

DATE 03/06/2012

Columbia County Building Permit  
This Permit Must Be Prominently Posted on Premises During Construction

PERMIT  
000029982

APPLICANT RONNIE NORRIS PHONE 623-7716  
ADDRESS 1004 SW CHARLES TERR LAKE CITY FL 32024  
OWNER CHRISTOPHER MCCURRY PHONE 727-458-7998  
ADDRESS 999 SW WASHINGTON AVE FORT WHITE FL 32038  
CONTRACTOR RONNIE NORRIS PHONE 752-3871  
LOCATION OF PROPERTY 47 S, R 27, L RIVERSIDE, L UTAH, R WASHINGTON, 300' PAST  
MONTANA ON THE LEFT  
TYPE DEVELOPMENT MH, UTILITY ESTIMATED COST OF CONSTRUCTION 0.00  
HEATED FLOOR AREA                      TOTAL AREA                      HEIGHT                      STORIES                       
FOUNDATION                      WALLS                      ROOF PITCH                      FLOOR                       
LAND USE & ZONING ESA-2 MAX. HEIGHT 35  
Minimum Set Back Requirments: STREET-FRONT 30.00 REAR 25.00 SIDE 25.00  
NO. EX.D.U. 0 FLOOD ZONE AE DEVELOPMENT PERMIT NO. 12-001

PARCEL ID 26-6S-15-00791-000 SUBDIVISION THREE RIVERS ESTATES  
LOT 63 BLOCK                      PHASE                      UNIT 10 TOTAL ACRES 0.90

IH10251451  
Culvert Permit No.                      Culvert Waiver                      Contractor's License Number                      Applicant/Owner/Contractor                       
EXISTING 10-0454 BK TC N  
Driveway Connection                      Septic Tank Number                      LU & Zoning checked by                      Approved for Issuance                      New Resident                     

COMMENTS: FINISHED FLOOR & EQUIPMENT SERVICING HOME TO BE @ 34', ELEVATION

CERTIFICATE REQUIRED BEFORE PERMANANT POWER, ONE FT RISE ON FILE

HOME MEETS MINIMUM SQ FT REG'S. Check # or Cash 1110

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 \$ 0.00 CERTIFICATION FEE \$ 0.00 SURCHARGE FEE \$ 0.00  
MISC. FEES \$ 250.00 ZONING CERT. FEE \$ 50.00 FIRE FEE \$ 44.94 WASTE FEE \$ 117.25  
FLOOD DEVELOPMENT FEE \$ 50.00 FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$                      TOTAL FEE 537.19  
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.

DATE03/06/2012

Columbia County Building Permit

PERMIT

This Permit Must Be Prominently Posted on Premises During Construction

000029982

APPLICANTRONNIE NORRIS

PHONE623-7716

ADDRESS1004SW CHARLES TERR

LAKE CITYFL32024

OWNERCHRISTOPHER MCCURRY

PHONE727-458-7998

ADDRESS999SW WASHINGTON AVE

FORT WHITEFL32038

CONTRACTORRONNIE NORRIS

PHONE752-3871

LOCATION OF PROPERTY

47 S, R 27, L RIVERSIDE, L UTAH, R WASHINGTON, 300' PAST

MONTANA ON THE LEFT

TYPE DEVELOPMENTMH, UTILITY

ESTIMATED COST OF CONSTRUCTION0.00

HEATED FLOOR AREA0.00

TOTAL AREA0.00

HEIGHT0.00

STORIES0

FOUNDATION

WALLS

ROOF PITCH

FLOOR

LAND USE & ZONINGESA-2

MAX. HEIGHT35

Minimum Set Back Requirments:

STREET-FRONT30.00

REAR25.00

SIDE25.00

NO. EX.D.U.0

FLOOD ZONEAE

DEVELOPMENT PERMIT NO.12-001

PARCEL ID26-6S-15-00791-000

SUBDIVISIONTHREE RIVERS ESTATES

LOT63

BLOCK

PHASE

UNIT10

TOTAL ACRES0.90

IH10251451

Culvert Permit No.

Culvert Waiver

Contractor's License Number

Applicant/Owner/Contractor

EXISTING

10-0454

BK

TC

N

Driveway Connection

Septic Tank Number

LU & Zoning checked by

Approved for Issuance

New Resident

COMMENTS:

FINISHED FLOOR & EQUIPMENT SERVICING HOME TO BE @ 34', ELEVATION

CERTIFICATE REQUIRED BEFORE PERMANANT POWER, ONE FT RISE ON FILE

HOME MEETS MINIMUM SQ FT REG'S. ELE. CERT. REC'D @ 34.10/EQUIP.34.10

Check # or Cash1110

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

03/15/2012

TC

date/app. by

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 \$0.00

CERTIFICATION FEE \$0.00

SURCHARGE FEE \$0.00

MISC. FEES \$250.00

ZONING CERT. FEE \$50.00

FIRE FEE \$44.94

WASTE FEE \$117.25

FLOOD DEVELOPMENT FEE \$50.00

FLOOD ZONE FEE \$25.00

CULVERT FEE \$

TOTAL FEE537.19

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.  
NOTICE: ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THIS PERMITTED DEVELOPMENT.

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2-23-12  
\* 25 Per Ronnie: PLEASE Call Him: NOT WENDY GREENWELL

PERMIT APPLICATION / MANUFACTURED HOME INSTALLATION APPLICATION

**For Office Use Only** (Revised 1-11) Zoning Official BLK 27 FEB 2012 Building Official J.C. 2-24-12  
AP# 1002-48 Date Received 4/22 By 100 Permit # 29982  
Flood Zone AE Development Permit YES Zoning ESA-2 Land Use Plan Map Category ESA  
Comments Bottom of Finished Floor Equipment servicing structure to be at 34'  
Elevation Certificate Required before Permanent Power Released needs minimum Sq. ft  
FEMA Map# 0458C Elevation 33' Finished Floor 34' River Santa Fe In Floodway NO  
☐ Site Plan with Setbacks Shown ☒ EH # 10-0454 ☐ EH Release ☒ Well letter ☒ Existing well  
☒ Recorded Deed or Affidavit from land owner ☐ Installer Authorization ☐ State Road Access ☒ 911 Sheet  
☐ Parent Parcel # \_\_\_\_\_ ☐ STUP-MH \_\_\_\_\_ ☐ F W Comp. letter ☒ V Form  
IMPACT FEES: EMS \_\_\_\_\_ Fire \_\_\_\_\_ Corr \_\_\_\_\_ ☐ Out County ☐ In County  
Road/Code \_\_\_\_\_ School \_\_\_\_\_ = TOTAL Impact Fees Suspended March 2009

DP# 12-001  
Property ID # 00-00-00-00791-000 Subdivision Three Rivers Estates Unit 10 Lot 63

- New Mobile Home ☒ Used Mobile Home \_\_\_\_\_ MH Size 12x42 Year 2012
- Applicant RONNIE NORRIS Phone # 386-623-776
- Address 1004 SW CHARLES TERRACE, L.C. FL 32024
- Name of Property Owner Christopher McCurry Phone # 727-458-7998
- 911 Address 999 SW Washington Ave Ft White FL 32058
- Circle the correct power company - FL Power & Light - Clay Electric  
(Circle One) - Suwannee Valley Electric - Progress Energy
- Name of Owner of Mobile Home Christopher McCurry Phone # 727-458-7998  
Address 1139 Venetian Harbor Dr NE St. Petersburg FL 33702
- Relationship to Property Owner same
- Current Number of Dwellings on Property 0
- Lot Size 100' x 400' Total Acreage 0.90
- Do you : Have Existing Drive or Private Drive or need Culvert Permit or Culvert Waiver (Circle one)  
(Currently using) (Blue Road Sign) (Putting in a Culvert) (Not existing but do not need a Culvert)
- Is this Mobile Home Replacing an Existing Mobile Home No
- Driving Directions to the Property US Hwy 27 to Riverside turn  
(L) to Utah turn (L) to Washington turn (R)  
300' past Montana on (L)
- Name of Licensed Dealer/Installer Ronnie Norris Phone # 752-3871
- Installers Address 1004 SW Charles Terrace LC FL 32024
- License Number IH1025145/1 Installation Decal # 8879

JW. left with MS9 3.6.12 = JW left MS9. 3.2.12 -  
for owner JW left MS9 for Chris as well for status 3.2.12  
\$537.19



# COLUMBIA COUNTY PERMIT WORKSHEET

page 1 of 2

These worksheets must be completed and signed by the installer.  
Submit the originals with the packet.

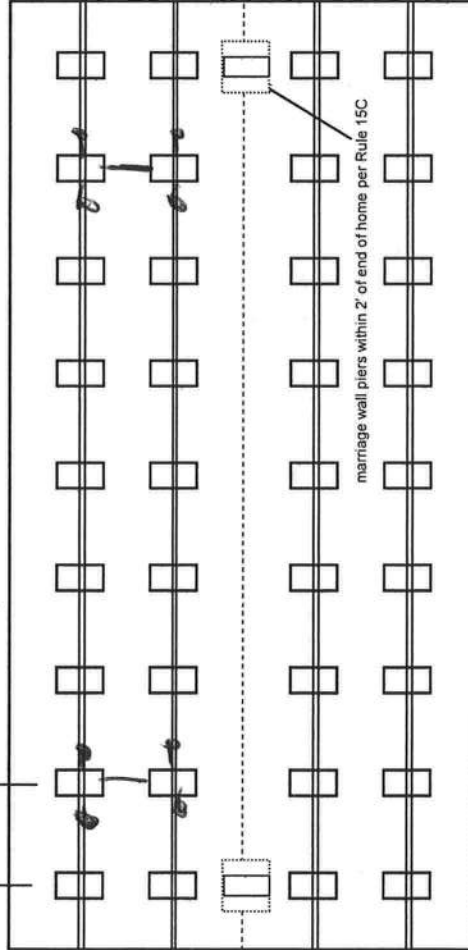
Installer Ronnie Norris License # IT1025145/1  
911 Address where home is being installed 999 SW Washington Ave  
FT. WHITE, FL, 32038  
Manufacturer Champion Length x width 41'9" - 11'8"

NOTE: if home is a single wide fill out one half of the blocking plan  
if home is a triple or quad wide sketch in remainder of home

I understand Lateral Arm Systems cannot be used on any home (new or used) where the sidewall ties exceed 5 ft 4 in.

Installer's initials RN

\* Please refer to attached drawing  
Show locations of Longitudinal and Lateral Systems (use dark lines to show these locations)



New Home ☒ Used Home ☐  
Home installed to the Manufacturer's Installation Manual ☐  
Home is installed in accordance with Rule 15-C ☐  
Single wide ☒ Wind Zone II ☒ Wind Zone III ☐  
Double wide ☐ Installation Decal # 8879  
Triple/Quad ☐ Serial # Ordered

## PIER SPACING TABLE FOR USED HOMES

| Load bearing capacity | Footer size (sq in) | 16" x 16" (256) | 18 1/2" x 18 1/2" (342) | 20" x 20" (400) | 22" x 22" (484)* | 24" x 24" (576)* | 26" x 26" (676) |
|-----------------------|---------------------|-----------------|-------------------------|-----------------|------------------|------------------|-----------------|
| 1000 psf              | 3'                  | 4'              | 5'                      | 6'              | 7'               | 8'               | 8'              |
| 1500 psf              | 4' 6"               | 6'              | 7'                      | 8'              | 9'               | 10'              | 11'             |
| 2000 psf              | 6'                  | 8'              | 9'                      | 10'             | 11'              | 12'              | 13'             |
| 2500 psf              | 7' 6"               | 9'              | 10'                     | 11'             | 12'              | 13'              | 14'             |
| 3000 psf              | 8'                  | 10'             | 11'                     | 12'             | 13'              | 14'              | 15'             |
| 3500 psf              | 8'                  | 10'             | 11'                     | 12'             | 13'              | 14'              | 15'             |

\* interpolated from Rule 15C-1 pier spacing table.

## PIER PAD SIZES

I-beam pier pad size 17x25

Perimeter pier pad size 16x16

Other pier pad sizes (required by the mfg.)

Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

| Opening   | Pier pad size |
|-----------|---------------|
| <u>50</u> | <u>50</u>     |
| <u>50</u> | <u>50</u>     |
| <u>50</u> | <u>50</u>     |

## TIEDOWN COMPONENTS

Longitudinal Stabilizing Device (LSD)  
Manufacturer Longitudinal Stabilizing Device w/ Lateral Arms  
Manufacturer

## OTHER TIES

Sidewall 22  
Longitudinal 4  
Marriage wall  
Shearwall

## ANCHORS

4 ft 5 ft

## FRAME TIES

within 2' of end of home spaced at 5' 4" oc

## COLUMBIA COUNTY PERMIT WORKSHEET

page 2 of 2

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to 60 psf or check here to declare 1000 lb. soil without testing.

x 60 x 60 x 60

## POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

x 60 x 60 x 60

## TORQUE PROBE TEST

The results of the torque probe test is 285 inch pounds or check here if you are declaring 5' anchors without testing 4 ft. A test showing 275 inch pounds or less will require 5 foot anchors.

**Note:** A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may require anchors with 4000 lb holding capacity.

Installer's initials

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name

Date Tested

## Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. \_\_\_\_\_

## Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. \_\_\_\_\_

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. \_\_\_\_\_

## Site Preparation

Debris and organic material removed ✓  
Water drainage: Natural ✓ Swale ✓ Pad ✓ Other ✓

## Fastening multi wide units

Floor: Type Fastener: SW Length: SW Spacing: SW  
Walls: Type Fastener: SW Length: SW Spacing: SW  
Roof: Type Fastener: SW Length: SW Spacing: SW  
For used homes a min. 30 gauge, 8" wide, galvanized metal strip will be centered over the peak of the roof and fastened with galv. roofing nails at 2" on center on both sides of the centerline.

## Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used homes and that condensation, mold, mildew and buckled marriage walls are a result of a poorly installed or no gasket being installed. I understand a strip of tape will not serve as a gasket.

Type gasket SW Installer's initials SW  
Pg. \_\_\_\_\_ Installed:  
Between Floors Yes SW  
Between Walls Yes SW  
Bottom of ridgebeam Yes SW

## Weatherproofing

The bottomboard will be repaired and/or taped. Yes \_\_\_\_\_ Pg. \_\_\_\_\_  
Siding on units is installed to manufacturer's specifications. Yes \_\_\_\_\_  
Fireplace chimney installed so as not to allow intrusion of rain water. Yes \_\_\_\_\_

## Miscellaneous

Skirting to be installed. Yes \_\_\_\_\_ No \_\_\_\_\_  
Dryer vent installed outside of skirting. Yes \_\_\_\_\_ N/A \_\_\_\_\_  
Range downflow vent installed outside of skirting. Yes \_\_\_\_\_ N/A \_\_\_\_\_  
Drain lines supported at 4 foot intervals. Yes \_\_\_\_\_  
Electrical crossovers protected. Yes \_\_\_\_\_  
Other: \_\_\_\_\_

Installer verifies all information given with this permit worksheet is accurate and true based on the

Installer Signature

Date

2-3-02

## This Warranty Deed

Made this 23rd day of June, 2009 by  
**WANDA E. WOLFE, A SINGLE WOMAN**

hereinafter called the grantor, to  
**CHRISTOPHER L. MCCURRY AND TRACY L.  
MCCURRY, HUSBAND AND WIFE**

whose post office address is:  
**1139 VENETIAN HARBOUR DRIVE NE  
ST PETERSBURG, FL 33702**

Inst: 200912011123 Date: 7/6/2009 Time: 11:35 AM  
Doc Stamp-Deed, 84.00  
DC, P. DeWitt Cason, Columbia County Page 1 of 1 B 1176 P: 1356

hereinafter called the grantee:

(Whenever used herein the term "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 corporations)

**Witnesseth**, that the grantor, for and in consideration of the sum of **\$10.00** and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in **COLUMBIA** County, Florida, viz:

Lot 165, Section 16, more particularly known as Lot 63, THREE RIVERS ESTATES UNIT NO. 10, said Unit 10 better described as follows: Commence at the Southeast Corner of Section 26, Township 6 South, Range 15 East, Columbia County, Florida, and run N 63 degrees 50' W Lambert Grid Bearing 1798.81 feet for a Point of Beginning; thence N 26 degrees 02' W 399.09 feet; thence N 10 degrees 10' W 540.4 feet; thence N 31 degrees 21' W 603.8 feet; thence N 82 degrees 46' W 962.2 feet; thence S 71 degrees 51' W 623.7 feet; thence N 25 degrees 34' W 612.9 feet; thence N 46 degrees 05' W 796.6 feet; thence N 35 degrees 54' E 587.96 feet; thence S 54 degrees 06' E 66.0 feet; thence N 34 degrees 05' E 918.32 feet; thence N 19 degrees 56' E 1200.29 feet; thence S 70 degrees 04' E 380.25 feet; thence S 28 degrees 01' E 1762.07 feet; thence N 61 degrees 59' E 466.00 feet; thence S 28 degrees 01' E 3149.14 feet; thence S 50 degrees 53' W 105.66 feet; thence S 84 degrees 35' W 574.69 feet; thence S 66 degrees 17' W 874.40 feet to the Point of Beginning, being part of Sections 25 and 26, Township 6 South, Range 15 East, according to unrecorded Plat of said Unit #10, which Plat is attached to and made part of Deed from 3 Rivers Estates, Inc. to Charles F. Byrd, dated April 10, 1967, recorded April 14, 1967 in Official Record Book 220, Pages 484-486, public records of Columbia County, Florida.

Subject to covenants, restrictions, easements of record and taxes for the current year.

Parcel Identification Number: 00-00-00-00791-000

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

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

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31, 2008

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Witness: (Signature)

Print Name: TAMI KLEE EPTING

Witness: (Signature)

Print Name: FAYE BEVERLY

Wanda E. Wolfe  
WANDA E. WOLFE  
1880 STANCEL DRIVE  
CLEARWATER, FL 33764

State of Florida  
County of PINELLAS

The foregoing instrument was acknowledged before me this 19 day of June, 2009, by WANDA E. WOLFE, A SINGLE WOMAN, who is personally known to me or who has produced \_\_\_\_\_ as identification:

NOTARY PUBLIC (signature)

Print Name:

My Commission Expires:

Stamp/Seal:



Prepared by:

Louise Emmert  
Professionals' Title Company, LLC  
4141 NW 37th Pl  
Gainesville, FL 32608  
File Number: 581090052

EXHIBIT TO:  
Grant of Easement  
800 S.W. Orlando Avenue  
Suite 400  
Winter Park, Florida 32789



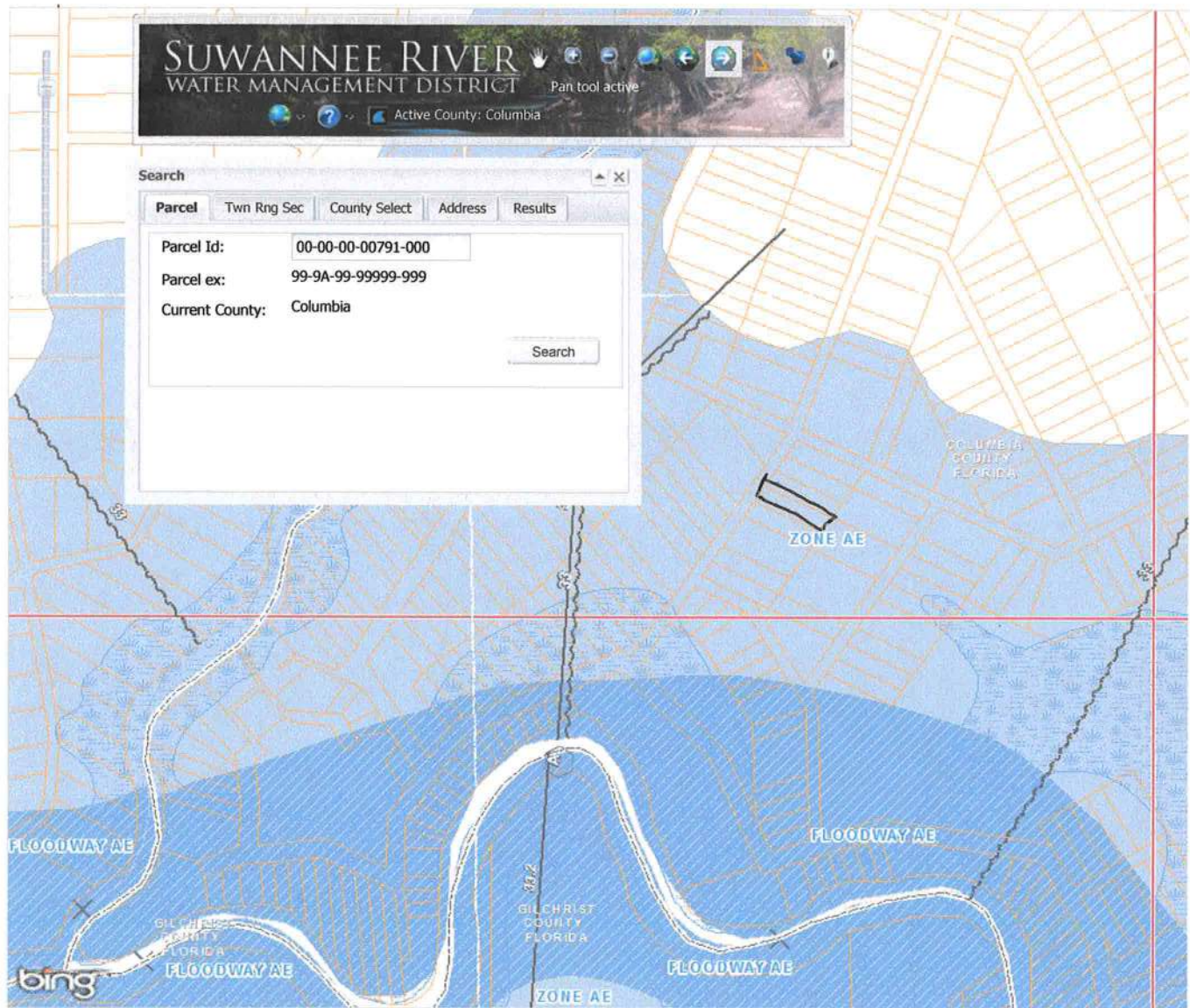
LOT 63 UNIT 10 THREE RIVERS  
ESTATES. ORB 773-1925, QC 1129-  
1928, WD 1176-1356

MCCURRY CHRISTOPHER & TRACY L 00-00-00-00791-000  
1139 VENETIAN HARBOUR DR NE  
ST PETERSBURG, FL 33702 PRI

Columbia County 2012 R  
CARD 001 of 001  
2 22:17 BY JEFF

PRINTED 1/16/2012 22:17  
APPR 3/05/2007 DFDB

| AE | LAND   | DESC    | ZONE | ROAD | UD1 | UD3 | FRONT | DEPTH | FIELD CK:   |      |      |      |  |  | UNITS | UT | PRICE    | ADJ | UT | PR      | LAND | VALUE |
|----|--------|---------|------|------|-----|-----|-------|-------|-------------|------|------|------|--|--|-------|----|----------|-----|----|---------|------|-------|
| Y  | CODE   |         | TOPO | UTIL | UD2 | UD4 | BACK  | DT    | ADJUSTMENTS |      |      |      |  |  |       |    |          |     |    |         |      |       |
| Y  | 000000 | VAC RES | 00   |      |     |     |       |       | 1.00        | 1.00 | 1.00 | 1.00 |  |  | 1.000 | LT | 7200.000 |     |    | 7200.00 |      | 7.200 |







STATE OF FLORIDA  
DEPARTMENT OF HEALTH

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM CONSTRUCTION PERMIT

Permit Application Number

10-0454

PART II - SITE PLAN

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

See  
attached  
survey

Notes:

CHRIS MCCURRY

Lot 63 UNIT 10 THREE RIVERS ESTATES

00-00-00-00-A1-000

Site Plan submitted by:

Robert W. J. N.

Signature

Agust

Title

Plan Approved ☒

Not Approved ☐

Date 11-1-10

By Silbi Terd - EN Director

Columbia CHD

County Health Department

ALL CHANGES MUST BE APPROVED BY THE COUNTY HEALTH DEPARTMENT

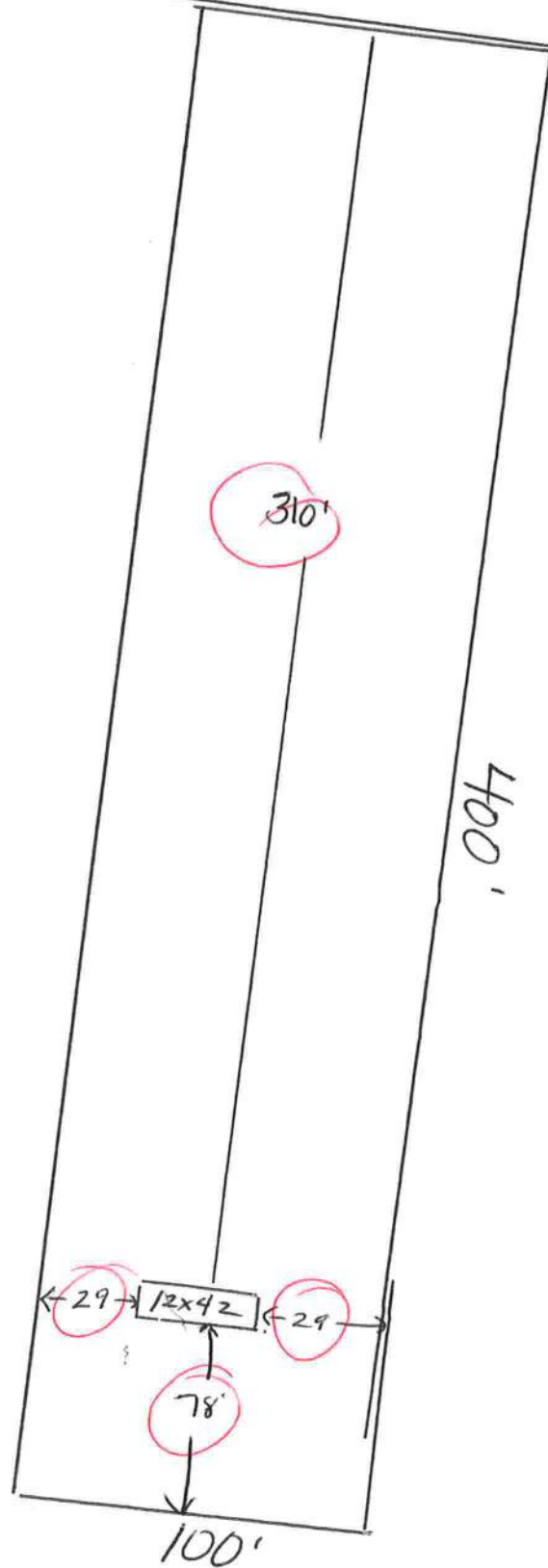
[illegible][illegible]

PREPARED FOR  
**MCCURRY**

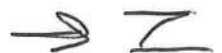
FIELD DATE: 09-13-10 JOB NO. 10-240  
FILE THREE RIVERS ESTATES UNIT 10 (UNRECORDED)  
TYPE OF WORK BOUNDARY / PLOT PLAN  
PARTY CHIEF TP DRAWN BY JHB  
SHEET 1 OF 1  
SCALE 1" = 40' CALC. BY JHB  
SIGNATURE DATE 10-18-10



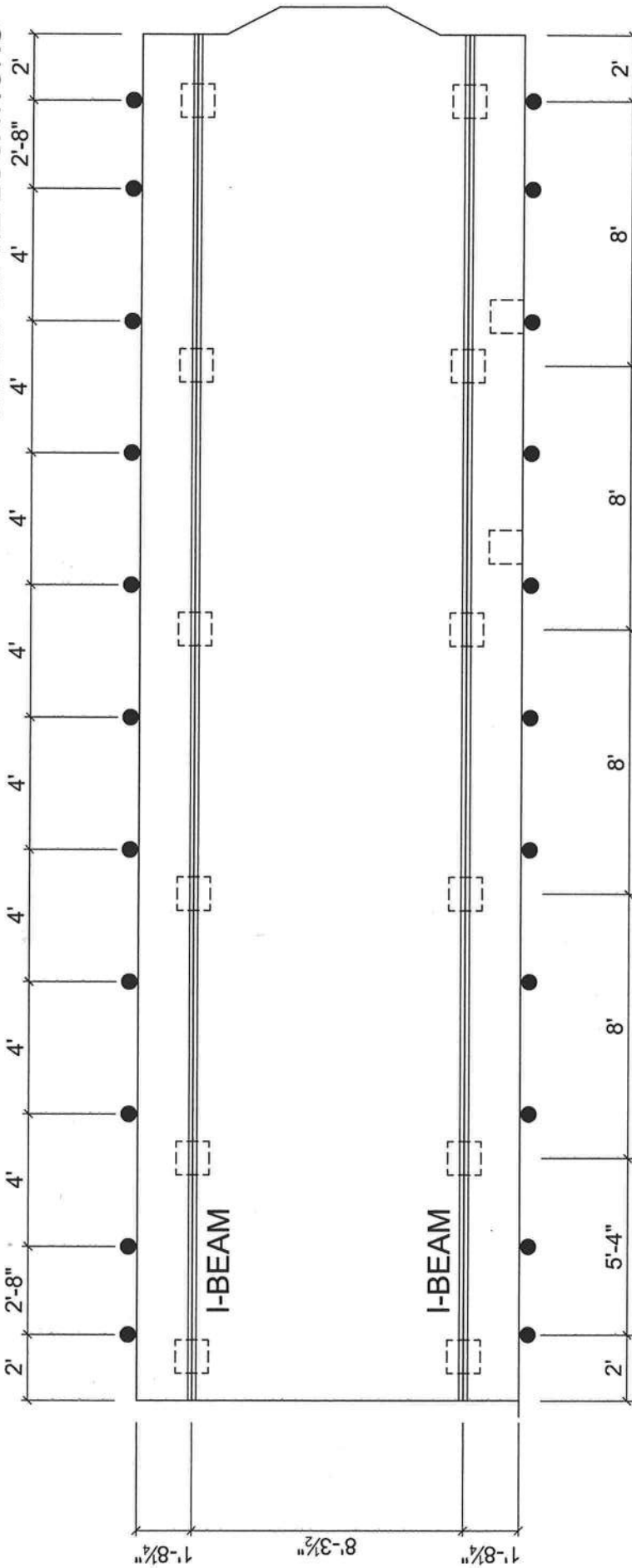
Washington Ave



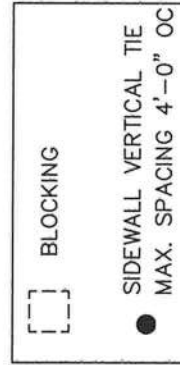
Christopher McLarry



# SIDEWALL TIE LOCATIONS



# BLOCKING LOCATIONS



- 1) ALL EXTERIOR DOORS, BAY WINDOWS, RECESSED SIDEWALLS AND EXTERIOR WALL OPENINGS 48" OR GREATER. WILL REQUIRE BLOCKING ON EACH SIDE.

|                                                                                                                                                                            |                        |               |                |        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------|----------------|--------|
|                                                                                                                                                                            | APPROVER'S SEAL        | MODIFICATIONS | MODEL: 261-704 | SHEET: |
|                                                                                                                                                                            | TITLE: PIER FOUNDATION | DRAWN BY: ROD | DATE: 12-14-11 | S-20   |
| PROPRIETARY AND CONFIDENTIAL<br>THESE DRAWINGS AND SPECIFICATIONS ARE ORIGINAL<br>PROPRIETARY AND CONFIDENTIAL MATERIALS OF CHAMPION.<br>COPYRIGHT © 1976-2008 BY CHAMPION |                        |               |                |        |
| P.O. BOX 2097 HWY 100 EAST LAKE CITY, FL 32056                                                                                                                             |                        |               |                |        |



**Andrews**

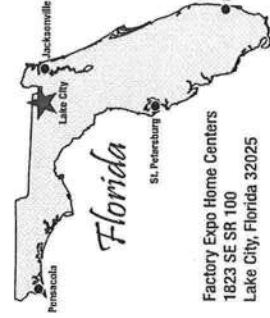
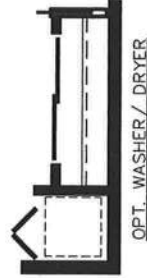
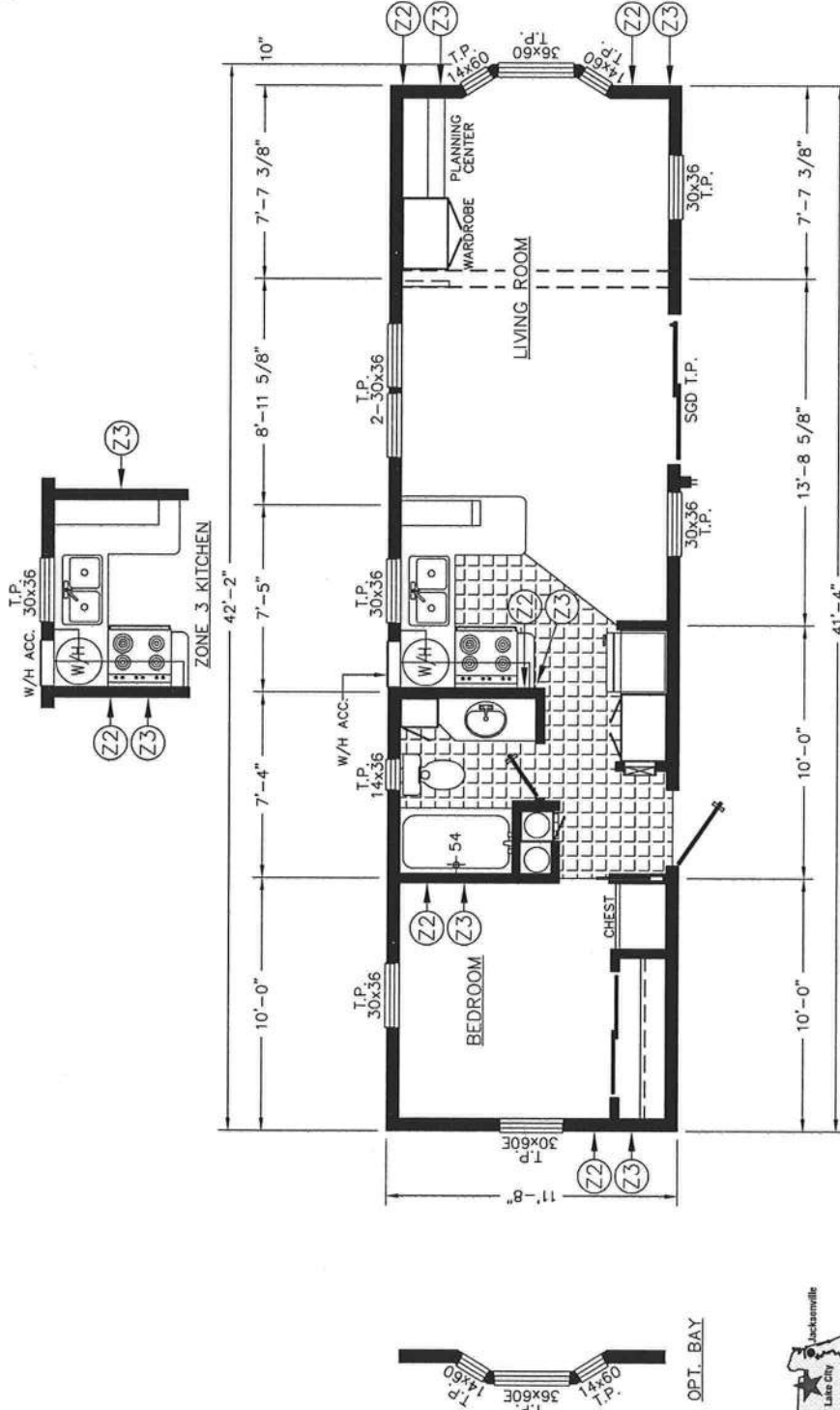
Crossings Resort Series, HUD RV Code

**CHAMPION**

**Factory Expo**  
"Factory Direct Value"  
HOME CENTERS

**Florida Park Model**  
**1 Bedroom, 1 Bath**  
**Approx. 495 Sq. Ft.**

Last Updated: 7-28-11



I authorize Factory Expo Home Centers to build my house, per this plan.

X \_\_\_\_\_  
Customer Signature/Date

1-800-965-0341 [www.ParkModelsDirect.com](http://www.ParkModelsDirect.com) 1-800-965-0341 [www.ParkModelsDirect.com](http://www.ParkModelsDirect.com)

Important: Due to our policy of constant improvement, all information in our brochures may vary from actual home. The right is reserved to make changes at any time, without notice or obligation, in colors, materials, specifications, processes, and models. All dimensions and square footage calculations are nominal and approximate figures. Please check with your sales person for specific and current information.

Feb 23 12 08:25p  
02/23/2012 10:01

Wendy Grennell  
1275356881

3867551031

P. 1

RECEIVED 02/22/2012 18:22  
Wendy Grennell

7275356881

SMARTSAT, INC

3867551031

P. 2

Feb 22 12 06:39p

MOBILE HOME INSTALLATION SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER 1202-48 CONTRACTOR Bonnie Norms PHONE 752-3871

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             | Print Name <u>Christopher McElwain</u> Signature <u>[Signature]</u><br>License #: <u>OWNE R</u> Phone #: <u>727-458-7998</u> |
| <input checked="" type="checkbox"/> MECHANICAL/<br>A/C     | Print Name <u>Christopher McElwain</u> Signature <u>[Signature]</u><br>License #: <u>OWNE R</u> Phone #: <u>727-458-7998</u> |
| <input checked="" type="checkbox"/> PLUMBING/<br>GAS (679) | Print Name <u>Bonnie Norms</u> Signature <u>[Signature]</u><br>License #: <u>TH10251451</u> Phone #: <u>752-3871</u>         |

| Specialty License | License Number | Sub-Contractor Printed Name | Sub-Contractor Signature |
|-------------------|----------------|-----------------------------|--------------------------|
| MASON             |                |                             |                          |
| CONCRETE FINISHER |                |                             |                          |

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 3/11

**FAX**

|                      |                                  |
|----------------------|----------------------------------|
| Date: 2/24           | Total Pages (including Cover): 2 |
| To: Janice           | From: C. McCurry                 |
| Fax No. 386.758.2160 | Fax: 727.535.6881                |

911 address

app # 1202-48



**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: 3/17/2011 DATE ISSUED: 3/18/2011

**ENHANCED 9-1-1 ADDRESS:**

999 SW WASHINGTON AVE  
FORT WHITE FL 32038  
PROPERTY APPRAISER PARCEL NUMBER:  
00-00-00-00791-000

Remarks:

Address Issued By: SIGNED: / RONAL N. CROFT  
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.**

1931

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



## BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

### Memo of review for correctness and completion

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

- \_\_\_\_\_ The attached certificate requires correction by the surveyor of section (s) \_\_\_\_\_ prior to acceptance by the community.
- \_\_\_\_\_ The attached elevation certificate is complete and correct.
- ☒ Minor corrections have been made in the below marked section(s) by the authorized Community Official.

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

| SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION                                                                                                                                                                                                                     |            |                     |                                       |                   |                                                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------------|---------------------------------------|-------------------|-------------------------------------------------------------|
| B1. NFIP Community Name & Community Number                                                                                                                                                                                                                                  |            | B2. County Name     |                                       | B3. State         |                                                             |
| B4. Map/Panel Number                                                                                                                                                                                                                                                        | B5. Suffix | B6. FIRM Index Date | B7. FIRM Panel Effective/Revised Date | B8. Flood Zone(s) | B9. Base Flood Elevation(s) (Zone AO, use base flood depth) |
| B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.<br><input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____ |            |                     |                                       |                   |                                                             |
| B11. Indicate elevation datum used for BFE in Item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____                                                                                                |            |                     |                                       |                   |                                                             |
| B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA             |            |                     |                                       |                   |                                                             |

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Review: 2 April 2012 Community Official: *Barbara L. Lujan*

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

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



## ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

### SECTION A - PROPERTY INFORMATION

For Insurance Company Use:

A1. Building Owner's Name CHRISTOPHER AND TRACY L. McCURRY

Policy Number

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
999 SW WASHINGTON BOULEVARD

Company NAIC Number

City FORT WHITE State FL ZIP Code 32038

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)

LOT 63, THREE RIVERS ESTATES, UNIT 10, UNRECORDED SUBDIVISION, SECTION 25 & 26, TWP 06 S, RNG 15 E, COLUMBIA COUNTY

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

A5. Latitude/Longitude: Lat. 29.939104 Long. 82.787915

Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983

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

A7. Building Diagram Number 1

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) N/A sq ft  
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade \_\_\_\_\_  
c) Total net area of flood openings in A8.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft  
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade \_\_\_\_\_  
c) Total net area of flood openings in A9.b \_\_\_\_\_ sq in  
d) Engineered flood openings? ☐ Yes ☐ No

### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

|                                                                                       |                 |                                    |                                                      |                            |                                                                        |
|---------------------------------------------------------------------------------------|-----------------|------------------------------------|------------------------------------------------------|----------------------------|------------------------------------------------------------------------|
| B1. NFIP Community Name & Community Number<br>COLUMBIA COUNTY UNINCORPORATED - 120070 |                 | B2. County Name<br>COLUMBIA        |                                                      | B3. State<br>FLORIDA       |                                                                        |
| B4. Map/Panel Number<br>12023C0458                                                    | B5. Suffix<br>C | B6. FIRM Index<br>Date<br>02-04-09 | B7. FIRM Panel<br>Effective/Revised Date<br>02-04-09 | B8. Flood<br>Zone(s)<br>AE | B9. Base Flood Elevation(s) (Zone<br>AO, use base flood depth)<br>33.0 |

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

☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other (Describe) \_\_\_\_\_

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

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

### SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☒ Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.

Benchmark Utilized FDOT 290-5001 Vertical Datum NAVD 1988

Conversion/Comments \_\_\_\_\_

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 34.12 ☒ feet ☐ meters (Puerto Rico only)  
b) Top of the next higher floor N/A ☐ feet ☐ meters (Puerto Rico only)  
c) Bottom of the lowest horizontal structural member (V Zones only) N/A ☐ feet ☐ meters (Puerto Rico only)  
d) Attached garage (top of slab) N/A ☐ feet ☐ meters (Puerto Rico only)  
e) Lowest elevation of machinery or equipment servicing the building 34.10 ☒ feet ☐ meters (Puerto Rico only)  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 30.0 ☒ feet ☐ meters (Puerto Rico only)  
g) Highest adjacent (finished) grade next to building (HAG) 30.1 ☒ feet ☐ meters (Puerto Rico only)  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 27.1 ☒ feet ☐ meters (Puerto Rico only)

### SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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

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

Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☒ No

Certifier's Name JAMES H. BENNETT

License Number FL LS 4974

Title LAND SURVEYOR

Company Name ATLANTIC SURVEYING

Address 1411 EAST NEW YORK AVE.

City DELAND

State FL

ZIP Code 32724

Signature

Date 03/29/12

Telephone 386-734-8472

PLACE  
SEAL  
HERE

*James H. Bennett*  
LS 4974  
03/29/12



|                                                                                                                                  |                            |
|----------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| <b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>                                            | For Insurance Company Use: |
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>999 SW WASHINGTON BOULEVARD | Policy Number              |
| City FORT WHITE State FL ZIP Code 32038                                                                                          | Company NAIC Number        |

### SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments ITEM C2e) IS THE TOP OF A WOOD PLATFORM BUILT FOR AN AIR CONDITIONING UNIT

|                                                                                             |               |                                                    |
|---------------------------------------------------------------------------------------------|---------------|----------------------------------------------------|
| Signature  | Date 03/29/12 | <input type="checkbox"/> Check here if attachments |
|---------------------------------------------------------------------------------------------|---------------|----------------------------------------------------|

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

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

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

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

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

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

|           |      |           |          |
|-----------|------|-----------|----------|
| Address   | City | State     | ZIP Code |
| Signature | Date | Telephone |          |
| Comments  |      |           |          |

☐ Check here if attachments

### SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

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

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

- G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_
- G10. Community's design flood elevation \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

|                       |           |
|-----------------------|-----------|
| Local Official's Name | Title     |
| Community Name        | Telephone |
| Signature             | Date      |
| Comments              |           |

☐ Check here if attachments

## Building Photographs

See Instructions for Item A6.

|                                                                                                                                                                                                                                                                                                                                                                                                            |                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>WASHINGTON BOULEVARD - VACANT                                                                                                                                                                                                                                                                         | For Insurance Company Use:<br>Policy Number |
| City FORT WHITE State FL ZIP Code 32038                                                                                                                                                                                                                                                                                                                                                                    | Company NAIC Number                         |
| <p>If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.</p> |                                             |

FRONT VIEW FROM WEST



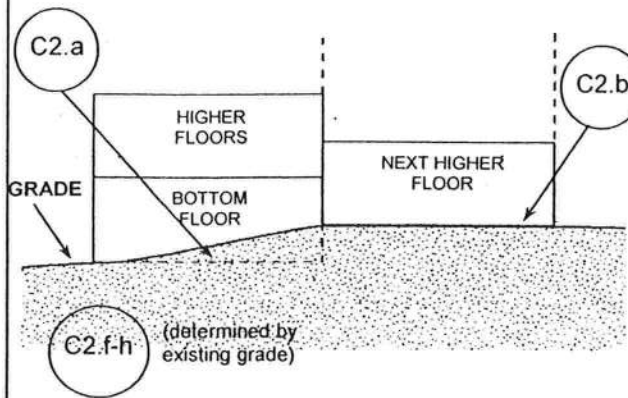
A/C SIDE VIEW 03/27/12



**DIAGRAM 3**

All split-level buildings that are slab-on-grade, either detached or row type (e.g., townhouses); with or without attached garage.

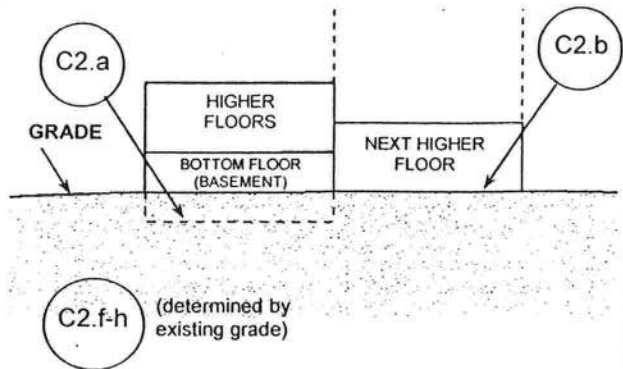
**Distinguishing Feature** – The bottom floor (excluding garage) is at or above ground level (grade) on at least one side.\*



**DIAGRAM 4**

All split-level buildings (other than slab-on-grade), either detached or row type (e.g., townhouses); with or without attached garage.

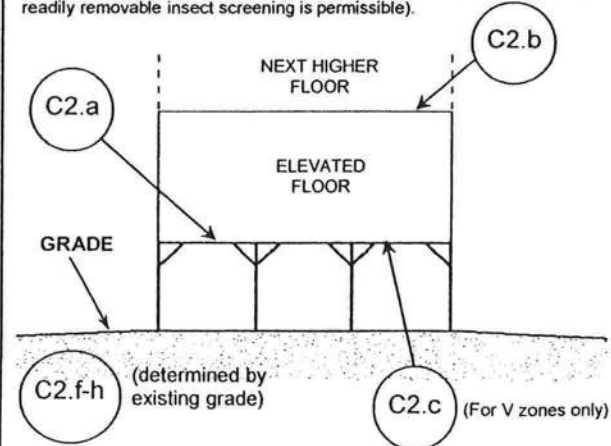
**Distinguishing Feature** – The bottom floor (basement or underground garage) is below ground level (grade) on all sides.\*



**DIAGRAM 5**

All buildings elevated on piers, posts, piles, columns, or parallel shear walls. No obstructions below the elevated floor.

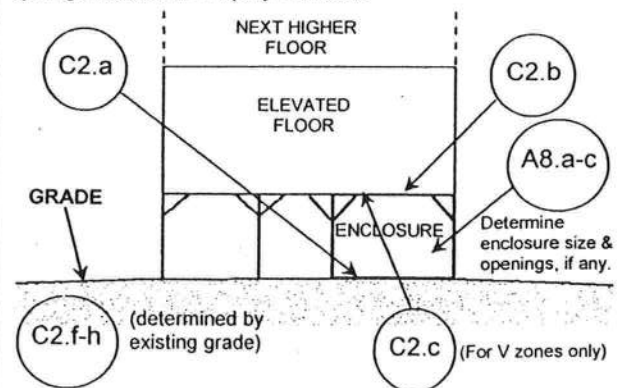
**Distinguishing Feature** – For all zones, the area below the elevated floor is open, with no obstruction to flow of flood waters (open lattice work and/or readily removable insect screening is permissible).



**DIAGRAM 6**

All buildings elevated on piers, posts, piles, columns, or parallel shear walls with full or partial enclosure below the elevated floor.

**Distinguishing Feature** – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings\*\* present in the walls of the enclosure. Indicate information about enclosure size and openings in Section A – Property Information.



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

\*\* An "opening" is a permanent opening that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawlspaces. The openings shall provide a total net area of not less than one square inch for every square foot of area enclosed, excluding any bars, louvers, or other covers of the opening. Alternatively, an Individual Engineered Flood Openings Certification or an Evaluation Report issued by the International Code Council Evaluation Service (ICC ES) must be submitted to document that the design of the openings will allow for the automatic equalization of hydrostatic flood forces on exterior walls. A window, a door, or a garage door is not considered an opening; openings may be installed in doors. Openings shall be on at least two sides of the enclosed area. If a building has more than one enclosed area, each area must have openings to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the higher of the exterior or interior grade or floor immediately below the opening. For more guidance on openings, see NFIP Technical Bulletin 1.





## **Christopher McCurry Residence ONE FOOT RISE CERTIFICATION PACKAGE**

A handwritten signature in black ink, which appears to read 'Brett Crews', is written over a faint, circular professional seal. Below the signature, the date '2-24-2012' is handwritten.

Brett Crews, P.E. 65592  
Certificate of Authorization No. 28022  
P.O. Box 970  
Lake City, FL 32056  
Ph. 386.623.4303  
[brett@crewsengineeringservices.com](mailto:brett@crewsengineeringservices.com)

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| OWNERSHIP INFORMATION                    | 1          |
| QUAD MAP                                 | Q1         |

**ONE FOOT RISE ANALYSIS AND CERTIFICATION  
100 YEAR BASE FLOOD**

**PROJECT DATA**

**PARCEL ID:** 00-00-00-00791-000

**PROPERTY DESCRIPTION:** Lot 10, Three Rivers Estates, Columbia County, FL

**OWNER:** Christopher and Tracy McCurry

**PROJECT DESCRIPTION:** 504 SF Residential Dwelling (12'X42' Mobile Home) located +/-100' from SW Washington Ave

**FLOOD ZONE:** AE

**BASE FLOOD ELEVATION:** 33.7 Based on FIRM Panel 12023C0458C

**EXISTING GRADE ELEVATION (AT BUILDING LOCATION):**  
+/-35', Elevation Based on USGS Quad Map

**CONCLUSION**

To demonstrate the proposed construction will not cause more than a 1 foot rise in the flood elevation, the following calculation was performed:

Area of Flood Zone = Undetermined, Associated with the Santa Fe River

Depth of Lot below Flood Elevation = 35 ft - 33.7 ft = 1.3 ft

Storage Volume Removed due to development = 1.3 ft \* 1,500 sf = 1,950 cf = 0.04 acre-ft

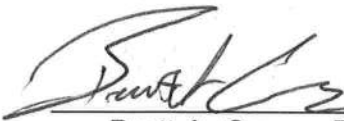
Flood Level Increase (if flood zone area = lot size = 0.9 acres) = 0.04 acre-ft / 0.9 acres = 0.04 ft

This is a very conservative calculation for the following reason:

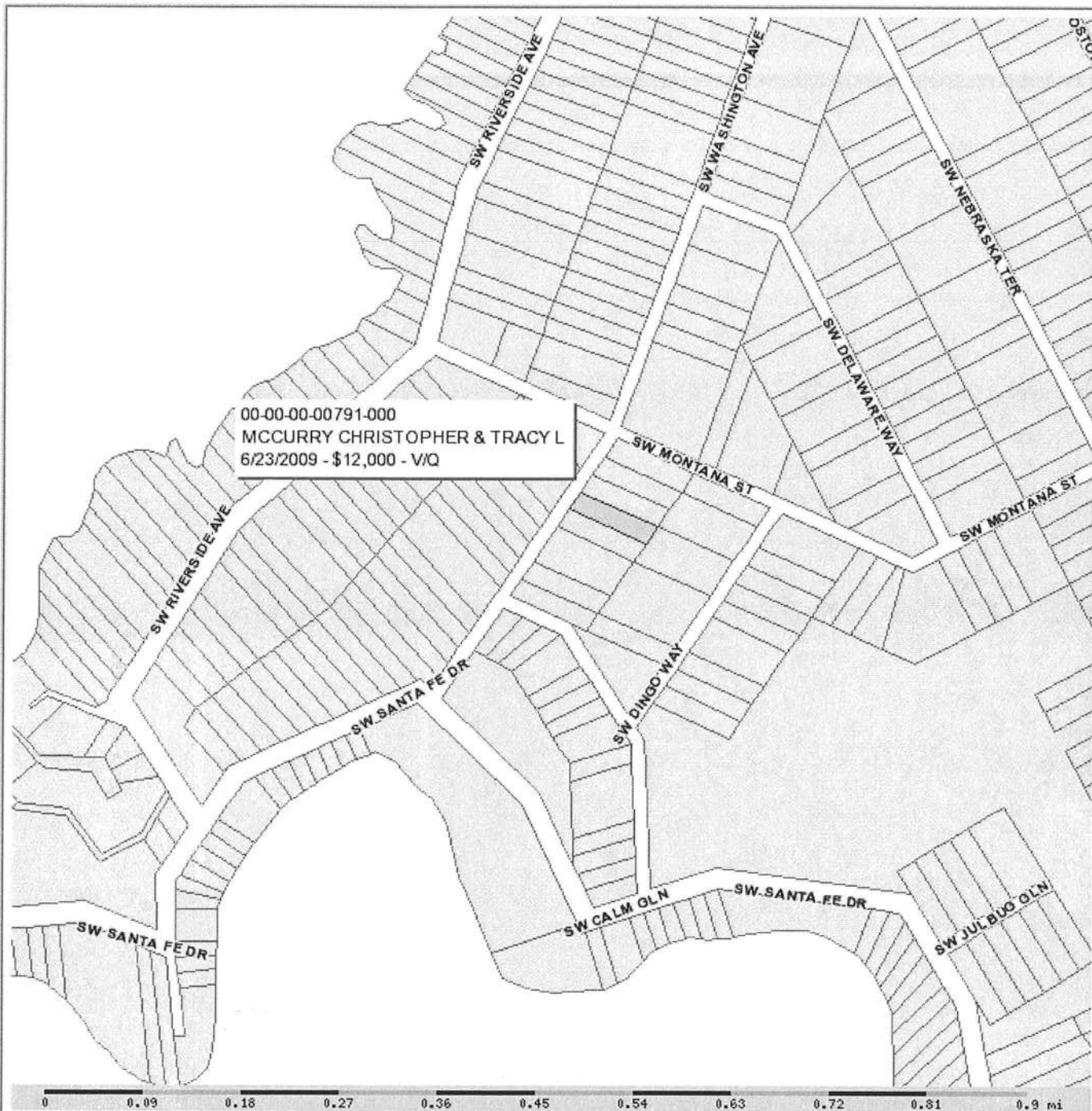
Flood Zone Area is much larger than 0.9 acres and associated with the Santa Fe River.

**CERTIFICATION**

I hereby certify that, to the best of my knowledge, construction of the project as described above will increase the flood elevations less than one foot at the project location.

  
2.24.2012  
Brett A. Crews, PE No. 65592





## Columbia County Property Appraiser

J. Doyle Crews - Lake City, Florida 32055 | 386-758-1083

**PARCEL: 00-00-00-00791-000 - VACANT (000000)**

LOT 63 UNIT 10 THREE RIVERS ESTATES. ORB 773-1925, QC 1129- 1928, WD 1176-1356

NOTES:

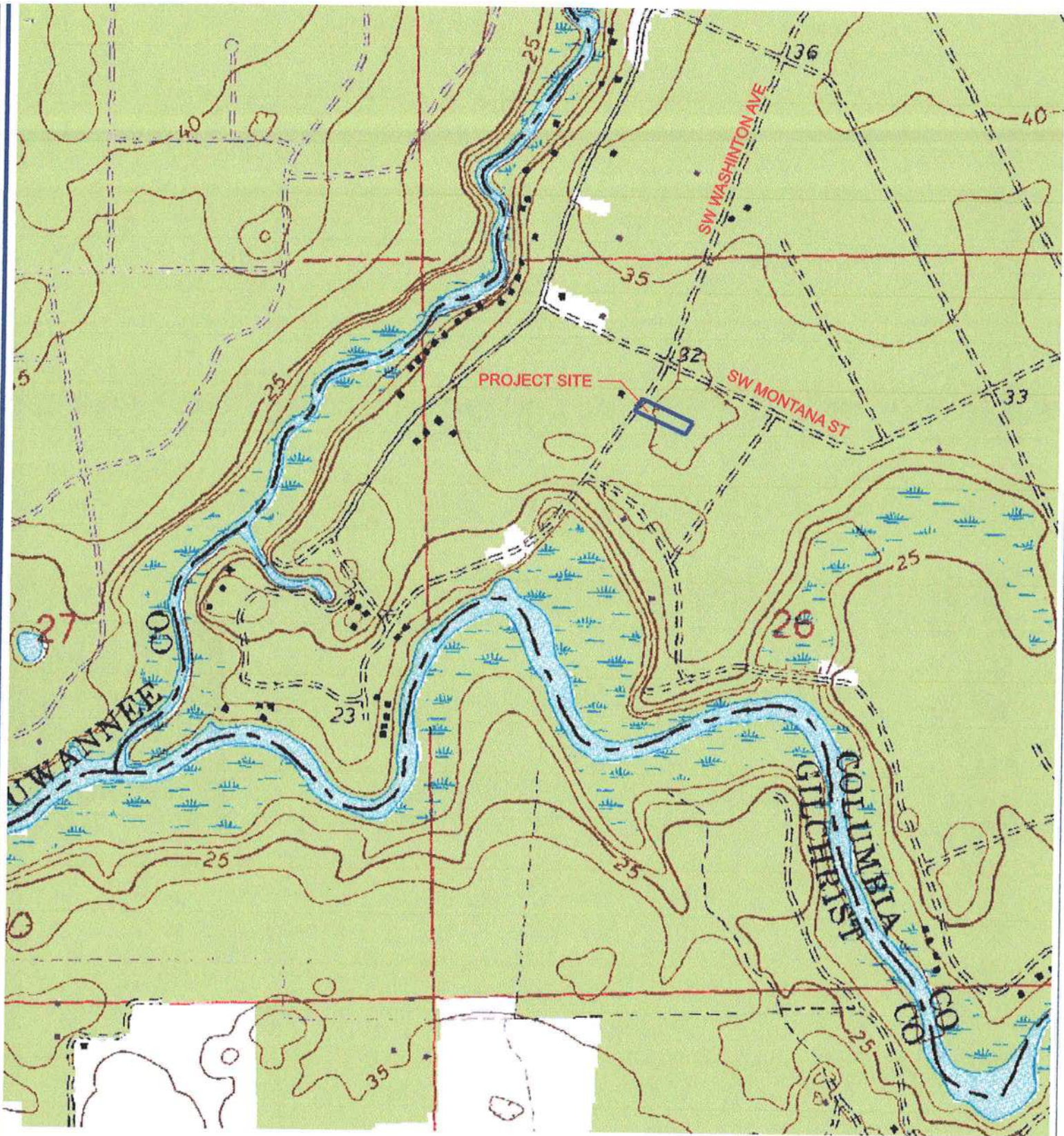
|       |                               |                              |                                                 |
|-------|-------------------------------|------------------------------|-------------------------------------------------|
| Name: | MCCURRY CHRISTOPHER & TRACY L | <b>2011 Certified Values</b> |                                                 |
| Site: | VENETIAN HARBOUR DR NE        | Land                         | \$8,000.00                                      |
| Mail: | 1139 VENETIAN HARBOUR DR NE   | Bldg                         | \$0.00                                          |
|       | ST PETERSBURG, FL 33702       | Assd                         | \$8,000.00                                      |
| Sales | 6/23/2009 \$12,000.00 V / Q   | Exmpt                        | \$0.00                                          |
| Info  | 2/18/2007 \$100.00 V / U      | Taxbl                        | Cnty: \$8,000<br>Other: \$8,000   Schl: \$8,000 |



This information, GIS Map Updated: 1/17/2012, was derived from data which was compiled by the Columbia County Property Appraiser Office solely for the governmental purpose of property assessment. This information should not be relied upon by anyone as a determination of the ownership of property or market value. No warranties, expressed or implied, are provided for the accuracy of the data herein, it's use, or it's interpretation. Although it is periodically updated, this information may not reflect the data currently on file in the Property Appraiser's office. The assessed values are NOT certified values and therefore are subject to change before being finalized for ad valorem assessment purposes.

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**GrizzlyLogic.com**





**CES**

Crews Engineering Services, LLC

P.O. BOX 970  
LAKE CITY, FL 32056  
386.754.4085

BRETT A. CREWS, P.E.

**MCCURRY  
1-FOOT RISE ANALYSIS**

**QUAD SHEET**

CES PROJECT NO.:  
**2012-005**

SHEET:  
**Q1**



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



29982



## BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

### Memo of review for correctness and completion

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

- \_\_\_\_\_ The attached certificate requires correction by the surveyor of section (s) \_\_\_\_\_ prior to acceptance by the community.
- \_\_\_\_\_ The attached elevation certificate is complete and correct.
- ☒ Minor corrections have been made in the below marked section(s) by the authorized Community Official.

#### SECTION A - PROPERTY INFORMATION

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

#### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

|                                            |            |                     |                                       |                   |                                                             |
|--------------------------------------------|------------|---------------------|---------------------------------------|-------------------|-------------------------------------------------------------|
| B1. NFIP Community Name & Community Number |            | B2. County Name     |                                       | B3. State         |                                                             |
| B4. Map/Panel Number                       | B5. Suffix | B6. FIRM Index Date | B7. FIRM Panel Effective/Revised Date | B8. Flood Zone(s) | B9. Base Flood Elevation(s) (Zone AO, use base flood depth) |

- B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9.  
☐ FIS Profile ☐ FIRM ☐ Community Determined ☐ Other (Describe) \_\_\_\_\_
- B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 ☐ NAVD 1988 ☐ Other (Describe) \_\_\_\_\_
- B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No  
Designation Date \_\_\_\_\_ ☐ CBRS ☐ OPA

Comments: \_\_\_\_\_

Date of Review: 2 April 2012

Community Official: [Signature]

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

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



29982

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

## ELEVATION CERTIFICATE

OMB No. 1660-0008  
Expires March 31, 2012

Important: Read the instructions on pages 1-9.

### SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name CHRISTOPHER AND TRACY L. McCURRY

For Insurance Company Use:

Policy Number

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.  
999 SW WASHINGTON BOULEVARD

Company NAIC Number

City FORT WHITE State FL ZIP Code 32038

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
LOT 63, THREE RIVERS ESTATES, UNIT 10, UNRECORDED SUBDIVISION, SECTION 25 & 26, TWP 06 S, RNG 15 E, COLUMBIA COUNTY

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

A5. Latitude/Longitude: Lat. 29.939104 Long. 82.787915

Horizontal Datum: ☐ NAD 1927 ☒ NAD 1983

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

A7. Building Diagram Number 1

A8. For a building with a crawlspace or enclosure(s):

- a) Square footage of crawlspace or enclosure(s) N/A sq ft  
b) No. of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade         
c) Total net area of flood openings in A8.b        sq in  
d) Engineered flood openings? ☐ Yes ☐ No

A9. For a building with an attached garage:

- a) Square footage of attached garage N/A sq ft  
b) No. of permanent flood openings in the attached garage within 1.0 foot above adjacent grade         
c) Total net area of flood openings in A9.b        sq in  
d) Engineered flood openings? ☐ Yes ☐ No

### SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number  
COLUMBIA COUNTY UNINCORPORATED - 120070

B2. County Name  
COLUMBIA

B3. State  
FLORIDA

B4. Map/Panel Number  
12023C0458

B5. Suffix  
C

B6. FIRM Index  
Date  
02-04-09

B7. FIRM Panel  
Effective/Revised Date  
02-04-09

B8. Flood  
Zone(s)  
AE

B9. Base Flood Elevation(s) (Zone  
AO, use base flood depth)  
33.0

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

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

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

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

### SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☒ Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. Use the same datum as the BFE.

Benchmark Utilized FDOT 290-5001 Vertical Datum NAVD 1988

Conversion/Comments       

Check the measurement used.

- a) Top of bottom floor (including basement, crawlspace, or enclosure floor) 34.12 ☒ feet ☐ meters (Puerto Rico only)  
b) Top of the next higher floor N/A ☐ feet ☐ meters (Puerto Rico only)  
c) Bottom of the lowest horizontal structural member (V Zones only) N/A ☐ feet ☐ meters (Puerto Rico only)  
d) Attached garage (top of slab) N/A ☐ feet ☐ meters (Puerto Rico only)  
e) Lowest elevation of machinery or equipment servicing the building 34.10 ☒ feet ☐ meters (Puerto Rico only)  
(Describe type of equipment and location in Comments)  
f) Lowest adjacent (finished) grade next to building (LAG) 30.0 ☒ feet ☐ meters (Puerto Rico only)  
g) Highest adjacent (finished) grade next to building (HAG) 30.1 ☒ feet ☐ meters (Puerto Rico only)  
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support 27.1 ☒ feet ☐ meters (Puerto Rico only)

### SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

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

☒ Check here if comments are provided on back of form. Were latitude and longitude in Section A provided by a licensed land surveyor? ☐ Yes ☒ No

Certifier's Name JAMES H. BENNETT

License Number FL LS 4974

Title LAND SURVEYOR

Company Name ATLANTIC SURVEYING

Address 1411 EAST NEW YORK AVE.

City DELAND

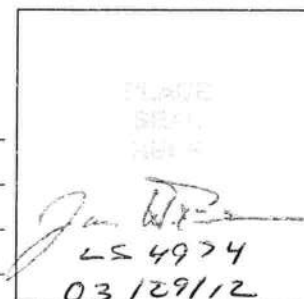
State FL

ZIP Code 32724

Signature

Date 03/29/12

Telephone 386-734-8472



|                                                                                                                                  |                            |
|----------------------------------------------------------------------------------------------------------------------------------|----------------------------|
| <b>IMPORTANT: In these spaces, copy the corresponding information from Section A.</b>                                            | For Insurance Company Use: |
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>999 SW WASHINGTON BOULEVARD | Policy Number              |
| City FORT WHITE State FL ZIP Code 32038                                                                                          | Company NAIC Number        |

### SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments ITEM C2e) IS THE TOP OF A WOOD PLATFORM BUILT FOR AN AIR CONDITIONING UNIT

Signature

Date 03/29/12

☐ Check here if attachments

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

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

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

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

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

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

Address

City

State

ZIP Code

Signature

Date

Telephone

Comments

☐ Check here if attachments

### SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

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

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

- G7. This permit has been issued for: ☐ New Construction ☐ Substantial Improvement
- G8. Elevation of as-built lowest floor (including basement) of the building: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_
- G9. BFE or (in Zone AO) depth of flooding at the building site: \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_
- G10. Community's design flood elevation \_\_\_\_\_ ☐ feet ☐ meters (PR) Datum \_\_\_\_\_

Local Official's Name

Title

Community Name

Telephone

Signature

Date

Comments

☐ Check here if attachments

## Building Photographs

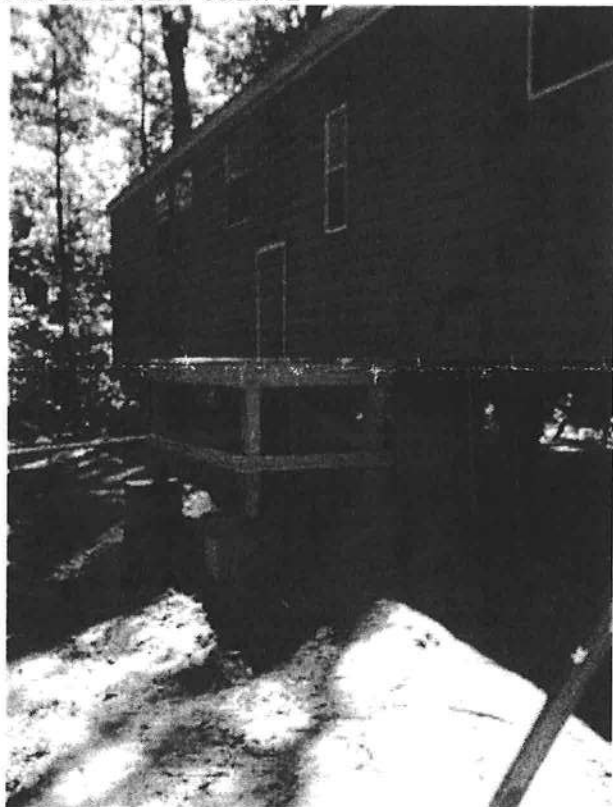
See Instructions for Item A6.

|                                                                                                                                                                                                                                                                                                                                                                                                            |                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.<br>WASHINGTON BOULEVARD - VACANT                                                                                                                                                                                                                                                                         | For Insurance Company Use:<br>Policy Number |
| City FORT WHITE State FL ZIP Code 32038                                                                                                                                                                                                                                                                                                                                                                    | Company NAIC Number                         |
| <p>If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page on the reverse.</p> |                                             |

FRONT VIEW FROM WEST



A/C SIDE VIEW 03/27/12

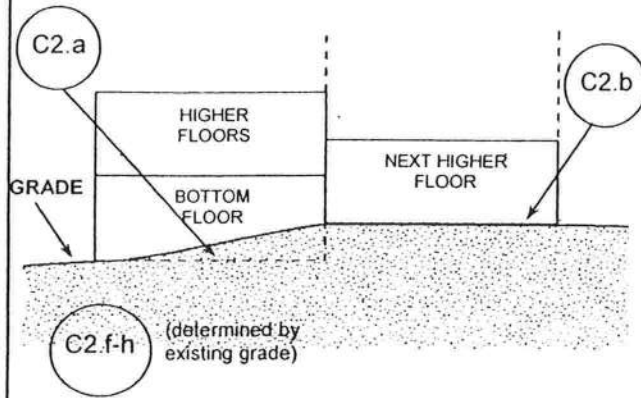




**DIAGRAM 3**

All split-level buildings that are slab-on-grade, either detached or row type (e.g., townhouses); with or without attached garage.

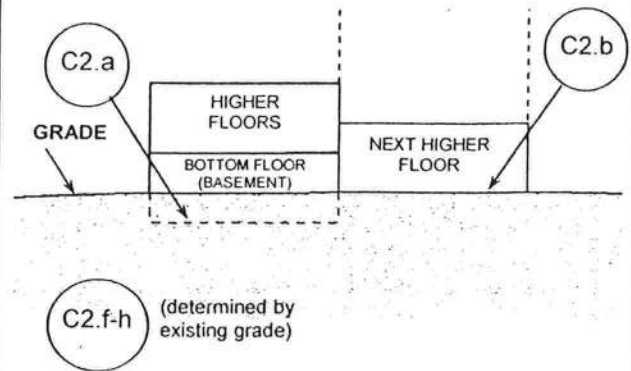
Distinguishing Feature – The bottom floor (excluding garage) is at or above ground level (grade) on at least one side.\*



**DIAGRAM 4**

All split-level buildings (other than slab-on-grade), either detached or row type (e.g., townhouses); with or without attached garage.

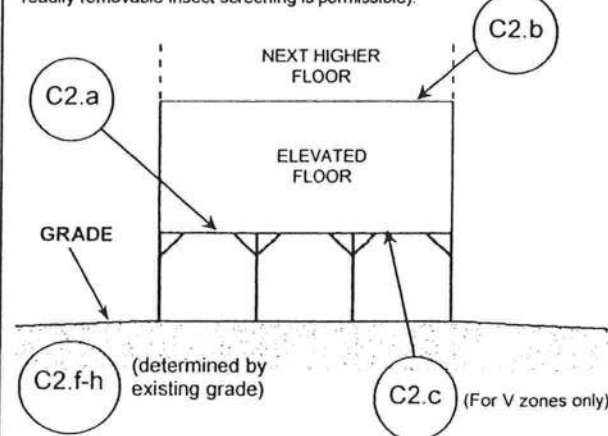
Distinguishing Feature – The bottom floor (basement or underground garage) is below ground level (grade) on all sides.\*



**DIAGRAM 5**

All buildings elevated on piers, posts, piles, columns, or parallel shear walls. No obstructions below the elevated floor.

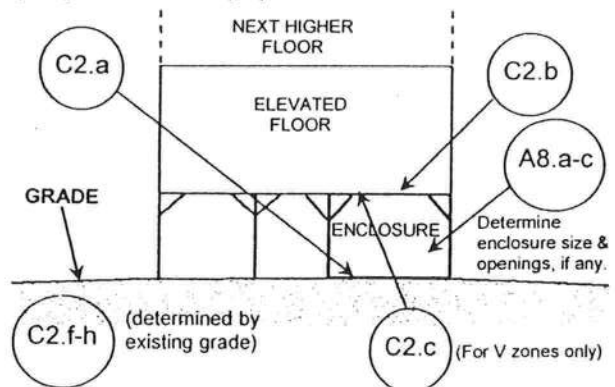
Distinguishing Feature – For all zones, the area below the elevated floor is open, with no obstruction to flow of flood waters (open lattice work and/or readily removable insect screening is permissible).



**DIAGRAM 6**

All buildings elevated on piers, posts, piles, columns, or parallel shear walls with full or partial enclosure below the elevated floor.

Distinguishing Feature – For all zones, the area below the elevated floor is enclosed, either partially or fully. In A Zones, the partially or fully enclosed area below the elevated floor is with or without openings\*\* present in the walls of the enclosure. Indicate information about enclosure size and openings in Section A – Property Information.



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

\*\* An "opening" is a permanent opening that allows for the free passage of water automatically in both directions without human intervention. Under the NFIP, a minimum of two openings is required for enclosures or crawlspaces. The openings shall provide a total net area of not less than one square inch for every square foot of area enclosed, excluding any bars, louvers, or other covers of the opening. Alternatively, an Individual Engineered Flood Openings Certification or an Evaluation Report issued by the International Code Council Evaluation Service (ICC ES) must be submitted to document that the design of the openings will allow for the automatic equalization of hydrostatic flood forces on exterior walls. A window, a door, or a garage door is not considered an opening; openings may be installed in doors. Openings shall be on at least two sides of the enclosed area. If a building has more than one enclosed area, each area must have openings to allow floodwater to directly enter. The bottom of the openings must be no higher than one foot above the higher of the exterior or interior grade or floor immediately below the opening. For more guidance on openings, see NFIP Technical Bulletin 1.

**COLUMBIA COUNTY**  
**OFF**  
**OF**  
**PLANNING AND ZONING**

**M/H OCCUPANCY**

**COLUMBIA COUNTY, FLORIDA**

**Department of Building and Zoning Inspection**

*This Certificate of Occupancy is issued to the below named permit holder for the building and premises at the below named location, and certifies that the work has been completed in accordance with the Columbia County Building Code.*

Parcel Number 26-6S-15-00791-000

Building permit No. 000029982

Permit Holder RONNIE NORRIS

Owner of Building CHRISTOPHER MCCURRY

Location: 999 SW WASHINGTON AVE, FORT WHITE, FL 32038



Date: 04/11/2012

*May Lee*

Building Inspector

**POST IN A CONSPICUOUS PLACE**  
**(Business Places Only)**

**Development Permit**  
**F 023- 12-001**

FLOOD ZONE AE BY BK 2-4-2009 FIRM COMMUNITY # 120070 - PANEL # 0458-C  
FIRM 100 YEAR ELEVATION 33' PLAN INCLUDED YES or NO  
REQUIRED LOWEST HABITABLE FLOOR ELEVATION 34'  
IN THE REGULATORY FLOODWAY YES or NO RIVER Santa Fe  
SURVEYOR / ENGINEER NAME Brett Crews LICENSE NUMBER 65592

DATE THE FINISHED FLOOR ELEVATION CERTIFICATE WAS PROVIDED

COMMENTS \_\_\_\_\_