

#6800

Columbia County New Building Permit Application

For Office Use Only Application # 43914 Date Received 10/30/19 By MG Permit # _____

Zoning Official _____ Date _____ Flood Zone _____ Land Use _____ Zoning _____

FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner _____ Date _____

Comments _____

☒ NOC ☒ EH ☒ Deed or PA ☐ Site Plan ☐ State Road Info ☒ Well letter ☒ 911 Sheet ☐ Parent Parcel # _____
☐ Dev Permit # _____ ☐ In Floodway ☒ Letter of Auth. from Contractor ☐ F W Comp. letter
☐ Owner Builder Disclosure Statement ☐ Land Owner Affidavit ☐ Ellisville Water ☒ App Fee Paid ☒ Sub VF Form

Septic Permit No. _____ OR City Water ☐ Fax N/AApplicant (Who will sign/pickup the permit) Gibraltar Contracting / Mark Bauer Phone 352-283-2002Address 20267 NW 248th Way High Springs, FL 32643Owners Name Gibraltar Contracting, LLC Phone 352-283-2002911 Address 831 SW Mandiba Dr. Lake City, FL 32024Contractors Name Mark Bauer Phone 352-283-2002Address 20267 NW 248th Way High Springs, FL 32643Contractor Email gibraltarcontracting@gmail.com ***Include to get updates on this job.

Fee Simple Owner Name & Address _____

Bonding Co. Name & Address _____

Architect/Engineer Name & Address Will Myer / Mark Disosway Lake City, FL

Mortgage Lenders Name & Address _____

Circle the correct power company ☐ FL Power & Light ☒ Clay Elec. ☐ Suwannee Valley Elec. ☐ Duke EnergyProperty ID Number 18-5S-17-09280-127 Estimated Construction Cost \$300,000.00Subdivision Name Oaks of Lake City Lot 27 Block _____ Unit _____ Phase _____Driving Directions from a Major Road I-75 South to Hwy 47. South on Hwy 47 to CR 240 on Left. Continue to SW Tustenuggee Ave on Right. Follow to SW Mandiba Dr. on Right. Lot is on Right just past SW Custom Made Circle.Construction of New SFD Commercial OR ☒ ResidentialProposed Use/Occupancy Single family residence Number of Existing Dwellings on Property 0Is the Building Fire Sprinkled? No If Yes, blueprints included _____ Or Explain _____Circle Proposed ☒ Culvert Permit or ☐ Culvert Waiver or ☐ D.O.T. Permit or ☐ Have an Existing DriveActual Distance of Structure from Property Lines - Front 60' Side 42' Side 40' Rear 160.4'Number of Stories 1 Heated Floor Area 2205 sf. Total Floor Area 3393 sf. Acreage 1.03 acre

Zoning Applications applied for (Site & Development Plan, Special Exception, etc.) _____

Columbia County Building Permit Application

CODE: Florida Building Code 2017 and the 2014 National Electrical Code.

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.

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 pursued in good faith or a permit has been issued.

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

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

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

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

Mark Bauer
Print Owners Name

[Signature]
Owners Signature

****Property owners must sign here before any permit will be issued.**

****If this is an Owner Builder Permit Application then, ONLY the owner can sign the building permit when it is issued.**

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.

[Signature]
Contractor's Signature

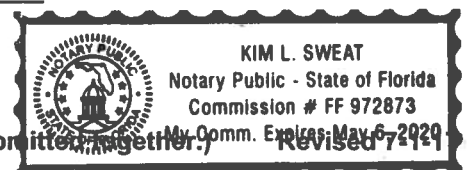
Contractor's License Number CBC1259633
Columbia County
Competency Card Number 1501 ✓

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 29th day of October 2019.

Personally known ☒ or Produced Identification _____

[Signature]
State of Florida Notary Signature (For the Contractor)

SEAL:





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

LETTER OF AUTHORIZATION TO SIGN FOR PERMITS

I, Mark Bauer (license holder name), licensed qualifier
for Gibraltar Contracting, LLC (company name), do certify that
the below referenced person(s) listed on this form is/are contracted/hired by me, the license
holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an
officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said
person(s) is/are under my direct supervision and control and is/are authorized to purchase
permits, call for inspections and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1. <u>Kim Sweat</u>	1. <u>[Signature]</u>
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done
under my license and fully responsible for compliance with all Florida Statutes, Codes, and
Local Ordinances. I understand that the State and County Licensing Boards have the power and
authority to discipline a license holder for violations committed by him/her, his/her agents,
officers, or employees and that I have full responsibility for compliance with all statutes, codes
and ordinances inherent in the privilege granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or
officer(s), you must notify this department in writing of the changes and submit a new letter of
authorization form, which will supersede all previous lists. Failure to do so may allow
unauthorized persons to use your name and/or license number to obtain permits.

[Signature] License Holders Signature (Notarized) CBC1259633 License Number 10-29-19 Date

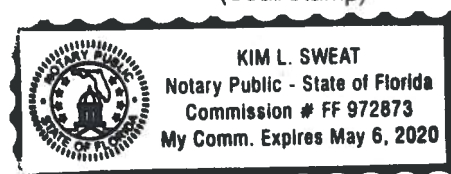
NOTARY INFORMATION:

STATE OF: Florida COUNTY OF: Columbia

The above license holder, whose name is _____
personally appeared before me and is known by me or has produced identification
(type of I.D.) _____ on this 29th day of October, 20 19.

[Signature]
NOTARY'S SIGNATURE

(Seal/Stamp)



Prepared by and return to:

Brent E. Baris

For the Firm

Brent E. Baris, P.A.

18731 NW US Highway 441

High Springs, FL 32643

386-454-0688

File Number: 19-392

Parcel Identification No. 17-5S-17-09280-127

[Space Above This Line For Recording Data]

Warranty Deed

(STATUTORY FORM - SECTION 689.02, F.S.)

This Indenture made this 24th day of October, 2019 between **MF Butler Homes, LLC**, a Florida Limited Liability Company whose post office address is 1121 SW Paul Pearce Lane, Lake City, FL 32024 of the County of Columbia, State of Florida, grantor*, and **Gibraltar Contracting, LLC**, a Florida Limited Liability Company whose post office address is 20267 NW 248th Way, High Springs, FL 32643 of the County of Alachua, State of Florida, grantee*,

Witnesseth that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in **Columbia County, Florida**, to-wit:

Lot 27, Oaks of Lake City, Phase 1, a subdivision according to the Plat thereof, recorded in Plat Book 9, Page 46, of the Public Records of Columbia County, Florida.

Subject to taxes for 2019 and subsequent years; covenants, conditions, restrictions, easements, reservations and limitations of record, if any.

and said grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

* "Grantor" and "Grantee" are used for singular or plural, as context requires.

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

Remainder Intentionally Left Blank



Signed, sealed and delivered in our presence:

Jon Wright

Witness Name: _____

Ann McCanta

Witness Name: _____

MF Butler Homes, LLC, a Florida Limited Liability Company

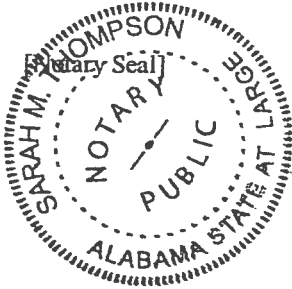
By: _____

Milton F. Butler, Manager

State of Alabama

County of Baldwin

The foregoing instrument was acknowledged before me this 24th day of October, 2019 by Milton F. Butler, Manager of MF Butler Homes, LLC, a Florida Limited Liability Company, on behalf of the limited liability company. He ☐ is personally known to me or ☒ has produced a driver's license as identification.



Sarah M. Thompson
Notary Public

Printed Name: Sarah M. Thompson

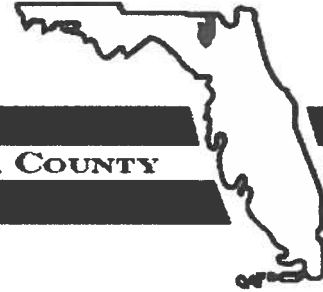
My Commission Expires: _____

My Commission Expires
11/20/2021

Being recorded
Tues. 10/29/19

Once we have copy
we will send
updated copy to
you -

District No. 1 - Ronald Williams
District No. 2 - Rocky Ford
District No. 3 - Bucky Nash
District No. 4 - Toby Witt
District No. 5 - Tim Murphy



BOARD OF COUNTY COMMISSIONERS • COLUMBIA COUNTY

Address Assignment and Maintenance Document

To maintain the county wide 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 addressing 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 Services 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/Time Issued: **10/7/2019 9:07:11 PM**
Address: **831 SW MANDIBA Dr**
City: **LAKE CITY**
State: **FL**
Zip Code **32024**

Parcel ID **09280-127**

REMARKS: Address for proposed structure on parcel.

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

Address Issued By: **Signed:/ Matt Crews**

Columbia County GIS/911 Addressing Coordinator

**COLUMBIA COUNTY
911 ADDRESSING / GIS DEPARTMENT**

263 NW Lake City Ave., Lake City, FL 32055 Telephone: (386) 758-1125
Email: gis@columbiacountyfla.com

A&B Well Drilling, Inc.

5873 NW Lake Jeffery Road
Lake City, FL 32055
Telephone: (386) 758-3409
Cell: (386) 623-3151
Fax: (386) 758-3410
Owner: Bruce Park

October 29, 2019

To: Columbia County Building Department

Description of Well to be installed for Customer _____ Gibraltar Const _____

Located @ Address: _____ 831 SW Mandiba Dr _____

1 HP 20 GPM submersible pump, 1 1/4" drop pipe, 85 gallon captive tank, and backflow prevention.
With SRWMD permit.

Bruce Park

Sincerely,
Bruce N. Park
President

NOTICE OF COMMENCEMENT

Clerk's Office Stamp

Tax Parcel Identification Number:

18-55-17-09280-127

Inst: 201912025106 Date: 10/29/2019 Time: 10:31AM
Page 1 of 1 B: 1397 P: 1232, P. DeWitt Cason, Clerk of Court
Columbia, County, By: PT
Deputy Clerk

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): Lot 27 Oaks of Lake City
a) Street (job) Address: 831 SW Mandiba Dr. Lake City 32024
2. General description of improvements: New Construction SFD
3. Owner Information or Lessee information if the Lessee contracted for the improvements:
a) Name and address: Gibraltar Contracting, LLC
b) Name and address of fee simple titleholder (if other than owner) 20267 NW 248th Way High Springs 32643
c) Interest in property owner / builder
4. Contractor Information
a) Name and address: Mark Bauer / Gibraltar Contracting, LLC
b) Telephone No.: 352-283-2002
5. Surety Information (if applicable, a copy of the payment bond is attached):
a) Name and address: _____
b) Amount of Bond: _____
c) Telephone No.: _____
6. Lender
a) Name and address: _____
b) Phone No.: _____
7. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:
a) Name and address: _____
b) Telephone No.: _____
8. In addition to himself or herself, Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
a) Name: _____ OF _____
b) Telephone No.: _____
9. Expiration date of Notice of Commencement (the expiration date will be 1 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 of Owner or Lessee, or Owner's or Lessee's Authorized Office/Director/Partner/Manager

Mark Bauer / owner - builder
Printed Name and Signatory's Title/Office

The foregoing instrument was acknowledged before me, a Florida Notary, this 29th day of October, 2019, by:

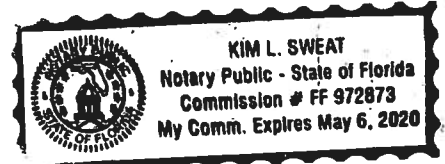
Mark Bauer as owner for Gibraltar Contracting, LLC
(Name of Person) (Type of Authority) (name of party on behalf of whom instrument was executed)

Personally Known ☒ OR Produced Identification _____ Type _____

Notary Signature

Kim Sweat

Notary Stamp or Seal:



PROJECT NUMBER _____

JOB NAME

Lot 27 Oaks

IF YOU ARE SUBMITTING FOR A PERMIT WILL BE SIGNED

For the same project on permits. One permit will cover all trades doing work at the permitted site. It is the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the County Building Department.

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ELECTRICAL	Print Name <u>Ryan Benile</u>	Signature <u>[Signature]</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: <u>RBI Electrical Contractors LLC</u>		
	License #: <u>EC 1300 4236</u>	Phone #: <u>352-339-0369</u>	
MECHANICAL	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
	License #: _____	Phone #: _____	
PLUMBING	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
	License #: _____	Phone #: _____	
ROOFING	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
	License #: _____	Phone #: _____	
PAINTING	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
	License #: _____	Phone #: _____	
LANDSCAPING	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
	License #: _____	Phone #: _____	
OTHER	Print Name _____	Signature _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
	Company Name: _____		
	License #: _____	Phone #: _____	

SUBCONTRACTOR VERIFICATION

APPLICATION/PERMIT # _____ JOB NAME Lot 27 Oaks

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Columbia County issues combination permits. 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 general contractors permit.

NOTE: It shall be the responsibility of the general contractor to make sure that all of the subcontractors are licensed with the Columbia County Building Department.

Use website to confirm licenses: <http://www.columbiacountyfla.com/PermitSearch/ContractorSearch.aspx>

NOTE: If this should change prior to completion of the project, it is your responsibility to have a corrected form submitted to our office, before that work has begun.

Violations will result in stop work orders and/or fines.

ELECTRICAL <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
MECHANICAL/A/C <input checked="" type="checkbox"/>	Print Name <u>Clinton Wilson</u> Signature <u>Clinton Wilson</u> Company Name: <u>Wilson Heat & Air Inc</u> License #: <u>CAC0578816</u> Phone #: <u>386-496-9000</u>	Need - Lic - Liab - W/C - EX - DE
PLUMBING/GAS <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
ROOFING <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
SHEET METAL <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
FIRE SYSTEM/SPRINKLER <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
SOLAR <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
STATE SPECIALTY <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE

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ELECTRICAL <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
MECHANICAL/ A/C <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
PLUMBING/ GAS <input type="checkbox"/> CC# _____	Print Name <u>James L Butler</u> Signature <u>James L Butler</u> Company Name: <u>Butler Plumbing of Gainesville Inc</u> License #: <u>CFC057960</u> Phone #: <u>352 472 3677</u>	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
ROOFING <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SHEET METAL <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
FIRE SYSTEM/ SPRINKLER <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
SOLAR <input type="checkbox"/> CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE
STATE <input type="checkbox"/> SPECIALTY CC# _____	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need <input type="checkbox"/> Lic <input type="checkbox"/> Liab <input type="checkbox"/> W/C <input type="checkbox"/> EX <input type="checkbox"/> DE

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ELECTRICAL <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
MECHANICAL/A/C <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
PLUMBING/GAS <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
ROOFING <input checked="" type="checkbox"/>	Print Name <u>Jeff Bokor</u> Signature <u>Jeff Bokor</u> Company Name: <u>DWC Contracting LLC</u> License #: <u>CCC-1329756</u> Phone #: <u>352-339-6387</u>	Need - Lic - Liab - W/C - EX - DE
SHEET METAL <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
FIRE SYSTEM/SPRINKLER <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
SOLAR <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE
STATE SPECIALTY <input type="checkbox"/>	Print Name _____ Signature _____ Company Name: _____ License #: _____ Phone #: _____	Need - Lic - Liab - W/C - EX - DE



COLUMBIA COUNTY BUILDING DEPARTMENT RESIDENTIAL CHECK LIST

MINIMUM PLAN REQUIREMENTS: FLORIDA BUILDING CODE RESIDENTIAL 2017 EFFECTIVE 1 JANUARY 2018
AND THE NATIONAL ELECTRICAL 2014 EFFECTIVE 1 JANUARY 2018

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

ALL BUILDING PLANS MUST INDICATE COMPLIANCE WITH THE CURRENT FLORIDA BUILDING CODES RESIDENTIAL AND THE NATIONAL ELECTRICAL CODE. ALL PLANS OR DRAWINGS SHALL PROVIDE CALCULATIONS AND DETAILS THAT HAVE THE SEAL AND SIGNATURE OF A CERTIFIED ARCHITECT OR ENGINEER REGISTERED IN THE STATE OF FLORIDA, OR ALTERNATE METHODOLOGIES, APPROVED BY THE STATE OF FLORIDA BUILDING COMMISSION FOR ONE-AND-TWO FAMILY DWELLINGS, FBC 1609.3.1 THRU 1609.3.3.

FOR DESIGN PURPOSES THE FOLLOWING BASIC WIND SPEEDS ARE PER FLORIDA BUILDING CODE FIGURE 1609-A THROUGH 1609-C ULTIMATE DESIGN WIND SPEEDS FOR RISK CATEGORY AND BUILDINGS AND OTHER STRUCTURES

Revised 7/1/18

Website: <http://www.columbiacountyfla.com/BuildingandZoning.asp>

Items to Include-
Each Box shall be
Circled as
Applicable

GENERAL REQUIREMENTS:

APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL

Select From Drop down

1	Two (2) complete sets of plans containing the following:	<input checked="" type="checkbox"/>			
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void	<input checked="" type="checkbox"/>			
3	Condition space (Sq. Ft.)		Total (Sq. Ft.) under roof	Yes	No NA

Designers name and signature shall be on all documents and a licensed architect or engineer, signature and official embossed seal shall be affixed to the plans and documents as per the FLORIDA BUILDING CODES RESIDENTIAL 107.1.

Site Plan information including:

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

Wind-load Engineering Summary, calculations and any details are required.

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
8	Plans or specifications must show compliance with FBCR Chapter 3	Yes	No	NA
		Select From Drop down		
9	Basic wind speed (3-second gust), miles per hour	Yes		<input type="checkbox"/>
10	(Wind exposure – if more than one wind exposure is used, the wind exposure and applicable wind direction shall be indicated)	Yes		<input type="checkbox"/>
11	Wind importance factor and nature of occupancy	Yes		<input type="checkbox"/>
12	The applicable internal pressure coefficient, Components and Cladding	Yes		<input type="checkbox"/>
13	The design wind pressure in terms of psf (kN/m ²), to be used for the design of exterior component, cladding materials not specifi ally designed by the registered design professional.	Yes		<input type="checkbox"/>

Elevations Drawing including:

14	All side views of the structure	Yes		<input type="checkbox"/>
15	Roof pitch	Yes		<input type="checkbox"/>
16	Overhang dimensions and detail with attic ventilation	Yes		<input type="checkbox"/>
17	Location, size and height above roof of chimneys	Yes		<input type="checkbox"/>
18	Location and size of skylights with Florida Product Approval	NA		<input type="checkbox"/>
19	Number of stories	Yes		<input type="checkbox"/>
20	Building height from the established grade to the roofs highest peak	Yes		<input type="checkbox"/>

Floor Plan Including:

21	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	Yes		<input type="checkbox"/>
22	Raised floor surfaces located more than 30 inches above the floor or grade	NA		<input type="checkbox"/>
23	All exterior and interior shear walls indicated	Yes		<input type="checkbox"/>
24	Shear wall opening shown (Windows, Doors and Garage doors)	Yes		<input type="checkbox"/>
25	Show compliance with Section FBCR 310 Emergency escape and rescue opening shown in each bedroom (net clear opening shown) and Show compliance with Section FBC 1405.13.2 where the opening of an operable window is located more than 72 inches above the finished grade or surface below, the lowest part of the clear opening of the window shall be a minimum of 24 inches above the finished floor of the room in which the window is located. Glazing between the floor and 24 inches shall be fixed or have openings through which a 4-inch-diameter sphere cannot pass.	Yes		<input type="checkbox"/>
26	Safety glazing of glass where needed	Yes		<input type="checkbox"/>
27	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 and chapter 24 of FBCR)	Yes		<input type="checkbox"/>
28	Show stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails	NA		<input type="checkbox"/>
29	Identify accessibility of bathroom (see FBCR SECTION 320)	Yes		<input type="checkbox"/>

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

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

		Select From Drop down		
30	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.	Yes		<input type="checkbox"/>
31	All posts and/or column footing including size and reinforcing	Yes		<input type="checkbox"/>
32	Any special support required by soil analysis such as piling.	NA		<input type="checkbox"/>
33	Assumed load-bearing value of soil Pound Per Square Foot	NA		<input type="checkbox"/>
34	Location of horizontal and vertical steel, for foundation or walls (include # size and type) For structures with foundation which establish new electrical utility companies service connection a Concrete Encased Electrode will be required within the foundation to serve as an grounding electrode system. Per the National Electrical Code article 250.52.3	NA		<input type="checkbox"/>

FBCR 506: CONCRETE SLAB ON GRADE

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

FBCR 318: PROTECTION AGAINST TERMITES

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

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

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

Floor Framing System: First and/or second story

40	Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer	NA		<input type="checkbox"/>
41	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers	NA		<input type="checkbox"/>
42	Girder type, size and spacing to load bearing walls, stem wall and/or piers	NA		<input type="checkbox"/>
43	Attachment of joist to girder	NA		<input type="checkbox"/>
44	Wind load requirements where applicable	NA		<input type="checkbox"/>
45	Show required under-floor crawl space	NA		<input type="checkbox"/>
46	Show required amount of ventilation opening for under-floor spaces	NA		<input type="checkbox"/>
47	Show required covering of ventilation opening	NA		<input type="checkbox"/>
48	Show the required access opening to access to under-floor spaces	NA		<input type="checkbox"/>
49	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges & intermediate of the areas structural panel sheathing	NA		<input type="checkbox"/>
50	Show Draftstopping, Fire caulking and Fire blocking	NA		<input type="checkbox"/>
51	Show fireproofing requirements for garages attached to living spaces, per FBCR section 302.6	NA		<input type="checkbox"/>
52	Provide live and dead load rating of floor framing systems (psf).	NA		<input type="checkbox"/>

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable		
Select from Drop down				
53	Stud type, grade, size, wall height and oc spacing for all load bearing or shear walls	Yes		<input type="checkbox"/>
54	Fastener schedule for structural members per table FBC-R602.3.2 are to be shown	Yes		<input type="checkbox"/>
55	Show wood structural panel's sheathing attachment to studs, joist, trusses, rafters and structural members, showing fastener schedule attachment on the edges & intermediate of the areas structural panel sheathing	Yes		<input type="checkbox"/>
56	Show all required connectors with a max uplift rating and required number of connectors and oc spacing for continuous connection of structural walls to foundation and roof trusses or rafter systems	Yes		<input type="checkbox"/>
57	Show sizes, type, span lengths and required number of support jack studs, king studs for shear wall opening and girder or header per FBC-R602.7.	Yes		<input type="checkbox"/>
58	Indicate where pressure treated wood will be placed	Yes		<input type="checkbox"/>
59	Show all wall structural panel sheathing, grade, thickness and show fastener schedule for structural panel sheathing edges & intermediate areas	Yes		<input type="checkbox"/>
60	A detail showing gable truss bracing, wall balloon framing details or/ and wall hinge bracing detail	Yes		<input type="checkbox"/>

FBCR :ROOF SYSTEMS:

61	Truss design drawing shall meet section FBC-R 802.10. 1 Wood trusses	Yes		<input type="checkbox"/>
62	Include a layout and truss details, signed and sealed by Florida Professional Engineer	Yes		<input type="checkbox"/>
63	Show types of connector's assemblies' and resistance uplift rating for all trusses and rafters	Yes		<input type="checkbox"/>
64	Show gable ends with rake beams showing reinforcement or gable truss and wall bracing details	Yes		<input type="checkbox"/>
65	Provide dead load rating of trusses	Yes		<input type="checkbox"/>

FBCR 802:Conventional Roof Framing Layout

66	Rafter and ridge beams sizes, span, species and spacing	Yes		<input type="checkbox"/>
67	Connectors to wall assemblies' include assemblies' resistance to uplift rating	Yes		<input type="checkbox"/>
68	Valley framing and support details	Yes		<input type="checkbox"/>
69	Provide dead load rating of rafter system	Yes		<input type="checkbox"/>

FBCR 803 ROOF SHEATHING

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

ROOF ASSEMBLIES FRC Chapter 9

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

FBCR Chapter 11 Energy Efficiency Code for Residential Building

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

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL		Items to Include- Each Box shall be Circled as Applicable			
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Select from Drop Down

74	Show the insulation R value for the following areas of the structure	Yes			<input type="checkbox"/>
75	Attic space	Yes			<input type="checkbox"/>
76	Exterior wall cavity	Yes			<input type="checkbox"/>
77	Crawl space	Yes			<input type="checkbox"/>

HVAC information

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

Plumbing Fixture layout shown

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

Private Potable Water

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

Electrical layout shown including

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

Notice Of Commencement:

A notice of commencement form **RECORDED** in the Columbia County Clerk Office is required to be filed with the Building Department **BEFORE ANY INSPECTIONS** can be performed.

GENERAL REQUIREMENTS: APPLICANT – PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL	Items to Include- Each Box shall be Circled as Applicable
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****ITEMS 95, 96, & 98 Are Required After APPROVAL from the ZONING DEPT.*****Select from Drop down*

93	Building Permit Application A current Building Permit Application is to be completed, by following the Checklist all supporting documents must be submitted. There is a \$15.00 application fee. The completed application with attached documents and application fee can be mailed.	Yes	<input type="checkbox"/>	<input type="checkbox"/>
94	Parcel Number The parcel number (Tax ID number) from the Property Appraisers Office (386) 758-1083 is required. A copy of property deed is also required. www.columbiacountyfla.com	Yes	<input type="checkbox"/>	<input type="checkbox"/>
95	Environmental Health Permit or Sewer Tap Approval A copy of a approved Columbia County Environmental Health (386) 758-1058	-	<input type="checkbox"/>	<input type="checkbox"/>
96	City of Lake City A City Water and/or Sewer letter. Call 386-752-2031	-	<input type="checkbox"/>	<input type="checkbox"/>
97	Toilet facilities shall be provided for all construction sites	Yes	<input type="checkbox"/>	<input type="checkbox"/>
98	Town of Fort White (386) 497-2321 If the parcel in the application for building permit is within the Corporate city limits of Fort White, an approval land use development letter issued by the Town of Fort is required to be submitted with the application for a building permit.	-	<input type="checkbox"/>	<input type="checkbox"/>
99	Flood Information: All projects within the Floodway of the Suwannee or Santa Fe Rivers shall require permitting through the Suwannee River Water Management District, before submitting a application to this office. Any project located within a flood zone where the base flood elevation (100 year flood) has been established shall meet the requirements of Section 8.5.2 of the Columbia County Land Development Regulations. Any project located within a flood zone where the base flood elevation has not been established (Zone A) shall meet the requirements of Section 8.5.3 of the Columbia County Land Development Regulations (Municode.com)	NA	<input type="checkbox"/>	<input type="checkbox"/>
100	CERTIFIED FINISHED FLOOR ELEVATIONS will be required on any project where the approved FIRM Flood Maps show the property is in a AE, Floodway, and AH flood zones. Additionally One Foot Rise letters are required for AE and AH zones. In the Floodway Flood zones a Zero Rise letter is required.	Yes	<input type="checkbox"/>	<input type="checkbox"/>
101	A Flood development permit is also required for AE, Floodway & AH. Development permit cost is \$50.00	NA	<input type="checkbox"/>	<input type="checkbox"/>
102	Driveway Connection: If the property does not have an existing access to a public road, then an application for a culvert permit (\$25.00) must be made. County Public Works Dept. determines the size and length of every culvert before instillation and completes a final inspection before permanent power is granted. If the applicant feels that a culvert is not needed, they may apply for a culvert waiver (\$50.00) Separate Check when issued. If the project is to be located on an F.D.O.T. maintained road, then an F.D.O.T. access permit is required.	Yes	<input type="checkbox"/>	<input type="checkbox"/>
103	911 Address: An application for a 911 address must be applied for and received through the Columbia County Emergency Management Office of 911 Addressing Department (386) 758-1125.	Yes	<input type="checkbox"/>	<input type="checkbox"/>

Ordinance Sec. 90-75. - Construction debris. (e) It shall be unlawful for any person to dispose of or discard solid waste, including construction or demolition debris at any place within the county other than on an authorized disposal site or at the county's solid waste facilities. The temporary storage, not to exceed seven days of solid waste (excluding construction and demolition debris) on the premises where generated or vegetative trash pending disposition as authorized by law or ordinance, shall not be deemed a violation of this section. The temporary storage of construction and demolition debris on the premises where generated or vegetative trash pending disposition as authorized by law or ordinance shall not be deemed in violation of this section; provided, however, such construction and demolition debris must be disposed of in accordance with this article prior to the county's issuance of a certificate of occupancy for the premises. The burning of lumber from a construction or demolition project or vegetative trash when done so with legal and proper permits from the authorized agencies and in accordance with such agencies' rules and regulations, shall not be deemed a violation of this section. No person shall bury, throw, place, or deposit, or cause to be buried, thrown, placed, or deposited, any solid waste, special waste, or debris of any kind into or on any of the public streets, road right-of-way, highways, bridges, alleys, lanes, thoroughfares, waters, canals, or vacant lots or lands within the county. No person shall bury any vegetative trash on any of the public streets, road right-of-way, highways, bridges, lanes, thoroughfares, waters, canals, or lots less than ten acres in size within the county.

Disclosure Statement for Owner Builders:

If you as the Applicant will be acting as your own contractor or owner/builder under section 489.103(7) Florida Statutes, you must submit the required notarized Owner Builder Disclosure Statement form.

****This form can be printed from the Columbia County Website on the Building and Zoning page under Documents. Web address is - <http://www.columbiacountyfla.com/BuildingandZoning.asp>**

Section 105 of the Florida Building Code defines the:

Time limitation of application.

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

Single-family residential dwelling.

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

Permit intent.

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

If work has commenced.

Section 105.4.1.1: If work has commenced and the permit is revoked, becomes null and void, or expires because of lack of progress or abandonment, a new permit covering the proposed construction shall be obtained before proceeding with the work.

New Permit.

Section 105.4.1.2: If a new permit is not obtained within 180 days from the date the initial permit became null and void, the building official is authorized to require that any work which has been commenced or completed be removed from the building site. Alternately, a new permit may be issued on application, providing the work in place and required to complete the structure meets all applicable regulations in effect at the time the initial permit became null and void and any regulations which may have become effective between the date of expiration and the date of issuance of the new permit.

Work Shall Be:

Section 105.4.1.3: Work shall be considered to be in active progress when the permit has received an approved inspection within 180 days. This provision shall not be applicable in case of civil commotion or strike or when the building work is halted due directly to judicial injunction, order or similar process.

The Fee:

Section 105.4.1.4: The fee for renewal reissuance and extension of a permit shall be set forth by the administrative authority.

Notification:

When the application is approved for permitting the applicant will be notified by phone as to the status by the Columbia County Building & Zoning Department.

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online @ www.floridabuilding.org

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING	Plastpro	Swinging Doors Exterior	FL-16094.1
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			
2. WINDOWS			
A. SINGLE/DOUBLE HUNG	MI	Single Hung Vinyl Windows	FL-17499
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
3. PANEL WALL			
A. SIDING	Hardie	Concrete Masonry Siding	FL-13192
B. SOFFITS			
C. STOREFRONTS			
D. GLASS BLOCK			
E. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES	Tamko	Architectural Shingles	FL-18355-R4
B. NON-STRUCT METAL			
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
5. STRUCT COMPONENTS			
A. WOOD CONNECTORS	Simpson	Wood Connectors / Anchors	
B. WOOD ANCHORS		SP 4	10456.43
C. TRUSS PLATES		HETA 16	11473.3
D. INSULATION FORMS		LLSTA 24	10852.4
E. LINTELS		ABW 66Z	10849.6
F. OTHERS		ABW 44Z	10849.6
6. NEW EXTERIOR ENVELOPE PRODUCTS			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.
Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.

NOTES: _____

