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 \$ 470.00 CERTIFICATION FEE \$ 9.35 SURCHARGE FEE \$ 9.35
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 563.70
INSPECTORS OFFICE Michael J. Blum CLERKS OFFICE CH

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.

Columbia County Building Permit Application

For Office Use Only Application # 0905-36 Date Received 5/20/09 By G Permit # 27912
 Zoning Official BLK Date 08.06.09 Flood Zone X Land Use A-3 Zoning A-3
 FEMA Map # N/A Elevation N/A MFE 1st River N/A Plans Examiner RF Date 6/26/09
 Comments Section 14.9 Special Family Lot Permit
☒ NOC ☒ EH ☐ Deed or PA ☒ Site Plan ☐ State Road Info ☐ Parent Parcel # _____
☐ Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
 IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____
 School _____ = TOTAL Suspended existing 6 well (shaded)

Septic Permit No. 915777 Calvin Patrick
 Name Authorized Person Signing Permit Calvin Patrick Phone 386 752 8597
 Address 11415 Cumorah Hill St Fort White, FL 32038
 Owners Name Calvin Patrick Phone 386 752-8597
 911 Address 1171 S.W. Cumorah Hill St Fort White FL 32038
 Contractors Name N/A Phone _____
 Address _____

Fee Simple Owner Name & Address _____
 Bonding Co. Name & Address _____
 Architect/Engineer Name & Address Mark Disosway P.O. Box 868 Lake City, FL 32056
 Mortgage Lenders Name & Address N/A

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

Property ID Number 24-65-16-03934-015 Estimated Cost of Construction \$ 50,000

Subdivision Name _____ Lot _____ Block _____ Unit _____ Phase _____

Driving Directions South on SR 131 (Tastemysie Rd) Rt on Cumorah Hill St. 1141 approx 1 mile on right

Number of Existing Dwellings on Property 0

Construction of Single family home Total Acreage .51 Lot Size 105 x 210
 Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 28'
 Actual Distance of Structure from Property Lines - Front 75' Side 35' Side 41' Rear 93'
 Number of Stories 2 Heated Floor Area 1635 Total Floor Area 1870 Roof Pitch 12:12

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.

Let message 6/26/09

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 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. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

Owners Signature

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.

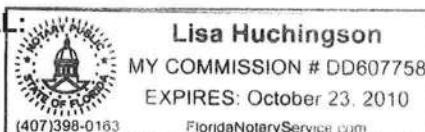
Contractor's Signature (Permitee)

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

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 20 day of May 2009.
Personally known _____ or Produced Identification Driver's License

State of Florida Notary Signature (For the Contractor)

SEAL:



**COLUMBIA COUNTY BUILDING DEPARTMENT**

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

NOTARIZED DISCLOSURE STATEMENT**FOR OWNER/BUILDER WHEN ACTING AS THEIR OWN CONTRACTOR AND CLAIMING EXEMPTION OF CONTRACTOR LICENSING REQUIREMENTS IN ACCORDANCE WITH FLORIDA STATUTES, ss. 489.103(7).**

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$75,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved for yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You 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 your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that if I am not physically doing the work or physically supervising free labor from friends or relatives, that I must hire licensed contractors, i.e. electrician, plumber, mechanical (heating & air conditioning), etc. I further understand that the violation of not physically doing the work, and the use of unlicensed contractors at the construction site, will cause the project to be shut down by the inspection staff of the Columbia County Building Department. Additionally, state statutes allows for additional penalties. I also understand that if this violation does occur, that in order for the job to proceed, I will have a licensed contractor come in and obtain a new permit as taking the job over. I understand that if I hire subcontractors under a contract price, that they must be licensed to work in Columbia County, i.e. masonry, drywall, carpentry. Contractors licensed by the Columbia County Contractor Licensing Section or the State of Florida are required to have worker's compensation and liability coverage.

TYPE OF CONSTRUCTION

- ☒ Single Family Dwelling ☐ Two-Family Residence ☐ Farm Outbuilding
☐ Other _____ ☐ Addition, Alteration, Modification or other Improvement

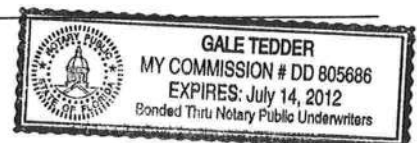
I Calvin Patrzek, have been advised of the above disclosure statement for exemption from contractor licensing as an owner/builder. I agree to comply with all requirements provided for in Florida Statutes ss.489.103(7) allowing this exception for the construction permitted by Columbia County Building Permit Number _____

[Signature]
 Owner Builder Signature

5/20/09
 Date

FLORIDA NOTARY

The above signer is personally known to me or produced identification DL
 Notary Signature [Signature] Date 5/20/09

**FOR BUILDING DEPARTMENT USE ONLY**

I hereby certify that the above listed owner/builder has been notified of the disclosure statement in Florida Statutes ss 489.103(7). Date _____ Building Official/Representative _____



Columbia County, Florida Planning & Zoning Department

Review of Building Permit for compliance with
County's Comprehensive Plan and
Land Development Regulations

2 June 2009

Calvin Patrick
1141 SW Cumorah Hill Street
Ft. White FL 32038

RE: Building Permit Application 0905-36

Dear Mr. Patrick:

The above referenced building permit property is located within an Agriculture-3 (A-3) zoning district. This zoning district requires a minimum of five (5) acres for one (1) dwelling unit. Under the County's Land Development Regulations (LDR's), a Special Family Lot Permit can be issued to a family member being, brother, sister, parent, grandparent, child, adopted child or grandchild for less than the required density of five (5) acres for one (1) dwelling unit. In order for a building permit to be issued, a family relationship affidavit has to be completed confirming the family relationship. Please find enclosed a family relationship affidavit which has to be completed by the family members, witnessed by a Notary and the original returned to this office.

If you have any questions concerning this matter, please do not hesitate to contact me at 386.754.7119.

Sincerely,

A handwritten signature in black ink, appearing to read "B. L. Kepner".

Brian L. Kepner
Land Development Regulation Administrator,
County Planner

Enclosure

CALVIN S PATRICK
1141 SW CUMORAH HILL ST
FORT WHITE, FL 32038

City/State/Zip Code: _____

Inst:200912001452 Date:1/30/2009 Time:3:07 PM
Doc Stamp-Deed:0.70
✓ 4 DC,P.DeWitt Cason,Columbia County Page 1 of 3 B:1166 P:808

Space above this line for Recorder's use

QUITCLAIM DEED

KNOW ALL MEN BY THESE PRESENTS:

That I(we), CALVIN S. PATRICK and Euphrosina L. PATRICK,
the undersigned, for the consideration of Ten Dollars (\$10.00), and other valuable considerations, do
hereby release, remise, and forever quitclaim unto CALVIN S PATRICK II and
Marilyn I PATRICK (his wife),
all right, title and interest in that certain Property situated in Columbia County,
State of Florida, and described as follows:

See Attachment "A"

IN WITNESS WHEREOF, I(we) have hereunto set my(our) hand(s) and seal this 30 day of
January, 2009.

CALVIN S PATRICK
Printed Name of Releasor
Euphrosina L. PATRICK
Printed Name of Releasor

Calvin S Patrick
Signature of Releasor
Euphrosina L Patrick
Signature of Releasor

Sheena L. Allison
Printed Name of Witness (If required by State Laws)

Sheena L. Allison
Signature of Witness (If required by State Laws)

ACKNOWLEDGMENT
(States Other Than California)

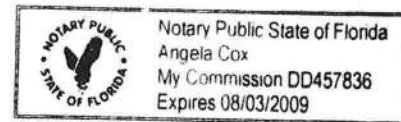
State of Florida)
County of Columbia) ss.

On this 30th day of January, 2009, before me, the undersigned
Notary Public, personally appeared Alvin S. Patrick and Euphrosina
L. Patrick
known to me to be the individual(s) who executed the foregoing instrument and acknowledged the same
to be his(her)(their) free act and deed.
My Commission Expires: 08-03-2009 Angela Cox
Notary Public

If acknowledged in the State of Florida, complete section(s) below:

(Releasor) ☐ Personally Known (or) ☒ Produced Identification

If applicable, Type of Identification Produced: FL DL
P362 11735 0180



(Co-Releasor) ☐ Personally Known (or) ☒ Produced Identification

If applicable, Type of Identification Produced: FL DL
P362 200 359570

ACKNOWLEDGMENT
(State Of California)

State of California)
County of _____) ss.

On this _____ day of _____, _____, before me, _____
_____, the undersigned Notary Public, personally appeared,

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose
name(s) is(are) subscribed to the attached instrument and acknowledged to me that he(he)(they)
executed the same in his(her)(their) authorized capacity(ies), and that by his(her)(their) signature(s) on
the instrument, the person(s) or the entity upon behalf of which the person(s) acted, executed the
instrument.

WITNESS my hand and official seal.

Notary Public

DESCRIPTION: PARCEL "A"

PART OF THE SOUTH $\frac{1}{2}$ OF THE EAST $\frac{1}{2}$ OF THE SE $\frac{1}{4}$ OF THE NE $\frac{1}{4}$ OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCE AT A $\frac{5}{8}$ " IRON ROD, LB 6685, MARKING THE NE CORNER OF THE SOUTH $\frac{1}{2}$ OF THE EAST $\frac{1}{2}$ OF THE SE $\frac{1}{4}$ OF THE NE $\frac{1}{4}$ OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND THENCE S.89 DEGREES 59'50"W., ALONG THE NORTH LINE OF SAID SOUTH $\frac{1}{2}$ OF THE EAST $\frac{1}{2}$ OF THE SE $\frac{1}{4}$ OF THE NE $\frac{1}{4}$, A DISTANCE OF 451.26 FEET TO A $\frac{5}{8}$ " IRON ROD, LS 4708, AND THE POINT OF BEGINNING; THENCE CONTINUE S.89 DEGREES 59'50"W., 105.00 FEET TO A $\frac{5}{8}$ " IRON ROD, LS 4708; THENCE S.00 DEGREES 00'18"W., PARALLEL TO THE WEST LINE OF SAID SOUTH $\frac{1}{2}$ OF THE EAST $\frac{1}{2}$ OF THE SE $\frac{1}{4}$ OF THE NE $\frac{1}{4}$, A DISTANCE OF 210.00 FEET TO A $\frac{5}{8}$ " IRON ROD, LS 4708; THENCE N.88 DEGREES 59'50"E., 105.00 FEET TO A $\frac{5}{8}$ " IRON ROD, LS 4708; THENCE N.00 DEGREES 00'18"E., 105.00 FEET TO THE POINT OF BEGINNING.

PARCEL CONTAINS 0.51 ACRES, MORE OR LESS.

TOGETHER WITH A 30 FOOT WIDE EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS THE FOLLOWING DESCRIBED LANDS:

PART OF THE SOUTH $\frac{1}{2}$ OF THE EAST $\frac{1}{2}$ OF THE SE $\frac{1}{4}$ OF THE NE $\frac{1}{4}$ OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCE AT A $\frac{5}{8}$ " IRON ROD, LB 6685, MARKING THE NE CORNER OF THE SOUTH $\frac{1}{2}$ OF THE EAST $\frac{1}{2}$ OF THE SE $\frac{1}{4}$ OF THE NE $\frac{1}{4}$ OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND THENCE S.89 DEGREES 59'50"W., ALONG THE NORTH LINE OF SAID SOUTH $\frac{1}{2}$ OF THE EAST $\frac{1}{2}$ OF THE SE $\frac{1}{4}$ OF THE NE $\frac{1}{4}$, A DISTANCE OF 451.26 FEET TO A $\frac{5}{8}$ " IRON ROD, LS 4708; THENCE S.00 DEGREES 00'18"W., PARALLEL TO THE WEST LINE OF SAID SOUTH $\frac{1}{2}$ OF THE EAST $\frac{1}{2}$ OF THE SE $\frac{1}{4}$ OF THE NE $\frac{1}{4}$, A DISTANCE OF 210.00 FEET TO A $\frac{5}{8}$ " IRON ROD, LS 4708 AND THE POINT OF BEGINNING; THENCE S.88 DEGREES 59'50"W., 210.00 FEET TO A $\frac{5}{8}$ " IRON ROD, LS 4708, SET ON THE MONUMENTED WEST LINE OF SAID SOUTH $\frac{1}{2}$ OF THE EAST $\frac{1}{2}$ OF THE SE $\frac{1}{4}$ OF THE NE $\frac{1}{4}$; THENCE S.00 DEGREES 00'18"W. ALONG SAID WEST LINE, 423.01 FEET TO THE MONUMENTED NORTH R/W LINE OF SW CUMORAH STREET AS PRESENTLY ESTABLISHED; THENCE N.89 DEGREES 00'41"E., ALONG SAID RIGHT-OF-WAY LINE, 30.00 FEET; THENCE N.00 DEGREES 00'18"E., PARALLEL TO THE AFOREMENTIONED WEST LINE, 393.01 FEET; THENCE N.88 DEGREES 59'50"W., 180.00 FEET; THENCE N.00 DEGREES 00'18"E., 30.00 FEET TO THE POINT OF BEGINNING.

COLUMBIA COUNTY 9-1-1 ADDRESSING

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

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

Addressing Maintenance

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

DATE REQUESTED: 5/7/2009 DATE ISSUED: 5/17/2009

ENHANCED 9-1-1 ADDRESS:

1171 SW CUMORAH HILL ST

FORT WHITE FL 32038

PROPERTY APPRAISER PARCEL NUMBER:

24-6S-16-03934-015

Remarks:

Address Issued By: _____
Columbia County 9-1-1 Addressing / GIS Department

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

AFFIDAVIT OF SUBDIVIDED REAL PROPERTY
FOR USE OF IMMEDIATE FAMILY MEMBERS
FOR PRIMARY RESIDENCE

STATE OF FLORIDA
COUNTY OF COLUMBIA

BEFORE ME the undersigned Notary Public personally appeared,

CALVIN SAMUEL PATRICK, the Owner of the parent tract which has been subdivided for immediate family primary residence use, hereinafter the Owner, and CALVIN SAMUEL PATRICK II, the family member of the Owner, who is the owner of the family parcel which is intended for immediate family primary residence use, hereafter the Family Member, and is related to the Owner as HIS SON, and both individuals being first duly sworn according to law, depose and say:

1. Both the Owner and the Family Member have personal knowledge of all matters set forth in this Affidavit.
2. The Owner holds fee simple title to certain real property situated in Columbia County, and more particularly described by reference to the Columbia county Property Appraiser Tax Parcel No. 24-65-16-03934-008.
3. The Owner has divided his parent parcel for use of immediate family members for their primary residence and the parcel divided and the remaining parent parcel are at least ½ acre in size. Immediate family is defined as grandparent, parent, step-parent, adopted parent, sibling, child, step-child, adopted child or grandchild.
4. The Family Member is a member of the Owner's immediate family, as set forth above, and holds fee simple title to certain real property divided from the Owner's parcel situated in Columbia County and more particularly described by reference to the Columbia County Property Appraiser Tax Parcel No. 24-65-16-03934-015.
5. No person or entity other than the Owner and Family Member claims or is presently entitled to the right of possession or is in possession of the property, and there are no tenancies, leases or other occupancies that affect the Property.
6. This Affidavit is made for the specific purpose of inducing Columbia County to recognize a family division for a family member on the parcel divided in accordance with Section 14.9 of the Columbia County Land Development Regulations.

7. This Affidavit is made and given by Affiants with full knowledge that the facts contained herein are accurate and complete, and with full knowledge that the penalties under Florida law for perjury include conviction of a felony of the third degree.

We Hereby Certify that the information contained in this Affidavit are true and correct.

Calvin S. Patrick
Owner

CALVIN S. PATRICK
Typed or Printed Name

Calvin S. Patrick II
Family Member

Calvin S. Patrick II
Typed or Printed Name

Subscribed and sworn to (or affirmed) before me this 8 day of June, 2009, by CALVIN S. PATRICK (Owner) who is personally known to me or has produced _____ as identification.

Charlene N. Pitman
Notary Public



Subscribed and sworn to (or affirmed) before me this 8 day of June, 2009, by CALVIN S. PATRICK II (Family Member) who is personally known to me or has produced _____ as identification.

Charlene N. Pitman
Notary Public





STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 915777
DATE PAID: 3/19/09
FEE PAID: 725.00
RECEIPT #: 1105792

APPLICATION FOR:

☒ New System ☐ Existing System ☐ Holding Tank ☐ Innovative
☐ Repair ☐ Abandonment ☐ Temporary ☐

APPLICANT: Calvin Patrick IIAGENT: Felton HowardTELEPHONE: 386-9351518MAILING ADDRESS: PO Box 180 Branford FL 32008

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(M) OR 489.552, FLORIDA STATUTES.

PROPERTY INFORMATION

LOT: N/A BLOCK: N/A SUBDIVISION: N/A PLATTED: N/A

PROPERTY ID #: 24-68-116-03934-015 ZONING: A I/M OR EQUIVALENT: ☐ Y ☒ N

PROPERTY SIZE: 5.1 ACRES WATER SUPPLY: ☒ PRIVATE PUBLIC ☐ ☐ <=2000GPD ☐ >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? ☐ Y ☐ N

DISTANCE TO SEWER: N/A FT

PROPERTY ADDRESS: 1141 SW Eumorah hill st, Ft White FL 32038

DIRECTIONS TO PROPERTY: S 47 TR on 340 TR
on Justenugge, TR on Eumorah Hill St

BUILDING INFORMATION

☒ RESIDENTIAL☐ COMMERCIAL

| Unit No | Type of Establishment | No. of Bedrooms | Building Area Sqft | Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC |
|---------|-----------------------|-----------------|--------------------|--|
| 1 | <u>SF</u> | <u>3</u> | <u>1400</u> | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |

☐ Floor/Equipment Drains ☐ Other (Specify)

SIGNATURE: Felton D. HowardDATE: 3/18/09



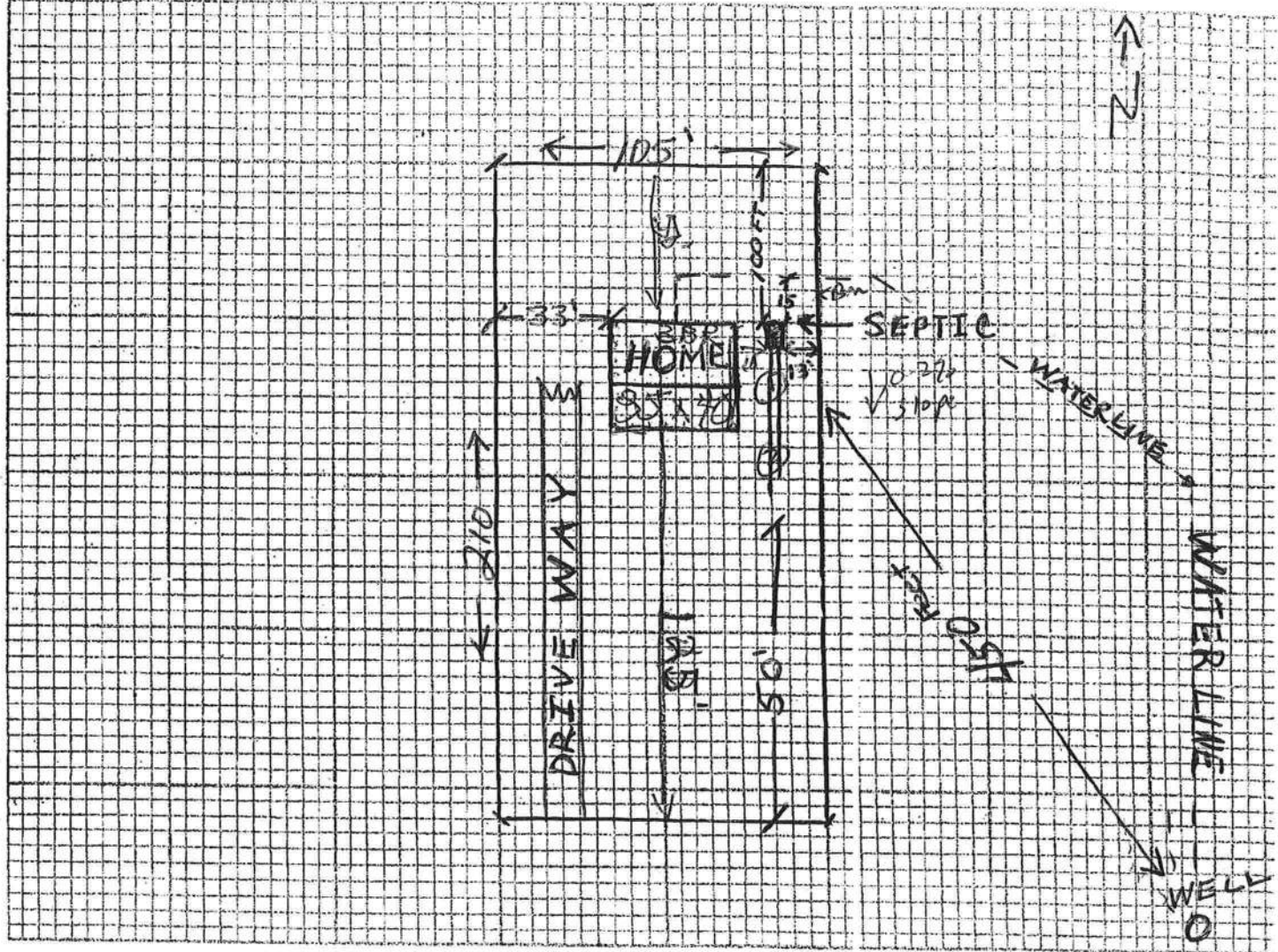
STATE OF FLORIDA
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number 09-0168

PART II - SITE PLAN

Scale: Each block represents 5 feet and 1 inch = 50 feet.



Notes: E2. Flow product being used will be 40545' line

Site Plan submitted by: Felton C. Howard

Signature

Plan Approved ☒

Not Approved ☐

agent
Title

Date 3/18/09

By Mark S. Lander

Columbia

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION PERMIT

09-0168
PERMIT NO. 915777
DATE PAID: 3/19/08
FEE PAID: 425.00
RECEIPT #: 1105792

CONSTRUCTION PERMIT FOR:

[X] New System [] Existing System [] Holding Tank [] Innovative
[] Repair [] Abandonment [] Temporary []

APPLICANT: Calvin Patrick II

PROPERTY ADDRESS: 1146 SW Cumorah Hills St.

LOT: N/A BLOCK: N/A SUBDIVISION: N/A

PROPERTY ID #: 24-65-16-03934-015 [SECTION, TOWNSHIP, RANGE, PARCEL NUMBER]
[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF SECTION 381.0065 F.S., AND CHAPTER 64E-6, F.A.C. DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SAFTISFACTOR PERFORMANCE FOR ANY SPECIFIC PERIOD OF TIME. ANY CHANGE IN MATERIAL FACTS, WHICH SERVED AS BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMI DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE, OR LOCAL PERMITTIN REQUIRED FOR DEVELOPMENT OF THIS PROPERTY.

SYSTEM DESIGN AND SPECIFICATIONS

T [900] GALLONS / GPD SEPTIC TANK/AEROBIC UNIT CAPACITY MULTI-CHAMBERED/IN-SERIES [X]
A [] GALLONS / GPD CAPACITY MULTI-CHAMBERED/IN-SERIES []
N [] GALLONS GREASE INTERCEPTOR CAPACITY [MAXIMUM CAPACITY SINGLE TANK: 1250 GALLONS
K [] GALLONS DOSING TANK CAPACITY [] GALLONS @ [] DOSES PER 24 HRS # PUMPS []

D [334] SQUARE FEET PRIMARY DRAINFIELD SYSTEM

R [] SQUARE FEET SYSTEM

A TYPE SYSTEM: [X] STANARD [] FILLED [] MOUND []

I CONFIGURATION: [X] TRENCH [] BED []

N

F LOCATION OF BENCHMARK: Nail in Fence post adjacent to hole #1

I ELEVATION OF PROPOSED SYSTEM SITE [24] [INCHES/FT] [ABOVE/BELOW] BENCHMARK/REFERENCE POIN

E BOTTOM OF DRAINFIELD TO BE < [48] [INCHES/FT] [ABOVE/BELOW] BENCHMARK/REFERENCE POIN

L

D FILL REQUIRED: [N/A] INCHES EXCAVATION REQUIRED: [N/A] INCHES

O

T

H

E

R

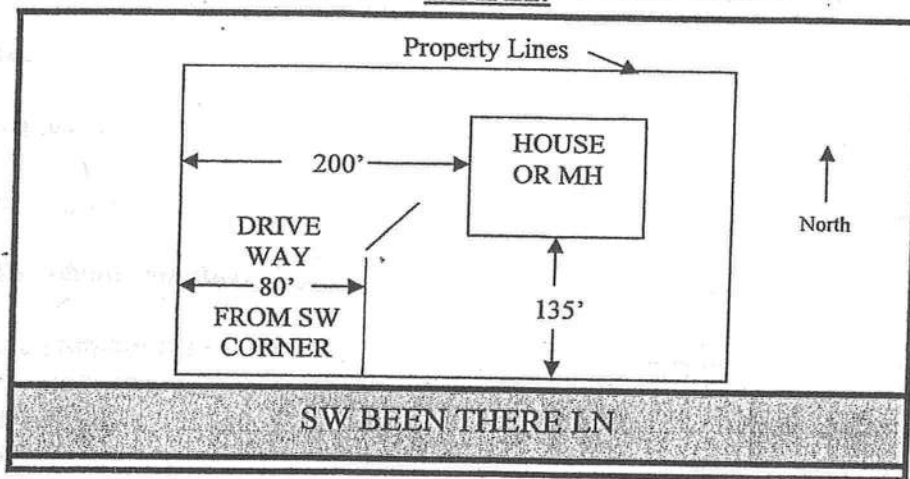
SPECIFICATIONS BY: Mark A Zander TITLE: Env. Manager

APPROVED BY: Mark A Zander TITLE: Env. Manager CE

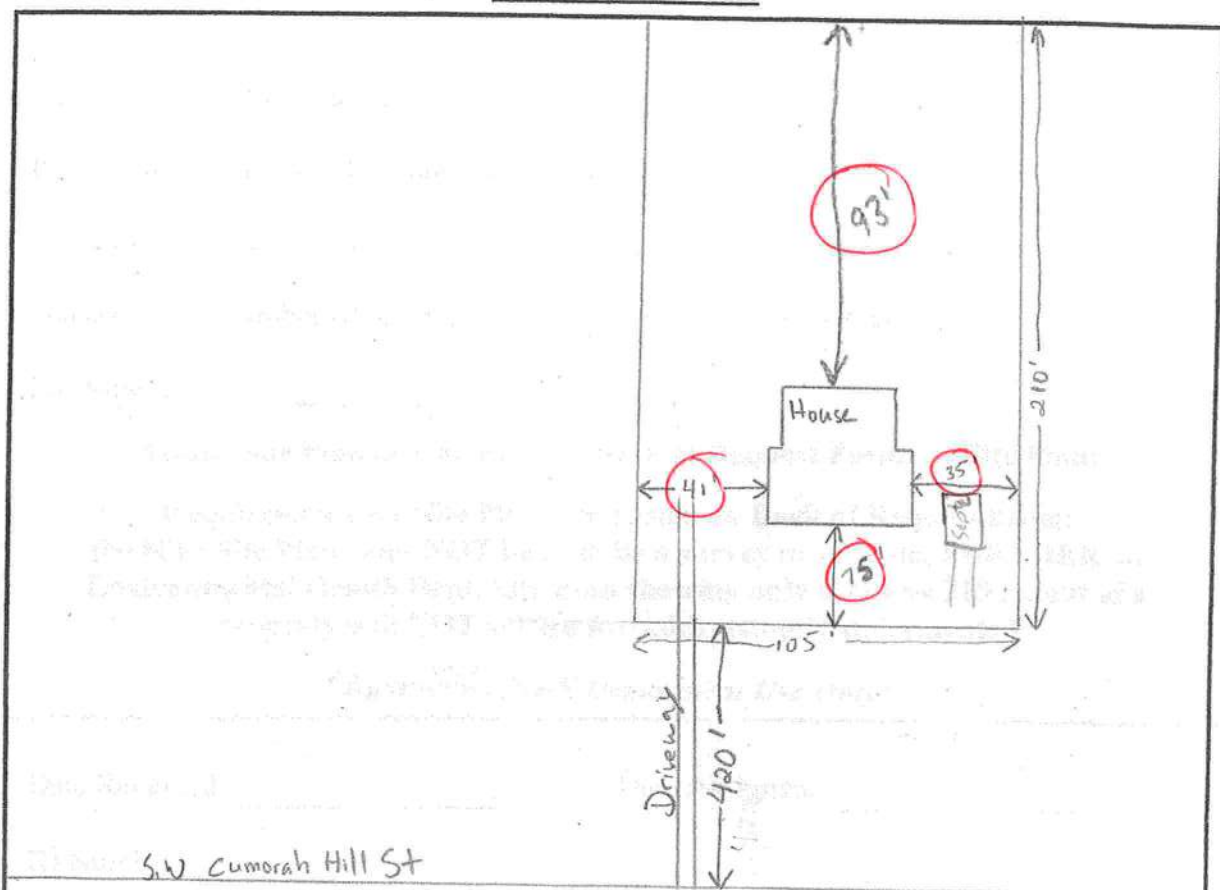
DATE ISSUED: 3-31-09 EXPIRATION DATE: 10-1-09

1. A PLAT, PLAN, OR DRAWING SHOWING THE PROPERTY LINES OF THE PARCEL.
2. LOCATION OF PLANNED RESIDENT OR BUSINESS STRUCTURE ON THE PROPERTY WITH DISTANCES FROM AT LEAST TWO OF THE PROPERTY LINES TO THE STRUCTURE (SEE SAMPLE BELOW).
3. 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).
4. TRAVEL OF THE DRIVEWAY FROM THE ACCESS POINT TO THE STRUCTURE (SEE SAMPLE BELOW).

SAMPLE:



SITE PLAN BOX:



NOTICE OF COMMENCEMENT

Inst:200912008232 Date:5/20/2009 Time:10:40 AM
09 DC, P. DeWitt Cason, Columbia County Page 1 of 2 B:1173 P:1150

County Clerk's Office Stamp or Seal

Tax Parcel Identification Number 24-65-16-03934-015

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): See Exhibit "A"
a) Street (job) Address: 1171 S.W. Cumorah Hill St Ft. White FL 32038
2. General description of improvements: New house construction
3. Owner Information
a) Name and address: Calvin & Marilyn Patrick 1171 S.W. Cumorah Hill St Ft. White
b) Name and address of fee simple titleholder (if other than owner) 32038
c) Interest in property _____
4. Contractor Information
a) Name and address: N/A Calvin Patrick 1171 S.W. Cumorah Hill St Ft. White, FL
b) Telephone No.: _____ Fax No. (Opt.) 32038
5. Surety Information
a) Name and address: _____
b) Amount of Bond: N/A
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: N/A
b) Telephone No.: _____ Fax No. (Opt.) _____
8. In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(l)(b) Florida Statutes:
a) Name and address: _____
b) Telephone No.: _____ Fax No. (Opt.) _____
9. Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified): _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY; A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

STATE OF FLORIDA
COUNTY OF COLUMBIA

10. [Signature]
Signature of Owner or Owner's Authorized Office/Director/Partner/Manager
Calvin S. Patrick
Print Name

The foregoing instrument was acknowledged before me, a Florida Notary, this 20 day of May, 2009, by:

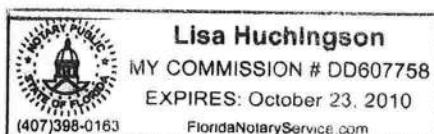
Calvin Patrick as _____ (type of authority, e.g. officer, trustee, attorney
fact) for Calvin Patrick (name of party on behalf of whom instrument was executed).

Personally Known _____ OR Produced Identification X Type Driver's License

Notary Signature Lisa Huchingson 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



[Signature]
Signature of Natural Person Signing (in line #10 above.)

NE CORNER OF THE SE 1/4 OF NE 1/4 AS MONUMENTED.

NOT A PART.

EAST LINE OF THE NORTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF NE 1/4 AS MONUMENTED. BASE OF BEARINGS.

NOT A PART.

BOUNDARY SURVEY
IN SECTION 24,
TOWNSHIP 6 SOUTH,
RANGE 16 EAST,
COLUMBIA COUNTY, FLA.

DESCRIPTION: PARCEL "A"
PART OF THE SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, MORE PARTICULARLY DESCRIBED AS FOLLOWS:
COMMENCE AT A 5/8" IRON ROD, LB 6685, MARKING THE NE CORNER OF THE SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND
THENCE S. 89 DEGREES 59'50"W., ALONG THE NORTH LINE OF SAID SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND
THE NE 1/4, A DISTANCE OF 451.26 FEET TO A 5/8" IRON ROD, LS 4708, AND THE POINT OF BEGINNING; THENCE
CONTINUE S. 89 DEGREES 59'50"W., 105.00 FEET TO A 5/8" IRON ROD, LS 4708, AND THE POINT OF BEGINNING; THENCE
PARALLEL TO THE WEST LINE OF SAID SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, A DISTANCE OF
210.00 FEET TO A 5/8" IRON ROD, LS 4708; THENCE N. 88 DEGREES 59'50"E., 105.00 FEET TO A 5/8" IRON ROD,
LS 4708; THENCE N. 00 DEGREES 00'18"E., 105.00 FEET TO THE POINT OF BEGINNING.
PARCEL CONTAINS 0.51 ACRES, MORE OR LESS.

TOGETHER WITH A 30 FOOT WIDE EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS THE FOLLOWING DESCRIBED LANDS:
PART OF THE SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, MORE PARTICULARLY DESCRIBED AS FOLLOWS:
COMMENCE AT A 5/8" IRON ROD, LB 6685, MARKING THE NE CORNER OF THE SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND
THENCE S. 89 DEGREES 59'50"W., ALONG THE NORTH LINE OF SAID SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND
THE NE 1/4, A DISTANCE OF 451.26 FEET TO A 5/8" IRON ROD, LS 4708; THENCE S. 00 DEGREES 00'18"W.,
PARALLEL TO THE WEST LINE OF SAID SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, A DISTANCE OF
210.00 FEET TO A 5/8" IRON ROD, LS 4708, AND THE POINT OF BEGINNING; THENCE S. 88 DEGREES 59'50"W.,
210.00 FEET TO A 5/8" IRON ROD, LS 4708, SET ON THE MONUMENTED WEST LINE OF SAID SOUTH 1/2 OF THE
EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND
THE MONUMENTED NORTH R/W LINE OF SW CUMORAT STREET AS PRESENTLY ESTABLISHED; THENCE N. 89 DEGREES
00'41"E., ALONG SAID RIGHT-OF-WAY LINE, 393.01 FEET; THENCE N. 00 DEGREES 00'18"E., PARALLEL TO THE
AFOREMENTIONED WEST LINE, 393.01 FEET; THENCE N. 88 DEGREES 59'50"W., 180.00 FEET; THENCE N. 00 DEGREES
00'18"E., 30.00 FEET TO THE POINT OF BEGINNING.

DESCRIPTION: PARCEL "B"
PART OF THE SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, MORE PARTICULARLY DESCRIBED AS FOLLOWS:
COMMENCE AT A 5/8" IRON ROD, LB 6685, MARKING THE NE CORNER OF THE SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND
THENCE S. 89 DEGREES 59'50"W., ALONG THE NORTH LINE OF SAID SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND
THE NE 1/4, A DISTANCE OF 451.26 FEET TO A 5/8" IRON ROD, LS 4708; THENCE CONTINUE S. 89 DEGREES
59'50"W., 105.00 FEET TO A 5/8" IRON ROD, LS 4708, AND THE POINT OF BEGINNING; THENCE CONTINUE S. 89
DEGREES 59'50"W., 105.00 FEET TO A 5/8" IRON ROD, LB 6685, MARKING THE NE CORNER OF SAID SOUTH 1/2 OF
THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, AND
SOUTH 1/2 OF THE EAST 1/2 OF THE SE 1/4 OF SECTION 24, TOWNSHIP 6 SOUTH, RANGE 16 EAST, COLUMBIA COUNTY, FLORIDA, A DISTANCE OF 210.00 FEET TO A 5/8" IRON ROD, LS
4708; THENCE N. 88 DEGREES 59'50"E., 105.00 FEET TO A 5/8" IRON ROD, LS 4708; THENCE N. 00 DEGREES
00'18"E., 105.00 FEET TO THE POINT OF BEGINNING.
PARCEL CONTAINS 0.51 ACRES, MORE OR LESS.

TOGETHER WITH A 30 FOOT WIDE EASEMENT FOR INGRESS AND EGRESS OVER AND ACROSS THE FOLLOWING DESCRIBED LANDS:



ROSS CHAPIN ARCHITECTS

Post Office Box 230 • 195 Second Street • Langley, Washington 98260
Ph: (360) 221 2373 • Fx: (360) 221 8603 • Em: inquiry@rosschapin.com

0905-36

March 31, 2009

Calvin Patrick
1141 SW Cumorah Hill St.
Fort White, FL 32038

Re: Plumrose House

Dear Calvin,

Thank you for your purchase of the Plumrose house plans. Enclosed you will find the set of plans, a project manual, a printed copy of your license agreement and disclaimers, and a copy of your sales receipt. Please note that you will see our GoodFit logo on your plans, GoodFit being a division of Ross Chapin Architects. It is our experience that it is preferable not to have the word architect on building plans when seeking approval from local jurisdictions. Please note that you will need to have the plans engineered for your building site.

I hope it goes well with the construction of your home. Please let us know how it all works out for you. Down the road, if you are willing to share some photos of your new home, we'd love to see them.

Warm regards,

Debbie Loudon
GoodFit Stock House Plans
Ross Chapin Architects
debbie@rosschapin.com

Encl: Sales Receipt
1 Set Construction Drawings
Project Manual
License and Disclaimer Agreement

Subject: RE: Patrick - Plumrose house plan/license agreement

Date: Monday, March 30, 2009 1:57 PM

From: Calvin Patrick <vonbek2000@hotmail.com>

To: Debbie Loudon <Debbie@RossChapin.com>

I accepted the agreement below. I look forward to viewing the pictures, thank you for taking the time to gather them. My wife will be very excited I'm sure.

Best Regards,
Calvin

Date: Mon, 30 Mar 2009 13:13:32 -0700

Subject: Patrick - Plumrose house plan/license agreement

From: Debbie@RossChapin.com

To: vonbek2000@hotmail.com

Patrick - Plumrose house plan/license agreement Hello again, Calvin. Thank you for your call this morning and order of the Plumrose House plans. You are going to love the PDF I attached with photos of the Plumrose. I found quite a few for you.

Because you ordered by phone, I am emailing you our license agreement. Please look it over and following the red type below the agreement, type in "I, Calvin Patrick, accept these terms." Please return your acceptance by email to me ASAP. When I get this agreement back, I will get the plans printed up and mailed out to you.

GoodFit Plans
a Division of Ross Chapin Architects

License Agreement

Grant of License: In consideration of payment for these construction documents, Ross Chapin Architects (RCA) grants you, the Licensee, a nonexclusive right to use and to construct ONE structure from these documents. Additional licenses may be obtained by contacting the RCA office. RCA reserves all rights not expressly granted to Licensee.

Copies: One plan copy provided. Your license agreement allows you to copy additional sets as needed for your project.

responsibility to ensure that construction conforms to these plans, nor has any responsibility for construction means, methods, techniques, sequences, procedures or safety precautions in connection with the work.

5) RCA retains ownership of the construction documents and all subsequent copies of the works regardless of the form of the original and other copies. This is not a sale of the original documents whatsoever.

6) These drawings and specifications are copyrighted. Unauthorized copying of these documents is expressly forbidden. The Licensee is granted the right to make copies as needed for the construction of one (1) building per plan purchase. Any other copying is unauthorized. The Licensee may be held legally responsible for any copyright infringement that is caused or encouraged by the failure to adhere to the terms of this agreement.

Please type in that you accept these license agreement terms: I, Calvin Patrick, accept these terms.

Here is the contact information for the engineer who has previously done the calculations for this cottage:

Karl Rosman
Swenson Say Faget
2124 Third Avenue, Suite 100
Seattle, WA 98121
Business phone 1: 206-443-6212
Email: krosman@swensonsayfaget.com <<http://swensonsayfaget.com>>

Since Karl has previously worked on these plans, if you are decide to work with him you should see substantial savings on engineering costs.

Thanks again, Calvin.

Best regards,

Debbie Loudon
Marketing Manager



ROSS CHAPIN ARCHITECTS

Post Office Box 230 • 195 Second Street • Langley, Washington 98260
Ph: (360) 221 2373 • Fx: (360) 221 8603 • Em: inquiry@rosschapin.com

Sales Receipt

| Date | Sale No. |
|-----------|----------|
| 3/30/2009 | 09-013 |

Sold To

Calvin Patrick
1141 SW Cumorah Hill St.
Fort White, FL 32038

| | | Check No. | Payment Method |
|--------------------------------|-----|------------------|----------------|
| | | | Credit Card |
| Description | Qty | Rate | Amount |
| Plumrose Construction Drawings | 1 | 1,150.00 | 1,150.00 |
| Standard Shipping Charge | 1 | 10.00 | 10.00 |
| | | Subtotal | \$1,160.00 |
| | | Sales Tax (0.0%) | \$0.00 |
| | | Total | \$1,160.00 |

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Performance Method A

Project Name: 904082PatrickCalvinRes
 Street: 1141SW Cumorah Hill St.
 City, State, Zip: Ft. White, FL, 32038-
 Owner: Calvin Patrick
 Design Location: FL, Gainesville

Builder Name: Owner
 Permit Office: Columbia
 Permit Number: 27912
 Jurisdiction: 221000

- | | |
|--|------------------|
| 1. New construction or existing | New (From Plans) |
| 2. Single family or multiple family | Single-family |
| 3. Number of units, if multiple family | 1 |
| 4. Number of Bedrooms | 2 |
| 5. Is this a worst case? | No |
| 6. Conditioned floor area (ft ²) | 1635 |

- | | | |
|--------------|-------------|------------------------|
| 7. Windows | Description | Area |
| a. U-Factor: | Dbl, U=0.58 | 321.64 ft ² |
| SHGC: | SHGC=0.32 | |
| b. U-Factor: | N/A | ft ² |
| SHGC: | | |
| c. U-Factor: | N/A | ft ² |
| SHGC: | | |
| d. U-Factor: | N/A | ft ² |
| SHGC: | | |
| e. U-Factor: | N/A | ft ² |
| SHGC: | | |

- | | | |
|-----------------|------------|------------------------|
| 8. Floor Types | Insulation | Area |
| a. Raised Floor | R=11.0 | 920.00 ft ² |
| b. N/A | R= | ft ² |
| c. N/A | R= | ft ² |

- | | | |
|---------------------------|------------|-------------------------|
| 9. Wall Types | Insulation | Area |
| a. Frame - Wood, Exterior | R=13.0 | 2128.30 ft ² |
| b. N/A | R= | ft ² |
| c. N/A | R= | ft ² |
| d. N/A | R= | ft ² |

- | | | |
|---------------------------------------|------------|-------------------------|
| 10. Ceiling Types | Insulation | Area |
| a. Cathedral/Single Assembly (Vented) | R=30.0 | 1274.00 ft ² |
| b. N/A | R= | ft ² |
| c. N/A | R= | ft ² |

11. Ducts
 a. Sup: Attic Ret: Attic AH: Interior Sup. R= 6, 120 ft²

12. Cooling systems
 a. Central Unit
 Cap: 36 kBtu/hr
 SEER: 13

13. Heating systems
 a. Electric Heat Pump
 Cap: 36 kBtu/hr
 HSPF: 7.8

14. Hot water systems
 a. Electric
 Cap: 1 gallons
 EF: 0.88
 b. Conservation features
 None

15. Credits
 None

Glass/Floor Area: 0.197

Total As-Built Modified Loads: 43.69

Total Baseline Loads: 51.50

PASS

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

PREPARED BY:

DATE: 5/7/09 EVAN BEAMSLER

I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.

OWNER/AGENT:

DATE:

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.



BUILDING OFFICIAL:

DATE:

PROJECT

| | | |
|--------------------------------|------------------------|-------------------------------|
| Title: 904082PatrickCalvinRes | Bedrooms: 2 | Address Type: Street Address |
| Building Type: FLAsBuilt | Bathrooms: 0 | Lot # |
| Owner: Calvin Patrick | Conditioned Area: 1635 | SubDivision: |
| # of Units: 1 | Total Stories: 2 | PlatBook: |
| Builder Name: Owner | Worst Case: No | Street: 1141SW Cumorah Hill |
| Permit Office: | Rotate Angle: 0 | County: Columbia |
| Jurisdiction: | Cross Ventilation: | City, State, Zip: Ft. White , |
| Family Type: Single-family | Whole House Fan: | FL , 32038- |
| New/Existing: New (From Plans) | | |
| Comment: | | |

CLIMATE

| | Design Location | TMY Site | IECC Zone | Design Temp 97.5 % 2.5 % | Int Design Temp Winter Summer | Heating Degree Days | Design Moisture | Daily Temp Range |
|---|-----------------|---------------------|-----------|--------------------------------|-------------------------------------|------------------------|--------------------|---------------------|
| ✓ | FL, Gainesville | FL_GAINESVILLE_REGI | 2 | 32 92 | 75 70 | 1305.5 | 51 | Medium |

FLOORS

| | # | Floor Type | R-Value | Area | Tile | Wood | Carpet |
|---|---|--------------|---------|---------|------|------|------------|
| ✓ | 1 | Raised Floor | | 920 ft² | 11 | 0.3 | 0.2 0.5 |

ROOF

| | # | Type | Materials | Roof Area | Gable Area | Roof Color | Solar Absor. | Tested | Deck Insul. | Pitch |
|---|---|------|----------------------|-----------|------------|------------|--------------|--------|-------------|--------|
| ✓ | 1 | Hip | Composition shingles | 1301 ft² | 0 ft² | Dark | 0.96 | No | 0 | 45 deg |

ATTIC

| | # | Type | Ventilation | Vent Ratio (1 in) | Area | RBS | IRCC |
|---|---|-----------------------|-------------|-------------------|---------|-----|------|
| ✓ | 1 | Full cathedral ceilin | Vented | 300 | 920 ft² | N | N |

CEILING

| | # | Ceiling Type | R-Value | Area | Framing Frac | Truss Type |
|---|---|------------------------------------|---------|----------|--------------|------------|
| ✓ | 1 | Cathedral/Single Assembly (Vented) | 30 | 1274 ft² | 0.11 | Wood |

WALLS

| | # | Ornt | Adjacent To | Wall Type | Cavity R-Value | Area | Sheathing R-Value | Framing Fraction | Solar Absor. |
|---|---|------|-------------|--------------|----------------|------------|-------------------|------------------|--------------|
| ✓ | 1 | N | Exterior | Frame - Wood | 13 | 378 ft² | | 0.23 | 0.75 |
| | 2 | E | Exterior | Frame - Wood | 13 | 261 ft² | | 0.23 | 0.75 |
| | 3 | S | Exterior | Frame - Wood | 13 | 378 ft² | | 0.23 | 0.75 |
| | 4 | W | Exterior | Frame - Wood | 13 | 224 ft² | | 0.23 | 0.75 |
| | 5 | N | Exterior | Frame - Wood | 13 | 226.67 ft² | | 0.23 | 0.75 |
| | 6 | E | Exterior | Frame - Wood | 13 | 196 ft² | | 0.23 | 0.75 |
| | 7 | S | Exterior | Frame - Wood | 13 | 226.67 ft² | | 0.23 | 0.75 |
| | 8 | W | Exterior | Frame - Wood | 13 | 238 ft² | | 0.23 | 0.75 |

DOORS

| ✓ | # | Ornt | Door Type | Storms | U-Value | Area |
|-------|---|------|-----------|--------|---------|-----------|
| _____ | 1 | N | Insulated | None | 0.38 | 20 ft² |
| _____ | 2 | W | Insulated | None | 0.21 | 16.67 ft² |
| _____ | 3 | E | Insulated | None | 0.21 | 20 ft² |
| _____ | 4 | W | Insulated | None | 0.21 | 9.38 ft² |

WINDOWS

Window orientation below is as entered. Actual orientation is modified by rotate angle shown in "Project" section above.

| ✓ | # | Ornt | Frame | Panes | NFRC | U-Factor | SHGC | Storms | Area | Overhang | | Int Shade | Screening |
|-------|----|------|-------|----------------|------|----------|------|--------|-----------|------------|------------|-----------|-----------|
| | | | | | | | | | | Depth | Separation | | |
| _____ | 1 | N | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 20 ft² | 3 ft 8 in | 1 ft 0 in | HERS 2006 | None |
| _____ | 2 | N | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 6 ft² | 3 ft 8 in | 0 ft 0 in | HERS 2006 | None |
| _____ | 3 | N | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 8.17 ft² | 0 ft 0 in | 0 ft 0 in | HERS 2006 | None |
| _____ | 4 | N | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 16.33 ft² | 0 ft 0 in | 0 ft 0 in | HERS 2006 | None |
| _____ | 5 | N | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 18 ft² | 1 ft 6 in | 1 ft 0 in | HERS 2006 | None |
| _____ | 6 | N | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 9 ft² | 1 ft 6 in | 1 ft 0 in | HERS 2006 | None |
| _____ | 7 | E | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 18 ft² | 1 ft 0 in | 1 ft 0 in | HERS 2006 | None |
| _____ | 8 | E | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 18 ft² | 1 ft 0 in | 1 ft 0 in | HERS 2006 | None |
| _____ | 9 | S | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 9 ft² | 14 ft 2 in | 1 ft 0 in | HERS 2006 | None |
| _____ | 10 | E | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 34.17 ft² | 9 ft 6 in | 1 ft 0 in | HERS 2006 | None |
| _____ | 11 | S | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 34.17 ft² | 0 ft 0 in | 0 ft 0 in | HERS 2006 | None |
| _____ | 12 | S | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 10.5 ft² | 1 ft 6 in | 1 ft 0 in | HERS 2006 | None |
| _____ | 13 | W | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 14.17 ft² | 0 ft 0 in | 0 ft 0 in | HERS 2006 | None |
| _____ | 14 | N | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 8.17 ft² | 1 ft 6 in | 5 ft 0 in | HERS 2006 | None |
| _____ | 15 | N | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 19.44 ft² | 1 ft 6 in | 5 ft 0 in | HERS 2006 | None |
| _____ | 16 | E | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 10.5 ft² | 1 ft 6 in | 1 ft 0 in | HERS 2006 | None |
| _____ | 17 | E | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 10.42 ft² | 1 ft 6 in | 2 ft 0 in | HERS 2006 | None |
| _____ | 18 | S | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 10.42 ft² | 1 ft 6 in | 5 ft 0 in | HERS 2006 | None |
| _____ | 19 | S | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 10.5 ft² | 1 ft 6 in | 7 ft 0 in | HERS 2006 | None |
| _____ | 20 | S | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 5.44 ft² | 1 ft 6 in | 5 ft 0 in | HERS 2006 | None |
| _____ | 21 | W | Metal | Double (Clear) | Yes | 0.58 | 0.32 | N | 31.25 ft² | 1 ft 6 in | 5 ft 0 in | HERS 2006 | None |

INFILTRATION & VENTING

| ✓ | Method | SLA | CFM 50 | ACH 50 | ELA | EqLA | ---- Forced Ventilation ---- | | Run Time | Fan |
|-------|---------|---------|--------|--------|------|-------|------------------------------|-------------|----------|-------|
| | | | | | | | Supply CFM | Exhaust CFM | Fraction | Watts |
| _____ | Default | 0.00036 | 1544 | 7.08 | 84.8 | 159.4 | 0 cfm | 0 cfm | 0 | 0 |

COOLING SYSTEM

| ✓ | # | System Type | Subtype | Efficiency | Capacity | Air Flow | SHR | Ductless |
|-------|---|--------------|---------|------------|------------|----------|------|----------|
| _____ | 1 | Central Unit | None | SEER: 13 | 36 kBtu/hr | 1080 cfm | 0.75 | False |

HEATING SYSTEM

| ✓ | # | System Type | Subtype | Efficiency | Capacity | Ductless |
|-------|---|--------------------|---------|------------|------------|----------|
| _____ | 1 | Electric Heat Pump | None | HSPF: 7.8 | 36 kBtu/hr | False |

HOT WATER SYSTEM

| ✓ | # | System Type | EF | Cap | Use | SetPnt | Conservation |
|-------|---|-------------|------|-------|--------|---------|--------------|
| _____ | 1 | Electric | 0.88 | 1 gal | 50 gal | 120 deg | None |

SOLAR HOT WATER SYSTEM

| ✓ | FSEC Cert # | Company Name | System Model # | Collector Model # | Collector Area | Storage Volume | FEF |
|-------|----------------|--------------|----------------|-------------------|-------------------|-------------------|-----|
| _____ | None | None | | | ft² | | |

DUCTS

| ✓ | # | --- Supply --- | | | --- Return --- | | Leakage Type | Air Handler | CFM 25 | Percent Leakage | QN | RLF |
|-------|---|----------------|---|---------|----------------|--------|-----------------|----------------|--------|--------------------|----|-----|
| _____ | 1 | Attic | 6 | 120 ft² | Attic | 60 ft² | Default Leakage | Interior | | | | |

TEMPERATURES

Programable Thermostat: None

Ceiling Fans:

| | | | | | | | | | | | | |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|
| Cooling | <input checked="" type="checkbox"/> Jan | <input checked="" type="checkbox"/> Feb | <input checked="" type="checkbox"/> Mar | <input checked="" type="checkbox"/> Apr | <input checked="" type="checkbox"/> May | <input checked="" type="checkbox"/> Jun | <input checked="" type="checkbox"/> Jul | <input checked="" type="checkbox"/> Aug | <input checked="" type="checkbox"/> Sep | <input checked="" type="checkbox"/> Oct | <input checked="" type="checkbox"/> Nov | <input checked="" type="checkbox"/> Dec |
| Heating | <input checked="" type="checkbox"/> Jan | <input checked="" type="checkbox"/> Feb | <input checked="" type="checkbox"/> Mar | <input checked="" type="checkbox"/> Apr | <input checked="" type="checkbox"/> May | <input checked="" type="checkbox"/> Jun | <input checked="" type="checkbox"/> Jul | <input checked="" type="checkbox"/> Aug | <input checked="" type="checkbox"/> Sep | <input checked="" type="checkbox"/> Oct | <input checked="" type="checkbox"/> Nov | <input checked="" type="checkbox"/> Dec |
| Venting | <input checked="" type="checkbox"/> Jan | <input checked="" type="checkbox"/> Feb | <input checked="" type="checkbox"/> Mar | <input checked="" type="checkbox"/> Apr | <input checked="" type="checkbox"/> May | <input checked="" type="checkbox"/> Jun | <input checked="" type="checkbox"/> Jul | <input checked="" type="checkbox"/> Aug | <input checked="" type="checkbox"/> Sep | <input checked="" type="checkbox"/> Oct | <input checked="" type="checkbox"/> Nov | <input checked="" type="checkbox"/> Dec |

Thermostat Schedule: HERS 2006 Reference

| Schedule Type | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
|---------------|----|----|----|----|----|----|----|----|----|----|----|----|----|
| Cooling (WD) | AM | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 |
| | PM | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 |
| Cooling (WEH) | AM | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 |
| | PM | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 | 78 |
| Heating (WD) | AM | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 |
| | PM | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 |
| Heating (WEH) | AM | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 |
| | PM | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 | 68 |

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: 1141SW Cumorah Hill St.
Ft. White, FL, 32038-

PERMIT #:

INFILTRATION REDUCTION COMPLIANCE CHECKLIST

| COMPONENTS | SECTION | REQUIREMENTS FOR EACH PRACTICE | CHECK |
|-------------------------------|----------------|---|-------|
| Exterior Windows & Doors | N1106.AB.1.1 | Maximum: .3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area. | |
| Exterior & Adjacent Walls | N1106.AB.1.2.1 | Caulk, gasket, weatherstrip or seal between: windows/doors & frames, surrounding wall; foundation & wall sole or sill plate; joints between exterior wall panels at corners; utility penetrations; between wall panels & top/bottom plates; between walls and floor. EXCEPTION: Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate. | |
| Floors | N1106.AB.1.2.2 | Penetrations/openings > 1/8" sealed unless backed by truss or joint members. EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams. | |
| Ceilings | N1106.AB.1.2.3 | Between walls & ceilings; penetrations of ceiling plane to top floor; around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams. | |
| Recessed Lighting Fixtures | N1106.AB.1.2.4 | Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC with < 2.0 cfm from conditioned space, tested. | |
| Multi-story Houses | N1106.AB.1.2.5 | Air barrier on perimeter of floor cavity between floors. | |
| Additional Infiltration reqts | N1106.AB.1.3 | Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air. | |

OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

| COMPONENTS | SECTION | REQUIREMENTS | CHECK |
|--------------------------|---------------------------|--|-------|
| Water Heaters | N1112.AB.3 | Comply with efficiency requirements in Table N112.ABC.3. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required. | |
| Swimming Pools & Spas | N1112.AB.2.3 | Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%. Heat pump pool heaters shall have a minimum COP of 4.0. | |
| Shower heads | N1112.AB.2.4 | Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG. | |
| Air Distribution Systems | N1110.AB | All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated and installed in accordance with the criteria of Section N1110.AB. Ducts in unconditioned attics: R-6 min. insulation. | |
| HVAC Controls | N1107.AB.2 | Separate readily accessible manual or automatic thermostat for each system. | |
| Insulation | N1104.AB.1 N1102.B.1.1 | Ceilings-Min. R-19. Common walls-frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11. | |

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE INDEX* = 85

The lower the EnergyPerformance Index, the more efficient the home.

| | | | | | |
|--|------------------|------------------------|--|-----------------|-------------------------|
| 1. New construction or existing | New (From Plans) | | 9. Wall Types | Insulation | Area |
| 2. Single family or multiple family | Single-family | | a. Frame - Wood, Exterior | R=13.0 | 2128.30 ft ² |
| 3. Number of units, if multiple family | 1 | | b. N/A | R= | ft ² |
| 4. Number of Bedrooms | 2 | | c. N/A | R= | ft ² |
| 5. Is this a worst case? | No | | d. N/A | R= | ft ² |
| 6. Conditioned floor area (ft ²) | 1635 | | 10. Ceiling Types | Insulation | Area |
| 7. Windows** | Description | Area | a. Cathedral/Single Assembly (Vented) | R=30.0 | 1274.00 ft ² |
| a. U-Factor: | Dbl, U=0.58 | 321.64 ft ² | b. N/A | R= | ft ² |
| SHGC: | SHGC=0.32 | | c. N/A | R= | ft ² |
| b. U-Factor: | N/A | ft ² | 11. Ducts | | |
| SHGC: | | | a. Sup: Attic Ret: Attic AH: Interior Sup. R= 6, 120 ft ² | | |
| c. U-Factor: | N/A | ft ² | 12. Cooling systems | | |
| SHGC: | | | a. Central Unit | Cap: 36 kBtu/hr | SEER: 13 |
| d. U-Factor: | N/A | ft ² | 13. Heating systems | | |
| SHGC: | | | a. Electric Heat Pump | Cap: 36 kBtu/hr | HSPF: 7.8 |
| e. U-Factor: | N/A | ft ² | 14. Hot water systems | | |
| SHGC: | | | a. Electric | Cap: 1 gallons | EF: 0.88 |
| 8. Floor Types | Insulation | Area | b. Conservation features | | |
| a. Raised Floor | R=11.0 | 920.00 ft ² | None | | |
| b. N/A | R= | ft ² | 15. Credits | | None |
| c. N/A | R= | ft ² | | | |

I certify that this home has complied with the Florida Energy Efficiency Code for Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features.

Builder Signature: _____ Date: _____

Address of New Home: _____ City/FL Zip: _____



*Note: The home's estimated Energy Performance Index is only available through the EnergyGauge USA - FlaRes2008 computer program. This is not a Building Energy Rating. If your Index is below 100, your home may qualify for incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at (321) 638-1492 or see the Energy Gauge web site at energygauge.com for information and a list of certified Raters. For information about Florida's Energy Efficiency Code for Building Construction, contact the Department of Community Affairs at (850) 487-1824.

**Label required by Section 13-104.4.5 of the Florida Building Code, Building, or Section B2.1.1 of Appendix G of the Florida Building Code, Residential, if not DEFAULT.

Project Information

Licensee:
Site Address:
Site Telephone:
Parcel Number:
Legal Description:

Square Footage:
(Per ANSI Z765-2003;
method used by
local jurisdiction
for permitting
may vary)

| | |
|-------------------------------|------|
| First Floor: | 920 |
| Second Floor: >6'-0" headroom | 715 |
| Total Area: | 1635 |

Decks, Porches, (SF):

| | |
|--------------------------------|-----|
| Covered Porch | 170 |
| Uncovered Porch | 65 |
| Total Decks, Porches, Terraces | 235 |

Grant of License

In consideration of payment for these construction documents, Ross Chapin Architects (RCA) grants Calvin Patrick (Licensee) a nonexclusive right to use and to construct ONE structure from these documents. Additional licenses may be obtained by contacting the RCA office. RCA reserves all rights not expressly granted to Licensee.

Stock Plan General Notes & Disclaimers

- 1) These drawings have been prepared to meet generally accepted professional standards and practices, but have been developed without knowledge of or reference to the Licensee's specific site or geographical location. Local site conditions, such as frost depth, soil bearing capacity, seismic and wind zones, exposure, etc. may vary. Local code requirements for such life-safety requirements as stair width, stair rise and run, egress windows and smoke detectors, etc. may vary. The strength of materials (such as lumber) available locally may vary. Therefore, supplemental to these documents, it is the Licensee's responsibility to consult with his/her local builder and a professional designer or structural engineer to determine that these documents meet all current federal, state/provincial and local codes, ordinances/bylaws and regulations, etc., and are appropriate to specific site conditions. Compliance with such requirements shall take precedence over these documents.
- 2) Any use of this information without adaptation to changes in codes, standards, site conditions and other factors is at the Licensee's sole risk. Ross Chapin Architects (RCA) assumes no responsibility for changes made to these plans by others and makes no warranties, either expressed or implied, in the use of these plans. The Licensee agrees to defend and indemnify RCA for all claims, costs, losses or damages resulting from the use of these documents.
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- 4) RCA has not been engaged for construction supervision of any kind and assumes no responsibility to ensure that construction conforms to these plans, nor has any responsibility for construction means, methods, techniques, sequences, procedures or safety precautions in connection with the work.
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Symbol Legend

Window Number (See Schedules 10.2)

Door Number (See Schedules 10.2)

Shear Wall Type (See Schedules 10.1)

Building Section Sheet Number

Detail Number Sheet Number

Detail Number in Project Manual

Wood Frame Wall

Wood Frame Insulated Wall

Hold Down Type (See Schedules 10.1)

Center Line

Framing Lumber

Blocking

Finish Lumber

Plywood

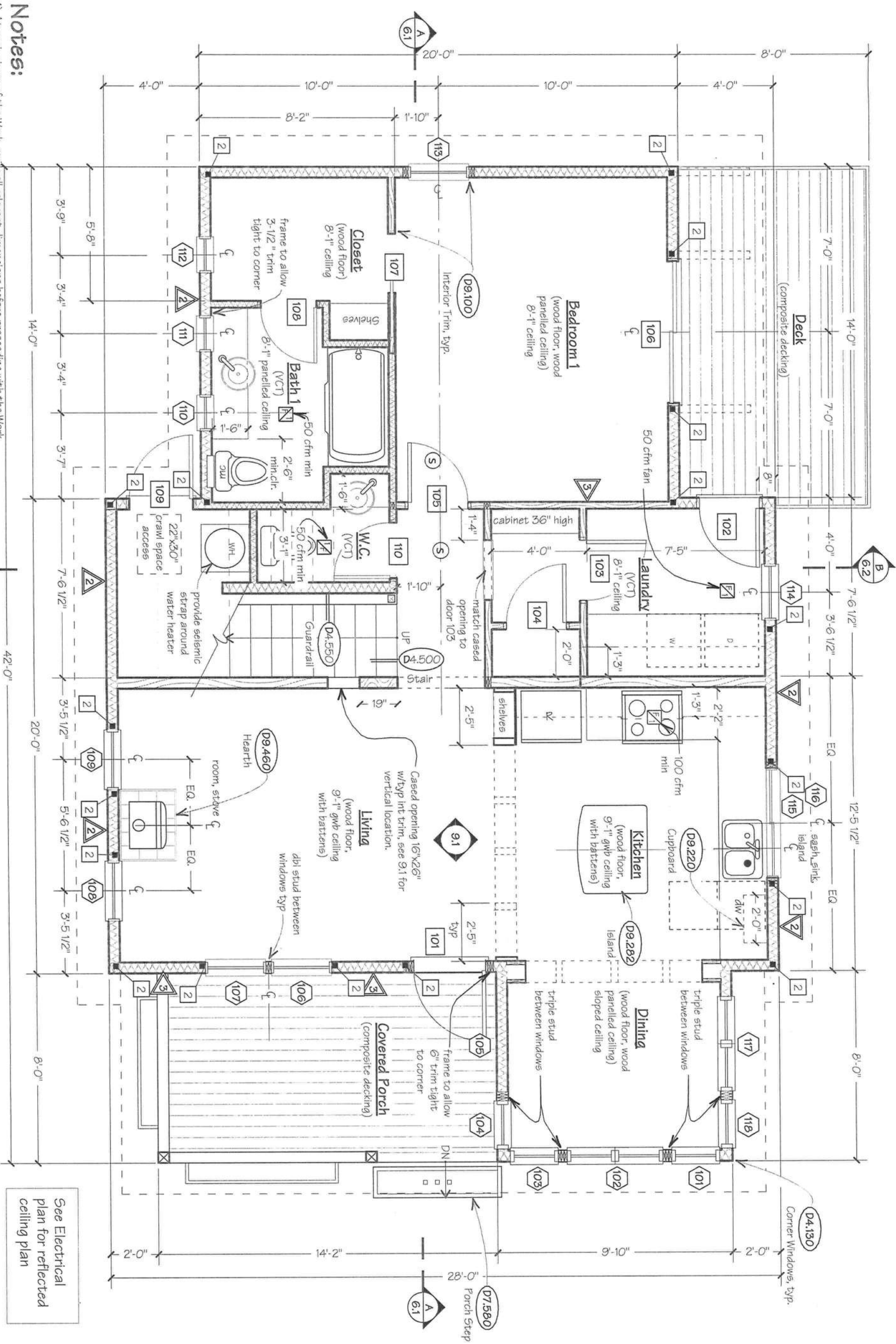
Schedule of Drawings

| Sheet # | Contents |
|---------|---|
| 1.1 | Cover Sheet, Project Information, Symbol Keys |
| 2.1 | NOT USED - (Insert site drawings here) |
| 4.1 | First Floor Plan |
| 4.2 | Second Floor Plan |
| 5.1 | Foundation & First Floor Framing Plan |
| 5.2 | Second Floor Framing Plan |
| 5.3 | Roof Framing Plan |
| 5.4 | Roof Framing Plan Detail |
| 6.1 | Section A-A |
| 6.2 | Section B-B, Building Systems |
| 7.1 | Front Elevation |
| 7.2 | Left Elevation |
| 7.3 | Back Elevation |
| 7.4 | Right Elevation |
| 8.1 | First Floor Electrical Plan |
| 8.2 | Second Floor Electrical Plan |
| 9.1 | Interior Elevations |
| 9.2 | Photos |
| 9.3 | Photos |
| 10.1 | Shearwall Schedules |
| 10.2 | Window Schedule, Door Schedule |
| | Project Manual includes Construction Details and Specifications |



Notes:

- 1) At each phase of the Work, verify all relevant dimensions before proceeding with the Work.
- 2) Frame doors so that full width interior trim is tight to wall or corner. Unless Noted Otherwise (U.N.O)
- 3) For additional information on building systems refer to Sheet G.1 & Project Manual.
- 4) Refer to Elevation Sheets for header heights.
- 5) For additional information refer to Project Manual, specifications, Shear, Window and Door Schedules.
- 6) Electric meter and Hose Bib to be field located.
- 7) Where required by code, provide a whole-house fan with accessible 24 clock timer w/ capability of continuous operation, manual and automatic control.



First Floor Plan

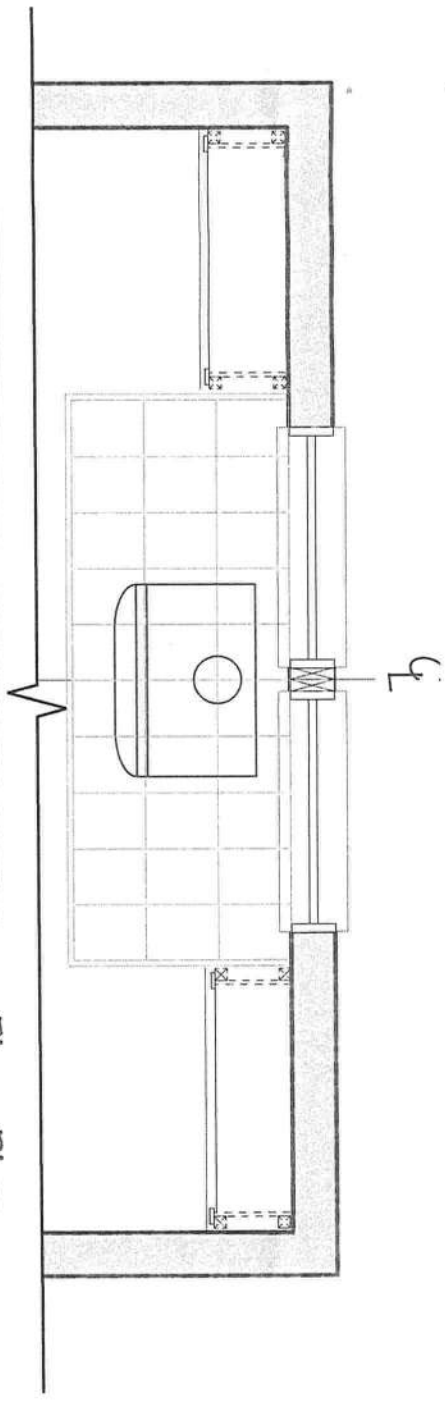
See Electrical plan for reflected ceiling plan

5/5/08

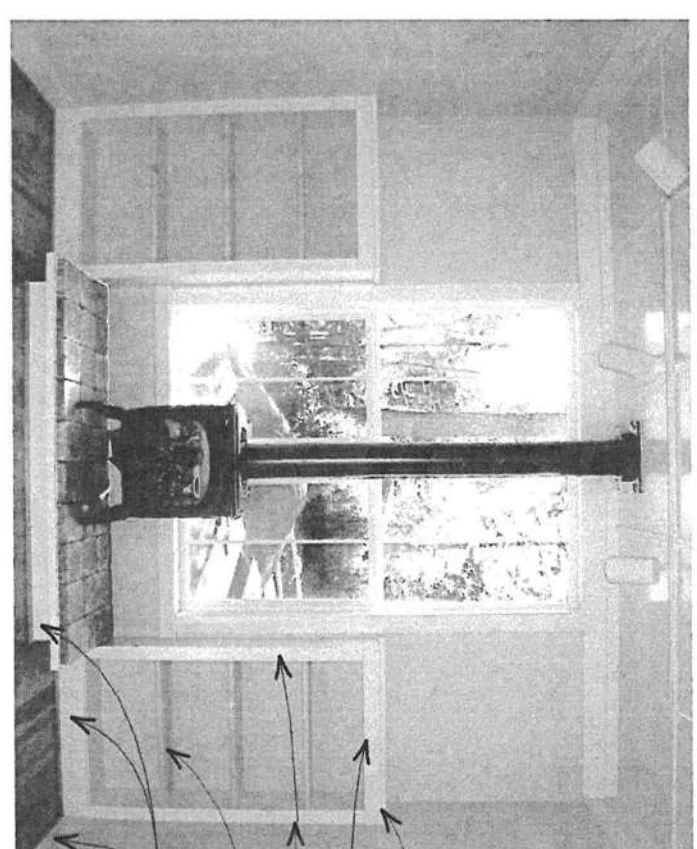
4.1 PLAN

Plumrose

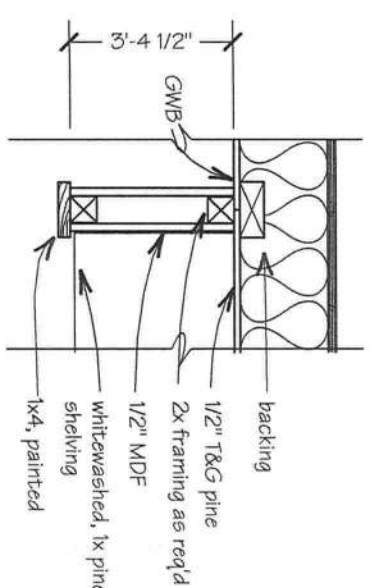
GoodFit
Cottages and Small Houses
PO Box 230 • Langley, Washington 98260 • Em: inquiry@goodfit.net • www.goodfit.net



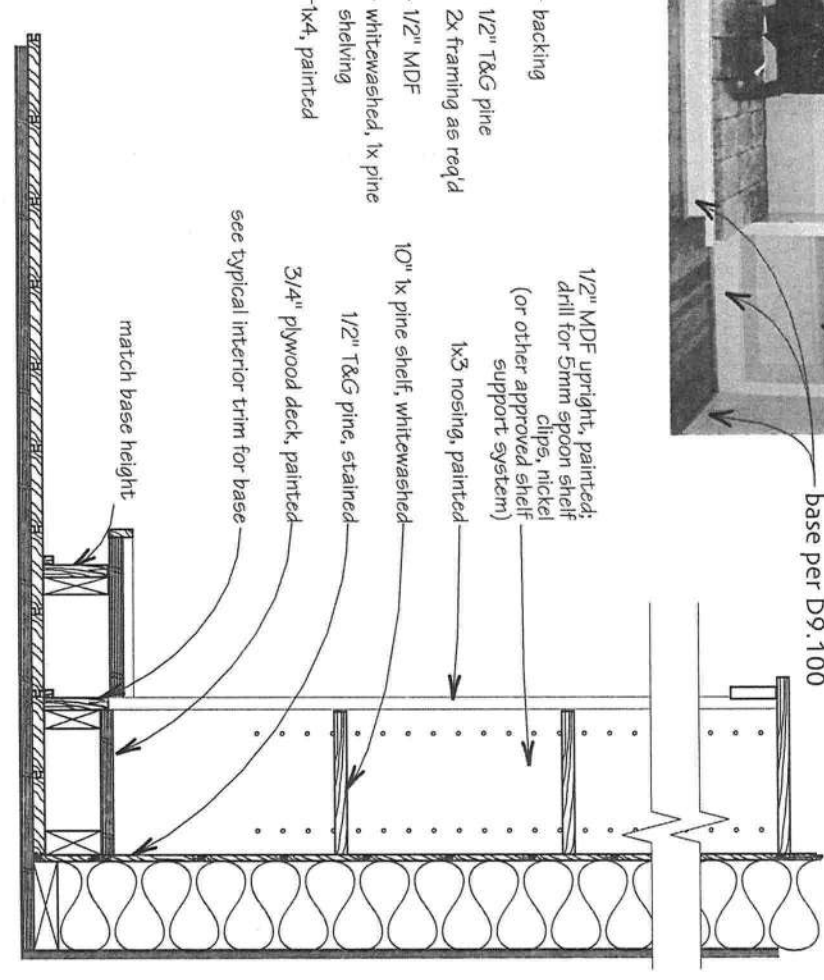
Floor Plan



1" MDF bullnose top
3/4" x 3 MDF
1/2" x 2 1/2" MDF
painted wood adjustable shelves
or 1" pine stair treads, typ.
base per D9.100

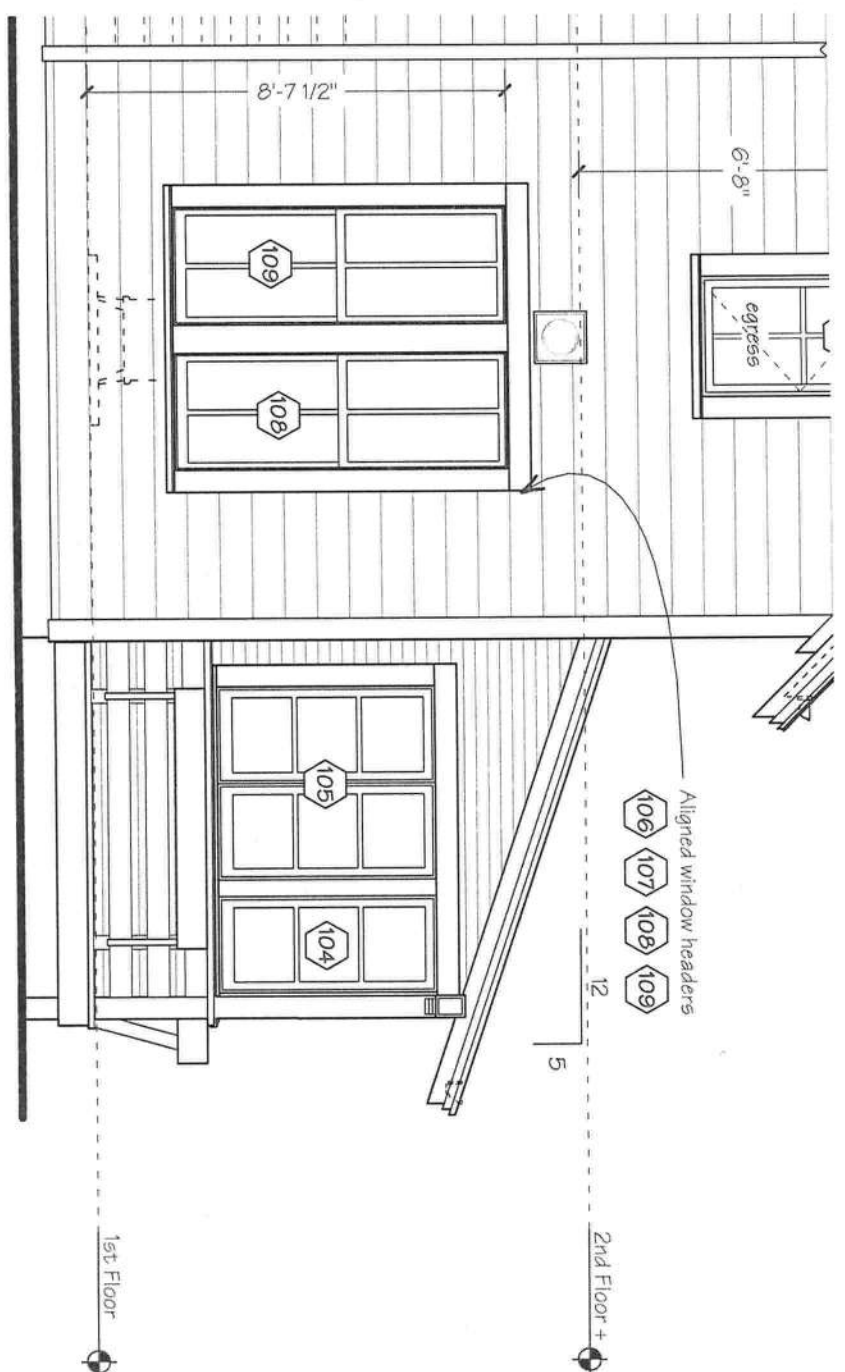


Plan Detail



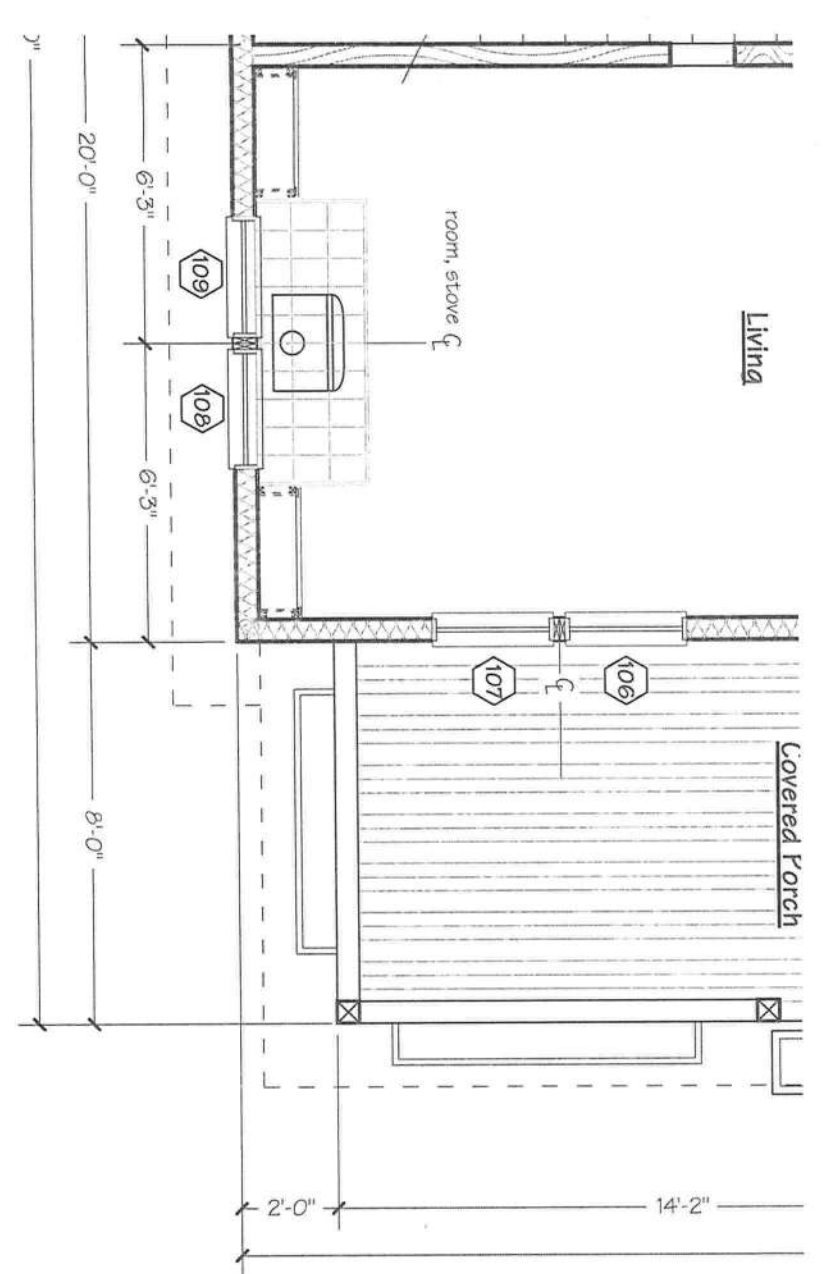
Bookcase Section

0 6" 1' 2'



Left Elevation-Option

0 2 4 8'

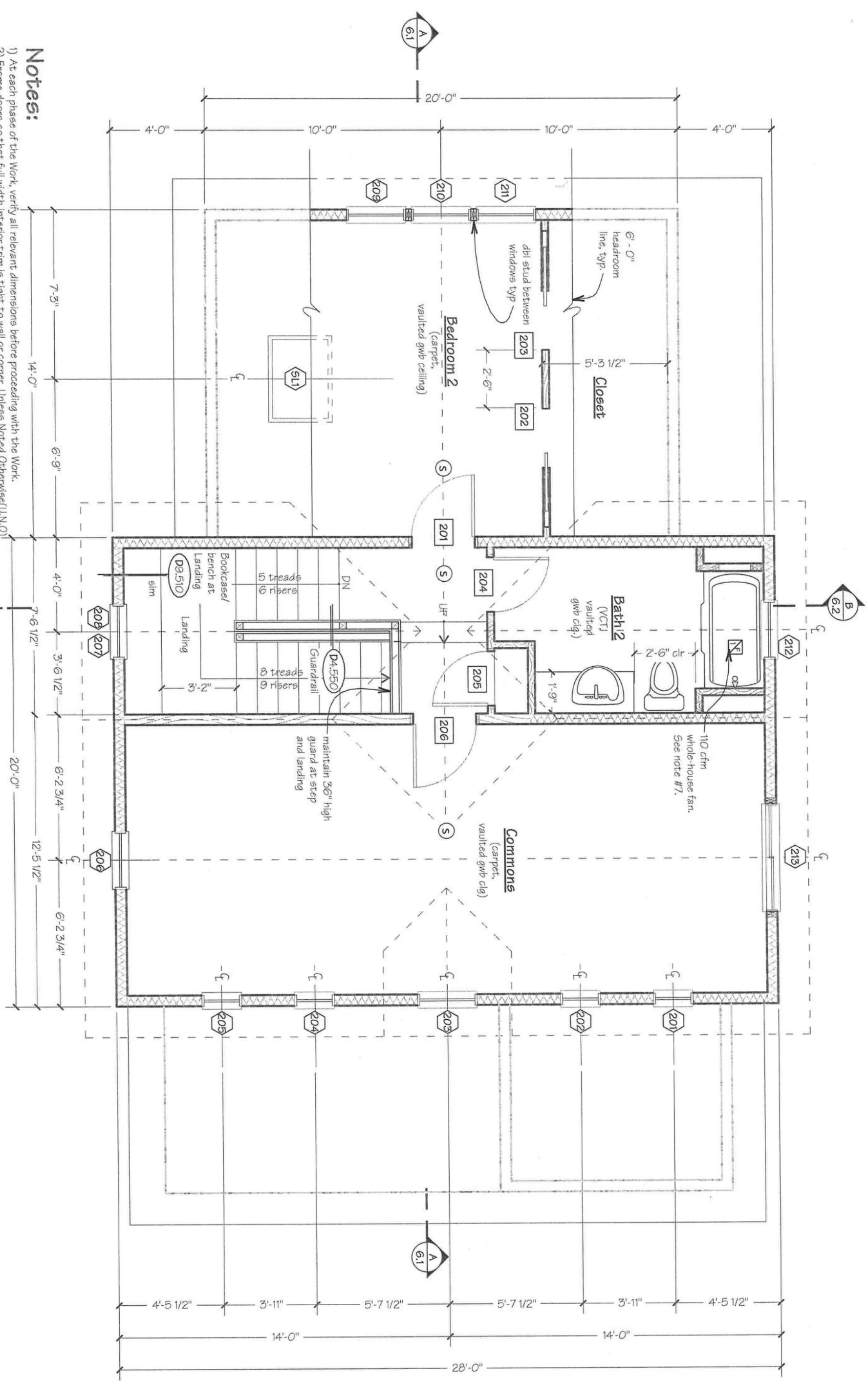


First Floor Plan-Option

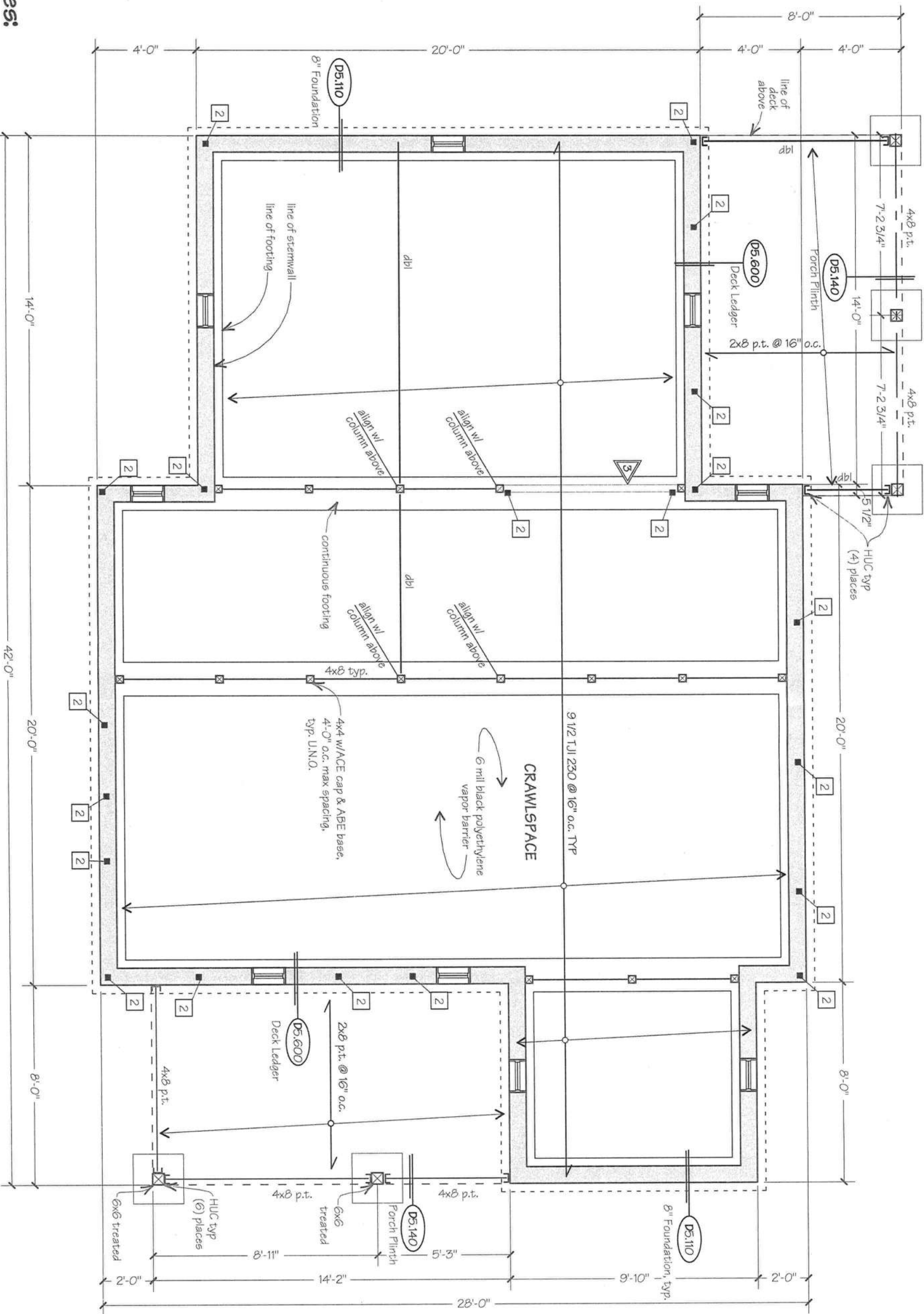
0 2 4 8'

This sheet is provided as an option. It should be removed from the set if the owner chooses not to use it.

- Notes:**
- 1) At each phase of the Work, verify all relevant dimensions before proceeding with the Work.
 - 2) Frame doors so that full width interior trim is tight to wall or corner, Unless Noted Otherwise (U.N.O)
 - 3) For additional information on building systems refer to Sheet 6.1 & Project Manual.
 - 4) Refer to Elevation Sheets for header heights.
 - 5) For additional information refer to Project Manual, specifications, Shear, Window and Door Schedules.
 - 6) Electric meter and Hose Bib to be field located.
 - 7) Where required by code, provide a whole-house fan with accessible 24 clock timer w/ capability of continuous operation, manual and automatic control.



Second Floor Plan

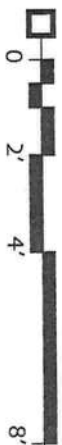


Notes:

- 1) It is the owner's responsibility to consult with a structural engineer to determine that these documents meet all current federal, state and local codes, ordinances and regulations, etc., and are appropriate to specific site conditions.
- 2) At each phase of the Work, verify all relevant dimensions before proceeding with the work.
- 3) All door and window headers are (2) 2x6 HF #2, except as noted.
- 4) All walls to be SWI U.N.O.
- 5) Refer to Shear Wall Schedules and additional structural & material information.
- 6) For additional information on building systems refer to Sheet 6.1 & Project Manual.
- 7) Note that contractor is responsible for location of hold downs.

Crawl Space Ventilation Requirements
(10sf ventilation per 150sf crawlspace area)
Crawlspace Area: 827 sf (Requires 5.51 sf ventilation)
(9) Foundation vents: 67x1.33x.75 efficient = 6.01sf
Total Ventilation: 6.01sf > 5.51 OK

Foundation & 1st Fl. Framing Plan



5/5/08

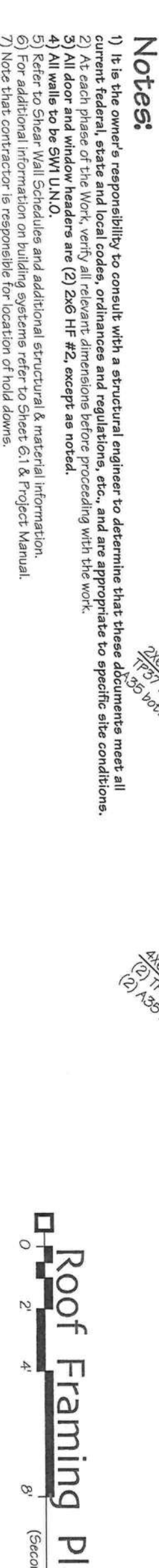
5.1 Plumrose
FOUNDATION

GoodFit
Cottages and Small Houses
PO Box 230 • Langley, Washington 98260 • Em: inquiry@goodfit.net • www.goodfit.net



- 1) It is the owner's responsibility to consult with a structural engineer to determine that these documents meet all current federal, state and local codes, ordinances and regulations, etc., and are appropriate to specific site conditions.
- 2) At each phase of the Work, verify all relevant dimensions before proceeding with the work.
- 3) All door and window headers are (2) 2x6 HF #2, except as noted.
- 4) All walls to be SWI UNO.
- 5) Refer to Shear Wall Schedules and additional structural & material information.
- 6) For additional information on building systems refer to Sheet 6.1 & Project Manual.
- 7) Note that contractor is responsible for location of hold downs.

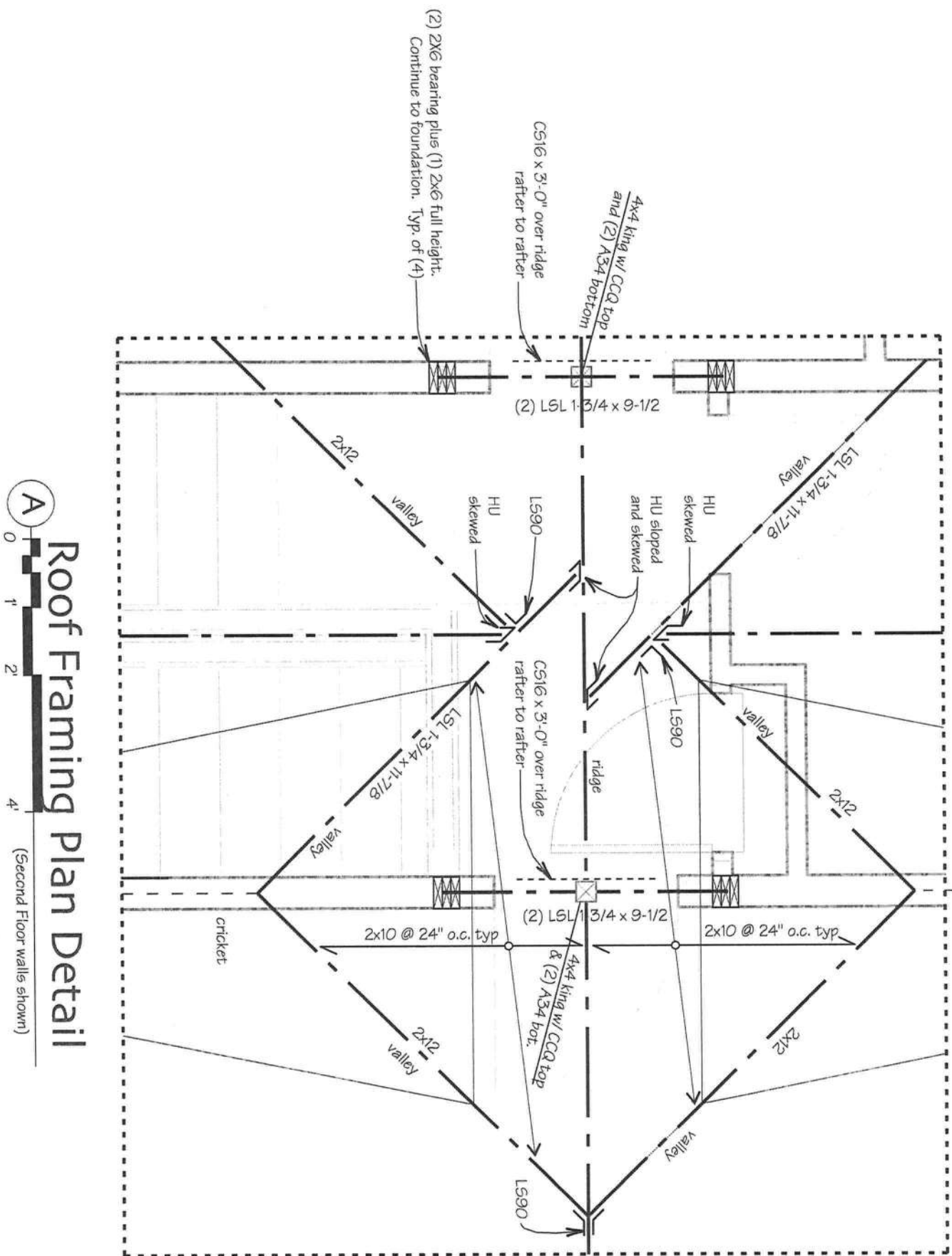
Second Floor Framing Plan

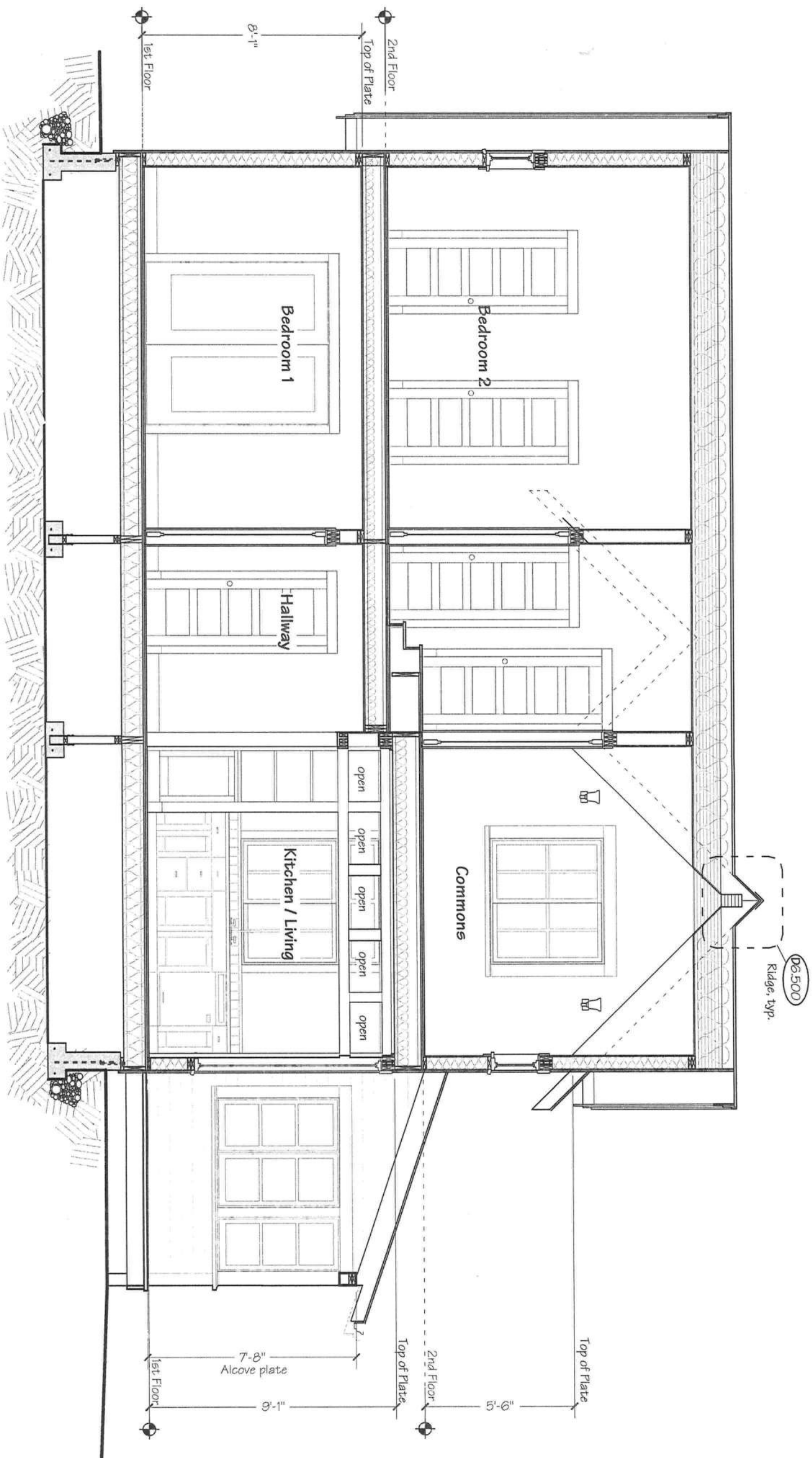


(Second Floor walls shown)

Notes:

- 1) It is the owner's responsibility to consult with a structural engineer to determine that these documents meet all current federal, state and local codes, ordinances and regulations, etc., and are appropriate to specific site conditions.
- 2) At each phase of the Work, verify all relevant dimensions before proceeding with the work.
- 3) All door and window headers are (2) 2x6 HF #2, except as noted.
- 4) All walls to be SW1 U.N.O.
- 5) Refer to Shear Wall Schedules and additional structural & material information.
- 6) For additional information on building systems refer to Sheet G.1 & Project Manual.
- 7) Note that contractor is responsible for location of hold downs.





Section A-A

Main Roof Systems

Roofing: asphalt composition roofing
15# felt
5/8" CDX plywood sheathing
At eaves: 7/16" LP SmartSide Panel w/ 4" grooves
Rafters per plan w/ tails cut to 2x6, tie to top plate w/ Simpson A35
8 1/2" (R34) B.I.B.S. (Blown In Blanket System) insulation
Collar ties or 2x8 ceiling joists per plan
1/2" GNB-CD
Vapor barrier: PVA sealer (heavy coat for 1.0 perm rating)
Paint per schedule

Porch Roof System

Roofing: asphalt composition roofing
15# felt
5/8" CDX plywood sheathing
4x6 rafters @ 24" o.c.

Second Floor System

Flooring per plan
3/4" CDX t&g plywood - glue and screw
Joists per plan
3 1/2" acoustical insulation
1/2" GNB-CD or 1x10 #2 pine paneling w/light whitewash stain

First Floor System

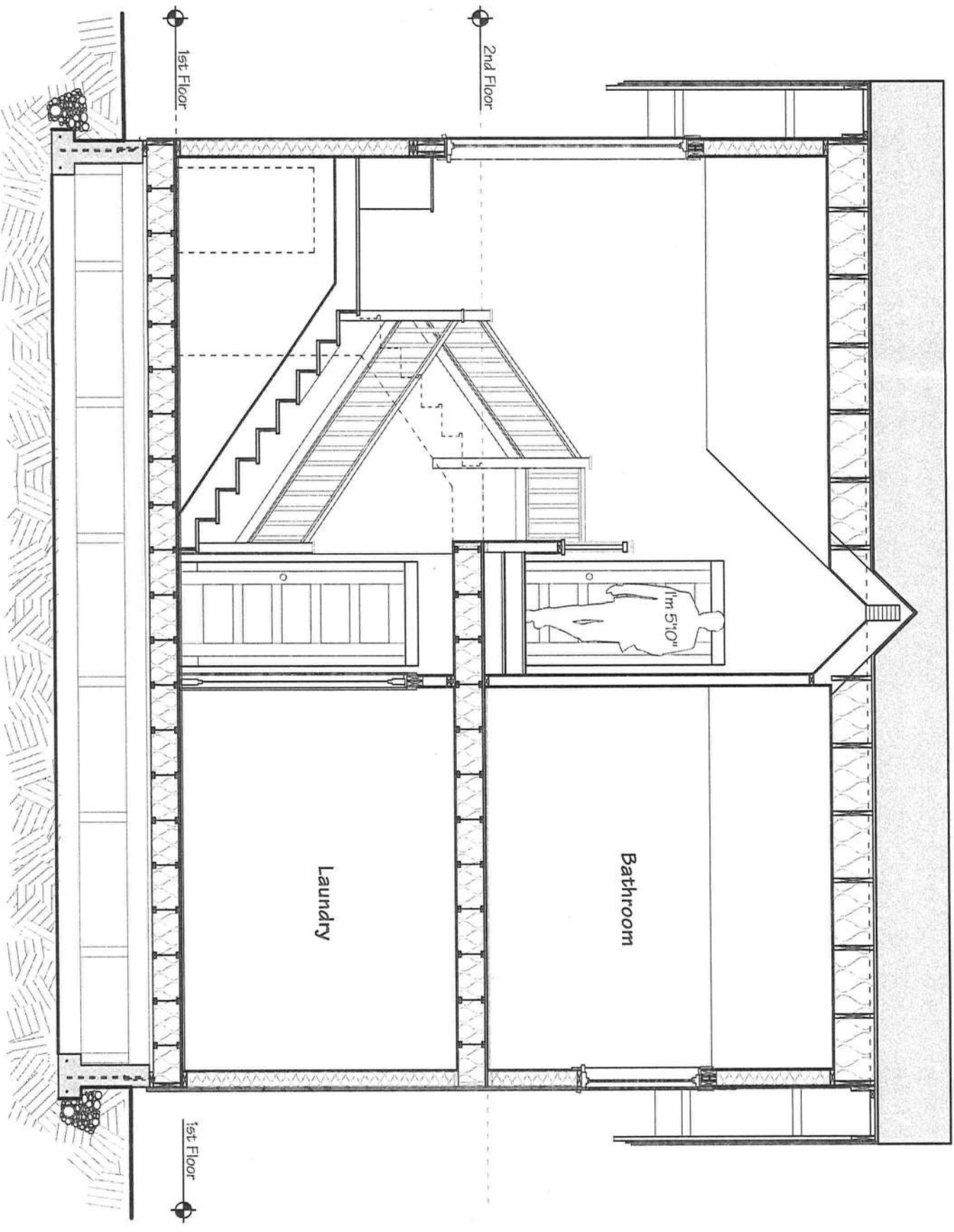
Flooring per plan
3/4" CDX t&g plywood - glue & nail
Joists per plan
R30 fiberglass batt insulation

Wall System

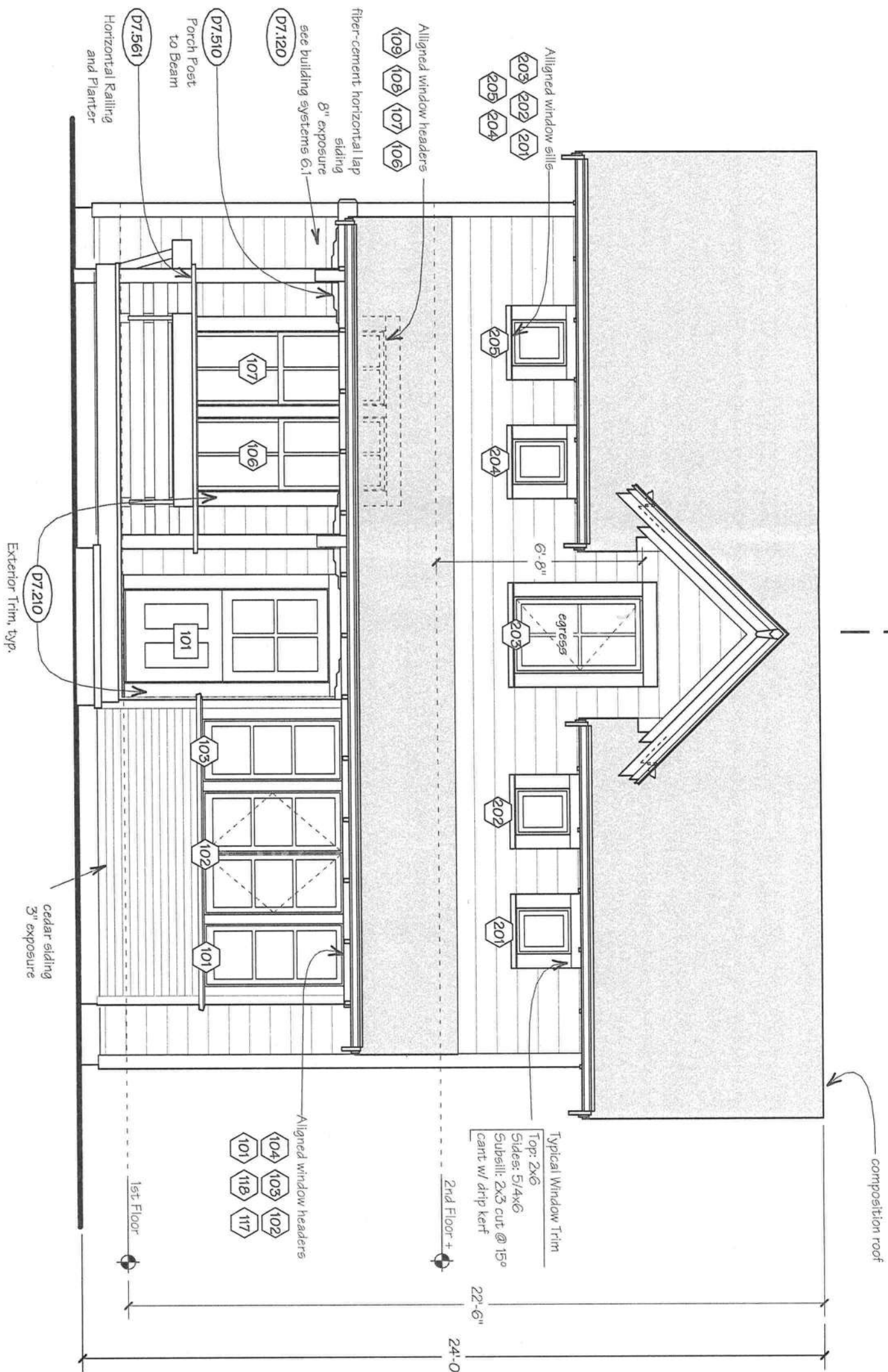
Siding: (A). 5/16" fiber-cement 6 1/4" horizontal lap; painted
(B). 5/16" fiber-cement 9 1/2" horizontal lap; painted
Weather-resistive barrier
Sheathing per shear schedule
Exterior wall framing: 2x6 HF #2 @ 16" o.c. U.O.N.
Insulation: 5 1/2" (B.I.B.S.) insulation (R22)
Interior surface: 1/2" GNB, hand-troweled finish. 5/8" Type X GNB at 1-hr
construction under stairs
Vapor barrier: PVA sealer (1.0 perm rating)
Interior paint: per schedule

Foundation System (typical unless otherwise noted)

2x6 pressure treated sill over sill sealer
8" concrete stemwall
Waterproof membrane on exterior face below grade
8" x 16" concrete footing
Reinforcing and holdowns per details and shear schedule



Section B-B
0 2 4 8'



Front Elevation



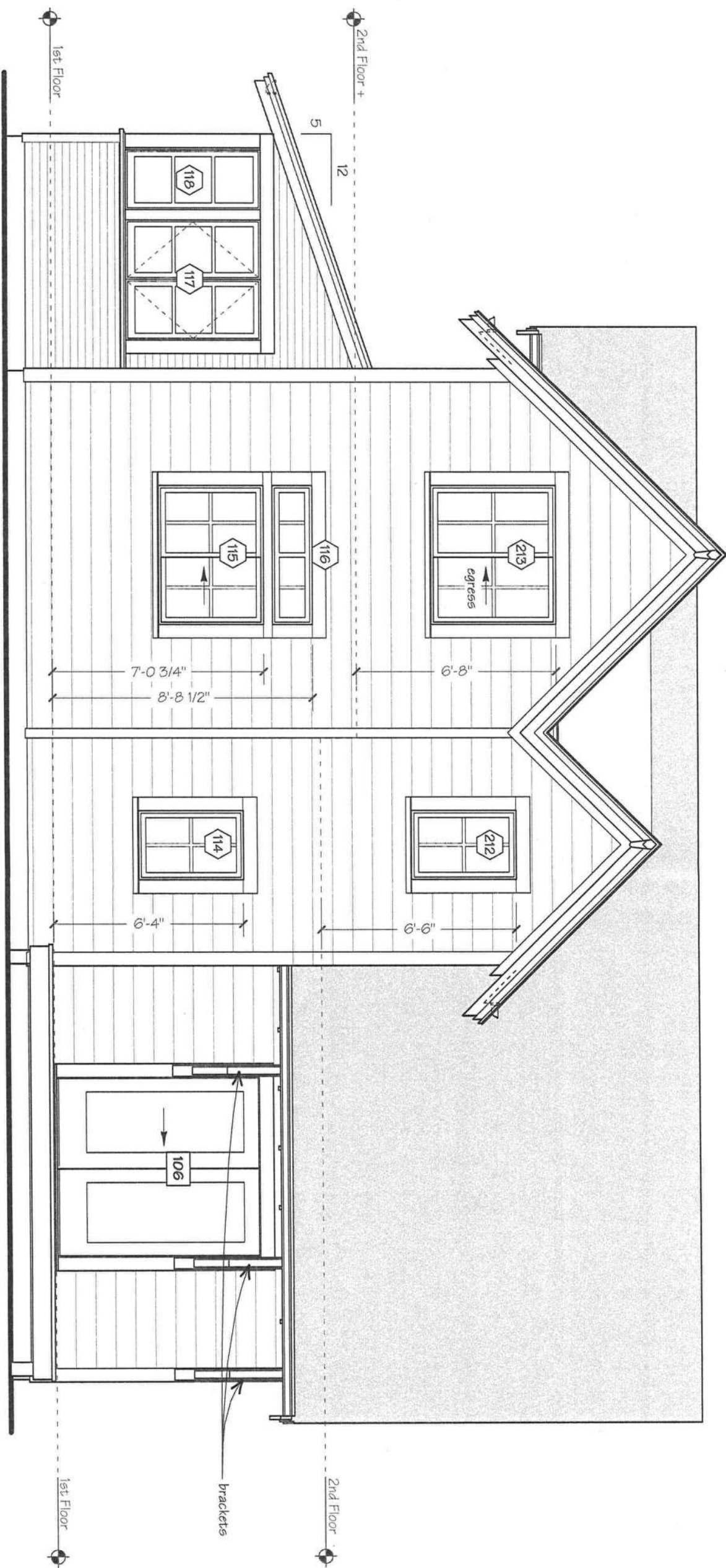
5/5/08

7.1
ELEVATION

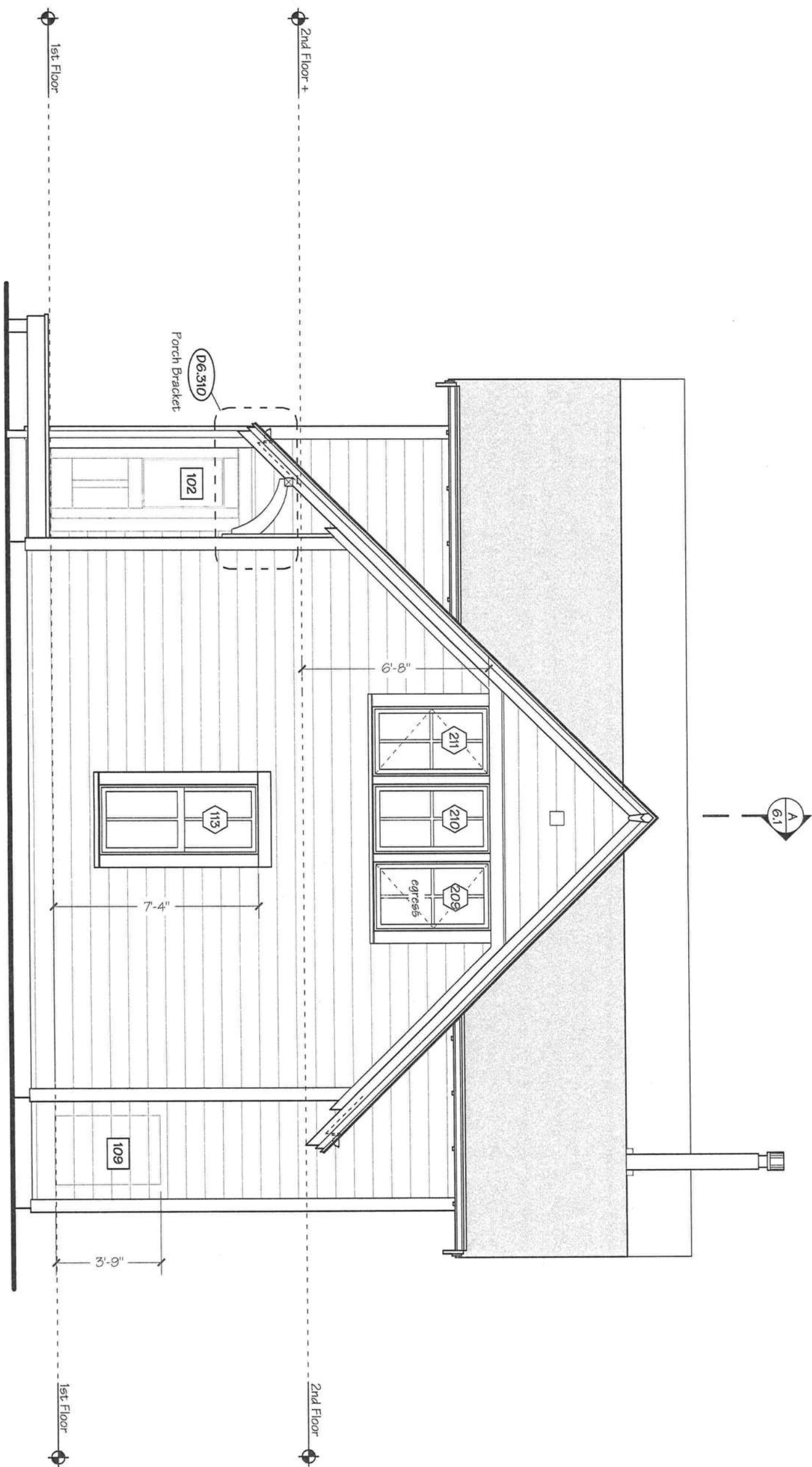
Plumrose

GoodFit
Cottages and Small Houses

PO Box 230 • Langley, Washington 98260 • Em: inquiry@goodfit.net • www.goodfit.net



Right Side Elevation



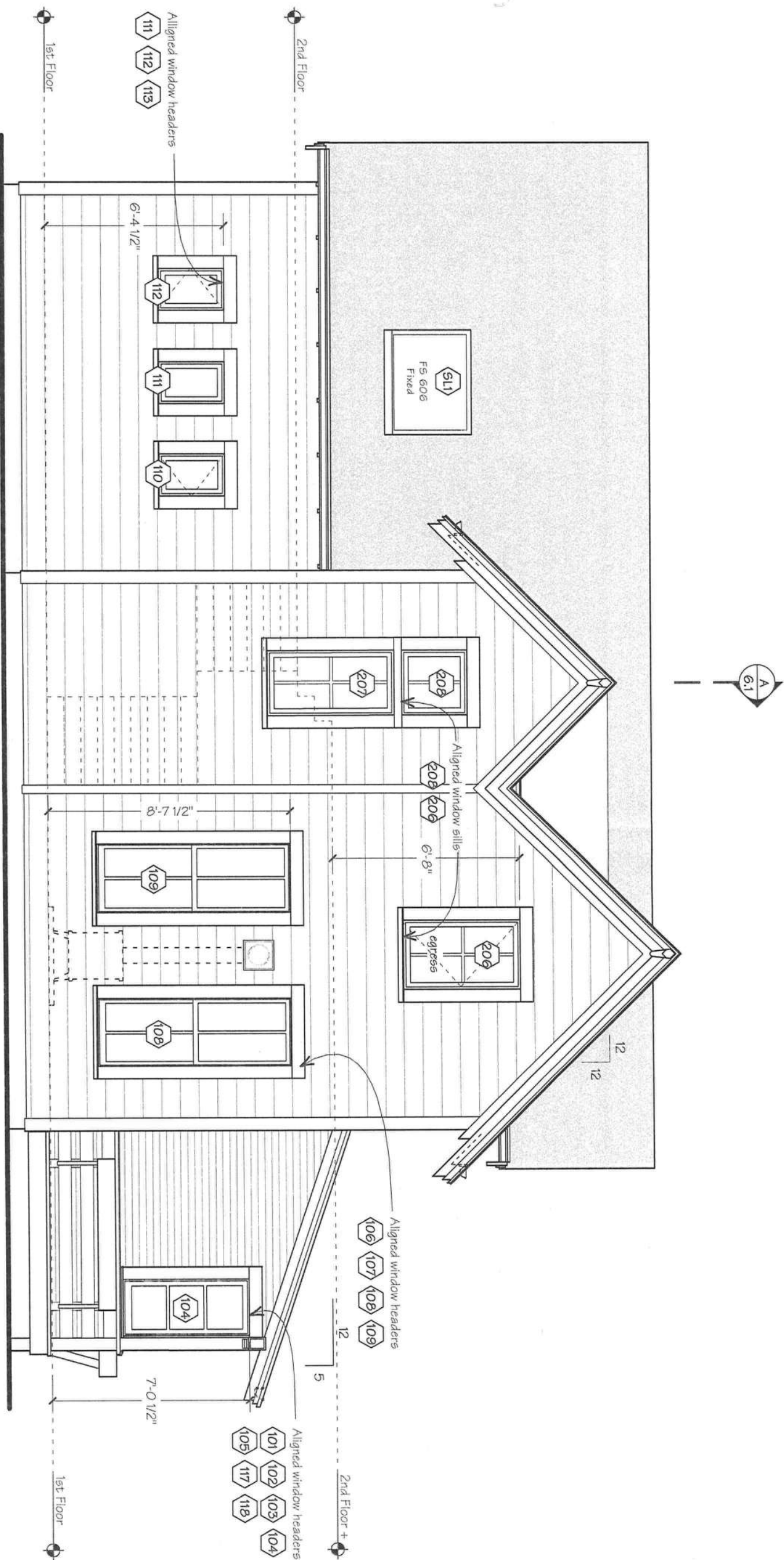
Back Elevation

5/5/08

7.3
ELEVATION




































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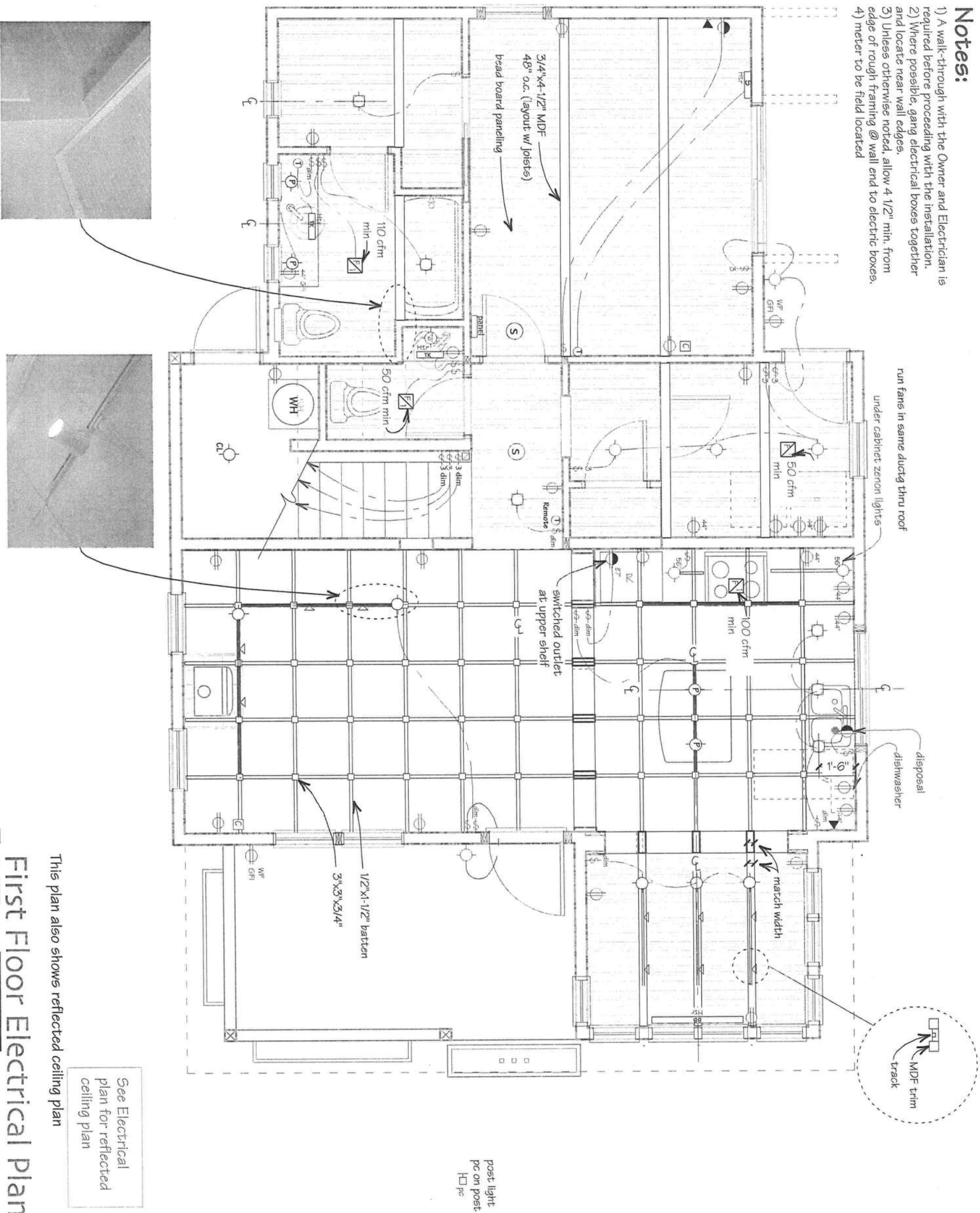


Left Side Elevation

| Type | Description |
|------|-------------|
|------|-------------|

| Type | Description |
|---|---|
|  | 110V Duplex Outlet |
|  | 110V outlet (44" above floor) |
|  | 110V Outlet (Switched) |
|  | 110V Outlet (Water Proof) |
|  | 110V Outlet (Ground Fault Interruptor per NEC) |
|  | 220V Outlet |
|  | Junction Box |
|  | Light (Overhead) |
|  | Light (Pendant) |
|  | Light (Wall Mount) |
|  | 6" Light (Insul Recessed Can) |
|  | Light (Exposed Can) |
|  | Light (Recessed w/ Eyeball) |
|  | 4' (2) Lamp Fluorescent |
|  | 4' (1) Lamp Fluorescent |
|  | 2' (1) Lamp Fluorescent, Pull Chain |
|  | Track Light |
|  | Track Light Head |
|  | Switch (Single Pole) |
|  | Switch (w/ Dimmer) |
|  | Switch (3-way) |
|  | Switch (4-way) |
|  | Switch (programmable timer) |
|  | Smoke Detector |
|  | Television Cable |
|  | Phone Jack |
|  | Phone Jack (dual) |
|  | Thermostat |
|  | Fan 1 |
|  | Fan 2 |
|  | Base Board Elec. Heater (length/feet) |
|  | Wall mtd. Elec. Heater (with fan) |
|  | Service Panel |
|  | Electric Meter |
|  | Photo Cell Switch |

- 1) A walk-through with the Owner and Electrician is required before proceeding with the installation.
- 2) Where possible, gang electrical boxes together and locate near wall edges.
- 3) Unless otherwise noted, allow 4 1/2" min. from edge of rough framing @ wall end to electric boxes.
- 4) meter to be field located

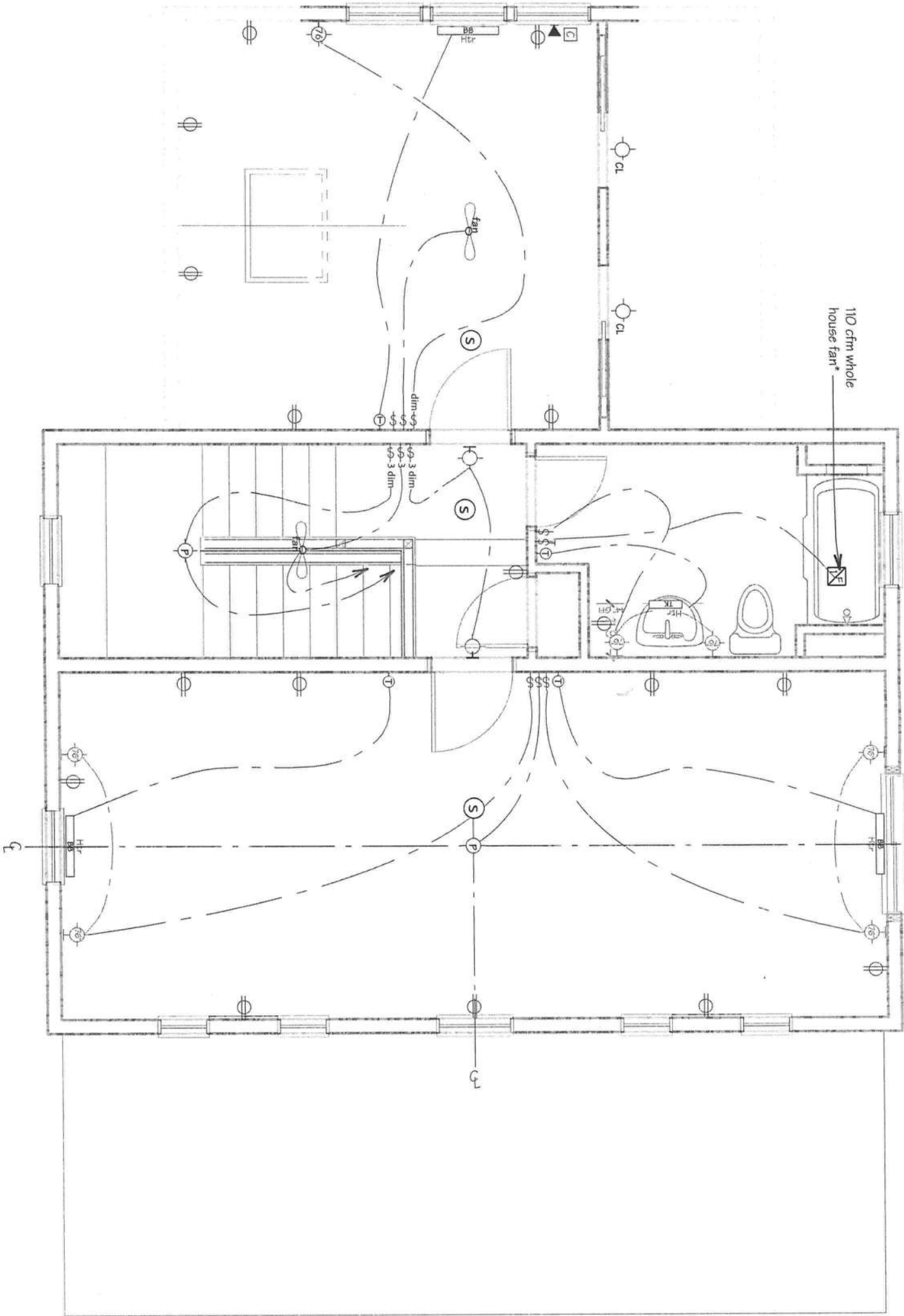


This plan also shows reflected ceiling plan

First Floor Electrical Plan

Electrical Key

| Type | Description |
|------|---|
| | 110V Duplex Outlet |
| | 44" 110V outlet (44" above floor) |
| | 110V Outlet (Switched) |
| | 110V Outlet (Water Proof) |
| | GFI 110V Outlet (Ground Fault Interruptor per NEC) |
| | 220V Outlet |
| | Junction Box |
| | Light (Overhead) |
| | Light (Pendant) |
| | Light (Wall Mount) |
| | 6" Light (Insul Recessed Can) |
| | Light (Exposed Can) |
| | Light (Recessed w/ Eyeball) |
| | 4' (2) Lamp Fluorescent |
| | 4' (1) Lamp Fluorescent |
| | 2' (1) Lamp Fluorescent Pull Chain |
| | Track Light |
| | Track Light Head |
| | Switch (Single Pole) |
| | Switch (w/ Dimmer) |
| | Switch (3-way) |
| | Switch (4-way) |
| | Switch (programmable timer) |
| | Smoke Detector |
| | Television Cable |
| | Phone Jack (dual) |
| | Thermostat |
| | Fan 1 |
| | Fan 2 |
| | Base Board Elec. Heater (length/feet) |
| | Wall mtd. Elec. Heater (with fan) |
| | Service Panel |
| | Electric Meter |
| | meter |
| | Photo Cell Switch |

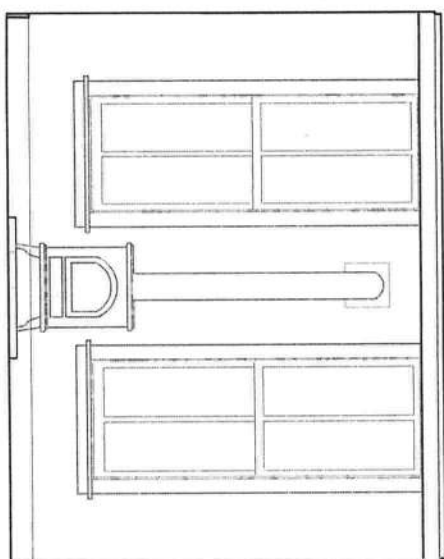
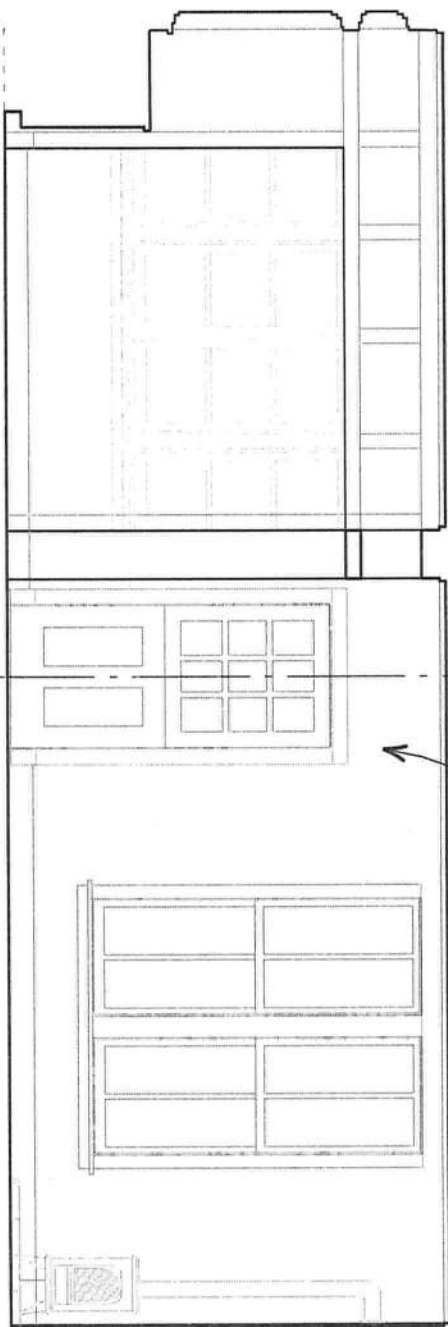


Notes:

- 1) A walk-through with the Architect, Owner and Electrician is required before proceeding with the installation.
- 2) Where possible, gang electrical boxes together and locate near wall edges.
- 3) Unless otherwise noted, allow 4 1/2" min. from edge of rough framing @ wall end to electric boxes.
- 4) meter to be field located

Second Floor Electrical Plan



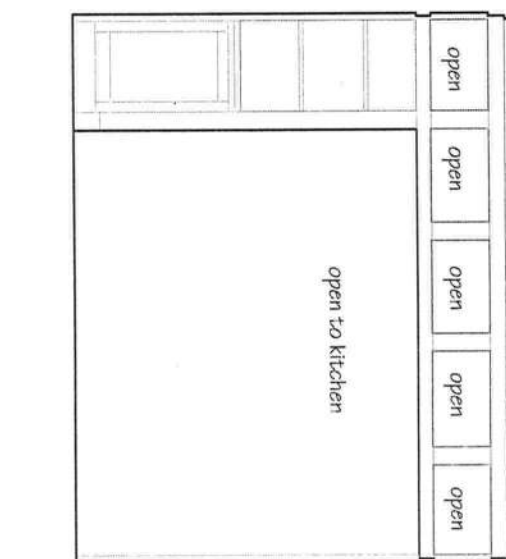
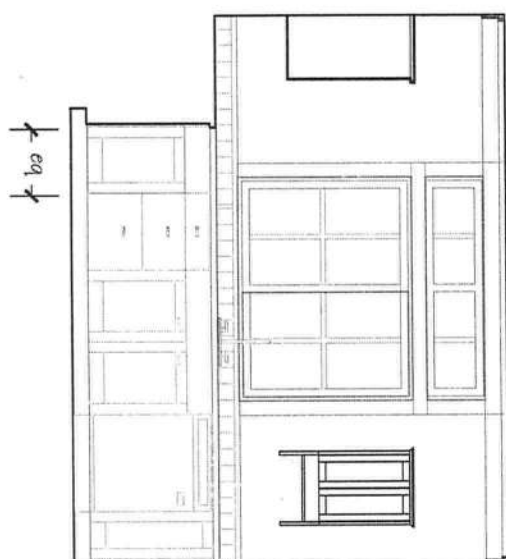
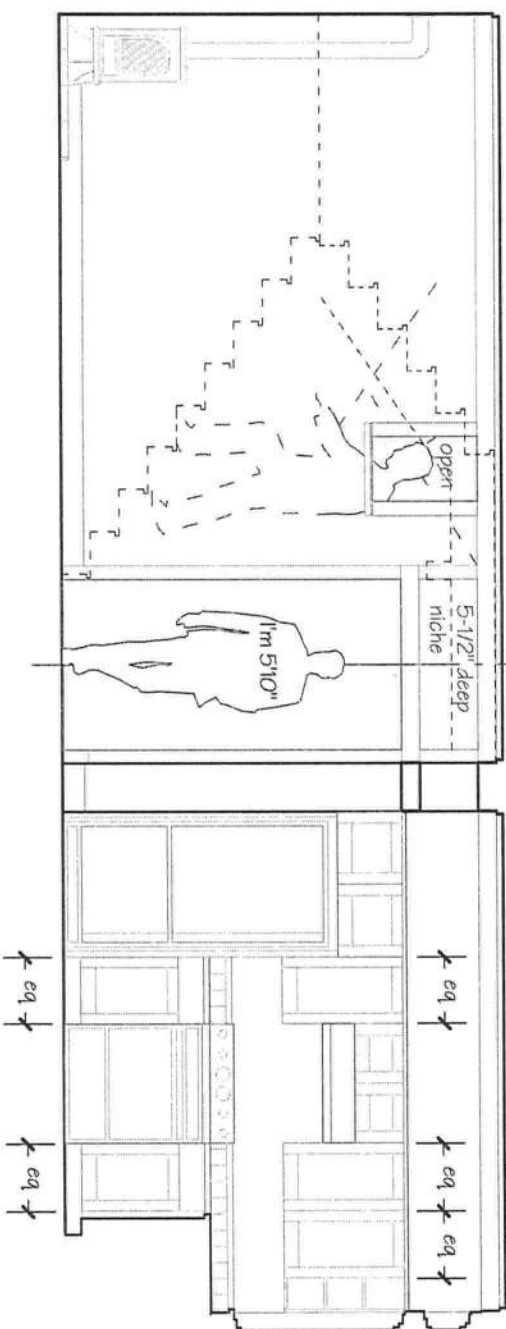


See Electrical plan for reflected ceiling plan

Kitchen

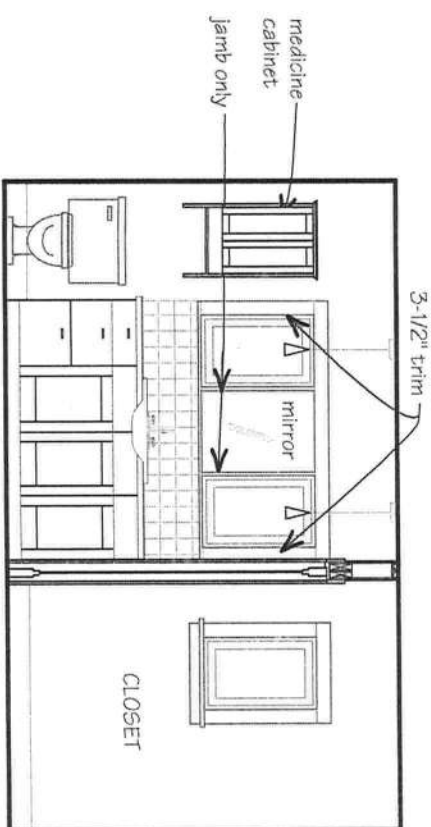


Living Room



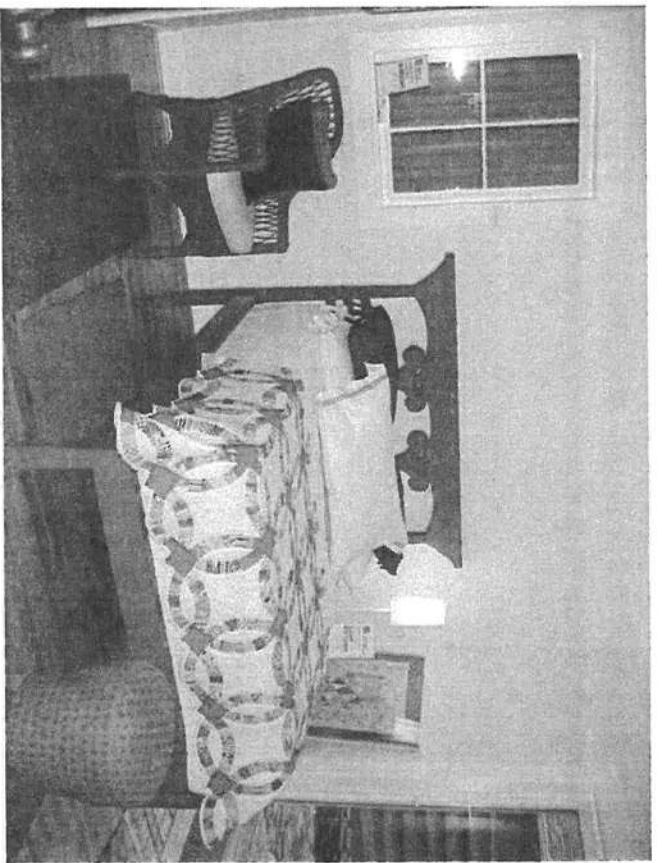
Kitchen

Living Room

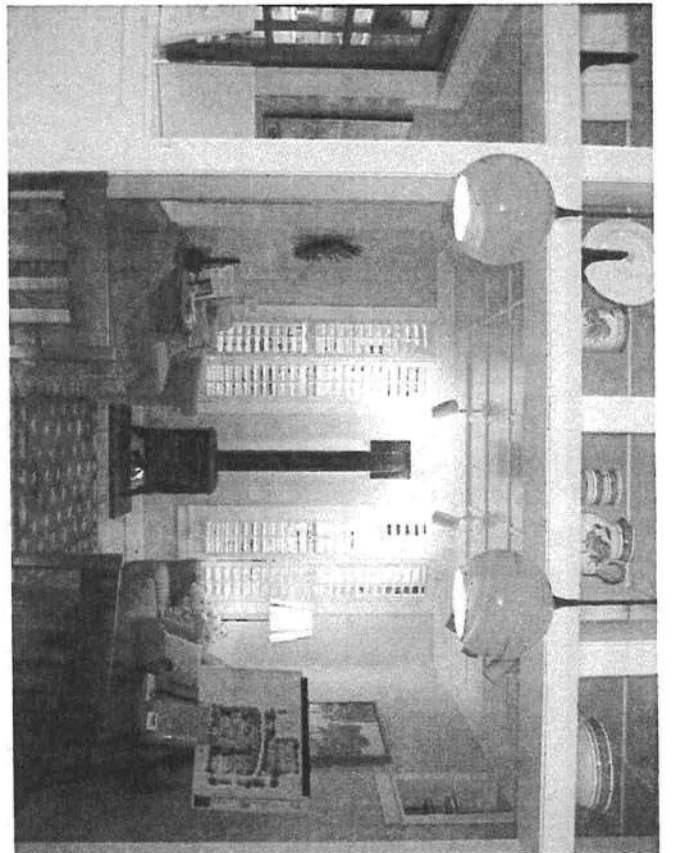


Downstairs Bathroom

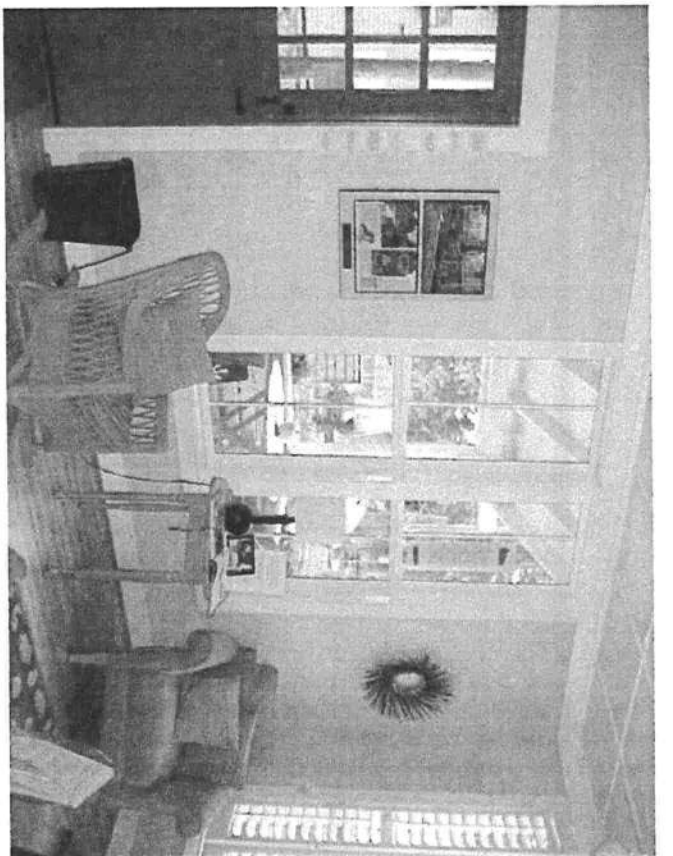




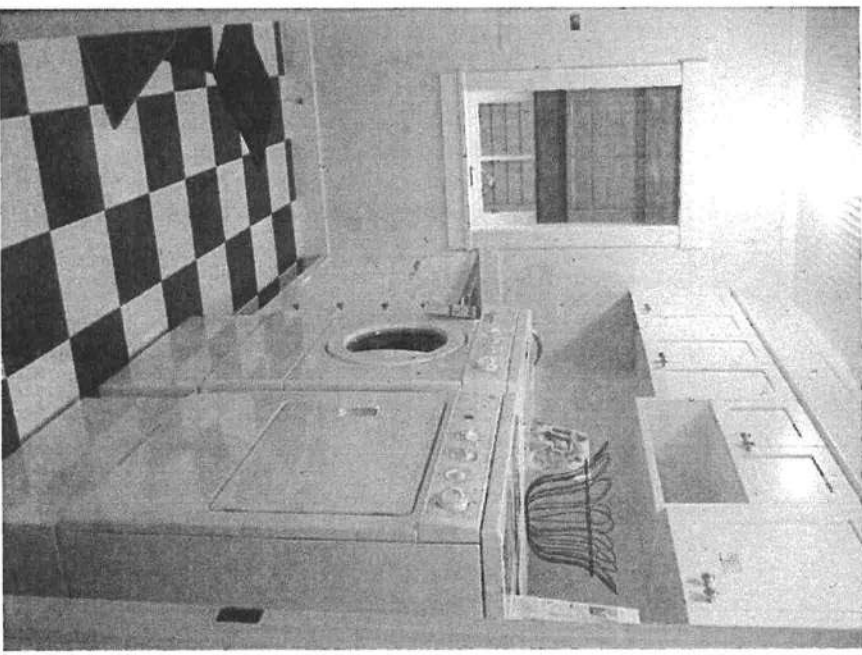
Bedroom 1



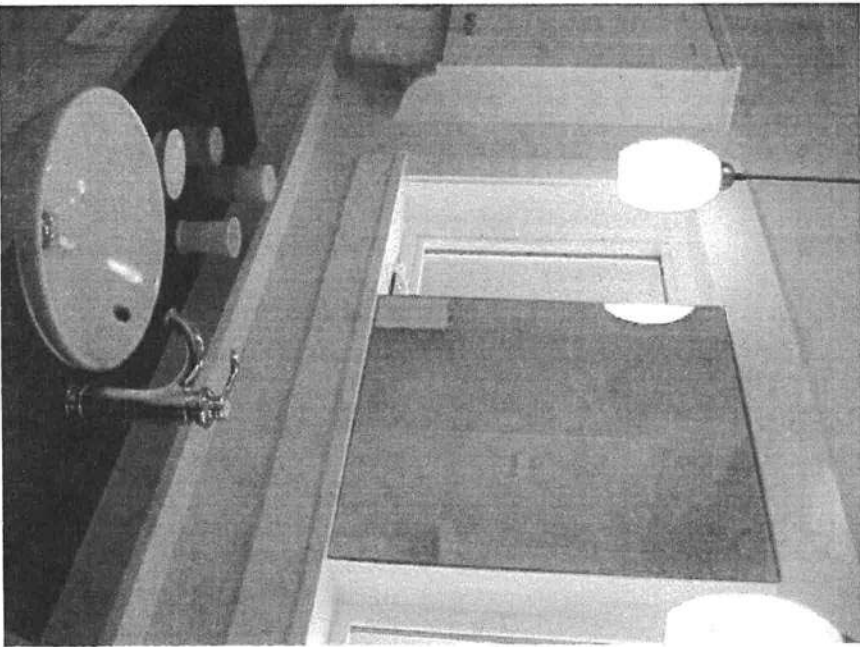
Living Room



Living Room



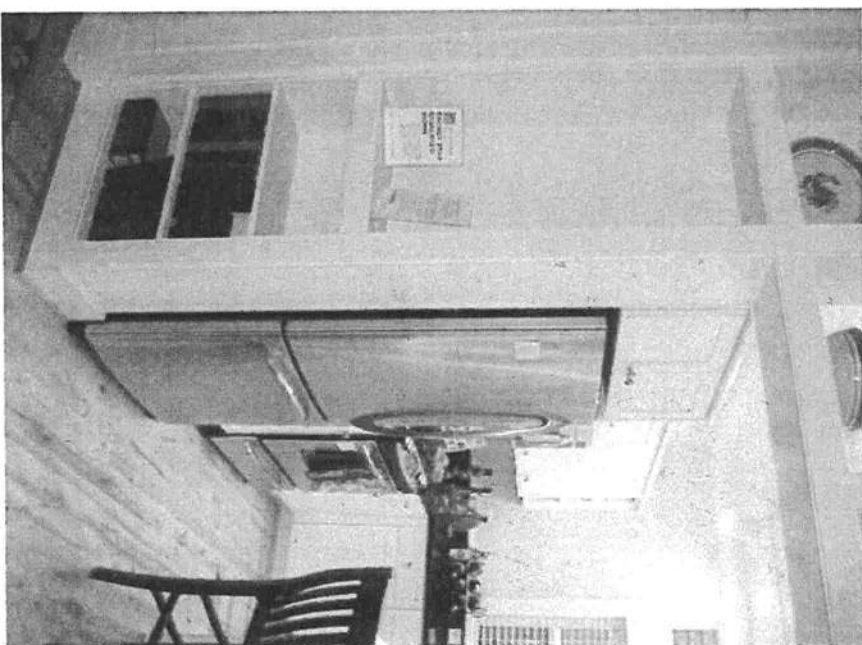
Laundry



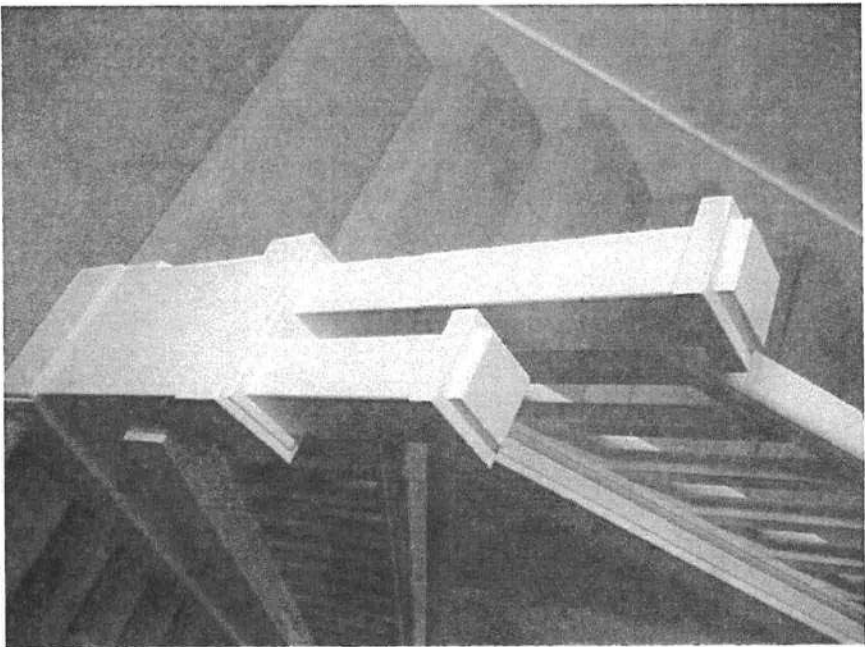
Master Bath



Dining Room



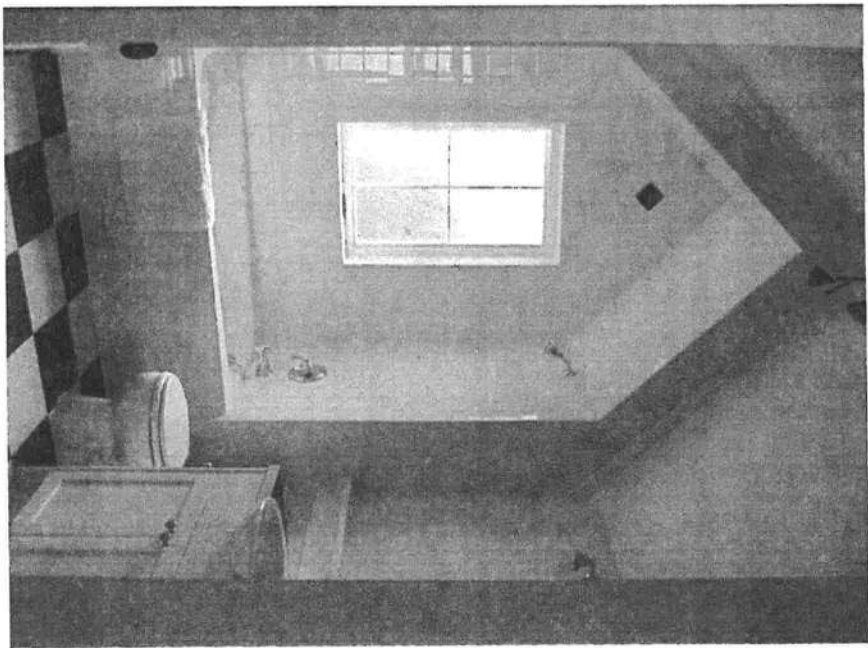
Living Room



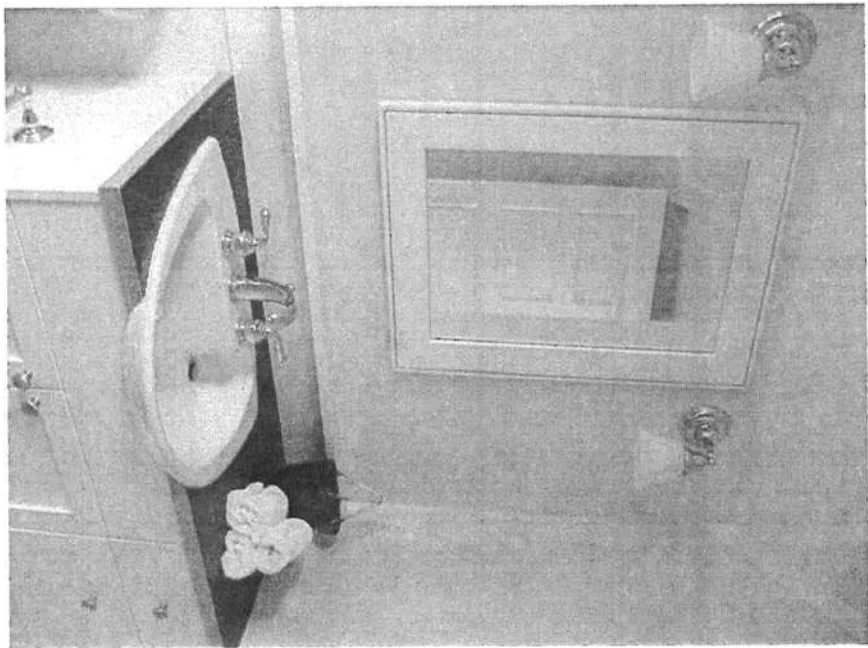
Stair Landing



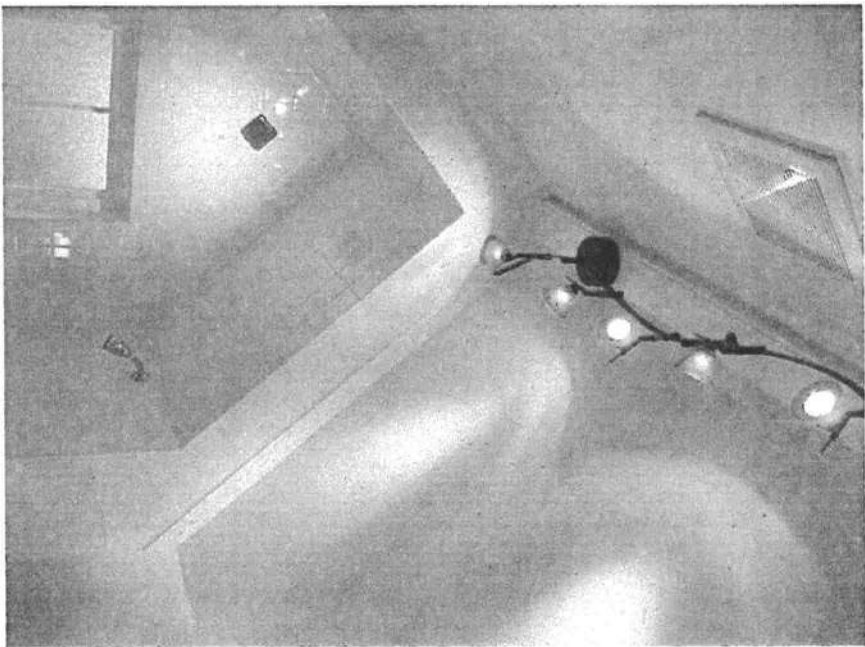
Stair Landing



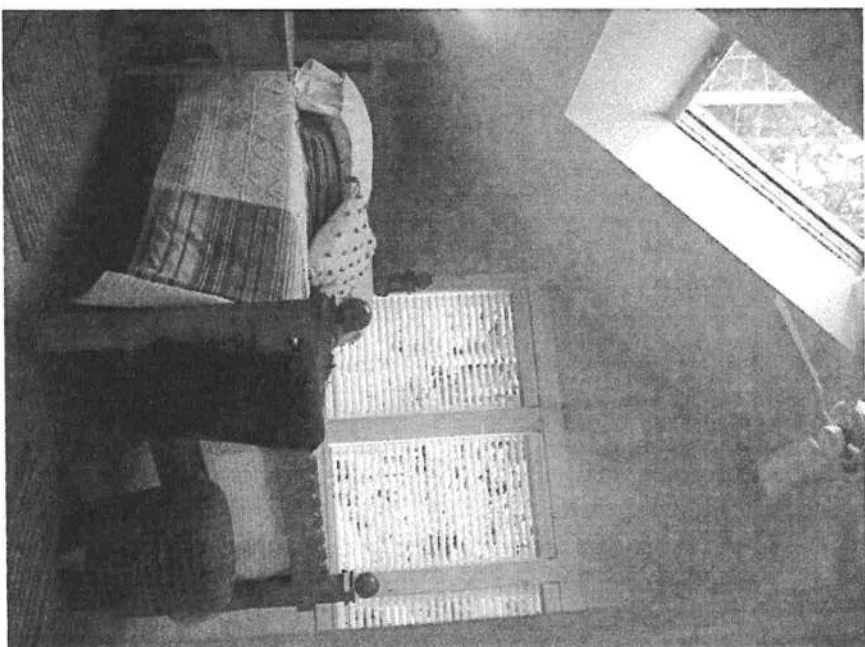
Bath 2



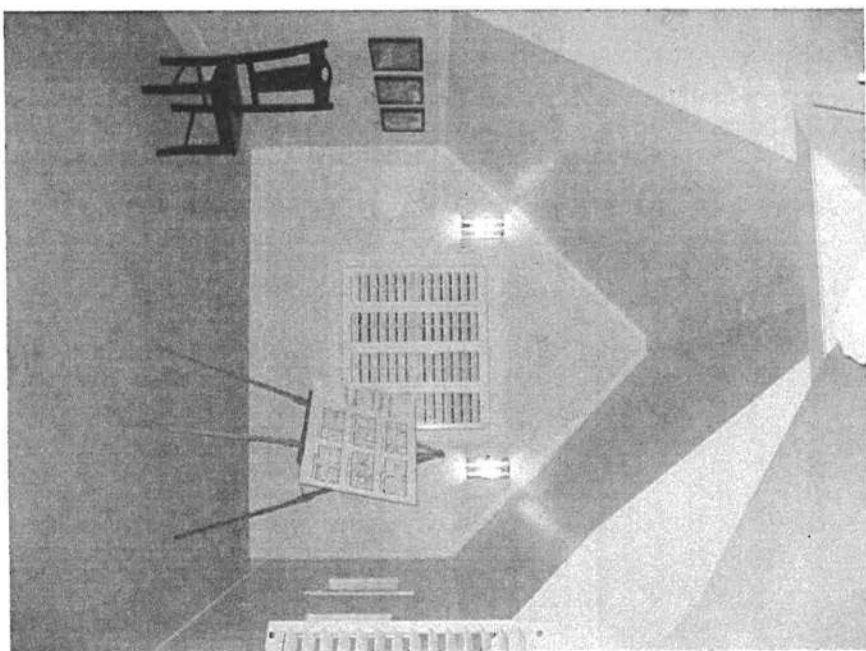
Bath 2



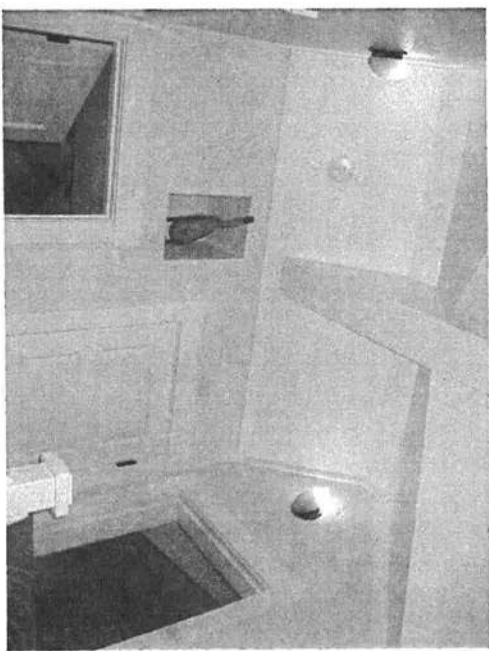
Bath 2



Bedroom 2



Commons



Upper Hall

Window Schedule

| Project: Plumrose | | | | Material: Vinyl | | Window Swing: LDL see elevation | | Lites: LDL see elevation | | | | | |
|-------------------------------------|-----------|-------------------|----------------------------|---------------------|------|---------------------------------|----------|--------------------------|-----------|----|--------|-------------------------|------|
| Manufacturer: Weatherane or similar | | Ext. Color: White | | Mullion Width: 3/4" | | | | | | | | | |
| Model: "Vantage" or similar | | Screens: Yes | | Panels: 2 | | | | | | | | | |
| # | Location | Model | Description | Features | | | RO Width | | RO Height | | Notes | U factor | |
| | | | | Egress | Vent | Tempered | Obscure | ft | in | ft | in | | |
| 101 | Dining | 2046 | Fixed Casement | 3 lite | | | | 2 | 0 | 4 | 6 | 0.32 | |
| 102 | Dining | 4046 | 2 Wide Casement | 2x 3 Lite | | | | 4 | 0 | 4 | 6 | 0.32 | |
| 103 | Dining | 2046 | Fixed Casement | 3 lite | | | | 2 | 0 | 4 | 6 | 0.32 | |
| 104 | Dining | 2046 | Fixed Casement | 3 lite | | | | 2 | 0 | 4 | 6 | 0.32 | |
| 105 | Not Used | | | | | | | | | | | | |
| 106 | Living | 26610 | Single Hung | 4 Lite | | | | 2 | 6 | 6 | 10 | 0.35 | |
| 107 | Living | 26610 | Single Hung | 4 Lite | | | | 2 | 6 | 6 | 10 | 0.35 | |
| 108 | Living | 26610 | Single Hung | 4 Lite | ● | | | 2 | 6 | 6 | 10 | 0.35 | |
| 109 | Living | 26610 | Single Hung | 4 Lite | ● | | | 2 | 6 | 6 | 10 | 0.35 | |
| 110 | Bath 1 | 624 | Casement | 1 Lite | | ● | | 1 | 6 | 2 | 4 | 0.32 | |
| 111 | Bath 1 | 624 | Fixed Casement | 1 Lite | | | | 1 | 6 | 2 | 4 | 0.32 | |
| 112 | Bath 1 | 624 | Casement | 1 Lite | | | | 1 | 6 | 2 | 4 | 0.32 | |
| 113 | Bedroom 1 | 2658 | Single Hung | 4 Lite | ● | | | 2 | 6 | 5 | 8 | 0.35 | |
| 114 | Laundry | 2436 | Casement | 4 Lite | | | | 2 | 4 | 3 | 6 | 0.32 | |
| 115 | Kitchen | 4836 | Slider | 2x 4 Lite | | | | 4 | 8 | 3 | 6 | 0.35 | |
| 116 | Kitchen | 4813 | Fixed (match slider below) | 4 lite | | | | 4 | 8 | 1 | 3 | 0.35 | |
| 117 | Dining | 4046 | 2 Wide Casement | 2x 3 Lite | | | | 4 | 0 | 4 | 6 | 0.32 | |
| 118 | Dining | 2046 | Fixed Casement | 3 lite | ● | | | 2 | 0 | 4 | 6 | 0.32 | |
| | | | | | | | | | | | | | |
| 201 | Commons | 619 | Fixed Casement | 1 Lite | | | | 1 | 6 | 1 | 9 | 0.32 | |
| 202 | Commons | 619 | Fixed Casement | 1 Lite | | | | 1 | 6 | 1 | 9 | 0.32 | |
| 203 | Commons | 2642 | Casement | 4 Lite | ● | | | 2 | 6 | 4 | 2 | see note 6 | |
| 204 | Commons | 619 | Fixed Casement | 1 Lite | | | | 1 | 6 | 1 | 9 | 0.32 | |
| 205 | Commons | 619 | Fixed Casement | 1 Lite | | | | 1 | 6 | 1 | 9 | 0.32 | |
| 206 | Commons | 2642 | Casement | 4 Lite | ● | | | 2 | 6 | 4 | 2 | see note 6 | |
| 207 | Stair | 2446 | Casement | 4 Lite | | ● | | 2 | 4 | 4 | 6 | 0.32 | |
| 208 | Stair | 2424 | Fixed Casement | 2 Lite | | | | 2 | 4 | 2 | 4 | 0.32 | |
| 209 | Bedroom 2 | 2642 | Casement | 4 Lite | ● | | | 2 | 6 | 4 | 2 | see note 6 | |
| 210 | Bedroom 2 | 2642 | Fixed Casement | 4 Lite | | | | 2 | 6 | 4 | 2 | 0.32 | |
| 211 | Bedroom 2 | 2642 | Casement | 4 Lite | ● | | | 2 | 6 | 4 | 2 | see note 6 | |
| 212 | Bath 2 | 2436 | Casement | 4 Lite | | | ● | 2 | 4 | 3 | 6 | 0.32 | |
| 213 | Commons | 4842 | Slider | 2x 4 Lite | ● | ● | | 4 | 8 | 4 | 2 | see note 6 | |
| 511 | Bedroom 3 | Velux 606 | Skylight | 1 Lite | | | | 3 | 8 3/4 | 3 | 10 7/8 | verify venting or fixed | 0.35 |

Door Schedule

| Project: Plumrose | | | Material: Wood | | | | |
|-------------------|------------------|---|-----------------|-----------------|------------------|-------|------------------------|
| Manufacturer: TBD | | | Ext. Color: TBD | | | | |
| Door # | Location | Type | Thickness in | Width ft. in | Height ft. in | Notes | U Factor |
| 101 | Entry | Ext. Dutch w/9 lite above-see architect | 1 3/4 | 3 | 0 | 6 8 | Exempt |
| 102 | Laundry | Ext. Insulated Door | 1 3/4 | 2 | 6 | 6 8 | 0.35 |
| 103 | Laundry | 5 panel | 1 3/8 | 2 | 6 | 6 8 | N/A |
| 104 | WC | 5 panel | 1 3/8 | 2 | 0 | 6 8 | N/A |
| 105 | Bedroom 1 | 5 panel | 1 3/8 | 2 | 6 | 6 8 | N/A |
| 106 | Bedroom 1 | Ext. full-lite slider | 1 3/4 | 6 | 0 | 6 8 | tempered glass 0.35 |
| 107 | Closet | 5 panel, pocket | 1 3/8 | 2 | 6 | 6 8 | N/A |
| 108 | Bath 1 | 5 panel | 1 3/8 | 2 | 4 | 6 8 | N/A |
| 109 | Mech | Ext. Insulated Panel w/ sliding | 1 3/4 | 2 | 6 | 3 9 | N/A |
| 110 | W.C. | 5 panel | 1 3/8 | 2 | 2 | 6 8 | N/A |
| 201 | Bedroom 2 | 5 panel | 1 3/8 | 2 | 6 | 6 8 | N/A |
| 202 | Bedroom 2/Closet | 5 panel, pocket | 1 3/8 | 2 | 6 | 6 8 | N/A |
| 203 | Bedroom 2/Closet | 5 panel, pocket | 1 3/8 | 2 | 6 | 6 8 | N/A |
| 204 | Bath 2 | 5 panel | 1 3/8 | 2 | 4 | 6 8 | N/A |
| 205 | Closet | 5 panel | 1 3/8 | 2 | 4 | 6 8 | N/A |
| 206 | Commons | 5 panel | 1 3/8 | 2 | 6 | 6 8 | N/A |

Window Notes:

- 1) Refer to plans for orientation of casement swing.
- 2) Refer to manufacturer's specifications for precise dimensions of rough openings and installation instructions.
- 3) Refer to Elevation Sheets for header heights.
- 4) Verify glazing is min. 60" above bathroom/tub floor
- 5) Provide whole-house ventilation intake vents in window frames where required by the municipality having jurisdiction.
- 6) Verify with manuf. that window meets egress requirements.

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