

DATE 09/04/2009

Columbia County Building Permit

This Permit Must Be Prominently Posted on Premises During Construction

PERMIT

000028057

APPLICANT BRYAN ZECHER PHONE 752-8653
ADDRESS 465 NW ORANGE ST LAKE CITY FL 32055
OWNER BOBBY & DORIS GODWIN PHONE 755-2716
ADDRESS 170 SE EMMA PLACE LAKE CITY FL 32025
CONTRACTOR BRYAN ZECHER PHONE 752-8653

LOCATION OF PROPERTY EAST ON BAYA, R ELOISE AVE, L ON SE EMMA, PROPERTY
ON THE RIGHT

TYPE DEVELOPMENT REMODEL SUN ROOM ESTIMATED COST OF CONSTRUCTION 6800.00

HEATED FLOOR AREA 136.00 TOTAL AREA 136.00 HEIGHT 18.00 STORIES 1

FOUNDATION CONCRETE WALLS FRAMED ROOF PITCH FLOOR SLAB

LAND USE & ZONING RSF-2 MAX. HEIGHT 35

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

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

PARCEL ID 33-3S-17-06821-000 SUBDIVISION ODOM HEIGHTS ADDITION #1

LOT 4&5 BLOCK PHASE UNIT TOTAL ACRES 1.38

CBC054575
Culvert Permit No. Culvert Waiver Contractor's License Number CS Applicant/Owner/Contractor WR
EXISTING X09-263 CS WR N
Driveway Connection Septic Tank Number LU & Zoning checked by Approved for Issuance New Resident

COMMENTS: REMODEL EXISTING SUN ROOM

Check # or Cash 6915

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 \$ 35.00 CERTIFICATION FEE \$ 0.68 SURCHARGE FEE \$ 0.68

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

FLOOD DEVELOPMENT FEE \$ FLOOD ZONE FEE \$ 25.00 CULVERT FEE \$ TOTAL FEE 111.36

INSPECTORS OFFICE L.H. CLERKS OFFICE CH

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

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

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

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

Columbia County Building Permit Application

clt# 6915

For Office Use Only Application # 0908-53 Date Received 7/28/09 By G Permit # 28657
Zoning Official asp Date 9/3/09 Flood Zone X Land Use RLD Zoning RSF2
FEMA Map # _____ Elevation _____ MFE _____ River _____ Plans Examiner (initials) Date 8-31-09
Comments _____
- NOC ☒ EH ☒ Deed or PA ☒ Site Plan ☐ State Road Info ☐ Parent Parcel # _____
- Dev Permit # _____ ☐ In Floodway ☐ Letter of Auth. from Contractor ☐ F W Comp. letter
IMPACT FEES: EMS _____ Fire _____ Corr _____ Road/Code _____
School _____ = TOTAL _____

Septic Permit No. X09-263 inbox Fax 386-758-8920
Name Authorized Person Signing Permit Bryan Zecher Phone 386-752-8653
Address 465 NW Orange St., Lake City, FL 32055
Owners Name Bobby and Doris Godwin Phone 386-755-2716
911 Address 170 SE Emma Place, Lake City, FL 32025
Contractors Name Bryan Zecher Phone 752-8653
Address 465 Orange St.
Fee Simple Owner Name & Address _____
Bonding Co. Name & Address _____
Architect/Engineer Name & Address _____
Mortgage Lenders Name & Address _____

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

Property ID Number 33-35-17-06821-000 HX13 Estimated Cost of Construction \$8,500 -
Subdivision Name Odom Heights Lot 4+5 Block 4 Unit _____ Phase _____
Driving Directions From SW Main Blvd, Take SW Baya Drive East. Turn right on Eloise Ave and left on SE Emma Place. Property is on the right.

Number of Existing Dwellings on Property 1
Construction of remodel SFD Total Acreage 1.377 Lot Size _____
Do you need a - Culvert Permit or Culvert Waiver or Have an Existing Drive Total Building Height 18'
Actual Distance of Structure from Property Lines - Front 28 Side 30 Side 15 Rear 90'
Number of Stories 1 Heated Floor Area 136 Total Floor Area _____ Roof Pitch _____

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.

Columbia County Building Permit Application

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

FLORIDA'S CONSTRUCTION LIEN LAW: Protect Yourself and Your Investment

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

NOTICE OF RESPONSIBILITY TO BUILDING PERMITEE:

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

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

OWNERS CERTIFICATION: I hereby certify that all the foregoing information is accurate and all work will be done in compliance with all applicable laws and regulating construction and zoning. I further understand the above written responsibilities in Columbia County for obtaining this Building Permit.

Doris Dedwin
Owners Signature

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

[Signature]
Contractor's Signature (Permitee)

Contractor's License Number CBC054575
Columbia County
Competency Card Number _____

Affirmed under penalty of perjury to by the Contractor and subscribed before me this 28 day of August 2009.
Personally known X or Produced Identification _____

Adrea M Pitman
State of Florida Notary Signature (For the Contractor)

SEAL:



SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____ CONTRACTOR _____ PHONE _____

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

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 unemployment insurance, general liability insurance and a valid Certificate of Competency license in Columbia County.

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

ELECTRICAL	Print Name <u>Marc Matthews Elec</u>	Signature <u>Marc Matthews</u>
	License #: <u>ER-0014352</u>	Phone #: <u>344-2029</u>
MECHANICAL/ C	Print Name <u>Harry's Heating Air</u>	Signature <u>(see attached)</u>
	License #: <u>DDO 327</u>	Phone #: <u>386-752-2308</u>
PLUMBING/ AS	Print Name <u>Boyetts Plumbing</u>	Signature <u>C. J. Boyetts</u>
	License #: <u>CFCO 21540</u>	Phone #: <u></u>
ROOFING	Print Name <u>Mac Johnson</u>	Signature <u>(see attached)</u>
	License #: <u>RC0061 384</u>	Phone #: <u>352-472-4943</u>
HEET METAL	Print Name <u>N/A</u>	Signature <u></u>
	License #: <u></u>	Phone #: <u></u>
IRE SYSTEM/ PRINKLER	Print Name <u>N/A</u>	Signature <u></u>
	License #: <u></u>	Phone #: <u></u>
OLAR	Print Name <u>N/A</u>	Signature <u></u>
	License #: <u></u>	Phone #: <u></u>

Specialty License	License Number	Sub-Contractors Printed Name	Sub-Contractors Signature
MASON	000287	Southpoint Masonry	<u>J. D. Dixon</u>
CONCRETE FINISHER	00201	<u>Danell Spradley</u>	<u>Danell Spradley</u>
FRAMING	CBC054575	Bryan Zeher	<u>Bryan Zeher</u>
INSULATION	000240	<u>Sykes Insulation</u>	<u>Phil Sykes</u>
TUCCO		<u>N/A</u>	
DRYWALL	CBC054575	Joe Maddox/Bryan Zeher	<u>Joe Maddox</u>
PLASTER		<u>N/A</u>	
CABINET INSTALLER	CBC054575	Bryan Zeher	<u>Bryan Zeher</u>
PAINTING	000330	<u>Bobby Touchton</u>	<u>Bobby Touchton</u>
ACOUSTICAL CEILING		<u>N/A</u>	
GLASS		<u>N/A</u>	
CERAMIC TILE	000188	Ron Humphrey	<u>Ron Humphrey</u>
FLOOR COVERING		<u>Eddy Kurke - Brown Van</u>	<u>Eddy Kurke</u>
ALUM/VINYL SIDING	000166	<u>Mik Nickerson</u>	<u>Mik Nickerson</u>
GARAGE DOOR		<u>Skip Horn</u>	<u>Skip Horn</u>
METAL BLDG ERECTOR		<u>N/A</u>	

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

JUL 29 08 11:13

Byron Zacher

AND SUBCON ROOFING

385-758-8920

0002
p2

SUBCONTRACTOR VERIFICATION FORM

APPLICATION NUMBER _____

CONTRACTOR _____

PHONE _____

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 89-8, a contractor shall require all subcontractors to provide evidence of workers' compensation or exemption, general liability insurance and a valid Certificate of Competency license in Columbia County.

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

ELECTRICAL	Print Name: <u>More Matthews Glead</u>	Signature: _____	Phone #: _____
MECHANICAL/ A/C	Print Name: <u>Harry's Heating Air</u>	Signature: <u>Harry McSoley</u>	Phone #: <u>386 752-2308</u>
PLUMBING/ GAS	Print Name: <u>Bonelle Plumbing</u>	Signature: <u>Bonelle</u>	Phone #: _____
ROOFING	Print Name: <u>Mac Johnson</u>	Signature: <u>Mac Johnson</u>	Phone #: <u>386 473-4543</u>
SHEET METAL	Print Name: <u>N/A</u>	Signature: _____	Phone #: _____
FIRE SYSTEM/ SPRINKLER	Print Name: <u>N/A</u>	Signature: _____	Phone #: _____
SOLAR	Print Name: <u>N/A</u>	Signature: _____	Phone #: _____

		Subcontractors Signatures	
MASON			
CONCRETE FINISHER			
FRAMING	<u>CBC05755</u>	<u>Daryl Spradley</u>	
INSULATION		<u>Byron Zacher</u>	
STUCCO		<u>Skyler Insulation</u>	
DRYWALL		<u>N/A</u>	
PLASTER		<u>Joe Madaleno</u>	
CABINET INSTALLER		<u>N/A</u>	
PAINTING	<u>CBC05755</u>	<u>Byron Zacher</u>	
ACOUSTICAL CEILING		<u>Bobby Tumbler</u>	
GLASS		<u>N/A</u>	
CERAMIC TILE		<u>N/A</u>	
FLOOR COVERING		<u>Ron Humphrey</u>	
ALUM/VINYL SIDING		<u>Eddy Korte - Brian Van</u>	
GARAGE DOOR		<u>Mike Nickerson</u>	
METAL BLDG ERECTOR		<u>Skip Horn</u>	
		<u>N/A</u>	

F. S. 440.108 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. 440.30 and 440.38, and shall be presented each time the employer applies for a building permit.

Copyright 1994, by Columbia County, FL

07/24/2009 FRI 10:25 (TX/RX NO 3895) @002

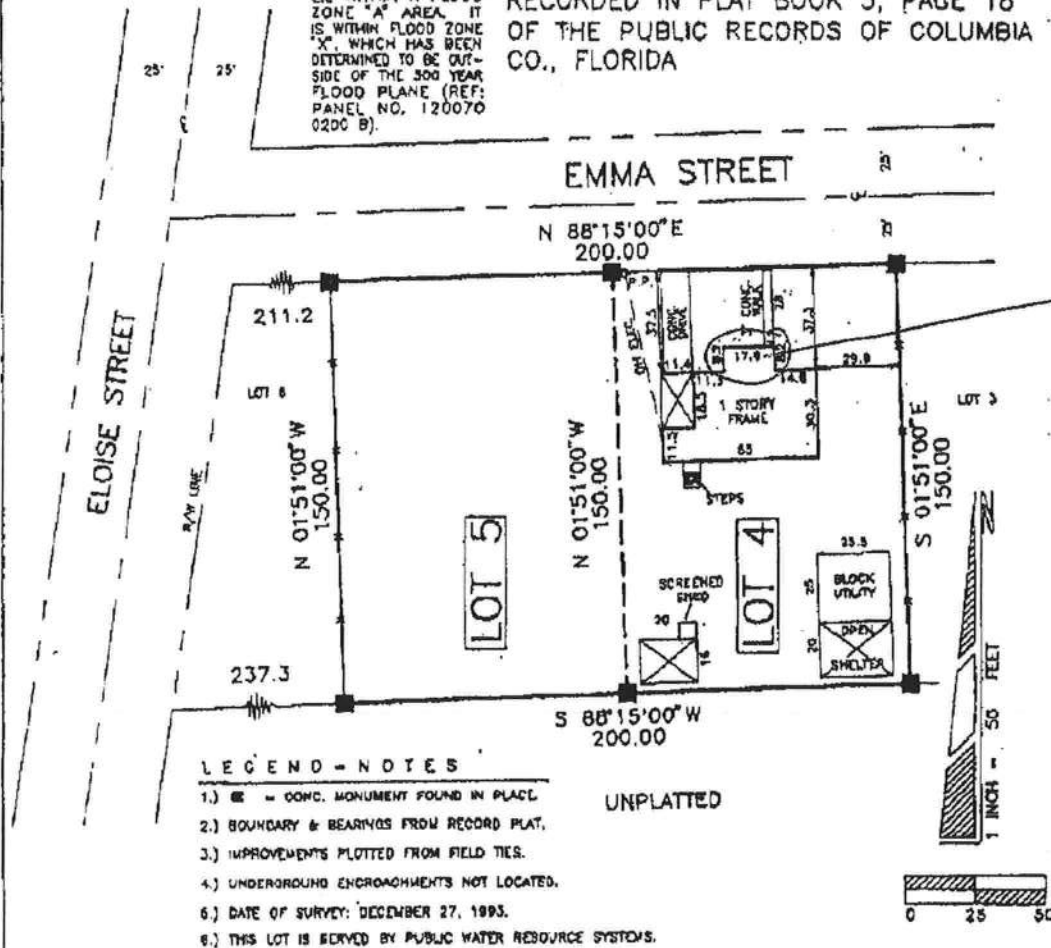
BOUNDARY SURVEY

DESCRIPTION

FLOOD NOTE

ACCORDING TO THE OFFICIAL FLOOD HAZARD MAPS OF COLUMBIA COUNTY (FIRM), THE LOT SHOWN DOES NOT LIE WITHIN A FLOOD ZONE "A" AREA. IT IS WITHIN FLOOD ZONE "X", WHICH HAS BEEN DETERMINED TO BE OUTSIDE OF THE 500 YEAR FLOOD PLANE (REF: PANEL NO. 120070 0200 B).

LOTS 4 AND 5, BLOCK 4 ODOM HEIGHTS "ADDITION NO. 1" A SUBDIVISION AS RECORDED IN PLAT BOOK 3, PAGE 18 OF THE PUBLIC RECORDS OF COLUMBIA CO., FLORIDA



CERTIFICATION

CERTIFIED TO: Bobby R. Godwin, CUNA Mortgage, Equity Title/Southeast and Old Republic National Title Insurance Company

I HEREBY CERTIFY that this Survey complies with the Minimum Technical Standards for Land Surveying as set forth by the Florida Board of Professional Land Surveyors, pursuant to Section 472.027, Florida Statutes.

SIGNED: _____ DATE: ____/____/19____

Donald F. Lee, P.L.S.
Florida Reg. No. 3628

NOT VALID UNLESS SIGNED AND EMBOSSED WITH SURVEYOR'S SEAL



Donald F. Lee and Associates, Inc.

SURVEYORS - ENGINEERS

950 South Ridgewood Drive, Lake City, Florida 32055

Phone: (904) 755-6166

FAX: (904) 755-6167

Date: 1-5-94

Drafting: TCD

Computations: TCD

Checked: D F L

Bobby R. Godwin

Scale: 1"=50'

Field Book: 93-165

Work Order: 9J-2050

File: C

LOTS 4 & 5 BLOCK 4 ODOM
HEIGHTS ADDITION #1 & BEG AT
SW COR OF SE1/4, RUN E 198.5
FT TO E LINE OF ELOISE ST

GODWIN BOBBY R & DORIS G
170 SE EMMA PL
LAKE CITY, FL 32025

33-3S-17-06821-000

Columbia County 2009 R
CARD 001 of 001
BY JEFF

PRINTED 7/08/2009 9:53
APPR 2/09/2005 DFTW

BUSE	000100	SINGLE FAM	AE? Y	1399	HTD AREA	109.890	INDEX	33317.15	ODOM	HGHT	PUSE	000100	SINGLE FAMILY
MOD	1	SFR	2.00	1534	EFF AREA	52.747	E-RATE	100.000	INDX	STR	33-3S-17		
EXW	31	VINYL SID		80914	RCN			1957	AYB	MKT AREA	06		56,639 BLDG
RSTR	03	GABLE/HIP		70.00	%GOOD	56,639	B BLDG VAL	1957	EYB	(PUDI			3,900 XFOB
RCVR	03	COMP SHNGL						1957	EYB	AC	1.377		16,920 LAND
INTW	05	DRYWALL								NTCD			0 AG
		N/A								APPR CD			0 MKAG
FLOR	12	HARDWOOD	1.0							CNDO			77,459 JUST
		N/A								SUBD			0 CLAS
HTTP	04	AIR DUCTED								BLK			0 SOHD
A/C	03	CENTRAL								MAP#			0 ASSD
QUAL	05	05								13 HX			0 EXPT
FNDN	N/A									TXDT	002		0 COTXBL
SIZE	03	RECTANGLE											
CEIL	N/A												
ARCH	N/A												
FRME	01	NONE											
KTCH	01	01											
WINDO	N/A												
CLAS	N/A												
OCC	N/A												
COND	03	03											
SUB	A-AREA	% E-AREA											
BAS93	1290	100											
FE93	136	80											
FCP93	228	25											
FST93	132	55											
UOP93	24	20											

TOTAL	1810	EXTRA	1534	56639									
AE BN	CODE	DESC	LEN	WID	HGHT	QTY	QL	YR	ADJ	UNITS	UT	PRICE	ADJ UT PR
Y	0294	SHED WOOD/VI	25	25	1	1	0000	1.00		1.000	UT	2000.000	2000.000
Y	0263	PRCH USP	16	20	1	1	1993	1.00		1.000	UT	800.000	800.000
Y	0166	CONC, FAVMT			1	1	2003	1.00		1.000	UT	300.000	300.000
Y	0070	CARPORUT UF			1	1	1993	1.00		1.000	UT	800.000	800.000

LAND	DESC	ZONE	ROAD	FRONT	DEPTH	FIELD	CK:	UNITS	UT	PRICE	ADJ UT PR	LAND VALUE
AE CODE	TOPO	UTIL	UD1	UD2	UD3	UD4	ADJUSTMENTS	60000.000	SF	.600	.28	16,920
Y 000100	SFR	RSF-2	0007	0002	0006							

L001 - 2 PLATTED LOTS + 30,000 SF.

28057

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF: Columbia

Inst:200912015017 Date:9/4/2009 Time:3:22 PM
DC,P.DeWitt Cason,Columbia County Page 1 of 1 B:1180 P:980

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

1. Description of Property: 170 SE Emma Dr - home/remodel
Lake City, FL 32055
2. General Description of Improvement: Remodel sun room
3. Owner Information:
 - a. Name and Address: Doris Godwin
170 SE Emma Dr, Lake City, FL 32055
 - b. Interest in Property: _____
 - c. Name and Address of Fee Simple Titleholder (if other than owner): _____
4. Contractor (name and address): Bryan Zecher Construction, Inc.
PO Box 815 Lake City, FL 32056
5. Surety:
 - a. Name and Address: _____
 - b. Amount of Bond: _____
6. Lender (name and address): _____
7. Persons within the State of Florida designated by owner upon whom notices or other documents may be served as provided by Florida Statutes 713.13(1)(a)(7): _____
8. In addition to himself, owner designates: _____
9. to receive a copy of the Lessor's Notice as provided in Florida Statutes 713.13(1)(b).
Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified): _____



Doris Godwin
Type Owner Name: _____

Type Owner Name: _____

Sworn to and subscribed before me this 4 day of September, 2009.

Personally Known X
Produced ID _____
Did/Did Not Take an Oath _____

Adrea M. Pitman
Type Notary's Name _____

Notary Public, State of Florida

Commission Expiry & Number: DD903082

June 28, 2013



COLUMBIA COUNTY

911 ADDRESSING / GIS DEPARTMENT

P. O. Box 1787, Lake City, FL 32056-1787
Telephone: (386) 758-1125 • Fax: (386) 758-1365 • Email: ron_cruft@columbiacountyfla.com



ADDRESS ASSIGNMENT DATA

The Columbia County Board of County Commissioners has passed Ordinance 2001-9, which provides for a uniform numbering system. A copy of this ordinance is available in the Clerk of Court records, located in the courthouse. This new numbering system will increase the efficiency of POLICE, FIRE AND EMERGENCY MEDICAL vehicles responding to calls within Columbia County by immediately identifying the location of the caller.

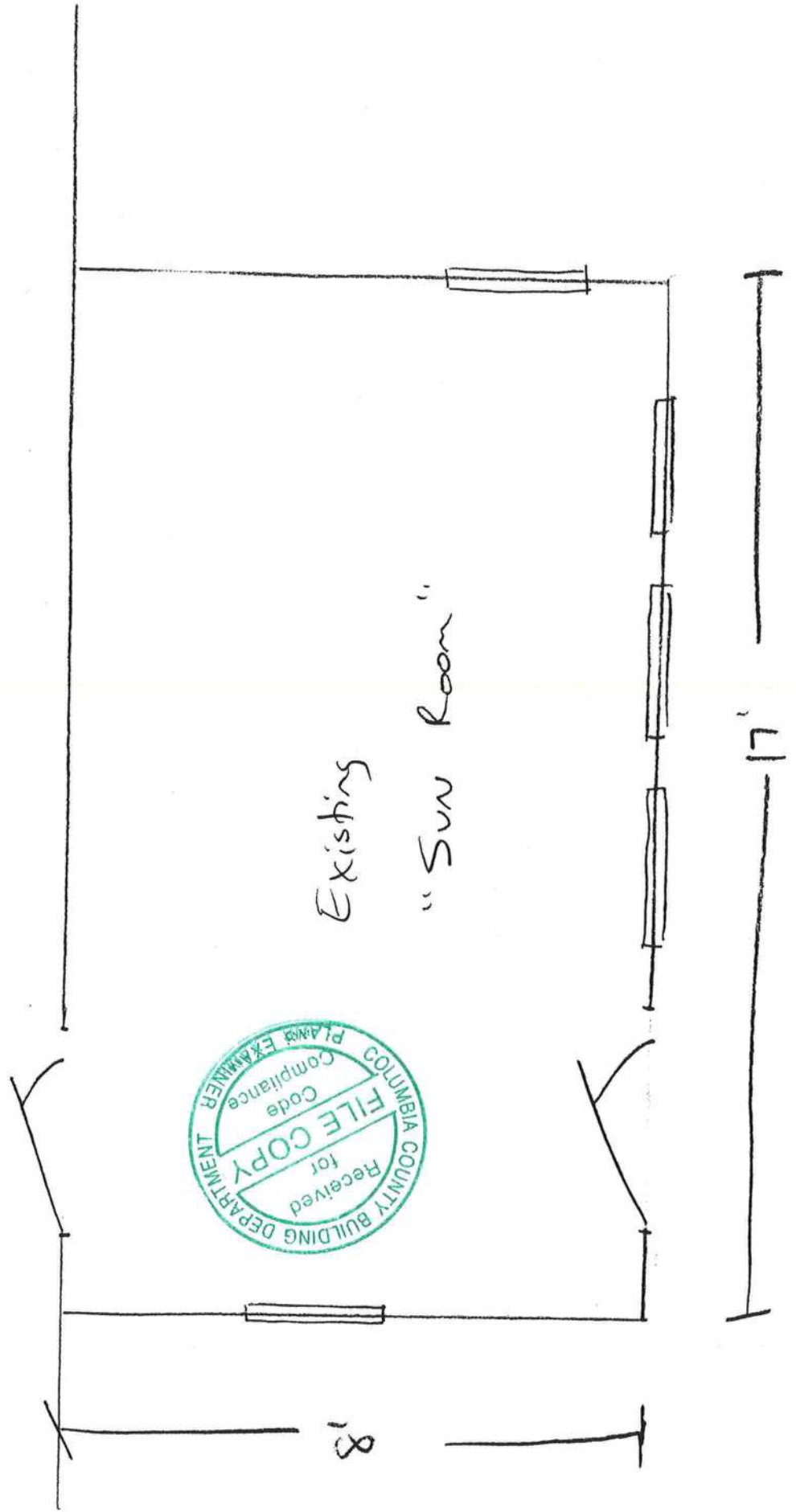
A Residential or Other Structure(s) on Parcel Number:
33-3S-17-06821-000

Address Assignment(s):
170 SE EMMA PL, LAKE CITY, FL, 32025

Any questions concerning this information should be referred to the Columbia County 911 Addressing / GIS Department at the address or telephone number above.

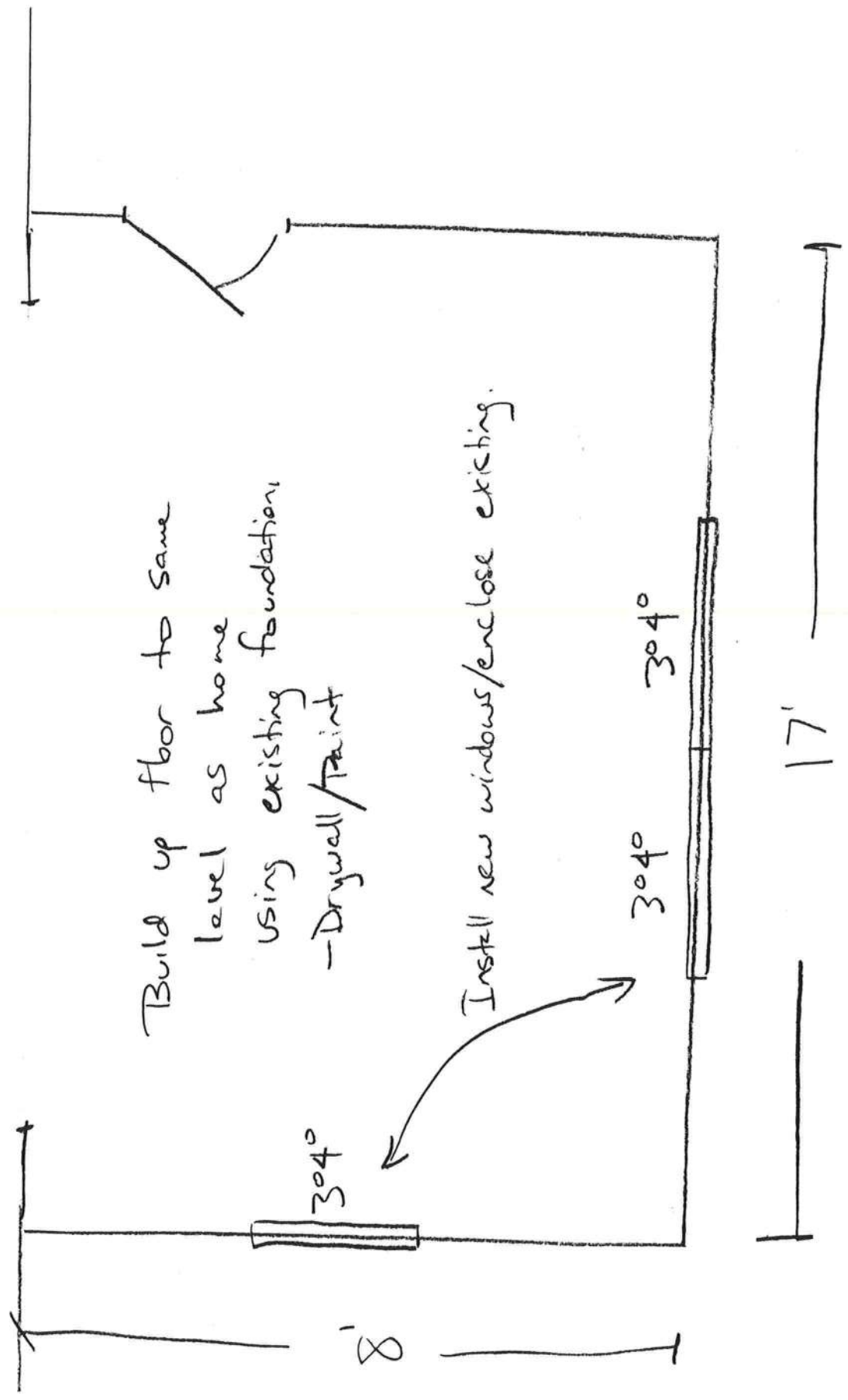
Doris Godwin
170 SE Emma Dr
Lake City, FL 32055

Existing Home



Doris Godwin
170 SE Emma Dr
Lake City, FL 32055

Existing Home





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

**MINIMUM PLAN REQUIREMENTS FOR THE
FLORIDA BUILDING CODE RESIDENTIAL 2007
ONE (1) AND TWO (2) FAMILY DWELLINGS**

ALL REQUIREMENTS ARE SUBJECT TO CHANGE

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

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

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

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

**GENERAL REQUIREMENTS:
APPLICANT - PLEASE CHECK ALL APPLICABLE BOXES BEFORE SUBMITTAL**

Items to Include-
Each Box shall be
Circled as
Applicable

		Yes	No	N/A
1	Two (2) complete sets of plans containing the following:			<input checked="" type="checkbox"/>
2	All drawings must be clear, concise, drawn to scale, details that are not used shall be marked void			
3	Condition space (Sq. Ft.) <i>136</i>			
	Total (Sq. Ft.) under roof <i>136</i>			

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

Site Plan information including:

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

Wind-load Engineering Summary, calculations and any details required

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

Elevations Drawing including:

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

Floor Plan including:

20	Dimensioned area plan showing rooms, attached garage, breeze ways, covered porches, deck, balconies	✓		
21	Raised floor surfaces located more than 30 inches above the floor or grade			✓
22	All exterior and interior shear walls indicated			✓
23	Shear wall opening shown (Windows, Doors and Garage doors)			✓
24	Emergency escape and rescue opening shown in each bedroom (net clear opening shown)			✓
25	Safety glazing of glass where needed			✓
26	Fireplaces types (gas appliance) (vented or non-vented) or wood burning with Hearth (see chapter 10 of FBCR)			✓
27	Stairs with dimensions (width, tread and riser and total run) details of guardrails, Handrails (see FBCR SECTION 311)			✓
28	Identify accessibility of bathroom (see FBCR SECTION 322)			✓

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

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

		YES	NO	N/A
29	Location of all load-bearing walls footings indicated as standard, monolithic, dimensions, size and type of reinforcing.			✓
30	All posts and/or column footing including size and reinforcing			✓
31	Any special support required by soil analysis such as piling.			✓
32	Assumed load-bearing value of soil _____ Pound Per Square Foot			✓
33	Location of horizontal and vertical steel, for foundation or walls (include # size and type)			✓

FBCR 506: CONCRETE SLAB ON GRADE

34	Show Vapor retarder (6mil. Polyethylene with joints lapped 6 inches and sealed)			✓
35	Show control joints, synthetic fiber reinforcement or welded fire fabric reinforcement and Supports			✓

FBCR 320: PROTECTION AGAINST TERMITES

36	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			✓
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FBCR 606: Masonry Walls and Stem walls (load bearing & shear Walls)

37	Show all materials making up walls, wall height, and Block size, mortar type			✓
38	Show all Lintel sizes, type, spans and tie-beam sizes and spacing of reinforcement			✓

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

Floor Framing System: First and/or second story

39	Floor truss package shall including layout and details, signed and sealed by Florida Registered Professional Engineer			✓
40	Show conventional floor joist type, size, span, spacing and attachment to load bearing walls, stem walls and/or piers			✓
41	Girder type, size and spacing to load bearing walls, stem wall and/or piers			✓
42	Attachment of joist to girder			✓
43	Wind load requirements where applicable			✓
44	Show required under-floor crawl space			✓
45	Show required amount of ventilation opening for under-floor spaces			✓
46	Show required covering of ventilation opening			✓
47	Show the required access opening to access to under-floor spaces			✓
	Show the sub-floor structural panel sheathing type, thickness and fastener schedule on the edges &			✓

48	intermediate of the areas structural panel sheathing			✓
49	Show Draftstopping, Fire caulking and Fire blocking			✓
50	Show fireproofing requirements for garages attached to living spaces, per FBCR section 309			✓
51	Provide live and dead load rating of floor framing systems (psf).			✓

FBCR CHAPTER 6 WOOD WALL FRAMING CONSTRUCTION

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

FBCR : ROOF SYSTEMS:

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

FBCR 802: Conventional Roof Framing Layout

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

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

69	Include all materials which will make up the roof decking, identification of structural panel sheathing, grade, thickness			
70	Show fastener Size and schedule for structural panel sheathing on the edges & intermediate areas			

FBCR ROOF ASSEMBLIES FRC Chapter 9

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

FBCR Chapter 11 Energy Efficiency Code for residential building

Residential construction shall comply with this code by using the following compliance methods in the FBCR chapter 11 Residential buildings compliance methods. *Two of the required forms are to be submitted, showing dimensions condition area equal to the total condition living space area*

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

HVAC information

77	Submit two copies of a Manual J sizing equipment or equivalent computation study			<input checked="" type="checkbox"/>
78	Exhaust fans locations in bathrooms			<input checked="" type="checkbox"/>
79	Show clothes dryer route and total run of exhaust duct			<input checked="" type="checkbox"/>

Plumbing Fixture layout shown

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

Private Potable Water

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

Electrical layout shown including

85	Switches, outlets/receptacles, lighting and all required GFCI outlets identified			<input checked="" type="checkbox"/>
86	Ceiling fans			<input checked="" type="checkbox"/>
87	Smoke detectors & Carbon dioxide detectors			<input checked="" type="checkbox"/>
88	Service panel, sub-panel, location(s) and total ampere ratings			<input checked="" type="checkbox"/>
89	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.			<input checked="" type="checkbox"/>

PRODUCT APPROVAL SPECIFICATION SHEET

Location: _____

Project Name: _____

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

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
A. EXTERIOR DOORS			
1. Swinging			
2. Sliding			
3. Sectional			
4. Roll up	N/A		
5. Automatic	N/A		
6. Other	—		
B. WINDOWS			
1. Single hung	Capital /		FL 675 1
2. Horizontal Slider	"		FL 685 1
3. Casement	—		
4. Double Hung	—		
5. Fixed	C /		FL 681 1
6. Awning	—		
7. Pass-through	—		
8. Projected	—		
9. Mullion	—		
10. Wind Breaker	—		
11. Dual Action	—		
12. Other			
C. PANEL WALL			
1. Siding	Hardy Plank		FL 889-R1
2. Soffits	Ashley Aluminum		FL 4968
3. EIFS	—		
4. Storefronts	—		
5. Curtain walls	—		
6. Wall louver	—		
7. Glass block	—		
8. Membrane	—		
9. Greenhouse	—		
10. Other			
D. ROOFING PRODUCTS			
1. Asphalt Shingles	ELK / CertainTeed		FL 728-R1 / FL 250-R1
2. Underlayments	Felt		FL 1814
3. Roofing Fasteners	Nails		ROM 3378
4. Non-structural Metal Rf	—		
5. Built-Up Roofing	—		
6. Modified Bitumen	—		
7. Single Ply Roofing Sys	—		
8. Roofing Tiles	—		
9. Roofing Insulation	—		
10. Waterproofing	—		
11. Wood shingles /shakes	—		
12. Roofing Slate	—		

Category/Subcategory (cont.)	Manufacturer	Product Description	Approval Number(s)
13. Liquid Applied Roof Sys	—		
14. Cements-Adhesives – Coatings	—		
15. Roof Tile Adhesive	—		
16. Spray Applied Polyurethane Roof	—		
17. Other			
SHUTTERS			
1. Accordion	—		
2. Bahama	—		
3. Storm Panels	—		
4. Colonial	—		
5. Roll-up	—		
6. Equipment	—		
7. Others			
SKYLIGHTS			
1. Skylight	—		
2. Other	—		
G. STRUCTURAL COMPONENTS			
1. Wood connector/anchor			
2. Truss plates			
3. Engineered lumber			
4. Railing	—		
5. Coolers-freezers	—		
6. Concrete Admixtures	—		
7. Material	—		
8. Insulation Forms	—		
9. Plastics	—		
10. Deck-Roof	OSB -		
11. Wall	OSB -		
12. Sheds	—		
13. Other			
H. NEW EXTERIOR ENVELOPE PRODUCTS			
1.			
2.			

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) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.

I understand these products may have to be removed if approval cannot be demonstrated during inspection

Contractor or Contractor's Authorized Agent Signature

Print Name

Date

Location

Permit # (FOR STAFF USE ONLY)